

PULMONARY FUNCTION TEST IN BALGHAMI TEMPERAMENT**Dr. Sallallah***

Assistant Professor of Anatomy.

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Corresponding Author*Dr. Sallallah**Assistant Professor of
Anatomy.**ABSTRACT**

Temperament (*Mizaj*) is basic theory and cornerstone of Unani Tibb. The temperament theory has its origin in the ancient four humor theory of the Greek physician Hippocrates, who believed certain human body characteristics are caused by body fluids called humours- Sanguine (*Dum*), yellow bile (*Safra*), phlegm (*Balghami*) and black bile (*Sauda*). The Unani therapeutics depends mostly on the diagnosis of temperament. Almost all the distinguished Unani scholars have discussed the effective methods of temperament assessment.

KEYWORDS: Temperament, humour, sanguine, safra, sauda etc.**INTRODUCTION**

Today temperament is taught and understood under the heading of behavioural sciences but Unani and the Arab physicians applied the concept of temperament (*Mizaj*) on universal scale as compared to modern concept. This thought is entirely different from the modern science which is restricted to the psychosomatic aspect only. Greco-Arabian system had tried to give the idea of mixture or blend of humors as also described in Canon of Avicenna.

The human body can be regarded as a system, holistic in nature, seeking survival. Throughout the ages, observers of human behaviour have repeatedly identified four major patterns or configurations of behaviour. Such holistic sorting of behaviour patterns has been recorded for at least twenty-five centuries. Hippocrates described four such dispositions which he called as temperaments—a Bilious (*Safravi*) temperament with an ease of emotional arousal and sensitivity; a Phlegmatic (*Balghami*) temperament with cool detachment and impassivity; a Melancholic (*Saudavi*) temperament with a very serious, unfriendly, and downcast nature; and a Sanguineous (*Damvi*) temperament full of impulsivity, excitability, and quick reactivity.^[9] According to Avicenna, Allah has made all kinds of people as well as

all kinds of beasts and they can be roughly categorized into four types. In fact, Hippocrates idea that people could be categorized according to "types" was very popular and was used as a key to health care and maintenance. Hippocrates, and later Avicenna, taught how each type could live a healthier and happy life.

Characteristics of Balghami Temperament

Individuals of this temperament are flaccid, obese with soft and flabby muscles. White complexion, thin and soft hairs, narrow and small chest, shorter extremities slow and weak and irregular pulse, hidden joints. Blood vessels are not prominent. Their movements and activities are sluggish. They feel comfort with hot things and in hot weather. They have round face with full cheeks, large moist eyes, have medium to large frame, more fatty tissue than muscular tissue and bones are well covered. They are calm, have sentimental subjective thinking, emotional, sensitive, tends to be religious, their mind is foggy, and slow. They are sexually frigid and do not get anger easily. Their digestive capacity is weak and slow, hence they have less appetite and poor thirst. They are lethargic, dull and take excessive sleep. Their memory is poor and power of perception is slow and feeble.

PULMONARY FUNCTION TESTING

A person blows air forcefully through a mouthpiece. As the person performs various breathing manoeuvres, a machine records the volume and flow of air through the lungs. Pulmonary function testing can identify the presence of obstructive lung disease or restrictive lung disease, as well as their severity.

Vital capacity (VC) is determined by the difference between TLC and RV and changes with variations in RV or TLC. It is easily measured and reliable and can check the measured validity of a measured change in reserve volume and total lung capacity.

FRC is the relaxation volume at the end of expiration. It is not a reliable measurement and requires excellent cooperation on the part of the subject. If a person is suffering with obstructive lung disease FRC may be elevated. This imposes a significant extra load on the inspiratory muscles which can result in muscle fatigue.

FVC - Forced Vital Capacity - after the volunteer has taken deepest possible breath, this is the volume of air which can be forcibly and maximally exhaled out of the lungs until no more can be expired. (In litres).

FEV1 - Forced Expiratory Volume in One Second - this is the volume of air which can be forcibly exhaled from the lungs in the first second of a forced expiratory manoeuvre. (In litres).

FEV1/FVC - FEV1 Percent (FEV1%) - This number is the ratio of FEV1 to FVC - it indicates what percentage of the total FVC was expelled from the Lungs during the first second of forced exhalation.

FEF - Forced Expiratory Flow - Forced expiratory Flow is a measure of how much air can be expired rapidly from the lungs.

MVV - Maximal Voluntary Ventilation - this value is determined by having the volunteer breathe in and out as rapidly and fully as possible.

MATERIAL AND METHODS

This study is carried out in PG lab of Kulliyat department of Ajmal Khan Tibbiya College AMU. Healthy male volunteers selected between the age group of 18-35 years. Determination of temperament is carried out by filling a questionnaire and study done on 50 male volunteers. For this study Mir spirometer is used which was fully computerized.

CONCLUSION

Objective of this study was to found the result of pulmonary function test in *Balghami (barid)* temperament as mentioned in classic Unani literature about their characteristics, shorter extremities slow and weak and irregular pulse, hidden joints, short or small chest, flaccid body. All parameters which studied about pulmonary function test in *Balghami* temperament showed slightly decrease readings. This means temperament theory of *Unani Medicine* still significant and study proved it.

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