Concept of Systemic Cleansing Through Concoctives and Purgatives (munzij mushil therapy) as a Regimen in Chronic Diseases

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ABSTRACT

According to Unani system of medicine, health is attributed to the quantitative and qualitative equilibrium of Akhlat (humours) i.e Damvi (sanguinous), Safra (bilious), Balgham (Phelgamatic) and Saudah (melancholic). Besides this, there is Asbab e Sittah Zarooriya (six essential factors) which are the main determinants of health .These include atmosphereric air (hawa), food and drinks (makool mashroobat), bodily movements and repose (Harkat-wa-Sakoon Badni), mental activity and repose (Harkatwa-Sakoon Nafsani), sleep and wakefulness (Naum Wa Yaqza) and retention and excretion (Ahtibas wa Istifiragh). These factors are highly modifiable and any imbalance in any of these factors is likely to cause diseases. Proper evacuation of morbid materials is the prerequisite of humoral equilibrium or in other words maintenance and restoration of health. The elimination of morbid materials can effectively be achieved by the process of Nuzi (concoction) and Is'haal (purgation) which is one of the basic principles of the treatment of chronic diseases in Unani system of medicine. Nuzj and Is'haal has been in use as a regimen as the main stay of treatment by almost every unani scholar. Great and eminent scholars such as Jalinos, Raban Tabri, Razi have given the importance of Munzij and Mu'shil therapy in their literature and they themselves treated patients successfully with this mode of treatment for thousands of years. Unfortunately, this time tested regimen has been sidelined by contemporary unani practitioners and is not being given its due space in therapeutics. Although attempts have been made to validate the effects of this regimen in some autoimmune disorders but more comprehensive efforts are needed to yield structured data in support of it.

Keywords: Munzij mushil, regimen, humoral inequillibrium.

Introduction

The concept of Nuzj and Is'haal in the treatment of diseases though seems to be archaic but has tremendous efficacy in the management of chronic diseases. It has been advocated in many diseases including arthritis, fevers (*Huma*) Headache (*Suda*) etc. *Jalinos, Raban Tabri, Razi* have given significant importance of *Munzij* and *Mu'shil* therapy in their literature and they themselves treated patients successfully with this mode of treatment¹.

This therapy works on the principal of systemic cleansing. Sometime it is recommended alone and sometimes in combination with some regimen including cupping (HIJAMAT) leeching (TA'LEEQ), Diuresis (IDRAR), Venesection (FASD) etc. Kabirruddin while referring Gilani states that when the morbid materials are extracted from the intestines or nearby structures then it is called Taleen (laxation) and when the morbid material are extracted from vessels and other deep tissue then it is known as Is'hal (purgation).⁷

The entire regimen consists of two components

(a) Nuzj (Concoction)

Nuzi is defined as a process by which disease causing tenacious morbidities (Maddah Marz) are transformed to a state that can be feasibly eliminated out of the body with the help of Mus'hilat (purgatives).In this way, viscous humors are diluted enough and vice versa for their easy expulsion out of the body. *Nujz* is usually carried out in chronic diseases but it is optional in acute diseases depending upon the severity and acuteness of the condition. But if the delay, due to *Nujz* is going to harm the vital organs, then is 'hal (purgation) can directly be carried out without Nuzj 3. In normal circumstances Nuzj is the action of Hararat Ghareezia (innate heat of body). Nuzj is a routine phenomenon in the presence of temperamental normalcy but if temperament is derailed then proper nuzj cannot take place and then it is required to facilitate the immunity from outside in order to make nuzj happen. It is for these reason appropriate medicines are required for *nuzj*. The innate heat produced by such the drugs should match with innate heat of body. Drug used should be of moderate temperament and should be neither too cold nor too wet. Drugs having temperament towards heat are preferably used. Sometimes Musadid drugs (obstructant drugs) are also used as Munzij because such drugs tends to close the pores of skin and there by bringing core organs at optimal temperature in order to facilitate the process of nuzj.4

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RECOMMONDATIONS OF (CONCOCTION)

- 1. Essential in case of all chronic disease as well as the disease having duration of more than 40 days.
- 2. Also recommended in acute diseases where ever the duration is more than is 7 days.
- 3. For diseases having duration less than 7 days, nuzj is not required and the actual treatment may be followed without waiting for nizj.
- 4. In case of phlegmatic and bilious diseases, it is mandatory that purgation should be preceded by *Nuzj*. However it is optional in bilious diseases and not required in sanguineous diseases where blood alteratives are the main stay of treatment.
- 5. If blood is made impure due to the admixture of other humors then *Nuzj* should be done in accordance to the other humoral morbidities.

