

# Management of madhumeha with virechan and ikshwaku phalachoorna basti followed by asanadi Kashaya and harishankara rasa – A case study.

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## ABSTRACT

Madhumeha in its chronicity as vataja prameha, avaranaja medovaha sroto dusti<sup>1</sup> is nearest to diabetes mellitus. kapha and pittavruta madhumeha are sadya<sup>2</sup>. Diabetes mellitus is a group of postural, autoimmune, metabolic de arrangements put together by a common thread that is tendency for chronic hyperglycemia. Diabetes is becoming the 9th leading cause of death globally<sup>3</sup>. current global statistics shows that 463million individuals have T2DM. Prevalence of T2DM and IFG in India is 9.3% and 24.5% respectively. among those with T2DM 45.8% are aware, 36.1% are on treatment and 15.7% are under control<sup>4</sup>. In madhumeha vyadhi, chikitsa like shodana and Rasayana yogas are explained. So, in the present study virechana and basti is given. snehana done with mahasneha, virechana given with aragwadha phalamajja yoga and basti with ikshwaku phalachoorna, Followed by rasayana yogas.

The objective of this study was study the effect of Virechana and basti followed harishankara rasa with Asanadhi Kashaya anupana in madhumeha and to review critically on aetiopathology, Roga Rogi Pareeksha and diagnosis of madhumeha (T2DM) as per Ayurveda.

**Key words:** Madhumeha, Diabetes mellitus, mustadigana choorna, mahasneha, aragwada phalamajja, ikshwaku phala choorn, Asanadi kashaya, harishankara rasa, Virechana, basti.

## Introduction

Madhumeha has been described as a collection of illnesses characterized by increased micturition frequency, increased urine volume, and murky urine. According to Acharyas, Madhumeha is characterized by the vitiation of Vata Kapha Pradhana Tridosha, which is connected to Meda and other Dhatus, as well as Ojas as Dushya, which exits the body through Mutravaha Srotas. In contemporary medical science, an illness that is comparable to diabetes mellitus has been identified. Chronic hyperglycemia, polyuria, polydipsia, polyphagia, emaciation, and weakness are all hallmarks of type 2 diabetes mellitus (DM), a collection of metabolic disorders caused by disruptions in the metabolism of carbohydrates, fats, and proteins linked to a relative or total lack of insulin secretion and/or action. Jataragni and Dhatwaagni correction, Shodhana, Avaranaghna, Amedo mutrala, Dhatu samyakara, ojaskar, Balya, Rasayana approach as a set of longitudinal regime is effective in Madhumeha subjects. Ikshwaku phala choorna kashaya basti helps in samprapti vighatana and gut microbiota activation. Harishankara Rasa is prometabolic insulin sesnitzer, antioxidanta, Rasayana to promote insulin transport to cell and dhatu. Asanada kakshaya anupaana has similar role to play,the effect of Virechana and Ikshavaku phala

choorna Basti followed by Rasayana in patients of diabetes mellitus is intended with drug called Harishankara Rasa with asanadi kashaya Anupana.

## MATERIALS AND METHODS

The subject presented with madhumeha symptoms were checked and evaluated using blood parameters. Following confirmation, a subject with elevated blood glucose levels (high FBS, PPBS and HbA1c) was assigned to this case study. Laboratory studies such as blood parameters and routines were also recorded. The subject provided informed and written consent prior to the start of therapy. Subject outcomes were also analyzed.

### Case details (COPD NO-20743, DOPD NO- 6339, CIPD NO-2640)

A female subject of 36 year visited kayachikitsa opd of taranath government ayurvedic medical college and hospital, Ballari presented with the complaints of muhuru muhur mutrapravritti, karapada daha, karapada supti, dourbalya and angamarda since 5 months. Subject was non hypertensive, with good physical built and had family history of her mother and father both having diabetes mellitus. Her appetite was good and had regular bowel. she had regular menstrual history (4-5 days of flow/28-30days)(G3P2A1L2). Based on subjects complaints blood investigation for diabetes were advised - fasting blood sugar(FBS):126.3mg/dl. Postprandial blood sugar(PPBS):178.1mg/dl.HbA1c-8.3% and BMI-25.7. on the basis of symptoms and blood parameters subjects was diagnosed as madhumeha(T2DM).

