

# A case study - Concept of nidana in the management of *Prameha* (Diabetes mellitus)

## Case Report

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### Abstract

Diabetes mellitus is the commonest and major health disorder affecting mankind nowadays. There are an estimated 72.96 million cases of diabetes in the adult population of India. In today's era, improper diet, sedentary lifestyle, and gaining weight are making the younger generation more prone to diabetes and are the main leading etiological factors. In *Ayurveda*, it is described under *Prameha* and further as *Madhumeha*. *Prameha* is a kapha *pradhana tridoshaja vyadhi*. Mainly the *nidana* which do *kapha vriddhi* are responsible for *vyadhi utpatti*. The present study deals with a 58 years old male patient with the chief complaints of generalized weakness, increased frequency of urine, swelling in bilateral limbs, numbness of both palms and feet, and exertional dyspnoea. He was diagnosed case of diabetes mellitus and the ayurvedic diagnosis of *Prameha* was made and the treatment plan opted was the use of *Shamana Aushadhis*, *Shodhana Chikitsa* along with modification of diet and lifestyle (*nidana-parivarjana*) which is the leading cause. The patients get positive results.

**Key Words:** Diabetes Mellitus, Sedentary Lifestyle, *Prameha*, *Madhumeha*, *Kapha-vriddhi Shodhana Chikitsa*, *Shamana Aushadi*.

### Introduction

*Ayurveda* is an ancient science with the basic aim of “*Swasthasya Swasthya Rakshanam Aturasya Vikara Prashamanam*”. Following this aim, *Ayurveda* has explained the number of diseases and their mode of treatment. *Prameha* which is a *santarpanajanya tridoshaja vyadhi* co-related with diabetes mellitus in modern aspects, is one of the diseases explained by acharyas nowadays is the leading cause of death. There are an estimated 72.96 million cases of diabetes in the adult population of India.

The term diabetes is taken from Latin, which means “sweetened with honey”. Diabetes Mellitus is a metabolic disease in which carbohydrate use is reduced and that of lipid and protein is enhanced. It is caused by an absolute or relative deficiency of insulin and is characterized, in more severe cases, by chronic hyperglycemia, glycosuria, water and electrolyte loss, ketoacidosis, and coma. Long term complications include neuropathy, retinopathy, nephropathy, generalized degenerative changes in large and small vessels, and large susceptibility to infection (1)

Diabetes Mellitus, is the leading disorder or silent killer in today's era due to people following a sedentary life style and their negligence towards their health.

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Having diabetes can further leads to many complications. Ayurvedic texts mention the cardinal symptom of disease *Prameha* as “*prabhootavila mutrata*” i.e. excretion of large quantities of turbid urine (2), which is same as the symptom of Diabetes mellitus mentioned in modern texts. *Acharya Sushruta*, has considered *prameha* as one of the *ashta-mahagada* and said it as *dushchikitsya* (difficult to treat) (3). *Acharya Charaka* considered *prameha* as one of the *ashta-rogavishyaka arishta* and said if the *rogi* suffering from one of that eight diseases have *mams* and *bala kshya* then that patient should not be treated i.e. *achikitsiya* (4). *Ayurveda* has mentioned 20 types of *prameha* as a *sadhya* (curable), *yapya* (paliabile) and *asadhya* (incurable) according to the dominancy of dosha. 10 types of *kaphaja prameha* are *sadhya*, 06 types of *pittaja prameha* are *yapya* and 04 types of *vataja prameha* are *asadhya* in nature. *Sushruta* in his *nidansthana* mentioned that if *prameha* remains untreated then it gets converted into *madhumeha* and is *asadhya* (5), whereas *Charaka* considered *madhumeha* as a type of *vataja prameha*. (6)

*Susruta*, said that upon its appearance *prameha* is of two types- one is *sehaja prameha* and another one is *apathya-nimitaja prameha*. *Sehaja prameha* is due to *beeja-dushti* and the person is *krisha* (leen) whereas, *apathya-nimitaja* is due to intake of improper diet and lifestyle and the person is *sthula* (obese) (7). It is a *tridoshaja* condition with the dominance of *Kapha* and 10 *Dushya* involved in it are *Meda*, *Mamsa*, *Kleda*, *Shukra*, *Shonita*, *Vasa*, *Majja*, *Lasika*, *Rasa*, and *Oja* (8).

