

PENGARUH TERAPI BEKAM BASAH TERHADAP *ACTIVITY DAILY LIVING* (ADL) PADA PASIEN MIGRAIN DI SEMARANG

(Role of Wet Cupping Treatment Toward Activity Daily Living (Adl) of Migraine Patient at Semarang)

Amin Samiasih*

*Faculty of Nursing and Health Sciences, University of Muhammadiyah Semarang

Email: amin_samiasih@yahoo.co.id

ABSTRAK

Pendahuluan. Migrain sering mengganggu aktivitas sehari-hari (ADL) berhubungan dengan nyeri yang berdenyut, disertai dengan mual, tidak nafsu makan, sensitif terhadap cahaya, suara dan bau. Tujuan dari penelitian ini adalah menjelaskan perbedaan ADL pasien sebelum, setelah satu minggu, dua minggu dan tiga minggu setelah diberi intervensi berupa bekam basah. **Metode.** Penelitian ini menggunakan desain kuasi eksperimen pre dan post test. Jumlah sampel adalah 30 pasien laki-laki, dipilih dengan teknik *consecutive sampling*. Bekam basah diberikan hanya dalam satu kali. ADL dinilai dengan lembar *check list Headache Impact Test-6* (HIT-6) sebelum terapi, satu minggu, dua minggu, tiga minggu setelah terapi. Analisis data menggunakan dua langkah: frekuensi distribusi data dan multivariat dengan uji ANOVA pada distribusi normal dan uji Friedman pada distribusi yang tidak normal ($p=0.000$) kemudian diikuti dengan post test dengan uji Wilcoxon. **Hasil.** Post test dengan uji Wilcoxon pada pasien migrain dilakukan sebelum bekam, satu minggu, dua minggu, dan tiga minggu setelah terapi. Hasil menunjukkan *p value* 0,000 untuk semua kelompok. **Diskusi.** ADL sebelum pemberian bekam satu minggu, dua minggu, dan tiga minggu setelah bekam dengan *p value* 0,000 ($\alpha < 0.005$).

Kata Kunci: *Cupping, Activity Daily Living* (ADL), migrain.

ABSTRACT

Introduction. Migraine is often disturbing Activity Daily Living (ADL) due to the throbbing pain, accompanied by nausea, no appetite, sensitivity to light, sounds and smells. The purpose of this study was determined differences in patient's ADL before, after one week, two weeks, and three weeks after being intervened by wet cupping method. **Methods.** This research used pre and post test quasi-experimental design. Numbers of sample were 30 male patients, choosed by consecutive sampling technique. Wet cupping treatment was given 1 time only. ADL was measured with a checklist Headache Impact Test-6 (HIT-6) before treatment, one week, two weeks, and three weeks after treatment. Analysis of data was done in two steps: the frequency of distribution and multivariate repeated ANOVA test in normal distribution and Friedman test in unnormal distribution ($p = 0.000$) then followed post test with the Wilcoxon test. **Results.** Post test with the Wilcoxon in migraine patients was done before cupping, one week, two weeks and three weeks after wet cupping. Results showed *p value* 0,000 for all groups. **Discussion.** ADL before cupping differ by one week, two weeks and three weeks after cupping with *p value* 0.000 ($\alpha < 0.005$).

Keywords: *Cupping, Activity Daily Living* (ADL), Migraines.

INTRODUCTION

Migraine attacks began to increase in women 15-24 years and 35-45 years of age (Stewart WFetal, 2008). Migraines interfere with ADL because the throbbing pains, accompanied by nausea, no appetite, sensitivity to light, sound and smell. The problem of this research is declining ADL migraine patients ranging from light to severe. Wet cupping complementary therapies proven to reduce pain in a variety of diseases that cause pain. Wet Cupping expected to be used for complementary therapies that ADL increased migraine.

Mobilization refers to a person's ability to move freely, and immobilization refers to the inability of the patient to move freely (Perry & Potter, 2008). Migraine patients will experience disruption to mobilize mainly due to ADL severe pain. When pain is felt, at that moment began the cycle, which, if not made efforts to eliminate it can change significantly ADL.

