AN AYURVEDIC REVIEW OF GARBHINI PANDU WITH SPECIAL REFERENCE TO ANAEMIA IN PREGNANCY

Tejaswini K.R* , Nanda K.O1,2
1,2Assistant Professor, Prasuti Tantra & Stree Roga JSS Ayurveda Medical College & Hospital, Mysuru-570028

ABSTRACT

Anaemia is one of the commonest medical disorder of high incidence in developing and underdeveloped countries with increased maternal and fetal mortality, morbidity. There are different types of anaemia explained. Deficiency anaemias have a very high global incidence affecting approximately 20% of the world’s population. Nearly of the individual with iron deficiency progress to iron deficiency anaemia. Garbhini pandu is one which is caused mainly due to the increase demand of nutrition by the garbhini which is not being supplemented by adequate nutrition diet. As the disease is characterised by pandutwa in the body which is caused by alparaktata where rakta is known to be one among the saptadhatu which has got jeevana karma hence raktavardhaka chikitsa becomes important in pregnant woman.

Keywords: Garbhini Pandu, Anaemia, Pregnancy, Alparaktata, Pandutwa, Haemodilution.

INTRODUCTION: Pregnancy is a state in which all the physiological functions are hyper stimulated in order to meet the demands of growing fetus. Good prenatal care is essential to ensure not only the health of the mother, but also the wellbeing of the baby. Nutrition requirements are very high in pregnancy. Among the various diet factors; iron is one which is in increased demand by the mother, fetus & placenta. Extra demand if not fulfilled will lead to disease Anemia. 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 finally leads to Garbhini Pandu. Garbhini-Pandu (anemia in pregnancy) has been described in classical text (Kashyapa Samhita)\(^1\). It explains that if a pregnant woman become weak and pale, her fetus gets troubled\(^2\). This condition can be correlated to anemia in pregnancy and its complications.

As there is no separate chapter regarding garbhini pandu, it can be considered under Pandu roga which elaborately explained in our classics. So, in garbhini pandu nidana,lakshana,samprapti, chikitsa of Pandu Roga is considered.

Samprapti :
The state of equilibrium is health any disturbances in the equilibrium of dhatu is known as disease. Health and disease are also defined as pleasure and pain respectively.

Rakta is one among the sapthadhatu and the dasha pranayatanani. Rasa is formed by ahara rasa. Rasa dhatu is transferred to rakta by virtue of ranjaka pitta. The karma of rakta are varna prasadana, mamsa pusti, jeevana vyapara, bala,sukha and ayushya. Due to rasa and rakta kshaya there will be twak rukshata, shrama, shosha, glani, shabda, asahishnuta, etc.,But in garbhini the lakshanas like shrama, balahani, gurugatrata, shota, brama, panduta etc.,due to lack of nourishment of maternal dhatu since the
rasa formed in the mother is utilized to nourish the mamsa and rakta of the fetus which leads to mamsa and rakta kshaya in the mother and will lead to pandu roga.

**Physiological changes during pregnancy**: 
During pregnancy, there is disproportionate increase in plasma volume, RBC volume, and Hb. The increase in plasma volume is much greater than the RBC volume. This results in haemodilution. It is common that during pregnancy there is high demand of extra iron. Even adequate dietary intake also cannot full fill the extra demand, which gives a physiological iron deficiency state in pregnancy. Due to haemodilution and marked demand of extra iron, there is fall in haemoglobin concentration in pregnancy leading to physiological anaemia in pregnancy. The anaemia is normocytic and normochromic type.

Iron deficiency is a very common cause of anaemia in pregnancy worldwide. It is a consequence primarily of expansion of plasma volume without normal expansion of maternal haemoglobin mass. Some of the etiological factors of pandu which are more relevant in garbhini are as follows:

1. **Asatmya ahara**: Due to douhruda iccha the garbhini stree may indulge in asatmya and ahitakara ahara which leads to agni mandhya and dosha prakopa.
2. **Guru ahara atisevana**: It leads to Agnimandhya.
3. **Hrullasa**: It is one of the common symptoms seen in garbhini. Due to nausea the lady will not be able to take nourishing diet, instead she takes light and monotonous food. She will take alpa ahara. By these there will be dhatu kshaya leading to Pandu.

4. **Chardi**: The garbhini will not be able to take adequate quantity of food which is required for the nourishment, as the output will be more than the intake which leads to dehydration and malnutrition. In these condition, iron supplementation can’t be given as it increases the frequency of nausea and vomiting.

5. **Ati amla sevana**: Excessive intake of Amla rasa leads to shoshana of the dhatu and ojakshaya. Amla atiyoga causes pitta vrudhi, rakta dushti, anga shaitilyata and other pitta vikaras.

6. **Vegadharana**: it produces dosha prakopa and chardi veganigrahana which leads to pandu and many other disorders.

7. **Bhaya, Krodha, Kama, Shoka, Chinta**: all these lead to dosha prakopa which can lead to pandu.

