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## An unani insight of dual feel (Lymphatic filariasis)

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### Abstract

The word Dual-Feel is word originated from Arabic language, it means, like the leg of an elephant. In Unani system of medicine Dual-Feel is define as swelling of feet and calf, which resembles the leg of an elephant. Lymphatic Filariasis a major public health problem in tropical areas all over the world alternative herbal remedies has been recommended in various medical treatises for the cure of different disease. In this regard there is great opportunity for identifying excellent Unani components or its active principle, particularly in consideration of fact that such substances may provide maximum advantages with cost effectiveness, least side effects. The derangement of balgham and sawda into the human body is cause of the disease the eminent Unani scholar. Zakaria Razi has mentioned that the disease is caused by Black bile (Sawda). Some Unani physicians describe that the disease results due to the abnormality of phlegm (Balgham) and Black bile (Sawda). In the acute stage of the disease the colour of the skin of feet and calf is reddish and gradually according to the chronicity it become black closed to bluish. The aim of this article to describe the complete clinical aspects of lymphatic Filariasis with main emphasis on it causes of diseases and its line of treatment (Usool-e-eIlaj) which described in Unani classical literature.

**Keywords:** Dual feel, unani medicine, lymphatic filariasis, balgham, sawda

### Introduction

Dual Feel (Lymphatic Filariasis) is also known as elephantiasis. The leg of a patient become like a leg of an elephant. The name of the disease is feel-pa (Kabiruddin, 1996) [8]. In this disease the swelling of lower extremities accuse with or without Lymphadenopathy and Lymphangitis. Patients may have fever also. The problem of filariasis is one of the national priorities and the researchers all over the world pay attention towards eradication of the disease. This disease caused by different thread like nematodes belonging to the family of filariasis such a wochereria lancrofti, Brugia malai, Brugia timori and Loa loa.

The description of Dual-Feel in Unani classical literature, generally with the disease of dawali (varicose) (Razi, 2004) [3], but also Dual-Feel is separately mentioned with great details. The concept in Unani system of medicine is that, the disease is caused by accumulation of Balgham-e-Ghaleez in the affected part. This Balgham-e-Ghaleez converts into Sawda on becoming chronic (Kabiruddin, 2003) [9]. In our country generally the disease is found in Bengal, Assam, Uttar Pradesh and Madras. Bihar is also affected with filariasis. In fact w.Lionerofti is found throughout the tropics and sub tropics i.e. Asia, Africa and South America etc. The affected parts of human body from Filariasis are feet scrotum, limbs female breast and sometimes female genital organ (Kabiruddin, 2007). Natural vectors for W.bancrofti are culex pipiens. Dual feel is not fatal but it can persist till the death of a patient (Guna Munna, 2008) [11].

**Clinical features:** Asymptomatic (or sub Clinical) microfilaria, hydrocele, acute adenolymphagitis (ADL) and chronic lymphatic disease are the clinical features ADL is characterized by high fever lymphatic is inflammation lymphagitis and lymphadenitis in Unani system when Sawda (black bile) is the main cause of the affected part becomes warm and the colour of the body part becomes rough. Somehow colour of the affected part become black closed to blushed, the surface of the leg become rough and may be ruptured. In this position the skin loses its sensitivity. But if there is no burning and redness it means the reason is Balgham-e-Ghaleez not Sawda is involved. If Lymphatic damages increases, Lymphodema can develop into Lymphatic obstruction and the permanent change associated with elephantitis. In Bancroftian filariasis genital organ involve is common hydrocels may develop in advance stages; this condition may involved into sclerotomal lymphodema and sclerotomal elephantitis. In cases of obstruction, renal lymphatic ruptures which causes chyluria most probably in the morning (Kabiruddin, 2007).

The lymphadenitis is retrograde extending peripherally from the lymph node draining the area where the adult parasite resides. Regional and local lymph node are enlarged and the entire lymphatic channel can become inflamed it has been observed that there is the relation between the full moon and this diseases. In calf muscles is converted externally unnaturally bulky which is resemble the elephant and looks ugly there for it is called Daul-Feel, very thick morbid and viscous humour is root cause of the disease which is accumulated in the lower limb and calf (Ibn Zohar 1986).

