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**Review Article** 

# Management of Musculoskeletal Disorder through Ilaj-bit-Tadbeer (Regimenal Therapy) - A Review

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## A B S T R A C T

Musculoskeletal disorders are very common in today's scenario, affecting daily activities and causing disability to some extent. The Unani medical system takes a holistic approach to the treatment of any disease or ailment. Unani medicine is extremely effective in treating musculoskeletal disorders. Ilaj-bit-Tadbeer (Regimenal therapy) is an important part of the Unani system of medicine for treating various musculoskeletal and psychological disorders by modifying the Asbabe-sitta-zarooriah (six essential factors) of life for maintaining health and disease prevention. Cupping, leeching, inkebab, bukhoor, dalak, nutool, fasd, takmeed, and other modalities of Ilaj-bit-Tadbeer can be very effective in treating a variety of musculoskeletal disorders.

**Keywords:** Unani Medicine, Ilaj-bit-tad beer, Musculoskeletal Disorder, Asbab-e-sitta-zarooriah

#### Introduction

Musculoskeletal pain is a serious public health concern in industrialised nations because of its high incidence and enormous impact in terms of medical expenditures, work incapacity, and reduced quality of life. According to research on both the general and working populations, women have a higher prevalence of musculoskeletal pain than males. <sup>2-13</sup>

MSD symptoms include weakness, discomfort, swelling, and inflammation. The most prevalent symptom of MSDs is pain. It may be accompanied by joint stiffness, muscle tightness, redness, and swelling of the afflicted region.<sup>14</sup>

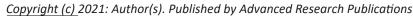
Many studies have found that complementary and alternative medicine (CAM) treatments are beneficial in treating chronic musculoskeletal pain and other symptoms

in the general population. <sup>15,16,17</sup> The phrase complementary and alternative medicine (CAM) refers to medical items and procedures that are not included in mainstream treatment. Ayurvedic, aromatherapy, homeopathic medicine, and naturopathic medicine are all forms of traditional Chinese medicine.

The Unani system of medicine has been involved in the healthcare system since classical times. For the treatment of illnesses, four therapeutic strategies are often used: regimenal therapy, dietotherapy, pharmacology, and surgery. Regimenal treatment is an essential modality, in which morbid matter in the body is expelled out, or its unessential production or flow is prevented, and illnesses are treated by the body's natural healer, restoring humoural stability.

The allopathic medical system has some limits in terms

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of cost and safety, as it is rife with side effects.<sup>18</sup> As a result, regimenal treatments play an important role in pain relief since they are easily accessible, effective, and safe treatments are particular procedures that strengthen the body's defensive system and eliminate waste products (Istifragh-e-akhlat-e radiya). The traditional name for Ilaj-bit-tadbeer is "Molijat-e-Khasusi," which was proposed by the Central Council of Indian Medicine (CCIM) in New Delhi.<sup>19</sup>

# Methodology

There are many modalities in regimenal therapy which can be applied for the management of various musculoskeletal disorders like osteoarthritis, rheumatoid arthritis, frozen shoulder, tennis elbow, golf elbow, carpal tunnel syndrome, sprain etc. This review comprised peer-reviewed journal publications and RCTs that mostly focused on the use of regimenal modalities in joint pain. The phrases Dalak, musculoskeletal condition, joint pain, regimenal treatments, Hijama, massage, Hijamah, cupping therapy, Hijamat, Taleeg, Irsale Alag, Hammam, leeching, fomentation, steam fomentation, sauna bath, irrigation, Takmeed, and Nutool were used for the search. The Unani literature is based on famous Unani treatises such as Razi's Kitab al-Hawi fit Tibb, Ibne Sina's Alganoon Fit Tibb, Akbar Arzani's Tibbi-Akbar, M. Azam Khan's Akseer-i-Azam, Ismail Jurjani's Zakhira Khawarzam Shahi, and Jeelani Makhzane Hikmat Kamil. Several relevant published papers, including reviews and RCTs, were searched utilising the online database.

