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Review Article

Moving Cupping and Wet Cupping Based on Bibliometric Analysis and Review: The Novelty of Combination Cupping

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Abstract

Aims: Describe the significance of the bibliography in assisting cupping research.

Methods: This research is a descriptive analytic study. using the Publish or Perish software, the title is about cupping, the period 0–2022 and then analyzed using VOSviewer, after that reviewing articles about moving cupping and wet cupping for the period 2019–2022.

Results: Found 1057 articles about cupping indexed by Scopus. There were four large clusters in the journal network. Wet cupping tended to be new in publication but wet cupping did not appear in overlays. Wet cupping had relatively many publications compared to moving cupping. The differences in procedures, even though the intervention was the same in cases with wet cupping therapy and cases with moving cupping therapy, were striking.

Conclusion: According to VOS observers, even though scientific papers about cupping have been researched since 1826 and indexed by Scopus, wet cupping is still popular and the combination of moving and wet cupping is still hardly ever explored.

Recommendation: The bibliography can be used as a reference for the collection of research results and as a reference for other researchers to determine the variables of cupping research.

Keywords:

Bibliometrics, cupping therapy, software, writing

INTRODUCTION

All countries have access to traditional medicine, which is used for maintaining health as well as the prevention and diagnosis, also improvement and for treatment of physical and mental illness. Traditional medicine is based on knowledge and skills also practice based on beliefs, experiences also theories and that originate from various cultures, whether or not they are explicated (1). WHO has also mapped six regions in the world that have policies regarding Traditional and Complementary Medicine (TCM), one of which is the Southeast Asia region, including Indonesia

and nine other countries (2). Cupping is a traditional method of medicine that is recognized as originating from Persia (3), from Greek (4) also recognized as originating from China (5). A recent technique was used in specialized clinics around the world, including Britain, Arab nations like Saudi Arabia and Kuwait, and Iran, to treat patients with a variety of ailments (6).

Indonesia, through the Ministry of Health, conducts a program for fostering traditional health services (Yankestrad) so that people can get traditional health services according to their needs. Yankestrad that require

special skills include cupping, acupressure, chiropractic, acupuncture, massage, bath circumcision, reflexology, acupressure, traditional birth attendants, fractures, shiatsu (7). In providing nursing care, cupping is included in nursing interventions (8). Cupping is used in treatment to provide comfort, reduce muscle pain, and as a preventive measure to maintain health.

From the fact that there are many studies on cupping published with various techniques(9), namely wet cupping(10), Arabic version(11) and Chinese version(12), dry cupping(12), fire cupping(13), and moving cupping(14). This makes it difficult for prospective researchers to identify research topics that are in line with the trend or trend of interest among many researchers, as well as to identify gaps in some research results so that they can become novel in their research later on.

Moving cupping therapy is a distinct dry technique that has been practiced as a traditional medicine for a very long time. Using either the cotton sticking method or the flashing approach, the cup is attached to the treatment area after lubricant has been applied to the body part or to the cup's mouth. The cotton sticking technique includes adhering cotton that has been soaked in alcohol to the inside wall of the cup. The cotton is then burned and adsorbed on the treatment area, although the excessive alcohol drippage could cause the skin to scald. The cotton that has been soaked in alcohol is swiftly removed by flashing. This is a reliable and popular technique for cupping (15). Moving cupping therapy, a form of cupping therapy that includes repeatedly moving cups over the skin while using lubricant, is risk-free and economical. It has a wide range of clinical uses and combines the functions of warm moxibustion, cupping, scraping, massage, and medication therapy. In this therapy, lubrication could also provide a certain drug-treatment outcome. Moving cupping therapy is particularly well suited for

treating erythematous scaly skin illnesses because to the therapeutic benefits (14).

In cupping therapy, negative temperature and pressure are more significant factors. A therapeutic effect is produced by increasing the rate and volume of local blood flow when vacuum and heat are applied to the cupping site and the surrounding tissues in a human body. Immunomodulation, neuromodulation, and microenvironmental metabolism can all be affected by physical signals(16). Because the provision of moving cupping before wet cupping can increase blood circulation in microcirculation, next step cupping which will increase the temperature. The effect does not take long for cupping and puncturing or incisions in the skin for wet cupping. This will have an impact on the efficiency of the cupping time.

