# A Descriptive Study on Causes of Paandu Rogham (Anaemia)

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#### **ABSTRACT**

**AIM:** The aim of this study is to identify the causes of Paandu rogham(Anaemia) diseases among the people of Tirunelveli and to create awareness for preventing the disease.

**METHODS:** A Cross sectional Descriptive study was conducted by 101 typical *Paandu*(Anaemia) patients were reporting to outpatient department at Government Siddha Medical College and hospital, Palayamkottai, Tirunelveli from June 2018 to September 2018.

**RESULTS:** In this study, *Paandu*(Anaemia) was more common in females 70.29% were as in male 29.7%. Aetiology of *Paandu* was menorrhagia 61.38%, diarrhoea and vomiting 54.46%, taking high salt and sour foods 39.6%, fever 34.65%, frequent tobacco chewing 25.74% .In this study concluded that 70.29% patients were eaten mixed diet.

**CONCLUSION:** According to the study in Siddha system of medicine has been described various causes of *Paandu Rogham* (Anaemia) is correlated in Siddha text books. This will be main role to Siddha physicians to early diagnose and prevention and treatment of the disease in Siddha concept. Further literary and clinical studies are necessitating in future.

**Key words:** Paandu rogham, veluppunoi. Sogai, Anaemia

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#### INTRODUCTION

Paandu rogham is condition that denotes the pallor of the body. The clinical condition in which pallor of the body occurs is also known as veluppu noi, sogai. It is described as a diseased condition in which the natural colour of the body including skin and the mucous membrane become pale. In "Yugivaithiya sinthamani 800", Yugimuni classified paandu noi into five types namely, vadha paandu, pitha paandu, kaba paandu, visha mukuttra paandu and paandu.Paandu noi is compared to anaemia. Globally, anaemia affects 1.62 billion peoples, which corresponds to 24.8% of population. At the end of the study I provide the descriptive details of causes of Paandu rogham (Anaemia) around my study area.

#### **METHODS**

This is a cross-sectional descriptive study. The population surveyed patients from the out patients ward at Government Siddha Medical College and Hospital, Palayamkottai, Tirunelveli, Tamilnadu, India from June 2018 to September 2018.

## **Proposed Methods**

Questionnaire completion times in a study of 101 subjects averaged with four months observation, and evaluations were positive regarding the instrument's length and ease of completion, and the subjects' willingness to complete serial forms and return them by direct interview and proper investigation. Reliability, factor analysis, and validity results were consistent in age, sex, and education subgroups. Satisfaction was moderately correlated with level of functions in the health status area in Tirunelveli and nearby side.

# **Study Population**

The research work is carried out of 101 patients attending OPD with symptoms of paandu noi. GSMC, Palayamkottai, during the period spanning from 1st June – mid of the September, 2018.

# **Subject Selection**

A Cross – sectional descripitive study was followed this project. The population of study will be confirmed the patients who come with the symptoms of inclusion criteria in OPD/IPD at Govt. Siddha medical college and Hospital, Palayamkottai from June 2018 to September 2018 All the records is subjected to screening test and enter in Screening Performa.

## **Data Collection Procedure**

The information will be collected via Indepth interview by using questionnaire. There are 28 questions are included in the questionnaire. Name, age, sex, educational qualification, height, weight, BMI, address, food habits, personal habits, medical history, causes taking high, salt and sour in diet, history of and vomiting, diarrhoea history of fever, osteo-arthritis, menorrhagia, systemic hypertension, dysentery and hematemesis, accidental injury, haemorrhoids, affected by hookworm liver disease, frequently infection and intake of tobacco, betel leaf, pica is the etiological causes to produce Panndu noi.

# **Data Analysis**

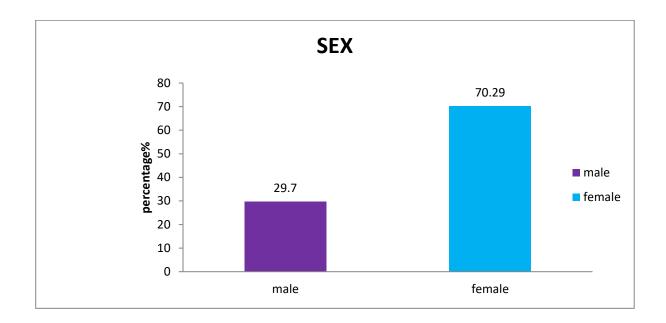
In this research, data analysis includes recording of key exposure /

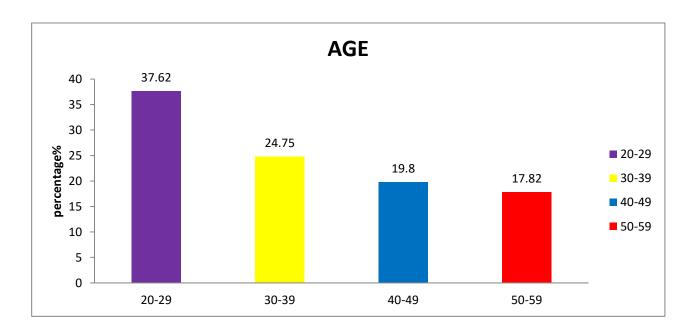
outcome variables: indicators to be calculated for the descriptive analysis. For an example if there is any connection between consuming alcohol and this disease? If there is any connection between betel leaf chewing and this disease? If any connection with frequent tobacco chewing and this disease, If there is any connection between intake more salt and sore in diet and the disease,. For those criteria were measured and analysis this project.

