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Critical Analysis of Prameha Upadravas (Diabetes Complications): An Overview

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ABSTRACT

Prameha (Diabetes Mellitus) is a Kapha pradhana Tridoshaja Vyadhi (Disease) in which Meda is a Pradhana (Prime) Dushya. According to the Avastha Bheda, Dasha Dushyas involvement can be observed. It is characterized by "Prabhootaavilamootrata". Prameha is a Chirakaaleena (chronic) Vyadhi, which is Anushangi (adjunct) in nature and one among the 8 Mahaagadhas as described by Sushruthacharya. Upadrava (complication) is an episode of a morbid event which develops by the factors which are responsible for the manifestation of main disease. It may be Sthoola or Anu in nature. It subsides by treating the main disease. Prameha Upadravas can be broadly classified into Samanya & Vishishta, Sthoola (major) & Anu (minor) and Sthanika (local) & Sarvadaihika (general). Kaphaja, Pittaja and Vataja Prameha lakshanas are related to different clinical stages and complications of Diabetes Mellitus. Vivid description of signs and symptoms of Prameha and its Upadrava has been given by all the classical texts. Most of them explained Upadravas in brief compared to the exhaustive descriptions of Nidana panchaka.

Keywords: Prameha, Upadrava, Complication.

1. Introduction

Upadrava is one which occurs in the course of some other disease, although it may result from the main disease. The morbid process occurring during a disease may be a minor or major ailment^[1]. Upadrava means which manifest after the genesis of the main disease. This episode has been superimposed, altering symptoms and modifying its course as a result disease may become difficult for management. Chakrapani said that the signs and symptoms of a disease which appear at different stages, especially at the later stage of the disease should be considered as the signs and symptoms of the original disease and not as the complications^[2]. Different stages of a disease are invariably manifested during the process of pathogenesis and all these stages constitute a disease, but Upadravas may or may not be manifested which represent a distinct stage of development in a disease. But if a disease manifest by powerful Doshas, Dushyas etc then it is possible that the ailments which constitute upadrava may also get manifested right from the inception of the disease. Sushrutha mentions word Aupasargika as a synonym to Upadrava. It also means that Upadrava manifests upon another disease and also due to same factors which are responsible for the manifestation of the main disease^[3].

2. Description of upadravas (Complications):

The disease Prameha can be understood as having three stages based on the severity of Dhatudusti and Kaphaja, Pittaja and Vataja lakshanas are manifested in the I II and III stages respectively. But Upadravas are manifested only in the terminal stage i.e. with the Dusti of all Dhatus. Hence the description of Kaphaja, Pittaja and Vataja Upadravas is obviously not limited only to the respective Pramehas. If it had been so, then in the stage of Kaphaja Pramehas, Upadravas are less likely to develop, as there is minimum Dhatukshaya. Therefore the Kaphaja, Pittaja and Vataja Upadravas are the result of the disease according to the predominance of the respective Doshas in the severe form of Prameha and also Charaka has clearly mentioned that the Lakshanas of the Tridoshas manifest intermittently in Prameha. Prameha is a Tridoshaja Vyadhi and although the Upadravas are also severely manifested with the involvement of all Doshas, the involvement of predominant Doshas will cause certain Upadravas.

3. Upadravas can be studied under following headings:

- i. **Samanya** ^[4] and **Vishesha** ^[5]
- ii. **Based on severity a) Sthoola b) Anu**
- iii. **Sthanika and Sarvadaihika**

The classification of Samanya Upadravas and Vishista Upadravas has been done just for the sake of convenience. Actually the most commonly encountered Upadravas have been described by Charaka and Bhela. They have not classified them specifically as Kaphaja, Pittaja and Vataja as Sushruta, Vagbhata and Bhavaprakasha, who have described them separately. Also the classification of upadrava as Sthoola and Anu, Sthanika and Sarvadaihika are not mentioned in classics. As the disease Prameha is one of the Mahagada, it is considered as Anushangi and it is also called as Mahatyaya, because of its Sheegra Vinasha Karitva (rapid destruction) of the body due to Ojosravana (passing of essence of tissue elements) in the form of Mutra (urine). In the initial stages of Oja Kshaya (depletion of oja), there will be mild form of Upadrava, this can be considered as Anu Upadrava and when the loss of Ojas is severe, then there will be severe form of Upadrava, which causes the death of the individual and it can be termed as Sthoola Upadrava. Since both Sthanika and Sarvadaihika Lakshanas seen in the form of Upadrava of Prameha this classification will be useful in specifying the treatment.

