

Camel Milk an Alternative Therapeutic for Diabetes



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COLUMN ARTICLE

More than 300 million people in the world have diabetes which is expected to reach to 500 million in next decade. Insulin is an anabolic hormone, protein in nature having 51 amino acids arranged in α and β chains and is produced by pancreas and functions metabolically for carbohydrates, proteins and lipids in human body [1]. Type1 diabetes (TD1M) previously known as juvenile diabetes is immune mediated diabetes present in 5 - 10% of cases. It is insulin dependent and caused by immune destruction of β -cells of islets of Langerhans, which is indicated by autoantibodies to insulin, autoantibodies to GAD, autoantibodies to tyrosine phosphatases IA-2 and IA-2 β [2]. Type 2 diabetes (T2DM) present in 90-95% of cases is adult-onset diabetes and is caused due to either insulin deficiency or insulin resistance in individuals. It is also referred as non-insulin dependent diabetes [2]. T2DM is caused either by impaired glucose tolerance or insulin resistance, initiated by insulin receptors and other related cells [3]. Tumor necrosis factor- α (TNF- α), abundantly found in adipose tissues, causes insulin

resistance in type 2 diabetes by blocking synthesis of many adipocyte specific proteins which metabolize body energy and cause insulin sensitivity [4]. The risk of cardiovascular complications is twice in hyperglycemic patients in addition to nephropathies and retinopathies.

At present, several anti-diabetic drugs are used but they are doing more harm than cure and causing serious health issues. Such therapeutics are not cost effective rather hard to use for patients living below the poverty line [5]. It is dire need to find economical but effective alternate treatments. Camel is one of the animals mentioned in Quran and Hadith, the Holy Scripts of Muslims. The camel milk is acknowledged with statement "The food for hungry and treatment for the sick". Camel is mostly found in Asia and Africa serving as good source of food and transportation. The interest about camel production and its products are growing in the world as studies about them are advancing [6]. Literature shows antiradical, anti-diabetic, anti-inflammatory, anti-allergic, anti-autism and hepato protective activities of camel milk [7]. Camel milk is rich in manganese, selenium and iron hence may be used in cases

where minor deficiencies of these elements are used. Camel milk has 7-20 times more manganese and 4-10 times more iron in comparison to human and cow milk [8]. Experiments on type 1 diabetic humans show significant reduction in parenteral insulin requirement when they are subjected to camel milk consumption along with management (diet and exercise) [9,10]. Another research shows a significant improvement in fasting blood glucose level and reduction in insulin dosage in patients of type 1 diabetes, having camel milk [9,11].

Insulin attached to glycoprotein receptor present at cell surface and starts its action. α -subunit of this receptor molecule binds the hormone (insulin) and β -subunit, tyrosine specific protein kinase, produces signals which stimulate insulin's action on metabolism of glucose, lipid and proteins [12]. Pancreatic β -cells have more affinity towards insulin like growth factor-1 than that of insulin, resulting in reduced action of insulin [13]. Glucose modulates growth and survival of pancreatic beta cells which is achieved by electrifying certain proteins in insulin signaling pathway. Insulin stimulates insulin receptor (β IRKO) and insulin receptor substrate 2 (β IRS2KO), they activate phosphatidylinositol-3-kinase and Akt-kinase that glucose fails to do alone [14]. In T2DM the function of glucagon like peptide-1 (GLP-1) an incretin hormone, secreted from enteroendocrine L cells in lower intestine [15] and metabolized by dipeptide peptidase-IV enzyme (DPP-IV), is conserved and treatment involves its activation [16]. Due to insulinotropic nature of GLP-1, it suppresses glucagon and stimulate insulin synthesis along with other actions [17]. GLP-1 when given exogenously shows effects on insulin secretion and makes β -cells sensitive to glucose and helps in treating DM [18,19]. An experiment on diabetic rats' shows enhanced glucose stimulated insulin secretion, regulate secretion and effect of incretin and anti-inflammatory effect when given camel milk [20].

