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Unani medicine for inflammation: A review

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Abstract
Inflammation and pain are common symptoms in diseases, managed conventionally with NSAIDs that block prostaglandin synthesis and affect inflammation pathways. In Unani medicine, 'waram' (swelling) is used broadly for various swellings, akin to acute inflammation. Treatment varies based on swelling type and location, using herbal drugs known for anti-inflammatory and analgesic properties like Asl-Us-Soos, Chiraita, Gilo, and others. Unani medicine offers holistic approaches to inflammation management, complementing conventional therapies.

Keywords: Inflammation, pain, NSAIDs, prostaglandin synthesis, Unani medicine, waram, swelling, herbal drugs, anti-inflammatory, analgesic

Introduction

Inflammation and pain are key responses in many diseases, with inflammation being a nonspecific reaction that typically benefits the host. It serves to isolate and eliminate harmful stimuli, including pathogens, damaged cells, or irritants, and initiates tissue repair processes. Pain, on the other hand, is the physical discomfort resulting from illness or injury.

Conventional management of inflammation and pain involves various classes of drugs, among which Non-steroidal anti-inflammatory drugs (NSAIDs) are the most commonly used. NSAIDs exert their effects by blocking the synthesis of prostaglandins, inhibiting lipoxygenase and superoxide radical production, affecting neutrophil aggregation and adhesion, modulating cytokine production, and influencing cartilage metabolism.

The anti-inflammatory, analgesic, and antipyretic (fever-reducing) actions of NSAIDs primarily stem from their ability to inhibit cyclooxygenase (COX) enzymes, specifically COX-2 and COX-1. COX enzymes are responsible for the conversion of arachidonic acid into prostaglandins, which are lipid mediators involved in inflammation, pain sensation, and fever response.

- **COX-2 Inhibition:** NSAIDs selectively inhibit COX-2, which is induced during inflammation and mediates the production of prostaglandins involved in pain and inflammation.
- **COX-1 Inhibition:** Some NSAIDs also inhibit COX-1, which is constitutively expressed and involved in maintaining normal physiological functions, such as gastric mucosal protection and renal blood flow.

However, simultaneous inhibition of COX-1 can lead to unwanted side effects, such as gastric ulcers, gastrointestinal bleeding, and impairment of renal function. This is because COX-1-derived prostaglandins are involved in maintaining gastric mucosal integrity and regulating renal blood flow.

In summary, NSAIDs exert their therapeutic effects by inhibiting COX enzymes, primarily COX-2, thereby reducing inflammation, pain, and fever. However, their clinical use requires careful consideration of the balance between therapeutic benefits and potential adverse effects, particularly those associated with COX-1 inhibition [1-4].

In Unani medicine, the concept of inflammation, as understood in modern medicine, is not directly articulated. Instead, the term "waram" is used to describe abnormal swelling or engorgement, which can encompass various conditions where there is localized accumulation of blood, pus, water, or flatus. This term broadly covers what modern medicine might classify as inflammatory responses, particularly when acute (har).

The management of "waram" in Unani medicine is tailored based on several factors:

1. **Nature of the Swelling:** Depending on whether the swelling is perceived as hot (har), cold (sardi), or mixed (mizaj), treatment approaches vary. Hot swellings are often treated with cooling measures, while cold swellings may require warming therapies.
2. **Type of Matter:** The presence of blood, pus, water, or flatus in the swelling dictates specific therapeutic strategies. For instance, treatments to resolve pus-filled swellings (e.g., abscesses) would differ from those used for water accumulation (e.g., edema).
3. **Organ Involvement:** The location of the swelling in specific organs or tissues influences treatment decisions. Different organs are believed to have varying susceptibilities and responses to treatments in Unani medicine.

In Unani pharmacology, numerous single and compound drugs are utilized for their anti-inflammatory (Mohlil-e-waram) and analgesic (musakkin) properties. These drugs are selected based on their perceived effects on reducing swelling and alleviating pain. Some commonly used substances include natural herbs, minerals, and animal products, each with specific indications and modes of action according to Unani principles.

Overall, while Unani medicine does not explicitly define inflammation in the modern sense, the concept of "waram" encompasses a range of pathological swellings that may align with inflammatory conditions. Treatment strategies in Unani medicine are personalized and take into account the nature of the swelling, the presence of specific materials, and the affected organ system, utilizing a diverse array of medicinal substances to address these conditions [5].

