COMPREHENSIVE REVIEW ON MADHUMEHA
Brijesh Kumar 1, Richa Anand 2*, Anil Kumar Singh 1
1Department of Dravyaguna Faculty of Ayurveda IMS BHU, Varanasi, India
2Department of Bioinformatics, Indian Institute of Information Technology, Allahabad, India

Received on: 14/05/17 Accepted on: 20/06/17

*Corresponding author
E-mail: richaanand@gmail.com

DOI: 10.7897/2277-4343.083171

ABSTRACT

The main aim of Ayurveda is to maintain the normalcy of health and also helpful in prevention of the disease. Ayurveda is not only a medicinal pathy, but also a fully-fledged science, consisting of all medicinal and allied branch essential to lead a healthy life. In Ayurveda, the definition of svastha i.e. of a healthy state of a person is defined as a state of equilibrium of Doshas, an unaltered state of Agni, appropriate excretion of Malas from body regularly which is produced in day to day metabolic activities. Madhumeha has been classified under the Vataj Prameha. There are twenty types of Prameha described based upon their various physiological changes in urine, while Madhumeha is mentioned in the last sequence of all Prameha. India has high prevalence of Madhumeha and the number is increasing at an alarming rate. To understand the iatrogenicity, pathogenicity, physiology, management and complications it is necessary to put emphasis on detail reviews of the disease Madhumeha. A detail description of the disease is described in this review.

Keywords: Ayurveda, Prameha, Madhumeha.

INTRODUCTION

In Ayurvedic classics, Madhumeha has been described independently in Sushruta Samhita under Madhumeha chikitsa, considering the seriousness of the disease and its prognosis. Ayurvedic scholars have referred Madhumeha as “Maharoga” or “Mahagada” i.e. a disease which has grave and serious clinical manifestations with possibility of occurrence of serious complications and at time with fatal prognosis 1. Acharya Sushruta has described the treatment of Madhumeha roga separately in chapter 13 of Chikitsasthana 2. Madhumeha is the disease having metabolic derangement and genetic inclination related with each constituent of the body having systemic concern. To understand the iatrogenicity, pathophysiology, complications and management, it is necessary to put emphasis on the disease Prameha as Madhumeha, a subtype of Vataja Prameha.

Etymology

The word Madhumeha consists of two words Madhu and Meha. Madhu means sweat substance i.e. passaging of sweat substance profusely through the urinary system. In this respect, disease Madhumeha is mainly related with urinary disorder in which patients complain for excessive excretion of urine having concordance with madhur rasa and kashaya rasa along with tuksa in texture, and the appearance of urine looks like honey 3. In Sushruta Samhita, Kshaudrameha term is explained in place of Madhumeha. The literal meaning of kshaundra is honey 4.

Nidana (etiology)

Twenty types of Prameha have been described based upon their various physicochemical changes in urine. Madhumeha is one of the types which mentioned under Vataja Prameha. Charak has described the specific etiological factors for Madhumeha 5. In addition, general etiology of Prameha has been described in detail in Nidanasthana, while in Sushruta Samhita, Astanga Samgraha, Astanga Hridaya, Madhava Nidana and Harita Samhita only Samanya Nidana has been described.

On this basis, etiological factors can be classified according to their type i.e. Sahaja and Apathyanimittaja.

Sahaja (Hereditary)

There is a strong genetic predisposition seen in pathogenicity of the disease Madhumeha. Term Sahaj which is mentioned by Sushruta in this context shows that there is genetic defect which are inherited from parents 6. Charak also emphasized upon genetic involvement, and named it as Kulaj Vikara. He also explained the term: Bijja, Bijja Bhaga and Bijja Bhagavayava which can be correlated to ovum and sperm, chromosomes and genetic coding 7, respectively, and are involved in manifestation of the disease Madhumeha 8.

Apathya nimittaja (Acquired)

Factors i.e. Aharaj and Viharaj increases Kapha dosha and Medo dhatu, and are responsible for the disease. This includes excessive uses of new grains, sugarcane juice, milk, dairy products and wine etc.

Viharaj includes sedentary life styles, excessive sleep, and lack of exercise. Charak mentioned etiological factors according to Doshja predominance in Nidana Sthana and common etiological factors in Chikitsa Sthana 8. Most of the etiological factors having qualities like Snigdha, Shita, Guru, Picchila, Madhura and Slakshna Guna.

