



**AN AYURVEDIC REVIEW ON NIDANA PANCHAK OF PANDU VYADHI**

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**ABSTRACT**

*Pandu Roga* is described elaborately by *Bhrihatrayi* as well as *Laghutrayi* as a specific disease with its own pathogenesis and treatment. In *Pandu Vyadhi* there is predominance of paleness (*Pandutva*) all over the body due to *Rakta-Dhatu Alpata*. Due to its similarity, it can be co-related with Anemia in modern science. Anemia is most common blood disorder, affecting about a third of the global population. According to W.H.O globally, anaemia affects 1.62 billion people, which corresponds to 24.8% of the population. The highest prevalence is in preschool-age children (47.4%). The Anemia is a reduced quantity of red blood cells or hemoglobin which, in turn causes pale skin. This article is based on *Nidana Panchak* of *Pandu Roga*. The advancement in life-style of human being plays a major role in manifestation of various diseases. *Pandu Roga* is also one of them. Our faulty dietary habits and unhealthy lifestyle produces *Ama* and further *Agni Dushti*, which causes formation of improper *Rasa Dhatu* which further hampers the *Rakta Dhatu* formation and leads to *Pandu Roga*. The detail knowledge of *Nidana Panchak* of *Pandu Roga* will help in its diagnosis and management.

**KEYWORDS:** *Rasa Dhatu, Ama, Anaemia Nidana Panchak, Pandu Roga.*

**INTRODUCTION**

A detail explanation of *Pandu* is found in almost all *Ayurved Samhitas*. *Pandu* is known from the Vedic period. This disease was described in ancient Hindu treatises like in *Ramayana, Mahabharata, Agnipurana*, etc. It is called *Pandu Roga* because of pre-dominance of *Pandubhava* (paleness) all over the body. Charak described *Pandu* after *Grahani Dosh Chikitsa* due to aggravation of *Pitta* in *Grahani* and the aggravation of *Pitta* constitutes a predominant factor in the causation of *Pandu*.<sup>[1]</sup> Sushrut has mentioned after *Hridaroga* due to same *Samkhya, Samprapti* and *Chikitsa* of *Hridaroga* like *Tikshna, Amla, Katu* etc may cause for development of *Pandu*. Vagbhat mentioned *Pandu Roga* after *Udar-Roga* due to same *Doshanghnata*. All *Pandu Rugna* suffers from decreased *Bala (strength), Varna (complexion), Sneha, Meda and Oja*. Patient becomes *Nihsara* (loss of natural integrity, tone and strength) and *Shiithilendriya*. In this there is vitiation of *Pitta Pradhana Vatadi Dosh* and *Raktadhatu* in the body. *Rakta* gets vitiated by *Doshas*, mainly by *Bhrajaka Pitta Dosh* and create *Pandu Roga*. *Pandu* is described under *Rasa-Pradoshaja Vikara*.

Origin of the word Anemia which means lack of blood the name Anemia accurately described this condition as the reduced quantity of red blood cell or Haemoglobin.<sup>[2]</sup> Anemia is a blood disorder characterized by abnormally low levels of healthy RBC cells that delivers oxygen to tissues throughout the body. Red blood cell carry oxygen around the body using a protein called Haemoglobin. When Anemia comes on slowly, the symptoms are often vague and may include feeling tired, weakness, shortness of breath, and a poor ability to exercise. Symptoms may occur depending on the underlying causes. A detailed review of *Nidana Panchak* (*i.e. Nidana, Purvarupa, Rupa, Upashaya* and *Samprapti*) will be helpful for clear understanding of minute aspects connected to disease. Therefore, in this article *Nidana Panchak* of *Pandu Roga* has been reviewed from *Ayurved Samhitas* and textbooks.

**AIM AND OBJECTIVE:** Detailed Ayurvedic review of *Nidan Panchak* of *Pandu*.

**MATERIAL AND METHOD:** References regarding *Parikartika* and its *Chikitsa* were collected from

*Bhrihatrayi, Laghutrayi* Modern textbooks and Research articles and analysed them.

