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# PRAMEHA: A COMPREHENSIVE ANALYSIS FROM VARIOUS COMPENDIUMS

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#### **ABSTRACT**

**Background** – *Prameha* is a collective term encompassing a wide range of urinary disorders, each with distinct etiologies, pathologies and treatments. To gain a comprehensive understanding of *Prameha*, it is essential to examine its descriptions and classifications as they are presented across various classical Ayurvedic compendia, given that the information is dispersed throughout these ancient texts. **History-** *Prameha* is said to have originated during the time of the Daksha Yaga. The earliest references to Prameha can also be found in the Kaushik Sutras of the Atharva Veda. **Objective**- To offer a comprehensive overview of *Prameha* as detailed in Ayurvedic texts. **Methods-** A comprehensive collection of data has been compiled from various Ayurvedic texts and online sources. **Results-** *Prameha* is a syndrome encompassing various clinical conditions characterized by increased urine quantity or frequency, often accompanied by turbidity.

**KEYWORDS:** Prameha, Diabetes, Madhumeha, Ayurvedic texts.

#### INTRODUCTION

The word *Prameha* constitutes of two words "*Pra*" and "*meha*". Word meha is derived from the root "*mih sechane*" by adding "*Lue*" pratyaya to it "mehati, *sinchati mutraretansi*" which means to excrete. The "*Mih*" is used to denote to make water, to wet, or to emit. [1] According

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to various Sanskrit dictionaries *Prameha* is the word given to urinary disorders in common. As this disease is *chirakari* and requires vigorous treatment<sup>[2]</sup> it's said to be one among the eight major/ serious disorders known as *Asthamahagada*<sup>[3]</sup> or *Mahamaya*.<sup>[4]</sup> Not only the disease has been seen in humans, it also affected animals too.<sup>[5]</sup> The prevalence of *Prameha* (which mimics with diabetes mellitus as per modern medical terms) is evidenced according to the International Diabetes Federation (IDF), as of 2023, approximately 537 million adults (ages 20-79) are living with diabetes globally. This represents about 10.5% of the adult population,<sup>[6]</sup> whereas the number if compared to all sort of urinary disease will be a lot more. *Prabhoota Mutrata* (excessive urination) and *Avilamutrata* (Turbidity or dirtiness in urine) are hall mark of *Prameha*.<sup>[7]</sup>

## **Normal urine properties**

Urine is typically clear, slightly yellow, salty and sour. In male, the daily output is approximately 16 *Pala* (768 grams), with slightly less in female and varying amounts based on age in children.<sup>[8]</sup> Any deviations from this normal state, such as changes in color, taste, odor, or the presence of pain, are indicative of a condition known as *Prameha*.

## Nidana (Causative factors for prameha)

According to the *Charaka Samhita*, several factors contribute to the onset of *Prameha*, including prolonged idle sitting on soft seats, excessive sleep, daytime sleeping, frequent consumption of large quantities of curd, *Gramya*, *Anupa* and aquatic meats, milk, recently harvested cereals, consumption of rainwater, jaggery products and activities and foods that increase *Kapha dosha*. <sup>[9]</sup> *Sushruta* further expanded on the causes by noting that a lazy lifestyle, along with the consumption of cold, oily, sweet, fatty and liquid foods, are significant contributors. <sup>[10]</sup> Additionally, *Vagbhata* in his *Samhita* emphasized the role of foods that increase *Meda* (Fat) and urine, such as *Madhura* (Sweet), *Amla* (Sour), *Snigdha* (Oily), *Guru* (Heavy), *Picchila* (Sticky), *Sheeta* (Cold) foods and excessive coitus. <sup>[11]</sup>

Acharya Bhela identified dairy products, Basti and activities and foods that increase Kleda as contributing factors, while the Basavarajeevam added alcohol, excessive water intake and exposure to fumes to the list. Finally, Siddhanta Nidana highlighted activities and foods that cause Pitta vitiation, including those that are Katu (pungent), Amla (sour), Ushna (hot) and exposure to strong sunlight, as contributing factors. These factors share similarities with the properties of Kapha dosha.

