ISSN: 2455-7587

Review Article

# **Antenatal to Adolescence: A Comprehensive Unani Approach to Pediatric Care**

# Dr. Nazia Anjum

PG Scholar, Department of Ilmul Atfal (Pediatrics), State Unani Medical College and Hospital, Prayagraj, India

DOI: https://doi.org/10.52403/ijshr.20240337

#### **ABSTRACT**

**Background:** Unani Medicine is an ancient and well-established system of traditional medicine that emphasizes holistic approach to healthcare. It is a comprehensive system of medicine having Pediatrics as a separate branch, discussed in various important literatures under the heading of "Tadabeer-e-Naumaulood wa Atfal" with antenatal care discussed under "Tadabeer-e-Hamla" or Tadbeer-i-Hawamil".

Aims and Objectives: This review aims to provide a comprehensive overview of the principles and practices of Unani pediatrics, focusing on the care of newborns and infants along with descriptions of child and adolescent care in the Unani System of Medicine. The objectives are to summarize the current available literature on Unani Pediatrics.

Methods and Materials: A comprehensive literature search has been conducted using a secondary research method, covering classical books and texts, research articles, online resources. The gathered information then organized was presented in a coherent and comprehensive manner to fulfill the objective of this paper.

Conclusion: This review provides a comprehensive summary of the principles and practices of Unani Pediatrics from conception till adolescence. The findings highlight the rich theoretical framework of Unani pediatrics in promoting optimal health and well-being in children.

*Keywords:* Unani Pediatrics, Unani Paediatrics, Child care in unani, *Ilmul Atfal*, *Amraze Atfal* 

### INTRODUCTION

The Unani System of Medicine is one of the oldest and most comprehensive medical systems, rooted in the philosophical and scientific principles laid down Hippocrates (460 BC), often referred to as the "Father of Medicine" (1,2). By separating medicine from superstition and magic, Hippocrates elevated it to the status of a scientific discipline (1,2). Unani Pediatrics, also known as Ilmul Atfal or Amraze Atfal, is a distinct branch of Unani medicine that specializes in the diagnosis, treatment, and prevention of pediatric diseases. encompasses the care of children from conception to adolescence, under the categories of antenatal care (Tadabeer-e-Hamla or Tadbeer-i-Hawamil) and infant and child care (Tadabeer-e- Naumaulood wa Atfal). The Unani System of Medicine offers a holistic approach in addressing both healthy and diseased state of body, through the use of herbal remedies, dietary therapy and lifestyle modifications to promote growth and development in children. The first 1000 days of a child's life set the stage for their healthy growth, development, and future well-being, establishing a strong foundation for a healthy adolescence and adulthood (3).

Unani literature is replete with a vast knowledge that offer comprehensive guidance on child care encompassing prenatal and postnatal care, care during delivery, new born and infant care, feeding and weaning along with selection criteria for a suitable wet nurse, regime for care of children and adolescence and remedies for various common ailments of childhood.

# PEDIATRIC AGE CLASSIFICATION IN UNANI

According to the Unani System of Medicine, the entire human life span is divided into four phases based on the amount of *Rutubat Ghariziyah* (protoplasm) and Hararat Ghariziyah (innate heat) in the body. Unani Pediatrics specifically deals with the stage of Sin e Namu, the period of growth and development which last upto 25 age $(4,\bar{5},6,7)$ . vears of This period characterized by the presence of maximum Ghariziyah (protoplasm) Hararat Ghariziyah (innate heat) in the body. Hence, the dominant temperament (mizai) is Hot and Moist  $(Har\ Ratb)^{(4,5,6)}$ .

