

Role of Virechana Therapy in the Management of Madhumeha w.s.r. to Diabetes Mellitus-II - A Case Study

Sonika¹ Kapil² Dr. Kanchan Chowdhury³ Dr. Vijay Kumar Srivastava⁴

¹Ph.D. Scholar, Department of Panchakarma.

² Ph.D Scholar, Department of Kayachikitsa

³. Assistant Professor, Department of Swasthavritta & Yoga

⁴. Associate Professor, Department of Panchakarma, Faculty of Ayurveda, Institute of Medical Sciences, Banaras Hindu University, Varanasi, Uttar Pradesh, India.

***Corresponding Author:** Sonika

* (Ph. D Scholar), Department of Panchakarma, Faculty of Ayurveda, Institute of Medical Sciences, Banaras Hindu University. Email: phdsonikaushik720@gmail.com

Abstract:

Diabetes mellitus is a common chronic metabolic disorder worldwide. Madhumeha, as described in Ayurvedic texts, is often compared to type 2 diabetes mellitus. Virechana is a specific Shodhana procedure used to eliminate vitiated Pitta doshas. The purpose of this research was to evaluate the use of Virechana Therapy for treating type 2 diabetes mellitus. The condition was assessed both before and after therapy using FBS, PPBS, HbA1c, and lipid profile. The male patient, aged 32 years, reported increased urination frequency, stress, burning sensation in hands and feet, weight gain, hunger, and thirst over the past year. Before Virechana Therapy, fasting blood sugar, postprandial blood sugar, and lipid profile were all elevated. Following Virechana Therapy, significant improvements were observed in FBS, PPBS, HbA1c, and triglyceride and cholesterol levels. The symptoms completely subsided. This improvement may be due to the elimination of abnormal lipids from the body. This study indicates that Virechana Therapy is a safe and effective treatment for the management of type 2 diabetes mellitus.

Keywords: Virechana Therapy, Diabetes Mellitus, Ayurveda, FBS, PPBS

How to cite this article: Sonika, Kapil, Chowdhury K, Srivastava VK. Role of Virechana Therapy in the Management of Madhumeha w.s.r. to Diabetes Mellitus-II - A Case Study. Int J Drug Deliv Technol. 2026;16(17s): 758-761. DOI: 10.25258/ijddt.16.17s.89.

Introduction:

Diabetes mellitus type II is a common lifestyle disorder caused by insulin resistance, with either relative or absolute insulin deficiency.^[1] In Ayurvedic classics, 20 types of Prameha are described, and Madhumeha is mentioned as a subtype of Vatik Prameha, characterized by the patient passing excessive amounts of urine that tastes and looks like honey.^[2] It is one of the most alarming diseases and possesses a special place in medical science due to its high prevalence in society and increased incidence. Globally, according to the International Diabetes Federation's Diabetes Atlas (11th edition, 2025), about 589 million adults (20-79) were living with diabetes in 2024, it is expected to rise to 853 million by 2050.^[3] Acharya Charaka describes two types of Prameha: Sthula Prameha and Krisha Prameha. Samshodhana therapy is indicated in Sthula Pramehi and Samshamana therapy is indicated in Krisha Pramehi.^[4] For the elimination of vitiated Doshas, Virechana is an appropriate Shodhana procedure. Virechana Karma though indicated for Pitta Dosha eliminates Vata Dosha by Pakwashaya Shuddhi (defecation) and Kapha Dosha by its Tikshana (pungent) Guna.

Patient Information:

A 32-year-old male patient, a teacher suffering from Type 2 Diabetes Mellitus, presented on 20/03/2025 to

*Author for Correspondence: Email: phdsonikaushik720@gmail.com

the Department of Panchakarma (OPD-16C), Sir Sunder Lal Hospital, Varanasi, India, for Ayurvedic treatment. He complained of severe weakness, polydipsia, polyphagia, polyuria and joint pain for the past 5–7 months.

History of Past illness:

Patient has no history of CAD/HTN/Thyroid disease/any major surgery.

