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An observational qualitative study of mental health: A crosscutting issue in apparently healthy individuals to evaluate lifestyle modification with reference to different mizaj

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Abstract

Unani Medicine (Also called Greco-Arab medicine) is an ancient system of medicine originated from Greece. It is more commonly practiced in the Indian Subcontinent and has an age-old concept and principles of drug management. This system is based on the Hippocratic theory of four humors viz. blood, phlegm, yellow bile and black bile, and the four qualities of states of living human body like hot, cold, moist and dry. For all individuals, mental, physical, and social health are vital strands of life that are closely interwoven, and deeply interdependent. As our understanding of this relationship grows, it becomes more apparent that mental health is crucial to the overall health of individuals, societies, and countries. Unfortunately, in most parts of the world, mental health and mental disorders are not given the same importance as physical health. Instead, they have been largely ignored and neglected. The world is suffering from an increasing burden of mental disorders and a widening treatment goal. The aim of this study is to assess the relationship between *Mizaj* and mental health. A cross sectional descriptive study to assess the *Mizaj* and mental health questionnaire with the help of *Mizaj* assessment proforma based on classical literature and oxford mental health questionnaire in 53(fifty three) apparently healthy individuals of different age of both gender, was carried out at A and U Tibbia college and hospital, Karol Bagh, New Delhi, India during period of June - October 2023 & this study was carried out in apparently healthy individuals. Analysis of data in the current study was done by calculating the Mean, Standard Deviation and One Way Analysis of Variance in SPSS 22.0 software for all the factors of *Mizaj* and Mental health score. The findings suggested that mental health score had significant association with the variability of *Mizaj* of the apparently healthy individuals.

Keywords: Mental health, *Mizaj*, Ayurvedic & Unani Tibbia College & Hospital, Productive Health, Mental Disorders, Yusuf Jamal, Hippocrates, Unani Medicine

Introduction

Unani Medicine (also called as Greco-Arab medicine) is an ancient system of medicine originated from Greece, which is based on the teachings of the Greek physician Hippocrates, and the Roman physician Galen, and developed into an elaborate medical System by Arab and Persian physicians, such as Rhazes, Avicenna (*Ibn Sena*), *Al-Zahrawi*, and *Ibn Nafis* ^[1]. This system describes seven essential components of the body, which are called *Umoor-e-Tabiya* namely-*Arkan* or elements (Comprising earth, water, air, and fire as different states of matter and the building blocks of everything in the universe); *Mizaj* (Temperament); *Akhlat* (Humors); *Aza* (Organs); *Arwaah* (life, spirit or vital breath); *Quwa* (Energy); and *Afaal* (Action). The Framework of this system is based on the concept of *Mizaj* (Temperament) and *Akhlat* (Humors). The Unani system gives insights into human personalities by classifying them into four different *Mizaj* (Temperaments) based on the dominance of body fluids (humors). Drugs and diseases are also classified as having different *Mizaj* according to the four humors in treatment ^[2]. *Mizaj* is one of the basic and fundamental concepts of the Unani system of medicine which is a new median (*Kaifiyat*) produced by composition of different elements (*Anasir*). *Mizaj* is the discriminated feature upon which human health, disease, diagnosis and treatment are based. According to nature, *Mizaj* is divided into four categories known as *Damvi* (Sanguine), *Balghami* (Phlegmatic),

