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Discovering the Uniqueness of Unani Medicine: Global Perspectives and Current Status

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ABSTRACT

The Unani Medicine developed in Greece, but its roots actually trace back to ancient Egypt and Mesopotamia. The Greeks acquired medical knowledge from these ancient civilizations, which significantly influenced their practices. The Babylonian, Assyrian, Akkadian, and Sumerian civilizations in Egypt and Mesopotamia conducted early medical experiments and laid the foundational stages of medicine, from which the Greeks greatly benefited. The distinction of Greek medicine lies in its organization of rules, regulations, principles, and fundamentals, elevating it to the status of science and art through intellectual rigor. In Greece, the history of medicine is often said to begin with Asclepius, a hero and God of medicine. Before him, there is no evidence of a historical medical tradition among the Greeks. The rod of Asclepius, a staff entwined with a snake, remains a symbol of medicine today. Prominent figures of the Greek era include Thales, Pythagoras, Socrates, Plato, and Aristotle. Following the peak of scientific and artistic advancement in Greece, knowledge migrated from Greece to Rome in the second century BCE. In Rome, physicians like Galen and Dioscorides emerged, making significant contributions to the field of medicine. During the 7th century, Unani Medicine's ties with the Arabian Peninsula began. In the 9th century, Caliphs Harun al-Rashid and Al-Ma'mun established the Bayt al-Hikmah (The House of Wisdom), a center dedicated to translating Greek medical and other sciences into Arabic. This initiative sparked a renaissance, revitalizing Unani Medicine in the region. Esteemed physicians such as Ali ibn Rabban al-Tabari, Muhammad ibn Zakariya al-Razi, Ali ibn al-Abbas al-Majusi, Abu Sahl al-Masihi, Ibn Sina, Ibn Zuhr, Ibn Rushd, Ibn Tufail, Al-Zahrawi, and Ibn al-Baytar contributed significantly to its development. Translators from diverse backgrounds, including Christians, Zoroastrians, and Jews like Hunayn ibn Ishaq's family (809–873), the Bakhtishu family, and the family of Qurra, played pivotal roles. Their efforts over a century laid the foundation for subsequent original works.

Notably, Avicenna's "The Canon of Medicine" (1037) alone comprises more than a million words. The Muslim Golden Age witnessed extensive research and the prolific authorship of numerous scholarly works in medicine.

Key Words: Unani Medicine, ancient Egypt and Mesopotamia, Arabian Peninsula

Discussion

The Uniqueness of Unani system of Medicine

The pursuit of understanding disease causation has led to diverse medical approaches, shaped by different focuses of human intellect. Various medical systems have emerged from these studies, each grounded in unique perspectives on disease causality. These systems maintain distinct identities based on their foundational theories. For instance, Unani medicine emphasizes concepts like humors (Akhlat), and temperament (Mizaj), notably, the four primary qualities (hot, cold, dry, moist). These qualities—cold, heat, dryness, and moisture—are universally acknowledged in the world, affecting everyone through environmental experiences. However, their internal effects on the body are less perceptible to the average person. Unani medicine's emphasis on these fundamental qualities and their impact on health sets it apart from other medical traditions.

Unani physicians conducted extensive observations of the natural world, noting parallels between changes in plants and animals due to natural phenomena and similar effects in humans. Their meticulous study revealed that the universe operates under a system where the four qualities (hot, cold, dry, moist) exert significant influence. These qualities manifest visibly externally and induce comparable changes within the human body. Based on these foundational insights, Unani medicine developed as a straightforward and natural treatment method. This emphasis on fundamental qualities distinguishes Unani medicine from other medical systems.



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Historically, the study of Unani medicine and the works of ancient physicians such as Hippocrates, Galen, Al-Razi, and Ibn Sina in Europe, America, and elsewhere primarily focused on their historical significance. However, there is now a growing interest in their theories and practical medical applications. Unani medicine's emphasis on the four qualities and their impact on health underscores its natural and systematic approach to healing. This burgeoning interest reflects a broader recognition of the enduring value and contemporary relevance of Unani principles in medical research and practice worldwide.

