

A HANDBOOK FOR TREATMENT OF ACUTE SYNDROMES BY USING ACUPUNCTURE AND MOXIBUSTION

By Prof. Mingqing Zhu
Tr. by Dale Chow King, D.D.S.; M.Sc.



急症針灸治療手冊

朱明清教授著 曹棟華博士譯

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by Using
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Translated by Dale Chow King

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Prof. Zhu presented his treatment demonstration at the First International Conference of Acupuncture and Moxibustion, held in Beijing in November 24, 1987. Right after the treatment, the patient with paralysis due to apoplexy was able to stand up and walk. Representatives from over 50 countries and areas were amazed and admired the wonders with warm applause.



Prof. Zhu treated the patient in U.S.A.

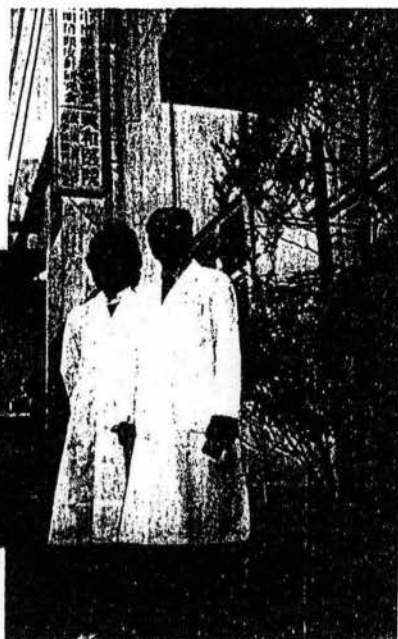


In answer to the invitations of the Certified Doctors of Acupuncture and Moxibustion Association of California and Research Institute of Traditional Chinese Medicine, Prof. Zhu gave lectures on the

Prof. Zhu gave a lecture at the Japanese Edition Publishing Commemoration Meeting of Zhu's Scalp Acupuncture in Japan.



Research Association of Zhu's Scalp Acupuncture was established in Japan. A group photo of Prof. Zhu and Dr. Chau, president of the head association, before the gate of the association.



On their visit to Taiwan, Prof. Zhu and President Chau were warmly welcomed by the colleagues in the field of acupuncture and moxibustion at the airport.



On the treatment demonstration at the Affiliated Hospital of Traditional Chinese Medicine College during to his visit Taiwan, Prof. Zhu enabled the patient with paralysis due to apoplexy to stand up right after the treatment. Visitors were surprised.



The related reports on the newspaper *Taiwan Union* on September 16, 1989.



Founders of Chinese Scalp Acupuncture Centre visited former California Governor and legalizing acupuncture supporter Jerry Brown. From right to left: Eva Chau, Jerry Brown, Mingqing Zhu, Jackson Chau.



Prof. Zhu giving a lecture at Zhu's Scalp Acupuncture Association. Many certified acupuncturist attended.



In a public demonstration of scalp acupuncture technique in San Francisco, the stroke patient (center) stood up and walk without help shortly after a scalp acupuncture treatment by Prof. Zhu and Dr. Chau.



Prof. Zhu administrating his scalp acupuncture technique on a patient at the Chinese Scalp Acupuncture Center, San Francisco, with Dr. Eva Chau and Dr. B. Loh as his assistants



At Oregon College of Oriental Medicine, Dr. Eva Chau is demonstrating Zhu's Scalp Acupuncture technique in the healing of a stroke victim who had lost his speech. After the treatment victim was able to sign, which was quite surprise to the other certified acupuncturists.



Prof. Zhu and Dr. Chau receiving medals from Chinese Acupuncture Association, Taiwan. The medals is given for the highest honor in acupuncture technical achievement. Photo taken with President Wai-ping Woo.



Federal State and Taiwan officials, presidents of the Chinese Consolidated Benevolent Association, Chongchow Tong Association, Yee Tuck and Sam Tuck Association, community leaders and friends officiate the grand opening of the Chinese Scalp Acupuncture Center of U.S.A. in San Francisco in January 1991.



Lecture Demonstration Seminar at the Hongkong Chinese Traditional Medicine Association in Hongkong. From left to right: Dr. Ming Loh, Dr. Eva Chau, Prof. Zhu, Dr. Dale King and Dr. Tang.



From right to left: Dr. Dale King, the translator, Prof. Zhu, the author and Dr. Chau, President of the Federation of Zhu's Scalp Acupuncture Research Association at the Chinese Scalp Acupuncture Center of U.S.A. in San Francisco, 1991.

美洲中國頭皮針中心
**THE CHINESE SCALP ACUPUNCTURE
CENTER OF U.S.A.**

In 1991, Prof. Ming-qing Zhu and Dr. Eva Mun-wu Chan established the Chinese Scalp Acupuncture Center of U.S.A. in San Francisco, California. The Clinic provides therapeutic treatments and teaching courses. Inquiry and information are welcome.

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(The Federation of Zhu's Scalp Acupuncture Research Association is a non-profit organization of which Dr. Eva Mun-wa Chan is president, is also at 1523 Irving Street, San Francisco, California, 94122)

Preface

Treatment of acute syndromes with acupuncture and moxibustion has had a long and venerable history. Acupuncture and moxibustion is an effective treatment in helping acute and seriously ill patients, particularly in case when no other therapies are available. It can relieve the patient's acute symptoms quickly and save valuable time for further comprehensive studies. Based upon the authors' more than 20 years of teaching and clinical experience, as well as recent research, the book *A Handbook for Treatment of Acute Syndromes by Using Acupuncture and Moxibustion* has been compiled. This book can serve as a good teacher's reference, not only for the practitioner of acupuncture and moxibustion in his own study and clinical practice, but also for doctors of TCM and western medicine, as well as nurses in the different departments of clinical medicine and for helping the patients with acute syndromes in their homes.

The book consists of three chapters and three appendices. Chapter I is a brief introduction of basic knowledge for the treatment of acute syndromes with acupuncture and manipulation, giving an outline and foundation for the beginner to study and also for the practitioner of acupuncture and moxibustion to master and to assisting in using this book more effectively.

Chapter II covers the techniques of acupuncture and moxibustion for acute syndromes. In the part of needling and moxibustion, all the

commonly used needling method, such as the basic reinforcing and reducing method, the needling methods listed in *Internal Classic*, the comprehensive reinforcing and reducing method, and moxibustion for acute syndromes are introduced. In the part covered other therapies for acute syndromes, seven commonly used therapies, ear acupuncture, scalp acupuncture, nose acupuncture, hand acupuncture, foot acupuncture, point injection and digital depression therapy are introduced. Among them, ear acupuncture and scalp acupuncture are analysed and introduced to the international standard plan for location and manipulation.

Chapter III deals with treatment of acute syndromes with acupuncture and moxibustion. Main points of differential diagnosis, general treatment and treatment according to diseases for 18 commonly seen acute syndromes in clinical ward are introduced. Combined with syndromes of TCM and diseases treated by western medicine, the main points for differential diagnosis and diagnosis are briefly presented. For treatment, acupuncture & moxibustion therapy and other therapies, particularly the manipulation process in detail, stimulation and times for retaining needles are introduced. In order to consult the corresponding acupuncture and moxibustion treatment quickly and effectively in rescuing acute and patient in time, doctors of TCM and western medicine can consult the syndrome of TCM and main points of differential diagnosis, or disease of western medicine and treatment according to diseases according to their own characteristics.

Form of medical history for acupuncture and moxibustion, index and figure of commonly used points for acute syndromes are enclosed in the book. These will help the practitioner to learn point and their location more easily.

The length or depths of insertion mentioned in this book are defined by means of finger measurement, but are also given clearly by the indication of centimeter.

In order to popularize the theory of treatment of acute syndromes with acupuncture and moxibustion, we strive to explain the profound in simple terms, and to introduce this theory explicitly and clearly. For the treatment, we keep certain principles how to easily locate point, master and achieve effect rapidly. We would sin-

cerely appreciate comments and suggestions from our readers so that we can make revisions in further edition.

The compiling this book has been greatly assisted by Dr. Xiaoming Cheng (程晓明) and Dr. Min Zhu (朱敏). Without their effort, this book would not have been possible.

Mingqing Chu (朱明清)
San Francisco, 1990

Foreword to the English Edition

The science of acupuncture and moxibustion is an important part of Chinese traditional medicine for prevention and treatment of diseases. It has been practice in China for thousands of years. Because of its simplicity, convenience and non-pharmaceutical treatment, it has sustained the people's appreciation for its curative effects and has attracted the world's attention for the past dozen years. More and more medical scholars and practitioners from all over the world are journeying to China each year to learn and investigate this simple and miraculous results method of treatment of diseases, especially in the field of pain therapy.

Acupuncture is an unique method of Chinese medicine for external treatment of diseases and people usually think of it as a method for treatment of chronic diseases only, yet it can be minister to emergencies and acute syndrome cases as well with amazing results for certain diseases.

Professor Zhu was one of the first acupuncturists graduated at the Shanghai Institute of Chinese Medicine in 1964. With over 20 years of clinical and research experiences, he is now a specialist in Chinese acupuncture for emergencies. Scalp acupuncture therapy has become his unique specialty known as the Zhu's Scalp Acupuncture. His emergencies acupuncture handbook introduces seven methods of treatments: namely, the ear, nose, scalp, hand and foot acupuncturing, acupunctural point injection and finger pressure therapy that can cure 18 acute syndrome cases, such as coma,

shock, vertigo, fever, cramp, bleeding, acute palsy, jaundice, poisoning, electric shock, convulsion, abnormal excretion, asthma, palpitation, mental disorder, allergy, the eye, ear and throat emergencies, weak childbirth ability and painless childbirth. Therefore it is a highly practical acupuncture manual.

Dale Chow King (曹康華) D.D.S., M. Sc.
Fall, 1991

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A Handbook
for Treatment of Acute Syndromes
by Using Acupuncture and Moxibustion

Introduction

The application of acupuncture and moxibustion for the treatment of acute syndromes has a long and venerable history. During the several thousand years of medical practice, abundant clinical practice and valuable theoretical materials were accumulated. It made a great contribution to the development of Chinese traditional medicine, and also exerted a tremendous influence on the development of world medicine.

Acupuncture and moxibustion treat acute syndromes by activating the human body's resistance and its own ability to eliminate pathogenic factors. Through specific acupuncture or moxibustion stimulation, deopilate the meridians passage, resulting *Yin* and *Yans*, strengthening the body resistance and eliminating the pathogenic factors can be achieved. Acupuncture and moxibustion can treat acute syndromes with the effects of anti-inflammation, killing pain, stopping bleeding, bacteriostasis, resulting function of the nerve, body fluid and endocrine, etc. These functions are already confirmed by abundant clinical experiences and laboratory research. For acute syndromes, such as painful syndrome, bleeding syndrome and inflammation syndrome, acupuncture and moxibustion not only can relieve acute symptoms, but can also treat the disease. For example: Acupuncture has a remarkable effect of killing pain in acute painful syndrome, which has been confirmed by clinical application in acupuncture analgesia and pain syndrome of the different

clinical setting. At the same time, it is universally accepted by the medical field at home and abroad.

Effects of acupuncture and moxibustion on acute syndromes are reducing pain, relieving severe, acute symptoms which can endanger the patient's life, and saving valuable time for further comprehensive rescue. Such as; rescuing the patient with dyspnea due to carbon monoxide poisoning and asphyxia neonatorum, relieving acute symptoms for coma, shock, acute abdomen and different kinds of pain, bleeding, acute infection and severe asthma.

Acupuncture and moxibustion can treat acute syndromes without the side-effect of concealing the positive signs for acute diseases, so it offers a favourable condition for further rescue with other comprehensive therapies.

Treatment of acupuncture and moxibustion is desirable because of its simple application, wide range of use, good curative effect, and low cost. So it should be a first-selection rescue method and a very important treatment method and a very important treatment method for the acute syndromes in the different clinical department.

CHAPTER ONE

Basic Knowledge for the Treatment of Acute Syndromes with Acupuncture and Moxibustion

PART I TCM DIAGNOSIS FOR ACUTE SYNDROMES

In order to rescue the emergency disease in time and treat it correctly, a rapid and correct diagnosis is very important. The TCM diagnosis for the emergency disease uses mainly four diagnostic methods, namely, inquiring, inspection, auscultation and olfaction, and palpation. The pathological conditions are obtained by using the four diagnostic methods, and then a comprehensive analysis and synthesis of the pathological conditions are carried on under the guidance of TCM theory. Therefore, the doctor can make a preliminary diagnosis mainly the causative factors, place and nature of the disease, the relative strength of the antipathogenic *Qi* and pathogenic factor and the direction of the pathological development. So acupuncture treatment should be applied rapidly. For severe cases, other rescue methods can be added.

Collection of the pathological conditions for the emergency disease should be completed by the doctor's sharp vision, listening, smelling and palpation and brief inquiring. This kind of simple and direct method to obtain the pathological conditions is very important for applying acupuncture & moxibustion to rescue acute, emergency disease. Inquiring means to ask the patient or the

patient's companion about the onset and progression of the disease, present symptoms and signs, and other conditions related to the disease. Inspection refers to the process in which the doctor observes the systemic and regional changes in the patient's vitality, colour and appearance. Auscultation and olfaction, determine the pathological changes by listening and smelling. Palpation is a method of diagnosis in which the pathological condition is detected by feeling the pulse and palpating the skin, epigastrium, abdomen, hand, foot and other parts of the body.

1. INQUIRING

The inquiring method in the diagnosis of the emergency disease should be made systematically with questions focused on the chief complaint of the patient according to the knowledge necessary in differentiating a syndrome. Meanwhile the corresponding examination and acupuncture treatment for the main symptoms should be applied so as to save rescue time. For the patient at the acute stage with unconsciousness or children, inquiring is to ask the patient's parents or the patient's close companion about the disease condition in order to understand the pathological process rapidly and correctly.

Inquiring covers a wide range of topics. But for emergency disease, questions should focus on the most painful and chief syndromes, such as the location nature, time, characteristics and accompanying signs of the chief syndrome, the cause of disease, former treatment and past history of disease.

I Chills and Fever

Chills and fever are common symptoms which can be caused by many kinds of diseases. We need to ask such questions as to which is more severe, pattern of fever, when they occur and what symptoms and signs accompany them. This information is necessary for further differentiation of exogenous attack syndrome and internal damage syndrome, so as to determine the origin of the disease. The exogenous attack syndrome manifests itself as severe chills and fever, without interruption; the internal damage syndrome manifests

itself as mild chills and fever, which may occur intermittently. Chills accompanied by fever indicates the exterior syndrome; fever without chills indicates the interior syndrome; alternate chills and fever indicates the intermediate syndrome.

II Pain

Pain is one of the most common symptoms for the emergency disease, which is also one of the main indications for acupuncture & moxibustion treatment. The nature and place of pain must be asked, so as to determine diseased *Zang-Fu* organs and meridians, and deduce the cold and heat, deficiency and excess of the disease. Chest pain refers to the heart and lung; upper abdominal pain refers to the spleen, stomach, liver, gallbladder and pancreas; pain around the umbilicus refers to the large and small intestines; lower abdominal pain refers to the uterus and bladder. The heat and excess syndromes mostly manifest as themselves as an acute onset of the disease, severe pain, aversion to pressure, restlessness, fever and severe thirst. The cold and deficiency syndromes manifest as slow onset of the disease, mild pain, desire for pressure, pain can be relieved by warm and aggravated by cold; distending pain indicates the stagnation of *Qi*; weighty pain indicates damp pathogen blocking *Qi* and blood; wandering pain indicates wind pathogen and pricking pain indicates the blood stasis.

III Defecation and Urination

Inquiring about defecation and urination can help the doctor to deduce the cold, heat, deficiency, excess and other aspects of the disease. The excess and heat syndrome mostly manifests itself as constipation, oliguria with reddish urine. The deficiency and cold syndromes mostly manifest as loose stool, clear and profuse urine. Bloody stool with mucus indicates dysentery due to damp and heat pathogen. Frequent vomiting and diarrhea, or accompanied by muscular cramps indicate acute enteritis, cholera etc., which are due to damp and heat pathogen in the intestine and stomach; Frequent, urgent and painful urination or bloody urine means damp and heat in the bladder, such as acute infection of the urinary system. Incontinence of urine and stool indicate the severe disease of exhaustion of

the spleen and kidney *Qi*.

IV Appetite

Inquiring about appetite is very important in clinic, through which the functional activity of the spleen and stomach, prognosis and pathological development of the syndrome can be deduced. Sudden onset of abdominal pain, vomiting and dizziness after eating suggests the food-intoxication. For the patient with prolonged illness and in severe condition, instead of poor appetite, the patient suddenly excessive appetite which indicates the signs of the exhaustion of the spleen and stomach *Qi*.

V Gynopathy

Women patients are also asked about the menses and leukorrhea, and for married women, the obstetric history. Inquiring in menses covers menstrual cycle and period, amount, colour and quantity of flow and accompanying symptoms and signs. For leukorrhea, attention is paid to the colour, amount, quality and smell of leukorrhea. Abdominal pain pre-menstrual, or during or after the period mostly indicate the dysmenorrhea; amenorrhea for one to two months, then sudden onset of the lower abdominal pain, accompanying with vaginal bleeding which suggest the ectopic gestation; Profuse vaginal bleeding without pregnancy indicates metrorrhagia; Vaginal bleeding during the pregnancy period, accompanying with the lumbar soreness and abdominal pain indicate the excessive fetal movement, belong to threatened abortion.

2. INSPECTION

Inspection is a method of diagnosis in which the doctor understands and predicts the pathological changes of internal organs by observing abnormal changes in the patient's vitality, colour, appearance, secretions and excretions. Inspection of the exterior of the body is of much help in diagnosis and offers an important basis for using acupuncture and moxibustion to rescue the emergency disease.

I Observation of the Vitality

Vitality is the general manifestation of the vital activities of the human body, and the outward sign of relative strength of *Qi* and blood of the *Zang-Fu* organs, which take essential *Qi* as basis. By observing vitality, one may get a rough idea of the strength of the antipathogenic *Qi* of the human body and severity of the disease. This is highly significant for the prognosis. Vitality can be deduced through appearance and colour, eyes, complexion, speech, respiration, activities, urine and stool. Spiritless is with dull eyes and sluggish response, pallor, lassitude, shortness of breathing no desire to speak and apathy which indicate the impairment the antipathogenic *Qi* and the disease is severe. Loss of spirit is with dull eyes, blurring of vision, or dilated pupil, sluggish response, paraphasia; or mental disturbance, restlessness; or even falling down in a fit and sudden loss of consciousness with mouth agape and eyes closed, flaccid paralysis of limbs, incontinence of urine which indicate exhaustion of the primary *Qi* and named as "Collapse-Syndrome" by TCM. The disease is severe and prognosis is poor.

II Observation of the Eye

The liver opens into the eye, and the essential *Qi* of the five *Zang* and six *Fu* organs all goes up into the eye. Therefore, abnormal changes in the eye are not only associated with the liver, but also reflect the pathological changes of other *Zang-Fu* organs. Apart from the expression of the eye, attention should also be paid to the appearance, colour and movement of the eye. For instance, redness and swelling of the eye are often due to wind-heat pathogen or liver fire; yellow sclera suggests jaundice; pale canthus denotes the insufficiency of *Qi* and blood; a dark grey colour around the eye indicates deficiency of the kidney *Yang* and blocking of cold pathogen in the meridians; a dark colour without brightness of the eye signifies the severe disease; upward, straight forward or sideways staring of the eye is mostly caused by disturbance of the liver wind. Sudden onset of the dilated pupil and anisocoria is caused by irregularity of the liver and kidney or trauma. The dilated pupil with slow reflex of light indicates the exhaustion of essential *Qi* of organs; the dilated pupil without light reflex and accommodation indicates the failure of the

kidney and exhaustion of primary *Qi*.

III Observation of Complexion

Both the colour and lustre of face are observed. Generally speaking, a lustrous and moist complexion indicates that the disease is mild, *Qi* and blood are not deficient, and the prognosis is good; whilst a dark and haggard complexion suggests that the disease is severe, essential *Qi* is already injured, and the prognosis is poor. A blue and dark colour indicate cold syndromes, painful syndromes, commonly seen in the diseases of blood stasis; A red colour often indicates heat syndromes, commonly seen in the acute febrile disease; A yellow colour indicates damp and heat syndromes, commonly seen in jaundice; A pale colour indicates deficiency syndromes and cold syndromes, commonly seen in prolonged disease, deficiency of *Qi* and blood, or loss of blood, *Yin*-exhaustion and *Yang*-exhaustion due to profuse sweating, severe vomiting and diarrhea.

IV Observation of the Ear

When disorders occur in the internal organs or other parts of the body, particularly organic disease, various reactions may appear at the corresponding areas of the auricle, such as; tenderness, decreased cutaneous electric resistance, scaling, blisters, papulae, hard nodulae, pigmentation or morphological changes such as in blood vessels of the auricle. Therefore, these sites are also referred as tender spots, conductant points or reflex spots. Thus, in making a diagnosis, these phenomena can be taken into consideration. These sensitive sites are the right place for the ear acupuncture therapy.

A dote-like or sheet-like reddish change or congestive red papulae with oleum and lustre, which are commonly seen in the acute inflammatory diseases.

A dote-like or sheet-like pale pit or papulae, without oleum and lustre, which are often seen in the chronic organic diseases.

Tuberous or dote-like, sheet-like dark grey swelling are commonly seen in cancer.

Bran-like scaling (difficult to wipe off) which is often seen in the different kinds of skin diseases, common cold and the disease of

malabsorption and decompensation.

Line-like, round-like or half-round-like, pale or dark grey scar, which are commonly seen in the scar due to different kind of operations ulcer and trauma.

V Observation of the Tongue

Observing the colour and form of the tongue proper and tongue coating can understand the cold, heat, deficiency and excess of the *Zang-Fu* organs, the severity of the pathogenic factors and the condition of the body fluid, so as to determine the progression of the pathological conditions and prognosis.

Swollen tongue indicates phlegm, wetness pathogen and deficiency of *Qi*; swollen tongue with blue purplish and dark colour indicates toxicosis. A thin, dry and deep red tongue indicates hyperactivity of fire due to deficiency of *Yin*, in which body fluid is consumed; A cracked tongue with deep red colour indicates excessive heat; If the tongue is pale, it indicates deficiency of blood; A thorny, dry and red tongue indicates accumulation of pathogenic heat in the interior (at the tip of the tongue means the heart fire, on the border means the fire of the liver and gallbladder, at the center means the heat of the spleen and stomach); A deviated tongue indicates apoplexy and pestilence. A flaccid tongue indicates apoplexy or the severe syndromes of consumption of the liver and kidney *Yin* due to prolonged disease. A rigid tongue indicates apoplexy or febrile disease; A red or deep red tongue belongs to heat syndrome (with tongue coating is excess heat syndrome, without tongue coating is deficiency type and cold syndrome; A deep blue, purplish and dry tongue indicates excessive pathogenic heat consuming body fluid, and the disease is severe; whilst a pale purplish and moist tongue is related to cold syndrome; A purple tongue indicates blood stasis. For tongue coating: thin coating indicates cold, yellow coating indicates heat, a greyish black coating indicates extreme heat syndrome or extreme cold syndrome.

VI Observation of the Skin

A lustrous skin with natural colour is considered normal. A lustrous and moist skin indicates that the disease is mild, whilst a dark

and haggard skin suggests that the disease is severe; A lustrous red and moist eruption with slack and sparse distribution indicates the case with a favourable prognosis; A bright red indicates that the virulent-heatpathogen is at the superficial part of the body; A deep red or with purple colour indicates excessive heat syndrome. If the eruption is in patch distribution and with dark colour, it indicates excessive virulent-heatpathogen and the prognosis is poor.

VII Observation of the Finger-Print

Observation of the finger-print is applied to the children under three years old. A Bright red colour indicates the exogenous febrile diseases; purple and red colour indicates excessive heat syndrome; Blue colour indicates convulsion and pain diseases.

3. AUSCULTATION AND OLFACTION

I. Listening

In general speaking, intensely or deliriously indicates syndromes of the excess type, while speaking feebly in a low tones or murmuring in an unconscious state indicates those of deficiency type. Feeble breathing indicates deficiency of *Qi*; Forceful and coarse breathing accompanied by a loud voice suggests syndromes of excess type. Forceful and short hiccups with a loud sound indicates excess and heat syndromes; feeble and long hiccups with low sound indicates deficiency and cold syndromes. Frequent hiccups seen in prolonged or severe diseases indicates that the patient is dangerously ill.

II Smelling

Stench smell of a secretion or excretion usually indicates heat syndromes of excess type; less stinking smell suggests cold syndromes of deficiency type. Cough with discharge of foul purulent sputum indicates lung abscess. halitosis indicates the stomach-heat. Foul and sour smell implies retention of food. Unconsciousness with almond smell breath suggests poisoning due to cyanide, with apple smell mostly belonging to hepatic coma. Unconsciousness and one's skin, breathing and vomitus with garlic smell suggests organic phosphorous poisoning. If the vomitus is with a special fragrant smell, which

suggests poisoning due to Dimethyl-Dicholoro-Vinyl Phosphate, Dipterex etc. If the mouth is with urine smell, which indicates uremia.

4. PALPATION

Palpation is a method of diagnosis in which the pathological condition is detected by palpating, feeling and pressing certain areas of the body. It is discussed under the heading of feeling the pulse and palpation of different parts of the body. Feeling the pulse can understand excess and deficiency, cold and heat of the *Zang-Fu* organs, *Qi* and blood as well as the heart beat. Palpation can detect the diseases of internal organs particularly for the diagnosis of the abdomen. In acupuncture treatment, palpating along the channels can survey the diseased site and help with the acupoint location.

I Feeling the Pulse

The pulse is differentiated in terms of depth (floating or deep), speed (rapid or slow), strength (forceful or weak), shape (thick or thready, soft or hard) and rhythm. Different conditions of the pulse indicate different syndromes. For the treatment of emergency disease, in order to save the rescue opportunity, a rapid and correct diagnosis is important. Based on the diagnostic methods of inquiring, inspection auscultation and olfaction, we divided the pulse into six kinds of pulse, namely floating, deep, slow, rapid, deficiency type and excess type. so as to distinguishing the exterior, interior, cold, heat, deficiency and excess of the disease. In the clinical situation, only by combining the four diagnostic methods can a comprehensive and systematic understanding of the condition of the disease be gained and a correct diagnosis made.

(a) Floating Pulse: A floating pulse can be easily felt with gentle touch.

Indications: Exterior syndrome. Forceful floating pulse indicates the exterior syndrome of excess type, whilst weak one indicates the exterior syndrome of deficiency type.

Associated Pulse and Syndrome: A floating, large and forceful pulse is the surging pulse which indicates excessive heat syndromes.

A floating large and weak pulse is the scattered pulse which indicates a critical condition of exhaustion of the kidney *Qi*. A floating, small and weak pulse is the soft pulse which indicates deficiency of *Yin* and consumption of essence, or damp pathogen. The indistinct pulse is more weak and small than the soft pulse, which indicates deficiency of *Qi* and blood in the severe stage, exhaustion of *Yang*. A floating, large and soft pulse, with a hollow feeling while pressing, is the hollow pulse which indicates profuse loss of blood. A wiry pulse feels taut, straight and long, giving the feeling of a string of a violin. It indicates disorders of the liver and gallbladder, and painful syndrome. Wiry and hollow pulse feels floating, large, wiry and soft, giving the feeling like pressing over a drum. It indicates excessive cold syndrome due to deficiency of the middle *Jiao* or metrorrhagia.

(b) Deep Pulse: A pulse condition in which the beats are located deeply and palpable only by heavy pressure.

Indications: Interior syndrome, severe syndrome. The deep and forceful pulse indicates interior syndrome of excess type, while the deep and weak pulse indicates interior syndrome of deficiency type or deficiency of blood.

