

WFAS 2019

INTERNATIONAL CONSENSUS ON
ACUPUNCTURE AND COMPLEMENTARY MEDICINE

International Symposium on Acupuncture – Moxibustion

14 - 17 November, 2019 Kaya Palazzo Hotel, Belek - Antalya / Turkey



WFAS 2019 ABSTRACT BOOK

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ORAL PRESENTATIONS



Current Opportunities and Challenges of Development of Acupuncture Studies

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Abstract: Globally application of acupuncture greatly promotes the development of acupuncture studies. During last decade, more and more studies on acupuncture and moxibustion were published and many new methods of needling emerged. However, unprecedented confusion about acupuncture theory also appeared. On one hand, we acquired high quality clinic evidences of acupuncture. For example, studies show acupuncture is effective for the treatment of chronic pain. For women with stress urinary incontinence, electro-acupuncture can inhibit urinary leakage. Acupuncture can ameliorate severe chronic functional constipation and regulate the endocrine system to treat gynecologic disease such as polycystic ovary syndrome. However, some challenges are also proposed. For example, in some studies, sham and placebo acupuncture was proved effective, raising questions about traditional acupuncture theory, including the existence of meridian and the location of acupoints.

Acupuncture is an example of somatomedicine, which can regulate the nerve-endocrine-immune system to treat disease with no side effect, attracting more people to accept acupuncture treatment. Moreover, inspired by the effects of acupuncture and stimulating vagus nerve, the National Institute of Health of American proposed SPARC project. This project aimed to stimulating peripheral activity to relieve conditions (SPARC), shedding light on the development of acupuncture.



Standardized Research Mode of TCM Technology

Yang Jinsheng

Standards and specifications are collectively called standards. There are international standards, professional standards, and company standards. National standards shall be classified into mandatory standards and voluntary standards. In the field of medicine and health in China, some normative documents that involve technical provisions and compulsory are uniformly named as "technical specification" to distinguish them from voluntary standards. Such as "Medical Device Registration Product Standards", "Standardized Manipulations of Acupuncture and Moxibustion" and so on.

Traditional Chinese medicine technology is the characteristic and advantage of Traditional Chinese Medicine. Such as acupuncture, moxibustion, Guasha, Baguan, Tuina, Bian-stone Therapy, Patching, Warming and Ironing Therapy, Medicated Bath and so on. It involves terminology specification, technical operation specification, appliance specification, etc. According to the elements of standard setting, basic experimental research and clinical verification will be carried out centering on the key technical indicators that affect the efficacy of the technology, so as to solve practical problems in operation and realize the standardization and scientification of the technical standards.

"Guasha", for example, our research team has issued a medical, health care, profession, instruments and so on, 5 standards in total, build the multi-level Guasha technical standard system. The scrapping terms were standardized by us, we also established the system of Guasha tools, media, operating positions and Guasha orders, directions, time and strength level. Meanwhile, we specified the methods for Guasha head, neck, shoulder, back, waist, chest, abdomen and limbs, including the light, heavy, fast, slow, vibrating, combing, rotating, point pressing, massaging and so on (29 kinds of manipulations in total), scope of application and contraindications of Guasha are also declared. Centering on the formulation of the standard, this paper innovatively solved the three key indexes including the relationship between Guasha and meridian points, acturc discasc or not, and the interval, and puts forward the academic view of "Guasha Therapy Along Meridian", enhanced the guiding role of TCM meridian theory on Guasha. To carry out the research on the rule of Guasha peripheral effects, observe the expression changes of skin morphology, the volume of blood flow and active substances after Guasha in rats, rabbits and human bodies, reveal the material basis of "Guasha", determine the extent and safety of Guasha, and formulate the standards guided by science and technology. Clinical research was carried out on the key indicators such as along the channels, acturc discasc and interval in the formulation of the standard, and the suitable symptoms such as lumbago, hypertension and acne were selected. Through the verification of the instant effect and long-term effect of Guasha, and the comparison of the curative effect of scrapping and acupuncture, the practicability and scientificity of the objective evaluation standard were demonstrated.

The research on the standard specification of Guasha has established a new mode of

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transformation of TCM technology and professional skills, and become a classic example of standardization research of TCM technology.



The Advantages of Laser Acupuncture in Obesity Therapy

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Objective: A previous study has shown that laser acupuncture is a useful healing method for the treatment of visceral postmenopausal obesity in combination with a low-calorie diet. However, unrealistic expectations regarding weight loss frequently result in a failure to manage weight. In our previous study, laser acupuncture has been found to exert a therapeutic effect on simple obesity by reducing both body weight and body mass index with a non-restrictive diet protocol. I investigated the advantages of laser acupuncture in obesity therapy.

Material and method: Each patient was treated three times per week with a gallium aluminum arsenide Handylaser Trion (maximal power, 150 mW; wavelength, 810 nm; area of probe, 0.03 cm²; power density, 5 W/cm²; pulsed wave at Bahr frequencies) (RJ-Laser, Reimers & Janssen GmbH, Germany). The instrument was used to deliver 0.375 J of energy to each of the following points sequentially: Stomach, Hunger, ST25, ST28, ST40, SP15, and CV9. The laser was applied to each point for 5 s. Women were maintained on a normal diet and were recommended to achieve a daily energy intake calculated by the following formula: (height in cm – 70) × 0.6 × 30 kcal. The recommended daily energy intake for men was calculated as follows: (height in cm – 80) × 0.7 × 30 kcal.

Results: The mean percent reductions in body weight and body mass index were both 3.8% after four weeks of treatment. The reduction in waistline was 1 to 3.5 in.

Conclusion: Laser acupuncture integrates the positive effects of acupuncture and low level lasers. In the hands of an experienced physician, laser acupuncture can be useful in controlling obesity. Furthermore, patients demonstrate good compliance with this comfortable and non-restrictive diet protocol. In conclusion, laser acupuncture has the advantage of being noninvasive, aseptic, painless, safe and effective in obesity therapy.

Keywords: Laser Acupuncture; Simple Obesity; Traditional Chinese Medicine



The Effectiveness of Laser Acupuncture in Treatment of Children with Attention Deficit Hyperactivity Disorder (ADHD): A Case Study

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Abstract

Attention deficit hyperactivity disorder (ADHD) is one of the most common psychiatric disorders in children aged 3-9 years characterized by inattention, hyperactivity, and impulsivity that would lead to irreparable complications, if the appropriate, on time, and early treatment is not done.

The aim of this study is to evaluate the effectiveness of laser acupuncture in the treatment of children with ADHD. Nowadays the Complementary and Alternative Medicine (CAM) has widely used as an alternative to conventional medicine, especially for developmental and behavioral disorders. This case study was conducted on four children with an average age of 6 years referred to our acupuncture clinic in 2017. Their symptoms were evaluated based on an interrogation with their parents. After obtaining the required information, they were treated with laser acupuncture and seed therapy. The relevant acupuncture points were stimulated with low-level lasers. The results showed that laser acupuncture has a relatively good clinical effectiveness in the treatment of ADHD patients. Laser acupuncture indicated positive results in normalizing sleep, alleviating ADHD-associated symptoms, and improving the quality of life for affected children.

Key words: Attention Deficit Hyperactivity Disorder (ADHD), Children, Laser Acupuncture, Seed Therapy.

Introduction

Attention Deficit Hyperactivity Disorder (ADHD) is one of the most common psychiatric disorders among children and adolescents [9-22], characterized by a persistent pattern of inattention and/or hyperactivity-impulsivity [5] that impairs the patient's daily functioning or development. Generally, all children may display signs of distractibility and destructiveness, but a child diagnosed with ADHD will display such behaviors more frequently and persistently than a child at the same developmental level [4].

ADHD symptoms usually appear before the age of 7, but change over time as a person ages.



In recent decades, ADHD has increased among children, adolescents, and adults. The percentage of children diagnosed with ADHD increased in the United States from 7.8% in 2003 to 9.5% 2007 and to 11.0% in 2011-12 [23]. A community-based study conducted on 1077 children in elementary school level, Regensburg, Germany reported a prevalence rate of 17.8% for ADHD [1]. According to a study conducted on preschool children in Iran (2007), the prevalence of ADHD is 12.3% (95% CI: 10.3-14.2%) [7].

According to the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) published by the American Psychiatric Association, ADHD is one of the most common neurobehavioral disorders among children [10]. This disorder is classified into three categories based on the DSM-IV: Predominantly Hyperactive-Impulsive type (ADHD-H), Predominantly Inattentive type (ADHD-I), and Combined type (ADHD-C) [6].

The ADHD-I type is primarily characterized by inattentive behaviors or a deficit of sustained attention, organizational problems, and poor concentration, although hyperactive/impulsive behaviors are not still present. In contrast, the ADHD-H type is characterized by persistent hyperactivity and impulsive behaviors, constant movement, and disruption. Typically, patients with this type of ADHD don't have much trouble with inattention. Patients with ADHD-C do not display any discrete tendency towards either type, but their behaviors are associated with both hyperactivity/impulsivity *and* inattention.

Studies conducted on ADHD indicate that boys are more likely than girls to develop ADHD, with male to female ratios ranging from 3:1 to 9:1 [10-18-20]. ADHD symptoms persist into adulthood in about 30-70% of affected children (National Institute of Mental Health, 2008). This disorder affects various aspects of children's social, emotional, and cognitive life. If ADHD is not treated in adolescents and adults, it can affect social relationships and may lead to poor job performance and academic difficulties.

Adults with persisting ADHD symptoms have an increased risk for substance abuse and potential violation of laws. According to the World Health Organization, ADHD is characterized by abnormal levels of inattention, over-activity, and restlessness that is persistent over time and pervasive across situations. These characteristics do not occur against a background of emotional disturbances or autism, and can be easily identified.

Potential Causes of ADHD

The exact etiology of this disorder is unclear, but studies have shown that genetics is the main cause of ADHD disorder; however, environmental, psychological, social, biological and nutritional factors, such as exposure to pesticides and heavy metals, different types of allergens, emotional stress, smoking during pregnancy, and low birth weight can be considered potential causes of ADHD.

The most common symptoms of ADHD are as follows: inattention, hyperactivity/restlessness, impulsivity, irritability, distractibility, emotional disturbances, sleep disorders, and socially inappropriate behaviors.



These children do not obey their parents, act impulsively, do not perform their homework properly at school and need more attention from parents and teachers. Boys with ADHD tend to exhibit more obvious signs of ADHD. It is typically manifested in girls as inattentiveness, and in boys as hyperactivity.

In complementary medicine, laser acupuncture is an effective, relatively simple, inexpensive, and safe method with no side effects. What distinguishes laser acupuncture from other methods is that it is painless and highly effective.

Due to the children's fear of needles, laser acupuncture can be a great complementary method for ADHD treatment. Different types of acupuncture, including laser acupuncture, electro-acupuncture, and auriculotherapy are widely used to treat this disorder.

Materials and Methods

This qualitative case study was conducted on four ADHD children with an average age of 6 years referring to our acupuncture clinic in Tehran, Iran, 2017. Necessary information was obtained through an interrogation with their parents.

It did not matter whichever intervention (i.e. pharmacological, psychosocial therapy, etc.) was used, if there were not any improvement of ADHD symptoms for the past 2 weeks. Seed therapy and laser acupuncture were applied using a LaserPen with a power of 200 mW (808nm, infrared), frequency of 9592 Hz, and vertical angle of radiation (Dosage:2 Jule). This protocol requires the use of the VAS, the pulse quality first discovered by Paul Nogier in 1966. The VAS is a method used for identifying “reactive” auricular points which shows a dysfunction of the body.

The patients were treated lying down (supine position), not seated. The acupuncturist took the radial pulse of the patient's left hand with his left hand and then, auricular and acupuncture points were scanned by the laser device. Each point with the VAS response was irradiated by therapeutic laser. The laser stimulation continued until the VAS stopped. Acupuncture points used for patients are as follows:

LU-5, LU-7, L.I.-11, ST-36, ST-40, KI-3, KI-6, P-9, G.B.-43, LIV-3, Du-20, Sishencon [14].

Auricular Points: Brain – Excitement point – Prefrontal Cortex – Hippocampus – Occiput – Shen Men [16].

Generally, 10 to 15 sessions are required for the treatment of ADHD patients by low-level lasers.

All treatments were done by an acupuncturist in the clinic.

A laser acupuncture device (Figure1) was used to stimulate acupuncture points with the following characteristics:

- Lasertherapy device LaserPen Expert manufactured in 07/2017, Germany
- Type 134 Pmax 500mW / 810nm

- SN: 17134-42
- Pmax 500 mW; $\lambda = 810$ nm CW; EN 60825-1:2007
- Laser Radiation Class 3B Is Emitted From This Aperture
- Pulse duration: nanosecond, milisecond

This hand-held device uses electrical pulses to stimulate acupuncture points. It is safe and easy to use and works without piercing the skin. The LaserPen can operate either in a continuous beam mode or at any of a large number of pre-programmed frequencies, including NOGIER frequencies, BAHF frequencies, and Chakra and Meridian frequencies, depending upon the intended application.



Figure1. the LaserPen used to stimulate acupuncture points

Ear seeds are small stainless-steel balls placed on a specific ear point and then held there by a small adhesive patch. The adhesive strips used to hold the seeds are best handled with forceps. The ear seeds are often used as the method of auricular stimulation. The seeds can be as effective as needles, are less painful, and have less chance of leading to infections. Ear seeds are left in place at reactive ear points in order to maintain the benefits of auricular acupuncture.



Figure 2. Ear seeds



Results

Patients with ADHD generally have trouble concentrating and paying attention. ADHD symptoms include having difficulty staying focused, easily getting distracted, boredom or frustration with tasks, poor working memory, acting before thinking, and moving constantly. These behaviors are generally common in children, but they occur more frequently and are more severe in those with ADHD.

Since acupuncture affects neurotransmitters, including dopamine, catecholamines, and serotonin, neurophysiological effects on ADHD are expected. Based on treatments performed on four children, it was revealed that seed therapy, laser acupuncture, and auricular laser therapy are very effective in treatment of children. Laser acupuncture is very useful for children and those who are afraid of needles. During the third to fifth sessions, significant changes were observed in the behavior of children and clinical manifestations improved. According to parents' reports, their children were much more relaxed, communicative, and focused with better behavior after laser acupuncture.

The following table shows the patient profile and treatment protocol used.

Patient No.	Referral Date	Age	Course of Treatment	Treatment Methods	Clinical Manifestations
1	Sep., 2017	6	21 sessions	Laser Acupuncture, Seed Therapy	Anxiety, Lack of Concentration, Aggression, Allergy, Poor appetite
2	Sep., 2017	4	12 sessions	Laser Acupuncture, Seed Therapy	Crying, <i>Bad-temperedness</i> , Allergy
3	June, 2017	7	13 sessions	Laser Acupuncture, Seed Therapy	Fear, Enuresis, <i>Bad-temperedness</i>
4	July, 2017	5	6 sessions	Laser Acupuncture, Seed Therapy	Low energy, <i>Acid reflux</i> , <i>Fright</i>

Table1. Clinical profile of patients and their treatment protocol

Laser acupuncture is an excellent complementary method, as it helps the body restore balance, treats the root of the disorder, and eliminates the symptoms of ADHD. Laser



acupuncture can be used effectively to alleviate hyperactivity, calm the nervous system, ease anxiety and depression, and improve sleep by establishing the body's overall balance. It can help enhance concentration and attention, reduce fidgeting, optimize the brain activity, and improve memory and learning capacity that is impaired by ADHD.

Typically ADHD-associated behaviors may interfere with the ability to function at school, at work, or at home. Laser acupuncture is one of the treatment methods that is beneficial in managing ADHD.

Discussion

Attention deficit hyperactivity disorder (ADHD) is one of the most common behavioral disorders observed in school-age children. The most effective psychotropic medications for the treatment of ADHD are methylphenidate (MPH) and its derivatives. These medications notably reduce clinical manifestations, such as loss of appetite, insomnia, restlessness, and weakness, but cause side effects and have minimal effects on poor school performance or anti-social behaviors. Many studies indicate that acupuncture positively affects memory and the ability to learn.

One of the advantages of laser acupuncture is that the occurrence of adverse effects is substantially lower than that of many drugs used for the same conditions [3].

Laser acupuncture is an effective form of acupuncture for the treatment of some conditions, including myofascial pain, postoperative nausea, vomiting, and chronic tension headache; so it could be considered as an alternative to traditional forms of acupuncture point stimulation [2].

According to the basic theory of Traditional Chinese Medicine (TCM), ADHD is caused by 'liver yang overactive', 'effulgent gallbladder fire', 'heart-spleen qi deficiency', 'non-interaction of heart and kidney' and 'yin-yang disharmony'. Thus, ADHD in children is manifested with clinical symptoms of over-activity, restlessness, recklessness, impoliteness, and stubbornness [12].

According to TCM, ADHD is a complicated state of deficiencies. Hyperactivity often manifested by a symptom of excess is in fact due to liver yin deficiency. Activity is yang, while inhibition is yin. A lack of inhibition, a yin deficiency, especially liver yin deficiency with disturbance of the ethereal soul causes excessive motor activities and unfriendly behavior with others. Being constitutionally yin deficient and liver vulnerable, children, especially boys (who are less yin than girls), are prone to developing the hyperactive type of ADHD [13].

In addition, constitutional spleen deficiency is a common condition seen in all children that can lead to accumulation of phlegm, because deficient spleen fails to transform and transport body fluids. In Chinese medicine, the word "phlegm" implies two concepts, a mucous form related to lung conditions, and a non-substantial form that circulates in channels and can obstruct organs [14]. Phlegm, in the latter sense, can cause obstruction in the heart and mist the mind that can be manifested by unclear, clouded thinking, and mental confusion. A child with this condition is not hyperactive, but tends to be quiet. This is associated with the inattentive type of ADHD which is more prevalent in girls than boys.



The imbalanced condition of the whole body leads to impaired mental symptoms, like attention deficit, hyperactivity, and impulsivity [8]. Laser acupuncture is considered inherently safer than needle acupuncture due to the non-invasive nature of treatment. According to a study conducted by Shergis et al. (2016), it was found that there is a significant relationship between the level of anxiety during the day and insomnia at night. By balancing the storage of active ingredients in the body, acupuncture improved anxiety and sleep without having side effects of chemical drugs. Positive therapeutic results were observed in ADHD patients, as their sleep cycles became normal and levels of anxiety and depression reduced. Laser acupuncture improved sleep quality and reduced anxiety and depression by modulating melatonin [19].

As reported by Li S et al. (2011) in another study, acupuncture reduces hyperactivity by exerting regulatory effects on the nervous system [12].

According to a study conducted by Maguri et al., (2016), a significant reduction was observed in symptoms of ADHD (lack of attention and concentration, hyperactivity, and impulsivity) in the second and fourth weeks of treatment [15].

As reported by a study conducted on the effectiveness of laser acupuncture in the treatment of 7 to 9 year-old children with mild to moderate ADHD, symptoms of ADHD reduced and behavior and cognitive functions improved [13].

Another study conducted on the treatment of ADHD with non-pharmacological methods, such as laser acupuncture and herbal therapy showed that these methods reduced ADHD symptoms and improved the quality of life of patients and those around them. Younger children respond better to laser acupuncture. The reason may be that their brain is still in the early stages of growth compared to older children or adults [15].

According to a study conducted in South Korea, it was found that the needling of HT-7 decreases morphine-induced behavioral hyperactivity [13].

A study conducted on 40 children with ADHD indicated that acupuncture increases the child's understanding of the mathematics and general courses. A statistically significant increase was observed in students' scores in these courses [21]. The use of electro-acupuncture together with behavioral therapy showed a significant positive therapeutic outcome compared to drug therapy [12].

The result of this study was in line with the results of other studies. In the present study, acupuncture points were stimulated using low-power laser and all patients received seed therapy, auricular laser therapy, and laser acupuncture. Patient No. 1 had symptoms of anxiety and restlessness, lack of concentration, aggressive behavior and stubbornness, allergy, and poor appetite before treatment. However, symptoms of *stubbornness* and restlessness decreased after the 5th session, and other ADHD symptoms were resolved in the next sessions. Patient No. 2 was diagnosed with symptoms of crying, incompatibility,



disobedience to parents, and high-risk behaviors. After 4 sessions of laser acupuncture, the patient became more good-tempered and obedient. His relaxation, diet, and sleep quality improved and he became interested in watching television.

Other than common symptoms of ADHD, patient No. 3 had symptoms of enuresis and fear. Enuresis in children with ADHD can be due to a delay in the development of the central nervous system or having a harder time paying attention to bodily cues [17]. At the end of treatment, fear and enuresis resolved.

In the case of patient No. 4, the appetite and general behavior of the child improved significantly after the third session.

In laser acupuncture, acupuncture points are stimulated without pain. Nowadays, laser has been widely used as an alternative to needles and its effects has been studied and confirmed worldwide. The laser light is amplified, directional, and convergent; therefore, it has a greater penetration depth than ordinary light.

Since it was a case study and the result of the study cannot be generalized, further clinical studies are recommended to be conducted on a larger population of patients to gain more reliable results. If we have a larger population and standardize the duration and frequency of acupuncture treatment, it may be proven that laser acupuncture is even more effective than current research results. International standards need to be organized for diagnosis and rating scales of ADHD symptoms.

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Effect of low-level laser therapy for cosmetics in Taiwan

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Objective: The use of low-level laser therapy (LLLT) for skin rejuvenation and skin disease purposes has gained popularity worldwide. It has been proven to be incredibly effective at regenerating damaged tissue and healing many skin conditions ranging from burns and scarring to severe acne and wrinkles. The purpose of this study was to investigate the effects of low-level laser therapy (LLLT), which are used in physical therapies on nasolabial wrinkles.

Material and Method: The study involved 20 women participants aged 40 to 59 years with wrinkles or fine lines in the nasolabial region and those presenting Modified Fitzpatrick Wrinkle Scale (MFWS) grade 0.5-2.5. Participants received three treatment sessions over 15 days with 660 ±10 nm broadband LLLT. The participants' nasolabial wrinkle was observed before and after the intervention and followed up after one month.

Results: Among 20 women screened, a highly significant improvement after LLLT treatment. An average of 1.25 class (from 1.75 ± 0.573 to 1.25 ± 0.55, P < 0.01; Wilcoxon Z = 2.91) and 1.0 class (from 1.25 ± 0.55 to 1.0 ± 0.512, P < 0.01; Wilcoxon Z = 3.37) was achieved at immediately after treatment and one month follow up.

Conclusion: Based on the clinical results of this study, the application of LLLT had positive effects on the nasolabial wrinkle of adult women's faces.

Keywords: low-level laser therapy (LLLT);nasolabial wrinkle;Modified Fitzpatrick Wrinkle Scale (MFWS)

**Laser acupuncture as an alternative treatment for amphetamine addiction: a pilot study**

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Objective

Amphetamine addiction has become an important public health issue due to adverse consequences to the individual and society. The aim of this study was to investigate the clinical efficacy of laser acupuncture for the treatment of amphetamine addiction.

Material and Method

Amphetamine addicts who met inclusion criteria were referred from psychiatrists to join this trial. Participants received laser acupuncture treatment one time per week for 2 months (total 8 treatments) on selected acupoints (PC6, HT7, LI4, ST36, SP6, and LR3). The laboratory assessments included the concentration of urinary amphetamine and heroin, AST, ALT, and r-GT; the objective assessments included visual analogue scale (VAS) for amphetamine craving and refusal, Pittsburgh sleep quality index (PSQI), Beck Anxiety Inventory (BAI) and Beck Depression Inventory (BDI). All data were collected at the beginning, 1st month, and 2nd month.

Result

Ten participants who met inclusion criteria were enrolled and seven subjects completed this trial. The urinary concentration of amphetamine dropped significantly after one month follow up (-1937.7 ; $p=0.008$). The questionnaire score of PSQI (-3.73 ; $p<0.001$ and -4.10 ; $p<0.001$) and BDI (-5.64 ; $p=0.01$ and -8.17 ; $p=0.001$) were significantly decreased after 1st month and 2nd month follow up. However, there was no significant difference among urinary concentration of heroin, liver function tests (AST, ALT, and r-GT), VAS of craving and refusal, and BAI. Although, some addicts used amphetamine again after 2nd month follow up, there was slightly improving motivation of drug abstinence and anxiety during the course of treatment. No adverse events were reported by participants.

Conclusion

This study demonstrates that there is short term effect of amphetamine abstinence by laser acupuncture with improving sleep quality as well as alleviating depression. Further large-scale study is warranted to confirm the effectiveness of laser acupuncture.

Keywords: Drug abuse; Substance dependence; Amphetamine addiction; Laser acupuncture



Key points of rehabilitation of patients after stroke with combined use of corporal, scalp and auricular acupuncture

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Objective. To prove the effectiveness of the combined use of corporal, auricular and scalp acupuncture in the complex treatment of patients in the stroke residual period by assessing the dynamics of motor activity and cognitive status.

Material: 55 patients, mean age 54.1 ± 1.3 years, in the early residual period of carotid ischemic stroke. 2 group: first (main) - 27 patients received comprehensive standard treatment together with corporate, auricular and scalp acupuncture. II (control) group (28 patients) - standard treatment. In the I group, apart from the individual selection of acupuncture prescriptions according to the classical rules of traditional Oriental medicine, in the extremities with central post-stroke spasm used a brake technique and toning in opposite. At each limb, 2 brake methods - I method for yin-hand, yin-foot and GB meridians, and II brake method mainly in yang-meridians, scalptherapy heterolaterally paralyzed extremities. Auricular acupuncture is bilateral: homolateral to stroke at antitragus points and zones, lobe, posterior ear furrow, and homolaterally to paralysis - points of scapha, upper and lower legs of the antihelix. Important: During acupuncture sessions, patients were offered commands of voluntary muscle tension in the paralyzed limbs. 12-15 sessions in 1-3 days.

Methods. Clinical Neurological Examination, Harrison Muscle Strength Assessment, Bartel Index, Mini-Mental State Examination (MMSE), Frontal Assessment Battery (FAB), Clock Drawing Test (CDT) in the dynamics of treatment.

Results. Before treatment. Muscle strength: I group -3.1 ± 0.2 ; II -3.2 ± 0.3 . Bartel Index; I – 56.1 ± 1.5 ; II – 56.2 ± 1.8 ; MMSE: I - 18.4 ± 1.3 ; II – 18.5 ± 1.4 . FAB: I - 9.3 ± 0.7 ; II – 9.2 ± 0.9 . CDT I- 5.0 ± 0.9 - II - 5.1 ± 1.1 .

After treatment. Muscle strength: I group 4.5 ± 0.4 ; II -3.7 ± 0.5 ($P < 0.05$); Bartel Index: I – 67.2 ± 1.7 ; II - 59.4 ± 1.5 points, ($P < 0.01$); MMSE: I - 24.9 ± 1.1 ; II - 22.5 ± 1.2 ($P < 0.01$). FAB: I – 14.7 ± 0.9 ; II- 12.5 ± 0.9 ($P < 0.05$). CDT: I - 9.5 ± 1.1 ; II - 7.1 ± 1.1 ($P < 0.01$)

Conclusions. The combined use of corporate, auricular and scalp-acupuncture methods in complex treatment significantly increases the level of motor activity and cognitive status of patients in the stroke residual period.

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Keywords: stroke, acupuncture, treatment, rehabilitation, auricular, scalp therapy, MMSE, CDT, FAB



Application of the Chinese scalp acupuncture technique in the treatment of hemiparesis in patients post ischemic stroke: Clinical case.

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Ischemic Stroke (CVA) occurs when an artery is blocked and there is a lack of blood supply in a particular area of the brain (ischemia). The difference between ischemic stroke and hemorrhagic stroke (CVA) is that in the second, there is a rupture of one or more blood vessels, not clogging. The obstruction of the artery can occur by a thrombus, which is a blood clot forming on its inner wall, or by a plunger, which is nothing more than a thrombus that travels through the bloodstream until it is trapped in a blood vessel of smaller caliber. Hemiparesis is partial paralysis of one side of the body. It is usually caused by lesions of the corticospinal area that runs below the cortical neurons of the frontal lobe to the motor neurons of the spine, which is responsible for the movements of the muscles of the body and its limbs. This study aimed to demonstrate the effects of the Chinese scalp acupuncture technique in the treatment of right hemiparesis presented by a patient after a CVA. The patient was first evaluated for his motor control and later treated with the Chinese scalp acupuncture technique. The treatment initially proposed should be 20 sessions, but with only three sessions the patient was fully recovered. The final result showed that scalp acupuncture was extremely effective in treating hemiparesis of the patient.

Keywords: Cerebral Vascular Accident.;CVA.;Hemiparesis.;Scalp Acupuncture.;Neurology



Evaluation of Patients Receiving Acupuncture Treatment for Obesity

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Aim

The ideal fat ratio should be between 20% and 30% for men and 12-18% for women.

Material method

100 obesity patients admitted to the GETAT center. Patients were administered both body and ear acupuncture with sterile disposable acupuncture needles (13 * 20 and 20 * 25mm) once a week after 2 weeks. Obesity assessment form scale was filled in patients. Weight loss was done with the device. The waist (umbilicus) and hip circumferences were measured by the same nurse.

Findings

A total of 19 male 81 female patients were included. The mean age was 44.12 ± 1.31 years. 80% of the patients were married, 14% were single, 1 was widowed, 5 were divorced. 38% of the patients were working, 62% were not working. 39% of the students were university and above, 19% were high school, 35% were primary, 4% were literate, and 3% were illiterate. In monthly income, 22 were 5000TL and over, 31% were between 3000-5000, 35% were between 1300-3000 and 12% were 1300 TL. 41% of the patients did not do any exercise, 17% were rare, 10% had 1, 19% had 3 times a week, 13% had more than 3 times a week. Of the patients, 19% were smokers, and 81% did not use alcohol, whereas 7% were alcohol. 62% of patients had an additional disease. 22% of the patients had received psychiatric treatment. 76% of the patients had previously had dietary attempts. SBP mean 116.40 ± 94 , DKBort 73.30 ± 64 mmHg, height mean 163.98 ± 85 cm, weight 87.55 ± 1.55 kg, BMI mean 32.54 ± 51 , waist circumference average 98.03 ± 1.31 cm, hip circumference mean 112.69 ± 1.34 cm, mean metabolic age $\pm 55.68 \pm 1.26$ fat ratios were 43.02 ± 4.55 , basal metabolism mean 1624.90 ± 30.70 .

Results

At the end of 1 month BMI was 32.

Keywords: Obesity,acupuncture,bmi;acupuncture;bmi



Using Four-Element System In Traditional Chinese Medicine And Acupuncture

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Objective: In order to use very valuable ancient information that comes from Indian Medicine into Acupuncture and Traditional Chinese Medicine (TCM), we seek and discuss applying 4-Element system on these areas.

Indian Medicine has an important role in terms of establishing the basic principles of the TCM and Acupuncture. However, while the Yellow Emperor and ancient Chinese physicians dwell on 5 Elements theory, Indian Medicine, Uyghur Medicine, ancient Anatolian and Greek Medicine are based on 4 Elements. Astrology and Feng Shui are based on 4-Element system, as well. In practice, we know that both theories/systems work as beneficial.

In their medical texts, Hippocrates and Avicenna had talked about Air, Fire, Earth and Water, which constitute nature and human. In this presentation, we will try to understand these two different approaches, while creating Traditional/Modern Medicine synthesis with the guidance of the Science. Of course, this transformation will require us to rearrange the organs, which have matched with the Elements or the Essences. Without doubt, the physical body, the biochemical body, the mental-spiritual body that forms the human are connected to these Elements or Essences, as well. While using Acupuncture and complementary methods, these connections are very important in terms of forming diagnostic and treatment algorithms.

Conclusions: We believe that by adapting and using 4-Element system in Acupuncture and TCM, we will be able to get benefits from valuable ancient information that had served very well for Indian, Uyghur, Anatolian and Greek Medicine, and Astrology. We also assume that approaching to patients by using 4-Element system may help solving diagnostic and treatment problems in some of the difficult and/or unique cases, which 5-Element system does not able to do. Therefore, converting 5-Element system to 4-Element system will be a good and necessary starting point for creating a brand new modality of Acupuncture and TCM.

Keywords: Acupuncture; Traditional Chinese Medicine; 4 Elements; 5 Elements; Indian Medicine



Acupuncture Increases Human Skin Temperature, Measurable by Digital Thermometer

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Objectives: Acupuncture causes parts of the skin to exhibit red spots, which is considered to be the arrival of Qi. In order to quantitatively measure the phenomenon shown in infrared images taken after acupuncture treatment, the temperature change of the red spots on the skin were directly measured with a digital thermometer.

Materials: Compass, ruler, digital thermometer, needles.

Methods: Four centimeter diameter circles were made from paper. Two regions of interest were drawn using the circles on the skin of the middle back of the subject. One circle acted as a no-acupuncture control while the other one was treated with acupuncture for 20 minutes. The skin temperatures in the center of the two areas were measured with a digital thermometer before (baseline), during (at 0, 10, and 20 minutes), and after (at 0, 10, and 20 minutes) acupuncture treatments. The skin temperature was measured 3 times with a digital thermometer at each time point and averaged for comparison.

Results: The skin temperature increased by 0.22 °C from baseline in the control group and increased by 0.48 °C from baseline in the treatment group at 20 min during acupuncture. The skin temperature increased by 0.24 °C from baseline in the control group and increased by 0.48 °C from baseline in treatment group at 20 min after acupuncture.

Conclusions: Acupuncture increases the skin temperature, which can be directly measured by a digital thermometer. Acupuncture-induced red spots (arrival of Qi) and increased skin temperature indicates vasodilation and increased blood flow to the acupuncture-treated area.

Time	Acupuncture Temperature, Average (°C)	Control Temperature, Average (°C)
Before Acupuncture	35.30	35.22
During Acupuncture 0-min	35.48	35.18
During Acupuncture 10-min	35.69	35.33
During Acupuncture 20-min	35.78	35.44
After Acupuncture 0-min	35.80	35.48
After Acupuncture 10-min	35.74	35.44



After Acupuncture 20-
min

35.78

35.46

Table 1 | Skin temperature measured by digital thermometer.

Keywords: Acupuncture;Skin;Temperature;Digital thermometer;Arrival of Qi



Acupuncture and other complementary medicine interventions to address mental health, may be critical for improving male and female fertility as well as child health.

S. TAPPER¹

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Objective: Depression, anxiety and emotional stress may significantly impact fertility, pregnancy and subsequent child health. Commonly prescribed pharmaceutical interventions also appear to compromise these concerns. The objective of this paper is to raise awareness of mental health factors and interventions to consider, when working with both male and female fertility clients.

Materials: Published trials and reviews from online medical databases.

Method: A literature review explores the research evaluating the effects of stress, depression and anxiety on male and female fertility, pregnancy and babies. The evidence for pharmaceutical interventions commonly prescribed for these issues, as well as complementary medicine options, is also evaluated. Recommendations for practitioners are then made, based on the evidence and clinical experience.

Results: Studies suggest pre-conception mental health status impacts the length of time to achieve pregnancy, male and female fertility, risk of ante-natal or postpartum depression and subsequent child health. The observed impact of ante-natal depression and anxiety on the baby varies between studies, depending on which outcome measures are used. However some are concerning. Commonly prescribed antidepressant drugs may negatively impact sperm quality, pregnancy and babies. There are positive findings for the use of acupuncture, cognitive behavioural therapy and a wholistic approach, for fertility clients struggling with depression, anxiety and stress.

Conclusion: Whether fertility challenges are the trigger or compromised mental health status predates failed attempts to have a baby, the findings of numerous studies suggest addressing mental health as part of fertility treatment plans may be critical for achieving positive outcomes. Many study conclusions call for more research evaluating the safety and adverse effects of related pharmaceutical use, pre-conception and during pregnancy. Other studies suggest low risk complementary interventions may be helpful. Consideration of non-pharmaceutical interventions is therefore essential when formulating treatment plans for fertility clients struggling with stress, depression or anxiety.

Keywords: mental health; neonatal health; complementary medicine; acupuncture; fertility



Wrist-ankle Acupuncture technique and Clinical Application

Zhou Peng

The wrist-ankle acupuncture is a new acupuncture therapy combining the theory of traditional Chinese medicine with the theory of modern neurology in practice. The therapy divides the human body, and according to the manifestation area of the disease, the subcutaneous shallow thorn is selected according to the selected points in the wrist region to achieve the purpose of treating diseases. Meridian theory suggests that wrist-ankle acupuncture can stimulate the body's twelve skins through the gas, modern medicine believes that its mechanism of action may be related to the conduction regulation of the nervous system, although its mechanism is complex, but the clinical efficacy is exact. Since its inception, it has been used in multi-disciplinary clinical diseases, the number of its treatment has reached 83, its sprain in orthopedic diseases, cervical spondylosis, low back pain; neurological migraine, facial paralysis, stroke functional recovery and other diseases on the treatment of obvious advantages, at the same time, the treatment of ENT, gynecology, pediatrics and other diseases such as rhinitis, dysmenorrhea and pediatric enuresis has also achieved satisfactory results, moreover the wrist-ankle acupuncture are easy to operate, safe, and effective, and are suitable for clinical promotion.



“Complementary Acupuncture Points” treatment of insomnia: simple , convenient and effective

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Abstract

To aim at the key problem that acupoints selection and combinations are too difficult, and the body surface distribution of the meridians is too complex, and acupoints are too more . “ The complementary acupoints ” theory and acupuncture method is put forward scientifically by Zhixin Yang, Ph.D , Professor.

The complementary acupuncture acupoints refer to the acupoints that they are situation on the corresponding medial and lateral sides of the limbs or in the front and back parts of the body trunk , and adjusting the balance of Yin and Yang playing a synergistic effect by use of yin and yang interdependence, or each other aid of yin and yang . For example, PC 6(nèi guān) and SJ 5(wài guān), Quchi (LI11) and Shaohai (HT3), Yinlingquan (SP9) and Yanglingquan (GB 34), Xuanzhong (GB 39) and Sanyinjiao (SP 6), Zhaohai (KI6) and Shenmai (BL62) etc.

“ The complementary acupuncture points ” are point combinations of one point in yin channel and the other in yang channel and this combinations is simple , unique, and curative effect affirmation. The characteristics of “ the complementary acupuncture points ” is Yin and Yang interdependence, acupoints selection precision , operation simple and convenient, and significant effect. After nearly 30 years development, it gradually to complete relatively the theoretical system of “ the complementary acupuncture points ” and they are widely used in the internal diseases and surgery, diseases of gynecology and pediatrics. Especially in treatment insomnia ,cold, cough, acute or chronic rhinitis, pain diseases, heart diseases, etc. Their curative effect are quick and stable.

Insomnia was a refractory disease and hard to recover, which affects the patients’ physical and mental health. The complementary acupuncture points prescription method, originated from ‘interdependence of Yin and Yang’ in Yin-Yang theory, by needling the two complementary acupoints with exterior-interior relationship, Neiguan (PC6) and Waiguan (SJ5), through regulating the balance of Yin and Yang ,can improve the curative effect through the synergism of the two acupoints of Yin-Yang and provide the advantages of simple and obvious curative effect.

Keywords: the complementary acupuncture points; mutual enhancing effects of yin and yang ; insomnia; acupuncture therapy



Treatment of athlety by acupuncture

or...

why doping has no place

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or...

why doping has no place

Further, higher, faster, better; these are the goals of modern high performance sports. Only then will victories be achieved and prizes won. Targeted training, optimized technology and sophisticated tactics, but somewhere the limits are reached. The racing bike can barely be lighter and its driving characteristics can hardly be improved, ... the spikes of the sprinter's shoe have optimal length and shape, their material is stable and the running style of the athletes is biomechanically optimized, ... the end point of performance seems to have been achieved and must yet go on. Every year many world records are set. But the human factor sets the limits.

The limited capacity of the human factor has always had cultural aspects as well. Thus, since the Neolithic, the pain-relieving properties of the poppy known, the landscapes of the South American Andes were overcome by the natives only at a run when they chewed on the leaves of local coca (and so unknowingly, the stimulating cocaine to yourself) and so in ancient China, stimulation of a certain point on the body is said to increase the stamina of marching soldiers. The point used in the process therefore continues to bear the name "Three Villages". The application of performance-enhancing drugs to soldiers is also documented in past wars.

Doping first caused a sensation in 1960, when Danish racing cyclist Jensen died during a race and subsequently discovered that he had taken amphetamines. Although the use of the substances has been used consistently in sports since the 1930s, it was first consequently dammed in 1972 at the Olympic Games in Munich. Since Bayer's patent for heroin in 1898 (then a "cough medicine"), the list of performance-enhancing drugs and measures expanded significantly. Examples are the blood-forming hormone erythropoietin and modern forms of gene doping. However, the basic problem remains: The performance of humans is limited, the health of the athlete endangered foreseeably. Their use is therefore quite punishable and despicable.



Now it is clear to everyone that the use of prohibited substances or processes is not a solution. But how do you go on, run faster or play better football? One possible solution, attributed to the gymnast Jahn, is the phrase "mens sana in corpore sano", which means combining the mind and the body. Going further back in history, you come across textbooks that are still the basis of Chinese medicine today. In detail to the authors, where it comes to the physical and mental performance to the highest standards and to keep it stable. They formulated it flowery as "... then the bones remain strong, the tendons supple, blood and Qi flow harmoniously ...". For the sport, which is operated for health reasons, is valid: "the one, who knows the principles, will remain strong, who does not know them is aging fast." Also for the most efficient engine is valid: to tune it optimally and to use the appropriate fuel. What is right in technology, but it should certainly be cheap for humans. Unfortunately, in many cases, the athlete's body and mind are not optimally tuned. This causes the loss of performance and the call for help. The list of causes is long, it ranges from subliminal deficiency states, defensive weakness and overtraining through to cured, but not yet healed "influenza infections" u. v. a. m ..

Harmonization, i. e. the restoration of the health of the body and mind. Damage is often caused to this harmony as a high blazing flame consumes its candle prematurely, because health is not an artificially created, indeed noisy state with the aim of gaining an advantage by increasing one's own performance. As recent research has shown, acupuncture is a central process that excludes factors that harmonize body and mind, and where physical performance is at the highest possible (healthy) level. Finally, a quote from the textbook mentioned above: "If body and mind are in harmony, then the body is powerful, when it is demanded he does not tire."



Thoughts on the dominant diseases of acupuncture

Lui Weihong

To discuss the dominant diseases of acupuncture and moxibustion and its trend on later development. At present, the concept of acupuncture and moxibustion disease spectrum has curative efficacy disease spectrum and evidence-based acupuncture and moxibustion disease spectrum, and they have different dominant disease types. In accordance with the principle of evidence-based acupuncture and moxibustion disease spectrum, we searched systematic reviews and meta-analysis of acupuncture and moxibustion published in Chinese medical journals, and concluded 68 dominant diseases of acupuncture and moxibustion. Based on the result and the mechanism characteristics of acupuncture, we predicted the development trend of dominant diseases of acupuncture and moxibustion. In addition to the curative effects advantage of the diseases, acupuncture and moxibustion also have advantages in diagnosis, operation, safety and cost effective, which are not available in other medical categories.

**Electro-Acupuncture at Housanli (ST36) and Shangjuxu (ST37) can Alleviate the Symptoms of Colorectal Hypersensitivity**

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Abstract**Objective**

This study was to investigate the effect and molecular mechanism of electro-acupuncture (EA) on regulating colorectal hypersensitivity.

Method

A mouse model by injecting zymosan transanally to induce colorectal hypersensitivity was introduced to mimic irritable bowel system (IBS) in clinic. The control mice were injected with saline. EA was applied to stimulate Housanli (ST36) and Shangjuxu (ST37). Western blot was used to detect the changes of the protein expression of transient receptor potential vanilloid1 (TRPV1) and nerve growth factor (NGF) in colon, TRPV1 and substance p (SP) in spinal ganglion and TRPV1 and protein kinase C gamma (PKCγ) in spine cord after EA stimulation.

Result

EA significantly attenuated the IBS symptoms induced by zymosan injection compared to the saline injection group. The effectiveness of acupuncture analgesia was accumulative with increased number of times of acupuncture when compared to that of a single time of acupuncture. EA treatment significantly reduced the expression of TRPV1 and NGF in colon and rectum, SP and TRPV1 in spinal ganglion and PKCγ and TRPV1 in spinal cord.

Conclusion

EA is a potential and effective therapeutic tool to treat abdominal pain or discomfort, and it may function through reducing the expression of TRPV1 in the colorectum, spinal ganglion and spinal cord as well as inhibiting the activation of NGF, SP and PKCγ in the peripheral nervous system.

Keywords:

Electro-Acupuncture (EA), TRPV1, NGF, SP, PKCγ, NF200, IB4, CGRP

**The Effect on the Behavioral and Pathological changes Induced by Ovariectomized and D-gal with Moxibustion Shenshu (BL23)**

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Abstract

Objective: To observe the Alzheimer's disease-like behavioral and pathological changes of rats being ovariectomized and injected with D-gal

Methods: Female SD rats aged 12 weeks were randomly divided into normal group (Con), sham operation group (Sham) and model group (VOX+D-gal), with 10 rats in each group. The bilateral ovaries of VOX+D-gal rats were removed, and the anti-infective treatment of penicillin was performed for 3 days. On the 4th day, D-galactose was intraperitoneally injected at a dose of 150 mg/kg/d, and only the ovarian fat was removed from the rats in Sham group. On the same time, 0.9% normal saline was intraperitoneally injected at the same dose as VOX+D-gal group. After 12 weeks of modeling, the three groups of rats were subjected to behavioral tests such as Morris water maze, open field test, Sucrose preference test and ELISA to detect serum estrogen levels. The level of A β 1-42 in hippocampus was detected by immunohistochemistry and the phosphorylation level of tau protein in hippocampus at PHF-1 was detected by western blot.

