

International Journal of Research Publication and Reviews

Journal homepage: www.ijrpr.com ISSN 2582-7421

The Review Article on Unani Medicine

Asmita Gokul Khairnar¹, Ankita D. Sonar²

¹Swami Vivekananda Sanstha's Institute of Pharmacy, Mungase, Malegaon. ²Ankita D. Sonar, Assistant Prof., Department of Pharmaceutical Chemistry, Sanstha's Institute of Pharmacy, Mungase, Malegaon.

ABSTRACT:

Marjan is also known as Munga in Unani medicine. It is a valuable drug with multiple medicinal properties. It is obtained from the coralline marine source Corallium rubrum L. This is a porous, hollow structure found in a variety of colors. white, dark red, black. Primarily red color is used medicinally in various forms such as ash, calux, toothpaste, surma etc. Internally it is an astringent, hemostatic, antidiarrheal, diuretic, detoxifier and vital organ tonic. acts as Since ancient times, it has been used to treat various ailments such as depression, epilepsy, paralysis, hemoptysis, kidney stones, neurasthenia, heart failure and brain damage. It is an excellent source of calcium and iron, and can contribute to deficiencies and general weakness of valuable iron and calcium, such as copper. Highly effective for cough, anemia, asthma, paralysis, loss of appetite, etc..

Keywords:Marjan; Busd-i-Ahmar; Coral; Paralysis; Anemia; Calcium Deficiency.

Introduction

All organisms are composed of specific chemical constituents with slight differences, therefore, for all diseases of man, the three medicinal sources (Mawalid-i-Thalatha) are used alone or in combination for therapeutic purposes. They are plant, mineral and animal substances. Substances of animal origin have long been used in USM to meet essential body requirements such as hormones and micronutrients such as iron, calcium, zinc and copper. Various medicinal substances such as marjan (coral), lulu (pearl), rajward (lapis lazuli), zumrud (emerald) and kubusle hadid are used in different forms. Use Ma'jun, Khamira, Kushta, Powder, etc. Since calcium is an essential element in the nutrition of heart and lung tissue, a variety of calcium-containing formulations made from natural sources are used in Marjan, Sadaf, Marwari and many other unani medicines. Iron-containing drugs are used as is in the oxide form rather than extracting the calcium form, which is considered a safer method of administration. Marjan is a well-known animal-derived drug by Unani Medicine, extracted from a colony of calcareous skeletons of a mollusk called Corallium rubrum L. . Being a dark red, porous, hollow structure made up of calcium, iron, copper, zinc, etc., it helps with general weakness and weakness in the functioning of the heart and lungs, as well as organ dysfunction. Progression of chronic liver disease to hepatocellular carcinoma is not uncommon in India. About 22,000 new cases of primary liver cancer are reported annually in this country. The incidence of secondary liver cancer is about 20 times higher than primary cancer. HCC is highly complex and unique compared to other types of cancer. It is mainly associated with chronic liver diseases such as hepatitis and cirrhosis of all causes Cirrhosis is the precursor to most HCCs, and HCC proliferation worsens liver function, so they influence each other. In addition, HCC is resistant to various toxins and most chemotherapeutic agents. Several clinical studies have attempted to overcome resistance to high-dose chemotherapeutic agents. However, such attempts did not bring significant benefit to HCC patient survival. Another hallmark of HCC is the natural tendency of HCC cells to invade the portal vein and proliferate in its lumen, which can be carried by the bloodstream and cause distant metastases. These drawbacks of HCC severely limit treatment options. Treatments such as surgical resection. ablation, and chemoembolization are only meaningful for selected patients. Protein kinase inhibitors such as sorafenib only improve survival for a short period of time. The very low overall survival rate of HCC (4%) highlights the limitations of treatment options and highlights it as a major health burden. Liver transplantation is currently the only treatment option for patients with cirrhosis and end-stage liver disease. The Unani Medical System is one of the oldest traditional medical systems, providing cures for chronic liver disease and cirrhosis for centuries. A number of single and combination drugs have been demonstrated to be beneficial in chronic liver disease. These preparations are mainly used for antifibrosis and liver regenerative effects. Pioneer of the Unani system of medicine, the great Roman physician Galen 129-217 (ad) explained that the liver is the equivalent of the sun, the energy source of other planets. The Unani system of medicine designated the liver as the organ responsible for the production of fluids (aflat) known as blood (dam), phlegm (belou), yellow bile (safra) and black bile (sauda). The liver also has four vital forces (mules): absorptive powers (kwate jaziba), digestive powers (kwate gaziya), and storage powers (quat-e-masikah).) and removal power (Quwat-e-dafiya). It is also known to be the organ responsible for the generation of innate warmth (hararat-e-gariziya). A proper balance of these forces and fluids is necessary to maintain a healthy metabolic state of the liver. An imbalance in any of these can lead to pathological changes by altering the humorous disposition. is based on measures to strengthen the liver. Calcium is an essential element in the human body and is involved in various biochemical functions of the body, and that the tissues are nourished by this element and the blood It is a well-known fact that it is an important ingredient in maintaining the pH of blood. In the presence of these valuable

