

AYURVEDIC MANAGEMENT OF CHRONIC PRURITUS AND CONSTIPATION ASSOCIATED WITH TYPE 2 DIABETES MELLITUS IN AN ELDERLY PATIENT: A CASE REPORT

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ABSTRACT

Background: Chronic pruritus and constipation are common complaints among elderly individuals and are often associated with metabolic disorders such as Type 2 Diabetes Mellitus (T2DM). These symptoms can significantly impair quality of life and may persist despite conventional management. Ayurveda offers a holistic therapeutic approach aimed at correcting metabolic dysfunction, improving digestion, and restoring physiological balance.

Case Presentation: A 74-year-old male weighing 93.35 kg presented with persistent itching predominantly over the abdomen along with intermittent constipation. The patient was a known case of Type 2 Diabetes Mellitus and had been experiencing these symptoms for a prolonged period. Baseline assessment revealed stable vital parameters, while laboratory investigations demonstrated elevated HbA1c (7.7%), ESR (48 mm/hr), CRP (9.30 mg/L), and Rheumatoid Factor (88 IU/mL), indicating metabolic and inflammatory involvement. From an Ayurvedic perspective, the condition was assessed as Kapha-Pitta Dushti associated with Agnimandya and Ama accumulation. **Intervention:** The patient was managed with proprietary Ayurvedic formulations including Gond Jamun, Fina **Diabetol Forte** Capsule, L-Care Capsule, Bamboo Plus, and D-Care Advance Capsule, along with dietary regulation and lifestyle modifications. **Outcome:** Progressive improvement was observed during follow-up. Constipation was relieved, bowel habits normalized, itching reduced substantially, and improvements were noted in appetite, sleep quality, and overall well-being. No adverse effects were reported during the treatment period. **Conclusion:** This case demonstrates the potential utility of Ayurvedic management in alleviating chronic pruritus and constipation associated with metabolic dysfunction in an elderly patient with Type 2 Diabetes Mellitus. The observed clinical improvement suggests that individualized Ayurvedic interventions may serve as a beneficial complementary approach in such conditions. Further clinical studies are warranted to validate these findings.

KEYWORDS: Ayurveda, Chronic Pruritus, Constipation, Type 2 Diabetes Mellitus, Agnimandya, Ama, Integrative Medicine, Case Report.

INTRODUCTION

Type 2 Diabetes Mellitus (T2DM) is a chronic metabolic disorder frequently associated with multiple systemic complications that significantly affect the quality of life, particularly in the elderly population.^[1] Among the less-recognized but clinically important manifestations are chronic pruritus and constipation, both of which may

arise due to a complex interplay of diabetes-related pathophysiological changes, aging, comorbid conditions, and polypharmacy.^[2]

Chronic pruritus in elderly diabetic individuals is often multifactorial in origin. Age-related skin changes and xerosis resulting from impaired epidermal barrier

function predispose patients to persistent itching.^[3-4] Additionally, diabetic neuropathy may alter sensory perception and contribute to abnormal itching sensations.^[5-6] Poor glycemic control and microvascular complications further compromise skin integrity and immune function, increasing susceptibility to dermatological disorders and chronic pruritus.^[7-8] Concurrently, elderly patients with diabetes frequently suffer from multiple comorbidities and receive numerous medications, both of which may contribute to cutaneous adverse reactions and exacerbate itching.

Constipation is another common yet often overlooked complaint among elderly patients with T2DM.^[9] Diabetic autonomic neuropathy can impair enteric nervous system function, resulting in reduced gastrointestinal motility and delayed bowel transit.^[10] Furthermore, age-related decline in gastrointestinal function, reduced physical activity, inadequate dietary fiber intake, and medication-related adverse effects collectively contribute to bowel irregularities. The coexistence of chronic pruritus and constipation often reflects underlying metabolic dysfunction and systemic inflammatory processes, posing additional challenges in patient management.

