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ACCURACY IN THE DIAGNOSIS OF DIABETES MELLITUS WITH SPEEDY REVERSAL THROUGH AYURVEDIC MANAGEMENT FOR PRAMEHA VYADHI: A CASE STUDY OF ASYMPTOMATIC DIABETIC PATIENT

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ABSTRACT:

Diabetes mellitus is one of the most leading causes of morbidity and mortality worldwide. It mostly affecting developed countries. It is a complicated disease in itself to treat and if not diagnosed and treated early then it can cause serious complications like diabetic neuropathy, retinopathy, gangrene etc. Diabetes can be correlate with *Prameha* in *ayurveda*. *Ayurveda* says that *prameha* involves *Dosha-dushya sangraha* i.e. it is a multifactor pathogenic disorder. In both modern science and *ayurveda* etiological factors mentioned are almost similar like obesity (*Stholya*), sedentary life style (*akriyayam jayate*), sweet and dairy products (*guda* and *dadhi*) etc. This article is presenting a case of male patient 39-year-old who had a history of chronic alcoholism, which is one of the causative factors of *prameha* according to *ayurveda*. He visited to Jeena Sikho Life Care Limited Clinic, Karol Bagh, New Delhi on 11/09/2024. He was having complaints of general body weakness and polyphagia. He underwent for HbA1c investigation. After diagnosis, *ayurvedic* management was started which included oral medicines, diet recommendations and healthy lifestyle changes. Accuracy in diagnosis helped to reverse the disease speedily within a month.

Key words: Diabetes mellitus, Prameha, Polyphagia, HbA1c, Ayurvedic management, Diet

INTORDUCTION:

Diabetes is a complex metabolic disorder. It is a most leading factor of death, not only in India but also in all over world especially in developed and developing countries due to their sedentary and unhealthy life style. Diabetes mellitus is a set of symptoms of impaired carbohydrate, fat and protein metabolism caused by either lack of insulin secretion or decreased sensitivity of the tissues to insulin. There are two general types of diabetes mellitus:

- **1. Type I diabetes,** also called insulin-dependent diabetes mellitus (IDDM) and is caused by lack of insulin secretion.
- **2. Type II diabetes**, also called non-insulin-dependent diabetes mellitus (NIDDM), is initially caused by decreased sensitivity of target tissues to the metabolic effect of insulin. This reduced sensitivity to insulin is often called insulin resistance.

In both types of diabetes mellitus, metabolism of all the main foodstuffs is altered. The basic effect of insulin lacks or insulin resistance on glucose metabolism is, to prevent the efficient uptake and utilization of glucose by most of the cells of the body, except those of the brain. As a result, blood glucose concentration increases, cell utilization of glucose falls to lower increasingly, and utilization of fats and proteins increases.^[1]

In *ayurveda* diabetes is mentioned as *Prameha vyadhi* in all *Ayurvedic Samhita's* (text books). *Nirukti* means literal meaning of *Prameha* is "*Pra + Miha Ksharane*". *Pra* denotes *prakarshen* that means frequently, *Miha* means via *Mutra* (through urine) and *Ksharane* means *dhatu ksharan* (emission of glucose).^[2] *Prabhuta mutrata*^[2] or *Avila Prabhuta mutrata*^[3] is the main symptom of *prameha* mentioned by *acharya's*. It means that excessive urination or excessive turbid urination is a key symptom for diagnosis of diabetes. *Acharya Sushruta* classified *Prameha* into 2 types.^[4] *Sushrut chikitsa sthan adhyaya* 11 *prameha chikitsa*

- 1. *Sahaj prameha* It is hereditary type.
- 2. *Apathya nimittaja prameha* It occurs due to unwholesome lifestyle. This second type again classified into 3 types and is *Vataja prameha*, *Pittaja prameha* and *Kaphaja prameha*.

This presenting article is of a male patient of 39 year old came to JEENA SIKHO LIFE CARE LIMITED CLINIC, KAROL BAGH, NEW DELHI on 11/09/2024. It was found that he came with asymptomatic phase of *Prameha* (Diabetes). Because he had only two chief complaints, general body weakness and increased hunger. Seeing to his alcoholic history he was advised to

investigate for HbA1c. His reports showed positive reading for diabetes. On the basis of *ayurvedic* examination and history he was diagnosed as *Madhumeha (Vataja prameha* type). His treatment was started with *ayurvedic* combinations, diet and healthy lifestyle changes. After one month of treatment, his increased HbA1c shifted to normal range. But still the treatment was continued for next one month to prevent diabetes from reoccurrence and to boost the immunity.