The main symptoms of the disease are *Prabhootha Mutrata*, *Avila Mutrata*, *Karapada Daha*, *Kshudaathi Pravrthi*, etc. *Ayurvedic* management

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includes *Shamana chikitsa* (intake of anti-diabetic drugs), *Shodhana chikitsa* (*panchakarma therapy*), and *Pathya ahara vihara* (dietary modification and lifestyle changes).

**Etiological Factors (9)**

- *Acharya charaka*, said the *nidana* are – *aasyasukham* (*sedentary lifestyle*), *swapnasukham* (*excessive sleep*), *dadhini-gramya-audaka-anoop rasa* (*intake of curd, meat soup of domestic, aquatic and marshy animals*), *pyaansi* (*milk products*), *nava-anna-paanam* (*freshly harvested grains, fresh wine*), *guddvaikratam* (*jaggery preparation*) and all *kapha* promoting substances.
- According to *acharya sushruta*, *diwaswapana* (day-sleeping), *avyayama* (no exercise), *aalasyam* (laziness), intake of food which are cold, unctuous, sweet, fatty, and liquid.

Here, in this case study, the *prameha* is due to the *apathya-nimitaja* i.e. due to improper diet and lifestyle of the patient.

**Case report**

A patient of 58 years aged, married male from Dabhoi, in Vadodara district of Gujarat was brought to *Panchakarma* Outpatient department of Parul Institute of Ayurveda, IPD on 05/10/2021 with complaints like generalised weakness and exertional dyspnoea Since, 5-6 months and increased frequency of urine, pain and swelling in knee joint and numbness of both palms and feet since, 2-3 years. There was no history of polydipsia, polypepsia, weight loss etc and any other major ailments like hypertension, asthma, hypothyroidism etc. He was the diagnosed patient of *Prameha* (diabetes mellitus) and was on regular medicine. Due to his improper diet and lifestyle his sugar level randomly increases.

**History**

On taking personal history of the patient - Etiology behind the disease -

- patient eats non-vegetarian thrice in a week
- has an addiction of intake of tea 6-7 times /day
- likes to take fatty diet, oily food.
- fond of eating sweet.
- sleep is sound and excessive sleep (*ati-nidra*)
- frequency of micturition is 6-7 times during day and 3-4 times at night, bowel habits are irregular (mild constipated).

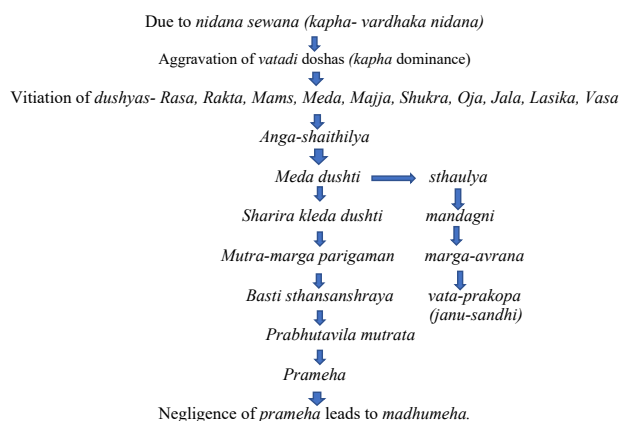
Past history revealed that the patient was the known case of Diabetes since, 3-4 years, was on regular medicine but his diet and lifestyle was not proper.

Medicinal History - Tab. Glycinova G1 Forte.

Family History - No such family history of diabetes.

**Samprapti –**

Here, all the etiological factors are aggravating *kapha dosha*.



