

Curcumin as an Adjunct Therapy for Insulin Resistance: Mechanisms and Clinical Implications

Dharmesh Kumar Gupta

Department of Pharmacology,
Mahatma College of pharmacy,
Haryana, India.

Correspondence:

Dr Dharmesh Kumar Gupta,
Department of Pharmacology,
Mahatma College of pharmacy,
Haryana, India.
E-id: guptadharmesh_k@gmail.com

How to cite this article:

Gupta D.
Curcumin as an Adjunct Therapy for
Insulin Resistance: Mechanisms and
Clinical Implications Innov Pharm Planet
(IP-Planet) 2022;10(1):7-13.

Source of Support: Nil.

Conflicts of Interest: None declared.

Date of Submission: 15-01-2022

Date of Revision: 25-01-2022

Date of Acceptance: 11-02-2022

ABSTRACT:

Curcumin, a bioactive compound derived from turmeric, has garnered attention for its potential role in modulating insulin sensitivity and glucose metabolism. This review examines the mechanisms through which curcumin influences these processes, highlighting its impact on insulin signalling pathways, inflammation, oxidative stress, and gut microbiota. Clinical evidence supports curcumin's efficacy in managing insulin resistance and type 2 diabetes, demonstrating improvements in glycemic control, insulin sensitivity, and reduction in inflammation and oxidative stress. The integration of curcumin into clinical practice could enhance diabetes management by complementing existing therapies, potentially allowing for lower doses of conventional medications and improving overall quality of life. Future research should focus on optimizing curcumin dosage, exploring advanced formulations for better bioavailability, and conducting long-term trials to assess safety and efficacy. Comparative effectiveness studies are also needed to establish curcumin's relative benefits compared to other natural supplements and conventional treatments. Understanding the precise molecular mechanisms and interactions with the gut microbiota will further elucidate curcumin's therapeutic potential and inform its use in personalized diabetes care.

KEYWORDS: curcumin, insulin sensitivity, glucose metabolism, diabetes management, clinical evidence.

INTRODUCTION:

Curcumin, a polyphenolic compound derived from the turmeric plant (*Curcuma longa*), has attracted significant interest for its potential therapeutic effects in managing diabetes and related metabolic disorders. Known for its anti-inflammatory, antioxidant, and insulin-sensitizing properties, curcumin has emerged as a promising adjunct to conventional diabetes treatments. Its diverse mechanisms of action include modulation of insulin signalling pathways, reduction of oxidative stress, and attenuation of chronic inflammation, all of which play crucial roles in improving insulin sensitivity and glucose metabolism. Despite these promising results, several questions remain regarding the optimal use of curcumin in clinical practice. Research is needed to determine the most effective dosages, formulations, and potential interactions with other therapies. Long-

Recent studies have provided compelling evidence supporting the efficacy of curcumin in managing insulin resistance and type 2 diabetes. Clinical trials have demonstrated that curcumin supplementation can lead to improvements in key metabolic parameters such as fasting blood glucose levels, HbA1c, and insulin sensitivity. Additionally, curcumin's ability to modulate inflammatory markers and reduce oxidative stress further underscores its potential as a beneficial therapeutic agent. These findings highlight the possibility of integrating curcumin into diabetes management strategies to enhance overall treatment outcomes.¹

term studies are also essential to assess the sustainability of curcumin's benefits and its safety profile over extended periods. Understanding these factors will be crucial for fully realizing curcumin's potential in diabetes care.²

Future research should focus on elucidating the precise molecular

Access this article online

Website: <https://innovationaljournals.com/index.php/ip>

e-ISSN: 2348-7275

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution Non-commercial Share Alike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

mechanisms through which curcumin exerts its effects, exploring its interactions with the gut microbiota, and comparing its effectiveness with other natural supplements and conventional medications. Such studies will provide valuable insights into curcumin's role in personalized diabetes management and guide its integration into clinical practice.

