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Review Article

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"INTEGRATIVE EVALUATION OF JAWARISH JALINOOS FOR HAIR LOSS (INTITHĀR AL SHA'R) MEDICINE AND MODERN PHYTOTHERAPY"

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ABSTRACT

Hair fall (Intithār al-Sha'r) is a complex condition influenced by multiple factors, affecting millions worldwide. Unani medicine attributes hair loss to imbalances in Ghidhā (nutrition) and disturbances in Bukhārāt- i -Dukhāniyya (essential vaporous substances), often due to chronic illnesses, poor diet, or temperamental imbalances. In contrast, modern medicine links hair fall especially Telogen Effluvium (TE) to oxidative stress, nutritional deficiencies. This article aims to bridge the gap between Unani concepts and modern biomedical science. Jawarish Jalinoos, a traditional Unani formulation with 17 herbal ingredients known for their antioxidant, anti-inflammatory, and hair-regenerating effects. Key compounds such as β-sitosterol, jatamansic acid, piperine, quercetin, and asarone function through mechanisms like VEGF up regulation, 5α-reductase inhibition, and free radical scavenging. this paper

highlights how Jawarish Jalinoos combats oxidative stress, enhances scalp circulation, modulates growth factors, and aligns with the known causes of hair fall in both Unani and modern medicine. It offers a holistic, integrative approach to managing hair loss.

KEYWORDS - Jawarish Jalinoos, Intithār al-Sha'r, Unani medicine, oxidative stress, hair loss.

INTRODUCTION

Traditional medicine systems like *Unani,* Ayurveda, and Siddha continue to play a vital role in global healthcare.[1]The *Unani* system, originally from Greece, was further developed by Arab and Persian scholars and introduced to India over a thousand years ago.[2] The term "Unani" comes from the Greek word Ionian, meaning "knowledge of the human body's states in health and disease.[3]"Unani scholars such as Akbar Arzānī, Ibn Hubal Baghdadi, and Ali Ibn Abbas al-Majūsī have identified several causes for Intithār al-Sha'r (hair fall), especially due to imbalances in Ghidhā and defective formation of Bukhārāt-i-Dukhāniyya vaporous substances essential for hair nourishment and growth. Disorders like Sū al-Qinya (Anemia), Sil (tuberculosis), and Diq (phthisis) are also linked to hair loss.[5,6,7]

In Modern medicine, meanwhile, classifies Telogen Effluvium (TE) as a non-scarring, diffuse hair shedding condition that occurs when physical or emotional stress pushes hair follicles prematurely from the growth (anagen) phase to the resting (telogen) phase. Common triggers include illness, surgery, childbirth, hormonal changes, and nutritional deficiencies.[8] A central factor in hair follicle damage is oxidative stress (OS). Oxidative stress (OS) arises when reactive oxygen species (ROS) over whelm the body's natural antioxidant defenses. This imbalance causes lipid peroxidation, protein damage, and DNA fragmentation, which impair hair follicle cycling. Under normal conditions, enzymes like superoxide dismutase (SOD) maintain balance, but excessive ROS disrupt hair follicle cell function and reduce dermal papilla activity.[9] Modern medicine increasingly recognizes antioxidants for preventing oxidative damage with fewer side effects.

In Unani medicine, Jawarish Jalinoos is a traditional formulation used to restore balance and support hair health. It contains several herbs with well-documented antioxidant, anti-inflammatory, and hair growth-promoting actions. Jawarish Jalinoos is a formulation that is used in the Unani system of medicine and used for the treatment of so many diseases for centuries with a great reputation. [2] Jawarish Jalinoos was named after the famous philosopher-physician Jalinoos (Galen), Physician of Yunan (Greece).[4]Jawarish Jalinoos is