### NIDAN PANCHAK

**A. Nidana<sup>[3]</sup>:** The *Nidana* (causative factors) of *Pandu Roga* is broadly divided in 3 types.

#### 1) Aharaja Nidana (Dietary Causes)

a. *Atisevan* of *Kshara, Amla, Lavan, Katu, Kashaya, Ati-Ushna, Tikshan, Ruksha, Viruddha*,  
b. *Nishpava, Mansadi Sevana, Tilataila*,  
c. *Vidagddha Bhojana, Mrid-Bhakshanam, Asatmya Bhojana* may be taken as food items to which and individual is not adopted or suited. It may be considered as sudden change of food style or habit or also as junk food used today, as they are not beneficial.

#### 2) Viharaja Nidana (Habitual Cause)

a. *Atinidra, Ativyayam, Ativyavaya Atishrama*.  
b. *Dushta Raktani-garha in Raktarsha*.  
c. *Diwasvapana, Ratrijagarana, Rituvaishmya, Sneha Atiyoga*,  
d. *Vegavrodha, Vegavi-dharanain Vamana Karma*.

#### 3) Manasika Nidana (Mental Cause)

a. *Chinta, Bhaya, Krodha and Shoka Atisevan*.  
Other *Hetu* includes *Bija-Dushti Rakta, Mamsa* and *Meda* are *Matruj Avayava* therefore any *Dushti in Matruja Bhaga* can cause *Pandu Roga*.

### Nidanarthakara Roga

In Ayurvedic literature *Pandu Roga* has been indicated either as a symptom of any disease or as *Upadrava Rupa*. So, all these diseases can be considered as *Nidanarthakara Rogas* of *Pandu Roga*. Some of which are *Raktarsha, Kaphaja Arsha, Raktarbuda, Raktapradara, Sannipatodara, Upadrava* of *Raktapitta*.

**B. Poorva Rupa<sup>[4]</sup>:** These are the symptoms which are produced in the body before the arrival of the disease when there is accumulation of *Dosha* and *Dushya* in the body they produce some sign and symptoms.

It can be divided into two types viz. (1) *Samanya Purvarupa* (2) *Vishishta Purvarupa*  
*Purvarupa* according to *Acharyas: Hridaya Spandana* (Palpitation), *Raukshya* (Ununctuousness), *Swedabhava* (Absence of sweating), *Shrama* (Fatigue).

### C. Rupa (Samanya Lakshana)<sup>[5]</sup>

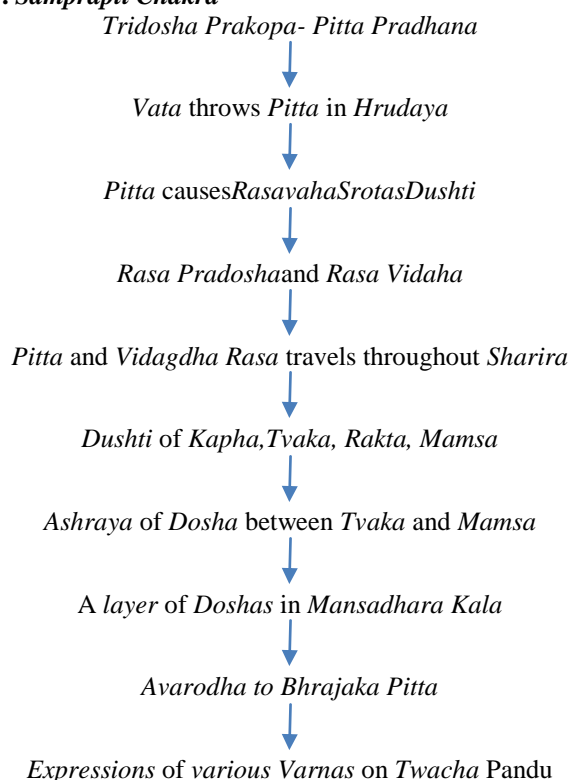
*Vyakta Purvarupa* is known as *Rupa*. *Rupa* appears in the *Vyaktavastha* i. e. fifth *Kriyakala* of the disease. This is the unique stage of the illness, where it is clearly recognizable as all its characteristic signs and symptoms manifest *Akshikutashotha, Aruchi, Arohaneayasa, Alpawaka, Annadweshya, Balakshaya, Bhrama, Durbalya, Dhatugaurava, Gatramarda, Hatanala, Sadana, Sthhivanadhikya, Sannasakthi*.

