



# “Critical literature review of *Prameha* according to *Nidan Panchak, Upadravas* and its *Chikitsa*”

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## Abstract-

*Prameha* is *Chirakali*, *antakoshtaudbhava vyadhi* and main *strotas* involved are *mutravaha*, *medovaha* and *udakavaha strotas*. This is *tridoshaj* disease especially with *kapha dosha*, main *dushyas* especially *meda* along with *Rasa*, *Ratka*, *Mamsa*, *Lasika*, *Kleda*, *Sukra* and *Oja*. *Prameha* is a condition caused by impairment of *Kapha Dosha* and *Jala Mahabhoota* i.e. Disturbed metabolism of water compartments in body giving laxity in body tissues especially in fats, muscle tissues giving them *Abadhha* (lax or hypotonic) and *Asamhata* (not compact or loose) consistency. *Kapha Dosha* vitiation mainly hampers fat or lipid metabolism leading formation of *Kleda* (tissue waste products in liquid form dampening the body tissues). Excessive formation of *Kleda*, excessive evacuation of this *Kleda* in form of profuse, cloudy urine '*Prabhuta Avila Mutrata*' is cardinal symptom described. This excess *Kleda* bring *Shaithilya* in surrounding tissues like muscles, lymph, marrow, semen, fat and in advance stage putrefy them. Therefore these tissues are considered as *Dushya* or target tissues of *Prameha*. Formation *Kleda*, disturbed lipid metabolisms are key points in pathophysiology of *Prameha* although all three *Dosha* are involved in process.

**Keywords-** Chikitsa, Nidan Panchak, Prameha, Updrava.

## Introduction-

Etiological factors of *Prameha* and diabetes includes high glycemic food and lack of exercise which imbalance the *doshas* (*kledak kapha*, *Pachak Pitta* and *Saman Vayu*) due to high consumption of jaggery, curd etc. and sedentary life style. *Agnimandya* can be correlated with the factors that due to high blood sugar; insulin is

secreted by pancreases but cell become resistant to insulin. *Dhatwagnimandya* (*Apachit Dhatuvridhi*) having resemblance with the factor that more glucose is present in the blood. Body tries to dilute this high blood glucose i.e. *Kledovridhi*. (Unnecessary excessive body fluid oozed out from all dhatus) and body tries to excrete it in the form of urine which causes polyuria i.e. *Bahumutrata*.

## **NIDAN PANCHAKA OF PRAMEHA**

### **i. Nidana:**

An Ayurvedic classic elaborately describes the general etiological factors of *Prameha* and classifies into *Sahaja* and *Apathyanimittaja*.

#### **a. Sahaja Prameha:**

Due to certain defects in *Stri* and *Pumbeeja* (Ovum and Sperm); which are said to be *Matru-pitru Beejadoshakrita*, result in *Sahaja Prameha*. *Acharya Charaka* has mentioned that excessive indulgence of *Madhura Rasa* by parents is the chief cause of changes and damages in the *Beeja* (Sperm and Ovum). Over indulgence of *Madhura Rasa* by mother during pregnancy is also likely to induce *Prameha*. *Charaka*, while describing the prognosis of the *Prameha*, clearly highlights that the *Kulaja Vikara* is the main causative factor for the defect in the *Beeja*. *Chakrapani* opines that father, mother or grandparents can cause it. It means the disease is inherited from generation to generation. [1]. *Charaka* also narrated that *Sahaja* type of diseases can occur due to defect in *Beeja*, *Beejabhaga* or *Beejabhagavayava*. [2]

#### **b. Apathyanimittaja:**

### **Etiological Factors of Prameha**

*Asyasukham* (Eating the substances as per wish without control), *Swapnasukham* (Excessive sleep, day and night without any specific time), *Dadhini* (Excessive indulgence of various preparation of curd), *Gramya*, *Audaka*, *Anupa Mamsa* i.e. meat of domestic, aquatic, wet land animals), *Payamsi* i.e. excessive use of milk and its preparation, *Navannapanam* (new grains and drinks), *Guda Vaikrutam* i.e. various preparation of sugar and jaggery and other substances, which increase *Kapha*, may cause *Prameha*. *Charaka* narrated etiological factors according to *Dosha* predominance in *Nidana Sthana* and common etiological factors in *Chikitsasthana*. [3]

*Sushruta* adds *Snigdha* (unctuous), *Medhya* (fatty) and *Drava* (liquid) type of food are also among causative factors. [4]