Safravi (Choleretic), *Saudavi* (Melancholic). According to *Ibn Nafis*, the literal meaning of *Mizaj* is 'intermixture', which originated from the Arabic word *Imtizaj* which means intermixture^[3]. "Temperament is the quality which results from the mutual interaction and interspersion of the four contrary primary qualities residing within the (Imponderable) elements^[4]. *Majoosi* defined *Mizaj* as "All sorts of bodies, which are found in this ever-changing world are formed from four elements (*Ustuqussat*), comprising earth, water, air and fire and after mixing in different or uniform quantities under the needs of the body. As a result of this mixing, one or two qualities become dominant over the body, and this is called *Mizaj*. Hippocrates (460 B.C.), Unani physician in his book "Human Nature" set forth the doctrine of body fluids i.e., humors or *Akhlat*, (singular *Khilt*), that the human body contains four major kinds of humors i.e., *Dam* (blood), *Balgham* (Phlegm), *Safra* (yellow bile) and *Sauda* (black bile). According to quality and quantity, an accurate proportion and mixing of which (homeostasis) constitutes health and inaccurate proportion and irregular distribution, according to their quantity and quality constitute disease. For knowing the normal body function of different individuals their respective *Mizaj* should be assessed first. The assessments of *Mizaj* or *Taskhees-e-Mizaj* is depend on the basis of physiological, morphological and psychological feature and are termed as *Ajnas-e-Ashra*. *Mizaj* (Temperament) *Ajnas-e-Ashra* are described as following- *Malmus* (Tactus), *Laham wa Shaham* (flesh & fat), *Shaar* (Hair), *Laun-e-Badan* (Body complexion), *Haiyat-e-aza* (Stature/Physique), *Kaifiyat-e-Infial* (Quality of passiveness of organ), *Naum-wa-Yaqzah* (Sleep & Wakefulness), *Afaal-e-azaa* (State of organs function), *Fuzlaat-e-badan* (Body excretion), *Infialat-e-Nafsaaniyah* (Psychic reaction). Different organs of the body have their own different *Mizaj* and together they formed the *Mizaj* of an individual which is the resultant of all the *Mizaj* of organs comprising the human body. Physiological function of the organ and body as a whole are according to their respective *Mizaj*^[5]. The treatment is based on the temperament of the patient and the treatment is initiated in the following manner: 1. *Ilaj-Bit-Tadbeer wa Agziya* (Regimental/Diet-Therapy) 2. *Ilaj-Bid-Dawa* (Pharmacotherapy) 3. *Ilaj-Bil-Yad* (Surgical Intervention)^[6].

Mental Health through Unani Medicine

Mental health is not a new subject in the Unani system of Medicine. It has been very important in the past and undoubtedly its importance may not be denied today. Unani scholars have described it in detail under the heading of *Quwwat-e-Nafsani* (Psychic faculty) whose seat is in the brain. Hippocrates termed Faculties of the brain the most sensitive, delicate and fine and therefore he termed the brain as *Syed-ul-aza* or master of all organs. The most appreciative part is inclusion of mental health as one of the six essential prerequisites of life for maintenance of health. These are air, food and drinks, bodily movement and repose, psychic movement and repose, sleep and wakefulness, retention and excretion. This reflects the holistic approach of Unani physicians in general and particularly in the management of diseases. Following are some terminologies in this regard for better understanding of philosophy of mental health in Unani Medicine. (1) *Nafs*: Some people have translated it as *Pneuma* and others as *psyche*. Literary

