Geriatrics is a field of science that entitles the specialty in which health care of elderly people is the main issue of concern. Its main aim is to promote health in old age by preventing and treating diseases and disabilities. In Greek-arabic system of medicine old age is called Shakhukhat. When the age of the person exceeds the age of 60 years it is to consider as age of Shakhukhat. Elderly people are susceptible to both communicable as well as non communicable diseases. India’s current older population is of 60 million. According to classical Unani literature, ageing is the result of two opposing process a) Tahleel-e-ratoobat (dissolution of fluids) b) Inadequate compensation of tahleel by Quwat-e-hazima (power of digestion) which maintains balance a homeostasis. This imbalance cause disease with age, weakens the Quwa and slows down the af‘al (functions) of the body. Most chronic diseases are frequent among the old people such as arthritis, heart disease, respiratory disease, alzheimer’s disease, diabetes, etc. The holistic approach of Unani medicine is well placed to cover the two main pillars of lifestyle disease mainly prevention and treatment. Management for old age ailments can be successfully attained by Ilaj bil tadbeer wa ghiza and Ilaj bil dawa. Moderate body massage along with the appropriate exercise (riyazat) is legitimate for adults. Unani physicians believe that different types of food should be given to mashaikh. Many important and Useful Mufridat (single drugs) and Murakabat (compound drugs) are used for delaying various ailments of ageing by Unani scholars.

Keywords: Geriatrics, Shakhukhat, Tahleel-e-ratoobat, Ilaj bil tadbeer, Quwat-e-hazima.
In Greek-arabic system of medicine old age is called Shakhukhat. Shakhukhat means is to become old. When the age of the person exceeds the age of 60 years it is to consider as age of Shakhukhat (Hamdani, N.A.).

**Illness profile of elderly in India**

In India, the elderly people suffer from both communicable as well as non communicable diseases. Although immunity plays an important role in age related physiological changes that in-turn leads to increased tendency of communicable disease in the old person. India’s current older population is of 60 million likely to be projected to exceed 227 million in 2050, revealing an increase of nearly 28%. Hence it will be in priority that population might require more geriatricians than pediatricians (Khan et al., 2016).

**Old care age & its perspectives**

The oldest textbook of medicine, "Al Qanoon-fit-tibb (Canoon of medicine)" compiled by Avicenna in 1025, was the first book to offer instructions for the care of the aged. According to Unani scholars, entire life span consists of four stage jointly known as Asnane Arbaa (Hamdani, N.A.).

According to Unani concept, these four stages in human life are categorized as under:

1. **Sin-e-Namu**        up to 25 years
2. **Sin-e-Wakoof**      between 25 to 40 years
3. **Sin-e-Kahulat**     between 40 to 60 years
4. **Sin-e-Shakhukhat**  above 60 years.

Sin-e-Shakhukhat is the period in which there is diminished quantity of Ratoobate Ghareezia (innate fluids of body). It is lesser than the quantity required for preservation of hararat ghareezia (innate temperature). However, the total quantity of Ratoobat (fluids) in a person weighing 70 kg, is between 40-49 L that shows the total quantity of these fluids is about 60% of the body weight. (Zahid, 2016)

The building blocks of everything in the universe depend on mizaj (temperament), Akhlath (Humors), Aaza (organs), Arwah (vital/pneuna forces) Quwa (faculties) and Afaul(functions). (Hamdani, N.A.)

Every Sin-e-Haivaniyah (stages of life) have own specific Mizaj & kaifiyat. According to the age when Mizaj deviates from normal to abnormal way it causes change in their age chronically. According to Unani concept, with increasing age, the innate heat & innate moisture reduces gradually that weakens the Tabiyat (physique) and slow down the bodily function along with the process resulting in decreased production of Akhlat saleh (normal humours) (Alam et al., 2015).

One of the important Umoor (fundamental of physique) Quwat (faculties) plays an important role to indurate the physiological effects on different organs at different stages of life (Hamdani, N.A.). Quwat is categorized into two types:

1. **Quwate Shakhhsia**
2. **Quwate Tanausulya**

Quwate Shakhhsia is divided into Quwate Gaziya (nutritive faculty) and Quwati Namia (faculty of growth). Quwati Ghaziya is responsible for different changes in the growth of various parts of human body like in Sinn-e-Shabaab it is at peak and organ & parts of body trends to increase anatomically & physiologically while in Sinn-e-Shakhookhat the case is reverse (Hamdani, N.A.).