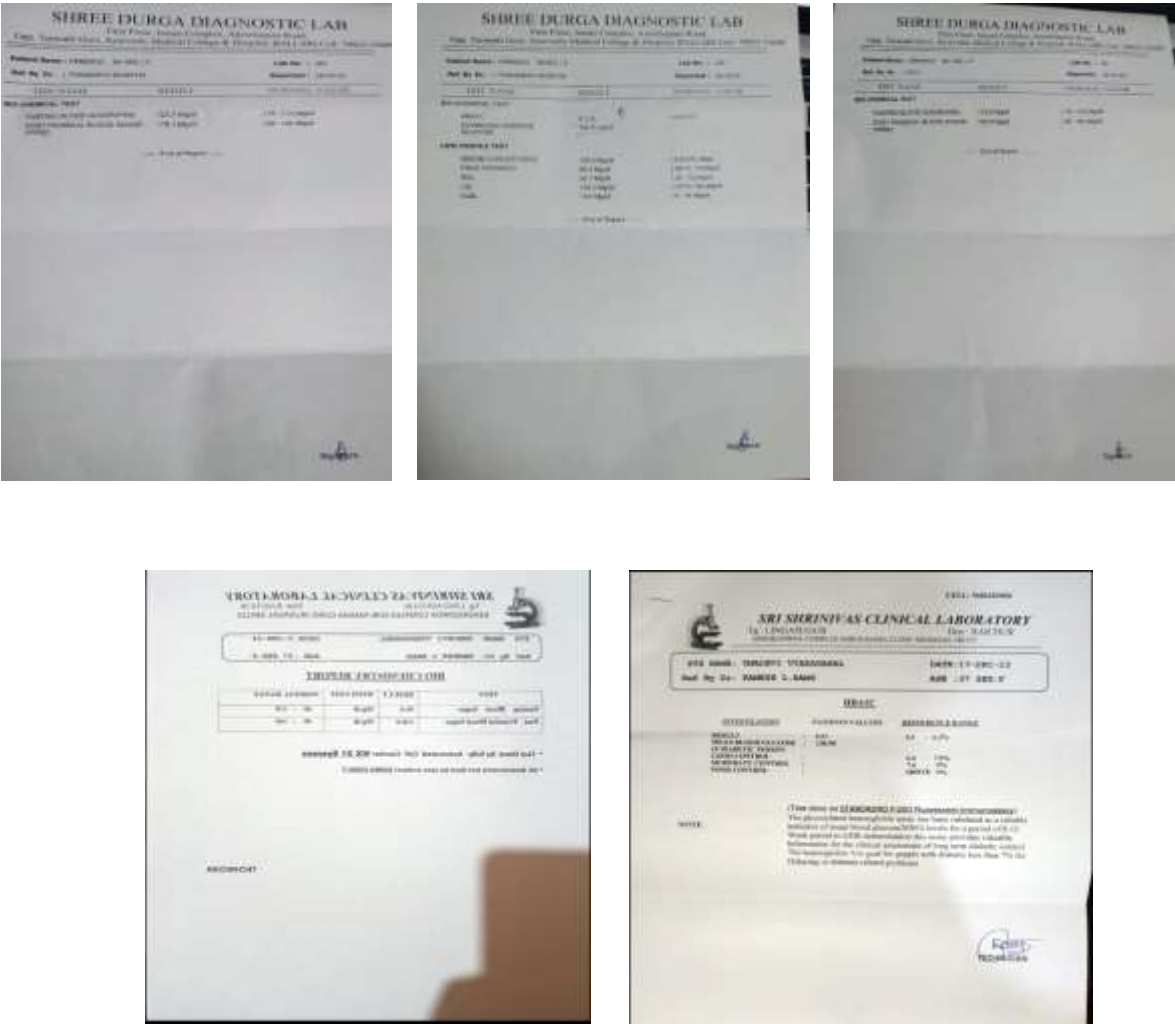
## INTERVENTION

- 1) Cap. Mustadiganachoor<sup>5</sup> for 5 days  
Dose: 500mg 2 cap. Twice a day/before food  
Anupana : sukhoshna jala
- 2) snehapaana with mahasneha<sup>6</sup>  
Test dose:-30ml. from day 2 to day 4, 50ml
- 3) Abhyanga for 3days with nimbabeejsa taila<sup>7</sup>
- 4) Virechana  
Mrudwika Kashaya-100ml and aragwada phalamajja<sup>8</sup>-25gm
- 5) 3days of peyadi samsarjana karma
- 6) Ikshwaku phalachoor<sup>9</sup>.  
1<sup>st</sup> sitting- 1<sup>st</sup> course of basti with asanadi Kashaya 300ml with 24gm of ikshwaku phalachoor<sup>9</sup> for 7 days  
Basti parihara kala-14days  
2<sup>nd</sup> sitting- 2<sup>nd</sup> course basti for 7 dyas with same yoga
- 7) Rasayana for 22 days with harishankara rasa<sup>10</sup> and Asanadhi Kashaya<sup>11</sup> anupana.  
Dose: Harishankar rasa-250mg 1 BD/before food and Asanadi Kashaya- 20ml.
- 8) Advised and gave pathya and apathya chart according to the condition  
Total duration-66days

OBSERVATION AND RESULTS

Observation	Before treatment 0	During treatment 12days	After treatment 66
FBS	126.3 mg/dl	119.6mg/dl	96.0mg/dl
PPBA	178.1mg/dl	125mg/dl	128.0mg/dl
HbA1c	8.3%	Not done	5.97%
BMI	26.7	25.3	24.2

REPORTS OF THE SUBJECTS: BEFORE, DURING AND AFTER THE TREATMENT



DISCUSSION