The novelty in this study is a description of the search for research documents about cupping used worldwide based on an online database from the beginning of the publication of Scopus indexed articles, 1826 until 2022 using bibliometric analysis.

This method will quantitatively analyze research articles and will describe distribution patterns in a cup of research topics. After that, the data will be displayed in the form of tables and figures and will be analyzed so that later it can be concluded whether research on cupping is still carried out (trend) or whether research on cupping is outdated or no longer worth researching.

The urgency of this research is that not all institutions subscribe to Scopus indexed journals or Web of Science (WOS) because the costs incurred by the institution are not small, even though at the level of scientific study activities in universities, reputable journals are very important to be used as references. Therefore, in this study, we used to publish or perish (PoP) software as a solution to this situation to find documentation of research articles about cupping indexed by Scopus. The purpose of this study is to find research trends or

trends related to cupping topics especially moving cupping and wet cupping and identify gaps or problems found from the results of previous studies so that they can design novelties in cupping research.

METHODS

This research is a descriptive analytic study. In June 2022, a search and collection of research documentation on titles were carried out using the search word "cup" using the Publish or Perish software. In the search, the initial period of articles about cupping was published in Scopus indexed journals from 0 to 2022. Data search steps Download the Mendeley application, the Publish or Perish application, the VOSviewer_1.6.18 application, select Scopus in the Publish or Perish view, then fill in the

title with cupping, then the year range is carried out with six searches, namely the year range 0-1980; 1981-1990; 1991-2000; 2001-2010; 2011-2014; 2015-2018; 2019-2020; 2021-2022. This is done because the search in Publish or Perish with Scopus only limits articles to 200 for one search, meaning that there are some articles that do not appear if the number of articles is 200 for one search. Finally, the search was repeated several times so that all articles were collected completely. All files are saved in RIS format for upload in VOSviewer_1.6.18. Then a literature review with the inclusion criteria in the article being full open access in 2020–2022 with an experimental research design (not only abstract), writing cupping procedures, using English and Scopus indexed articles.

RESULTS

Cup type	Number of articles	Percentage (%)
Cupping	587	56
Cupping and and cupping	76	7
Wet Cupping	75	7
Dry Cupping	60	6
Moving Cupping/Sliding Cupping	36	3
Cupping For Optic Or Coffee	28	3
	195	18
Total	1057	100

Table 1 shows the different types of cupping done with PoP from 1826 to 2022.

