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Management



Evalution of Mandura Bhasma with & without Triphala Churna in Management Of 'Panduroga'

* Dr.D.Anuradha **Dr. M.Srinivasulu

* Asst.Professor & H.O.D, Dr. BRKR Govt Ayurvedic College, Hyderabad-18

** Retd.Professor & H.O.D, Dr. BRKR Govt Ayurvedic College, Hyderabad-18

ABSTRACT

'Pandu' is the commonest disease irrespective of age, sex and religion. It is affected commonly in low socioeconomic people and children. It is more prevalent in women, pregnant in specific. As the prevalence of the disease is more comparatively research studies are needed to evaluate proper eradication procedures, with the help of Triphala churn and Mandura bhasma. Pandu can be correlated with Anemia the clinical study deals with the Management of Pandu roga using Mandura bhasma with Triphala Churna and without Triphala churn.

AIMS& OBJECTIVES:- All iron preparations are probably equally toxic per unit mass of soluble iron. They produce mild gastrointestinal disturbances characterized by colicky pain, nausea, vomiting, diarrhea or constipation & gastric distress of individuals. These disturbances can be minimized by adding Triphala churna which helps in metabolosm, relieves either constipation & diarrhea as well as it is carminative.

Various substances claimed to enhance the efficacy of iron are vit- C, cobalt, copper,zinc & magnesium . Vit – C may increase the iron absorption to achieve the best effect which is achieved by adding rich Vit – C. source emblica officinalis as part of Triphala.

Hence, this study has been under taken to prove the efficacy of this combination to interpret the results statistically

The Ayurvedic classics have mentioned a number of effective formulations for treatment of Pandu roga keeping in view the wider prevalence of the disease. To assess the effect of Triphala churna with Madhura bhasma. The present study "comparative study of Panduroga with Mandurabhasma with & without – Triphala Churna". Is carried out of forty selected patients from O.P. of APPRC-Hyd and divided them into two groups. PI group were treated with only mandura bhasma and PII group were treated with mandura bhasma and triphala churna.

Keywords : Panduroga, Triphala churn, Mandura bhasma, Anemia

INTRODUCTION:-

The Panduroga is included under the heading of "Varnopalakshita Roga" i.e. Varna pradhanya disease. It is known since ancient times. It can be compared to a state of Anemia in Modern system of Medicine, in which the hemoglobin concentration falls below the accepted normal range and the failure of hemoglobin synthesis. The disease Pandu is manifested due to the predominance of pitta in the pathogenesis of the disease, through vatadi tridoshas are vitiated in the samprapti.

The prepared medicine Mandura bhasma and Triphala churna are non- Controversial non- toxic, easily available and economical has been taken for study. Triphala has properties of Rasayana, Anuloamna, Ayushya, Sarvarogahara, Tridoshashamaks etc. the properties of Triphala helps in pacifying pitta dosha.

Mandoora bhasma has Raktavardaka Rasayana, Pandu & Shothahara, Varnyakara, and Ojovardhaka properties which by virtue of these gunas help in samprapti vighatans of pandu roga.

MATERIALS&METHODS

In this trial it was assigned to assess the effect of Mandura bhasma with & without Triphala churna in the management of Pandu roga as a comparative study.

The patients suffering from Pandu roga are selected randomly from the O.P. of (APPRC) Andhra Pradesh Pranayama Research Centre, Hyderabad – Dept. of AYUSH. All the patients were randomly divided into two groups, 20 patients in P1 & 20 patients in PII. Patients of P 1 group were treated with Mandura bhasma only and PII group were treated with mandura bhasma with Triphala churna. Total 18 patients in PI and 17 patients in PII group were completed full course of treatment. Total 5 patients were left against medical advice (2 from P1 & 3 form PII). All the observations were recorded in a special designed proforma incorporating all the signs & symptoms.

Inclusion criteria:-

- 1. Patients having signs & symptoms of 'Pandu' Anemia described as per Ayurvedic and Modern point of view.
- 2. Patients were incorporated in the study randomly irrespective of age, sex, religion and occupation, etc.

Exclusive criteria:-

- 1. Patients suffering from any debilitating diseases like Diabetes, T.B, etc.
- 2. Acute Renal disorders, Cardiac problems.
- 3. Congenital abnormality.
- 4. Leukemia's.
- 5. Any other Metastasis conditions of Anemia.

