



Case Study

AN INTEGRATE APPROACH IN MANAGEMENT OF DIABETES MELLITUS

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ABSTRACT

Madhumeha comes under category of *Yapya* disease. There are very few medicines described in texts for *Madhumeha*, *Svarnamaksika* and *Shilajita* are among of them *Rasayana* treatment is usually beneficial in *Yapya* diseases. *Svarnamaksika* improves microcirculation of *Rasa dhatu* because of having properties like *Vyavayi* and *Laghu*. In this case, patient was given *Svarnamaksikayoga* which contains *Svarnamaksika* and *Salasaradi* group which is described in *Susruta Samhita*. A patient 22-year-old was diagnosed as type 2 diabetes mellitus and after taking 1-year treatment of type 2 DM, she didn't get any relief and her blood sugar was increasing. Then, she was prescribed insulin when she came for Ayurveda treatment. During first follow-up of 7 days, her blood sugar level was normal so insulin was stopped and she was kept on oral hypoglycemic agent and Ayurveda treatment. After 4 months, her blood sugar level reached to normal level and she was advised to continue Ayurveda treatment only. The collected data of this study suggest that earlier intervention of Ayurveda treatment can reverse the disease process in treatment of insulin dependent diabetes mellitus.

INTRODUCTION

The prevalence of type 2 DM is increasing all over the world particularly in the developing countries. It has emerged as a major public health problem in our country. The WHO estimated that there were 31.7 million persons with diabetes in India in 2000 and that this number is likely to be 71.4 million in 2030. India has the distinction of having the largest number of diabetes in world. Current prevalence rates are 12.1% in the urban Indian adult population. There is evidence that the prevalence of type 2 DM increasing in rural population also.^[1]

There is need of treatment that can prevent the conversion of type 2 DM into type-1 or can reverse the progress of disease. In Ayurveda, *Rasayana* treatment is given which can be helpful in selected cases. This case report describes the usefulness of Ayurveda management in reversing the type -1 DM.

Madhumeha comes under category of *Yapya* disease. There are very few medicines described in

texts for *Madhumeha*, *Svarnamaksika* and *Silajita* are among of them. *Rasayana* treatment is usually beneficial in *Yapya* diseases. *Svarnamaksika* is considered as one of the best *Rasayana* among all *Rasayana*.^[2] *Svarnamaksika* improves microcirculation of *Rasa dhatu* because of having properties like *Vyavayi* and *Laghu*. In this case, patient was given *Svarnamaksikayoga* which contains *Svarnamaksika* and *Salasaradi* group which is described in *Susruta samhita*.

Case Presentation

A 22-year-old lady, known case of diabetes mellitus type 2 comes to us on 04-06-2021. When she came to us she had complaints like right side abdominal pain (2 months), weight gain (2 months), itching over whole body (2 months), white discharge (3 months), back pain and recurrent burning micturition (1 year). She was diagnosed as Type 2 diabetes mellitus 1 year back and she had been taking orally hypoglycemic agent like voglibose. When she came to us, she had been taking insulin since 10 days due to uncontrolled blood sugar level. After examination she was advised *Svarnamaksikayoga* - 5 grams with lukewarm water before lunch and dinner and dietary regimen for 7 days. After 7 days, she felt well and her blood glucose level was 186, she was advised to stop insulin and to continue Tab voglibose

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along with Ayurveda treatment. During next 4 months, she had no any complaints and her blood glucose level gradually come within normal range while taking Ayurveda treatment and tab voglibose. After 4 months, she was advised to discontinue tab Voglibose. Now she is on only Ayurveda treatment and she is feeling

absolutely healthy and her blood sugar level remain within normal range.

