



Review Article

Sitz Bath (Abzan) and its Role in Management of Gynaecological Disorders

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A B S T R A C T

Tibb-e-Unani is an integral part of the Indian system of medicine. There are four important modes for the management and treatment of various diseases in Unani medicine, namely, nutrition therapy (Ilaj-bil-Ghiza), cognitional therapy (Ilaj-bit-Tadbeer), medicinal therapy (Ilaj-bil-Dawa) and surgery (Ilaj-bil-Yad). Ilaj-bit-Tadbeer is a treatment modification that involves a degree of change or tweak in the Asbab-e-sitta daruriya (six basic variables) for the well-being of people with disabilities or to prevent diseases in the general population. It incorporates some of the restorative intercessions, for example, Hijamah (cupping therapy), Irsale-Alaq (leech therapy), Fasad (phlebotomy), Dalak (massage), Nutul (irrigation), Abzan (Sitz bath) etc. Among these, Abzan is a novel, basic, protected, non-obtrusive and powerful external therapy. Basically, it is a type of shower where the buttocks and hips are poured into water for remedial purposes. Repeatedly, the entire reproductive system is immersed in water. This procedure is used to reduce inflammation and pain in the lower and upper extremities of the body, such as haemorrhoids, rectal prolapse, uterine spasms, uterine prolapse, pelvic inflammatory disease, irritable bowel syndrome, episiotomy, bladder disease, prostate and vaginal problems etc. In the present paper, an attempt has been made to review the role of sitz bath in various gynaecological diseases.

Keywords: Abzan, Sitz Bath, Abzan Har, Abzan Barid, Abzan Motadil, Abzan Murakkab

Introduction

India is a country with different cultures, religions, and castes. Since time immemorial, the job of a woman has been limited to doing household work, be it homemaker, or of a mother or a spouse. The condition and the job of women have seen a drastic change in recent years. Today women can be seen in top positions around the globe, which was not the same in the past years. The constitution of India in 1950 guarantees all the people equal rights, whether male or female. Women have always been the torchbearers of

society. They are equal stakeholders in the development of any society yet they get defenceless in the context of their well-being and related gynaecological problems which might reduce the capacity of ladies to adapt to many works. On the basis of a clinical study carried out in 23 states in India by ICMR, it was found that 20.28% of women in India have at least one gynaecological problem. The factors which influence gynaecological problems include menstrual hygiene, sex hygiene, behaviour by different cultures, socioeconomic reputes, and academic status of women.



According to this report, menstrual hygiene remained a good predictor of gynaecological problems. Ladies with good family backgrounds, good living standards, and fame had better menstrual hygiene practices which in the long term decreased their chances of getting gynaecological problems. A cross-sectional study was performed and it gave a deep look into the gynaecological problems of working women. It revealed that 87% of working women had dysmenorrhoea, 86% had premenstrual syndrome, 72% had ordinary menstrual disorders such as oligomenorrhea, menorrhagia, dysmenorrhoea, and 63% had genital infections such as metritis and PID.¹

Sitz Bath (Abzan)

It is a type of bath in which the lower extremities such as the hips are submerged in water, sometimes extending to the shoulders or the whole body.^{2,3} It may be simple or therapeutic (Joshanda or Khaisanda). It is a very simple, secure and effective external regimen for diverse sicknesses. This practice can give relief from discomfort and pain within the uterus, uterine cramps, piles, inflammatory bowel disease, episiotomy, inflammation of bladder, prostate problem, vaginal problem etc.³

History of Sitz Bath (Abzan)

The use of water for therapeutic purposes such as in the form of Joshanda, Khaisanda and sometimes water only for the purpose of healing, has a long history since time immemorial. Abzan is one of the popular regimes in which plain water and sometimes medicated water in the form of Joshanda, Khaisanda etc. are used.

