



## Gastritis (Warm-e-meda): A review with Unani approach

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### Abstract

Gastritis (warm-e-meda) is one of the commonest problem among different society. Unani physicians have mentioned the disease by different names e.g. Hurqat-e-Meda, Sozish-e-Meda, Warm-e-Meda, and Iltehab-e-Meda. Antral gastritis (warm-e-meda) is one of the commonest form of gastritis. Acute gastritis is a transient mucosal inflammatory process that may be asymptomatic or cause inconsistent degrees of epigastric pain, nausea and vomiting. In more severe cases, there may be erosion, ulceration, haemorrhage, haematemesis, Malena or rarely massive blood loss. Acute gastritis is often erosive and haemorrhagic. Neutrophils are the predominant cells in the superficial epithelium. Many cases results from drugs intake like aspirin and anasid ingestion. In Unani system of medicine plants, animals as well as mineral origin, drugs are being used for the treatment of gastritis without any known side effects. Mode of action of these drugs are both systemic and local. Further unani physicians have suggested different medicines in different seasons, regions and for different temperaments (mizaj).

**Keywords:** gastritis, medicinal plants, unani treatment, warm meda, inflammatory process

### Introduction

The term Gastritis is commonly employed for any clinical condition with upper abdominal discomfort like indigestion or dyspepsia in which the specific clinical signs and radiological abnormalities are absent [1].

Gastritis has been classified based on time, course, histological features and anatomical distribution or proposed pathogenic mechanism [2].

### Pathogenesis

The gastric lumen is strongly acidic with a pH close to one more than a million times more acidic than the blood. This harsh environment contributes to digestion, but also has the potential to damage the mucosa.

Multiple mechanism have been evolved to protect the gastric mucosa, like mucin secreting mucus which promotes formation of an untrapped layer of fluid over the epithelium that protects the mucosa and has a neutral pH as a result of bicarbonate ions secretions by epithelial cells.

Finally, the rich vascular supply to the gastric mucosa delivers oxygen, bicarbonate and nutrients while washing away acid that has back diffuse into the lamina propria. Gastritis whether acute or chronic can occur after disruption of any of the protective mechanism.

### Classification of Gastritis

Gastritis can be acute or chronic

#### i) Acute gastritis

Acute gastritis is a transient mucosal inflammatory process that may be asymptomatic or cause variable degrees of epigastric pain nausea vomiting. In more severe cases, there may be erosion, ulceration, hemorrhage, haemetemesis Malena or rarely massive blood loss [3]. Acute gastritis is often

erosive and haemorrhagic. Neutrophils are the predominant cells in the superficial epithelium. Many case results from drugs intake like aspirin and anasid ingestion.

Acute gastritis often produces no symptoms but may cause dyspepsia, anorexia or vomiting and haematemesis or Malena. [4]

#### ii) Chronic gastritis

The early phase of chronic gastritis is superficial gastritis. Chronic gastritis is classified according to the predominant size of involvement categoriozed as:

Type A -refers to the body predominant form

Type B is the central predominant form that is H pylori related. [2]

The most common cause of chronic gastritis is infection with the bacillus helicobacter pylori. However acute H pylori infection does not produce sufficient symptoms to require medical attention but chronic gastritis ultimately causes the affected person to seek treatment [3].

### Some of the causes according to the etiology of acute gastritis and chronic gastritis are as under:

- Infection with bacterium helicobacter pylori.
- Excess consumption of alcohol.
- Administration of drugs like anti-inflammatory drugs.
- Trauma by nasogastric tube.
- Repeated exposure to radiation.
- Autoimmune diseases [5].

### Unani Ideology.

Unani physicians have mentioned the gastritis (warm meda) by different names e.g. Hurqat-e-Meda, Sozish-e-Meda, Warm-e-Meda, and Iltehab-e-Meda [6].

They described gastritis on the basis of clinical features,

causative factors and humours and designate the disease accordingly as: Warm-e-meda har, Warm-e meda barid, Warm-e-meda damvi, Warm-e-meda safravi, Warm-e-meda balghami, Warm-e-meda saudavi, Warm-e-meda falghamuni, Warm-e-meda hamratemedi, Warm-e-meda rekhu, Warm-e-meda sulb. In terms of gross pathological changes Warm-e-meda may be either warm-e-meda ha'ad (acute gastritis), Warm-e-meda muzamin (chronic gastritis).<sup>[6]</sup>

According to unani concept gastritis is the condition in which there is inflammation of mucous membrane of stomach. Besides this, there is inflammation of glands too. Mucous membrane of stomach not only becomes thick, but its colour becomes gray and there occurs excessive secretion from lining of stomach which remains continuously until not treated properly. In some instances there is distension of stomach<sup>[7]</sup>.