**Samprapti Ghataka**

- *Dosha – kapha pradhana tridosha*
- *Dushya – rasa, rakta, mams, meda, majja, shukra, oja, jala, vasa, lasika*
- *Strotus – mutravaha , medovaha*
- *Strotodushti – sanga, atipravritti*
- *Adhishthana- basti , sarva-shareera*
- *Agni – dhatvagni mandya*
- *Udbhava-sthana- koshta*
- *Vyadhiswabhava- chirkaari*

**Table no 1: Physical Examination**

Blood Pressure	140/90 mm of Hg
Pulse Rate	74/min
Respiratory rate	20/min
Temperature	98.6° F
Height	167cm
Weight	93kg
B.M.I	33.3
Edema	No
Pallor	No
Icterus	No
Clubbing	No

**Table no 2: Ashtasthana Pariksha**

<i>Nadi</i> (pulse)	<i>Vaatpradhana kapha</i>
<i>Mala</i> (stool)	<i>Vibandha</i>
<i>Mootra</i> (urine)	6-7 times/day, 3-4 times /night
<i>Jihwa</i> (tongue)	<i>Sama</i>
<i>Shabda</i> (speech)	<i>Gambhira (kapha prakruti)</i>
<i>Sparsha</i> (tactilation)	<i>Samsheetoshna</i>
<i>Drukk</i> (eyes)	<i>Prakruta</i>
<i>Akriti</i> (anthropometry)	<i>Prakruta</i>

**Table 3: Systemic Examination**

Respiratory system	On auscultation, normal sounds heard and no such difficulty
Cardiovascular system	S1 S2 heard and no such abnormality detected.
Gastrointestinal system	Soft abdomen, no pain, no tenderness and no such organomegaly
Central nervous system	Fully conscious, fully oriented to time, place and person.

**Locomotory System**

**Table 4- Examination of Knee-joint**

	Right Knee Joint	Left Knee Joint
Pain	+	+
Swelling	+	+
Crepitations	+	+
Temperature	-	-

### Laboratory Investigations

Investigations of blood glucose was done on 05/10/2021 i.e. before treatment, as the patient was a diagnosed case of *prameha* (diabetes mellitus).

- F.B.S- 168mg/dl (normal range- 100- 125 mg/dl)
- PPBS- 194mg/dl (normal range – less than 140 mg/dl)
- HbA<sub>1C</sub>- 7.8% (normal range – between 4% - 5%, pre-diabetics- b/w 5.7% and 6.4%, diabetic- 6.5% or above)

### Materials and Methods

- Centre of study: Parul Institute of Ayurveda Hospital IPD, Vadodra
- Simple random single case study

### Treatment advised

**Table.5: Internal Medication**

Sl. No	Name of Medicine	Dose	Time	Anupana
1	<i>Chandraprabha Vati</i>	2 tab	3 times after Food	Luke warm water
2	<i>Triphala Guggulu</i>	2 tab	3 times After Food	Luke warm water
3	<i>Agnitundi Vati</i>	2 tab	3 times before food	Luke warm water
4	<i>Trivrut kshyaya + Erand taila</i>	30 ml +30ml	At bed time	Luke warm water

**Table 6: Showing details of treatment given to patient**

Sl. no	Procedure	Date	Number of Days
1	<i>Udvardana</i> with <i>yavaloha</i> followed by <i>nadi sweda</i> .	09/10/2021 - 15/10/2021	7
2	<i>Shirodhara</i> with <i>musta</i> , <i>jatamansi</i> and <i>amalaki churna</i>	13/10/2021 - 16/10/2021	4
3	<i>Lekhana basti</i> with <i>murchhita tila taila</i>	14/10/2021 - 18/10/2021	5
4	<i>Sarvaanga – abhyanga</i> with <i>murchhita tila taila</i> followed by <i>nadi sweda</i>	16/10/2021 - 18/10/2021	3
5	<i>Janu basti</i> with <i>murchhita tila taila</i>	17/10/2021 - 20/10/2021	4

