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Review

Siman Mufrit: Concept, Pathophysiology and Management in Unani System of Medicine, A Review

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Abstract

In Unani literature obesity is termed as *siman mufrit* and *farbahī* by Unani scholars. *Siman Mufrit* is classified as a *balghamī* (phlegmatic) disease. Literally *siman mufrit* means excess of *shaḥm* (fat). Excess of *shaḥm* is due to *burūdat* (coldness) and *rutūbat* (wetness). The factors which increase the *burūdat* and *rutūbat* in the body are cold foods and drinks, cold medicines, rest, sleep, excess of food, moderate degree of pleasure, *ḥammām* especially after meals etc. According to *Jālīnūs*, *farbahī* is caused either due to innate cold temperament or due to excessive adoption of *bārid tadābīr* (cold regimens). He mentioned that, the *māddī* (material) cause of excessive body fat is presence of *dusūmat* (viscous substances) in blood and *fa 'ila* (active) cause is burūdat due to which *dusūmat* of blood, solidifies and gets deposited in the form of *shaḥm*. Almost every great Unani scholar has devoted some pages to this old age enemy in their classical texts. They have given detailed description and discussion of *siman mufrit* and its various pathological conditions, pathophysiology along with its management.

Keywords: Siman mufrit; Shaḥm; Māddī; Fa'ila

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Introduction

The synonyms used by different Unani scholars in their treatises for obesity are: Siman mufrit, motāpā, and afrāt-i-farbahī [1]. Siman mufrit (obesity), as a health problem got attention of great Unani scholars since ancient time. Siman mufrit (Obesity) is an oldest recognized disease in Unani system of medicine. The very first, it was Hippocrates (Bugrāt, 420 BC) who gave detailed description of obesity in his famous book "Fasūl-i-Buqrātia". Moreover, he was the first Physician who realized the dangers of obesity. He stated that 'sudden death is more common in those who are naturally fat than in the lean'. He correctly identified the energy balance equation. He said that it is very injurious to health to take more food than its requirement, when, at the same time one uses no exercise to carry off this excess [2,3]. Almost every great Unani scholar has devoted some pages to this old age enemy in their classical texts. They have given detailed description and discussion of siman mufrit and its various pathological conditions, pathophysiology along with its management.

Siman mufrit; concept

Literally *siman mufrit* means excessive of *shaḥm* (fat). Excess of *shaḥm* is due to *burūdat* (coldness) and *ruṭūbat* (wetness) [4]. *Siman Mufrit* is classified as a *balghamī* (phlegmatic) disease. The *mizaj* (temperament) of *balgham* is *bārid-ratab* (cold-moist) and predominance of *kḥilt-i-balgham*, increases the *burūdat* and *rutūbat* in the body. Thus, dominance of *balgham* in the body is considered as a predisposing factor for obesity.

It occurs due to excessive deposition of *shaḥm* (fat) as the *mizāj* (temperament) of *shaḥm* is *bārid* (cold) hence dominance of *burūdat* (coldness) in the body occurs. So a vicious cycle is likely to be started in the body as *bārid mizāj* (cold temperaments) will lead to deposition of *shaḥm* and deposition of *shaḥm* will lead to fur-

ther *burūdat* (coldness) in *mizāj* (temperament) [5,6].

Etiology according to Unani system of medicine • Bārid mizāj (cold temperament): Bārid mizāj people are at higher risk of getting obese. Due to barīd mizāj (cold temperament) oily constituents of dam (blood) tend to deposit in the form of shaḥm (fat). Khilt-i-balgham (phlegm humour) predominates in the body of Bārid mizāj people and hence it is considered as the predisposing factor in the causation of siman mufrit (obesity). Ancient hakims have correlated barīd mizāj and siman mufrit [7].

- *Varāsatī* and *Khalqī Asbāb* (hereditary and congenital causes): The chance of development of obesity is higher among people with a family history of obesity.
- •*Rāḥat* (excessive rest and lack of exercise): This causes more input of energy than expenditure/output resulting in storage of extra energy in the form of fat.
- •*Kathrat-i-ghidhā'* (excessive eating) especially *muraghghan ghidhāyen* (oily foods).
- •Sarwat wa Ghina (luxurious lifestyle)
- •Soft clothes and soft bedding for sleeping
- •Farhat (excess of joy) and
- •Intake of excessive alcohol especially after meals [5,7,8,9,10,11,12].