# **Regimenal Therapies**

Regimenal therapies have been used since decades to eradicate various musculoskeletal disorders.

### Massage (Dalk)

Massage disrupts the pain's vicious cycle, resulting in pain reduction. Massage is used to treat a variety of pain disorders like:<sup>20,21</sup>

- Tendinitis
- Fibrositis
- Muscular damage
- Sprain of a ligament
- Tenosynovitis
- All forms of arthritis, such as rheumatoid arthritis, osteoarthritis, and gout, among others
- Nervous system problems such as sciatica (Irqun nisa), falij (hemiplagia, paraplegia and quadriplegia), neuralgia, facial or bells paralysis (luqwa), and so on
- Musculoskeletal conditions such as cervical spondylosis, frozen shoulder, low back pain, carpal tunnel syndrome (wrist joint discomfort), rheumatism, and so on

The affected area of the body should be massaged gently for a longer period of time for therapeutic purposes. If the discomfort is caused by excessive cold (Galba-e-baroodat), the afflicted area should be massaged with Roghan-e-Nargis/ Rogan-e-Sosan combined with Dhatoora oil, and if the pain is caused by excessive heat (Galba-e-haraarat), it should be massaged with Rogan-e-Hina.<sup>22</sup>

# Cupping

Cupping is a distinct regimenal treatment technique that uses local suction to divert or evacuate diseased materials. Cupping works by pulling blood from the afflicted region to the skin's surface, which lowers or eliminates discomfort. It allows for the removal of 80% of pain-causing chemicals. It alleviates or eliminates muscle discomfort by relaxing spastic muscle fibres, <sup>23</sup> and is used to alleviate pain. <sup>24</sup>

# Fasd (Venesection)

In the contemporary medical system, phlebotomy is now recognised for three diseases: polycythemia vera, hemochromatosis, and porphyria cutanea tarda. Fasd (venesection) is a therapeutic approach that restores temperament and bodily humours by removing illnesses from the body (Tanquiyah-e-Mavad). Renowned Unani experts like Jalinose, Ibn-e Sina, Arzani, and Razi argued for the usage of fasd (venesection) in the treatment of Tahajjur-e-Mufasal-e-Rakbah (knee osteoarthritis). Many pain ailments, including Waja'a-e Qalb (Angina pectoris), Waja-ul Mufasil (Rheumatic arthritis), Irqun Nissa (Sciatica), Zaat-ur-Riya (pneumonia), and Niqras (Gout), require fasd for humour purification. Fast polycythemia vera, and selection is not provided to the content of the content

## Hirudotherapy (Leeching)

Leech treatment is the most effective non-pharmacological pain relief approach. Leech saliva includes anti-inflammatory, anaesthetic, antiplatelet aggregation factor, antibiotic, and gelatinous compounds that relieve pain. Leeches reduce swelling by sucking out excess blood, enabling fresh oxygenated blood to reach the damaged region until normal circulation is restored.<sup>27</sup> Leeching or hirudotherapy is a popular treatment for a variety of painful diseases like:<sup>27-30</sup>

- Haemorrhoids
- Qarooh muzaminah (chronic ulcers)
- Abscesses and boils
- Amraz mufassil (joint problem) such as gout, osteoarthritis
- Dermatitis, ulcers, and other skin conditions

#### **Natool (Irrigation)**

Natool is a fundamental llaj-bit-tadbeer method in which medicinal oil, decoction, or plain water is softly poured over the sick region from a height. This technique is known as "tanteel," or irrigation. It is divided into two types: haar and barid, and is performed in order to produce the required action of medication locally, which may occur via the following three techniques:<sup>31</sup>

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- Morbid matter evacuation (Ikhraj-e-mawad)
- Temperament normalisation of the afflicted organ (Ta'dil-e-Mizaj-e-Aza)
- · Enhancement of Quwat-e-Mudafiat

Natool treatment is particularly successful in reducing stiffness and pain at the afflicted spot, and is utilised therapeutically in a variety of diseases.<sup>31,32</sup>

