

THE IMPACT OF ANCIENT GREEK MEDICINE IN INDIA: THE BIRTH OF UNANI MEDICINE

Dr. Preeti Kumari

*Assistant Professor, Marwari College
Ranchi University, Ranchi, Jharkhand, India*

ABSTRACT

Background: Based on the teachings of Hippocrates, Galen, and Arab physicians, Unani Medicine, also known as "Unani-tibb," has a long and impressive history in India. The main idea behind it is to keep the body's four elements, temperaments, simple and compound organs, and four humors in a state of equilibrium.

Methods: The most important bibliographical sources regarding the influence of ancient Greek medicine on India and the Unani Medicine principles have been investigated and examined.

Results: In a nation with a different philosophy and worldview, the assimilation of Hippocratic principles was successful. The Indian people and medical professionals responded strongly to the ancient Greek medical system, which was enriched with local components.

Conclusion: Unani medicine is gaining popularity all over the world, not just in India, where there are several registered practitioners.

Keywords: *Unani medicine; Hippocratic medicine; Arab physicians; humoral theory; traditional medicine.*

INTRODUCTION

The term Unani Tibb means a clinical arrangement of Greek beginning which has experienced an extraordinary spread since the eleventh 100 years, and was generally applied in present day India, especially in essential medical care framework. Almost certainly, Greek medication first showed up in Quite a while with the mission of Alexander the Incomparable in Asia (334-323 BC). Some daring explorers previously (Scylax of Caryanda, Ctesias of Cnidus, and Nearchus son of Androtimos) or concurrently (Nearchus son of Androtimos) with Alexander sailed on the rivers and reported their journeys in India. Travel, trade, and cultural ties to India grew during the Byzantine era. The conditions for a translational activity, including the translation of medical texts, were created by the Nestorian sect's emergence in the fifth century AD, its condemnation and exile, and the subsequent wave of immigrants moving eastward. From Greek, Persian, Syrian, and Indian translations, the Arab dominance in the Mediterranean created the entire Arab science, which led, among other things, to the arrival of Indian medicine in Europe. The Arab conquest of Asia from 710 to 1202 was the primary factor that brought the Indian and translated Byzantine medical texts

together. Because of the fertile soil provided by the sacred texts' traditional medicine, the Vedas, the transplantation of Hippocratic principles to a distant nation has been successful. The Indian people and the physicians known as Hakims, who were practicing medicine in imperial courts, cities, and the countryside and have continued their work to this day, had a significant impact on the Greek medical system, which was enriched with local components.

Greece is where the Unani System of Medicine got its start, as its name suggests. Egypt and Mesopotamia, its sister civilization, are where this system got its start. The Arabs took it even further and developed and improved it significantly. It is possible to trace the origins of Unani therapy all the way back to ancient Egyptians who prioritized the use of plants to treat diseases. Additionally, they pioneered the use of surgery as a treatment option. Egyptians' expertise in medicine is demonstrated by the Papyri studies. Some notable Egyptian doctors include Amenhotep (1550 BC) and Imhotep (2800 BC). Because of their extraordinary commitments in the field of Medication, Mesopotamians likewise involved a significant spot ever. A urine sample was used as a tool for diagnosis. Asclepius, a great medical scholar who lived in Asqalébüs in the 12th century BC, was the first Greek practitioner of Unani medicine. During Asclepian period, the Greeks fostered the specialty of Medication in the radiance of clinical information on Egyptians and Babylonians.

Unani Arrangement of Medication was acquainted with India by the Bedouins, and soon it took firm roots in the dirt. The Delhi Rulers, the Khiljis, the Tughlaqs and the Mughal Heads gave state support to the researchers and, surprisingly, enlisted some as state workers and court doctors. The system quickly gained widespread acceptance among the masses and spread throughout the nation. India saw a boom in Unani medicine between the 13th and 17th centuries. Among the people who made important commitments to this framework in the period were, to give some examples, Abu Bakr container Ali Usman Kashani, Sadruddin Dimashqui, Bahwa receptacle Khwas Khan, Ali Geelani, Akbar Arzani and Mohammad Hashim Alvi Khan.