Unani Medicine: A Natural Approach Towards Healing

In contrast to Western medicines, which often come with side effects, there has been a growing interest in herbal medicine. Many diseases are now linked to the excessive use of synthetic drugs, particularly those derived from chemicals. These medications are known to disrupt the body's natural balance and immunity, contributing to the rise of diseases globally. Synthetic drugs, being chemically synthesized, do not always integrate well with the body upon ingestion, often introducing foreign elements that can feel unnatural and cause discomfort. In contrast, Unani medicines align closely with human biology's principles. They are readily absorbed and assimilated by the body, utilizing their components for nourishment and bodily functions. By seamlessly integrating into the body's systems, Unani medicines address nutritional deficiencies and promote overall well-being. Despite advancements in medical science, the continuous increase in disease prevalence can be attributed in part to the adverse effects of chemical drugs. These drugs often fail to provide holistic healing and may even contribute to the emergence of new ailments. This trend highlights the limitations of conventional treatment methods in addressing the root causes of diseases effectively.

Unani medicine offers a natural and holistic approach to healing, addressing the root causes of diseases without causing harm to the body. As awareness about the drawbacks of synthetic drugs grows, more people are turning to Unani medicine for safe and effective treatment options. Unani physicians have long recognized the connection of natural elements—water, air, earth, and space—and how disturbances and imbalances in these elements affect the ecosystem, including plants, animals, and humans. They observed how changes in environmental conditions impact health and disease, noting fluctuations in temperature, humidity, and dryness through keen observation. Based on these insights, Unani medicine has evolved into a comprehensive system of treatment.

Its fundamental theories center around four key qualities: elements, temperament, humors, and the dynamics of health and disease—all of which are observable in the natural world. The scientific study of ecological systems came much later, but Unani experts had already grasped these principles. Their medicine is deeply rooted in understanding the cycles of day and night, changes on Earth and in space, and the influences of celestial bodies like the moon, sun, and stars on plants and animals. This holistic approach acknowledges and integrates the broader context of changes in space and the universe into their medical practices.

Concept of Mizaj

The theory of Kafiya (Qualities) holds a unique and central position in Unani medicine, distinguishing it from other medical systems. While all medical systems treat diseases based on their causes, Unani medicine places significant emphasis on the study and understanding of these four qualities—hot, cold, dry, and moist—that govern natural and cosmic changes. This approach forms the foundation of its natural and organic treatment methodology.

In contrast to Western medicine, which often attributes diseases to bacteria and viruses and develops medications specifically targeting these microorganisms (such as antiviral and bactericidal drugs), Unani medicine focuses on addressing imbalances in the fundamental qualities of nature. The medicines used in Unani are sourced from natural substances in their original state, preserving their natural composition without alteration or adulteration. Unani practitioners aim to utilize drugs with their complete constituents intact, avoiding the chemical breakdown and isolation processes typical in allopathic medicine.

For instance, in Western Medicine, drugs are often deconstructed in chemical laboratories to isolate and utilize specific active components, discarding other constituents deemed ineffective. This reductionist approach contrasts sharply with Unani's holistic perspective, which values the integrity and synergy of natural substances in their entirety. Therefore, Unani medicine's commitment to using drugs in their crude, natural form emphasizes its organic and comprehensive approach to healing, rooted in centuries of observation and understanding of natural principles.

Nutritional value of Unani drugs

In Unani medicine, the approach is scientific and closely aligned with human life. Unlike Western medicine, which often isolates and utilizes only the active component of a drug while discarding other seemingly ineffective components, Unani medicine values the balance and synergy of all components within a medicine.



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Each component plays a role in maintaining the overall balance of the medicine, which helps prevent side effects that may arise from disrupting this natural arrangement. Furthermore, Western medicines, being chemical in nature, can be perceived as foreign by the body. This can trigger resistance mechanisms and a sense of foreignness, potentially leading to adverse effects. In contrast, Unani medicines are closer to our biology and are typically well tolerated by the body. They are absorbed and integrated into the body's systems, rather than remaining as foreign substances. Another significant difference lies in the nutritional contributions of Unani medicines. These medicines, derived from natural substances like cloves, ginger, cardamom, mustard, lemon, and various seeds and herbs, not only serve medicinal purposes but also provide essential nutrition to the body. In regions like India, where malnutrition is prevalent, Unani medicines play a role in alleviating deficiencies and supporting overall health. This nutritional function is not typically fulfilled by the chemical drugs of Western medicine, which are designed primarily for therapeutic effects rather than nutritional value. Therefore, Unani medicine offers a holistic approach that considers the balance of natural components, biological acceptance by the body, and nutritional benefits. This perspective underscores its relevance in addressing health challenges in diverse populations and environments.

