

DIETO-REGIMENAL APPROACH FOR THE MANAGEMENT OF SAMAN-E-MUFTRIT (OBESITY): A REVIEW

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ABSTRACT

Saman-e-Mufrat (Obesity) is defined as a condition of abnormal excessive fat accumulation in adipose tissue due to enlargement of fat cells in size or number or in combination to the extent that health is impaired. According to Unani philosophy, it is a *Balghami Marz* (disease due to phlegm) mentioned under the heading of *Farbahi*, which means *Motapa* (Obese). Unani scholars have discussed predisposing factors, and some *Tadbeer* (Regimens) e.g. *Hammam* (Turkish bath), *Ilaj bil Ghiza* (Dietotherapy), *Riyazat* (physical exercise), and other procedures to keep the body healthy and fit. It is a complex disorder that presents several risk factors in almost all age

groups. It is a dangerous public health problem of the present century and is one of the leading and preventable causes of mortality that is affecting the whole world. Obesity is emerging as an important health problem in India. The national family health survey [N.F.H.S.] shows that 12.1% of men and 14.8% of women in India are either overweight or obese. Obesity is the world's one of the oldest metabolic disorders. The WHO now considers obesity to be a global epidemic and a public health problem. Sedentary habits with little activity are the main reason behind the increased incidence of Obesity. It can lead to heart problems, diabetes, and other serious health issues, which can reduce life expectancy. Modern drugs for the treatment of obesity have their own side effects. Changes in dietary habits and sedentary lifestyles are known to be associated with changes in health and increased prevalence. During the past decades, efficacious strategies have been developed for the prevention of these changes. These strategies involve general lifestyle changes, which

include a healthy diet, optimal weight, physical activity, and no alcohol consumption. The Unani system of medicine advocates a healthy lifestyle through Ilaj bil Tadbeer, Ilaj bil-Ghiza, Ilaj bil Dawa, to prevent all kinds of diseases. Thus, in this paper, an attempt has been made to highlight the strength of Unani medicine in the management of obesity regarding the dieto-regimenal approach, and this review has been done for the non-pharmacological management of obesity which includes the two basic fundamentals of Unani medicine i.e, Ilaj bil Ghiza (diet therapy), Ilaj bil Tadbeer (regimenal therapy or drugless therapy).

KEYWORDS: Saman-e-Mufrit; Lifestyle disorders; Ilaj bil-Ghiza; Ilaj bil-Tadbeer; Regimenal therapy.

INTRODUCTION

Saman-e-Mufrit (Obesity) may be defined as abnormal or excessive fat accumulation that presents a health risk. It is a lifestyle disorder and widespread in both developed and developing countries. The important predisposing factors of obesity are unhealthy diet, lack of physical activity, and sedentary nature of work. People taking extra high-energy foods, saturated fats, trans-fats, and free sugars in- their diets, are more vulnerable to obesity. Obesity is regarded as a primary risk factor for non-communicable diseases like diabetes; cardiovascular complications mainly heart diseases and disabilities like osteoarthritis. It also poses serious public health implications and has been associated with mortality and morbidity.^[1] In the system of Unani- medicine obesity is described under the heading of *Saman-e-Mufrat* which is a combination of two words *Saman* means fat, *Mufrat* means excessive (Saman-e-Mufrat stands for excessive fat and *farbahi* (a Persian word) means Motapa (obese). While the term obesity comes from the Latin word „obedere“, to devour and in English means very fat.^[2,3] These days obesity is also defined in terms of body mass index (BMI). Jalinoos (Galen) (131-210 AD) has described very scientific principles of treatment for morbid obesity.^[4,5] According to Jalinoos the term given to Obesity is ‘zakhamat-e-jism’ regarding him Rhazi translated his quote as “ A person obese from childhood died earlier than a normal person”^[6] The most common ways to assess body fat distribution are as follows:

1. Body mass index (BMI)
2. Waist circumference (waist measurement in inches).
3. Abdominal circumference
4. Hip waist ratio

Body mass index

A good way to decide if your weight is healthy for your height is to figure out your body mass index (BMI).

BMI category

Below 18.5	Underweight
18.5 - 24.9	Healthy
25.0 - 29.9	Overweight
30.0 - 39.9	Obese
Over 40	Extreme or high risk obesity

Waist circumference (Waist measurement in inches)

Your waist measurement is another way to estimate how much body fat you have. Extra weight around your middle or stomach area increases your risk for type 2 diabetes, heart disease, and stroke. People with "apple-shaped" bodies (meaning their waist is bigger than their hips) also have an increased risk for Obesity.

