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REVIEW ARTICLE

QAI (EMESIS): FROM ANCIENT TO MODERN ERA AND ITS THERAPEUTIC EFFICACY IN VARIOUS DISORDERS

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ABSTRACT

Promotion of positive health and prevention of diseases purposely requires keeping the body free of excess and morbid humors which inadvertently accumulate as a result of various physiological processes. *Qai* is a simple and effective method for removing such wastes and free of complications if the prescribed guidelines are followed. *Muqiyat* (emetics) induce *qai* either by stimulating the stomach and causing reverse peristalsis, or by stimulation of vomiting centre. *Hammam*, exercises and stimulation of the throat with a feather are also supportive measures to induce *qai*. In both cases, there are definite hormonal and immunological changes in the body. It is said to be the best method for excretion of *balghami* and *safravi* wastes, especially from the liver and stomach. The physical stress on the body during the act of *qai* mobilizes the humors in distant viscera also. If carried out in a proper manner, *qai* cleanses the stomach of morbid wastes, corrects digestion, promotes healthy weight gain, relieves the heaviness in head, and improves vision. However, *qai* should be avoided in pregnant and asthenic patients, in those who have a weak perineum, in patients having no plethora in their body, and certain other conditions. Nevertheless, over-enthusiastic procedure should be discouraged as it may lead to general weakness, damages the liver, lungs and eyes, causes weakening of the stomach, increases the flow of morbid humors towards the stomach, is harmful for the teeth and may cause haemoptysis due to increased intra-thoracic pressure. As a therapeutic measure, *qai* is recommended in patients of epilepsy, indigestion, gastralgia, gout, arthritis, rheumatic fever and various other disorders.

Keywords: Qai, therapeutic emesis, istafragh, balghami.

INTRODUCTION

The quest for a perfect holistic treatment method for numerous malfunctions of human physiology has intrigued physicians, researchers, scientists and philosophers since the very inception of human existence. For obvious reasons, medicine is thought to be as old as man himself. This long chronicle of the health sciences is wrought with countless stories of hope and despair, formulation and dissolution of theories and hypotheses; the incessant development of newer therapies and decreased popularity of older ones, intercepted in places by rediscovering of the potential of previously abandoned ones. Qai (emesis) is one such mode of treatment which was employed extensively by ancient Unani physicians as a means of expulsion of excess or morbid humors through oral route. Although not used extensively in present clinical practice, it is gradually gaining attention as an easy and effective means of treatment. The advantage of using qai over other therapies is that it removes plethora, and in addition to cleansing the stomach, it also removes or mobilizes the morbid material in the distant viscera.

The simplicity of its application also allows for its use in low resource settings.

BENEFITS OF *QAI* IN HEALTH AND DISEASE

The importance of *qai* in maintenance of health can be deduced from a quote of Hippocrates wherein he stated:

'I guarantee that a person who follows this therapy (emesis) properly will have his health preserved..' ²

As a preventive measure, *Qai* is considered to be an effective procedure for health protection and promotion. In a healthy person, *qai* is recommended as a preventive measure as it removes the wastes accumulated in the stomach after digestion. Specifically, the foods which are not easily digestible (*ghaleez ghiza*) tend to leave more wastes behind in the stomach, and their judicious removal is imperative for maintaining a normal digestion, which is in turn related to all of the body processes. *Qai* is an easy method for removing the morbid material from stomach and liver due to their specific anatomy. The specific reason behind the beneficial effects of *qai* is hypothesized to be the

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expulsion of excess *balgham* from the stomach. Primarily, this expulsion takes place only from the contents of the stomach (*tanqiya-e-ula* or primary excretion), but the secondary effects are seen on all organs of the body including the brain and lower extremities (*tanqiya-e-saniya* or secondary excretion).⁵

