
SPECIAL MEDICAL ACUPUNCTURE TECHNIQUES: THE SECRETS OF ACHIEVING THE OPTIMAL QI RESPONSE

Steven K.H. Aung

University of Alberta, Edmonton, Alberta, Canada

In medical acupuncture philosophy and special techniques of therapy are usually very important. This will enhance the optimal Qi response which will increase efficacy of the patients. It is also dependent on the therapist's Qi, since the therapist has good, purified, harmonious Qi energy and the response is tremendous. That is why the response of the acupuncture varies on different acupuncturists, different techniques that enhance the quality of therapy. Some ancient techniques have been practiced by many eminent healers which have been found to immensely increase the response. The combination points that was used according to the flow of meridians together with the understanding of the mind, body, spirit connection, which gives the most optimal effect of the therapy. These points are used in combination with other points such as the area at the top of the head, GV.20 and HN.EX.1 (x 4) and also in the neck area such as BL.11 and BL.12 together with GV.14. There are many combinations use of points in other areas such as the wrist, ankle, abdomen, upper and lower back, etc. Besides, the technique of inserting 2-3 inches needles into the fatty area such as abdomen and hip to reduce the volume of the fat by using electrical strong stimulation connecting longitudinally, which I call 'Aung Liposuction Acupuncture' technique. This method in treating localized accumulation of excessive fat is very effective.

WHY SIMPLIFY THE ACUPUNCTURE TREATMENT OF FUNCTIONAL DISORDERS?

François Beyens

Belgium

This is the third and probably final approach to the question about relations between acupuncture and TCM. It started with the realization that at the beginning there was sometimes a fusion and sometimes parallel approaches between the two theories. This state of affairs lasted for more or less one thousand years. During the Song-Yuan dynasty Zhang Yuansu joined individual herbs and the Channels by imagining that the medicines, depending on their action, would "enter" one or several Channels. He also incorporated the drugs in the frame of the Five Elements.

For centuries different schools and different opinions fought with each other, till the instauration of Mao's regime in China. From then on the teaching, practice and theories of TCM and acupuncture showed a kind of common front, discarding the many diverse visions. As a result, acupuncture points were more and more considered like herbs ("herbalisation" of acupuncture) with functions and indications. We will show that it is not correct to assimilate the two, mostly for methodology reasons.

Then, although in every manual on acupuncture there are treatments for every symptom and every pattern, we realised that the sphere of application of the two kinds of treatments were different, that their limits were not the same, and that western medicine had something to say in the matter. So the necessity of formulating a diagnosis according to TCM is not really needed for acupuncture. The treatment prescription becomes therefore much more simple, using at the same time the basic theory of acupuncture, some knowledge of TCM and our understanding of neuroanatomy and neurophysiology, thus creating a bridge between East and West.

NEW APPROACHES IN THE TREATMENT OF THE RACHIS PATHOLOGIES

T. Brenner, O. Sponzilli, R. Rinaldi

A.I.M.A.R., Modena, Italy

Rachis pathologies are more frequent as a consequence of modern life (stress, muscle Hypotonia, micro and macro traumas, car and sport accidents, work-related diseases, bad posture...). Consequently also the medical approach is today multidisciplinary. Neuroreflexotherapy, due its holistic approach is the most adequate methodology for these pathologies.

PERIPHERAL POSSIBLE MECHANISMS FOR ACUPUNCTURE

Christer P.O. Carlsson

Lund University Hospital, Lund, Sweden

Several physiological mechanisms have been suggested for the pain relieving effect of acupuncture. Activation of the descending pain inhibitory system with spinal and supraspinal endorphin release as well as the involvement of

other neurotransmitters like serotonin and norepinephrine have been proposed. Spinal mechanisms such as the gate-control and long-term depression (LTD) are also proposed to be involved, at least for short-term pain-relief.

However, the model cannot explain why there seems to be more prolonged pain relief after more treatments and why there seems to be long-term pain relief after a course of treatments. The gate-control mechanism is only active during stimulation and the descending inhibitory system for up to perhaps 8 hours. Further, the model cannot explain why, in some patients, pain relief starts some days after the treatment whether the patient is first worse or not. The gate-control does not start some days after the stimulation, and that does not hold for the descending pain inhibitory systems either.

Thus, other mechanisms ought to be involved for the long-term effects of therapeutic acupuncture.

We know that in addition to the central neurochemical changes there are also peripheral changes after acupuncture. The insertion of a needle into the tissues induces changes close to the needle (in all different tissues penetrated) and through axon reflexes. The flare reaction (vasodilatation) is often seen locally around the acupuncture needles. This vasodilatation in the skin, due to axon reflexes, has been recognised for a very long time and the mechanisms have been clarified in detail. The stimulation of A δ or C fibres releases vasoactive and pro-inflammatory neuropeptides (e.g. CGRP, SP, NKA, endorphins and VIP). It has been shown that the concentration of the neuropeptides VIP and CGRP in saliva from xerostomic patients increases after acupuncture and it has also been shown that these neuropeptides have trophic effects on glandular tissues - leading to regeneration, and thus a possibility for long term increases in salivation.

Endorphin receptors have been found on nociceptive afferents in inflammatory conditions. The different endorphins are secreted from inflammatory cells in the tissue after an injury. This accumulation may lead to a peripheral opioid analgesia some days after an injury and might be initiated by acupuncture needles in the tissue. There now exist some studies showing that this theoretical possibility also seems to be valid in some experimental models.

In order to find more about peripheral changes after acupuncture a study has been performed to examine the effects of acupuncture on the occurrence, distribution and function of sensory nerve fibres in human skin.

This study was performed with ten subjects who got 10 acupuncture needles inserted subcutaneously at the upper lateral aspect of one buttock. The subjects were recruited from a pain clinic and were undergoing specific acupuncture treatment for some disorder. The experimental needles were stimulated (rotated to and fro) twice during the twice-weekly 25-min sessions over 5 weeks. Skin biopsies, diameter 3 mm, were taken before and 3–6 days after the experimental local acupuncture. Antibodies to the panneuronal marker protein gene product (PGP 9.5), calcitonin gene-related peptide (CGRP), vanilloid receptor 1 (VR1) and my- and delta-opioid receptors were employed to study sensory unmyelinated nerve fibres that transmit nociceptive pain and itch.

We found that the mean number of CGRP-immunoreactive nerve fibres per biopsy section was reduced from 36.0 ± 3.3 to 21.3 ± 4.0 ($P=0.05$) after the treatment. The mean number of PGP 9.5-immunoreactive nerve fibres decreased from 249.8 ± 16.7 to 211.8 ± 12.0 ($P = 0.03$).

No immunoreactivity was found in the skin against my- and delta-opioid receptors with the antibodies used in this study.

Our data indicates a reduction in the cutaneous CGRP and PGP 9.5 immunoreactive nerve fibre density following a series of local acupuncture needling in 10 patients.

Our finding of a local effect of acupuncture on peripheral innervation casts new light on the clinically relevant pain relieving effect of acupuncture in chronic nociceptive pain. In some painful nociceptive conditions, such as osteoarthritis (of the hip joint), endometriosis, rotator cuff syndrome (of the coracoacromial ligament) or Achilles tendinosis, the density of peripheral nerve fibres has been shown to be increased compared with normal, noninflamed tissue (a form of peripheral sensitization). A reduction in peripheral nerve fibre density (a peripheral de-sensitization) where the needles are inserted locally at the pain-generating process might be one explanation for the pain-relieving effects in some nociceptive pain conditions.

The clinical implication of this is to use of many local points, and not at all only those traditionally used. E.g. for Achilles tendinosis - use perhaps 15 needles medial and 15 lateral to the lowest 10 cm of the Achilles tendon, just in front of the tendon tissue.

At the end of the lesson a summary of probable mechanisms behind acupuncture analgesia and therapeutic acupuncture will be presented.

References

- Alfredson H. The chronic painful Achilles and patellar tendon: research on basic biology and treatment. *Scand J Med Sci Sports*. 2005 Aug;15(4):252-9
- Carlsson C. Acupuncture mechanisms for clinically relevant long-term effects—reconsideration and a hypothesis. *Acupunct Med*. 2002 Aug;20(2-3):82-99. Review.
- Carlsson CP, Sundler F, Wallengren J. Cutaneous innervation before and after one treatment period of acupuncture. *Br J Dermatol*. 2006 Nov;155(5):970-6.
- Kim HW et al. The anti-inflammatory effects of low- and high-frequency electroacupuncture are mediated by peripheral opioids in a mouse air pouch inflammation model. *J Altern Complement Med*. 2006 Jan-Feb;12(1):39-44.
- Sandberg M, Lindberg LG, Gerdle B. Peripheral effects of needle stimulation (acupuncture) on skin and muscle blood flow in fibromyalgia. *Eur J Pain*. 2004 Apr;8(2):163-71.
- Zhang GG, Yu C, Lee W, Lao L, Ren K, Berman BM. Involvement of peripheral opioid mechanisms in electroacupuncture analgesia. *Explore (NY)*. 2005 Sep;1(5):365-71.

IS THE ANTI-ANALGESIC EFFECT OF ACUPUNCTURE A “PLACEBO”-RESPONSE?

Gustav J. Dobos

University of Duisburg-Essen, Essen, Germany

As the outcomes of the recent German Acupuncture Trials (GERAC) and Acupuncture Randomized Trials (ART) showed that sham acupuncture was as effective as verum acupuncture in three out of four examined indications, the specific nature of acupuncture interventions have been questioned and have raised the hypothesis, that the anti-analgesic properties of acupuncture are a placebo-effect and are therefore largely dependent on a possible expectancy-effect. Also the results of a poll on acupuncture done by the German Institute for Demoscopy in Allensbach in 2005 showing that 89 % of those with acupuncture experience preferred the combination of acupuncture to the regular treatment in case they were sick confirmed the high expectation towards acupuncture in the German population.

Similarly to the expectation-induced analgesia, acupuncture-induced analgesia can be blocked by naloxone and is thus mediated by the opiate system. Furthermore, the fact that the anti-nociceptive effect of acupuncture is also dependent on the brain CCK-system has been well-established in animal experiments. Similarities to the expectancy-dependent component of the placebo response are obvious and will be discussed. However, the “diffuse noxious inhibitory controls” (DNIC) hypothesis would predict, that “sham”-acupuncture at non-acupuncture points often used as “placebo-condition” control for acupuncture can be neurophysiologically as effective as real acupuncture. Therefore, the analgesic properties of acupuncture may be a net-effect of cortical processes such as expectation, and anti-nociceptive effects at the level of the medulla and even the spinal cord.

Finally in the talk our new results of experimental pain studies using the tourniquet technique will be shown supporting the hypothesis that the anti-analgesic effect of acupuncture is no “placebo”-response.

PATHOPHYSIOLOGY EXPRESSED IN ADVANCED AURICULAR THERAPY

Bryan L. Frank

Colleyville, Texas, USA

The initial presentation recognized by Dr. Paul NOGIER regarding the somatic projections to the external ear has been commonly known as the “inverted fetus” presentation. In following years, he and his colleagues recognized that somatic pathophysiology may present to the ear as additional homunculi, namely the Phase 2 and Phase 3 presentations. Critically, these phases project somatic pathophysiology of more advanced degree than the Phase 1 projection, with Phase 2 representing dense or degenerative pathophysiology and Phase 3 represents intermediate, inflammatory, or transitional pathophysiology. Many auricular therapy practitioners world-wide only practice with the common Phase 1 projection. Often clinical results will be incomplete or transient and the practitioner will not fully understand the Phase dynamics as a function of the projected pathophysiology.

Key words: Auricular Therapy, Phases, pathophysiology

Since the remarkable discovery by Dr. Paul NOGIER of the auricular somatotopic projections that are commonly known as auricular therapy or auriculotherapy, many, perhaps most, of the auricular practitioners in the world today continue to only utilize his initial homuncular projection on the ear, known as the “inverted fetus”, or Phase 1. However, in search of clinical results for patients who had partial or complete failures to treatment with auricular therapy, he and his colleagues discovered and described additional phase projections for more advanced pathophysiology. Treatment of these advanced phase points, when active, are critical to enhanced clinical response for the more advanced pathophysiology.

Over 40 years of writings, research, and teachings by Nogier and his colleagues have demonstrated the Phase 2 and Phase 3 projections of the ear. Phase 2 was found to present the somatic projections of the dense or degenerative pathophysiology on the ear. Phase 3 has been shown to represent the intermediate or transitional pathophysiology, including inflammation.

Commonly, treatment of the Phase 1 projection, which represents the functional or energetic somatic pathophysiology, will lead to complete recovery and healing. This, however, is generally seen in pathophysiology that is of “soft” or energetic characteristic. For patients demonstrating more advanced pathophysiology, the Phase 1 treatment will often lead to partial or complete treatment failure. Some patients may experience significant recovery but of only very limited duration while others may experience only a moderate or minimal decrease in symptomatology from the Phase 1 treatment alone.

Phases have been repeatedly shown to represent these various aspects of pathophysiology for nearly 50 years. Upon auricular examination, clinicians are urged to seek active points within the zones of various organs, tissues, and structures that are being considered due to the specific patient complaint, or as a possible etiology of the complaint, a complicating factor or foci (blockage) to healing. Each of these potential pathophysiology should be sought in Phases 1, 2, and 3. The time required for the additional investigation is brief, and if active points are identified, these should be treated. Failure to treat Phase 2 and/or phase 3 points often lead to partial or complete treatment failure as the more advanced pathophysiology cannot be adequately addressed in the Phase 1 or “inverted fetus” presentation alone.

Patients may present with a complaint that may simultaneously be identified in Phase 1, 2, and/or 3. Some question if this is "logical". However, we routinely see this multi-layered pathophysiology present even in conventional medicine. For example, when a patient experiences low back pain, many clinicians will find and treat a point on the inferior antihelix, corresponding to the Phase 1 lumbar region. This corresponds to the functional and energetic aspect of the pathophysiology, as may be seen with the patient's current strain or pain being experienced; it is a very energetic or functional problem. Additionally, the clinician may also find a Phase 2 point representing the dense or degenerative nature of the patient's low back problem, perhaps indicative of facet arthropathy, degenerative disc disease, or similar pathology. Finally, a Phase 3 point may be identified if the pathophysiology of the low back problem is of an intermediate or inflammatory nature for the latter. Clearly many patients present with two or three of these projections, rather than simply in the Phase 1 projection, representing that pathophysiology may be expressed as one or more phases at any given time. Importantly, treatment of each Phase point that is active will lead to enhanced clinical response.

In conclusion, treatment of Phase 1, 2, and/or 3 points, when active, will lead to enhanced clinical response to treatment, rather than treating only the common Phase 1 points of the "inverted fetus" projections. While there is no indication nor need to treat the points in each phase if they are not active, it is critical to treat each point of the 3 phases, whichever are active, for optimal clinical effect.

References

- 1 Bourdiol R. Elements of Auriculotherapy. Sainte-Ruffine, FR, Maisonneuve, 1982.
- 2 Frank BL. Neural Therapy. Physical Medicine & Rehabilitation Clinics of North America. 1999;10(3) :573-582.
- 3 Frank BL. Principles of Pain Management. In Wilderness Medicine, 5th Edition. Auerbach, PS, Ed. St. Louis, Mosby, Inc., due 2006.
- 4 Frank BL, Soliman NE. Atlas of Auricular Therapy and Auricular Medicine: Edmond, OK, Acupuncture Arts & Press, LLC, 2004.
- 5 Frank BL, Soliman NE. Auricular Therapy: A Comprehensive Text; Phases, Frequencies, and Blockages, Bloomington, IN, AuthorHouse, 2005.
- 6 Frank BL, Soliman NE. Auricular Therapy: A Comprehensive Text; Phases, Frequencies, and Blockages, Color Edition. Bloomington, IN, AuthorHouse, 2006.
- 7 Frank BL, Soliman NE. Auricular Therapy Desk Reference Card, 2nd Edition. Edmond, OK, Acupuncture Arts & Press, LLC, 2003.
- 8 Frank BL, Soliman NE. Auricular Therapy Wall Chart. Richardson, TX, Integrated Medicine Seminars, LLC, 2001.
- 9 Frank BL, Soliman NE. Obesity Treatment Through Auricular Therapy and Auricular Medicine. Medical Acupuncture. 2002;14(1):33-35.
- 10 Frank BL, Soliman, NE. Pocket Atlas of Auricular Therapy and Auricular Medicine. Edmond, OK, Acupuncture Arts & Press, LLC, 2004.
- 11 Frank BL, Soliman NE. Shen Men: a critical assessment through advanced auricular therapy. Medical Acupuncture. 1999;10(2):17-19.
- 12 Frank BL, Soliman NE. Zero Point: a critical assessment through advanced auricular therapy. Medical Acupuncture. 1999;11(1):13-15.
- 13 Nogier PMF. From Auriculotherapy to Auricular Medicine. Sainte-Ruffine, FR, Maisonneuve, 1983.
- 14 Nogier PMF. Handbook to Auriculotherapy. Sainte-Ruffine, FR, Maisonneuve, 1969.
- 15 Nogier PMF and Nogier, R. The Man in the Ear. Sainte-Ruffine, FR, Maisonneuve, 1985.

COMBINING ACUPUNCTURE, MOXIBUTION AND ORTHOMOLECULAR MEDICINE METHODS IN THE TREATMENT OF VITILIGO

Emil Iliev

Department of Acupuncture, Medical University, Sofia, Bulgaria

Vitiligo (Baibo Feng) is a relatively common dermatological disease with unclear pathogenesis and etiology, which can be hardly treated with the methods of Western Medicine. The Traditional Chinese Medicine has no fluent concept of its etiology as well. Most of the Chinese Traditional Medicine scientific sources recommend internal treatment to affect the three main pathogenetic patterns: syndrome due to stagnation of Liver Qi, syndrome due to deficiency of liver and kidney; and the syndrome due to blood stagnation in meridians.

Objectives: Our study represents the effect of combined treatment regimen, which includes acupuncture and moxibustion in association with topical and oral application of Vitix[®], a medication, containing ortomolecular substances. 32 subjects were enrolled in the study (23 women, and 9-men) that was conducted for a period of 3 months. Two courses of 15 acupuncture sessions were applied with a break of 30 days.

The **results** showed good response in 14 patients, moderate improvement in 3, and no response in the rest of the subjects. One patient had vitiligo and scleroderma circumscripta (morphoea), which both responded well to therapy.

Conclusions: The combined method of TCM treatment could be used with some success in the complex therapeutic algorithm for vitiligo patients.

Dominik Irmich
Munich, Germany

An important phenomena of acupuncture is deQi, known as needling sensation, feeling along the channel, propagated sensation along the channel, needling reaction, or arrival of qi. The Chinese word "deqi" is built of the two characters: 得 for "de" which means "arrival" and 氣 for "qi" that can be translated as "life energy". It does not appear in all cases and shows varying character.¹ Acupuncture elicited in 34 of 60 cases deQi in naïve subjects.² According to common textbooks the needling sensation refers to a feeling of soreness, numbness, distension or heaviness around the point or their transmission upward and downward along the meridians after the needle is inserted to a certain depth. At the same time the physician may feel tenseness around the needle.³ Several eastern and western acupuncture schools see the elicitation of deQi as a sign for having reached the acupuncture point and necessary for efficient treatment. The physician is advised to manipulate the needle until needling sensation appears.^{3,4}

However according to Lingshu, one of the most important classical textbooks of acupuncture, it is not important to elicit deQi in the patient, but it is a feeling of therapists. In summary, from a historical point of view there is a high variability in the appraisal of deQi depending on different schools.

In addition, there is a lack of scientific basic to understand the phenomena deQi sensation from a physiological point of view. The physiological structures transmitting deQi are not well understood. Regarding clinical research, there is a lack of evidence about the impact of deQi on the study outcome, too.

Some clinical acupuncture studies used the achievement of Qeqi to assess the adequate degree of manual or electrical stimulation,^{5,6} others regard deQi not as required.⁷ Only a few studies investigated the quality of sensations following acupuncture^{8,9} Several studies emphasise the impact of deQi-elicitation. Sandberg et al. measured stronger increase of blood flow in skin and muscle following needle stimulation eliciting deQi than stimulation without deQi.¹⁰ Hui et al. showed that neuronal hemodynamic activity in fMRI following acupuncture of ST 36 is depending on the kind of needle stimulation used.¹¹ Stimulation with elicitation of deQi provoked a decrease of activity in limbic and paralimbic structures of cortical and subcortical regions of the diencephalon, the brainstem and cerebellum.

The fact that sensation of deqi may blind volunteers in placebo-controlled trials adds certain interest to this topic.¹²

But it is still more complicated, than ever thought. Recently our group has shown that deQi sensation can be elicited without needles, even without touch¹³. This brings up the questions, if deQi sensation can be seen as a central phenomena.

To summarise, deQi sensation is a common, but not understood phenomena in acupuncture.

References

- 1 Kong J, Fufa DT, Gerber AJ et al. Psychophysical outcomes from a randomized pilot study of manual, electro, and sham Acupuncture treatment on experimentally induced thermal pain. *J Pain* 2005; 6 (1): 55-64
- 2 Streitberger K, Kleinhenz J Introducing a placebo needle into acupuncture research. *Lancet* 1998; 352: 364-365
- 3 Cheng X Chinese acupuncture and moxibustion. (Revised Edition) Beijing: Foreign Languages Press; 1999
- 4 Hsieh JC, Tu CH, Chen FP et al. Activation of the hypothalamus characterizes the acupuncture stimulation at the analgesic point in human: a positron emission tomography study. *Neuroscience Letters* 2001; 307: 105-108
- 5 White AR, Ernst E A trial method for assessing the adequacy of acupuncture treatments. *Altern Ther Health Med* 1998; 4: 66-71
- 6 Ezzo J, Berman B, Hadhazy VA et al. Is acupuncture effective for the treatment of chronic pain? A systematic review. *Pain* 2000; 86 (3): 217-225
- 7 Ma YT, Ma M The biomedical acupuncture model. *Dt Ztschr F Akup* 2006; 49 (2): 6-16
- 8 Vincent CA, Richardson PH, Black JJ, Pither CE The significance of needle placement site in acupuncture. *Journal of Psychosomatic Research* 1989; 33 (4): 489-496
- 9 Park H, Park J, Lee H, Lee H Does deqi (needle sensation) exist? *The American Journal of Chinese Medicine* 2002; 30 (1): 45-50
- 10 Sandberg M, Lundeberg T, Lindberg LG, Gerdle B Effects of acupuncture on skin and muscle blood flow in healthy subjects. *Eur J Appl Physiol* 2003; 90 (1-2): 114-119
- 11 Hui KK, Liu J, Marina O et al. The integrated response of the human cerebro-cerebellar and limbic systems to acupuncture stimulation at ST36 as evidenced by fMRI. *Neuroimage* 2005; 27 (3): 479-496
- 12 Zaslavski C, Rogers C, Garvey M et al. Strategies to maintain the credibility of sham acupuncture used as a control treatment in clinical trials. *J Altern Complement Med* 1997; 3: 257-266
- 13 Salih N, Offenbacher M, Irmich D. DeQi Sensation: It's just in our heads? A randomised double-blind placebo-controlled trial. *Proceedings of the German Acupuncture Congress, 2007*, Eds.: Stör W, Irmich D, Banzer W. Elsevier GmbH, Munich, 2007, 37-38

STRESS RESPONSE SYSTEM AND ACUPUNCTURE. THE ROLE OF HYPOTHALAMIC – PITUITARY – ADRENAL (HPA) AXIS

M. Karavis

Athens, Greece

Pathologic conditions related to stress and homeostasis has been described since 1911 from W.B. Cannon. Later on, Hans Seyle (1936) proposed the general adaptation syndrome that examined actions and consequences of environmental, physical, and psychological stressors on the healthy organism.

The general idea is that each organism has the ability to manage stress successfully. The failure to do so (in cases of excessive or continued stress) can lead to pathologies related to stress (stress syndromes) like anxiety disorders, depression syndrome, fatigue syndrome, sleep disorders, gastrointestinal diseases, allergies, idiopathic pain disorders like fibromyalgia, TMJ syndrome, chronic pelvic pain, chronic headaches, chronic tinnitus, interstitial cystitis, autoimmune disorders etc (Chrousos 1999, 2002). Hypertension, diabetes, peptic ulcer, irritable bowel syndrome, bronchial asthma and many skin disorders are some of the most common disorders made worse by stress together with altered mood, motor, autonomic and neuroendocrine dysfunction (Diatchenko et al, 2006).

Today we use two scientific terms to describe the endogenous forces responsible for maintaining the internal stability and proper function of an organism during an acute or chronic stress condition: The **homeostasis** (Cannon 1911, Seyle 1936, McEwen and Wingfield 2003, McEwen 2002) and the **allostasis** (Sterling and Eyer 1988). Homeostasis regulates set points in the body in response to slowly evolving environmental changes in the context of daily fluctuations such as temperature, glucose or oxygen in the blood and blood pH (Robyn Klein 2006). The Allostatic mechanism responds to unexpected challenges in order to adapt to stress beyond everyday life homeostasis such as severe temperature drop or sudden reaction to an accident or exposure to a pathogen. The theory of allostasis provides to scientists an explanation for how exposure to unexpected or severe stressors, can result in wear and tear on tissues and organs, leading to a wide range of pathological conditions.

Regulation of stress response involves two body systems: The hypothalamus – pituitary – adrenal axis (HPA axis) and the central and peripheral components of autonomic nervous system. According to Chrousos (2004), the central components of the stress system are located 1) in the hypothalamus and the brain stem and include the corticotrophin-releasing hormone (CRH) and arginine – vasopressin (AVP) neurons, and 2) in the locus coeruleus (LC) and other catecholaminergic cell groups of the medulla and pons, parts of central sympathetic system. The peripheral limbs of the HPA axis together with the efferent sympathetic/adrenomedullary system represent the peripheral components (Pavlovsky & Friedman, 2007).

Stress Response System interact with endocrine system (reproductive, growth and thyroid axis), immune system (can influence inflammatory reactions), the mesocorticolimbic dopaminergic system (reward system), the amygdale/hypocampus complex (fear, learning and memory), the arcuate nucleus proopiomelanocortin (POMC), the thermoregulatory center and the appetite-satiety regulation center. All these systems can modify the activity of the stress response system and fine-tunes the adaptive (homeostatic or allostatic) response of an organism. Chronic hyper activation of the stress system leads to chronic stress syndrome, with prolonged production of CRH and circulatory, endocrine, psychiatric, metabolic and immune dysfunction (Chrousos 1992, 2004).

Hypothalamus is the principal regulator of autonomic function in the CNS and it is through the hypothalamus that the limbic system and the neocortex influence autonomic functions. Hypothalamus regulates autonomic function through an neuroanatomical way (control descending pathways to the autonomic centers of brain stem and spinal cord) and a neurohumoral way (production and release of neurohormones like oxytocin and vasopressin by the magnocellular neurosecretory system and the regulation of the adenohypophysis via the production and release of hypothalamic hypophysiotropic hormones (HHHs) by the parvocellular secretory system).

Clinically speaking the hypothalamus:

- Participate in four classes of reflexes (milk ejection and uterine contraction, urine flow, feedback loops with peripheral endocrine gland and central effects with hormones on behavior).
- Regulate the autonomic nervous system and emotional behavior.
- Regulate homeostatic processes of an organism such as temperature, feeding and thirst.
- Regulate tissue osmolarity and vascular volume.
- Regulate endocrine functions and immune response.

In TCM, the yin-yang theory summarizes the concept of homeostasis. It is the low of unity of opposites, i.e. the low of dynamic balance that can be applied to every phenomenon and every function of an organism. Excitation and inhibition, sympathetic and parasympathetic, vasoconstriction and vasodilatation, muscle contraction and muscle relaxation are pairs of functions. Between them a dynamic balance should be maintained. In modern medicine instead of yin-yang we use the term homeostasis, metabolism and adaptability where hypothalamus controls every one of them.

It is generally believed today, that the therapeutic (and partly analgesic) effect of acupuncture (to relieve and treat various inflammatory diseases and functional disturbances) is related with its ability to regulate HPA axis (Jeoung-Woo Kangk, 2004). There are reports suggesting that electroacupuncture (E/A) activate HPA axis and sympathetic adrenomedullary system and release glucocorticoids, the final effectors of the HPA axis with potent anti-inflammatory

properties (Liao et al, 1979, 1981). Was also reported that E/A modulate the secretion rate of catecholamines (substances with anti-inflammatory properties through β - adrenoreceptor activation) from adrenal medulla, influencing sympathetic activity due to trauma of the needle (Mori et al 2000, Sato et al 1996). On the other hand, other reports that examined the parasympathetic, long term effect of acupuncture in humans and animals do not show such important effect on HPA axis (ACTH and cortisol levels), failing to verify the existence or not of this specific neural pathway of action of acupuncture.

From our medical view, the stimulation of peripheral nerves (acupuncture, acupressure, moxa, laser, E/A etc) modulates the neural activity in the diencephalon who, in turn, influences autonomic, endocrine and immune functions through the HPA axis, regulating the circadian release of CRH/AVP/ACTH/cortisol.

ANATOMIC STRUCTURE ANALYSIS OF TRIGGER AND ACUPUNCTURE POINTS

H. Liertzer

Orthopaedic department, Herz-Jesu Hospital, Vienna; Johannes Bischko Institute for Acupuncture, Vienna, Austria

The morphological examinations of triggerpoints goes back to 1904 (*Stockman*). But most known are the researches of *Travell&Simons* (1976, 1983) who also stated the correlation of a variety of triggerpoints with muscular acupuncture points. *Heine* (1987) could prove the corresponding of many acupuncture points with nerve-vessel bundles which pierces the superficial body fasciae. A similar anatomical situation can be assumed also for the deep muscular triggerpoints and acupuncture points.

Method: Typical triggerpoints (m.trapecius - TH15 - and m. tibialis ant. - St 36) were examined with a digitally encoded ultrasound system with a 12 MHz linear array transducer with a colour flow resolution down to 0,6 mm. After exact needling (De Qui) the depth of the point was measured at the needle and the transducer placed exactly upon the points.

Results: In both points – exactly in the measured depth – an arterial vessel (diameter between 0.6 to 0.7 mm) as a leading structure of a nerve vessel bundle in direction of 80° to 90° towards the skin where detected. In the surrounding of 5 cm no similar anatomical situation could be found. Especially in the point TH 15 the arterial vessel penetrates the deep fascia of the trapecius muscle.

INTEGRATIVE PSYCHOSOMATICS EAST-WEST – A MODEL

W. Marić-Oehler

Bad Homburg, Germany

Different cultures have created different ways of thinking, perception as well as possibilities to explain body and mind. The long tradition of classic Chinese medicine is based on an inseparable unit of body and mind, constantly changed and transformed by different factors.

Modern western medicine is based on natural science and focussed on the body as an anatomic structure. Its medical system is missing a systematic order of specific correlations between body and mind. Hundred years ago psychoanalysis was developed concentrated on the psychic level of the human being. Just fifty years ago 'psychosomatics' has been slowly established. It still plays an unimportant role in western medicine which is centred on the somatic level.