Elderly individuals with T2DM frequently present with a complex clinical profile characterized by multiple comorbidities, frailty, cognitive impairment, depression, and polypharmacy, all of which may influence symptom perception, treatment adherence, and clinical outcomes. Therefore, comprehensive management requires careful evaluation of glycemic status, medication-related adverse effects, neuropathic involvement, and associated geriatric syndromes. Conventional management primarily focuses on symptomatic relief and optimization of metabolic control; however, persistent symptoms often necessitate complementary therapeutic approaches.

According to Ayurvedic principles, chronic pruritus and constipation may be understood as manifestations of Agnimandya (impaired digestive and metabolic fire), Ama accumulation, and vitiation of Kapha and Pitta Doshas, leading to dysfunction of Rasavaha and Raktavaha Srotas. Ayurvedic management emphasizes correction of the underlying metabolic imbalance through Deepana, Pachana, Srotoshodhana, and Rasayana therapies. The present case report describes the successful Ayurvedic management of chronic pruritus and constipation in an elderly patient with Type 2 Diabetes Mellitus, highlighting the potential role of individualized Ayurvedic interventions in improving symptom burden and overall quality of life.

Patient Information

A 74-year-old male patient weighing approximately 93.35 kg presented with complaints of persistent itching predominantly over the abdominal region along with intermittent constipation of several months' duration. The symptoms were associated with generalized discomfort and had adversely affected his quality of life. The patient

reported unsatisfactory bowel evacuation and recurrent episodes of abdominal itching, despite receiving routine medical care. He was a known case of Type 2 Diabetes Mellitus and was under regular treatment for glycemic control. No history of major dermatological disorders, chronic liver disease, renal disease, or thyroid dysfunction was reported. The patient maintained a stable appetite and sleep pattern, although the persistent itching and bowel irregularity caused considerable distress. There was no significant family history of similar complaints. Seeking symptomatic relief and overall improvement in health status, the patient opted for Ayurvedic management.

At the time of presentation, his blood pressure was recorded as 110/80 mmHg and general physical examination did not reveal any acute abnormalities. From an Ayurvedic perspective, the condition was assessed as a manifestation of Kapha-Pitta Dushti associated with Agnimandya (impaired digestive and metabolic function) and Ama accumulation, contributing to dysfunction of the Rasavaha and Raktavaha Srotas.

Clinical Findings

At the time of presentation, the patient complained of persistent itching predominantly over the abdominal region, which was recurrent in nature and associated with considerable discomfort. The itching was not accompanied by any obvious skin lesions, discharge, or signs of acute infection. The patient also reported intermittent constipation characterized by unsatisfactory bowel evacuation and irregular bowel habits. These symptoms had persisted for several months and negatively affected his daily activities and overall quality of life.

General physical examination revealed a conscious, cooperative, and well-oriented elderly male with stable vital parameters. No acute systemic abnormalities were detected during physical examination. Appetite and sleep were relatively preserved; however, the patient experienced discomfort due to persistent itching and bowel irregularity.

Laboratory investigations revealed poor glycemic control with an HbA1c level of 7.7%. Markers of systemic inflammation were elevated, including erythrocyte sedimentation rate (ESR) of 48 mm/hr and C-reactive protein (CRP) of 9.30 mg/L. Rheumatoid factor was also elevated (88 IU/mL). Hematological and biochemical investigations did not reveal any major acute pathological abnormalities that could directly explain the patient's symptoms.

Therapeutic Intervention

The patient was managed with a comprehensive Ayurvedic treatment regimen aimed at improving glycemic control, correcting digestive and metabolic dysfunction, reducing systemic inflammation, relieving constipation, and alleviating chronic pruritus. The

treatment protocol consisted of proprietary herbal formulations along with dietary and lifestyle

modifications. Therapy was initiated on 22 January 2026 and continued with periodic follow-up assessments.

