



A Complementary therapy of Hijama (Cupping) in Medical Stream

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Abstract and Background:

Cupping (Hijamah) therapy is very well documented as a result of several thousand years of clinical experiences in Unani medicine. In this procedure, suction is created by various means either with or without bloodletting. Though this therapy is being widely practiced across the globe for treating many chronic and intractable ailments but many reports reveal its unscientific and improper practices which results in many complications. Therefore to develop standard operative procedures and to propose protocols of cupping therapy in various diseases is the need of hour. Materials and methods: A thorough literature review of relevant journals and textbooks was performed to gather the maximum available data on cupping therapy. This paper seeks to introduce the general concepts of cupping therapy in Unani medicine and other traditional systems of medicine, shortcomings and limitations of the currently published studies and suggest ways to improve these technical/ methodological flaws. In addition, the authors have also attempted to provide the cupping related materials, hypotheses, observations which will provide the researchers the base for evaluating their usefulness in future clinical trials.

Key words: Hijamah; Cupping; Scarification; Unani Medicine.

1. Introduction and History of Cupping therapy.

The origin of cupping is unclear. Iranian traditional medicine uses wet-cupping practices, with the belief that cupping with scarification may eliminate scar tissue, and cupping without scarification would cleanse the body through the organs. In ancient Greece, Hippocrates (c. 400 BC) used cupping for internal disease and structural problems. The method was highly recommended by Prophet Muhammad (SW) and hence well-practiced by Muslim scientists who elaborated and developed the method further. Consecutively, this method in its multiple forms spread into medicine throughout Asian and European civilizations. In China, the earliest use of cupping that is recorded is from the



Fig. 1 cupping therapy in Ancient Arabic countries



Fig. 2 A text-book Exercitations practice, published in 1694, shows a man cupping

famous Taoist alchemist and herbalist, Ge Hong (281–341 AD). Cupping was also mentioned in Maimonides' book on health and was used within the Eastern European Jewish community. William Osler recommended its use for pneumonia and acute myelitis in the early twentieth century.

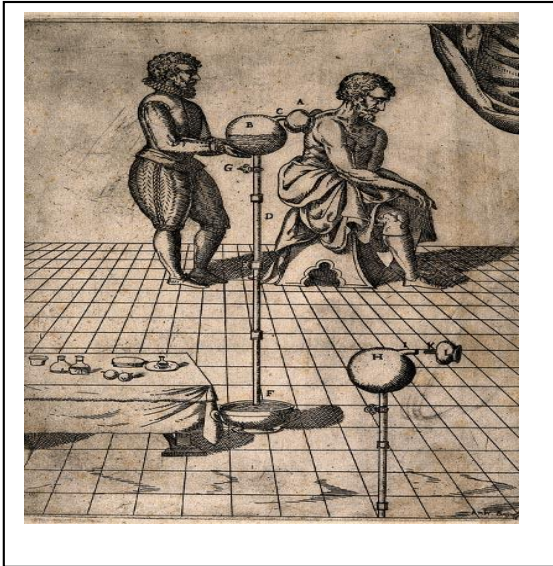


Fig.3 Ancient Physician used cupping therapy for various Treatments



Fig. 4 Queens used cupping therapy in Ancient Egypt

The practice has been used in hospitals in China since the 1950s as a traditional Chinese medicine modality. As of 2012 cupping was most popular in China.

Cupping therapy is a form of alternative medicine in which a local suction is created on the skin with the application of heated cups. Its practice mainly occurs in Asia but also in Eastern Europe, the Middle East, and Latin America. As with all alternative medicine, cupping has been characterized as a pseudoscience and its practice as quackery. Cupping practitioners attempt to use cupping therapy for a wide array of medical conditions including fevers, chronic low back pain, poor appetite, indigestion, high blood pressure, acne, atopic dermatitis, psoriasis, anemia, stroke rehabilitation, nasal congestion, infertility, and menstrual period cramping. Despite the numerous ailments for which practitioners claim cupping therapy is useful, there is insufficient evidence it has any health benefits, and there are some risks of harm, especially from wet cupping and fire cupping. Bruising and skin discoloration are among the adverse effects of cupping and are sometimes mistaken for child abuse. In rare instances, the presence of these marks on children has led to legal action against parents who had their children receive cupping therapy.