Jurjani has provided a simple explanation of the mechanism of action of *qai*. He states that the passage of bile through the intestines acts as a natural cleanser for the intestines due to its *haar* (hot) temperament as it removes the viscid and adherent *balghami* (phlegmatic) wastes. A similar flow of bile into the stomach may be induced by *qai* which helps in cleansing its internal lining. Such cleansing is repeatedly required as the waste substances tend to accumulate as a result of physiological processes.³

The therapeutic benefits of *qai* are also manifold. According to Hippocrates (460-377 BC), it is the best means of expulsion for preventing and curing the diseases in the lower parts of the body, especially kidneys and lower limbs; and is the best method for expulsion of *balghami* wastes from these areas. Infact, it is said to be the most helpful means of *istafragh* after purgation. In addition, *qai* carried out in moderation improves vision, digestion and appetite; it helps in reducing oedema and inflammation and helps in the treatment of some types of epilepsy, jaundice, tremors, paralysis, gout, melancholia, leprosy and most chronic diseases.³ The proper use of *qai* helps in natural weight gain when necessary.⁶

As a preventive measure, qai is said to be most beneficial for thin built people having safravi mizaj.5 However, according to Razi, such people should be given ratab diet before qai so that dryness is not caused. The ideal candidate for qai is one having a broad thorax and strong abdominal muscles ³ and the best season is summer and spring season. Because in these seasons, the humors are less viscous and may easily be excreted via emesis. Also, the abdominal and thoracic musculature is relaxed and strong movements are possible with little effort. In addition, there is an increased production of safra in summer season which also enhances the effect of emetics. For the abovementioned reasons, qai is best induced in the afternoon of summer season.² Qai is also an effective means of expelling excessive balgham, especially if accumulated inside the stomach. In such cases, the balgham may be adhered to the stomach wall and into the mucosal folds; and may not be completely removed by purgation. Hence, qai is a more effective and easier means of complete expulsion. 1

RECENT DEVELOPMENTS

Therapeutic emesis is regulated by the vomiting centre in 4th ventricle of medulla oblongata. The action of emetics may be local, in which drugs cause the stimulation of gastric mucosa and cause reverse peristalsis; or may be central, mediated by central nervous system.⁸ There have been several attempts to decipher the mechanism of action of *qai* on human physiology. Based on experiments and observations,

some theories have been forwarded. It is hypothesized that due to the positive stress on the body, *qai* stimulates the production of glucocorticoids, which in turn increase the release of ACTH which has an anti-inflammatory action, and is immune suppressant to some degree, therefore beneficial in autoimmune disorders. In addition, the release of catecholamines increases the heart rate and causes dilatation of blood vessels, which assists the anti-inflammatory process. 9 Mild increase in blood pressure (systolic and diastolic), heart rate, temperature and respiration is observed during the procedure which is attributed to sympathetic action and resolves spontaneously. However, this necessitates caution while carrying out qai in hypertensive patients. There is also a mild cleansing action on the intestinal flora, however, the bacteroids and E. coli remain within normal limits. 10

Studies on healthy volunteers have shown that qai is a well-tolerated bio-cleansing procedure which increases appetite, regulates bowel movements, improves sleep pattern and cleanses the gastro-intestinal tract. In addition, it is observed that ESR decreases and TLC increases significantly shortly after qai, indicating an immune response. This decrease in ESR is found to persist for upto 15 days after the therapy. Qai also leads to a decrease in LDL, increase in HDL and serum triglycerides. It also leads to a drop in serum sodium and potassium levels, which however, remain within the normal range. Significant decrease is also seen in blood urea, and some decrease in serum creatinine and total proteins. There is also a slight decrease in plasma histamine and plasma adrenaline levels, and an increase in plasma dopamine and nor-adrenaline. An increase in IgE is also noticed shortly after qai which persists for atleast 15 days. 10

PROCEDURE

Instructions before, during and after qai

Normal healthy persons should routinely carry undergo *qai* procedure once or twice a month.² According to Unani physicians, in both these cases, *qai* should preferably be done on two simultaneous days so that if some matter is left behind on the first day, it may be expelled on the next day. This also helps to excrete those humors which may be drawn into the stomach later due to increased movements during *qai*. However, it is not advisable to fix a specific day of the month for the procedure. Rather, the emesis should be done variably as required.¹