CASE REPORT:

This article is about a male patient of age 39 years visited to JEENA SIKHO LIFE CARE LIMITED CLINIC, KAROL BAGH, NEW DELHI on 11/09/2024. He had chief complaints as follows –

c/o

- o General body weakness since 2 years
- Lower backache
- Appetite increased

After knowing symptoms his history was taken and it was followed by general and *ayurvedic* examination to understand the root cause of above symptoms and to reach the diagnosis for further line of treatment.

- o **Medical history -** Not applicable
- o **Disease history –** Not applicable
- Surgical or procedure history Operated piles 2 year ago
 (Haemorrhoidectomy)
- o **Addiction history -** Chronic alcoholism
- o **Family history -** Not applicable

General examination on the 1st day is given in table number 1 and parameters of *Ashtavidh parikshan* on the 1st day are mentioned in table number 2 as follows.

Table no. 1 General examination

Parameters	Remark
Blood Pressure	140/90 mm of Hg
Pulse	90/min
Weight	76.65 kg

Table no. 2 Ashtavidh parikshan

Parameters	Remark
Nadi (Pulse)	Pitta Vataj
Mala (Stool)	Avikrita (clear)
Mutra (Urine)	Ishatpeeta (Normal)
Jivha (Tongue)	Saam (White coating)
Shabda (Pronounciation)	Spashta (clear)
Sparsh (Touch)	Anushna Sheeta
Drika (Eyes)	Prakrita
Aakriti (physique)	Madhyam (average)

Laboratory reports: As patient had symptom of polyphagia (increased appetite) and general body weakness, as well as he had history of chronic alcoholism, he was advised to investigate for HbA1c. He was investigated on the next day and reading is as given below:

Table no 3. Biochemistry report

Test description	12/09/2024 (Day 1)	Reference range
HbA1c	9.8 %	4.0 - 6.0 %
Estimated average glucose	235 mg/Dl	90 - 120 mg/dL

Diagnosis: Subsequent to above procedures of history, examination and investigation, on the basis of all parameters this case was diagnosed as *Madhumeha* (*Vataja Prameha*)

AYURVEDIC MANAGEMENT:

It does include, not only the medicines but also *Nidan parivarjan* (avoiding causative factors), *Pathya-apathya* and diet. In this case also patient was suggested to avoid alcohol. Thereafter *pathya-apathya* and diet plan was as like below:

Pathya-Apathya Aahar-Vihar:

He followed all the daily regimens advised to him, as mentioned in table no. 4.

Table no. 4 <u>Daily regimens</u>

Pathya (do's)	Apathya (don'ts)
Exercise regularly, do meditation	Don't follow Sedentary lifestyle
Wake up before 6.00 am and go to sleep up to 9.00 pm	Don't do day sleeping and late-night awakening
Follow hunger time properly	Don't do Overeating or fasting
Eat fruits and salad daily Always eat fresh and homemade food	Don't eat Bakery and dairy products, jaggery products, oily food, packaged and salty food
Food should include barley or other millet diet, green gram in pulses,	Don't consume alcohol and other soft drinks
lukewarm water to drink	Don't eat black gram, stale food

Diet:

Along with *ayurvedic* diet he was advised to have diet according to advanced method of diet plan i.e. **DIP diet (Disciplined and Intelligent Person's Diet).**^[5] This diet plan is clinically proven and showed a complete cure in the disorders which caused by unhealthy lifestyle. This diet provides, discipline to the patient's diet timing and it planned intelligently, with how much quantity should be advised of salad and fruit to be consume. Formula for quantity of fruits and salad which mentioned in DIP diet plan are according to patient's weight. They are helpful in diseases like diabetes, hypertension, thyroid, and liver diseases etc.

Formula of fruits: Patient s weight \times 10 = fruits in grams

Formula of salad: Patient s weight \times 5 = salad in grams

So he was told to take the calculated quantity of **fruits that was 766 grams** and quantity of **salad was 383 grams**. Plate 1 and plate 2 of food were advised as follows:



Plate no. 1: Fruits or Salad



Plate no. 2: Millet diet

Discipline to have this food:

Fruits to have - Till 12.00 pm

Salad to have – Just before lunch and dinner

Lunch - Between 1.00 to 2.00 pm

Dinner - In the evening before 7.30 pm

Prescribed *ayurvedic* **medicines:** Following formulations were prescribed to take with lukewarm water. 1st course of medicine was given for one month. In the 1st follow-up, he was again prescribed the same course of one month but one formulation was skipped in second month course. Both courses with direction of use are mentioned below in table no. 5 & 6.

