

Clinical Assessment of *Mizaj* (Temperament) in Patients of COPD

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Abstract

Background: Unani system of medicine is based on the theory of *Mizaj* and *Akhlat* which is considered as the basics of Unani therapeutics. *Mizaj* is defined as the admixture of four humours (*Akhlat*), the quantity and quality of which determines the particular *Mizaj* of an individual. Every individual has its own unique *Mizaj* (temperament), hence reacts to various internal and external stimuli viz. Air, water, diet, drug, climate, emotions, body reactions etc. differently according to temperament. Hence, *Mizaj* plays an important role in diagnosis and treatment of any disease. According to the classical texts of Unani Medicine, it is the concentration, quality and quantity of humours which forms the base and cause of health and disease in an individual. As per Unani doctrine, *Mar'd* (Disease) is caused either due to *Su' Mizaj* (abnormal temperament), *Su'tarkib* (abnormal composition/structure) or *Taffaruk Ittesal* (discontinuity). This study was conducted at Majeedia Hospital, Faculty of Medicine, Hamdard University, New Delhi India to evaluate the *Mizaj* (Temperament) of patients of COPD. Out of 60 patients enrolled for the study, 52 (86.6%) were *Balghami*, 03 (5%) were *Damwi*, 05 (8.3%) were *Safravi* and none was of *Sawdawi Mizaj*. Thus, it was evident that COPD is more common in *Balghami Mizaj* patients.

Keywords: *Mizaj*, Humours, Unani, COPD, *Mar'd*, Temperament.

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1. INTRODUCTION

Chronic obstructive pulmonary disease (COPD) is defined as a disease state characterized by air flow limitation that is not fully reversible and associated with an enhanced chronic inflammatory response in the airways and the lung to noxious particles or gases. COPD include chronic bronchitis and emphysema. Chronic bronchitis is defined clinically as productive cough on most days for at least 3 consecutive months per year for at least 2 consecutive years. Emphysema is defined pathologically as permanent enlargement of air spaces distal to the terminal bronchioles accompanied by destruction of the alveolar walls and absence of associated fibrosis². COPD is the third leading cause of death and affect > 10 million person in United states. COPD is also increasing public health importance around world³. Estimate suggest that COPD will rise from sixth to the third most common cause of death world wide by 2020. The prevalence of COPD is higher in countries where smoking is highly prevalent. The prevalence range between 2 to 22 percent among the men and 1.2 to 19 percent women in different population based studies

across India. As on 2016, three out of five leading causes of mortalities constitute non-communicable disease where as COPD is the second biggest cause of death in India.

Muzmin Tasuddudi Amraze Riya is a term which has been literally translated by the contemporary unani physicians in an attempt to explain the COPD entity applicable to present day etymology while going through unani literature, the term *Muzmin Tasuddudi Amraze Riya* has not been mentioned as such but it can be related to clinical features of *Su'aal barid maddi*, *Su'aal ratab* and *Rabu martoob* as described by Ibne sina, Azam khan, Ajmal khan.

Keeping this in view, the present study was designed to interpret COPD in context of Classical Unani perspective.

1.1 Historical Background

Since the times of Hippocrates, the occurrence of diseases characterized by cough, expectoration, wheezing, dyspnea first on exercise and later on rest has

been known. Classical unani text *Kamil-e-sana* by *Majoosi* mentions Hippocrates used the term *Zeeq-ul-nafas* for breathlessness. *Jalinoos* (Galen) (130-200AD) has mentioned the treatment of the disease. Among the Arab physicians *Rabban Tabri* (770 AD), was the first physician who mentioned the disease *Zeeq-ul-nafas* in his famous book *Firdous –ul-hikmat*. In his book, *Tabri* mentioned that this disease is due to *Ma'ada galeez* which obstructs the airways.

Zakariya Razi (804-932 AD) in his text *Kitab-ul-Hawi* has described in detail that *Zeeq-ul-Nafas* is due to exudation of *Balgham gair tabbaie* from *Qasbat-ul-riya and urooq-e-khashnia* which in turn result in obstruction of airways.

Ibn-e-sina (970-1030 AD) in his famous book *Al-qanoon-fit-tibb* has described in detail *Zeeq-ul-nafas* along its types and related conditions under separate headings, and states that *Zeeq-ul-nafas* is due to *warm-er-riya* and *tangi-tanafus* is either due to accumulation of *balgham-ghaleez* or *warm-e-sulb* of airways.

Jurjani (1140 AD) has mentioned that *tangi-tanafus* is due to congestion of *balgham-galeez*.