Some of the main symptoms of pandu in garbhini are: shrama, balahani, gurugatrata, shota, brama, panduta etc....

**Causes of Anaemia During Pregnancy**: 

1. Reduced intake or absorption of iron due to faulty dietetic habits, loss of appetite, vomiting in pregnancy and due to low socioeconomic status.
2. Excess demand of iron due to multiple pregnancy, recurrent pregnancies.
3. Pre-pregnant health status is poor due to low iron reserve as majority of the women in the tropics actually start pregnancy on pre-existing anaemia state.
4. Blood loss due to worm infestation, bleeding haemorrhoids, pre-pregnancy menorrhagia etc.causes iron deficiency.

**Clinical Features of Anaemia During Pregnancy**: 
Clinical symptoms and signs of iron deficiency anaemia in pregnancy are usually nonspecific, unless the anaemia is severe. Fatigue is the most common symptom. Patients may complain of pallor,
weakness, headache, palpitations, dizziness, dyspnoea and irritability

DISCUSSION

Anaemia is one of the commonest medical disorders of high incidence in developing and underdeveloped countries with increased maternal and fetal mortality, morbidity. There are different types of anaemia explained. Deficiency anaemias have a very high global incidence affecting approximately 20% of the world’s population. Nearly of the individual with iron deficiency progress to iron deficiency anaemia.

Samprapti:

In general, the causes that have been explained earlier under the heading of nidana will give rise to vitiation of three doshas, it is up held by charaka that all three doshas are involved in pandu roga, however pitta is the dominant dosha that is greatly involved irrespective of the type of pandu. Such being the case the vitiated pitta along with other doshas result in dhatu pradooshana principally of rasa and rakta. Thus, invariably resulting in rakta kshaya. It is very well established in samhitas that when rakta kshaya is there the consecutive dhatu generally manifests kshaya lakshanas. It is in fact that the dhatu poshana and stiratha basically depends upon prakruta rakta circulating all over the body. The rakta kshaya apparently leads to nissara 8,9. Nissara refers to the lack of essence from the dhatus. The ancient authors like Charaka, Sushruta and Vagbhata have commented that pitta vrdhi and rakta kshaya are the predominant entities that gives rise to dhatu shaithilya which is reffered to as kshaya as in the dhatu kshaya is predominant out come of panduroga samprapti. The pitta so vitiated and the rakta that has undergone kshaya, along with other doshas when being circulated all over the body, the normal complexion of the body is notably altered. This condition is stressed in samhitas as hata prabha or loss of complexion associated with vivarnata that is whitish yellow colouration of the skin, netra, jiwha, nakha etc.

In garbhini due to lack of nourishment of maternal dhatus since the rasa formed in the mother is utilized to nourish the fetus which leads to rakta kshaya in the mother and will lead to pandu roga.

Pregnancy is associated with physiological changes that results in increased plasma volume and red blood cells and leads to the reduction in concentration of circulating nutrient-binding proteins and micronutrients. These changes which occur in the body physiology become associated with malnutrition in many developing countries of the world, leading to micronutrient deficiency states, such as Anaemia. Pregnancy is a time period in which requirement of iron is greater than normal as compare to absorbable iron intake hence iron deficiency takes place which leads to anaemia. Most of the women start their pregnancy with moderately or completely depleted iron reserves and the severity of the anaemia is co-related with the amount of iron reserves.

Pregnancy is the time when, there is a great demand for iron to meet the requirement of increasing red blood cells and other quickly developing cells mass expansion in the mother. The fetal and placental blood and blood loss at delivery is another indication for providing extra iron in the second and third trimester of pregnancy some times in association with folic acid.

Chikista:
Acharya charaka\(^{10}\) says that pregnant woman is to be treated cautiously as if one is walking with a pot full of oil in hand without letting a drop to fall. As vitiated do\(\text{s}\)has can result in various undesirable effect over herself and the growing fetus. Even though in pandu roga the principle line of treatment is shodhana and shaman, shodhana is contraindicated Garbhini should be treated like annada\(^{11}\). Our treatment should not harm the health of the garbhini as well as growing fetus. It should be mrudu, madhura rasatmaka dravyas. Shaman chikitsa is ideal while treating garbhini pandu.

CONCLUSION:

Probably for this reason, the concept of Garbhini Paricharya\(^{12}\) in Ayurveda followed by all pregnant women is also an essential factor for the well being of both mother and fetus. It is confirmed by the paricharya of nine months of pregnancy that more emphasis is given on intake of Madhura, Sheeta guna ahara. All through pregnancy she is advised to consume milk and ghee. Dravyas which are from madhura varga are recommended during this period. Brumhana property of drugs are beneficial during pregnancy. Madhura, sheeta dravyas are having brumhana properties which gives good health benefits to the woman during pregnancy\(^{13,14}\).

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Corresponding Author:
Dr. Tejaswini K.R, Assistant Professor, Prasuti Tantra & Stree Roga JSS Ayurveda Medical College & Hospital, Mysuru-570028
Email-tejteju9@gmail.com

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