



## Cha. Chi. 16. Panduroga Chikitsitam

### Cha. Chi. 16 — Pāṇḍuroga Cikitsitam (Management of Pāṇḍu & Allied Paittika Disorders)

**What you will master:** classical **bheda-hetu-samprāpti-pūrvārūpa-lakṣaṇa-sādhyāsādhyatā** of **Pāṇḍu**, doṣa-wise variants including **mṛd-bhakṣaṇajanya Pāṇḍu**, general and doṣānusāra cikitsā, and the connected entities **Kāmala & Hālimaka**, along with exam-favourite **śamana-yogas**.

## 1) Pāṇḍuroga: Bheda, Hetu, Samprāpti, Pūrvārūpa, Sāmānya Lakṣaṇa

### 1.1 Bheda (types you must first recall)

- **Doṣaja:** Vātaja, Pittaja, Kaphaja, Tridoṣaja Pāṇḍu.
- **Viśeṣa:** Mṛd-bhakṣaṇajanya Pāṇḍu (earth-eating-induced).
- **Pariṇāma:** neglected Pāṇḍu progresses to Kāmala and, further, Kumbha-Kāmala or Hālimaka.

**Śloka (sense of classification):**

“दोषैः पृथग् समस्तैश्च पाण्डुरोगो विकल्प्यते ।” In Pāṇḍu, either a single doṣa or all together may dominate. [Cha. Chi. 16]

### 1.2 Hetu (etiology)

- **Āhāra:** viruddhāhāra, ati-amla-lavaṇa-kaṭu; atisevana of **kṣāra, dadhi, tila**, old/impure foods; **rūkṣa-ālpāhāra**; adhyāśana.
- **Vihāra:** diva-svapna, ratri-jāgaraṇa, avyāyāma/ati-vyāyāma, vegadhāraṇa, śoka-bhaya-krodha.
- **Mṛd-bhakṣaṇa (geophagia):** eating clay/earth—central cause of one special type.
- **Roga/auśadha:** recurrent **atisāra, raktapitta, kṛmi**, long pitta-provoking drugs.

**Śloka (mud-eating & pitta-rakta injury):**

“भृद्भक्षणान् रसान् हत्वा पित्तं रक्तं च दूषयेत् ।

ततो जायेत पाण्डुत्वं क्षीणधातून् नरं प्रति ॥” [Cha. Chi. 16]

Clay-eating injures rasa; vitiates pitta and rakta; the person, with depleted dhātus, becomes pallid (pāṇḍu).

### 1.3 Samprāpti (pathogenesis)

- **Agnimāndya** → doṣa (pitta-pradhāna) vikṛti → rasa-rakta duṣṭi → tvak/nakha/netra pīta-pāṇḍutva + bala-ojas kṣaya.
- In **mṛd-bhakṣaṇaja**, āma + **kṣāratā** of clay worsens **pitta-rakta** damage, blocking nutrient transits (**srotorodha**), causing **śoṭha, aruci, daurbalya**.
- **Vāta** adds **śūla/āṭopa**, **kapha** adds **mandāgni-gaurava**.

**Śloka (pitta-rakta seat):**

“रक्तपित्तसमुत्थानः पाण्डुरोगो विनिर्णयः ।” [Cha. Chi. 16]

### 1.4 Pūrvārūpa (premonitory)

- Early **aruci, klama, gaurava**, easy **dāha-tṛṣṇā, hṛdaya-daurbalya**, mild **śoṭha** at ankles, **mando'gni, hāridra-pīta** tinge inside lips/conjunctiva.

### 1.5 Sāmānya Lakṣaṇa (common features)

- **Pāṇḍutā/pītatā** of **tvak-nakha-netra, durbalatā, aruci, śvāsa on exertion, śoṭha** (feet/face), **śīghra-kheda, hṛdayaspandana, bhrama, mando'gni**.

