



MANAGEMENT OF DYSMENORRHEA IN UNANI SYSTEM OF MEDICINE-A REVIEW

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ABSTRACT

Dysmenorrhea is pain related with menstruation in Unani medicine, and ancient texts are abundant with traditional knowledge for managing menstrual pain. It is the most frequent gynecologic condition among female teenagers, affecting more than half of women between the ages of 18 and 25 years. It is characterized by painful cramps in the lower abdomen that are accompanied by one or more symptoms such as perspiration, lower backache, exhaustion, diarrhea, headache, nausea, vomiting, dizziness, and syncope in severe instances. Because conventional medicines often do not completely relieve pain and have their own side effects on the human body, it is necessary to understand the traditionally documented therapeutic options that have no adverse effects on the human body. The many causes and treatments for dysmenorrhea have been discussed in the unani literature under the category of waje rehmi / dard rehmi / usre tams. According to Unani manuscripts, the main management strategy is to induce analgesia and address the underlying cause of usri-tamth, which includes aberrant temperament, monthly irregularities/uterine disorders, as well as psychological and environmental variables. Unani drugs having emmenagogue, antispasmodic, anti-inflammatory, and analgesic are helpful in the treatment of usri-tamth. Herbs including *Apium graveolens*, *Cuminum cyminum*, *Foeniculum vulgare*, *Matricaria chamomilla*, and *Nigella sativa* have the aforementioned qualities, and their usefulness in usri-tamth has been scientifically verified. Validation and preservation of traditional knowledge are thus necessary for future study and important for usage in the modern period. The focus of the review study is on the treatment of dysmenorrhea in the unani medical system. It also goes over some of the herbal medicines and unani compound formulations that are used to treat dysmenorrhea.

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INTRODUCTION

Pain associated with menstruation is called dysmenorrhea. More than half of women who menstruate have some pain for 1 to 2 days each month. Usually, the pain is mild. But for some women, the pain is so severe that it keeps them from

doing their normal activities for several days a month. Dysmenorrhea is the medical term for painful menstrual periods which are caused by uterine contractions. In the unani system of medicine it is called waje rehmi / dard rehmi / usre tams uterine pain. It is a frequent gynecological condition in

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women of reproductive age; it usually starts with the first ovulation cycle and lasts for two years following menarche, with the majority of severe episodes occurring before the age of 25.[1]. Dysmenorrhoea is a Greek word, in which Days means "difficult," "painful," or "abnormal"; meno is "month"; and rhea means "flow," meaning difficult monthly flow[2]. Sharp, intermittent pain spasms plague the affected ladies, which are generally focused in the suprapubic region but can also extend to the back and down the thighs. [3, 4]. Sweating, lower backache, weariness, diarrhea, headache, nausea, vomiting, dizziness, and in extreme instances syncope are all common symptoms that accompany the unpleasant cramping feeling in the lower abdomen [5, 6]. This scenario has a tremendous influence not just on individual health but also on global economics. [10].

Therapy in the unani system of medicine is founded on the belief that a patient's sickness has arisen as a result of a disturbance in her or his temperament, which has strayed from its equilibrium state; hence, the goal of treatment is to correct the temperament disturbance. According to Unani, difficult menstruation is caused by a change in temperament (sue mijaz), which produces a blockage in the passage of menstrual fluid. [12]. As a result, treatment focuses on restoring balance to the patient's temperament or humors.

NSAIDs and OCPs (prostaglandin inhibitors) are common treatments for dysmenorrhea, but they have serious adverse effects such as nausea, stomach irritation, gastrointestinal ulcers, and decreased renal blood flow.[13] As a result, herbal and unani medication compositions with few or no negative effects on the human body have gained significant attention in the quest for menstrual pain alleviation. Herbs and other therapy approaches have been used to alleviate menstruation discomfort in traditional Unani medicine since antiquity.

Therefore, a comprehensive exploration of long-established knowledge mentioned in classical Unani manuscripts for the management of auja alrahim/usr-i-tamth is urgently needed, as is the implementation of current integrative medicine/complementary and alternative medicine research in the modern era.

The varied management of dysmenorrhea by the unani system of medicine has been the topic of this review paper. There have also been certain plants and unani compound compositions mentioned in the therapy of usre tams (dysmenorrhoea).

