



Exploring the Roots: The Historical Journey and Evolution of the Unani System of Medicine

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ABSTRACT

The Unani system of medicine traces its roots to Mesopotamia, the Babylonian civilization, and ancient Egypt, dating back approximately 10,000 years. It underwent significant transformations in ancient Greece and various other regions. It evolved in Western Asia, and eventually found a stronghold in India, where it was preserved and significantly modernized. Now revitalized, Unani medicine is experiencing a resurgence in its place of origin while also expanding its influence in India and gaining recognition in Western countries. This renaissance is largely supported by the scholarly contributions from Indian experts, who are instrumental in the ongoing development and adaptation of the Unani system, ensuring its relevance and efficacy in contemporary medical practices. During the Arabic period, when the Unani system of medicine was overhauled, it was also commonly referred to as Arabic medicine or Islamic medicine.

Key Words: *Mesopotamia, Unani Medicine, Egypt, Greece*

INTRODUCTION

The Unani System of Medicine is attributed to Hermes (Idris A. S.). The foundation of Unani therapy can be traced back to ancient Egypt and Mesopotamia (10000 BC), where plants held a central role in disease treatment, and surgical practices were initiated. Noteworthy physicians from ancient Egypt include Imhotep (2800 BC) and Amenhotep (1550 BC), demonstrating advanced medical knowledge. The Greek period of Unani Medicine began with Asclepius (Asqalébüs-1200 BC), who integrated the medical knowledge of Egyptians and Babylonians into Unani medical practice. The philosopher-physician Hippocrates (460-370 BC) further advanced medicine by removing superstition and magic, elevating it to a scientific status. The Greeks laid the foundation for medical disciplines, theories, principles, and scientific methodologies, which the Arabs inherited and developed further. This transfer of knowledge from the Greeks to the Arabs led to the term "Tibb Unani (Unani Medicine)," signifying its origins in Greek wisdom. Previously, medicine primarily focused on disease and its cure, lacking the structured principles that were later established through the integration of Greek knowledge by the Arab scholars.

From Greece, medicine spread to Rome and later to Arab, Persian, Iranian, and Central Asian regions during the Middle Ages. It was further developed and refined by post Islamic Arab scholars. Persian scholars enriched and developed Unani Medicine, which eventually reached India, where it flourished and gained widespread acceptance among the population.

Discussion

Naming Unani Medicine

The question may arise as to why the medicine originating in Mesopotamia and Egypt is referred to as Unani Medicine. It was coined by Arab physicians. There are two main reasons for this:

1. Firstly, it reflects the honesty and integrity of the Arabs, who attributed the knowledge they acquired to its original sources. For instance, since they adopted medicine from the Greeks (Unan), they named it Unani medicine. Similarly, they named their philosophy and logic "Unani philosophy" because these disciplines were also derived from Greek sources. Additionally, when they adopted the concept of zero from India, they named it "Sifar Hindi." Likewise, the names of various medicines were attributed to the regions from which they were obtained. For example, they named a medicine "Waj Turki" if it was acquired from the Turkish region, "Tamar Hindi" if from India, "Ajwayin Khorasani" if imported from Khorasan, Chob Chini from China and so forth.

2. Second reason why the medicine originating in Mesopotamia is referred to as Unani medicine is rooted in its historical evolution. Initially, approximately 10,000 years ago, medicine was perceived as divine knowledge, believed to be a gift from God. It solely focused on curing diseases without delving into fundamental theories, principles, physiology, preventive health measures, or the functions of drugs. However, when this knowledge spread to Greece, significant transformations occurred. Greek physicians introduced fundamental theories, freeing medicine from its mystical origins. They developed theories on physiology, principles, the humoral theory, the theory of elements, and pharmacology, notably during the period of Galen. As a result of these scientific contributions by Greek physicians, the medicine inherited from Mesopotamia came to be known as Unani medicine. During its zenith in the Arabic period, this medicine was also commonly referred to as Arabic medicine or Islamic medicine.³

Since the earliest human settlements emerged along major rivers like the Nile, Euphrates, and Tigris, two sciences have played significant roles: morality, and health. The former has been instrumental in organizing community relations, establishing rules and regulations, and resolving disputes. The latter, focusing on health, has been essential for ensuring the physical and mental fitness of individuals to survive and sustain human existence in the wilderness. It is believed that the first recognized physician in the history of Medicine was Asclepius 1, who lived around 5500 BC in ancient Greece.

