

Itrifal Shahtara: A Broad-Spectrum Unani Formulation: Systematic Review

Dr. Afeefa Kazmi¹, Dr. Md. Razi Ahmad², Dr. Md. Najibur Rahman², Dr. Md. Tanwir Alam^{*3}, Dr. Shabana Noor⁴, Dr. Mariyam Jameel⁵, Dr. Mohammad Mashkur Ahmad⁵, Dr. Ghazala Shamsi⁵

¹PG Scholar

²Associate Professor, Dept. of Moalajat

³Associate Professor cum Hod- Tahaffuzi wa Smaji Tib, 511-PG Block, Govt. Tibbi College & Hospital, Patna

⁴ PG Scholar, Dept. of Mahiyatul Amraz

⁵ PG Scholar, Dept. of Tahaffuzi wa Samaji Tib, Govt. Tibbi College & Hospital, Patna

DOI: <https://doi.org/10.36347/sasjm.2025.v1i06.011>

| Received: 13.05.2025 | Accepted: 18.06.2025 | Published: 24.06.2025

*Corresponding author: Dr. Md. Tanwir Alam

Associate Professor cum Hod- Tahaffuzi wa Smaji Tib, 511-PG Block, Govt. Tibbi College & Hospital, Patna

Abstract

Review Article

Itrifal Shahtara, a classical Unani compound formulation, is a semi-solid preparation renowned for its blood-purifying properties, primarily used in managing dermatological and systemic inflammatory conditions. Comprising key ingredients such as *Shahtara* (*Fumaria officinalis*), *Triphala* (*Embllica officinalis*, *Terminalia chebula* and *Terminalia bellirica*). It exemplifies the Unani principle of synergistic herbal therapy to address humoral imbalances. This review explores the historical origins, composition, preparation methods, and therapeutic applications of *Itrifal Shahtara*, with a focus on its efficacy in treating acne, eczema, psoriasis, and systemic disorders like constipation, syphilis, and hepatic conditions. Clinical studies and case reports suggest its anti-inflammatory, antioxidant, and detoxifying effects, though variations in formulation and limited research pose challenges for standardization, validation and evidence-based use. The preparation's Greco-Arabic roots, centered on the *Triphala* trio, and its contemporary relevance in integrative medicine are discussed, alongside limitations. Recommendations include conducting robust clinical trials, standardizing formulations, and investigating phytochemical mechanisms to enhance its evidence-based application in managing chronic diseases.

Keywords: *Itrifal Shahtara*, Unani Medicine, Herbal Medicine, Dermatological Disorders, Complementary and Alternative Medicine, *Shahtara*.

Copyright © 2025 The Author(s): This is an open-access article distributed under the terms of the Creative Commons Attribution **4.0 International License (CC BY-NC 4.0)** which permits unrestricted use, distribution, and reproduction in any medium for non-commercial use provided the original author and source are credited.

INTRODUCTION

Chronic diseases often require long-term management, leading to challenges like patient non-adherence, adverse effects of prolonged pharmaceutical use, and reduced quality of life. In response, many people are turning to Complementary and Alternative Medicine, especially herbal remedies, for more holistic care. Despite the dominance of allopathic medicine, Traditional Medicine remains integral to healthcare systems worldwide—used by 40%–50% of people in developed countries and 60%–90% in low- and middle-income nations. According to the World Health Organization (WHO), nearly 80% of the global population relies on traditional and herbal medicine for primary healthcare, reflecting a growing demand for safer, more sustainable alternatives [1, 2].

Herbal remedies have developed through regional traditions worldwide, with notable systems in Asia, Africa, Europe, and the Americas. Skin disorders, in particular, respond well to herbal treatments, which are gaining acceptance among both patients and practitioners. In India and China, traditional therapies are increasingly being validated by modern science. The Unani system of medicine, a major traditional medicine framework, continues to offer clinically relevant compound formulations with enduring therapeutic value [3].

