

Review Article

A Literary View of Vaman and Virechan Karma in the Management of Sthula Pramehi w.s.r. Type 2 Diabetes Mellitus

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Abstract Diabetes mellitus is a chronic metabolic disorder in which the body is unable to make proper use of glucose due to reduced secretion of insulin by the pancreas resulting in hyperglycemia (high blood sugar) and glycosuria (sugar in urine) we take is generally broken down into simple sugar called glucose in our body. Glucose circulates in the blood and enters the cell with the help of insulin. Due to sedentary lifestyle and predisposition the beta cell are unable to make insulin, which is the key for glucose to enter into the cells. Panchkarma is the popular term for shodhan chikitsa. Among that Virechan is an important one. Virechan is the therapy the doshas are made to pass through the adhomarg.

Keywords: *Diabetes mellitus; Panchkarma; Vaman; Virechan*

1. Introduction

Perhaps never before health and wealth have gone in such a contradictory manner when wealth is booming like nothing and health is booming like everything.

Madhumeha has been classified under the vatika type of prameha. The vata may be provoked either directly by the etiological factors of Avarana by kapha and pitta to its path or by continuous depletion of dhatus. The factors which provoke the vata directly cause Apatarpanjanya Madhumeha (Type 1) while the factors which provoke kapha and pitta cause Santarpanjanya Madhumeha (Type 2).

*"Asyasukham svapnasukham dadhini gramyaudkanuprsa payansi
Navannpanam gudvaikratam cha prameha hetuh kaphakraccha sarvam"* [5]

As per WHO "Diabetes Mellitus is heterogeneous metabolic disorder characterized by common features of chronic hyperglycemia with disturbance of carbohydrate, fat and protein metabolism due to absolute or relative deficiency in insulin secretion and action or both.

The characteristic features of DM have close resemblance with disease named as Prameha in Ayurveda.

Madhumeha is a vatika subtype of Prameha that is most close to DM.

One variety of this Madhumeha is Aavaranjanya (Due to occlusion) in which aggravation of Vayu is due to its occlusion.

Basic Pathological factor for this Aavarana is Bahudrav Kapha (Bahudrava sleshma dosh vishesh) [2] along with Bahuabadhameda (excess and loosely bound fat) [3].

One of the causative factors for this avarana is asamshodhan (not getting bio cleansing therapy at proper time). This type of madhumeha (DM) can be treated if samshodhan is used in early stages of disease followed by palliative treatment.

Vaman and Virechan are the samshodhan karma that is compatible to overcome this avarana.

In the reference of Acharya Charak describing chikitsa sutra-prameha chikitsa sutra:

*“Sthula pramehi balvanihaika krushsthaik paridurbalashacha
Sambranganam tatra krushasya kayam samshodhanm doshbaladhikya”* [6]

Patients suffering from Prameha can be classified into two categories:

1. Sthula Pramehi - These who are obese and having good strength. They are given shodhan (cleansing purification treatment).
2. Krush Pramehi - These that is emaciated and weak. They are given nourishing treatment - Bramhan therapy (Bramhan therapy is aimed to improve nutrition level of the body).

This treatment aims to improve nourishment and to improve dhatuposhana) both the above cases, patient are administrative snehan (oleation) treatment. Then, vaman, virechan recipes, described in kalpa sthan are administered. After doshas is eliminated, the patient is given Santarpan or nourishing therapy because Aptarpan (fasting) therapy in this condition may produce Gulma (cystic tumor), Kshaya (chronic respiratory disorder), meha (chronic urinary tract disorder), Bastishula (bladder pain), and Mutra Graham (urinary retention). Hence, based on the state of Agni (digestion strength) prameha should be give santarpan (nourishing therapy) after shodhan.

2. Need of Study

Hence, the aim/need of study is as follows:

1. To Maintaining Swasthya of the Swasthya Vyakti and curing the vikar of atura.
2. To discuss and understanding the effect of Vaman and Virechan in T2DM, literary view.

Classical Symptoms of Samshodhanarth Diabetic Patients

- Prabhutamutrata [9]
- Aavilmutrata [9]
- Kshudhakya
- Pindikoudwestanam

- Nishamutrata (Nocturia) [11]
- Karpadtaldaha, Atisweda [4]
- Galatalushosh [4]

Selection of Patient in Vaman and Virechan

- Patient having classical signs and symptoms of disease according to Ayurveda as well as modern science.
- Patients of Prameha having body mass index 25-30 kg/m sq.
- Patients of Non-Insulin Dependent Diabetes Mellitus (NIDDM) with blood sugar level FBS - 126-220 mg/dl or PPBS-180-300 mg/dl.
- Patients in the age group of 20-60 years.
- Patients otherwise healthy and fit for Vaman and Virechan karma as per Ayurvedic classics.