Table 1: Details of Therapeutic Intervention

Formulation	Dose	Method of Administration
Gond Jamun	1 capsule twice daily	Administered orally after meals with lukewarm water
Fina Diabetic Capsule	1 capsule twice daily	Administered orally after meals with lukewarm water
L-Care Capsule	1 capsule twice daily	Administered orally after meals with lukewarm water
Bamboo Plus	1 capsule twice daily	Administered orally after meals with lukewarm water
D-Care Advance Capsule	1 capsule twice daily	Administered orally after meals with lukewarm water

Dietary and Lifestyle Advice

The patient was advised to:

- Follow a diabetic-friendly diet.
- Avoid excessive intake of refined sugars, fried foods, and processed foods.
- Consume adequate water throughout the day.
- Maintain regular meal timings.
- Increase intake of fresh vegetables and fiber-rich foods.
- Engage in regular light physical activity as tolerated.
- Ensure adequate sleep and stress management.

The treatment was continued with regular monitoring, and progressive improvement was observed in itching, bowel regularity, appetite, sleep quality, and overall well-being during follow-up.

Follow Up and Outcome

The patient was monitored through regular follow-up consultations over a period of approximately four months. Clinical assessment focused on the severity of itching, bowel habits, appetite, sleep quality, and overall well-being. Treatment compliance was satisfactory throughout the follow-up period, and no adverse drug reactions were reported.

At the end of the treatment period, significant clinical improvement was observed in the patient's presenting complaints. Chronic itching was markedly reduced, bowel movements became regular, and symptoms of constipation were effectively controlled. Improvement in appetite, sleep quality, and overall quality of life was also noted. The patient expressed satisfaction with the treatment outcome and reported enhanced daily functioning without any treatment-related adverse effects.

DISCUSSION

Type 2 Diabetes Mellitus (T2DM) is a chronic metabolic disorder frequently associated with dermatological manifestations such as pruritus and gastrointestinal disturbances including constipation.^[11] In Ayurveda, these symptoms can be understood as manifestations of Madhumeha, involving derangement of Kapha, Vata, Meda, and Mutravaha Srotas, along with impairment of Agni and accumulation of Ama.^[12] The present case demonstrated significant improvement in chronic itching, constipation, appetite, sleep, and overall well-being

following administration of a combination of herbal formulations including Gond Jamun, Fina Diabetol Forte, L-Care Capsule, D-Care Advance Capsule, and Bamboo Plus.

The beneficial effects observed may be attributed to the synergistic pharmacological actions of the constituent herbs. Gond Jamun contains *Eugenia jambolana* (Jamun), *Lagerstroemia speciosa* (Banaba), *Nigella sativa*, *Withania somnifera*, *Asphaltum* (Shilajit), and *Chlorophytum borivilianum*. Jamun is widely recognized for its antihyperglycemic activity through enhancement of insulin sensitivity and reduction of postprandial glucose levels.^[13-15] Banaba contains corosolic acid, which improves glucose uptake and utilization.^[16-18] Shilajit and Ashwagandha function as Rasayana drugs that improve metabolic efficiency and reduce oxidative stress,^[19-20] while *Nigella sativa* possesses anti-inflammatory and antioxidant properties.^[21] Together, these ingredients support glycemic regulation and reduce metabolic dysfunction commonly associated with diabetes.

Fina Diabetol Forte comprises *Momordica charantia* (Bitter gourd), *Trigonella foenum-graecum* (Fenugreek), *Cinnamomum zeylanicum* (Cinnamon), and *Aloe vera*. Bitter gourd contains charantin and polypeptide-p, which exhibit insulin-like activity and improve glucose metabolism.^[22-23] Fenugreek seeds are rich in soluble fiber and amino acids that enhance insulin secretion and delay carbohydrate absorption.^[24-25] Cinnamon has been shown to improve insulin receptor sensitivity and reduce fasting blood glucose levels.^[26-27] *Aloe vera* contributes anti-inflammatory and wound-healing effects while supporting gastrointestinal health.^[28] These actions may have contributed to improved metabolic control and reduction of diabetes-related symptoms.

