

The 2 nd JSAM International Symposium on Evidence-based Acupuncture

Acupuncture Treatment for Low Back Pain in China

Liu Bao yan China Academy of Chinese Medical Sciences, China

Abstract

Low back pain can be classified into specific low back pain and nonspecific low back pain, more than 90% of falls into nonspecific low back pain. A variety of factors can lead to low back pain, many of epidemiological data show that 60-80% of the adults have been suffered from it at any one time.

Prescribe treatment should choose different therapeutic of acupuncture and according to differentiate syndromes and signs for course of disease, differentiation of meridians and collaterals, differentiation pattern of syndromes. Mainly methods of treating acute low back pain are acupuncture specific acupoints, ear acupuncture and electroacupuncture, combined with patients exercise for lumbar. Mainly methods of treating chronic low back pain are acupuncture, fire needle and acupuncture combined with cupping therapy.

The method about how to choose acupoints to treat low back pain by acupuncture mainly includes local acupoints, Ashi acupoints, distant acupoints along meridians and collaterals and specific acupoints.

Acupuncture has obvious effect of relieve pain, it showed that acupuncture treatment is obviously superior to any other single method or drug. Meanwhile, no considerable side effects were found in the clinical application, improving therapeutic effect of acupuncture and obtaining high quality report related to clinical study in future.

Key words: LBP, Acupuncture, treatment, Acute LBP, Chronic LBP

Introduction

Low back pain includes pain happens below costal margin or 12 ribs and above of buttock fold, which is currently a common disease in clinical, including many diseases caused syndrome of intervertebral disc degeneration, lumbar intervertebral disc herniation, lumbar muscles and tendons strain, sprain and adhesion, scoliosis and spondylolisthesis caused spinal posture and execise^{1,2)}. According to etiology definited and nondefinited, low back pain can be classified into specific low back pain, more than 90% of falls into nonspecific low back pain^{3,4)}.

Many of epidemiological data show that 60-80% of the adults have been suffered from it at any one time, which is second common clinical symptoms and being inferior to upper respiratory disease currently⁵⁾. Low back pain will have an obvious increase after 30 years

old and up to summit between 41 and 55 years old. Low back pain have been a commonly symptoms which affected people health and it is one of main reasons to make people loss of self-care ability and delay work.

Etiology of low back pain includes many factors and complicated, it is not entirely definited now. Clinical diagnosis of low back pain lack of unified standard⁶⁾. There are many ways of treating low back pain but the lack of special effective, a well-recognized methods, which mainly include acupuncture, traction, massage, physiotherapy, drug (peroral and local), Traditional Chinese Drug and exercise therapy and so on⁷⁾. Acupuncture not only has a long history been used to treat low back pain, but also has many other advantages including good curative effect, no side effects, simple manipulation and low payment. Acupuncture can relieve pain and regulate the meridian-collaterals system which mainly transport the qi and blood, nourish the whole body, and maintain

the harmonious balance of all the functions and activities of the many parts of the body, remove cold and eliminate damp, activate blood circulation. Acupuncture has a good therapeutic effect for treating low back pain, according to scholars research results show that acupuncture is superior to physiotherapy, and above 90.0% total effective of treatment low back pain by acupuncture⁸).

Prescribe treatment should choose different therapeutic of acupuncture and according to differentiate syndromes and signs for course of disease, differentiation of meridians and collaterals, differentiation pattern of syndromes.

Differentiation course of disease

Acute low back pain is less than or equal to 4 weeks, subacute low back pain is more than 4 weeks and less than or equal to 12 weeks, chronic low back pain is more than 12 weeks.

Differentiation of meridians and collaterals

The pain of middle lumbar indicates the disease of du meridian, and the pain of both lateral lumbar indicates the disease of foot-taiyang meridian, the pain of large area and location without definited indicates the disease of foot-shaoyin kidney meridian.

Differentiation pattern of syndromes

· Low back pain due to kidney deficiency

Chronic onset, dull pain, accompanied by dizziness, blurred vision, tinnitus, accompanied by restlessness, insomnia, soreness and weakness of the lower back and knees, and a thready pulse.