a classical semisolid Unani formulation having Muqawwi-e-Aam (general tonic), It is also effective in headaches, excessive micturition, and keeps hair black.[5,6,7] According to Classical Unani Books, the original preparation of Jawarish Jalinoos contained eighteen ingredients. However, there are some differences in the number of constituents in the compound in different Qarabadeen. The phytoconstituents identified in its constituent drugs may contribute to hair health through antioxidant, anti-inflammatory, hormonal, nutritional, and hair-cycle-modulating mechanisms. β-Sitosterol may support hair growth by facilitating the transition of hair follicles from the telogen to anagen phase and by reducing androgen-mediated follicular damage. Experimental evidence has also demonstrated the potential of β-sitosterol to promote anagen entry and hair growth.[10] Gallic acid may support hair health through its antioxidant and antimicrobial properties. It may reduce reactive oxygen species (ROS)-induced oxidative stress and inflammation around hair follicles, thereby helping protect follicular cells from oxidative damage and maintaining a favorable environment for hair growth.[11]

Nardostachys jatamansi (Jatamansi) rhizome contains bioactive constituents such as jatamansic acid and nardin, and its extracts have demonstrated hair-growth-promoting activity in experimental models. In addition to its potential follicular effects, Jatamansi has been reported to possess sedative, antistress, and sleep-promoting properties, which may provide indirect supportive relevance in stress-associated hair disorders.[12] Oral β-carotene may contribute indirectly to normal hair follicle function by serving as a regulated precursor of vitamin A, thereby supporting epithelial integrity and normal hair-cycle homeostasis.[13] Dietary lignans, following oral intake and microbial conversion into enterolignans, may act primarily as antioxidants by reducing oxidative stress and lipid peroxidation. This may help protect hair follicular cells from ROS-mediated damage and support normal hair growth, although their effects may be dose dependent.[14]

Zingiber officinale contains several bioactive constituents, including linalool. Linalool has been reported to show no significant estrogenic or androgenic adverse activity following oral administration, suggesting possible supportive relevance in hormone-associated hair disorders.[15] Orally administered saponins may contribute indirectly to hair health through antioxidant and anti-inflammatory effects, thereby reducing oxidative and inflammatory stress associated with hair follicle dysfunction.[16] Similarly, oral limonene may potentially support hair follicular health by reducing oxidative stress and inflammation through its antioxidant and anti-inflammatory properties.[17] Linoleic acid may support hair and scalp health by maintaining lipid barrier function, modulating inflammatory responses, and

preserving follicular membrane integrity, thereby potentially reducing dryness-related hair damage and supporting normal hair growth.[18]

Collectively, these orally relevant phytoconstituents may exert complementary effects through modulation of oxidative stress, inflammation, follicular integrity, hormonal pathways, and hair-cycle homeostasis. These mechanisms may contribute to the overall therapeutic potential of the compound in hair-loss conditions; however, the evidence for individual constituents is largely experimental or indirect, and their specific contribution to the clinical effect of the complete Unani compound requires further investigation.

Table – 1 INGREDIENT OF JAWARIS JALINOOS.

S.NO.	DRUG NAME	Botanical name	*MIZAJ*	PART USED	DOSE
1.	Mastagi	Pistacia lentiscus[19]	Haar-Yabis[20]	Resin[19]	3-5 gm.[20]
2.	Sumbul- Teeb	Nardostachys jatamansi DC[19]	Harr -Yabis[20]	Rhizome[19]	3 5gm[21]
3.	Heel khurd	Elettaria cardamomum (L) [19]	Haar-Yabis[20]	Fruits [19]	10gm[21]
4.	Saleekha	Cinnamomum cassia Blume[19]	Haar-Yabis[20]	Stem Bark[19]	3-5gm[20]
5.	Darchini	Cinnamomum zeylanicum Blume. [19]	Haar-Yabis[20]	Inner stem[19]	7-10gm[22]
6.	Khulanjan	Alpinia galanga (L.) [19]	Haar -Yabis[20]	Rhizome[19]	3-5gm[22]
7.	Qaranfal	Syzygium aromaticum. [19]	Haar -Yabis[20]	Flower bud [19]	3-5gm[22]
8.	Sad Kufi	Cyperus rotundus [19]	Haar -Yabis[20]	Rhizome[19]	3-5gm[23]
9.	Zanjabeel	Zingiber officinale[19]	Haar -Yabis[20]	Rhizome[19]	2-4gm[22]
10.	Filfil Daraz	Piper longum Linn. [19]	Haar -Yabis[20]	Fruit[19]	2-5gm[22]
11.	Filfil Siyah	Piper nigrum Linn[19]	Haar-Yabis[20]	Fruit[19]	4-9gm[22]
12.	Qust Shirin	Saussurea lappa Clarke[19]	Haar-Yabis[20]	Root[19]	8gm[21]
13.	Oode Balsan	Commiphora gileadensis[19]	Haar-Yabis[20]	Wood[19]	2gm[19]
14	Asaroon	Asarum europaeum L[19]	Haar-Yabis[20]	Rhizome[19]	13gm[21]
15	Habbul Aas	Myrtus communis Linn[19]	Murqabbul Quwa[20]	Fruit[19]	5-7gm[20]
16	Chiraita Shirin	Swertia chirata Ham. [19]	Haar-Yabis[20]	Whole plant [19]	3-4gm[20]
17	Zafran	Crocus sativus Linn[19]	Haar-Yabis[21]	Style and stigma[19]	2-4gm[22]