Acharya Charaka, while explaining the Nidana mentioned above, uses a vivid simile: just as birds instinctively fly towards a place to lay their eggs, a person who follows these Nidana will inevitably draw death closer, as Prameha approaches them even from birth. [15] Similarly, Yog Ratnakar states that conditions such as Mutraghata, Prameha, Shukradosha, Mutradosha and other diseases affecting the bladder are essentially the same. [16]

## Dosha specific nidana

Kaphaja - Excessive consumption of newly harvested cereals such as Hayanama, Yawaka, Cinaka, Uddalaka, Naisadha, Itkata and dishes like Krushara made with Tila, rice and Masha, along with Mukundaka, Mahavrihi, Pramodaka and Sugandhaka, or Yusha prepared with Harenu and Masha with ghee, can contribute to the development of Prameha. Additionally, overconsumption of the meat of Gramya, Anupa and aquatic animals and birds, as well as Shaaka, Tila, Palala, Krushara, Vilepi, sugarcane juice, milk, Madya, Mandaka, curd, buttermilk and sweets can also lead to this condition. The lack of body hygiene, inadequate physical exercise, excessive sleep or sitting and the intake of food item and activities that increase Kapha, Meda and urine production further exacerbate the risk of Kaphaja Prameha. [17]

*Pittaja* - Consumption of hot, sour, salty and alkaline (*Kshara*) food items as well as pungent (*Katu*) taste can contribute to the development of *Prameha*, particularly when consumed during indigestion (*Ajeerna*). Additionally, excessive exposure to heat or fire (*Ati Dhoop or Agni Sevana*), physical exertionand anger can aggravate this condition. An irregular diet or the intake of incompatible foods (*Viruddha Ahara*) along with a *Pitta*-dominant constitution (*Pitta Prakriti*) further increases the risk.<sup>[18]</sup>

*Vataja* - The excessive consumption of astringent (*Kashaya*), pungent (*Katu*) and bitter (*Tikta*) food items as well as dry (*Ruksha*), light (*Laghu*) and cold (*Sheeta*), can contribute to the development of *Prameha*. Additional factors include excessive sexual activity, overexertion and the overuse of therapeutic procedures like *Vamana* (emesis), *Virechana* (purgation), *Asthapana Basti* (enema) and *Shiro Virechana* (nasal therapy). Suppression of natural urges (*Vega Dharana*), fasting, physical trauma, excessive exposure to sunlight (*Aatap Sevan*), anxiety, intense emotions (*Shoka*), excessive bloodletting (*Ati Rakta Mokshana*) and maintaining abnormal body postures for prolonged periods also play a role. Furthermore, individuals with a *Vata*-dominant constitution (*Vata Prakriti*) are particularly susceptible. [19]

## **Gender prevalence**

Acharya Sushruta, [20] Bhavaprakash [21] and others have suggested that Prameha does not typically occur in females due to menstruation, which is believed to help eliminate dosha from their bodies. However, this concept is not universally accepted, as noted by Acharya Dalhana. The higher prevalence of Prameha (or type 2 diabetes) in males supports this debate. Statistics indicate that the male-to-female ratio for type 2 diabetes prevalence is approximately 1.1:1 to 1.2:1, which suggest that for every 10 women with the condition, there are about 11 or 12 men affected. [22]

#### **Bheda:** (Classification)

Even though *Kapha*, *Meda* and other *Dushya* (Bodily tissues) are similarly involved in *Prameha*, the variation in the degree of their vitiation leads to differences in the color and taste of urine, resulting in the classification into various types of *Prameha*.<sup>[23]</sup>

- Hetu bheda<sup>[24]</sup>
- Sahaja
- o Nimittaja-Apathyajanya
- Deha prakruti bheda<sup>[25]</sup>
- o Sthula/Balavan
- o Krisha/Durbala
- Doshika Bheda

There is variation in the classification of *Prameha* types based on the involvement of *dosha*. The most widely accepted classification includes 20 types<sup>[26]</sup> 10 *Kaphaja*, 6 *Pittaja* and and 4 *Vataja*. *Harita Samhita*<sup>[27]</sup> mentions 13 types of *Prameha*, while *Acharya Bhavaprakasa*<sup>[29]</sup> also discusses *Dwandwaja Prameha* (Caused by the combination of two dosha). Additionally, *Siddhanta Nidana* introduces the concept of *Agantuja Prameha* (*Prameha* caused by external factors). Some *Acharya* differentiate between *Prameha* and *Bahumutrameha*<sup>[30]</sup> as distinct conditions, while others consider them types of the same disorder. Below is a tabular representation of the various types according to different texts in table 1.<sup>[31]</sup>