Family History: Father and mother both are positive USG abdomen, Dated-18-3-2021: - Liver- Fatty infiltration, grade-1

Table 1: Svarnamaksikayoga and its ingredients

Drug Name	Latine name/English name	Part used	Proportion
<i>Svarnamakshika</i>	Chalcopyrite	<i>Bhasma</i>	½ part
<i>Sala</i>	<i>Shorea robusta</i> Gaertn.f.	<i>Niryasa</i>	1 part
<i>Khadira</i>	<i>Aeacia catechu</i> Willd	<i>Sara/Tvaka</i>	1 part
<i>Meshashrunji</i>	<i>Gymnema sylvestre</i> R.Br	<i>Patra</i>	1 part
<i>Śirisha</i>	<i>Albizzia lebbek</i> Benth.	<i>Pamcamga</i>	1 part
<i>Asana</i>	<i>Pterocarpus marsupium</i> Roxb	<i>Sara/Tvaka</i>	1 part
<i>Arjuna</i>	<i>Terminalia arjuna</i> W&A	<i>Patra</i>	1 part
<i>Naktamala</i>	<i>Pongamia glabra</i> Vent	<i>Patra/beeja</i>	1 part
<i>Śimshapa</i>	<i>Dalbergia sissoo</i> Roxb.	<i>Patra</i>	1 Part
<i>Candana</i>	<i>Santalum album</i> Linn.	Stem	1 part

Timeline and Therapeutic Interventions

Date	Morning PPBS (After breakfast)	Urine sugar	Adjuvant	Drug and dose
4-6-2021 (Weight-85.8kg)	163	+ (pus cells-4-6)	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food
11-6-2021	186	Not done	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food
18-6-2021	232	Nil (pus cell- 0-2)	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food
25-06-2021	192	Nil	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food
02-07-2021	183	Nil	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food
09-07-2021	186	Nil	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food
23-07-2021	151	Nil	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food
30-07-2021	165	Nil	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food
06-08-2021	115	Nil	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food
13-08-2021	137	Nil	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food
20-08-2021	141	Nil	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food
03-09-2021	140	Nil	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food
17-09-2021	125	Not done	Water	<i>Svarnamakshikayoga</i> -5gms 2 times a day before food

01-10-2021 (Advise to discontinue Voglibose)	125	Not done	Water	Svarnamakshikayoga-5gms 2 times a day before food
11-10-2021	114	Not done	Water	Svarnamakshikayoga-5gms 2 times a day before food
18-10-2021	109	Not done	Water	Svarnamakshikayoga-5gms 2 times a day before food
25-10-2021 (Weight-76.6kg)	138	Not done	Water	Svarnamakshikayoga-5gms 2 times a day before food

Conventional Medication

S.no	Medicine and dose	Dose	Duration
1	Voglibose	1 Tab.BD	1 Year
2	Human mixtard- Insulin	4 unit before lunch and dinner	10 days

Follow-Up and Outcome

A significant improvement in clinical features was noted after one week of treatment. There was improvement in abdominal pain, weight gain, itching over whole body, white discharge, back pain and recurrent burning micturition. After 7 days of treatment insulin was stopped as well oral hypoglycemic medication was stopped after 4 months.

DISCUSSION

Metabolic disturbance or insulin resistance result into increased blood sugar level in type 2 diabetes mellitus. Furthermore, this increased blood sugar level is excreted via urine and increases urine sugar level. Ingredients of *Svarnamaksikayoga* having *Dipana* and *Pacana guna*, promotes the *Agni* and cures *Ajirna*. Because of these properties, it promotes proper utilization of glucose and may prevent the excessive glucose production in liver. Insulin resistance can be correlated to *Avarana* of *Vata* by *Kapha*. Insulin which is a *Pita (Agni)* principle, cannot act properly because of being interrupted by increased *Kapha*. *Svarnamaksikayoga* having properties (*Kasaya rasa*; *Laghu*, *Ruksa guna* and *Katu vipaka*) helps in

mitigation of *Kapha*, removing the *Avarana* of *Kapha* and thus it ultimately promotes *Vata* for its normal function (transportation of glucose and action of insulin).

CONCLUSION

It's concluded that Ayurveda treatment used for this patient was beneficial and if early intervention is done in treatment of insulin dependent diabetes then it can be reversed. The results obtained from this treatment show that further research can be undertaken based on this treatment for the Ayurveda management of insulin dependent diabetes.

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