In Unani medicine, drug dosages forms involves both single (*Mufrad*) and compound formulations (*Murakkab*), designed to enhance efficacy and reduce side effects. *Itrifal* is a key example, known for managing chronic and systemic disorders. Each ingredient in *Itrifal* i.e *Amla*, *Halela*, and *Balela*, has

Citation: Afeefa Kazmi, Md. Razi Ahmad, Md. Najibur Rahman, Md. Tanwir Alam, Shabana Noor, Mariyam Jameel, Mohammad Mashkur Ahmad, Ghazala Shamsi. Itrifal Shahtara: A Broad-Spectrum Unani Formulation: Systemic Review. SAS J Med, 2025 May 11(6): 655-660.

recognized individual therapeutic value. This reflects the Unani principle of combining individual and synergistic benefits. These foundational ingredients contribute to formulations aimed at regulating digestion, purifying blood, and improving neurological and systemic health [4]. While several *Itrifal* variants exist, each tailored to specific conditions; *Itrifal Shahtara* is particularly notable for its targeted role in managing dermatological and humoral imbalances [5]. Traditionally described as a *Musaffi Dam* (blood purifier), and *Mulayyin* (mild laxative), it is frequently prescribed for conditions such as acne vulgaris, eczema, headaches, and blood-borne disorders. Comprising multiple herbal ingredients with synergistic properties, it aims to detoxify the blood, regulate digestion, and correct humoral imbalances—central tenets of Unani pathology [6].

Given its long-standing clinical use and the increasing global interest in evidence-based herbal medicine, there is a pressing need to revisit *Itrifal Shahtara* through a modern scientific lens. This review paper aims to provide a comprehensive account of this compound, examining its historical origins, actions, and therapeutic applications, particularly in the context of dermatological and systemic health. Furthermore, it seeks to explore the formulation's contemporary relevance within integrative medicine and its potential role in addressing the growing burden of chronic inflammatory diseases.

LITERATURE REVIEW

Itrifal Shahtara is a classical Unani “semi-solid compound formulation”, named to reflect both its core structure and primary therapeutic ingredient. The name comprises two components [7]:

1. *Itrifal*, referring to a class of compound preparations, and
2. *Shahtara*, the principal herb in the formulation.

Itrifal:

From a pharmaceutical standpoint, *Itrifal* is prepared in a manner comparable to *Majoon*, another classical semi-solid dosage form in Unani medicine. However, the two differ in key aspects that influence both their formulation and therapeutic properties [4]:

- **Consistency:** *Itrifal* exhibits a softer, more pliable consistency than *Majoon*, making it easier to consume and digest.
- **Texture of ingredients:** The powdered single drugs used in *Itrifal* are generally coarser than those employed in *Majoon*. This coarser texture can impact the release profile of active constituents and influence the overall palatability of the final preparation.

A traditional method of preparing *Itrifal* involves powdering the three fruits—*Halela*, *Balela*, and *Amla* followed by sautéing them in *Roghan Badaam* (almond oil) or *Ghee* (clarified butter). This technique not only enhances the texture and cohesion of the

formulation but also improves its shelf-life and helps preserve the potency of its active ingredients [4].

When properly prepared and stored under suitable conditions, *Itrifal* can maintain its therapeutic efficacy for up to two years. Nevertheless, classical Unani literature advises its use within two months of preparation, as prolonged consumption beyond this period is believed to cause *za'f-e-meda* (gastric debility) and impaired digestive function [8]. It is a compound formulation traditionally centered on the therapeutic synergy of the *itrifal* trio. These fruits are celebrated for their detoxifying, antioxidant, and rejuvenating properties and form both the pharmacological and symbolic core of the formulation. Their presence not only underpins the efficacy of *Itrifal* but also contributes to its nomenclature [6].

While widely believed to have originated in the Indian subcontinent, linguistic and historical evidence points to a Greco-Arabic lineage. The term *Itrifal* is thought to be derived from the Greek prefix *tri-* meaning “three,” highlighting its foundational three-fruit composition. The invention of this formulation is attributed to the distinguished Unani physician *Indro Makhas*, who is recognized as a pioneer in the development of compound medicines within the Unani tradition [4-8].

Itrifal eventually secured a prominent position in the Unani pharmacopeia due to its broad therapeutic applications, particularly in ailments of the digestive, nervous, and excretory systems. Despite its effectiveness and stability, classical sources consistently caution against extended use beyond two months, emphasizing the importance of temperance to prevent undesirable gastrointestinal effects [4-8].