4. Upadravas:

4.1 Trishna (Thirst): It is defined as Paneeya Sevana Icha (polydypsia), Pipasa is its synonym. It is one of the important Upadrava of Prameha. This is experienced by most of the patients during the course of the illness. Word Prameha itself denotes that there is excess Sravana of Mootra (polyuria). Due to this Kleda Amsha (fluid) in the Shareera gets depleted. This decreased Kledamsha in turn causes increased Rukhastha which leads to Apdhatu kshaya which leads to Shoshana (dryness) of Gala, Taalu & Osta leading to Trishna. It is also mentioned that Upasargaja Trushna is one of the complications of Prameha. Here Ushna Guna of Pitta and Ruksha Guna of Vata play a vital role to bring about Trishna. It has been described as Asadhya (incurable) if Trushna develops as a Upadrava of Prameha and Charaka says that it is a Dirgha Roga and results in Marana (death) if neglected or if developed as Upadrava ^[6].

4.2 Atisara (Diarrohea): Atisara as Upadrava is mentioned both in Samanya and Visheshha classification of Upadrava. In Visheshha it is classified under Pittaja Upadrava. Due to increase Vata in Pakwaashya and Pitta vitiation leads to Agnimandhya causing Atisara.

4.3 Jwara (Fever): Jwara is mainly due to Pitta Pradhanyata^[7] among Tridoshas. In Pittaja Prameha were relatively there is more involvement of Medas (adipose tissue) and Rakta, Jwara is seen. In Prameha there is Dhatu Kshaya which further leads to Ojonasha. Due to this there will be decreased Vyadhikshamatva (immunity) leading to Jwara.

4.4 Daha (Burning sensation): Agnidagdhasyaeva ^[8] Sarvanga Dahanamiva is considered as Daha and it is a Pittaja Nanatmaja Vikara ^[9]. According to Sushruta Daha is manifested due to Dhatukshaya. In Prameha there is severe Dhatukshaya which is the leading cause for Daha especially in Hasta (palm) and Paada (sole) similar to Agnidagdha Vrana (burnt wound).

4.5 Daurbalya (Debility): Shareera Balahaani may be due to Alpapranaata were there will be Manasika Daurbalya and due to Mamsopachaya ^[10] (inadequate nourishment of Muscle) as a result of Dhatusara Vahana in the form of Kleda through Mutra. These causes in total lead to Ojonasha causing Daurbalya.

4.6 Arochaka (Anorexia): Satyamapi Bubhukshaaya Abhyavahaara Asaamarthyam Aruchihi means it is a disorder of taste perception were in spite of normal appetite the person is incapacitated to perceive taste and dislikes to eat food. It is mainly due to increased Pichhila and Guru Guna of Kapha and also due to Pitta Dosha vitiation. Dhatukshaya especially Rasadhatu Kshaya also causes Arochaka.

4.7 Avipaaka (Indigestion): Due to increased Bahudrava Sleshma in Shareera it causes Ama and Avipaaka.

4.8 Angamarda (Body pain): It is also called as Angasada. Is a condition mainly due to Rasa ^[11] and Rakta Pradosha where there is Udwestanamiva Vedana ^[12] or Vimrudhyante via (Squeezing or twisting type of pain) due to Vyana Vata Dusti.

4.10 Kasa (Cough): This Upadrava is a result of Pranavaha Srotodusti by Vriddha Kapha & Vata. Kasa results as a consequence of extensive Dhatu Kshaya.

