



Review Article

Management and Treatment of Gastritis (*War'm-e-Meda*) with Herbal Remedies: An Overview

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A B S T R A C T

Stomach complaints are still a common health problem. Among them, gastritis affects 25-33% of the total population of India, of which most of them belong to the age group of 15-50 years. There are two types of gastritis - acute and chronic. Acute gastritis is a mucosal inflammatory process that may be asymptomatic. Chronic gastritis is one of the most common serious epidemic infections, e.g. peptic ulcer or gastric ulcer. In the Unani system of medicine, gastritis is also known by many names: *Hurqat-e-Meda*, *Sozish-e-Meda*, *Warm-e-Meda*, and *Iltehab-e-Meda*. Gastritis is most commonly caused due to metabolic stress, drug intake, and corrosive injuries. Other factors such as tobacco consumption, psychosocial stress, and nutritional factors also play an important role in its occurrence. We will discuss in detail the efficacy of some Unani herbal drugs in acute and chronic gastritis.

Keywords: Gastritis, Unani Treatment, *War'm-e-Meda*

Introduction

Gastritis is a stomach disease. It may be in acute or chronic form. The stomach is a J-shaped organ with the oesophagus proximally and the duodenum distally.¹ The inflammation of the stomach may be only superficial. It is not always a serious condition, but may result in atrophy of gastric mucosa if found in deep gastric mucosa with a long standing period.² Gastric mucosa is made up of epithelial cells. These cells are adherent to each other with tight intercellular junctions called "GAP junctions". The gastric epithelium possesses secretory glandular cells and hormones which are essential in digestion and are a basic requirement for the defence mechanism of the mucosa.³

Unani Concept of Gastritis

According to the Unani system of medicine, this *war'm* (inflammation) most commonly occurs first in *Meda* and then in *Fam-e-meda* form. After that, it becomes *war'm-e-sulb* and lastly, the formation of pus occurs leading to abscess formation.⁴

Warm-e Meda is also called *Warm Nazli* as it affects mostly the mucous lining of the stomach which results in excess production of white mucoid discharge.

Warm-e-mada is Divided into Two Types

- *Warm-e-haad* (*Dammi & safravi*)
- *Warm-e-muzmin* (*Balghami & Saudavi*)



According to Tibb, *Jadeed Warm-e-mada* is divided into two types:

- *Warm-e-mada Haad* (acute gastritis)
- *Warm-e-meda muzamin* (chronic gastritis)

According to humours, *Warm-e-mada Haad* is divided into four types:⁵

- *Warm Meda dammi* (*falgemuni*)
- *Warm Meda safravi* (*Hamratemedi*)
- *Warm Meda Balghami* (*warm rekhu*)
- *Warm Meda saudavi* (*warm salb*)

Acute Gastritis (*Warm-e-Meda Haar*)

It is also known as “erosive haemorrhagic gastritis”. It is caused by excessive use of spicy food, sour things, aspirin, NSAIDs, alcohol, iron preparation, and diet not taken at a proper time. A few diseases like lung and liver diseases are also responsible for acute gastritis. The clinical features are pain in the epigastric region, nausea, vomiting, increase in pain after application of pressure on it, melaena, haematemesis, redness on face and body, and bitter taste in mouth. In acute gastritis, *Qurs-e-Gulnar* is beneficial. For relaxation in pain, it is advised to boil 25 gm of *Post-e-Khashkhash* with 200 ml of *Arq-e-Gulab* and to apply “*Tikor*” on the stomach. 50 ml of *Aab-e-Murrawqa* along with 20 ml of *Sharbat-e-Bazoori* with *khaksi* spread on it can be applied to relieve the inflammation and fever.^{6,7}

Chronic Gastritis (*Warm-e-Meda Muzmin*)

In this type of gastritis, mucous membrane is thickened. In this type of gastritis, the mucous membrane is thickened which may be due to alcohol consumption, hepatomegaly, arthritis, nephritis etc. Clinical features show that abdominal pain, *Nafkh-e-Shikam* (flatulence), weakness, and anaemia can be present. Chronic gastritis is caused by *balghami* and *saudawi khilt*. In *warm-e-meda balghami*, face and body colour turns white, oedema is present, and saliva is more in quantity; whereas in *warm-e-meda saudawi*, face and body colour turns black, and eyes become wide and dry. It should be treated by *nuzj*, vomiting and thin diet, *muqwayat* etc. but in *warm-e-meda balghami*, vomiting is restricted. Water should not be drunk in much quantity immediately after eating. 6 gm of *Majoon Dabeed-ul-ward* with 40 ml of *Aab-e-Murrawaqa* in should be used in the morning and evening and *Zimad-e-Jalinoos* should be applied on the stomach. 6 gm of *Jawarish-e-Anarain* should be consumed after eating. *Namak-e-Sulemani* should be used along with *Qurs-e-zarishk* for a better response.^{6,7}

