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SHARBAT-E-MAWEEZ IS EFFECTIVE IN SOO-UL-QINIYA BAWAJAH QILLAT-E-FAULAD (IRON DEFICIENCY ANEMIA) - A REVIEW

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ABSTRACT

Anemia is a condition in which the oxygen carrying capacity of blood is reduced. Various types of anemia are characterized by reduced numbers of RBCs or a decreased amount of hemoglobin in the blood. According to WHO, Haemoglobin (Hb) of less than 13.0 gm/dl in adult male, less than 12.0 gm/dl in adult non pregnant female and less than 11.0 gm/dl in pregnant female should be considered as evidence of anemia. Most of the unani physicians use the term Soo-ul-Qiniya, which is similar to anemia, with clinical features of Zauf-e-Kabid (Weakness of Liver), Zufr-e-Talqia (Nail brittleness) or Fasad-e-Mizaj (Abnormal Temperament), Zardi-wa-Sufaid Jild (Pallor & Yellowish discoloration) and Sudaa (Headache). In many Unani books of medicine, Sharbat-e-Maweez is suggested to use in Iron Deficiency Anemia. It is a good Nutrient and Haemopoitic drug. Its effects are, mawalid-e-dam (Haemopoitic), muqavvi-e-bah-wa-badan (Aphrodisiac & General body tonic), muqavvi-e-meda-wa-jigar (Stomachic & liver tonic). Sharbat is palatable and easy to administer form of Unani formulation.

INTRODUCTION

Soo-ul-Qiniya (Iron Deficiency Anemia): Soo-ul-Qiniya is a combination of two words “Soo and Qiniya” both are Arabic words ‘Soo’ means defect whereas; ‘Qiniya’ means treasure or assets. By continuing both words it become Soo-ul-Qiniya means defect in the asset of the body. According to classical Unani literature Soo-ul-Qiniya means defect in the blood. Soo-ul-Qiniya is the condition in which there is decrease in the amount of blood and alteration in its constituents with decrease in the number of Kuriyat-e-Hamrah (Red Blood Cell). When liver becomes functionally weak due to the alteration in its Mizaj (Temperament) it leads to deterioration of whole body. One of the most important causes of Soo-ul-Qiniya is severe malfunction of the liver due to the alteration in its temperaments. Soo-ul-Qiniya is a disorder of blood which refers to deterioration in the quality or quantity of blood due to decreased amount of iron in the body. Most of the unani physicians use the term Soo-ul-Qiniya, which is similar to anemia, with clinical features of Zauf-e-Kabid (Weakness of Liver), Zufr-e-Talqia (Nail brittleness) or Fasad-e-Mizaj (Abnormal Temperament), Zardiwa-Sufaid Jild (Pallor & Yellowish discoloration) and Sudaa (Headache). The term faqruddam was coined in 20th century before this period the term Soo-ul-Qiniya was used as its synonym. Hakeem Mohammad Kabiruddin (1894-1976AD) has described Soo-ul-Qiniya with synonyms of faqruddam, Qillat-ul-dam, Fasad-ul-dam. In this condition there is decrease in the amount of blood and alteration in its constituents with decrease in the number of kuriyat-e-hamrah (Red Blood Cell). One of the most important causes of Soo-ul-qiniya is severe malfunction of the liver due to alteration in its temperaments.

Various Unani physicians have described the change in the blood in their own ways. According to them, excessive bleeding, cessation of menstrual bleeding, pathology in the liver and stomach etc. are responsible

Keywords: Soo-ul-Qiniya, Zauf-e-Kabid, Zardi-wa-Sufaid Jild, Sudaa, Muwallid-e-Dam.

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EFFECT OF GURMAR BOOTI (GYMNEMA SYLVESTRE) IN CASES OF ZIYABELUS SHAKRI (TYPE 2 DIABETES MELLITUS)

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ABSTRACT

Background: Ziyabetus shakri (Type 2 Diabetes mellitus) is one of the most important lifestyle related disorders found in all nations of the world. The researchers of different systems of medicine are continuously working for the development of effective and safe anti diabetic drugs. Unani scholars described many anti diabetic drugs in standard Qarabadeen, amongst all of these Gurmar booti is commonly used anti-diabetic drug by Unani physician.

