

Shifted Navel

Shifted navel, also known as navel displacement, is a common yet often misdiagnosed ailment recognized by the Unani Tibb and Ayurvedic systems of medicine. When navel displacement occurs, the navel 'shifts' from its central position, causing the surrounding abdominal muscles to become misaligned as well.

When a person's navel shifts, then depending on the extent and direction of the shift, the symptoms and their severity will differ.

Generally, when the navel shifts in a downward-direction, it causes diarrhoea, and when it shifts in an upward-direction, it causes nausea, vomiting and constipation. If the navel shifts to the right, then discomfort will be felt in the left side of the body (due to the pull now exerted on that side), and vice versa when the navel shifts to the left.

It should also be noted that a shifted navel is often accompanied by severe back pain, both lower or upper, depending on the direction of the shift. A shifted navel can also cause an interruption to a woman's monthly cycle by causing it to be more or less intense than normal, and by causing it to be more painful than normal.

Since shifted navel relates to the musculature of the body, when a shifted navel is corrected and recentred, the relief is almost immediate. Nevertheless, it is important for a shifted navel to be treated as rapidly as possible. If the navel is left uncentred, then as time passes, the muscles adjust, stretch and adapt to the new position. Thereafter, there is a fear that the shifted navel could continue to recur due to the adjustment of the muscles. Furthermore, if shifted navel is left untreated, the patient will gradually become weaker and more uncomfortable as the digestion and energy flow in the body are disrupted.

Causes of Shifted Navel:

Among the causes of a shifted navel are the following:

1. Lifting a heavy weight
2. Turning the body awkwardly
3. Landing (e.g. from a jump) with the weight of the body on one leg
4. Bloating of the abdomen due to retained gas (the bloating pushes the navel and muscles out of their correct alignment)

Since shifted navel relates to the muscles, a person with weak core and abdominal muscles will be more susceptible to suffering a shifted navel. We thus understand that strengthening the core muscles is greatly beneficial in preventing a shifted navel and preventing a relapse of shifted navel (in patients suffering from chronic shifted navel).

Some of the exercises that are greatly beneficial in this regard are swimming (due to strengthening the core and also due to the manner in which the muscles of the entire the body are stretched when swimming e.g. the long overarm strokes of freestyle accompanied by the kicking movement), squats, pull-ups, stretching exercises, etc.

In the case where shifted navel is caused by gas, then temporary relief may be sought through taking a mixture which will assist in breaking the gas (e.g. chewing and swallowing 2 pinches of jeeru/cumin after meals). However, since the underlying cause relates to impaired digestion, it is recommended that a Hakeem be consulted so that the indigestion may be treated. Furthermore, in cases of severe

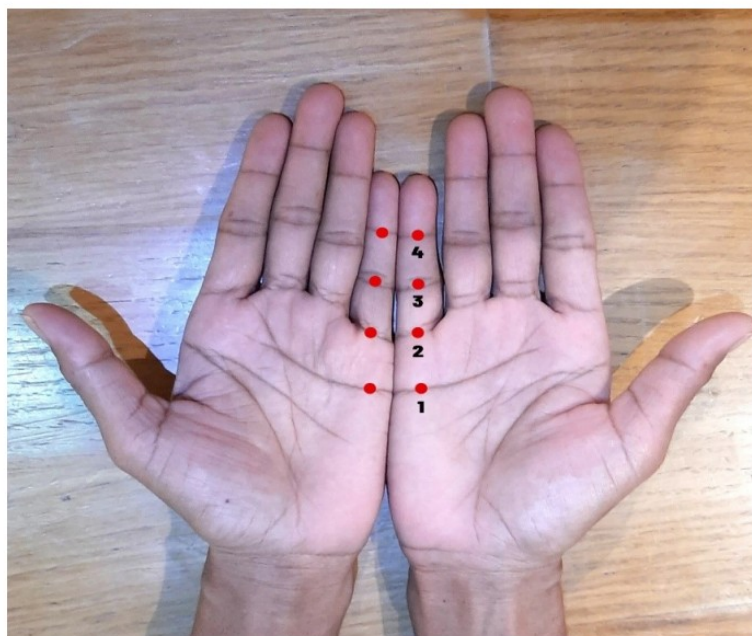
bloating caused by gas, it is almost useless to try and reset the navel until the gas is not expelled, as the pressure exerted by the gas will continue to push the navel out.

It should be borne in mind that an empty stomach is more vulnerable to shifted navel. Thus, after resetting the navel, it is recommended for a person to partake of some food, as the weight of the food in the belly also assists the newly-reinstated navel to remain stable.