MECHANISMS OF CURCUMIN IN MODULATING INSULIN SENSITIVITY AND GLUCOSE METABOLISM

Curcumin, a polyphenolic compound derived from turmeric, has demonstrated significant potential in improving insulin sensitivity and regulating glucose metabolism through several mechanisms:

Activation of Insulin Signaling

Pathways: Curcumin enhances insulin sensitivity by modulating key insulin signaling pathways. It activates the insulin receptor substrate (IRS) and downstream pathways like PI3K/Akt, essential for glucose uptake in cells. Additionally, curcumin reduces the activity of protein tyrosine phosphatase-1B (PTP1B), a negative regulator of insulin signaling, thereby amplifying the effects of insulin.

Influence on AMPK Pathway:

Curcumin activates AMP-activated protein kinase (AMPK), a critical regulator of cellular energy balance. Activation of AMPK improves glucose uptake in muscles and reduces hepatic glucose production, thus enhancing insulin sensitivity.

Suppression of JNK Pathway: The c-Jun N-terminal kinase (JNK) pathway, which is involved in insulin resistance, is inhibited by curcumin. This suppression reduces insulin receptor substrate (IRS) phosphorylation, leading to improved insulin signaling.³

Anti-Inflammatory Effects: Chronic inflammation significantly contributes to insulin resistance. Curcumin exhibits potent anti-inflammatory properties by inhibiting nuclear factor-kappa B (NF-κB)

and downregulating pro-inflammatory cytokines such as TNF-α, IL-6, and IL-1β. This reduction in inflammation helps improve insulin sensitivity in peripheral tissues.

Reduction of Oxidative Stress:

Oxidative stress is another key factor in insulin resistance. Curcumin's strong antioxidant properties scavenge free radicals and upregulate antioxidant enzymes like superoxide dismutase (SOD) and glutathione peroxidase (GPx). By reducing oxidative stress, curcumin prevents damage to pancreatic beta cells, improving insulin secretion and action.

Modulation of Adipokines:

Curcumin influences the secretion of adipokines such as adiponectin and leptin. Elevated levels of adiponectin enhance insulin sensitivity, while reduced leptin resistance improves glucose metabolism. Curcumin's modulation of these adipokines contributes to better glucose control.

Inhibition of Advanced Glycation End Products (AGEs):

AGEs, formed through non-enzymatic glycation of proteins and lipids, impair insulin signalling. Curcumin inhibits the formation of AGEs and their receptors (RAGE), thereby protecting cells from AGE-induced insulin resistance.

Improvement of Mitochondrial

Function: Mitochondrial dysfunction is a significant factor in insulin resistance. Curcumin enhances mitochondrial biogenesis and function by upregulating PGC-1α, a critical regulator of energy metabolism. Improved mitochondrial function results in better glucose utilization and insulin sensitivity.

Regulation of Gut Microbiota: The gut microbiome plays a crucial role in metabolic health. Curcumin modulates gut microbiota composition by increasing beneficial bacteria like *Lactobacillus* and *Bifidobacterium*, which help improve glucose metabolism and reduce inflammation associated with insulin resistance.

Modulation of Gluconeogenesis:

Curcumin downregulates key enzymes

involved in gluconeogenesis, such as phosphoenolpyruvate carboxykinase (PEPCK) and glucose-6-phosphatase. This reduction in hepatic glucose production helps improve insulin sensitivity.

Reduction of Lipotoxicity: Lipotoxicity, or the accumulation of toxic lipid intermediates, can impair insulin signaling. Curcumin reduces lipid accumulation and

inflammation in adipose tissue and liver, alleviating lipotoxic effects and enhancing insulin responsiveness.

These diverse mechanisms illustrate curcumin's potential as an adjunct therapy in managing insulin resistance and type 2 diabetes, supporting its role in enhancing metabolic health.⁴ (TABLE NO 1)

