

Ayurvedic Vimarash Mridabhakshanajanya Pandu Rog : A Review

VD. Pankaj Kumar Singh^{1*}, Prof. Mithilesh Verma², Lalima Singh³

¹(Dr. Kuwar) (M.D. (Ay.) Kaumarabhritya - Bal Rog & P.G.D.Y.) Associate Professor, Dept. Of Kaumarabhritya, Institute of Ayush Medical Sciences, Lucknow (U.P.)

²(M.D. (Ay.), Ph.D. (Kaumarabhritya- Bal Rog) Principal Cum Superintendent & Professor Skd Govt. Ayurvedic College & Hospital, Muzaffarnagar (U.P.)

³(Dietician) F- 3140, Rajajipuram Colony, Lucknow, U.P. 226017

*Corresponding Author

DOI : <https://doi.org/10.51583/IJLTEMAS.2025.1411000071>

Received: 28 November 2025; Accepted: 04 December 2025; Published: 11 December 2025

ABSTRACT

Ayurveda is the most ancient system of medicine among the different system of medicine existing in the world. In the classification the disease Pandu felt in the group of Varna in which there are significant changes in the normal color of the body. The detail description of Pandu Roga and its classification starts form Ayurvedic Samhitas only. Most of the Acharyas have described five types of PanduRoga, ie. Vatika, Paittika, Kaphaja, Tridoshaja and Mridabhakshhanajanya Pandu. Acharya Charaka, Vagbhatta and Madhava have given Mridakabhakshanjanya type of Pandu. Major etiological factor is Mridabhakashana (soil eating). It may be considered as either oral ingestion of soil or use articles contaminated with soil as unclean hands and fingers or as improperly washed vegetables or eatables. At least one of the Dosha of the individual who has a habit of eating soil gets aggravated. The intake of astringent soil promotes Vata, the salty soil would provoke Pitta, while the intake of sweet soil generates Kapha. Due to the dry nature of the soil, it makes the tissues of the body dry. It will not be digested properly and as a result, it would block various channels of the body. This retards the power of the sensory and motor organs and also the bodily luster, potency and Ojas, thereby producing Pandu Roga which in turn destroys strength, color, and digestion of the patient.

Keywords: Pandu Roga, Acharya Charaka, Dosha

INTRODUCTION

Pandu Roga is a disease described in Ayurveda since time immemorial, the first references being found in Vedas. In Rigveda and Atharvaveda, Pandu has been described by the name of Vilohita, Halima and Haribha. The word Pandu is derived from 'Padi Nashane' Dhatu by adding 'ku' Pratyaya to it, the meaning of which is always taken in the sense of Nashana and as Pandu has been kept under the group which is classified and named according to the change in color. According to Sabdarnava 'Pandustupeetbhagardhketakidhulisannibham' means Pandu is like the color of pollen grains of Ketaki flower which is whitish yellow. The detail description of Pandu Roga and its classification starts form AyurvedicSamhitas only. Most of the Acharyas accepted the disease under five categories Vataja, Pittaja, Kaphaja, Sannipataja and Mridabhakshanajanya. This type of Pandu has been described in detail by AcharyaCharak, Vagbhatta, Madhava and Harita. Acharya Susruta has mentioned four types of Pandu. He excluded the Mridabhakshanjanya Pandu and he explain for this as the Mridabhakshanjanya Pandu may include in Vatadi Doshaja Pandu's according to Rasa Pradhanatva of Mruttika, Madhava has tried to clarify the classification given by Acharya Sushruta by explaining that Dosha Prakopa in the body occurs according to the Rasa of the Mruttika and thus may be included in that particular type. The reason for Acharya Charaka and Vagbhatta including MriddBhakshanjanya Pandu separately may be the specific treatment advised for it. Another reason for it could be that Acharya Charaka has not included Pandu in the symptoms of Krimi

Roga while Sushruta has done so (in Purishaja Krimi Lakshana), hereby eliminating the need of Mridahakshanjanya Pandu. In Harita Samhita Rukshana Pandu appear of Mriddabhakshanjanya Pandu.