Table no. 5

	Course 1: 11-09-2024 (1st Day)
Capsule Go Flexi	1 Capsule BD (<i>Pragbhakta kala</i> with <i>Koshna jala</i>)
DM Capsule	1 Capsule BD (<i>Adhobhakta kala</i> with <i>Koshna jala</i>)
Madhumeha nashak syrup	20 ml syrup BD (<i>Adhobhakta kala</i> with <i>saman matra</i> of <i>Koshna jala</i> i.e. equal amount of lukewarm water)

Table no. 6

	Course 2: 15-10-2024 (Follow up)
Capsule GO Flexi	1 Capsule BD (<i>Pragbhakta kala</i> with <i>Koshna jala</i>)
DM Capsule	1 Capsule BD (Adhobhakta kala with Koshna jala)

RESULT:

Result included accurate diagnosis of disease and outcome of treatment after the *ayurvedic* intervention. On the basis of sign and symptoms, examinations and hematological parameter it was diagnosed as *Madhumeha (Vataj prameha)*. *Ayurvedic* therapeutics was advised to treat the disease. After having oral formulations, strictly following *Pathya- apathya* and DIP diet there was remarkable reduction in HbA1c value just within a month. Besides this it was found that patient got relief in the symptoms mentioned in case report. His hunger got regulated to normal because of regulation in metabolism by *ayurvedic* herbs. General body weakness was also reduced and

he felt energetic after the treatment. His HbA1c reading reversed, to be within normal range but still, he was advised to continue the medicines for next one month, to prevent the disease from re-occurrence and to boost immunity.

Outcomes:

- **Early and accurate diagnosis of** *prameha* (Diabetes) in the absence of pre-symptomatic and symptomatic phase.
- **Relief** in polyphagia and increase in immunity thereby diminishing generalized weakness.
- Speedy reversal of HbA1c value is as given in table below-

Table.- Biochemistry report

Test description	12/09/2024 (Before treatment)	14/10/2024 (After treatment)
HbA1c	9.8 %	5.64 %
Estimated average glucose	235 mg/dL	115.17 mg/dL

DISCUSSION:

In the textbook of 'Essentials of Medical Physiology' it is mentioned that diabetes mellitus is a metabolic disorder characterized by high blood glucose level, associated with other manifestations. 'Diabetes' means 'polyuria' and 'mellitus' means 'honey'. The name 'diabetes mellitus' was coined by Thomas Willis, who discovered sweetness of urine from diabetics in 1675. [6] 90 percent diabetic cases are of type 2 diabetes mellitus. This article is also presenting a case of type 2 DM. In type II diabetes mellitus, the structure and function of β -cells and blood level of insulin are normal. But insulin receptors may be less, absent or abnormal, resulting in insulin resistance. Common causes of insulin resistance are: [6]

- 1. Genetic disorders (significant factors causing type II diabetes mellitus)
- 2. Lifestyle changes such as bad eating habits and physical inactivity, leading to obesity
- 3. Stress.

Acharya Vagbhata in Nidansthan mentioned the etiological factors of Prameha. He stated that, 'food and drinks along with such activities which increases **Meda** (Fat), **Mutra** (Urine) and

Kapha are mainly responsible for the pathogenesis of *prameha*.' He noted other factors also which causes *prameha* as given in *shlok* no.1.^[7]

श्लोक १:

"प्रमेहा विंशति: तत्र......तेषां मेदो मूत्रकफावहम्॥१॥

अन्नपानक्रियाजातं यत् प्रायः तत् प्रवर्तकम्।

स्वादुअम्ललवणः स्निग्धगुरुपिच्छिलशीतलम्॥२॥

नवधान्यः सुराः अनूप मांसेक्षुगुडगोरसम्।"

अष्टांग हृदय निदानस्थान १०/०१

This article is about the case of a male patient aging 39 years old who had come with asymptomatic *Prameha vyadhi* to **Jeena Sikho Life Care Limited Clinic, Karol Bagh, New Delhi on 11/09/2024.** Asymptomatic phase of this case was diagnosed according to *ayurveda*. Because *ayurveda* mentioned the following pre-symptomatic phase (*Purvaroopa's*) of *prameha* given in *shloka* no. 2

