

Chapter-01

AN INTRODUCTION TO UNANI MEDICAL SYSTEM

Dr. Rehan Safee*

*Principal & HOD, Deptt. Of Tahaffuzi wa Samaji Tib,
Glocal Unani Medical College, Hospital & Research Centre,
Glocal University, Mirzapur Pole, Saharanpur, Uttar Pradesh.*

**Correspondence to: rehan@glocalunanicollege.in*

Dr. Mohd. Imlaque

*Astt. Professor, PSM Dept.
Glocal Unani Medical College, Hospital & Research Centre,
Glocal University, Mirzapur Pole, Saharanpur, Uttar Pradesh.*

DOI: <https://doi.org/10.52458/9789388996983.nsp2023.eb.ch-01>

Ch.Id:-GU/NSP/EB/HHJTUM/2023/Ch-01

ABSTRACT

*Unani Medical system is one of the oldest medical **systems** being practiced in the Indian subcontinent. It has its origin in Greece, scientifically developed by Arabs and flourished in Indian subcontinent, thus bringing together a rich blend of knowledge, culture and practices. It thrived in India during rule of Mughals and Nizams due to official patronage. **However**, during the British rule, it took a backseat with the advent of Allopathic medical system. But due to efforts and perseverance of Sharifi family, Azizi family, renowned Unani Physicians such as Hakeem Ajmal Khan Sb and Hakeem Abdul Hameed Sb., the Unani Medical system not only regained its lost glory, it became one the valued traditional medical system in India. Its foundation is well-established drug management concepts. It contains drugs which have natural identity and source.*

Keywords: *Unani Medical System, Natural drugs*

1. INTRODUCTION

The world is acquainted with the Unani Medical system as Unani Tibb, Arab medicine, or occasionally Islamic medicine. Although it has its roots in Greece (Unan), it is far basically used as a conventional medical system in South Asian nations. The name Unani comes from the Greek word "Ionian," which denotes understanding of the states of health and illness that affect the human body (loss of health). (Magner L, 2005). The ideas of the historical Greek physicians Buqrat (known to world as Hippocrates) and Jalinoos (Galen) serve as the muse for Unani medicine. It developed after accomplishing the Arabs thanks to methodical clinical research done by Arab scholar-physicists, specifically Ibn-e-Sina (Avicenna). The big body of Arabic medical understanding was translated from Greek. With the extra contributions of scientific knowledge from diverse nations of the Central, East and South Asia, Unani medicine additionally got to be known as Arabian medicine (Ency. Britannica, 2023).

2. THE FUNDAMENTALS OF UNANI MEDICAL SYSTEM

The practices of Unani physicians, which depended on natural healing, integrated the physical, mental, and spiritual aspects of life.

i. Al-Umoor- al-tabiyah (Fundamental Principles):

Al-umoor-al-tabiyah, the seven fundamental principles of Unani philosophy, are said to be harmoniously arranged and are thought to promote human health. The seven principles are Arkan (elements), Mizaj (temperament), akhlat (body humors), Aaza (organs), Arwah (vital spirit), Quwa (abilities or powers) and Afa'al (functions). The inherent physical composition of persons is maintained in equilibrium by the

interaction of these seven natural elements. The tabiyat (mudabbira-e-badan) is the ability of each person's constitution to self-regulate or maintain the seven constituents in equilibrium. (Ahmad SI, 1980).

ii. Arkan wa mizaj (Elements and temperament):

The fundamental composition of the human body is made up of arkan, which is composed of four simple, blended entities: Arz (earth), ma'a (water), naar (fire) and hawa (air) (Kabiruddin 1930). Due to phenomenon of ulfat e keemiya (the acceptance of a medicine by the body) and nafrat-e-keemiya (the rejection of medicine by the body), these elements constantly transform into different states of "genesis and lysis" (generation and degradation).

Warmth, coldness, moistness, and dryness are the four fundamental mizaj (temperaments). These single temperaments are combined into four more i.e. hot and dry, hot and moist, cold and dry & cold and moist. All living things in the universe, including all the plants, animals and the minerals, possess mizaj in varying degrees (Khaleefatullah, 2002). An individual's stable constitution, or health, is provided by the equipoise of their basic combination and ensuing mizaj, as assessed by tabiyah. A person's health deteriorates when their natural temperament changes, much as maintaining the right balance of the components keeps someone in good health. As a result, mizaj is crucial to understanding both the character of a disease and a person's normal physical, mental, and social aspects in Unani medical system. (Kabiruddin, 1934).

