An analytical study of concordance between *Mizaj* and diseases in adult patients of NIUM Hospital, Bangalore

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ABSTRACT

Mizaj (Temperament) is one of the basic concepts of Unani system of medicine upon which diagnosis and line of treatment of a disease are based. Every human being has been furnished a specific Mizaj through which an individual performs his functions properly. If it is disturbed, body becomes more susceptible to develop such diseases having same temperament as that of an individual. Objective of the study was to evaluate the relation of diseases in respect of Mizaj of the patients and to provide some knowledge for prevention of other diseases that may be related to identified Mizaj. Four hundred (400) patients fulfilling the criteria were enrolled in the study followed by their Mizaj were assessed by two pre structured proformas based on objective and subjective parameters given by Eminent Unani physicians. Following assessment of Mizaj of the patients, concordance between their Mizaj; Sue Mizaj Mufrad Sada (simple and single imbalanced temperament), Sue Mizaj Murakkab Sada (simple and compound imbalanced temperament) and Sue Mizaj Maaddi (imbalanced temperament due to humour) and disease was established, and it was observed that only patients of Sue Mizaj Barid (cold imbalanced temperament) and Sue Mizaj Balghami (imbalanced temperament due to phlegm) had significant concordance as compared to the rest. In the present study, non concordance between Mizaj and disease distribution may be attributed to those factors which tend to alter the Mizaj and have potential to produce diseases, like Mizaje Khilqi (congenital temperament), age, Masakin (residence), weather, diets, occupation and habit.

Key words: *Mizaj; Temperament; Diagnosis; Concordance and Disease of subject.*

Introduction:

The main aim of medicine is to maintain health or to restore it, if lost, and getting of these two things are impossible without knowing *Mizaj* (temperament) of the patient as well as disease. *Mizaj* is the only thing which imparts a proper shape and structure to human body and makes capable an individual to perform his functions properly. If the *Mizaj* of a person is changed, his functions as well as structures tend to change, resulting in disease. Any temperament of a healthy person represents a good profile of biological state which keeps perfect harmony between the *milieu enterieur* (the environment within body) and environment. People of one type of temperament may be prone to a particular group of diseases in different phases of their lives and under different climatic conditions, because a body is most susceptible to develop such diseases having same *Mizaj* as that of it. For

example, the persons of *Barid Mizaj* (cold temperament) are generally susceptible to develop obesity, common cold, paralysis, *Suddah* (obstruction) in the body etc. Similarly the persons of *Har Mizaj* (hot temperament) will be prone to such diseases as fever, sunstroke, hypertension etc.[1] If a person having *Barid Mizaj* adopts cold things like cold diet, cold weather, surely he will fall ill. And when he reaches *Sinne Kuhoolat* (middle age) and *Sinne Shaikhookhat* (old age)*,* he will not feel better as that of the persons having *Har Mizaj*. Similarly, if a person having *Ratab Mizaj* (moist temperament) and use *Ratab Tadabeer* (moist regimens)*,* he will frequently feel discomfort in comparison of the person having *Yabis Mizaj* (dry temperament).[2]

Therefore, for maintaining health of an individual and avoidance of disease, it is necessary to be acquainted with *Mizaj* of individual and the factors (age, diet, weather, residence, occupation and habit) responsible for alteration of *Mizaj* of an individual.

After assessment of *Mizaj* of human being and the factors*,* we may be aware about health status of an individual, a community, a country and can prevent as well as control the diseases by providing specific preventive measures.

Keeping these points in mind this study was conducted at National Institute of Unani Medicine, Bangalore.

Methodology:

Out of all the patients attended the Hospital, National Institute of Unani Medicine (NIUM) during 2008-09, 400 patients of 20 to 60 years of age and of both sexes were included in the study and accidental, traumatic and deaf and dumb patients were excluded. Then their temperaments were assessed by two pre structured proformas designed for the assessment of *Mizaj* that were based on *A'lamat Ajnase A'shra* (10 determinants) and *A'lamat Ghalbae Akhlat* (Symptoms of dominance of humour of the body).[1,3,4]

In addition, four arbitrary parameters were devised to assess the *Mizaj;* to assess *Hararate Badan* (body's heat) a digital thermometer was used. After assessment of body temperature in degree Fahrenheit (F) of total patients, mean of the total recording was calculated then patients were divided into two groups. The patients above the mean were considered as of *Har Mizaj* and the persons below the mean were considered as of *Barid Mizaj*. Second parameter was used to assess the amount of fat in the body by measuring skin fold thickness at mid arm by Harpenden Skin Callipers followed by findings obtained by the instrument were calculated and a mean ±SD (standard deviation) was derived.

