



Maternal Health Care through ASBAB -E-SITTA Zarooriya (Unani Approach)

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ABSTRACT

Maternal health refers to the health of women during her three precious phases of life that is pregnancy, childbirth and the postnatal period. Each of this stage should ensure women and their babies to reach their full potential for health and well-being. About 2,87,000 women died during and following pregnancy and childbirth in 2020. Various strategies are being developed to ensure that every pregnant woman receives four or more antenatal care (tadabeer hamla) visits, delivery by a skilled attendant and postnatal care. The most common direct causes of maternal injury and death are excessive blood loss, infection, high blood pressure, unsafe abortion, and obstructed labour, as well as indirect causes such as anaemia, malaria, metabolic disorders and heart disease. Good maternal health can reduce maternal morbidity and [mortality](#). The Unani System of Medicine which is holistic in nature, has its own approach in describing the concepts of maternal health. Six factors are essential in order to maintain good health which are *Hawae Muheet* (pure atmospheric air), *Makool wa mashroobat* (food and beverages), *Harkat wa sukoon e badni* (Physical movement and Rest), *Harkat wa sukoon e nafsan* (Psychic movement and rest), *Naum wa Yaqzah* (Sleep and Wakefulness) and *Ehtibas wa Istafraagh* (Retention and Evacuation). In this review paper, details of these essential factors in respect to maternal life are described in details. Ideally it should began soon after conception and continue throughout pregnancy. Therefore, Unani medicine can protect and preserve health by proper dietary intake, effective drug less regimens and day to day activities.

Keywords: Maternal health, Antenatal care, Unani medicine, Asbab-e-sitta zarooriya, Maternal mortality and morbidity, Anaemia, Obstructed labour

Introduction :

Maternal health refer to the health of women during three precious phases of life such as pregnancy, childbirth, and the postpartum period. A healthy women should be mentally, physically, emotionally fit to serve her babies and to develop a good society. Women of low socioeconomic status and of hilly areas suffers more in terms of receiving health services thereby causing more maternal health crisis and deaths. Pregnancy and childbirth is a natural process but it turns out a life changing event for these women. India has various maternal health initiatives, with more than two decades of dedicated safe motherhood programming. The survival and well-being of mothers is not only important in their own right but is necessary to develop and maintain a healthy and intellectual society.⁽²⁾ According to WHO reports, everyday in 2020 almost 800 women died from preventable causes related to pregnancy and childbirth. 95% of all maternal death occurs in low and lower middle-income countries and most could have been prevented. Young Primi (ages 10-19) are more prone for higher risk of complications and death than other women. Between 2000-2020 MMR dropped by about 34% worldwide. Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) are widely accepted as a crude indicator of the overall health status of a country or a region⁽³⁾. In India "Maternal and Child Health Programme" run to achieve specific objectives to reduce the maternal, perinatal, infant and child mortality and morbidity, and to promote the reproductive health, physical and psychological development of child. The main aim of MCH services is Life – Long Health⁽⁴⁾. Revitalization of Local Health Traditions and Mainstreaming of AYUSH (Ayurveda, Yoga, Unani, Siddha & Homeopathy) is two of the seven objective of NHM. Leading causes of maternal mortality include haemorrhage, sepsis, complications of abortion, and hypertensive disorders, and infection, premature birth, birth asphyxia, pneumonia, and diarrhea for infants.⁽⁵⁾ Maternal health is the biggest health issue in the present scenario. Management of pregnancy and parturition has always been a challenge to the medical world. In Unani medicine concept of *Asbab-e-sitta zarooriya* and various wide therapeutic regimens offer a better solution to maternal health and child health problems. Keeping in view the magnitude of the problem, a review paper on this topic was initiated by the author which emphasis the co-relation between maternal health and *Asbab-e-sitta zarooriya*. According to Unani system of medicine, care of the woman's health, should be taken into consideration much earlier than her actual pregnant state. USM lays great emphasis on healthy lifestyle through *Asbab-e-sitta zarooriya* (six essentials of life). These are set of six essential rules discussed below which govern the body functioning to balance and optimum level thereby maintain the health.