Mesopotamia

Mesopotamia, known as the cradle of civilization, witnessed the earliest developments of the Neolithic Revolution around 10,000 BC. This region, situated in the Tigris-Euphrates valley, was home to some of the earliest known civilizations, including Sumer, Ur, Uruk, Assyria, and Babylon. The Sumerians made significant advancements in astronomy and metallurgy, contributing to the overall progress of Mesopotamian society. Mesopotamia's influence extends to various fields, including mathematics, astronomy, and agriculture, making it a cornerstone of human history. It is recognized as the framework of some of the world's earliest civilizations, inspiring significant developments that have shaped human civilization. The origins of the present Unani System of Medicine can be traced back to the ancient civilization of Mesopotamia, highlighting the enduring legacy of health and well-being practices from this influential region.^{1,2}

Ancient Egypt

The Egyptian civilization, spanning from approximately 3000 BCE to 300 CE, emerged after the Mesopotamian civilization. Egyptian medicine, practiced during the second millennium BCE, was remarkably advanced for its time. Statues dating back to around 2500 BCE suggest the performance of surgical operations. IMHOTEP, an Egyptian physician and architect, originally served as the high priest, had risen to the God of Medicine following his death around 2600 BCE.

Egyptian medicine has a rich and ancient history dating back thousands of years. Ancient Egyptians developed a sophisticated understanding of medicine and healthcare practices that combined elements of empirical observation, religious beliefs, and magical rituals.

Notably, the ancient Egyptians began documenting their medical knowledge and prescribing medications in written form, leading to the creation of some of the earliest medical records known to historians.

This knowledge is primarily derived from the study of Egyptian papyri, notably the Ebers Papyrus and the Edwin Smith Papyrus, discovered in the 19th century. The Ebers Papyrus contains a list of

remedies, while the Edwin Smith Papyrus serves as a surgical treatise. These scrolls provide insights into the types of medicines and potions used during ancient Egyptian times and highlight the strong connection between medical practices and religious beliefs. Moreover, the ancient Egyptians were skilled in the meticulous process of mummification, which was a prevalent practice throughout much of their civilization and contributed to their expertise in anatomical knowledge and preservation techniques.

Greek

Medicine that began eight thousand years ago in ancient Iraq, Babylon, Nineveh and Egypt and the candle of knowledge that was lit there; its direct effects were received by Greece. The Greeks also added value to the development of science and technology. The Greek civilization flourished from 600 BC to 529 CE. It was an heir to the cultures of Mesopotamia and Egypt. Its influence on the Arabs took place two centuries after the advent of Islam. The Greeks also were involved in medical practice through religious beliefs. Asclepius was known as the God of Medicine in ancient Greek religion and was a significant medical care provider. They developed old theories and introduced treatments similar to modern 'alternative medicine'. There was a belief in ancient Greek Medicine that illness is a "divine punishment" and healing is a gift from the Gods, and it grew to such an extent that it converted the cause and effect. Greek medicine, particularly that of ancient Greece, is widely regarded as a cornerstone of Western medical traditions. Influenced by various civilizations including Egyptian, Mesopotamian, and Indian, Greek medicine developed its own distinctive approach to understanding the human body and treating illnesses.

Medicine traces its roots back eight thousand years ago to ancient civilizations such as Iraq, Babylon, Nineveh, and Egypt, where the flame of knowledge was first kindled. The impact of these early medical practices was later transmitted to Greece, a civilization that greatly contributed to the advancement of science and technology. Flourishing from 600 BC to 529 CE, Greek civilization inherited and built upon the rich cultures of Mesopotamia and Egypt. The influence of Greek civilization on Arab societies occurred approximately two centuries after the rise of Islam. In addition to their scientific pursuits, the Greeks also integrated medical practice into their religious beliefs. Asclepius, revered as the God of Medicine in ancient Greek religion, played a significant role in providing medical care. Ancient Greek medicine was characterized by the development of old theories and the introduction of treatments resembling modern 'alternative medicine'. A prevailing belief in Greek medicine was that illness represented a "divine punishment," while healing was viewed as a gift from the Gods. This belief system became so ingrained that it often reversed the concept of cause and effect. ^{4,5}

Hippocratic Era

The Hippocratic theory, encapsulated in the phrase "Healthy mind in a healthy body," stood as a central tenet of ancient Greek medicine. Hippocrates, renowned for his prolific writings, made significant contributions to medical knowledge, with his legacy enduring through the continued use of the Hippocratic Oath as a code of ethics in the medical profession. He advocated for the separation of medicine from magical and religious beliefs, laying the foundation for a more rational and empirical approach to healthcare. The influence of Greek medicine extended beyond its borders, reaching Rome where the physician Galen further popularized its teachings through his lectures and extensive writings. The Hippocratic Corpus, a collection of seventy medical works remains a testament to the enduring legacy of Greek medical thought. One of the key concepts introduced by Hippocrates was the theory of four humours, which emphasized the importance of maintaining a balance between Dum (blood), Safra (yellow bile), Sawda (black bile), and Balgham (phlegm) within the human body. This theory revolutionized the approach to patient care, offering physicians a new framework for understanding and treating illnesses.

