



## **A Critical Review on Therapeutic Application of Dal'k (Massage)**

**Malik Itrat<sup>1\*</sup>, Zarnigar<sup>1</sup>, A.H. Ansari<sup>1</sup>, M. Arshad Jamal<sup>2</sup>**

*1. Dept. of Tahaffuzi wa Samaji Tib, National Institute of Unani Medicine, Bangalore*

*2. Dept. of Moalajat, National Institute of Unani Medicine, Bangalore*

---

### **ABSTRACT**

Dal'k (Massage) has been in used for preventive, therapeutic and rehabilitative purposes since antiquity. In Unani medicine it is one of the methods of evacuation of morbid matter from the body to maintain the equilibrium of bodily humors. Medicated massage in Unani medicine has been indicated in various neurological, musculoskeletal and psychosomatic disorders. In recent years various studies have been conducted to establish the scientific validity of massage. In this paper, author have discussed about the classification of massage and therapeutic importance of massage in Unani perspective along with scientific reports of various studies conducted so far.

**Keywords:** Dal'k, Unani Medicine, Massage, Therapeutic application

---

\*Corresponding Author Email: [malik.itrat@gmail.com](mailto:malik.itrat@gmail.com)

Received 04 September 2013, Accepted 09 September 2013

## INTRODUCTION

According to Unani medicine, Health is attributed to the quantitative equilibrium and to the qualities of akhlat (humors) in the body. There is always a cause for a disease. Unani medicine has a very comprehensive classification of asbab (causes) which almost cover all prevalent causes of all diseases.

Asbab Badaniya (somatic causes) directly deals with the diseases caused by sue mizaj (unequitable temperament) or sue tarkeeb (structural malformation of body organs). While Asbab Badiya (external causes) encompasses almost all causes - emotional, physical, chemical, microbes etc, which directly or indirectly affect the equilibrium of human body. The disease produced due to the above described causes manifest in three forms, which make three broad categories of disease comprising almost all disorders. These are as Amraz sue mizaj, Amraz sue tarkeeb and Amraz tafarruqe ittisal. Amraz sue mizaj deal with the disease occurring due to abnormal change in the temperament of an organ, system, whole body. Amraz sue mizaj can further be subdivided into two categories; Sue mizaj sada (without morbid matter) and sue mizaj maddi (with morbid matter). In Sue mizaj maddi, the morbid matter may be inside the vessels, inside the cavity, adherent to surface, in interstitial space, in potential cavities and pent-up. The advocated principle of treatment in such conditions is elimination of disease causing morbid matter from the body, through easiest and nearest channel towards which Tabiyat is trying to dispose the matter already. Methods of assistance for elimination are Riyazat (Exercise), Dal'k (Massage), Fasd (Venesection), Qai (Emesis), Irsale Alaq (Leeching), Hijamat (Cupping), Hammam (Bathing) etc. Among these, Dal'k is one of the most important and widely practiced methods. In Unani system of medicine medicated Dal'k is indicated for promotion of health as well as for therapeutic purpose in Musculoskeletal, Neurological and Psychosomatic disorders such as arthritis, back pain, neck Pain, paralysis, insomnia, headache etc. In recent years, several studies have proved the therapeutic efficacy of massage.<sup>1,2,3,4</sup>

### History of Massage

Initially there was a dispute regarding the origin of this word. Few authors claimed that it is derived from the Arab word "Mass" (to touch); others said it was from the Greek word "Massein" (to knead). The Hebrew word "Mashesh" (to touch, to feel, to grasp) and the Sanskrit word "Makesh" (to strike, to press) were also said to have been the original from which the word massage came. The Arabic and Greek origin proposed by Savery in 1785 and Piory in 1819 respectively has been considered more authentic due to widespread use of massage in east and

ancient Rome. Massage was very popular among Greeks and Romans. Hippocrates (460-370BC), the father of medicine, was the first person who discussed the qualities and contraindications of massage. He recognized massage as a therapeutic agent. Galen (129-200AD) wrote about 16 books related to exercise and massage. He found nine forms of massage each of which had its own indications.<sup>5</sup>

Ibne Sina has well discussed the various types of massage in the 1<sup>st</sup> volume of his treatise “Al Qanoon Fil Tib.”<sup>1</sup> Ibne Rushd in Kitabul Kulliyat, have mentioned about the classification and importance of massage.<sup>6</sup> Majoosi in Kamilus Sanaa'h, have also mentioned about the preventive and curative aspect of massage.<sup>7</sup>

