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## Intervention of regimenal and pharmacotherapy in the management of saher (Insomnia)

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#### Abstract

Sleep has restorative function and is important for conservation of energy and growth on the other hand insomnia is a disease characterized by inadequate quantity or quality of sleep. Here mentioned and discussed importance of sleep and basic concepts of insomnia, its pathogenesis, sign-symptoms and injurious effects our health from holistic point of view supported by modern perspective insomnia is considered as a multi factorial in etiology, but primarily manifests as a result of the imbalance in the temperamental quality of the brain due to yaboosat wa hararat and secondarily due to some other medical or mantle illness in Unani system of medicine. There are four known methods of treatment viz regimenal therapy, dieto therapy, pharmaco therapy and surgery. We have described several important mods of regimenal therapy like massage annotation, Hammam, arrigation, Taghreeq and exercise as well as popular Unani pharmaco therapy recorded in authentic and reliable Unani literatures to reduce or eradicate the symptoms and complications.

**Keywords:** Saher (Insomnia), Regimenal therapy, Hararat, yaboosat

#### Introduction

Sleep is defined as a state of unconsciousness from which a person can be aroused where the body rests, however the brain remains active, gets recharged, and still control many body functions. It is one of the basic necessities of life such as air, food and water etc for every animal species from insects to mammals. In other words, we can say that sleep has a restorative function and is important for conservation of energy and growth.

In Unani Medicine much importance has been paid to the state of *Naum wa yaqza* (Sleep & Awakening), as one out of the (six essential factors) *Asbabe Sitta Zarooriyah of life*, which works throughout the life dormitorily in every individual. As per the doctrine of this system of medicine, health is attributed to the equilibrium of *akhlat* (Humours) in the body, while disease is due to the quantitative and qualitative disequilibrium of it. A part form this, a liaison of diseases with *Asbabe Sitta Zarooriyah* (six essential factors) viz *Hawa* (air), *Makoolat wa Mashroobat* (foods & Drinks), *Harkat wa Sukoone badni* (Physical movement & Rest), *Harkat wa Sukoone nafsani* (Mental Movement & Rest), *Naum wa Yaqza* (Sleep & Awakening), *Ihtebas wa Istifragh* (Retention & Evacuation), were also established.

Insomnia is a disease characterized by inadequate quantity or quality of sleep i.e., cannot fall sleep or stay asleep. Insomnia was anglicized as *insomnie*, a term derived from Latin "Insomnis" which is composed of "in" means "not" and "somnus" means "sleep" which means "want of sleep". Several scholars like, Ibne sina, Akbar Arzani, Ismail Jurjani and Azam khan have described *saher* (Insomnia) and stated its definition, causes, clinical features and complications in their books.

According to Ibn Sina, the excess of awakening is known as *saher* (insomnia). Ismail Jurjani says that sleeplessness and excessive awakening are called *saher*. Azam Khan defined it as Insomnia means excessive awakening, and the causes is due to simple heat and dryness in brain, and also due to *saфра* (bile), *Sauda* (black *bile*) and *balgham shor* (morbid phlegm).

#### Etiopathogenesis

This disease is considered as a multi factorial in etiology. but primarily manifests as a result of the imbalance in the temperamental quality of the brain due to *yaboosat wa hararat* and secondarily due to some other medical or mental illness. Unani physicians have mentioned a number of etiological factors of insomnia as follow.

*Hararat wa yaboosat sada*, *ghalbae saфра wa sauda*, *rutoobat boriqi*, *pain*, *naffakh ashiya*,

khauf, fikr, sauode bukharate yabisa. sinne shaikhukhat. kasrate imtila, saudavi warm. badahazmi I, balgham shor, fasade khoon, card iac, mental and liver diseases, excessive study and johare dimagh ki yaboosat etc [1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11].

According to Unani doctrine, normal sleep will occur because of a particular rutoobat but each and every rutoobat is not responsible for inducing sleep. It is the only yaboosat which is responsible for deranging the brain temperament as a result disequilibrium of naum (sleep) will occur, leading finally to saher. The probable under laying mechanism of saher is likely be due to the disequilibrium of the *Naum wa Yuqza* that changes the temperament of the normal sleep inducing substance (rutoobat) which is moist in temperament becomes dry, and this dryness wide spreads and dominates the brain [9].

### Symptoms

Subjective feeling of delayed sleep onset, disturbed sleep maintenance or persistent non restorative sleep leading to impaired day time functions, day time sleepiness or fatigue, loss of memory, concentration problems and irritability are the core symptoms of insomnia [13].

### Complications

According ing to Baba-e-tib Buqrat (Hippocrates), saher produces ikhtelat (disorientation) and *tashannuj* (spasm)<sup>8</sup>. Razi with reference of Jalinoos (Galen) described as, moderate sleep produces *dame mahmood* (good quality of blood), excessive sleep impairs humours, and inadequate sleep is responsible for akhlata safrawi / *merari* (*biliou abnormal humours*) and fatigue increases *hiddate safra* and produces pure black bile.