श्लोक २:

"स्वेदोअंगगन्धाः शिथिलांगता च शय्यासन स्वप्नसुखे रतिः च। हृत्नेत्रजिव्हाश्रवण उपदेहो घनांगता केशनखातिव्रुधिः॥१३॥ शीतप्रियत्वं गलतालुशोषो माधुर्यमास्ये करपाददाहः। भविष्यतो मेहगदस्य रुपं मुत्रे अभिधावन्ति पिपीलिकाः च॥१४॥

चरक संहिता चिकित्सास्थान - ६

Nidan panchak (5 factors from etiological factors to diagnosis):

It includes *Hetu* (etiological factors), *Purvaroopa* (pre-symptomatic condition), *Roopa* (sign and symptoms), *Upshay* (factors which causes rise in symptoms or relief in symptoms) and *Samprapti* (pathogenic process and diagnosis).^[8]

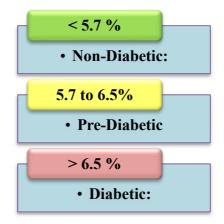
1. *Hetu* – All *ayurvedic* texts explained near most same causative factors of *prameha*, as already mentioned above in *shloka* no. 1. In this case patient had history of chronic alcoholism. *Acharya Vagbhata* in *Nidansthan* mentioned that *sura* is one of the

causative factor of *Prameha* (*Shlok* no. 1) *Sura* is a synonym of *Madya* i.e alcohol. Also *Acharya Sushruta* and *Charaka* mentioned that '*drava annapanani*' means liquid diet and drinks are among the cause of *prameha*. So the main causative factor in this patient was chronic alcoholism.

- **2.** *Purvaroopa Acharya Charaka* has given details of pre-symptomatic phase of *prameha*, in *prameha chikitsa adhyaya* like *kara-pada daha* (burning sensation to limbs), *kesha-nakhativruddhi* (increased growth of hair and nails) etc. But this patient never been suffered with *purvaroopsa's* (Pre-symptomatic phase).
- 3. Roopa This patient had come with asymptomatic *Prameha vyadhi*. He had not complained of '*Prabhuta mutrata* (excess or frequent urination). *Prabhuta mutrata* is a main symptom of *prameha* said by *Acharya Charaka* with others as well. But he had complaint of Polyphagia and general body weakness. Polyphagia is a feeling of extreme hunger. It is a common sign of diabetes according to modern science. Although it can have other medical causes like hyperthyroidism and atypical depression. Also, in diabetes, cells cannot use blood glucose for their functions and it causes general body weakness. But general body weakness is also a sign of various conditions like dehydration, digestive disorders, anxiety etc. So to catch the diagnosis he was advised to investigate for HbA1c.

HbA1c is an average blood glucose levels for the last 2 to 3 months and is reported as a percent, while estimated average glucose (eAG) is a calculated value based on HbA1c of patient. eAG is reported in the same units as blood glucose monitor at home, such as mg/dL. For the diagnosis of diabetes an ideal level of HbA1c is 48 mmol/mol.^[10,11] In the investigation it was found that his **HbA1c level is 9.8** % and **estimated average glucose level is 235 mg/dL.** This value comes under diabetic range as mentioned in below chart.

Chart of Reference range for HbA1c



- **4.** *Upshay* Patient did not observed any factor by which his symptoms would get relived or any triggering factors.
- **5.** *Samprapti Samprapti* is the process that how the disease progresses from *hetu sevan* (Etiological factors) till diagnosis. These *hetu's* vititates *dosha* and *dushya*. These vitiated pathogenic factors then lead to disease and affect some specific organ. *Samprapti* of this patient is given below in a **flow chart no. 1.**

Flow chart no. 1 Samprapti of prameha[12]

Madyapana (chronic alcoholism)

↓

Tridosha prakopa
↓

Bastigat kapha affects meda, mansa and shariraja kleda
↓

Madhumeha (Vataja prameha)

Dosh-Dushya Sangraha (group of pathogenic factors) of prameha

Dosha involved: Tridosha

Dhatu involved: Rasa, Rakta, Mansa, Meda, Majja, Shukra and Oja

Other factors: Ambu, Vasa, Lasika, Kleda

According to modern science there is no detailed explanation of causative factors. They called diabetes as a metabolic complex disorder. So the factors affecting the metabolism and thereby elevating the blood glucose level are supposed as causative factors. For example, Obesity, stress, Hypertension etc. Pathogenic process of type 2 DM is as follows in flow chart:

Flow chart no. 2 pathogenic process of type 2 DM^[13]

Constitutional factors like obesity, low physical activity, stress etc.

