

A Clinical Case Study of Pandu Rog and Its Ayurvedic Management

Hari Krishna Shriwas¹, Rupendra chandrakar²

¹Assistant Professor, Department of Samhita and Siddhanta, B.G. Garaiya Ayurvedic College Rajkot, Gujarat, India.

²Reader, Department of Samhita and Siddhanta Govt. Ayurvedic College Raipur (C.G.), India.

Corresponding Author: drharikrishna1987@gmail.com

Abstract: - *Pandu Roga* can be closely correlated with anaemia in modern science. This disease causes a reduction often in red blood cells (RBCs) and Haemoglobin. A Prominent diagnostic feature of *Pandu Roga* (Anemia) is hemoglobin estimation. The assessment was *Panduta* (pallor of skin), *Karnachhweda* (tinnitus), *Hatanala* (loss of appetite), *Shwasa* (breathlessness), *Bhrama* (vertigo), *Gatrashoola* (bodyache) and *Hrid-drava* (palpitation). A 38 years female lady having complaint of *Panduta* (Pallor of skin), *Aruchi* (loss of appetite), *Daurbalya* (weakness), *Pindikodweshatana* (leg cramps), *Akshikutshotha* (periorbital oedema), *Shrama* (fatigue), *Shwasa* (breathlessness) and *Hridspandnam* (palpitation) and hemoglobin concentration was 4.7 gm% comes in the OPD. The subjective assessment was done with 0, 1, 2 and 3 grading of questionnaires containing specific questions. The patient was advised to *Lohasava*, Liver tonic, *Punanarnava Mandur* and *Arogyavardhani Vati* twice for three months and followed-up of 15 days interval, there is improvement in clinical symptoms and Hemoglobin 5.7 gm%, 10.2gm% and 13.2 gm% at different follow-up study.

Key Words: —*Pandu, Rasa Dhatu, Rakta Dhatu, anaemia, Punarnava Mandura (Iron preparation).*

I. INTRODUCTION

Pandu is described in all *Ayurvedic* classical text. *Ayurveda* gives equal importance to both preventive & curative aspects. Skin of person with *Pandu* gets whitish and pallor (*Pandu Varna*).¹It is a disease entity which has some physical as well as psychological clinical features similar to that of various type of anaemia. Pallor skin and decrease the level of Haemoglobin is the basic diagnostic criteria of anaemia. In present scenario according to WHO, anaemia is very common in general population and around 2 billion people are suffering from anaemia across the world². It affects all group of populations. Due to reduction in number of RBCs per cu.mm. of blood and quantity of Haemoglobin, pallor like other symptoms arises. According to *Ayurveda*, *Pandu* (Anaemia) is described as *Pitta Dosha Pradhan Vyadhi* associated with *Rasa and Rakta Dhatu* (Lymph and blood tissue). *Bhrajaka Pitta* is responsible for the Normal *Varna* of *Twak*(skin).The changing lifestyle of human being by means of *Ahara* and *Vihara* (Diet and lifestyle) plays an important role in the manifestation of *Pandu*.

Pandu having symptoms of *Panduta* (Pallor of skin), *Karnachhweda* (tinnitus), *Hatanala* (loss of appetite), *Shwasa* (breathlessness) and *Gatrashoola* (Bodyache), *Hrid-drava* (palpitation), *Gauravata* (heaviness in the body).*Ayurvedic* medicines are of great importance for treatment of disease like *Pandu* and increase lifestyle interventions to regain a balance between body, mind, spirit and environment.

