

Kaiy as traditional therapy for pain: is it helpful or a myth?

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Abstract

Objectives: Two cases of traditional kaiy (Arabic for cauterisation) therapy for pain are reported. This technique is unknown in western countries and should be banned following a review of the topic.

Case reports: Many patients in developing countries use alternative, complementary or traditional therapies before seeking medical advice. This may be due to social or religious beliefs. Kaiy is one such traditional therapy which should be discouraged. Two cases are reported, the first with aural pain and the second with thyroid pain (with malignancy later diagnosed).

Conclusion: In these days of modern health care, the practice of kaiy is not science-based and is associated with considerable health risks. Health authorities in the relevant societies should move towards banning this undesirable practice; they should also use multi-media health education to advise of its dangerous outcomes, and enlist the help of community religious leaders to change public opinion and belief.

Key words: Cautery; Complementary Therapies

Introduction

Many patients in developing countries use alternative, complementary or traditional therapies before seeking medical advice. This may be due to social or religious beliefs. Kaiy (Arabic for cauterisation) is one such traditional therapy which should be discouraged.

Complementary, alternative and traditional therapies are becoming ever more popular, being used by 33 to 42 per cent of the general US population.¹ Commonly utilised therapies include acupuncture, homeopathy and herbal medicine.² The major areas of Arab traditional therapy are herbal, kaiy and cupping.³ Islamic sources state that the Prophet Muhammad, Peace be upon Him, said that, ‘...there are three methods to cure illness: “a drink of honey, a scratch of hijamah and Kaiy”. But He was not too keen on the last one’.^{3,4} This Hadith (the Prophet Muhammad’s words) is also recorded in another way: ‘if there is healing in anything, then it is in three things; a gulp of honey, cupping, or branding with fire (Kaiy) that pains, but I hate Kaiy and do not like it’.⁴ In many Arabic villages in the past (and even up to 30 years ago), barbers would perform circumcision, hijamah (sucking of blood by cupping) and kaiy.

This study reports two cases treated with kaiy, one with aural pain and the second with thyroid pain (later diagnosed as malignancy).

Case report one

In December 2006, a 35-year-old woman presented to the ENT clinic at GNP (Ghassan Najeeb Pharoan) Hospital in Khamis Mushayt, Saudi Arabia, complaining of severe pain in her left ear of two days’ duration, with no history of tinnitus or discharge. She had a history of nasal discharge and sneezing of one week’s duration.

On examination, the patient’s left tympanic membrane was retracted and congested, with loss of the ‘cone of

light’. There was nasal congestion with mucopurulent nasal discharge.

A diagnosis was made of acute rhinitis with left acute catarrhal otitis media. An analgesic (paracetamol), systemic decongestant, nasal vasoconstrictor and systemic antibiotic (amoxicillin) were prescribed.

On reviewing the patient one week later, 14 burn areas, each 5 × 5 mm in size, were seen on the left side of the neck below the left auricle (Figure 1). On enquiring about these lesions, the patient admitted going to a traditional therapist three days prior because of persistent aural pain. The traditional therapist had advised the patient on the kaiy procedure and had persuaded her that it was a better approach than drugs. The patient was asked whether the kaiy treatment had helped; she replied that the resultant pain had masked her aural pain for several hours, but that she had then wanted help for the skin pain.

On examination of the patient’s ear, the tympanic membrane was much improved compared with the initial visit. The patient was advised to continue the same medical treatment, and was referred to a dermatologist.

Case report two

In January 2007 (one month after the above case), a 45-year-old woman presented to the same clinic complaining of painful swelling in the front of the neck of one month’s duration.

Examination revealed multiple areas of burns of different sizes, ranging from 1 mm in diameter to 10 × 20 mm (Figure 2), involving the right side of the anterior neck, over a 5 × 7 cm thyroid swelling which moved with swallowing, was firm to hard in consistency, and was not fixed to the surrounding tissue. A diagnosis of a thyroid mass was made. On enquiring about the burns, the patient admitted visiting a traditional therapist for help with pain control, who had advised her to undergo kaiy treatment.



