



Effect of *Nishakatakaadi Kwath* and *Chandra Prabha Vati* in Patient of *Prameha* (Diabetes mellitus) - A Case Study

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ABSTRACT

Diabetes mellitus (DM) has become an expanding global health problem widespread among all the socioeconomic groups, leading to various complications such as nephropathy, neuropathy, and retinopathy which are responsible for morbidity and mortality. Ayurvedic approach to pathogenesis of *Prameha* can provide solution in managing the incidence of diabetes among population by using various preparations. This is a case study of newly diagnosed *Prameha* (type 2 diabetes mellitus) patient treated completely using Ayurvedic principles. In the present case report, a 54-year-old female patient was treated with *Nishakatakaadi Kwath and Chandraprabha Vati*. After 2 months of strict Ayurveda protocol which basically included *Shamana* therapy, the fasting blood sugar (202mg/dl initially then reduced to 84mg/dl post treatment) and Post Prandial sugar level (From 327mg/dl initially then to 96mg/dl after treatment) decreased profoundly. The present study indicates that the *Nishakatakaadi Kwath and Chandraprabha Vati* are effective in the treatment of *Prameha* (Diabetes).

Key Words: Diabetes mellitus, Chandraprabha Vati, Nishakatakaadi Kwath, Prameha

INTRODUCTION

Diabetes mellitus is a chronic, metabolic disease of multiple aetiology characterized by hyperglycaemia with disturbance of carbohydrate, fat and protein metabolism resulting from defects in insulin secretion, insulin action or both. The effects of diabetes mellitus include long-term damage, dysfunction and failure of various organs i.e., heart, blood vessels, eyes, kidneys and nerves¹. Diabetes mellitus may present with characteristic symptoms such as polyuria, polydipsia, polyphagia. The most common type of Diabetes is type 2 diabetes, seen usually in adults, which occurs when the body becomes resistant to insulin or does not produce insulin enough quantities to satisfy the need of the body. In the past three decades the occurrence of type 2 diabetes has raised enormously in countries of all income groups². On the basis of its symptoms *Prameha* can be correlated to the features of Diabetes mellitus. It is a clinical condition in





which the patient passes large quantity of urine similar to that of *Madhu* or Honey having *Kashaya* (Astringent) and *Madhura* (Sweet) taste, *Ruksha* (Dry)texture and honey like colour making the body attain sweetness³. *Prameha* includes a number of metabolic disorders characterized by specific peculiarity in urine, due to excretion of products of metabolism, which may or may not be normal constituents of urine. In *Ayurveda Prameha* is an umbrella term for 20 disorders involving the entire urinary system, mainly characterized by excessive urination⁴. The classification of *Prameha* can be summarized according to the Dosha types in the table given below (Table Number 1)-

 Table 1 Classification of types of Prameha

Prameha	Sub-types	Stages	
Kaphaja	10	Sadhya (Can be	
		cured)	
Pittaja	6	Yapya (Can kept	
-		under control)	
Vataja	4	Asadhya (Difficult	
-		to treat)	

The classical symptoms of Diabetes are similar to those mentioned in Ayurveda like thirst, polyuria, nocturia and rapid weight loss. Many Patients who might lack the presentation of classical symptoms or who are considered as asymptomatic might be having non- specific complaints such as chronic fatigue and malaise⁵.

 Table 2 Constituent drugs of Nishakatakadi Kwath

Traditionally, hundreds of herbs are used in Avurveda for the effective management of Prameha. According to ethno botanical information, there are as many as 800 different plants used in the traditional treatment of diabetes mellitus⁶. Treatment of Diabetes mellitus without any adverse effects remains a significant challenge even to modern medicine. Ayurveda can play an essential role for both management and prevention of Diabetes and its adverse effects. Here the presented case explains the effective treatment approach of Ayurvedic Drugs on newly diagnosed patient of Diabetes Mellitus.

MATERIALS AND METHODS

Nishakatakaadi Kwath (10ml) and Chandraprabha Vati (2tab) were administered in Diabetes mellitus positive cases.