· Low back pain due to cold and damp

A history of invading by cold and damp, soreness, pain, heavy sensation, stiffness and impairment of the lumbar motor region, aggravated in cloudy, rainy, cold or windy days, a pale tongue with white and slippery coating, a wiry-slow pulse.

· Low back pain due blood stagnation

A history of injury, more pain evoked by fatigue, fixed pain, moring stiff.

Fixed pain in local lumbar area, a dark and purplish tongue, and a wiry or hesitant pulse.

1. Acute low back pain (including subacute low back pain)

Acute low back pain is a very common acute pain symptom in clinical, often sudden onset, severe pain, lumbar rigidity, not turning and stretching, pitching inconvenience, moving should lead to severe pain, which caused by acute muscle sprain of lumbar and joint disorder of lumbar vertebrae and so on.

Methods

Mainly methods of treating acute low back pain are acupuncture specific acupoints, ear acupuncture and electroacupuncture, combined with patients exercise for lumbar.

Acupuncture specific acupoints

Yaotongdian (EX-UE7)

Location: On the dorsum of the hand, at both side of the tendon of the m. extensor digitorum communis, 1 cun distal to the transverse crease of the dorsum of the wrist, two points in all one hand, which average treat three times, combined with patients exercise for lumbar.

Shuigou (DU26)

Location: On the face, at the junction of the upper 1/3 and middle 1/3 of the philtrum, which average treat two times, combined with patients exercise for lumbar.

Houxi (SI3)

Location: When loose fist is made, the point is proximal to the head of the 5 th metacarpal bone on the ulnar side, at the junction of the red the red and white skin, which average treat four times, combined with patients exercise for lumbar.

Zanzhu (BL-2)

Location: In the depression on the medial end of the eyebrow, which average treat three times, combined with patients exercise for lumbar.

Yintang (EX-HN3)

Location: On the frontal part, midpoint between the medial ends of the two eyebrows, which average treat four times, combined with patients exercise for lumbar.

Ear acupuncture

Ear-Shenmen (MA-TF 1)

Location: at the superior aspect to the bifurcating point between superior antihelix crus and inferior antihelix crus

Subcortex (MA-AT)

Location: On the medial aspect of the antitragus

Adrenal gland (MA-T)

Location: At the top of the lower protuberance on the border of the tragus.

Lumbosacral Vertebrae (MA-AH)

Location: A curved line from helixtragic notch to the branching area of superior and the branching area of superior and inferior antihelix crus can be divided into 5 equal parts, the upper 2/5 is Lumbosacral Vertebrae.

Kidney (MA-SC)

Location: On the lower border of the inferior antihelix crus directly above Small Intestine.

Ear acupuncture are usually retained for 30 minutes, during retention of the needles, walking and exercise to lumbar patients.

Electroacupuncture (distant acupoints along meridians and collaterals)

Main acupoints: Weizhong (BL40), Yanglingquan (GB34), Chengshan (BL57), Kunlun (BL60)

Manipulation

After the needles inserted and the qi sensation has arrived, connect each group of outlets to the handles of the needles, the duration of stimulation is 10-15 minutes, combined with patients exercise for lumbar.

Modification

Cold and damp: Moxibustion location of low back pain

Blood stagnation: Punctured to cause bleeding and cupping therapy for Ashi acupoints

2. Chronic low back pain

Chronic low back pain is a very common chronic pain symptom in clinical, it is longer course of disease and pain recurrent attacks, which caused by many diseases mainly include lumbar muscle strain, lumbar intervertebral disc herniation, lumbar intervertebral disc bulge, lumbar hyperosteogeny, lumbosacral area soft tissue injury, lumbosacral area fasciitis, the transverse process of third lumbar vertebra syndrome and lumbar spinal stenosis

Methods:

Mainly methods of treating chronic low back pain are acupuncture, fire needle and acupuncture combined with cupping therapy.

Acupuncture Prescription

Select acupoints of local acupoints, Ashi acupoints as main acupoints and distant acupoints along meridians and collaterals as auxiliary acupoints.

