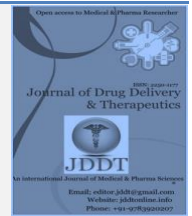


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Review Article

Exploring Hijama (Cupping Therapy) for Sciatica Relief: An Integrative Review of Unani Practices

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Abstract

Background: Since ancient times, Unani physicians have controlled certain illnesses by altering the metabolic process using a variety of therapeutic approaches. Some treatment tenets have been promoted by *Ibne-sina* (Avicenna). Regimenal therapy is a fundamental approach to treatment that aims to eradicate sick matter, control excessive production, control its spread, and resolve it by specialised approaches, ultimately restoring humoral equilibrium. Hijama (Cupping) is one such operation. The Arabic word "Hijamat" (from the phrase "Hajm") means "volume", but it is also used to refer to sucking. Additionally, it might indicate "to minimise", "to return to basic size", or "to reduce the volume". One of the most prevalent symptoms of *Irq-al-nasa* (Sciatica) is lower limb neuralgic pain. This illness has the potential to become persistent and chronic, with significant socioeconomic consequences. Its overall incidence is estimated to be between 13% and 40%. **Objective:** Mainstream therapists primarily treat Sciatica with medication, surgery, or occasionally both. There should be an efficient substitute for evidence-based medicine because of its negative impacts, high cost, and disease-centric approach to treatment. Extensive research has been conducted to investigate the potential benefits of this traditional treatment plan for the management of Sciatica.

Keywords: Cupping, *Irq-al-nasa*, Sciatica, Hijama, Unani medicine

Introduction

The amalgamation and ideas of various experiences and expertise have given rise to the Unani medical system. *Buqrat*, also known as Hippocrates, initially proposed it in Greece around the fourth and fifth centuries B.C. Its tenets hold that maintaining health, illness, and all of its manifestations are natural processes; hence, maintaining health requires ensuring that all physiological processes are operating normally. Illness results from any disruption of the regular humoral balance, be it an excess, decrease, or obstruction. Since ancient times, Unani physicians have controlled certain illnesses by altering the metabolic process using a variety of therapeutic approaches. The treatment guiding principles, according to *Ibne-Sina* ¹ (Avicenna), are: *Ilaj bit tadbeer wa Taghzia* (Diet and Regimental Therapy); Drug therapy (*Ilaj bil Dawa*); Surgery (*Ilaj bil Yad*). Regimenal therapy is a fundamental approach to treatment that aims to eradicate sick matter, control excessive production, stop its spread, and resolve it by specialised approaches, ultimately restoring humoral equilibrium. Hijama (Cupping) is one such regimen.

Hijama and Its Classification

The Arabic word "Hijama" is derived from the word "Hajm," which is meant to refer to volume but is more commonly used to describe sucking. It can also imply to reduce, to a minimum,

or to a fundamental size or volume. The ancient technique known as *Hijamat* was particularly utilised by the Chinese, Babylonians, Egyptians, Greeks, and others. Commonly utilised for the purpose were ceramic cups, bamboo cups, and animal horns that had been hollowed out. ² The significance of this regimen can be determined by considering the wise words of Hazrat Mohammed, the holy prophet of Islam: *Hijama* is the best remedy you have. ³ Although there are essentially two main forms of *hijama*, but according to procedure there are actually three forms as: ⁴

- *Hijama Bil Shart* (Wet Cupping/ Cupping with scarification)
- *Hijama Bila Shart* (Dry Cupping/ Cupping without scarification)
- *Hijama Bil Naar* (Fire Cupping)

Hijama Bil Shart (Wet Cupping)

It is actually a bloodletting technique called *Tadbeer Istefragh*, where the sickness is caused by *Damvi Madda* (Sanguinous matter), which has to be removed. Consequently, the human body has designated multiple locations for the application of the *hijama*.

Hijama Bila Shart (Dry Cupping)

It is a method of applying cups, horns, clay pots, etc. across the human body's muscular surface to produce a vacuum. There are two ways to perform this procedure:

- *Hijama Bila Naar* (Cupping without fire)
- *Hijama Bil Naar / Mehjama Nariya* (FireCupping)

Hijama Bila Naar (Cupping without fire)

This procedure can be performed by the several methods:

- Placing horn and sucking orally
- Placing cups and suctioned manually
- Placing cups and sucked through suctionmachine ⁵

Hijamat Bin Naar / Mehjama Nariya (Fire Cupping)

This procedure also can be done by different techniques.

