# Mizaj – A Unique Concept of Unani and Key Component in Disease Diagnosis and Treatment-A Review

Md. Nafis Iqbal<sup>1</sup>, F.S. Sheerani<sup>2</sup>, B. D. Khan<sup>3</sup>, Md. Tanwir Alam<sup>4\*</sup>, Md. Nazamauddin<sup>5</sup>.

# \*Corresponding Author: Dr. Md. Tanwir Alam

\*Assistant Professor-Dept. of Tahaffuzi wa Samaji Tib (PSM), Govt. Tibbi College and Hospital, Patna, tanveernium3133@gmail.com / 7543854407

## **ABSTRACT**

In Unani Medicine human being suffering in any disease is not considered alone in symptoms and causes but also considered in total manifestations by body, mind and spirit of an individual during a disease. As an individual we all are unique and this uniqueness is defined on the basis of human *mizaj* (temperament) and this has been a source of fascination for thousands of years. The genesis of *mizaj* goes way back to ancient Greece. In Tibb, temperament is regarded as a measure of equilibrium of homeostasis which exists at diverse levels of complexity in the body, starting at the simple cell, and passing through tissue and organs and complex organ systems, to the whole person, and how he or she interacts with the external environment. This unique holistic approach is based on identification of individual temperament through general assessment of an individual. Understanding *mizaj* is not only essential for preventive care but also forms the basis of personalized treatment in Unani medicine.

Keywords: Temperament; Mizaj; Unani Medicine; Arkan; Akhlat.

# INTRODUCTION

Mizaj (Temperament) is the quality of a compound that results from the interaction of opposite qualities (kaifiyat) present in elements (Anasir) that constitute it. It is the foremost concepts of Unani Medicine. Diagnosis and treatment are based on Mizaj of the patients and the drugs given to the patients for the treatment. A person's ideal temperament is fixed. It is literally the personal organic constraints of an individual. No two people are the same according to their outlook, behavior, expression of feeling and psychological or functional capabilities. Everything (animate or inanimate) which is existing in this universe has its own specific mizaj. This fact now has been established that the mizaj of each and every species is normal and most appropriate with respect to the required functions of the species. Mizaj indicates the properties of an unsure (atom), a molecule, a cell, a tissue, an organ and of the organism as a whole. Each and every atom, molecule, khilt(humour), organelle, cell and body as a whole is furnished with a mizaj. So, every individual possesses a unique mizaj that determines their susceptibility to diseases and response to treatment. The recognition and analysis of Mizaj provide a foundational diagnostic tool, guiding the physician towards individualized and holistic care

# HISTORICAL BACKGROUND

Unani Tibb is deep-rooted in the philosophies of ancient Greek scholars like Hippocrates and Galen, as well as prominent Arab thinkers such as Razi, Ibn Nafees, and most notably, Ibn Sina. A core principle of Unani medicine is its emphasis on the individuality of each person. This idea was first introduced by Hippocrates of Cos (460–377 B.C.), who emphasized the importance of understanding the person who has the disease, instead of focusing solely on the disease itself. Galen (131–210 A.D.) later expanded on this concept, referring to it as "temperament." Hippocrates also addressed this idea under terms like Constitution, Diathesis, and Catastasis. Galen's in-depth exploration gave the concept a broader perspective. Arab scholars further refined and formalized this idea of temperament—referred to as *mizaj*—into a guiding principle for diagnosis and treatment. Notable contributors to this development included Ali Ibn Abbas Majusi, Abu Sehal Masihi, and Ibn Sina. The modern understanding of temperament in Unani Tibb reflects the formulation ultimately shaped by these Arab physicians.<sup>1</sup>

<sup>&</sup>lt;sup>1</sup>Assistant Professor-Munafeul Aza (Physiology), Govt. Tibbi College and Hospital (GTCH), Patna.

<sup>&</sup>lt;sup>2</sup>Professor- Dept. of Kulliyat, Ajmal Khan Tibbiya College and Hospital (AKTC), AMU, Aligarh.

<sup>&</sup>lt;sup>3</sup>Professor-Dept. of Moalajat (Medicine), AKTC, AMU, Aligarh.

<sup>&</sup>lt;sup>4\*</sup>Assistant Professor-Dept. of Tahaffuzi wa Samaji Tib (PSM), GTCH, Patna.

<sup>&</sup>lt;sup>5</sup>Associate Professor, Dept. of Ilmul Advia (Pharmacology), GTCH, Patna.

2022 July; 5 (2): 700 - 703

The temperament theory has its origin in the ancient four humour theory of the Greek physician Hippocrates, who believed certain characteristics of the human body are determined by bodily fluids, known as humours — blood (dam), yellow bile (safra), phlegm (balgham), and black bile (sauda)Next, Galen developed the first typology of temperament in his dissertation – De temperaments and searched for physiological reasons for different characteristics in humans.<sup>2</sup> The concept was further developed by Ibn Sina. The most notable feature of the mizaj is its approach of personality. Temperament is a basic component of Unani Medicine and the amalgam of personal, physical characteristics and his/her psychological and emotional attributes.<sup>6</sup>

Although the concept of temperament dates back several centuries, it has stood the test of time. In recent years, this idea has regained attention in modern medical research. It is now being revisited and explored with renewed interest. According to this concept, everything in existence—whether living or non-living—possesses a specific temperament, which arises from the interaction of the qualities (*kaifiyat*) of its components.

