

FINO

EIJO: Journal of Ayurveda, Herbal Medicine and Innovative Research (EIJO - AHMIR)

Einstein International Journal Organization (EIJO)

Available Online at: www.eijo.in

Volume – 2, Issue – 4, July – August - 2017, Page No.: 10 - 12

The Review Article of Garbhini Pandu (Iron Deficiency Anemia)

Vd. Vaidya Reshma Yogesh

GUIDE: Vd. Sonal S. Wagh

Sangam Sevabhavi Trust Ayurved Mahavidyalaya Sangamner, Maharashtra

Abstract

Pregnancy is a state in which all the physiological functions are hyper stimulated in order to meet the demands of the gowing foet us. Anemia in pregnancy is a global public health issue facing the world today. Which involves the fall in the hemoglobin concentration. In Ayurveda anemia in pregnancy can be correlated with garbhini pandu. Iron deficiency anemia results in decrease work productivity, increase child mortality, maternal mortality, slowed child development. The features are iron deficiency anemia (IDA) share lot similarities with lakshnas of pandu roga. According to WHO, anemia in pregnancy is present when the hemoglobin concentration in the peripheral blood is 11gm/100ml or less. During pregnancy plasma volume expand (maximum around 32week) resulting in hemoglobin dilution. For this reason Hb level below 10gm/dl at any time during pregnancy is considered anemia. Hemoglobin level at or below 9gm/dl required detailed investigation and appropriate treatment. Anemia is responsible for 20% of maternal death in the third world countries.

Keywords: Garbhini Pandu, Pregnancy, Iron Deficiency Anemia.

Introduction

Iron deficiency anemia is very much prevalence in the tropics particularly amongst woman of child bearing age, specialy in the under privileged sector, in healthy individual, a daily intake of dietary iron of 15mg can replenish the daily loss about 1.5mg of iron assuming and absorption rate of 10% but in the tropical countries specially with low socioeconomical group. The daily requirement is likely to be more because of the pregnancy The excess demand of iron required in pregnancy due to multiple pregnancy, woman with rapidly recurrent pregnancy (within 2year), teenager pregnancy are quite prevalent (Before the age of 21year).

Anemia is defined as reduction in circulating hemoglobin below the critical level, the normal hemoglobin concentration in the body is between 12-14%. In India and most of the other developing countries the lower limit is often excepted 10gm%.

Anemia is the most common nutritional disorder in the world. WHO has estimated that prevalence of anemia in developed and developing countries in pregnant woman is 14% and 15%. The prevalence of anemia in low income pregnant woman in the 1st, 2nd and 3rd trimester is 9%, 14% and 37% respectively. India has highest prevalence of anemia which contributes to about 80% of maternal death due to anemia.

Need of study

Anemia in pregnancy can cause complications like preeclampsia, intercurent infection, preterm labour during pregnancy. During labour uterine intertia, post partum hemorrhage (PPH) and also shock can occur. Thus antenatal care regarding

anemia can reduce maternal mortality by avoiding the complications intrauterine growth retardation (IUDR) and low birth weight sometimes lead to poor growth in infancy, childhood and adolescence and contribute to low adult height.

Pandu in Ayurveda can be correlated with anemia. The description of Garbhini pandu is not directly given in ayurvedic samhitas. So to elaborate the concept of garbhini pandu from ancient of ayurvedic text are studied.

Causes

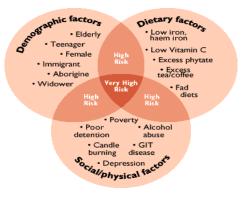
Heavy menstrual bleeding, blood loss during childbirth are the most common cause of IAD I woman of child bearing age. Inability to absorption iron due to certain disorders surgery that affecting the intestine.

Sing and symptoms

The common clinical presentation of anemia in pregnancy are:

- Pallor Skin
- Pale Nails
- Pale Tongue
- Glossitis
- Fatigue
- Anorexia
- Indigestion
- Palpitation
- Shortening Of Breath
- Giddiness
- Odema
- Pica
- Loss Of Appitation
- Hb Less Than 10gm%.

Factors affecting on anemia in pregnancy:-



Treatment

By reviewing the above selection criteria the treatment aspect of garbhini pandu given as follows: According to kashyap Garbhini need not to be considered as a separate subject. Snehan and virechan are adviced as general line of treatment in pandu vyadhi but there are limitations are treatment in antenatal phase.

Ayurvedic classic have state that the rules and behavior during pregnancy in antenatal care which is known as garbhini paricharya.

Treatment of Anemia in Pregnancy

- Diet: A balance diet rich in protience, iron and vitamins and which is easily assimilable should be prescribed.
- To improve the appetite and digestion, preparation containing acid pepsin may be given trice daily after meals.
- To eradicate evea a minimal septic focus by appropriate antibiotic therapy.
- Effective therapy to cure the disease contributing to the cause of anemia.

References

- [1]. Bhramanand tripathi, editor, charak samhita of charaka, vol;2. Chikitsasthana chapter-16, verse no-44-46,re-edition Varanasi- chaukhamba surbharati prakashana, 2007, 598-599.
- [2]. Acharya vidyadhar Shukla, prof. Rvidatta Tripathi, editor charak samhita of charak vol.1, sharirstana, chapter4 verse no. 22, chaukhamba surbharti prakashan, 1998, pg-732.
- [3]. D.c. Datta textbook of obstetrics, new contolbook agency, Delhi 7th edition 2010, chaper 19. Pg-264.
- [4]. Acharya vidyadha Shukla, Prof. Ravidatta Tripathi, editor, charak samhita of charaka, vol.2, chikitsastana, chapter 16, verse no. 42 chaukhamba surbharti prakashan, 2002, 401.
- [5]. D.C. Datta, textbook of obstetrics, new central book agency, Delhi 7th edition 2010, chapter 19, page 260-261.
- [6]. D.C. Datta, textbook of obstetrics, new central book agency, Delhi 7th edition 2010, chapter 19, page-261-262.

Corresponding Author:

Vd. Vaidya Reshma Yogesh

Sangam Sevabhavi Trust Ayurved Mahavidyalaya Sangamner, Maharashtra