MATERIAL AND METHODS

Nidana

Mritikadanshillasyakupyatantamomal, kashyamarutapittaushramadhrakapham

मृत्तिकादनशीलस्यकु प्यत्यान्यतमोमलः ।

कषायामारुतं, त्तिमुषरा, मधुराकफम || (ch/chi 16/27)

Mridabhakshanjanya Pandu develops in one who is prone to eat soil. Many time soils are eaten by young children and by elderly too due to ignorance. The earth or Soil of **Madhura Rasa** provokes the Kapha Dosha, the earth or soil of **Lavana rasa** provokes the Pitta Dosha, & the earth or Soil of **Kasaya Rasa** provokes the Vata dosha. Soil eating gives rise to three types of Pandu, viz., Vatika, Paittika and Kaphaja. Even though, this ailment is related to three Dosha, the soil eating is the most predominant causative factors of this type of Pandu. That is why this type of Pandu is separately categorized in as much as its signs, symptoms and treatment are different.

Chakrapani says, in spite of association of Dosha, it is named by earth and not Dosha as the former decides the specific symptoms and line of treatment. Acharya Harita has referred to this type of Pandu Roga as Rukshanah Proktah, referring to the main pathogenesis occurring in it i.e. it causes dryness in the body. He has also described the qualities of **five types of Bhoomi in the chapter on Jala Varna**. He has described that **Krishna Bhoomi** is Madhura and Ruksha in quality, while **Peeta Varnini** is Kashaya in Rasa, **Rakta Varna Bhoomi** is Tikta in Rasa and **Shweta (Sita) Bhoomi** is Madhura-Amla in Rasa and **Neela Bhoomi** is Katu in Rasa. This description of Harita samhita can help in the identification of Rasa of Bhoomi from its color. He has further stated that the water present in such kinds of Bhoomi also harbors the same characters as the Bhoomi itself. Hence, it may be possible to know the Rasa of Bhoomi from knowledge of the Rasa of water present there. Gangadhar Roy says that astringent earth etc. aggravates not only Vata etc. but due to specific nature aggravate Tridosha with predominance of one of the Doshas. He says though it aggravates Doshas, it causes the specific disorder and as such is Ubhaya hetu (causing aggravation of Dosha as well as specific disorder). Yogindranatha Sen says that in Susruta the type caused by earth-eating is included in Doshaja types.

Samprapti

Kopayeindrasadashivrakhydchh, puryatyvipakaveevsrotansinirudhichh.

Indriyadaambalamhatwatejoviryojasitatha, pandurogamkarotyasubalvarnagnishamanm.

कोऽियेन्मृत्सादीश्वं रौक्ष्याद्धच । रियत्यत्तिकै िस्रोतंसत्तनरुणत्तिच ।

इन्द्रियाणांबलंहत्वातेजोत्तियोजसीतथा । िण्डुरोगं करोत्याशुबलिणात्तिशनम् || (Ch. Chi- 16/28-29)

Soil enters in Amashaya it makes the Dhatusruksha as well as Sharirvaivarnya, also this Soil cannot be processed even slightly by the 'Jatharagni' for the Pachana and it gets in RasavahaSrotas in the same form as it was consumed & it forms an obstruction in these Srotas not to allow any physiologically needful substance to pass through. By this, the Indriyas of the Patient become weaker to receive their own Arthas properly and genuinely. This also damage Saptadhatu (satva) & Jathragni.

Rupa

Sungandakshikutabhrusunapannabhmehinam, krimikosthaatisaryatemalamasrakkaphanivatam.

शुनगण्डाक्षीकू टभूः शुनात्रिभीमेहनः ।

तित्तमकोष्ठो । त्तसायेतमलंसासृक्कफात्तनितम् || (ch/chi 16/30)

The Features of this type of Pandu are-

- Shunaganda, akshikuta, bhru (Swelling in the cheeks, eyelids and eyebrows)
- Shhunapannabhimehanah (Swelling in feet, umbilical region and genitals)
- Krimi koshtha (Worm infestation)
- Atisara (Loose motion)
- Sasruk Kaphanvitam (Stool being associated with blood and mucus)

