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AYURVEDIC INTERVENTION IN DIABETIC CHEIROARTHROPATHY (*PRAMEHA-UPADRAVA)*: A CASE STUDY

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ABSTRACT

Diabetic Cheiroarthropathy, also known as Diabetic Stiff Hand Syndrome, is a chronic musculoskeletol complication of Diabetes mellitus characterized by pain, stiffness, restricted mobility, deformity, along with cardinal symptoms of Diabetes mellitus.[1] From an Ayurvedic perspective, this condition can be viewed under the heading of *Prameha Upadrava* involving *Vata- Kapha* predominance with *Medo Dushti*, leading to impaired joint function and stiffness. This case study documents the clinical outcome of *Ayurvedic* Intervention in a patient diagnosed with Diabetic Cheiroarthropathy. The patient presented with bilateral hand stiffness, pain, reduced range of motion, along with cardinal symptoms of Diabetes such as, Excessive appetite, weight loss, Excessive thirst, urination and itching in frictional areas. The therapeutic protocol involved *sarvanga Udwartana* followed by *Sarvanga Takradhara,* administered over a period of 21 days, along with Internal *Shamana Aushadhi.* Clinical assessment showed marked improvement in *Lakshanas* of *Prameha* along with the symptoms of Stiff hand syndrome. Subjective symptoms such as early morning stiffness and functional limitation during daily activities were notably reduced.

KEYWORDS: Diabetic Cheiroarthropathy, Diabetic Stiff hand syndrome, *Prameha Upadrava, Udwartana, Takradhara*.

INTRODUCTION

Prameha is said to be a *Santarpanajanya Vikara*.[2] The term *Prameha* literally means increase quantity of Urine with turbidity in it. The *Vyadhi* which involves all *Tridoshas in it's Samprapti,* but *Bahudrava shleshma and Bahu abaddha medas* plays major role.[3]

Consumption of *Ahara* which includes *Guru, snigdha, amla, lavana* in excessive amounts will become a direct *Nidana* for occurrence of *vyadhi* like *Prameha / Madhumeha.*[4] *Ahara & Vihara* together will hamper the body when practised for over a longer duration. And not imposing the body to *Samshodhana* periodically will further worsen the condition by undergoing the process of *Avarana* within the bodily components.[5] This further results in manifestation of *Upadravas* by reaching the *Gambheera Dhatus.* Thus Timely treatment and proper management is the only key for a healthy life in a *pramehi.*

CASE REPORT

Case History

A female patient aged 60 years was otherwise normal 6years ago. Initially patient was not able to lift her right hand as she felt it was too heavy. Later after some days it was noticed that patient was not able to get up from sitting position. And during that time her body weight was around 95kgs. So for all these complaints patient consulted *Nati Vaidyas* and took treatment. But found no visible improvements. Later around after 3years she started to notice that her body was not supporting her to perform her daily activities. So she consulted an allopathic physician who advised her to take steroids after which patient actually felt relief.

Since 2years patient started to develop burning sensation in both soles, along with pain in small joints (Initially right hand then left hand and later both foot). After 1year she noticed that joints deformity was very peculiar. Now since July 2025, patient developed uncontrollable hunger, Excessive thirst, Excessive sweat, fatigue on little exertion, itching all over body (especially in skin folds i.e., Inframammary, Vulva, Axilla), giddiness, tendency to fall. And by this time her weight reduced to 65 kgs. Once accidentally in a camp during general health checkup, she found out the GRBS to be 500mgs/dl. But still then patient didn't take any medications. In the month of October patient visited Panchakarma OPD in SKAMCH & RC and was advised to undergo some routine blood investigation and urine routine, which ruled out towards the diagnosis of Diabetes Mellitus causing a complication of Diabetic Cheiroarthropathy.

Past History
No major illness

General examination

- **Nourishment**: Moderately nourished
- **Pulse:** 82bpm
- **BP:** 130/90 mm hg
- **Weight:** 65kgs
- **Heart rate:** 82/ min

Ashta sthana Pariskha

- ***Nadi:*** 82/ min
- ***Mutra:*** 7-8 times/day, 3-4 times/night
- ***Mala:*** once in a day
- ***Jihwa:*** *Alipta*
- ***Shabda:*** *Prakruta*
- ***Sparsha:*** *Anushnasheeta*
- ***Drik:*** *Prakruta*
- ***Akruti:*** *Madhyama*

Local examination (B/L hands)