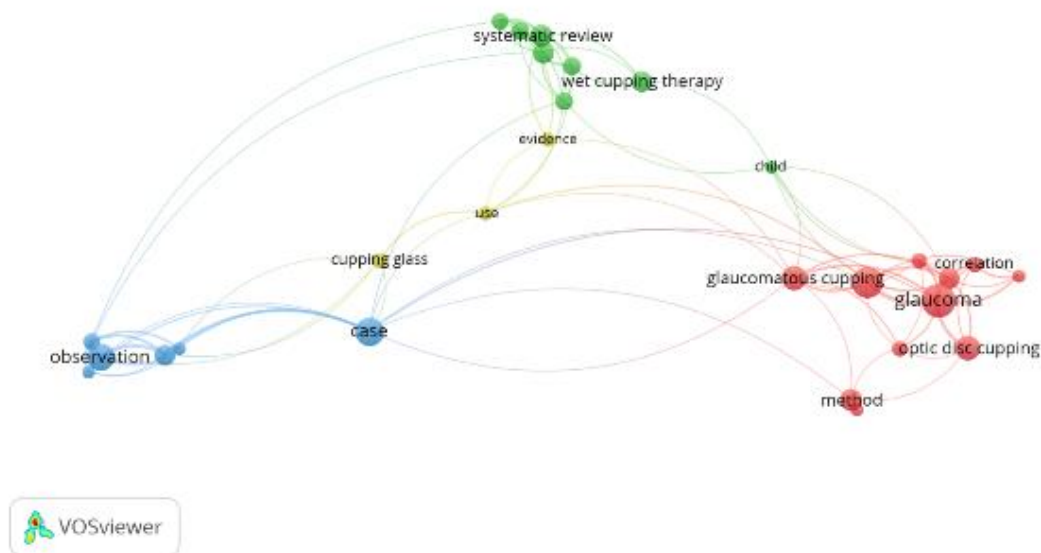


Figure 1: Network Visualization Cupping Research Title Display Period 1826-2022

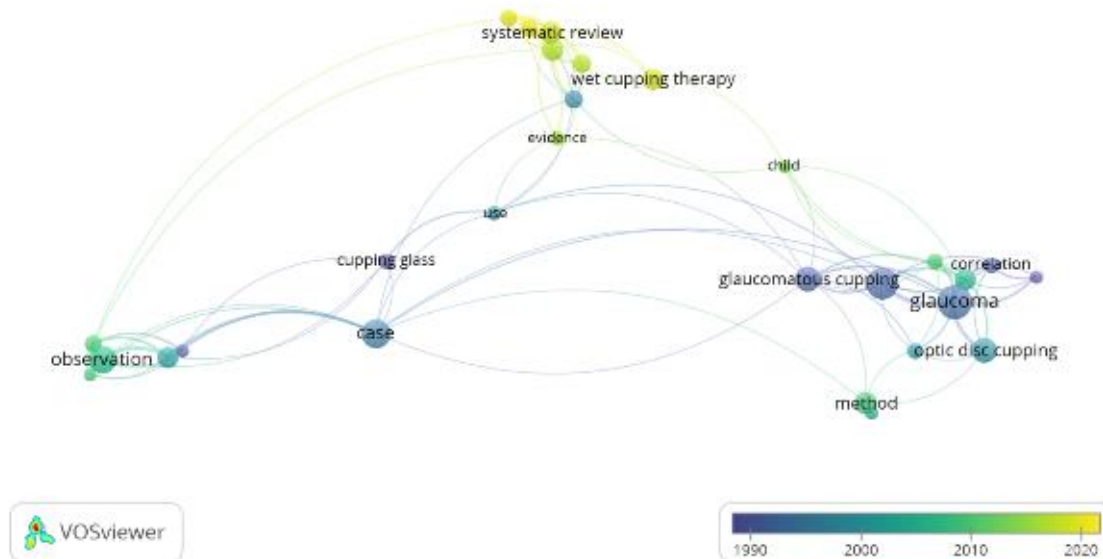


Figure 2. Overlay Display of Cupping Research Title Period (1826-2022)