C.S. S.S. A.H. M.N. B.S. R.K. R.R.S.Sh.S. B.R. B.P. H.S. V.C. G.N. B.J. V.S.S. N.N. S.N. V.S. V.M. Y.R. BN.R.R.R. Types Udakameha lkshuvali kameha Sandrameha Sandraprasad 9hukalameha 9hi tmeha Sktameha Sanairmeha Alalmeha Shukrameha Haridrameha Ksharameha Kalameha Nilameha Lohitameha Manji sthameha Sarameha Pishtameha Raktameha Amlameha Phenameha La vanameha Lalameha Surameha Vasameha Majjameha Hasti meha Madhumeha Shoudrameha. Bhasmameha Ambumeha Sarpimeha Krishna meha Jala meha puyameha Takra meha Khatika meha Shakara meha Rasa meha Ghrita meha Kapha meha Pittameha Sula meha Atimuta meha Gaja meha Shukla meha Lasika meha 9dhu meha Bhesaia meha Bahumutra meha Madya meha Shukta meha Dusta raktaj meha

Table 1: Prameha types according to various ayurvedic texts. [31]

C.S.- Charak Samhita, S.S. Sushruta Samhita, A.H.- Ashtanga Hridaya, M.N.- Madhava Nidana, B.S.- Bhela Samhita, R.k.- Rasakamadhenu, R.R.S.- Rasa Ratana Samuchaya, Sh. S.- Shargandhar Samhita, B.R.- Bhaisajya Ratanawali, B.P.- Bhava Prakashsa, H.S.- Harita Samhita, V.C.- Vaidya Chintamani, G.N.- Gada Nigraha, B.J.- Basavarajeeyam, V.S.S. – Vaidya Sara Sangraha, N.N.- Nityananda, S.N.- Sidhanta Nidana, V.S. – Vangasena Samhita, V.M.- Vrinda Madhava or Sidha Yoga, Y.R.- Yoga Ratnakar, B.N.R.- Brihat Nighantu Ratnakar, R.R. – Rasa Ratnakar. [31]

#### **Prognosis**

*Prameha*, being caused by the vitiation of all three dosha (*Tridosha*), is particularly challenging to treat. It is associated with the vital points of the body (*Maha Marma Ashrita*) and due to its persistent nature (*Anushangatvaat*), it tends to linger for a longer duration. This

chronicity, along with the potential for numerous complications, makes Prameha Kruchra Sadhya (Difficult to cure). [32]

Acharya Charaka stated that there are ten types of Kaphaja Prameha, which are considered curable due to the similarities in the treatment approaches for both *Kapha* and *Prameha*. [33] Acharya Dalhana further elaborated that Kaphaja Prameha remains curable as long as fat is not excessively vitiated. [34] However, according to *Vapyachandra* in the *Madhukosha Tika*, if semen (Shukra) is mixed with urine, Kaphaja Prameha becomes incurable (Ashadhya). [35]

Pittaja Prameha comprises six types and is considered as Yapya (Manageable but not completely curable) because of the differences in the treatment approaches for Pitta and Prameha.

Vataja Prameha includes four types and is deemed incurable due to the similarities and dissimilarities in treatment, the severity of the disease and the presence of severe complications. Vagbhata, while discussing Vataja Prameha, explains that Vata may manifest symptoms of the dosha it is associated with without any apparent reason, leading to conditions where the bladder may alternately be full of urine and then suddenly empty. These factors contribute to Madhumeha being particularly difficult to treat (Kruchra Sadhya). [36]

## Purva roopa (Prodromal symptoms)

Acharya Sushruta states that when there is an increase in the frequency and quantity of urine, the patient should be considered at risk of developing *Prameha* in the future. If some or all the Poorvaroopa (Prodromal symptoms) of Prameha have appeared, the person should be diagnosed with *Prameha*. [37]

