

## Sahacharadi Yapan Basti a silver bullet in ayurvedic management of diabetic peripheral neuropathy- a case study

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### Abstract

**Introduction:** Diabetic Peripheral Neuropathy (DPN) is the most common complications of Diabetes Mellitus (DM). It is a nerve damaging disorder mainly associated with Type-1 and Type-2 DM. These conditions are result from Diabetic Microvascular injury involving small blood vessels that supply nerves. Here we present a case study which was successfully managed with *Ayurvedic* medications and *Panchakarma* therapy.

**Material and Methods:** A 64 years old Male patient suffering from DPN was managed with *Panchakarma* therapy and oral *Ayurvedic* medications. *Bala-Ksheer Shalishashtik Pinda Sweda* for 30 days *Sahacharadi Yapan Basti* were given total 3 sittings of *Basti* of 8 days with 10 days of resting period after every sitting. Oral *Ayurvedic* Medications like *Suvarna Malini Vasant* 125mg were administered once daily with *Goghrita, Panchamrut Loha Guggulu* 500mg thrice in a day etc. These oral medicines continued for 2 months.

**Result:** By using Modified Neuropathy Disability Score and Grading for Neuropathy were assessed and it shows good improvement. Before treatment patient was suffered from severe peripheral neuropathy which was changed to mild neuropathy after 2 months' treatment. Conclusion- Study result indicates that *Panchakarma* and *Ayurvedic* drugs may play a major role in the management of DPN.

**Keywords:** Diabetes Mellitus; Diabetic Peripheral neuropathy; *Yapana Basti*; *Madhumeha*

### 1. Introduction

Diabetic neuropathy, which occurs in ~50% of individuals with long-standing type 1 and type 2 DM, manifests as a diffuse neuropathy (distal symmetrical polyneuropathy and/or autonomic neuropathy), a mononeuropathy, and/or a radiculopathy/polyradiculopathy. Distal Symmetric Polyneuropathy (DSPN) the most common form of diabetic neuropathy, most frequently presents with distal sensory loss and pain. Symptoms may include a sensation of numbness, tingling, sharpness, or burning that begins in the feet and spreads proximally. Hyperesthesia, paraesthesia, and dysesthesia also may occur. Pain typically involves the lower extremities, is usually present at rest, and worsens at night. Both an acute (lasting <12 months) and a chronic form of painful diabetic neuropathy may occur. Autonomic Neuropathy Individuals with long-standing type 1 or 2 DM may develop signs of autonomic dysfunction involving the parasympathetic (cholinergic) and sympathetic (adrenergic) systems. DM-related autonomic neuropathy can affect multiple organ systems, including the cardiovascular, gastrointestinal (GI), genitourinary, sudomotor, and metabolic systems.<sup>[1]</sup>

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Managing diabetes and blood glucose levels are the only treatment in other medicine system which provides only symptomatic relief. DPN can be considered as the complications uncontrolled Diabetes Mellitus. [2] In *Ayurvedic* texts, *Basti* has its own special importance in the management and cure of various disorders specially *Yapana Basti* promotes the longevity of life. [3]

*Daha* is described among the *Upadravas*(complications) of *Prameha*. [4] These are very common features of diabetic neuropathy. According to *Ayurvedic* principles, there is involvement of *Vata* and *Pitta Dosa* in diabetic neuropathy. [5]

Here we represent a case of diabetic neuropathy which was successfully treated with *Ayurvedic* management.

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## 2. Case report

A 64 years old Male *Hindu* religion admitted in IPD of *Sane Guruji Aarogya Kendra*.

### 2.1. Chief complaints

Severe pain, numbness and burning sensation in Bilateral upper and lower extremities, hyperesthesia since 6 months. Anorexia, constipation since 15 days.

### 2.2. H/O present illness:

Patient was a known case of Diabetes Mellitus Type 2 since 10 years. Then he gradually developed pain, numbness and burning sensation in Bilateral upper and lower extremities, especially in lower extremities since 6 months.

Patient was unable to walk and do daily activities since 2 months.

VAS scale was 10/10.

Patient took allopathic medicine for 6 months but didn't get relief.

### 2.3. H/O Past Medical illness:

K/C/O:DM Type 2 since 10 years

Bronchial Asthma since 10 years

### 2.4. H/O Past Surgical illness:

- -Permanent Pacemaker Implementation done 9 years Back.
- -Left Hip Joint Replacement was done 1year back.

### 2.5. Family History

Not Significant

### 2.6. Addiction History

Ex Alcoholic

### 2.7. Treatment History

Patient has a history of Allopathic medicines but had no relief.

Patient was taking oral hypoglycaemic agents.

