



## UNANI PERSPECTIVE OF OLIGOMENORRHOEA: AN UPDATED LITERARY RESEARCH

### Paediatrics

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### ABSTRACT

Infrequent and scanty menstruation is a common problem in women belonging to reproductive age group. Oligomenorrhoea affects 6-18% of women of reproductive age and is mostly managed by hormone therapy which has got its own side effects. One of the most influential Iranian physician, *Avicenna* (980-1037 A.D.) in his famous book, *Canon of medicine*, describes oligomenorrhoea under the title of *ihtibas-i-tamth*. According to USM, normal menstruation is an indicator of healthy normal reproductive organs. One of the main function of the uterus is to excrete the *khūn-i-hayd* (menstrual blood) which should be normal in amount and duration. Any kind of imbalance between *quwwat-i-masika* (retentive faculty) and *quwwat-i-daf'i'a* (expulsive faculty) of *rahim* (uterus) causes menstrual irregularities. It is caused by domination of *khilt balgham* (phlegm) which increases the viscosity of blood. *Majoosi* stated the cause of *qillat-i-tamth* is *su'i-mizāj bārid* of *rahim* (cold temperament of uterus) and *siman mufrit* (obesity). Unani physicians have given a line of management based on correction of temperament, menstrual regulation by regimental therapies and emmenagogue drugs.

### KEYWORDS

*ihtibas-i-tamth, khilt balgham, khūn-i-hayd, oligomenorrhoea and su'i-mizāj bārid.*

#### 1. INTRODUCTION:

In classical unani text oligomenorrhoea is mentioned under the heading of *Ihtibas-i-tamth* or *Qillat-i-tamth*.<sup>1,2</sup> Unani physicians have given opinion that if menstruation is normal in duration, quality and quantity, it shows the woman is healthy. It occurs once in a month that helps in elimination of morbid material from body which is not beneficial.<sup>1,3</sup> According to *Sahib Kaamil* the minimum age of menarche is 10 years and maximum is 14 years also added that minimum age of menopause is 36 years and maximum is 60 years. Duration of flow considered minimum when lasts for 1-2 days and maximum for seven days. If the duration between 2 cycles is more than 2 months then it is known as *Qillat-i-tamth* or *ihtibas-i-tamth*.<sup>1,4,5</sup>

#### 2. FACULTIES OF UTERUS (*Quwwat-i-rahim*):

Uterus possesses four types of faculties for normal physiological functions:

1. Absorptive faculty (*Quwwat-i-jādhība*)
2. Recalling faculty (*Quwwat-i-hāfiza*)
3. Retentive faculty (*Quwwat-i-māsika*)
4. Expulsive faculty (*Quwwat-i-daf'i'a*)

Among the four *quwa*, *quwwat-i-daf'i'a* is mainly concerned with expulsion of *fizla* (menstrual blood). Any abnormal functioning of this *quwa* is mainly responsible for *qillat-i-tamth*.<sup>5</sup>

#### 3. ETIOPATHOGENESIS (*Asbāb*):

Unani system of medicine is based on the concept of balancing body humors (*khilt*). Their imbalance causes disease where restoration causes health.<sup>1,3</sup> *Ibn Sina* has mentioned: "If the menstrual blood is *mu'tadil* (balanced) in quality and quantity and the cycles are regular, it preserves health and prevents from diseases.<sup>3</sup> *Qillat-i-tamth* is either due to the causes pertaining to the uterus (*Asbāb khās-i-Rahim*) or due to diseases of other organs (*A'da-i-mushārikat*).