According to Acharya Charaka, several preliminary symptoms can indicate the presence of *Prameha*. These include excessive sweating, a foul body odor, flaccid or slack body parts, a preference for lying, sitting, or sleeping comfortably, a sensation of being covered or heaviness in the cardiac region, eyes, tongue and ears, as well as a generalized heaviness in the body. There may also be an excessive increase in hair and nails, a preference for cold environments, dryness in the throat and palate, a sweet taste in the mouth, burning sensations in the palms and feet, ants attracted to the urine, matting of hair, dirtiness of the body and the closing of body pores and orifices. Additionally, the body and urine may emit the smell of

raw flesh and the person may experience constant drowsiness.<sup>[38]</sup> *Acharya Sushruta* further adds that depression is also a prodromal symptom associated with *Prameha*.<sup>[39]</sup>

## Lakshana (Symptoms)

Most *Acharya* agree that all types of *Prameha* are characterized by excessive and turbid urination. However, Acharya *Ravidutta*, in his *Sidha Sara Samhita*, also included painful micturition as a symptom. Agnivesha, in *Anjana Nidana*, stated that semen (*Shukra*) may mix with urine, or in some cases, only semen may be expelled. Acharya Vagbhata, in *Rasa Ratna Samucchaya*, mentioned additional symptoms of *Prameha*, including mouth dryness, burning sensations, weight loss and general debility.

Acharya in *Basavarajeevam* elaborated further, describing symptoms such as excessive sweating, a foul smell, flaccidity of the body, a strong desire to sleep or lay down, burning sensations in the chest, eyes, tongue, ears, hands and feet, excessive growth of nails and hair, a preference for cold environments, mouth dryness, sweetness in the mouth, heaviness in the body and a tendency for ants to be attracted to the urine. The urine may also resemble honey in appearance.<sup>[44]</sup>

*Chakrapani*, while commenting on the *Charaka Samhita*, described the symptoms of *Kaphaja Prameha* as urine that is white, sweet, cold to the touch and with a smell resembling *Ama* (undigested food).<sup>[45]</sup> *Basavarajeevam* further elaborates that common symptoms of *Kaphaja Prameha* include *Bahumutrata* (excessive urination), weakness, fever (*Jwara*), excessive thirst (*Trishna*), dizziness (*Bhrama*)and general discomfort throughout the body.<sup>[46]</sup>

Swarthy or red-colored urine, associated with pain and attributes like *Majja* (bone marrow), is typically indicative of a severe and incurable form of *Vataja Prameha*.<sup>[47]</sup>

## End point of prameha

When *Prameha* is left untreated, it can progress to *Madhumeha*. In cases where the urine in every type of *Prameha* becomes sweet, resembling honey, due to the consumption of sweet foods, all such *Prameha* are collectively referred to as *Madhumeha*.<sup>[48]</sup>

#### Samprapti: (Pathogenesis)

Kapha manifests Prameha by vitiating the Meda (fat), muscles and Kleda (moisture) present in the urinary bladder. Pitta can also contribute to the development of Prameha when aggravated by hot substances. Vayu (Vata) becomes involved when the other two dosha,

*Kapha and Pitta* gets diminished. *Vata* then pulls the *Dhatu* (bodily tissues) towards the urinary bladder, leading to the manifestation of *Prameha*. When the dosha reach the bladder, they influence the urine, resulting in Prameha. [49]

Among the three *dosha*, *Kapha* is the first to become vitiated as it is the predominant *dosha* among all three in *Prameha*, Also the urinary system is under its influence. This vitiated *Kapha* then aggravates *Meda*, as *Kapha* and *Meda* share similar properties. Following this, *Kleda* also becomes vitiated. If *Kapha* decreases in quantity, *Pitta* becomes dominant, leading to the vitiation of *Rakta* (blood). When *Pitta* is depleted, *Vata* takes over, moving substances like *Vasa* (fat) and other *Dhatu* into the urine, which then exits the body. This progression illustrates how *Kapha* induced *Prameha* can lead to *Pitta* and ultimately to *Vataja Prameha*. [50]