If a person is not accustomed to *qai* or in cases where *qai* needs to be done despite some contraindication, the patient should be given mild emetics along with soft and sweet foods which have a high fat content. Such patients should not be allowed to exercise, and vomiting should be induced gradually. Before the procedure, such patient should be given nutritious diet, so that if vomiting does not occur, then further risk may be minimized. Emesis is more readily induced on a full stomach, so it is advisable to have a full stomach before taking emetics. However, if the patient is obese and has a predominance of *balghami* temperament, *qai* should be done after

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exercising and on a full stomach; such patients should also not be given *hammam* before *qai*. A patient who is thin and weak, and predominantly having *safravi mizaj*, should undergo *qai* after having a normal diet and fluids, and should also take a bath with warm water before *qai*. Diet given should be such that it aids the action of *muqiyat* (emetics), for instance fresh fish, *jaw* (*Hordeum vulgare*), *sikanjabeen* (Oxymel), etc. After completing *qai*, apple and pomegranate juice are recommended.¹

After taking suitable emetic, the throat may be stimulated with a sterile feather or similar object dipped in Roghan-e-hina (Oil of Lawsonia inermis) or Roghane-kunjad (Oil of Sesamum indicum) which induces vomiting. In case it doesn't occur, the patient should be instructed to do mild exercise like running, and other physical activity which induces some degree of tiredness. If vomiting is not seen even after exercising, the patient may be advised hammam. Since hammam causes stimulation of all body processes, it is helpful in inducing nausea on a full stomach. Hot fomentation on the abdomen is also supportive in inducing vomiting if a strong emetic has been given; however, this may depress the action if the emetic is weak. Preferably, the procedure of *qai* should be carried out in the afternoon. It is also advisable to cover the eyes with soft cloth during the act of vomiting, and also to tie to abdomen gently. This protects the abdominal wall and organs from the trauma and jerks experienced during vomiting. Qai should preferably not be done in a crowd, at droughty place or in very bright light, so that the patient is comfortable.^{5,7} For a better *qai*, Jurjani has advised to use hammam and exercises as a routine before giving muquiat (emetics) so that humors are mobilized which results in a more effective istafragh. 3 It should also be kept in mind that if emetics act rapidly and qai occurs in a short time, it may lead to incomplete istafragh as the drug may be expelled without exerting its complete action. Therefore, steps must be taken to slow down their action.⁵

The prescribed emetics for therapeutic qai work for about four hours after which the patient feels a relief in nausea and the vomiting stops gradually.5 After some vomiting, there is expulsion of phlegmatic humor and then clear fluid which indicates that the stomach has been cleared of morbid humors. Qai should stop spontaneously at this point, and if it doesn't, antiemetics may be required. After completing the procedure, the patient should be asked to wash his face and mouth with vinegar diluted in water, and apple juice should be given with mastagi (Pistacia lentiscus gum resin) to quench thirst. Mastagi also protects the stomach wall from the adverse effects of any remaining morbid humors and strengthens the stomach lining which may have been affected by the act of vomiting. Any solid diet should also not be given for upto six hours after completing qai unless absolutely necessary or if the patient feels extremely hungry; in such cases, easily digestible diet may be given. The patient should be bathed and allowed to rest.1

Signs of beneficial and harmful qai

Qai is beneficial to the body if it is carried out according to the prescribed guidelines; but may be harmful if certain criteria are not met. The signs of an effective qai are: the patient has a feeling of lightness in his body, appetite is increased, respiration and pulse rate is normalized and all vital parameters are within normal limits. Additionally, nausea is seen before the onset of vomiting; qai which occurs without nausea is not considered effective. The patient experiences some degree of epigastric burning sensation, followed by salivation and then *qai* till the stomach is cleared of the morbid wastes. It is also important to note that the epigastric pain and burning continues for sometime even after qai has occurred. This indicates that the emetic drugs are still present in the stomach and are exerting their action. Lastly, *qai* gradually stops after about four hours and nausea is relieved.

