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Wound Healing After Wet Cupping Therapy (Descriptive) at Fort De Kock University, Bukittinggi

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ABSTRACT

***Background**: Cupping is one part of Complementary And Alternative Therapy (CAT) therapy. The benefits of cupping therapy are claimed to maintain health by removing toxins from the body, but scars are at risk of infection if not done properly . The purpose of this study was to determine the picture of cupping wound healing after 3 days of treatment. **Methods**: This study is quantitative with a descriptive research design. The population in this study were cupping patients aged 18-26 years, with a sample size of 200 people, sampling by purposive sampling , this study used a research instrument for measuring secondary wound healing issued by the Nursing Outcomes Classification (NOC), data were analyzed univariately. **Results**: The results of the univariate analysis showed that all 100% of patients who underwent cupping therapy had a good wound healing process, none of whom were found to have wound infections after 3 days after wet cupping. **Conclusion**: It is expected that every nurse who performs cupping therapy will continue to pay attention to standard operating procedures (SOP), sterile principles and disinfectant areas of the injection.*

Keywords:
Wound healing, wet cupping therapy, cupping infection

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Introduction

Cupping is one part of *Complementary and Alternative Therapy* (CAT), scientifically proven cupping therapy is claimed to maintain health by removing toxins from the body (Y. H. C. Purnama, 2018) . If the disease suffered is a disease that can be cured by cupping, then the use of cupping is highly recommended, and the use of cupping therapy is very popular in Indonesia (Ikhwan et al., 2023) . And every action carried out certainly has desired and undesired effects, in general what happens is like cupping, but some patients do not experience side effects of cupping, but unavoidable effects such as itching and swelling (Putri et al., 2023) , the possibility of a risk of infection due to non-sterile procedures is a scary thing that patients have seen in electronic news, but this can also be a scary thing for some people who have never had cupping therapy (Putri & Syukri, 2022) .

Side effects of cupping are a factor that can be a source of fear for patients due to negligence on the part of nurses. Some of these side effects include the appearance of round, reddish marks on the skin, resembling bruises. However, this is nothing to worry about, as these marks usually disappear on their own within 1-2 weeks. However, some side effects of cupping that you should be aware of include: (a) Burns, this can occur if the cup/saucer used sucks the skin too hard so that the skin becomes susceptible to burning. (b) Incision wound infection. In wet cupping, the therapist must make incisions to drain blood. These wounds can

become entry points for bacteria or other germs into the body, leading to infection. (c) Disease transmission, if the sharp object used to make an incision on the skin is not sterile or has been used repeatedly; it can increase the risk of transmitting diseases such as HIV/AIDS and hepatitis. (d) Dizziness due to the blood loss. However, not everyone experiences this side effect.

Post-Cupping Wound is defined as the breaking of The continuity of body tissue due to physical, mechanical, chemical, and thermal causes. Wounds, whether open or closed, are one of the most common problems encountered in daily practice and in the emergency room. The primary goal of wound management is to achieve rapid healing with optimal function and aesthetic results. Evaluation techniques that can be used to assess the healing of cupping wounds include secondary wound healing, namely the level of cell and tissue regeneration in open wounds

The aim of this study was to observe how wounds healed after 3 days of cupping, as this is very important to study as an early indicator of the quality of service provided.

Method

Research Design

The research design used in this study was descriptive, only looking at the picture of the patient's wound healing 3 days after cupping therapy.

Sample and Settings

This research was conducted on December 21-24, 2023, the sample of this research was taken by purposive sampling with a sample size of 200 people who underwent cupping therapy using 3 sunnah points, namely on the shoulders. The location of the research was carried out at Fort De Kock University, Bukittinggi, with inclusion criteria for clients aged 18-26 years, not having hemophilia, skin disorders, consumption of blood thinners, malignant diseases, not menstruating, blood pressure <100mmhg and ≥180mmhg, damage to the heart, liver, kidneys.

Measurement and Data Collection

The measuring instrument used for data collection in this study was the secondary wound healing measurement issued by *the Nursing Outcomes Classification* (NOC) in 2013. Data was collected from 200 samples according to the inclusion criteria.

Ethical Consideration

Ethics approval No. 517/KEPK/XII/2024 was obtained prior to the study. Informed consent was provided to the patient as a form of consent for cupping.

Results

Distribution of Cupping Wound Infection Frequency

Variables	Mean (SD)	f	%
Age	20,485 (1,47671)		
Gender			
Man		29	14.5
Woman		171	85.5

Wound healing 3 days after wet cupping

Criteria	granulation	Scar Formation	The size of the wound is reduced	purulent drainage	serous drainage	serosanguineous drainage	Erythema on the skin around	Inflammation of the wound	periwound edema	Blistered skin	Macerated skin	necrosis	Cell release	Hole in the wound	wound pouch	Formation of sinus tracts	Foul smell of wounds
mean	5	4	5	5	5	5	4.05	5	5	5	5	5	5	5	5	5	5