In India the uses of massage were well known long before its modern name came into being. In Sanskrit literature, it is known as Champan or Mardan as well as Abhyang.<sup>5</sup> In 16<sup>th</sup> century Fabricus-Ab-Aquapendente, who was the tutor of William Harvey, wrote a book on massage in which he warmly recommended the use of massage as a rational therapy for joint affection. It was he who used the term “Kneading” for the first time. Francis Glisson (1597-1677AD) one of the founders of royal society mentioned the use of massages and exercises in the treatment of rickets. The French colonists in India first used the term massage during 1761-1763 and included it for the first time in 1812 in a French-German dictionary. The word massage according to Oxford dictionary entered in the English literature in 1879.<sup>8</sup>

In the 19<sup>th</sup> century the person who contributed a lot in this field was Per Henrik Ling (1776-1839AD). He classified the techniques of conventional massage and incorporated the French words such as percussion, tapotement, effleurage etc. in his Swedish system of massage. Rosenthal gave scientific ground to massage and manipulation and is accredited for reintroduction of massage into mainline medical practice.<sup>5,8</sup>

### **Classification of Massage**

According to Ibne Sina<sup>1</sup> and Majoosi<sup>7</sup>, Dal'k is of four types i.e. Sulb, Layyin, Kaseer and Moatadil.

#### **1. Dal'k Sulb:**

It is a type of massage where firm pressure is applied while stroking with hands. This makes the body firm and strong by the virtue of eliminating those rutoobat, which is responsible for the flaccidity of the muscles.

#### **2. Dal'k Layyin:**

This type of massage is done with soft hands, slowly without exerting much pressure with the purpose of getting the muscles relaxed.

**3. Dal'k Kaseer:**

This type of massage is done for longer duration to reduce the body fat and making the body lean and thin. Being longer in duration, this type of massage eliminates rutoobat from the body in excess amounts leading to weight loss.

**4. Dal'k Moatadil:**

This type of massage is moderate in duration and in force applied while doing it. By inducing better perfusion of muscles, this type of massage causes a moderate rise in muscle mass.<sup>1,7</sup>

Ibne Rushd classified Dal'k into six basic types. His classification is based on Kaifiyat and Kammiyat. On the basis of Kaifiyat; he classified massage into Dal'k Sulb, Dal'k Layyin and Dal'k Moatadil. On the basis of Kammiyat, he classified massage into Dal'k Kaseer, Dal'k Qaleel and Dal'k Moatadil.<sup>6</sup>

Various combinations of these varieties provide nine types of massage are as:

Dal'k Sulb Kaseer	Dal'k Layyin Kaseer	Dal'k Moatadil Kaseer
Dal'k Sulb Qaleel	Dal'k Layyin Qaleel	Dal'k Moatadil Qaleel
Dal'k Sulb Moatadil	Dal'k Layyin Moatadil	Dal'k Moatadil Moatadil

There are also some other types of massage.<sup>1, 3, 6</sup>

**Dal'k Khashin:**

Here massage is done with a rough piece of cloth. It draws the blood rapidly to the surface. It should not be done for longer duration otherwise leads to excessive elimination of rutoobat from the body.

**Dal'k Amlas:**

It is carried out with soft piece of cloth. It increased blood flow in the treated area. The objective of this massage is always to make the body firm and soft, if it is loose or flabby and hard respectively.

**Dal'k Istedad:**

This special type of massage is done before exercise in order to prepare the body for undergoing different movements during exercise. It is done greatly in beginning and then vigorously towards the end, so as to make waste products easily expellable while during exercise.

**Dal'k Isterdad:**

This massage is done towards the end of exercise and is also known as Dal'k Musakkin. Its' purpose is to liquefy and eliminate the waste products, which if retained after exercise in the tissues produce fatigue. This type of massage should be carried out gently and in moderation, preferably with oil. It should never be vigorous, rough or hard at the end as it would then harden

the body. When massage is over, treated part should be kept in a tense and taut condition so as to help the elimination of waste products. At this time the masseur should keep rubbing the body with a towel, while the subject should hold his breath as long as possible, during this procedure, the abdominal muscles should be kept relaxed, while those of the chest stretched. Towards the end of procedure, abdominal muscles are tightened to stimulate the viscera.

### **GENERAL GUIDELINES FOR MASSAGE**

#### **Setting:**

Select a comfortable place with enough light and ventilation. Depending on the season, the temperature of the room should be comfortable to the naked body. If possible, sunlight should seep into the room. Sometimes it is advisable for patients to sunbathe.

#### **Massage table:**

Table should support the whole body of the patient/client. Wooden table is preferably used. It should have appropriate dimensions such as 6-7x 2 feet. A thick rubber sheet should be changed for every patient to prevent the infection.<sup>5</sup>

#### **Timing:**

Ibne Rushd has mentioned in Kitabul Kulliyat that the timing for massage is same as for exercise. Thus, according to his concept, the timing will be in Mausame Rabee' (spring season): noon, in Mausame Saif (summer season): morning, in Mausame Khareef (autumn season): noon and in Mausame Shita (winter season): after noon.<sup>9</sup> But most suitable time for massage is early in the morning between 5 and 9 a.m. and in the evening between 4:30 and 6 p.m.

