



## The Role of *Asbāb Sitta Darūriyya* and its Implications in the Prevention of Lifestyle Disorders: A Review

### Abstract

The Unani medical system is among the oldest traditional medical systems and places more emphasis on disease prevention and health maintenance than on just treating patients. It proposes a novel strategy based on *Asbāb Sitta Darūriyya* (the six essential factors), which are crucial for controlling and preventing lifestyle-related illnesses. Diet, behavior, and environment closely link lifestyle diseases, which are becoming a major worldwide health concern. These conditions include depression, anxiety, obesity, cancer, diabetes, hypertension, and chronic obstructive pulmonary diseases. According to Unani principles, disease occurs due to the improper management of these six essential elements, exceeding the restorative capacity of *Ṭabīʿat's* (innate healing power) to maintain equilibrium. Unani medicine adopts a comprehensive approach that integrates both physical and mental dimensions of health, emphasizing both prevention and therapy. By adopting and regulating *Asbāb Sitta Darūriyya*, individuals may maintain biological harmony, promote overall well-being, and prevent lifestyle-related illnesses. This narrative review is based on an analysis of classical Unani medical texts and contemporary scientific literature retrieved from electronic databases such as PubMed, Google Scholar, and Scopus. This review aims to highlight the relevance of these six essential factors in modern life by emphasizing their role in health maintenance and disease prevention.

**Keywords:** *Asbāb Sitta Darūriyya*; Lifestyle disorder; Unani Medicine.

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### INTRODUCTION

Traditionally, *Unani-Tibb* has approached disease prevention and treatment holistically. Identifying and addressing harmful lifestyle variables is a major focus of *Unani-Tibb* therapy, which is used to treat chronic, long-term, or recurrent clinical diseases. *Unani-Tibb* defines lifestyle diseases as illnesses that result from an unsuitable interaction between an individual and their surroundings. The father of lifestyle medicine is thought to have been Hippocrates. He frequently used what is now known as lifestyle medicine, which involves dietary and activity changes, to treat conditions like obesity. The sayings "Let food be your medicine, and medicine be your food" and "Walking is man's best medicine" are frequently credited to Hippocrates. Lifestyle decisions are frequently the cause of or a contributing factor in lifestyle diseases. Those who are prone to unhealthy eating habits, sedentary lifestyles, and bad habits like smoking and consuming alcohol are more likely to have them. *Unani-Tibb* treatment is based on lifestyle change since it acknowledges the impact of environmental factors and ecological conditions on health. The harmony between humor and temperament is maintained by a balanced relationship between the six fundamental elements, which in turn balances the human body's internal environment. *Unani-Tibb* is confident that some adjustments to *Asbāb Sitta Darūriyya* can prevent lifestyle disorders. These embraces include changing a person's diet where necessary, encouraging more physical exercise, improving breathing practices, enhancing sleep quality, and promoting appropriate elimination. The benefit of this approach is that it promotes a more responsible way of living while also

addressing existing health condition. This approach may reduce the likelihood of disease recurrence. (Saleem et al., 2015)

In Unani medicine, the term *Asbāb* refers to factors or causes that influence the human body and may contribute to the development of a new condition or the maintenance of an existing state. (Ameen, 2010; Baghdadi, 2005) According to *Asbāb Sitta Darūriyya*, human life would be unthinkable without these six essentials. (Ameen, 2010; Qarshi, 2010) The human beings are continuously breaking the law of nature, even though they want to live fit as long as possible. Urban residents suffer more than those in rural areas because their daily routines deviate greatly from the laws of nature. Everything has a cause, and if those reasons are favorable to health, then health is achieved. *Asbāb Sitta Darūriyya*, the six causes from which no one can escape during life, is stated in Unani medicine. These factors are the efficient causes that are responsible for the preservation or transition of existing health. (Ahmad, 1983)

"This review aims to investigate the relevance and applicability of *Asbāb Sitta Darūriyya* in modern lifestyle medicine and critically examine their role in the prevention and management of lifestyle-related diseases within the framework of Unani medicine."

### METHODOLOGY

A narrative review methodology was employed for this study. Classical Unani texts, including *Zakheera-e-Khwarazm Shahi*, *Kamil-us-Sana*, and *The Canon of Medicine* by Ibn Sina, were examined in the library of Hakim Syed Ziaul Hasan, Bhopal, to

understand the traditional concepts of *Asbāb Sitta Darūriyya* and their implications for the prevention of lifestyle disorders. Relevant contemporary scientific literature was searched in electronic databases, including PubMed, Google Scholar, and Scopus. Relevant English papers were analysed and compared with Unani principles in order to identify similarities and differences.