**Śloka (signature):**

“त्वग्नखाक्षिपाण्डुत्वं देर्बल्यं श्रमोऽरुचिः ।

शवासः शोफो हृदिस्पन्दो मन्दाग्निर्वर्तते नरे ॥” [Cha. Chi. 16]

## 2) Doṣa-wise Pāṇḍu (including Mṛd-bhakṣaṇaja): Hetu-Lakṣaṇa-Sādhyāsādhyatā

Variant	Hetu (triggers)	Lakṣaṇa (exam-target lines)	Sādhyāsādhyatā (prognosis)
Vātaja	Rūkṣa-laghu āhāra, upavāsa, ati-vyāyāma, vegadhāraṇa	<b>Kāruṇya (emaciation), rukṣa-tvak, śūla/āṭopa, śīta-priyatā, viśīrṇa bala;</b> pallor with dry/rough feel	<b>Kṛcchra-sādhyā</b> (slow), better with <b>sneha-bṛmhaṇa</b>
Pittaja	Ati-uṣṇa, amla-lavaṇa-kaṭu, madyapāna, kṣāra	<b>Dāha-tṛṣṇā, haridra-pīta varṇa, amlīka-udgāra, raktapitta-saṅga,</b> yellow urine/stools	<b>Yāpya</b> to <b>kṛcchra</b> ; prone to <b>Kāmala</b>
Kaphaja	Guru-snigdha-madhura, diva-svapna, avyāyāma	<b>Gaurava, śīta-sparśa, śveta-pāṇḍutā, mandāgni, praseka, tandra,</b> thick tongue coat	<b>Sukha/Kṛcchra-sādhyā</b> if young, nava
Tridoṣaja	Mixed faulty diet/lifestyle, chronicity	<b>Sarva-doṣa liṅga</b> mixed; swelling + burning + pain	<b>Duṣṣādhyā,</b> often progressive
Mṛd-bhakṣaṇaja	Eating clay/earth routinely	<b>Pāṇḍutā, daurbalya, kṛśatā + udār-śūla/āṭopa, kabakaṣṭha-vedanā, malāsaṅga;</b> often <b>kṛmi-saṃsarga</b>	<b>Yāpya/Kṛcchra;</b> correct habit + <b>dīpana-pācana-bṛmhaṇa</b> needed

**Sādhyāsādhyatā—general rules:** Nava, eka-doṣa, bala-yukta → better; dīrgha-kāla, bahu-doṣa, bahu-lakṣaṇa, kṣaya, or pravṛddha Kāmala/Hālimaka → poor.

## 3) Pāṇḍuroga Cikitsā — Sāmānya & Doṣānusāra

### 3.1 Sāmānya Cikitsā Sūtra (core steps)

1. **Nidāna-parivarjana + Agnidīpana-Āmapācana** first (especially in mṛd-bhakṣaṇaja/kapha-pradhāna).
2. **Raktaprasādana-Pittaśamana** (coolants, tikta-madhura dravyas, ghṛta-kṣīra yuktis).
3. **Rasāyana-Bṛmhaṇa** for **rasa-rakta-ojas** restoration (ghṛta/mandūra preparations).
4. **Śodhana** only after āma-kṣaya & bala-parīkṣā:
  - **Pittaja/Tridoṣaja:** **Mṛdu virecana** (trivṛt/dravantī yuktis), then **ghṛta-rasāyana**.
  - **Kaphaja:** **Vamana** (saindhava + yaṣṭimadhu etc.) then **dīpana-pācana**.
  - **Vātaja:** **Bastī + snehapāna** after dīpana.

**Śloka (treatment tenor):**

“दीपनेन पचनेन रसान्नपानसंयमैः ।

रक्तपित्तप्रशमनैः पाण्डुं शमयते बुधः ॥” [Cha. Chi. 16]

### 3.2 Doṣānusāra pointers

- **Vātaja:** **Sneha-bastī, māṃsa-rasa (jāṅgala), ghṛta** with **daśamūla-pippalī**; warm, easy foods.
- **Pittaja:** **Tikta-ghṛta, kṣīra-yukta pāka, drākṣā-yaṣṭimadhu, śītalaseka;** avoid kṣāra/amla.
- **Kaphaja:** **Kaṭu-tikta-kaṣāya** dīpana; **takra prayoga; haritakī-citraka-trikaṭu;** light laghu-yūṣa.
- **Mṛd-bhakṣaṇaja:** stop mud; **dīpana-kṣāra in micro-doses,** antilithic/kṛmi-hara add-ons; later **mandūra-rasāyana**.



