



AYURVEDIC MANAGEMENT OF TYPE II DIABETES MELLITUS W.S.R. TO PRAMEHA: A CASE STUDY

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ABSTRACT

Introduction: Modernization, inappropriate diet patterns, and stressful and sedentary lifestyles have resulted in the occurrence of various metabolic disorders. Diabetes Mellitus is one such disorder, the clinical condition resulting from increased blood sugar level due to abnormalities in insulin secretion, insulin action, or both, characterised by frequent and turbid urination and other features such as excessive thirst, hunger, and sugar in urine. As per Ayurveda, it can be correlated with **Prameha Vyadhi – Santarpana janya tridoshaja vyadhi**, whose cardinal symptom is “**prabhootavila mutrata**” i.e., frequent and excessive turbid urination. **Prevalence:** Its prevalence is 2.4% in the rural population and 11.6% in the urban population. The prevalence of Diabetes in India is currently reported to be around 13-15%, and by the year 2025, it is estimated that approximately 55 million Indians will have diabetes. It is a leading cause of morbidity and mortality all over the world. **Need of Study:** Modern medicine has evolved efficient treatment methods, successfully managing the condition. The treatment, though effective, has many side effects. It is in such a context that newer drugs with lesser side effects need to be explored, and it is in this direction, Ayurveda, with its vast and rich resource for herbal medicines, has a lot to offer in disease management. **Case Report:** A 48yrs old female patient visited Govt Ayurvedic Hospital in Bathinda on 24th August 2023 with chief complaints of increased frequency of micturition, excessive thirst and hunger, severe general weakness, fatigue, disturbed sleep, body ache, burning sensation of sole of feet, and excessive mental stress from last one year. Based on physical findings and investigations, the diagnosis of Prameha (Type II Diabetes

Mellitus) was made. The disease was managed with **Pramehahara aushadhi Mamajjaka ghana vati and Nisha Amalaki churna** along with strict diet management, lifestyle modifications (pathya aahara-vihaara), regular practice of yogasana and meditation. Regular follow-up visits at fifteen days were done for two months. **Results:** After two months of treatment, a significant response was observed, and the patient's blood glucose level was within normal limits. **Conclusion:** Santarpana janya tridoshaja vyadhi **Prameha** (Diabetes Mellitus Type II) can be well managed with Ayurvedic herbal medicines Mamajjaka ghana vati and Nisha Amalaki churna along with proper diet and lifestyle modifications and regular practice of yogasana and meditation.

Key words: Case Report, Prameha, Metabolic Disorder, Diabetes Mellitus Type II, Mamajjaka Ghana Vati, Nisha Amalaki Churna, Lifestyle, Diet, Pramehahara Aushadhi, Yogasana, Meditation.

INTRODUCTION

Diabetes mellitus is a chronic metabolic disorder characterised by elevated blood glucose levels due to abnormalities in insulin secretion, insulin action or both. The cardinal symptom of Diabetes Mellitus is frequent and turbid urination, along with other features as excessive thirst, hunger, and the presence of sugar in urine. If unchecked timely it may lead to severe damage to the heart, blood vessels, eyes, kidneys, nerves, and other vital organs of the body. The most common type observed among all the patients of Diabetes Mellitus is Type II. According to WHO, Diabetes Mellitus is a heterogenous metabolic disorder characterized by a common feature of hyperglycaemia with carbohydrate, fat, and protein metabolism disturbance. Its prevalence is 2.4% in the rural population and 11.6% in the urban population. The prevalence of Diabetes in India is currently reported to be around 13-15%, and by the year 2025, it is estimated that approximately 55 million Indians will

have diabetes. It is a leading cause of morbidity and mortality all over the world. As per Ayurveda, it can be correlated with **Prameha Vyadhi – Santarpana janya tridoshaja vyadhi**, whose cardinal symptom is “**prabhootavila mutrata**” i.e., frequent, and excessive turbid urination. As per Ayurvedic texts, complete aversion towards physical exercise, Excessive sleeping during the day and night, sedentary lifestyle, poor dietary habits, and over-indulgence in other Kapha Prakopaka Aahara Vihaara are the main causative factors in the pathogenesis of Prameha. All the three doshas are involved in the pathogenesis of Prameha but Bahudrava shleshma is predominant in this disease. Ten dushyas which get affected are Meda, Mamsa, Shukra, Kleda, Shonita, Vasa, Majja, Lasika, Rasa, and Ojas. Aggravated kapha dosha vitiates medas, mamsa and kleda of the body and accumulates in basti (Urinary Bladder), causing different types of Prameha.