## LIFESTYLE DISEASE

Approximately three-quarters of all annual deaths worldwide are caused by non-communicable diseases (NCDs). The increasing burden of NCDs can be partly attributed to ongoing epidemiological and nutritional transitions. In 2004, approximately one quarter of the population was affected by NCDs; this proportion is expected to rise to nearly half of the population (46%) by 2030. (Christian et al., 2024) According to the World Health Organization (WHO), non-communicable diseases, often referred to as chronic lifestyle diseases, are non-infectious in nature. They usually progress slowly and persist for a long duration. NCDs are broadly classified into four major groups: diabetes, cancer, chronic respiratory diseases (including asthma and chronic obstructive pulmonary disease), and cardiovascular diseases such as heart attack and stroke. The rising prevalence of NCDs is attributed to multiple factors, including globalization of unhealthy lifestyles, rapid and unplanned urbanization, and population aging. (Park, 2025) Urbanization, in particular, has played a significant role by promoting physical inactivity, unhealthy dietary patterns, tobacco use, and alcohol consumption. (Reddy, 2002) For instance, the globalization of unhealthy lifestyles, such as poor diets, may manifest in people as obesity, high blood lipids, elevated blood pressure, and elevated blood glucose. These factors, known as intermediate risk factors, can contribute to the development of cardiovascular disease., a lifestyle disease that is becoming more and more prevalent among adults in both industrialized and developing nations. (Park, 2025) cardiovascular diseases (CVDs) represent the leading cause of mortality among NCDs, with ischemic heart disease being the primary contributor. (GBD 2017 Causes of Death Collaborators, 2018) While age-adjusted CVD mortality rates have declined in high-income countries, low- and middle-income countries have experienced an increase of more than 50% in CVD-related deaths over the past three decades, with a substantial proportion occurring in younger adults. (Remenyi et al., 2013) Diabetes and hypertension are among the most prevalent NCDs of public health importance. (Capehorn et al., 2016) Although the etiologies connecting both diabetes and hypertension remain hypothetical, multiple epidemiological investigations offer evidence supporting their coexistence. (Chukwuma et al., 2019) The prevalence of diabetes and hypertension, as well as their contribution to CVD, may differ by region and may be influenced by individual lifestyle factors. (Park, 2025) cardiovascular disease a greater comprehension of the possible mediating and moderating elements in these connections is a crucial gap that needs to be filled. In order to improve the management of co-morbid illnesses, develop more effective preventative strategies, and eventually promote developments that may save lives, it is essential to comprehend these connections. (Chukwuma et al., 2019) Within the framework of the *Asbāb Sitta Darūriyya*, the Unani medical system distinguishes between lifestyle disorders and other illnesses. According to Unani medicine, lifestyle diseases arise due to prolonged imbalance in the six essential factors of life (*Asbāb Sitta Darūriyya*). (Park, 2025)

## CONCEPT OF MIZĀJ

*Mizāj* is a fundamental concept in the Unani medical system. It plays a crucial role in keeping a person in their optimal condition of health. An altered *Mizāj*, referred to as *Sū'i-Mizāj*, may predispose an individual to various ailments. Extended routines alter *mizāj*, which further disrupts a number of physiological func-

tions. Ibn-e-Rushd highlighted that alterations in air quality, extreme exhaustion, and psychological elements like anger, worry, etc. are the main causes of temperamental shifts from normal to abnormal. A shift in *mizāj* to coldness and moistness occurs when there are too much comfort and less physical exertion. These are the primary risk factors for obesity and vascular narrowing, which in turn contribute to coronary artery disease, stroke, and other conditions. (Ibn-e-Rushd, 1987; Ibn Sina, 2010; Jamil, 2006; Jurjani, 2010; Kabiruddin, 1930; Majoosi, 2010) Secondary *tabī'at*, as defined by Unani physicians, can be understood as lifestyle habits that involve adaptation to a particular environment and modifications to lifestyle habits that impact the body's physiological processes. According to Hippocrates, "Lifestyle is secondary to *tabī'at*." (Majoosi, 2010) According to Ibn Sina, "Everyone dies in accordance with his primary *mizāj* until any abnormal cause influences him." Every creature has unique characteristics that are passed down from its parents. The influence of *mizāj awwālī* ranges from the equilibrium of *akhlāt* to the functions of the body. This *mizāj* affects the morphological, physiological, and psychological functions of the body and is associated with an individual's genetic composition. Every person has a genetically encoded *mizāj awwālī* at birth. When external circumstances, known as *iqtisabi awamil*, interfere with this *mizāj awwālī*, it transforms into *mizāj thānwī*. These modifications could be general or local. (Ibn Sina, 2010; Ferasat, 2013–2014)

## CONCEPT OF ASBĀB SITTA DARŪRIYYA

According to Unani terminology, the term "*Asbāb*" (cause) describes what starts a certain human state, such as health or illness. By preserving the equilibrium in *Asbāb sitta darūriyya*, which directly affects health, *Unani* medicine has greatly contributed to the prevention of diseases. An imbalance in these factors causes the alteration in *mizāj*. For example, a change in *mizāj* from normal to cold can result from consuming too much fat and not exercising, which is the primary cause of obesity. In addition to being a significant risk factor for diabetes, stroke, and coronary heart disease, obesity also plays a significant role in the development and advancement of chronic lifestyle diseases. (Ibn Sina, 2010; Gruner, 1973; Nafees, 1954) Unani physicians (*Hukama*) described several fundamental causes of disease and emphasized the regulation of these factors to preserve health and prevent illness. These are known as *Asbāb sitta darūriyya* (Six Essential Causes). According to Unani medicine, the *Asbāb sitta darūriyya* are seen to be the fundamental causes of humoral imbalance, while the amount and quality of humors (*Akhlāt*) are thought to be the cause of ailments. The reason for this is because humors are produced by these same variables, and any disorder in humors also results from imbalances in these factors. For this reason, they are essential to human existence and maintenance of health. The *Asbāb sitta darūriyya* were first compiled by *Abu al-Hasan Ali ibn Abbas al-Majusi*, who named them the *Six Essential Causes*. Before him, in medical writings, no specific chapter was found under the title *Asbāb sitta darūriyya*. *Al-Majusi*, in his work *Kamil al-Sina'ah*, was the first to establish a separate discussion under the topic of non-natural causes, elaborating on the *Asbāb sitta darūriyya* and proving them indispensable for the preservation of human life.

According to *Ali ibn Abbas al-Majusi*, the six categories of *Asbāb sitta darūriyya* are:

- Air (*Hawā*)
- Movement and Rest (*Al-Ḥaraka wa'l Sukūn*)
- Food and Drink (*Ma'kūlāt-o-Mashrūbāt*)
- Sleep and Wakefulness (*Nawm wa'lYaqza*)

- Evacuation and Retention (*Istifrāgh -e-Tabai*)
- Mental/Emotional States (*A'rad-e-Nafsānī*)

According to *Sheikh al-Raees Abu Ali Ibn Sina* (Avicenna), the causes affecting the human body are of two types: essential causes (*Asbāb darūriyya*) and non-essential causes (*Asbāb gair darūriyya*). These are the active causes (*Asbab Fa'iliya*) that bring about changes in the human body or preserve it.

