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## **Review Article**

# PROBABLE MODE OF ACTION OF AN INDIGENOUS DRUG FORMULATION IN *GARBHINI PANDU* WSR IRON DEFICIENCY ANEMIA

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#### **ABSTRACT**

Pregnancy marks a significant milestone in a woman's life, transitioning her from a woman to a mother. While it is a joyous journey, it brings about numerous physical and physiological changes that can lead to certain health challenges. Iron deficiency anemia is a prevalent health concern during pregnancy, particularly widespread in developing nations, necessitating urgent intervention to safeguard the lives of both the mother and the child. About 4 to 16% of maternal deaths are due to anemia. In contemporary science, to prevent complications like maternal and fetal mortality and morbidity, increased risk of infection, spontaneous abortion, intrauterine growth retardation, intrauterine death, premature delivery, low birth weight, postpartum hemorrhage etc during antenatal and postnatal period, various haematinic drugs are prescribed from 3rd month onwards. In Ayurveda this condition is considered as Garbhini Pandu. The Rasa and Rakta of the mother are carried to the fetus for its proper growth and development. If not, it leads to Rasa dhatu kshaya in Garbhini which finally leads to Garbhini Pandu. Ayurveda highlights the contradiction of Shodana in pregnant ladies, hence Shamana chikitsa can be followed judiciously. Considering the necessity of utilizing a safe and beneficial drug for Garbhini Pandu during pregnancy, certain indigenous drugs such as Agasthya, Amalaki, Draksha, Musta, Pippali, Sigru, Shuddha Kasisa, and Bhavana drayyas like Dadima, Bhringaraja, and Mandukaparni have been incorporated. This article highlights about the probable mode of action of indigenous drug formulation in Garbhini Pandu.

#### **INTRODUCTION**

Motherhood is a remarkable gift bestowed by nature, offering expectant women a captivating world filled with anticipation, wonder, anxiety, vulnerability, and unending curiosity. Pregnancy is a phase during which all physiological processes are heightened to accommodate the needs of the developing fetus. The ongoing physical adjustments are made to meet and anticipate the requirements of the growing fetus, creating a stable environment for its healthy growth as the primary objective of a safe pregnancy. Ensuring both the mother's health and the baby's well-being hinges on excellent prenatal care. Pregnancy comes with elevated nutritional demands, with iron being a



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crucial component that experiences increased demand from the mother, fetus, and placenta. Failure to meet this heightened demand can lead to the development of anemia [1].

Anemia during pregnancy stands as a significant public health issue, contributing to a considerable percentage of maternal fatalities, ranging from 4 to 16%. Additionally, it escalates maternal morbidity and substantially raises the risks of fetal and neonatal mortality and morbidity. Indeed, anemia is a recognized risk factor for a range of maternal-fetal complications, including preterm labor, an increased susceptibility to infections, postpartum hemorrhage (PPH), and fetal issues like low birth weight and growth retardation [2].

As per Acharya Charaka<sup>[3]</sup>, *Pandu roga* is characterized by *Pitta* dominance. In discussions about *Masanumasika garbha* vruddhi, it's noted that *Mamsa* and *Shonita* increase during the 5th month and escalate further by the 6th month. Consequently,

*Balavarnahani* arises during the 6th month of pregnancy, leading to a potential decline in strength and skin radiance, along with symptoms primarily indicating the loss of *Rakta* and *Mamsa* components. This description can be referenced for *Garbhini Pandu*, correlating it with anemia during pregnancy.

As said by Acharya Charaka, *Garbhini* should be treated like *Poornameva tailapatram* and since *Shodhana karma* is contraindicated in pregnancy, only *Shamana oushadhas* can be formulated and advised. So, considered the necessity to have a drug which is efficacious in *Pandu roga* and without having any untoward effect on pregnancy. An indigenous drug formulation owing to its properties like *Raktavardhaka*, *Yakrututtejaka*, *Deepana*, *Medhya*, *Rasayana* and *Krimigna* is considered.