In summary, the mechanisms involved in treatment of diabetes by camel milk insulin included its a) direct effect on functioning of insulin receptor, and glucose transport in insulin sensitive tissue, b) direct or indirect effects on in-

ulin secretion by pancreatic beta cells, c) effects on survival and, growth, and overall activity of pancreatic cells. Camel milk directly activates GIP/GLP-1 or indirectly by inhibiting DPP-IV that in turn increases GIP/GLP-1 which acts on GIP/GLP-1 receptor to inhibit glucagon and to increase insulin secretions. The anti-apoptotic activity, antioxidant activity, and anti-inflammatory activity of camel milk save both α and β cells of pancreases. The inhibition of glucagon receptor by camel milk also helps in diabetes treatment. The activation of GLUT4 makes utilization of glucose (lactoferrin is supposed to do this). Moreover, camel milk directly activates insulin receptors.

Camel milk proved to be effective in reversing pathological changes of kidney and liver occurred due to diabetes [21]. Due to presence of monosaturated and poly-saturated fatty acids, immunoglobulin's, lactoferrin, serum albumin, vitamin C and E, lysozymes and insulin hormone camel milk is used to control diabetes and blood cholesterol level [22]. Due to all these constituents it is considered as immune stimulator [23]. Peptides in camel milk provide insulin secretion and stimulate activity of insulin receptors and make it an anti-diabetic agent [24]. Insulin content is much higher in camel milk (58.67 ± 2.01 U/L) than cow (17.01 ± 0.96 U/L) and buffalo milk (16.21 ± 0.95 U/L) [21]. Several experiments and documentations also suggests that camel milk does not react with the gastric acid and pass as such to intestines [25]. Camel milk have protected insulin, enclosed by micelles, which by pass the stomach acid and gastric digestion and degradation, absorbed from intestines to blood stream and provides antidiabetic effect [26]. Diabetes mellitus is a metabolic disease and antioxidants present in camel milk helps to combat metabolic symptoms and complications associated with this like nephropathy, retinopathy and cardiovascular disorders [27]. Fermented camel milk showed hypoglycemic and anti-inflammatory effect when experimented on human adolescent host [28]. In a study, 92% of diabetic patients showed decreased requirement of parenteral insulin administration up to 30% , when given 0.5 liter camel milk daily along with the regular care (diet and exercise) [9]. Further studies are required to explore its therapeutic efficacy and its marketing [29-34].

BIBLIOGRAPHY

1. Jimenez JL, *et al.* "The protofilament structure of insulin amyloid fibrils". *Proceedings of the National Academy of Sciences* 99.14 (2002): 9196-9201.
2. Association AD. "Diagnosis and classification of diabetes mellitus". *Diabetes Care* 33.1 (2010): S62-S69.
3. Saltiel AR and Kahn CR. "Insulin signalling and the regulation of glucose and lipid metabolism". *Nature* 414.6865 (2001): 799-806.
4. Ruan H and Lodish HF. "Insulin resistance in adipose tissue: direct and indirect effects of tumor necrosis factor- α ". *Cytokine and Growth Factor Reviews* 14.5 (2003): 447-455.
5. Rathmann W, *et al.* "Trends in outpatient prescription drug costs in diabetic patients in Germany, 1994–2004". *Diabetes Care* 30.4 (2007): 848-853.
6. Berhe T, *et al.* "Processing challenges and opportunities of camel dairy products". *International Journal of Food Science* (2017).
7. Izadi A, *et al.* "Nutritional and therapeutic perspectives of camel milk and its protein hydrolysates: A review on versatile biofunctional properties". *Journal of Functional Foods* 60 (2019): 103441.
8. Al-Awadi FM and Srikumar T. "Trace elements and their distribution in protein fractions of camel milk in comparison to other commonly consumed milks". *Journal of Dairy Research* 68.3 (2001): 463-469.
9. Agarwal R, *et al.* "Effect of camel milk on glycemic control, risk factors and diabetes quality of life in type-1 diabetes: A randomized prospective controlled study". *Journal of Camel Practice and Research* 10.1 (2003): 45-50.
10. Sharma C and Singh C. "Therapeutic value of camel milk—a review". *Advanced Journal of Pharmacies and Life Science Research* 2.3 (2014): 7-13.
11. Agrawal R, *et al.* "Effect of raw camel milk in type 1 diabetic patients: 1year randomised study". *Journal of Camel Practice and Research* 12.1 (2005): 27.
12. Kahn C. "The molecular mechanism of insulin action". *Annual review of medicine* 36.1 (1985): 429-451.
13. Van Schravendijk C, *et al.* "Direct effect of insulin and insulin-like growth factor-I on the secretory activity of rat pancreatic beta cells". *Diabetologia* 33.11 (1990): 649-653.
14. Assmann A, *et al.* "Glucose effects on beta-cell growth and survival require activation of insulin receptors and insulin receptor substrate 2". *Molecular and Cellular Biology* 29.11 (2009): 3219-3228.
15. Lee YS and Jun HS. "Anti-diabetic actions of glucagon-like peptide-1 on pancreatic beta-cells". *Metabolism* 63.1 (2014): 9-19.
16. Nauck MA and Meier JJ. "Glucagon-like peptide 1 and its derivatives in the treatment of diabetes". *Regulatory Peptides* 128.2 (2005): 135-148.
17. Gautier JF, *et al.* "Physiology of incretins (GIP and GLP-1) and abnormalities in type 2 diabetes". *Diabetes and Metabolism* 34 (2008): S65-S72.
18. Holst JJ Gromada J. "Role of incretin hormones in the regulation of insulin secretion in diabetic and nondiabetic humans". *American Journal of Physiology-Endocrinology and Metabolism* 287.2 (2004): E199-E206.
19. Theodorakis MJ, *et al.* "Human duodenal enteroendocrine cells: source of both incretin peptides, GLP-1 and GIP". *American Journal of Physiology-Endocrinology and Metabolism* 290.3 (2006): E550-E559.
20. Korish A. "The antidiabetic action of camel milk in experimental type 2 diabetes mellitus: an overview on the changes in incretin hormones, insulin resistance, and inflammatory cytokines". *Hormone and Metabolic Research* 46.06 (2014): 404-411.
21. Hamad E, *et al.* "Beneficial effect of camel milk on liver and kidneys function in diabetic Sprague-Dawley rats". *International Journal of Dairy Science* 6.3 (2011): 190-197.
22. Kaskous S. "Importance of camel milk for human health". *Emirates Journal of Food and Agriculture* (2016): 158-163.