According to *Vagbhata*; the diet and activities, which increase *Meda*, *Mutra* and *Kapha*, are supposed to cause *Prameha*. [5]

### **ii. Poorvarupa**

Premonitory symptoms are very helpful to diagnose the disease at its early stage, which in turn help for good prognosis. *Poorvarupa* are valuable signs and symptoms to predict the nature of disease and a way to check the full blown symptoms by proper medicaments. As a matter of fact, premonitory symptoms are produced at the

stage of *Sthana Samshraya* and it is one kind of warning to the person to stop the ingestion of causes of *Prameha*. [6]

### iii. Rupa

In Ayurvedic Classics; the *Samhitakara* has contributed twenty types of *Prameha*. *Rupa of Prameha* is described according to each type. *Rupa of Prameha* can be classified into 2 groups: -

1. *Samanya Rupa*
2. *Vishesha Rupa*

#### 1. *Samanya Rupa of Prameha* [7], [8]

- i. *Prabuta mutrata* (Excessive urination)
- ii. *Avila mutrata* (Turbidity in the urine).

#### 2. *Vishesha Rupa of Prameha (according to each subtype)* [9]

##### a. Clinical features of *Kaphaja Prameha*

- i. *Udakameha*- Individual passes large quantity of water like urine which is transparent, white, cold and without any smell.
- ii. *Ikshuvalika Rasameha*- Urine like sugarcane juice and is extremely sweet and cold.
- iii. *Sandrameha*- Precipitation is found in the urine and is deposited in the pot, when kept for overnight.
- iv. *Sandrprasadmeha or Surameha*- Urine is partly viscous and partly clear, *Surameha* means alcoholic smell to the urine.
- v. *Shuklameha or Pistameha*- Urine seems to be mixed with some paste.
- vi. *Shukrameha*- Urine passed mixed along with semen.
- vii. *Sheetameha*- Cold, sweet and increased quantity of urine with increased frequency.
- viii. *Siktameha*- Urine passed with some particles.
- ix. *Shanairmeha*- Quantity of urine is small & passed with difficulty and slowly.
- x. *Alalameha or Lalameha*- Urine is slimy like *kapha* and seems as if full of threads.

##### b. Clinical features of *Pittaja Prameha*

- i. *Ksharameha*- Smell, colour, taste and touch of urine is as like as alkali.
- ii. *Kalameha*- Blackish urination.
- iii. *Nilameha*- Bluish urination.
- iv. *Lohitameha/Shonitameha/Raktameha*- Colour of urine is reddish having the smell of fresh blood and salty taste.
- v. *Manjisthameha*- Colour of urine is like juice of *manjistha* and the smell like of raw flesh and passes frequently.

vi. *Haridrameha*- Colour of urine is like *haridra* (yellow) and the taste is pungent.

### c. Clinical features of *Vataja Prameha*

i. *Vasameha*- Patient frequently passes urine mixed with fat (*Vasa*).

ii. *Majjameha* or *Sarpimeha*- Patient frequently passes urine mixed with bone marrow like substance.

iii. *Hastimeha*- Large quantity of urine passes like elephant.

iv. *Madhumeha* or *Kshoudrameha*- Urine is sweet and little astringent and oja passed in the urine.

### iv. *Samprapti*

#### *Samanya Samprapti of Prameha*

*Charaka* has explained *Samanya Samprapti* of *Prameha* elaborately. [10]