### Clinical features

The disease is generally occurring in lower limb (calf, feet) upper extremities (hand, breast in female) lower extremities and often genital organ (Kabiruddin, 2007). Some general symptoms appear within three months of infection but generally the incubation period ranges from 8 to 12 months, within 4 days at the infective larva reaching to the lymphatic channel. There is the marked cell mediated response in the local lymph gland followed by and anti-body mediator response in the afferent lymphatic by an anti-macro filarial antibody (Anonymous, 1992) [2]. In early lymphatic filariasis this is responsible for the enlargement of local lymph gland. After the infective larva migrated in the lymphatic channel, considerable changes take place with a grade increase in diameter in the formation of large tortuosities. The changes rapidly revert to normal following death of the worm from micro filarial drugs disturbance of lymphatic flow with lymphadema occurs, only when a strong resistance to re infection has develop the appearance at anti micro filarial antibody. The filarial edema starts initially from the feet after that it spread over the leg and calf. Sever pain may be present. Urticaria and Dermotoclosis, Oozena may be present (Sehar *et al.*, 2014).

### Causes of the disease is following

- 1) The Disease of Varicose (Dawali)
- 2) Gout
- 3) Viscid Phelmatic (fluid) humour
- 4) Viscid Sawdavi Melacholic (fluid) humour
- 5) Infection of Tuberculosis / infection of Gonorrhoea
- 6) To live in damp and wet area, water contamination
- 7) Woncheria Boncrofti
- 8) Brogi Malai
- 9) Loa Loa (Azmi-2004)

### Type of filariasis

There are broadly into two types of filariasis  
Most of Unani Scholars described its two types

#### 1. Sauda-e-Moharreka (Abnormal black bide)

The symptoms of the disease appear according to their causative factors. When the disease is due to Sawda-e-Moharreka (Abnormal Black bide) then the touch of the effected part is hot in the acute the initial stage of the disease generally the colour of the feet and calf is become reddish gradually. According to chronicity it is closed to black / bluish and the skin of the leg and feet has cracked and oozing may be present. The colour of the affected part of body is near to greenish black, the sensation of feet and calf is lost. The circulation of blood flow is gradually become low (Akbar 1903) [5].

#### 2. Bhalgam-e-Galiz (Morbid thick plegham)

If the cause of the disease is Bhalgam-e-Galiz (Morbid thick Plegham) then the calf and feet is become oedematous without redness and heat. And generally feel cold and soft on touch cracks an oozena have not persist (Jeelani 2005) [7]. This type Dual-Feel occurs due to vesicant of humour, had accumulated in the body or organ due to weakness and obstruction of Urooq-e-Jazba (Lymphatic Vessels) there by giving rise to the disease progress.

The cause of this congestion is caused by obstruction of lymphatic vessels Urooq-e-Maiya (Kabiruddin 2007, Azmi-2012) [12]. According to Allama Nafeesi Daul-Feel accurse due to morbidity of humour and this morbid humour had accumulate in the body parts, due to weakness and obstruction of Urooq-e-Jazba, (lymphatic Vessels) thereby giving support to rise process of the disease .The disease occurs mostly lower (extremities) feet and calf. The disease is due to excessive accumulation of fat (Razi 2004) [3].

### Clinical features

Some general clinical features and symptoms appear within three months of the infection but usually the duration of incubation period is from 8 months to 12 months. Within four days of the infective larva is reached into the lymphatic vessel there is a marked cell mediated response in the regional lymph gland followed by an anti-body. The condition is the cause of the local lymph gland enlargement. In the early filariasis, after the infection, larva migrate down the lymphatic vessels, considerable changes take place with a greater increase in the diameter of lower extremities. The filarial edema starts initially from the feet after that is spread over the leg and calf sever pain may present urticaria and dermaclosis oozena may be present (Kabiruddin, 2007). The disease is due to excessive accumulation of fat (Razi-2004) [3].

