

Unveiling the Potential of Dry Cupping (Hijama Bila Shurt) in Managing Ihtibas al Tamth Sanvi (Secondary Amenorrhoea): A Comprehensive Review

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Abstract

Amenorrhea, the absence of menstruation in women of reproductive age, is a significant indicator of underlying health concerns, classified as primary or secondary. Primary amenorrhea refers to the absence of menarche by age 16, while secondary amenorrhea is defined as the cessation of menstruation for at least six months in women who previously menstruated. In Unani medicine, amenorrhea, termed Ihtibas al-Tamth, is attributed to imbalances in bodily humors, including Su'-i-Mizaj (abnormal temperament) and Du'f al-Quwwat-i-Dafia (weakened expulsive power). Causes may include anatomical abnormalities, ovarian dysfunction, or endocrine disturbances, often accompanied by symptoms such as headaches, nausea, fatigue, and abdominal pain. Unani treatments encompass dietary modifications, lifestyle changes, and herbal remedies like Habb-i-Mudir, Kushta Faulad, and Safoof Muhazzil, alongside regimenal therapies such as Fasd-i-Safin, Hammam-i-Murattib, and Hijama-i-Nariya. Cupping therapy (Al-hijamah), rooted in prophetic medicine, is increasingly recognized for its therapeutic effects in eliminating pathological substances from blood, lymph, and intercellular fluids through negative pressure suction. This practice facilitates the removal of excess lipids, uric acid, and autoantibodies, promoting immunity and cardiovascular health. Its potential in managing hyperlipidemia, hypertension, and musculoskeletal pain underscores its significance. Integrating Unani principles with modern medical insights could enhance treatment outcomes for amenorrhea and related conditions. Further research is needed to explore these holistic approaches within contemporary healthcare. The present study has been a comparative clinical innovative approach in this direction.

Keywords: Ihtibas al-Tamth Sanvi; Secondary Amenorrhea; Hijama Bila Shurt; Dry Cupping Therapy; Mudir Haiz; Unani Medicine

Introduction

Secondary amenorrhea is defined as the absence of menstrual periods for three consecutive months in women with previously regular cycles or for six months in those with previously irregular cycles [1]. This condition sometimes overlaps with oligomenorrhea, which is characterized by infrequent menstrual cycles occurring at intervals of 39 days to six months or resulting in five to seven cycles per year [2,3]. Among women of reproductive age, the prevalence of secondary amenorrhea is approximately 3%, while oligomenorrhea is more common, affecting around 10.2% [4,5].

The most frequent cause of secondary amenorrhea is hypogonadotropic disorders due to hypothalamic suppression, particularly Functional Hypothalamic Amenorrhea (FHA), which often arises from various stressors without evidence of systemic or endocrine abnormalities [6,7]. Another common cause is ovulatory dysfunction, primarily associated with polycystic ovary syndrome (PCOS), a prevalent endocrine disorder among women [3,8,9].

Treatment for secondary amenorrhea and oligomenorrhea often involves empirical hormone therapy, particularly estrogen and progesterone administration [10]. However, hormone therapy may be accompanied by potential complications [11].

In traditional medicine, dry cupping therapy is sometimes used to manage secondary amenorrhea by promoting blood circulation, reducing inflammation, and inducing relaxation, though scientific evidence supporting its efficacy remains limited. By integrating traditional practices with modern medical understanding, cupping therapy presents a holistic approach to restoring menstrual health and enhancing overall well-being.

The concept of Ihtibās al-Tamth

Historical perspectives on the conditions of Ihtibas al Tamth can be traced back to the influential Persian physician Ibn Sina (Avicenna) (980-1037 AD). In his renowned medical text, *Al-Qanun fi al-Tibb* (The Canon of Medicine), he dedicates the twenty-first chapter of the third book to uterine disorders, highlighting various aspects of menstrual irregularities [12,13].

In classical Unani literature, Ihtibas al Tamth refers to the cessation or irregularity of menstruation, ranging from a scanty flow to complete absence or occurring at intervals of two months or more. According to Ali Ibne Abbas Majusi, the natural process of menstrual discharge and its cessation should occur seamlessly through the body's innate power (tabiyat) [13].