Before starting the pathophysiology of *Siman mufrit* (obesity)in Unani system of medicine, we should know about the concept of *shaḥm* (fat) in Unani system of medicine, as *Siman mufrit* means excess of *shaḥm*.

Concept of shaḥm (fat) in Unani system

There is detailed description about origin, constitution, functions, benefits, harms of fat in classical Unani literature. Ancient Unani scholars have described fat under heading of *shaḥm* and they have also described different types of *shaḥm* (fat).

Many Unani scholars considered that shaḥm

(fat) is the end product of metabolism of food and referred as *nuḍj fāzilā* (metabolic waste product). After metabolism it reaches to different organs of the body and provides nutrition [5,13,14]. *Ibn Rushd* has said *shaḥm* (fat) as end product of *pukhtā dam* (mature blood) which provides nutrition to the organs and presence of *shaḥm* (fat) in *a'atdāl* (appropriate amount, moderation) is the sign of good health and nutrition [13].

Ibn Sīnā had described types of shaḥm, according to him, *shaḥm* is of two types: *Samīn* and *Rawāi*

- (a) *Samīn* which is liquid at normal body temperature and
- (b) *Rawāj* which is solid at normal body temperature [5,15].

In *kāmil al-Ṣanāʿa*, *Majūsī* has also described mainly of two types of shaḥm: *Samīn* and *Widak*. These form covering over the vessels and nerves. First these are formed in blood, then they move towards those organs which possess *bārid mizāj* (cold temperament) and get absorbed to them due to the similarity in their temperament that is why most of the fatty deposition occurs at *ṣurb* (omentum).

Samīn is a thin fat which is attached on muscles. Widak is another type of shaḥm (fat) present between the muscles and is thicker than Samīn. They are very helpful to those organs which possess hār and yābis mizāj (hot and dry temperament) for their normal functioning [5,16,17].

Jālīnūs has said in his famous book Kitāb fil mizāj that there are two types of fat; shaḥm and Samīn (a type of thin fat).

M. kabīr al-Dīn has mentioned that shaḥm and Samīn are white and full of rughnī māddā (oily substances). It is usually found in membranes. He has also quoted with the reference of Abū Sahl Masīḥī and Ibn Nafīs that Samīn is a type of shaḥm (fat) which is soft and having less ability to get solidified [6].

According to Ibn rushed, fat is of two type: shahm – thick fat and $sam\bar{\imath}n$ – thin fat And he has said that $m\bar{a}dd\bar{\imath}$ (material) cause for both is $rughn\bar{\imath}$ $ajz\bar{a}$ (oily constituents) of dam (blood) hence confirming their wet temperament [13].

Pathophysiology of Siman mufrit

As mentioned above, obesity is termed as siman mufrit and farbahī by Unani scholars [1]. Literally, siman mufrit means excess of shahm (fat). Excess of shahm is due to burūdat (coldness) and rutūbat (wetness). The factors which increase the burūdat and ruṭūbat in the body are cold food and drinks, temperamentally cold medicines, rest, sleep, excess of food, moderate degree of pleasure, hammām (sauna) especially after meals etc [10]. According to Jālīnūs, farbahi is caused either due to innate cold temperament or due to excessive adoption of barid tadābīr (cold regimens). He mentioned that, the māddī (material) cause of excessive body fat is presence of dusūmat (viscous substances) in blood and fa'ila (active) cause is burūdat due to which dusumat of blood, solidifies and gets deposited in the form of shahm. This deposition of fat occurs only in barid a'da' or when an organ's *mizāj* is altered towards *burūdat* [7]. According to Ibn Nafīs, the dusūmat present in the blood, is of two types lattf and kathtf: the latīf (lighter) part of dusūmat is metabolized into ghidhā (nutrition) and tab'ī ḥarārat (energy) of *lahmi a'dā'* (muscular organs) whereas; the *kathīf* (heavier) part goes towards the *barīd* $a'd\bar{a}'$ (organs) or aghshiya (membranes) where it is solidified due to the burūdat (cold) and deposited in the form of shahm (fat) [1].