### Clinical examination and diagnosis

According to Unani system of medicine diagnosis (Tashkhees-e-marz) is very important. An inclusive evaluation of the patient is to process of the disease diagnosis. The detail history of the patient for correct diagnosis is emphasizes in Unani system of medicine/treatment. There is acquits effective treatment, which is totally based on holistic approach. It is very important to differentiate the Lymplatic Filariasis from another lower limb edema and pedal edema the overall management is based on Ilaj Bil Dawa and Ilaj Tadbeer. (Pharmaco therapy and Regimenal therapy).

### Principle of Treatment

#### Usool-e-Elaaj

#### Istifragh or Tanqiya-e-Balgham and Sawda (Evacuation of Phlegm and Sawda).

#### Tadleel-e-Mizaj (Restoration of normal temperament).

The total cure of the disease is very difficult, but however to make liquefy and exquisite the morbid humour and after that evacuation of morbid humour from the body should be done. After the liquefaction morbid humour the medicine like Sharbate Irsa and Asarae Badiyan should be taken Baboona gule Surkh 2 part use as zamad (paste) at lower limb (Annoyemous 1996). Mush'il e Sauda (purgation) is beneficial to evacuate the waste matter and morbid humour from the body besides this is beneficial. For Tanqie Sauda Tabeeh-e- Aftimoon (decoction) Maul Jawahar, in chronic

cases repeat the tanqia and give hot purgative drugs should not given and after that the treatment should be start. Treatment like Regimental therapy Vaniccection Tahleel Auram ect. In the condition of Balghami dominance Filariasis the regime of Qai (Vomiting) should be performed one or twice in a week .Early in the morning two dirham (7gm) Itrifal Sageer or half dirham (1.75gm) janjabeel. After the tanqia for restoration of strength and provide the energy of the particular or effected organ following prescription are advised.

- Sibr (Aloe barbadensis mill)
- Mur makki (Commiphora myrrha (nees) nngl )
- Aqaqia (Acacia arabica willd)
- Jauz (Walnut) (Juglans regia L.)
- Mix with wine and apply as Tila (liniment) locally on the affected part.

Another prescription of Tila (liniment)

- Tukhum-e-Karnab (Brassica oleracea Linn)
- Turmus (Lupinus albus Linn)
- Ard Khakstar (Triticum)

Choob Angoor (Vitis vinifera Linn) and equal part of each drugs, apply locally on affected part. When the attack of fever occur antipyretic medicine should be given. For the removal of pain Bhang (cannabis Sativa Linn) in the form of decoction, apply as Nutool (Irrigation/ pouring of medicated water) and the waste material of the decoction should be grind and rap on the affected part (Akbar, 1903) <sup>[5]</sup>.

In the condition of weakness Iron compound should be given, some iron is listed following

- Kushta-e- Faulad
- Kushta Khabs al Hadeed
- Abe Anar (Pomegranate juice)
- Dawaulmisk Motadil
- Advice for bed rest to the patient and crepe bandage should be applied.

The decoction of Aftimoon (Cuscuta epithymum Linn) and Mauljaban (butter milk) may repeat again, but hard and strong purgative should be avoided (Kabiruddin, 2003) <sup>[9]</sup>.

### Pharmacotherapy

The Treatment Through medicine is the main emphasis of Unani medicine.

### Istifragh

Unani physicians have suggested that its treatment should start with the evacuation of Phelegm and black bile (Balgham and Sawda) from the human body for musleh and tadeel-e-mijaz (Correction of mizaj). The commonest mode or method of Istifragh for the excretion of Balgham and Sawda is Munzij wa Mus'hil therapy (Concoctive and Purgative) which is usually followed in three steps.

1. Use of Munjizate Balgham and Sawda.(Phlegmatic and Melacholic Concoctives)
2. Use of Mus'hilat-e -Balgham and Sauda.(Melacholic and Phlegmatic Purgative)
3. Tabreed-e-Badan (Refrigeration of body)

In the condition of dominance of Balgham for dissolution (munjiz) following prescription should be prescribe.

