



**RESURGENCE OF HIJAMAH (CUPPING) THERAPY: A REVIEW**

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**ABSTRACT**

Al Hijamah (cupping therapy) is an important modality and is used widely in one form or another and is considered to be an important non pharmacological therapy in traditional systems of Medicine. Cupping is an ancient method which was practically used among the Chinese, Babylonians, Egyptians and Greeks. In Greece, history of cupping dates back to Hippocrate s(460-377 B.C) and is a treatment module in Unani system of Medicine. It is a formal modality of treatment in China and in some European countries. *European societies already have a shift in attitude to include complementary medicine within the conventional health care system.* Many studies have been carried out about its efficacy in pain management and various other diseases. The aim of this article is to discuss the therapy in detail and its possible mechanism of action.

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**INTRODUCTION**

*Al-Hijamah* (Cupping) is derived from an Arabic word “*Hajm*” which means “sucking or vacuum”[1] [2]. Originally Hijamah was known as ‘cupping’ because of the use of cups as therapeutic tool. According to the classical Unani literature it is a Unani regiminal mode of treatment which is carried out by application of a cup-shaped glass or plastic vessel on the body surface, creating vacuum by heat or by special suction apparatus [3]. There are two types of *hijama*: *Hijama bil shart* (Cupping with scarification) and *Hijama bila shart* (Cupping without scarification). First one is used for diversion and the later for the evacuation of morbid matter.[4][5][6][7][8][9] At first it was applied using cattle horn and consequently was also called ‘horn therapy’. To create a negative pressure inside the horn, the cupping practitioner used his mouth to physically suck the air out from a hole on top of the horn, thus creating a negative suction inside the horn. With the introduction of bamboo, earthenware and later on the glass cups, fire was ignited to expel the air. [10]

**History of cupping therapy**

Cupping therapy has been used in China and some African countries for several thousand years. It spread to the world from Egyptians and Greeks. It became a very popular therapy among European and American doctors and was practiced successfully for a wide range of diseases during the eighteenth century and after.

Many published research papers confirmed the efficacy of cupping therapy during the nineteenth century.[11] Ancient Chinese and ancient Egyptians were the first to practice cupping therapy. But in fact, the ancient medical texts that mentioned cupping therapy were written by ancient Egyptians.

**Earliest records of Cupping therapy:** The ancient medical book Ebers papyrus, written in 1550 B.C.E. Prescribed cupping therapy for many diseases and passed this art to the Greeks. Hippocrates (460 BC –370 BC) one of the greatest figures in the history of medicine, called the father of western medicine is also a famous cupping therapy user and recommended it for variety of diseases. Samuel Bayfield (1839) wrote, “Hippocrates was a minute observer, and has left us some striking remarks on the shape and application of the cups. He recommends that they should be small in diameter, conical in shape, and light in their weight, even when the disease for which they are applied is deeply seated”. Galen, the great physician and surgeon was one of cupping therapy users and he condemned Erasistratus, an Alexandrian physician, for not using cupping. Then the art of cupping therapy was passed through the Alexandrians and Byzantines to Arab Muslims and Asians. The canon of medicine, book by Avicenna, stated that cupping was known to be effective on more than 30 different diseases [11]. Also the location of the cups application of cupping therapy according to the lunar date and condition of the patient. He stated, “the second and third hours after getting up are the best hours for cupping. ‘Some authorities advise against applying cupping-glasses at the beginning of the lunar months because the humours are then not yet on the move or in a state of agitation; also against applying them at the end of the lunar month, because at that period (of the cycle) the humours are less plentiful. The proper time (according to them) is the

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middle of the month (when the humours are in state of agitation) and during time when the moonlight is increasing (when the humours are on the increase). During that period the brain is increasing in size within the skull, and the river water is rising in tidal rivers” [12]. Ibn Zakariyā Rāzī, (865 – 925) one of the best scientist and physician in history had benefited from cupping therapy in his treatment of many diseases [11].

**History of cupping therapy in Islam:** Prophet Mohammed (peace be upon him) the prophet of Islam, encouraged the use of cupping (hijama). The Prophet (PBUH) stated that, “the best medicine with which you treat yourselves is *Hijamah*; or it is one of the best of your medicines. [Sinin ibn Maja, vol 2, Al-hijamah. 351]. Ibn Abbas (may Allah be pleased with him) reported that the Prophet (PBUH) said “Healing is to be found in three things: Drinking honey, the knife of the cupper, and cauterization of fire”. [Al-Bukhari, 10/136]. It was reported from Ibn Abbas (may Allah be pleased with him) that the Prophet (PBUH) said: “the best time to be treated with *Hijamah* are the seventeenth, nineteenth or twenty-first of the month.” [Al-Tirmidhi, 2054] Later on this hadeeth has been proved scientifically. Gravitational forces exerted by the sun and moon cause the oceans to stretch creating low and high tide. As seventy percent of body’s composition is water, the tide’s range influences the humours of body. In the first and third quarter of moon, the sun and moon are separated by 90° when viewed from the earth, at this time the solar tidal force partially cancels the moon’s tidal force. So the tide’s range is minimum at this time. During first quarter the humours are deep seated and they are in static static state during last quarter of month. Hence during both these periods chances of losing good humours are more. Therefore doing hijamah on 17<sup>th</sup>, 19<sup>th</sup> and 21<sup>st</sup> of lunar month prevents the loss of good humours. [18]