A) Nishakatakadi Kwath

Nishakatakaadi Kwath contains 8 herb mineral ingredients⁷. There is mention of the said Kwatha in *Prameha Roga- Adhikara* in the text *Sahastrayogam*. Details of the constituent drugs of *Nishakatakadi Kwath* are enlisted in the table given below (Table 2).

Sr. no.	Drug	Latin name	Part used	
1.	Haridra	Curcuma longa Linn Rhizome		1
2.	Kataka (Nirmali)	Strychnos Potatorum L.f.	1	
3.	Paranti	Ixora coccinea L.	Root	1
4.	Lodhra	Symplocos racemose Roxb. Bark		1
5.	Amalaki	Emblica officinalis Gaertn.	Fruit	1
6.	Gorakshaganja	Aerva lanata (L.) Juss.Ex		1
7.	Gudmar	Gymnema sylvestre R. BR.		1
8.	Ushira	Vetiveria zizanioides Linn	Root	1
9.	Water (use for preparation			16
	of decoction)			





B) Chandraprabha Vati

Chandraprabha Vati is again a traditional and time tested medicine to combat the disorders related to Urinary Tract and especially Diabetes mellitus. This compound made up of 37 ingredients is useful in all kinds of *Prameha Roga*. Ingredients of *Chandraprabha Vati* (37 herb mineral ingredients)⁸ are enlisted as follows in the table given below (Table 3).

Sr. no.	Drug	Latin name	Part used	Ratio
1.	Chandraprabha (Karpura)	Cinnamomum camphora T Nees	Deposits in the oil cells (camphor)	1
2.	Vacha	Acorus calamus Pennel	Rhizome	1
3.	Mustaka	Cyperus rotundus Linn	Tuber	1
ŀ.	Bhunimbha	Andrographis paniculata Pennel	Whole plant	1
5.	Amurta	Tinospora cordifolia Miers	Whole plant	1
<i>.</i>	Daru	Cedrus deodara Roxb. ex. Lamb	Heartwood	1
7.	Haridra	Curcuma longa Linn	Dried rhizome	1
3.	Ativisha	Aconitum heterophyllium Wall.ex Royle	Root	1
).	Darvi	Berberis aristata DC.	Whole plant	1
0.	Pippalimula	Piper longum Linn	Root	1
11.	Citraka	Plumbago zeylanica Linn	Purified Root	1
12.	Danyaka	Coriandrum sativum Linn	Fruit	1
13.	Vibhitaki	Terminalia belarica (Gaertn.)	Fruit	1
4.	Haritaki	Terminalia chebula Retz	Fruit	1
5.	Amalaki	Emblica officinale Gaertn	Fruit	1
6.	Cavya	Piper cheba Vahl.	Root	1
7.	Vidanga	Emblica ribes Burm F	Fruit	1
8.	Gajapippali	Scindapsus officinalis Schoot.	Fruit	1
9.	Shunti	Zingiber officinale	Rhizome	1
20.	Maricha	Piper nigrum Linn.	Fruit	1
21.	Pippali	Piper longum L.	Dried spike	1
22.	Swarnamakshika	Copper pyritis	Bhasma	1
23.	Yavakshara	Potassium carbonate		1
24.	Swargiksha	Sodium bicarbonate		1
25.	Saindavalavana	Rock salt		1
26.	Savvarcalalavana	Black salt		1
27.	Vid lavana	Ammonium chloride		1
28.	Trivurt	Ipomea turpethum Linn.	Root	4
29.	Danti	Baliosperum montanum L.	Root	4
30.	Twak	Cinnamomum zeylanicum J.S.	Bark	4
31.	Ela.	Elettaria cardomomum	Seed	4
32.	Vankshalochana	Bambusaa rundinaceae		4
33.	Tejapatra	Cinnamomum tamala Nees	Leave	4
34.	Lauha Bhashma	Ferrum	Bhasma	8
35.	Sita	Sugar		16
36.	Shilajatu	Aspelt mineral pitch	Purified Shilajatu	32
37.	Guggulu	Balsamodendron mukul	Resinous gum- (purified)	32

