

A CLINICAL CASE STUDY IN THE MANAGEMENT OF GARBHINI PANDU (IRON DEFICIENCY ANEMIA) THROUGH GUDADI MANDUR

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ABSTRACT

Garbhini pandu can be corelated with iron deficiency anemia in modern science. Garbhini pandu is commonly seen in pregnant women, basically pandu is the disease of rasavaha srotas. The clinical feature of garbhini pandu. acharya has describe eight garbhopadrav in harit samhita vivarnatvam is one of the garbhopadrav in which body become pallor which indicates anemia. As per acharya charak ras dhatu form from the aahar of pregnant women performs three function 1. Garbhini poshan 2. Garbh poshan 3. Stanyajanan and apara poshan in preganacy increase demand of fetus and in proper functioning of ras dhatu leads to garbhini pandu. during the second trimester of preganacy body needs extra iron for proper functioning and development of fetus. As adequate diet can not provide extra demand of iron. thus there always remains a physiological iron deficiency during pregnancy. There is a

various medical formulation for the treatment of pandu. One of the safe medical formulation is gudadi mandur. Which can be used for the treatment of garbhini pandu. Gudadi mandur can be given to the patient in dose of 500 mg bd orally. Thus the case garbhini pandu (iron deficiency anemia) was study diagnosed and treatment was given to patient.

KEYWORDS: Garbhini Pandu, Iron Deficiency Anaemia, Gudadi Mandur Etc.

INTRODUCTION

Iron deficiency anaemia (IDA) is the most prevalent nutritional disorder affecting pregnant women worldwide and remains a significant public health concern in India. The increased iron requirement during pregnancy for maternal haemoglobin expansion and fetal development often leads to deficiency when not adequately supplemented. IDA in pregnancy is associated with adverse maternal outcomes such as fatigue, increased susceptibility to infections, and postpartum complications, as well as fetal risks including low birth weight and preterm delivery. Despite national programs promoting iron and folic acid supplementation, its prevalence remains high, particularly in resource-limited settings.

From an Ayurvedic perspective, iron deficiency anaemia can be correlated with Pandu Roga, a condition characterized by pallor, weakness, and reduced vitality. It is primarily attributed to Rasa and Rakta Dhatu Kshaya (depletion of body tissues) and impaired Agni (digestive/metabolic fire), leading to inadequate nourishment of the body. Management in Ayurveda focuses on improving digestion, enhancing nutrient absorption, and restoring Dhatu balance through dietary modifications, herbal formulations, and lifestyle interventions. Considering the persistent burden and its impact on maternal and fetal health, this study aims to evaluate iron deficiency anaemia in pregnancy with an integrative approach, incorporating Ayurvedic perspectives.

CASE REPORT

Name : xyz

Age: 25yrs / female Residance: buldhana Maharashtra

History of present illness: an anc patient with a g2p111 with 20.1 weeks came with a complain of generalized weakness and fatigue aslo associated with loss of appetite.

History of past illness: no any other past illness Past surgical history: no any surgical history found.

Family history: no any family history found.

Personal history

Ashtavidh parikshan

Nadi : vatpittaj

Mal: ruksh-pitvarniya

Mutra: prakrut, 4-5 times a day

Jivha: sama

Sparsha: sheeta aani ruksh

Shabda: prakrut

Aakruti : madhyam

Drik: pandur

Aahar : pure vegetarian diet

Agni : mand

Kosht: krur

Nidra : alpa

General examination

General condition: moderate

Bp:100/70 mmhg

Pulse :88/min

Spo2 : 99%

Palor :present

Ecterus : absent

Cynosis : absent systemic examination:

Central nervous system

Well concious.

Well oriented with time, person and place

Reflexes are normal.

Cardiovascular system: S1 and s2 sounds are normal

Murmur: absent

Respiratory system:

Breathlessness present after walking

Bilaterally symmetrical

No abnormal sound present.

Samprapti ghataka

1. Dosha : pitta pradhan tridoshiya
2. Dushya : rasa, rakta, mamsa, meda, ojas
3. Agni : jathragni, rasagni, raktagni
4. Agnidusthi : madagni

5. Srotas : rasavaha, raktavaha
6. Srotodushti : sanga and vimarggaman
7. Udbhavsthan : sampoorn sharira by vyana vayu
8. Vyakt sthan : twaka, netra, nakha
9. Adhithana : sarv sharira.

Treatment plan

After diagnosis of iron deficiency anemia in pregnancy of a patient it was found that her hb is 9.1gm/dl, therefore gudadi mandur was given to her for 1 month drug contents.

Sr no	Drug	Latin name	Family	Guna	Ras A	Virya	Vipak	Karma
1	Nagar	Zingiberofficinale	Zingiberaceae	Laghu, snigdha	Katu	Ushn A	Madhur	Dipan, pachan, raktshodhak
2	Pippali	Piper-Longum	Piperaceae	Laghu, Snigdha, Tikshan	Katu	Anus Hnas Hita	Madhur	Dipan, Raktshodhak, Raktvardhak
3	Tila	Sesamum indicum	Pedaliaceae	Guru Snigdha	Mad Hur	Ushn A	Madhur	Agnivardhak, Balya, vrushya, Stanyjanan
4	Guda	--	--	Guru, tikshan	Mad Hur	Ushn A	Madhur	Vatanulomak, raktshodhak
5	Mandur bhasm	Iron	--	--	Tikt A, Kash Aya	Shita	Madhur	Agnidipan, Sarak, vrushya, Raktvardhak

OBSERVATION AND RESULT

Before treatment

TEST NAME	VALUE	UNIT
Heamoglobin	9.1	g/dl
Total Leucocyte count	7530	/cumm
Total RBC count	3.05	Millions/cumm
Haemtocrit	24.6	%
MCV	80.6	fL
MCH	23.6	pg
MCHC	28.9	Gm/dl
RDW	19.4	FI
DLC		
Neutrophil	79	%
Lymphocyte	15	%
Eosinophil	01	%
Monocyte	05	%
Basophil	00	%
Platelet count	4.15	Lack/cmm

After treatment

TEST NAME	VALUE	UNIT
Heamoglobin	10.5	g/dl
Total Leucocyte count	8680	/cumm
Total RBC count	3.37	Millions/cumm
Haemtocrit	27.6	%
MCV	81.3	fL
MCH	24.1	pg
MCHC	29.1	Gm/dl
RDW	19.4	FI
DLC		
Neutrophil	77	%
Lymphocyte	17	%
Eosinophil	02	%
Monocyte	04	%
Basophil	00	%
Platelet count	4.15	Lack/cmm

DISCUSSION

Garbhini Pandu can be managed very well in Ayurveda by shaman therapy. The clinical features of iron deficiency anemia are mainly due to reduction of haemoglobin level and less supply of oxygen to the tissue of body. Due to medicinal intervention there is increase in haemoglobin level, body tissue get sufficient oxygen supply and improves the metabolism and digestion of patient, patient get relief in her clinical features is observed.

CONCLUSION

Gudadi mandur can cure garbhini pandu in short span of time due to its special contents and mode of action. On the basis of this case study, it can be concluded that gudadi mandur can significantly cure the garbhini pandu.

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