Historical background

The concept of *Saman-e-Mufrat* was initially described by Buqrat (Hippocrates: 460-370 BC) in his famous book "*Fasool e Buqratia*". He had given a detailed description of *Saman-e-Mufrat* (obesity) including its complications, prevention, and management. Another Unani physician *Rofus* (98-171 AD) in his book *Tahzeel Sameen* (treating obesity) described that obese people are more prone to diseases as they lack *Khoon Saleh* (healthy blood) and have an excess amount of *Khilt e Bhalgam* (Phlegmatic humor).^[7] *Saman-e-Mufrat* can be related to mortality, this was described by the great Unani scholar *Jalinoos* (Galen: 129-210 AD) who has mentioned that obese individuals are more prone to early death in comparison to the lean and thin persons.^[8]

The causative factors of *Saman-e-Mufrat* were also quite clear as another Unani scholar Ali Bin Rabban Tabri (847-861 AD) has described the etiology and pathophysiology of *Saman-e-Mufrat*, specifically excessive eating and sedentary lifestyle have been described as the most important factors for the obesity^[9] in his famous book *Firdous-al-Hikmat*. *Zakariya Razi* (Rhazes: 860-925 AD) described that *Tar Ghiza* (oily food) is responsible for the obesity and explained the concept of central obesity, as he classified obesity into *Maqami* (Local) and *Umoomi* (General) and has given separate- treatments for both types of obesity. He explained that when *Shahem* gets deposited in a particular organ it is called local or central obesity for

example protrusion of the abdomen due to the deposition of fat while there is a generalized deposition of fat in the body, it is called general obesity.^[10]

The all-time great philosopher of the medical system *Ibne Sina* (Avicenna: 980-1037 AD) has described the concept of end-organ damage in obesity. He has stated that obese people are more prone to diseases as their *Hararat Ghareezia* weakens due to *Sue Mizaj Barid* and constriction of vessels (*Tangi Urooq*) which results in a decrease in the passage of “*Rooh* (Neuma)” to the organs and finally it causes the death of an organ (end-organ damaged).^[11,12]

Similarly, *Jalinoos* has given reasons for the resultant mortality in *Saman-e-Mufrat*, and he has mentioned that *Saman-e-Mufrat* reduces the diameter of vessels and produces *Imtelaa* (congestion) and prevents *Tarveeh*. Due to *Imtela* and *Adme Tarveeh* (Tissue anoxia), the death of a person may occur unexpectedly.^[8] *Ibne Nafis* (1207– 1288 AD), in his book, has described the correlation between morbid obesity and cardiovascular, *cerebrovascular* diseases, and respiratory disorders.^[13] *Daud Antaki* (1541-1599AD) mentioned complications and treatment of obesity in his book *Tazkira tu Uolil Albab*. *Azam Khan* (1813-1902 AD) described details about the treatment of *Saman-e-Mufrat* in *Rumuz-e-Azam*.^[14]

Pathogenesis

Regarding pathogenesis of *Saman-e-Mufrat*, two important theories have been present in this condition. Deposition of fat leads to suppression of *Hararat Ghareezia* (innate heat of the body) due to *Baroodat-e-Mizaj* (cold temperament). As a result, *Hararat Ghareezia* is not equally distributed in the body. *Tangi-e-Urooq* (narrowing of blood vessels) is another factor, which hinders the propagation of *Rooh* (spirit) in the vital organs of the body. In the advanced stage of the disease, these two factors predispose to very high risk for various lifestyle disorders.^[15,16,17]

Causes

- The cause of accumulation of fat in the body is due to the predominance of *balgham* in the blood. Due to this, it increases *ratoobat* and *baroodat kaifiyat* of the body caused by *Sue- Hazam* (dyspepsia), *Ifrat-e-Naum* (excessive sleep), *Ifrat-e-Sukun* (excessive rest), and *Qillat-e-Harkate Badani* (sedentary lifestyle).^[3]
- According to Unani classical literature, the main causes of *Saman-e-Mufrat* in Unani medicine are consumption of alcohol, sleeping on a soft bed, listening to music,

consuming *Martoob ghiza* (fatty diets), lack of exercise, intake of excessive foods, and a sedentary lifestyle.^[9]