3. PRINCIPLE OF AKHLAT

Buqrat (Hippocrates) advanced the theory that the body's fluids or humors can be classified into four groups according to their color. Ibn-e-Sina later modified these groupings after Jalinoos. They are known by the names dum (blood), balgham (phlegm), safra (yellow bile) and sauda (black bile) in Unani practice. These humors have respective human temperaments known as sanguine, phlegmatic, choleric and melancholic. Each person is believed to have a unique humoral composition that is centered on how dominant a particular humor is in their constitution. A person's specific, appropriate and balanced humoral makeup—their quality and amount of humors—is considered to guarantee their health. Any imbalance or additional conditions indicate illness or sickness. (Razi, 2000).

4. TABIYAT AND ASBAB-E-SITTAH-ZAROORIAH'S RELATIONSHIP

An individual's internal strength or capability to tolerate or contest disease and to carry out typical physiological activities is recognized as tabiyat in the Unani School of medicine. Unani physicians maintain that they just provide assistance from "outside" by providing therapeutic relief because of the belief that only tabiyat is genuinely involved in actual healing a condition. If not adversely impacted, tabiyat can treat most disease or disorders without using what is essentially the body's and mind's built-in immune system (Ency. Britannica, 2023).

As per Unani practice of medicine, six essential elements known as asbab-e-sittah-zarooriah are crucial for developing a synchronised biological rhythm and, consequently, leading a balanced life (Razi Z., 1991).

Following are the six asbab-e-sittah-zarooriah:

- i. *Hawa (Air): A person's health and temperament are directly correlated with the air's quality which they breathe.*
- ii. *Makool-wo-mashroob (the food and drinks): The dietary value, along with the quality and amount of one's food and drink, are thought to assure physical health by bolstering tabiyat in. Age-appropriate diet programmes were prescribed by Unani doctors. For example, Jalinoos proposed that mother milk be provided to infants before to the teething phase, following the administration of a light and liquid meal. Young adults need to eat three times a day in order for their digestion to be in check (Fatma et al, 2021)*
- iii. *Harkat-wo-sakoon-e-jismani (Physical activity and repose): It accentuates the benefits of composed physical activity on a person's core resistance and the tabiyah.*
- iv. *Harkat-o-sakoon nafsani (Mental activity and repose): It stresses upon the concurrent participation of the mind in a range of mental and emotional tasks. Unani medical system maintains that the mind of the human being also requires ample stimulation and appropriate relaxation, exactly like the body does.*
- v. *Naum-o-yaqza (the sleep and wakefulness): It is among the concept of Unani medical system that a person's health and attentiveness depend on getting a certain amount of restorative sleep over the progression of a 24-hour (circadian) cycle.*
- vi. *Ihtebas wa Istifragh (Retaining and excretion): It views tabiyat as having an impact on and being planned by both food and liquid metabolism. As per the*

Unani practice, ingesting meals and liquids makes it easier for the body to get rid of extra and harmful chemicals. Therefore, certain advantageous by-products of the processes of kon-o-fasad (the genesis and lysis) are maintained inside the body while detrimental ones are eliminated in order to preserve a harmonious and synchronized tabiyat. (Fatma et al, 2021)

Unani practitioners believe that these six elements have an impact on how harmoniously the human mental and physical activities are co-ordinated. The Unani practice of medicine recognizes socio-economic, environmental and regional elements as secondary factors (asbab-e-ghair-zarooriah), which means they have an indirect impact on tabiyat. As per the Unani treatment process, carefully considering both the fundamental and secondary issues is necessary.

5. APPROACHES OF TREATMENT

Creating a routine to standardize and stabilize the environmental variables (such as air, water and food etc.) involved in illnesses and diseases is the first phase in the Unani method of medicine. Other means such as treatment with natural remedies, may be suggested if this turns out to be insufficient. Any therapy recommended by a **hakim function** as an external force to help the patient's tabiyat so that their health and sense of wellbeing can be restored.