### 2.8. Personal History

- G.C – Poor
- Appetite – Decreased
- Diet -Mixed
- Urine - Increased frequency and amount
- Bowel – Constipated

- Thirst - Excessive
- Sleep - disturbed due to burning

## 2.9. On examination

### 2.9.1. General Examination

- Pulse - 70/min,
- B.P. - 130/80mmHg
- RS-B/L LL Crepts
- CVS-Normal Heart Sounds
- CNS-Conscious & well oriented to Time, Place, Person.
- Per Abdomen-Soft but mild tenderness present over Epigastric, Umbilical region.
- Pallor- Absent
- Tongue- Coated
- Icterus - Not present
- Lymph nodes - Not palpable
- Cyanosis - Not present
- Oedema- Not present
- JVP – Not raised
- Height-170cm
- Weight- 75kg

### 2.9.2. Neurological Examination

Diminished tendon reflexes were observed in four extremities especially in Biceps and Ankles. There was glove and stocking paraesthesia, and distal weakness of the hands with lower extremities.

Loss of Grip of Upper Limb.

### 2.9.3. Clinical Findings

NCV study was done. It showed Sensory plus Motor Axonal Peripheral Neuropathy affecting B/L Lower Limb.

- ANA Blot-Negative
- BSL-F-170mg/dl
- PP-200mg/dl
- HbA1C- 7.8%

### 2.9.4. Differential Diagnosis

Diabetic Peripheral Neuropathy, Osteoarthritis, Autoimmune Disorders, Chronic Demyelinating Polyneuropathy.

Patient had normal biochemical and haematological parameters except for blood sugar with decreased biceps, ankle reflexes and decreased vibration perception to a 128-Hz tuning fork. There was glove and stocking paraesthesia, decreased ankle reflexes and an abnormally decreased vibration perception to a 128-Hz tuning fork are the characteristics of diabetic peripheral neuropathy. Hence Diabetic peripheral neuropathy was considered as the primary diagnosis for the case.

### 2.9.5. Assessement criteria

### 2.9.6. Visual Analogue Score

**Table 1** Assessment of pain

Score	Pain
0	None
2	Mild

4	Moderate on rest but dreadful on pressure application
6	Dreadful
8	Severe
10	Pain as bad as it could be

**Table 2** Assessment of Tingling sensation

tingling sensation	Score
No tingling sensation	00
Tingling sensation only on feet	01
Numbness in whole lower limbs	02
Numbness on other parts of body along with lower limbs	03

**Table 3** Assessment of Burning Sensation

burning sensation	Score
Burning sensation	00
Burning sensation only in foot soles	01
Burning sensation in whole lower limbs	02
Burning sensation in all over the body	03

**Table 4** Assessment of Symptoms before Treatment

Sr.no.	Symptoms	Before treatment
1.	Tingling sensation	03
2.	Burning sensation	03
3.	Pain	10

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### 3. Treatment

The treatment was carried out with following *Panchkarma* Procedures along with other oral *Ayurvedic* medicines.

**Table 5** Oral *Ayurvedic* Medications

Sr.no.	<i>Dravya</i>	Dose	Duration	<i>Anupana</i>
1.	<i>Suvarna malini vasanta</i>	125mg	1od	<i>Goghrita</i>
2.	<i>Panchatikta loha guggulu</i>	500mg	Tds	<i>Koshna jala</i>

#### 3.1. Panchakarma

Panchkarma Procedure includes

- *Sarvang Snehana* with *Kottamchukadi Taila* for 8 days
- *Sarvang Swedana* with *Bala Ksheera Shashtishalik Pinda Sweda* for 8 days
- *Basti* (*Yoga Basti* Schedule)

*Niruha Basti* by *Sahacharadi Yapan Basti* (350 ml)

*Anuvasan Basti* by *Sahchar Taila* (150ml)

The patient is planned for *Sahacharadi Yapan Basti* in 1st sitting for 10 days.

3.1.1. Step 1 –*Sahacharadi Yapan Basti* for 10 days.

**Table 6** Contents of *Anuvasan Basti*

Ingredients	Quantity
<i>Sahachar Taila</i>	150ml

**Table 7** *Sahacharadi Yapan Basti* Ingredients: *Yapan Basti* should be prepared

Ingredients	Quantity
<i>Kwatha dravyas</i>	40 gm
<i>Sahachar</i> ( <i>Strobilanthes ciliates</i> Nees)	10 gm
<i>Bala</i> ( <i>Sida cordifolia</i> )	10 gm
<i>Darbha mool</i> ( <i>Desmotachya bipinnata</i> )	10 gm
<i>Sariva</i> ( <i>Hemidesmus indicus</i> )	10 gm
<i>Kalka dravyas:</i>	6 gm
<i>Yashti</i> ( <i>Glycyrrhiza glabra</i> )	2 gm
<i>Madanphala</i> ( <i>Randia dumetorum</i> )	2 gm
<i>Pippali</i> ( <i>Piper longum</i> Linn.)	2 gm
<i>Godugdha</i>	320 ml
<i>Jala</i>	1280 ml
<i>Madhu</i>	80 ml
<i>Saindhav</i>	5 gm
<i>Goghrita</i>	40 ml
<i>Tila Taila</i>	40 ml

By using *Kwatha* and *Godugdha*, *Ksheerpaka*(320ml) was made. *Sahacharadi Yapan Basti* was prepared by adding *Madhu*(80ml) + *Saindhav*(5gm) + *Goghrita*(40ml) +*Tila Taila*(40ml) + *Ksheerpaka*(320ml).