Table-2 THE EFFECT OF PHYTOCHEMICALS ON HAIR GROWTH.

Ingredients	Scientific Studies	Phytochemical	Direct/ Indirect Action	Type of Study
Mastagi (*Pistacia lentiscus)*	1. Antioxidant, 2. Anti-inflammatory	1.β sitosterol[10]	1.Indirect	1.In Vivo
	1. Antioxidant, 2. Antifungal	2.Gallic acids [11]	2.Indirect	2.In Vitro
Sumbul-Teeb (*Nardostachys Jatamansi)*	1.Antioxidant	1.Jatamansic acid[12]	1.Indirect	1.In Vivo
	1. Antioxidant, 2. Anti-inflammatory	2.β sitosterol[10]	2.Indirect	2.In Vivo
Heel khurud (*Elittaria cardamomum)*	1.Antioxidant,	Beta Carotene [13]	1.Indirect	1.In Vitro
Saleekha (*Cinnamomum cassia)*	1.Antioxidant,	Lignans[14]	Indirect	
Darchini (*Cinnamomum Zeylanicum)*	1. Antioxidant, 2. Anti-inflammatory	Linalool.[15]	Indirect	InVitro In Vivo
Khulanjan (*Alpinia galanga)*	1. Antioxidant 2. ,Anti inflammatory	Saponins[16],	Indirect	In Vivo In Vitro
Qaranfal (*Syzygium aromaticum)*	1. Antioxidant, 2. Antifungal 3. Antimicrobial	2.Gallic acids [12]	2.Indirect	2.In Vitro
Sad Kufi (*Cyperus rotunds)*	1. Antioxidant, 2. Anti inflammatory	saponins[16],	Indirect	In Vivo In Vitro
Zanjabeel (*Zingiber officinalis)*	1. Antioxidant, 2. Anti-inflammatory	Linalool.[15]	Indirect	InVitro In Vivo
Filfil-Daraz(*Piper longum)*	1.Antioxidant,	Lignans[14]	Indirect	
Filfil-Siyah (*Piper nigrum)*	1. Antioxidant, 2. Anti-inflammatory	Linalool.[15]	Indirect	InVitro In Vivo
	1. Antioxidant, 2. Anti-inflammatory	Limonen[17]	1.Indirect	In Vivo
Qust-Shirin (*Susseria lappa)*	1. Antioxidant, 2. Anti inflammatory	saponins[16],	Indirect	In Vivo In Vitro
Ood- Balsan (*Commiphora opobalsamum)*	1. Antioxidant, 2. Anti-inflammatory	Limonen[17]	1.Indirect	In Vivo
Asaroon (*Asarum europaeum)*	1.Antioxidant,	Lignans[14]	Indirect	
Habbul Aas (*Myrtus communis)*	1.Anti-inflammatory, 2.Antioxidant,	1.Linolenic acid [18]	1.Indirect	
Chiraita Shirin(*Swertia chirayita)*	1.Antioxidant,	Lignans[14]	Indirect	
Zafran (*Crocus staivus)*	1.Antioxidant,	Beta Carotene [13]	1.Indirect	1.In Vitro