Insulin resistance due to receptor and post-receptor defects

Impaired glucose utilization

Increase hepatic glucose synthesis

Hyperglycemia

Type 2 diabetes

Sadhya-asadhyatva (Prognosis of this case):

Through the perspective of *ayurveda*, *Kaphaja prameha* is *Sadhya* (good prognosis), *Pittaj prameha* is *Yapya* (hard to cure but possible) and *Vataja prameha* is *Asadhya* (not curable). In the detail it is said that *Kaphaja* and *Pittaja prameha* with all *purvaroopa's* (pre-symptomatic phase) and *Vataja prameha* which shows all and exact sequential circumstances of *hetu* etc. *nidanpanchak* are *asadhya* that means incurable.

In this case the patient was diagnosed as *madhumeha* which is a sub-type of *Vataja prameha*. And *vataja prameha* is mentioned above as *asadhya*. But this case not had all the sequence of *samprapti*. Pre-symptomatic and symptomatic phase were absent in this case. So it was considered as good prognosis for the case and then treatment was started.

Ayurvedic management:

Management of *Prameha* is based on the type of *prameha* and also the type of *pramehi* i.e. patient *Acharya Charaka* classified *Prameha rugna* in 2 types for the ease of treatment.

- 1. *Sthool pramehi* with *Balwan dosha* (Obese and more pathogenic factors involved) and
- 2. *Krish pramehi* with *Durbal dosha* (non-obese and less pathogenic factors involved).

In *sthool pramehi* 1st *Sanshodhan chikitsa* (detoxification by *Panchakarma*) is advised and in *krish pramehi Sanshaman* (Oral medicines/ palliative drugs) should be advised. This patient is not *krisha* but his disease involved less pathogenic factors. Along with this he already had complaint of general body weakness. Then he had *vataj prameha* in which along with *kapha dosha, vata dosha* is also elevated. In this condition *shodhan chikitsa* by *panchakarma* procedure is contraindicated as it again elevates *Vata dosha*. So to pacify vitiated *kaphadi dosha dushya*, oral medicines, diet and daily regimens were advised to the patient.

1. Nidan parivarjan: Initiative step towards the prameha chikitsa should be with nidan parivarjan, because Charakacharya said that "हेतो: असेवा। जातस्य रोगस्य भवेत् चिकित्सा॥" The causative factors which are responsible to cause prameha should be avoided. So he was told to avoid alcohol consumption, as his causative factor and other factors also told to avoid as mentioned in pathya-apatthya.

- **2. Importance of** *Vyayama* **(exercise) in** *prameha*: *Charakacharya* stated that, *Nitya vyayama* is helpful to prevent and to cure *prameha*. So patient was advised to do exercise regularly.
- 3. **Diet:** He was advised to take *laghu aahara* means which is light to digest. For this he was told to take food made up of millets especially *Yava* (barley). Because *yava* (barley) is suggested for *prameha rugna* by *Charakacharya*. Also told to have soup green gram i.e. *mudga*. This diet is advised to take in a particular manner for better result. It is a **DIP diet plan** (Discipline and Intelligent). This diet plan helped patient for having food with discipline. Intelligently planned fruit and salad quantity as given in material and method also helped a lot to energize the patient. Hence this DIP diet was suggested to regularize the metabolism and thereby preventing blood sugar level to increase.

4. Medicines prescribed:

Combinations of herbs which are helpful in diabetes were given. These formulations play a key role in *prameha* by various functions. Functions like *Pachana* (digestion and metabolism), *Pramehaghna* (anti-diabetic), *Rasayana* (Immunity booster) etc. Majority of herbs are having *Katu*, *tikta*, *kashay rasa*, *Ushna veerya* and *Katu vipaka* which helps to absorbs (*Shoshan*) *dosha dushya* in *prameha*.

Prescribed formulations with their ingredient herbs & metals along with indications are given as follows.

