Traditional Cupping Therapy in Unani (Greco-Islamic) and Chinese Medicine

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Cupping

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Origins of Cupping
Cupping therapy (*huoquan qi* in Chinese; and *al-hijamah* in Arabic) is a practice whereby glass or bamboo cups are applied to the surface of the skin and through suction and negative pressure, the skin and superficial muscle are gently drawn into and held in the cups. Based on the holistic principle that the body relies on a balance of energies to function properly, cupping is used to remove accumulated stress, tension, and cold channels from the body; promote blood flow and healing; and restore balance. Widely practiced in China, Taiwan, India, Pakistan, Iran, Saudi Arabia, the Gulf States and parts of Africa and the Middle East, cupping is commonly used in immigrant communities (e.g., Asian, Arab, Mediterranean) in the USA, Canada, Europe, Australia, and New Zealand.

The earliest recorded use of cupping is in the *Ebers Papyrus* of ancient Egypt (1550 BCE) where cupping was indicated for the removal of foreign matter from the body. Hippocrates (ca. 460–370 BCE) and Galen (ca. 129–200 CE) also described cupping as an effective remedy for numerous disorders and a means to evacuate toxins, reduce inflammation, arrest fevers, and restore humoral balance. One of the first records of cupping in China is by Taoist alchemist and herbalist Ge Hong (281–341 CE) who prescribed the use of cups in the form of cattle horns for the draining of pustules, boils, and carbuncles. During the Qing Dynasty, Zhao Xuemin (1719–1805) included an extensive chapter in his materia medica on *huoquan qi* or “fire cupping”: the use of bamboo or pottery cups to treat headache, dizziness, abdominal pain, and snakebite.

In the 1950s, cupping was established as an official therapy throughout China; and today there are numerous Traditional Chinese Medicine (TCM) research institutes with ongoing clinical trials in cupping therapy (see below). In South Asia, cupping is a common therapeutic practice in Unani-tibb or Greco-Islamic medicine. Based on the principles of Hippocrates, Avicenna, al-Majusi and others, Unani-tibb advises the use of cupping (*al-hijamah*) to draw inflammation toward the surface of the body; divert inflammation from an important organ to a less important one; dispel humors from an affected organ; and alleviate pain. Unani physicians or *hakims*, like their TCM counterparts, use cupping to treat a number of muscular, circulatory, and neurological disorders.

Current Use of Cupping
In most parts of Asia and the Middle East, cupping is administered by medical practitioners, usually TCM doctors or Unani hakims. In the USA and other Western countries, cupping was historically introduced and practiced by immigrants from the Mediterranean and Asia in the 1800s and then spread to many parts of the USA flourishing as late as the 1930s in immigrant sections of large cities. On the Lower East Side of New York, cupping shifted from the domain of family doctors to barber shops, and one could see sign boards reading “cups for colds” on barber shop windows. Today, in rural parts of the Mediterranean, cupping is still practiced at home by families who put a set of cups in their first aid boxes or simply use a set of jam jars.

In the USA, Canada, Europe, Australia, and New Zealand, where there are sizable Asian communities (and hence an availability of trained practitioners) cupping is used alone or in tandem with other traditional therapies such as acupuncture, herbal medicine, massage, medicated steam, hydrotherapy, nutritional therapy, and in combination with biomedical treatments, such as pharmaceutical analgesics, nonsteroidal anti-inflammatory medications, orthopedic surgery, and physical and rehabilitative therapies.

For patients with arthritis, fibromyalgia, carpal tunnel syndrome, chronic back pain, chronic headache, and joint injuries, the appeal of cupping therapy is its use of low-tech equipment, its low cost, and its lack of side effects that might otherwise be experienced with analgesics. In the past decade, cupping has seen renewed popularity in the USA in the domain of complementary and alternative medicine (CAM) and health spas, with growing numbers of the general public using cupping, and more TCM and CAM practitioners training in the use of this therapy. New versions of “cellulite trimming” and “stress relief” cupping have cropped up on the menu of health spas in cities like New York and Los Angeles, creating an interesting contrast with the no-frills offerings found in Asian neighborhoods in Chicago, Los Angeles, New York, San Francisco, Toronto, Vancouver, and other cities, where cupping is still practiced in much the same way it has been for decades. Differences in technique and cultural milieu are reflected in cost: while a 30–40 min session with a holistic practitioner or spa technician can cost anywhere from $30 to $100, a session with a TCM practitioner in New York’s Chinatown is closer to $10–$20. By contrast, in China the average cost of a session is 12 Yuan ($1.60) compared with an average 56 Yuan ($7.30) for herbal therapy.

