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## Geriatric care: Concept and management in Unani medicine: A review

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### Abstract

Aging is a process of physical, psychological and social changes in multidimensional aspects. In 2019, the number of people aged 60 years and older was 1 billion. This number will increase to 1.4 billion by 2030 and 2.1 billion by 2050. With demographic transition underway in India, the elderly population is projected to rise to 12% of the total population by 2025. At least 65% of India's old live in rural areas and are illiterate and economically dependent. Thus, there is a need to address the medical and socio-economic problems of this vulnerable group and promote healthy ageing. Unlike many developed countries, there is no well-structured geriatric health service cell in India. This calls for an urgent action to address the needs of elderly population of India. We can begin with integrating the formal Indigenous systems of health care like Unani medicine with the existing health care structures. In Unani system of medicine there is exhaustive information available on geriatric problems and its management under heading of *Tadabeer mashaikh* in various classical Unani books. It is important to protect *Ratubat-e- ghariziyah* and *Hararat-e- ghriziyah* from excessive dissolution and its putrefaction, so premature aging can be slowed down. Unani literature records numerous single and compound formulations and regimes for general wellbeing and in disease-specific conditions relating to geriatrics. With life-style modification and moderation, adopting various regimens and principles of Unani System of Medicine, some age related diseases can be prevented while certain Geriatric changes can be slowed down to a greater extent in elderly peoples.

**Keywords:** Ratubat-e-ghariziyah geriatrics, geriatric care, Tadabeer mashaikh, aging

### Introduction

Geriatrics, or geriatric medicine <sup>[1]</sup> is a medical specialty focused on providing care for the unique health needs of the elderly. <sup>[2]</sup> The term *geriatrics* originates from the Greek γέρων *geron* meaning "old man", and ιατρός *iatros* meaning "healer". It aims to promote health by preventing, diagnosing and treating disease in older adults <sup>[3]</sup>. Elderly people are highly prone to mental morbidities due to ageing of the brain, problems associated with physical health, cerebral pathology, socio-economic factors such as breakdown of the family support systems, and decrease in economic independence.

In 2019, the number of people aged 60 years and older was 1 billion. This number will increase to 1.4 billion by 2030 and 2.1 billion by 2050. This increase is occurring at an unprecedented pace and will accelerate in coming decades, particularly in developing countries <sup>[4]</sup>. With demographic transition underway in India, the elderly population is projected to rise to 12% of the total population by 2025 <sup>[5]</sup>. At least 65% of India's old live in rural areas and are illiterate and economically dependent <sup>[6,7]</sup>. Thus, there is a need to address the medical and socio-economic problems of this vulnerable group and promote healthy ageing.

Currently, geriatric services are available in tertiary care hospitals. Most facilities are based in urban areas. In a study, it was found that about 46.3 per cent of the participants were unaware of any geriatric services near their homes. Given how a majority of the elderly stay in the rural region of India, it is important to integrate geriatric care into primary healthcare services <sup>[8]</sup>. It is also important to integrate it into the formal Indigenous systems of health care like Unani medicine with the existing health care structures. Unani medicine has got the potential for prevention of diseases by promotion of health and management of diseases occurring in old age. In various Unani texts the comprehensive explanation of geriatric care is mentioned under the heading of *Tadabeer-e-Mashaikh*.

According to Unani system of medicine, human life is categorized into four stages viz;  
*Sinn-e- numu* (up to the age of 30 years).  
*Sinn-e- shabab* (from 30 to 40 years of age).  
*Sinn-e- kahoolat* (from the age of 40 to 60 years).  
*Sinn-e- shaikhhookhat* (applies to people above 60 years of age).

The people above 60 years of age are considered as mashaikh (aged/ older people). It is the period of decline with the appearance of weakness in vigorous [9, 10].

**Concept of ageing in Unani system of medicine**

According to the Unani medical system, each stage of life has a distinct temperament based on the *Ratoobat-e-ghariziyah* (Innate moist) and *Hararat-e-ghariziyah* (Innate heat), when both are diminished, resulting into deterioration of power and faculties and ultimately end of life. The different stages are as follows:

***Sinn-e-numu***

This is the period in which *Ratubat-e-ghariziyah* is more in quantity which is sufficient for preservation of *Hararat-e-ghariziyah* it means it is more than sufficient for various metabolic process of the body. In this period organ of the body continuous to grow.

