Complementary and alternative medicine: is it effective in management of prostate enlargement? – A case report

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Abstract: Very few studies are available in the management of enlarged prostate with Complementary and alternative therapies. Case presentation: A 74-years old Egyptian man was present with huge prostate. The case was immediately managed with combined drug therapy and alternative therapy for 6 days in eight sessions. He has good improvement after obtained this successive session. Conclusion: In spite of the current debate regarding the application of alternative therapy on treating difficult medical conditions like huge prostate for this case. A significant improvement in general condition of this case with medical treatment after using new methods of alternative therapy as wet and dry cupping or Hijama called "Eman Tharwat method" repeated local eight successive sessions in 6 days' therapy using a combination with medical treatment.

Keywords: Complementary and alternative medicine; cupping; prostate enlargement.

1. INTRODUCTION

Prostate cancer is the most commonly diagnosed cancer of the male population in developed countries. According to the World Health Organization (WHO) statistics, there were about 12.7 million cancer cases in 2008, and these numbers are expecting to increase to 21 million by 2030. Cancer is the leading cause of death worldwide, accounting for 7.6 million deaths (around 13% of all deaths) in 2008. (Bao et al, 2014; Marie et al, 2013; Swarm et al, 2013).

Complementary /Alternative Medicine (CAM) were known to be used by oncology patients across a range of cultures around the world. A diagnosis of cancer is an anxiety provoking experience that promotes patients and families to seek the alternative methods of treatment for a curing. There are worldwide increasing in the use of complementary/alternative medicine (CAM) among patients with cancer and it is well documented (Akhu-Zaheya & Alkhasawneh, 2012; Mehta & Dhapte, 2015).

Cupping therapy is a Traditional Complementary Medicine. It was recorded early in ancient Egypt, ancient India, ancient Greece, and other regions, and was used up to now widely. It has also spread in the United States, and modern developed countries (CHEN, 2016). Dry cupping was the most commonly used type, to achieve suction, then wet cupping (use blood-letting on the tender point before suction) (Mehta & Dhapte, 2015).

Moreover, cupping is cheaper, noninvasive and lower in producing risk (Rozenfeld & Kalichman, 2016; El Sayed, et al, 2014). In addition, Kim; 2014 reported in a study conducted in Korea that variously side effects related to cupping
therapy were rare. Most of the AEs were avoidable, if trained personnel provided the treatment. Cupping therapy must be administered by qualified medical experts and in compliance with all safety guideline.

Al- Bukhari narrated in his Sahihi from Saeed Ibn Juhayr from Ibn Abbas. May God be please with them, that the Prophet ( Salla allah Alayhi Wassallam) said: Healing is in three things: Drinking honey, the incision of a cupper, and cauterizing with fire, but I forbid my Ummah to use cauterizing (Al- Bukhari, 5375) (Esmail, 2014). Scientist Celsus advised local cupping for abscesses (Mehta &Dhappe, 2015)

Cupping therapy effects that may be from activate the neuroendocrine-immune system, which produces the therapeutic effect by the neuromodulator had been start if central stressors are transmitters to central nervous systems when activation the inhibition functions & parasympathetic nerves. Endocrine modulation was initiated the hypothalamic stimulation to release corticotrophin-releasing hormone and other neurotransmitters, which in turned stimulate the release of noradrenaline and cortisol from the adrenal gland. Immunomodulation is initiated when the immune cells was stimulated to released neuropeptides, cytokines and chemokine’s. These three processes interact in a complex network system, which eventually initiates NEI, producing the regulatory (Guo, et. Al 2017).

In additionally, externally stimulated from the cupping is methods of whose effects are affected by the therapy duration and amount of uses negative pressure during session. Changes in microenvironment at the site of the cupping treatment are cause by the release of largest amounts of signaling molecules changes lead to immune modulation by stimulating immune cells to release cytokines. Also, create neuro modulation through the excitation of nerve endings (Guo, et. Al 2017). In addition, the cupping help to extracting poisons from bites made by apes, dogs, wild animals or snakes as cells freely from poising substance produce therapy effects (Mehta &Dhappe, 2015).

2. CASE PRESENTATION

We report a case of a 74 years old Egyptian man, diabetic twenty years ago who had a huge senile prostate since two years. The case reported no improvement of enlarged prostate after medical treatment. Beside occurrence of urinary retention, unable to stand and go up the stairs without help, loss of appetite and mood changes in last three months.

According to the recent American Cancer Society (2020) the finding level of total and free PSA (prostatic specific antigen) was high (38.3) in this case but most range without prostate cancer was PSA levels less than 4 ng/mL of blood. Still, a level less than 4 is not guarantee he doesn’t have a cancer. The range with a PSA level between 4 and 10 (called often “the range of borderline”) have about a 1 in 4 chance of having men prostate cancer. If the PSA is more than 10, the chance of having prostate cancer is over 50%. While, the prostate dimensions of this case was 70 x 85 x 83 mm and weight (263 gm.), August 2017 before using a cupping therapy sessions.

