



MIND AND MEDICINE: UNANI INSIGHTS AND INTEGRATIVE APPROACHES TO *AMRĀD-I-NAFSĀNIYYA* (PSYCHOLOGICAL DISORDERS): A COMPREHENSIVE REVIEW

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Abstract: Anxiety disorder (*Izterāb-i-Nafsānī*) involves both psychological and physiological elements, comprising somatic, cognitive, emotional, and behavioural aspects. According to Unani Medicine, anxiety falls within the domain of *Infialāt-i-Nafsāniyya*, which refers to psychic reactions. This concept involves the movement of the pneuma (*Ruĥ*) and blood, facilitated by the vital faculty (*Quwwat-i-Haiwāniyya*). Unani Medicine adopts a holistic approach, addressing both preventive and curative aspects of patient care. Psychiatric disorders, known as *Amrād-i-Nafsāniyya* in the Unani system of medicine. Treatment modalities in Unani medicine encompass Regimenal Therapy, Dietotherapy and Pharmacotherapy. This review outlines various essential forms of Regimenal therapy, such as *Dalak* (Massage), *Ĥammām* (Turkish bath), *Naṭūl* (Irrigation), *Takmīd* (Fomentation) and *Riyādat* (Exercise), alongside commonly used Unani pharmacotherapeutic approaches documented in reliable Unani literature. In modern practice, treatments for anxiety encompass CBT, Deep Muscle Relaxation and various medications like Benzodiazepines, SSRIs, SNRIs and Beta Blockers. While effective initially, prolonged use of these drugs can lead to dependency, resulting in withdrawal symptoms such as irritability, nausea, drowsiness, vomiting, nightmares, headache, or paresthesias and ultimately depression which often accompanies bipolar disorder. Conversely, Unani medicine employs Tonics (*Muqawwiyyāt*), Exhilarants (*Mufarriĥāt*) and Evacuants (*Munaqqiyāt*), alongside Regimenal therapies, aimed at strengthening vital organs and eliminating morbid humour and moreover has least side effects and also are cost effective to be used in long term. However this review paper aims to delve into the rich tapestry of Unani literature to elucidate the conceptualization and therapeutic approaches towards *Amrād-i-Nafsāniyya*.

Index Terms - Component, formatting, style, styling, insert.

1. INTRODUCTION

Unani medicine constitutes a medical system characterized by a scientific methodology and a reliance on holistic principles. Prominent figures in Unani medicine, such as Buqāt (Hippocrates), Abū Bakr Muĥammad ibn Zakariyyā Rāzī (Rhazes), and Raban Ṭabarī, have extensively documented *Amrād-i-Nafsāniyya*, which pertains to mental disorders or psychiatric conditions. As defined by the World Health Organization, this state of wellbeing entails individuals recognizing their own capacities, effectively managing typical life stressors, maintaining productive and fruitful engagement, and contributing meaningfully to their communities.^{1,2} The

Unani Medical System has a longstanding tradition of recognizing the importance of Mental health. Unani physicians have extensively examined this topic under the concept of *Quwwat-i-Nafsānīyyā* (Psychic faculty) which is believed to be seated in the brain. Hippocrates, acknowledging the brain's delicate and superior nature, referred to it as *Sayed-ul-A'dā*, the leader of all organs. Nearly all classical Unani medical texts contain dedicated sections addressing brain-related illnesses. Numerous psychiatric disorders such as *Mālankhūliyā* (Melancholia), *Māniyā* (Mania), *Qutrub* (Lycanthropy), *Ikhtilāf-i-Zahn* (Brain disorder- confusion) have been thoroughly discussed. Within the Kulliyat sections, a detailed exploration of *Quwwat-i-Nafsānīyyā* and its classification provides insight into the scholars' earnest efforts to comprehend the intricacies of brain function.

