

An International Journal of Research in AYUSH and Allied Systems

Case Study

A CASE STUDY ON MANAGEMENT OF VATAJA PRAMEHA (MADHUMEHA) W.S.R. TO DIABETES MELLITUS TYPE II

Akshay Solanki^{1*}, Maya², Harish Bhakuni³

*1MD Scholar, ³Associate Professor, Dept of Kayachikitsa, National Institute of Ayuryeda, Jaipur, Rajasthan, India ²MD Scholar, Department of Agad tantra and vidhi vaidyak, National Institute of Ayurveda, Jaipur, Rajasthan, India.

ABSTRACT

Article History: Received: 19-10-2022 Revised: 16-11-2022 Accepted: 26-11-2022

KEYWORDS:

Article info

Madhumeha, Diabetes mellitus, Patolkaturohinyadi kashayam, Triphala gu<u>g</u>gulu, Madhumehari churna.

There has been a sharp rise in diseases that are life-threatening. The World Health Organization highlighted a number of illnesses, including metabolic and cardiovascular conditions, as contributing factors to India's high mortality rate. Madhumeha was listed among the eight major illnesses by Acharya Vagbhata. The metabolic syndrome includes diabetes. An imbalance between insulin sensitivity and insulin secretion causes Type II DM, also known as non-insulin-dependent diabetic mellitus (NIDDM). Increased predominance during the past three decades has put a financial strain on many emerging nations. Aim: to evaluate the contribution of Samshamana Karma to the management of Vataja Prameha w.s.r. to Diabetes Mellitus. Material and Method: A 41 years old male patient came to OPD No 7 of National Institute of Ayurveda, Jaipur, Rajasthan, on 23 May 2022 with a complain of Generalised weakness, Increase frequency of urination for one month. Intervention: We prescribed Patolkaturohinyadi Kashayam, Triphala Guggulu and Madhumehari Churna orally. Significant relief was found in sign and symptoms and blood sugar level after treatment. **Conclusion:** In the current case study, Ayurvedic oral medication was used to treat a Type II DM patient. The parameters under study were Prabhuta Mutrata, Daurbalya, Fasting Blood Sugar (FBS), Post prandial Blood Sugar (PP2BS), and Glycosylated Hb (HbA1C). After 3 months of treatment, we saw significant relief.

INTRODUCTION

From prehistoric past Ayurveda profiting as the oldest medical science ever since in the world. The main intent of Ayurveda is re-imposition, promotion and maintenance of positive health. The inappropriate imbalanced diet and desk-bound lifestyle are showing upward trend in India. This has led to debut of several health problems, among that diabetes mellitus is a monstrous disease considered as one of the arch enemies of human race. In Ayurvedic texts the given characteristic features of Madhumeha shows marked similarity with the syndrome of Type 2 Diabetes. It is Tridoshaj in origin with predominance of Kapha. According to Charak major causative factor (Nidana) of

Access this article online					
Quick Response Code					
■橋湯■	https://doi.org/10.47070/ayushdhara.v9i5.1085				
	Published by Mahadev Publications (Regd.) publication licensed under a Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International (CC BY-NC-SA 4.0)				
AYUSHDHARA September-October 2022 Vol 9					

Madhumeha are Madhura, Amla, Lavana Rasa dominant diet mentioned as 'Gramya Udaka Aanupa Rasa Payansi Dadhini'^[1] and lifestyle such as 'Aasya Sukham Swapna Sukham'^[2] are similar to the causes quoted as over eating, eating of large amount of carbohydrates mainly sugar rich substances, dairy products, practicing sedentary lifestyle, overweight in modern medical literature. All these factors described in different texts of Avurveda imply that lifestyle plays important role in progression of Madhumeha. Diabetes mellitus is a clinical syndrome characterised by hyperglycaemia caused by absolute or relative deficiency of insulin. Lack of insulin affects the metabolism of carbohydrate, protein and fat and can cause significant disturbance of water and electrolyte homeostasis, death may result from acute metabolic decompensation. Long standing metabolism derangement is associated with functional and structural changes in many organs particularly those of vascular system which lead to clinical complications of diabetes. Recent surveys indicate that diabetes now

affects a staggering 10-16% of urban population^[3] and 5-8% of rural population^[4] in India. Diabetes is likely to continue to be a leading cause of morbidity and mortality in the near future.