- The *Samanya Samprapti* process commences from the *Nidana Sevana*. The excessive indulgence in *Nidana Sevana* of *Guru, Snigdhadhi Ahara* and *Avyayamadi Vihara* leads to *Kapha Dosha Sanchaya*. It is important to mention that the *Kapha Dosha*, which gets *Sanchita* here, is having the quality of *Bahudravatva*, vividly supported by *Charaka*.
- Due to *Nidana Sevana* the *kapha Dosha* gets *Bahudravatva*. The three factors i.e. *Nidana, Dosha* and *Dushya* get combined together in such a precise way that they leads to *Prakopa* of *Bahudrava Kapha* rapidly. In the first two stages; the *Anukulatva* between *Nidana* and *Dosha* ensues. *Kaphakara Ahara Vihara* vitiates *Kapha Dosha* without any resistance due to similar properties. The *Bahudrava Kapha* is prone to develop *Prameha* and as it is already present in excess quantity from the beginning, hence it gets aggravated rapidly when the *Anukula Nidanas* are continued. This type of *Anukulatva* may be seen in person having *Kaphaja Prakriti* and who are having genetic predisposition for *Prameha*.
- The provoked *Kapha* gets spread all over the body owing to *Sharira Shaithilya*. *Sharira Shaithilya* being one of the *Anukula* factors for *Nidana* towards the *Dosha*.
- *Vikrita Kapha* has affinity towards *Bahu-Abaddha Meda* due to their similar properties and gets lodged there. *Vikrita Kapha* after combining with *Bahu-Abaddha Meda* causes its vitiation; the other important *Dushya* are *Sharira Kleda* and *Mamsa*, which are already increased in large quantity, prior to vitiation of *Kapha*. The provoked *Kapha* with vitiating *Meda* gets combined with *Sharira Kleda* or *Mamsa* or both. This is an important stage because the prodromal symptoms of the disease are manifested in this stage. It is essential to diagnose the disease at this stage to prevent further progress of the disease for better prognosis.
- If not prevented, two types of manifestation will occur:
  1. *Puti Mamsa Pidika* due to *Mamsa Dhatu* vitiation – The vitiating *Kapha* and *Meda* combines with *Mamsa Dhatu* leading to *Puti Mamsa pidika*.
  2. *Mutravaha Srotodushti* due to *Sharira Kleda Dushti* – If vitiating *Kapha* and *Meda* come in contact with *Sharira Kleda*, then it changes in *Mutra*. The vitiating *Kapha* impedes the openings of *Mutravaha Srotas*, which

are already filled with vitiated *Meda* and *Kleda*, thus producing the disease *Prameha*. The above two manifestations of *Kleda* and *Mamsa Dushti* will occur simultaneously or in two stages.

- In the succeeding stage various complications of the disease manifest and the disease progresses towards *Asadhyata* i.e. the disease becomes incurable.

### UPADRAVA:

The term *Upadrava* is applied to a disease, which has taken place in the *Samprapti Ghatakas* of a born disease and can be cured only if the original disease is treated successfully. *Acharya Charaka* enumerated the general complications whereas *Acharya Susruta* and *Vagbhata* described it in terms of the *Dosha* predominance.

#### 1. General Complications: [11]

*Trishna, Atisara, Daha, Daurbalya, Arochaka, Avipaka, Putimamsa Pidaka, Alaji, Vidradhi* etc.

#### 2. Specific Complications: [12]

a. **Kaphaja Meha** – *Makshikopasarpanam, Alasya, Mamsopachaya, Pratishyaya, Shaithilya, Arochaka, Avipaka, Kaphapraseka, Chhardi, Nidra, Kasa* and *Shwasa*.

b. **Pittaja Meha**- *Vrushanayorvadaranam, Bastibheda, Medhra Toda, Hridshula, Amlika, Jwara, Atisara, Arochaka, Vamathu, Paridhumayanam, Daha, Murchha, Pipasa, Nidranasha, Panduroga, Pittavidmutranetratva* and *Vidbheda*.

c. **Vataja Meha** - *Hridgraha, Laulya, Anidra, Stambha, Kampa, Baddha Purishatva, Shosha, Kasa, Shwasa*.

### CHIKITSA: [13] [14] [15]

*Prameha* is a systemic disorder, which involves various body constituents affecting the normal physiology of body organs. Thus to concentrate on the treatment of modalities; it is prime concern to think about each and every factor involved in the pathogenesis, disease severity and associated complications in due regard to provide better management. *Chikitsasutra* (principles of treatment) and *Chikitsa* (proper management) are the two divisions where the concepts and methods are different in different conditions, considering the *Vyadhi Swabhava* and patient. *Charaka, Sushruta* and *Vagbhata* consider that the body constitution and strength of the patient must be assessed, when dealing with the management of *Prameha*. *Charaka* considers two types of patients; one is with stout body structure having strength (*Balawan*) and the other one, which is without strength and *Krishha* in nature. *Sushruta* also says that *Sahaja Meha Rogi* is *Krishha* and *Apathyanimitaja Rogi* is *Sthula*. After considering above factors; two types of management emphasized as:

#### 1. Samshodhana Chikitsa (Elimination Therapy)

*Shodhana* or purification is generally done in obese diabetic (*Sthula pramehi*) with adequate body strength and requires expertise in assessment of vitiated *doshas* and therapy to be applied. *Samshodhana* [*Panchkarma* like *Vamana*(emesis), *Virechana*(purging)] is done in *Sthula pramehi* and later medicine and diet to normalize the condition are given. Mismanagement of *Samshodhana* can lead to more harm than any good. Hence generally, *Shamana chikitsa* is preferred.

