

EFFECT OF CHINCHADI LEHA IN PANDU - AN OBSERVATIONAL STUDY

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ABSTRACT

Pandu is a Rasa Pradoshaja Vikara in which Pandutwa is the main feature¹. Samanya roopa of Pandu include Raktalpatha, Alpa Medaska, Nissara, Shithilendriya and Vaivarya². Pandu is considered as anaemia. In modern prevalence around 30% of the total world population is anaemic and half of these, some 600 million people have iron deficiency³.

The present study was undertaken to evaluate the effect of Chinchadi Leha in Pandu Roga. 20 diagnosed case of Pandu in age group between 21-60 years were selected for the study. Chinchadi leha was given for 30 days at the dose of 6 gm once daily. Detailed research proforma was prepared to record the observation which were graded as per their severity. The results obtained after the clinical study were analysed statistically. Overall assessment of the therapy was done based on the significance of the statistical test values in subjective and objective parameters. The study revealed that Chinchadi Leha was effective in relieving the clinical features of Pandu.

Keyword: Pandu, Anaemia, Chinchadi leha, Takra.

INTRODUCTION

Pandu, is a *Varnopalakshitha Vyadhi* in which *Pandutwa* is the *Prathyatma Lakshana*. This disease characterized by *Alparaktata (Panduta)* of body, *Alpamedaska (Balahani)*, *Nissara (Ojokshaya)*, *Shithilindriya (Arohanayasa)*, which strikingly resembles with 'Anaemia' of modern science. *Pandu* occurs due to improper functioning of *Rasa* leading to malnourishment of body and deterioration of other *Dhatus* like *Rakta*, *Mamsa*, *Meda* etc. Basically *Pandu Roga* is *Pitta Pradha Tridoshaja Vyadhi* but according to *Dosha* predominance it is of *Vataja*, *Pitaja*, *Kaphaja* & *Sannipathaja*. *Mrudbhakshana* is a *visista vyadhi karana*, forms another variety of *Pandu Roga*.

Chinchadi Leha explained in *sahasrayoga* is said to be *Pandu Nashaka*. This study was conducted to evaluate the effect of *Chinchadi Leha* in patients suffering from *Pandu*.

Aims & Objectives of the study:

To evaluate the effect of *Chinchadi Leha* in *Pandu Roga*.

Materials and Methods

20 patients fulfilling the inclusion criteria were selected irrespective of sex, occupation, religion, economic status from OPD & IPD of Sri Kalabyraveswara swamy Ayurvedic Medical College, Hospital & Research Centre, Vijayanagar, Bangalore. Informed Consent (IC) was obtained from all patients enrolled for the study.

Diagnostic criteria:

- Patient suffering with lakshanas of pandu roga.
- Haemoglobin per-cent ≥ 7 to ≤ 12 g/dl.
- **Inclusion criteria:**
- Patients presenting with *Lakshanas of Pandu Roga*.
- Haemoglobin ≥ 7 to ≤ 12 gm %.
- Patient of either sex aged between 18-60 years
- **Exclusion criteria:**

- Pandu associated with any other systemic disorder interfering with the treatment.
- Pregnant and lactating women.

Criteria for assessment:

The assessment was done on the basis of changes in subjective and objective parameters (see Table No. 1) before and after treatment. The obtained results were analyzed statistically.

Table No.1 Subjective & objective parameters

Sl. No.	SUBJECTIVE PARAMETERS
1	<i>Panduta</i>
2	<i>Dourbalya</i>
3	<i>Shirashoola</i>
4	<i>Bhrama</i>
5	<i>Arohana ayasa</i>
6	<i>Pindikodwestana</i>
7	<i>Gatrashoola</i>
	OBJECTIVE PARAMETER
8	Heamoglobin percentage

Intervention:

The selected patients were administered *Chinchadi Leha* in the dose of 6 gms after breakfast with *Takra* as *Anupana* for a period of 30 days.

Drug review

Chinchadi Leha consists of *Purana Chinch* 5 *Pala*, *Purana Guda* 10 *Pala*, *Loha Bhasma* and *Mandoora Bhasma* 2 *Pala* each respectively, *Bilwa*, *Vidanga*, *Triphala*, *Triooushana*, *Trijata*, *Yasti*, *Rasna*, *Jathiphala* and *Jathidala*, *Chavya*, *Sweta Jeeraka* and *Krishna Jeeraka* each drug ½ *pala* respectively. It is indicated in *Pandu*, *Kamala*, *Trishna*, *Swasa Vigandya*, *Ajeerna*, *Jwara*, *Vatanulomana*.

Observation

Among 20 patients, 50% belonged to age group of 31-40 years, 40% were house wives, 65% had *Katu Rasa Pradhana Ahara*, 50% indulged in *Viruddhashana* and 65% had *Vishamashana*. 70% indulged in *Vegadharana* among which 50% patient had *Mootra Vegadharana*. 55% and 60% indulged in *Divaswapna* and *Ratri Jagarana* respectively. 90% had addiction to coffee/tea.