#### FACTORS AFFECTING MIZAJ

The foundation of human temperament and the reasons behind its frequent changes have intrigued people for centuries. Throughout history, each era has offered its own interpretation of why individuals differ from one another. In ancient times, these differences were often linked to bodily functions and physiology, while in modern times, they are increasingly attributed to genetics.

The factors influencing the *mizaj* of the human body are divided into two main categories:

- Khilqi Awamil (hereditary factors)
- Iktisabi Awamil (acquired factors)

**Khilqi Awamil** (hereditary factors): As per the Unani physicians every species is distinctive in its temperament and no member of the species could cross the limits attributed to that species. Zulkifle writes when newly formed temperament lies in human limit, this result in successful conception and zygote that is implanted in uterus where further development would occur. If this interaction ever surpasses the limits of human temperament, the uterus becomes incapable of supporting the zygote and miscarriage occurs. Therefore, the fetus cannot develop in the uterus unless there is a harmonious alignment between the temperament of the fetus and that of the uterus.<sup>7</sup>

Unani physicians consider these, as the factors inherited by offspring from their parents through *rutubat-e-manwiyah* (seminal fluid). These factors define the precise quality and quantity of *rutubat-e-ula* or *rutubat-e-ghariziyah* (protoplasm) in the fertilized ovum, which in turn influences the future development of the child and the eventual composition (mizaj) of the various *akhlat*. According to Kabiruddin, *quwwat-e-musawwirah* (formative faculty) shapes the organs according to their specific size and structure.<sup>8</sup>

Hence, any changes in the seminal fluid or the fertilized ovum can lead to a change in the *mizaj* of the offspring. These changes may be either widespread, affecting the entire body, or confined to a specific organ. Such alterations are often responsible for various congenital deformities and inherited diseases.

*Iktisabi Awamil* (acquired factors): These factors are influenced by the environmental conditions in which a person lives and are classified into two types i.e. the *asbab-e-sittah zaruriyah* (six essential factors) and the *asbab-e-ghair zaruriyah* (non-essential factors).<sup>2</sup>

Unani scholars are the pioneers in recognizing the external influences on character and behaviour of human beings. Al-Razi says "Age, dwelling and diet play a very important role in the change of temperament." <sup>9</sup>

Ibn Rushd also acknowledged the impact of environmental factors on human temperament. He stated that "There may be variations in temperament due to external factors like the occupation and dietary habits." <sup>10</sup>

Khairallah holds a different perspective, he says: "these temperaments differ in different seasons, regions, ages, individuals and organs." 11

Regarding this Bhika and Haq provide the explanation that "at birth when functional causes affect particular qualities, then changes occur partially or totally, temporarily or permanently. Naturally, hereditary factors play a vital role. Environmental factors do not contribute in the formation of a person's temperament, but influence it overtime."<sup>3</sup>

# **DETERMINANTS OF MIZAJ**

Unani therapy largely relies on accurately identifying a person's *mizaj* (temperament). Renowned Unani scholars have extensively discussed various methods for assessing temperament. However, the number of parameters used for this assessment differs among them. For example, Ibn Rushd recognized three factors, while Abu Sehl Masihi and Arzani considered four. Scholars like Galen, Tabri, Majoosi, Razi, and Jurjani proposed five key parameters, referred to as *Anjas Khamsa*. In contrast, Ibn Sina outlined ten determinants of temperament, known as *Ajnas-e-Ashrah* which is most commonly used.

2022 July; 5 (2): 700 - 703

Despite these classifications, temperament assessment heavily depends on the practitioner's personal skill and observation, making it prone to errors and inconsistencies. Therefore, there is a growing need to establish more scientific and accurate criteria to ensure a more reliable and precise diagnosis of temperament.

Most traditional approaches to assessing temperament emphasize the importance of *Af'al-e-Badan* (bodily functions), which are considered vital indicators. In Unani thought, evaluating a person's body functions is seen as a crucial tool for determining their temperament.