If however, *qai* occurs with difficulty, uneasiness is felt, there is a feeling of heaviness in the head, eyes bulge and are reddened, excessive sweating occurs, and patient is unable to speak, these indicate the presence of excessive morbid humors or toxic effect of the emetic taken. In such cases, enema should be done to expel the morbid humors, honey should be given in warm water, and antidotes should be given e.g. *Roghan-e-sosan* (*Iris nepalensis* Oil). The physician should also attempt to induce emesis, so that the morbid humors or the toxic drug is expelled. In present times, stomach wash is an effective method to expel the toxic drug in such cases.

For patients suffering from fever, the vomitus which consists of *safra* mixed with *balgham*, and has a moderate consistency is considered beneficial. The presence of only *safravi* humor; or yellowish, greenish or blackish colouration of vomitus indicates a predominance of *safra*. Likewise, an offensive odour indicates a severe infection. Both of these signs indicate a serious disease. ¹¹ In this context, *qai* plays a diagnostic role as well, along with being a therapeutic measure.

Common problems related to therapeutic qai and their treatment

If retrosternal burning and pain occurs, hot fomentation, dalak with relaxing oils and fire cupping on the chest wall is effective in relieving the symptoms. If burning persists for a longer duration, then rubbing of Roghan-ebanafsha (oil of Viola odorata) and Roghan-e-khairi (Oil of *Cheiranthus cheiri*) mixed with wax is helpful. If hiccups are seen during qai, then lukewarm water may be given to the patient and attempt to bring about sneezing, which relieves the hiccups.⁵ If haemoptysis occurs at some point in qai, then fresh milk is effective in stopping the bleeding. The patient should be allowed to rest and sikanjabeen may also be given. If haemoptysis does not stop by the above measures, then aab-e-khurfa (Juice of Portulaca oleracea) and gil-earmani (Armeniac, Aluminium silicate) orally is beneficial. According to Jurjani, most of the humor expelled in qai is balghami, followed by safravi. Sauda is rarely excreted except if the patient is suffering from splenomegaly, is alcoholic or post-menopausal. However, if sauda is seen in vomitus in the absence of above-mentioned conditions, the patient should be given

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warm *arq-e-gulab* before meals and diet should be reduced on the day of *qai*. Ibn Sina states that diseases of cold temperament may sometimes be aggravated by *qai*, e.g., coma, spasms, convulsions, inability to speak etc. In such cases, it is recommended to tie the extremities of the patient as a first aid measure. Also, hot fomentation of the abdomen may be done with a decoction of olive oil *sudab* and bitter gourd. If possible, honey mixed in lukewarm water should be fed to the patient.²

Adverse effects, precautions and contraindications

Despite having several benefits, the procedure of qai carries some risks if done in excess or very frequently. Strong movements of the gastric walls induced by emetic drugs cause it to weaken over a period of time if qai is done repeatedly. This may lead to indigestion in the long term. Also, such a person becomes prone to develop nausea and vomiting as the tabiyat becomes accustomed to expelling the morbid humors through emesis. Qai done repeatedly also stimulates the production and accumulation of morbid substances into the stomach. Repeated sessions of *qai* cause the teeth to come into contact with bile salts which damage the enamel and make them rough. In addition, excess of qai is also harmful for the liver, lungs and vision. In some cases, the increased intra-thoracic pressure may cause damage to blood vessels leading to haemorrhage.