Component	Findings
Inspection	• Waxy, shiny • Flexion deformity of MCP and PIP joints • No redness & swelling
Palpation	• Thick skin, tight, induarated • Reduced skin mobility • Non-tender • No local rise of temperature
Range of motion	• Mild restriction of both active and passive movements • Involvement starts from 4^{th} & 5^{th} digits and progresses radially • Wrist movements- normal
Special tests	**Prayer sign**- positive (Inability to approximate palmar surfaces) **Tabletop sign**- positive (Inability to place palm flat on table)
Associated local findings	May be Trigger finger, Dupuytren's contracture, Carpal tunnel syndrome
Pain & Inflammation	Usually painless and no signs of acute inflammation
Symmetry	Typically bilateral and symmetrical

Intertrigo Examination

Aspect	Examination points
Site	• Inframammary folds • Groin • Interdigital spaces (3^{rd}-4^{th} web space)
Laterality	• Bilateral and symmetrical
Skin colour	• Erythamatous
Surface	• Shiny, moist, macerated
Margins	• Ill defined, mild peripheral scaling
Discharge	• Mild serous discharge
Odour	• Absent
Temperature	• Slightly raised
Symptoms	• Itching • Burning sensation
Associated factors	• **Diabetes mellitus** ✚

	• Obesity
Investigations	• **Blood sugar levels** ↑

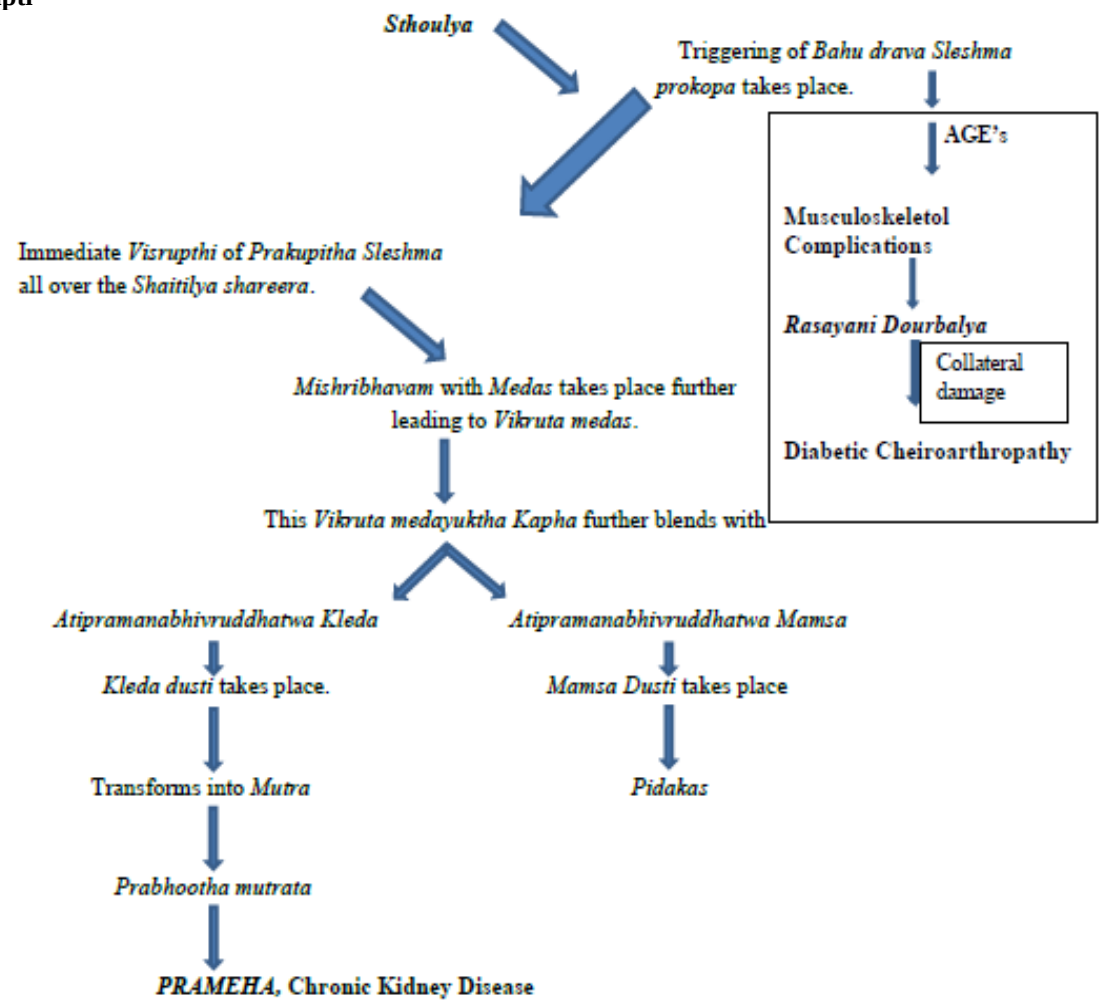
Roga Pareeksha

Nidana: *Aharatmaka- Guru, snigdha, sheeta bhojana; Viharatmaka- Avyayama, Diwaswapna.*

Poorvaroopa*[6]*: *Sweda* (Excessive perspiration), *Mukha talu kantha shosha* (Dryness of mouth, palate, throat), *Dourgandha*(Foul smell), *Shithilangata* (Soft body parts), *Shayyasana swapnasukhabhishangatwam, Dourbalya* (Fatigue), *angasada* (Body pain), *pipasa ativruddhi* (Excessive thirst), *karapada daha* (Burning palms and soles), *Visram shareeragandha* (Foul smell from body), *Tandra* (Tiredness).