Severe sleeplessness stops Nuz'j of food and drinks, enfeebles due to excessive *tahullul*, and produce dryness in the body and excessive sleep makes body flabby and produces heaviness in head [14].

Inadequate sleep leads to the excess resolution of rooh and *Hararat ghareezi*, impairs digestion and thereby decreases production of blood and rooh [15].

### Usoole Ilaj Wa Ilaj

Unani system of medicine has described a well-organized Unani treatment in the management of diseases. The management of *saher* is done under following headings as prescribed by Unani physicians.

Izala Sabab (Removal of cause): On priority basis, emphasis should be given to remove predisposing, precipitating, perpetuating factors of the disease such as avoiding of

- Alcohol consumption, tea, coffee, smoking etc especially in the evening [6].
- All those items that are moallide safra, sauda and balgham shor such as salty and astringent food items [3, 5].
- Heavy and strenuous work [5].
- Excessive study [6].
- Excessive harkate badni wa nafsani.

Tadeel e mizaj (Correction of yaboosate dimagh):

- Ilaj bil ghiza (Dietotherapy)
- Ilaj bit Tadbeer (Regimenal Therapy)
- Ilaj bid dawa (Pharmacotherapy)

### Ilaj bi1 Ghiza

Every mizaj has its favorable food which is very proximal to its own, similarly contrary diets age harmful for mizaj.

Unani physicians prescribed murattibe and barid diets in the management of *saher*.

### Ilaj bit Tadbeer (Regimenal Therapy)

According to Ajmal Khan, Tarteebe dimagh (moistening the brain) by natool, suoot, tadheen and hammam is very effective in various types of *saher*.

Following regimes help in removing heat and dryness from the brain and body and thereby induce sleep.

*Tadheen (annonation)*: Applying oil over the parts of the body is termed as tadheen. Tagheen (anoint) of Roghan kaddu, Roghan Khashkhash, Roghan laboob sabaa, Roghan kahu over the scalp recommended for removing *saher* [2, 5].

*Hamman*: Moatadil Hamman is useful in saher, particularly after digestion. Razi recommends sweet and lukewarm water for insomniacs. Murattib Hamman also very effective for removal of dryness of brain [5, 9, 8].

*Natool (Irrigation)*: A watery preparation like decoction, Infusion, oil or solution, either hot or cold in state, is poured from a particular distance over affected parts of the body to cure disease called Natool.

Natoolate murattiba prepared with banafsha, neelofer, gule surkh, tukhme kahu, kishniz sabz, post and tukhme khashkhash and shaeer (barley) are very effective.

Above-mentioned drugs including tukhm khatmi and khubbazi can also be used as natool.

Natool aabe shibbat sabz (Anethum sowa) is also use as natool [5, 6, 10].

*Dalk* (massage): Dalk with roghane qinnab or Roghane kaddu or Roghane banafsha or Roghane badam over soles or roghane neelofer over legs induces sleep. Massage of head with roghane kaddu, roghane kahu and roghane khiashkhash (each in equal amount) at night induces sleep [5, 9].

*Taghreeq*: Moistening of organ with liquid drugs is known as taghreeq. Moistening a cloth by soaking in sheere dukhtar (milk of woman having female baby) and keeping over scalp [7].

*Riyazat (Exercise)*: Riyazat is also sometime helpful in inducing sleep. It should be light not vigorous [5].

### Ilaj bid Dawa (Pharmacotherapy)

- Jozmasal (Thorn apple) in small dose induces moderate sleep [5].
- Sharbat Khashkhash [5, 7].
- Roghane kok, Roghane kaddu, and Roghane laboob sabaa are effective in *saher* [3, 11].
- Zemad khawab aawer or almunawwim and zemad munawwim are very useful as paste on forehead [3, 11].
- According to Ibne Sina Kuhal munawwim is excellent for saher [9].
- Sharbate banafsha, sharbate khashkhash and sharbat kahu [5].
- Opium is very useful for those insomniacs, who have lost their powers due to saher, opium induces sleep and there by restores lost powers [14].

### Conclusion

Regimenal therapy is one of the oldest and most attractive methods of treatment for human ailments. In traditional system of medicine particularly in Unani massage and natool are commonly suggested in a number of musculoskeletal, neurological and psychosomatic disorders such as luqwa (Bell's palsy), falij (Hemiplegia, paraplegia, quadriplegia), muscular weakness, hemiparesis, wajaul mafasil, osteoarthritis, Rheumatoid arthritis Irqunnasa (Sciatica) malakholia (melancholia), saher (insomnia), Suda (Headache), Ikhtenaqur reham (hysteria) and tashweesh (anxiety and depression) etc. From above discussion it is clear that regimenal therapy may be used effectively for the

regimenal of various disorders particularly psychosomatic diseases viz insomnia. Where medical treatment is of less value and patients become habitual also. Regimenal therapy can be applied for the restoration of normal health. Hence it is the dire need of present era to develop standard scientific parameters so that the usefulness of regimenal therapy and Unani pharmaco therapy can be proved in a rational and logical ways.

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