DURATION OF NUZJ (CONCOCTION)

Duration of *Nuzj* varies depending upon the humoral morbidities involved.

Safra-e-khalis 3 days
Safra-e-Ghair khalis 5 days
Balgham Raqeeq 5 days
Balgham Ghaleez 12 days
Sauda-e-khalis 15-40 days

In case of Sanguineous diseases *Moadillat-e-Dam* (blood alteratives) and *Mussffiyat -e-dam* (blood purifiers) are given instead of *Munzij* rugs³.

ROUTES OF NUZJ

The route to be opted depends on the type of organ afflicted and morbid material involved (*Maddah Marz*) e.g in case of *Hummiyat* (fevers) *Maddah Marz* is in the blood, then *Nuzj* will preferably be done through kidneys in urine. In case of pleurisy, *Nuzj* can be done through lungs in the form of expectoration. In case of cutaneous abscess, through skin pores as these serve as best channels of elimination. Razi Z.Kitabul Murshid explains in case of nasal secretions and in conjunctivitis with the secretions of pucntum².

SIGNS OF NUZJ

For confirmation, the examination of secretions corresponding to route of nuzj involved such as sputum, urine etc is carried out along with the examination of pulse to see sign of completion of *Nuzj*.

Urine

As the sign of completion of *Nuzj* in urine, there are changes in viscosity, color and precipitate². These changes however are not only noted as a result of completion of *Nuzj* but can also be seen as a result of infection. Therefore the differential diagnosis becomes mandatory and can be done on the basis of character of precipitate². When *safra* (bile) is excreated in the urine, it turns orange or pale yellow, where as becomes blackish or turbid if *Sauda* (melancholic morbidities) is excreated. The specific gravity of urine increases when *Nuzj* is complete in case of *balgham*(phlegm)and black bile³.

Pulse

In the beginning, if it is *Sulb* (hard), becomes *Layyen* (soft) towards the end of process, and if in the beginning it is *Layyen*, it becomes *Sulb* after the completion of $Nuzj^{2,3}$.

Sputum

There are considerable changes in the sputum in the diseases of lungs and thorax after giving concoctions. A change in expectoration and sputum is the indication of Nuzj but can also indicative of infection. If color of sputum is yellow or blackish then it indicates infection. If the consistency of sputum is thin it indicates early Nuzj and when consistency becomes changed towards thickness (viscid) and is easily expectorated out then it signifies late Nuzj².

As soon as the signs of completion of nuzj become visible, appropriate mushilat (purgatives) are added to concoctives 1,2,3,6 . There is several types of purgatives in unani classics as per their mode of actions.

Type of Mushilat (Purgatives) According to severity of actions

Mushilat –e-Khafeef (Mild Purgatives)

These drugs simply increase the peristaltic movements of the intestine, cause spasmodic pain in abdomen and produce semi loose stool e.g. Turbuds (*Ipomoea turpethum*), Sana Makki (*Cassia augustfolia*)^{3,7}

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2. Mushilat-e-shadeed; (strong Purgatives)

These are the drugs which increase the peristaltic movements of the drugs and cause watery stools without causing the spasmodic pain.

Purgatives are also classified according to their affinity to particular humoral morbitiy and hence named as:

Bilious purgatives

Strong purgatives; Haleelah zard (*Terminila chebula*), Sibr (*Aloe barbedensis*), Sakmoonia (*Convulvulus scammony*).

Mild purgatives; ijjas (Prunus domestica), Banafsha (Violo odorata).

Melancholic purgatives

Severe purgatives Harbak aswad (Veratrum album) Gile Armani (*Bole armeniae rubra*), Gareekoon (*Agaricus albus*), Aftimoon (*Cuscuta reflexa*), Haleelah siyah (*Terminila chebula*) and Bisfayij (*Polypodium vulgare*) etc.