Associated Pulse and Syndrome: A deep wiry, long and vigorous beat is a deep and steady pulse, which indicates the abdominal pain and abdominal mass due to excessive cold. A hidden pulse is deeply sited and impalpable until it is pressed to the bone surface. It indicates retention of *Yin* pathogen in the interior or severe painful syndrome. A small pulse is characterized by small, soft and thready beats, which indicates deficiency of *Qi* and blood, deficiency of the liver and kidney. A deep and tense pulse indicates retention of food or cold pain due to the interior cold (pain of the epigastrium and abdomen). The deep and unsmooth pulse belongs to the interior syndrome of deficiency type and indicates impairment of essence and deficiency of blood, stagnation of *Qi* and blood. Deep rapid and forceful pulse indicates interior heat syndrome. Deep rapid and weak pulse indicates heat syndrome of deficiency type. Deep and slow pulse indicates interior cold syndrome or excessive cold syndrome.

(c) Slow Pulse: The rate is slow with less than four beats per breath

(less than sixty beats per minute) It is sinus bradycardia for the electrocardiogram (ECG).

Indications: Cold syndrome, stagnation of *Qi* and blood. If the slow pulse is forceful, it indicates an interior syndrome of excess type caused by retention of *Yin* cold in the interior. If the slow pulse is weak, it indicates an interior syndrome of deficiency type due to deficiency of *Yang Qi*.

Associated Pulse and Syndrome: Slow and unsmooth pulse indicates deficiency of blood and stagnation of *Qi*. A knotted pulse is slow with irregular missed beats. A regularly intermittent pulse is slow and weak with missed beats at regular intervals. These two pulses indicate excessive *Yin*, accumulation of *Qi*, retention of cold, phlegm, blood stasis or declining *Zang Qi*, wind syndrome, painful syndrome and disorders due to emotional fear and fright, or traumatic contusions and sprains.

(d) Rapid Pulse: The rate is quick with more than five beats per breath (more than ninety beats per minute). It is sinus tachycardia for the electrocardiogram.

Indications: Heat syndrome. Rapid and forceful pulse indicates heat syndrome of excess type, while rapid and weak pulse indicates heat syndrome of deficiency type or deficiency of *Yin*.

Associated Pulse and Syndrome: A smooth pulse is rapid, smooth and flowing like pearls rolling on a disk. It indicates heat syndrome of the excess type. The strong and rapid pulse is characterized by smooth, rapid, strong and irregular beats throbbing abruptly over a narrow region, which indicates syndromes of fright and pain, metrorrhagia. An abrupt pulse feels hurried and rapid with irregular missed beats, which indicates syndromes of swelling and pain, stagnation of *Qi* and blood, excessive *Yang* heat. The small and rapid pulse indicates interior heat syndrome due to deficiency of *Yin*. The wiry and rapid pulse indicates liver fire. The surging and rapid pulse indicates formation of pus and heat of *Fu* organs.

II Palpation

Coldness of extremities, small and weak pulse are commonly seen in syndrome of exhaustion of *Yang* and *Jue*-syndrome. Coldness of the hand and foot, no sweating, redness of the eyes, red tongue and

thick coating, deep and hidden pulse, it belong to syndrome of cold extremities due to heat pathogen (熱厥內閉).

(a) Palpation of the Acupoint: In stomach disorder, tenderness may occur at *Weishu* (B 21) *Pishu* (B 20) *Zhongwan* (Ren 12), *Xiawan* (Ren 10), *Zhiyang* (Du 9) and *Zusanli* (St 36). In disorder of the liver and gallbladder, tenderness may occur at *Ganshu* (B 18) (right), *Danshu* (B 19) (right), *Qimen* (liv 14) (right) and *Yanglingquan* (GB 34). In intestinal ascariasis, tenderness may occur at *Xuehai* (Sp 10) and *Baichongwu* (Extra 35). Tenderness may occur at *Lanweixue* (Extra 37) in appendicitis. In kidney disorders, tenderness may occur at *Shenshu* (B 23) and *Sanjiaoshu* (B 22). Tenderness may occur at *Yinlingquan* (Sp 9) in acute or chronic diarrhea. Tenderness may occur at *Sanyinjiao* (Sp 6) in gynopathy.

(b) Palpation of the Abdomen: Abdominal pain which is alleviated by pressure is associated with deficiency, while that aggravated by pressure is related to excess. Abdominal distention and fullness with tympanic note on percussion indicate stagnation of *Qi*, if the abdomen does not feel hard on pressure and urination is normal. If the abdomen feels like a rubber bag containing water, and dysuria is present, it suggests accumulation of fluid. Immovable hard masses in the abdomen with pain at the definite site indicate stagnation of blood. Unfixed soft masses or the intermittent feeling of an indefinite mass in the abdomen with unfixed painful areas indicate stagnation of *Qi*.

PART II SIMPLE LEVEL DIAGNOSIS FOR THE NERVOUS SYSTEM

1. REFLEX

I Superficial Reflex (Skin, Mucous Membrane Reflex)

Techniques of examination, reaction and location of the common superficial reflex are seen in the Table 1.

Decrement and disappearance of the superficial reflex may be seen in deep sleeping, coma, anesthesia, normal infant of half to one year's old or a few normal persons.

Table 1 TECHNIQUE OF EXAMINATION, REACTION AND LOCATION OF THE SUPERFICIAL REFLEX

Reflex	Technique	Reaction	Muscle	Nerve	Segment location
Corneal Reflex	Touch the cornea lightly	Blinking of the eyes	Orbicular muscle of eye	Trigeminal nerve facial nerve	Pons
Pharyngeal Reflex	Touch the retropharynx	Soft palate rising, vomiting	Constrictor pharynx	Glossopharyngeal nerve	Medulla oblongata
Upper Abdominal Reflex	Stroking the upper abdomen lightly and briskly	Contraction of upper muscles	Transverse muscle of abdomen	Intercostal nerves	T7-8
Middle Abdominal Reflex	Stroking the middle abdomen lightly and briskly	Contraction of the middle abdominal muscles	External oblique muscles of abdomen	Intercostal nerve	T9-10
Lower Abdominal Reflex	Stroking the lower abdomen lightly and briskly	Contraction of the lower abdominal muscles	Straight muscle of abdomen	Intercostal nerve	T11-12
Cremasteric Reflex	Stimulating the medial skin of the upper thigh	Rising of the testicle	Cremaster muscle	Genito femoral nerve	L1-2
Plantar Reflex	Stroking the lateral aspect of the sole from the heel to the ball of the foot lightly	Flexion of the toes and foot	Flexor digitorum muscle	Sciatic nerve	S2 and L5
Anal Reflex	Stroking or puncturing the anal area lightly	Contraction of the external sphincter	Sphincter of anus	Anococcygeal nerve	S4-5

Furthermore, impairment of any part of the reflex arc will lead to decrement or disappearance of the superficial reflex.

II Deep Reflex (Tendon, Periosteum Reflex)

Techniques of examination, reaction and location of the common deep reflex are seen in Table 2.

Abnormalities of the deep reflex are decrement, disappearance or hyperaction. Decrement and disappearance of the deep reflex is disturbance or blocking of the conduction of the reflex arc and com-

Table 2 TECHNIQUE OF EXAMINATION, REACTION AND LOCATION OF THE DEEP REFLEX

Reflex	Technique of Examination	Reaction	Muscle	Nerve	Segment location
Biceps Reflex	Striking the examiner's finger which is placed on the biceps tendon	Flexion of the elbow joint	Biceps muscle of arm	Musculocutaneous nerve	C5-6
Triceps Reflex	Striking the triceps tendon above the elbow	Extension of elbow	Brachial triceps muscle	Radial nerve	C6-7
Radio periosteal Reflex	Striking the radius about 1 to 2 inches above the wrist	Flexion and supination of the forearm. Flexion of the digitus	Biceps muscle, triceps muscles, brachioradial muscle, pronator	Median nerve, radial nerve, musculocutaneous nerve	C5-8
Knee Reflex	Briskly tap the patellar tendon just below the patella	Extension of the knee	Quadriceps muscle of the thigh	Femoral nerve	L2-4
Ankle Reflex	Striking the achilles tendon	Flexion of the foot	Gastrocnemius muscle	Sciatic nerve	S1-2

monly seen is radicular neuritis, kinesioneurosis and is diseases of the effector muscle. Hyperaction of the deep reflex is caused by injury at the pyramidal tract and commonly seen in apoplexy and CNS diseases in the brain and spinal cord.

III Pathological Reflex

In healthy persons pathological reflex can be seen. The pathological reflex can only be seen in the case of injury of the pyramidal tract, and commonly seen in coma, deep anesthesia, grandmal epilepsy, injury of upper part of the cortical motor center and pyramidal tract.

Babinski Response: With a moderately sharp object, stroke the lateral aspect of the sole from the heel to the ball of the foot curving medially across the ball. The positive response is dorsiflexion of the great toe with fanning of the other toes.

Hoffman Response: Grasp the patient's middle finger, hold it with examiner's fingers and tell the patient to relax, then the examiner quickly scrape and flick the patient's middle finger nail with one's

thumb. Positive response is flexion of the rest of the fingers (the thumb, index finger and ring finger)

IV Meningeal Irritation Response

Positive meningeal signs may be seen when the meningeal nerve root of the neck is stimulated by the diseases, such as meningitis, subarachnoid hemorrhage, encephalitis etc., characterized by stiffness of the neck with resistance to flexion.

Brudziski's Sign: Positive sign is flexion of the patient's hips and knees can be seen when the patient flexes one's neck forward.

Kernig's Sign: Flex one of the patient's legs at hip and knee, and then straighten the knee. Positive sign is resistance to straightening the knee and pain in the low back and posterior thigh, or pain in the neck.

2. SENSATION

I Superficial Sensation

The change of the superficial sensation often suggests peripheral nervous diseases, myositis and spinal cord diseases.

Pain Sensation: Pricking the skin with a needle upper, down, left and right so as to compare pain sensation.

Temperature Sensation: Stimulating the patient's skin with tube filled with hot water or cold water, then let the patient to tell "hot" or "cold".

II Deep Sensation

The change of the deep sensation often suggests either posterior column disease or a lesion of the peripheral nerve or root.

Position Sensation: The examiner moves the toe, wrist, ankle, knee and elbow clearly upward and downward, then with the patient's eyes closed, ask the patient to identify "up" or "down".

Vibration Sensation: Use a relatively low-pitched tuning fork, tap it on the heel of the examiner's hand and place it firmly over a distal interphalangeal joint of the patient's finger or big toe. Ask what the patient feels.

Tenderness Sensation: Press the muscle tendon to see whether

tenderness existed.

III Cutaneous Sensation

Disturbance of the cutaneous sensation suggests a lesion above the thalamencephalon, particularly lesions of the parietal lobe.

Stereognosis: It refers to the ability to identify an object from its size and shape. Place a familiar object such as a ball in the patient's hand, and ask the patient to tell what it is.

Two-Point Discrimination: For the finger pad should be less than 0.5 cm. Palm <0.7 cm. Back of the hand <3 cm.

Graphesthesia: Draw a figure, such as "t", "o" on the patient's skin with the blunt end of a pen or pencil, and ask the patient to identify it.

Location Sensation: Stimulating the patient's skin at different place and ask the patient to identify the stimulating place.

3. DISCRIMINATION BETWEEN UPPER NEURON PARALYSIS AND LOWER NEURON PARALYSIS

I Upper Neuron (central) Paralysis

Hypermyotonia, spastic paralysis, hyperaction of the tendon reflex, positive pathological reflex.

II Lower Neuron (Peripheral) Paralysis

Hypomyotonia flaccid paralysis, hypoaction or no reaction of the tendon reflex, no pathological reflex, myoparalysis, myoatrophy.

III Examination of the Myodynamia, Muscular Tone and Muscular Volume

(a) **Myodynamia:** Myodynamia can be divided into degree 0 to degree V. All together there are six degrees.

Degree 0: No muscular contraction.

Degree I: Muscular contraction existed but no movement of extremities.

Degree II: Movement of extremities existed in the situation without gravity.

Degree III: Patient can move one's limbs against gravity; but can't

move against obstruction.

Degree IV: Patient can move one's limbs against obstruction, but weak than normal myodynamia.

Degree V: Normal myodynamia.

(b) **Muscular Tone:** Hypomyotonia indicates peripheral diseases, muscular disease and cerebellar disease. Hypermyotonia indicates central diseases.

(c) **Muscular Volume:** Examination of the muscular volume is to see whether myoatrophy and myohypertrophy. Myoatrophy is commonly seen in the peripheral lesion and muscular diseases. False myohypertrophy is seen in the progressive myodystrophy.

4. COORDINATE MOVEMENT

A group of muscles cooperate each other in the movement so as to govern the equilibrium action of the muscles, which is called coordinate movement. Ataxia can be caused by the diseases of peripheral nerve, posterior ramus of spinal nerve, posterior funiculus of spinal cord and thalamencephalon, the disease of the cerebellum or its related nervous system, the disease of the cerebro-cortical motor area or the basal ganglion, or the disease of the internal acoustic vestibulum or the semicircular canal.

I Finger-Nose Test

Ask the patient to touch one's nose with one's index finger from straight forward direction and with one's eyes closed.

II Point-to-Point Test

Ask the patient to lie down and place one heel on the opposite knee, and then run it down the shin to the big toe. If the patient can't complete the action, it is positive sign.

III Linear Walking Test

If the patient can't walk in straight line, it is positive sign.

IV Romberg Test

Ask the patient to stand with feet together and without support

from the arms. Note the patient's ability to maintain an upright posture first with eyes open and then with eyes closed for 20 to 30 seconds. If the patient has difficulty standing with feet together and eyes closed, it is a positive Romberg Sign, which is due to sensory ataxia, cerebellar ataxia.

V Involuntary Movement

the involuntary movement is the unconscious movement which the patient can't control.

(a) **Spasm:** It is a involuntary contraction of the muscle, may be seen in tetanus, tetany, rabies, dangerous sign of the eye, heat cramp, facial muscular spasm, etc.

(b) **Tremor:** It is a involuntary rhythmic movement of the joint and muscle, commonly seen in Parkinson's Disease, hepatic coma, hepatolenticular degeneration, cerebellar disease, alcohol poisoning, hyperthyroidism etc.

(c) **Chorea:** It is brief, rapid, jerky, irregular and unpredictable movements, commonly seen in rheumatic fever, chorea.

5. LOCATION FOR TRANSVERSE INJURY OF THE SPINAL CORD

(a) **Injury of C1-C4:** Phrenoparalysis, central paralysis of limbs. All sensation below the level of injury disappear.

(b) **Injury of C5-T2:** Peripheral paralysis of the upper limbs and central paralysis of the lower limbs. Sensory disturbance corresponding to the level of the injury and Horner's Syndrome can be seen.

(c) **Injury of T3-T12:** Central paralysis of the lower limbs. All sensation below the level of injury disappear.

(d) **Injury of L1-S2:** Peripheral paralysis of the lower limbs, sensory disturbance of the lower limbs and perineum.

Central disturbance of urination, such as retention of urine, intermittent incontinence of urine, can be seen at the injury of the spinal cord mentioned above.

(e) **Injury of S3-S5:** Usually no paralysis, sensory disturbance of the perineum, peripheral disturbance of urination (real urinary incontinence).

(f) **Injury of the Cauda Equina:** Symptoms of injury of the cauda equina are similar to the symptoms caused by injury of L1-S2 and S2-S5. At early stage or incomplete injury of the cauda equina, severe radiculargia of the lower limbs can be seen.

(g) **Incomplete Transverse Injury of the Spinal Cord:** Central paralysis and loss of deep sensation of the limbs can be seen at the diseased side. Loss of pain and temperature sensation can be seen at the opposite limbs.

(h) **Relationship Between the Spinal Segment and Vertebrae:** The spinal segment can be calculated as follows: The level of cervical segment equal to that the ordinal number of cervical vertebrae plus 1; The upper part of the thoracic segment equal to that the ordinal number of the thoracic vertebrae plus 2; The lower part of the thoracic segment (T10-T12) equal to that the ordinal number of the thoracic vertebrae plus 3. For example: T10 equal to the lumbar segment 1 to 2. T11 equal to the lumbar segment 3 to 5. T12 equal to the sacral segment 1 to 5.

6. LOCATION FOR INJURY OF THE PYRAMIDAL TRACT

(a) **Motor Cortex of Precentral Gyrus:** Opposite hemiplegia. Irritant disease site may lead to localized epilepsy.

(b) **Internal Capsule:** Hemiplegia, hemianesthesia. Sometime hemianopsia may be seen. Facial muscular paralysis of the hemiplegia side.

(c) **Brain Stem:** Crossed paralysis, peripheral paralysis of cranial nerve III, IV, V, VI, VII, XII at the disease side, central paralysis of the opposite side.

7. SYMPTOMS FOR INJURY OF CRANIAL NERVE

(a) **Olfactory Nerves:** Anosmia, hyperosphresia or heterosmia. Only one side dysosmia has clinical meaning. Nasal disease should be differentiated first. It is commonly seen in fracture of anterior cranial fossa, basal frontotemporal tumor, basicranial meningitis, hysteria (Hyperosphresia), tumor of temporal lobe etc.

(b) **Optic Nerve:** Hypopsia or anopia, visual field defect, change of optical fundus (papilloedema, optic neuritis, optic atrophy), blind-

ness etc. It is usually caused by diseases of eyes, such as retrobulbar neuritis, optic atrophy etc. Edema of optical fundus is often accompanied by Hypopsia and contraction of visual field. Bitemporal hemianopsia is commonly caused by disease of optic chiasm. Hemonymous hemianopsia of eyes is commonly caused by disease of retrochiasmatic area. Monocular blindness is often caused by disease of prechiasmatic area. Papilloedema is an important sign for intracranial hypertension, may be seen in intracranial tumor, encephalitis. Red optic papilla is retention damp-heat in the liver and gallbladder. Pale optic papilla is *Yin* deficiency of the liver and kidney.

(c) **Oculomotor Nerve:** Ptosis of upper eyelid, limited eye movement to interior, upper and down, so eyeball deviates to the lateral inferior side, asthenocoria or no pupillary light reflex, platycoria, ambiopia.

(d) **Trochlear Nerve:** Limited eye movement downwardly and no abduction of the eye, ambiopia.

(e) **Trigeminal Nerve:** Sensory disturbance of the facial skin, conjunctiva, mouth, tongue, soft-palate, hard palate and nasal mucosa; No reflex of cornea and mandible; masticatory paralysis or atrophy, or difficulty in opening mouth. Lock jaw may be seen if the motor branch of Trigeminal nerve is stimulated.

(f) **Abducent Nerve:** Internal strabismus, ambiopia.

(g) **Facial Nerve:** Facial muscular atrophy and hypominia.

Peripheral Paralysis: Difficult to frown, close eye, bulge cheek and show teeth, ptosis of labial angle.

Central Paralysis (middle, lower 2/3): Action of frown and closing eye exist, but difficult to bulge cheek and show teeth, ptosis of labial angle, often accompanied with hemiplegia.

(h) **Auditory Nerve:** Tinnitus, deafness. Deafness can be divided into:

Nervous Deafness: Tuning fork test, air conduction 7 bone conduction; Weber's test, bone conduction deviate to the health side.

Conductive Deafness: Tuning fork test, bone conduction 7 air conduction; Weber's Test, bone conduction deviate to the disease side.

(i) **Glossopharyngeal Nerve:** Ageusia at the back 1/3 of the ton-

gue, mild pharyngoplegia. Injury of glossopharyngeal nerve is often accompanied by injury of vagus nerve.

(j) **Vagus Nerve:** The soft palate of the disease side can not ascend. Uvula deviate to the health side.

(k) **Accessory Nerve:** The patient can not turn one's head and shrug one's shoulders.

(l) **Hypoglossal Nerve:** Paralysis of muscoli linguae, tongue to the health side. For periperal injury, paralysis and atrophy of muscoli linguae can be seen.

PART III RULE FOR INDICATIONS OF POINT AND PRINCIPLES FOR POINT SELECTION

1. RULE FOR INDICATIONS OF POINT

I Indicating the Local Disease Where Its Pertaining Channel and the Same Name Channel Running Through

Three hand-*Yin* channels run from the chest to the hand along the medial aspect of the upper limbs. For the diseases at the medial aspect of the upper limbs and chest, points from the three hand-*Yin* channels can be selected.

Three foot-*Yin* channels run from foot to the chest and abdomen along the medial aspect of the lower limbs. For the diseases at the medial aspect of the lower limbs and disorders of the chest and abdomen, points from the three foot-*Yin* channels can be selected.

Yangming channels of hand and foot run from hand to the head and then from the head to foot along the front aspect of the body. For diseases at the front aspect of the body points of *Yangming* channels of hand and foot can be selected.

Shaoyang channels of hand and foot run from hand to the head and then from the head to foot along the side aspect of the body. For diseases at the side aspect of the body, points of *Shaoyang* channels of hand and foot can be selected.

Taiyang channels of hand and foot run from hand to the head and then from the head to foot along the back aspect of the body. For diseases at the back aspect of the body, points of *Taiyang* channels of

hand and foot can be selected.

The *Du* channel runs on the back of the body along the middle line. For diseases at the middle part of the back and lumbus, points from the *Du* channel can be selected.

The *Ren* channel runs on the chest and abdomen along the middle line. For diseases at the middle line of the chest and abdomen, points from the *Ren* channel can be selected.

II Indicating Related Zang-Fu Organ Diseases of Its Pertaining and Connecting Channels

Lung channel of hand-*Taiyin* pertains the lung, connects with the large intestine. Points of the lung channel and large intestine channel can indicate the diseases of channel and *Zang-Fu* organ of the lung channel and large intestine channel, such as: fever, cough, asthma, sore throat, borborygmus and diarrhea. Others are the same.

III Indicating Indications of Its Pertaining and Its Connecting Channels

The lung dominates skin and hair. The kidney dominates bone. The spleen dominates muscles. The liver dominates tendons and the heart dominates blood and vessels. So points of the lung channel and large intestine channel can indicate acute urticaria; Points of the kidney channel and bladder channel can indicate compression fracture; Points of the spleen channel and stomach channel can indicate acute paralysis; Points of the liver and gallbladder channel can indicate acute sprain; Points of the heart and pericardium channel can indicate palpitation.

2. PRINCIPLES FOR POINT SELECTION

I Selection of Nearby Points

All the diseases (but local ulceration) can be treated by selection of local points and adjacent points. Such as: Selecting *Taiyang* (Extra 1) and *Fengchi* (GB 20) for headache. Selecting *Zhongwan* (Ren 12) and *Weishu* (B 21) for gastralgia. Selecting *Tiantu* (Ren 22), *Tanzhong* (Ren 17) and *Feishu* (B 13) for asthma. Selecting *Baihui* (Du 20) and *Yintang* (Extra 2) for dizziness etc.

II Selection of Specific Points

For diseases of *Zang-Fu* organ, the *He* (sea) points and *Yuan* (Primary) points of its pertaining *Zang-Fu* organ can be selected. For diseases of both exterior and interior channels, the *Luo* (Connecting) points can be selected. For the acute syndromes and heat syndromes, the *Ying* (Spring) points and *Xi* (cleft) points can be added. Such as: Selecting *Zusanli* (St 36), *Taibai* (Sp 3), *Yinlingquan* (Sp 9) and *Chongyang* (Sp 12) for stomach-ache; Selecting *Liangqiu* (St 34), *Neiting* (St 44), *Dadu* (Sp 2) and *Diji* (Sp 8) for acute enteritis. For diseases of both spleen and stomach, selecting *Gongsun* (Sp 4) and *Fenglong* (St 40).

III Selection of Points Along Channel

Selection of points along channel can also mean selection of distant points. Distant refers to a location far from the diseased area. Generally, these points are located below the elbows and knees. Points on the four extremities are selected for disorders of the head, trunk and *Zang-Fu* organs. Such as: Selecting *Hegu* (LI 4) to treat toothaches selecting *Zhiyin* (B 67) to treat pain at the occipital region and selecting *Neiguan* (P 6) to treat disorder of the heart, etc.

IV Selection of Symptomatic Points

For example: *Zusanli* (St 36) is selected to treat epigastric and abdominal disorder. *Hegu* (LI 4) is selected to treat facial disorder. *Weizhong* (B 40) is selected to treat back and lumbar disorder. *Lieque* (L 7) is selected to treat diseases of the head and nape; *Neiguan* (P 6) is for disorders of the heart and chest. *Sanyinjiao* (Sp 6) is for the lower abdominal disorders. *Zhigou* (SJ 6) is for the hypochondriac disorders. *Yanglingquan* (GB 34) is for the disorders of the liver and gallbladder; *Jueni*-syndrome can be treated by *Taichong* (Liv 3). Convulsion can be treated by *Houxi* (SI 3). High fever can be treated by *Dazhui* (Du 14). *Renzhong* (Du 26) is selected to treat loss of consciousness in emergency cases; *Zhibian* (B 54) is selected to treat disorders of the external genitals and urethral orifice. *Ashi* point is selected for pain; *Lanweixue* (Extra 37) is selected to treat appendicitis and *Dannangxue* (Extra 39) is selected to treat disorders of biliary tract etc. All these points have specific therapeutic effect on

some diseases, which can be selected in combination with other points to treat acute syndromes.

CHAPTER TWO

Manipulation of Acupuncture and Moxibustion for Acute Syndromes

Therapeutic effect of acupuncture and moxibustion is closely related to manipulations of acupuncture and moxibustion and the different kinds of acupuncture and moxibustion treatments. So a perfect manipulation and familiarity with different acupuncture and moxibustion treatments are the key points for a good therapeutic effect in the treatment of acute syndromes with acupuncture and moxibustion.

PART I NEEDLING TECHNIQUES AND MOXIBUSTION FOR ACUTE SYNDROMES

1. NEEDLING TECHNIQUES

I The Fundamental Manipulation Techniques

The fundamental manipulation techniques includes: Basic manipulations, auxilliary manipulations and common needling methods. These are the basic needling techniques for inducing arrival of Qi, enhancing the needling reaction. Based on these, reinforcing and reducing method can be performed. These are also the basic manipulations techniques for application of acupuncture to treat acute syndromes.

(a) Basic Manipulations:

(1) *Twirling and Rotating*: Twirl and rotate the needle backward and forward continuously with the thumb, index finger and middle finger.

(2) *Lifting and thrusting*: Lift and thrust the needle body in the point perpendicularly with the thumb, index finger and middle finger.

Basic manipulations are the basis for all other manipulations, which are often applied in clinic in combination with other manipulations.

(b) Auxiliary Manipulations:

(1) *Xunfa*: Slightly press the skin along the course of the channel to promote the arrival of *Qi*. It is used in the patient whose needling sensation is delayed due to deficiency of *Qi*.

(2) *Shefa*: Heavily press the skin along the course of the channel to promote the arrival of *Qi*. It is used in the patient whose needling sensation is delayed due to excess of *Qi*.

(3) *Tanfa*: Pluck the handle of the needle lightly, causing the tip of the needle to tremble and strengthening the stimulation to obtain *Qi*.

(4) *Zhenzhanfa*: Hold the needle with the fingers of the right hand and apply quick lift-thrust movement in small amplitude to cause vibration. It is applied to strengthen the needling sensation.

(5) *Yiaofa*: Shake the needle body to strengthen the needling sensation.

(6) *Feifa*: Twirl the needle quickly in large amplitude. Twirl the needle and separate the thumb and index finger from it. Repeat it for several times until the needling sensation is strengthened.

(7) *Guabingfa*: The thumb of the right hand is placed on the tail end to hold the needle steady, then scrap the handle with the nail of the index or middle finger of the right hand upward from downward or vice versa. It is applied to strengthening needling sensation.

(8) *Quezhuofa*: Hold the needle with the fingers of the right hand and apply quick lift-thrust movement in moderate or small amplitude. Movement of the needle body in the point acts like a sparrow pecking at the rice. It is used to strengthen the needling sensation.

(9) *Panfa*: Twirl and rotate the handle of the needle in large amplitude, look like a lower millstone. It is applied in reducing

method.

(10) *Cuofa*: Rotate the needle clockwise or counter-clockwise alone, look like twisting a thread. It is applied to strengthen the needling sensation and kill pain.