Exclusion Criteria

- Age <20 Years and >60 Years.
- Patients having BMI <25 and >35 Kg/m sq. and disease chronicity for >10 years.
- Patients of Type-1 diabetes or the patients of Type-2 diabetes taking insulin.
- Patients having complication like nephropathy, retinopathy, diabetic foot, carbuncles etc.
- Patients having diabetes in association with Pheochromocytoma, Acromegaly, Cushing's syndrome, Hyperthyroidism, Cardiovascular disease, Renal disease, Carcinoma or any other disease effecting multiple body systems and pregnant woman.

Treatment Schedule

- Deepan-Pachan (Digestive appetizer meditation)
- Aabhyantara Snehapana (Internal oleation)
- Sarvaanga Abhayanga-Swedana (Whole body massage and formulation)
- Vaman-Virechan (Bio-cleansing therapy)
- Samsarjankarma/Santarpan

Drug Selection

Deepan-Pachan Trikatuchurna = 3-6gm/day in two divided doses to be used for 3-5 days for the purpose of Deepen Pachan.

Abhyantara Snehapana

Started with Triphaladi grita [7] in increasing dose as per the Kushta (bowel) and Agni of the subject for the period of 3-7 days.

Abhayang/Swedana

Tilataila is best for whole body Abhayang [1] and Swedan in steam chamber.

Vaman

- Ikshwakubeejachurna [8] mixed with honey in a dose of 4-8gm as per requirement of patients (after 5th day of snehapana).

- Shilajeet Decoction of Shalsaradigana along with is taken according to Agnibala of patients [10].

Virechan

Snuhibhavita Kutki in a dose of 6-10 gm as per the Kostha (Bowel).

Effects of Emesis on Biochemical Parameters [13]

- Vaman is a very stressful work which is done in very early morning.
- Plasma cortisol level is increased after Vaman karma as the highest level of cortisol occurs in early hours of morning and in stress, strain with anxiety condition.
- The cortisol causes hyperglycemia by promoting gluconeogenesis and causes increased protein catabolism with rise of plasma amino acids. This raised blood glucose plasma amino acids stimulate insulin secretion by substrate regulation which is secondary effect.
- The emetic drugs used in Vaman on reaching stomach, stimulate the gastric mucosa along with stimulation of vagus nerve and sympathetic nerve fibres.
- As both Vagus and sympathetic nerve fibres supply the islets cells, stimulation of both fibres by Vaman karma cause stimulation and Beta receptors followed by insulin secretion by neural control.

Effect of Purgation on Biochemical Parameters [13]

- The virechandavyas has the properties like ushma, teekshna, sookshna, and vyavayi gunas. The drugs having these properties will reach the heart by its potency and thereby to the entire dhamanis. Also it reaches to big, small and minute strotas of the body.
- Due to presence of ushnaveerya vishyandana is produced teekshnaguna produces chedan of doshas samoochas and brings in to the koshta.
- From there due to prithvi and jalamahabhoota gunas and also due to adbhagaharaprabhava the doshas are get eliminated through gudamarg.
- Both Virechan and Vaman aushadha having the same properties but Virechan drugs produce Virechan and Vaman drugs produce Vaman only and it is only because of its prabhava.
- Virechandavyas produce uttejana in the strotas dhamnies, koshta and ultimately on hridaya Kendra.
- Sushruta added saraguna along with the ushnadigunas and this saraguna is helpful in anulomana procedure.

Acharya Charak says the drugs acts not only to its prabhava but also due to its dravatwa prabhava gunatwaprabhava and both dravatwa and gunatwaprabhava are the factor mentioned here may change based on conditions. The effect produced due to above is called Karma. The factor responsible for manifestation of effect is veerya.

3. Conclusion

From this study, we concluded that,

- NIDDM is one of the burning problems which make patients disable due to complication when left unnoticed. So a well designed management protocol is the need of the hour. Biopurification is the choice of treatment in case of Madhumeha (NIDDM) due to bahudosha (excess of hormones).

- Vamana works well on kapha dominant Lakshan like Prabhuta Mutrata, and Avilmutrata, while Virechan subside pitta dominant lakshan like Karpada Tala Daha and Atisweda.
- Symptoms like Kara Pad Suptata, Kshudadhikya, Trishnaadhikya Gala Tala Shosga and pindikodvestana are significantly controlled by Vaman and Virechan.
- Through both the procedure relieve the symptoms, it is Vaman that Provides more relief than Virechan.
- Vaman reduces the level of FBS, PPBS in comparison to Virechan.

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