



ROLE OF GUDUCHYADI CHURNA AS AN INTERNAL INTERVENTION IN THE MANAGEMENT OF PANDU ROGA WITH SPECIAL REFERENCE TO ANAEMIA- A SINGLE CASE REPORT

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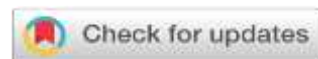
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ABSTRACT

Pandu roga is correlated with Anaemia in modern science and it has a global occurrence in all age groups. According to *Acharya Charaka*, *Panduroga* is considered as *Rasavahsrotogat vyadhi* caused by vitiation of *rasa agnimandya* thus causing improper *rakta* formation. A lot of iron compounds are available on the market for the treatment of the disease. But the focus of this case report is to find out the effect of an ayurvedic drug working on *rasavaha agnimandya*. In the present case study, *Guduchyadi churna* was administered for 45 days orally twice after meals with lukewarm water. Follow-up was taken on the 45th day. The result of the study indicates that the concept of using a drug working on *rasavah srotas* also works in improving the symptoms of *Pandu roga* apart from improving the Haemoglobin concentration.

Keywords: Anaemia, *Pandu roga*, *Guduchyadi churna*, *Charakasamhita*.

INTRODUCTION

Definition: According to WHO: “Anaemia is a Haematological condition in which serum haemoglobin level or haematocrit is less than expected for that age

and sex.¹” Reduced Haemoglobin level in adult men is considered <13g/dl and in adult women <12g/dl. Causes of anaemia: - Broadly it can be of the follow-

ing types- impaired RBC production, increased RBC destruction, blood loss, and fluid overload. Signs and symptoms of Anaemia- depend on the age of the patient and supply to vital organs. Some of the symptoms include-Fatigue, Loss of stamina, Breathlessness, Tachycardia particularly on exertion, Pale skin and mucous membranes, Forceful heartbeat, Strong peripheral pulse systolic flow murmur, Light palmer creases than surrounding skin when fingers are extended. According to WHO, 42% of children less than 5yrs of age and 40% of pregnant women worldwide suffer from anaemia. The prevalence rate in Southeast Asia counts to 14.9%¹. Symptoms mentioned in *Charaka samhita* are *alparakta* and *alpa-meda*, *Nihshara* and *ShithilaIndriye*. *Pandu roga* is a *pitta pradhan Tridoshajvyadhi* thus the main treatment mentioned in the *shastra* is *snigdha*, *tikshnavaman*, and *virechan*².

Case report-

Patient name- X

Age- 65years

Sex- Female

Address- Tiwasa. Yavatmal, Maharashtra

Chief complaints-

- *Panduta* for 2 years
- *Daurbalya* for 2 years
- *Pindikodweshthana* for 2 years
- *Aruchi* for 1 year
- *Bhrama* for 1 year
- *Shrama* for 1 year

Therapeutic intervention:

Table 01: showing intervention

Sr.No.	Dravya	Dose	Administration	Anupana
1	<i>Guduchyadi churna</i> ³	3 gm	Twice a day after meals	Lukewarm water

Table 02: shows contents of *Guduchyadi Churna*

Drug name	Latinname/ Family	Rasa	Guna	Virya	Vipaka	Karya	Prayojyaga -anga
<i>Guduchi</i>	<i>Tinospora cordifolia</i> (Menispermaceae)	<i>Tikta</i> <i>Kashaya</i>	<i>Guru</i> <i>snigdha</i>	<i>Ushna</i>	<i>Madhur</i>	<i>Tridosha-shamak</i>	<i>Kanda</i> (stem)
<i>Ativisha</i>	<i>Aconitum heterophyllum</i>	<i>Tikta</i> <i>Katu</i>	<i>Laghu</i> <i>ruksha</i>	<i>Ushna</i>	<i>Katu</i>	<i>Tridosha-shamak</i>	<i>Mula</i> (<i>Kand</i> / Root)

History of present illness- A patient named X of age 65years resident of Tiwasa, Yavatmal, visited *Kayachikitsa* OPD of L.K. Ayurvedic Hospital, Yavatmal on 5th April 2022 with above said complaints. The patient has not undergone any treatment for above said complaints with any doctor before.

History of Past illness-

- Medical history- no history of HTN, DM, Hypothyroidism, cardiovascular disease, or any other medical conditions found.
- Surgical history- not found.

Personal history-

- Diet- mixed, *Virudhahara sewan*
- Appetite- reduced
- Bowel habits- 1-2 times a day, regular, normal in consistency
- Micturition- 4 times a day, 2 times at night, colour- normal
- Sleep- *prabhuta*
- Addiction- tobacco for 10 years.