#### **Direction:**

Ask the patient to lie down on the massage table in a supine position. Massage should start from the soles of the feet and move towards the heart. This enables the veins to function better, while massage of the head, neck and face is done in a sitting position. Massage the legs, arms, chest, abdomen, back and hips in that order.<sup>10</sup>

#### **Duration:**

The duration of massage is not exactly mentioned in any Unani classical writings in terms of minute or hours. On the basis of Experiences it can be said that the duration of massage will differ with the treatment. Generally a massage lasts for 30-45 minutes. Duration also differs with the age of patient. Newborn babies should be massaged for 15 minutes daily; Children Upto the age of 4 years should be massaged for 20 minutes. In youth and adults massage should be done for 30 minutes and in old people for 40 minutes.<sup>10</sup>

#### **Medium:**

Normally oil is used for massage. Oil massage offers many benefits. Oil prevents dryness, increase suppleness and durability of the skin.<sup>5</sup> In Unani medicine oils of specific actions is used according to diseases, which are mentioned in the table below.

### Oils used in massage<sup>11, 12, 13, 14</sup>

Oils	Actions	Uses
Roghan Banafsha	Murattib (Moisturizer)	Sahar (Insomnia)
Roghan Luboob Saba	Murattib (Moisturizer)	Sahar (Insomnia)
Roghan Kaddu	Murattib (Moisturizer)	Sahar (Insomnia)
Roghan Mom	Musakkin-e-Alam (Analgesic)	Wajaul Aasab (Neuralgia)
Roghan Qust	Muqawi-e-aasab (Nervine Tonic)	Falij-e-Nisfi (Hemiplegia)
Roghan Seer	Muharrik-e-Aasab (Nervine Stimulant) and Muhallil-e-Waram	Falij-e-Nisfi (Hemiplegia), Auja-e- Mafasil (Joints pain)
Roghan Surkh	Muhallil-e-Auram (Antiinflammatory)	Irqunnasa (Sciatica), Niqras (Gout), Wajaul Mafasil (Arthritis)
Roghan Babuna	Mohallil-e-Auram (Antiinflammatory)	Wajaul Mafasil (Arthritis)
Roghan Kahu	Munawwim (Hypnotic)	Sahar (Insomnia)
Roghan Khashkhash	Musakkin (Sedative)	Sahar (Insomnia)
Roghan Malkangini	Muqawwi-e-Aasab (Nervine Tonic)	Falij-e-Nisfi (Hemiplegia), Laqwa (Facial Palsy)
Roghan Haft Barg	Musakkin-e-Alam (Analgesic) and Muqawwi-e-Aasab (Nervine Tonic)	Falij-e-Nisfi (Hemiplegia), Wajaul Mafasil (Arthritis)
Roghan Chahar Barg	Muhallil-e-Auram (Antiinflammatory)	Wajaul Mafasil (Arthritis)
Roghan Azaraq	Muhallil-e-Auram (Antiinflammatory)	Wajaul Mafasil (Arthritis)
Roghan Shibbat	Muhallil-e-Auram (Antiinflammatory)	Wajaul Unuq (Neck pain)

### Indications and contraindications of massage

#### Indications<sup>3,5,9,12,15</sup>

- Sahar (Insomnia)
- Suda' (Headache)
- Wajaul Mafasil (Arthritis)
- Wajauz Zahar (Back Pain)
- Wajaul Khasra (Low Back Pain)
- Wajaul Warak (Hip Joint Pain)
- Niqras (Gout)
- Irqunnasa (Sciatica)
- Falij (Paralysis)
- Falij-e-Nisfi (Hemiplegia)
- Laqwa (Facial palsy)
- Istarkha (palsy)
- Tashannuj-e-Aaza (Muscular Spasm)
- Hadba (Kyphosis)
- Ra'sha (Tremor)
- Aa'ya (Fatigue)
- Wajaul Unuq (Neck Pain)

#### Contraindications<sup>3,5,12</sup>

- High fever
- Osteoporosis
- Acute inflammation
- Severe varicose veins
- Very hairy skin
- Skin diseases
- Open wound

### **Mechanism Action Of DAL'K**

The Effect of Dal'k is based on Tahleele Mawad (Dissolution of morbid humors), Taghzia and dispersion of Fuzlat into tissue spaces. Every diet has some Fuzlat after the process of digestion, Tabiyat acts upon this and tries to eliminate through nearest possible channel in the form of urine, baraz, sweat, sputum. After hazme uzwi a very raqeeq fuzla formed which is not eliminated completely but accumulates into Aaza-e-rakhw like joint, muscles etc. that may be the predisposing factor for so many diseases. Dal'k helps in removal of these fuzlat for promotion or restoration of health. Dal'k also increases circulation for better nutrition and function of the organ. Through Imala-e-Mawad, the morbid material is diverted from important organs like brain, heart, liver etc. to organ of lesser importance to safeguard these important organs from deleterious effects of obnoxious matters.<sup>1, 2, 4, 6</sup>

