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Efficacy of a Unani Formulation on *Waram-e-Lawzatayn* (Tonsillitis): a Case Report

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ABSTRACT

Background: Waram Lawzatayn (tonsillitis) refers to waram-e harr which involves halqum (Throat) and lawzatayn. Most of the Unani scholars considered waram-e lawzatayn a subtype of waram halaq (Pharyngitis). It can be correlated with tonsillitis, as both the terminologies have similar features like burning sensation and pain in throat, enlarged tonsils, suppurative inflammation, etc. The more common symptoms of tonsils are red swollen tonsils, sore throat, pain during swallowing, headache, cough, fever, tiredness, swollen lymph nodes in the neck, chills, and pain in the ears.

Objective: To evaluate the efficacy of Unani formulation in *waram-e lawzatayn*.

Methodology: This study was conducted in State Unani Medical College, Prayagraj. The subject was a 10 year old male child with history of cough, fever and pain in throat. Treatment given was 20 ml Unani decoction of *saboose gundum, maghze faloose khayar shambar, iklilul malik, asalsoos* for 21 days orally.

Result and conclusion: Unani medicine shows marked reduction in Tonsillo-Pharyngitis Assessment (TPA) score which was used as an assessment criterion to assess the effect of medicines. Before treatment it was 16 and after treatment score reduces to 3. There is also regression of symptoms like fever, enlarged tonsils, pain and burning in throat. As saboose gundum and maghze faloose khayar shambar have antipyretic property, which helps in subsidence of fever and Maghze faloose khayar shambar, iklilul malik, asalsoos and saboose gundum all possess anti-inflammatory property.

Keywords: waram-e lawzatayn, waram-e halaq, Unani formulation, tonsillitis, TPA score

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Introduction

■ onsillitis is inflammation of the pharyngeal tonsils. The inflammation usually involves the adenoid and the lingual tonsils; therefore, the term pharyngitis can be used. Many cases of bacterial tonsillitis are caused by group A betahaemolytic Streptococcus Pyogens (GABHS)1. Waram lawzatayn is a disease that affects the gland which is also present on flesh of the throat and the root of the ear on both sides of the throat². Waram Lawzatayn (tonsillitis) refers to waram harr which involves halqum (Throat) and lawzatayn. 3,4,5,6,7,8. The tonsillar fossa consists of three muscles: the palatopharyngeal muscle, the palatoglossus muscle, and the superior constrictor muscle. The palatopharyngeal muscle makes the posterior pillar and the palatoglossus muscle forms the anterior pillar. The tonsillar bed is formed by the superior constrictor muscle of the pharynx⁹.

The tonsils are mainly ß-cell organs with ß lymphocytes containing 50% to 65% of all tonsillar lymphocytes. T-cell lymphocytes comprise approximately 40% of tonsillar lymphocytes and 3% are mature plasma cells⁹. The peak age prevalence is 38.4% at preschool age group¹⁰.

The incidence of the disease is more common among male children than female and the majority of those belong to age group of 5-15 years. ¹¹

Zohrawi, describes tonsillitis as waram halaq and waram lawzatayn¹². Tabri had described tonsillitis as a glandular swelling in the throat which arise from the alteration in the temperament of dam, balgham, safra, sauda. Tabri mentioned in his treatise Firdausul hikmat the characteristic feature of the ghalba khilt-e-dam (humour sanguine) as redness on the face, Imtala in throat