***Sinn-e-shabab***

This is the period in which *Ratubat-e-ghariziyah* neither excessive nor deficient than the quantity required for various metabolic function of the body. In this period neither any growth nor any dissolution or degeneration in the organ take place.

***Sinn-e-kahulat***

In this period, there is less *Ratubat-e-ghariziyah* that is necessary to maintain *Hararat-e-ghariziyah*, or body metabolism. During this time, the power and faculties begin to deteriorate, but there is no marked dissolution.

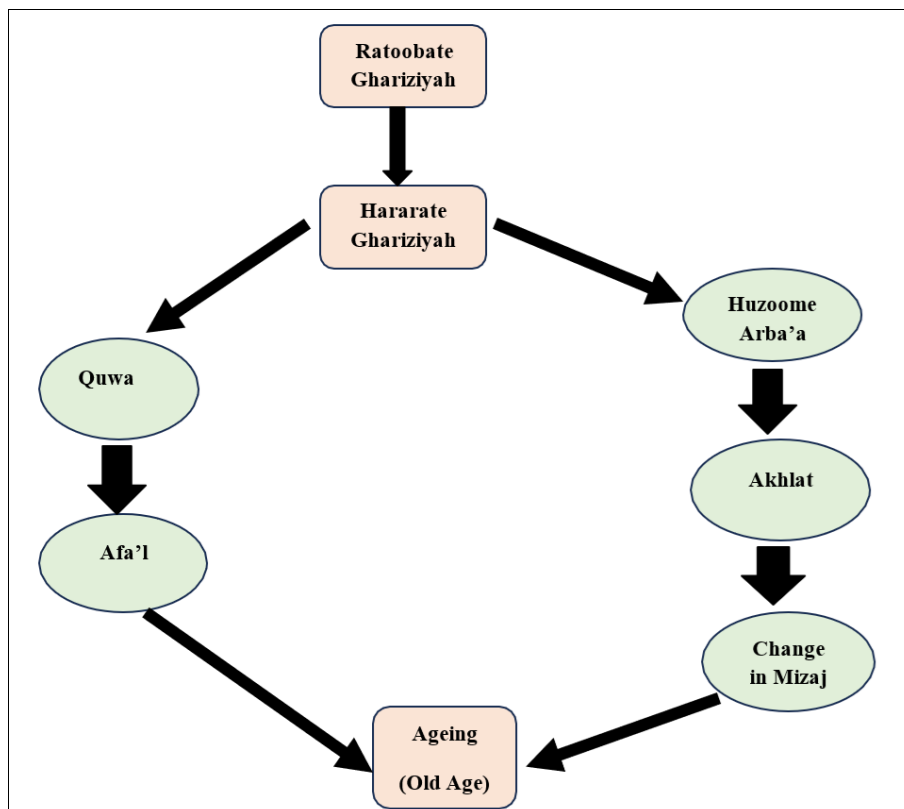
***Sinn-e-Shaikhukhat***

*Sinn-e-Shaikhukhat* (old age) is the period in which *Hararat-e-ghariziyah* (innate heat) and *Ratoobat-e-ghariziyah* (innate moisture) reduced gradually, and dominated by *Ratoobate Ghareeba Bala* (abnormal metabolic products) that weakens the *Tabiyat* (power which control the homeostasis / internal environment of the body) and slows down the bodily functions.

In this period deterioration in the body powers and faculties are apparent. This diminished quantity of *Ratoobat-e-ghariziyah* and *Hararat-e-ghariziyah* lead to altered temperament in Elderly; hence *Mizaj* becomes *Baarid-Yabis* (cold and dry). According to Unani medicine, each period of life has a unique *Mizaj* (temperament). Premature aging occurs when normal *mizaj* deviates from normal to abnormal [11, 12].

The balance of *Hararat-e-ghariziyah* is crucially maintained by *Ratoobat-e-ghariziyah*. Changes in quality and quantity of *Ratoobat-e-ghariziyah* have an immediate impact on *Hararat-e-ghariziyah*.

