



## Comparative Approach of the Iranian and Conventional Medicine to the Geriatrics

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Received: 23 Jul 2015

Revised: 3 Sep 2015

Accepted: 12 Sep 2015

### Abstract

In recent years, because of the reduction of infectious disease mortality, also changing age pyramid and the increase in human life expectancy, the elderly population is growing, and their medical and health needs are a more pronounced. Hence, to address this need, the field of geriatric medicine as a specialty is founded. The purpose of this study was to evaluate the comparative literature on traditional medicine and geriatric medicine in Iran. In this study, some credible Iranian traditional medicines books are evaluated including Ibn Sina's Canon of Medicine, Hakim Arzani's Mofareh al Gholoob, Hefz al sehat Naseri, and Baha al Doleh Razi's Kholasat al Tajarob and wherever possible a comparison with the conventional medical texts and articles is expressed. In all of the mentioned books, geriatric is included as a chapter and mentioned as "Tadbire mashayekh." In this chapter a detailed description of geriatric health, nutrition, sleep, wakefulness, proper exercise, and commonly seen diseases, and their way of treatment is mentioned which may indicated to the importance of this period in humans' lifetime in Iranian traditional medicine. Although the geriatric medicine is often thought to be a scientific result of the new medicine, but by studying the Iranian traditional medicine resources, it is revealed that in all of the listed books, there is a full description of this lifetime period, which can answer at least a part of our needs, nowadays.

**Keywords:** Geriatric Medicine, Tadbir E Mashayekh, Iranian Traditional Medicine, Geriatrics

**Citation:** Oveidzadeh L, Minae MB. **Comparative Approach of the Iranian and Conventional Medicine to the Geriatrics.** Trad Integr Med 2016; 1(2): 54-8.

### 1. INTRODUCTION

The remarkable point in Iranian traditional medicine is human's lifetime classifications,

which is divided into four periods of childhood, adulthood, the age of decline, and superannuation. The prior scholars had mentioned some specifications for each period and it is quiet notable that the periods

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required a more commands and attentions, describe under their title as commands, for example ante-natal care and infancy care [1], [2], [3], [4].

The period of superannuation is started from the age of 60 and continued until death, which is coinciding to the WHO's description of elderly; although some resources have mentioned 65 as the entering age to the elderly period. This is one of the susceptible periods of human's lifetime so that some of the traditional medicine resources do not distinguish the superannuations as thoroughly healthy people but between sick and healthy [2], [3].

World population growth pattern has changed in current decade, as now we are facing with reducing and controlling diseases and childhood mortality, reduced fertility and reduced mortality during aging, and as a result, elders' population gains a bigger share in human's population [5] the process of aging is known as a process of slowing down the constructions and operations (molecular, cellular, tissues and organs). Aged people lose their adaptability to stress, such as acute illness, trauma, surgery, and lifestyle changes. In the 6.8 billion population of the globe in 2009, almost 11% were above 60 years old [5] and it is predicted that until 2020, the above 65 years old population will increase from 40 to 55 million, equal to 20% [6].

Currently in many countries' health services, the field of geriatric medicine is defined, and the relevant specialists are providing services to this age group. In our country-Iran - also this necessity is quiet tangible due to the increase of the top pyramid population and life expectancy increase in Iranians to about 74 years [5] and in current years, this field has been paid attention.

Although in western books, elderly medicine is a new medical field but by studying the Iranian traditional medicine books, we can find this field's tracks and carefully attention to the elders. In this study, some Iranian traditional books such as Ibn Sina's Canon of Medicine, Jorjani's Aghraz

Al tebiehye, Hakim Arzani's Mofareh al Gholoobe, Aghili e Khorasani's Kholasat al Hekmah, Hefz al sehat Naseri, and Baha Aldoleh Razi's Kholasat al Tajarob are investigated and where a comparison with conventional medicine was applicable, are mentioned. The recommendations for geriatrics in Iranian traditional medicine have been evaluated from six different aspects including air, food and drinks, physical movement, psychological states, sleep ad wakefulness, and retention and evacuation. Recommendations for each of these aspects have been discussed below.

### ***1.1 Air***

It is mentioned in Aghraz al Tebiyeh that the harm caused by air pollutions such as smoke and dust to the elders' body is more than the others, so these people have to avoid the above conditions [7] instead, smelling moderately warm perfumes is highly recommended [1], [2], [3], [8]. In Hefz al Sehat Naseri, it is recommended that elders live in areas where the weather is like spring [4]. In recent articles, also similar results are shown; for example, in a study performed in Thailand, the effect of cold air on stimulating the pulmonary obstructive disease crisis has been demonstrated [9]. In another article comparing the three cities of China environmental pollutants with the city of Bangkok, it is shown that where the pollution was higher, the mortality rate of the old people was higher too [10].

