



Clinical Evaluation of Dry Cupping for the management of Shoulder Pain (*Wajaul Katf*): A Pilot Study

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ABSTRACT

Background: Shoulder pain (*Wajaul Katf*) is one of the commonest musculoskeletal problems attended in the outpatient setting. In fact it is the third most common disease of musculoskeletal system. Disabilities in activities of daily living are common due to shoulder pain. Despite advancement in medicine, this disease remains hard to treat. Unani scholars are known to manage musculoskeletal disorders by number of regimens like Hijama (cupping). Cupping has the function of calefacient and encouraging the flow of energy in the blood thus driving off cold, dampness, and toxins.

Method: This pilot study was carried out on 9 patients attending IBT, OPD as an open prospective clinical trial. Each patient is subjected to three cycles of cupping therapy on alternate day basis. Assessment was done through using Shoulder Pain and Disability Index (SPADI).

Interpretation and Conclusion: The study revealed that cupping (*Hijamat*) is effective for relief of shoulder pain and concern disability.

KEYWORDS

Shoulder pain; *Wajaul Katf*; Cupping; *Hijamat*

Introduction

Shoulder pain is typically characterized by symptoms in the various joints, muscles, tendons, and bursa involved with shoulder motion. The pain can originate from many anatomical sites, including the structures comprising the glenohumeral joint and the periarticular soft tissue structures, or be referred from the cervical spine, the thorax, the diaphragm, and the upper abdominal cavity.¹

But it is believed that most shoulder troubles are attributable to overuse and trauma, others are muscle weakness due to lack of exercise and limited motion.²

In general population the incidence and prevalence of the musculoskeletal symptoms including Shoulder pain is high among the adult population. Shoulder pain is one of the most common musculoskeletal problems seen in the outpatient setting.³

It is believed Shoulder complaints constitute the third most common musculoskeletal presentation after low back ache and knee pain.^{4,5,6} with an estimate the annual incidence of shoulder disorders in general practice offices is about 12/1000 visits.⁷

Shoulder pain is thought to be associated with limited motion of the arm and hand, difficulty in dressing, difficulty performing work at home or at the workplace, and interrupted sleep.⁸

In present day scenario usual interventions for shoulder disorders include corticosteroid injections, manipulation of joint, physio-therapy, and surgery, all the above said treatment modalities had no significant advantage over another.^{9,10} Despite modern day researches and revolution in medicine, Shoulder pain remains a disease difficult to treat, researches make it evident that only 50% of sufferers with new shoulder pain epi-

sodes receive complete recovery at 6 months, and only 60% at 1 year^{8,9,10}

According to concept of Unani system of medicine Shoulder pain may be described under the heading of *Waja ul Mafasil*, by the name of *Wajaul Katf* (*Waja* = Pain and *Katf* = Shoulder)¹¹

Unani physicians managed ailments of joint by using different types of drugs and regimens.¹² Regimens like *Hijamat Bila Shart* (dry cupping), *Mahjima Nariya* (fire cupping), *Dalk* (massage), *Takmeed* (Fomentation), *Zimad* (paste), *Tila* (liniment), *Fasd* (venesection) etc are advised as treatment modes for Shoulder pain.¹²

Hijamat Bila Shart (dry cupping) is one of the most former and democratic remedial regimen in Unani system of medicine indicated in different types of *Waja ul Mafasil*¹³ and it is believed that *Hijamat Bila Shart* (dry cupping) is beneficial in *Im-alae mawad* (diversion of vitiated matter)^{14,15}. *Tanqiae mawad* (evacuation of matter)¹⁶ *Taskeen alam* (to alleviate pain)¹⁶

Keeping all above facts in mind a hypothesis was design to evaluate effect of regimen "*Hijamat Bila Shurt* (Dry Cupping)" in patients of shoulder pain.

Material and Methods

The pilot study was conducted in month of November and December 2014 as an open labelled, prospective trial on 9 patients after obtaining a written informed consent.

Following inclusion and exclusion criteria were used

Inclusion criteria

- patients of either gender,
- age group of 20-65 years of age,
- having right or left shoulder pain
- with or without restriction of movement
- disease duration of less than 12 months

Exclusion criteria

- having other type of arthritis of shoulder (e.g. RA)
- trauma of shoulder
- Psycho somatic disorder,
- pregnancy and lactation,
- All chronic diseases.

All the nine patients after obtaining written informed consent were subjected to the procedure (i.e. Dry Cupping), in which 4 manual suction cups were applied bilaterally over the affected shoulder region for 20 minutes. Three sittings of above said procedure were done on alternate days.

Before and after intervention, pain and disability in shoulder was assessed using Shoulder Pain and Disability Index (SPADI).

OBSERVATION AND RESULTS

In this study 10 patients were participated, out of which 9 completed the study, one patient drops out due to unknown reason, out of 9, 56 % were male and 44 % were females, all of 9 patients (100%) were complain of pain in shoulder and one or more disability in daily routine works arising due to shoulder pain.

The study outcomes on pain and disability were assessed using SPADI, before treatment and after treatment values were subjected to statistical analysis by using student t test.

Table 1: Effect of the study on pain with VAS

VAS	Mean		Difference	t value	P value
	Before treatment	After treatment			
Group A	30.8889	16.6667	14.2	5.54	<0.001

Table 2: Effect of the study on Disability

Disability	Mean		Difference	t value	P value
	Before treatment	After treatment			
Group A	33.8889	14.4444	19.4444	2.34	<0.001

Discussion

The shoulder pain and disability was assessed with SPADI all patients, pre and post treatment outcomes with mean difference are found alike 14.2 and 19.4444 respectively for pain and disability, with the p value < 0.001 in both cases, indicates highly significant (table 1 & 2).

It can be discussed that the effect of *Hijamat Bila Shart* was observed from pre procedure finding to post procedure findings. The effects of the method were observed that the cupping therapy is effective in alleviating pain and minimizing disability arising due to shoulder pain. This finding supports the observation made by Anjum et al (2005), Siddiqui MA et al (2011), Nayab et al (2011), Sheeraz et al (2013) Ghufuran et al (2014) on grandness of cupping therapy.^{17,18,19,20,21}

According to unani medicine concept, shoulder pain called as *Wajaul Katf* in unani, is type of *Wajaul Mafasil* arising due to *Sue mizaj, waram*, or sometimes due to *Ghaleez riyah*. The effectiveness of cupping lies in its unique properties of *Imalae mawad* (diversion of vitiated matter),^{12,14,16} *Tanqiae mawad* (evacuation of matter),^{12,16} *Taskeen alam* (to alleviate pain)^{12,14,16} *Tehleele auram* (to resolve inflammation)^{12,16} *Tehleele riyah*^{12,14,16} and *Taskheene muqam* (local calorific).^{14,16} Due to above said known properties of *Hijamat* the desired result happened in nuisance and disability arising due to shoulder pain. Further no patient had shown any significant adverse effects which also prove safety of regimen.

Conclusion

It may be concluded from study that *Hijamat Bila Shart* (Dry Cupping) therapy is useful in alleviating shoulder pain and disability without any apparent adverse effect(s). This study establishes strength and potential of Unani Medicine in musculoskeletal diseases. Large scales randomized, clinical trials are required to conclude more efficiently.

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