**Table 7: Ingredients of *Murchhita Tila Taila Lekhana Basti***

S.No	Drugs	Dose
1	<i>Triphala kwatha</i>	300ml
2	<i>Triphala churna</i>	10gm
3	<i>Gomutra</i>	200ml
4	<i>Madhu</i>	75gm
5	<i>Til taila</i>	75gm
6	<i>Saindhava</i>	5gm
7	<i>Yava kshara</i>	3gm

**Table 8: Medication Prescribed on Discharge For 7 Days**

Drugs	Dose and time	Anupana
<i>Triphala Guggulu</i>	1-0-1 after food	Luke warm water
<i>Arogyavardhini Vati</i>	1-0-1 after food	Luke warm water
<i>Punarnava + Musta Kashaya</i>	50ml B.D	Luke warm water
<i>Tab.Chandraprabha Vati</i>	2-0-2 after food	Luke warm water

**Table 9: *Pathya* and *Apathya***

Do's ( <i>pathya</i> )	Don't ( <i>apathya</i> )
Use of fresh, green and, leafy vegetables	Avoid junk, oily, and foods that contain fat in excess quantity
Use of fresh fruits	Avoid the fruits having an excessive quantity of sugar like mango, cherry, etc
<i>Takra</i>	Avoid non-vegetarian on a daily routine
Walk daily for half an hour in the morning.	Avoid day sleeping and excessive sleep
Keep the gap of a minimum of 2 hrs between dinner and sleep.	Avoid the intake of <i>dadhi</i> (curd), alcohol

### Results

Along with the oral medications, procedures and proper diet, and change in his living style, there was a significant reduction in the blood glucose level along with gradual relief from generalized weakness, exertional dyspnoea, increased frequency of urine, pain, and swelling in the knee joint and numbness of both palms and feet.

**Table 10: Objective Parameters**

Blood glucose level	Before treatment	After treatment
F.B.S	168mg/dl	89 mg/dl
PPBS	194 mg/dl	162 mg/dl
HbA <sub>1C</sub>	7.8%	6.4%

**Table 11: Subjective Parameters**

Symptoms	Before treatment	After treatment
<i>Daurbalya</i> (Generalised weakness)	Present	Absent
Exertional dyspnoea	Present	Absent
<i>Prabhuta-mutrata</i> (polyuria)	6-7 times/day and 3-4 times/night	3-5 times /day and 1-2 times/night
<i>Kara-pada suptata</i> (numbness)	Present	Absent
Knee joint – Pain	+	-
Swelling	+	-
Crepitations	+	-
Temperature	-	-

### Discussion

*Acharya charaka* has explained both *shamana* and *shodhana chikitsa* for *prameha*. There are two types of *prameha rogi*- one is *sthula*, *balwana* and the other



one is *krisha*, *durbala*. He mentioned that *krisha rogi* should be treated with *brinhana-chikitsa* (nourishing therapy) whereas, in *sthula rogi* the increased *doshas* should be eliminated through *shodhana chikitsa* (10). As, the main causative factors leading behind the manifestation of *prameha* in this case study is improper lifestyle and diet which are *kapha- vardhaka nidanas*. So, by following proper diet and lifestyle along with medication helps in controlling the blood sugar level.

#### **Chandraprabha Vati**

It is indicated specially in 20 types of *prameha* and also in *mutrakrichha*, *mutraghata*, *ashmari*, *shoola*, *vibandha*, *anaha*, *granthi*, *arbuda*, *antravrudhi*, *katishula*, *shwasa*, *kasa*, *vicharchika*, *andavrudhi*, *pandu*, *kamla*, *halimaka*, *kushta*, *arsha*, *kandu*, *pliha*, *udara*, *bhagandara*, *dantroga*, *netraroga*, and in problems of *artava sukra* (11). It is also *balya* and *rasayanam*. It contains *chandraprabha*, *vacha*, *musta*, *bhunimba*, *amrta*, *devdaru*, *guggulu* etc. *Chandraprabha (karpura)* have *tikta*, *katu*, *madhura rasa*, *laghu*, *tiksna guna*, *katu vipaka* and *sheeta virya*. Due to its *sheeta virya* and *tikta rasa* it is *pittasamaka* and *kaphasamaka* due to its *katu vipaka* and *tikta rasa* (12).