## Literature

Kashyapa explained Pandutva as a symptom of Garbhini in the context of Raktagulma. [4] So in Garbhini Pandu, Nidana panchaka and Chikitsa of Panduroga may be adopted. Description of the Nidanapanchaka and Chikitsa of Panduroga have been elaborated in

Caraka Samhita, Ashtanga Samgraha, Ashtanga Hridaya. Amalaki, Musta, Pippali, Draksha and Dadima are mentioned in Panduroga adhikara by Caraka Acharya in Chikitsasthana. [5] Agasthya and Shigru is mentioned in Kaiyadeva nighantu under Aushadhi varga. [6] Mandukaparni and Bhringaraja explained in Bhavaprakasha nighantu under Guduchyadi varga [7] Shuddha Kasisa mentioned in Rasataragini in the context of Upadhatvadi Vijyaniya Taranga. [8]

## **Ingredients**

- Amalaki
- Musta
- Pippali
- Draksha
- Agasthya
- Shigru
- Shuddha Kasisa
- Bhavana dravyas like Dadima, Mandukaparni and Bhringaraja

Tab	<b>Table 1: Containing Name of Ingredients</b>					
	Potanical namo	Fai				

Drug	Botanical name	Family	
Amalaki	Phyllanthus emblica Linn	Euphorbiaceae	
Agastya	Sesbania grandiflora (L.) Poiret	Fabaceae	
Musta	Cyperus rotundus Linn	Cyperaceae	
Draksha	Vitis vinifera L.	Vitaceae	
Pippali	Piper longum L.	Piperaceae	
Sigru	Moringa oleifera Lamk.	Moringaceae	
Dadima	Punica granatum Linn.	Punicaceae	
Mandukaparni	Centella asiatica Linn.	Apiaceae	
Bhringaraja	Eclipta alba	Asteraceae	
Shudha Kasisa	Green Vitriol		

**Table 2: Containing Pharmacological properties of Herbal ingredients** 

S.No	Drug	Rasa	Guna	Virya	Vipaka	Karma
1	Amalaki <sup>[9]</sup>	Madhura, Amla, Kashaya, Tikta, Katu	Laghu, Ruksha	Sheeta	Madhura	Medhya, Balya, Deepana, Yakriduttejaka, Hrdya, Shonitha- sthapana, Vrishya, Garbhasthapana, Rasayana
2	Agastya <sup>[10]</sup>	Tikta	Ruksha, Laghu	Sheeta	Katu	Shothahara, Medhya, Deepana, Krimigna, Raktapittashamaka, Balya, Garbhashayashothahara, Vishagna, Pandugna.
3	Musta [11]	Tikta, Katu, Kashaya	Laghu, Ruksha	Sheeta	Katu	Twagdoshahara, Shothahara, Medhya, Deepana, Pachana, Krimigna, Rakta- prasadana, Stanyajanana, Balya, Vishaghna.
4	Draksha <sup>[12]</sup>	Madhura	Mrdu, Snigdha,	Sheeta	Madhura	Medhya, Kanthya, Hridya, Rakta- prasadana, Raktapittashamaka,

			guru			Vrishya, Garbhasthapana, Jivaniya, Balya, Brimhana, Jwaragna
5	Pippali [13]	Katu	Laghu, Snigdha, Tikshna	Anushna sheeta	Madhura	Raktotklesa, Medhya, Deepana, Vatanulomana, Yakriduttejaka, Rakta- vardhaka, Raktashodaka, Balya, Rasayana
6	Sigru [14]	Madhura, Katu, Tikta	Lagu, Ruksha, Tikshna	Ushna	Katu	Vidahi, Shothahara, Vedanasthapana, Deepana, Pachana, Grahi, Krimigna
7	Dadima [15]	Madhura, Amla, Kashaya	Laghu, Snigdha	Anushna	Madhura, Amla	Shothahara, Pandughna, Medhya, Deepana, Trishnanigrahana, Jwaraghna, Balya, Hrdya
8	Mandukaparni <sup>[16]</sup>	Tikta, Kashaya, Madhura	Laghu, Sara	Sheeta	Madhura	Medhya, Vayasthapana, Agnivardhaka, Hridya, Raktashodhaka, Raktapitta- shamaka, Shothaghna, Balya
9	Bhringaraja [17]	Katu, Tiktha	Ruksha, Laghu	Ushna	Katu	Shothahara, Pandughna, Keshavardhana, Deepana, Pachana, Yakriduttejaka, Amapachana, Pittarechaka, Krimighna, Raktaprasadana, Raktavardhaka, Rasayana, Balya.
10	Shudha Kasisa <sup>[18]</sup>	Kasaya, Amla	Ushna, Snigdha	Ushna of Ayurve	Katu	Vata-kaphahara, Keshya, Netrya, Keshya Ranjana, Balya, Rakta vardhak