Madhumeha Chikitsa. The concepts of chikitsa can be investigated in three categories: Nidana parivarjana, Apakarshana, and Prakriti Vighatana. The therapeutic concepts of Dhatu Kshaya Janya Madhumeha and Marga Varana Janya Madhumeha require independent investigation.Chikitsa Samanya Siddhanta In Margvarana Janya Madhumehi, Nidana Parivarjana.The normal apathyanimittaja Madhumehi is sthula, enjoys Abhyavaharana, and dislikes Chankramana. Here, the patient should be told to avoid any kaphakara ahara vihara in order to prevent or treat the problem. Dhatukshaya Janya Madhumehi mentions Nidana Parivarjana. Nidana Paravarjana, Sahaja Madhumeha is explicitly mentioned when studying Nidana Parivarjana in such Madhumehi. It is totally up to the pitta or vata to determine how to avoid the disease from impacting them. Beeja, beeja bhaga, and beeja are

all to be avoided. Madhumeha arambaka dosha dushti is the consequence of Bhaga avayava upatapa. Dhatu Kshaya Janya Madhumeha's Prakrit Vighatana Dhatu Kshaya avastha is the consequence of Beeja dushti in Sahaja Madhumeha, as well as a state of Arikarshita dhatus. Continuing dhatu kshaya, which is essentially Margavarana Janya Madhumeha in a more evolved form, Anarha is considered samsodhana . Samshamana Chikitsa is suggested in these circumstances.