Sin e Namu is further divided into five substages, each with its own unique characteristics:

- 1. *Sinn-i-Ṭufūlat* (Infancy): This stage spans the first 4 years of life and is marked by rapid growth and development. However, the limbs not yet adapted for walking, hence the infant crawls on all four limbs (4,5,6,7).
- 2. *Sinn-i-Ṣabā* (Babyhood): Lasts from 4 to 7 years. This stage is characterized by the appearance of teeth and the development of walking skills (4,5,6,7).
- 3. *Sinn-i-Tara'ru* (Childhood): This stage lasts from 7 to 14 years of age and is characterized by physical strength and full development of teeth<sup>(4,5,6,7)</sup>.
- 4. *Sinn-i-Murahiqah* or *Sinn-i-Bulūgh* (Juvenility/Puberty): This stage lasts from 14 to 21 years of age and is marked by the growth of facial and pubic hair and gonads <sup>(4,5,6,7)</sup>.
- 5. *Sinn-i-Fatā* (Youth): This final stage lasts upto approximately 30 years of age during which physical growth is completed (4,5,6,7).

#### ANTENATAL/PRENATAL CARE

The physical and mental well-being of parents, particularly mothers, plays a key role in influencing the health outcomes of their children. The growth and development of the fetus in-utero plays a crucial role in shaping the health of the infant and their susceptibility to diseases later in life. Unani medicine emphasizes the importance of improving maternal health even before conception, recognizing that optimal health during pregnancy can significantly impact the long-term health of the child <sup>(8)</sup>.

"Tadabeer-e-Hamla" or "Tadbeer-i-Hawamil" (Antenatal care) refers to the care and supervision of a woman during pregnancy (9). It aims to ensure a healthy and normal pregnancy, with the delivery of a healthy baby at term without any complications, by preventing and treating pregnancy-related ailments. The provided during the nine months pregnancy can help prevent or anticipate various problems, such as prematurity, growth restriction, congenital abnormalities, or asphyxia.

Unani medicine offers an efficient approach to managing pregnancy complications and promoting the overall health of pregnant women bv providing specific recommendations to facilitate a smooth pregnancy, including dietary regimens and adopting positive lifestyle and preventive attitudes. It emphasizes the importance of a well-balanced diet rich in nutrients for fetal development and growth. Recommended foods include those high in protein, minerals and vitamins such as chicken, mutton, halfboiled eggs, roasted gram, apple, grapes, and guava (8,9,10,18). Foods that have emmenagogue and diuretic effects, such as horse gram, chinese beans, caper, white lupine, and olive, are contraindicated during pregnancy as they may cause abortion or premature labour<sup>(8,9,10)</sup>. Heavy and *Sageel* (less digestible) diet, Nafakh (flatulent) food and drugs like lobia, gram, Kunjud (sesame), kibr, turmus, unripe olive, oily and fatty diet should be avoided (8,10). Instead, pregnant women should consume foods that promote digestion and prevent indigestion such as ghee (clarified butter), milk, and easily digestible grains like rice and wheat<sup>(8,9,10)</sup>. Meals should be taken frequently in smaller quantities rather than one large meal <sup>(8,10)</sup>.

In addition to diet, Unani medicine recommends proper rest and sleep in a left lateral position with 8 hours of sleep at night and 2 hours during the day. Mild exercises like slow walking are also recommended (8,10). Pregnant women should avoid strenuous physical and mental work, jumping, weight lifting, excessive coitus, anger, and sudden fear as they may cause miscarriage (8,10).

Unani medicine stresses the importance of hygiene during pregnancy. Pregnant women should practice good personal hygiene by washing their hands regularly, maintain breast hygiene by wearing a well-fitting support bra and washing their breasts daily without soap <sup>(11)</sup>. They should also maintain vaginal hygiene by wearing pure cotton underwear and avoiding tight clothing to promote air circulation <sup>(11)</sup>.

By following these guidelines given by eminent Unani physicians, pregnant women can reduce the risk of complications during pregnancy and childbirth.

### **CARE OF NEWBORN AND INFANT**

Ibn Sina in his treatise the Canon of Medicine describes Infancy as the period from birth to the time the child is able to stand up (12).

