Introduction

Unani system of medicine is an ancient system of medicine which is providing holistic way for the management of diseases. According to Unani system of medicine, depression is not entitled as a separate entity, it is entitled as group of symptoms of malenkholiya. Depression is most common and most serious mental (nafsivati) health problem affecting all age groups irrespective of gender, community, religion throughout the world. It is characterised by persistent sadness, loss of interest in daily activities that a person normally enjoys, accompanied by an inability to carry out daily activities for at least two weeks. In addition, there may be a loss of energy, a change in appetite, changes in sleeping pattern, anxiety, reduced concentration, indecisiveness, restlessness, feeling of worthlessness, guilt, hopelessness, thoughts of self-harm and committing suicide [1]. According to report of WHO, prevalence of depression is 5% in general population. More than 300 million people are suffering from it. It is increasing mortality and morbidity rates and also playing important role in increasing the overall global burden of diseases on health care facilities. It is growing very rapidly, now involving even the children. Females are extra prone to this and its prevalence is about twice in women than men. It is the fourth leading cause of disability worldwide and produces suicidal tendency. Suicide is the second leading cause of death among adolescents by itself. It is responsible for about 8,50,000 deaths every year [2–4]. According to conventional system of medicine, depression is classified into two types i.e. unipolar and bipolar depression. Unipolar depression is very common and affects nearly 75% of cases, in which mood swings are always unidirectional.

Concept of depression and its management in unani system of medicine: A review

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Abstract

Depression is the most common and most serious mental health problem affecting all age groups, genders, communities throughout the world. It is increasing very rapidly day by day. It is characterised by persistent sadness, and a loss of interest in daily activities that a person normally enjoys, accompanied by an inability to carry out daily activities for at least two weeks. In addition, there may be a loss of energy, a change in appetite, changes in sleeping pattern, anxiety, reduced concentration, indecisiveness, restlessness, feeling of worthlessness, guilt, hopelessness, thoughts of self-harm and committing suicide. According to WHO report, prevalence of depression is about 5% in general population. Currently more than 300 million people are suffering worldwide from it. It is the fourth leading cause of disability worldwide. Suicide is the second leading cause of death among adolescents suffering from depression. In Unani perspective, depression is not a disease rather it is a symptom or a group of symptoms of Malenkholiya (Melancholia) in which the mental functions of the individual are disturbed leading to constant grief, fear and uncertain aggression. The patient finds himself/herself isolated and occupied, feels lonely and some patients experience delusion and hallucinations. There is also a change in feelings, mood and behaviour of patient. At times patient becomes overanxious and his thoughts and thinking process gets disturbed. Person suffering from Malenkholiya becomes easily irritable, prefers loneliness and is fearful of usual things. There are a number of factors responsible for depression but Unani scholars consider Ghair Tabayi Sauda (Abnormal black bile) as the main cause of psychological and psychiatric disorders such as anxiety, depression, etc. There are different regimens in Unani System of Medicine (USM) for correction of psychiatric disorders (depression) such as Ilaj-bit-Ghiza (diethotherapy), Ilaj-bit-tadabeer (regimenal therapy), Ilaj-bit-Dawa (pharmacotherapy or medicinal therapy).

Keywords:
Depression, malenkholiya, unani system of medicine, dalak (massage)
It occurs with symptoms of anxiety and agitation, shows a nonfamilial pattern and closely related to stressful life events. Bipolar depression is not as much common (about 25% of cases), shows a familial pattern, appears in early adulthood and usually has no relation with external stress. In this type, mood swings are bidirectional and results in swinging depression and mania over a period of a few weeks [3]. The exact aetiology of depression still remains unclear, but the most popular theory is the decrease in the neurotransmitter levels in the brain such as norepinephrine, 5-hydroxytryptamine (5-HT) / serotonin and dopamine [3].

According to Unani system, there are a number of etiological factors involved in causing depression such as amenorrhoea, congestion of pile’s blood, congestion of epistaxis blood, stoppage of saudawi vomitus, and over thinking [6]. But Ghair Tabayi Sauda (Abnormal black bile) is the main cause of psychological and psychiatric disorders e.g. anxiety, depression, melancholy etc [7-10]. It may be produced by Ehiteraq (combustion) of Dam (blood), Balgham (Phlegm), Safra (Yellow bile) or Sauda (black bile) itself [11, 9]. Ibn-e-Sina in his famous book Al-Qanoon fi-Tibb, has stated that the Mizaj (temperament) of Khilt-e-Saudawi (Black bile) is Barid Yabis (cold and dry) which is opposite to the Mizaj of Rooh-e-Dimaghi (temperament of mental/vital spirit) hence resulting in derangement of Rooh-e-Dimaghi and leading to Khauf (Fear) [9].