meaning of *Nafs* is psyche. As per the philosophy of Unani system of medicine, this term is mainly used to explain the power which is present in *Aza-e-Nafsaniyah*. (2) *Aql* and *Nafs*: *Aql* or logical reasoning power of a person is based on real things and recognize and understand them correctly whereas *Nafs* in healthy condition is with *Aql* and in diseased condition it does not follow *Aql*. Emotions can affect the *Nafs* easily. (3) *Nafs* and the body: *Quwwat-e-Nafsaniyah* appraises the *Nafs* of the state of the body and its surroundings, the external and internal environment of the body influences the psyche which in turn influences the entire body. But the organ whose influence is seen very quickly and prominently is the heart. The heart responds very quickly to any change taking place inside the body or any outside influence affecting the body. The ancient physicians attributed various emotional expressions such as joy, grief, anger, elation to *Quwwat-e-Haiwaniyah*, seat of which is heart. *Quwwat-e-Haiwaniyah* is sub served anger, fear and other similar emotions are the reactions of the vital faculty, these are attributed to it, although their source is sensation, imagination and perceptive faculties. Alteration of *Quwwat-e-Nafsaniyah* results in the affection of *Quwwat-e-Haiwaniyah* and *Quwwat-e-Tabaiyah*. *Quwwat* means power or ability to function. It is one of the *Umoor-e-Tabiya* essential for living of human being *Quwwat* and *Afaal* (functions) are understood with reference to each other since each faculty is the source of some function and each function proceeds from a faculty. Classification of *Quwwat-e-Nafsaniyah*, *Quwwat-e-Tabiyah*, *Quwwat-e-Haiwaniyah*. Many philosophers and physicians in general, particularly Galen, conserved that each faculty has its own principal organ. This principal organ is the source of faculty and from this very organ the brain and their functions proceed from it. Hippocrates (430-377 BC) termed Faculties of the brain the most delicate and fine and therefore he called the brain as *Sayed-ul-Aza* or master of all organs. Avicenna (980 AD) wrote a psychological treatise in which he postulated five faculties of the interior sense but emphasized that only three are important for medicine: imagination, reasoning and memory^[8]. Hippocrates mentioned that the brain is a human's important organ. He also said that it is the brain alone from which we feel pleasures, joys, laughter and jest, as healthy as our sorrows, pains, grief and tears and thus that brain becomes the interpreter of consciousness. Hippocrates expressed in his book "*Book of Epidemics*" his observations regarding postpartum psychosis, deliria, melancholia. "If the brain is affected by abnormal Phlegm the patients are quiet and silent, if by bile they are vociferous, malignant and act improperly. If the brain is heated, terrors, fears and terrifying dreams occur, if it is too cool, the patients are grieved and troubled." This statement also justifies the theory of *Akhlaat* or humors and their relation with the mental behavior of an individual. *Allama Nafees* in his book "*Kulliyat-e-Nafeesi*" gives a distinct heading of the effect of psychological signs/ symptoms on the body. He explains how patients of psychological problems refrain from misbehaving in front of people from whom they feel shy or regard them and as soon as they leave he again starts misbehaving. He further explains the role of change of environment and relaxing technique; like listening to music, good fragrance which empowers *Quwwat-e-Haiwaniyah*, and this in turn empowers *Quwwat-e-Tabiyah*. *Allama Nafis* further states that when there is preponderance of *Sauda*

(Black bile) in body it affects *Nafs* which results in fear, worry and bad thought similarly when there is preponderance of *Dam* (Blood) in body then *Nafs* experiences happiness and comfort and when there is preponderance of *Safra* (Yellow bile) then *Nafs* experiences some extreme emotion such as sorrow, grief, brooding in love the temperament of human body changes towards excessive dryness and hotness. Therefore, *Nafs* and body have got direct or indirect effect on each other^[9].

Ibn-e-Rushd mentioned in his renowned book “*Kitab-ul-Kulliyat*” that health is a state of body parts in which their actions and reactions are performed normally. Disease is the antonym of health and actions and reactions become abnormal. It is also documented in his book, in context of mental health, that the normal functions of three types of *Quwa* i.e., *Quwat-e-Takhayul*, *Quwwat-e-Fikr* and *Quwwat-e-Zikr* are performed by the brain and also known as *Quwa-e-Siyasiyah*. Alteration of *Quwwat-e-Nafsaniyah* results in the affection of *Quwwat-e-Haiwaniyah* and *Quwwat-e-Tabaiyah*^[10]. *Tabri* said that *Ikhtalat-e-Zahn* is sometimes permanent and sometimes temporary. This disease is due to disorders in “*Quwwat-e-Fikr*” (thinking or reasoning faculty of power). Sometimes *Ikhtalat* results due to injury to brain involvement of some other diseased organ. *Ikhtalat* is of two types; temporary and permanent. Temporary type is reversible whereas permanent is irreversible^[11].