(11) *Lufa*: Press the handle of the needle to make it bend, like bow-shaped. It is used to strengthen the needling sensation, induce arrival of *Qi* and promote the circulation of *Qi*.

(c) Common Needling Methods:

These method are applied to the local pain with wide range and at deep position.

(1) *Hegu Puncture*: A technique in which the needle is inserted into the muscles of the affected area. After arrival of *Qi*, the needle is withdrawn to surface. Then the needle is inserted again obliquely right and left just like the claws of the chicken.

(2) *Adjacent Puncture*: A method in which the the needling is applied to the affected area vertically and laterally with one needle each.

(3) *Triple Puncture*: A method in which the needles are inserted at three spots simultaneously, with one in the center and the other two other sides.

(4) *Quintuple Puncture*: A method in which the needles are inserted at five spots with one in the center and the four scattered around it.

(5) *Relay Puncture*: A method in which the needles are inserted to the points along the channel one by one.

II Reinforcing and Reducing Method

Reinforcing and reducing are two corresponding methods based on the guide line set in *Internal Classic* i.e. reinforcing for the deficiency-syndrome and reducing for the excess-syndrome. This purpose can be achieve by acupuncture through different manipulations. The basic reinforcing and reducing methods and comprehensive reinforcing and reducing methods can be divided.

(a) Basic Reinforcing and Reducing Method:

(1) *Reinforcing and Reducing by Lifting and Thrusting the Needle*:

Reinforcing Method: lift the needle gently and slowly while trust it heavily and rapidly.

Reducing Method: lift the needle heavily and rapidly while thrust it gently and slowly.

(2) Reinforcing and Reducing by Twirling and Rotating the Needle:

Reinforcing Method: rotate the needle forward heavily and rotate it backward lightly with the thumb.

Reducing Method: rotate the needle forward lightly and rotate it backward heavily with the thumb.

(3) The Reinforcing and Reducing Achieved by Rapid and Slow Insertion and Withdrawal of the Needle:

Reinforcing Method: insert the needle slowly and withdraw it rapidly.

Reducing Method: insert the needle rapidly and withdraw it slowly.

(4) The Reinforcing and Reducing Achieved by the Direction the Needle Tip Pointing to:

Reinforcing Method: the needle tip follows the running course of the channel.

Reducing Method: the needle tip points against the running course of the channel.

(5) The Reinforcing and Reducing Achieved by Means of Respiration:

Reinforcing Method: insert the needle when the patient breath in and withdraw it when the patient breath out.

Reducing Method: insert the needle when the patient breath out and withdraw it when the patient breath in.

(6) The Reinforcing and Reducing Achieved by Keeping the Hole Open or Close:

Reinforcing Method: on withdrawing the needle, press the hole quickly to close it.

Reducing Method: on withdrawing the needle, shake it to enlarge the hole.

(7) Conducting *Qi*: gently and evenly lift, thrust, twirl and rotate the needle. i.e. even manipulation.

(b) Comprehensive Reinforcing and Reducing Methods:

(1) Setting the Mountain on Fire: At the dept of 0.5 *cun* (heaven section) and the arrival of *Qi* is achieved, the needle is lifted and

thrust for nine times. Then the needle is inserted to a depth of 1 *cun* (human section) and lifted and thrust for another nine times. After that the needle is inserted to a depth of 1.5 *cun* (earth section) and lifted and thrust for nine times too. This is one operation. Repeated operations can be conducted for several times until a warm feeling is felt. Quickly withdraw needle and press the hole. May use in combination with reinforcing method of twirling and rotating.

Regardless of the section, time, thrust until a warm feeling is felt. It is a simple reinforcing method, and indicates all kinds of deficiency and cold syndromes.

(2) Penetrating-Heaven Coolness: At the depth of 1.5 *cun* (earth section) and arrival of *Qi* is achieved, the needle is lifted quickly and thrust slowly for six times. After that the needle is lifted a depth of 1 *cun* (human section) and given the same operation. Then the needle is further lifted to a depth of 0.5 *cun* (heaven section) and given the same operation too. Repeated operation can be conducted for several times until a cool feeling is achieved withdraw the needle and let the hole open. May use in combination with reducing method of twirling and rotating.

Regardless of the section, time, lift the needle heavily and rapidly while thrust it gently and slowly until a cool feeling is excess and heat syndromes.

(3) There is *Yang* in the *Yin*: Two sections: First at the earth section, the needle is lifted quickly and thrust slowly for six times. After that the needle is lifted to the heaven section, lifted quickly and thrust slowly for nine times. This is one operation. The patient may get a cool feeling first and then a warm feeling. May use in combination with twirling and rotating method. It indicates deficiency syndromes accompanied with excess.

(4) There is *Yin* in the *Yang*: Two sections: First at the heaven section, the needle is thrust quickly and lifted slowly for nine times. After that, the needle is inserted to the earth section, lifted quickly and thrust slowly for six times. This is one operation. The patient may get a warm feeling first and then a cool feeling. May use in combination with twirling and rotating method. It indicates excess syndromes accompanied with deficiency.

(5) *Long-Hu Jiaozhan* Method: The arrival of *Qi* is achieved and at the heaven section, the needle is rotated left (left is *Long*) for one circle (accompanied with twirling the needle), thrust quickly and lifted slowly. After that, the needle is rotated right for one circle (accompanied with twirling the needle), lifted quickly and thrust slowly. After nine times like this, a warm feeling may be felt. It indicates painful syndrome of cold type. Then the needle is inserted to the earth section and arrival of *Qi* is achieved, the needle is rotated right (right is *Hu*) for one circle, and lifted quickly and thrust slowly. After that, the needle is rotated left for one circle and thrust quickly and lifted slowly. Repeated six times like this, a cool feeling may be felt. It indicates painful syndrome of heat type.

(6) *Jintain* Method: After arrival of *Qi* is achieved, thrust the needle quickly and heavily for several times, so as to strengthen the acupuncture feeling.

(7) *Chouti* Method: After arrival of *Qi* is achieved, lift the needle quickly and heavily for several times, so as to decrease or remove acupuncture feeling.

(8) *Ziwudaojiu* Method: After arrival of *Qi* is achieved, first thrust the needle quickly and heavily and lift it slowly and lightly for nine times, then lift the needle quickly and heavily and thrust it slowly and lightly for six times. Combine with twirling and rotating method at the same time. This method can conduct *Qi* of *Yin* and *Yang*, reinforcing deficiency and reducing excess simultaneously. It is with function of relieving edema with diuretics, and indicates edema, flatulence due to disorder of vital energy, etc.

(9) *Cangguidianxue*: After arrival of *Qi* is achieved, withdraw the needle to the superficial section, and then insert it up, down, left and right again by changing the direction of the needle tip. Insert the needle slowly just like the tortoise search for cave in the earth. This method is to show the dredging of meridians passage and promoting *Qi* circulation.

(10) *Baihuyiaotou* Method: After arrival of *Qi* is achieved, pluck the handle of the needle and lift the needle at the same time. Repeat for several times.

(11) *Canglongbaiwei*: After arrival of *Qi* is achieved, regulate the needle tip pointing to the disease place, then push down the needle

handle and shake the needle left and right.

(12) *Jinqi* Method: After insertion of needle, continually thrust the needle quickly and heavily for 3 to 5 times. The withdraw it slowly and lightly to the subcutaneous level. Repeat several times.

III The Main Points of Operation for Manipulations in Acute Syndromes

(a) **Killing Pain and Anti-Bleeding:** Mainly apply continuous twirling and rotating method, such as *Longhujiaozhan* method.

(b) **Regulative Function:** Mainly apply lifting and thrusting method, such as: reinforcing method of setting the mountain on fire, reducing method of penetrating heaven coolness.

(c) **Bacteriostasis and Anti-Inflammation:** Mainly apply in combined with twirling & rotating method and lifting & thrusting method.

IV Precautions for Manipulations in Acute Syndromes

(a) It takes some time for acupuncture to achieve its therapeutic effects. So when applying acupuncture to rescue the acute syndromes, time for manipulating the needle and retaining the needle should be longer than half hour, or even long to 2-4 hours.

(b) When treatment of acute syndromes with acupuncture, the treatment should not be limited in daily treatment or treatment every two days. According the pathological condition, two to four treatments a day, or even treatment every 2-4 hours can be applied.

(c) During treatment of acute syndromes with acupuncture, operator should be careful to avoid acupuncture accident.

2. MOXIBUSTION

Moxibustion treats and prevents diseases by applying heat and pharmacological action of the moxa leaf to points or certain location of the human body. Moxibustion functions to warm meridians and induce the smooth flow of *Qi* and blood, expel cold to kill pain, to rescue *Yang* from collapse, to prevent diseases and keep the body in health. Moxibustion is specially good for the acute syndromes of cold and deficiency type, particularly for the rescue of emergency diseases due to collapse of *Yang*. It is often used in combination with

acupuncture. It is the most commonly used methods in moxibustion with moxa cones and moxibustion with moxa sticks, particularly with moxa cones.

I Moxibustion with Moxa Cones

(a) Direct Moxibustion: A moxa cone is placed directly on the point and ignited is called "direct moxibustion"; and is also known as "open moxibustion", which was widely used in the ancient times with better results. This type of moxibustion is subdivided into scarring moxibustion and non-scarring moxibustion according to whether the local scar is formed or not after moxibustion.

(1) Scarring Moxibustion (also known as "festering moxibustion"): Prior to moxibustion, apply some onion or garlic juice to the site in order to increase the adhesion of the moxa cone to the skin, then put the moxa cone on the point and ignite it until it completely burns out. Repeat this procedure for five to ten times. This method may lead to a local burn, blister, festering and scar after healing. Indications are certain chronic diseases such as asthma.

(2) Non-scarring Moxibustion: A moxa cone is placed on a point and ignited. When half or two thirds of it is burnt or the patient feels a burning discomfort, remove the cone and place another one. No blister should be formed and therefore should be no festering and scar formation. Indications are diseases of chronic, deficient and cold nature such as asthma, chronic diarrhea, indigestion etc.

(b) Indirect Moxibustion: The ignited moxa cone does not rest on the skin directly but is insulated from the skin by one of four types of materials.

(1) Moxibustion with Ginger: Cut a slice of ginger about 0.5 cm thick, punch numerous holes on it and place it on the point selected. On top of this piece of ginger, a large moxa cone is placed and ignited. When the patient feels it scorching, remove it and light another. This method is indicated in syndromes caused by weakness of the stomach and spleen such as diarrhea, abdominal pain, painful joints and symptoms due to *Yang* deficiency.

(2) Moxibustion with Garlic: Cut a slice of garlic about 0.5 cm thick (a large single clove of garlic is desirable), punch holes in it, put it on the point with the ignited moxa cone above. Remove the cone

when the patient feels it scorching. This method is indicated in scrofula, tuberculosis, the early stage of skin ulcer with boils, poisoning insect bite, etc.

(3) Moxibustion with Salt: This is usually applied at the umbilicus, so it is also called "moxibustion at *Shenque* (Ren 8) point". Fill the umbilicus with salt to the level of the skin, place a large moxa cone on the top of salt and then ignite it (If the patient's umbilicus is not concave in shape, a piece of wet noodle can be put around the umbilicus then fill salt in it). The moxa cone can be placed and ignited on the top of it. This method is effective in cases of abdominal pain, vomiting and diarrhea, pain around the umbilicus, pain caused by hernia, prolonged dysentery, etc. In addition, manipulation with salt has the function to restore *Yang* from collapse, e.g. syndromes of excessive sweating, cold limbs and undetectable pulse. Large moxa cones may be used successively until sweating stops, pulse restores and the four extremities become warm.

(4) Moxibustion with Monkshood Cake: A coin-size cake made of monkshood powder mixed with alcohol, is punched with numerous holes in it, and placed on the site for moxibustion with the moxa cone ignited and burnt on the top of it. Since it is of heat nature, the monkshood may warm *Yang* and expel cold. This method is only suitable to treat deficient, and persistent *Yin*-cold syndromes, such as impotence and early ejaculation caused by declination of the *Mingmen* fire.

II Moxibustion with Moxa Sticks

Moxibustion with moxa sticks includes mild-warm moxibustion and sparrow-pecking moxibustion. The moxa stick can be divided into pure moxa stick and herbal moxa stick. Apply a lighted moxa stick over the selected point. It is easy to control heat and time during moxibustion, and the therapeutic effect is good, so it is often used today. This method includes two kinds: mild-warm moxibustion and sparrow-pecking moxibustion.

(a) Mild-Warm Moxibustion: Apply an ignited moxa stick over the point to bring a mild warmth to the local area for five to ten minutes until the local area is red.

(b) "Sparrow-Pecking" Moxibustion: When this method is

applied, the ignited moxa stick is rapidly pecked over the point, paying attention not to burning the skin. In addition, the ignited moxa stick may be evenly moved from left to right or in circular movement.

III Principles for Moxibustion and Precautions

(a) Moxibustion is generally applied to *Yang* portion first, then *Yin* portion. When it is applied to points at the upper part, points at the lower part should be selected at the same time, so as to conduct heat toward downward. For systemic diseases and disorders of *Zang-Fu* organ, both side points should be selected. For local or one-side diseases, local or one-side points can be selected.

(b) The volume for moxibustion, including the size of moxa cone or duration of the moxa stick application should be in parallel to the patient's pathological condition, general constitution, age and the site where moxibustion is to be applied. Generally, three to seven moxa cones are used for each point, and ten to fifteen minutes for the application of moxa stick.

(c) Scarring moxibustion should not be applied to the face and head, and the area in the vicinity of the large blood vessels. Some points are not suitable for moxibustion, because they are close to the vital organs or arteries. The patient with heat due to *Yin* deficiency or high fever of excess type is not allowed to be treated by moxibustion.

(d) After moxibustion, different degree of burns may remain in the local region. Take care to prevent infection. If pus is formed, the blister should be dressed to prevent further infection.

(e) The process of moxibustion: Clinically, moxibustion is applied to the upper part first and then the lower part. Treat the back first, the abdominal region second. The head and body first and the four extremities second. But the sequence should be given according to the pathological conditions.

3. GENERAL PRINCIPLES FOR TREATMENT OF ACUTE SYNDROMES WITH ACUPUNCTURE

(a) **Reducing Method for Excess and Heating Syndromes:** All excess syndromes and heat syndromes or coma, convulsion etc. can

be treated by selecting the *Du* channel and *Jing* (well) point, *Ying* (spring) point with acupuncture or pricking for bloodletting with the three-edged needle, reducing method is applied mostly.

(b) **Reinforcing Method for Deficiency and Cold Syndromes:** All deficiency syndrome, cold syndrome or shock can be treated by mainly selecting points from the *Ren* channel and stomach channel of foot-*Yangming* with acupuncture and moxibustion, mainly with moxibustion. Reinforcing method is applied mostly.

(c) **Selecting Corresponding Points for Pain Syndromes:** For severe pain, the corresponding points can be selected according to the pain place at the front, side or back aspect of the human body, with long time of manipulating the needle continuously (longer than 10 minutes).

(d) **Selecting Points from the Channels of the Lung, Liver and Spleen for Bleeding Syndromes:** For bleeding syndromes, mainly selecting points from the channels of the lung, liver and spleen with acupuncture. According to the pathological condition, reinforcing or reducing methods can be applied.

PART II OTHER RECOMMENDED THERAPIES FOR ACUTE SYNDROMES

I. EAR ACUPUNCTURE

Ear acupuncture treatment treats and prevents diseases by stimulating certain points on the auricle with needles, pressing, pricking for bloodletting, injection, massage and moxa. Ear acupuncture treatment has a wide range of indications in the treatment of acute syndromes, such as: different painful syndromes, inflammatory diseases, dysfunction diseases, allergic diseases and endocrinopathy. It has remarkable effect of killing pain.

(a) **Commonly Used Ear Points in Treatment of Acute Syndromes and Their Indicates:**

(1) Middle Ear (diaphragm):

Location: Helix crus.

Indications: Hiccup, jaundice, disease of the stomach and esophagus.

(2) Ear Apex:

Location: At the tip of auricle and superior to helix when folded towards tragus.

Indication: Fever, hypertension, inflammation of the eyes, painful diseases.

(3) Urethra:

Location: On helix at level with the lower border of inferior antihelix crus.

Indications: Frequent, urgent and painful urination, retention of urine.

(4) Helix 1-6:

Location: Region from lower border of auricular tubercle to midpoint of lower border of lobule is divided into five equal parts. The points marking the divisions are respectively Helix 1, Helix 2, Helix 3, Helix 4, Helix 5, Helix 6.

Indications: Fever, tonsillitis, hypertension.

(5) Interior Tubercle (Urticaria or Allergic Point):

Location: At the upper part of scapula midpoint between finger and wrist.

Indications: Urticaria, itch of skin, asthma.

(6) Ischium (Sciatic Nerve):

Location: At medial 2/3 of the inferior antihelix crus.

Indications: Sciatica.

(7) End of Inferior Antihelix Crus (Sympathetic Nerve):

Location: The terminal of inferior antihelix crus.

Indications: Pain of internal organs, palpitation, spontaneous sweating, night sweating, functional disorders of autonomous nerve system.

(8) Cervical Vertebrae, Thoracic Vertebrae, Sacral Vertebra:

Location: A curved line from helixtragic notch to the branching area of superior and inferior antihelix crus can be divided into 3 equal segments. The lower 1/3 of it is Cervical Vertebrae, the middle 1/3 is Thoracic Vertebrae, and the upper 1/3 in Lumbarsacral Vertebra.

Indications: Pain at corresponding part of the spine (Cervical, Thoracic and Lumbarsacral Vertebrae), mastitis, pain at the chest and abdomen, peritonitis.

(9) Neck, Chest, Abdomen:

Location: On the border of cavum conchae of Cervical Vertebrae, Thoracic Vertebrae and Lumbarsacral Vertebrae.

Indications: Strained neck, torticollis, pain and stuffiness of the chest, lumbago, abdominal or gynecological diseases.

(10) Ear-Shenmen:

Location: At the bifurcating point between superior and inferior antihelix crus, and at the lateral 1/3 of the triangular fossa.

Indications: It is with functions of sedation, calming mind, relieving pain and clearing away heat. Insomnia, Pain.

(11) Triangular Depression (Uterus, Seminal Palace):

Location: In the triangular fossa and in the depression close to the midpoint of the helix.

Indications: Gynecological diseases and syndromes, such as dysmenorrhea, dysfunctional uterine bleeding, impotence, prostatitis, etc.

(12) Supratragic Apex:

Location: At the tip of upper protuberance on border of tragus.

Indications: Fever, pain, hypertension.

(13) Infratragic Apex (Adrenal):

Location: At the tip of the lower tubercle on border of tragus.

Indications: Rheumatic pain, pain, coma, syncope, itch of skin, urticaria, allergic reaction, etc.

(14) Pharynx-Larynx:

Location: Upper half of medial aspect of tragus.

Indications: Acute and chronic pharyngitis, laryngitis and tonsillitis.

(15) Antitragic Apex (Soothing Asthma):

Location: At the tip of the antitragus.

Indications: Asthma, bronchitis, parotitis and itching of the skin.

(16) Occiput:

Location: At the posterior superior corner of lateral aspect of antitragus.

Indications: Dizziness, headache, Insomnia.

(17) Brain (Subcortex):

Location: Medial aspect of the antitragus.

Indications: Pain, dizziness, coma, syncope, insomnia.

(18) Esophagus:

Location: At the medial 1/3 of inferior aspect of helix crus.

Indications: Dysphagia, esophagic diseases.

(19) Cardiac Orificé:

Location: At the lateral 1/3 of inferior aspect of helix crus.

Indications: Cardiospasm, nausea, vomiting.

(20) Stomach:

Location: At the area where helix crus terminates.

Indications: Gastralgia, vomiting, indigestion.

(21) Intestine (Duodenum, Small Intestine, Appendix, Large Intestine):

Location: From the area where helix crus terminates to the medial 1/3 of superior aspect of helix crus, which can be divided into 4 equal parts. These are Duodenum, Small Intestine, Appendix, Large Intestine.

Indication: Duodenal ulcer, indigestion, diarrhea, appendicitis, enteritis, palpitation, constipation.

(22) Liver:

Location: At the posterior aspect of Stomach and Duodenum.

Indications: Hepatitis, hypochondiac pain, eye diseases.

(23) Pancreas (Gallbladder):

Location: Between the Liver and Kidney.

Indications: Diseases and syndromes of bile duct, pancreatitis, migraine, etc.

(24) Kidney:

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

Indications: Lumbago, nephritis, tinnitus and deafness.

(25) Ureter:

Location: Between Kidney and Bladder.

Indications: Stone and colic pain of the ureter.

(26) Bladder:

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

Indications: Cystitis, retention or urine.

(27) Heart:

Location: In the central depression of cavum conchae.

Indications: Palpitation, angina pectoris, insomnia, hysteria, etc.

(28) Lung:

Location: Around Heart.

Indications: Cough and asthma, skin diseases.

(29) Spleen:

Location: Inferior to Liver, at the lateral and superior aspect of cavum conchae.

Indications: Abdominal distention, dysfunctional uterine bleeding, indigestion.

(30) Intertragus (Endocrine):

Location: At the base of cavum conchae in the intertragic notch.

Indications: Dysfunction of the endocrine system, climacteric syndrome, irregular menstruation.

(31) Frontal Tragic Notch (Eye 1):

Location: On the lateral and anterior side of intertragic notch.

Indications: Glaucoma, hordeolum.

(32) Back Tragic Notch (Eye 2):

Location: On the lateral and inferior aspect of intertragic notch.

Indications: External eye inflammation, glaucoma.

(33) Eye:

Location: In the center of 5th section of the ear lobe.

Indications: Acute conjunctivitis, electric ophthalmitis and other eye diseases.

(34) Internal Ear:

Location: In the 6th section of the ear lobe.

Indications: Auditory vertigo.

(35) Tonsil:

Location: In the 8th section of the ear lobe.

Indications: Acute tonsillitis.

(36) Groove of Inferior Helix Crus (Groove for Lowering Blood Pressure):

Location: Though the backside of superior antihelix crus and inferior antihelix crus, in the depression as a "Y" form.

Indications: Hypertension.

(b) Principles for Selection of Ear Points:

(1) Selection of points according to disease location: Such as: Point Stomach for gastralgia. Point Middle Ear for hiccup, Point End

of Inferior Antihelix Crus for dysfunction of internal organs.

(2) Selection of points according to the theories of traditional Chinese medicine, such as: Eye disease can be treated not only by selection of Point Frontal Tragic Notch and Point Back Tragic Notch, but also by selection of Point Liver; Point Lung can be selected for skin diseases because the lung dominates the skin and hair; Point Liver for gallbladder diseases as the gallbladder is exteriorly-interiorly related to the liver; Ear *Shenmen* for palpitation, insomnia, etc., because it is with function of sedation and calming the mind.

(3) Selection of points according to the theories of modern medicine: Such as: Dysmenorrhea can be treated not only by selection of Point Triangular Depression, but also by selection of Point Brain and Point Intertragus.

(4) Selection of points according to clinical experience: e.g. internal organs diseases are often treated by selection of both side ear points; Local diseases are often treated by selection of points on disease side; some time, the contralateral needling may be applied. The needling applied to the points on the right side when the affected region is on the left or vice versa; Or selecting points on the same side, such as disorders of the medial aspect of the limbs and abdominal aspect can be treated by selecting points on the abdominal aspect of the ear. Disorders of the lateral aspect of the limbs and back aspect can be treated by selecting points on back aspect of the ear.

(c) Manipulation: Different methods have been developed on the basis of filiform needling such as embedding needles, point injection, point burning, point bleeding and point cutting etc. However, filiform needling remains the most widely used.

(1) Needling: Auricular points and the needles (30 SWG, 0.5 *cun* needle) should be sterilized with 75% alcohol or 20% iodine. Stabilizing the auricle with the left hand, hold the filiform needle with the right hand and insert swiftly and perpendicularly into the point avoiding penetration through the ear. For the acute disease with strong constitution, heavy stimulation can be applied. For the weak constitution, light stimulation should be applied. Needles are usually retained for 15 to 30 minutes, but in cases with severe pain or chronic seizures, needles may be retained for a longer period (1 to 2

hours). Embedding needles or the round grain, such as vegetable seeds, mung bean and semen vaccariae, can be applied to the ear points, fixed with adhesive plaster. Tell the patient to press it from time to time, so as to strengthen the stimulation. Retaining the needles for 7 to 15 days (3 to 5 days for acute diseases) is one course of treatment. For the treatment of sprain of joint and soft tissue, during needling, tell the patient to exercise, one's joints, muscle properly, so as to help with relieving the symptoms. After the needle is removed, press the puncture hole with a dry cotton ball to avoid bleeding.

(2) Ear Point Injection: The injections which can be used in intramuscular injection can also be used in ear point injection. Selection of injection site is the same to selection of point in needling. Strict sterilization is important during manipulation. Slowly inject the injection into point with small syringe needle. Selection of injections is according to the pathological condition. 2 to 3 points for one time of point injection. 0.2 ml of injection of each point. 1 to 2 treatments a day. 3 to 5 days for one course of treatment. Rest 2 to 3 day between two treatments.

(3) Ear Point Burning: Apply an ignited drug, threat to point, to the sensitive spot and burn it swiftly and lightly, so as to stimulate ear point. It is an effective treatment for acute pain, ear pain and parotitis. Manipulation should be swiftly and lightly, so as to avoid formation of blisters.

Making of drug threat: Roll maxa wool and powder of *Lignum Santali* into the shape of a threat, using paper made of mulberry bark. The thick of the threat is similar to the handle of the needle.

(4) Ear Point Bleeding: Prick the small vessels of the ear back or ear apex, ear lobe, tragus etc. with a three-edged needle to obtain a little bloodletting, or after routine asepsis, cut the small vessels of the ear back with a lancet to obtain a little bleeding. 2 to 4 ml blood for each treatment. It is an effective treatment for acute diseases and fever. It can be added to the other acupuncture treatments or other therapy.

(5) Ear Point Cutting: After the ear points or sensitive spots are sterilized strictly, cut a small wound with a three-edged needle or lancet, then press the wound with a dry cotton ball and fix with an adhesive plaster to avoid infection. The wound should be smaller

than 0.1 cm and can penetrate through the cartilage of the auricle. A little bleeding can be seen. For acute diseases (include all kinds of inflammations), treatment every seven days. 1 to 2 points one time. Choose the point alternatively.

(d) Precautions:

(1) Strict antisepsis is necessary to avoid infection of the auricle. In case of inflammation or redness of the needle hole or distention and pain of the auricle, timely and appropriate measures should be taken. Needling is contraindications if frostbite or wound is present on the auricle.

(2) Ear acupuncture is not advisable for women during pregnancy under 2 to 5 months or for women pregnant under 5 to 9 months and with a history of miscarriage. Point Triangular Fossa, Point Tragic Apex, Point Brain, etc., should not be selected, so as to avoid miscarriage and premature labor.

(3) If sudden dizziness, nausea, stuffiness of the chest, pallor, sweating, coldness of extremities or other fainting symptoms occur during ear acupuncture treatment, the patient should be managed in the same manner as during ordinary body acupuncture.

(4) Aged and weak patient, or patient with over strain, hunger and nervous, should be in reclining position in order to avoid fainting.

2. NOSE ACUPUNCTURE

Nose acupuncture therapy treats diseases by stimulating certain points on the nose with needles. It mostly indicates acute diseases.

(a) Commonly Used Nose Points in Treatment of Acute Syndromes and Their Indications:

(1) Point Lung:

Location: At the midpoint between eyebrows.

Indications: Headache, acute rhinitis, nasal bleeding, coma, insomnia.

(2) Point Heart:

Location: At the root of the nose, midpoint between both inner canthus.

Indications: Palpitation, stuffiness of the chest, chest pain, insomnia.

(3) Point Liver:

Location: Below Point Heart and at the upper part of the nose bridge.

Indications: Hepatitis, hypochondriac pain, eye diseases, neausea, vomiting, hiccup.

(4) Point Spleen:

Location: Below Point Liver and at the lower part of the nose bridge.

