

WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.074

1034

Volume 7, Issue 06, 1034-1038.

Case Study

ISSN 2277-7105

A CASE STUDY- EFFECT OF NAVAYAS LAUHA AND LOHASAVA AFTER TEEKSHNA VIRECHANA IN MRITTIKA BHAKSHAN JANYA PANDU W.S.R. ANAEMIA

Dr. Sanjay Kumar Tripathi¹ and Dr. Ajay Kumar Pandey²*

¹Professor, PG Department of Kayachikitsa, Rishikul Campus, Uttrakhand Ayurved University, Haridwar, Uttarakhand.

²Associate Professor, Department of Shalakya Tantra, Gurukul Campus, Uttrakhand Ayurved University, Haridwar, Uttarakhand.

Article Received on 30 Jan. 2018,

Revised on 20 Feb. 2018, Accepted on 10 March 2018 DOI: 10.20959/wjpr20186-11516

*Corresponding Author Dr. Ajay Kumar Pandey

Associate Professor,
Department of shalakya
Tantra, Gurukul Campus,
Uttrakhand Ayurved
University, Haridwar,
Uttarakhand.

ABSTRACT

Pandu is a big problem in developing countries. It affects mostly child and females. Pandu may be co-related with anemia. The proper treatment of nutritional deficiency anemia is fully cured by Ayurvedic or modern treatment. The iron deficiency anemia caused by eating clay is not easily cured by modern treatment but it is easily cured by Ayurvedic treatment. A 10 year old boy suffering from Mrittika Bhakshan Janya Pandu (anemia) regd. no. KC-758/6365 dated 4.5.17 came in Rishikul Kayachikitsa OPD for treatment. He was given the Teekshna Virechan by Panchsakar churna after 3 days to Ghritapan (Snehan karma). Then he was given Navayas lauha and Lohasava after meal for 45 days. After completion of the treatment the patient got full relief and in follow up of 1 month he was normal.

KEYWORDS: Mrittika Bhakshan, Pandu, Virechan, anemia, shrotavrodha, haemoglobin.

INTRODUCTION

India is a progressive country having many disease related to nutritional deficiency. Anemia is one of the big problems in India. But some problems are specific where the patient taking proper diet and nutrition but it does not get good health. In this specific problem one is Mrittika Bhakshan Janya Pandu which is not defined in modern text. In this case the patient

Pandey et al.

especially child suffering from calcium deficiency got habit to eat clay. Pregnant ladies also get the habit to eating clay as their flavor attracts them.

MATERIALS AND METHODS

A 10 year old boy with regd no. KC-758/6365 on date 04.05.17 came in Kayachikitsa OPD of Rishikul Campus of Uttarakhand Ayurved University as he was suffering from severe anemia from long time with pale face, eyes, nail, anorexia, hard stool, constipation and weakness.

History of present illness: The patient was asymptomatic 5 years ago. He got habits of eating clay, rubber, clothes and nails. First he was suffering from dyspnoea on running, itching at anal opening, weakness, loss of appetite, and pain in abdomen. Medicine was taken from local doctor and symptoms of pain abdomen, itching at anal opening were relieved. At 5 to 6 months of intervals there were recurrences of problems and he got some relief by the treatment taken by local doctor and the time passed away. One year back the problem became severe and the patient got much anemia. Expert opinion of modern doctor was taken and he confirms that the oral iron absorption is improper. The patient was severe anemic at hemoglobin level 4.5gm% and blood transfusion was necessary. In last 1 year the patient got 2 times blood transfusion with iron injection of Inferon. After transfusion the patient's hemoglobin level raised and again it fell down. Then the patient came to the OPD of Rishikul Campus for Ayurvedic treatment.

History of past illness: There was no previous history of any other illness.

Treatment history: Patient has been taken iron tablets, wormicide tablets, inferon injection, and blood transfusion 2 times in last year.

Surgical history: No surgical history.

Family history: All family members have no history of any severe disease.

Personal history: B.P.- 110/70, pulse- 120/minute, urine- normal, tongue- pale, stool- hard, constipation, Sparsh- khar, Drika- samanya, Aakriti- durbal, Agni- mandagni, Shabda-samanya.

TREATMENTS GIVEN TO PATIENT: Deepan done by Trikatu churna for 2 days. Abhyantar snehan done by plane Goghrita (Patanjali) for 3 days in amount 3 tsf 1st day, 6 tsf 2nd day, 9 tsf on 3rd day. Next two days swedan was done. On 5th day night salted Dalia given to patient. 4gm Panchsakar churna mixed with 1 gm Lavanbhaskar churna was given to patient with warm water at 10 PM. From 4.00 AM to 10 A M 10 Virechan Vegas which was normal for 10 years child was happen. Samsarjan karma was advised to the patient according to rule for 2 days.

After meal Navayas lauha 125 mg with 10 ml of Lohasav mixed with equal quantity of water in morning and evening started. Normal diet chapatti, rice, vegetable, pulses were advised to patient.