In classical unani literature, different terminologies and synonyms has been mentioned like *zeeq-ul-nafas*, *intisab-un-nafas*, *Rabbu*, *Buhar*, *Damma*, *aesma* etc for asthma and difficulty in breathing or respiration.

2. OBJECTIVES OF THE STUDY

The objectives of the study are:-

- To know the *Mizaj* of patients of COPD.
- To evaluate the role of *Mizaj* in the patients of COPD.

3. METHODOLOGY

The study was conducted on a sample size of 60 patients in the Deptt. Of Moa'lajat, Majeedia Hospital,

Faculty of Medicine, Hamdard University, New Delhi. The criteria for selection of patients was by history taking, clinical examination and investigations

3.1. Inclusion Criteria

- Clinically diagnosed patients of COPD.
- Sex-Male, Female.
- Patient age group of 20 to 60 years.
- Willingness to sign the informed consent, follow the protocol and participate in clinical trial voluntarily

3.2. Exclusion Criteria

- Patients below 20 and above 60 years.
- Pregnancy and Lactation
- Diabetes mellitus
- Renal dysfunction
- Patients who fail to give consent
- All complicated cases of COPD
- Gastrointestinal diseases (Peptic ulcer disease)
- IHD and hypertension
- Patients not willing to be enrolled for the study

4. Selection of Cases

The source for selection of cases was the Out-patient/In-patient departments of Majeedia Hospital, Faculty of Medicine, Jamia Hamdard, New Delhi.

5. Consent of the Patient

Before enrolling the patients for the study, every patient was provided a set of specially designed Information Consent Form (ICF) which included all the relevant information about the study with all the options to ask any query regarding the study.

6. Assessment of Mizaj (Temperament)

Temperament of each patient was assessed as per the specially designed questionnaire format prepared by Central Council for Research in Unani Medicine (CCRUM), Ministry of AYUSH, Govt. of India.

PARAMETERS	DAMVI (Sanguine)		BALGHAMI (Phlegmatic)		SAFRAVI (Bilious)		SAWDAMI (Melancholic)	
COMPLEXION	Ruddy (Reddish/wheaty/brown)	1	Chalky (Whitish)	0.75	Pale (Yellowish)	0.5	Purple (Blackish)	0.25
BUILT	Muscular & Broad	1	Fatty & Broad	0.75	Muscular & Thin	0.5	Skeletal	0.25
TOUCH	Hot & Soft	1	Cold & Soft	0.75	Hot & Dry	0.5	Cold & Dry	0.25
HAIR	Black & lusty thick. Rapid Growth.	1	Black & thin. Slow Growth.	0.75	Brown & Thin. Rapid Growth	0.5	Brown & Thin. Slow Growth.	0.25
MOVEMENT	Active	1	Dull	0.75	Hyperactive	0.5	Less Active	0.25
DIET (Most Liked)	Cold & Dry	1	Hot & Dry	0.75	Cold & Moist	0.5	Hot & Moist	0.25

PARAMETERS	DAMVI (Sanguine)		BALGHAMI (Phlegmatic)		SAFRAVI (Bilious)		SAWDAMI (Melancholic)	
WEATHER (Most Suitable)	Spring	1	Summer	0.75	Winter	0.5	Autumn	0.25
SLEEP	Normal (6-8 hrs.)	1	In excess	0.75	Inadequate	0.5	Insomnia	0.25
PULSE	Normal (70-80/min)	1	Slow (60-70)	0.75	Rapid (80-100)	0.5	Slow (60-70)	0.25
EMOTIONS	Normal	1	Calm & quiet	0.75	Angry	0.5	Nervous	0.25

Total =10

Range of temperament in numbers:

Sanguine: 7.5-10; Phlegmatic: 5.10-7.50; Bilious: 2.51-

5.00: Melancholic: 0.00 – 2.50

Damvi

Balghami

Safravi

Sawdawi

7. RESULTS AND DISCUSSION

On assessment of *Mizaj* of patients of COPD by specially designed format, the result showed that out of 60 patients enrolled for the study, 52 patients were *balghami mizaj* (86.6%), 05 patients were *safravi mizaj* (8.3%), 03 were *damvi mizaj* (5%), and none of the 60 patients enrolled for the study was *sawdawi mizaj*. Hence, it became evident that COPD is a *balghami mar'd* (Phlegmatic disease) and it mostly affects people with *barid wa ratabb mizaj* (cold and moist temperament).