From the table above it can be seen that of the 200 samples, 29 people (14.5%) were male, and 171 samples (85.5%) were female, then after the 3rd day the post-cupping wounds were found to have healed completely with overall results showing the presence of granulation or new tissue growth that grew very large with an average value of 5 (very large), the formation of scar tissue on average 4 meaning large, purulent drainage from cupping scars with an average value of 5 meaning there were no scars that discharged pus, serous drainage in the form of a clear yellowish liquid that came out of cupping scars with an average result of 5 meaning there was no serous fluid coming out after 3 days on cupping scars, seronganguinis drainage or bleeding wounds with an average value of 5 meaning there were no bleeding cupping wounds after 3 days after cupping, erythema on the skin with an average value of 4.05 meaning that cupping wounds after 3 days experienced limited bleeding. erythema, for the next criteria is periwound which is the area of skin around the wound with an average value of 5 which means there is no periwound, blistered skin with an average value of 5 meaning there is no blistering after 3 days of healing of cupping scars, macerated skin or skin becomes wrinkled due to old wound fluid also did not occur in this study with an average value of 5, while for necrotic tissue in wounds after 3 days of wet cupping the average value is 5 or there is no tissue death from wet cupping scars, Sloughing (cell release) in wet cupping scars in this study with an average value of 5 which means there is no. Holes in the wounds in wet cupping scars in this study did not occur, the formation of sinus channels in cupping scars also did not occur, and the last of these assessment criteria is the foul odor in cupping scars after 3 days with an average value of 5 which means there is also no or does not occur. So it can be interpreted that in this study the healing of post-cupping wounds after being observed after 3 days is that the wound has healed perfectly.

Discussion

Wet cupping is done by intentionally injuring the epidermis using a lancet, cupping wounds are included in the type with secondary healing, this is because the cupping scar is not closed (open wound healing). Therefore, in its implementation, many parameters need to be considered in carrying out this therapy, therefore the implementation of cupping therapy must be carried out by health workers (Ikhwan et al., 2023) including control of unwanted side effects, such as epidural abscesses at the cervical to the second thoracic level, burns and wound healing (Feng et al., 2015).

Wound healing in cupping has the same process as the wound healing process in general, and is influenced by one of them is how the wound is treated at the beginning of the wound, then the negative

pressure factor carried out in the cupping vacuum can increase the release of wound fluid which has the benefit of reducing the bacterial population and edema and increasing blood flow, as well as the formation of granulation tissue, so that patients feel comfortable with the wound after cupping therapy (H. Purnama et al., 2017).

For further treatment, antiseptic agents are needed, both natural ones such as olive oil, honey, or antiseptics derived from chemicals with various concentrations such as propolis iodine and alcohol (Sari, 2018) , but wound healing is also influenced by the patient's smoking behavior, because the nicotine content that accumulates becomes plaque in the blood vessels which will reduce blood flow to the target organ (wound), including the effect of nicotine which can increase catecholamines which can trigger blood flow disorders, so that these two factors from smoking can inhibit the wound healing process (Ulhaq et al., 2023) .

In this study, the wound healing process occurred optimally, meaning that none of the cupping wounds experienced a delay in healing. This could have occurred because the implementation process carried out by the researcher was carried out using sterile principles where the researcher used sterile handscoen, antiseptic from alcohol swabs, single-use lancets, cupping cups that had gone through a sterilization process, wound care after cupping blood evacuation was carried out in a sterile manner.

In this study, researchers used 2 materials for disinfection, namely alcohol swabs before the wound was made, then after the puncture, blood evacuation was carried out, the second antiseptic was given using Synergy herbal ingredients or better known as bud-bud oil, this is supported in research (Hadi et al., 2022) . Basically, synergy herbal oil has a basic ingredient of *Virgin Coconut Oil* (VCO) which comes from head oil which can increase the function of Monolaurin which is anti-viral, antibacterial, and anti-protozoal because this monolaurin will destroy lipid coated viruses from HIV, herpes, cytomegalovirus, influenza, various pathogenic bacteria, VCO on cupping wounds will protect the wound and there have been no reports of side effects reported. (Sumiasih, 2017) .

In addition to VCO, synergy herbal oil also contains red palm oil (*Oleum Elaesis Guineensis)* which contains sterol and vitamin E for skin care which is beneficial for wound healing.

Implications and Limitations

This research is intended to gain insight for developers of science, especially to understand the development of cupping wound healing theory in complementary nursing studies. The results of this study are also used as input for practitioners regarding compliance with standard operating procedures and sterile principles.

Conclusion

Cupping is a non-pharmacological therapy that has been scientifically proven to improve public health. If implemented in accordance with standard operating procedures and sterile working principles, it can accelerate the healing of patient wounds after wet cupping.

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research. We hope that what we have done will be a good deed in His sight, amen.

Author's contribution

Our roles involved in writing this journal article are as follows:

1. Lydia Mardison (Chair/writer 1)
   Conducting site observations with research members, related to existing problems, and then conducting research, namely cupping procedures, then after 3 days, namely on the fourth day, researchers observed the wounds on the wet cupping scars on respondents . The head researcher together with members processed the data through computerization and gave meaning to the data that had been collected. The head and continued with writing articles together with research members.
2. Del Fatmawati (Member/writer 2)
   Conducting observations of the research site, completing the research facilities and infrastructure, then conducting research with the lead researcher, then screening potential respondents and completing the informed consent process with the respondents. The lead researcher and team members process the data through computerization and provide meaning to the collected data.

Conflict of Interest

During the conduct of this research we had no conflict of interest.

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