Modern and Unani concept of Suda (Headache); A Review

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Abstract

Medical science is as old as mankind. Every civilization on earth had its unique system of medicine. Among these Greeko-Arab Medicine, founded by Hippocrates is based on the concept of balance and equilibrium of natural body humors (blood, bile, black bile, phlegm). Any imbalance in quality and quantity of these humors leads to diseases whereas restoration of this balance maintains health. According to Unani Literature Suda (Headache) is a type of pain that occurs in specific areas of head and disturbs the day today activity. It can be because of internal or external factors. The internal factors are Maddi (involving morbid matter) or Sadah (without involvement of matter). According to Unani concept pain occurs in any part of brain either due to imbalance of normal temperaments (Sue mizaj mukhtalif), or structural disorders (Tafaruke ittisal). These can occur individually or in combination with each other. In present scenario, each day man is subjected to various challenging and stressful situations as a result of which headache can also occur. It is a very common condition experienced by almost everyone at one point or the other in their life. It affects almost all classes of society throughout the world. About 90% of individuals have at least one attack of headache per year. Severe disabling headache occurs in at least 40% of individuals annually. Headache is among the most common reason of patient seeking medical attention. It can be because of pathological conditions of head, neck or any other part of body. The brain tissue itself is not sensitive to pain because it lacks pain receptors; rather the pain is caused by disturbance of pain sensitive structures near or away from brain. The review aims at highlighting the concepts of Suda in modern as well as the Unani Literature

Keywords: Suda, Sue mizaj, Tafaruke ittisal, temperament, Unani

INTRODUCTION

Headache is the most common, frequent complaints and one of the most difficult clinical problems in medicine. Headache has troubled man since the dawn of civilization.1,2 The Ebers papyrus, dated around 1500 BC is an Egyptian medical treatise that describes headache as 'sickness of half head' and includes a passage concerning the treatment of migraine. There is also description of neuralgia migraine and shooting head pains.1,3,4 According to Unani Literature Headache or suda is a type of pain that occurs in specific areas of head and disturbs its functions. It can be due to internal or external factors. The internal factors may be Maddi (involving matter) or Sudda (without involvement of matter). It occurs because of different reasons such that its proper evaluation is difficult. In majority of patients the cause is trivial as well as reversible so a careful clinical history and examination often allows a specific diagnosis. It is usually a benign symptom and only occasionally is arteritis.5,6,7 Most headaches are dull, deeply located and of aching character. A throbbing headache with tight muscles about head, neck and shoulder girdle suggests activation of intracranial and extra cranial arteries and skeletal muscle surrounding head and neck by a generic head pain generating mechanism. Brief, sharp
Cephalic pain which is multifocal is more often benign. Pain in head may be due to lesions in nearby structures like eye, ear causing referred headache or may be due to meningeal irritation, vascular disturbance, traction and distortion of intracranial structures or psychogenic causes. Febrile and toxic states, hypertension, and uremia, blood dyscrasias and emphysema are also occasional causes of headache.8

A classification system developed by International Headache Society characterizes headache as primary or secondary. Primary headaches are those in which headache and its associated features are the disorder itself like tension, exertion and cluster headaches. Secondary headaches are those caused by exogenous disorders like systemic infections, head injury, and brain tumor.9

Headache may originate from either of the 2 mechanisms: 5, 6, 7, 9, 10

1: Pain commonly results from activation of peripheral nociceptors in the presence of normally functioning nervous system.

2: Injury, damage to or anomalous activation of pain sensitive pathways of peripheral or central nervous system.

Pain sensitive structures: scalp, aponeurosis, middle meningeal artery, dural sinuses, falx cerebri, proximal segments of large pial arteries.

Pain insensitive structures: most of the brain parenchyma, choroid plexus, pial veins. There is a midbrain focus for pain generation of headache.8

**METHODOLOGY**

Location of survey of literature has been Faculty library Unani medicine Jamia Hamdard, New Delhi, Central library, Jamia Hamdard, New Delhi, and Hamdard institute of medical science and research library.

**MECHANISM OF SUDDA (HEADACHE):** 5, 6, 7

1. Headache occurs as a result of distention, dilatation or traction of Intracranial or extra cranial arteries.
2. Traction or displacement of large intracranial veins or their Dural envelope.
3. Compression, traction or inflammation of cranial and spinal nerves.
4. Spasm, Inflammation or trauma to cranial or cervical muscles.
5. Meningial irritation or raised ICT.
6. Perturbation of intracerebral serotonergic projections (especially during febrile illness, SLE, or when pressure is reduced in benign ICT)

Intra cranial masses cause headache by or by exerting traction on vessels dural structures or cranial nerves at the base of the brain. This happens long before ICT develops.

Suda or headache is considered as an important illness of central nervous system. Pain is felt in parts of head making patient restless and depressive. Suda literally means “to crush”, since the pain felt is crushing in nature so the name has been given to it.11,12,13,14
According to Najeebuddin Samarkandi, *Suda* is a type of pain that occurs in parts of head that include skin of the head (*Jild*), muscles of head (*Azlat*), external covering of head (*Agshia*), bones of head (*Aazam*), meninges (*Agshia e dimag*), brain stem (*Nafs e dimag*), nerves and arteries and insensitive nerves (*Nafees*).\(^{15}\)

The conflict existed among ancient Unani scholars, that whether the pain caused by surrounding areas, structures of brain, by injury or fracture of skull should be included in Suda. Majority of them have agreed that pain produced either by injury, fracture, (*tafaruke ittisal*) or *Suee mizaj* (temperamental imbalance) is Suda.\(^{15}\)