Indications: Distention of abdomen, indigestion.

(5) Point Kidney:

Location: At the center of the nose tip.

Indications: Asthma, coma, dyspnea, pain at the back and lumbus.

(6) Point Ear:

Location: At the medial end of the eyebrow.

Indications: Eye diseases, headache, nose diseases.

(7) Point Gallbladder:

Location: Below the inner canthus and at the lateral aspect of Point Liver.

Indications: Diseases of bile duct, jaundice, hypochondriac pain.

(8) Point Stomach:

Location: Below Point Gallbladder and at the lateral aspect of Point Spleen.

Indications: Gastralgia, abdominal distention, indigestion.

(9) Point Large Intestine:

Location: At the center of the wing of the nose.

Locations: Nasal diseases, abdominal distention, enteritis, diarrhea.

(b) Principles of Point Selection:

(1) Selection of points according to disease location; such as: Point Heart for heart diseases, Point Stomach for stomach diseases.

(2) Selection of points according to sensitive spot: When an internal organ or a part of the body is diseased, reactions can be detected at the corresponding areas on the nose with the handle of the needle or a detector apparatus. Selecting these tender spot or sensitive spot to treat corresponding disease, very good effect can be achieved.

(3) Selection of points according to the theory of Zang-Fu organ:

Point Lung can be selected for skin diseases because the lung dominates the skin and hair. Point Heart can be selected for palpitation, insomnia, because the heart houses the mind.

(c) Manipulations:

(1) Needles: 28 to 30 SWG and 0.5 to 1.5 *cun* long needles can be used. Needle sterilization is the same as filiform needling.

(2) Insertion: The needle is usually inserted perpendicularly. According to the pathological condition and the nature of point, the direction of the needle tip may be changed. The needle is generally retained for 15 to 30 minutes. Manipulating the needle every 3 to 5 minutes. Embedding needle, point injection, electric stimulator etc. can be applied too.

(d) Precautions:

(1) Strict antisepsis is necessary to avoid infection. Needling should avoid the scar to avoid pain.

(2) When using a detector apparatus to search for sensitive spot, the skin of the nose should be cleaned with a dry cotton ball first, so as to avoid false positive reaction caused by moisture.

(3) Short and thin needles should be used for nose acupuncture therapy, because the muscle of the nose is thin and the skin of the nose is sensitive. Furthermore, short and thin needle is easier to handle and less painful. The depth of insertion and the amount of stimulation should be proper, so as to avoid pain.

3. SCALP ACUPUNCTURE

Scalp acupuncture therapy treats and prevents diseases by stimulating certain points and treatment lines (zones) on the scalp with needle. Location of the treatment lines (zones) are based on the theories of *Zang-Fu* organ and meridians and collaterals in combination with the localization of the cerebral cortex function.

(a) **Localization and Indications of Lines of Scalp Acupuncture:** There are 14 treatment lines for scalp acupuncture according to International Standard Plan.

(1) *Ezhong Xian*:

Location: Middle line of the forehead, 1 *cun* long from *Shenting* (Du 24), straight downward along the channel, belongs to the *Du*

channel.

Indications: Epilepsy, mental disorder, nasal diseases etc.

(2) *Epang Xian I*:

Location: Line 1 lateral to the forehead, 1 *cun* long from *Meichong* (B 3), straight downward along the channel, belongs to bladder channel of foot-*Taiyang*.

Indications: Coronary heart disease, angina pectoris, bronchial asthma, bronchitis, insomnia etc.

(3) *Epang Xian II*:

Location: Line 2 lateral to the forehead, 1 *cun* long from *Toulingqi* (GB 41), straight downward along the channel, belongs to gallbladder channel of foot-*Shaoyang*.

Indications: Acute and chronic gastritis, ulcer of the stomach and duodenum, diseases of the liver and gallbladder etc.

(4) *Epang Xian III*:

Location: Line 3 lateral to the forehead, 1 *cun* long from the point 0.75 *cun* medial to *Touwei* (St 8), straight downward and between the gallbladder channel of foot-*Shaoyang* (*Benshen*, GB13) and Stomach channel of foot-*Yangming* (*Touwei*, St 8).

Indications: Functional vaginal bleeding, impotence, seminal emission, prolapse of uterus, frequent and urgent urination.

(5) *Dingzhong Xian*:

Location: Middle line of the vertex, from *Baihui* (Du 20) to *Qian-ding* (Du 21) along the mid-line of head, belongs to the *Du* channel.

Indications: Diseases and symptoms of the lumbus, leg and foot, such as paralysis, numbness and pain; cortical polyuria, prolapse of rectum, infantile nocturia, hypertension, pain at the vertex.

(6) *Dingnie Qianxie Xian*:

Location: Anterior oblique to the vertex-temporal line, from *Qian-ding* (Du 21) 1.5 *cun* anterior to *Baihui* (Du 20), obliquely to *Xuanli* (GB 6). It goes across the bladder channel of foot-*Taiyang* and gallbladder channel of foot-*Shaoyang*, can be divided into 5 equal length parts.

Indications: Upper 1/5 for paralysis of the lower limbs; middle 2/5 for paralysis of the upper limbs; lower 2/5 for central facial paralysis, anaudia, salivation, cerebral arteriosclerosis etc.

(7) *Dingnie Houxie Xian*:

Location: Posterior oblique to the vertex-templeoral line, from *Baihui* (Du 20) obliquely to *Quibin* (GB 7). It goes obliquely cross the bladder channel of foot-*Taiyang* and gallbladder channel of foot-*Shaoyang*, can be divided into 5 equal length parts.

Indications: Upper 1/5 for paresthesia of the lower limbs, middle 2/5 for paresthesia of the upper limbs, lower 2/5 for paresthesia of the head and face.

(8) *Dingpang Xian* I:

Location: Line 1 lateral to the middle line of the vertex, 1 *cun* long to the middle line of the vertex, 2 *cun* long from *Tongtian* (B 7) backward along the channel, belongs to bladder channel of foot-*Taiyang*.

Indications: Diseases and symptoms of the lumbus and leg, such as paralysis, numbness, pain etc.

(9) *Dingpang Xian* II:

Location: Line 2 lateral to the vertex, 2 *cun* lateral to the middle line of the vertex, 2 *cun* long from *Zhengying* (GB 17) backward along the channel, belongs to the gallbladder channel of foot-*Shaoyang*.

Indications: Diseases and symptoms of the shoulder, arm and hand, such as paralysis, numbness, pain etc.

(10) *Nieqian Xian*:

Location: Anterior to the temporal line, from *Hanyan* (GB 4) to *Xuanli* (GB 6), belongs to the gallbladder channel of foot-*Shaoyang*.

Indications: Migraine, peripheral facial nerve paralysis and diseases of the mouth.

(11) *Niehou Xian*:

Location: Posterior to the temporal line, from *Shuaigu* (GB 8) to *Qubin* (GB 7), belongs to the gallbladder channel of foot-*Shaoyang*.

Indications: Migraine, dizziness, tinnitus, deafness etc.

(12) *Zhenshang Zhengzhong Xian*:

Location: Upper-middle line of the occiput, from *Qiangjian* (Du 16) to *Naohu* (Du 17), belongs to the *Du* channel.

Indications: Eye diseases, lumbago.

(13) *Zhenshangpang Xian*:

Location: Upper-lateral line of the occiput, 0.5 *cun* lateral and parallel to the upper-middle line of the occiput, belongs to the bladder channel of foot-*Taiyang*.

Indications: Cortical visual disturbance, cataract, myopia, lumbago.

(14) *Zhenxiapang Xian*:

Location: Lower-lateral line of the occiput, 2 *cun* long from *Yuzhen* (B 9) to *Tianzhu* (B 10), belongs to the bladder channel of foot-*Taiyang*.

Indications: Cerebellar ataxia, pain at the head back.

(b) Manipulations:

(1) Posture of the patient: Usually, sitting posture is selected for scalp acupuncture. For the patient with the history of fainting, supine posture can be chosen. The corresponding treatment lies can be selected according to pathological condition. The local scalp should be sterilized routinely.

(2) Insertion: Gauge 30 or 32, 1.5 *cun* length stainless steel filiform needles are used usually. Insert the needle swiftly into the subcutaneous level at the angle of 30 degree, after the needle tip gets into subaponeurotic space, insert the needle horizontally about 1 *cun* depth with manipulation of twirling and rotating method.

(3) Needling reaction: Generally the patient feels soreness, numbness, heaviness and distention. If the needle is too thick, the angle of insertion is too large or small, or the vessels are many the patient may feel pain, which can be relieved by regulating the angle and depth of insertion.

(4) Manipulation: After the arrival of *Qi* is achieved, retain the needle, manipulating the needle at intervals. Small range of twirling & rotating method and lifting & thrusting methods can be applied according to the pathological condition. At the same time, tell the patient to exercise one's disease limbs or trunk.

(5) Retaining the needle, Time for retaining the needle usually is 2 hours, may be up to 8 to 24 hours. Generally speaking, the longer retaining time, the better effects.

(c) Precautions:

(1) The scalp is rich with vessels and easy to bleed, so after withdrawing the needle quickly, press the punctured point for a while with a sterile cotton ball to prevent bleeding.

(2) It is not advisable to apply scalp acupuncture to the child and infant when one's fontanel is not closed, or the patient with injury of

the head and scalp, post operative wound, scar and tumor.

(3) During the needling, observe the patient closely, so as to avoid acupuncture accident.

(4) For the patient with acute disease, such as acute stage of cerebral hemorrhage, heart failure and weak constitution, scalp acupuncture should be applied very carefully.

4. DIGITAL COMPRESSION THERAPY

Digital compression therapy, which can also be called digital needle, treats and prevents diseases by pressing certain points or the tender spot at the margin of the bone with operator's finger tip.

(a) Application of the Digital Compression Therapy: Digital compression therapy is usually applied to the sensitive place of the human body, such as: ten digital tips, lateral and medial aspects of ungual root, area around the mouth, palm and sole, area around the wrist and ankle joints, chest, back and both sides of the spinal cord etc.

(b) Manipulation: Operator's finger tip presses the corresponding stimulation place closely, then press and slide at the point by force of the soreness, distention, numbness and pain. The finger nail should not hurt the skin.

Stimulation of digital compression can be divided into light, moderate and heavy. Light and moderate stimulation is used for painful diseases and obstinate disease; Heavy stimulation is for emergency help.

Light stimulation is when the patient feels light soreness and distention; Moderate stimulation is when the patient feels strong but tolerable feeling of soreness, numbness, distention and pain. Heavy stimulation is that the patient feels very strong feeling of soreness, numbness, distention and pain, almost intolerable.

(c) Indications of the Digital Compression Therapy: Acute diseases and symptoms, such as: sunstroke, coma, fainting, convulsion, different kinds of pain, hiccup, and vomiting.

(d) Precautions: Operator should trim one's nail before giving treatment and use perfect wrist force and finger force, so as to avoid hurting the skin: In winter, operator should warm one's hands before

giving treatment. It is not advisable to apply digital compression therapy to the abdomen and to the local place with rheumatic diseases, skin diseases and trauma.

5. POINT INJECTION THERAPY

Point injection therapy treats and prevents diseases by the method of combination of acupuncture and drug therapy. i.e. the medicated solution is injected into a point. Medicated solution of traditional chinese medicine and western medicine, which can be used for intramuscular injection, can also be used for point injection therapy. Medicated solution is injected into the corresponding points, tender spot and positive reaction spot on the body surface. In this way of combination of acupuncture and drug therapy, a quick and prolonged stimulation can be conducted to the corresponding disease organs through meridians and collaterals passage. So good comprehensive effects can be achieved.

(a) Injection Apparatus: The syringe can be 10 to 20 ml and syringe needle can be size 5, 6 or 7 according to clinical demand. Get the sterilized apparatus and injection ready.

(b) Selection of Point:

(1) Selecting the corresponding points according to pathological condition and principles for point selection in acupuncture treatment.

(2) Selecting the tender spot related to the disease, include local tender spot, and corresponding tender spot on the back, lumbar and limbs.

(3) Selecting abnormality of the subcutaneous layer at the related area, such as the back, abdomen and limbs, to the disease. Commonly seen abnormality is pigmentation, hard nodules, hard mass etc.

(c) Selection of Medicated Solution and Indication: Sterile water for injection, 0.9% sodium chloride injection and 5-10% glucose injection etc. These kinds of medicated solution have no specific therapeutic function, but it can make the stimulation strong and lasting. It can be used for diseases which can be dominated by acupuncture.

0.5 to 2% procaine injection is often used in point-blocking therapy. It can be used to treat different kinds of local painful diseases, such as trauma of the soft tissue, neuralgia etc. The injection should be injected into tender spot.

Medicated solutions, which are with some therapeutic function and can be used for intramuscular injection, such as: different kinds of vitamins, tissue fluid, antibiotics, extracts of Chinese herbs etc., can be used for point injection. The dosage for point injection is 1/10 to 1/2 of the ordinary dosage. These can be used to treat different kinds of acute and chronic diseases.

(d) Manipulation: Basic method is similar to the intramuscular injection. After arrival of *Qi* is achieved or needling reaction is spreaded, then injecting the solution into the point; Use light and slow lifting and thrusting method, small range of twirling and rotating method to induce needling reaction; Observe closely to see whether blood can be seen when withdrawing syringe. If yes, change the direction of insertion.

(e) Precautions:

(1) First check carefully the pharmacological action, potential incompatibility, side-effects, allergic reaction of the medicated solution. Skin test should be performed to check in allergic reaction. The injection with severe side-effect should be used carefully.

(2) Dosage of injection is according the point, range of the disease and pathological condition. Dosage for the head and facial area is small, about 0.2 to 1 ml; Dosage for four limbs and the back, lumbus, where the muscle is thick, can be large, about 2 to 20 ml.

(3) The injection should not be given into the articular cavity or the vein so as to avoid accident.

(4) Strict sterilization. Selecting less points for the aged patient or patient with weak constitution, dosage for first time of injection should be small. Other precautions are similar to the acupuncture treatment.

6. HAND ACUPUNCTURE

Hand acupuncture therapy treats and prevents diseases by stimulating certain points on the hand with needles. Because the skin

of the hand is sensitive to pain, so this therapy is often used to kill pain and to treat some acute diseases, such as: acute lumbar strain, torticollis, acute tonsillitis, convulsions due to high fever, and emergency help for coma.

(a) Commonly Used Points for Hand Acupuncture and Indications:

(1) Point for Pain of Medial Malleolus:

Location: On the radial side of the metacarpophalangeal joint of the thumb, at the junction of the red and white skin.

Indications: Pain of ankle joint.

(2) Point for Chest Pain:

Location: On the radial side of the interphalangeal joint of the thumb, at the junction of the red and white skin.

Indications: Chest pain, vomiting and diarrhea.

(3) Point for Pain of Eye:

Location: On the ulnar side of the interphalangeal joint of the thumb, at the junction of the red and white skin.

Indications: Inflammation of eye, eye diseases.

(4) Point for Pain of Shoulder:

Location: On the radial side of the metacarpophalangeal joint of the index finger, at the junction of the red and white skin.

Indication: Pain of the shoulder joint.

(5) Point for Pain of Forehead:

Location: On the radial side of the first interphalangeal joint of the index finger, at the junction of the red and white skin.

Indications: Pain of the forehead, colic of the stomach and intestine, appendicitis, pain of the knee, strain and pain of the ankle and digital joints.

(6) Point for Migraine:

Locations: On the ulnar side of the first interphalangeal joint of the fourth finger, at the junction of the red and white skin.

Indications: Pain of the chest and hypochondrium, migraine.

(7) Point for Pain of Head Back:

Location: On the ulnar side of the first interphalangeal joint of the fifth finger, at the junction of the red and white skin.

Indications: Acute tonsillitis, pain of the head back.

(8) Point for Pain of Spine:

Location: On the ulnar side of the metacarpophalangeal joint of the fifth finger, at the junction of the red and white skin.

Indications: Pain of the caudal and sacral, lumbago, acute interphalangeal ligament sprain.

(9) Point for Sciatica:

Location: On the dorsum of the hand, between the fourth and fifth metacarpophalangeal joints, close the fourth metacarpophalangeal joint.

Indications: Sciatica, pain of the hip joint and buttock.

(10) Point for Sore Throat and Toothache:

Location: On the dorsum of the hand, between the third and fourth metacarpophalangeal joints, close the third one.

Indications: Tonsillitis, toothache, sore throat, trigeminal neuralgia.

(11) Point for Pain of Neck and Nape:

Location: On the dorsum of the hand, between the second and third metacarpophalangeal joints, close the second one.

Indications: Torticollis, strain of the neck and nape.

(12) Point for Lumbago:

Location: On the dorsum of the hand, midway between the transverse wrist crease and metacarpophalangeal joint between the second and third metacarpal bones, and between the fourth and fifth metacarpal bones, two points on each hand.

Indications: Acute lumbar sprain, pain of the lumbus and legs.

(13) Point for Ascending Blood Pressure:

Location: At the midpoint of the transverse crease of the dorsum of wrist.

Indications: Low blood pressure due to different kinds of diseases.

(14) Point for Pain of Stomach and Intestine:

Location: At the midway between *Laogong* (P 8) and *Daling* (P 7).

Indications: Acute or chronic gastroenteritis, ulcer, biliary ascariasis.

(15) Point for Emergent Help:

Location: On the tips of the ten fingers, about 0.2 *cun* distal to the nails.

Indications: Emergency held for coma.

(16) Point for Calming Convulsion:

Location: On the palm of the hand, at the junction of the hyperthenar and hypothenar.

Indications: High fever, convulsion with syncope.

(b) Manipulation and Precautions for Hand Acupuncture

Therapy: Principles for point selection in hand acupuncture therapy mainly are the crossing combination of points, e.g. contralateral needling. Selecting points on the left hand to treat disorders on the right side and vice versa. Selecting points on both hands to treat disorders on both side of the body or systemic diseases. The points with similar indications can be used together, such as sore throat can be treated by selecting Point for Head Back and Point for Sore Throat. For concomitant symptoms, selecting points according the symptom, such as selecting Point for Calming Convulsion and Point for Headache to treat fever accompanied by headache.

Posture of the hand for the hand acupuncture should be in posture of a loose fist; Depth of insertion is about 0.3 to 0.5 *cun*; Perpendicular insertion can be applied to most of point (but Point for Lumbago) with strong stimulation of twirling and rotating method; Retaining the needle about 5 to 10 minutes. During manipulating the needle, tell the patient to exercise or massage disease site; In order to avoid fainting, a good explanation should be given to the patient before treatment and supine position should be chosen. When puncturing at the margins of the bone, be careful not to hurt the periosteum.

7. FOOT ACUPUNCTURE

Foot acupuncture therapy treats and prevents diseases by stimulating certain points on the foot with needles because the skin of the foot, particularly the skin of the sole, is sensitive, so this therapy is often used for resuce, killing pain and treatment of some acute diseases.

(a) Commonly Used Points for Foot Acupuncture and Indications:

(1) Liver Zone:

Location: On the sole of the foot, between the first and second phalanges, equal to the junction of the first and second metatarsal

bones.

Indications: Jaundice, hypochondriac pain, dizziness, convulsion, eye diseases.

(2) Kidney Zone:

Location: On the sole of the foot, between the second and third phalanges, equal to the junction of the second and third metatarsal bones.

Indications: Aphasia, dizziness, syncope, shock, headache, epilepsy, anuria.

(3) Lung Zone:

Location: On the sole of the foot, 0.5 *cun* posterior to the first phalanges, equal to the junction of the first and second metatarsal bones.

Indications: Chest pain, asthma, fever, itch of skin.

(4) Heart Zone:

Location: On the sole of the foot, 0.5 *cun* posterior to the second phalanges, equal to the junction of the second and third metatarsal bones.

Indications: Manic-depression syndromes, epilepsy, coma, chest pain, shock.

(5) Spleen Zone:

Location: On the sole of the foot, 1 *cun* posterior to Lung Zone, equal to 0.5 *cun* medial to Pericardium Zone.

Indications: Abdominal pain, diarrhea, bleeding diseases, indigestion.

(6) Pericardium Zone:

Location: On the sole of the foot, 1 *cun* posterior to Heart Zone, equal to 0.5 *cun* lateral to Spleen Zone.

Indications: High fever, convulsion with syncope, manic-depression syndromes, epilepsy, chest pain.

(7) Bladder Zone:

Location: On the sole of the foot, 0.5 *cun* posterior to the fourth phalanges, equal to the junction of the fourth and fifth metatarsal bones.

Indications: Pain of the lower abdomen, dysuria.

(b) Manipulation: Manipulation principles for point selection and indications are similar to the hand acupuncture therapy.

(c) Precautions:

(1) The skin of the sole of the foot is thick and sensitive, so a strong finger force and a quick insertion are needed in order to relieve pain.

(2) Foot acupuncture therapy is applied only to acute diseases and symptoms because it is painful. A supine position should be chosen. It is not advisable to apply the foot acupuncture to pregnant women and the patient with history of fainting.

CHAPTER THREE

Treatment of Acute Syndromes with Acupuncture and Moxibustion

PART I COMA

Coma is an emergency syndromes, mainly manifested by a Long period of unconsciousness. It is caused by severe disturbance of the brain function due to severe inhibition of the cerebral cortex and subcortical reticular structure resulting from many causes. According to degree of coma, It can be divided into semicoma, moderate coma and deep coma.

Coma can be caused by acute infectious diseases, craniocerebral injury, cerebrovascular accident, poisoning and other kinds of diseases which may involve the brain.

The TCM syndromes, which can result in coma, is commonly seen in the severe syndromes of exogenous attack and internal damage, such as: febrile diseases, apoplexy, syncope, epilepsy, infantile convulsion, malignant malaria. It is due to heat pathogen attacking the pericardium, blocking of the mind by phlegm, or upsurging of the Liver-wind Leading to disturbance of the mind.

Acupuncture has good effects on coma to regain the patient's consciousness and to save time for further emergency rescue.

During coma rescue with acupuncture, operator should know the patient's present illness and past history clearly, observe the degree of coma and do body examination carefully. So comprehen-

sive therapy can be applied if necessary.

1. MAIN POINTS OF DIFFERENTIAL DIAGNOSIS

I Degree of Coma

Semicoma: No active movement, no reflex to the environment, light and sound. Painful complexion and protective reflex to severe pain and stimulation (such as press supraorbital nerve) still exist. Reflex of cough, swallowing, pupil and cornea exist. No apparent change on respiration, pulse and blood pressure.

Moderate Coma: No reflex to any kind of stimulation. Protective reflex to severe pain stimulation exists, dullness of pupillary light reflex, weak corneal reflex, change in respiration, pulse and blood pressure may be seen.

Deep Coma: No reflex to all stimulations, disappearance of consciousness, sensation and voluntary movement, disappearance of light reflex, corneal reflex, swallow reflex and cough reflex, looseness of the muscle, weak myotonia, no tendon reflex, irregular respirations, lower blood pressure, incontinence of urine and stool.

II Case History

(a) Coma History: Differentiate whether coma occurs suddenly or develops slowly in the disease. Sudden onset of coma is commonly seen in cerebral vascular accident, craniocerebral injury, acute poisoning, sunstroke etc.: Slow onset of coma can be seen in metabolic diseases, such as hepatic coma, uremia, diabetes etc.

(b) Past History: Past history for all the diseases which the patient suffered.

(c) History of Drugs Before Coma: To see whether the coma is induced by drug or caused by poisoning due to drug.

(d) Accompanied:

(1) High Fever: Commonly seen in inflammation of the central nervous system and severe systemic inflammation.

(2) Convulsion: Commonly seen in cerebrovascular accident.

(3) Jaundice: Commonly seen in hepatic coma.

III Body Examination

(a) **Body Temperature:** High fever indicates severe infection; accompanied by dryness of skin indicates sunstroke; Low temperature indicates alcoholism, barbitism or peripheral circulatory failure.

(b) **Respiration:** Deep and rapid breathings is seen in metabolic diseases, acidosis; Slow breathing is seen in intracranial hypertension, alkalosis.

(c) **Pulse:** Slow pulse indicates heart block or intracranial hypertension; Rapid pulse indicates poisoning.

(d) **Blood Pressure:** High blood pressure indicates cerebrovascular accident or hypertensive encephalopathy, and intracranial hypertension; Low blood pressure indicates diabetic coma, alcoholism, barbitism etc.

IV Examination of the Nervous System

(a) **Fundus Examination:** Intracranial tumor, hematoma, hypertensive encephalopathy and other diseases, which can lead to intracranial hypertension, can result in fundus change, such as retinal congestion, optic disc atrophy etc.

(b) **Pupillary Examination:** Platy coria indicates atropine poisoning; Miosis indicates barbitism, uremia, hemorrhage of pons; One side platy coria indicates cerebrovascular accident; Patient's pupil changing from small to large during coma indicates that pathological condition is severe and dangerous.

(c) **Corneal Reflex:** Degree of coma can be divided by it.

(d) **Superficial Reflex, Deep Reflex, Pathologic Reflex and Meningeal Irritation Signs:** Degree of coma can be decided by these.

V Discrimination of Exogenous Attack and Internal Damage for Coma (See Table 3)

Further more, for coma due to *Guan Ge* (uremia), *Gu Zhang* (hepatic), *Xiao Ke* (diabetes), it is easy to be diagnosed though case history. Prognosis for these kinds of coma is poor.

2. TREATMENT

For coma rescue, waking up the patient from unconsciousness is the important point. During rescue of coma, keep the patient's respiratory tract clear.

I Acupuncture and Moxibustion Therapy

(a) **Body Acupuncture:** For excess syndrome, tense syndrome and heat syndrome, *Renzhong* (Du 26), *Shixuan* (Extra 24), *Hegu* (LI 4) and *Taichong* (Liv 3) etc. can be selected.

Manipulation: Strong stimulation and reducing method can be applied to *Renzhong* (Du 26), *Hegu* (LI 4) and *Taichong* (Liv 3) mainly with methods of lifting & thrusting and twirling & rotating, may also with methods of penetrating heaven coolness, *Longhushengteng*, *Longhujiaozhan* etc. Time for manipulating needles is 10 to 30 minutes, or manipulating needles until the patient regain one's consciousness. Pricking for bloodletting with three-edged needle can be applied to *shixuan* (Extra 24) (2 to 3 points each time). Method of pricking for bloodletting may be repeated according to the condition of the patient's consciousness.

(b) **Moxibustion:** For flaccid syndrome or syndrome of internal tense and external flaccid, acupuncture and moxibustion or mainly with moxibustion can be applied. For flaccid syndrome, *baihui* (Du 20), *Guanyuan* (Ren 4), *Shengue* (Ren 8), *Zusanli* (St 36) etc. can be selected; For syndrome of internal tense and external flaccid, *Renzhong* (Du 26), *Suliao* (Du 25), *Yongquan* (K 1) etc. can be selected.

Manipulation: Direct moxibustion with moxa cone or moxibustion with moxa sticks can be applied to *Baihui* (Du 20), *Guanyuan* (Ren 4), *Zusanli* (St 36) and *Shengue* (Ren 8) (indirect moxibustion with salt). Keep moxibustion until the patient regains one's consciousness, the limbs become warm, sweating stops, and pulse resumes.

Acupuncture may also be applied to *Renzhong* (Du 26), *Suliao* (Du 25) and *Yongquan* (K 1) with strong or moderate stimulation and reducing methods of lifting & thrusting and twirling & rotating, or stimulating with a pulse current apparatus.