Care of Umblical Cord (12-17): After establishing the successful delivery of a healthy baby having a normal and continuous breathing, the umbilical cord should be cut at four-finger distance from the umbilicus and tied with a soft, clean and lightly twined woolen thread. The cut end of the umbilical cord is dressed with a piece of clean cloth soaked in olive oil. A fine powder, comprising equal parts of turmeric, Indian Kino, anzaroot, cumin seeds, and lichen, is sprinkled over the wound. This powder antiseptic possesses

- hemostyptic properties, which stops bleeding and promotes rapid wound healing while preventing infections in fresh wounds. When the umbilical cord separates, typically within three to four days, the navel should be dusted with ash from burnt oyster shells, calf's heel tendon, or zinc dissolved in alcohol (12-17).
- Care of the skin (12-17): Abu Sahal Masihi in his treatise Kitab Kamil alsina suggests putting a dusting powder consisting of rose petals and salt, it will harden and tone up the skin<sup>(13)</sup>. According to Ibn Sina, it is essential to cleanse the face and skin of a newborn baby with saline water as soon as possible to tone the skin and define facial features. The saline water should have a proper ratio of salt and water to avoid irritating the skin. To enhance the astringent properties of the saline, a small amount of Indian hemp seeds, costus root, sumach, fenugreek, and origanum can be added. When applying the saline water, caution should be taken to prevent it from entering the baby's nose or mouth. The skin needs hardening, as a newborn baby's body is warm and delicate, and anything that comes into contact with it may feel cold and rough. This treatment can be safely repeated if the body is still covered in secretions (balgham). Subsequently, the body should be bathed with lukewarm water. It is crucial to take special care to protect the baby from chills (12-17).
- Care of Orifices: The nostrils should be cleaned with the tip of the little finger, the nail of which has been properly trimmed (12,14,15). This ensures clear nasal passage for breathing. A small amount of olive oil should be gently dropped into the eyes (12-16,18). Ibn-sina suggests putting few drops of sweet oil into the nostrils because it cleanses the eyes and the lids (12,14,19). Majoosi mentioned the cleaning of palate with finger containing it (13) over During development in the uterus, the baby

- relied on the placenta for gaseous exchange, digestion, and excretion; hence, it is essential to dilate the anus after birth to allow for easy passage of waste (12,14). This can be achieved by gently inserting the little finger (12,14).
- Bath: Bathing a newborn/infant is a crucial aspect of their care. During summer baby should be bathed with water and in winter moderately warm water (12,14,16). The bath is best given after a prolonged spell of sleep ideally, 2-3 times a day, to maintain the baby's overall health and hygiene (12,14,16). Bathing the child with warm water containing rose petals 2-3 times a day is also be beneficial (13,19). Bath should be warm and given long enough to produce flushing and then stopped (12,14). Care should be taken to prevent water from getting into the ears as this can lead to discomfort and potential complications (12-17). When bathing the baby, it is recommended that the midwife or caregiver support the infant by gently placing their chest over their left wrist and supporting their back with their right palm (12,14,17). This technique allows for optimal positioning, freeing up the head and feet while protecting the abdomen from pressure. Following the bath, it is important to thoroughly dry the baby's body using soft linen. This involves carefully drying each part of the body, manipulating it into its natural shape, and securing it with a binder (12,14).
- Manipulation and Massage: While manipulating, the midwife should gently press the limbs and mould the various parts of the newborn baby to the proper shape by flattening those which should be flat and thinning those which should be long and slender<sup>(12,14)</sup>. This procedure is carried out gently and slowly with the soft tips of fingers. The whole process is repeated for a few days. Eyes are wiped regularly with a piece of soft linen<sup>(12,14,16)</sup>. Voidance of urine is assisted by pressing the bladder gently