Western acupuncture doctors, western psychotherapists and specialists on psychosomatics are working in two different medical fields. Exchange and cooperation is very rare. New findings in neuroscience are more and more able to explain the effect of emotions and traumatic events, the effect of psychotherapy as well as the effect of acupuncture on the brain and nervous system.

Besides of the successful practical experience neuroscience seems to be the bridge for encouraging a better understanding and bringing eastern medicine and western psychotherapy more close together. This could be the first step in developing an integrative psychosomatics.

IMMUNOMODULATORY ACUPUNCTURE AND IR – LOW LEVEL LASER – INDISPENSABLE HEALING SUPPORT

Oskar Mastalier

Incomed Institute, Oberaudorf, Germany

Introduction: Knowledge of PNI confirms dependance of therapy on Immune System. There are powerful interactions including reciprocal receipt and transmission of information signals. The Immune System is the connecting link between psychic events and organic disorders. The nervous, hormonal and Immune System are permanent connected in discourse and cooperation in a consistant biochemical network given by in whole organism flowing informations.

Objective: scientific research discover definite effects on Immune System: rise of H-Antigen, level of Interferon, Leucocytes going in hand with improvement in Antibody Titers as increase of defense power. Acupuncture has effect on disturbed regulatory processes but her efficacy is clear addicted on intact Basic Regulatory System. - Information effect of Laser-Acupuncture enables to master immuno-logical processes more efficiently through overall regulation. Bactericidal and virucidal Laser-effects are important. The Immune System gets modulation by means of CNS as well of Hypothalamus-Adrenal Cortex-Axis as well through direct contact of the Autonomic System with nerve fibres.

Methodology: Combination of Acupuncture and IR-Laser is a logical, therapy optimization. The selected combination including effective points for resistance, regulation, energetic condition, psyche, corresponding points to immune competent morphological substrates and Neuroendocrinum. Pain can suppress the Immune System. Distinct regard is requisite to reciprocal action between Neuroendocrinum and Immune System. - Best results: dry needling of found points in combination with IR- Laser-irradiation (zone-belonging Nogier-Frequencies potentized rank A-G. Treatment duration: adequate to laboratory findings and healing process.

Results: Acupuncture and IR-Laser support is indispensable treatment for Immunodeficiency and Immunosenescence of rising age pyramid of polysymptomatic, multimorbid, weakened patients. Rapid efficacy: clear in treatment of Immunodeficiency, Allergy, allergic Asthma, Pollinosis, herpetoid diseases. Lasting effects with needling repeat are possible. Advantage: everywhere possible, no side effects.

Conclusion: Immunomodulatory Acupuncture and IR-Laser is an important pillar of holistic regulatory and energetic medicine. A successful therapy without it is inconceivable and impossible.

AURICULOMEDICINE-THE IMPORTANT KEY TO INDIVIDUAL HOLISTIC MEDICINE AND PREVENTION

Oskar Mastaler

Incomed Institute, Oberaudorf, Germany

Whereas the conventional clinical medicine is engaged about all with morphological changes of organs and tissues, functional derangements remain hardly or not complete realized. About 70% of daily patient-clientel suffer of functional disorders without possibility of determination specific clinical diagnosis. The auricular reflex system shows often already in preclinical stage hinting points to diseases, which are not perceptible for the patient. Auriculomedicine offers the optimal synthesis of clinical and regulatory holistic treatment. The auricular microsystem seems to be especially suitable for the representation of sensitive connections to the whole organism. Three important advantages are decisive: indicating appearance of ear points only by occurrence of peripheral disorders, the short reflex way through few synapses to the CNS and complete puzzled out method of diagnostics, testing and therapy. Auriculomedicine includes considerable possibilities for diagnosis and inclusion of specific individual constitution aspects- as well as the somatogenic and mental states. Therefore detection on the auricle as a means to holistic approach has already proved itself profitable as a complementary method. The diagnostic indications are not only important for Auriculotherapy; they are particularly valuable for comprehending complicated cases of multiple diseases and special testing methods, e.g. discover of disturbance fields or intolerances. The current situation is characterized by an increasingly prevalent rejection of chemical medication on the part of patients and hopeful confidence in the help provided by reflex and regulation medicine and its indications. The largest group among the acupuncture clientel are acute and chronic pain patients of all age groups. The ear reflex system is predestined for achieving therapeutic results much faster. Practical experience confirms the success of the abundance of possible combinations with Auriculomedicine. Certainly the selection of therapeutic important points can not follow a stereotype formula like prescription. Only individual found points take part in therapy concept. High effectiveness in treatment of acute and especially chronic pain syndromes marks the method's popularity. Special Anti-Pain-Points, medicament analogous and also psychic and psychosomatic points offer a profitable variety of possible combinations which are particularly suitable realize patient's individual pain syndrom. The destabilization of the vegetativum caused by stress, strain and environmental influences, energetic and immune weakness of growing number of polysymptomatic and multimorbid patients is increasing rapidly. The age pyramid changed considerably. The advancing age of patients, environmental strain and loads as well as the inability of adaptation to topical life conditions, insufficiency of immune system, malnutrition, stress and psychalgia must be taken into consideration. Connections of PNI has a more frequent occurrence than ever. So not only people in school children but also in large numbers senior citizens are therefrom affected. Patients expect freedom from drug dependence of symptomatic medication, real causal treatment without unwanted side effects and effective optimization of pain treatment. The answer to the riddle will be elimination of false pathological informations, elimination of vegetative false regulation and causal treatment of related psychogenic syndromes. All components are incorporated holistically in a consistent and optimum manner. Of course, Auriculomedicine offers a wide spectrum of effective range of applications for effective treatment of deranged functions, acute and chronic pain, neurovegetative disorders, psychosomatic diseases. The developed Auriculomedicine leads to more effective results and most favourable utilization of all their different diagnostics and therapeutics holistic components for individual treatment.

Thomas Ots
Graz, Austria

A new discipline of research evolved during the last two decades: *affective neuroscience* [Davidson 1995, Panksepp 1998]. It has pointed out the central role of emotions for human life. Research on the role of emotions has started 100 years ago, e.g., W. James and later W.B. Cannon, however, behaviorism pushed emotions out of the realm of scientific endeavour for many decades.

Today, emotions are understood as the change-over of afferent sensory impulses into reactions that organize the individual's life at a given situation. This change-over mainly takes place in the limbic structures and shows strong interactions with the prefrontal cortex. It evolves into and is also identical with somatic and visceral actions of the entire body. As these physiological reactions serve specific purposes, e.g., to fight, or to run away, they incorporate fixed patterns.

Modern affective neuroscience research supports Chinese assumptions about five basic, existential emotional categories: Flow, fight, flight, conservation-withdrawal and grief.

It is only a matter of time that a cooperation of affective neuroscience and traditional Chinese medicine with its enormous knowledge of emotionally induced physiological changes integrate into a new and more somatically oriented definition of psychosomatics.

ELECTRO-MAGNETIC CONSIDERATIONS ON MERIDIAN NETWORK

A. Szasz
Biotechnics Department, St. Istvan University, Budapest, Hungary

Introduction, objectives: The bio-systems are imperfect dielectrics. Their general properties however cannot be described by simple electrodynamics; the system is more complex. Additional to the well known systemic networks there are various debates on the existence, function and mechanism of the meridians. Our presentation deals with the possible mechanism of the meridian forming and their signal-transmission, targeting the explanation of the phenomena by electromagnetic considerations.

Method: Definitely the "machinery" of the living organisms is more chemical/electrical than thermal. There has to be energy distribution system, transporting the energy in non-thermal form. One of such, we suppose, is the meridian network, where energy-propagation goes along. To explain this phenomenon we examine non-linear effects making self-focusing in a dielectric media and resulting to direct the energy-flow in such a highly polarized matter. The energy transport is realized by energy-"bags" like solitons [1]. These interactions have a long-range coherence [2], and defined on the dielectric matter [3]. If the energy would be transmitted by photon carrier, suitable boundary surfaces (waveguides) have to exist; otherwise the energy diffuses, and will be absorbed. Hence, there we suppose the existence of schemes in the advanced organisms like humans transmitting a part of the system-energy in the form of electromagnetic waves.

Results: Considering that the ionic conductivity of the human organism is relatively low and the frequencies of the transmitted photons are high, [4], consequently, the boundary conditions have to be satisfied by high dielectric constant. The wave conductors therefore have to be dielectric feeder lines of high polarizability, with extraordinary dielectric properties [5]. This can be analogized from among the known effects with the self-focusing of the non-linear optics, as we show in our present paper. Due to its relative simplicity the meridians could react quickly and effectively, and even could functioned in the embryonic development as an overall distributor-controller till the development of the other more robust systemic networks (like lymph-, blood- and nerve-systems) is not finished. By controlling the cellular collectivity the measurement of meridians could have (and have indeed) role in the cancer-diagnostics. The massive decrease of the number of gap-junctions between the cancerous cells, and the weakening of all the cellular adherent connections could down-regulate or block the transports by meridian channels, and so it could be measurable in the adequate acupuncture points also.

Conclusions: The meridian-network could be described by electromagnetic basis in complex living systems. Its role is the energy-distribution and control, together with the mass transporting (blood- and lymph-systems) and electric signal transporting (nerve-system) networks.

References

- 1 Careri G, Wyman J: Soliton-assisted unidirectional circulation in a biochemical cycle, Proc. Natl. Acad. Sci. USA, 81:4386-4388, 1984
- 2 Frohlich H: Long-range coherence and energy storage in biological systems, Int. J. Quantum Chem. 11:641-649, 1968
- 3 Frohlich H: Selective long-range dispersion forces between large systems, Phys. Lett. 39A:153-154, 1972
- 4 Frohlich H. (Ed.): Biological coherence and response to external stimuli, Springer Verlag, Berlin, Heidelberg, London, New York, 1988
- 5 Frohlich H: The extraordinary dielectric properties of biological materials and the action of enzymes, Proc. Natl. Acad. Sci. USA, 72:4211-4215, 1975

LASER ACUPUNCTURE IN THE MANAGEMENT OF MIGRAINE HEADACHES

Daniel J. Traum
Melbourne Australia

Objective: The purpose of the study is to examine patients' responses to laser acupuncture treatment who presented at the practice with **previously diagnosed Migraine Headaches**.

Methodology: Each patient's progress was assessed at the start of each visit over the course of their treatment. A Linear Analogue Scale (LAS) was used to measure patient responses to the acupuncture treatment (10 – 0) provided. A rating of 10 indicated no response to treatment and 0 indicated an excellent response to treatment -being asymptomatic.

Results: Entire data set for examining patient responses to treatment. The main variable of interest is the number of treatment sessions required for patients to reach their lowest satisfactory LAS score. The results show a significant recovery/cure rate for the particular condition. General comparison with other forms of treatment will also be mentioned.

Groups will also be compared based on gender.

Conclusion: This clinical evaluation provides significant important positive data regarding the effectiveness of laser acupuncture in the treatment of migraine headaches in over 200 patients.

IS THERE SOMETHING PHYSIOLOGICAL BEHIND THE SPECIFIC EFFECTS OF AURICULAR ACUPUNCTURE?

T.I. Usichenko¹, C.h. Lehmann¹, H. Merk², M. Wendt¹

¹Department of Anaesthesiology and Intensive Care Medicine, University of Greifswald, Germany

²Department of Orthopaedic Surgery, University of Greifswald, Germany

Last decade an array of high-quality Randomised Controlled Trials (RCT) on clinical effectiveness of auricular acupuncture (AA) was performed. The clinical conditions, treated by AA, mainly include the diseases affecting the central nervous system, such as substance abuse, psychiatric disorders and treatment of acute and chronic pain. Recent meta-analyses of RCT have shown that AA was better than various control conditions in treatment of smoking cessation and insomnia (1,2). There is growing number of RCT showing that AA is effective in perioperative conditions in treatment of anxiety and reduction of anaesthetics and analgesics during general anaesthesia (3-7). The most common described clinical application of AA is the treatment of acute and chronic pain (7-9). In recent systematic review on the efficacy of AA for postoperative pain control AA was superior to control conditions in 8 out of 9 included RCT (10).

Then, how could we explain the analgesic effects of AA? Until now no neuroanatomical pathways are known to connect the painful body areas or organs with the external auricle. The innervation of the central part of auricle (triangular fossa and concha commonly used in clinical application of AA) comes from trigeminal, geniculate and superior vagal ganglions, whereas the peripheral regions, mainly used as sham control condition (11) receive their innervation mainly by spinal nerves (12,13). Indeed, in stimulation of the points in the central regions of the auricle was better than sham acupuncture at the non-specific points of the helix for reduction of postoperative analgesic requirement. The central parts of the neurons constituting the auricular branch of the vagal nerve, are situated in the superior ganglion of the vagal nerve and nucleus tractus solitarii (14).

The stimulation of vagal nerve alone leads directly to clinically significant pain reduction (15), which is mediated through nucleus tractus solitarii involving the system of endogeneous opioids (16,17). Interesting that AA pain reduction was also associated with increased beta-endorphine in cerebral fluid in chronic pain patients (18) and can be blocked by naloxone.

Regarding the clinical data in connection with anatomy of neural pathways from the external auricle, we conclude that specificity of auricular acupuncture, used to reduce pain, can be explained by vagal stimulation.

References

- 1 White AR, Moody RC. The effects of auricular acupuncture on smoking cessation may not depend on the point chosen - an exploratory meta-analysis. *Acupunct Med* 2007; 24: 149-56.
- 2 Chen et al. Auricular acupuncture treatment for insomnia: a systematic review. *J Altern Complement Med* 2007; 13: 669-76.
- 3 Wang et al. The use of auricular acupuncture to reduce preoperative anxiety. *Anesth Analg* 2001; 93: 1178-80.
- 4 Wang et al. Parental auricular acupuncture as an adjunct for parental presence during induction of anesthesia. *Anesthesiology* 2004; 100: 1399-404.
- 5 Karst et al. Auricular acupuncture for dental anxiety: a randomized controlled trial. *Anesth Analg* 2007; 104: 295-300.
- 6 Taguchi et al. The effect of auricular acupuncture on anaesthesia with desflurane. *Anaesthesia* 2002;57:1159-63.
- 7 Usichenko et al. Auricular acupuncture reduces intraoperative fentanyl requirement during hip arthroplasty--a randomized double-blinded study. *Acupunct Electrother Res* 2006;31:213-21.

- 8 Grammel B. Die Verbrauchsreduzierung postoperative Analgetika durch intraoperative Applikation von Dauernadeln im OP-Korrespondenzgebiet des Ohres. *Der Akupunkturarzt* 1981; 5: 160-2.
- 9 Alimi D et al. Analgesic effect of auricular acupuncture for cancer pain: A randomized, blinded, controlled trial. *J Clin Oncol* 2003; 21: 4120-6.
- 10 Usichenko et al. Auricular acupuncture for postoperative pain control: a systematic review of randomised clinical trials. *Anaesthesia* 2008;63 (in press).
- 11 Margolin A et al. A single-blind investigation of four auricular needle puncture configurations. *Am J Chin Med* 1995;23: 105-14.
- 12 Satomi H, Takahashi K. Distribution of the cells of primary afferent fibres to the cat auricle in relation to the innervation region. *Anat Anz* 1991; 173: 107-12.
- 13 Peuker ET, Filler TJ. The nerve supply of the human auricle. *Clin Anat* 2002; 15: 35-7.
- 14 Nomura S, Mizuno N. Central distribution of primary afferent fibers in the Arnold's nerve (the auricular branch of the vagus nerve): a transganglionic HRP study in the cat. *Brain Res* 1984; 292: 199-205.
- 15 Kirchner A et al. Left vagus nerve stimulation suppresses experimentally induced pain. *Neurology* 2000; 55:1167-1171.
- 16 Randich A et al. Characterization of antinociception produced by glutamate microinjection in the nucleus tractus solitarius and the nucleus reticularis ventralis. *J Neurosci* 1988;8:4675-4684.
- 17 Randich A et al. Antinociception and cardiovascular responses produced by intravenous morphine: the role of vagal afferents. *Brain Res* 1991;543:256-270.
- 18 Clement-Jones V et al. Increased beta- endorphin but not met-enkephalin levels in human cerebrospinal fluid after acupuncture for recurrent pain. *Lancet* 1980;2:946-9.

PROBLEMS OF EVIDENCE-BASED METHODOLOGY IN ACUPUNCTURE RESEARCH – CAN WE SOLVE THEM?

T.I. Usichenko¹, V.V. Gizhko¹, H. Merk², M. Wendt¹

¹Department of Anaesthesiology and Intensive Care Medicine, University of Greifswald, Germany

²Department of Orthopaedic Surgery, University of Greifswald, Germany

The main instrument of Evidence-based Medicine is the methodology of Randomised Controlled Trials (RCT), which was designed to serve the progress in clinical pharmacology (1,2). Ideal conditions for smooth application of RCT methodology are: (i) homogeneous patients' collective with known cause or mechanism of treated disease; (ii) standardized intervention procedure; (iii) neutral control condition; (iv) clear outcome measures (3). The application of RCT methodology in acupuncture research is complicated, since above-mentioned conditions in case of acupuncture are far from ideal. So, often acupuncture is claimed to be effective in treatment of diseases with unknown etiology (such as migraine, tension headache, back pain, etc.), where the effectiveness of conventional treatment methods is a subject of concern (4,5). Further on, acupuncture is a complex intervention with at least several possible mechanisms of action, including unspecific physiological (sham) and psychological (placebo) effects, making the standardisation (individualised versus formalised acupuncture) and construction of control groups difficult or impossible (6). Sometimes even such robust research methodology, as RCT, might fail to find expected effects, if one tries to treat the disease of unknown origin using the therapy with unknown mechanism of action, measure insensitive outcome parameters and unclearly interpret the findings (7). On the other hand, the RCT methodology works well, if the above-mentioned conditions are fulfilled, e.g. in case of acupuncture for treatment of nausea and vomiting, knee osteoarthritis and acute postoperative pain (8-10). The crucial question of acupuncture research – the topical specificity of acupuncture points (11) – can be solved by RCT methodology using the appropriate control conditions in clinical setting and even using experimental design (12,13).

References

- 1 Amberson JB et al. A clinical trial of sanocrysin in pulmonary tuberculosis. *Am Rev Tuberc* 1931;24:401-32.
- 2 Medical Research Council. Streptomycin treatment of pulmonary tuberculosis. *Br Med J* 1948;2:769-82.
- 3 Jadad A. Randomised Controlled Trials. BMJ Books, 1998.
- 4 Diener et al. Current diagnosis and treatment of migraine. *Schmerz* 2008;22(Suppl 1):51-8.
- 5 Scascighini et al. Multidisciplinary treatment for chronic pain: a systematic review of interventions and outcomes. *Rheumatology* 2008;47:670-8.
- 6 Usichenko et al. The effect of auricular acupuncture on anaesthesia: a search for optimal design. *Anaesthesia* 2003;58:928-29.
- 7 Black SL. To the point: acupuncture and migraine. *Lancet Neurol* 2006;5:382-3.
- 8 Lee A, Done ML. Stimulation of the wrist acupuncture point P6 for preventing postoperative nausea and vomiting. *Cochrane Database Syst Rev* 2004;3:CD003281.
- 9 White et al. Acupuncture treatment for chronic knee pain: a systematic review. *Rheumatology* 2007;46:384-90.
- 10 Usichenko et al. Auricular acupuncture for postoperative pain control: a systematic review of randomised clinical trials. *Anaesthesia* 2008;63 (in press).
- 11 Moore A, McQuay H. Acupuncture: not just needles? *Lancet* 2005;366:100-1.
- 12 Lewith GT, Machin D. On the evaluation of the clinical effects of acupuncture. *Pain* 1983;16:111-27.
- 13 Lietz et al. Acupuncture of Specific Points Influences Cortical Auditory Evoked Potentials - A Volunteer Crossover Study. *Acupunct Electrother Res* 2008;33:1-8.

Workshop papers

Workshop 1

CLINICAL USE OF ACUPUNCTURE IN GERIATRIC MEDICINE

Steven K.H. Aung

University of Alberta, Edmonton, Alberta, Canada

Acupuncture may be characterized as the 'fine art of needling others.' When this is performed in a clinically scientific manner by qualified physicians it is proper to use the term 'medical acupuncture.' In general, in Western biomedical settings, acupuncture is considered a 'complementary' therapeutic modality, utilized by physicians to enhance their medical practice. The provisional list of 62 acupuncture indications, provided by WHO during its recent consultation on acupuncture (Milan and Cervia, Italy, in October 1996) includes painful conditions such as sciatica, migraine and rheumatoid arthritis and non-painful conditions such as addictions, enuresis and anxiety/depression. WHO is currently seeking scientific evidence for the efficacy of acupuncture with respect to the 62 indications, but well-controlled clinical trials are scarce. However, acupuncture is effective on a daily basis in the clinic—it continues to pass the stringent 'test of time'—as evidenced by the satisfied patients of competent acupuncture practitioners. In regard to elderly patients, acupuncture is effective in managing the pain and discomfort associated with a number of chronic conditions, including rheumatoid arthritis, osteoarthritis, cancer pain, low back pain and headache. It is also useful in managing non-painful conditions such as polypharmacy, anxiety, depression, allergy, fatigue and 'failure to thrive' (in the older, more frail elderly). Acupuncture enhances the quality of life of geriatric patients and is therefore a useful tool for physicians to have in their 'little black bags.'

Workshop 2

CHINESE IRODOLOGY FROM THE TRADITIONAL PERSPECTIVE

Nickolay Nickolaev

Riga, Latvia

In traditional Oriental diagnosis the eyes reflect the state of all the organs as well as the Mind and Spirit...

The „Spiritual Axis“ in Chapter 80 says:

‘The eyes manifest the Essence of the five Yin and six Yang organs, the Nutritive and Defensive Qi, and they are the place where the Qi of the Mind is generated.

The eyes are the ‘messengers’ of the Heart, which houses the Mind.

If the Mind and Essence are not co-ordinated and not transmitted, one has visual problems.

The Mind, Ethereal Soul and Corporeal Soul are scattered so that one has bewildering perceptions.’

This statement from the 'Spiritual Axis' is important in two ways.

First, it establishes the interconnections between the Internal Organs and the five segments of the eye that they are called the 'Five Wheels'. The 'Five Wheels' are the pupil (attached to the Kidneys), the iris (corresponding to the Liver), the sclera (corresponding to the Lungs), the two corners of the sclera (connecting with the Heart) and the eyelids (corresponding to the Spleen).

Secondly, this chapter of the 'Spiritual Axis' describes an 'Eye System' composed of all the channels reaching the eye which enter the brain and exit at the nape of the neck...

The discussion of observation of the eyes will first of all be corresponding to the channels influencing the eyes and the main physiological relationships between the eyes and various Zang-Fu.

After discussing the physiological relationships between the internal organs and the eye, we shall go on to the particular aspects of the Iridology, that should be observed in clinical practice and is of a great diagnostic value for the applied practitioners...

Various pathological colours of the sclera will be discussed as well, and, finally, various other specific signs appearing in the eyes will be explained in details.

Workshop 3

'VERY POINT' THERAPY COMBINING POINTS OF VARIOUS MICROSYSTEMS, ESPECIALLY ORAL ACUPUNCTURE

Jochen Gleditsch, Ludwig Maximilian University, Munich, Germany

Irmgard Simma-Kletschka, Complementary and Alternative Medicine in Dentistry, Bregenz, Austria

In the mouth, a system of very effective acupuncture points is to be found in the mucous membranes. These points act as reflex points in modern pain therapy. Mucosa points, in a state of irritation, have a high degree of sensitivity and therapy of these points proves highly effective.

They are divided into vestibulum and retromolar points. Vestibulum points show the interactive relationship between teeth – odontoma – meridians and corresponding organs and systems of all five functional circuits.

The five functional circuits are represented eight times in the oral somatotope.

From the retromolar area in particular, immediate muscle relaxation of the cervical and chewing muscles can be achieved.

Mouth acupuncture restores to normal the malfunctioning systems of the entire body.

The effects take place immediately – especially with muscles and joint problems, mobility of the cervical spine, etc.

Oral acupuncture is a regulatory therapy: remote effects are predictable.

The exact localisation of the point is necessary – "Very Point".

In the peri-oral area corresponding points to the vestibulum points can be found in a state of irritation.

Microsystempoints (YNSA, Lymphbelt, etc.) use the relaxing, sedative, local circulatory increase and analgetic effects as known in acupuncture.

In Clinical studies mouth and microsystem acupuncture points have proved to be very effective, especially in patients with cervical and craniomandibular disorders.

Examinations analysis and therapeutic records and study-designs will be presented.

Workshop 4

NEURAL THERAPY IN PRIMARY PAIN CARE

Kurt Gold-Szklarski

Austrian Medical Association of Neuraltherapy, Vienna, Austria

In order to avoid the development of chronic pain syndroms, malfunction of the locomotor system and pain are to be treated as soon as possible. An appropriate technique should be easy to apply, harmless, cheap and requiring little equipment. As NT satisfies all these claims and in addition guarantees to be without side-effects even when combined with any other method, it lends itself ideally for primary pain care.

THE IMPACT OF NEURALTHERAPY IN IN- AND OUTPATIENT PAIN THERAPY

W. Ilias, R. Janda, K. Wohak

Austrian Medical Association of Neuraltherapy, Vienna, Austria

The introduction of potent painkillers with new formulations of transdermal, intrathecal, transmucosal as well as oral fast resorption and slow release preparations, changed the approach to pain treatment in many aspects. Besides the development of new minimal invasive procedures such as ozonenucleolysis, high frequency and pulsed neurolysis as well, opened innovative possibilities for pain treatment with specific impact in low back pain. On the other hand, cure by means of trigger point injections of local anaesthetics has still clinical importance in treatment and diagnosis respectively. An analysis of outpatients treated in one year (2007) in our pain ambulance showed a still remarkable quantity of treatments which in general may be determined as neural therapy. Although the majority (92,3%) of patients received pharmacologic treatment by means of oral or transdermal medication the second frequent treatment was trigger point injection and/or repeated nerve block or regional block (66,6%) for treatment or diagnosis as well. In 28% of the patients invasive methods such as ozon nucleolysis, or high frequency neurolytic blocks were performed. In 18,8% of the patients surgical procedures such as implantations of devices for intrathecal drug application spinal cord stimulation or subcutaneous stimulation had been used for pain treatment. The data show clearly that patients suffering on chronic pain need individual approaches such as combinations of pharmacological and invasive methods as well. When looking at the distribution of methods used in a standard pain ambulance, neural therapy is still the second important way of standardised treatments in chronic pain.

THE TREATMENT OF LUMBAR SPINE PROBLEMS IN NEURAL THERAPY

Ursula Fischer

Austrian Medical Association of Neuraltherapy, St. Pölten, Austria

Spine disorders and deformities causing pain and disability have many varying etiologies, but most have a common denominator of pain and impairment.

Low back pain means a pain or ache somewhere between the bottom of the ribs, at the back, and the top of the legs. It often begins suddenly, may follow an obvious strain or injury, or may seem to come on "out of the blue" or come on slowly. The main course for low back pain is a strain of the muscles or other soft structures (ligaments and tendons) connected to the back bones (vertebrae).

The individual functional unit consists of two vertebral bodies separated by the intervertebral disk designed to bear weight. This unit is the basis of structure and function of the total spine. Pain and disability result from injury, inflammation, disease and infection of elements of the functional unit.

The diagnosis demands knowledge of normal functional anatomy, knowledge of tissue sites capable of causing pain or dysfunction, and skill in a meaningful examination to ascertain the deviation from normal. Only the right diagnosis leads to an exact treatment.

For any of the structures, which may cause pain in the back, Neural Therapy is an excellent way to help, because it involves the injection of local anaesthetics into skin, trigger, tender and acupuncture points, ganglia, peripheral nerves, scars or glands, as also the therapeutic infiltration in and at joints and ligaments. According to Ferdinand Huneke, M.D., the German founder of Neural Therapy, there can be interference fields that cause dysfunction of the autonomic nervous system. Neural Therapy corrects the dysfunction in the ANS by stopping the interference field. A correctly administered injection of lidocain or procain can often instantly and lastingly resolve chronic longstanding illness and chronic pain of the lumbar spine.

NEURALTHERAPY IN NEUROLOGY

Georg Dimitriadis

Austrian Medical Association of Neuraltherapy, Vienna, Austria

Introduction: Definition

Special Diagnostic Pathway (Palpation)

Special Therapeutic Pathway (Techniques)

Implication in Everyday Clinical Neurology (differential-diagnosis; treatment)

Neurological Examination – a new aspect in NT

Main Topic: Approach to Several Syndroms

- Complex regional pain syndrome and neuropathy
- Stroke - Rehabilitation
- Headache
- Cerebral traumatic lesions
- Infections and postinfectious complications
- Epilepsy
- Psycho-organic syndrome and dementia
- Lesions of peripheral nerves and neuralgia
- Parkinson`s disease
- Diseases of the vertebral column

Summary: Neuraltherapy is an useful tool to improve the functional and rehabilitative outcome of several patients in Neurology

DIFFERENT NEURALTHERAPY TECHNIQUES IN THE TREATMENT OF GASTROINTESTINAL DISEASES

Petja Piehler

Austrian Medical Association of Neuraltherapy, Aue, Germany

The topic deals with the importance and characteristics of different gastrointestinal de-seases, especially of the functional gastrointestinal disorders and their treatment with neu-raltherapy and other methods of regulation therapy. The presentation shows the close con-nection between disturbanses in the vegetative innervation and the appearance of gastro-intestinal disorders. The diagnosis and interpretation of reflexory symptoms of the internal organs and their meaning as part of the therapeutic concept are explained. Description of the main neuraltherapy techniques used for treatment of the gastrointestinal disorders (segmental therapy, neural therapy and fields of disturbance).

THE INTEGRATIVE EFFECT OF NEURAL THERAPY ON PAIN FROM A NEURAL-ENDOCRINE-IMMUNE POINT OF VIEW

Gerasimos Papathanasiou

Austrian Medical Association of Neuraltherapy, Athens General Hospital 'G. Gennimatas', Greece

There is substantial evidence that injury and /or inflammation activates processes in nervous endocrine and immune domains. These processes operate in an interdependent and integrated manner rather than isolated physiological processes subserving stability through physiological , biochemical or behavioral change (Allostasis) .

It has been recently suggested that origin of all pain is inflammation and the inflammatory response, irrespective of the type of pain whether is acute or chronic pain, peripheral or central pain, nociceptive or neuropathic pain.

The biochemical mediators of inflammation include peptides, hormones, neurotransmitters, endocannabinoids and cytokines which also comprise a common chemical language who orchestrates an adequate response to a stressor at all levels of human physiology.

Accumulating evidence also suggest that local anesthetics , besides their well-known nerve blocking effects , possess also a wide range of anti-inflammatory actions through their effects on cells of the immune system , as well as on other cells, for example microorganisms, thrombocytes and erythrocytes.