Phlegmatic purgatives

Strongest purgatives are Shame –hanzal (*Citrullus colocynthis*). Fasarul hamar, Kuntariyoon dakeek, Turbud (*Ipomoea turpethum*), Bazr-ulinzirah, Mazj kurtum etc.

Indication of Is'hal (Purgation)

- 1. These are recommended to eliminate and evacuate out the morbid materials responsible for the disease.
- 2. To bring the temperature to normal in case of few pyrexia.
- 3. In rare conditions it is also recommended as a management of hypertension.
- 4. To evacuate the humoral morbidities responsible for certain disease^{3,7}.

Contra indications

- 1. Wet and dry climate.
- 2. Inflammatory condition of the intestine.
- 3. Pregnancy especially first and third trimester.
- 4. Menstruation.
- 5. Elderly, weak people and children.
- 6. Cases of hypertension.

Preferable time for Is'hal (Purgation)

Suitable season is very important for carrying out purgation.

In summer and Rabi season, purgation should be done in the Morning. In winter season and autumn it should be given two hours after sunset.

Purgation should not be done preferably in *Rabi* and *Khareef seasons*.

Special precautions during Is'hal (Purgative)

- 1. Never given empty stomach, in the morning.
- 2. In patients of dry temperament, the juice of pomegranate or barley water should be given before the purgative.
- 3. If the drugs given as purgatives are of bad taste, then the patients should be advised to chew Aqirqarha or Dalchini (*Cinnamomum zeyanicum*).
- 4. If there are any chances of vomiting due to bad smell or bad taste, then the patient can be given *Sandal*, *Arq Gulab* etc. to neutralize the effects of bad smell or sense of vomiting.
- 5. The person should not move immediately after taking the drugs in order to avoid vomiting, but after sometime the person can move.
- 6. In case of strong Mus'hilat (Purgatives) sleep after taking purgatives can be helpful.
- 7. Bathing or taking meals should be avoided after purgation because it can nullify the effect of purgatives.
- 8. Mild body massage may also be advised.

Support given in Is'hal (Purgation)

If the effects of *Mushilat* (Purgatives) are delayed than *Maul Asl* should be given so that the toxic materials get diluted and are evacuated out in the form of loose motions. Sharbat Wared Murakkab 250ml and Sharbat Denar 250ml may be gives to the patient for increasing the effects of purgatives.

Management of Complications of Is'hal (Purgation)

- 1. If patient experiences spasmodic pain after giving purgative drugs then hot water should be given sip by sip.
- 2. Walk can also be advised after few minutes of taking of purgatives if the patient is experiencing some restlessness.

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- 3. In case of thirst, hot water or *Arq-e-Gulab* and *Arq-e-Badiyaan* are to be given.
- 4. It is advised that the patient should sleep for some time after taking purgative drugs.

Tabreed; (cold regimen)

It is one of the basic principles of unani system of medicine that tabreed (cold regimen) is advocated after inducing purgation as an interrupted intervention. The reason being that all the purgatives generally possess hot temperament like saqmonia, therefore after purgation the body gets heated up and drained out owing to dehydration. This loss of fluid further adds up to the increased core tempretature and excessive dryness. To compensate these undesired effects tabreed (cold regimen)is compulsorily be advised to avoid any unwanted adverse effect of purgatives and also to bring normalcy in temperament. Physicians in ancient times used to advise Loob-e-Aspaghol (Plantago ovate) in the evening for people of hot temperament. Tukhm Raihaan (Ocimum basilicum) and Tukhm-e-tera tezak for moderate temperament and cold temperament are given respectively^{3,4}. Commonly used formulations for Tabreed are as follows:

Khameera Goozabaan with in Warq Nuqra and Loob-e-Bihdana 3gm; Shera Unnab 10 pieces (to be made in Arq-e-Gaozabaan) with Sharbat Banafsha 20ml.

Since the cause of disease Unani system is considered the derangement of the humors, so the evacuations of such morbid materials are necessary for which *Nuzj* and *Ishaal* is must. According to predominant humours following combination of drugs for Munz, Mu'shil and Tabreed can also be given.⁸

Mushillat-e-safra

Haleelah (*Terminila chebula*), Aloo-bukharah (*Prunus domestica*), Shahitrah (*Fumeria officinalis*), Sharbat Fuwakah, Sharbat Banafsha, Joshandah Khayar Shanbari, Sakhmoonia (*Convulvulus scammony*).