Shahtara:

The second component, “*Shahtara*,” highlights the prominence of *Shahtara* in the formulation. This herb is highly valued in Unani medicine for its blood-purifying, anti-inflammatory, and detoxifying actions, making it especially relevant in the treatment of chronic skin conditions such as acne, eczema, and psoriasis [9-10]. The inclusion of *Shahtara* as the titular herb underscores its therapeutic significance in this formulation. Together, the constituents of *Itrifal Shahtara* create a potent compound designed to cleanse the system, particularly the blood and digestive tract, thereby supporting the management of dermatological and systemic inflammatory conditions [6].

Constituents [11]: As per National Formulary of Unani Medicine (NFUM)

Shahtara : 50gm

Poste Halela Zard: 50gm

Poste Halela Kabli: 30gm

Poste Balela: 20gm

Sana (Cassia augustifolia): 10gm

Gule Surkh (*Rosa damascene*): 5gmMaweez Munaqqa (*Vitis vinifera*): 350gm

Table no. 01

Comparison of <i>Itrifal Shahtara</i> by ingredients & their quantity (gm/ml)									
Unani Name	Scientific/Botanical Name	BK* [12]	NFUM* [11]	BKh* [13]	MM* [14]	KM* [7]	QNG* [15]	QH/M* [16,17]	UAM* [5]
Shahtara	<i>Fumaria officinalis</i>	175	50	169.62	163.24	50	34.98	250	300
Post Halela Zard	<i>Terminalia chebula</i>	233	50	135.75	139.92	40	—	350	240
Post Halela Kabli	<i>Terminalia chebula</i>	175	30	105	—	40	—	—	180
Halela Siyah	<i>Terminalia chebula</i>	58	—	—	—	—	—	—	—
Post Balela	<i>Terminalia bellirica</i>	—	20.0	66.25	—	20	46.64	100	120
Amla	<i>Emblica officinalis</i>	58	—	66.25	—	20	23.32	100	120
Chob Kewda	<i>Pandanus odorifer</i>	11.6	—	—	—	—	—	—	—
Rewand Chini	<i>Rheum emodi</i>	11.6	—	—	—	—	23.32	—	—
Roghan Badam Sheerin	<i>Prunus amygdalus</i> oil	58 ml	—	—	—	—	—	—	—
Maweez/ Kishmish	<i>Vitis vinifera</i>	1560	350	—	—	500	233.3	350	2000
Sana	<i>Cassia angustifolia</i>	—	10	35.62	—	12	23.32	50	60
Gule Surkh	<i>Rosa damascena</i>	—	5	21.87	23.32	8	—	30	36
Shahad	Honey	—	—	—	As required	—	—	—	—
Saunf	<i>Foeniculum vulgare</i>	—	—	—	—	—	23.32	—	—
Gaozaban	<i>Borago officinalis</i>	—	—	—	—	—	64.13	—	—
Mastagi	<i>Pistacia lentiscus</i>	—	—	—	—	—	64.13	—	—
Badranjboya	<i>Melissa officinalis</i>	—	—	—	—	—	11.66	—	—
Ghee	Clarified butter	—	—	—	—	—	—	120 ml	—
Shakkar Safed	Refined sugar	—	—	—	—	—	—	2650	—
Sate Lemu	Lemon juice	—	—	—	—	—	—	ml	—

*BK- Bayaze Kabir, BKh- Bayaze Khas, MM- Makhzanul Murakkabat, KM- Kitabul Murakkabat, QNG- Qarabadin Najmul Ghani, QH/M- Qarabadin Hamdard /Majeedi, UAM- Unani Advia Murakkaba

Variation in Composition and Method of Preparation [15]

It is noteworthy that the composition and method of preparation of *Itrifal Shahtara* are not entirely uniform across Unani classical literature. Various authoritative texts present slight variations in the list of ingredients, their quantities, and the methods of preparation. These differences reflect the regional practices, evolving clinical experiences, and physician-specific preferences that are inherent to the Unani medical tradition.

While the core ingredients—particularly *Halela*, *Balela*, *Amla* and *Shahtara*—remain consistent across most classical references, several adjunct components may vary, depending on the source text. Additives such as *Gule Surkh*, *Rewand Chini*, *Kewda*, *Asal*, and *Roghane Badam* are commonly mentioned in various formulations and reflect physician-specific preferences or regional therapeutic practices.