elements, Marjan has received special attention from the Unani Brotherhood.Single or multiple compound preparations such as Khamira, Ma'ajeen, Kushta, Qurs, Habb, Kohl, Safof and others. Corals are prepared for medicinal use by boiling and purifying a decoction of T. myrobalan, firing in covered crucibles, and grinding into powder. It is then prepared by heating, calcining and finally grinding into a fine powder.

Description of Drug in Unani literature:

It consists of a colony of calcareous skeletons of the mollusk Corallium rubrum L. It is a dark red, porous and hollow structure. This occurs in Bari Ahmar (Red Sea), Bari Al Kahir (Mediterranean) and Bari Aukianus (Atlantic Ocean). West Indies, Panama, Japan, Taiwan, Australia. Corallium rubrum L. It lays eggs in the water and becomes larvae that attach to rocks in the sea. These larvae form polyps one by one of her and together they look like trees in water. When animals give birth and leave their homes, they become empty and rise above the sea level to form islands. The world's largest coral island is Australia's Coral Barrier his reef. He has three types of Marjan mentioned in the classic Unani books. red, white, black. Red is considered the highest quality, white the inferior quality, and black the lowest quality. Marjan consists of two parts, the part that looks like a branch (top) and the root-like part at the base. In the raw state, the trunk and branches are covered with a cortical substance, which the home of soft, small polyps. is The branches are called Shakh-i-Marjan and the roots are called Beekh-i-Marjan. Both are used for medical purposes in the Unani system of medicine in the form of Kushta (calx) or Softa (burnt). In addition to red varieties, there are also white and black varieties. White varieties are softer than red varieties, black varieties are hard varieties and are considered bad (poisonous). In Greek legend, red coral was believed to have magical powers. The Romans hung coral branches around their children's necks to protect them from danger. It was a trade item in ancient Egypt and Rome.

Physical characteristics

Shape: Shape of small leafless bushes

Color: Intensely red or pink colored by carotenoid pigments

Taste: Tasteless

Odor: Odorless

Consistency: Hard

Fracture: It easily breaks with crackling sound.

About Unani Medicine:

The Unani medical system has its roots in the ancient Greek teachings of Hippocrates (460-377 BC). The name Unani reflects its Hellenistic origins and is derived from the ancient Greek name Yunan. Unani medicine reached its peak during the Middle Ages (AD 500-1500), mainly in the Arabian Peninsula, Persia, Egypt, Syria, ancient Mesopotamia and the surrounding Islamic world. In various parts of the world, it is also called Greek-Arabic medicine and Persian medicine. Unani medicine is based on the Hippocratic concepts of Mizazi (temper) and Aphrat (humor). Notable scholars of Unani medicine include Ibn Sina and many others. Unani Medicine recognizes the impact of environmental and ecological conditions on human health. Unani Medicine focuses not only on treating disease states, but also on preventing illness and promoting existing health through the principles of the Six Essential Elements of Life (Asbabe-SittaZarooriyah). It is also very important to maintain a proper ecological balance and protect air, water and food from all pollutants and pathogens. Galen (AD 129-200), a prominent Unani physician, postulated that certain diseases caused by pollutants tended to be carried by the wind and therefore spread more rapidly. They enter the human body through the respiratory tract. According to classical Unani wisdom, boosting immunity with an immune booster is one of the most important approaches to prevent disease and stay The "germ theory in Infectious Diseases and Contagious Diseases or Pandemic Situations (Waba) healthy. Unani Medicine of disease" was first established in 1683 with the development of the microscope. For obvious reasons, the concept of microorganisms as pathogens is not directly mentioned in Unani medicine. However, certain he has a reasonable understanding that Aisam-i-khabitha (literally translated as "bad substance") can be transferred from a sick person to a healthy person and cause illness. The theory of contagion is held by many Unani scholars