4.11 Bhrama (Giddiness): Bramaha Chakraaroodahsyeva Bhramanam ^[13]. It is mainly due to Pitta ^[14] or Vata ^[15] or both and due to Raja ^[14] Dosha of Manah. This Upadrava is produced when Gambira Dhatus like Majja are involved.

4.12 Tamah: Tamah is one of the Rasa Pradoshaja Vikara ^[16]. The word Tamah has different interpretations. The presentation can be in the form of Jnana Abhava ^[17] in the form of Moha etc. (altered consciousness) to Nisamjnyata (loss of consciousness) to Marana ^[18] (death). The Tamah can be caused by Pitta causing Rakta Prakopa and Vata causing rasa Samvahana Abhava. This can occur during the course of the illness as a transient phenomenon or during the terminal stage leading to death.

4.13 Shoola (Pain): It is defined as Ruja or pain caused by Vata when the disease proceeds to involve Gambira Dhatus like Majja ^[19]. Apart from this, Shoola occurs in Koshta when there is Baddha Pureeshatva (hard stool) which is also an Upadrava of Prameha.

4.14 Makshikopasarpana: This condition is the result of Tanu Madhuryata and subsequent Madhura Bhava of Sweda ^[20] (Sweat). This attracts more Makshikas (flies), as this Lakshana has been also mentioned in Poorvaroopavastha (prodromal stage). This condition here should be considered as a symptom indicating Asadhya Avastha, which is likely to be preceded or succeeded by Murcha Adi Upadravas.

4.15 Alasya (Laziness): This is due to Mandaguna of Kapha and as a result of Daurbalya. Hence Alasya is characterized by Karma Abhava. Here there will be crave for desirable touch, displeasure to discomfort and lack of enthusiasm to do work ^[21].

4.16 Pratishyaya (Running nose): This is caused due to Kapha and Vata, Oja Kshaya and Pranavaha Srotodusti.

4.17 Shaithilya: The Dhatu Kshaya leads to Anibida Samyogata^[22] (loss of compactness) leading to Dourbalya.

4.18 Kapha praseka (Excess salivation): It means excess Lalasrava^[23] due to Kapha Bahudravata.

4.19 Chardi (Vomit): It is defined as Bahirgamana (expelling) of Dosha through Mukha due to all the doshas causing Utklesha (increase) in Amashaya^[24]. This Upadrava can also be a symptom of Marma Prapedana^[25], (irritation to vital organs) which is an occurrence in Prameha.

4.20 Nidra (Sleep): It is caused as a result of Kapha Dusti and Tamoguna in Prameha.

4.21 Shwasa (Dyspnoea): Shwasa due to Doshaja Marmabhighata like Hridaya, which is Pranavahasrotomoola.

4.22 Vrushana avadarana: This is defined as Vidarana (break/tear) or Visheerana of Vrushana and may be a result of Kandu or Kusta affecting Vrushana or due to Vranashopha as a result of Pitta and Rakta Dusti causing Avadarana of Vrushana.

4.23 Bastibheda / Medratoda (Pain in pubis): This is due to Vata Dusti causing Toda.

4.24 Hritshoola (Cardiac pain): Is a condition where there is Shoola in the Hridaya due to Vayu Dusti as a result of Avarana by Kapha and Pitta and is also a symptom of Hridroga due to Prameha.

4.25 Amlika (Sour belching): Means Amlodgara as a result of Shuktaaharapaaka due to Agnimandya caused by Pitta.

4.26 Moorcha (Faint): This is defined as Chetanachyuti^[26] where there is Kaastavatpatana^[27] of the patient and he is unable to experience Sukha and Dukha. This is mainly due to Pitta and Rakta Dusti. This phenomenon is a very common Upadrava of Prameha due to Dhatukshaya.

4.27 Nidranasha and Anidra (Disturbed sleep): Due to Pitta and Vatavriddhi.

4.28 Panduroga (Anaemia): This is a Pittapradhana Vyadhi where due to Dhatvagnimandya there is Rakta Dhatu Poshaka Sara Bhaga Kshapana leading to Panduroga.