Results: The results of 7-day water maze test showed that during the 6 days of learning and detection, the latency of finding the platform in the VOX+D-gal group was significantly longer than that in the Con group and the Sham group ($P < 0.01$), and there was no significant difference between Sham group and Con group. At the 14th day of memory detection, the first time to cross the original platform of VOX+D-gal group was significantly longer than that of the Sham group and Con group ($P < 0.01$). In the open field test, compared with the Sham group and the Con group, the number of upper limb lifts, the movement time, the total distance and the number of crossing grids within 5 minutes decreased significantly in the VOX+D-gal group ($P < 0.01$). In the Sucrose preference test, the saccharide preference rate of VOX+D-gal group was significantly lower than that of Sham group and Con group ($P < 0.01$). Serum estradiol test results showed that compared with Sham group and Con group, serum estradiol levels in VOX+D-gal group were significantly decreased in 24h and 12w after surgery ($P < 0.01$). The results of immunohistochemistry showed that the level of A β 1-42 in hippocampus of model group was significantly higher than that of sham operation group and normal group ($P < 0.01$). The results of western blot showed that the phosphorylation level of tau protein in model group was significantly higher than that in sham operation group and normal group ($P < 0.01$).

Conclusion: VOX and D-gal injection rats have decreased learning and memory ability, accompanied by depressive symptoms, and the content of A β amyloid and

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phosphorylated tau protein increased significantly, which is an ideal model of senile dementia.

Key words: ovariectomize, D-gal, dementia, depression, Disease Model



Efficacy and safety of acupuncture treatment of different syndrome types of chloasma: a meta-analysis

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【Abstract】 Objective To systematically the efficacy and safety of acupuncture on different syndrome types of chloasma.

Methods Databases including MEDLINE (Ovid), PubMed, EMbase, Cochrane library, VIP database (VIP), Wan Fang, CNKI, CBM, published in February 2018 28 to check, English literature. By 2 researchers according to the method recommended by the Cochrane collaboration to evaluate the methodological quality of the included studies, set inclusion and exclusion standard screening and data extraction, quality evaluation. Meta-analysis funnel plot analysis and other statistical analysis by using RevMan 5.3.3 software.

Results A total of 2950 RCTs were included in the sample (1487 in the test group and 1463 in the control group). The subgroup meta-analysis was performed according to the syndrome type. The results of the analysis showed that: the rate of effective syndrome of qi stagnation and blood stasis [RR= 1.23, 95%CI(1.14, 1.32)], Stagnation of liver qi and qi stagnation [RR= 1.14, 95%CI(1.09, 1.19)], syndrome of yin deficiency of liver and kidney [RR= 1.19, 95%CI(1.15, 1.24)], but there was no significant difference in Spleen deficiency dampness syndrome [RR= 1.12, 95%CI(0.98, 1.29)].

Conclusions Acupuncture and moxibustion treatment of different types of yellowish brown have different therapeutic effects, and their curative effects are as follows: qi stagnation and blood stasis syndrome, liver qi stagnation syndrome, liver and kidney yin deficiency syndrome, and spleen deficiency and dampness-rich syndrome, among which acupuncture and moxibustion treatment of spleen deficiency wet type yellow The effect of brown spots is not obvious. Limited by the quantity and quality of the included literature, existing conclusions still need to be verified by high-quality, multi-center, large-sample randomized controlled trials.

【KEYWORDS】 Acupuncture; Chloasma; Malar rash; Meta-analysis



Saç Mezoterapisi ve PRP (Platellet -Zengin Plazma)

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Saç mezoterapisi, androjenetik alopesi, alopesi areata ve telogen effluvium gibi birçok saç hastalığında kullanılan mezoterapi yöntemidir. Saç mezoterapisine “mezoplasti” veya “mesohair” de denir. İlaçların saçlı deriye direkt olarak, 2 – 3 mm derinlikte, 1-2 cm aralarla ve Enjeksiyon başına maksimum 0,01-0,05 ml olacak şekilde uygulanan minimal invazif bir tekniktir. Buflomedil, minoksidil, finasterid, dutasterid, biotin, vitaminler ve organik silisyum gibi ajanlarla lokal mikro sirkülasyonu düzenleyip arttırarak, besin girdisi sağlayarak follikülerin gelişim sürecine diğer tedavi yöntemlerinin yanında tamamlayıcı olarak katkıda bulunur, Saçın ihtiyacına göre 1-2 haftada bir seans uygulanabilir, daha sonra da ayda bir veya 2 şeklinde devam edilebilir. Platelet-rich plasma (PRP) ise, Fibroblast proliferasyonu, migrasyonu, neovaskülarizasyon ve neokollojenizisi uyaran, saç dökülmesinde diğer saç mezoterapisi yöntemleriyle kombine veya ayrı uygulanan bir metoddur.

Keywords: Saç mezoterapisi;; alopesi;; platellet-zengin plazma



Migren Tanısı Almış Hastalarda Mezoterapinin Etkinliği

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AMAÇ: Bu çalışma da migren tanısı alan hastalarda mezoterapi'nin ağrı kontrolündeki etkinliği retrospektif olarak araştırıldı.

GEREÇ VE YÖNTEMLER: Bursa İlker Çelikcan Fizik Tedavi Hastanesi ve Bursa Çekirge Devlet Hastanesi fizik tedavi polikliniklerine başvuran migren tanısı almış 30 hastaya (12 erkek, 18 kadın) mezoterapi tedavisi uygulandı. Hastaların ortalama yaşı 35(25-50) idi. Mezoterapi solüsyonu olarak hazırlanan karışım (1ml %2 lidokain+1ml pentoksifilin+1ml tiyokolsikozid+1ml izotonikle çözülmüş (1/5 oranında) B vitamin kompleksi+1ml izotonikle çözülmüş (1/5 oranında) meloksikam) 30 G 4 mm iğne ucu ile point by point ve nappaj teknikleri ile baş boyun bölgesinde belirlenmiş 11 özel noktaya enjeksiyon yapıldı. Tedavi 10 günde bir toplamda 4 kez yapıldı. Ağrı yanıtı VAS (visual Analog Skala) ölçeği ile değerlendirildi. Tedavi öncesinde ve her uygulamadan bir hafta sonra hastalara ait VAS skorları belirlendi.

BULGULAR: İlk uygulama da ağrıda azalma saptanmayan 5 hasta çalışmadan çıkarıldı. Diğer hastalarda tedavi öncesi ortalama 8 olan VAS skoru birinci uygulama sonrası 5, ikinci uygulama sonrası 4, üçüncü uygulama sonrası 2, dördüncü uygulama sonrası 0 dı. Takip süresince hastalar Oral analjezik-antienflamatuar ilaç kullanım ihtiyacı hissetmediler. Sonrasında ki 2 aylık takipte de migren atağı hiç gelişmedi.

SONUÇ: Mezoterapi; migren hastaların da güvenli ve etkili bir tedavi yöntemi olabilir.

Keywords: Mezoterapi; migren; ağrı



Over rezervi yetersiz infertilite olgularında farklı bir uygulama ile gebelik elde etme(vaka sunumu)

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Amaç: Over rezervi yetersiz infertilite olgularında matür oosit elde ederek gebelik oluşturabilmek.

Yöntem: Vakamıza Tüp bebek hormon tedavisi öncesinde intraovarian ve intravenöz CGF/CD34+otolog hücre transferi yapılmıştır. Anestezi altında yapılan bu uygulama için hastamızdan alınan 6 tüp kan santrifüj edilerek ayrıştırılan hücreler kullanılmıştır. Transferden hemen önce vaginal yolla tek seans ozonterapi ve tek seans extra meridyen akupunktur uygulaması yapılmıştır.

Bulgular: Bu uygulamadan 3 hafta sonra başlanan ovulasyon indüksiyon sürecinde 2 adet matür oosit elde edilmiştir. Döllenen iki adet embriyo 3.gün transfer edilmiş ve 12.gün yapılan kan analizinde gebelik (+) olduğu görülmüştür.

Sonuç: Tüp bebek şansı bile olmayan over rezervi yetersiz kadınlarda uygulanan CGF/CD34+ Otolog hücre uygulaması ile oosit elde ederek gebelik oluşturmak mümkündür.

Keywords: Infertilite;Yetersiz over rezervi;IVF;CGF;Otolog hücre tedavisi



Muskuloskeletal hastalıklarda mezoterapi ile ağrı tedavisi

Duygu Demirok

Muskuloskeletal ağrılı hastalıklarda; medikal tedavi seçenekleri kısıtlı olup tamamlayıcı tıp tekniklerinden faydalanılmaktadır. Mezoterapi bu teknikler içinde hızlı sonuç veren ve hem uygulaması hem de hasta tarafından tolere edilebilirliği oldukça mümkün bir uygulamadır. Ağrı mezoterapisinde genel olarak lokal anestezikler, NSAİİ ,myorelaksan, vazodilatatörler ve vitamin preparatları kullanılmaktadır. Mezoterapi seanslar halinde uygulanır, kullanım alanı geniştir. Bu tedavi hastaların kullandıkları ilaç miktarını azaltmalarına olanak sağlar. Sonuç olarak mezoterapi kost efektif, kullanışlı ve kolay uygulanabilir bir tamamlayıcı tıp tekniği olarak görünmektedir.



Mezoterapi Endikasyonları ve Uygulama Alanları

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Mezoterapi bir uygulama tekniğidir. Düşük miktarda ürünlerin intradermal olarak enjekte edilerek hedef organlardaki patolojilere yönelik bir tedavi uygulama şekli olduğu belirtilmiştir. Mezoterapi uygulama tekniği ile embriyolojik dönemde mezodermden köken alan deri, kıkırdak, kas veya yağ dokularının patolojilerinin tedavilerinde tamamlayıcı olarak kullanılabilir. Son yıllarda başta ağrı, kas-iskelet sistemi patolojileri, spor hekimliği, saç zayıflığı ve dökülmesi, bölgesel zayıflama ve selülit, deri lezyonlarının tedavisi ile derinin yaşlanma karşıtı tedavilerinin yanında Kulak Burun Boğaz Hastalıkları, Göz Hastalıkları, Kadın Hastalıkları alanlarında birçok hekimin başvurduğu tamamlayıcı bir tıp uygulama tekniği olarak tüm dünyada kabul edilmektedir.

Keywords: Mezoterapi;rejuvenasyon;zayıflama;ağrı



Hypnotic Rework Therapy, HRT

Haluk Alan¹

¹*PsikoTera, Akupunktur&Hipnoz, DENİZLİ, Türkiye*

Hypnotic Rework Therapy, HRT; it is a holistic approach, consisting of hypnotic techniques, with dual stimulation and running along the subconscious with consciousness. In this application, desensitization is obtained on the problem of bi-directional stimulation with some hypnotic techniques. Taking into account existence of an innate information processing system in the brain, it is possible to say that negative life experiences or traumas may have impaired the biochemical balance of the brain's physical information processing system. This imbalance may prevent the information processing process from reaching a solution. Traumatic processes; this leads to deterioration of the usual adaptation mechanisms. The authors; (Shapiro, 2016) argues that this process has ceased to process information and freeze information in the original state that created anxiety (Shapiro, 2016). Since traumatic events or negative life experiences lead to blockage in the information processing system, there is a need for new processing. The process remains in its ego-dystonic state when no reprocessing is performed. The aim is to make the process compatible with the ego. In such cases, Alladin (2013) says: Relaxation and relaxation are not enough, the important part of the treatment; is to reproduce the event that is traumatic. Your anxiety level decreases when you process again. HYT can be used in the therapy of emotional disorders caused by negative life experiences, especially in anxiety disorders, phobias and traumas, and in the therapy of future-oriented negative life expectations. HYT is performed in five stages; Consultant history, evaluation, preparation, 2- The application of hypnosis and self-worth with EMU, 3- Reprocessing of the target moment or image by bidirectional stimuli and hypnotic techniques, 4- Self-worthiness and bodily adaptation under PSH 5- Autohypnosis and termination. As a result HYT; It is remarkable with its quick results and easy applicability.

Keywords: HRT, ;hypnosis,; bidirectional stimulation



Travma Tedavilerinde Güvenli Yer Çalışması; SIĞINAK

Haluk Alan¹

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Travma tedavilerinin en önemli aşamalarından biri, güvenli yer uygulamasıdır. EMDR, HYT ve Hipnoz gibi özellikle uygulamaya dayalı terapilerde terapinin gidişatında yaşanabilecek olası abreactionlarda hastanın güvenli yere çekilmesi özel bir önem taşır. Bu durum hem terapist açısından hem de hasta açısından önemlidir.

Güvenli yer uygulaması sadece abreactionlar için değil aynı zamanda ego güçlendirici uygulama seansları için de kullanılabilir. Ego güçlendirici seans uygulaması için kişinin güvenli yere çekilmesi ve orada yönlendirilmiş imgeleme geçmiş yaşamda konuya özel (başarısızlığa karşı başarı, değersizliğe karşı değerlilik...) olumlu bir anının canlandırılması ve bunun ipucu bir kelime ile linklenerek posthipnotik otohipnoz olarak verilmesi etkin bir uygulama olarak görülmektedir.

Hem güvenli yer uygulamasının tek başına, hem de çeşitli uygulamalarla desteklenerek çeşitlendirilmesiyle travmalarda kullanımına yönelik bu çalışmada katılımcılara birebir uygulama gösteriminde bulunulacaktır.

Keywords: HYT, ;sığınak;güvenli yer



Akupunktur Uygulamaları İle Hipnotik Telkin Kombinasyonları Nasıl Yapılır?

Sinan Güzel¹

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Bilimsel çalışma konusunda böyle bir kombinasyonun hem oluşturulması, hem uygulanması hem de takibi zor olacağı aşikar bir durumsa da, her iki GETAT uygulamasını bilen ve sahada uygulayıcı konumunda olan hekimlerin çoğunun hem fikir olduğu bir konu, bu kombinasyonun sadece additif değil daha da ilerisi, yani sinerjik olduğudur. İster Modern tıp uygulamalarının ister GETAT uygulamalarının söz konusu olduğu birçok durumda, bilmeden verilen negatif telkinlerin hasta iyileşim sürecini olumsuz yönde etkilediği artık bilinmektedir. Ancak verilecek telkin konusunda bilgili ve yerinde yapılmış telkinlerin tam tersine süreci kolaylaştırdığı, hızlandırdığı gibi birçok pozitif sonuçları doğurduğu da kabul görmektedir. Akupunktur uygulamaları sırasında hipnotik telkinlerin uygulanabileceği birçok durum söz konusudur. Bilinçli ve hipnotik tekniklere uygun kurulduğu sürece, anamnez ve uygulama öncesi iletişimin sözkonusu olduğu tüm durumlardan tutun da uygulama sırasındaki kısa süreli temaslarda bile etkin telkinler büyük farklar yaratmaktadır. Hipnotik telkinler, terapi sonrası kısa durum değerlendirmeleri sırasında da çok kıymetli bir yere sahiptir. Hipnoz uygulamalarının ana kurallarından biri olan dikkat-enerji kanunu kendi başına kombinasyon gerekçesi olarak bile düşünülebilir. Konu ile ilgili yeterli bilimsel çalışma verileri ve kısa örneklerle dinleyici bilgilendirilmesi hedeflenmektedir.

Keywords: Akupunktur;Hipnoz;Terapi;Kombinasyon



Dışhekimliğinde Akupunktur

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DIŞ HEKİMLİĞİNDE AKUPUNKTUR

Dışhekim Tijen Secerli Dürer

ÖZET

Akupunktur, Uzak Doğu Tao felsefesini esas alarak ortaya çıkan bir tedavi yöntemidir ve WHO (Dünya Sağlık Örgütü) 1979'da akupunktur tedavisini bilimsel bir yöntem olarak kabul etmiştir.

Akupunkturun analjezik, homeostatik, otoimmün, sedatif, psikolojik ve motor fonksiyonları iyileştirici etkisi vardır. Akupunkturun bu özellikleri yöntemin TME disfonksiyonları, bruksizm, diş tedavisi sırasında bulantı, korku, kafa bölgesindeki sebebi bulunamayan ağrılar, yutkunma güçlüğü, dil ağrısı, trigeminus nevraljisi, kanama bozuklukları, hiper veya hiposalivasyon gibi diş hekimliğinde rastladığımız pek çok semptomda kullanılabildiğini sağlamaktadır.

ACUPUNCTURE IN DENTISTRY

Dt. Tijen Secerli Dürer

ABSTRACT

Acupuncture is a treatment method based on Far East Tao philosophy. WHO (World Health Organization) accepted acupuncture treatment as a scientific method in 1979.

Acupuncture has a healing effect on analgesic, homeostatic, autoimmune, sedative, psychological and motor functions. These features of acupuncture allow the method to be used for many symptoms encountered in dentistry such as TMJ dysfunctions, bruxism, nausea, and fear, headaches that occur without a reason, swallowing difficulty, tongue pain, trigeminal neuralgia, bleeding disorders, hyper or hypo salivation that occur during dental treatment.

Keywords: Akupunktur,;Dışhekimliğinde akupunktur;Temporomandibuler eklem hastalıklarında akupunktur



Hirudopunktur :Tıbbi Sülüklerle Akupunktur Tedavisi

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Hirudoterapi, tıbbi sülük uygulama noktası ve bölgesi değişik şekilde seçilebilir. Hasta organ üzerine, yara yeri etrafına, greft üzerine, toplar damarların trasesi boyunca, şiş bölge üzerine, eklem etrafına v.s. Aynı zamanda akupunktur noktalarına uygulama yapıldığında hem tıbbi sülüğün enzimlerinden faydalanmak hem de akupunktur noktasına uyarıcı etki yaratmaktadır. Bu uygulamaya da hirudopunktur denilmektedir.

Hirudopunktur uygulamasının önemi, eğer akupunktur noktalarına hirudoterapi yapılırsa sülük hem ciltte yara açarken hem de emerken oluşturduğu ritmik titreşim ve ses dalgasıyla akupunktur noktalarını uyardığı ve bu şekilde canlı akupunktur, yani hirudopunktur yapması, aynı zamanda enzimleriyle dokuları etkilemesini göz önünde bulundurarak uygulama yapılırsa tedavinin etkinliği daha da artmaktadır.

The leech application point and region can be selected differently. Applying on the patient organs, around the wound, on the graft, along vein vessels, on the swollen region, around the joint. At the same time, according to Chinese medicine, when the point application on the acupuncture meridians is made, it makes use of the enzymes of leech and creates a stimulating effect on the acupuncture point. This practice is also called 'hirudopuncture'. I mean, to do acupuncture with a medicinal leech.

The prominence of the practice of hirudopuncture is that if the practitioner practices the acupuncture points by knowing the acupuncture points and applies them to the acupuncture points, the medical leeches both stimulate the acupuncture points with the rhythmic vibration and sound wave generated during the wounding of the skin as well as during the wounding and so on, the effectiveness of the treatment is further increased if the treatment is carried out taking into consideration the influence of the organs and tissues.

Keywords: Hirudopunktur;akupunktur;tıbbi sülük



The use of leeches in reconstructive plastic surgery

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Purpose: The use of leeches to salvage compromised microvascular tissue transfers, replanted digits and ears, as well as after scar revision due to venous congestion.

Patients & Methods: Since 2003, the medicinal leech, *Hirudo verbana* is being used in the plastic surgery and orthopedic departments of 10 different hospitals in Israel (1). Overall, 111 patients (71 males and 40 females, 8-79 years old average: 35.9 years) with revascularized or amputated fingers and ears, as well as open wounds after accidents or surgical wounds and scar revision were included in the study.

Results: The patients with revascularized or replanted fingers were treated in average of 2.5 days and each finger was treated with an average of 5.7 leeches. Patients with flaps were treated in average of 3.4 days and each flap was treated with an average of 9.2 leeches. Overall, 67% of the fingers and 97% of the flaps could be saved. Patients received 1-13 units of packed blood cells (average 2.9). Adult patients were treated orally with 500 mg ciprofloxacin or trimethoprim sulfamethoxazole (800/160 mg) half an hour before beginning of hirudotherapy, while children were treated with trimethoprim sulfamethoxazole 10 mg/kg. The treatment was done only during the days of the leech therapy. Only two patients who were not properly treated prophylactically developed sepsis (2).

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Keywords: Hirudotherapy; Medicinal leeches; Plastic surgery; Replanted digits; tissue transfer



Maggot debridement therapy worldwide

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Maggot debridement therapy (MDT) grew out of observations on some fly larvae (maggots) to feed on necrotic material found in human and animal wounds. The sterile maggots of the green bottle fly, *Lucilia sericata*, are widely used for this purpose. Maggots are either introduced directly on the wound using a cage-like dressing or concealed in tea-bug-like nettings (also known as biobags). The first international biotherapy conference took place in UK in 1996, when at this occasion also the International Biotherapy Society was created. Since then 10 international conferences took place, two of them in Sivas and Istanbul. In the last 10 years MDT become very popular and today this treatment modality is being used in over 40 countries. Approximately 120,000 chronic wounds of 80,000 patients (average 1.5 wounds per patient) were treated with maggots. With an average of 3-4 treatment cycles per wound these makes 360,000 to 480,000 single treatments worldwide since the early 1990's. Since 1996, over 3,000 patient have been treated with MDT in Israel, close to 50% of them had diabetic ulcers, while additional 8% of patients were treated for their pressure sores. In over 80% of the cases a complete debridement was achieved. Today, at least 10 companies are producing sterile maggots in 7 countries, while there are close to 30 academic and other non-profit laboratories which are producing such maggots worldwide. In 2004, MDT received the permission from FDA to be used in the treatment of chronic wounds. Today, MDT is recognized by health authorities as a complementary treatment modality in many countries. Research over the past 30 years has flourished especially regarding clinical studies and biochemical and molecular investigations. Research has also focused on improved methods of application, including treatment of the biochemical extracts without the live maggot.

Keywords: Maggot debridement therapy; *Lucilia sericata*; Chronic wounds; Worldwide; Maggot production



Maggotların Yara İyileşmesindeki Etki Mekanizmaları

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Normal şartlarda yara iyileşmesi, dört fizyolojik aşamadan (homeostaz, enflamasyon, proliferasyon ve yeniden şekillenme/olgunlaşmadan) geçmektedir. Ancak kronik yaralarda, iyileşme genellikle enflamatuvar fazda durur ve buna bağlı olarak doku debris ile lokal enfeksiyon ve/veya proteazlar gibi yıkıcı ürünler yara yatağından uzaklaştırılmaz. Maggot debridman tedavisi (MDT) esnasında larvalar veya salgıları çeşitli mekanizmalarla kronik yaraların iyileşme aşamalarını etkileyerek kronik yaraların tedavisini olumlu yönde etkilerler:

- 1.Debridman: Larvalar tükürük enzimleriyle besinleri ekstrakorporal olarak sindirirler. Ölü doku, larvalarda bulunan proteolitik, glikolitik, lipolitik ve nükleaz enzimlerinin bir kombinasyonu ile ortamdaki uzaklaştırılır.

- 2.Dezenfeksiyon: Larvaların irritasyonu ile yaradan sızan ve larvaların kendi salgılarıyla oluşan bol miktardaki sıvı sayesinde bakteriler mekanik olarak dokudan uzaklaştırılır. Larvalar bakterileri sindirim sistemindeki proteolitik bazı enzimlerle bizzat imha ederler ayrıca ürettikleri antibakteriyel moleküller esas olarak Gram-pozitif bakterilere kısmen de Gram-negatiflere etkili olup biyofilm oluşumunu da engellerler.

- 3.Granülasyon: Yarada sürünen larvalar doğrudan ya da salgıladıkları allantoin ve üre gibi maddelerle dolaylı olarak granülasyonu uyarırlar. Ayrıca salgılarıyla yara pH'sının 7'ye yükselmesi, debridman ve dezenfeksiyon yoluyla yaradaki ölü doku ve bakteri yükünün azalması da granülasyonu olumlu yönde teşvik eder.

- 4.Oksijenizasyon: Larvaların salgılarıyla aktive edilmiş nötrofillerde elastaz salınımı ve H₂O₂ üretiminde inhibisyon görülür.

- 5.Antienflamatuvar etki: L. sericata salgılarındaki bazı maddeler nötrofil ve monosit gibi enflamatuvar hücrelerin göçünü ve işlevselliğini etkiler; kompleman aktivasyonunu ve monosit kemotaktik faktörlerin üretimini inhibe eder.

- 6.Anjiyogenez: Larva salgılarının pro-anjiyogenik etkisi bulunur yanı sıra vasküler endotel büyüme faktörü ve bazik fibroblast büyüme faktörü üretimini artırır. Çıkartılarındaki serin proteinazlar, fibroblast ve keratinosit motogenezi artırır.

Sonuç olarak larvalar, bir yandan kronik yaralarda oluşan pro-inflamatuvar immün yanıt seviyesini azaltırken, diğer yandan da patojenlerin öldürülmesinde kullanılan mekanizmaları

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etkilemeyerek imm n yanıtı doku onarımı lehine manip le edebilme yeteneđine sahip mikro cerrahlardır.

Keywords: larva tedavisi;kronik yara;yara iyileşmesi



Evidence-Based Medicine(EBM) research on TCM – traps and proposals for change

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- TCM has own paradigm and in accordance with such should be researched scientifically.
- TCM is an academic medicine same like Western medicine, but unlike the latter, it is more about treating a human being, instead of focusing primarily on the treatment of "disease entities" of sick organs, or even on the results of laboratory or imaging tests.
- What is regarded to be a disease in Western medicine is regarded merely to be a symptom in TCM whose genuine cause is often placed somewhere else then Western disease or pain. It is well illustrated by the sentence: One symptom – many causes, one cause – many symptoms
- TCM approach is based on own diagnosis and symptoms differentiation, officially accepted by WHO in ICD-11 document signed in May 2019.

Nowdays EBM is not owned only by Western medicine. Lack of proper understanding of TCM paradigm and not paying attention to proper methodology according to TCM is creating false results and judgments.

EBM in TCM will be reliable only if:

- research will be designed according to symptoms differentiation of TCM instead of western categorisation of diseases,
- moxibustion is integral part of acupuncture research,
- sham acupuncture treated as a placebo will be excluded as a non scientific approach,
- double blinded trials in acupuncture will be excluded because are impossible to do.

Adopting a "Black box" methodology in acupuncture based on TCM symptoms differentiation (+exclusions as above) is omitting questionable and easily undermined EBM studies and focusing on the comparison of therapy results from three points of view:

- without acupuncture, only treatment according to Western medicine methods,
- therapy using methods of Western medicine in combination with acupuncture (integrative medicine but taking into account possible adverse side effects of allopathic medicine),
- only acupuncture.

Using all above specifics will allow to show the efficacy, safety and effectiveness of acupuncture to a much higher degree than nowadays.

Keywords: Evidence-Based Medicine;Acupuncture;scientific research;mistakes in EBM;ICD-11



Is Integrative Medicine (IM) the future for TCM in the Western countries?

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Integrative approach is dominated by Western Medicine (WM).

TCM is an independent, academic medical system equal to WM. TCM is more save and economic than WM - it is proved by EBM.

Patients, at first, begin their treatment by means of Western Medicine. It means that TCM actually is not a competition to WM. Patients turn away from Western Medicine due to disappointment. They choose TCM consciously and wants to be treated in personalized, individual, holistic way and efficient. They search for the refunding their TCM treatment within public health insurance. Patients rights are more important than benefits of MDs, health care institutions and Big Pharma – it is their life and money.

It is worth striving for institutionalized cooperation and creating conditions in clinics and hospitals to increase mutual knowledge on various medical systems:

- without mutual understanding, education and good will of cooperation there will be no IM;
- opening the TCM wards and practices in hospitals, clinics and big medical centres.
- Institutional CPGs should be widely known (also public), respected by MDs, health care system and introduced into clinical practice within the IM.
- It is also important to respect the patient's rights to decide on treatment methods.

Education of MDs based on reliable EBM research taking into account the specifics of TCM (including TCM diagnosis and symptoms differentiation according to TCM), would allow them to find out about the safety, efficacy and cost efficiency of TCM. Is the first and necessary step.

It is large risk of resistance from the side of Big Pharma and medical authorities of WM and their institutions, but potential chance of support from insurance companies, interested in reducing treatment costs and treatment time.

The growing awareness of patients, also disaapointed of problems created by Western Medicine system will force the state system of health care to include TCM treatment and build more friendly IM.

Keywords: Integrative Medicine;Patients rights;TCM;holistic approach;individalised treatment

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The European TCM network - Answers for the European challenges

Gerd Ohmstede

European public interest in TCM/TM/CAM is growing. The challenges are growing as well: The attempts to relegate Chinese Medicine to the so-called “pseudo-sciences” has a long history but never before have the attacks been so widespread. Cooperation amongst TCM organisations, or even CAM, - seems much more important than before. Strategies and perspectives are there, we just need to act. The steps in Spain where TCM and CAM is under governmental fire are a good of how solutions can be found and how effective they can be.



Discovering and Acupuncture Ashi Points paravertebral

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Objective

Palpation of connective tissue is a standard method of diagnosis in physical therapy in Germany (Dicke et al. 1977). Paravertebral tensioned spots can be interpreted in connection of local and neuronal pain, muscle tension or vertebra blockage (Meyer 2011). Additional using a modified version of standing flexion test for each vertebral joint. At the tensioned spots is less mobility and imbalance. Both tests are a good method to discover and to acupuncture paravertebral deep myofascial structures: the Ashi point. The modified standing flexion test makes the palpated tensioned spots visible and could help to objectify the palpation of connective tissue.

Method

Thesis: Acupuncture Ashi points vertical 0, 5 - 1 cun deep, will reduce pain, muscular and connective tissue tension and spine imbalances.

1. First testing, 2. Relaxation treatment, 3. Second testing, 4. Soft triggering the resting spots, asking for Ashi points. 5. Acupuncture Ashi points vertical 0, 5 - 1 cun deep. 6. Third test.

Result and Conclusion

Acupuncture Ashi points vertical 0, 5 - 1 cun deep, will reduce pain, muscular and connective tissue tension and spine imbalances.

Method: Case reports. Documentation and interviews, video control (Meyer 2018, [youtube.com/watch?v=MYCurxqNg5A](https://www.youtube.com/watch?v=MYCurxqNg5A)).

Literature

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Keywords: Ashi Point;Palpation of connective tissue;Standing Flexion Test;Soft Triggering



Acupuncture for musculoskeletal degeneration

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Objective

Once of degeneration process of the human body is Musculoskeletal disorders that affect of the body movement or musculoskeletal system. The common of musculoskeletal degeneration problems are muscles, tendon, ligamen pain disability cause of anatomical changes of bones and joints.

Material and Method

Acupuncture and other related techniques are good enough to be used of this problem and better as one of integrative therapy to restoring the function of muscles, bones, joints and also reducing pain. Varieties and style of acupuncture techniques both the traditional and modern model of practices as needling or non needling acupunctures technique can also be applied to musculoskeletal degeneration problem and respond well to acupuncture.

Result

Outcomes of acupuncture treatment model to musculoskeletal degeneration problem is pain control, improvement and recovery function status, return to activity, minimized of disability. The musculoskeletal degeneration have multiple risk factor by age, gender, obesity, smooking and other aspects of systemic diseases such rhematoid arthritis, gout and diabetes mellitus.

Conclusion

Acupuncture are good enough as integrative therapy to treat musculoskeletal degeneration problem.

Keywords: acupuncture;musculoskeletal;degeneration



GELENEKSEL VE GÜNCEL TIP TEŞHİS YÖNTEMLERİ İLE KARŞILAŞTIRMALI VAKA SUNUMU

Dr. Doğu Yıldırım-İzmir

Sağlık: bütüncül hayat anlayışı içerisinde insanın fizyolojik, psikolojik . ruhsal, toplumsal ve yaşadığı çevre ile tam bir iyilik ve uyum halidir.

Anadolu coğrafyasında yaşamış modern tıbbın ve eczacılığın öncüleri Bodrumlu Hipokrates ve Bergamalı Galenos un sağlık tanımlamasından bu yana geçen 2500 yıl da bir değişim olmasa da Hastalık kavramı ve teşhis yöntemlerinde ciddi gelişmeler kaydettik. Özellikle Kuantum Fizik alanındaki gelişmeler Yaşam, Varlık , Sağlık ve Tıp alanında yeni bakış açıları kazandırdı. Geleneksel Tıp Okullarının (Anadolu-Çin-Hint) fizyopatolojide kullandığı Element-Humoral Patoloji kavramları güncel bilim sayesinde daha net anlaşılıyor.

Hipokratik Humoral Patoloji

VMT. Visseral Manuel Terapi: (Yüz Diañozu)

Bilgisayarlı Segment Elektrografisi : Ryodoraku (Electroaccupunctur)

Biyoeenerjetik Fonksiyonel Diyagnostik: Vegatest (Electrotomografi)

Konvansiyonel Tıp Teşhis Yöntemleri : (Laboratuvar-USG-Endoskopi...vs)

Otizm Spektrum Bozukluğu, Mide, Kolon, Meme... Patolojileri karşılaştırmalı vaka sunumu.

COMPARATIVE CASE STUDY BETWEEN DIAGNOSIS METHODS of TRADITIONAL and COMTEMPORARY MEDICINE

From holistic perspective, health is man's physiological, psychological and spiritual well-being and his ability to lead a harmonious life with the society and his surroundings.

Although there is no change in the definition of health as defined by Anatolian Hippocrates of Halicarnassus and Galenos of Pergamum, pioneers of modern medicine and pharmacology, there has been important improvements in the concept of illness and diagnosis methods in the last 2500 years. Especially, advancements in Quantum Physics have resulted with new perspectives in life, existence, health and medicine. Comtemporany science makes the element/humoral pathology concepts more tangible which were used in physiopathology by the traditional medical schools (Anatolia, China, India).

Hippocratic Humoral Pathology

VMT - Visceral Manual Therapy: (Face Diagnosis)

Computerized Segment Electrography : Ryodoraku (Electroaccupunctur)

Bioenergetic Functional Diagnostic: Vegatest (Electrotomography)

Conventional Medical Diagnosis Methods: (Laboratory-USG-Endoscopy, etc.)

Autistic Spectrum Disorder, Stomach, Colon, Mammae... pathologies - comparative case study.



Characteristics and trends of global clinical research in acupuncture

Dr. Ramón Maria Calduch

Abstract:

Acupuncture clinical research has been evolving in the last 10 years from simple observational study cases with no control group to actual RCTs (Randomized Control Trials) with all the necessary criteria to avoid risk of bias in the study.

Adequate Allocation Concealment is separating the act of randomization from the person recruiting participants. It is important as it prevents selection bias affecting which patients are given which treatment (the bias randomization is designed to avoid). It is important because Double Blind blinding cannot be applied to acupuncture as the clinician applying acupuncture knows which treatment the patient is randomized to.

STRICTA (Standards for Reporting Interventions in Controlled Trials of Acupuncture) have been designed to improve the Standards for Reporting Interventions in Clinical Trials of Acupuncture. It has been developed in conjunction with the CONSORT Group Executive and an official extension to the CONSORT Statement. The core content of the STRICTA guidelines consists of a checklist of six key items that are useful when designing the acupuncture trial.

Tendency to include SHAM control group is important because statistical significant differences between true and SHAM acupuncture confirms that acupuncture is not a placebo.

Finally, the use of standards for acupuncture application (such as the style of acupuncture, number of acupuncture sessions and session distribution, minimum training of the acupuncturist, etc.) prevents wrong needling application and thus optimizing acupuncture effectiveness.



İki farklı osteoartrit çalışması üzerinden düşük enerjili lazer tedavisinin mitokondriye etkisi ve kronik enflamasyondaki rolünün incelenmesi.

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¹ZG Ergonomi, Ergoterapi- Fizyoterapi, izmir, Türkiye

Amaç:

Düşük seviye lazer tedavisinin (Low Level Laser therapy, LLLT), sadece lokal uygulandığı diz osteoartriti çalışması ile uzak akupunktur noktalarının da tedaviye katıldığı el osteoartriti çalışmasının sonuçlarının, lokal dokunun mitokondriyal etkilenmesinin ve kronik inflamasyondaki rolünün literatürdeki çalışmalar ışığında değerlendirilmesi.

Yöntem:

Yüzüncü Yıl Üniversitesi FTR AB kliniğinde yapılan iki farklı çalışmadan birincisinde (lokal lazer çalışması) diz osteoartriti olan hastalar dizin medial ve lateral yanlarına LLLT lokal olarak uygulandı. Diğer çalışmada da (lazer akupunktur çalışması) el osteoartriti tanısı almış hastalara lokal ve uzak seçili akupunktur noktalarına lazer akupunktur uygulandı. Her iki çalışmanın kontrol gruplarına da yine aktif lazer cihazı görünümünde plasebo lazer uygulandı. Bütün gruplara gerektiğinde parasetamol almaları istendi.

Bulgular:

Her iki çalışmada da aktif lazer grubunda plasebo gruplara göre istatistiksel anlamlı iyileşme gözlemlendi. Birinci çalışma tez çalışması olarak yayınlanırken, diğeri ALD 2010, ABD kongresinde sunuldu.

Sonuç:

Her iki çalışmanın karşılıklı değerlendirilmesinde; lokal olarak 10 dakika uygulanan lazerin, lokal/uzak akupunktur noktalarına 30 saniye süre ile uygulanan lazer akupunktur tedavisine göre biraz daha etkin olduğu söylenebilir. Bu da literatürde yapılan çalışmaların ışığında lazerin lokal kullanımının mitokondrilere ve bölgenin kronik inflamasyonuna direkt etkisi ile açıklanabilir.

LLLT, özellikle kırmızı ve yakın infrared dalga boyunda uygulandığında mitokondrinin uyarılmasına neden olur. Lazer radyasyonunun foto-uyarıcı olarak işlev gördüğü mitokondrinin anahtar fotoreseptör molekülü, elektron taşıma zincirindeki Sitocrom Oksidaz C'dir. Serbest oksijen radikalleri, Adenosine Trifosfat oluşumunda önemli bir rol oynamaktadır.

LLLT'nin mitokondriler üzerindeki etkinliği, uygulanan doz, dalga boyu, uygulama süresi gibi değişkenlere bağlı iken ortalama ATP sentezindeki artış yaklaşık 3-6 saat sonra ortaya çıkmaktadır. LLLT anti-enflamatuar etkisinin araştırıldığı 12 laboratuvar modelinin tamamında tutarlı olan ve 633 ila 904 nm arasındaki LLLT uygulamalarının anti-enflamatuar etkisine dair güçlü kanıtlar vardır.

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Keywords: lazer ;akupunktur;mitokondri



Acupuncture For Stimulation High Growth of Body

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The growth history may be characterized by a continual transition from immaturity to maturity, or may involve a number of periods punctuated by rapid change from one stage to another.

Depending upon the life history of an organism, hormones may play different roles, the molecular pathways associated with growth, development and many of the hormones system, such as growth hormone in human represent highly derived variants from a hormone lineage that is much older.

Growth hormone is released from somatotropes of the pituitary gland and is under stimulatory control by growth hormone releasing hormone (GHRH), and under inhibitory regulation by somatostatin. Growth hormone release into blood stream, exerts its effects on a number of target organs including muscle, bone, adipose and liver, physiologically bone and muscle growth by a stimulation of amino acid transport, and increased protein synthesis.

The basic research laserpuncture using 635 nm semiconductor have an effect on histological changes in adolescent rats, but statistically are not significant. the ratio epiphyseal plate/chondrocyte hypertrophy on GV 20 is lower than control, whereas the ratio epiphyseal plate/chondrocyte hypertrophy in ST 36 and GV 20 + ST 36 are higher than control. Acupuncture stimulation increasing of height based on growth line bone and muscle investigated in 55 patients with short stature. All patients were diagnosed on the basis bone growth area by radiologist examination (distal radius), and the treatment model is acupuncture stimulation in some acupuncture points, LI 4, LI 11, ST 36, KI 3, LV 3 three times a week, complete course being constituted by 12 sessions and patients was treated with two/three course with one week interval. The following parameters in body height and body weight.

Conclusion

Acupuncture is one of the techniques to stimulate the growth of the body is gaining to height optimal, safe, inexpensive and expected effective and efficient.

Keywords: Acupuncture; Stimulation; High Growth; body



migreni olan kadın hastaların hacamat ve venöz kan ağır metal düzeyleri

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MikroRNA (miRNA)'lar, yüksek seviyede korunan DNA bölgelerinden kodlanan fakat proteine translasyonu gerçekleşmeyen, yaklaşık 18-24 nükleotid uzunluğunda, küçük RNA molekülleridir. Migren sık görülen, kısıtlılık yaratan ve tekrarlayıcı birincil baş ağrısı hastalığıdır. Bu hastalık için tek bir biyolojik gösterge henüz olmadığı gibi ilaç ile tedavi durumunda ilaç istismarı ile ilgili problemler ve ilaçların yan etkileri önemli problem olarak karşımıza çıkmaktadır. Günümüzde hacamat ile en iyi tedavi edilen hastalığın başında migren rahatsızlığının geldiği söylenebilir. Bunun yanında migren rahatsızlığında, mikroRNA'lar (miRNA'lar) potansiyel olarak yararlı tarama / tanı aracı olarak önerilmiş ve en etkili adayı (ları) tanımak için araştırmalar devam etmektedir.

Ağır metaller; düşük derişimlerde bile toksik etki gösterebilen elementlerdir. Genellikle kontaminasyon ve potansiyel toksisite ya da eko-toksisite ile ilişkilendirilen metaller ya da yarı metaller (metalloidler) olarak isimlendirilirler. Ağır metaller organizmaya ağız, solunum ve deri yolu ile alınır ve çoğu özel bir destek olmadan vücudun boşaltım yolları ile (böbrek, karaciğer, barsak, akciğer, deri) atılamazlar. Bu nedenle ağır metallerin büyük bir bölümü, biyolojik organizmalarda birikirler. Migreni ortaya çıkaran tetikleyici faktörler arasında, vücuttaki ağır metal ve toksin yükü gibi nedenler sayılmaktadır. Hacamat ile kanda birikmiş ağır metal ve toksinlerin atılmasının sağlandığı iddia edilmektedir. Bunun yanında, son yıllarda yapılan çalışmalarda, ağır metal toleransında miRNA genlerinin rolü olduğu da gösterilmiştir.

Yaptığımız bu çalışmada kadın migren hastalarında eş zamanda alınan hacamat kanı ve venöz kanda ağır metal düzeyleri (Hg, Mn, Co, Ni, As, Cr, Pb, Ag) ile mikroRNA (let-7b, miR-21, miR-22, miR-27-b, miR-34a-5p, miR-126-5p, miR-155-5p ve miR-382-5p) seviyeleri araştırılmıştır

Keywords: migren;ağır metal;hacamat



NABIZ MUAYENESİ

Dr.Doğuş Bahadır

ÖZET

Akupunktur nabız muayenesi, vücuttan muayene etmenin önemli bir parçasıdır. Nabızdan “**yin**” ve “**yang**” grubundaki organların enerji seviyesi ölçülür. Bu ölçüm akupunktur tedavi yönteminin en başta gelen ve en önemli teşhis yöntemidir.

Nabızın duyulma yeri, hastanın bilek üstünde radyal arterine basılarak doktorun parmak pulpası ile duyulduğu bölgedir.

Yin nabızı incelerken parmaklar ileri ve derine doğru hafifçe itilir ve bastırılır; parmaklar geriye çekilip yüzeyde tutulursa Yang nabızı hissedilir. Böyle bir ölçümle nabızların, derinliği, ritmi, kuvveti ve çekili incelenir. Genellikle nabızlar tempo, büyüklük, kuvvet, uzunluk, dolu veya boş, sıkı veya gevşek, kayıcı veya kaçıcı oluş bölgesi olmak üzere 8 kategoriye ayrılır ve 28 nabız çeşidi tanımlanmıştır.

Nabız muayenesi, sağ ve sol radyal arter bölgelerinden yapılır ve bu radyal arter bölgeleri Gun, Guan ve Çi olarak üç parçaya ayrılırlar.

Nabız yeri bulunurken önce Guan noktası bulunur ve sonra diğer noktalar bu noktaya göre bulunur. Hastanın nabız hissetmek için işaret parmak, orta parmak ve yüzük parmağı kullanılmalıdır. Orta parmağın pulpası radius kemiginin stiloid çıkıntısının karşısındaki noktaya konduğunda işaret parmağının pulpası Cun, yüzük parmağının pulpası ise Çi noktasına otururlar.



Akupunkturun etki mekanizması

Prof. Dr. Cemal Çevik

Akupunktur uygulamasının ağrıları giderdiği, inflamasyonu kontrol altına aldığı bir gerçeklik haline gelmiştir. Akupunkturun ağrıları nasıl giderdiğini açıklayan bir çok teori vardır(endorfin ve serotonin salınımının sağlanması, Kapı- kontrol teorisi vs). Bu işlevlerin moleküler ve hücresel mekanizması nasıl aktive edilmektedir? Bu aktivasyonunun izahı için nörojenik inflamasyon üzerinden mikroi inflamasyon deyimini kullandık. İğnelemekle açığa çıkan bazı moleküller nöronları uyarıyor olabilirlerdi. Bu kabulümze göre iğnelemekle oluşan mikro travma mikroi inflamasyona sebep oluyor. Oluşan mikroi inflamasyon nöroinflamasyon mekanizmasında olduğu gibi nöromediyatörleri salgılatılarak nöral sistemi çok küçük bir alanda uyarıyor. İğnelemekle oluşan hücre artık ve mediatörlerinin uyarılan nöral sistem CGRP ve Substans-P moleküller salgılıyorlar. Bu moleküllerde lökosit ve fibroblast gibi hücreleri harekete geçiriyorlar. Endoteller içindeki lökositleri(nötrofil ve monositler) ve Fasiada ki fibroblastları aktive oluyorlar. Aktivasyon çekirdek etrafı, stoplazmik ve ekstraselüler matriksi etkileyerek fibroblastlardan ATP salınımını sağlıyor, ATP, adenosin deaminaz enzimi ile adenosine dönüşüyor. Adenosin ağrıların kesilmesini sağlıyor. Hücre membranlarının iğnelemekle parçalanmasıyla oluşan prostaglandinler, bradikinin, K ortamına boşalıyor. Bu moleküllerin etkisiyle sinir uçlarından CGRP ve Substans-P salınmasıyla vazodilatasyon oluşuyor. Vazodilatasyonla beraber lokal bir ödem oluşur, böylece inflamatuvar bir cevap meydana geliyor.. Bir çok noktanın iğnelenmesiyle oluşan mikroi inflamasyonlar bir inflamasyon savunucuları gibi etki oluştururlar,ve inflamasyonu kontrol altına alırlar. Fasia'nın iğnelenip iğnelenin çevirilmesiyle oluşan fasiya gerilimi de aynı mekanizmayı çalıştırarak simbiyotik etki oluşturuyor.. Endotellere olan etki ile serbest radikal oluşumu ve bu oluşumla antioksidan sistemin aktivasyonu etkinin bir başka yönüdür. Serbest radikaller üzerinden oluşan inflamasyon antioksidan sistemin aktivasyonunu sağlayarak inflamasyon kontrolünde ikinci bir mekanizma oluşturur. Böylece akupunkturla, bazı moleküller, Fibroblastlar, monositler, nötrofiller gibi hücreler ve bunların içerisinde yer aldığı matriks etkilenerek etkinlik sağlanmaktadır.



