



## *Zeeq Un Nafas (Asthma) and their Understanding in the Past: Unani Concept*

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**Abstract-** The Unani System of Medicine pioneered in Greece and was developed by Arabs into an elaborate medical science based on the frame work of the teaching of Buqrat (Hippocrates) and Jalinoos (Galen). Since that time Unani Medicine has been known as Greco-Arab Medicine. This system is based on Hippocratic theory of four humours viz. blood, phlegm, yellow bile and black bile, and the four qualities of states of living human body like hot, cold, moist and dry. They are represented as earth, water, fire and air, the Greek ideas were put by Arabian physician as seven principles (Umoor-e-Tabbiya) and included, element (Arkan), temperament (Mizaj), humours (Akhlat), organs (Aaza), spirit (Arwah), faculties (Qowa) and functions (Afaal). In this system is it believed that, these principles are responsible for the body constitution and its health, as well as, diseased conditions (Ishtiyah, 1983) The term 'ZeequnNafas' is composed of two words 'Zeeq' and 'Nafas' meaning 'narrowing' and 'breathing', respectively. In other words, it means difficulty in breathing. ZeequnNafas is mentioned by the ancient physicians and philosophers like Buqrat (Hippocrates - 460 – 377 BC) and Galenus (Galen - 129–210 AD). Buqrat described this disease as breathlessness. (khan, 2003) In unani classics, Ta'deel- Mizaj (correction of temperament) is required and TanqiaMawad (cleansing of viscous humour), Mulattif, MunaffisBalgham and MukhrijBalgham drugs are recommended.

**Keywords:** *asthma; unani; unani medicine; greco-roman medicine; prevention, diet.*

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# Zeeq Un Nafas (Asthma) and their Understanding in the Past: *Unani* Concept

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**Abstract-** The Unani System of Medicine pioneered in Greece and was developed by Arabs into an elaborate medical science based on the frame work of the teaching of Buqrat (Hippocrates) and Jalinoos (Galen). Since that time Unani Medicine has been known as Greco-Arab Medicine. This system is based on Hippocratic theory of four humours viz. blood, phlegm, yellow bile and black bile, and the four qualities of states of living human body like hot, cold, moist and dry. They are represented as earth, water, fire and air, the Greek ideas were put by Arabian physician as seven principles (Umoor-e-Tabbiya) and included, element (Arkan), temperament (Mizaj), humours (Akhlāt), organs (Aaza), spirit (Arwah), faculties (Qowa) and functions (Afaal). In this system it is believed that, these principles are responsible for the body constitution and its health, as well as, diseased conditions (Ishtiyāq, 1983) The term 'ZeequnNafas' is composed of two words 'Zeeq' and 'Nafas' meaning 'narrowing' and 'breathing', respectively. In other words, it means difficulty in breathing. ZeequnNafas is mentioned by the ancient physicians and philosophers like Buqrat (Hippocrates - 460 – 377 BC) and Jalinus (Galen - 129–210 AD). Buqrat described this disease as breathlessness. (khan, 2003) In unani classics, Ta'deel-Mizaj (correction of temperament) is required and TanqiaMawad (cleansing of viscous humour), Mulattif, MunaffisBalgham and MukhrijBalgham drugs are recommended. Sometimes Muqi (emetics) are recommended for evacuation of Balgham. Mohallil-e-Auram and Daf-Tashannuj are also recommended. (sena, 1411) In this article authors describe about the concept, risk factors, causes, pathophysiology and classification of Asthma.

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## I. AETIOLOGY

In Unani system of medicine treatment of the diseases of known etiology is based on administration of drugs having actions contrary to etiological changes i.e. known as Ilaj-Bil- Zid. According to this principal of treatment, Unani scholars have designed various formulations comprising of drugs with hot and dry temperament for asthma which temperament is cold and moist.) (SENA, 1957).

- The patient should be kept in clean, calm and airy room free from air pollution during attack of the disease.
- Ta'deel-e-Mizaj (correction of temperament).

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- TanqiaMawad (cleansing of viscous humour), Mulattif, MunaffisBalgham and MukhrijBalgham drugs are recommended.
- Sometimes Muqi (emetics) are recommended for evacuation of Balgham.
- Mohallil-e-Auram and Daf- e-Tashannuja real so recommended.
- Treat the underlying cause in case of ZeequnNafasShirki.
- Avoid exposure to excessive heat and cold.
- Avoid constipation.
- Avoid mental and physical stress.
- Avoid use of citrus fruits, oily food and red chilies.
- Avoid use of diuretics because it may increase the consistency of Balgham

### a) Dietary recommendations

Recommended Diet Ghiza-e-Lateef (easily digestible), Musakhkhin (heat producing) were recommended to the patients, such as Maa-ush-Shaeer (barley water), Maa-ul-Asl (honey water), Chuqandar (Beet root) chicken soup; almond oil, spinach, Kaddu (pumpkin), Saib (apple), Behi (quince), Hareera, mutton soup, etc. (sena, 1411)

### b) Dietary restrictions

The patients were advised to avoid cold and phlegm producing flatulent food items, such as lemon, chilled water, grapes, orange, oily foods and red chili.

Tahaffuz (Prevention/Precaution):

Indigestion, Fikr (mental stress), Kasrat-ijimā' (Excessive coitus), Ta'b(exertion), Gham o Alam (Grief & Sorrow), AfkārMushawwisha (Apprehensions) and factors causing Yubūsāt (dryness) to be avoided. (Ishtiyāq, 1983)

## II. RISK FACTORS

As people with asthma have inflamed airways which are sensitive to things which may not bother other people. These things are "triggers." These triggers vary from person to person. Some people react to only a few things while others react to many.