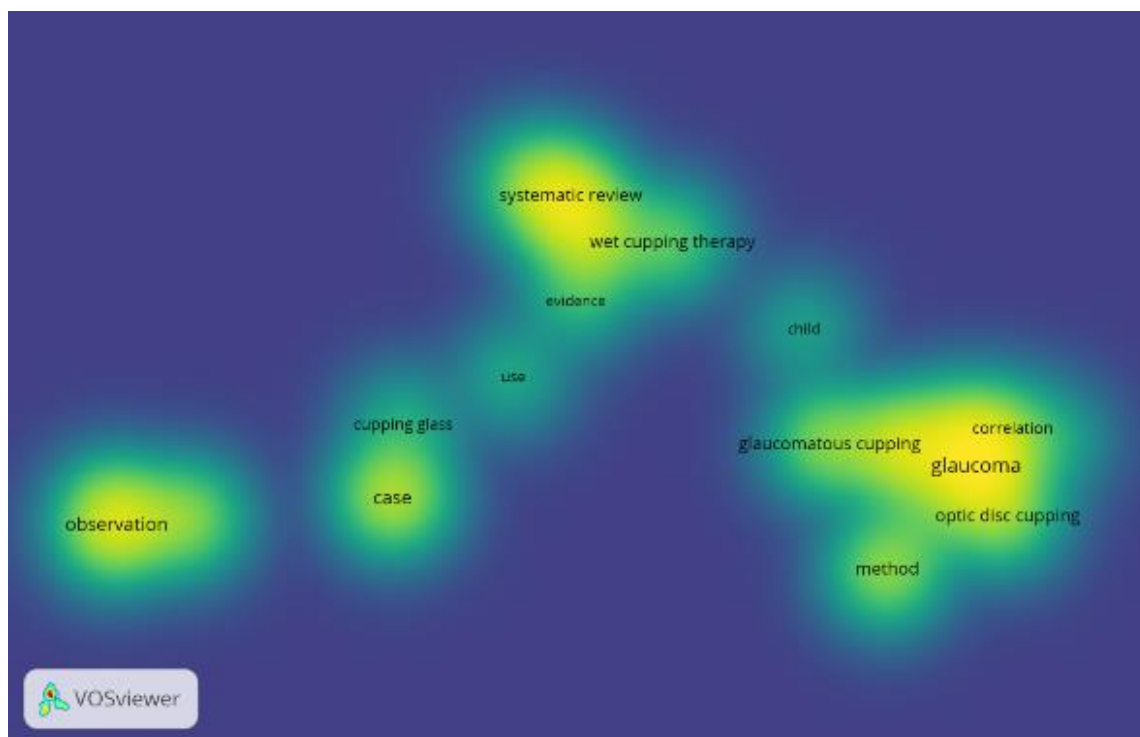


Figure 3. Density display from the title of cupping research for the period 1826-2022

Kinds and Cupping Procedures	Writers
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1. Wet cupping

Electromechanical suction creates a partial vacuum, and then a sterile knife is used to make a superficial incision (maximum 3.5 mm) on the skin. The blood is then poured into the cup after it has been drawn out. Three times, each for five minutes, the suction was applied. The skin beneath the cup is then wrapped after the cup has been removed. Three times for a total of five minutes each, a fictitious cup was applied without cutting or bleeding. (17)

In order to prevent vasoconstriction brought on by chilly temperatures, the clinic's room temperature is assessed prior to the execution of the operation and adjusted between 20 and 25 °C. To prevent hypotension, the patients were instructed to lie prone in bed with their legs lifted. Each patient has a 100 ml disposable cup positioned behind them utilizing a hand-operated suction pump. The interscapular region contains the cups five times. Over the thoracic spine, bilateral peri-spinal areas of the neck, and the seventh cervical vertebra, cups were positioned. The area was cleansed with 70% ethanol prior to cupping. Five steps are taken throughout the 20 to 30 minute long cupping technique. Step 1: Primary Suction: The nurse uses an electric shaver to remove extra hair from the cupping region. After cleaning, the suction cup is inserted in the desired location. Negative pressure is manually applied with a pump and allowed to firmly cling to the skin for 5 minutes. The skin is raised into the cup during suction. Step 2: Incisions are made in the designated skin area once the cup is removed from the patient's back. Each incision is 1 mm deep and 1 cm long. Each incision is made (4)

parallel to the one before it. Using a size 15 sterile scalpel, make the cut. Step 3: Bloodletting/Scarring: To repeat suction using negative pressure, the cup is put on the designated skin area for 10 minutes. Blood from the capillaries fills the cup. Step 4: Removal: The cup is taken out and the blood is taken out of the cup every three minutes. For sterilizing, used glass is submerged in betadine. In order to extract additional blood without creating new incisions, the sterilized cup is reapplied. Step 5: Cleaning and Sterilization: A sterile pad is used to wrap the cupping region after it has been washed with betadine.

Each lady first goes through a cupping procedure in which a customized cup with a valve is placed on her back or another location depending on the type of treatment. When the skin enters the cup, a vacuum pump connected to the cup creates negative pressure inside the cup that is attached to the skin of the back for roughly 5 to 10 minutes. The cup is then removed, and several incisions are made in the sensitive skin using a sterile knife. When the blood drains, the cup is reinstalled once more, and a manual vacuum pump is used to create negative pressure, leaving the cup to collect the blood. It takes between 15 and 30 minutes to remove the cup once the blood flow ceases. Finally, each person's specific wound dressings are created. (6)

After seven days of adaption, the CPC approach for administering WCT to all groups was used (cupping, puncture, and cupping). Two cups, each measuring 2 cm in diameter, are applied to the rat's skin in the left and right paralumbar regions, and negative pressure (-200 mmHg) is applied for 5 minutes before the cups are removed. Ten holes are made in each application area of the cup during the puncture. The same method of cupping is used repeatedly, causing a small amount of blood to leak out. (18)