Methods: A prospective, open-labeled, randomized clinical study was carried out of total 30 patients on Unani drug Gurmar booti (Gymnema sylvestre) who was not receiving any Oral Hypoglycemic Agent (OHA) previously.

Result: Mean Fasting Blood Sugar (FBS) of patients before treatment was 142.73 (± 18.30) whereas mean FBS after treatment was 105.40 (± 14.73) and Mean Post Prandial Blood Sugar (PPBS) before treatment was 237.13 (± 23.94) whereas mean PPBS after treatment was 188.70 (± 19.00). Both FBS & PPBS was statistically significant (p< 0.05).

Conclusion: Unani drug Gurmar booti is effective for the treatment of Ziyabetus shakri that it reduces blood sugar level.

INTRODUCTION

The history of Ziyabetus (Diabetes) has its beginnings in antiquity. This disease has apparently plagued man for a very long time.⁷ Diabetes mellitus is a serious chronic metabolic disorder that has a significant impact on the health, quality of life, and life expectancy of patients, as well as on the health care system.⁸ India is reported to lead the world with the largest number of diabetic subjects.⁹ Globally it is estimated that 366 million people had diabetes in 2011 and the figure is expected to reach 552 million by 2030. The International Diabetes Federation (IDF) estimated the total number of people in India with diabetes to be around 50.8 million in 2010, which is predicted to rise to 87.0 million by 2030.⁴⁵⁶⁷ Ziyabetus shakri (Type 2 Diabetes mellitus) is usually linked with process of ageing, high fat diet, obesity and lack of physical activity or sedentary life style. It is characterized by impaired insulin secretion, peripheral insulin resistance and excessive hepatic glucose production.⁸ Diabetes mellitus leads to complications like blindness, renal failure, coronary artery disease, gangrene and coma. Growing diabetic population day by day and the dreadful complications with diabetes mellitus stimulates the search for new drugs which are more efficient with less adverse effect from natural sources.⁹

Unani system of medicine is concerned diabetes mellitus is being treated since Greco Arab period. To date, over 400 traditional plant treatments for diabetes have been reported, although only a small number of these have received scientific and medical evaluation to assess their efficacy.¹⁰

The plant Gurmar booti (Gymnema sylvestre) is popular in India systems of traditional medicine, such as Siddha.
UNANI CONCEPT OF KEESA-E-KHUSYATUR RAHEM (POLYCYSTIC OVARIAN SYNDROME) AND ITS MANAGEMENT: A REVIEW

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ABSTRACT

The disease has not been defined under the term of Polycystic Ovarian Syndrome (PCOS); it was originally described by Stein and Leventhal in 1935 as a syndrome manifested by hyperandrogenism, anovulation and obesity in women with enlarged polycystic ovaries. According to Hippocrates the main cause of the disease is impairment of humors (Akhlat). The causes of infertility in female due to obesity and PCOS as described by modern medicine are very much similar to the causes and features of uqrin Unani medicine. The drugs which correct ehtebas-e-tams, uqr and soo-e-mizajbarid are generally found to be useful in PCOS, They have given a line of management based on correction of temperament, menstrual regulation by use of emmenagogue drugs and local application of herbs to reduce the severity of hair growth, acne and hyper pigmentation due to PCOD. Unani system of medicine is the oldest system that prevails till dates with its effective remedies derived from plants, animals and mineral sources. There are various single and compound drugs to cure different disorders of the human body.