One of nonpharmacologic management of migraine is wet cupping. Point recommended for migraine is between two of the scapula. T1-T3 scapular spine is precisely the point was AlKahil located around the bony prominence

behind the number 7 neck (cervical vertebrae spinousprocessus VII), the shoulder (acromion) left and right, high shoulders. At this point it is the weakest part of the whole body's blood circulation so that it becomes a place suitable for the deposition of substances old and damaged cells in the body. There is one very important acupuncture point is a point DU14. Each procedure takes about 20 minutes and is performed in 5 stages (Ahmadi A, et al, 2008; Umar WA2008)

In this therapy, after sucking the skin will be followed by extravasation, the skin temperature of the local area will increase, accompanied by capillary dilatation, increased vascular permeability, resulting in improved metabolism and relieve pain. Wet Cupping is the technique of complementary medicine, has reduced pain in 66% of patients were headache (Ahmadi A et al 2008). Cao H et al 2010 58% of patients chose wet cupping among other methods. 38.43% of patients were seeking treatment for pain conditions. The general objectives of this study was to know the difference Activity daily living (ADL) migraine patients before wet cupping treatment, one week, two and three weeks after wet cupping. If the research is proven, wet cupping therapy can pursue nursing complementary therapy to improve ADL in patients with migraine.

METHODS

The design of this study was the pre test and post test design, migraine patients who are willing to be his ADL sample measured

before treatment wet cupping, wet cupping then performed on day 0 (one time treatment). ADL measurements repeated at one week, two weeks and three weeks after treatment.

Total population of approximately 30 people permonth patients arrive at the Bekam Sinergi clinic in Semarang with complaints of migraine. Sampling technique was a consecutive sampling to meet the total sample of 30 respondents to the inclusion criteria: migraine patients who want to get involved in the study, male gender, age: 21-45years.

The research instrument using a checklist daily living Activity of migraine patients was Headache Impact Test-6 (HIT-6.) (Yang.M, Baum. RR, Varon SF, Kosinski M et al, 2011).

Analysis of data was done in two steps: the frequency of distribution and multivariate repeated ANOVA test in normal distribution and Friedman test in unnormal distribution (p=0.000) then followed post test with the Wilcoxon test and Three Weeks After Wet Cupping at Klinik Bekam Sinergi In Semarang May-July 2012

RESULTS

Wilcoxon test on ADL Migraine patients before cupping, one week, two weeks and three weeks after wet cupping, showed p value =0.000. Comparison of all groups, thus: ADL before cupping differ by one week after cupping, ADL before cupping differ by two weeks after cupping, ADL before cupping differ by three weeks after cupping.

Table 1 Wilcoxon Test Patient's ADL with Migraines Before Cupping, One Week, Two Weeks

	ADL one week post cupping-ADL before cupping	ADL two weeks post cupping-ADL before cupping	ADL three weeks post cupping-ADL before cupping
Z	-4.713 ^a	-4.098 ^a	-4.789 ^a
Asymp. Sig. (2-tailed)	.000	.000	.000

a. Based on positive ranks.
 b. Based on negative ranks.
 c. Wilcoxon Signed Ranks Test

DISCUSSION

ADL Migraine Patients Before Wet Cupping treatment.

Hyperexcitation induced abnormal cerebral cortex cortical spreading depression. Impaired intravascular and extravascular distribution of ions causes a decrease in blood flow and cause activation trigemino vaskular system. Vasoactive mediators and neuro transmitters, as well as secreted nosiceptor that occur: cerebral inflammation, activation of peripheral sensitization and central sensitization. This is exactly what causes migraines. Migraines often disturb due throbbing pain, accompanied by nausea, no appetite, sensitivity to light, sound and smells. The situation is very disturbing migraine work and daily activities, thus lowering Activity daily living (ADL) patients. Based on the age and occupation of patients in this study include age of productive. Migraines disturbing activities that cause the patient can't sleep, do house hold activities, and relationships because easily annoyed. This is consistent with the findings that the ADL Migraine patients prior to bruise a serious impact on ADL patients with impaired ADL values (>60).

Migraine Patients ADL One week, Two Weeks and Three Weeks After Wet Cupping.