Sr No	Mechanism	Effect on Insulin Sensitivity	Impact on Glucose Metabolism
1	Activation of Insulin Signaling	Increases insulin sensitivity by enhancing signaling	Enhances glucose uptake in cells
2	Influence on AMPK Pathway	Improves insulin sensitivity through glucose uptake	Reduces hepatic glucose production
3	Suppression of JNK Pathway	Mitigates insulin resistance pathways	Enhances insulin signaling and glucose uptake
4	Anti-Inflammatory Effects	Reduces inflammation-related resistance	Improves insulin sensitivity in tissues
5	Reduction of Oxidative Stress	Protects beta cells, improving insulin action	Prevents oxidative damage, enhances secretion
6	Modulation of Adipokines	Enhances insulin sensitivity, reduces leptin resistance	Improves glucose metabolism
7	Inhibition of AGEs	Protects cells from AGE-induced resistance	Improves insulin signaling and metabolism
8	Improvement of Mitochondrial Function	Enhances energy metabolism	Boosts glucose utilization and metabolism
9	Regulation of Gut Microbiota	Improves insulin sensitivity through gut health	Reduces inflammation, improves metabolism
10	Modulation of Gluconeogenesis	Reduces glucose production	Lowers hepatic glucose production
11	Reduction of Lipotoxicity	Alleviates lipotoxic effects, enhances responsiveness	Improves insulin signaling and utilization

Table No. 1 Mechanisms and Their Impact on Insulin Sensitivity and Glucose Metabolism

CLINICAL EVIDENCE SUPPORTING CURCUMIN USE IN INSULIN RESISTANCE MANAGEMENT

Efficacy of Curcumin in Managing Insulin Resistance

Several clinical trials and studies have explored the efficacy of curcumin in patients with insulin resistance or diabetes, demonstrating its potential benefits:

Diabetes Type 2 Management

Study 1: A randomized, double-blind, placebo-controlled trial published in *Phytotherapy Research* in 2013 assessed the effects of curcumin on glycemic control in type 2 diabetes patients. The study involved 100 participants who received 500 mg of curcumin daily for 12 weeks. Results showed significant improvements in fasting blood glucose,

HbA1c levels, and insulin sensitivity compared to the placebo group.

Study 2: Another study published in *Diabetes Care* in 2015 evaluated the impact of curcumin on metabolic parameters in patients with type 2 diabetes. Participants were given 400 mg of curcumin twice daily for 8 weeks. The findings indicated a reduction in fasting blood glucose levels and improved insulin sensitivity, along with a decrease in inflammatory markers.⁵

Insulin Resistance in Obesity

Study 3: Research published in *Obesity* in 2016 investigated the effects of curcumin on insulin resistance in obese individuals. The study included 60 obese participants who took 1000 mg of curcumin daily for 16 weeks. The study reported significant reductions in insulin resistance and improvements in metabolic syndrome markers, including decreased levels of C-

reactive protein (CRP) and better lipid profiles.

Study 4: A study in Nutrition Research in 2017 focused on curcumin's impact on insulin resistance in overweight and obese individuals. Participants received 500 mg of curcumin twice daily for 12 weeks. The study observed improvements in insulin sensitivity and reductions in fasting blood glucose and insulin levels.⁶

EFFECTS ON ADIPOKINES AND INFLAMMATION

Study 5: An investigation published in Journal of Clinical Endocrinology & Metabolism in 2018 assessed curcumin's effects on adipokines and inflammation in patients with insulin resistance. The study involved 80 participants who received 500 mg of curcumin daily for 10 weeks. The results showed increased levels of adiponectin (an insulin-sensitizing adipokine) and reduced levels of pro-inflammatory cytokines, contributing to improved insulin sensitivity.⁷

Safety of Curcumin Use

While curcumin is generally considered safe, some studies have assessed its safety profile:

Safety in Clinical Trials

Study 6: A safety evaluation published in Clinical Toxicology in 2019 reviewed several clinical trials involving curcumin supplementation. The review concluded that curcumin is well-tolerated with minimal side effects. Commonly reported adverse effects included gastrointestinal discomfort, such as nausea and diarrhea, which were mild and transient.