Flow Chart of Pathogenesis of Prameha:



Samprapti Ghataka:

Dosha - Kapha Pradhana Tridosha

Dushya - Meda, Mamsa, Shukra, Kleda, Shonita, Vasa, Majja, Lasika, Rasa, and Ojas

Samutthana - Amashaya Samuttha

Adhishthana - Basti (Urinary Bladder)

Srotasa - Medovaha, Mutravaha, Udakavaha, Mamsavaha

Srotodushti - Atipravritti, Vimarga Gamana, Sanga

Agni-Agnimandya (Low Digestive & Metabolic Fire)

Sadhya-Asadhyata - Sadhya (if uncomplicated)

Need of Study:

Modern medicine has evolved efficient treatment methods, successfully managing the condition. However, the treatment, though effective, has many side effects. In this context, newer drugs with lesser side effects need to be explored, and in this direction, Ayurveda, with its vast and rich resource for herbal medicines, has a lot to offer in disease management.

Case Report: A 48-year-old female patient visited Govt—Ayurvedic Hospital in Bathinda on 24th August 2023.

Chief complaints: Increased frequency of micturition, Excessive Thirst and Hunger, severe general

weakness, Fatigue, Dryness of Mouth, especially at night, Disturbed Sleep, Bodyache, Burning Sensation of both soles of feet, and Excessive Mental Stress from the last year.

Past History: No history of hypertension, pulmonary TB, bronchial asthma, thyroid disorder, or any other major illness was found.

Family History: No family history of Diabetes Mellitus found.

Menstrual History: Menopause for five years.

Personal History:

Build - Average

Gait - Normal

Diet - Mixed (both veg & non-veg)

Appetite - Increased (Abhyaharan Shakti – Pravara, Jarana Shakti - Madhyama)

Bowel Habits - Regular

Micturition - Increased frequency of excessive turbid urination

Sleep - Disturbed Sleep (Habit of taking day sleep of 1-2 hrs.)

General Examination:

Prakriti - Kapha-Pittaja

Agni - Vishama

Koshtha - Madhyama
 Height - 5.3 feet (158 cm)
 Weight - 80kg
 BMI - 32
 Pulse Rate - 68/min
 BP - 130/85 mm of Hg
 Pallor - Absent
 Icterus - Absent
 Oedema - Absent
 Cyanosis - Absent
 Clubbing - Absent
 Lymphadenopathy - Absent
 Build - Average
 Gait - Normal

Systemic Examination:

CNS:

- Well-oriented to time, place and person
- Higher mental functions – Normal
- No abnormality detected

GIT:

- Abdominal Shape – Distended
- Palpation – Normal
- No abnormality detected

Respiratory System:

- Typical Vesicular Breath Sound heard
- No abnormality detected

CVS:

- Normal S1 S2 heard
- No abnormality detected

Musculoskeletal System:

Investigations:

Investigation (24/08/2023)	Findings
FBS	180mg/dl
RBS	220mg/dl
HbA1C	6.5%

Based on physical findings and investigations, the diagnosis of Prameha (Type II Diabetes Mellitus) was made.