Regarding the essential causes, Ibn Sina writes: These are the causes from which man can never be separated throughout life. They are called *Asbāb sitta darūriyya* (the six essential causes) and are as follows:

- Air (*Hawā*)
- Food and Drink (*Ma'kulāt-o-Mashrūbāt*)
- Physical Movement and Rest (*Al-Ḥaraka wa'l Sukūn al-Badanī*)
- Psychological Movement and Rest (*Al-Ḥaraka wa'l Sukūn al-Nafsānī*)
- Sleep and Wakefulness (*Nawm wa'lyaqza*)
- Retention and Evacuation (*Al-Ihtibās wa Al-Istifrāgh*) (Baghdadi, 2005; Ibn Sina, 2010; Jamil, 2006; Kabiruddin, 1930; Nafees, 1954)

The above six causes (factors) essentially influence each and every human body; therefore, they are called *Asbāb sitta darūriyya*. Nobody can escape from these factors so long as he is living. (Ahmad, 1980)

## 1. HAWĀ E MUHEET (FRESH AIR):

Air has got first priority over all the six essential factors, as without air we cannot imagine the existence of life. (Majoosi, 2010; Kabiruddin, 2009; Ibn Sina, 1993) According to Unani scholars, a variety of ailments are caused by changes in the quality of the air, and fresh, clean air is essential for good health. The necessity of open, well-ventilated homes with an appropriate ventilation system was stressed by ancient thinkers. They also discussed the many seasons, their effects on the air, and the diseases associated with particular seasons. They also offered some excellent suggestions for the proper aeration of these seasons. (Ibn Sina, 2010; Jamil, 2006; Majoosi, 2010) Air performs the function of *ta'dil-i-rūḥ* at the time of inspiration by exchanging the air. Simultaneously, it also works as *tanqīya-i-rūḥ* at the time of expiration. (Gruner, 1973; Nafees, 1954; Gupta, 2009) The most airborne illnesses are caused by ambient air pollution and seasonal or natural variations. (Ferasat, 2013–2014) The normal changes are the seasonal changes because in every season the air changes into another temperament (*Mizāj*). The human body changes whenever the characteristics of the air change. Humors (*Akhlāt*) become unbalanced due to air pollution. (Kabiruddin, 2009) Air pollution buildup is the root cause of lifestyle problems and causes major, even fatal, effects on the respiratory and cardiovascular systems. (Park, 2025; Gupta, 2009) Human life needs fresh and pure air to perform physiological functions and to maintain health. Strengthening *rūḥ* (pneuma) and access to clean, fresh air can help prevent and control most chronic lifestyle diseases. (Baghdadi, 2005; Nafees, 1954) A study was done to investigate the link between premature death and different sources of air pollution in urban and rural environments. It calculated that, primarily in Asia, outdoor air pollution caused 3.3 million premature deaths globally in 2010. According to model forecasts, outdoor air pollution may quadruple the number of premature deaths by 2050. According to the report, "premature mortality will rise moderately but significantly in Europe and the Americas, mostly in urban areas." (Lelieveld et al., 2015)

The *Ṭabī'at* benefit from the changing seasons in air support, which also have positive health effects. However, occasionally these alterations are detrimental to *tabī'at*, leading to *rūḥ* (psyche/soul) and *-qalb* (heart) *Sū-i-mizāj* (mal-temperament), which is the cause of poor health. *Wabai hawā*, for instance (epidemic air). (Ibn Sina, 2010), It is thought that *waba* (epidemic) represents a change in the "*Jawhar*" (essence) of the air. As a result, the air becomes impure, and finally, it leads to the mal temperament of (pneuma) *rūḥ*, which may result in the morbidity or mortality of a large number of people. (Ibn Sina, 2010) *Ibn Sina* (980–1030 AD) says in his well-known book, "The Canon of Medicine," that a change in surroundings can cure a variety of illnesses. He has also emphasized the need for open, airy houses with proper ventilation, playgrounds, and gardens in the cities so that everyone has access to fresh air and a proper ecological balance is also maintained. (Ibn Sina, 2010) Therefore, if only the factors of air are improved, one can be protected from most diseases, or diseases can be reduced. For this reason, sages recommend climate modification. (Jamil, 2006)

## 2. MA'KULĀT-O-MASHRUBĀT (FOOD AND DRINKS):

Foods and drinks are placed in second place after air because their importance is less than air but above all the other factors. Because each person is unique in their physical characteristics, temperament, age, food habits, and environment, among other things, it is necessary to select foods based on their needs. There are three ways that foods and beverages affect the human body: either by their quality alone, only by their element, or by their substance overall. Foods change the body's temperature, both in terms of quantity and quality (whether they enter the body hot or cold). In terms of quantity, too much causes indigestion, blockage, and eventually humor putrefaction. If the amount is insufficient, emaciation results. Unani physicians consider a balanced diet, appropriate in quantity and quality, important for strengthening *Ṭabī'at* and maintaining health. Although water does not provide nutrition for the body, it does transport food, adjust its consistency, and move it into the channels and vessels. (Kabiruddin, 1930; Nafees, 1954; Maseehi, 2008) A healthy diet must be balanced and of high quality, as any imbalance in either amount or quality can result in a number of illnesses. One of the main factors influencing a person's vulnerability to various lifestyle diseases is their diet. An Unani physician believes that the best diet is one in which the quantity, quality, and nutritional value of food and drink are all considered to strengthen *tabī'at* and ensure physical fitness.

According to Hippocrates, there are three dietary habits that one should keep in mind:

- Food should not be consumed unless it is absolutely necessary.
- Eating excessively is bad for your health.
- Rest is necessary after eating.