### ***1.2 Food and Drinks***

As weakness of stomach is of its lifetime characteristics, it is recommended to eat food, 2 or 3 times a day and to avoid every hard and stiffs and difficult to chew and suggested the soft and light meals [8]. Of course here the persons' habits are considered, as Jorjani said in al Aghraz that if an elder has a powerful stomach, it is OK to have his total food all at once. Furthermore, it is recommended to make sure that one meal is taken in the evening because the digestive power is stronger at night [1] and sleeping while hungry is forbidden at night and will cause

body weakness [2], [3], [4]. Furthermore in conventional medicine, it is mentioned that the stomach digestion quality changes by age. As by aging, sense of taste, saliva secretion, stomach acids and pancreases excretions decrease which are all causes the weak stomach digestion [6]. The food intake is also very important, so it is recommended to have small food portions with high nutritional value and digestibility like egg yolk, meat potage, milk. Their consumed bread has to be well baked and moderately salted to be easily digestible. Furthermore after daily meals, it is recommended to use a laxative food [2], [3], [4]. In the other hand, some foods are forbidden to consumed by geriatrics such as eggplant, hunted meat, salted meat, cucumber, cucurbit, melon and stiff mean fish and, of course, acidic and sour food like vinegar and also spicy foods [2], [3], [4]. If these kinds of foods are eating it is better to use their justifiers while cooking [2], [3].

Regarding vegetables, bests are beetroot leafs, celery and a little bit of leek which causes laxation too [4]. In new articles also comparing the food regimens and their protective role in bone fracture, the vegetable, and fruit-full regimen has the best effect in preventing the bone fracture in the Japanese aged people [11].

Drinking milk is highly recommended in this lifetime because it is nutritive and moisturizing. But here also caring about the person's habits is more important. It is mentioned in Mofareh that drinking milk is very good for the old people who does not feel any itching or liver and abdominal pain afterward [1], [2], [3]. The best milk is goat's milk especially if it is add some salt and honey to it [1], [2]. It is better that milk being drunk hot and drinking cold milk is prohibited for elders [4].

In conventional food regimen, the elder's requirement to calcium will increase to 1200 mg a day because of their decreased gastrointestinal absorption and, of course, the main calcium resource is milk [6].

Eating garlic is also recommended especially if the person is used to it [2], [3].

Using hot temperament jams such as ginger jam is also recommended as it causes hotness and better digestion [2], [3]. As constipation is one of the worst complications in this period, there is lots of attention on laxatives and purgatives like fresh fig and flame in summer and dried fig drunken in honey mixed water in winter before the meal, and recipe of some foods like rock brake roots with chicken pottage or cabbage or beetroot stew, etc. But extra usage of purgative is prohibited and using such foods have to be limited to once or maximum twice a weak [1], [2], [3].

In conventional medicine, preventing the constipation is very essential for the elders, as using 10-25 g fiber and 1500 cc liquids/day and bulk laxative like psyllium is recommended [5].

### **1.3 Physical Movement**

Sport is mentioned in Iranian traditional medicine as "Riazat," which is considered to be necessary in the elderly period but is different up to the people's physical situation, diseases, and habits. If the body is in balance, moderate sport is recommended [2].

Interesting point mentioned in books is that if a person has a headache or epilepsy or catarrh, he has to do the lower limb's sports and if he has any problem in his legs, the upper body sports such as throwing or lifting stones are recommended [1], [2] which needs to be further investigated.

Suggested sports in "Hefz al sehat Naseri" are horse riding and smoothly walking which doesn't cause fatigue and to take a shower with lukewarm water afterward [4]. Massage is also another subject mentioned under the title of "Riazat" in Iranian traditional medicine books. Massage is highly recommended in this age and has to be performed moderately [2], [3]. The duration has to be modest and rubbing should neither be very weak not very strong but up to the patient tolerability, and they should not massage weak or painful organs [1], [2].

Ibn Sina suggested using oils during massage. In Aghraz al Tebiyeh, moderate massage with moderate oils like Jasmine and

Lily and a little sporting is recommended [7]. But in Kholasat al tajarob, rest and stillness have been mentioned to be a more convenient in this period and recommended to use moisturizing and reinforcing oils for skin and body organs [8].

The center for disease control and prevention in the USA suggests at least 150 minutes of moderate aerobic activity a week divided into 2 or more days a week to make up all the muscle groups at this age [12]. Moreover, a study in Japan found that walking in the forest air reduces stress hormones and blood pressure [13].