II. SAMPRAPTI OF PANDU

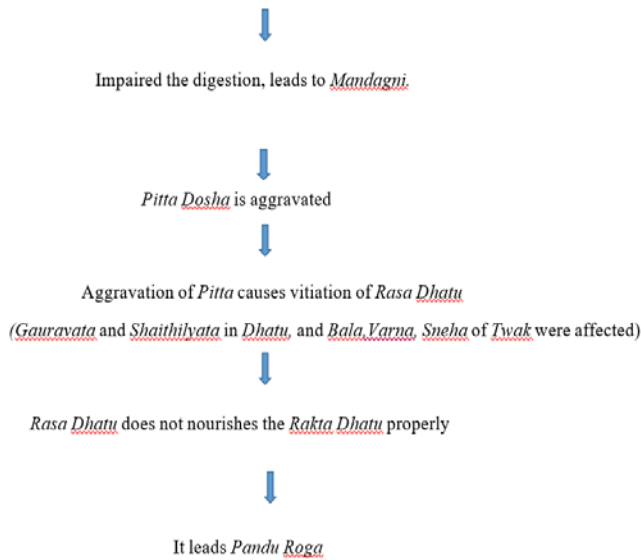
In *Pandu*, due to irregular/faulty (*Pitta prakopaka: Amla(sour), Lavana(salty), Katu Rasa(pungent) Atisevana, Kshara(Alkaline), Ushna(hot), Tisksna, (sharp)Ruksha (dry) Ahara Atisevana*, dietary habits and lifestyle, impaired the digestion, this signifies the disturbance of *Agni* (digestion strength), which is *Mandagni*. It results into *Pitta Dosha* is aggravated. Aggravation of *Pitta* causes vitiation of *Rasa Dhatu*. It leads to *Gauravata* (heaviness in the body) and *Shaithilyata* in *Dhatu*. (loose ness in muscles etc.) Further *Bala* (strength), *Varna* (colour) and *Sneha of Twak* (skin) were affected, then diminution of a part of *Rasa Dhatu* (*Poshaka Bhaga*) which is responsible for the nourishment of *Rakta Dhatu* (blood tissue), So *Rakta Dhatu* (blood tissue), does not get nourished properly Irregular/faulty (*Pitta Prakopaka*)

Manuscript revised September 18, 2021; accepted September 19, 2021. Date of publication September 21, 2021.

This paper available online at www.ijprse.com

ISSN (Online): 2582-7898; SJIF: 5.494

dietary habits and lifestyle. (*Amla, Lavana, Katu Rasa Atisevana, Kshara, Ushna, Tisksna, Ruksha Ahara Atisevana*)



III. CASE REPORT

3.1 History of past illness

Since 4 year, back patient felt the fever, headache, vomiting, loss of appetite, weight loss, fatigue and weakness, where she had diagnosed *Antrika Jwara* (Typhoid). For that, she had taken treatment and were fully recovered from the disease.

3.2 History of present illness

A 38 year aged female patient visited in OPD of *Sharir Kriya* department in NIA, during the month of June 2020 presenting with symptoms of Paleness over the body, weakness, fatigue, anorexia and vertigo, pain in abdomen and body- ache. Patients belongs to middle socio-economic community and she was asymptomatic 4 year ago. At 3 month back patient had diagnosed anaemia by questionnaires that mention in the form of grading 0, 1, 2 3. Then she had confirmed by CBC (complete blood count) laboratory test with hemoglobin level 4.7 gm% and blood transfusion was necessary. But she did not want to undergo with blood transfusion, since from that she was started to taken a *Ayurvedic* treatment for *Pandu* (anemia) and from that time patient was taken regularly combination of *Punarnava Mandur*,

Arogyavardani Vati, Lohasava and Tab. Liv52 BD. and she had continued regular *Yoga* and *Asana*. After taking medicines for 15 days patient was repeat the follow up of CBC test and she got the hemoglobin level raised with 5.7 gm% and further after 42 days patient again repeat the CBC test and found the 10.2 gm% hemoglobin, then after 23 days Hemoglobin reached at their normal value with 13.2 gm%.

Family history: All family members have no history of any severe disease.

Personal history: BP-110/70 mm of Hg, Pulse- 90/min., R.R. – 26 Appetite- Loss of appetite, Sleep- Normal, Bowel habit- Clear, Urine- Clear Menstrual history- scanty and regular Obstetric history- Nulligravida

3.3 Treatment Plan

- *Punarnava Mandura (Iron preparation)*:500 mg
Arogyavardhani Vati: 500 mg
- *Lohasava*: 20 ml
- Tab. : Liv 52

IV. ASSESSMENT CRITERIA

The patient undergone the treatment were assessed for improvement in specific symptoms of *Pandu*.