Al-tibb al-nabawī was one of the famous Islamic books which was written by Ibn Qayyim al jawziyya and mentioned cupping therapy as a medical practice. Another book, Islamic Medical Wisdom – The Tibb al-A’imma, Imam Ali ibn Abu Talib also describes the benefits of cupping, sites of cupping along with the do’s and donts’. [10][13]

**Records of cupping in china:** Bo Shu, an ancient book written on silk, was discovered in an ancient tomb of the Han Dynasty in 1973. Some therapeutic cupping methods were also introduced in a book by Zouhou Fang in about 28 ad. In 755 AD, cases of treatment of tuberculosis were also recorded in Weitaimiyao. Susen Liang Fang, another ancient classic, recorded effective cure for chronic cough and the successful treatment of poisonous snake bites using cupping therapy which was found three hundred years later [10][14]. A famous surgeon, Wei Ke Zen Zong presented a detailed record of the cupping methods used in surgical practice about 500 years ago, [10][14]. Through several thousand years of accumulated clinical experience, the clinical applications of cupping have become increasingly wide. During the Jin dynasty, Ge Hong (281-341 ad), in his book A Handbook of Prescriptions for Emergencies, first mentioned the use of animal horns as a means of draining pustules [15]. Zhao Xueming of the Qing dynasty (1644–1911), in his Supplement to Outline of Herbal Pharmacopoeia, wrote a separate chapter on the subject under the heading ‘Fire-Jar Qi’. The original natural horn cup has been replaced by bamboo, ceramic or glass cups. Because cupping is widely used in Chinese folklore culture, the technique has been inherited by the modern Chinese clinical

practitioner. More than 200 years ago, a book was compiled entitled Ben Cao Gang Mu She Yi by Zhao Xue Ming, in which he describes in detail the history and origin of different kinds of cupping and cup shapes, functions and applications. In the 1950s the clinical efficacy of cupping was confirmed by further research in China and acupuncturists from the former Soviet Union, and was established as an official therapy practice in hospitals all over China [10].

**History of cupping in West:** Medicinal bleeding has been practiced since 15<sup>th</sup> century in Finland. They used wet cupping as complementary and alternative medicine by using cow horns. During the middle-ages bloodletting became so common that Barbers started practicing and they would display “bloodletting pole” outside their shops. Cupping became widespread in US. The traditional principles of cupping were being ignored as it was being carried out incorrectly by barbers and non-medico people, resulted in large number of adverse events and deaths. The traditional principles of hijama were ignored and it was incorrectly carried out by barbers and the people who had no medical knowledge which resulted in many adverse events and deaths. By 1800s the therapy was sharply criticised and discredited by modern medicine and the newly established model of medicine gained dominance. However in 1900s and early 20<sup>th</sup> century bloodletting managed to survive. Many published research papers confirmed the efficacy of cupping therapy during the nineteenth century [16]. Sir Arthur Keith (5 February 1866 – 7 January 1955): was a Scottish anatomist and a fellow of the royal college of surgeons of England and the president of the royal anthropological institute. He was famous because he discovered the sino atrial node in 1907. Sir Arthur Keith wrote how he witnessed cupping performed with excellent success [11]. The founder of Royal Free and Royal Marsden Hospitals in London, surgeon William Marsden (1796-1867), also employed cuppers in his Royal Free Hospital in Gray’s Inn Road, London, during the 1830s. He decided to open a hospital and freely treat the poor and enlisted surgeons and doctors who contributed their time free of charge, with the exception of a paid apothecary and a paid cupper [10]. Cupping therapy was also recommended in 1923 edition of the book *The Principles and Practice of Medicine*. As there was emergence of new medical knowledge, antibiotics and anti-pyretics along with scientific research based validation and negation of medical practices, cupping therapy completely waned in modern medicine in the western world within a few decades [16][17]. But, it still remained a part of Chinese medical therapy and the Muslim world including the countries with larger muslim populations like Malaysia and Indonesia. [16]