In *Qarabadeen Najmul Ghani*, the formulation of *Itrifal Shahtara* includes, in addition to the foundational ingredients—*Poste Halela Zard*, *Poste Halela Kabli*, *Amla*, *Barge Shahtara*, *Barge Sana Makki*, *Rewand Chini*, and *Maweez Munaqqa* - the following herbal components [15]:

- *Badranjboya* (*Melissa officinalis*)

- *Barge Gaozaban* (*Borago officinalis* leaves)
- *Saunf* (*Foeniculum vulgare* / Fennel seeds)
- *Mastagi* (*Pistacia lentiscus*)

Furthermore, some versions of this formulation incorporate additional ingredients such as *Aftimoon* (*Cuscuta reflexa*), *Sandal* (*Santalum album*), *Kishneez* (*Coriandrum sativum*), and *Chiraita* (*Swertia chirata*). Notably, the text describes multiple formulations of *Itrifal Shahtara*, with variations or different combinations, tailored to the patient's condition and the specific disease. These additions and subtractions of ingredients reflect the Unani practice of customizing formulations to enhance detoxifying and blood-purifying properties, thereby broadening the therapeutic scope [15].

Method of Preparation

Begin by finely pulverizing all the medicinal ingredients using a pestle and mortar or a mechanical grinder to ensure a consistent and homogenous powder. This powder should then be lightly roasted in either *Ghee* or almond oil, a step that is traditionally believed to enhance the therapeutic efficacy and stability of the formulation. Separately, thoroughly wash the *Maweez Munaqqa* (raisins) and cook them in water until they become soft. Once softened, remove the seeds and continue boiling the raisins in water. After sufficient

boiling, allow the mixture to cool slightly and strain it to obtain semi-thick syrup (*gewam*) with approximately 75% consistency. When the *gewam* has cooled to a lukewarm temperature, gradually incorporate the roasted powdered ingredients while stirring continuously. This ensures a smooth, lump-free, and uniform blend. Transfer the resulting mixture into a clean container and mix thoroughly to achieve homogeneity. Finally, dispense the prepared *Itrifal* into small, airtight containers for storage and subsequent use [12, 16,18].

Active ingredients [7]: *Shahtara*

Main Action [11,18]: Blood purification

Therapeutic Uses:

Itrifal Shahtara is primarily valued in Unani medicine for its potent blood-purifying properties and its efficacy in treating a wide range of skin disorders, including scabies, itching, dryness, and early-stage leprosy. It is also considered beneficial in preventing the progression of conditions such as vitiligo [18]. By purifying the blood, it addresses the root cause of many chronic dermal and systemic conditions [5,18]. The formulation is traditionally used to manage symptoms such as dizziness and headache, particularly those associated with blood-borne infections like syphilis [5,7]. Its cooling and detoxifying effects help reduce heat and inflammation in the cranial region [6].

- It shows therapeutic benefit in cases of constipation and piles/hemorrhoids, likely due to its mild laxative and anti-inflammatory properties. Additionally, it helps in reducing splenic and hepatic enlargement, and alleviates

hepatalgia (pain in the liver), suggesting hepatoprotective action [19, 15].

- It is also reported to provide relief from palpitations, which may be linked to its nervine and demulcent effects [15].
- The medicine is known to aid in the management of syphilis, particularly by promoting the healing of ulcers and preventing associated complications such as hair loss and neurological symptoms [5,20].
- Taken together, the wide-ranging therapeutic potential of *Itrifal Shahtara* highlights its central role in managing diseases linked to blood toxicity and systemic inflammation. Its multi-system benefits reflect the holistic philosophy of Unani medicine, where purification, regulation, and balance of humors - especially the blood - are foundational to health restoration [5,20].

Dosage:

- 5 to 10 grams at bedtime, to be taken with fresh water or *Arqe Choob Chini* [16,18].
- 7 to 12 grams once daily, either in the morning on an empty stomach or at bedtime, taken with fresh water or *Arqe Gaozaban*, as advised by a physician [12].
- 7 to 14 grams with *Joshandah Unnab* [13].
- 10-17 grams [15].

RESEARCH PUBLICATION

Here are some research studies that have investigated the therapeutic potential of *Itrifal Shahtara* across various health conditions.