OBSERVATIONS AND RESULTS: After every 15 days of drug administration assessment of Hb% was investigated by pathology lab.

Before Treatment	15 days after treatment	30 th day of treatment	45 th day of treatment
6.4gm%	7.1 gm%	9.3 gm%	11.6 gm%

DISCUSSION

The normal Hb% in male is 12.5 to 15.5 gm% and in female it is 11.5 to 14.5 gm%. The patient was eating clay from wall, chalk, rubber etc. Due to this habit the worm infestation occurs recurrently. According to Ayurveda due to clay eating the obstruction in Shrotas occurs. It means that the intestinal villies are not able to absorb the nutrients from the food. Due to no absorption of nutrients the patient got iron deficiency proceeds to iron deficiency anemia. Due to Shrotavrodha the patient taking iron from mouth does not absorbed from gut. Injectable iron gives result but it is painful to the patient and not the ultimate solution.

There are many sutras in the treatise of Ayurveda on which if we treat the patient the results are just a miracle. In cases of Mrittika Bhakshan Janya Pandu Acharya Charaka says that the patient should be given first Teekshna Virechan followed by Rasayan and it will give instant relief. The sutra is *Nipatayechchharirattu Mrittika Bhakshitam Bhishak, Yuktigya Sodhanai Teekshnai Prasamikshya Balabalam. Suddhakayasya Sarpishibaladhanani Yojayeta*.(charaka Chikitsa 16/117). It is clear that the patient having iron deficiency will get bala by Lauha Aushadhi (Iron). Acharya Charaka advised the use of Lauha and Mandur churna. At that time

the Lauha Bhashma had not been prepared and Lauha and Mandur churna was in use but in recent eras very fine and quality Lauha Bhashmas are available and we can use it.

Virechana clears all the Srotavrodha and constipation. The forceful Virechana works to proper wash and clean the intestine. Due to this wash obstruction of the intestinal villies removed and they become able to absorb the nutrients properly. Navayas Lauha is the rich source of iron. It contains Haritaka, Vibhitaka, Amalaka, Sunthi, Maricha, Pippali, Chitraka, Vidanga, Mustaka and Lauha Bhashma. Triphala is Rasayana. It destroys the Dhatu Daurbalya and constipation. It increases the function of intestine. Trikatu is Deepaniya, Pachaniya, and burn all the Aam (metabolic waste and Toxins) present in the intestine. Chitraka is an important Deepaniya Dravya. It destroys the Agnimandya which is an important cause of non absorption of nutrients. Mustaka is also an Aam Pachan Dravya. Vidang destroys the Krimi in the gut (antihelminthetic). Lauha Bhasma is Yogawahi. It absorbs easily and makes a suitable path for all other medicines. This all drugs make Navayas Lauha as a good medicine for MrittikaBbhakshan Janya Pandu. Lohasava is a good source of iron. It absorbs easily and irrespective of all modern medicine it also increases the appetite.

CONCLUSION

So we can see that according to Acharya Charaka sutra there is good result of Teekshana Virechan karma and Rakta Dhatu Balya Aushadhi (Navayas Lauha and Lohasava) in the management of Mrittika Bhakshan Janya Pandu. It has no complication for patient.

REFERENCES

- 1. Pt. Kashinath Shastri & Dr. G.N. Chaturvedi, Charaka Samhita, "Vidyotini" Purvardha/Part-1, HindiTika, Chapter Sadvirechanshatashritiya-adhyaya 4/8,13-14,16, Chaukhambha Bharti Academy, Varanasi, (India), Reprint-2005, Page- 61,68,68,83.
- 2. Charaka samhita with Chakrapani Tika -Editor Vd. Yadavji Trikamji Acharya Published by Coukhamba Orientalia, 1984.
- 3. Charaka samhita -Editor Kashinath Shastri and Dr. Gorakhanath Caturvedi Published by Coukhambha Bharti Academy, Varanasi.
- 4. Sushruta samhita-Editor Kaviraj Ambikadutta Shastri (2002) Published by Chaukhamba Sanskrit Samsthana.
- 5. Ashtanga Hridaya With Arundatta Tika- Editor Pandit Hari Paradkar Published by Chaukhamba publication (2002).
- 6. Ashtanga Sangraha-Editor Vd. Anant Damodar Athavale (2000).

- 7. Madhav Nidana With Madhukosha Tika-Editor Narendranath Shastri Motilal Banarasidas publication (1979).
- 8. Sharangadhara Samhita Chaukhamba Orientalia (2005).
- 9. Yogaratnakara-Editor Vd Laxmipati Shastri Published by Chaukhamba publication (2005)
- 10. Bhavaprakasha Nighantu -Editor Pandit Sri Visvanath Dvivedi Shastri.
- 11. Manual of practical medicine R.Alagappan 5th edition JP brothers medical publishers Pvt. Ltd. New Delhi.