There was a tremendous resurgence of cupping therapy in muslim communities living in different parts of world in past 20 to 30 years and courses were being offered to both medical practitioners and other people. However in western countries like US, Canada and Australia, the practice of Hijamah was not permitted by non-medical people. As the procedure involves scarifying of the skin and exposure to the blood there is high risk of spreading infections like HIV and Hepatitis. So the authorities legislate the use of cupping therapy to qualified and registered medical practitioners and acupuncturists. [16]

### **Different Cupping Equipments and Types of Cupping Therapy**

**Glass Cups:** These cups are made of glass mostly without valve, having thick edges and they are easy to clean and sterilize. These cups are used for fire cupping as the vacuum is created by using alcohol swab ignited with fire then the cup is placed. [19][20]

**Pistol-Handle Valve Cups:** These cups are made up of clear Perspex material having a valve attached to its top used with a pistol shaped manual suction pump. These are most commonly used cupping sets for dry cupping and gliding or moving cupping. [19][20]

**Disposable Cupping Sets:** These are most commonly used cups especially for wet cupping as they can be disposed off immediately after use. The cups are made of clear plastic material and are affordable in terms of disposal. [19][20]

**Silicon cup:** These cups are self-suction cups and are more suitable for sensitive areas because of smooth edges and used for cosmetic cupping like cellulite on thighs and facial cupping. [19][20]

**Electronic Cupping Apparatus:** The cup is attached to the machine through an umbilical suction cord. The operator can adjust and control the suction strength and duration electronically. This type of device is now a days used in facial cupping and cellulite cupping etc. [19]

**Screw-Top Cups:** These are inexpensive cups with adjustable screw-threaded handle on its top attached to a piston-like suction pump inside the cup. The amount of suction required can be achieved by rotating the handle anticlockwise and clockwise. These are very less in use now a days. [19]

**Cups with Squeeze Rubber Tops/ self-suction cups:** These cups have hollow rubber handle attached to the top. The suction obtained by these type of cups is light to medium strength and is preferably used for children. [19][20]

**Bamboo Cups:** These cups are made of bamboo commonly used in China. The edges of bamboo cups are sharp compared to glass and plastic cups and another disadvantage of these cups is that the therapist cannot see the pressure or blistering inside the cups as they are not transparent. [19][20]

There are different types of cupping done different conditions and disorders.

Dry cupping is usually done in conditions like pain and to improve circulation in particular area. The suction is kept medium to prevent blistering, according to the requirement of suction. The cups are kept not more than 10-15 minutes and removed when hyperaemia is achieved or when it starts to bruise.

**Wet cupping/ Bleeding cupping/ Al-hijamah:** As the name suggests, blood is let out after scarifying the skin superficially by surgical blade and creating suction. This type of cupping is done to remove the morbidities of blood or removal of toxins and pathogenic substances from the body. Wet cupping is done under proper surgically aseptic condition.

**Moving cupping/ Massage cupping/ Gliding cupping:** By this type of cupping is a negative pressure massage done along some oil by creating partial pressure in the cups. Then cup is then slightly moved over the body surface. This is commonly

done in musculoskeletal disorders like neck pain, back pain etc. Also this is used in cosmetic procedures like facial cupping and for cellulite reduction.

**Flash Cupping:** In this type of cupping the cups are placed and removed frequently several times along the area being treated.

There are some other types of cupping but these are not practically in so much use like Herbal cupping in which herbal tincture or decoction is used within the cup, water cupping, ice cupping where ice is placed in the cup and hot cupping or Moxa cupping in which dried mugwort leaves or Moxa which is a great warming herb is used. [20]

### **Theories regarding mechanism of cupping therapy**

There are several theories which explain the mechanism of cupping therapy.

**Taibah theory:** This theory was proposed by El Sayed *et al.* that al-hijamah is an excretory procedure that clears the blood, lymphatics and interstitial spaces from CPS (Causative Pathological Substances) and noxious substances. It includes non-specific blood clearance, pain relief, pharmacological potentiation, restoring homeostasis etc. Prophetic method of wet cupping (Al-hijamah) in light of Taibah theory can be defined as a minor surgical excretory procedure by creating superficial skin scarifications to open skin barrier and creating a pressure gradient and a traction force across the skin and underlying capillaries to drain interstitial fluids and to enhance blood clearance and waste excretion through skin. [21] Al-hijamah is different from traditional wet cupping therapy confirmed by Huang, a Chinese scientist as it combines both types of cupping therapy in a single original Arabic technique. [22][23][24]. It has triple S method i.e. Suction, Scarification then second suction.[22] Both Chinese DCT & WCT can be regarded as partial forms of Al-hijamah.[24][25] El Sayed *et al.* confirmed the presence of many therapeutic benefits in Al-hijamah over Chinese wet cupping method.[23][24]

Pain gate theory states that there is a channel or gate that transfer the pain to the brain, while doing cupping therapy the channel transmits the pain from cupping area to the brain that interferes with the transmission of actual pain in the same gate or channel which ultimately kills the pain.