Greek medicine is widely regarded as a cornerstone of Western medical traditions. Influenced by various civilizations including Egyptian, and Mesopotamian, Greek medicine developed its unique approach to healthcare, shaping the course of medical history for centuries to come.

Roman Era:

During the Roman era, the influence of Greek medicine on Roman medical practices was substantial. Pedanius Dioscorides (40–90 AD), a Greek physician practicing in Rome, exemplifies this influence.

One of the notable works of Dioscorides, was the treatise "De Materia Medica," a comprehensive guide to medicinal plants that profoundly influenced the history of medicine. This work was later translated into Arabic as "Kitab al-Hashayish" by Işţifan ibn Bāsīl during the reign of Caliph Mutwakkil (847-861), further disseminating the knowledge of medicinal plants to the Arab world.

Ancient Roman medicine encompassed specialized fields such as urology and ophthalmology, reflecting the integration of Greek medical knowledge into Roman healthcare systems.

By 100 BC, the incorporation of Greek medical principles had transformed Rome into a major center of medical innovation. Roman physicians, like their Greek counterparts, emphasized natural causes of diseases rather than relying on spiritual rituals. However, spiritual beliefs still persisted to some extent. The concept of contagion was recognized in Roman medicine, leading to the adoption of practices such as quarantine and improved sanitation to prevent the spread of diseases. Galen (129–200 AD), one of the foremost physicians in Rome, made significant contributions to medical knowledge through his expertise in anatomy, acquired through the dissection of animals.

The conquest of Alexandria by the Romans was a pivotal event, as it resulted in the acquisition of the famed Library of Alexandria, which housed numerous volumes of ancient Greek medical texts. This repository of knowledge facilitated the dissemination of Greek medical practices throughout the Roman Empire. ^{6,7}

Byzantine Era:

During the Byzantine era, spanning from 400 AD to 1453 AD, Byzantine medicine flourished and built upon the scientific foundations established by its Greco-Roman predecessors centered around the Eastern Mediterranean region. Byzantine medical practices exerted influence on Islamic medicine and were characterized by the compilation of standardized medical knowledge in textbooks by Byzantine physicians. Constantinople, known today as Istanbul, emerged as a prominent center of medicine during the Middle Ages. Byzantine physicians expanded upon the medical knowledge inherited from Greek and Roman sources, integrating it with their own advancements. The Vienna Dioscorides manuscript, authored by the first Byzantine physician, drew upon ancient authorities such as Galen and Hippocrates. This manuscript served as a significant reference point for Byzantine medical knowledge. Oribasius (d. 403 AD), one of the most prolific Byzantine compilers of medical knowledge, played a crucial role in documenting and disseminating medical practices of the time. His works were frequently referenced by scholars like Mohammad ibn Zakariya Razi (865-925) in his encyclopedia Al-Hawi. The exchange of medical knowledge between Byzantine and Islamic scholars led to the translation of several medical texts into Latin, and subsequently into English and French. This cross-cultural exchange contributed to the enrichment and dissemination of medical knowledge across different regions during the Byzantine era. ⁸

Arabian Era

When the civilizations of ancient Greece and Rome waned, it was the great Muslim scholars in Arabic period who preserved and advanced their medical knowledge from the 8th to the 13th centuries AD. Unani Medicine, originating from the region of its birth, underwent a transformation and flourished in Western Asia under the guidance of Arab physicians. These scholars translated the entire corpus of Greek medical literature, augmenting it with their own wisdom, meticulous observations, and experiments. They then disseminated this enriched knowledge to Europe during the Dark Ages, when Europe was in a period of intellectual decline.

The names of these Muslim scholars were Latinized, and their medical treatises were imported into Europe, where they were translated into Latin and became foundational texts in medical schools. The vast Muslim empire, stretching from Persia to Spain, actively promoted medical learning and research. Throughout this Arabic period in the history of Unani Medicine, numerous physicians rose to prominence, each contributing to the rich heritage of medical knowledge. The lasting impact of Arab physicians on Unani Medicine, derived from the ancient Greek tradition, remains significant and continues to be studied with great importance.