Average ADL Migraine patients 1 week, 2 and 3 weeks after each cupping 52.67, 62 and 48.93 it is seen a decline in ADL interference so it can be concluded increased ADL patients. Wet Cupping can control the release of the neurotransmitter vasoactive mediators, nosiceptor neurogenic inflamation, sensitization of peripheral and central sensitization) so it does not happen migraine. Another mechanism occurs because the gate control theory and suction cupping incision can occupy the nerve that transmits pain signals to the brain so the patient does not feel pain anymore. Incision and suction cupping can stimulate endorphins, enkephalin which serves to reduce pain sensitivity. (Theoharides, 2006; Sharaf AR, 2012).

Wet Cupping influence on ADL Migraine patients.

Fiedman test shows the p-value= 0.000 (<0.005), the conclusions drawn at least there is a significant difference in ADL on two measurements. Posttest was used to determine where there are different measurements ADL. Wilcoxon test on ADL Migraine patients before cupping, 1 week, 2 weeks and 3 weeks after wet cupping at Bekam Sinergi clinic in Semarang showed p values= 0.000, to compare all groups, thus: ADL before cupping differ by 1 week after cupping, ADL before cupping different from 2 weeks after cupping, ADL before cupping differ by 3 weeks after cupping. There was a reduction of pain resulting in increased ADL before and after wet cupping. This is consistent with a single application of traditional cupping study effective for improving pain, quality of life, and hyperalgesia. (Lauche R, Cramer H, Hohmann C, Choi KE, Rampp T, Saha FJ, et al 2011). Wet Cupping is the technique of complementary medicine, has reduced pain in 66% of patients with tension headaches. (Ahmadi Aet al2008). Cao H et al 2010 58% of patients chose wet cupping among other methods. 38.43% of patients was seeking treatment for pain conditions.

CONCLUSION AND RECOMMENDATION

Conclusion

There is a difference Activity daily living (ADL) migraine patients before treatment wet cupping, one week after wet cupping, two weeks after wet cupping and three weeks after wet cupping.

Recommendation

Wet Cupping on cervical vertebrae spinous processus point VII) al-Kahil, between the shoulder (acromion) left and right, high shoulder can be used to reduce the patient's pain Migraines. Cupping performed on days 0, the 14th and the 28th day to compare the quantity of cupping treatment against ADL

Migraine patients and proving the molecular to the hormone serotonin.

REFERENCES

- Ahmadi Alireza, David C. Schwebel, and Mansour Rezaei , 2008, *The Efficacy of Wet-Cupping in the Treatment of Tension and Migraine Headache* The American Journal of Chinese Medicine, Vol. 36, No. 1, 37– 44. World Scientific Publishing Company, at Birmingham.
- Cao H at al, 2010. *Clinical research evidence of cupping therapy in China: a systematic literature review*. BMC Complementary and Alternative Medicine 2010, 10:70<http://www.biomedcentral.com/1472-6882/10/70>. march 12.
- Lauche R, Cramer H, Hohmann C, Choi K.E , Rampp T, Saha F.J, at al 2011. *The Effect of Traditional Cupping on Pain and Mechanical Thresholds in Patients with Chronic Nonspecific Neck Pain:A Randomised Controlled Pilot Study*. Evidence-Based Complementary and Alternative Medicine Volume 2012, Article ID 429718, 10 pages Hindawi Publishing Corporation doi:10.1155/2012/429718
- Perry & Potter, 2008 *Foundamental of Nursing: concepts, process and practice*. Mosby-year book inc.
- Sharaf A.R, 2012. *Penyakit dan Terapi Bekamnya dasar-dasar ilmiah terapi bekam*. Thibbia. Surakarta.
- Theoharides TC, Kempuraj D, Tagen M, Conti P, Kalogeromitros D. *Differential release of mast cell mediators and the pathogenesis of inflammation*. *Immunol Rev* 217: 65–78, 2007. PMID: 17498052. <http://www.mastcellmaster.com/cv/TheoharidesBiosketch1-2-11.pdf> march 12.
- Umar W.A 2008. *Sembuh dengan satu titik*. Al Qowam. Solo
- WF Stewart, C Wood, ML Reed, J Roy & RB Lipton, 2008. Cumulative lifetime vmigraine incidence in women and men. *Cephalgia An International Journal of Headache*, doi:10.1111/j.1468-2982.2008.01666.x.
- Yang.M, Baum. RR, Varon SF, Kosinski Met al, 2011. Validation of theHeadache Impact Test (HIT-6™) across episodic and chronic migraine. *Cephalgia An International Journal of Headache*. Feb 2011; 31 (3): 357–367.