The addition of D-Care Advance Capsule further strengthened antidiabetic management. The formulation contains *Momordica charantia*, *Gymnema sylvestre*, *Azadirachta indica*, *Swertia chirata*, *Eugenia jambolana*, *Trigonella foenum-graecum*, *Curcuma longa*, and *Picrorhiza kurroa*. *Gymnema* is known for its ability to reduce intestinal glucose absorption and enhance pancreatic β -cell function.^[29-30] *Neem*^[32] and *Chirata*^[33] possess hypoglycemic, anti-inflammatory, antimicrobial, and blood-purifying properties. Turmeric (*Curcuma longa*) provides potent antioxidant and anti-inflammatory

effects through curcumin,^[34-35] while Kutki (*Picrorhiza kurroa*) supports hepatic metabolism and detoxification.^[36-37] The combined action of these herbs may have contributed to improved glycemic regulation and reduction in inflammatory processes responsible for chronic itching.

Chronic pruritus in diabetic patients is frequently associated with xerosis, microvascular changes, neuropathy, and systemic inflammation. L-Care Capsule contains *Azadirachta indica* (Neem), *Smilax aristolochiifolia* (Ushba Maghrabi), *Swertia chirata*, and *Terminalia chebula* (Haritaki). Neem possesses well-established antipruritic, antimicrobial, and anti-inflammatory activities, making it particularly useful in diabetes-associated skin disorders.^[38-39] Smilax acts as a blood purifier and detoxifying agent,^[40] while Chirata exhibits anti-inflammatory and hepatoprotective effects.^[41] Haritaki is known for its mild laxative action and ability to improve digestive function.^[42]

These properties likely contributed to the gradual reduction in itching and improvement in bowel habits observed during follow-up.

Constipation is a common manifestation in elderly diabetic patients due to autonomic neuropathy, reduced gastrointestinal motility, and dietary factors. Haritaki in L-Care, along with the digestive and metabolic regulatory effects of other formulations, may have improved bowel regularity through enhancement of Agni and reduction of Ama.^[42] Improved digestion and metabolism may also have reduced the burden of systemic inflammation, thereby contributing to symptomatic relief.

Bamboo Plus, which contains bamboo-derived constituents rich in silica, antioxidants, amino acids, and micronutrients, may have provided additional nutritional and antioxidant support.^[43] Bamboo extracts have been reported to possess anti-inflammatory, immunomodulatory, and tissue-protective activities.^[44] In traditional systems of medicine, bamboo preparations are used as rejuvenative agents that support tissue nourishment and overall vitality. Such actions may have contributed to improvement in general health, sleep quality, and patient-reported well-being.

From an Ayurvedic perspective, the treatment regimen acted through Deepana (enhancing digestive fire), Pachana (digesting metabolic toxins), Rasayana (rejuvenation), Medohara (correction of metabolic dysfunction), and Rakta Prasadana (blood purification) effects. The combination addressed both the underlying pathology of Madhumeha and the associated manifestations of pruritus and constipation. Improvement in appetite, bowel function, sleep, and quality of life further indicates restoration of metabolic and physiological balance.

The favorable clinical response observed in this case suggests that a multi-herbal integrative approach targeting glycemic control, systemic inflammation, digestive dysfunction, and tissue nourishment may provide meaningful symptomatic relief in elderly diabetic patients presenting with chronic pruritus and constipation. However, larger clinical studies are required to validate these observations and establish the efficacy and safety of such formulations in broader patient populations.

Patient Perspective

After starting the prescribed treatment, I gradually noticed improvement in my symptoms. My bowel movements became more regular, and the intensity of itching reduced significantly over time. I also experienced better appetite, improved sleep, and increased comfort in performing daily activities. The treatment was easy to follow, and I did not experience any adverse effects during the course of therapy.

CONCLUSION

This case report demonstrates the potential benefit of a comprehensive herbal therapeutic approach in the management of chronic pruritus and constipation in an elderly patient with Type 2 Diabetes Mellitus.

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