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1.1 PREVALENCE

Anxiety disorder, the most prevalent psychiatric illness in the general community, affects approximately 15-20% of patients attending medical clinics.⁴ The one-year prevalence rate of Generalized Anxiety Disorder is 1%, with a lifetime prevalence rate of 5%.⁵ According to a study by Hannah et al. in 2017, an estimated 792 million individuals worldwide lived with a Mental health disorder, representing slightly more than one in ten people globally (10.7%).⁶ In India, the number of individuals with mental disorders in 2017 was approximately 197.3 million, accounting for 1.43% of the total population.⁷

2. DISEASE BURDEN

The disease burden of mental disorders is substantial and continues to be a major public health concern worldwide. Here are some key points based on current data:

2.1 Global Prevalence: Mental disorders affect a significant portion of the global population. According to the World Health Organization (WHO), depression alone affects more than 264 million people globally, and anxiety disorders affect around 284 million.⁸

2.2 Impact on Disability: Mental disorders are a leading cause of disability worldwide. In fact, depression is the single largest contributor to global disability, as per the Global Burden of Disease study.⁹

2.3 Economic Impact: The economic burden of mental disorders is also substantial. The costs associated with mental health care, lost productivity due to absenteeism and presentism, and other indirect costs place a significant strain on healthcare systems and economies.¹⁰

2.4 Impact on Quality of Life: Mental disorders not only affect physical health but also significantly impact quality of life, relationships, and overall well-being.¹¹

2.5 Treatment Gap: There remains a large treatment gap for mental disorders, especially in low- and middle-income countries. Many individuals with mental health conditions do not receive adequate care due to stigma, lack of resources, or limited access to mental health services.¹²

2.6 COVID-19 Impact: The COVID-19 pandemic has exacerbated mental health issues globally. Lockdowns, fear of illness, social isolation, and economic uncertainty have led to increased rates of anxiety, depression, and other mental health conditions.¹³

2.7 Research and Advocacy: Efforts to raise awareness, reduce stigma, and increase research funding for mental health are ongoing. Organizations like WHO and non-profits are advocating for improved mental health services and policies globally.¹⁴

3. CLASSIFICATION OF PSYCHOLOGICAL DISORDERS

3.1 Classification according to Contemporary ¹⁵

The International Classification of Diseases (ICD) is a globally recognized diagnostic framework utilized for various epidemiological and healthcare management purposes, overseen by the World Health Organization (WHO). Currently in its tenth iteration, Chapter V of the ICD pertains to mental and behavioural disorders.

Within the ICD-10's classification of mental disorders, there are ten primary categories:

1. Organic Mental Disorders (F0): Encompassing both organic and symptomatic mental conditions.
2. Mental and Behavioural Disorders due to Psychoactive Substance Use (F1).
3. Schizophrenia, Schizotypal, and Delusional Disorders (F2).
4. Mood (Affective) Disorders (F3).
5. Neurotic, Stress-related, and Somatoform Disorders (F4).
6. Behavioural Syndromes Associated with Physiological Disturbances and Physical Factors (F5).
7. Disorders of Personality and Behaviour in Adult Individuals (F6).
8. Mental Retardation (F7).
9. Disorders of Psychological Development (F8).
10. Behavioural and Emotional Disorders with Onset Typically in Childhood and Adolescence (F9).

3.2 Classification of *Amrād-i-Nafsāniyya* in the Unani System of Medicine

In the Unani system of medicine, mental disorders, known as *Kharābī 'Aql*, are classified into three stages. The first stage involves hallucinations, characterized by *Fasād-i-Hiss* (Disturbance in sensation) but *Faham* (Intellect) is correct. In the second stage, there is a disturbance in intellect (*Faham*), while sensation (*Hiss*) remains normal. For instance, an individual might engage in irrational behaviour such as throwing kitchen pots while naming each pot correctly, indicating that sensation is intact but thinking is disturbed. The third stage is characterized by deterioration in both sensation and intellect. This stage is exceedingly rare. ¹⁶

3.2.1 Classification of *Amrād-i-Nafsāniyya* According to Powers of the Brain in the Unani System

The Unani classification of mental disorders is structured around the powers of the brain, delineated into three primary components:

1. Psychic Power (*Quwwat-i-Nafsāniyyā*): This encompasses both *Quwwat-i-Hissīyyā* (Sensory Power) and *Quwwat-i-Muḥarrika* (Motor Power). *Quwwat-i-Hissīyyā* further comprises Six External Powers (*Hawās-i-Khamsa Zahira*) and Six Internal Powers (*Hawās-i-Khamsa baḥina*). Of notable significance in mental disorders is *Quwwat-i-Mutakhaiyallah* (Power of thinking) and *Quwwat-i-Hiss-i-Mushtarak* (Power of imagination), which are situated in the anterior ventricle of the brain. Hallucinations occurs due to disturbances in *Quwwat-i-Mutakhaiyallah*, where patients may exhibit symptoms such as crying while perceiving auditory hallucinations or seeing unfamiliar figures.
2. Thinking Faculty (*Quwwat-i-Mutafakkirah*): This faculty, referred to by physicians as *Quwwat-i-Mutafakkirah*, resides in the middle ventricle of the brain. Disruptions in this power can manifest in behaviours resembling an individual barricading themselves in a room and hurling objects out of a window towards others. Such disturbances are often attributed to the presence of Cold bad humour (*Bārid Raddi Khilṭ*), leading to disruptions in brain function.
3. Memory and Recall Faculty (*Quwwat-i-Hāfiza*): This faculty, responsible for memory and recall functions, is located in the posterior ventricle of the brain. ¹⁷

3.2.2 According to Ibn Rushd, there are three potential defects that can affect the faculties of the brain: ¹⁸

1. *Buṭlān* (Cessation of Faculty)
2. *Nuqṣān* (Deficiency in Faculty)
3. *Tashweesh* (Altered and Exaggerated Functioning of Faculty)

The cessation or deficiency of these faculties can occur due to abnormal cold and wet temperament (*Su'i Mizāj Barid Raṭab*) or solely because of abnormal cold temperament (*Su'i Mizāj Barid Sāda*). This abnormal temperament leads to obstruction in the vessels and passages, impeding the proper penetration of the *Rūḥ* into the brain. ^{19,20,21,22,23} Furthermore, the altered and improper functioning of these faculties can result from

Safrāwī (bilious) or *Saudāwī* (black bilious) abnormal temperament. The predominance of bilious temperament in the brain leads to abnormal or vicious thoughts, sleep disturbances, abnormal movements, and defects in faculties such as thinking (*Quwwat-i-Fikr*) and memory or retention (*Quwwat-i-Zikr or Ḥāfiza*).^{19,20,21,22}

Abnormal temperament due to black bile can cause palpitations, anxiety, stress, grief, pain, false perceptions, misconceptions, and fear of unknown objects. If this abnormal temperament arises from burnt black bile (*Saudā-i-Muhtariqa*), it can lead to complications akin to those of altered bile (*Safrā*), such as increased bravery, abnormal movements, and features of mania. The disease resulting from abnormal black bile (*Su'i Mizaj Saudawī*) is mainly known as malekholia.¹⁹⁻²⁵

4. UNANI MANAGEMENT

In the Unani System of Medicine, Psychological disorders are described under various terms such as *Mālankhūliyā*, *Junūn*, *Bedāri* or *Sahr*, *Khafaqān*, etc. The key principle in their treatment are mentioned below.

4.1 *Usūl-i-'Ilāj* (Principles of Treatment):

1. Evacuating the affected humour: This involves removing morbid matters, except for *Khilṭ-i-Dam* (Blood), primarily using *Mundijāt* (Concoctives) followed by *Mushilāt* (Purgatives) for *Tanqia Mawād* (Evacuation of morbid matters) and secondarily employing *Fasd* (Phlebotomy).
2. Relieving symptoms: To alleviate symptoms such as Tachycardia, Palpitation, and Thirst, and to generally induce a cooling effect, treatments include *Tartīb* (Moisturizers), *Ta'dil Mizāj* (Alternatives for temperament), *Dalk* (Massage), *Riyādat* (Exercise) and *Mufarrihāt* (Exhilarants).
3. Administering brain tonics and psychological measures: This involves the use of *Muqawwī-i-Dimāgh* (Brain tonics) and the implementation of *Nafsiyāti tadābīr* (Psychological measures).²⁶

4.2 *'Ilāj* (Treatment)

The Unani System of Medicine offers several effective modalities for managing *Amrād-i-Nafsāniyya* namely;