1. *Hawa Muheet (Pure air)*

As season change, the air also changes into another temperament. Unani physicians described various changes in vital heat of the body as per climate changes. Such as vital heat of the body is strong effective to maintain growth and development in cold weather as compare to summer season. *Quwwat Had'ima* (digestive faculty) works slightly more in winter than summer and helps to utilize the nutrients and expel out the waste products from the body.⁽⁵⁾ In spring season vital heat is equally present in all organs of body at optimum level. Vital heat usually becomes weak during summer season. The human body is 60-70% moisture and is at a temperature of approximately 37°C. In Tibb, most serious diseases fall under the excess of cold and dryness, due to a lack of the maintenance of body heat⁽³⁷⁾. If for any reason this innate body heat is reduced, then not only digestion and assimilation impaired but it will also result in an accumulation of toxic by-products.⁽³⁶⁾ Environmental hot air causing dissolution of various body substances, in such a way that it helps in thinning of the *Akhlat* (humours) and *Arwāh* (pneuma) of the body and makes them capable to easily dissipate from the body in the form of vapours. Hot air makes the body *Mutakhalkhal* (rarefied) and causes to open the skin pores which in turn facilitate the process of dissolution of *Ruūbat Gharīziyya* (innate moisture) and affects all parts and organs of the body^(6,7,8). Air performs the function of *T'adeel-e-Rooh* as well as *Tankiya-e-Rooh* at the time of inspiration and expiration respectively. So fresh and pure air is very necessary to perform physiological functions and to maintain maternal health.^(9,10) Few environmental agents causes adverse pregnancy outcomes. Contact with these chemicals may impart significant maternal and fetal risks.⁽³⁴⁾ Such as excess exposure to methyl mercury or lead is associated with neurodevelopmental disorders.⁽³³⁾ It is widely seen that weak and poorly immunised women and children are more prone of the air bone diseases caused by seasonal or natural changes and environmental pollution of air. Polluted air induces some detrimental changes to humours which ultimately turn out to be a cause of ill health. We can control and prevent most of the maternal lifestyle problems through strengthening of *rooh* & immunity by breathing in fresh and pure air.

2. *Makool wa Mashroob (Food And Beverages):*

Food and drinks are one of the important factor effecting women mothers and children. Food and drinks are the substance that provides replenishment for the dissolution occurring from the body therefore it is necessary that the substances which are being used as nutriment should be similar to that nutritive value which is undergoing dissolution from the body.⁽⁵⁾ In this context Mehmood Amlī states that this dissolution is required for growth and development.⁽¹¹⁾ Specially women needs the replenishment of Iron, Calcium, Vitamins etc. during pregnancy and post partum period, therefore diet should emphasize to provide these nutrients. All nutritional substances produce heat during metabolism as their natural phenomenon, because of their conversion into blood leads to a natural rise of heat in the body.^(12,13) A wholesome diet, based on locally available foods and herbs, compatible to ones' own body constitution or *mizaj* of the person, body requirements and seasons is advocated by Hippocrates, Galen and Ibn Sina, the original pioneers of Tib. ^(14,15,16,17,18) Unani physicians had advocated precise diet for specific illness, age and need.^(16,19) Pica is the craving of consuming of ice, laundry starch, clay, dirt, or other non food items. It should be discouraged due to its inherent replacement of healthful food with nutritionally empty products.⁽³⁴⁾ In some cases, it may represent an unusual physiological response to iron deficiency. Many vegetarian diets are protein deficient but can be corrected by increasing egg and cheese consumption. Anorexia and bulimia raise maternal risks of nutritional deficiencies, electrolyte disturbances, cardiac arrhythmias, and gastrointestinal pathology. Pregnancy-related complications with these eating disorders include greater risks of low birthweight, smaller head circumference, microcephaly, and small for gestational age (SGA) newborn⁽³⁴⁾. During pregnancy women should be given *lateef kaseer ul taghziya ghiza* i.e. easily digestible with high nutrition having *haar rataab* nature as this completes the demand of mother and foetus both. In addition to these, iron rich food items should be added in diet such as dates, jaggery, pomegranate and food cooked in iron vessels. This will improve the pregnancy associated illness such as anaemia, hypertension, constipation, oligohydramnios, difficult labour etc and ensure the safe pregnancy. Mother should avoid onion, ginger, garlic, rai, hing and hot spices. Adequate sleep should encourage to assist digestion process.^(16,18,21) Tibe Nabwi advocates the use of dietary supplement *Talbina* (made from Dates and Jau) as it complete the requirement of calcium and iron. *Jwarish Anarain* and *Jawarish Tamarhindi* can be given to control digestion related ailments and vomiting. Pregnancy constipation problem should be taken care by safe laxatives like *maweez munaqqa*, *ispagol husk* or *rogan badam shreen* in milk^(16,18). In last trimester use of ghee and butter is advocated by physicians so as to cover the subcutaneous fat formation need of the fetus and at the same time help in smoothening of birth passage. Post partum period requires some more protein rich soups:- *Maul lahem* such as *hareera*, *lauzeena*, healthy fats (nuts, avocados, olive oil, fatty fish) lean or low-fat protein (fish, poultry, tofu, beans, seeds, nuts, lentils, edamame, lean beef) fruit, vegetables (especially leafy greens) whole grains, legumes/beans, *hareesa*, fluids (water and some electrolyte-containing drinks). But excessive food intake decreases vital heat and make it unable to utilizes its tool for digestion due to excessive amount of nutriment and which ultimately results into indigestion. This affects the process of heat production in the body and as a result an abnormal heat is produced which is known as *Hararat Ghariba* (increased body heat/abnormal heat). In the certain conditions requirement of body changes about likes and dislikes of nutriment, and this is not arbitrary but meant to maintain *ai 'adal-emizāj* (normal constitution) and vital heat in the body⁽²²⁾.