followed by findings obtained by the instrument were calculated and a mean ±SD(standard deviation) was derived. Following that all the patients divided into two groups; below the mean and above the mean. Patients above the mean were considered as of Mizaj Barid while patients below the mean were considered as of Har Mizaj. For the assessment of Laham (muscles) in the body, Tailor tape was used to measure mid arm circumference of the patients. Findings obtained by the measurement were calculated and a mean ±SD was derived. Patients above the mean were considered as of Har Mizaj and patients below the mean were considered as of *Barid Mizaj*. The fourth important point included in the proforma, was no. of hair in one inch square area on sternum from which *Hararate Qalb* (heart's heat) is reflected.[2,3,5] For counting hair, a one inch square area was made of a thick paper. After counting the hair, the mean ±SD was derived. Patients above the mean were considered as of *Har Mizaj* and below the mean as of *Barid Mizaj*.

Lastly on the basis of the total score of the 10 independent determinants and signs and symptoms of dominance of *Akhlat* (humours or body fluids), a particular *Mizaj* was assigned to the patient. The existed disease of every patient was then assessed both subjectively and objectively to assign a *Mizaj* to the disease. Then concordance in between *Mizaj* of disease and patient was analysed.

Results and Discussion:

Table No. 1
Distribution of Patients according to *Sue Mizaj Mufrad Sada* and Concordance with Disease (N=400)

Sue Mizaj Mufrad Sada	Patients Concordance with Diseases		Patients Non-concordance with Diseases	
	No.	Percentage (%)	No.	Percentage (%)
Har	33	18.33	147	81.67
Barid	144	65.45	76	34.55
Ratab	0	0	0	0
Yabis	0	0	0	0

Figure No.1

Distribution of Patients according to *Sue Mizaj Mufrad Sada* and Concordance with Disease
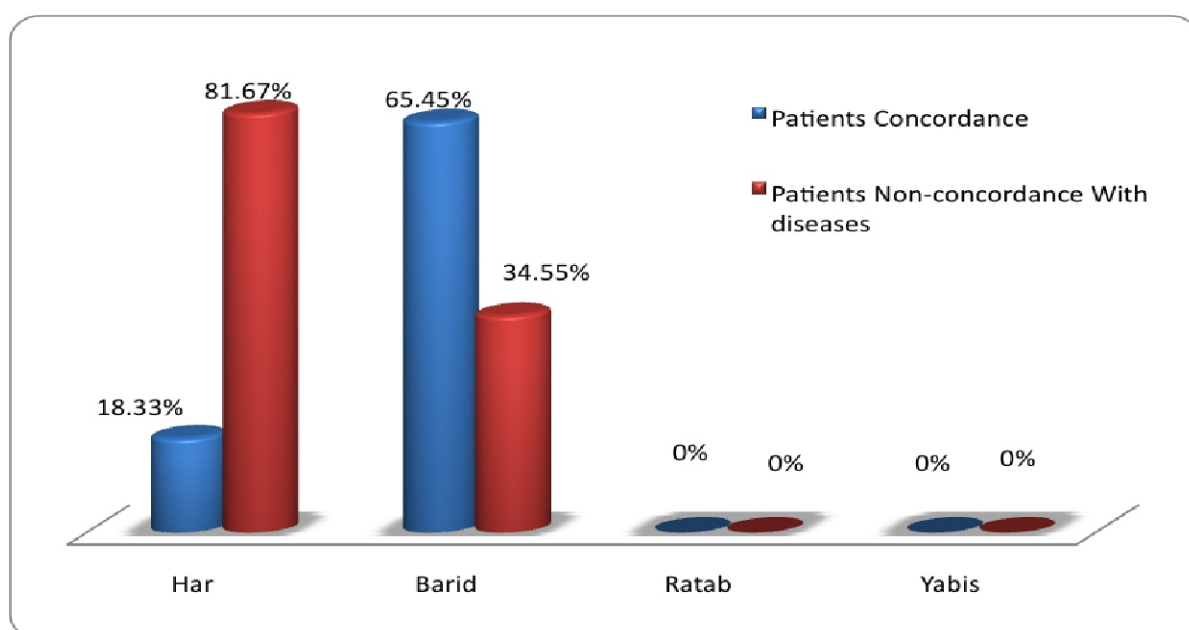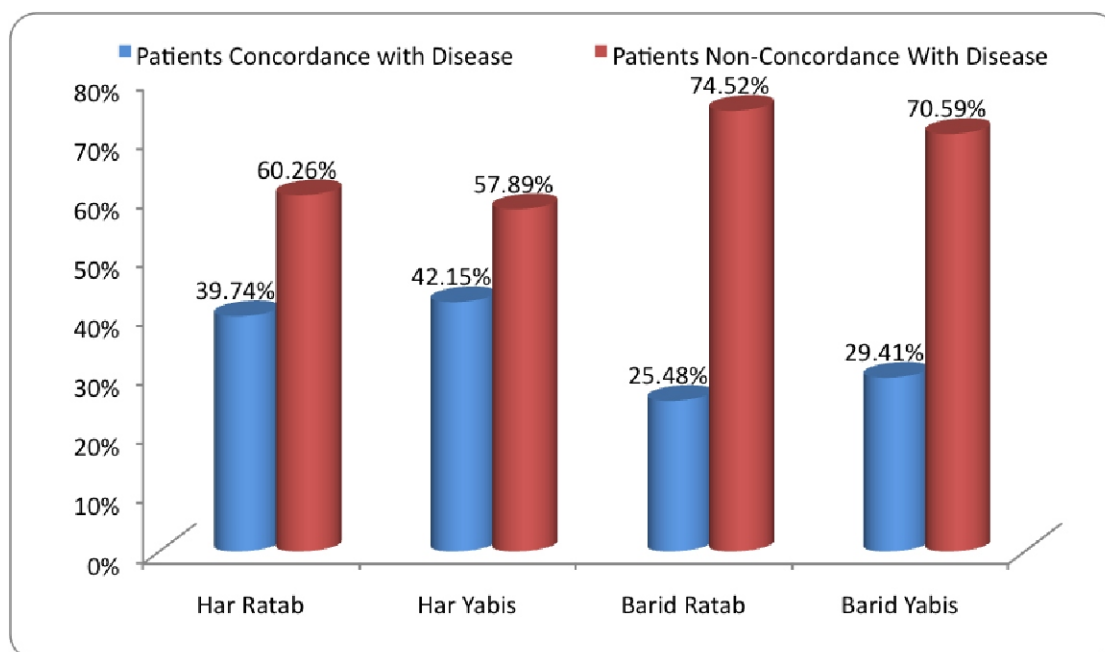
Table No. 2