##### I. *Asbāb khās-i-Rahim* :Sudda

1. *Su'i-mizāj sird*
2. *Ghalabā-i-balgham wa sawdā*
4. *Waram al-rahim*
5. *Ināimāl qurāh al-Rahim*
6. *Zarba wa saqta*
7. *Bād isqāt*
8. *Ghalaba-i-burūdat, hararat wa yubūsat*

##### II. *A'da-i-mushārikat*

1. *Su'i-mizāj sada ya maddi*
2. *Far'bahī*
3. *Laghari*
4. *Zo'af-i-jigar*
5. *Kasrat istifrāgh*
6. *Kasrat muhallilat*
7. *Su'al-quinya*
8. *Quwwate hadimā ka qawi hona*

Fig.1 *Asbāb qillat-i-tamth*<sup>25</sup>

#### 4. SYMPTOMS (*Alamāt*):

##### 4.1. General symptoms (*A'am alamāt*):

Headache, loss of appetite, nausea, vomiting, changing color of face, dysuria, low backache,<sup>1,6</sup> palpitation, indigestion, constipation, heaviness in the body, low urine output, high colored urine, excessive sleep, tiredness,<sup>1,3,4</sup> heaviness in lower abdomen, groin pain etc.<sup>7,8</sup>

##### 4.2. Specific symptoms (*Khusūsi alamāt*):

**4.2.1. Obstructions (*Sudda*):** Menses stops gradually, feeling of heaviness in the body, abdominal distension due to flatulence and change in skin colour.<sup>2</sup>

##### 4.2.2 Bad temperament (*Su'i-mizāj*):

**Hotness (*Harārat*):** In case of excessive *harārat*; signs of *waram* along with this dryness (*khushki*) of *rahim* will be present.<sup>3</sup>

**Coldness (*Burūdat*):** Excessive *burūdat* leads to deep sleep, pallor, perspiration, indigestion, polyuria, phlegmatic stools along with this *nabd mutafāwit*.<sup>3,9</sup>

**Dryness (*Yubūsat*):** Dominancy of *yubūsat* causes malaise, lethargy, veins inconspicuous, together with other features of *yubūsat*.<sup>3,9,10</sup>

**4.2.3. Dominancy of Phlegm and Black bile (*Ghalaba-i-balgham and sawdā*):** Patient will be obese, puffy and flabby body, cold skin,<sup>1</sup> pale face,<sup>4,11</sup> *nabd Batī* and *mutafawit*, *bawl-sufaid*, *barāz balghami*<sup>3,4</sup> and scanty pubic hair.<sup>3,10</sup>

##### 4.2.4. Metritis (*Warm al-rahim*):

**Acute (*Hād*):** High fever, backache, pain in the loins, groins and suprapubic region, dysuria,<sup>30</sup> bitter taste of mouth, tongue coated together with; tachycardia and tachypnoea.<sup>4</sup>

**Chronic (*Muzmin*):** Heaviness in pelvis, difficulty in micturition and defaecation and abdominal distension like ascites.<sup>4,10</sup>

**4.2.5. Diseased Liver (*Zo'af-i-jigar*):** Poor appetite, lethargy, right hypochondric pain especially after meals, pallor and oedematous face, thready pulse, urine-viscous, blood stain stools.<sup>13</sup>

**4.2.6. Anaemia (*Su'al-quinya*):** Previous history of starvation, exertion, heavy work along with lethargy, malaise and icterus.<sup>10</sup>

**5. DIAGNOSIS (*Tashkhees*):** It is based on clinical presentation of the patient.

#### 6. COMPLICATIONS (*Awarizāt*):

• *Ibn Sina* states that when blood goes towards the uterus and if it

does not find the way to escape out from the body; it will return back to the body, and when this process is repeated several times, it results in complications such as *sayalān al-rahim* (Leucorrhoea), *waram al-sulb* (metritis), *uqr* (infertility),<sup>7,8,31</sup> *warm al-jigar* (hepatitis) and *istisqā* (ascites) etc.<sup>1,2,4</sup>

