

CLINICAL EFFECT OF UNANI MEDICINES IN MANAGEMENT OF SHIQĀQ-E-JILD (XEROTIC ECZEMA). A CASE STUDY**¹Humaira Bano, *¹Masroor Ali Qureshi and ²Shagufta Rahman**

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ABSTRACT

A 45 year old female patient who was diagnosed by severe *Shiqāq-e-Jild* (Xerotic eczema) in hands was registered in the OPD of Regional Research Institute of Unani Medicine, Aligarh. The patient came in the OPD with the complaint of severe itching, pain, fissuring, dark pigmented skin in hand since 1 year, She also complaint of watery foul smelly discharge. The patient was thoroughly assessed by contact history, examination, features and her quality of life. The patient's quality of life was also affected due to the problem as people in the community trying to social distancing from her. The patient was treated with Unani Medicine and the duration of treatment was 2 months. The study concluded that the Unani treatment is effective in

the management of *Shiqāq-e-Jild* (Xerotic eczema). Further the Quality of life of patient was also improved after treatment.

KEYWORDS: *Shiqāq-e-Jild* Xerotic Eczema, Unani Medicine, Quality of life.

INTRODUCTION

Xerotic eczema and eczema craquelé of hand is often a chronic, multi factorial disease. It is usually due to drier skin of a person's ages, related to occupational or routine household activities.^[1,2] Exact etiology of the disease is difficult to determine. It may become severe enough and disabling to many of patients in course of time. An estimated 2-10% of population is likely to develop hand eczema at some point of time during life with the following features.^[3]

- Cracked (fissures), dry skin.^[4]
- Pink or red cracks or grooves.^[4]
- Scaling, peeling and flaking
- Itching and soreness.^[1]
- Pain.^[2,4]

The causes of Xerotic eczema are unknown, but triggers can include: dry, cold weather, hot baths, soaps and other detergents, excessive cleaning or scrubbing of the skin, rough towel drying.^[1]

Shiqāq-e-Jild in Unani Medicine, Cause and treatment

Shiqāq-e-Jild (Xerotic eczema) is described by Unani ancient physician in their classical Unani books in briefed, *Ali Ibn Abbas Majoosi*, *Ibn Sina*, *Ibn Hubal* and *Akbar Arzani* described the conditions of *Shiqāq-e-Jild* which commonly develop in the hands, feet and mouth. Ancient Unani physician *Majoosi* said "There is one important condition that develop in skin of the hands and many times in feet is known as *Shiqāq* (fissuring). The condition is commonly appear in the sole and toes.^[5] *Ibn Sina* wrote under the chapter of *Shuquq* of extremities (fissuring of hand, feet and mouth) that "It is dryness of the skin caused by derangement of dry temperament or influenced of severe, dried and intense wastage drive out towards extremities causes fissuring in the hand, sole and mouth."^[7] Another physician *Akbar Arzani* said "Fissuring in the hands is a common problem that may occur in the patients with exposure to cold, and other contact of irritant."^[8]

Causes

- *Mirrah-e-sawda* (Black bile subtle).^[5,7]
- Derangement of *yabusat* (Dryness).^[7]
- Building construction work
- Dyer
- Cold exposure/Dry weather.^[6,7]
- May be due to contacts : house hold works, washing cleaning etc.^[5,6]
- Use of salted water.^[7]

Treatment

When both hands and feet get inflicted with fissuring with depth; following Unani treatment is advised.