Distribution of Patients according to *Sue Mizaj Murakkab Sada* and Concordance with Disease (n=400)

| *Sue Mizaj Murakkab Sada*	Patients Concordance with Disease		Patients Non-Concordance With Disease	
	No.	Percentage (%)	No.	Percentage (%)
Har Ratab	62	39.74	94	60.26
Har Yabis	08	42.15	11	57.89
Barid Ratab	53	25.48	155	74.52
Barid Yabis	05	29.41	12	70.59

Figure No. 2

Distribution of Patients according to *Sue Mizaj Murakkab Sada* and Concordance with Disease

Table No. 3

Distribution of Patients according to *Sue Mizaj Maaddi* and Concordance with Disease

(N=400)

Sue Mizaj Maaddi	Patients Concordance with Disease		Patients Non-Concordance With Disease	
	No.	Percentage (%)	No.	Percentage (%)
Damvi (imbalanced sanguine temperament)	48	41.38	68	58.62
Balghami (imbalanced phlegmatic temperament)	119	56.13	93	43.87
Safravi (imbalanced choleratic temperament)	7	16.67	35	83.34
Saudavi (imbalanced melancholic temperament)	6	20.00	24	80

Figure No. 3

Distribution of Patients according to *Sue Mizaj Maaddi* and Concordance with Disease
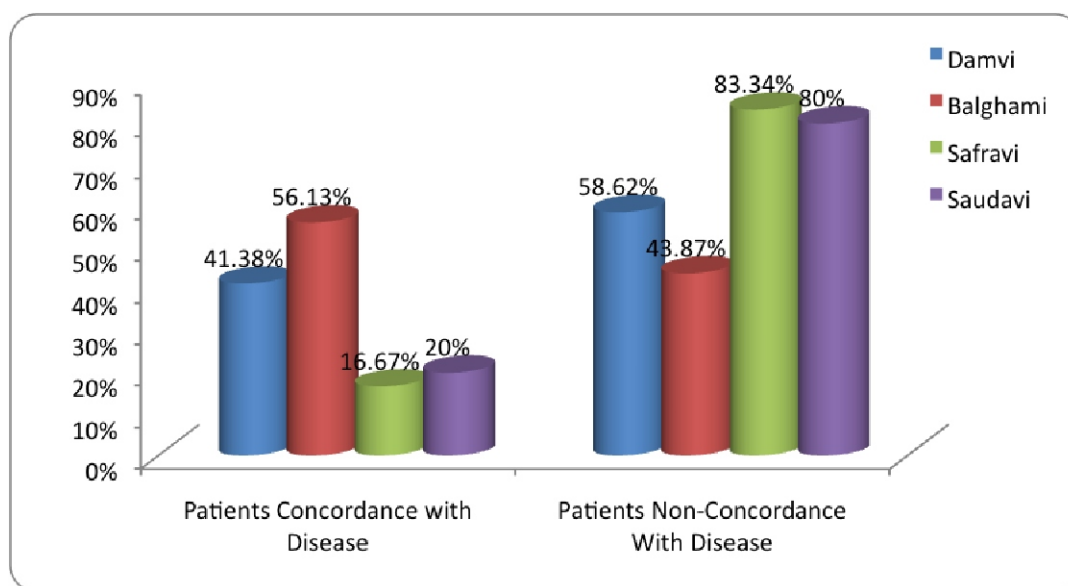
At the end of the study, out of total 180 patients of *Sue Mizaj Har* (imbalanced hot temperament), 33(18.33%) were found to have concordance with disease whereas 147(81.67%) found having non concordance with disease. Similarly, out of total 220 patients of *Sue Mizaj Barid* (imbalanced cold temperament), 144(65.45%) were found to have concordance with disease and 76(34.55%) patients were found having non concordance with disease (Table no.1). As shown in table no.2, out of total 156 patients of *Sue Mizaj Har Ratab* (imbalanced hot moist temperament) 62(39.74%) patients were found to have concordance with disease and 94(60.26%) patients were found to have non concordance with disease. Similarly, out of the total 19 patients of *Sue Mizaj Har Yabis* (imbalanced hot dry temperament), 8(42.15%) patients were found to have concordance with diseases whereas 11(57.29%) patients were found to have non concordance with disease. Out of the total patients of *Sue Mizaj Barid Ratab* (imbalanced cold moist temperament), 53(25.48%) patients had concordance with disease and 155(74.52%) patients had non concordance with disease. Out of the total 17, patients of *Sue Mizaj Barid Yabis* (imbalanced cold dry temperament) 5(29.41%) patients were found to have concordance with disease and 12 (70.41%) patients had non concordance with disease.