(congestion in throat) and increase intensity of pulsation in the blood vessel 13. Alteration in the qualitative and quantitative of khilt-edam is known as waram-e-lawzatayn damwi (Humour sanguine Tonsillitis) and characterized by fever, severe throat pain, sweetish taste in mouth (as wine). In case of waram-e-lawzatayn safrawi (bilious tonsillitis) there is qualitative and quantitative abnormality in khilt-e-safra and this condition is characterised by fever, anxiety, salivation decrease, acute illness, throat pain, hot sensation on throat, paleness of sclera¹³. Damwi and *safrawi warme lawzatayn* are more hazardous than balghami. Waram-e-lawzatayn balghami (phlegmatic tonsillitis) is imbalance of khilt-ebalgham and mainly caused by overproduction of khilte balgham or overuse of phlegm producing foods. Waram-e-lawzatayn saudawi (black bilious tonsillitis) is rarely found and its features are hard swelling of tonsils, associated muscles and tissues, dryness of skin. Abu Al-Qasim khalaf ibn Al Abbas Al-Zahrawi Al Ansari (936-1013 AD), The father of surgery of Unani medicine clearly mentions lawzatayn (tonsils) in his book Kitab Al Tasreef and declares that when the swelling is soft and yellow white in color, it is the best time for tonsillectomy. If the swelling is hard and red in color or congestion is seen, surgery should be avoided. If swelling is hard, muddy-colored, and hyposensitive no surgical procedure is needed.

Case report

A male child of age 10 years came to the outpatient Department of State Unani medical college, Prayagraj. His main complaints were-khansi (Cough), humma Fever), dard-e halaq (Pain in throat), kharashe halaq (Burning sensation in throat), dofe ishtiha (Loss of appetite), since 4 days before. On examination waram-e lawzatayn

(enlarged tonsils due to inflammation) was found. He had a history of recurrent tonsillitis in the last year.

History of Present Illness

According to subject mother, he had a history of recurrent tonsillitis in the last one year. He was taking medicine for that, but did not get complete relief. The child was normal 4 days back. Then he got suffered from pain, fever, cough

and burning sensation in the throat and loss of appetite. Previously he used Paracetamol for fever. His mother took him to state Unani medical college and hospital for further evaluation and management.

Material and methods Method

Centre of Study: State Unani Medical College and Hospital, Prayagraj.

Table 1. Tonsillo-Pharyngitis Assessment (TPA)					
Features	Finding	0	1	2	3
01	Oral temperature	≤98.6°F	98.7 – 98.9°F	99.0 – 99.9°F	≥ 100.0°F
02	Oropharyngeal color	Normal/pink	Slightly red	Red	Beefy red
03	Size of tonsils	Normal/absent	Slightly enlarged	Moderately enlarged	Much enlarged
04	Number of oropharyngeal enanthems (vesicles, petechiae, or exudates)	None	Few	Several	Many
05	Largest size of anterior cervical lymph nodes	Normal	Slightly enlarged	Moderately enlarged	Much enlarged
06	Number of anterior cervical lymph nodes	Normal	Slightly increased	Moderately increased	Greatly increased
07	Maximum tenderness of some anterior cervical lymph nodes	Not tender	Slightly tender	Moderately tender	Very tender

Table 2. Medicines (decoction) ¹⁶ used in case study along with dose, duration				
Serial No.	Name of drugs	Scientific name	Dose 17	Duration
01	Saboos gundum	Triticum aestivum.L	40 gm	21 days
02	Maghze faloose khayar shambar	Cassia fistula.L	20 gm	21 days
03	Iklilul malik	TrigonellaUncataBoiss	5gm	21 days
04	Asalsoos	Glycyrrhizaglabra.L	5gm	21 days

Assessment criteria: Tonsillo-Pharyngitis Assessment (TPA)¹⁵,

In Table no. 1 findings and how the score has been given is mentioned.

An index of distinct clinical features of pharyngitis, scored from 0 to 21 (higher scores indicating more severe symptoms.

Seven features reported on:

- 1. Oral temperature
- 2. Oropharyngeal color
- 3. Size of tonsils
- 4. Number of oropharyngeal enanthems (vesicles, petechiae, or exudates)
- 5. Largest size of anterior cervical lymph nodes
- 6. Number of anterior cervical lymph nodes
- 7. Maximum tenderness of some anterior cervical lymph nodes

Method of preparation

Place all the dry and crushed medicines

mentioned in table 2 in an earthware or any steel pot and pour cold water until the level of water is 3-4 cm above the crushed medicines. Soak the medicines in the water for at least 1 hour. Then place the pot on the stove and strong heat should be applied to bring it to the boil. As soon as the liquid is boiled, turn the heat down, simmer the medicine for 20 minutes, and then strain the decoction from the pot into any other pot or receptacle.