INTRODUCTION

In unani system of medicine there is not direct mention of PCOS as such. The Unani term framed for PCOS is keesa-e-Khusyatur Rahem. It is an Arabic paraphrase of PCOS. This disease has been described by Unani Physicians under the headings of amenorrhoea, obesity, phlegmatic disease and liver disorders. This disease is considered as the most common endocrine disorder that affects between 10-15% of women during their reproductive age affecting 5-10% of the reproductive women rising till 15% in women with infertility and it accounts for about 75% of anovulatory infertility. The majority of the women with anovulation due to PCOS have menstrual irregularities, such as most cases of Qillat-e-tams (oligomenorrhoea) and about a third of those have history of Ahtebas-e-tams (amenorrhoea), uqr (infertility) associated with obesity, examination and first line investigations usually establish the diagnosis. It results in production of high amounts of androgen particularly testosterone and chronic anovulation. Hyperandrogenism manifest clinically as hirsutism, acne, alopecia and virilization. Women with PCOS often have elevated LH level are at higher risk for developing infertility, endometrial carcinoma and a number of metabolic disorders, including insulin resistance, diabetes, hypertension and cardiovascular diseases.

Buqrat (Hippocrates 460-370 BC) first documented the affiliation of excess facial and body hair (hirsutism) in females with prolonged amenorrhoea, obesity and infertility. Similar observations were reported by Jalinoos (Galen 130-200 AD). Zakariya Razi (Rhazes 865-925 AD) recorded combination of signs conjoined with menstrual irregularities (oligomenorrhoea, amenorrhoea and menorrhagia) including hirsutism, obesity, acne, hoarseness of voice and infertility, which are suggestive of polycystic ovarian disease and hyperandrogenism. Razi recommended regular induction of menstruation as one of treatment modality applied for hirsutism. He has also given a line of

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ASSESSMENT OF CLINICAL EFFICACY OF UNANI FORMULATION COMPRISING SUFOOF ASROL, KUSHTA SADAF AND SHARBAT UNNAB IN URTICARIA

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Research Paper

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ABSTRACT

Background: Urticaria (Shara) is a very common skin ailment that affects any time in everyone life. On the basis of duration of symptoms and the presence or absence of inducing stimuli, it is often classified as acute, chronic or physical. There are many regimes being used for controlling this condition but have many side effects for long term use, so this unani formulation was taken for clinical trial.

Objective: To assess the safety and efficacy of a Unani formulation in the management of urticaria.

Patients and methods: A Single- Arm Clinical Study was designed and carried out at Moalejat(medicine) OPD of Ajmal Khan Tibbiya College and Hospital, during the period extending from January 2012 to December 2013.120 diagnosed patients of urticaria in the age group 10-70 years, fulfilling the inclusion criteria, were enrolled in the clinical trial. Patients were enrolled only in test group, no any controlled group was taken. A unani formulation was administered thrice a day orally. The duration of the treatment was fixed to 60 days. Patients were advised to visit at every 15th day. Follow up was also done after completion of treatment, i.e. at 75th day.

Results: The test drug produced significant effect on itching, wheals, erythema and on TSSS without causing any untoward effect or adverse reactions as observed by the safety parameters.

Conclusion: The unani formulation is very effective for controlling urticaria both acute and chronic condition and can be used safely.

No. of Pages: 8 No. of Tables: 7 References: 32

Keywords: Urticaria, Shara, single arm clinical study, Unani formulation.

INTRODUCTION

Urticaria is a vascular reaction characterised by transient erythematous or whitish swellings in the skin or mucous membranes., Urticaria can be found anywhere on the body but it is most common on the trunk and extremities., It is highly prevalent condition that results in large numbers of medical consultations throughout world.. Urticaria may present at any age. Reported prevalence percentages in different narratives varied between 0.05- 35% depending on the age, the geographic region and the preselection of the patients.¹² Urticaria, commonly called Hives, has a long and rich history dating back 10th century B.C. when it was called ‘Feng Yin Zheng’ in China.¹ Many cultures have described urticaria with different names. In the 4th century B.C., Hippocrates called urticaria as 'cnidosis' (nettle rash) after observing similarities between urticaria, insect bites and contact with stinging nettles.² Both old and moderns unani physicians has described urticaria in their manuscripts in respect to its pathology, clinical presentation and its management. According to

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**ABSTRACT**

*Brahmi (Centella asiatica Linn.)* is one of the most useful plants seen in *Unani* system of medicine. In *Unani* system of medicine, *Centella asiatica* and *Bacopa monnieri* both are acknowledged as *Brahmi* and both of them have shown promising effects in improving cognitive function. Research evidences also indicate that both plants have nootropic activity with therapeutic implications for patients with memory loss. The aim of this review is to find out the evidence for *Brahmi (Centella asiatica)* as a potential nootropic drug for various neuro-psychological disorders affecting the cognition and memory.