Women generally begin menstruating between the ages of 8 and 14 years, continuing until around 60 years of age. A normal menstrual flow lasts between 2 to 7 days; any duration beyond this is considered abnormal. As menstruation approaches, a woman may feel heaviness in her body. When menstruation occurs at extended intervals, women often experience severe pain as the accumulated blood is expelled forcefully [13].

The period of cleanliness from menstruation (zaman al-tahar) should last at least 20 days, with a maximum interval of up to 2 months. If menstruation resumes after a 2-month gap, it is classified as amenorrhea [13].

Ali Ibne Abbas Majusi observed that women who menstruate much earlier than 14 years old tend to be thin and weak, often experiencing shorter lifespans due to an excessively hot temperament, which dilates the menstrual vessels prematurely. Conversely, women who menstruate much later are often sluggish and restless due to a cold and dry temperament, causing the vessels to remain narrow, thickening the menstrual blood and hindering its flow. This imbalance may lead to internal dispersion of blood instead of proper expulsion [14].

In Unani medicine, Ihtibas al Tamth (Amenorrhea) is defined as the absence or cessation of menstrual flow, attributed to an imbalance of bodily humors (Akhlat), particularly Dam (blood) and Balgham (phlegm). This disruption in the natural cycle reflects a disturbance in the body's internal harmony [13].

Causes of Ihtibas-al-Tamth in Unani medicine [14,15]

According to Unani scholars, amenorrhoea, referred to as "Ihtibas-al-Tamth," arises from various underlying causes rooted in the imbalance of humors (Akhlat) and disturbances in the body's natural temperament (Mizaj). The following factors are considered significant in the development of amenorrhoea:

- **Su'e-Mizaj (I'll Temperament):** An imbalance in the body's humors disrupts normal physiological processes. Specifically:
- **Su'e-Mizaj Barid (Cold Temperament):** Cold temperament leads to the constriction of blood vessels, reducing blood flow and circulation, ultimately suppressing the menstrual flow.
- **Su'e-Mizaj Haar (Hot Temperament):** Excessive heat dries and thickens the blood, hindering its flow and preventing menstruation.
- **Inseadaad (Blockage) [14]:** Obstruction in the uterine vessels due to thick or viscid humors, such as phlegm or abnormal fluids, can prevent the proper flow of blood, leading to amenorrhoea. This blockage may result from an accumulation of waste products or pathological humors.
- **Za'f-e-Aza (Weakness of organs):** The weakness of reproductive organs, including the uterus, ovaries, or blood vessels, reduces their ability to function optimally. Insufficient blood supply to the reproductive organs can also contribute to amenorrhoea.
- **Qillat-e-Ghiza (Nutritional deficiency):** A poor diet lacking essential nutrients leads to insufficient blood formation. Inadequate nutrition weakens the body's ability to produce menstrual blood, resulting in delayed or absent periods.
- **Emotional factors:** Psychological conditions such as stress, anxiety, and depression can disrupt hormonal balance, leading to irregular or absent menstrual cycles. The Unani system recognizes the profound connection between mental and physical health.
- **Lifestyle factors:** Unhealthy lifestyle practices, such as excessive physical exertion, lack of rest, or extreme dieting, can deplete the body's vital energy (Ruh), leading to hormonal imbalances and menstrual irregularities.

Clinical features of Ihtibas-al-Tamth [15]

Women experiencing amenorrhoea in Unani medicine often present with various symptoms, including: Absence of menstruation for an extended period, Pelvic discomfort or a feeling of heaviness in the lower abdomen, Bloating and abdominal distension due to the retention of humors, Headache and dizziness, often attributed to humoral imbalance, Fatigue and generalized weakness, Emotional instability, irritability, or anxiety due to hormonal changes, Skin dullness and hair fall, resulting from hormonal imbalance and inadequate nutrition [14,15].

Management of Ihtibas-al-Tamth (Amenorrhoea) in Unani medicine

Amenorrhoea, referred to as Ihtibas-al-Tamth in Unani medicine, is the absence of menstruation due to an imbalance in the body's humors (Akhlāt), particularly the dominance of cold and dry temperaments that disrupt blood flow to the reproductive organs [16,17]. This condition may be primary or secondary. The Unani approach aims to restore balance, enhance blood circulation, and strengthen reproductive organs.