- with fingertips. At the end of each session, arms should be placed by the side of thighs and the head covered with a light turban or a properly fitting cap (12,14). Massages with firm pressure are recommended for male infants, which helps to strengthen their skin and muscles by the age of four months (13,17,19). In contrast, female infants should be massaged with gentle hands using *Roghān Banāfsha*, to promote "*tarteeb*" (moistness) and to maintain their delicate skin's natural moisture balance (13,17,19).
- **Sleep** (12-17): It is crucial to provide an environment that is sheltered from direct sunlight to ensure a peaceful and undisturbed sleep for the infant. Bright light can disrupt the baby's sleep patterns, leading to frequent waking up. During sleep, it is recommended to maintain the head at a slightly elevated position using a small pillow or cushion to promote proper respiratory function respiratory and prevent distress. Additionally, care should be taken to ensure that the baby's back, neck, arms, and legs are not twisted or contorted, as this can lead to discomfort and potential  $(12,14)^{-}$ musculoskeletal issues gentle rocking and singing of lullabys are good for inducing sleep. Rocking promotes the growth of the body while music stimulates the development of mind (nafs). Sleep is encouraged after feeding to assist in digestion. However the baby should not be vigorously rocked to prevent churning of milk in the stomach (12,14).

### INFANT FEEDING

Infant and young child nutrition is a critical aspect of promoting healthy growth and development. The first 1000 days of life are particularly important, as optimal nutrition during this period has been shown to lower morbidity, reduce the risk of chronic diseases later in life, and foster better development overall <sup>(20)</sup>.

Breast milk remains the gold standard of infant nutrition, as recognized worldwide (21). The World Health Organization recommends exclusive breastfeeding for the first six months of life, with breast milk being the sole source of nutrition for the infant (22). Thereafter, infants should receive a diet of nutritionally adequate and safe complementary foods while continuing to breastfeed up to two years or beyond (22).

In line with this recommendation, Unani medicine emphasizes the importance of breastfeeding, as advocated by Ibn Sina and Jalinoos, renowed Unani physicians. They advise that infants should be fed mother's milk as much as possible, as it is the closest to the blood that nourished the baby in-utero during fetal development, making it the most suitable source of nutrition for the infant's growth and development (12-18). Breast milk should be of moderate quantity and consistency (12,14,16). The milk should be slightly thick but not too thick or too thin. Consistency of the milk may be evaluated by placing a drop of milk on the finger nail and allowed to run (12,14). If it runs freely, the milk is regarded to be too thin whereas if it stays on the same spot, the milk is considered to be too thick. Additionally, milk can also be tested by adding a little myrrh to it and stirred with a finger. If the milk separates into equal quantities of cheese and water, it is regarded to be of good quality (12,14). The breastmilk should be absolutely white in colour, free from abnormal colours such as black, green, yellow or red. It should have an agreeable odour, without any trace of acidity or putrefaction. It should be slightly sweet in taste with no bitterness, saltiness or sourness<sup>(12-17)</sup>. It should be plentiful and homogenous (12,14). If breastmilk deviates from normal characteristics, pharmacological and dietary therapies may be employed to rectify/improve the quality of milk.

To promote successful breastfeeding, Ibn Sina recommends starting with small, frequent feeds (every two to three times a day) and avoiding large feeds, especially during the initial days. Before each feed, a small quantity of milk should be squeezed out to facilitate milk flow and prevent unnecessary strain on the baby <sup>(12,14)</sup>. It is better to give the baby a little pure honey before the initial feed. A little crying before feeds is beneficial for the baby. After feeding, the baby should be encouraged to sleep to aid digestion <sup>(12-17)</sup>.

When the mother is unable to breastfeed her infant due to health issues, defective milk, or for personal comfort, a wet nurse should be employed based on specific criteria. The ideal wet nurse should be between the ages of 25 and 35 years with an ideal physique for breastfeeding such as having strong neck, broad chest and well-developed muscular body (12-17). Additionally, the nurse should have good moral character, be cheerful, and not prone to emotional outbursts. The most important and basic condition is that her quality of milk should be of ideal quality in respect consistency, colour, odour and taste (12-17). Mothers/wet nurse should consume good food in terms of quality and quantity to avoid nutritional deficiency and anemia. The normal period of breast feeding is two years (12-17).