Unhealthy eating habits, such as smoking, drinking, and not exercising, can also raise the chance of developing certain diseases, particularly in later age, and weakening of the *tabī'at*. Lifestyle diseases may be prevented, or their risk reduced, through simple and sustainable dietary modifications. Nowadays, traditional good-quality and low-calorie diets have been swiftly replaced by high-fat, energy-dense diets. But diet, while critical to prevention, is just one risk factor, and we can prevent obesity by making healthy changes to our diet, and control over obesity is itself a cure for many heart diseases that are developed due to unhealthy and irregular dietary patterns. *Jalinoos* suggested that four conditions should be kept in mind while making eating or drinking habits:

- Time of the food

- Type of food
- Quantity of the food
- Temperament of the food. (Jamil, 2006; Tabri, 2010)

For certain illnesses, Unani doctors had recommended a special diet. In his well-known work, *Al-Qānūn fī'l Tibb*, Ibn Sina discussed nutrition and dietetics as important aspects of medical practice. Anita and Abraham (2006) also discussed the significance of diet in clinical nutrition. (Anita & Abraham, 2006) Gruner further explains the significance in his book entitled "A Treatise on the Canon of Medicine of Avicenna," stating that "diet is the head of healing and the stomach is the house of disease." (Gruner, 1973) The original founders of *Tibb*, Hippocrates, Galen, and Ibn Sina, all cited this. In fact, malnutrition in one form or another is a contributing factor in the majority of chronic diseases that exist today. Poor or junk food consumption—too much fat or salt, little fiber, insufficient fruits and vegetables, poor eating habits, smoking and chewing tobacco, drinking alcohol, etc.—can be linked to diabetes, obesity, heart disease, inflammatory illnesses, certain skin conditions, and cancer. (Krause et al., 1999) Hippocrates (460–370 BC) also said, "Leave your drugs in the chemist's pot if you can heal the patient with food." He also said, "Let your food be your medicine, and let medicine be your food." (Ahmad, 1980) Pythagoras (570–495 BC) acknowledged that 'people should take care of their health; the diet, coitus, and exercise should be in a balanced way. (Krause et al., 1999) Razi stated that "the pillars for curing diseases are good nutrition, adequate rest, happiness, and the best line of treatment." Additionally, he said that "whenever possible, treatment of the diseases should be done by diets only, not by drugs," and that "the amount of desired food items should be less for a patient." (Razi, 1994) *Haris bin Kalda* (570–633 AD): "The *kasni* (Cichorium intybus) is the best vegetable among all the vegetables, the pomegranate is the best fruit among all the fruits, and the rose is the best essence among all the essences." (Ibn Abi Usaiba, 1990)

Hippocrates says, Eat to live, not live to eat.

Don't eat so much that it eats you. (Jamil, 2006)

### 3. AL-ḤARAKA WA'L SUKŪN AL-BADANĪ (PHYSICAL ACTIVITY AND REST):

Unani medicine recognizes the positive effects of balanced physical exercise on an individual's internal resistance and *Tabī'at*. The health benefits of regular exercise and physical activity are hard to ignore because they are one of the strong pillars of healthy living. Just like a healthy diet, exercise can contribute to general good health and therefore to a healthy immune system. It can have an even more direct effect by encouraging healthy circulation, which permits the immune system's cells and components to freely circulate throughout the body and carry out their functions effectively. (Khan et al., 2013–2014) *Riyāḍat* (exercise) helps to boost the innate heat of the body, a unique tool of *tabī'at*, which then overcomes disease-causing matter and thus helps in fighting against the diseases. According to Unani physicians, when a person complies with the rules regarding types, time, intensity, and occupation, physical activity is necessary for the activation of *hararat ghariziyya* (innate energy) and for the expulsion of waste products from the body through excretory channels. In "*Kitāb al-Murshid*," Razi (865–925 AD) explains the types, timing, applications, and safety precautions that should be taken both before and after *riyāḍat*. In "*Al-Qānūn fī'l Tibb*," Avicenna (980–1030 AD) thoroughly examined *riyāḍat* and went into detail about its mechanisms of action, methods, varieties, therapeutic exercises, unique exercises for each organ, and its limit and quantity. (Khan et al., 2013–2014) *Riyāḍat Kullī* (complete exercise), such as horseback riding. (Kabiruddin, 1930; Ibn Sina, 2006) *Riyāḍat Juziyya* (partially exercising), such as lifting

stones. (Ibn Sina, 2010; Ibn Sina, 2006) Other forms of *Riyāḍat* include *Riyāḍat 'Arḍiyya/Ghair Iradi* (unwillingly): exercise performed during regular workdays, such as for ironsmiths and washermen, when there is no desire to do so. *Riyāḍat Zatiyya/Khālīṣa* (willingly): This exercise is performed consciously in order to reap its advantages. It is further classified based on its strength, manner, duration, etc. (Ahmad, 1980; Ibn Sina, 2006) Types of *Riyāḍat Zatiyya/Khālīṣa* according to duration include *Riyāḍat Qalīla* (short-duration exercise), *Riyāḍat Kathīra* (long-duration exercise), and *Riyāḍat Mu'tadila* (moderate-duration exercise). According to strength, it includes *Riyāḍat Qawiyya/shadeeda* (forceful exercise) and *Riyāḍat Da'īfa* (mild exercise in which less force is used). *Riyāḍat Mu'tadila* -average strenuous exercise in which average force is used. According to *sura'at* (frequency), (Majoosi, 2010; Ibn Sina, 2006) it includes *Riyāḍat Sarī'a* -the exercise in which movements should be rapid and fast, and *Riyāḍat Baṭī'a* -exercise in which movements should be dull and delayed. *Riyāḍat Mu'tadila* -movements in between *riyāḍat Sarī'a* and *Baṭī'a*. According to Strength and *Sura'at*, (Majoosi, 2010) *Riyāḍat hathītha* involves moving quickly and forcefully, *Riyāḍat mutarakhiya* involves moving slowly and weakly, and *Riyāḍat mu'tadila* involves exercising between *hathītha* and *mutarakhiya*.