## Kaphaja prameha samprapti

The process of *Kaphaja Prameha* begins when *Nidana* (Causative factors), *Dosha* and *Dushya* combine, leading to the aggravation of *Kapha*. This aggravated *Kapha* spreads throughout the body due to the inherent laxity in the channels. Before spreading, *Kapha* mixes with *Meda* (fat), further aggravating it. The aggravated *Kapha* and *Meda* then meet *Kleda* (moisture) and *Mansa* (muscle tissue), which are also increased. This vitiation results in the formation of various types of *Peedaka* (boils), such as *Sharawika* and *Kacchapika*, within the muscles. As *Kapha* affects *Kleda*, it transforms into urine, simultaneously blocking the *Mutravaha Srotas* (urinary channels) that originate from the *Vrukka* (kidneys) and *Basti* (bladder), which are also impacted by the vitiated *Meda* and *Kleda. Prameha*, influenced by both homogeneous and heterogeneous *Dhatu* (tissues), becomes settled in the body or progresses to an incurable state. When *Kleda* of the body mixes with Shleshma (*Kapha*) and *Meda*, it enters the urinary bladder and is transformed into urine. This urine, now possessing the properties of *Kapha*, results in the manifestation of the ten types of *Kaphaja Prameha*, which are named accordingly.<sup>[51]</sup>

#### Pittaja prameha samprapti

According to *Vagabhata*, when *Kapha* decreases, *Pitta* increases and in conjunction with Rakta (blood), it leads to the development of *Pittaja Prameha*. Furthermore, when *Vata*, *Pitta*, *Meda* (fat), *Kleda* (moisture), *Mansa* (muscle tissue), *Shukra* (semen), *Rasa* (plasma) and *Rakta* all move towards the bladder and mix with *Pitta*, this combination also results in *Pittaja Prameha*.

#### Vataja prameha samprapti

When *Vata*, *Pitta*, *Meda* (fat), *Kleda* (moisture), *Mansa* (muscle tissue), *Shukra* (semen), *Rasa* (plasma), *Rakta* (blood), *Vasa* (fatty tissue), *Lasika* (lymph), *Majja* (bone marrow) and *Ojas* (vital essence) move towards the bladder and mix with *Vayu* (*Vata*), it leads to the development of *Vataja Prameha*. [54]

## 10 Stages of prameha

According to *Vaidya Sara Sangraha*, *Prameha* progresses through ten distinct stages. The initial stage is characterized by pain in the hypochondriac region, followed by difficulty in micturition. As the condition advances, *Vata* becomes vitiated and eventually, all three dosha (*Tridosha*) are affected. This leads to the destruction of the bodily tissues (*Dhatu*), causing further complications. In the sixth stage, the patient experiences a burning sensation and bewilderment. As the disease progresses, the patient may suffer from tastelessness and apathy. In more advanced stages, *granthi* (Nodules or lumps) may form and diarrhea may develop. The final stage of *Prameha* is marked by *Murcha*, or fainting and unconsciousness, indicating a severe and life-threatening progression of the disease. [55]

#### **Treatment**

According to *Acharya Charaka*, regardless of the cause of *Prameha*, once the disease has occurred, the causative factors must be completely abandoned. The removal of these causative factors is the treatment for the disease.<sup>[56]</sup> This view is echoed by *Rasa Ratnakara*, which also emphasizes that a person should avoid all *nidana* (causative factors) of *Prameha*, as abandoning these factors is an essential part of the treatment.<sup>[57]</sup>

There are two types of *Prameha* patients: one is obese and strong, while the other is lean and weak. For the weak and emaciated patient, *Sambrmhana* therapy is recommended.<sup>[58]</sup> Acharya *Vagbhata* explains that a *Krisha* (emaciated) patient should be given medicines and food that nourishes the body (*Sharir Pushti*) without increasing fat (*Meda*) and urine output (*Mutra*).<sup>[59]</sup> For those with good strength or an abundance of *dosha*, *Sanshodhana* (purification therapy) should be performed.