HISTORICAL BACKGROUND

The term "Islamic medicine" refers to medicine produced during the Islamic Golden Age, which lasted from the 6th through the 13th centuries. Medicine was established throughout the Prophet period (570-633 AD), the Caliph period (632-660 AD), the Umayyad period (660-750 AD), and the Abbasid period (660-750 AD) of medieval Islamic civilization (750-1258 AD). 13 Islamic physicians and thinkers scoured, evaluated, and synthesized medical thought and practice, resulting in a vast and diverse medical library to which they turned for information on the causes and treatment of uterine discomfort/menstrual pain. Around 1810, the term "dysmenorrhoea" first appeared in the English language. [14]. Egyptian practitioners recognised amenorrhoea and dysmenorrhoea as abnormal conditions. The Roman Physicians used plants, notably asparagus root, to cure dysmenorrhoea and other menstrual diseases. For the treatment of waze rehm [uterine pain], Zakarya Razi has suggested various unai medicines. To ease menstruation discomfort, he also recommends dry cupping and massage on the lower belly, as well as a sitz bath.[11]

CAUSES OF DYSMENORRHEA

Sr. No	Scholar (Publication)	Causes
1	Greek philosopher Hippocrates	The halt of menstrual blood flow as a result of cervical blockage, resulting in a painful menstrual cycle; however, it does not occur when menstrual flow is regular and adequate in amount.[15, 16].
2	Ibne Sina (Canon of Medicine)	Blockage in the menstrual flow caused by a change in temperament.[12]
3	Zakarya Razi (Al HawiFilTib)	Pain of the uterus [darde rehm]
4	Majoosi and Ibn Huba (Kamilassina and Kitab al Mukhtarat fil tibt)	Women who have a light menstrual flow frequently have uncomfortable menstruation.
5	I. Jurjani	The pain in the abdomen is accompanied by uterine pain, headaches, and backaches. Pain in the hips becomes stuck over a lengthy period of time [21].
6	Hkm. Ajmal Khan	In usre tams, menstruation either does not start or quits after a period of regular menstruation, or arrives in a reduced quantity or happens in a little amount with a gap linked with discomfort [22].

7	Hassan Qurashi	Usre tams is a condition marked by difficulties and discomfort during menstruation, which is sometimes exaggerated.
8	Akber Arzani	Before and during the menstrual flow, the usre tams have pain.

CLASSIFICATION OF USRE TAMS DYSMENORRHEA

Usre tams is classified into five types [24, 25],

1.	Inflammatory or Warmi Usre Tams	It occurs after delivery when the uterus does not return to its anatomical position due to inflammation in the uterus or cervical canal. This sort of usre tams affects the majority of obese women.
2.	Spasmodic or Tashannuji Usre Tams	It is caused by acute uterine pains that begin on the first or second day of menstruation flow. The pains are spasmodic and mostly affect the lower abdomen, although they can also affect the back and inner portions of the thigh, as well as the suprapubic and umbilicus regions. It is most common in female adolescent girls.
3.	Obstructive or Suddi Usre Tams	This type of usre tams is caused by a tiny uterus, uterine displacement, or impediments in the cervix opening. Cervical canal blockages are caused by cervix inflammation.
4.	Membranous or Gheshae Usre Tams	It happens as a result of uterine weakening and cold exposure. It is mainly encountered by women who are stressed or anxious.
5.	Ovarian or mubaizee Usre Tams	It happens as a result of uterine weakening and cold exposure. Women with stress and worry are more likely to feel it.

MANAGEMENT OF DYSMENORRHEA (USRE TAMS)

PREVENTIVE MEASURES

- Regular physical exercise.
- Avoid smoking and alcohol consumption.
- Avoid foods that contain caffeine.

NON-MEDICINAL TREATMENTS TO GET RELIEF FROM PAIN OF DYSMENORRHEA

- Lying on the back and supporting the knees with a pillow.
- Holding a heating pad or hot water bottle on your abdomen or lower back.
- Taking a warm bath
- Gently massaging the abdomen
- Mild exercises like stretching or walking to improve blood flow and reduce pelvic pain.

CONVENTIONAL TREATMENTS AND ITS LIMITATION

- Ibuprofen, Cataflam, Diclofenac, Ketoprofen, Meclofenamate, Mefenamic acid, Naproxen, and Aspirin are examples of non-steroidal anti-inflammatory drugs (NSAIDs) that function as prostaglandin inhibitors to relieve menstruation discomfort [13]. However, long-term use of NSAIDs can result in gastrointestinal bleeding and ulcers, as well as an increased risk of heart attack, stroke, and kidney failure. Long-term usage of NSAIDs can cause nausea, vomiting, diarrhea, constipation, reduced appetite, rash, dizziness, headache, and sleepiness, among other things.
- Oral contraceptives (OCs) decrease endometrial tissue development, resulting in lower prostaglandin levels and reduced menstrual fluid volume. However, OCs can cause mood swings, nausea, fluid retention, breast tenderness, headache,

nausea, anxiety, loneliness, weight gain, acne, and other side effects.

- Surgical interventions – Surgery can be used to treat dysmenorrhea, but it is costly, inconvenient, and can lead to a variety of consequences.