Prostaglandin theory explains that wet cupping therapy relieves the pain by removing prostaglandins out of the body which are inflammatory products produced at the site of tissue injury and transmits pain signals to the brain.

Endorphins and enkephalins are endogenous pleasure substances that are released in our body as a result of cupping which reduces pain and enhances the mood.

Increasing blood circulation theory Cupping therapy increases blood circulation by applying negative pressure and evacuating the morbid humours which contains inflammatory products and toxins by wet cupping and reduces inflammation and pain.

**Nitric oxide theory:** Nitric oxide is a substance which is released in the body as a result of injury. It is also released during and after cupping therapy. It has vasodilatation, anti-thrombotic effects, also causes muscle relaxation and reduces inflammation.

**Reflex zones therapy / Segment cupping therapy:** There are 31 pairs of spinal nerves, corresponding to the segment of

vertebral column. They carry motor, sensory and autonomic signals between spinal cord and the body. The body is divided into segments that begin with every vertebra. Cupping on C7 vertebra an elevation named hormone hump, used to treat hormonal imbalance like pituitary gland disease, diabetes mellitus and ovarian dysfunction. Application of cups to the skin activates the body through autonomic nervous system to bring it back to the state of health.

**Meridians system theory:** Meridians are the channels in the body. In chinese language meridian is Jing Luo, Jing means pathway and represents vertical channels and Luo means network which represents horizontal channels. Ancient Chinese believed that there was a network to distribute Qi (vital energy) and other substances to all the parts of body. The also believed that cupping therapy can treat stagnation of vital energy. Qi is divided into two equal and opposite foreces, Yin which represents female, passive, cold, water and darkness and Yang which represents male, active, warm, fire and light. The imbalance beteen these two forces results in disease or disturbs the healthy state. There are twelve meridians which are named to the corresponding organs, six of which are Yin meridians (Lung, heart, pericardium, spleen, kidney and liver meridian) and six are Yang meridians (Large intestine, small intestine, triple burner, stomach, bladder and gall bladder meridian) [27]

**Studies Done on Cupping Therapy**

Cupping therapy has been proven effective in many diseases and clinical conditions. There are number of clinical studies and meta-analyses done on the efficacy of cupping therapy or Hijamah. Various clinical studies carried out on cupping in patients of neck pain and shoulder pain showed that the cupping has potential therapeutic effect as it significantly decreased the neck and shoulder pain and improved quality of life in patients with chronic non-specific neck pain and shoulder pain. [28,29]. [30]. Also many studies have been carried out to evaluate the efficacy of cupping on low back pain. Kim *et al* in a clinical trial, concluded that wet cupping improved pain and the analgesic effect was maintained even after 2 weeks of follow-up. [31]. Another clinical study by Albedah *et al* also supported the use of wet cupping in reducing persistent non-specific low back pain and improving disability associated with low back pain [32]. Other clinical studies carried out by Farhadi *et al* and Hanan S. Ali, found wet cupping was significantly more effective in reducing pain and disability [33][34]. Studies have also been done to see the effects of cupping therapy in different types of arthritis like osteoarthritis and rheumatoid arthritis. In a clinical trail K Ullah *et al* evaluated the effects of wet cupping on anterior knee pain and he found significant difference in level of pain, range of motion and well-being pre and post cupping [35]. Sheikh Haneef Mohammad also evaluated the efficacy of Hijamah bish shart (wet cupping) in the treatment of knee osteoarthritis and found improvement in pain, stiffness and Range of motion [36]. Ehsan Ahmed *et al* evaluated wet-cupping in combination with Unani formulation for Waja ul mafasil (Arthritis) found it better when compared with oral unani formulation alone [37]. Ahmed *et al* in a clinical study evaluated blood-letting cupping in the management of rheumatoid arthritis, blood-letting cupping along with conventional therapy found to have immunomodulatory effects [38]. Dar A K. carried out a clinical trial to evaluate the efficacy and safety of hijamah in patients of knee osteoarthritis in which seven dry cupping sessions were given by applying

four cups on the knee over the period of one month. Dry cupping therapy was found to be effective and safe regimen in symptomatic management of knee OA [43]. Michaelson *et al* conducted a clinical trial in which cupping therapy was found to be safe and well tolerated and cupping of segmentally related shoulder zones appeared to alleviate the symptoms of carpel tunnel syndrome [39]. Ludke *et al* investigated the effectiveness of wet cupping in patients suffering from brachialgia paresthesia nocturna an found cupping effective in a defined connective tissue area (over the muscle trapezius) and has short term effects for at least one week [40]. Cupping has also be seen beneficial in sciatic pain as evaluated by Muhammad Bilal *et al* in a clinical study in which significant relief in pain was seen [42]