According to Jalinoos, "Physicians should always be aware of changes in the weather and air. It describes the routes of spread and their differential diagnosis. In May 1970, it was recognized by WHO as "the first scientific paper on this subject". According to IbnSina, air and water are polluted only after mixing ajsam-i-khabitha, otherwise it does not occur. Such contamination can also occur when the bodies of people who have died from epidemics are not properly disposed of. This indicates that he was aware of microorganisms that remained in the body after death and could infect others. 1369 AD), in his treatise Tahsilgaradal-qasidfitafsil al-marad al wafid (Successful Elimination of the Plague), said: Plague sufferers begin to suffer from the same symptoms. Ancient scholars of Unani medicine have been proven to have excellent knowledge of disease transmission. A large literature survey shows that the term "Waba" is used in the Unani literature in a wide geographic area. Avicenna has already been used to collectively describe disease epidemics and pandemics that spread over a territory. It is said that

Perception of Unani Medicine:

According to Unani Medicine, the exact term or disease for this pandemic case is not described in the Unani literature, but the widespread outbreaks of Humma-e-Wabaiya (pandemic fever) and Nazla-e-Wabaiya (pandemic influenza) can be grouped into generic terms. be explained. The symptoms of NazlaWabaiya and Humma Wabaiya mimic those of COVID-19. Hummaewabaiya is a devastating type of heat generated by unavoidable air changes (qualitative or quantitative). The result is filthy air, which in time leads to the abnormal temperament of Lou (the spirit), which in turn leads to morbidity and mortality. Fresh, clean air is essential to health, so airborne pollution can affect the health of each individual, depending on the degree of pollution. Elderly people and children with weakened immune systems are particularly concerned about the accumulation of waste fluids and opening of pores. Rabban Tabari (838-870 AD) explained that people with excess waste products in their bodies are usually affected by Humma Wabaya. In Humma-e-Wabaiyah and Nazra-e-Wabaiyah, body temperature predominates and catarrhal symptoms are much more influential. was bad. Additionally, the importance of air purification, transmission routes, and the importance of

quarantine/isolation are defined in Ibn Rushed's book Kitab al-Kuliyat (Unani Medicine Principles Paper).

Biological Effect and Mechanism:

Used in Ayurvedic and Unani medicine to treat liver and central nervous system disorders. Used as a stimulant, tonic, antispasmodic, laxative, bronchodilator, vasodilator, and sedative. Properties studied:

antifungal, hepatoprotective, antispasmodic, neuroprotective, antiparkinsonian, antidepressant, sedative, antioxidant, antihypertensive, antispasmodic, anti-inflammatory, cardiotonic, antimicrobial, vasodilator, antiepileptic. Used in the Unani medical system to treat pain, digestive problems, menstrual bleeding and to strengthen the heart. Anti-inflammatory agent used in the treatment and treatment of various inflammatory diseases. Properties: Prominent Analgesic, Anti-Inflammatory, Cardiotonic, Anti-HIV, Antibacterial, Antioxidant, Antitussive, Hypnotic, Antidiabetic, Relaxing, Analgesic, Laxative, Wound Healing, Skin Tonic, Gastrointestinal Disorders, Menstrual Bleeding, Pregnancy Related Disorders, Psychiatric Disorders , depression, anxiety. It is beneficial in liver dysfunction and has liver tonic properties. It induced neurite outgrowth activity and inhibited $A\beta$ -induced atrophy and cell death. -Dissociation of long-term protective $A\beta$ -induced atrophy and strong neurite outgrowth activity.

