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# Conceptual Study on *Prameha Pidakas* w.s.r. to Skin Lesions In Diabetes

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## ABSTRACT

Diabetes is a disease known for its multifaceted complications. Diabetic ulcer is one of the major complications of diabetes. Diabetes affects more than 8% of Indian adult population. Up to 25% of diabetic patients develop foot ulcers. More than half of foot ulcers become infected and require hospitalisation and 20% of infections results in amputation. Early effective management can reduce the severity of complications such as preventable amputations and possible mortality and can also improve overall quality of life. Thousands of researches are being carried out on this in which *Ayurveda* has a major role. Different numbers of *Prameha Pidakas* are mentioned in *Ayurvedic Classics*. According to *Sushruta* there are 10 different types of *Prameha Pidakas*. Diagnostic pictures of these 10 are presented here w.s.r. to diabetic skin lesions with the brief treatment aspect. This article gives the obvious view for the diagnosis and treatment modalities of *Prameha Pidakas*.

**Key words:** *Prameha Pidika, Diabetes, Diabetic skin lesions.*

## INTRODUCTION

*Prameha pidakas* are explained in *Ayurvedic* texts as one of the complications of *Prameha*.<sup>[1],[2]</sup> There are much less study on comparing of *Prameha Pidakas* to allopathic science. Prevalence of Diabetes is 8.3% (95% CI 7.3–9.4%) where as prevalence of pre-diabetes is 6.3% (5.4 - 7.3%) in India. Out of all persons with Diabetes, only 18% were known case of Diabetes and are on treatment, among whom only about one-third had controlled blood glucose status.<sup>[3]</sup> Various references regarding *Prameha Pidakas* are found right from Vedic period. Review of literature

gives various references regarding all aspects of *Prameha Pidakas* and assists one to do critical review of the disease,<sup>[4]</sup> which helps to understand the concept in better way. Here an attempt is done to analyse *Prameha Pidakas* w.s.r to possible diabetic skin lesions most commonly seen as the complications of Diabetes mellitus with brief classical treatment.

### *Prameha Pidaka*

The word *Prameha* can be defined as a condition where there is excess urine flow.<sup>[5]</sup>

The word *Pidaka* means 'Yat Peedayanti Tat Pidak'. That which causes *Peeda* or *Vyatha* or *Vedana*. '*Spota Visheshaha Pidak*'.<sup>[6]</sup> The suppurative lesion is also called as *Pidaka*.

### *Nidana*<sup>[7],[8]</sup>

The aetiopathogenesis of *Prameha Pidaka* also follows the same path as that of the *Prameha*. When the *Vasa* and *Meda Vyapta Pramehi* consumes the *Nidaanarthakara Bhavaas*, *Kapha Dosh* vitiates and further vitiates *Pitta* and *Vata*. These vitiated *Doshas* settles in the *Medha Dhatu* and *Vasa* i.e. *Sneha* of *Mamsa* and manifestes the *Prameha Pidakas* in the *Pramehi*.

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*Prameha Pidakas* are ten in number as explained by *Sushruta*.<sup>[9]</sup> They are,

- a) *Sharavika*
- b) *Kachchapika*
- c) *Jalini*
- d) *Vinata*
- e) *Alaji*
- f) *Masurika*
- g) *Sarshapika*
- h) *Putrini*
- i) *Savidarika*
- j) *Vidradhi*

*Brihatatryis* have described *Prameha Pidaka* as a major complication of *Prameha*.<sup>[10],[11]</sup> These *Pidakas* are mainly found in muscular region, joints and vital points (*Marmas*).<sup>[12]</sup>

*Prameha Pidakas* can also manifest in the persons without *Prameha*.<sup>[13]</sup>

### 1. *Sharavika*

*Pidaka* which is raised at the margin and dipped in its center, so as to resemble as Saucer in its shape is called as *Sharavika*.<sup>[14]</sup>

It can be compared with the stage of the venous ulcer associated with the diabetic foot. It is also having the sloping edges, looks like the saucer.<sup>[15]</sup> This lesion can be compared with *Sharavika*.

### 2. *Sarshapika*

Pimples or pustules resembling white mustard seeds are called *Sarshapika*.<sup>[16]</sup> Pyoderma affecting the hair follicles, classified according to depth of invasion. Superficial folliculitis also known as Bockhart's impetigo. A small fragile dome shaped pustule occurs at the infundibulum of the hair follicle.<sup>[17],[18]</sup> This superficial folliculitis looks like the *Shweta Sharshapa*.

### 3. *Kachchapika*

A skin lesion, resembling the back of a tortoise in shape with burning sensation is called *Kachchapika*.<sup>[19]</sup>

*Acanthosis nigricans* is a non specific reaction pattern involving major body folds and mucocutaneous regions characterised by hyperpigmented, velvety, soft, verrucous lesions in a symmetric fashion. *Acanthosis nigricans* is usually associated with the diabetes mellitus.<sup>[20]</sup> So it looks like back of tortoise if associated with infections.

### 4. *Jalini*

A lesion studded with slender vegetations of flesh and with intolerable burning sensation is called *Jalini*.<sup>[21]</sup>

Diabetic dermopathy superimposed with infections or Carbuncles, a cluster of furuncles, more extensive, deeper communicating, infiltrating lesions that develops when suppuration occurs in elastic skin.<sup>[22],[23],[24]</sup> This can be compared with *Jalini*.

### 5. *Vinata*

A large bluecolour lesions appearing on the back or the wall of the abdomen and exuding as slimy secretion and with deep-seated pain is called *Vinata*.<sup>[25]</sup>

*Necrobiosis lipoidica diabetorum*, a dull red raised area on the skin that evolves into a shiny scar with a violet border, most often on the shin. There is telangiectasia with blood vessels easily visible under the skin. The area will be itchy and painful and crack open.<sup>[26]</sup> This looks like *Vinata*.