PARAMETER

The parameters that are used in assessing results can be divided into two categories.

1. Subjective parameters. 2) Objective parameters.

Subjective parameters:-

- 1. Relief of clinical signs & symptoms.
- 2. Appearance of Rakta Sara lakshanas.

Objective parameters:-

- 1. Complete blood picture.
- 2. Hemoglobin percentage.
- 3. Red blood cells count.
- 4. Erythrocyte sedimentation Rate.

ASSESSMENT CRITERIA:-

the effect of therapy was assessed and Categorized in terms of pravara, Madhyama and Avara.

DOSAGE & DURATION :- the patient of P1 group were advised to take 400mg/day in divided doses twice daily with honey for after principal meal for a duration of 2 months.

The patients of PII group were advised to take Mandura bhasma with Triphala churna 3.2 gms/twice daily after principal meal for the duration of 2 months.

Follow up :-

All patients were assessed for two months after completion of treatment at an interval of 15 days.

DISCUSSION :-

The gradual increase in Hb% levels is observed within first 15 days of treatment and it reaches to the maximum in two months of duration.

The results are assessed as pravara, Avara and Madhyama based on clinical picture and laboratory investigations. During the treatment period pathya – apathya should be followed.

Results of P1 group of 18 patients:-Table 1 Based on sex:-

SI.No	Sex	No of Cases	Percentage(%)
1	Male	6	31%
2	Female	10	50%
3	Children	2	20%

Based on sex :- 31% of adult meals,50% of adults females and 20% of children. Out of these 50% among males,58% among females and 52% among children got best results.

Table 2 Based on Age:-

SI.No	Age Gropup	Pravara	Madhyama	Avara	Total
1	0-10	0	2	0	2
2	11-20	-	-	-	-
3	21-30	2	2	1	5
4	31-40	1	2	2	5
5	41-50	0	2	2	4
6	51-60	0	1	1	2

Based on age :- The youngest being 10 years and the oldest being 55 years. Out of these 31-40 years group got best results followed by 21-30 & then 41-50 age groups.

Table 3 Based on diet:-

SI.No	Type of diet	Pra	Pravara		Madhyeme		ra
		М	F	М	F	М	F
1	Vegetarians (10)	0	2	1	3	2	2
2	Non- Vegetarians (8)	1	1	2	1	1	2

Based on diet :- Vegetarians are 63% , non vegetations are 27% out of these 40% of non vegetarians got better results & vegetarians 60% .

Table 4 Based on economic status:-

SI.No	Response	Ric	ch (4)	Middle Class (9)		Po	or (5)
		М	F	М	F	М	F
1	Pravara	0	1	1	2	1	1
2	Madhyama	1	1	2	1	1	1
3	Avara	0	1	2	1	0	1

Based on economic status:- 60% among rich, 68% among middleclass and 47% in poor showed best results.

Table 5 Based on signs & Symptoms:-

SI. No	Symptoms/ Signs.	No.of Cases	Pravara	Madhyama	Avara
1	Pandutwa	18	4	6	8
2	Swethenakha	17	7	7	3
3	Rookshanetra	15	5	4	6
4	Dourbalyata	18	5	4	6
5	Mandagni	18	6	7	5
6	Aruchi	10	2	4	4
7	Ashyavairsys	11	5	3	3
8	Angamarda	11	5	3	3
9	Pindikondweshta	6	2	3	1
10	Jwara	6	2	3	1
11	Swasa	2	-	1	1
12	Kasa	2	1	1	-
13	Shrama	1	-	1	-
14	Bhrama	1	-	-	1
15	Prabhaheenatws	18	9	5	4
16	Shotha	18	9	8	1
17	Sirahsoola	16	5	6	5

Based on symptoms:- out of 18 patients 6 showed complete relief and with partial 6 cases showed little response.

Table 6 Based on Hb level:-

Hb level	Male	Female	Total
Pravara	2	5	7
Madhyame	3	3	6
Avara	2	3	5

Table 7 Based on RBC levels:-

RBC level	Male	Female	Total
Pravara	2	4	6
Madhyame	2	6	8
Avara	2	2	4

Relief rate of P II group of 17 patients

Table 1 Based on Sex:-

SI. No	Sex.	Pravara	Madhyma	Avara
1	Male	3	2	1
2	Female	7	1	1
3	Children	2	0	0

Based on sex:- 30% of adult males,50% of adults females and 20% of children. Out of these 58.3% among males, 65% among females and 62.5% among children got best results.