## MUSTADIGANA CHOORNA

Out of 15 Dravyas, 8 of them posses Katu-Tikta-Kasaya Rasa and Ushna Virya, 4 of them posses Tikta-Katu Rasa and Shita Virya, 2 of them posses Kasaya Rasa and Ushna Virya, 1 having Amla Rasa and Shita Virya. 11 Dravyas posses Katu Vipaka and remaining 4 Dravyas posses Madhura Vipaka. The dravyas Katu, Tikta, and Kashaya Rasa aid in lowering the vitiated kapha. In contrast, tikta, kashaya, and katu rasa, together with kleda and vikruit meda, likewise lessen vrudhdhita kapha. Thus, when these rasa are mixed, they lessen excess kapha, Kled, and Vikruit Medadhatu. Eight dravyas are Katuvipaki, and they lower the Kapha dosha and Medha Dhatu. Hence this yoga have a Kaphaghna, malapachana karma bedhana, chedana and vatanulomana. Most of the dravyas in mustadigana are kapha vata shamak and mahasneha is having cell regeneration property there by help to reduce the karapada supti. most of the dravyas which included in mustadigana are control excessive elimination of mutra (mutra sangrahaniya ) by tikta , katu, kashays rasa and ruksha guna. Mustadigana choorna is having the bhallataka would stimulate the insulin production or sensitize the peripheral tissues to insulin and also increases the activity of glucose-6-phosphate dehydrogenase(G6PDH) by decreasing the lipid peroxidation. Along with this vacha, chitraka, ativisha, nagara , katuki does vata and kapha shamana and maintain the metabolism. In diabetes there is increased hepatic glucose production, it is possibility that katuki which is the Dravya present in mustadigana choorna, being pittarech aka reduce various enzymes responsible for this mechanism and so reduce hepatic glucose reduction. Katuki in mustadigana choorna help for hemolysis there by it reduces the HbA1c. By consuming mustadigana choorna, improves the pachakagni and dhatwagni there by help for poshana and controls obesity. This preparation is having Deepana and malaspachana karma. after taking this medicine, some subjects have improved abhyavaran , some improved with jarana shakti and patient who are suffering from vibanda are relived from it. The synergism of all the dravyas, with a predominance of Katu-Tikta Rasa, Ushna Virya, Katu Vipaka, and Laghu-Ruksha-Tikshna Guna, accounts for the therapeutic action of Gana. Both Samana Pratyarbdha Dravyas and Vichitra Pratyarbdha Dravyas are found in Mustadi Gana. However, because there are more Samana Pratyarbdha Dravyas (9 Dravyas out of 15) in the Gana, the anticipated therapeutic effect can be determined using each of their individual Rasapanchakas: seven Dravyas have Deepana Pachana Karma, three have Lekhana Karma, three have Bhedana Karma, and two have Anulomana Karma.

## MAHASNEHA

it contain 36 ingredients among those 4 goghrita, taila, vasa and majja are 50% of the yogas other 32 ingredients are 50 % those include dashamoolas, jeevaniya ganadravya and other are kapha-pitta nashaka dravyas. As jeevaniya ganas h As it has more quantity of snehas it help to mitigate the vata which is the prvara dosha involved in madhumeha. Along with that it help to provide bala to the patient as it contain the jeevaniyagana dravyas , as per present studies angamarda is more come symptome in madhumeha , dashamulasa help to reduce angamarda. kapha and vata is main cause for supti, Numbness is due to the nerve damage. Most of the dravyas in mustadigana are kapha vata shamak and mahasneha is having cell regeneration property there by help to reduce the karapada supti. mahasneha is having Madhura, guru, snighda dravyas and dashamoolas which normalize the vata and reduce angamarda. After snehapana with mahasneha was administered to subject which act as balavardaka, dhatuposhaka, and help to improves the pachana samarthya by its agnideepana phalashriti. During the process of Snehapana, since the person was taking only mahasneha and a very small quantity of food, there is an acceleration of fat utilization for energy in the absence of carbohydrates. This absence of carbohydrate replenishment promotes mobilization of fatty acids from the adipose tissue. Thus, Snehapana has a weight reduction effect on the body. Mahasneha is indicated in asthi Mjjagata vikara in vatavhyadhis it is helpful in

treating chronic vata vyadhis. as madhumeha is vatapradhana tridoasha vyadhi it help to mitigate vata and vata associate complaints like angamarda, dourbalya. Mahasneha contains jeevaniya gana dravyas which helps to subside pitta dosha, thereby reduce the symptoms like pipasadhikya and kshudhadikya. Among the 4 snehas, mahasneha contains more quantity of taila hence it acts mainly over the vata dosha. And this yoga has dashamoola help to reduce vata and kapha.