Table 3 DISCRIMINATION OF EXOGENOUS ATTACK AND INTERNAL DAMAGE FOR COMA

Classification	Disease	Syndrome	Pathology	Main Points of Differential Diagnosis	Onset of Coma	Commonly Seen Diseases	Principles of Treatment
Attack of Exogenous pathogens	Seasonal Febrile Diseases	<i>Ying-Fen</i> Syndrome	heat pathogen attacks <i>Ying-ien</i> (pericardium)	coma, delirium, stiffness of tongue, coldness of limbs, fever high at night, dry mouth but no desire to Drink, and crimson tongue, thin and rapid pulse	comparently slow	encephalitis B, meningitis, infection, toxic cerebropathy	mainly with acupuncture or pricking for bloodletting with three-edged needle
		<i>Xue-Fen</i> Syndrome	heat pathogen attacks <i>Xue-Fen</i>	coma, delirium, calmness in day, restlessness at night, skin eruptions, tendency to bleeding, deep crimson tongue, feeble, thin and rapid pulse			
	Sunstroke		attack of the summer heat pathogen	long time of exposure to the sun or to the environment with high temperature, sudden onset of coma, convulsion, accompanied with high fever, no sweating, restlessness, dizziness, oppression feeling over the chest, nausea	comparently abrupt	thermoplegia, therospasm, heliosis etc.	mainly with acupuncture
	Infantile Convulsion	Acute Convulsion	exogenous pathogen turns into heat and Phlegm-heat turns into wind, which block the mind	high fever, convulsion, coldness of limbs, lock jaw, opisthotonos, coma, delirium etc	abrupt	different kind of febrile diseases encephalitis meningitis	mainly with acupuncture, or pricking for bloodletting with three-edged needle

Treatment of Acute Syndromes

Table 3 DISCRIMINATION OF EXOGENOUS ATTACK AND INTERNAL DAMAGE FOR COMA (continued)

Classification	Disease	Syndrome	Pathology	Main Points of Differential Diagnosis	Onset of Coma	Commonly Seen Diseases	Principles of Treatment
Internal Damage	Apoplexy	Tense Syndrome	attack of the mind by the liver Yang and wind-phlegm	sudden onset of falling down, with unconsciousness, lock-jaw, deviated mouth and eyes, tightly closed hands, hemiplegia, retention of urine, constipation, coarse breathing, rattling in the throat, flushed face, fever thick and greasy tongue, pulse	abrupt	cerebrovascular accident (cerebrovascular hemorrhage and thrombosis)	mainly with acupuncture, or pricking for bloodletting with three-edged needle
		Flaccid Syndrome	derived from the tense syndrome and more severe than the tense syndrome	coma, pale complexion, profuse sweating, mouth agape and eyes closed, incontinence of urine and stool, coldness of limbs, feeble or big floating pulse			mainly with moxibustion in combined with acupuncture
	<i>Jue</i> -Syndrome		due to ascending of <i>Qi</i> , phlegm, dyspepsia and deficiency of blood	sudden onset of falling down with unconsciousness, coldness of limbs, temporary onset, no sequelae of hemiplegia after awaking	abrupt	hysteria, toxic shock, hypotension, anemia etc.	mainly with moxibustion, in combined with acupuncture

Treatment of Acute Syndromes

II Other Therapies

(a) Ear Acupuncture: Heart, Ear-Shenmen Brain, Supratragic Apex, Infratragic Apex, End of Inferior Helix Crus, Liver etc.

Manipulation: Select 3 to 4 points on each ear for one treatment, with penetrating needling or perpendicular insertion needling, and manipulation with method of twirling and rotating or strong stimulation with continuous wave by pulse current. Time for manipulating needles and retaining needles is according to the pathological condition, generally longer than 30 minutes. Pressing therapy, point injection can also be applied to ear points.

(b) Nose Acupuncture: Heart, Liver, Lung, Kidney, Brain etc.

Manipulation: Penetrating from brain to lung, from lung to heart, from heart to kidney, from kidney to liver. With reducing method of twirling and rotating, manipulating the needle continuously. After the patient regains consciousness, manipulating needles at intervals or retaining needles, or stimulate with a pulse current apparatus.

(c) Scalp Acupuncture: Dingzhong Xian, Ezhong Xian, Dingnie Houxie Xian etc.

Manipulation: Gauge 28 filiform needle is applied. Insert the needle from front to back with manipulation of twirling & rotating and lifting & thrusting methods, manipulating needles continuously for 10 to 30 minutes, or with pulse current stimulation. For flaccid syndrome, moxibustion with moxa sticks can be applied.

(d) Digital Compression Therapy: Selection of points is similar to that for body acupuncture, ear acupuncture and nose acupuncture.

Manipulation: In case the needle is not available, digital compression therapy can be applied to rescue the patient, with moderate or strong stimulation.

(e) Point Injection: Selection of point is similar to that for the therapies mentioned above.

Manipulation: Medicated injections made from Chinese herbs, such as: *Xinnaojing* injection (醒腦靜注射液) Earthworm injection (地龍注射液), *Qinkailing* injection (清開靈注射液) *Yinhuang* injection (銀黃注射液), can be applied for point injection. 0.2 to 1 ml for each point, 2 to 4 point for each treatment, 2 to 4 times a day.

Other injections may also be applied. for point injection. Such as: Injection of caffeine and sodium benzoate (0.25/1 ml), 0.2 to 1 ml for

each point, 1 to 2 points for each treatment; Meclofenoxane injection (50 mg/1 ml), 0.2 to 1 ml for each point, 2 to 3 point for each treatment, 2 to times a day.

(f) Foot Acupuncture: Kidney, Liver, Pericardium, Neltaichong etc.

Manipulation: With continuous manipulation of twirling & rotating and lifting & thrusting method. or combination with pulse current stimulation.

3. TREATMENT ACCORDING TO DISEASES

(a) Acute Infectious Coma: The patient has severe infectious history. Coma has occurred after high fever, and may be accompanied with systemic ecchymosis, commonly seen in encephalitis B, epidemic encephalitis, Virus encephalitis etc.

Dazhui (Du 14) *Quchi* (LI 11) for high fever; *Xuehai* (Sp 10) and *Sanyinjiao* (Sp 6) for ecchymosis; *Houxi* (SI 3) for convulsion; *Suliao* (Du 25) and *Huiyin* (Ren 1) for respiratory failure; *Neiguan* (P 6) for severe vomiting; *Taiyang* (Extra 1) for headache. Manipulation with strong stimulation and reducing methods of lifting & thrusting and twirling & rotating, manipulating needles continuously. Other needling method may also be accompanied. For treatment of sequelae, selecting points according to symptoms.

(b) Acute Toxic Coma: The patient is with history of taking drug and food, contacting poison, accompanied by severe vomiting, dizziness, headache, abdominal pain, diarrhea, change of respiration and pulse etc.

Taiyang (Extra 1) and *Baihui* (Du 20) for dizziness and headache; *Tianshu* (St 25), *Zhongwan* (Ren 12) and *Shangjuxu* (St 37) for abdominal pain and diarrhea; *Neiguan* (P 6), *Juque* (Ren 14) and *Zhongwan* (Ren 12) for vomiting; *Suliao* (Du 25) *Shaoshang* (L 11) or *Yuji* (L 10), *Huiyin* (Ren 1), *Yongquan* (K 1) for respiratory failure; *Shenmen* (H 7) and *Neiguan* (P 6) for slow or rapid pulse; Penetrating from *Houxi* (SI 3) to *Laogong* (P 8) for convulsion. Manipulation with strong stimulation and reducing methods of twirling & rotating and lifting & thrusting. Other manipulation can also be accompanied.

(c) Cerebrovascular Accident and Traumatic Coma due to

Craniocerebral Injury: The patient has history of hypertension or arteriosclerosis, and older than 30 years old, sudden onset of coma, accompanied by hemiplegia, or the patient has history of craniocerebral injury. It is commonly seen in cerebral hemorrhage, cerebral thrombosis, cerebral embolism, subarachnoid hemorrhage, concussion of brain contusion, intracranial hematoma etc.

For traumatic coma due to cerebrovascular accident and craniocerebral injury, hemorrhagic encephalopathy or ischemic encephalopathy should be made out first. For hemorrhagic encephalopathy (sudden onset of coma, severe pathological condition, poor prognosis), acupuncture can not be applied to the head at the acute stage. After bleeding is stopped, acupuncture can be applied to the head; But for ischemic encephalopathy, acupuncture should be applied as early as possible, particularly scalp acupuncture. Earlier apply of treatment, better effect.

Taiyang (Extra 1) *Baihui* (Du 20), or *Neiting* (St 44), *Xingjian* (Liv 2) for headache; Penetrating from *Hegu* (LI 4) to *Laogong* (P 8) or *Houxi* (SI 3) (one needles three points) with strong stimulation and reducing method, such as penetrating heaven coolness, or *Quchi* (LI 11) can be added for fever *Xiaguan* (St 7) and *Jiache* (St 6) for lockjaw *Tiantu* (Ren 22) and *Fenglong* (St 40) for profuse phlegm *Neiguan* (P 6) for vomiting; Penetrating from *Houxi* (SI 3) to *Laogong* (P 8) for convulsion. For flaccid syndrome, Moxibustion at *Baihui* (Du 20) *Guanyuan* (Ren 4), *Shenque* (Ren 8), *Zusanli* (St 36) etc. can be applies.

If coma becomes progressively severe, consistent high fever, incontinence of urine and stool, platycoria. This is the dangerous signs. Prognosis is poor. During the emergency help with acupuncture, doctor should let patient's family know the patient's condition.

For sequelae, treatment is given according to symptom, mainly with scalp acupuncture. During needling, tell the patient to do active or passive exercise of disease limbs.

(d) Coma Due to Endocrine Dysfunction and Physical Injury: The Patient is often with history of disease of the liver, kidney, diabetes; a long time of exposure to the sun or to the environment with high temperature, such as sunstroke etc. before onset of coma.

Yanglingquan (GB 34), *Xingjian* (Liv 2), *Zhiyang* (Du 9) can be added for jaundice; *Yinlingquan* (Sp 9), *Shuifen* (Ren 9), *sanyinjiao* (Sp 6) for dysuria, ascites; *Quze* (P 3), *Weizhong* (B 40) for coma due to sunstroke.

PART II SHOCK

Shock is a clinical syndrome caused by large amount of bleeding, severe infection, poisoning, dehydration, profuse sweating, severe vomiting and diarrhea, severe trauma, severe pain, hypersensitivity to drug, heart diseases etc. These factors can lead to sudden decrease of effective circulating blood volume which results in acute disturbance of the systemic microcirculation and insufficient blood supply for the vital organs. Severe blood deficiency or oxygen deficit leads to a pathological state of disturbance of metabolism and damage of cells.

Shock is in the range of "Jue-Syndrome", "flaccid Syndrome", "Yang Exhaustion", "Yin Exhaustion" of TCM and is a condition of consumption of Qi, blood and body fluid of *Zang-Fu*, which resulting in disturbance of Yin and Yang, Qi and blood.

Acupuncture can rescue shock with remarkable effects on ascending blood pressure.

1. MAIN POINT OF DIFFERENTIAL DIAGNOSIS

(a) Consciousness: Somnolence, delirium, apathy, dullness of consciousness, or even coma.

(b) Colour and Temperature of the Skin: Pale complexion and skin, coldness of limbs, profuse sweating.

(c) Blood Pressure: Blood pressure declines remarkably. Systolic pressure is lower than 80 mmHg, or blood pressure is 25% lower than the basic blood pressure.

(d) Pulse: Deep thin and rapid pulse, thin and feeble pulse, fading pulse or even no pulse can be felt.

(e) Amount of Urine: Amount of urine decrease or decrease remarkably, or even anuria.

(f) **Discrimination of Jue-Syndrome, Collapse Syndrome, Yin Exhaustion and Yang Exhaustion:** TCM theory thinks shock is in the range of Jue-syndrome, collapse syndrome, Yin exhaustion and Yang exhaustion. Discrimination among them see table 4.

2. TREATMENT

The patient should be in supine position, unbuttoned in severe cases, the patient's head and lower limbs should be elevated 30 degree. Avoid movement of the patient.

I Acupuncture and Moxibustion Therapy

(a) **Body Acupuncture:** *Suliao* (Du 25), *Neiguan* (P 6), *Zusanli* (St 36), *Baihui* (Du 20) etc.

Manipulation: With moderate or strong stimulation and manipulation of twirling & rotating and lifting & thrusting methods. Manipulate needle continuously until the patient regains one's consciousness, then manipulate needles at intervals or retain needles, or stimulate with pulse current (sparse and dense wave).

(b) **Moxibustion:** *Baihui*, (Du 20), *Guanyuan* (Ren 4), *Zusanli* (St 36), *Shenque* (Ren 8) etc.

Manipulation: Direct moxibustion with moxa cone (indirect moxibustion with salt for *shenque* (Ren 8) or moxibustion with moxa sticks is applied. Keep moxibustion until the patient regains one's consciousness, limbs become warm, sweating stops and pulse resumes.

II Other Therapies

(a) **Ear Acupuncture:** Supratragic Apex, Infratragic Apex, Sub-cortex. End of Inferior Helix Crus, Ear-*Shenmen*, Heart, Spleen, Kidney, Brain etc.

Manipulation: Select 2 to 4 points on each ear for one treatment with penetrating needling, or with moderate or strong stimulation of pulse current (sparse and dense wave). Manipulate needles continuously until the patient regains one's consciousness, then manipulate needles at intervals or retain needles.

(b) **Nose Acupuncture:** Heart, Spleen, Kidney, Ear, Liver etc.

Table 4 DISCRIMINATION OF JUE-SYNDROME, COLLAPSE-SYNDROME, YIN EXHAUSTION AND YANG EXHAUSTION

Disease	Syndrome	Etiology, Pathology	Onset	Chills and Fever	Perspiration	Tongue and Pulse	Principles for Treatment
Jue-Syndrome	Cold-Type Syndrome	it is manifested to many kind of disease	apparently slow	chills, coldness of limbs	no	pale tongue or purplish moist tongue, no fur or black fur, deep and thin pulse.	mainly with moxibustion
	Heat-Type Syndrome	severe infection or toxic shock	abrupt	fever, warmth of limbs, then to coldness of limbs	little	red tongue, yellow fur, deep, thin and rapid pulse or fading pulse.	mainly with acupuncture
Collapse-Syndrome	Qi-Collapse	severe trauma or allergy	abrupt	coldness of limbs fearing to cold	profuse sweating	pale tongue, indistinct and thin pulse or fading pulse	mainly with moxibustion
	Blood-Collapse	large amount of bleeding, profuse sweating, severe vomiting, diarrhea	comparably slow	restlessness, coldness of limbs, feverish of five centers	yes	pale tongue or red tongue, no fur, thin and rapid pulse or hollow pulse	in combined with acupuncture and moxibustion
Yin Exhaustion		exhaustion of Yin Qi	comparably slow	restlessness, feverish of five centers	yes	red, dry tongue, thin, rapid and feeble pulse.	mainly with acupuncture
Yang Exhaustion		exhaustion of Yang Qi	abrupt	fearing to cold, coldness of limbs.	profuse sweating	white moist fur, fading pulse.	mainly with moxibustion

Manipulation: Penetrating from heart to liver, from spleen to kidney. Manipulate needle continuously until blood pressure is ascended, then manipulate needles at intervals, or stimulating with pulse current (sparse and dense wave)

(c) **Scalp Accupuncture:** *Dingzhong Xian*, *Ezhong Xian*, *Zhen-shang Zhengzhong Xian* etc.

Manipulation: Gauge 28 filiform needle is applied. Insert the needle from front to back for 1 to 1.5 *cun* depth. manipulate needle with twirling & rotating and lifting & thrusting methods continually for 5 to 10 minutes, then manipulate needles at intervals until blood pressure is ascended. Retaining needles 1 to 2 hours. Moxibustion with moxa stick or stimulation with pulse current can be accompanied.

(d) **Point Injection:** Selection of points is similar to that for body acupuncture, ear acupuncture and nose acupuncture.

Manipulation: Atropine 1 mg, "654-2" 10 mg or, Isoprenaline 0.05 mg, which is diluted to 2 to 4 ml with Normal saline, water for injection or 5% Glucose saline; Medicated injection, made from Chinese herbs, such as: *Zhishi* injection (枳實注射液), *Shenmai* injection (參麥注射液), profound *Yangjihua* injection (復方洋金花注射液).

1 to 2 ml for each point, 2 to 4 points for each treatment. For severe shock, treatment can be given every 1 to 2 hours. Point injection for ear point and nose point is 0.2 ml for each point.

Above therapies can be used together during rescuing the patient with shock.

3. TREATMENT ACCORDING TO DISEASES

(a) **Infectious Shock:** The patient is with history of severe infection. Shock has occurred after high fever, accompanied by systemic ecchymosis.

Quchi (LI 11), *Hegu* (LI 4) for fever; *Xuehai* (Sp 10), *Sanyinjiao* (Sp 6) for ecchymosis. Manipulation with moderate or strong stimulation and reducing method. Manipulate needles continuously for 5 to 10 minutes, then manipulate needles at intervals or retain needles.

(b) **Painful Shock:** Shock is caused by severe pain due to different kinds of causes. Besides the points mentioned above, following points can be added according to pain site.

Hegu (LI 4) and *Neiting* (St 44) for the front aspect of the body; *Zhongzhu* (SI 3) and *Yanglingquan* (GB 34) for the lateral aspect of the body; *Houxi* (SI 3) and *Kunlun* (B 60) for the back aspect of the body. Manipulation is similar to that for infectious shock.

(c) **Cardiogenic Shock:** It is commonly seen in myocardial infarction, acute myocarditis, severe arrhythmia etc. *Ximen* (P 4), *Daling* (P 7) can be added. Manipulation is similar to that for infectious shock.

(d) **Hypovolemic Shock:** The patient is with history of profuse bleeding, severe vomiting and diarrhea, profuse sweating etc.

For profuse bleeding, *Yinbai* (Sp 1) can be added with direct moxibustion with moxa cone (3 to 5 moxa cones); For severe vomiting, *Taichong* (Liv 3) can be added, together with *Neiguan* (P 6), manipulate the needles at the same time; *Tianshu* (St 25) for severe diarrhea; *Yongquan* (K 1) and *Fuliu* (K 7) for profuse sweating. Manipulation is similar to that for infectious shock.

(e) **Allergic Shock:** It can be caused by serum or some drugs. Symptoms respiratory tract obstruction, circulatory failure, skin rash, central nervous system can be seen.

Tiantu (Ren 22), *Huiyin* (Ren 1) can be added for dyspnea; *Renzhong* (Du 26) for low blood pressure; *Houxi* (SI 3) for syncope and with convulsion; *Ximen* (P 4) and *shenmen* (H 7) for arrhythmia.

PART III DIZZINESS

Dizziness is a sensation of unsteadiness with a feeling of movement within the head, or the patient may even fall down, usually no disturbance of the consciousness. It is a subjective symptom caused by diseases of the vagus nerve, nerve of vestibuli, cerebellum and systemic diseases, it can be divided into true dizziness and usual dizziness.

Mild dizziness can be relieved by closing one's eyes, while the severe dizziness has an illusion of bodily movement with rotary sensation like sitting in a sailing boat or moving car, and even accompanied by nausea, vomiting, sweating, tinnitus, or even falling down. TCM thinks dizziness is caused by dysfunction of the liver, spleen and kidney, resulting from wind pathogen, fire, phlegm and defi-

ciency.

Acupuncture has good effect on dizziness, particularly for the acute onset stage of dizziness.

1. MAIN POINT OF DIFFERENTIAL DIAGNOSIS

(a) True Dizziness:

(1) Abrupt onset of severe dizziness, an illusion of bodily and environmental movement with rotational sensation, aggravated by change of posture.

(2) Accompanied by ophthalmodonesis, tinnitus and decline of audibility, or even nausea, vomiting, fearing to light, pale complexion, sweating, lower blood pressure.

(b) Usual Dizziness:

(1) No true sensation of rotatory movement.

(2) Not accompanied by ophthalmodonesis, decline of audibility and tinnitus.

(3) Mostly with corresponding symptoms and signs of systemic diseases.

(c) Discrimination Table of Dizziness (see Table 5)

2. TREATMENT

I Acupuncture and Moxibustion Therapy

(a) **Body Acupuncture:** *Baihui* (Du 20), *Fengchi* (GB 20), *Neiguan* (P 6) *Zusanli* (St 36), *Yintang* (Extra 2) etc.

Manipulation: Insert the needle from front to back at the angle of 30 degree for *Baihui*. After arrival of *Qi* is achieved, *Jintian* method can be applied to spread the needling reaction.

Small range of twirling and rotating method, in combination with *Quezhuo* or *Jintian* method, so needling reaction can be spread to the neck and temple. Insert the needle from upper to down about 0.5 to 1 *cun* depth, so distention and heavy feeling can be felt at the forehead.

Methods of twirling & rotating and lifting & thrusting can be applied to *Neiguan* (P 6), *Zusanli* (St 36), may be combined with the method of reinforcing and reducing achieved by the direction the

Table 5 DISCRIMINATION OF DIZZINESS

Excess and Deficiency	Syndrome	Main Symptoms	Accompanied Symptoms	Commonly Seen	Principles for Treatment
Deficiency Accompanied with Excess	Rising of the liver Yang	dizziness and blurring of vision, aggravated by over work and agner, and red tongue yellow fur, wiry pulse or wiry and rapid pulse	restlessness and easy anger, flushed face, insomnia, dreamy, hypochondriac pain, bitter taste in the mouth	hypertension	calming the liver to suppressing Yang, clearing away fire to inhibit the wind-evil, mainly with acupuncture and reducing method
Excess Syndrome	Retention of damp-phlegm in the middle Jiao	dizziness and blurring of vision, heavy feeling of the head, pale tongue, white and greasy fur, thin and feeble pulse	stiffoating sensation in the chest, nausea, somnolence, poor appetite, fearing to light, tinnitus, heavy feeling of body, fatigue	otogenic dizziness, concussion of brain	eliminating wetness-evil and phlegm mainly with acupuncture and reducing method
	Blocking of the mind by blood stasis	dizziness, blurring of vision, and headache, purplish dark tongue on the margin, wiry and unsmooth pulse	restlessness, insomnia, palpitation, poor memory, or nausea, vomiting, or even coma	concussion of brain and its sequela, trauma of the head	promoting blood circulation and removing blood stasis, inhibiting the wind-evil and cleaning away evils from the mind, mainly with acupuncture and reducing method
Deficiency Syndrome	Deficiency of Qi and blood	dizziness, aggravated by over work, pale tongue, thin and white fur, thin and feeble pulse	lustrousless complexion, pale lips and nails fatigue, palpitation, insomnia, poor appetite	anemia, hypertension, leukocytopenia, verebrobasilar ischemia artery	invigorating the spleen to tonify Qi, nourishing blood to invigorate the heart, in combined with acupuncture and moxibustion mainly with reinforcing method
	Deficiency of the kidney essence	recurrence of dizziness, pale tongue, thin fur, deep, thin and wiry pulse or deep, thin and feeble pulse	poor memory, fatigue, soreness and weakness of the lumbus and knees, tinnitus, insomnia, dreamy	neurasthenia, brain artery sclerosis	nourishing the kidney and essence, in combined with acupuncture and moxibustion, mainly with reinforcing method

needle tip pointing to and *Lufa*. So needling reaction can go upwardly and be maintained longer than 20 minutes.

(b) Moxibustion: *Baihui* (Du 20), *Zusanli* (St 36), *Neiguan* (P 6), *Yongquan* (K 1) etc.

Manipulation: Direct moxibustion with moxa cone can be applied to *Baihui*, mild-warm moxibustion about 7 cones. Cut the patient's hair before giving moxibustion. Heat can be penetrated to intracranial and whole head region.

Moxibustion with moxa sticks can be applied to *Neiguan* (P 6), *Zusanli* (St 36) and *Yongquan* (K 1). Time for moxibustion is about 15 to 30 minutes.

II Other Therapies

(a) Ear Acupuncture: Liver, Kidney, Brain, Occiput, Ear-*Shenmen*, Internal Ear etc.

Manipulation: Selecting 2 to 3 points on each ear for one treatment, with moderate stimulation, retain needles about 30 minutes, manipulating needles at intervals. Stimulation with pulse current or embedding needle can be applied too.

(b) Scalp Acupuncture: *Dingzhong Xian*, *Dingpang Xian* II, *Niehou Xian* etc.

Manipulation: After arrival of *Qi* is achieved, manipulate needles for 5 to 15 minutes with methods of twirling & rotating and lifting & thrusting, in combination with Jintian method. Retain needles about 1 to 2 hours, manipulate needles every 15 minutes. Electric needle or moxibustion with moxa sticks can also be applied.

(c) Point Injection: Selection of points is similar to that for body acupuncture and ear acupuncture.

Manipulation: Profound *Dansheng* injection (复方丹参注射液), *Chuanxiong* injection (川芎注射液), *Tianma* injection (天麻注射液), Vit B12 injection (1 to 2 ml), or 5 to 10% Glucose injection (5 ml) can be applied. 0.5 to 1 ml for each point, 2 to 3 points for each treatment, 1 to 2 times a day. for ear points, 0.1 ml for each point.

3. TREATMENT ACCORDING TO DISEASES

(a) Otogenic Dizziness: It belongs to true dizziness, commonly

seen in Meniere's disease, motion sickness, Labyrinthitis, otitis media suppurative etc.

Yifeng (SJ 17), *Tinggong* (Si 19), *Zhongzhu* (SJ 3) etc. can be added to tinnitus, deafness; *Fenglong* (St 40), *Zhongwan* (Ren 12) and *Taichong* (Liv 3) for nausea, vomiting, profuse phlegm; *Renzhong* (Du 26) and *Shixuan* (Extra 24) for coma.

(b) Traumatic Dizziness: The patient is with the history of trauma to the head.

For headache, local points and *Hegu* (LI 4), *Sanyinjiao* (Sp 6) can be added according to site of headache; *Neiguan* (P 6) and *Taichong* (Liv 3) can be added for nausea, vomiting.

(c) Dizziness due to Systemic Diseases: It belongs to usual dizziness, commonly seen in hypertension, hypotension, anemia, dizziness due to poisoning caused by drug, neurosis etc.

Quchi (LI 11), *Hegu* (LI 4), *Taichong* (Liv 3) and *Sanyinjiao* (Sp 6) can be added for hypertension. For hypotension, moxibustion with moxa sticks on *Baihui* (Du 20), selecting *Zusanli* (St 36), *Neiguan* (P 6) with moderate stimulation and reinforcing methods of twirling and rotating and lifting and thrusting, selecting *Guanyuan* (Ren 4) with the method of in combined acupuncture and moxibustion. Selecting *Geshu* (B 17), *Ganshu* (B 18), *Pishu* (B 20) by direct moxibustion with moxa cone or moxibustion with moxa sticks can be added for anemia *Shenmen* (H 7), *Xinshu* (B 15) and *Sanyinjiao* (Sp 6) for palpitation, insomnia; *Yanslingquan* (GB 34) and *Zhigou* (SJ 6) for hypochondriac distention.

PART IV FEVER

Fever is mostly caused by acute, chronic epidemic diseases, pyogenic infection, site infection, cancer, allergic diseases, collagen disease and rheumatic disease. The kind and degree of fever may be different according to the etiology. fever may be accompanied with emergency diseases, such as: syncope, convulsion, headache, bleeding diseases and delirium.

TCM theory divide fever into exterior heat syndrome, interior heat syndrome and intermediate syndrome. High fever occurs in sea-

sonal febrile disease at the stage of *Wei, Qi, Ying* and *Xue*, high fever occurs in exogenous febrile disease at *Taiyang, Yangming* and *Shaoyang*, and fever due to internal damage of *Zangfu* organ are all in the range of this part.

Exogenous attack of the six exogenous pathogen and virulent pathogen, over strain, irregular food intake, mental depression, interior retention of blood stasis, accumulation of damp-heat pathogen are all the cause of fever according to TCM theory.

1. MAIN POINT OF DIFFERENTIAL DIAGNOSIS

(a) **Body Temperature:** Body temperature is higher than 39°C.

(b) **Accompanied Symptoms:** According to the main symptoms for the different system, which system is involved in fever can be made out. Such as: cough, chest pain and sputum are the symptoms for the diseases of the respiratory system; Abdominal pain, diarrhea, nausea, vomiting are the diseases of the digestive system; Frequent, difficult and painful discharge of urine, an abdominal pain are the disease of the urinary system. Severe headache, vomiting, change of consciousness, paralysis, stiffness of the neck are the disease of the central nervous system. Red, swelling, feverish and pain of the joint is the rheumatic disease.