According to classical Unani literature, Ageing is the result of two opposing process (Itrat et al, 2013).

1. Tahleel-e-ratoobat (dissolution of fluids) by hararat-e-Ghareezia (innate temperature) to maintain organism in functional state.
2. Inadequate compensation of tahleel by Quwat-e-hazima (power of digestion) which maintains balance a homeostasis. This imbalance cause disease with age, weakens the Quwa and slows down the af”aal (functions) of the body.


In Unani System, diseases is considered to have an influence on body through the poor management of the six governing or essential factors beyond the ability of physic or tabiyat to maintain and restore homeostasis. (Hamdani, N.A.). The holistic approach of Unani medicine is well placed to cover the two main pillars of lifestyle disease mainly prevention and treatment.

**Prevalence of diseases in old age**

Most chronic diseases are frequent among the old people than in younger people. Also older people with disability resulting from chronic disease appear at high risk of acute illness and injuries.
Some of the chronic diseases are as under:-

1. **Arthritis**: Osteoarthritis is related to age rather than disease. In O.A. Changes such as Bony hypertrophy, joint space narrowing, marginal spurs and so-called separate loose bodies are age related phenomena rather than features of disease (Reports of joint meeting, 1995).

2. **Heart Disease**: The age-related morbidity and mortality because of CVD is appreciably increased which includes coronary heart disease (CHD), peripheral arterial disease (PAD), heart failure (HF), valvular heart disease, and stroke (Yazdanyar et al., 2009).

3. **Cancer**: Cancer incidence increases exponentially with advancing age, it is expected that there will be a huge surge in older cancer patients that will challenge both healthcare institutions and healthcare professionals (Berger et al., 2006).

4. **Respiratory Disease**: Chronic respiratory disease such as bronchitis, bronchogenic carcinoma, pulmonary tuberculosis, etc. is important cause of morbidity and motality in old age for both sexes (Caird et al., 1972).

5. **Alzheimer’s Disease**: the frequency of AD increases with each decade of adult life, reaching 20-40% of the population over the age of 85 (Kasper, 2005).

6. **Osteoporosis**: The National Osteoporosis foundation estimates that 54 million Americans over age 50 are affected by low bone mass or osteoporosis (Press release, 2014).

7. **Diabetes**: the incidence of diabetes varies from 22 to 33%, in adult aged more than 65 years (Kirkman et al., 2012).

Zakariya Razi described Diabetes in his two most popular compilations *Kitab Al Hawi Fil Tib & Kitab Al Fakhir Fil Tib*, revealed the cause of this disease was abnormal hot temperament of Kidneys which lead to weakness of retentive power of kidney (Sajad et al., 2016).

8. **Influenza & Pneumonia**: Although these diseases are not chronic conditions, these infections are common in people over age 65 (Jeffery et al., 2008).

9. **Incidental injuries**: each year 2.5 million people aged 65 and older are treated in emergency departments because of fall, according to CDC-Centers few disease control and prevention (CDC, 2012).

10. **Substance Abuse**: Alcohol & Tobacco topped the least of non-medical substances abused by survey participants (Li-Tzy Wu et al., 2011).

11. **Obesity**: obesity is an important senior health risk factor for heart disease, diabetes and cancer – all chronic conditions that impact quality of life (Health west orange, 2017).

12. **Depression**: According to American Psychological Association 15-20% of Americans over 65 have experienced depression (Health west orange, 2017).

13. **Oral Health**: According to CDC 25 % of adults over 65 have no natural teeth (Health west orange, 2017).

**Management in sin-e-shakhukhat (Tadabeer-e-Mashaikh)**

The old age ailments and maintainence of health can be successfully achieved by holistic approach of unani medicine. (Hamdani, N.A)There are three modes of treatment in unani medicine 1. Ilaj bil tadbeer wa ghiza 2. Ilaj bil dawa 3. Ilaj bil yad (Avicenna, 2007).

Management for old age ailments can be successfully attained by ilaj bil tadbeer wa ghiza. Ilaj bil tadbeer is intervention in asbaabe sittah zaroorirah (six essential factors of life) which are atmospheric air; diet and drinks; bodily movements and response; mental movements and response; sleep and awakefullness; retention and evacuation (Hamdani, N.A.).