Ali Ibn-e-Abbas Majoosi in his famous book 'Kamil-us-Sana' states that when the time for childbirth is near or a woman is going through labour pain, then it is recommended that she takes Abzan Har (hot sitz bath).⁴

Ibn-e-Sina states in his book 'Al-Qanoon fit Tib' that if a woman is having *usr-e-wiladat*, she should take Abzan Har.⁵

Types

On the basis of temperatures of fluid used, sitz bath is divided into the following four categories:

- Abzan har or hot sitz bath
- Abzan barid or cold sitz bath
- Abzan motadil or neutral sitz bath
- Abzan murakkab or hot and cold sitz bath

Abzan Har (Hot Sitz Bath)

It is one of the easiest and most effective ways to cure pain and discomfort. It leads to rapid tissue burning due to the raised temperature of the water, Joshanda and Khaisanda. In this type of bath, the level of water should not exceed the level of navel and the temperature should remain in

the range of 95 °F-105 °F/ 35 °C - 41 °C. It is used all around the world and has a healing capacity.

Curative Effects of Hararat on the Body

It increases blood flow at the zone of application and softens exudates. It alleviates pain and hence relaxes the muscles. It also has mind relaxation properties, improves the joint range of motion, and reduces the stiffness of joints.

Physiological Responses of Hararat⁶

- Hararat produces vasodilation and increases the supply of nutrients to the applied zone. Also, the assemblage of venous blood reduces at that point
- It decreases blood viscosity and helps to transport WBC and antibodies to the applied area
- It helps in reducing muscle spasms and stiffness and hence the pain subsides
- It increases tissue metabolism by increasing blood flow to the tissues
- It increases capillary permeability

Abzan Barid or Cold Sitz Bath

When the temperature of the applied water is cold whether it is plain or medicated in the form of Joshanda and Khaisanda, it is called Abzan Barid or cold sitz bath. The temperature is in the range of 59 °F-64 °F or 15 °C-18 °C. The temperature of the water is sometimes recommended to be quite low but it should remain within the limit of tolerance by reducing the duration of immersion of applied parts. Buroodat is helpful in managing severe injury, trauma, pain, irritation, and oedema.

Curative Effects of Buroodat on the Body

Abzan barid is a local metabolic process that has a peripheral vasoconstriction effect. Along with this, it decreases capillary permeability, improves oxygen consumption, muscle tone, blood flow, lymph flow and movement of WBC, and increases blood viscosity at the applied zone.

Physiological Effects of Buroodat⁶

- Abzan barid produces vasoconstriction and hence reduces blood flow to the applied area, prevents oedema and reduces inflammation
- It produces a local anaesthetic effect and reduces the localised pain
- It decreases the requirement of tissue oxygen by slowdown cell metabolism
- It increases blood viscosity by blood coagulation in the injured area
- It decreases spasms and reduces pain

Abzan Motadil or Neutral Sitz Bath

As the name suggests, water is used at a normal temperature in this and may be plain or medicated. It is used to treat a

variety of ailments and is perfect for patients with diabetic neuropathy.

Abzan Murakkab or Hot and Cold Sitz Bath

Abzan murakkab is a mixture of Abzan har and Abzan barid. Ailments of different types can be cured by this method depending on the water temperature and the duration of time spent in immersion.

In this type of bath, the patient stays in Abzan har for a duration of 5 minutes followed by less than a minute in Abzan barid. The cycle continues 5 times and finishes at Abzan barid.

Therapeutic Effects of Abzan Murakkab

Abzan murakkab facilitates Imala-e-mawad by its repeated cycles of alternate vasoconstriction and vasodilation effects and by this it resolves the oedematous condition. It increases venous and lymphatic flow.⁷

Manual Operating Procedure of Abzan (Sitz Bath)

The below-mentioned procedure is followed for Abzan (sitz bath):

- A bathtub of the correct size should be taken and rinsed with warm water containing bleaching powder followed by a thorough cleaning
- The tub should be filled with liquid up to 2-3 inches
- In the case of Abzan Har, it should be checked that the water is warm and not too hot to cause discomfort or burns
- In the case of Abzan barid, it should be checked that the water is cold, but not too cold to cause discomfort
- The perineum should be dipped into the water. Legs should be kept out of the water by bending them or dangling them over the side of the tub. It should be made sure that the perineum is submerged
- In the case of Abzan har, the patient should stay in the water for a minimum of 15-20 minutes
- In the case of Abzan murakkab, the patient should stay in hot water for 5 minutes and then should sit in cold water for less than 1 minute. The cycle should be repeated 5 times and should finish with Abzan barid
- In the case of Abzan barid, the patient should stay in the water for a minimum of 5-10 minutes
- The patient should wipe and dry himself/ herself with a clean cotton cloth
- The patient should not rub or scrub the perineum, since this may cause irritation and/ or pain
- The process should end by cleaning the bathtub thoroughly