- *Tanqiya* (Evacuation and purification) whatever wastage in the body.^[6,7,8]
- Provide *Tarteeb* (wetness) in the body by such supplement of *Raughan Kunjad* (Sesame oil), 20 ml thrice a day orally is very useful.^[6,7]
- *Mujaffifat* (cicatrizing) such as powder of dried medicines are useful if sprinkled over the wounds.^[6,7]
- Wax, Oil of viola and lead oxide apply over the fissure.^[6,9]
- Supplement of nutritious diet.^[6,8]
- *Kateera* (Resin), nashashta (Starch) and Luab Bihi (Mucilage) apply over the affected part.^[8]

CASE STUDY

A 45 years old female patient registered with severe itching pain, fissuring, dark pigmented skin and watery foul smelly discharge off and on in her hand. She was suffering since 1 year. The patient was complaining pain and severe itch, along with deep fissuring with crease of palm and fingers. In the dorsum of hand distal phalanges were necrotizing with multiple severely cracks associated with blackening skin and slightly thin discharge through it. She has taken many treatments but there was no relief in condition. When she came in the OPD she was so disturbed and in stress due to her problem. The patient's quality of life was also affected due to the problem as people in the community trying to social distancing from her.

Examination of Patient

Personal history of patient was taken, the patient was a household women, lower middle class and perform all the domestic work herself like washing clothes, utensils etc., and no family history of Shiqāq-e-Jild (Xerotic eczema) in her family. No history of any addiction of alcohol or smoking etc. No relevant history of any drug diet or environmental articles, was no any other positive history of systemic disease.

MATERIALS AND METHODS

A known case of Shiqāq-e-Jild (Xerotic eczema) was registered in the OPD of Regional Research Institute of Unani Medicine, Aligarh with complaints of severe fissuring/cracking, burning and itching and pain in both hands. The patient also informed that the condition of

fissuring and itching turn worst in the end of winter often. The personal and present illness history was taken and examined thoroughly and systemic. The patient was treated with Unani Medicine *Habbe Musaffi-e-khoon* 2 tab twice a day, *Majoon chobchini* 6 gm twice a day orally-for 2 months, *Marham Raal* 10 gm once a day for applied locally over the wound-after cleaning with luke warm water for 2 months.^[12] The Patient was also advised fine powder of *Murdar sang* (Lead oxide)-50 gm, *Sanadl sufaid* (Santalum album) 100gm and *Kafoor*(Camphor)-5gm- over the lesion three times a a day for 60 days. The total duration of treatment was 60 days. The follow-up of the patient was at every 7 days. The results were noted in record file at every visit after observation of clinical features and examinations. Close Photographs were also taken before and after treatment.

OBSERVATION



Fig 1: Before treatment



Fig 2: After treatment



Fig3: Before treatment

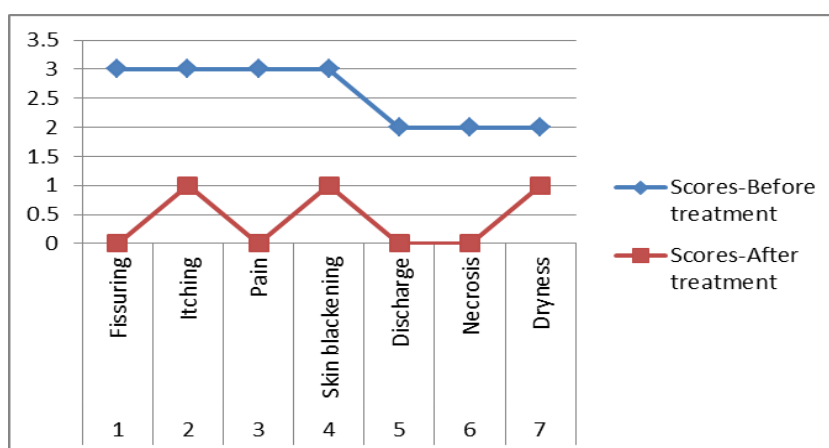


Fig 4: After treatment

A) Clinical Assessment: VAS.

Table. 1.

S.No.	Clinical features	Scores-Before treatment	Scores-After treatment
1	Fissuring	3	0
2	Itching	3	1
3	Pain	3	0
4	Skin blackening	3	1
5	Discharge	2	0
6	Necrosis	2	0
7	Dryness	2	1
Overall assessment:		18	3
			Result: 83%



Graph 1: Showing effects of medicines before and after treatment.