Weaning is defined as the introduction of foods other than breast milk into an infant's diet while gradually reducing breastfeeding (23). Weaning should occur gradually rather than abruptly when the incisor teeth begin to erupt at around 8-12 months (24). Initially, bread chewed and softened by the nurse can be introduced as a transitional food (12,14). Later on, bread soaked in dilute honey or wine followed by small amounts of plain water can be given (12,14). It is essential to avoid overloading the stomach and look for signs of discomfort such as heaviness and distention (12,14).

When breast-feeding is stopped entirely, light foods such as broth and easily digestible meat can be introduced. Cones made from bread and sugar can also be offered as a transitional food. If the baby continues to cry for breast milk, a paste made from powdered myrrh and purslane seeds can be applied to the nipple (12,14).

Throughout weaning, it is essential to ensure that food is given after massage and bath to promote overall well-being (12-17).

# CARE DURING INFANCY MILESTONES

## **Physical Development:**

- Infants are naturally active and instinctive, and it is essential to allow them to move freely without restriction. As they begin to stand and toddle about, it is crucial not to force them to sit or walk against their will, as this can lead to deformation of the legs and back (12,14)
- When the baby begins to crawl, he should be placed on a smooth surface or carpet to prevent the knees from being bruised by the rough ground. Sticks, knives and other sharp objects should be kept out of the way and care taken to stop the baby from falling (12,14).

# **Oral Care** (12,14,17):

- During the eruption of canine teeth, babies often develop a strong desire to chew. Soft and gentle materials like rabbit brain or chicken fat can be provided to satisfy this need. Hard objects should not be given to the baby as they cause damage to the growing teeth (12,14).
- During dentition, massage the head and neck with olive oil emulsified in hot water to soothe the gums (12,14).
- As infant begins chewing, they develop the habit of chewing on their fingers for self-soothing purposes. A piece of liquorice, which is not too dry may be provide to satisfy this urge. Liquorice has analgesic and anti-inflammatory properties which alleviate pain and prevent the formation of ulcers. Liquorice may also be offered once teeth have fully erupted (12,14).
- For further protection against oral troubles the mouth can be massaged with a mixture of salt and honey (12,14).

 Massage the neck with olive oil or a sweet oil during dentition for added benefits (12,14,17).

### **Language Development:**

 When the baby begins to talk, the root of the tongue should be regularly massaged to promote proper speech development (12,14,17)

# CARE FROM CHILDHOOD UNTIL ADOLESCENCE (7 TO 14 YEARS)

To promote a child's physical and mental well-being, it is essential to encourage good habits and supervise their behavior. This includes managing outbursts of anger, fear, anxiety, and sleep disturbances by fulfilling their natural desires and removing causes of irritability, thereby protecting them from (12,14,16,17). A balanced mental stresses lifestyle is crucial, with daily routines such as waking up early, bathing twice a day, and consuming a proper diet. Child is allowed to play for an hour before and after breakfast. Drinking water during meals should be avoided to prevent premature absorption of partially digested food (12,14).

When a child reaches the age of six years old, they should be sent to a teacher or instructor to learn new knowledge and skills, however care should be ensured to adopt a gradual and structured manner of learning so as to not overwhelm the child at once. During this time the bathing frequency is reduced while exercise and playtime before meals should be increased.

Wine is forbidden as it increases the harmful bilious humor in children. However, children should be allowed to drink as much of cold, sweet and pure water as they like <sup>(12,14,16)</sup>. These guidelines should be followed until the age of 14, with flexibility to adapt to the child's changing needs as they grow <sup>(12,14,16,17,18)</sup>.

During Adolescence, the moisture in body becomes less and hardness and dryness appear in the tissue <sup>(12,14)</sup>. Hence, care should be taken to gradually reduce exercising. Exercise should be moderate and not too strenuous and violent <sup>(12,14)</sup>. After the

age of fourteen, a regimen similar to that for healthy adults should be followed (12,14).

# UNANI REMEDIES FOR COMMON CHILDHOOD AILMENTS

In the treatment of infants, the primary concern should be focused on the well-being of the mother and wet nurse (12,14). If necessary, interventions such as cupping, venesection, or purgation should performed to address any underlying health issues (12,14). Adequate sleep and nutrition for both the mother and baby are crucial. Proper hygiene and infection control measures should be taken to prevent the spread of disease (17). Infants and children susceptible to illness comparison to adults due to their developing immune systems (17).

