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ARTICLE

Complementary and alternative medicine for glycaemic control of diabetes mellitus: A systematic review

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Erni Setyowati, Mochammad Bagus Qomaruddin, Sony Wibisono, Titik Juwalah, Anggi Setyowati, Ning Atri Wulandari, Yenni Kartika Sari and Levi Tini Sari

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supplement for type 2 DM patients and had effect to decrease fasting blood sugar. Chocory was consumed 10 g daily for 2 months.¹⁹

Nigella arvensis and 1350 mg/day, for 3 months in newly diagnosed with type 2 DM patients had effect to decrease fasting blood sugar, 2 h post prandial, and A1C compared to metformin.²¹ Mulberry leaves (1000 mg) was given three times a day with meals, for 3 months had effect to decrease post prandial blood sugar levels compared to placebo in type 2 DM patients.²⁴ Chamomile tea has an effect as a glycaemic control (2 g/130 ml with hot water) among type 2 DM patients, three times a day after meals for 8 weeks compared to a control group.²⁹

Bell pepper juice with the integrated approach of yoga therapy (IAYT) for four consecutive days had effect to reduce post prandial blood sugar levels compared to the control group who only received the integrated approach of yoga therapy (IAYT) in type 2 DM patients.³⁰

Mind body practices

Mind body practices in this study were auditory guided imagery (AGI), qigong and tai chi exercises, and relaxation. The study showed that auditory guided imagery (AGI) accompanied by music for 5 days with a duration of 7 min, two times a day, had effect to reduce blood sugar in children with type 1 DM (T1DM).³¹ Another study was qigong and tai chi exercise for 12 weeks. This study divided groups into three groups; qigong, tai chi exercise, and placebo. The results of the study showed that qigong had better effect on reducing fasting blood sugar in type 2 DM (T2DM) patients.³² Another study showed that relaxation had effect to reduce fasting blood sugar in type 1 DM (T1DM) patients compared to the placebo group. The intervention was carried out for 8 weeks (Table 3).³³

Table 3. Systematic review of mind-body practices for diabetes mellitus published since January 2015 until September 2021.

Author	Country	Intervention evaluated	Condition to assess	Number of studies	Study design	Conclusion	Mention of adverse effects
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