CONCLUSION:

In this study, we attempted to examine formulations for the treatment of liver disease as described in the National Formulary of Unani Medicine and Unani Pharmacopoeia, India. A total of 59 formulations are listed. It supplies nutrients to the muscles, especially the heart muscle, and also increases hemoglobin levels in anemia. It also removes clotted blood from the heart and brain. As such, he is used as a key ingredient in various formulations of the Unani compound, which may help treat multiple ailments, especially vital organs. They were divided into 6 groups by him based on their biological effects and medicinal efficacy. Comparing the compositions of these formulations, we found that they were made with 121 herbal medicines, 18 minerals, and 6 animal products. Of these, about 16 herbal medicines have significant biological effects and have been used in multiple regimens to treat mild to severe liver disease. This review highlights the need to study these 16 plants for their potential bioactive compounds, pharmacological effects, and clinical applications for the development of new effective drugs to treat hepatocellular carcinoma. is showing.

References:

- 1. Nadkarni K. "Indian Materia Medica". Panvel: DhootpapeshwarPrakashan Ltd: 156-158.
- 2. Rafiquddin HM. "KanzulAdviaMufrada". Aligarh: University Publication Unit. (1985): 166,167.
- 3. Khan Azam HM. Muheet-i-Azam". New Delhi: Central Council for Research in Unani Medicine 4 (2012).
- 4. Khan Azam HM. "Muheet-i-Azam". New Delhi: Central Council for Research in Unani Medicine 4 (2018): 569.
- 5. Abdul Hakim M. "BustanulMufradat". New Delhi: Idara Kitabus Shifa. (2011): 92.
- 6. Kalam MA. "AdviaHaiwaniwaMa'dani: Animal and Mineral Origin Drugs". New Delhi: Hidayat Publishers and Distributors (2021): 22-27.
- 7. Ibn Sina. "Al-Qanoon Fil Tib". New Delhi: Aijaz Publishing House (2010): 301.
- 8. Vohra SB and Khan SY. "Animal Origin drugs used in Unani Medicine". New Delhi: Vikas Publishing House Pvt. Ltd. (1978): 46,49,65,67, 69, 78,82,86,93,96,101,107,109,111,124.
- 9. Anonymous. National Formulary of Unani Medicine-Part I. New Delhi; Central Council for Research in Unani Medicine (2006).
- 10. Kabiruddin HM. "Bayaze Kabir". New Delhi; Idara Kitabus Shifa. 2 (1938): 11,72,88,118,140, 151.
- 11. Brian I and Carr: Understanding liver cancer: A tale of two diseases. Springer healthcare communications London, UK, First edition, 2014: 1-16.
- 12. Sina I: Al Qanoon fit tib. (Urdu translation by Ghulam Hussain Kantoori). Idara kitabushifa publication, New Delhi, Vol 3 2010.
- 13. Tabri AHAM: Al molejaatbukratiya. Vol 3. Central council for research in Unani medicine New Delhi, Vol 3, 1997: 197-217.
- 14. Tabri AHR: Firdausulhikmat (Urdu), Sheikh Mohammad Bashir & sons, Lahore, 1 & 21997: 206-210

15. Ansari S, Siddiqui MA and Fasihuzzaman: Therapeutic principles of liver diseases in Unani medicine. Journal of Research and Education in Indian Medicine 2015; XXI: 101-05.

16. Siddiqui A, Anjum R, Jamal A, Aslam M and Choudhary SS: Fatty liver diseases in Unani system of medicine. International Journal Pharmacy Med Biology allied Science 2017; 1-9

17. Siddiqui MA and Ansari S: Unani treatment improved fibrosis in decompensated cirrhosis of liver: A case series. Journal of Ayurveda and Integrative Medicine 2015; 4(2): 61-66.

