

Brushing up on *pasma*

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You may be the best doctor in the world, but you'll never be able to convince some Filipinos that there's no such thing as *pasma* – including, perhaps, your very own mother. The concept of *pasma* is, after all, mostly learned from parents and relatives, although it is also spread by coworkers and friends.⁽¹⁾ It is one of those “conditions” that are mentioned so rarely, if at all, during medical training but encountered so commonly outside of it. And while some doctors choose to derisively dismiss it as a myth or an old wives’ tale, the reality is that many Filipinos use the term to describe valid ailments. For this reason, this enduring Filipino phenomenon deserves a serious look.

Symptoms, causes, cures

Filipinos use the term *pasma* to refer to a variety of symptoms, most commonly tremors or profuse sweating of the extremities. Numbness, stiffness, pain, swelling, anxiety, generalized weakness, prominence of veins, and even fever and colds are also considered manifestations of *pasma*. Behind this diverse clinical presentation is said to be one common mechanism: the interaction of heat and cold.⁽²⁾ Specifically, when a part of the body is “hot” – either from exposure to heat or from strenuous or repetitive activity – and it is exposed abruptly to something “cold” such as water, this results in any of the constellation of symptoms that people call *pasma*.



Examples of activities that are believed to cause *pasma* include:

- Bathing after a day of strenuous work
- Getting hands wet after ironing clothes
- Washing the face when eyes are tired or recently exposed to heat
- Drinking cold water when weary or just arrived from a hot environment
- Taking a bath during menstrual periods or in the days immediately following childbirth

In an analysis⁽³⁾ of Filipino cultural beliefs on disease causation, Abad et al explained: “An individual’s homeostasis is attained by a balance between the hot and cold elements, and an illness is caused by a dominance of either hot or cold.” This thinking is said to be similar to the Chinese concept of *yin* and *yang* and the Mexican practice of *cuarentena*, which prohibits

women from taking baths during the 40 days after childbirth. Such philosophy, however, is not shared or even known by some Filipinos, who have a more practical, albeit debatable, explanation: if heated metal is damaged by sudden exposure to cold water, the same thing can very well happen to the human body.

Proposed cures for *pasma* range from benign salt, rice water or herbal soaks to the questionable practice of urinating on the affected body part, preferably first thing in the morning. Some “healers” advocate intake of fish oil, claiming this is the “secret” of fish for surviving in cold water.


The problem with *pasma*

Many Filipinos believe in *pasma* regardless of educational attainment.⁽¹⁾ Some are on the fence, but say there’s nothing to be lost by taking the standard precautions – for example, resting tired feet before getting them wet. Some studies show, however, that such beliefs and practices may turn out to be detrimental.

Farmers, for fear of *pasma*, may refuse to use gloves intended to protect them from pesticide exposure.⁽⁴⁾ Foundry workers may skip washing their hands after work as a preventive measure.

⁽¹⁾ Postpartum depression and psychosis may be attributed to “cold” that has settled in the

mind of women who bathed after childbirth⁽³⁾ and so appropriate treatment is not sought.

Belief in *pasma* does not appear to be going away anytime soon. Patient education is key, but physicians should also remember that *pasma*, while not part of the medical nomenclature, is just a term that patients use to describe real symptoms, and these symptoms could have serious underlying conditions. Numbness in the extremities may be diabetic neuropathy. Swelling may be due to cardiac, renal or hepatic disease. Tremors may signify Parkinson’s disease. Stroke, hypertension and hyperthyroidism are also diagnostic possibilities. It is therefore imperative for physicians, when seeing patients complaining of *pasma*, to take a thorough personal history and physical examination, do the appropriate workup, and not merely dismiss *pasma* as something that does not exist. 

References: 1. DOLE resources page. Department of Labor and Employment: Occupational Safety and Health Center website. Available at: <http://www.oshc.dole.gov.ph/203/>. Accessed 5 August 2015. 2. Tan M. Revisiting *usog*, *pasma*, *kulam*. Quezon City: The University of the Philippines Press; 2008. Available at: <https://books.google.com.ph/books?id=EktzHrfup1UC&hl=en>. Accessed 5 August 2015. 3. *J Community Genet* 2014;5:399-407. doi: 10.1007/s12687-014-0193-1. Epub 2014 Jul 16. Available at: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4159471/>. Accessed 5 August 2015. 4. *J Public Health (Oxf)* 2006;28:43-8. Epub 2006 Jan 25. Available at: <http://jpubhealth.oxfordjournals.org/content/28/1/43.full.pdf>. Accessed 5 August 2015.