Impact of Islam

In the early years following the emergence of Islam (610 AD), academic pursuits became prominent among Muslims. Even during the time of the Prophet Muhammad (PBUH) (570-632 AD), there were instances of a keen interest in learning other languages. The Prophet's teachings emphasized the

importance of education and elevated the status of knowledge, particularly in the field of medicine. He himself provided medical prescriptions and offered advice on treatments, with Hijama (cupping) being one of his preferred methods of healing, which he and his companions adopted upon his recommendation. The vast Muslim world extended beyond the Arab countries, encompassing regions as far-reaching as North Africa, Egypt, Sudan, Algeria, and Central Asian empires like Iran, Turkey, and Afghanistan. While these regions had their own local and traditional treatment methods, there was a growing need for a formalized medical system. Unani Medicine, with its disciplined approach, theoretical framework, valuable scientific legacy, therapeutic principles, and effective healing practices, emerged as the most popular method of treatment across the Muslim world during that era. Unani Medicine flourished not only in the eastern parts of the Islamic empire centered in Baghdad but also in the western regions, particularly in Andalusian cities such as Cordoba, Granada, Toledo, Seville, and Zaragoza.

Prominent medical scholars such as Abul-Qasim al-Zahravi (Abulcasis) (936–1013 AD), Ibn Zuhr, Ibn Rushd, Ghafiqy, Ibn Juljul, Ibn Wafid, Ibn Tufail, Ibn Bajah, Ibn Maimun, and Ibn Baitar significantly enriched Unani Medicine through their academic contributions and writings. Their works not only advanced the field of medicine but also played a crucial role in disseminating medical knowledge to Europe through translations and interactions with European students.

Western researchers acknowledge the significant contribution of Arab scholars to the educational, scientific, and medical progress of Europe, recognizing their influence in removing the darkness of ignorance and fostering intellectual advancement in European societies.^{9, 15}

Transformation of Unani Medicine

Unani Medicine has exhibited significant variation and transformation across regions, spanning from Spain, North Africa, and Arab countries to Iran and India in the East, from the 8th century to the present day. The Islamic culture that developed during this period was cosmopolitan, and shared traditions traversed vast geographical areas and spanned centuries. However, diverse factors and local conditions led to considerable diversity within Unani Medicine.

Various factors influenced the overall health of communities during this period, including dietary and fasting practices, hygiene standards, burial rituals of different religious communities, climatic conditions, living conditions of diverse populations, local economic and agricultural factors, population migration, and travel for commerce, court attendance, or pilgrimage.

The period from the 7th to the 12th centuries AD is commonly referred to as the Medieval Islamic age in history. Islamic civilization experienced a dramatic rise during the 7th century AD and expanded to cover a large part of the world, incorporating numerous subcultures and languages into its domain while engaging with neighboring peoples. During this period, Islamic civilization made significant contributions to various fields including science, medicine, technology, philosophy, architecture, and the arts, a legacy widely acknowledged by historians.

A significant aspect of the intellectual history of Islamic civilization was the role of Muslim scholars as intermediaries and interlocutors between different cultures and traditions. They served as synthesizers, catalysts, and disseminators of scientific knowledge and technology, playing a crucial role in the transmission and enrichment of medical knowledge from earlier Greek sources. As the emerging Islamic empire faced various medical challenges, including diseases, injuries, and childbirth, they welcomed and valued the wealth of medical knowledge inherited from Greek sources. Both Muslim and non-Muslim physicians were proficient in multiple languages, including Arabic, Persian, Syriac, Hebrew, and Turkish. They absorbed and enriched the legacy of medical theory and practice, incorporating elements from Persian, Indian, and Arab sources. When Muslims encountered the intellectual heritage of antiquity, encompassing Greek science and philosophy, Indian mathematics and medicine, Egyptian and Roman technology, as well as Persian literary and political wisdom, they subjected it to critical scrutiny, assimilated its essence, and complemented it with their own insights, research, and innovations, thereby advancing knowledge across a wide array of disciplines to unprecedented levels. Moreover, they generously disseminated the fruits of their research and innovations to diverse regions of the world.