According to B. Nafees, qai should not be done in five cases-if the person is having inflammation in the throat, for it may flare up. It should also be avoided in persons having weakness of any organ of the thoracic region; also, in people having an abnormally thin neck, because in such cases, the trachea, oesophagus, and vessels of the neck may be having a smaller lumen, and may not be well-developed, so they cannot withstand the pressure effects of vomiting and haemorrhage may be cause. The same applies to young children also. Qai is also contraindicated in persons prone to haemetemesis due to any reason. It should also be avoided in persons who do not respond well to emetics, or those persons who are not used to the procedure and find it difficult, because in such patients, a higher degree of stimulation is required to induce emesis which may be harmful to lungs and adjacent organs.7 Qai is also not advisable during pregnancy,5 in acute diseases, and in those persons who do not feel at ease.³

Qai is said to have undesirable outcome in certain conditions where it is absolutely contraindicated. If a person has no morbid humors in his body, then qai causes excretion of the normal humors, and should therefore be avoided. In any disease of abdominal organs which causes them to weaken, the act of emesis causes violent movements which may further increase the damage. It is also inadvisable if peritoneum is weakened. Qai should also not be done if there are impacted or dried faeces in the intestines, as it may cause colic. Qai should also not be combined with fasd. If a patient is in need of both qai and fasd, then there should be an interval of at least three days between the two procedures.

THERAPEUTIC APPLICATIONS

Such is the importance of therapeutic emesis in Unani Medicine that it is prescribed at the commencement of treatment in most of the disorders. More importantly, specific emetics are prescribed for individual disorders, which indicate that the drugs exert their therapeutic actions also along with the emetic effect. Muqiyat (emetics) are classified into three grades depending on their potency. Warm water, Ma-ush-shaeer (Barley water), sikanjabeen (oxymel) and decoction of shibt (Anethum sowa) are weak emetics. Sikanjabeen (oxymel) is a soothing Unani medicine prepared by boiling two parts of honey and one part of vinegar. It acts as an emetic in hot water and as an anti-emetic in cold water. (12) Bekh-e-kharpaza (Root of Cucumis melo), bekhe khayar (root of Cucumis sativus), piyaz nargis (Narcissus tazetta), juice of radish are moderate emetics; while kundush (Saponaria officinalis), jawz-ulqayy (plant related to Strychnos nux vomica), tukhm-eturb (seeds of Raphanus sativa) are strong emetics. If a strong emetic has to be used, then if any contraindication is not present, three rules should be followed: the emetic should be given on empty stomach, after two hours of sunrise and after the patient has relieved himself so that the intestines are free of excrement.⁵ The following is a brief description of how *gai* is prescribed in various disorders in Unani medicine.

Epilepsy: *Qai* is said to be beneficial in all types of epilepsy, except that caused by cerebral diseases. Especially in *sara balghami* (epilepsy associated with phlegmatic humor), *qai* is advised on the eve of the expected attack, and even during the fit.¹³ Wherever indicated, *qai* may be induced by stroking the throat with a feather dipped in honey and *khardal* (*Brassica nigra*).¹⁴ For patients suffering from *sara me'di safravi*, the following procedure is recommended:

First give a soft *khichdi* (a preparation made from rice and lentils) made of *moong daal*. Then prepare this medication: Take *tukhme shibt* (seeds of *Anethum sowa*), *tukhme turab* (seeds of *Raphanus sativa*), *post aslus soos* (peel of *Glycerrhiza glabra*), *bekh-e-kharpaza* (6 gms each) and peeled *jaw* 20 gms. Boil all drugs in 1 litre of water and strain. Then add 30 gms table salt, *aab-e-turab* 50 gms, and *sikanjabeen* 40 gms in the above preparation. Use this as an emetic.¹⁴

Facial Palsy: *Qai* is also beneficial for a patient of facial palsy although more efforts may be required in such a patient.¹⁵

Vertigo: *Qai* is recommended in the initiation of treatment, especially if the vertigo is caused by *safravi* or *damvi* humors. Water is recommended for inducing *qai*. After *qai*, sour or sweet pomegranate, guava, juice of grapes or *sharbat-e-simaq* should be given. ¹³

Headache: Headache caused by humors having a warm temperament may be relieved by *qai*. For this purpose, *sikanjabeen* and lukewarm water must be given initially, and then fresh fish followed by *sikanjabeen* mixed with *aab-e-barg-e-khiyar* (Juice of the leaves of *Cucumis sativus*). This causes effective emesis and relief of symptoms. ¹³