Measure blood pressure, wet cupping equipment, clean the area with herbal oil, install a header, suction for three to five minutes, perform a lancing device injury, and then suction once more are the steps involved in wet cupping therapy. Open the header and wipe the surrounding area after three to five minutes. Three locations on the body are treated using wet cupping therapy. The first point is situated at the hairline, 2 fingers behind the angle of the lower jaw on either side. (Al-Akhda'ain) The second point is the sixth vertebra, or cervical spine C7, at the top of the spine's extension to the neck (Al-Kaahil). The additional points (Azh-Zahrul A'la) are located on either side of the shoulder blades. Wet cupping therapy was used in this trial once per month for a total of three months. In the Arabic (Hijri) calendar, the 17th, 19th, and 21st are consecutive months for nursing in surgery. (19)

executed in a single session. Prior to wet cupping, the subjects went at least two hours without eating. The punctures were made in five different places. Al-Khail is the name of the first location, which lies across from T1-T3. Two locations in the middle of the clavicle make up the second location. Two spots, three centimeters from the vertebra, made up the third location. Before beginning the wet cupping treatment, clean the area with an alcohol pad. Place the cup there and begin sucking. The cup is then carefully taken out, and a puncture is formed there. After the puncture, the cup is positioned in the same location, and suctioning is done once more. Without piercing, the cupping procedure is repeated a couple of times, and after that, the area is washed and bandaged. (20)



Figure 1: Five site of wet cupping

Five steps make up the wet cupping procedure: sterilization, cupping, (21)
scarification, cupping, and sterilizing. After disinfecting the chosen spot with alcohol, an expert practitioner inserts small disposable cups behind the infant between the scapula bones. The next procedure involves the practitioner using gentle suction for roughly a minute. They then take out the cup and lacerate the skin lightly with a little, sharp lancet needle. A second cupping procedure is then used to extract a little amount of blood, roughly 2-3 mL. The baby is then given an antibiotic ointment or a wound dressing with honey to avoid infection. During wet cupping treatments, hand washing and wearing the proper protective gear (gloves, mask, protective glasses, and gown) are crucial.

There are five steps in the hijab session: i) Cleansing ii) using a special disposable hijama cup and hijama suction gun, suction the first cup prior to the incision; iii) (22)
using a sterile 15 gauge scalpel, make about 10 incisions per cup location, each one measuring about 2-3 mm long and 1 mm deep; iv) suction the cup for 30 seconds to 1 minute; and v) finish suctioning and apply sanitary napkins. Clinical, laboratory, and AS evaluations were conducted twice in the intervention group: once at the start of the first hijama session and once three weeks (about nine to ten weeks) later.

Sterilization of the anatomically specific area where the suction cup will be put is (23)
one of the specific phases of Al-Hijamah. When using a cotton swab dampened with disinfectant to press the frontal aspect of the carpal area, the patient felt pain (povicarried out iodine). A little suction cup is used to suction the skin for around five minutes on the anatomical portion, after which the cup is promptly removed to move on to the next stage. When doing this step, the patient feels pain. Scarification of the skin is carried out as seen below, using a safe method. The doctor clamps the cupped skin, which is separated from the underlying critical tissues in the carpal tunnel by the cup margin. The first suction phase of AB- Al-hijamah was used to delicately scarify the cupped skin. The front of the carpal region was treated with a cup that was the right size. After finishing Al-hijamah on the anterior aspect, the same cup was reapplied to the posterior aspect of the carpal region. a few minor scrapes. Both the front and rear of the carpal region were used for the procedure. A specific yellow bag is used to collect the bloody output from the second suction of the wounded skin. The suction cup was then used once more after that. The same procedures are carried out on the back with a big suction cup. excretion in a specific yellow pouch that is bloody. excretion in a specific yellow pouch that is bloody. A second suction cup is used, and the process is repeated.

On the back, CT is administered using a disposable plastic vacuum cup. Along (24)
with the suggested headache locations of bilateral lateral spine T2-4 (acupuncture point BL41-42) and bilateral lateral spine T6-8 (BL44-46). Each

participant was made aware of the intervention before beginning the WCT application. The five steps of the cupping technique procedure are as follows: 1. Primary suction: Five 70 mm-diameter acrylic glass cups are positioned in the desired location, and a manual suction pump is used to remove air from the cups. Five minutes are spent with the cup on the skin. swelling subcutaneous tissue and skin. 2. Disinfection of the area: After disinfection with povidone iodine, the swollen area is cleansed with sterile gauze. 3. Scarification: Using a number 11 scalpel, a superficial incision is made into the skin that is 20 to 30 mm in size, 5 mm long, and 1 to 2 mm deep. 4. Blood loss and secondary suctioning: Using a manual pump in the same manner as above, the previously removed cup is reapplied to the scar area. The cup fills with blood as it seeps from the skin's and subcutaneous tissue's capillaries and is left in place for 15 minutes. 5. Remove and bandage: After 15 minutes, the cup of blood is removed. After using sterile gauze to clean the application area, a dressing is then applied.