Personal history:

- Occupation - Teacher
- Appetite – Medium
- Sleep - Normal
- Bowel - Constipated
- Addiction – non-smoking
- Allergy - No history of any food or drug allergy

Lab Investigations:

The patient is a resident of Varanasi, Uttar Pradesh. He was screened for FBS, PPBS, HbA1c, LFT, lipid profile and RFT at Sir Sunder Lal Hospital, BHU, Varanasi.

Timeline:

In the present case, Virechana Therapy started from 01/03/2025 to 11/05/2025. **Table No. 1** shows the timeline of follow-up, history, and clinical outcomes.

RESEARCH PAPER

Table No. 1: Timeline of Disease Activity and Intervention

Timeline	Clinical Intervention
March 2025	After taking the history and performing blood investigations, the patient was advised of Virechana Therapy.
April 2025	After Virechana therapy, the patient was advised to continue Madhumehari Churna for 3 months. An improvement in symptoms of diabetes mellitus II was observed.
May 2025	After two months of follow-up, the patient was advised to continue the Madhumehari Churna. All reports were within the normal range

2.2 Clinical Findings:

The patient had a fasting blood sugar of 252 mg/dl and a postprandial blood sugar of 368 mg/dl on 01/03/2025. Glycosylated haemoglobin (HbA1C) was tested on the same date and was 9.2%.

The subjective symptoms increased, as shown in **Table 3**. Thus, the patient was diagnosed with Diabetes mellitus II by the Ayurvedic physician at Panchakarma OPD-16C, Sir Sunder Lal Hospital, Banaras Hindu University, Varanasi, India.

Table NO. 2: Biochemical characteristics of the patients after Virechana therapy.

Variable	Before Intervention	After Intervention
FBS	252 mg/dl	130 mg/dl
PPBS	368 mg/dl	214 mg/dl
HbA1c	9.2 %	7.6 %

Table NO. 3: Significant improvements were observed in the subjective parameters of the patient:

Sr. NO	Variables	Before Intervention	1 st Follow-up	2 nd Follow-up	3 rd Follow-up
1.	Polydipsia	+	-	-	-
2.	Polyurea	+	-	-	-
3.	Polyphagia	++	+	+	-
4.	Burning sensation	+	+	+	-
5.	Weakness	++	+	-	-
6.	Joint Pain	+	-	-	-

(Nil -, Mild +, Moderate ++, Severe +++)

1. Therapeutic Interventions:

Under the previous consultation, the patient was advised of Virechana therapy as mentioned (**Table No.4**). Diabetes Mellitus Type II Virechana therapy was administered, and Madhumehari Churna was continued for three months.

Table NO. 4: Intervention Schedule Virechana Therapy:

Procedure	Drugs and Dose	Duration
Deepan and Pachan	Taking two tablets of Chitrakadi Vati two times a day before meals and five grams of Hingvastak Churna with warm water two times a day after meals was given ^[5]	3 days
Snehapana	Plain Go Ghritta in increasing doses per day. Was given in an empty stomach in the morning at sunrise times. 1st day – 30 ml 2nd day – 60 ml 3rd day – 90 ml (Anupan- Hot Water) 4th day – 120 ml 5th day – 150 ml 6th day – 180 ml 7th day- 210 ml ^[6]	7 days
Sarvanga Abhyanga and Vashpa Sweda	For the following three days, Maha Naryan oil was used for complete-body massages (Sarvanga Abhyanga) and therapeutic wet heat (Stram both), performed in the morning for 15-20 minutes.	3 days
Virechana Therapy (therapeutic purgation)	The next day, after the 3-day gap, Abhayadi Modak was given to the patients on an empty stomach at about 10:00 A.M., 10 tablets after assessing their Kosta and Bala.	1 days

	Virechana vegas were assessed subjectively. Virechana Vega – 20 Shudhi prakar- Madhyam Patient pulse and BP were recorded during Virechana, which remained normal throughout the procedure.	
Samsarjana Karma	Shuddhhi recommended Samsarjana Karma, a post-therapy dietetic regimen for rejuvenation, for five days. [7]	5 days