Unani medicine classifies drugs with a comprehensive approach that considers both their therapeutic and nutritional aspects. This classification system categorizes drugs into four types:

1. Ghidhā' Dawā'ī (Medicinal Food): These substances primarily function as dietary items but also have some pharmacological actions. They are more food-oriented with minimal medicinal effects.
2. Dawā' Ghidhā'ī (Nutritional Drugs): This category includes substances primarily used as drugs but also contain nutritional components. They provide more medicinal benefits while still offering some dietary value.
3. Pure medicine: Drugs in this category are primarily medicinal with minimal or no harmful effects on the body.
4. Toxic and poisonous medicines: These drugs have harmful effects and toxicity levels that can adversely affect the body. They are used cautiously and only when absolutely necessary in Unani treatment.

In Unani practice, it is recommended to prioritize medicines from the first and second categories due to their balanced nature and beneficial effects. Medicines from the third category are used as needed, while those from the fourth category are employed sparingly and only under critical circumstances.

In contrast, Western medicine tends to categorize all drugs into the fourth category, as they are often chemical and synthetic in nature. This classification underscores the fundamental differences in approach between Unani and Western medicine. Unani drugs are perceived as more beneficial for human well-being and overall prosperity due to their natural origins, balanced composition, and minimized potential for harmful effects compared to the chemical and synthetic drugs prevalent in Western medical practices.

Holistic Approach

In Western medicine, the primary focus of treatment is often the disease itself, with medications targeted directly at combating the specific ailment. However, Unani medicine takes a different approach by placing greater importance on the patient as a whole individual rather than solely on the disease.

In Unani medicine, medications are used in their original forms and with their entire set of constituents intact. Similarly, during treatment, the entire human body is considered and treated as a unified system. Unlike Western medicine, which may compartmentalize the body into separate units for specialized study and treatment, Unani medicine views the body holistically. This holistic approach ensures that any medication used for one organ or system does not adversely affect other organs or cause harm elsewhere in the body.

For example, in Western medicine, medications intended to treat nerve weakness may inadvertently have harmful effects on the kidneys or heart. In such cases, specialists for each affected organ might not coordinate their efforts, leading to a fragmented approach to care. The focus remains on treating the specific disease or symptom, often without sufficient consideration of potential side effects or impacts on other bodily systems.

Conversely, Unani medicine integrates a comprehensive understanding of the patient's temperament (Mizaj) and bodily humors (Akhlāt) into its treatment strategies. This holistic perspective aims to maintain balance within the body's natural systems while addressing the root causes of illnesses. By considering the entirety of the patient's health and well-being, Unani medicine emphasizes personalized and integrated care that aligns with the individual's unique physiological and psychological makeup.

Therefore, the holistic approach of Unani medicine, which prioritizes the patient's overall health and balance, contrasts with the disease-focused approach of Western medicine.



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This aspect underscores the importance of considering the entire individual in medical treatment, ensuring both symptom relief and overall well-being.

Arab Influence on Unani Medicine: A Legacy of Knowledge and Healing

After the early emergence of Islam, the dominance that Islam achieved was a result of its ideological supremacy. As is well known, during the Abbasid Caliphate, Muslims studied the sciences of that era. The House of Wisdom (Bayt al-Hikmah), also known as the Grand Library of Baghdad, was established as a major public academy and intellectual center in Baghdad in Abbasid-era. The literature that had been developed by human knowledge up to that time was translated into Arabic and then extensively reviewed. The largest institutions in history were established for the teaching of these sciences. A symbolic example of this is that Roger Bacon (d. 1292), who established the first university in England (Cambridge University), had studied at the Muslim University of Córdoba. Bacon applied the empirical method of Ibn al-Haytham (Alhazen) (d. 1040) to observations in texts attributed to Aristotle.

(Ackerman, James S. (1978), "Leonardo's Eye", Journal of the Warburg & Courtauld Institutes, vol. 41.)

During the one hundred years of the Umayyad rule, Muslims strengthened and stabilized themselves religiously, educationally, politically, and militarily. Following this period, with the advent of the Abbasid era beginning in 750 AD a new age of civilization and culture began. The Abbasid period is considered the golden age of Muslim history. During this time, Muslims achieved remarkable advancements and recognition in various fields, including conquests, knowledge, philosophy, literature, medicine, and science.

For a hundred years, extensive translation efforts were carried out, which in itself was a significant achievement. From 750 to 850 AD, large-scale translations were undertaken. Notably, medical books were translated from Greek and Syriac into Arabic. Persian works were also translated, and some Indian books were translated from Sanskrit. However, Indian and Persian works did not have a significant impact on the fields of medicine and science. The works that had a lasting influence and were given importance by the Arabs were primarily Greek. These included books on philosophy, medicine, and other sciences. The Arabs acquired a vast amount of knowledge from the Greeks.

