

Literature Review on Pandu in Ayurveda

Dr. Sindia Desai¹ and Dr. Basil Cardozo²

PG Scholar Kayachikitsa, 3rd Year¹

MD. (AYU.), HOD & Professor, Dept. of Kayachikitsa²

Gomantak Ayurved Mahavidhyalay and Research Centre, Shiroda, Goa

Abstract: *Nutritional iron deficiency anaemia is the nearest clinical entities for the Pandu Roga. It is considered as silent killer of the society. The World Health Organization has identified Nutritional iron deficiency anaemia, as the leading cause of malabsorption, intestinal disorders and recognized that more than 50% of the anaemic population worldwide are unaware of their condition. Panduroga was a disease of major concern though out the history. It is a multi- factorial disease involving multiple facets, different Srotas, Dhatus and Ojas. According to Sushruta Samhita, Ati Vyayama, Madhya and Divaswapna aggravate Vata, Pitta and Kapha Doshas respectively this vitiate Rakta Dhatu and produce Panduta in the body. Iron deficiency anaemia is the most common nutritional disorder prevalent all over the world. Iron deficiency can arise either due to inadequate intake or poor availability of dietary iron or due to excessive loss of iron from the body. This disease can cause reduced work capacity in adults and impact motor and mental development in children and adolescents. There is some evidence that iron deficiency anemia affects cognition in adolescent girls and cause fatigue in adult women.*

Keywords: *Pandu, Iron deficiency anaemia, Literature review*

I. INTRODUCTION

It is generally seen that character of an object is proportionate to the intensity of its colour, the more the intensity of the colour the stronger the character or in other words healthy skin colour is an integral part of robust health. They are closely linked like flower and fragrance.

Acharya Kashyapa considered 'Varnalabha' as one of the sign of health and 'Vivarnata' as a disease condition¹. *Chandrata*, in his commentary of *Chikitsa Kalika* explains 15 *Lakshanas* for the assessment of *Swastha* and 'Varnavan' is one among this *Panchadasha Lakshanas*².

Panduroga has several causes such as unwholesome food (too hot, sour, salty or caustic articles, large quantities of oil cake or sesame oil), unsound habits such as day sleep, physical activity and sexual intercourse when a meal is being digested, erroneously conducted evacuative therapy, imperfect adjustment to seasons and the suppression of natural urges. This sets the stage for perturbation of *Tridoshas* with dominance for *Pitta*. *Pitta* is expelled from its natural abode, driven to *Hridaya* and disseminated through the *Dasa Dhamanis* throughout the body by perturbed *Vata*. Lodged between the layers of *Tvak* and *Mamsa*, *Pitta* along with *Kapha* and *Vata* vitiates *Rakta*, *Tvak* and *Mamsa* to produce *Panduvarnata* in the skin. As it progresses other *Lakshanas* appears such as *Pindikodweshtana*, *Shwasa*, *Agnisada*, *Dourbalya*, *Aruchi*, *Gourava*, *Hridrava* and *Shirashoola*³.

Iron deficiency anemia (IDA) is the most common nutritional disorder prevalent all over the world with an estimated 4.5 billion people effected accounting for 60-80% of the world population with 9 out of 10 sufferers living in the developing countries. This compelled the W.H.O to declare it as a world health problem. The high incidence of iron deficiency anemia has a direct influence on productivity of the whole nation by 20% since it reduces the working capacity of the populace.



II. METHODOLOGY

Review on Pandu –

Vyutapatti of Pandu –

‘Pandū’ is ‘pum – linga’ word derived from Dhatu ‘पङ्क्ति गतौ’ which means *Gati*⁴. It indicates formation of *rasa raktadi dhatu* from *Aahara rasa*.

Nirukti of Pandu –

Ayurvedic classics has the diseases are named according to *Prakruti, Linga, Adhishthana, Aayatana*, etc⁵. *Panduroga* is named according to its *Pratyatmika Lakshana Pandutwa*, where *Pandutwa* indicates ‘*Vivarnata* or change in normal colour of body.