When Malankhliya is in its initial stage, its sign and symptoms are less severe, therefore easily treated; However as it advances the sign and symptoms grow more severe which becomes difficult to treat [10, 6].

The psychiatric disorders are discussed comprehensively in Unani classical literature under the title of “Amraaz-e-Nafsani” (psychiatric disorders) [4, 12]. In Unani classical manuscripts depression is not stated as an individual disease entity but is mentioned as a symptom or group of symptoms of Malankhliya (Melancholia) in which the mental functions of an individual are disturbed leading to constant grief, fear and undefined aggression. The patient finds himself/herself isolated and occupied by loneliness and some patients even experience delusion and hallucinations [8, 7, 4]. According to Unani scholar Najeebuddin Samargundi, Malenkhiyo is a disease in which there is a change in feelings, behaviour and mood of patient. At times patient becomes overanxious and his thoughts and thinking process gets disturbed. Person suffering from Malankhliya becomes easily irritable, prefers loneliness and becomes fearful of usual things [10]. According to Shaikh Ibn-e-sina, initial symptoms of Malankhliya (depression) are wrong thoughts, fear for no reason, quick arousal of anger, preference for loneliness, palpitation, giddiness, and tinnitus etc. [13]. Hakeem Mohammad Kabeeruddin, in his book Al-Akseer-e-Azam quoted Shaikh Ibn-e-Sinas view, that depression will surely affect the heart (qalb), so special care of heart should be taken while treating depression.

Ilaj Bil Ghiza is basic treatment methodology in Unani system of medicine. Unani doctors often suggest diet-therapy as the first line of treatment or as adjuvant therapy with other modalities of treatment. Unani scholars have been practising this therapy for prophylactic purposes, in preservation of health, for therapeutic purposes and for the treatment of diseases since ancient times. Dieto-therapy is mainly emphasised for the prevention and treatment of cardiovascular, gastrointestinal, hepatobiliary, renal, skin, sexual, endocrinical and nervous disorders (depression). Before pharmacotherapy, Unani physicians advise restriction or alteration in daily diet, accustomed according to disease, and wait for a few days because some diseases can be cured even with diet. During the treatment, specific diets are advised according to disease. Unani medicine is very popular for the prevention of diseases like gastric ulcer, hepatitis, ischaemic heart disease, hypertension, diabetes mellitus, sexual debility, renal stones, vitiligo, psoriasis and paralysis through its dieto-therapy [14].

Following diets are recommended for the patients of depression

Hulwan, easily digestable diet, Chaza murgha, Farbah murgha ka shorba, palak (spinach), kaaddu (pumpkin), roghan badam (almond oil), Ma-us-shaer (barley water), cow curd, faloodah, murbba apple (Apple jam), murrabba petha (ash gourd jam), murrabba turanj, murrabba pineapple, gajer (carrot), shaljam (turnip), chukander (beet root), kharboooza (melon), tarboooza (water melon), kheera (cucumber), angeer (grapes), anar (pomegranates), saib (apple), amrood (guava), kishmish (currant), Badami (almond), toot (mulberry), anannas (pineapple), sareefa (thorne apple) [15].

As dryness of brain is the main cause of depression by abnormal black bile (due to cold and dry temperament of black bile) and these foods provide nutrition, produces ratoobat (wetness) in the body and removes dryness, therefore are very beneficial in the management of depression. Also, since brain and heart are always pathologically involved in this condition, incorporating murabujetat ensures strengthening of nervous system, cardiovascular system, etc. and exerts antioxidant effects; therefore, forms an integral part of the management of depression.

Following diet is to be avoided in the patients suffering from depression

Food such as daal Masoor (red lentils), karam kulla, bengan (brinjal), soya, methi (fenugreek), gandna, lahsun (garlic), piyaz (onion), khardal, bakla, khushk goshit (dry meat), nai sharab(new wine), salty and sour things, cow meat, camel meat, wild animal meat, dry cheese, etc. should be avoided in patients suffering from depression as their use will further increase dryness in body by increasing hararat and yaboosat (heat & dryness) eventually worsening the condition.