YNSA Micro Acupuncture Technics

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Holistic NeuroTherapist

Trainer of the YNSA and Master's Tung Acupuncture

Developer and Trainer of the Essential Oil Acupuncture with Tongue Diagnosis

Yamamoto New Scalp Acupuncture is a special micro acupuncture system. In the Scalp zone, specified reflex areas are treated. Discovered by Dr. Yamamoto in 1960 and published in 1973 by the Ryodoraku Acupuncture Research on their 25th annual meeting, YNSA uses special somatotopic projections for treatment.

The somatotopies of YNSA can only be discovered under pathologic circumstances. The treatment is applied to somatotopies determined from the energetic condition of the patient and the depth of the pathologic condition. This allows a feedback by the knowledge reflected from the skin on a polarity, fascia, meridian and cellular basis, just like in other microsystem acupuncture systems such as Su-Jok and ECIWO.

Just like classic acupuncture, YNSA includes personalized treatment procedures. The stimulation or the failure to do so of the correct points can be determined during the same session. Diagnosis is very important for the right treatment in YNSA.

The YNSA micro acupuncture technique can be explained by microcalcification and holographic brain theories.

Keywords: YNSA;Neuroacupuncture;Microacupuncture



Ion Pumping Cords : Theory and Clinical Use

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Abstract

A valuable component of Japanese style acupuncture is the use of Ion pumping cords. Ion pumping cords were developed by Dr. Yoshio Manaka (1911-1989), a graduate and surgeon from the Kyoto Imperial University Medical School. Dr. Manaka began his research in acupuncture and traditional herbal Kampo medicine shortly after his graduation from medical school in the early 1935's, when the notion of using "traditional" medicine was frowned upon by Japanese authorities. Dr. Manaka continued his studies and research throughout the years leading up to the Second World War, at which time traditional medicine's reputation began to improve.

In 1941 Dr. Manaka published a paper on Oketsu (blood stasis). This paper was his first piece written on the eastern concepts, but would be crucial to the development of the Ion pumping cords. The principles and theories behind the Ion pumping cord were first demonstrated by Dr. Manaka during World War Two, while he was serving as an army physician. Without an adequate ration of medical supplies, a desperate Dr. Manaka turned to eastern medicine to accelerate the recovery and regeneration of burn patients.

The principle behind ion pumping is that a rebalancing of the ionic content of the damaged cells and tissues will improve natural cell recovery, as an imbalanced ionic content plays a role in slowing regeneration. In clinical cases ion pumping cords are regularly used to treat burn victims, or patients that experienced whiplash - though it should be noted that this is not an exhaustive list of treatment protocols in which ion pumping cords can be used. If we review the basic principle of Eastern Medicine, the Jing/Luo Theory or Channels/Collaterals Theory, we can see the integration of the ionic pumping cords in balancing the flow within these vessels.

In our presentation, we will cover history and origination of ion pumping cords, theory behind its use, how it is used in clinical settings and how we can incorporate into our treatment protocols. Dr. Manaka's Yin Yang Balancing technique, X-Model and extraordinary and Luo vessel patterns will be discussed.

Key words: Ion Pumping Cords, Japanese Style Acupuncture, Acupuncture

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NÖROBİLİMSEL AÇIDAN AKUPUNTUR VE BEYİN

Prof. Dr. Şükrü Torun

Bilindiği gibi akupunktur uygulamaları, karmaşık somatosensoryal algıları uyarak sensorimotor ve bilişsel süreçleri etkileyebilmektedir. Buradan hareketle, akupunkturun ilgili fonksiyonel beyin ağ organizasyonu üzerinde de bazı modüle edici etkilere sahip olduğu kolayca öne sürülebilir. Bu nedenle, akupunktur-fonksiyonel beyin ağı korelasyonlarının haritalanması için iğneleme sırasında beyin aktivitesini izleyen modern beyin görüntüleme tekniklerini kullanan sinirbilimsel çalışmalar son yıllarda artmaktadır. Bu konuşmada, fonksiyonel beyin ağ organizasyonu ve nöroplastisite kavramları ışığında, akupunktur-beyin etkileşimlerini konu alan yeni beyin görüntüleme çalışmaları özetlenerek tartışılacaktır.



The Effectiveness of Acupuncture in the Absence of Placebo.

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Cognition is needed to experience placebo. This raises the question of how much placebo effect is experienced by a patient with dementia where there is lack of cognition. This is a case series of 3 patients with impaired cognition (dementia) who demonstrate reliably witnessed responses to acupuncture. Given the similarity of responses, these reports provide evidence of a 'real' effect of acupuncture.

Case 1:

77-year-old woman with senile dementia having a 42-month history of trochanteric bursitis treated with five steroid injections over 2 years resulting in temporary relief. Dry needling at GB30 and tender point needling over the right greater trochanter was made. 3 weeks later, the husband told she was pain free. After 3 months she had another session which made her totally pain free again.

Case 2:

An 86-year-old woman having Alzheimer for 10 years with a 6-month history of numbness and weakness in her right arm and hand. Points BL10, GB21 and PC6 were selected, needled for 10 min. A week later her daughter reported that she had not experienced symptoms in her hand, After 2 more sessions, she was apparently symptom free, also for her arm.

Case 3:

74-year-old woman with senile dementia having severe bilateral osteoarthritis in her knees. Both knees were needled at SP9, SP10, ST36 and GB34 for 20 min. After 3 weeks she had been able to walk independently, and after the second session, she was even better.

Discussion: The placebo effect results in a physiological response releasing various chemicals into the central nervous system. Neuroimaging used by Pariente et al showed opioid release in brain response to expectation of effect for acupuncture. However in a patient with dementia with limited expectation, the opioid release was solely due to the active acupuncture treatment.

Including patients with dementia in formal studies may be useful to show the 'real' effect of acupuncture.

Keywords: placebo versus acupuncture; acupuncture in dementia; acupuncture and impaired cognition



Effects of acupuncture on weight loss among obese patients: Clinical trail

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Abstract

Objective: aim of this study is to examine the effectiveness of acupuncture for weight loss among obesity patient.

Methods: The study was carried out among twenty-three obese patients at Traditional and Complementary Medicine Practice and Research Center of Ankara Yıldırım Beyazıt University. The study period lasted for 10 weeks, each participant underwent a total of ten sessions of manual acupuncture treatment over 10 weeks. The acupoints are used mainly Sp 6, Liv.3, LI 11, St 24, and ear acupoints for stress, hunger, stomach, mouth and liver as well as some additional points according to patient's condition. They were assessed pre and post acupuncture measurement, body weight and body mass index were measured before treatment and 10 weeks.

Results: The results showed significant difference between pre and post BMI and weight ($P=0.00$). The mean body weight of the participants before the treatment was 94.30 ± 16.17 kg and after the 10 weeks was 87.60 ± 16.43 kg. before the minimum weight was 70.50kg after 10 weeks was 66.10 kg while before the maximum weight was 136.60kg after 10 weeks was 127kg. The mean BMI before the treatment was 37.4 ± 6.9 and after 10 weeks was 34.7 ± 6.8 . Before the treatment, the maximum BMI was 61.50 and after 10 weeks was 57.20 while before the treatment the minimum BMI was 31.30 after 28.24 while. The lowest weight loss was 1.1kg while highest weight loss was 15kg.

Conclusion: Acupuncture was effective in enhancing weight loss among obese patients.

Keyword: Acupuncture, weight loss, obese patients, clinical trail

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AURİKÜLADA LİMBİK SİSTEM PROJeksiYONU LİMBİK SYSTEM PROJECTION IN THE AURICLE

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Özet:

Limbik sistem, memeli beyinde duyguların oluşması ve iletiminden sorumlu olan yapılar ve bunlar arasındaki döngülerden oluşmuştur. Bellek oluşumu ve depolanması, öğrenme, davranışlar, emosyonel cevaplar, ruh hali, motivasyon, karar verme, dikkat ve odaklanma, hormon salgılanması, ağrı ve haz duygusu ve koku duygusuyla ilgili işlevleri vardır. Limbik sistemin beyin hangi kısımlarını kapsadığı tartışmalıdır. Ancak genel olarak amigdala, mamiller cisim, hipokampus, gyrus singulat, nükleus akkumbens, talamusun ön kısmı, hipotalamus, entorinal korteks ve forniks gibi beyin yapılarının bu sistemin parçası olduğu kabul edilir. Otonom sinir sistemi ve endokrin sistem üzerine etki ederek çalışan bu sistemin kulak kepçesindeki projeksiyonunu bilmek birçok hastalığın tedavisi açısından büyük önem taşır. Yeme ve madde bağımlılığı, endokrin hastalıklar, kronik ağrılar, öğrenme güçlüğü, dikkat eksikliği bu hastalıklardan yalnızca birkaçıdır.

Anahtar kelimeler: Limbik sistem, Auriküla, Bellek, Emosyonlar



Kronik Pelvik Ağrılı Hastalarda Ağrı Engellilik Ölçeği ve Ağrı Düzeyi Üzerinde Akupunktur ile Nonsteroidal Antiinflatuar İlaç Etkinliğinin Karşılaştırılması

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ÖZET

Amaç: Kadınlarda kronik pelvik ağrı (KPA); devamlıdır, siklus ile ilişkisizdir, altı aydan uzun sürer. Non Steroid Anti İnflamatuar İlaçlar (NSAİİ) ağrı tedavisinde ön plandadır. Yetersiz olduğunda tamamlayıcı tıbbi başvurulabilmektedir. Akupunkturun KPA'da kullanımı üzerine çalışmalar bulunmaktadır. Çalışmamızda, KPA'da NSAİİ ve akupunktur etkinliklerini karşılaştırmayı amaçladık.

Gereç ve Yöntem: Ankara Atatürk E.A.H. Jinekoloji Polikliniği'ne bir yıl süre içinde altı aydan uzun zamandır olan kasık ağrısı, karın ağrısı şikayetleriyle başvuran; organik patoloji olmadığı gösterilen hastalardan, hasta isteğine göre 38 hastaya akupunktur yapılmış, 30 hastaya NSAİİ verilmiştir. Tedavi önce ve sonrasında her iki gruba ağrı şiddetini belirlemek için Vizüel Analog Skala (VAS) ve ağrının hayat kalitesi üzerine olan etkisini değerlendirmek için Ağrı Engellilik Ölçeği (AEÖ) uygulanmıştır.

Bulgular: Akupunktur grubunda tedavi öncesi AEÖ puanı ortalama 47,1 iken tedavi sonrası 24,9'du. Ortalama VAS puanı akupunktur grubunda tedavi öncesi 6,8 iken tedavi sonrası 3,7 idi. NSAİİ grubunda tedavi öncesi AEÖ ortalama puanı ortalama 25,7 iken tedavi sonrası 15,5'du. Yine bu grupta ortalama VAS puanı tedavi öncesi 4,4 iken tedavi sonrası 2,6 idi. Tedavi öncesi ve sonrası görülen düşme her iki grupta istatistik olarak anlamlı idi. Sonuç: Her iki grupta da AEÖ ve VAS skorlarında anlamlı azalma olmuştur. Dikkat çeken, akupunktur grubunun tedavi öncesi AEÖ ve VAS skorlarının NSAİİ grubuna göre yüksek olmasıdır. Bu hastalar, NSAİİ dirençli KPA olarak yorumlanabilir. Akupunktur tedavisi, NSAİİ dirençli KPA'da da hastalar için hayat kalitesini artırma ve ağrı düzeyini azaltmada bir seçenek olabilir.

	Tedavi Öncesi AEÖ	Tedavi Sonrası AEÖ	p	Tedavi Öncesi VAS	Tedavi Sonrası VAS	p
Akupunktur	47,15±11,84	24,95±14,16	< 0,001	6,89±1,57	3,78±1,91	<0,001
NSAİİ	25,70±12,32	15,53±11,17	< 0,001	4,40±2,44	2,63±2,20	<0,001

Keywords: Kronik pelvik ağrı; Akupunktur; Nonsteroid Antiinflatuar İlaçlar



Scalp Acupuncture (YNSA): Therapy in Parkinson's disease as multimodal approach

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By demonstrating (out of research of the autor), that prolactin with acupuncture of a single point - the ZS-point on the **Yang** side -was lowered *measurable by laboratory tests*, the evidence for dopamine-agonistic action at this point is confirmed.

Being capable of decreasing raised prolactin just as efficiently as medication with bromocriptine, a dopamine agonist, it stood to reason that the same acupuncture would yield a therapeutic effect when treating patients suffering from Parkinson.

This acupuncture can improve the numerous symptoms of Patients suffering of Parkinson. In Parkinson patients, acupuncture of the ZS-point on the cranial **Yin**-side brought forth symptoms, which equaled those of Dopamine overdose.

In the next practice study it has been investigated, how acupuncture (TCM and scalp) combined with structured movement can get a better effect.

In this speak I show the additional effect of a mulitmodal approach as acupuncture (scalp), sports, diet and phytotherapy.

Keywords: Parkinson's Disease;Scalp Acupuncture;New Somatotope;Dopamine;Multimodal



AKUPUNKTUR UYGULAMASINDA DERİN VEYA YÜZEYEL İĞLEMENİN TEDAVİ ÜZERİNDEKİ ETKİLERİ

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Yüzeysel ve derin iğneleme akupunktur tedavisinin iki temel yöntemidir. Uygun iğneleme derinliğinin akupunkturun etkisinde çok önemli olduğu söylenmekteyse de altta yatan mekanizma hala net değildir. Yüzeysel ya da derin iğnelemenin göreceli avantajlarını keşfetmek için değişik doku katmanlarına yapılacak iğnelemelerin nöral özelliklerini kavramak gereklidir. Derin iğneleme sırasında iğne kas arasına yerleştirilir. Açık ki iskelet kasları hem motor(efferent) hem de duysal (afferent) sinirler içerirler. Aksonlar ,iskelet kasını inerve eden spinal ventral horn'daki α ve γ motor neuronlardan türetilir. Duyusal lifler ise kas içiciklerinin içindeki özel duysal reseptörlerle ilişkilidirler. Yüzeysel iğneleme sırasında iğne esasen ciltin subkütanöz dokusu ile temas kurar(epidermis ve dermis katmanlarıyla). Bu doku katmanları, vücut yüzeyine uygulanan mekanik , termal ve ya nosiseptif stimulus dedekte edebilen duysal resptörleri içerir. Bu reseptörler sinir sonlanmaları , Pacinian korpüskülleri ,Merkel diskleri, Meissner korpüskülleri, Ruffini sonlanmaları ve folikle resptörlerini içerir. Derin iğnelemenin tersine ,yüzeysel iğnelemeden kaynaklanan nöronal sinyaller merkezi sinir sistemine değişik duysal reseptörler ile iletilirler. Akupunkturun etkisini duysal afferent stimölasyon ile gösterdiğine inanılmaktadır. Motor nöronlar ise akupunktur ile direk olarak uyarılır. Klinik bakış açısıyla ,yüzeysel ve derin iğnelemenin birbirlerine karşı avantaj ve dezavantajlarının göz önünde bulundurulması önemlidir. Derin iğneleme teorik olarak damar sinir ve diğer yapıların yüksek hasarlanma riskiyle ilişkilidir ve tedavi sonrası ağrı daha fazladır. Derin iğnelemenin tersine yüzeysel iğneleme yalnızca sübkütanöz ve dermal dokulara penetrasyonu içerir ve komşu dokular için düşük düzeyde hasar riski vardır. Her ne kadar akupunktur sinyallerinin etkisi yüzeysel iğnelemeye nazaran derin iğneleme ile daha kuvvetli ortaya çıkarılsa da bizler iğne derinliğine karar vermekte avantaj ve dezavanyajları göz önünde bulundurmalıyız.

Keywords: akupunktur;derin iğneleme;yüzeysel iğneleme



KNOWLEDGE, ACUPUNCTURE-NEUROSCIENCE, WILL: THE PILLARS OF MEDICAL SCIENCE

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KEYWORDS: Scientific Studies about Acupuncture;

OBJECTIVES: sharing the results of my research in the field of neuroscience, of the most recent discoveries of physio-anatomy and of the ancient Art of Acupuncture, which demonstrate a close and precise interconnection between cerebellum, brain and physical body.

METHODS: My researches and my studies have led me to understand the close and precise relationship that exists between the cerebellum, the brain and the physical body. I consider the cerebellum as the seat and the source of all the qualities and virtues inherent in human beings. This organ, if correctly stimulated, can send to the brain the information necessary to provide a "map", a "photograph" of the state of health of all the organs of the human body; the correct reading of this image can lead to the exact diagnosis and, consequently, to the remedies to be applied.

RESULTS: clinical cases:

- Amputation of a third of the left foot
- Paralysis of a child following surgery

DISCUSSION / CONCLUSIONS: the ancient Art of Acupuncture can be understood through neuroscience, which allows us to fully explore the brain, and through the most recent discoveries of physio-anatomy. My intention is to focus attention on what I consider the pillars of Medical Science: Knowledge, Acupuncture-Neuroscience, Will.

Through Knowledge and Neuroscience we can bring to light the true essence of Acupuncture as understood and practiced at its origin, then, through a correct use of the Will, we can start the healing process.

The disharmony of the human being is the consequence of a wrong energetic direction, therefore to restore the state of well-being three things are necessary: the knowledge of the real constitution of the human being in its physical, mental and spiritual dimension, to have a clear vision of acupuncture and the will to be healed.

Keywords: Scientific Studies about Acupuncture;Neuroscience;Agopuntura



Reevaluation of Chinese Classical Meridian Therapy for a variety of diseases from orthopedic to refractory diseases. HolloSalus

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Abstract :

In contrast to modern Japanese Popular acupuncture world with multiple needlings in tendered sites, Professor Eiji Satake taught me how to treat the diseases to control the disharmony of qi stream by delicate handling minimal number of needles under prudent pulse condition diagnosis and principally depending upon or putting aside the affected line, but depending upon judgment of excess or deficient pattern of the meridian obtained through Chinese classical theories, including meridian direction relation, in exterior interior combination, yin- yang theory of the 5 elements, exterior –interior conjugation theory, Eight extra meridian as well as Three yin three yang theory, to retain a few needles for 10 mins. on the connecting point to drain or on the source point to supply respectively . This acupuncture method is principally depending upon Chinese classic Huandineijing written BC2300 that promoted human innate capability to recover and actually treated not only orthopedic lumbr diseases but also RA, atopic dermatitis, asthma, diabetes , gastritis, colonic polyps, ulcerative colitis, period pain, infertility, et cancer. In combination with modern medical knowledge I treated varying 170,000 patients through the past 17 years. I designated this method as Hollosalus .

Conclusion : Refined pulse condition diagnosis and delicate manipulation of minimal number of needles depending upon Chinese classical Huandineijing gave duly effects on innate ability enough to treat varying diseases from orthopedic disease but as far as many refractory diseases as well as cancer. This Hollosalus methods reevaluated retrospectively was found more effective to a wide range of diseases than we expected and should be more recommended widely to all accupunturists in the world./ 265d words



Introducing “Fateh Massage”; an Iranian Traditional Medicine Deep Tissue Release Method

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Massage is one of the most effective ways to reduce musculoskeletal-derived disability and pain to improve health and quality of life. Iranian traditional medicine is one of the ancient systems of traditional medicine with a deep and rich treasure of philosophy, science, knowledge, trials, clinical observations, and experiments.

Nowadays, authorized medical establishments like World Health Organization (WHO) emphasize the research and reuse of traditional medicine of each nation, which are valuable assets. As WHO Traditional Medicine Strategy (2014-2023) declares, many traditional medicine skills and knowledge have been transferred generation to generation orally which should be well preserved.

In this regard, Fateh massage -named after its founder, Mohammad Fateh- is to be mentioned. Fateh family are famous for passing this skill in a father to son manner for centuries, and now this method is being taught and investigated in the university. It is a kind of deep tissue massage that affects musculoskeletal, peripheral and then central nervous systems, and blood circulation by stimulating specific parts of upper and lower extremities. It is a combination of skill, technique, and patient cooperation to calm the body and reduce pressure on vertebral column and joints along with increasing body strength. The aim of this study is to present and analyze this special effective kind of massage.

Keywords: Iran;complementary and alternative medicine;massage;Fateh;musculoskeletal



The effect and value of acupuncture on improving immune function in adjuvant therapy of lung cancer

Fan Lihong

In recent years, the incidence and mortality of lung cancer have been increasing, many patients are diagnosed with advanced stage and cannot obtain the desired curative effect. Traditional Chinese medicine therapy has good application effect in improving the quality of life, reducing the toxic and side effects after chemotherapy, improving the immune function and prolonging the survival period. Traditional Chinese medicine believes that the occurrence, development and outcome of lung cancer are closely related to emotions, thus Liver-soothing, Qi-regulating and Emotion-regulating should run through the whole process of lung cancer treatment. Acupuncture, a common form of traditional Chinese medicine, have confirmed the therapeutic effect of on lung cancer patients by clinical studies. This study aims to research the effects of multidisciplinary comprehensive treatment mode, especially the effect and value of acupuncture on improving immune function in adjuvant therapy of lung cancer. We will focus on the benign, bidirectional, and holistic treatment characteristics of acupuncture in the treatment of lung cancer. Through clinical cases, this paper discusses the physiological functions of acupuncture in regulating the physiological function of meridians and viscera channels of lung cancer patients, improving the immune function, inhibiting the growth of tumor, so as to improve the quality of life of patients with lung cancer and prolong their survival.



The Mechanism of Electroacupuncture Inhibiting Feeding to Improve Obesity with Insulin Resistance via Regulating SIRT1/FoxO1 Signaling Pathway in Hypothalamus

Liang Fengxia

Obesity is the main reason to induce insulin resistance (IR), which is the core pathological mechanism in the procedure of obesity induced type 2 Diabetes Mellitus (T2DM) and related disorders. It is necessary to intervene obesity in early stage, which can not only improve IR, but also prevent it from suffering T2DM. Hypothalamic is the central of regulating food intake, the POMC and NPY neuros in arcuate nucleus (ARC) involve in the energy homeostasis by secrete peptides and hormones. As a deacetylase, SIRT1 plays a vital part in energy homeostasis by regulating the acetylation level of FoxO1 which is the substrate of SIRT1. In our study, we use the high-fat diet induced IR and obesity rat (HIOR) as model, and investigated the effect of electroacupuncture (EA) on SIRT1 and FoxO1 of hypothalamic, observed the orexis-related peptide which is regulated by FoxO1 in different acetylation levels in HIOR. Trying to illustrate the possible central mechanism of EA on improving the IR and obesity via regulating SIRT1/FoxO1 signaling pathway, and provide experimental evidence for application on obesity and IR-related disorders by acupuncture clinically.



Health Care Point and Preventive Treatment of Disease

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Chronic diseases seriously affect human health in today's world. How can acupuncture and moxibustion play its role in the prevention and treatment of chronic diseases?

Under the guidance of the thought of preventing diseases by acupuncture and moxibustion, starting with the health-care points, this paper expounds the cognitive basis of the health-care points, puts forward the compatibility method of acupoint selection, and reports the research results of scientific experiments and clinical application. At the same time, the theoretical framework of preventive treatment, the characteristics and advantages of acupuncture and moxibustion for preventive treatment were sorted out.

This paper focuses on the relationship between health-care points and primordial qi and primitive acupoints, and expounds the function of health-care key points in solidifying and protecting congenital basis (kidney) and postnatal basis (spleen and stomach), which integrates the *Biao-Ben Acupoints Combination* and acupoints with searching for the primary cause of disease in treatment.

Research shows that, the key health care points ST36/Zusanli and CV4/Guanyuan have the function of improving human immunity and fatigue state. *Biao-Ben Acupoints Combination* have good therapeutic effect on preventing and treating major diseases such as myocardial ischemia and pre-diabetes mellitus. And for long-lasting vertigo, chronic enteritis, chronic cough, hemifacial spasm, facial muscle atrophy and infertility were also reported as cases, etc.



Moxibustion and Acupuncture Influence the Gastric Mucosa related cytokines of Chronic Atrophic Gastritis and the Changes of Metabonomics in Gastric Tissue

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ABSTRACT

Objective: This study aim to observe the protective effect of moxibustion and acupuncture treatments for chronic atrophic gastritis (CAG) rats, and the influence of gastric tissue metabolism of CAG rats by ¹H NMR after treatments and to discuss the response mechanism of moxibustion and acupuncture in metabolite level.

Methods: Male SD rats were modeled CAG for 12 weeks by N-methyl-N'-nitro-N-nitrosoguanidine (MNNG), the general behavioral changes were observed and record, the histopathological changes of gastric tissue were observed by HE staining. The changes of CAG related cytokines (EGF, EGFR, ERK and p-ERK) were measured by IHC and WB. The changes of differential metabolites of gastric tissue were identified by ¹H NMR.

Results: After modeling, compare with control, the CAG rats showed unhealthy mental state and weight loss, the pathological changes were observed in gastric tissue. EGF, EGFR, ERK and p-ERK increased remarkably. After treatments, the mental state of rats became better, the pathological changes of gastric tissue improved. The CAG related cytokines tended to normal. In metabonomics, differential metabolites were screened between control and model groups, a part of them in treatment groups appeared improved compare with model group.

Conclusions: Moxibustion and acupuncture can treat CAG by regulate CAG related cytokines to repair gastric mucosa , and in metabonomics, moxibustion and acupuncture can regulate part of the metabolites in key metabolic pathways to repair gastric mucosa, but the further studies are necessary to deeply explore the pathogenesis of CAG and the influence after acupuncture and moxibustion treatments, and make clear the difference between acupuncture and moxibustion.

KEY WORDS

Chronic atrophic gastritis; Moxibustion; Acupuncture; Metabonomics



The Operation and Clinical Application of Needle-handle Twisting

Li Tie

Abstract:By reviewing the ancient and modern literature recording acupuncture of Fei method, comparing with techniques and analysing clinical application makes a conclusion that the main element of acupunctur Fei method is rotation. There are 4 kinds of operations: (1) The horizontal rotation motion is given priority, and after several times of rubbing the needle, releasing of the two fingers suddenly brings stimulation to increase the sensation of Qi; (2) Adding vertical force on the basis of the horizontal rotary, which turns with small angle, operates with light force and handles down with priority is known as tonifying, and which turns with big angle, operates with heavy force and handles up with priority is called elimination of evil; (3) Give the needling deep after entering; (4) Rapid rotary needle insertion is termed as “needle fly”.

**Study on Clinical Experiences of Fire Needles Method Combined with Siwu Decoction in Treating Chronic Skin Diseases**

Ma Jun (College of Acupuncture and Orthopedics, Hubei University of Traditional Chinese Medicine)

Summary: This article analyzes and summarizes clinical experiences of using fire needles combined with Siwu Decoction to treat chronic skin diseases in recent years, in order to improve the understanding of this type of disease and provide insights for future treatment. Chronic skin diseases with a long disease duration and recurrent feature, such as urticaria, eczema, neurodermatitis, psoriasis, etc often are accompanied by skin itching, local redness, thickening of skin after skin lesions and other symptoms. Clinically, Western medicine typically adopts oral medication for symptomatic treatment while Acupuncture in TCM has gradually been recognized as a safe and more effective treatment alternative medical practice. According to years of clinical practice, it is proved to be a safe and effective practice to treat chronic skin diseases with fire needles together with Siwu Decoction.

Introduction:

Chronic skin diseases with a long disease duration, such as chronic urticaria, chronic eczema, neurodermatitis, psoriasis, etc., is considered to be a lingering disease. They are generally hard to be cured due to its recurrent features.

Clinical manifestations include skin hypertrophy after skin lesions and serious itching, seriously affecting people's quality of life. Reducing skin hypertrophy and relieving unbearable itching are often urgent needs of patients. The above skin diseases may be associated with Th1 type cytokines mediated cellular immunity, cytotoxic T cell (CTL) growth and activation, macrophage activation, delayed hypersensitivity allergic reactions, family genetic history, neurological dysfunction, lack of exercise, dietary and emotional and other related factors^[1]. Clinically, antihistamines and glucocorticoids are the main treatments, such as loratadine, ebastine, prednisone, etc. However, long-term use of these medications will result in drug resistance, gastrointestinal irritation, severe liver damage and adrenal cortical dysfunction, decreased immune function and other side-effect reactions^[2].

Chronic skin disease patients tend to have problems of blood deficiency, therefore, Siwu Decoction is a widespread prescription in TCM for treatment of blood-insufficiency and this method can *enrich blood* (BuXue) and *regulate blood* (Tiao Xue), so that toxins in the blood can be purged. As one of the treatments for acupuncture and moxibustion, fire needles have the functions of strengthening the body resistance to eliminate pathogens in body, relieving itching, smoothing passages through which vital energy in body circulates, replenishing Qi and blood, and balancing yin and yang.^[3] The clinical features of chronic skin diseases are summarized and analyzed in the following part.

1. Chinese Medicine Theory on Chronic Skin Diseases

In traditional Chinese medicine (TCM), although the etiology and pathogenesis of skin diseases is complicated, it can come down to internal or external factors. The external causes are mainly wind, dampness, heat, insects and toxins. The internal causes are mainly seven emotional factors (like emotional distress and anxieties), improper diet, and liver-kidney



deficiency . The pathogenesis is mainly due to Qi and blood disharmony, visceral dysfunction, toxic accumulation, resulting in disharmony in body. Patients of chronic skin diseases such as chronic urticaria, chronic eczema , neurodermatitis, psoriasis, etc., due to long-term skin itching, have difficulties in sleeping, appetite loss, etc . All these will damage balance of body, result in blood deficiency and cause itchy, dry, rough skins , desquamation , peeling, hypertrophy, hyperplasia of skins . Ailments due to cold or wind(FengXie) are long-lasting diseases, and they are the leading causes of the diseases caused by external factors according to TCM theory. Therefore, chronic skin diseases are caused by the above mentioned two reasons and triggered by FengXie.

2. Modern medicine's understanding of Chronic Skin Diseases

Chronic urticaria, chronic eczema, neurodermatitis, psoriasis and other chronic skin diseases are a kind of cellular benign hyperplasia caused by internal and external factors. The currently recognized pathogenesis of chronic urticaria is mainly the activation and degranulation of mast cells, the release of histamine, serotonin (5-HT), synthetic cytokines and inflammatory mediators. All these pathogenesis can cause dilated blood vessels and increased vascular permeability, eventually causing dermal edema^[4] . The causes of chronic eczema are caused by a variety of external and internal factors. The external factors are related to physical and chemical factors. Physical factors include the living environment, sunlight, ultraviolet, coldness, dampness , heat and other climatic conditions. Drying, scratching, friction are the stimulating factors and chemical factors mainly include contact with rayon, silk, leather and other materials, applying cosmetics, using spices and dyes, detergents, soaps and other chemical regulators; Internal factors are genetic, immune reasons related to blood circulation disorders , microbial infection, endocrine and allergens. The pathogenesis of neurodermatitis is mainly related to the local immune inflammatory response and corresponding inflammatory cells and cytokines. The exact mechanism remains to be further studied.^[5] . Studies have shown that psoriasis has multiple genetic reasons, and its pathogenesis is related to many factors such as apoptosis, proliferation, immunity, inflammation of cells , and nervous media related to cells.^[6] . At present, the first-line treatment for chronic skin diseases is mainly second-generation antihistamines. Glucocorticoid and immunosuppression are often used together with antihistamines. However, it is difficult to control symptoms by a single drug and therefore it is necessary to continuously increase the dosage and easy to produce drug resistance and other side-effects.

3. Fire Needle Therapy

Fire needle therapy refers to the treatment method of treating diseases by burning the needle with a fire flame, holding the needle handle with thumb and forefinger, and quickly piercing the needle tip into the local skin muscle or acupoint. In the process of clinical treatment of chronic skin diseases, doctors will select the acupoint where the itching is heavier and the rash is obvious, with dry and thickened skin. In most cases to treat skin diseases, 0.32×40mm Universal brand needle would be burned red and then quickly pierced into skin , and then the needle is quickly withdrawn . According to different condition, 2-4 parts are selected to apply fire needle piercing. Each part is punctured by 5-10 points per unit area according to the size of the lesion. Fire needle therapy has a long history in China,



and it was first recorded in "Lingshu-Official Guidebook for Acupuncture". In this book, it is emphasized that if the needle point is not red, you can't apply it to treat disease. In another book entitled "Acupuncture and Fire Needle", it states: "The needle should not be too deep to cause injuries to the meridians, nor should it be too shallow to treat disease." That is to say, emphasis should pay attention to the depth of acupuncture and thickness of muscles in applied area as well as depth of blood vessels to determine the depth of acupuncture according to the individual differences of the patient, such as physical fitness and age, etc. The fire needle acts on the muscle surface through acupuncture, which makes the skin texture open and ailments due to cold or wind (FengXIE) can be cured and eventually itching stops. The fire needle combines warmth of needles and warmth of the fire, and special effect of warming can be enhanced. This can not only break down clots in the meridians, but also enhance Qi and blood flowing, treating all kinds of ailments caused by coldness according to TCM theory. In addition, Fire helps to enhance the yang to treat various diseases of Qi deficiency and yang deficiency. A scholar named He Puren^[7] believes that fire acupuncture therapy can promote the flow of blood and nutrients on the surface of the body and can strengthen the nutrition so as to ease itching. Modern medicine believes that thermal effect of fire needles can improve micro-circulation in lesion area and accelerate the absorption of inflammation and metabolic substances. Studies have shown that through the observation of local infrared thermal image of acupuncture, temperature of the lesion after treatment with fire needle is significantly improved, suggesting local blood circulation and metabolic improvement.^[8-9] In addition, the fire needle can also achieve the work of relieving itching by reducing the production of itching substances according to Yu Wen et al.^[10] Her study found that fire needles can also reduce abnormally elevated serum IgE levels in asthma patients and reduce both allergen damage to the human body and release of allergic substances.

4. Chinese medicine Siwu Decoction

Siwu Decoction is the basic prescription to treat blood stasis syndrome. Chronic skin diseases often have a long course of disease, which consumes more Qi and Yin, damages the spleen and stomach and cause blood stasis syndrome according to TCM theory. In clinical practice process, considering characteristics of chronic skin diseases, the classic prescription Siwu Decoction is adopted together with fire needle therapy. The main components of Siwu Decoction are as follows: Angelica (DangGui) 20g, Chuanxiong 10g, white peony 15g, rehmannia 20g. Rehmannia (Fangzhong) is the primary drug to treat disease with sweet and greasy taste which can nourish the blood; Angelica is a secondary drug whose function is to provide nutrition to liver; Chuanxiong is also a supporting drug to ease the toxic effects of main and secondary drugs, promoting blood circulation, relieving pain. This medicine is suitable to be used together with rehmannia, white peony, and angelica to enhance the effects of Siwu Decoction. If the Qi stagnation is heavier, doctors should add another medicine Bupleurum but if itching is particularly strong, doctors should add other drugs including Fangfeng and silkworm; if dampness causes spleen problems, doctors should add other two elements; if liver and kidney deficiency is serious, doctors should add another herb named Chuan niuxi. The individual differences should be taken into diagnosis process and treated with discretion to decide specific element in Siwu Decoction according to TCM



theory .

5.Case studies

5.1 Chronic Skin Disease of Urticaria

Patient 's Family name is Wu, female, 54 years old, she first visits hospital on May 11, 2018. She develops skin itching with 20 years history. The whole body is scattered with patchy red papules. The condition gradually worsens in recent months. During previous time, oral prednisone acetate is given, and in the first stage, oral administration of 5 mg itching can alleviate itching, later doctors need to increase the dosage to 30mg, but symptoms can be slightly relieved with recurrent symptoms. Symptoms at the time of our treatment: Legs, chest and abdomen areas with severe itching, scattered with patchy red papules, maximum size about 8cm * 10cm size, high local skin temperature. The patient has fine pulse but often can not sleep at night due to serious itching, suffer from anorexia, pale face, body weight loss. Western medicine diagnosis is chronic urticaria while TCM diagnosis is rash. Underlying causes type is Qi and blood blood deficiency .

The treatment plan is as follows: the local point of the fire needle is used to puncture the affected area, and fire needle is used to puncture the Zusanli, Sanyinjiao, Xuehai, Quchi, Hegu, Qihai, Guanyuan and other points. Operational procedure and method: After the needle is burned red, it will be quickly applied to skin areas, and then the needle will be quickly withdrawn. The 3-4 areas with larger papules will be selected, and 8-10 points will be punctured. After the patient returns home, the needle point is forbidden to be exposed to cold water. The remaining body needle is normal sized acupuncture needles, and the needle was kept for 30 minutes. After every 10 minutes, needles are twisted in different directions to reinforce the effects and the treatment is performed once every 3 days, 6 times for 1 course. After the first treatment, the patient's itching relieved, and at night, she can fall into sleep intermittently. Meanwhile we advise her to gradually reduce the dosage of prednisone acetate. After one course of treatment, the itching is relieved obviously. The area of the papules becomes smaller than before, the frequency of attack reduced. Finally she stops taking prednisone acetate.

The patient after treatment reports that her appetite is better than before, and the sleeping is better. We can see the changes in the patient's face, the tongue color. In order to consolidate the curative effect, the patient is required to continue treatment. After the four consultations, considering patient's improved qi and blood status, the traditional Chinese medicine Siwu Decoction is used to nourish blood and promote blood circulation. After the second treatment, the patient basically no longer develops any rashes and itching is completely cured with normal tongue color and appetite.

5.2 Chronic Skin Disease of Eczema

Patient 's Family name is Zou, female, 33 years old, first diagnosed on May 24, 2019. One year ago, after traveling to Thailand, rashes are identified all over the whole body with occasional itching. The above symptoms are aggravated after six months, and there is no obvious relieving effect even after applying of topical glucocorticoids.



Symptoms at the time of our treatment: double lower limbs are scattered with rashes, local skin temperature high, itching at night unbearable, the patient can not fall asleep normally. The patient has dark red tongue, weak pulse and normal appetite according to TCM theory. TCM diagnosis is chronic Eczema due to Qi stagnation and blood stasis. Treatment method is that we should apply body acupuncture in the areas of middle sputum, Tianshu, Qihai, Guanyuan, Fengshi, Xuehai, Zusanli, Sanyinjiao, Taichong, apply therapy twice a week, 10 times for a course of treatment, with Siwu Decoction. After the first treatment, the itching is relieved obviously. After 1 week (2 times), the rash reveals again with bright red color and high skin temperature and recurrent itching seriously affects the patient's sleeping quality. Considering these new symptoms, we adjust the traditional Chinese medicine prescription and deal with the rashes with bloodletting puncture and cupping (1 time a week) treatment. After this adjustment, the patient reports that the sleeping quality is restored and itching is relieved. After the above treatment for 1 month, the patient's lower limbs red rash color become noticeably lighter, the skin temperature becomes normal and itching is completely cured with normal tongue color and appetite.

5.3 Chronic Skin Disease of Neurodermatitis

Patient's Family name is Han, male, 52 years old, first diagnosed on May 21, 2019 and the patient has been living abroad in Germany for a long time. Five years ago, the skin of the right lower extremity is itchy after mosquito bites. The range of itching is large with 7cm×4cm. Itching becomes aggravated later and the patient receives intermittent treatment in the local foreign clinics using anti-allergic and anti-itching methods and other Western medicine symptomatic support treatment. After treatment, itching is slightly relieved but can not be cured.

Symptoms at the time of our treatment: the skin is obviously thickened, accompanied by brown pigmentation, local itching of the skin lesions, appetite is normal, dark red abnormal tongue color and abnormal pulse. TCM diagnosis is neurodermatitis due to damp and heat stasis syndrome while Western medicine diagnosis is neurodermatitis. The principle of treatment is that we need to clear away heat and dampness in the body, promote blood circulation and remove blood stasis. Treatment method is that we select 4-5 parts with thick skin lesions, quickly pierce the needle after burning the red needle, reach the base of the lesion, and then quickly take out the needle. If there is bleeding, wipe it gently with a dry cotton ball. Then we press hard at lesion area and each part is punctured 6-7 points. 24 hours after treatment, the affected area is protected from water to prevent infection, and Siwu Decoction Chinese medicine is taken orally. After 2 treatments, the lesion area is reduced and the pigmentation becomes lighter. After the 4th treatment, the itching of the right lower extremity lesion is significantly relieved, the lesion range is reduced by about 20%, and the pigmentation changes from tan to light brown.

5.4 Chronic Skin Disease of Psoriasis

Patient's Family name is Liu, male, 35 years old, first diagnosed on June 25, 2019. The patient as pharmaceutical researcher has been exposed to chemicals for a long time. He has a red rash around his lips one year ago which then spreads to the forehead, the top of the



head, the head. On the inner side of the upper limbs, the itching is serious, and during nighttime it becomes worse. The base of the skin lesion is light red color and covered with silver scales. He is diagnosed as psoriasis before our treatment in the dermatology department of Wuhan First Hospital, and his previous doctors apply hormones for external use and hospital Chinese medicine as a supplementary method. After his doctor's treatment, itching is slightly relieved.

After stopping the drug three months ago, the lower limbs and the back area during our treatment are scattered again with rashes with severe itching. His appetite is normal with dark red abnormal tongue color and abnormal pulse. TCM diagnosis is psoriasis due to blood stasis and blood poison syndrome according to TCM theory. Our principle of treatment is that we need to clear excessive heat in his body and cool blood to detoxify spleen in his body and restore Qi. Our Treatment is that we select the area with heavier itching and thick skin lesions, use acupuncture at 5-6 points, combined with Chinese medicine Siwu Decoction. Acupoints include Zhongmu, Tianshu, Shenque, Guanyuan, Qihai, Quchi, Xuehai, Fengshi, Zusanli points. After 3 treatments, the area of the forehead lesion is reduced with relieved itching and the patient continues to receive treatment. After the complete procedures, itching is completely cured with normal tongue color and appetite.

6. Discussion

Chronic skin disease is located in the skin, the pathogenesis which is called FengXIE in TCM can compromise the immune system of people, therefore they are main cause of skin diseases. This should be the main factor to consider when treatment are applied. Chronic skin disease can persist for a long time and is prone to be recurrent. Western medicine alone can only control symptoms, but can not reduce the recurrence rate and has all kinds of side effects. On the contrary, as a traditional acupuncture method, Fire needle's safety and effectiveness have been confirmed. It has advantages of simple operation, less treatment time, long interval between treatments and quick effect, which can better meet the patient's requirements for easing itching. Modern medicine shows that fire needle can reduce the release of itching substances, improve local microcirculation, accelerate the absorption of inflammatory substances, thereby alleviating itching. Therefore, the recurrence rate can be reduced by addressing root causes. The fire needle treatment plan is combined with Siwu Decoction Chinese medicine. Through our many years of clinical practice, Fire needle as a traditional acupuncture treatment method with Siwu Decoction Chinese medicine, its treatment results of chronic skin diseases are affirmative, but due to limited publicity and different understanding about traditional Chinese medicine and western medicine, the public's acceptance and recognition is limited, inheritance and development of fire needles therapy still rely on more efforts in the future.

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APPLICATION OF YIN-YANG ACUPUNCTURE AND MOXIBUSTION

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BACKGROUND:

To introduce the application of Yin-Yang acupuncture therapy in mild cognitive impairment, sleep disorder, weight loss and other diseases. To verify the theory of Yang-Qi and Yin-Shaping in TCM, Yin-Yang Acupuncture and Moxibustion was used to reduce weight..

OBJECTIVE:

As a complementary and alternative therapy, acupuncture is an effective treatment for obesity. At present, electroacupuncture and embedding therapy are used more frequently while moxibustion is often ignored. In this study, we used yin-yang acupuncture and moxibustion therapy in losing weight to verify the theory of yang gasification and yin formation in traditional Chinese medicine.

METHOD:

32 volunteers coming from the outpatient and inpatient departments were recruited and randomly divided into two groups .One is ordinary acupuncture group (OA, n = 16) and the other is Yin-Yang group (YY, n = 16). Ordinary Acupuncture group used Shu-Mu matching acupoints, Yin Yang meridian body acupoints, which were almost on spleen and stomach meridian or large intestine meridian. In addition, local acupoints and dialectical acupoints were also selected. Compared with the common acupuncture group, the Yin- Yang acupuncture group also added the yin- yang moxibustion treatment. Both groups received treatment one time a week. And it lasted for 2 weeks. The curative effect and infrared thermal image were observed.

MAIN RESULTS:

The overall weight were decreased, but there was no difference between the two groups. The improvement of symptoms, sweating, shortness of breath, fatigue, cold hands and feet, phlegm, sleep, stool, irregular menstruation and so on were improved to varying degrees compared with the simple acupuncture group. For those who stayed up late and exercised less, there showed poor diet control. Infrared thermography before treatment showed that the heat source was scattered, abdominal heat source was uneven, umbilical temperature was low, spinal heat was discontinuous, and physique tended to phlegm and dampness. After treatment, the abdominal heat source was uniform, the metabolic heat of muscle fat and other tissues was obvious, the spinal heat source and umbilical temperature were obvious and continuous, the constitution tended to be calm, and the outline of the body became better.

