

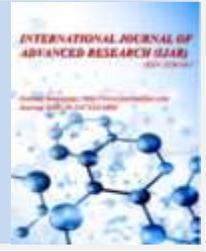


Journal Homepage: - www.journalijar.com

INTERNATIONAL JOURNAL OF ADVANCED RESEARCH (IJAR)

Article DOI: 10.21474/IJAR01/17304

DOI URL: <http://dx.doi.org/10.21474/IJAR01/17304>



RESEARCH ARTICLE

ASSESS THE EFFICACY OF NAVAYASA LOHA IN MANAGEMENT OF PITTAJ PANDU

Dr. Milind G. Rajguru

Assistant Professor Kayachikitsa Vasantdada Patil Ayurvedic Medical College Sangli (M.S.).

Manuscript Info

Manuscript History

Received: 29 May 2023

Final Accepted: 30 June 2023

Published: July 2023

Key words:-

Pandu, Anaemia, Navayase Loha

Abstract

Now a day Pandu is the common disease. Fast and mechanical life style, fast food habits and less nutritional vegetables because of used fertilizers and preservatives it occurs in higher and in middle economic classes and because of malnutrition Pandu occurs in poor classes. As per Ayurveda Pandu means fading of the original colour and is comparable with the description of modern disease Anaemia to large extent and it defined as when the percentage of haemoglobin in blood becomes low or count of RBCs gets decreased that condition is called Anaemia. Allopathic doctors prescribed iron contain medicine for anaemic patients and Ayurvedic samhitas also described iron for the treatment of Pandu. Many loha kalpas are prescribed under vyadhi Pandu and are effective for curing the disease. So the aim of this study was to assess the efficacy of Navayase loha in pandu.

Copy Right, IJAR, 2023.. All rights reserved.

Introduction:-

In CharakSamhita charakacharya described the symptoms Pandu as there is general laxity of the body. In other words the tone of the body is reduced. Therefore the person feels heaviness of the body. The radiance and deep colour of body is lost and its place is taken by pallor of the skin. There is loss of body fat, enthusiasm and muscular weakness is induced. The loss of body weight is noticeable. There is reduction of blood. The subcutaneous fat over the abdomen, back and other places are reduced considerably. The muscles of the extremities loose their power of working, so that the patient gets tired quickly and is unable to carry out the daily tasks¹. Pandu is comparable with the description of modern disease Anaemia to large extent and it defined as when the percentage of haemoglobin in blood becomes low or count of RBCs gets decreased that condition is called Anaemia².

There are many ayurvedic remedies described in Ayurvedic samhitas for the treatment of pandu. Navayase loha one of them and many vaidyas prescribed it for their patients to cure vyadhi pandu. So the aim of this study was to assess the efficacy of Navayase loha³ in management of pittaj pandu. For more specification only patients of pittaj pandu were taken in hand for study

Aim And Objective:-

To assess the efficacy of Navayasa loha in management of Pittaj pandu.

Corresponding Author:- Dr. Milind G. Rajguru

Address:- Assistant Professor Kayachikitsa Vasantdada Patil Ayurvedic Medical College Sangli (M.S.).

Materials And Methods:-

Source

Patients that fulfilling the sign and symptoms of Pandu were selected from OPD in kayachikitsa department at Vasantdada Patil Ayurvedic Medical College Sangli.

Inclusion criteria:

1. Patients suffering from disease Pandu in between 18 to 60 years of age.
2. Patients having pittaj Pandu lakshana.
3. No other symptoms like high grade fever, infection etc.
4. Gender was no bar for inclusion

Exclusion criteria:

1. Patients suffering from severe anaemia, thalacemia, sickle cell anaemia, anaemia due to malaria ,bleeding piles etc.
2. Other types of pandu i. e. vataj kaphaj, sannipatic, mruttikabhakshanajanya etc.
3. Communicable diseases like TB, HIV etc.
4. Patients suffering from haemorrhagic disorders like arsha,raktapitta,raktapradara
5. Patients having severe dehydration
6. Patients suffering from Prameha, Hridrogas.
7. Patients having HIV positive and cancer of any type.

Material used:

Raw materials of Navayase loha were purchased from Aushadhibhavan pharmacy Nashik.

Ingredients:

Haritaki	1part
Amalaki	1 part
Bibhitak	1 part
Shunti	1 part
Maricha	1 part
Pippali	1 part
Vidanga	1 part
Chirtak	1 part
Mustak	1 part
Lohabhasma	9 part

Mixed all the above ingredients properly with the help of mixer and made in to packets of one gram each.

Study Design:

70 patients were aimed for the enrolment in this study. Patient's selection was first come first served basis. Extra 5 patients were selected as waiting list in view of possible drop outs. Patients were selected and enrolled from the OPD of Kayachikitsa. Those were selected who fulfilled ayurvedic description of Pittaj Pandu. The selection of the patients was on random basis. In the beginning all the patients were made comfortable, the physical examination was carried out carefully and the findings were recorded. Seven Packets of one gram Navayasa loha powder were given to the patient and advised him/her to take one packet per day in two divided doses (i.e. 500 mg) with Goghrit, and after that dip 1/3 finger in honey and lick it. In this period patients were allowed to take normal routine diet but advised to avoid fermented, spicy .sour etc food which increase pitta dosha.

