A REVIEW ARTICLE ON PRAMEHA PIDAKA – DIABETIC CARBUNCLE.

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ABSTRACT

Prameha (Diabetes Mellitus) is a Kapha pradhana Tridoshaja Vyadhi (Disease) in which Meda is a Pradhan (Prime) Dushya. According to the Avastha Bheda, Dasha Dushyas involvement can be observed. It is characterized by “Prabhoothavilamootrati”. 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. Prameha pidaka are complications of prameha. Prameha pidaka by its pathology and clinical features resembles to Diabetic carbuncle. Treatment of Prameha pidaka or Diabetic carbuncle primes control of Diabetes mellitus.

KEYWORDS: Prameha, Prameha pidaka, Diabetes Mellitus, Hyperglycemia

INTRODUCTION

Prameha: The word Prameha is derived from the root word ‘Meha- Sechane[1]’ meaning, “watering”. In reference to disease of human beings, it may have a meaning of passing urine, qualified by prefix ‘Pra’ meaning excess in both frequency and quantity. The name Prameha is self explanatory which means Prabhuta (turbid urine). It is evidenced that Ayurvedic scholars were aware of the extent to which all the body tissues are involved in the pathogenesis of Prameha. Description of two types of Prameha from management point of view “Krisha” (Lean Diabetic) and “Sthoola” (Obese Diabetic) are classified in Ayurveda. On the very similar pattern we find the classification as Sahaja prameha (Congenital) and Apathaya nimitaj prameha (Due to overeating and wrong eating habits). Three types of Prameha have been described based on Doshika predominance, which have been again sub classified into twenty types. It is a convention to classify every disease according to the predominance of specific Doshas in the body. Sub types of Prameha which are twenty in number have been described according to different properties.

Prameha Nidana: People who are obese, consume fried and heavy food in excess, leads a sedentary life, drink excess milk, curds, and eat new cereals, eat meat of granoudakanupa birds and animals, consume sour preparation made of jaggery, do not like to do any sort of exercises and does not undergo shodhana (purifactory) measures are the causes for the prameha roga.

Purva Rupa (Prodromal symptoms) of Prameha[2], According to Acharya Charaka, the symptoms of prameha are Dantadinam Maldhyatwam, Hasta-pada-tala Daha, Chikkanata Dehe, Swadu Asyata, Shithilangata, Swapna sukhe rati, Netra Jihwa sravan upadeho, Kesha-nakhati-vrdhi, Sheeta priyatwa, Gala-talu-shosha, Mutre Abhidhavanti Pipilika, Kesheshu jatili bhavah, Tandra, Shweta madhura mutrata, kasa and Shwas.

Prameha is a metabolic kaphaja vyadhi, in which improper functioning of agni leads to a tendency to increase blood sugar levels. If the disease is not treated properly, this will leads to madhumeha & further complications Prameha Pidaka’s.

Prameha Samprapti: The kapha vitiates meda, mamssa, and the shareeraja kleda present in basti and result in prameha. This along with pitta causes decrease in dhatus and causes vataja type of prameha. The doshas involved in prameha roga are vata, pitta and kapha. The dushyas are meda, raktta, shukra, kleda, vasa, lasika, majja, rasa and ojus.

Aetio-pathogenesis of Prameha pidaka
Pramehakaraka nidana sevana, kapha prakopa will occur in the body. The prakupita kapha causes shithilata in body, Kapha having similar properties of meda, it vitiates the medas the vitiated kapha and medas further vitiates the mamsa and kleda.