- **Hippocrates** mentioned, "women whose menstruation is less than three days or is robust with masculine appearance; they will not become pregnant." He was aware of connection between oligomenorrhoea, obesity, hirsutism and infertility.<sup>4</sup>
- **Uqr (Infertility):** *Su'i-mizāj bārid* causes uterine vasoconstriction & spasm of fallopian tubes so that *nutfā* (gamete) fails to reach the uterus. *Ibn Sina* states that *su'i-mizāj ratāb* results in infertility due to *zo'af-i-quwwate jadiba* and *māsika* of uterus, which leads to decrease endometrial receptivity and failure of embryonic implantation.<sup>3,14</sup>
- **Marz ikyās khusyaturrahim (PCOD):** *Su'i-mizāj bārid* of the liver leads to abnormal production of balgham, as liver is unable to convert chyme into blood, instead it converts it into *balgham-i-lazuj* which accumulates in sacs to form cysts. Hence, dominance of *khilt-i-balgham* in the body leads to amenorrhoea and cyst formation in ovaries.<sup>15</sup>
- **Hirsutism:** It is mentioned as a complication of prolonged amenorrhoea associated with other masculine features like hoarseness of voice and male body contour.<sup>1,4,16</sup>
- **Ismail Jurjani** explained the cause of hirsutism as variation in normal temperament of women. If oligomenorrhoea persists for long duration, the temperament gets transformed towards that of men,<sup>3,15</sup> which is mainly due to *ihtirāq* of balgham to *sawdā* leading to excessive hair growth over body and hyper pigmentation (acanthosis nigricans).<sup>11,15</sup>

## 7. LINE OF TREATMENT (Usul-i-'ilāj):

- Treat the cause
- *Idrār-i-hayd* with use of *mudirr-i-hayd* drugs.
- *Ta'dil-i-mizāj* with use of *mundij wa mushil-i-balgham advia*.<sup>3,4</sup>

## 8. TREATMENT ('Ilāj):

- The treatment regimen can be divided into four steps.

- Ilaj bi'l-tadbīr* (Regimenal therapy)
- Ilaj bi'l-ghida* (Dietotherapy)
- Ilaj bi'l-dawā* (Pharmacotherapy)<sup>17</sup>
- Ilaj bi'l-yad* (Surgical treatment)

### (i). Regimenal therapy ('Ilaj bi'l-tadbīr):

- **Riyādat:** *Riyādat-i-qawi* to reduce body weight, *Muhallil varzish* and counselling should be considered together with moderation of activities.<sup>1</sup>
- **Dalk:** Massage with *Natrūn* or *zift balūt* followed by *hammām* can reduce fat accumulation.<sup>11</sup>
- **Hammām-i-yābis:** It is recommended in obese women. It should be done before taking meals and after the procedure, advice to sleep for some time, then take small quantity of food.<sup>9,14</sup>
- **Takmīd:** *Takmīd* at lower abdomen with *hār advia* mainly *advia-i-muhammira* as it stimulates blood flow towards the uterus.<sup>1</sup>
- **Ābzān:** Powdered *rāi* is mixed in hot water in a tub and then patient is asked to sit in this for 10-15 mints daily.<sup>8</sup>
- **Firzaja:** According to *Jalinoos* powdered *kutki siyāh* along with *indrāyan* doughed in water used as *firzaja*.<sup>18</sup>
- **Istifrāghāt:** In case of obesity measures should be taken to stimulate *Harārat Gharīziyya* by advising purgatives 2-4 days before menstruation.<sup>8</sup>

### Hijāma bi'l-shart (wet Cupping) :

Application of *hijāma* over the calf muscles is more beneficial to induce menstruation. In obese and robust women having narrow uterine vessels venesection fails to evacuate the sufficient amount of blood but the cupping does, as it purifies the blood.

**Common sites:** Calves, two medium size cups are applied over the calf muscles & 8-10 incisions up to a depth of 2-3 mm are given with sterile blade (no 11) and time required for the procedure is 5-10 minutes.