Main acupoints: Dachangshu (BL25), Jiaji (EX-B 2), Shenshu (BL 23), Ashi and Weizhong (BL40)

Modification

Kidney deficiency: Mingmen (DU4), Zhishi (BL52) Cold and damp: Yaoyangguan (DU3) and Guanyuanshu (BL26)

Blood stagnation: Geshu (BL 17)

Fire needle

Prescription

Select acupoints of local acupoints, Ashi acupoints as main acupoints and distant acupoints along meridians and collaterals as auxiliary acupoints.

Main acupoints: Dachangshu (BL25), Shenshu (BL23) and Ashi

Modification

Yaoyangguan (DU 3), Jiaji (EX-B 2)

Acupuncture combined with cupping therapy

Acupuncture combined with cupping therapy treatment low back pain is obviously better than acupuncture.

On the whole, the ways of treating low back pain mainly include acupuncture, electroacupuncture, fire needle, ear acupuncture, awn needle, acupuncture with warmed needle, hydro-acupuncture, moxibustion, acupuncture combined with other methods, including traction, massage, acupotomology, cupping therapy, Traditional Chinese Drug and so on.

The method about how to choose acupoints to treat low back pain by acupuncture mainly includes local acupoints, Ashi acupoints, distant acupoints along meridians and collaterals and specific acupoints, such as Yaotongdian (EX-UE7), Jiaji (EX-B2), Yaoyangguan (DU3), Shenshu (BL23), Dachangshu (BL25), Guanyuanshu (BL26), Geshu (BL17), Mingmen (DU4), Zhishi (BL52), Ashi, Huantiao (GB30), Chengfu (BL 36), Weizhong (BL40), Yanglingquan (GB34), Chengshan (BL57), Zusanli (ST36), Kunlun (BL60), Taichong (LR3), Zanzhu (BL2), Yintang (EX-HN3), Shuigou (GV26), Houxi (SI3).

Different therapeutic effects of acupuncture treatment low back pain were caused by different etiology. Low back pain which caused by rheumatoid and lumbar muscle strain has the best therapeutic effect treated by acupuncture. The one caused by lumbar intervertebral disc herniation and lumbar spondylopathy can be relieved symptoms obviously and the one caused by acute lumbar sprain has the immediate effetion treated by acupuncture.

As far as the one caused by torn ligament arouding lumbar small joints can not be treated effectively. The one caused by visceral diseases should treat the visceral diseases first. And the others caused by tuberculosis and vertebra and tumor are not indications for acupuncture. Simultaneously, acupuncture treatment accompanied by moderate physical exercise will get satisfactory clinical therapeutic effect.

Acupuncture has a good therapeutic effect for treating low back pain, it showed that acupuncture treatment is obviously superior to any other single method or drug. Meanwhile, no considerable side effects were found in the clinical application. But low back pain treat by acupuncture show mainly experience of expert which lack of RCT high quality clinical research reports, not unified standard of clinical diagnosis and clinical efficacy evaluation, improving therapeutic effect of acupuncture and obtaining high quality report related to clinical study in future.

References

- He C Q, Ding M F. Clinical evidence-based with nonspecific low back pain of rehabilitation treatment. Chinese Journal of Clinical Rehabilitation. 2006, 6(14): 2034-46.
- Zhang Z Y, Niu S Q, Li X W. Research progress in anatomic foundation and clinical diagnosisand treatment of low back pain. Journal of Jilin Military Medical College Fourth Military Medical University. 2003, 25(4): 231-5.

- 3) Sun S F, Li X C, Shi R H, et al. Etiological factor of nonspecific low back pain. Journal of clinical medicine. 2003, (5): 54-6.
- Jin A M. Etiological treatment of nonspecific low back pain. Journal of First Military Medical University. 2002, 22(12): 1057-60.
- He X Q, Xu Y Q, Zhu Y L. Research progress of epidemiologic in low back pain. International Journal of Orthopaedics. 2008, 29(2): 115-6, 122.
- Luo S. Etiology and diagnosis procedure of chronic low back pain in clinic. Journal of Chinese Community Doctors. 2008, 24(17): 17.
- Ma W T, Zheng B S. The advances of diagnosis and therapy research of chronic low back pain. Journal of Pain Clinic. 2009, 5(1): 65-8.
- He Y, Shang Q X. Research progress of acupuncture treatment acute low back pain in recent years. Shandong Journal of Traditional Chinese Medicine. 2001, 20(6): 382-3.