Guidelines for UNANI Practitioners for COVID-19 Patients in Home Isolation
Ministry of AYUSH Govt. of India

Preamble

The COVID-19 pandemic has emerged as a public health challenge. The burden of the disease and mortality are steadily increasing in many parts of the globe. Several social and economic factors are leading to devastating situations. Effective management to address this infection is still evolving and attempts are being made to integrate traditional interventions along with standard care.

Home isolation is applicable to confirmed COVID-19 cases which are asymptomatic or have mild symptoms, or to people who had a contact with suspected cases of the disease.

General Disclaimer

- Patients need to have a general consultation from a qualified physician before starting any intervention.
- In all severe cases, immediate referral to a higher medical centre as per the Government guidelines is advised.
- Patients with co-morbidities like hypertension, diabetes etc., are advised to continue their respective medications.
- Physicians are free to select drugs as per their own discretion/ availability.
- Use of drugs in vulnerable population is at the prudence of the consulting physician.
- Doses for children should be adjusted according to their age.

Management Guidelines for COVID-19 Patients in Home-Isolation

The common clinical features observed in mild COVID-19 cases include sore throat, mild fever, body-ache, nasal congestion, and dry cough. Although a variety of symptoms are being reported, many cases are asymptomatic and some uncommon clinical manifestations include loss of smell and taste as well.

Some of the asymptomatic cases can be in the pre-symptomatic stage. Considering this possibility, the patient should observe evolving symptoms or signs. This watchfulness should not lead to undue anxiety.

Specific measures for COVID-19 Patients in Home isolation

Stage/condition	Clinical	Medicine	Dosage*
	Presentation		
		Safuf Asgand ⁽¹⁻⁵⁾	5 gmsonce daily
Asymptomatic COVID-19 Patients		Khameera Marwareed ⁽⁶⁾ (Not recommended for diabetics)	3-5 g once daily
		TiryaqArba ⁽⁶⁾ (Not recommended for diabetics)	3-5 gm with lukewarm water
		Arq Ajeeb ⁽⁶⁾	2-3 drops to be instilled in a bowl with hot water for immediate inhalation for 5 minutes twice daily
Mild COVID- 19 Positive patients		Unani Joshanda prepared from Unnab 5 no, Behidana 3 gm and Sapistan 9 no	Preparation of Decoction by boiling these medicines in 250 ml of water, until it remains half and filter it, take luke warm once daily in the morning
	Headache / Nasal Congestion	Arq Ajeeb ⁽⁶⁾	2-3 drops to be instilled in bowl with hot water for immediate inhalation for 5 minutes twice daily
	Fatigue	Khameera Marwareed ⁽⁶⁾ (Not recommended for diabetics)	3-5 g once daily
	Fever	Hab e Mubarak ⁽⁶⁾	2 g (pill) twice daily
	Sore throat	Sharbat e Toot Siyah (Not recommended for diabetics)	20 ml twice daily
		Laooq-e-Sapistan ⁽⁶⁾ (Not recommended	10 gm twice daily for above 12 years of age
	Diarrhoea	for diabetics) Safoof e Teen ⁽⁶⁾	5-10 g
		Sharbat Belgiri ⁽⁶⁾ (Not recommended for diabetics)	15 ml twice daily

General guidelines

- 1. Patients should follow physical distancing, respiratory and hand hygiene, and wear masks.
- 2. Steam inhalation and use of warm water at frequent intervals.
- 3. Avoid use of cold water and exposure to cold air ⁽⁷⁾,
- 4. Adequate sleep (7-8 hours) should be takenand day time sleep especially after lunch may be avoided (7)
- 5. Fumigation of patient's room with *Sandal* (Santalum album) and *Kafoor* (Cinnamomum camphora). (8)
- 6. Keep the scalp covered ⁽⁷⁾
- 7. Avoid physical exertion (7)
- 8. *Gharghara* (gargle) with lukewarm water/ 10-20 gm of pulp of *Khayar shamber* (Cassia fistula) boiled in 100 ml of water^(1,10,11)

Dietary guidelines

- 1. Avoidance from sour diets (7)
- 2. Use of *Kalonji* (Nigella seeds), *Lahsun* (Garlic), *Adrak* (Ginger), *Amla* (Indian Gooseberry), *Haldi* (Turmeric) in sufficient quantity.
- 3. Prefer easily digestible diet
- 4. Oral intake of *Maushaeer*(Barley water)⁽⁹⁾
- 5. Take adequate oral fluids like hot soups/ hot tea

Note: In case of any deterioration/ worsening of symptoms patient should be immediately referred to a dedicated COVID-19 Management Health Care Centre.

References:

- 1. Agarwal R, Diwanay S, Patki P, Patwardhan B, Studies on Immunomodulatory Activity of WithaniaSomnifera (Ashwagandha) Extracts in Experimental Immune Inflammation, J Ethnopharmacol, 1999,67 (1), 27-35.
- 2. Ziauddin M, Phansalkar N, Patki P, Diwanay S, Patwardhan B, Studies on the Immunomodulatory Effects of Ashwagandha, J Ethnopharmacol, 1996, 50 (2), 69-76.

- 3. Verma SK, Shaban A, Purohit R, Chimata ML, Geeta Rai G, Verma OP, Immunomodulatory activity of Withaniasomnifera (L.), Journal of Chemical and Pharmaceutical Research, 2012, 4(1):559-561.
- 4. Davis L, Kuttan G, Immunomodulatory Activity of WithaniaSomnifera, J Ethnopharmacol, 2000, 71 (1-2), 193-200.
- 5. Fazlullah M, YNM, MakhzanulMufradatMaroofbaJamiulAdwiya, Royal Printing Press,Lucknow, p. 35.
- 6. Anonymous, 2013, Essential Drugs List-Unani Medicine, Ministry of AYUSH, New Delhi, 2-4.
- 7. Khan M.A. Rumooz-i-Azam, Vol. I, CCRUM:2006, page No. 116
- 8. Baghdadi, S, 2011, Al-Mughni fi Tadbir al-AmrazwaMa'rifa al-Ilalwa'lA'raz, 1st ed. Daru'l Minhaj, p. 623-624.
- 9. Khan MA, Iksir-i Azam, Vol IV, Matba Munshi Naval Kishore, Lucknow, YNM page No. 221
- 10. Min Zhou, Huan-Huan Xing, Yan Yang, Yue-De Wang, Kun Zhou, Wei Dong, Gan-Peng Li, Wei-Yao Hu, Qiang Liu, Xue-Mei Li, Qiu-Fen Hu, Three New Anthraquinones From the Twigs of Cassia fistula and Their Bioactivities, J Asian Nat Prod Res, 2017, 19 (11), 1073-1078.
- 11. Ghassani Yusuf, 1975, KitabulMutamadfi'lAdwiya al-Mufrada, Daru'lMarifa, Beirut, page 143.