

# Chapter-07

## **DIABETES MELLITUS IN THE CONTEXT OF UNANI MEDICAL SYSTEM**

**Dr. Mohd Imlaque\***

*Assistant Professor PSM Dept.,  
Glocal Unani Medical College, Hospital & Research Center,  
Glocal University, Mirzapur Pole, Saharanpur, Uttar Pradesh.  
\*Correspondence to: [imlaque@glocalunanicollege.in](mailto:imlaque@glocalunanicollege.in)*

**Dr. Rehan Safee**

*Professor, HOD & Principal of PSM Dept.,  
Glocal Unani Medical College, Hospital & Research Center,  
Glocal University, Mirzapur Pole, Saharanpur, Uttar Pradesh.*

**Dr. Arish Mohammad Khan Sherwani**

*Professor HOD of PSM Dept.  
National Institute of Unani Medicine, Bangalore.*

**DOI: <https://doi.org/10.52458/9789388996983.nsp2023.eb.ch-07>  
Ch.Id:-GU/NSP/EB/HHJTUM/2023/Ch-07**

## **ABSTRACT**

One of the oldest and best-known diseases in the world, diabetes mellitus (DM) is today understood to be a set of disorders with extensive health effects brought on by a variety of etiologies, environmental variables, and genetic factors. The notion of diabetes mellitus has existed in the ancient Unani System of Medicine (USM) for as long as this system has existed. Later, highly specialized and scientific study on its etiology and treatment was conducted by current Unani practitioners. The weather is *Sue Mizaj-Har Yabis Khilqi*, which is hot and dry. Early-stage diabetes can be treated using unani herbal therapy. Plant treatments have been used to treat diabetes since ancient times. Many of these plants, some of which are incredibly efficient, have recently been the subject of scientific research that has proven their efficacy.

**Keywords:** Diabetes, herbal, *Ziabetus Shakri*.

## **1. INTRODUCTION**

One of the oldest and best-known diseases in the world, diabetes mellitus (DM) is today understood to be a set of disorders with extensive health effects brought on by a variety of etiologies, environmental variables, and genetic *factors* (Ali, S. R.).

Hyperglycemia brought on by an absolute or relative lack of insulin or by the emergence of insulin resistance in the body characterizes this clinical condition.

Types of Diabetes Mellitus Basically there are two types of the disease.

- i. **Type 1 Diabetes Mellitus:** Diabetes mellitus that is insulin dependent is another name for it. a condition where the pancreas's ability to secrete insulin completely stops.
- ii. **Type 2 Diabetes Mellitus:** It is sometimes referred to as Insulin Independent Diabetes Mellitus (IIDM), a type of diabetes in which there is not an absolute lack of insulin but rather a relatively low amount of insulin being secreted by the pancreas or an insulin response to elevated blood sugar levels in the body. This particular sickness is more prevalent and has been latent for many years. When other disease processes are present, it frequently complicates the clinical picture (Ali, S. R.) (Hassan, B. A. R. 2013)

## **2. UNANI CONCEPT ABOUT DM**

However, there were no details of its classification or pathophysiology that were as clear as they are now. Nevertheless, its ancient philosophers studied its causes, symptoms, and treatment in a very amazing fashion. The notion of diabetes mellitus has existed in the ancient Unani System of Medicine (USM) for as long as this system has

existed. Later, highly specialized and scientific study on its etiology and treatment was conducted by current Unani practitioners. The father of medicine, Buqrat (460–377 BC), did not use the phrase but did explore its indications and symptoms in his works, such as frequent urination and bodily withering (Das, S. 2013).

The alternate words for diabetes used by the Roman physician Galen (129–200) were "dipsakos" for excessive thirst and "diarrhea urinosa" for excessive *urination* (Singh, M *et.al.*).

In his book *Alhawi*, Zakaria Razi (850–923), also known as Razes, stated that bad temperament and kidney weakness are the causes of diabetes mellitus<sup>1,5</sup>(Ali, S. R) (*Ojha JK & Divedi KN*).

Alam Ibne Sina (980–1037), often known as Avicenna, first precisely characterized the clinical characteristics of diabetes while highlighting its two main complications—low libido and gangrene formation (Ali, S. R *et al.*) (*White Jr, J. R. 2014*).