(c) **Discrimination Table for Fever** (see Table 6)

2. TREATMENT

I Acupuncture and Moxibustion Therapy

Body Acupuncture: *Dazhui* (Du 14), *Quchi* (LI 11), *Hegu* (LI 4), *Shaoshang* (L 11) or *Shixuan* (Extra 24) etc.

Manipulation: Gauge 28 to 30 filiform needle can be applied. Mainly with strong stimulation and reducing method of lifting and thrusting (such as method of penetrating heaven coolness), and accompanied with *Chouqi* method to far away heat pathogen. Pricking for bloodletting with three-edged needle can be applied to *Shaoshang* (L 11) and *Shixuan* (Extra 24)

Table 6 DISCRIMINATION OF FEVER

Place	Syndrome	Main Symptoms	Accompanied Symptoms	Zang-Fu	Commonly Seen Diseases	Principles for Treatment
Exterior Syndrome	Attack of exogenous pathogen stagnation of pathogen in the body surface	fever, chills, thirsty, dry mouth, red tip of tongue, thin and yellow fur, floating and rapid pulse	headache, sore throat, cough, slightly sweating	Lung	upper respiratory tract infections, early stage of chronic or acute infection	mainly acupuncture, with reducing method of different kinds of
	Damp-heat syndrome of <i>Sanjiao</i>	fever, chills, or fever is indistinct at the first touch of the skin, but becomes pronounced after being felt for a rather long time, yellow and sticky fur, soft and rapid	heavy sensation of the head as if it were tightly wrapped by a cloth, thirst with no desire to drink, distention and fullness of the chest, abdominal distention, scanty and deep-yellow urine	lung stomach	sunstroke	
Interior Syndrome	Heat pathogen enters <i>Yangming, Qi-Fen</i> Syndrome	high fever, aversion to heat but no to cold, yellow fur, bounding pulse or smooth and rapid pulse	restlessness, and thirsty, flushed face, sweating or constipation, abdominal pain with tenderness	lung stomach intestine	acute and chronic infection, inflammatory diseases	
	Heat pathogen enters the interior <i>Ying-Fen</i> Syndrome	high fever at night, red and purplish fur, thin and rapid pulse	restlessness, insomnia, dry mouth, unconsciousness, skin eruption	stomach pericardium	middle or late of acute infection inflammatory diseases	
Intermediate Syndrome	Heat pathogen enters the interior <i>Xue-Fen</i> Syndrome	high fever, bleeding, deep purplish fur, feeble, thin and rapid pulse	convulsion, coma, delirium	liver kidney	middle or late stage of acute infection, inflammatory diseases	
	<i>Shaoyang</i> Syndrome	alternate chills and fever, yellow fur, wiry and smooth pulse	blurring of vision, bitter taste in the mouth, nausea, vomiting, feeling of fullness of the chest and hypochondrium	liver gallbladder	maternal	

II Other Therapies

(a) **Ear Acupuncture:** Supratragic Apex, Ear Apes, Helix 1 to Helix 6, Lung, Ear-*Shenmen* etc.

Manipulation: Pricking for bloodletting with three-edged needle; Or with strong stimulation and method of twirling and rotating, manipulating needles continuously, retain needles longer than 30 minutes.

(b) **Point Injection:** Selection of point is similar to that for body acupuncture and ear acupuncture.

Manipulation: Analgia injection (1 to 2 ml); *Chaihu* injection (柴胡注射液), *Yinghuang* injection (銀黃注射液), *Qinghao* injection (青蒿注射液), *Yuxincao* injection (魚腥草注射液), *Banlangeng* injection (板藍根注射液), *Xinnaojing* injection (醒腦靜注射液), *Yazhicao* injection (鴨跖草注射液), anti-inflammation, No 1, *Sijiqing* injection (四季青注射液), *Chuanxinlian* injection (穿心蓮注射液). One of these can be chosen at 2 ml. 0.5 to 1 ml for each point, 2 to 4 points for each treatment. Times of injection depends on the pathological condition. For ear point, 0.1 ml for each point.

(c) **Hand Acupuncture:** Point for Calming Convulsion, Point for Sore Throat and Toothache etc.

Manipulation: Selecting points on both hands with 0.5 or 1 *cun* long needle. Insert the needle obliquely with reducing method of *Chouqi* method and with moderate stimulation. Retain needles for 20 to 30 minutes.

3. TREATMENT ACCORDING TO DISEASES

(a) **Influenza:** Influenza is caused by the influenza virus and belongs to fever due to exogenous attack (*Wei-fen* syndrome)

Yingziang (LI 20) can be added for stuffy nose; *Lieque* (L 7), *Tiantu* (Ren 22) etc. for cough; *Dazhui* (Du 14), accompanied with cupping method for high fever, no sweating, *Taiyang* (Extra 1) and *Yintang* (Extra 2) for headache, *Fenglong* (St 40) and *Tiantu* (Ren 22) for asthma with profuse phlegm; *Laogong* (P 8) for restlessness *Yuji* (L 10), *Taiyan* (L 9), *Shaoshang* (L 11) with pricking for bloodletting, and can be added for epistaxis.

Lianquan (Ren 23) and *Yuji* (L 10) can be added for dysphonia,

and sore throat.

(b) **Pneumonia:** Pneumonia is caused by bacterial, viral infection, or is the complication of other acute infectious diseases, wasting diseases, mainly manifested as fever, cough, shortness of breathing, chest pain. It belongs to *Qi-fen* syndrome of "attack of the lung by the wind-wetness pathogen" and "cough due to the lung heat" according to TCM theory.

For asthma and shortness of breathing, *Renying* (St 9) can be added with gentle and small range of twirling and rotating method, retain the needle for 10 to 20 minutes; for chest pain, penetrating from *Hegu* (LI 4) to *Houxi* (SI 3) can be added with strong stimulation and reducing method, or with method of penetrating heaven coolness. For continuous high fever, point injection with *Qingqijieduyi* (清氣解毒液) 3 ml can be applied to *Dazhui* (Du 14), *Quchi* (LI 11), *Hegu* (LI 4), 1 ml for each point, 2 to 3 times a day.

(c) **Epidemic Parotiditis:** Epidemic parotiditis is an acute epidemic disease, caused by mumps virus, commonly encountered in children. It occurs more often in winter and spring, manifested as swelling and pain of the parotid gland. TCM theory call it "*Zha Sai*", belongs to early stage of seasonal febrile disease, in the range of *Wei-fen* syndrome.

For swelling and pain of the parotid gland. *Yifeng* (SJ 17), *Jiache* (St 6), *Hegu* (LI 4) and *Waiguan* (SJ 5) can be added. Local points are with moderate stimulation and reducing method, accompanied with lifting and thrusting method; *Hegu* (LI 4) and *Waiguan* are with strong stimulation and reducing method, penetrating heaven coolness or *Baihuyatou* method, so as to clear away heat and swelling. Retain needles for 15 to 30 minutes, 1 to 2 times a day.

Or point injection with *Daqingye* injection (大青葉注射液) or *Banlangen* injection (板藍根注射液) can be added to *Hegu* (LI 4) and *Quchi* (LI 11), 1 to 2 ml for each point.

For swelling and pain of the testicle, *Taichong* (Liv 3), *Ququan* (Liv 8) can be added, *Xiaxi* (GB 43) and *Fengchi* (GB 20) for headache; *Houxi* (SI 3) for convulsion.

(d) **Malaria:** Malaria is caused by the malarial parasite and is an infectious disease, manifested by regular paroxysms of chills, high fever, sweating, hepatosplenomegaly, and anemia. Given

acupuncture one or two hours before onset of malaria can control or relieve the onset of malaria.

Select *Dazhui* (Du 14), *Taodao* (Du 13), Penetrating from *Jianshi* (P 5) to *Zhigou* (ST 6), from *Houxi* (Si 3) to *Hegu* (LI 4) with strong stimulation and reducing method. Retain needles for 30 to 60 minutes, when on set of malaria. *Shixuan* (Extra 24) can be added by pricking for bloodletting with three-edged needle.

For ear acupuncture, select Intertragus, Infratragic Apex, Brain, Liver etc. with strong stimulation. Retain needles for one hour, manipulate needles every 5 to 10 minutes.

PART V PAIN DISEASES

Severe pain is one of the common acute symptoms in clinic. It may be seen in many diseases and may also be seen alone.

Pain can be caused by damage of the tissue resulting from all kinds of stimulation the degree of pain is different according to degree of damage and personal sensitivity to pain.

Generally, pain can be divided into superficial pain, deep pain and dragging pain of internal organs.

Superficial pain comes from the superficial part of body, characterized with acute pain, clearly localized pain point and no emotional change.

Deep pain mostly comes from the muscle, tendon, ligament and joint, characterized as dull pain, such as: soreness pain, distending pain or colic pain, no clearly localized pain point, often accompanied with strong emotional change, irritability and reaction of internal organs and extremities.

Dragging pain of internal organs is caused by the diseases of internal organ which are reflected to the corresponding superficial part of the body, trunk and extremities through the meridians and nerves, such as: radiating pain, tenderness. Pain point is difficult to localize. For example: disease of the liver and gallbladder may lead to pain of the right shoulder, tenderness of the gallbladder point. Angina pectoris may lead to radiating pain of the left shoulder. Disease of the kidney may lead to lumbago.

For the treatment of pain, particularly severe pain, quick killing or relieving pain is important.

Acupuncture has good effect on killing pain. It can also treat the cause of some infectious diseases.

1. MAIN POINT OF DIFFERENTIAL DIAGNOSIS

(a) Place of Pain: Making out the place of pain is important. Such as headache should be further made out that it belongs to which *Zang-Fu* or which channels. Forehead pain belongs to *Yangming* channel. Migraine belongs to *Shaoyang* channel. Vertex pain belongs to *Jueyin* channel. Occiput pain belongs to *Taiyang* channel. Chest pain mostly refers to the heart and lung. Upper abdominal pain refers to the stomach. Hypochondriac pain refers to the liver and gallbladder. Pain around the umbilicus refers to the intestine. Lumbago refers to the kidney. anterior pain of the limbs belongs to *Shaoyang* channel. Posterior pain of the limbs belongs to *Taiyang* channel.

(b) Nature of Pain: Pain can be divided into excess, deficiency, cold and heat. It can be classified into pricking pain, wandering pain, dull pain and distending pain. For example: Pricking pain refers to blood stasis. Distending pain refers to stagnation of *Qi*. Weighting pain refers to retention of damp pathogen wandering pain refers to wind pathogen. Cold pain belongs to cold syndrome. Heat pain or red, swelling and distending pain belongs to heat syndrome. Dull pain or hollow pain (hungry pain), no fixed pain place, preference

Based on the place of pain, pain can be divided into headache, chest pain, abdominal pain, pain of the joints and limbs which can be caused by diseases of pathogenic internal medicine, surgery, gynecology, pediatrics, orthopedics, otorhinolaryngology and ophthalmology.

TCM theory thinks the cause of pain is, generally speaking, "stagnation of *Qi* leading to pain". Pain is caused by exogenous six pathogenic endogenous seven emotional factors or injury (such as war injury, knife injury or other kind of accidental injury) which lead to stagnation of *Qi* and blood of *Zang-Fu* and meridians, blood stasis, stagnation of *Ying-Wei*. Cold pathogen is characterized by contraction and stagnation. So cold pathogen is the main cause for pain.

for pressure and warmth which belong to deficiency syndrome. Pain which is aggravated by pressure, food intake, heat, fixed pain place belong to excess and heat syndromes. Pulsative pain mostly refers to vascular pain and migraine. Persistent, diffuse pain mostly refers to acute inflammation. Paroxysmal colic pain mostly refers to biliary ascariasis disease. Burning, radiating and pricking pain mostly refers to neuralgia, such as: trigeminal neuralgia, intercostal neuralgia, sciatica. Severe pain mostly refers to lithiasis of the internal organs. Colic pain over the precordial lesion which is radiating to the shoulder, back, upper arm and upper abdomen, accompanied with suffocating sensation mostly refer to angina pectoris.

(c) Concomitant Symptoms of Pain and Prognosis: The etiology of pain can be deduced through symptoms which are accompanied with pain. So comprehensive therapy can be applied to increase therapeutic effect. For example: Severe headache accompanied with high fever, stiffness of the neck, projectile vomiting can be deduced to cerebral inflammation. Severe pain or pain of the right lower abdomen, accompanied with nausea, vomiting, fever can be deduced to appendicitis etc.

(d) Degree of Pain: Generally, more severe degree of pain, longer time of pain, wider range of pain mean more severe and acute disease. Prognosis is unfavorable too. Other way around means mild and chronic disease. Prognosis is favorable.

(e) Discrimination of Pain (See Table 7)

2. TREATMENT

I Acute Headache

Headache can be divided into exogenous attack and internal damage. The former refers to excess. The latter refers to deficiency. Acute headache mostly belongs to excess syndrome. Severe pain is mostly seen in acute infection, vascular and cerebral disease, and systemic disease. Acupuncture has good effect on this disease. But for headache due to cerebral diseases, comprehensive therapy should be applied in time.

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture: *Sanjian* (LI 3), *Hegu* (LI 4), other points are selected according to pain site.

Manipulation: Strong stimulation and reducing method with twirling and rotating method or method of *Longhujiaozhan* method. The method of reducing achieved by the direction the needle tip pointing to and *Lufa* can be accompanied.

For pain of the forehead, *Yintang* (Extra 2) can be added; *Kunlun* (B 60) *Qiangjian* (Du 18) can be added for pain of the occiput; *Baihui* (Du 20), *Xingjian* (Liv 2) for pain of the vertex. Penetrating from *Hanyan* (GB 4) to *Xuanli* (GB 6) is added for migraine; *Taiyang* (Extra 1), *Fengchi* (GB 20) for pain of whole head; Penetrating from *Zanzhu* (b 2) to *Yuyao* (Extra 5) are added for pain in the supraorbital region. above local points are with moderate stimulation and method of twirling and rotating. For distant points, Manipulation is similar to that for *Hegu* (LI 4). Moxibustion can be applied to cold syndrome of deficiency type.

(b) Other Therapies

(1) **Ear Acupuncture:** Occiput, Brain, Forehead, Ear-*Shenmen* etc.

Manipulation: Strong stimulation and method of twirling and rotating. Retain needles for 30 to 60 minutes. Manipulate needles every five minutes. Embedding needle can also be applied.

(2) **Scalp Acupuncture:** *Ezhong Xian*, *Dingzhong Xian*, *Zhen-shang Zhengzhong Xian*, *Nieqian Xian* etc.

Manipulation: Reducing method of twirling and rotating. Retain needles 1 to 2 hours. Manipulate needles every 5 to 10 minutes.

(3) **Digital Depression Therapy:** *Hegu* (LI 4), *Yintang* (Extra 2), *Taiyang* (Extra 1), *baihui* (Du 20), *Fengchi* (GB 20) and the ear lobe region.

Manipulation: Press above points with moderate and heavy manipulations. Points on the head and the ear lobe region are the important place to press. if the patient is with fever and not sweating, heavy manipulation can be applied to make the patient sweat.

(4) **Point Injection:** Selection of points is similar to that for body acupuncture and ear acupuncture.

Manipulation: Vit B 12 injection (2 ml), or Water for Injection, Normal Saline (2 to 4 ml), Other injections for the treatment of the cause can be chosen. 0.2 to 1 ml for each point, 2 to 3 points for one

Table 7 DISCRIMINATION OF PAIN

Place	Syndrome	Main Symptom	Accompanied Symptom	Commonly Seen Disease	Principles for Treatment
Headache	Headache due to mind-heat pathogen	distention and pain of the head, intense headache as splitting	chills, fever, aversion to wind, flushed face, redness of eyes, thirst with desire to drink.	influenza, early stage of acute and chronic infectious diseases	clearing away wind and heat pathogen mainly with acupuncture
	Headache due to the liver fire (Yang)	headache, feeling of feverish and distention in the head, dizziness	flushed face and redness of eyes, projecting vessels of the head, accompanied with dryness and bitter taste in the mouth, constipation, sudden onset of blindness etc.	hypertension, arteriosclerosis, glaucoma etc.	clearing the liver to suppressing fire mainly with acupuncture
	Headache due to blood stasis	intense headache as pricking, fixed pain place	dizziness, nausea, vomiting, insomnia, poor memory, or even coma.	concussion of brain and its sequela, glaucoma, trauma of the head.	promoting blood circulation to dissipate blood stasis, mainly with acupuncture
Chest Pain	Chest pain due to blood stasis resulting from insufficiency of the heart Yang	chest pain, close the left chest, or even radiating to the shoulder and back, intense pain as pricking, fixed pain place.	stiffness of the chest, palpitation, asthma, shortness of breath, or even coldness of extremities, feeble and slow pulse, or missed-beat pulse, or thin and rapid pulse, or deep and unsmooth pulse, pale tongue, or purplish tongue.	angina pectoris, myocardial infarction, different kinds of heart diseases.	activating Yang and tonify Qi dissipating blood stasis to kill pain, in combined with acupuncture and moxibustion, mainly with acupuncture.
	Chest pain due to lung heat and retention of phlegm	chest pain, restlessness, feeling of oppression at the chest, cough and asthma, coarse breathing.	fever, chills, yellow thick sputum, sputum, or foul purulent sputum or even bloody pus, flushed face, restlessness, thirsty, red tongue, yellow sticky fur, smooth and rapid pulse.	pulmonary abscess, lobar pneumonia etc.	clearing away heat pathogen and eliminating phlegm, mainly with acupuncture

Table 7 DISCRIMINATION OF PAIN (continued)

Place	Syndrome	Main Symptom	Accompanied Symptom	Commonly Seen Disease	Principles for Treatment
Abdominal Pain	Abdominal pain due to stagnation of fire and Qi	distention and pain of the epigastrium, acute and intense pain, or even radiating to the hypochondrium or back, aversion to pressure	foul belching, sour regurgitation, restlessness, easy to anger dry mouth with bitter taste, constipation, red tongue, dry, yellow and sticky fur, wiry and excess pulse	gastrospasm, gastric dilatation, perforating ulcer, diseases of the bile tract	dispersing the liver to calm the stomach, dispersing Qi and clearing away fire, mainly with acupuncture
	Abdominal pain due to blood stasis	intense abdominal pain or even as pricking and cutting, fixed pain place, aversion to pressure, or abdominal pain becomes worse progressively, or even sweating and coldness of extremities	vomiting, abdominal distention, constipation, deep-yellow urine, or accompanied with fever, wiry and excess pulse or smooth rapid pulse, yellow stickily or dry fur, or abdominal pain during the period of menstruation	acute diseases of the bile tract, acute pancreatitis, perforating ulcer, intestinal obstruction, peritonitis, dysmenorrhea etc.	promoting blood circulation to dissipate blood stasis, dispersing the stagnated Qi to kill pain, mainly with acupuncture
Lumbago	Lumbago due to stagnation of Qi and blood	sudden onset of lumbago, lumbago, pain radiates to the lower abdomen, or sudden interruption of urination, unbearable pricking pain during urination which may involve the lumbus and abdomen, or sudden onset of lumbago, limited movement of the lumbar region, unbearable pain can be induced by inspiration cough, etc.	hematuria, deep-yellow urine painful urination, dripping urination, or pain radiates to the lower limbs to affect walking, wiry tense or wiry rapid pulse	kidney stone, ureterolithiasis, cystolithiasis, acute infection of the urethra, or acute lumbar strain	dispersing the stagnated Qi to promote meridians passage, dissipating blood stasis to kill pain, mainly with acupuncture

treatment, 1 to 2 time a day.

(5) the Cutaneous Needle: *Tapping baihui* (Du 20), *Taiyang* (Extra 1), *Yintang* (Extra 2) and *Ashi* Point with the cutaneous needle slight bleeding appears.

(6) Foot Acupuncture: *Neitaichong*, Gallbladder, *Lineiting*, Heart, Head etc. Foot acupuncture therapy can be applied for severe pain due to cerebrovascular diseases, infection and poisoning.

Manipulation: Gauge 28 or 30 filiform needle is used. Insert the needle swiftly for 0.5 *cun* to 1 *cun* depth. Manipulation with moderate or strong stimulation and reducing method of continuous twirling and rotating. Retain needles 20 to 30 minutes, Manipulate needles every 5 to 10 minutes.

II Acute Chest Pain

Chest pain can be divided into pain due to stagnation of *Qi* or blood stasis, mostly seen in the diseases of coronary artery disease, angina pectoris, myocardial infarction, acute pulmonary inflammation, trauma and neuralgia etc. Acupuncture has effects of killing pain and relieving symptoms on all kind of chest pain.

(a) Acupuncture and Moxibustion Therapies

Body Acupuncture: *Neiguan* (P 6), *Tanzhong* (Ren 17), *Yinxi* (H 6), *Huatuojiaji* of Thoracic 4 to 6 (Extra 15).

Manipulation: Insert the needle with needle tip pointing to the trunk direction for *Neiguan* (P 6) and *Yinxi* (H 6). Manipulation with moderate or light stimulation and *Jinqi* method, *Canglongbaiwei* method, or accompanied with methods of *Quezhui* and *Lufa*. So needling reaction can be conducted upwardly to the disease site. Retain needles 30 minutes.

For *Tanzhong* (Ren 17), insert the needle from up to down along the skin and penetrate to *Jiuwei* (Ren 17) for 2 to 3 *cun*, or insert the needle to the left chest along the skin for 1 to 1.5 *cun*, so needling reaction can reach to the left chest.

For *Huatuojiaji* of Thoracic 4 to 6, The needle is inserted with the needle tip pointing to the spinal cord for 0.8 *cun* to 1 *cun*, so needling reaction can reach to the chest. Moxibustion can be applied to cold syndrome of deficiency type.

(b) Other Therapies:

(1) Ear Acupuncture: Heart, Lung, Ear-*Shenmen* Brain, End of Inferior Helix Curs. Chest etc.

Manipulation: With moderate or strong stimulation. Retain needles for 1 to 2 hours.

(2) Nose Acupuncture: Lung, Heart, Ear, Kidney, Chest etc.

Manipulation: Penetrating from lung to heart, from ear to chest. Insert needles perpendicularly for 0.2 to 0.5 *cun* for heart and kidney. Manipulation with moderate, strong stimulation and method of continuous twirling and rotating. Retain needles about 30 minutes. Manipulate needles every 5 to 10 minutes. 1 to 2 times a day.

(3) Scalp Acupuncture: *Epang Xian* I (both sides)

Manipulation: Insert the needles from upper to down, 2 needles for each line. Manipulate needles for 1 to 5 minutes with methods of twirling & rotating and lifting & thrusting. Retain needles 2 hours. During needling, tell the patient to do deep thoracic breathing.

(4) Point Injection: Selection of points is similar to that for body acupuncture, ear acupuncture, nose acupuncture.

Manipulation: Profound *Dansheng* injection (腹方丹参注射液) *Shengfu* injection (参附注射液), 0.5-1% Procaine injection, or other corresponding injections for the treatment of disease can be chosen. 0.5 to 1 ml for each point. For ear point and nose point, 0.1 ml for each point.

(5) Digital Depression Therapy: Selection of points is similar to that for ear acupuncture, nose acupuncture and body acupuncture.

Mainipulation: Press the corresponding points with moderate or strong manipulation, particularly tender spot (reaction spot).

(6) Hand Acupuncture: Point for Chest Pain

Manipulation: After arrival of *Qi* is achieved, manipulate the needle with moderate or strong stimulation and method of continuous twirling and rotating for 10 to 30 minutes.

III Acute Upper Abdominal Pain

It belongs mostly to excess syndrome, caused by the attack of six exogenous pathogen, irregular food intake, irregular emotion, trauma, etc. which lead to retention of cold, stagnation of *Qi*, retention of food, damp-heat and blood stasis. It is commonly seen in the diseases of: acute gastritis, perforation of ulcer, acute gastric dilata-

tion, gastrospasm, acute pancreatitis, cholelithiasis, biliary infection, biliary ascariasis etc.

Acupuncture has good effect on upper abdominal pain, without side-effect of concealing the positive signs. According to the characteristics of acupuncture treatment, upper abdominal pain can be divided into acute epigastralgia and acute hypochondriac pain.

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture: For acute epigastralgia, selecting *Zhongwan* (Ren 12), *Zusanli* (St 36), *Gongsun* (Sp 4), *Neiguan* (P 6), *Neiting* (St 44), *Liangqiu* (St 34) etc. or *Huatuojiagi* of Thoracic 7 to 10 (Extra 15) (mainly with tender spot); For acute hypochondriac pain, selecting *Liangmen* (St 21), *Yanglingquan* (Gb 34), *Zhigou* (Sj 6), *Qimen* (Liv 14), *Xiaxi* (GB 43), *Xingjian* (Liv 2) etc. or *Huatuojiagi* of Thoracic 7 to 10 (Extra 15) (mainly with tender spot).

Manipulation: Insert needles slowly for the points on the abdomen. After arrival of *Qi* is achieved, manipulate needle with small range of twirling and rotating method, accompanied with *Lufa* method to maintain the needling reaction. For points of the limbs, insert needles with the needle tip pointing to the trunk direction, strong stimulation and with reducing method of twirling and rotating, or *Longhujiaozhan* method, in combined with *Lufa* method. So the needling reaction can be conducted upwardly and maintained about 10 minutes. Manipulate needles with methods of twirling & rotating and lifting & thrusting continuously for 30 to 60 minutes. For *Huatuojiagi* (Extra 15), the needle tip points to the direction of the spinal cord. Manipulation is similar to above. The needling action should radiate to the pain site of the upper abdomen.

(b) Other Therapies:

(1) Ear Acupuncture: Stomach, Liver, Gallbladder, Ear-*Shenmen*, Brain, End of Inferior Helix Crus etc.

Manipulation: Strong stimulation, continuously twirling and rotating needles for 20 to 30 minutes, or retain needles for 1 hour. Manipulate needles every 5 to 10 minutes.

(2) Nose Acupuncture: Ear, Liver, Spleen, Gallbladder etc.

Manipulation: Penetrating from ear to chest, from liver to spleen from gallbladder to stomach. Manipulation with strong stimulation and method of continuous twirling and rotating. Retain needles for

30 minutes.

(3) Foot Acupuncture: Gallbladder, Stomach, *Lineiting*, *Neitaichong* etc.

Manipulation: It is similar to that for headache (See page 88).

(4) Scalp Acupuncture: *Epang Xian* II (both sides)

Manipulation: It is similar to that for chest pain (See page 89). During needling, tell the patient to do deep abdominal breathing.

(5) Point Injection: Selection of points is similar to that for body acupuncture, ear acupuncture, nose acupuncture.

Manipulation: It is similar to that for chest pain (See page 89).

(6) digital Depression Therapy: Selection of points is similar to that for body acupuncture, ear acupuncture. Search for tender spot at the chest, hypochondrium, back, upper abdomen, particularly at the margin of the bone.

Manipulation: Press distant points and tender spot heavily, Press 3 to 5 times for each point, repeat about 10 times. Time for pressing is about 20 to 30 minutes.

(7) Hand Acupuncture: Point for Pain of Stomach and Intestine.

Manipulation: After arrival of *Qi* is achieved. Manipulate needles with moderate or strong stimulation and method of continuous twirling and rotating for 10 to 30 minutes.

IV Acute Abdominal Pain

It refers to sudden severe pain on the area below the xiphoid process and above the pubic. It is caused by stagnation of *Qi*, blood stasis, retention of food which leads to stagnation of *Qi* of *Zang-Fu* organ and meridians, retardation of *Qi* circulation of the fu organs.

Based on place, cause and symptoms, lower abdominal pain can be divided into pain around umbilicus, pain of the side abdomen, and pain of the lower abdomen. It is closely related to three *Yin* channels of foot, foot-*Shaoyang* channel, foot-*Yangming* channel, *Ren* channel, *Chong* channel and *Dai* channel; Commonly seen are the diseases of acute appendicitis, acute intestinal obstruction, acute enteritis, acute enterospasm, peritonitis, ureterolithiasis, extrauterine pregnancy, twisting ovarian cyst, dysmenorrhea, enterozoon disease etc. Operative or non-operating acute abdominal pain in internal medicine, surgery and gynecology.