**INTRODUCTION**

Nootropics are drugs, supplements, nutraceuticals, and functional foods that are brain and mood boosters and are supposed to improve mental functions such as cognition, memory, intelligence, motivation, attention, and concentration\(^{(1)}\).

Some of the notable Unani herbal nootropic drugs are *Sankhaholi* (*Evolvulus alsinoides*), *Brahmi (Centella asiatica/Bacopa monnieri)*, *Waj Turki* (*Acorus calamus*) and *Asgandh* (*Withania somnifera*)\(^{(2)}\).

*Brahmi (Centella asiatica Linn.*) is one of the most useful plants seen in Unani system of medicine. In Unani system of medicine, *Centella asiatica* and *Bacopa monnieri* both are acknowledged as *Brahmi* and both of them have shown promising effects in improving cognitive function\(^{(2)}\). Research evidences also indicate that both plants have nootropic activity with therapeutic implications for patients with memory loss\(^{(3)}\). The aim of this review is to find out the evidence for *Brahmi (Centella asiatica)* as a potential nootropic drug for various neuro-psychological disorders affecting the cognition and memory.

**ACTIVE CONSTITUENTS**

Based on the numerous studies, the major biologically active ingredients are believed to be its triterpenes, and the medicinal values of this plant are mainly attributed to the presence of several triterpenes, namely asiatic acid, madecassic acid, asiaticoside and madecassoside. Triterpenes being the major components of *Centella*...
CLINICAL IMPORTANCE OF DALAK (MASSAGE THERAPY) IN PRESENT HEALTH SCENARIO WITH REFERENCE TO UNANI MEDICINE

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ABSTRACT

Dalak (Massage therapy) is an integral part of Unani system of medicine which is based on Hippocrates concept of equilibrium and balance of natural body humours (blood, bile, black bile and phlegm). The imbalance in the quality and quantity of these humours leads to diseases whereas restoration of this balance leads to health. The treatment of diseases is based on four methods viz, Ilaj bil tadabeer (Regimental therapy), Ilaj bil ghiza (Dieto therapy), Ilaj bil dawa (Pharmacotherapy) and Ilaj bil yad (surgery). Dalak is one of the most important and widely practiced forms of regimental therapy. Dalak is actually the scientific mode of curing certain forms of diseases by systemic manipulations. In traditional system of medicine, especially in Unani system, massage is indicated in a number of neurological, musculoskeletal and psychosomatic disorders for therapeutic and preventive purposes.

INTRODUCTION

Unani medicine as the name suggests, originated in Greece. It was the Greek philosopher-physician Hippocrates (460-377BC) who freed medicine from the realm of superstition and magic and gave the status of science. The theoretical frame work of Unani medicine is based on the teachings of Hippocratic Humoral theory, which presupposes the presence of four humors. These are Dum (blood), Balgham (phlegm), Safra (yellow bile) and Sauda (black bile). The body has the power of self preservation to maintain a correct balance of these humors, which is called as Quwwate Mudabbira (Medicatrix natura). Unani drugs help the body to regain this balance. The fundamental principle of this system recognizes disease is a natural process and symptoms of a disease are body's reaction to disease. The chief function of the physician is to aid the natural forces of the body.