Unani Medicine, founded upon the theoretical and practical foundations laid in Greece and Rome, esteemed Hippocrates (5th century B.C.) and Galen (d. 210 AD) as paramount authorities, with subsequent scholars in Alexandria also holding significant influence. Muslim scholars authored original treatises and undertook the monumental task of translating extensive Greek works into

Arabic, while also generating new medical knowledge based on these translations. Their commitment to scholarly integrity was evident in their practice of attributing translations to their original authors. Given the vast and occasionally inconsistent nature of Greco-Roman medical knowledge, Muslim scholars systematized it by composing encyclopedias and summaries, rendering the Greek medical tradition more accessible, comprehensible, and academically viable.

European scholars during the medieval and early modern periods relied on Islamic and Greek knowledge, as well as translations thereof, as the cornerstone of their medical pursuits. It was through Arabic translations that the West gained insight into Greek Medicine, including the seminal works of Galen and Hippocrates.^{10,11}

Influence of Bayt al-Ḥikmah (The House of Wisdom) (832):

The establishment of Bayt al-Ḥikmah (The House of Wisdom), also known as the Grand Library of Baghdad, during the Abbasid era had a profound impact as a public academy and intellectual hub in Baghdad. By the latter part of the ninth century, Bayt al-Hikma had emerged as the foremost repository of books worldwide and had evolved into a major center of intellectual activity throughout the Medieval era, drawing in the most brilliant minds from the Arab and Persian realms. Widely recognized as one of the world's largest public libraries during the Islamic Golden Age, it was intended to house rare books and collections of manuscripts.

Under the reign of the seventh Abbasid caliph al-Ma'mun (r.813–833), Bayt al-Ḥikmah was transformed into a public academy and library. Hunayn ibn Ishaq (809–873), an eminent Arab physician and scientist, played a pivotal role as the most prolific translator, rendering 116 works into Arabic. As the "Sheikh of the translators," he was appointed by the caliph to oversee translation efforts. Notably, Hunayn ibn Ishaq translated the entire corpus of Greek medical literature, including seminal works by Galen and Hippocrates.

Thābit ibn Qurra (826–901) contributed significantly by translating major works of Apollonius, Archimedes, Euclid, and Ptolemy. The translations of this era surpassed earlier efforts, reflecting the growing demand for accurate translations driven by the burgeoning Abbasid scientific tradition and its emphasis on precision. Numerous other translators, fluent in Syrian and Greek, were also involved in this monumental translation endeavor, further enriching the Arabic intellectual landscape with the wisdom of ancient civilizations.

Furthermore, several newly established libraries, inspired by the model of the House of Wisdom in Egypt and Andalusia, have emerged. These institutions have played a crucial role in preserving the knowledge and cultural heritage of ancient civilizations while also facilitating remarkable and unprecedented discoveries that have propelled Western civilization to flourish.

The spread of the scientific and philosophical heritage of ancient civilizations to medieval Europe stands as one of the most significant contributions of Arabs to Western civilization. This movement, aimed at globalizing science, medicine, and philosophy, was initiated in Baghdad during the reigns of the Abbasid caliphs al-Mansur (754-775) and his successor Al-Mamun (813-833). This transformative era was characterized by widespread translations of scientific, medical, and philosophical works from ancient Rome, India, Persia, and Egypt, as well as the integration of research conducted by Arab scholars and scientists with that of the ancients.

Moreover, this period saw the establishment of scientific institutions, the adoption of Arabic as the lingua franca of scientific communication, and the formation of a diverse, multiethnic, and multi-religious community of scientists and scholars. Notably, many non-Muslim authors residing in Baghdad also authored medical treatises in Arabic, exemplified by figures such as Ali ibn Abbas Majusi (Hally Abbas) and Ibn Butlan. This demonstrates the trustworthiness of the Christian and other non-Muslim communities in Baghdad, as well as the tolerance exhibited by the Muslim rulers towards intellectual diversity. From 622 to 1492 AD, Arabic supplanted Greek as the international language of science and medicine. Roger Bacon (d. 1293) acknowledged that almost all of Aristotle's works were accessible solely through Arabic translations, underscoring the pivotal role played by Arabic in transmitting Greek knowledge to Europe.

The global acknowledgment of Arab physicians' integrity is rooted in their practice of faithfully dedicating translated works to the original Greek authors. This noble gesture led to the term "Tibb Unani (Unani Medicine)" being coined to represent this tradition.