Classification according to *Charak<sup>[6]</sup>*, *Charak* has classified the *Pandu Roga* of 5 types.

- (1) *Vataja Pandu Roga*
- (2) *Pittaja Pandu Roga*
- (3) *Kaphaja Pandu Roga*
- (4) *Tridoshaja Pandu Roga*
- (5) *Mridbhakshanaja Pandu Roga*

Classification according to *Sushrut<sup>[7]</sup>*, *Sushrut* has not included *Mridbhakshanja Pandu*. Because according to him the variety of *Pandu* caused by *Mridbhakshana* is included in the *Sannipatika* variety of *Pandu*,

### D. Samprapti Chakra<sup>[8]</sup>



### Samprapti Ghatak

- *Dosha: Pitta Pradhana Tridosha*, mainly *Sadhaka Pitta*.
- *Dushya: All Dhatu and Oja*.
- *Srotas: Rasa, Rakta*
- *Agni: Dhatwagni*
- *Stroto Dushti: Sang, Vimargaman*
- *Udbhava Sthana: Amashaya, Hridaya*.
- *Sanchara: Sarva Sharira*
- *Vyakta Sthana: Tvaka*
- *Swabhava: Chirkari*
- *Rogamarga: Madhyam*.

**E. Upadrava (Complications):** If the disease is not treated in early stage, the following complications may arise, *Aruchi* (anorexia), *Pipasa* (thirst), *Chhardi* (vomiting), *Jwara* (fever), *Shiroruja* (headache), *Agnisada* (dyspepsia), *Kantha Shotha* (oedema in throat), *Abalatva* (debility), *Murcha* (fainting), *Hridaya Pidana* (discomfort in the region of heart).

### F. Sadhya-Asadhyata

The signs and symptoms and other conditions indicating incurability of *Pandu Roga* are as follows.

- (1) When the disease becomes chronic. (*Chiropanna*)
- (2) When excessive dryness has appeared in the patient. (*Kharibhuta*)
- (3) When the patient is afflicted with oedema owing to chronicity of this disease. (*Kalaprakarshat Shumo*)
- (4) When the patient gets yellow vision. (*Pitani Pashyati*)
- (5) When the patient is fully or partially constipated. (*Baddha Alpa Vitaka*)
- (6) When the Patient passes loose stool, which is green in colour and which mixed with mucus (*Sakapha Harita Atisara*)
- (7) When the patient feels exceedingly prostrated (*Deena*)
- (8) When the patient is exceedingly afflicted with vomiting, fainting and morbid thirst. (*Chhardi-Murchha-Trushardita*)
- (9) When the body of the patient becomes pale on account of loss of blood (*Asrika Kshayadshwetatvam*)

### G. Upashaya and Anupashaya<sup>[9]</sup>

**Upashaya/Pathya:** Rice prepared by old *Shali*, food prepared by *Purana Yava* and *Godhuma* should be prescribed with *Yusha* and *Mudga*, *Masura* and *Jangala Mamsa*. Specific medicines are to be administered depending on the predominance of *Doshas*. *Panchagavya Ghrita*, *Mahatikta Ghrita* and *Kalyanaka Ghrita* are useful for the purpose of *Snehana* therapy. *Arishta* prepared from *Guda*, *Madhu* and *Sharkara*, *Asava* prepared from *Mutra* and *Kshara*. *Jangala-Mamsa* fried with fat and processed with *Amalaki* cooked with *Kola* and the recipes prescribed for *Shotha* should be taken by the patient of anaemia.