- 4.2.1 Psychotherapy (*Nafsiyāti Tadbīr*)
- 4.2.2 Diet therapy (*'Ilāj bil'-Ghidhā*)
- 4.2.3 Pharmacotherapy (*'Ilāj bi'l Dawā'*)
- 4.2.4 Regimenal therapy (*'Ilāj bi'l Tadbīr*)

4.2.1 Psychiatric Treatment (*'Ilāj Nafsānī*)

The Unani System of Medicine treats psychiatric diseases by using drugs, modifying mind-related processes like sleep and psychotherapy. It is able to use drugs by its discovery of the 'substance of mind' i.e. Psychic pneuma (*Rūh Nafsānī*) while its appreciation of the medical importance of processes, physical conditions etc., which it organizes as 'Six Essential Factors' (*Asbāb Sitta Darūriyya*), helps it to closely relate sleep etc. to the improvement of psychiatric and psycho-somatic diseases. It also makes use of psychotherapy by manipulation of mind by verbal means. But its main reliance is on drug treatment.²⁷

4.2.2 Diet therapy (*'Ilāj bil'-Ghidhā*)

Dietary Recommendations for Psychological Disorders: Proper nutrition plays a crucial role in managing psychological disorders, supporting brain function, and stabilizing mood. Here are dietary recommendations backed by scientific research:

4.2.2.1 Omega-3 Fatty Acids:

Sources: Fatty fish (salmon, mackerel, sardines), flaxseeds, chia seeds, walnuts.

Benefits: Omega-3 fatty acids have been shown to reduce symptoms of depression and anxiety due to their anti-inflammatory properties and role in neurotransmission.²⁸

4.2.2.2 Complex Carbohydrates:

Sources: Whole grains (oats, brown rice, quinoa), legumes, fruits, vegetables.

Benefits: Complex carbohydrates help stabilize blood sugar levels, which can improve mood and reduce irritability and anxiety.²⁹

4.2.2.3 Antioxidant-Rich Foods:

Sources: Berries, nuts, dark chocolate, green leafy vegetables.

Benefits: Antioxidants reduce oxidative stress, which has been linked to depression and anxiety disorders.³⁰

4.2.2.4 B complex Vitamins:

Sources: Whole grains, eggs, dairy products, meat, leafy greens.

Benefits: B vitamins, especially B6, B12, and folate, are important for brain health and can help reduce symptoms of depression.³¹

4.2.2.5 Probiotics:

Sources: Yogurt, kefir, sauerkraut, kimchi, miso.

Benefits: Probiotics support gut health, which is increasingly recognized as important for mental health due to the gut-brain axis.³²

4.2.2.6 Magnesium:

Sources: Nuts, seeds, whole grains, leafy green vegetables.

Benefits: Magnesium deficiency is linked to anxiety and depression. Ensuring adequate intake can help manage these conditions.³³

4.2.2.7 Vitamin D:

Sources: Sunlight exposure, fatty fish, fortified dairy products, egg yolks.

Benefits: Low levels of vitamin D are associated with depression. Supplementation or sufficient sun exposure can help alleviate symptoms.³⁴

4.2.2.8 Hydration:

Recommendation: Drink adequate amounts of water daily.

Benefits: Proper hydration is essential for cognitive function and mood stability.³⁵

Dietary Restrictions

1. Refined Sugars and Processed Foods:

Sources: Sugary snacks, soft drinks, processed baked goods.

Effects: High sugar intake is linked to mood swings, depression, and anxiety due to blood sugar spikes and crashes and inflammation.³⁶

2. Caffeine:

Sources: Coffee, tea, energy drinks, soft drinks.

Effects: Excessive caffeine can lead to anxiety, restlessness, and sleep disturbances. Moderate intake is recommended, especially for those with anxiety disorders.³⁷

3. Alcohol:

Sources: Beer, wine, spirits.

Effects: Alcohol can exacerbate depression and anxiety, interfere with sleep, and interact negatively with psychiatric medications.³⁸

4. Artificial Additives:

Sources: Processed foods containing artificial colours, flavours, and preservatives.

Effects: Some studies suggest that artificial additives can contribute to hyperactivity and mood disturbances.³⁹

5. High-Sodium Foods:

Sources: Processed meats, canned soups, fast food.