On examination- all vitals were normal.

Astavidhapariksha-

- *Nadi- pitta-kaphaj*
- *Mala- sama*
- *Mutra- samyak*
- *Jivha- sama*
- *Shabda- Spashta*
- *Sparsha- Anushnoshita*
- *Drika- pallor*
- *Akruti- krusha*

Investigation- CBC

	(Ranunculaceae)						
Shunthi	Zingiber officinale (Zingiberaceae)	Katu	Laghu snigdha	Ushna	Madhur (shunthi) Katu (adra)	Kapha- vatashamak	Kanda
Bhuniimba (Kirat-tikta)	Swertia chirata (Gentianaceae)	Tikta	Laghu ruksha	Ushna	Katu	Tridosha-shamak	Panchang
Yavatikta (kalamegha)	Andrographis pan- niculata (Acanthaceae)	Tikta	Laghu ruksha	Ushna	Katu	Kapha- vatashamak	Panchang
Musta (Nagar- motha)	Cyperus rotundus (Cyperaceae)	Tikta Katu Kashaya	Laghu ruksha	Sheeta	Katu	Kapha-pitta shamak	Kanda
Kada (pippali)	Piper longum (Piperaceae)	Katu	Laghu snigdha tikshna	An- unshna- sheeta	Madhur	Kapha- vatashamak	Phala Mula
Bhramar (champak)	Micheliachampaka (Magnoliaceae)	Tikta Katu Kashaya	Laghu ushna	Sheeta	Katu	Kapha- vatashamak	Twak Pushpa
Yavakshar	Potasiicarbonos (Impure carbonate of potash)		Laghu snigdha sukshma	Ushna		Kapha- vatashamak	Panchang
Kasisa	Ferrous Sulphate/ Green Vitriol FeSO ₄ .7H ₂ O	Amla Tikta Kashaya		Ushna		Vata-kaphashamak	Bhasma.

Results:

Table 03: showing objective parameters before and after treatment

Investigations	B.T.	A.T.
HB%	8.6gm%	10.1gm%
TRBC	4.73mil/cmm	5.17mil/cmm
TLC	7830/cmm	6340/cmm
DLC- Neutrophils	56%	50%
Lymphocytes	36%	42%
Eosinophils	04%	04%
Basophils	00%	00%
Monocytes	04%	04%
MCV	67.7fl	67.5fl
MCH	18.2pg	19.5pg
MCHC	26.8gm/dl	28.9gm/dl

DISCUSSION

Pandurogais a rasa-pradoshaj vyadhi according to *Acharya Charaka*. The pathogenesis indicates that there is the improper formation of *ahar ras* which in turn results in the improper formation of *rasa dhatu*. As each *dhatu* is a precursor in the formation of the

next *dhatu* thus it causes improper (reduced or low quality) formation of *rakta dhatu*. Thus, causing *Pandu roga*. In the present study, the patient was given the intervention *Guduchyadi churna* for 45 days with a diet chart of *Pandu roga*. Follow-up was taken on the 45th day at the end of the intervention. All the symptoms were notably reduced at the end of treat-

ment. Before treatment and after treatment CBC was done and the above values denote that there is a significant result in Haemoglobin level apart from other red cell indices. Probable mode of action of the drug as *Guduchyadi churna* contains *katu, tikta rasa* and *ushna virya dravya*, the action would be on *ama pachana* and proper formation of *rasa dhatu* from *ahar rasa*. This will ultimately lead to the proper formation of *uttarottar dhatu*. Some of the drugs work directly on the liver and spleen like *guduchi, yavatikta, musta, bhunimba* thereby improving digestion and helping in the proper absorption of iron in the gut. The drug also contains *Kasisa bhasma* which will further ensure that we are administering some amount of iron in daily dosage. There were some limitations with the study like the duration of administration of the drug was less. If it could be administered for a longer time it would give more results. Since this is a case report, only one patient was studied, with a positive outcome more populations can be included to judge the efficacy of *Guduchyadi churna* on *Pandu roga*.

CONCLUSION

Anaemia is a worldwide prevalent disease, and a lot of treatments are already known but to eradicate the illness we should focus on the root cause of the dis-

ease. In this case report we can clearly conclude that *Pandu roga* is curable with intervening with *Rasa dhatu gata agni*. This makes us hopeful for further research on the drug and its uses in larger population. Therefore, we can conclude positive outcome of *Guduchyadi churna* in treatment of *Pandu roga* in the present case report.

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