CONCLUSIONS:



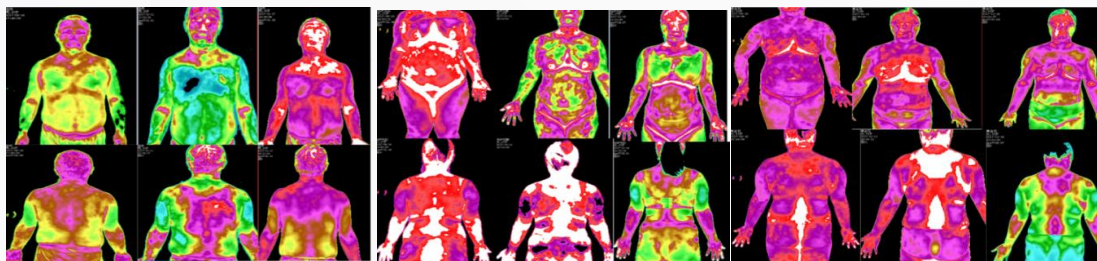
Yin Yang acupuncture and moxibustion has a better effect on weight reduction, especially in improving symptoms. However, further study will still need because of small sample size and short treatment time.

HIGHLIGHTS:

1. Paving moxibustion
- 2.



2、Infrared thermal image detection





Acupuncture Treating Primary Dysmenorrhea

Wen Biling

Dysmenorrhea is a common and frequently-occurring disease in gynecology. The causes and pathogenesis are complicated, and easy to recurrent which makes it difficult to treat. The symptoms are characterized by periodic abdominal pain in women during or after menstruation, pain spread to the back of the ankle, and even to the thighs and feet. Modern medicine divides dysmenorrhea into primary and secondary. Primary refers to the absence of obvious abnormalities in the reproductive organs; secondary multiple organic lesions secondary to the reproductive organs. Western medicine believes that its etiology may be related to cervical stenosis, uterine dysplasia, abnormal uterine position, mental factors, genetic factors, endocrine factors, abnormal uterine contractions. However, Chinese medicine believes that primary dysmenorrhea can be caused by cold, heat, wet, emotional factors, dietary factors, physical factors and menstrual special physiology. According to the time, symptom, location and degree of pain, TCM divides primary dysmenorrhea into qi stagnation and blood stasis, Cold dampness grinds, Qi and blood deficiency, Liver and kidney deficiency. The main treatment is to regulate the palace and the red blood. When treating follow the principle of "symptomatic treatment in acute condition, radical treatment in chronic case". Targeting blood circulation and pain relief during menstruation, while other times seek for dialectical. According to the clinical practice guidelines for primary dysmenorrhea, the acupuncture period consists of acupuncture and Shiqizhui, Diji, Sanyinjiao and Ciliao. During the interictal period, Sanyinjiao, Zigong, Zusanli and Guanyuan were the main points, and the evidence was matched with Taichong and Diji; the deficiency syndrome was matched with Xuehai and Geshu. Moxibustion treatment uses ginger moxibustion, taking Shenque, Guanyuan, and Zigong. according to the severity of dysmenorrhea determines the number of moxibustion, mild 4 strong, moderate 6 strong, severe 8 strong. The ear acupuncture takes the Shenmen, Zigong, endocrine, subcortical, sympathetic, kidney, and liver. The unilateral ear acupuncture is used for puncture and bloodletting, and the two ears alternate.



Sphenopalatine Ganglion Acupuncture Improves Nasal Ventilation and Modulates Autonomic Nervous Activity in Healthy Volunteers: A Randomized Controlled Study

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Abstract:

Objective

The study aimed to assess the effects of Sphenopalatine ganglion (SPG) acupuncture on nasal ventilation function and autonomic nervous system in health volunteers.

Study Design/Materials and Methods:

39 healthy subjects were randomly assigned to either active SPG acupuncture group (AA group) or sham-SPG acupuncture group (SA group). All subjects were assessed for self-reported nasal ventilation, nasal patency (nasal airway resistance (NAR) and nasal cavity volume (NCV), exhaled nasal nitric oxide (nNO), and neuropeptides (substance P(SP), vasoactive intestinal peptide (VIP) and neuropeptide Y (NPY)) in nasal secretions at baseline, 30 minutes, 2 hours, and 24 hours after acupuncture.

Results:

Significantly more subjects in AA group reported improvements in nasal ventilation at all time points after acupuncture, compared to SA group. NAR and NCV were also significantly lower in AA group than SA group. The level of nNO in AA group was significantly decreased after 24 hours compared to SA group. The level of NPY was significantly increased in AA group at 30 minutes and 2 hours compared to baseline and SA group. The levels of SP and VIP were not significantly different in the two groups.

Conclusions:

We concluded that SPG acupuncture could help to improve nasal ventilation by increasing sympathetic nerve excitability in healthy volunteers.

Key words: Acupuncture; Sphenopalatine ganglion; Nasal ventilation; **sympathetic nerve**

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Acupuncture Treatment of POI and international registry study ovarian insufficiency (POI) is the hotspot and difficulty for reproductive medicine. there is no effective treatment in modern medicine to improve patient's reproductive function. However acupuncture and moxibustion has obtained certain clinical effect of POI. In order to make a clear definition of the clinical efficacy and safety of acupuncture treatment for POI, we adopt case registration study, carry out international cooperation in research of acupuncture and moxibustion treatment of POI. Mainly to report the diagnostic criteria of POI, modern clinical management, research progress and clinical experience of acupuncture and moxibustion prevention and treatment, and research progress of international case registration of acupuncture and moxibustion treatment of POI.

Professor Yigong Fang

Professor, Chief physician, Postgraduate supervisor, Postdoctoral supervisor

Young famous TCM doctor

China Academy of Chinese Medical Sciences

**The Analgesic Effects of Laser Moxibustion on Knee Osteoarthritis in Rats**

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Abstract**Objective:**

Chronic pain affects the quality of life of patients with osteoarthritis, low-intensity laser irradiation of corresponding acupoints was demonstrated to alleviate pain. However, the underlying mechanisms of its effects on chronic joint pain are still not completely understood. The aim of the present study was to investigate the effects of 10.6 μm laser moxibustion on a monosodium iodoacetate- (MIA-) induced knee osteoarthritis model.

Methods:

Thirty-two rats were randomly assigned to four groups: Saline, MIA, MIA + Laser and MIA + Sham Laser. The 10.6 μm laser was used to irradiate the ST35 for 10 minutes once a day for a total of seven applications. The paw withdrawal mechanical threshold (PWMT) and weight-bearing distribution were performed to evaluate the analgesic effects of laser moxibustion. At the end of the experiment on days 28, the joint histology, the levels of metalloproteinases-13 (MMP-13) in the cartilage, and TNF- α , IL-1 β and IL-6 in the synovial membrane were measured to determine the chondroprotection and anti-inflammatory effect of laser moxibustion.

Results:

Compared with MIA and MIA + Sham Laser group, laser moxibustion significantly reversed the MIA-induced mechanical hyperalgesia and weight bearing difference ($P < 0.001$). Moreover, laser moxibustion suppressed the articular cartilage destruction ($P < 0.01$). Remarkably, the levels of MMP-13, TNF- α , IL-1 β , and IL-6 also decreased on days 28 ($P < 0.05$).

Conclusions:

10.6 μm laser moxibustion may have long-lasting analgesic, anti-inflammatory, and chondroprotection effects, suggesting that it may emerge as a potential therapeutic strategy for the treatment of chronic pain.

Keywords: Laser moxibustion, Knee osteoarthritis, Chronic pain

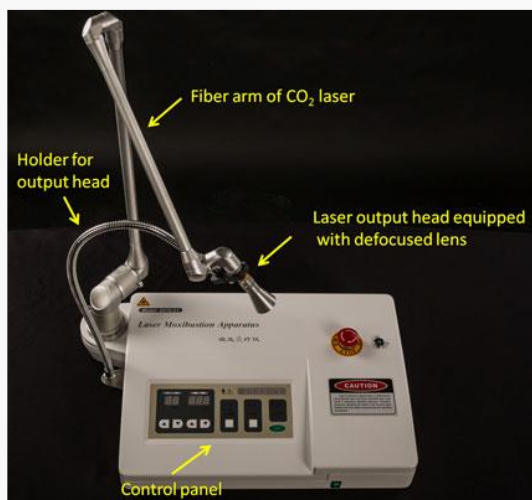
FIG. 1. 10.6 μm laser moxibustion device.

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Clinical Application of three Needle Therapy of muscle and Bone in treatment of Encephalopathy and neck and low back pain

Wu Hanqing

Traditional Chinese medicine bones and three needle therapy is a minimally invasive acupuncture method of traditional Chinese medicine invented by Professor Wu Hanqing on the basis of traditional nine needles, combined with family-handed Taiji Longguan acupuncture method and exercise therapy, and summed up three parts of nine needles and twelve methods, which were innovated and invented by Professor Wu Hanqing. According to the main points of Longguan localization method: "Guan is the hindrance of meridians, the accumulation of bone process tendons, and the root of pain", combined with "anatomy of fascia zone of twelve meridians and Ren du two veins", the diagnosis and treatment system of "fourteen meridians and three levels of meridians" was established, which opened up the diagnosis and treatment system of "fourteen meridians and tendons", created the treatment of brain disease by du pulse meridians, filled in the blank of traditional meridians, standardized the fixed-point positioning of traditional Chinese medicine acupuncture, and opened up the first way of meridian diagnosis and treatment. The needle method is used to follow the tendons.



Observation on Therapeutic Effect of KOA Treated by Different Needling Depth at Inner and Outer XiYan Points

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Abstract: Objective: To observe the therapeutic effect of Inner and Outer XiYan points different needling depths On knee osteoarthritis (KOA) .

Methods: 76 KOA patients were randomly assigned to the deep needling group and the Shallow needling group according to order of seeing doctor, with 38 patients in each group.Acupuncture method: The patient lies in the supine position with soft pillow under the knee joint, flexed by 45 degrees, the acupuncture depth of the shallow needling group is 10mm, and that of the deep needling group is 30 mm. After acupuncture, both groups are connected with electro-acupuncture (with dense wave of 2~100Hz, based on the tolerance of the patient), the needles are retained for 30 minutes, treated 6 times a week, rested for 1 day, and treated for 3 weeks.The total effective rate, as well as the scores of WOMAC and Lysholm were compared before and after the treatment in the two groups.

Results: The total effective rate of deep needling group (94. 73%) was significantly higher than that of shallow needling group (78. 95%)($P < 0. 05$), which was statistical significance. The difference of WOMAC scale score (pain, stiffness, knee joint activity) and Lysholm scale score before and after treatment between the two groups was significant ($P < 0.05$). WOMAC score and Lysholm score in deep needling group were significantly different from those in shallow needling group ($P < 0. 05$),which was statistical significance.

Conclusions:Electro-acupuncture at inner and outer XiYan points can obviously relieve knee joint pain of KOA patients, improve knee joint function and mobility, and deep needling is more effective than shallow needling.

Key words: Needling Depth, Inner and Outer XiYan Points ,KOA,Observation of Curative Effect



Abdominal acupuncture for neck pain: a randomized controlled trial

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Abstract

Objective: To investigate the clinical efficacy of abdominal acupuncture (AA) in patients with neck pain.

Methods: A prospective, randomized, patient-assessor blind, sham-controlled clinical trial in patients with neck pain was conducted at a Chinese medicine center in Hong Kong from November 2014 to March 2016. 154 eligible participants were randomly allocated to AA ($n=77$) or sham control group ($n=77$). Participants received six standardized AA or sham AA treatments by Registered Chinese Medicine Practitioner for 2 weeks (three times a week). The primary outcome was mean changes in the Northwick Park Neck Pain Questionnaire (NPQ) score. Secondary outcomes included mean changes in visual analog scale (VAS) score for pain intensity and health-related quality of life measures (SF-36v2). All outcomes were assessed at baseline and at 2 and 6 weeks from baseline. AA group received additional follow-up assessment at 14 weeks from baseline. The study was registered at Chinese Clinical Trial Registry ([ChiCTR-TRC-14004932](https://www.clinicaltrials.gov/ct2/show/study?term=ChiCTR-TRC-14004932)).

Results: All outcome parameters between the two groups were comparable at baseline. AA group showed greater improvement in NPQ scores than control group at both 2 and 6 weeks from baseline (intergroup mean differences, -5.75; 95% confidence interval [CI], -9.48 to -2.03; $P=0.008$ and -8.65; 95% CI, -12.13 to -5.16; $P<0.001$, respectively). The improvement in mean NPQ scores in AA group was even more significant at 14 weeks from baseline. AA group also showed significantly greater improvements in mean VAS score and some quality of life measures than those in control group, without any serious adverse events.

Conclusion: This trial suggests that abdominal acupuncture is an effective treatment for neck pain patients.

Keywords: abdominal acupuncture, acupuncture, neck pain, randomized controlled trial



Acupuncture treatment and the risk of urinary tract infection in stroke patients: a nationwide matched cohort study

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Background: The association between acupuncture treatment and post-stroke urinary tract infection (UTI) remains incompletely understood.

Objective: To compare the long-term risks of UTI among stroke patients treated with or without acupuncture treatment.

Methods: This retrospective cohort study was based on data from the National Health Insurance Research Database in Taiwan that included hospitalized stroke patients. We identified 19,286 patients aged 30 years and older who were hospitalized for newly diagnosed stroke between 1 January 2000 and 31 December 2004. Considering immortal time bias, we compared the incidence of UTI during the follow-up period until the end of 2009 in patients with stroke who did and did not receive acupuncture. The adjusted hazard ratios (HRs) and 95% confidence intervals (CIs) of UTI associated with acupuncture were calculated with multivariate Cox proportional hazard regression analysis.

Results: Stroke patients who received acupuncture treatment experienced a lower incidence of UTI than those who were not treated with acupuncture (95.4 vs 110.0 per 1000 person-years), with an HR of 0.76 (95% CI: 0.73–0.80). The association between acupuncture treatment and UTI was significant for both sexes and for patients older than 40 years of age, particularly for patients who had no history of medical conditions.

Conclusions: In this nationwide retrospective cohort study, we raised the possibility that acupuncture treatment may be associated with a reduced risk of UTI among stroke patients. However, the protective effect associated with acupuncture treatment requires further validation using randomized clinical trials.

Keywords: acupuncture;stroke;urinary tract infection



Modern Servicelearning Changes the Way of Traditional Chinese Medicine Orthopedics Education

Cheung Chun Hoi (Lecturer II, Teaching and Research Division, School of Chinese Medicine, Hong Kong Baptist University)

Education in Traditional Chinese medicine (TCM) has a long history of 3000 years. To meet the demands of modern society, TCM educators in this era should investigate the way to incorporate modern pedagogy into ancient courses to enhance teaching and learning efficacy. TCM Orthopedics is one of the core clinical subjects in TCM education covering management of bone and joint diseases with evidence-based practice. With a sharp increase in the prevalence of degenerative bone and joint diseases brought by the aging population, TCM Orthopedics educators have the sole responsibility to equip TCM students to resolve the clinical needs of the community.

“The great aim of education is not knowledge but action.”—Herbert Spencer (1820-1903). Service-learning sets an excellent example of the application of experiential learning in medical education. In medical education, it is important for TCM students to experience how to manage real clinical cases under supervision. Through the TCM service-learning activities, students have the opportunities to work in groups with elderly patients assigned and to investigate how to treat patients comprehensively in a patient-centered approach. The service-learning activities are designed based on the ‘flipped-classroom’ strategy, supported by a TCM Orthopedics teaching and learning database to facilitate students’ learning during the service.

The establishment of a ‘campus-community partnership’ is the key of success for service-learning. Such strong bonding between the academia and community pave the foundation in organizing multiple service-learning activities in matching patient groups with TCM students. Moreover, the service-learning activities are educationally and sociologically research-based with the aim to raise public awareness in health within the service region.

Reflection is essential in the education. Subsequent to the activity, debriefing sessions moderated by teachers are provided to students in a progressive reflective manner. Besides, students are guided to summarize and integrate the clinical information of the patients, design and report the clinical cases in a standard medical record format, express their learning feedback and justify their role in the community through submission in an e-portfolio. The e-portfolio provides a rich resource for both students and teachers to learn about achievement of important outcomes over time and make connections among the disparate parts in clinical learning. Students are able to make use of the multimedia technique to present their learning outcome which can further enrich their learning experience.

A comprehensive assessment for students should not be limited to the comments from teachers. Opinions from various stakeholders, including NGO partners, as well as patients

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(service-recipients), are also significant in providing a full picture to evaluate students' performance. Rubrics and questionnaires are designed and completed by NGO partners and patients to invite their participation in providing valuable feedback.

A pilot study on our education design was conducted last year. The study, having received numerous positive feedback, has suggested service-learning as a good example for an enhancement on top of TCM traditional learning. In the way forward, we will share our experience and promote the scholarship of our practice to the sister institutions and will explore the opportunities for future potential collaboration.



A case study on the treatment of primary open angle glaucoma using acupuncture

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Abstract

Objective: To observe the clinical effect of acupuncture on primary open angle glaucoma.

Method: The patient underwent combination therapy using acupuncture and medication in the outpatient department. She received acupuncture treatment three times per week. During each course, she had twelve continuous treatments. The needles used were stainless steel disposable acupuncture needles and were placed according to Traditional Chinese Medicine principles. Briefly, Hegu (LI4), Jingming (BL1) and Qiuhou (Ex-HN07) were treated with needle retention. Needles were placed into Jingming, Qiuhou and Hegu for 30 min.

Result: After one course of abovementioned treatment, the patient was examined again. The intraocular pressures were R 14mmHg and L 13mmHg. Additionally, the visual field impairment was significantly improved.

Conclusion: Acupuncture combined with medication is commonly used for the treatment of severe eye conditions. The intraocular pressure is well controlled and the visual field impairment is notably improved in glaucoma patients.

Key words: Primary open angle glaucoma; Acupuncture



Spectral Characteristics and Local Acupoint's Response on Different Moxibustion Material 腧穴对不同灸材艾灸的反应

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Keywords: Hyperspectral Imaging (高光谱成像), Moxibustion (艾灸), Acupoint (腧穴), Spectral Characteristic (光谱特征), Reflectance (反射率)

Objectives:

Evaluation of moxibustion effect based on different materials.

Methods:

All subjects were divided into four groups including 5-year moxa stick group, 1-year group, cigarette group and control group. 30 Subjects in different groups are the same people. The same subject has a 3-day interval before taking part in the next group. Moxibustion was performed for 10min with 3cm vertically above neiguanacupoint(PC6) on the left side and get rid of the burning ash into water cup every 2 min. Hyperspectral imaging, laser speckle blood flow imaging, infrared thermal imaging and oxygen saturation were recorded at pre, immediately after 10min moxibustion, 15min and 30min after moxibustion.

Results:

There is significant difference between the 5-year moxa stick group and other groups with the most obvious change; the blood volume-time and the temperature-time curve of 1-year group is in the middle; the control group almost has no change. Local oxygen saturation comparison, the 5-year moxa stick group is statistically different with other groups at all time-point with most changes; the 1-year moxa stick group and cigarette group are statistically almost the same; the control group almost has no change. Local spectrum comparison, the reflectance of 500~600nm spectral band decline especially at 580nm in 5-year moxa stick group after moxibustion within the whole wavelength. The most decline appears at immediately after moxibustion, and then rise up with the time increasing. The reflectance of 5-year moxa stick group changes most compared with control group at 580nm, then the 1-year moxa stick group, and the cigarette group is the least.

Conclusion:

The 5-year moxa can induce the most obvious reaction on acupoint, then the 1-year moxa, and the least is cigarette.



Enhancing Acupuncture and Tuina in Chinese Medicine Education by Service Learning

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Abstract

Improving the quality of education is the eternal theme in medical education. Service learning is one of the most effective methods. Hong Kong faces challenge in how to manage its ageing population aging population, bone and joint pain are very common in the elderly. Through establishing a learning and service platform in the Hong Kong community, Chinese Medical (CM) students can get more opportunities to learn and practice acupuncture and Tuina, and provide medical consultation and health care services for the elderly in a real environment. There are the obvious improvements in the professional knowledge, skills and social responsibility, and promote the health condition of the community. Acupuncture and Tuina can treat the bone and joint pain of elderly effetely, which can reduce the burden on the family and society caused by the elderly. We have established an online database of learning materials for students. The students can collect health data (medical record of history and examinations) from bone and joint in elderly according to what they have learned in the classroom, and they would make report with e-portfolio finally. We have achieved very good education results by service learning.



Lingnan Lin's Manipulation for Plantar Fasciitis

Zhong Qiaolin

Approximately 10% of population complains suffering heel pain in lifetime; plantar fasciitis (PF) is one of the most common causes of it. PF is characterized by sharp heel pain first step in the morning. There are many causes leading to plantar fasciitis include: Flat feet, Obesity, tight calf caused by prolong sport activities etc. Common treatments for PF include formal physical therapy, night splints, Acupuncture, corticosteroid injection, fasciotomy, stretching. Recent studies suggest less-invasive techniques may provide a long-term relief. Due to the multiple causes of PF, there are not specific practice guidelines for PF treatments.

Lingnan Lin's manipulation invented by state level TCM master Prof. Lin Ying Qiang. From the holistic view of TCM, knowledge of meridian, anatomy and physiology, Lin's manipulation treatment for PF does focus on Lumbar vertebrae, Pelvis, the tightness of gluteus medius, and calf muscles. Those are the leading causes of PF. Compared with common treatment methods which is more focusing on short term local area pain relieve, Lin's manipulation provide a new way diagnosis and treatment for PF suffering populations.

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The Beneficial Treatments of Qing Yan Li Ge Tang Decoction in Respiratory Diseases: A retrospective study.

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The purpose of this discussion is to give the reader insights of beneficial treatments of Qing Yan Li Ge Tang (QYLCT). Chinese Medicine's approach to resolve "wind invasions" is to eliminate at the earliest sign of their presence. The hallmark of an invasion of Wind-Heat is sore throat with swollen tonsils. Wind-Heat invasion is followed by runny nose with yellow phlegm, sweating, thirst, some may suffer from fever with chillness. In this case, QYLCT alleviates heat, relieves fire toxins and expels external wind-heat. Diminish heat and decrease irritability. Purges accumulations, eliminates stagnation, and reduces mucosa swollen. Disperses Wind-Heat, benefits the throat, relieves toxins and moistens the Intestines for wind-heat constipation. QYLCT is used in acid regurgitation, chronic pharyngitis, and Head and Neck Cancer. Administer QYLCT decoction, Head and Neck cancer patient avoid nasal wash; post-radiation comorbidities is improved significantly. Unresolved wind invasions which manifest as flu, and pathogen may linger deeply and causes "Latent Heat," which eventually emerges as a more serious illness. By eliminated Wind Heat symptoms, QYLCT prevent disease progression, kills pathogen effectively. **Method:** Recruit 3 years (2015~2018) of ICD-10 clinical cases whom has prescribed with QYLGT and compiled with data and revealed three main categories. **Discussion:** QYLCT inhibits wind-heat symptoms. It clears Heat, relieves fire toxins and expels external Wind-Heat. Purges accumulations, eliminates stagnation, diminish heat and reduce swelling. **Conclusion:** QYLCT plays an important role in improving disease progression. Unresolved wind invasions which manifest as flu, acute symptoms and signs can linger deeply and unnoticed in the body as "Latent Heat," which eventually develop as chronic disease or disease progression. QYLCT alleviate Head and Neck patients who suffered from post-radiation comorbidities such as dysphagia, otorrhea, and prevent inflammations significantly. .

Keywords: Qing Yan Li Ge Tang ;Wind-Heat;Pharyngitis;Respiratory Tract Disease;Head and Neck Cancer, Nasopharyngeal Carcinoma



TÜRKİYE’DE ÇOCUK SAĞLIĞI VE HASTALIKLARINDA FİTOTERAPİ UYGULAMALARI

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TÜRKİYE’DE ÇOCUK SAĞLIĞI VE HASTALIKLARINDA FİTOTERAPİ UYGULAMALARI

Çocuklarda fitoterapi uygulamaları erişkinlere göre doz ayarı, yan etki ve toksik etki gibi durumlar söz konusu olduğundan daha temkinli davranılması gereken bir noktadır. Çocuklarda fitoterapi uygulamalarında hem geleneksel yöntemler hem de geleneksel yöntemlerden orjin alan standartize ekstraktlar kullanılmaktadır. Bu uygulamalar genelde pediatrik hastalarda aromaterapi, tıbbi çay, aromaterapi ve standartize ekstrakt şeklinde olabilmektedir. Çoğunluk hastalık gurubu olarak üst solunum yolu enfeksiyonu, infantil kolik, allerjik hastalıklar (astım, allerjik rinit, atopik dermatit), kabızlık, ishal vb. durumlara daha sık rastlamaktayız ve bu durumlarda fitoterapi dahil geleneksel tıp yöntemleri daha sık uygulanmaktadır. Türkiye’de çocukluk çağında fitoterapi uygulamaları, geleneksel çin tıbbı, ayurvedik tıp, uyur tıbbı ve unani tıp gibi birçok akımdan etkilenmiş olup; bitkilerin cinsi, türü ve kullanım şeklinden etkilenmiştir.

Amaç: Çocuklarda fitoterapi uygulamaları, kullanılan bitkilerin cinsi ve türü, fitoterapi uygulamalarının en sık kullanıldığı pediatrik hastalıklar ve kullanılan bitkiler, çocukluk çağında güvenilir olarak kullanılabilecek bitkiler, doz ayarlarken dikkat edilecek noktalar ve diğer ülkelerde (geleneksel çin tıbbı, ayurvedik tıp vb) kullanımıyla ilgili aradaki benzerlikler ve farklardan bahsedip; farklı hastalıklarda örnek reçetelerle sunumumu gerçekleştirmeye çalışacağım.

Keywords: Fitoterapi;pediatri;dozaj;uygulama



Environmental Factors and Mechanisms of Action that Cause Hormesis through Oxidative Stress

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ABSTRACT A free radical is defined as an atom or molecule containing one or more unpaired electrons in the outer orbit. Many radicals are unstable and highly reactive. They can either donate an electron to or accept an electron from other molecules, therefore behaving as oxidants or reductants. The most important oxygen-containing free radicals in many disease states are hydroxyl radical, superoxide anion radical, hydrogen peroxide, oxygen singlet, hypochlorite, nitric oxide radical, and peroxynitrite radical. Free radicals are derived either from normal essential metabolic processes in the human body or from external sources such as exposure to X-rays, ozone, cigarette smoking, air pollutants, and industrial chemicals. Antioxidants are molecules that can donate an electron to a free radical without making themselves unstable. A balance between free radicals and antioxidants is necessary for proper physiological function. Oxidative stress occurs if there is an imbalance between oxidant activity and antioxidant activity and the balance is disrupted in favor of oxidants. Severe oxidative stress may lead to cellular and tissue damage of components, and is involved in different physio pathological states, including aging, exercise, inflammatory, cardiovascular and neurodegenerative diseases, and cancer. However, it is now well known that low doses of oxidative stresses can disturb the physiological state of an organism without inducing severe damage. This mild stress can induce adaptive responses that improve the ability to resist severe stresses and have other beneficial effects: this phenomenon is called hormesis. In this presentation, hormetic effects and mechanisms of action of oxidative stress-causing agents such as exercise, intermittent fasting, toxic metals, medical ozone therapy and phytochemicals will be discussed.

Key words: Hormesis, oxidative stress, free radicals.



Mikrobiyata Çalışmalarından Alınacak Dersler

Doç.Dr.Dilek Öztaş

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Geleneksel ve Tamamlayıcı Tıp Uygulama Merkezi

Hemostazın sağlanması ve hastalıkların gelişmesinde belirgin etkisi olan bağırsak mikrobiyotası insan gastrointestinal sisteminde yaşayan kompleks ve dinamik bir mikroorganizma topluluğundan oluşmaktadır. Bağırsak bakterileri, immünite ile metabolik hemostazın devamlılığının sağlanmasında ve patojen mikroorganizmalara karşı korunmada kritik rol oynar. Bebeklik döneminde insan bağırsak mikrobiyotası gelişimine çok sayıda faktör etki etmektedir. İnsan mikrobiyom projesi ile başlayan hastalıklara yaklaşım, yeni patogenezi ortaya koymaktadır. Bağırsak mikrobiyotasının değişimi (disbiyozis) birçok inflamatuvar hastalığın patojeni ile ilişkilidir. Antibiyotik kullanımına bağlı gelişen disbiyozisin obezite zeminini nasıl ortaya çıkardığı ancak iyi dizayn edilmiş hayvan deneyleri ile ortaya konulabilir. Obez bireyler zayıf olanlara kıyasla bağırsak mikrobiyota içeriğinde belirgin farklılıklar gösterirler. Obezite ile ilişkili bağırsak mikrobiyotası, bağırsakta besinlerden alınan enerjiyi de arttırmaktadır. Bugün için elde edilen verilere göre antibiyotikler, mikrobiyota bileşiminde değişikliğe neden olabileceği gibi farklı fizyolojik mekanizmalar ve gen düzeyindeki değişikliklerle de obezite zeminini hazırlayabilirler. Yaşamın her döneminde sağlıklı beslenme ve yaşam tarzı alışkanlıklarının benimsenmesi sağlığın korunması, geliştirilmesi ve iyileştirilmesi dolayısıyla kronik hastalıkların önlenmesi, yaşam süresi ve kalitesinin artırılması açısından önemlidir. Diyetin toplam enerji miktarı, işlenmiş besinlerin yoğunluğu, sebze-meyve tüketim durumu, beslenmedeki çeşitliliğin yanı sıra diyetin karbonhidrat, protein, yağ, posa ve vitamin içeriği gibi bileşenlerin mikrobiyota kompozisyonunu etkilediği, yapılan çalışmalarda gösterilmiştir. Yine bağırsak mikrobiyotasının düzenlenmesinde probiyotikler, prebiyotikler, sinbiyotiklerin ve çay, kakao, polifenoller, baharatlar gibi diyet faktörlerinin etkisinin olduğu bilinmektedir. Mikrobiyotanın olumsuz yönde etkilenmesi sonucunda değişen bağırsak mikrobiyal bileşimi disbiyozise neden olarak; yeni doğan, çocukluk çağı, yetişkinlik ve yaşlılık dönemlerinde inflamasyon, kronik, metabolik ve otoimmün hastalıkların ortaya çıkmasına zemin hazırlamaktadır. Son yıllarda bağırsak mikrobiyotasındaki değişikliklerin; obezite, metabolik sendrom, nörolojik hastalıklar ve Tip 2 diyabet, kanser gibi hastalıkların patogeneziinde önemli bir rol oynayabileceğini gösteren çok sayıda bilimsel çalışma gerçekleştirilmiştir. Kronik hastalıkların tıbbi beslenme tedavisinin yanında; mikrobiyotadaki yararlı mikroorganizmaların sayısını arttırmak amacıyla prebiyotikler, probiyotikler, prebiyotik ve probiyotiğin bir arada kullanıldığı sinbiyotikler ile fekal transplantasyon gibi tedavi seçeneklerinin birlikte kullanılması yaygın görüştür.



WHAT IS BEE VENOM PHARMACOPUNCTURE?

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Abstract

Pharmacopuncture is an acupuncture treatment combining acupuncture based on the meridian theories and herbal medicine based on Qi and flavor theories. While conventional acupuncture therapy uses the physical stimulation of acupoints, pharmacopuncture adds chemical ingredients from therapeutic herbs with pharmacological effects. Apitherapy is a type of traditional and complementary medicine that uses products that come directly from honeybees including bee venom and bee venom pharmacopuncture is a form of pharmacopuncture in which bee venom is applied. Bee venom is a very complex mixture of natural products extracted from honey bee which contains various pharmaceutical properties such as peptides, enzymes, biologically active amines and nonpeptide components some of which are anti-inflammatory and antinociceptive despite the well-known pain of a bee sting and risk of severe allergic reactions in some individuals. Thus far, bee venom pharmacopuncture demonstrates promise in the treatment of a number of musculoskeletal diseases such as osteoarthritis, rheumatoid arthritis, adhesive capsulitis, and lateral epicondylitis and also in alleviation of certain neurological conditions, including peripheral neuropathies and Parkinson's Disease. Rigorous trials with large sample sizes and adequate design are required to define then role of Bee venom pharmacopuncture for these indications.

Key words: Apitherapy, bee venom, pharmacopuncture, anti-inflammatory, antinociceptive



KAS İSKELET SİSTEMİ HASTALIKLARINDA HOMEOPATİ

Demet Uçar

Gerçek anlamda sağlık, kişinin bütün insani potansiyelini deneyimleme ve keşfetme kapasite ve özgürlüğüne sahip olması olarak tanımlanabilir. Sağlık üç boyutludur: fiziksel, ruhsal ve zihinsel.

Homeopati; yani "benzeri benzerle tedavi etme sanatı" bu üç boyut üzerinden çalışır ve "yaşam enerjisine" etki eder.

"Yaşam enerjisi" konsepti (prana, çi, dinamis) tüm zamanlar ve kültürler boyunca, evrensel olarak

Tanınan ve keşfedilen birçok doğal iyileşme sisteminin ana noktasıdır.

Homeopatik remediler olan bitkisel, hayvansal ve mineral kaynakların ultra düşük miktarlarının canlı organizmadaki etkilerini ve ayrıca yüksek ve mikro dozların vücutta nasıl karşıt şekilde çalıştığını özetleyen çok sayıda kan hücre, doku kültürü ve hayvan çalışmaları mevcuttur.

İskeletimizin dengeli ve bağımsız şekilde ayakta durması ve özgürce hareket etmemiz, kas iskelet sistemimizin sağlıklı olması ile ilişkilidir. Bu alanda akut yaralanmalar, artrit, bel, boyun, diz ağrıları ve yumuşak doku romatizması (fibromiyalji) en sık rastladığımız rahatsızlıklardır.

Arnica akut yaralanmalarda her zaman ilk tercih edilecek olan remedir. Bellis, eklem çevresinde şişlik ve kontüzyon olan akut burkulmalarda akla gelmelidir.

Artrit genellikle fazlar arasında değişkenlik göstermekle birlikte, kronik artritlerde akut alevlenmeler görülebilir. Bu durumda akut remedi grubunun kullanılması gerekir. Örneğin uzun bir süredir Calc flour kullanılırken, eklemde yoğun bir şekilde kızardığı, şiştiği ve ağrılı hale geldiği ani bir alevlenme durumunda Belladonna veya Bryonia gerekli olabilir. Rhus tox kronik fazlar için ana remedi iken, akut enflamasyon durumunda temel remedi olarak Bryonia düşünülmelidir. Dejeneratif artrit ileri aşamalarında Calc flour genellikle daha faydalıdır.

Servikal ve lomber radikulopatilerde Rhus tox, Hypericum, Colocynthis, Chamomilla, Phytolacca, Arsenicum sık kullanılır. Akut durumlarda Bryonia, Kalmia ve Gelsemium, kronik durumlarda ise Causticum akla gelmelidir.

Her tip diz problemlerinde Ruta, Calc flour, Silicea ve Calc phos düşük potence birlikte kullanıldığı bir protokol oluşturulabilir. Rutanın ayrıca el bileği çevresi problemlerine affinitesi vardır.

Fibromiyaljide Phytolacca bezler üzerine etkiliyken, Causticumun kasılma ve sertlikte etkisi

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belirgindir, Cimicifuga özellikle depresyon ile ilişkili olan kas hastalıklarında etkilidir.



Plantar Fasiitli Hastalarda Proloterapi Tedavisinin Etkinliği

Elvan Kanat¹

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AMAÇ: Bu çalışmada plantar fasiit tanısı olan hastalarda proloterapi tedavisinin etkinliği retrospektif olarak araştırıldı.

GEREÇ VE YÖNTEM: Plantar fasiit tanısı konulan 24 hasta (15 kadın, 9 erkek) çalışmaya alınmıştır. Hastaların ortalama yaşları 45 (35-55) idi. Proloterapi solüsyonu olarak %10 dekstroz kullanıldı. Ayda bir ortama 2 seans proloterapi uygulanan hastaların tedavi öncesi ve sonrası ağrı düzeyleri Vizuel Analog Skalası (VAS) ile değerlendirildi.

BULGULAR:Çalışmaya alınan hastalarda tedavi gerektirecek komplikasyon görülmedi. İlk uygulamadan sonra tedaviye uyum sağlayamayan 3 hasta çalışmadan çıkarıldı. Tedavi sonrası 1.ci ve 3.cü aylarda elde edilen VAS skorlarının tedavi öncesine göre anlamlı ölçüde düştüğü görülmüştür.

SONUÇ: Proloterapi; plantar fasiit tedavisinde güvenli ve etkili bir tedavi yöntemi olabilir.

Keywords: Proloterapi;plantar fasiit;ağrı



Grade 4 gonartrozda proloterapi olgu sunumu

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Özet

Giriş:

Osteoartrit, yavaş ilerleyen, ileri yaşlarda görülen, patolojik olarak eklem kıkırdığının fokal dejenerasyonu, subkondral kemik kalınlaşması(osteofit), marjinal osteokondral aşırı büyüme ve eklem deformitesi sonucu tekrarlayan ağrı dönemleri olan, hareket kısıtlılığı yaratan bir kronik eklem hastalığıdır.

Proloterapi, Osteoartritin oluşmasında, geçirilmiş ve tam iyileşmemiş travmalar sonrası yavaş yavaş eklem stabilitesinin ve tensgritinin bozulduğunu ve zamanla perfüzyonun bozulduğunu iddia etmektedir.(4) Statik stabilizatörler olan ligamentlerin fonksiyonel veya anatomik olarak görev yapamamaları sonrası eklemden artroz gelişmektedir.

Olgu:

Ameliyat kararı verilen hastanın onamı alınarak Proloterapi uygulandı. Uygulama sonuçları, klinik ve radyolojik olarak olarak takip edildi. Hasta aynı radyoloji uzmanı tarafından kalça ve diz NMR ları çekildi. Proloterapi uygulaması, aynı hastanede çalışan Proloterapi eğitimini tamamlamış olan Fizik Tedavi uzmanı tarafından uygulandı.

Radyolojik ve Klinik sonuçlar Ortopedi uzmanı olan 3. bir hekim tarafından değerlendirilip, kaleme alındı.

Klinik takip için 5 semptom puanlanarak tedavi öncesi ve tedavi sonrası karşılaştırıldı.

Tedavi sonrası son değerlendirme: . 6 seans proloterapi sonrası hasta rahat yürüyebiliyor,gece rahat uyuyor ve merdiven inerken hafif ağrı hissediyordu.

Tartışma:

Proloterapi, grade 4 gonartroz tanısı konulan, fizik tedaviden fayda görmeyen ve total diz protezi önerilen hastalar için önemli bir umut kapısı ve tedavi seçeneğidir. Yan etkisi minimaldir. Komplikasyonu yok gibidir. Hastanın yaşam kalitesini arttıran çoğunlukla ameliyattan kurtaran bir metoddur. Ameliyata giden yol kaçınılmaz olsa bile proloterapi ile bu seçenek ertelenmekte ve hastanın daha ağrısız ve aktif bir hayat sürmesine neden olmaktadır

Keywords: Gonartroz;proloterapi;tedavi



Hicran D. Uşan

Refleksoloji el, ayak tabanı ve kulaklarda vücudun tüm bölümleri, organ ve bezleriyle ilgili yönlendirici refleks alanların mevcudiyeti prensibine dayanmaktadır. Bu refleks alanlara herhangi bir cihaz, malzeme, krem, losyon kullanmadan sadece el ve parmaklarla basınç uygulanır.

Refleksoloji uygulamasında, uygulama yapılan alanın bağlantılı olduğu organlarda ve vücut bölgelerinde, kutano-visseral refleks yolları aracılığıyla çeşitli reaksiyonlar oluşmaktadır. Bu reaksiyonlar bedenin tekrar denge ve homeostaz haline dönmesine yönelik yanıtları içermektedir.

Diğer bütüncül tedavi yöntemlerinde olduğu gibi, refleksoloji tedavisi de vücudun kendi kendini tamir mekanizmalarını ve böylelikle doğal iyileşme sürecini harekete geçirmektedir. Refleksolojinin tedavi amaçlı kullanıldığını gösteren en eski belge milattan önce 2400`lü yıllarda Mısır`da refleks tedavilerin uygulandığını göstermektedir. 1895 yılında Amerika`lı bir tıp doktoru olan Dr William Fitzgerald ise refleksolojinin temelini oluşturan zon teorisinin kurucusu olarak kabul edilmektedir. Bu teoriye göre vücut 10 vertikal zona ayrılmıştır ve her bir zondaki yapılar birbiri ile ilişki içindedir.

İnsan vücudunun ayağa anatomik yansıması 3 boyutludur. Ayak, refleksolojik yansıma alanı olarak, her biri bir parmağa denk gelen 5 longitudinal zona ayrılır. Ayrıca horizontal olarak da 3 enine hat ile 4 bölgeye ayrılır. Vertebral kolonun refleksolojik yansımaları ayak medialinde iken eklemlerin refleksolojik yansımaları ayak lateralinde yer almıştır.

Refleksoloji öncelikle otonom sinir sistemini regüle ederek ilişkili vücut bölgelerinde kan dolaşımını arttırmaktadır. Kan dolaşımının düzelmesi neticesinde hücrelere besin ve oksijen taşınması artmaktadır. Ayrıca dolaşımın artması ile hücrelerden ve bağ dokusundan toksinlerin daha kolay ve etkin uzaklaştırılması mümkün olmaktadır. Refleksoloji uygulaması endorfin salgılanmasını uyarak ağrıyı azaltır ve gevşeme sağlar.

Kas iskelet sistemi problemlerinde refleksoloji uygulamaları ile ilgili birçok bilimsel araştırma vardır. Çalışmaların çoğu multipl skleroz (MS) hastalarında ve bel ağrısı hastalarında refleksoloji uygulamasına ait yayınlardır. Bunun yanında romatoid artrit, serebral palsi ve fibromiyalji gibi kas iskelet sistemi problemlerinde de refleksoloji uygulamalarına ait çalışmalar mevcuttur. Refleksoloji özellikle ağrı düzeylerini azaltarak hastaların yaşam kalitelerini arttırmaktadır. Ayrıca refleksoloji MS ve serebral palsi gibi rahatsızlıklarda spatisteyi azaltmada etkin bir tedavi yöntemidir. Uygulama kolaylığı, girişimsel bir yöntem olmaması ve yardımcı cihaz gerektirmemesi avantajları arasındadır. Refleksoloji tedavisi çeşitli kas iskelet sistemi rahatsızlıklarında güvenle uygulanabilecek, etkin bir tedavi yöntemidir.

Anahtar Kelimeler: Refleksoloji, kas iskelet sistemi, ağrı



Kronik Gerilim Tipi Baş Ağrısında Kore Akupunktur Tedavisinin Klinik Etkinliğinin Araştırılması.

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Amaç: Güvenilir ve etkili bir tedavi yöntemi olan Kore akupunkturunun toplumda çok sık görülen bir hastalık olan kronik gerilim tipi baş ağrısındaki etkisinin araştırılmasıdır.

Yöntem: Bu çalışma, içerisinde sham akupunkturu (placebo akupunktur) içeren randomize kontrollü bir çalışmadır. Çalışmada hastalar üç gruba ayrılmıştır. Kore Akupunktur grubu (n:23), plasebo akupunktur grubu (n:25) ve müdahalesiz kontrol grubu (n:25). Kore akupunktur ve plasebo akupunktur gruplarına 4 haftalık periyotta toplam 8 seans akupunktur uygulandı. Sonuçlar, Vizüel analog skalası (VAS) ve Baş ağrısı günlüğü verilerine göre değerlendirildi.

VAS; tedavi öncesi, tedavi bitiminden 1 hafta ve 3 ay sonra bakıldı.

Baş ağrısı günlüğü de; tedavi öncesi, 4. seans ve 8 seansta bakıldı.

Kore akupunktur grubu; Tae-guek Kore Akupunktur'una göre tedavi edildi. Hastalar yapılarına göre dört gruba ayrıldı. Grupların belirlenmesinde "Mizaç ve Karakter Envanteri" (TCI: Temperament and Character Inventory) kullanıldı. Sonuçlara göre hastalar TaeYang, TaeEum, SoYang ve SoEum olarak üzere dört yapısal gruba ayrılarak yöntemidir.akupunktur noktaları belirlendi.

Plasebo akupunktur grubu; Bu gruptaki hastalara kore akupunktur noktalarının 2 cm paralel uzağındaki bir noktaya kulak iğnesi (Hua-long press needle) uygulaması yapıldı.

Müdahalesiz kontrol grubu; Bu gruptaki hastalara müdahale edilmedi.

Tüm gruplara halen devam etmekte olan medikal tedavilerini ihtiyaç halinde almalarına izin verildi. Hastaların diğer tamamlayıcı tıp yöntemlerini uygulamalarına izin verilmedi.

Bulgular: Kore Akupunktur grubunda tedavi bitiminden 1 hafta sonraki ve 3 ay sonraki VAS değerleri diğer iki gruba göre anlamlı şekilde azaldı. Kore Akupunktur grubunda seans bitiminden 1 hafta ve 3 ay sonraki VAS değerleri birbirine benzer çıktı.

Kore Akupunktur grubunda Baş Ağrısı Yoğunluğu verilerinde de plasebo ve kontrol gruplarına göre anlamlı şekilde azalma oldu.

Ayrıca Plasebo grubu ile kontrol grubu arasında VAS değeri ve Baş Ağrı Yoğunluğu değerleri arasında anlamlı fark çıkmadı.

Sonuç: Kore akupunkturu kronik gerilim tipi baş ağrısı tedavisinde tercih edilebilecek alternatif bir tedavi

Keywords: kronik gerilim tipi baş ağrısı;tae-guek kore akupunktur;akupunktur



THE MANAGEMENT OF POSTOPERATIVE PAIN WITH ACUPUNCTURE.

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Postoperative pain in the entire body refers to the occurrence of pain after operation all over the body, including joints and muscles, head and limbs, accompanied by; restlessness, insomnia, sweating or lack of sweating, fatigue, poor appetite or even dysfunction of the limbs. Postoperative pain in the entire body usually occurs after a major operation. There could also be some generalised body pain prior to the operation with aggravation after the operation. This type of operation often needs complete or partial anaesthesia.

Postoperative pain was shown as a major indication among the indications list of acupuncture in the consensus statement of NIH-1997, European Postoperative Acupuncture Studies and review of systemic reviews of acupuncture by John McDonald and Stephen Janz.