- *Saman-e-Mufrat* is a *Balghami* disease and hence *Khilte Balgham* predominates in the body of a person and it is a predisposing factor in the causation of obesity. In this condition loss of movements of *Aaza* (organs) is due to excessive accumulated *Balgham* and cold temperament, hence the person becomes lazy and dull. *Balgham* after mixing with blood produces lubrication in its *Qiwam* (viscosity).
- Deposition of *Balgham* (atherosclerosis) obstructs *Nufuz* of *Rooh* (passage of oxygen) in the organs which finally causes the death of the obese persons. When *Shaham* deposits in a particular organ it is called local or central obesity, for example, protrusion of the abdomen due to the deposition of fat. When there is a generalized deposition of fat in the body, is called general or peripheral obesity.^[10,11]
- Unani scholars said that a person having more fat in the body is at risk of rupture of blood vessels because vessels are compressed due to excess fat and especially if obesity develops in the early stage of life, then the blood vessels become narrow. This condition has not fulfilled the demands of *rooh-e-haiwani* and causes diminution of *hararat-e-Ghareezia* (innate heat of body).
- This excess fat leads to improper digestion and so disruption of *Mizaj*, which become *barid* and *shiddat-e-baroodat* may cause even death sometimes. This *shiddat-e-baroodat* causes the narrowing in blood vessels that directly affect the functioning of the liver, kidney, heart, and other important organs of the body.^[11,24-27]

Risk factors

1. Excessive use of Alcohol
2. Genetic predisposition
3. Oily & fatty diets
4. Excessive and highly nutritious diet
5. Sedentary lifestyle
6. *Martoob Ghiza* (fatty diet like meat)
7. Excessive Sweet dishes
8. *Martoob Roghaniyat* (fatty oils)

9. Excessive rest and sleep^[15,18,19,20]

Complications

1. Breathlessness due to Imtila of urooq wa Tajaweef (congestion of blood vessels and cavities).
2. Ghashi (Syncope) and Sakta due to Imtila.
3. Rupture of any large vessel which has Raqiq Jirm (thin vasculature).
4. Khafqaan (palpitation), Tap (Fever), Qai (vomiting)
5. Aqr (sterility): The obese men carry less amount of blood, incriminated as a potential factor for deficient production of semen. Usually Obese women either do not conceive easily, if conceive, generally abort it.
6. Falij (paralysis)
7. Jarb (sprue) wa Is'haal due to increased Ratoobat (wetness).
8. Loss of Libido
9. Fatty liver disease
10. Sudden Death^[15,16,17,21,22,23]

Prevention and Management

The management can be categorized into three parts:

1. Ilaj bil Tadbeer (Regimenal therapy)
2. Ilaj- bil- Ghiza (Dieto therapy)
3. Ilaj bil Dawa (Pharmacotherapy)

But here we are focusing on complimentary or safe and effective alternative medicine, which includes the Dieto-regimenal approach for the management of *Samane mufrat*(Obesity). The principles of management of any disease in Unani medicine are laid down as follows:

1. Correction of the *Sue Mizaj Barid*. Since the disease is cold in temperament, so the diets and regimens of opposite temperament i.e. Hot and dry should be preferred. (*Ilaj Bil Zid*)
2. Elimination of the existing causes.
3. If there is an accumulation of *Madda* or *Khilt Balgham* in the body then the use of those regimens and diets should be preferred which causes diversion(*Imala*) and evacuation (*Tanqia*) of the morbid matter from the body will be beneficial.
4. If there is an excessive amount of *Khilte Dam* in the body then the use of *Fasad* (venesection) or Hijama-bil-Shurt will be beneficial.

5. To reduce *Saman-e-Mufrat*, bulky foods with the least nutritional values should be served so that mesenteric vessels will get the least time to absorb the nutrients completely. Due to bulky and less nutritious foods, it occupies the space of the stomach and the obese patient feels fullness in the stomach.^[28-31]

Based on the above-mentioned principles the physician may adopt the following measures and can modify the *Asbab-e-Sitta Zaroorya* (six essential requisites) according to the disease condition.