After 850 AD, original authorship began to flourish. Based on the foundation laid by translations, Arab authors started writing independent books. The Abbasid era, which lasted for nearly 500 years, is a highly significant period concerning the intellectual advancement of Muslims. Many great personalities and renowned researchers emerged during this time. The Abbasid caliphs provided unparalleled patronage to the sciences and arts. Books were weighed, and their weight was compensated with gold.

Some writers and authors would use thick paper to increase the weight of their books and, consequently, receive more gold in return. This practice inadvertently led to the preservation of these books, as the thick paper made them more durable. Not only the caliphs but also the nobles of that time generously supported and encouraged scholars. They set monthly salaries for translators, commissioned books on various subjects, and facilitated translation work. During the Abbasid era, large-scale libraries were also established.

In the Islamic world, there were two centers of knowledge. One was the East, with its capital in Baghdad, and the other was the Western school of Andalusia, with its central location in Cordoba. In Andalusia, just like in the East, great scientists, philosophers, and physicians emerged. Their scientific contributions are in no way lesser than those of the Eastern school. Figures such as Ibn Bajjah, Ibn Zuhr, Ibn Rushd, Ibn Tufayl, al-Ghaffiqi, Ibn al-Jazzar, Ibn Wafid, Ibn al-Baitar, and Abu al-Qasim al-Zahrawi are like the sun and moon in their respective fields. In the East, names like Jabir ibn Hayyan, al-Kindi, al-Farabi, Ibn Sina, Abd al-Latif al-Baghdadi, al-Biruni, Musa al-Khwarizmi, Najib ad-Din al-Samarqandi, and Ibn al-Nafis come to mind effortlessly. They form a galaxy from which science, medicine, philosophy, and other disciplines shine brightly. Al-Farabi was a great philosopher from whom even Ibn Sina (Avicenna) derived knowledge. Note that after Ibn Sina, no one was called a teacher. The first teacher was Aristotle, the second was al-Farabi, and the third and last was Ibn Sina. Philosophy and medicine, in a way, culminated with Ibn Sina. Additionally, Ibn Sina demonstrated expertise in astronomy, astrology, mathematics, linguistics, poetry, and literature. He also wrote books on ethics and other subjects. His poetic collections in medicine and philosophy remain his legacy. An intelligent person could master multiple fields of science and arts. At that time, science and philosophy had not yet developed into distinctly separate disciplines. The same situation existed in Greece, where philosophers were also scientists and physicians. It was much later that science separated from philosophy, and subjects like physics, mathematics, algebra, and biology were defined as distinct fields.



The Status of Unani Medicine in India

Before the 11th century, Unani medicine reached India and flourished under the patronage of Muslim rulers during the Sultanate and Mughal periods. Esteemed physicians emerged across various regions, supported by kingdoms such as Yemeni, Qutb Shahi, Adil Shahi, Asaf Jahi, and Mughals, as well as governments in Kashmir, Awadh, Deccan, and the southern states. Cities like Hyderabad, Bhopal, Rampur, and Bahawalpur contributed significantly to its development. Non-Muslim states such as Baroda, Gwalior, Indore, Alwar, Jaipur, and Mysore also played key roles in advancing Unani medicine. In earlier times, Unani clinics were established in every town in India, reflecting its widespread popularity and acceptance as a treatment method.

During the British colonial period, the official imposition of restrictions on Unani medicine aimed to promote Western medicine across territories where Unani had been practiced for centuries. In Islamic countries, including Iran under Naser al-Din Shah Qajar's rule (fl. 1848), similar measures were taken to suppress Unani medicine. However, scholars in India actively resisted these changes. They not only defended their religious practices but also endeavored to preserve their language, culture, social customs, and ancient medical traditions.

In contrast, Arab countries, during British dominance and the spread of Christianity, focused primarily on preserving their religious practices. This singular focus led to the neglect of traditional attire, customs, culture, and even traditional medicine in countries like Iran, Turkey, and Arab nations, where Unani medicine had been deeply rooted for centuries. Consequently, these regions saw a decline and, in some cases, the near eradication of their indigenous medical practices and cultural heritage.

This historical context highlights India's unique efforts in preserving Unani medicine amidst colonial pressures, contrasting with the challenges faced by Arab countries in maintaining their traditional practices under foreign influence.