Regular regimental therapies like blood-letting (Fasad), Purgation (Mushil), use of strong enemas (Huqna) etc. have been contraindicated in the aged persons.(Hussain et al., 2002) .

According to Avicenna, the sleep should be adequate taken by old person and the time span on bed should be more than it is legitimate for adults. Further advices to take moderate body massage along with the appropriate exercise (riyazat) is legitimate for adults. Their bowels should be kept soft. Specific exercises are also described e.g. vertigo a common old-age problem can be effectively treated by doing riyazat which involve the lower half of the body and avoiding exercise which involve bending and drooping of head. It is proved scientifically that exercise not only benefits various physical disorders, psychological impacts such as improves the mood and social interaction. It also reduces insomnia and constipation in the elderly patients (Hussain et al., 2002).

Diet and drinks have huge importance in old age. According to Guinness World Records confirmed Emma Morano world’s oldest person (turned 117) used to have
two eggs a day and cookies along with few vegetables and very little fruit (Pawlowski, 2016).

Hippocrates (BC 460-370) elaborated the importance of Makul (Diet) for healthy life. According to Unani scholars, specific diet is recommended in specific ages and in specific disease. Caloric counter balance indicates an amount of energy intake that maintains the regular body weight estimated at about 0.8g/kg of body weight is recommended protein uptake for mashaikh. It is advocated that a balanced diet of a sheikh (old) constitutes of 12% - 14% of entire caloric intake from different sources of protein (Zahid, 2016; Alam et al., 2015).

Unani physicians believe that different types of food should be given to mashaikh but the quantity and quality of diet should be according to their digestive capacity. Frequent meals but small in quantity is recommended (Alam et al., 2015; Zahid, 2016).

Beet Root and Spinach are especially advised. The diet as a routine should be taken after Hammam (Bath) (Rahman et al., 2014).

The food items known to eliminate Ratoobat from intestine are advised. Milk is recommended for nutrition (Rahman et al., 2014).

In fruits; figs, walnuts, almonds, grapes, mulberry and Alu Bukhara (Prunus domestica) are advisable. Garam In fruits; figs, walnuts, almonds, grapes, mulberry and Alu Bukhara (Prunus domestica) are advisable. Garam

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In fruits; figs, walnuts, almonds, grapes, mulberry and Alu Bukhara (Prunus domestica) are advisable. Garam Murraabah & vegetables like Kasini (chichorium intibus), Kahu (Lactuca sativa), Kubbaze (Malva sylvestris) are useful. Zanjabeel (Zingiber officinalis) can also be used (Alam et al., 2015).

Makshaikh posses more expectant risk towards dehydration as there is an age associated dimension in thirst sensation and extravagant fluid loss. Daily fluid consumption is said to be around 30 ml/ kg (Zahid, 2016).

Many important and Useful Murakabat (compound drugs) are used for delaying various ailments of ageing by Unani scholars such as Majoon Falasaf (for improving memory), Jawarish Jalinoos (delaying graying of hair and general strength), etc. (Zilurehman, 1991).

CONCLUSION

Geriatrics should be the field of great concern as “Growing old is compulsory, growing up is optional”. Humours plays an important role in maintaining health in old age and if humours are derailed in quantity or quality it will lead to disorder or disease. When any disorder occurs it leads deviation from physiology to pathology which advocate the process of ageing, then old age care comes under Tadabeer-e- Mashaikh. Human Body completely depends upon Quwat-e-Nafzania, Quwat-e-Tabiyyat, Quwwate Hywania which acts as the basic pillars of life. Regimental therapies described by Unani scholars in their old classical text for management of ailments of old age are proved very effective scientifically some of regimens are: dalak (massage), riyazat (exercise), taleeq, nutool (irrigation) etc. Ilaj bil ghiza can be employed to keep mashaikh in healthy state.

In Unani medicines vast array of both compound and simple drugs have known antioxidants, immuno-modulator, nephro protective, Cardioprotective, hepatoprotective, anti cancerous action which are important for managing old age disease with least side-effects. Thus scientific research should be carried out further to revalidate the regimen, dieto-therapy and pharmacotherapy as described by renowned Unani physician thousands of years ago.

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