A significant decrease (*Tahleel*) in *Hararat-e-ghariziyah*, leading to change in *Huzome Arba'a* which result in abnormal humours or *Ratoobat* production which is unable to provide *Badal-e- ma yatahallal* (substitute). The temperament (*Mizaj*) is changed by abnormal humor or *Ratoobat*, which speeds up aging. Reduced *Hararat-e-ghariziyah*, lowers body power, functions (*Afa'al*) as well as faculties (*Quw'a*), this causes ageing to accelerate [13-15] (Fig.1).



**Fig 1:** Pathophysiology of ageing in Unani medicine

### Pathological changes in old age

Health is totally depending upon three faculties, which maintain the *Harart-e-ghariziyah* and regulates the all functions of the body i.e. *Quwwat-e-Nafsaniya*, *Quwwat-e-Tabie'yya* and *Quwwat-e-Haiwaniya*. When disturbances occur in these three faculties it leads to degenerative changes and finally end of life *Quwwat-e-Nafsaniya* is responsible for *Aaraz-e-Nafsaniya* (joy, happiness and sadness), it's Centre is brain. When it becomes weak, it creates neurological associated problems such as *Nisyan* (Dementia), Alzheimer's disease, Parkinson's disease and depression etc. *Quwwat-e-Tabie'yya* is responsible for production of pure humours and maintains balance of *Ratoobat-e-ghariziyah* and *Hararat-e-ghariziyah* it's centre is (*Kabid wa Ama*) when it becomes weak leading to abnormal production of humours resulting diminished *Ratoobat-e-ghariziyah* and *Hararat-e-ghariziyah* and many diseases like decreased/loss of appetite, indigestion, flatulence, constipation etc. *Quwwat-e-haiwaniya* is responsible for blood circulation, *Tarweeh* and *Taqiya*, when it becomes weak leading to cardiovascular and respiratory mortality and morbidity like CHD, HTN, Cardiomyopathy, COPD, asthma etc. [16, 17].

### Predisposing factors of aging

The factors (either external or internal) which increase the dissolution and cause putrefaction of *Ratubat-e-ghariziyah* accelerate the premature aging like excessive use of those substances which are responsible for the production of *balgham* and *sauda*, excessive coitus, excessive *Hammam*, excessive heat and cold, use of toxic substances, *Amraz-e-muzminah* (*Sil wa Diq, Sartan*), *Amraz-e-ghudud la qanati* (ziabitus, hyperthyroidism) *Amraz-e-nizam Asaab* (*Falij, Istirkha*, depression and anxiety), mal-nutrition, various type of injuries [17, 18].

### Preventive Measures of Aging

Live in happy and healthy environment.  
Avoid sharp and sour taste food items except for purpose of treatment. Avoid excessive coitus.  
Avoid such a work which is responsible for dissolution of *Ratubat-e-ghariziyah* like Blacksmith, Bakers.  
Moderate exercise and massage regularly.  
Use of *Zood hazm* and *Jayyad-ul-Kaimus Ghiza*.  
Use of khushbudar substances. Avoid excessive Hammam.  
Avoid *Naffakh*, *Muallid-e-balgham* and *Sauda* diet [18-20].

### Management of Aging

Unani physicians described the prevention and management of aging and age related problems into three different categories viz *Ilaj bil ghiza* (dietotherapy), *Ilaj bil tadbeer* (Regimenal therapy) and *Ilaj bil dawa* (pharmaco therapy) [18-22].

#### *Ilaj bil ghiza* (Dietotherapy)

Reputable Unani physicians have recommended certain guidelines for the *Ghiza* (diet) of elderly persons, such as that the quantity and quality of the meal should be in accordance with their digestive capabilities. A small amount of food will be given frequently. *Ghaleez ghiza* should be avoided. Diet should not be taken prior to *Hammam* (bathing), since it may cause vascular blockages. Likewise, avoid any hot, pungent, and desiccant food, such as *kawamikh*. Viscous (sticky), tenacious and flatulence yielding

diet should be avoided. e.g. *baqla & matar ki dal*, *began* etc. Food items mentioned in classical literature include well-baked bread, honey, beet root, garlic, ginger, figs, plums, peaches, half-fried eggs, bird meat soup, olive oil, and fiber-rich vegetables (spinach, cabbage, carrot), etc.