In the eighth century, the Unani System of Medicine arrived in India and developed into a comprehensive medical system as a result of multiple original contributions and new applications by scholars of subsequent generations. It has been drilled, educated and deductively reported in various pieces of the nation and prospered as a logical clinical framework. Recognizing Unani Medicine's value and scope, the Indian government incorporated it into the healthcare system, facilitating its expansion. India has emerged as the global leader in the Unani System of Medicine due to its extensive network of high-quality educational institutions, comprehensive healthcare facilities, cutting-edge research institutions, and high-quality drug manufacturing industries and the large number of people who use it for their healthcare requirements.

Unani Medicine suffered a setback under British rule, but because the populace believed in the system, it continued to be practiced. Unani medicine survived under the British because of the efforts of the Sharifi family in Delhi, the Azizi family in Lucknow, and the Nizam of Hyderabad. Ajmal Ajmal Khan, an outstanding physician and scholar of Unani medicine who lived from 1868 to 1927, advocated for the Unani system of medicine in India. His enormous contribution to the

multifaceted development of the two Indian medical systems, Unani Medicine and Ayurveda, can be seen in the Hindustani Dawakhana and the Ayurvedic and Unani Tibbia College in Delhi.

The Majeedi group of Delhi, particularly Ûakém Abdul Hameed (1908-1999), made important commitment towards modernization of Unani drug industry. Ûakém Abdul Hameed likewise settled an Establishment of History of Medication and Clinical Exploration (IHMMR) in New Delhi that formed into a considered college the Jamia Hamdard in 1989. Additionally, the Usmani family of Allahabad in Uttar Pradesh and the Niamathullah family of Madras, which is now Chennai, contributed significantly to the development of Unani medicine in the 20th century.

After India gained independence, the development of Unani Medicine and other Indian medical systems picked up a lot of steam. In 1943, the Health Survey and Development Committee emphasized the significance of India's indigenous medical systems for the future. The conference of health ministers decided in 1946 that the Centre and the provinces should make enough money for research into indigenous medical systems like Ayurveda and Unani. Additionally, the conference suggested establishing these systems' educational and training institutions. The Indian government established a number of committees in response to the conference's recommendations, most notably the Colonel R.N. Chopra (1946) and C.G. Pandit (1949) Committees. These boards of trustees suggested definite layout for the improvement of Indian frameworks of medication.

The establishment of the Central Council for Research in Indian Medicine and Homoeopathy (CCRIMH) by the Government of India in 1969 gave the Indian Systems of Medicine and Homoeopathy, including the Unani System of Medicine, a boost in research and scientific activities. The establishment of four distinct research councils—one for Ayurveda & Siddha, one for Unani Medicine, one for Yoga & Naturopathy, and one for Homoeopathy—followed the dissolution of CCRIMH in 1978 in order to provide specialized attention to research pertaining to distinct systems. In the beginning, a division of the Ministry of Health and Family Welfare was in charge of the Indian Systems of Medicine and Homoeopathy (ISM&H). A full-fledged Department of Indian Systems of Medicine and Homoeopathy took its place in the ministry in March 1995. In November 2003, the Department of AYUSH was renamed for the purpose of developing Ayurveda, Yoga & Naturopathy, Unani, Siddha, and Homoeopathy as a whole. With effect from November 9, 2014, the Department of AYUSH has been elevated to a full-fledged Ministry of AYUSH in order to focus on the development of education and research in AYUSH systems of medicine.

The national healthcare system currently includes the Unani System of Medicine, which has its own recognized practitioners, hospitals, and educational and research institutions. In order to make the most of Unani Medicine and other indigenous medical systems in the delivery of healthcare to the general public, the Indian government is increasing its support and funding for their extensive development.

THE ASSIMILATION OF HIPPOCRATIC PRINCIPLES IN INDIA - THE DEVELOPMENT OF UNANI MEDICINE

Like the Arab achievements in alchemy, botany, and pharmacology, the transplantation of Hippocratic principles in a country with a different philosophy and worldview was successful. Ayurveda's traditional medicine, which emphasizes life extension and disease prevention, was a rich soil. The patient's scientific approach shared many similarities, bringing the two approaches together. The large collections Charaka, Susruta, and Vagbada, on the other hand, are made up of Indian traditional medicine, and they are similar to the Corpus Hippocraticum, which contains Greek medicine from classical times.