The remedial measures of some common childhood illness are described below:

**Teething**: During period of teeth eruption, infants may experience symptoms such as inflamed gums, swollen temporal regions, and trismus. To alleviate these discomforts, the swollen gums should be gently pressed and massaged with oil, and a mixture of honey and chamomile or turpentine oil applied. Additionally, pouring a decoction of dill over the child's head from a height provides relief<sup>(12,14,16,25)</sup>.

**Diarrhoea** (12-16,25): Diarrhoea is a common during teething. occurrence Some physicians attribute diarrhoea as being caused by indigestion due to swallowing of some salty purulent matter from gum during feeding. However, this theory is disputed. A more likely cause is that the body is focused in dentition which hinders proper digestion, and the pain in the gums can further disrupt digestion. Mild cases of diarrhoea usually resolve on their own, but for more severe cases, various remedies such as herbal fomentations or plasters can be applied to the abdomen. Foments made of seeds of rose, celery, anise, or cumin should be applied to the abdomen or a plaster of cumin and rose seeds with vinegar or seeds of millet boiled in vinegar are applied to abdomen. If these methods fail, a small amount of lamb stomach rennet dissolved in cold water can be given as a substitute for milk. For added comfort, a breastmilk substitute like egg yolk, soft bread, or cooked barley flour can also be offered (12-16,25)

Constipation: Constipation is treated with a honey suppository, either pure or mixed with small amounts of wild mint, plain, or burned lily root. Alternatively, a spoonful of honey can be given orally and a mixture of olive oil and turpentine resin can be gently rubbed over the abdomen. Applying maiden weed and ox-bile to the navel is also beneficial (12-16,25).

**Cough:** In case of cough or cold, hot water should be poured freely over the head. Additionally, the tongue should be coated with a thick layer of honey, and then pressed with a finger to induce vomiting. This helps in the expectoration of phlegm and relives cough. Small doses of a mixture containing gum acacia, gum tragacanth, powdered quince seed, and liquorice extract mixed with sugar should be given daily with fresh milk (12-16,25).

**Stomatitis:** Infants are prone to mouth and tongue irritation during suckling of milk, which can lead to aphthous stomatitis, a condition characterized by the formation of ulcers. The most severe type is black gangrenous stomatitis, which can be fatal. Mild cases with white or red ulcers are less serious. Treatment for stomatitis typically involves applying powdered violets, either alone or mixed with roses and a small amount of saffron. Carob beans may also be effective in some cases. In more severe cases, nightshade juice, lettuce juice, or purslane juice may be needed. If the condition persists, bruised lily root may be used. If the gums are ulcerated, a paste made from myrrh, galls, and olibanum scales mixed with honey can be applied. Other remedies include applying a mixture

of sour mulberries or grapes, or rinsing the mouth with honey water, honey syrup, or wine before applying astringent remedies such as those mentioned above. In more severe cases, a powdered remedy made from turmeric, pomegranate blossoms and rind, sumach, galls, and alum can be used to dust the mouth (12-17).

**Gingivitis**: When the gums become inflamed, it is recommended to massage them with oil that contains wax. Additionally, salted meat can be applied to the affected area to provide relief from the inflammation (12,14,16,25).

**Earache**: In some cases, children may develop earaches due to exposure to cold or dampness. This is treated using medicated oil prepared by boiling a mixture of barberry, rock salt, lentils, myrrh, colocynth seed, and juniper in oil, and then filtering it before use<sup>(12-17,25)</sup>.

**Fever**: Fever in infants is often best managed by ensuring the wet-nurse is well cared for. To treat the baby's fever, remedies such as pomegranate juice with vinegar and honey, or cucumber juice with camphor and sugar can be given to the baby and nurse. Bamboo leaf juice is also used to induce sweating, applied to the head and feet before covering with warm clothing (12,14,16,25).