1. Ustkhudoos (Lavendula stoechas Linn)
2. Parshioshan (Adiantum lunulatum Burm)

3. Bekhe Kasni (Pistacia intigerima stew)
4. Bekhe Karafas (Apium graveolens Linn)
5. Bekhe Badian (Pimpinella anisum Linn)
6. Bekhe Izkhir (Andropogon schaeenar Linn)
7. Badiyan (Pimpinella anisum Linn)
8. Asloos Muqshir (Glycyrrhiza glabra Linn)
9. Injeer Zard (Ficus carica Linn) 5pc
10. Maweez Munnaqqa (Vitis vinifera Linn) 9pc
11. All ingredients soak in water at night and boil in the morning, stir and Gulqand Asli (honey based gulqand) 50 gm, mix with decoction.

Prescription of Mus'hil (purgation) for evacuation of waste matter following recipe should be used.

1. Sumbul Tibb (Nardostachys jatamansi DC.) 10gm
2. Dal Chini (Cinnamomum zeylanicum blume) 10gm
3. Habbe-Bilsan (Opobalsamum (Linn) engl) 10gm
4. Ood-e-Bilsan (Commiphora opobal) 10gm
5. Salikha (Cinnamomum cassia blume) 10gm
6. Mastagi Roomi (Pistacia lentiscus Linn) 10gm
7. Zafran (Crocus sativus Linn) 10gm
8. Asaroon (Asarum europaeum Linn) 10gm
9. Sibr Zard (Aloe barbadensis Mill) 10gm
10. Turbud Sufaid (Operculina turpethum (L) Turpeth silvamanaso) 40gm
11. Hubbul Neel (Indigofera tinctoria Linn) 40gm
12. Gareeqoon (Agaricus alba linn) 40gm
13. Anisoon (Pimpinella anisun linn) 40gm
14. Accordingly grind and stir.

### Regimental therapy

Repeatedly advise for Tanqia (cleasing of viscous humour), Evacuation and Detoxification of body, through different method .After Tanqia, do the act of Vaniccection of the vein near the knee joints, or apply the leech around the calf muscles, give tanqia through emetic drugs (below mentioned) and venesection .

- Elwa (Aloe barbadensis mill)
- Bol (Mur) (Commiphora myrrh)
- Loban (Styrax benzoin dryand)

Tukhm-e-soya mix with vinegar and apply as Zimad (paste), it is commonly used by Unani Phycian in India. First give porridge of Methi (fennel seeds) after that suggest emetic drugs, give honey and make perform the act of vomiting.

- Babuna (Anthemis nobilis linn)
- Red Chilli( Capsicum annum)
- Ajmood (Apium graveolens)
- Tukhme Soya (Anethum sowa kurz)
- Chobchine (Smilax china linn)
- Baobarang (Embelia ribes burm f )

Mix with honey applies lukewarm locally as zimad (paste) venesection of Rag-e-Basaleeque is recommended.

**Dietotherapy:** Diet should be in small quantity, light and digestive

### Precipitating factors

1. The disease of varicose
2. Gout
3. Tuberculosis, cancer, syphilis
4. Unsuccessful surgery Lymphatic Vessels
5. Residing in wet moisture place.

## 6. Impurity and repletion of water

### Prognoses

According to Abu Ali Sina Lymphatic Filariasis is spiteful disease, it is very rare phenomenon to complete cure from the disease. Treatment in the initial stage of the disease shows better response of the treatment in the advance stage particularly when darmocolosis occurred, it is very difficult to cure (Kabbirudin, 2003, Jeelani 1996) <sup>[9, 6]</sup>.

### Methodology

Search of Unani classical literature Google, Pub Med Google Scholar, there are very little short and least interpretation related to the Lymphatic Filariasis according to Unani concept available on Google Drive. Therefore the authors consult and depend on the Unani classical literature.

### Conclusion

On the ground of description available in Unani classical literature it can be concluded that when the disease is acute stage, it is curable but in advance stage the disease is not fully curable, treatment with Unani drugs is minimize the complication of the disease.

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