

Available online on 15.01.2025 at <http://jddtonline.info>

Journal of Drug Delivery and Therapeutics

Open Access to Pharmaceutical and Medical Research

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Review Article

Tadābīr-i-Navmawlūd (Child Health Care): A Holistic Framework in Unani System of Medicine for Child Well-Being

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Article Info:



Article History:

Received 20 Oct 2024
Reviewed 03 Dec 2024
Accepted 26 Dec 2024
Published 15 Jan 2025

Cite this article as:

Khan MT, Amreen, Alvi M, *Tadābīr-i-Navmawlūd (Child Health Care): A Holistic Framework in Unani System of Medicine for Child Well-Being*, Journal of Drug Delivery and Therapeutics. 2025; 15(1):159-163 DOI: <http://dx.doi.org/10.22270/jddt.v15i1.6963>

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Abstract

Infancy, the critical phase from birth to early childhood, holds immense importance, with each day contributing significantly to a child's development. Globally, approximately four million neonatal deaths occur annually, with 98% of these taking place in developing countries. In these regions, many newborns succumb to mortality at home, often under the care of mothers, family members, and traditional birth attendants. In Unani Medicine, this stage is associated with the temperament known as *Mizāj Ḥārr Raṭb* (hot and moist), highlighting a period of rapid growth and developmental milestones. Comprehensive neonatal and child care guidelines, referred to as *Tadābīr-i-Navmawlūd*, encompass various aspects, including newborn care, infant feeding, management of dentition, and therapeutic principles and treatments for children. Renowned Unani scholars such as Ibn Sīnā, Zakariyya Rāzī, Ali Ibn Abbas Majūsī, Ibn Rushd, and Ibn Hubal Baghdādī have extensively discussed these topics in classical Unani texts like *Al-Qānūn fi'l Tibb*, *Kitāb al-Manṣūri*, *Kāmil al-Ṣanā'a*, *Kitāb al-Kulliyat*, and *Kitāb al-Mukhtārāt fi'l Tibb*. Their writings outline regimens and medicinal practices aimed at promoting the health and well-being of newborns, infants, and children.

Keywords: Unani medicine, *Tadābīr-i-Navmawlūd*, child health care, infancy, *Amrād-i-Atfāl*.

Introduction

Infants (0-1 year) make up 2.92% of India's population. Globally, 90% of the 136 million annual births occur in developing nations. While newborn survival has improved by 50% in 20 years, challenges persist, with 20-30% born underweight and vulnerable to illness. Nearly 40% of newborn deaths occur in the first month, and during weaning, 25% of children lack proper nutrition. India, with an infant mortality rate of 58 per 1,000, fares poorly compared to 5 per 1,000 in developed countries. Low-cost interventions like immunization, breastfeeding, birth spacing, and oral rehydration can save millions of lives.

¹ The significance of child health was acknowledged by ancient Unani physicians, who extensively discussed childhood diseases, their treatment, and health maintenance regimens for children. Detailed guidance on child care is provided under the topics of *Tadābīr-i-Navmawlūd* and *Amrād-i-Atfāl*. These include newborn care, infant feeding, dentition, management of childhood diseases, and principles of treatment and therapies for children.

Care of the Newborn & Infant

Unani scholars have provided detailed insights into newborn care, including infant diseases and care during the period from birth until the start of weaning.

Cutting and Care of Umbilical cord: Ibn Sīnā recommended cutting the umbilical cord four fingers away from the navel using a clean instrument and tying it with a soft, clean, lightly twisted woolen thread. He also advised covering the stump with a clean cloth soaked in olive oil. To prevent bleeding and infection, Avicenna suggested using a dusting powder made from *haldi (Curcuma longa)*, *Dam-ul-akhwain (Pterocarpus marsupium)*, *zeera (Cuminum cyminum)*, and *mur (Commiphora myrrha)*, known for their anti-infective and hemostatic properties. After the cord detaches in 3–4 days, he recommended dusting the umbilicus with ashes of oyster shell, burnt calf's hoof tendon, or burnt zinc dissolved in alcohol.²

In modern practice, the umbilical cord is cut immediately after birth, and a clamp is placed near the cut end to prevent bleeding. The first ligature is tied 2–