23. Dubey US, *et al.* "Therapeutic potential of camel milk". *Emirates Journal of Food and Agriculture* (2016): 164-176.
24. Akli AM, *et al.* "The molecular basis of the anti-diabetic properties of camel milk". *Diabetes Research and Clinical Practice* 406 (2018): 305-312.
25. Abu-Lehia IH. "Physical and chemical characteristics of camel milkfat and its fractions". *Food chemistry* 34.4 (1989): 261-271.
26. Zagorski O, *et al.* "Insulin in milk-a comparative study". *International Journal of Animal Sciences* 13 (1998): 241-244.
27. Gader AGMA and Alhaider AA. "The unique medicinal properties of camel products: A review of the scientific evidence". *Journal of Taibah University Medical Sciences* 11.2 (2016): 98-103.
28. Fallah Z, *et al.* "Effect of fermented camel milk on glucose metabolism, insulin resistance, and inflammatory biomarkers of adolescents with metabolic syndrome: A double-blind, randomized, crossover trial". *Journal of Research in Medical Sciences* (2018): 23.
29. Alavi F, *et al.* "Nutraceutical properties of camel milk Nutrients in Dairy and their Implications on Health and Disease". In book: *Nutrients in Dairy and their Implications on Health and Disease* (2017): 451-468.
30. Arab HH, *et al.* "Camel's milk ameliorates TNBS-induced colitis in rats via downregulation of inflammatory cytokines and oxidative stress". *Food and Chemical Toxicology* 69 (2014): 294-302.
31. Collaboration ERF. "Diabetes mellitus, fasting blood glucose concentration, and risk of vascular disease: a collaborative meta-analysis of 102 prospective studies". *The Lancet* 375.9733 (2010): 2215-2222.
32. Kaskous S and Pfaffl MW. "Bioactive Properties of Minor Camel Milk Ingredients-An Overview". *Journal of Camel Practice and Research* 24.1 (2017): 15-26.
33. Malik A, *et al.* "A study of the anti-diabetic agents of camel milk". *International Journal of Molecular Medicine* 30.3 (2012): 585-592.
34. Sharmanov TS, *et al.* "Changes in the indicators of radioactive isotope studies of the liver of patients with chronic hepatitis during treatment with whole camels' milk and mares' milk". *Voprosy Pitaniya* 1 (1978): 9-13.

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