Nobel Laureate Amartya Sen (b. 1933) has aptly remarked that "as leaders of innovative thinking in that historical period, Muslim scholars were among the most dedicated proponents of the globalization of science and mathematics." ^{12, 13}

Persian Era

The Arab Muslim conquests of the seventh century AD brought about the Islamization of Iran, transforming it into a prominent center of Islamic culture and scholarship. The language, traditions, and heritage of Iran exerted a profound influence on the Muslim world. This historical transformation began with a significant military campaign led by Abu Bakr (RA), the first caliph of the Rashidun Caliphate, followed by Umar and Uthman, the second and third caliphs, between 632 and 654 AD. This trajectory, which ultimately led to the establishment of one of the largest empires in history, began with a clash against the Sassanid Empire, led by the renowned general Khalid ibn al-Walid (d. 642 AD).

Among the earliest and most prominent figures of this period was Abu Bakr Muhammad bin Zakariyya al-Razi (Rhazes) (864-935), who authored numerous works, including the comprehensive medical treatise "Kitab al-Hāwī" ("Comprehensive Book"), and the renowned "A Treatise on Smallpox and Measles." Al-Razi's seminal work not only distinguished between these two diseases but also provided detailed descriptions of their symptoms and treatments.

Other notable works from this era include "Kamil al Sana'h" by Ali ibn Abbas al-Majusi (Haly Abbas) (930-994 AD) and "Al-Qanun" by Ibn Sina (Avicenna) (980-1037 AD), among many treasures authored by Persian scholars. These works were translated into Latin and other European languages, significantly influencing Western medical thought and education in European universities. The contributions of Persian scholars during this period were profound, surpassing those of many subsequent centuries.

Literature in The Unani System of Medicine

Disease and health were concerns shared by individuals across all social strata, reflecting a universal aspect of human civilization. Consequently, therapeutic became a central focus of medieval Islamic culture. In response to these circumstances, physicians and scholars of the Muslim period cultivated an extensive medical literature that delved into and synthesized the theory and practice of medicine. This vast body of literature was intertwined with learned traditions in philosophy, natural science, mathematics, astrology, alchemy, logic, and religion. During the Golden Age of Muslim Civilization, hospitals were established in numerous cities. These institutions offered cutting-edge medical management, including procedures such as cataract operations, regular vaccinations, internal stitching, bone setting, and medical education within teaching hospitals, which were accessible to individuals from all walks of life and formed a standard part of medical practice. Moreover, there was a concerted effort to promote awareness of nutrition and exercise for the maintenance of life and health.

Unani scholars of this period produced two types of literature: translations of a vast array of Greek texts spanning a millennium of medical history, and original compositions. These medical texts covered diverse topics and structures, allowing them to be classified into various categories, including:

1. *Medical Encyclopedias*, 2. *Epitomes*, 3. *Commentaries* on original books 4. *Medical Poetry*, 5. *Medical Monographs* 6. *Medical Therapeutics*, 7. *Dietetics and Regimen*, 8. *Pharmaceutics*

Development in India

The development of Unani Medicine is a fascinating tale of expansion, consolidation, and resilience. Initially introduced through Arabic and Persian sources, Unani Medicine took root and flourished in the Indian subcontinent. Arab traders had long established connections with India before the advent of the Muslim rules in India in 11th century, providing fertile ground for the growth of Unani Medicine. Throughout its history in India, Unani Medicine received significant support from various rulers, including the Delhi Kings such as the Khiljis, the Tughlaqs, the Mughals, and the Deccan rulers like Asif Jahi. Court physicians, scholars, and practitioners of Unani medicine enjoyed state patronage, contributing to the system's heyday between the 13th and 17th centuries. During this period, many renowned physicians from Iran and Central Asian countries migrated to India, seeking refuge from wars and upheavals in their homelands. However, under British rule, all healing systems except

allopathic medicine were suppressed. Despite this, Unani Medicine persisted due to its effectiveness in treating diseases among the masses and the gentle nature of its remedies. ^{14, 16}

Renaissance of Unani Medicine in India

One influential figure in promoting Unani Medicine in India was Masih al-Mulk Hakim Ajmal Khan (1868-1927 AD). He was not only a distinguished physician, renowned educationist, and scholar, but also a freedom fighter in India's struggle for independence. Hakim Ajmal Khan played a crucial role in advocating for the Ayurveda & Unani system and establishing institutions dedicated to its advancement. His tireless efforts in this field breathed new life into the declining Indian System of Medicine under British rule, ultimately preserving the Unani System of Medicine from extinction in India. He spearheaded the Renaissance of Unani Medicine in India.

His contributions are exemplified by the Hindustani Dawakhana and the Ayurvedic and Unani Tibbia College in Delhi. As a staunch advocate of indigenous medical systems, Hakim Ajmal Khan pioneered scientific research into the treatments offered by Ayurveda and Unani Medicine, leaving a lasting legacy in the development of these traditional healing practices in India.