## **DISCUSSION**

## **Mode of Action of Drug**

Pandu roga is explained under the Rasa pradoshaja vikara. According to Acharya Charaka, the manifestation of the disease is caused due to the Dusti of *Pitta* which expels from its normal site and travels all over the body, leads to Agni dusti which causes the formation of Ama, leading to Agni mandhya which causes vitiation of Rasa dhathu, further vitiating the Dhatvagni and Dusti of the Raktha dhatu. The Dushitha pitta along with Vata circulates all over the body and gets lodged between the Twak and Mamsa and does the Dushana of other Dhathu causing the Lakshanas like Vaivarnya of the Twak, Pandu, Haridra, Haritha varnatha. The indigenous drug formulation i.e., Agasthya, Amalaki, Draksha, Musta, Pippali, Sigru, Shuddha Kasisa and Bhavana dravvas like Dadima, Bhringaraja and Mandukaparna act through its properties like Pitta shamaka, Deepana, Pachana, Raktavardhaka, Krimighna and Rasayana. Also these drugs- Amalaki, Musta, Agasthya, Sigru, Mandukaparni and Bhringaraja contain Tikta rasa and Dadima, Sigru, Amalaki, Draksha, Mandukaparni contain Madhura rasa. The Tikta rasa is believed to be Deepana, Amapachaka, Arochakagna, Sita and Pittashamaka and Madhura rasa is Aajanmasaatmaya and mitigates Pitta. These properties of *Tikta rasa* and *Madhura rasa* may be helpful in the Samprapti vighatana of Panduroga in which *Jataragni mandya* is present. The *Ama pacaka* and Agni deepana will hence help in bringing the Dushitha pitta to normalcy.

Agasthya is having Tikta rasa, Sheeta virya, Laghu guna and act as Pittashamaka and possesses Karmas like Deepana, Krimighna, Balya and Pandughna. Tikta rasa improves function of Yakrut which results in the proper formation of Rakta dhatu from Rasa dhatu with the help of Ranjak pitta. Agathi leaves contains iron, calcium, phosphorus, proteins, etc helps in improving hemoglobin concentration. [19]

Draksha is Madhura rasa and has Madhura vipaka, Sheeta veerya, Snigdha, Mrdu gunas and act as Pittashamaka. Draksha has got karmas like Raktaprasadana, Garbhasthapana, Jeevaniya, Balya. Thus by Karmas of Draksha, it is known that drug Draksha cures Pandu and is an effective drug which can be used during pregnancy, which can prevent uneventful situations during antenatal period. The chemical composition of the drug Draksha fruit contains dehydro ascorbic acid i.e., oxidised form of ascorbic acid, which helps in the absorption of the available iron. The drug contains arginine which is a semi-essential amino acid, improves the circulation and oxygen supply of the coronary and peripheral vessels through the release of nitric oxide.[20]

Pippali is having Katu rasa and Yakrututtejaka property which improve liver function which is the Mula of Raktavahasrotas. Furthermore, Pippali has Deepana and Pachana properties that aid in improving digestion and reduces Amautpatti. This counteracts

digestive capacity in *Pandu. Katu rasa* has been said as *Marga vivrunoti* (penetrates obstruction in channels) and reach even minutes level and increase micro circulation of the *Rasa* all over the body. *Pippali* contain piperine, acts as bioenhancer to vitamins (A, B1, B2, B6, C, D, E, K), amino acids, minerals such as iodine, calcium, iron, zinc, copper, selenium, magnesium, potassium, manganese.<sup>[21]</sup>

Musta is having Tikta and Kashaya rasa, Sheeta veerya and having Krimighna property. As Purishaja krimi is one of the cause of Pandu according to Acharya Susruta and also worm infestation is one of the etiology of anemia, Musta is good in expelling the Krimi. Nutgrass contain copper and magnesium, play an important role in increasing iron metabolism and Hb synthesis in body. Copper appears to be required for the absorption and utilization of iron. [22]

Amalaki has all Rasa except Lavana, Laghu ruksha guna, Sheeta veerya and Pittashamaka properties. It acts as Rasayana, Yakrut uttejaka, Deepana, Balya, Raktaprasadana. Its Laghu ruksha and Deepana karma helped in cleaning the obstruction of Srotas and thereby clearing minute channels within body and increases the function of Dhatwagni, Pachakagni and Ranjaka pitta thus increasing the absorption and assimilation of iron along with better utilization in Raktha dhatu and increases hemoglobin concentration. Vitamin C present in Amalaki is the most potent enhancer of iron absorption by its reduction to ferrous form. [23]