Table No. 02: Researches on *Itrifal Shahtara*

S. No	Title	Type	Disease / Condition	Findings
1	"A preliminary study on the efficacy and safety of two unani pharmacopoeial formulations (itrifalshāhtarah and sharbat-i-'unnāb) in adolescent and young adults cases of acne vulgaris (busūrlabaniyyah): single armed open labelled clinical study" [21]	Single Armed Open Labelled Clinical Trial	Acne	Effective, safe, well-tolerated treatment.
2	"A Clinical Study on Itrifal Shahatra and Sharbat Unnab to Evaluate the Mechanisms of Action and Unani Principles in Buthūr (Acne)" [10]			Effective
3	"Botanical and physicochemical standardization of compound formulation – itrifal shahatra" [22]	Experimental study	Standardization	-
4	"Effect of Unani medicines in Eczema: A case report" [23]	Case Report	Eczema	Effective
5	"Management of Recurrent Tinea Corporis by Unani Medicine: A Report on Case Studies" [24]	Case Series	Tinea Corporis	Effective
6	"Effectiveness of oral and topical unani formulations in taqashshur al-jild (psoriasis): a case study" [25]	Case Study	Psoriasis	Effective and safe
7	"Therapeutic efficacy of Itrifal e shahatra, Irsal e Alaq (Hirudo therapy) and a herbal paste in the management of Qurooh-e-Aseerat-ul-Indamaal (Non- healing ulcer) - A Case study" [26]	Case Study	Non- healing ulcer	Effective
8	"A Novel Treatment for Scabies with Herbal Formulation: A Clinical Safety Assessment Study" [27]	Single Armed Open Labelled Clinical Trial	Scabies	Effective and safe

DISCUSSION AND CONCLUSION

Itrifal Shahtara, a classical Unani compound formulation, exemplifies the holistic and synergistic approach of Unani medicine, leveraging the therapeutic properties of its core ingredients - *Shahtara*, *Halela*, *Balela*, and *Amla* - alongside adjuncts like raisins, and rose petals. The formulation's primary action as a blood purifier and mild laxative aligns with Unani principles of addressing humoral imbalances, particularly those involving blood toxicity, to treat chronic dermatological and systemic conditions.

The comparative table (Table.01) presents a comparative analysis of the composition of *Itrifal Shahtara* across various Unani texts, revealing notable differences in both the selection and quantity of ingredients. Core constituents such as *Shahtara*, *Halela*, *Balela*, and *Amla* are consistently included across most formulations; however, their quantities vary considerably, reflecting regional preferences, therapeutic objectives, and textual interpretations. The presence of unique ingredients in certain formulations - such as *Choob Kewda*, *Shahad*, and *Shakkar Safed* suggests efforts to enhance palatability, therapeutic efficacy, or preservation. Conversely, the absence of specific ingredients like *Post Balela* or *Gule Surkh* in some texts, along with the inclusion of rare components such as *Gaozaban* and *Mastagi* points to the inherent flexibility of the formulation. These compositional discrepancies highlight the challenges involved in standardizing *Itrifal Shahtara* for consistent clinical application and emphasize the need for further pharmacological and clinical research to optimize its formulation.

The preparation method, involving roasting powders in almond oil or *ghee* and blending them with raisin-based *gewam*, enhances stability and palatability while preserving active constituents. The caution against prolonged use (beyond two months) due to risks of *za'f-e-meda* reflects Unani's emphasis on temperance and individualized treatment, a principle that aligns with allopathic personalized medicine.

The dosage varies from 5–17gm, reflecting Unani's patient-specific approach. Recommendations include 5–10gm at bedtime with water or *Arqe Choob Chini*, 7–12gm daily (morning or bedtime) with water or *Arqe Gaozaban*, or 10–17gm without specific timing. These differences likely cater to individual needs or disease severity, with vehicles like *Arqe Choob Chini* enhancing detoxification. However, the lack of standardization hinders clinical consistency, necessitating research for optimal dosing.

