



# Unani Aphrodisiacs- Elixirs for Male sexual Disorders

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## Abstract

Zo'f-e- Bah (Male Sexual Weakness ) is a condition in which sexual desire and capability to perform sexual activities decreases. It is one of common cause of Anxiety and depression in adult males; the condition is characterized by a decrease in sexual competency, ability to perform sexual intercourse and desire for sex. The drugs used in unani medicine to treat Zo'f-e- Bah (Male Sexual Weakness) are called as Muqawwie Bah. Muqawwie Bah can be loosely translated to aphrodisiac viz. Any food or drink that has the effect of making those who eat or drink it more aroused in a sexual way. Aphrodisiacs can be categorized according to their mode of action into three groups: substances that increase libido (i.e., sexual desire, arousal), substances that increase sexual potency (i.e., effectiveness of erection) and substances that increase sexual pleasure. There are a number of Muqawwie Bah drugs discussed in unani medicine. This paper aims at reviewing the importance and listing all important easily available natural aphrodisiac.

**Key words: Zo'f-e- Bah; Muqawwie Bah; Male Sexual Weakness; aphrodisiac**

## Introduction

Three of the most common male sexual dysfunctions are decreased libido, erectile dysfunction (ED) and ejaculatory dysfunction (including premature ejaculation [PE] in men ages 18 to 59 years). One or more conditions can coexist in an individual. The inability to achieve and/or maintain an erection sufficient for satisfactory sexual intercourse is a distressing and common symptom, affecting up to one-third of adult men.<sup>1</sup> ED is common in men with systemic disorders such as hypertension, ischemic heart disease, and diabetes mellitus, and its prevalence increases with age. Although sexual dysfunction is more common in older men, it also affects younger men (ages 18 to 25 years).<sup>2</sup> Therapies of men with sexual dysfunction is aimed at improving libido and addressing the two vital sexual functions: the capacity to acquire and sustain penile erections and treating premature ejaculation (PE). The prevalence of reduced libido is estimated to be 5 to 10 percent in men. It increases with age, and it frequently accompanies other types of sexual dysfunction. Men with erectile dysfunction (ED) may experience loss of libido as a secondary consequence of ED.<sup>2</sup> Premature ejaculation (PE) is also referred to as rapid or early ejaculation and is defined according to three essential criteria: (1) brief ejaculatory latency; (2) loss of control; and (3) psychological distress in the patient and/or partner. Ejaculatory latency time (ELT) of approximately one minute or less may qualify a man for the diagnosis, which should include consistent inability to delay or control ejaculation, and marked distress about the condition.<sup>3</sup>

There are various causative factors for MSD that includes androgen deficiencies (hyperprolactinemia, testosterone deficiency), psychological disorders (performance anxiety, fear of sexual failure strained relationship, depression, and stress), chronic medical conditions, vascular insufficiency (atherosclerosis, venous leakage, diabetes, and hypertension), penile disease, (Peyronie's, priapism, smooth muscle dysfunction, and phimosis), neurological disorders (Parkinson's disease, Alzheimer's disease, cerebral trauma, stroke, or nerve injury), pelvic surgery (to correct arterial or inflow disorder), systemic diseases (cardiac, renal pulmonary, hepatic, cancer, and post-organ transplant), drugs (anti-hypertensives, psychiatric medications, anti-depressants central agents, antiandrogens, and antiulcer), lifestyle (cigarette smoking, chronic alcohol abuse, and aging.<sup>4,5,6</sup>

Unani medicine and its Contribution of in the field of sexual medicine and impotency is noted down to 4th century BC, where father of medicine Hippocrates (Buqrat) committed a large portion of his manuscripts to this important topic where he mentioned in details the etiology of erectile dysfunction under the headings of Uqr/ Impotence. In the same manner Galen (Jalinus), had

elaborated the actual physiology of penile erection.<sup>7</sup> In unani medicine an umbrella term Zofe Bah is used to describe the various sexual disorders of male.<sup>8,9,10</sup>

