Review Article

A REVIEW ON THERAPEUTIC APPLICATION OF FASD (VENESECTION) IN UNANI MEDICINE

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ABSTRACT

According to Unani medicine, Health is attributed to the equilibrium of akhlat (humours) in the body, according to their quality and quantity, while disease occurs due to disturbances in this equilibrium. Fasd is one of the methods of evacuation of morbid matter from the body for the preservation and restoration of health. Venesection is carried out when there is excess of blood in the body and patient is either at risk of developing a disease or has actually developed it. In present era it is known as phlebotomy. It has been a popular therapeutic practice since antiquity up to the late 19th century. In present paper, therapeutic applications of Fasd (venesection) in Unani medicine are discussed.

Keywords: Fasd, Venesection, Unani medicine

INTRODUCTION

Unani scholars had classified diseases, on the basis of cause into three broad categories. These are Sue- Mizaj, Sue-Tarkeeb and Tafarruq-e- ittisal. Amraz Sue Mizaj deals with the disease occurring due to abnormal change in the temperament of an organ, system or whole body. These are further subdivided into two sub-categories; Sue Mizaj sada (without morbid matter) and Sue Mizaj maddi (with morbid matter). In Sue mizaj maddi, this morbid matter may be inside the vessels, cavity, in interstitial space, in potential cavities or adherent to surface. The advocated principle of treatment in such conditions is elimination of disease causing morbid matter from the body1,2. Methods of assistance for elimination are Exercise, Massage, Venesection, Emesis, Leeching, Hijamat, Hammam etc. Among these, Fasd is one of the most important and widely practiced methods by Unani scholars3,5. The general indications of venesection are in damvi Amraaz like Shaqueqa, Sarsam, Khunaaq, Ramad damvi, Wajaul mafasil damvi, Judri, Khafqaan, Sakta, Iqunnisa, Zatul riya, Zatul janj etc and in persons, who are prone to develop diseases due to excess of blood1,3,5. In the former it is used for therapeutic purpose and in latter it is advocated for prophylactic purpose. In modern era, venesection was begun to be questioned by European physicians and due to lack of evidence based research, it has lost its utility.

Bloodletting Procedure

Material Required

- Scalpel, Gloves, Cotton, Bandage, Antiseptic lotion
- Anaesthetic agent, and haemostatic drug like Sange jarahat, Dammul akhwain etc.
- Emergency kit

Sterilization of instruments of venesection like scalpel, blade, cotton etc.
- Ask the patient to lie down, but the position can be changed according to the vessels to be incised.
- Identify the vessel which is to be venesected.
- Veins are to be made prominent with a tourniquet at a distance of 4 cm proximal to the site of incision.
- Cleansing of the site of Fasd by antiseptic solution.
- Apply anaesthetic agent at site of incision.
- Give incision according to disease and condition of patient.
- Monitor the condition of patient during the procedure. If any complication arises during bloodletting like syncope, vomiting, spasm etc. then stop the bleeding and treat the condition accordingly. While in absence of complications, Fasd should be stopped when speed of bloodletting becomes slow or when colour of blood changes from blackish to bright red or consistency of blood becomes thin.
- Finally, the whole area is then dressed and bandage.
- After venesection, patient is advised to bed rest for 6-8 hours.
- Patients are advised to avoid har foods and drugs, exercise and hammam.
- They are also advised to take light and easily digestible foods1,5,7.

The Amount of blood to be removed in venesection depends upon disease. In some diseases, profuse bloodletting is recommended while in some, minimal bloodletting is advised6,7.
CONCLUSION

In modern era venesection has been discarded mainly on the basis of some modern pathology based studies, which is entirely different from Unani concept. So thousand years observation of Unani physicians cannot be discarded merely on the basis of those studies, which were conducted on a small sample size. Thus, in present scenario further studies should be conducted on large sample size for scientific validation of bloodletting.

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