Paryaya⁶ of Pandu –

Kamala, Apanaki, Panduroga, Kumbhavhay, Laghavaka, Alasak, or Alasakhya.

Nidana Panchaka –

Nidana of Pandu –

The *Nidana* of *Panduroga* mentioned by different *Aacharya* can be categorised under following headings ;

A] Aaharaja Nidana –

Excessive intake of *Kshara, Amla, Lavana, Ushna, Viruddha, Asatamya, Vidagdhanha, Nishpava, Pinyaka, Tila taila, Madhya, Mrittika sevana*.

B] Viharaja Nidana –

Vyavaya, Diwaswapana, Vegadharana, Vyayama, Ritu vaishamya, Kama, Chinta, Bhaya, Krodha, Shoka.

C] Nidanarthakara Roga –

Raktapitta Upadrava, Punarvartaka Jwara, Kaphaja Arsha, Arshas Poorvarupa, Kaphaja Yonivyapada, Shukra Kshaya, Pakvashayagata Visha Lakshana, Rasapradoshaja Vikara, Pittaja Prameha Upadrava, Raktarbuda, Raktapradara.

Poorvarupa –

According to *Acharya Sushruta* fourth *Kriyakala* i.e. *Sthanasamshraya* stage is the stage of *Purvarupa* of the *Vyadhi*⁷. *Vangasena* has described *Pipasa, Hrillasa, Urodaha, Anga Gaurava, Rakta Lochana* as *Purvarupas*⁸.

Table no. 1 – Showing Poorvarupas according to various Acharya’s

Sr. No.	Poorvarupas	C.S.	S.S.	A.H.	A.S.	M.N.	B.P.	H.S.	Y.R.
1	Hrida-spandanadhikya	+	-	+	-	-	-	-	-
2	Shareera Panduta	-	-	+	-	-	-	+	-
3	Mootra Pitata	-	+	+	+	+	+	+	+
4	Vita Pitata	-	+	-	-	+	+	+	+
5	Mruda Bhakshna iccha	-	+	-	-	+	+	+	+
6	Prekshana Kuta Shotha	-	+	-	-	+	+	-	+
7	Roukshya	+	-	+	+	+	-	-	-
8	Swedabhava	+	-	+	+	+	-	-	-
9	Shrama	+	-	+	+	+	-	-	-
10	Twaka Sphotana	-	+	-	-	+	+	+	+
11	Sthivana	-	+	-	-	+	+	+	+
12	Aruchi	-	-	+	+	-	-	-	+
13	Avipaka	-	+	-	-	+	+	-	-
14	Alpavahni	-	-	+	+	-	-	-	-
15	Gatrasada	-	+	-	-	+	+	+	+



Roopa –

In *Pandu Roga*, as mentioned before *Pandubhava* is invariable feature. Though *Charaka* and *Vagbhata* have described the *Samanya Rupas* of *Pandu* also while *Acharya Sushruta*, *Madhava*, *Bhavprakash*, *Yoga Ratnakara* have not mentioned *Samanya Rupa* of *Panduroga*. They have mentioned *Vishesha Rupa* or *Lakshana* of *Panduroga*. The *lakshanas* may be categorized as ;

Pratyatma Lakshana

Samanya Lakshana

Vishista Lakshana – according to *doshas*.

Pratyatma Lakshana –

The name of disease *Pandu Roga* indicates *Pandu Varnata* in the *Shareera*. It is the *Pratyatma Lakshana* of *Pandu Roga*.