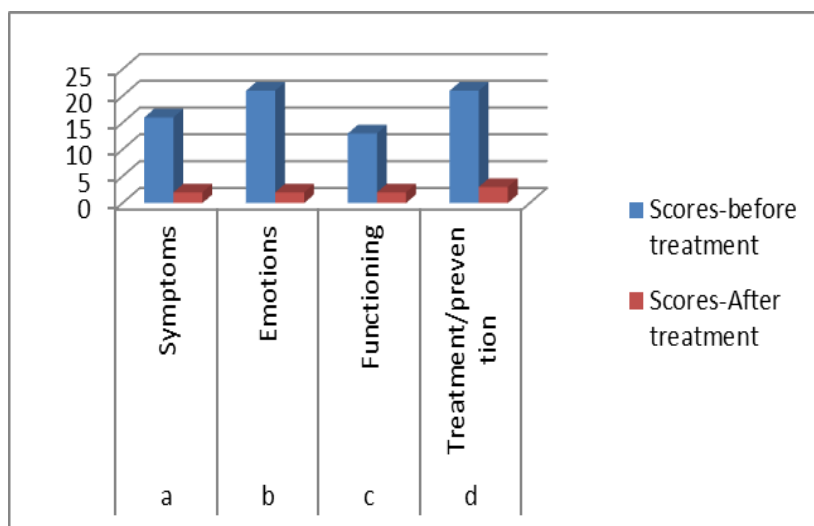
B)-Assessment of Quality Of Life in Hand Eczema Questionnaire (QOLHEQ)

Assessing impairments caused by hand eczema, consists out of 30 items which can be summarized according to four domains of HRQOL: Impairments because of (1) symptoms, (2) emotions, (3) limitations in functioning or (4) because of treatment and prevention.^[9,10]

Health Questionnaire -for hand eczema patients:

S.No	Domains	Scores-before treatment	Scores-After treatment
a	Symptoms	16	2
b	Emotions	21	2
c	Functioning	13	2
d	Treatment/prevention	21	3
	Total:	71	9

QOLHEQ<9 = minimal impairment; QOLHEQ 9-25 = slight impairment; QOLHEQ 25-58 = moderate impairment; QOLHEQ 59-79 = severe impairment; QOLHEQ>79 = very severe impairment.^[10]



Graph 2: Assessment of Quality of life.

RESULTS

It was observed that all the severity of symptoms of *Shiqaq jild* (Xerotic Eczema) of hand itching, pain, fissuring, and dark pigmented skin was diapered after end of the treatment. It has been also observed that there was reduction in severity of all features *Shiqaq jild* (Xerotic Eczema) after end of the treatment. Further no side effects of medicine was reported neither relapsing of complain was reported by patient within six months.

In Table-1, Patient was analyzed by Visual Analogue Scale, the Score was 18 before treatment and 3 after treatment. As per Reduction score calculated 83% relief in patient's complaints. In Fig 1-4, showed that there is significant reduction in severity of features. The module of quality of life based on questionnaires showed improvement in her quality of life.

DISCUSSION

The etiology of xerotic eczema is unknown in the modern medicine but Unani scholars and physicians described in the Unani classical books that "It is dryness of the skin caused by derangement of dry temperament or influenced of severe, dried and intense wastage drive out towards extremities causes fissuring in the hand, sole and mouth. The Unani Physicians *Majoosi, Ibn Sina, Ibn hubal and Tabri* advised wet supplement (*Murattab*) and powder of desiccant medicines for sprinkling on wounds. The improvement in the symptoms and features may be medicines selected and advised to patient was same as directed by Unani scholars and physicians.

CONCLUSION

The Study concluded that Habbe Musaffi-e-khoon (Tab) Majoon chobchini, Marham Raal Murdar Sang (Powder) ia useful in the treatment of Shiqaq jild (Xerotic Eczema). There were no side effects of medicine during the study. Hence it is recommended to study on theses formulations on large sample size to evaluate the efficacy.

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