Every 7th day the patients accepted in this study were required to answer questions put to them regarding the parameters selected for the study and next week's Seven Packets of one gram Navayasa loha powder were given to the patient. Enquiry was made about the intolerance of the drug or any side effects. Pathyakara ahara was grossly advised without any drastic changes in their routine food intake.

Duration of treatment:

six weeks.

Assesment Criteria:

The symptoms of pittaj pandu lakshana was the assessment criteria for this study and those are jwara, trishna, tama, sweda, murcha, seetata, daurgandhya, katuvaktrata, varchabhada, amlodgara and daha⁴.

Table 1:- Method of grading the lakshana.

No	Lakshana	Range	Grade
1	Harit/. Pitavarna	Not seen/ complete relief	0
		Mild	1
		Moderate	2
		Marked	2
		Severe	4
2	Jwara	Not seen/ complete relief	0
		Occasionally occurs and get relief after 2 to 3 hrs	1
		Occurs daily once and gets relief after 6 hrs	2
		Constant all the day or night (up to 12 hrs)	3
		Constant 24 hrs	4
3	Tama	Nil	0
		Rarely tamodarshana for short period	1
		Rarely tamodarshana for small duration leads to bhrama	2
		Frequently tamodarshana for small duration leads to bhrama	3
		Frequently tamodarshana persist for longer during makes patients to sleep	4
4	Trishna	Normal feeling of thirst	0
		Frequent feeling but quench with sufficient liquid	1
		Frequent feeling but quench with increased amount	2
		Night awakening due to thirst	3
		Quench after heavy intake of liquid	4
5	Sweda	Normal sweating	0
		Profuse sweating on specific part on mild exertion	1
		Profuse sweating on all over the body on mild exertion	2
		Sweating during routine work	3
		Sweating at rest	4
6	Murcha	Not seen/ complete relief	0
		Rarely Bhrama for some movement during change of posture	1
		Often for some movement during change of posture	2
		Often for each movement even in lying condition	3
		Pt. unable to hold himself without any support	4
7	Sheetata	Abseny	0
		Intermittent	1
		Continuous but subsides with cold consumption for 3-4 hrs	2
		Continuous but does not subsides with cold consumption	3
		Dose not subside	4
8	Daurgandhya	Absence of bad smell/totally cure	0
		Occasional bad smell of the body removed after bath	1
		Persistent bad smell limited when close to patient	2
		Persistent bad smell left from long distance to patient	3
		Persistent bad smell left from long distance and even intolerable to patient himself too	4
9	Katuvaktrata	If there is negative answer after asking about the symptom	0
		If pt. is unable to tell about the symptom (yes/no) confidently	1
		If pt. is telling about the symptom (yes/no) confidently but after questioning.	2
		If pt. is telling about the symptom on his own but eat something in a day.	3
		If pt. is telling about the symptom on his own and eat something under duress	4
		No defecation	0
		One loose motion per day	1

10	Varchobhed	Two loose motion per day	2
		Three loose motion per day	3
		More than three loose motion per day	4
11	Amlodgara	No amlodgara at all	0
		Occasionally during the day	1
		Amlodgara of moderate severity but does not disturb daily routine of the patient	2
		Amlodgara disturb daily routine of the patient	3
		Severe amlodgara with regurgitation	4
12	Daha	NO daha at all/totally cure	0
		Daha of mild degree or in one region like netra padatala hasttala twak	1
		Daha of moderate degree or in two region like netra padatala hasttala twak	2
		Daha of marked degree or in more than two region like netra padatala hasttala twak	3
		Severe daha in all over the body or in more than three region like netra padatala hasttala twak	4

Observation And Result:-

Statistical Analysis:

Table 2:- Incidences of symptoms Analysis and Result of the Drug.

Lakshana	N	Severity of lakshana by Gradation										Wilcoxon Signed Rank(W)	P-Value	% Effect	Result
		BT					AT								
		0	1	2	3	4	0	1	2	3	4				
Harit/. Pitavarna	70	2	2	35	26	5	10	29	27	4	0	-7.499 ^a	0.00	44.1	Significant
Jwara	70	25	16	20	9	0	44	20	5	1	0	-6.051 ^a	0.00	60.2	Significant
Tama	70	44	11	11	4	0	56	10	4	0	0	-4.354 ^a		60.0	Significant
Trishna	70	27	2	33	8	0	34	30	6	0	0	-5.719 ^a	0.00	53.7	Significant
Sweda	70	34	5	29	2	0	42	25	3	0	0	-5.291 ^a	0.00	55.1	Significant
Murcha	70	42	9	17	1	1	56	11	2	1	0	-4.590 ^a	0.00	64.0	Significant
Sheetata	70	53	6	9	2	0	60	10	0	0	0	-4.562 ^a	0.00	73.3	Significant
Daugandhya	70	57	7	6	0	0	63	7	0	0	0	-3.690 ^a	0.00	54.8	Significant
Katuvaktrata	70	45	17	8	0	0	61	9	0	0	0	-4.584 ^a	0.00	73.6	Significant
Varchobhed	70	20	16	23	9	2	45	18	7	0	0	-5.956 ^a	0.00	67.0	Significant
Amlodgara	70	15	12	23	20	0	35	20	15	0	0	-6.658 ^a	0.00	57.6	Significant
Daha	70	41	6	21	2	0	50	18	2	0	0	-4.866 ^a	0.00	59.3	Significant