Methods of Diagnosing Shifted Navel:

There are several methods which can be used to diagnose shifted navel. Some of these methods are:

1. (For males only) Make the patient lie flat on his back (on the floor or any firm surface – not the bed). Measure the distance from the right nipple to the navel, and then from the left nipple to the navel. If the distances are equal, the navel should be centred. However, if one distance is greater than the other, the navel has shifted.
2. Make the patient lie flat on his back with both legs extended straight. Ensure that the torso (upper body) as well as legs are straight. Now measure the distance from the big toe of each foot to the navel. If one distance is greater than the other, the navel is displaced.
3. Make the patient lie flat on his back with both legs extended straight. Normally, when lying in this position, the feet will be pointing outwards towards the 10 o'clock and 2 o'clock positions. Place both heels together and then join the point so that both feet with the toes are pointing upwards (to 12 o'clock) without any gap between the feet. Now compare the height/length between the big toe on the left foot and big toe on the right foot. If one big toe is higher/longer than the other, the navel has moved. In some extreme cases, the navel shift causes the entire pelvis to tilt. In such cases, when the patient is lying on his back, one will notice that one leg will be shorter than the other (compare the position of the heels of both feet).
4. Stand or sit straight without leaning or turning the body in any way. Place both hands together, palms up, as though engaging in du'aa. However, keep the hands straight and flat with all the fingers joined together, not splayed apart. Align line number 1 of both hands as shown in the picture below, as that is the base line. If the navel has shifted, line 4 of both hands will not align correctly. Rather, on one hand, it will be higher than the other hands.
NOTE: This method can be used to diagnose others, but it is also the easiest method for self-diagnoses.

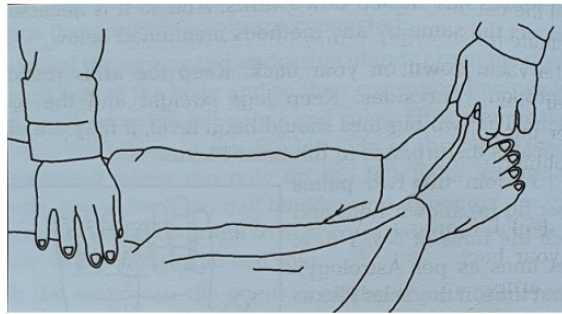


5. On awakening in the morning, while the stomach is empty, insert a finger deep into the navel. Directly beneath the navel, a pulse will be felt. If the navel has shifted, the pulse will not be beneath the navel, but will be found somewhere around the navel, indicating the direction in which the navel has shifted. This method works best when a person wakes up, before he gets up from the bed. It also works better when the navel is not surrounded by too much of adipose tissue (fat) – as is the case with the measuring methods as well (from nipples to navel, and big toes to navel). The reason is that the fat sometimes makes it difficult to determine the true position of the navel.

Methods to Reset the Navel:

There are many different methods which one can use to reset the navel. Some of these methods are:

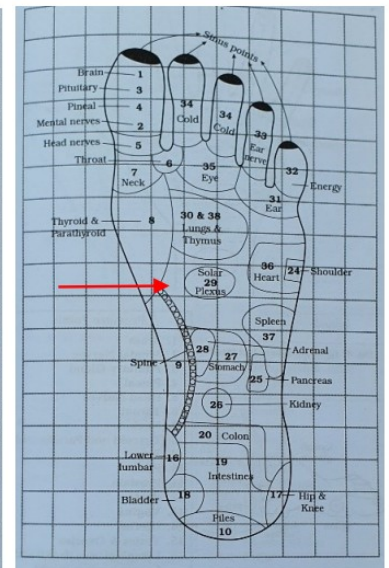
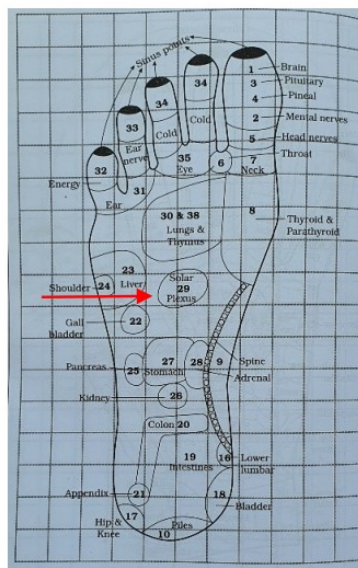
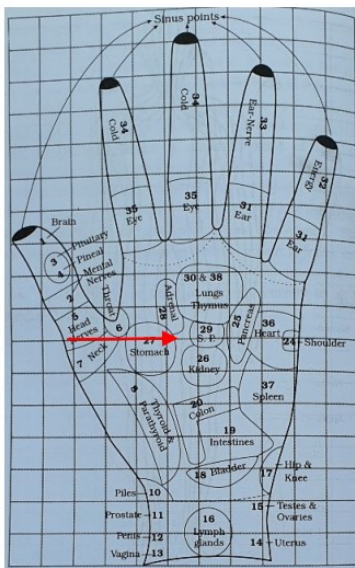
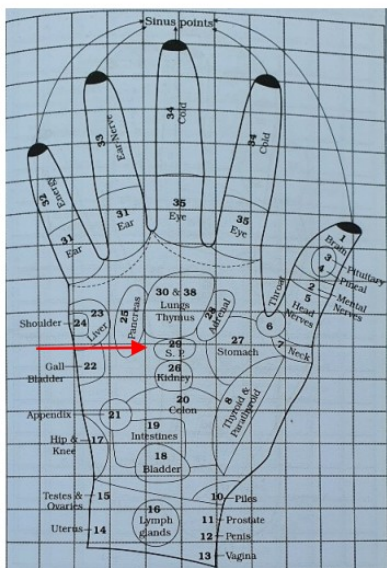
1. **Rocking Method** - Stand straight with both feet together. Rise up onto the tips of your toes, and thereafter fall back hard onto your heels. The hard impact creates a jerking sensation which pulls the navel into position. Repeat the rise and fall thrice, after which you should do one squat. After rising from the squat, the navel should be centred.
This method is one of the easiest methods – especially as a person can carry it out on his own.
In the case of children, due to the lightness of their bodies, at times they cannot generate a sufficient impact by rocking onto their heels in the manner described above. Thus, they should hold their arms straight above their heads with their hands together, and should thereafter jump up and down, trying to land with their knees locked rigid (not bent), so that a hard impact is generated to jerk the navel into position.
2. **Massage Method** - If the pulse beneath the navel is located and found to be out of position, then using oil, one can massage the belly and push the pulse back towards the centre.
3. **Ball Method** - Lie on your stomach and place a small but firm ball under your navel. By lying on the ball, it will press against the navel and push it inwards, causing the navel to be pulled back towards the centre.
4. **Suction Method** – Make the patient lie flat on a firm surface with his hands at his sides. Create a suction over the navel, and then pull straight up gently. By pulling in this manner, the navel is forced back to the centre.
In order to create a suction, some people use the suction cups used in cupping. However, the traditional method is to use the suction created by the displacement resulting through combustion.
In this method a candle (or lamp – or anything with a flame) is placed on the navel and lit. Thereafter, a glass utensil is placed tightly over the flame. As the flame burns out the remaining oxygen, a suction is created. In some cases, when the suction is created, the glass may begin to throb, twitch or move in the direction to which the navel has shifted. Nevertheless, the glass should be brought to the centre and pulled up gently. This may need to be repeated a few times until the navel is successfully recentred.
NOTE: Caution must be exercised to ensure that the patient is not burned and injured.
5. **Pulling on Toe Method** – After conducting diagnoses method number 3 (described above), use one hand to hold down and apply pressure on the knee of the leg which has the lower big toe. With the other hand, pull/tug firmly on the big toe which is lower. Thereafter, repeat the same on the other leg, and then a third time on the leg which has the lower big toe.



6. **Jerking Arm Method** – Place your right hand on the joint of your left arm’s elbow and hold the muscle (bicep) firmly. Then, jerk your left hand towards your left shoulder, trying to touch the shoulder with the open thumb. Repeat five times, and then do the same with the other arm.



7. **Pressure Point Method** - After conducting diagnoses method number 3 (described above), determine which leg has the big toe that is lower. On that leg, at the distance of approximately four fingers (i.e. four fingers’ width - which is the distance from the outside of the small finger to the outside of the index finger, when the fingers are kept together) from the ankle (towards the knee). At this point, there is a pressure point just below the shin bone (on the inside of the leg). Firmly press this pressure point three or four times. One may also press the solar plexus pressure points located on both hands and feet, as seen in the charts below (S.P. - number 29).



8. **Pulling Leg Method** – In the case where one leg is shorter than the other, it may be necessary to give a few hard tugs/pulls on the shorter leg until the two legs become level.

NOTE: In some cases where the navel shift is chronic and continuously recurs, then after resetting the navel, a string should be tied a little tightly (but not so tight as to cut off circulation) around the base of both big toes. This assist to hold the navel in place.

Amals:

There are various amals that a person can recite in order to reset the navel. Likewise, certain people have learnt certain amals which are beneficial (one may refer to these people for treatment if necessary).

One easy amal which any person may use is the following:

Recite 3 x durood shareef, then 3 x Surah Ikhlaas (Qul Huwallah). Repeat this 3 times. This can be done for another person as well (by keeping them in mind when reciting) and can be done over the phone as well.