18. National Formulary of Unani Medicine: Central Council for Research in Unani Medicine, Ministry of health and F. W. (Dept. of AYUSH) publication, Delhi, First reprint Part 1, 2006.

- 19. National Formulary of Unani Medicine: The controller of publications: civil lines, Delhi, First edition, Part III, 2001.
- 20. National Formulary of Unani Medicine: The controller of publications civil lines, Delhi, First edition, Part IV, 2006.
- 21. National Formulary of Unani Medicine: Central Council for Research in Unani Medicine Delhi, First edition. Part VI, 2011.
- 22. National Formulary of Unani Medicine: Dept. of AYUSH, Ministry of Health & Family Welfare, Govt. of India, First edition, Part II(I), 2007.
- 23. Unani Pharmacopoeia of India: Central Council for Research in Unani Medicine, Part II(I), 2009.
- 24. Unani Pharmacopoeia of India: Central Council for Research In Unani Medicine, Part II(II),2010.
- 25. Purnima, Bhatt M and Kothiyal P: A review article on phytochemistry and pharmacological profiles of Nardostachyjatamanasi DC-medicinal herb. Journal of Pharmacognosy and Phytochemistry 2015; 3(5): 102-06.
- 26. Siddiqui (2020) Prevention and management of Covid-19 in Unani medicine. World J Pharm Res 9: 1097-1106.

27.Budholiya P, Ali AW, Gunwan D, Sahil S, Tyagi CK, et al. (2020) COVID-19: A Global Pandemic of 21st Century. J Drug Deliv Ther 10: 311-321.

28.IbnSina, Al Qanoonfiltib. Kulyat-e-Qanun part-4 Edition-1981, translated by Rizwan Ahmed, DarulTalyfat, Karachi.

29.IbnRushd (2008)Kitab al-Kulliyat, New Delhi.

30 Anonymous (2020) Training module/Investigators brochure for Population based Prospective Study on effectiveness and outcomes of Unani Medicine prophylactic interventions on population at risk of COVID-19.

31. Ahmad SF (2020) COVID-19, its prophylaxis and management in the light of Unani system of Medicine- A Review. JETIR 7: 553-561.

32. https://www.nhp.gov.in Concept-of-prevention-of-diseases-inUnani-Medicine_mtl 32 Parvez A, Ahmed Z, Anwar N, Razi'sKA (2016) Unique approach to Amraz-e-Wabaiya (Infectious Diseases): An overview. Int J Herb Med 4: 176-178.

33. Fu JT, Tang L, Li WS, Wang K, Cheng DM, et al.(2015) Fumigant toxicity and repellence activity of camphor essential oil from Cinnamonumcamphora Siebold against Solenopsisinvicta workers (Hymenoptera: Formicidae). J Insect Sci 15: 129.

34. Kim S, Na YE, Yi JH, Kim BS, Ahn YJ (2007) Contact and fumigant toxicity of oriental medicinal plant extracts against Dermanyssusgallinae (Acari: Dermanyssidae). Vet Parasitol 145: 377-382.

35.Bhatwalkar SB, Shukla P, Srivastava RK, Mondal R, Anupam R (2019) Validation of environmental disinfection efficiency of traditional Ayurvedic fumigation practices. J Ayurveda Integr Med 10: 203-206.

36. Kim J, Jang M, Shin E, Jeongmin K, Lee SH, et al. (2016) Fumigant and contact toxicity of 22 wooden essential oils and their major components against Drosophila suzukii (Diptera: Drosophilidae). PesticBiochemPhysiol 133: 35-43.

37.EzzEldin HM, Sarhan RM, Khayyal AE (2019) The impact of vinegar on pathogenic Acanthamoebaastronyxis isolate. JParasit Dis 43: 351-359

38. Amini M, GhorannevissM, Abdijadid S (2017) Effect of cold plasma on crocin esters and volatile compounds of saffron. Food Chem 235: 290-293.

39. Rahmani AH (2015) Cassia fistula Linn: potential candidate in the health management. Pharm Res 7: 217-224.