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An Ayurvedic Management Of Madhumeha With Special Reference To Diabetes Mellitus Type 2 – A Case Study.

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Abstract: Diabetes Mellitus is a chronic metabolic disease of multifaceted etiology prevalent all over the world. However, in the recent years the prevalence of Diabetes is on rise, more upsetting in developed countries. It is a leading cause of morbidity and mortality all over the world. The global prevalence of Diabetes among adults over 18 years of age has risen from 4.7% in 1980 to 8.5% in 2014. In India cases of Diabetes Mellitus has shown surprisingly higher susceptibility which is a matter of great concern. 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 be diabetic. In modern era due to total sedentary life, having a lot of junk foods and weight gaining these are the main factors which are responsible for causing Diabetes mellitus. It can be correlated with Madhumeha which is one of twenty types of *Prameha* in Ayurvedic treatises.

Key words: Diabetes Mellitus, *Madhumeha*, *Nidana Parivarjana*

INTRODUCTION

Madhumeha has been described widely in many ancient Ayurved Samhitas. It is one of the sub types of Vataja Prameha. Acharya Vagbhata describes Prameha as frequent and copious urine with turbidity i.e. Prabhutavilmutrata[1]. He also added that Prameha if left untreated leads to Madhumeha[2].

Earlier, the diagnosis of Madhumeha was done on the basis of symptoms like Mutre abhidhavanti pipalikascha (ants clings to urine), Mukhmadhurya (sweet taste of mouth) etc. But nowadays with the help of diagnostic criteria like HBA1C, BSL levels, glucose tolerance test, fasting insulin etc. early diagnosis of Madhumeha is made very easy.

This is the century of the lifestyle disorders and among them Diabetes Mellitus is most predominant. On the basis of its symptomatology, *Madhumeha* can be correlated to the features of Type II Diabetes Mellitus. Though *Madhumeha* is a disease known since ancient times to the mankind, its upsurge is quite alarming.

Diabetes Mellitus is a long term metabolic disorder that is characterized by high blood sugar, insulin resistance and relative lack of insulin[3].

Clinical diagnosis of DM is made on the basis of symptoms like frequent urination, increased thirst, increase hunger, tingling, numbness, weakness, recurrent infections and in severe cases drowsiness etc^[4]. If left untreated, Diabetes can cause many complications. Acute complications can include diabetes ketoacidosis, hyperosmolar glycemic state or coma. Serious long term complications include cardio vascular diseases, stroke, chronic kidney disease, foot ulcers and damage to the eyes. It arises because either the pancreas is unable to produce enough insulin or the cells of the body not responding properly to the insulin produced [5].

Oral anti diabetic drugs have been used for more than five decades in the management of Diabetes. Insulin is one of the oldest best studied and most effective in the management of diabetes, but requires daily multiple pricking with risk of sudden hypoglycemia ^[6] But these medications have limited role in treating the disease as these drugs do not correct the basic pathology. They treat only hyperglycemia, which is just a sign. These drugs cannot prevent the further progress of disease and diabetes may lands into life threatening complications despite of good bloods sugar control.

The Ayurvedic classics describe a comprehensive concept of the pathogenesis of Diabetes Mellitus marked with depletion of Agni, disturbance in Fat (Meda) metabolism and lowering of immune system (Ojas). Promotion of Agni and Ojas and correction of Medas seems to be the principle trio of cure approach in this disease along with modified diet and lifestyle. In context of Ojas, Acharaya Charaka also named Madhumehas Ojomeha in Chikitsa Sthana. In the present era people are having total sedentary life, having a lot of junk foods and weight gaining these is the main factors which are responsible for causing diabetes.

MATERIALS AND METHOD

CASE DESCRIPTION- A 58 yrs male patient having weight 88 kg came to OPD.

Chief complaints -

- Weight gain since 1 month
- Polyuria
- Polydipsia
- Tingling numbness in lower limbs All these symptoms since 10 days and
- Generalized weakness since 4 days.

Past History - No any past medical history.

Family history – No any family history of DM or HTN

Drug history – Not on any regular medications.

Addiction history – Tobacco chewer, smokes cigarettes daily, occasional alcoholic since 8 yrs.

Physical Examination

- Weight 88 kg
- Height 156 cm
- BMI 32.9
- P=82/min
- BP = 130/80 mmHg
- RS = B/L clear
- CVS = S1S2 normal
- CNS = Conscious oriented
- P/A = Umbilicus centrally placed, soft, non-tenderness, no organomegaly

No other significant findings.