The Struggle for the Preservation of Unani Medicine in British India

Legacy of Hakim Ajmal Khan

The scholars of India achieved a remarkable feat by actively preserving ancient culture, social customs, and medical practices alongside their religious pursuits. During the British colonial period, the British government sought to implement measures in Bombay similar to those successful in Iran, Turkey, Central Asia, and Arab countries—banning

indigenous medical practices like Unani and declaring them illegal. However, this move was fiercely opposed by supporters of Unani and Ayurvedic medicine, notably led by Hakim Ajmal Khan. Indian assembly members voiced strong opposition, and the public rallied behind them. Due to these concerted efforts, which were largely spearheaded by Hakim Ajmal Khan, there was averted potential for the banning of ancient medical practices in India. Hakim Ajmal Khan's legacy is multifaceted and illustrious, encompassing his family's greatness, esteemed status, medical expertise, scholarly contributions, and pivotal role in the freedom struggle. His most enduring legacy, however, lies in his monumental struggle for the preservation and protection of Indian & Unani medicine. His unwavering efforts ensured the survival and continued relevance of indigenous medical practices, a crucial chapter in Indian history. Without his leadership and advocacy, the fate of these medical traditions in India might have mirrored their decline in other countries. By the time of India's independence, Unani medicine had gained widespread recognition throughout the subcontinent, thriving with notable prominence. In Punjab, its influence was so pervasive that even all traditional practitioners adopted the title "Hakim" on their shop signs in homage to its respected practitioners. Many Hindu and Sikh physicians in Punjab emerged as significant contributors to the field, enriching it through their scholarly writings, literary works, and medical practices. Thus, Hakim Ajmal Khan's efforts not only safeguarded Unani medicine in India but also contributed to its flourishing development and integration into the cultural fabric of the nation. His legacy remains a testament to the resilience and importance of preserving indigenous medical knowledge and practices.

Relation of Medicine with religion:

Unani medicine was not associated with any particular religion, and it is surprising to hear that during the Abbasid era, a Muslim physician complained that despite being highly skilled and capable, with healing hands given by Allah, it was widely believed in Baghdad that only non-Muslims could be skilled physicians. Therefore, he was not considered a good physician. No medical system or treatment method is inherently linked to any religion. In Punjab, the number of Hindu and Sikh physicians was much higher than that of traditional Vaidyas, and all of them liked to be called as Hakim. Because of them, Punjab was known as the province of Unani medicine. Hindu and Sikh physicians not only practiced Unani medicine but also promoted it through the publication of journals and writing of books. After independence, Unani medicine faced the same challenges as the Urdu language.



Unani Medicine in India after 1947

Until the time of independence, Unani medicine was widespread throughout India and held a prestigious position similar to that of the Urdu language. Both enjoyed significant scholarly prominence. However, post-independence, Unani medicine faced discrimination and narrow-mindedness, much like Urdu. The prominence that Unani medicine once enjoyed across India began to wane. Despite these challenges, it is reassuring that the Indian government continues to support and patronize Unani medicine. Today, India is considered the largest center for Unani medicine in the world. The country hosts a significant number of medical colleges, hospitals, and research centers dedicated to Unani medicine. Several universities offer postgraduate and Ph.D. programs in this field, setting an example for the rest of the world. India has made significant efforts to promote indigenous medicines more than any other country. One of India's greatest qualities is its profound respect for traditions. This respect is reflected in its customs, language, society, and the sciences and arts. India has diligently preserved its ancient civilization in all aspects, including its medical practices.

Indigenous medicines, including Unani, hold great importance for the country as they reflect its ancient traditions. The Indian government strives to promote these medicines as much as possible, recognizing their cultural and historical significance. Due to the government's attention and efforts, the development of indigenous medicines, including Unani, is expanding continuously. India's commitment to preserving and promoting Unani medicine showcases its dedication to maintaining its rich cultural heritage and traditional medical practices. The continued support and development of Unani medicine in India ensure that this ancient practice remains a vital part of the country's healthcare system and cultural identity.

The government of India has established a major institution for research under the name of Central Council for Research in Unani Medicine (CCRUM). Besides the council, departments for higher education have also been established in Unani colleges. In 1972, the first department of Ilmul Advia (pharmacology) was established at Aligarh Muslim University in India. Subsequently, departments at the postgraduate level were established in other subjects where PG scholars are conducting research in their respective fields. A large National Institute of Unani Medicine (NIUM) for research has been established in Bangalore where research is being conducted at every level. This institute only offers postgraduate education and research; undergraduate education is not available there.

Recently, in March 2019, a peripheral of the National Institute of Unani Medicine was established in Ghaziabad. The purpose is to launch such medical centers in India. More research is not expected from medical colleges because they are primarily focused on teaching. Especially in undergraduate colleges, education is provided according to a specific curriculum. However, with the establishment of postgraduate departments and the initiation of the Ph.D. program, it is hoped that, high-quality research will be conducted there.

