



Hijama Treatment for Polycythemia Vera

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Clinical Image

A 56 year-old man presented to the Hematology Outpatient Clinic. Four years earlier he received a diagnosis of polycythemia vera when with a hematocrit of 62%. Phlebotomies and aspirin were recommended however he did not return to the clinic. Examination revealed splenomegaly. The hematocrit was 45%.

He reported that he had been treated by complementary medicine practitioner of his Muslim faith by Hijama (Arabic for "sucking"). This involves "wet-cupping" of the skin with a cup-and-vacuum device to induce dermal vasodilation, scarification of the skin and reapplication of the device yielding a phlebotomy of 300 ml to 350 ml (Figure 1).

Hijama has does not have evidence-based health benefits but as this case demonstrates it may be effective for the treatment of polycythemia vera. The potential for infection and trauma to the skin and soft tissues should be addressed when counseling patients who wish to undergo this intervention.

Despite recommendation to undergo conventional phlebotomy, the patient elected to continue Hijama therapy in a manner consistent with his religious beliefs, and to return for regular clinical follow up.



Figure 1a: Cupping devices with vacuum applied after scarification of the skin.



Figure 1b: Cutaneous hematomas and scarification following the procedure.

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