DISCUSSION

Hair fall is a multifactorial condition associated with systemic disorders, nutritional deficiencies, stress, inflammation, and oxidative stress. The Unani concept of Intithār al-

Sha'r emphasizes the role of inadequate Ghidhā and disturbances in Bukhārāt-i-Dukhāniyya, while modern medicine recognizes nutritional and systemic factors along with oxidative stress as important contributors to hair shedding. Thus, both perspectives highlight the importance of systemic factors in maintaining normal hair growth.

The present review suggests that Jawarish Jalinoos contains several phytoconstituents with potentially beneficial activities relevant to hair health. β-Sitosterol and jatamansic acid have demonstrated hair-growth-promoting effects in experimental studies, while gallic acid, lignans, linalool, saponins, limonene, and linoleic acid possess antioxidant and anti-inflammatory properties. These constituents may collectively help reduce oxidative damage, inflammation, and follicular stress and support normal hair-cycle homeostasis. Jatamansi may additionally provide indirect supportive effects through its reported antistress properties.

The overall activity of Jawarish Jalinoos may therefore be attributed to the complementary actions of multiple phytoconstituents rather than a single compound. However, most available evidence is based on individual phytochemicals, plant extracts, or experimental models. Their bioavailability and contribution to the therapeutic effect of the complete formulation remain uncertain. Further pharmacological and clinical studies are therefore required to establish the efficacy and precise mechanisms of Jawarish Jalinoos in hair-loss disorders.

CONCLUSION

Jawarish Jalinoos contains diverse phytoconstituents with antioxidant, anti-inflammatory, and potential hair-growth-supporting activities. These mechanisms provide a plausible scientific correlation between the Unani concept of Intithār al-Sha'r and modern understanding of hair loss. Nevertheless, the current evidence is predominantly experimental or indirect, and well-designed clinical studies are needed to confirm its therapeutic efficacy and mechanism of action in hair-loss conditions.

REFRENCES

1. Meena R, Mageswari S, Ramasamy D, Sri PM, Ahmed J, Arfin S, *et al*. Development of SOP's and pharmacopoeial standards for Jawarish-e-Jalinoos. J Pharm Res 2013;7:734-40.
2. CCRUM. National Formulary of Unani Medicine. Part II. Vol 1. New Delhi: Central Council for Research in Unani Medicine, Ministry of Health and Family Welfare, Government of India; 2007. p. 191.