Table 3 Ingredients of Chandraprabha Vati

CASE REPORT

A 54-year-old female patient, visited outpatient department of All India Institute of Ayurveda with the gradually increasing complaints of *Pipasa*-

Aadhikya (~excessive thirst), Prabhoota- mutrata (~excessive urination), Madhurya-Aasya (~sweetness of mouth) from past two months. The patient had no history of diabetes, hypertension





and no positive family history. As the patient recently developed the symptoms of *Prameha* and got diagnosed for DM only after blood investigations, the patient was not under any conventional therapy. There was no history of alcohol, tobacco or drug addiction.

Clinical findings: On general examination, the patient was of light brown complexion with medium built. On the examination of bulbar conjunctiva, icterus was absent. Blood pressure was 120/80 mm of Hg and pulse was 70/min. Tongue was coated. On systemic examination, no circulatory, respiratory and nervous abnormality were noticed.

Ashtavidhapareeksha(~eight-foldexamination): Nadi (~pulse) was Kaphaja, Mala(~bowel) was irregular, Mutra (~urine) wasexcessive (7-8 time/day & 3-4 time/night), Jihva(~tongue) was Sama (~coated), Shabda (~voice)was Sadharana (~normal), Akriti (~body built)was Madhyama (~moderate), Sparsha (Bodytemperature and Texture) was Sheeta Snigdha andand Drik (~vision) was normal. The Observationsare summarized in the table given below (Table 4)Table 4 Observations of Ashtavidha Pareeksha (Eight Fold

Nadi (~pulse)	Kaphapradhana , Manda	
Mala (~bowel	Irregular	
Habit)	-	
Mutra (~urine)	Excessive (7-8 time/day and 3-4	
	time/night)	
Jihva(~tongue)	Sama (~coated)	
Shabda (~voice)	Sadharana (~normal)	

Evamination)

Akriti	(~body	Madhyama (~moderate)
built)		
Drik (~v	ision)	Normal
Sparsha		Sheeta , Snigdha

Dashavidha pareeksha (~ten-fold examination): Prakriti (~body temperament) was Kapha-Vataja, Vikriti was Kapha pradhana, Sara (~excellence of tissues) was Madhyama, Samhanana (~compactness of organs) was Madhyama, Satmya (~suitability) was Avara (~poor), Satwa (~psyche) was Pravara (~superior), Pramana (~measurement of body organs) was Madhyama, Aahara Shakthi (~food digesting power) was Madhyama, patient was vegetarian (Madhura, Amla rasa pradhana), *Vyayama shakti* (~power of performing exercise) was Avara and Vaya (~age) was Madhyama. Aforesaid results of observations of tenfold examination is depicted in the table given below (Table 5)

Table 5 Observations of Dashavidha Pariksha (TenfoldExamination)

Prakriti (~body	Kapha- Vataja
temperament)	
Vikriti	Kaphaja pradhana
Sara (~excellence of	Madhyama
tissues)	·
Samhanana(~compactness	Madhyama
of organs)	
Satmya (~suitability)	Avara
Satwa (~psyche)	Pravara (~superior)
Pramana (~measurement	Madhyama
of body organs)	
Aahara Shakthi (~food	Madhyama
digesting power)	
Vyayama shakti (~power of	Avara
performing exercise)	
Vaya (~age)	Madhyama

 Table 6 Treatment Protocol: Consolidated Treatment protocol advised to the patient is summarized in the table given below

Drug	Quantity	Anupana	Time of	Duration
-			Administration	
Nishakatakadi Kwatha	10ml- B.D.	Ushana Jala	Before meal (empty	2 months
			stomach)	
Chandraprabha Vati	2 Tablet- B.D.	Ushana Jala	After meal	2 months