The ideal food for *Mashaikh* is beet root and *Maa-ul-shaeer* (barley water), which aids in the body's removal of abnormal humors. Among fruits, figs and Alu-Bukhara are also recommended as they have high nutritional value and also laxative due to their *Mulayyain* properties. It is advised to eat coconut (*Narjeel*) since it gives the body moisture (*Ratubat*) and heat (*Hararat*). Goat's milk and donkey's milk are regarded as the best for them since they can digest them quickly. Milk is only good for them if it can be easily digested because of the fact that it absorbs quickly and good for nourishment and *Tarteeb* (moistness).

#### *Ilaj bil tadbeer* (Regimenal Therapy)

The majority of regimenal therapies are non-medical procedures used to improve and maintain health. Since the beginning of time, unani physicians have utilized a variety of regimens, the most popular and extensively used of which are given here. These regimens are used for therapeutic, preventative, and restorative purposes

#### *Riyazat* (Exercise)

It is an important regimen to remove *Fasid mawad* (waste product) from the body. Elderly people should routinely engage in *Moatadil riyazat* (moderate exercise), such as gradual walking or riding a bicycle, depending on their physical state and tolerance. It has a warming impact on the body and boosts immunity and prevent a number of ailments like hypertension, diabetes, and osteoarthritis etc.

#### *Dalak* (Massage)

*Dalak* is used to remove the toxins from the body and to strengthen body and muscles. *Moatadil dalak* (moderate massage), which is performed gently and lightly with the hands without applying a lot of pressure, should be performed mainly on the parts of the body that have become weak. It can be performed with or without oils, using a piece of coarse linen. Oil should be *Haar Mizaj* (hot temperament), such as *Roghane Zaitoon*, *Roghane qust*, and *Roghane badam*, which supply Taskeen to the body and assist to keep it moist it may be done twice a day.

#### *Hammam* (Therapeutic Bath)

*Hammam* is a sort of therapeutic bath with the goals of increasing *Hararat-e-ghariziya* (innate heat), removing waste materials via the skin, and improving *Istehala* (metabolism) of the body. It should be done at least once a week with fresh and lukewarm water or depending on the body strength of elderly people.

#### *Ilaj bil dawa* (Drug Therapy)

In the Unani system of medicine, a variety of single and compound medications have been used for the prevention and management of ageing and age-related disorders [23-26]. These medications are largely from *Haar mizaj*, and the majority of them have been shown to be antioxidants, immunological modulators, and free radical scavengers. Single drugs like *Halela* (*terminalia chebula*), *amla* (*emblica officinalis*) *balela* (*terminalia beliraca*) *Asgandh* (*whithania somnifera*), *satavar* (*asparagus racemosus*), *tulsi*

(*ocimum santum*), *gilo (tinospira cardifolia)*, *zanjabeel (zingiber officinalis)*, *badam (purunas amygdalus)*, *brahmi (centella asiatica)*, and *zafran (crocus sativus)*. Compound drugs like *ItriphalaSagheer*, *ItriphalaUstakhuddus*, *JawarishJalinus*, *Khamira Gaozaban Ambari Jawaharwala*, *Khamira Gaozaban Sada*, *Majoon Barhami*, *Majoon Bladur*, *Majoon Flasafa*, *Majoon Waj*, *Tiryaqe Farooque*, *Tiryaqe Wabaee*

### Conclusion

In unani system of medicine there is exhaustive information available on geriatric problems and its management under heading of *Tadabeer mashaikh* in various classical unani books. From above discussion we can conclude that it is important to protect *Ratubat-e-ghariziyah* and *Hararat-e-ghriziyah* from excessive dissolution and its putrefaction, so premature aging can be slowed down. Unani literature records numerous single and compound formulations and regimes for general wellbeing and in disease-specific conditions relating to geriatrics. With life-style modification and moderation, adopting various regimens and principles of Unani System of Medicine, some age related diseases can be prevented while certain Geriatric changes can be slowed down to a greater extent in elderly peoples.

### Conflict of interest

There is no conflict of interest.

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