The potent anti-inflammatory properties of local anesthetics , superior in several aspects to traditional anti-inflammatory drugs and with fewer side effects have been long recognized by neuraltherapists since the origin of the field, and have prompted more and more conventional clinicians to introduce them in the treatment of various inflammation – related conditions and pain.

In the light of our current knowledge seems also possible to support (at least in part) the neuraltherapeutic effects on a highly disputable for the conventional medicine subject, such as that of the disturbance (interference) field.

According to Neuraltherapy a disturbance field is a chronically local tissue irritation of an area with vegetative innervation, with the potential to cause destabilization of the autonomic nervous system and cause remote disturbances of local and /or general kind.

Disturbance fields usually develop where there is inflammation or the potential of inflammation.

Inflammation shifts the regulation of the organism towards to an allostatic state which refers to chronic imbalance in the regulatory system, reflecting excessive production of some mediators and inadequate production of others integrating physiology and associated behaviors in response to changing environments.

The cumulative changes that reflect continued operation of the allostatic state or overactivation of allostatic responses (for example pain) is referred to as the allostatic load , which is in our opinion the essence of the disturbance field.

It seems that neuraltherapy, based on the therapeutic use of local anesthetics, is capable of diminishing the allostatic load and restoring partly or totally the balance of the organism.

Workshop 5

ADVANCED PAIN AND SPORTS ACUPUNCTURE PARADIGMS

Bryan L. Frank

Colleyville, Texas, USA

Anatomical and TCM acupuncture have emerged as the dominant paradigms or styles of acupuncture being taught and practiced today around the world. Many practitioners are, in fact, unaware of the rich wealth of other paradigms that are in acupuncture's extensive history. Many of these paradigms are more closely akin to classical Chinese acupuncture than the contemporary anatomical or TCM models and may be looked at as more energetic approaches.

Key words: acupuncture paradigms, pathophysiology, TCM, classical acupuncture

Chronic pain and sport injuries are common ailments that lead patients to seek acupuncture. Often, these conditions may be better treated through paradigms other than TCM or anatomical acupuncture alone. These paradigms often reduce pain, inflammation and dysfunction more quickly than TCM or anatomical acupuncture. Their use may both benefit the patient better and reward the practitioner with new approaches to treatment not used before.

Fortunately, these alternate acupuncture paradigms are very logical and have a physiological sense that often resonates well with the physician acupuncturist's biomedical training and experience. Based on characteristics or location of pain, pathophysiology and disability, various different paradigms may be employed for each given situation.

This workshop is designed to introduce the experienced or novice medical acupuncturist to alternate paradigms of acupuncture that are not commonly taught around much of the world today. These paradigms may yield better results for the patient and may renew an excitement for the practitioner to find classical acupuncture paradigms that are so elegant and effective.

Workshop 6

NEURAL THERAPY AS INTEGRATIVE MEDICINE IN ENT

Gregor Fischer

Austrian Medical Association of Neuraltherapy, Krems, Austria

Integrative medicine is a new term that emphasises the combination of both conventional and alternative approaches to address the biological, psychological, social and spiritual aspects of health and illness.

Neural therapy (NT) is a holistic method of therapy and a technique of regulation medicine using local anaesthetics for local, segmental techniques, injections to ganglions or to nerves.

Main topics in NT are pain therapy, treatment of functional diseases and solutions for disturbance fields.

Working at an ENT-Department with evidence based medicine (EBM) is faced a lot of patients who don't effort on EBM-therapy. In that case I use NT as integrative medicine. In my lecture I'll give a selection of the principles and techniques of NT especially in the head and neck region.

The main focus will be testing and treatment of disturbance fields.

INTRODUCTION IN PRACTICAL NEURAL THERAPY

Wolfgang Ortner

Austrian Medical Association of Neuraltherapy, Hof/Lbg., Austria

The main columns of the diagnostic procedure are

History Taking, Inspection, Palpation and Functional Examination

History taking

The quality of the diagnosis of disorders depends to a large extent on targeted and specific history taking. A well detailed history helps to minimize the number of tedious and expensive diagnostic tests required. The first impression (gait pattern, posture, etc) and the complaints primarily stated (reason for contact) determine the way in which the experienced therapist directs the exploration.

Inspection:

First look - First impression (Gait pattern, coordination of movement),

Stance (body language), First contact (hand grip, eye contact)

Inspection at rest and moving

Palpation:

Palpation of connective tissue:

- a. Light-touch palpation to realize superficial indications of regulatory disorders
- b. Connective tissue palpation for tension, subtle swelling and turgor of the subcutis.
- c. Kibler skin fold rolling as an expression of the segmental regulation in the dermatome can give information about possible pathological conditions of the associated myotome, sclerotome or internal organs.
- d. In-depth palpation to examine deeper-lying soft tissue structures such as muscular myogeloses, trigger points and fasciae.

Functional examination

In principle: "From head to foot"

Auxiliary findings

A major competence of the therapist is the overview of all the findings and the critical assessment of auxiliary findings (diagnostic tests, specialists' opinions). Physical examination in the form of palpation and functional diagnosis also reveals disorders and pathologies that have not (yet) been established by diagnostic tests. Subtle findings such as limited tumescence (turgidity) of soft tissues may be indicative of clinically no apparent disorders. Conversely, feigned symptoms or falsified diagnostic test results may be called into question as the result of soft tissue palpation void of any pathological finding.

Therapeutic procedere

In actual practice the combination of various injection techniques is typical. The neural therapist will adapt his approach to his range of experience and training. The effect of the therapy will depend less on the type of technique than on an exact examination and the correct inferred biocybernetic idea of the disorder. Also simple techniques prove to be effective if the hypothetic considerations correlate to reality.

Beneath topical injection, segmental therapy, techniques applied to structures of the musculo-skeletal system, intravenous application and neural therapeutic techniques for nerve trunks and ganglia, the treatment of "disturbance fields" is the real domain of Neural Therapy.

The temporary inactivation of these causative factors by target-specific injections of small volumes of a local anaesthetic opens the way for the normalisation or improvement of the body's own regulatory process. If it occurs within a second as a result of a neural therapeutic infiltration, the instant disappearance of pain or symptoms is known as "Sekundenphänomen" (Huneke's instant phenomenon).

WE CAN ONLY BE SUCCESSFUL IF WE APPLY A WHOLE-BODY APPROACH AND TREATMENT

Rainer Wander

DGfAN Elsterberg, Germany

Neurotherapeutic efforts to restore the health of patients must be complemented by other methods in order to be really effective. In its training program our Society has always included Acupuncture, Neuraltherapie and Chirotherapy as an integrated whole. But even these methods do not suffice and must be combined with other naturopathic procedures. Only human reason allows integrated therapy. The rigidity of strictly regulated approaches with its ensuing blocking of therapeutic effectiveness is acquiring increasing importance. That proprioceptors in the upper cervical spinal cord control the whole vertebral column can be confirmed by techniques of medical examination. It is astonishing that the connective tissue structures of the spinal cord sheaths, of the atlantooccipital membrane, of the cervical ligament with its stretch receptors, also have their own transmission system over the spinal cord sheaths, down to the sacrum.

Conclusion: The neuraltherapy is the treatment of the peripheral excitation, the chirotherapy is the treatment of functional chain, the acupuncture ist the therapie by activation of the descending inhibiting systems. You must all combined.

Workshop 7

LASERACUPUNCTURE, EXPERIENCES WITH A PROMISING NEW TECHNOLOGY

Alexander Meyer

Zurich, Switzerland

Since ages acupoints have been stimulated by pressure, needles or cups. Just recently a new technology – laseracupuncture - has been introduced into clinical practice and has actually a definite role in the context of clinical and sports medicine. Practitioners may now stimulate acupoints with laserlight emitting high optical power density. Peripheral and central nervous effects of photobiostimulation have been scientifically validated with fMRI, near-infrared spectroscopy, thermography, laser Doppler flowmetry, transcranial Doppler sonography. Therapeutical applications for practitioners are not restricted to classical chinese or korean acupoints but offer additional advantages in microacupuncture systems such as Yamamoto new scalp acupuncture, chinese scalp acupuncture, hand and ear acupuncture and NPSO as well. Low level laseracupuncture wave length (600-800nm) is not absorbed by water and thus does not create any heat effect. Stimulation of acupoints results from interactions between photons and ionic channels in cell membranes. Pain relief seems to be due not only to stimulation of acupoints but may be a consequence of local laser light effects as well. Over the past five years the author used 7 devices simultaneously and demonstrates treatment options with laseracupuncture in various clinical pictures. Additionally, laseracupuncture offers advantages in the treatment of children and patients with needle phobia. Laseracupuncture is a gentle and effective alternative to traditional needle acupuncture.

Workshop 8

YAMAMOTO NEW SCALP ACUPUNCTURE

Gabriella Hegyi, Yamamoto Rehabilitation Institute, Budapest, Hungary

Thomas Schockert, Private University of Witten/Herdecke, Germany

It has been almost 35 years, that YNSA system, evolved by prof. Dr. Toshikatzu Yamamoto, started its first steps to familirization.

This System developed so dynamic as it amazed all the medical doctors of the World who were already attached to acupuncture.

There should not be such a place on the Globe, where this relatively easy-to-learn System that works exceedingly and its adaptibility and efficiency are outstanding, is unknown!

During the workshop participants will learn about basic points, ypsilon points, brain nerv-points, 3 steps of diagnostocal method of YNSA:abdominal-neck-scalp palpation, studies about YNSA, finally practical approaches, discussion with participants. After the workshop participants will be able to apply immediatly this kind of treatment for some cases.

The lecturers have been students for longer time of prof. Dr. Yamamoto, who trusted and asked them for replacing himself during this workshop because his recent personal incapacitation.

A special brochure will be available for participants for better understanding the figures with personal permission of Dr. T. Yamamoto from his already published book.

Free oral papers

EFFECTIVE ACUPUNCTURE COMBINATION BASED ON SAAHM 5 ELEMENT AND ACUPOINT'S EFFICACY

Chang-Beohm Ahn, Chun-Ho Song, Kyung-Jeon Jang, Hyun-Min Yun, Cheol-Hong Kim, Young-Kwang Min
Department of Acupuncture and Moxibustion, College of Oriental Medicine, Donggeui University, Busan, Republic of Korea

Acupuncture could have more effects in combination of Saahm 5 Element and acupoint's efficacy.

Most illnesses manifest themselves as interruptions of stagnation or irregularities and imbalances of deficiency or excess through meridian.

There are three effects of acupoint; 1st, local effect on surrounding areas, corresponding and related channels. 2nd, special effect of special points as connecting and alarm points, etc. 3rd, tonification and sedation effects of distal points below elbow and knee joints, particularly, the 5-Shu points corresponding to 5 phases.

In backache, many doctors select acupoints on BL, GB, GV, etc from local and special effects.

In imbalances of deficiency and excess, we must select 5 Shu points.

In NanJing, the 50th issue explains 5 Evils' pathology and the 69th issue proposes treatments.

Gaowu in China's Ming Dynasty 1stly proposed to tonify and sedate based on promotion cycle which's called as The Four Needle method by Jeremy Ross

Korean Saahm about 350 years ago proposed 5 Element acupuncture that uses simultaneously 5 Shu points of promotion and control cycles which's called as Four Needle technique or The Eight Needle method.

In backache of BL deficiency, we reinforce BL.67, LI.1 and reduce KI.3, SP.3.

In backache of BL excess, we reduce BL.65, GB.41 and reinforce BL.40, ST36.

It needs guidelines for symptoms' diagnosis and clinical statistics that compares effects of acupoint's treatments to those of combination treatment though we may have more effective treatment if using two methods together.

ACUPUNCTURE AND LOCAL LASER-THERAPY IN OSTEONECROSIS OF THE KNEE-ACTUAL RESULTS

K. Benner, S. Benner
Gelenkzentrum Hochheim

Osteonecrosis of the knee is a pathological process and the study of its genesis remains controversial and incomplete. Several etiological aspects, such as traumatic, endogenous and - most importantly vascular theory, are still being debated. This is a case study about a middle - aged healthy woman with an early beginning osteonecrosis of the lateral Femurcondylus. She experienced pain at the lateral joint cavity and a movement reduction. Since conservative approaches with NSAR and physical therapy had not been successful, we started a six week local laser-therapy, with a laser needle appliance in combination with acupuncture. The MRI three months later showed a restitutio ad integrum, and the patient had no more problems moving the joint of the left knee freely. Therefore, we can suppose that the low level laser-therapy has biostimulatory effects. We presume that this therapy induces vascular relaxation, increases microcirculation and prevents the further development of bone necrosis.

THE DARK SIDE OF OUR KNOWLEDGE

Géza Bodor
Konzílium Bt.

The TCM is dedicated to help for human being and animals. The basis is the channels and points, the Qi and Xue, the five elements and Yin-Yang theory. Same rules are involved in Dim Mak, Kyusho, very specific and secret traditional martial arts. legendary warriors and great masters are used the techniques, with incredible efficiency. I want introduce the outline of point attack, methods and relations with the acupuncture. For better understanding, I present a short demonstration. About more information visit the homepage of www.kyusho-academy.com, for video presentations see www.dillman.com

ACUPUNCTURE FOR OBESITY

K. Trinh, Soojin Chun, V. Bombin, Mariya Paryak
McMaster University

Abstract background: Obesity has become a major health challenge for both patients and health practitioners. Well known methods of weight reduction such as diet and exercise are often difficult to comply with because of lifestyle and quality of life issues. Other methods such as diet pills or surgery can have serious side effects and often do not show long-term benefit. In an attempt to find a less invasive and effective modality of treatment, traditional Chinese medicine particularly acupuncture and auriculotherapy has become a topic of research in this field. The authors have conducted a review of the current evidence regarding the use of auricular and body acupuncture in the treatment of obesity.

Objectives: To determine the effects of auricular and body acupuncture on weight loss in obese individuals.

Methods: Search strategy: We searched AMED, CINAHL, EMBASE, Medline and PsychINFO from their beginning to March 2008. We used a search strategy as in appendix A. Selection criteria: Any published trial using randomized (RCT) assignment to the intervention and control groups, in full text were included. Data collection and analysis: All articles were either included or excluded in the review based on certain criteria by two independent assessors. Included articles were then evaluated for trial methodological quality by two different independent assessors using the Jadad criteria. Concealments of allocation were assessed using Cochrane criteria. Intention to treat was also assessed. Consensus was used to resolve disagreements. Because of clinical heterogeneity, we were not able to combine studies using meta-analysis models.

Results: Overall, the review did not find any high quality double blinded randomized control trials and because of the clinical heterogeneity of the studies reviewed, meta-analysis was not performed. However, we found moderate evidence in favour of acupuncture over exercise in the treatment of obesity, and over a combination of diet and exercise. There was limited evidence in comparison to diet alone or "inactive" treatment.

Conclusion: Due to the limitations of the published studies in this field, the authors of this review were unable to make any firm conclusions with respect to the efficacy of acupuncture in the treatment of obesity. There is some evidence suggesting that acupuncture may be more beneficial than exercise or a combined exercise and diet regimen. Therefore, it is necessary to conduct a large high quality double blinded randomized control trial in order to determine whether acupuncture should be used a treatment modality to achieve weight loss in obese individuals.

CHINESE AND WESTERN MEDICINE – AN INSIDER’S COMPARISON

Zhen Chen

President of Central European TCM Association, Budapest, Hungary

Chinese and Western medicine are the two mainstream medical treatments in today's world. Both of them are developing through continuously incorporating the advantages of the other. In China, currently they are developing a combined Chinese-Western medicine while holistic treatments, such as traditional Chinese medicine is becoming more and more popular in the west.

The presentation will investigate different methods of traditional Chinese healing and western medicine and look into the philosophies behind them. By explaining the main theories of TCM, such as 'Zheng', the five elements and universal co-existence, it will compare and contrast the main practices for treating common illnesses such as tuberculosis or hypertension. The second part of the presentation will cover the differences in drug usage. It will explain the Chinese perspective for using herbs and compare the differences in a Chinese and Western doctor's evaluation process when prescribing drugs or herbs. Finally, it will also shortly discuss the advantages and disadvantages of using Chinese and Western drugs.

This comparison carries high importance in today's world when science is merging with the tradition and experience in medicine. When finding an accurate treatment for a patient, a doctor must bear in mind the advantages and disadvantages of both in order to provide the most well- targeted solution.

THYROID PATHOLOGY TREATMENT WITH TRADITIONAL CHINESE MEDICINE

Luzina Chju Lily

Centre for Chinese Medicine, Moscow, Russia

Application of acupuncture in treatment of patients with thyroiditis chronica autoimmune is actual as this pathology is on the first place among other thyroid diseases.

The main idea of the research was to find if acupuncture may be used n treatment of this pathology.

We have studied 17 patients with thyroiditis autoimmune in the age of 31-54 (2 of them are men). The diagnosis was proved by detection of serums thyroid autoantibodies, by studying biopsic puncture, by measuring the level of

the three iodthyronin, thyroxin and thyroitic hormones. In all cases diffuse hyperplasia of thyroid lobes, sometimes asymmetric, with degree 1 to 3. each patient was subjected to approximately 20 sessions of acupuncture within 1,2 months. The meridians and acupuncture points were influenced during sessions. The process was controlled by ultrasound diagnosis.

After 1,5-2 months, during control ultrasound researches, it was found that hypertrophy of thyroid has reduced on average on 1 degree.

The results shoed that treatment of thyroiditis chronica autoimmune with diffuses euthyroidisis form can be performed with the help of acupuncture.

STUDY ON THE SPECIFIC OR NONSPECIFIC ACUPUNCTURE EFFECT COMPARED BY THE PROTEIN EXPRESSION OF ASTHMATIC AND NORMAL RATS

Jian-Mei Cui, Yong-Qing Yang

TCM department of north china coal medical university

Objective: To investigate the changes of serum and lung tissue proteins in asthmatic and normal rats treated by acupuncture and elucidate the specific or nonspecific effect of acupuncture then to establish the foundation of modern biological mechanisms of acupuncture and moxibustion therapeutic effect.

Methods: The "3-points and 5-needles" method is effective for asthma in clinic. Based on the efficacious acupuncture treatment, IEF/SDS-PAGE, MALDI-TOF-TOF and LC-ESI-MS/MS techniques were applied to study the differences of serum and lung tissue proteome of asthmatic and normal rats treated by acupuncture.

Results: 1. The airway resistance of AS group rats can significantly lower by acupuncture during the first to the third minutes ($P < 0.05$). There is no change of airway resistance of normal rats after acupuncture treatment.

2. In the 2DE map of rats' sera and lung tissues, there are so many different spots between asthmatic and normal rats. Among the 19 kinds of proteins identified by LC-ESI-MS/MS, 3 are related with the nonspecific effect of acupuncture; 4 are related with the specific effect to normal rats of acupuncture; 12 are related with the specific effect to asthmatic rats of acupuncture.

Conclusions: 1. From the sera and lung tissues 2DE map of asthmatic and normal rats, we can see that acupuncture not only has the specific effect closely related to the organism state, but also has the nonspecific effect had nothing to do with the organism state. 2. The effect of acupuncture to asthmatic rats has two sides, the one is nonspecific effect, the other is the specific effect. 3. The effect of acupuncture is integrated, bidirectional, dynamic, not single, unidirectional, static, through regulating the whole body.

COMPARISON AND ANALYSIS ON THERAPEUTIC EFFECTS OF ELECTRIC ACUPUNCTURE ON LUMBAR INTERVERTEBRAL DISC PROTRUSION

Wang Sheng, Sun Zhongren, Han Jiankun, Jian-Mei Cui

TCM department of 255th hospital, Tangshan, China

Objective: To compare different effect of whole electric acupuncture、partial acupuncture traditional acupuncture on LIDP.

Methods: A total of 95 cases of LIDP were randomly divided into a treatment group, a control group on electric acupuncture and a control group on traditional acupuncture. They were compared and analysed on clinical effect, synthetical fraction about pain.

Results: The cured rate of every groups was different 81.3%、65.6%、58.1%. The treatment group of electric acupuncture was better than the control group ($P < 0.01$). The treatment group of electric acupuncture was better than the control group on the integral of symptom and medical examination ($P < 0.05, P < 0.01$)

Conclusion: electric acupuncture was better than traditional acupuncture on easing pain、improving symptom and medical examination, and the whole electric acupuncture was better than partial acupuncture.

Key words: LIDP/ acup-mox ther; electric acupuncture

THE RESULT OF LONG-LASTING ACUPUNCTURE IN MIGRAINE'S TREATMENT

Phuong lan Dang

Yamamoto institute

Using the suitable instrument and adequate technique we put a steril, synthetic, absorbable monofilament thread pieces into selected points along the traditional acupuncture channels of migraine patients. The embedded thread pieces then will stimulate the handled points continuously 2-3 weeks long until it is absorbed. This continuous acupuncture's stimulations are necessary and very effective in chronic diseases such like migraine. Moreover, the

method gives the possibility for patients to save time and expense! The thread-embedding is a special curing technique, further development of the traditional acupuncture. It is the combination of traditional and modern curing methods.

FIBROMIALGIA: COMPENDIUM OF DIFFERENT STUDIES OF DIAGNOSIS AND TREATMENT

Cristina Domingo Gómez

Escuela Universitaria de Enfermería, Hospital San Joan de Déu (Master de Medicina Tradicional China y Acupuntura)

The objective of this communication is to expose, in a coordinated way, several studies that define the tender-points and its correspondence with the acupuncture points, how these points are positive in the fibromyalgia patients and how are correlated with the clinical history and the energetic diagnosis, considering the effectiveness of the treatment of acupuncture with questionnaire Fibromyalgia Impact Questionnaire (FIQ-S) and analyzing articles published on Fibromyalgia in international journals. The compendium of all these studies, shows the results obtained in the investigation of the fibromyalgia, as much in the exploration as in the diagnosis and the treatment.

INFLUENCE OF A ACUPUNCTURE THERAPY ON INTRAOCULAR PRESSURE AND THE COMPLIANCE OF PATIENTS WITH OCULAR HYPERTENSION AND PRIMARY OPEN ANGLE GLAUCOMA

Henrik Ewert, Regina Schwanitz

Residence of Ophthalmology Ludwigslust, Germany

Background: The primary open angle glaucoma (the most common form of glaucoma) is a multi-factorial disease of the optic nerve marked by the loss of retinal ganglion cells following a classic pattern. The gradual process of this loss of ganglion cells eventually leads to the atrophy of the optic nerve. The clinical course usually consists of mild to moderately elevated intraocular pressure (IOP), although a significant number of patients may not have a measured IOP greater than the normal range.

Methods: We examined the effect of acupuncture therapy on eye pressure and the compliance with patients suffering from primary open angle glaucoma (n=21) and ocular hypertension (n=13) in contrast to a comparative group of test persons not suffering from any eye complaint (n=16). Before and after acupuncture treatment an ophthalmologic determination of visual acuity according to DIN 58220 and a computer-aided visual field analysis by Rodenstock-Peristat were done and before starting the therapy a measuring of corneal thickness by 4Optics-Pachymeter as well. The IOP was measured before acupuncture treatment, immediately after the treatment as well as 30 minutes after therapy. For documenting the changes in the compliance of the patients we evaluated a standardized questionnaire completed by each patient having undergone this treatment. Main Outcome Measures: Doing so we achieved the result that for patients with primary open angle glaucoma and ocular hypertension the acupuncture treatment is suitable to lower intraocular pressure in a significant way for the longer term. Despite the positive effect on lowering IOP in these groups you can not deny that acupuncture according to our researches neither had an influence on visual acuity nor on the results of visual field analysis in all three examined groups. Having evaluated the patients' questionnaires being answered after finishing the acupuncture treatment we are able to ascertain that the compliance with patients increased regarding the application of local anti-glaucomatous therapy. Moreover according to the analysis of the questionnaires a subjective improvement of life complacency in general was reached.

Conclusion: Therefore it can be said that acupuncture is an appropriate method which can be employed for treating patients with primary open angle glaucoma in addition to lowering eye pressure by anti-glaucomatous pharmacological therapy. Doing acupuncture with patients suffering from ocular hypertension can significantly lower IOP and is able to reduce the rate of converting into a manifest glaucoma. That is why this treatment is especially fitting for patients with ocular hypertension showing contra indications of local-antiglaucomatous medicine (e.g. beta-blocker), allergies to preservatives and aversion to pharmacological therapy. Undergoing this treatment it is absolutely necessary that patients are permanently examined with regard to visual field, retinal nerve fibre thickness and micro-morphological alterations of the disc in order to detect tissue damage of the optic nerve and functional loss caused by beginning glaucoma.

EXPERIENCE WITH PRACTICAL USE OF ELECTRIC STIMULATION OF ACUPUNCTURE NEEDLES IN TREATMENT OF VERTEBROGENIC COMPLAINTS

Ladislav Fildan

Pain Clinic, Brno, Czech Republic

The paper is not aimed to be a scientific treatise but to introduce personal experience with the use of electrical stimulation of acupuncture needles. The author has been engaged in acupuncture since 1987, especially in pain treatment, in particular in treatment of vertebrogenic complaints. The impulse to use electric stimulation of needles had been watching a video recording of operations with acupuncture hypalgesia taking use of electric stimulators of

acupuncture needles. Based on the recordings, the author deduced a presumption of stimulation of acupuncture needles giving the best anti-painful effect of acupuncture.

The paper refers to theoretical presumptions of hypalgetic effect of acupuncture, effects of different types of electric stimulation.

The method is most often practised in treatment of subacute and chronic painful states and disorders of functions (function disorders - gastrointestinal, respiratory, urogenital, hormonal, anosmia, ageusia), in paresis of extremities, posttherapeutic neuralgies. The difference in procedure in acute and chronic painful vertebrogenic states is mentioned.

The author uses following methods of treatment most often:

1. REBOX currents – electrotherapy in painful area
2. Auriculotherapy (aurikulomedicine)
3. Body acupuncture and associated techniques

Selection of points as to the acupuncture is further stated in the paper.

Conclusion: According to the experience of the author, electroacupuncture significantly amplifies the analgetic effect of acupuncture and is worth greater attention of acupuncturists.

Key words: Acupuncture, hypalgesia, electric stimulation of acupuncture needles

TREATMENT OF RETINITIS PIGMENTOSA BY ACUPUNCTURE

Osman Firatli
Firatli Clinic

Retinitis pigmentosa (RP) is an inherited retinal dystrophy caused by the loss of photoreceptors and characterized by retinal pigment deposits visible on fundus examination. Prevalence of non syndromic RP is approximately 1/3200. The most common form of RP is a rod-cone dystrophy, in which the first symptom is night blindness, followed by the progressive loss in the peripheral visual field in daylight, and eventually leading to blindness after several decades. Some extreme cases may have a rapid evolution over two decades or a slow progression that never leads to blindness. In some cases, the clinical presentation is a cone-rod dystrophy, in which the decrease in visual acuity predominates over the visual field loss. RP is usually nonsyndromic but there are so many syndromic forms, most frequent being Bardet-Biedl syndrome and Usher syndrome. The Bardet-Biedl syndrome is a genetic disorder characterized mainly by obesity, pigmentary retinopathy, polydactyly, mental retardation, hypogonadism, and renal failure in some cases. Usher syndrome is a condition characterized by hearing loss or deafness and progressive vision loss. The loss of vision is caused by an eye disease called retinitis pigmentosa (RP), which affects the layer of light-sensitive tissue at the back of the eye (the retina). Clinical diagnosis are based on the presence of night blindness and peripheral visual field defects, lesions in the fundus, hypovolted electroretinogram traces, and progressive worsening of these signs. Molecular diagnosis can be made for some genes, but are not usually performed due to the tremendous genetic heterogeneity of the disease. Genetic counseling is always advised. Currently, although there is no therapy that stops the evolution of the disease or restores the vision, we succeeded in curing a patient last year and we presented that case in ICMART 2007 Barcelona. But this year we managed to cure 10 patients, including Bardet-Biedl and Usher Syndrome. Nowadays, there are some speculations about stem cell and gene-based treatment but I believe that acupuncture therapy will be the real hope for gene diseases.

PRELIMINARY CLINICAL STUDY OF ENTIRELY NEW ZONES AND EXTENSION-ZONES OF EXISTING POINTS FOR THE TREATMENT OF REACTIONAL DEPRESSION, MAJOR DEPRESSION AND SEASONAL AFFECTIVE DISORDER

Jean Fossion, Gilbert Lambrechts, Vera Machtelinck
Scientific Commission BAMA/ Brussels

Elaboration: Tricyclic antidepressants have known anti-cholinergic side-effects and SSRI have limited results in major depression. We propose therefore to supplement treatment of reactional depression, major depression and seasonal affective disorder (seasonal depression) with ear-acupuncture. We propose a zone in the superior pre-tragal zone for the treatment of major depression and its medial extension for seasonal affective disorder. This zone coincides with the description of the projection of the Habenula, the Habenular commissure and the Epiphysis in the cartography of Bobigny. We propose an entirely new zone in the notch between the inferior concha and the posterior side of the tragus for the treatment of proactive interference (distraction, poor memory), reactional depression and obsessional thoughts. We propose the known point Omega in the ear-lobule, described in the cartography of Lyon, for the treatment of reactional depression and we propose its superior extension for major depression (learned helplessness and psychomotor retardation). Finally we propose an entirely new zone on the posterior side of the ear-lobule for resolution of proactive interference (poor decision making). Our observations will be presented to the school of auriculotherapy of the university of Nantes for further analysis.

SPLIT WORLD (PSYCHODYNAMIC VIEW OF TWO EMOTIONAL PATHOGENIC FACTORS IN TCM)

Szilard Hamvas
Rekreacio-Med.BT.

Summary: In our modern world the psychological distress is the most important pathogenetic factor. The author looks at the relationship between two well known emotional pathogenic factors (anger and anxiety) from the view of psychodynamic psychotherapy, analyses the process of developing integrated personality. He also considers the energetic relationship of the related Zang-Fu organs. He examines two imbalances where the management of Anger is imperfect resulting in disharmony: These are Hyperactive Liver Yang and Kidney Yang Deficiency, Hyperactive Liver Yang and Gallbladder Qi Deficiency. The first imbalance: Hyperactive Liver Yang and Kidney Yang Deficiency. Psychological background: If the libidinous force is weak, the fear of the overpowering destructive aggression may prevent one from expressing his anger. Also the fear of the punishment of the Super-Ego may hinder one expressing his negative feeling. The repressed anger manifests itself in somatic symptoms. In case of Hyperactive Liver Yang we may expect Kidney Yin deficiency, which may cause Liver Yin deficiency and result in Hyperactive Liver Yang. In case of the above mentioned undesirable psychological circumstances we rather see the combination of Hyperactive Liver Yang and Kidney Yang deficiency. The author tries to find "cybernetic" explanation of this phenomenon. The other imbalance: Hyperactive Liver Yang and Gallbladder Qi Deficiency. Psychological background: If someone self-esteem is very low he will not be able to make decision and will feel important to defend himself against any real or unreal rejection in an offensive way. Without an aggressive defense he would feel threatened by disintegration. The author believes the psychological context may help understand these Yin-Yang imbalances. In some cases the acupuncture treatment is enough to cure the imbalance but very often the combination with psychotherapy is necessary and unavoidable.