Effects: High sodium intake can lead to hypertension, which is linked to increased stress and anxiety levels.⁴

4.2.3 Pharmacotherapy ('*Ilāj bi'l Dawā'*)

4.2.3.1 Modern Management includes Cognitive Behavioural Therapy, Deep Muscle Relaxation & drugs like Benzodiazepines, Selective Serotonin Receptor Uptake Inhibitors, Serotonin and Norepinephrine Reuptake Inhibitors and Beta Blocker, which are useful in short term but long term use can lead to dependence. Due to dependence, these drugs have many withdrawal symptoms like irritability, nausea, drowsiness, vomiting, nightmares, headache or paresthesias. Depression is also a part of bipolar illness.^{5, 41, 42}

4.2.3.2 Unani Concept of Management of Psychological disorders: The concept of utilizing organ- and system-specific tonics is a distinct aspect of the Unani system of medicine. Unani physicians have detailed various drugs that strengthen and tone the body's vital organs, safeguarding them from potential harmful substances. They emphasize enhancing the body's immunity and reinforcing the *Ṭabi'at* through health restoration and disease management. For this, Unani scholars have categorized numerous drugs under *Muqawwiyāt* and *Mufarriḥāt*, including *Muqawwī A'ḍā' Ra'īsa* (Tonics for vital organs), *Muqawwī Mi'da wa Am'ā'* (Gastrotonics and tonics for the biliary tract), *Muqawwī A'dā Nafsāniyya* (Tonics for nervous system organs), *Muqawwī Qalb* (cardio tonics) and *Muqawwī Jigar* (liver tonics). Unani classical literature strongly advocates for the use of *Muqawwiyāt* and *Mufarriḥāt* during illness and for disease prevention. These drugs play a crucial role in controlling epidemics. *Muqawwiyāt* are non-toxic substances that, when used regularly over a long period, can enhance and maintain the body's health by toning internal organs and improving bodily functions.

➤ **Tonics for Vital Organs**

These drugs tone the body's vital organs, such as the heart, brain, and liver. While they often target specific organs, they generally benefit all vital organs. Examples include Asgand (*Withania somnifera*), Jadwār (*Delphinium denudatum*), Zafrān (*Crocus sativus*), and Marwārīd (Pearl).

➤ **Tonics for the Nervous System**

These drugs fortify the nervous system organs (Brain, spinal cord, cranial nerves and spinal nerves) and support their functions. Examples include Maghz Badam Shīrīn (*Prunus amygdalus*), Brahmi (*Bacopa monnieri*), and Gao'zabān (*Onosma bracteatum*).

• ***Muqawwī Qalb* (Cardio Tonics/Cardio Protective)**

These drugs enhance heart function in various ways. Unani scholars have extensively detailed cardiac diseases in their treatises, such as "*Kitāb al Adviyā Qalbiya*" by Ibn Sīnā, which covers 63 heart medications and discusses psychological aspects of heart disease. It mentions various drugs with different pharmacological effects on the cardiovascular system, such as Ābresham (*Bombyx mori*) and Sandal Safaid (*Santalum album*) for *Muqawwī-i-Qalb* (Cardio tonics), Gul-i-Surkh (*Rosa damascena*) and Elāichī (*Elettaria cardamomum*) for *Mufarriḥ-i-Qalb* (Cardiac exhilarants), Zahar Mohra (*Serpentine*) and Sumbul'atṭīb (*Nardostachys jatamansi*) for *Muḥarrik-i-Qalb* (Cardiac stimulants), Ambar (*Ficus glomerata*) and Zafrān (*Crocus sativus*) for *Musakkin-i-Qalb* (Cardiac sedatives) and Ustukhūddūs (*Lavendula stoechas*) for *Mufattiḥ-i-Uruq* (vasodilators).

• ***Muqawwī Jigar* (LiveTonics/Hepatoprotective)**

These drugs enhance liver function in various ways. Some *Muqawwī Jigar* drugs mentioned in *Al-Qanūn* have demonstrated hepatoprotective effects, such as Kāsnī (*Cichorium intybus*), Mako (*Solanum nigrum*), Mastagī (*Pistacia lentiscus*), Gul-i-Surkh (*Rosa damascena*) and Naushādar (Ammonium chloride).

