

Both of these components only affect the source of any illness, but not healthy body functions and tissue.

The essential effect of cupping is the retuning and therefore also the **regulation** of disturbed body functions, as well as the alleviation of pain and cramping, improvement in blood circulation, and inhibition of inflammation.

By locally applying suction cups, *extravasates* are created and as a result of these, *hematomas* (bruises) that cause a *strong irritation*. This irritation activates the body's own localized, as well as generalized, healing powers and therefore has an *anti-inflammatory* effect, which in turn supports rapid recovery in any illness based on inflammation (e.g., pneumonia).

The process of regulating body functions *eliminates blockages* that have been caused mostly by a focal disturbance or by excessive consumption of chemical medicines, which impede the natural processes of the organism and make it ill. It is not uncommon that cupping, by eliminating blocked regulation, even brings out additional complaints, which finally indicate the location of the true disorder.

By *stimulating circulation*, cupping aims at widening the blood vessels. Increasing the blood flow at the cupping sites strengthens the metabolism and allows for faster elimination of substances that cause pain and cramping.

The above-mentioned **segmental therapy** occurs via the "Head's zones," via the so-called cutivisceral reflex paths (connections between skin and organ). Through the nervous system, this has a curative effect on disturbed *neurovegetative* functions and diseased viscera.

Methods of Application

Cupping Diagnosis

Cupping diagnosis allows the practitioner to determine with the aid of suction cups whether the position of the symptoms is the true location of the disease. Additionally, we can detect which organ is defective and in need of treatment.

"Dry" or "Bloodless" Cupping

In dry cupping, the suction cup is held over an alcohol flame in such a way that the air in it is heated. Then, the cup is placed on the treatment spot.

As the heated air cools down, it creates a vacuum inside the cup. This process sucks the skin into the cup, causing hyperemia (strong circulation) at this spot, as well as an extravasate (bloody fluid that has leaked from the vessel and is present in the tissue).

Cupping Massage, a Variation

In cupping massage, as in dry massage, a suction cup is placed on the skin, but is then moved around on the lubricated skin across a certain area. Cupping massage has a much stronger effect on blood circulation than regular massage, resulting in a large, in some places more and in other places less, pronounced extravasate in the treatment area.

“Wet” or “Bloody” Cupping

In wet cupping, blood is drawn at the cupping site by cutting the skin with a scarificator. The cup is placed on the skin only afterwards, to suck the blood out of the cuts. This might sound quite bloodthirsty, but in reality only involves a blood loss of 25 mL at the most. Consequently, an application of 10–15 cups of average size means losing 150–250 mL of blood.

Wet cupping is related to bloodletting and the application of leeches. Its effect is not limited to drawing blood, but also includes a drawing out and re-tuning action.

Basic Therapeutic Concepts of Cupping

In spite of the fact that the cups are only placed on the skin at certain, for example, painful, parts of the body, and therefore appear to treat merely the symptoms, the aim of cupping is not all limited to suppressing the signs of the disease. Through the reflex connections, both cupping and cupping massage have a regulating and stimulating effect on the entire body and therefore a curative effect on the actual disease.

In the age of immunizations and chemically produced drugs, medical research has succeeded in controlling the great life-threatening epidemics of humankind. Nevertheless, another serious disease factor has been added: the “pharma person” (a person who takes too many drugs and uses too much medicine). Unfortunately, strong chemical substances continue to be applied too quickly and too frequently, especially in two circumstances:

- The treatment of functional syndromes (an expression used in the context of disorders in which the therapist is unable to find any structural changes

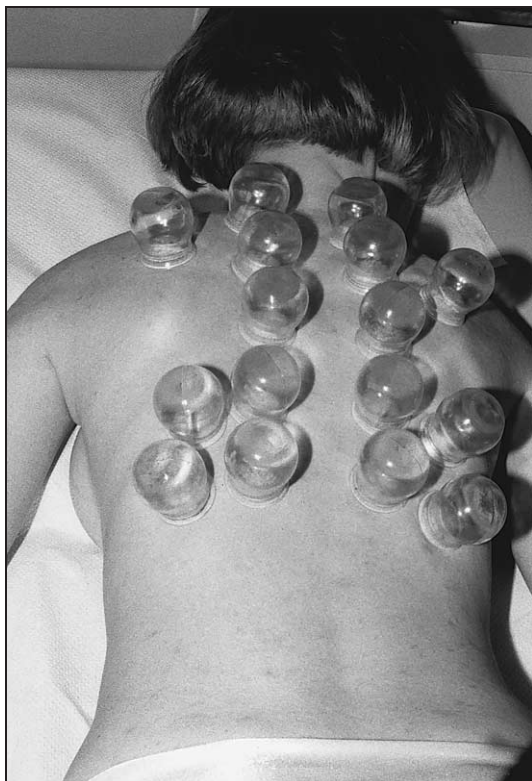


Fig. 8.3 Dry cupping on the entire back. In very thin patients, do not position cups on top of the shoulder blades.