- Flamed alcohol soaked cotton at the base of brass / steel / ceramic / clay material
- Flamed paper / cotton / cloth / wooden piece poured into the glass and applying
- Flamed camphor / spirit soaked cotton kept over coin and placing glass / cups / clay material etc. ⁶

General Principles of Hijama:

Ibne Sina has discussed about *Hijāma* beside its description in detail and has pointed out certain important principles which are as follows:

- It should be carried out in the mid of lunar month because the humours are fully agitated at this time.
- It should be done in after-noon because this is the most moderate time of the day.
- It should be done preferably in summer season because the consistency of the humours remains thin so it easily enters the microvasculature and can easily be eliminated through *Hijama*.
- It should be performed in those whose blood is less viscous.
- The person should be given stomachic tonic and divergent beverages prior to *Hijāma*.
- It should be avoided in obese persons for the fear of *Kasrat-e-Tahallul* (excessive resolution).
- It should be avoided below two years and above sixty years of the age since the humours are viscid in these age groups.
- It should be avoided immediate after bath because the skin becomes thicker so it needs deeper incision to take out the blood, which causes severe pain and leads to weakness and the persons having viscid blood should be exempted as they need a deep incision.
- It should be avoided after coitus.
- It should be avoided after vigorous exercises for fear of dehydration and general weakness with the exception of thick blood (increased haematocrit).

Procedure of Hijama (Cupping):

The patient is placed in a comfortable position (either sitting or lying down) and the area that has to be cupped is made visible. In order to secure the cups firmly on the body, shaving is necessary if the area is hairy. If they don't fully adhere to the skin, air may seep into the cups and the adhesive force will be

compromised. After that, warm water is applied to the area with a sponge to promote blood flow. Subsequently, the cone-shaped piece of paper is burned using a candle or lamp. Afterwards the burning paper is inserted into the cup and opening of the cup is placed on the skin of the particular area. Consequently, a significant amount of air within the cup will be burned by the burning paper, creating a negative pressure that will solidify the cup's adhesion over the affected area. In the end, there will be more traffic in the neighbourhood, which will make the space extremely crowded. The superficial vaso-dilatation that occurs as a result of the tugging effect on the skin and the elevated warmth inside the cup contributes to an enhanced vascular circulation. Because of this, blood cups are so abundant that they tend to tug on the skin for a period, which partially stops the collected blood from interacting with the circulation. After fifteen to twenty minutes cup is removed from the body. The cup is removed by holding its belly between the thumb and forefinger of one hand and simultaneously depressing the skin of adjacent area by the other hand. This is the method of *Hijāmat-e-NariyaBila- Shart*, when its purpose is to increase the blood flow or to divert the humours towards the site of *Hijāma*.

In case of *Hijāmat-e-Nariya bil- Shart*, the region is treated with medical antiseptics following the aforementioned processes. The cup is then swiftly placed back on the site to begin sucking blood after a few small cuts are made on the swollen patch of skin with the edge of a sharp, sterile blade.

Cups are fixed till the sucking process is finished. After that, the blood-filled cup is removed as previously described, the region is thoroughly washed with an antiseptic, and sterile dressing is applied.

Although *Hijāma-e-Ghair-Nariya* is also completed in the same way, the cups are fixed and removed using a different technique. Cups have evolved into extremely customised and sophisticated objects with the introduction of new methods and instruments. These altered cups come with a hand-operated pump and a valve on top. The cup is fixed to the skin by keeping its edges over it and using a suction pump to draw out air from the cup to generate a vacuum. Likewise, to extract the cup, just use your thumb and forefinger to draw up the valve. By pulling the valve, air will be allowed into the cup, and it will separate on its own. ⁷

Equipment for Hijama

Glass cups, Vacuum pump, Medical antiseptics, Lamp or Candle, Small paper, Sterilized gloves, Sterilized medical scalpel, Cotton roll, Sterilized gauze, Micro pore tape, Razor to remove the hair of the site if needed. ⁸

