

CLINICAL STUDY

WORLD JOURNAL OF AYURVEDA SCIENCE

e- ISSN 2456-0227

TO STUDY EFFECT OF ASHWAGANDHA IN DIABETIC NEUROPATHY

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Received on 12/12/2016

Accepted on 08/01/2017

Reviewed on 04/03/2017

published on 31/03/2017

ABSTRACT

In the modern world Diabetes Mellitus is a common health problem. The busy and stressful life of modern era and physical inactivity plays important role in diabetes mellitus. According to our classic text *Madhumeha* a type of *Vataj Prameha* is mainly associated with *Dhatukshaya* and *ojakshaya*. Rasayana drugs nourish all *Dhatus* hense *ojus*. Ashwagandha is extensively used in Ayurveda as Rasayana. In the present study 20 patients were selected from OPD and IPD of RGGPGAC Ayurvedic Hospital Paprola HP. For clinical study Ashwagandha Churna was selected as trial drug which was given for 2 months in a dose of 5gm. twice a day with milk. It was observed that 65% patients were male, 70 % were female from age group of 30-50 years. 60% were non vegetarian and 85% were of middle socioeconomic status. Among results burning sensation of hands and feet showed 85% relief, 95% relief in tingling sensation, and 88% relief in numbness. All the symptoms showed highly significant results. Hence it can be concluded that *Ashwagandha Churna* is very effective in patients of Diabetic Neuropathy.

Keywords: Diabetic Neuropathy, Rasayana, Ashwagandha

INTRODUCTION

In modern world Diabetes Mellitus become a major problem. worldwide prevalence of diabetes mellitus has risen dramatically from 108 million to 422 million in last three decades.⁵ India is among top 3 countries in case of diabetic patients. Diabetes mellitus is termed as Madhumeha in Ayurveda. Under 20 types of Pramehas Madhumeha is composed of two words Madhu (sweet) and Meha (excessive urination). It means excessive sweet urination. Etiological factors are 'beeja dushti responsible for sahaj Prameha, kaphvardhak ahara vihara, mansik hetu alongwith Dhatu Kshaya. Acharya charaka, Sushruta and Vagbhatta has described 20 types of prameha and madhumeha is decribed under vatai prameha.sushruta has madumeha by the denoted kashaudrameha. Acharya charaka has also classified prameha according to body constitution as sthula and krish prameha. In samprapti of madhumeha there is vata and kapha dosha prakopa alongwith dhatukshaya and ojakshaya.symptoms of madhumeha includes mutramadhurya (sweetness of urine). pipasadhikya, kshudhadhikya, aalsya (lassitude), burning numbness, and sensation, tingling sensation.⁶⁻⁷ In chronic cases of diabetes mellitus many complications take place like: vascular, renal, ophthalmic, dermatological complications. Neuropathy is one of the commonest complications causing burning sensation, numbness & tingling sensation in hands and feet. Due to neuroprotective, antioxidant and anti-stress, adaptogenic properties of Ashwagandha, this Rasayana

drug was selected for the treatment of diabetic neuropathy.⁸

MATERIAL AND METHOD

To find out the effect ofAshwagandha Churna on diabetic neuropathy 20 patients were selected from OPD and IPD of RGGPGAC Paprola irrespective of their age sex occupation religion etc. routine blood investigations have been carried out in order to rule out any other pathology.

Inclusion criteria: Patient suffering from diabetic neuropathy

All patients in age group of 20-60 have been selected

Exclusion criteria

Patients not willing for trial

Patients below age 20 and above 60 years

Duration of trial: Total duration of trial was 60 days.

Criteria of assessment: Assessment was done on the basis of various subjective and objective criteria. It was based on cardinal sign and symptoms of disease and their gradation. All sign and symptoms were graded according to severity on the basis of improvement reported by the patients. Assessment was done and scored for statically analysis.

Criteria for diagnosis

- 1. *Karpadadaha* (burning sensation of hand and feet)
- 2. *Karpadasuptata* (numbness of hand and feet)
- 3. Tingling sensation
- 4. *Pindli ainthan* (calf tenderness)

SCORING AND GRADATION PATTERN **Burning sensation**

No burning sensation	n	G0	Numbness occasionally	G1				
Occasional burning	sensation of		Mild periodic numbness	G2				
palm and sole		G1	Continuous numbness	G3				
Intermittent burning	sensation		Calf tenderness					
throughout body		G2	No tenderness	G0				
Continuous burning	sensation		Mild tenderness (after exertion only) G					
throughout body		G3	Moderate (on light pressure)	G2				
			Severe (even on rest)	G3				
Tingling sensation			Observation and results					
No Tingling sensation		G0	Among total number of patie	ents 70%				
Intermittent Tinglin	g sensation in		patients were of age group in between	een 36-50				
upper and lower extremities		G1	years. 65 % patients were ma	ale. 60%				
Continuous Tingling	g sensation in		patients were non-vegetarian. 8	0% were				
upper and lower extremities		G2	belongs to rural area. 85% were b	belongs to rural area. 85% were belongs to				
Continuous Tingling sensation in			middle class. 15 % patients were smoker.					
whole body		G3	10% patients were alcoholic and	10% patients were alcoholic and 10% were				
Numbness			both Alcoholic & smoker. 50%	both Alcoholic & smoker. 50% patients				
No numbness		G0	were of vata kaphaj prakriti.	were of vata kaphaj prakriti.				
Symptoms	MEAN BT	MEAN AT	%RELIEF SD SE t	n				

Symptoms	MEAN BT	MEAN AT	%RELIEF	SD	SE	t	p
Burning sensation	2.5	0.375	85	0.806	0.201	10.5	0.0001
Tingling sensation	1.375	0.062	95	1.01	0.253	5.1	0.0001
Numbness	1.06	0.125	88	1.34	0.335	2.798	0.014
Calf	0.312	0	100	0.873	0.218	1.431	0.173
tenderness							

DISCUSSION:

Neuropathy is one of the commonest complications of Madhumeha /Diabetes mellitus. It causes burning sensation, numbness in hand and feet. Due to neuroprotective role of ashwagandha it is beneficial in relieving symptoms like burning sensation & tingling sensation. Madhumeha is variety of vataj prameha. In Madhumeha there is Vata Prakopa, Ashwagandha also acts as Vatahara. In this study mean score of burning sensation before treatment was 2.5 which fell to 0.375 giving a % relief of 85% which was significant statistically with t value 10.5 and p <0.0001. Mean score of Tingling

sensation before treatment was 1.375 which fell to 0.0625 giving a % relief of 95% which was significant statistically with t value 5.1 and p <0.0001. Mean score of burning Numbness before treatment was 1.06 which fell to 0.125 giving a % relief of 88% which was significant statistically with t value 2.798 and p <0.05. Mean score of calf tenderness before treatment was 0.3125 which fell to 0 with t value 1.431and p <0.5.

CONCLUSION

In patients of diabetic neuropathy there was marked reduction of symptoms like burning sensation, tingling sensation, numbness and calf tenderness. No unto wanted effect of therapy was observed during treatment and during follow up period. So it can be concluded that *Ashwagandha* is very effective in management of diabetic neuropathy but to establish this effect further study of longer duration and larger sample is required.

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Source of support: Nil

Conflict of interest: None Declared