



Uterine Bleeding Disorders from the Perspective of Persian Traditional Medicine; A Proof for Originality of Individual-Based Medicine in Iranian Traditional Medicine

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Abstract

One of the most important problems of women in their reproductive age is menstrual disorders and vaginal bleedings. The prevalence rate of these bleedings among women referring to gynecology clinics has been reported to be 19.1%. Treatment of these disorders in modern medicine includes hormone therapy accompanied with medicinal supplements. Iranian medicine, as a humor-based medicine school, has a specific view about the classification of causing factors of these disorders. This review study was performed to investigate the causes of abnormal vaginal bleedings from the perspective of Traditional Persian Medicine through reviewing the available texts and references of Iranian traditional medicine. In Iranian medicine books *Efrat-e-tams* (hypermenorrhea) is classified to two general normal and abnormal types. In normal type, due to the great amount of blood, the nature plays a role in drain of blood into a natural exit such as uterine. The abnormal type is divided into two subtypes; the first, is related to the problems in the quantity or quality of the patient's blood and the second type is due to the problem in the uterine that causes blood loss. It seems that attention to the causes of diseases from the perspective of Iranian medicine opens a new perspective in the treatment of menstrual disorders for modern physicians. Studying these causes, beside whatever is known in modern medicine about control of menstrual disorders, can help us to come to better treatments with fewer complications.

Keywords: Abnormal vaginal bleeding; *Efrat-e-tams*; Iranian medicine; Women

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Introduction

Abnormal uterine bleedings have a high prevalence among women complaints; more than 19% of women referred to gynecologists' clinics are complaining of abnormal vaginal bleeding of whom, approximately 25% are candidates of hysterectomy. Hysterectomy is suggested for two reasons; either due to not responding to the conservative therapy and consequently negative effects of bleeding on quality of life or the presence of malignancy in pathology reports. It should be mentioned that the prevalence of malignancies is 10.2 per 100000 women aged 19-39 years, 2.8% per 100000 women aged 30-34 years, 1.6% per 100000 women aged 35-39 years and 36.5% per 1000000 women aged 40-49 years. Like cancer, the highest incidence rate of bleeding disorders is in the 4th decade of life [1].

In women without any malignancy, non-surgical treatment or conservative therapy is successful which reduces the costs and rate of surgery for this group [1]. Iranian medicine is basically a humor- and nature-based school. In this view, menstruation is called *tams*. Iranian medicine, through providing a special classification, provided supportive treatment for *efrat-e tams* based on the diagnosis [2,3].

Traditional Persian Medicine (TPM) have been used to handle menorrhagia for centuries. Many Iranian medical documents such as Avicenna's the Cannon of Medicine (1025 AD) have extensively discussed menorrhagia and its pathology and treatment [3]. Actually menorrhagia has been described under the subject of *Efrat-e-tams* that covers a range of menstrual problems [2,3].

The purpose of this article was to review menorrhagia from Persian medicine point of view as the four humor and temperament-based medicine. Therefore, in this paper, classification of causes of abnormal vaginal bleeding from the perspective of TPM is discussed.

TPM consists of all traditional knowledge and practices used in diagnosis, prevention and elimination of illnesses in Persia. Beside practical procedures, TPM is the science of how to keep health and how to bring it back after the occurrence of disease. Its strategy has a basic idea on temperaments and humors so onset of disease is related to their imbalance. Therefore, approach to etiology of a disease and its classification and treatment is based on the temperaments and humors.

Methods

This qualitative analytic library study was performed through reviewing available and reliable information of TPM. For this purpose, traditional texts including *Alhavi*, The Canon of Medicine, *Exir-e Aazam*, *Zakhire-y-e kharazmshahi*, *Teb-e- Akbari* and *Moalejat-e- Aghili* were investigated. We searched and collected data about *Efrat-e-tams* in uterine diseases through these books.

Results

From the perspective of TPM, human being poses a nature (*Ghove-y-e modabereh*) that causes changes in the body in order to support the individual's health. In other words, the nature governs the biologic activities of human being. The base of treatment in this approach

is through emphasizing on the role of nature. The healer tries to diagnose the etiology of the disease and to treat it through recognizing the nature [2]. In TPM's texts menorrhagia is one of the common gynecological disorders named *Efrat-e-tams*. *Efrat-e-tams* include following symptoms: (a) heavy menstrual blood loss (b) prolonged bleeding and (c) noncyclic bleeding [4,5].

Uterine bleeding disorders (*Efrat-e-tams*) has been divided into two general groups of normal and abnormal [3,5]. In normal type, due to the excess of blood, the nature determines how to drain the blood into a natural exit such as uterine and any intervention is useless. In this case, the patient has a kind of heaviness in her organs causing a type of general illness feeling. She wakes up in the morning with this feeling and has heaviness in organs from the early morning. The diagnostic signs are changes after the bleeding period; in fact, the patient has good feeling, reddish face, succulence and lightness feeling after the bleeding period that show accumulation (*Emtela*) of blood in body and return of health after blood discharge. This case is seen in hedonist women who have a calm life accompanied with overeating and a diet rich in animal proteins. Therefore, in this type of women, uterine bleeding is beneficial and causes body balance.