• ***Mufarriḥāt* (Exhilarants)**

This special group of drugs induces feelings of happiness by alleviating stress on the mind and heart. They are used to manage neuropsychiatric and cardiac disorders such as anxiety, depression, and palpitation, creating an overall sense of well-being. Examples include Zafrān (*Crocus sativus*), Sumbul-ut-Ṭīb (*Nardostachys jatamansi*), Arq Gulāb (*Rosa damascena*), and Arq Bed Mushk (*Salix caprea*).^{43,44,45}

Psychological Measures

- Advise patients to stay in a pleasant environment. Assuring that such individuals live in open, airy, and fragrant places.
- Try to limit worry and sorrow. Encourage reading various books and avoid watching distressing news on the media or social media.
- Keeping the patient engaged in listening to calming music and songs can be beneficial in the treatment.
- Sleep Therapy: A person suffering from psychological anxiety or depression should sleep well.
- Aim: *Tarīḥ-i-Dimāgh* (Moistening the temperament of the brain) ^{46,47}

Polyherbal Unani formulation (*Ma'mūl-i-Maṭab Nuskha*)

- Administer a concoction for 8-10 days: Mako Khushk (5 grams), Gul Banafsha (7 grams), Unnāb (5 pieces), Alū Bukhāra (5 pieces), Tukhm Khatmī, Tukhm Kāsni, Shahatarā, Gul Nīlofar (each 7 grams), Gul Gao'zabān, Ābresham Khām Muqashar, Aftimūn, Bisfāij, Ustukhuddūs, Badranjboya (each 5 grams). Soak in warm water overnight, strain in the morning, dissolve 4 tolas of Gulkand, and give it to the patient.
- Purgative preparation: Barg Sana (7 grams), Maghz Tamar Hindi (3 tolas) soaked overnight. In the morning, add Turanjabīn, Shīr Khisht, Maghz Falūs Khyār Shambar (each 4 tolas), and Shīr Maghz Badām Shīrīn (5 pieces) as per the usual method, and give for 3-4 days.
- Preparation for cooling and moistening: First, give 1 tola of Khamira Gao'zabān wrapped in a Warq Nuqrā. Then, prepare a syrup by dissolving Shīra Unnāb (5 pieces) in 12 tolas of Arq Gao'zabān and 2 tolas of Sharbat Banafsha, and sprinkle 7 grams of soaked Tukhm Raihān before administering.^{46, 47}

4.2.4 Regimenal therapy (*'Ilāj bi'l Tadbīr*)

- Room Environment: The room should be airy, open, and fragrant. Arq-i-Gulāb (Extract of *Rosa damascena*) can be sprinkled in the corners of the room to refresh the ambient air. Prolonged stay in hot climates should be avoided.
 1. **Bakhūr (Fumigation):** Fumigation with substances such as Oūd (*Aquilaria agallocha*), Kafūr (*Cinnamomum camphora*), and Sandal (*Santalum album*) should be performed frequently to create a pleasant and aromatic atmosphere.^{45,48,49} A study by Paula et al. found that aromatherapy is effective in reducing stress and anxiety levels.⁵⁰
 2. **Ḥammām (Turkish bath):** A Ḥammām with aromatic medicines like Oūd (*Aquilaria agallocha*), Jāwitrī & Jāiphāl (*Myristica fragrans*) and Kundur (*Boswellia serrata*)^{45,48} helps to relieve stress, relax muscles, ease respiratory problems, and stimulate circulation.⁵¹
 3. **Dalak (Massage):** Massaging the body with oils such as Roghan Zaitūn, Roghan Kaddu, Roghan Kāhu and Roghan Labūb Saba'.^{45,48} is beneficial for improving general mood and decreasing anxiety, stress, and depression.⁵²
 4. **Riyādat (Exercise):** Unani scholars strongly advocate the use of *Riyādat* (Exercise) in treating *Mālankhūliyā* (Melancholy). Regular exercise is known to have positive effects on both physical and mental health, promoting positive self-esteem and improving mental well-being.^{43,53}
 5. **Sa'ūṭ (Nasal Drops):** The use of nasal drops with oils such as Roghan Banafsha (*Viola odorata*), Roghan Nīlofar (*Nelumbo nucifera*) and Roghan Kaddū (*Cucurbita maxima*) is recommended. These oils can also be used for scalp massage. Additionally, nasal drops with Roghan Badām (*Prunus amygdalus*) are beneficial for promoting sound sleep.^{45,48}
 6. **Naṭūl (Irrigation):** Irrigation with a decoction made from semi-ground Jau' (*Hordeum vulgare*), Khas (*Chrysopogon zizanioides*), Khashkhāsh (*Papaver somniferum*), Gul-i-Nīlofar (*Nelumbo nucifera*),