In Unani, the treatment methods claim to focus on improvement of the bodily functions by removal of unwanted waste and thus, increasing its defence mechanisms. In addition to diet (Ilaj-Bil-Ghiza), pharmacotherapy (Ilaj-Bil-Dawa), and surgery (Ilaj-Bil-Yad), the therapies are regimented and are known as Ila'aj-Bil-Tadbeer which primarily consists of:

1. **Fasd:** blood-letting using venesection,
2. **Ta'areeq:** leech therapy,
3. **Kai:** cauterisation,
4. **Hijaama:** cupping or suction of skin using cups

Amongst the four mentioned above, the cupping therapy or Hijaama is widely used as a form of treatment for both acute and chronic ailments, especially in regions where Unani is the preferred form of treatment over Ayurveda, Siddha or homeopathy. Due to its higher practice by the Unani practitioners over other regimented therapies, people subscribing to Unani medicine are more likely to be adversely affected by cupping than its other physical external therapies. In this article, we will discuss perceptions and falsely attributed claims of Unani and Cupping therapy:

1. The origins of Unani
 2. The perception of a prescribed form of treatment in Islam
 3. The scientific evidence of efficacy with cupping
 4. The risks associated with cupping
 5. Conclusion
- A. Unani is known to be distinctly Arabic and perceived to have no overlap with the ancient India treatments**

According to Unani, the human body is made up of Arkan (Elements), Mizaj (Temperament), Akhlat (Humours), Aaza (Organs), Arwah (Spirits), Quwa (Faculties or Powers) and Afaal (Functions). Here,

1. Arkan is the four elements such as air, earth, fire and water derived from **ancient Indian knowledge**;
2. Akhlat are the four humours of blood, phlegm, yellow bile and black bile derived from **Hippocrates in Greece**; and
3. Arwah is the gaseous spirit (Ruh) that burns the Akhlat (Humours) to produce all kinds of Quwa (natural, psychic and vital powers) for a healthy function of the body- derived from the **ancient Arabic** wisdom.

Thus, the developed form of Unani after the 13th century in the Indian-subcontinent consisted of ancient Indian, Greek and Arabic knowledge of medicine.



Fig. 5 cupping therapy in Ancient Greek



Fig. 6 cupping therapy in Ancient Chinese

Hippocrates (or Buqrat, 460BC- 370BC), the father of medicine from ancient Greece (Yunan), planted the idea for a rational and physical cause for diseases. Later, Greek physicians during the Roman period such as Galen (or Jalinoos, 129AD-200AD) developed it further. In the 4th century AD, the Greek medicine spread throughout Syria and was carried by the Nestorians into Persia, where it became available to the Islamic World. Later, it also derived knowledge from ancient China, where the exchange of Chinese herbs between 8th-13th centuries influenced Unani practice. Hence, originating in ancient Greece or Yunan, Unani was developed from the teachings of philosophers such as Greek Hippocrates and Galen, Avicenna (Ibn Sina) and Muhammad ibn Zakariya al-Razi of ancient Persia, Chinese herbalists, and much later in India, by Hakim Abdul Hameed and Syed Zillur Rahman of India.



Fig. 7 Time line cupping therapy in Ancient Unani system of medicine and Current Era of medicine

B. Unani is perceived to be the prescribed method of treatment in Islam from the time of the Prophet

Unani that is practiced currently in India had not been completely developed during the life of the Prophet. Also, it is likely that the Prophet may have recommended cupping through Islamic texts, not as a preferred treatment, but because it may be the only major treatment available at that period of time. The ancient Egyptian texts suggest the existence of Unani practices such as Hijaama or cupping predating (1550 BC) the life of the Prophet. Thus, it was prevalent and possibly the only form of treatment before, during and much after the life the Prophet. Also, the mention of cupping is nowhere in the Qur'an but in 'Hadiths' that 'strengthen' each other. Hence, it is plausible, that the Prophet may have referred to it as a treatment method.