3 cm from the baby's navel, and the second is tied 5 cm away. A clean blade or scissors is used to cut the cord between the two ligatures. The doctor then examines the umbilical cord and placenta to ensure they are normal. Some physicians recommend cleaning the stump with rubbing alcohol. Regular inspection of the cord is advised every 15–30 minutes during the initial hours after birth to detect any oozing, which may result from loosening of ligatures or cord shrinkage.³

Taqmīṭ (Swaddling): The nurse should handle the baby's limbs with care, shaping and positioning them appropriately, flattening areas as needed, and maintaining slender parts. Caput succedaneum and congenital defects should be gently covered with a well-fitting light cap or turban.

Nigahdasht-e-Chashm (Care of Eyes): Gently wash the eyes using a soft, silky cloth, and apply a few drops of olive oil to them.^{2,4,5,6,7}

Istahmam-e-Atfal (Bathing of Baby): *Ali ibn Abbas Majoosi*, in his treatise *Kitab Kamil al-Sana'a*, recommends using a dusting powder made of rose petals and salt to harden and tone the skin. He also suggests bathing the child 2–3 times with warm water infused with rose petals. After the bath, he advises gently sucking the baby's ears to remove any remaining water.⁵

Ibn Sina recommends applying slightly salted water mixed with *shadnaj* (bloodstone), *qust* (*Saussurea lappa*), *sumaq*, and fenugreek to the infant's body. This mixture helps harden and tone the skin, as the newborn's body is warm and delicate, making external contact feel cold and rough. However, care should be taken to avoid exposing the nose and mouth to the salt water. After this, the baby should be bathed with tepid water.

During the bath, the infant should be held with the right hand, resting its chest, not belly, on the left arm, while gently supporting the back with the palm and the head with the fingers. After bathing, the baby should be dried with soft linen and positioned first on the belly and then on the back.²

Nigahdasht-e-Jild (Skin Care): The baby's skin should be gently cleansed as soon as possible using saline water to tone the skin and define the features. To enhance the astringent properties of the saline, a small amount of Indian hemp seeds, costus root, sumac, fenugreek, and oregano can be added. Care must be taken to ensure the saline does not enter the baby's nose or mouth. This skin-hardening process is necessary because a newborn's body is warm and delicate, making external contact feel cold and rough.^{2,6,7}

Sleeping quarters: The nursery should be warm and well-ventilated, but it is preferable for it to be dim and shaded rather than overly bright or glaring. During sleep, the baby's head should be kept slightly elevated, and care should be taken to ensure the body remains untwisted.

Raḍā'at (Breastfeeding): The baby should ideally be nourished with the mother's breast milk. Since the baby has received sustenance in the womb through

the mother's menstrual blood, her milk—essentially a continuation of this nourishment—is naturally the most suitable for the baby's growth and development. Breastfeeding often has a calming effect on the baby.

If the milk tends to be sour, breastfeeding should be avoided. Before each feeding, especially in the morning, a small amount of milk should be expressed to encourage milk flow and reduce strain on the baby. Massaging the breasts can further stimulate milk production. Nursing mothers should engage in moderate exercise, consume wholesome food, and avoid vegetables like watercress, mustard, wild basil, and mint, as they may negatively affect lactation. Adequate rest and avoidance of heavy work or excessive exercise are essential. If there are no contraindications, sweet wines and grape juice, along with sufficient sleep, are beneficial for the nursing mother. A little crying before feeding is generally beneficial for the baby.

Fiṭām (Weaning): When the baby's incisor teeth begin to appear, milk feeds should gradually be supplemented with soft, easily chewable foods. The typical nursing period should last for two years.^{2,4,6,7}

Murziyah (Wet-nurse): If the mother is unable to nurse the baby due to health issues, milk abnormalities, or personal reasons, a wet nurse should be engaged. The wet nurse must meet specific criteria regarding age, physical health, breast condition, milk quality, and the time since her own delivery. Ideally, her own baby should be of similar age to the baby she is nursing.