Case Report

Case History

A 41 years old male patient came to OPD No 7 of National Institute of Ayurveda, Jaipur, Rajasthan, on 23 May 2022 with a complain of generalised weakness, increase frequency of urination for one month. There is no history of dryness of mouth, bowel disturbances, chest pain, joint pain, unhealed ulcer etc. He was diagnosed as type 2 DM two months back and he had taken some herbal medicine without consult to doctor before coming to our hospital but not get satisfactory result. Apart from this he didn't suffer from other medical problems like HTN, PTB, asthma, thyroid disorder etc. Routine blood investigation was carried out. FBS was 140.8 mg/dl, PPBS was 241.4mg/dl and HBA1C score was 7.3%.

Past History

• No major illness

General Examination

- Pulse: 78/min
- **BP:** 130/80 mm of Hg
- Weight: 76kg
- Prakruti: Vata kaphaja
- Agni: Vishama

• Kostha: Krura

- Samprapti Ghatak
 - Dosha: Kapha
 - Dushya: Meda, Mutra
 - Strots: Medovaha, Mutravaha, Annavaha
 - Udbhavasthan: Pakvashaya samutthaja
 - Adhishthan: Mutravaha strotas
 - Upadrava: Nil
 - Vyadhimarga: Abhyantar

Diagnosis

• Vataj Prameha (Madhumeha), Navina avastha (Type 2 DM)

Subjective criteria

1) Prabhootamutrata

- Grade 0 Upto 5 times in day hours 0-1 time at night
- Grade 1- 6-7 times in day hours and 2-3 times at night
- Grade 2- 8-9 times in day hours and 4-5 times at night
- Grade 3- More than or equal to 10 times in day and more than 5 times at night

2) Daurbalyanubhuti

- Grade 0 Ability to perform routine activity with no feeling of exhaustion
- Grade 1 Unable to perform routine activity without feeling of exhaustion
- Grade 2– Feeling of exhaustion even on accustomed work
- Grade 3 Exhaustion even at rest

Objective Criteria

- 1. FBS
- 2. PPBS
- 3. HbA1c

Treatment Plan

- Drug: Patolkaturohinyadi Kashayam
- Dose: 20ml two times a day
- Mode of administration: Orally
- **Duration of treatment:** 30 days (23/05/22 to 23/06/22)
- Anupana: Koshna jala (Lukewarm water)
- **Drug:** Triphala Guggulu
- **Dose:** 1000mg two times a day (4 tablet BD)
- Mode of administration: orally
- **Duration of treatment:** 30 days (23/05/22 to 23/06/22)
- Anupana: Koshna jala (Lukewarm water)
- Drug: Madhumehari Churna
- **Dose:** 6gm two times a day
- Mode of administration: orally
- **Duration of treatment:** 60 days (23/06/22 to 23/08/22)
- Anupana: Koshna jala (Lukewarm water)

S. No.	Symptoms	Before Treatment (23/05/22)	F1-30 Days (03/07/22)	F2-90 Days (20/08/22) After Treatment		
1.	Prabhootmutrata	3	1	1		
2.	Daurbalyanubhuti	2	1	1		
Table 2: Effect on objective parameters (Blood Sugar)						

S. No.	Investigation	Before Treatment (23/05/22)	F1- 30 Days (03/07/22)	F2 - 90 Days (20/08/22) After Treatment
1.	Fasting blood sugar	140.8 mg/dl	90.2 mg/dl	84.60 mg/dl
2.	Post prandial blood sugar	241.4 mg/dl	76 mg/dl	135.90 mg/dl
3.	HbA1c	7.3%	NA	5.60%

AYUSHDHARA | September-October 2022 | Vol 9 | Issue 5

Table 1: Effect on Subjective Parameters

This observation shows that Ayurvedic treatment shows significant result in management of *Madhumeha*.