#### **Gokshuradi Guggulu**

*Gokshuradi Guggulu* is commonly used medicine in diseases of *Mootravaha srotas* & specially indicated in *Prameha*. According to *acharya sharangdhara*, it contains *gokshura*, *trikatu*, *triphala*, *motha* and is used in *prameha* (diabetes), *mutrakrichha* (dysuria), *pradara* (leucorrhoea), *mootraghata* (suppression of urine), *vatarakta* (gout), *vata roga*, *shukra-roga*, and *ashmari* (renal calculi) (13)

*Gokshura* is *tridosashamaka*, *vatahara* due to *madhura vipaka* and *usna virya*, *pittasamaka* because of *Madhura rasa* and *Madhura vipaka*, *kaphasamaka* because of *usna virya*. (14)

#### **Agnitundi Vati**

*Agnitundi vati* is used in various digestive problems. *Prameha* occurs due to *mandagni*. *Agnitundi vati* contains *purified suta*, *visa*, *gandham*, *ajmoda*, *triphala* herbs, *svarjiksara*, *yavaksara*, *vahni*, *rock salt*, *sauvarcalam*, *vidanga*, *Samudra*, *tankana*, *visa musti* and sour juice of *jambira*. Here it is used to improve the suppression of the power of digestion. (15)

#### **Trivruta Kshaya and Erand Taila**

If the *pramehi* is *sthula* and strong, it is said that the vitiated *doshas* are to be eliminated by *samshodhana chikitsa (vamana or virechana)*. Here the patient was *sthula* and was having constipation. So, both *trivruta kshaya* and *eranda taila* are used for the purpose of *virechana*. *Trivruta* is *vatahara*- because of *usna virya*, *kaphapittahara*- *pittahara* because of *virechana karma* and *kaphasamaka* due to *usna virya*, *katu vipaka* and *katu-tikta rasa*. *Erand*, is *tridosasamaka*, *vatahara* due to its *usna virya* and *Madhura vipaka*, *pittahara* because of *Madhura vipaka*, *kaphahara* due to its *usna virya*. (16)

#### **Udvardana**

The powder of different drugs is used for massaging the body and the strokes are applied with pressure in the opposite direction of the hairs. It is indicated in *vata -kapha* disorders by causing liquefaction of *kapha* and *meda* promotes the metabolism and complexion of the skin. (17)

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the *Drvaya*, i.e., *Yava*, *Bajara* and *Kulattha* are having properties to alleviate *Kapha*, *Meda* (whose function is to provide *Snehana*) due to their *ushna*, *ruksha*, and *lekhana* potency. (18)

#### **Snehana**

##### **Abhyanga**

*Abhyanga* is one among the *Dinacharya* and is an ancient Indian *Ayurvedic* approach adopted for healing, relaxation and treating various diseases. (19)

Mode of action: According to *acharya dalhana*, if *abhyanga* is done for sufficient time, the oil reaches the different *dhatu*. Hence, it is clear that the potency of drug used in oil is absorbed into the skin. *Dalhana* also mentions that when *snehana* drug reaches to the particular *dhatu* it subsides the diseases of that particular *dhatu*. *Charaka* has also described that *vayu* dominates in the *sparshanendriya* and its site is *twaka*. The *abhyanga* is exceedingly beneficial to the skin, so one should practise it regularly. *Indriya* are in close contact of mind hence if *indriya* remains healthy, mind remains healthy. Thus, *abhyanga* keeps body and mind healthy. (20)

Here *Abhyanga* was done with *Tila Taila* possesses *Tikta Rasa* (bitter taste), the most effective in mitigating *Pitta Dosha* and *Kapha Dosha* in addition to *Madhura Rasa*. *Tikta Rasa* is effective in relieving fainting (*Murchaprasamana*) and promotes memory and intellect (*Medhya*). *Ushna Veerya* (of heating virtue) of *Tila Taila* reduces the *Vata* and *Kapha*. (21)

#### **Nadi sweda (22)**

*Swedana*, the therapeutic application of heat to the body. Though *swedana* literally means 'sweat', the main purpose of *swedana* is not to produce sweat, but to dilate the body's *srotas* or channels so that oleation's objective- removing *ama* from the *dhatu*- can be more easily achieved.