Postoperative pain in the entire body can be caused by disturbance of the internal Zang-Fu organs or disturbance of the channels and collaterals. Many factors can cause postoperative pain in the entire body, including:

- ▶ incomplete disappearance of External pathogenic factors,
- ▶ stagnation of Qi,
- ▶ stagnation of blood,
- ▶ accumulation of Damp-Phlegm,
- ▶ deficiency of Qi and Blood,
- ▶ deficiency of Yin and deficiency of Yang, etc.

Hereby, it will be reviewed symptoms and signs of pain modalities which all these factors can cause and also Acupuncture treatments on them. Postoperative pain management with acupuncture is to use some selected points to tonify the Qi and Blood, active Qi and Blood circulation, and balance Yin and Yang Zang-Fu organs, as well as the body structure. During postoperative pain management, acupuncture treatment is carried out in combination with moxibustion, point massage, cupping, electric stimulation, ear acupuncture, Chinese herbal medicine, etc., such treatments often being applied simultaneously.

Ear acupuncture can also be used in the treatment of body pain.

In short, acupuncture treatment for postoperative pain control accelerates patients' recovery and brings all possible benefits without any harmful effects.



Recompilation of various researches on the underlying mechanism of acupuncture and their relation with diverse neurological areas

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Acupuncture is recognized as effective therapy for treatment of various neurological disorders. This presentation aims to review scientific studies during last years trying to understand the underlying mechanism of acupuncture effects. Technological advances allowed describe specific neurological areas where acupunctural stimuli may act. Functional MRI was used to investigate neural response even using distal acupoints. On the other hands, the demonstration with fluorescent nanoparticles of primo vascular system allow us speculated how the information migrate along body. Finally, several studies with biochemical and molecular techniques hypothesized that specific acupoint may influence crucial mechanisms as neurogenesis. There are substantial variations in study protocols regarding treatment duration, acupoints selected, frequency of acupuncture/electroacupuncture, etc. However, some general conclusion may be formulated.

Keywords: Acupuncture;Neurogenesis;Neurology



Effect of Acupuncture in Bell's Palsy: Case series.

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case 1: 49 year-old woman with Bell's palsy on the left side which happened 3 weeks ago. Her left side of the face was swollen, with pain near her left ear, and stiffness on the left of her neck. She had severe anxiety, and depression. The neurologist could not complete the steroid medication because of probable Herpes Infection. A total of 12 Electroacupuncture sessions every 2 days was done to acupuncture points: ST2, ST3, ST4, ST6, ST7, TE17, GB14, ST8 on the left side; LI20, LI4 bilaterally. After the 2nd session, the pain around the left ear, and the left side of the neck disappeared completely. After the 5th, the edema, and swelling decreased. In the end of treatment, she improved totally with no anxiety.

case2:

58 year-old woman diagnosed as Bell's palsy on left side two weeks ago, applied with weakness and retroauricular pain. No improvement was achieved despite medication. A total of 6 acupuncture sessions was applied as both Electro acupuncture and manual. Same points of case 1 were selected. The patient showed improvement, beginning from the third session. After 6th session, her sensation and fascial muscle strength improved a lot. Also the retro auricular pain disappeared starting from first week.

case 3:

12 year old boy, having numbness and weakness in left side fascial muscles 2 weeks ago. He was given oral corticosteroid therapy for 10 days, but no improvement. After 6 sessions of electroacupuncture applied every 2 days he was healed completely.

Discussion:

In many meta-analysis (Pinping Li, et al including 13 studies, and Kim et al respectively) the total effective response rates in the acupuncture groups were significantly higher than the control groups, and the groups taking Corticosteroids.

In conclusion: Acupuncture is a perfect treatment for Bell's palsy, the improvement is seen immediately, it helps for anxiety, and shortens the exposure to excessive Corticosteroids.

Keywords: Acupuncture for Bell's Palsy; Bell's Palsy; Acupuncture for Peripheral fascial paralysis; Electroacupuncture for Bell's palsy; acupuncture in pediatric Bell's palsy



Acupuncture Approach in Migraine

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Migraine very high among disability-causing disease. Common symptoms include: only on one side of the head pain, nausea, vomiting, sensitivity to light or sound. The causes of migraines are not known. The presence of typical clinical signs and symptoms help diagnose migraines. Migraine attacks can be triggered by many factors.

The effect of acupuncture in the treatment of migraine has been well recognized in Traditional Chinese Medicine. The physiological mechanism of acupuncture treatment of migraine is unclear. Several hypotheses have been proposed that emphasize the impact of acupuncture on relieving pain, including eliciting an analgesic effect on the hypothalamic-pituitary-adrenal axis and the endogenous opioid system.

Traditional Chinese Medicine categorizes migraine as a shaoyang (temporal region) headache, a wind syndrome of the head. A few acupuncture points useful in treating migraine include: Shuaigu (GB 8), Taiyang (Extra 1) and Waiguan (SJ 5). Shuaigu (GB 8) has a local point location in the temporal region useful in treating headache due to qi stagnation. Taiyang (Extra 1) promotes the circulation of anti-pathogenic qi in the local affected region and disperses external pathogenic factors causing shaoyang syndromes. Waiguan (SJ 5) is a distal point on the limb selected to treat migraine through the affected Sanjiao channel, which runs along the side of the head in addition to the GB meridian. Auricular, or ear, acupuncture also has been found to be beneficial in the reduction of pain in migraine.

Acupuncture can effectively treat migraine through a combination of selected local scalp points combined with distal points located on the affected meridians. Treating migraine headaches with acupuncture can regulate yin and yang, strengthen qi and eliminate pathogenic factors.

Acupuncture can be used as an alternative therapy in migraine patients willing to undergo medical treatment. Acupuncture on migraine is both safe and effective, without major side adverse effects.

Keywords: Acupuncture Approach in Migraine ;headache and acupuncture;acupuncture



Motion acupuncture for musculoskeletal pain:

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[Abstract] Motion Acupuncture (MA) refers to a unique acupuncture technique where a patient performs exercises under supervision of doctors with needles inserted and retained in the points throughout the acupuncture session. It is a comprehensive acupuncture therapy that combines channels and meridians theories, tendons and sinews theories, anatomy, kinematics, and acupuncture, which is mainly for the treatment of soft tissue injuries and a variety of pain conditions. In this article, the three major procedures of MA, i.e., examination of target points, insertion of needles, and methods of exercises, were described and discussed. It is mainly used to treat pain caused by soft tissue injury. In recent years, it has been found that it can also treat many dirty diseases such as weight loss, gastrointestinal diseases, gynecological diseases, allergies (pollen rhinitis), and tinnitus etc.



A New Direction in Acupuncture Research from the East

Dr Mike Cummings

Medical Director, British Medical Acupuncture Society

The vast majority of acupuncture research is performed in China and published in Chinese. It is inaccessible to most of us in the West; however, it is increasingly being summarised in systematic reviews in the English language. The quality of clinical research published in English has been steadily improving, and in recent years there have been not only improvements in the quality of conduct and reporting of clinical trials but there has also been a subtle but dramatic change in the formulation of some research questions. In my early days in the acupuncture field in the mid-nineties, Chinese research in acupuncture seemed to be associated with improbably good results, and it was one region of the world that only published positive trials. Consequently, it was easy to dismiss. That is no longer the case and in the last decade we have seen the first large negative or neutral trials published in English language journals from China, and more recently still we have seen some very large trials of what to all intents and purposes are rather tight segmental electroacupuncture (EA) protocols ie what appears to be a research question that tests a clear Western neurophysiological mechanism rather than a more complex TCM pattern-based concept.

In this presentation I will chart the change in clinical research from China that started with 'improbably good' to become 'huge and entirely believable', and what I perceive to be the adoption of mechanism-based EA protocols.



How to practice in a city that keeps falling

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Objective

This presentation will explore what can happen in a city when emergencies strike, strike again and again. Earthquakes, thousands of aftershocks, flooding and a mass shooting all within 9 years. It discusses how practitioners coped and treated their community in extremely hard times. It will show those attending how they can set up community clinics and work in emergency centres helping them treat a community in need and become accepted as a necessary style of medicine.

Material

The material presented is based on experience of acupuncturists living through these times often out of their homes and businesses organising community clinics and other emergency centre treatment spaces, sometimes without water, power or toilet facilities.

Method

The need to use all our Chinese Medicine tools.

Topics covered will include;

- • Recognising your own needs and how to move forward.
- • Establishing care for your community.
- • Recognising and how to treat shock, anxiety, stress and post-traumatic stress disorder when treating in unusual circumstances.

Results

Treating victims in a manner that is comfortable to them will contribute to a transition to regular acupuncture treatment, as they continue to have a trusting supportive relationship with their practitioner which has the potential to continue well into future. Community education is also a great result from having to treat in these circumstances.

Conclusion

Those who attend this presentation can anticipate leaving with knowledge of what to expect as the result of unpredictable disasters, how they may cope and effective ways to help their communities. Attendees may also leave with ideas on how to better utilise all their Chinese Medicine skills learned in unplanned situations. They can explore concepts they had not previously considered and an understanding on how these can be effective.

Keywords: Chinese Medicine;Disasters;Community;Acupuncture



The Link Between Acupuncturist Fatigue and Potential Adverse Events Whilst Practicing Acupuncture

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An audit to establish if there was a link between fatigue and adverse events whilst practicing acupuncture.

The audit took place from May 2014 to August 2014. 306 treatments were carried out. There were 23 adverse events representing 7.5%. All of these 23 events were Bleeding, Bruising, Fainting and 1 'Forgotten needle'. 19 of these were minor bleeding following withdrawal of the acupuncture needle. 2 of these were episodes of fainting, 1 was bruising in trapezius; 1 adverse incident involved a 'forgotten needle'.

The largest single prospective observational study of the safety of acupuncture included 229,230 patients and a total of over 2 million treatments. 8.6% of patients reported at least one adverse event. 6.1% of these events were bleeding or bruising which represented 58% of all adverse events. *My results were similar with an incident rate of 7.5%. 6.2% of these events were bleeding or bruising which represented 82.6% of all adverse events. Fatigue would appear to have a negative impact on the incidence of adverse events but despite this the incident rate of my audit was similar to the rate calculated in the German study. However the York acupuncture safety study: prospective survey of 34000 reported a combined rate of 2.1% for mild bruising (1.7%) and bleeding (0.4%) **.

The average working week in the UK is 42.7 hours. This equates to 8 hours 30 minutes a day. 7 Adverse Events took place during 8 hours 30 minutes of work at my clinic representing a similar incident rate of 2.28%.

Working beyond 8 hours 30 minutes resulted in a 328.57% (over 3¼ times) increase in this incident rate.

Awareness of the signs of fatigue and implementing measures reduced the adverse effects according to the York Acupuncture Safe Study.

In Conclusion: A positive correlation was found between Acupuncturist fatigue and increased frequency of adverse events.

Keywords: Acupuncturist fatigue; adverse events; acupuncturist's working hours



Protecting public safety by ensuring qualified acupuncture practice

K.Y. LI¹

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Acupuncture practice in Australia is regulated under the Health Practitioner Regulation National Law and has been a registered profession in Australia under the National Accreditation and Registration Scheme since 2012. This law requires acupuncture practitioners to be registered with the Chinese Medicine Board of Australia before they can commence practice, thus ensuring a safe, effective and ethical acupuncture service for the general public.

With the increased popularity of acupuncture in the Australian mainstream health system, unqualified practice using needles termed Dry Needling has emerged. We also see dry needling happening in many other countries.

It is not only damaging the reputation of the Chinese medicine profession but also posing a great risk to public safety. However, under the current legislation, the law cannot stop this so-called Dry Needling practice in Australia. The issue of Dry Needling has drawn great attention in the health sector in Australia. The Australian Acupuncture and Chinese Medicine Association (AACMA), as the leading national professional organisation in Chinese medicine, has taken the leadership in challenging the practice of Dry Needling by unqualified practitioners. We have established a united front with major Chinese medicine stakeholders to talk to the relevant government departments and agencies. We believe that the public should be aware of the differences between a registered acupuncturist and unregistered dry needlers. Therefore, AACMA has launched a media campaign which has been well received by the public. While some progress has been made, further work still has to be done in order to stop the unqualified use of needles. International co-operation between Acupuncture bodies will greatly contribute to this goal.

Keywords: acupuncture practice;a registered profession;public safety;dry needling;AACMA



5-Element-Ağırmetal ilişkisi

Dr. Doğu Yıldırım

Akupunktur Beş Element işletim sistemi, bedenin anatomi ve fizyolojisini yönetir. Aynı zamanda her element belirli zihin ve duygu niteliğinin ifadesi olduğundan, sağlık ve hastalıkla ilgili bilgi açısından çok büyük öneme sahiptir.

Günümüzde pek çok kronik ve dejeneratif hastalıkların zemininde rol oynayan, insan faaliyetleri sonucu ortaya çıkan Ağır metallerin ekolojik sistemlere ve sağlığa zararlı etkileri oldukça önemlidir.

Kadim Akupunktur bilgisi sağlıklı birlikte yaşadığımız tüm elementlerin uyum ve dengesi olarak kabul eder

O halde ;

Akupunktur 5-element bilgisi ile Ağır metal sorununa yaklaşımımız nasıl olabilir.?

Medikal Akupunktur Ağır Metal Şelasyon Tedavisi ile birlikte kullanılabilir mi?.



Pharmacupuncture In Terms Of Pharmacognosy

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Abstract

Acupuncture is one of the oldest and most characteristic treatment methods in the history of medicine, which has been practiced in Chinese medicine for nearly four thousand years. In recent scientific studies, when the anatomical, histological and electrical properties of acupuncture points were compared with non-acupuncture points were determined differences. Capillarization and somatosensory receptors, especially nociceptors, are densely at the acupuncture point. The various properties of the acupuncture point have led to the idea that not only the acupuncture needle, but many other substances such as phytotherapeutic agents should be injected into this point. Also, promising results were expected from this different substances.

In the past, we see that medicine which consist just one compound prepared by pharmacists and physicians are applied to some parts of the body with different methods.

Pharmacupuncture studies are planned as using antiinflammatory, analgesic, antibacterial, antioxidant, antiallergic and anticarcinogenic effects of plants kind of Witheneria somniferum, Viscum album, Camellia sinensis, Epilobium sp. Curcuma longa, Salvia sp. ve Glycine max. The activities mentioned for these plants have been proven in clinical trials. In this review, we will evaluate these therapies and their outcomes from the perspective of pharmacognosy.

We will discuss that the future of pharmacupuncture and what kinds of phytotherapeutic agents are used in pharmacupuncture studies for many diseases, especially inflammatory diseases.

Key Words: Pharmacupuncture, phytotherapy, acupuncture point, inflammation, cancer, allergi

Keywords: Pharmacupuncture;;phytotherapy;acupuncture point;inflammation;cancer



Application of chinese scalp acupuncture technique in the treatment of bradykinesia in patient with Parkinson's disease: Case Study

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Parkinson's disease is a neurodegenerative condition that affects the patient's movements, causing tremors, muscular rigidity, postural imbalance and bradykinesia. Bradykinesia is characterized by reduction of movement speed, which makes difficult for patients to carry out daily activities, both personal and professional. Scalp acupuncture is a method of treatment which punctures strategic areas on the head of the patient aiming to correct neuro dysfunctions. The goal of this work is to demonstrate the effect of scalp acupuncture for the treatment of symptoms of bradykinesia in patients with Parkinson's disease. The patient was first assessed by "timed up and go" tests, which can verify, through the use of a chronometer, how fast are the patient's movements as he rises from a chair and covers a 3-meter distance, and returns to the starting point. This test was chosen for combining the movements that are of highest difficulty to be done in day-to-day life, according to the patient himself. Subsequently, the patient underwent 20 sessions of scalp acupuncture, and was then submitted to the same test again, in order to verify possible results of the treatment. The final result showed that scalp acupuncture was efficient to diminish bradykinesia in the patient.

Keywords: Parkinson's disease. ;Scalp acupuncture.;Bradykinesia;Acupuncture



ACUPUNCTURE PROVED TO BE MORE EFFECTIVE THAN NEURAL THERAPY AND HYALURONIC ACID INJECTION FOR SHOULDER PAIN: TWO CASE SERIES

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These two case series involve 9 patients with unilateral shoulder pain, having Rotator cuff Syndrome. 3 of them had subacromial Hyaluronic acid injection(HA), 6 had cervical quaddel-local and subacromial neural therapy(NT) injections, and since both groups (HA and NT) didnot improve , and continued having pain, they received Electroacupuncture therapy(EAP), and manual acupuncture (AP) which ended with satisfactory results. Points LI15, LI16, SI11, TE14, SI13, GB21, and trigger points were selected.

In the 1st case series receiving neural therapy (%2 lidocainwith saline), average age of patients were 53 with duration of shoulder pain of 5 months in average. All patients had 3 sessions of neural therapy. Due to no improvement in pain relief, and function, Electroacupuncture(EAP), and manual AP was applied. After AP threatment, 2 patients reported 'excellent' improvement with a reduction of 80-90% in VAS(6, and 3 eap sessions), 1 patient reported an improvement of 70 %(4 sessions), and 2 patients around 30 %.(3,6,4 sessions)

In the 2nd case series of 3 patients with an average age of 58, shoulder pain of 3 months having received subacromial HA injection, since there was no improvement, after they had EA and manual AP treatments with an average of 6 sessions. As improvement and pain relief,1 patient stated 90%(4 sessions), 1 patient 70%(7 sessions), and the last 50%(8 sessions).

In conclusion: Acupuncture is an efficient and cost-effective treatment for patients with shoulder pain, and found to be better than neural thearpy, and Hyaluronic acid.

Keywords: Electroacupuncture;Acupuncture for shoulder pain;Acupucture compared to neural therapy;Acupuncture compared to hyaluronic acid;Subacromial injections versus acupuncture



Akupunktur ile kilo kontrolünde uyku bozukluğu tedavisinin başarıya etkisi.

Nalan Erdem¹

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Amaç: Psikososyal stresler, alışkanlıklar, anksiyete yeme bozukluklarına yol açan en önemli nedenlerdir. Hastalar için özellikle değişen yeme alışkanlıklarına uyum önemli bir sorun olarak ortaya çıkmaktadır. Kilo vermede ve kontrolünde en önemli başarısızlık nedeni bu uyum sürecindeki zorlanmalardır. Uyku kalitesinde bozukluk varlığında gece yeme davranışı ortaya çıkabilmekte ve tedaviye uyumu zorlaştırmaktadır. Bu çalışmada kilo kontrolünde uyku kalitesini arttırmaya yönelik yaklaşımın obezite tedavisinde etkinliği araştırılmıştır.

Yöntem: Obezite tedavisi için başvuran ve uyku bozukluğu sorunu olan ardışık 80 hasta çalışmaya dahil edildi. Hastaların yarısına Nogier'in obezite protokolüne uygun olarak kulakta Agiskop DT (sedatelec®) ile kulakta uygun noktalar bulunarak altın ve gümüş iğnelerle 20'er dakikalık seanslar uygulandı. Kalıcı iğne takılmadı. Diğer yarısına obezite protokolüne ek olarak her iki kulakta altın ve gümüş iğnelerle uyku tedavisi eklendi. Hastalar literatürde çok sayıda araştırmayla etkinliği kanıtlanmış bioimpedans analiz yöntemleriyle takip edildi (AKERN S.R.L. Bioresearch, Italy). Bioimpedans analizleriyle elde edilen yağ kütlesi miktarı ve total vücut ağırlığına oranı tedavi süresince her 15 günde bir kaydedildi. Sonuçlar ANOVA, t-test, Tukey ve eşleştirilmiş iki örnek testleriyle karşılaştırıldı. Hastalara özel bir diyet listesi verilmedi, her hastaya alıştığı ve ulaşılabilir şekilde beslenme önerildi. Hastalar tedavi süreci öncesinde bir eğitim programına alındı ve her biri kendisi için uygun olan kalori miktarı ve besin dağılımı açısından bilgilendirildi ve kayıt tutmaları istendi. Egzersiz programı önerilmedi. Tedavi süresince başlangıçta haftada iki kez, daha sonra hasta için uygun olan zamanda haftada bir kez akupunktur tedavisi uygulandı.

Bulgular: 2,6 ve 10. haftalarda yağ kütlesi kaybı iki grup (uyku+obezite protokolü uygulanan grup ile yalnızca obezite protokolü uygulanan grup) arasında farklı bulundu ($p<0,05$). Her iki grupta kendi içinde başlangıç değerlerine göre kilo kaybı anlamlı olarak gerçekleşti.

Sonuç: Uyku bozukluğu ile birlikte görülen obezite durumunda obezite tedavisine uyku bozukluğu tedavisinin eklenmesi hasta uyumunu ve başarıyı arttırmaktadır.

Keywords: akupunktur;obezite;uyku bozukluğu



Current Situation of Japanese Traditional Acupuncture

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Key words: Japanese traditional acupuncture, needling technique, contact needles, gentle stimulation, “2011 Tokyo Declaration on Japanese Acupuncture”

Some of the unique aspects of Japanese Traditional Acupuncture (JTA) are characterized by its great diversity of therapeutic methods, palpation-based physical examination, and soft gentle treatments with superficial insertion using thin needles like hair, comparing with China and Korea. The purpose of this study is to compare and discuss the characteristics of different styles and groups of current JTA.

Acupuncture and moxibustion treatment in Japan have been imported from ancient China in the 5th or 6th century, and have been arranged and modified based on Japanese environment, culture, philosophy, sensitivity, and mind, resulting in making itself distinguished from TCM. Although JTA has repeatedly gained and weakened its position depending on the social and political background in Japan, it still has steadily evolved. The “2011 Tokyo Declaration on Japanese Acupuncture”, by the Japan Society of Acupuncture and Moxibustion (JSAM) and the Japan Traditional Acupuncture and Moxibustion Society (JTAMS), points out following 6 features of Japanese Acupuncture: 1) diagnostically palpation (touch-based diagnosis) valued, 2) development of acupuncture and moxibustion treatment along with diagnostic device being advanced from Western medicine perspective, 3) development of acupuncture and moxibustion treatment with gentle stimulation and less invasiveness, 4) eclectic mix of different styles and methods including Western medicine based perspective, 5) frequent use of moxibustion treatment, and 6) having concept of preventive medicine. 1), 3), and 4) are also the major aspects in JTA with a wide variety of groups and styles.

This study summarizes my previous studies, “Field Survey of Acupuncture Treatment in Japanese Traditional Acupuncture” in 2015 and 2017, to present the characteristic features and theories of different styles and groups in the current JTA. The research indicates unique acupuncture techniques such as guide tube insertion, “dashin-ho” (needling with hammer,) and contact needling, as well as how Japanese practitioners use two different techniques of simple insertion and retaining needles depending on different situations.



Pharmacupuncture

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The roots of acupuncture treatment go back at least three thousand years. The popularity of this treatment is increasing day by day. Many recent studies on the acupuncture point show that the anatomical, histological and electrical properties of the acupuncture point differ from those of the body without acupuncture points. It was determined that there were histological properties such as intense of somatosensory receptors, especially noci receptors and of microvessels and capillaries and electrical properties such as low resistance and high conductivity. We can add to this situation that acupuncture points and meridians may be related to the primovascular system. The fact that the acupuncture point has such a different feature, the relationship between the primovascular system and the acupuncture meridian, the acupuncture point, not only the acupuncture needle, but ejection of many phytotherapeutic agents and substances has led to the expectation of different results. In the literature, it is determined that pharmacupuncture is applied in rheumatic, circulatory, endocrine, urogenital, digestive, immune and respiratory diseases. In these diseases, anti-inflammatory, analgesic activity, anticancer activity, antioxidant activity, antiallergic activity, antidepressant activity have been studied. In this presentation, we will discuss which acupuncture points and phytotherapeutic agents have been used in pharmacupuncture applications in many diseases recently and how they are applied. We will talk how pharmacupuncture can contribute to today's medicine.

Keywords: pharmacupuncture;primovascular system;phytotherapeutic agents;anti-inflammatory activity;analgesic activity



The Pilot Study of spectral indexes of the blood pressure waveform in patients with breast cancer receiving chemotherapy and Kuan-Sin-Yin

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Objective:

In Taiwan, breast cancer has been the fourth cause of female cancer death. But the cure rate is high if early treated. Up to now the effective treatments of western medicine for breast cancer still result in many side effects. A tumor can induce abnormalities in vessel properties and the blood flow distribution. The aim of the present study is to noninvasively determine if blood-pressure-waveform (BPW) harmonic indexes can be used to discriminate the different microcirculatory and physiological function states of breast-cancer patients with chemotherapy between receiving and not receiving Kuan-Sin-Yin (KSY) treatment.

Material :

Ten-minute bilateral radial BPW signals were obtained noninvasively in 9 breast-cancer patients receiving KSY and 5 breast-cancer patients not receiving KSY (Control) . The amplitude proportion (Cn) was calculated for harmonics 1 to 10 of the BPW. The KSY effect was also noted to be accompanied with improvement of EORTC QLQ-C30 scores. These could lead to a rapid, inexpensive, and objective technique for enhancing clinical applications in quality-of-life monitoring of breast cancer therapy.

Results:

The Control group showed significant first harmonics and third harmonics, and the fifth and sixth harmonics appeared slightly more prominent. The trends were presented as falling first and then rising. Integrating with Kuan-Sin-Yin (KSY) could prevent the side effect of nausea and vomiting, appetite loss, diarrhea, decreasing WBC during Breast Cancer Chemotherapy.

Conclusion:

The differences identified the results of BPW analysis between the breast cancer receiving KSY and control groups illustrate significantly prevent side effect induced by breast cancer at stages 0–2.

Keywords: Breast Cancer;Kuan-Sin-Yin;Quality of Life;EORTC;Blood Pressure WaveForm



Akupunktur Reçetesi Nasıl Hazırlanır?

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Akupunktur reçetesi, hastalık nedeninin tespiti temelinde, akupunktur tedavi kurallarına göre uygun hat-ağ (meridyen), yuva (nokta), yöntem, zaman ve miktarla oluşan tedavi tasarımıdır.

1. Yuva (Nokta) Seçme Dayanağı

Yuva (nokta), akupunktur reçetesinin birinci temel faktörüdür. Yuva seçimi, *Hat-Ağ (Meridyen) Öğretisi*, yuva özelliği ve vücudun tepkili (hassas) noktalarına dayanır. Ayrıca, çağdaş tıp bilgileri ve yuvalar üzerindeki araştırmalara da bakılır.

Tablo-8: Özel yuvaların (noktaların) üç dilli karşılığı

Türkçe	Çince	İngilizce
Kuyu Yuva	井穴 [jǐng xué]	Well Point
Arik Yuva	荣穴 [xíng xué]	Brook Point
Dere Yuva	输穴 [shū xué]	Stream Point
Çay Yuva	经穴 [jīng xué]	River Point
Irmak Yuva	合穴 [hé xué]	Sea Point
Delik Yuva	邻穴 [lín xué]	Cleft Point
Asıl Yuva	原穴 [yuán xué]	Source Point
Ağ Yuva	络穴 [luò xué]	Connection Point
Bağış Yuva	募穴 [mù xué]	Alarm Point
İzin Yuva	俞穴 [shū xué]	Back Transport Point
Öz Yuva	本穴 [běn xué]	Same Point
Ana Yuva, Takviye Yuva	母穴 [mǔ xué], 补穴 [bǔ xué]	Mother Point, Tonifying Point
Evlat Yuva, Tahliye Yuva	子穴 [zǐ xué], 泻穴 [xiè xué]	Child Point, Reducing Point
Sekiz Buluşma Yuva	八会穴 [Bā huì xué]	Eight Meeting Points
Kavşak Yuva	交会穴 [Jiāo huì xué]	Crossing Point
Sekiz Damar Kavşak Yuva	八脉交会穴 [Bā mai jiāo huì xué]	Crossing Point of Eight Vessels

NOT:

1. Yuvaların (noktaların) Türkçe çeviri hususundaki araştırmalarım kitap sonunda eklenen “Türk Dilindeki Akupunktur Terminoloji Sorunu” başlık altında teferruatlı anlatılmıştır.

2. Yuvaların İngilizce çevirisindeki yanlışlıklar *Dünya Sağlık Örgütü 2008 Geleneksel Tıp Uydu Sempozyumu’nda “Akupunktur Terimlerinin Çeviri Standart Sorunu”* (关于针灸术语的翻译标准化问题) başlık altında Çince yazılı olarak sunulmuştur.



(1) Hat-Ağ Öğretisi

Hat-ağlar, insan vücudunun bağlantı yolları, can dolaşım hatlarıdır. Geleneksel Çin Tıbbı'nın *Jing Luo (Hat-ağ) Öğretisi*, insan vücudundaki organ ve dokuların *Hat Damar ve Ağ Damar* olarak bilinen *Can Damar*'larıyla bütünleştiğini teyit ederek, insan vücudunu bir bütün gövde olarak kabul eden bir ilkedir. Fizyolojik faaliyet ve patolojik değişikliklerin temel teorisidir. Hastalıkları teşhis ve tedavi etmenin dayanağıdır.

Bu öğretiye göre, bütün organ ve sistemlerin faaliyeti, bu *Can (Qi) in* kol ve bacaklarda eşit olarak 6 eksi, 6 artı ve ayrıca bunları tayin eden ve yöneten önde bir eksi, arkada bir artı, toplam 14 hatta (sözde meridyenlerde) sürekli ve dengeli dolaşmasına bağlıdır. Şayet bu denge bozulursa insan hastalığa yakalanır. Akupunktur 'un bilimsel açıklaması da işte bu *Hat-Ağ Öğretisi* 'ne dayanmaktadır.

(2) Yuvaların (Noktaların) Tedavi Etkisi

Yuvalar, ait olduğu ha-ağa, bulunduğu yere göre değişik tedavi özelliğine sahiptir. Klinikte yuva seçimini en önemli dayanağıdır. Özel etkiye sahip olan bazı yuvalar, klinikte tedavi özelliğine göre seçilir.

Değişik bölgeler ve değişik hat-ağlara ait bazı yuvalar, yeri ve hizmeti bakımından değişik niteliklere sahiptir, yani her bir hata ait yuvalar içinde ayrı özellik taşıyan önemli yuvalar vardır. Bu özel yuvaları şöyle çeşitlendirmek mümkün:

Beş Nakil Yuva 五輸穴 [wǔ shù xué] Five Transport Points

El ve Ayaktaki Eksi Hatların Beş Nakil Yuvası

5 Nakil Yuva	Kuyu	Arık	Dere	Çay	Irmak
6 Eksi Organ					
E - Akciğer	Ac-11	Ac-10	Ac-9	Ac-8	Ac-5
E - Kalp zarı	Kz-9	Kz-8	Kz-7	Kz-5	Kz-3
E - Kalp	Kp-9	Kp-8	Kp-7	Kp-4	Kp-
A - Dalak	DI-1	DI-2	DI-3	DI-5	DI-9
A - Karaciğer	Kc-1	Kc-2	Kc-3	Kc-4	Kc-8
A - Böbrek	Br-1	Br-2	Br-3	Br-7	Br-10

El ve Ayaktaki Artı Hatların Beş Nakil Yuvası

5 Nakil Yuva	Kuyu	Arık	Dere	Çay	Irmak
6 Artı Organ					
E + Kalın bağırsak	Kb-1	Kb-2	Kb-3	Kb-5	Kb-11



E + Üç odak	Üo-1	Üo-2	Üo-3	Üo-6	Üo-10
E + İnce bağırsak	İb-1	İb-2	İb-3	İb-5	İb-8
A + Mide	Md-45	Md-44	Md-43	Md-41	Md-36
A + Safra kesesi	Sk-44	Sk-43	Sk-41	Sk-38	Sk-34
A + Mesane	Ms-67	Ms-66	Ms-65	Ms-60	Ms-40

Kuyu yuvalar: Genelde bilinçaltı olaylar, koma, ruhsal bozukluklar ve 5 Zang organının illetten taşkın sendromlarında;

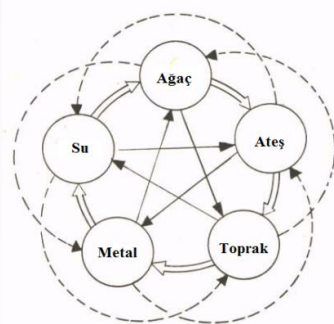
Arık yuvalar: Taşkın, sıcak sendromlarda;

Dere yuvalar: El-ayaklarda oluşan ağırlıklarda; eklem ağrılarında ve sürekli değişen sendromlarda; **Çay yuvalar:** Gırtlak, boğaz, astım ve soğuk sıcak sendromlarda;

İrmak yuvalar: Beslenmeden kaynaklı mide ve bağırsak sendromlarında kullanılır.

2) Ana – evlat yuvalarına (noktalarına) Takviye ve Tahliye

Ana-Evlat (母子 Mother and Child) ilişkisi, Geleneksel Çin Tıbbı'nın Beş Madde Öğretisi'ne ait özel bir deyimdir. Beş Madde ilişkileri içinde, bir nesnenin yeniden üretileni Evlat; yeniyi üreteni ise Ana olarak kabul edilir. Her bir madde, iki yönlü ilişkiye sahiptir.



Ana evlat yuvalarına Takviye ve Tahliye uygulaması, beş nakil yuvalar ve Zang ve Fu organların yoksun ve taşkın sendromlarında da kullanılabilir.

Yöntem: Beş nakil yuva, 12 hat damarı 5 madde öğretisine uydurarak “Üreteni Ana”, “Üretileni Evlat” kuralına göre, yuvalarının ana–evlat ilişkisi belirlenir. Sonra “Yoksun sendromlarda ana yuvaya takviye”, “Taşkın sendromlarda evlat yuvaya tahliye” uygulanır.

Öz hat (Günlük nöbetçi hat) üzerinde Takviye - Tahliye:

Öz hat üzerine Takviye - Tahliye, hastalık oluşan hattın 5 nakil yuvası üzerinde takviye - tahliye uygulamak demektir. Örneğin: Akciğer hattı metal nitelikli hattır. Beş Madde Öğretisine göre, topraktan metal ürettiği için, akciğer hattının toprak nitelikli Ac-9 (Taiyuan) yuvası akciğer hattının ana yuvasıdır. Metal suyu ürettiği için, akciğer hattının su nitelikli Ac-5



(Chize) yuvası akciğer hattının evlat yuvasıdır. Akciğer hattında oluşan taşkın sendromlarda “taşkına evlat yuvaya tahliye” kuralına göre, Ac-5 (Chize) yuvasına tahliye uygulanır. Akciğer hattında oluşan yoksun sendromlarda ise “Yoksuna ana yuvaya takviye” kuralına göre, Ac-9 (Taiyuan) yuvasına takviye uygulanır.

Diğer hat (O hat) üzerinde Takviye - Tahliye:

Diğer hat üzerine Takviye - Tahliye, hastalık oluşan hattın ana hattının ana yuvasına; evlat hattının evlat yuvası üzerinde takviye - tahliye uygulamak demektir. Örneğin: Akciğer hattının ana hattı, toprak nitelikli dalak hattıdır. Dalak hattının toptak nitelikli DI-3 (Taibai) yuvası akciğer hattının ana hattının ana yuvasıdır. Dolayısıyla, Akciğer hattının yoksun sendromlarında, dalak hattının DI-3 (Taibai) yuvasına takviye uygulanır. Akciğer hattının evlat hattı su nitelikli böbrek hattıdır. Böbrek hattının su nitelikli Br-10 (Yingu) yuvası akciğer hattının evlat hattının evlat yuvasıdır. Dolayısıyla, akciğer taşkın sendromlarında böbrek hattının Br-10 (Yingu) yuvasına tahliye uygulanır.

Kuyu Yuva 井穴 [jǐng xué] Well Point

Türkçe kaynaklarda “Göze noktası”, “Pınar noktası”, “Çeşme noktası”, “Jing - Well noktası”, “1. eski su noktası”, “Başlangıç noktası”, “Jing – Menşei nokta”, “Kaynak nokta” olarak değişik isimlerle adlandırılan bu yuva, “Can” dolaşımının başladığı yerdir.

6 Eksi Organ	Kuyu Yuva	6 Artı Organ	Kuyu Yuva
E - Akciğer	Ac-11	E + Kalın bağırsak	Kb-1
E - Kalp	Kz-9	E + Üç odak	Üo-1
E - Kalp	Kp-9	E + İnce bağırsak	İb-1
A - Dalak	DI-1	A+ Mide	Md-45
A - Karaciğer	Kc-1	A + Safra kesesi	Sk-44
A - Böbrek	Br-1	A + Mesane	Ms-67

Kuyu yuvalar genelde, ruhsal bozukluklar, bayılmalar ve beş eksi organın taşkın sendromlarında da kullanılır.

Arık Yuva 榮穴 [xíng xué] Brook point

Türkçe kaynaklarda “Dere noktası”, “Yung - Spring noktası”, “2. eski su noktası”, “Ying – Çay nokta”, “Küçük Göl nokta”, “Su Birikintisi noktası”, “Çılız noktası” olarak değişik isimlerle adlandırılan bu yuva, “Can” dolaşımının hızlandığı yerdir. (69)



6 Eksi Organ	Arık Yuva	6 Artı Organ	Arık Yuva
E - Akciğer	Ac-11	E + Kalın bağırsak	Kb-1
E - Kalpzarı	Kz-4	E + Üç odak	Üo-1
E - Kalp	Kp-9	E + İnce bağırsak	İb-1
A - Dalak	DI-1	A+ Mide	Md-45
A - Karaciğer	Kc-2	A + Safra kesesi	Sk-44
A - Böbrek	Br-1	A + Mesane	Ms-67

Arık yuvalar genelde taşkın sıcak sendromlarında kullanılır.

Dere Yuva 输穴 [shū xué] Stream Point

Türkçe kaynaklarda "Çay noktası", "Shu – Stream noktası", "3. eski su noktası", "Sürükgen nokta" olarak değişik tarzda adlandırılan bu yuva, "Can" dolaşımının dolum yaptığı yerdir. (71)

6 Eksi Organ	Dere Yuva	6 Artı Organ	Dere Yuva
E - Akciğer	Ac-9	E + Kalın bağırsak	Kb-3
E - Kalp zarı	Kz-7	E + Üç odak	Üo-3
E - Kalp	Kp-7	E + İnce bağırsak	İb-3
A - Dalak	DI-3	A+ Mide	Md-43
A - Karaciğer	Kc-3	A + Safra kesesi	Sk-41
A - Böbrek	Br-3	A + Mesane	Ms-65

Dere yuvalar genelde el-ayaklarda rastlanan ağrı şikayetlerinde, eklem ağrılarında, sık-sık nökseden hastalıklarında kullanılır.

Çay Yuva 经穴 [jīng xué] River Point

Türkçe kaynaklarda "Irmak noktası", "Büyük Irmak noktası", "Ching – River noktası", "Jing – Nehri noktası", "Su – Yolu noktası", "4. eski su noktası" olarak değişik isimlerle adlandırılan bu yuva, "Can" dolaşımının geçiş yaptığı yerdir. (76)

El ve Ayaktaki Tüm Hatların Çay Yuvaları

6 Eksi Organ	Çay Yuva	6 Artı Organ	Çay Yuva
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E -	Akciğer	Ac-8	E +	Kalın bağırsak	Kb-5
E -	Kalpzarı	Kz-5	E +	Üç odak	Üo-6
E -	Kalp	Kp-4	E +	İnce bağırsak	İb-5
A -	Dalak	DI-5	A +	Mide	Md-41
A -	Karaciğer	Kc-4	A +	Safra kesesi	Sk-38
A -	Böbrek	Br-7	A +	Mesane	Ms-60

Çay yuvalar genelde boğaz, gırtlak ağrıları, öksürük, nefes darlığı gibi soğuk- sıcak sendromlarda kullanılır.

Irmak Yuva 合穴 [hé xué] Sea point

Türkçe kaynaklarda "Delta noktası", "He - Delta noktası", "Nehir Mansabı/Ağızı", "5. eski su noktası", "He – Sea noktası", "Birleşme noktası", "Nehir nokta", "Çatalağız noktası" olarak değişik isimlerle adlandırılan bu yuva "Can" dolaşımının yığıldığı yerdir. (79)

El ve Ayaktaki Tüm Hatların Irmak Yuvaları

6 Eksi Organ		Irmak Yuva	6 Artı Organ		Irmak Yuva
E -	Akciğer	Ac-5	E +	Kalın bağırsak	Kb-11
E - zarf	Kalp	Kz-3	E +	Üç odak	Üo-10
E -	Kalp	Kp-3	E +	İnce bağırsak	İb-8
A -	Dalak	DI-9	A+	Mide	Md-36
A - Karaciğer		Kc-8	A +	Safra kesesi	Sk-34
A -	Böbrek	Br-10	A +	Mesane	Ms-40

Irmak yuvalar genelde beslenme bozukluklarında kaynaklanan mide ve bağırsak hastalıklarında kullanılır.

Alt Irmak Yuva 下合穴 [xià hé xué] Lower Sea Point

Türkçe kaynaklarda "Alt birleşme noktaları", "Alt confluent noktaları", "Etkinin aşağı noktaları" olarak değişik isimlerle adlandırılan bu yuvalar, 6 Fu (Artı-organın) ayaklardaki (alt ekstremitlerdeki) Yığın yuvaları yani alt ırmak yuvalarıdır. (83)

Alt Irmak Yuva ve Onların Dönüş Hatları

Altı Fu Organ	Alt Irmak Yuva	Döndüğü Hat	Altı Fu Organ	Alt Irmak Yuva	Döndüğü Hat
Mide	Md-36	Mide hattı	Safra kesesi	Sk-34	Safra kesesi hattı



Kalın bağırsak	Md-37		Mesane	Ms-40	Mesane hattı
İnce bağırsak	Md-39		Üç odak	Ms-39	

Alt ırmak yuvalar genelde artı can taşıyan 6 Fu organa ait hastalıkların tedavisinde kullanılır

Asıl Yuva 原穴 [yuán xué] Source Point

Türkçe kaynaklarda "Kaynak nokta", "Yuan nokta", "Yuan – Akıntı noktası", "Kollektör nokta", "Yardımcı nokta" gibi değişik isimlerle adlandırılan bu yuva, Eksi-organ (Zang) ve Artı-organ (Fu) lara ait Asıl Can'ın (Yuan Qi – 原气) nin yani böbrekte saklanan "Can" nın geçtiği ve barındığı yerdir. (72)

El ve Ayaktaki Tüm Hatların Asıl Yuvaları

6 Eksi Organ		Asıl Yuva	6 Artı Organ		Asıl Yuva
E -	Akciğer	Ac-9	E +	Kalın bağırsak	Kb-4
E -	Kalp zarı	Kz-7	E +	Üç odak	Üo-4
E -	Kalp	Kp-7	E +	İnce bağırsak	İb-4
A -	Dalak	DI-3	A +	Mide	Md-42
A -	Karaciğer	Kc-3	A +	Safra kesesi	Sk-40
A -	Böbrek	Br-3	A	Mesane	Ms-64

Asıl yuvalar, asıl canla sıkı ilişkilidir. 5 Zang organ hastalıklarının tanı - tedavisinde önemli rol oynar.

Ana Yuva 母穴 [mü xué] Mother Point,

Evlat

Yuva 子穴 [zǐ xué] Child Point

Türkçe kaynaklarda "Güçlendirici nokta", "Tonifikasyon noktası", "Dizginleyici nokta", "Sedasyon noktası", "Tonize noktası", "Sedire noktası" olarak bilinen bu "Ana" ve "Evlat" yuvaları, ancak Beş Madde değişimine göre, belli zaman koşulu altında Takviye veya Tahliye gerektiren yuvalardır. (84)

Tablo: Beş Nakil yuvalar içindeki Ana-Evlat ilişkili yuvalarının takviye - taliye seçimi

			Metal	Su	Ağaç	Ateş	Ateş	Toprak
		Hatlar	Akciğer	Böbrek	Karaciğer	Kalp	Kalpzarı	Dalak
Bu hattın		Ana Yuva	Ac-9	Br-6	Kc-8	Kp-9	Kz-9	DI-2
Ana-Evlat	Zan g	Evlat Yuva	Ac-5	Br-1	Kc-2	Kp-7	Kz-7	DI-5



yuvalar								
I								
		Hatla r	Kalınbağırsa k	Mesan e	Safrakese si	İncebağırsa k	Üç odak	Mide
	Fu	Ana Yuva	Kb-11	Ms-67	Sk-43	İb-3	Üo-3	Md- 41
		Evlat Yuva	Kb-2	Ms-65	Sk-38	İb-8	Üo-10	Md- 45

Tablo: Beş Nakil yuvalar içindeki Ana-Evlat ilişkili yuvalarının takviye ve taliye seçimi

			Metal	Su	Ağaç	Ateş	Ateş	Toprak
		Ana Hat	Dalak	Akciğer	Böbrek	Karaciğ e	Karaciğ e	Kalp
		Ana Yuva	DI-3	Ac-8	Br-10	Kc-1	Kc-1	Kp-8
O hattın		Evlat Hat	Böbre k	Karaciğ e	Kalp	Dalak	Dalak	Akciğ e
Ana- Evlat	Zan g	Evlat Yuva	Br-10	Br-1	Kc-2	DI-3	DI-3	Ac-8
yuval arı								
		Ana Hat	Mide	Kalınbağır sak	Mesane	Safrakes esi	Safrakes esi	İncebağır sak
	Fu	Ana Yuva	Md- 36	Kb-1	Ms-66	Sk-41	Sk-41	İb-5
		Evlat Hat	Mesa ne	Safrakes esi	İncebağır sak	Mide	Mide	Kalınbağır sak
		EvlatYu va	Ms-66	Sk-41	İb-5	Md-36	Md-36	Kb-1

Örneğin; Çin felsefesine göre; akciğer metal nitelikli, böbrek ise su nitelikli organdır. Metalden su doğduğu için böbrek akciğerin evladı; akciğer ise böbreğin anasıdır. İşte bu *Ana – Evlat* ilişkisidir. (86)

Gece Yarısı Öğlen Doluş (GYÖD) yani Sap-Dal akupunktur yöntemine göre zaman koşulu altında uygulanması gereken diz ve dirsek altı kısımlardaki beş nakil yuvaları da beş madde niteliği taşımaktadır. Yuvaların seçimi işte bu beş madde arasındaki birbirini doğma ve doğurma olayına göre *Taşkın* belirtilerde evlat yuvaya *Tahliye*, Yoksun belirtilerde ise ana yuvaya *Takviye* uygulanır. (87).