2] Samanya Lakshana –

Table no. 2 – Showing Samanya Roopa of Pandu

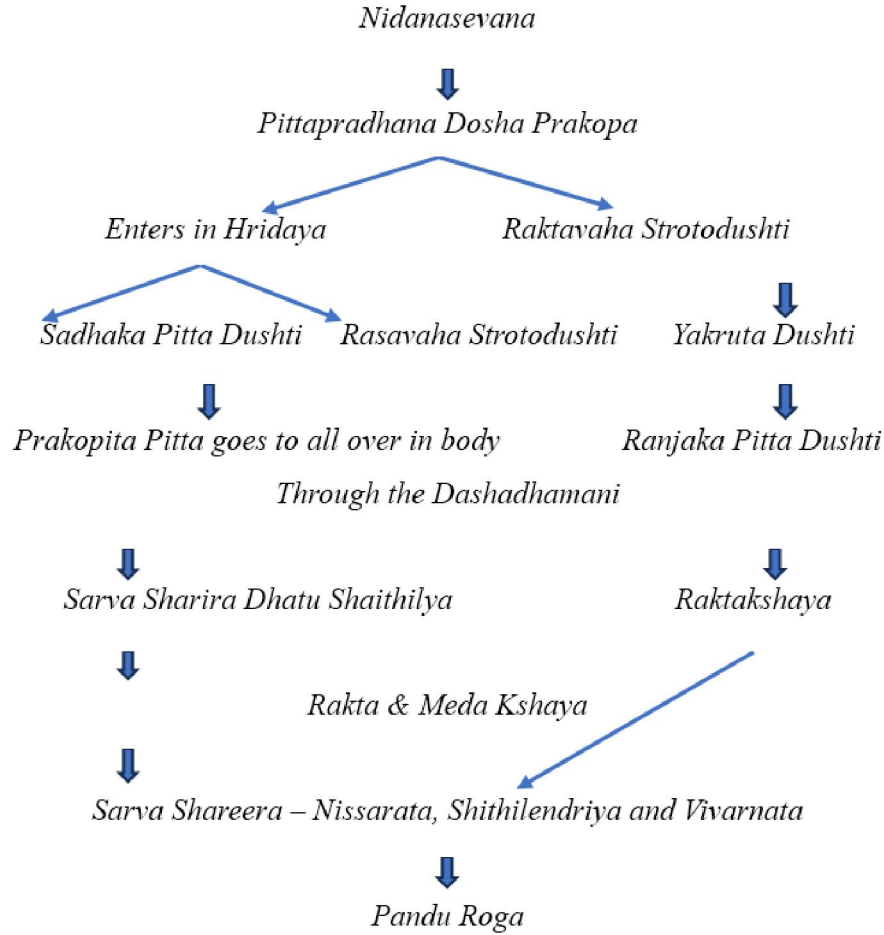
Sr. No.	Lakshana	C.S.	A.H.	A.S.
1	<i>Karna Kshweda</i>	+	+	+
2	<i>Daurbalya</i>	+	+	+
3	<i>Sadana</i>	+	+	+
4	<i>Shoonakshikuta</i>	+	+	+
5	<i>Bhrama</i>	+	+	+
6	<i>Annadwesa</i>	+	+	+
7	<i>Jwara</i>	+	+	+
8	<i>Gaurava</i>	+	+	+
9	<i>Aruchi</i>	+	-	-
10	<i>Gatronmathana</i>	+	+	+
11	<i>Hareeta varna</i>	+	-	-
12	<i>Sheerna Lomata</i>	+	+	+
13	<i>Hata Prabha</i>	+	+	+
14	<i>Kshthivana</i>	+	+	+
15	<i>Alpavaka</i>	+	+	+
16	<i>Kopa</i>	+	+	+
17	<i>Shishiradwesa</i>	+	+	+
18	<i>Dhatu Shaithilyata</i>	+	+	+
19	<i>Ojoguna Kshaya</i>	+	+	+

Bheda of Pandu –

Various types of *pandu roga* are explained in our *Samhita Granthas* and *Sangraha Granthas*. *Vataja*, *Pittaja*, *Kaphaja*, *Sannipataja* and *Mrudbhakshanjanya*.



Samprapti –
 Chart no. 1 –



Upadrava –

The description of *Panduroga upadravas* will not found in *Charaka*. *Vagbhata* mentioned *Shopha* as main *upadrava* of *Pandu*. But *Sushruta* has mentioned number of *upadravas* as follows ; *Hridayapeedanam Swasa, Atisara, Kasa, Shoola, Swarabheda, Swarasada, Moorcha, Pipasa, Jwara, Abalatwa, Daaha, Aruchi, Agnisada, Shopha, Chardi, Klama, Avipaka*⁹.