Azam Khan said that “*Ikhtalat-e-Zahn*” is the name of anxiety and nervousness which does not reach extreme levels. Sometimes, this disease occurs due to excess wakefulness, sorrow and excessive worry, excess and continuous intake of a bad diet and due to abnormal retention in the body like amenorrhea and oligomenorrhea. *Ghulam Jeelani* said that, In Melancholia, thoughts and thinking processes of the patients is disturbed and he becomes overanxious and thoughtful. Bad thoughts come to his mind and he becomes doubtful for everybody. It results due to *Zof-e-Dimaghi* (excessive mental work), *Sahr* (Excessive awakening) and excessive thoughts for resolving difficult problems and reactions become abnormal. It is also documented in his book, in context of mental health, that the normal functions of three types of *Quwa* i.e., *Quwat-e-Takhayul*, *Quwwat-e-Fikr* and *Quwwat-e-Zikr* are performed by the brain and also known as *Quwa-e-Siyasiyah*^[12, 13]. Unani physicians of ancient times such as *Zakaria Razi*, *RabbanTabri*, *Ibn-e-Sina*, *N. Samarqandi*, and *M.H. Qarshi* mutually recognized the deleterious effects of *infiyalat-e-nafsaniyah* (emotions) such as grief, anger, happiness, regret, love, and so forth, on the human psyche, especially among women at the times of their pregnancy, childbirth, and puerperium. Moreover, they also gave the concept of other psychiatric disorders such as mania and dementia^[14, 15, 16]. According to the concept of Unani system of medicine, imbalance of *mizaj* (body type) of a person acts as an important risk factor for various disorders which includes psychiatric disorders also like depression or melancholia. Unani scholars believed that among the four temperaments the person with *mizaje-saudawi* (Melancholic *mizaj*) develops the depressive symptomatology most. However, it's thought that any of four humors can develop such an illness^[17]. This study is conducted to find out which *mizaj* came up with variability of mental health most.

The prevalence of mental health problems is high, and they have a wide-ranging and deleterious effect on many sectors in society. As healthy as the impact on individuals and

families, mental health problems in the workplace negatively affect productivity. One of the factors that may exacerbate the impact of mental health problems is a lack of 'mental health literacy' in the general population. This has been defined as 'knowledge and beliefs about mental disorders, which aid their recognition, management, or prevention^[14] Mental health is more than the mere lack of mental disorders. The positive dimension of mental health is stressed in WHO's definition of health as contained in its constitution: “Health is a state of complete physical, mental, social and spiritual healthy-being and not merely the absence of disease or infirmity.” Concepts of mental health include subjective healthy-being, perceived self-efficacy, autonomy, competence, intergenerational dependence and recognition of the ability to realize one's intellectual and emotional potential. It has also been defined as a state of healthy-being whereby individuals recognize their abilities, are able to cope with the normal stresses of life, work productively and fruitfully, and make a contribution to their communities. Mental health is about enhancing the competencies of individuals and communities and enabling them to achieve their self-determined goals. Mental health should be a concern for all of us, rather than only for those who suffer from a mental disorder. Mental health problems affect society as a whole, and not just a small, isolated segment. They are therefore a major challenge to global development. No group is immune to mental disorders, but the risk is higher among the poor, homeless, the unemployed, persons with low education, victims of violence, migrants and refugees, indigenous populations, children and adolescents, abused women and the neglected elderly. For all individuals, mental, physical and social health are closely interwoven, vital strands of life. As our understanding of this interdependent relationship grows, it becomes ever more apparent that mental health is crucial to the overall healthy-being of individuals, societies and countries. Unfortunately, in most parts of the world, mental health and mental disorders are not accorded anywhere the same importance as physical health. Rather, they have been largely ignored or neglected^[18-23].

Aims and Objective: To find the variation of mental health score in relation to different *Mizaj* in apparently healthy individuals.

Research Question: What will be the variation of mental health score in relation to different *Mizaj*.

Need for the study: To find extent of variation of mental health score in healthy individuals having different *Mizaj* which affects life quality of healthy individuals.

Hypothesis: There is a variation of Mental health score in different *Mizaj* of apparently healthy individuals.

