

Review Article

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Diabetes Mellitus: An Ayurvedic View

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Abstract

Diabetes Mellitus refers to a group of common metabolic disorders that share the phenotype of hyperglycemia. Several distinct types of DM are caused by a complex interaction of genetics and environmental factors. Depending on the aetiology of the DM factors contributing to hyperglycemia include reduced insulin secretion, decreased glucose utilization, and increased glucose production. Diabetes is known as *Prameha*, which has been discussed in Ayurveda since antiquity. *Caraka* has given exhaustive description of the disease *Prameha* which ultimately progresses towards *Madhumeha* or the sweetness of urine in addition to Polyurea.

Keywords: Diabetes Mellitus, Hyperglycemia, Prameha.

INTRODUCTION

As of 2014, an estimated 387 million people have diabetes worldwide, with type-2 diabetes making up about 90% of the cases. This is equal to 8.3% of the adult population, with equal rates in both women and men. In the years 2012 to 2014, diabetes is estimated to have resulted in 1.5 to 4.9 million deaths per year. The causes of DM-2 are comparable to the disease entity *Prameha/Madhumeha* in *Ayurveda*. The *Ayurvedic* texts reflect two major categories of *Prameha* 1. *Sahaja Prameha* 2. *Apathyanimittaja Prameha*, out of these two, *Apathyanimittaja Prameha* is closely resemblance with the contemporary concepts of Type-2 Diabetes mellitus. On this basis, *Ayurveda* has described *Sthula Pramehi*, which clearly corresponds to the current concepts of obese and its role in the genesis of type-2 Diabetes mellitus.

MATERIALS

All the description related to Prameha available in Caraka Samhita and Sushruta samhita is collected and reviewed. *Prameha* has been described eloquently and elaborately in *Caraka Samhita* (C.S.Ci.6). In *Sushruta Samhita* it is found in *Nidana Sthana* sixth chapter and in *Cikitsa Sthana's* 11th, 12th and 13th chapter. While *Madhavakara* describes it in its 33rd chapter, which is *Prameha Nidana*.

Etymology of Prameha

The word Prameha consists of two words i.e. *Pra* (upsarga-prefix) and '*Meha*'. *Meha* is derived from the root '*Mih Secane*' meaning watering with reference to disease of human body. Excessive quantity and frequency is indicated by the prefix *Pra*. Therefore the world *Prameha* means passing of urine profusely both in quantity and frequency.

Definition of Prameha

Acarya Vagbhata descirbes Prameha as frequent and copious urine with turbidity i.e. PrabhutAvila Mutrata.

Classification of *Prameha*

Twenty types of Prameha have been described in Ayurveda:

i. Kaphaja Prameha	-	10
ii. Pittaja Prameha -		06
iii. VÁtaja Prameha	-	04

Types of Prameha according to different texts

	Types	Caraka	Sushruta	Vagbhata
a.	Kaphaja	1. Udakameha	Udakameha	Udakameha
		2. Iksuvalikarasameha	Iksuvalikameha	Iksumeha
		3. Sandrameha	Sandrameha	Sandrameha
		4. Sandra	_	_
		Prasadameha		
		5. Sukla meha	Pistameha	Pistaameha
		6. Sukra meha	Sukrameha	Sukrameha
		7. Sitameha	_	Sitameha
		8. Sikatameha	Sikatameha	Sikatameha
		9. Sanairmeha	Sanairmeha	Sanairmeha
		10. Alalameha	_	Lalameha
		_	Surameha	Surameha
		_	Lavanameha	_
		_	Phenameha	_
b.	Pittaja	1. Ksudrameha	Ksudrameha	Ksudrameha
		2. Kalameha	-	Kalameha
		3. Nilameha	Nilameha	Nilameha
		4. Lohitameha	Sonitameha	Raktameha
		5. MÁanjisthameha	Manjisthameha	Mañjisthameha
		6. Haridrameha	Haridrameha	Haridrameha
		_	Amlameha	_
c.	<i>Vata</i> ja	1. Vasameha	Vasameha	Vasameha
		2. Majjameha	Sarpimeha	Majjameha
		3. Hastimeha	Hastimeha	Hastimeha
		4. Madhumeha or	Ksaudrameha	Madhumeha
		Ojomeha		

