

Available online on 15.3.2020 at <http://ujpr.org>**Universal Journal of Pharmaceutical Research***An International Peer Reviewed Journal*

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Volume 5, Issue 1, 2020

REVIEW ARTICLE

A SHORT REVIEW OF URINARY SYMPTOMATOLOGY- GRECO ARAB MEDICINEAzizur Rahman^{1*}, Mohd Zulkifle², Mohammad Ruman Khan³, Mohammad Aslam⁴¹Dept. of Mahiyatul Amraz (Pathology), NIUM, Bengaluru, India.²Dept. of Kulliyate Tib (Basic concepts), NIUM, Bengaluru, India.³Dept. of Amraze Jild wa Tazeeniyat (Dermatology), NIUM, Bengaluru, India.⁴Dept. of Tahaffuzi wa Samaji Tib (Preventive and Social Medicine), AMU, Aligarh, India.**ABSTRACT**

Greco Arab physicians have explained diseases as well as their signs and symptoms. They have documented the importance of urinary Symptomatology in diagnosis of disease and other conditions of body. They have classified the symptoms on the basis of time period, temporary or permanent etc. They discussed the factors affecting the urine presentation related to urinary tract condition. Symptomatology related to urine available in the Greco Arab classical books were being surveyed. After extensive review of literature, it was found that; Unani physicians were very much familiar to diseases of urinary tract and their signs and symptoms. Urine Symptomatology is very important aspect of medical science; every physician must know the presentation of diseases to make good differential diagnosis, right diagnosis and treatment.

Keywords: Alamat, signs, symptoms, symptomatology, urine.

Article Info: Received 31 December 2019; Revised 22 January; Accepted 3 March, Available online 15 March 2020

**Cite this article-**

Rahman A, Zulkifle M, Khan MR, Aslam M. A Short Review of Urinary Symptomatology- Greco Arab medicine. Universal Journal of Pharmaceutical Research 2020; 5(1): 58-60.

DOI: <https://doi.org/10.22270/ujpr.v5i1.364>

Address for Correspondence:

Dr. Azizur Rahman, Dept. of Mahiyatul Amraz (Pathology), NIUM, Bengaluru, India. E-mail: azizalig@gmail.com

INTRODUCTION

Symptom is an apparent expression of disease whereas sign is that which guides a physician to the proper diagnosis of disease. In Unani system of medicine, there are discussions about symptoms of diseases as well as of health. Arab physicians have written that there is a symptom of diseases as well as health. With the help of healthy symptoms one can infer the body is healthy or not. Healthy symptoms may be related to structure, function or temperament of organs¹.

Signs and symptoms provide information about present, past and the future conditions of the patient's state i.e. health, disease and intermediate state. Knowledge of present state indicators (*alamate dallah*) are useful to the patient as it helps him to follow the proper management and what he must do; knowledge of the past condition or commemorative indicators (*alamate mozakkirah*) are advantageous to the physician as it reveals his skill and hence earns the confidence of his patient. Knowledge of the future conditions or prognostic sign and symptoms (*alamate taqadmatul marifa*) are useful for both as it alerts the patient and physician forecasts about disease and gets reputation².

The state of health and disease is evidenced by knowing the functions of organs i.e. normal or abnormal. Thus the condition of the brain is shown by the state of the movement, by the state of the sensory functions and other psychic functions. The state of health and disease of the heart is made known by the pulse and respiration and the status of the liver either normal or abnormal is perceived by the characters of the faecal matter and urine³.

Classification of sign and symptoms**1. On the basis of health and disease****i. Healthy (Alamat-e-sahiyah)**

- Structure of organ. Health is very much related to structure of organ e.g. normal structure of liver is important for its proper function.
- Temperament of organ. Temperament of organ must be in normal stage otherwise disease will be there e.g. excessive coldness, hotness etc. hamper the organ performance.
- Functions of organ. It is directly proportional to normalcy of human body e.g. if kidney is not working will show the diseased symptoms⁴.

ii. Disease related signs (Alamat-e-mardiyah).

Greek physicians described the sign and symptoms of different diseases in very proper way.

2. On the basis of signs related to time period

- Present signs (Alamat-e-muzakkirah) e.g. raised temperature denotes the person is having fever.
- Past signs (Alamat-e-dallah) e.g. sweating in that person who is having fever indicates fever has gone and any healed mark on abdomen shows that the person has been operated or any other injury.
- Future signs (Alamat-e-munzira/Taqdeematul marifa) e.g. Arab physicians described that if a person is having shivering in lips it means person will be going to vomit⁵.

3. On the basis of temporary or permanent

- Temporary (Alamat-e-muwaqqita) e.g. headache in fever, if fever cured the pain will also be cured³.
- Permanent (Alamat-e-ghair muwaqqita) in this condition if a person is suffering from leprosy with organ deformity, but after cure of leprosy deformity will not be returned to its normal condition⁶.

4. On the basis of complete or partial

i. Complete signs (Alamat-e-kulliyah)

- Alamat-e-awqat amrad (symptoms according to stages of disease)
- Onset (Ibtida). Starting of disease- here the morbid substance starts to come to the diseased area.
- Increment (Tazayyid). The morbid substance comes to the diseased area continuously and volume of diseased area starts to swell and symptoms arise³.
- Acme (Inteha). Morbid matter does not come to the focal area more and stasis of swelling is there.
- Decline (Inhetat). In this condition, the morbid substance gone and all symptoms subside⁵.
- Acute symptoms (Alamat-e-amrad hadda). The symptoms related to acute condition e.g. severe pain in renal stone.

ii. Partial (Alamat-e-juziyah)

5. Determinants of temperament (Alamat-e-amzajah). Ibn sina (Avicenna) has described ten parameters to know the temperament of any person e.g. touch, colour of body, hairs, functions of organs etc³.

