

Management of Pandu (Anaemia) with Unique Combination of Ayurvedic Herbs - A Case Study

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Abstract: The disease of Pandu is explained in all ayurvedic classics with its etiopathogenesis and treatment. It is seen that nutritional deficiency is the major etiological factor of Pandu disease. pandu is described in Ayurveda as anaemia. Ayurvedic medicine is oriented toward prevention, health maintenance and treatment of diseases. There is large number of drugs of herbal and mineral origin mentioned in Ayurvedic texts, regarding the treatment of Pandu. The present case study is successful Ayurvedic management of a case of Pandu (anaemia). A 12 year old male patient came to us with chief complaint of Pandutwaknetranakha, (paleness at skin, eyes, nails) Kshudhamandya (loss of appetite) Rukshata (dryness) Shramajanyashwas (difficulty in breathing) Hrutspandan Akshikotashoth (swelling over limbs) Shrama, Dourblya (generalised weakness) since 3 months, which get regression of symptoms within 21 days of Ayurveda treatment only.

Keywords: Pandu, Ayurvedic herbs, Effective therapy.

1. Introduction

Anaemia is described in Ayurveda as Pandu. There are five types of Pandu are described in Ayurveda ⁽¹⁾. Vataj, pittaj, kaphaj, sannipataj, and mruddhakshajanya. "pandastu-pitgabhartha-ketaki-dhulisannibha:" is unique identity of pandurog. That means in panduvyadi appearance like the colour of pollen grains of ketaki flower which is whitish yellow. From 1993 to 2005, the global prevalence of anemia was 47.4% among children less than 5 years of age, and 46-66% in developing countries ^[2, 3]. Anemia during childhood has short-and long-term effects on health. The main causes of pandu are lack of exercise and improper food habits in excess food intake which falls in the category of Gramya-Ahar, kshar, Ushna, amla, lawan, Snigdha, virudhaahar and extra exercise are the primal cause of this disease-panipuri, bhel, vada-pav are good example. Those types of food are responsible for pittadushti causes agnimandya are the etiological factors for pandu.

2. Case Report

The present case study is successful Ayurvedic management of a case of pandu. A 12 year old male patient came to our OPD with chief complaint of -

History of personal illness:

The patient was normal 6 month back. Since then patient has been suffering from Pandutwaknetranakha, (paleness at skin, eyes, nails) Kshudhamandya (loss of appetite) Rukshata (dryness) Shramajanya shwas (difficulty in breathing) Hrutspandan Akshikotashoth (swelling over limbs) Shrama, Dourblya (generalised weakness) patient shows above complaints. To overcome this, he came to our hospital.

Past History: No any significant to present condition

Astavidha Pariksha:

- Nadi (pulse) = 84/min.
- Mala (stool) = Vibandha
- Mutra (urine) = 4-5 times in a day
- Jeeva (tongue) = Eshathasaam.
- Agni = Kshudhamandya.
- Shabda (speech) = Normal.
- Druka (eyes) = Drushti-Mandya.
- Akriti = krush.
- Bala = heena.
- Weight = 32kg

3. Materials and Methods

Methods

- Centre of study:-OPD & IPD attached to our hospital
- Method of sampling: Simple randomized
- Study design: experimental clinical single case study.

Table 1: Showing symptoms of patient

S. No	Chief Complaints	Durations
1	Pandutwaknetranakha	1-2 months
2	Kshudhamandya	1-2 months
3	Rukshata	1 months
4	Shramajanyashwas	1 months
5	Hrutspandan	1 months
6	Akshikotashoth	1 month
7	Shrama	1 month
8	Dourblya	1 month

Criteria for Assessment

Subjective criteria:

Symptom	Absent (0)	Mild (1) (+)	Moderate (2) (++)	Severe (3) (+++)
<i>Pandutatwaknetranakha</i>	Absent	Pallor of conjunctiva and mucous membrane	Pallor of conjunctiva and mucous membrane plus skin	Pallor of conjunctiva and mucous membrane skin plus palmer creases
<i>Kshudhamandya</i>	Absent	Loss of appetite	Loss of appetite plus nausea	Loss of appetite with nausea plus local tenderness
<i>Rukshata</i>	Absent	Not seen but felt by touch	Stretching of skin that person feel	Visible dryness
<i>Shramajanyashwas</i>	No dyspnea	dyspnea produce more than average activity	Dyspnea produce by ordinary activity walking	Dyspnea produce with less physical activity
<i>Hrutspandan</i>	Absent	Mild (occasional)	Moderate (on light exertion)	Severe (at rest)
<i>Akshikotashoth</i>	Absent	Mild	Moderate, Reducible	Severe, Non-reducible
<i>Shrama</i>	Sit up in 5 min	More than 20 min	21 to 30 min	More than 30 min
<i>Dourblya</i>	Absent	Tired with average activity	Tired with ordinary activity	Tired with less physical activity

Objective criteria:-

Hb% will be the important criteria.