Indications of Hijama

- To divert the material from one place to another, as in case of menorrhagia where cups are applied below the bust line.
- When there is any indication to warm up any particular organ, which has become cold, in *Mehjama -Nariya* is preferable.
- When the air accumulates in any part of the body the application of *Hijāma* on the same part is beneficial, in particular, *Hijāmat-e- Nariya* is more effective in intestinal colic due to flatulence.
- *Hijāma* is also done to relieve severe pain in any part of the body. This purpose is achieved either due to the diversion of materials away from the site of pain or removal of trapped air. Therefore *Hijāma* is indicated in sciatica on medial and dorsal aspect of thigh. ⁹

Role of *Hijāma* in the Treatment of Sciatica

According to *Unani* physician *Rāzi's* book *Al-Hāwi*, enema is more beneficial for treating *Irq-al-nasa* (Sciatica) than purgation; nevertheless, if thick humours accumulate in the hip joint, *Hijāmat* becomes necessary and offers significant advantages over alternative treatments. According to *Rāzi*, when the disease initially affects the site of pain, hip surgery will be performed using the *Hijama-bil-Shart* and *Hijāma-Bila-Shart* techniques. He goes on to say, *Hijāma*, becomes very useful for this condition if the humours in the affected joint become thick due to improper treatment".¹⁰

Regarding the treatment of sciatica, *Unani* book "*Kaamil-us-Sana*" states that *Hijāma-e-Nariya* is crucial since it draws material from the joints towards the skin. This is especially true when the disease becomes chronic and drug treatment is ineffective.¹¹ *Ibne Sina* notes under the treatment of *Irq-al-nasa* that *Hijāma* (cupping) with or without scarification over the hip will be beneficial if the pharmacological treatment is insufficient to address the issue.

Ismail Jurjani has expounded upon *Hijāma* in relation to *Waja-ul-Warik* (low backache) and *Waja-ul-Aqab*. He says if the patient has a sedentary lifestyle, it is best to keep him on a fast and prescribe activity after the general evacuation. Only morbid humours should be removed towards the surface of the diseased area if these *Tadabeer* (means) fail to alleviate the illness. *Hijama-e-Nariya* (cupping with fire) achieves this goal. *Hijāma* attempts made repeatedly, in which a large amount of blood is sucked, usually result in the situation being relieved by the removal of morbid materials from the joints.¹²

Unani physician "*Azam Khan*" states, "Last but not least, *Tadabeer* (measures) that have *Muhallil* (anti-inflammatory) and *Mulatitf* (demulcent) effects should be carried out in the management of sciatica in order to remove the deeply seated materials to the surface of the body." These *Tadabeer* recipes contain *Hijama* (Cupping), *Muhammir* (Rubifacient drugs) paste of garlic, onion, *nargis*, *baladur*, and fig; however, some laxative medications should also be used in addition to these recipes to prevent dry joints.¹³ This indicates that the *hijab* has anti-inflammatory and calming properties in addition to causing diversion and evacuation. According to the aforementioned quotation, *Hijāma* can be helpful in treating *Waja-ul-Warik* (low backache), *Waja-ul-Mafasil* (Joints pain), and *Irq-al-nasa* (sciatica).

Discussion

Various theories are put forth as to the benefits of the *Hijamat Bila Shart*; one theory suggests that with the increase in circulation over the area of procedure, the morbid matter is eliminated from the desired area. The site of cupping not only improves circulation but also provide nutrition.¹⁴

Cupping without bloodletting works on the principal of *Imaale-mawaad* i.e. diversion of morbid humours from one site to another. In case of *Mehjama Nariya*, due to combustion of air inside the cups, the air becomes warm, and helps in retracting the muscular surface, causing pulling of the area beneath the cups immediately after its application resulting in relief of pain.¹⁵ Blood cupping has a neuro-modulating input into central nervous system activating CNS multiple analgesia systems and stimulating pain modulation system to release neurotransmitters such as endogenous opioids.¹⁴ Another possible mechanism that may explain the analgesic effect of cupping therapy is that vigorous sensory stimulation can produce a sharp decrease in pain for varying periods of time due to blocking of messages from sensory nerves carrying pain impulses by faster moving impulses, this mechanisms is called gate control theory.¹⁶ Bloodletting cupping might exert effects on inflammation in that injury to the skin leads to release

of β -endorphin and adrenocortical hormone into circulation. Both are helpful in blocking the inflammation in arthritis.¹⁷ The physiological mechanism through which wet cupping might function remains unknown. It has been suggested that the effects of wet-cupping can be divided into several components, including neural, hematological, immune and psychological effects.