Vikrita kapha along with vitiated mamsa causes prameha pidakas in the body.
The kapha vitiated by etiological factors exceeds its quantity and develops specific power to manifest the process of the disease, i.e. prameha. The specific properties of medas are sweetness, unctuousness, heaviness etc, and those of kapha are heaviness, coldness etc. Thus both these elements have identical properties. In its normal state kapha does not vitiate medas even though they have identical properties. It is only the vitiated kapha which does so. The vitiated kapha along with vitiated medas gets mixed with the muscle tissue and causes prameha pidakas. After prameha roga manifestation occurs in the body, the 3 vitiated doshas, spreads in the tissues with excessive fat and fatty tissue in the patients suffering from prameha produces ten types of prameha pidakas

**TYPES OF PRAMEHA PIDAKA**

Table 1: Showing types of Prameha pidakas according to different acharyas (authors).

<table>
<thead>
<tr>
<th>Sl.no.</th>
<th>SUSRUTHA</th>
<th>CHARAKA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Sharavika</td>
<td>Sharavika</td>
</tr>
<tr>
<td>2.</td>
<td>Sarshapika</td>
<td>Julini</td>
</tr>
<tr>
<td>3.</td>
<td>Kacchapika</td>
<td>Alaji</td>
</tr>
<tr>
<td>4.</td>
<td>Jalini</td>
<td>Vidradhi</td>
</tr>
<tr>
<td>5.</td>
<td>Vinata</td>
<td>Kachchapika</td>
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<tr>
<td>6.</td>
<td>Putrini</td>
<td>Sarshapika</td>
</tr>
<tr>
<td>7.</td>
<td>Masurika</td>
<td>Vinata</td>
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<tr>
<td>8.</td>
<td>Alaji</td>
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<tr>
<td>9.</td>
<td>Vidarika</td>
<td></td>
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<tr>
<td>10.</td>
<td>Vidradhika</td>
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</tbody>
</table>

Though the nomenclature and number of Prameha pidaka differ, the description is almost same. These pidakas are mainly found in muscular region, 24 joints and vital points (marma). As rasayanies are weakened in Prameha, doshas remain in lower part of the body hence pidakas found below the lumbar region. The detail description of these pidakas is given according to Sushruta Samhita.

1. Pidaka which is raised at the margin and dipped in its center, so as to resemble as Indian Saucer in its shape is called as Sharavika.[3]
2. Pimples or pustules of the shape and size as that of white mustard seeds are called Sarshapika.
3. An abscess, resembling (the back of a tortoise) in shape with burning sensation is called. Kacchapika.
4. An abscess studded with slender vegetables of flesh and with intolerable burning sensation is called Jalini
5. A large blue- colored abscess (carbuncle) appearing on the back or the wall of the abdomen and exuding slimy secretion and with deep-seated pain is called Vinata.
6. A thin and extensive abscess (studded with slender pus- tules) is called Putrini.
7. Pimples to the size of lentil seeds are called Masurika.
8. A dreadful abscess which is of a red and white colour studded over with blisters or exuding vesicles is called Alaji.
9. A hard and round abscess as large as a (full - grown) gourd is called Vidarika
10. An abscess of the Vidradhi type is called Vidradhika.
11. General aetiology of Prameha coincides with that of Madhumeha in Charaka Samhita, its aetopathogenesis has been.

**Complications of Prameha pidaka**

Table 2: Showing complications of Prameha pidaka.

<table>
<thead>
<tr>
<th>Sl.no.</th>
<th>Complications</th>
</tr>
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<tbody>
<tr>
<td>1.</td>
<td>Thrishna</td>
</tr>
<tr>
<td>2.</td>
<td>Kasa</td>
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<tr>
<td>3.</td>
<td>Mamsa sankocha</td>
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<tr>
<td>4.</td>
<td>Moha</td>
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<tr>
<td>5.</td>
<td>Hikka</td>
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<tr>
<td>6.</td>
<td>Mada</td>
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<td>7.</td>
<td>Jwara</td>
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<tr>
<td>8.</td>
<td>Visarpa</td>
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<td>9.</td>
<td>Marma samrodha</td>
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</table>

**CHIKITSA (Treatment)**

Prameha pidaka can be treated under 2 headings.
1) Pidaka in unripe stage
   - Apatarpana- Fasting
   - Aalepa- medicated drug paste application
   - Parisheka- pouring medicated liquid
   - Abhyanga- anointing
   - Vimlapana- resolution by rubbing
   - Upanha- poultices application
   - Pachana- inducing ripening
   - Visravana- blood letting
   - Sneha- internal use of medicate oils or ghee
2) Pidaka in ripe stage.
   It should be treated like wound.
   - Medicated oils used for healing of wound.