If headache is caused by *safravi* humors and is accompanied with nausea, then *qai* with warm water and *sikanjabeen* is advisable to remove the morbid material.¹⁶

Paralysis: *Qai* is an important part of management in paralysis and is recommended in the beginning of treatment as well as in the end to expel any remaining morbid humors. For inducing *qai* in a patient of paralysis, it is recommended to use *kharbaq safed* (*Veratrum viride*) and *usara turb* (extract of *Raphanus sativa*) as emetic. ¹⁴

Melancholia: *Qai* is beneficial in the treatment of melancholia but contraindicated if the stomach is weak.¹⁴

Morbid humors in stomach: A diagnosis of the presence of morbid humors in the stomach is nausea, trembling of lower lip, anorexia, uneasiness in abdomen and bad taste in the mouth. *Qai* is the recommended treatment in such case, especially in summer months. The method recommended to induce *qai* is to gently stimulate the throat with a feather dipped in oil, and use of emetics in diet. ¹

Gastralgia: Gastralgia is felt as a pain in the epigastrium and mostly caused due to indigestion, flatulence, constipation or hysteria. If the pain is severe and the last meal has been taken within three hours, it is recommended to induce *qai* with a solution of 25 gms salt in a litre of water. If emesis is not induced by the solution alone, stimulate the throat with a finger or tongue depressor. ¹⁶

Hiccups: For persistent hiccups, induce *qai* with salt or *sikanjabeen* dissolved in warm water. ¹⁶

Anorexia or decreased appetite: If appetite is reduced due to sour or bitter humors, *qai* is recommended as a measure to prevent the progress of disease. If the cause is *balgham*, it should be first reduced in viscosity with a decoction of *rayi* (*Brassica nigra*), *jirjeer* (*Eruca sativa*), *bekh-e-kibr* (root of *Capparis spinosa*) and *saunf rumi* (*Foeniculum vulgare*) mixed with honey and a little amount of salt. When the *balgham* is ready to be expelled, the patient should be given a warm decoction of *soya*, radish seeds and *mulethi* (*Glycyrrhiza glabra*) mixed with *sikanjabeen asli*.¹³

Azam Khan has advised the use of warm water and *sikanjabeen* as emetic for anorexia caused by *safravi* humors and warm saline water for anorexia caused by *balghami* humors, which is much simpler to administer. ¹⁶

Zo'f-e-me'da (Weakness of stomach): If the stomach is weakened due to *sue mizaj barid ratab*, then *qai* may be stimulated with salted fish and radish. ¹³ *Qai* may also be induced with warm water and *sikanjabeen* in case of indigestion. ¹⁵

Indigestion: If indigestion is caused due to abnormal cold temperament of the stomach, and is more troublesome when the patient takes sweet or fatty foods, then *qai* is beneficial. For this purpose, *qai* is induced

after meal with rayi (Brassica nigra), beetroot, sikanjabeen and honey.⁶

Morbid humors in the thorax and lungs: Qai is one of the best methods of expelling harmful method from the thorax. For bringing about emesis, injeer (Ficus carica), maveez kalan (Vitis vinifera L.), honey, mulethi and parsioshan (Adiantum capillus-veneris) are recommended in the form of a decoction. Butter and honey may also be given orally to aid the process. ¹

Dysuria: If dysuria is caused due to abnormal cold temperament of the bladder, then repeated qai is beneficial.¹⁷

Filariasis: According to Ibn Sina, *istafragh* is beneficial in treating filariasis in the initial stages, and *qai* is the preferred mode of *istafragh*. After repeated sessions of *qai*, anointment with *aloe vera*, *loban* (Benzoin resin) and *tukhme soya* mixed in vinegar is beneficial.¹⁷