Aetiological classification

On the basis of aetiology, *Sushruta* has mentioned clearly two types of *Prameha*. One is *Sahaja* (hereditary) another is *Apathyanimittaja* (Acquired). *Acarya Bhela* has named them as – *Prakétaja* and *Svakétaja Prameha*.

a. *Sahaja* : *Sahaja Prameha* occurs as a result of *Bija dosa* i.e. genetic origin. While describing prognosis, *Acarya Caraka* has narrated that *Jatapramehi* is incurable.

b. *Apathyanimittaja* : It occurs due to unwholesome À*hara* & *Vihara*. (Faulty diet & life style errors)

Prognostic classification

Sadhya:Kaphaja, Sthula, Apathyanimittaja, New casewithout complications, Pittaja in which Medodhatu not highly vitiated.Yapya:Pittaja PramehaAsadhya:Vataja, Jatapramehi

ETIOLOGY

The general etiological factors of *Prameha* are elaborately mentioned in *Ayurvedic* classics. For convenience, aetiological factors can be broadly classified into *Sahaja* and *Apathyanimittaja*.

Sahaja Nidana

In addition to other factors, the classics have also accepted the concept of hereditary factor as a cause of *Prameha.*. *Caraka* has mentioned that overindulgence of *Madhura rasa* by mother during pregnancy is likely to induce *Prameha*.

Apathyanimittaja

Hayanaka, Yavaka, Cinaka, Uddalaka etc. in newly cultivated form, Consumption of new pulses like *Harenu* and *Masa* with *Ghrita,Guda* and *Iksu vaikrita* preparation, milk, fresh milk, *Mandaka dadhi* and all other materials which increase *Kapha* ,Lack of exercise, Laziness, Excessive sleep during day, alcohol consumption etc.

Clinical features of Prameha

The *Rupa* described in *Ayurveda* includes both signs and symptoms. These can be categorized under following head:

- 1. General features of *Prameha*.
- 2. Premonitory features of Prameha.
- 3. Specific symptomatology of Prameha

1. General features of Prameha

a. Urine Characteristics:

Prabhutamutrata : This cardinal feature described by all *Àcharyas*. *Vagbhata* mentioned *Prameha* as the disease of *Mutratipravtija* (*A.H.Ni* 9/40) i.e. patient voids more urine both in quantity and frequency. *Gayadasa* on (*Su. Ni.* 6/6) opines that this excess urine quantity is because of liquification of the *Dusyas* and their amalgamation.

Àvilamutrata : Patient voids turbid urine. According to *Gayadasa* and *Dalhana*, this turbidity of urine is due to the nexus between *Mutra*, *Dusya* and *Dosa*. (*Su.Ni*. 6/6)

Kasyapa mentioned following symptoms of *Prameha* to be observed in pediatric patients (*Ka. Su. 25/22*).

- Akasmata Mutranirgama: Child excretes urine suddenly with no intention.
- Maksika Akaranta : Flies get attracted towards the urine.
- *Sveta and Ghana Mutrata* : Child excretes urine having Sveta colour and solid consistency i.e. turbidity.

b. Associated signs and symptoms

Before propounding the treatment of *Prameha*, *Àcharya Sushruta in Chikitsa sthana* asserted *two* type of *Prameha* as follows:

Sahaja Pramehi

- *Krisa* (Asthenic)
- Rauksha (Dry body)
- Alpashi (consumes less food)
- Bahu Pipasa (Voracious thirst)
- Parisaranasila (Restless always desires to wander)

Apathyanimittaja

- Sthula (Obese)
- Bahuasi (Voracious eater)
- *Snigdha* (Unctuous body texture)
- Sayyasanasvapnasila (Like to sit down & sleep always)

2. Premonitory features of Prameha

According to *Sushruta* the person should be diagnosed as *Pramehi* when complete or partial premonitory symptoms of *Prameha* accompanied by polyuria (*Prvrittamutramatyartham*) get manifested (*Su.Ni.6/22-23*). In this context, *Gayadasa* opined that in this disease all prodromal symptoms get converted into *Rupa* due to specific nature of disease i.e. *Vyadhi Prabhava*.