Day to day activities to be avoided/restricted

Hard work, anger, worry, grief, darkness, bedari (wakeupfulness), tanhai (loneliness), bekari (unemployment), bhook piyas (hunger and thirst), kasrat-e-mubashrat (excessive coitus), and all other actions/activities which produces dryness and hotness should be avoided [15].

Usool-E-ILAJ (Principles of Treatment)
The line of treatment for depression as described in classical texts of Unani medicine is as follows:

1. Nafsiyati Tadabeer
2. Tanqiya-e-Mawad and Tarteeb
3. Taqwiyat-e-Qalb

Nafsiyati Tadabeer

It includes those measures (Tadabeer) which produce calmness and happiness by diverting mind through adaptive changes, and diverting methods are the basic principle of treatment to make patient relaxed and happy. Adaptive changes include living in clean and well ventilated house, which has ample supply of fresh air, wearing white or pastel shades, ensuring comfort and entrusting the patient with some
responsibility. Diverting methods include visiting hill stations and parks, seeing plays, hearing enjoyable music, being in company of religious people, listening religious talks and motivational stories, reading books, inculcating hobbies etc.

Tanqiya-e-Mawad and Tarteeb
Tanqiya-e-Mawad means evacuation and excretion of affected (abnormal) humour either through use of munzijat (concoctives) and mushihlat (purgatives), or by fad (phlebotomy). Evacuation and excretion of Ghair Tabai Sauda (pathological melanchole) through Munzijat (concoctive) and Mushihlat (purgatives) followed by Tarteeb (moisturizing) is the second line of treatment for psychological disorders. Tarteeb is always essential after Tanqiya, to check and reduce the dryness, produced by Tanqiya. Ibn-e-Sina has stated that due attention must be paid towards Tarteeb-e-Mizaj (moisturizing the temperament) in cases of Malenkholia and sleep is an important and integral part of the treatment because it produces Rotoob (moisture) in the brain.

Tarteeb (Wetness): The measures which increase the wetness in body are called murattib and process of producing wetness is known as tarteeb. Maul-jubn, jawakeh (fruits), massage with Roghan Kahu, Roghan Kaddu, Roghan Banafshan, Khashkkhash, milk, listening to pleasant songs and poems, etc produces tarteeb. Maul-Jubn is a good murattib (moisturiser) amongst these.

Khoob Sulana (Inducing Sleep): adopting measures to promote sleep are very beneficial in the management of depression because sleep increases wetness which elevates the moisture content of the body thereby helping to eradicate ghair tabai sauda.

3. Taqwiyat-e-Qalb
Muqawwi dimagh (brain tonics) and Nafsiyati tavil (psychological measures) are also helpful in control of depression.[15, 16]

Taqwiyat-e-Qalb (Strengthening Heart): According to Shaikh Ibn-e-Sina malankholiya cannot occur without the pathological involvement of heart, so special care of heart should be taken in the following one or more ways:

Use of Mufarrehad (Auxillarants)
Inhalation of Murattib khushbu (Pleasant perfumes) 
Inbasat (Relaxation)
Istrahat (Rest)
Tafreeh (Enjoyment)
Istrifagha Sauda- by maul-jubn, and ayarijat Tarteeb (moisturising)
Increasing the moisture content of the room
Adopting procedures such as Hammum, balanced diet, dalak (massage), and riyazat (exercise)[16]

Discussion and Conclusion
Depression is a most common, incapacitating, life threatening mental disorder which affects not only the affected person but also his/her family and society as well. Every person faces depression at some point in his life. It is one of the greatest leading causes of disability and suicide worldwide. Although effective medications are available in conventional system, long term use and adverse effects produced by their use may not be ignored. Unani system of medicine is enriched with different regimes, which play an important role in the management of depression and other psychological problems with no side effects. These are non-invasive and cost effective. In text of Unani these are strongly advocated in psychological problems. Many studies also show their effectiveness in depression and other psychological, neurological, cardiovascular disorders etc. Therefore, validating the theory of Unani scholars and its importance.

References
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