AyurTech: Digital Solutions for Diabetes Reversal - A Case Study

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ABSTRACT

- 5 This case study presents the successful remission of Type 2 Diabetes Mellitus
- 6 (T2DM) and hypertension in a 38-year-old male. Here we are using a hybrid
- 7 model that integrates classical Ayurvedic therapies with digital lifestyle
- 8 interventions. The patient followed a structured 6-month protocol involving
- 9 personalized diet, herbal support, physical activity, mind-body practices, and a
- 5-day medication-free residential Ayurvedic camp. By July 2025, clinical
- 11 remission was achieved: HbA1c reduced to 5.5%, weight loss of 7.95 kg,
- cessation of all medications, and a post-program glucose tolerance test (GTT)
- confirmed normal glucose metabolism. This case illustrates the potential of
- combining Ayurveda with digital therapeutics to deliver predictive, preventive,
- and personalized care. Key to success was low-cost, patient-centred counselling
- strategies rooted in self-awareness and behavioural change.

17 **KEYWORDS:**

- 18 Type 2 Diabetes, Ayurveda, Digital Health, Lifestyle Medicine, Diabetes
- 19 Remission, GTT, Integrative Protocol

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1. INTRODUCTION

- T2DM is widely perceived as a chronic, progressive disease. However,
- mounting evidence supports the potential for sustained remission through
- intensive lifestyle modification. ¹, ² Ayurveda, India's ancient system of
- 25 medicine emphasizes holistic and individualized approaches- offering promising
- pathways for reversing chronic metabolic conditions. This report presents a
- 27 digitally supported, integrative care model that led to confirmed T2DM and
- 28 hypertension remission in a middle-aged male, highlighting the synergy
- between traditional Ayurvedic wisdom and modern digital tools.

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2. Case Presentation

32 Patient Details

• **Age/Sex:** 38-year-old male

- Medical History: Diagnosed with T2DM (2016), hypertension, mild 34 hyperlipidaemia 35 **Allopathic Medication (January 2025):** 36 Tab. Vildagliptin/Metformin 50/1000 mg – After lunch 37 Tab. Glycomet Trio Forte – Before breakfast 38 Tab. Telmisartan 40 mg – After breakfast 39 Tab. Ecosprin AV 75/20 mg – After dinner 40 **Baseline Clinical Parameters (January 2025):** 41 HbA1c: 6.7% 42 Fasting Glucose: 114–127 mg/dL 43 Postprandial Glucose: 160–170 mg/dL 44 Weight: 70 kg 45 Blood Pressure: 130/85 mmHg (on Rx) 46 Pulse: 78–82 bpm 47 48 3. MATERIAL AND METHODS: simple Random case study 49 **Intervention Protocol (Jan – July 2025)** 50 Phase 1: Digital Lifestyle Care (Months 1–3) 51 **Diet:** Low-glycaemic index, dairy-free, sugar-free whole food plan 52 **Herbal Support:** Daily Gandharva Haritaki (first month), amla, 53 turmeric, and cinnamon infusions 54 **Exercise:** Walking, jogging, recreational sports, lymphatic movement 55 Mind-Body Practices: Pranayama, emotional journaling, digital 56 coaching, stress-release protocols 57
 - Phase 2: Detoxification and Intermittent Fasting (Months 4–5)

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• **Ayurvedic Cleansing:** Classical *Kala Basti* (14 days regular + 14 days intermittent) -(Charak Samhita)

Medication Management: Gradual tapering guided by real-time glucose

- **Fasting:** Weekly intermittent fasting; seasonal detox foods
 - Monitoring: Medication stopped by late April; vitals tracked digitally

Phase 3: Residential Ayurvedic Camp (Month 6)

- **Duration:** 5-day immersive program
- **Therapies:** *Panchakarma* -inspired cleansing, yoga *Nidra*, therapeutic massage
- **Education:** Lifestyle counselling, stress mastery, community healing practices
 - Clinical Oversight: Daily glucose, BP, and vital monitoring

73 **4. RESULTS**

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4.1 Interim Assessment – 13 May 2025

Table 1 showing Interim Assessment

Parameter	Value
Fasting Glucose (mg/dL)	113
Postprandial Glucose	136
HbA1c (%)	5.7
Avg Glucose (mg/dL)	117
Weight (kg)	62.7
BP (mmHg)	114/66
Medications	0

76 Interpretation: Markers consistent with diabetes remission off medication.

4.2 Pre- and Post-Intervention Comparison

Table 2: showing Pre- and Post-Intervention Comparison

Parameter	Jan 2025	July 2025
HbA1c (%)	6.7	5.5

Estimated Avg Glucose (mg/dL)	~145	111
Fasting Glucose (mg/dL)	114–127	93
Postprandial Glucose (mg/dL)	160–170	109
Weight (kg)	70	62.05
BP (mmHg)	130/85	135/78
Pulse (bpm)	78–82	59
Allopathic Medications	4	0

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4.3 Oral Glucose Tolerance Test (GTT) – 31 July 2025

Table 3 : showing Oral Glucose Tolerance Test (GTT)

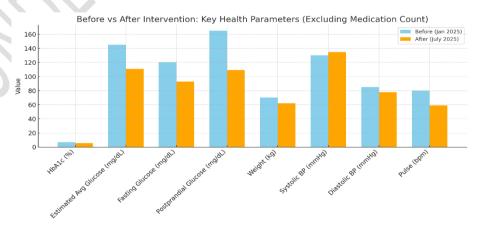
Time Post-Glucose (75g)	Glucose (mg/dL)
Fasting	102
2 Hours	76
2.5 Hours	114
3 Hours	93

83 Interpretation: Normal glucose response confirming biochemical remission.

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4.4 Statistical Chart



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Figure 1: showing Before and after intervention: key health parameter

5. DISCUSSION

- This case exemplifies a safe, low-cost, and scalable model for the remission of 90
- T2DM and hypertension using integrative methods. The reversal was clinically 91
- validated using HbA1c, self-monitored glucose trends, and a GTT—consistent 92
- with ADA/EASD remission definitions. 3,4 93
- 94 The intervention was anchored in Ayurvedic fundamentals:
- Agni Deepana (metabolic restoration) 95
- Ama Pachana (toxin removal) 96
- **Dosha Samya** (bioenergetic harmony) 97
- These were enhanced via digital adherence tools and real-time patient feedback. 98
- Crucially, the emotional and cognitive components- through journaling, stress 99
- relief practices, and group support-enabled deep behaviour transformation. This 100
- aligns with recent literature calling for lifestyle-first paradigms in chronic 101
- disease care. 5,6,7 102

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6. CONCLUSION

- This case highlights the potential for long-term T2DM remission using a cost-105
- effective, integrative model based on Ayurveda and digital therapeutics. The 106
- approach is replicable and relevant for low-resource settings, warranting larger 107
- trials and public health attention. 108

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