2. Moving cupping/sliding cupping

The patient is relaxed and lying down. The therapist is on the left, creating a draw or vacuum with cup number 4, Vaseline on the back, and a flash fire. Two of the three lines the therapist moves and applies pressure on are the Governor Vessel (GV) and the Bladder Meridian (BL). 15 to 20 minutes of cup action. (25)

The cup appears to be made of transparent glass. When selecting a cup size, the patient's skin lesion's location will be taken into account. Mobile cupping use conventional methods. The skin lesion's location is initially covered in Vaseline. When utilizing the flashing method, the cup is held upside-down while a cotton ball soaked in 95% ethanol is kept in place using tweezers. The cotton ball is lit, pulled out, and immediately transferred into the cup, which is then quickly placed on the region of the skin lesion. By lightly pressing and dragging the cup body while holding it in place with one hand, the skin in the treatment location is given a purple colour after the cup has absorbed the skin lesion area. Pushing the cup with a constant force is necessary to prevent the cup from collapsing due to air leaks. There were 30 repetitions of this on the skin lesion region. Cups are changed five times, each time for no more than ten seconds, every push and pull. This will be done every other day for four weeks. (15)

On the massage couch, the subjects were laid out with their dominant lower leg exposed. To lubricate the movement of the cup, oil is administered to the posterior surface of the entire lower leg. Moving cupping was performed using 4-6 plastic "Shen Nong Shi" vacuum cups with diameters ranging from 3 cm to 6.5 cm on the soft tissues (MC). A hand pump is used to create negative pressure and suction, which is then used to move the cup in different directions across the soft tissues to simulate a massage. On the massage couch, the subjects were laid out with their dominant lower leg exposed. To lubricate the movement of the cup, oil is administered to the posterior surface of the entire lower leg. Moving cupping was performed using 4-6 plastic "Shen Nong Shi" vacuum cups with diameters ranging from 3 cm to 6.5 cm on the soft tissues (MC). A hand pump is used to create negative pressure and suction, which is then used to move the cup in different directions across the soft tissues to simulate a massage. (26)

Table 2 shows a list of articles from the 2019-2022 PoP period that contain Scopus-indexed wet and moving cupping procedures.

DISCUSSION

Table 1 shows that most of the articles in the given title only write about cupping without writing about specific types of cupping, even though this is very important for other researchers in making it easier to find articles in search engines such as Google scholar. Furthermore, cupping interventions combined with non-cupping interventions have been quite a lot done by researchers with the hypothesis that it will increase the effect of therapy or accelerate the healing process when compared to standard therapy or a single intervention (27)(15)(28)(29).

By using the word "combination", you will get 8 articles, namely: Combination Acupuncture and Cupping for Treating Adult Idiopathic Scoliosis (2020) and Dry Cupping, Ischemic Compression, or Their Combination for the Treatment of Trigger Points: A Pilot Randomized Trial (2020) are open access; Clinical report of one chronic several patient on atopic dermatitis by using BUDDEUMI (Equipment with using combination of moxibustion and cupping) during 11 months (2007), Clinical study on combination of acupuncture, cupping and medicine for treatment of fibromyalgia syndrome (2006), Combination of acupuncture with cupping increases life quality of patients of osteoporosis (2008), Combination of acupuncture, cupping and medicine for treatment of fibromyalgia syndrome: a multi-central randomized controlled trial (2010), The application of plum blossom needles in combination with manipulated bleeding and cupping methods in the treatment of bi-syndromes (occlusiones) (2000), 50 cases of acne treated by puncturing acupoint dazhui in combination with cupping (1985) are journal that is not open access. The use of "cupping" is also done as a therapy in the field of optics and the eye, mostly in cases of glaucoma. Of course, this type of cupping is different from the type of cupping intended in this study, namely wet cupping and moving cupping, which are generally

performed on the surface of the skin, not on the eyes. The classification of cupping is as follows (30).