Acupuncture has good effect of killing pain and therapeutic effect on acute abdominal pain. For the operating acute abdominal pain, giving acupuncture treatment before operation can relieve pain, decrease tissue adhesion and exudate, amount of blood, maintain blood pressure, respiration and pulse during the operation and help the patient to recover soon. Acupuncture can also be applied as anesthesia.

Acute abdominal pain is characterized with abrupt onset of disease, quick progress of cold, heat, deficiency and excess. So treatment should be given in time. Observing the change of pathological condition intensively. Comprehension therapies or operation should be applied if necessary.

(a) Acupuncture and Moxibustion Therapy

(1) Body Acupuncture: for abdominal pain around the umbilicus, select *Tianshu* (St 25), *Zusanli* (St 36), *Shangjuxu* (St 37), *Neiting* (St 44), *Gongsun* (Sp 4) etc. For lateral abdominal pain, select *Tianshu* (St 25), *Sanyinjiao* (Sp 6), *Taichong* (Liv 3), *Zusanli* (St 36) etc. For lower abdominal pain, select *Guanyuan* (Ren 4) or *Zhongji* (Ren 3), Tender spot on the abdomen, *Zusanli* (St 36), *Sanyinjiao* (Sp 6), *Yinlingquan* (Sp 9) etc.

Tender spot at the medial, lateral aspect of the tibia and at both sides of the thoracic vertebrae 7 to 12 can added for acute abdominal pain.

Manipulation: Firstly acupuncture points of the lower limbs with strong stimulation and reducing method of continuous twirling and rotating, or *Longhujiaozhan* method, in combination with *Lufa* method. Manipulate needles about 30 minutes. Retain needles 2 hours, or with stimulation of pulse current.

For points on the abdomen, with slow and gentle manipulation, twirling and rotating needles in small angle and high frequency (above 200 times/minute). For obvious local tenderness, or accompanied with guarding and rebound tenderness, adjacent puncture, *Hegu* puncture can be applied.

(2) Moxibustion: It is applied to cold syndrome of deficiency type. Moxibustion with moxa sticks can be applied to points on the abdomen. For severe cold pain of the umbilicus and abdomen, indirect moxibustion with salt, or moxibustion with moxibustion apparatus,

or massage with hot salt can be used.

(b) Other Therapies:

(1) Ear Acupuncture: Middle Cymba conchae, Stomach, Pancreas, Ear-*Shenmen*, Large Intestine, Small Intestine, Lumbar-Sacral Vertebrae, End of Inferior Helix Crus etc.

Manipulation: Penetrating needling with strong stimulation, reducing method of continuous twirling and rotating, or stimulation with pulse current (continuous wave). Retain needles for 30 minutes. Embedding needle can also be applied.

(2) Foot Acupuncture: It is applied to the patient with consistent severe pain. Select Large Intestine, Small Intestine, *Lixiang*, *Sanjiao*, *Neitaichong* etc.

Manipulation: It is similar to that for Headache.

(3) Point Injection: Selection of points is similar to that for body acupuncture, ear acupuncture.

Manipulation: Water for Injection, *Danpifen* injection (丹皮酚注射液) *Yanhushuo* injection (延胡索乙素注射液), or other injection for corresponding treatment can be used. 0.5 to 1 ml for each point, 2 to 4 points for one treatment, 1 to 2 time a day.

(4) Scalp Acupuncture: It is similar to that for acute upper abdominal pain.

V Acute Lumbago

It is caused mostly by the attack of cold-damp, damp-heat or trauma, manifested as sudden onset of acute pain over the lumbar region, and limited movement of lumbus. In severe cases, pain may radiates to the lower limbs. It is a common acute disease in the departments of orthopedics, surgery and acupuncture.

Lumbago is commonly seen in the disease of trauma of lumbar soft tissue, spine injury and kidney colic. Acupuncture has remarkable effect on acute lumbago.

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture: *Renzhong* (Du 26), *Houxi* (St 3), *Weizhong* (B 40), Tender spot of the lumbus, corresponding *Huatuojiaji* (Extra 15).

Manipulation: Firstly acupuncture distant points with strong stimulation of reducing method of twirling and rotating, or *Longhujiaozhan* method in combined with *Lufa* method. Pricking for

bloodletting is applied to *Weizhong* (B 40). During needling, tell the patient to do active or passive exercise of lumbar region. Manipulating needles for 20 to 30 minutes. Then select Tender spot of the lumbus. The needling reaction should be equal to pain site of lumbago. Retain needles 15 to 30 minutes. Warm needle, cupping method, pulse current apparatus (sparse and dense wave) can be added.

(b) Other Therapies:

(1) Ear Acupuncture: Lumbar-Sacral Vertebrae, Kidney, Ear-*Shenmen* etc.

Manipulation: For lumbago at the center lumbus, select both sides ear points. For lumbago at one side, the same side ear points can be selected. Strong stimulation of continuous twirling and rotating method. During manipulating needles, tell the patient to exercise one's lumbar region. Embedding needle of stimulation of pulse current can be added.

(2) Scalp Acupuncture: *Zhenshang Zhengzhong Xian* (lumbago at center lumbus), or *zhenfshangpang Xian* (one side lumbago).

Manipulation: Gauge 28 or 30 filiform needle is used. Insert the needle from upper to at 30 degree angle with consistent twirling & rotating and lifting & thrusting. At the same time, tell the patient to exercise one's disease site. Retain needles for 1 to 2 hours. During retaining needles, tell patient to exercise one's lumbar region.

(3) Hand Acupuncture: Point for Lumbago

Manipulation: Insert the needle obliquely to the wrist at the angle of 45 degree. Manipulate needles with strong stimulation of consistent twirling and rotating method. At the same time, tell the patient to exercise one's disease site.

(4) Point Injection: Selection Tender Spot at the lumbar-Sacral region.

Manipulation: 10-25% Glucose injection, water for injection, or 0.5-1% Procaine injection, 5 to 20 ml can be used. 5 to 10 ml for each Tender Spot, one time a day.

(5) Disital Depression Therapy: Selection of points is similar to body acupuncture and ear acupuncture.

Manipulation: Firstly press distant points with heavy manipulation, tell the patients to exercise one lumbar region at the same time.

10 to 20 minutes after, press local tender spot with moderate manipulation about 10 to 20 minutes.

VI Pain of the Limb and Soft Tissue

Pain of the limb and soft tissue is mostly caused by trauma, infection, functional disturbance which press and stimulate the nerve, commonly seen in the diseases of rheumatic arthritis, traumatic arthritis, rheumatoid arthritis, wind arthralgia, trauma of the soft tissue.

TCM theory think pain of the limb and soft tissue is in the range of "Bi Syndrome", mainly due to exogenous attack of wind, cold and wetness pathogens, or trauma which lead to stagnation of *Qi* and blood, obstruction of channels *Qi*.

Acupuncture has remarkable effects of killing pain on this kind of painful syndromes. Principles for point selection is that mainly selecting local points (tender spot), accompanied by selecting distant points along the channel.

(a) Acupuncture and Moxibustion Therapy:

(1) Body Acupuncture: For the shoulder joint: Selecting *Jianliao* (SJ 14), *Jianneiling* (Extra 23), *Jianzhen* (SJ 9), *Jiayu* (LI 15), accompanied with *Hegu* (LI 4) or *Waiguan* (SJ 5). For elbow joint: Selecting *Quchi* (LI 11), *Chize* (L5), *Quze* (P 3), *Tianjing* (SJ 10), accompanied with *Hegu* (LI 4) or *Waiguan* (SJ 5). For wrist joint: Selecting *Yangchi* (SJ 4), *Yangxi* (LI 5), *Yangsuo* (SI 5), *Daling* (P 7), *Shenmen* (H 7), accompanied with *Hegu* (LI 4) or *Waiguan* (SJ 5). For hip joint: Selecting *Huantiao* (GB 30), *Juliao* (GB 29), *Biguan* (St 31), *Shengfu* (B 36), accompanied with *Yanglingquan* (GB 34), *Weizhong* (B 40), *Zusanli* (St 36). For knee joint: Select *Xiyan* (Extra 36), *Weizhong* (B 40), *Yanglingquan* (GB 34), *Liangqiu* (St 34), *Xizhong* (Extra Point), *Zusanli* (St 36). For ankle joint: Select *Qixu* (GB 40), *Kunlun* (B 60), *Shenmai* (B 62), *Zhaohai* (K 6), *Jiexi* (St 41), *Shangqiu* (Sp 5), *Taixi* (K 3), accompanied with *Xuanzhong* (GB 39), *Sanyinjiao* (Sp 6): For digital joint: Selecting *Baxie* and *Bafeng* (Extra 40). For joint pain of whole body: Select *Hegu* (LI 4) and *Taichong* (Liv 3). For neck joint: Select *Fengchi* (GB 20), *Huatuojiayi* of the neck, accompanied with *Lieque* (L 7), *Waiguan* (SJ 5). For trauma of the soft tissue: Selecting local points, accompanied by distant points along the channel and

Hegu (LI 4).

Manipulation: Firstly acupuncture distant points, manipulate the needle with strong stimulation of twirling and rotating method for 10 to 20 minutes, or with methods of *Longhujiaozhan*, *Ziwudaojiu*, *Cangguidianxue* and in combination with *Lufa* method to maintain the needling reaction. At the same time, tell the patient to exercise disease site. After pain is relieved, selecting the local points with moderate or strong stimulation of twirling & rotating and lifting & thrusting methods. For the wide range and deep position of pain, triple acupuncture, adjacent acupuncture, *Hegu* acupuncture, quintuple acupuncture can be applied with warm needle.

For local redness and swelling, and fever: Penetrating heaven coolness method can be applied. For local area aversion to cold: setting the mountain on fire method can be applied. For severe local swelling, or distention pain, or dragging pain: *Chouti* method can be applied, or with stimulation of pulse current (sparse and dense wave).

(2) Moxibustion: Selection of points is the same as local points for body acupuncture.

Manipulation: Mainly with warm needle and moxibustion with moxa sticks, or indirect moxibustion with monkshood cake. 1 to 3 moxa cones for warm needle. 3 to 5 moxa cones for indirect moxibustion with monkshood cake. Time for moxibustion with moxa sticks is 10 to 20 minutes.

(b) Other Therapies:

Ear Acupuncture: Points corresponding to disease site, Ear-*Shenmen*, End of Inferior Helix crus, Brain, Liver, Spleen etc.

Manipulation: Insertion with 0.5 *cun* long needle, Manipulation with method of continuous twirling and rotating. Remarkable effects of killing pain can be achieved. Then embedding needle can be applied to maintain and strengthen the effect.

3. TREATMENT ACCORDING TO DISEASES

I Headache

(a) **Migraine:** A recurrent, intense, pulsative headache usually

confined to one side of the temporal region, accompanied with nausea, vomiting. *Yanglingquan* (GB 34), *Sanyinjiao* (Sp 6) can be added with reducing method of consistent twirling and rotating.

(b) **Headache Due to Hypertension:** The patient is with history of hypertension. *Taichong* (Liv 3), *Quchi* (LI 11) can be added with reducing method of lifting and thrusting, or with method of penetrating heaven coolness.

(c) **Headache Due to Cerebrovascular Accident:** Commonly accompanied with coma, paralysis etc. Penetrating needling from *Xingjian* (Liv 2) to *Yongquan* (K 1) can be added with method of penetrating heaven coolness.

(d) **Traumatic Headache:** The patient is with trauma history to the head. *Sanyinjiao* (Sp 6) can be added with reducing method of twirling and rotating.

(e) **Headache Due to Lumbar Anesthesia:** The patient is with history of lumbar puncture. *Kunlun* (B 60) can be added with reducing method of twirling and rotating.

(f) **Headache Due to Glaucoma:** Intense headache, accompanied by distention and pain of the eyeball, visual disturbance, hyper-intraocular pressure, and nausea, vomiting. *Yinlingquan* (Sp 9), *Sanyinjiao* (Sp 6), penetrating from *Taichong* (Liv 3) to *Yongquan* (K 1) can be added with method of penetrating heaven coolness.

(g) **Trigeminal Neuralgia:** Abrupt onset of pain occurs like an electric shock at the face. The pain is cutting, drilling like and intolerable, but transient and paroxysmal. For pain at supraorbital region: Tender spot between *Zanzhu* (B 2) and *Yuyao* (Extra 5) can be added. For pain at mandibular region: Tender spot between *Dicang* (St 4) and *Jiache* (St 6) can be added.

Manipulation: After insertion of needles, the needling reaction of numbness and electric shock feeling should be felt. Then small range of *Quezhuofa* method can be applied to maintain the needling reaction. Time for manipulating needles is 10 to 20 minutes.

II Chest Pain

(a) **Angina Pectoris:** The patient is with history of coronary artery disease, myocardial infarction, manifested as paroxysmal, severe, precordial pain, accompanied with coldness and cyanosis

of the extremities. *Zusanli* (St 36), *Shenmen* (H 7), *Ximen* (P 4), *Xinshu* (B 15) and *Jueyinshu* (B 14) can be added.

Manipulation: With moderate stimulation, manipulate needles continuously with twirling and rotating method for 10 to 20 minutes. For the points on the back, insert the needle obliquely to the spinal cord for 0.8 to 1.2 cun, so as to make the needling reaction spread to the chest.

(b) Sprain and Contusion of the Soft Tissue of the Chest: The patient is with traumatic history. Penetrating from *Hegu* (LI 4) to *Houxi* (SI 3) can be added.

Manipulation: Manipulate needles continuously with moderate or strong stimulation of twirling and rotating method for 10 to 20 minutes. At the same time, tell the patient to do deep breathing and exercise of the chest.

(c) Herpes Zoster: Groups of deep-seated vesicles of erythematous bases distributed over one side of the waist and hypochondrium following the course of a nerve, associated with local burning feeling and severe neuralgic pain. Puncturing at both ends of the herpes with method of penetrating needling along the skin can be added. Continuous twirling and rotating method can be added to *Hegu* (LI 4). Retain needles about 30 minutes.

(d) Acute Mastadenitis: For breast feeding women with red, swelling and pain of the breast (early stage of inflammation): *Rugen* (St 18) can be added; For mammary mass; *Shaoze* (SI 1), *Hegu* (LI 4) can be added.

Manipulation: *Rugen* (St 18) and the region of local mass can be selected with triple acupuncture. Pricking for bloodletting for *Shaoze* (SI 1). Reducing method of twirling and rotating for *Hegu* (LI 4).

III Acute Abdominal Pain

(a) Biliary Ascariasis: Proxysmal, drilling colic of the upper abdomen, no distinct tenderness, no muscular tension. The patient is with history of vomiting ascaris. Penetrating from *Yingxiang* (LI 20) to *Sibai* (St 2), from *Juque* (Ren 14) to *Zhongwan* (Ren 12) can be added; For point injection, VK3 injection 3 ml can be injected to *Shangwan* (Ren 13) with the needle tip pointing to the direction of the gallbladder.

(b) Acute Infection of the Biliary Tract and Cholelithiasis: Persis-

tent pain at the right upper abdomen or upper abdomen, accompanied by fever, vomiting, local tenderness, rebound pain, muscular attention. Pain can be induced by greasy food. *Rugen* (GB 24), *Qimen* (Liv 14), *Hegu* (LI 4), *Dannangxue* (Extra 39) can be added.

Manipulation: Insert the needle obliquely at a 45 degree angle about 1 to 1.5 cun for *Rugen* (GB 24), *Qimen* (Liv 14). Stimulating with pulse current (sparse and dense wave) for 30 to 60 minutes; For *Hegu* (LI 4) and *Dannangxue* (Extra 39), strong stimulation of continuous twirling and rotating method can be applied, accompanied with *Lufa* method. Retain needles for 30 to 60 minutes. For jaundice, *Zhiyang* (Du 9), *Taichong* (Liv 3) can be added with reducing method.

(c) Acute Pancreatitis: Continuous severe upper abdominal pain, accompanied with fascicular dragging pain, fever, vomiting, distinct tenderness of the upper abdomen, muscular tension but no distinct rebound tenderness, amylase in urine more than 500 units. For acute necrotic pancreatitis, diffuse peritonitis and toxic shock can be developed soon. Prognosis is very poor. *Zhongwan* (Ren 12), *Hegu* (LI 4), *gongsun* (Sp 4), *Neiting* (St 44) can be added.

Manipulation: *Zhongwan* (Ren 12) is the main point for this disease. It can be selected with *Hegu* acupuncture, Continuous twirling and rotating method can be applied to *Hegu* (LI 4) with strong stimulation of reducing method. Retain needles more than 1 hour.

(d) Acute Gastric Dilatation: It often occurred after over eating, sudden onset of persistent distention and pain of the upper abdomen and around umbilicus, pain may paroxysmally become worse, accompanied sensation of fullness, vomiting, hiccup, frequent vomiting but small amount of vomit. tympanitic percussion resonance at the upper abdomen, and with splashing sound, no distinct tenderness. *Neiguan* (P 6) and *Zusanli* (St 36) can be added.

Manipulation: With moderate or strong stimulation of reducing method of twirling and rotating. At the same time, cupping method can be applied to *Zhongwan* (Ren 12).

(e) Acute Intestinal Obstruction: Acute abdominal pain, accompanied by abdominal distention, vomiting, no defecation and exsufflation. *Fujie* (Sp 14) and *Daheng* (Sp 15) can be added.

Manipulation: *Zhigou* (S 6), *Yanglingquan* (GB 34) and *Neiguan*

(P 6) are the main points for this disease, which can be selected with strong stimulation of reducing methods of continuous twirling & rotating and lifting and thrusting. Reducing method of twirling and rotating can be applied to *Fujie* (Sp 14) and *Daheng* (Sp 15). Time for manipulating needles should be longer than 30 minutes;

(f) Acute, Localized Perforating Ulcer: The patient is with history of ulcer, sudden onset of severe abdominal pain, accompanied with muscular attention, rebound pain.

Manipulation: Mainly select *Zhongwan* (Ren 12) and tender spot on the abdomen with moderate stimulation. *Neiguan* (P 6), *Zusanli* (St 36), *Gongsun* (Sp 4), *Sanyinjiao* (Sp 6) etc. can be selected with strong stimulation of continuous twirling and rotating method. Retain needles longer than 1 hour.

(g) Acute Appendicitis: Abdominal pain first at the upper abdomen of around umbilicus, then transferred to the right lower abdomen, accompanied with fever, vomiting, local tenderness, rebound pain muscular attention. *Lanweixue* (Extra 3) and *Neiting* (St 44) can be added.

Manipulation: With strong stimulation of continuous twirling and rotating, or with stimulation of pulse current. Retain needles longer than 1 hour.

(h) Dysmenorrhea: Lower abdominal pain often occurs before or after menstruation period. *Hegu* (LI 4) can be added. Mainly select *Guanyuan* (Ren 4), *Sanyinjiao* (Sp 6) and *Hegu* (LI 4). Firstly select *Hegu* (LI 4), *Sanyinjiao* (sp 6) with moderate stimulation. For *Guanyuan* (Ren 4), warm needle or moxibustion with moxa sticks (10 to 20 minutes) can be used. Point injection with *Xuchangqing* injection (徐长卿注射液) can be applied to *Cilio* (B 32), 1 ml for each point.

(i) Acute Pelvic Inflammation: Lower abdominal pain, accompanied with fever, leukorrhagia, tenderness at the lower abdomen. *Hegu* (LI 4) can be added.

Manipulation: Mainly select tender spot of the lower abdomen and *Guanyuan* (Ren 4), *Sanyinjiao* (Sp 6), *Hegu* (LI 4) etc. Manipulation is similar to that for dysmenorrhea.

(j) Ectopic Pregnancy: The patient is with history of menolipsis, sudden onset of severe lower abdominal pain, slowly involves

whole abdomen, accompanied with small amount of vaginal bleeding of dark brown colour. Uncoagulable blood can be obtained by acupuncture the posterior fornix. *Yinbai* (Sp 1) and *Diji* (Sp 8) can be added.

IV Acute Lumbago

(a) Prolapse of Lumbar Intervertebral Disc: The patient may be with lumbar sprain or not. Acute lumbago, accompanied with pain radiates to the lower limbs, deformation of the spinal column, distinct percussion pain at the projective place, paresthesia at the lateral aspect of the lower limbs and dorsum of foot. All tests for irritation of nerve root are positive.

Manipulation: Mainly select tender spot at the lumbus with 3 to 4 *cun* length needle. Needling reaction should be spread downwardly, or warm needle can be added. Retain needles for 30 minutes. before withdraw needles, manipulating the needles with *Quezhuofa*.

Point injection with 0.5-1% Procaine injection (10 to 20 ml) can be applied to the tender spot at the lumbus. Needling reaction should be spread downwardly.

(b) Renal Colic: It is caused mostly by kidney stone. Sudden onset of colic, which radiates to the same side costovertebral angle, front aspect of the abdomen, same side medial aspect of the thigh and vulva. Accompanied by nausea, vomiting or hematuria.

Manipulation: Mainly select tender spot at the lumbus and abdomen of the disease side with acupuncture of cupping method. Accompanied with *Yinlingquan* (sp 9) and *Sanyinjiao* (Sp 6), selected by strong stimulation of continuous twirling and rotating method. or with strong manipulation of digital depression therapy.

V Pain of the Limb and Soft Tissue

(a) Acute Rheumatic Arthritis, Rheumatoid Arthritis: Manifested as red, swelling, heat and pain of the joint.

Manipulation: Mainly select the local points with method of penetrating heaven coolness, so coolness and comfortable feeling of the local region can be felt by the patient.

(b) Sciatica: Acute pain, which radiates to the lower limb along

the sciatic nerve. *Huantiao* (GB 30) and the tender spot of the lower limb along the sciatic nerve.

Manipulation: With moderate or strong stimulation of twirling & rotating and lifting & thrusting methods, accompanied with *Lufa*. Retain needle for 20 minutes. Stimulation of pulse current (sparse and dense wave) or warm needle can be added.

(c) Polyneuritis: Manifested as symetric sensorimotor disturbance of the end of the four limbs, gloveanesthesia, sockanesthesia. For upper limbs: *Shousanli* (LI 10), *Waiguan* (SJ 5), *Hegu* (LI 4) can be added; For Lower limbs: *Zusanli* (St 36), *Tiaokou* (St 38) and *Taichong* (Liv 3) can be added.

Manipulation: With moderate stimulation. Warm needle can be added.

(d) Thromboansitis Obliterans: Manifested as numbness, coldness, pain of the lower limbs, particularly toes, intermittent claudication. Pain is more severe at night. weak or no arteriopulmus of the dorsum of the foot.

Manipulation: Mainly select *Zusanli* (St 36), *Tiaokou* (St 38), *Sanyinjiao* (Sp 6), *Gongsun* (Sp 4) and *Taichong* (Liv 3) with strong stimulation of reducing method of twirling and rotating, or method of setting the mountain of fire. Warm needle or moxibustion with moxa sticks can be applied too.

(e) Erythromelalgia: Paroxysmal angiectasis, flush, high skin temperature of the end of the limbs, or digit, severe burning pain, aggravated by heat stimulation, exercise or dropping foot.

Manipulation: *Taichong* (Liv 3), *Zulinqi* (GB 41), *Hegu* (LI 4) can be selected with heavy manipulation of reducing methods of twirling & rotating and lifting & thrusting, or reducing methods of *Longhujiaozhan*, Penetrating heaven coolness. Retain needles for 30 minutes.

PART VI BLEEDING DISEASES

Based on the origin of bleeding, bleeding disease can be divided into spitting blood, hemoptysis, epistaxia, hematochezia, hematuria, vaginal bleeding and traumatic bleeding, mostly caused by trauma,

infection, abnormal metabolism, organic disease or disturbance of blood coagulation mechanism.

TCM theory thinks that bleeding diseases belong to excess syndrome at the first stage, which is due to hyperactivity of pathogens and fire, abnormal rushing up of *Qi* leading to blood out of the vessels. If large amount of bleeding, it turns into deficiency syndrome because loss of blood leading to consumption of *Qi*, or even collapse. Blood flowing upward along the channel and bleeding through the orifice, which results in epistaxis, spitting blood, hemoptysis, Blood flowing downward along the channel and bleeding, which result in hematochezia, hematuria, vaginal bleeding, Blood outwardly flowing along the channel and bleeding through the skin, which results in hematohidrosis. Bleeding diseases are related to dysfunction of the heart in dominating blood, liver in storing blood and spleen in controlling blood.

Acupuncture has good effect on bleeding disease, but mainly for exudation of blood and bleeding from the small vessels. Comprehensive therapy should be applied for bleeding of the mediate and large vessels.

1. DIFFERENTIAL DIAGNOSIS

(a) Bleeding Place: According to bleeding place, which organ is involved can be deduced. For example: Hemoptysis refers to the lung and commonly seen in pulmonary tuberculosis, hemoptysis due to bronchiectasis; Spitting blood refers to the stomach and is commonly seen in ulcer of the stomach and duodenum and esophageal varicosis; Hematochezia refers to the intestine and is commonly seen in hemorrhoid, infection and inflammation of the intestinal tract, intestinal polyposis, tumor etc. Hematuria refers to the kidney and bladder and is commonly seen in lithiasis of the kidney, ureter and bladder, inflammation, trauma, tumor etc. Metrorrhagia refers to the uterus and is commonly seen in functional vaginal bleeding, abortion, ectopic pregnancy.

(b) Amount and Colour of Bleeding: According to amount and colour of bleeding, syndrome of cold, heat, deficiency and excess can be made out. Large amount of bleeding with red colour refers to

excess and heat syndrome. Small amount of bleeding with red colour refers to deficiency and heat syndrome. Large amount of bleeding with pale colour refers to deficiency of *Qi*. Small amount of bleeding with clots and crimson colour refers to stagnation of *Qi* and blood stasis.

(c) **Discrimination Table for Bleeding Diseases** (see Table 8)

2. TREATMENT

For the treatment of bleeding diseases: Excess syndrome and heat syndrome are mainly with reducing method of acupuncture. Therapy of heat-clearing, reducing and bleeding-stopping should be applied; Cold syndrome and deficiency syndrome are mainly with reinforcing method of acupuncture and plus moxibustion. Therapy of warming, reinforcing and bleeding-stopping should be applied; Bleeding due to blood stasis is with manipulation in combination with reducing and reinforcing methods. Activating therapy should be applied, accompanied with bleed-stopping therapy. For bleeding due of trauma, acupuncture treatment can be given according to the amount and place of bleeding and accompanying symptoms.

I Epistaxis

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture; *Yuji* (L 10), *Shaoshang* (L 11), *Shangxi* (Du 23) etc.

Manipulation: Firstly select *Yuji* (L 10) with moderate, strong stimulation of reducing method of twirling and rotating, in combined with *Lufa*. Retain needles 20 to 30 minutes. Pricking for bloodletting or moxibustion with moxa cone (1 to 3 cones) can be applied to *Shaoshang* (L 11); For *Shangxi* (Du 23), insert the needle from upper to the forehead region with the reducing method of twirling and rotating, in combination with *Chouti* method. Retain needles 20 to 30 minutes.

(b) Other Therapies:

(1) Nose Acupuncture: Lung, Ear, Large Intestine.

Manipulation: Penetrating from lung and heart about 0.2 *cun* depth, manipulating needles with continuous twirling and rotating

method about 20 to 30 minutes. Retain needles 20 to 30 minutes.

(2) Digital Depression Therapy: Massage from *Yintang* (Extra 2) to the anterior hairline with the thumbs, repeat several times. Press *Yintang* (Extra 2) and *Shangxi* (Du 23) heavily.

(3) Simple Therapy: Tie up the middle joint of the same side middle finger to the epistaxis with thread; Pound fresh garlic to pieces and then dress it on the sole of the same side foot to epistaxis.

(4) Foot Acupuncture: Lung, Kidney.

Manipulation: Insert needles about 1 *cun* with manipulation of reducing method of twirling and rotating. Retain needles 30 minutes.