TREATMENT OF INTERFERENCE FIELDS IN PATIENTS WITH SUDDEN DEAFNESS AND FASCIAL PARALYSIS RESISTANT TO HYPERBARIC OXYGEN AND CHINESE ACUPUNCTURE

Ali Nogay Hasan
Problem Wound and Foot Health Hyperbaric Oxygen Therapy Center, Antalya, Turkey

Introduction: In cases of chronic disease and resistance to conventional therapy or acupuncture, the many disciplines of complementary-alternative- medicine but also modern medicine, have been paying special attention to the diagnosis and therapy of interference fields that maintain a disease. Unfortunately, many foci (chronic inflammation, scars, devitalized teeth) are still inaccessible to diagnosis by means of imaging procedures or laboratory tests. However, identification of the interference field is the key to treating any "störfeld".

In this presentation, I would like to share my experiences of finding out of the foci and to cure in patients with sudden hearing loss and fascial paralysis that resistant to hyperbaric oxygen therapy and acupuncture, respectively.

Methods: Two fascial paralysis and 2 hearing loss cases have initially been treated with 15 sessions of Hyperbaric Oxygen Therapy (HBO) as a modern therapy approach. In these patients HBO did not work at all and then acupuncture and neural therapy have been carried out. VAS has been used to find out the foci.

Results: By identification of foci in fascial paralysis cases, totally 6 acupuncture therapy and 2 procain injections to foci was applied. In patients with hearing loss, 4 procain injections to different foci and 14 sessions of acupuncture therapy was applied to reach cure.

Conclusion: In any patients who resistant to conventional and/or complementary medicine treatments, identification and treatment of interference field is the key for rational therapy approach.

CONTROLLED STUDY OF LONG-LASTING ACUPUNCTURE IN ANTICONVULSIVE TREATMENT (EPILEPSY IN CHILDHOOD)

Gabriella Hegyi
Yamamoto-Institute

We have chosen with neurologist 30 children suffering from epilepsy for longer time and due to pharmacological treatment they are mentally and physically depressed for unique form of acupuncture. Using the suitable instrument and adequate technique we put a sterile, synthetic, absorbable monofilament thread pieces into selected points along the traditional acupuncture channels of selected patients. The embedded thread pieces then will stimulate the foci continuously 3 weeks long until it is absorbed and treatment will be repeated again.

Conclusions: This type of the continuous acupuncture's stimulation is significantly effective in several chronic diseases such like epilepsy in childhood too..

Moreover, the method gives the possibility for patients to save time and expense, without side effects. Neurological control have found the treated patients more active, improving developing ability as mental as physical. The special complex therapy can involve this type of treatment applied from early childhood. As a result, the summa of medicines are able to be reduced due to this treatment to achieve higher vigility of small patients.

The thread- embedding is a special curing technique, further development of the traditional acupuncture. It is the combination of traditional and modern curing methods.

The treatment form is not too complicated to learn, needs special needle and monofilament which is absorbable, without reaction.

NEW DEVELOPMENT IN THE TREATMENT OF CANCEROUS PATIENTS BY ACUPUNCTURE: SYNTHESIS OF 25 RESEARCH YEARS

Philippe Jeannin
Paris, France

Summary: Cancer is the second cause of death in the world. In front of cancer, acupuncture can play an important role. In 1978, at the beginning of our researches, no publication existed except Pierre Dinouart's work, over the way to take care of these patients. Dr Regard's teaching, George Soulié de Morant's works and Dr Lebarbier's reading permitted us to elaborate therapeutic protocols to relieve pain caused by cancer, neutralize most of the side effects of chemotherapy and radiation, normalize the blood chemistry during chemotherapy, stimulate immunity and increase chance of healing.

Keywords: Acupuncture - overall take care of cancer patients - to increase the efficiency of treatments.

Introduction: Twenty five years ago, the global management of cancer patients was a completely new concept, and acupuncture was not included in the global package. Over years of medical practice, I have discovered that acupuncture has a role to play on five levels:

1. It relieves cancer-induced pain.
2. It neutralizes most side effects of chemotherapy and radiotherapy.
3. It helps to restore the results of biological tests carried out during chemotherapy sessions to acceptable levels.
4. It optimizes treatment efficiency, thereby increasing the chances of recovery.
5. It improves the patient's immunity.

This last point, cellular immunity, is the focal point of my research. Indeed, the acupuncturist may play a major role in the treatment of cancer patients, without in any way replacing – and this is a vital concept – current therapies (chemotherapy, radiotherapy and surgery). Before going into the five points above in detail, let me describe briefly my approach to oncology. Since my early days in medical practice in 1978, I have been in contact with oncologists who have referred to me patients particularly distressed by their treatment. Initially, I was requested to help them to relax and to re-establish an emotional balance, no more. From the outset, it became evident that account would have to be taken of the expected side effects of the aggressive treatments which the patients were going to undergo. In order to do this, it was necessary to know what molecules were going to be administered and their mode of action. There were few publications on the global management of this type of patient. A new look at the works of George Soulié de Morant and of Dr. Lebarbier enabled me to find some answers to the questions raised. Our therapeutic approach with the first patients referred was very "timid", far from imagining the therapeutic potential of what we had at our finger tips. The liver and intestines were going to be put to the test seriously in chemotherapy, so, to re-establish emotional balance, using: He 5, He 7, SJ 10, Du 20, we needed: Lv 2, Lv 3, P 6. using the anti-toxic function on these points.

At the time, we were not aware of the fact that we could have any impact on biological parameters. Immediately we were able to identify the effect on nausea and vomiting.

Story of my first cancer patient :

In February 1987, Frédéric, 18 years old, came to my surgery to consult for an osteosarcoma on the tibia. This patient is the starting point of the research which I am going to present to you today.

Before this first consultation, Frédéric had undergone a first course of chemotherapy. From the outset he had difficulties in tolerating this treatment with the appearance of all the feared side effects: diarrhoea, nausea, vomiting, canker sores, disturbed taste, fatigue, gastro-intestinal pains, etc. At that consultation we decided to apply our knowledge of acupuncture to help the patient tolerate better his chemotherapy. The choice of points was a combination of the teachings of Dr. Pierre Regard and a re-examination of the writings of George Soulié de Morant. This was the first time that we addressed a patient and his illness, cancer, as a whole.

Three acupuncture sessions were carried out, at five day intervals, before the second course of chemotherapy Lv 2, Lv 3, GB 34, P 6; He 5, He 7; Ren 24, 12 and 14, LI 4, Lu 7 were needed. A further session was administered a few hours after the end of the new course of chemotherapy. The protocol was adapted to take account of the patient's pulse and depending on whether or not any of the side effects disappeared. It became apparent very quickly just how important it was to organise the acupuncture sessions in the context of the chemotherapy sessions in order to prevent the appearance of side effects.

Thus we noted a considerable lessening in all side effects, except for hair loss: nausea, vomiting, canker sores, diarrhoea, fatigue, headaches, mood swings and disturbed sleep pattern. Before his third course of chemotherapy and following his seventh acupuncture session, we noted with some surprise an improvement in his liver profile: which registered normal results. We also noted that his white cells count had returned to normal. It appears that Lu 7 plays a major role in immunity. Following this first biological test, we became aware of the therapeutic significance of this result.

If this were to be confirmed, and it has been, the chemotherapy courses could be organised at set dates, thereby optimising effectiveness of the treatment. The patient underwent four chemotherapy cycles with two weeks in between each cycle, without any problems. He was the first in a long series of patients.

Let me say a few words now on L 7 which, to my way of thinking, is a very important point. When I was reading the treatise on acupuncture by Dr. LEBARBIER where he said, and I quote him: "Lung 7 acts on depressed and tired subjects, who no longer have any natural spontaneous defences." It occurred to me to use this on patients undergoing chemotherapy. When I needled this point, I indeed noted the non-collapse of leukocytes and of the leukocyte count. On the other hand, in the case of patients on whom I did not needle this point, their leukocyte count was very low; subsequent chemotherapy sessions could not take place at the dates planned. I consequently increased the number of experiments, with and without this point, and was surprised myself at the differing results. For twenty one years now, I have been using it systematically in my protocols with very encouraging results. This is why I should like scientific studies to be carried out to verify its action on immunity to cellular response, as I am entirely convinced that we can act at this level.

The Patients: Number:

892 patients have been treated to date.

-72% female patients.

-28% male patients.

Pathologies:

Female patients:

– Breast: 35%

– Lung: 9%

– Liver: 4%

– Gastro-intestinal: 17%

– Lymphoma: 2%

– Recurrence of cancer, metastasis: 33%

Male patients

– Prostate: 12%

– Lung: 15%

– Testicles: 18%

– Liver: 5%

– Osteosarcoma: 7%

– Gastro-intestinal: 14%

– Recurrence of cancer, metastasis: 29%

Procedure: Choice of needles:

I have always used bimetallic disposable needles.

Number and frequency of acupuncture sessions: Experience has shown that it is very important to organise the acupuncture sessions in accordance with the chemotherapy sessions. It is sufficient to observe what happens if the sessions are stopped for whatever reason - vacation, travel - in order to form an opinion. More than ninety per cent of cancer patients are referred to me because they have problems of intolerance of their chemotherapy. In many cases, these patients come to see me in an emergency consultation and I administer three acupuncture sessions before the next course of chemotherapy to manage side effects which are

– Immediate

– Delayed

And of course to boost their immunity system again;

Then I practise a session: One or two days before the chemotherapy session and see the patient again immediately after the perfusion. And then again four or five days later for the same purpose. One acupuncture session a week is organised between chemotherapy courses.

During radiotherapy treatment: I administer one weekly acupuncture session to neutralize:

– very intense fatigue.

– loco-regional burning caused by the treatment.

I administer a fortnightly session during the six months following the treatment.

This is required to:

– Stimulate and maintain immunity

– Prevent the accumulation of chemotherapeutic substances in the body

– Verify the correct balance of the neuro-vegetative axis

Indeed, we frequently see the incidence of more or less severe nervous depressions despite the fact that all clinical examinations and tests are positive.

Let us now look at the three types of problems which we are called upon to treat in patients, namely:

1. treating pain caused by cancer

2. the side effects of chemotherapy
3. the side effects of radiotherapy

1- Pains due to cancer:

Tumoral process itself
 Infiltration of soft tissues, causing digestive pain
 Invasion of the bones causing, for example, vertebral pains
 Invasion of nerves

2- Side effects of chemotherapy are:

Of two types: clinical and biochemical.

- Nausea, vomiting
- Fatigue, exhaustion
- Diarrhoea or constipation,
- Gastritis, oesophogitis, colitis,
- Eating disorders, weight loss
- Disturbed taste, canker sores, mucitis, , dryness of the mouth,
- Dry eyes syndrome
- Headaches
- Hot flashes
- Hair loss
- Mood swings, depression
- Sleeping disorders with or without nightmares
- Pain and stiffness in the joints
- Neuropathic pain
- Sign of cardiac, pulmonary, hepatic or neurological toxicity

Biological disorders:

- Disturbed hepatic function analysis
- Anaemia; leukopenia.
- Thrombopenia.

3- Side effects of radiotherapy:

cystitis, diarrhoea and mucus discharge.

On the cardiac level:

On the pulmonary level

On the digestive level

On the pelvic level:

On cerebral level

On the skin level:

It depends on the type of cancer treated. During radiotherapy for breast cancer, here is how I proceed: Burns resulting from radiation for breast cancer are neutralised using the following points

- one needle every three centimeters round the radiated zone, the result is spectacular:
- there is practically no reddening of the skin and no sensation of burning.

First results:

The results are the award of our work...

On the clinical symptoms

- Nausea and vomiting neutralised in ninety per cent of patients.

With the agreement of the oncologist and at the patient's request, cessation adjuvant medication

- Diarrhoea or constipation, gastro-intestinal pains are controlled in ninety five per cent of patients, here again with cessation of adjuvant medication

- Canker sores are relieved in ninety eight per cent of cases by needling Ren Ma24+++

- Taste and flavour are preserved, thereby restoring the patient's appetite.

- Dry mouth and dry eyes are neutralised.

- fatigue, lassitude.

- Disturbed sleep patterns (with or without nightmares).

- Mood swings (with or without depression) are well controlled in seventy five percent of patients.

- More relaxed attitude to the illness.

- Renewed vigor, positive desires (food, physical) are restored

- Thermoregulatory disorders, headaches are controlled.

- Impatience , cramps, pains and stiff joints are controlled in seventy percent of patients

Hair loss is now controlled, eradicated, by needling Du Mai 20 and antitoxic points which I mentioned earlier. I stop hair loss and stimulate new hair growth from the tenth acupuncture session onwards. Hair loss is avoided if we can administer two or three acupuncture sessions before the very first drop of chemotherapy. In that case I avoid the wig at the end of the treatment, which is VERY important for the patient psychology

On the biological level:

We carry out blood tests: at the end of each course of chemotherapy and one week and again two weeks afterwards. Control of markers and more detailed tests were done at the request of oncologists

These tests are carried out repeatedly to: monitor the tolerance level of the treatment and its efficiency.

They also enable the role of acupuncture to be identified:

– 1- in restoring the various hepatic test back to normal levels, in other words, tolerance of chemotherapy on the liver-gall bladder axis

– 2- on immunity: the leukocyte count is maintained to the normal in sixty five percent of patients, thereby ensuring that the chemotherapy sessions can take place at the dates foreseen, which optimizes the chances of complete cure.

Conclusion:

Main interest in acupuncture is that it restores the quality of life of

these patients such as, for example:

- sharing family meals
- working
- going out with friends, on the other hands: social aspects
- living a normal active life
- not feeling isolated.

All this is important to create a positive dynamism which will help the patient towards remission and possibly even complete cure. Acupuncture has thus played a vital role in the satisfactory organisation of chemotherapy and/or radiotherapy, and in neutralising side effects of these treatment as well as on immunity

This latter action on immunity-stimulation, will be confirmed by further scientific study, for validation.

The long term goal is to increase therapeutic efficiency by:

Optimizing acupuncture protocols, both through the choice of points and frequency of sessions. As by improving chemotherapy protocols

References

- 1 Xu Y.F. La Médecine Traditionnelle Chinoise et le Cancer. Méolans-Revel: Ed. DésIris; 2001.
- 2 Darras J.C. Traité d'Acupuncture Médicale. Paris: Ed. Darras; 1988.
- 3 Dinouart-Jatteau P. Apport de l'Acupuncture au Malade Cancéreux. Paris: Editions Techniques. Encycl. Méd. Nat; 1991.
- 4 Soulié de Morant G. L'Acupuncture Chinoise. Paris: Ed. Maloine; 1972.
- 5 Lebarbier A. L'Acupuncture Pratique. Sainte-Ruffine: Ed. Maisonneuve; 1983.

LONG-TERM EFFECT OF ACUPUNCTURE FOR PATIENTS WITH GLAUCOMA

Soichiro Kaneko

Center for Asian Traditional Medicine, Tohoku University Graduate School of Medicine

Context: Research of the effects of one acupuncture method for patients with glaucoma, focusing on intraocular pressure (IOP).

Objective: To explore the long-term effects of using acupuncture for patients with glaucoma.

Design: Pilot study utilizing a one-group preintervention, postintervention design.

Setting: Six patients with glaucoma were recruited through advertisement at the clinic for glaucoma. Intervention: Acupuncture was carried out at an average rate of three times a month over 15 month.

Outcome Measures: IOP were observed at 15 minutes before or untreated day in one, three, six, nine, twelve and fifteen month.

Results: IOP was significantly improved at one, three, six, nine, twelve and fifteen month compare with baseline ($p < 0.01$).

Conclusions: Although these results should be interpreted cautiously, acupuncture can be used to supplement the conventional therapy for glaucoma.

Key words: Acupuncture, glaucoma, intraocular pressure.

HOMEOMOXIA SPECIAL MOXIBUSTIO

Aranka Terézia Kellerman

Light Alternation Medical Center

A therapy discovered by the author (Homeomoxia:homeo=homeopathy, moxa=moxibustio word construction). It is a combination of Eastern and Western natural therapy. The homeomoxia is suitable for curing patients who have respiratory allergy. The presentation shows the theory of the method (energy+information), the practical finish (the specific substances in accordance with the homeopathy that causes allergy+ burning of a moxacone on the required acupuncture points), and the results (the reduction of the symptoms to a certain degree). In this study, the number of the patients is 30. The scholarship of the Soros Foundation had made possible the research study.

ACUPUNCTURE IN PALLIATIVE CARE

Khatuna V. Urushadze, Mzia S. Kandelaki

The Georgian Association of Acupuncturists

We have studied physiological mechanisms of acupuncture (AP) on 650 patients. The results of statistical analyses have confirmed efficiency of AP in several sicknesses. According to own fact, positive clinical effects were accompanied by immunoglobulins of A and G classes in serum, by regulation of chromaffin and cholinergic systems by normalization of gastric secretory deficiency without pharmacotherapy by improvement of functional indexes of broncho-pulmonic system in cases of obstruction of respiratory system/ Clinical observed results demonstrated, that the pain syndrome besides of etiological factors have submitted to AP, whereby we have used AP in palliative care, in 120 patients with cancer and founded, that the pain tolerance threshold was increased and reduced total doses of narcotics considerably in 55%, because of the decreasing of the pain syndrome the patients were taking part in their treatment in 95%, whereby improved their physical, mental and spiritual status, which are the aims of palliative care.

SIMULTANEOUS USE OF INVASIVE ACUPUNCTURE AND "ACUPUNCTURE LIKE" ELECTRICAL STIMULATION AND "TENS-LIKE" ELECTRICAL STIMULATION

Sebastian Kielstein

SRH Wald-Klinikum, Gera, Germany

Presentation of clinical experience in the use of "acupuncture like" electrical stimulation and "tens-like" electrical stimulation of selected clinical cases

Presentation of the methodology and technical implementation.

Extension of the application spectrum for multichannel needle stimulators.

Benefits of this combination.

GOLD IMPLANTATION

Hans Kjerkegaard

Gold-implant-clinic

Introduction: Since the 1970's veterinarians have treated dogs and horses for different painful joint problems with gold implantation with excellent results. Inspired by these results Dr. Hans Kjerkegaard started treating degenerated joint conditions with this acupuncture related method in 1996. Since then he has treated several thousand patients successfully with this treatment method.

Objective: Dr. Hans Kjerkegaard and colleagues have performed a double blinded placebo controlled study on the effect of gold implantation in patients suffering from cervical spondylosis. The result was excellent in favour of the gold group. In this paper the effect of gold implantation in different conditions in the lumbar region and the big extremity joints is presented.

Methodology: To achieve good long-lasting results, the importance of the principals in segmental acupuncture, especially the use of the secondary segments is emphasized, when treating with gold implantation.

Results: Depending of the condition treated gold-implantation has a positive effect in 70 - 80 % of the patients.

Conclusions: As the method of gold-implantation has a high and long-lasting positive effect in chronic degenerative joint conditions, this method should be a lot more widespread.

ACUPUNCTURE RESEARCH IN GENERAL PRACTICE

David R.K. Lee

The Australian Medical Acupuncture College

Research in Acupuncture has commenced many years ago looking into "why and how" acupuncture works. The recent emphasis on "Evidence Based Medicine" in medical school teachings further high-lighted the importance of the validity of acupuncture as having a place in western medical practices. As one of the rank and file family practitioners it is important for us to appreciate not only "why and how" acupuncture works but "how well" does acupuncture works in our day to day practice. Members of the Australian Medical Acupuncture College have endeavoured to conduct a multicentred prospective case series to assess the role of acupuncture in the management of shoulder pain. This is a discussion paper on the shift of research emphasis and on the role that general practitioners may have in clinical studies.

PATHOGENESIS ANALYSIS AND TREATMENT FOR THE POST-STROKE DEPRESSION

Ji-An Li, Shufeng Zhang

TCM Department of North China Coal Medical University

Post-stroke depression, is a outstanding psychosomatic disorder. The pathologic mechanism of PSD is qi stagnated, which leads by phlegm, blood stasis, deficiency of qi and the qi stagnated can make worse of phlegm, blood stasis, deficiency of qi, that run through the whole course of the disease. In treatment, Traditional Chinese medicine therapy is effective aiming at the different pattern of the disease based on syndrome differentiation in accordance with its pathogenesis. To PSD, the integration of traditional and western medicine therapy can improve curative effect and reduce the bad reaction of Western medicine effectively. And the acupuncture and moxibustion treatment have been paid more attention to by some scholars in recent years, for the convenient operation, positive therapeutic effect, no bad reaction.

Key words: post-stroke depression, PSD pathogenesis analysis treatment

ACUPUNCTURE FOR MIGRAINE: TWO N-OF-1 TRIALS

Shih Min Li, Filipe de Oliveira, Eduardo Marten Teixeira, Ricardo Horta Goncalves, Luiz Paulo de Queiroz
Hospital Universitário, Universidade Federal de Santa Catarina AND Hospital Regional de São José

Background: Acupuncture may be used in the treatment of migraine, one of the most common recurrent headache disorders observed in clinical practice. Considering the complexity of acupuncture, an N-of-1, controlled without placebo trial is more adequate to support the multi-factorial aspects of the acupuncture intervention in migraine patients.

Objective: To evaluate the acupuncture effect in migraine patients, by using the N-of-1 trial. Method: From June 25th to September 28th 2007, using the International Headache Society Clinical Trials Subcommittee Guidelines, we included 2 of 679 patients from the neurology outpatient clinic of the University Hospital. One was randomized into a control arm and one into the N-of-1 arm. After 4 weeks of baseline, the N-of-1 arm patient was submitted to 3 pairs of acupuncture treatment (6 sessions in 4 weeks) followed by observation (4 weeks), resulting in a 28 week trial. The control arm patient, after 6 months of observation, was placed in the N-of-1 arm. We used a clinical score composed by the migraine attacks' frequency, intensity, disability and medication use to evaluate outcome. The clinical score outcome was predicted by simple linear regression.

Results: The control patient remained with a steady horizontal linear trend during the observation, while the acupuncture patients had a decreasing linear trend to show a positive response to Acupuncture.

Conclusions: Acupuncture improves the clinical status of migraine patients. The N-of-1 may be a feasible and interesting acupuncture trial methodology.

NEW METHODS IN TRAUMATOLOGY AND THEIR APPLICATION IN COMPLEX THERAPY OF BURN TRAUMA – METHOD "LOSKOT"

Anna Loskotova, Jitka Loskotova

Masaryk University, Brno, Czech Republic

Introduction: Burn trauma and polytrauma and their impact on organism represent an extensive problem - both medical, psycho-social and economic. This *pilot study* represents a possible solution.

Aim of the study: To prove the necessity of timely application of *acupuncture (ACU)* and *myofascial- manual lymphatic drainage (MMLD)* as complementary methods in treatment of burn trauma and polytrauma, which are very effective.

Set of patients: The authors have followed 234 patients with burn trauma, in the period of 25 years.

Methodology:

- 1) *Acupuncture* - timely obligatory application of a needle to the L7 point bilaterally. In case of local necrosis of the area of the point L7 we use LI 11 point bilaterally for the burn trauma and in some cases also psycho-analgesic Gv 19, 20, CX 6, LI 4.

(ACU is the most important intervention in the information networks).

- 2) Standard treatment of burn trauma and polytrauma.

- 3) *Myofascial-manual lymphatic drainage* improves the transportation of deponating and circulating immunocomplexes and spasms relaxation.

Results: 234 patients with burn trauma (99 %) healed within 4 weeks, with reduction of the burn shock, analgesics, tranquilizers and antibiotics; without any scarring and necessity of rehabilitation. The infection does not develop and immunodeficiency induced by cytokines does not occur.

Timely application of the first ACU is substantial - the earlier the application (up to 30 minutes) the faster and better the healing result; it triggers the recursion of all the initiated pathological processes.

Conclusions for practice: ACU is appropriate as the first aid treatment for burn trauma and subsequent therapy. It is appropriate to complement ACU with MMLD to achieve faster healing and better results.

Organism has an enormous ability of reparation. It is evident especially in traumatology in case of hurts – burn traumas, fractures etc. We can achieve the *reparation* by timely and adequate therapeutical intervention as acupuncture and manual lymphatic drainage in combination with myoskeletal medicine techniques. *Their application significantly limits duration of the treatment and in many cases contribute to absolute recovery according to gravity of trauma.*

Key words: Burn trauma, Acupuncture, Myofascial-manual lymphatic drainage

SYNERGISM OF ACUPUNCTURE AND MYOFASCIAL-MANUAL LYMPHATIC DRAINAGE AND THEIR EFFECT ON THE IMMUNE SYSTEM

Anna Loskotova, David Pondelicek, Jitka Loskotova
Masaryk University, Brno, Czech Republic

Introduction: In recent years, the number of patients with deficient function of the immune system rises progressively. A large quantity of these patients is secondary treated for next reasons: functional failures in locomotory system and fibromyalgic syndrom. Objectively we notice functional blockades of vertebrae and ribs, spasms of muscles, painfull trigger-points and active acupuncture points. In most cases we also remark dysfunction in the area of lymphatic system.

Aim of the study: The purpose of this work is to demonstrate that Synergisme of Acupuncture (ACU) and Myofascial-manual lymphatic drainage (MMLD) can positively influence the immune system. The authors are hereby attempting to prove the objective capacity of this effect, even in laboratory conditions.

Methodology: Patients with documented immunodeficiency were subjected to the laboratory procedures, particularly after application of these methods: 1)ACU as monotherapy 2)MMLD as monotherapy - improves the transportation of deponating and circulating immunocomplexes and spasms relaxation 3)ACU plus MMLD And 4)ACU plus Antioxidants 5)ACU plus SIAB - Special Individual Autobiotherapy which involved the use of autovaccines containing cytokinetic fragment 6) ACU plus MMLD plus SIAB

Examination: During our laboratory tests, we focused primarily on so-called "cellular immunity", concretely on cellular alterations observed in individual subpopulations of T- lymphocytes, i.e., the most fundamentally relevant immunocompetent cells. Furthermore we also followed disorders involving "humoral immunity", i.e., immunoglobulines, complementes, circulating immunocomplexes etc. We followed the changes for 4 and 8 weeks from the commencement of therapy.

Set of patients: The authors have followed 108 patients with fibromyalgic and immunodeficiency syndrome.

Conclusion: The immunostimulating effect of ACU as monotherapy has been unquestionably proved. Based on laboratory measurements, the authors recommend to use more ACU in combination with MMLD and SIAB in therapy of immunodeficiency. Combination of these techniques facilitates the treatment in medical and economical way and accelerates the attainment of immunonormalization.

Key words: immune system, acupuncture, myofascial-manual lymphatic drainage, cellular immunity

NEW MODERN TRENDS & DEVICES FOR INFORMATIONAL STIMULATION AND RESEARCH OF ACUPUNCTURE MERIDIANS & POINTS

Iosif Mezei, Iosif-Dan Mezei
Medical Center Tongtian, Romania

The basic concept of acupuncture is *informational exchange* between the living organism and its environment.

This informational communication takes place via *structural factors* (connective tissue, fundamental matrix, proprioceptive system) and *functional factors* (psycho-neuro-endocrin & metabolic).

Fundamental physicochemical phenomena underlying to the informational exchange are of following nature:

- mechanical and chemical
- piezoelectric and electric field
- antenna phenomenon – reactive opening/closing(I.F.Dumitrescu,D Constantin)
- acoustic phenomenon
- magnetic field
- electromagnetic field
- bioresonance

Aim of our lecture is to do an analytical presentation of the new modern methods derived from TCM, which are based upon the therapeutical use of one or more of the fundamental phenomena of *informational exchange*.

These are new trends and therapeutic modalities in agreement with the requirements of contemporary medicine:

- nontraumatic/noninvasive or mini-invasive, pain free methods
- without risc of infectious disease transmission (HIV, Hep.C)
- quick effectiveness
- efficacy similar or better than the traditional methods scientific fundamentation

The material and method of the paper consists of new modalities of informational stimulation of meridians & acupoints, based upon biochemical informational stimulation, physiological piezoelectric stimulation, acoustical, modulated coherent electromagnetical field stimulation, holopathy, bioresonance and the presentation of their characteristics, new way of action, their clinical use, efficiency and their designation for double-blind research studies.

MIA – A NEW CONCEPT OF ACUPUNCTURE

Henriette Muraközy

Rheumaklinik Dr. Lauen

MIA: Minimal Invasive Acupuncture. Is a new concept of Acupuncture, where we use specially thin needles to handle classical/standard points in our praxis, especially of the musculo-skeletal meridians to manage rheumatologic disorders! In a prospective study we could show that MIA is as successful as the classical acupunctural method but much less painful! In this way, the compliance of the patients is better!

Method: Prospective study on 2000 patients in 2 years in Germany!

Diagnoses: Rheumatoide Arthritis, Seronegative spondulatitis, Psoriasislitis, Fibromyalgie syndrome, SLE, Vasculitis.

INSOMNIA: ASSIDENT SYMPTOM AND SIDE EFFECTS

Johannes Nepp

Medical University Vienna

Purpose: In Traditional Chinese Medicine TCM Insomnia is a symptom included in these syndromes: 1) Deficiency of spleen and blood Xue. 2) Deficiency of Yin of Heart and kidney. 3) Uprising liver fire. 4) Retention of heat of mucus because of stomach dysfunction. In literature many points were described for special effects on insomnia, like Ear Point Jerome, or Kd6 and GB 41. We observed patients with insomnia as side symptoms of ophthalmologic problems and the acupuncture treatment on special points.

Methods: Patients selected for acupuncture treatment at the eye clinic of the medical University Vienna were observed. The anamnesis included the question if there are complaints of sleeplessness. Insomnia was treated as a side symptom according to the syndromes compared to treatment on special points. The complaints of sleep and those of the eye were estimated by the patients in the visual analogue scale(VAS). We compared the changes of VAS before and after acupuncture treatment and we tried to find correlations to changes of the ophthalmic problems. Ophthalmic evaluations consist of slit lamp observations, Schirmers test for dry eyes, visual acuity for AMD and Goldmann applanation tension for chronic glaucoma. Each test was performed before and after acupuncture treatment. Acupuncture was done with soft laser (5mW) once a week for ten weeks according to the high quality standards.

Statistics: Students t-test was used to compare the changes of both groups after acupuncture Pearson Correlation was used to find the dependency of ophthalmic changes from subjective changes.

Results: 24 patients were observed, Mean VAS improved from 7.8 to 4.4 in treatment according to the TCM and from 8.2 to 4.5 in treatment with special points. The T-Test was not significant between both groups. The correlation of subjective changes and changes of the ophthalmic complaints was positive significant ($p < 0.05$).

Conclusion: There was an improvement of sleep disorders after acupuncture. But there was no difference between both treatment-methods. The positive correlation showed an objective effect of acupuncture. Insomnia is an important problem which may increase any complaints. This study could show the effect of Acupuncture on insomnia as a mean problem of the ophthalmic complaints.