Technical types	The power of suction related types	Method of suction related types	Materials inside cups related types	Area treated related types	Other Types
Dry cupping	light cupping	Fire cupping	Needle Cupping	Pedi cupping	Cosmetic cupping
Flash cupping	Medium cupping	Manual suction cupping	Moxa cupping	Abdominal Cupping	Sports cupping
Wet cupping	strong cupping	Automatic suction cupping	Herbal cupping	Sports Cupping	Sports cupping
Massage cupping	Pulsatile cupping		Magnetic cupping	Facial Cupping	
			laser cupping	Female cupping	
			Electrical stimulation cupping	Male cupping	
			water cupping		Aquatic cupping

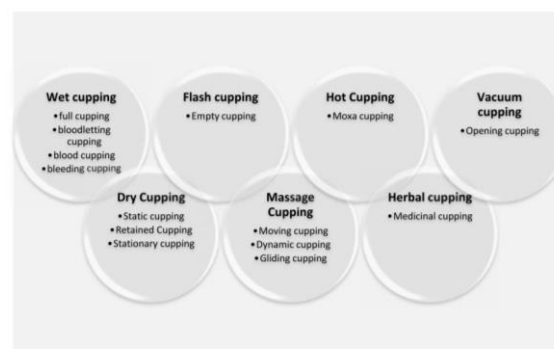


Fig. 4. Cupping alternative names for the type

Figure 1 shows the relationship between research titles or research variables from 1056 titles that have been uploaded in VOSviewer, showing four large clusters consisting of 28 items each and a total closeness of relationships between items of 284 links. The first cluster consists of 11 items: correlation, erichsen cupping test, glaucoma, glaucomatous cupping, method, optic disc, optic disc cupping, optic nerve, optic nerve head, reversal, visual field. The second cluster consists of 8 items: children, dry cupping, effectiveness, meta analysis, protocol, randomized controlled, systematic review, wet cupping therapy. The third cluster consists of six items; blood, case, electroacupuncture, observation, puncture,

therapeutic effect. The fourth cluster only consists of cupping glass, evidence, and use. g. There is a denser, larger and lighter color circle. From the description above, it can be concluded that the appearance of several red circles is a cupping study for glaucoma, which is an eye disorder or disease. This means that researchers will ignore items that have a correlation with the red circle group because they are not in accordance with the specialization in this bibliometric analysis study.

Figure 2. shows items or words that often appear in use in titles with a time span of 1990-2020. For items published under the year 2000, it is blue. It will get darker the longer the publication time. There is a study in cluster one regarding glaucoma, cupping, and the optic disc. Meanwhile, dry cupping therapy in cluster two tends to be light blue, meaning that relatively many studies were conducted around 2005. For wet cupping therapy, with 4 links/links, total link strength 6, occurrences 28, the relatively bright yellow color indicates the publication period is relatively new or around 2020 and there are not many other research network items.

Figure 3. shows the density of the articles published. The items that appear are about glaucoma, systematic reviews, observations, and cases. From that view, wet cupping also appears as an item that is widely published. The bigger the circle, the brighter it will show the more research articles published in Scopus indexed journals. The biggest yellow circle appears in glaucoma, then in systematic reviews, observations, wet cupping, and cases. The number of publications will make it easier for researchers to see gaps in problems or new problems, and references for discussion, and many suggestions and limitations of research will be found that can be ideas for further research.

Bibliometric analysis is a method of literature review, a literature review that summarizes and evaluates a collection of writings on a particular topic.

In order to map the literature, assess it, identify any potential knowledge gaps, and determine Knowledge boundaries are often established using an iterative cycle to choose the best search terms, conduct literature searches, and finish the analysis (31). From table 2, it can be seen that there are variations in the moving cupping and wet cupping procedures. No procedure repeats the same procedure for different cases or diseases. This is because the cupping point adjusts to the complaints or health problems felt by the patient. The therapist plays a role in determining and considering the number of cupping points, location of cupping points, duration of cupping points, and frequency of cupping therapy given None Furthermore, based on the results of previous studies (SLR) regarding the factors that influence the effectiveness of cupping therapy (32). As a crucial component of cupping therapy, negative pressure results in a redistribution of oxygen at the cupping site and nearby tissues, which induces a therapeutic effect by boosting local blood flow. Additionally, it may impact immunomodulation, neuromodulation, and metabolism.