Roopa*[7]*: *Prabhuta mutra* (Excessive urination), *Bahu ashi* (Excessive appetite), *shayyasana swapna sheelata, Karapada daha* (Burning palms and soles), *dourbalya* (Fatigue), *pipasa ativruddhi* (Excessive thirst), *Bhrama* (Giddiness), *Atisweda* (Excessive perspiration).

Samprapti[8]



Diagnosis: ***Vataja Prameha (Ojo meha), Diabetic Cheiroarthropathy, Diabetic Stiff hand syndrome.***

Adopted treatment

1] *Sarvanga Takradhara* with *Musta+ Amalaki+ Asanadi- Kwatha (1.5L+ takra (1.5L)*

Orally

- Tab. Glycomet Gp1 1 BD
- Tab. *Shilapravanga* 2 TID

***21 days**

RESULTS

Before treatment	After treatment
• Increased appetite, thirst, urination, fatigue, burning soles, generalised weakness, itching all over the body. • FBS- 198mg/dl • PPBS- 286mg/dl • HbA1c- 10.6%	• Reduced thirst, reduced complaints of excessive appetite. • Reduced complaints of excessive thirst, generalised debility • Achieved lightness of body. • FBS- 164mg/dl • PPBS- 201mg/dl • HbA1c- 10.6%

DISCUSSION

Ojo meha which is a subtype of *vataja madhumeha,* is considered to be the ultimate *avaranajanya madhumeha*. Because of the reduced patency in *Rasadi srotas* especially *rasa, rakta, pitta, kapha vaha srotas*. Hamper at this level will cause *avarana* in *meda* and *mamsa dhatu*, resulting in obstruction to the *gati* of *Ojas*. This obstruction will result in *Kleda vruddhi* and since it is considered as *Mutram tu kledavaha*, this *kleda* gets excreted through *Mutra*. The *Ojas kshaya* which is taking place at this level, will cause *Sandhivishleshana sadana*. Thus the *Ojo meha* presents with the features of pain in joints ultimately leading to their deformity.

The consumption of *Nidanas like guru, snigdha* are considered to increase *kapha dosha* since these foods are considered to be nutritionally dense foods. Other factors such as, *navannapana, nidra, tyakta vyayama, tyakta chinta* will also contribute in increasing of *Kapha dosha.*[9] *Avarana in avarana janya Madhumeha* can be caused due to *shleshma, pitta, medas, mamsa* individually or in combination. As there is *Vruddhi* in these, this results in *avarana* to the *gati* of *vayu.* This resultant obstruction is very clearly understood by the clinical features of *Madhumeha* in which functioning of insulin is impaired due to Insulin resistance.[10] Hence *Rasanimittameva Sthoulyam*[11] causing *Prameha* and further because of Microangiopathy (*Rasayninam cha dourbalyam)*[12] with the influence of AGE's (Advanced Glycation End Products) results in *vata vyadhi* (Diabetic Cheiroarthropathy).

The Treatment algorithm aiming towards its adoption according to progression of Disease. This algorithm starts from the stage of *Poorvaroopa* itself. Like intake of *Vanaspati kashaya, basti mutra paana.* If the symptoms doesn't get treated here and moves to next stage of *Pradurbhava lakshanas of Prameha,* then do *Samshodhana.* In such manner one has to treat the *Vyadhi* like *Prameha.*[13] *Takradhara* does *Ojo sthambhana* and *Drudhikarana of Dhatus*, resulting in resisting the process of *ojo kshaya.*

The hypothalamus is the main regulator of endocrine system. So effect of *Takradhara* on hormone secretion can also be postulated considering the effect on hypothalamus. The hypothalamic neurons which secrete regulatory hormones are themselves under the control of specialized neurotransmitter neurons which arise in mid brain. This releases dopamine, nor- adrenaline and serotonin. This mid brain is under the control of visceral brain which is responsive to stress and emotional disturbances. *Chitta nasha* (Psychological abnormality) and *Bhaya* (fear complex) is said to cause due to the injury of *Seemantha marma.* Thus *Dhara* can heal the *Marma* and it may reverse the process of *Ojo kshaya.*

CONCLUSION

From the results of current single case study, it can be inferred that *Sarvanga Udwartana* followed by *sarvanga takradhara* together with *shaman aushadhis* and right dietary patterns, lifestyle choices, is the best way to control *madhumeha. Prameha* such as *Apathyanimittaja* variety is related to ageing and disturbed lifestyle. Conduction of *Kale samshodhana* will prevent the process of *Ojo adaya gacchati* and thus the progression towards *asadhya* variety of *Prameha* can be hampered. Hence an attempt is made to resist this progression by throwing some light on how early management measures benefits in such conditions. Further more evidence based studies are required in order to validate the science.