LASER-NEEDLE ACUPUNCTURE AND INTRAVENOUS LASER THERAPY IN CLINICAL APPLICATION: NEW RESULTS AND TREATMENT OPTIONS

Armin Orthaber

Lauenförde, Germany

Acupuncture therapy employing laser-needles was introduced for the first time in 2001. It is a pain-free procedure using non-piercing multiple laser-needles with a variable controlled high power laser energy output onto the skin. This technique emulates Traditional Chinese Medicine as the laser-needle channel is adjustable and individualized for frequency and output power. This innovated system was proven in clinical studies to be, at a minimum, equivalent to traditional needling. This claim will be substantiated by the presentation of data from 25.000 treatments analysed from 2003 to 2008: the majority of cases dealing with common orthopaedic and neurological pathology such as joint, spinal column, trigeminal nerve, headache and other related clinical challenges. The data also demonstrated that laser-needle therapy lead to a high percentage of long-term palliation.

Technological advancement of laser therapy will be discussed. This will include the use of multichannel electronic variability of wavelength and power output intensities necessary for optimum clinical results. Recently new lasers of green and blue wave lengths were developed and integrated into this system. These lasers amplify clinical benefits. For example, in combination with monomolecular hyaluronic acid, these lasers may be used for skin regeneration and wrinkle therapy without intra-dermal injection. Especially the new blue laser can also be used widely in dermatology and photodynamic therapy of actinic keratosis in combination with aminolevulinic acid.

Another exciting area of clinical interest in Europe is intravenous laser therapy. This will be presented and appropriate clinical data.

The new laser-needle method (pain free and without side effects), which emulates the traditional rules of acupuncture science may develop into an important method in the future. It may even replace the traditional metal needle.

MERIDIAN TREATMENT BY USING BRT

Anna Pfeiferroth, Gábor Lednyiczky, Olga Zhalko-Tytarenko, Gábor Csiki

Hippocampus Institute, Budapest

Bioresonance therapy (BRT) is known to be particularly efficacious in the restoration and enhancement of the self-healing mechanisms of the organism resulting in an improvement of the inner balance impaired with a pathological process. On the other hand, balancing effect of meridian treatment is also well known. Thus, meridian treatment by using BRT methods may be a powerful tool for the restoration of impaired and/or blocked pathways of energy and information transfer within the body aimed at the systemic treatment of the organism. Examples of meridian treatment by using BRT are presented and analyzed. BRT treatment of the target meridian makes it possible to re-energize and re-harmonize organ systems of the body and to renovate the balanced functioning of the same. Selection of meridians to be treated can be made on the basis of EAV testing and application of the Five Element Theory approach.

ACCUPUNCTURAL TREATMENT OF FBSS: REVIEW OF LITERATURE AND PERSONAL EXPERIENCE

R. Rinaldi, O. Sponzilli, T. Brenner, S. Meloncelli

University of Rome

The FBSS "Failed Back Surgery Syndrome", or syndrome failed spine surgery, appears as an increasingly frequent occurrence and, above all, disabling. Latest figures of literature (1) indicate a frequency of occurrence of the disease amounted to 38.8% of subjects who have undergone speech to the spine. This percentage is even more significant in the work presented by Slipman (2) which analyzing the etiology of this syndrome attaches to surgery because a percentage of occurrence of the syndrome equal to 55.6% of cases. The therapeutic strategies proposed by the literature on the other hand are very numerous but among all does not seem possible to establish an elective. Recent work presented focus mainly on the use of mini-invasive methods (3), some of limitatà effectiveness as the intra-disc treatment of low back pain mechanical, which also characterizes the symptoms of FBSS, others of moderate effectiveness as Spinal stimulation, the positioning of pumps intratecali, percutaneous lysis of adhesions. The method proposed by us and practiced in our center provides a type associated agopunturale whether of a type pharmacological. Our case is composed of 15 patients who went to meeting spine surgery and who then developed a syndrome FBSS. These patients were divided into 2 groups A / B treated respectively (A = 5 patients) with the sole acupuncture therapy more infiltrativa areas hyper-algesiche with local anesthetics and (B = 10) with the combination of acupuncture / therapy infiltrativi more administration pharmacology therapy consisting of Clomipramine hydrochloride 75 mg / 2 times a day. How evaluation scale was used SEA and was compared in two groups at the beginning of therapy (T0) and then at a distance of 15 days, 1 and 3 months (T1-T2-T3). The average duration of

each course of therapy was equal to 15 seats bisettimani and has not been detected significant differences in the 2 groups taken into consideration with regard to the duration of the cycle of therapy. These results indicate that the group B, namely that the Treaty associating therapy pharmacology to a non-conventional approach has experienced a greater pain relief compared to group A. The figure for SEA is increased from 6.9 (T0) to 5.5 (T1), 4.2 (T2) to the final value of 3.6 (T3). As regards Group B instead the result of therapy was not significant with the values of VAS registered T0 equal to 7.0, 6.5 = T1, T2 and T3 = 6.0 = 5.8. These results clearly indicate that the combination therapy acupuncture and drug therapy is certainly a valid approach to a disease difficult to manage as the FBSS. The only treatment with acupuncture has proved ineffective (placebo?). 1) Failed back surgery syndrome: casuistic and etiology, Rodrigues FF, Dozza DC, de Oliveira CR, de Castro RG. *Arq Neuropsiquiatr.* 2006 Sep 64 (3B) :757-61 2) Etiologies of failed back surgery syndrome, Slipman CW et al. *Pain Med* 2002 Sep 3 (3) :200-14 discussion 214-7 3) Minimally invasive procedures for the treatment of failed back surgery syndrome. Mavrocordatos P, et al. *Adv Tech Stand Neurosurg.* 2006 31:221-52

TREATMENT OF AURICULAR ACUPUNCTURE FOR THE RELATED DISEASES WITH VAGUS NERVE

Pei-Jing Rong, Bing Zhu

Institute of Acu-Moxibustion, China Academy of Chinese Medical Sciences

Background: According to the theory of Chinese medicine, the ear has a close interrelation with the internal organs via meridian-collateral system. Clinical practice has shown that acupuncture of otopoints can effectively treat multiple types of disorders in the human body. Electrical stimulation of acoustic duct and auricle might induce cough or vomiting, i.e., symptoms of parasympathetic nerve-excitation. Anatomical study revealed that a heterogeneous distribution of two cranial branchial nerves and two somatic cervical nerves was found in the auricle region. At the lateral as well as the medial surface the great auricular nerve prevails. But up to now the underlying mechanism of acupuncture of auricular concha in the treatment of hypertension, diabetes mellitus and epilepsy remains unknown.

Objectives: To explore the underlying mechanism of acupuncture of auricular concha in the treatment of hypertension, diabetes mellitus and epilepsy.

Methods: 1) Hypertension: Seventy-one male SD rats anesthetized with 10% urethane (1.0g/kg) were used for observing the effect of acupuncture on blood pressure. Hypertension model was established by intravenous injection of noradrenaline (NA, 0.09mg/kg). Glass micropipettes were used to record extracellular discharges of neurons of nucleus of solitary tract (NTS, A -11.3- -14.3L 0-2.3 mmH 4.0-7.0 mm), simultaneously, cervico-arterial blood pressure was observed. Auricular concha and Neiguan (PC6) were respectively stimulated with filiform needles for 30 sec. 2) Diabetes mellitus (DM): Fifty-one SD rats anesthetized with 10% urethane (1.0g/kg) were used to establish DM model by i.p. of 15% glucose (0.25ml/min). EA (2mA, pulse duration of 0.5ms) was applied to auricular concha region and Zusanli (ST36) for 30 s. Discharges of NTS neurons were recorded, blood sugar and insulin contents were assayed. 3) Epilepsy: Sixty-seven male SD rats anesthetized with 10% urethane (1.0g/kg) were used to establish epilepsy model by intraperitoneal injection of pentylenetetrazol (PTZ, 6mg/100g). Bipolar silver electrodes were recorded cerebral (A: ± 1.0 mm \bar{O} : 1.0 mm) epidural electroencephalogram (EEG), and glass micropipettes were used to record extracellular electrical activities of NTS at the same time. Electroacupuncture (EA, 1mA, 20Hz, pulse duration 500 \bar{O} /4s) was applied to the left auricular concha region for 30 s.

Results: 1. Lowering blood pressure: Following acupuncture of homonymy auricular concha area, blood pressure was decreased by 11.89 ± 1.11 U'8P < 0.001 while acupuncture of the contralateral auricular concha, BP decreased by 10.00 ± 1.35 U'8P < 0.001. After acupuncture of PC6, BP decreased by 1.89 ± 1.09 U'8P > 0.05. The effect of acupuncture of auricular concha was considerably superior to that of PC6 in lowering BP (P < 0.05). After acupuncture, the firing rates of 222 of 363 NTS neurons on the same side increased significantly (by $304.17 \pm 66.50\%$ P < 0.001). Among them, 159 neurons responded to acupuncture stimulation of auricular concha (by $415.73 \pm 103.36\%$), and 81 to acupuncture of PC6 (by $12.90 \pm 2.77\%$). The effect of acupuncture of auricular concha on NTS neuronal electrical activity was significantly stronger than that of acupuncture of PC6 (P < 0.001) while no significant differences were found between bilateral auricular concha acupuncture stimulations in changing firing rates of NTS neurons and lowering BP (P > 0.05). 2. Improving DM: Following EA of auricular concha, blood glucose concentration decreased from 17.33 ± 0.60 mmol/L to 16.58 ± 0.63 mmol/L $^{TM} < 0.05$ in DM rats. While after EA of ST36, blood glucose decreased from 17.25 ± 0.87 mmol/L to 17.01 ± 0.58 mmol/L $^{TM} > 0.05$. Of the recorded 69 NTS neurons, 34 increased in their firing rates ($54.79 \pm 24.21\%$) after EA of auricular concha area. Following EA of ST36, 23 of 48 NTS neurons increased in their firing rates ($14.15 \pm 24.21\%$). The effects of EA of auricular concha were significantly superior to those of EA of ST36 in lowering blood glucose level and in activating NTS neuronal activity (P < 0.05) in DM rats. 3. Suppressing epileptic EEG: After injection of PTZ, epileptic EEG (high-amplitude sharp EEG waves) appeared, simultaneously, the firing frequency of NTS neurons declined. On the contrary, when the epileptic EEG decreased in the amplitude or disappeared, the electrical activity of NTS neurons increased obviously in firing rates. After EA of auricular concha, the duration of epileptic EEG appearance during 60 s decreased by $84.45 \pm 7.96\%$ $^{TM} < 0.01$ while after EA of Dazhui (GV14), the duration of epileptic EEG decreased by $15.77 \pm 1.71\%$ $^{TM} < 0.05$. The effect of EA of auricular concha was significantly superior to that of EA of GV14 (P < 0.01) in inhibiting epileptic EEG. After EA of auricular concha, the firing rate of the acquired 31 NTS neurons increased from 4.82 ± 0.54 spikes/s to 7.87 ± 0.61 spikes/s while after EA of

GV14, it increased from 4.45 ± 0.84 spikes/s to 5.11 ± 0.39 spikes /s. The effect of EA of auricular concha was significantly stronger than that of EA of GV14 in activating NTS neuronal electrical activity ($P < 0.05$).

Conclusion: Acupuncture of auricular concha area is superior to that of body acupoints in lowering hypertension and blood glucose, and in suppressing epileptic EEG, which may be closely associated with its effects in activating visceral sensory afferent fibers of the auricular branch of vagus nerve projecting to NTS. Hence, ear-vagus reflex is probably the scientific basis of the efficacy of acupuncture of otopoints.

GROUPING AND USING HOMEOPATIC REMEDIES ACCORDING THE PRINCIPLES OF TCM

Kornélia Saáry

Privat medical department

Summerizing the experiences of the last 10 years I made groups of homeopathic remedies according the principles of TCM. These are: solving the stagnant qi expelling dampness-phlegm reinforce the qi of certain organs I show through a case how we can incorporate the homeopathic remedie into the TCM treatment. According my experiences the homeopathic remedies significantly quicken, make deeply and efficient the akupunktur treatment.

FRACTAL ANALISYS OF EEG SIGNALS OF 'GHOST LIMB PAIN' SUBJECT TO AURICULAR NEEDLING

Antonio Sant Ana, Padula Nuira

Hospital Estadual, Bauru – SP, Brazil

Introduction: EEG is a very well known and versatile method of obtaining informations about the functional aspects of the brain. Our aim in this study was to determine the possibility of getting more information on the EEG data by the use of its fractal dimension (FD) when applied to a particular condition, e.g., 'ghost limb pain'.

Methodology: Compare the EEG data acquired with and without needling by means of their respective FD.

Results: There are significative differences in the fractal dimension (FD) of various phases of the EEG data, be it for the moment of a pain complaint, be it for the response to motor tasks with the limbs, with or without needling.

Conclusion: Fractal dimension (FD) of EEG data may be used to assess and evaluate the use of acupuncture for pacients with amputed limbs, including the possibilities in terms of both the diagnosis and the prognosis.

FRACTAL ANALISYS OF EEG SIGNALS ON SYMPHTOMATIC HEADACHES SUBJECT TO AURICULAR NEEDLING

Antonio Sant Ana, Padula Nuira

Hospital Estadual, Bauru – SP, Brazil

Introduction: EEG is a very well known and versatile method of obtaining informations about the functional aspects of the brain. Our aim in this study was to determine the possibility of getting more information on the EEG data by the use of its fractal dimension (FD) when applied to a particular condition, e.g., headaches.

Methodology: Compare the EEG data acquired with and without needling by means of their respective FD.

Results: There are significative differences in the fractal dimension (FD) of various phases of the EEG data, be it for the moment of the complaint, be it for the response to the needling.

Conclusion: Fractal dimension (FD) of EEG data may be used to assess and evaluate the use of acupuncture for headache pacients, including the possibilities in terms of both the diagnosis and the prognosis.

EVALUATION OF EEG SENSIBILITY ON THE IDENTIFICATION OF ACUTE AND CRONICAL EFFECTS DUE TO AURICULAR ACUPOINTS STIMULATION

Antonio Sant Ana, Padula Nuira

Hospital Estadual, Bauru – SP, Brazil

Introduction: EEG is a very well known and versatile method of obtaining informations about the functional aspects of the brain. Our aim in this study was to determine the possibility of using this equipment to evaluate the use of acupuncture.

Methodology: Individuals with headache complaints or without any complaints were subject to a EEG trial consisting of two distinct and drugless phases. In the first phase, the data acquisition was taken without any needling. A second phase has then followed, with the needling of encephalic related acupuncture points of the auricular antitragus, which took place immediatly after the first phase. The resulting data was then interpreted by a neurophysiologist.

Results: a) There were no alterations in the EEG data due to artifices or interferences of the needles b) It was possible to identify alterations on the needling phase of the group with headache complaints, correlated with the improvement in the pain c) It was possible to identify alterations on the needling phase of the group without pain complaint, correlated with a state of further relaxation d) It was possible to identify alterations compatible with general improvement on the data for the follow up of a patient subject to a 4 session course of auricular acupuncture therapy.

Conclusion: EEG may be a reliable tool for the evaluation and follow up of acupuncture treatments, allied with its low cost profile and wide range of use.

FRACTAL ANALYSIS OF CALCIUM DEPOSITS APPLIED TO THE DEVELOPMENT OF UROLITHOGENESIS MODELS ACCORDING TO TCM THEORIES

Antonio Sant Ana

Hospital Estadual, Bauru – SP, Brazil

Introduction: The formation and growth of kidney stones may be viewed in terms of TCM theory as a combination of cold and humidity in the kidneys. These processes actually follow some kinds of evolutive patterns both in time and space which appear to be closely related to those explained by the fractal geometry approach. That might enable us to assess the process of urolithogenesis under TCM theoretical basis associated to fractal analysis through an 'in vitro' set of experimentation.

Material and method: Determinate and compare the fractal dimension (FD) of the clusters of both hidric and coloidal solutions of calcium hidroxide within open systems with temperature gradient as the strange attractor.

Results: Despite the different behavior shown by calcium clusters in hidric or coloidal solutions, it was possible to make a correlation between their presentation with and without humidity (hidric as opposed to coloidal) through the FD in each condition.

Conclusion: The calcium composites clusters found both in hidric and coloidal solutions and in the presence of a strange attractor, show fractal dimensions (FD) compatible with those found in nature under the influence of chaotic conditions of complex systems, among which we may find those likely to happen in the kidney, in the presence of cold and humidity. This seems to indicate that fractal geometry may be a useful tool to try to give some numerical basis for the study of TCM.

PATTERNS OF CALCIUM DEPOSITS AS PREVIEWED BY 'YIN' AND 'YANG' COMPLEMENTARITY APPROACH

Antonio Sant Ana

Hospital Estadual, Bauru – SP, Brazil

Introduction: 'Yin' and 'Yang' theoretical approach of complementing energetical poles, is a well based concept of the chinese cosmogony, but is subject to frequent misunderstanding when transferred to western cultural interpretations and views. The aim of our work is to show the tangibility of 'Yin' and 'Yang', beyond its mere conceptual condition. Its principles are widely applied in our day to day life, and even in the projects of crafts and equipments (e.g., haemodialysis equipment), but if we refer to it as 'Yin' or 'Yang' we will be immediately dismissed as being theoretical or conceptual or, even worse, unscientific.

Material and method: Hidric solutions of calcium hidroxide within open systems with temperature gradient (cold and heat) or pH gradient (alkali and acid).

Results: Calcium composites ('Yang') undergo attraction to cold or alkali ('Yin') poles, and repulsion from warm or acid ('Yang') poles.

Conclusion: The attraction and repulsion effects of the 'Yin' and 'Yang' constituents were predictable under the chinese cosmogony approach, and should be more carefully taken when the ethiopathogenesis of diseases are considered, e.g., urolithiasis, ankylosing spondylites and 'frozen shoulder', among others, in which the calcium deposition happens to be a well known pattern of evolution.

QOL AND ADL IN THE PATIENTS WITH MYASTHENIA GRAVIS UNDERWENT ACUPUNCTURE ADJUVANT THERAPY: A CASE SERIES

Takashi Seki

Tohoku University Graduate School of Meicine

Myasthenia gravis (MG) produces weakness of voluntary muscles, resulting in diplopia, ptosis, and generalized muscle weakness in most patients. Despite the frequent use of thymectomy and immunosuppressive treatments,

70% of patients still suffered ocular or generalized weakness at the end of follow-up in Japan. Generalized MG greatly involves the patient's daily activity. Here, we studied the benefits of acupuncture as adjuvant therapy for MG and how this therapy improves ADL and QOL of MG patients with standard therapy. Seven generalized MG patients were recruited according to the inclusion and exclusion criteria at the outpatient TCM clinic in Tohoku University Hospital. Mean age at onset was 55.1 years (range 36-77 years). Mean disease duration on starting acupuncture was 11.9 +/- 7.0 years (range 4-23 years), and AchRABs could be detected in sera of five patients. Each patient received acupuncture sessions with orthodox treatment for one year. Sessions were scheduled twice a week in first 3 months and once a week from 6 to 12 month, and each session lasted 30 min. Acupuncture treatment was semistandardised. Acupuncture points were selected according to the principles of TCM. Both MOS SF-36 and MG-ADL scores were significantly improved at 6 and 12 months after starting acupuncture compared with before. To our knowledge this is the first report of the efficacy of acupuncture for the patient with Myasthenia gravis using all standardized assessment instruments. Larger scale, multi-center, randomized controlled clinical trials are necessary to confirm the efficacy of acupuncture in the treatment of MG. We conclude that acupuncture may offer relief in patients with MG.

DIFFERENT FREQUENCIES OF ELECTROACUPUNCTURE IN PATIENTS WITH DIABETES

R.C. Silva Filho, J.S. Valente

Brazilian School of Chinese Medicine (EBRAMEC)

Introduction: Diabetes is a chronic metabolic disease that has a significant impact on the health, quality of life, and life expectancy, as well as on the health care system. Exercise, diet, and weight control continue to be essential and effective means of improving glucose homeostasis.

Objective: Observe the acute effect of different frequencies of electroacupuncture on the blood glucose (BG) level in diabetic patients.

Method: 44 voluntary were randomly assigned to groups. I: Real 02Hz II: Real 15Hz III: Real 100Hz IV: Real 02Hz-100Hz (dense disperse) V: control (wait) VI: SHAM 100Hz. All groups received electroacupuncture on SP8 (Diji) and ST36 (Zusanli) bilaterally, except group V (waiting group) and group VI, where the needles were inserted 5cm away from the real point. All patients had their BG measured before and after 15 minutes of stimuli or wait.

Results: I: all patients reduced the BG, average - 23,34 mg/dl II: all patients reduced the BG, average - 19,37 mg/dl III: all but 1 (increase of only 1 mg/dl) patients reduced the BG, average - 1,12 mg/dl IV: all patients reduced the BG, average - 15,84 mg/dl V: 6 out of 8 patients increased the BG VI: 6 out of 8 patients increased the BG.

Conclusion: Electroacupuncture presented as an interesting option for reducing BG in diabetic patients. The present study was not intended to measure the long time effect of acupuncture but the acute effect. Thus we recommend further research with better and more rigorous method.

THE IMMEDIATE EFFECT OF 2ND METACARPAL BONE ACUPUNCTURE ON PAIN RELIEF

R.C. Silva Filho, T.M. Carvalho

Brazilian School of Chinese Medicine (EBRAMEC)

Background: Acupuncture is one of Chinese Medicine's methods. A various number of researches have already proved the efficiency of acupuncture on pain. The 2nd metacarpal bone is a recent discovered acupuncture microsystem where all organism is represented in a small part of the body.

Objective: Verify the immediate analgesic effects of the 2nd metacarpal bone acupuncture technique on patients with acute pain.

Materials and Method: 45 patients, of both sexes were selected for this study, presenting joint and/or muscular pain. The intensity of pain was assessed, before and just after the stimulus, through a visual analog scale (VAS) for pain from 0 (no pain) to 10 (unbearable pain). After locating the most painful point on the patient's body, a single needle stimulus in the corresponding point on the radial side of the 2nd metacarpal bone was conducted.

Results: 44 out of 45 patients have presented improvement in pain according to VAS after only one treatment. The average VAS value before treatment was 6,2 and the average after treatment was only 2,0. 22.2% of the patients presented no pain after only one needle stimulus. Only one patient did not present any improvement, but none of them presented a worsening.

Conclusion: The 2nd metacarpal none technique is an important therapeutic method for joint pain, to be used alone or in combination with other methods. Further research with better and larger studies, using a randomized clinical trial design, are necessary to determine the effectiveness of this technique.

THE EFFECTIVENESS OF ACUPUNCTURE IN CHEWING MUSCLE TENSION, CMD, TMJ AND CERVICAL SPINE DISORDERS – A RANDOMIZED CONTROLLED TRIAL

Irmgard Simma-Kletschka, Martina Schmid-Schwab, Jochen Gleditsch, Michael Kundi, Eva Piehslinger
Complementary and Alternative Medicine in Dentistry, Bregenz, Austria

Summary: Patients with disorders of the stomatognathic system describe pain and clicking phenomena as primary symptoms but also dysfunction in the temporomandibular joint (TMJ), headaches, cervical spine disorders, sinusitis and reduced cervical spine mobility. Rapid improvement of the pain is required to ensure and maintain adequate patient compliance.

Objective: The study was intended to assess the effects of acupuncture in patients with temporomandibular disorders as compared to placebo therapy (sham laser) the primary target parameter was the subjective pain sensation.

Design: Randomized, placebo controlled trial Patients and methods: 23 patients were enrolled and randomly assigned to one of the two groups. One group received acupuncture treatment according to the verypoint technique, the other group received sham laser treatment. The following observer-blinded findings were evaluated before and after treatment: subjective pain, mouth opening and muscular tenderness and pain on pressure. In addition, mandibular, joint movement pathways were recorded using electronic axiography.

Outcomes: Improvement in pain scores (scale 0-100) in the acupuncture group (19.1 ± 11.9) were significant ($p=0.03$) versus in the placebo group (6.2 ± 14.8). Mouth opening showed an insignificant trend towards improvement ($p>0.1$) in the acupuncture (5.0 ± 6.2 mm) versus the placebo group (1.0 ± 4.7 mm), differences in tenderness and pain on pressure in neck and masticatory were significant ($p<0.05$) for most of the muscles having shown pretreatment tenderness/pain. The axiographic tracings were assessed for quality, symmetry and curve characteristics. Recordings of the opening and closing movement in the acupuncture group showed an increased frequency of improvements of curve characteristics as compared to the placebo group. The acupuncture group also showed an increased frequency of improvement in protrusion and retrusion movements though no statistical significance could be obtained.

Conclusion: Based on the results of the present study, acupuncture can be recommended as acute treatment of craniomandibular disorders. Studies with larger numbers of patients as well as about long term treatment outcomes should be conducted.

Key words: Temporomandibular disorders, VAS facial pain rating, acupuncture, randomized controlled study, placebo.

HYPNOSIS AND PERCUTANEOUS STIMULATION IN THE TREATMENT OF THE FIBROMYALGIA

Oswaldo Sponzilli, Tiberiu Brenner
Department of Acupuncture and Homeopathy

In our experimentation, we took into consideration 48 female subjects between the ages of 35 and 54 affected by fibromyalgia. All of them had traditional symptoms: asthenia and chronic tiredness, sleep and cognitive sphere disturbances and traveling pain throughout the body, without alteration in the levels of inflammation. We subjected the group in question to two combined therapies (12 sessions): Ericksonian hypnosis and acupuncture (with gold needles) in order to simultaneously affect the altered levels of serotonin, noradrenalin, somatotropin hormones and the auto-intoxication often present which produces intracellular accumulation of phosphate and calcium with ATP process dysfunction. From the fifth session, 66.6% (32 subjects) demonstrated an excellent result with the regularization of all parameters examined with a duration of effect from 6-8 months. Nine subjects (18.75%) experienced mediocre results with only partial regularization of symptomatology. Lastly, 14.58% (7 subjects) experienced insignificant variations.

EFFECT OF ACUPUNCTURE IN RADIAL ARTERY BLOOD FLOW VOLUME: HEMODYNAMIC CHANGE USING ONLY LR-3 ACUPOINT

S. Takayama, T. Seki, N. Sugita, M. Toshizawa, T. Yambe, Y. Saijo, N. Yaegashi
Tohoku University Graduate School of Medicine

Background: In Traditional Chinese Medicine, palpation of the radial pulses is an important technique and acupuncture therapy is adjusted according to the observed alterations of the radial pulses. But there was no evidence of radial artery hemodynamics on acupuncture using only one acupoint. The aim of this study is to clear the effect of acupuncture in radial artery hemodynamics using only LR-3 acupoint.

Methods and Results: We studied 26 healthy subjects. Two disposable stainless steel fine needles were inserted in LR-3 acupoints bilaterally and twisting needles stimulation was performed. The radial artery vessel diameter and blood flow volume were measured before the needles insertion, after needles insertion, at 30 sec, 60 sec, 180 sec

after needles twisting. The hemodynamic measurement was recorded continuously during the session by ultrasound using high-resolution echo-tracking system. The vessel diameter was significantly decreased immediately after needles insertion and returned to the basal level at 180 sec after the stimulation. The blood flow volume was significantly decreased immediately after the needles insertion ($p<0.01$) and increased at 180 sec after the stimulation ($p<0.01$). There was significant decrease in systolic blood pressure ($p<0.05$) and heart rate ($p<0.05$) after acupuncture.

Conclusions: The present study shows that the radial artery blood flow volume was immediately decreased by acupuncture, and it increased at 180 sec after needles stimulation only using LR-3 acupoints. We can estimate quantitative hemodynamics of the radial artery in acupuncture by high-resolution echo-tracking system.

POTENTIATING THE AUTONOMIC EFFECTS OF ACUPUNCTURE BY PROACTIVE USE OF RESPIRATION: HRV BIOFEEDBACK BASED BREATHING GUIDED BY AUDIO CD

Tim Hideaki Tanaka

Tsukuba University of Technology

The importance of paying attention to a patient's respiration during acupuncture was emphasized as far back as 2000 years ago in Huangdi Neijing. More recently, superficial acupuncture, when stimulated in phase with expiration rhythm, has been shown to increase parasympathetic activity. In our facility, we have been utilizing an approach to alter breathing patterns of patients in an attempt to further stimulate the autonomic nervous system (ANS). The breathing method is based on heart rate variability biofeedback (HRV-BFB). For practical incorporation of HRV-BFB during an acupuncture session, an audio CD was first created (HRV Trainer CD, non-commercial, 2002). The CD contains voice commands, ocean wave sounds, and music. A preliminary study using the CD with 0.1 Hz rhythmic scripts was conducted with 4 healthy subjects. Respiration rate and ECG were recorded, and then the Fast Fourier Transform was applied to the R-R interval tachogram. The power spectra were divided into LF (0.04 to 0.15 Hz) and HF (0.15 to 0.4 Hz) bands. Subjects had good compliance following the voice and wave cues. Increased LF power with peak frequency around 0.1 Hz was continuously observed during the CD tracks. This frequency component of HRV is closely associated with baroreflex activities. Clinically our patients perform rhythmic breathing with the aid of the CD, while needles are inserted. HRV is recorded during the session to monitor the compliance and the response. We have noted positive effects on various conditions, especially on disorders related to disrupted ANS and biological rhythms.

INDIVIDUALIZED OUTCOME MEASURES IN ACUPUNCTURE – WHERE DO WE GO FROM HERE?

Joao Eduardo Teixeira, Shih Min Li, Ricardo Horta Goncalves, Jéssica Maria Costi

Hospital Regional de Sao Jose Homero Miranda Gomes; Hospital Universitário da Universidade Federal de Santa Catarina

Background: Acupuncture treatment has a notably individualized approach based on TCM syndromes. Assessing acupuncture outcomes is particularly challenging since several aspects of the patient's health status can be influenced, generating unexpected outcomes as well. Essential characteristics of a proper measure are: being able to evaluate the illness' aspects elected by the patient, being applicable to the entire clinical spectrum of illness, and being simple enough not to exceed the consultation time

Objectives: Analyze different individualized outcome measures and suggest a new perspective in order to assess outcomes.

Method: Outcomes database review.

Results: There are several patient-centered outcome measures related to the individualized domain, enabling patients to choose the variables to be scored. Most of them are self administrated and brief. Instruments like MYMOP, MYCaW, MACTAR, SEIQoL-DW, PSYCHLOPS measure changes in symptoms, activities and/or quality of life at baseline and follow-up. These instruments take into account important aspects of the results observed during an Acupuncture treatment, but none of them is designed to assess neither the symptoms related specifically to the TCM's syndromes nor the evolution of these patterns. The Chinese mode of thinking describes a sum of signs/symptoms that form a pattern, which has internal correlations and can change over time as the pathological alterations evolve.

Conclusion: Considering the individualized instruments available, we suggest the development of an acupuncture outcome profile based on the patients' symptoms, capable to address new symptoms over time with TCM correlation. This instrument could be applied both in research and, primarily, in clinical practice.