Örneğin. Akciğer Hattı (meridyeni), *Xin - 辛 (S8)* günü nöbet tutan, *Yin - 寅 (D3 vakti yani saat 3 – 5 arası)* dolum yapan metal nitelikli eksi hattıdır. (88)

Nefes darlığı, nabız zayıflığı, üşüme gibi Akciğer Yoksunluk'larında (yani kuvvetin eksikliğinden oluşan belirtilerde (*Xu Zheng - 虚证 - Deficiency*), *Mao - 卯 (D4)* vakti yani saat 5 – 7 arası), bu hattın toprak nitelikli *Dolum Yuvası Taiyuan (Ac-9)*'a *Takviye* yapılır. Çünkü



Taiyuan (Ac-9) topraktan metali doğuran Ana yuvadır. (89)

Göğüs ağrısı, öksürük, gibi Akciğer Taşkınlık'larında (yani illetin fazlalığından oluşan belirtilerde (*Shi Zheng – 实证 - Excess*), Yin- 寅(D3) vakti yani saat 3 - 5 arası) bu hattın su nitelikli *Yiğın Yuvası Chize (Ac-5)*'ye Tahliye yapılır. Çünkü *Chize (Ac-5)* metalden su olarak doğan *Evlat yuvadır. (90)*

(Diğer hat-ağların "Ana" ve "Evlat" yuvalarına uygulanacak *Takviye* ve *Tahliye* ellemeleri ve vakitleri için Pratik Bilgisayarlı Akupunktur adlı eserin 72s. – 75s. Sayfalarına bakınız.) (91)

Ağ Yuva 络穴 [luò xué] Connection Point

Türkçe kaynaklarda "Luo noktası", "Luo – Pasaj noktası", "Pasaj noktası", "Geçiş noktası", "Birleştirici noktalar", "Bağlantı noktaları", "Luo – connecting noktalar", "Connecting noktalar", "Alakalandırıcı nokta", "Lo geçiş nokta" olarak değişik isimlerle adlandırılan bu yuva, **Ağ Damar'a yani (络脉 - Luomai)'e ait yuvalardır, daha doğrusu iç ve dış hatları yani eksi ve artı hatları birbirine bağlayan yuvalardır.** (96) Dolayısıyla bu yuvaları "Ağ Yuva" olarak adlandırmak ifade kolaylığı açısından da çok isabetli olacaktır.

Eldeki Ağ Yuvalar

Eksi Hatlar (iç)	Ağ Yuva	Artı Hatlar (dış)	Ağ Yuva
Eldeki (- - -) Akciğer	Ac-7	Eldeki (+ + +) K.bağırsak	Kb-6
Eldeki (- -) Kalp	Kp-5	Eldeki (+ +) İ.bağırsak	İb-7
Eldeki (-) Kalpzarı	Kz-6	Eldeki (+) Üç odak	Üo-5

Ayaktaki Ağ Yuvalar

Eksi Hatlar (iç)	Ağ Yuva	Artı Hatlar (dış)	Ağ Yuva
Ayaktaki (- - -) Dalak	DI-4	Ayaktaki (+ + +) Mide	Md-40
Ayaktaki (- -) Böbrek	Br-4	Ayaktaki (+ +) Mesane	Ms-58
Ayaktaki (-) Karaciğer	Kc-5	Ayaktaki (+) Safrakesesi	Sk-37

Vali Damar, Bakan Damar ve Dalak Ağının Ağ Yuvaları

Bölgeler	Ağlar	Yuvalar	Dağılımı
Vücudun önü	Bakan Damar Ağı	Bd-15	Ayaktaki (+ + +) Mide
Vücudun arkası	Vali Damar Ağı	Vd-1	Ayaktaki (+) Safrakesesi
Vücudun yanı	Dalak Ağı	DI-21	Ayaktaki (+ +) Mesane

Ağ Yuvalar, ait olduğu ağ damarın yoksun ve taşkın sendromlarının tedavisinde kullanılır.



Ayrıca, aynı nitelik taşıyan hatlar arasında Asıl – Ağ bağlantısı kurarak nokta ayarlamasına dayanak sağlar.

Delik Yuva 鄰穴 [xì xué] Cleft Point

Türkçe kaynaklarda “Akut nokta”, “Xi noktası”, “Sınır noktaları”, “Cleft (Xi) points”, “Akümülatör noktaları”, “Birikme noktaları”, “Ağrı kesici nokta” olarak değişik isimlerle adlandırılan bu yuva, **Hat-ağlardaki canın saklandığı derin boşluklardır.** (97)

On Altı Delik Yuva

	Eldeki (- - -)	Eldeki (-)	Eldeki (- -)		
Eldeki Üç eksi	Ac-6	Kz-4	Kp-6		
	Eldeki (+ + +)	Eldeki (+)	Eldeki (+ + +)	Zıp Damar	Ayar Damar
Eldeki Üç Artı	Kb-7	Üo-7	İb-6		
	Ayaktaki (+ + +)	Ayaktaki (+)	Ayaktaki (+ +)	Artı Zıp	Artı Ayar
Ayaktaki Üç Artı	Md-34	Sk-36	Ms-64	Ms-59	Sk-35
	Ayaktaki (- - -)	Ayaktaki (-)	Ayaktaki (- -)	Eksi Zıp	Eksi Ayar
Ayaktaki Üç Eksi	DI-8	Kc-6	Br-4	Br-8	Br-9

Delik yuvalar, akut hastalıklar tedavisinde kullanılır. Bu yuva aynı zamanda bastırma tanısının önemli yuvası.

Sekiz (Damarın) Kavşak Yuvası 八脉交会穴 [bā mài jiāo huì xué] Confluence point of eight extraordinary meridians / channels

Türkçe kaynaklarda “Kavşak nokta”, “Ayar noktaları”, “Kardinal nokta” “Çok yönlü Kanalların Buluşma Noktaları” olarak bilinen bu yuva, **el – ayakları (alt – üst extremitleri) Sekiz Gayri Damar’a bağlayan sekiz yuvadır.** (99)

Bu sekiz yuva, *Renmai* (Bakann damar), *Dumai* (Vali damar), *Chongmai* (Atak damar), *Daimai* (Kemer damar), *Yinweimai* (Eksi ayar damar), *Yangweimai* (Artı ayar damar), *Yinqiaomai* (Eksi zıp damar), *Yangqiaomai* (Artı zıp damar) gibi sekiz gayri damarın 12 ana hatla kesiştiği yerdir.

Göğüs, karın ağrıları ve gerilmelerinde, *Gongsun* (DI-4), *Neiguan* (Yp-6) yuvaları seçilir. Çünkü *Neiguan* (Yp-6) Eksi ayar damara; *Gongsun* (DI-4) ise Atak damara açılır. Bu iki özel hat-ağ, göğüs ve midede birleşir. (Tablo 9. 1)

Tablo Sekiz Kavşak Yuva ve Sekiz Damarın kesişmesi

Yuva	Ait olduğu hat	Kesiştiği damarlar	İlişkileri	Tedavi alanları
DI-4 Kz-6	Dalak Kalp zarı	Atak Damar Eksi Ayar	Atalık Analık	Kalp, göğüs, mide



		Damar		
İb-3 Ms-62	İnce bağırsak Mesane	Vali damar Artı Zıp Damar	Kocalık Karılık	Gözün iç köşesi, boyun, ense, kulak, dirsek, ince bağırsak
Üo-5 Sk-41	Üç odak Safra kesesi	Artı Ayar Damar Kemer Damar	Kadınlık Erkeklik	Gözün dış köşesi, kulak arkası, boyun, omuz
Br-6 Ac-7	Böbrek Akciğer	Eksi Zıp Damar Bakan Damar	Özne Nesne	Boğaz, gırtlak, göğüs, diyafram

Çin kaynaklarına göre, “Jiao Hui Xue” yani “Kavşak Yuva” lar iki çeşittir. Biri yukarıda bahsedilen “Sekiz Damarın Kavşak Yuvası” yani dır, öbürü ise belli hat-ağ’a ait bir yuvanın başka birkaç hatla kesiştiği “Jiao Hui Xu - 交会穴” yani “Kavşak Yuva” lardır. (100) Bunlar birbirinden farklı kavramlardır. (Jiao Hui Xu - 交会穴” ye bakınız) .

Sekiz Buluşma Yuva 八会穴 [bā huì xué]

Türkçe kaynaklara da “Usta nokta”, “Meeting (master) nokta”, “Etkinin noktaları”, olarak bilinen bu yuva, **Zang (Eksi-organ), Fu (Artı-organ), Qi (Can), Xue (Kan), Jin (Kas), Mai (Damar), Gu (Kemik) ve Sui (İlik)** ‘den ibaret bu 8 dalla ilgili hastalıkların buluştuğu yuvalardır. (112)

Sekiz Çeşit Hastalığın Buluşma Yuvası:

Hastalıklar	Yuvalar
Zang (Eksi organ) hastalıkları	Kc-13
Fu (Artı organ) hastalıkları	BD-12
Can hastalıkları	BD-17
Kan hastalıklarını	Ms-17
Kiriş ve kas hastalıkları	Sk-34
Damar hastalıklarının	Ac-9
Kemik hastalıklarının	Ms-11
İlik hastalıkları	Sk-39

İzin Yuva 俞穴 [shū xué] Back transport point (俞穴 [yú xué] olarak da telaffuz edilir.)



Türkçe kaynaklarda “Muvaffakat noktası”, “Onay nokta”, “Assosiasyon noktaları”, “Back shu noktası”, “Sirt su noktası”, “Refakat noktaları”, “Asosiye noktası”, “Şefkat noktası” olarak değişik isimlerle adlandırılan bu yuva, **Zang ve Fu organlardaki “can”ın vücudun sırt bölgesinde daha doğrusu mesane hattı üzerinde toplandığı özel yuvalardır .(108)**

Eksi ve Artı Organların 12 İzin Yuvası

Organlar	İzin Yuvalar	Organlar	İzin Yuvalar	
Akciğer	Ms-13	Mide	Ms-21	
Kalp zarı	Ms-14	Üç odak	Ms-22	
Kalp	Ms-15	Böbrek	Ms-23	
Karaciğer	Ms-18	Kalın bağırsak	Ms-25	
Safra kesesi	Ms-19	İnce bağırsak	Ms-27	
Dalak	Ms-20	Mesane	Ms-28	

İzin Yuvalar, iç organ hastalıklarının tanı –tedavisinde kullanılan önemli yuvalardır.

Bağış Yuva 募穴 [mù xué] Alarm point

Türkçe kaynaklarda “Alarm noktası”, “Front Mu noktası”, “Mu noktası”, “Heyecan Noktası” olarak bilinen bu yuva, **Zang ve Fu organlardaki “can”ın göğüs ve karın bölgelerinde toplandığı özel yuvalardır. (104)** Daha doğrusu Zang ve Fu organların “can bağışı” yapıldığı özel yerlerdir.

Eksi ve Artı Organların 12 Bağış Yuvası

İki yanda		Ortada	
Organlar	Bağış Yuvalar	Bağış Yuvalar	Organlar
Akciğer	Ac-1	BD-17	Kalp Zarı
Karaciğer	Kc-14	BD-14	Kalp
Safra kesesi	Sk-24	BD-12	Mide
Dalak	Kc-13	BD-5	Üç odak
Böbrek	Sk-25	BD-4	İnce bağırsak
Kalın bağırsak	Md-25	BD-3	Mesane

Bağış Yuvalar da İzin yuvalar gibi, iç organ hastalıklarının tanı–tedavisinde kullanılan önemli yuvalardır.

Kavşak Yuva 交会穴 [jiāo huì xué] Crossing point

Türkçe kaynaklarda “Açar nokta”, “Anahtar nokta”, “Kardinal nokta” olarak bilinen bu yuva, **belli hat ağ’a ait bir yuvanın başka birkaç hatla kesiştiği yuvalardır. (102)**

Örneğin: Zhong Ji (BD-3) ve Guan Yuan (BD-4) ler Bakan Damar’a (Ren Mai) ait yuvalardır, aynı zamanda Bakan Damar ile ayakta üç eksi hattın kesiştiği Kavşak Yuva’dır. (103)

Öz Yuva (Ben Xue 本穴 Same Point)



Günün nöbetçi hattına ait organın 5 madde niteliği ile 5 Nakil yuvasının 5 madde niteliği arasında uyum sağlayan yuvadır.

Öz Yuvalar

12 Hat	Karaci ğer	Kalp	Kalpza rı	Dala k	Akciğ er	Böbr ek	K. bağırsa k	Mesa ne	Safrakesesi Üçodak	i. bağırsak Mide	
5 Madd e	Ağaç	Ateş	Ateş	Toprak	Meta l	Su	Metal	Su	Ağaç Ateş	Ateş Toprak	
5 Nakil	Kuyu	Arık	Arık	Der e	Çay	Irma k	Kuyu	Arık	Dere Irmak	Çay	Çay
Öz Yuva	Kc-1	Kp-8	Kz-8	DI-3	Ac-8	Br-10	Kb-1	Ms-66	Sk-41 6 Md-36	İB-5	Üo-

Tepki Noktaları

İnsan vücudunun Yin-Yang ve Can-Kan dengesi bozulduğunda, vücudun dış yüzeyinde tepki noktaları ortaya çıkar ve bastırıldığında belirgin ağrı hissi oluşur. Bu tepki noktaları tedavi noktaları olarak da seçilebilir. Bu noktalar hastalığın yerel bölgesinde veya çevresinde gözlemlenebilir. Hatta biraz uzaklarda da çıkabilir. Belli düzenle dolaşabilir. Örneğin: Mide ağrısı ve ishallerde çoğunlukla Md-34 (Liangqiu 梁丘 ST34) yuvasına dokunduğunda ağrı tepkisi verir. Safra sancılarında, Sk-34 (Yanglingquan 阳陵泉 GB34) ve Safra kesesi yuvasında (hat dışı yuva) ağrı tepkisi verir. Genelde tepki noktaları çok etkilidir.



Yuva (Nokta) Seçme Kuralı

Yuva (Nokta) seçme kuralı, yuva seçim sırasında uyulması gereken temel kuraldır.

Yakın Seçim

Yakın Seçim, hastalığın yerel bölgesinden veya o bölgeye nispeten yakın daire içinden yuva seçmektir. Örneğin: Başın tepesi ağrılarında Vd-20 (Baihui 百会 GV20); Burun hastalıklarında Kb-20 (Yingxiang 迎香 LI20), Md-3 (Jujiao 巨髎 ST3), Vd-23 (Shangxing 上星 GV23); Ms-7 (Tongtian 通天 BL7); Mide ağrısında Bd-12 (Zhongwan 中脘 CV12); Yüz



felçlerinde Md-6 (Jiache 颊车 ST6), Md-4 (Dicang 地仓 ST4), lb-18 (Quanjiao 颧髎 SI18), Sk-20 (Fengchi 风池 GB20).

Uzak Seçim

Uzak Seçim, hastalık bölgesindeki hat veya ilgili hat üzerinde, hastalık yerine nispeten uzak mesafeden yuva seçmektir.

Örneğin: Mide ağrısında Md-36 (ST36); Üst diş ağrılarında Md-44 (ST44); Alt diş ağrısında Kb-4 (LI4); Başın arkası ağrılarında lb-3 (SI3) ve Ms-62 (BL62) .

Uzak seçimin çapraz seçim, ilgili seçim olarak ayrıca uygulamaları da vardır.

Çapraz Seçim: Hastalık sağ tarafta oluşmuşsa solda seçmek veya tersine solda ise sağda seçmektir. Örneğin: Sol taraf migrene sağ taraf Üo-5 (TE5);

İlgili Seçim: Esas itibarıyla el ve ayaklardaki alt-üst simetrik özelliğine göre hastalık yeriyle ilgili yuvaları seçmektir. Örneğin: El parmakları ile ayak parmakları, el bileği ile ayak bileği, dirsek eklemi ile diz eklemi, omuz eklemi ile kalça eklemi gibi. Veya bir diğer örnekte, ayak bileğinde burkulma olduğunda bilek bölgesindeki ilgili yuvalar seçilebilir.

Tanımlı Seçim

Hastalık özelliğine göre, hastalık nedeni ve tanısı üzerinde yorum yaparak yuva seçmektir.

- Ateşlenme, aşırı terleme, gece terleme, halsizlik, katılma (konvülsiyon), baygınlık gibi belirtiler sergilenen vakalarda, tanımlı seçim uygulanmalı. Örneğin: Böbreğin eksi (Yin) yoksunluğundan oluşan yoksun-sıcak sendromlarda Ms-23 (BL23), Br-3 (KI3); Karaciğerin artı (yang) niteliğinin alevlenmesinden oluşan konvülsiyonlarda Kc-3 (LR-3), Kc-2 (LR2) yuvaları seçilir.
- Hastalık yeri belirlenen hastalıklarda tanımlı seçim, hastalığın köküne göre tedavi etme kuralının uygulanması olabilir. Örneğin: Diş ağrıları hastalık nedenine göre, rüzgar ateşinden, mide ateşinden kaynaklanmış olabilir. Rüzgar ateşinden olanlara Sk-20 (GB20); Üo-5 (TE5) yuvaları; Mide ateşinden olanlara ise Md-44 (ST44), Kb-2 (LI2) yuvaları; Böbrek yoksunluğundan oluşan diş ağrılarında ise Br-3 (KI3), Kc-2 (LR2) yuvaları seçilir.

Belirtili (Semptomatik) Seçim

Semptomatik seçim, hastalığın özel belirtilerine göre yuva seçmektir. Bu yöntemi, yuvaların (noktaların) özel etkisi ve klinik deneylerin akupunktur reçetesindeki somut uygulaması olarak değerlendirmek mümkündür. Örneğin: Ceninin yanlış konumlanması (Malposition of fetus) Ms-67 (BL67), rahim kanamasında (metrorrhagia and metrostaxis) DI-1 (SP1) ;

Bazen, hat dışı yuvalar bazı hastalıklarda özel etki sergiler. Örneğin: Dingchuan 定喘 yuvası astıma karşı çok etkilidir. Bel ağrılarında hassas noktalar; boyun tutulmalarında wailaogong (外劳宫) gibi.

NOT: Hat dışı yuva *Dingchuan* (定喘, 7. Boyun omurga çıkıntısından iki yana 0.5 – 1 Cun



mesafede), Kz-6 (Neiguan), BD-17 (Tanzhong) ile birlikte uygulandığında bronşit ve astıma karşı daha etkilidir.

Yuva Ayarlama Yöntemi

Yuva Ayarlama Yöntemi, yuva seçme kuralı temelinde, değişik hastalıkların tedavi ihtiyacına göre, koordinasyonu rolüne sahip ikiden fazla yuvayı ekleyerek gerçekleşen ayarlama yöntemidir.

Hat'a (meridyene) göre ayarlama Öz hatta göre ayarlama

Belli bir organ ve hat damarda hastalık oluştuğunda, işbu organ veya hat damara ait yuvaları seçerek reçete hazırlamaktır. Örneğin: Safrakesesi hattının artı (Yang) alevlenmesinden kaynaklanan baş ağrılarında, yakın seçim olarak *Sk-8 (Shuaigu GB8)*, *Sk-20 (Fengchi GB20)* yuvaları; uzak seçim olarak safrakesesi hattının arık yuvası *Sk-43 (Jiaxi GB43)* seçilir. Mide ateşinin yükselmesinden kaynaklanan diş ağrılarında, yakın seçim olarak mide hattının Md-6 (Jiache ST6); uzak seçim olarak Mide hattının arık yuvası Md-44 (Neiting ST44) yuvası seçilir.

Dış ve iç hatta göre ayarlama

Belli bir organ ve hat damarda hastalık oluştuğunda, işbu hatta ve onunla iç-dış bağlantısı olan hatta ait yuvaları seçerek reçete hazırlamaktır. Örneğin: Rüzgar ve sıcak illetlerinin akciğeri istila etmesinden kaynaklanan nezle ve öksürüklerde, akciğer hattının Ac-5 (Chize LU5) yuvası ve kalınbağırsak hattının Kb-11 (Quchi LI11), Kb-4 (Hegu LI4) yuvaları seçilir. İşte bu aynı nitelik taşıyan iç-dış hatlar arasında Asıl yuva ile Ağ yuvayı ayarlayarak reçete hazırlamaktır.

İsimdaş hatta göre ayarlama

El ve ayaklardaki isimdaş hatları (Can'ın kutuplaşma derecesine göre aynı niteliğe sahip olan hatları) birbirine ayarlayarak reçete hazırlamaktır. Bu Yöntem "Aynı canlar geçinir 同气相通" teorisine göre uygulanır. Örneğin: En Artı (Yangming) hatlardaki dengesizlikten kaynaklanan baş ağrılarında, eldeki En artı can taşıyan kalın bağırsak hattının Kb-4 (Hegu LI4) yuvası ile ayaktaki En Artı can taşıyan Mide hattının Md-44 (Neiting ST44) yuvası seçilir. Boyun tutulmalarında eldeki Çok Artı (Taiyang) can taşıyan ince bağırsak hattının İb-3 (Houxi SI3) yuvası ile ayaktaki Çok Artı (Taiyang) can taşıyan mesane hattının Ms-60 (Kunlun BL60) yuvası seçilir.

Bölgeye göre yuva ayarlama

a. Üst- alt ayarlama

Bel bölgesinin üst kısmı veya kol (üst ekstermiteler) yuvaları ile bel bölgesinin alt kısmı veya bacak (alt ekstermiteler) yuvalarını beraber kullanarak reçete hazırlamaktır.



Örneği: mide ağrılarında, Üstten Kz-6 (Neiguan PC6), alttan Md-36 (Zusanli ST36) yuvası; Rahim sarkmalarında üstten Vd-20 (Baihui GV20) yuvası, alttan DI-6 (Sanyinjiao SP6); Böbrek eksi yoksunluklarından kaynaklanan boğaz, gırtlak şişmeleri ve ağrılarında üstten Kb-11 (Quchi LI11) veya Ac-10 (Yuji LU10) yuvası, alttan Br-3 (Taixi KI3) veya Br-6 (Zhaohai KI6) yuvası; Sekiz damarın kavşak yuvalarının ayarlanması işte bu yöneme aittir.

b. Ön-arka ayarlama

Vücutun ön kısmı ve arka kısmına ait yuvaları ayarlayarak reçete hazırlamaktır. Esas itibarıyla göğüs, karın bölgeleri ile sırt, bel bölgelerindeki yuvalar arasında yapılır. Genelde organ hastalıklarında kullanılır.

Örneği: Mesane hastalıklarında, önden Md-28 (Shuidao ST28) veya Bd-3 (Zhongji CV3) yuvalar; arkadan Ms-28 (Pangguangshu BL28) veya Ms-54 (chibian BL54) yuvaları; Akciğer hastalıklarında önden Bd-20 (Huagai CV20) Ac-1 (Zhongfu LU1), arkadan Ms-13 (Feishu BL13) yuvası seçilir. İzin ve Bağış yuvalarının ayarlanması işte bu yöneme aittir.

c. Sağ-sol ayarlama

Vücutun sağ ve sol tarafındaki yuvaları ayarlayarak yuvalar arasındaki sinerjik (görevdaşlık) etkisini pekiştiren yöntemdir.

Örneği: Sol taraf migrende, soldan Taiyang, Md-8 (Touwei ST8) ve sağ taraftan Üo-5 (Waiguan TE5) , Sk-41 (Zulinqi GB41) yuvalar; Sol taraf yüz felcinde soldan Taiyang, Md-6 (Jiache ST6), Md-4 (Dicang ST4) yuvalar ve sağdan Kb-4 (Hegu LI4) yuvası seçilir.

d. Uzak-yakın ayarlama

Hastalığın yerel bölgesi ile uzak bölgelerindeki yuvaları ayarlayarak gerçekleşen yöntemdir.

Örneği: Göz hastalıklarında, Ms-1 (Qingming BL1), Kb-4 (Hegu LI4), Sk-37 (Guangming GB37) yuvalar; Mide hastalıklarında Bd-12 (Zhongwan CV12), Kz-6 (Neiguan PC6), Md-36 (Zusanli ST36) yuvaları seçilir.



Evidence Based Guidelines : good or bad thing for Acupuncture ?

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Evidence Based Guidelines : good or bad thing for Acupuncture ?

Evidence Based Medicine uses a hierarchy of scientific evidences that now ranks first Evidence Based Guidelines. This requires having the best and most recent scientific evidence available to provide a correct critical analysis. In the field of acupuncture, this is not always easy. Based on the example of French recommendations on the management of low back pain, the author studies the need for good quality bibliographic references and the involvement of acupuncturists and their representative societies as stakeholders in the development of Evidence Based Guidelines.

As OARS did with 2014 guidelines for the non-surgical management of knee osteoarthritis or NICE with 2016 guideline for low back pain, the French National Authority for Health (HAS) published an Evidenced Based Guideline for management of patients with a Low Back Pain and concluded that : *Acupuncture, acupressure and dry needling have not been shown to be effective in the progression of low back pain*. The French College of Acupuncture doesn't agree with this conclusion :

Concerning the constitution of the expert panel.

Concerning the exhaustiveness of the data and their interpretation :

- The recommendation is not only based on scientific evidence
- The assessment of acupuncture is unfair

The development of evidence-based guidelines should be encouraged but also should respect the equality of evaluation between each evaluated therapies. It's our role to both provide good quality references and be present in the expert panel.

Keywords: Acupuncture;EBM;Evidenced Based Guideline



ACUPUNCTURE AND STRESS

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Introduction

Some randomized trials demonstrate a significant positive impact on treatment of stress-related symptoms and perceived stress. Complex social changes seem to be the cause of increased stress-related diseases but the lack of clarity about the definition of stress makes it complex to investigate. The basis of stress in Chinese Medicine is commonly rooted in the liver energy imbalance, often liver qi stagnation. Individuals can experience a wide variety of symptoms ranging from digestive disorders, such as irritable bowel syndrome and chest distension, to atrial fibrillation, immunosenescence and menstrual disharmonies. Emotional challenges including depression, anger, general agitation are frequent.

Objective

Our report aims to summarize the state of the art of the scientific literature about this topic and expose our practical experience on a large scale of patients with acupuncture treatment according to traditional Chinese medicine and modern microsystems. Victims of abuse or violence are a sub-population of clinical interest in stress and coping research due to severity of symptoms and social consequences of the problem.

Aim of the study is to verify the physical and psychological efficacy of acupuncture in combination with psychological support therapy in patients undergoing maltreatment or abuse at any age who present secondary symptoms of stress or post traumatic stress disorder (PTSD).

Method

The study is a prospective non-randomized experimental study on 36 consecutive volunteer-enrolled patients. Clinical and anamnestic data were collected at the beginning of treatment and at the end of the 10 sessions according to a standard protocol.

Results

Treatment resulted in a substantial clinical improvement in all investigated symptoms with a good percentage of complete regression (headache:60%, gastrointestinal symptoms:40%, sleep disorders: 22%, dysmenorrhoea:44%). Self-evaluation data related to well-being, osteomuscular pain and emotional parameters are shown in Table1.

Conclusion

Acupuncture has proven to be highly effective in treatment of victims of abuse and violence and in stress related symptoms.

Keywords: Acupuncture;stress;abuse;well-being



“Complementary Acupuncture Points” treatment of insomnia: simple , convenient and effective

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Abstract

To aim at the key problem that acupoints selection and combinations are too difficult, and the body surface distribution of the meridians is too complex, and acupoints are too more . “ The complementary acupoints ” theory and acupuncture method is put forward scientifically by Zhixin Yang, Ph.D , Professor.

Keywords: acupuncture points; mutual enhancing effects of yin and yang ;insomnia



Effectiveness of Acupuncture for Trigeminal Neuralgia

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Objective: To assess the effectiveness of acupuncture in the treatment of trigeminal neuralgia

Material: Disposable needles (40mm length, 0.30mm diameter)

Method: Trigeminal neuralgia is characterized by severe episodes of pain caused by the inflammation and/or compression of the three branches of the trigeminal nerve and/or the Gasser's ganglion. The most commonly administered drugs are often only partially effective and are accompanied by side effects. Based on the fundamental assumption of acupuncture theory that pain represents a block and/or a deceleration of the energy flow, we hypothesized that pain attacks may be relieved and/or overcome by facilitating and stimulating the energy circulation of the affected meridians. We selected a sample of 85 subjects, 78 women and 7 men aged 48 - 65 with no additional conditions. They were treated with 30-minute acupuncture sessions once a week. The needles were superficially placed in situ without any manipulation. Therapy sessions were gradually less frequent as symptoms improved, up until their complete disappearance or stabilization of the clinical overview. Meanwhile, the intake of medication was gradually reduced. The points used were B2, GB1, Th23, St3, St5, St6, St7, B60, B63, GB34, GB38, St36 and St44.

Results: 68 subjects (80%) showed no more pain attacks after 5 sessions. clinical overview was resolved for 10 more subjects after 10 sessions. The remaining 7, 3 had no response to the treatment while 4 exhibited a residual mild paraesthesia in the areas previously involved in the pain attacks. The subjects were monitored for 12 months after the end of the treatment and showed no relapses or deterioration of the clinical overview. Complete medication weaning occurred for 65 subjects.

Conclusion: The limited size of the sample does not permit us to make scientific affirmations, however the data suggests that acupuncture is an effective, tool for the treatment of trigeminal neuralgia.

Keywords: trigeminal neuralgia;pain;;acupuncture;medication weaning



Acupuncture and Migraine : its rightful place in Evidence Based Guidelines

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Evidence Based Medicine uses a hierarchy of scientific evidences that now ranks first Evidence Based Guidelines. This requires having the best and most recent scientific evidence available to provide a correct critical analysis.

Acupuncture is a good therapeutic and preventive option in the migraine and headache management. It must be known by any health professional and it's the aim of Evidence Based Guidelines.

Guidelines are not always up to date. We should work with authorities in order to participate to the elaboration of new recommandations.

Based on the example of French recommendations on the management of migraines, the author studies the need for good quality bibliographic references and the involvement of acupuncturists and their representative societies as stakeholders in the development of Evidence Based Guidelines.

The author is a member of the French steering committee and specifies the conditions that allow acupuncture to be taken into account at its fair value.

Keywords: migraines;acupuncture;guidelines;health authorities



THE EFFECTS OF ACUPUNCTURE ON SOCIAL LIVING IN MIGRAINE

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Pain Clinic, University Clinical Centre of Ljubljana, Ljubljana, Slovenia
Health Centre Terme Ptuj, Ptuj, Slovenia
General Hospital, Slovenj Gradec, Slovenia

Objectives

The acupuncture provide interoceptive signal to trigeminalcervical system inducing change in interoceptive processing and consequently feelings related to pain and emotions. The equilibrium in social activities should be reestablished through its effects. According to the biopsychosocial model, we expected improvements in social functioning after acupuncture.

Method and subjects

We conducted survey in the 28 patients with migraine (6 men, 22 women; age $46,4 \pm 7,2$ years). Mostly we have used a battery of acupoints: St 2, St 6, St 8, St 15, GB 8, GB 14, Gb 20 and HN 5. The structured interview was centered to evaluate the daily living such as social activities, family life and work activity. We explored the subjective effectiveness of acupuncture. Also, the physical pain, sleep and mood were assessed after acupuncture. We detected the responses to acupuncture and analyzed the association between variables using Chi square test (SPSS).

Results

Acupuncture was effective in 23 pts. (85.2%). The satisfaction was achieved in 20 pts. (74.1%). Physical pain was ameliorated in 21 pts. (80.8%); mood improved in 20 pts. (74.1%) and sleep in 10. pts (40.0%). Before the acupuncture, disturbances in social life was reported in all studied patients. Improvement in functioning at the work was reported 15 pts. (75.0%), in social activities 17 pts. (65.4%) and in family life 17 pts. (70.8%). The medicine intake was reduced in 19 pts. (70.4%). We found an association between immediate effect of acupuncture and work functioning ($p=0.001$), improvement in family life ($p=0.004$) and social activities ($p=0.006$). We found an association between effect of acupuncture and improvement in physical pain ($p<0.001$) and in mood as well ($p=0.002$). We did not find the association between effect of acupuncture and sleep improvement ($p=0.094$).

Conclusions

We found that acupuncture in migraine patients has significant positive effect on social living through its effectiveness, improvement in physical pain and mood.



Complementary-Alternative Medicine (CAM)
In This Age

Is a Paradigm Shift Going to Happen in Health Providing Systems?

What Are the Effects of Evolution in Two Big Fields (Biotechnology & Information Technology)
on Health Providing Systems in Present Time & Future?

An Important Keyword in This Digital World Is
“Maximum Speed”

TCM & Other CAM Modalities Should Wear New Clothes!
“Speed” Is an Important Priority in This Field?

CAM Should:
Be Very Simple
Become Less Expensive
Give Fast Results
Have Permanent Efficacy
Require Less Follow-up
Notice All Client's Aspects

- Contemporary Society is Continuously Changing and Increasingly Complex
- Fast Changing of Social Life is a Reality
- Could CAM Adjust With New Changes of Social Life in This Age?
- CAM Users & CAM Non-Users
- What is the Health Belief Model (HBM)? Understanding Why People Use CAM?
- Are CAM Users Homogenous or Not?

Some Beliefs About CAM & Modern Medicine:

- CAM Can Quickly Cure Health Problems
- CAM Can Treat Incurable Diseases
- CAM Can Improve Health Level and Can Increase Resistance of Body Against Diseases
- Use of Conventional Medicine for Treating of Some Diseases is Unsatisfactory
- CAM is Cheaper than Conventional Methods of Treatment
- Cultural Tendencies

Which Factors Threat CAM in This Age!

Concomitant of Its Expansion in All Over the World, Both Correct & Wrong Informations
About Health & CAM Methods and Indications Holds in All People.

- The Number of CAM Experts is Very Low than People Who Need CAM Services.



- Most of Health Strategist & Planners Are Non-CAM Experts So They Can't Put CAM Policies in Right Position.
- Many CAM Experts Are One-Dimensional, They Don't Have the General Information & Indications And Capabilities of the CAM Branches Different to What They Practice
- The Number of Sessions Referring to Treatment in Some Branches of CAM Such as TCM is Too Much.
- The Time Needed to Achieve Response in Some CAM Methods Such as Acupuncture is So Late.

Effective Outcomes in Treatment Depends on

- Technical Skills
- Non-Technical Skills

Technical Skills:

Should Be Fast & Effective, Simple, Noninvasive, Less Expensive, Require Fewer Sessions of Treatments.

Non-Technical Skills:

- Therapeutic Relationship
- Rapport

Therapeutic Relationship:

- Paternalistic Model
- Shared Decision Making Model
- Consumeric Model

Paternalistic Model

Client Is Passive and Therapist is a Technical Expert.

This Model is Good for Clients That Have Low Self-Esteem, Low Socioeconomic Level with Accepted Sick Role

Shared Decision Making Model:

Sharing in Information and Choosing Treatment Plan Between Client and Therapist

This Method is Enterprise & Collaborating Shared Decision Making Model is Most Commonly Used in This Age.

Consumeric Model:

The Practitioner is the Service Provider Rather than the Expert!

The Client Chooses The Treatment Plan!

In This Age

Shared Decision Making Model is Suggested in Many Countries.

Therapeutic Relationship Can Promote and Inhibit Effective Therapeutic Outcomes



To Achieve a Good Therapeutic Relationship the Practitioner Should Know Rapport Techniques

A Good Rapport is:

The Ability to Demonstrate Warmth, Empathy, Openness, Genuineness and Non-Judgmental Nature.

Each Practitioner of Complementary & Alternative Medicine Should Be Familiar with Basics & Indications and Capabilities of Other Common CAM Methods.

Factors That Affect the Therapeutic Relationship

- Values Shift in Current Life
- Information Explodes and Cyber-Digital Space
- Increase in Rate of Chronic Illnesses and Disabilities & Agedness
- Health Care Costs Keep Rising

Some Useful Suggestions in Clinical Practice:

Because Most of the Difficult Chronic Diseases Such as MS, Asthma, Rheumatic Diseases, Cancer, ... Are Referring to CAM Clinics Every Day. So, All CAM Practitioners Should Consider the Following Rules in These Cases:

- If You Are an Expert for Threatening These Cases Tell This to All Patients in Your First Visit:
- It Could Be Very Difficult to Eradicate Your Disease and Complaint Completely But I Will Help You Gain More Control on Your Complaint and Diseases and The Quality of Your Life Will Become Better.

If You Are Not an Expert:

Don't Accept Treatment of These Patients and Refer Them to Your Expert Colleagues in This Field

- Notice on Underlying Personality, Emotions and Mentality of Your Clients and Treat Their Emotional Disharmonies If Needed
- Be Serious in Establishing an Effective Therapeutic Relationship with Good Rapport
- Educate All Your Clients to Correct Their Life Style
- Don't Forget Empathy with All Your Clients. You Can Not Help Your Clients Just By Your Technical Skills!



“Acupuncture for pregnant women, one example: dynamic dystocia’s”

Dr Denis COLIN

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Président exécutif de la journée mondiale de l’acupuncture à l’UNESCO

Ex-Président du Collège Français d’Acupuncture et de Médecine Chinoise

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Abstract :

“ Since the last third part of the 20th century until now, the medical profession found that the less medicine we give to the pregnant women, the less risks of injuries to the fetus we have. So that, naturally, acupuncture has found a growing and undisputed place among maternity practitioners.

This place concerns both the pathologies of the first and second trimester of pregnancy that the phases of childbirth and postpartum.

we chose to present the interest of acupuncture in the prevention of dynamic dystocia and their treatment during delivery to reduce more than 20% unscheduled caesareans.

About caesareans, they are almost the only delivery method in many countries, which does not take into account the negative effects of both the baby and the mother.

This place concerns both the pathologies of the first and second trimester of pregnancy that the phases of childbirth and postpartum.

We chose to present the interest of acupuncture in the prevention of dynamic dystocia and their treatment during delivery to reduce more than 20% unscheduled caesareans.

about caesareans, they are almost the only delivery method in many countries, which does not take into account the negative effects of both the baby and the mother.

Dynamic dystocia is the ability of the uterus to contract to allow the descent and birth of the baby.

Acupuncture recognizes two aspects to this pathology, dystocia with strong contractions painful but ineffective to allow the opening of the cervix and dystocia with contractions weak and without pain, all equally ineffective to open the cervix.

the presentation will show the preventive and curative treatments, with the points and method of puncture.

WFAS 2019

INTERNATIONAL CONSENSUS ON
ACUPUNCTURE AND COMPLEMENTARY MEDICINE

International Symposium on Acupuncture – Moxibustion

14 - 17 November, 2019 Kaya Palazzo Hotel, Belek - Antalya / Turkey



Key words : acupuncture, pregnancy, dynamic dystocia,



Chinese Medicine for male fertility issues (fighting “Spermageddon”)

Dr. Olivia Krammer-Pojer (AUT)

On average one out of 6 Austrian couples experience infertility, defined as one or two year of unsuccessful attempts of trying to conceive a baby. Due to this fact, the Austrian fertility institutes' popularity is increasing. Talking statistically, in every Austrian classroom there is at least one pupil that was fathered with the help of assisted reproduction. Looking at the reasons of unfulfilled parenthood, 40% are female issues and 40% are male issues.

Interestingly our society as well as our medicine focus quite exclusively on treating the female part of the childless couple. Thus the percentage of male issues for infertility-the so called male factor- is the same as the female one, treating the male partner is very underrepresented. Despite the fact that the seminal quality has declined within the last 30 years by 50%, it downgraded so dramatically that the WHO had to correct and adapt the standard value for the semen analyses in 2010 to make sure that one could get non-pathological semen analyses results at all. On top of that the male factor plays an important role in early pregnancy loss and should be treated in any case to prevent abortion. In this talk I'd like to stand up for a obligatory treatment of the male factor as well, whenever an infertile couple enters the Chinese Medicine office in future.



Enhancing Fertility in Men Through Acupuncture

J. TJANDRA¹

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Infertility in men is that if a couple of husband and wife who have been married for more than 1 year but have not got any children with no family planning and no abnormality from the woman side.

In 10% of couples that cannot have a child, 30% - 48% are caused from the men's side. According to modern medicine, the causes are: infection in urinary duct, endocrine abnormality, disruption in the development of the hormone gland, blockage in sperm duct, abnormality in sexual function, etc. According to Traditional Chinese Medicine, this problem is related to Kidney's Yang Xu, Kidney's Yin Xu, heat damp, stress, and so on. In clinical result, Xu is more apparent than Shi.

The therapies used for infertility in men are with acupuncture, moxibustion, electricity, and ear acupuncture.

With acupuncture, the therapy is classified into:

- a. Sperm is too little and thick
- b. Testicles are quite small and flabby or impotence/premature ejaculation
- c. Sperm is thin and too little

With moxibustion, the therapy is classified into:

- a. Infertility with symptoms: dizzy, tinnitus, seminal emission
- b. Infertility with symptoms of unstable Qi of Kidney

With electricity, the therapy is classified into:

- a. Infertility because of frigidity
- b. Infertility with the symptoms of feeling full in lower abdomen and frequent urination

Common acupuncture points chosen include Zhongji (CV 3), Guanyuanshu (BL 26), Shenshu (BL 23), Jinggong (1.5 cun beside Shenshu), Guanyuan (CV 4), and Zusanli (ST 36). The result obtained is satisfactory. From 39 cases, 35 cases (89.7%) were successful and 4 cases (10.3%) were failure.

Keywords: acupuncture;infertility;fertility;Traditional Chinese Medicine



Acupuncture experiences regarding oncology and leniterapy in Public Hospitals in Italy

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The report explains the state of acupuncture in oncology in Italian hospitals and it describes the studies case and the results obtained by our group in the Public Hospital of Integrated Medicine in Pitigliano and at the Hospital of Leniterapia in Grosseto.

800 patients sent us by Oncologists have been treated with the acupuncture and sometimes phytotherapy/homeopathy

Classic points of Traditional Medicine have been used to which points connected to many microsystems techniques

Side effects of chemotherapy and radiotherapy have been treated and at the same time we treated the ground of the cancer patient.

Classic points of Traditional Medicine have been used, to which points have been added linked to many microsystems techniques.

The side effects of chemotherapy and radiotherapy have been treated and at the same time we have been treated the cancer patient.

In this report are reported the different types of treatment with the results obtained, taking into account the constant application in patient comorbidities.

As for the end-of-life department, it will be described the network model, which includes support for the end-of-life patient, to the relative of the patient and the therapists in the department.

We will show the applications of the ancient Taoist formulas together with the innovative schemes that concern the TAO SHEN, LING points, this point are fundamental in adopting pre-established protocols and to the individual, who is always considered unique in its kind. Here too, we will discuss the classic points, together with the various techniques of microsystems.

Keywords: Acupuncture, Leniterapy, effect chemoterapy, microsystems;leniterapy;effect chemoterapy



Multinodular goiter treatment with acupuncture

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The presentation will focus on a case study of a 61 years old female patient who suffered from a non-toxic multinodular goiter. A goiter refers to an enlarged thyroid gland. Sometimes a person can have a goiter that has multiple nodules then called a multinodular goiter. Depending on the level of thyroid hormones it can be non-toxic or toxic in case of a high level of hormones. The patient was diagnosed while examining the thyroid by ultrasound the 25th of October 2017, resulting in a non-toxic multinodular goiter on a normal hormone level. After two months of treatment with ten acupuncture sessions twice a week her thyroid ultrasound was repeated. The result showed a reduction of the thyroid gland's size and of the multinodes to only two nodes. While analyzing the latest ultrasound results, the presentation will recapitulate the successful treatment process based on a combination of Nogier Acupuncture and Chinese Body Acupuncture.

Istanbul

August 13th, 2019



Kronik Pelvik Ağrı Sendromunda Geleneksel ve Tamamlayıcı Tıp Yöntemleri ile Tedavi Yaklaşımları

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Giriş ve Amaç: Amerikan Jinekoloji Derneği kronik pelvik ağrı sendromunu (KPAS), 6 aydan uzun süren, anatomik pelvis, karın ön duvarı, lumbosakral bölge veya pelvis tabanına yayılan, fonksiyonel yetersizliğe yol açan ve medikal tedavi gerektiren şiddetli ağrı olarak tanımlamaktadır. KPAS, ürolojik, jinekolojik, gastrointestinal ve kas-iskelet sisteminin somatik, viseral veya somatoviseral kaynaklı disfonksiyonudur. KPAS etiyolojisi hormonal disfonksiyon, toksik yüklenme, bozucu alan, tetik nokta, kronik enflamasyon başta olmak üzere multifaktöryeldir. Sunumun amacı KPAS olan hastalarda komplementer tıp (KT) yöntemlerinin etkinliğini göstermektir. (1,2, 3)

Yöntem ve Bulgu: KPAS olan vakalarda zaman bağlantılı derin anamnez sonrası, elektroakuvoll (EAV) yöntemi ve reviquant (RQ) ile sempatik parasempatik sistem ölçümlesinin ve besin-bağırsak analizinin ardından, vakalara özgü olmak üzere 5-10 seans akupunktur, nöralterapi ve beslenme ile mikrobiyota tedavisi yaptık. KPAS’da akupunktur, nöralterapi ve beslenme bağırsak aksı düzenlemesi yaptığımız hastaların pelvis ve yansıyan ağrılarında segmental olarak azalma, stres ve gerginlik durumunda hızla iyileşme, uyku kalitelerinde artış, dizüri ve disparoninin tamamen ortadan kalkması ve psikolojik düzelmeyi gözlemledik ve kontrol testler ile takip ettik.