6. Symptoms of structural diseases (Alamat-e-amrad e tarkib) e.g. structure of eyeball is spherical if there is some deformity in eyeball will cause disease⁷.

In external diseases the sign and symptoms are objective and can be observed through external senses. Discharges from body give information about internal diseases e.g. urine; sweating, faecal matter etc. following characteristics of urine are of diagnostic value.

CHARACTERISTICS OF URINE

Constituents of urine

If the stone particles are present in urine indicates the presence of renal or urinary bladder stone. Sediments of urine have a diagnostic importance e.g. white flaky sediments denotes ulceration of urinary bladder while red ones come from the kidney, fatty sediments indicate dissolution of solid and liquid fat in the body⁶.

Colour

Different colour of urine stand for different diseases e.g. red sediment denotes disease of kidney while white for urinary bladder. Red colour urine is a sign of haemorrhage from kidney, urethra or in urinary bladder⁷. The pistachio green colour urine indicates cold temperament of person. The different shades of yellow colour urine show some degree of heat present in the body, over activity, pain, starvation or insufficient fluid intake. White transparent urine denotes coldness of temperament. Raw meat washing colour or blood stained water indicates weakness of liver or excess of blood in the body. Purple colour urine shows fatal prognosis as it points out to the combustion of yellow bile and black bile with the production of other abnormal humours⁸.

Odour

Odour of urine also guides the physician towards proper diagnosis e.g. in case of urinary tract infection, passage of bad odour urine. Odourless urine denotes to either a cold temperament or excessive immaturity of humours. In acute febrile conditions, odourless urine is a sign of failing innate heat. If in the course of an acute febrile disease urine is foul-smelling without evidence of ulceration in the urinary passage, it is sign of bad prognosis. If in an acute fever urine has a sour smell; is a sign of early death because it shows that the innate heat is unable to mature the urine⁴.

Consistency

Unani physicians documented the importance of consistency of urine in terms of sign and symptoms. Consistency of urine becomes thicker; is found if the viscid phlegm is eliminated through urine during filtration because of dominance of phlegm and urine of thin consistency is the sign of excessive intake of water or obstruction in any part of body. If digestion and excretion are good, thick urine is sign of good prognosis. If thick urine with headache and body ache found in parson, he is likely to develop fever. Thick urine may be due to pus discharge from abscess in urinary tract. During recovery from paralysis, urine becomes turbid which is passed freely and in large quantities⁸.

Quantity and frequency

Under this heading, Unani physicians explained that the quantity and quality of intake of foods and drinks alter the schedule and frequency of excretions. Drinking of more watery substance as well as nervousness, cold weather, local application of cold temperament drugs etc. increase the urine frequency and hot weather, excessive sweating, dehydration and less water intake lead to decrease urine frequency and quantity. Polyuria results either from some wasting disease or elimination of liquefied wastes. Jurjani documented in *Zakhira* (book written by Jurjani), in *Ziabitus* there is a excessive frequency of urine because of weakness in kidneys⁵.

Essentiality or non essentiality

If, the elimination of urine is according to normal colour, odour, consistency, frequency etc. then it is termed as essential elimination of urine. Non essential or abnormal elimination indicates the abnormal condition of passage (becomes wider), abnormal

quantity and consistency of urine as well as state of power of elimination.

Factors altering the characteristics of urine

1. Seasonal effect

In hot season, quantity of urine decreases and in cold season increases.

2. Age

According to age, urine exhibits different sign and symptoms.

In childhood- the temperament (*mizaj*) is hot and wet. It is documented that in this age diluted urine is bad sign because fluidity is used in growth and development of organs in childhood. That's why urine must be concentrated to show the proper utilization of fluidity in the body for same work. In adulthood- urine is yellowish and moderate density. In middle age it is pale and watery and in old age urine is pale, watery and of low density, if it becomes dense, it denotes to stone formation⁵.

3. Psychic effects

Psychological disorders and psychic reactions also alter the sign and symptoms. If in dark thin urine, the sediment is uniformly dispersed; mental confusion is likely to follow. Due to excessive anger colour of urine becomes yellow and concentrated and in nervousness the colour of urine becomes white and thin consistency⁹.

4. Gender

In women the urine is always white in colour, dull, thick in consistency and more turbid than in men. During pregnancy urine is clear but it has faint colour at the top. Bluish urine is a sign of early pregnancy and if urine is reddish and on shaking becomes turbid the pregnancy is likely to be in an advanced stage. After coitus the male urine shows the presence of interwined threads⁸.

5. Food and drinks

Intake of food and drinks also alter the characteristics of urine e.g. light green colour urine is due to intake of spinach or green leafy vegetables, eating of beet root changes the colour of urine towards reddish etc.

quantity of drinks or fluid intake also alter the consistency and quantity of urine⁸.

CONCLUSION

Urinary Symptomatology documented by Greek Arab physicians has been reviewed and found that they were very much familiar about signs and symptoms related to urinary tract diseases. Their writings must be studied and follow the instructions to diagnose and treat the diseases in a proper way.

ACKNOWLEDGEMENT

All contributors are highly thankful for their support specially Professor Mohd Zulkifle for his innovative ideas, corrections and other inputs.

CONFLICT OF INTEREST

No conflict of interest associated with this work.

AUTHOR'S CONTRIBUTION

All authors have worked equally for this work.

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