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A CLINICAL STUDY ON THE AYURVEDIC MANAGEMENT OF PANDU (ANAEMIA) WITH PARTANTRA KAMALA

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Abstract

Pandu Roga is a *Pitta Pradhana Vyadhi*. Charak Acharya has considered *Kamala* as advance stage of *Pandu roga*. When person with *Pandu roga* continues intake of *pittakar ahar* then he develops *kamala*. Sushrut Acharya has considered *kamala* as *Swatantra vyadhi* [separate disease] and also *Partantra vyadhi* [may be due to further complication of *pandu roga*]. *Pitta* is responsible for normal colour of the body so, once it gets vitiated, impairment of colour and complexion (*Panduta*) occurs. Thus, disease characterised by *Pandu Varna* due to significant deficiency of *Rakta Dhatu* is known as *Pandu Roga*. A 17 years young male patient came to OPD with complaint of *Panduta* (Pallor of skin), *Aruchi* (loss of appetite), *Daurbalya* (weakness), *Shrama* (fatigue), *Hridspandnam* (palpitation), *Bhram* (vertigo), *Malena* since 5 days and abdominal discomfort. His hemoglobin concentration was 6.8 gm% and altogether liver functions test was deranged i.e. total bilirubin 4.3mg/dl. The subjective assessment and objective assessment was done. *Ayurveda* has vast treasure of herbo-minerals medicines to offer for the treatment of *Pandu Roga*. *Pitta* is responsible for normal colour of the body so, once it gets vitiated, impairment of colour and complexion (*Panduta*) occurs. Thus, disease characterised by *Pandu Varna* due to significant deficiency of *Rakta Dhatu* is known as *Pandu Roga*. A 17 years young male patient came to OPD with liver functions test was deranged i.e. total bilirubin 4.3mg/dl. The subjective assessment and objective assessment was done. *Ayurveda* has vast treasure of herbo-minerals medicines to offer for the treatment of *Pandu Roga*. The patient was advised to take *Abhra Loha*, *Arogyavardhini Vati*, *Satavari Kalp*, *Punarnav Mandur* twice and *Amlicure DS* thrice daily for 8 weeks and follow-up of 20 days interval, there is phenomenal improvement in clinical symptoms and hematological parameters. Progressively remarkable hemoglobin 6.8 gm%, 6.4gm% and 10.6 gm% and total bilirubin normalize i.e. 4.3mg/dl, 3.89 mg/dl, 2.06 mg/dl in different follow-up.

Keywords-*Pandu*, Haemolytic Anaemia, Herbo-mineral Drug

Introduction

In this 21st century, life style has changed very rapidly. Anemia is the most predominant blood cell deficiency disorder and a global public health problem affecting both developing and developed countries with major consequences for human health as well as social and economic development.^[1] The World Health Organization estimates that 1.62 billion people globally are affected with anemia that corresponds to 24.8% of the world population, In India prevalence is approximately 51 % for anemia. According to

NFHS III, in Chhattisgarh 58.7% adolescent girls and 34.6% adolescent boys aged between 15-19 years were anemic. As life style is advancing in the society, diet and habits are also changing very swiftly; more over people showing negligence in taking care of their health. As a result of this, people suffer from various psychosomatic diseases. Among these diseases “*PANDU ROGA*” is a very common disease, seen especially in developing countries like India. The ascribed clinical features and the management of *Pandu Roga* match up very closely to anemia. *Pandu Roga* is a *Rasavaha strotodushti janya vyadhi* which is *Pitta Pradhana* and sometimes manifests *kamala Vyadhi*. Since *Pitta* is responsible for normal colour of the body so, once if it gets vitiated, impairment of colour and complexion (*Panduta*) occurs. Thus, disease characterised by *Pandu Varna* due to significant deficiency of *Rakta Dhatu* is known as *Pandu Roga*. Due to multifarious *Nidanas* like excessive intake of *Kshariya*, *Amla*, *Lavana*, *Ushna*, *Viruddhahara*, *Asatmya Ahara*, *Divaswapna* and *Adharniya Vegavrodha*, all the three *Sarir Doshas* especially *Pitta Dosha* gets aggravated which in turn vitiates *Kapha*, *Vayu*, *Rakta*, *Twaka*, *Mamsa* and *Ojas*. In classical literature *Panduroga* has been sub typed into varieties with a different specific management principle for each sub type. The implication of those treatment principles requires the categorization of patients into sub types as per the cardinal clinical presentation i.e. *Vatika Pandu*, *Paittika Pandu*, *Kaphaja Pandu*, *Tridoshaja Pandu*, *Mrittikabhakshanajanya Pandu*.