**DIABETES MELLITUS**

**Definition**

Diabetes mellitus is a syndrome characterized by chronic hyperglycemia and disturbances of carbohydrates, fat and protein metabolism associated with absolute or relative deficiencies in insulin secretion and insulin action. The complexity of disease ‘diabetes’ as an entity and syndrome is being equally identified and accepted in both the schools of medical system i.e. in medicine and surgery. None of the approaches are optimum positive and promising to get rid of the ailment in total, despite of several approaches in advance present day. Modern science has accepted the importance of diet, regimen, exercise and yoga in the management of disease entity way back to its predisposition under the concept of ‘drug and diet’ therapy. With the introduction of ‘Insulin’, oral antidiabetic drugs and antibiotics, diabetes is no longer a dreadful disease and with proper management with diet, drugs and exercise a diabetic patient can enjoy an almost normal life. The etiology of this condition,
however, is still obscure although it definitely has a hereditary tendency. Diabetes mellitus is a metabolic disorder with an associated insufficiency of the hormone from the pancreatic islets of Langerhans. There is disturbance in the carbohydrate metabolism because, 1. Inability to utilize the glucose by tissues. 2. Liver and skeletal muscles unable to store glycogen. It is of mainly two types, 1. Insulin dependent diabetes mellitus (IDDM). 2. Non-insulin dependent diabetes mellitus (NIDDM). Other types of diabetes mellitus are malnutrition related and due to pancreatic diseases and acromegaly.

DIABETIC CARBUNCLE.[5]
Word meaning of Carbuncle is Charcoal. It is an infective gangrene of skin and subcutaneous tissue. Causative organism is Staphylococcus aureus. Common site of occurrence is nape of the neck and back. Skin in this area is thick. Carbuncle is common in diabetics and after forty years of age.

PATHOLOGY
Infection → development of small vesicles → Sieve like pattern → red indurated skin with discharging pus → many fuse together to form a central necrotic ulcer with peripheral fresh vesicle looking like a rossette → Skin becomes black due to blockage of cutaneous vessels → Disease spreads to adjacent skin rapidly.

INVESTIGATION

Treatment
Control of Diabetes is essential using Insulin. Antibiotics depending on culture and sensitivity tests. Drainage is done by a cruciate incision and debridement of all dead tissues is done. Excision done later. once wound granulates well, skin grafting may be required.

DISCUSSION
Prameha pidakas occurs as a complication of prameha. Persons suffering from prameha has to take care of his health. He has to take aahara(food) which maintains prameha without causing further complications. Vyayama(physical exercises) must be done everyday. Proper aahara and vyayama plays major role in avoiding prameha pidakas. Prameha pidakas by its aetiology and clinical features can be correlated with Diabetic carbuncles. There are ten types of prameha pidakas explained by Acharya Sushruta i.e. Sharavika, Sarshapika, Kacchapika Jalini, Vinata, Putrini, Masurika, Alaji, Vidarika, Vidradhika. Description of types of pidakas resembles to modern pathology of Diabetic carbuncle.

Diabetic carbuncles are found to be very difficult to treat because of spreading in nature. Usually they are well controlled by achieving systemic treatment for control of hyper glycemia.

CONCLUSION
Prameha if not treated properly can leads to Prameha pidakas in patient. Patients with chronic history of Prameha are more prone to get Prameha pidakas. In the treatment of Prameha pidakas both medical and surgical intervention is necessary.

REFERENCE