It can be triggered by allergens (things people can get allergic to), irritants (things that irritate the airways), and certain other situations (which cause asthma through quite complicated means). Commonest are:

- 1) Exposure to some of the outdoor factors like pollens from plants, trees and grasses, including freshly cut grass and mould etc.
- 2) Exposure to some of the indoor factors like animal dander from pets with fur or feathers, dust and dust mites specially in carpeting and pillows etc., Cockroach droppings, Indoor mould etc.
- 3) Exercise: like running or playing hard, especially in cold weather
- 4) Upper respiratory tract infections (URTI): It commonly includes tonsillitis, pharyngitis, laryngitis, sinusitis, otitis media, and the common cold or flu
- 5) Emotional upset: the commonest are anger, sadness or fear
- 6) Irritants: like strong smells and chemical sprays; perfumes, paint and cleaning solutions, cold air. Lawn and turf treatments, Chalk dust, weather changes, cigarette and other tobacco smoke.

### III. PATHOPHYSIOLOGY

"Asthma" is a Greek word derived from the verb "aazein" which means to exhale with open mouth and to pant. Buqraat (Hippocrates- a Greek physician) was the first to name this disease as 'panting' which means breathlessness. Later on many Unani scholars keenly studied about Asthma and mentioned it in their books.

Zeeq-un- nafas (Bronchial Asthma) is a chronic lung disease characterized by episodes of acute broncho constriction causing shortness of breath, cough, chest tightness, rapid respirations and wheezing (appreciated on auscultation of the chest is the most common physical finding). In other words it is chronic inflammation of the bronchial tubes (airways) that cause swelling and narrowing (constriction) of the airways. It is a disease that affects the lungs by allergies or infections resulting in narrowing of airways which causes difficulty in breathing and cough. It is a well-known hypersensitivity disorder characterized by ventilator insufficiency.

In many asthma patients, timing of the symptoms of disease is closely related to physical activity. Even, some healthy people can develop asthma like symptoms only when exercising. This is called exercise-induced asthma (EIA) or exercise-induced bronchoconstriction (EIB).

The disease is influenced by multiple genetic developmental and environmental factors. It affects over 300 million people around the world. One in every four urban children is asthmatic. Current estimates suggest that 300 million people worldwide suffer from Bronchial Asthma and in addition 100 million may be diagnosed with Bronchial Asthma by 2025. An increasing prevalence and severity of asthma has been reported worldwide.

Unani scholars are well known about it since last 3500 years, where asthma like symptoms were recorded

in an Egyptian Manuscript called "Eberus Papyrus". At present asthma has spread globally. It affects approximately 4% of the total world population.

The affected people belong to various age groups, but children and elders are more prone. (nafees, 1324).

### IV. CLASSIFICATION

Rabban Tabari (838–923 AD) has described various types of ZeequnNafas: 1. ZeequnNafasQasir (caused by weakness of the respiratory muscles) 2. ZeequnNafasMutatabae (caused by inflammation of the diaphragm or excessive heat) 3. Zeequn Nafas Mustaqeem (caused by weakness or atony of the respiratory muscles) 4. ZeequnNafasQawi (caused by Iltihab and Hararat) 5. ZeequnNafas Zaeef (caused by Burudat) 6. ZeequnNafasAseer (caused by accumulation of viscid secretions in the bronchial tree or gaseous collection in the chest putting pressure on the bronchial tree externally). Hakim Ajmal Khan (1868–1927) has described following two types of ZeequnNafas: 1. ZeequnNafasYabis (Bronchial asthma without expectoration caused due to spasm in the bronchial tree and the respiratory muscles) Clinical Study of A Polyherbal Unani Formulation in ZeequnNafas (Bronchial Asthma) 2. Zeequn-NafasMartooB (Bronchial asthma with expectoration that is caused due to spasm along with accumulations of phlegm in the bronchial tree) Eminent physician Hakim Azam Khan (1815–1902 AD) has described following eight types of the disease: 1. RabwNazli (Allergic Asthma) 2. RabwBalghami (Catarrhal Asthma) 3. RabwDukhani (Asthma due to pulmonary insufficiency) 4. Rabwlstarkhai (Asthma due to paresis of respiratory muscles) 5. RabwYabus (Asthma due to fibrosis of lungs) 6. RabwBarid (Asthma due to cold) 7. RabwWarmi (Potter's Asthma) 8. RabwHaar (Hot type Asthma) (arzani, 1988)

### V. MATERIAL & METHODS

Literature and claims in support of this article has been taken from Classic books of Unani system of medicine. For the search of these books author visited following four libraries, namely (a) Library of Central Council for Research in Unani Medicine (CCRUM), Regional Research Research Institute of Unani Medicine (RRIUM).

### VI. CONCLUSION

As far as Unani medicine is concerned, it is very well versed with understanding and management of Asthma. Bronchial asthma is one of the most common diseases in general population which is the main ailment of the respiratory disorders. Inspite of the incidence of bronchial asthma is increasing in many countries of world with advancement of treatment modalities and

India is not an exception for this. It is one of the commonest illnesses of western world, attesting 8-10% of children and 3-5% of adult populations. It has been estimated that the incidence of bronchial asthma is increased by approximately 50% over the last 10 years (Pal R, 2009) In India prevalence of bronchial asthma is 6% on the majority of surveys.

Asthma changes the quality of life of patients, whatever may be their age group it is an important cause of school absenteeism and loss of working days. The costs due to asthma, which currently represents approximately 1% of direct and indirect health care costs, are also steadily mounting. Unani Medicines has best results in treatment of Asthma.

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