

COINING: AN ANCIENT TREATMENT WIDELY PRACTICED AMONG ASIANS

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ABSTRACT

Coining is a technique used in treating many illnesses since ancient times. It is a form of dermabrasion therapy still widely practiced in China and South East Asia. This ancient treatment method is employed to rid the body of "heatiness" or "negative energies". Coining is associated with serious complications, and has been confused with child abuse by physicians unfamiliar to Asian cultures. Despite the availability of more simple and effective treatment for fever, coining is still widely practiced among Asians.

Keywords: Coining, fever, traditional medicine, abuse.

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CASE REPORT

A 10-year-old Chinese boy presented with five days history of fever, productive cough, running nose and severe backache. He was treated with oral paracetamol 1000 mg twice daily, oral diphenhydramine 28 mg three times daily and oral chlorpheniramine 4 mg three times daily but without any improvement. His temperature was 39.5°C and throat was injected with inflamed tonsils. During auscultation of the lungs, there were multiple areas of ecchymoses at his back, distributed in linear fashion (Figure 1).



Figure 1: Large areas of ecchymoses as a result of coining

There were no petechial haemorrhages in between the areas of ecchymoses, in the oral mucosa or elsewhere. He has no history of blood dyscrasias, no ear, nose or throat bleed, and no significant drug history. Blood pressure was 120/70 mmHg, pulse rate 90 beats per minute, regular with strong volume. Tourniquet test was negative. The lungs were clear, and there was neither splenomegaly nor hepatomegaly. Vision was 6/6 bilaterally without any retinal haemorrhages. The boy underwent traditional treatment of "coining" prior to presentation. He was diagnosed of bacterial tonsillitis and his illness resolved after three days with oral amoxicillin 500 mg four times daily.

DISCUSSION

Understanding the socio-cultural dimension of a patient's health beliefs will enhance relationship of trust and proper communication, avoid cultural blind spots and hence critical to a successful clinical encounter.¹ Coining is a technique used in treating many illnesses since ancient times. It is a form of dermabrasion therapy still widely practiced in China and South East Asia. This ancient method of treatment is employed to rid the body of "heatiness" or "negative energies".

Coining involved repeated downward pressured strokes in linear fashion over lubricated skin using a hard object with smooth edge, such as coin, jade or buffalo horn. The process is repeated until ecchymoses appeared which is interpreted as released "heatiness".² Hence, coining is believed to be more effective if more ecchymoses are produced. Coining that produced little

ecchymoses is considered counterproductive because the pressured strokes were believed to have been incorrectly applied, and this trapped the "heatiness" inside the body rather than releasing it from the body. Therefore, this technique inflicts a tremendous amount of pain.

There are many other meta-theories behind the perceived effectiveness of coining. Coining is believed to stimulate different meridian points of the body, thus regulating blood flow in order to remove "heatiness" through the skin. We believe coining therapy could relieve fever to some degree. The pressure strokes cause capillary dilatation which in turn results in heat dissipation from the body, a process similar to tepid sponging for relieving fever. This is enhanced by the usage of lubricants such as camphor. The resultant dark red ecchymoses further radiates more heat from the body.

Coining is perceived to be safe despite reports of serious complications associated with the technique.^{1,3,4} Camphor toxicity is potentially fatal and may mask the presentation of underlying disease. This treatment is not advisable for those with blood dyscrasias and those taking antiplatelets or anticoagulants medication. The ecchymoses had occasionally been confused with child abuse; by physicians unfamiliar to Asian cultures.^{5,6} Although the ecchymoses was non-accidental, it was not intentional abuse either. In countries where dengue haemorrhagic fever is endemic, the ecchymoses can be a source of diagnostic confusion.

In the era of evidence-based medicine, there is little place for coining. Despite the availability of more simple and effective treatment for fever, coining is still widely practiced among Asians. Traditional medicine has been able to reach people in ways modern medicine hasn't been able to. Traditional Chinese medicine is based on concepts such as qi (illness is caused by blocked energy channels), yin and yang (balance of energy), and wuxing (five elements). Ayurveda, which originated from

India, personalises the healing process. These treatments involved long consultation and treatment time, employ complex mixture of herbal preparations and variation of treatment technique, each specifically tailored for each individual.

Evidence-based modern healthcare, despite standing on solid foundations, is perceived by some as impersonal and uncompassionate. The stringent regulations for sterility and quality control require prescription of medicine in blister-packages or injections that come in standard vials. Unfortunately, this is perceived as a generalised, collective approach to patient care.

Indeed, the bulk of ordinary thinking depends on perception, and most of the fault in thinking is the fault of perception, not faults in logic (Edward deBono). Both traditional and modern medicine shares the common goal of improving health. Therefore, there is a need for change in perception towards both forms of treatment. The integration of ethnic and cultural considerations into the medical curriculum and modern health delivery system will improve care and health outcomes.¹

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