Ilaj bil Ghiza (Diet therapy) [15,16]

Diet therapy in Unani medicine emphasizes consuming foods that strengthen blood production, restore humoral balance, and provide warmth to counteract cold temperaments. Nutrient-dense foods like dates, figs, and almonds are considered excellent for enhancing blood production and vitality. These foods are rich in iron, vitamins, and minerals that support hematopoiesis. Additionally, warming spices such as garlic, ginger, and cinnamon are used for their carminative, stimulant, and uterine tonic properties. These ingredients help alleviate coldness and dryness, stimulating uterine function and blood circulation.

Ilaj bil Dawa (Pharmacotherapy)

Unani medicine utilizes herbal preparations tailored to address the root cause of amenorrhoea.

- **Mufatteh-i-Urooq (Vasodilators):** These agents work by dilating blood vessels, enhancing circulation, and removing or cleaning obstructions that can lead to menstrual irregularities. Notable examples include Barg Sana (Senna leaves), Abhal (*Juniperus communis* L.) Habb-e-Muqil (*Commiphora myrrha*), and Habb-e-Kabid Naushadri (Ammonium Chloride).
- **Mughaliz-i-Dam (Blood Purifiers):** These herbal remedies purify and enrich the blood, supporting healthy menstruation. Sharbat Unnab (*Ziziphus jujuba* syrup) and Sharbat Bazoori (herbal syrup with diuretic and purifying properties) are commonly prescribed.
- **Muqawwi Rahim (Uterine Tonics):** Uterine tonics strengthen reproductive organs, regulate menstrual cycles, and alleviate uterine weakness. Asgandh (*Withania somnifera*), Sumbul-ut-Teeb (*Nardostachys jatamansi*), and Zafran (Saffron) are beneficial for their adaptogenic, nervine, and warming effects.

Ilaj bil Tadbeer (Regimenal therapy): Regimenal therapy in Unani medicine employs physical methods to restore balance and treat ailments.

- **Hammam (Steam bath):** Steam baths relax muscles, improve circulation, and relieve menstrual pain. The warmth generated helps balance cold temperaments, facilitating menstrual flow.
- **Riyazat (Exercise):** Moderate exercise is recommended to promote hormonal balance, reduce stress, and improve circulation. Exercises that strengthen the abdominal and pelvic muscles are particularly beneficial.
- **Hijama (Cupping therapy):** Cupping therapy involves drawing out stagnant blood to purify and rejuvenate the body. It is used to relieve stagnation, promote blood flow, and enhance the regularity of menstruation.

Hijama therapy: Cupping has been a long-standing therapy to prevent and treat a wide range of problems in different cultures and societies. There are different types of cupping, dry and wet cupping as main divisions. There is no skin scratching in dry cupping, and it is also divided into two thermal and cold types based on the factors which produce negative pressure. In the cold procedure, suction pumps or inspiration suction power are used, and in the thermal procedure, a flame is used to create a negative pressure [16,18].

Hijama Bila Shurt (Dry cupping): Dry cupping is a traditional therapy that involves placing cups on the skin to create suction. Unlike wet cupping, it doesn't involve any incisions or bloodletting. The therapy is believed to promote blood flow, reduce muscle tension, and encourage the body's natural healing processes.

Mechanism of Cupping therapy [18,19]

- **Improved blood circulation:** Dry cupping, which involves creating suction on the skin with cups, is believed to enhance blood flow to the affected areas.
- **Reduced inflammation:** Some physician believe that cupping can help reduce inflammation, which may contribute to menstrual irregularities.
- **Relaxation and stress reduction:** The practice of cupping can promote relaxation and reduce stress, which can sometimes play a role in menstrual problems. Cups made of glass, bamboo, or silicone are placed on the skin.
- **Suction creation:** Suction/vacuum is created by either heating the air inside the cup or using a pump. This draws the skin and underlying tissues upward. Therefore, underlying fluid temporary shift one direction to other ultimately improve in congestion as well in circulation.
- **Procedure duration:** The cups are left in place for about 5 - 15 minutes [18,19].

Benefits of dry cupping:

- **Pain relief:** Commonly used for back pain, neck pain, and muscle tension.
- **Improved blood circulation:** Enhances oxygen and nutrient delivery to tissues.
- **Relaxation:** Helps reduce stress and promote relaxation.
- **Detoxification:** Believed to help remove toxins from the body [19].