**Pathya (write at least 4):** warm laghu-annapāna, **yavāgū/yūṣa**, **drākṣā-yaṣṭimadhu siddha kṣīra**, **śākāhāra** (non-slimy), **takra** in kapha states.

**Apathya:** day-sleep (kapha), late-nights (pitta-vāta), sour-salty-spicy excess, stale food, alcohol in pittaja, clay/soil chewing.

## 4) Kāmala & Hālimaka — Bheda-Lakṣaṇa-Cikitsā

### 4.1 Kāmala (icteric syndrome in Ayurvedic parlance)

- **Bheda (in Charaka tradition):**

1. **Kāmala** (pitta overflow into rasa-rakta with yellow discoloration),
2. **Kumbha-Kāmala** (stubborn, obstructive/retentive type; deeper channels affected; more severe).

- **Lakṣaṇa (core):** **Haridra-pīta tvak-netra-nakha**, **pīta-mūtra**, **mṛdu mala** or **māla-avarodha** (in kumbha type), **dāha-tṛṣṇā**, **aruci**, **kara-pāda-tāpa**, **śyāva-rājī** of veins in advanced.

- **Cikitsā:**

- **Kāmala:** **Virecana-pradhāna**, **tikta-madhura ghṛta**, **kṣīra-pāna**, **drākṣādi**; **kāñji/takra** judiciously if kapha-āvaraṇa.
- **Kumbha-Kāmala:** stronger **virecana**, **kṣāra-yoga** in measured fashion, **gomūtra-yukta** prayogas in kapha-samsarga; strict **pathya** and **alpāmbu-niyama**.

**Śloka (progression):**

“पाण्डोर्जातः प्रकोपेण पित्तस्य कमलो भवेत् ।

तत्रापि यः कफावृत्तः स भवेत् कुम्भकः पुनः ॥” [Cha. Chi. 16]

### 4.2 Hālimaka (greenish-violaceous chronic sequel)

- **Origin:** often **pariṇāma** of **Kāmala** (especially mishandled), with **vāta-pitta** entanglement.
- **Lakṣaṇa:** **Hari-kṛṣṇa varṇa** of skin, **durbalatā**, **bhrama**, **glāni**, **aruci**, **śīta-priyatā** with **dāha**, mixed doṣa features.
- **Cikitsā:** **Samśodhana** cautiously (mṛdu-virecana after dīpana), **tikta-madhura ghṛta**, **rasāyana-br̥mhaṇa**; avoid rātrau-jāgaraṇa, krodha, and sour-salty foods.

## 5) Śamana Yogas (high-yield formulary)

**Write the name → key dravyas → typical dose/anupāna → when to choose.** Formulations below are widely taught for Pāṇḍu-Kāmala contexts (Charaka-consistent reasoning).

### 5.1 Navāyasa Cūrṇa (9-ingredient iron tonic)

**Sāmagrī (common school pattern):** **Loha bhasma** + **Triphala (Haritākī, Bibhitaka, Āmalakī)** + **Trikaṭu (Pippalī, Marica, Śuṅṭhī)** + **Musta** + **Citraka/Viḍaṅga** (one of these to make nine).

**Karma:** **Raktavardhana**, **Agnidīpana-Āmapācana**, **Plīhā-hara**.

**Māta:** 2-3 g with **madhu** + **ghṛta** or **takra** after meals; course 6-8 weeks in **Pāṇḍu**.

### 5.2 Maṅḍūra Vaṭaka (Mandura tablet)

**Sāmagrī:** **Śuddha Maṅḍūra** with **Triphala**, **Trikaṭu**, **Citraka**, **Pippalī-mūla**, **Viḍaṅga**, **Musta**, **Hingu**, **Saindhava**, bound with **adhu/gomūtra bhāvanā** as per paddhati.

**Karma:** **Rakta-varadhana**, **Plīhā-yakṛt-śothahara**, relieves **āma-mala saṅga**.

**Māta:** 250-500 mg BD/TID with **takra/gomūtra-jala/ardraka-svarasa** + **madhu** according to doṣa.



### 5.3 Yogarāja (Yogarāja Guggulu tradition—vāta-kapha srotoshodhana)

**Sāmagrī (essence):** Guggulu processed with **Triphala, Trikaṭu, Citraka, Pippalī-mūla, Ajmodā, Devadāru, Musta, Vidanga** etc.