The preferred age for a wet nurse is between 25 and 35 years, as women in this range are at their peak physical vigor. Her milk should be of moderate quantity and consistency, with a white color and no greenish, yellowish, or reddish tinge. The milk's odor should be pleasant, and its taste sweet, without bitterness, saltiness, or sourness. It should be homogeneous, abundant, and neither too watery nor excessively thick, cheesy, or frothy.

The wet nurse should possess a cheerful disposition, good moral character, and emotional stability, avoiding anger, grief, or fear, which could negatively affect the baby. The Prophet Muhammad discouraged employing mentally unstable women as wet nurses due to their inability to provide proper care. Similarly, women of poor character are unsuitable for this responsibility.

The wet nurse should maintain a healthy lifestyle, including moderate exercise and a diet that promotes nutritious milk production, such as wheat, frumenty, lamb, or goat meat from animals with tender flesh. Sexual activity should be avoided during the nursing period, as it can activate menstrual blood, taint the milk, reduce its quantity, and risk new pregnancy. Pregnancy during nursing diverts maternal nutrition away from the breastfeeding baby, resulting in inadequate nourishment for both the baby and the fetus.^{2,4,5,6,7,8}

Care of the Child: Unani scholars emphasize that, in addition to protecting children from illnesses, efforts should be made to cultivate good behavior. Ibn Sina highlights the importance of sensory and motor development, along with moral and emotional training during early childhood. He advocates for incorporating games and primary education into a child's routine, emphasizing the vital role of exercise in education. Exercise should be tailored to the child's age and abilities.

Ibn Sina recommends allowing children over four years old to play freely while gradually increasing their dietary intake. Natural desires should be fulfilled, and irritants removed to promote balanced behavior, which is crucial for physical and mental well-being. At six years of age, children should begin formal education under a teacher or instructor, with a gradual and progressive learning system to avoid overwhelming them.

Children should be allowed to drink ample amounts of cold, sweet, and pure water, continuing this regimen until the age of fourteen. Daily routines should be adjusted based on the child's physical condition, balancing moisture and firmness in the body. Careful regimens should aim at both development and health preservation.^{2,6,7,9,11}

Diseases of Children and Their Management

Teething

Common symptoms during teething include gum inflammation, swelling of the temporal region, and trismus. Gentle finger pressure and oil massage can relieve swollen gums. A mixture of honey with chamomile oil or turpentine resin may also be applied. Pouring dill decoction over the head from a height is another remedy.

Ishāl-i-Aṭfāl (Diarrhea)

Diarrhea is frequent during teething and may result from digestive disturbances. Some believe it occurs due to swallowing purulent material from the gums, but it is more likely due to the body's focus on tooth eruption, which disrupts digestion.

Mild diarrhea typically resolves on its own. For severe cases, fomentations with rose, celery, anise, or cumin seeds may be applied to the abdomen. Alternatively, a plaster of cumin and rose seeds mixed with vinegar, or millet seeds boiled in vinegar, can be used. If these methods fail, rennet from a newborn lamb dissolved in cold water can be administered. Curled milk should be replaced with soft foods like half-boiled egg yolk, soft bread, or roasted barley flour cooked in water.^{5,2,7}

Qabḍ (Constipation)

Constipation in children can be addressed using suppositories made from solidified honey or honey mixed with wild mint, plane, or burned lily root. Honey may also be given orally, and olive oil mixed with turpentine resin (about the size of a gram seed) can be gently rubbed on the abdomen. Maidenweed and ox-bile applied to the navel are also effective.

Laza-e-Litha (Gingivitis)

Inflamed gums can be treated by massaging them with oil mixed with wax. Rubbing salted meat on the gums may also provide relief.

Tashannuj-i-Aṭfāl (Convulsions)

Convulsions, often associated with teething, arise from nervous instability and digestive disturbances, particularly in children with moist and robust constitutions. Treatment includes massaging the body with oils of iris, lily, henna, or gillyflower.

Nazla wa Zukām (Cough and Cold)

For coughs or colds, pouring hot water over the head is recommended. The tongue should be smeared with honey, and the back pressed gently to induce vomiting, which helps expel phlegm and relieve cough. A mixture of gum acacia, gum tragacanth, powdered quince seed, and licorice extract combined with sugar can be given in small doses with fresh milk.