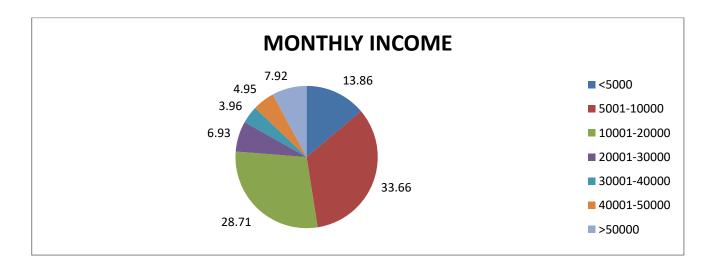
## **RESULTS AND DISCUSSION**

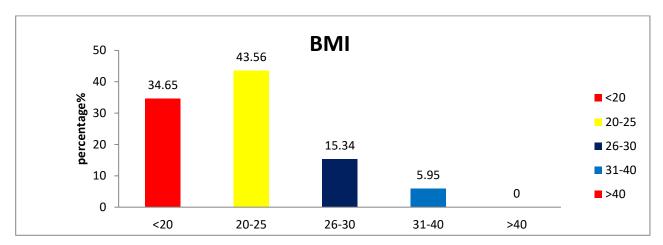
The evaluation of general clinical characteristics showed that practically one-third of the patients 30(29.70%) were male and 71 patients(70.29%) are females.

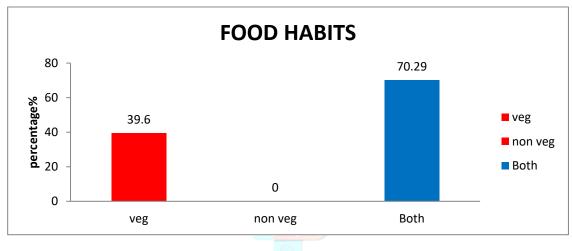
Among 101 patient, there is 38 patients(37.62%) are 20 to 29 age group, 25 patients(24.75%) are 30 to 39 age group, and 20 patients(19.80%) 40 to 49 age group and remaining patients are 50 to 59 age group. Among 101 patients, there is 61 patients (60.39%) are self employee, 28 patients (27.72%) are private

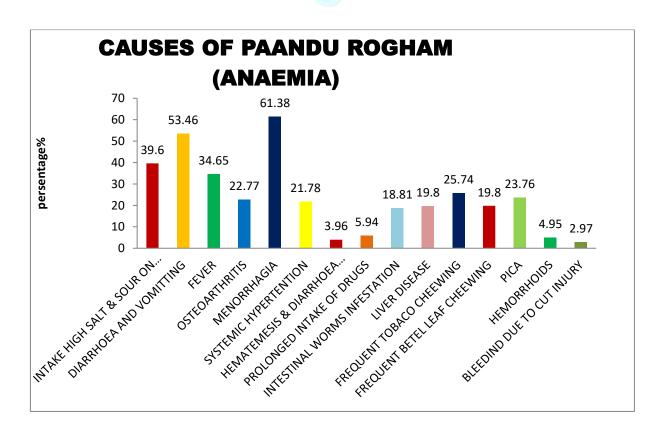












job and 12 patients(11.88%) are government employer.

And the among 101 patients77 patients (76.23%) are poor socio economic status, 16 patients (15.84%) are middle socio economic status and 8 patients (7.92%) are high socio economic status. Among 101 patients, there is patients(11.88%) are un educated , 43 patients (42.57%)are school education, and 46 patients (45.54) are degree level education. Among 101 patients, there is 44 patients (43.56%) are 20-25 BMI, 35 patients (34.65%) are <20 BMI, 16 patients(15.84%) are 26-30 BMI, 6 patients(5.95%) are 31-40 BMI.

Among 101 patients, ther is 16 patients (15.84%) have a habit of alcoholism and smoking, 13 patients (12.87%) have a habit of smoking only, and only 2 patients (1.98%) have a habit of alcoholism and remaining percentage of patients have a no habits of any alcoholism and smoking.

Among 101 patients, there is 22 patients (21.78%) have a SHT, 15 patients

(14.85%) have a diabetes and remaining percentage of patients does not have any medical history. Among 101 patients, there is 71 patients (70.29%) have a food habit of veg and non-veg, and 40 patients (39.60%) are pure vegetarian.

Among 101 patients, there is Paandu rogham(Anaemia) was more common in females 70.29%wereas in male 29.7%. Aetiology of Paandu rogham was menorrhagia 61.38%, diarrhoea and vomiting 54.46%, taking high salt and sour foods 39.6%, fever 34.65%, frequent tobacco chewing 25.74% .In this study concluded that 70.29% patients were eaten mixed diet.

### **CONCLUSION**

According to the study in Siddha system of medicine has been described various causes of *Paandu Rogham* (Anaemia) is correlated in Siddha text books. This will be main role to Siddha physicians to early diagnose and prevention and treatment of the disease in Siddha concept. Further literary and clinical studies are necessitating in future.

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