All *Ayurvedic* principles were kept in mind while preparing *Basti*. Alternate *Anuvasan Basti* with *Sahachar Taila* (150ml) and *Niruha Basti* with *Sahacharadi Yapan Basti* (350ml) were given to the patient for 8 days.

- Step 2 - Gap of 10 days.
- Step 3 - 2nd sitting of *Sahacharadi Yapan Basti* for 8 days
- Step 4 - Gap of 10 days.
- Step 5 - 3rd sitting of *Sahacharadi Yapan Basti* for 8 days

- Step 6 – Gap of 10 days.

Follow up for the period of 2 months were done.

### 3.2. Observations

**Table 8** Observations After treatment

Sr.no.	Symptoms	Before treatment	After treatment
1.	Tingling sensation	03	00
2.	Burning sensation	03	01
3.	Pain	10	02

## 4. Results

After giving the above treatment for the 2 months patient's complaint of pain got reduced from severe to mild. The condition of the patient got improved. He was able to walk more efficiently than before and able to do his daily work. Also improved his disturbed sleep, decreased appetite and bowel habit. Along with these benefits there were no any adverse effects of the given treatment found in the patient.

## 5. Discussion

### 5.1. Action of Abhyanga and Bala-Ksheer Shalishashtik Pinda Sweda

The medium in Abhyanga is our skin, it is the largest surface area as compared to the other senses. Skin has the greatest capacity to receive different signals and to respond to them accordingly. All the benefits of Abhyanga are directly or indirectly related with the stimulation of autonomic nervous system and central nervous system. [6] Kottamchukadi Taila has Lekhaniya effect when used externally. It does Doshavilayana (liquefaction of Dosha) and Srotoshodhana which helps in relieving Margavarana (obstruction of channels) of Vata. It will reach to Sukshma Srotas (minute channels) and thus help in pacifying Vata dosha. Ushna, Ruksha and Tikshna (sharp) properties help in pacifying Sheeta (cold) Snigdha (unctuous) properties of Kapha efficiently. [7]

Shashtika Shali (rice harvested in 60 days) Pinda Sweda is performed on Sarvanga with the bolus of boiled Shashtika shali with Balamoola kwatha and Ksheera. The main properties of Shashtika are Snigdha, Guru, Sthira, Sheeta and Tridoshaghna. Though a Swedakarma, it has Brimhana Guna. [8]

### 5.2. Effect of Sahacharadi Yapan Basti

Yapanam means prolonging and supporting life.

Yapana Basti is also defined as that which can be used for longer periods (prolonged use) and that which promotes longevity. It has properties of both Sneha Basti and Niruha Basti. It can be utilized for healthy people, sick people, young and old. Yapana Basti is curative of all diseases and suitable in all seasons. [9]

The ingredient drugs of Sahacharadi Yapana Basti have predominant Vatahara, Shukravardhak, Balavardhak, Mamsavardhak and Rasayana properties. Hence it is being a type of Niruha Basti, does the Shodhana as well as it gives strength to the patient. [10] The drugs used in the Sahacharadi Yapana Basti might be able to break the pathophysiology of DM. Laghu, Ruksha Guna and Ushna Virya of Sahacharadi Yapana Basti might be able to break the Avarodha of Meda Kleda, as it is given in form of Basti it will also normalise the Vyana Vayu. The above properties of Basti are suited for the condition of Dosha Dushya of the disease. All the ingredients of Sahacharadi Yapana Basti including Sahachara are potent Vatashamaka. Bala provides nourishment to the muscles and ligaments involved in the joint which play an important role in maintaining the strength of the joint. Sariva acts on Raktadhatu which also plays a crucial role in joint mechanics. Along with that the other ingredients including milk, Ghee and oil are important to provide nourishment to the degenerated joint as well as to appease the vitiated Vata. [11]

## 6. Conclusion

Sahacharadi Yapana Basti due to its Tridoshaghna may be helpful in reducing the sign and symptoms of the Diabetes Mellitus and its complications by improving the functions of liver, kidney, urinary bladder and by correcting the Avarodha formed by Meda and Kleda as this Basti is Kaphashamak and also Balya for Mootravaha Strotas. The result shows that the Ayurvedic treatment modalities were found quite effective and reliable for the treatment of Diabetic Peripheral Neuropathy which can be well correlated to Upadravas of Madhumeha. However, further work should be done on large samples to draw the final conclusion.

## Compliance with ethical standards

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### *Disclosure of conflict of interest*

This work is not published anywhere. The authors declare no conflict of interest.

### *Statement of informed consent*

Informed consent was obtained from all individual participants included in the study.

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