- ✓ *In cases with high fever: possibly in addition, wet cupping in segments T1–T5.*

Supplemental Therapy

- If necessary, **antibiotics**.
- **Homeopathy**. These disorders are nothing new for the therapist. However, every year the unpredictability of their manifestations is new, that is, the unpredictable effects of triggers like the pathogen type, drenching, hypothermia, drafts, and so on. These disorders require individualized remedy selection in consideration of the overall medical situation.

- **Phytotherapy.** *Expectorant herbal teas* (e.g., thyme, elderflower, linden flower, *Plantago lanceolata*, etc.). Herbs that contain *essential oils* as steam inhalation (e.g., eucalyptus, pine needle, chamomile). *Drugs with tannic acids* as gargle (e.g., oak bark, salvia leaf). *Rubs, vitamins (B, C)*.
- **In serious cases.** Cardiovascular support, oxygen therapy.

Prophylaxis

- **Homeopathy.** *Influenza nosode* every 14 days in September/October, *Camphora D1* one drop in the morning on a sugar cube from September to April.
- **Phytotherapy.** Plant-based immune stimulants as long-term treatment applied in the early stage. Initiating therapy even in the acute stage is still helpful.
- **Vitamins.**

Sore Throat (Tonsillitis, Laryngitis, Pharyngitis)

Sore throat arises unexpectedly and acutely as the result of bacterial and viral infections of the sinuses and throat. Sore throat is also an early symptom of a variety of serious diseases such as diphtheria, scarlet fever, and so on, which can bring about serious complications. Correct and timely diagnosis and professional treatment are therefore essential.

Sore throat can occur in the following forms:

Tonsillitis

Acute inflammation of the tonsils (angina lacunaris). The disease is most commonly seen in older children and young adults. It is rare in older adults.

Symptoms

- Difficulty swallowing, often with “stinging in the ear.”
- Abundant secretion of saliva.
- Fever.
- Headache.
- Exhaustion.

Acute and Chronic Pancreatitis

We distinguish between two forms of pancreatitis, namely **acute-reversible** and **chronic-progressive**. Both forms are accompanied by pain and functional disturbances of varying intensity, but their causes differ.

Acute pancreatitis arises mostly after infectious disease, after diseases of the bile ducts, stomach, or intestine, or through intoxication or medications.

The causes of **chronic pancreatitis** are alcoholism and chronic inflammations of the stomach, intestine, and bile ducts; psychological traumas and allergies also need to be considered.

Symptoms

- In the acute stage, temperature of 38–39°C (102–104°F).
- Violent pain with sudden onset in the upper abdomen, predominantly on the left, aggravated in the shape of a half belt by movement.
- Cold sweat, nausea, and constipation as a result of intestinal atonia.
- In severe cases, redness of the face and typical drawn-up legs.
- In chronic forms, upper abdominal symptoms generally 2–3 hours after meals, increasing in the evening; pain not always on the left side.
- Belching, diarrhea, flatulence, aversion to fat, intolerances (to raw fruit, yeasted cake, sweets, and coffee), but very variable.
- Emaciation, delayed adaptation to darkness.

Suggested Therapy

A majority of our patients complain of pancreatic symptoms. Advanced pancreatitis not only results in impaired exocrine function, but occasionally also in symptoms of limited endocrine functions.

⊗ **Acute pancreatitis is a medical emergency and must be treated in a hospital.**

In *chronic pancreatitis* or *secretory pancreatic insufficiency*, cupping is recommended after completed examinations and diagnosis (**Figs. 10.3 and 10.4**).

- Maintain intervals of **3 days over 6 weeks**.
- Afterwards, due to the chronicity and unpredictability, treat over a longer period of time **once per month** after symptoms have subsided.



Fig. 10.3 Dry cupping on the back in segments T2–L1, especially in the areas of tender points.



Fig. 10.4 Dry cupping on the upper abdomen on the left side.