On the occasion of his Birth Anniversary, 11th February has been designated for the observation of 'Unani Day' every year by the Ministry of AYUSH, Government of India.

After independence

Since India gained independence, the development of Unani Medicine, along with other Indian systems of medicine, has gained significant momentum. The Indian Government now actively supports Ayurvedic and Unani medical colleges and hospitals, leading to a remarkable surge in their popularity. Presently, numerous recognized institutions across the Indian subcontinent provide training and award academic degrees in the Unani system. These institutions offer a curriculum that incorporates modern concepts of para-clinical and clinical aspects of medicine.

The Unani System in India has been preserved in its classical form while undergoing substantial overhaul and revamping along scientific lines, with strong patronage from the state. This has led to the evolution of a self-reliant and self-propelling system in the domain of Unani Medicine. Presently, Unani Medicine is experiencing a resurgence in the region of its origin and is expanding extensively within its current habitat, while also gaining acceptance in Western countries.

The Ministry of AYUSH, Government of India, has played a crucial role in supporting the globalization of Unani Medicine. Through its efforts, Unani Chairs have been established in foreign universities in collaboration with Indian Missions abroad. For instance, there is currently a functioning Unani chair in South Africa.

Today, India boasts a well-developed infrastructure of academic, research, and healthcare institutions dedicated to the Unani System of Medicine. Over 50 teaching institutions offer Unani medical education and training, contributing to the continued growth and advancement of this traditional healing practice.

The distinction of the Unani System of Medicine

The uniqueness of Unani Medicine lies in its holistic approach to healing, which incorporates principles of Arkan (constituents) and Mizaj (temperament). These metaphysical concepts underpin the discovery and use of highly holistic drugs that affect entire organs and vital systems within the body. Unlike Western medicine, which tends to adopt a reductionist approach and rejects metaphysical concepts, Unani Medicine recognizes the interconnectedness of various bodily systems and addresses health concerns accordingly.

In Western medicine, the analytical approach focuses on dissecting and understanding individual parts of the body, which can be aggregated and studied separately. However, this approach falls short when dealing with human beings, who are influenced by factors such as behavioral, emotional, and spiritual aspects. Consequently, the purely analytical approach may prove incomplete in such cases, particularly where these factors play a significant role.

On the other hand, an overly holistic approach can lead to unscientific practices if taken to extremes. Therefore, a balance between the holistic and empirical approaches is essential in achieving comprehensive healthcare. Unani Medicine emphasizes the need for empirical, experimental, and analytical aspects in medical research and treatment, alongside its holistic principles. This balanced

approach epitomizes the philosophy of total healthcare, ensuring that patients receive effective and well-rounded treatment that addresses their physical, emotional, and spiritual needs.

Principles of Unani Medicine

The principles of Unani Medicine are deeply rooted in the teachings of Hippocrates, who emphasized that disease is a natural process and that symptoms are the body's reactions. He advocated for physicians to assist the body's natural forces in combating illness. Central to the Unani system is Hippocrates' humoral theory, which postulates the presence of four humors in the body: Dam (blood), Balgham (phlegm), Safra (yellow bile), and Sauda (black bile). These humors are associated with specific temperaments: sanguine, phlegmatic, choleric, and melancholic, based on the preponderance of the humors within an individual. Each humor is assigned a temperament based on its qualities, such as hot, cold, moist, or dry.

Unani Medicine categorizes the essential working principles of the body into seven main groups:

1. Arkan: Constituents representing earth, water, air, and fire, which serve as the building blocks of everything in the universe.
2. Mizaj: The bodily constitution, encompassing physicochemical aspects.
3. Akhlat: Structural components, referring to bodily humors.
4. A'ada: Fully developed mature organs, focusing on anatomy.
5. Ruh: The vital or life force, associated with mental or psychic energy.
6. Quwa: Bodily power or faculties, related to physical energy.
7. Af'al: Bodily functions, encompassing physiological and biochemical processes.

Maintaining the correct humoral balance is crucial in Unani Medicine. This balance is sustained by a power of self-preservation or adjustment called Quwwate-Mudabbira (*vis medicatrix naturae*) within the body. If this power weakens, an imbalance of the humoral composition occurs, leading to disease. Unani treatments aim to support and optimize this natural healing power, thereby restoring humoral balance and promoting health. Proper diet and digestion also play essential roles in maintaining humoral equilibrium within the body.