Aretaeus of Cappadocia (81–138 AD), a Greek philosopher, is credited with coining the term "diabetes" to describe frequent urine. Mellitus was subsequently added to it. Mellitus means to sweat, while Diabainein means to pass through (Kishore J 2016). from producing insulinase (*Razi, Zakariya 1980*).

### **Classical Unani Literature's Descriptions of Symptoms<sup>8,9</sup>(Hasan, I)( Ibn Sina 2007)**

- 1) Urination recurring
- 2) Extreme thirst
- 3) Urine appears white and loses consistency to resemble water.
- 4) Urine spilling
- 5) Unreasonable urination without a feeling of consumption
- 6) Urine incontinence.

### **Factors that predispose (Kishore J 2016) (Razi, Zakariya 1980)**

- 1) Unhealthy eating habits, fat, and poor nutrition
- 2) heaviness and obesity
- 3) Hypertension
- 4) decreased glucose resistance

- 5) unable to feed throughout pregnancy
- 6) familial history of diabetes
- 7) advancing age
- 8) Polycystic ovarian disorder
- 9) History of gestational diabetes

### **3. CAUSE OF TYPE I DIABETES**

The weather is Sue Mizaj-Har Yabis Khilqi, which is hot and dry. Increased heat and dryness cause energy (innate heat) to dissipate, thus causing Ratubat Gharizia (innate body fluid) to dissipate, which causes Asthenia. Although increased heat further impairs nutritive function, Tehseel (acceptance) and Ilsaaq (adherence) power are unaffected since both depend on Yabusat (dryness), which in this instance is extra enough to potentiate both<sup>8,11</sup> (Hasan, I) (Ansari, K. A. 2017).

Unused material (metabolic by-product) clogs organ spaces and hinders absorption, but liver-driven transport continues uninterrupted. Vessels are unable to carry their material, and when nutrition-loaded blood reaches the kidney, surplus leaks out due to increased Quwwate Jaziba (power of absorption) and the kidney's incapacity to utilise all of the material (Ibn Sina 2007) (Razi, Zakariya 1980).

Heat and dryness increase Quwwate Masika's (the power of retention), making it difficult for vessels to discharge their contents. As a result, the contents of the vessels begin to stick to the wall of the vessels (Razi, Zakariya 1980) (Qarshi MH, 2011).

### **4. CAUSE OF DIABETES TYPE II**

The phrase "Sue Mizaj-Barid Ratab" (excessively cold and wet) In excess of both (Barid hyperactive. As a result, organ interstices fill up with unneeded material, which causes blood to be overflowing with nutrients that start to show up in urine<sup>10,13</sup>(Razi, Zakariya 1980) (Khan MA 2006).

Ancient Unani doctors specifically list the following complications of Ziabetes Shakari:

- We may state that both the material and the causes for zooban (bodily emaciation), which develops as a result of extreme dehydration, are present. This results in an excess fat deposit. These characteristics give the body the ability to eliminate, or Quwa Dafi'ah, which cannot be eliminated by drinking water<sup>14,15</sup> (Rizwana, A. A., & Hafeel, M. H. M. 2015) Jurjani, (AH, 2010).

- Sexual dysfunctional collapse and diabetic gangrene (Hasan, I) (Khan MA 2006).
- general weakness<sup>13,16</sup>(Khan MA 2006) (Fazil, M et al.).

## **5. MANAGEMENT OF DIABETES MILLETS BY HERBAL MEDICINE**

Early-stage diabetes can be treated using unani herbal therapy. Plant treatments have been used to treat diabetes since ancient times. Many of these plants, some of which are incredibly efficient, have recently been the subject of scientific research that has proven their efficacy. Here, only those plants are discussed whose efficacy appears to be well-documented, reasonably non-toxic, and safe. Around 80% of people utilize herbal medications throughout the world<sup>10,17</sup>(Razi, Zakariya 1980) (Nazamuddin M 2013).

### **i. Karela (*Momordica charantia* Linn)**

It is well-known for having anti-diabetic effects. Additionally, it is abundant in micronutrients, which are necessary to ward off diabetes problems. Balsam pear, often referred to as bitter melon, is a tropical vegetable that is widely grown in Asia, Africa, and South America. It has long been used in folk medicine as a treatment for diabetes. Fresh fruit juice or fruit extract has been proven to significantly reduce blood sugar levels in both experimental and clinical tests<sup>10,18</sup>(Razi, Zakariya 1980) (Acherekar S & Satya N, 2000).