Tartışma ve Sonuç: Konvansiyonel tedavilerin kanıtlanmış etkinliği olmadığı göz önüne alındığında, birçok hasta güvenlik, etkinlik ve yüksek uyum nedeniyle KT’a yönelmektedir. KPAS yaygın semptomları ile kişinin yaşam kalitesini son derece olumsuz etkilemektedir. Hastalığın tedavisi için “altın standart” yoktur. Bu sebeple uygun multimodal tedaviyi bulmak esastır. Yapmış olduğumuz çalışmalar KT yöntemlerinin KPAS’da semptomları iyileştirebileceğini göstermektedir. Daha fazla çalışmaya ihtiyaç vardır. (4, 5, 6)

Keywords: Akupunktur;Komplementer tıp;Pelvikodini;Kronik pelvis ağrı sendromu;Nöralterapi



Alternative Treatment in COPD Patients: Rectal ozone therapy

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Chronic obstructive pulmonary disease (COPD) is a chronic disease characterized by an irreversible, gradual limitation of airflow associated with an abnormal inflammatory response to harmful particles or gases. Treatment of these patients should be multidisciplinary, and alternative therapies may be added to standard therapies in the light of new etiopathogenic concepts. One of the alternative treatments is Ozonotherapy; ozone is a gaseous molecule consisting of three oxygen atoms. We used rectal treatment in our patient who presented with COPD exacerbation by taking advantage of ozone's anti-inflammatory and oxidant properties and we wanted to share the results.

MATERIAL METHOD

76 years old male patient. He was hospitalized with COPD exacerbation. At day 1.; day 4.; and day 7. of hospitalisation, rectal ozone gas was supplied from Turkozone blue S ozone generator device with respectively 10 gamma 100cc, 12 gamma 100cc and 15 gamma 100 cc doses. Daily minimum and maximum saturation values were followed. Mean Platelet Volume (MPV), Hemoglobin (Hb) and Platelet (plt) values were compared on day 1., day 4., day 7. and before discharge.

RESULTS

It was determined that oxygen saturation, Plt and Hb values increased and MPV values decreased in given days.

Keywords: Ozone therapy,;rectal ozone;copd



TİP II DİYABET VE OZONTERAPİNİN TEDAVİDEKİ ETKİNLİĞİ

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Özet:

Ozon oksijenin triatomik kararsız bir formudur. Oksijen-ozon terapisi neredeyse 40 yıldır kullanılmaktadır. Ozon terapisi tüm dünyada kullanılmakta olsa da, kanıta dayalı tıp olarak tüm ülkelerde henüz kabul edilmemiştir. Ozon, diyabetik hastalarda kronik oksidatif strese adaptasyonu kolaylaştırarak reaktif oksijen türleri tarafından oluşturulan hasara karşı koruyucu olabilir.

Metot:

Hastamıza Majör ve minör Ozonterapi uygulandı. Ozonterapi dozu 10 gamadan başlandı. 2 sefer uygulama sonrası verilen ozonterapi dozu 10 gama artırılarak modüle edici doz aralığı olan 40 gamaya ulaşıldığında bu dozdan devam edildi. Majör ozonterapi haftada 2 kez olmak üzere Minör ozonterapi her iki majör ozonterapi uygulaması sonrasında 1 sefer (her 2 majör ozonterapiye 1 minör ozonterapi) verildi.

Hastamıza daha önce bir sağlık merkezi tarafından Tip II DİYABET tanısı konulmuş. Aynı merkez tarafından hastamıza hem oral antidiyabetik hemde insülin başlanmış olup HbA1c si 14.2 olarak rapor edilmiştir.

Sonuç:

Hastamızın hem takipteki AKŞ lerinde bariz bir düşüş düzelme hemde HbA1c düzeylerinde bariz bir düşüş ve düzelme gözlemlendi. (5.4)

Keywords: ozonterapi;diyabet;endikasyon



BOYUN VE BEL AGRILARI TEDAVİSİNDE KAS İÇİ PARAVERTEBRAL OZON-OKSİJEN(O₃-O₂) ENJEKSİYONU

Doç Dr Demet Uçar

Ozon(O₃); üç oksijen atomundan oluşan kimyasal bir bileşik olup, iki atoma sahip atmosferik oksijenden (O₂) daha az stabildir ancak çok daha fazla enerji taşır.

Tıpta otoimmün hastalıklar, enfeksiyonlar, kanserler, vasküler hastalıklar ve diş hekimliği gibi alanlarda etkili bir şekilde kullanılan ozon; son yıllarda artan standardize bilimsel çalışmaların da desteğiyle kas iskelet sistemi hastalıklarındaki ağrı tedavisinde de sıkça kullanılmaya başlanmıştır.

Boyun ve bel bölgesinde disk herniasyonları, radiküler kök basıları, disk dejenerasyonları, faset artrozu, spinal stenoz, kas spazmları, ligaman yaralanmaları ve myofasiyal tetik noktalar kullanım alanlarını oluşturur.

Mekanik ve antiinflamatuvar özellikleriyle çift etkili olup; bir tür "KİMYASAL AKUPUNKTUR" olarak düşünülebilir. Mekanik etkisi; herniye disk materyalinin su retansiyonunu azaltmak süretiyle olur. Antiinflamatuvar etki ise proteoglikanların ve sulfat yan zincirlerinin negatif etkilerini nötralize etmesiyle gerçekleşir.

Paravertebral alana verilen ozon interstisyel sıvıda hızlıca absorbe edilir ve antioksidanlarla etkileşime girer. Ayrıca venöz staz ve iskelemyi düzenler, antinosiseptif analjezik mekanizmayı düzenleyerek refleks terapi ile ve anti-inflamatuar etkili fosfolipaz A₂'yi inhibe ederek ağrıyı giderir. Bu şekilde, steroidlerin etkilerine benzer bir etki yapar ancak steroidin bilinen yan etkileri yaşanmaz.

Uygulandığı doza da bağlı olmak üzere enjeksiyon sahasından yaklaşık 3 cm'lik bir alanı etkiler ve bu alanlarda immunsupresif sitokinleri artırır (IL-10 ve TGF beta). Literatürde yapılmış olan değişik çalışmalarda 15-27 Ug/ml dozda, 20-50 ml volumde haftada 2-3 kez / 2-8 hafta uygulamalar mevcuttur. Bu konularda henüz bir standardizasyon sağlanmamıştır.

Minimal invaziv teknikle paravertebral uygulanan bu yöntem intradiskal yöntem kadar etkili, güvenilir olup ayrıca anestezi ve özel bazı şartlar gerektirmez; daha ucuz, daha az ağrılı ve pratiktir. Üstelik intradiskal yöntemde karşılaşılabilecek ciddi adhezyonlar ve omurga yaralanması riski yoktur.

Lomber ağrılarda özellikle disk hernilerinde yapılmış uzun dönemli çalışmalar olmakla birlikte servikal bölgede uzun dönem için yeterli veri henüz yoktur. Literatürde tek bir vaka olarak servikal arterde gaz embolisi ve yine tek bir kardiyopulmoner arrest bildirilmiş olup, bu iki vaka dışında intramusküler O₃-O₂ uygulaması ile ek bir sorun yaşanmamıştır.



Biorezonans Nedir? Biorezonans ile Alerji Tedavisi

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Biorezonans , Kuantum fiziğinin temelini oluşturan prensiplere dayanır. Her madde, yapı taşı olan atomdan , Atomun çekirdeği de kuark ‘tan oluşmuştur.Atom ve içindeki parçacıklar saf enerjiden oluşur. Einstein, sadece atomun değil evrendeki her maddenin enerjiden oluştuğunu kanıtladı.

Her maddenin kendine has bir elektromanyetik ışıması mevcut. Dr.Jacques Benveniste yaşayan hücrelerde de bu elektromanyetik ışımayı tespit etti. Bu elektromanyetik ışımayı yayan biofotonlar ancak laboratuvar koşullarında ölçülebilen zayıf bir ışın yoğunluğu içindedir , ahenk içinde ışıkmaktadır , her hücreye has özellikte titreşimlerdir.

Bu titreşimler her doku ve organa göre değişmektedir. Hücreler bu titreşimlerle birbirleri ile iletişim halinde ve harmoni içindedir.Bu etkileşimin arasına bakteri, virüs, parazit, toksin, kimyasal madde gibi patojenler girerse titreşim halindeki frekansları ve harmoniyi bozar, adaptasyon mekanizmalarının bozulmasına , sonrasında hastalık oluşmasına sebep olur. Bu patojen frekansları rezonans fenomenine uygun üretilen cihaz veya cihazlar vasıtası ile faz kaydırarak veya aynı frekansların dalga boyunu güçlendirerek özel elektrotlarla vücuda geri verilmesi vücudun sağlıklı adaptasyon mekanizmalarının tekrar çalışmasını sağlar. Buna Biorezonans metodu denir.

Her biyokimyasal tepkimenin bir biyofiziksel sonucu ,her biyofiziksel olayın da biyokimyasal sonucu oluşur. Vücudun tüm regülasyon mekanizmaları birbirine bağlıdır. Bu nedenlerle, Biorezonans metodu tamamlayıcı bir tıp metodu olarak modern tıpla birlikte kullanılabilir.

Acil ve cerrahi müdahaleler haricinde, Biorezonans sağlıkla ilgili tüm konularda tamamlayıcı ve entegratif olarak kullanılabilen bir tedavi metodudur.

Toplumda yaşayan bireylerin %30 u alerji tabiattadır. Bu kişiler duyarlı oldukları bazı alerjenlere antikorlar aracılığı ile abartılı bir reaksiyon oluşturabilme yeteneğindedir. Bu tip antikorlara bağlı olarak bazen değişik hastalıklar ortaya çıkabilir. Ancak tek başına alerjik bünyeye sahip olmak, yani atopik olmak bir hastalık olmayıp alerjiye aday olma durumudur. Alerjik bünyeye sahip olmak tamamen ailesel geçişli bir durumdur. Dolayısıyla ‘Alerji’ çağın hastalığı olarak görülmektedir.

Biorezonans metodu yaklaşık 40 senedir uygulanmakta ve dünyanın 89 ülkesinde ve 5 kıtada başarıyla özellikle alerjik hastalıklarda kullanılmaktadır.

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Keywords: biorezonans ;alerji;titreşim tıbbı



Biorezonans ile Sigara bırakma tedavisi

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Sigara, gerek bizzat kullanan gerekse içmeyen ancak sigara içilen ortamda bulunma sonucu pasif olarak soluyan insanlarda çok önemli bir hastalanma ve ölüm nedenidir. Sigara ve tütün kullanımı dünyada önlenabilir ölüm nedenlerinden en önemlisidir. Her yıl dünyada yaklaşık 5 milyon insanın sigara ve tütün kullanımına bağlı hastalıklardan hayatını kaybettiği tahmin edilmektedir.

Sigara dumanında 4,000'den fazla kimyasal madde vardır. Bunlardan nikotin bağımlılık yapan ,psikoaktif bir ilaçtır. Noepinefrin ve beyin dopamin düzeylerini direkt olarak yükseltir. Stimulan ve öforik etki oluştururlar. El-göz koordinasyonunu artırır ve iştahı azaltır. Biorezonans , Kuantum fiziğinin temelini oluşturan prensiplere dayanır. Her madde, yapı taşı olan atomdan , Atomun çekirdeği de kuark 'tan oluşmuştur.Atom ve içindeki parçacıklar saf enerjiden oluşur. Einstein, sadece atomun değil evrendeki her maddenin enerjiden oluştuğunu kanıtladı.

Her maddenin kendine has bir elektromanyetik ışıması mevcut. Dr.Jacques Benveniste yaşayan hücrelerde de bu elektromanyetik ışımayı tespit etti. Bu elektromanyetik ışımayı yayan biofotonlar ancak laboratuvar koşullarında ölçülebilen zayıf bir ışın yoğunluğu içindedir , ahenk içinde ışıkmaktadır , her hücreye has özellikte titreşimlerdir.

Sigara bağımlılığında içilen sigaranın titreşimsel frekans kodu vücudumuzda kaydedilmektedir. Biorezonans metodunda ise ; sigaranın kaydedilen bu patojen frekansları rezonans fenomenine uygun üretilen cihaz veya cihazlar vasıtası ile 180 derece faz kaydırarak ve dalga boyunu güçlendirerek özel elektrotlarla vücuda geri verilerek nötrleştirilmesi sağlanır. Bu sayede vücudun sağlıklı adaptasyon mekanizmalarının tekrar çalışmasını sağlar.

Biorezonans metodunun sigara bırakmada etkinliği araştırılmıştır . Bu çalışmadan elde edilen bulgulara göre, biorezonans tedavisi sigarayı bırakmada herhangi bir yan etki göstermeden klinik olarak etkilidir.

Keywords: biorezonans;sigara bağımlılığı;titreşim tıbbı



MİKROBİOTA VE METABOLİK DENGİ

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Bu çalışmada Mikrobiyaya dengesinin bozulması sonucu oluşan disbiyozis ve neden olduğu hastalıkların etki mekanizması hakkında bilgilendirme amaçlanmıştır. Karaciğer, safra kesesi ve pankreas gibi yardımcı sindirim organlarımız sindirim hormonları ve enzimler ile sindirimi gerçekleştirmektedir. İnce bağırsaklarda besin emilimi sağlanmaktadır. Atık maddeler kalın bağırsak tarafından atılmaktadır. İnce bağırsağın emilim alanı olan villuslar ve mikrovilluslar 250-400 m² kadardır. Sindirime uğrayan besinler, mineraller, vitaminler ve su direkt olarak emilebilir. Suyun çoğu ince bağırsakta emilir (%92). Her gün 9 litre kadar su sindirim sistemine girer. Bu suyun %92'si ince bağırsakta, kalan %6-7'si kalın bağırsakta ağırlıklı olarak asendan kolon ve çekumda emilir. Gastro intestinal sistemdeki lenfoid doku vücuttaki immün hücrelerin %70'ini oluşturur. Kalın bağırsak bakteri popülasyonunun en yoğun olduğu yerdir. Feçes kuru ağırlığının %30'unu mikroorganizmalar oluşturur. Barsak disbiyozisini takiben gelişen barsak mukoza bariyerin hasarı sonucu, gıdalara karşı aşırı antikor üretimi ile seyreden reaksiyon zinciri oluşmaktadır. Aşırı geçirgen bir bağırsak oluşur. Süt ve süt ürünleri, yumurta, kabuklu deniz ürünleri, gluten, rafine karbonhidratlar, ağır metal içeren raf ömrü uzun olan gıdalar, kişiye özgü bazı sebze ve meyve alerjileri, civa içerikli amalgam dolgular, kuruyemişler, yemek pişirme şekline bağlı oluşan ağır metal zehirlenmeleri en sık gıda duyarlılığının tespit edildiği besin gruplarının başında gelmektedir. Mikrobiyaya çeşitliliğinin azalması ve geçirgen bağırsak sendromunun oluşması sonucu Diyabet, Obezite, Hipotiroidi, Fibromyalji, Romatizmal Hastalıklar gibi otoimmün hastalıklar, Otizm, Parkinson, multipl skleroz, Alzheimer, Kolorektal kanser ve diğer sindirim sistemi kanser türleri ve modern çağın birçok hastalığının oluşumunda önemli rol oynamaktadır. Bu sunumda mikrobiyaya ve Disbiyozis'e ilave olarak farklı bir beslenme protokolü olan Metabolik dengenin mikrobiota üzerine etkilerinden söz edilecektir.

Kilo verme döneminde dikkat edilmesi gereken Metabolik Denge kuralları nelerdir?

Kiloyu koruma döneminde neler yapmalıyız?

İnsanlar neden tekrar kilo alırlar?

Kilo verirken Vücutta detox yöntemleri nelerdir?

Bu soruların cevaplarını bu sunumda bulacaksınız.

Keywords: , Metabolik Denge;, detoks, ; disbiyozis; Mikrobiota



TOKSİK METAL ŞALASYONUNDA HACAMATIN (WET CUPPING) YERİ

Nezir Çelik¹

¹Muayenehane, GETAT YTGULAMALARI, Çankaya-Ankara, Türkiye

Bu sunumun amacı kuru ve yaş kupa mekanizmalarını teorik olarak anlatmak ve hangi hastalıklarda başarılı bir şekilde kullanıldığını sunmaktır. Lenfoid damarlar intersitisyel alanda, tam da kan damarlarının yanında bulunurlar. Lenfoid kapillerlerin başlangıcı kapalı olup duvarı endotelden oluşur. Lenfoid kapillerler kan kapillerlerinden geniştir. Uçları kapalıdır. Duvarlarında açılıp kapanan flamalar vardır. Kapiller alanda lenfoid sistem bozulmaya başladığında bu flamalar kapanır, hücreler arası alanda metabolik atıklar, toksinler ve ağır metaller birikmeye başlar. Bölgesel vakumlama yapılırken negatif basıncın etkisiyle hücreler arası alanda bulunan sıvılar cilt içinden birikmeye başlar. Lenfoid flamalar açılmasıyla toksinlerin bir kısmı genel dolaşıma katılarak ortamdan uzaklaşır. Bir kısmı kupa içindeki ciltte birikir. Buna kuru kupa denir. Bistüri yardımıyla intra dermal alanda 1-5mm uzunluğunda ve 1-2mm derinliğinde yüzeysel kesiler attığımızda kupa içine kan birikmesini sağlarız. Buna yaş kupa (wet cupping) denir. Kupa içinde biriken hücreler arası sıvıda lenf ve kanda bulunan ve vücuttan uzaklaştırmak istediğimiz toksik maddeler, ağır metaller ve kimyasal artıklar vardır. Bunlar yaş kupa tekniği ile ortamdan uzaklaştırılır. Wet cupping toksik maddelerinin bağdokusundan uzaklaştıran ucuz kolay uygulanabilen bir şalasyon yöntemidir. Yaş kupa ile oluşturulan akut travmanın etkisiyle bir inflamasyon oluşur. Buna bağlı olarak dokularda histiyosit, IFN, TNF seviyeleri artarak bağışıklık sistemi güçlenir. Kupa tedavisi sırasında akupunktur noktaları uyarılır. Organ ve cilt arasındaki ilişki nedeniyle cilde yaptığımız yüzeysel çizikler vasıtasıyla organlarda bir homeostaz oluşur ve enerji dengelenmesiyle sonuçlanır. Kupa yöntemi hem koruyucu hem de tamamlayıcı tıpta kullanılan bir tekniktir. Yaş kupa ülkemizde hacamat olarak bilinirken Arap ve İslam ülkelerinde hijame olarak bilinmektedir.

Keywords: Toksik maddeler; yaş kupa; kuru kupa



Optic Nephropathy and Multiple Sclerosis: Role of Acupuncture in Prognosis and Live Quality Improvement

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Objective: —the effect of acupuncture on the quality of life of individuals with optic Neuropathy and multiple sclerosis and provide preliminary evidence regarding the safety of this intervention for this population of acupuncture combine using tongue acupuncture in both optic Neuropathy and multiple sclerosis

Material: Twelve participants with secondary progressive multiple sclerosis combine with optic defect .and twenty-two optic neuropathy received acupuncture treatments

Method: long term follow -up above 3 years. Multiple Sclerosis Impact Scale 29, were measured pre and post intervention. Adverse events and other responses during treatment were recorded prospectively. Optical function results from medical center and clinic questionnaire.

Results: No recurrence in all MS and 95% improvement in all optical neuropathy patients. No major adverse events were noted.

Conclusion: under the concept of spiritual pivot and renying-cunkou pulse ratio manipulation . The nervous system is inter-communicating between system and peripheral. The treatment of acupuncture combining tongue acupuncture in the nervous system play a beneficial and safety effect in combining traditional medicine treatment without side effect. The prognosis and patient compliance rate is over 95%.

Keywords: multiple sclerosis ,;optic Neuropathy;tongue acupuncture;concept of spiritual pivot ;renying-cunkou pulse ratio manipulation



Akupresürün Laparoskopik Kolesistektomi Sonrası Gastrointestinal Fonksiyonlara Etkisi

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Amaç: Bu araştırma laparoskopik kolesistektomi sonrası uygulanan akupresürün gastrointestinal fonksiyonlara etkisini incelemek amacıyla uygulandı.

Yöntem: Randomize kontrollü deneysel tipte olan araştırma, Eylül 2018-Şubat 2019 tarihleri arasında İstanbul'da bulunan bir üniversitesi hastanesinin genel cerrahi servislerinde elektif laparoskopik kolesistektomi uygulanan ve araştırma kriterlerine uygun 60 hasta (deney:30, kontrol: 30) ile gerçekleştirildi. Deney grubunda yer alan hastaların, sırasıyla CV-12, Liv-3 ve ST-36 noktalarına, 5 saniye süreyle 1-1.5 cm derinliğinde 3-5 kg'lık basınç uygulandı, 2 saniye ara verildi ve akupresür uygulamasına her bir noktada 3 dakika süreyle devam edildi. Akupresür deney grubunda yer alan hastalara ameliyat sonrası 1., 2., 3. ve 4. saatlerde olmak üzere toplam 4 kez uygulandı. Kontrol grubunda yer alan hastalara ise rutin ameliyat sonrası tedavi ve bakım girişimleri yapıldı. Gruplarda yer alan hastaların her akupresür uygulaması öncesi ve ameliyat sonrası 24. saatte bağırsak sesleri dinlendi, gaz ve gaita çıkışları olana kadar da takipleri yapıldı. Verilerin analizinde anlamlılık $p<0.05$ düzeyinde değerlendirildi. Araştırmaya başlamadan önce etik kurul ve kurum izni, yazılı ve sözlü olarak hasta onamları alındı.

Bulgular: Deney grubunda kontrol grubuna göre ameliyat sonrası bağırsak hareketi sıklık ortalamalarının, 2. saatte istatistiksel olarak anlamlı derecede ($p<0.05$) daha fazla olduğu, 3., 4. ve 24. saatlerde istatistiksel olarak çok ileri derecede anlamlı ($p<0.001$) daha fazla olduğu bulundu. Deney grubunda yer alan hastaların ameliyat sonrası ilk gaz çıkarma zamanının kontrol grubuna göre istatistiksel olarak çok ileri derecede anlamlı daha kısa olduğu saptandı ($p<0.001$). Ayrıca, deney grubunda ameliyat sonrası ilk gaita çıkarma zamanı ortalamasının 39.67 ± 15.72 (saat), kontrol grubunda 47.80 ± 18.99 (saat) olduğu; deney grubunda ilk gaita çıkarma zamanının daha kısa olduğu ancak aralarındaki farkın istatistiksel olarak anlamlı olmadığı belirlendi ($p=0.07$; $p>0.05$).

Sonuç: Laparoskopik kolesistektomi sonrası uygulanan akupresür bağırsak hareketlerini hızlandırmada, ameliyat sonrası erken dönemde gaz ve gaita çıkışının gerçekleşmesinde güvenli bir hemşirelik uygulamasıdır.

Anahtar Kelimeler: Akupresür, laparoskopik kolesistektomi, gastrointestinal fonksiyon



The Course Of Cognitive Functions In Geriatric Patients With Musculoskeletal Pain Receiving Acupuncture Therapy

Introduction: During the ageing process, degenerative changes occur in the musculoskeletal system which can cause pain. Pain is related to decline in the cognitive functions, behavioral problems, depression, decline in the functional capacity and polypharmacy. In our study, we evaluated the effect of acupuncture on the Visual Analogue Scale (VAS), Mini Mental State Examination (MMSE), Cohen Mansfield Agitation Inventory (CMAI), Geriatric Depression Scale (GDS), Activities of Daily Living (ADL), Instrumental Activities of Daily Living (IADL) in geriatric patients with chronic musculoskeletal pain.

Material and Methods: We performed the study at Ankara Ankara Atatürk Teaching and Research Hospital geriatrics outpatient clinic between October 2017 and October 2018. Comprehensive geriatric assesment was performed to patients with complaints of pain and forgetfulness. Eligible patients were recruited into the study according to their willingness.

Results: Twenty-three geriatric patients were included in the study. 78,3% were female and 21,7% were male. Mean age of the patients were $73,39 \pm 6,47$ and mean number of the acupuncture sessions were $9,48 \pm 1,95$. Mean Visual Analogue Scale (VAS) before treatment was $7,65 \pm 1,82$ which decreased significantly to $4,36 \pm 2,24$ after treatment ($p < 0,001$). MMSE mean score before treatment was $23,26 \pm 5,50$ and increased significantly after treatment reaching $25,45 \pm 3,98$ ($p < 0,001$). Mean GDS score was $11,65 \pm 8,83$ before treatment and reduced significantly to $8,45 \pm 6,83$ after ($p < 0,001$). CMAI mean score before treatment was $40,87 \pm 10,21$ which decreased significantly to $35,86 \pm 8,45$ after treatment ($p < 0,001$). ADL mean score before treatment was $5,35 \pm 0,71$ and significantly increased to $5,77 \pm 0,43$ afterwards ($p = 0,002$). IADL mean score before treatment was $6,70 \pm 2,08$ which did not change significantly and was $6,73 \pm 2,07$ after treatment ($p = 0,317$).

Conclusion: Using acupuncture as an analgesic method for geriatric patients with chronic musculoskeletal pain could have a positive impact on cognitive functions and behavioral problems due to decreased cognitive functions. Acupuncture could effect geriatric depression positively and could improve ADL. 10 sessions of acupuncture did not make a difference on the IADL. To specify acupuncture's effect on cognitive function, depression, behavioral problems; long-term studies which include more number of participants should be designed.

Key words: Acupuncture, chronic pain, cognitive functions, behavioral problems, geriatric problems.

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POSTER PRESENTATIONS



Kronik ağrılı bir hasta için Akupunktur tedavisi

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30 yıl önce renal bir operasyon sonrasında operasyon skar dokusu etrafında başlayan, önce bele sonrasında bütün vücuda yayılan yaygın ağrıları olan 63 yaşında kadın hasta öncelikle Üroloji polikliniğine başvurmuş. Ürolojik nedenli ağrılar ekarte edilen hasta Fiziksel Tıp ve Rehabilitasyon polikliniğimize yönlendirilmiştir. Hastanın anamnezinde ağrısı gün boyunca sürüyordu. Hareketle ve istirahatla ağrının şekli değişmiyordu. Gece ağrısı da olan hastanın uyku kalitesi ağrı nedeniyle bozulmuştu. Hastanın ağrı düzeyi Visual analog skala (VAS) 10 gece ağrısı VAS 8 idi. Özgeçmişinde çeşitli ilaç alerjileri dışında özellik yoktu.

Hastanın muayenesinde renal bölgede yaklaşık 15 cm'lik skar dokusu ve bu skar dokusunun etrafında hassasiyet mevcuttu. Yaygın yumuşak doku hassasiyeti olan hastanın nörolojik muayenesi normaldi. Düz bacak kaldırma, Fabare, Fadır testleri negatifti.

Hastaya fibromiyalji ön tanısıyla yapılan tetkiklerinde tam kan, biyokimya, akut faz reaktanları, TSH ve Serbest t4 değerleri normaldi. D vitamin 13,1 ile düşük gelen hastaya D vitamini tedavisi verildi. Hastanın çekilen Lomber MR'nda her seviyede bulging düzeyinde herni mevcuttu. Herhangi bir kök basısı yoktu.

Herhangi bir ilaç tedavisi kabul etmeyen hasta için akupunktur tedavisi planlandı. Hastaya Du20, Yintang, Ren6, Ren12, Ren17, Stomach (St)25, St36, Spleen (Sp)6, Sp9, Gallbladder (Gb)34, Liver (Liv)3, Bladder (Bl)23, Bl24, Bl25 bilateral olarak uygulandı. Du 20, Yintang ve St36 noktaları uyku kalitesini arttırmak ve anksiyetiyi azaltmak amacıyla seçildi. Ren17 Çi'yi düzenleyici etkisi nedeniyle, Ren12 mideye ve depresyona olan olumlu etkisi nedeniyle, Ren6 karın alt bölgesine yayılan ağrısı nedeniyle seçildi. Gb34, kas ve tendon üzerindeki olumlu etkisi için seçildi. Sp6 genel bir rejeneratif noktadır. SP6 ve 9 ödemi azaltır. Bl23, Bl24 ve Bl25 noktaları bel bölgesini lokal olarak etkilerken Bl24 ve Bl25'in ayrıca lumbosakral pleksus boyunca segmental düzeyde bir etkisi vardır.

Haftada bir kez 6 seans Akupunktur uygulaması sonunda hastanın ağrısında VAS 2'ye kadar gerileme ve uyku kalitesinde artış sağlanmıştır. Akupunktur kronik ağrılı hastalarda uygulanabilecek etkin tedavi yöntemlerinden biridir.

Keywords: Kronik ağrı;Akupunktur;Fibromiyalji



Lökopenide akupunktur tedavisi

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Giriş:

Vücudumuz insanlığın varlığından beri immün sistem aracılığı ile kendini her türlü hastalığa karşı koruyarak insan neslinin devamını sağlamıştır. Bağışıklık sistemimizin en öncelikli elementi olan lökositlerdir, genel olarak lökosit sayısal bozukluklarının büyük bir çoğunluğu kemik iliği yapım bozukluklarından kaynaklanır, kemik iliği hasarına neden olan ilaçlar, radyasyon, kimyasallar, enfeksiyonlar, kemik iliğini tutan hastalıklar. Bunun yanı sıra aşırı yıkım, kompartımanlar arasında anormal dağılımda dolaşımdaki lökosit sayılarında azalmaya neden olabilir. Akupunkturda İmmün-modülatör noktalar ile immün sistemimizi aktive etmemizi sağlayabilecek özel noktalar vardır .

Yöntem-analiz:

A.K evli ve üç çocuk annesi elli altı yaşında bayan hastanın polikliniğimize başvurmasını sebebi genel bir halsizlik ve bağışıklık problemleri olduğunu anlattı. İki yıl önce oğlunun Myasthenia Gravis hastalığını öğrendiği dönemde bir fenalaşma sonucunda systolik tansiyonun 25mmHg ye yükselmesi ile hastaneye başvuruyor, yapılan muayene ve tetkiklerde hastanın lökopenisi olduğu saptamış. Hastanın herhangi bir kronik hastalığı bulunmamaktadır. Detaylı anamnez ve Fizik muayenede her hangi bir bulguya rastlanmadı. Tetkik sonuçlarında lökosit değerlerinin total sayısının normal alt seviyenin altında 3.180 / mm³ dir. Görüntüleme sonuçlarımızda her hangi bir kitleye rastlanmamıştır. Kemik iliği incelemelerinde, Granülosit matürasyon ve fonksiyon bozukluklarına rastlanmamış, iliğinin istilasına neden olabilecek infiltratif hastalıklara, enfeksiyon, radyasyon ve ilaça bağlı durumlar ekarte edilip "idiyopatik lökopeni"tanısına karar verildi.

Akupunktur tedavisi 0,20X13mm lik iğnelerle on beş seans uygulandı, ilk sekiz seansını haftada iki olarak ayarlanıp devamındakileri haftada bir olarak yapıldı. Seanslarda immün-modülatör noktalar kullanıldı, vücuttan Sp 6-9-10, Li4-11, St 36, Du20 , Ren 17, ve kulaktan interferon noktası her seansta uygulandı.

Hemogram kontrolleri 1.Seans öncesi, 8.seans ve 15.seans sonrası kontrol edilmiştir, değerler; 3,120/mm³, sonra 4,080/mm³ ve seans sonunda 4,280/mm³ olarak yükseldiği kaydedildi.

Sonuç:

Yapılan klinik incelemelerde lökositopeni diye değerlendirilmiş hastamızın hemogram değerlerinin düzelmeye başladığını kaydetmek evvelinde yapılan bir çok çalışmada benzer sonuçlara ulaşan hekimlere katılmamızı sağlamasıyla, bir sonraki çalışmamızı daha yüksek sayıda hastalarla daha az sayıda noktalar bir klinik araştırma yapılabileceğimizi kanatine varmamızı sağlamıştır.

Keywords: lökopeni;akupunktur;immün-modülatör



Şiddetli Kaşıntı Ve Döküntü İle Seyreden Bir Hastada Homeopatik Yaklaşım

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Homeopati 18 yüzyılda doktor ve eczacı Samuel Hahnemann tarafından geliştirilmiş, 'benzer benzeri tedavi eder' prensibine dayanılarak uygulanan bir tedavi sistemidir. Sağlıklı kişide belirli bulgulara sebep olan bir madde, söz konusu bulguları taşıyan hastaya verildiğinde iyileşme cevabı oluşturması beklenir.

Dört yaşında kız çocuğu hastada, vücudunun hem gövde hem de üst ve alt ekstremitte bölgelerinde şiddetli kaşıntı ile seyreden döküntü şikayeti olmuş. Çeşitli Pediatri, Dermatoloji, Allerji ve Romatoloji uzman hekinlerince muayene edilen hasta için, başlangıçta allerji ve böcek ısırığı ön tanıları ile antihistaminik tedavi uygulanmış. Takiplerinde şikayetleri daha da artan hasta psikojenik nedenli dermatit tanısı ile Çocuk Psikiyatri tarafından da takip edilmiş ancak yine sonuç alınamamış. Deri biopsisini de içeren ileri düzey tetkiklerinde de kesin tanıya ulaşılamamış. Süreç içerisinde çeşitli kortikosteroid preparatları, çeşitli antihistaminik ilaçlar ve risperidon kullanmış. Şikayetleri daha da artan hastanın bu tedavileri ebeveynleri tarafından sonuç alınamadığı gerekçesiyle kesilmiş.

Ayrıntılı anamnezi alınan hasta sifilitik miazma kabul edilerek Mercurius sulu doz C30 başlandı. Kaşıntı şikayeti ertesi gün geçti, yeni lezyon oluşmadı ve döküntüleri 3 hafta içerisinde tamamen iyileşti. 4. Hafta sonunda homeopatik remediye kesen hastanın döküntü ve kaşıntısı tekrar başladı. Mercurius C30 sulu doz remedi tedavisi tekrarlandı. 4 haftanın sonunda şikayetleri tekrarlayan hastaya Mercurius C200 başlandı. 4 aydır tedavi alan hastanın zaman zaman çok hafif düzeyde kaşıntısı olsa da tüm döküntüleri iyileşti ve hiç yeni lezyonu yok.

Keywords: Kaşıntı;Döküntü;Sifilitik Miazma;Mercurius;Homeopati



GETAT Uygulamalarının Aile Hekimliği Uzmanlığına Entegrasyonu

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GİRİŞ

Aile hekimi, hastaya en erken ulaşma imkanı olan kişilerden biridir. Hastanın geçmişini, aile ortamını ve hastalığın gelişim sürecini çok yakından izleme olanağına sahip olması; erken tanıda avantaj sağlar. Geleneksel ve tamamlayıcı tıp (GETAT) uygulamalarının birinci basamakta aktif olması, erken tanı ile toplum sağlığını korurken, maliyet-etkin olmasıyla kaynakların optimum şekilde kullanılmasını sağlar. Birinci basamakla GETAT uygulamalarının entegrasyonu pek çok açıdan fayda sağlayacaktır.

GETAT birimine başvuran hasta profillerinden örnekler inceleyelim; Migren hastaları aile hekimliği ve GETAT polikliniklerinde sık gördüğümüz hasta grubundandır. Hastalar; ayrıntılı bir anamnezle sorgulanarak tedavi protokolü belirlenir. Pek çok hastanın atak sayısının azaldığı, ağrı şiddetinin hafiflediği, ilaç kullanma oranının azaldığı fark edilmiştir. Cochrane derlemesinde de akupunkturun migren tedavisinde profilaktik tedaviler kadar etkili olduğu sonucuna ulaşılmıştır(1).

Hastaların genelde esas geliş sebepleri psikiyatrik şikayetler olmasa da; anamnez sırasında ani öfkelenmeler, hayattan zevk alamama, yorgun hissetme, genel mutsuzluk hali gibi emosyonel semptomlarının olduğu fark edilmiştir. Birinci basamak kuruluşlara bu şikayetlerle gelip genel değerlendirilmesi yapılan hastalar bulunmaktadır. Akupunktur uygulaması merkezi sinir sistemi ve plazmada serotonin ve enkefalin seviyesini yükselterek anksiyete ve depresyon tedavisinde başarılı olmuştur(2).

Türkiye’de fibromiyalji tanısı her geçen gün giderek artmaktadır(3). Hastalar, çok kez tanı tetkik aşamasında üçüncü basamak sağlık kurumlarına başvurmaktadır ve semptomatik, uzun süreli ilaç kullanımları söz konusudur. Yapılan çalışmada akupunkturun fibromiyalji ağrısında oldukça önemli boyutta azalma sağladığı kanıtlanmıştır(4).

Birinci basamakta prediyabetik olduğu düşünülen ve yaşam tarzı değişikliği önerilen hastaya ek olarak akupunktur tedavisinin önerilmesiyle hastanın glukoz değerlerinin düzene girmesi, hastanın diyabete bağlı semptomları, sonrasında gelişebilecek komplikasyonları da engellemiş olacaktır. Yapılan bir çalışmanın sonuçlarına göre; akupunktur, prediyabetik hastalarda kilo kaybını indükleyebileceği, insülin ve leptin direncini azaltabileceği sonucuna varılmıştır(5).

SONUÇ

Hastaya dokunmak, ayrıntılı anamnez ve fizik muayene ile doğru tanı ve tedaviye karar vermek, hastaya bütüncül ve kapsamlı yaklaşmak; hem birinci basamak hem GETAT felsefesinin olmazsa olmaz yaklaşımlarındandır. Bu iki bilimin entegre edilmesi, birçok hastalığın önlenmesi ve tedavi edilmesinde çok kıymetli olacaktır.



Keywords: aile hekimliđi;getat uygulamaları;akupunktur;birinci basamak

Application of Objective Structured Clinical Examination (OSCE) in Assessing Clinical Performance of Undergraduates of Chinese Medicine

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Abstract—This study aims at investigating the impact of implementing OSCE in a Chinese Medicine undergraduate program. A total of 41 fifth-year undergraduate students of Chinese Medicine of Tzuchi university underwent OSCE before (i.e., pre-test, May 2016) and after (i.e., post-test April 2017) their Chinese Medicine internship. The average mean score of post-test was significantly higher than that of pre-test (72.15 ± 8.11 and 67.60 ± 8.88 , $p=0.002$). The total average scores of the participants in their first three undergraduate years in the six disciplines of Chinese Medicine were positively associated with their performance in OSCE pre-test in those disciplines ($r=0.0451$, $p=0.003$). The total average scores of the students during their internship (i.e., fifth year) in the six disciplines were also positively related to their scores at OSCE post-test ($r=0.361$, $p=0.020$).

Keywords: objective structured clinical examination (OSCE), Chinese medicine

Keywords: objective structured clinical examination (OSCE), ;Chinese medicine;;Education



Effects of Noninvasive Mechanical Skin Stimulation to the Cavum Concha by Microcones on Autonomic Nervous Activity during Mental Arithmetic Task

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Suppressed vagal activity by mental stress is known to be associated with various diseases, e.g., cardiovascular diseases or major depressive disorder. Direct electrical vagus nerve stimulation improves the manifestations of these diseases. However, the technique needs invasive treatment, so noninvasive, simple methods are required. Transcutaneous vagus nerve stimulation is one of the methods and is reported to increase heart rate variability (HRV) and decrease sympathetic nerve activity. Recently, noninvasive mechanical skin stimulation is known to affect rat autonomic response (Hotta et al. 2012). Objective: The aim of this study was to examine the effect of noninvasive mechanical skin stimulation on the cavum concha of both ears by microcones on autonomic nerve activity during mental stress task. Methods: 20 university male students kept rest in supine posture for 5 minutes and then performed mental arithmetic tasks during 10 minutes. This trial was repeated under three conditions: a tool with microcones (S), without microcones (P), and no tool (N). The tool was applied to the cavum concha of both ears before the task. The electrocardiogram, the blood pressure, and the subjective fatigue feeling by Visual Analogue Scale (VAS) were measured. By R-R intervals (RRI) from electrocardiogram, time domain, frequency domain, and nonlinear data of HRV were calculated. Results & Discussion: RRI's immediately after mental arithmetic task were significantly decrease compared to those at rest at each condition ($p < 0.001$). But the difference in RRI from before to after the task were no significantly difference among three conditions [S: -135.0 (-190.8 – -91.5) ms, P: -111.0 (-169.4 – -59.9) ms, N: -103.4 (-208.2 – -59.3) ms, median (25 – 75% quartile)]. HRV parameters and VAS were similar with those results. Then, these results suggested that noninvasive mechanical skin stimulation on the cavum concha by microcones may not reduce mental stress.

Keywords: noninvasive mechanical skin stimulation; mental arithmetic task; autonomic nervous activity; acupuncture



Changes in brain trace substances by tactile stimulation to Acupuncture point.

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Life in a stress environment is known to cause various diseases such as psychosomatic disorders.

It is known that tactile stimulation has psychopsychological effects such as reducing the various symptoms such as anxiety, as well as acting on autonomic functions such as heart rate and blood pressure reduction.

Therefore, we examined the effect of tactile stimulation using changes in trace substances in the brain as indicators.

The subject of the experiment is male Wistar rats.

Rats were divided into two groups: the stimulation group (Group A) with tactile stimulation applied to the site equivalent to the [Zusanli](ST-36) and the non-stimulation group (Group C) with no stimulation.

For tactile stimulation, we used a soft elastomeric microcone that does not invade the skin. Evaluation was performed using HPLC by extracting trace substances in the brain of the dopamine nervous system by microdialysis. Statistics were Dunnet's multiple comparison test after Student's t test or ANOVA.

As a result of the experiment, dopamine release in group C showed no tendency to increase or decrease over time, and no statistically significant difference was observed. On the other hand, in group A, dopamine release increased by an average of 14.3% compared to baseline 20 minutes after tactile stimulation, and a statistically significant difference ($p = 0.022$) was observed.

These results suggest that tactile stimulation to rats may affect the dopamine nervous system in the brain.

Keywords: tactile stimulation,;non-invasive skin stimulation,;microcone,;dopamine,;acupuncture point



Sebebi bilinmeyen bir Lökopenide akupunktur tedavisiyle düzelme kaydedilen hastanın vaka sunumu

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Lökopenide akupunktur tedavisi:

Giriş:

Vücudumuz insanlığın varlığından beri immün sistem aracılığı ile kendini her türlü hastalığa karşı koruyarak insan neslinin devamını sağlamıştır. Bağışıklık sistemimizin en öncelikli elementi olan lökositlerdir, genel olarak lökosit sayısal bozukluklarının büyük bir çoğunluğu kemik iliği yapım bozukluklarından kaynaklanır, kemik iliği hasarına neden olan ilaçlar, radyasyon, kimyasallar, enfeksiyonlar, kemik iliğini tutan hastalıklar. Bunun yanı sıra aşırı yıkım, kompartımanlar arasında anormal dağılımda dolaşımdaki lökosit sayılarında azalmaya neden olabilir. Akupunkturda İmmün-modülatör noktalar ile immün sistemimizi aktive etmemizi sağlayabilecek özel noktalar vardır .

Yöntem-analiz:

A.K evli ve üç çocuk annesi elli altı yaşında bayan hastanın polikliniğimize başvurmasını sebebi genel bir halsizlik ve bağışıklık problemleri olduğunu anlattı. İki yıl önce oğlunun Myasthenia Gravis hastalığını öğrendiği dönemde bir fenalaşma sonucunda systolik tansiyonun 25mmHg ye yükselmesi ile hastaneye başvuruyor, yapılan muayene ve tetkiklerde hastanın lökopenisi olduğu saptamış. Hastanın herhangi bir kronik hastalığı bulunmamaktadır. Detaylı anamnez ve Fizik muayenede her hangi bir bulguya rastlanmadı. Tetkik sonuçlarında lökosit değerlerinin total sayısının normal alt seviyenin altında 3.180 / mm³ dir. Görüntüleme sonuçlarımızda her hangi bir kitleye rastlanmamıştır. Kemik iliği incelemelerinde, Granülosit matürasyon ve fonksiyon bozukluklarına rastlanmamış, iliğinin istilasına neden olabilecek infiltratif hastalıklara, enfeksiyon, radyasyon ve ilaça bağlı durumlar ekarte edilip "idiyopatik lökopeni"tanısına karar verildi.

Akupunktur tedavisi 0,20X13mm lik iğnelerle on beş seans uygulandı, ilk sekiz seansını haftada iki olarak ayarlanıp devamındakileri haftada bir olarak yapıldı. Seanslarda immün-modülatör noktalar kullanıldı, vücuttan Sp 6-9-10, Li4-11, St 36, Du20 , Ren 17, ve kulaktan interferon noktası her seansta uygulandı.

Hemogram kontrolleri 1.Seans öncesi, 8.seans ve 15.seans sonrası kontrol edilmiştir, değerler; 3,120/mm³, sonra 4,080/mm³ ve seans sonunda 4,280/mm³ olarak yükseldiği kaydedildi.

Sonuç:

Yapılan klinik incelemelerde lökositopeni diye değerlendirilmiş hastamızın hemogram değerlerinin düzelmeye başladığını kaydetmek evvelinde yapılan bir çok çalışmada benzer sonuçlara ulaşan hekimlere katılmamızı sağlamasıyla, bir sonraki çalışmamızı daha yüksek sayıda hastalarla daha az sayıda noktalar bir klinik araştırma yapılabileceğimizi kanatine varmamızı sağlamıştır.

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Keywords: lökopeni;akupunktur;immünmodulator



Study of the effectiveness of the direct moxibustion for breech presentation

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「Objective」

Most of the treatments for breech presentation reported in the world were performed with stick moxibustion. On the other hand, direct moxibustion has been performed besides moxa stick moxibustion in Japan. Therefore, we examined the correction rate of the pregnant women with breech presentation who were performed by the direct moxibustion to BL67, and comparing of the correction rate depending on the presence or absence of the birth experience by case accumulation at the common Acupuncture and Moxibustion Clinic in Japan.

「Subjects and Methods」

We treated 1,500 women with breech presentation who were treated by direct moxibustion on BL67 during 16 years, from March 2000 to May 2016. The treatment methods are basically direct moxibustion to BL67 and needle retention to SP6, and treated on several acupuncture points according to the minor trouble that pregnant women complained. The survey was conducted by phone and envelope from March to October 2017. As a result, of 1,500 women, 43 moved, 46 unrecovered, and 72 were took external cephalic version. So we excluded them from researching, and the number of subjects of this research is 1339 cases. The survey items were the history of delivery and the number of cephalic presentation.