# Inkibab (Steam/ Vapour Application)

Inkibab treatment involves the application of steam to the affected areas of the body. Several herbal drugs are cooked in a pot in this process and the steam is administered to the body's surface. 33,34 Unani pharmacopoeias have documented a number of formularies that are utilised as inkibab therapy to cure a variety of ailments. Steam and a decoction of Papaver somniferum seeds, Origanum vulgare, Smilax china, Coriandrum sativum, and Viola odorata can be used to treat earache. Earache can also be relieved by steam application of Azadirachta indica leaf decoction. 36

In the case of nonspecific low back pain, Athar et al. found a substantial impact of steam treatment with Butea monosperma flower decoction combined with massage cupping.<sup>33</sup>

# Pashoya (Foot bath)

This regimen involves immersing the foot in a pharmaceutical stew to cure a variety of physical problems. Cases of sleepness and severe headache can be cured by a foot bath in a decoction of barley flour, Acacia arabica leaves, Solanum nigrum, Althea officinalis flowers, Nympha alba flowers, and Viola odorata flowers.<sup>35,36</sup>

# **Dhuni/ Bukhoor (Fumigation)**

This involves burning crude medicines and inhaling the smoke.<sup>35</sup> Other than inhaling, crude drug smoke is sometimes administered to affected areas. Hkm. Shareef Khan suggests spreading sindoor (red oxide of lead) on a paper, burning it, and inhaling the smoke to relieve migraines. Similarly, Atropa belladonna root smoke is effective in the treatment of toothache.<sup>37</sup>

#### Enema (Hugna)

Enema is known as "Amlie Taa'eer" in the Unani system of medicine. It was known as "Moolije Faazila"<sup>38</sup> by Ibn Sena. It is frequently used to alleviate constipation and reduce intestinal discomfort. Enema is used to treat various conditions like constipation, stomach distension, bladder/kidney discomfort etc.<sup>23,39</sup>

# **Exercise**

Exercise is defined as any type of physical exercise that is planned, structured, and repeated in order to preserve physical fitness and overall health. According to Buqrat (Hippocrates), a hungry person should not participate in any exertion or severe work since it creates tiredness. Horseback riding is considered a full workout (Riyazat Haqeeqi or Kulli), whereas stone lifting is considered a half workout (Riyazat Juziya). Weeping is supposed to be a healthy exercise for youngsters, whereas angriness is said to be a good workout for those with a frigid temperament. Exercise boosts the body's resilience to pain by boosting endorphin production, which provides a sensation of wellbeing. <sup>40</sup> Exercise improves pain by boosting blood supply to the afflicted area, which enhances mobility and gives continuity, preventing muscular spasms and contractures. <sup>41</sup>

#### **Conclusion**

As we all know, Ilaj-bit-Tadbeer (Regimenal Therapy) is the foundation of the Unani medical system. These treatments are giving better care in areas where medical treatment is less relevant. These operations or techniques should only be performed by a competent doctor or professional therapist. These techniques have produced excellent results in the treatment of a variety of musculoskeletal ailments. In a nutshell, regimenal treatment has the ability to protect patients against the long-term and short-term side effects of NSAIDS. In order to generate new therapeutic avenues and universal acceptability, detailed research on the action and efficiently designed standard operating procedures of regimenal therapies would assist in the safe and effective administration of these regimens.

# Conflict of Interest: None

### References

- Woolf AD, Akesson K. Understanding the burden of musculoskeletal conditions. The burden is huge and not reflected in national health priorities. BMJ. 2001;322:1079-80. [PubMed] [Google Scholar]
- Natvig B, Nessioy I, Bruusgaard D, Rutle O. Musculoskeletal symptoms in a local community. Eur J Gen Pract. 1995;1:25-8. [Google Scholar]
- Andersson HI, Ejlertsson G, Leden I, Rosenberg C. Chronic pain in a geographically defined general population: studies of differences in age, gender, social class, and pain localization. Clin J Pain. 1993;9:174-82. [PubMed] [Google Scholar]
- Bergman S, Herrstrom P, Hogstrom K, Petersson IF, Svensson B, Jacobsson LT. Chronic musculoskeletal pain, prevalence rates, and sociodemographic associations in a Swedish population study. J Rheumatol. 2001;28:1369-77. [PubMed] [Google Scholar]
- Urwin M, Symmons D, Allison T, Brammah T, Busby H, Roxby M, Simmons A, Williams G. Estimating the burden of musculoskeletal disorders in the community: the comparative prevalence of symptoms at different anatomical sites, and the relation to social deprivation.