Treatment Protocol:

- Pramehahara Aushadhi – Mamajjaka ghana vati in the dose of 2 tabs twice a day with lukewarm water before meals and

- SLR – Negative
- Gait – Normal
- No abnormality detected

Ashtasthana Pariksha:

- Nadi - Manda gati, 68/min
- Mutra - Increased frequency (8-10 times/day, 3-4 times/night), Excessive and Turbid (**prabhootavila mutrata**)
- Mala - Bowel evacuation once a day in the Morning
- Jihva - Ishat Lipta (mildly coated)
- Shabda - Prakrita (normal)
- Sparsha - Prakrita (normal)
- Drik - Prakrita (normal)
- Akriti - Sthula

Dashavidha Pariksha:

- Prakriti - Kapha-Pittaja
- Vikriti - Kapha Pradhana Tridoshaja Vyadhi
- Sara - Twak, Mamsa, Medo Sara
- Samhanana - Madhyama
- Satmya - Madhyama
- Satva - Madhyama
- Aahara Shakti - Abhyaharan Shakti – Pravara, Jarana Shakti – Madhyama
- Vyayama Shakti - Avara
- Pramana - Supramanita
- Vaya - Madhyama

- Nisha Amalaki churna in the dose of 3 gm twice a day with lukewarm water after meals

Both were prescribed orally along with strict diet management, lifestyle modifications (pathya Saharavihara), regular practice of yoga asana and meditation for 60 days (2 months).

Regular follow-up visits at fifteen days were done for two months.

Pathya Aahara Vihaara:

The role of Aahara and Vihaara is equally or even more important than medicines in controlling blood sugar levels and preventing complications from this disease.

Pathya Aahara: Following diet was advised to take -

Cereals: Yava-Barley (Chenopodium album), Godhooma - Wheat, Shyamaka, Kodrava, Bajara.

Pulses: Mainly beans- Mudga (Greengram), Chanaka (Bengal gram).

Vegetables: Tikta Shakas, Methika (Trigonella foenum-gracum), Nimba (Azadirachta indica), Karavella (Momordica charantia), Patola (Trichosanthes anguina), Rasona (Garlic), Udumbara (Ficus racemosa).

Fruits: Jambu (Syzygium cumini), Tala phala (Borassus flabellifer), Kharjura (Phoenix sylvestris), Bilva (Aegle marmelos).

Apathya Aahara: The following diet was advised to avoid: Fast foods, Junk foods, heavy fried foods, foods prepared from refined flours such as Maida, Sugary foods, Pishtanna (a highly carbohydrate-rich food), Overeating, Sauviraka (fermented gruel), Sura (beer), Buttermilk, Milk and other dairy products,

Assessment and Result:

• **Subjective Criteria:**

	Before Treatment	After Treatment			
Date	24/08/2023	07/09/2023	21/09/2023	05/10/2023	19/10/2023
Fatigue and Severe General Weakness	+++	+++	++	+	Nil
Excessive Nocturnal Micturition	++++	+++	++	++	+
Excessive Thirst	+++	+++	++	++	Nil
Excessive Hunger	+++	++	+	Nil	Nil
Disturbed Sleep	+++	+++	++	+	Nil
Stress	+++	+++	++	+	Nil

++++: Agonizing form of symptoms, +++: Severe form of symptoms, ++: Moderate form of symptoms, Nil: Absence of symptoms

Objective Criteria:

	Before Treatment	After Treatment			
Date	24/08/2023	07/09/2023	21/09/2023	05/10/2023	19/10/2023
FBS	180mg/dl	195mg/dl	160mg/dl	120mg/dl	88mg/dl
RBS	220mg/dl	230mg/dl	210mg/dl	170mg/dl	140mg/dl
HbA1C	6.5%	--	--	--	5.6%

Ghee, Jaggery, Foods processed with sours, Sugar-cane juice, meat of animals of marshy regions, etc.

Pathya Vihaara:

Yoga: Regular practice of Yogasana and breathing exercises (Pranayama) boosts metabolism in the body. So patient was advised to use common yogasana which are effective in Diabetes Mellitus to practice regularly, such as Padmasana, Shalabhasana, Mayurasana, Suryanamaskara, Dhanurasana etc., along with Anuloma-Viloma and Kapalabhati Pranayama. The patient was advised to maintain an active lifestyle, thereby regularly incorporating brisk walking, jogging, bicycling, etc., in their daily routine. **Meditation (Dhyana):** Regular meditation was advised to combat stress.