Since Observations are on ordinal scale (gradation), we have used Wilcoxon Signed Rank test to test the efficacy of navayasa loha in pittaj pandu and from above table we can observe that P-Values for all the symptoms are less than 0.05. Hence we conclude that effect observed in all the symptoms of pittaj pandu is significant.

Discussion:-

This study was carried out of 70 no of patients in Vasantdada Patil Ayurvedic Medical College Sangli in Kayachikitsa OPD. Maximum no of patients were found in age group 20 to 40 years i.e. 77.50%. Incidence of male was 20.00% and in female it was 80% of the cases. Religion wise distribution 71.8% patients were Hindu and 16.9% were Muslim. By occupation 41.42% patients were labourers, 24.76% were house wife, 11.42% were in business, 12.38% in education and 10% were in service. 68.50% patients were pure vegetarian while 31.50% patients were non vegetarian (mix). In agni wise distribution 9.9% pts were excess, 14.1% were good agni while agni of 36.6% pts was moderate and remaining 39.4% was poor agni by economic status 41.4% were from lower economic level 44.1% were from middle economic level while remaining 14.5% were from upper economic level

Probable mode of action of Drug

Considering vitiated Pitta dosha as leading factor in Pittaj Pandu, the contents haritaki, bibhitaka, amalaki and nagarmotha by virtue of its tikta rasa acts on sama pitta to carry out pachana karma and pacifies pitta.

Shunthi, pippali, bibhitaka, amalaki, and haritaki, also has madhura vipaka property which pacifies pitta.

Mustaka, vidanga, chitraka, shunthi, maricha and pippali having property of katu rasa and ushnavirya, pacify kapha and carry out amapachana.

Haritaki, amalaki and bibhitaka having kashayarasa, pacifies pitta and kapha dosha.

Haritaki, bibhitaka, vidanga, chitraka, shunthi, maricha and pippali are ushnaviryatmaka and it pacifies kapha and helps for amapachana.

Amalaki and nagarmotha are having property sheetavirya and it pacifies pitta.

In Navayasalooha majority of drugs have the deepanpachan property. These laghu, ruksha, tikshnaguna and katu rasa increase the jatharagni and dhatwagni to reach to normal level and dhatu nirman prakriya gets toned up which results in dhatu pushti and dhatu prasadana.

These ways dravyas act to pacify pitta and kapha, Amapachana, Sama pitta pachana, Dhatu poshana and breaks the chain of pathology.

Trimada acts on parasites residing in intestines and paralyse (prakruti vighata) them so it can be easily eradicated.

Triphala, pippali, shunthi and lohabhasma are the ones having rasayana property. With the administration of these rasayana dravyas, rakta dhatu gets adequate nourishment thereby increasing the quantity of raktadhatu.

Lohabhasma is kantivardhak, tridoshashamaka, shreshtha rasayana, pliha, agnimandyahara.

Lohabhasma itself is nutrient one which act by law of dravyasamanya karma as dhatuposhana which is useful for raktadhatuposhana. It reduces iron deficiency as well as enhances the quality of blood.

Due to Sheeta and tikta guna of lohabhasma, navayasalooha is more specifically applicable in PittajPandu prakara.

Amalaki is rich source of vitamin C and in the presence of vitamin C, iron absorption is promoted.

The gentle laxative effect of triphala prevents the adverse effect of constipation resulting from iron.

Anupana- Goghrit is a well-established pittashamak, agnideepaka, saptadhatuwardhak, ojavardhak. It is the best anupana in Pittaj Pandu so far and if given with madhu, drug acts faster due to its yogavahi guna.

Conclusion:-

Navayasa loha is useful for treatment of pittaj pandu. There is no any adverse effect so it is safe and effective .It is better alternative for iron contains medicine.

References:-

1. Charaksamhita Chikitsasthana adhaya16/4-6 Acharya Vidyddhar Shukla, Chaukhamba Bharti Academy, Varanasi 1996 Pg No 489
2. Overview of Anaemia,Merck Manual-Consumer Version-www.merckmanual.com
3. Bhaishjya ratnavali Vidyotini Kaviraj Shri AmbikadattaShastri Ayurvedacharya Chaukhamba sanskrit prakashana, Pancham sanskarana Varanasi Pancham Sanskarana 12/28 Pg No 269
4. Sarth waghbhat Dr. Ganesh Krishna Garde, Rajesh Prakashana Nidansthana 13/10 Pg No 201.