### THE RECOMMENDATIONS OF RIYĀḌAT:

Exercise should be tailored to your age, temperament, profession, physical condition, schedule, etc. Exercise is most effective when the body is in a reasonable state. The bladder and intestines should be empty before exercising. (Ibn Sina, 2006) *Dalk Istirdād* (body-calming massage) should be performed after exercise, and *Dalk isti'dād* (body-warming massage) should be performed before exercise. (Baghdadi, 2005; Tabri, 2010; Ibn Sina, 2006) It should be done after complete digestion of food. (Kabiruddin, 1930; Ibn Sina, 1993; Ibn Sina, 2006) There should be some lateef (light diet) in the stomach during intense exercise, particularly during the summer, and some *ghaleez* (heavy diet) throughout the winter. It is best to work out first thing in the morning. Avoid exercising while you have both a full and empty stomach. (Baghdadi, 2005; Ibn Sina, 1993; Tabri, 2010; Ibn Sina, 2006) If there is excess *hararat* (hot), *yabūsat* (dry), and *burūdat* (cold) in the body, exercise should not be done. (Ibn Sina, 1993; Ibn Sina, 2006) Timing of *Riyāḍat* (Baghdadi, 2005; Ibn Sina, 2006) In *Mavsam-i-Rabī'* (spring season), a good time for exercise is noon. In *Mavsam-i-Garmā* (summer), exercise should be done in the morning. In *Mavsam-i-Sarmā* (winter), exercise should be performed in the evening. Quantity of *riyāḍat*: It should stop gradually, and three things should be kept in mind. Color of the body: Exercise should be done till the color of the skin remains shining, and if the color is going to be dull or yellow, then exercise should be stopped. (Ibn Sina, 2006) Movements (*Harkāt*) of the body: Exercise should be continued after bodily mobility is effortless. It should be stopped if you start to feel tired. (Baghdadi, 2005; Ibn Sina, 2006) Organ swelling (*aaza ka phoolna*): Exercise should be continued till the organs are swollen and sweating is dried up, and when the organs stop swelling and sweating continues, exercise should be stopped. Rest is necessary to reduce body temperature, which damages bodily fluids, and to relieve weariness. Excessive rest raises bodily fluids, which lowers basic energy, whereas excessive mobility causes the body's fluids to decrease, making the body cold. Consequently, relaxation and physical exercise should be balanced. According to *Ibn Sina*, "If exercise is done in moderation and at the appropriate time, it is the cause of good health." (Qarshi, 2010; Kabiruddin, 1930)

Additionally, some ailments can be cured by resting the body, while others can be cured by moving the organs that are afflicted. Exercise is also emphasized by *Unani* doctors as being important to maintaining good health. Maintaining good health requires at least 30–45 minutes of exercise on five days per week.

Ibn Sina said that “exercise is the cause of good health if it is done at the right time and in moderate quantity.” (Qarshi, 2010; Jurjani, 2010; Kabiruddin, 1930; Razi, 1991)

#### 4. AL-ḤARAKA WA'L SUKŪN AL-NAFSĀNĪ (PSYCHOLOGICAL ACTIVITY AND REPOSE):

It shows how the human mind can participate in multiple emotional and intellectual processes at the same time. According to Unani medicine, the human mind and brain require enough stimulation and appropriate relaxation, just as the body requires regular, planned activity and rest. Happiness, sadness, fear, rage, and other psychological elements have a big impact on a person's health. Strong emotions such as anger and excitement may cause transient changes in cutaneous blood flow and heart rate. Additionally, Repeated or prolonged psychological stress may contribute to cardiovascular risk through physiological and behavioral pathways. Under the heading of “*Amrād-i-Nafsāniyya*” (psychiatric diseases), such as depression and melancholic hysteria, these variables are covered in traditional *Unani* writings. Depression is described as a sign or collection of symptoms of *Mālankhūliyā* (Melancholia), a condition in which a person's mental processes are disrupted, resulting in persistent sadness, fear, and suspicious hostility. Some people have delusions and hallucinations, while others believe themselves discarded and consumed by loneliness. (Khan, 2011; Simply Psychology, n.d.) An individual's capacity to fight off illnesses is diminished, and their susceptibility to infections increases while they are under stress. By reducing the quantity of lymphocytes, the stress hormone corticosteroids can reduce the effectiveness of the immune system. Because unhealthy behavioral coping mechanisms like drinking and smoking can be used to alleviate stress, stress can also indirectly affect the immune system. Headaches, gastric ulcers, diabetes, asthma, and infectious diseases like the flu are all associated with stress. The digestive system is impacted by stress reactions. When under stress, digestion is stimulated. The digestive system's ability to function may be impacted. Ulcers may result from the release of adrenaline after a stress reaction. Because of elevated heart rate and other factors, stress reactions put a greater burden on the circulatory system. By increasing blood pressure, stress can also have an impact on the immune system. (Simply Psychology, n.d.) Maintaining good health and preventing many physical ailments involve a balance between mental activity and rest. As the famous quote says, ‘A sound mind in a sound body.’ (Baghdadi, 2005; Ibn Sina, 2010; Kabiruddin, 1930) The *Unani* medical system uses psychological treatment (*Nafsiyati Tada-beer*) to treat certain illnesses. Such therapy includes shifting the patient's attention with adaptive adjustments and other techniques that make the patient happy. Living in a tidy, well-lit home with air conditioning, wearing white or pastel colors, making sure you're comfortable, and giving responsibilities are examples of adaptive modifications. Distracting activities include going to hill stations and parks, seeing plays, listening to nice music, spending time with religious people, reading books, fostering hobbies, and hearing religious sermons and captivating stories. (Ibn Sina, 2010; Tabari, 1995)