As per conventional science anemia were assembled according to the main cause identified in them into five main categories as:

- Haemolytic Anemias
- Megaloblastic Anemia (B12 and/or Folic acid deficiency)
- Iron Deficiency Anemia
- Dual Deficiency Anemia (Iron and vitB12/ Folic acid deficiency)]
- Anemias due to Bone Marrow Failure

It was observed that *Paittika Pandu* features were observed predominantly in haemolytic anemia. These further deteriorate the health of the patient due to alteration

in the intestinal flora. The management of anemia according to conventional medicine system includes various oral iron preparations, but these oral iron preparations have various side effects like nausea, vomiting, diarrhoea, constipation, metallic taste etc. [2]

Case Report

History of Past Illness

Before 1 year back he had cough, cold and fever thus, symptomatic management was done for that and was fully recovered with ailment.

History of present illness-

A 17 years young middle socio-economic community male come to Ayurveda OPD in AIIMS, Raipur, Chhattisgarh in November 2021 with complain of melena, bodyache, itching, anorexia, vertigo and upset abdomen since 5-6 days. Clinically he was diagnosed for anemia and later, his stool for occult blood was positive, USG (Abdomen+Pelvis) reveals ? colitis. Confirmatory blood investigations done and found Haemoglobin 6.8 g/dl and total bilirubin 4.3 mg/dl with elevated hepatic enzymes. Immediate admission and advice for blood transfusion was given, but he did not want to undergo with blood transfusion and given negative consent for transfusion. since from that day he was started to follow scheduled *Ayurvedic* treatment protocol and regimen for *Pandu Vyadhi* (anemia).

Family history

All family members have no history of any severe disease.

Personal history

BP-110/80 mm of Hg, Pulse- 94/min., R.R. – 24 Appetite- Loss of appetite, Sleep- Normal, Bowel habit- Constipation, Urine- Yellowish.

Observations in Patient

He had fascinatingly *Peeta* (yellowish discoloration of the skin), *Peeta Netra* (yellowish eyes/bulbar conjunctiva), *Peeta Mutra* (yellow urine), *Bhinna Varcha* (loose stools) due to the increased bilirubin turnover because of haemolysis.[3] Hyperdynamic circulation in haemolysis is the cause behind presentations as *Mandoshmata* (hyperthermia), *Sheeta Kama* (longing for cold) and *Ushna*

Anupashaya (dislike for hot).[4]

Material & Method

After taking entire relevant history and assessing clinical examination pertaining to disease of patient, routine blood investigations done followed by advice to continue prescribed ayurvedic medicaments for given time interval with regular follow-up of instructed schedule on OPD basis.

Examination & Investigations

- For the confirmatory diagnosis the clinical features as described in the classical Ayurveda texts were used followed by haematological, biochemical and relevant laboratory investigations using standard methodology.
- Cardinal symptoms of *Pandu Roga* like *Panduta* (pallor), *Daurbalya* (general weakness), *Hritspandana* (palpitation), *Bhrama* (vertigo), *Shiroruja* and *Shotha* (headache and edema), *Anna-Aruchi* (loss of appetite), *Shrama* (fatigue), *Ayasena Shwasa* (exertional dyspnoea) were assessed.⁽⁵⁾
- Assessment of clinical signs and symptoms was done before, during, after treatment and after follow-up period of 8 weeks. Routine hematological and biochemical, investigations were repeated after the completion of 8 weeks of interventional *Ayurvedic* treatment.

Treatment Principle

Patients were advised to stop other ongoing medications which were prescribed for the treatment of anemia and informed to reduce intake of food which are sour, salty, *Vidahi* (which causes burning sensation) *Vishthambhi* (which causes constipation), and *Abhishyandikara Ahara* (which blocks the channels).

Posology

S. N.	Herbo-Mineral Formulation	Dose	Frequency
1	Tab. ABHRALOA	1 Tablet	Twice in a Day
2	AAROGYA VARDHINIVATI	2 Tablet	Twice in a Day
3	SATAVARIKALP	1 tsf	Twice in a Day
4	PUNARNAV MANDURA	2 Tablet	Twice in a Day
5	Cap, AMLYCURED.S	1 Tablet	Thrice in a Day

Probable Mode of Action of Drugs- Action of a medicine mainly depends upon its subtle constituents like *Rasa, Guna, Virya, Vipaka and Prabhava* etc.