Line of treatment (*Uṣūl-i-ʻilāj*) in Unani system of medicine

The treatment of *Siman Mufrit* is based on the following principles:

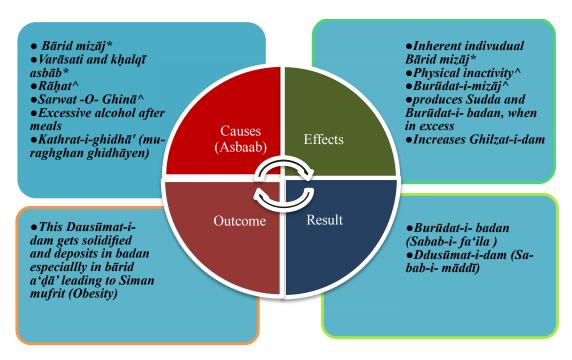


Figure 1. Graphic Presentation of Pathophysiology of Siman mufrit

- 1.Correction of the *sū'-i-mizāj*.
- 2. Elimination of the existing causes.
- 3.Use of advia mulattifa [5,18].
- 4.Adoption of those $tad\bar{a}b\bar{\imath}r$, which produce $har\bar{a}rat$ (hotness) and $yub\bar{u}sat$ (dryness)in the body like
- a.Use of *mu'arriq adwiya* (diaphoretics)
- b.*Ḥammām yābīs*
- c.Massage with $h\bar{a}r$ and muhallil (Resolvent) oils like roghan qust, roghan soya etc.
- d. Taqlīl ghidhā (Dietary restrictions)
- e.Use of *hār* wa *muḥallil* (Resolvent) drugs like falafali, dawaul luk etc.
- f. Rivādat kathīra (Vigorous exercise).
- g.Stay in hot and dry places.
- h.Reduction in sleeping hours [5,12,15,17,19,20]. *Ibne Sina* describes the mechanism of action of above *Uṣūl-i-ʻilāj* in the following three ways:
- 1. They make *raqīq* (less viscous) khilṭ-i-badan (body humours) and decreases the *In'a qād-i-khilṭ* (thrombosis of blood), which is one of the important causes to resists the decrease in viscosity of blood.
- 2.By ishāl (diarrhoea/purgation) and idrār (di-

uretics/ emmenagogue), the excessive *Akhlāt* (humour) are removed from the vessels, so the pressure in vessels is decreased and hence *tamaddud* is improved which retains vascular flexibility (vasodilatation).

3.By producing *hiddat* (hotness/immaturity) in blood, it will not be absorbed in the body and hence load of excessive blood and *kasīf* part of *dusūmat dam* (heavier part of the blood), i.e. fat, will also be decreased in the body [5].

Furthermore, he suggests prescribing an appropriate method which should prevent the absorption of food completely, so that more food particles will be excreted through the stool and urine. For this purpose, *advia mulayyina* (laxatives) are more suitable as *advia mulayyina* decreases the *Quwwat Jaḍhiba* (absorption property) of intestines for the food. So, the drugs which possess actions like *mulattif* (demulcent), *mudir* (diuretics), *mushil* (purgatives) and *mulayyin* (laxatives) are more useful in reducing the obesity [5,15].

Treatment ('Ilāj)

Taking into consideration all the above facts, management of *siman mufrit* can be conveniently summarised into following categories;

- 1. '*Ilāj Bi'l Ghidhā'* (Dietotherapy)
- 2. 'Ilāj Bi'l Tadbīr (Regimenal Therapies)
- 3.*Ilāj Bi'l Dawā'* (Pharmacotherapy by both *Mu-frad dawā* (single drugs) and *Murakkab dawā'* (compound formulations)

Conclusion

The two main causes of modern day's obesity epidemic are; calorie dense diet and sedentary life style. After careful study of available Unani literature about obesity we have concluded that as the described etiological factors of obesity are almost similar to those of modern day's obesity epidemic, so explaining the management of the same can provide a better, safe and cheap option.

Conflict of Interest

None

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None.

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