### NIMBA BEEJA TAILA

It contains 100% nimba bija as ingredient. As nimba bija is havinga tikta rasa (due to vayu mahaboota bahulya) it is absorbed easily by skin. Due to its sheeta veerya it reduces shithilata of mamsa and twaka. As nimbabija taila is having Tikshna, vishad and vikasi guna it easily penetrates into srotas and does shatoshodana by removing kapha and pitta avarana hence reduces karapada supti, and Stimulant and vigorizing property rasasindoor helps in nerve damage repair. . abhyanga helps to relax the muscles and improves circulation and gives bala to mamsa. nimba bija taila abhyanga helps for koshtagamana of vilayitha doshas. and gives Pushti to mamsa dathu and reduces anga shaithilya. Sarvanga abhyanga was done which may cause the increase in the lymphatic drainage. It has been proved that lymphatic massage aids in water loss and thus ultimately weight loss.

### ARGWADHA PHALAMAJJA WITH MRUDHWIKA KASHAYA

It contains 35 % aragwada phalamajja and 75% mrudwika Kashaya. Aragwada phalamajja and mrudwika are Kashaya and Madhura rasa Dravya helps to mitigate kapha and vata. aragwada phalamajja is having Madhura, snigdha guna helps to subside vata and mrudwika is shramahara hence it aids to relieve angamarda. aragwada phalamajja virechana helps for vatanulomana and mrudwika helps to overcome from dourbalya by its shramahara property. Virechana probably reduces insulin resistance as well as promotes insulin secretion. As virechana is line of treatment for pandu, it does rakta prasada, rakta shodana and rakta vardana. Virechana is effective in the management of obesity due to a reduction in the E. coli colonization after Virechana by correcting gut flora dysbiosis. Aragwada phalamajja has sramsana guna (laxative qualities) and is frequently used as a vibandahara as per present study many of subjects have vibandha complaints relieved from it. It is vatashamaka in nature because of Madhura rasa, Snigdha guna, and Madhura vipaka, it is also pitashamaka because of Madhura rasa and Sita Veerya. It is Pitta Kapha Samsodhaka because of its Sramsana guna.

### IKSHWAKU PHALACHOORNA BASTI

It contains 100% ikshwaku. As ikshwaku is tikta rasa and katu vipaka it reduces kapha. It has sheeta veerya it reduces pitta. It has neuromuscular stabilizing, energizing, anti-inflammatory, analgesic, and immunological modulating properties and rejuvenating properties. basti does the vatanulomana thereby control the muhurmutra pravritti, as it due to apana dusthi. Ikshwaku phalachoorna yukta Asanadi di Kashaya basti helps to reduce the dosha avarana by shatoshodana and balance the function of samana and apana vata thereby improves the both anabolism and catabolism. Ikshwaku phalachoorna basti has direct stimulatory effect on glucose uptake without the involvement of insulin. It was observed that basti directly or indirectly inhibits glucose absorption or transport from the significant improvement in blood sugar level. It has tikta rasa, laghu and ruksha guna hence reduces kapha and pitta dosha shamana. It extracts dose reduction in blood glucose and increasing of serum insulin. It is effective in diabetes by preserving pancreatic cell integrity, hence it is also used to prevent diabetic complications.