Kaddū (*Cucurbita maxima*), Bārtang (*Plantago lanceolata*), and Khurfa' (*Portulaca oleracea*) is also recommended.^{45,48}

7. **Shamūm (Aromatherapy):** Inhaling aroma of Khas (*Chrysopogon zizanioides*) and Sandal (*Santalum album*) is also beneficial.^{45,48}

5. KEY CONSIDERATION FOR STRENGTHENING BRAIN FACULTIES

In the world of Unani medicine, enhancing brain power is an art of balance and nourishment which further aids to good Mental health and wellbeing. Arkhijān, a prominent Unani philosopher, addresses memory loss by advocating the use of excessive *Taskhīn*, cupping therapy, and Dawa-i- Khardal. According to Arkhijan's teachings, the occurrence of memory loss or weakness signifies the presence of *Su'i Mizāj Bārid* (Cold temperament) in *Dimāgh*. Therefore, Arkhijan emphasizes the necessity of *'Ilāj bil'Didd* (*Taskhīn*) as a treatment approach aimed at restoring memory function and balancing the temperament of the brain. Taking *Hammām* (Turkish bath) is beneficial, and consuming nutritious drinks like Labūb and Falūda helps boost brain health. Bundiḡ and Badām (Almonds) with sugar are also recommended. Applying a paste of Khardal (*Brassica nigra*) and Jund baidastar to the back of the head is suggested for Dementia (*Nisyān*), though more research is needed. Avoid excessive use of *Piyāz* (Onions) and *Dhaniya* (coriander), as they can harm the brain and cause dementia. Kunder and Balādūr are good for brain activity and dementia, respectively, while Zanjabīl (*Zingiber officinalis*) improves Memory (*Quwwat-i-Hāfiza*). Sā'd Kūfī and Mushk (Musk) serve as brain tonics (*Muqawwi Dimāgh*) and the powder of elephant's teeth helps with memory retention (*Saihat-i-Hifz*). It is important not to drink too much water, as it can make the brain too cold and moist (*Bārid wa Raṭab*).⁵⁴

6. CONCLUSION

This review highlights Unani Medicine's holistic approach to managing anxiety disorders (*Izterāb-i-Nafsānī*) through Regimenal Therapy, Dietotherapy, and Pharmacotherapy. Unani Medicine integrates psychological and physiological elements, focusing on the movement of pneuma (*Rūḥ*) and blood, and facilitated by the vital faculty (*Quwwat-i-Haiwāniyya*). Treatments include *Dalak* (Massage), *Hammām* (Turkish bath), *Naṭūl* (Irrigation), *Takmīd* (Fomentation), and *Riyāḡat* (Exercise), along with Tonics (*Muqawwiyyāt*), Exhilarants (*Mufarriḡāt*), and Evacuants (*Munaqqiyāt*). Modern anxiety treatments like Cognitive Behavioural Therapy (CBT), Deep Muscle Relaxation, and medications such as Benzodiazepines, SSRIs, SNRIs, and Beta Blockers, while effective initially, often lead to dependency and side effects. Unani Medicine provides a cost-effective alternative with fewer side effects, promoting long-term health. By exploring Unani literature, this review offers insights into *Amrād-i-Nafsāniyya* treatment, suggesting that Unani principles could complement modern psychiatric care for a more integrative and sustainable approach to mental health.

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CONFLICT OF INTEREST

No conflict of interest declared.

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