The Procedure and Outcome
There are two primary types of cupping: dry and wet. In dry cupping, glasses are applied to the skin and either a gentle vacuum pump or flame heat is used to purge air from the cup. As the glass cup cools on the skin and a seal is formed, pressure within the cup declines, sucking the skin into the cup. Cupping glasses are typically applied for 10–15 min to the back, neck, hips, legs, knees, or arms. Wet cupping involves minor scarification of the skin so that a small amount of blood is drawn. Today, wet cupping serves as a modern substitute for venesection, in which larger quantities of blood were let out. Two other classifications exist in cupping as well: stationary cupping, where each glass cup is left in position on the skin and the cup is not moved; and massage cupping, where the glass cups are moved around the skin in a massage-like technique.

In regard to clinical evidence for the efficacy of cupping, a 2010 meta-review of the clinical literature conducted by Huisstede and colleagues found no evidence of long-term results of cupping in the treatment of carpal tunnel syndrome, but did find evidence for short-term benefit and relief of symptoms. The combination of acupuncture and cupping has been found to be of greater benefit in the reduction of pain and inflammation associated with acute arthritis and the reduction of pain associated with fibromyalgia, compared to the use of either cupping or pharmacotherapy alone. Cupping has also been found to be effective in the treatment of acute arthritis when combined with herbal medicine; in the treatment of fibrositis; and in the treatment of intractable migraine, when combined with acupuncture.

From a sociocultural standpoint, qualitative studies of cupping therapy and its rich historical and contemporary uses in immigrant communities are seriously needed. Such studies will enable public health and medical providers to understand the range of therapeutic applications of cupping in TCM, Unani, CAM, and biomedical contexts and the cultural meanings of cupping in widely diverse immigrant communities (e.g., African, Asian, Arab, Mediterranean). Importantly, as the number of individuals seeking cupping therapy increases in Western countries, providers should also be familiar with this practice so as to prevent any social and legal conflicts that may emerge from mistaken diagnosis, such as when cupping welts are misinterpreted as signs of violence or abuse as has been the case in Europe and in the USA.

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Suggested Readings
Curandero

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Curandero is a Spanish term meaning “healer.” Curanderos (male healers) and Curanderas (female healers) are important community-based “folk” healers held in high regard within Latin American and Latino immigrant and transnational communities. Contemporary curanderos’ medical knowledge, beliefs, and practices are generally a mixture of pre-Hispanic medical cultures with Spanish and Catholic symbols and beliefs. The term curandero is a broad term that refers to a whole set of healers who utilize diverse methods in their practice. Each specialty has specific methods and a title that accompany it, and some curanderos specialize in more than one method. A yerbero/a is a herbalist who utilizes herbs to address health issues. A Sobador/a is a healer who utilizes massage to help alleviate pain or help a client recover from an illness or trauma. A Huesero/a is a bonesetter who manipulates injured bones, tendons, and muscles to alleviate pain and facilitate recovery from an injury. A espiritisto/a is a psychic medium who channels spirit beings and/or utilizes prayer to rid clients of physical, psychological, spiritual, and even social problems. A partera is a midwife who cares for pregnant women providing prenatal care as well as assistance with the birth of the child. Utilization of parteras in Latin America is widespread. For example, in some Mexican communities, parteras oversee a significant percentage, if not the majority, of births.

Curanderos often hear a “calling” to their profession and view this calling as a gift from God or other supernatural beings. Curanderos undergo an intense period of training during which their practical and spiritual knowledge is tested and affirmed. Generally, curanderos have a vast and specialized knowledge of the physical and supernatural worlds and employ this knowledge in their practice. Some curanderos/as are shamans who communicate directly with the supernatural through trance to heal. Curanderos attend to an individual’s physical, psychological, spiritual, and social well-being. This holistic approach to health is why many Latino immigrant communities seek out curanderos/as instead of, or in addition to, conventional medical care. Individuals and families seek out care from curanderos for diverse health issues that could range from cold relief to cancer. Certain curanderos can also address stresses associated with psychological or social states. For example, it is not out of the ordinary for an individual to approach a curandero for a limpia – cleansing with the goal of ridding themselves of a rash of bad luck that they are experiencing. A curandero is able to not only cleanse the person of the bad luck but provide for them an explanation of why they had the bad luck in the first place. Curanderos are the only source of care for common ethnospecific illnesses among Latino immigrant communities such as susto – fright, mal de ojo – the evil eye, or coraje – anger. Curanderos have the knowledge necessary to diagnose and treat these illnesses which historically have been dismissed by conventional medicine. There is, however, a growing set of research studies examining these types of ethnospecific illnesses and how they parallel the symptoms of conditions readily diagnosed in conventional medicine.