In the study it was observed that 20 (100%) patients were having *Alpa Rakta*, *Twak Panduta*, *Shweta Akshi*, *Dourbalya*, *Brama*, *Pindikodweshtana*, *Arohana Ayasa*, *Gatra Shola*, *Kopanatva*, *Shirashoola* & *Ojakshya*, 18 (90%) patients were having *Hrid Drava*, *Hata Prabha*, *shirna loma*, 17 (85%) *Shweta Nakha*, 15 (75%) patients were having *Hat-*

anala and Annadwasha, Anidra, 14 (70%) patients were having Dhatu Shithilatha, sadana and Tandra, 13 (65%) were having Kati, Uru, Pada Shoola, chanchalatva respectively 12 (60%) patients were having Shrama, Aruchi, 11 (55%) patients were having Shweta Vaktra and Karna Kshweda, 10 (50%) were having Shishiradweshi, 9

(45%) were having Alpa Medaska, Gourava, Vibanda, 8 (40%) Admana, Sup-tata, 6 (30%) were having Akshikoota Shophya, Shteevana, 4 (20%) were having Shithila Indriya, Jwara, Alpa Vak, 3 (15%) were having Atyartava and 2 (10%) were having Anartava.

Table No. 2 Effect of therapy.

PARAMETERS	MEAN (BT-AT)	SD (BT-AT)	SE(BT-AT)	T VALUE	P-VALUE	REMARK
<i>Panduta</i>	1.15	0.489	0.109	10.504	<0.001	HS
<i>Dourbalya</i>	1.3	0.470	0.105	12.359	<0.001	HS
<i>Shirashoola</i>	1.35	0.47697	0.1067	12.651	<0.001	HS
<i>Pindikodwestana</i>	1.25	0.433	0.096	12.903	<0.001	HS
<i>Bhrama</i>	1.1	0.435	0.097	11.280	<0.001	HS
<i>Arohana Ayasa</i>	1.2	0.509	0.114	10.519	<0.001	HS
<i>Gatrashoola</i>	1.6	0.663	0.148	10.782	<0.001	HS
<i>Haemoglobin percentage</i>	1.3	0.695	0.155	8.352	<0.001	HS

HS – Highly Significant

DISCUSSION

During the 30day study, it was observed that symptoms like *Gatra Shola* and *Dourbalya* got reduced within 2 weeks. The next symptom to respond was *Pindikodwestana*, *Shirashoola* within three weeks. The remaining symptoms reduced gradually by the end of treatment. A maximum of 2.7 % increase in heamoglobin was observed in the study.

Chinchadi Leha is *Tridoshashamaka*, *Ag-nivardhaka*, *Ruchya*, *Pandu Nashana*. Drugs like *Yasti*, *Hareetaki*, *Amalaki*, *Pippali*, *Vidanga* along with iron preparation is having *Rasayana* property. Drugs like *Maricha*, *Shunti*, *Jathi*, *Purana Chinch*, *Jeeraka*, *Bilwa*, *Pippali*, *Chavika*, *Vidanga* are having *Deepana* property improves *Agni* there by helping in *Abyavaharana Sakti* and *Jarana*

Sakti. *Purana Chinch* is *Madhura Rasa* and high potent in antioxidant activity and a good supplier of aminoacids-serine, beta-alaine, proline for better metabolic activity and also having *Shola Hara* property. Drugs used like *Tejopatra*, *Chinch*, *Chavika*, *Rasna*, *Ela*, *Jathiphala*, *Bilwa*, *Maricha*, *Pippali*, *Jeeraka*, *Shunti* are *Kaphavatahara*. and *Hareethaki*, *Amalaki*, *Yasti* are *Tridoshashamaka*. *Chinch* is having *Shola Prashamana* property. Most of the drugs are having *Raktavardhana* property. *Loha Bhasma* and *Mandoora Bhasma* are good source of iron.

Takra is *Tridoshashamaka*, *Ag-nideepana*, *Pachana* and *Vatahara*. *Takra* is also having *pandughna* & *srotoshodaka* property. It helps in proper absorption of *Aahara* as well as *Oushadha* and help in formation of *Rasadi Dhatu*. Buttermilk is rich in Vitamin C

and Calcium. Vitamin C increases the absorption of non-haem iron by two to three times. There is a dose-related effect; the more Vitamin C in a meal, the greater the iron absorption. *Chincha* is also a good supplement of vitamin C along with *Takra* will potentiate the effect of absorption of iron and helps in *Pandu Nashana*.

CONCLUSION

1. *Chinchadi Leha* in the dose of 6 gms once daily for a period of 30 days proved effective in relieving all symptoms of *Pandu*.
2. The overall effect of treatment has shown statistically highly significant i.e., p value <0.001 in all subjective and objective parameters.
3. The palatability and single dose was acceptable by patients which enhanced amenability by patients to the drug regimen.

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