The Unani Medical system considers all facets of the patient's well-being, while diagnosing and treating them. The main modes of treatment are Ilaj bi'l-Tadbeer (Regional therapy) Ilaj bi'l-Ghiza (Diet therapy), Ilaj bi'l-Dawa (Pharmacotherapy) and Ilaj bi'l-Yad (Surgery). The most successful method for advancing health and treating illness is seen to combine nutritional therapy and regimental therapy. The Unani Medical system has also highlighted the role that psychiatric care or Ilaj Nafsani plays in the treatment of a wide range of illnesses. Detailed descriptions and practices of surgical treatments and procedures are used for conditions which are not treatable with medication. Unani medicines are frequently processed using traditional preparation techniques that were first mentioned in Greco-Arabic medicine. Unani medicines can be taken alone, combined with other drugs to provide synergistic, antagonistic, or detoxifying effects, or they can be employed as simple measures for the efficient ingestion and assimilation (Tabri R, 1995)

Renowned Unani physician Ajmal Khan transformed Unani medicine in the 1920s by urging research on a variety of natural products that traditional healers had claimed could perform miraculous cures. Salimuzzaman Siddiqui, an Indian-born scientist with a focus on phytochemistry (the chemistry of plants), discovered powerful

components from a plant known as chhota chand (*Rauwolfia serpentina*) in India. The plant was identified as the basis of the bioactive compound reserpine through subsequent pharmacological studies. Reserpine has been in use in Western medicine as a sedative and an antihypertensive medication (reducing unusually high blood pressure). As a memorial to Khan, Siddiqui gave the derived medications, such as ajmaline and ajmalicine, his name (Ency. Britannica, 2023).

Upon endorsement by the World Health Organisation (WHO) in 1976, the traditional Unani medicine acquired popularity on a global scale. Numerous institutions in India have been conducting research and teaching Unani medicine system. For instance, the Central Council for Research in Unani Medicine (CCRUM), a project of the Indian government, made it easier to translate classical heritage, organise clinical trials, improve drug standardisation, and look into the toxicological and phytopharmacological properties of natural products that Unani physicians had long used.

Traditional Unani medicine advocated "regimental" remedies (tadabeer) for the managing of numerous acute and chronic illnesses. These treatments include massage, hammam (bath and sauna), karat (exercise), fasd (venesection, or opening a vein to let out blood), hijama (cupping), which involves drawing blood to the skin's surface using a glass cup or tube, and amal-e-kai (leeching), which involves bleeding a person with leeches. All those regimens' primary goal is to cleanse the body of pollutants or polluted blood. Ilaj-bil-yad, or surgical interventions, is a last resort.

6. CONCLUSION

The Unani medical system is comprehensive, but it has limitations in terms of application and efficacy, much like other medical systems. It is occasionally necessary for current pharmacognostic assessments (using a basic, descriptive pharmacology) to determine the legitimacy of the extensive materia medica, from botanical and animal to mineral sources, as documented in old Unani textbooks, before medications can be used. Furthermore, it is expensive to use valuable stones and minerals, which are the main components of many poly-formulations (drugs with several constituents), in Unani medicine. These supplies are frequently also unavailable, which makes treatment less efficient.

REFERENCES

1. Lois N. Magner. *History of Medicine*. 2nd Edition. New York: Taylor and Francis. 2005: p.192-193.
2. Britannica, The Editors of Encyclopaedia. "Unani medicine". Encyclopedia Britannica, 14 Jul. 2023, <https://www.britannica.com/science/Unani-medicine>. Accessed 20 October 2023
3. Ahmad SI. *An Introduction to al-Umūr Ṭabī'īyya Principles of Human Physiology in Tibb*. Delhi: Saini Printers; 1980.
4. Kabiruddin M, *Kulliyat-e-qanoon (Fundamentals of Law: Translaction)*, (SM Bashir and Sons, Lahore), 1930
5. Kabiruddin M, *Kulliyat-e-Nafeesi (Fundamentals by Nafeesi)*, (Mathbuaat-e-Sulemani, Lahore), 1934.
6. Khaleefathullah S, *Unani medicine*. In: *Traditional medicine in Asia*, edited by C R Roy & R U Muchatar, (WHO Regional Office for South East Asia, New Delhi), 2002, 31-46.
7. Razi AB. *Kitab-ul-Murshid*. Taraqqi urdu bureau, 2000, 54-58.
8. Razi Z. *Kitab Al Mansoor*, New Delhi: Central Council for Research in Unani Medicine. Ministry of Health and Family Welfare; 1991.
9. Fatma A, Parveen A, *Journal of Drug Delivery & Therapeutics*. 2021; 11(1):156-161
10. Tabri Mohammad. *Moalajat-ul- Buqratiya, (Urdu Translation) Vol.I*. New Delhi: CCRUM. 1995: p. 98-101.