Sigru possesses Madhura tikta rasa, Laghu ruksha guna, Deepana pachana which improves status of Agni. Moringa leaf have the potential for large enough nutrients, amino acids and contains a wide range of micronutrients, especially iron is quite high at 28.29mg. Additionally, it encompasses various essential nutrients, including vitamin C (at 220mg), which play a vital role in facilitating iron absorption within the body. The content of vitamin C in Moringa leaf extract expedites the process of iron absorption. [24]

*Kasisa* is the only iron preparation of Ayurveda to have iron in ferrous state. [25]

Iron in this dissociable ferrous form has good absorption into the system. Owing to its chemical composition this drug is best absorbed into the gut. More over this drug is also mentioned in treatment of *Pandu roga* in the Ayurvedic classics.

Bhavana dravyas like Mandukaparni, Bhringaraja and Dadima are a rich source of dietary iron [26-28].

Takra is used as Anupana. Takra is included under Pathyakalpana. It is Laghu, Dipana, and useful in diseases like Arsha, Grahani, Pandu etc. Iron absorption is facilitated by acidic media which lowers the pH of the proximal duodenum from where it generally absorbed. Organic acids promote iron absorption.

Buttermilk is also organic acid. Thus buttermilk is simple easily available organic acid which aids in iron absorption and thereby aids in treatment of *Pandu*. Buttermilk even contains vit B12 which also has a crucial role in erythropoiesis.

#### CONCLUSION

Pregnancy makes the women more susceptible to develop *Pandu* not only because of extra demand of the growing fetus but also due to the deficient diet. *Garbhini Pandu* is not directly described in Ayurvedic classics as a separate *Vyadhi*, but with different references in *Ayurvedic Samhitas*, the concept of *Garbhini Pandu* can be illustrated easily.

The line of treatment in *Panduroga* is *Shodhana* but as it is contraindicated during pregnancy, hence appropriate *Shamana chikitsa* has to be adopted. The drug by virtue of its properties like *Tikta-madhura rasa*, *Sita virya*, *Laghu guna*, *Pitta shamaka*, *Deepana* and *Pachana* action would possibly have brought about the *Amapachana*, *Poshana* of *Dhatu* and *Raktavardhaka*. Hence this drug formulation can be effectively used to enhance the hematinic effect in *Garbhini Pandu*.

#### REFERENCES

- 1. Hiralal Konar. D.C. Dutta's Text book of obstetrics; Calcutta; New central book agency; 2015. p.306
- 2. Hiralal Konar. D.C. Dutta's Text book of obstetrics; Calcutta; New central book agency; 2015. p.307
- 3. Acharya Y T, editor. Commentary Ayurveda-Dipika of Chakrapani Dutta on Caraka Samhitha of Agnivesha. Sharirasasthana. Varanasi; Chaukhambha publications; 2017.p.320.
- 4. Tewari PV, editor. English translation and commentary on Kashyapa Samhita/Vrddha Jeevakiya Tantra. Khilasthana. Varanasi; Chaukhambha Visvabharati; 2008. p.575.
- 5. Acharya Y T, editor. Commentary Ayurveda- Dipika of Chakrapani Dutta on Caraka Samhitha of Agnivesha. Chikitsasthana. Varanasi; Chaukhambha publications; 2017. p.526-532.
- 6. Sharma P, Hindi translation on Kaiyadeva nighantu of Kaiyadeva. 1<sup>st</sup> ed. Aushadi varga. Varanasi; Chaukambha Orientalia; 1979. p.173 and 137.
- 7. Chunekar K C. Bhavaprakasha nighantu of Sri Bhavamisra, Guduchyadi varga. Varanasi; Chaukhambha Bharati Academy; 2010. p.446 and 414.
- 8. Angadi R. English commentary on Rasa Tarangini of Sri Sadaananda Sharma. 1<sup>st</sup> ed. Upadhatvadi vijnaniya Taranga. Varanasi; Chaukhamba Surbharati Prakashan; 2015. p. 369.
- 9. P.C.Sharma. Database on Medicinal Plants Used in Ayurveda, Vol 2. Central council for research in Ayurveda and siddha, New Delhi; 2005. p. 12.