In Persian, Arabic, and Indian languages, the word "Unani" refers to Ion, a particular Greek branch that settled in Asia Minor and became Greek as a result. The Turkish word Yunan, which has the same meaning as the word Unani, comes from the same place. The arrangement of Unani medication, Having its starting point in Greece and by Hippocrates, was presented by the Middle Easterners, when the Mongols attacked the urban communities of Persia and Focal Asia, and afterward researchers and experts escaped to India. The heads of Indian states offered insurance to outcasts and delegated a large number of them as government authorities and court physicians³. Between the 13th and 17th centuries, when Unani physicians integrated Indian medicinal plants into their system, this medical system reached its peak. The Unani medicine spread across the nation as a result of the public's immediate response. The official state retreated under British rule, but its use among the working class continued, thanks to the Sharifis in Delhi, the Azizis in Lucknow, and the Nizams in Hyderabad⁴. Hakim Ajmal Khan (1868–27), the foremost proponent and practitioner of Unani medicine, was a contributor to the establishment of the Ayurvedic and Unani Tibbia College in Delhi (Figure 1). Similar to other traditional systems, the system flourished after India's independence. In 1946, the Ministry of Health decided to establish educational institutions to teach Ayurvedic and Unani medicine because there was room for research and applications. In addition, the government established a Central Council for Research in Indian Medicine and Homoeopathy in 1969 to conduct research on a variety of Indian medical systems, including Siddha, Ayurveda, Naturopathy, Homeopathy, Yoga, Unani medicine, and Ayurveda. To this day, the World Health Organization supports and promotes these systems⁵. In 1978, it was chosen to concentrate on all the while the philosophical premise of every framework and the chance of reasonable applications on individuals' medical problems. Since then, the Unani Tibb system that provides people with health care includes hospitals, staff, research centers, and instructors as well as ongoing promotion of studies and the government's support for them⁶. In India we might see as today in excess of 100 Unani Tibb Clinics, free to all patients without separation, 900 Unani dispensaries and practically 30.000 enrolled experts.



Figure 1. Hakim Ajmal Khan (1868-1927), the physician who restored Unani Medicine in India.

GREEK MEDICINE, OR UNANI TIBB

Hippocrates and Gallen served as the foundation for the development of Unani medicine, which originated in ancient Greece. Asclepius, the oldest and most well-known of all, is depicted as a tribal chief and skilled wound healer rather than a physician because physicians did not seem to be well-liked at the time. In Homeric times, doctors were of mediocre standing and considered specialists as opposed to aristocrats.

According to Homer (1925), Asclepius is not even acknowledged as the god Apollo's son in the Odyssey, where physicians are grouped with other wandering laborers. After 700 B.C., Asclepius becomes a semi-god in the Asklepiion myth, which is told by Hesiod and many others. Asclepius is the son of the god Apollo.

According to Yannis Tountas of the Center for Health Services Research Department of Hygiene and Epidemiology at the University of Athens Medical School, this elevation of Asclepius' position represented an elevation of medicine and a simultaneous reorientation of medical care. The healing aspect of the medical arts is represented by Asclepius. Ayurveda, the ancient Indian system of medicine, shares the most similarities with modern-day traditional medicine than any other system. The two frameworks are naturally based and manage the overall equilibrium of specific fundamental liquids or humors and changes in way of life depending on the situation to encourage wellbeing. There are mixed types of each humor, or dosha, as it is known in India. Each dosha has its own fundamental constitution.

The concept of the four humors was utilized by Hippocrates. Albeit the foundation of humoral physiology and pathology had previously been laid by his ancestors, Hippocrates at last brought the hypothesis of the four humors into its traditional structure. As previously mentioned, ancient Greek medicine thrived in India between the 13th and 17th centuries. Abu Bakr bin Ali Usman

Kashani, Sadruddin Dimashqui, Bahwa bin Khwas Khan, Ali Geelani, Akbar Arzani, and Mohammad Hashim Alvi Khan, to name just a few, were among those who made significant contributions to this system during the specified time period. India's national healthcare delivery system currently incorporates the ancient Greek medical system, which has its own recognized practitioners, hospitals, and educational and research institutions. In order to take full advantage of these systems for healthcare and distribution to the masses, the Indian government provides increasing support and funding for the numerous advancements of ancient Greek medicine and other indigenous medical systems.

PRINCIPALS OF GREEK MEDICINE

Apollo, Chiron, and Asklepios, a Pompeii fresco from the first century AD.

Fresco from Pompeii from the first century AD depicting Apollo, Chiron, the Centaur, and Asclepius. Image credit: Wikicommons.