They recommended thresholds of 2.5, 3.5, 4.5 and 6.5 ng/mL in The prolate ellipsoid formula, multiplying the largest anterioposterior (height), transverse (width) and cephalocaudal (length) prostate diameters by 0.524 (H x W x L x π/6) is probably the most commonly used method, since it was rapid, reproducible, and was shown to have high correlation with the actual prostate volume. The prolate spheroid formula W x W x H x π/6 seems equally accurate, and has the advantage of requiring measurements in the transversal plane only, when normal prostate gland in age 70 years has measures 2.5 x 3.6 x 5.7 cm approximately or a volume of 25 m (Mitterberger et al, 2010; Zhang, et al, 2013)

The concept of using alternative therapies in treating patients with huge prostate rarely documented in the literature. The case refused a surgery intervention after deterioration of his case and no improvement from medical treatment. He decides to try complementary medicine as he trust in religion thoughts. A condensed course of wet and dry cupping was implemented (eight sessions/day, for six days) special wet and dry cupping called "Eman Tharwat method". Aroma therapy "sesame oil" was applied with cupping. Follow up the patient condition after first week of CAM therapy, one month and three months later on by laboratory investigation and ultrasound.

After implementing cupping course at January 2019 the dimensions of the prostate were 56 x 72x 66 prostate with weight become 143 gm. All medical treatment which received by the patient were stopped except one medication to decrease size of prostate and urinary catheter was inserted as urologist prescribe, significant improvement in case complaints were observed like the headache was improved; neck pain relived , pain below testicles absent by use numerical scale 0 to 10 the case had 0 score refer to no pain in scale.
In addition to improvement in his appetite and mood as his wife said. The better ability of case to void without any difficulty after removal of urinary catheter was amazing to his family and physician. Unfortunately, the case refused to take sample from prostate to ensure if the huge prostate is malignant or benign after this progress. Although PAS was high, the case follow up by annual investigation and ultrasound observed progressed gradually 2019.

By repeating investigations after one month and three months, there is improvement in size and weight of the prostate and the finding level of total and free PSA (prostatic specific antigen) and a decrease in prostate size.

Table (1): Investigations findings before starting complementary management

<table>
<thead>
<tr>
<th>Items</th>
<th>Findings</th>
<th>Items</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>HB</td>
<td>14.6</td>
<td>Serum urea</td>
<td>32</td>
</tr>
<tr>
<td>Hematocrit</td>
<td>44.0%</td>
<td>Serum creatinine</td>
<td>0.9</td>
</tr>
<tr>
<td>RBCs</td>
<td>5.4</td>
<td>Bleeding time</td>
<td>2 min</td>
</tr>
<tr>
<td>Platelets</td>
<td>302.000</td>
<td>Clotting time</td>
<td>5 min</td>
</tr>
<tr>
<td>WBCs</td>
<td>8.800</td>
<td>ESR (one hour)</td>
<td>38</td>
</tr>
<tr>
<td>SGPT</td>
<td>18</td>
<td>ESR (hours)</td>
<td>83</td>
</tr>
<tr>
<td>SGOT</td>
<td>20</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table (1) shows the laboratory findings show average hematological and chemical finding for blood picture and liver and renal function at starting complementary/ Alternative Therapies.

Table (2): Progress of case complains in the follow up periods

<table>
<thead>
<tr>
<th>Items</th>
<th>Before applying cupping</th>
<th>One week after applying cupping sessions</th>
<th>3 months later follow applying cupping sessions effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Headache</td>
<td>Present</td>
<td>Decreased</td>
<td>Improved</td>
</tr>
<tr>
<td>Neck pain</td>
<td>Present</td>
<td>Decreased</td>
<td>Decreased</td>
</tr>
<tr>
<td>Pain of testicles</td>
<td>Severe</td>
<td>Absent</td>
<td>Absent</td>
</tr>
<tr>
<td>Loss of appetite</td>
<td>Moderate</td>
<td>Improved</td>
<td>Improved</td>
</tr>
<tr>
<td>Mode</td>
<td>Bad</td>
<td>Good</td>
<td>Good</td>
</tr>
</tbody>
</table>

Table (2) there is improvement in the case complains after one week and during follow up period (table 2).