'Uṣr al-Tanaffus (Dyspnoea)

Dyspnea is managed through emesis induced by rubbing olive oil on the roots of the ears and tongue or by pressing the tongue with a finger. Warm water can also trigger vomiting. Linseed mixed with honey serves as an effective linctus.

Qulā' (Stomatitis)

Infants are prone to stomatitis due to the delicate mucous membranes of the mouth and tongue, which can become irritated even from suckling milk. Milk-induced irritation may lead to aphthous stomatitis. The most severe form involves black, gangrenous ulcers, often fatal, whereas white or red ulcers are less serious. Treatment includes applying powdered violets, alone or mixed with roses and saffron, and sometimes carob beans. Juices from nightshade, lettuce, or purslane may also be needed. For persistent cases, bruised lily root can be used.

For ulcerated gums, a mixture of myrrh, galls, and olibanum scales ground with honey is effective. Sour mulberries or grapes may also be applied. Before using astringents, the mouth is rinsed with honey water, syrup, or wine. For stronger remedies, a powder made of turmeric, pomegranate blossoms and rind, sumach, galls, and alum is dusted onto the mouth.

Sayalān al-Udhun (Ear Discharge)

This common condition occurs due to excess moisture in the body and brain. Treatment involves dressing the ear with a wick dipped in honey or wine mixed with alum, saffron, or nitre. Linen soaked in astringent wine with saffron may also be placed in the ear.

Waja-i-Gosh (Earache)

Earaches caused by dampness or trapped air are treated using oil infused with barberry, rock salt, lentil, myrrh, colocynth seed, or juniper, which is boiled and filtered before use.

'Uṭāsh (Meningitis)

Meningitis, a hot inflammation of the brain, spreads pain to the throat and eyes, causing a pale-yellow complexion. Treatment includes applying cooling and moistening agents like cucumber or pumpkin peel, nightshade juice, purslane juice, or rose oil mixed with vinegar or egg yolk. Applications should be changed frequently.

Āshob-i-chashm/Ramad (Conjunctivitis)

For inflamed eyelids, a mixture of barberry and milk is applied. Chamomile decoction and wild basil juice are used for bathing the eyes.

Buthūr-i-Qarniyya (Corneal Ulcer)

Excessive crying can lead to corneal ulcers and white opacities. Green nightshade juice is applied for treatment.

Fever

Fever management focuses on the wet nurse's diet. Remedies for both the infant and nurse include pomegranate juice mixed with vinegar and honey syrup or cucumber juice with camphor and sugar. Sweating is induced by applying fresh bamboo leaf juice to the head and feet and covering the baby with warm clothing.

Colic

Colic, often caused by bad milk or indigestion-related diarrhea, is addressed by fomenting the abdomen with warm water, wax, or oil.

Kathrat-i-'Aṭūs (Excessive Sneezing)

Inflammation near the brain can cause sneezing. Treatment involves cooling measures, including applying cooling juices or oils to the head. If not inflammation-related, powdered wild basil seeds are blown into the nose.

Boils

Black, gangrenous boils are often fatal, while red or white boils are less dangerous. Treatment includes bathing with mild astringents like red roses, myrtle leaves, mastic leaves, or tamarisk, with oils applied locally. Simple boils are left untreated until they are ready for intervention. For ulcers, white ointment or honey water with nitre is applied. Vesicular eruptions are treated with decoctions of myrtle, roses, bog-rush, or young mastic leaves.

Fatqus-Surra (Umbilical Hernia)

Caused by excessive crying or ruptures, this is treated by applying ground ajowan mixed with egg white to the navel and covering it with linen. Bitter lupine ashes soaked in wine or potent medicines like myrrh, cypress, aloes, or acacia are also used.

Waram-i-Surrah (Navel Inflammation)

Improper severance of the umbilical cord may lead to inflammation, treated with Celtic juice and turpentine resin melted in sesame oil, applied locally and given

orally.