Haleelah zard (*Terminila chebula*), Unaab (*Zizyphus sativa*), Tamarhindi (*Tamarind indicus*), shahitrah (*Fumeria officinalis*), Sanna (*Casssia augustifolia*), Banafsha (*Violo odorate*), Inab-u-salab (*Solanum nigrum*), Khatmi (*Althoea officinalis*), Tukhm kasini (*Cinchorium intybus*) in equal quantities are kept overnight in water and then given with Turanjabeen.

Munzijat-e-balgam

Depending upon the derailment of temperament and quantity of morbid material the munzij can be given for *talteef* (attenuation), *tahleel* (resolution), *taqtieh* (rectifying).

Aneesoon (Pimpinella anisum), Beekh badiyan, Beekh Kibr (root of Capparis spinosa), Ayursa (Iris ensata), Azkhar (Andropogon schaenar), Zoofa (Hyssopus officianalis), Pudina (Mentha piperita), Sudaab (Ruta graveolans), Baranjasif (Artemisia vulgaris), Marzanjosh (), Bargjhar (Prunus laurocerasus), Baboona (Maticaria chamomilla), Aklielulmulq (Trigonella ancata) and Shibt (Anethum sowa)

If more quantity of morbid humour or more temperament derailed than add Aqir Karha (*Anacylus pyrethum*), Farfuraan (*Rheum officinalis*)

Mu'shilla balgam

Initially mild Mu'shil should be tried in Galeez (viscid) and layasdhar (malacious) humors than gradually strong one should be given e.g. Initially Ayarij Feekirah (*Aloe barbedensis*), Turbud (*Ipomoea turpethum*), Aftimoon (*Cuscuta reflexa*), Gareekoon (*Polyporus officinalis*) etc. later Habeshibyaar, Habe-e-Ayarij can be given.

Munzijat-e-Saudah

For munzij saudah it is necessary to give Taleeyn and Tabreed medicine for that give Unaab (*Zizyphus vulgaris*), Neolofar(*Nymphae lotus*), Injeer (*Ficus carica*), Khameerah Banafsa after that use second and third degree anti-inflammatory drugs e.g Barj Gowzabaan (*leaves of Barago officinalis*), Bisfayij (*Polypodium vulgare*), Barj Badranboya(*leaves of Mellisa officinalis*), Sapistan (*Cordial latifolia*), Turanjabeen(*Fraxinus ornus*). It is twice repeated because it is difficult to Nuzj melancholic morbid humors. Following combination of drugs in the form of decoction can be given for Munzj; Bisfayij (7 grms), Isthakhadoos (*Lavendula stoechas*) (7 grms), Badranboyah (7 grms), Iftimoon(7grms), Maviez Munakah (*Vitis vinefera*) (20 in number), Aloo Bukharah (*Prunus domestica*) (10 in number) boil in water and add Turajabeen (*Fraxinus ornus*) 35grms for ten days.

Mushilat-e-sauda

Majz khayair shambar (*Cassia fistula*) (60grms), Sheer Khast (*Fraximus ornus*) (40 grms), Sanna maki (*Cassia augustifolia*) (9grms), Haleelah siyah (*Terminilla chebula*) (9grms), Roghan badam (oil of Prunus amygldlus) (20 ml) mixed in Sharbat Gulaab.

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Conclusion

In unani system of medine disease are attributed to qualitative or quantitative derangement of humors leading to imbalance in homeostasis. Restoration of health will therefore require bringing back the humoral equilibrium. It is also a unanimously accepted fact that humoral equilibrium is directly proportional to the evacuation of morbidities from the body accumulated as a result of numerous metabolic activities. This evacuation of morbidities is a routine and normal process of the body but in certain circumstances this evacuation may not take place at its own. Unani system of medicine has a well-established concept of concoction and purgation for this purpose. There are ample drugs that have been in use for centuries for the elimination of respective morbidities in diseases and for the restoration of health. Unfortunately such drugs fell out of favour due do paucity of data in support. Clinical trials however been done but on limited sample size. More comprehensive and standardized protocols are to be tailored to work upon in order to yield statistically sufficient and structured data.

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