**Different types of Cups used for Al Hijamah (cupping) therapy**



**Different Types of Cupping Therapy**



Apart from musculoskeletal pain cupping therapy has also been found effective in treating migraine and tension headache and herpes zoster. Ahmedi *et al* in his study suggested the use of wet cupping along with standard care beneficial for migraine and tension headache [41]. Cao *et al* did a systemic review of randomized controlled clinical trials in which he concluded that wet cupping appears to be effective in treatment of herpes zoster [48]

Cupping therapy has also been found beneficial in hypertension, dyslipidaemia and found to have effects on biochemical markers like plasma creatinine, uric acid and ferritin. Studies done on hypertension found cupping therapy beneficial in lowering hypertension as M Zarei *et al* found in a clinical study showed significant decrease in systolic blood pressure [44]. Likewise, in another clinical trial done by N A Aleyeidi *et al*, and there was significant difference seen in systolic blood pressure upto eight weeks after hijamah [45]. M H Suhaily *et al* in a clinical trial saw the significant improvement in triglyceride, HDL and LDL which ultimately reduces the risk of cardiovascular diseases [46]. In another clinical study by M Niasari *et al* there was also substantial decrease in LDL cholesterol [58]. Wissam Bushra found significant decrease in plasma creatinine, uric acid levels and ferritin after 10-14 days of single session of wet cupping therapy [47].

Case studies done on skin conditions like psoriasis and cellulitis have found cupping therapy effective [50] [51]. Fahimi *et al* carried out a study to see the effects of wet cupping on blood components and skin related parameters in which venous blood samples and cupping blood samples were compared. The study found 17 metabolites and higher amount of aldosterone in cupping blood sample [49]. Cupping therapy has been proved beneficial in case of vitiligo, S A Sherif used suction blister grafting as epithelial grafting for recalcitrant patches of vitiligo and concluded that cupping can be used to obtain epithelial grafts for management of vitiligo [52][53].

Hijamah is also proved helpful in gynaecological disorders like PCOS and female infertility. A clinical study by H Abdul Jabbar carried out a clinical study to assess the efficacy of wet cupping in female infertility. The results showed significant reduction in levels of TSH and prolactin [55]. Another case study by Abiha Ahmed *et al*, wet cupping were given every week after eight sessions repeated ultrasound scan showed normal study [56].

Ultimately hijamah has good effects on quality of life. Al Jaouni *et al* carried out a study, it was concluded that wet cupping is promising in improving health related quality of life of patients having chronic illness [57]

## CONCLUSION

Cupping therapy and its different types have been used since ancient times. The history itself is evident of its effects. People have been benefitted since centuries by having treated with different types cupping therapy. Now safety and efficacy of this therapy has been proven through various scientifically carried clinical studies. In many diseases where conventional medicine is not so much of use cupping therapy has become a boon for such conditions. It has also proven very helpful as an adjuvant therapy along with conventional treatments of many diseases. Now a days when people have become drug abused,

the human bodies have become full of toxins and metabolic wastes, we are inhaling toxic air and having food with abundant of chemical fertilizers and steroids, everyone needs to get of these toxic substances which have accumulated in body in the form of morbid humors. Cupping therapy or Al-hijamah is the best treatment to get rid of these causative pathogenic substances and also for rejuvenation and immunomodulation hijamah works best.