Chikitsa of Pandu Roga –

The important features of treatment of *Pandu* are ;

Nidana Parivarjana

Doshika Chikitsa

Vishista Chikitsa

Lakshnika Chikitsa

Pathyapathya



A] Nidana Parivarjana –

To remove the cause of disease e.x. avoidance of such sour, salty food which causes Pandu. Pandu which is caused by taking clay can be avoided by preventing clay ingestion by patient.

B] Doshika Chikitsa –

Vataja Pandu - Principle of treatment is to give *Sneha Pradhan Chikitsa* e.g., *Kalyanaka Ghrita*¹⁰.
Pittaja Pandu - *Tikta rasa, sheeta virya* substances are given e.g., *Dhatri avaleha*¹¹.
Kaphaja Pandu - *Katu-tikta rasa dravyas, Panchgavya ghrita*¹².
Tridoshaj Pandu - *Tridosha sthamak chikitsa, Pathya ghrita*¹³.
Mritikabhakshanjanya Pandu - *Shodhana Chikitsa*¹⁴.

C] Vishesa Chikitsa –

Iron therapy – *Loha bhasma*
Mandura Vataka
Navayasa Loha
Punarnava Mandura

D] Lakshanika Chikitsa –

Shopha (edema) - *Punarnava Mandura*
Daha (burning in palm, sole and body) – *Dhatri avaleha*
Krimi (worms) – *Vidangadi Loha*

E] Pathya-Apathya –

1] Pathya¹⁵ –

Aahara – *Purana Yava, Purana Godhuma, Jeerna Shali, Masura, Jangalmamsa, Matshya, Patola, Jeevanti, Guduchi, Punarnava, Dronapushpi, Tanduliya, Lasuna, Palandu, Vriddha Kushmanda, Taruna Kadali, Amalaki, Pakwa, Amra, Ikshurasa, Takra, Ghrita and Navaneeta. Karma* – *Abhyanga*.

2] Apathya –

Aahara - *kshara, amla, Lavana, Katu, Viruddha Bhojana, Asatmya Bhojana, Vidahi, Guru Bhojana, Dushta Jala, Masha, Kulatha, Tila Taila, Dadhi, Mastu.*
Vihara - *Atapa, Vahni, Sevana, Krodha, Maithuna.*
Karma - *Rakta Sruti, Dhoomapana, Swedan, Vamana, Vega Vidharana.*

II. DISCUSSION

Anemia is defined as hemoglobin concentration in blood below the lower limit of normal range for the age and sex of the individual. In adult, the lower extreme of the normal hemoglobin is taken as 13.0 gm/dl for males and 11.5 gm/dl for females. *Rakta* has been considered as a key factor for the Jeevana of the body; the pure blood helps in promotion of strength, complexion, happiness and longevity. Many times it is seen that *Rakta* gets vitiated by Doshas, mainly by *Pitta dosha* as *Rakta* is the *Asraya Dhatu* of *Pittadosha* and disease like *Pandu* appear. *Arunadatta* in his commentary on *Panduroga Nidana* explains how *Rakta Kshaya* occurs in *Pitta Vridhi*. *Vagbhata* and *Charaka* have mentioned the word '*Alparakta*' for this condition. *Harita* clearly indicated this decrease in the blood volume by using the term '*Rudhira Soshana*'.



III. CONCLUSION

Panduroga was a disease of major concern though out the history. It is a multi-factorial disease involving multiple facets, different *Srotas*, *Dhatus* and *Ojas*. According to *Sushruta Samhita*, *Ati Vyayama*, *Madhya* and *Divaswapna* aggravate *Vata*, *Pitta* and *Kapha Doshas* respectively this vitiate *Rakta Dhatu* and produce *Panduta* in the body leads to *Panduroga*. Iron deficiency anemia is the most common nutritional disorder prevalent all over the world. Iron deficiency can arise either due to inadequate intake or poor availability of dietary iron or due to excessive loss of iron from the body.

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