Materials and Methods

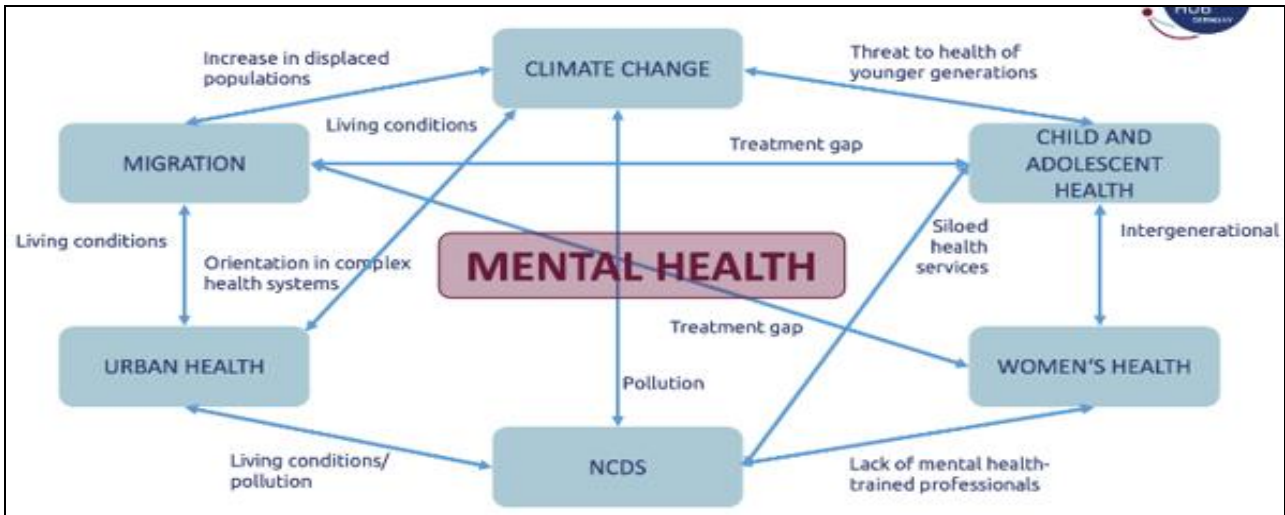
Study site: The study was carried at A & U Tibbia College & Hospital, Karol Bagh, New Delhi 110005.

Sample size: 53 apparently healthy individuals

Study Design: Prospective Observational Study

Sampling Method: Simple Random Sampling

Study period: The study was conducted for a period of 4 months from 15 June 2023 to 15 October 2023.



Study Criteria

Inclusion criteria

1. Apparently healthy individuals
2. persons with both gender
3. Persons with age from 20 years to 59 years

Exclusion criteria

1. Patients with age less than 20 years and above 59 years
2. Trauma
3. Pregnancy
4. Person with major depressive disorders
5. Persons who do not willing to participate in study

Investigation

1. Assessment of *Mizaj* by *Mizaj* Assessment proforma
2. Assessment of Mental health score through oxford Mental health score Questionnaire

Procedure

A total of 70 individuals were randomly selected who fulfill inclusion criteria from Ayurvedic and Unani Tibbia College and Hospital Karol Bagh Delhi (India) for *Mizaj* identification and the determination of the mental health

scores, 17 individuals did not respond to the questionnaire according to the requirement, therefore, those individuals were excluded from the study, leaving a remaining 53 individuals. All of the individuals provided their consent to participate in the study. All individuals were adequately informed about all relevant aspects of the study. All individuals voluntarily participated in the study. After selecting individuals, we did *Mizaj* identification through *Mizaj* Assessment proforma and then asked questions to the individuals according to mental health score proforma and marked ticks on the questionnaire as per the answers given by individuals. And after completing the questionnaire we calculated the score and noted it as neutral, positive and negative mental health score.