Aruchi (loss of appetite)

S. No.	<i>Aruchi</i> (loss of appetite)	Condition	Score
1.	Very good appetite	None	0
2.	Irregular	Mild	1
3.	Occasionally poor appetite (appetite is not on time)	Moderate	2
4.	Frequently persistent very poor appetite	Severe	3

Panduta (pallor)

S. No.	<i>Panduta</i> (pallor)	Condition	Score
1.	No pallor	None	0
2.	Pallor of conjunctiva	Mild	1
3.	Pallor of conjunctiva, nails, tongue	Moderate	2
4.	Pallor of conjunctiva, nails, tongue, skin, palm and soles	Severe	3

Daurbalya (weakness)

S. No.	<u>Daurbalya</u> (weakness)	Condition	Score
1.	No	None	0
2.	Occasional in normal activity	Mild	1
3.	Persistent in normal activity	Moderate	2
4.	Occasional in heavy activity	Severe	3

Hrida Spandanam (palpitation)

S. No.	<u>Hrida Spandanam</u> (palpitation)	Condition	Score
1.	No palpitation on usual activity	None	0
2.	Occasional on heavy exertion	Mild	1
3.	On light exertion	Moderate	2
4.	During rest	Severe	3

Shwasa (dyspnoea)

S. No.	<u>Shwasa</u> (dyspnoea)	Condition	Score
1.	No	None	0
2.	Occasional on exertion	Mild	1
3.	Walking upstairs / quick moving	Moderate	2
4.	On bed	Severe	3

Pindikodweshatana (leg cramps)

S. No.	<u>Pindikodweshatana</u> (leg cramps)	Condition	Score
1.	No	None	0
2.	Mild leg cramps only at night	Mild	1
3.	Leg cramps present in night or on exertion	Moderate	2
4.	Leg cramps present throughout the day	Severe	3

Akshikutashotha (periorbital oedema)

S. No.	<u>Akshikutashotha</u> (periorbital oedema)	Condition	Score
1.	No	None	0
2.	Periorbital oedema in morning for 1 hours	Mild	1
3.	Periorbital oedema in morning for 2 hours	Moderate	2
4.	Periorbital oedema in morning for 6 hours	Severe	3

Shrama (Fatigue)

S. No.	<u>Shrama</u> (fatigue)	Condition	Score
1.	No	None	0
2.	Occasional in normal activity	Mild	1
3.	Persistent in normal activity	Moderate	2
4.	Occasional in heavy activity	Severe	3

4.1 Contents of Drug

Punarnava Mandura (Iron preparation)

S. No.	Name of Drug (Botanical name)	Dose
1.	<u>Punarnava</u> (<u>Boerhavia diffusa</u>)	1 Part
2.	<u>Trivrit</u> (<u>Operculina turpathum</u>)	1 Part
3.	<u>Shunthi</u> (<u>Zingiber officinale</u>)	1 Part
4.	<u>Maricha</u> (<u>Piper nigrum</u>)	1 Part
5.	<u>Pippali</u> (<u>Piper longum</u>)	1 Part
6.	<u>Vidanga</u> (<u>Embelia ribes</u>)	1 Part
7.	<u>Devdaru</u> (<u>Cedrus deodara</u>)	1 Part
8.	<u>Kustha</u> (<u>Saussurea lappa</u>)	1 Part
9.	<u>Haridra</u> (<u>Curcuma longa</u>)	1 Part
10.	<u>Daruharidra</u> (<u>Berberis aristata</u>)	1 Part
11.	<u>Haritaki</u> (<u>Terminalia chebula</u>)	1 Part
12.	<u>Bibhitaka</u> (<u>Terminalia belirica</u>)	1 Part
13.	<u>Amalaki</u> (<u>Embllica officinalis</u>)	1 Part
14.	<u>Danti</u> (<u>Baliospermum montanum</u>)	1 Part
15.	<u>Chavya</u> (<u>Piper chaba</u>)	1 Part
16.	<u>Indrayava</u> (<u>Holoarrhena antidyentrica</u>)	1 Part
17.	<u>Pippali</u> (<u>Root of Piper longum</u>)	1 Part
18.	<u>Mustaka</u> (<u>Cyprus rotundus</u>)	1 Part
19.	<u>Chitraka</u> (<u>Plumbago zylanicum</u>)	1 Part
20.	<u>Mandura Bhasma</u> (<u>Iron preparation</u>)	40 Part
21.	<u>Gomutra</u> (<u>cow urine</u>)	Q.S.