DISCUSSION

Avurveda the science of life is having the great heritage of healing diseases. According to Ayurveda, Samprapti of Madhumeha occurs due to Strotodusthi mainly Mutravaha Strotas caused by vitiation of all doshas mainly Bahudrava Shleshma and it shows Prabhut Avil Mutrata^[5]. Patola Katurohinvadi *Kashavam* is a combination of 6 herbal ingredients^[6] viz. Patola (Trichosanthes dioica), Katurohini Raktachanda (Picrorhiza kurroa), (Pterocarpus santalinus), Murva (Marsdenia tenacissima), Guduchi (Tinospora cordifolia), Patha (Cissampelos pareira). Patola Katurohinyadi Kashayam is a very potent polyherbal formulation that effectively reduces the symptoms of *Prabhootmutrata* and *Daurbalyanubhuti* observed in patients suffering from Madhumeha. The trial drug, Triphala guggulu contains Triphala (an equal quantity combination of Haritaki (Terminalia chebula), Vibhitaki (Terminalia bellirica), Amalaki (Emblica officinalis), Pippali (Piper longum) and Guggulu (Commiphora wightii). Among many herbs, Triphala- the three myrobalans (Terminalia chebula, *Terminalia bellirica, Emblica officinalis*) is a suggestive combination that possesses hypoglycaemic qualities.^[7] Madhumehari Churna contains Jambu, Amra. Karvellaka, Mesasrngi, Methika, Bilva, Nimba, Sunthi, Satapushpa, Sonamukh, Bala and Babbula. Most of the ingrediants of Madhumehari churna have kashaya and tikta rasa property. Due to Kashaya and Tikta rasa, it helps to reduce the blood sugar level. Churna pacifies the symptoms of Kapha due to Kashaya and Tikta rasa and also pacifies the symptoms of Pitta.[8] As the number of diabetic patients is growing in India as well as worldwide, numbers of patients suffering from complications will also rise. Hence it is high time to improvise our treatment plans and help to answer complicated situation. It is an observation in single case and more studies in this direction would help in establishing Ayurvedic treatment in this condition. After 3 months of treatment, patient showed significant relief in symptoms and drop down was seen in blood sugar levels.

Cite this article as:

Akshay Solanki, Maya, Harish Bhakuni. A Case Study on Management of Vataja Prameha (Madhumeha) w.s.r. to Diabetes Mellitus Type II. AYUSHDHARA, 2022;9(5):105-107.

https://doi.org/10.47070/ayushdhara.v9i5.1085 Source of support: Nil, Conflict of interest: None Declared

Disclaimer: AYUSHDHARA is solely owned by Mahadev Publications - A non-profit publications, dedicated to publish quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. AYUSHDHARA cannot accept any responsibility or liability for the articles content which are published. The views expressed in articles by our contributing authors are not necessarily those of AYUSHDHARA editor or editorial board members.

AYUSHDHARA | September-October 2022 | Vol 9 | Issue 5

CONCLUSION

From the results of the current study, it can be inferred that *Shamana Aushadhi*, together with the right dietary patterns and lifestyle choices, is the best way to control *Madhumeha* according to Ayurveda. The comprehensive strategy of Ayurveda, which makes use of the aforementioned notion, will unquestionably pay off in terms of not only controlling blood sugar levels but also avoiding difficulties brought on by *Madhumeha*.

REFERENCES

- 1. Charaka Samhita with commentary of Chakrapanidatta, Edited by Vaidya Yadaavaji Trikamaji Acharya, Chaukhamba Sanskrit Samsthana, Varanasi, Chikitsa Sthana 6/4.
- 2. Charaka Samhita with commentary of Chakrapanidatta, Edited by Vaidya Yadaavaji Trikamaji Acharya, Chaukhamba Sanskrit Samsthana, Varanasi, Chikitsa Sthana 6/4.
- 3. Wild S, Roglic G, Green A, Sicree R, King H. Global prevalence of diabetes: Estimates for the year 2000 and projections for 2030. Diabetes Care. 2004; 27: 1047–53.
- 4. Pradeepa R, Mohan V. The changing scenario of the diabetes epidemic: Implications for India. Indian J Med Res. 2002; 116: 121–32.
- 5. Charaka Samhita (elaborated by Charaka and Dridhabala, edited by vd. Jadhavji T Acharya, with Ayurved- Dipika Commentary by Chakrapanidatta) Nidanasthana, Chapter 4/38, 2nd edition, Published by Chaukhambha Surbharati Prakashana, Varanasi: 2005; 212.
- 6. Hari Sadashiv Shastri Paradakar. Ashtang Hridayam Sutrasthan 15/15. Chaukhambha Surbharati Prakashan; 2002, p. 235.
- Sowmya. S. Rajan and Seema Antony, "Hypoglycemic effect of triphala on selected non-insulin dependent Diabetes mellitus subjects", Ancient science of life, March. 2008; Volume 17(3): 45-49.
- 8. Dr. Pradeep Saroj, Dr. Upasana Mishra, Dr. K. L. Meena, Dr. Mahendra Kaswan and Dr. Rameshwar Lal, "A case study to evaluate the efficacy of Madhumehari Churna in management of *Madhumeha* (type 2 diabetes mellitus)", World journal of pharmacy and pharmaceutical sciences, December. 2019; Volume 9: 1132

MD Scholar

Jaipur.

Email:

*Address for correspondence

National Institute of Ayurveda,

akshaysolanki171997@gmail.com

Dr. Akshay Solanki

Dept of Kayachikitsa,