Ghiza (Diet)

Those substances, can become part of the cells, tissue, or organ of the human body and provide *badal ma tahallul* (replacement of cellular organelles).^[43] They contain carbohydrates, proteins, lipids, vitamins, minerals, etc.^[44]

Some quotes from Unani physicians regarding diets or diet therapy

The significant role of food and drink in the healthy living of an individual and the selection of good diets for the prevention and treatment of diseases are quoted by many ancient Unani physicians. **Hippocrates** stated that “let your food be your medicine, and medicine is your food”, and “leave your drugs in the chemist’s pot if you can heal the patient with food”.^[47]

Other statements of Hippocrates are “the cause of sickness is overeating and the cause of health is eating like a bird”, “take diet only when you have desire”, and “good wines in small quantity is the friend of body and apple is the friend of the soul”.^[48]

“**Avicenna,**” says “stomach is the house of disease and diet is the head of healing”.^[49]

“**Pythagoras**” stated that “people should take care of their health; the diet, coitus, and exercise should be in a balanced way”. Aristotle stated that “those persons who are taking grape juice, bread, and mutton, doing physical exercise and repose, taking sleep and wakefulness in a balanced way they don’t sick frequently”.

“**Haris bin Kalda**” quoted that “pomegranate is the best fruit among all the fruits, rose is the best essence among all the essences, and kasni (*Cichorium intybus*) is the best vegetable among all the vegetables”.^[48]

“Razi” stated that “good nutrition, adequate rest, happiness and best line of treatment are the pillars for curing of diseases”. He also stated that “the amount of desired food items should be less for a patient”, and “whenever possible, treatment of the diseases should be done by diets only not by drugs”.^[50]

Classification of diet^[44,45]

All the form of diets have been classified according to the nutritional value and chyme.

Ghiza-e-Lateef(Light and soft diet)

They are easily digestible food items and reduce the viscosity of *khilt* (humour) inside body and are recommended in those cases where the pores of the body are impeded with *ghaleez madda* (viscous matter) that is unable to eliminate from the body by excretory system. E.g. *aab-e-anar* (pomegranate juice), *aab-e-mosambi* (orange-navel juice), *aab-e-naranji* (orange juice), *maa-us-shaeer* (barley water), tea, coffee, wine, etc.

Types of Light and Soft diets

Attenuated highly nutritious diets	Meat distillate, Half boiled yolk of egg
Attenuated less nutritious diets	Fruit and Vegetable juices, tea, coffee
Attenuated, highly nutritious and good chyme forming diets	Meat distillate, Mutton soup, Chicken soup, Half boiled yolk of egg
Attenuated, highly nutritious and bad chyme forming diets	Organs of Animals such as Liver, Lung, Kidney
Attenuated, less nutritious and good chyme forming diets	Apple, Pomegranate, Orange, Grapes, Beet Root, Carrot, Litchi, Mango, Pumpkin, Sweet bottle gourd juices
Attenuated, less nutritious and bad chyme forming diets	Radish, Mustard, Lettuce

Ghiza-e-Kaseef (Heavy diet): This type of diet cannot be easily digested and forming *ghaleez khilt* (viscous humour) which may produce *sudda* (obstruction) in organs.

Ghiza-e-Motadil (Moderate diet): This type of diet produces moderate viscosity of *khilt* (humour) which are usually not harmful to the body. e.g. *Khichdi*, cow’s milk etc.

Types of heavy diet

Heavy & Highly Nutritious diet	Beef meat, Mutton, Chicken
Heavy & Less Nutritious diet	Dry beef meet, dry mutton and chicken
Heavy, Highly Nutritious and Good Chyme forming diet	Fully boiled egg, Meat of young goat and sheep
Heavy, Highly nutritious and bad chyme forming diet	Duck meat, Horse meat, Veal meat

Heavy, less nutritious and good chyme forming diet	Meat of young beef
Heavy, less nutritious and bad chyme forming diet	Salted meat, dry beef meat

Ilaj bil Ghiza (Dietotherapy)

Principles of treatment by dietetics

Unani physicians strongly believe that food provides strength to the body and the morbid matters both. The wrong selection and mismanagement of diet may hamper the *tabiyat* (physic) which is known to increase the severity of diseases. Complete abstinence from diet or partial reduction is generally advised in acute illnesses whereas only partial reduction is advised in chronic diseases to restore the faculties of the body.^[46]

Avoid fatty diets

Ibn Hubal Al Baghdadi (1121–1213 AD) suggested that obese persons should avoid fatty diets and suggested a gradual decrease in diet, otherwise, adverse effects will be observed in the patient.^[32]

Decrease in food intake (Taqleel ghiza)

Taqleel-e-Ghiza i.e. the concept of change in diet patterns means food low quantity and quality of food is very unique to the Unani System of Medicine which lays great stress on treating certain ailments by administration of specific diets or by regulating the quality and quantity of food.^[11,26,32-35]

Therefore, the changes in eating habits must be permanent, to reduce weight.