According to Unani Physicians

Jurjani Says, *Warm-e-Meda* is *Damvi* and *Sufravi*. The occurrence of *Warm-e-Sulb* and *Warm-e-Baghmi* is rare. *Salabat* is found in *damvi* and *sufravi* types but in the last stage.

Gilani Says: Mostly *balghami* disorders are found in the stomach. *Warm-e-Meda* (gastritis) is the most common form.⁸

Mizaj of Meda

These are the different sign and symptoms according to different types of *mizaj*.

Meda ka Mizaj Haar: *Hazm* (digestion) is rapid and hunger is less. In stomach, soft diet (*Raqeeq ghizaen*) is wasted, e.g. meat of *Halwaan* (*Halwan ka ghosht*). In stomach, to digest easily solid diet (*Ghaliz ghizaen*) e.g. meat of goat (*Laham Baqr*). These people feel thirstier and get angry quickly.

Meda ka Mizaj Baarid: Digestion is weak and hunger is more in *barid mijaz* people. Solid diets (*Ghaliz Ghizaen*) are not easily digested and get wasted in the stomach very quickly which can lead to sour belching.

Meda ka Mizaj Ratab: Lack of thirst, loose stool, nausea and vomiting, *dawar* (vertigo), and weakening of eyes are symptoms of *ratab mizaj*.

Meda ka Mizaj Yabis: Its symptoms include an increase in thirst, dry stool, and lack of appetite.⁹

Prevention

It is very important to rule out the cause of *tukhma* (indigestion). If this indigestion is caused by water, then water should be changed. If food is the cause, then the quantity of food should be reduced. A proper diet should be taken. If the cause is “*Zof-e-Meda*”, *zimaad* (paste) should be applied. According to *Jalinoos*, *qairooti* is beneficial for a chronic condition; *Iqlilul Malik* (*Trigonella uncata*) is used in paste form. If sour belching is present, consuming 4 gm of dry coriander before food has proved to be beneficial. It should be used before night meals. *Hammam* is useful. Lukewarm water should be used and vomiting may be recommended repeatedly to expel all the morbid material from the body. After this, *Roghan* should be applied on the head. “*Takmeed*” should be practised. *Dalak* of hands and foot should be done by “*Roghan-e-Zaitoon*”. Sound sleep should be taken at night.¹⁰

Management and Treatment

Following *mufraad* (single) and *murakkab* (compound) drugs are mentioned in the National Formulary of Unani Medicine and the Unani Pharmacopoeia of India for the treatment of gastritis:¹¹⁻¹³

Mufraad Drugs

- *Nana* (Pudina)
- *Bisbasa* (Aril)
- *Jadwar* (Root)

Murakkab Drugs

- *Arq Zeera*

- Habb-e-Tursh Mushtahi
- Qurs Malti Basant

Treatment Modalities as per Mizaj

Warm-e-Meda Damvi and Sufravi: Fasd (venesection) should be done in *Rag-e-Basaliq* (basilic vein). After this procedure, it is advised to drink *Aab-e-Anaar*. In *zamane-e-Tazaeud*, it is advisable to eat *Aab-e-Angoor Khaam* and *Qurs-e-Tabasheer*. *Aab-e-Kasni* and *Maghz-e-Amaltas* can be used because they are beneficial in *warm* (inflammation). In diet, *Ma-ul-Shaeer* has a good effect.

Warm-e-Meda Balghami: To drink *Ma-ul-Usool* and to eat *Tiryaaq-e-Arba*. Diet should be in less quantity. *Dalak* should be done by *Roghan-e-Gul* with *sirka* on stomach. Some drug should be used for *mushil* (purgation) e.g. *joshanda zoofa*, *Maghz-e-Amaltas*. Vomiting is contraindicated.