USOOLE ILAJ (GENERAL PRINCIPLE OF TREATMENT)

GHIDH WA PARHEZ (DIETOTHERAPY)

Dietotherapy aims to correct physical imbalances caused by poor lifestyle choices. Patients with *usre-tams* have been recommended by unani practitioners to eat a high-nutrient diet if they are experiencing general weakness. Avoid

constipation by eating a light, healthy diet (1). Cabbage, beetroot root (15), and beef soup (18) are all healthy foods. Muskmelon, fenugreek, barley water, vinegar with kibr, and aabe nukhood can be used to ease *sudda* or blockage. Ghaleez khilt is transformed into lateef with the addition of fresh garlic, onion, and radish. (21) For uterine pain treatment, Razi recommended karnab and beetroot. (15)

NAFSEEYATI ILAJ (PSYCHOTHERAPY)

Because the majority of patients are mentally depressed, prompt psychological therapy is necessary for their psychological treatment. Patients and their families should know that dysmenorrhea is a frequent disease among female teenagers and that it is treatable.

MANAGEMENT OF USR-I-TAMTH/AUJA AL-RAHIM SUGGESTED IN UNANI MEDICINE.

1.	Hijama bila shart	For pain alleviation, use hijama bila shart (dry cupping) below or around the umbilicus.(2,15)
2.	Nutool or takmeed (fomentation) with Fasad	For uterine discomfort with <i>nafkhe rahem</i> , <i>fasad</i> (venesection) is recommended, followed by <i>nutool</i> of <i>roghan-e-sudab</i> at the moment of pain or <i>nutool</i> of <i>joshandae birjansif</i> . (15)
3.	Abzan (sitz bath)	<ul style="list-style-type: none"> ● Abzan with warm water ● Joshanda (decoction) <i>baranjasif</i> (15,28) or <i>irsa</i>, or <i>soya</i> or <i>ghaar</i> (leaves) ● Abzan of <i>methi</i> and <i>khubazi</i> or <i>Joshanda waj</i> or <i>daroonj</i> ● <i>Waram-e-sulb</i>: <i>Joshandae qust</i> or <i>joshandae sowa</i> or <i>tukhme katan</i>, <i>marsanjosh</i>, <i>pudina</i>, <i>baboona</i>, <i>naqoona</i>, <i>biranjasif</i> or <i>Joshanda sambalu</i> is useful (15)
4.	Dalk (massage)	Massage with oils of <i>hina</i> , <i>gul</i> or <i>sosan</i> or <i>nargis</i> , or <i>seer</i> or <i>zabq</i> (15)
5.	Tila (lotion)	Lotion of fine powder of <i>ushq</i> , <i>muqil</i> , <i>bahroza</i> , <i>miya</i> (29)
6.	Hamul (pessary)	<ul style="list-style-type: none"> ● <i>Waram al-rahimi</i>: <i>Afiun khalis hamul</i> for severe pain ● <i>Burodat al-rahim</i>: <i>Muskhin</i> drugs such as <i>qutran</i> and <i>pudina nari</i> ● <i>Waram salbat al-rahem</i>: <i>Hamul</i> of <i>tukme katan</i>, <i>baboona</i>, <i>kali tulsi</i>, <i>naqoona</i>, <i>karnab peel</i> single or combined is useful or <i>marham dakhiluyun</i> with <i>roghan sosan</i> is also useful (15) ● <i>Hamul</i> of mother milk or powdered salt or <i>mazu</i> or <i>usra kurfa</i> (15,29) ● <i>Hamul</i> of powder <i>ushq</i>, <i>muqil</i>, and <i>baroza</i> (equal quantity) (30)
7.	Zamad	<i>Zamad</i> of fresh bottle gourd (15)
8.	Firzaja (pessary)	<ul style="list-style-type: none"> ● <i>Firzaja</i> of <i>ushq</i>, <i>muqil</i>, <i>bahroza</i>, <i>mayia sayila</i> in equal quantities (30) ● <i>Shahade Musaffa Firzaja Dard-i-rahem</i>, which begins before menses and ends after intercourse, requires one part of breast milk and two parts of breast milk. (31)

9.	Oral	<ul style="list-style-type: none"> ● Barid dard-i-rahim (cold uterine pain): Joshanda qust and joshanda sad or jowsheer, jundabaster each 1g with matbukh rihani is useful ● Joshanda methi or ushna or babuna ● Joshanda of ajwaeen, tukhme shibbat (2 misqal) combined with qande safed (6 misqal) for 7 days relieves dard-i-rahim and waja'al-zuhr before menses. (15,18,32) ● Joshanda of poste phalli amaltas (21 g), jawatri (3 g), and qande siyah (25 g) for 3 days priors to menses (15,18,32) ● Rewand khatayi powder (5 g) and sugar starting 2 days before menses and continued for 3 days during menses (18,29,32,33) ● Hilteet 500 mg and qand siyah 68 g at morning 5 to 7 days during menstruation is useful to relieve dysmenorrhoea (28) ● Habbe muddir, 1 tablet 2 times a day (29) ● Jawarishe qurtum, 7 g at bed time (29) ● Barsha'sha 3 g at the time of uterine pain is also useful (29)
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ILAJ BIL DAWA (PHARMACOTHERAPY)