### HARISHANKARA RASA

It contains 50% shudda abhraka and 50% rasa sindoor. Bhavana dravyas used in sufficient quantity. Madhura and Kashaya rasa of abhraka subside the pitta and vata and it is more of tikta kashaya rasa pradana which internally



reduces the effect of pitta which intern reduces the daha. Stimulant and vigoreting roperty rasasindoorra helps in nerve damage repair, there by reduces suptata. As rasa sindoorra in harishankara rasa is tridosahara helps to reduce vata and normalize the Vata dosha while also replenishing the body's nutrition and repairing the dhatu. In harishankara rasa both amlaki and Nisha are used as bhavana dravyas which act as bahu mutra shoshak.

## ASANADI KASHAYA

Asanadi kashaya contain total 23 dravyas which are mainly having tikta, katu dravya with medohara property. It demonstrated that in addition to their hypolipidemic and antioxidant qualities, these plants exhibit varied degrees of hypoglycemia action. These medications are far more potent than oral hypoglycemic medications. These plants are said to have antidiabetic properties because they include polyphenols, terpenoids, alkaloids, flavonoids, glycosides, and other active ingredients that lower blood glucose levels. These plant extracts have been anticipated to work through a variety of ways. Certain drugs affect the function of pancreatic beta-cells (releasing insulin, regenerating  $\kappa$ -cells), whereas other medications increase insulin sensitivity. Additionally, certain plant extracts have properties similar to those of insulin. Additional mechanisms could include decreased glycaemic index of carbohydrates, decreased effect of glutathione, inhibition of intestinal glucose absorption, and improved glucose homeostasis (increased peripheral utilization of glucose, increased synthesis of hepatic glycogen, or decreased glycogenolysis). The decrease and elimination of diabetes complications could be attributed to all of these measures.

## MODE OF ACTION OF VIRECHANA

Virechana primarily eliminates Pitta Dosha, and it is considered that the liver and spleen are the primary locations of Pitta Dosha. As a result, Virechana Karma may aid to lower hepatic glucose synthesis while also improving insulin secretion. As a result, it helps to reduce blood sugar levels. Increased lipolysis, rising free fatty acid levels, and the accumulation of intermediary lipid metabolites all lead to higher glucose output, decreased peripheral glucose utilization, and impaired beta-cell activity. Virechana directly or indirectly corrects the entire metabolism of lipid synthesis and excretion, hence restoring beta cell. Virechana is recommended for treating bahudoshavastha conditions, while madhumeha is a bahudosha vyadhi. For the patient who has vitiated doshas and is in the koshta, virechana can be an efficient technique to reduce doshas and break the pathology. It is a treatment in which the body is cleansed by removing the watery content, pitta, mala, kapha, and vata. Madhumeha already has an overabundance of kleda. Administering Argwadha phalamajja with mrudwika kashaya selected for virechana is responsible for removing doshas sedimented in koshta. vibandha is the primary symptom of madhumeha; as a result, mala accumulates in the koshta, and the doshas in madhumeha are removed by virechana. Madhumeha was founded by Abnormal Meia Dhatu. Excessive kleda is observed in Madhumeha, and virechana karma removes the kleda from the body. It also acts on the vitiated Meda dhatu and, according to Vagbhata, draws the vitiated doshas through the shortest route. The patient obtained alleviation from his ailments.

## CONCLUSION

Though madhumeha is a yapy (not completely curable / difficult to cure) disease, long-term application of the above mentioned treatment technique would not only make the person free of madhumeha, but will also safeguard them from living a long life (deergha jeevanam), staying healthy (sukhayu), and contributing to society (hitayu). This case was newly dignosed. patient bala nad satwa were good. Both parents wetehaving madhumeha. Her diat was not haphazard. Due to the implimatisation of present holistic chikitsa siddhanta as a whole, has better effect in the management of hyperglycemi's objective parameters. The intervention is effective in reducing

subjective parameters. Ikhshwakuphala choorna basti is very effective ray of hope in the management of madhumeha.

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