A diet chart may be prepared with the consultation of an experienced dietician. Reducing the energy density of food allows the patient to feel satiated while consuming fewer calories. Behavior therapists are required to counsel patients to make changes in the eating activity habit of obese persons. obese persons must modify their eating habits and self-monitoring of food.^[36-38]

Foods in measurement by 100gm of content with their calories consumption

Food	Calories (kcal)	Protein (g)	Food	Calories (kcal)	Protein (g)	Food	Calories (kcal)	Protein (g)
Sprouts	51	4.9	Broccoli	24	3.3	Potato	94	2.5
Beetroot	31	1	Lettuce	16	1	Garlic	137	7
Cabbage	31	1.6	Cauli-Flower	29	2	Corn	131	5

Tomato	23	1	Spinach	20	2.3	Parsley	30	1
Radish	15	1	Carrot	40	1	Asparagus	17	2
Pumpkin	77	1.5	Cucumber	12	2.7	Onion	39	1
Green beans	41	2.6	Peas	90	7	Dried beans	313	22
Lentils	342	26	Soya	512	41.6	Barley	363	10.6
Wheat	347	14.4	Rice	353	8	Millets	371	11
Oatmeal	386	14.4	Egg pasta	392	15	Sorrel	23	2

All Vegetarian Sources of protein one can consume 1gm per kilogram of the body weight in general or for healthy adults, a minimum of 0.8 gm of protein per kilogram of body weight is recommended. The need for people who do sports and physical activity is higher. For endurance athletes, 1.4-1.6 g/kg protein is recommended, and 2 g/kg protein is needed if you are on a weight-loss diet.

Diet Chart for Weight-Loss

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Early Morning 5-6 AM	Apple	Carrot	Banana	Dry fruits	Banana	Banana	Banana
Breakfast 7 AM	Oats OR Ragi Idli/ Oatmeal	Utappam	Oats Dosa	Wheat Upma	Chapati	Noodles/Oats Masala	Bread Omelette
Morning 9 AM	Fruits	Dates	Fruits	Curd	Handful of Peanuts	Dates	2 Biscuits
Mid-Morning 11 AM	One Glass Buttermilk with Cumin powder and Salt	Cumin Water	Ginger Lemonade Water	Buttermilk	Ginger Lemonade Water	Buttermilk/ Coconut- Water/Sugarcane juice	Cumin Water
Lunch 1 PM	Rice+ Egg Curry	Rice+ Carrot Curry	Rice+ Lady finger Curry	Rice+Egg Curry	Rice+ Capsicum Curry	Rice+Soya Curry	Veg Pulao+ Raita
Mid-Afternoon 3 PM	CURD	CURD	CURD	CURD	CURD	CURD	CURD
Evening Snacks 5 PM	Fruits/ Green Tea	Fruits/ Green Tea	Fruits/ Green Tea	Fruits/ Green Tea	Fruits/ Green Tea	Fruits/ Green Tea	Fruits/ Green Tea
DINNER 7 PM	2 Roti+ Tomato Dal	2 Roti+ Soya/ Capsicum	2 Roti+ Cucumber Dal	2 Roti+ Onion Curry	2 Roti+ Spinach Dal	2 Roti+ Potato Carrot Masala	2 Roti+ Raita
Bed TIME 9 PM	MILK	MILK	MILK	MILK	MILK	MILK	MILK

Ilaj-bil-Tadbeer (Regimenal therapy)

Tadbeer is an Arabic word, meaning regimen or systemic plan, whereas *Ilaj* means therapy or treatment. So *Ilaj Bit Tadbeer* means treatment through regimen, through which care of the sick person and maintenance of general health is performed with the help of certain procedures, tools, and equipment described by eminent Unani physicians. The following regimens may be carried out:

1. Hammam-e-Yabis before the meal.
2. Tareeq (Increased sweating).
3. Increased Tahleel (dissolution) of body fat.
4. Hard work and sleeping on a hard bed.
5. Vigorous exercise like running.
6. Vigorous massage of the body with Haar and Muhallil Roghaniyat such as Roghan Shibbat, Roghan Qust, Roghan Soya, Raghan Yasmin and Roghan Nardin.
7. Hijamah (Wet cupping) is useful in the reduction of fat.^[15,17,18]

Riyazat (Physical activity)

It is one of the most important tools for reducing obesity by the expenditure of extra energy. However, exercise should be on regular basis and it should be introduced gradually and under medical supervision especially in advanced obesity, otherwise, negative effects may occur. Exercise should be active and followed by a massage of *Muhallil Roghaniyat* (resolving oils). Baths should be taken regularly before the meals.