## References

1. Arzani M A. Meezan-ut-tib. (Urdu Tr. By Kabiruddin). Daftarul Masih, Delhi, India. 147-148, 1940.
2. Sheikh. H.M., Zaman F., Jabeen A. Hijamah (cupping therapy): a noble method of treatment in Unani medicine. *Int. J. Res. Ayurveda pharma.* Mar-Apr 2015;6(2);207-215.
3. Mohammad SH, Fasihuzzaman, Jabeen A, Siddiqui MA. Al Hijamah (Cupping Therapy): A Brief Introduction With Modern Perspective. *Research and Reviews: A Journal of Pharmacognosy* 2014; 1(1): 1-6.
4. Baghdadi I. H. Kitab-ul- Mukhtarat fil-tibb. Urdu Translation by CCRUM. New Delhi (2005) part I, 277-278
5. Hamdani S.K.H. Usool e Tibb, Qaumi Council Barae Farogh Urdu Zaban, New Delhi, (2001), p. 473-475
6. Ibn e Sina. Alqanoon fil- tib, (English Translation by Department of Islamic Studies, Jamia Hamdard), New Delhi (1995), Book I, p.7, 177-179, 364-36713 Ibn e Sina, 1993
7. Jurjani S.I. Zakhira Khwarzam Shahi (Urdu Translation by Hadi Hussain Khan) Matba Nawal Kishore, Lucknow (1903), vol I, JILD SAUM, PP.220-225.
8. Nafees B. Kulliyat-e-Nafisi (Translated by Kabeeruddin). Idara Kitabul Shifa, New Delhi, India (1954) pp.765-768.
9. Masih IAQ, Kitab Umda fil Jarahat, (Urdu Translation), CCRUM (1986). Vol I. pp.194-199
10. Chirali Ilkay Zihni MBACC rchm, 2014, Traditional Chinese Medicine Cupping Therapy Third Edition, Churchill Livingstone, Edinburgh. UK. 1-5
11. Tamer Shaban, 2014, Cupping Therapy Encyclopedia, Copyright © 2014 Tamer Shaban. ISBN-13: 978-1494780517 ISBN-10: 1494780518, p: 12-15.
12. Al-Qanun Fi'l-Tibb, Canon of Medicine (1025).p-522
13. Imam Ali ibn Abu Talib, 2007, In: Newman, A.J. (Ed.), Islamic Medical Wisdom – The Tibb al-Aimma (B. Isphany, Trans.). Ansarian Publications, Qum, Iran
14. Chen Bin, Dr He Chong, personal communications, 1995
15. Chirali, I., 2007. , Traditional Chinese Medicine Cupping Therapy. Second Edition, Churchill Livingstone, Edinburgh. UK.
16. Osman-Latib Feroz. 2013, Islamic Cupping & Hijamah: A Complete Guide. EDI Publishers 11 Mandrill Street Lenasia 1827, South Africa. 22-26
17. Mulla G., Rais-ur-Rehman, Ghawte S.A. 2013, Avicenna Research Publication, Mumbai. India. p-13
18. Mulla G., Rais-ur-Rehman, Ghawte S.A. 2013, Avicenna Research Publication, Mumbai. India. p-25
19. Chirali Ilkay Zihni MBACC rchm, 2014, Traditional Chinese Medicine Cupping Therapy Third Edition, Churchill Livingstone, Edinburgh. UK. p :8-16