Features of Mriddbhakshana Janya Pandu Roga As Described in The Various Texts

Sr. no.	Lakshana	Charak	Vagbhatta	Madhavnidan
1	Anannasopha	-	-	+
2	Akshikutashotha	+	-	-
3	Asyashotha	+	+	+
4	Arsha	-	-	+
5	Atisara	-	-	+
6	Balkshaya	+	-	-
7	Gandashotha	+	+	+
8	Krimikoshtha	+	-	-
9	Mehanashotha	+	+	+
10	Nabhishotha	+	-	-
11	Purishasakapha	+	+	+
12	Purishasakrimi	-	+	-
13	Padashotha	+	+	+

The features described of this type of Pandu Roga mainly relate to development of Edema in the various body parts and worms in the gastrointestinal tract, resulting in the passage of excess stools or stool accompanied with mucous and blood. The passage among the three Dosha means one of Vata, Pitta and Kapha. The land rich in alkaline content and hence, non-cultivable is known as Usara. The functioning capacity is the strength of the organs. According to aachrya Jejjata, Teja is lustre while it has been interpreted as Usna (heat) by Cakrapani. The potency is known as virya. According to Parasara, Oja is the essence of all the Dhatus including the Shukra and Jejjata says, it means desire to overcome others. In the opinion of aachrya Jejjata, Krimi koshthata (worm infestation) refers to the general features of all Pandu varieties. Others opine that, this symptom is to be attributed

to Pandu caused by eating soil alone. In the opinion of Videha, consuming soil gives rise to such symptoms as paleness of the body drowsiness, lassitude, Dyspnoea, cough, emaciation, piles, depression, distaste, swelling of feet and hands, emaciation of the body and a weak digestive fire. Discussion The features described by Acharya Charaka mainly fall under three headings-Edema in various body parts (peri orbital, pedal, umbilical and genital) development of worms in the abdomen; and passage of loose stools and stools associated with mucous and blood. Majority of these features come under the category of worm infestation and their presentations. The edema in the various body parts could probably relate to the malnourishment occurring as a consequence of worm interfering with digestion and absorption process.

Eating of soil or ingestion of articles contaminated with soil has been scientifically accepted as the cause of anemia due to worm infestation and consequent blood loss. Even such minute amount of blood loss can result in iron deficiency anemia in due course of time, in individuals in whom the loss remains uncompensated. The infested worms suck blood from the intestinal mucosa and then they leave the site which continues to bleed for sometimes further, due to the anticoagulant released by the worms in order to facilitate their blood sucking. Such minute amount of blood loss if continues for a longer period of time, from multiple sites (due to the infestation of many worms) results in the loss of considerable amount of blood. Women with PICA have also been associated with vitamin deficiency of folate, and B12 along with that of iron in a study ranging to the extent of 82.4%, 41.2% and 70.6% respectively. Depending upon the Dosha, different types of treatment should be given to the patient suffering from Mridabhakshanajunya Pandu.

However, because of the specific nature of the causative factor this type of Pandu needs special type of treatment. The physician should give Tikshna Shodhana to the patient keeping in view the strength of the patient in order to remove the patient should soil from the boy. After the body is cleansed, the patient should be given different types of medicated Ghee for the promotion of strength. A recipe for causing aversion to soil has been described by Acharya Charak which consists of clay impregnated with Vidanga, Ela, Ativisa, Neemleaf, Pathya, Katurohini and Kutaja etc.



Fig: Child eating mud

Modern Co-Relation

PICA is the persistent ingestion of non-nutritive substances such as plaster, charcoal, paint and soil for at least 1 month, inappropriate to child's development level and cultural practice. It is the most common in children less than 5 years of age. Poor socioeconomic status, malnutrition and iron deficiency are commonly associated. Developmental delay, psychosocial stress (maternal deprivation, parental neglect and abuse) and other behavioral disorders can predispose to pica. Children with pica are at increased risk for lead poisoning and

parasitic infestations. Management comprises behavior modification, alleviating the psychosocial stress, screening for lead poisoning, de-worming and iron supplementation.