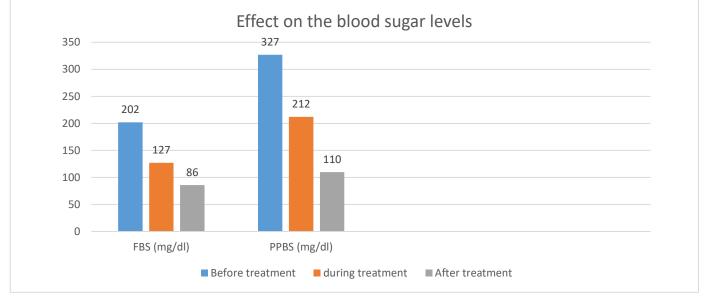


RESULTS

After the completion of two-month *Shamana* therapy significant Improvement was observed on objective and subjective signs and symptoms as Follows.

a) Subjective Criteria = Complete relief from Pipasa- Aadhikya, Prabhoota- Mutrata, Madhurya-Aasya. b) Objective Criteria = After the therapy, i.e. two months later, fasting blood sugar of the patient was examined and found to be 86mg/dl while post prandial blood sugar was 110mg/dl, which was found in the normal range. Effect of the treatment can be observed in enlisted Table 7 and Graphically depicted in the Graph given below.

Table 7 Effect on the blood sugar levels					
Test	Before treatment	During treatment	After treatment		
Blood Sugar level Fasting	202 mg/dl	127mg/dl	86 mg/dl		
Blood Sugar Level Post Prandial	327 mg/dl	212mg/dl	110 mg/dl		



Graph no. 1 Effect on the blood sugar levels

DISCUSSION

Nishakatakaadi Kwath is a decoction and Chandraprabha vati is an Ayurvedic formulation available in classical Vati form. Both are prepared from some different herbs that have antidiabetic and anti-hyperglycaemic properties. In Nishakatakaadi Kwath maximum drugs possess Kashaya, Tikata rasa, Laghu, Ruksha guna. Prameha is caused by Kapha Vata Pitta Medo Dushti, as Nishakatakaadi Kwath had Vata-Kaphahara properties due to Sheeta, Ushna

Veerya and Madhura, Katu Vipaka. This Rasa and Vipaka of the drugs help in alleviating the Prameha. In Chandraprabha vati as well most of ingredients exhibited glucose lowering activities. Chandraprabha vati formulation is mostly effective in Kapha and Vata-Dosha. Majority of drugs have Katu, Tikta, Kashaya Rasa and the prime Virya is Ushna, dominant Vipaka is Katu-Vipaka which helps in reducing the symptoms of Prameha. Prameha being Santarpanottha vyadhi and Rugna Bala was also







Pravara, the above-mentioned drugs helped in relieving the symptoms. As most of the drugs were of Kashaya, Tikta Rasa and Katu Vipaka both of the drugs are useful in Kaphaja Prameha. Similarly, these are useful in the Poorvaroopa state of the disease. The intervention showed dynamic improvement in the blood sugar levels. Substantial symptomatic relief was also observed. As the patient was treated in the prodromal state itself reversal of disease pathogenesis was observed. Thus, the patient was benefited as the need for the conventional therapy was substantially reduced. As the patient was newly diagnosed Hba1c levels were not assessed priory. Further study can be done on larger sample using HbA1c level as one of the objective criteria. This trial proved effective this case to provide relief from the symptoms and further arresting the progression of prognosis of disease in the patient.

CONCLUSION

Diabetes mellitus is reaching potentially epidemic proportions in India. The potential complications of Diabetes are enormous and pose significant healthcare burdens on families and society. *Nishakatakaadi Kwath and Chandraprabha Vati* have showed the significant improvement in the symptoms of *Prameha* and blood sugar levels. The treatment used here was purely Ayurvedic without any interference of contemporary drugs in order to bring out proper conclusion on the usage and efficiency of Ayurveda treatment. Also, no Adverse or unwanted reactions were observed. So, Ayurvedic medicines can be considered as a mainstream treatment in case of newly diagnosed Diabetes mellitus.

Conflict of Interest: No conflict of interest





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