The treatment of diseases is based on four methods viz, Ilaj bil tadabeer (Regimental therapy), Ilaj bil ghiza (Dieto therapy), Ilaj bil dawa (Pharmacotherapy) and Ilaj bil yad (surgery). (1, 2, 3) According to the great Unani scholar, Ibn Sina, Ilaj bil tadabeer is actually a part of tibbe amli (practical medicine) in which treatment is done by suitable modifications in asbabe sittae zarooria (six essentials), which are the hallmark of Unani tib. He has mentioned 36 regimes in his famous book Alqanoon (Canon of Medicine), including dalak (massage therapy), riyażat (exercise), hijamat (cupping), fāsd (veinesection), tareeqe (diaphoresis), kai (cauterization), hamam (steam bath), huqna (enema), ishal (purging), idrar (dieresis), tanfees (expectoration), irsāle alq (leeching) etc.. Dalak, one of the most widely practiced methods, is known from the time of extreme antiquity and is still alive nowadays. (4-7) Dalak is defined as a scientific mode of curing certain forms of diseases by systemic manipulations and it signifies a group of procedures which are usually done with hand on the external tissues of the body in a variety of ways either with a curative, palliative or hygienic point of view. In other words we can say that dalak is a healing art. (8, 9) A typical massage technique includes three features known

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PHYSICO-CHEMICAL AND PHYTO-CHEMICAL STUDY OF UNANI DRUGUSHBA (Smilax ornata)

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ABSTRACT

All single herbal (Unani) drugs should be standardized using sophisticated techniques to ensure uniformity, purity, safety, efficacy and quality. World Health Organisation (WHO) has recognised the effectiveness and safety of the traditional system of medicine. Standardization of drugs means confirmation of its identity and determination of its quality and purity by various parameters viz. physical, chemical and biological observation.

Phytochemical investigations along with biological screening is needed to understand the therapeutic dynamics of medicinal plants etc. this will help in developing quality parameters and help in the standardization.

Ushba (Smilax ornata) used for Arthritis, Ascites, fever, cough and many more diseases, was standardized by using physico-chemical parameters Successive Extractive Values: pet. Ether (2.12±0.01), di-ethyl ether (0.45±0.02), chloroform (0.33±0.01), acetone (1.62±0.01), alcoholic (2.32±0.01), aqueous (4.14±0.02); Non-Successive Extractive Values: Pet. ether (1.03±0.03), chloroform (2.04±0.02), alcoholic (5.90±0.01), aqueous (3.81±0.02) Solubility: Water (3.33±0.02) & Alcohol (2.28±0.04); Moisture contents (6.66±0.33), Total Ash values (5.36±0.08), Bulk density 0.33±0.02 (Poured density) and 0.51±0.01(Tapped density), pH of 1% (5.58±0.02) & 10% solution (5.13±0.01) and loss on drying (4.26±0.33). Phytochemical Analysis revealed the presence of almost all the phyto-constituents in the test drug sample i.e. alkaloid, flavonoids, glycoside, carbohydrate, tannin, protein, amino acids, starch and resins.

INTRODUCTION

Unani System of Medicine is a comprehensive Traditional system of Medicine having its own theory of health and disease. WHO has emphasized the need to ensure quality control of medicinal plant products by using modern techniques and by applying suitable parameters and standards. WHO has set specific guidelines for the assessment of the safety, efficacy and quality of herbal medicines.

This variety is obtained from Ushba commonly known as Sarsaparilla belongs to family Liliaceae, is a climbing plant with woody stems on ascending lofty trees and springing from a stout, knotty rhizome. The plant is native of Central America. Roots were formerly exported via Jamaica; hence the designation ‘Jamaica’ is added with sarsaparilla. Several varieties of sarsaparilla are important but the one known as Jamaica sarsaparilla is the most esteemed in India. There are number of species of sarsaparilla, the most common are Smilax ornata and Smilax regelii, which contain saponins, sarsaponin and parallin and yield isometric sapogenins, sarsapogenin and smilogenin.

