**ABSTRACT**

Anaemia is a global public health problem most often associated with iron deficiency—the most widespread nutrient deficiency in the world. Iron Deficiency Anaemia (IDA) is one of the most common nutritional disorders and it has public health importance in developing countries. It is the most common cause of nutritional anaemia in adolescents and women of reproductive age. Globally 50% of anemia is attributed to iron deficiency and accounts for approximately 841,000 deaths annually [1]. In India alone 80% of women are iron deficient. IDA is the most prevalent disorder among Indian women in the reproductive age (18 to 45 years) from the lower socio-economic strata. The important etiologies may include GI blood loss due to intestinal worm infestation, NSAIDs, malignancies, multiple pregnancies, menstrual irregularities, growth spurts, etc. It is characterized by stomatitis, glossitis, swollen & inflamed gums, pallor on conjunctiva and nails, fatigue and exertional dyspnoea. The management of the disorder comprises dietary/drug supplementation containing iron in different forms. Despite availability of iron supplements, anaemia is still a health challenge across the globe. The Unani drugs being safe, efficacious, easily available, cost effective and above all free from after effects of medications can play an important role in eradication of this problem if properly researched. Unani system of medicine uses holistic approach, most of the medicines employed for anaemia comprise iron on one hand and having hepatoprotective/ haemopoietic activity on the other. Our aim is to prove the statements of great Unani physicians on scientific parameters and to prove the efficacy of iron rich diet mentioned in Unani literature in the light of modern parameters.

**INTRODUCTION**

Anaemia is a Greek word, Where “an” stands for not, and “haemia” stands for blood, i.e. It can be defined as, a condition in which there is reduction in the quantity of RBC, haemoglobin and Packed cell volume. Anaemia is a major public health problem worldwide. It is one of the most common disorders encountered during pregnancy. It is estimated to affect nearly two thirds of pregnant and one half of non-pregnant women especially in developing countries. Iron deficiency anaemia is said to be more prevalent in developing than in developed countries. The incidence of iron deficiency anaemia is highest among women and young children varying between 60-70% [2]. Iron deficiency anaemia is the most prevalent nutritional deficiency and hematologic disorder in the world today. It is estimated that 30% of the global population or more than 1.5 billion people are anemic, more than half of those anemics believed to have iron deficiency. [3] In India, surveys have shown high prevalence of anaemia. [9] Anaemia prevalence was 56.2 percent in women of 15–49 yrs of age, 79.2 percent among children aged 6–35 months, 87.9 percent in pregnant women and 54.3 percent in men aged 15-49 yr. Sex prevalence shows that 58% of women and 28% of men suffer from anaemia. [10]

According to Unani physicians (Ibn Sina (980-1037 AD), Ismail Jurjani (1041-1136 AD), Ibn Hubal Baghdadi (1117-1213 AD) and Hakim Azam Khan (1813-1902 AD), blood is considered to be the vital fluid of human body which is formed in the liver. Due to derangement of the liver functions and weakness of hepatic faculties or sometimes due to associated diseases, the resultant formation of blood is not normal for nourishment (nuqs taghzia) there by leading to anaemia with sign and symptoms such as; pallor body complexion of patient, oedema due to raddi bukharat (obnoxious gases), sometimes gingivitis, disturbed sleep and sometime excessive sleeping, loss of appetite, indigestion, flatulence, delayed healing of wound or ulcers [5,6,7,8].

**CONCEPT OF SU-UL-QINIYA (ANAEMIA) IN USM**

According to Unani medicine, various synonyms of anaemia are:

- Faqr-ud-dam
- Su-ul-qinya
- Qillat-ud-dam
- Kami-e-khoon
- Bhus and Fasad-e-dam.

The term Faqr-ud-dam was coined in 20th century. Before this period the term ‘Su-ul-qinya’ was used, as its synonym. ‘Su-ul-Qinya’ is an umbrella term stands for “lack of vital treasure-blood”.

According to philosophy of Unani System of Medicine (USM), ingested nutriments undergo a phase wise digestion until it becomes the part of organ. First level of digestion takes place in alimentary canal followed by digestion in liver, vessels and organs. These are known as gastric, hepatic, vascular and organ digestion respectively. Second stage of digestion i.e. hepatic phase results in formation of akhlat (humours) i.e. blood, and deficient formation of blood is known as su-ul-qinya.
**Drug List**

- **Baranja sif**
- **Artemisia vulgaris**
- **Badam**
- **Prunus amygdalus**
- **Angoor**
- **Vitis vinifera**
- **Amla**
- **Emblica officinalis**
- **Anar**
- **Punica granatum Linn**

**Hematogenic Property**

- Some single Unani medicines having hemapoietic/haematogenic property.
- These are as follow:

**ALAAMAAT (Signs and Symptoms)**

- Fatigue
- Pale coloration of body
- General weakness
- Irritability
- Loss of appetite
- Breathlessness
- Palpitation
- Puffiness of face

**Management of Su-ul-Qiniya in USM**

- **USE OF ILAJ**
  - Treat or Remove the main cause. [9]
  - Use of Iron supplements/compounds and Vitamins like Folic acid and Vit.b._6_ [9]
  - Use of Hepato-protective and immunomodulatory Unani herbs to strong Liver. [9]
  - Vitamin C is given for sometimes to help the body to absorb Iron.
  - Excessive use of green leafy vegetables like Spinach.
  - Use of cereal like Peas, Soybean, Lentils etc.
  - Dried Fruits, such as Prunes, Raisins, and Apricots

**Discussion**

In anaemic patients main cause of the disease is considered to be ‘Sue mizaj barid Jigar’ in which hepatic processing of blood becomes disturbed and Liver fails to prepare mature blood, instead more phlegm is formed. So with passage of time more and more phlegm accumulate in blood as well as in body. This phlegm interferes with normal blood flow as a result nutrition to different parts of the body get disturbed. As per Unani concept adequate heat is required in Liver, to prepare mature blood/humours. Sometimes, this phlegm may cause hepatic obstruction which predispose to pufrefaction as well as free flow interferes with free flow of humours and as a result, these humours may split over and admix with blood. [6, 8] Therefore, Unani drugs/compound formulations which correct Liver functions and provide haematogenic action were given.

**Conclusion**

Unani drugs are found to be very effective in ‘Iron Deficiency Anaemia’. If guidelines of USM for diagnosis and treatment are followed, then the outcome is satisfactory. Further clinical trials with good methodology are recommended to prove a better effect of Unani formulations up to a great extent for the experimental as well as clinical trials have been conducted for antiaenaemic properties of some commonly used Unani drugs and the efficacy of these drugs have been proven.
management of Su-ul-Qiniya.

REFERENCES