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An in-depth Look into Moxibustion

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Introduction

Moxibustion is a traditional Chinese medicine procedure that involves the application of dried mugwort to certain places on the body. It is used extensively in traditional Chinese, Tibetan, Japanese, Korean, Vietnamese, and Mongolian medicinal systems. Suppliers typically age the mugwort and grind it into a fluff; practitioners either burn the fluff or further prepare it into a cigar-shaped stick. They can utilise it indirectly, such as using acupuncture needles, or they can burn it on the patient's skin. Moxibustion is advertised as a treatment for a wide range of illnesses; however its usage is not supported by reliable data and may have negative side effects. The Chinese thought that burning or scorching specific spots on the body enhanced circulation "full-bloodedness" and cured pain since ancient times [1,2].

Description

Moxa is commonly used to treat points near big blood arteries, eyes, and ears because acupuncture at these locations is thought unsafe. The procedure was invented in northern China and was most likely first used to treat rheumatic discomfort. Historically, the locations on the skin were blistered by burning, but now the areas to be stimulated are simply warmed. Rolls of mugwort, mulberry, ginger, and aconite leaves were used in place of hot rods. Moxa is used by practitioners to warm areas and meridian points in order to stimulate circulation via the points and induce a smoother flow of blood and qi. Some believe it can alleviate illnesses connected with Chinese Medicine's "cold" or "yang deficits."

Moxibustion is said to relieve cold and moisture in the body and can help flip breech newborns. Moxibustion is said to be particularly effective in the treatment of chronic diseases, "deficient states" (weakness), and gerontology. Depending on the direction of qi flow they intend to promote, practitioners may utilise acupuncture needles made of various materials in conjunction with moxa. Moxibustion can be done in a variety of ways. Direct scarring, direct non-scarring, and indirect moxibustion are three of them. Direct scarring moxibustion involves applying a small cone of moxa to the skin at an acupuncture point and burning it until the skin blisters and scars. Unless the burning moxa is kept on the skin for too long, direct non-scarring moxibustion eliminates the burning moxa before the skin burns enough to scar. Indirect moxibustion uses a moxa cigar to heat the skin near the acupuncture point, or it is placed on an acupuncture needle implanted into the skin to heat the needle. Stick-on moxa is another option [3].

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Conclusion

The majority of moxibustion research comes from China and is often of poor quality. Its usefulness for a wide range of illnesses is claimed, with some practitioners presenting it as a panacea. A Cochrane Review found insufficient evidence to support the use of moxibustion in the correction of breech presentation of newborns and urged for more experimental studies. Nausea, throat discomfort, and stomach pain from contractions were among the side effects. Moxibustion has also been examined for its potential use in the treatment of pain, cancer, stroke, ulcerative colitis, constipation, and hypertension. According to systematic reviews, these studies are of low quality, and positive findings may be attributable to publication bias [4].

In modern technique, the herb is crushed, wrapped in special paper, and ignited above the point to be warmed or placed on the skin, then removed before overheating begins. The Japanese invented miniature tubes with handles in which the powdered plant is burned away and the therapist controls the warmth. A moxa stick burns for four to five minutes and is used to ease pain and congestion while also acting as an anaesthetic. Heated ginger is used to treat stomach aches, vomiting and diarrhoea, and rheumatic pain; garlic is used to treat respiratory problems; and salt is used to stimulate the abdominal organs. For the best effects, Chinese practitioners emphasise the necessity of proper bodily alignment [5].

References

- Ng, Swee Cheng. "Epidemiology of spondyloarthritis in the People's Republic of China: review of the literature and commentary." Sem Arthr Rheu 37 (2007): 39-47.
- Reveille, John D. "The epidemiology of back pain, axial spondyloarthritis and HLA-B27 in the United States." Amer J Med Sci 345 (2013): 431-436.
- Wang, Haiyan. "TCM nonpharmacological interventions for ankylosing spondylitis: A protocol for systematic review and network meta-analysis." Medicine 100 (2021): a24279
- Xu, Xiao, Lu Cao. "Protocol for systematic review and meta-analysis: Moxibustion for treating ankylosing spondylitis." Eur J Integ Med 12 (2017): 142-146.
- Xu, Xiao. "Metabolomic analysis of biochemical changes in the tissue and urine of proteoglycan-induced spondylitis in mice after treatment with moxibustion." *Integr* Med Res 10 (2021): 100428.

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