

Original Research Paper

Ayurved

"Study of complications in recently diagnosed patients of Madhumeha."

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Background: Earlier age of onset, delayed diagnosis and improper care lead to an increase in morbidity which can be said as diabetic complications like micro vascular and macro vascular complications. Patient with recently diagnosed diabetes have an increased incidence of complications like cardiovascular, skin infection, cataract, neuropathy, peripheral arterial disease. Vivid description of updrava has been given by all the classical texts. Objective: 1. To study complications in recently diagnosed patients of Madhumeha with the help of clinical findings & laboratory investigations. 2. To study updrava in recently diagnosed patients of Madhumeha with the help of clinical findings & laboratory investigations. Material Methodology: 1. Patients were selected randomly for the study.2. History of all patients was taken thoroughly with the help of special case record format. 3. Clinical observations were noted in the special case record format of all recently diagnosed Madhumeha patient selected for the study.4. The laboratory investigations were done on the next day of the clinical examination. Result: Daurbalya, shoola, jwara, panduroga, klama, vidradhi, daha, amlak, chardi, badhhapurishatva, shwasa, aalsya, atisara, pinas, pratishaya, hridgraha and twak-roga were updrava observed in recently diagnosed madhumehi. Cataract, skin infection, fungal infection, cerebrovascular accident and cardiovascular disease complications have significant proportion with recently diagnosed madhumeha. Most of the patients who are recently diagnosed had raised HbA₁c values. The poor control of diabetes leads to complications in recently diagnosed patients of madhumeha (Diabetes). Conclusion: Present study generates hypothesis concluding, "In recently diagnosed madhumehi patients with asymptomatic, uncontrolled untreated hyperglycemia Cataract, skin infection, fungal infection, cardiovascular, cerebrovascular diseases, Daurbalya, shoola and jwara are the common complications."

Recently Diagnosed Madhumehi, Complications, Upadrava.

KEYWORDS

ABSTRACT

Madhumeha can be correlated with Diabetes mellitus of modern science. Inspite of tremendous advancements in diagnostic and therapeutic diabetology, we are still facing challenge of diabetes in the world. 20% of whole population in the world is suffering from this silent killer disease. Its incidence is increasing rapidly and it is estimated that by the year of 2030, 171 million numbers will get double. Out of the total diabetic population 1/3rd belongs to India. So India has been declared as 'Capital of Diabetes'.

The sedentary lifestyle with changing demographic profile, technological progress, and nutritional transition contributed to number of chronic health problems like cardiovascular disease, Diabetes, Liver, Kidney diseases etc, of which Diabetes is increasing worldwide and inviting major health problems i.e. Diabetic complications.

Earlier age of onset, delayed diagnosis and improper care lead to an increase in morbidity which can be said as diabetic complications like micro vascular and macro vascular complications. Patient with recently diagnosed diabetes have an increased incidence of complications like cardiovascular, skin infection, cataract, neuropathy, peripheral arterial disease. Vivid description of updrava has been given by all the classical texts.

The attempt is made to highlight complications of Madhumeha; so treatment can be planned earlier & effectively. Considering these facts, the topic is selected to study the incidence of complications in recently diagnosed patients of Madhumeha.

AIM: To study complications in recently diagnosed patients of Madhumeha.

OBJECTIVES:

1. To study complications in recently diagnosed patients of Madhumeha with the help of clinical findings & laboratory investigations.

2. To study updrava in recently diagnosed patients of Madhumeha with the help of clinical findings & laboratory investigations.

MATERIAL:

100 patients of recently diagnosed madhumeha.

METHODOLOGY:

Inclusion Criteria-

1. Recently diagnosed patients of Madhumeha (Diabetes Mellitus) as per the standard case record format designed for the study.

Patients suffering from the disease since minimum 6 months.
 Irrespective of age, sex, marital, economical & social status was selected for the study.

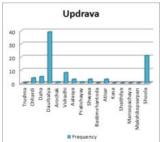
Exclusion Criteria-

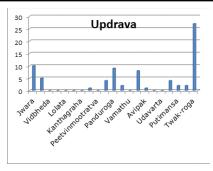
1. Patients who need emergency medications.

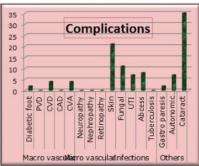
2. Patients suffering from the major illness. e.g. HIV infections, Malignancy were excluded from this study.

Every patient was examined clinically according to standard case record format. Prior informed written consent was taken from each and every patient. Detailed history of *Madhumeha and complications* was taken with the help of specially designed case record format.

Observations







Discussion –

-The age of onset of type II diabetes is mostly adult (>40yrs) and its onset is insidious and gradual. Females are more prone to madhumeha.

- Diabetes was mostly found in the patients having sedentary life style (27%) and mild physical work (32%).

- Family history (91%) is a precipitating factor of madhumeha.

- Etiological factors are mainly of swadu (89%), guru (95%) drava (78%) guna causes kapha-meda-mutra vruddhi, dugdha and dugdha-vikruti(98%), pishttana(90%), gramya- anup- audak mamsa(84%),viruddhanna(50%);diwaswap(93%),eksthanasan(78%),avyayam(77%), asyasukha(69%), atichinta(61%) are the common hetu of madhumeha.

- Pipasa (86%), hasta padatala daha (85%), snigdha-gurugatrata (78%), dantadinam maladhyatva (73%) are the mostly observed poorvarupas in Madhumeha.

- Prabhuta avil mutrata was observed in 89% patients

-Daurbalya, shoola, jwara, panduroga, klam, vidradhi, daha, amlak, chardi, badhhapurishatva, shwasa, aalsya, atisara, pinas, pratishaya, hridgraha, twak-roga were updrava observed in recently diagnosed madhumehi.

-Cataract, skin infection (p value- 0.00) fungal infection (0.035), cerebrovascular accident and cardiovascular disease (0.02) complications have significant proportion with recently diagnosed madhumeha.

Conclusion:

On the basis of the observations obtained and discussion done in the present study, the following conclusions are drawn-

- Madhumeha is common amongst females and in age group of 45-60yrs.
- Improper diet, sedentary lifestyle and addiction are observed as important causes of madhumeha and its complications.
- Daurbalya, shoola, jwara, panduroga, klam, vidradhi, daha, amlak, chardi, badhhapurishatva, shwasa, aalsya, atisara, pinas, pratishaya, hridgraha and twak-roga were updrava observed in recently diagnosed madhumehi.
- The Complications cataract, skin infection, abscess, fungal infections, cardiovascular disease, cerebrovascular accident, urinary tract infection have significant proportion in recently

diagnosed patients of madhumeha.

Hence, the present study generates hypothesis concluding, "In recently diagnosed madhumehi patients with asymptomatic, uncontrolled untreated hyperglycemia Cataract, skin infection, fungal infection, cardiovascular, cerebrovascular diseases, Daurbalya, shoola and jwara are the common complications."

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