20. Tamer Shaban, 2014, Cupping Therapy Encyclopedia, Copyright © 2014 Tamer Shaban. ISBN-13: 978-1494780517 ISBN-10: 1494780518, p: 48-53
21. Mahmoud HS, Abou-El-Naga M, Omar NAA, El-Ghazzawy HA, Fathy YM, *et al.* (2013) Anatomical Sites for Practicing Wet Cupping Therapy (Al-Hijamah): In Light of Modern Medicine and Prophetic Medicine. *Altern Integ Med* 2: 138. doi:10.4172/2327-5162.1000138
22. El Sayed SM, Mahmoud HS, Nabo MMH (2013) Medical and Scientific Bases of Wet Cupping Therapy (Al-hijamah): in Light of Modern Medicine and Prophetic Medicine. *Altern Integ Med* 2: 122. doi:10.4172/2327-5162.1000122
23. El Sayed SM, Al-qulity AS, Mahmoud HS, Baghdadi. Therapeutic benefits of Al-Hijamah: In Light of Modern Medicine and Prophetic Medicine. *American Journal of Medical and Biological Research*, 2014, Vol. 2, No. 2, 46-71 Available online at <http://pubs.sciepub.com/ajmbr/2/2/3> © Science and Education Publishing DOI:10.12691/ajmbr-2-2-3
24. El Sayed SM, Mahmoud HS and Nabo MMH. Medical and scientific bases of Wet Cupping Therapy (Al-Hijamah): In Light of Modern Medicine and Prophetic Medicine. *Altern Integ Med*. 2013; 2: 1-16
25. El Sayed SM, Mahmoud HS and Nabo MMH. Methods of Wet Cupping Therapy (Al-Hijamah): In Light of Modern Medicine and Prophetic Medicine. *Altern Integ Med*. 2013; 2: 1-16.
26. P. Mehta, V. Dhapte *et al*, Cupping therapy: A prudent remedy for a plethora of medical ailments, *Journal of Traditional and Complementary Medicine* 5 (2015) 127-134
27. Tamer Shaban, 2014, Cupping Therapy Encyclopedia, Copyright © 2014 Tamer Shaban. ISBN-13: 978-1494780517 ISBN-10: 1494780518, p: 20-39
28. RomyLauche, HolgerCramer, ClaudiaHohmann, Kyung-EunChoi, ThomasRampp, FelixJoyontoSaha, FraukeMusial, JostLanghorst, and GustavDobos. The Effect of Traditional Cupping on Pain and Mechanical Thresholds in Patients with Chronic Nonspecific Neck Pain: A Randomised Controlled Pilot Study. Hindawi Publishing Corporation Evidence-Based Complementary and Alternative Medicine Volume 2012, Article ID 429718, 10 pages
29. Müzeyyen Arslan Nurcan Gökgöz Şenol Dane. The effect of traditional wet cupping on shoulder pain and neck pain: A pilot study. *Complementary therapies in clinical practice*. 23. May 2016, 30-33
30. Shazia Anjum, Atiya Anjum, Shazia Jilani, Javed Jameel. M. Junaid Siddiqui. A clinical study to evaluate the efficacy of Hijamat-bila-shart (dry cupping) on non-specific neck pain and its potential role in improving the health-related quality of life. *Asian Journal of Complementary and Alternative Medicine*, 04(11), 2016,11-16.
31. Jong-In Kim, Tae-Hun Kim, Myeong Soo Lee, Jung Won Kang, Kun Hyung Kim, Jun-Yong Choi, Kyung-Won Kang, Ae-Ran Kim, Mi-Suk Shin, So-Young Jung and Sun-mi Choi. Evaluation of wet-cupping therapy for persistent non-specific low back pain: a randomised, waiting-list controlled, open-label, parallel-group pilot trial. *Trials* 2011, 12:146
32. Abdullah AlBedah, MBBS, FFCM, Mohamed Khalil, MSc, MPH, MD, Ahmed Elolemy, MD, MSc, Asim A. Hussein, MPH, FCM, Meshari AlQaed, MBBS, Abdullah Al Mudaiheem, MBBS, Raid A. Abutalib, SSC-Orth, MHCA, Faisal Mohamed Bazaid, MBBS, Ahmad Saeed Bafail, MBBS, AboBakr Essa, FRCS Ed, FRCSI, and Mohammed Yahia Bakrain, SBO, ABO4. The Use of Wet Cupping for Persistent Nonspecific Low Back Pain: Randomized Controlled Clinical Trial. *The Journal Of Alternative And Complementary Medicine* Volume 21, Number 8, 2015, pp. 504–508
33. Khosro Farhadi David C. Schwebel Morteza Saeb Mansour Choubsaz Reza Mohammadi Alireza Ahmadi. The effectiveness of wet-cupping for nonspecific low back pain in Iran: A randomized controlled trial. *Complementary therapies in medicine*. 17:1, January 2009, 9-15
34. Hanan, S. Ali. and Eman, S. El-Said Cupping Therapy (Al-Hijama): It's Impact on Persistent Non-Specific Lower Back Pain and Client Disability. *Life Sci J* 2013;10(4s): 631-642
35. K Ullah, A Younis, M Wali. An investigation into the effect of Cupping Therapy as a treatment for Anterior Knee Pain and its potential role in Health Promotion.. *The Internet Journal of Alternative Medicine*. 2006 Volume 4 Number 1.
36. Sheikh, Haneef Mohammad, *et al.* Therapeutic Evaluation of Hijamat Bish Shart In The Treatment Of Knee Osteoarthritis. New Delhi: Faculty of Medicine (Unani), Jamia Hamdard, 2012.
37. Ehsan Ahmad, *et al.* Hijamat bish Shurut in combination with Unani formulation for Waja ul Mafasil. New Delhi: Department Of Moalijat (Medicine), Faculty Of Medicine (U), Jamia Hamdard, 2006.
38. Ahmed SM, Madbouly NH, Maklad SS, Abu-Shady EA. Immunomodulatory effects of blood letting cupping therapy in patients with rheumatoid arthritis. *Egypt J Immunol*. 2005;12(2):39-51.
39. AndreasMichalsenSilkeBock<sup>‡</sup>RainerLüdtke<sup>§</sup>ThomasRampp<sup>‡</sup>MarcusBaecker<sup>‡</sup>JürgenBachmann<sup>¶</sup>JostLanghorst<sup>‡</sup>FraukeMusial<sup>‡</sup>Gustav J.Dobos<sup>‡</sup> Effects of Traditional Cupping Therapy in Patients With Carpal Tunnel Syndrome: A Randomized Controlled Trial. *Journal of Pain*. 10:06, 2009, 601-608
40. Rainer Ludke, Uwe Albrecht, Rainer Stange, Bernhard Uehleke. Brachialgia paraesthetica nocturna can be relieved by “wet cupping”-Results of a randomised pilot study. *Complementary therapies in medicine*. Dec 2006, Volume 14,issue 4,247-253.
41. Alireza Ahmedi, Dawid C. Schwebel and Mansour Rezaei. The efficacy of wet-cupping in the treatment of tension and migraine headache. *The American journal of chinese medicene*. Vol.36, no.1 37-44.
42. Bilal, M. and Khan, R.A. (2016) Therapeutic Effectiveness of Hijama in Sciatica Pain. *Pharmacology & Pharmacy*, 7, 326-330. <http://dx.doi.org/10.4236/pp.2016.78040>
43. Dar Abdul Kabir, Lone Azad Hussain, Haji Amanullah. Therapeutic application of Al hijamah (cupping therapy) in osteoarthritis of the knee. *International Journal of Research and Development in Pharmacy and Life Sciences*. April-may 2015, 4(3), 1540-1544