3. *Harkāt-o-Sukoon Badani (Movement and rest of the body):*

- Movement is essential for human being; as it produces heat in the body and support vital heat to perform better body functions. Movement is described according to its effects on human body as *Shadid* (vigorous), *Da'if* (weak), *Qalil* (short duration), *Kathir* (prolonged duration).^(6,23) It boosts up the *Hararat-e-Gharizia*, which is responsible for better digestion & well being.
- While rest always produces cooling and moistening effects on the body because vital heat does not get excited during rest. Therefore excessive rest produces *Burudat* (cooling) and may responsible for the suppression of vital heat and affect the actions of Physis. ^(6,12,24)

- Excessive movements should avoid in first trimester specially in women of Bad obstetric history, it can trigger the risk of abortion. Proper bed rest is strictly advised in these women.⁽³⁴⁾
- However conditioned pregnant women should continue exercise throughout gestation. It promote physical fitness and may prevent excessive gestational weight gain. Exercise may reduce the risk of gestational diabetes, preeclampsia, and cesarean birth. In the absence of contraindications, pregnant women are encouraged to engage in regular, moderate-intensity physical activity of at least 150 minutes each week. Such activity has been shown to not adversely alter uterine artery Doppler studies⁽³⁴⁾. Each activity should be reviewed individually for its potential risk. Examples of safe activities are walking, running, swimming, stationary cycling, and low-impact aerobics. However, they should refrain from activities with a high risk of falling or abdominal trauma. Similarly, scuba diving is avoided because the fetus is at increased risk for decompression sickness⁽³⁴⁾. But as pregnancy progresses, balance problems and joint relaxation may predispose to orthopedic injury. During exercise, gravidas should avoid exhaustion, overheating, dehydration, and prolonged supine position. It offers potential benefit to maintain maternal health as -
- Gestational Diabetes Mellitus-physical activity may not prevent the development of gestational diabetes, but it may help to manage it. Additionally, exercise modulates maternal weight gain in pregnancy .
- Hypertension and Preeclampsia- Data reported from the North Carolina Pregnancy Risk Assessment Monitoring System indicate that gestational hypertensive complications are less likely in women who are physically active before and during pregnancy.
- Obesity predisposes several maternal complications include hypertension, preeclampsia, gestational diabetes, labour difficulties, caesarean delivery, and operative complications. Obesity also appears to be associated with a range of structural fetal anomalies⁽³⁴⁾.
- Adequate amount of physical activity can regulate the excessive viscosity and quantity of *Maddah (Ikhlat/humours)* in order to maintain normal physiological functions.⁽³⁰⁾
- It has also been hypothesized that exercise would alleviate symptoms of depression during pregnancy^(38,39,40) and during postpartum period.⁽⁴¹⁾
- Several studies report a decrease in depressive symptoms on questionnaires in women who are physically active.^(38,39,40)