REFERENCES

1. https://en.wikipedia.org/wiki/Diabetic_cheiroarthropathy Acsessed on 15/12/2025
2. Agnivesha, Charaka, Chakrapanidatta, Sutra sthana, Chapter Maharogaadhyaya, Verse. 3. In: Acharya YT (Edi.), Charaka samhita with Ayurveda deepika commentary Reprint Edition 2023. Varanasi: Chaukambha Orientalia, p. 112.
3. Agnivesha, Charaka, Chakrapanidatta, Nidana sthana, Chapter Prameha nidana adhyaya, Verse. 6. In: Acharya YT (Edi.), Charaka samhita with Ayurveda deepika commentary Reprint Edition 2023. Varanasi: Chaukambha Orientalia, p. 212.

4. Agnivesha, Charaka, Chakrapanidatta, Sutra sthana, Chapter Kiyantah shiraseeyam adhyaya, Verse. 78. In: Acharya YT (Edi.), Charaka samhita with Ayurveda deepika commentary Reprint Edition 2023. Varanasi: Chaukambha Orientalia, p. 103.
5. Agnivesha, Charaka, Chakrapanidatta, Sutra sthana, Chapter Kiyantah shiraseeyam adhyaya, Verse. 78. In: Acharya YT (Edi.), Charaka samhita with Ayurveda deepika commentary Reprint Edition 2023. Varanasi: Chaukambha Orientalia, p. 103.
6. Agnivesha, Charaka, Chakrapanidatta, Sutra sthana, Chapter Kiyantah shiraseeyam adhyaya adhyaya, Verse. 79. In: Acharya YT (Edi.), Charaka samhita with Ayurveda deepika commentary Reprint Edition 2023. Varanasi: Chaukambha Orientalia, p. 103.
7. Agnivesha, Charaka, Chakrapanidatta, Nidana sthana, Chapter Prameha nidana adhyaya, Verse. 47. In: Acharya YT (Edi.), Charaka samhita with Ayurveda deepika commentary Reprint Edition 2023. Varanasi: Chaukambha Orientalia, p. 215.
8. Agnivesha, Charaka, Chakrapanidatta, Nidana sthana, Chapter Prameha nidana adhyaya, Verse. 8. In: Acharya YT (Edi.), Charaka samhita with Ayurveda deepika commentary Reprint Edition 2023. Varanasi: Chaukambha Orientalia, p. 213.
9. Agnivesha, Charaka, Chakrapanidatta, Sutra sthana, Chapter Kiyantah shiraseeyam adhyaya adhyaya, Verse. 80. In: Acharya YT (Edi.), Charaka samhita with Ayurveda deepika commentary Reprint Edition 2023. Varanasi: Chaukambha Orientalia, p. 103.
10. Vijayalakshmi, K Goud, A K R. "Understanding Avarana in relation with insulin resistance w.s.r to Madhumeha"-A review article, European journal of biomedical and pharmaceutical sciences, 27 January 2021; 8(2): 239-244. Available at https://www.ejbps.com/ejbps/abstract_id/7611 Accessed on 12 December 2025
11. Sushruta, Dalhana, Gayadasa. Sutra Sthana, Chapter Dosha dhatu mala kshaya vriddhi vijnaneeyam Adhyaya, Verse 32. In: YT Acharya Narayana ram(Edi.). Sushrutha Samhita with Nibandhasangraha, and Nyayachandrika commentary Reprint Edition: 2023. Varanasi: Chaukhambha Orientalia, p. 73.
12. Sushruta, Dalhana, Gayadasa. Chikitsa Sthana, Chapter Prameha pidaka chikitsa Adhyaya, Verse 8. In: YT Acharya Narayana ram(Edi.). Sushrutha Samhita with Nibandhasangraha, and Nyayachandrika commentary Reprint Edition: 2023. Varanasi: Chaukhambha Orientalia, p. 454.
13. Sushruta, Dalhana, Gayadasa. Chikitsa Sthana, Chapter Prameha pidaka chikitsa Adhyaya, Verse 4. In: YT Acharya Narayana ram(Edi.). Sushrutha Samhita with Nibandhasangraha, and Nyayachandrika commentary Reprint Edition: 2023. Varanasi: Chaukhambha Orientalia, p. 454.