Specific etiology of madhumeha

Vagbhata mentioned that Madhumeha is of two types on the basis of etiology i.e. Dhatukshaya janya and Avarana janya 9.
On the basis of causative factors, Madhumeha has been subdivided into two types by Vaghbhat. The specific factors which lead to excessive tissue depletion (Dhatukshaya) cause Dhatukshaya janya Madhumeha\(^8\). The specific factors which increase Kapha, Pitta, Meda and Mansa, which in turn leads to obstruction (Avarana) of Vata causes Avaranajanya Madhumeha.

**Classification of Madhumeha**

Madhumeha is a subtype of Vatajameha and Sushrut named it as ‘Kshaudrameha’.

**Classification according to prognosis**

**Sadhyā-** Kaphaja- Obese acquired without complications.
**Yapya-** Pittaja- Usually not much obese acquired with complications.
**Asadhyā-** Vatajaj- Astheny hereditary with complications.

**Classification according to etiological factors**

Sahaja (Hereditary)
Apathya nimittaja (Acquired)

**Classification according to body constitution**

Sthul
Krisha

**Purvarupa**

Purvarupa is the predominant symptom which will be seen before the appearance of the disease. In ancient Ayurvedic treatises common premonitory symptoms of Prameha are mentioned in detail. In Charak Purvarupa of Madhumeha, it is given that ants attract towards urine of Diabetic patients. This can be taken as Purvarupa of Madhumeha, because it is classified under the Vatika type of Prameha. Some of these are considered as specific premonitory symptoms of Madhumeha viz., polypuria, thirst, sweet urine, burning sensation in body and sweetness of body. Jatilībhavam keshu (knitting of hairs), keshanakhâtviridhi (excessive growth of hairs and nails), madhuramastyaya, mukha-talu-kantha sōsha, pipasa, shitapiyatvam, karapadayosuptatadaha, Alasyam, Sveda, malam kaye, Kayacidreshupadahem, visram, Shariragandham, Shatapadapiplikasharira-mutra bhisaranam, madhur shukla mutrat, nidram tandram sarvakalam, snigdha-picchila-guru-gatram are general premonitory symptoms mentioned in different treatises\(^3,5,9\).

**Rupa**

Samanya lakshnam tesham Prabhuta aavil mutrata i.e. Prabhuta means excessive and aavil means turbid3. Shushruta mentioned that all the Prameha if not treated properly can be transformed in to Madhumeha in course of time3. Madhumeha patient excretes urine having Kashaya and Madhura taste, Pandu in colour and Ruksa in quality. Gangadhura suggests that natural “Madhura Rasa” of Ojas is replaced by “Kashaya Rasa” in Basti.

Cakrapani opines that the loss of Ojas creates considerable number of symptoms viz., debility, loss of mental and physical strength, disorders of senses, and emaciation in Madhumeha.

Sushruta mentioned special symptoms based upon behavioural pattern that Madhumehi prefers to stand still than walking, sitting than standing, lying down than sitting and sleeping than lying down. This manifestation is mainly because of the Alasya (indolence)\(^2\).

**Samprapti (Pathogenesis)**

The detailed knowledge of pathogenesis is very necessary to find the extent of Doshā and Dushyā vitiation, involvement of Ayavaya, Srotas and prognosis of the disease. According to Sushrut, the excessive indulgence in the Nidana related to Prameha results into Aparipākva Vata, Pitta, Kapha and Meda, which further proceed downward through the Mutra vaha Srotas to get localized in Basti mukha and thus leading to the disease Prameha\(^2\).

Charak mentioned that due to dietary and physical neglecting evacuation, kapha, pitta, mansa and medas aggravate excessively and they all obstruct the path of vata which carries the ojas to Basti (urinary passage) and thus the obstinate madhumeha arises\(^4\). Charak also mentioned that in Madhumeha, excretion of Dhatus (like Vasa, Majja, Oja and Lasika) through urinary tract take place due to aggravation of Vata and depletion of Kapha and Pitta\(^2\).

Kapha Doshā is the main causative agent for pathogenesis of Madhumeha. Vitiyated Kapha also involves deep dhatus like Meda, Mansa, Kleda, Rasa, Vasa, Lasika etc. in full manifestation of the disease.

Expulsion of Vasa, Majja, and Ojas through urine outside via Urinary bladder is due to aggravation of Vata dosha which is due to Avarana caused by Kapha Pitta and Meda. Due to severe depletion of Dhatu, the symptom manifests are Krshya, Daurbalya, Angasupta and Parisarsanila\(^1,10\).