Table 1: Data of different *Mizaj* a/c to age

Age	Damvi	Balghami	Safravi	Saudavi
19-29	4	3	5	7
30-39	5	3	2	4
40-49	3	3	2	1
50-59	4	2	0	5
Total	16(30%)	11(20.75%)	9(16.98%)	17(32.07%)

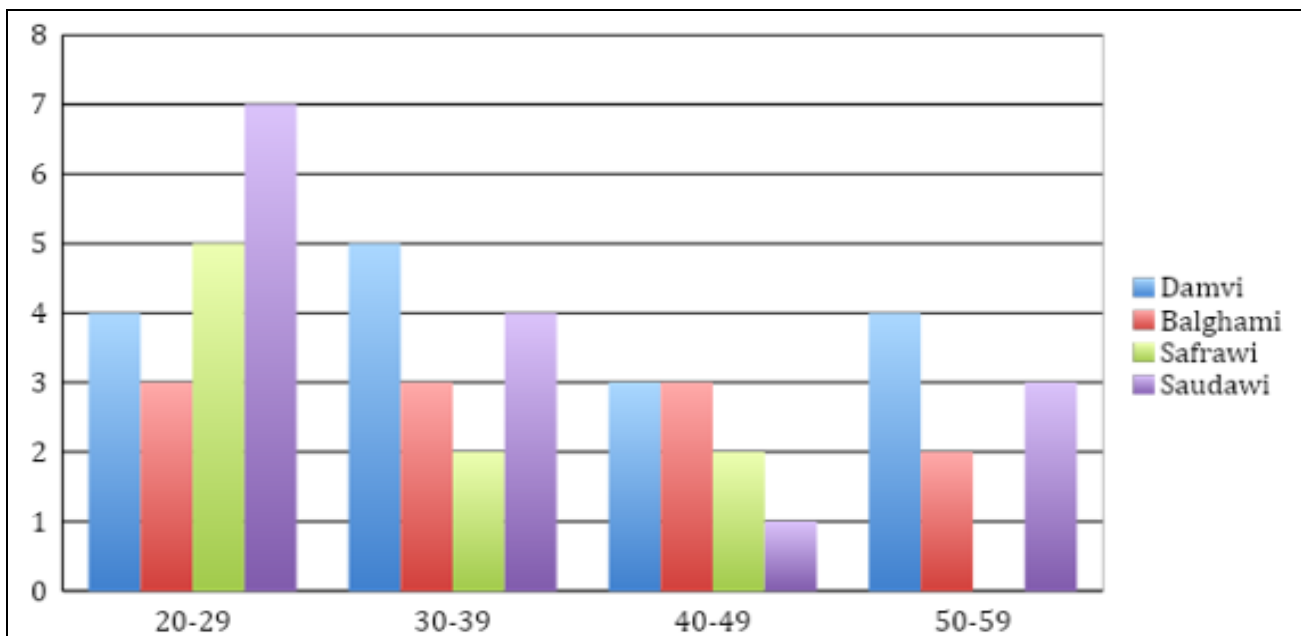


Fig 1: Show data of different mizaj a/c to age

Statistical analysis**Table 2:** Mean & Standard Deviation of MHS according to *Mizaj*

Parameter	Damvi	Balghami	Safravi	Saudavi	Total
N	16	11	9	17	53
$\sum X$	889	559	515	841	2804
MEAN	55.57	50.82	57.23	49.48	52.90
$\sum X^2$	50001	29109	29733	43001	151844
Std.Dev.	6.36	8.38	5.74	9.35	8.20

Note: N=Number of Individuals, $\sum X$ = sum of Observed Value,

$\sum X^2$ = Mean square, Std. Dev.=Standard Deviation

Table 3: One Way ANOVA

Source	SS	DF	MS	
Between-treatment	529.1636	3	176.3879	F=2.91269
Within-treatment	2967.3647	49	60.5585	
Total	3496.5283	52		