3. Specific Symptomatology of Prameha

This includes the physio-chemical characteristics of urine of twenty types of *Prameha*, which is based on specific interactions of *Dusya* and *Dosa*. Further categorized into three major head of *Vataja*, *Pittaja*, and *Kaphaja Prameha*. The clinical features are summarized in a given table.

Clinical features of Kaphaja Prameha

Name	Characteristics	
Udakameha	Individual passes large quantity of water like urine, which is transparent, white, cold and without any smell.	
Ikshuvalikarasameha	Urine like sugarcane juice and extremely sweet, cold and slight slimy and turbid.	
Sandrameha	Precipitation in the urine, which is deposited in the pot when kept for sometime. Urine is turbid and thick.	
Sandraprasadameha/Surameha	Urine is partially viscous and partially clear when kept overnight. <i>Surameha</i> means alcoholic smell in the urine.	
Suklameha / Pistameha	Urine seems to be mixed with some paste.	
Sukrameha	Urine passed mixing along with semen.	
SÍtameha	Cold, sweet and increased quantity of urine with increased frequency.	
Siktameha	Urine passed with some particles.	
Sanairmeha	Quantity of urine is small and passed with difficulty and slowly.	
Alalameha / Lalameha	Urine is slimy like <i>Kapha</i> and seems as it full of threads.	

Clinical features of Paittika Prameha:

Name	Characteristics
Ksharameha	Smell, colour, taste and touch of the urine is as
	like alkali.
Kálameha	Blackish urination.
Nílameha	Bluish urination.
Lohitameha/Raktameha	Colour of urine is reddish, having smell of
	fresh blood and salty taste.
Mañjisthameha	Colour of urine is like decoction of
	Mañjisthawaha and smell like of raw flesh and
	passes frequently.
Haridrameha	Colour of urine is like decoction of Haridra
	(yellow) and taste pungent accompanied with
	burning sensation.

Clinical features of Vatika Prameha

Name	Characteristics
Vasameha	Patient frequently passes urine mixed with fat (<i>vasa</i>)
Majja meha, Sarpimeha	Patient frequently passes urine mixed with bone marrow like substance.
Hastimeha	Large quantity of urine passes as like in elephant.
Madhumeha, Ksaudrameha	Urine passes sweet, astringent like honey.

General pathogenesis of Prameha

General pathogenesis of *Prameha* is described elaborately by *Caraka* in *Nidana sthana* (*Ca. Ni. 4/8*). Although *Prameha* is a *Tridosika* disease but initially it starts with derangement of *Kapha Dosa*. Prolonged and excess use of *Kapha Prakopaka Ahara-Vihara* leads to vitiation of *Kapha*. The vitiated *Kapha* (*Bahudrava Kapha*) have basic similarity to characteristics of *Meda*, both interact each other and flows with loose *Medas* in the system. During the course, the vitiated *Kapha* further interact with *Mamsa* and *Kleda*. The association with *Mamsa* produces *Prameha Pidika*. The association with *Kleda* converts the *Kleda* in to *Mutra* and the vitiated *Meda* and *Kleda* obstruct the opening of *Mutravaha Srotas*. They stay remain for some time and this retention for considerable duration causes *Kaphaja* type of *Prameha*.

According to *Caraka*, *Kaphaja* and *Paittika Prameha* follow the same course except with only one difference that *Pitta* is predominant in place of *Kapha*.