Other causes have been classified as abnormal and divided into two groups; in the first group, the problem is in the quality or quantity of blood causing hypermenorrhagia and in the second group, uterine is the source of problem [3]. The first group is divided into the following

subgroups:

- Hot and wet temperament of blood leading to the change in blood humor that causes reddish face [6-8], full and swollen veins, tiredness in all day without doing any activity, yawn and drowsiness. Sometimes bleeding from nose or gum is also seen. In this case, bleeding should be allowed to continue until it does not cause weakness and disability [3,7,9-11]. Sometimes, bleeding is a sign of severe weakness in body. The patient's nature is not able to regulate the organs' strength. The weakness causes bleeding and bleeding, itself, aggravates the weakness [2].

- The other cause in patient's blood is the increase of the blood plasma that causes disorder in four powers of body organ. According to TPM, each organ has four powers named absorbing power (*jazebe*), retentive power (*maseke*), digestive power (*hazeme*) and expulsive power (*dafee*). Each of them is weakened under special conditions. Uterine veins retentive power (*maseke*) needs dryness for preserving the uterine strength and its blood. Excess wetness weakens veins' retentive power (*maseke*) and they lose more blood [2,11,12].

- The other cause is warming of the blood more than the natural limit. This increases blood penetrability, dilution and delicateness. Due to a special diet, bile secretion increases and the blood becomes warm because of bile excess exits from the uterine. Attention to the differences in color, concentration and smell of the discharged blood can help the diagnosis [5,13]. The second group has uterine causes. In fact, weakness of uterine and its veins due to repeat-

ed abortions or using metal instruments in physical examinations or treatment processes such as curettage, complicated deliveries and other uterine diseases can cause abnormal bleeding [8,11,14]. Past physicians severely opposed using metal instruments in uterine exam, because they believed it causes uterine weakness. They rather believed that using aromatic herbs improves uterine strength [3,14].

In relation to uterine diseases, uterine distemperament are among diseases that cause uterine weakness. They are hot, cold, wet and dry temperaments. The color and odor of uterine excretions help the diagnosis very much. For this reason, the patient is recommended to use a clean cotton pad during night and diagnosis is made based on the color of pad in the morning. Red shows hot and wet temperament, yellow shows hot and dry temperament, white shows cold and wet temperament and green and livid show cold and dry temperament. Women with hot temperament have red or black menstrual blood with unpleasant odor that is thick and little in amount. They are slime and have thick black hair in their pubic area and suffer from tachycardia, thirst, lips dryness and cervix ulcers. Bright and thin menstrual blood and oligomenorhea show cold uterine temperament that is associated with decrease of sexual desire, little pubic hair, pubic area senselessness and colorless and odorless urine. Great amount of menstrual blood, thin uterine discharge in great amount and history of abortion in the first trimester is evident of wet temperament. Little menstrual blood, little uterine discharge, vagina dryness in exam and intercourse accompanied with slimness are signs of

dry temperament [3,12,15].

Other causes of uterine bleeding are trauma resulted from difficult labor, midwife aggressiveness, abortion and trauma. In relation to postpartum bleeding, it should not be stopped providing that it does not cause weakness in woman. In fact, the uterine should be allowed to do self-cleaning [7,10].

Discussion & Conclusion

Uterine bleeding disorders have been discussed in TPM texts as *efrat-e tams* [2,3,10,12]. Menorrhagia associated anemia and affects daily activities and quality of life [16]. Many women with this disorder undergo hysterectomy. This procedure can cause bone degeneration and menopausal symptoms [17].

Opinions of traditional healers about these disorders and their classification show their different perspective on this issue. Based on their classification, different treatments have been suggested for menstrual disorders. According to the normal and abnormal classification of *efrat-e tams*, a condition named safe increase of menstrual bleeding has been introduced [3,9,12].

In modern medicine, medical management for menorrhagia includes hormonal and nonhormonal. These protocols have different side effects. In TPM menorrhagia has two treatment protocols: nonmedical and medical. Iranian medicine physicians' used diet advise along with medical treatment for the treatment of menorrhagia [5].

It seems that along with perspectives of modern medicine, attention to the diagnosis of *efrat-e tams* in traditional medicine may lead to an evolution

in the treatment of these patients. That treatment would be based on temperament differences and the involved organ [18,19].

TPM emphasizes on attention to individual-based medicine issue which is one of the challenges of modern medicine too. Classifying menstrual disorders to normal and abnormal and then classifying abnormal type to blood disorders and uterine disorders suggest a defined spectrum of clinical diagnoses and consequently different therapeutic approaches. These approaches can be helpful to modern medicine.

Currently, modern medicine specialists' care about application of individual-based medicine and TPM's great emphasis on this issue raises the necessity of developing a new approach for classification of diseases considering both modern and traditional medicines' perspectives.

Conflict of Interests

There was no conflict of interest.

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