**Prognostic Criteria for Madhumeha (SadhyāAsadhyātvatva)**

**Sadhyā-** Kaphaja Prameha

Etiological factors are similar to that of Doshā, Dushyā and having same qualities and same seat. So the treatment is same for both, that’s why Kaphaja Prameha is Sadhya.

**Kriechasadhya (Difficult to treat)**

Madhumeha which occurs because of Avaranajanya pathogenesis is difficult to treat i.e. Kriechasadhya. Here the provocation of Vata results, but the etiological factors mainly related to the Kapha and Meda. So it should be considered for both of them.

**Yapya (Palliable)**

Pittaja Prameha is palliable that means till the treatment is done the disease will be subsided. Disease may get appears as the treatments because of the opposite treatment measures we have to profound here i.e. Vishaṃkriyātvatva.

**Asadhyā (Incurable)**

Due to involvement of deepar Dhatu like Majja, Ojas in the pathogenesis and also in the treatment which is quite opposite to Doshā and Dushyā, Vataja Prameha is incurable. Charak mentioned Madhumeha as incurable disease because of the involvement of the genetic predisposition.

**Complications**

Charak mentioned the term ‘Sapta Pūdika’ as complication, because of the negligence of the Madhumeha\(^2\), while Sushrut mentioned that Madhumeha along with Pūdika is Asadhyā\(^2\). He quoted that this Pūdika occurs because of the Tridosha, and vitiyated Meda and Vasa.
Chikitsa (Treatment)

Following are the treatment modalities we can apply in the Madhumeha to alleviate the disease.
Nidana parivarjana.
Treatment according to Dosha.
Treatment according to Dushya.
Treatment according to Mala.
Treatment according to complications.

Nidana parivarjana

This is the prime treatment principle narrated by every Acharya before describing the treatment of every disease. Charak enumerated that we should avoid these etiological factors which are causing the disease Prameha, avoidance of the etiological factors is the prime treatment6.

Treatment according to body constitution

Krisha Pramehi

While understanding the above quotations, it is clear that in Krishna patients such foods should be given which increase the strength of the patient without increasing the vitiation of Vata, and after proper strength mild purificative measures can be used along with herbal medicines.

Sthula Pramehi

In Sthula patients we should have to apply Apatapana Chikitsa along with powerful purificative measures. Again the treatment modalities described for Medoroga, can be applied here too.

Treatment according to dosha predominance

Though the disease is of Tridosha predominance, but individual Doshik consideration for the treatment is important for good prognosis.

Arista Lakshhana

Arista Lakshana is the definite indications of impending death. Charak, while describing the Arista Lakshana in 5th chapter of Indriyasthna, has predicted that attraction of flies to the body of a person, even he has bathed and painted his limbs with fragrant substances, also indicates that such persons will be affected by Prameha and may also die due to that disease5. The person who drinks various kinds of unctuous preparations in his drink in the company of devils indicates that he will be affected with Prameha which may further lead to his death.

CONCLUSION

Madhumeha is considered as one of the incurable disease because of the Vata predominance, involvement of Bija dusti, involvement of deepar dhatu as well as dhatu kshaya in their pathogenesis, due to deficiency of Ojas, and also due to its treatment that is opposite to dosha and dhatu that emphasizes the incurability of the disease. Acharya Charak also mentioned Madhumeha as one of the type of Vatik Prameha and it is in the last of the list of twenty types of Prameha which signified its importance.

It is also seen that life style and diet regimen is main factor for the disease Madhumeha. There is very detailed description of purva rupa, rupa and Samprapti seen in different Ayurvedic Samhitas.

Treatment of any disease is based upon the pathogenesis i.e. samprapti of the disease, which is described very well by all Acharyas. Based upon this line of treatment and progression of the disease, Prognosis of this disease is explained. Inclusion of Madhumeha among eight major disorders in Charak Nidana shows the significance of this disease.

REFERENCES

10. Yogaratnakaram- Pramehaparakaranam, By Dr. Indequev Thripatii & Dr. Dayashanker Thripatii, Krishnas Ayurveda Series 54, Chaukambha Krishnas Academy, Varanasi – 1998; Chapter – Prameha Nidana.

Cite this article as:


Source of support: Nil, Conflict of interest: None Declared

Disclaimer: IJRAP is solely owned by Moksha Publishing House - A non-profit publishing house, dedicated to publish quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. IJRAP cannot accept any responsibility or liability for the site content and articles published. The views expressed in articles by our contributing authors are not necessarily those of IJRAP editor or editorial board members.