Hippocrates once said: "The human body contains blood, phlegm, yellow and black bile, respectively; He experiences pain or enjoys health because of these, which make up the body's nature. He now enjoys the best health when these components are perfectly mingled and proportioned to one another in terms of compounding, bulk, and power. When one of these components is lacking or excessive, or when it exists on its own in the body without being combined with the others, pain is felt. According to O. Temkin's *Hippocrates in a World of Pagans and Christians*, "The Nature of Man," the ancient Greeks' understanding of health and disease was based on the theory of the four "fluids." Phlegm, yellow bile, black bile, and blood were all present. These, in turn, were based on the theory of the four elements—fire, earth, water, and air—and the four qualities they each have—heat, dry, humid, and cold. The number four serves as the foundation for all of these theories. For Pythagorean philosophy, which dominated the pre-Socratic era, the number four was very important.

THE PRINCIPLES OF UNANI MEDICINE

The fundamental standards of Unani medication are the accompanying: 1) the elements (arkan), 2) the temperament (mizaj), 3) the humors (akhlat), 4) the spirit (ruh), and 5) the environment (tabiat). Modern medicine says that the way the body's cells are organized is the same way. With a different approach, the Unani Tibb views the element as a smaller unit. The primary units and components of the material are the elements, which have the same shape, characteristics, and properties. Inverse to the 4 components (water, fire, air, earth) of the Ionian scholars, Indian way of thinking records 5 components (water-aab, fireaatish, air-terrible, earth-khak and moreover sky-akash), while the Arabic incorporates 3 (barring fire). Eighty of the 92 naturally occurring elements have been found in the human body by modern science, with 14 more laboratory-occurring elements. Even as a trace element, each of them is absolutely necessary for the body to function

normally, and diseases are caused by their absence or accumulation⁷. The fundamental hypothesis in Unani Tibb is that of the personality or habitus (mizaj), by which the blending of humors makes wellbeing (eukrasia) and the problem illness (disbalance)⁷. Humors assume a conclusive part in the making of the disposition, meaning the person. Each person's personality is established by the predominant element and humor: The prevalence of warm blood is sanguine (dam), the prevalence of liquid phlegm is phlegmatic (balgham), the prevalence of dry yellow bile is bilious (safra), and the prevalence of cold black bile is melancholy (sawda). The hypothesis of humors (akhlāt) follows the Hippocratic one, as per which the 4 humors (blood, mucus, bile, dark bile) and their fair subjective and quantitative proportion in the body are liable for wellbeing support. The fundamental tenets of the Hippocratic model have not changed over the centuries⁸, and diseases are categorized according to the humor that causes the disorder. In today's India, a standard medical history is used to diagnose temperament. The patient is asked about his preference for hot, cold, wet, or dry foods, beverages, sleeping patterns, type of work (sedentary or manual), and psychological state. In addition, the number of breaths, the temperature, and the pulse are examined.

In addition, Unani Tib temperament is used in the administration of drugs, which are categorized into eight different action categories. The terms "spirit" (ruh) and "soul" (nafs) are frequently used interchangeably in philosophy and religion. It is regarded as a component of the body's immanent air. The prominent doctor Galen (131-c.201 Promotion) thinks about it as a feature of the climatic air and as a vital part of the digestion. The soul also participates in all emotional expressions simultaneously. The power of self-preservation is what allows for the maintenance of humoral equilibrium, according to the theory of nature (tabiat). The disease's restoration of disturbed equilibrium occurs with the same force to which medication is directed, as does the healing power of nature, the *Vis medicatrix naturae*⁸. It is also acknowledged that environmental and ecological conditions influence health maintenance. Air, food, exercise, rest, sleep, and mental calmness are all influencers. The Hippocratic treatise clearly affected air, water, and places. Diet, medication, traditional treatments like baths, leeches, massage, and enemas, as well as minimal surgery, are used in the treatment. In drug, spices as a rule are directed in a straightforward structure and seldom in combinations and they are constantly individualized for every patient^{9, 10}. Traditional medicine fully responds to the formal western scientific medicine in their coverage in a nation with significant primary health care needs¹¹. Its temporal dimensions are increased by the fact that it is the result of creative incorporation of Hippocratic knowledge, which serves as a practical confirmation of its fame.

CONCLUSION

Unani medicine seeks to restore the body as a whole to its original state, and it is culturally acceptable in the Indo-Pak subcontinent. It asserts that disease is a natural process and that symptoms are the body's reactions to disease. The success of incorporating the ancient Greek

medical system into a culture with a different philosophy is demonstrated by its inclusion in the primary health care system.

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