(20) (21)(22) examined the level of negative pressure in the cupping cup employed in the categories of light cupping, moderate cupping, strong cupping, and pulsatile cupping therapy in relation to the various strengths of negative pressure. Light cupping uses a cup with a weak suction, making it ideal for elderly people and toddlers. The cup's internal pressure ranges from 100 to fewer than 300 millibars, which corresponds to the measurement of atmospheric pressure. In order to execute light cupping for facial massage, the practitioner performs one to two complete manual pump suction. Light cupping has the benefit of typically not leaving a cupping mark. Cupping is used for a variety of reasons and has a moderate to medium strength. Within the cup, the pressure is still between 300 and less than 500 millibars. To do moderate cupping, practitioners complete three to four full

manual pump suction. A general-purpose cupping technique is this.

This method of cupping is all-purpose and works with negative pressure for all other kinds. Cupping with a moderate amount of pressure can be used to treat headaches, blood circulation issues, and musculoskeletal pain disorders. In order to achieve strong cupping, a significant negative pressure must be created inside the cup. Children and the elderly should not use it because to the powerful suction. Over 500 millibars of negative pressure are present inside the cup. To execute aggressive cupping, the practitioner uses five or more complete manual pump suction. This sort of aggressive cupping creates a strong negative pressure on the skin, which is linked to a risk of inflammation, pain, and discomfort, thus practitioners should use caution when doing it. The two main downsides of this approach are the potential for dermatitis and sunburn. A unique form of cupping therapy is pulsatile or pulsated cupping. The pressure inside the cup varies and is not constant. The effectiveness of cupping therapy in the treatment of osteoarthritis was examined using it in a randomized clinical trial. Mechanical cupping using flexible silicone and plastic cups is used to do pulsatile cupping depending on the treatment region. A pulsing (variable) negative pressure is produced by the gadget inside the cup. At 2 second intervals, the negative pressure changes between 100 and 200 millibars. When compared to no intervention, this technique was found to reduce the symptoms of knee osteoarthritis. There is a need for greater research on pulsatile cupping therapy as it is one of the novel forms of cupping that has been examined in randomized clinical studies.

Considering the comfort of the patient, who will typically verbally complain of pain if the negative pressure is felt too strongly, the author assumes that a combination of moving cupping, which uses light negative pressure and is moved to the surface of the

skin using oil, and wet cupping, which uses moderate to strong negative pressure, will further improve microcirculation (23) in the skin and will have an effect on other substances more quickly (24). The length of the cupping is the next novel aspect. Prior investigation (25) According to their research, increasing negative pressure to 300 mmHg is more successful at increasing cutaneous blood flow than decreasing it (225 mmHg). A shorter time (5 min) also produces a larger peak and total cutaneous blood flow compared to a longer period (10min). This study provides the first conclusive evidence of how the pressures and durations of cupping therapy alter the cutaneous blood flow responses. To engage the neurological, endocrine, and immunological networks, cupping controls local immunomodulation (33), when the skin's surface is stimulated, the microenvironment is altered, and physical impulses are converted into biological signals that interact with one another inside the body. The neuroendocrine-immune system is stimulated by these signaling cascades, producing the desired therapeutic effect. In additional wet cupping therapy is not harmful to health; rather, it may be helpful as a prophylactic and/or complementary for the treatment of hyperlipidemia, hyperglycemia, and hypertension as well as in the prevention and control of diabetes mellitus and kidney disease. As a result, it is effective in treating patients' headaches, chest pain, and muscle aches (34).

CONCLUSION

Although scientific writings on cupping have been published since 1826 and indexed by Scopus, based on the VOS viewer view, wet cupping is still a trend, and the combination of cupping, namely moving cupping and wet cupping, duration for cupping can be a novelty in cupping research.

Recommendation: The bibliography can be used as a reference for the collection of

research results and as a reference for other researchers to determine the variables of cupping research.

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