Apathya Vihaara:

An inactive and sedentary lifestyle and excessive sleep, especially in the daytime, were advised to be avoided.

DISCUSSION

As per Ayurveda, Prameha vyadhi is one among **Ashtamahagada** and also considered as **Agrya** among **Anushangi vyadhis**. Based on Ayurvedic Principles the disease can be treated bearing the following treatment principles in mind (Chikitsa Sidhanta):

- Nidana Parivarjana (Eradication of the causative factors)
- Samprapti Vighatana (Disintegration of the Pathogenesis)
- Lakshanika Chikitsa (Symptomatic treatment)

The effect of Ayurvedic Treatment was assessed based on observations of subjective and objective parameters, and it was found to be significant after 60 days. The disease was managed with **Pramehahara Aushadhi Mamajjaka ghana vati and Nisha Amalaki churna** along with strict diet management, lifestyle modifications (pathya aahara-vihaara), regular practice of yoga asana and meditation. In the Pathogenesis of Prameha Vyadhi, the Kapha and Pitta are the Main doshas, whereas the most critical dushyas are Medo dhatu and Kleda of the body. Hence, in its management, such drugs have to be selected which are working against Medo dhatu and Kleda of the body as well as having hypoglycaemic effects. Therefore, the drugs Mamajjaka ghana vati and Nisha Amalaki churna that fulfil the above criteria have been selected. The drugs of Mamajjaka ghana vati are having having Tikta - Katu rasa, Ushna Veerya and Laghu - Ruksha Guna, Katu vipaka and Kapha - Vatahara properties. Thus, Ushna Veerya and Tikta Rasa help to normalise the function of Jathragni and Dhatwagni, which in turn helps to form the Dhatus in proper proportion with Samyaka Gunas. Laghu, Ruksha Gunas help in the Shoshana of Bahudrava Shleshma and pacification of vitiated Medo Dhatu and Kleda of the body. Thus, once these factors are normalised in the body, they, in turn, make the path of Vata Dosha clear and normalise it, thereby stopping the depletion of vital Dhatus (tissues) in the body.

Nisha-Amalaki churna have been acting as **Pramehahara Aushadhi** and significantly reduced

the symptoms. *Nisha (Haridra) has Tikta and Katu Rasa, Katu Vipaka, Ushna Virya, and Kapha-Pittashamaka* properties. Panchrasayukta Amalaki has *Madhura Vipaka, Sheeta Virya* and *Tridoshashamaka* properties. Thus, it helps in pacifying *Kapha Dosha, Medo Dhatu* and *Kleda of the body* and due to their *Tridosha shamaka* property, they can alleviate all three *Doshas* in the body. Thus, the balanced approach of both **Pramehahara Aushadhis along with strict diet** management, lifestyle modifications (pathya aahara-vihaara), regular practice of yogasana and meditation can help in preventing the progression of hyperglycaemia by ensuring the normal functioning of Saadhaka Pitta and the preservation of Ojas thereby treating the disease Prameha (Type II Diabetes Mellitus) absolutely.

CONCLUSION

As per Ayurveda Type II Diabetes Mellitus can be correlated with **Prameha Vyadhi – Santarpana janya tridoshaja vyadhi**, whose cardinal symptom is “**prabhootavila mutrata**” i.e., frequent and excessive turbid urination. Modern medicine has evolved efficient methods of treatment, thereby achieving great success in managing the condition. The therapy, though effective, has many side effects. In such a context, newer drugs with lesser side effects need to be explored, and it is in this direction. With its vast and rich resource for herbal medicines, Ayurveda has a lot to offer in disease management. From the above Case Report, this may be assessed that Santarpana janya tridoshaja vyadhi **Prameha** (Diabetes Mellitus Type II) can be well managed with Ayurvedic herbal medicines Mamajjaka ghana vati and Nisha Amalaki churna along with proper diet and lifestyle modifications and regular practice of yogasana and meditation.

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