Table (3): Ultrasound changes in size and weight of prostatic enlargement

<table>
<thead>
<tr>
<th>Time</th>
<th>Date</th>
<th>Dimensions of the prostate</th>
<th>Estimated weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before applying cupping &amp; complementary therapy</td>
<td>8/07/2017</td>
<td>70 x 85 x 83 mm</td>
<td>263 gm</td>
</tr>
<tr>
<td>Two months after cupping &amp; complementary therapy</td>
<td>12/09/2017</td>
<td>69 x 83 x 78</td>
<td>237 gm</td>
</tr>
<tr>
<td>Five months after cupping &amp; complementary therapy</td>
<td>13/01/2018</td>
<td>--------------------------</td>
<td>224.5 gm</td>
</tr>
<tr>
<td>14 months after cupping &amp; complementary therapy</td>
<td>16/09/2018</td>
<td>64 x 75 x 72</td>
<td>182 gm</td>
</tr>
<tr>
<td>17 months after cupping &amp; complementary therapy</td>
<td>16/01/2019</td>
<td>56 x 72x 66</td>
<td>143 gm</td>
</tr>
</tbody>
</table>

Table (3) There is valuable decrease in size and estimated weight of enlarged prostate after applying of cupping technique and aroma therapy of complementary / alternative therapy and this improvement continued after nearly one and half year after intervention.
Table (4): Changes in the PSA (prostatic specific antigen) ng/ml

<table>
<thead>
<tr>
<th>Time</th>
<th>Date</th>
<th>PSA total</th>
<th>PSA free</th>
<th>Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before applying cupping &amp; complemenary therapy</td>
<td>5/08/2017</td>
<td>38.3</td>
<td>8.51</td>
<td>0.22</td>
</tr>
<tr>
<td>Two months after cupping &amp; complemenary therapy</td>
<td>10/09/2017</td>
<td>13.53</td>
<td>3.12</td>
<td>0.23</td>
</tr>
<tr>
<td>Three months after cupping &amp; complemenary therapy</td>
<td>23/10/2017</td>
<td>12.78</td>
<td>2.78</td>
<td>0.22</td>
</tr>
<tr>
<td>14 months after cupping &amp; complemenary therapy</td>
<td>16/09/2018</td>
<td>6.89</td>
<td>1.17</td>
<td>0.17</td>
</tr>
<tr>
<td>17 months after cupping &amp; complemenary therapy</td>
<td>16/01/2019</td>
<td>6.05</td>
<td>123</td>
<td>0.22</td>
</tr>
</tbody>
</table>

Table (4) there was marked decrease in the level of PSA either total or free but the ratio continues nearly equal in the four follow up visits. In comparison to normal values (Total PSA 4 ng/ml, Free PSA 0.5 ng/ml and ratio <0.25), the findings showed that at starting intervention, the level of total PSA was about ten times of normal values and decreased to 1.5 only and level of free PSA was decreased from 17 folds to 2.5 folds only. Ratio was nearly close to normal value.

Figure (1): Changes in estimated prostatic weight

Figure (2): Changes in the PSA (prostatic specific antigen)
3. ETHICS

Written consent was receiving from this case at home visits, Egypt Arabia. Unfortunately, the patient refused to have her face photographed before, during or after the treatment, for personality reasons.

4. DISCUSSION

The 10 most common cancers were sites among men as bladder, liver, lung, leukemia, prostate, brain and nervous tissue, esophagus, larynx, pancreas and colorectal cancer. They were accounting 64.8% of incident males cancer cases (National Cancer Registry Program of Egypt, 2008).

Our review was show vivid for investigators activities of complementary and alternative medicine (CAM) research in the oncology field by researchers all over the Middle-East. This rich diversity of research productivity is intriguing since no national CAM research in oncology institution exists in any of the countries surveyed). The most of the studies on CAM used in cancer care were perform in Turkey and Israel (Ben-Arye, 2011).

Although various cancer cell was lines derived from human malignant tissues like (leukemia, breast, prostate, lung and liver) (Ali-Shtayeh, et al 2016) the case of huge prostate with CAM application become well improved. Unfortunately, the case was refused to take biopsy from prostate after this improvement of health status.

It was a surprise for the case and his family, and medical staff. There is valuable decrease in size and estimated weight of enlarged prostate after applying of cupping and aroma technique of complementary/alternative therapy in few days (six days). Besides, the improvement in average hematological and chemical finding for blood picture and liver and renal function. Also, this improvement continued after nearly one and half year after intervention without another CAT intervention in this is years. We suggest in the future the traditional medicine (cupping therapy) more studies regarding CAM modalities such as aromatherapy and cupping therapy

5. RECOMMENDATIONS

Due to progress of this case we recommend to make more studies to more cases diagnostic as huge prostate, which refuse surgery regard to their old age or any other cause; due to one case for primary studies, the evidence levels for each CAM, cupping was low or moderate. So in the future, in order to prescribe CAM, cupping therapy we could not recommend any CAM (cupping therapy) interventions for cancer prostates due to small sample size, and we advising to made of prostate cupping therapy in new “Eman Tharwat” methods as successive session.

6. CONCLUSION

Proper and early diagnosis of enlarged prostate case is needed to follow the correct treatment and avoid deterioration of case. In summary, the most important thing a urologist can do is to make a prompt and suitable diagnosis followed by an immediate start therapy with complementary and alternative medicines “Eman Tharwat” methods as successive sessions were use locally in affected site of the case which produce effective improvement of prostate enlargement. Moreover, the new case with enlarged prostate becomes improved.

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Novelty Journals

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