Diet before Virechana Karma

The patient should be advised to take Laghu, Snigdha, Drava, Ushna Ahara and Jangala Mamsa Rasa. [8] Acharya Sushruta advised a light diet and Phalamla juice. [9]

Outcomes:

The FBS, PPBS, HbA1c, BP, BMI, RFT, and LFT were measured before and after the intervention. The patient remained stable, with no new complaints. His

symptoms, such as polydipsia, polyphagia, burning sensation in hands and feet, weakness, and joint pain, were alleviated. After 3 months, his FBG and PPBG were 368 mg/dL and 214 mg/dL, respectively, indicating a satisfactory reduction in blood sugar levels. He was advised to undergo LFT, RFT, and lipid profile tests for a basic medical assessment before and after the trial. He was also instructed to continue Madhumehari Churna for another two months.

Table 7: Significant improvements were observed in the subjective as well as objective parameters of the patient:

Sr. NO	Variables	Before Intervention	After Intervention 3 rd
1.	FBG	252 mg/dl	130 mg/dl
2.	PPBG	368 mg/dl	214 mg/dl
3.	BMI	24.9 kg/m ²	22.7 kg/m ²
4.	BP	138/98 mmHg	124/82 mmHg
5.	HbA1c	9.2%	7.6%
6.	Cholesterol	160 mg/dl	140 mg/dl
7.	Triglycerides	186 mg/dl	142 mg/dl
8.	HDL	24 mg/dl	45 mg/dl
9.	VLDL	37mg/dl	25 mg/dl
10.	Total-Bilirubin	0.70 mg/dl	0.40 mg/dl
11.	SGOT	38 u/l	25 u/l
12.	SGPT	39.2 u/l	27.4 u/l

3.2 Patient’s Perspective on Virechana Treatment Received:

When I decided to take the Virechana therapy and Madhumehari Churna, I was worried about getting relief from my problems. I found Virechana therapy to be very helpful. Virechana therapy and Madhumehari Churna had positive effects on my health. Thanks to the Virechana Therapy and Panchakarma staff for helping me become healthy.

3.3 Limitations of the case report:

While this outcome was observed in a single patient, further research on a larger sample size would be necessary to establish evidence for the significant effectiveness of such Panchakarma procedures and Virechana therapy in relieving symptoms of Diabetes mellitus-II.

Discussion

Virechana is one of the Panchakarma therapies in which purgation is induced by drugs, specifically aiming to eliminate excessive Pitta Dosha along with shleshma and other doshas from the body. [10] As per Ayurveda, Virechana removes aggravated Pitta, clears all channels

of the body, kindles Jatharagni, and brings about lightness. [11] Virechana drugs possess Ushna, Sukshma, Vikashi, Teekshna, Vyavayi and Adhobhaga Prabhava properties. These drugs consist of Prithvi and Jala Mahabhootas, which are heavy in nature and thus help expel Dosha from Adhobhaga. According to Ayurvedic principles, Virechana therapy, a type of detoxification, can significantly reduce cholesterol levels by decreasing its absorption in the FBS, PPBS and HbA1c. It can be assumed that by acting primarily on the liver and pancreas, it may help reduce hepatic glucose production and overcome impaired insulin secretion. [12] Virechana therapy emerges as a feasible, cost-effective tool for type-2 diabetes and prevents the chances of type-2 diabetes complications like retinopathy, nephropathy, and cardiovascular disease. Seeing this fact, the current research work will be conducted in a series of cases of type-2 diabetes under the influence of Virechana therapy to compare its safety. [13] Virechana directly or indirectly corrects the entire metabolism of lipid formation and excretion, thus normalising beta-cell dysfunction. The cleansing therapies, therefore, might reduce immune-inflammatory processes implicated in the dysfunction of

Beta cells in the Islets of Langerhans, thereby harmonising their functioning.^[14]

Conclusion:

In this specific case, the study cited shows that Virechana Therapy and Madhumehari Churna not only regulate FBS (130), PPBS (214), and HbA1c levels (7.6) but also enhance the overall health of patients with type-II diabetes. Virechana Therapy, by its nature, helps normalise blood sugar levels. Together, Virechana Therapy and Madhumehari Churna are promising treatments for type-II diabetes mellitus. The patient's elevated blood sugar levels return to normal, and hyperlipidaemia also normalises. The subjective symptoms of type-II diabetes mellitus are alleviated by this procedure. Obstruction of channels due to doshas is cleared through bowel cleansing, relieving symptoms. The patient also shows improvements in both subjective and investigative criteria. Further research involving more patients is necessary to gain clearer insights into type-II diabetes mellitus. Lack of physical activity, a sedentary lifestyle, and obesity are primary causes of the disease. In this case study, Virechana Therapy and

Madhumehari Churna help regulate blood sugar levels, with significant results observed after treatment.

Informed consent: The patient provided informed consent before the start of Virechana therapy. Written consent for the publication of the patient's clinical details was obtained before initiation of the Virechana therapy.

Acknowledgement:

I extend my sincere appreciation to Dr. Vijay Kumar Srivastava for their unwavering support and motivation in my research and scholarly writing. We are thankful to the OPD of the Ayurveda wing, Institute of Medical Sciences, Banaras Hindu University, Varanasi, for providing the research area for our patient.

Source(s) of funding: No funding has been acquired to compile this case report study from any form of funding agencies.

Conflict of interest: No conflict of interest in any manner is four to be declared by the author.

REFERENCES:

- ¹ Goyal R, Jiala I, Type 2 Diabetes mellitus (2021). In Stat Pearls Treasure Island. Available from <https://www.ncbi.nlm.nih.gov/books/NBK513253/>.
- ² Charaka Samhita, Savimarsha 'Viddhyotini'(2008) Hindi vyakhyopeta, commentary by Pt. Kashinath Shastri and Dr Gorakhnath Chaturvedi; Siddhi Sthana Chap 9; Chaukhamba Sanskrit Pratisthan.
- ³ Federation, International Diabetes. (2025). IDF Diabetes Atlas 11th Edition-Middle-East and North Africa Fact Sheet. International Diabetes Federation.
- ⁴ Charaka Samhita, Savimarsha 'Viddhyotini' Hindivyakhyopeta, commentary by Pt. Kashinath Shastri and Dr Gorakhnath Chaturvedi, Chikitsa Sthana 6/15.
- ⁵ Ashtanga Samgraha -25/45
- ⁶ Chakrpani on Charaka Samhita, Siddhisthan, 6/11
- ⁷ Agnivesa, Charaka Samhita with Ayurveda Dipika Commentary, Choukhamba Sanskrit series. Varanasi.1994. Kalpa Sthana 1/5: page no.651.
- ⁸ Brahmananda Tripathi, Charak Samhita - Hindi Translation, Chaukhambha Bharati Academy Varanasi-2007, Siddhi Sthana Chapter 1/9.
- ⁹ Sushruta, Sushruta Samhita Hindi translation by Anant Ram Shastri, Chaukhamba Surbharti Prakashan, Varanasi, Chikitsa Sthana 31/20
- ¹⁰ Yadavaji Trikamji, Editor, Charaka Samhita of Agnivesha, kalpa sthana, chapter 1 verse no. 4, edition 5, Varanasi: Chaukhamba Surbharati Prakashan, 2008; 651.
- ¹¹ Agnivesha, Charaka Samhita, edited by R K Sharma, Bhagawan Dash: Edition- reprint. Chowkhambha Sanskrit series office, Varanasi: Siddhi Sthana, 2001; 1: 17: 151.
- ¹² Jindal N, Joshi NP. Comparative study of Vamana and Virechana karma in controlling blood sugar levels in diabetes mellitus. Ayu 2013; 34:263-9.
- ¹³ Kaushik, J., & Kumar, A. (2023). Clinical effect of Virechana Karma in Madhumeha WSR to Diabetes Mellitus—A Case Study. Journal of Ayurveda and Integrated Medical Sciences, 8(6), 249-253.
- ¹⁴ Swati, T. (2019). Role of Virechana karma in diabetes mellitus type 2: A clinical trial. International Journal Research. Ayurveda Pharm, 10(1), 40-43.