F-ratio value is 2.91269

P-Value is.043577

The result is significance at $p < .05$

Table 4: Pairwise comparisons between *Mizaj*

Pairwise Comparisons		HSD _{.05} = 8.3213 HSD _{.01} = 10.2644	Q _{.05} = 3.7610 Q _{.01} = 4.6392
Damvi: Balghami	$M_{Damvi} = 55.56$ $M_{Balghami} = 50.82$	4.74	Q = 2.14 (P = .43579)
Damvi: Safravi	$M_{Damvi} = 55.56$ $M_{Safravi} = 57.22$	1.66	Q = 0.75 (P = .95127)
Damvi: Saudavi	$M_{Damvi} = 55.56$ $M_{Saudavi} = 49.47$	6.09	Q = 2.75 (P = .22230)
Balghami: Safravi	$M_{Balghami} = 50.82$ $M_{Safravi} = 57.22$	6.40	Q = 2.89 (P = .18528)
Balghami: Saudavi	$M_{Balghami} = 50.82$ $M_{Saudavi} = 49.47$	1.35	Q = 0.61 (P = .97292)
safravi: Saudavi	$M_{safravi} = 57.22$ $M_{saudavi} = 49.47$	7.75	Q = 3.50 (P = .07620)

Results

Total 70 patients were randomly selected for *Mizaj* Identification and determination of Mental Health Score as per inclusion criteria and completed their study from A and U Tibbia College and Hospital. Out of 53 patients *Damvi Mizaj* composed of 16 individuals (30%), *Balghami Mizaj* composed of 11 individuals (20.75%), *safravi Mizaj* composed of 9 (16.98%), *saudavi Mizaj* composed the majority of 17 individuals (32.07%)

Statistical Decision

The one-way ANOVA as shown in Table 3 result suggests Mental Health score for different *Mizaj* groups differs significantly. (F=2.91269, $p < 0.04$) and H_0 is rejected Since, the Levene Statistic is not significant, the equal variance is assumed. As H_0 is rejected, it is concluded that four *mizaj* groups do not have the same Mental health score.

Discussion

The present study evaluated the mental health through mental health questionnaire proforma in relation to different *Mizaj* after that mental health result comes up in the form of a score which has 3 grades (Positive-60-75, Negative-0-40 and Neutral-41-59). This is the proven suitable method to assess HDI. *Safravi Mizaj* individuals group has highest mean mental health score (57.2222) and *saudavi Mizaj* individuals group has lowest mean mental health score (49.4706). According to classical Unani literature, a mental health score is seen altogether 4 types of *Mizaj* prone to get affected their life caused by mental health. In the present study Table 1: shows, Data according to different ages seen altogether as 4 types of *Mizaj* in several percentages. subsequently, Table 2 shows that the Mean rank of MHS from *safravi Mizaj* (57.23) was highest than that of the person with *Mizaj e Damvi* (55.57) followed by *Mizaj e Balghami* (50.82) and the lowest person with *Mizaj e Saudavi* (49.48). Yet after the analysis, the difference among the group was found to be statistically significant ($p = 0.04$ at the level of significance $p < 0.05$). The finding suggested that mental health score had a significant association with the variability of *Mizaj* of the person. Moreover, any *Mizaj* could predispose the person to develop disability due to mental health.

Conclusion

Based on the various observation it is found that Mean Mental health score is highest in people having *safravi Mizaj* and lowest in people having *saudavi Mizaj* and it is in concordance with the experimental hypothesis of this research work from this study it is clear that a possible correlation between mental health and *Mizaj* certainly do exist. So, early diagnosis of this disorder is necessary for routine practice at clinics especially in *saudavi Mizaj* to prevent hazardous consequences.

There are physical needs for every human being but mental health fulfillment is a spiritual need for better life. Human values are great and can be cultivated into positive and productive life. Peace is one ultimate aim of any nation and through positive mental health the aim can be easily achieved. The significance of this need has made the Government of India to declare funds for mental health in India.

Abbreviations

WHO, World Health Organization; BC, Before Christ; AC, After Christ; ANOVA, Analysis of Variance; MHS, Mental Health Score

Competing interest: There is no conflict of interest.

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Conflict of Interest: Not available

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