Tareeq (Diaphoresis)

Tareeq (Diaphoresis) is a process of induced sweating. It is instrumental in liquifying the sticky and adherent humors lodged in the peripheral tissues. Many Unani physicians recommended *Tareeq*, a mode of excretion to control the progress of *Saman-e-Mufrat*.^[39,40]

Hammam muarriq (Medicated bath)

Ḥammām is derived from the word “*Ḥamm*”, which means “to bathe”. *Ḥammām* is a place used for bathing, consisting of several rooms with one room leading to the other with specific provisions and conditions customized For this purpose, the steam bath could be used which may be considered the third room of a traditional hammam. In this process the *rutubat* inside the body comes to the periphery and when not excreted much then it moist the organs which are near the periphery. On the other hand, staying for a long duration in *hammam* causes profuse sweating which results in heat and dryness in the organs by loss of *ratubat* from the

body. Obese persons who cannot exercise adopt Turkish baths to the reduction of their weight.^[11,41,32,34]

Idrar-i-Bawl (Diuresis)

Diuresis (*Idrar-i Bawl*) is a process in which the formation and excretion of urine are increased for the management of bodily ailments. It is one of the important processes adopted for the evacuation of morbid matter from the body through urine. Diuresis can be induced by adopting specific methods like exposure to cold, drinking cold water, and intake of plenty of fluids. It can also be induced with the help of certain drugs that have been mentioned in classical Unani literature under the heading of Diuretics (*Mudir-e-Bawl*).^[42]

Along with the dieto-regimnal treatment, various lifestyle modifications are also required for the control of obesity as well as diseases associated with obesity, Following are some important points which should be kept in mind:

- Food consumed should not be spicy, oily and fatty
- Alcoholism and smoking can cause various complications in people with excessive fat.
- Red meat should be avoided.
- Regular exercise of 30-45 min to be done, exercise should include cardio, Aerobics, Walking, Yoga, etc.
- Try to live free from stress and be optimistic in life.
- Eat green salads along with tomatoes and leaves of mint as they can easily burn excess fat.
- Drink cabbage juice or eat cabbage as it is very beneficial for controlling obesity.
- Fruits like papaya, apple, and carrot must be taken as they help relieve obesity
- Lukewarm water must be taken after every lunch and dinner as it helps in the proper burning of excess fat

CONCLUSION

Saman-e-Mufrat (Obesity) is becoming one of the most prevalent health concerns among all populations and age groups worldwide, resulting in a significant increase in mortality and morbidity related to coronary- heart disease, diabetes type 2 metabolic syndrome, stroke, and cancer. This increase in the prevalence of obesity over the past few decades strongly suggests about preventive strategies will become more important as time goes on. By adopting the treatment modalities *Ilaj bil Ghiza*, *Ilaj bit Tadbeer* and *Ilaj bil dawa* mentioned in Unani classical literature to combat these lifestyle problems. These measures and regimens are

promising, time-tested and easy to adopt, and devoid the side effect, so there is a need of the hour to generalize the Unani System of medicine regimens for the maximum benefit of the sufferers. however, there are still several unanswered questions concerning the effect and the relevant mechanisms behind the effect and positive outcomes. Unani medicine has beneficial effects in the treatment of Saman-e-Mufrat (obesity) and has fewer adverse effects in comparison to the chemical agents. Therefore more and more clinical trials and evidence-based validation need to be carried out to confirm the safety and antiobesity effect of Unani medicine and finally prevent/reduce obesity and provide relief to the ailing community. Management through dieto-regimenal therapy for obesity in the Unani system of medicine may prove a boon in the alternative source of treatment which is further strengthened by various clinical and experimental trials conducted in recent years. In the future, more studies will be needed to see the effects of Unani drugs on obesity. Thus, Unani medicines may play a major role not only in the prevention and control of Obesity but also in decreasing the economic burden incurred on society for the management of lifestyle disorders.

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