THE CURATIVE EFFECT OF ACUPUNCTURE FOLLOWING I. IMMEDIATE APPLICATION AND II. DELAYED APPLICATION ON ACUTE SHOULDER PERIARTHRITIS

K. Theodoratou

Acupuncture Private Clinic, Athens, Greece

Object of the study: The purpose of this study is the comparative evaluation of acupuncture technique effectiveness in two distinguished moments of application. 1.Immediate application, during the first 48 hours, and 2.Delayed application, after one week. 99 cases of acute shoulder periarthritis have been studied. The patients experienced severe pain (odynia), and severe motor impairment of the upper limb. All subjects were 36 to 54 years of age, and they experienced periarthritis for the first time. Treating methods 1.Immediate application of acupuncture technique during the first 48 hours from the initial appearance of symptoms, followed by another nine sessions of treatment. 2.Delayed application of acupuncture technique, within a time period of one to two weeks. Another nine sessions of treatment were to follow. The same treatment method, comprising the combination of the same acupoints, was applied in both cases. The curative effect was studied regarding the limitation of pain, and mobility restoration. Four categories were formed, based on the improvement of pain and mobility. Evaluation has been performed following the 1st, 3rd, 5th, 7th and 10th acupuncture session.

Results: The effectiveness is significantly different between the two methods following the 1st, 3rd, and 5th acupuncture session, as well as the two following sessions, the statistic figures, though, are reduced.

Conclusion: Should acupuncture be performed immediately, as first-hand medical treatment, the following advantages are attained: 1.The patient is promptly relieved, and there are no mobility problems 2.There is a possibility that the duration of the treatment, and the relative costs thereof, will be reduced 3.The quantity of the drugs used will be reduced 4.The amount of time the patient will be kept away from work is reduced.

ACUPUNCTURE AND CANCER

*Patrick Triadou, Olivier Martin**

Hospital Necker, Paris, France; *Université Paris Descartes

Introduction: Acupuncture is used as a complementary medicine in many aspects of pathology, but mainly for treating pain and chronic disease, as well as during pregnancy and for women pelvic pains. Cancer represents a major goal for public health today, especially as far as quality of life of cancer survivors may be concerned. For this purpose, we performed a two years study that includes all the Chinese traditional medicine professionals and their patients suffering from cancer in France. With this study we like to know the reasons why these patients consult acupuncturists in the context of cancer, the benefits they obtained from this therapy for their quality of life, and the efficacy markers the professionals used. We like also to appreciate the relationships between acupuncturists and oncologists working in hospital.

Methods: We performed a sociological study with questionnaires that were distributed to patients and acupuncturists, and also with individual interviews. Specific questionnaires were elaborated for patients on one hand and for professionals on the other hand. For the patients, questions were addressed to different items: - reasons for consulting acupuncturist, communication with the different categories of health professionals involved in the treatment of cancer, - main changes observed concerning side effects of chemotherapy, quality of life, ability to go back to work and psychological conditions after acupuncture - socio demographic conditions - knowledge about Chinese traditional medicine... Questionnaires dedicated to health care professionals include questions on : - the choice to practice acupuncture and today's knowledge on cancer therapies - the method used to understand cancer from a Chinese point of view - the number of patients suffering from cancer they treated and the type of cancer involved - the most important effects they obtained with acupuncture and how they estimated their results and their efficiency (clinical, biological markers, IRM... - their relationships with oncologists in hospital.... Interviews allow to give many more information on individual cases and to build a typology of patients as well as of practitioners. These last results confirm and extend results of questionnaires statistical analysis.

Results: Patients do appreciate very much contact with Chinese traditional medicine professionals, when compared those with the majority of oncologists taking care of them. They do not have any more the feeling to be considered as a cancer but as a person. They feel in better condition with acupuncture preventing side effects of chemotherapy such as vomiting, overtiredness, and offering ability to have enough energy to benefitate of social life ... They believe that acupuncture must be recommended to others patients suffering from cancer. They appreciate that chemotherapy could be better endured when acupuncture could be done before chemotherapy treatment. They often do not inform oncologists that they are treated with acupuncture. Oncologists when questioned do not know what kind of help could be obtained from other approaches that are not scientific. Acupuncturists some time communicate with oncologists or general practitioners in charge of the patients. They receive letters with various biological results and indications on therapy, but in many cases they do not really collaborate with oncologists. The main criterions to evaluate their efficiency are clinical results concerning overtiredness, vomiting, infections, and on wellbeing, but also biological results such as blood count. Generally speaking, acupuncturists take care of a few numbers of patients, except some of them who treat only patients with cancer.

Conclusion: The results we obtained suggest that acupuncture could be used as a complementary approach to treat cancer that improves the quality of life of patients suffering from this pathology. Acupuncture not only facilitates the way the patients can endure cancer treatment, but enables patients to rebuild their individual identity after the discovery of such an important disease.

AURICULAR ACUPUNCTURE BEFORE DENTAL TREATMENT

Hans-Jürgen Weise
DÄGFA, Rheinfelden, Germany

Patient anxiety before dental treatment is common. It was estimated that 31% of adults are fearful of dental treatment. Patients who are highly anxious about receiving dental treatment may delay or cancel appointments. Auricular acupuncture is a suitable and easy method to reduce dental anxiety. The presentation will introduce a well established pattern of treatment with auricular acupuncture.

CLINICAL STUDY REPORT OF A NEW ACUPUNCTURE MANIPULATION INSTRUMENT ON PERIPHERAL FACIAL PARALYSIS PATIENTS

Jin-Sheng Yang
Department of Physiology, Institute of Acu-Moxibustion, China Academy of Chinese Medical Sciences, Beijing, China)

Peripheral facial paralysis is a commonly and frequently encountered disease which occurred mainly because of the facial neuritis in foramen stylomastoideum. Acupuncture especially electroacupuncture is a much effective therapy for peripheral facial paralysis. A new acupuncture manipulation instrument was cooperatively developed by the institute of acupuncture and moxibustion, CACMS and Suzhou medical appliance factory. In this clinical study, we observed the efficacy of this new acupuncture manipulation instrument on peripheral facial paralysis patients, compared with that of G6805 electroacupuncture apparatus.

1. Clinical Data

81 out-patients in our hospital were randomly divided into two groups: experimental group and control group. In 44 cases of the experimental group, 25 cases were male, 19 cases were female, aged from 12 to 76 years old. The duration of peripheral facial paralysis varied from 1 day to 6 months, the durations of 35 cases were less than 10 days, the durations of 2 cases were 10-20 days, the durations of 4 cases were 20 days-3 months, the durations of 4 cases were more than 3 months. Pathological changes of 39 cases occurred beneath the foramen stylomastoideum, pathological changes of 5 cases occurred up the foramen stylomastoideum. In 37 cases of the experimental group, 17 cases were male, 20 cases were female, aged from 14 to 75 years old. The duration of peripheral facial paralysis varied from 1 day to 5 months, the durations of 28 cases were less than 10 days, the durations of 3 cases were 10-20 days, the durations of 4 cases were 20 days-3 months, the durations of 2 cases were more than 3 months. Pathological changes of 34 cases occurred beneath the foramen stylomastoideum, pathological changes of 3 cases occurred up the foramen stylomastoideum.

There were no significant difference of age, gender, duration, the pathological sites between the experimental group and the control group (chi-square test, $p > 0.05$).

2. Treatment

2.1 The experimental group

Acupoints: Yangbai (GB 14), Sibai (GB 2), Dichang (GB 4), Yingxiang (LI 20), Jiachengjiang (Extra), Quanliao (SI 18), Xiaguan (ST 7), Jiache (ST 6), Qianzheng (Extra), Yifeng (ST 17), Waiguan (SJ 5), all above in the ipsilateral site of facial paralysis, Hegu (LI 4) in the contralateral side, Sanyinjiao (SP 6) and Taichong (LR 3) in bilateral sites.

Stimulation parameters: Electroacupuncture by the new acupuncture manipulation instrument, with twirling reinforcing or reducing waveform. The intensity of electroacupuncture was used according to asthenia or sthenia syndrome of the disease and the endurance of patients, mild stimulation (mild pulse feeling, ants climbing feeling, or wild subsultory sensation of muscle) for asthenia syndrome, heavy stimulation (obviously pulse feeling, or obviously subsultory sensation of muscle) for sthenia syndrome.

20-30 minutes, once a day, 10 days a course, with an interval of 3 days, 3 courses altogether.

2.2 The control group

Acupoints: the same as those in the experimental group.

Stimulation parameters: We chose G6805 electroacupuncture apparatus for simple electroacupuncture, with disperse-dense wave. The intensity of electroacupuncture was used according to asthenia or sthenia syndrome of the disease and the endurance of patients, mild stimulation (mild pulse feeling, ants climbing feeling, or wild subsultory sensation of muscle) for asthenia syndrome, heavy stimulation (obviously pulse feeling, or obviously subsultory sensation of muscle) for sthenia syndrome.

20~30 minutes, once a day, 10 days a course, with an interval of 3 days, 3 courses altogether.

3.Result

3.1 Criterion of therapeutic effect

We assessed the severity of facial paralysis according to the 40-score method proposed by Japanese Association of Neurology[1]. 10 movements were observed including stationary, frowning, closing eyes gently, closing eyes heavily, closing the ipsilateral eye, moving the alae nasi, puckering up cheek, showing the teeth, whistling, and moving the mouth to straight line. The situation in which there is no obviously difference between the ipsilateral site and contralateral site was recorded as 5 scores. The situation in which the ipsilateral movement was weakened was recorded as 2 scores ,if there was no ipsilateral movement, we recorded as 0 score. The score was made twice before and after treatment respectively. The improvement rate was calculated as follows: (scores before treatment - scores after treatment)/(40- scores before treatment)×100%.The improvement rate of 100% was considered as recovery, the improvement rates between 60%—99% were considered as significantly effective, the improvement rates between 25%—59 were considered as effective, the improvement rates between 0—24% were considered as ineffective.

3.2 The safety assessment criterion

The safety assessment criterion was classified as 4 grades, as follows(table 1):

grade	symptoms	scores
1	No symptoms such as dizzy, difficult withdrawal of needles, or haematoma, and no adverse reactions in blood pressure, heart rate, cardiac rhythm, or breath appeared during acupuncture.	1
2	Slight symptoms such as dizzy, difficult withdrawal of needles, or haematoma, and slight adverse reactions in blood pressure, heart rate, cardiac rhythm, or breath appeared during acupuncture, which needed not to be deal with.	2
3	Moderate symptoms such as dizzy, difficult withdrawal of needles, or haematoma, and moderate adverse reactions in blood pressure, heart rate, cardiac rhythm, or breath appeared during acupuncture, which needed to be deal with.	3
4	Serious symptoms such as dizzy, difficult withdrawal of needles, or haematoma, and severe adverse reactions in blood pressure, heart rate, cardiac rhythm, or breath appeared during acupuncture, which resulted in the interruption of the study.	4

3.3 Result

The comparison of the effect between the two groups, as follows (table 2):

	recovery (%)	significantly effective (%)	effective (%)	ineffective (%)
Experimental group (44 cases)	40 cases (90.90%)	3 cases (6.81%)	1 cases (2.27%)	0 cases (0%)
Control group (37cases)	27 cases (72.97%)	4 cases (10.81%)	6 cases (16.21%)	0 cases (0%)

From table 2, we found that though the effective rates of the two groups were same, the cure rate of the experimental group was better than that of control group (chi-square test, $p < 0.01$).

We also found that the two treatments were safe, because no symptoms such as dizzy, difficult withdrawal of needles, or haematoma, and no adverse reaction of blood pressure, heart rate, cardiac rhythm, or breath appeared during the two treatments.

4.Discussion

Peripheral facial paralysis as a common disease is caused by amyelination and axonal degeneration of the facial nerve. When the blood vessels around the facial nerve is subjected to such stimulations as cold, inflammation, viral infection, or ischemia, facial nerve spasm happens that leads to anoxia, edema, compression of the facial nerve, at last leads to amyelination and axonal degeneration of the facial nerve. The less severe axonal degeneration, the better curative effect. The more severe axonal degeneration, the worse curative effect, even companied with sequela. Zhou [2] held that the human body was a conductor composed of water, inorganic salt and charged biocolloid. When a pulse current acted on the body with continuously transforming waveform and frequency, the ion in the body would move directionally, eliminate the polarized status of the membrane, make the concentration and distribution of ion changed significantly, then influence the function of the human body. The changes of the concentration and distribution of the ion were the most basically electrophysiological basis of the electric pulse treatment. Huang[3] held that electroacupuncture could relax the facial muscle, dilate vessels, improve the blood circulation, and fully restore the

microcirculation, so as to improve the abnormal metabolism in the ipsilateral face, redress the internal milieu disorder, so the paralytic muscles can be recovered to normal. From above, we concluded that electroacupuncture played an important role in the treatment process of peripheral facial paralysis.

Recent study indicated that, acupuncture manipulating information could be expressed in spinal dorsal horn neuron of human body, and could be recorded by instruments. According to this theory, the new acupuncture manipulation instrument was cooperatively developed by the institute of acupuncture and moxibustion, CACMS and Suzhou medical appliance factory. By retaining acupuncture experts who were unique in manipulation to manipulate the needling, the information in spinal dorsal horn neuron induced by needling was recorded and cloned to a chip, and then amplified as the stimulation current to treat disease. Compared with other nerve and muscle stimulators and TENs instrument, the new acupuncture manipulation instrument has the following advantages. (1) It is a perfect combination between electrical stimulation therapy and acupuncture maneuver of Traditional Chinese medicine. It is a renovation to electrical needle therapy and electrical stimulation therapy. It is technical know-how of our country, fill the blank of our country, further rise the position of our country in the area of world acupuncture medicine. (2) Solve the problem effectively that human body is easy to produce resistance to the common electrical stimulation and curative effect is weakened gradually. The parameters adjusting range of electrical stimulation can satisfy electrical physiological phenomena more. The class of Group code of creature information is finer, it is a new generation product replacing some stimulator with unchangeable stimulation methods. It has advantages in technic. (3) It has the ability to output bi-direction stimulation pulse. From the view of physiology, ideal stimulation pulse should have no DC component (DC component is 0), pulse waveform is usually symmetry or un-symmetry bi-direction pulse with equal charge. This is the renovation of the instrument.

In order to observe the effect of the new acupuncture manipulation instrument, we compared the clinical effect of this new instrument with that of G6805 electroacupuncture apparatus. Through applying to treat peripheral facial paralysis, we found that the clinical effect of this new instrument was better than that of G6805 electroacupuncture apparatus. And no symptoms such as dizzy, difficult withdrawal of needles, or haematoma, and no adverse reactions in blood pressure, heart rate, cardiac rhythm, or breath appeared during the two treatments.

In addition, the patients reported that the new acupuncture manipulation instrument was more comfortable, they did not have a feeling of too strong or too heavy stimulation which might be induced by a common electric acupuncture apparatus. And the waveform changed constantly, so it was uneasy to induce sensation tolerance. Patients are willing to accept the new instrument, and it is worth energetically popularization and application in the clinic.

Reference

- 1 Shen AM. Acupuncture with Huolong Therapy for facial paralysis patients: report of 80 cases. *Zhongguo Zhenjiu*, 2007, 27(12):929
- 2 Zhou CL. Application of electroacupuncture with disperse-dense wave to treat peripheral facial paralysis. *Zhongguo Xiangcun Yiyao Zazhi*, 2003, 10(9):18
- 3 Huang XY, Li YX, Sun ST. Application of electroacupuncture with different waveform to treat the sequela of peripheral facial paralysis. *Journal of Clinical Acupuncture and Moxibustion*, 2007, 23(10):91

GENETIC EVIDENCE FOR BASIC THEORIES OF THE TRADITIONAL CHINESE MEDICINE; GRADIENT AND TRADITIONAL CHINESE MEDICINE

George Zdravkov

Park Ridge, Illinois, USA

The present article aims to give some evidence supporting the general theories in TCM using knowledge from modern science and medicine. Organ maps on the human chromosomes were made using the data for the localization of genes responsible for genetic diseases. The analysis of the organ maps on the chromosomes gives clear evidence for the correct grouping of the human organs according to the Theory of the Five Basic Elements of TCM. The Energy Channel System is seen as a three dimensional tract of the migration of ectodermic, mesodermic, and endodermic cells in the human embryo. The material substrate of the TCM channels is the liquid-crystal structure of the cell membrane, cytoplasm, and DNA of the ectodermic, endodermic, and mesodermic cells through which electromagnetic, optical, and sound signals are transmitted in the direction of the body gradients. The acupuncture points are considered as representation of the location of the basic embryonic stem cells, which gave the rise of the different tissues and organs. The yin-yang theory which is the basis for understanding the universe and as well as the living system in TCM is identified with the fundamental nature of the Gradient. The life system is a self-organized, self-regenerating, multi-level asymmetry with the basic functional unit- Gradient (chemical, electrical, magnetic, osmotic, etc.) The unit energy for the life matter is the energy necessary to sustain one unit of Gradient. The energy Qi in its movement flows in the direction of the gradients and is commensurable to the unit energy of the Gradient.

Free poster papers

ASSOCIATION OF HIGH EXPRESSION IN RAT GASTRIC MUCOSAL HEAT SHOCK PROTEIN 70 INDUCED BY MOXIBUSTION PRETREATMENT WITH PROTECTION AGAINST STRESS INJURY

Xiao-Rong Chang, La Peng, Shou-Xiang Yi, Yan Peng, Jie Yan
University of Traditional Chinese Medicine

Aim: To study the effect of moxibustion on Zusanli or Liangmeng point on gastric mucosa injury in stress-induced ulcer rats and its correlation with the expression of heat shock protein 70 (HSP70).

Methods: Sixty healthy SD rats (30 males, 30 females) were divided into control group, injury model group, Zusanli point group, Liangmeng point group. Stress gastric ulcer model was induced by binding cold stress method. Gastric mucosa ulcer injury (UI) index was calculated by Guth method. Gastric mucosa blood flow (GMBF) was recorded with a biological signal analyzer. Protein content and gene expression in gastric mucosal HSP70 were detected by immunohistochemistry (IHC) and reverse transcription polymerase chain reaction (RT-PCR). Thiobarbital method was used to determine malondialdehyde (MDA) content. Gastric mucosal endothelin (ET) and prostaglandin E2 (PGE2) were analyzed by radioimmunoassay.

Results: High gastric mucosal UI index, high HSP70 expression, low GMBF and PGF2, elevated MDA and ET were observed in gastric mucosa of rats subjected to cold stress. Moxibustion on Zusanli or Liangmeng point decreased rat gastric mucosal UI index, MDA and ET. Conversely, the expression of HSP70, GMBF, and PGE2 was elevated in gastric mucosa after pretreatment with moxibustion on Zusanli or Liangmeng point. The observed parameters were significantly different between Zusanli and Liangmeng points.

Conclusion: Pretreatment with moxibustion on Zusanli or Liangmeng point protects gastric mucosa against stress injury. This protection is associated with the higher expression of HSP70 mRNA and protein, leading to release of PGE2 and inhibition of MDA and ET, impairment of gastric mucosal index. **Key words:** Moxibustion Zusanli Liangmeng Stress

RESIDENCY PROGRAM ON ACUPUNCTURE – A REALITY IN BRAZIL

Jéssica Maria Costi, Li Shih Min, Ricardo Horta Gonçalves, Graciela de Oliveira, Richter Schmidt, Eduardo Marten Teixeira, Ari Ojeda More
Hospital Regional de São José

Introduction: Residency programs on acupuncture have been functioning in Brazil since 2004. The present report brings the experience of the third program, started in 2005, at Hospital Regional de São José, Brazil.

Background: The 2-year program includes a comprehensive list of traineeships in basic areas (internal medicine, neurology, orthopedics, gynecology-obstetrics) to be carried out in the first 6 months. From then, the specific practice in acupuncture begins, performed in several outpatient departments, with different staff collaborators. Along with the acupuncture practice, the traineeship in physical medicine and rehabilitation is accomplished. Also as part of the program, it is expected from the resident to attend classes about traditional Chinese medicine, as well as reading and discussion about scientific literature, including original papers and revision articles. By the end of the 2nd year, the resident presents an original scientific work to be performed as a conclusion of the program.

Discussion: This is an extensive program, to be carried out in a general hospital because of the clinical and surgical basic areas, with many professionals involved. Considering the amount of demands, the resident can be very required during the 2-year program.

Conclusion: The Brazilian residency program on acupuncture is comprehensive, extensive and detailed. Besides the skills in diagnosis and practice of acupuncture, the residents are also trained in basic areas. Thus the specialists formed by such program are expected to have an optimum knowledge of both western and eastern medicine, enhancing and contributing to the improvement in formation and competence of medical acupuncturists.

A PHARMACOLOGICAL STUDY OF SKIN ELECTRIC CURRENT AS BASE OF THE RYODORAKU MERIDIAN (EM) MEASUREMENT -- EFFECT AFTER SYMPATHICOLYTIC DRUG ADMINISTRATION FOR EXPERIMENTAL ANIMAL

Hiroshi Endo^{1,2}, Wang Cai Yuan¹, Takayuki Nakayoshi¹, Noboru Kibi¹, Hideaki Higashino²

¹Kansai University of Health Sciences (Acupuncture discipline), ²Kinki University, School of Medicine, Department of Pharmacology

Aim of Investigation: M.D. and L. Acu. of Ryodoraku medical science measures fluctuation of skin electric current by autonomic imbalance and applies that to diagnosis of Traditional Chinese Medicine (meridian). However, it is

diagnosis designed by correlation of symptom and skin electric current of human. Ryodoraku medical science explains that the skin electric current increases by efferent sympathetic nerve activity superiority. We gave experimental animal sympatholytic drug and investigated skin electric current at that time.

Methods: The experimental animals are hairless (depilation) Rats (HWY Hair-less Wistar Yagi / Slc). Administered drug is reserpine. Catecholamine group is made to be drained in this drug at the nervus sympathicus end and restrains the neural activity. Besides, dopamine and serotonin (in brain) are drained too, and Rats restrain spontaneous behavior. We performed a very small amount of reserpine (0.25mg/kg/daily) by oral administration for three days and made Rats sustained sympathetic nerve activity numerical inferiority. The spontaneous behavior in cage of the Rats were kept under observation for 24 hours. Before and after of experiment, we performed etherization on Rats and performed electrification (12V, 200 micro ampere) on inside / outside of the forelimb / hind leg (eight places) and measured skin electric current after 0.75 second electrification. This measurement is the same as the Ryodoraku meridian measurement. Results: After reserpine administration, the spontaneous behavior of Rats decreased in significance ($p < 0.05$), and the skin electric current of all electrode decreased conspicuously. However, only the skin electric current of both inside of hind leg increased.

Discussion and Conclusions: Because spontaneous behavior of Rats decreased, the nervus sympathicus was restrained by reserpine administration. And we considered as having been able to settle experiment model of human autonomic imbalance (neurosis). Moreover, the skin electric current of the Rats decreased conspicuously. Therefore, we suggest that, and skin electric current can fluctuate by autonomic nerve activity. We, furthermore, reach a conclusion that Ryodoraku Meridian electric current increases and decreases by autonomic imbalance. These are interesting phenomena for a Ryodoraku meridian and Traditional Chinese Medicine (meridian).

INFLUENCE OF A ACUPUNCTURE THERAPY ON INTRAOCULAR PRESSURE AND THE COMPLIANCE OF PATIENTS WITH OCULAR HYPERTENSION AND PRIMARY OPEN ANGLE GLAUCOMA

Henrik Ewert, Regina Schwanitz

residence of ophthalmology Ludwigslust, Germany

Background: The primary open angle glaucoma (the most common form of glaucoma) is a multi-factorial disease of the optic nerve marked by the loss of retinal ganglion cells following a classic pattern. The gradual process of this loss of ganglion cells eventually leads to the atrophy of the optic nerve. The clinical course usually consists of mild to moderately elevated intraocular pressure (IOP), although a significant number of patients may not have a measured IOP greater than the normal range.

Methods: We examined the effect of acupuncture therapy on eye pressure and the compliance with patients suffering from primary open angle glaucoma ($n=21$) and ocular hypertension ($n=13$) in contrast to a comparative group of test persons not suffering from any eye complaint ($n=16$). Before and after acupuncture treatment an ophthalmologic determination of visual acuity according to DIN 58220 and a computer-aided visual field analysis by Rodenstock-Peristat were done and before starting the therapy a measuring of corneal thickness by 4Optics-Pachymeter as well. The IOP was measured before acupuncture treatment, immediately after the treatment as well as 30 minutes after therapy. For documenting the changes in the compliance of the patients we evaluated a standardized questionnaire completed by each patient having undergone this treatment.

Main Outcome Measures: Doing so we achieved the result that for patients with primary open angle glaucoma and ocular hypertension the acupuncture treatment is suitable to lower intraocular pressure in a significant way for the longer term. Despite the positive effect on lowering IOP in these groups you can not deny that acupuncture according to our researches neither had an influence on visual acuity nor on the results of visual field analysis in all three examined groups. Having evaluated the patients' questionnaires being answered after finishing the acupuncture treatment we are able to ascertain that the compliance with patients increased regarding the application of local anti-glaucomatous therapy. Moreover according to the analysis of the questionnaires a subjective improvement of life complacency in general was reached.

Conclusion: Therefore it can be said that acupuncture is an appropriate method which can be employed for treating patients with primary open angle glaucoma in addition to lowering eye pressure by anti-glaucomatous pharmacological therapy. Doing acupuncture with patients suffering from ocular hypertension can significantly lower IOP and is able to reduce the rate of converting into a manifest glaucoma. That is why this treatment is especially fitting for patients with ocular hypertension showing contra indications of local-antiglaucomatous medicine (e.g. beta-blocker), allergies to preservatives and aversion to pharmacological therapy. Undergoing this treatment it is absolutely necessary that patients are permanently examined with regard to visual field, retinal nerve fibre thickness and micro-morphological alterations of the disc in order to detect tissue damage of the optic nerve and functional loss caused by beginning glaucoma.

RECURRENT AND CHRONIC GYNAECOLOGICAL INFECTIONS AND THEIR TREATMENT BY MEANS OF METHODS OF COMPLEMENTARY MEDICINE (ELECTROACUPUNCTURE ACCORDING TO VOLL, VEGA TESTING)

Ladislav Fildán

Pain Clinic, Biological Holistic Medicine, Acupuncture, EAV, Brno, Czech

The chronic or recurrent vulvovaginitis are a big problem, treatment of which by the means of classical medicine has failed. It turns out that it is possible to reach a total or partial cure in most patients suffering in this way by means of complementary medicine.

Set of patients: During the period of 1993 till 2005, a retrospective study of a set of 635 patients aged 5 till 74 years was made with diagnose N76.1 subacute and chronic vaginitis, complaints lasting from 0,5 till 20 and more years and precedent gynaecological treatment in 98% of the patients.

The most frequent symptoms: chronic vaginal discharge, persisting vulvovaginal itching, pains in pelvis minor, recurrent cystitis.

Methodology:

1. Case history
2. Electroacupuncture according to Voll (bladder, small and large intestines, lymph, triple warmer, allergy meridians)
3. Vega test (microbial load, microbial toxins, metabolic and inner milieu disorders, mental state, drugs efficiency test etc.)
4. Test of remedies for therapies by means of methods 2 and 3
5. Treatment programme

Treatment: Basic steps: diet, intestinal dysbiosis treatment, restoring normal intestinal microflora. They were followed by homeopathic remedies, nosodes, isopathic remedies, phytotherapeutics and original bioinformation remedies for organism detoxification of the microbial and its toxins load, heavy metals, antibiotics and hormonal drugs.

Results of testing the aetiology of the complaints: Mycosis (candida, penicilinum) is the most frequent cause. Other microbial causes are less frequent.

Results: Results in the set were evaluated in the 3rd and 6th month after starting the therapy. 492 (88 %) of the patients indicated total or partial cure in the 6th month.

"SIGHT IMPROVEMENT WITH BIOINFORMATIC METHODS"

Enikő Hajdu, Anna Pfeifenróth, A. Byrne, A. Byrne jr., T.K. Chou, M. Zubkewich
Hippocampus Institute, Budapest

The program's goal: International clinical data collecting that shows that the eye-sight improving effect of treatment with electromagnetic biocommunication on adults and children with a bad quality of eye-sight can be statistically proven.

Methods: Daily use of low intensity pulsating magnetic field therapy, in which bioinformatic processes are used which have an effect on the quality of eye-sight. The program consists of 16 treatments a week and weekly vision checks and questionnaires, which are followed by bio-mathematic processing.

Case Study: The case of a patient, a young woman who suddenly lost her vision due to two sided optic nerve atrophy. The cause of the sickness is mitochondrial DNA mutation (Leber-sickness). With the help of the electromagnetic biocommunication therapy used in the eye-sight quality improving program, the sight improved a surprisingly well.

Conclusion: The Leber-sickness is known to be a progressive illness, improvement is not expected. As an effect of the applied electromagnetic biocommunication therapy the deterioration of the process ended, and serious improvement was seen regarding the two eye raw vision.

THE SASANG CONSTITUTION IS ONE OF THE INDEPENDANT RISK FACTOR OF STROKE

Chang-Ho Han

Dongguk University International Hospital, Republic of Korea

Aging population is a global trend, and increasing cases of stroke is becoming an important public health issue. The Sasang constitution was first originated from <Donggeuisusebowon> written by Jema Lee(1837-1900) and according to Korean medicine and Sasang constitutional medicine seek for the cause of stroke from imbalance of constitution. The objective of this case-control study was to investigate whether the Sasang constitution is a risk factor of stroke attack, to grasp interaction effects between Sasang constitution and other risk factors and to build the best decision model which can describe the stroke events. From October 2005 through March 2007(18 months),

331 case subjects from 3 university hospitals were met the inclusion criteria. And the same of healthy control group extracted by a simple random selection using PROC SURVEYSELECT with consideration of age and gender. The patient group's data was attained by preparing a case report form based on standard operating procedures, aimed to survey patients with informed consent, who volunteered to participate in the study for researching the risk factors of cerebro-vascular disease. The total number of subject was 662(case group 331, control group 331). And the statistical analysis method is as following first, comparing the technical statistics quantity on risk factor of stroke among analysis object people and conducting Chi-square test or Fisher's exact test on the quality variable for the univariate analysis, and conducting independent t-test for the quantity variable and after that, conducting logistic regression analysis in order to get the odds ratio and finally building suitable model by using the Hosmer and Lemeshow's goodness of fit test. Moreover, the interaction effects between Sasang constitution and stroke risk factor was confirmed. And using the CART algorithm, the best decision tree model of stroke events was established. In a condition that age and gender were controlled by logistic regression, the relative risk of stroke attack by Sasang constitution classification was obtained Soyangin's risk ratio was 1.75 times higher than Taeumin's, and it was statistically significant(OR=1.75, 95% CI 1.23-2.49). However, consideration of body mass index(BMI), waist circumference, past history of hypertension and diabetes, history of drinking and smoking makes even better model. According to that model, Soyangin's risk ratio of stroke goes up 6.34 times higher than Taeumin's(OR=6.34, 95% CI 3.08-13.04 Hosmer & Lemeshow goodness of fit test, X2 P-value=0.89). According to CART algorithm, the most overriding variable was the history of risk factor of cardiovascular disease. Among the group without past history, they were divided the most it they were Soyangin or not. The next overriding variable was drinking history among Soeumin and Tarumin. Among Soyangin, the next overriding variable was exercise regularly. The misclassification rate of CART algorithm was 0.274 though. This study suggests that the risk of stroke is different significantly according to Sasang constitution. And the risk of stroke increase with the interaction effects between the Sasang constitution and the other risk factors such as hypertension, waist circumference, diabetes, obesity and smoking. Moreover this study supports that it is possible to make an accurate estimate model of a stroke attack with Sasang constitution in the near future.