Arthritis: *Qai* is especially of benefit to patients of arthritis, and mostly eliminates the need for purgatives. If arthritis is *balghami* in origin, then *qai* should be induced with a decoction of *shibt* and *aslus soos* to which honey has been added. ¹⁷ A recent case study published in Journal of Ayurveda and Holistic Medicine presented report of a patient of Rheumatic Fever, who was treated with emesis followed by other medications. There was a significant decline in ASO titre, CRP, ESR and marked improvement in clinical symptoms. ⁹

Gout: *Qai* is effective in eliminating the morbid humors causing gout even if they are viscous and distributed widely in the body. Especially in gout caused due to cold humors, it is recommended to first feed the patient to his full. Then prick a radish with *kharbaq* (*Helleborus niger*) and dip both of them in *sikanjabeen unsuli* (oxymel made with onion) and feed to the patient to induce *qai*. The process should be repeated thrice over six days.¹⁷

In both arthritis and gout, the treatment should be initiated with *qai* especially in warm weather unless contraindicated.¹³

Sciatica and Coxalgia: According to H. Azam Khan, *qai* is a better means of *istafragh* in both these disease conditions. Best emetic for these is the use of boric powder and vinegar. However, if the humors are of cold temperament and viscid in consistency, stronger emetics should be used which should be followed by *mulattif* and *musakhkhin* drugs. After complete expulsion, diuretics recommended for arthritis should be used. ¹⁷ *Qai* is recommended twice a week for the patients of sciatica caused by *balghami* humor. ¹³

Prophylaxis for epidemics: In case of epidemics, it is advisable to purify the body of morbid humors as a prophylactic measure. For the purpose of *istafragh*, *qai*, purgation, diuresis etc may be utilized. However, excess *istafragh* should be avoided as it may lead to weakness.¹⁷

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MEASURES TO STOP OAI

If *qai* does not cease spontaneously, or if there is a need to stop *qai* due to some reason, certain medications are prescribed.

Take gul-e-banafsha (flowers of Viola odorata), gul-e-babuna (flowers of Matricaria chamomile), tukhme shibt, sa'ad kufi (Cyperus rotundus), nakhuna (Trigonella uncata) and add them to water. Heat them on slow flame and then make into a paste. Apply this paste on the epigastrium for stopping emesis. ¹⁵ Alternatively, take one part ajwain khurasani (Hyoscyamus niger), and two parts each of gulab (Rosa damascus) and summaq dana. Grind them and make a paste with sharbat behi (Pyrus cydonia) and make into pills. 2.25 gms-4.5 gms of these pills may be given as an antiemetic and also has a sedative effect. ¹³

The following preparation is also effective in controlling emesis: Take 9 gms each of sandal safed (Santalum album), tukhme khurfa (seed of Portulaca oleraceae), tukhme maurid (seeds of Myrtus communis) and rose. Powder and mix with aab-e-barg-e maurid, apple juice and aab-e-behi (extract of Pyrus cydonia). Apply this paste over the epigastric region. Apple juice and sikanjabeen (20 gms each) mixed with cold water is also effective in stopping qai. 17

CONCLUSION

Keeping the body free of morbid wastes is the best known preventive measure that can be adopted to avoid most of the known diseases; and also the ultimate endeavor of all systems of medicine. Qai works towards carrying out this objective, and achieves the desired results by stimulating natural body mechanisms for excreting the wastes well before they interfere with the normal physiology. Although a bit stressful procedure for some, most patients are able to undergo therapeutic qai without any adverse event. A properly timed qai procedure within the guidelines decongests the body, removes morbid humors, cleanses the GI tract and improves digestion and assimilation. A remarkable benefit of qai is that in addition to being a therapeutic measure, it also helps in deciding the future course of treatment as the nature of vomitus helps to ascertain the type of morbid humors present in the body. Therefore, it has dual benefits of therapeutic as well as diagnostic nature. It is also noteworthy that there are specific drug formulations for inducing qai in different disorders according to the mizaj and type of the disease causing humors. However, for reaping maximum benefits out of this age-old therapy, it is necessary to carry out stringent scientifically designed studies to test the mugiyat described in various disorders.

Conflict of interest: None

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