It is evident from table no.3, out of the total 116, patients of *Sue Mizaj Damvi* (imbalanced sanguine temperament) 48(41.58%) patients were found to have concordance with disease, whereas 68(58.62%) patients were found to have non concordance with the disease. Similarly, out of the total 212 patients of *Sue Mizaj Balghami* (imbalanced phlegmatic temperament) 119(56.13%) patients were found to have concordance with disease whereas 93(43.87%) patients were found to have non concordance with their disease. Out of the total 42 patients of *Sue Mizaj Safravi* (imbalanced choleratic temperament), 7(16.67%) patients were found to have concordance with disease, whereas 35(83.34%) patients found to have non concordance with disease and out of the total 30 patients of *Sue Mizaj Saudavi* (imbalanced melancholic temperament), 6(20%) patients found to have concordance with disease and 24(80%) patients found to have non concordance with disease.

In the light of above mentioned results and observations it can be said that concordance between *Sue Mizaj Barid* and diseases of the patients was significant, similarly the concordance between *Sue Mizaj Balghami* and diseases of the patients was also significant. The above results have resemblance with the description of eminent Unani physicians as they have mentioned in the classical literature that an individual is more prone to develop such diseases having same temperament as that of self.[2,3,5,6,7] And the patients who did not show any concordance with disease may be due to the factors responsible for change in the *Mizaj*

like age, *masakin (*residence)*,* weather, *tadabeer* (regimens), occupation and habit.[2,3,5,9,10] The other important thing which was observed during study that literate and cooperative subjects gave proper response and answer to the questions, while illiterate and non cooperative patients did not show cooperation, thus may interfere directly the determination of *Mizaj* of an individual, and because of which outcome may be affected. If these factors are corrected, concordance between *Mizaj* and disease distribution may be found precisely.

Conclusion:

In the present study, our emphasis was on *Mizaj* of individual and *Mizaj* of disease present, therefore, the present non concordance between M*izaj* and disease distribution may be attributed to those factors which tend to alter the *Mizaj* discussed above. Further study is needed to determine relationship between *Mizaj* and diseases considering the factors responsible for change in the *Mizaj*.

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