Results and Discussion

In the present study, the effect of a Unani formulation in *waram lawzatayn* was assessed using TPA score. As shown in Table 4, before the treatment the patient had TPA score 16 which decreases gradually, on D7 it was 10, and then 7 at D14 and finally 3 at D21. There is also regression of symptoms like fever, enlarged tonsils, pain and burning in throat. As mentioned in Table 3, *saboose gundum* and *maghze faloose khayar shambar* have antipyretic property which helps in subsidence of fever.

Table 3. Pharmacological properties of the Formulations				
Serial No.	Drugs	Pharmacolo	ogical Properties	
		Modern Aspect	Unani Aspect	
01	Saboos gundum	Antipyretic, Anti-Inflammatory 18	Muhallil-i-awram (anti-inflammatory),	
			musakkin-i-alam (analgesic) ¹⁷	
02	Maghze faloose khayar	Antibacterial ²¹ , Anti-	Muhallil-i-awram(anti-inflammatory),	
	shambar	inflammatory ^{22,23} Anti-itching ^{19,20} ,	musakkin-i-alam(analgesic), musakkin-i-	
		Antipyretic ¹⁹ , ²⁴ Antioxidant ²⁵ , Wound	awram-i-har,munaffith-i-	
		Healing ^{19,26} , Antitussive ²⁷	balgham.(expectorant)17,32	
03	Iklilul malik	Anti-inflammatory ²⁸	Musakkin-i-alam (analgesic), Muhallil-i-	
			awram (anti-inflammatory17	
04	Asalusoos	Anti-inflammatory 14,1	Nafekhushoonatqasabaar –ria	
			(Demulcent), Bhha al sawt (horseness of	
			voice), waja –al – qasabaar-ria,	
			dafekhushonatwasuzashsadar,	
			halaqwahanjara (elimination throat	
			irritation) ^{33,34}	

Table 4. Showing regression of TPA Score					
Serial No.	Feature	0 th day	7 th day	14 th day	21st days
1	Oral temperature	3	2	2	0
2	Oropharyngeal color	3	2	1	1
3	Size of tonsils	3	2	1	1
4	Number of oropharyngeal exanthemas (vesicles, petechiae, or exudates)	1	1	1	0
5	Largest size of anterior cervical lymph nodes	2	1	1	0
6	Number of anterior cervical lymph nodes	2	1	0	0
7	Maximum tenderness of some anterior cervical lymph nodes	2	1	1	1
	TPA score	16	10	7	3

Maghze faloose khayar shambar, iklilul malik, asalsoos and saboose gundum all possess antiinflammatory property (muhalli-i-awram), which helps in regression of size of enlarged tonsils. Iklilul malik, khayar shambar, asalsoos have analgesic (musakkin-i-alam), anti-irritant, (Na'fekhushoonatqasabaar demulcent and wound healing properties which plays an important role in subsiding the pain, itching and irritation in throat. Patient had frequent attacks of tonsillitis and got immune-compromised with complications like cervical lymphadenopathy which needs a compound formulation which can eliminate the etiopathology from its root. Unani decoction a compound formulation made up of four medicines complete in all level successfully without any complication.

Conclusion

This case study confirms the efficacy of unani

decoction (saboos gundum, maghz-e faloose khayar shambar, iklilul malik, asalsoos) in waram-e lawzatayn. Decoction made up of these Unani medicines being effective in waram-e lawzatayn can be used as an adjuvant in the management of different type of tonsillitis. Further studies with large sample size are recommended.

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Conflict of interest: None declared

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