### Unani classification

Mostly gastritis affects mucous lining of stomach thus there is congestion resulting in redness of membrane and production of mucoid discharge which is called as warm-e-nazli thus gastritis is divided into types<sup>[8]</sup>:

- a. warm-e haad meda (acute gastritis)
- b. warm-e-muzmin meda (chronic gastritis)

### Causes

Ingestion of fatty food, intake of spicy food, sweetish or bitter things, alcohol consumption and overeating may be responsible for acute gastritis. In some cases, however drinking of hot water may also cause inflammation of mucous membrane of stomach. If warm-e-haad persists for long periods, it can lead to warm-e-muzmin.<sup>[8]</sup>

There is a close relationship between chronic gastritis and H. Pylori infection as reported by many investigations, thus revealing that about 75% patients with chronic gastritis have H. Pylori infection compared to 10% in those without gastritis. H Pylori infection once established persists throughout life and generally remains asymptomatic in many cases. The rate of infection increase with age and its frequency is related to the stage of social development of the people<sup>[6]</sup>.

Infection of H. Pylori spreads either by eatables, direct contact or by vectors. However exact route of transmission is not known but it may be transmitted through Oro-oral route, Gastro oral route, Faeco-oral route and also transmits from one patient to another by inadequately disinfected endoscope<sup>[10]</sup>.

In the third book of *Canon of Medicine*, Avicenna describes the diseases of internal organs, in particular to detailed description of symptoms of gastritis and gastric ulcer, close to the modern description, i.e., vomiting, pain, heartburn, and, in some cases, bleeding<sup>[11]</sup>.

In *Canon of Medicine*, Avicenna provides data on diseases of the stomach and intestines as a reaction of the organism to changing environmental conditions and violation of specific forms of adaptability of the organism<sup>[12, 13]</sup>.

### Treatment in Unani

In Unani system of medicine plants, animals as well as mineral origin drugs are being used for the treatment of gastritis without any known side effects. Some of the commonly used single drugs (Adviya mufrida) are<sup>[14, 15, 16, 17,</sup>

18, 19, 20, 21].

Elva	(Aloe barbadensis Mill)
Khulanjan	(Alpinia galanga Willd)
Khatami	(Althaea rosea Linn)
Gaozaban	(Anchusa strigosa Labill)
Asl-us-soos	(Glycyrrhiza, glabra Linn)
Asgandh	(Withania somnifera Linn)
Bhuineem	(Andrographis paniculata Wall)
Adrak	(Zingiber officinale Rosc)
Kuttki	(Picrorhiza Kurroa Royle)
Amla	(Emblica officinalis)
Kalonji	(Nigella sativa Linn)
Karela	(Momordica charantia Linn)
Haldi	(Curcuma longa Linn)
Satawar	(Asparagus racemosus Willd)
Bael	(Aegle marmelos Correa)
Jaiphal	(Myristica fragrans Houtt)

Compound drugs (Adviya murakkaba) recommended are:

Majoon Dabidul Ward,  
Jawarish Anarain,  
Sharbat Anar,  
Majoon Zanjbil,  
Jawarish Mastagi,  
Qurs Satawari,  
Itrifal Aftimoon,  
Sharbat Unnab and  
Khammeera Sandal.

These are suggested by Unani physicians for the treatment of chronic gastritis and their efficacy against gastritis has also been tested by in vivo and in vitro studies.

Mode of action of these drugs are both systemic and local. Apart from the correction of altered mizaj (temperament), these drugs produce soothing effect on the inflamed mucosa, provide ground material for healing, removes the factors responsible for inflammation and also provide antiseptic or antibacterial effect. Further unani physicians have suggested different medicines in different seasons, regions and mizaj like Aslus-soos, as Aslus-soos (Glycyrrhiza glabra)/licorice. They reduce gastric secretion, produce thick mucus which protects the lining of stomach from inflammation and ulceration. It also contains flavonoids, so it hold anti-inflammatory and anti-bacterial effect.<sup>[22,23]</sup>

Aspaghul musallam (Plantago ovata) is a water soluble seed husk polysaccharides promote production, maintenance and wound healing properties in guinea pigs<sup>[24, 25]</sup>.

Mastagi (Pistacia lentiscus) is cytoprotective and has mild anti-secretory effect and is useful for the healing of gastric and duodenal ulcer<sup>[26, 27, 28]</sup>.

Samagh-e-arabi (Acacia arabica) contains tannins, saponins, glycosides, phenols, terpenes and flavonoids which can be easily hydrolysed, this property of samagh-e-arabi attribute to anti-bacterial and anti-inflammatory result<sup>[29]</sup>.

### Conclusion

Strength of Stomach (Meda) has been given a principal significance in unani medicine and the disease related to Meda/stomach are described in detail in their literature by various unani physicians and they also emphasised on better

functioning of Meda/stomach. Warm-e-Meda/ Gastritis is one of the commonest problem among different people. The diseases related to Meda/stomach are well described and well understood in Unani Medicine. Almost all Unani physicians have contributed towards the information of strength and ailment of Meda/stomach. There are diverse unani drugs of plant, animal and mineral origin are being used for the treatment of gastritis and having H. Pylori effect.

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