Bhika and Haque observed that central to practice of unani medicine is the diagnosis of temperament, rather than individual disease. It is the art of identifying an individual's authentic temperament and then serving their physic in the process of preserving their peculiar ideal state of health. According to Ibn-e-sina, the assessment of a disease remained incomplete unless all aspects of a person's life were considered in the diagnosis.<sup>3</sup>

## CONTRIBUTION OF MIZAJ TO DISEASE DETECTION

The *mizaj* (temperament) or homeostasis in the internal environment of the body is specific for each individual, fluctuating between certain minimum and maximum limits. Any detection of a disturbance (*sua'l-mizaj*) in this equilibrium can predict disease long before any symptoms familiar to orthodox medicine appear. This technique cannot be learnt without an integrated systemic perspective on living organisms. Maintenance of the individual temperament is essential for the preservation of health and is specific to each and every individual. According to Hippocrates "It is more important to know what sort of a person has a disease than to know what sort of disease a person has." <sup>3</sup>

Specific structure and functions of a person depend upon *mizaj*. If the *mizaj* of the person is changed, functions also will be changed. Diseases are also attributed to specific *mizaj* of a patient, season, climate and wind.<sup>12</sup> 'The four temperaments were classified as Sanguine, Phlegmatic, Bilious and Melancholic. The Sanguines were said to be recognised for such symptoms as love of movement, veracity, light-heartedness, hopefulness and rashness. The Phlegmatics were marked by slowness, dullness, incapacity for sustained effort, placidity and lack of fuss. The Bilious displayed signs of ambition, stubbornness, love for work, courage and the Melancholics exhibited signs of depression, sadness gloominess, reflectiveness and humility. Modern psychology replaced these qualities with words such extroverts and introverts generally.'<sup>3</sup>

# **MIZAJ AND TREATMENT PROTOCOLS**

Unani medicine places great emphasis on accurately determining a patient's true temperament, as it forms the foundation for a personalized therapeutic approach aimed at restoring health by supporting the body's natural healing processes. Treatment in Unani practice is guided by the belief that illness arises from an imbalance or disturbance in the individual's temperament, deviating from its natural state. Therefore, therapy focuses on re-establishing this balance, whether in temperament or bodily humours. A core principle of treatment is to use medicines whose temperament is directly opposite to the nature of the imbalance, thereby helping to restore normalcy. This concept holds significant value for clinicians, not only in terms of diagnosis and treatment but also from physiological and psychological perspectives.

## **MIZAJ IN MODERN CONTEXT**

Recent efforts have been made to correlate *Mizaj* with modern biomedical concepts like metabolic rate, neuroendocrine profiles, and psychophysiological responses. Personalized medicine in modern science mirrors the temperament-based approach of Unani medicine, validating its relevance today.

#### **CONCLUSION**

The concept of *mizaj* (temperament), a core foundation of Unani Tibb, represents a blend of an individual's physical, emotional, and psychological traits. It encompasses both strengths and weaknesses in personality and indicates a person's susceptibility to certain diseases. *Mizaj* reflects the equilibrium of four essential qualities—heat, cold, moisture, and dryness—that define every individual's unique constitution. *Mizaj* is not only a diagnostic cornerstone in Unani medicine but also a guiding principle for personalized treatment. In Unani medicine, evaluating a person's *mizaj* is vital for identifying their vulnerability to illnesses, diagnosing specific conditions, and guiding treatment. This is achieved through dietary modifications, herbal remedies, and adjustments in lifestyle and behaviour.

## **ACKNOWLEDGEMENT**

We acknowledge all the authors/writers whose references has been inculcated in this article.

# DISCLOSURE STATEMENT

No potential conflict of interest was reported by the author(s).

#### FUNDING

Nill

## CONFLICT OF INTEREST

Nill

#### REFERENCES

- 1. Sherani FS. 2004. Temperaments, Body Type and Exercise. 1st Edition, Vishwa Vidhyala Prakashan Kendra, Aligarh.
- 2. Ahmed SI. 1980. Introduction to Al Umoor Al Tabiah, 1st Edition. Saini Printers, Pahari Dhiraj. New Delhi.
- 3. Bhika R and Haq MA. 2000. Tibb traditional root of medicine in modern routes to health, Mountain of light Johenesburg, South Africa.
- 4. Kabiruddin Mohd. YNM. Tarjuma wa Sharah Kulliyate Nafisi. Part first and second, Idarah Kitabus Shifa, Daryaganj New Delhi.
- 5. Razi ABMBZ. 2000. Kitabul Murshid. Urdu translation by Razi-ul-Islam Mohd.,1st Edition, N.C.P.U New Delhi.
- 6. Gruner OC, 1983. The four temperaments in Avicenna's tract on cardiac drugs and essay on Arab cardiopathy. IHMMR, New Delhi, and IHTR Karachi Hamdard foundation press Pakistan.
- 7. Zulkifle M, Zaidi IH and Ansari AH. 2005. Concept of embryology in Unani system of medicine, UNIMED, Deptt. Of Kulliyat, AKTC, AMU, Aligarh.
- 8. Kabiruddin M, 1947. Ifada-e-Kabir Mufassal, Islamic Bazaar Noorul Umra Hyderabad.
- 9. Razi Z.1991. Kitabul Mansoori, Urdu translation by CCRUM, New Delhi.
- 10. Ibn Rushd. 1987. Kitabul Kulliyat, Urdu translation by CCRUM 2<sup>nd</sup> Edition.
- 11. Khairallah AA. 1946. Outline of Arabic constitution to medicine and the allied sciences, American press, London.
- 12. Kabiruddin Mohd. 1930. Kulliyate Qanoon, Sheik Mohd. Bashir and Sons, Lahore, Pakistan.