Table showing age of patients (%) in COPD N=60

Age(Years)		
	No.	%age
20-30	9	15
31-40	16	26.66
41-50	20	33.33
51-60	15	25
Total	60	100

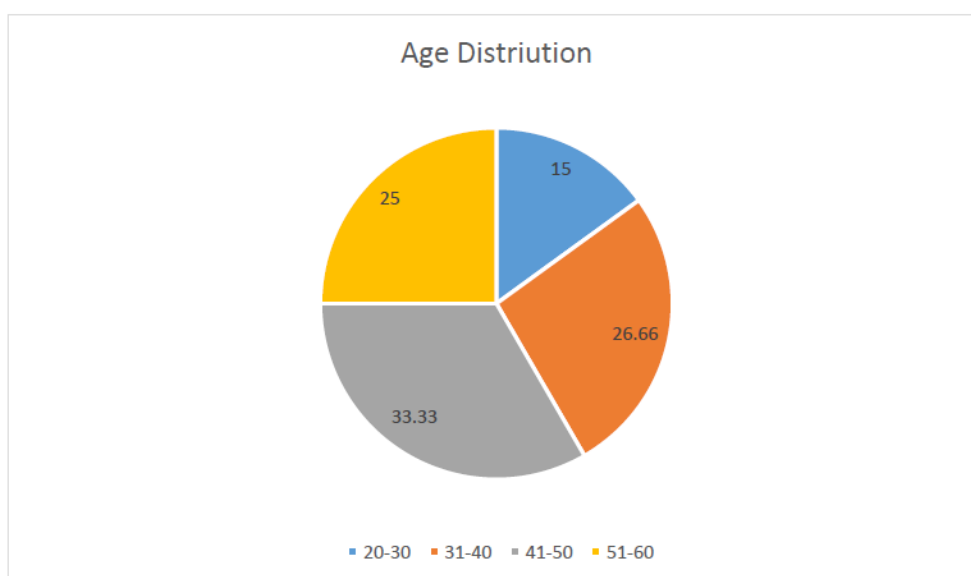
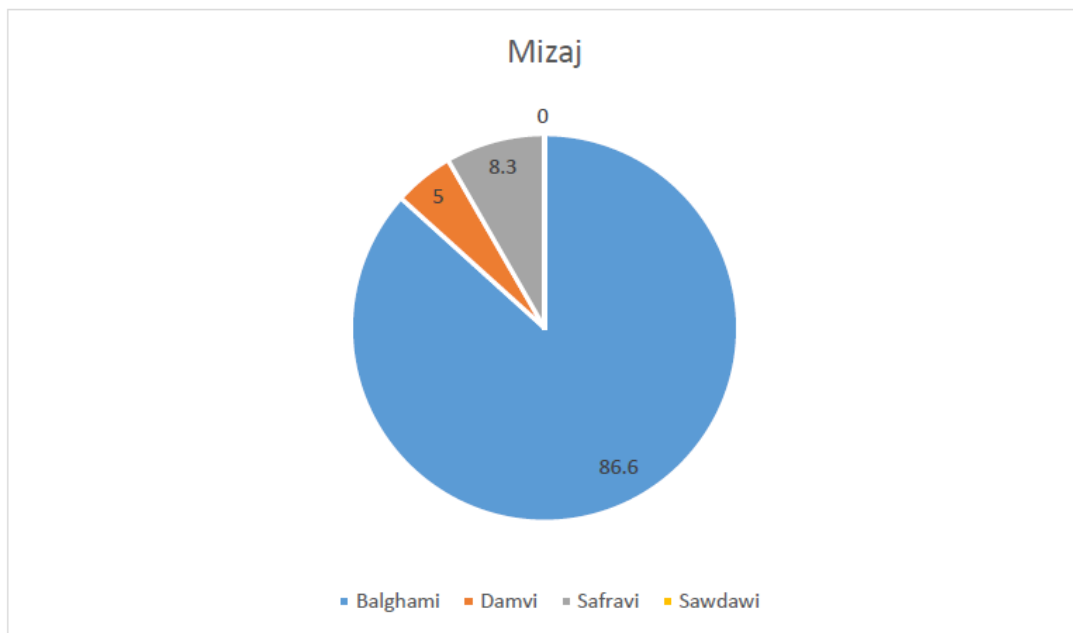


Table showing *Mizaj* in patients (%) of COPD N=60

Mizaj Type	No.	%age
Balghami	52	86.6
Damvi	3	5
Safravi	5	8.3
Sawdawi	0	0
Total	60	100



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