The form of Unani practiced currently in India and the Indian subcontinent is merely a reflection of the journey it has undergone and the knowledge it has accumulated from the ancient Greeks, Persians, Arabs, Chinese and the traditional Indian systems of healing. Therefore, it is likely to be a variant from the primitive form of Unani practiced during the life of the Prophet. Hence, eluding Unani and its therapies such as 'Cupping' as the prescribed form of medicine in Islam may be only partially true.

2. Definition of Cupping therapy (CT)

Cupping is a method used for local evacuation/diversion of Humours using cups attached to the surface of the skin which creates negative pressure. Cupping can be dry, with fire, or 'wet' – with small incisions to draw out blood.

it is suggested that cupping can be used for

1. Cleaning the skin of waste matters.
2. To stop excessive menses or epistaxis.
3. To correct liver diseases.
4. To treat malaria and spleen disorders.
5. To treat piles, inflammation of testes and uterus, scabies, boils etc.

Using the modern knowledge of physiology, cupping is justified as a means to help supposedly helps with pain, inflammation, blood flow and provides deep-tissue massage by relaxing them.

A. Timing of the Cupping

The best time for performing cupping is morning hours but Al-Masihi (1935) has advised that the best time for application of the cup is afternoon. Besides, it should be avoided at the beginning of the lunar month because the humors are then not yet on move or agitated; nor it is advised at the end of lunar month, because, they are less plentiful.

B. Instruments Used for Cupping.

Zahrawi has described animal horn, wooden vessel, copper vessel, glass vessel, and needles for scarification while Buqrat (Hippocrates) has also described the application of small gourd for the purpose of eliciting blood after scarifying. At the end of twentieth century, another method of suction was developed in which a valve is attached at the top of the jar and a small hand operated pump is attached so that the physician could suck out air without relying on fire (thus avoiding some hazards and having greater control over the amount of suction). The cups typically used in cupping treatment have diameters in the range of about 38mm (1.5 inches) to 50.8 mm (2 inches). A cup with a more rounded rim should be used which causes less discomfort to the patient.

3. Methods of Cupping.

Cupping practitioners use cupping therapy for a wide array of medical conditions including fevers, pain, poor appetite, indigestion, high blood pressure, acne, atopic dermatitis, psoriasis, anemia, stroke rehabilitation, nasal congestion, infertility, and dysmenorrhea. Proponents claim cupping has a therapeutic effect and removes unspecified "toxins", stagnant blood, or "vital energy" when used over acupuncture points with the goal of improving blood circulation. Modern suction devices are sometimes used instead of the traditional cups. While details vary between practitioners, societies, and cultures, the practice consists of drawing tissue into a cap placed on the targeted area by creating a partial vacuum – either by the heating and subsequent cooling of the air in the cup, or via a mechanical pump. The cup is usually left in place for somewhere between five and fifteen minutes.

Cupping therapy types can be classified using four distinct methods of categorization. The first system of categorization relates to "technical types" including: dry, wet, massage, and flash cupping therapy. The second categorization relates to "the power of suction related types" including: light, medium, and strong cupping therapy. The third categorization relates to "the method of suction related types" including: fire, manual suction, and electrical suction cupping therapy. The fourth categorization relates to "materials inside cups" including: herbal products, water, ozone, moxa, needle, and magnetic cupping therapy.

Further categories of cupping were developed later. The fifth relates to area treated including: facial, abdominal, female, male, and orthopedic cupping therapy. The sixth relates to "other cupping types" that include sports and aquatic cupping.

A. Various materials used for cupping therapy.



Fig. 8 Glass cups used for cupping therapy



Fig. 9 Plastic cups and accessories used for cupping therapy



Fig. 10 Bamboo and its material used for cupping therapy



Fig.11 Horn/Copper cups used for cupping therapy



Fig. 12 Bronze cups used for cupping therapy



Fig. 13 Different types of cupping set for cupping therapy

B. Dry cupping

Dry cupping involves the application of a heated cup on the skin of the back, chest, abdomen, or buttocks. The cooling of the air is then thought to create a suction effect. Bamboo and other materials are sometimes used as alternatives to glass cups.