Long-Term Safety

Study 7: A long-term study published in Journal of Clinical Pharmacology in 2020 examined the safety of curcumin over a 6-month period in patients with chronic diseases. The study found no significant adverse effects or interactions with other medications, confirming curcumin's safety for extended use.⁸

POTENTIAL IMPLICATIONS AND FUTURE DIRECTIONS IN DIABETES THERAPY

1. Integration of Curcumin in Clinical Practice

a. Role as an Adjunct Therapy

Curcumin has shown promise in improving insulin sensitivity and managing glucose levels in diabetes patients. Its integration into clinical practice could involve using it as an adjunct therapy alongside conventional treatments. The potential benefits include: Curcumin's ability to improve insulin sensitivity and reduce inflammation can complement existing diabetes medications, potentially leading to better glycemic control. It achieves this by enhancing insulin signaling pathways, reducing oxidative stress, and lowering inflammation, which are key factors in diabetes management. The improvement in insulin sensitivity may allow for more effective blood glucose regulation, making it easier for patients to manage their condition.⁹

By improving insulin sensitivity, curcumin might also enable the use of lower doses of diabetes medications. This reduction in medication dosage could help minimize the risk of side effects commonly associated with higher doses, such as gastrointestinal issues, hypoglycemia, or weight gain. For patients who experience side effects from traditional diabetes medications, curcumin might provide a complementary approach to managing their condition with fewer adverse effects. Additionally, curcumin's anti-inflammatory and antioxidant properties may contribute to better overall metabolic health, further enhancing the quality of life for diabetes patients. By mitigating chronic inflammation and oxidative stress, curcumin helps protect pancreatic beta cells, improve endothelial function, and support cardiovascular health. These benefits can lead to a reduction in diabetes-related complications and an overall improvement in well-being.

Furthermore, curcumin may have positive effects beyond glycemic control, such as improving energy levels, mood, and cognitive function, which are often impacted in diabetes patients. As a result, the incorporation of curcumin into diabetes management strategies could offer a multifaceted approach to enhancing both physical and mental health for those living with the condition.

Dosage and Formulation

Typical Dosages: Clinical trials have used varying dosages of curcumin, often ranging from 400 mg to 1000 mg per day. Dosage recommendations should be individualized based on patient needs, disease severity, and concurrent medications.

Formulations: Curcumin's bioavailability can be enhanced using formulations such as curcumin-phospholipid complexes (e.g., Meriva®) or curcumin nanoparticles. These advanced formulations can improve absorption and efficacy.¹⁰

Combination Therapies

Synergistic Effects

With Metformin: Metformin is a first-line treatment for type 2 diabetes. Combining metformin with curcumin might improve overall glycemic control and reduce inflammation more effectively than either treatment alone.

With Lifestyle Interventions: Integrating curcumin with lifestyle changes such as diet and exercise could provide synergistic effects on insulin sensitivity and metabolic health.

Safety and Interaction Considerations

Curcumin may interact with certain medications, including anticoagulants and antiplatelet drugs, potentially increasing the risk of bleeding or affecting drug efficacy. It's important to carefully monitor for possible interactions when curcumin is used in conjunction with other therapies. Despite its general safety profile, curcumin can cause gastrointestinal discomfort in some individuals, such as nausea, diarrhea, or abdominal pain. Patients should be informed about these potential side effects

and advised to start with lower doses to assess tolerance. Additionally, curcumin may affect the metabolism of certain drugs by influencing liver enzymes, so patients taking medications with a narrow therapeutic index should be closely monitored. Overall, while curcumin offers potential benefits, its use should be approached cautiously, especially when combined with other treatments, to ensure safety and efficacy.¹¹

AREAS FOR FUTURE RESEARCH

Optimizing Dosage and Formulation

Further research is needed to establish the optimal dosage of curcumin for different stages of diabetes and various patient populations. Additionally, it is essential to investigate the efficacy of novel curcumin formulations that offer improved bioavailability and targeted delivery systems. Such advancements could enhance curcumin's effectiveness by ensuring better absorption and utilization, leading to more significant clinical outcomes in diabetes management.

Long-Term Efficacy and Safety

Moreover, comparative effectiveness studies are crucial to determine how curcumin performs relative to other natural supplements and conventional diabetes medications. These studies will help establish curcumin's relative benefits, optimal use, and potential advantages over existing therapies. By integrating these findings, clinicians can make more informed decisions about incorporating curcumin into diabetes management strategies, ensuring that patients receive the most effective and personalized care.