*Nadi*, which means "tube", uses steam from an herbal water decoction. This process is facilitated by the use of a pressure cooker and a nylon reinforced plastic hose which eases the steam's application to the body's surface. *Nadi* is a more penetrating type of wet heat than *bashpa*, because the steam actively drives the heat and oil (from *bahya snehana*) deep into the tissues through the pores of the skin. It can be used with *snehana* for reducing pain, muscle spasm and rigidity in localized areas. This treatment can be very helpful in the palliative management of backache, inflammation of the spine, hip and knee and for generalized muscle pain.

#### **Basti**

*Basti chikitsa* regarded as the prime treatment modality among the *panchkarma*. It is having not only

curative but also preventive and promotive aspects. *It has not only curative aspects but also preventive and promotive aspects* (23). *Basti chikitsa* is considered as *chikitsadhikara* among all therapy. It not only cures *vatika* disorders but also *samsarga* and *sannipata* condition of *dosha*, *kaphaja* and *pittaja* disorder, *sakhagata* and *koshthagata roga* by combination of different types of *basti dravya*. (24)

### Lekhana Basti

*Lekhana basti* is mentioned by different acharyas for *santarpanotha vyadhi*, *kaphaja roga* and *kaphavritta vata sthaulya* is also among these.

The word *lekhana* itself indicates its action means- "*lekhanam patlikaranam*". "*lekhanam karshanam*". Thus *lekhan* is nothing but a process of emaciation while *sharandhara* considered *lekhana* in a wide sense i.e. *lekhan* is a process of drying up desiccation of all excess *dosha*, *dhatu* and *mala* i.e. "*deha vishosanam*" (25)

### Janu Basti

*Janu Basti* is given to the procedure done on knee joints. It pacifies aggravated *vata dosha* in the knee region, restores the lubricating fluid in the joint and maintains integrity of the structures involved in the joint, improves the mobility of knee joints by reducing pain and swelling. Here the patient has complaint of mild knee pain and swelling so, *janu basti* with *murchhita tila taila* is given to the patient.

### Shirodhara

*Shirodhara* as the name suggests is formed by two different terms *Shira* (head) and *Dhara* (flow) is pouring of fluids like decoction, medicated oil, medicated milk, Medicated butter milk, water etc over the head continuously in rhythm from a specific height for specific period (26). *Shirodhara* is done with *Tila Taila* processed with *Jatamamsi* and *Amalaki choorna*. Head is the substratum of all the sense faculties or *Indriyas* (sense organs), it is also known as *Uttamanga*. Because of this, *Shirodhara* gives strength to the *Prana* and *Indriyas*. *Taila Dhara* has the properties like *Mana Sthairyakara*, imparts strength, induces sound sleep, increases intellect etc (27).

### Conclusion

*Prameha* (Diabetes mellitus), now a days is the leading cause of death, due to the sedentary lifestyle and improper diet of people. It is a multifactorial silent killer which needs to be treated as soon as possible to avoid further complications. Whether the patient is on regular medication but if his *ahara-vihara* is not good and he is not following the proper *pathya- apathya* then there is no use of taking medication. For a complete cure from a disease one should follow the concept of *nidana-parivarjana*. In this study, the patient was diagnosed case of *prameha* and was on regular medicine but was following an irregular lifestyle and diet. Here, in this case study, the *prameha* is due to

*apathya-nimitajja*, as the patient was obese, eats more food, always desires to occupy bed and sleep excessively. So, with the help of using *shamana aushadhis* and by following proper dietary and lifestyle habits one can control the blood sugar level.

From this study, it was concluded that by doing *nidana – parivarjana* (eliminating the etiological factors from your daily routine and by following diet and lifestyle) along with proper use of *panchakarma* therapies and oral medication was effective in management of *prameha*.

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