Ashtavidh Pariksha -

- Nadi Vata pittaj
- Mala Prakrut
- Mutra Aniyantrit, Naktamutrata
- Jivha Sama
- Shabda Spashta
- Sparsha anushnasheet
- Drik dhusar
- Akriti sthool

Dashavidh Pariksha -

- Dushya rasa, rakta, mamsa, meda, shukra, oja, ambu, vasa, lasika.
- Desh Sadharan
- Bala hina
- Kala Sharad
- Anala Samyak
- Prakriti kapha pitta
- Vaya madhyam
- Satva madhyam
- Satmya madhyam
- Ahar mamsahara

Investigations

Patient's reports	Before Treatment
BSL Fasting	168.2 mg/dl
BSL Post prandial	200 mg/dl
HbA1C	8.9 %

TREATMENTPLAN-

Patient received orally

- Chandraprabha Vati- 500 mg twice a day before food.
- Dhatri Nisha Vati- 500 mg twice a day before food.

Patient did not take any allopathy medication for diabetes.

Treatment Outcome

After starting the treatment of *Ayurvedic* oral medicine his symptoms like Polyuria, nocturia, polydipsia tingling numbness reduced over a course of time.

After the treatment blood reports showed significant result

Patient's reports	After Treatment
BSL – F	104 mg/dl
BSL –PP	110.4 mg/dl
HbA1C	6.2 %

Discussion

Madhumeha has been described widely in many ancient Ayurved Samhitas. It is one of the sub types of Vataja Prameha. Acharya Vagbhata describes Prameha as frequent and copious urine with turbidity i.e. Prabhutavilmutrata .He also added that Prameha if left untreated leads to Madhumeha.

Earlier, the diagnosis of *Madhumeha* was done on the basis of symptoms like *Mutreabhidhavantipipalikascha* (ants clings to urine), *Mukhmadhurya* (sweet taste of mouth) etc. But now a days with the help of diagnostic criteria like HbA1C, BSL levels, glucose tolerance test, fasting insulin etc. early diagnosis of *Madhumeha* is mad every easy.

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Patient received Chandraprabha Vati which reduces Kapha, Pitta, Dhatushaithilya, Kleda, it acts as Rasayana for Mutravaha Strotasa and have Pramehaghna property. These compounds may also increase insulin level in the body. Dhatri Nisha Vati contains Amalaki, Haridra, Patol, Sariva, Musta, Patha, Kutaki and Shuddha Guggul.

Amalaki, have Rasayana properties, hence was helpful to Madhumehi patients to overcome daurbalya by tissue nourishment. It have Kledashoshaka and Kledanashaka properties which will help relieve Prabhutamutrata, which is the cardinal symptom of Madhumeha. Haridra due to its Tikta-Katu Rasa, Ushna Veerya, Katu Vipaka and Laghu, Ruksha Gunas removes blockages in the blood vessels hence making the circulation of blood and nutrients easy. Haridra comes under Kushthaghna group. The circulating glucose is broken down by haridra and it further facilitates the absorption of free glucose by cells due to its Srotoshodhana Karma and reduces Dushit Pitta and Kapha facilitating free movement of Vata^[8] The drug Guggulu is having Ushna Virya, Katu Vipaka, having Tikta, Katu, Kashaya Rasa which helps to reduces Kaphadosha, acts as Medohara and Kledanashaka.

According to *Bhavprakasha Samhita Patol* also plays major role in *Srotoshodhana* being *Sukhakar Virechana*. *Musta* is widely used in *Ayurveda*, it has *Katu*, *Tikta* and *Kashaya Rasa*. *Sita Veerya*, *Katu Vipaka* and *Laghu*, *Ruksha Gunas*. It is *Kapha-pittahara Dipana*, *Pachana*. *Patha* due to its *Tikta Rasa*, *Katu Vipaka*, *Laghu* and *Tikshna Guna Kutki* is *Pradhana Dravya* in *Bhedana*, with this property

Kutaki plays major role in Srotoshodhana. It helps to expel vitiated Kapha, Kleda and accumulated fluid in body through Purisha

Conclusion –

In the present study of Madhumeha, according to the above details it is observed that both the drugs i.e. Chandraprabha Vati and Dhatri Nisha Vati shows significant relief in reducing all symptoms of Madhumeha.

The effect of both the drugs is significant for both subjective and objective criteria respectively. It is concluded that the drugs could reduce the symptoms by normalizing the Vata Dosha, balancing the Kapha Dosha and by breaking Samprapti of Madhumeha. Significant relief can be achieved in patient of diabetes mellitus by applying principles of diagnosis and treatment of Madhumeha.

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