The Global Recognition and Revival of Unani Medicine

For a long time, Unani medicine was primarily confined to the Indian subcontinent. However, it is encouraging to note that it is now being scientifically and practically reviewed in Europe as well. A significant role in this development has been played by the World Health Organization (WHO). Through a resolution, WHO has initiated efforts to promote the traditional medicines of various countries, providing funds to the respective nations for this purpose.

It is cheering to see that institutions for Unani medicine are also being established in Pakistan, Bangladesh, Sri Lanka, South Africa, the United Arab Emirates, and Iran. Additionally, the practice of Unani medicine has been legally permitted in England. Despite these developments, Unani medicine is not as advanced anywhere else as it is in India. Many universities have established faculties of medicine that include departments for Unani, Ayurveda, and other traditional systems of medicine.

The differences among these medical systems are not due to their antiquity or modernity but are rooted in their distinct and specific theories regarding the causes and treatments of diseases. Each system offers a unique perspective and approach, contributing to the rich diversity of global medical practices. Unani medicine, with its holistic and natural methodologies, continues to provide valuable insights and treatments, complementing other traditional and modern medical systems worldwide.

The acknowledgment of the value of local and traditional medicines by the World Health Organization (WHO) has sparked renewed interest, even in countries where these medical systems were already prevalent. This recognition has prompted efforts by various nations to promote their traditional medical practices, including Japanese, Korean, Bhutanese, Chinese, Unani, Ayurveda, Sowa-Rigpa and Siddha medicine. WHO's endorsement has greatly benefited these traditional medical systems, drawing global attention to their potential and significance.



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This recognition has not only rejuvenated the practice and study of Unani medicine but also encouraged a renewed appreciation and effort towards the development of various traditional medical systems worldwide. The increased global interest and support have led to significant advancements and integration of these practices into modern healthcare frameworks, ensuring that the rich heritage and practical benefits of traditional medicines continue to be explored and utilized.

Unani Medicine in Iran

In Iran, during the early 19th century under British influence, Nāser-ad-Din Šāh-e Qājār (1831-1896) imposed a complete ban on Unani medicine, and Unani clinics were considered punishable offenses. This restrictive trend persisted during the Pahlavi dynasty, with both Reza Shah Pahlavi and the last Shah, Mohammad Reza Shah, continuing the practice of suppressing Unani medicine. However, after the Islamic Revolution in 1979, there was a significant shift in attitude towards traditional medical practices. Scholars began to focus on preserving their heritage, referring to Unani medicine as Tibb Sunnati. It is encouraging to note that post-revolution, Unani medicine started being viewed as an integral part of Iranian heritage. This renewed interest marked a resurgence in Unani medicine in Iran. Iran boasts a rich history of notable physicians, including Muhammad ibn Zakariya al-Razi (864-935), who made significant contributions to the field. Present-day Iranian researchers are actively engaged in translating Unani medical texts from Arabic into Persian, ensuring the preservation and accessibility of these works. There has been a notable resurgence in interest in Unani medicine, with efforts underway in various universities to teach the discipline and conduct practical work on Unani medicines. This revival reflects a broader trend of appreciating and integrating traditional medical knowledge into contemporary healthcare practices, highlighting the enduring value and relevance of Unani medicine in modern times.

A noteworthy aspect of Unani medicine in Iran is the availability of fresh Unani drugs in the market. Unlike in many other countries where Unani drugs found in pharmacies and herbal shops tend to be dry, old, expired, and musty, the drugs and herbs in Iran are consistently fresh and lush. This freshness of available herbal medicines is heartening and speaks to the vibrant tradition of Unani medicine in the country. Herbal shops are plentiful in every city across Iran. Despite historical restrictions on Unani medicine, the ancient tradition has always thrived. Traditional remedies have remained prevalent in Iranian households, regardless of medical restrictions or the lack of

recommendations from doctors. This enduring tradition ensures that fresh herbal drugs are readily available, and people continue to buy and use them without needing a doctor's prescription. This practice has been a part of Iranian culture for hundreds of years. One of Iran's unique features is its experience of all four seasons. Unlike regions in Europe, America, and other parts of the world where the climate may be consistently cold or hot, Iran enjoys a diverse climate with summer, winter, rain, and autumn. This diversity contributes to the country's rich production of various herbs, which the local population has traditionally utilized for medicinal purposes. In Iranian households, especially among women, there is a general knowledge about the properties of different herbs and their uses for various ailments. This knowledge is part of the cultural heritage, passed down through generations.