Objective parameter: Hb%

- Normal (12 - 16 gm%) : 0
- Mild (above 9 gm%) : 1 (+)
- Moderate (6 - 9 gm%) : 2 (++)
- Severe (below 6 gm%) : 3 (+++)

Materials:

Table 2: Showing material used in study

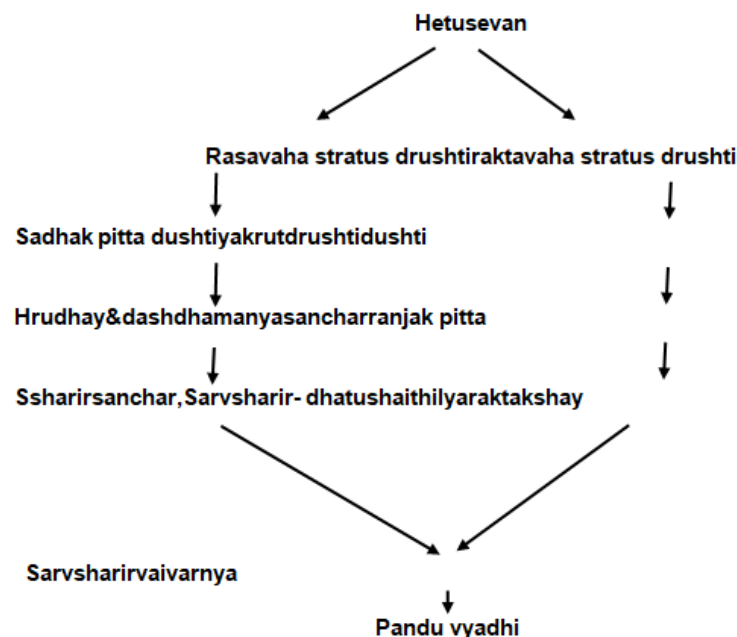
C SR. NO.	Dravya	Dose	Duration	Anupana
1	tapyadiloha	125mg	BD	ghruit
2	Syp. lohasava	1tsp	BD	Luke warm water
3	GuduchiSatwa	500mg	BD	Luke warm water
4	Pachakvati	250 mg	1 BD	luck warm water
5	Gandharvharitaki	500	At night	luck warm water

Chart 2: Showing Panchkarma

Panchkarma	
1) Abhyantarsnehpan with Go-ghrit	1 tsp with Luke warm water at morning

Samprapti (Pathogenesis) (6)

Hetusevan



4. Discussion

Hetu seven

- 1) **AaharajaHetu** ⁽⁴⁾: Aahar is one of trayopstmbha, so it is one of the chief responsible factors in the production of the pandu. Viruddha Ahara (incompatible or antagonistic diet), asatmya, kshar, amla, lawan, ati-ushnaaharsevanetc. (4) in the given case patient dite consist of panipuri, bhel, pavbhaji, and oily food in excess quantity.
- 2) **ViharajaHetu** ⁽⁵⁾: ViharajaHetu also play an important role in the production of Pandu. Diwasap, , Vega Vidharana, adhikvyayam (heavy exertion) etc. are the viharajhetu responsible for the diseases, given in the case in this case patient plays games on mobile night and day.
- 3) **Mansikhetu** - little bit angry at sometime

- **Dosha** : Tridosha with dominance of Pitta
- **Dushya** : All Dhatus including Oja
- **Srtotas** : Rasavaha, Raktavaha
- **Srtotodushhti** : Sang, Vimargagaman
- **Udabhavsthan** : Hridaya
- **Sanchara** : Whole body (Rasayani)
- **Vyakti sthan** : Tvak
- **Rogamarga** : Bahyarogmarga

Sampraptibhanga:

In line of treatment we think about Aampachn, dipan, tridoshashamana and shodhanchikitsa. Action of all individual drug mentioned in following.

Table 5: Showing Sampartibahaga

S. N.	Dravya	Action
1	Lohabhasma ⁽⁷⁾	Virshya, balya, guru
2	Draksha ⁽⁸⁾	Vrushya, bruhniya, vatpittahar
3	Citraka ⁽⁹⁾	shothahara, Dipana, Grahi, Pachana, Kaphavatahara
4.	Guduchi ⁽¹⁰⁾	Rasayani, vayasta, jwaragni, vatpittahar
5.	Shunti ⁽¹¹⁾	Ushna, katu, kaphagna, dipaniya, pachaniya
6.	Amalaki ⁽¹²⁾	Pittaghana, vataghna, Rasayana, Agniyadi & Amapachan.
7.	Haritaki ⁽¹³⁾	Anulomak, medhya, rasayana, swas-kas-pramehahar
8.	Pachakvati	Amadosanasaka & Agni vardhaka

5. Observation & Result

Results observed after the treatment, Improvement in signs and symptoms of the patient starting at the end of 7th days. Relief was found in *Pandutatwaknetranakha*, *Kshudhamandya*, *Rukshata*, etc at the end of 21th days.

Table 6: Showing revealed regression of symptoms
Subjective symptoms

S. no.	Symptom	1 st day	7 th day	14 th day	21 th day
1	<i>Pandutatwaknetranakha</i>	++	++	+	0
2	<i>Kshudhamandya</i>	++	+	+	0
3	<i>Rukshata</i>	++	+	+	0
4	<i>Shramajanyashwas</i>	+	+	0	0
5	<i>Hrutspondan</i>	+	+	0	0
6	<i>Akshikotashoth</i>	+	+	0	0
7	<i>Shrama</i>	+	+	+	0
8	<i>Dourblya</i>	+	+	0	0

Objective symptoms

Sr. no.	Symptom	1 st day	7 th day	14 th day	21 th day
1	Hb	++	++	+	0

6. Conclusion

Patient have signs and symptoms of Pandu for 3 months after giving ayurvedic treatment regression of symptoms within 21 days of Ayurveda treatment only. So here it concludes that, Ayurvedic management of Pandu can be effective therapy in both subjective and objective parameter.

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