Arogyavardhani Vati

S. No.	Name of Drug (Botanical name)	Dose
1.	<u>Parada</u> (<u>Mercury</u>)	1 Part
2.	<u>Shuddha Gandhaka</u> (<u>Sulphur</u>)	1 Part
3.	<u>Lauha bhasma</u> (<u>calcined iron</u>)	1 Part
4.	<u>Abhrraka bhasma</u> (<u>calcined mica ash</u>)	1 Part
5.	<u>Tamra bhasma</u> (<u>Copper preparation</u>)	1 Part
6.	<u>Haritaki</u> (<u>Terminalia chebula</u>)	1 Part
7.	<u>Bibhitaka</u> (<u>Terminalia belirica</u>)	1 Part
8.	<u>Amalaki</u> (<u>Embllica officinalis</u>)	1 Part
9.	<u>Kutki</u> (<u>Pichorryza kurua</u>)	1 Part
10.	<u>Chitrakamula</u> (<u>Plumbago zylanicum</u>)	Q.S.
11.	<u>Guggulu</u> (<u>Commiphora mukul</u>)	Q.S.
12.	<u>Shilajatu</u> (<u>Asphaltum</u>)	Q.S.
13.	<u>Nimbapatra Swarasa</u> (<u>Azadirecta indica</u>)	Q.S.

Lohasava

V. OBSERVATIONS AND RESULT

S. No.	Name of Drug (Botanical name)	Dose(Each 10 ml derived from)
1.	<i>Lauha (Iron powder)</i>	10 ml
2.	<i>Shunthi (Zingiber officinale)</i>	10 ml
3.	<i>Maricha (Piper nigrum)</i>	10 ml
4.	<i>Pippali (Piper longum)</i>	10 ml
5.	<i>Haritaki (Terminalia chebula)</i>	10 ml
6.	<i>Bibhitaka (Terminalia belirica)</i>	10 ml
7.	<i>Amalaki (Emblca officinalis)</i>	10 ml
8.	<i>Yavanika (Trachyspermum ammi)</i>	10 ml
9.	<i>Vidanga (Embelia ribes)</i>	10 ml
10.	<i>Mustaka (Cyprus rotundus)</i>	10 ml
11.	<i>Eranda(Ricinus communis)</i>	10 ml
12.	<i>Dhataki (Woodfordia fruticosa)</i>	10 ml
13.	<i>Makshika(honey)</i>	4.270 gm
14.	<i>Guda (jaggery)</i>	7.375 gm
15.	Water	Q.S.

S. No.	Scanning date	Clinical features	Result
1.	01/07/2020	weakness, fatigue, anorexia and vertigo, pain in abdomen and body-ache	Hb%- 4.7 gm% Total RBC count-3.59x10 ⁶ μL
2.	15/07/2020	mild relief in symptoms	Hb%- 5.7gm% Total RBC count-3.84x10 ⁶ μL
3.	25/08/2020	completely relief in symptoms	Hb%- 10.2 gm% Total RBC count-4.85x10 ⁶ μL
4.	17/09/2020	no repeat any symptoms	Hb%- 13.2gm% Total RBC count-4.87x10 ⁶ μL

4.2 Tab. Liv 52

S. No.	Name of Drug (Botanical name)	Dose
1.	<i>Himsra (Capparis spinosa)</i>	65 mg
2.	<i>Kasani (Cichorium intybus)</i>	65 mg
3.	<i>Mandura (Iron preparation) Bhasma</i>	33 mg
4.	<i>Kakamachi (Solanum nigrum)</i>	32 mg
5.	<i>Arjuna (Terminalia arjuna)</i>	32 mg
6.	<i>Kasamarda (Cassia occidentalis)</i>	16 mg
7.	<i>Biranjaspaha (Achillea millefolium)</i>	16 mg
8.	<i>Jhavuka (Tamarix gallica)</i>	16 mg

Yoga and Asana:

Yoga, Pranayama (Anuloma-Viloma, Kapalabhati), Sarvangasana, Paschimottasana etc.