EFFECTIVENESS OF KOREAN ACUPUNCTURE TREATMENT IN HYPERTENSION PATIENTS: CONTROLLED CLINICAL TRIAL

C. Han, M. Shin, G. Kim, S. Park, S. Choi

Department of Medical Research, Korea Institute of Oriental Medicine, Korea

Objective: Aim of this study was to investigate the antihypertensive effect of Acupuncture in hypertensive patients. **Materials and methods** We measured the blood pressure of 30 patients who were admitted in the Oriental Medical Clinic of Chaseo from 13th February 2007 to 13th May 2007. We included the patients only in case of the systolic blood pressure was over 120mmHg or diastolic blood pressure was over 80mmHg. The patients were treated by an acupuncture treatment (Gyeok-pal sang-saeng-Yeok-chim GPSSYC). To evaluate the effect of the GPSSYC, the blood pressure and pulse rate were measured before and after acupuncture treatment for total of 10 times. Collected data were analyzed by paired t-test, repeated measure ANOVA.

Results: After 3 weeks, there were significant decrease in the systolic blood pressure ($P<0.001$) and significant decrease in the diastolic blood pressure ($P<0.001$) treated by GPSSYC 10 times but pulse rate was failed to decrease. The effects of GPSSYC by measuring time on blood pressure were as follows: systolic blood pressure and diastolic blood pressure were decreased significantly from the 1st to 10th visit ($P<0.0001$) but pulse rate was not decreased significantly.

Conclusion: The results suggest that GPSSYC is effective in decreasing the systolic and diastolic blood pressure.

AN IN-DEPTH INTERVIEW FOR USE OF MOXIBUSTION THERAPY IN KOREA

C. Han, M. Shin, G. Kim, S. Park, S. Choi

Department of Medical Research, Korea Institute of Oriental Medicine, Korea

Objectives: Moxibustion therapy is one of the most popular oriental treatments in Korea. In this study, we operate the in-depth interview for use of moxibustion therapy in Korea.

Methods: Survey questions were developed based on consensus of acupuncture professors. The list of the Korean medical doctors with experiences more than 10 years is provided by the Association of the Korean Oriental Medicine. The in-depth interview was conducted in 30 Korean medical doctors who answered in the previous telephone survey that they use moxibustion therapy for more than 30 % of patients everyday. Interview survey with them were conducted by the well-trained interviewers of Korea Institute of Oriental Medicine in Medical researcher from 22th May to 28th June 2007.

Results: Korean medical doctors prefer to use the moxibustion with moxa stick (83.9%). The most common treatment disease was musculo-skeletal disorder (28.9%), gynecology (14.1%), digestive disorder (28.6%). The most

common treatment area was the abdomen (35.3%), back (22.5%), lower extremity (15.8%) and upper extremity (16.9%). Indirect moxibustion's were as frequent as 73.5% of moxibustion method. The most common instrument for treating was mini-moxa of manufactured goods (39.3%). Most Korean medical doctors (48.8%) took up the position that bring symptom relief following good treatment area. 'High preferences of patients' (32.7%) was one of moxibustion strong points but 'Lots of smell and smoke' (54.7%) was a weak points. The most common side effects was the 'slight burn' (34.9%), 'skin rash' (22.5%), 'skin pruritus' (23.8%)

Conclusions: This survey provides unique insight into the perception of the Korea medical doctor at moxibustion therapy. Future research need to provide more in-depth insight into doctor views of the experience.

TELEPHONE SURVEY FOR GRASPING CLINICAL ACTUAL STATE OF MOXIBUSTION THERAPEUTICS IN KOREA

C. Han, M. Shin, G. Kim, S. Park, S. Choi

Department of Medical Research, Korea Institute of Oriental Medicine, Korea

Objectives: Moxibustion therapeutics is one of the most popular oriental treatments in Korea. In this study, we operate the Telephone Survey for grasping clinical actual state moxibustion therapeutics in Korea.

Methods: Survey questions were developed based on consensus of acupuncture professors. The list of the Korean medical doctors with experiences more than 10 years is provided by the Association of the Korean Oriental Medicine. A stratified random sample of Korean medical doctors is drawn for the telephone interviews. We choose a bound on the error of estimation equal to 6.5 percentage, and the sample size is 260 for the national sample. Telephone interviews with them were conducted by the well-trained interviewers of Korea Institute of Oriental Medicine in Medical researcher from 26th March 2007 to 6th April 2007.

Results: Ninety -four percents of Korean oriental medical doctors were male and most commonly, clinical experience of doctors were 20-29 years(47.3%). Sixty-seven percent of Korean oriental medical doctors used moxibustion therapeutics. The most common treatment disease was Musculo-skeletal disorder(38.3%), Digestive disorder(28.6%), Gynecology(14.1%). Indirect moxibustion were as frequent as 65.5% of moxibustion method. The most common reason of unused respondents was 'Lots of smell and smoke'(28.3%), 'The wound left a scar'(20.8%), 'Less effects'(20%), etc. Eighty-three percents Korean oriental medical doctors were against that moxibustion therapy used without doctor's examination

Conclusions: This survey provides unique insight into the perception of the Korea medical doctor at moxibustion therapeutics. Future research need to provide more in-depth insight into doctor views of the experience.

AN EXPERIMENTAL STUDY ON THE EFFECT OF PERILLAE FRACTUS HERBAL-ACUPUNCTURE AT ST36; THE SUPPRESSIVE EFFECT AGAINST OVA-INDUCED ASTHMA AND THE REGULATORY EFFECT ON IMMUNE RESPONSE

Kwoneui Hong, Seung-Kyoung Ko, Hyun-Kyeong Jo
Daejeon University, Korea

Objectives: The purpose of this study was to confirm the suppressive effect against asthma and immune regulatory effect of Perillae Fractusher Herbal-acupuncture at Chok-samni (ST36) on ovalbumin-induced asthma in mice.

Method: C57BL/6 mice were sensitized and challenged with OVA(ovalbumin) for 12 weeks. The mice in the PF-HA group were treated with PF-HA at ST36 for the later 8 weeks (3 times a week). The mice in the OVA-Needle-Prick (NP) group were treated with single prick with an injection needle at ST36 for the later 8 weeks (3 times a weeks).

Result: 1. The lung weight of the mice treated with PF-HA at St36 were decreased significantly compared with that of the control group. 2. The total leukocytes and eosinophils in BALF of the group treated with PF-HA were decreased significantly compared with those of the control group. 3. Eosinophils in BALF and the collagen accumulation in lung of the mice treated with PF-HA were decreased significantly compared with those of the control group. 4. The concentrations of IgE, IL-4 and IL-5 in BALF, and IL-4, IL-5 and IL-13 in serum of the PF-HA group were decreased significantly compared with those of the control group. 5. The numbers of CD3-/CCR3+, Gr-1+/CD11b+, CD4+, and CD3e+/CD69+cells in lung of the mice group treated with PF-HA at St36 were decreased significantly compared with those of the control group. 6. The mRNA expressions of TNF- α , IL-4, IL-5, IL-13 in lung of the mice group treated with PF-HA at St36 were decreased significantly compared with those of the control group.

THE EFFECTS OF BAICKBUJASAN EXTRACT ON THE SKIN DAMAGE AND PIGMENTATION INDUCED BY ULTRAVIOLET IRRADIATION

Seung-Ug Hong, Ji-Hoon Kim
Dongguk University, South Korea

Objective: The purpose of this study is to examine the effects of Baickbujasan(BB) on depigmentation.

Method: The inhibition of tyrosinase activity, melanogenesis and cell viability in cultured B16 melanoma cells were measured. In order to test effects of reduction of melanogenesis, B16 F-10 mouse melanoma stem line was employed to extract melanin from cultured cell, where BB was added or not, was dissolved in alkali for colorimetric analysis. Also, in order to test skin alteration in C57BL/6 after UV irradiation, the animals were grouped into a UV irradiation group and UV irradiation after BB application group. Dopa oxidase tissue staining was executed to investigate the change in the distribution of active melanin cell. The distribution of active melanin cell in inner skin of iNOS after damage from UVB irradiation and the manifestation condition of P53 which takes part in natural death of keratinocyte were examined.

Result: The results indicate that BB has significant effects on tyrosinase activity, and melanogenesis in vivo test. BB seems to reduce C57BL/6, external dermatological damage, for instance, erythematous papule, eczema, loss of keratinocyte, reduction in pus, and relieves dermatological damages.

Conclusion: BB can be applied externally for UV protection and depigmentation.

Key words: Tyrosinase, melanogenesis, UVB, iNOS, p53, Baickbujasan

RISK FACTOR ANALYSIS OF NEEDLE SICKNESS

Tse-Hung Huang¹, Heng-Hong Chang^{2,3,*}

¹Division of Acupuncture-Moxibustion and Traumatology, ²Center for Traditional Chinese Medicine, Chang Gung Memorial Hospital, ³Graduate Institute of Traditional Chinese Medicine, Chang Gung University, *Corresponding author

Acupuncture is well known worldwide since 1972. In the common understanding, acupuncture seems to be safe without any adverse effect. However, almost every clinical practitioner of acupuncture had encountered needle sickness on patients. According to the study of Edzard Ernst, commonly seen adverse effects of acupuncture included pain (1-45%), fatigue (2-41%), bleeding (0.03-38%), and needle sickness(0.03-38%). In Taiwan, the adverse effects of acupuncture are increasing due to the prevalent application of acupuncture. In this study, cases of needle sickness were recorded in a 2-year-study in the acupuncture departments of a teaching hospital in Taiwan. Patients of needle sickness were reported with demographical characteristics (including sex, age, body weight, height, blood type, menstrual cycles, marriage, education, occupation, and income), previous history of acupuncture and previous adverse effects, current and previous medication history, and quality of life index. The risk factors of needle sickness were screened by monofactor and multifactor analysis. In the result, the frequency of needle sickness was 0.001. There was no significant difference in sex. The most common age of patients with needle sickness was 20-40 years old. Statistical significances were noted in previous history of needle sickness, first ever experience of acupuncture, fear of acupuncture, current use of antihypertensive medication (including, beta-blocker, angiotensin converting enzyme inhibitor, and calcium channel blocker), medication of muscle relaxant, and medical history of vertigo. After education to the patients with history of needle sickness, patients continuously receiving acupuncture in the following year showed >50% decrease of the frequency of needle sickness. In summary, the risk factors of needle sickness based on this study were: 1. First ever experience of acupuncture, 2. History of needle sickness, 3. Cardiovascular disease with current medication of antihypertensive medication, 4. With fear of acupuncture, 5. History of vertigo. According to the listed risk factor, screening patients with high risk of needle sickness and informing and educating the high risk patients before acupuncture effectively prevent the occurring of needle sickness.

Key word: Needle sickness, needle fainting, adverse effect, acupuncture, risk factor, epidemiology

THE RELATIONSHIP BETWEEN HEGU (L14) AND YINGXIANG (L12)

Yoh Ichimura, Ikuemon Katayama
Meikai University

Introduction & Aim of the study: This study we made investigation into the relationship between side to side Hugu (L14) and Yingxiang (L12). In addition, we compared the effects of a laser needle with those of standard needles with regard to acupuncture treatment.

Methods: Subjects were 5 volunteers who underwent treatment at the Hegu with the acupuncture and the carbon-dioxide laser needle having an energy density of 10.4 J/cm². At 5 and 10 minutes after irradiation, we measured surface temperatures at the Yingxiang using thermography. At 50 minutes after laser irradiation, the volunteers

underwent treatment with standard needles at the LI4, and surface temperatures were measured in the same way as described above.

Results & Discussion: We stimulated LI4, after, LI2 exhibited temperature went up the same side: 3 from among 5, opposite side: 1 from among 5, significant difference: 1 from among 5. The LI2 exhibited temperature rises after both laser needle and standard needle treatment. Interestingly, there was no difference in the temperature increases between the laser and standard needles. Other points showed little increase in temperature after treatment with either the laser or standard needles.

Conclusions: This study indicates that Hugu (LI4) concerned in Yingxiang (LI2) and the CO2 laser needle can be effective in acupuncture treatment.

A SURVEY STUDY ON CORRELATION BETWEEN HEALTH STATE AND ORDINARY SYMPTOMS

Eunsu Jang, Uonghyung Gyu, Youngwha Back, Hoseok Kim, Siwoo Lee
KIOM, South Korea

Oriental medicine put the priority to symptoms to take treatment for patients because it is known that health state are related with organ function and ordinary symptoms represent function of organ. We intended to find out the important factors which affects to healthy level among much symptoms. We recruited 296 people who were young of 20's, had no special diseases, similar circumstance, and interviewed. We used THI(Todai Health Index) questionnaire to know general health state, and inquired them 12 various question about 4 kind factors (Digestion, Sweat, Urine, Feces part) to know ordinary symptoms, which are importantly considered to relate with health state in oriental medicine. We statistically analyzed relation with coefficient of Pearson correlation. 1. The score of psychiatric health was higher than physical one. 2. Generally, total health state was more related with 'whether they digest well', 'good feeling after urination, and 'good feeling after defecation' rather than others. 3. Partially, the health state of 'Digestion' was more related with 'whether they digest well' rather than 'whether they have good appetite' in Digestion, and the health state of 'Oral-Anus', 'Life Irregular' were more related with 'good feeling after defecation' rather than other Feces factors (much, regular, thick or not) in Defecation. The health state are related with several symptoms, and those can be important factors for healthy life, so to judge the health state we must focus on the 'well digestion', 'good feeling after defecation and urination'.

DISCUS HERNIA TREATMENT BY LONG-LASTING ACUPUNCTURE AND SOFT LASER THERAPY

Gyöngyvér Karácsonyi

The study shows a 39-years old female patient with strong left-side dominating waist pain and serious limitation of motion. The lumbar-sacral backbone X-ray film and MR-analysis showed vaste protruding L-5 hernia which comprised the epidural space and both outgoing nerve roots. A neurosurgical operation was preregistered which was denied by the patient.

The prolonged acupunctural treatment combined with soft laser therapy has been started in accordance with the patient.

The filamen implantation has been repeated every 3 weeks accompanied by soft laser therapy every week. As a consequence of the comprehensive treatment pain and limitation of motion has significantly been decreased even after the first treatment. There were 7 filamen implantations applied during 5 months. The control MR-examination after 5 months shows almost total absorption of original large discus hernia.

TREATMENT BY LONG-LASTING FILAMEN IMPLANTATION IN AMYOTROPHIC LATERAL SCLEROSIS (ALS)

Gyöngyvér Karácsonyi

ALS is classified as systematic devastating motoneuron disease which usually leads to death within 3-5 years from diagnosis.

One female patient (DM, age 31) with ALS diagnosis since 2 years started to get acupunctural treatment 4,5 years ago. During this period she regularly gets filamen implantation treatment and her physical status has significantly improved. As a visible result of the long-lasting acupunctural treatment the muscle fibrillation can be hardly noticed, the muscle volume slightly increased, the strength of muscles has been expressively increased. The strong migrainous headache which was noticed prior to the treatment as a side symphome disappeared in 80-90%.

Beside the above female patient at this time there are 10 more patients with ALS diagnosis in my practice. As a general consequence of the treatment the muscle fibrillation which characterizes the disease has been decreased in all cases. In some cases the rapidly destroying status has slowed down and 3 patents showed significant improvement similar as DM.

ACUPUNCTURE ENHANCES SUPEROXIDE DISMUTASE (SOD) ACTIVITY IN THE SERUM OF RHEUMATOID ARTHRITIS PATIENTS

Seung-Tae Kim^{1,2}, Yun-Ju Kim³, Ji-Young Lee¹, Hyangsook Lee^{1,4}, Changshik Yin¹, Sun-Mi Cho⁵, Younbyoung Chae^{1,2}, Hyejung Lee^{1,2}, Hi-Joon Park^{1,2}

¹Acupuncture & Meridian Science Research Center; ²Department of Meridian & Acupoint, College of Korean Medicine, Kyung-Hee University, Seoul Republic of Korea; ³Korea Centers for Disease Control and Prevention, Seoul, Republic of Korea; ⁴College of Korean Medicine, Sangji University, Wonju, Republic of Korea; ⁵Department of Medical Research, Korea Institute of Oriental Medicine, Daejeon, Republic of Korea

Rheumatoid arthritis (RA) is a chronic autoimmune disease, principally characterized by synovial inflammation of the joints. Oxidative stress plays a major role in the pathogenesis of RA. Thus, we investigated whether acupuncture would elicit any changes in the levels of antioxidants, such as superoxide dismutase (SOD) and catalase, or the total antioxidant status (TAS) in the serum of RA patients. Twenty-one patients who met the American College of Rheumatology (ACR) criteria for RA underwent 14 sessions of partially individualized acupuncture treatment for 6 weeks. Changes in the activities of SOD and catalase, the TAS and the swollen joint counts were assessed at baseline and after 6 weeks of treatment. In results, acupuncture significantly increased the activities of SOD and catalase, but it did not have a significant effect on TAS. Moreover, acupuncture reduced the number of swollen joints and this reduction was associated with enhanced SOD activity. In conclusion, these findings indicate that acupuncture might relieve the symptoms of RA by modulating oxidative stress.

ACUPUNCTURE FOR PREMENSTRUAL SYNDROME: A SYSTEMATIC REVIEW OF RANDOMIZED CONTROLLED TRIALS

Song-Yi Kim, Younbyoung Chae, Hyejung Lee, Hi-Joon Park

Acupuncture and Meridian Science Research Center (AMSRC), Kyung Hee University, 1 Hoegi-dong, Dongdaemun-gu, Seoul, Republic of Korea

Objective: The aim of this systematic review is to summarize and critically evaluate the evidence for the effectiveness of the acupuncture on the premenstrual syndrome (PMS).

Methods: Systematic searches were conducted on 6 electronic databases and 3 relevant journals until December 2007. Hand searches included conference proceedings and our own files. There were no restrictions regarding the language of publication. Methodological quality was assessed using the Jadad score.

Results: Nine randomized clinical trials (RCTs) met our inclusion criteria. Two types of control procedures were used: invasive needle control (n=3) or medication (n=6). All RCTs suggested beneficial effects on the improvement of overall premenstrual symptoms compare with control group, whilst most trials suffered from methodological flaws such as inadequate study design, small sample size and poor reporting. Meta-analysis of 6 RCTs showed a significant effect of acupuncture compared with medication for PMS (3.27 of odd ratio, 95% CI [2.16, 4.96], P<0.00001)

Conclusion: There is some encouraging evidence suggesting that acupuncture may be effective for PMS. Overall methodological quality is, however, too low to draw any firm conclusions. A large well conducted RCT, which overcomes identified methodological problems in the existing RCTs, would be required to answer this question.

IS COMBINE THERAPY WITH ORIENTAL AND WESTERN MEDICINE MORE EFFECTIVE THAN WITH ORIENTAL MEDICINE ONLY? A CASE STUDY OF PATIENTS WITH SHOULDER PAIN

Won-Il Kim, Hee-Youn Lee

Dept. of Internal Medicine, College of Oriental Medicine Donggeui University

Objectives: Under the health care system in Korea, one of issues is whether combine therapy with traditional Korean medicine (TKM) and western medicine is more effective than TKM only. However, few studies were undertaken. The purpose of this study is to examine whether combine therapy with TKM and western medicine is more effective than that of TKM only to manage patients with shoulder pain.

Methods: The study protocol was approached by an ethic committee of the university of Busan, Korea. 49 patients with shoulder pain were participated in the clinical study, who visited two TKM clinics in a city. With informed written consent, the subject was allocated into two groups. Group A was treated with TKM therapy only and group B was managed with the combine therapy. All participants were requested to visit 3 times a week for 4 weeks. To evaluate the outcomes of each intervention of the subject, four measures were used: 'Subjective symptoms of shoulder pain', 'Indisposition index of every day life', 'Shoulder pain and disability index', 'Visual analog scale' .

Results: After 1,2 and 4 weeks of each treatment, the mean scores of the two groups at each stage in the four measures were significantly lower than those before treatment. The outcome of combine therapy was better than TKM only. However, there was no significant difference in therapeutic outcomes between two groups.

Discussion: The results of the study show a favorable answer to combine therapy. In further research, however, well-designed randomised controlled trials are required to inform the effectiveness of this intervention.

THERAPY FOR CHILDREN WITH ENURESIS NOCTURNA MEKOING USE OC ACUPUNCTURE AND COMPLETING BY CUPPING.

Ludmila Kohoutová

Ordinace Akupunktury, GP, Czech republic

In the poster, there is a file of the patients of age from five to seven years. Therapy and choice of acupuncture points and the method of treatment. In the photographs, there is the way of application, statistical survey, attitude to work with mother, teaching of massage and complement of entire individual attitude to the patient in the way of complementary oriental medicine. Children enuresis is a problem involving the whole family. Treatment by acupuncture is an alternative careful method for the children. In this article, there are described various methods using different acupuncture points, reflex massage, glass jars and psychotherapy. The methodology was invented during 20 years of work with children with this diagnosis.

When using acupuncture for the treatment of various illnesses we follow the recommended acupuncture points. I did not want to use acupuncture with children at first but parents often asked me about the choices of acupuncture. It was especially with the following diagnoses: polio, light cerebral dysfunction, skin allergy and bed-wetting. In 1985 I started to treat children since their infancy. In the given period, I treated 114 children (age 4-13) using acupuncture. 82 of them finished the therapy. I used various configurations of acupuncture points as well as various techniques: whole-body needle acupuncture, laser, electropuncture, auriculotherapy, glass jars, massages. During the years 1992-1994 I completed the course of hypnotherapy and psychotherapy. Psychotherapy is often used together with psychiatric drugs. Needle acupuncture was the most painful for children. During electrostimulation, the point used to cause cry and protests. The treated children started to be afraid of the therapy. After this experience I stopped using needles when treating children to eliminate stress. I tried to form the list of recommended acupuncture configurations (all of them were already published). Using whole-body acupuncture recommended points: Bachman: BI 62, BI 28, BI 23, BI 57, BI 25 Èu Lien: BI 23, BI 25, BI 31, BI 33, BI 24, BI 28, BI 32, BI 34 BI 26, GV 1, CV 4, Sp 6, Lr 1, St 36, GV 4 Rù%ièka: GV 19, Lr 1, GI 23 ,BI 25, BI 28, BI 62, St 36. CV4, CV6 Bare'ová : BI 28 ,Lr 1, Li 8, Li 9, Li 10 CV4, CV 6, GB 44 For ear acupuncture the sticking of magrein balls was used.

Results: I step by step changed the needles for glass jars and started to treat the points MM26....After that I explained mother how to massage the given part of the body (see the picture). I used glass jars once a week, mother gave a massage for ten minutes a day. According to the interview and diagnosis, for about 5% of cases hypnosis was used to explain the beginning and causes of problems. These sessions unblocked the children's mental blocks. The number of sessions: 5-7. Enuresis is not just a reflex neurological problem or a problem of mental state. The combination of acupuncture and massage based on acupuncture points (which guarantees close contact between mother and child) seems to be a successful alternative careful method.

Key words: enuresis, using glass jars, acupuncture and enuresis, the treatment of enuresis

MYOFASCIORELAXATING ACUPUNCTURE

Marina Kovalenko, N.A. Trofimenko

Leomil Bt., Budapest, Hungary

The unique method of treating myofascial pain was learnt from its Ukrainian inventor dr. Nikolay Aleksandrovich Trofimenko who owns patent in Ukraine. License for this patent was bought in 2005 and thousands of patients have been healed in Hungary, Greece and Seychelles since then by dr. Marina Kovalenko. Features of therapy: "Instant results right after the first treatment" "No side-effects" "Cures joint and skeletal problems with stimulating the surrounding muscles" "Stimulates directly through the neuro-fasciomuscular tissues" Indications: "Discus hernias" "Acute and chronic skeletal problems (Scoliosis, low back pain, neck-pain, hip and pelvic disorders, joint and limb problems, etc.)" "Headaches (incl. migraines)" "Myogelotic "knots" in muscles, fibromyalgic muscle pains" "After accidents (helps rapid healing of the broken bones and subluxated joints, connecting tissues)" "Preventing operations in several cases"

POSTURAL TREATMENT WITH ELECTROMAGNETIC WAVES

Zinaida Krasova

Research Institute in Acupuncture

Using Paul Nogier's embryological subdivisions of the ear, the author experimented various electromagnetic waves in the three areas of the auricle observing a prevalent response from the wave pair 4750/5890 angstrom for the ectodermic area, from the pair 6200/5120 for the mesoderm and from the pair 5510/4230 for the endodermic, with a

clearly stimulated action from waves higher than 5300 angstrom and dispersant and anti-inflammatory in those lower. A dysfunctional posture causes pain and is basically recognised by: -Dystonia: chronic state of anomalous and/or asymmetric muscular tension Imbalance of kinetic chains: hypo/hyper programming of synergic and antagonist muscular chains disharmony and/or dissymmetry in tension- muscular band length relation and in the joint equilibrium. The aim of the treatment, which applies from four to six times a week according to the case, is to reset a functional posture, to kill the pain. It is essentially based on: -Absence of abnormal, asymmetric and dysfunctional muscular tensions -Equilibrium of the kinetic chains: harmony and symmetry in the tension-muscular bands length and joint equilibrium.

ACUPOINTS IN THE ELECTROMAGNETIC BIOCOMMUNICATION OF LIVING SYSTEMS

Gábor Lednyiczky

Hippocampus Institutie Budapest, Hungary

Changes in the endogenous electromagnetic field of a biological system reflect/control the spatio-temporal changes in the charge distribution within such system, i.e. reflect/control the intrinsic dynamics of biochemical/physiological processes in the system. The correlation of different time scale processes occurring within a living system is possible owing to the fractal nature of the homeodynamics of such system. Fractal distribution of a complex and rich structure defined with a relatively small number of parameters is used for the analysis of electrodynamical properties of such fractal structures. The mentioned electrodynamical properties form the regulatory field of an organism. Efficiency of such regulatory field provides for the adaptation of an organism to the ever changing conditions of its environment, which adaptation is made possible owing to an information exchange within the organism itself and between the organism and its environment through the meridians and their projections onto the body surface (acupoints). The musical concepts of harmony, rhythm, counterpoint, and chords are discussed in the context of the field effects of the acupuncture points. The energetics, function and interrelationships between the acupoints on the basis of endogenous electromagnetic fields of living organisms are shown to provide for the regulation of the fractal-structured hierarchy of biochemical and physiological processes in such organisms.

PRELIMINARY AND EXPLORATORY STUDY ON SPECIFIC ADVERSE REACTIONS TO ACUPUNCTURE – A RANDOMIZED CONTROLLED TRIAL ON TIREDNESS, DROWSINESS AND DRIVING ABILITY AFTER TREATMENT

Shoko Masuyama¹, Hitoshi Yamashita¹, Tomonori Nakano², Sachiko Ohde³, Yasuharu Tokuda³, Tsuguya Fukui³

¹Morinomiya University of Medical Sciences, ²Shinjuku Vocational School of Acupuncture & Judo Therapy, ³St. Luke's International Hospital

Objective: To assess the influence of acupuncture on driving ability due to tiredness and drowsiness which are most common adverse reactions to electroacupuncture, and to detect placebo and nocebo effects in this treatment.

Design: Randomized, subject-blinded, parallel, and dummy-controlled trial

Methods: Twenty-four acupuncture-naive, driver-licensed and healthy adults were randomly allocated to either verum electroacupuncture (VEA) group or dummy electroacupuncture (DEA) group.

Interventions: In the VEA group, acupuncture needles were inserted to bilateral GB21, BL23, BL25, BL41, LI4, LI11, ST36 and SP6, and electroacupuncture stimulation (1Hz) was performed. In the DEA group, therapists pretended to insert the needle to the above same points by tapping the skin using guide tube without needle, and made the subjects hear only a ticktack sound (1Hz).

Outcome measures: Main outcome measures were visual analogue scale (VAS) of tiredness and drowsiness, and Driving Ability Score (DAS) using a driving simulator. Also, VAS on anxiety, nervousness, and comfortableness were evaluated. After the treatment, these outcome parameters in the two groups were compared.

Results: There were no significant between-group differences after the treatment. In the DEA group, some subjects reported feelings of heaviness in the neck and shoulders, lightness of the body, refreshingness in the eyes, and tiredness.

Conclusions: The results suggest that electroacupuncture does not frequently cause serious adverse reactions, and that published case reports on side effects associated with acupuncture actually include various effects of nocebo or placebo.

PSYCHOPUNCTURE – A HOLISTIC THERAPY FOR PSYCHOSOMATIC & PSYCHIATRIC DISORDERS

Iosif Mezei, Iosif-Dan Mezei

Medical Center Tongtian, Romania

Psychopuncture, is a concept of classically stimulating acupoints with needles and moxa, but in resonance with the Freudian Ego structures, having thus a powerful action at psychic level leading to a true catharsis phenomenon during the acupuncture session.

Despite the fact that acupuncture is done on the physical level, the effect is a harmonic one and brings into resonance deep psychic structures of the human personality.

It is an efficient method born from a specific synthesis of Freudian psychoanalysis, Chinese 5 Element theory and Ayurveda, the fatherhood and patent of which, belonging to the eminent professor Dr. Hallym Calehr MD.,Phd. who developed the BEST (Basic Emotional Structuring Test) method as fundamental principle of psychopuncture.

From the holistic point of view it takes into consideration 4 dimensions of the human person (the Spirit, the Soul, the Mental and the Body), leading to a complete energetical balance of the subject (right-left, front-back, up-down) according to his spiritual type.

A specific individual combination and number of acupoints is used, named "symphony" by the father of the method because like in a symphony the vibrations of each point will converge and tune the individual to a higher balance.

The authors present an example of a patient with panic attacks to outline the diagnostic method and technique.

ACUPUNCTURE AN EFFICIENT THERAPY IN LHD

Dorin Mindrescu

Primary Care Physician in Orthopedics- Traumatology "Filantropia" Hospital, Craiova

Introduction: Lumbar herniated disk is a disease which leads to invalidity and it is caused by the hernia of the nucleus pulposus of the intervertebral disk which generates a discoradicular conflict associated with lumbalgia and marked sciatalgia.

Etiopathogeny: From the TCM point of view, in LHD is produced an obstruction of the energetic meridians by Qi and blood stagnation, which appeared due to a trauma in the lumbar vertebral column.

The discoradicular conflict produces an oedema through arterial circulatory, venous and lymphatic stasis. The cessation of the Qi increases the muscular contraction and through this the compression made by the vertebrae on the herniated disk.