**Other sites:** Ankle, pelvis & adjacent organs.<sup>19</sup>

**Principles:** *Hijāma* works on the principle of *tanqiya-i-mawād* and *imāla mawād*. It removes the toxic blood from the body, thus it detoxifies the body.<sup>20,21</sup>

**Time of application:** 2 or 3 days prior to the expected date of menstruation on one day on one calf followed by its application on next day on second calf.

**Benefits:** Cupping of calf muscles is similar to venesection of saphenous vein; as it eliminates more blood because the calf muscles are the lower dependent part and *mawād* in normal condition has a tendency to flow towards the lower part of the body and the same can be sucked out with cupping.<sup>19</sup>

- **Hamūl:** Flour of *turmus* along with *puḍīna* and honey.<sup>11</sup>
- **Shiyāf:** According to *Jalinoos shiyāf* made with *farfiyūn* induces menstruation instantly.<sup>18</sup>
- **Dimād:**
  - Application of *joshānda* of *hār* and *mulattif advia* over lower abdomen.<sup>1</sup>
  - Apply paste of *tukhm bedanjīr* or *biranjāsif* over suprapubic region.<sup>4,11</sup>

### (ii). Dietotherapy ('Ilāj bi'l-ghidā):

Treatment of the diseased condition by rectifying the *asbāb sittah zarūriya* and *ghair zarūriya*,<sup>3,17</sup> together with managing the quality of food.<sup>17</sup> It may be withheld, reduced or given in a moderate quantity or purposely increased. Diet change may be qualitative, quantitative or both.<sup>3</sup>

### (iii). Pharmacotherapy ('Ilāj bi'l-dawā):

The principle of treatment in unani system of medicine is '*ilāj bi'l-zid*; the temperament of disease being *bārid ratb*, the drugs having *hār yābis mizāj*; possessing the properties of *mudirr-i-hayd*, *mulattif balgham* and *mufattih* are used in the treatment of *qillat-i-tamth*.<sup>23</sup>

### Mechanism of action of *mudirr-i-hayd advia*:

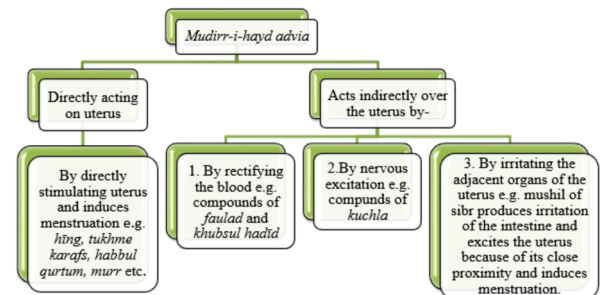


Fig.2: Mechanism of action of *mudirr-i-hayd advia*<sup>17</sup>

### Qawi mudirr-i-hayd advia:

#### Oral use:

- Decoction of *Hiltīt* and *murr* along with *filfil*.<sup>11</sup>
- Prepare tablet of *muqil*, *murr* and *abhal* in equal quantity and use in a dose of 10.5 g.<sup>4</sup>
- Decoction of *shonīz*, *nānkhua*, *qardmāna* in dose of 130gm is used daily before menstruation.

### (iv). Surgical treatment ('Ilāj bi'l-yad):

Mainly it includes *fasād* (venesection) which helps in stimulating menstruation. *Fasād* is beneficial, if not contraindicated otherwise. It should be done 2 days before menstruation. Mainly the *fasād* of *rag-i-sāfin* (saphenous vein) & *fasād* of *mabiz* (popliteal vein) is done.<sup>1,2</sup>

## 9. CONCLUSION:

According to unani medicine, normal menstruation is an indicator of healthy normal reproductive organs. In classical unani literature *Qillat-i-tamth* i.e. a spectrum of condition varying from scanty flow to menstruation occurring at an interval of more than 2 months. *Hippocrates* mentioned the main cause of disease is impairment of humors (*akhlāt*), he believes that it is necessary to treat the patients with oligomenorrhoea to avoid complications.

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