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- Ann Rheum Dis. 1998;57:649-55. [PubMed] [Google Scholar]
- Eriksen HR, Svendsrod R, Ursin G, Ursin H. Prevalence of subjective health complaints in the Nordic European countries in 1993. Eur J Public Health. 1998;8:294-8.
   [Google Scholar]
- 7. Bingefors K, Isacson D. Epidemiology, co-morbidity, and impact on health-related quality of life of self-reported headache and musculoskeletal pain—a gender perspective. Eur J Pain. 2004;8:435-50. [PubMed] [Google Scholar]
- 8. Molarius A, Janson S. Self-rated health, chronic diseases, and symptoms among middle-aged and elderly men and women. J Clin Epidemiol. 2002;55:364-70. [PubMed] [Google Scholar]
- 9. Brattberg G, Parker MG, Thorslund M. A longitudinal study of pain: reported pain from middle age to old age. Clin J Pain. 1997;13:144-9. [PubMed] [Google Scholar]
- de Zwart BC, Frings-Dresen MH, Kilbom A. Gender differences in upper extremity musculoskeletal complaints in the working population. Int Arch Occup Environ Health. 2001;74:21-30. [PubMed] [Google Scholar]
- 11. Guo HR, Chang YC, Yeh WY, Chen CW, Guo YL. Prevalence of musculoskeletal disorder among workers in Taiwan: a nationwide study. J Occup Health. 2004;46:26-36. [PubMed] [Google Scholar]
- 12. Eriksen W. The prevalence of musculoskeletal pain in Norwegian nurses' aides. Int Arch Occup Environ Health. 2003;76:625-30. [PubMed] [Google Scholar]
- 13. Picavet HS, Schouten JS. Musculoskeletal pain in the Netherlands: prevalences, consequences and risk groups, the DMC(3)-study. Pain. 2003;102:167-78. [PubMed] [Google Scholar]
- 14. Fish DR, Morris-Allen DM. Musculoskeletal disorders in dentists. N Y State Dent J. 1998;64:44-8. [Google Scholar]
- 15. Graham C. Ergonomics in dentistry, Part 1. Dent Today. 2002;21:98-103. [PubMed] [Google Scholar]
- Guay AH. Commentary: ergonomically related disorders in dental practice. J Am Dent Assoc. 1998;129:184-6. [PubMed] [Google Scholar]
- 17. Rundcrantz BL, Johnsson B, Moritz U. Pain and discomfort in the musculoskeletal system among dentists. A prospective study. Swed Dent J. 1991;15:219-28. [PubMed] [Google Scholar]
- 18. Cook EM, Holey EA. Therapeutic Massage. London: WB Saunders Company Ltd; 1998. 60 p.
- National Health Portal of India [Internet]. Introduction of regimental therapy (Ilaj- bil- tadbeer); [cited 2016 Jan 19]. Available from: https://www.nhp.gov.in/ introduction-of-regimental-therapy-ilaj-bil-tadbeer\_mtl
- 20. Dhandapani AG, Sinha AG. Principles and practices