There are a number of diet and drugs available in unani medicine which can be used to treat zofe Bah. These diet and drugs are called as Aphrodisiac. More precisely, an aphrodisiac is defined as any food or drug that arouses the sexual instinct, induces veneral desire and increases pleasure and performance. This word is derived from äAphroditeí the Greek goddess of love and these substances are derived from plants, animals or minerals and since time immemorial they have been the passion of man.<sup>11</sup> There are two main types of aphrodisiacs, psychophysiological stimuli (visual, tactile, olfactory and aural) preparations and internal preparations (food, alcoholic drinks and love portion).<sup>12</sup> There are many herbal drugs that have been used by men with ED with varying degrees of success. Most potent herbal aphrodisiacs are available and have little or very little side effects. Some of the herbs are Gokhru (*Tribulus terrestris*) Zygophyllaceae (active parts ñ fruits), onion (*Allium cepa*) Liliaceae (active parts ñ bulb), garlic (*Allium sativum*) Liliaceae (Active parts ñ bulbs) etc. Other herbal plants with aphrodisiac activity are *Datura metel*, *Atropa belladonna*, *Hyoscyamus niger*, *Cannabis sativa*, *Eurycoma longifolia*, *Avena sativa*, *Ginko biloba*, *Psoralea coryifolia*. Here is the list of plants with their description, experimental study, chemical constituents and conclusion about the aphrodisiac activity of plants.<sup>13</sup>

As discussed earlier unani medicine has vast number of drugs which may fall in the category of Aphrodisiacs. These are listed below:<sup>14-19</sup>

Unani Name	Parts Used	Prescribed By Unani Scholar	Name of Book
<b>Bamiya</b>	Fruits	Safiuddin Ali HS. Unani	Unani Advia Mufrada.
<b>Ghongchi</b>	Seed	Kabeeruddin M.	Makhzanul mufradat
<b>Samaghe arabi</b>	Gum	Kabeeruddin M.	Makhzanul mufradat
<b>Atees</b>	Root	Safiuddin Ali HS.	Unani Advia Mufrada.
<b>Beesh</b>	Root	Kabeeruddin M.	Makhzanul mufradat
<b>Waj turkey</b>	Root	Kabeeruddin M.	Makhzanul mufradat,
<b>Soom/Lehsun</b>	Bulb	Kabeeruddin	M. Makhzanul mufradat
<b>Piyaz</b>	Bulb	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Khulanjan</b>	Root	Kabeeruddin M.	Makhzanul mufradat
<b>Aqarqarha</b>	Root	Safiuddin Ali HS	Unani Advia Mufrada
<b>Asaroon</b>	Root	Safiuddin Ali HS	Unani Advia Mufrada
<b>Satawar</b>	Root	Abdul Hakeem. And Ghani N	Bustanul Mufradat, and .

			Khazainul Advia
<b>Zaravand</b>	Root	Kabeeruddin M	Makhzanul mufradat
<b>Talmakhana</b>	Seed	Anonymous	The Unani pharmacopoeia of India
<b>Brahmi</b>	Whole plant	Kabeeruddin M	Makhzanul mufradat
<b>Tukhme Anjra</b>	Seed	Kabeeruddin M	Makhzanul mufradat
<b>Kundoor</b>	Gum	Safiuddin Ali HS	Unani Advia Mufrada
<b>Tukhme Shaljam</b>	Seed	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Chironji</b>	Fruit	Safiuddin Ali HS	Unani Advia Mufrada
<b>Dhak</b>	Gum	Kabeeruddin M	Makhzanul mufradat
<b>Qinnab</b>	Leaf	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Filfil</b>	Seed	Safiuddin Ali HS	Unani Advia Mufrada
<b>Papita</b>	Fruit	Kabeeruddin M	Makhzanul mufradat
<b>Malkangani</b>	Seed	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Behman Safaid</b>	Root	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Kharnoob</b>	Seed	Safiuddin Ali HS	Unani Advia Mufrada
<b>Nakhud</b>	Seed	Razi Mohammed bin Abubakar Zakariya.	Kitabul Mansuri
<b>Taj</b>	Bark	Safiuddin Ali HS	Unani Advia Mufrada
<b>Darchini</b>	Bark	Abu Saeed Bin Ibrahim, Abdul Hakeem. Bustanul Mufradat, 26, 27	Kitab al-Fath fi al-Tadawi
<b>Tudri zard</b>	Seed	Kabeeruddin M, Abu Saeed Bin Ibrahim	Makhzanul mufradat
<b>Musli safaid</b>	Root	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Kateera</b>	Gum	Safiuddin Ali HS	Unani Advia Mufrada
<b>Muqil</b>	Gum	Kabeeruddin M	Makhzanul mufradat
<b>Mur</b>	Resin	Kabeeruddin M	Makhzanul mufradat
<b>Narjeel</b>	Endosperm	Safiuddin Ali HS	Unani Advia Mufrada
<b>Funduq</b>	Fruit	Kabeeruddin M	Makhzanul mufradat
<b>Zaafran</b>	Stigma	Kabeeruddin M, 29	Makhzanul mufradat