After administering *Snehan* (oleation) and *Shodhana* (purification), *Santarpana* (nourishing treatment) should follow. If *Santarpana* is not provided, the patient may suffer from complications such as *Gulma* (abdominal tumors), *Ksaya* (emaciation), pain in the bladder,

penis and urine retention. *Santarpana* should be administered with careful consideration of the patient's digestive fire (*Agni*). [60]

According to *Yog Chandrika*, conditions such as *Meha*, *Gulma*, *Vatarogi* (diseases caused by *Vata*), *Kushta* (skin diseases), *Rakta Pitta* (bleeding disorders), Kashya (emaciation)and Apasmara (epilepsy), especially when accompanied by *Udar Roga* (abdominal diseases), should not be treated, even if the disease appears mild. These conditions are in a depleted or chronic state, making treatment difficult or potentially harmful.<sup>[61]</sup>

## Pathya and Apathaya<sup>[77]</sup>

The recommended dietary and lifestyle practices for managing *Prameha*, as outlined in Ayurvedic texts, emphasize both specific foods and behaviors tailored to different individuals:

General recommendations:- *Mantha* (thin gruel), *Kashaya* (astringent preparations), *Yava Churna Leha* (barley powder paste) and *Laghu Aahar* (light food), Non-unctuous foods like boiled barley, *Vatya* (light food), *Saktu* (roasted grain flour) and the meat of *Anupa* (marshy) and wild animals, *Vatya Madya* (fermented drink), old *Sali* Rice, *Mudga Daal* (green gram)and bitter vegetables mixed with oils such as *Danti, Ingudi, Atasi* (flax seed)and *Sarshapa* (mustard seed), *Sastika Rice, Trina Dhanya* (grass-like grains), with *Yava* (barley) being highly recommended. and *Dhaniya* (coriander seeds) with *jaggery* are advised. Barley, wheat and *Venu Yava* (bamboo rice) should be fed to animals and then collected from their dung, cooked and consumed. [62]

For wealthy individuals, kings, or those who dislike taking medicine, the diet should contain a higher quantity of *Patha*, *Abhaya* (Terminalia chebula) and *Chitraka* (Plumbago zeylanica), with an emphasis on honey. Meat is to be served with *Madhvika* (a type of wine). Foods and drinks should include more honey, *Kapitha* (wood apple) and *Maricha* (black pepper). Powder prepared from dungs of camel, horse, or donkey should be added to food, which should also contain *Hingu* (asafoetida) and *Saindhava* (rock salt). *Raga* (a type of dish) made of mustard can be provided. [63]

**For obese:** They should engage in physical activity, walking as well as riding and consume *Syamaka* and *Nivara* (types of rice) with fruits like *Amla* (Indian gooseberry), *Kapitha* (wood apple), *Tinduka* (Diospyros malabarica) and *Ashmantaka*.

**Diet for the poor:** Leave footwear and umbrella, wander to beg for food and stay in one village for only one night, living like a monk. Walk more than 100 *yojana* and engage in physical exercise. Live with animals and consume their urine as well as dung, adhering to an austere lifestyle. [64]

Apathya- The Nidana (causative factors) for Prameha, particularly those that should be avoided, Avoid Sauviraka (a type of fermented drink), Tushodaka (another fermented preparation), Shukta (sour gruel or wine), Maireya (spiced wine), Sura (alcoholic beverage) and Asava (fermented decoctions), Limit or avoid milk, curd, ghee and oil, Sugar and Sugarcane Products, jaggery Avoid pisti (pasty food preparations), sour yavagu (sour gruel)and heavy, pasty foods, Especially avoid gramya (domestic), anupa (marshy) and jaliya (aquatic) meat, which are heavy and considered unwholesome. Refrain from excessive sitting and daytime sleeping, Avoid newly harvested cereals, curd, pishti, Holding Urine and Other Bodily Urges (mutra vega dharana) as well as other natural urges. Dhoompana (smoking) and procedures like svedan (sudation therapy) and raktamokshana (bloodletting). [65]

## **Updrava** (Complications)

According to *Acharya Charaka*, the complications of Prameha include excessive thirst (*Trishna*), diarrhea (*Atisara*), fever, burning sensations, weakness (*Dorbalay*), loss of appetite (*Aruchi*), indigestion (*Ajeerna*), skin eruptions (*Peedika*), boils (*Alaji*)and abscesses (*Vidradhi*). Acharya Bhela additionally mentions dizziness (*Bhrama*), fainting or loss of consciousness (*Tama Praveha*), pain, pustules and itching as further complications associated with Prameha. Bhavaprakasha adds further complications such as *Udavarta* (upward movement of Vata), tremors (*Kampa*), chest rigidity, palpitations, pain, insomnia, weight loss, shortness of breath (*Shvasa*)and cough (*Kasa*).