Indications of Abzan (Sitz Bath)⁸

- In Qillat-e-Haiz (oligomenorrhoea), we use Fotanj (*Mentha piperata*), Suddab (*Ruta graveolans*), and

Mushktaramesheeh (*Mentha polygonum*)

- In the case of Warm-e-Rahem (Metritis), we use Roghan-e-Gul (*Rosa damascena*), Berg-e-Maroo (Kanocha) (*Phyllanthus maderaspatensis*), Parsiaoshah (*Adiantum capillus*), Makoh (*Solanum nigrum*), Abhal (*Juniperus communis*), Mushktaramesheeh (*Mentha polygonum*), Marzanjosh (*Origanum majorana*), Tukhm-e-Khatmi (*Althea officinalis*), Tukhm-e-Kharpaza (*Cucumis melo* Linn.), Qaisoom (*Achillea millefolium*), Tukhm-e-Khubbazi (*malva sylvestris*), Gul-e-Khatmi (*Althea officinalis*), Adas Muqashshar (*Adhatoda vasica*), Gul-e-Surkh (*Rosa damascena*), Berg-e-Shibbat (*Anethum graveolans*), Tukhm-e-Kasoos (*Picrorhiza kurroa*), Tukhm-e-Halyoon (*Asparagus officinalis*), and Tukhm-e-Karafs (*Apium graveolans*)
- In Sartan-e-Rahem, we use Karnab (*Brassica oleracea*), Banafsha (*Viola odorata*), Berg-e-Khatm (*Althea officinalis*), and Tukhm-e-Katan (*Linum usitatissimum*)
- In Shiqaq-e-Rahem, we use Shaa-e-Baloot (*quercus baloot*), Gulnar (*Punica granatum*), Gul-e-Surkh (*Rosa damascena*), and Maazoo (*Quercus infectoria*)
- In Nafakhat-ur-Rahem, we use Marzanjosh (*Origanum majorana*), Mastagi (*Commiphora mukul*), Pudina (*Mentha piperata*), Suddab (*Ruta graveolans*), Tukhm-e-Karafs (*Apium graveolans*), Badiyan (*Illicium verum*), Baranjasif (*Artimisia vulgaris*), Baboona (*Matricaria chamomilla*), Nakhoona (*Trifolium indicum*), Shibbat (*Anrthum graveolans*), and Zeera (*Cuminum cyminum*)
- In Ikhtenaq-ur-Rahem (*hysteria*), we use Tukhm-e-Katan (*Linum usitatissimum*), Marzanjosh (*Origanum majorana*), Qaisoom (*Achillea millefolium*), Afsanteen (*Artemisia absinthium*), and Tukhm-e-Hulba (*Trigonella foenum-graceum*)
- In Inzilaq-ur-Rahem (*uterine prolapse*), we use Aas (*Myrtus communis*), Gul-e-Surkh (*Rosa damascena*), and Izkhar (*Cymbogon jwarancusa*)

Contraindications^{9,10}

- Heavy bleeding
- Opening of wounds
- Compression sores
- Dangerous flu
- Acute skin infections
- Inflammation of the infected skin
- Patients with diabetes with diabetic neuropathy
- Patients with high blood pressure
- Constipation
- Lack of heat sensor
- Raynaud's disease

Drawbacks^{9,10,11}

Stiffness occurs when the skin temperature drops below 59 °F. It may also cause itching and frostbite (white, sticky, melted blue skin), burns, bleeding, and palpitations.

Conclusion

Sitz bath is an important regimen of Ilaj-bit-Tadbeer that has been used therapeutically since times immemorial to treat an extensive range of indications. It is effortless and cost-effective. It can be concluded on the basis of the above review that sitz bath may be used in the management of various gynaecological disorders. Further scientific studies should be conducted on sitz bath on scientific parameters to confirm the efficacy of this age-old practice of Unani physicians.

Conflict of Interest: None

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