Unani medicines, which are natural herbal drugs, have been traditionally used for treating inflammation. This ancient treatment method has been in practice for centuries, offering holistic approaches to manage and alleviate inflammatory conditions.

Unani Single Drugs

Few single drugs commonly utilized in Unani medicine for their anti-inflammatory properties [6].

1. Asl-Us-Soos
2. Chiraita
3. Fufal
4. Gilo
5. Kalonji

1. ASL-US-SOOS [7]

Introduction

Asl-ul-Soos is derived from the dried, unpeeled stolon and root of *Glycyrrhiza glabra* Linn., a tall perennial herbaceous plant belonging to the Leguminosae family. It typically reaches heights of up to 2 meters and is cultivated in Europe, Persia (Iran), Afghanistan, and to a limited extent in certain regions of India.

Constituents

Glycyrrhizin, Glycyrrhizic acid, glycyrrhetinic acid, asparagine, sugar, resin and starch

Action

Munzij, Muqawwi-e-Asab, Mohallil-e-Waram, Munaffis-e-Balgham, Kasir-e-Riyah, Mudirr-e-Baul, Muddirr-e-Hazi.

Therapeutic Use

Sual, Khushunat-e-Halaq, Bohat-us-Saut Haad, Zeequn Nafas, Hirqat-ul-Baul [6, 12, 13].

Chiraita [8]

Introduction

Chiraita consists of the whole plant of Swertia chirata Buch. Ham., a small, erect, annual herb reaching heights of 0.6-1.25 meters, belonging to the Gentianaceae family. It is predominantly found in the temperate Himalayas at altitudes ranging between 1200-1300 meters, from Kashmir to Bhutan and the Khasia Hills in Meghalaya. The plant is harvested during flowering season (July-October) and dried for medicinal use.

Constituents

Xanthones, Xanthone glycoside and mangiferine (Flavonoid).

Action

Musaffi-e-Dam, Mohallil-e-Waram, Mudirr-e- Baul, Mulattif, Qabiz, Muqawwi-e-Meda, Kasir-e-Riyah, Mudirr-e-Haiz, Muqawwi-e-Kabid, Mushahhi.

Therapeutic Use

Su-e-Hazm, Nafkh-e-Shikam, Fasad-ud-Dam, Istisqa-e-Ziqqi, Busoor, Taqteerul Baul, Zof-e- Ishteha [6, 14, 15].

Fufal / Supari [9]

Introduction
Fufal consists of the dried ripe seeds of *Areca catechu* Linn., a graceful, slender-stemmed perennial palm with a trunk reaching heights of about 25 meters. It belongs to the Palmae family and is cultivated in the coastal regions of Southern India, Bengal, and Assam, up to an altitude of 1000 meters.

Constituents
Alkaloid (arecoline) tannins and fats.

Action
Qabiz, Mohallil-e-Waram, Rade, Habis.

Therapeutic Use
Ishal, Sailan-ur-Rahem, Jiryan [6, 15].

Gilo [10]

Introduction
Gilo consists of dried, matured pieces of the stem of *Tinospora cordifolia* (Willd) Miers., a perennial climber belonging to the Menispermaceae family. It is found throughout tropical India, and the drug is typically collected during summer, preferably in the month of May. Fresh forms of the drug are also used in medicinal applications.

Constituents
Terepenoids and alkaloids.

Action
Daf-e-Humma, Muqawwi-e-Meda, Qabiz, Qatil-e-Deedan-e-Ama, Mohallil-e-Waram, Muddir-e-Baul, Musaffi-e-Dam.

Therapeutic Use
Humma, Ishal, Zaheer, Deedan-e-Ama [6, 12, 13].

Kalonji [11]

Introduction
Kalonji consists of the seeds of *Nigella sativa* Linn., a small herb that grows up to 45-60 cm in height, belonging to the Ranunculaceae family. It is predominantly cultivated in regions such as Punjab, Himachal Pradesh, Bihar, and Assam for its medicinal and culinary uses.

Constituents
Essential oil, fixed oil, resin, saponin and tannin.

Action
Jali, Munaffis-e-algham, Muqawwi-e-Meda, Qatil-e-Deedan-e-Ama, Mudirr-e-Haiz, Musakkin, Mohallil-e-Waram.

Therapeutic Use
Bahaq, Bars, Quba, Shaqeeqa, Zeequn Nafas, Zof-e-Meda, Nafkh-e-Shikam, Qulanj, Yarqan, Waj-ul Mafasil, Waja-ul-Qutn. Falij, Laqwa [6].

Conflict of Interest
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