**Use in Pāṇḍu:** where **vāta-kapha-āvaraṇa, plihā-śoṭha, ādhmāna** persist; adds **dīpana-mārga-śodhana** with iron tonics.

**Māta:** 1-2 g daily after food with **uṣṇa-jala/takra**.

### 5.4 Dādimādyā Ghṛta (Pomegranate-based medicated ghee)

**Idea:** Dādimā with **trijātaka, madhura-dravya, yaṣṭimadhu** cooked in ghṛta—**dīpana-raktaprasādana**, good in **pittaja Pāṇḍu** with **aruci/amlapitta** shades.

**Māta:** 10-15 ml OD/BD with warm **kṣīra** or **yavāgū**.

### 5.5 Punarnavā Maṇḍūra

**Sāmagrī:** **Punarnavā** kvātha + **Maṇḍūra** with **Triphala, Trikaṭu, Citraka, Pippalī-mūla, Devadāru, Vidanga, Gokṣura**; bhāvanā with **Punarnavā**.

**Karma:** **Rakta-varadhana** with **śoṭha-hara (diuretic-like)**—ideal in **Pāṇḍu** + **Śvayathu/plihā-yakṛt enlargement**.

**Māta:** 1-2 tablets (250-500 mg) BD after meals with **takra/uṣṇa-jala**.

**Also useful (recall names):** **Citrakādi Vaṭi/Guṭikā** (āma-pācana), **Bhu-nimba-ādi Cūrṇa** (tikta-dīpana), **Drākṣā-yaṣṭimadhu siddha kṣīra** (pitta-śamana), **Loha-āsava, Āmalakī-rasa-yoga** (rasāyana support).

## 6) Takra & Sneha — where they fit in Pāṇḍu

- **Takra-prayoga:** best in **kapha-saṃsarga Pāṇḍu** or **post-śodhana—deepana-grāhi** without pitta-prakopa (madhura-vipāka). Use spiced **takra** (yavāni-saindhava-pippalī) after meals.
- **Sneha-prayoga:** indicated when **rūkṣa/upavāsa** led to **agni-sadana** with **vāta-anubandha**—choose **tikta-madhura ghṛta**, small, supervised doses; **avoid atisneha** in kapha-lābha states.

## 7) Short differentials (viva-oriented)

- **Pāṇḍu vs Kāmala:** Pāṇḍu = pallor ± mild pīta; **Kāmala** = **haridra-pīta** widespread + **pīta mūtra, dāha-tṛṣṇā**, **faster onset** after pitta flare.
- **Kāmala vs Kumbha-Kāmala:** the latter **stubborn, obstructive**, deeper **srotas** involved; more **śoṭha, kandu, māla-avarodha**.
- **Kāmala vs Hālimaka:** **Hālimaka** shows **hari-kṛṣṇa varṇa**, profound **daurbalya, mixed V-P signs**; chronic and relapsing.

## 8) Devanāgarī Quotable Lines (use in answers)

#### 1. Mud-eating Pāṇḍu chain:

“मृद्भक्षणाद् रसान् हत्वा पित्तं रक्तं च दूषयेत् ।

ततो जायेत पाण्डुत्वं क्षीणधातून् नरं प्रति ॥” [Cha. Chi. 16]

#### 2. Common Pāṇḍu signs (one-liner):

“त्वग्नखाक्षिपाण्डुत्वं दैर्बल्यं श्रमोऽरुचिः ।

शवासः शोफो हृदिस्पन्दो मन्दाग्निर्वर्तते नरे ॥” [Cha. Chi. 16]



3. **Progression to Kāmala/Kumbha-Kāmala:**  
“पाण्डोर्जातः... कमलो..., कफवृत्ते... कुम्भकः।” [Cha. Chi. 16]

References indicate Charaka Saṃhitā, Cikitsāsthāna 16 (Pāṇḍuroga Cikitsitam).