3. Kalam MA, Ahmad G, Shahzad A, Maqbul SAA, Akhtar MS. Therapeutic potential of rhizomatous plants used in Unani medicare system. In: Natural Bioactive Compounds. Berlin, Germany: Springer; 2019. p. 409-64.
4. Aleem, Mohd & Danish, Mohammad & Jamaldeen, Nairoza. (2022). Jawarish Jalinoos: A polyherbal unani formulation for gastrointestinal disorders. International Journal of Green Pharmacy. 16. 1-13. 10.22377/ijgp.v16i1.3210.
5. Majoosi AHABA. Kamil-ul-Sana'a (Urdu translation by Kantoori GH). Vol 2. New Delhi: Idara Kitabul Shifa; 2010:110-112, 255
6. Baghdadi IH. Al Mukhtaraat Fi al-Tibb (Urdu translation by CCRUM). Vol 4. New Delhi: CCRUM, Ministry of Health and Family Welfare, Govt. of India; 2007: 99-100, 106
7. Kabeeruddin M. Moalijat Shara Asbab. New Delhi: Idara Kitabul Shifa; 2009:353-355
8. Grover C, Khurana A: Telogen efflfluvium. Indian | Dermatol Venereol Leprol. 2013, 79:591-603. 10.4103/0378-6323.116731.
9. Du F, Li J, Zhang S, Zeng X, Nie J, Li Z. Oxidative stress in hair follicle development and hair growth: Signalling pathways, intervening mechanisms and potential of natural antioxidants. J Cell Mol Med. 2024 Jun;28(12):e18486. doi: 10.1111/jcmm.18486. PMID: 38923380; PMCID: PMC11196958
10. Prabahar K, Uthumansha U, Elsherbiny N, Qushawy M. Enhanced Skin Permeation and Controlled Release of β-Sitosterol Using Cubosomes Encrusted with Dissolving Microneedles for the Management of Alopecia. Pharmaceuticals (Basel). 2023 Apr 8;16(4):563. doi: 10.3390/ph16040563. PMID: 37111320; PMCID: PMC10142597.
11. Velho P, Rebelo CS, Macedo EA. Extraction of Gallic Acid and Ferulic Acid for Application in Hair Supplements. Molecules. 2023 Mar 4;28(5):2369. doi: 10.3390/molecules28052369. PMID: 36903614; PMCID: PMC10005415.
12. Panara K, Nariya M, Karra N. Central nervous system depressant activity of Jatamansi (Nardostachys jatamansi DC.) rhizome. Ayu. 2020 Oct-Dec;41(4):250-254. doi: 10.4103/ayu.AYU_251_20. Epub 2022 Jun 3. PMID: 35813358; PMCID: PMC9261992.
13. VanBuren CA, Everts HB. Vitamin A in Skin and Hair: An Update. Nutrients. 2022 Jul 19;14(14):2952. doi: 10.3390/nu14142952. PMID: 35889909; PMCID: PMC9324272.
14. Li J, Ma X, Luo L, Tang D, Zhang L. The what and who of dietary lignans in human health: special focus on prooxidant and antioxidant effects. Trends in Food Science & Technology. 2020;106:382-390. doi:10.1016/j.tifs.2020.10.015.

15. Hareng L, Kolle SN, Gomes C, Schneider S, Wahl M. Critical assessment of the endocrine potential of Linalool and Linalyl acetate: proactive testing strategy assessing estrogenic and androgenic activity of Lavender oil main components. Arch Toxicol. 2024 Jan;98(1):347-361. doi: 10.1007/s00204-023-03623-z. Epub 2023 Oct 31. PMID: 37906319; PMCID: PMC10761525.
16. Podolak I, Galanty A, Sobolewska D. Perspectives on saponins: food functionality and applications. Int J Mol Sci. 2023;24(17):13538. doi:10.3390/ijms241713538.
17. Vieira AJ, Beserra FP, Souza MC, Totti BM, Rozza AL. Limonene: Aroma of innovation in health and disease. Chem Biol Interact. 2018;283:97–106. doi:10.1016/j.cbi.2018.02.007.
18. Wang X, Jia Y, He H. The Role of Linoleic Acid in Skin and Hair Health: A Review. Int J Mol Sci. 2024 Dec 30;26(1):246. doi: 10.3390/ijms26010246. PMID: 39796110; PMCID: PMC11719646.
19. Nadkarni AK. Indian Materia Medica. 3rd rev. and enl. ed. Vols. 1–2. Mumbai: Popular Prakashan Pvt. Ltd.; 1976. Reprinted 2007. ISBN: 81-7154-142-9.
20. Ghani N. Khazain al-Advia Vol. 1 and 4. Khazainul Advia. New Delhi: Idara Kitab al Shifa; 2011. p. 1-1260.17. Kabeeruddin.
21. Khan Mohammed Azam,Muhit-I- Azam,Vol.1.Central Council for Research in Unani Medicine (CCRUM),Instituional Area, Jankpuri,New Dehli-110058(India), 2012
22. Khan Mohammed Azam,Muhit-I- Azam,Vol.2.Central Council for Research in Unani Medicine (CCRUM),Instituional Area, Jankpuri,New Dehli-110058(India), 2013
23. Khan Mohammed Azam,Muhit-I- Azam,Vol.3.Central Council for Research in Unani Medicine (CCRUM),Instituional Area, Jankpuri,New Dehli-110058(India), 2014