Multiple Boils: Boils that burst and turn black are often fatal, whereas those that remain white or red are less severe (12,14,16). The reason is that gangrenous ulcers, even in the mouth, can be life-threatening. Sometimes the appearance of multiple boils on the body can sometimes be beneficial. Boils should be treated by bathing the body with a mild astringent infusion of herbs such as rose petals, myrtle leaves, mastic leaves, and tamarisk, or by applying local oils derived from these herbs (12,14,16). Simple boils should be left alone until they reach maturity before treatment. Once a boil has turned into an ulcer, a white ointment should be applied. Washing with honey

water solution containing a small amount of nitre can also be beneficial. Ulcerative stomatitis, or mouth ulcers, can be treated with mild astringents. However, if the mouth appears dirty and unhealthy, stronger medication may be necessary. To prevent irritation, the mouth should be washed with a solution of borax mixed with a small amount of milk (12,14,16). Vesicular eruptions on the body can be treated by bathing with a decoction made from herbs such as myrtle, roses, bog-rush, or young mastic leaves (12,14,16). In all these cases, the diet of the wet nurse should be adjusted accordingly to promote recovery (12,14,16).

**Intestinal Worms**: Infants often harbor tiny worms, typically found near the anus (12,14,16). While round worms are relatively rare, tape worms are even more uncommon (12,14,16). Symptoms of helminthiasis in children include abdominal pain, irritability, salivation during restlessness, anorexia, weakness, nausea and vomiting and itching around the anus (17). Fever and spasms may also occur (17). Diagnosis is made through a combination of history and stool examination (17). The presence of larvae in the stool confirms the diagnosis (17). Round worms can be treated by administering a small amount of absinthe water mixed with milk, tailored to the individual's tolerance (12,14,16). Alternatively, worm seed, embelia, ox-bite, or colocynth pulp can be applied as plasters to the abdomen. Thread worms, which are more common in children, typically appear near the anus. These can be treated with a powder containing equal parts of Roman ginger and turmeric mixed with two parts of sugar, taken with cold water (12,14,16). Diet consists of consuming baqla, gram with vinegar, drinking clean and clear water, eating fruits after thorough washing, and avoiding Murattib Ghiza (a type of food) (13,17). Maintaining personal hygiene is also recommended (17). Shayaf siyah raal (Compound drug) or shayaf prepared with salt and borax can be used locally to treat threadworms (13,17).

#### **CONCLUSION**

The Unani System of Medicine offers a approach to pediatric care, holistic emphasizing the importance of preventative measures and natural remedies to promote optimal health and well-being in children. By understanding the stages of childhood and providing gentle, nurturing care, Unani pediatrics addresses the physical, emotional, and cognitive needs of infants and children until they reach adolescence. With its vast and rich literature and history, Unani pediatrics has the potential to make a positive impact on the health and well-being of children at familial and community-level.

# **Declaration by Authors**

Ethical Approval: Not Required

**Acknowledgement:** None **Source of Funding:** None

**Conflict of Interest:** The authors declare no

conflict of interest.

#### REFERENCES

- Unani System of Medicine: The Science of Health and Healing, Department of AYUSH, MoHFW, Government of India, New Delhi 2013
- 2. https://ayush.delhi.gov.in/ayush/unani accessed on 01.08.2024
- Journey of The First 1000 Days: Foundation for a Brighter Future, Rashtriya Bal Swasthya Karyakram, Ministry of Health & Family Welfare, Government of India April 2018
- 4. S.I. Ahmed, —Al-Umoor-Al-Tabi'yah, Principles of human physiology in Tibb, 1980
- Gruner OC, A Treatise on the Canon of Medicine of Avicenna, AMS Press, New York, 1973
- 6. Sina I. al-shaykh al-Rais Abu Ali al-Husayn Ibn Abduallah Al-Qanun fit Tibb (Urdu Translation by Kantoori GH), Idara Kitabalshifa, New Delhi, 2010.
- 7. Anjum, N. et al. (2024). Child Growth in the Context of Quwwat: An Integrative Perspective on Unani Medicine. JETIR, Volume 11 (Issue 7), 2407437. https://www.jetir.org/papers/JETIR2407437.pdf
- 8. Saeedi, & Asif Khan. (2020). Antenatal care: Routine care of pregnant women: An