#### 5. NAWM WA'LYAQZA (SLEEP AND WAKEFULNESS):

Health depends on regular sleep and wakefulness. Sleep has several advantages, such as helping with digestion, which improves health, and resting the *nafs* (psyche) and organs, which boosts activity. The body needs sleep in order to regenerate and heal itself. Sleep is especially important for healthy people; it should be brief, moderate, and regular. Most adults require approximately 7–9 hours of sleep per night, although individual requirements may vary. Changes in sleep patterns affect the body's immune system, hormone synthesis, and physical and mental stamina. Sleeping and being awake are essential parts of existence. Sleep is like rest, and wakefulness is like movement. Both mental and

physical health depend on getting enough sleep. (Ibn Sina, 2010) According to Zakariya Razi, eight hours of sleep is essential for optimal health. He adds that sleep strengthens the *pneuma*, a vital power, and enhances digestion by maintaining *harārat gharīziyya*. (Ilahi et al., 2012; Hasan, 2023) In addition to producing intrinsic heat, or *harārat*, motions also help break down trash and get food ready for burning. Therefore, sleep is required before engaging in any activity in order for the body to absorb nutrients. According to Majoosi, sleep serves *tabī'at* in two ways: first, it promotes physical and mental relaxation; second, it makes it easier for the body's natural heat to enter through the digestion and synthesis of *akhlāt* (body fluids). (Maseehi, 2008) Everything from behavioral and interpersonal problems to productivity in both the personal and professional spheres can be impacted by sleep disorders and sleep deprivation. (Maseehi, 2008; Tabri, 2010) According to Aristotle, “Sleep is a necessity related to the activity of the heart from which both motion and sense perception originate.” *Majoosi* claims that *tabī'at* benefits from sleep in two ways. Sleep deprivation is regarded as a major risk factor and has been linked to a number of illnesses, including diabetes, obesity, and cardiovascular disease. It's possible that getting enough rest is just as important to one's health and well-being as eating right and exercising. (Maseehi, 2008)

#### 6. AL-IḤTIBĀS WA AL-ISTIFRĀGH (RETENTION AND EVACUATION):

Some positive products of metabolism are kept in the body, while negative ones are eliminated for the purpose of preserving a balanced and coordinated *tabī'at*, and others are how *tabī'at* eliminates waste products. Regular removal of waste products and excess humors from the body is essential. A number of illnesses that fall under the following categories will develop if the retention of the materials becomes abnormal:

- *Amrād-e- Sū'i-i-Mizāj*(e.g., infection, decrement in *harārat gharīziyya*)
- *Amrād-e- Sū' al-Tarkīb*(e.g., embolism, paralysis)
- *Amrād-e- Tafarruq-i-Ittiṣāl*(e.g., rupture of vessels)
- *Amrād-e- Murakkaba*(e.g., inflammation, abscesses). (Ameen, 2010)

Excessive losses of nutrients, salts, and moisture in the feces cause abnormalities. A dry and cold temperament. (Gupta, 2009) and a decrease in natural vitality are the inevitable outcomes of excessive elimination of any matter. If elimination and retention are balanced and take place as necessary, they are beneficial and contribute to maintaining health. It is said that up to 80% of the immune system is in the gut, making it the largest immune organ in the body. Along with additional side effects like bloating and inflammation, constipation slows down the intestines' peristalsis movement, which traps food particles and waste and prevents the body from properly absorbing vital nutrients, some of which are necessary for immune system maintenance. As a result of the accumulation of food particles and poor nutrient absorption, the immune system will eventually deteriorate, leaving the person more vulnerable to cold and cough viruses. Constipation also alters the digestive system's delicate balance of beneficial bacteria, which is essential for the immune system's strength. Food breakdown and digestion are significantly aided by beneficial microorganisms. They also generate compounds that destroy or reject invasive infections, including the flu virus, and are essential for the immunological response. Therefore, if constipation compromises healthy bacteria, the person is more likely to become sick. (Razi, 1991) Therefore, alterations in colonic flora brought on by prolonged constipation may cause disruptions in bowel function, which may result in compromised immunity and weakened resistance to pathogenic flora.

These six principles are seen as integral to achieving balance in the body, as they cover all aspects of Unani medical care from diet and lifestyle to psychological influences. Known as *Asbāb sitta darūriyya*, these principles involve air and movement, nourishment, sleep and wakefulness, the retention and evacuation of bodily humors, environmental preservation, and psychosomatic impacts, all of which are included in the *Asbāb sitta darūriyya* principles. Unani practitioners think that the body can regain its natural equilibrium by addressing all facets of a person's lifestyle and health. Restoring this healthy equilibrium is the goal of every treatment that Unani practitioners recommend in order to advance health. Air regulates body temperature, food and drink provide nourishment, motion and rest provide physical activity, sleep and wakefulness maintain circadian rhythms, evacuation and retention ensure fluid balance, and mental factors like stress management can affect overall well-being. Each principle plays a unique role in maintaining the balance necessary for optimal health.