Table 2 Based on Age:-

SI. No	Age Gropup	Pravara	Madhyama	Avara
1	11-20	1	-	-
2	21-30	2	1	1
3	31-40	-	-	-
4	41-50	6	2	0
5	51-60	3	1	-

Response based on age:- The youngest being 8years and the oldest has followed by 21-30 and then 41-50 age groups.

Based on age:- The youngest being 10 years and the oldest being 55 years. Out of these 31-40 years group got best results followed by 21-30 & then 41-50 age groups.

Table 3 Based on diet:-

SI. No	Type of diet	Pravara M		Ма	Madhyeme		Avara	
INO		М	F	М	F	М	F	
1	Vegetarians (8)	4	2	1	1	-	-	
2	Non- Vegetarians (9)	2	4	1	1	1	-	

Based on diet:- Vegetarians are 42.5% and non vegetarians are 57.5% out of these 65.2% of non vegetarians got better results and vegetarians 58.8%.

Table 4 Basic on Economic status:-

SI. No	Response	Rich (4)		Middle Class (9)		Poor (4)		Total
INO		М	F	М	F	М	F	
1	Pravara	1	1	2	3	1	1	9
2	Madhyama	1	1	1	2	1	1	7
3	Avara	-	-	-	1	-	-	1

Based on economic status:- 60% among rich, 68% among middleclass and 47% in poor showed best results.

Table 5 Based on signs & Symptoms:	Table 5	Based	on	signs	&	Sym	nptoms:
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SI. No	Symptoms/Signs.	No.of Cases	Pravara	Madhyama	Avara
1	Pandutwa	17	15	1	1
2	Swethenakha	16	16	-	-
3	Rookshanetra	12	7	3	2
4	Dourbalyata	17	12	3	2
5	Mandagni	17	15	2	-
6	Aruchi	15	13	1	1
7	Ashyavairsys	10	7	2	1
8	Angamarda	16	10	3	3
9	Pindikondweshta	7	5	1	1
10	Jwara	7	5	1	1
11	Swasa	2	2	-	-
12	Kasa	2	2	-	-
13	Shrama	10	5	3	2
14	Bhrama	8	4	2	2
15	Prabhaheenatws	16	15	1	-
16	Shotha	12	12	-	-
	Sirahsoola	13	10	2	1

Based on symptoms:- Out of 17 patients 9 patients showed best results with complete relief and 6 with partial relief and 2 cases showed little response towards treatment.

Table 6 Based on Hb level:-

Hb level	Male (7)	Female (10)	Total
Pravara	4	5	9
Madhyame	2	4	6
Avara	1	1	2

Based on Hb%:- The pravara increased from 0-15, Madhyama from 27.5% to 37.5% & avara decreased from 72.5% to 47.5%.

Table 7 Based on RBC levels:-

RBC level	Male (7)	Female (10)	Total
Pravara	3	6	9
Madhyame	3	2	5
Avara	1	2	3

Based on RBC levels:- Pravara group from 0-7.5% Madhyama group increased group decreased from 80% to 52.5%.

Pravara:- Hb level is 12-15 gms.

1. R.B.C count: 4.5 – 6 mill/cu.mm.

Hb% is below 10qms

Madhyama:- HB% – less than 12gm. & more than 10gm. R.B.C count is below 3.5 – 4.5

RBC count is below 3.5mil/Cu mm.

Avara:-

RESULTS & CONCLUSION :-

It is found that the drug is very effective in PII group in all age groups & sexes. The majority 62.5% of patients have shown very good response and got complete cure of the disease in PII group 25% have shown in P1 group 30% have shown moderate response on PII & 15% have in P1 group. 12.5% of the patients have shown little response in PII group where as 25% shown in P1 group of patients.

Both the drugs found to be very effective to treat the disease. The best results are shown in the PII group of patients as Mandura bhasma when consumed with Triphala churna relieves the constipation due to anulomans property of Triphals.

The increase in Hemoglobin levels is attributed to increased production of intrinsic factor (deepana & pachana) by Triphala & Mandura. This contributes to the increased up taken of lohamasin food and oushada. This increase in Hemoglobin level is mainly due to the Mandurabhasma which is present in the drug. This supports the concept of 'Samanyam Ekatwa Karanam as Hemoglobin contains iron as a component.

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