C. Fire cupping

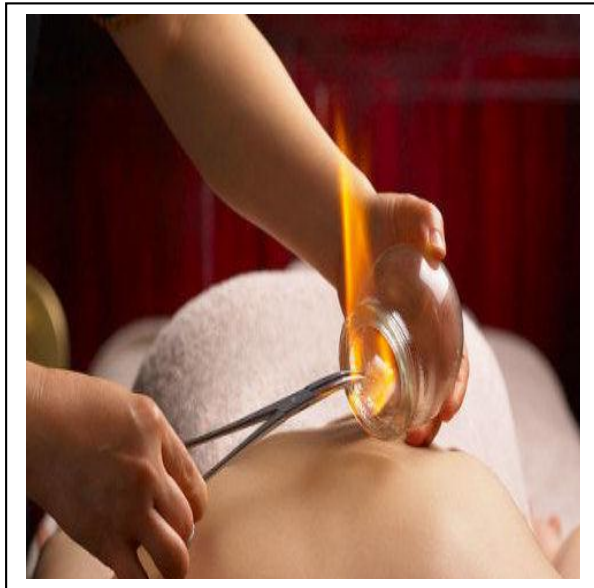


Fig. 14 Fire cupping therapy for Woman's



Fig. 15 A person receiving fire cupping therapy for women

Fire cupping involves soaking a cotton ball in almost pure alcohol. The cotton is clamped by a pair of forceps and lit via match or lighter, and, in one motion, placed into the cup and quickly removed, while the cup is placed on the skin. The fire uses up all the oxygen in the cup which creates a negative pressure inside the cup. The cup is then quickly placed onto the body and the negative pressure "sucks" the skin up. Massage oil may be applied to create a better seal as well as allow the cups to glide over muscle groups in an act called "gliding cupping" or "sliding cupping". Dark circles may appear where the cups were placed because of capillary rupture just under the skin. There are documented cases of burns caused by fire cupping.

D. Wet cupping

Wet cupping is also known as Hijama (Arabic: حِجَامَة lit. "sucking") or medicinal bleeding, where blood is drawn by local suction from a small skin incision. The first reported usages are found in the Islamic hadith, sayings attributed to or describing the actions of the Islamic prophet Muhammad. Hadith from Muhammad al-Bukhari, Muslim ibn al-Hajjaj Nishapuri and Ahmad ibn Hanbal support its recommendation and use by Prophet Muhammad (SW). As a result, wet cupping has remained a popular remedy practiced in many parts of the Muslim world. In Finland, wet cupping has been done at least since the 15th century, and it is done traditionally in saunas. The cupping cups were made of cattle horns with a

valve mechanism in it to create a partial vacuum by sucking the air out. Cupping is still practiced in Finland as part of relaxing and/or health regimens.



Fig. 16 Glass cups used for Wet cupping therapy

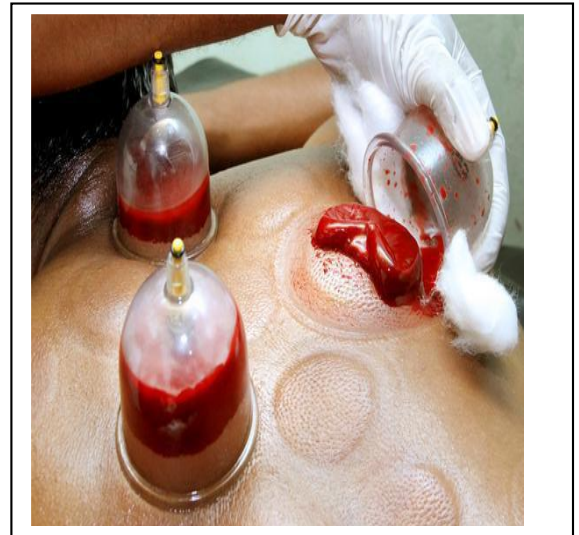


Fig. 17 Blood collection drawn by wet cupping

E. Cupping is effective as a treatment

There is no scientific evidence that cupping therapy can prevent bleeding, correct liver and spleen diseases, treat malaria or any other infections or treat inflammation. By using sheer negative force or pulling of the skin, cupping may remove external, dry skin scabs but it may not be the safest or effective method to remove scabs.