「Result」

The average age of 1339 women was 34 ± 4.0 years old, average height 159 ± 5.2 cm, average weight 61.2 ± 7.5 kg, pre-pregnancy weight 54.6 ± 7.2 kg. Of total 1,339 women, the number of cephalic presentation was 867(64.7%). 502 (58.2%) of 863 Primipara women became cephalic version, and 365(76.7%) of 476 Multipara women did. ($P=0.0014$)

「Conclusion」

The correction rate by direct moxibustion was almost the same as the report by stick moxibustion which has been done up to now. In addition, the correction rate of the multipara was significantly higher than the primipara.

Keywords: Direct moxibustion ;Breech presentation ;Pregnant women ;BL67



The effects of acupuncture on blood pressure, heart rate, and heart rate variability in patients with mild hypertension.

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Objectives The present study aimed to determine whether acupuncture affects blood pressure (BP), heart rate (HR), and heart rate variability (HRV) in patients with mild hypertension.

Methods We measured blood pressure (BP), heart rate (HR) and heart rate variability (HRV) in seven male patients with systolic (SBP) or diastolic (DBP) BP of 130 - 159 or 85 - 99 mmHg, respectively, before, during and after acupuncture. A control group comprised eight age-matched males with normal BP. After 10 min of rest in the supine position, acupuncture at PC6, LI4, ST36, LR3, GV20 was applied for 15 min, with recovery then monitored over a 20-min period. This study was approved by the Human Investigation Committee of the Kansai University of Health Sciences (approval no.17-31).

Results The SBP, DBP and HR were significantly decreased in the patients during and after acupuncture compared with baseline ($p < 0.05$). Whereas SBP significantly differed between the groups ($p < 0.05$), DBP and HR did not. The low- (LF) and high (HF) frequency components of HRV significantly increased after acupuncture in both groups ($p < 0.05$), and HF significantly differed ($p < 0.05$) whereas LF/HF did not significantly change in either group.

Conclusions Acupuncture might lower blood pressure in individuals with mild hypertension. Based on HRV indices, this depressor effect of acupuncture on mild hypertension might be associated with enhanced cardiac vagal activity.

Keywords: Hypertension; Blood pressure; Heart rate variability; Cardiac vagal activity



BENEFICIAL OF ACUPUNCTURE THERAPY IN CHRONIC LOW BACK PAIN WITH AND WITHOUT RADICULOPATHY

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Background; the aim of this retrospective study of 50 patients, with chronic low back pain for more than 2 years, with acute pain more than 2 times a year, cured in Pain therapy ambulances at two different medical institutions, was to proof the efficiency of acupuncture therapy.

Material and methods; the including criteria were; low back pain more than 2 years, acute pain more than two times a year, orthopedics and neurosurgeons evaluation, suggested operation therapy in the case of insignificant pain. Different diagnosis-DH, spinal stenosis, traumatological, failed back surgery. Before all used different therapies, without good effect. Consumed analgetics - NSAID's, light and weight opioids. The study included the patients from the 1.st of June 2012 till the 1.st. 2017. We used the Traditional Chinese Acupuncture, good anamnesis, status TCK and individual of acupuncture points. Ten times, every second day, the control visit after 3 months (1), and longterm visit after 1 year (2). Noticed pain at the begin of therapy, on control visit visits, patients satisfaction (very good, good, no change), consumption of analgetics (NSAIDS, weak and strong opioids), the immediately difficulties at the beginning and at the end of observation (no pain, out of working, others).

Results; In the study were included 35 women, 15 men, aged from 47-76 years. Dates were statistically analysed with SSP, using tool ANOVA and others needed.

The results show good effect in more than 50% of patients, which was connected with the diagnosis. The detailed results will be present at the congress. 2 of our patients were operated in the time between 1.and 2. Visit (spinal stenosis and discus hernia) .

Conclusion; The low back pain is very common and patient's suffering condition. They are several guidelines, but not all include the acupuncture therapy. The results confirm the efficiency of acupuncture therapy in all observed diagnosis.

Keywords: back pain, acupuncture, successful; Chronic low back pain, acupuncture, successful; back pain, acupuncture,



THE STATE, STATUS AND EDUCATION IN THE FIELD OF ACUPUNCTURE IN SLOVENIA AFTER 40 YEARS

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OBJECTIVE; 1978 was the crucial year for Slovenian and Yugoslavien, our common state till 1991, acupuncture.

MATERIAL; Written documents of arhiv of SAA.**SLOVENJ GRADEC -**

DECLARATION 1978 ACUPUNCTURE is usefull for the people of Yugoslavia. It is urgent to be the **part of official medicine**. Must be **the associations** for acupuncture. Must be oportunity the medical doctors to **educate them in acupuncture in Jugoslavia**. Must be oportunyty to have some **literature,rewies in** Jugoslavia for acupuncture. It was organised Chinese complete education from traditional acupuncture in Zagreb 1979-participating 4 doctors from each Yugoslavien Republik, from Slovenia (Turk, Godina, Medved, Cesar Komar). From the year 1979 is acupuncture therapy also payabel by medical ensurance company.

DISCUSSION; Furder educations from acupuncture was under the Slovenian Association for Acupuncture part of SMA, establesed 1980. Frekvently separate courses with different TCA experts from different parts of Europe . Traying to have some fragments of school , with cooperation with Chinese school with traveling to China .Till the year 2017 it was not the complete Slovenian school of acupuncture. We began with 1st SLOVENIAN SCHOOL FOR ACUPUNCTURE in Sept 2016 .Take place 2,5 years on weekends. Lecturers are our slovenian experts for acupuncture with finised original CTA school, and some teachers , from Austria and Srbia. Contains 160 hours of theoretical lectures ,100 hours practical work , 40 hours seminars. Final exame and certificate. Medical chamber of Slovenia aproved the programe , with kredit points for each modul of lectures. The Ministry of health Republik of Slovenia , have patrionat on our school. Competeting for the special knowledge – ACUPUNCTURE. We wish to have some hours in the programe of the Medical Fakulty . The acupuncture is used in Slovenia in great part for pain therapy in ambulances and clinics , som

Keywords: acupuncture, beginning , education, status off acupuncture in Slovenia; Insurance cowering of acupuncture therapy, useful of acupuncture , pain ambulances, spas; state of acupuncture



THE EFFECTS OF ACUPUNCTURE ON SOCIAL LIVING IN MIGRAINE

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Objectives

The acupuncture provide interoceptive signal to trigeminalcervical system inducing change in interoceptive processing and consequently feelings related to pain and emotions. The equilibrium in social activities should be reestablished through its effects. According to the biopsychosocial model, we expected improvements in social functioning after acupuncture.

Method and subjects

We conducted survey in the 28 patients with migraine (6 men, 22 women; age 46,4±7,2 years). Mostly we have used a battery of acupoints: St 2, St 6, St 8, St 15, GB 8, GB 14 ,Gb 20 and HN 5. The structured interview was centered to evaluate the daily living such as social activities, family life and work activity. We explored the subjective effectiveness of acupuncture. The physical pain, sleep and mood were assessed after acupuncture. We detected the responses to acupuncture and analyzed the association between variables using Chi square test (SPSS).

Results

Acupuncture was effective in 23 pts. (85.2%). The satisfaction was achieved in 20 pts. (74.1%). Physical pain was ameliorated in 21 pts. (80.8%); mood improved in 20 pts. (74.1%) and sleep in 10. pts (40.0%). Before the acupuncture, disturbances in social life was reported in all studied patients. Improvement in functioning at the work was reported 15 pts. (75.0%), in social activities 17 pts. (65.4%) and in family life 17 pts. (70.8%). The medicine intake was reduced in 19 pts. (70.4%). We found an association between immediate effect of acupuncture and work functioning ($p=0.001$), improvement in family life ($p=0.004$) and social activities ($p=0.006$). We found an association between effect of acupuncture and improvement in physical pain ($p<0.001$) and in mood as well ($p=0.002$). We did not find the association between effect of acupuncture and sleep improvement ($p=0.094$).

Conclusions

We found that acupuncture in migraine patients has significant positive effect on social living through its effectiveness, improvement in physical pain and mood.

Keywords: Acupuncture;Migraine;Social functioning



The Effect of Foot Reflexology Massage on Burn-Specific Pain Anxiety and Sleep Condition of Patients Hospitalized in the Burn Intensive Care Unit (ICU)

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Background: Burn-specific pain anxiety and sleep disorders are psychological factors in burn wards that affect wound healing process, as well as the severity of burn pain. This study aimed to investigate the effect of foot reflexology massage on burn-specific pain anxiety and sleep condition of patients hospitalized in the burn ICU.

method: In this randomized controlled clinical trial, 52 patients were randomly assigned to the intervention (n = 26) and control (n = 26) groups. Those in the intervention group received 20 minutes of foot reflexology massage on their third, fourth and fifth days of hospitalization, as well as 15 minutes before changing wound dressings. Patients in the control group merely received routine care. The Burn-Specific Pain Anxiety Scale (BSPAS) was completed for three consecutive days before and after changing wound dressings, and St. Mary's Hospital Sleep Questionnaire (SMHSQ) was filled out for four consecutive days before changing wound dressings for patients in both groups. Data were analyzed by independent t, Chi-square, Friedman, and Mann-Whitney tests using SPSS 25.

Findings: No significant difference was found between the two groups in terms of the pain anxiety before the intervention. Friedman test results showed that there were significant differences between patients in the two groups in terms of the pain anxiety levels ($p = 0.000$), duration of last night's sleep ($p = 0.000$), duration of last day's sleep ($p = 0.000$), and satisfaction with last night's sleep ($p = 0.000$). In addition, Mann-Whitney test results showed that there were significant differences between the two groups at different times in terms of the above variables ($p < 0.05$).

Conclusion: Based on the results, foot reflexology massage can effectively reduce pain anxiety levels and improve sleep condition of patients with burn injuries; therefore, this non-pharmacological therapeutic method is recommended to be used in the burn ICUs.

Keywords: Foot reflexology massage; pain anxiety; sleep condition; burn; ICU



Kondromalazi Patella Tanılı Hastanın Ağrı Kontrolünde Proloterapi Yöntemi Olgu Sunumu

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Patellar kondromalazi, diz önü ağrısının eşlik ettiği patella arka yüzündeki kıkırdığın yumuşaması ile karakterize bir hastalıktır. Patellanın aşırı kullanımı sonucunda altında yıpranma ile arka yüzündeki kıkırdakta dejenerasyonu ile oluşan ,kondromalazi patella diz eklemde ağrı, güçsüzlük gibi şikayetlere yol açar . Bir çok hasta merdiven inip çıkma ,çömelme gibi günlük aktivitelerinde ağrıdan şikayet eder. Yirmi yaş sonrası sağlıklı bireylerin yaklaşık yarısında, 50 yaş sonrası ise hemen her bireyin patellar kıkırdığında yumuşama görülür.

Proloterapi yöntemi kas iskelet sistemi ağrılarının tedavisinde; ağrıya sebep olan temel hasarın iyileşmesini sağlayan bir tedavi metodudur . Bu yöntemde hasarlanmış , ligament ,tendon ve eklemlere proliferan solüsyonların enjeksiyonu ile yara iyileşme mekanizmalarının reaktivasyonu ile hasarlı alanın kendi kendini tamir etmesi ,zayıflamış olan tendon ve ligamentlerin stabil hale gelmesi amaçlanmaktadır.

Bu sunum kapsamında araştırılan 33 yaşındaki sağ dizinde ağrı, şişlik ,çömelmede güçlük , ,merdiven inerken dizinde güçsüzlük hissi gibi şikayetleri olan MR görüntülemesi sonucu grade 2 kondromalazi patella tanısı alan 10 seans fizik tedavi sonrası şikayetlerinde azalma olmayan erkek hasta ağrı ve diğer yakınmalarının kontrolünde proloterapi yöntemi uygulanarak izlenmiştir. Hastaya 1 er ay ara ile toplamda 5 seans proloterapi uygulamıştır..Her seansta %10 dextroz + %0.02 lidokain karışımı her noktaya 1 cc olmak üzere dize en fazla 10 cc uygulama yapılmıştır. Tedavi sürecinde hastanın eklem stabilitesini destekleyici fiziksel egzersizler yapması sağlanmıştır.

Tedavi öncesi ağrı derecesi VAS 6 olarak belirlenirken ,5 seans proloterapi sonrası bu değer VAS 2 olarak belirlendi. Hasta günlük aktivitesi sırasında ağrısının, ve güçsüzlük hissinin önemli şekilde azaldığını belirtmektedir.Tedavi sırasında enjeksiyon sonrası ilk gün hafif ağrı haricinde herhangi bir yan etki görülmemiştir.Tedavi sonrası MR görüntülemesinde kondromalazi evresi aynı kalmakla birlikte önceki görüntülemelerde eklemde aralığında belirtilen efüzyonda iyileşme görülmektedir.

Proloterapi kondromalazi patella tanısında hastalık belirtilerini iyileştirmekte ve fiziksel becerileri geliştirmektedir.Bu yöntem ağrı kontrolü dışında hasarlı dokunun iyileşmesi sağlayarak tedavi edici iyileşme sağlamaktadır.

Keywords: proloterapi ;ağrı;patellar kondromalazi



Effects of Stimulating Dadun (LR1, well point) for Gastric Complaints —Comparison between Press Tack Needles and Sham Acupuncture Needles—

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Objective: To study effect on Chengman (ST20) of applying press tack needles and sham at Dadun (LR1, Well Point).

Material: PTN (press tack needles): 0.20-mm diameter, 0.30-mm length (Pyonex, Seirin Corporation, Japan). Sham: Same dimensions as PTN, but no needle point.

Method: Subjects had gastric bloating, discomfort, pain, etc. PTN group: 14 patients (42±13.8 years, mean±S.D.), Sham group: 14 patients (42±15.1 years). PPT (pressure pain threshold) measured by perpendicular pressure with the algometer at ST20 (left/right); tenderness evaluated by VAS (Visual Analog Scale). PTN applied at LR1 (left/right) 5 minutes. After removing, the algometer applied at ST20 to same pain level felt before PTN; pains evaluated by VAS. PPT remeasured (algometer pressure reapplied). Same measurements with sham. Changes in epigastric complaints elicited by interview. Statistical tests: Paired t-test for PPT; Wilcoxon rank sum test and Mann-Whitney U-test for VAS.

Results: PTN group: PPT increased left/right ($p<0.01$), VAS decreased ($p<0.01$). Sham group: PPT increased ($p<0.05$); VAS decreased ($p<0.05$). Interviews: Postoperative gastric complaints improved in 10 PTN cases (71%) and 12 sham acupuncture cases (86%).

Conclusion: PPT, VAS, and gastric complaints improved in PTN and Sham groups with application at LR1. Sham affected the stomach without the needle point at LR1 because the toenail edge is the hypersensitive meridian point. We surmised the 4.00 mm-diameter circular hard plastic attached to sham provided stimulation like spoon needles. This suggested the pressure-point stimulation effect without needles. Classics say Well Point governs fullness below the heart (Nanjing, Chapter 68). This suggested that together with interview outcomes, Dadun (LR1, Well Point) is effective for gastric complaints, supporting part of classical theory. In modern medical terms, we surmised lower limb stimulation excited vagus nerve via upper spinal reflex and accelerated gastric peristalsis (somatic–autonomic reflex).

Acknowledgment: This work is supported by International Relation Division of Japan Traditional Acupuncture and Moxibustion Society.

Keywords: Press tack needle; Sham acupuncture; Pressure pain threshold; Visual Analog Scale

**Acupuncture in the treatment of HTLV-I-Associated Myelopathy / Tropical Spastic Paraparesis**

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Objective:

HTLV-I-associated myelopathy/tropical spastic paraparesis (HAM/TSP) is a neurological disorder characterized by a myelopathic syndrome of progressive spastic paraparesis. Currently, there is no proven curative treatment for HAM/TSP. In this clinical trial, we investigate the possible effects of acupuncture on the improvement of neurological problems in HAM/TSP disease.

Material, Methods:

Twenty patients with HAM/TSP were studied in this pilot pre- and post-test clinical trial. HAM/TSP was diagnosed based on the WHO diagnostic criteria. Patients underwent 12 sessions of general body acupuncture. International consultation on incontinence questionnaire - short form (ICIQ-SF), Osame's motor disability score (OMDS), and modified Ashworth scale (MAS) were used to evaluate urinary incontinence, global motor disability and spasticity respectively, before, one month, and three-month after the intervention.). Our trial was registered in the Iranian Registry of Clinical Trials (IRCT) website (www.irct.ir; IRCT code: IRCT2016031327036N1).

Results:

Statistical analyses of ICIQ-SF demonstrated significant reduction of urinary symptoms one month after acupuncture ($P=0.023$). Friedman's test showed that the mean rank of MAS at the upper extremity joints was significantly decreased from the baseline, three-month after intervention ($X^2=10.33$, $P=0.006$). In the lower extremity, the mean value of MAS of the soleus muscle was significantly decreased from 2.3 at baseline to 1.9 at three-month after treatment ($X^2=7.75$, $P=0.021$). Reduction of pain (based on VAS scale) was also significant one and three months after acupuncture ($P=0.012$ and 0.018 , respectively).

Conclusion:

This study suggests that body acupuncture can be used as a complementary treatment to improve neurological symptoms of HAM/TSP. Further trials with a longer period of acupuncture and more extensive follow up period are needed to confirm these potential effects.

Keywords: HAM/TSP;Acupuncture;Pain;Spasticity



Sporcularda bel , kalça ve kasık ağrılarında geleneksel ve tamamlayıcı tıp yöntemlerinin kullanımı

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Bel , kalça ve kasık problemleri sporcularda oldukça sık görülür. Bu problemlerin hem tanısının konulması oldukça zordur , hem de potansiyel olarak tedavi sonrası kronikleşme riski yüksektir. Bu nedenle gerek profesyonel gerekse amatör bir çok sporcunun spor hayatı bitmektedir. Bir diğer sorun ise tedavide kullanılan bazı ilaçların veya metabolitlerinin doping çıkma riski mevcuttur. Bir çok bel , kalça ve kasık probleminde "kombine geleneksel ve tamamlayıcı tıp yöntemlerinin " kullanılması hem tedaviyi sağlamakta , hem de riskleri bertaraf etmektedir. Çalışmamızda ; sporcularda en sık görülen bel , kalça ve kasık problemlerinde kombine kullanılabilecek yöntemleri sıraladık

Keywords: spor hekimliği ;getat;spor yaralanmaları;kalça problemleri;kasık problemleri

**EFFECT OF ACUPRESSURE ON POSTOPERATIVE PAIN: A SYSTEMATIC REVIEW**

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INTRODUCTION

The lack of effective management of postoperative pain can cause many complications. The risk of increasing the adverse effects of pharmacological methods used for the therapy of pain increases the importance of integrative therapies for postoperative pain management. Depending on the studies in the literature, acupressure used to regress postoperative pain is as remarkable as acupuncture. Acupressure used for management of postoperative pain requiring a interdisciplinary team work is a non-invasive and integrative therapy method that can be administered by nurses.

OBJECTIVE

The objective of this study is to systematically review clinical studies evaluating the effectiveness of acupressure in postoperative pain management.

MATERIAL AND METHOD

6890 (Pubmed:56, Scopus:120, CochraneLibrary:54, ScienceDirect:745, ULAKBIM:325, Google Scholar:5344, Proquest:245, Yök-Tez:1) studies with publication languages of Turkish and English were found in the “PubMed, Scopus, CochraneLibrary, ScienceDirect, ULAKBIM, GoogleScholar, Proquest, Yök-Tez” data bases using the English and Turkish key words “acupressure, postoperative pain”. Studies compatible with the inclusion and non-inclusion criteria and having complete texts were included in the study.

FINDINGS

It was found that the sample group of the studies consisted of patients who underwent surgical procedures such as spinal, heart, orthopedic, abdominal surgery. It was found that P6, LI4, ST36 and the stimulation sites in the ear were mostly chosen as the application sites to investigate the effect of acupressure on the postoperative pain. It was found that acupressure accepted a satisfactory method in most of the studies to use for postoperative pain relief and for reducing the need for analgesics in operated patients. In the literature, there were studies reporting different results regarding the effectiveness of acupressure on postoperative pain.

CONCLUSION

This different results are considered to be related to the low sample number of the studies. In this context, the studies in the literature were not sufficient to reach a definite result and to establish a level of evidence. Planning and administering well designed nursing studies with large sample numbers and high quality and similar methods can be suggested in order to assess the effectiveness of acupressure in postoperative pain management.

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Keywords: Acupressure;postoperative pain;integrative therapy



One session acupuncture treatment for smoking addiction

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Aim: Smoking is one of the most important known causes of mortality and morbidity. The aim here is to discuss a case who consulted to us with a diagnosis of smoking addiction and who quit smoking addiction with the help of acupuncture.

Method and Results: A 58 year-old male patient, who had been smoking a packet/day for about 40 years. The patient, who did not have a systemic disease, consulted voluntary to quit smoking. Before the treatment, he was asked to come to the first session following a 24-hour period without smoking. The patient had a systemic examination, tongue, pulse, VAS (vasculer autonomic singulair) , laterality examinations and ear detection. Firstly, between the Darwin and Cervical-1 point needled using four gold, one steel and two silver needles for 30 minutes. Agression and Cranial parasympathetic points in the same ear were needled with silver needles and other basic points were needled using steel needles. And after, Zero, Pharynx, Posterior hypothalamus, Amygdala, Aggression, Antidepresant and Shenkman points in the dominant ear were needled with magnetic needles. In the other ear, the Prefrontal region was needled. Then the patient was given some recommendations and he was seen first a week later and after a mont and a year later. During this process, the patient, who did not smoke or have any cravings for smoking was followed.

Conclusions: Attempts to quit smoking in tobacco addition, which is one of the most important health problems all over the world. Especially, the homeostatic, immunity increasing and sedative effects of acupuncture are utilized in addiction treatment. As seen in our case, the patient was helped to quit smoking addiction in a controlled way through acupuncture treatment.

Keywords: acupuncture;smoking;addiction



The relation between the diagnosis in oriental medicine and facial cosmetic trouble.

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Objective

Cosmetic acupuncture has been established as a field of acupuncture. It is well known that for cosmetic troubles, acupuncture on the body is necessary as well as on the face. However, there are little evidence to care the body for facial trouble. In this study, we examined the relationship between the five organs in oriental medicine and the trouble of beauty using the Five Score[®].

Method

The five-score[®] and the questionnaire about facial cosmetic trouble have been set up online answering system(the Google form), and asked women who agreed to the survey in November 2017 to answer. There are nine items on the face of the beauty of the face: rough skin, acne, acne scars, dry skin, stickiness, dark circles under the eyes, swelling, dullness, pores that stand out..

Result

243 answers were collected. No significant correlation was found between cosmetic troubles of the face and evidence of the disease of the five organs. On the other hand, a certain correlation was observed between lung and swelling (0.215), dryness (0.225), dullness (0.23) and pores (0.206) between cosmetic troubles of the face and the total score of each organ.

Discussion

In the current survey, there were no direct relationships between facial cosmetic troubles and the 5th disease certificate. It might be because most people have more than one complaint about their face. The fact that many lungs were related was thought to have been affected by the season (November).

Conclusion

In this study, there are no significant relationship between facial trouble and diagnosis by oriental medicine. However some troubles tend to relate with lung. In the future, we would like to try in other seasons and different age groups and investigate again.

Keywords: diagnosis in oriental medicine;facial cosmetic troubles;cosmetic acupuncture



Auriculotherapy in the treatment of fibromyalgia: evaluation of the consumption of analgesics and anti-inflammatory drugs

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Abstract:

Context: Fibromyalgia is one of the Non-Transmissible Chronic Diseases (NTCD). Its treatment deserves special attention, finding in Complementary Alternative Medicine (CAM) a qualified support. Auriculotherapy is one of the practices that can be used in public health system, because it is easy and cheap to implement. Thus, it is very important to evaluate the efficiency of this CAM in the public health system routine. **Objective:** To evaluate the analgesic effect of auriculotherapy for the treatment of fibromyalgia, and the consumption of analgesics and anti-inflammatory drugs. **Method:** Thirteen women, aged between 38 and 64 years, clinically diagnosed with fibromyalgia were selected. They agreed to try to discontinue analgesic and anti-inflammatory drugs under medical supervision. Patients received Vaccaria seeds in one auriculotherapy session a week, for eight weeks. The auricular points selected were: shen men, kidney, autonomic nervous system, analgesia, muscle relaxation, sub-cortex and local pain points. The pain was evaluated by the Visual Analogical Scale (VAS) and the McGill Pain Questionnaire. The return of medication use was registered by the outpatient health team. **Results:** The use of analgesic/anti-inflammatory drugs was 76.81% lower when compared to the same period without auriculotherapy. Accordingly, VAS was reduced by 39.2% and the McGill Pain Questionnaire showed a decrease of 48.62%. **Conclusion:** The decrease of drug use among the subjects treated with auriculotherapy was remarkable. However, the reduction of pain perception by the VAS scale was not so expressive. Auriculotherapy is an easy-to-apply and effective CAM method, capable of reducing the cost of fibromyalgia treatment in the public health system.

Key words: auriculotherapy, medication, complementary alternative medicine (CAM), fibromyalgia, public health system.



Energy profile with ryodoraku electrodiagnosis of acupuncture in patients with spinal cord injury.

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Context: Spinal cord injury (SCI) is a major concern and challenge for the professionals involved, patient, family and the state. As much as modern science has evolved in recent years, the SCI patient still suffers from the limitations imposed by the losses, some of them irreparable. Acupuncture has been occupying space in the neurological area, however with great need for research and understanding. Ryodoraku is a contemporary resource for evaluating meridians. **Objective:** To describe the energy profile of the meridians of patients with SCI. **Methodology:** 21 individuals with spastic paraplegia aged 18 to 58 years (mean \pm 41.57 years); 57% men and 43% women. recruited at the University Hospital of the State University of Londrina (Brazil). They were evaluated by the ryodoraku technique, with NKL electrodiagnostic equipment, OMNIPAX model, before the usual physiotherapy sessions. Demographic data, history of each patient were used directly from the hospital database. **Results:** The average bioimpedance of the sample was 26 Ω . The 86% of the population presented energy imbalances. Of which 74% of these imbalances was characteristic of energy deficiency pattern. There were also alterations in ryodoraku cartography traces, typical “high-low” imbalances in 67% of the sample. The meridians that most appeared altered were gallbladder (GB), bladder (BL), spleen (SP) and kidney (KI). The sum of the imbalances in these meridians make up 50% of all imbalances. **Conclusion:** Energy imbalance due to deficiency, preferentially affecting meridians BL, GB, KI and SP. **Key words:** ryodoraku electrodiagnosis , acupuncture, spinal cord injury.

**A Stereological Study of the Growth Plate Volume in Adolescent Rats Stimulated by Laser Acupuncture**

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Objectives. Previous studies have demonstrated that laser acupuncture (LA) has positive effect on longitudinal bone growth by changing the histological growth plates. The aim of the study was stereologically to assess the growth plate volume in adolescent rats stimulated by LA.

Methods. Forty male wistar rats, aged 3 weeks weighing more than 40 g were divided randomly into two groups, A and B, each receiving LA for 10 days and 15 days, respectively. There were four subgroups in each group: control (C), GV20, ST36 and GV20+ST36. The rats were stimulated by LA using the KX Laser GX-2000B (Kangxing), a semiconductor-based low-level laser therapy (LLLT) device emitting a cold red laser (635–680 nm/5 mW) for 60 seconds (0.3 J/cm²). After treatment, the rats were sacrificed and tibia were removed from other tissue. The proximal tibia was taken, soaked in the formalin and decalcified. Then, it was dehydrated in graded alcohols and embedded in paraffin blocks. The paraffin blocks were sectioned longitudinally using a Leica microtome (RM2125, Germany) at a thickness (t) of 3 µm. For stereological analysis, we used light microscope with scanner (Olympus BX61VS) and software from Visiopharm Denmark. The growth plate volume was assessed by measuring surface area with nucleator method. The data were statistically analyzed by ANOVA.

Results. All of the growth plate volume in the treatment groups were more than C and the highest volume was ST36 subgroup, in both 10 days and 15 days. ANOVA showed that there were not differences between subgroups significantly.

Conclusion. Laser acupuncture on GV20, ST36 and both GV20+ST36 increased growth plate volume in adolescent rats, however the increasing did not differ significantly.

KEY WORDS: laserpuncture, growth plate volume, adolescent rat, stereology.

**The Evaluation of Acupuncture on Reproductive Outcome on the Oocyte Retrieval in IVF**

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Objective:

Evaluate the effects of electro-acupuncture on the reproductive outcome in IVF compared to standard conscious sedation.

Material and Method

60 women were recruited and randomized into two groups, either group A (Electro-acupuncture) or S (routine conscious sedation by intravenous Pethidine and Midazolam). Patient's age, body mass index (BMI), years of marriage, duration of procedure and recovery time were obtained. Outcomes included the number of pregnant, biochemical, miscarriage and live birth, heart rate, blood pressure. Outcome measurements were obtained at three time points: 30 minutes before OR (Oocyte Retrieval), during OR, and 30minutes after OR. Data was analyzed using Mann-Whitney U and Chi-Square Test. Acupuncture points: Hegu, Neiguan, Luanchao, Qihai, Guanyuan, Shenshu, Ciliao.

Result

28 of 30 women received electro-acupuncture, 2 women withdrew. 30 women underwent routine conscious sedation. Total number of pregnant women in group A is 15/28(54%), in S is 11/30 (37%); live birth in A is 12/28 (43%), and 08/30 (27%) in S; Biochemical in A is 2 and 3 in S; 1 Miscarriage in A and non in group S. The Blood Pressure and Heart Rate of women in group A maintained throughout the procedure (BP systolic p = 0.280, diastolic p = 0.589, HR: p=0.001) while those women in group S experienced a drop significantly (BP systolic p < 0.001, diastolic p = 0.001, HR: p < 0.001). Group A no need recovery time but Group S need 60-120mins after procedure. There was no significant difference in age, BMI, year's marriage, duration of procedure between both groups.

Conclusions

The study shows on the reproductive outcome, the women in acupuncture group are better result in pregnant and live birth amount than sedation group , but there are no significant difference, P = 0.152 and P=0.154 . Maybe it is due to the small simple size.

Keywords: reproduction;electro-acupuncture;conscious sedation;OR(Oocyte Retrieval);IVF



The effects of sacral acupuncture stimulation about cyclophosphamide (CYP)-induced frequent urination model rat.

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[Purpose]

To investigate the effects of sacral acupuncture on cyclophosphamide (CYP) induced urinary frequency in conscious rats.

[Method]

A total of thirteen female Sprague-Dawley rats (246.2 ± 18.5 g) were used. CYP (150 mg/kg) was administered intraperitoneally 48 hours before cystometrography (CMG) to induce urinary frequency. The animals divided into two groups. The group that urinated ≥ 4 times without intervention was the control group, and those that urinated ≥ 4 times after intervention with sacral acupuncture was the ACP(acupuncture) group. CMG was measured by injecting saline into the bladder (0.04 ml/min) without anesthesia. Four CMG parameters were measured as follows: the intercontraction interval (sec) and the threshold pressure, basal pressure, and maximum pressure (cmH₂O). All data are expressed as the mean \pm standard error. T-test was used to compare the CMG parameters between the two groups. P-values of less than 0.05 were considered significant.

[Result]

There was no difference in intercontraction interval, threshold pressure, maximum pressure, and basal pressure between the groups before intervention. The intercontraction interval did not change in the control group (285.4 ± 52.1 to 302.1 ± 38.4 sec, $p = 0.7$), whereas in the ACP group, a significant increase of the intercontraction interval was observed (248.0 ± 22.2 to 577.5 ± 81.9 sec, $p = 0.004$). The threshold pressure decreased significantly in the control group (14.8 ± 2.6 to 12.5 ± 1.9 cmH₂O, $p = 0.04$), but no difference in the ACP group (13.9 ± 1.6 to 13.4 ± 1.6 cmH₂O, $p = 0.4$). Basal pressure did not change in the control group (12.3 ± 2.4 to 10.5 ± 1.9 cmH₂O, $p = 0.1$) but significantly decreased in the ACP group (11.8 ± 1.6 to 9.4 ± 1.5 cmH₂O, $p = 0.03$).

[Discussion and Conclusion]

This study results that sacral acupuncture stimulation increased intercontraction interval on CYP induced urinary frequency rats.

Keywords: cyclophosphamide (CYP);urinary frequency;rat;acupuncture

**Evaluation of acupuncture for obstructive sleep apnea: A literature review**T.H. WEI¹¹*China Medical University Hospital, Chinese Medicine, Taichung City 404, Taiwan R.O.C.*

Objectives: This study aims to determine the validity and clinical effect of acupuncture as an alternative treatment of obstructive sleep apnea.

Methods: A systematic literature search was conducted in six databases including PubMed, ClinicalKey, Cochrane, DynaMed Plus, CJTD, and CNKI. For English databases, we used search terms as (“sleep apnea, obstructive” or “sleep hypopnea” or “upper airway resistance sleep apnea syndrome”) and (“acupuncture” or “acupoint” or “acupressure” or “acustimulation”) and/or “quality of life”; for Chinese databases we took [“zhenjiou” or “zhen ci”] and [“shuimian” and (“huxizanting” or “ditongqi” or “zuse” or “han zheng”)]. Clinical articles between 2003 and 2019 where acupuncture was the main intervention for obstructive sleep apnea were included. Uncontrolled clinical trials and animal studies were excluded. Primary outcomes were the statistical difference of Apnoea-Hypopnoea Index (AHI), O₂ saturation (SaO₂), the Epworth Sleepiness Scale (ESS) and the Pittsburgh Sleep Quality Index (PSQI) before and after treatment. The secondary outcome was the effective rates of different treatments.

Results: Of the retrieved 138 clinical articles, 46 meet the requirement. Continuous positive airway pressure (nCPAP) had a prominent immediate effect on reducing AHI and improving SaO₂ ($p < 0.001$), but cannot maintain the clinical effect without the device. Both manual acupuncture (MA) and electroacupuncture (EA) had a statistically significant effect on reducing AHI and improving SaO₂ ($p < 0.05$), although with a lesser extent when compared to nCPAP regarding the immediate effect. The long-term improvement in obstructive sleep apnea parameters favoured acupuncture, which presented reduced AHI at the 2-month follow-up. The effective rate of nCPAP, acupuncture (including MA and EA), and auricular acupuncture was 90.91%, 76.36%, and 56.70% respectively. No adverse events associated with acupuncture was documented.

Conclusions: These findings indicate that combining acupuncture to current guideline treatment me potential benefit of in the long-run for managing obstructive sleep apnea.

Keywords: Acupuncture; Sleep apnea, Sleep hypopnea; Alternative, Complementary treatment

**THE EFFECT OF LIGHT COLOR ON THE BEHAVIOR OF MEDICAL LEECH
(*Hirudo medicinalis*) DURING HIRUDOTHERAPY****Mesmarian M.A.¹, Ghasemi A.², Modaresi M.¹, Toghyani M.¹, Farahani MR³****1- Department of Animal Sciences, Isfahan (Khorasgan) Branch, Isfahan, Iran****2- Department of Veterinary, Isfahan (Shahrekord) Branch, Isfahan, Iran****3- Fidar Kouroosh Farahan Company, Arak, Iran****Corresponding Authors: alimesmarian1988@gmail.com**

Introduction: The color and light intensity has important effect on saliva secretion and biting in leeches. Environmental lights could have remarkable effect on hirudotherapy process in patients. The aim of present study was to evaluation different light colors on behavioral performance in medicinal leech.

Materials and methods: A total of 100 mature medicinal leech (*Hirudo medicinalis*) was selected. The leeches were randomly distributed between 4 treatments (blue, red, yellow and green lights). The light was met by 60 W LED lamps with 20 and 40 lux. 10 patients suffered from varicose veins were selected and the leeches' behavior in different light colors was recorded by camera (This experiment was conducted in Fidar Koroosh Farahan, International Company).

Results: The results showed the leeches treated with blue light and 20 lux had more saliva secretion than other treatments and lowest saliva secretion was belong to leeches treated with red light. The biting behavior was lowest in green light and was highest in red and yellow light. The saliva secretion in 40 lux intensity was more in green and blue light and lowest saliva secretion was observed in yellow and red light. The biting behavior in blue light was high and in yellow and green light was low. As a conclusion the obtained results showed that light color and intensity had direct effect on improvement of hirudotherapy.

Keywords: Leech medicinal, Light, Color, Intensity, Bite, Saliva.



Overviewing Cochrane Database of Systematic Reviews for recent trend of acupuncture research

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Objective: The aim of this study was to investigate the recent trend of clinical acupuncture research in world wide by reviewing Cochrane Database of Systematic Reviews (CRs).

Method: We extracted CRs from the database using the keyword “acupuncture” in April, 2018, then selected CRs which investigated clinical effects of acupuncture. The types of diseases were classified by International Classification of Diseases (ICD-10). We surveyed the number of Randomized Controlled Trials (RCTs) evaluated in each CR, the number of patients, the effectiveness and its quality of the evidence. Moreover, we confirmed the countries where every evaluated RCTs were conducted.

Results: 149 CRs were extracted by the keyword, and we selected 45 CRs of acupuncture clinical trials. 10 CRs investigated the effectiveness of acupuncture for patients in pain condition. The number of RCTs evaluated by 45 CRs was 664 and the number of patients was 75,809. 45 diseases were classified into; Mental and behavioural disorders (7), Diseases of the nervous system (7), Diseases of the musculoskeletal system and connective tissue (6), Diseases of the genitourinary system (6) and other (19). It was confirmed that 36 countries conducted acupuncture RCTs in total. Chinese RCTs were most evaluated (317 RCTs out of 661), followed by American (64), English (38), German (35), Taiwanese (29). Acupuncture was effective with high quality of the evidence for chronic low back pain. Acupuncture was effective with moderate quality of the evidence for smoke cessation, schizophrenia, migraine, tension type head ache, stroke, and fibromyalgia.

Discussion: CRs of acupuncture were mostly conducted in certain types of diseases. It seemed acupuncture was effective with higher quality of the evidence for pain condition than other. It was suggested that lack of well-designed RCTs of acupuncture lead quality of the evidence of its effectiveness lower.

Keywords: Cochrane Review;Acupuncture;Randomized controlled trial;ICD-10;quality of the evidence

**Traditional Chinese Medical differentiated therapy on Opportunistic Fungal Infection of 59 Patients with immuno-compromised syndrome**

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Object To acquire a better therapeutic prescription against opportunistic mycoses for patients with immuno-deficient / -inhibitory diseases, the analysis on etiological fungi purified from the skin- mucous membrane lesions of diagnosed 59 patients with mycoses and then the effective study of Traditional Medical (TCM) differentiated treatment including acupuncture-moxibustion (acu-Mox.) and herbs on them were made.

Methods It included the purifying- test of fungal species from diagnosed 59 patients' sample (lesions, serum -cerebral-spinal fluid and excretion) in the laboratory, the compared relationship between etiological fungi and initial disorders that caused the secondary mycoses, TCM differentiated diagnoses and prescribed acupuncture-Mox., and herbal treatment on them, and finally statistical analysis of the pre- and post- treatment (See Tab.1, Tab.2, Fig.1, Fig. 2, Fig.3 and Fig.4).

Results The statistical analysis of the results between pre- and post- TCM differentiated therapy on each group of 59 patients with opportunistic mycoses showed that the effective cure percent of 15 cases with malignant tumour was $95.03 \pm 0.53\%$, of 21 cases who took long-term corticosteroid and antibiotics medication $96.05 \pm 1.32\%$, of 5 cases with Kwashiorkor disease- like malnutrition $93.02 \pm 0.52\%$, of 3 cases with HIV infection $98.05 \pm 1.37\%$ and of 15 cases with type 2- Diabetes mellitus $91.07 \pm 1.22\%$, and all groups acquired significant improvement of their health state after finished the ant-fungal treatment including antifungal chemical and TCM differentiated therapies (See Tab.3).

Conclusion The results suggested that TCM differentiated therapy worked on not only eradicating external and internal pathogenic factors of antifungal treatment, but also improvement of physical (anti-pathogenic-*Qi*) righteousness-related systemic health. So it may be a reasonable choice for clinically anti-opportunistic fungal alternative-therapy on those with secondary mycoses that were based on TCM diagnoses such as Fatigue syndrome, Deficiencies of blood-*qi* immunity, Imbalance between *yin* and *yang* biodiversity and dysfunction of *zang-fu* organs.

Key words Mycoses, TCM differentiated therapy, Acupuncture-Mox, Herb.

Keywords: Opportunistic Fungal Infection;TCM differentiated therapy;Acupuncture-Moxibustion;Herbal medicine

**Clinical Study on Relationship between Fading Change of Cutaneous Hyperemia-erythema after Cupping on Back-shu Acupuncture Points and Serum Cholesterol /HDL-C Ratio level**

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Object To observe the relationship between fading of Traditional Chinese medical (TCM) cupping-led cutaneous hyperemia-erythema (CHE) on the acupuncture points (acu-points) of back-shu zone and serum cholesterol / high-density lipoprotein-C ratio (SCR), and to confirm the reciprocity among CHE, SCR and TCM tests, and the investigation on the earlier formation of arteriosclerosis in cutaneous micro-artery web resulted from high SCR

Methods 61 patients took cupping on the spinal vertebra acu-points, BL13, BL43, BL15, BL17, BL20, BL18, BL23, BL25, BL52, EX-B1, etc. All patients had to take the serum exam of cholesterol and high-density lipoprotein-C (HDL-C) and complexion, tongue and pulse before cupping, and the patients divided into two groups, normal health (SCR<6.0) and Cardiac-vascular diseases-focused risk (CVDR) (SCR>6.0), and the fading percent and score of CHE were statistically analysed with χ^2 test between groups for significant difference ($p<0.05$). See Table 1 and Table 2.

Results The fading percent and score of CHE in each duration and total record were showed as below: in normal health (SCR<6.0), 86.03 \pm 1.08% in 3rd day, 98.05 \pm 0.53% in 7th day (1st week) and totally meant for 98.26 \pm 1.25%, and in CVDR group (CVDR >6.0), 42.06 \pm 3.05% in 3rd day, 68.12 \pm 0.62% in 7th day and totally meant 63.04 \pm 2.05%, and statistical significant difference ($p<0.05$) and relative index (R) =0.92. See Table 3, Fig. 1, Fig. 2, Fig. 3 and Fig. 4.

Discussion The results of observation suggested that those with higher SCR will surf from TCM syndrome, severe Qi-blood stagnation in richer meridian such as food Taiyang bladder, and the specific cupping-led reaction may be a novel examination way for earlier formation of cutaneous Atherosclerosis, vascular sclerosis and even internal artery in important organs.

Keywords: Serum cholesterol, ;Qi-blood stagnation; Blood stasis; Cupping;TCM test



Acupuncture Treatment Of Severe Jaw Pain In Ehlers-Danlos Syndrome

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Objective: Ehlers-Danlos syndrome (EDS) is a disorder of connective tissue due to mutations in the gene coding for collagen. Affected individuals suffer from hypemobility and hyperextensibility of joints and connective tissues. A 29-year old male patient with clinical diagnosis of EDS and severe bilateral jaw dislocation, as determined by previous imaging study, reported to my clinic with associated jaw pain (pain scale “6-8”/10) for the past five years. He also complained of low back pain (pain scale “3-5”/10), with tinnitus, vivid dreams, night sweat, right lateral leg numbness and right-sided headache. He had been suggested Vicodin and surgery, but had refused both. This study tested the hypothesis that acupuncture relieves jaw pain associated with severe jaw dislocation in EDS.

Material: Acupuncture needles.

Method: Patient was treated twice a week for the first four weeks using distal acupuncture. The face area of Foot-Yangming Stomach channel was targeted with points below knees and elbows of: Hand-Yangming Large Intestine, Foot-Jueyin Liver, Foot-Taiyin Spleen, and Foot-Yangming Stomach channels. Points in Hand-Shaoyang Sanjiao, Foot-Shaoyang Gallbladder, Foot-Shaoyin Kidney, and “lateral Stomach” (between Stomach and Gallbladder) channels were also identified by palpation. Needles were retained for 15 min, followed by back treatment targeting the Back-Shu points of Foot-Taiyang Urinary Bladder channel. Treatment frequency was reduced over the next three months to once a week, then to once every two weeks.

Results: Patient reported complete relief of jaw pain (“0”/10) after 6th session (Day 21 into treatment), as did reduced headache. Thereafter, relief of jaw pain continued to be complete (“0”/10) after every session from 7th to 19th (Day 25 to 126 into treatment). Flare up between sessions also decreased from “5-7”/10 before to “0-4”/10 after 6th session.

Conclusion: Acupuncture relieves pain associated with severe jaw dislocation in EDS.

Keywords: Ehlers-Danlos syndrome (EDS);jaw dislocation;pain;acupuncture



A Comparative Study of Needle Force in Acupuncture training Model

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Objectives: In this study, we quantitatively evaluated the needle forces using needle insertion-measurement system and compared the needle sensation of each acupuncture practical model.

Methods: After inserting acupuncture with a sensor to six models, a lifting-thrusting motion was implemented using the needle insertion-measurement system. The needle force was measured repeatedly, and the measurement was analyzed based on the modified Karnopp friction model for a comparison of friction coefficients. After the insertion, practitioners did lifting-thrusting manipulations. They quantified the similarity of needle sensation with VAS (Visual Analogue Scale).

Results: When friction force and coefficients of friction in five different models were compared with a porcine shank model, all five models were significantly different from a porcine shank model, cotton and apple showing the closest frictional values to that of a porcine shank model. In the Cp and Cn values of cotton and in the Cp values of IM injection pad, there was no statistically significant difference. The similarity of the needle sensation between the porcine shank and five models was the highest in the apple, and overlapping papers was the lowest.

Conclusions: This study quantitatively compared the physical forces in the practical model when implementing lifting-thrusting manipulations, using a needle insertion-measurement system. We suggest that a reproducible exercise model that reflects the characteristics of various human tissues, such as viscoelasticity or strength, needs to be further developed. This will contribute to establishing standardized acupuncture practice training.

Key words: acupuncture practical model, quantifying measurement, needle force, needle sensation