The drug has no odour but slightly bitter taste and probably other sarsaparillas is Sarsasaponin, C₆₀H₄₁O₁₆·7H₂O, a crystalline glucoside yielding by hydrolysis sarsasapogenin and dextrose. Two isomeric genins are known; smilagenin (a name derived from the

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CONCEPT OF HISAT-E-KULLIYAH (NEPHROLITHIASIS) AND ITS MANAGEMENT IN UNANI – A REVIEW

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Review Paper

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ABSTRACT

Kulliyah (Kidneys) are one of the vital organs of body which carry out several important roles in regulating the normal body functions. Hisat-e-Kulliyah (Nephrolithiasis) is the most common health problems that affect approximately 15 % population worldwide and about 2.3% population of India. Its major role is formation of Baul (urine) and execute water and salt balance, and release of hormone. Since ancient times Hisat-e-Bauliyah (Urolithiasis) or Hisat-e-Kulliyah (Nephrolithiasis) have been treated by eminent Unani physicians like Hippocrates, Galen, Avicenna, Razi, Ibn-e-Zohr and Majoosi through different modes of treatment; Ilaj Bil-Ghiza (Dietotherapy), Ilaj Bit-Tadbeer (Regimenal Therapy) and Ilaj Bid-Dawa (Pharmacotherapy) contain herboanimomineral source of medicine; can be attributed due to presence of Litholytic, Lithotriptic, Diuretic, and nephroprotective properties. In the present review paper, an attempt has been made to focus on Unani concept and treatment of Hisat-e-Kulliyah (Nephrolithiasis).

INTRODUCTION

Hisat-e-Bauliyah (Urolithiasis) is a term originated from three Greek words, “ouron” for urine, “oros” for flow, and “lithos” for stone. It is referred to as the process of formation of stone. Urinary system includes Hisat-e-Kulyah (Nephrolithiasis), Hisat-e-Halib (Ureterolithiasis) and Hisat-e-Masanah (Cystolithiasis). Hippocrates in the 4th century BC noted renal stones together with a renal abscess and wrote in the Hippocratic Oath “I will not cut the stone”. Humankind suffering from urinary stone disease was found in tombs of Egyptian mummies dated to 4800 BC and in the graves of North American Indians from 1500-1000 BC. Nephrolithiasis is the most common health problem, that affect approximately 15 % population worldwide and about 2.3% population of India. In India, the “stones belt” occupies parts of Maharashtra, Gujarat, Punjab, Haryana, Delhi and Rajasthan. In these regions, the disease is so prevalent that most of the members of a family will suffer from kidney stones. Nephrolithiasis is more common in men (12%) than in women (6 %) with a peak incidence at 20-40 years of age in both sexes. Children tend to get vesicle calculi in situations where they are malnourished. Once recurrent, the subsequent relapse risk is raised and the interval between recurrences is shortened.

Unani Concept of Hisat-e-Kulliyah (Nephrolithiasis): According to Zakaria Razi (850-923 AD), the cause of this disease is abnormal humors and the body excretes the abnormal humor in the form of viscid fluid which moves towards the kidneys and form crests that cause the stone formation. Recurrence of stone formation is common.

Ibn-e-Zohar (1091-1162 AD) has mentioned that, when the kidney function disturbunable to excrete out the thick humors due to weakness, then these thick humors become deposited in the kidney as a result of layer by layer crystallizations to form stone.

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INTRODUCTION

Acne vulgaris is a chronic inflammatory disease of the pilosebaceous units and is characterized by seborrhea, formation of comedones, erythematous papules and Pustules, less frequently nodules, deep pustules or pseudo cysts and in some cases Accompanied by scarring. The term acne is derived from Greek word 'acme' which means 'prime of life'. The condition usually starts in adolescence, peaks at the age of 14-19 years and frequently resolves by mid-twenties. Acne develops earlier in females than in males. The most severe form of acne vulgaris occur more frequently in males (95%), but the disease tends to be more persistent in females (83%).

In the initial stages of 20th century, Leech therapy was considered as a universal cure but at the same time it was rejected by medicine personnel’s. Later on, Leech therapy had a greater role in plastic and reconstructive surgeries as they can help in the reattachment of the injured parts of the body such as finger, hand, toe, leg, ear, nose or the scalp.

Unani concept

In Unani system of medicine, acne vulgaris is termed as Basoor-e-Labaniya, muhsa or keel. According to Ibn...
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