Several research studies have reported elaborate benefits of cupping therapy. A recent review article by researchers in Saudi Arabia collated studies that highlighted these benefits as “Reported effects of cupping therapy include promotion of the skin’s blood flow, changing of the skin’s biomechanical properties, increasing pain thresholds, improving local anaerobic metabolism, reducing inflammation, and modulation of the cellular immune system.” However, systematically reviewing the studies suggests that these studies contain highly biased conclusions.

4. Various claims of cupping therapy.

I. Claim: Cupping increases blood flow

While it is true that the pressure due to cupping increases blood flow to the surface and changes skin’s biomechanical properties. There is no evidence that these effects can be beneficial in the short term over the local injury, inflammation or burns the therapy is known to cause.

II. Claim: Cupping improves anaerobic metabolism, reducing inflammation and modulation of the immune system and thereby, reducing illnesses

Increasing anaerobic metabolism may lead to an increase in metabolic acidosis (body accumulating excessive amounts of acid) which can cause an increase in pain. The study suggesting reduced

inflammation after cupping measured a change in plasma cortisol level (a hormonal marker for stress and low blood glucose), which is a variable throughout the day and is manipulated by several other factors such as food intake. There is no evidence in that study that cortisol is manipulated by cupping only. Also, the study that linked modulation of the immune system measured a change in WBC (white blood cells), which is also, indicates infection or inflammation. Hence, none of the above changes suggests that they could be used as an indicator of health improvement, but increases in WBC can be a function of immune system problems such as infections.

III. Claim: Cupping reduces chronic pain

Several studies have suggested that cupping therapy can reduce long-lasting chronic pain. Pain is a subjective experience and is highly modulated by the patient's expectations of treatments. Hence alternative therapies show significant efficacy in pain conditions, many of which are effective by placebo analgesia. Since, the studies indicating a positive effect on pain lack any form of blinding from the patient's part, it is highly likely that those effects may have been due to raised expectations. Additionally, these studies have a low sample size, high bias for a positive result and lack of international standards of research. These studies lack the scientific credibility to suggest cupping may have had a mechanistic effect on chronic pain. More systematic literature reviews and meta-analyses also indicate that cupping therapy has no evidence whatsoever in treating chronic illnesses.

6. Cupping entails no adverse effects

While experts claim that cupping therapy has no adverse reactions, several side-effects such as viral infections, local injury, inflammation and pain due to bruising have been reported. Another study reported the possibility of a hemorrhagic stroke due to elevated blood pressure in the cervical area. In cases of cupping with heat or fire, several burn injuries are prevalent with some requiring hospitalization and skin grafting due to burns.

7. Conclusions

The understanding of the human body is perpetually updating with novel information. It is counterproductive to use ancient medical practice that is maladaptive in the modern context. It is more dangerous to do so when those practices are entrenched in religious belief systems. The treatment system of Unani and its treatment of cupping is one such example. It is possible that the Prophet may have recommended it (as suggested by Hadiths) being the only form of modern medical practice during the life of the Prophet, but it is dangerous to suggest that it is the only prescribed form in Islam. This attribution can make more people relying inclusively on it without understanding the mechanism of its efficacy. Moreover, the specific practice of cupping has no clinical evidence as a treatment method for any of the claims made by AYUSH or the research literature. The studies that concluded with positive results had a 'high bias' risk, included limited sample size, conducted with no degree of blindness, were without international research

standards, and hence lacked credibility. As opposed to treating patients, cupping therapy exposes patients to infections, burns, inflammation and severe tissue injuries.

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