FIG. 1

Kaiy administered for left aural pain, below the auricle.

The patient was referred to a general surgeon. After investigation, the thyroid mass proved to be malignant, and the patient was referred to another hospital for management.

As this was the second case of kaiy treatment encountered in a short space of time, the author enquired about the source of treatment. Surprisingly, such treatment was found to be available in one medical polyclinic in Hijamah, which claimed that kaiy was one of the medical procedures available during the days of The Prophet Muhammad (Peace be upon Him), and that The Prophet Himself (Peace be upon Him) had advised this treatment. Kaiy treatment is also available locally in many areas of southern Saudi Arabia.

Discussion

In the past (and as recently as 30 years ago), many Arabic village barbers performed circumcision, hijamah (sucking of blood by cupping) and kaiy. Such barbers were held in high esteem by the local community.

Patients who have received kaiy treatment report that it gives temporary relief followed by severe pain. Such treatment may possibly act in the same way as acupuncture, stimulating the release of endogenous opioids and other neurotransmitters such as serotonin.⁵ Countless other

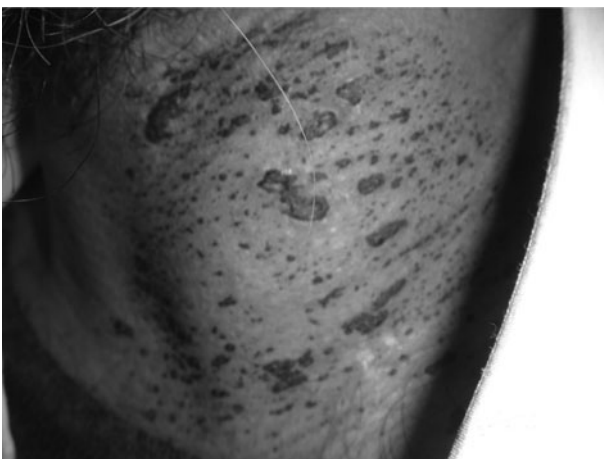


FIG. 2

Kaiy administered for thyroid pain, on the right anterior neck.

traditional health practices have been practised in the past, related to sexual behaviour, pregnancy, child birth, child-rearing and feeding;⁶ however, Kaiy is arguably the worst because how we burn patients making them suffering more pain to treat pain. Pain for pain is non-sense.

- Many patients in developing countries use alternative, complementary or traditional therapies before seeking medical advice
- Kaiy is the use of localised cauterly by traditional healers
- This paper describes the use of kaiy in two patients and its adverse effects
- This treatment modality is potentially harmful

The ancient Egyptians used cauterly to stop bleeding, and Hippocrates recommended it. The ancient Arabs had great faith in the therapeutic value of fire, applied in techniques such as kaiy,⁷ and this technique became an Arabic tradition. An Arab proverb states that 'Kaiy is the final remedy'. Kaiy is similar to the moxabustion practised in traditional Chinese medicine, with the belief that the formation of blisters is essential if healing is to occur.⁷ Arab kaiy therapists use metal rods, heated over a fire until red hot. These are then placed on a specified skin location for a few seconds. The number of cauterlies in one session varies between one and more than seven.⁷ Deep skin burns are the expected result. The location of the burns depends on the patient's complaint. This type of therapy is rarely used in contemporary Arab society. It is surprising that such treatment is evidently still trusted by some. Such individuals have misunderstood the words of The Prophet Muhammad (Peace be upon Him); He (Peace be upon Him) did not recommend kaiy. Cautery is practised within modern medicine in other ways, for example, the use of unipolar and bipolar diathermy and laser treatment (e.g. for tonsillectomy).

Conclusion

In these days of modern health care, the practice of kaiy is not science-based and is associated with considerable health risks. Health authorities in the relevant societies should move towards banning this undesirable practice; they should also use multi-media health education to advise of its dangerous outcomes, and enlist the help of community religious leaders to change public opinion and belief.

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