**PATHOLOGY**

The concept of *Tabiyat* and *Mizaj* are unique in Unani system of medicine. *Tabiyat* is a natural power, a prime mover, when it exists in a body, becomes the direct (proximate) cause for its active motion or rest.\(^{16}\) *Mizaj* (temperament) is the homeostasis in the internal environment of the body. In physiological conditions, *Tabiyat* maintains homeostasis in the internal environment of body (*Mizaj*). In case of a disease or simply body’s failure to reach its ideal state, *Tabiyat* acts to correct imbalances and non ideal states.\(^{17}\)

According to Unani concept pain occurs in any part of brain either due to imbalance of Temperaments (*Sue mizaj mukhtalif*), or structural disorders (*Tafaruke ittisal*). These can occur individually or in combination with each other. When imbalance or structural disorders occur there is congestion of meninges (*Ahtinaq i damvi*) especially of *Dura mater* (*Ummi galiz*), pressure increases abnormally as a result of which there is either increase or decrease of blood supply to brain and results in headache. Sometimes due to some external or internal factors toxicity (*Sammiyat*) enter blood, reach the brain and cause Suda. *Suda* as such is not a disease but a symptom of other diseases.\(^{11,12}\)

**Classification of Suda**

*Sudda* has two types: \(^{11,12,13,16,18}\)

- **Primary or (Asli)**: when the cause in the brain.
- **Secondary or (Shirki, Marzi)**: when the cause is outside the brain or there is involvement of parts other than brain.

According to Temperamental imbalance (Sue mizaj), *Suda* has been divided as follows:

1. **Suda Har sada**: (simple hot headache) Due to Sue mizaj har sada. It is sub divided into;
   a. Internal (*Dakhli*) due to internal causes like intake of chilly, Trigonella foenum, alcohol, dates and intake of *Har mizaj* (hot temperament) medicine.
   b. External (*Khariji*) due to external causes like hot environment like summer, fire etc. It is also called *Suda* Ahtiraqi.

2. **Suda Barida Sazaj**: (simple cold headache) Due to *Sue mizaj barid sada*. It is sub divided into
   a. Internal (*Dakhli*):- Due to internal causes like intake of ice cold water, cold curd and medicines. It occurs due to 10th cranial nerve irritation.
   b. External (*Khariji*):- Due to external cold conditions like cold air, water and ice. This type of Suda is also called *Khabta* because sensorial disturbances occur (*khabt e hawasi*)

3. **Suda Safravi**: (Bilious); Due to increase in bile (*Safra*)
4. **Suda Damvi** (sanguine); Due to increase of blood in cerebral arteries.
5. **Suda Balgami** (phlegmic); Due to increase in phlegm (*Balgam*)
6. **Suda Saulavi** (Melanic );Due to increase in sueda or black bile.
7. Suda Reehi; Due to flatulence that reach the brain and produce pressure.
8. Suda Shirki; (Referred, Sympathetic); It can be either due to involvement of stomach (Maidi), liver (Kabdi), spleen (Tihali), Diaphragm (Hijabi), uterus (Rahmi), kidney (kulli) and due to worm infestation (Doodi).
9. Suda Zoofi Dinagi; (weakness of brain); Due to weakness, brain gets affected quickly and pain is produced.
10. Suda Hissi; (Hyper sensitive HA); Due to increased sensitivity of brain to mild stimulus.
11. Suda khifa (Levity); Due to excessive dryness, since the pain is mild, so the name is given (Khifa: Khift, Halkapan)
12. Suda Bukhari (Pyrexial); Due to fevers
13. Suda zoofi Asab (Nerve weakness); Due to weakness of nerves it occurs.
14. Suda Khumari (Alcoholic); Due to excessive alcohol intake the toxins reach brain and produce headache.
15. Suda Zarba wa sakti wa Tafaruke itisal (Traumatic HA); Due to trauma or injury to head or displacement of brain as a result of shock, playing or falling something on head
16. Suda Sarsami (menengial); Due to inflammation of meninges.
17. Suda Bahmani (crisic ); occurs in acute diseases after bohran of fevers.
18. Suda Shammi shamsii(smellic HA);Due to different smells like strong aromatic smells like musk, or offensive smells like in toilet
19. Suda suddi (Embolic); Due to formation of lesions or emboli in brain.
20. Suda jimmay (coital); Due to excessive coitus.
21. Suda biaza or khoza (organic); Chronic HA involving whole head.
22. Suda tazacei; Due to displacement of brain, can be due to trauma.

Conclusion: From above discussion about the etiology, pathology and classification of headache or suda in Unani literature it is clear that ancient Unani physicians had a clear concept about it. They have described headache its clinical features, sign and symptoms as per their clinical experiences and knowledge. Despite limited resources and lack of laboratory parameter their description is similar to modern views. They have classified and described most types of HA’s in accordance with the modern classification, like stimulus or tension headache is suda hissi, suda jimmay is Coital headache or headache associated with sexual activity, Sudda zarbi is acute or chronic post traumatic headache, Suda khumari is headache induced by exposure or withdrawal of substance abuse, suda afooni is headache associated with non-cephalic infections like viral, bacterial or other infections, suda suddi is headache associated with structural lesions in brain. Similarly description of headache like shakika or migraine is in accordance with modern concepts of medicine. Headache associated the pain sensitive structure of head like skin, bones, eyes, ears, muscles and nerves as mentioned in Unani books has been described in modern text books as occipital, ophthalmic, otalgic and trigeminal neuralgias.

So to sum up we can say the ancient and modern concepts of headache or sudda are almost similar and in accordance with IHSCOH. The detailed description given by Unani physicians at the time of non availability of methods, means, modern parameters and equipments and that too with such a similarity and in accordance with modern classification is really appreciable.

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Authors’ Statements
Competing Interests
The authors declare no conflict of interest.

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