The patient should take the following edibles –*Purana Ya-va*, *Godhuma*, *Shali*, *Mudga*, *Adhaki*, *Masura*, *Yusha*, *Jangala Mamsarasa*, *Patola*, *Kushmanda*, *Kadalipha-la*, *Jivanti*, *Ikshu*, *Guduchi*, *Tanduliyaka*, *Punarnava*, *Dronapushpi*, *Lashuna-dwaya*, *Pakva Amra*, *Bimbiphala*, *Kakdashringi*, *Matsya*, *Gomutra*, *Amala*, *Takra*, *Goghrita*, *Tiltaila*, *Sauvira*, *Tushodaka*, *Makhana*, *Shweta Chandana*, *Haldi*, *Nagkeshara*, *Yavakshara*, *Lauhabhasma*, *Keshara*, *Kashaya Rasa Pradhana Dravya*.

**Anupashaya/ Apathya:** Following etiological factors should be avoided in *Pandu Roga*. *Rakta Kshaya*, *Dhumrapana*, *Vamana Vegadharana*, *Swedana*, *Maithuna*. *Pandu Rogi* should avoid consumption of *Patra Shaka*, *Atyambupana*, *Tiladi Khali*, *Tambula*, *Sura*, *Mitti*, *Divashayana*, spicy and salty foods, food items that are heavy to digest and cause burning sensation etc. Patient should avoid staying around fire, sun, hard work, exercise, anger, suppression of natural *Vegas*.

### DISCUSSION

Causative factors of *Pandu* are widely described in *Samhitas*. According to *Acharya Sushruta* *Rakta* gets vitiated by *Diwasvapa*, *ViruddhaBhojana* and *Krodha*. He has also mentioned that *Krodha*, *Shoka*, *Bhaya*, *Vidagdha Anna Sevana*, *Ati Maithuna* and *Tila Tail* and *Pinyaka* leads to vitiation of *Pitta Dosha*. *Ativyayama*, *Ratrijagarana*, *Nidranasha*, *Ativyavaya* and *AtiAdhvagamana* leads to *VataPrakopa*. *Acharya Charaka* has mentioned *Pandu Roga*<sup>[10]</sup> caused by suppression of *Chhardi*, *Vegavarodha*, *Viruddha Anna Sevana* and of excessive use of *Ati Amla* and *Lavana Rasa*. *Acharya Charak*<sup>[11]</sup> has emphasized bad effect of *Chinta*, *Bhaya*, etc. on digestion. All these causes improper digestion of food which leads to improper *Rasa Dhatu* formation and further hamper *Rakta Dhatu*, *Mamsa Dhatu* formation and so on and thus leads to *Pandu Roga*. Also, *Acharya Charak* has mentioned *Pandu* as a *Santarpanoththa Vikara*<sup>[12]</sup>, for which *Samprapti* may be same as described above. Only difference is, in this case obstructing factor may be *Kapha* as it is related with *Santarpana*. The features described as *Purvarupa* of the disease are some of the general features itself as *Hridspandana* (palpitation), *Shrama* (fatigue), *Angasada* and *Gatrasada* (weakness). Some *Purvarupas* are related to features of digestive system or *Agnias Avi-paka*, *Aruchi*, *Alpavahnita*, *Vidamutravitata* etc., indicating that *Agni* is getting disturbed here and production of *Mala Swarupa Pitta* is increasing here resulting in the increased yellow coloration of urine and stool. *Raukshya* and *Twaksphutita* are the features of *Raktakshaya* which are developing here. There is vitiation of *Agni* resulting in features of *Mandagni* and decreased production of *Rakta Dhatu* with increased production of *Mala-Pitta*. *Sthivanadhikya* is a feature described in the manifestation of *Ama*. *Mrida Bhakshana* is also the aetiology of the disease and viewing it is an individual could well forecast the future development of worm and anaemia is an individual. This is also a symptom found present in iron deficiency anaemia as pica or unusual cravings for eatables. *Sweda-abhava* is feature which interpreted by commentators as *Vyadhiprabhava*, meaning the effect of disease itself. In *Rupavastha*, there is also the simultaneous involvement of other *Dhatus* of the body resulting in their decline in quality as well as quantity wise. It is appealing to note that though the disease is *Pitta* predominance, the features developing also here includes *Shishira Dwesha* which is neither a feature of *Raktakshya* or *Pitta Vriddhi*. *Sushruta* has classified *Panduroga* in 4 varieties, but *Acharya Charak* has mentioned one additional variety of *Pandu Roga* that is *Mrida-Bhakshanjanya Pandu*. *Sushruta* has mentioned that *Pandu Bhava* is caused by vitiation of *Twaka* through the vitiated *Rakta* in one who indulgence in *Ahita Ahara Vihara*.<sup>[13]</sup> *Acharya Vagbhat* has mentioned the *Samprapati* given by *Acharya Charak*. Thus, the pathology of *Pandu Roga* is mainly concerned with vitiation of *Pitta* which in turn vitiates the *Rakta*, leading to condition of *Pandubhava*. So, *Pitta* being main factor