WARMI USRE TAMS

- (i) Decoction of Abhal (*Juniperus communis*) and Karafs Kohi (3 gm each); Tukhme kharpaza (*Cucumis melo* seeds), Khare khasak (*Tribulus terrestris* linn.) and Bekhe kashni (*Cichorium intybus*) (6 gm each) prepared with 70 gms of Arq-shatra (*Fumaria parviflora* lam) and Arq-makoh (*Solanum nigrum* linn.) should be given with 20 ml of Sharbat Bazoori.
- (ii) Decoction of Tarmas (white lupine), Abhal (*Juniperus communis* linn.), mustara maseeh (*Mentha pulegium* linn), majeeth (*Rubiscordi folia* linn), berge sodabe, podina khusk (7 gm each) prepared with 375 ml water should be given with 40 ml of Sharbat Bazoori.
- (iii) Luaabe behdana (*Cydonia oblonga* mill) (3gm), Sheerae unnaab (*Zizyphus vulgaris* lau) (5 pills), Arqe-gauzeban (*Borago officinalis* linn.) (120 ml) should be given with 20 ml of Sharbat E Nilofer. [25].

TASHANNUJI OR SPASMODIC USRE TAMS

- (i) Decoction of drugs Tukhme Karafs (*Apium graveolens*), podina (*mentha arvensis*) (dry) and Badiyan (*Foeniculum vulgare*) (5 gm each); Tukhm-Kharpaza (*Cucumis melo* seed) and post Amaltaas (*Cassia fistula* linn.) (7 gm each); Tukhme Bhang (*Cannabis sativa* linn.) and Ajwain Khurasani (*Hyoscyamus Niger*) (1 gm each) prepared with 375

gm of water should be given with 25 ml of Sharbat Bazoori Motadil.

- (ii) Pills made by mixing of fine powders of Jund Baidaster and Halteet (*Ferula Asafoetida*) (1 gm); Tukhme Bhang (*Cannabis sativa* linn.), Ajwain Khurasani (*Hyoscyamus Niger*) and Podina nahri (*Mentha Arvensis*) (2 gm each); Kafoor (*Cinnamomum Camphora*) (3 gm) with honey should be given thrice daily [25].

GHESHAE OR MEMBRANOUS USRE TAMS

Decoction of Tukhme Qurtum (*Carthamus tinctorius* L.), Gauzuba badiyan (*Foeniculum vulgare*), Tukhme kharpaza (*Cucumis melo* seed), Tukhme Karafs (*Apium graveolens*), Bekhe Kashni (*Cichorium intybus*) (5 gm each) prepared with 250 ml water should be given with 25 ml of Sharbat Bazoori Motadil [25].

HERBAL DRUGS EFFECTIVE IN DYSMENORRHEA

- Abhal (*Juniperus communis* linn.)
- Asarun (*Asarum Europaeum* linn.)
- Sonf (*Pimpinella anisum* linn.)
- Asgand (*Withania somnifera* Dunal)
- Amaltas (*Cassia fistula* linn.)
- Annanas (*Bromeliaceae*)

- Elva (Aloe barbadensis Mill)
- Babuna (Matricaria chamomilla linn.)
- Bakain (Melia azedarach linn.)
- Bandal (Luffa echinata Roxb)
- Parshioshan (Adiantum capillus veneris linn.)
- Podina (Mentha arvensis linn.)
- Khare khask (Tribulus terrestris linn)
- Hulba (Trigonella foenum graecum linn)
- Hilteet (Ferula foetida Regel)
- Kalonji black seed (Nigella sativa linn.)
- Mushtar Mashhi (Mentha pulegium linn.)
- Neem (Azadirachta indica A. Juss)
- Darchini (Cinnamomum zeylanicum Blume)
- Qust (Saussurea lappa)
- Ginger (Zingiber officinale Rose)

UNANI PHARMACOPOEIA FORMULATION USED IN MANAGEMENT OF USRE TAMS

- Sharbat Bazoori Motadil
- Qurs Kafoor
- Habbe Mudir Haiz
- Habbe Rewand
- Safoof-e-Mudire Haiz
- Dawa Mudire Haiz
- Dawae Ussurtams
- Dawae Mudir
- Kushta Sadaf

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