Although pica is observed most frequently in children, it is most common eating disorder in individual with developmental disabilities. In some societies pica is a culturally sanctioned practice and is not considered to be pathological. Pica may be benign or it may be associated with life threatening complications. Prevalence of pica is unknown because the disorder often is unrecognized and under reported. Although prevalence rates vary depending on the definition of pica, the characteristics of population sample and the methods used for data collection, pica is reported most commonly in children. Pica occurs throughout the world. The male to female ratio was 1.5: 1 almost as similar in other studies. Majority of children (64%) were less than 4 years in contrast to 71%-85% in other studies. Family history was positive in 44% cases in our study in accordance with other studies. Geophagia is the most common form of pica in people who live in poverty, tropics and tribe oriented societies. In some countries, Uganda for example, soil is available for purchase for purpose of ingestion. In our study clay was the material used by 53% children, Clay was the material used by 92% children as reported by Robinson et al. Intestinal parasites were identified in 63% of pica cases, whereas 70.3% has been reported in other studies. The parasites included Giardia, Lamblia, Ascariasis, Trichuris species etc. Initial hemoglobin values less than 8 gm % in 34.5% children were almost similar as reported in one of the studies. No differences were observed between the pica children and the anemic children without the pica habits in term of anamnestic, clinical and biological data in other studies.

Although the etiology of pica is unknown, numerous hypotheses have been advanced to explain the phenomenon, ranging from psychosocial causes of purely bio chemical origin. Cultural socioeconomic, organic and psychodynamic factor have been implicated. Firm empirical data supporting any of nutritional deficiency etiological hypotheses are absent. Deficiencies in iron, calcium, zinc and other nutrients (thiamine, niacin, vitamins B and C) have been associated with pica in some children with malnutrition. Whether the iron deficiency prompted the eating of clay or the inhibition of iron absorption caused by the ingestion of clay produced the iron deficiency is not known. Treatment with iron supplements led to cessation of pica in most children. Material deprivation, parental separation, parent neglect, child abuse and insufficient amount of parent child have been associated with pica. This was interaction not seen in our study. Lead toxicity is the most common poisoning associated with pica. Blood lead levels were not estimated in our study due to lack of facility. It should be suspected in children who take paint, pencil lead, plaster, or use surma. Physical manifestations of lead poisoning include neurological (irritability, ataxia in coordination, headache, cranial nerves paralysis, papilledema, encephalopathy, seizures coma etc) and gastro intestinal (constipation, abdominal pain, colic, vomiting, anorexia, diarrhea etc) some children may pull their own hair (trichotillomania) and swallow them. Lot of hair may be collected in the stomach which becomes palpable as a big lump in the upper abdominal (trichobezoar) particularly after meals.

Pica is quite common in childhood. The short family size, the working mothers, bottle-feeding are major contributing factors resulting in pica. The children who practice pica are prone to malnutrition, anemia, diarrhea, constipation and worm infestation. Geophagia is most frequently involved and there is often a family history of pica.

CONCLUSION

It can be concluded that Mridabhakshanjanya Pandu Roga is concerned with the vitiation of Tridosha with predominance of one of the Doshas. Majority of features come under the category of worm infestation and their presentations. Ayurvedic management has been effective to treat Mridabhakshanjanya Pandu Roga.

BIBLIOGRAPHY-

1. Charaka Samhita - Vidyotini Teeka: by- Vaidya Satya Narayan Shastri.
2. Sushruta Samhita - Ayurveda Tatva Sandeepika: by- Dr. Ambika Dutta Shastri.
3. Harit Samhita - Vidyotini Teeka by- Kaviraj Atridev Gupt.
4. Asthang Samgraha - Vidyotini Teeka by- Atri Dev Vidhalanker

5. Kashyap Samhita - Vidyotini Hindi Teeka by Shri Satyapal Bhisgachrya
6. Sharangdhar Samhita– Shri Pryag Dutt Sharma
7. Chakra Dutt – Teekakar Jagdish Prashad Triphati
8. Madhav Nidan - (Madhukosh Teeka) ShrisudharsanShastri
9. O.P. Ghai Essential Pediatrics, Seventh Edition. www.ijrap.net {IJRAP 2011, ISSN 2229-3566}