44. . Mohammad Zarei(1), Shirin Hejazi(2), Seyed Ali Javadi(3), Hojatollah Farahani(4). The efficacy of wet cupping in the treatment of hypertension. *ARYA Atherosclerosis Journal* 2012; Volume 8, Special Issue in National Hypertension Treatment
45. Aleyeidi NA, Aseri KS, Matbouli SM, Sulaiamani AA, Kobeisy SA. Effects of wet-cupping on blood pressure in hypertensive patients: a randomized controlled trial. *J Integr Med.* 2015; 13(6): 391-399.
46. Majid Niasari, Farid Kosari, and Ali Ahmadi. The Effect of Wet Cupping on Serum Lipid Concentrations of Clinically Healthy Young Men: A Randomized Controlled Trial. *The Journal of Alternative and Complementary Medicine.* January 2007, Vol. 13, No. 1: 79-82
47. Wissam Bushra Mohammed Salih. The effect of blood cupping on plasma creatinine and uric acid levels. Sudan University of science and technology (SUST). August 2017
48. Therapeutic Effect of Aciclovir Combination with Collateral-Puncturing and Cupping in the Treatment of 40 Cases of Herpes Zooster, Tianjin Pharmacy 2004, 16, 23-4.
49. Mehdi Fahimi, Nooshafarin Kazemikhoo, Fataneh Hashem Dabaghian, AydaIrvani, Farideh Vahabi, Mehri Azadi, Sedigheh Sadeghi, Fahimeh Mirkhani, Mohammad Arjmand, Zahra Zamani, FereshtehAnsari, and Roshanak Gods. Effects of Wet Cupping on Blood Components Specially Skin-Related Parameters of Healthy Cases: A Case Control Metabonomic Study. *Journal of Skin and Stem Cell.* In Press (InPress): e12654. Published online 2016 June 21.
50. Imran Ahmed Malik, Sohail Akhtar, Mohammad Amjad Kamal. Treatment of psoriasis by using hijamah: a case report. *Saudi journal of biological sciences* (2015) 22, 117-121
51. Asif Ahmed\*, Rafeeq Alam Khan, Amjad Ahsan Ali and M. Ahmed Mesaik. Effect of Wet Cupping Therapy On Virulent Cellulitis Secondary To Honey Bee Sting – A CASE REPORT. <http://www.ahealth.co.uk/case-report-hijama-for-virulent-cellulitis-caused-by-honey-bee-sting>
52. Awad Sherif Shoukry. Chinese Cupping: A Simple Method to Obtain Epithelial Grafts for the Management of Resistant Localized Vitiligo. *Dermatol Surg* 2008;34:1186-1193
53. Awad Sherif Shoukry. Depigmentation during vitiligo activity spares epithelial grafted areas. *Journal of Cosmetic Dermatology.*2016, 0, 1-4
54. Seyed Reza Vakilinea1, Davood Bayat1, Majid Asghari1, Hijama (Wet Cupping or Dry Cupping) for *Diabetes Treatment Iran J Med Sci Supplement* May 2016; Vol 41 No 3
55. Abiha Ahmad Khan1 Wajeeha Begum2 Mariyam Roqaiya. Treatment of polycystic ovarian syndrome by wet cupping-a case report. *Jour. of Ayurveda & Holistic Medicine* Volume-III, Issue-III.41-45.
56. Hassan Abduljabbar\*, Anhar Gazzaz, Samiha Mourad, Ayman Oraif. Hijama (wet cupping) for female infertility treatment: a pilot study. *International Journal of Reproduction, Contraception, Obstetrics and Gynecology.* 2016 Nov;5(11):3799-3801
57. Soad K. Al Jaouni, MD, FRCPC, Eman A. El-Fiky, MD, MSc, Samiha A. Mourad, MBDCH, MBBCh, Nahla Khamis Ibrahim, PhD, MPH (Epidemiology), Abdullah M. Kaki, MD, FRCPC, Sawsan M. Rohaiem, PhD, MSc, Mohamad H. Qari, FRCPA, MBBCh, Laila M. Tabsh, MPH, DHA, Adel A. Aljawhari, SBGS, MBBCH. The effect of wet cupping on quality of life of adult patients with chronic medical conditions in King Abdulaziz University Hospital. *Saudi Med J* 2017; Vol. 38 (1), 53-62

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