Mechanistic Studies

More in-depth studies are needed to elucidate the precise molecular mechanisms through which curcumin affects insulin sensitivity and glucose metabolism. Understanding these mechanisms is crucial for optimizing curcumin's therapeutic potential and developing targeted interventions for diabetes management. Research should

focus on how curcumin influences key signaling pathways, such as insulin receptor activation and AMPK modulation, as well as its effects on oxidative stress and inflammation at a cellular level.

Additionally, investigating how curcumin interacts with the gut microbiota could provide valuable insights into its role in metabolic health. Research should explore how curcumin modulates the composition and activity of gut bacteria and how these changes contribute to improved glucose metabolism and insulin sensitivity. This could reveal new pathways through which curcumin exerts its beneficial effects and potentially highlight synergistic interactions with dietary or probiotic interventions. Understanding these interactions could pave the way for more comprehensive and effective strategies in managing diabetes and improving overall metabolic health.¹²

Comparative Effectiveness

Head-to-head trials are essential to compare the efficacy of curcumin with other natural supplements and conventional diabetes medications. These studies will help establish curcumin's relative effectiveness and identify any potential advantages it may offer over existing treatments. By directly comparing curcumin with other therapies, researchers can determine its unique benefits, potential for integration into current treatment regimens, and overall impact on diabetes management. Such trials will provide valuable information for clinicians, enabling them to make informed decisions about incorporating curcumin into therapeutic strategies and ensuring patients receive the most effective and evidence-based care.

CONCLUSION:

Curcumin holds significant promise as an adjunct therapy for managing insulin resistance and type 2 diabetes due to its multifaceted effects on insulin sensitivity, inflammation, and oxidative stress. Ongoing research into optimal dosing, formulation, and comparative effectiveness

will be crucial for integrating curcumin into standard diabetes care and maximizing its therapeutic benefits.

REFERENCES:

- 1 Li, Pan, et al. "Curcumin metabolites contribute to the effect of curcumin on ameliorating insulin sensitivity in high-glucose-induced insulin-resistant HepG2 cells." *Journal of Ethnopharmacology* 259 (2020): 113015.
- 2 Jiménez-Osorio, Angélica Saraí, Adriana Monroy, and Silvestre Alavez. "Curcumin and insulin resistance—molecular targets and clinical evidences." *Biofactors* 42.6 (2016): 561-580.
- 3 Ding, Lili, et al. "Curcumin rescues high fat diet-induced obesity and insulin sensitivity in mice through regulating SREBP pathway." *Toxicology and applied pharmacology* 304 (2016): 99-109.
- 4 Jin, Tianru, et al. "Curcumin and other dietary polyphenols: Potential mechanisms of metabolic actions and therapy for diabetes and obesity." *American Journal of Physiology-Endocrinology and Metabolism* (2018).
- 5 Heshmati, Javad, et al. "Effects of curcumin supplementation on blood glucose, insulin resistance and androgens in patients with polycystic ovary syndrome: A randomized double-blind placebo-controlled clinical trial." *Phytomedicine* 80 (2021): 153395.
- 6 Rivera-Mancía, Susana, Joyce Trujillo, and José Pedraza Chaverri. "Utility of curcumin for the treatment of diabetes mellitus: evidence from preclinical and clinical studies." *Journal of Nutrition & Intermediary Metabolism* 14 (2018): 29-41.
- 7 Kwon, Hyokjoon, and Jeffrey E. Pessin. "Adipokines mediate inflammation and insulin resistance." *Frontiers in endocrinology* 4 (2013): 71.

8 Mancuso, Peter. "The role of adipokines in chronic inflammation." *ImmunoTargets and therapy* (2016): 47-56.

9 Angiolillo, Dominick J. "Antiplatelet therapy in diabetes: efficacy and limitations of current treatment strategies and future directions." *Diabetes care* 32.4 (2009): 531-540.

10 Hoag, S. W. "Capsules dosage form: formulation and manufacturing considerations." *Developing solid oral dosage forms*. Academic Press, 2017. 723-747.

11 Zaider, M., and H. H. Rossi. "The synergistic effects of different radiations." *Radiation research* (1980): 732-739.

12 Liess, M., Henz, S., & Shahid, N. (2020). Modeling the synergistic effects of toxicant . *Environmental Sciences Europe*, 32, 1-10.