- approach through Unani system of medicine.
- https://www.thepharmajournal.com/archives/2020/vol9issue9/PartC/9-8-29-117.pdf
- 9. Itrat, Malik & Khan, Atiya. (2015). Antenatal care (Tadabeer-E-Haamla) in Unani Medicine. 2. 1-5.
- Bashir, Fouzia & Akhtar, Jamal & Anjum, Nighat & Alam, Shah & Khan, Asim. (2019). Tadabeer-e-Haamla (Antenatal Care) An approach through Unani System of Medicine.
- 11. Sadaf Firdaus, Sayeed Ahmed, Ammar Ibne Anwar. Pivotal review of dietetic and hygiene during gestation. Int J Unani Integ Med 2022;6(2):07-09.
- 12. Shah MH: The Canon of Medicine. Idara Kitab us Shifa, New Delhi, Vol 1, Part 3rd. 2007: 284-299p.
- 13. Majoosi AH. Kamil-us-Sana'. Vol-II. Chapter 20 (Urdu trans. by Kantoori GH). Vol-II. New Delhi: Idarae Kitabul Shifa; 2010; 69–74p
- 14. Ibn-Sina. Alqanoon Fi'l Tib. Vol-I (Urdu Translation by Kantoori, GH). New Delhi: Idara Kitab-us-Shifa; 2010; 167–171p.
- 15. Jurjani AH: Zakhira Khawarazm Shahi. Idara Kitab us Shifa, New Delhi, 2010
- 16. Itrat, Malik & Jamal, Mohd & Khan, Javed. (2013). Role of Unani medicine in Promoting Child Health. 3. 9-16.
- 17. Fouzia Bashir et al. (2022). Child Health Care through Unani System of Medicine-An Appraisal. International Journal of Pharmacy and Biological Sciences-IJPBSTM (2022), 12 (4): 82-91.
- 18. Ibne Hubal. Kitabul Mukhtarat Fil Tib. Vol. Ist.(Urdu translation by CCRUM) New Delhi: Ministry of H. & FW, Govt. of India; 2005: 181-190p.
- Din, Muzafar & Bhat, Muzafar Din & Malik, Rabia. (2017). Practices of Tadabeer Naumolod and Nigahdasht (Care of Newborn) in Unani System of Medicine. 10.13140/RG.2.2.27988.01920
- First 1000 Days the Critical Window to Ensure that Children Survive and Thrive, UNICEF, South Africa (2017) www.unicef.org/southafrica/media/551/file/ ZAF-First-1000-days-brief-2017.pdf
- 21. Damanik R, Wahlqvist ML, Wattanapenpaiboon N. Lactagogue effects of Torbangun, a Bataknese traditional cuisine. Asia Pac J Clin Nutr. 2006;15(2):267-274.

- 22. eLENA Intervention, Exclusive breastfeeding for optimal growth, development and health of infants, World Health Organization (2023) www.who.int/tools/elena/interventions/exclusive-breastfeeding
- 23. Complementary feeding: Family Foods for Breastfed Children. World Health Organization (WHO). Geneva, 2000
- 24. https://www.betterhealth.vic.gov.au/health/c onditionsandtreatments/teeth development-in-children accessed on 01.08.2024
- 25. Rahman A and Ali SJ: Upbringing of Children and Role of Unani Medicine in Child Health Care: A Review. Int J Pharm Sci Res 2015; 6(5): 1820-25.doi: 10.13040/JJPSR.0975-8232.6(5).1820-25.

How to cite this article: Nazia Anjum. Antenatal to adolescence: a comprehensive Unani approach to Pediatric care. *International Journal of Science & Healthcare Research*. 2024; 9(3): 303-312.

DOI: https://doi.org/10.52403/ijshr.20240337

\*\*\*\*\*