- 10. P.C.Sharma. Database on Medicinal Plants Used in Ayurveda, Vol 3. Central council for research in ayurveda and siddha, New Delhi; 2005.p. 1.
- 11. P.C.Sharma. Database on Medicinal Plants Used in Ayurveda, Vol 3. Central council for research in Ayurveda and siddha, New Delhi; 2005.p. 404.
- 12. P.C.Sharma. Database on Medicinal Plants Used in Ayurveda, Vol 3. Central council for research in ayurveda and siddha, New Delhi; 2005.p. 472.
- 13. P.C.Sharma. Database on Medicinal Plants Used in Ayurveda, Vol 3. Central council for research in ayurveda and siddha, New Delhi; 2005.p. 472.
- 14. P.C.Sharma. Database on Medicinal Plants Used in Ayurveda, Vol 5. Central council for research in Ayurveda and siddha, New Delhi; 2005.p. 431.
- 15. P.C.Sharma. Database on Medicinal Plants Used in Ayurveda, Vol 2. Central council for research in Ayurveda and siddha, New Delhi; 2005.p. 177.
- 16. P.C.Sharma. Database on Medicinal Plants Used in Ayurveda, Vol 1. Central council for research in Ayurveda and siddha, New Delhi; 2005.p. 264.
- 17. Priyavat Sharma. Dravyaguna Vijnyana. Vol.-2. Varanasi; Chaukhama Bharati Academy; 2003. P. 340
- 18. Vagbhattacharya. Rasa Ratna Samuchaya, Vignana Bodhini Teeka. New Delhi; Meharchand Lacchamandas Publications; 1998.P. 50.
- 19. Rama Mishra R, Akshatha Savith, Sanhitha Purushotham, Geethanjali G.Sesbania grandiflora (humming bird tree) in the management of anemia. International Journal of Contemporary Medical Research.2016; 3(10): 3060-3062.
- 20. Dr. Laxmi Singh, Dr. Rachana HV. A Clinical Study in the management of Garbhini Pandu with Draksha Ghrita w.s.r. to Iron Deficiency Anemia in Pregnancy. J Ayurveda Integr Med Sci. 2020; 5: 21-30.

- 21. Raghavendra P, Sheetar, Ravindrakumar Arahunsi. Effect of vardhamana pippali rasayana in panduroga w.s.r to iron deficiency anemia. Anveshana ayurveda medical journal. 2015;I:161-4
- 22. Sarmad Abdul Razzaq Abood Alsaadi. Estimation of the Changes in Hematological Standards of Albino Rabbits Treated with Different Concentrations for Alcoholic Extract of Cyperus rotundus (Nutsedge) and Rosmarinus officinalis (Rosemary). ijcmas. 2016. 5(7): 759-767.
- 23. Tahmina Akter, Qazi Shamima Akhter et al. Haematopoietic Effects of Amloki (*Emblica officinalis*) in Pregnancy with Iron Deficiency Anaemia. Journal of Biosciences and Medicines. 2020; Vol.8 No.12, 157-165
- 24. Rani Safitri, Reny Retnaningsih. Role of Moringa Oleifera Leaf Extract In Increasing Hemoglobin Levels In Pregnant Rats With Anemia. Jurnal Ilmiah Kesehatan. 2019. E-ISSN 2477.
- 25. Hari Krishna, Gajanana Hegde. A clinical study to evaluate the efficacy of shudda kasisa and amalaka churna on panduroga vis a vis iron deficiency anemia. Journal of Biological and scientific Opinion. Vol 2. 2014
- 26. Sreya Sen, Sohini Roy. A Study on the Quantitative Estimation of Iron in the leaves of Centellaasiatica (Thankuni) along with its effect on the Blood Hemoglobin Level in Rat Model. IOSR Journal of Environmental Science, Toxicology and Food Technology. 2020; Vol 14, 54-57
- 27. Sonal A. Shah, Abhinandan Patil. Efficacy of bhringraj panchang churna on panduroga. Journal of Emerging Technologies and Innovative Research, 2014. Vol 10
- 28. Eirini Manthou, Kalliopi Georgakouli et. al. Effect of pomegranate juice consumption on biochemical parameters and complete blood count. Experimental and Therapeutic medicine. 2017. 1756-1762

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