Warm-e-Meda Saudavi: *Aab-e-Badyan*, *Aab-e-Karafs* with *Maghz-e-Amaltas* if *mizaj* is hot. *Aab-e-Kasni*, *Aab-e-Mako Sabz* mix with *Sharbat-e-Deenar*. If micturation is needed so *Sharbat-e-Bazoori* can be used. For constipation *Gulqand* is used. *Habb-e-Mushil* can be used. *Dawa-ul-Misk motadil* is used orally then after *Murrawaqain*, *Sharbat-e-Bazoori* or *Arq-e-Mako* and *Arq-e-Biranjaisif* is mixed with *Sharbat-e-Bazoori* or *Khamira Banafsha* to be taken.¹⁴

A randomised, controlled clinical trial was conducted on gastritis by the Department of *Jarahat* (General Surgery) in Aligarh Muslim University from March 2015 to February 2017. The study concluded that 68.2% relief was noted in *H. Pylori* negative antral gastritis patients after taking a Unani compound formulation.¹⁵

Conclusion

Gastritis is one of the commonest gastrointestinal complaints in today's scenario. It may be acute or chronic. Acute gastritis is a mucosal inflammatory process that may be asymptomatic. Chronic gastritis is the most common serious infection that may lead to peptic ulcers or gastric cancer. In the Unani system of medicine, gastritis is also known by many names: *Hurqat-e-Meda*, *Sozish-e-Meda*, *Warm-e-Meda*, and *Illtehab-e-Meda*. Since a long time, various Unani medicines (both single and compound formulations) are effective in the management and treatment of *warm-e-meda*, for example, *Arqe mako*, *Arqe badyan*, *Arqe ajwain* etc. In compound drugs, *jawarishat* is highly efficacious, for example, *Jawarish kamoni*, *Jawarish podina welaiti*, *Habbe papita*, etc. *Itrifal kishneezi* at bedtime is very effective for flatulence and gastritis. More research and trials must be undertaken to prove the effectiveness of these Unani formulations in gastritis, and it is need of time to test the efficacy of Unani formulations on scientific parameters for a better understanding of the effects.

Conflict of Interest: None

References

1. Munjal YP, Sharm SK. API textbook of medicine. 9th ed. JP Medical Ltd; 2012. 806 p. [Google Scholar]
2. Guyton AC, Hall JE. Textbook of medical physiology. 11th ed. Elsevier Saunders; 2006. 820 p.
3. Moita LA, Costa DS, Souza BS, Oliveria JS, Vasconcelos DF. Histopathological aspects of gastritis patients on gastric mucosa: mini-review of literature. J Gastroenterol Hepatol Res. 2019;8(1). [Google Scholar]
4. Razi AB. Alhabbeeb Kitab-ul-Fakhr. 1st ed. Central Council For Research (CCRUM); 2008. 258 p.
5. Mulk S, Qurshi MH, Qurshi RA. Jami-ul-Hikmat. 1st ed. Aejaaz Publication House. 705 p.
6. Mannan HA. Moalajat Amraz-e-Nizam-e-Hazm. Aligarh Muslim University; 2012. p. 52-8.
7. Ahmad F, Nizami Q, Aslam M. Classification of Unani drugs (with English and scientific names). Delhi: Fine Offset Printers; 2005. p. 186-8.
8. Khan HM. Aksee-re-Azam (Al Akseer). Idara Kitab-us-Shifa; 2011. 444 p.
9. Razi AB, Mansoori K. Urdu Tarjuma. 32nd ed. Central Council For Research in Unani Medicine (CCRUM); 1991. p. 69, 70.
10. Razi AB. Kitabul Hawi. Vol. 5. New Delhi: Central Council for Research in Unani Medicine (CCRUM); 1999. p. 29-30.
11. Ministry of Health and Family Welfare. National Formulary of Unani Medicine. Part 5; 2008. p. 17,26,138.
12. Ministry of AYUSH. The Unani Pharmacopoeia of India. Part 1. Vol 5; 2008. p. 54,55.
13. Ministry of AYUSH. The Unani Pharmacopoeia of India. Part 1. Vol 6. p. 23,24,31,32.
14. Ahmad HK. Tarjuma Shreh Asbab. 2nd ed. Central Council for Research in Unani Medicine (CCRUM); 2012. p. 609-14.
15. Khan SA, Ali T. Efficacy of Unani compound drug in endoscopically proved antral gastritis and duodenitis in Helicobacter pylori negative patients. Indian J Res. 2019;8(7):162-4.