Additionally, contemporary Iran is also seeing significant scientific work in the field of Unani medicine. Unani medical books are being translated and published in Persian, and research is being conducted to further validate and understand the efficacy of these traditional remedies. This blend of traditional knowledge and modern scientific inquiry ensures that Unani medicine continues to be a valuable and relevant healthcare practice in Iran today.

Unani Medicine in Greece

The current situation regarding traditional medicines in Greece reflects broader trends across Europe. The people of Greece take immense pride in their illustrious history and are gratified that their methods of treatment continue to thrive in India and other countries around the world. Even today, many use drugs prescribed by Hippocrates and other Greek physicians, highlighting the enduring legacy of their medical theories. In India, Pakistan, and other countries, the medical theories formulated by ancient Greeks have been widely adopted and integrated into their healthcare practices. On Kos, several memorabilia and remnants of Hippocrates' hospital are preserved, including the tree where he is believed to have taught around 460 BC. In Athens, one can find traces of Plato's Academy, further showcasing Greece's rich intellectual heritage.

The Greeks have meticulously preserved their ancient heritage and remain proud of figures like Hippocrates, Socrates, Plato, Aristotle, and other philosophers and physicians. They frequently hold seminars that reference Unani medicine and celebrate their contributions to science and medicine. This deep appreciation and preservation of their past serve as a testament to the Greeks' respect for their heritage, and their continued influence on global medical practices is a source of pride and inspiration for them.



Unani Medicine in Pakistan

In Pakistan, research in Unani Medicine is still in its infancy compared to India. For a long time, Pakistan's Unani curriculum was limited to programs lasting two, three, or four years. This was also the case in India before independence, with the goal being to produce Unani physicians and promote Unani clinics and treatments, which saw considerable success. An interesting distinction in Pakistan is the prevalence of Unani clinics and the frequent practice of Unani treatments, which is notably less common in India. In India, many graduates from Unani colleges often do not go on to establish Unani clinics, and their connection with Unani Medicine diminishes over time. In contrast, in Pakistan, about ninety percent of Unani doctors who graduate from the two-year and three-year programs set up Unani clinics and maintain their practice in Unani Medicine. The introduction of a five-year degree course in Unani Medicine in Pakistan is a recent development. As a result, expectations for advanced research are still premature. Hamdard University was the first institution in Pakistan to launch a five-year curriculum for Unani Medicine. Currently, the five-year Unani Medicine curriculum has been adopted by several universities in Pakistan, including those in Bahawalpur, Kashmir, Peshawar, and Qarshi College. Additionally, a Ph.D. program in Unani Medicine has also been initiated. However, these developments have occurred much later than in India, indicating that Pakistan is still in the early stages of building a robust framework for Unani Medicine education and research.

A notable distinction between Unani Medicine practices in Pakistan and India is the visible inclination towards Unani Medicine in Pakistan. While many graduates from Unani colleges in India often transition to Western medical practices, this is not the case in Pakistan and Bangladesh, where Unani Medicine remains strongly connected to its practitioners. In Pakistan, the prevalent two-year and three-year curricula have allowed a diverse range of individuals—including graduates from various fields, lawyers, and professionals—to become Unani doctors. This broadens the scope and reach of Unani Medicine significantly. For instance, journalists, poets, writers, and other professionals often have an interest in Unani Medicine, some even operating Unani clinics. This creates a literate and culturally engaged class associated with Unani Medicine, which is a positive aspect not as prominent in India.

Educational Systems and Cultural Integration

In Pakistan, many individuals pursue Unani Medicine after completing their undergraduate studies, resulting in a professional class that engages with Unani Medicine not only as a healthcare practice but also as a cultural and intellectual pursuit. This integration of Unani Medicine into various professional fields is beneficial, fostering a broader understanding and appreciation of the system. While the traditional two-year and three-year Unani curricula in Pakistan and Bangladesh might not meet the high scientific standards expected in modern medical education, they serve an essential role in maintaining the practice and cultural significance of Unani Medicine. These shorter programs allow for the establishment of traditional Unani clinics, ensuring the preservation and continuation of Unani medical practices.

Unani Medicine in Bangladesh

In Bangladesh, similar to Pakistan, Unani clinics are established in small towns and cities, contributing to the widespread practice and acceptance of Unani Medicine. The presence of these clinics ensures that Unani Medicine remains a vital part of the healthcare system in these regions.