<b>Kharpaza</b>	Seed	Safiuddin Ali HS	Unani Advia Mufrada
<b>Musli siyah</b>	Root	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Amba haldi</b>	Rhizome	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Zaranbad</b>	Rhizome	Safiuddin Ali HS	Unani Advia Mufrada
<b>Gazar</b>	Root	Kabeeruddin M	Makhzanul mufradat
<b>Lobia</b>	Seed	Safiuddin Ali HS	Unani Advia Mufrada
<b>Qaqla</b>	Fruits	Safiuddin Ali HS	Unani Advia Mufrada
<b>Dudhi</b>	Leaves	Kabeeruddin M	Makhzanul mufradat
<b>Sheere thuhar</b>	Resin	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Jarjeer</b>	Seed	Safiuddin Ali HS	Unani Advia Mufrada
<b>Hilteet</b>	Resin	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Injeer</b>	Fruits	Kabeeruddin M	Makhzanul mufradat
<b>Bargad</b>	Leaves	Kabeeruddin M	Makhzanul mufradat
<b>Pambadana</b>	Seed	Baitar I.	Al Jame-al-Mufradat al Adwiya wal aghziya. Vol 4
<b>Aslasoos</b>	Root	Kabeeruddin M	Makhzanul mufradat
<b>Gurhal</b>	Flower	Kabeeruddin M	Makhzanul mufradat
<b>Tukhme kahu</b>	Seed	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Halyoon</b>	Seed	Safiuddin Ali HS	Unani Advia Mufrada
<b>Turmus</b>	Seed	Safiuddin Ali HS	Unani Advia Mufrada
<b>Katan</b>	Seed	Safiuddin Ali HS	Unani Advia Mufrada
<b>Tudri surkh</b>	Seed	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Bakain</b>	Seed	Safiuddin Ali HS	Unani Advia Mufrada
<b>Nana</b>	Whole plant	Safiuddin Ali HS	Unani Advia Mufrada
<b>Mushk</b>	Gland secretion	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Jaiphal</b>	Fruit	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Aam</b>	Fruit	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Konch</b>	Seed	Kabeeruddin M	Makhzanul mufradat
<b>Khar zohra</b>	Leaf, Root	Kabeeruddin M	Makhzanul mufradat
<b>Salab misri</b>	Root	Abu Saeed Bin Ibrahim, Mohammed Abdul Haleem.	Kitab al-Fath fi al-Tadawi
<b>Shaqaqul misri</b>	Root	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi

<b>Aspand</b>	Seed	Kabeeruddin M	Makhzanul mufradat
<b>Khurma</b>	Fruits	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Sanober</b>	Pine nut	Safiuddin Ali HS	Unani Advia Mufrada
<b>Filfil daraz</b>	Fruits	Abu Saeed Bin Ibrahim	Kitab al-Fath fi al-Tadawi
<b>Pista</b>	Fruit	Safiuddin Ali HS	Unani Advia Mufrada

## Conclusion

It is evident from present article that Zofe bah (Male Sexual Weakness) is a common entity present in adult male. If not treated properly it may lead to a negative impact on health. There are a number of safe herbal drugs suggested by Unani physicians in the form of single as well as compound formulations since centuries. These drugs are effective without any major adverse effects. Some studies have been conducted on these drugs but they lack extensive pharmacological and clinical studies by using modern parameters. Hence it is suggested that relevant studies may be carried out on these natural resources for the establishment of new, safe and effective aphrodisiacs.