## MODERN APPLICATIONS FOR UNANI MEDICINE

In the modern era, Unani medicine can be utilized to prevent and improve health. Balance between the body and mind can be maintained by employing the *Asbāb sitta darūriyya*, which includes dietary guidelines, cleanliness practices, physical activities, therapeutic massages, and breathing techniques. Scholars in the past employed these age-old principles to advance health and wellness, and they are thought to be the cornerstone of Unani medicine. The *Asbāb sitta darūriyya* have been proposed as potentially relevant to health promotion and disease prevention for a range of conditions, from minor ailments such as headaches and digestive issues to more serious health issues such as cardiovascular diseases, diabetes, and even cancer. In addition, these principles can help improve mental health and reduce stress. (Ibn Abi Usaiba, 1990) The *Asbāb sitta darūriyya* can significantly raise an individual's general standard of living. A key concept in Unani medicine is the *Asbāb sitta darūriyya*, which maintains balance among the body's four humors—blood, yellow bile, black bile, and phlegm—and helps to maintain a person's health. Additionally, they also assist in preventing disease by helping to reduce stress levels and improve immunity against infections. According to Unani medicine, a person can preserve their humoral balance, which is essential for preserving good health, by eating and drinking within the *Asbāb sitta darūriyya*. To preserve equilibrium and fend off illness, Unani medicine also suggests a range of treatment formulations, lifestyle modifications, and physical activity. According to Unani practitioners, people can strengthen their immune systems, boost their vitality, and lower their chance of being sick by following the *Asbāb sitta darūriyya*. By understanding modern applications for Unani medicine, such as the *Asbāb sitta darūriyya*, it is possible to achieve optimal health and wellbeing in a holistic manner that takes into account not just physical ailments but also psychological well-being. Such an approach towards well-being can be highly beneficial for individuals in this day and age, as it enables them to live a healthier life with increased longevity and productivity. In conclusion, to sum it up, Unani medicine's *asbāb sitta darūriyya* is a useful strategy for helping people achieve overall health and well-being. This strategy creates an integrative approach that increases longevity, productivity, and general welfare by considering both physical and psychological health and enhancing contemporary procedures. Gaining knowledge of the *Asbāb sitta darūriyya*'s contemporary uses can help you get even more out of this historical method. (Hasan, 2023)

## DISCUSSION

*Asbāb Sitta Darūriyya* and modern lifestyle medicine are critically examined in this review, which highlights the similarities and differences between the two systems. A number of Unani

principles are similar to contemporary lifestyle factors that influence health. The present review, which emphasizes nutrition, exercise, and sleep hygiene in the prevention of metabolic, cardiovascular, and mental health disorders, is broadly consistent with the regulation of diet (*Ma'kulāt-o-Mashrūbāt*), physical activity and rest (*Al-Ḥaraka wa'l Sukūn*), and sleep-wake cycles (*Nawm wa'l Yaqza*). These similarities imply that Unani preventive ideas are still theoretically applicable to contemporary health promotion. However, their diagnostic and interpretive frameworks differ significantly. Unani medicine, which mostly relies on qualitative and individual assessment, explains disease or illness through changes in *Mizaj*, imbalance of humors, and weakening of *Tabī'at*. Modern lifestyle medicine, on the other hand, is based on quantifiable biomarkers, epidemiological data, and standardized clinical recommendations. Although *Asbāb Sitta Darūriyya* addresses mental balance (*A'raz Nafsanīyya*), environmental harmony, and proper elimination (*Al-Ihtibās wa Al-Istifraḡh*) to promote holistic and sustainable health behaviors, its integration into contemporary public health systems is still limited because of inadequate clinical validation. To improve its evidence base and enable integrative implementation, more thorough study is needed. All things considered, *Asbāb Sitta Darūriyya* offers a thorough preventive framework that is both practically and philosophically aligned with contemporary lifestyle medicine; nonetheless, it needs scientific validation to increase its acceptance and usefulness.

## CONCLUSION

Lifestyle diseases are increasingly affecting populations in both developed and developing countries, making prevention essential to reduce long-term health risks. Rapid changes in dietary habits, physical activity, sleep patterns, and daily routines contribute significantly to the growing burden of chronic non-communicable diseases. According to the Unani system of medicine, health can be preserved by maintaining balance in *Asbāb Sitta Darūriyya*, which governs essential external factors influencing the body. To support normal physiological functioning and allow *tabī'at* to adapt, lifestyle changes should be introduced gradually. Promoting long-term health and preventing lifestyle-related diseases depend heavily on the balanced regulation of these six essential elements. The principles of *Asbāb Sitta Darūriyya* provide a framework for regulating lifestyle-related factors that may influence health and well-being.

## References

- Ahmad, S. I. (1980). *Introduction to Al Umoor Al Tabiyah*. Principles of Human Physiology in Tibb. 1st ed. Habib & Sons. 17-18, 26-42
- Ahmad, S. I. (1983). *Kulliyat-e-Asri*. New Public Press. 102-112
- Ameen, H. M. W. (2010). *Qadeem Ilmul Amraz* (4th ed.). Qaumi Council Bara e Farogh Urdu Zaban. 64
- Anita, F. P., & Abraham, P. (2006). *Clinical dietetics and nutrition* (4th ed.). Oxford University Press. 251, 332
- Baghdadi, I. H. (2005). *Kitab-al-Mukhtarat Fit Tibb*. CCRUM. 108,121,256
- Bates, L. M., Hankivsky, O., & Springer, K. W. (2009). Gender and health inequities: A comment on the final report of the WHO Commission on the Social Determinants of Health. *Social Science & Medicine*, 69, 1002–1004. <https://doi.org/10.1016/j.socscimed.2009.07.021>
- Capehorn, M. S., Haslam, D. W., & Welbourn, R. (2016). Obesity treatment in the UK health system. *Current Obesity Reports*, 5, 320–326. <https://doi.org/10.1007/s13679-016-0221-z>
- Christian, A. K., Osei-Appaw, A. A., Sawyerr, R. T., & Wiredu Agyekum, M. (2024). Hypertension, diabetes, and cardiovascular disease nexus: Investigating the role of urbanization and lifestyle in Cabo Verde. *Global Health Action*, 17(1). <https://doi.org/10.1080/16549716.2024.2414524>
- Chukwuma, C. I., Matsabisa, M. G., Ibrahim, M. A., Erukainure, O. L., Chabalala, M. H., & Islam, M. S. (2019). Medicinal plants with concomitant anti-diabetic and anti-hypertensive effects as potential sources of dual acting therapies against diabetes and hypertension: A