in the causation of *Pandu Roga*, all the fivefold functions of it are affected more or less, but as the main seat of the disorganization is the *Rakta* and complexion of body, the *Ranjan a* and *Bhrajana* function of *Pitta* is to bear the brunt. Thus, *Pitta Dosha* takes leading part in the production of *Dhatushaithilya* and *Dhatugaurava*. This leads to *Balakshaya*, *Varnakshaya* and *Ojakshaya*. Ultimately, the *Panduroga* is stated to be afflicted with *Raktalpata*, *Medalpata*, *Niharsata*, *Vaivarnata* and *Shithilendriyata*. It has also been stated that *Santarpana* which broadly means anabolism, brings about an increase in *Kapha* and *Ama* production which leads to *Mandagni* and change in complexion of body i.e., *Panduta*. Vitiating of *Kapha Dosha* is responsible for *Gaurava*, *Nidraluta*, *Mandagni*, *Alasya*, *Alpavaka*. The symptoms such as *Aruchi*, *Jwara*, *Panduta*, *Gaurava* and *Tandra* are indicative of *Rasa Dhatu Dushti*. *Angamarda* indicates the involvement of both *Rasa* and *Rakta Dhatu*. *Karshya* is indicative of *Mamsa Dhatu Dushti*. *Atisveda* and *Svedabhava* are suggestive of involvement of *Twaka*, *Mamsa Dhatu* and *Medo Dhatu*. *Shirnalomata* is an important indicative of *Asthidhatu Dushti*. The loss of lustre and debility are suggestive of depletion of *Oja*.

*Nidanaparivarjana* is the best treatment for any disease. This principle also can be applied in the *Pandu* which will be the first step in the treatment of disease. Further as per condition of *Doshas*, treatment should be applied.<sup>[14]</sup> As mentioned in the early pages of disease part, *Panduis a Pitta predominant Tridoshaja Vyadhi*. Chief pathogenesis taking place during *Sam-prapti* is *Strotorodha* which generates disturbance in *Dhatu-poshana* and lastly *Dhatukshaya*.

## CONCLUSION

*Nidana Panchak* is a great tool for diagnosing a disease at various stages, in which disease a manifest itself and every stage has its own importance in the treatment and its effective prognosis. From this article Majority of *Nidanas* is *Pitta* and *Rakta Prakopaka*. These *Nidanas* causes *Mandagni* and *Rasavaha Stroto Dushti* which further causes less production of *Poshaka* from the *Rasa Dhatu* and depletion of *Rakta* and ultimately *Rakta Alpata*. In second type of pathogenesis *Prakupita Pitta* of *Hridaya* expelled through *Dasha Dhamani* by powerful *Vata* which further vitiate *Vata*, *Rakta*, *Kapha*, *Twak* and *Mamsa* and results as *Pandu Varnata* and ultimately *Pandu Roga*. *Nidanarthakara Roga* also play important role as cause of *Pandu Roga*. Disease which are directly and indirectly related with *Rakta Dhatu Kshaya* which further leads to all *Dhatu Kshaya*. Five types of *Pandu Roga* may be clearly differentiated based on the predominance of *Doshas*. These are *Vataja Pandu*, *Pittaja Pandu*, *Kaphaja Pandu*, *Sannipataja Pandu* and *Mrittika bhakshana Janya Pandu*. In acute stage all *Pandu Roga* are curable or manageable but in chronic stage they are incurable. So *Pathya* and *Apathya* should be followed in early stage. Each component of *Nidana-Panchak* individually as well as collectively helps in diagnosis of disease.

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