The studies cited (Table No.02) provide preliminary evidence of *Itrifal Shahtara*'s therapeutic potential, primarily for dermatological conditions, with some extension to systemic issues. The first study, shows that *Itrifal Shahtara*, combined with *Sharbate Unnab*, is effective, safe, and well-tolerated for acne vulgaris in

adolescents and young adults, suggesting its anti-inflammatory and detoxifying benefits. Similarly, the second study, confirms its efficacy in acne, but despite its title implying an exploration of mechanisms of action, it fails to clearly articulate the pharmacological pathways, limiting our understanding of how it works within a modern biomedical framework. The third study, a lab experiment, focuses on botanical and physicochemical standardization, highlighting the need for consistent phytochemical profiles to ensure reliability. Case-based studies (fourth, fifth, sixth, and seventh) demonstrate *Itrifal Shahtara*'s effectiveness in eczema, tinea corporis, psoriasis, and non-healing ulcers, with the sixth and seventh also noting safety. The eighth study supports its efficacy and safety in scabies. However, the predominance of small-scale, non-randomized studies restricts our ability to generalize findings, underscoring the need for rigorous “randomized controlled trials (RCT)” to validate *Itrifal Shahtara*'s efficacy and safety.

Despite its historical and clinical significance, the scientific validation of *Itrifal Shahtara* remains in its infancy. The studies cited are limited by small sample sizes, lack of RCTs, and reliance on case reports or single-armed designs. These gaps highlight the need for more rigorous research to establish *Itrifal Shahtara*'s efficacy, safety, and mechanisms of action in a modern biomedical context. Its potential integration into integrative medicine frameworks is promising, given the global demand for natural, low-side-effect alternatives for chronic diseases, particularly dermatological conditions.

LIMITATIONS

- **Limited Research Evidence:** The studies are mostly open-label or case reports, lacking RCT rigor, which limits definitive conclusions on efficacy and safety.
- **Formulation Variability:** Ingredient and preparation variations across classical texts hinder standardization and may impact therapeutic consistency.
- **Small Sample Sizes:** Small sample sizes limit statistical power and generalizability of the findings.
- **Lack of Mechanistic Insights:** While traditional Unani texts attribute *Itrifal Shahtara*'s effects to blood purification and humoral balance, there is limited modern research on its pharmacological mechanisms, such as anti-inflammatory or antioxidant pathways.

SUGGESTIONS

- **Conduct Robust Clinical Trials:** Well designed, multi centric and implemented RCTs with larger sample sizes to evaluate *Itrifal Shahtara*'s efficacy and safety for specific conditions like acne, eczema, and psoriasis. Comparative studies with conventional treatments could highlight its relative benefits.

- **Standardized Formulations:** Develop a standardized composition and preparation protocol, drawing on core ingredients to ensure consistency across studies and clinical practice.
- **Phytochemicals and Pharmacological Studies:** Investigate the active compounds in *Itrifal Shahtara* (e.g., flavonoids, tannins, alkaloids) and their mechanisms of action.
- **Long-Term Safety Studies:** Assess the risks of prolonged use, particularly regarding *za'f-e-meda*, to establish safe dosing durations and mitigate potential adverse effects.
- **Integrative Medicine Frameworks:** Promote interdisciplinary collaboration between Unani practitioners and biomedical researchers to integrate *Itrifal Shahtara* into holistic treatment protocols for chronic diseases.
- **Public Awareness and Education:** Increase awareness of Unani medicine's potential through educational campaigns, targeting both healthcare providers and patients to bridge cultural and conceptual gaps.