## 2. *Samshamana Chikitsa* (Normalizing Therapy)

*Samshamana* means palliative treatment and *Santarpana* treatment. While treating *Prameha*; herbs are used either individually or in combination of other herbs or minerals. The herbs used are mainly of *Katu*, *Tikta*, *Kashaya rasa*. As these *rasas* are considered as *Kaphaghna* and *Pradhana dushya* of *Prameha* is *Kapha*. Herbs with these *rasas* may possess some anti-diabetic activity.

The other parameters are also important to choose the therapy, which includes:

- *Nidanaparivarjana*
- Treatment as per *Dosha*
- Treatment as per *Dushya*
- Treatment as per *Mala*
- Treatment as per Complications

It is advisable that the patient of *Prameha* once diagnosed should be treated at the earliest possible to avoid complications. It is also important to understand that there is a systemic *Agnimandya* and constant derangement of *Oja*. It is important to maintain the status of *Agnibala* and *Oja* of the patient, which becomes the main theme of the treatment.

### • *Nidanaparivarjana*:

This is the prime treatment principle narrated by every *Acharya* before describing the treatment of every disease. *Charaka* enumerated that one should avoid the etiological factors, which are causing the disease *Prameha* and considered it as the prime treatment.

### • Treatment According to Body Constitution:

In *Krisha* patient; it is necessary to use such foods, which are increasing the strength of patient without the vitiation of *Dosha*. Later, after achieving the proper strength and performing *Shodhan*; *Chikitsa* can be applicable. In *Sthula* patient; the application of *Apatarpana Chikitsa* along with Panchkarma chikitsa is most suitable.

### • Treatment According to *Dosha* Predominance:

Though the disease is *Tridosha* predominant, individual *Dosha* consideration for the treatment is important for good prognosis. This includes *Samshodhan Chikitsa*, where elimination of vitiated *Doshas* performed with the process of *Vamana*, *Virechana* and other allied therapies depends upon the condition and its utility. *Samshaman Chikitsa* is also necessary for proper management of the diseases. The selection of the therapies and allied medicines must correlate with the vitiation of *Doshas* and their severity.

### • Treatment According to *Dushya* Predominance:

The main *Dushya* involved in the pathogenesis are *Rasa*, *Meda*, *Mamsa* and *Kleda*. They are closely related with each other because of same the qualities and same etiological factors. Hence the treatment principles are more or less same to alleviate them.

### • Treatment According to *Maladusti*

The selection of proper therapy also considers the manifestation of *Mala* involved. The *Dushti* of *Dushyas* like *Sweda* manifests in large extent in *Prameha*, so the treatment like *Lepa*, *Jalavaseka*, *Udvartana* can be applicable.

In *Dushti of Mutra* a common *Pramehahara* therapy must be applied. In the *Dushti of Purisha*, mild purgatives and *Basti* are essential depends upon the requirement.

#### • Treatment According to Complications:

If complications are seen in the patients; it is necessary to use multiple treatment modalities for its management. The complicated measures are mostly related with *Pidaka*. In this condition *Vranaropana*, *Udvartana* and *Parisechana* processes are applicable. Thus the proper combination of above treatment modalities according to the consideration of each and every factor may prove beneficial for the patient of *Prameha*.

#### Discussion-

An Ayurvedic classic elaborately describes the general etiological factors of *Prameha* and classifies into *Sahaja* and *Apathyanimitaja*. *Charaka*, while describing the prognosis of the *Prameha*, clearly highlights that the *Kulaja Vikara* is the main causative factor for the defect in the *Beeja*. *Chakrapani* opines that father, mother or grandparents can cause it. It means the disease is inherited from generation to generation. *Charaka* narrated etiological factors according to *Dosha* predominance in *Nidana Sthana* and common etiological factors in *Chikitsasthana*. *Sushruta* adds *Snigdha* (unctuous), *Medhya* (fatty) and *Drava* (liquid) type of food are also among causative factors. According to *Vagbhata*; the diet and activities, which increase *Meda*, *Mutra* and *Kapha*, are supposed to cause *Prameha*. In Ayurvedic Classics; the *Samhitakara* has contributed twenty types of *Prameha*. *Samanya Roopa* of *Prameha* is *Prabuta mutrata* (Excessive urination) and *Avila mutrata* (Turbidity in the urine).

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