Progress and Challenges

Unani Medicine is evolving in Pakistan and Bangladesh, with efforts to modernize the curricula and integrate scientific research. However, the traditional practices still hold significant value, providing a bridge between ancient medical wisdom and contemporary healthcare needs. The challenge remains to balance the traditional aspects with modern scientific rigor to enhance the credibility and efficacy of Unani Medicine in the global context. In conclusion, the vibrant practice and cultural integration of Unani Medicine in Pakistan and Bangladesh highlight the unique and diverse ways this ancient system continues to thrive and adapt in the modern world.

Unani Medicine in Sri Lanka Educational Developments

Unani Medicine has a notable presence in Sri Lanka, where the government has established a dedicated Unani college. Historically, this institution offered a four-year curriculum that attracted students from India who sought to obtain degrees with a relatively short enrollment period.



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However, the educational standards have since been elevated, and the government Unani college in Colombo now offers a comprehensive five-year curriculum. This advancement underscores Sri Lanka's commitment to improving the quality and depth of Unani medical education.

Integration with Ayurveda

Sri Lanka's healthcare landscape also includes an Ayurveda college, reflecting the country's broader support for traditional medicine systems. The coexistence of Unani and Ayurvedic colleges indicates a holistic approach to traditional medicine, catering to a diverse range of medical practices and philosophies.

International Collaboration

Sri Lankan students continue to seek advanced education in Unani Medicine from prestigious institutions like the Ibn Sina Academy in India. This international exchange enhances the educational and research capabilities of Sri Lankan practitioners. The participation of Sri Lankan delegates in international seminars, such as the one organized by the Faculty of Unani Medicine in Aligarh, demonstrates the active engagement of Sri Lanka in the global Unani Medicine community.

Unani Medicine in Other Regions

South Africa

Similar to Sri Lanka, South Africa has also established colleges for Unani Medicine alongside Ayurveda. This development signifies the growing recognition and acceptance of Unani Medicine in various parts of the world. The integration of these traditional systems into formal education reflects a global trend towards embracing holistic healthcare approaches.

Middle East and Europe

In the United Arab Emirates and other countries in the Middle East, official permission has been granted for the practice of Unani Medicine. This regulatory support facilitates the establishment of Unani clinics and encourages research in traditional medical systems. Iran stands out with several universities offering Unani Medicine education and conducting research on various types of medicines, contributing significantly to the field.

In England, Unani Medicine has also gained recognition, with numerous physicians setting up clinics. This acceptance in a Western country is a testament to the global appeal and efficacy of Unani practices.

Research and Development

Despite the widespread establishment of Unani Medicine institutions and practices across different parts of the world, the most systematic and organized research activities remain largely concentrated in India. Indian institutions have taken a leading role in pioneering scientific research, developing academic curricula, and establishing clinical practice standards in the field of Unani Medicine. Through their efforts, India has emerged as a central hub for scholarly work and innovation in this traditional system of medicine, serving as a model for the global Unani medical community.

Participation and Global Representation

In recent years, numerous seminars and academic gatherings on Unani Medicine have been organized across the world, reflecting the growing international interest in this traditional healthcare system. These events witness participation from a diverse range of countries, demonstrating the global engagement with Unani Medicine. Delegates from countries such as England, Iran, Uzbekistan, Tajikistan, Bangladesh, Pakistan, and Sri Lanka have participated in these seminars, highlighting the wide geographical influence and increasing acceptance of Unani practices.

Such seminars play a vital role in promoting knowledge exchange. They provide a platform for scholars, practitioners, and researchers to share traditional wisdom alongside modern scientific findings. Participants present research on various aspects of Unani Medicine, thereby contributing to a broader collective understanding and fostering international collaboration. These gatherings also emphasize the cultural significance of Unani Medicine by illustrating how different countries preserve and integrate this traditional system within their respective healthcare frameworks.

Furthermore, these seminars help reinvigorate global interest in Unani Medicine. They demonstrate the resilience and adaptability of this medical tradition and underscore the importance of international cooperation in preserving and advancing traditional systems of medicine.

Conclusion

The expansion of Unani Medicine into various regions of the world reflects its enduring relevance and adaptability in contemporary healthcare. Educational reforms, international collaboration, and supportive regulatory frameworks have played a significant role in facilitating this growth.



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Although India continues to remain at the forefront of research and development in Unani Medicine, the global Unani community is steadily expanding. This collective effort contributes to a richer and more diversified global healthcare landscape, ensuring that the legacy of Unani Medicine continues to flourish in the modern era.

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