Prameha Upadrava (Complications)

1. General Complications

Trishna, Atisara, Daha, Daurbalya, Arocaka, Avipaka, Putimaïsa pidaka, Alaji, Vidradhi etc.(Ca.Ni.4/48)

2. Specific Complications

a. Kaphaja Prameha

Maksikopasarpanam, Alasya, Mamsopacaya, Pratisyaya, Saithilya, Arocaka, Avipaka, Kapha praseka, Chardi, Nidra, Kasa and Svasa (Su.Ni.6/15).

b. Pittaja Prameha

Vrisanayoravadaranam, Basti-bheda, Medhra-toda, Hridaya Sula, Amlika, Jvara, Atisara, Arocaka, Vamathu, Paridhumayana, Daha, Murcha, Pipasa, Nidranasa, Pandu, Pitta-vinmutranetratva. (Su.Ni.6/15)

c. Vataja Prameha

Hridgraha, Laulya, Anidra, Stambha, Kampa, Sula, Baddha Purisatva (Su.Ni.6/15).

Prameha Pidaka

Ayurvedic texts have described Prameha pidaka as a major complication of Prameha, Prameha pidaka developes dependently in patients of Prameha and independently in the patients having primary features of medodusti. These Prameha pidaka require surgical intervention.

Prognosis

1. The ten *Kaphaja Prameha* are curable because of the compatibility in the principles of treatment due to similar nature of *Dosa* and *Dusya* i.e. *Samakriyatvat*.

2. The *Pittaja Prameha* are palliable because of the incompatibilities in the line of treatment i.e. *Visamakriyatvat*.

3. The *Vataja Prameha* are incurable because of great severity of disease or involvement of *Dosa* and *Dusyas* (especially *Ojas*) contradictory treatment i.e. *Mahatyayatvat*.

Management of Prameha

(A) Cikitsasutra (Principles of treatment)

(B) Chikitsa (Management)

Chikitsa sutra (Principles of treatment)

In all types of *Pramehas*, *Kapha* gets vitiated, but in *Madhumeha* comparatively *Vata* is often aggravated as well. Therefore therapies will be directed at both *Kapha* and *Vata* simultaneously.

Caraka has said that the patients who are obese and strong body built, one should adopt *Samsodhana* treatment and who are asthenic body built and weak, one should undergo for *Brihmana* therapy.

According to *Sushruta*, *krisa Pramehi* should be treated with *Santarpana* measures processed diet and drink, while obese should be treated with *Apatarpana* measures (*Vyayama and shodhana*).

Chikitsa (Management):

It consists of triangular approach.

1. Ahara (Diet)

- 2. Vihara (Exercise & Yoga)
- 3. Ausadhi (Medicines)

Ausadhi (Medicines)

As it is evident that *Kapha Dosa* is predominant in *Prameha* and the *Dusya Meda* is of same nature. In *Ayurveda* for the treatment of *Prameha*, drugs having *Tikta* (bitter), *Katu* (pungent) and *Kasaya* (astringent) *Rasa* have been recommended. *Susruta* clearly indicated the decoction of *Salasaradi Gana* drugs with *Shilajatu* for the treatment of "*Prameha/Madhumeha*".

Ahara Chikitsa (Diet Therapy)

First of all "*Nidana Parivarjana*" is very firmly advocated in all classics for the management of disease. So, *ahara* which does not increase body wieght and opposite to etiological factors of *Prameha* is advised to the patient. It is well known that diabetes is a disease of modified life style and faulty *Agni*, so more emphasis should be given on diet and bio-purificatory measures.

Caraka has recommended *Yava* etc. as a principle diet for *Pramehi*. In this concern he suggested that *Yava* first given to animals and then remaining parts collected from the dung of that animals to be consumed by *Pramehi*.

Vihara (Exercise)

As mentioned earlier, lack of exercise and excessive sleep during day and night time play an important role in etiology and pathogenesis of *Prameha. Sushruta* has described that in advance stage of *Prameha, Pramehi* should practice of regular physical exercise, wrestling, actual sports, riding on a horse, or an elephant, long walks, pedestrial journeys, practicing archery, casting of javelins etc.

Conclusion

Diabetes Mellitus or Prameha is disease of Mutravaha Srotasa having Kapha dominancy.Diabetes Mellitus is defined as the state of chronic hyperglycemia due to impairment of insulin secretion or its action. Diabetes mellitus (DM) comprises a group of common metabolic disorders that share the phenotype of hyperglycemia. Through triangular approach of diet, exercise and medicine it can be managed by Ayurveda.

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