#### **1.4 Psychological States**

Using aromatics fragrances is recommended in elderly ages for modulating their mood [2]. Reinforcing the heart with refreshings and moderate heat perfumes and bracing things are also recommended [8]. Smelling cold tempered perfumes like camphor and water lily is forbidden [7]. In conventional medicine, depression in older age is a predictor of adverse outcomes in this period [6].

#### **1.5 Sleep and Wakefulness**

Ibn Sina believed that elders needs more sleep than young people. Hakim Arzani had mentioned in Mofareh al gholoob that the best for an elder is sleeping especially if he is used to it, because and elder requires sleep to keep his instinctive moisture and returning his lost body moisture back. In Iranian traditional medicine books, the best soporific command from Jalinus is to eat lettuce [1], [2], [3], [4].

#### **1.6 Retention and Evacuation**

In Iranian traditional medicine, phlebotomy and leech therapy are forbidden for over 60 years old people [2], [4]. In Kholasat al

tajarob, sexual intercourse and evacuations are mentioned as the body weakening and body's main organs defective in elders and these people are prohibited from frequent sexual intercourse and even if libido still exists, the reduction is essential in this regards [2], [3], [4]. The best evacuation for elders is mentioned as moderate diarrhea [2], [3].

#### **4. DISCUSSION**

In Iranian traditional medicine, the elders temperament is different so that their boss organs are cold and dry but because of their improper digestion and undesirable moisture exist in their body, so we have to take a look at their external symptoms and if it is cold and dry, their food and other commands have to be hot and moist and if it is cold and moist, so their foods and other commands have to be hot and dry [1], [2], [3], [7], [8]. In Iranian traditional medicine, the basis is to do the preventions and keep people's health, and all the mention recommendations are emphasizing it. By comparing these doctrines with conventional medicine, it can be seen that the traditional medicine has yet many new things to say in this regard. Mentioned protocols in 6 essential aspects especially regarding nutrition, sport, psychological state and air are very compatible with conventional medicine.

We hope that by paying more attention to the above-mentioned recommendations, the applicable points are extracted and be used in current geriatric medicine.

#### **6. CONFLICT OF INTERESTS**

Authors have no conflict of interests.

#### **7. ACKNOWLEDGMENTS**

None.

#### **REFERENCES**

- [1] Avicenna. The canon of medicine. Tehran, Iran: Soroush Publications; 1987. [In Persian].
- [2] Arzani MA. Mofareh Al-Gholob. Tehran, Iran: Almaee; 2012. [In Persian].
- [3] Aghili Khorasami MH. Kholase Al-Hekmat. Qom, Iran: Esmaelian Publications; 2006. [In Persian].
- [4] Gilani MK. Hefz Al-Sehe Nasseri. Tehran, Iran: Almaee; 2009. [In Persian].
- [5] Longo DL, Fauci A, Kasper D, Hauser S, Jameson J, Loscalzo J. Harrison's principles of internal medicine. 18<sup>th</sup> ed. New York, NY: McGraw-Hill Professional; 2011.
- [6] Mahan L, Escott-Stump S, Raymond JL. Krause's food & the nutrition care process. Philadelphia, PA: Elsevier Health Sciences; 2012.
- [7] Gorgani I. Zakhireye Kharazmshahi. Tehran, Iran: Academy of Medical Sciences; 2001. [In Persian].
- [8] Razi B. Kholasat Al-Tejareb. Tehran, Iran: Rahe

- Kamal; 2008. [In Persian].
- [9] Tseng CM, Chen YT, Ou SM, Hsiao YH, Li SY, Wang SJ, et al. The effect of cold temperature on increased exacerbation of chronic obstructive pulmonary disease: a nationwide study. *PLoS One* 2013; 8(3): e57066.
- [10] Wong CM, Vichit-Vadakan N, Vajanapoom N, Ostro B, Thach TQ, Chau PY, et al. Part 5. Public health and air pollution in Asia (PAPA): a combined analysis of four studies of air pollution and mortality. *Res Rep Health Eff Inst* 2010; (154): 377-418.
- [11] Zeng FF, Wu BH, Fan F, Xie HL, Xue WQ, Zhu HL, et al. Dietary patterns and the risk of hip fractures in elderly Chinese: a matched case-control study. *J Clin Endocrinol Metab* 2013; 98(6): 2347-55.
- [12] Leenders M, Verdijk LB, van der Hoeven L, van Kranenburg J, Nilwik R, van Loon LJ. Elderly men and women benefit equally from prolonged resistance-type exercise training. *J Gerontol A Biol Sci Med Sci* 2013; 68(7): 769-79.
- [13] Li Q, Otsuka T, Kobayashi M, Wakayama Y, Inagaki H, Katsumata M, et al. Acute effects of walking in forest environments on cardiovascular and metabolic parameters. *Eur J Appl Physiol* 2011; 111(11): 2845-53.