Pathya and Apathya Ahara and Vihara:

Pathya (Wholesome)	Apathya (unwholesome)
Rice, wheat (old), barley, pea, green gram, spinach, green vegetables, pomegranate Munga(Green gram), Masura(Lens esculenta), meat, Munakka (Raisin), banana, mango, papaya, cow milk, ghee, guda(jaggery), Takra(butter milk) etc. and light exercise.	Til(sesame), Kulatha, Krishna Maricha(Piper nigrum), Sarshapa (Brassica campestris), and Diwaswapna (Sleeping during day time), Atap Sevana (sunbath), Krodha(anger), Chinta(anxiety), Ativyayama (excessive exercise), Ativyavaya (repeated course of sex)

Discussion:

Ayurveda has a unique understanding of human physiology and pathology that offers a different perspective in diagnosis and treatment of disease. The normal haemoglobin in female 11.5-14.5 gm%.

Acharya Charaka described, Mandura (Iron preparation) and its preparations are important to treat the Pandu Roga (Anaemia). The ferric and ferrous fractions of Bhasma (metallic/mineral preparation) provide sufficient amount of iron, which is needed for the process of erythropoiesis. The contents of Arogyavardhani Vati like Triphala and Kutki (Picrorhiza kurroia), with Bhasma (metallic/mineral preparation) and Kajjali (mercury sulphur bond) becomes capable for detoxifying due to Sara Guna (Mobile) by removing obstruction in Srotas (channels). Lohasava is very useful to improve Agni (digestion strength), abnormal function of Agni is the root cause of Pandu Roga. (Anaemia) Based on this fact the drug helps in breaking the pathogenesis of Pandu Roga (Anaemia). Most of drug of Liv 52 and Trikatu have hepato-protective, appetiser, digestive and carminative properties. Hence it protects the liver and improves digestive power, absorption of AharaRasa and drug also. Haridra (Curcuma longa), Amalaki (Emblca officinalis) Pippali(Piper longum) and Trivrita are thought to be Panduhara (Drugs For Anaemia) by various Acharya. Other drugs which are having immune-modulator and anti-oxidant properties. In the present case by virtue of Rasa and Guna, Mandura (Iron preparation) Bhasma (metallic/mineral preparation) pacifies aggravated Pitta and maintain the normalcy.

VI. CONCLUSION

The tab. Liv 52, *Arogyavardhani Vati*, *Lohasava* and *Punarnava Mandur* is very effective in the management of *Pandu*.

REFERENCES

- [1]. Charaka samhita, chikitsasthan, pandurogchikitsitam, 16/6.
- [2]. Dr. S. Sujan, Dr. Sunil P. Changle, Dr. Swapnil C. R., A critical review of PanduRoga in childrens w.s.r. to iron deficiency anaemia, World journal of pharmaceutical and medical research, www.wjpmr.com, 2017, 3(9).
- [3]. Charaka samhita, chikitsasthan, pandurog chikitsitam, 16/4.
- [4]. Sushruta samhita, sutra sthan, vrana prashn adhyaya, 21/10.
- [5]. Charaka samhita, chikitsasthan, pandurog chikitsitam, 16/12-16.
- [6]. Sushruta samhita, uttatantra, panduroga pratishedhiyadhyaya, 44/3.
- [7]. Dr. Kalpana Mehar, Physiological study of Rasavaha Srotas and effect of Vibhitakadi Vataka in Pandu Raga, Jaipur, National institute of Ayurveda, 2017.
- [8]. Sushruta samhita,uttatantra,panduroga pratishedhiyadhyaya,44/17,24.