Basavarajeevam expands the list to include fatigue (*Shrama*), abdominal pain (*Shoola*), skin eruptions (*Peedika*) and itching (*Kandu*). Finally, *Siddhanta Nidana* emphasizes that some complications of *Prameha* are difficult to treat and may even be fatal over time, including cough (*Kasa*), shortness of breath (*Shvasa*), fever (*Jwara*), emaciation (*Kshaya*), which can lead to sudden death, as well as skin eruptions (*Peedika*), muscle wasting (*Mamsakotha*), confusion or delirium (*Pramoha*)and nerve pain. [70]

## Mutra pariksha in prameha

When urine is heated to a mild temperature, the degree of concentration can indicate the type of *Prameha* and its prognosis. If 1/5th of the urine volume gets concentrated, it is indicative of *Vataja Prameha*. If 1/7th of the urine concentrates, it suggests *Pittaja Prameha*. If 1/9th of the urine concentrates, it points to *Kaphaja Prameha*, which is considered incurable.<sup>[71]</sup>

#### Arishta

A person who, in their dreams, drinks various kinds of oils, ghee, or other unctuous substances along with a *Chandala* (an outcast or someone of low status), may be fated to die from *Prameha* in the future.<sup>[72]</sup> If a patient suffering from *Prameha* also experiences severe complications such as dyspepsia (indigestion), anorexia (loss of appetite) and is heavily afflicted with *Pidaka* (boils or ulcers) accompanied by profuse urination, it is believed that they are at a high risk of death from this disorder.<sup>[73]</sup> Also, If a person's urine is described as oily, resembling honey, or has characteristics similar to alcohol, these are considered fatal signs in *Prameha*. Such patients are believed to be doomed, with their next life destined to be as a *Pashu Palaka* (Animal herder), indicating a fall in their social and spiritual status because of their past deeds and the severity of the disease.<sup>[74]</sup>

#### Signs that *prameha* is cured

*Kalyanakaraka* states that certain characteristics of urine indicate the cure of *Prameha*. If the urine is *Vishada* (clear), *Ati Tikta* (extremely bitter), *Ruksha* (dry), *Kshaar* (alkaline), *Manda* (slow), *Ushna* (mildly warm) and clear without turbidity, with only small amount passing occasionally, these are signs that *Prameha* is cured. [75] *Vrinda Madhava* further adds that clear, white urine without complications and with a *Tikta* (bitter) and *Katu* (pungent) taste also signifies the cure of *Prameha*. [76]

#### **DISCUSSION**

The detailed examination of *Prameha*, as elucidated in classics, reveals a multifaceted understanding of this complex condition.

The Ayurvedic approach to managing *Prameha* is holistic, encompassing *nidana parivarjana* (elimination of causative factors), *shodhana* (purificatory therapies), *shamana* (palliative treatments) and *pathya* (dietary regulations) based on Patients *bala* (power). The importance of addressing the root causes, especially in the early stages of the disease, is repeatedly highlighted across various texts. However, the severity of *Prameha*, particularly when it

progresses to advanced stages, is evident in the numerous complications described, such as Padika (boils), Kasa (cough), Shvasa (dyspnea) and Jwara (fever). These complications illustrate the systemic nature of *Prameha*, affecting not just the urinary system but multiple organ systems, leading to a significant decline in overall health.

#### **CONCLUSION**

*Prameha*, being more than just Diabetes can be correlated with each disease of urinary tract/ bladder. Ayurveda provides a comprehensive framework for understanding and managing this condition, with a strong focus on lifestyle and dietary modifications as both preventive as well as therapeutic measures The progressive nature of Prameha, particularly when complicated by tissue loss and the development of severe symptoms, underscores the importance of early diagnosis and intervention.

The emphasis on eliminating causative factors and adopting a holistic treatment approach remains highly relevant. Integrating these traditional insights with modern medical practices could enhance the management of Prameha, potentially leading to better outcome. Future research should focus on bridging the gap between ancient wisdom and contemporary healthcare, ensuring a more comprehensive approach to treat this increasingly common condition.

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