### **ii. Methi (*Trigonella foenum-graecum* Linn)**

Fenugreek seeds' antidiabetic benefits have been proven by experimental and clinical investigations. The defatted part of the seed, which contains the alkaloid trogonelline, nicotinic acid, and coumarin, contains the active ingredient for fenugreek's antidiabetic benefits.

### **iii. Jamun (*Eugenia jambolana* Linn)**

Eastern traditional medicine has traditionally used the fruit and seeds of the Jambul tree. After treatment, the extract from jamun pulp displayed hypoglycemic activity within 30 minutes, however the seeds from the same fruit need 24 hours. Serum insulin levels rose, and the extract also prevented the liver and kidney. (Dey L et al., 2002).

## 6. CONCLUSION

Despite significant advancements, the allopathic medical system is still not totally capable of regulating the disease. Chemical medications also cost a lot of money and have known, permanent negative effects. From dietary intervention regimental therapy, USM has several illness management facets. Therefore, it is imperative that we comprehend the disease's idea and unani approach to therapy. Experience has shown that using Unani medicine in combination with dietary changes and a change in lifestyle has a significant positive impact on managing the disease, as well as enhancing quality of life and reducing the likelihood of both short- and long-term problems.

## REFERENCES

1. Ali, S. R., Khan, K. Z., & Alam, M. T. *Physiopathology and Management of Diabetes Mellitus (Type 2) in Unani System of Medicine*.
2. Hassan, B. A. R. (2013). *Overview on diabetes mellitus (type 2). Chromatography Separation Techniques*, 4(2).
3. Das, S. (2013). *Prevention of diabetes—a historical note. Indian J. Hist. Sci*, 48, 625-642.
4. Singh, M., Kumar, N., Sood, S., Makkar, B., & Arora, V. (2010). *Historical milestones in diabetes. Australasian Medical Journal (Online)*, 3(13), 860.
5. Ojha JK, Divedi KN. *Concept of Diabetes Mellitus in Ancient Era. Journal of Diabetes Asso India*. 34(1), 37-41.
6. White Jr, J. R. (2014). *A brief history of the development of diabetes medications. Diabetes spectrum: a publication of the American Diabetes Association*, 27(2), 82.
7. Kishore J (2016). *Diabetes Mellitus: Facts and Prevention. Journal of Integrated Community Health*, 5(1),6.
8. Hasan, I. *Diabetes Mellitus in the Light of Unani System of Medicine. Diabetes*, 1(2).
9. Ibn Sina, *Al Qanoon Fil Tib*. (2007). (Urdu translation by Kantoori GH). Vol. II. New Delhi: Idara Kitabul Shifa, 1031- 33-34, 353-54.
10. Razi, Zakariya. (1980) *Alhavi Kabeer (Urdu translation) vol.VI, p.183-239*.New Delhi, CCRUM.
11. Ansari, K. A. (2017). *Diabetes and Unani herbal medicine: A review. Journal of Medicinal Plants*, 5(2), 361-363.
12. Qarshi MH, (2011). *Jameul Hikmat. New Delhi: Idara Kitabul Shifa*,2:864-70

13. Khan MA. (2006). *Romooze Aazm (Farsi)*. New Delhi: CCRUM 1:139-41.
14. Rizwana, A. A., & Hafeel, M. H. M. (2015). *Concept of Ziabetus shakari-Type 2 Diabetes Mellitus in Unani System of Medicine*.
15. Jurjani, AH, (2010). *Zakheera Khawzam Shahi (Translation by Hadi HK)*. Vol II. Part 6. 1st ed. Idara Kitabush Shifa, 540-541.
16. Fazil, M, Akram, M, and Kapoor, P. *Diabetes Mellitus Type-II (DM-II), and Disease Conviction: An Exploration of the possible causes*. *International Journal of Advances in Psychology Research YNM*. 1 (2) 16-21.
17. Nazamuddin M. (2013). *Evaluation of hypoglycemic activity of Qurs Tabasheer in experimentally induced diabetes in animal model [dissertation]*. Dept. of Ilmu Advia (Pharmacology), NIUM, Rajiv Gandhi University of Health Sciences (RGUHS), Bangalore, Karnataka, India.
18. Acherekar S, Satya N. (2000) *Medicinal plants for diabetes*. *J of endocrinology*,1(3):343-345.
19. Dey L, Attele AS, Yuan CS. (2002). *Alternative therapies for type 2 diabetes*. *Altern Med Rev* 7(1):45-58.