Conclusion

Hijama is essential for managing sciatica as long as the regimen is applied carefully and all relevant information is taken into account. In addition to the treatment methodology's essential importance, there exists an issue with the absence of consistent standard operating procedures. Because this therapy is inexpensive, easy to administer, and free of side effects, it appears imperative to standardise it and establish specific scientific criteria for assessing its effectiveness. Therefore, in order for a large segment of society to benefit from this regimen, scientific studies are being conducted to validate it in several *Unani* research institutions across India. It is necessary to assess this therapy for preventive use in order to prevent some of the upcoming sickness episodes or bouts.

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References

1. *Ibne Sina. Al Qanoon Fit Tib* (Urdu translated by Kantoori GH). Vol 3. New Delhi: Idara Kitabushifa; 2007.p. 1120-21.
2. *GhassanJ. Tib-ul-Hijamah*. Beirut: Dar-ul-Harf-il-Arabi; 2005.p. 14, 54-55.
3. Bukhari AAMBI. *Sahih Bukhari sheriff* (Urdu translation). Vol3. New Delhi: Farid Book Depot; 1990. 314: 5371.
4. Huang Shixi, Cao Yu. Cupping Therapy, *Journal of Chinese Medicine*. 2006 Oct. 82:52-7.
5. Akhtar J, Siddiqui MK. Utility of cupping therapy *Hijamat* in *Unani* medicine. *Indian journal of traditional knowledge*. 2008. Oct; 7(4): 572- 4.
6. Maseehi AAFIQ. *Kitab ul Umda Fil Jarahat* (Urdu translation). Vol 1. New Delhi: CCRUM; YNM.p.200.
7. Sheeraz MD, Zaheer Ahmed, Mohd Aleemuddin Quamri. Concept and Management of *Irqunasa* (Sciatica) in *Unani* system of Medicine – A Review. *AARJMD*.2013.Volume-1, Issue-13:205-18.
8. Sheeraz MD. A comparative clinical study on the effects of *Mehjama Nariya* and *Hijamat Bila Shart* in *Irqunasa* (Sciatica). [Dissertation]. Bangalore: NIUM.RG UHS; 2013.61-65, 70-95
9. *Rāzi ABMBZ. Al Havi Fit Tib*. Vol.11. New Delhi: CCRUM; 2004.p. 75-77, 84, 88, 96, 99,114, 129, 174.
10. Majusi AHAIA. *Kamilussanaa*. New Delhi: Idarae kitabushifa; 2010.p.543, 574.
11. Jurjani MI. *Zakheerae Khuwarizm Shahi* (Urdu translation of *Hakim Hadi Hussain*). New Delhi: Idare kitabushifa; 2010. p. 637, 649, 650.
12. Khan MA. *Al Ikseer*. (Urdu translation by *Hakim Kabeeruddin*). Vol.2. New Delhi: Ejaz publishing house; 2003.p.1451- 53.
13. Khan HA. *Majmaul Bahrain*. Lucknow: Matba Munshi Naval Kishore; 1294. p.523.
14. Ali M, Shukla VD, Dave AR, Bhatt NN. A clinical study of *Nirgunda Ghana Vati* and *Maatra Basti* in the management of *Gridhrasi* with special reference to sciatica. *AYU Journal*. 2010. 31(4):456.

- <https://doi.org/10.4103/0974-8520.82042>
PMid:22048539 PMCID:PMC3202251
15. Bowsher D. Mechanisms of acupuncture. In: Filshie J, White A, eds. Medical acupuncture: a Western scientific approach. London, England: Churchill Livingstone ; 1998. p. 69- 82.
 16. Baldry. Trigger point acupuncture. Medical acupuncture a Western scientific approach, New York: Churchill Livingstone; 1988. p. 38.
 17. Sack K E, Fye K H. Rheumatic Diseases, Ch. 33, in Medical Immunology by Stites D P, Terr A I, Parslow T G, Appen and Lang; Shealy C N; 1996.p. 456-479.