Ila j bil Yad (Surgical therapy) [14]: Rarely required, but in severe cases of obstruction, surgical intervention may be recommended.

Preventive measures [16]

Adopting a holistic approach to health can effectively prevent various health issues and promote overall well-being. A balanced diet rich in warm, nourishing foods is highly beneficial. Consuming easily digestible meals, including whole grains, lean proteins, and vegetables, helps maintain optimal digestion and supports metabolic health. Warm foods, such as soups, stews, and herbal teas, can enhance circulation, soothe the digestive system, and support hormonal balance.

Managing stress is equally crucial, as chronic stress can disrupt hormone levels and weaken the immune system. Incorporating relaxation techniques, such as meditation, deep breathing exercises, and mindfulness practices, can help calm the mind, reduce stress, and enhance mental clarity. Regular relaxation can also promote emotional stability and support the body's natural healing processes.

Consistent physical activity is vital for maintaining a healthy metabolism, balancing hormones, and improving circulation. Moderate exercise, such as walking, jogging, swimming, or yoga, is recommended to enhance overall fitness without overstraining the body. Exercises that specifically strengthen the abdominal and pelvic muscles, such as Pilates or targeted core workouts, can improve stability, posture, and support reproductive health.

These preventive measures contribute to long-term health and vitality by promoting physical, mental, and emotional balance.

Discussion

Diseases of the female reproductive system present complex challenges for modern medicine, with menstrual irregularities being among the most prevalent gynecological concerns. These disturbances significantly impact women's physical, mental, and social well-being [5-7]. Amenorrhea, characterized by the absence of menstruation, can arise from various causes and lead to complications such as infertility, pregnancy-related issues, cardiovascular disorders, metabolic conditions like diabetes, hypertension, and fatty liver, as well as psychological concerns, including anxiety and depression. These effects collectively diminish women's quality of life (QoL). Due to growing apprehension about the side effects associated with hormonal therapies, many women are increasingly exploring alternative and complementary medicine options [1,2]. One such approach is Unani System of Medicine (USM), which emphasizes lifestyle modifications and the therapeutic use of medicinal plants [8,9].

In Unani classical literature, cupping therapy (Hijama) is revered for its effectiveness in treating various ailments by promoting blood circulation, detoxifying the body, and restoring humoral balance (Akhlat) [14,15]. Amenorrhea is often linked to an imbalance of phlegmatic (Balghami) and melancholic (Saudawi) humors in Unani medicine.

Classical texts suggest that wet cupping (Hijama bil Shurt), along with supportive regimens such as massage, steam therapy, and herbal remedies, can restore menstrual flow by eliminating obstructive factors and stimulating uterine function. Dry cupping (Hijama bila Shurt), on the other hand, may stimulate uterine vessels and thereby facilitate the expulsion of morbid material from the uterus [17,18].

However, its therapeutic role in managing amenorrhea remains largely unexplored in scientific research. While dry cupping is recognized for enhancing localized blood circulation and relieving muscular tension, it does not directly expel morbid humors, which is a key therapeutic principle in Unani medicine. Classical sources emphasize its potential benefits in gynecological disorders, but further clinical studies are needed to evaluate its specific efficacy in amenorrhea. Since anemia itself can contribute to amenorrhea, dry cupping may, in certain cases, prove more beneficial than wet cupping.

Conclusion

Cupping therapy, a traditional practice in the Unani System of Medicine, has been used for centuries to treat various gynecological conditions, including menstrual disorders. Some studies suggest that both dry and wet cupping can positively impact menstrual cycles and alleviate pain. However, there is a lack of comprehensive review studies on the application of cupping for midwifery and obstetrics, highlighting the need for more rigorous scientific research to understand its effectiveness, particularly for conditions like secondary amenorrhea.

Unani medicine offers a holistic approach to managing Ihtibas-al-Tamth (amenorrhea) by restoring the natural balance of humors, enhancing blood circulation, and strengthening reproductive organs. This integrated method supports effective management of amenorrhea, promotes overall reproductive health, and helps prevent complications, making it a promising area for further investigation. In this connection the study has been going on to stimulate the uterine axis through a comparative clinical innovative approach.

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Conflict of Interest

The authors declare that there are no conflicts of interest.

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