- review. *Journal of Ethnopharmacology*, 235, 329–360. <https://doi.org/10.1016/j.jep.2019.02.024>
- Donatelle, R. J. (2002). *Access to health* (7th ed.). Benjamin Cummings.
- Ferasat, A. (2013–2014). Mizaj-e-Ula and Mizaj-e-Sani. *UNIMED Department Kulliyat, AKTC, AMU Aligarh*, 3(1), 20–27.
- Gruner, O. C. (1973). *A treatise on the Canon of Medicine of Avicenna*. AMS Press.
- Gupta, M. (2009). *Textbook of preventive and social medicine*. Jaypee Brothers.
- Harvard Medical School. (2014). *How to boost your immune system*. <https://www.health.harvard.edu>
- Hasan, I. (2023). Exploring the traditional Unani medicine concept of Asbab-e-Sitta Zarooriya. *Advanced Journal of AYUSH Research*, 3(1).
- Ibn Abi Usaiba. (1990). *Uyoun al-Anba fi Tabaqat al-Atibba* (Vol. 1). Department of AYUSH, Ministry of Health and Family Welfare.
- Ibn-e-Rushd, M. (1987). *Kitabul Kulliyat*. CCRUM. 224
- Ibn Sina. (2010). *Al Qanoon fil Tibb*. Idara Kitab-us-Shifa. 87,88,97,109
- Ibn Sina. (1993). *Al-Qanoon fit Tibb: English translation of the critical Arabic text* (Vol. 1). Jamia Hamdard. 154,156,166,167
- Ibn Sina, A. A. H. A. (2006). *Kulliyat Qanoon*. Ejaz Publishing House. 152,163
- Ilahi, A., Ansari, A. H., Zulkifle, M., & Muti, M. A. (2012). Association of exercise, sleep habits, bathing and house status in the genesis of central nervous system disorder. *Hamdard Medicus*, 55(3), 37.
- Jamil, A. W. (2006). *Tauzihaat Asbab-e-Sitta Zarooriya*. Bharat Offset Printers. 63,65,127
- Jurjani, A. H. (2010). *Zakheera Khwarzam Shahi* (Vol. 3). Idara Kitab-us-Shifa. 98
- Kabiruddin, M. (2009). *Tarjuma wa Shrah Kulliyat-e-Nafeesi*. Idara Kitab-us-Shifa. 424-427
- Kabiruddin, M. (1930). *Translation and elaboration of Kulliyat-e-Qanoon* (Part 1). Matba Darul Masih. 289,294
- Khan, A. A., Safdar Ashraf, S. M., & Zulkifle, M. (2013–2014). Chronology of Dalak (massage) and Riyazat (exercise). *ISHIM*, 1–7.
- Khan, H. A. (2011). *Al-Akseer*. Idara Kitab-us-Shifa.
- Krause, D., Mastro, A. M., Handte, G., Smiciklas-Wright, H., Miles, M. P., & Ahluwalia, N. (1999). Immune function did not decline with aging in apparently healthy, well-nourished women. *Mechanisms of Ageing and Development*, 112(1), 43–57.
- Lelieveld, J., Evans, J. S., Fnais, M., Giannadaki, D., & Pozzer, A. (2015). The contribution of outdoor air pollution sources to premature mortality on a global scale. *Nature*, 525, 367–371.
- Majoosi, A. I. A. (2010). *Kamil us Sana'a*. Matba Munshi Naval Kishore. 228,232
- Maseehi, A. S. (2008). *Kitabul Miat fit Tibb* (Vol. 1). CCRUM. 242
- Nafees, B. (1954). *Kulliyat-e-Nafeesi* (Vol. 1). Idara Kitab-us-Shifa. 188-243
- Park, K. (2025). *Park's textbook of preventive and social medicine* (28th ed.). Banarsidas Bhanot Publishers.
- Qarshi, A. (2010). *Afada Kabeer (Mujmal)*. Idara Kitab-us-Shifa. 91
- Razi, A. (1994). *Kitab al-Murshid*. Director Taraqqi Urdu Bureau. 152,163
- Razi, A. (1991). *Kitabul Mansoori*. CCRUM.
- Razi, A. (1997). *Kitab-ul-Hawi fit-Tibb*. Central Council for Research in Unani Medicine, Ministry of Health and Family Welfare.
- Reddy, K. S. (2002). Cardiovascular diseases in the developing countries: Dimensions, determinants, dynamics and directions for public health action. *Public Health Nutrition*, 5, 231–237.
- Remenyi, B., Carapetis, J., Wyber, R., Taubert, K., & Mayosi, B. M. (2013). Position statement of the World Heart Federation on the prevention and control of rheumatic heart disease. *Nature Reviews Cardiology*, 10, 284–292. <https://doi.org/10.1038/nrcardio.2013.34>
- Rizwana, A. A., Hafeel, M. H. M., Parveen, A., Basheer, A., & Rashid, B. (2016). Prevention and control of lifestyle disorders through Asbab-e-Sitta Zarooriyah (six essential factors): An appraisal. *European Journal of Pharmaceutical and Medical Research*, 3(4), 159–161.
- GBD 2017 Causes of Death Collaborators. (2018). Global, regional, and national age-sex-specific mortality for 282 causes of death in 195 countries and territories, 1980–2017: A systematic analysis for the Global Burden of Disease Study 2017. *The Lancet*, 392(10159), 1736–1788. [https://doi.org/10.1016/S0140-6736\(18\)32203-7](https://doi.org/10.1016/S0140-6736(18)32203-7)
- Saleem, S., Saleem, S., Mujeeb, K., Khan, M. I., & Sherani, F. S. (2015). Implication of Asbab-e-Sitta Zarooriyah in prevention of lifestyle diseases: A review. *International Journal of Advanced Research*, 3, 407–412.
- Simply Psychology. (n.d.). *Psychology of stress and immune system*. <http://www.simplypsychology.org/stress-immune.html>
- Tabri, R. (1995). *Moalajat-e-Buqratiya*. Central Council for Research in Unani Medicine, Ministry of Health and Family Welfare, Government of India.
- Tabri, R. (2010). *Firdaus ul Hikmat fit Tibb*. Idara Kitab-us-Shifa. 117