### 6. *Putrini*

A thin and extensive, studded with serous fluid/pus packets is called *Putrini*.<sup>[27]</sup>

*Bullosis diabetorum*, also known as bullous disease of diabetes and diabetic bullae, is a rare, distinct, spontaneous, noninflammatory, blistering condition of unknown etiology occurring in the setting of diabetes mellitus.<sup>[28]</sup> Although bullous disease of diabetes lesions often heal without significant scarring, they may be recurrent and also may lead to ulceration. There have also been reports of osteomyelitis arising at a site of bullous disease of diabetes and reports of amputation due to infection.<sup>[29]</sup> This can be compared with *Putrini*.

### 7. Masurika

Pimples to the size of lentil seeds are called *Masurika*.<sup>[30]</sup>

Eruptive xanthomas appear as firm, yellow, waxy pea-like bumps on the skin. The bumps which are surrounded by red halos and are itchy, usually are found on the face and buttocks.<sup>[31]</sup> This looks like *Masurika*.

### 8. Alaji

A dreadful abscess which is of a red and white colour studded over with blisters or exuding vesicles is called *Alaji*.<sup>[32]</sup>

Bacterial infections commonly affecting the skin spreads quickly in diabetic individuals. Bacteria viz., *Staphylococcus* are more common and more serious in people with uncontrolled diabetes.<sup>[33]</sup> This can be compared with *Alaji*.

### 9. Vidarika

A hard and round abscess as large as a (full-grown) gourd is called *Vidarika*.<sup>[34]</sup>

Scleroderma diabeticorum, while rare, this skin problem affects people with type 2 diabetes, causing a thickening of the skin on the back of the neck and upper back.<sup>[35]</sup> This skin lesion looks like the *Vidaarikanda*.

### 10. Vidradhi

An abscess of the *Vidradhi* type is called *Vidradhika*.<sup>[36]</sup>

Abscess is a localised collection of pus in the cavity lined by granulation tissue, covered by pyogenic membrane.<sup>[37]</sup>

### Sadhyasadyata:

Table 1: Prognosis<sup>[38]</sup>

Prameha Pidakas	Dosha involvement	Sadhyasadyata
<i>Shravika, Kachhapik and Jalini</i>	<i>Kapha and Meda</i>	difficult to treat
<i>Sarshapi, Alaji,</i>	<i>Pitta Pradhana,</i>	easily curable

<i>Vinata and Vidradhi</i>	<i>Alpa Meda</i>	
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*Prameha Pidakas* are fatal if manifest in *Marmas* (vital points), *Amsa* (axilla), *Guda* (anus), *Hasta* (hands), *Sthana* (breasts), *Sandhi* (joints) and *Pada* (foot).<sup>[39]</sup>

Further *Sushruta* adds *Prusta* (back) along with complications and *Durbalagni* persons are *Parivardhayet* (should not be treated).<sup>[40]</sup>

### Chikitsa<sup>[41],[42]</sup>

The management of the *Prameha Pidakas* is given elaborately in *Ayurvedic* classics. *Charaka* dealt *Shalyadhikara* (surgical management) and *Sushruta* explained according to the stage of the disease i.e. *Poorva Roopavasta* and *Roopavastha*.

In Poorva Roopavasta	In Roopavastha
1. <i>Apatarpana</i>	1. <i>Teekshana Virechana</i>
2. <i>Vanaspati Kashaya</i>	2. <i>Dhanvantara Ghrita</i>
3. <i>Basta Mutra</i>	3. <i>Utsadana – Aragvadadi Kwatha</i>
4. <i>Dhanvantara Ghrita</i>	4. <i>Parisheka – Saalaradi Gana Dravyas</i>
	5. <i>Paana – Pipplayadi Gana Dravyas</i>
	6. <i>Saalaradi Leha</i>
	7. <i>Navasa Loha</i>

### Prameha Pidakas compared with their relevant Modern Skin Lesions



Figure 1: *Sharavika* (Venous Ulcer associated with diabetic foot)



Figure 2: *Kachhapika* (Acanthosis nigricans)



Figure 6: *Masurika* (Eruptive xanthomatosis)



Figure 3: *Jalini* (diabetic dermopathy)



Figure 7: *Sarshapika* (folliculitis)



Figure 4: *Vinata* (Necrobiosis lipidica diabetorum)



Figure 8: *Putrini* (Diabetic blisters)



Figure 5: *Alaji* (Diabetic bacterial infections)



Figure 9: *Vidarika* (Diabetic scleroderma)



**Figure 10: Vidradhi (Abscess)**

### CONCLUSION

Following conclusions were drawn from the present conceptual study with critical review and observations.

SN	Prameha Pidakas	Compared with Skin Lesion
1.	<i>Sharavika</i>	Venous ulcer associated with diabetic foot
2.	<i>Sarshapika</i>	Folliculitis
3.	<i>Kachhapika</i>	Acanthosis Nigricans associated with infections
4.	<i>Jalini</i>	Diabetic dermopathy or carbuncles
5.	<i>Vinata</i>	Necrobiosis lipidicadiabeticorum
6.	<i>Putrini</i>	Diabetic blisters
7.	<i>Masurika</i>	Eruptive xanthomatosis
8.	<i>Alaji</i>	Diabetic bacterial infections
9.	<i>Vidradika</i>	Diabetic scleroderma
10.	<i>Vidradika</i>	Abscess

The management is according to the different *Avasthas* as explained.

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