- **Abhraloha-** The prime hematinic in *Abhraloha* is *Loha Bhasma*, which is well-known for its hematinic activity with a lower incidence of adverse effects compared to oral iron therapy, it is a *Rasayana* formulation that supports the function of *Agni* (metabolism to produce quality *Aahara Rasa* that results in

enhanced formation of *Rakta Dhatu* (blood tissue) while maintaining the *Dosha* balance in body. Its ingredient *Triphala* is well known for its gastroprotective, immunomodulatory, and rejuvenating actions. [6] *Trikatu* considered a bioavailability enhancer. *Trimada* having appetizing and digestive actions, it is also associated with anthelmintic action. *Shatavari* is well known for its gastroprotective, anti-hepatotoxic, immunomodulatory. In an experimental model of anemia in rats, it has been reported to possess anti-anemic activity. [7]

- ***Arogyavardhini Vati*** -It contains *Abhrak Bhasma* which promotes as immunomodulator, it repairs cells and aids in rejuvenating them. It increases physical stamina, endurance capacity, subsides anaemia, general debility, hepatomegaly, Splenomegaly, preventing liver toxicity and effect on bilirubin, SGOT, SGPT levels, acts as digestive stimulant with hepatoprotective and antioxidant activity. *Amalaki* possesses *Pitta pradhana tridosha shamaka*. Maximum drugs have katu rasa and are srotoshodhaka, so they clear the obstruction in *Srotasa* and assist in *Samprapti Vighatana* of *Pandu Roga*. *Madhura Vipaka* does the *Dhatu Poshana* and increases the vital strength, thus bringing about shamana of the prakupita doshas. Even when the diet is poor in iron, Vitamin C supplements with each meal enhances iron absorption. According to *Rasa Shastra*, *Abhrak* is also having anti-depressant activity hence, in this case it also works to cope up with depression manifested by *Pandu Roga*.
- ***Shatavari Kalp***- It is one of great rejuvenating and restorative herbs used in *Ayurveda*. It has more than 50 organic compounds including steroidal saponins, glycosides, alkaloids, polysaccharides and mucilage which are responsible for the multiple medicinal properties. It has proved to be extremely effective in restoring the balance of the *Pitta Dosha*.

It is also very effective in preventing gas formation in the alimentary canal which further reduces the abdominal distension. Moreover, its anti-inflammatory & antioxidant (help in fighting against free-radicals) properties also reduces *ama uttpatti*.

- ***Punarnav Mandura***- *It is unique poly herbo-mineral formulation which may work as a Panduhara and Rasayana according to Ayurvedic literature, most of the drugs in Punarnava Mandura that is Triphala, Trikatu, Chitraka, Vidanga and Pippalimula are having appetizer, digestive and carminative properties and can counteract most of the pathological manifestations related to Pandu Roga. Haridra, Amalaki, Pippali, Punarnava and Trivrita are thought to be Panduhara by various Acharyas.*
- *Amalaki, Danti, Pippali, Punarnava, Kushtha and Daruharidra* have the potential to confer beneficial health effects due to their antioxidant activity. *Amalaki* possess antioxidant activity and could be an important dietary source of vitamin C, which is a powerful water-soluble antioxidant [8] and helps in increasing iron absorption from the gut. [9] *Mandura Bhasma* (incinerate form of

iron-Fe₂O₃), the main component is the activator of the formulation and is the chief responsible component for the pharmacodynamics of *Punarnava mandura*. By virtue of *Rasa* and *Guna* it pacifies aggravated *Pitta* and maintains the normalcy, improves the digestion and metabolism. As *Gomutra* (Cow's urine) is one ingredient of *Punarnava mandura*, it works as *Rasayana* by its antioxidant property. Presence of erythropoietin hormone in Cow's urine may be one of the reasons why *Gomutra* is useful in anemia. Iron present in Cow's urine maintains balance and helps in production of red blood cells and Hb.^[10]

Buttermilk used as Anupana (vehicle) has Dipana-Pachana (carminative and digestive), Pandughna ^[11] properties and rich source of minerals and Vitamin B12.^[12]

- **AMLYCURE DS-** It constitutes of *Bhringraj*, *Ashwagandha*, *Amla*, *Arjuna*, *Baheda*, *Daruharidra*, *Chitrak*, *Punarnava*, *Haritaki*, *Guduchi*, *Yavakshar*, *Ajwain*, *Manjistha*, *Kalmegh* and *Tulsi*. *Kalmegh* is effective in managing digestive problems like loss of appetite. It helps to improve the digestive fire as well as liver functions due to its *Ushna* (hot) nature. *Bhringraj* used as a liver tonic and help with liver cell generation. It improves digestion and appetite, works as a liver protective and supportive in hepatitis, alcoholic or non-alcoholic fatty liver & helps to restore the liver functioning by providing multidimensional approach by showing anti-viral, anti-oxidant, anti-inflammatory, immuno-modulator, choleric and anti-cholestatic activity.

Conclusion

It has been concluded that *Pandu Roga* is multifactorial disease and proper *Nidana-Parivarjan* and *chikitsa* can lead to cure of *vyadhi*. *Chikitsa sutra* (treatment principles) and *chikitsa (dravya bhuta chikitsa)* mentioned in classical literature are helpful in managing such diseases. Herbo-mineral drugs has proved to be quite effective in the treatment of *Pandu Roga*. The drugs effectively reduced the signs and symptoms of *Pandu Roga* as well as provided highly significant results in haematological parameters without involving undesirable side effects.

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