Material and Method: There has been made a complex treatment on 18 patients with LHD. From all these there were 10 men and 8 women. 5 patients had double hernia, 7 patients had hernia on L5-S1 and 6 patients had hernia on L4-L5.

There were used the following therapy methods:

- acupuncture
- infiltrations in the discoradicular conflict area
- anti-inflammatory, antialgic, miorelaxing, antidepressive treatment
- therapeutical massage
- kinetotherapy
- laseracupuncture.

Results and Discussions: The evolution of the patients under this complex individual treatment was favourable.

From the 18 patients who underwent a cure, 2 needed surgical treatment of the LHD ; in 10 patients the hyperalgetic syndrome decreased, the paresthesias disappeared but during the NMR checking, LHD was still present; yet, the oedema which produced in the disk hernia area disappeared. 6 patients had good results after the treatment and during the NMR checking they did not have LHD.

Conclusions: This non-surgical treatment in LHD represents a valid alternative to avoiding the surgical treatment of the disk prolapse. We should take into account the numerous cases of recurrence and negative evolution of the postoperative LHD.

Acupuncture together with kinetotherapy allow a faster social and professional integration and it also prevents from a LHD recurrence.

VIRAL HEPATITIS-AN INTEGRATIVE TREATMENT APPROACH

Mihela Orodan Leucian

Apimedica Arad, Romania

An inflammatory process in the liver characterized by diffuse or patchy hepatocellular necrosis affecting all acini. The viruses which affect the liver can be classified in 2 categories;

Specific viruses which affect especially the liver

Non specific or systemic where the inflammation of the liver is a part of a systemic disease.

A severe form of hepatitis is the cirrhosis-the final stage of a chronic hepatitis, which represents a sclerosis of the liver installed after the chronic inflammation, characterized by diffuse disorganization of normal hepatic structure with regenerative nodules that are surrounded by fibrotic tissue.

Hepatitis C is at the moment very extend in Romania and it is followed by hepatitis B. The big problem of hepatitis C is that very often the patients are asymptomatic and appear with cirrhosis after some years. Others show a lot of unspecific symptoms; anorexia, malaise, weight loss;

The allopathic treatment uses at this hour the therapy with INTERFERON which has a lot of negative effects, a lot of patients refuse the therapy due to these aspects;

GV14(DAZHUI)

GV13(TAODAO)

CAPSICUM FR fam. Solanaceae. Effects-expelling cold and dampness, removing blood stasis.

The patients received from the beginning a lot of preparations with regenerative effect of the liver; ayurvedic receipts, gemotherapy, all kinds of tea combinations, apy-products.

The particularity of treatment ;using the triangle needle with bleeding, application of Capsicum fr.

Conclusion: a combination of apiphytotherapy with acupuncture can induce good results in the evolution of a liver disease.

Keywords: alopathy, phytotherapy, tcm.gv14, gv13, seeds of capsicum fr., bleeding.

A RANDOMIZED CLINICAL TRIAL OF LOCAL ACUPOINTS COMPARED WITH DISTAL ACUPOINTS IN DEGENERATIVE OSTEOARTHRITIS ON KNEE

In-Shik Park, Hyuk Byun, Chan-Yung Jung, Kap-Sung Kim, Seung-Deok Lee

Department of Acupuncture & Moxibustion, College of Korean Medicine, Dongguk University

Background: Osteoarthritis is common chronic pain condition for which patients frequently use acupuncture. Local acupoint is point where pain exists, and distal acupoint is point far away from the pain area which is related by meridian

Objective: To compare the efficacy of local acupoint with distal acupuncture at relieving pain and improving function in knee osteoarthritis.

Design: A randomized, single-blinded, crossover clinical trial.

Setting: One outpatient clinic (department of acupuncture & moxibustion) located in academic teaching hospital, South Korea.

Patients: 17 patients with osteoarthritis of the knee (mean age 62.76[SD \pm 4.37] years).

Intervention: The trial had 4 stages: baseline (2 weeks), phase I and II (each 2 weeks), washout period (2 weeks). Patients were randomly assigned to either group A or group B. Group A received acupuncture at local acupoints during phase I, then acupuncture at distal acupoints in phase II. Group B received the treatments in reverse order. In each phase, the patients were treated with acupuncture for 6 times.

Measurements: The primary outcome was subjective pain as measured by a 100mm visual analogue scale (VAS) ranging from 0 (no pain) to 10 (worst pain ever). Secondary outcomes were changes in the Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) total and pain scores. Measurements were obtained at baseline, 1st day of phase I and II, and 2 days after last treatment of phase I and II.

Results: The 17 participants in 2 groups were well matched for age, sex, target knees, baseline VAS score, WOMAC pain score and WOMAC score. Participants in local acupoint group experienced greater improvement than distal acupoint group at 2 days after last treatment in WOMAC total score (mean difference, -10.65 [95% CI, -20.56 to -0.74] $P=0.036$) but not in VAS (mean difference, -12.41 [95% CI, -29.56 to 4.73] $P=0.15$) and WOMAC pain score (mean difference, -1.82 [95% CI, -3.98 to 0.33] $P=0.094$).

Conclusion: Local acupoints are more effective than distal acupoints at relieving pain and improving function in knee osteoarthritis.

Keywords: Osteoarthritis, knee, local acupoint, distal acupoint, randomized controlled trial.

SOCKS SYNDROME

Eva Pongo

Semmelweis Medical University, Hungary

A 45-year-old female patient came in to the ambulant treatment of TCM complaining of extreme sweating upon removing her socks. This phenomenon has been present since her birth. Upon examination of patient (interrogation, inspection, pulse- and tongue-diagnostics, touch) complex function disorders were recognized. I initiated acupuncture treatment and advised her to make changes in her lifestyle. I also applied movement- and respiratory therapies. In my presentation I will demonstrate the causes of this interesting case and the applied treatment. As a result of the treatment, in a matter of a month, the patient's symptoms receded drastically, certain physiological parameters (blood pressure, blood-sugar) normalized and her migraine ceased.

THE LITERARY STUDY ON THE CLINICAL SIGNIFICANCE OF STRING PULSE

Hyunhee Ryu, Jeon Lee, Youngju Jeon, Yujung Lee, Siwoo Lee, Jongyeol Kim
Korea Institute of Oriental Medicine

Background: Pulse diagnosis is one of the typical examination methods in traditional oriental medicine. Pulse type classification is a major element of this diagnosis. There are more than 20 pulse types which have each clinical significance. However, pulse type's indications are implicative and obscure. In this study, we reviewed string pulse which is often diagnosed in Traditional Korean Medicine by analysis of Traditional Oriental Medical Literatures and conventional medical papers.

Materials and Methods: We analyzed Traditional Oriental Medical Literatures related with pulse diagnosis, conventional medicine text book, and papers in physiology, circulation, etc.

Results: 1. String pulse is described as 'straight', 'difficulty in shift', 'long', 'similar to a music string'. 2. String pulse's indications are 'stagnation of liver qi', 'emotion disharmony', 'excessive rising of the liver-Yang', 'disharmony between the liver and the spleen', 'severe pains', 'malarial disorder'. 3. String pulse's indications are associated with 'blood vessel endothelial dysfunction', 'autonomic imbalance', 'arteriosclerosis'.

Conclusion: String pulse is taut and stiff pulse with high tension and low softness. It appears in 'blood vessel endothelial dysfunction', 'autonomic imbalance', 'arteriosclerosis'. Persistent string pulse can bring about cardiovascular or central nervous disease.

SIGNIFICANT FACTORS OF COLD AND HEAT SYNDROMES IN TRADITIONAL ORIENTAL MEDICINE

Hyunhee Ryu, Haejung Lee, Honggie Kim, Siwoo Lee, Jongyeol Kim
Korea Institute of Oriental Medicine

Introduction: Acupuncture and herbal treatment are based on differentiation of cold and heat syndromes in Traditional Korean Medicine. This differentiation is accomplished through Pulse, Tongue diagnosis and Interrogation, which are not objective. Quantification and objectification of this diagnosis process are required for efficacious treatment and Traditional Medicine development. In this study, we investigated and analyzed various Interrogation factors of cold and heat syndromes from patients who were examined by oriental medical doctor.

Subjects and Methods: Seventy four patients who visited Oriental Medical hospital were included in this study. Case report form was composed of many questions about patient's physical condition, which were derived from Traditional Oriental Medical Literature with Delphi Technique. Patients filled out CRF by themselves. Diagnosis of cold and heat syndromes got achieved separately by 3 oriental medical doctors with over 5 years' clinical experience.

Results: 1. Various physical condition factors were derived for differentiation of cold and heat syndrome. (Preference temperature, Body temperature, Pain type, Face color, Urine, stool and secretion features) 2. Each cold and heat syndrome factor group acquired internal consistency. (Crombach- α > 0.6) 3. There were significant associations between doctor's diagnosis and cold syndrome factors in 'Aversion to cold', 'Desire for heat', 'Pale face', 'Loose stools'. (p-value < 0.05) 4. There were significant associations between doctor's diagnosis and heat syndrome factors in 'Aversion to heat', 'Body feverishness', 'Thirst'. (p-value < 0.05)

Conclusion: The internal consistency results suggest that respective symptoms and signs relative to cold or heat syndrome are apt to appear together with. Besides, these can be indirect evidence that differentiation of cold and heat syndromes is valuable for comprehension about disease pattern. Moreover, respective factors of cold and heat syndromes showed different significance with doctor's diagnosis. Consequently these significant factors are more necessary for diagnosis of cold and heat syndromes.

ACUPUNCTURE TREATMENT IN MOEBIUS SYNDROME CONGENITAL FACIAL PALSY. ONE CASE EXPERIENCE, EXPECTATIONS FOR THE FUTURE

E. Segura, O. Parra, M. Calvo
Shui Roses Medical Centre of Acupuncture and Moxibustion

Background: Moebius syndrome is a congenital affectation of 6th and 7th cranial pair nerves, that produce inexpressive face and impossibility of smiling, often associated with other affectations of cranial pair nerves, musculoskeletal abnormalities with respiration and deglution difficulties.

Study targets: By means of embryological and TCM diagnosis, we expect an affectation overcoat of kidney's Jing, liver's Yin, Gu Qi by spleen's Qi, and Wei Qi by lung's phlegm, through mesoderm and ectoderm malformations.

Patients and Methods: One female patient of 39 years old was treated with just 10 sessions of acupuncture for 10 weeks. We worked the points to tonic deficient organs, and facial acupuncture points like in peripheral facial palsy.

Results: From the 4th session the patient began to move the orbicular mouth muscle, and after the 10 sessions moved the buccinators muscles, the angle depressor mouth muscle and her face expression changed.

Conclusions: The acupuncture can be the key to change their psychosocial development through improvement of facial expression. Slower than surgical operations, but avoiding traumatic experiences for the children, and this is just the beginning. A more long time treatment with acupuncture could make obtain much more benefits to improve their life.

ACUPUNCTURE TREATMENT EFFECT ON THE OXIDATIVE STRESS

R.C. Silva Filho, M.M. Sampaio, R. Cecilio

Brazilian School of Chinese Medicine (EBRAMEC) - FMU University

Introduction: One of the mechanisms related to disorders in the body is the action of free radicals (FR), which are constantly produced. They are fought by antioxidants, acquired mainly through food and endogenous synthesis. When the production of FR is greater than the capacity of the antioxidants the result is oxidative stress and, consequently occur cell death, loss of proteins, changes in the genes, general disorder, disease and aging.

Objective: Verify if acupuncture can reduce the oxidative stress, providing improvement in quality of life.

Method: 31 volunteers were randomly assigned to 3 groups. Group I: real treatment group with body (ST36, SP6, KI3, LV3 and Yintang) and ear acupoints (endocrine, subcortex, Lung, Kidney, Liver Shenmen, Ear apex). Group II: Sham treatment group with points away from the real acupoints in the body and ear. Group III: control group. All volunteers had their blood samples collected in four moments, before the treatment each week, where group I and II received acupuncture twice a week and group III just came for the blood to be collected. Oxidative stress was assessed by determining the MDA (product of oxidation of lipids), whose technique was described by Satoh, et al. (1979), and nitric oxide, the main kind of reactive nitrogen, through the technique described by Ding, et al. (1988).

Results: There was a very significant improvement in Group I both in reducing lipid peroxidation as nitric oxide. In Group II there was also an improvement, but not significant as in Group I. In the control group, all samples showed the same level without improvements or worsening.

Conclusion: We observed a great improvement in the Group I in a way it was possible to conclude that acupuncture can really interfere positively in oxidative stress. But further studies should be conducted with better method and larger samples.

EVALUATION OF THE ANALGESIC EFFECTS OF A SINGLE POINT INPATIENTS UNDER ADJUSTMENTS OF FIXED ORTHODONTIC APPARATUS

R.C. Silva Filho, A.F. Sacoman, G.C. Sales

Brazilian School of Chinese Medicine (EBRAMEC)

Introduction: Pain is characterized as an organic stimulation of reply of the organism, due to the alterations that harm its full functioning. Beyond the conventional methods, acupuncture appears in dentistry as efficient alternative method and with good results in many alterations of the estomatognathic system.

Objective: Evaluate the analgesic effect of acupuncture, in patients using fixed orthodontic apparatus (FOA) submitted to habitual adjustments.

Method: 150 patients were randomly divided in two groups. For the treatment group (82) LI4 (Hegu) was stimulated bilaterally fixing intradermal needles for 3 days, and the for the control group (68) only a small piece of tape was fixed on the same points, also for 3 days always following the adjustment of the FOA. The intensity of pain was assessed through a visual analog scale (VAS) for pain from 0 (no pain) to 10 (unbearable pain).

Results: In the treatment group 69 (84%) patients presented more than 50% of pain relief, including 43 (52%) with total reduction of pain. In the control group only 24 (36%) patients presented more than 50% of pain relief, with 25 patients (37%) with no improvement.

Conclusion: Based on our findings we concluded that acupuncture can be a very important tool for professionals leading with patients with FOA post adjustment pain.

WRIST-ANKLE ACUPUNCTURE ON LOW BACK PAIN

R.C. Silva Filho, R.A. Balthazar

Brazilian School of Chinese Medicine (EBRAMEC)

Introduction: Low back pain affects around 60-80% of the population during their lives, so it is a very important public health problem and acupuncture has been used in this condition for a long time. Wrist-Ankle Acupuncture (WAA) is a recent technique in the history of China, being indicated to the treatment of problems a long specific lines in the body.

Objective: Verify the analgesic effects of WAA on low-back pain. **METHOD:** 05 patients, from 32 to 72 years of age with low-back pain for about 07 days were selected. Based on WAA vertical lines 1 or 2 points were selected on the ankle during 4 treatments. The pain was assessed through a visual analog scale (VAS) for pain from 0 (no pain) to 10 (unbearable pain).

Results: All the patients presented an important reduction on the intensity of pain. The average pain score before the treatments was 6,6 and the average of pain after 4 treatments as 1,2. 2 patients presented no pain at all after the treatments.

Conclusion: WAA technique presents itself as an excellent therapeutic method for pain relief. Further research with better and larger studies, using a more rigorous method are necessary to determine the effectiveness of this technique.

ACUPUNCTURE EFFECTS ON LOCALIZED EDEMA IN BECKWITH-WIEDEMANN SYNDROME PATIENT

R.C. Silva Filho, T.M. Carvalho

Brazilian School of Chinese Medicine (EBRAMEC)

Introduction: Beckwith-Wiedemann syndrome (BWS) is a genetic syndrome, characterized by body overgrowth, omphalocele, macroglossia, hypoglycemia and other physical characteristics. Acupuncture is an important technique to improve the quality of life and can also help some of the day-by-day difficulties faced by BWS patients.

Objective: Evaluate the effects of acupuncture in a BWS patient with a localized edema at the epigastric region.

Method: Due to BWS low incidence, this is only a case study project. So, one female 23 year old BWS patient was selected for this study. The patient was treated twice a week for a period of 02 months. Five local points were selected, followed by acupuncture at K3 (Taixi), CV9 (Shuifen) and SP9 (Yinlinquan). The evaluation of the edema was conducted after every treatment through the measuring of the epigastric circumference.

Results: The patient presented a 05cm decreasing in the epigastric circumference, presenting an average of 86cm before the whole treatment and ending with a final 81cm. Besides the decreasing of the edema, the patient stated, spontaneously, improvement on the quality of life and also that she was feeling more "energized".

Conclusion: This study has shown that acupuncture can be an efficient technique for decreasing of localized edema. However, better studies with more rigorous scientific methods, mainly randomized clinical trials, should be conducted to qualify and quantify the therapeutic results that acupuncture can achieve in localized edemas.

ACUPUNCTURE IN EUROPEAN HEALTH SERVICES

Oswaldo Sponzilli

San Pietro Fatebenefratelli Hospital, Rome, Italy

The poster summarizes the status of acupuncture in European health services based on a survey carried out among members of ICMART. The questions to which the representatives from various nations responded were the following: Are there any statistics of how many people have acupuncture per year. Approximately, how many doctors are practising acupuncture. Can anyone without a medical degree perform acupuncture. If yes, what educational background is needed to perform acupuncture. What is the view of the medical establishment on acupuncture. Is acupuncture generally accepted or is viewed with scepticism by academic medicine. Is acupuncture taught by institutions (Universities, Medical Schools, Clinics, Hospitals, etc.). If yes, are there any postgraduate schools, advanced seminars, master programs, etc. If the aforementioned courses exist, how long do they take. Is acupuncture covered by any kind of insurance? By the public health system for example. If yes, how is it handled. The patient pays nothing to the doctor who receives his fee or salary from institutions. The patient pays and is then reimbursed. Does private insurance cover acupuncture. Is the expense for acupuncture taxed.

CLINICAL APPLICATION OF ROUND SHARP NEEDLE IN MYOFASCIAL PAIN SYNDROME

Mao-Feng Sun

Division of Acupuncture-Moxibustion and Traumatology, Center for Traditional Chinese Medicine, Chang Gung Memorial Hospital

Myofascial pain syndrome (MPS) is featured with the existence of trigger point and taut band in soft tissues. Soft tissue damage related to acute or chronic trauma, poor posture, and psychogenic factors leads to protective or reflexive muscle contraction in certain muscles, and thereby induces the formation of trigger point and taut band in the affected muscles. Pain and over contraction of muscles further induces a vicious circle with autonomic dysfunction and persistent myofascial pain. Round sharp needle is one of the nine types of needle recorded in Yellow Emperor's Internal Classic. The ancient indication of round sharp needling was acute impediment syndrome characterized by myofascial pain. The sharp tip and round body of round sharp needle makes it easy to penetrate soft tissue but minimize tissue damage at the same time. Therefore, round sharp needle could be inserted into the deep soft tissue and work as both detector of trigger points and treatment tool to break the vicious cycles in myofascial pain syndrome. In practice, round sharp needle is inserted into affected muscle along the longitudinal axis of taut band. The directions

and depth of the needle tip is adjusted dynamically to detect the trigger point. With one hand holding and inserting the needle, the other hand touches local skin, and reports the location of needle tip in the muscle and senses the response of soft tissue. When the trigger point is stimulated by needling, twitching of the muscle fiber could be observed. With repeated stimulation until the twitching of muscle subsided, the trigger point and taut band will be eliminated, and so will the painful sensation and myofascial pain syndrome related autonomic phenomena.

Key word: round sharp needle, nine needle, Yellow Emperor's Internal Classic, myofascial pain syndrome, trigger point, taut band.

THE ROLE OF AURICULAR THERAPY IN CRISIS INTERVENTION

István Széchenyi

Széchenyi Health Centre, Hungary

Data and Experience of 16 Years I have been a practicing auricular therapist for 16 years, also a tutor and lecturer of the field: I teach auricular addictology for medical staff, doctors and natural healers. Over the past 16 years I have constantly used as cross-reference my students' own experience when teaching and also when dealing with patients with the aim of demonstrating and emphasising the importance of crisis intervention. Everyone, any time can get into a crisis situation when she or he needs instant help. As international data and studies prove, as well as everyday practice shows, auricular therapy can be an effective and instant help when massive catastrophies, tragedies and disasters occur.

SHUSHU THEORY OF TRADITIONAL CHINESE ACUPUNCTURE

Xin-Ming Wu

China Academy of Chinese Medical Sciences

Zangxiang--Jingluo in the Canon of Internal Medicine is regarded as the core theory of TCM which is including the acupuncture. Zangxiang is based on the five phases theory and was greatly influenced by its framework, so does the Jingluo theory. A medicine history research shows that traditional Chinese acupuncture theory development followed the principles of Shushu structure. Yingyang and five phases were used as the Shushu methods to make judgments and decisions in the TCM historical practices. Yinyang, Wuxing, Liulv, Jiugong Bafeng, Yunqi Ganzhi are the main Shushu categories in the Canon of Internal Medicine. This article discusses about the main contents of these concepts and the some differences between them. It shows that the Shushu theory is the foundation of the traditional Chinese acupuncture.

EFFECT OF ELECTROACUPUNCTURE ON GASTRIC MUCOSAL INTESTINAL TREFOIL FACTOR GENE EXPRESSION OF STRESS-INDUCED GASTRIC MUCOSAL INJURY IN RATS

Jie Yan, Xi-Ping Li, Shou-Xiang Yi, Xiao-Rong Chang, Ya-Ping Lin, Zong-Bao Yang, Ai Huang, Rong Hu
Hunan University of Traditional Chinese Medicine

Aim: To investigate electroacupuncture(EA) at the acupoints of Stomach Meridian of Foot-Yangming (SMFY), Gallbladder Meridian of Foot-Yangming (SMFY) on gastric mucosal intestinal trefoil factor (ITF) gene expression detection in stress-induced rats with gastric mucosal lesion, and to explore the regulatory mechanism and signify cance of EA-related gastric mucosal protective effect.

Methods: Forty rats were randomly divided into 4 groups: Blank group, Model group, Model group $\frac{3}{4}$ A at acupoints of SMFY group("SMFY group"), and Model group $\frac{3}{4}$ A at acupoints of GMFY group(GMFY group). All rats (except blank group) were made model by water immersion and restraint stress (WRS). Then the gastric mucosa tissue in each rat was taken off after assessment of gastric mucosal lesion index(GUI), and the expression of ITF mRNA of the tissues was detected by reverse transcription-polymerase chain reaction(RT-PCR) method.

Results: Compared with Model group(54.3 ± 1.34), the GUI value in SMFY group (31 ± 2.21) decreased significantly($P < 0.01$), so did that in GMFY group (39.8 ± 1.62 , $P < 0.05$), meanwhile GUI value in SMFY group was significantly lower than in GMFY group($P < 0.01$). Compared with Model group (0.65 ± 0.01), EA had a tendency to improve the expression of gastric mucosal ITFmRNA gene: such tendency existed in GMFY group (0.66 ± 0.01) but with no signfi - cant difference($P > 0.05$), in SMFY group(0.76 ± 0.01) with an extremely obvious difference ($P < 0.01$), furthermore the expression in SMFY group was significantly higher than in GMFY group ($P < 0.01$).

Conclusion: The gastric mucosal protective effect by EA at the acupoints of SMFY and GMFY was related to the expression variance of ITF, indicating certain meridian specificity exists. It could be one proof for the TCM theory "Relative particularity between SMFY and stomach". © 2006 The WJG Press. All rights reserved.

Key words: EA Relative particularity between Stomach Meridian of Foot-Yangming Gastric mucosal damage Stress Intestinal trefoil factor Gene expression

THERMAL CHARACTERISTICS OF MOXIBUSTION AS A FUNCTION OF AIR FLOW

Seung-Ho Yi, Hye-Jung Lee, Hi-Joon Park

In traditional Chinese medicine, moxibustion is one of main therapeutic tools by delivering heat to specific areas like meridian points. Heat stimulation by a moxa could be achieved by controlling the physical dimension of the moxa such as mass, shape and density. It also depends on the existence of buffer layers such as ginger and air. A chemical property of moxa itself is alleged to relate the efficacy of moxibustion.

In order to be effective, the dynamics of moxibustion varies with symptoms.

Practically, controlling temperature or heat amount of moxibustion as a function of time is not easy in hospital, which might cause inconsistency of moxibustion treatment.

In this study, we measured temperature variation of moxibustion with various air flow. Our data showed that maximum temperature obtained from each moxibustion was increased with the flow. But there was a local maximum of the temperature at a certain air flow, meaning that the maximum temperature and air flow was not linearly related. Duration time of moxibustion also demonstrated similar trends.

Our study emphasized that air flow is one of the essential parameters to control temperature of moxibustion and, in turn, to make moxibustion effective.

This work was supported by the Korea Science and Engineering Foundation (KOSEF) grant funded by the Korea government (MEST) (R11-2005-014).

EFFECT AND MECHANISM OF MOXIBUSTION ON ACUPOINTS ZUSANLI (ST 36) AND LIANGMEN (ST 21) IN THE PREVENTION AND TREATMENT OF STRESS ULCER

Shou-Xiang Yi, Yan Peng, Xiao-Rong Chang, Na Peng, Jie Yan, Ya-Ping Lin
Hunan University of Traditional Chinese Medicine, Changsha China

Objective: To observe the effect of moxibustion on acupoints Zusanli (ST 36) and Liangmen (ST 31) on cell proliferation and cell apoptosis of gastric mucosa in rats with stress ulcer, investigate the mechanism of moxibustion in promoting the repair of gastric mucosal injury at cellular and molecular levels.

Methods: Sixty healthy Sprague-Dawley rats were randomly divided into four groups: the restraint control group, model group, moxibustion on acupoints group and moxibustion on non-acupoints group. Water immersion and restraint stress (WRS) was used to copy the stress ulcer model of rats, radio-immunoassay was used to detect the content of transforming growth factor (TGF- \pm), and S-P immunohistochemical assay was adopted to determine the HSP70 expression, the proliferating cell nuclear antigen (PCNA) and cell apoptosis index in gastric mucosa.

Results: For the WRS-induced gastric ulcer model of rat, the gastric mucosal injury (gastric ulcer index, UI) was increased, the content of TGF- \pm was decreased, PCNA was also decreased, HSP70 expression and cell apoptosis index were all increased ($P < 0.01$). Moxibustion on acupoints Zusanli (ST 36) and Liangmen (ST 31) could decrease UI, increase the content of TGF- \pm , promote the expression of PCNA and HSP70, decrease cell apoptosis index in gastric mucosa, with significant differences when compared with the model group and control group ($P < 0.01$).

Conclusions: Moxibustion on acupoints Zusanli (ST 36) and Liangmen (ST 31) had protective effect on the gastric mucosa of stress ulcer, its mechanism may be promoting the TGF- \pm synthesis, stimulating cell proliferation in gastric mucosa and inhibiting cell apoptosis in gastric mucosa, and this process is related to the moxibustion-induced HSP70 expression.

Key Words: Moxibustion Therapy Stress Ulcer HSP70 Cell Apoptosis

THE EFFECT OF INTRADERMAL ACUPUNCTURE ON THE SPOTS OF AURICULAR FOR HEADACHE

Hyun-Min Yoon, Won-Il Kim, Young-Soon Lee

Dept. of Acupuncture, College of Oriental Medicine, Dong-Eui University

Purpose: This study was performed to verify the effect of Intradermal Acupuncture on the spots of auricular for nurses headache.

Method: The subjects investigated for this study were forty female nurses (the 20 subjects belong to experimental group and the remaining 20 subjects belong to control group) who are employed at a university hospital. The experimental group (N=20) underwent Intradermal Acupuncture on the spots of auricular and the control group (N=20) underwent no treatment.

Result: The headache of experimental group who underwent Intradermal Acupuncture on the spots of auricular decreased much more than in those of control group who didn't undergo Intradermal Acupuncture on the spots of auricular.

Conclusion: Accounting from the research, it was proved that the Intradermal Acupuncture on the spots of auricular is very effective for headache.

STUDY ON ANTI-ALLERGIC EFFECTS OF GANODERMA LUCIDUM PHARMACOPUNCTURE AND GANODERMA LUCIDUM EXTRACT

Hyun-Min Yoon, Won-Il Kim, Kyung-Hwa Kang

Dept. of Acupuncture, College of Oriental Medicine, Dong-Eui University

Objectives: We studied on anti-allergic effects of Ganoderma lucidum herbal acupuncture(GHA) and Ganoderma lucidum extract(GE).

Methods: In vivo, Animals were herbal-acupunctured GHA at both B13s three times for 5 days. Then, we investigated compound 48/80-induced active systemic anaphylactic shock using ICR mice and anti-DNP IgE-induced passive cutaneous anaphylaxis using Sprague Dawley rat. In vitro, we measured cell viability, b-hexosaminidase release, IL-4 and TNF- α from RBL-2H3 cells, and nitric oxide from Raw264.7 cell after treatment of GE of various concentrations.

Results: In vivo, GHA pretreatments at both B13s inhibited compound 48/80-induced active systemic anaphylactic shock. Passive cutaneous anaphylaxis were inhibited by GHA10 and OP. In vitro, 0.1 ~ 2% GE treatments were not affect on cell viability and inhibited b-hexosaminidase release, IL-4, TNF- α and nitric oxide.

Conclusions: These results suggest that GHA and GE may be beneficial in the inhibition of allergic inflammatory response.

ACUPUNCTURE ATTENUATE WITHDRAWAL SYMPTOMS AND AUTONOMIC RESPONSES TO SMOKING-RELATED VISUAL CUES

Chae Younbyoung¹, Jong-Woo Kim², Hi-Joon Park¹, O-Seok Kang¹, Song-Yi Kim¹, Hwa-Jin Lee¹, Chang-Sik Yin¹, Hyejung Lee^{1*}

¹Dept Meridian and Acupuncture point, College of Oriental Medicine, Kyung Hee University, 1 Hoegi-dong, Dongdaemun-gu, Seoul, Republic of Korea; ²Dept Oriental Neuropsychiatry, Kyung Hee University East-West Neo Medical Center, Seoul, Republic of Korea

In smokers, smoking-associated cues produce smoking urges and cravings, which are accompanied by autonomic dysfunction in response to these cues. We investigated whether acupuncture ameliorated cigarette withdrawal symptoms, and attenuated the autonomic responses to smoking-related visual cues in smokers, using a power spectrum analysis of heart rate variability (HRV). Fifteen subjects were treated real acupuncture (RA) at HT7 and 14 subjects received with sham acupuncture (SA) at LI10 using the Park Sham Device. The cigarette withdrawal scale (CWS) was measured on the 3rd day after quitting smoking. The low frequency/high frequency (LF/HF) ratio of the HRV was compared between the RA and SA groups during the distraction task using neutral or smoking visual cues. The CWS of the RA group was significantly lower than that of the SA group. The increase in the LF/HF ratio of HRV induced by the smoking-related visual cues was significantly lower in the RA group, as compared to the SA group. Acupuncture not only ameliorated cigarette withdrawal, but also attenuated the autonomic responses to smoking cues during withdrawal. These findings suggest that acupuncture might help in smoking cessation by attenuating withdrawal symptoms and smoking cues-induced autonomic responses.

Keywords: Acupuncture, Addiction, Withdrawal, Autonomic, Visual Cues