Bedari-i-Aṭfāl (Insomnia)

For sleeplessness, poppy seed or rind-based plasters are applied to the head. Oils from lettuce or poppy are rubbed on the head and temples. For stronger remedies, a mixture of seeds like bugle, mangosteen, poppy, celery, and others is powdered, mixed with sugar, and given in small doses. Minimal opium may be added if needed.

Fuwāq (Hiccups)

Hiccups, often from bad milk, are relieved with coconut mixed with sugar.

Kathrat-i-Qay' (Excessive Vomiting)

Vomiting due to overfeeding is treated with cloves and a mild astringent plaster applied to the abdomen.

Ḍu'f al-Haḍm (Weak Digestion)

Weak digestion is addressed with applications of lily wine, myrtle, and rose water. Oral remedies include embelia extract with quince juice or quince wine.

Faz'a fi'l Nawm (Nightmares)

Nightmares from an overloaded stomach are prevented by ensuring the child is not overfed before sleep. Honey is given to aid digestion.

Waram-i-Ḥalaq (Throat Inflammation)

This condition involves swelling between the mouth and esophagus and may spread to the neck. Treatment includes suppositories to relieve constipation and remedies like mulberry syrup.

Khurūj al-Maq'ad (Prolapse Ani)

Prolapse is treated with sitz baths in warm water containing pomegranate rind, myrtle leaves, roses, chestnuts, hart's horn, or alum. The water is used lukewarm.

Dīdān-i-Am'ā' (Intestinal Worms)

Threadworms are common in infants. Treatments include absinth water with milk or plasters of wormseed, embelia, colocynth pulp, or ox-bile applied to the abdomen. A mixture of turmeric, Roman ginger, and sugar may also be given.^{2,5,7}

Conclusion

Unani medicine offers effective solutions for both common childhood ailments and more severe conditions. Unani scholars placed great emphasis on both prevention and treatment in child healthcare, extending their insights to include sensory and motor development, as well as moral and emotional guidance. This holistic approach goes beyond mere medical intervention, aiming to sustain the overall health and well-being of children. Integrating Unani practices into modern healthcare systems can significantly enhance child health, reduce the burden of diseases, and minimize disabilities, making it a valuable complement to existing medical frameworks.

Authors Contribution Statement: All authors have contributed equally to this work.

Conflicts of Interest: None

Funding: Nil

Source of Support: Nil

Informed Consent Statement: Not applicable.

Data Availability Statement: The data supporting in this paper are available in the cited references.

Ethics approval: Not applicable.

References

1. Park K. Park's textbook of preventive and social medicine. 27th ed. Jabalpur: Banarsidas Bhanot Publishers; 2023. 607p.
2. Sina I. *Alqanoon Fi'l Tib*. Vol-I (Urdu Translation by Kantoori, GH). New Delhi: Idara Kitab-us-Shifa; 2010; 167–171p.
3. Singh K, Verma B. Navjata Shishu Parichary (Neonatal Care) in Ayurveda: a Review. UJAHM; 2013;01(03):6-12. <https://doi.org/10.46791/UJAHM.2020.080303>
4. Razi AMBZ. *Kitab ulmansoori*(Urdu translation by CCRUM) New Delhi: Ministry of H. & FW, Govt. of India; 1991: 180-183p.
5. Majoosi AA. *Kamil us Sana'ah* (Urdu translation by Kintoori GH). Vol. 2nd. Lucknow: Matba Munshi Naval Kishore; 1889: 69-77p.
6. Jurjāni I. *Zakheera Khawarzaam Shahi*. (Urdu translation by Khān HH). Vol. 3rd. Lucknow: Matba Munshi Naval Kishore; 1896:248-254p.
7. Kabeeruddin HM. *Kuliyate Qanoon*. New Delhi: Idara Kitab us shifa; YNM: 110-137p.
8. Rushd I. *Kitab Al-Kulliyat*, 2nd edition, New Delhi: CCRUM; 1987: 349p.
9. Abdul NK. Child health viewed by Ibne sina. *Journal of international society of history of Islamic medicine* 2003;2:37-41.
10. Baghdadi IH. *Kitabul Mukhtarat FilTib* (Urdu translation by CCRUM). Vol. 1. New Delhi: Ministry of H. & FW, Govt. of India; 2005:181-190.