- of therapeutic massage. New Delhi: Jaypee Brothers Medical Publishers (P) Ltd; 2004. 22 p.
- Tanwir MA, Ansari AH, Aisha P, Anzar MA. Dalk (therapeutic massage) and their indications for musculoskeletal disorders in Unani medicine. Int J Adv Ayur Yoga Unani Siddha Homeo. 2013;2(1):59-70.
- Ahmed A, Jahan N, Aslam M, Kausar HS, Khalid M, Ali H. Dalak (massage) in Unani medicine: a review. Int J Adv Ayur Yoga Unani Siddha Homeo. 2014;3(1):162-74. [Google Scholar]
- 23. Sultana A, Ahmad A, Begum M. Ilaj-bil-tadbeer a non-medical therapy in Unani system of medicine-a review. J Complement Altern Med. 2015:1-6.
- 24. Akhtar J, Siddiqui MK. Utility of cupping therapy Hijamat in Unani medicine. Indian J Trad Knowl. 2008;7(4):572-4. [Google Scholar]
- 25. Assi TB, Baz E. Current applications of therapeutic phlebotomy. Blood Transfus. 2014;12:75-83. [PubMed] [Google Scholar]
- 26. Shaikh N, Ghawte S, Mukadam M. Comparative evaluation of Unani regimen - fasad (phlebotomy) & compound formulation in the management of knee osteoarthritis, an open randomized clinical trial. J Indian Sys Med Res. 2013;1(1):13-7.
- Kumar S, Dobos GJ, Rampp T. Clinical significance of leech therapy in Indian medicine. J Evid Based Complementary Altern Med. 2013;18(2):152-8. [PubMed] [Google Scholar]
- Alam T, Hasan I, Perveen A, Nazamuddin M, Perveen S. Leech therapy (taleeq): indications, contraindication and standard operative procedures (SOPS). J Biol Sci Opin. 2013;1(4):358-61.
- 29. Vitthalrao BM, Subhash R, Keshaorao SM. Effect of leech therapy in management of quadriceps femoris tenosynovitis: a case study. Int J Res Ayurv Pharm. 2013;4(4):629-30.
- 30. Ahmad T, Anwar M. Clinical importance of leech therapy. Indian J Trad Knowl. 2009; 8(3):443-5. [Google Scholar]
- 31. Azam R, Mushtaq S, Fassihuzaman, Jabeen A, Zaidi Z, Alam S. Nutool (irrigation) an effective mode of treatment in Ilaj bit Tadbeer (regimenal therapy). Indo Am J Pharm Res. 2014;4(12). [Google Scholar]
- 32. Nasimul H, Siddiqui MA, Sarferaz MD. An overview of niqris (gout) and its interpretation with hyperuricemia. Int J Adv Ayur Yoga Unani Siddha Homeo. 2013;2(1):137-42.
- 33. Ansari AP, Dar PA, Kalam MA, Rather SA, Arif M, Nasir A. Therapeutic effect of inkibab (steam application) and Hijama Muzliqa (massage cupping) in case of Waj al-Zahr (non-specific low back pain): a case report. J Ayurvedic Herb Med. 2018;4:150-3. [Google Scholar]
- 34. Ghani N. Khazain al-Advia. New Delhi: Idara Kitab al-

- Shifa; 2011. 109 p.
- 35. Khan MS. Elaj al-Amraz. Urdu translation by Kabeeruddin M. New Delhi: Ejaz Publishing House; 2006. p. 10, 14-5, 21, 24-7, 31-2, 35-6, 170.
- 36. Kabeeruddin M. Al-Qarabadeen. 2nd ed. New Delhi: Central Council for Research in Unani Medicine, Dept. of AYUSH, Ministry of H & FW, Govt. of India; 2006. p. 3-7, 25, 48, 252, 682, 685, 957, 1252.
- 37. Jamal MA, Khan MA. Kitab al-Tadbeer. New Delhi: GL International Publisher; 2017. p. 53-5, 55-6, 63, 291, 308-9.
- 38. Khan JA. Ilaj-bit-tadbeer. Deoband: Hira Computers & Publisher; 2011. 75 p.
- National Health Portal of India [Internet]. Huqna (enema); [cited 2016 Mar 19]. Available from: https:// www.nhp.gov.in/huqna-enema\_mtl
- 40. Firdous S. Riyazat (exercise): a part of Ilaj bil tadbeer and its role in prevention of diseases. Int J Dev Res. 2016;6(1):6486.
- 41. Demir Y. Non pharmacological therapies in pain management current issues and opinions. Racz G, editor. InTech; 2012. [Google Scholar]

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