REFERENCES

1. Tassew WC, Assefa GW, Zeleke AM, Ferede YA. Prevalence and associated factors of herbal medicine use among patients living with chronic disease in Ethiopia: A systematic review and meta-analysis. *Metab Open*. 2024;21:100309.
2. Kazmi A, Alam MT, Quamar N, Quamri MA, Ahmad MR, Jameel M, *et al.* Pharmacovigilance in Unani medicine. *Sch Acad J Pharm*. 2025;14(4):65–74.
3. Shenefelt PD. Herbal treatment for dermatologic disorders. In: Benzie IFF, Wachtel-Galor S, editors. *Herbal medicine: biomolecular and clinical aspects*. 2nd ed. Boca Raton (FL): CRC Press/Taylor & Francis; 2011. Chapter 18. <https://www.ncbi.nlm.nih.gov/books/NBK92761/>
4. Zafar D, Khan SA. *Anwarul murakkabat*. New Delhi: Idara Kitab-ul-Shifa; 2016. 61.
5. Nigrani HMH. Unani advia murakkabat. Edi. 1st. Lucknow. Hakim Mohammad Hassan Nigrani;1995:24-25.
6. Ansari AP, Ahmed NZ, Anwar N, Ahmed KK. Protective and therapeutic role of Itrifal (Unani dosage form) in neuro behavior, neurodegeneration, and immunomodulation: An appraisal. *Brain Behav Immun Integr*. 2024;7:100075.
7. Rahman HSZ. *Kitabul Al Murakkabat*. Aligarh. Ibn Sina Academy; 2010.20.
8. Kabir H. *Murakkabat (Unani Formulations)*. 1st ed. New Delhi: Shamsher Publisher and Distributors; 2003.63.
9. Aguiar R. *Fumaria officinalis* L. active compounds and biological activities: A review. *Int J Herb Med*. 2023;11(5):144–51.
10. Alam MM, Ussalam M, Goswami A, Alam MI, Ahmad M, Rajesh K *et al.* A Clinical Study on Itrifal Shahatra and Sharbat Unnab to Evaluate the Mechanisms of Action and Unani Principles in Buthūr (Acne). *Research & Reviews: Journal of Unani, Siddha and Homeopathy* 2022 ;9(3):9–16.
11. Anonymous. National Formulary of Unani Medicine. Part 1. New Delhi. Ministry of Health and Family Welfare;2006:96.
12. Kabiruddin AM. Bayaze kabeer. Vol. 2. 2nd ed. Delhi: Idara Kitabul Shifa; 2014:11.
13. Khan HS. *Bayaze khaas*. In: Kabiruddin. New Delhi: Ejaz Publishing House; 2006. 793.
14. Khan GJ. *Makhzanul murakkabat*. New Delhi: Ejaz Publishing House; 1995. 10.
15. Ghani HNJ. Qarabadin najmul ghani. New Delhi. CCRIUM;2010:42-43.
16. Anonymous. Qarabadin hamdard. Delhi. Hamdard Dawa Khana; 1971:23.
17. Anonymous. Qarabadin majeedi. New Delhi. CCRIUM;1984.22-23,168.
18. Ali MM. Unani dawasazi. New Delhi: CCRIUM;2010:103-104.
19. Amrohi HJ. Qarabadin Jalali. New Delhi. CCRIUM;2006:5.
20. Labhaya R. Delhi ke muntakhab murakkabad. Delhi. Gosowami Kutub Khana; 1979:13.
21. Salam M, Khan Q, Sehar N *et al.* A preliminary study on the efficacy and safety of two Unani pharmacopoeial formulations (Itrifal shahatra and Sharbat unnab) in adolescent and young adult's cases of acne vulgaris (Busoor-i-labaniyah): single armed open labelled clinical study. *World Journal of Pharmaceutical and Medical Research* 2020; 6(4): 85-89.
22. Sajwan S, Khan AS, Ansari SA, Meena RP. Botanical and physicochemical standardization of compound formulation- "Itrifal Shahatra". *ejbps*. 2021;8(8):431-434.
23. Siddiqui NA, Tayyab KI. Effect of Unani medicines in Eczema: A case report. *International Journal of Unani and Integrative Medicine* 2023; 7(2): 34-37. <https://doi.org/10.33545/2616454X.2023.v7.i2a.239>.
24. Rehman H, Kazmi MH, Khadeerunnisa S. Management of Recurrent Tinea Corporis by Unani Medicine: A Report on Case Studies. *Journal of Advanced Research in Ayurveda, Yoga, Unani, Siddha and Homeopath* 2022;9(3&4):1-5.
25. Ismail BA, AUAM, Jabeen J, Kalam MA. Effectiveness of oral and topical Unani formulations in Taqashshur Al-Jild (psoriasis): a case study. *Indian J Unani Med*. 2021;14(2):96-101.
26. Khan S, Hoda MN, Rizvi A, Khan K. Therapeutic efficacy of Itrifal-e-Shahatra, Irsal-e-Alaq (Hirudo therapy) and a herbal paste in the management of Qurooh-e-Aseerat-ul-Indamaal (Non-healing ulcer) – A case study. *Int J Creat Res Thoughts*. 2021;9(3):2320–2882.
27. Shah A, Habib A, Iqbal A, Rafiq H, Ara I, Nighat, Bashrat. A novel treatment for scabies with herbal formulation: a clinical safety assessment study. *J Drug Deliv Ther*. 2025;15(1):59–66.