4.29 Hridgraha: A condition where patient experiences as if his heart is being pulled out. This is a symptom of Hridroga that is clinically evident as Upadrava of Prameha. Hridgraha is mainly due to Vata Dusti due to Kshaya or due to Kaphapitta Avarana.

4.30 Loulya^[28]: A condition where there is an abnormal desire to have all Rasas (Taste) described as Sarvaraseshu Loluptvam due to Vata Vriddhi as a result of Dhatu Kshaya.

4.31 Sthambha & Kampa (Stiffness & Tremor): Sthambha is a condition where there is Nischalikarana^[29] and Dandavat Stabdhatata. Kampa is called as Ativepanam^[30]. Both these lakshanas are due to vata dosha vitiation in different forms or due to variation in gunas.

4.32 Baddha Pureeshata: It is mainly due to Vata Vruddhi which will definitely causes shoshana of dravamsha due to its ruksha guna leading to Baddhata of purisha.

4.33 Udavarta (Upward movement): Baddha Pureesha and Vata causes Udavarta.

4.34 Shosha (Depletion): It is due to the Dhatu Kshaya occurring in prameha especially vataja leading to shoshana of shareera.

4.35 Atiprasruta: It is described as Atisrushtum Mootram^[31] where there is an excessive urination due to abnormal increase of kledamsha in the shareera due to kapha dusti.

4.36 Pooti Mamsa Pidaka (Carbunle due to sloughing of Muscle): The vitiated Pitta after vitiation Twacha & Rakta rests over them & presents with Ragayukta Shopha & hence called as Pidaka.

4.37 Kandu (Pruritis): Kandu as an Upadrava in Prameha is primarily due to Kapha Dosha and also partly by Vata Dosha vitiation.

All the general Kapha Dosha Vriddhikara Ahara & Viharas will attribute for the development of Kandu. This action leads to Vrana and Ardrapravrutti resulting in Shoola and Daha. This is mainly a due to Kapha, which has attained Bahudrava Avastha and due to excess Sweda as a result of Dusta Medas. The patient is hence susceptible to skin diseases. The causes for aggravation of Vata responsible for skin manifestations can be mainly grouped into two categories i.e Dhatu Kshaya and Margavarana. The Margavarana is a result of accumulation of Kapha or Pittadoshas in the Vatavaha Srotas. Due to the respective Nidana Sevana, this leads to Vata Dosha Prakopa. In Prameha, Dhatu Kshaya is an invariable consequence of Aparipakvata (Improper nourishment) of Dhatus. This leads to aggravation of Vata Dosha. All these factors are basically designed to provoke the Rajasika Guna in the body. Vata that is predominantly Rajasika gets aggravated leading to Vataja Prakopa. This will invariably lead to Twak Rukshata. Twak Rukshata as already mentioned is one of the important cause for Kandu. It is important to note that Vataja Kandu will always occur in chronic stage of Prameha because Arambhaka Dosha in the manifestation of Prameha is always Kapha. Pitta and Vata play an important role in complicating the disease in later stages.

5. Conclusion:

The term Prameha refers to Prabhoota and samala mootrata in which diabetes and renal complications are one of the presentation. Kaphaja, Pittaja and Vataja prameha lakshanas are related to different clinical stages and complications of DM. Most of the mootra gata lakshanas of vimshati Pramehas are also observed in Diabetes related renal complications. Evidently the Poorvaroopas of Prameha actually reflect the overt DM, besides; a few of them like Karapada daha and Suptata are the complications of DM. Along with the Prameha nidana which is having specific affinity for the vitiation of twak, rakta, mamsa and ambu, Kusta nidana also plays important role in the development of twakgata upadras of prameha. Blood and Urine sugar level in diabetic patients will help us to know the severity and the interaction of the drug in the disease. Lipid profile in diabetic patients will help us to know the extent of vitiation of meda dhatu i.e Abaddha meda. Urine albumin,

micro will help us to know the avastha bheda and different upadrava of prameha. Recent advanced laboratory investigations have revolutionized the diagnostic approach towards the disease. Now the disease can be identified and managed in very early stages and due to these complications of prameha can be checked up to an extent.

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