### **Scientific Reports**

A study conducted in National Institute of Unani Medicine to evaluate the efficacy of Massage with Roghan Seer in motor recovery in hemiplegia secondary to ischemic stroke. Forty patients were enrolled in this study and randomly allocated into test and control groups. Patients in the tests group were massaged (Dal'k Sulb) with Roghan Seer on paretic arms and legs for a duration of 10 minutes on alternate days for 45 days. Patients in control were massaged with white petroleum jelly in the same fashioned as in test group. There was significant improvement in the voluntary movements of lower limb ( $P<0.05$ ) and basic mobility ( $P<0.05$ ) in test group as compared to control group. There was no significant improvement in voluntary movements of upper limb in both test and control groups ( $P>0.05$ ).<sup>16</sup>

Another study conducted in NIUM on post stroke hemiplegic patients to evaluate the efficacy of medicated massage. In this study, 20 patients were massaged (Dal'k Moatadil) with Roghan Qust in the direction of lymphatic and venous drainage on vertebrae and paralyzed parts for a duration of 45 minutes on alternate days for 2 months. This study reveals the effect of massage in upper limb movement ( $P<0.01$ ).<sup>17</sup>

### **CONCLUSION**

It may be concluded that massage, as indicated by Unani physicians can be used for prophylactic, therapeutic and restorative purposes. In recent years, various studies have also claimed the efficacy of massage in various disorders. But, most of the research studies are of small scale in nature. So, more and better trial data are needed to define the clinical effectiveness of this popular ancient therapy more precisely.

## REFERENCES

1. Ibn Sina. Alqanoon Fit Tib (Urdu translation by Kanturi GH). Vol.1. New Delhi: Idara Kitabus Shifa; 2010:90-96,120-6,177-178.
2. Kabeeruddin M. Kulliyat-e-Nafeesi. New Delhi: Idara Kitabus Shifa; YNM: 161-184, 424-427,473-484.
3. Ehsanullah M. Ilaj Bit Tadbeer. New Delhi: Rabbani Printers; 2006:84-100,187-198.
4. Jurjani I. Zakheera Khwarzm Shahi (Urdu Translation by Khan HH). Vol.3. New Delhi: Idara Kitabus Shifa; 2010:114-125.
5. Sinha AG. Principles and practices of therapeutic massage.1<sup>st</sup> ed. New Delhi: Jaypee Brothers; 2001:1-7.
6. Ibne Rushd. Kitabul Kulliyat. New Delhi: CCRUM; 1980:346.
7. Majoosi AA. Kamilus Sanaa'h (Urdu Translation by Kantoori GH). Vol.1. Lucknow: Munshi Naval Kishore; 1889:232.
8. Khan AA, Ashraf SMS, Zulkifile M. Chronology of Dalak (Massage) and Riyazat (Exercise). ISHIM 2013-14;12-13(23-24-25-26):80-82.
9. Tanwir MA, Ansari AH, Aisha P, Anzar MA. Dal'k (Therapeutic massage) and their indications for musculoskeletal disorders in Unani medicine. IJAAYUSH 2013;2(1):59-70.
10. Johari H. Ancient Indian Massage. New Delhi: Munshiram Manoharlal Publishers; 2000: 49.
11. Anonymous. National Formulary of Unani Medicine. Vol.1. New Delhi: CCRUM; 1993:283.
12. Khan JA. Ilaj Bit Tadbeer. Deoband: Hira Computers; 2011:27-34.
13. Kabeeruddin M. Bayaz-e-Kabeer. Vol.2. New Delhi: Idara Kitabus Shifa; 2010:88-96.
14. Razi ABM Zakariya. Kitabul Mansoori. New Delhi: CCRUM; 1991:126-127.
15. Jamal MA, Khan MA. Kitabut Tadabeer. Indore: AFUMC; 2013:33-39,145-157.
16. Amanullah, Anwar M, Nasir AA, Sofi G, Shah AH. Efficacy of massage with Roghan seer in motor recovery in hemiplegia secondary to ischaemic stroke. IJTK2011; 10(4):731-5.
17. Zarnigar, Rahman A. Role of Dal'k (massage) and Riyazat (exercise) in the rehabilitation of patients with post stroke hemiplegia. IJTK 2012;11(4):738-44.



**AJPHR is**

- Peer-reviewed
- monthly
- Rapid publication

**Submit your next manuscript at**

**[editor@ajphr.com](mailto:editor@ajphr.com) / [editor.ajphr@gmail.com](mailto:editor.ajphr@gmail.com)**