Capsule GO Flexi

Ingredients: Paneer dodi, Ashwagandha (Withania somnifera), Aamalki rasayan (Tonic made up of Embelica officinalis), Yograja guggulu powder (Ayurvedic formulation mainly contains Commiphora mukul), Methika (Trigonella foenum graecum), Shankha bhasma, Gokshur (Tribulus terrestris), Punarnava (Boerhaavia diffusa), Nirgundi (Vitex nigundo), Haridra (Curcuma longa), Nimba (Azadirachta indica)

Indications: Analgesic, anti-inflammatory, immunity booster and pain killer

Capsule DM

Ingredients: Aamragandhi Haridra (Curcuma amada), Guduchi (Tinospora cordifolia),
Methika (Trigonella foenum), Shweta musli (Chlorophytum borivilianum), Nimba
(Azadirachta indica), Karvellak (Momordica charantia), Jambu (Syzygium cumini),

Bilva patra (Aegle marmelos leaves), Gudmar (Gymnema sylvestre), Sheelajit (Asphaltum)

Indications: All types of diabetes and all diabetic complications.

Madhumehanashak syrup:

Ingredients: Karvellak (Momordica charantia), Jambu, Nimba (Azadirachta indica), Kirattikta (Swertia chirayta), Gudmar (Gymnema sylvestri), Kutaj (Holarrhena antidysenterica)

Indications: Diabetes mellitus, Diabetes neuropathy, Retinopathy, Hyperglycemia

Some ayurvedic herbs listed below are well known for their key role in diabetes which included in the above formulations:

Herbs	Action
Guduchi (Tinospora cordifolia)	Mehanut (Anti-diabetic) [14]
Gudmar (Gymnema sylvestri)	Mehanut (Anti-diabetic) [15]
Amalaki (Emblica officinalis),	Meheshu Dhatri Nisha ^[16]
Haridra (Curcuma longa)	
Nimb (Azadirachta indica)	Mehaghna (Anti-diabetic) [17]
Kutaj (Holarrhena anti-dysenterica)	
Kirattikta (swertia chirayta)	
Karvellak (Momordica charantia)	Contains Charantin as hypoglycemic chemical compound [18]

FURTHER SCOPE OF STUDY:

This is a single case which gave us fruitful result. But more study is needed with more number of samples that means patients of same criteria or patients with increased HbA1c. It is important to know the average time needed in reversing the HbA1c value and thereby treating the diabetes in large sample through *ayurveda* intervention. This data will help the people to cure and prevent diabetes as early as possible.

CONCLUSION:

This presenting article is about to conclude that though the patient does not show the main symptom of diabetes that is excessive urination despite that he could have chances of diabetes. So one should examine carefully and find out proper *nidana panchak* to diagnose the disease accurately. This patient had no symptom of excessive or frequent urination. But he had complained of polyphagia which may be in various conditions like diabetes, hyperglycemia, thyroidism etc. To know the accurate diagnosis his HbA1c was tested and it found in increased range than normal. *Ayurvedic* management included oral medicines along with DIP diet and *ayurvedic patthya pathya's*. In oral formulations herbs like *triphala, trikatu, arjun, haridra, shunthi* were added which have properties like *pramehaghna* (anti-diabetic), *rasayana* (immunity booster), *pachan* (which regulates metabolism) etc. Within a month he had positive reports that blood parameter came within normal range. This study gives an outcome that early and accurate diagnosis of diabetes with proper ayurvedic therapeutics can help to cure and reverse the diabetic condition speedily to normal.

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REPORTS OF HbA1c:

Report 1: Before treatment

Report 2: After treatment

Report 1: Before treatment



Report 2: After treatment



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Name

RATORY

Patient ID

: 241014005

Age/Gender Referred By

: 42 Years/Male : R.N. DIAGNOSTIC LABO-

Report ID Report Date : RE4672

: 14/10/2024 05:00 PM



BIOCHEMISTRY HBA1C / GLYCOSYLATED

TEST DESCRIPTION	RESULT	FLAG	REF. RANGE	UNIT
HbA1C	5.64		4.0 - 6.0	%
Estimated Average Glucose	115.17		90 - 120	mg/dL

Interpretation:

HbA1C %	Result
>8%	Action Suggested
7-8%	Good Control
<7%	Goal
6-7%	Near Normal Glycemia
<6%	Normal level

~~End of report~~



DR. VIVEK KAPOOR MD PATHOLOGY