## References

1. Hyperbaric oxygen can induce angiogenesis and recover erectile function. Hadanny A, Lang E, Copel L, Meir O, Bechor Y, Fishlev G, Bergan J, Friedman M, Zisman A, Efrati S Int J Impot Res. 2018;30(6):292. Epub 2018 May 18.
2. The evolution of sexual dysfunction in young men aged 18-25 years. Akre C, Berchtold A, Gmel G, Suris JCJ Adolesc Health. 2014 Dec;55(6):736-43. Epub 2014 Jul 15.].
3. Understanding the effects of establishing various cutoff criteria in the definition of men with premature ejaculation. Rowland DL, Kolba TN J Sex Med. 2015 May;12(5):1175-83. Epub 2015 Apr 8.
4. Shiri R, Koskimäki J, Hakama M, Häkkinen J, Huhtala H, Tammela TL, Auvinen A. Effect of life-style factors on incidence of erectile dysfunction. International Journal of Impotence Research. 2004;16(5):389.
5. Polland A, Davis M, Zeymo A, Venkatesan K. Comparison of correlated comorbidities in male and female sexual dysfunction: findings from the third national survey of sexual attitudes and lifestyles (Natsal-3). The journal of sexual medicine. 2018;15(5):678- 86.
6. Seo DY, Lee SR, Kwak HB, Park H, Seo KW, Noh YH, Song KM, Ryu JK, Ko KS, Rhee BD, Han J. Exercise training causes a partial improvement through increasing testosterone and eNOS for erectile function in middle-aged rats. Experimental gerontology. 2018;108:131-8.].
7. Shah I. Erectile dysfunction through the ages. BJU International 2002;90:433-441.)



8. Sina I. Al Qanoon Fit Tibb. (Urdu translation by Ghulam Hussain Kantoori). Vol. 2, Part-II New Delhi. Idarae Kitabus Shifa 2007;257:260-262.
9. Majoosi AIA. (Urdu translation by Ghulam Hussain Kantoori). Kamil Al San't, Part-I. New Delhi. CCRUM 2010;1:212-213.
10. Samarkhandi N. Sharae-Asbab. Part-III. New Delhi. Idarae Kitabus Shifa 2009, 75-78.
11. Yakubu M.T., Akanji M.A., Oladiji A.T.: Pharmacog. Rev. 1, 49 (2007).
12. Rosen R. C., Ashton, A. K.: Arch. Sex. Behav. 22, 521 (1993).
13. Malviya N, Jain S , Gupta VB, Vyas S, Recent Studies On Aphrodisiac Herbs For The Management Of Male Sexual Dysfunction - A Review. Acta Poloniae Pharmaceutica - Drug Research, Vol. 68 No. 1 pp. 3-8, 2011)
14. Safiuddin Ali HS. Unani Advia Mufrada. 10<sup>th</sup> Ed. New Delhi: Lahori Print Adds; 2004. p. 182.
15. Ghani N. Khazainul Advia. New Delhi: Idarae Kitabus Shifa; YNM; 2011. p. 788-789.
16. Anonymous. The Unani pharmacopoeia of India. Vol 3 Part 1. New Delhi: Government of India. Ministry of Health and Family welfare. Dept. of AYUSH; 2007. p. 107-108..
17. Razi Mohammed bin Abubakar Zakariya. Kitabus Mansuri. New Delhi: CCRUM; 1991. p. 92.
18. Abu Saeed Bin Ibrahim. Kitab al-Fath fi al-Tadawi (Urdu Translation). 1<sup>st</sup> Ed. New Delhi: Faculty of Unani Medicine, Jamia Hamdard; 2007. p. 90-1.
19. Baitar I. Al Jame-al-Mufradat al Adwiya wal aghziya. Vol 4. New Delhi: Shrishti book distributors; 2005. p. 73-4.