4. *Harkāt-o-Sukoon Nafsani (Psychological factors) :*

- Unani scholars have explained that *Quwwat-e-Mudarikh*(sensory facilities)and *Quwwat-e-Muharrikh*(motor faculties) are associated with *harkat-e-sukoon nafsani* and help in various external and internal functions of the body.
- Andoh (anxiety) is a psychological condition in which vital heat move on both interior or exterior of the body.⁽²⁵⁾
- Unani physicians believe that some specific diseases like mental disorders and hysteria are caused in most cases by emotional disturbance and strain and therefore while treating such patients, a physician must consider all such factors. A specific division of Unani medicine known as *Ilaj Nafsania* (Psychological treatment) deals with psychological issues.⁽²⁶⁾
- Pregnancy and a new baby bring a range of emotions.⁽⁴¹⁾Ibn-e-Sina, Samarqandi, recognized the *Infiyalat-e-Nafsania*(emotions-grief ,anger,love) on womens at the time of pregnancy, postpartum. They also gave the concept of psychiatric disorders (Puerperal mania and dementia) as negative consequences of child birth.
- Therefore balance with emotions is necessary for maintaining good maternal health.

5. *Naw`m-o-Yaqza (Sleep and wakefulness) :*

- Sleep is basic need of life because there is continuous dissolution of *lateef bukharat* in the body due to wakefulness and during sleep the replenishment of these *lateef bukharat* are provided because sleep facilitates into concoction and digestion of the nutriment and provides moisture to body^(27,28). During sleep vital heat moves inside the body and helps in digestion of food.^(6,27)Sleep is similar to rest ,thus increases *Buroodat* and *Rutoobat* in the body.^(6,12)
- Zakariya Razi states that normal sleep for optimum duration recompensate the *Taskeen* and *Taqwiyat* of the body.⁽²⁹⁾ Sleep(left lateral position) for 8 hours at night and 2 hours during daytime is advised. Sleep disturbance is a common issue during pregnancy so that globally more than 75% of pregnant women experience some form of sleep problems⁽⁴²⁾. Rising levels of hormones such as progesterone can be responsible for such changes in the quality of sleep in pregnant women.⁽⁴³⁾In pregnant women, short sleep duration is associated with longer labour times and subsequently increased caesarean section (C-section) rates. ⁽⁴⁴⁾
- *Hammam* , *Dalak (rogan kaddu, kahu)* can be done to induce good sleep.

6. *Estifragh wa Ehtibas (Elimination and retention):*

Estifragh means the elimination of unnecessary substances out of the body because retention of these substances inside the body produces many maternal illnesses(pelvic abscess, *Warm-e-Rahem*, sepsis etc). In the same way, elimination of the substances which must be retained(proteins,fat) causes the

abnormal conditions.^(6,12) But excess excretion results in abnormal condition and dissolute vital heat. Therefore elimination and retention within normal limits are beneficial to maintain maternal health^(25,30) and to prevent from abortion, Antepartum hemorrhage, Postpartum hemorrhage, Preeclampsia, Gestational Diabetes Mellitus. Herbal plants having emmenagogue/oxytocics property are usually helpful in inducing and augmenting the labour process, which helps in the expulsion of fetus and placenta e.g., *sudaab, sheetrāj hindi, chirchita, darchini, taj, juntiana, behroza e khush musaffi, ispand, bekhe kapas, ferfiyum* and borax are good medicine for easing labour mentioned in Classical unani texts.^(31,32)

Conclusion:

The Unani System of Medicine has its own holistic approach in describing the concepts of maternal health⁴⁵. It also has its own approach of preventing ailments related to antepartum, intrapartum, and postpartum phases. Managing ailments related to pregnancy Unani philosophers described importance of these six essential factors in very details, because human life is impossible without them; an equilibrium and balance in *Asbab-e-sitta zarooriyah* is necessary for healthy maternal life. And it is not much difficult to adapt these basic factors in every day life among various socioeconomic groups. This can reduce complications during and after pregnancy significantly. After thorough literature survey, as discussed in the present review article, it can be concluded that by adapting these factors various ailments during pregnancy can be prevented, so that each and every mother can pursue the healthy and good life.

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