## Assessment (Exam-ready)

### A. Long Essays (10 marks each)

1. **Pāṇḍuroga**—write **bheda, hetu, samprāpti, pūrvārūpa, sāmānya-lakṣaṇa** with two Devanāgarī lines. Add a doṣānusāra treatment flow.
2. **Mṛd-bhakṣaṇajanya Pāṇḍu**—trace the path from clay-eating to pitta-rakta duṣṭi and management (āma-pācana → raktaprasādana → mandūra-rasāyana).
3. **Kāmala & Hālimaka**—bheda, lakṣaṇa, and cikitsā. Contrast **Kāmala** vs **Kumbha-Kāmala**, and explain how Hālimaka emerges.

### B. Short Notes (5 marks each)

- a) **Sādhyāsādhyatā** in Pāṇḍu—list four good and four bad prognostic cues.
- b) **Pathya-Apathya** for Pittaja Pāṇḍu.
- c) **Punarnavā Maṇḍūra**—composition gist, dose, indications.
- d) **Navāyasa Cūrṇa**—why it works beyond “iron supply.”
- e) **Sneha-prayoga** in mandāgni—when yes, when no.
- f) **Takra** in kapha-saṃsarga Pāṇḍu—recipe and timing.

### C. MCQs (1 mark each)

1. **Hallmark that Pāṇḍu has moved to Kāmala** is:  
a) Shivering predominates b) **Haridra-pīta tvak-netra-nakha with pīta-mūtra** c) Severe udāvarta only d) Black stools → **b**
2. **First focus in mṛd-bhakṣaṇaja Pāṇḍu** is:  
a) Strong virecana b) **Āma-pācana + stop mud** c) Raktamokṣaṇa d) Only rasāyana → **b**
3. **Best add-on when Pāṇḍu + śoṭha** (plīhā-yakṛt involved):  
a) Navāyasa alone b) **Punarnavā Maṇḍūra** c) Haritakī cūrṇa only d) Kṣāra-prayoga → **b**
4. **Kaphaja Pāṇḍu** responds early to:  
a) Madhura-śītala diet b) **Dīpana with takra + trikaṭu** c) Ati-sneha pāna d) Dina-svapna → **b**
5. **Yogarāja (Guggulu school) in Pāṇḍu** serves mainly to:  
a) Increase pitta b) **Srotas-śodhana & vāta-kapha anulomana** c) Only hemostasis d) Only raktaprasādana → **b**
6. **Kumbha-Kāmala** is best described as:  
a) Pure vāta disorder b) **Obstructive/stubborn form of Kāmala** c) Pure kṛmi disorder d) Pure kapha with no pitta → **b**
7. **Mandūra Vaṭaka** chiefly does:  
a) Stambhana only b) **Rakta-vardhana with plīhā-yakṛt support** c) Vamana d) Vāta-uparodha → **b**
8. **Hālimaka** typically shows:  
a) Bright red skin b) **Hari-kṛṣṇa varṇa + daurbalya** c) Only swelling d) Only constipation → **b**

### D. SAQs (answer in 3-4 lines)

1. Enumerate **Pāṇḍu bheda** and add one hallmark sign for each.
2. Write the **samprāpti** of Pāṇḍu in two steps—from **agnimāndya** to **rasa-rakta duṣṭi**.
3. Give a crisp **doṣānusāra** management matrix (one line each for V/P/K).
4. Differentiate **Kāmala** vs **Kumbha-Kāmala** in two lines.
5. **Navāyasa Cūrṇa**—9 ingredients pattern and typical anupāna.



6. Role of **Sneha** in **mandāgni** with vāta-anubandha.

### One-minute Revision

- **Root:** agnimāndya → pitta-rakta duṣṭi → **pāṇḍutā**; untreated → **Kāmala** → **Kumbha-Kāmala/Hālimaka**.
- **Doṣa cues:** vāta = rukṣa-śūla; pitta = dāha-pīta; kapha = gaurava-tandra.
- **Treat:** dīpana-pācana → pitta-śamana & raktaprasādana → bṛṃhaṇa/rasāyana; śodhana where fit.
- **Write at least two yogas:** **Navāyasa**, **Punarnavā Maṇḍūra** (± **Maṇḍūra Vaṭaka**, **Dādimādyā Ghṛta**, **Yogarāja**).
- Keep two lines—**mṛd-bhakṣaṇa** verse & **pāṇḍu-lakṣaṇa** śloka—to anchor answers.

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