Concept of Mizaj

In the Unani system of medicine, temperament (Mizaj) holds significant importance and serves as the foundation for pathology, diagnosis, and treatment. This concept, rooted in the Galenic tradition, categorizes individuals into sanguine, phlegmatic, choleric, or melancholic temperaments, recognizing each person as unique. Modern understandings from psycho-neuro-endocrinology further support the idea that temperament is intrinsic to an individual and that shifts in temperament can influence one's state of health.

According to Unani philosophy, disease results from an imbalance in the body's humors and the failure of one or more bodily systems or organs to eliminate pathogenic waste. Drugs are also assigned temperaments in the Unani system, with hot drugs producing a hot temperament, for example. Therefore, medications are primarily used to correct abnormal or pathological temperaments within the body or specific systems and organs.

At its core, the Unani system views the body as a composite of matter and spirit, recognizing that a harmonious life is only achievable when there is a proper balance between physical and spiritual functions. The ultimate goal of Unani treatment is to restore this balance, correcting present disturbances and enhancing the individual's resistance to future disorders. By addressing both physical and spiritual aspects, the Unani system aims to promote overall well-being and vitality in individuals.

Prevention of Disease:

The Unani system of medicine recognizes the significant impact of one's surroundings and ecological conditions on human health. It emphasizes restoring the equilibrium of various elements and faculties within the human body. To prevent disease, the Unani system highlights six essential prerequisites, known as 'Asbab-e-sitta Zarooriya':

1. Hawa (Air): Ensuring the quality of air by maintaining proper ventilation and avoiding exposure to pollutants.

2. Makul wa Mashrub (Food and Drinks): Emphasizing the consumption of nutritious foods and clean water to support overall health.
3. Harkat wa Sukun Badani (Physical Activity and Rest): Promoting a balance between physical activity and rest to maintain optimal bodily function.
4. Harkat wa Sukun Nafsanī (Psychic Activities and Rest): Encouraging mental activities that promote relaxation and rest, alongside periods of mental rest and relaxation.
5. Naum wa Yaqza (Sleep and Wakefulness): Stressing the importance of regular and adequate sleep patterns to support bodily rejuvenation and overall well-being.
6. Estefragh wa Ehtebas (Excretion and Retention): Ensuring proper elimination of waste products from the body through regular bowel movements and urine excretion, while also avoiding excessive retention of waste materials.

By adhering to these six essential prerequisites, individuals can maintain their health and prevent the onset of disease according to the principles of the Unani system of medicine.

Diagnosis and Treatment:

The Unani system of medicine places significant emphasis on diagnostic methods such as Nabz (pulse), which involves assessing the rhythmic expansion of the arteries through palpation by the physician's fingers. Additionally, examination of Baul (urine) and Baraz (stool) are utilized as diagnostic tools.

In the Unani system, various treatment modalities are employed, categorized into four main lines of treatment:

1. Ilaj bi al-Tadbeer (Regimental Therapy): This includes a range of therapeutic interventions such as venesection, exercise, cupping, diaphoresis (sweating), diuresis (increased urine output), Turkish bath, massage, cautery, purging, emesis, leeching, among others.
2. Ilaj bi al-Ghiza (Diet Therapy): This approach aims to treat specific ailments by administering tailored diets or regulating the quality and quantity of food intake.
3. Ilaj bi al-Dawa (Pharmacotherapy): This involves the use of naturally occurring drugs derived from plant, animal, and mineral sources for treatment purposes.
4. Ilaj bi al-Yad (Jarahaat or Surgery): Surgical interventions are employed as part of Unani practice, utilizing specific instruments and techniques. Abul Qasim Zahravi (936-1036 AD) described various devices in his book *Al-Tasreef*, which laid the foundation for the invention of many modern surgical instruments.

These treatment modalities within the Unani system offer a comprehensive approach to healthcare, addressing a wide range of medical conditions through a combination of therapeutic interventions tailored to the individual patient's needs.^{17, 18, 19}

Conclusion

The Unani System of Medicine enriched itself by incorporating new medicines, techniques, and treatments from various cultures and medical systems with which it came into contact. In India, the Unani System of Medicine has a rich, continuous history and is taught and practiced in a highly developed form. Since independence, the Government of India has provided increasing support and funding for the comprehensive development of Unani Medicine, leading to significant advancements in education, research, and healthcare within the system. India now stands as a global leader in Unani Medicine, with ongoing efforts to scientifically validate its efficacy and promote it worldwide in response to growing international interest.

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