II Hemoptysis

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture: *Yuji* (L 10), *Chize* (L 5), *Kongzui* (L 6) etc.

Manipulation: Mainly with reducing method of lifting and thrusting, and accompanied with reducing method of twirling and rotating. Moderate or strong stimulation. Or with method of penetrating heaven coolness,

(b) Other Therapies:

(1) Ear Acupuncture: Lung, Trachea, Ear-*Shenmen*, Diaphragm, Infratragic Apex.

Manipulation: with moderate or strong manipulation. Manipulate needles continuously with twirling and rotating method for 10 to 20 minutes; Or embedding needle, pressing therapy or stimulation of pulse current can be applied.

(2) Point Injection: Selection of points is similar to that for body acupuncture, ear acupuncture.

Manipulation: Vit K3 injection, Adrenosem injection or *Xianhecao* injection (仙鹤草注射液) can be used. 0.2 to 1ml for each point. 2 to 4 point for each treatment, 1 to 2 times a day.

(3) Cutaneous Needle: tapping *Renying* (St 9) with cutaneous needle for 10 to 20 minutes.

(4) Dressing Therapy: Pound fresh garlic (10 g) to Pieces, mixed with sulphur powder 6 g, Cortex Cinnamoni 3 g, Borneolum 3 g, then dress it to both *Yongquan* (K 1).

(5) Thread Burial Therapy: *Kongzhui* (L 6), *Tanzhong* (Ren 1), *Chize* (L 5) etc.

Table 8 DISCRIMINATION OF BLEEDING DISEASES

Place	Excess & Deficiency	Etiology and Pathology	Main Symptoms	Accompanied symptoms	Commonly Seen Diseases
Epistaxis	Excess syndrome	Lung heat force blood out of the vessels through the upper orifice	dryness of nose, epistaxis, large amount of bleeding or small amount, red tongue, thin fur, rapid pulse.	fever, thirst cough with little sputum.	acute febrile diseases, such as influenza.
		retention of the stomach heat which forces blood out of the vessels	epistaxis, bleeding from sum, large amount of bleeding with red colour, red tongue, rapid pulse	Thirst, suffocating sensation over the chest, constipation.	
		stagnation of Qi which turns into fire, liver fire rush upward to the nose	epistaxis, restlessness, easy anger, red tongue, yellow fur, wiry and rapid pulse.	headache, dizziness, dry mouth, redness of eyes	hypertension
Hemoptysis	Excess syndrome	attack of the lung by the liver fire	hemoptysis or sputum with blood, large amount of bleeding with red colour, red tongue, yellow fur, wiry and rapid pulse	cough, pain of the chest and hypochondrium, restlessness, easy anger, constipation, reddish urine	hemoptysis due to bronchiectasis
	Deficiency syndrome	Yin deficiency of the lung and kidney leading to hyperactivity of fire	hemoptysis or sputum with blood, red colour bleedings, red tongue, thin and rapid pulse	hectic fever, night sweating tinnitus, dry mouth and throat	pulmonary tuberculosis
Spitting Blood	Excess syndrome	retention of heart in the stomach which turns into fire and hurts the vessels	spitting blood with red colour, feeling of fullness and depression over the epigastric and abdominal region, or even pain red tongue, yellow and greasy fur, smooth and rapid pulse	spitting blood with remains of food, halitosis, constipation or black stool	ulcer of the stomach and duodenum, later stage of hepatocirrhosis
		attack of the stomach by liver fire, damage of stomach collaterals	spitting blood with large amount of bleeding, pain of the epigastrium and hypochondrium, yellow fur, red tongue, wiry and rapid pulse.	dizziness, blurring of vision, restlessness and easy anger, bitter taste of the mouth, redness of eyes	
	Deficiency syndrome	deficiency and cold of the heart and spleen	spitting blood with dark brown colour, frequent recurrence.	palpitation, shortness of breathing, dull pain of the epigastrium and abdomen fatigue.	

Table 8 DISCRIMINATION OF BLEEDING DISEASES (continued)

Place	Excess & Deficiency	Etiology and Pathology	Main Symptoms	Accompanied Symptoms	Commonly Seen Diseases
Hepatochezia	Deficiency syndrome	deficiency and cold of the spleen and stomach leading to disability in controlling blood	purple or black stool, pale tongue, thin pulse	dull abdominal pain, palpitation, shortness of breathing	bleeding due to ulcer
	Excess syndrome	retention of damp-heat in the intestine which damage the vessels	hematochezia with red colour or first bleeding then stool, yellow greasy fur, rapid pulse	burning sensation of the anus, difficulty of urination, yellow and reddish urine	anal fissura, hemorrhoid or diseases of the rectum
Hematuria	Excess syndrome	fire in the heart attacking the small intestine or retention of damp-heat in the bladder	feverish and reddish urine with red blood, burning sensation of the urethra, red tongue, rapid pulse	frequent, difficult and painful discharge of urine, restlessness, thirst	infection of urinary system, lithiasis
	Deficiency syndrome	yin deficiency of the spleen and kidney leading in disability of controlling blood	frequent urine with blood, light red colour, pale tongue, thin and rapid pulse	fatigue, soreness of lumbus, dizziness, tinnitus	tuberculosis, cancer
Metrorrhoea	Excess syndrome	injury of Chong and Ren Channels by blood-heat which expels blood out of the vessels	metrorrhoea with large amount of bleed and red colour, red tongue, yellow greasy fur, rapid pulse	restlessness, thirst, yellow urine, constipation	functional vaginal bleeding incomplete abortion, hysteromyoma, polyp of the cervix bleeding before bortion (abruption placentae) ectopic pregnancy.
	Excess accompanied with deficiency syndrome	blocking of Chong and Ren Channel by blood stasis	metrorrhoea with clots and purple or black colour, purple tongue or with macule, unsmooth pulse	abdominal pain, aggravated by pressure, pain relieved after discharge of clots	
	Deficiency syndrome	deficiency and cold of the spleen and kidney, disability in controlling blood	metrorrhoea with small amount and dim pale colour, pale tongue, deep and thin pulse	fatigue, soreness and weak of the lumbus, and knees	

Manipulation: 0.5 to 1 *cun* length surgical catgut (size No. 0) is buried into the subcutaneous tissue of the points.

III Spitting Blood

(a) Acupuncture and Moxibustion Therapy:

(1) Body Acupuncture: *Neiguan* (P 6), *Zusanli* (St 36), *Yinbai* (Sp 1), *Zhongwan* (Ren 12), *Xingjian* (Liv 2), *Geshu* (B 17) etc.

Manipulation: *Neiguan* (P 6) and *Zusanli* (St 36) are with moderate stimulation of lifting and rotating method, accompanied by twirling and rotating method to reinforcing deficiency and reducing excess; *Xingjian* (Liv 2) is with method of penetrating heaven coolness. For *Zhongwan* (Ren 12), insert the needle slowly, retain the needle 30 minutes after arrival of *Qi* is achieved, avoid large range of lifting & thrusting and twirling & rotating. Direct moxibustion with moxa (3 to 5 cones) can be applied to *Yinbai* (Sp 1).

Moxibustion: It is commonly used for cold syndrome of deficiency type. *Yinbai* (Sp 1), *Zusanli* (St 36), *Dadun* (Liv 1), *Yongquan* (K 1).

Manipulationg, *Yinbai* (Sp 1) and *Dadun* (Liv 1) are with direct moxibustion with moxa cone (3 to 5 cones). *Zusanli* (St 36) and *Yongquan* (K 1) are with moxibustion with moxa sticks (20 minutes).

(b) Other Therapies:

(1) Ear Acupuncture: Stomach, Liver, Spleen, Ear-*Shenmen*, Diaphragm, Infratragic Apex.

Manipulation: With moderate or strong stimulation, manipulate needles with twirling and rotating method continuously for 10 minutes. Retain needles for 35 minutes. Or embedding needle, pressing therapy and pulse current stimulation can be applied.

(2) Foot Acupuncture: Liver, Spleen, Heart etc.

Manipulation: Insert needles perpendicularly about 1 *cun* with methods of twirling & rotating and lifting & thrusting, so as to reinforcing deficiency and reducing excess. Retain needles 30 minutes.

(3) Point Injection: Selection of points is similar to that for body acupuncture, ear acupuncture.

Manipulation: It is similar to that for hemoptysis (See page 105).

IV Hematochezia

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture: *Melena*: *Yinbai* (Sp 1), *Gongsun* (Sp 4), *Zhongwan* (Ren 12), *Zusanli* (St 36) etc.

Manipulation: For *Zusanli* (St 36) and *Gongsun* (Sp 4), methods of lifting & thrusting and twirling & rotating can be applied to reinforcing deficiency and reducing excess, or with method of there is *Yin* in the *Yans* and there is *Yang* in the *Yin*. For *Zhongwan* (Ren 12), insert the needle slowly, avoid large range of lifting & thrusting and twirling & rotating; Direct moxibustion with moxa cone (3 to 5 cones) or moxibustion with moxa sticks (10 to 20 minutes) can be applied to *Yinbai* (Sp 1).

Bleeding from lower intestine tract: *Shangjuxu* (St 37), *Kongzhui* (L 6), *Chengshan* (B 57), *Changqiang* (Du 1) or *Zhibian* (B 54) etc.

Manipulation: With moderate or strong stimulation of lifting & thrusting and twirling & rotating methods to reinforcing deficiency and reducing excess.

(b) Other Therapies:

(1) Ear Acupuncture: Ear-*Shenmen*, Infratragic Apex, Diaphragm etc. For *melena*: Spleen, Liver, Kidney can be added; For bleeding from lower intestine tract: Lower Portion of Rectum, Ear Apex.

Manipulation: With moderate or strong stimulation. Retain needles 30 minutes. Pricking for bloodletting is for Ear Apex.

(2) Point Injection: It is similar to that hemoptysis (See page 105).

V Hematuria

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture: *Zhongji* (Ren 3), *Sanyinjiao* (Sp 6), *Rangu* (K 2), *Dadun* (Liv 1) etc.

Manipulation: *Sanyinjiao* (Sp 6) and *Rangu* (K 2) are with methods of lifting & thrusting and twirling & rotating to reinforcing deficiency and reducing excess; For *Zhongji* (Ren 3), given puncturing after discharge of urine, insert the needle slowly with small range of twirling & rotating and lifting & thrusting methods. Retain the needle 20 minutes. Moxibustion with moxa sticks (20 minutes) or direct moxibustion with moxa cone (3 to 5 cones) can be added to *Dadun* (Liv 1).

(b) Other Therapies:

(1) Ear Acupuncture: Kidney, Bladder, Small Intestine, Ear-*Shenmen*, Brain, Infratragic Apex.

Manipulation: With moderate or strong stimulation. Retain needles for 20 to 30 minutes. Or embedding needle, pressing therapy and pulse current stimulation can be applied.

(2) Point Injection: It is similar to that for hemoptysis (See page 105).

VI Vaginal Bleeding**(a) Acupuncture and Moxibustion Therapy:**

(1) Body Acupuncture: *Guanyuan* (Ren 4), *Sanyinjiao* (Sp 6), *Diji* (Sp 8) or tender spot at the entocnemial aspect.

Manipulation: *Sanyinjiao* (Sp 6) and *Diji* (Sp 8) are with moderate stimulation of lifting & thrusting and twirling & rotating methods to reinforcing deficiency and reducing excess: For *Guanyuan* (Ren 4), insert the needle slowly and gently and then manipulate it for 30 minutes with small range of lifting & thrusting and twirling & rotating methods, accompanied with *Quezhuofa* method.

(2) Moxibustion: For bleeding of cold and deficiency type, *Baihui* (Du 20), *Yinbai* (Sp 1), *Zusanli* (St 36) can be added with moxibustion with moxa sticks (20 minutes) or direct moxibustion with moxa cone (3 to 5 cones).

(b) Other Therapies:

(1) Ear Acupuncture: Ear-*Shenmen*, Triangular Fossa, Spleen, Liver, Kidney, Brain, Intertragus, etc.

Manipulation: With moderate stimulation of small range of twirling and rotating method. Retain needles 30 minutes. Embedding needle, pressing therapy or pulse current stimulation can be applied.

(2) Nose Acupuncture: Liver, Spleen, Kidney, Ear, Uterine etc.

Manipulation: With moderate stimulation of small range of twirling and rotating method. Manipulate needles 5 to 10 minute. Retain needles 30 minutes.

(3) Point Injection: It is similar to that for hemoptysis (See page 105).

VII Traumatic Bleeding**(a) Acupuncture and Moxibustion Therapy:**

Body Acupuncture: For bleeding above the chest: *Hegu* (LI 4),

Neiguan (P 6), *Shaoshang* (L 11), *Zhongzhu* (SI 3), *Taiyuan* (L 9); For bleeding below the chest: *Zusanli* (St 36), *Sanyinjiao* (Sp 6), *Baihui* (Du 20), *Yanglingquan* (GB 34). For both types: *Yinbai* (Sp 1) and *Dadun* (Liv 1) can be added.

For bleeding at the limbs, points at the distant end of the limbs, such as *Hegu* (LI 4), *Yangchi* (SI 4) ect. can be selected for trauma of the forearm.

Manipulation: *Hegu* (LI 4), *Neiguan* (P 6), *Zusanli* (St 36), *Sanyinjiao* (Sp 6) are the main points for treatment of bleeding diseases. Other corresponding points can be selected according to bleeding site. Manipulation is with moderate stimulation of lifting & thrusting and twirling & rotating methods, accompanied with methods of *Quezhuofa* and *Lufa*; For Profuse bleeding: *Yinbai* (Sp 1), *Dadun* (Liv 1) and *Shaoshang* (L 11) can be added with indirect moxibustion with moxa cone (3 to 5 cones); For shock due to bleeding, treatment refers to the part of shock (See page 69)

(b) Other Therapies:

(1) Ear Acupuncture: Ear-*Shenmen*, Brain, Infratragic Apex, and other corresponding spots to the bleeding site.

Manipulation: With moderate stimulation of small range of continuous twirling and rotating method. Retain needles 30 minutes. Embedding needle, pressing therapy and pulse current stimulation can be added.

(2) Nose Acupuncture: Lung, Ear Spleen, Liver, Kidney and other corresponding spots to the bleeding site.

Manipulation: It is similar to that for ear acupuncture.

(3) Point Injection: It is similar to that for hemoptysis (See page 105).

3. TREATMENT ACCORDING TO DISEASES

(a) Hemoptysis Due to Bronchiectasis: The patient is with history of chronic cough, yellow sputum with pus and blood.

Treatment is similar to that for hemoptysis (See page 105).

Point injection with Vit k 3 injection and Adrenosen injection (2 to 4 ml) can be applied to *chize* (L 5) and *Kongzui* (L 6), 0.5 to 1 ml for each point, 1 to 3 times a day.

(b) Bleeding Due to Ulcer of the Stomach and Duodenum: The

patient is with history of ulcer of the stomach and duodenum, accompanied with gastralgia and melena.

Treatment is similar to that for spitting blood and melena type of hematochezia (See page 108).

For vomiting and acid regurgitation: *Taichong* (Liv 3) and *Neiguan* (Sp 6) can be selected.

(c) Bleeding Due to Acute Infection of the Urinary System: Mostly accompanied with lumbago, frequent, emergent and painful urination, fever etc.

Treatment is similar to that for hematuria (See page 109) and mainly with *Yinlingquan* (Sp 9), *Sanyinjiao* (Sp 6) and *Zhongji* (Ren 3). For fever, *Hegu* (LI 4) and *Quchi* (LI 11) can be added; For lumbago, *Shenshu* (B 23) can be added.

(d) Lithangiuria: Hematuria is accompanied with severe colic of the lumbus and lower abdomen.

Treatment is similar to that for hematuria (See page 109) and mainly select the tender spots at the lumbus and abdomen.

For dysuria: *Yinlingquan* (Sp 9), *Sanyinjiao* (Sp 6) and *Zhaohai* (K 6) can be added with moderate or strong stimulation; For severe colic: Tender spots at the lumbus and abdomen can be selected with pulse current stimulation. Distant points is with method of *Long-hujiaozhan*. Retain needles 30 minutes and accompanied with drinking large amount of tea or water.

(e) Filariasis: Hematuria is accompanied with chyluria, pink bloody urine or cloudy urine. The patient is with history of filariasis.

Treatment is similar to that for hematuria (See page 109) and mainly select *Guanyuan* (Ren 4), *Zhongji* (Ren 3), *Yinlingquan* (Sp 9), *Sanyinjiao* (Sp 6), *Quguan* (Liv 8). Points on the abdomen can be selected with indirect moxibustion with ginger, garlic or herbs cake (30 to 7 cones); Points at the lower limbs are selected with moderate stimulation to reinforcing deficiency and reducing excess.

For fever: *Hegu* (LI 4), *Quchi* (LI 11) and *Dazhui* (Du 14) can be added; For funiculitis and orchitis: *Xingjian* (Liv 2) can be added; For severe pain of the perineum: *Huiyin* (Ren 1) and *Zhibian* (B 54) can be added.

(f) Functional Vaginal Bleeding: Profuse vaginal bleeding at the puberty and preclimacterium, lasting a long time. No positive signs

can be found by examination of vagina.

Treatment is similar to that for vaginal bleeding (See page 110).

Point injection with Diethylstilbestrol injection or Testosterone propionate injection can be applied to *Sanyinjiao* (Sp 6) and *Di ji* (Sp 8). 0.5 ml for each point, 1 to times a day.

(g) Threatened Abortion: Menolipsis is accompanied with morning sickness, small amount of vaginal bleeding.

Selecting *Zusanli* (St 36) and *Sanyinjiao* (Sp 6) with light, gentle stimulation of small range of lifting & thrusting and twirling & rotating method. Or moxibustion with moxa sticks for 20 minutes.

If it has progressed to incomplete abortion, septic abortion and dead fetus, *Hegu* (LI 4), *Sanyinjiao* (Sp 6), *Taichong* (Liv 3) and *Guanyuan* (Ren 4) can be added to the treatment of complete abortion and discharging dead fetus. Manipulation with strong stimulation of continuous twirling and rotating method or *Ziwudaojiu* method. Retain needle longer than 30 minutes.

(h) Placenta Previa and Abruptio Placentae: At the third trimester of pregnancy, vaginal bleeding without pain which refers to placenta previa; Vaginal bleeding is accompanied with severe abdominal pain, or with toxemia of pregnancy, which refers to abruptio placentae.

For small amount of bleeding: treatment is similar to that for vaginal bleeding (See page 110). For abdominal pain, treatment is similar to that for lower abdominal pain (See page 91); For profuse bleeding, cesarean section should be performed soon.

PART VII ACUTE PARALYSIS

Acute paralysis refers to sudden loss or decline of voluntary motion of the limb, caused by acute diseases of the brain, spinal cord, peripheral nerve, muscle, hysteria, and trauma. It can be divided into functional and organic paralysis.

TCM theory thinks it is in the range of "Flaccidity Syndrome" "Wind Stroke", "Paraplegia" and "Distortion of the Face", caused by the attack of the meridians and collaterals by wind pathogen, lung heat leading to consumption of lung Yin, retention of damp heat,

deficiency of the spleen and stomach, liver wind stirring inside the body and trauma which result in stagnation of *Qi* and blood, obstruction of the meridians and collaterals.

Acupuncture has good effect on paralysis, and it is also the main therapy for acute paralysis. Earlier apply, better effect.

1. MAIN POINT OF DIFFERENTIAL DIAGNOSIS

(a) Place of Paralysis and Disease: Different diseases lead to different kind of paralysis. For example: Infantile paralysis leads to monoplegia. Cerebrovascular accident (cerebral hemorrhage and cerebral thrombosis) leads to hemiplegia. Acute infectious polyneuritis (Guillain-Barre's syndrome) leads to periodic paralysis. Trauma mostly leads to paraplegia.

(b) Slow or Acute Onset of Paralysis and Symptoms: Abrupt onset of the disease after exertion, overwork or excessive drinking, severe pathological condition, sudden coma, and hemiplegia, refers to cerebral hemorrhage. Slow onset of the disease which becomes progressively severe. Patient may have a history of sudden onset of numbness of limbs for a while before the onset of the disease refers to insufficient blood supply. The onset of the disease when patient is sleeping, or at a calm situation, slow onset of unconsciousness and hemiplegia, refers to cerebral thrombosis. All these are in the range of "Apoplexy" of TCM.

Monoplegia, hemiplegia or paraplegia, accompanied by fever, chills headache, cough or even coma, convulsion, refers to infantile paralysis, acute myelitis and acute infectious polyneuritis. These diseases are in the range of "Flaccidity Syndrome" of TCM.

(c) Symptoms and Prognosis: Nature of disease, place of damage, therapeutic effect and prognosis can be made out by differentiating the symptoms of paralysis.

For paralysis with hypertonus of the muscle, hyperreflex of the tendon, positive pathological reflex, no remarkable muscle atrophy, and spastic paralysis, refers to the central paralysis. Therapeutic effect is poor.

For paralysis with hypotonus of the muscle, hyporeflex of the tendon or even loss of tendon reflex, no pathological reflex, remarkable

muscle atrophy and flaccid paralysis. Refers to the peripheral paralysis. Therapeutic effect is good.

(d) Discrimination for the Cause of the Acute Paralysis (See table 9)

2. TREATMENT

I Acupuncture and Moxibustion Therapy

Body Acupuncture: Upper limbs: *Jianzhen* (SI 9), *Jianyu* (LI 15), *Quchi* (LI 11), *Hegu* (LI 4) and *Huatuojiayi* of (C5 to T1), (Extra 15): Lower limbs: *Huantiao* (GB 30), *Zhibian* (B 54), *Zusanli* (St 36), *Yanglingquan* (GB 34), *Tiaokou* (St 38), *Xuanzhong* (GB 39) and *Huatuojiayi* of T7 to L5 (Extra 15). Facial paralysis: *Dicang* (St 4), *Jiache* (St 6), *Yangbai* (GB 14), *Hegu* (LI 4).

Manipulation: Deep insertion and penetrating point needling can be applied to points of the limbs. Penetrating *Dicang* (St 4) to *Jiache* (St 6), from *Yangbai* (GB 14) to *Yuyao* (Extra 5). Manipulation with moderate or strong stimulation of twirling & rotating and lifting & thrusting methods, accompanied with methods of *Lufa* and *Quezhuofa*: For *Huatuojiayi*, the needle tip should point to the spine and needling reaction should radiate to four limbs: Pulse current stimulation can also be applied: If the patient is with symptom of aversion to cold of the limbs and trunk, warm needle or moxibustion with moxa sticks (20 to 30 minutes) can be added.

II Other Therapies:

(a) Scalp Acupuncture: *Dingzhong xian*, *Dingnie Qianxie Xian*, *Dingnie Houxie Xian*, *Dingpang Xian* I.

Manipulation: Selecting treatment lines on the healthy side (Side of disease site) with Gause 28 filiform needle. Insert needles at the angle of 30 degree. At the same time, tell the patient to exercise one's limbs actively or passively.

(b) Point Injection: Selection of points is similar to that for body acupuncture.

Manipulation: Injections with functions of activating muscle and activating blood circulation to dissipate blood stasis, such as Galanthamine hydrobromide, *Dangui* injection (常歸注射液) or Profound

Table 9 DISCRIMINATION FOR THE CAUSE OF THE ACUTE PARALYSIS

Disease	Etiology	Place of Paralysis	Degree of Paralysis	Accompanied Symptoms	Commonly Seen Diseases	Principles for Treatment
Flaccid Syndrome	Hyperactivity of heat pathogen at the stomach and lung	hemiplegia, paraplegia, or panplegia	flaccid paralysis	the early stage is with fever or not, cough thirst, yellow urine, red tongue or pale tongue, yellow fur or sticky fur, big and rapid pulse or soft and rapid pulse	infantile paralysis, acute myelitis, hysterical paralysis, peripheral paralysis	nourishing Yin to clear away heat, nourishing Qi and promoting meridians passage.
	Blood stasise due to trauma	paraplegia or panplegia	spastic paralysis or flaccid paralysis	onset of paralysis is after the trauma, accompanied with incontinence of urine and stool	trauma of spinal cord, spine fracture	promoting blood circulation to dissipate blood stasis, invigorate the kidney to strengthen the tendon.
Apoplexy	Internal attack of wind and Yangs pathogen	hemiplegia	spastic hemiplegia	coma dizziness, slurred speech, constipation, wiry and smooth pulse, stickily fur	cerebrovascular accidents, encephalitis	calming the liver to suppressing yang, dredging meridians passage
Bi-Syndrome	Blocking of the meridians and collaterals by pathogen	paralysis mainly at the end of four limbs (below the elbow and knee)	flaccid paralysis	the early stage is with fever, pain of the limbs and trunk; numbness	acute infectious polyneuritis, peripheral neuritis	clearing away heat-pathogen, promoting meridians, invigorating the spleen

Dansheng injection (搜风丹注射液), can be used. 0.5 to 2 ml for each point, daily treatment or treatment every two days.

(c) **Digital Depression Therapy:** *Quchi* (LI 11), *Hegu* (LI 4), *Huantiao* (GB 30), *Yanglingquan* (GB 34), *Zusanti* (St 36), *Taichong* (Liv 3), *Chengshan* (B 57), *Kunlun* (B 60) and corresponding *Huatuojiayi* (Extra 15).

Manipulation: selecting points on the disease side. Press points with moderate manipulation, accompanied with acupuncture.

3. TREATMENT ACCORDING TO DISEASES

(a) **Facial Paralysis:** Dropping of the angle of the mouth, incomplete closure of the eye and inability to frown refers to peripheral facial paralysis. Dropping of the angle of the month, unable to frown, accompanied with hemiplegia. Refers to central facial paralysis. Penetrating from *Dicang* (St 4) to *Jiache* (St 6), from *Yangbai* (GB 14) to *Yuyao* (Extra 5), *Xiaguan* (St 7), *Yifeng* (SJ 17), *Hegu* (LI 4). For epiphora, *Jingmi* (B 1) can be added.

For scalp acupuncture, lower 2/5 of *Dingnie Qianxie Xian*, *Nie-gian Xian* etc. can be selected.

(b) **Paralysis Due to Apoplexy:** The patient is with history of hypertension, often accompanied with mental disorder. Main treatment is early application of scalp acupuncture, accompanied by exercise of the limbs and trunk.

Selection of *Jianyu* (LI 15) (penetrating to *Binao* (LI 14), *Quchi* (LI 11), *Hegu* (LI 4), *Huantiao* (GB 30), *Yanglingquan* (GB 34), *Zusanli* (St 36), *Taichong* (Liv 3) etc. For coma: *Renzhong* (Du 26) and *Shixuan* (Extra 24) can be added. For headache: *Baihui* (Du 20) and *Taiyang* (Extra 1) can be added. For slurred speech: *Jinjin* (Extra 9) and *Yuye* (Extra 9), *Daling* (P 7) or *Lianquan* (Ren 23), *Yongquan* (K 1) can be added.

For scalp acupuncture, *Dingzhong Xian*, *Dingnie Qianxie Xian* (health side) can be selected.

(c) **Infantile Paralysis:** The infantile and child is with history of acute infection of epirespiratory tract several days before onset of hemiplegia or panplegia.

Treatment refers that for paralysis due to apoplexy and mainly

selecting local points.

(d) Traumatic Paraplegia: The patient is with history of trauma, may be accompanied with incontinence of urine and stool, high level of trauma, prognosis is poor.

Mainly selecting *Du* channel and *Huatuojiaji* (close trauma area), accompanied with points on four limbs and *Zhibian* (B 54) and *Guanyuan* (Ren 4). For dyspnea, *Tiantu* (Ren 22) and *Tanzhong* (Ren 17) can be added. Manipulation is with Gauge 26 or 28 filiform needle and penetrating point needling, strong stimulation, the stronger, the needling reaction, the better, the effect. For points on the chest and abdomen, avoid deep insertion, so as to avoid acupuncture accident.

(e) Acute, Infectious Polyneuritis: Abrupt onset of disease, numbness of the lower limbs and hypomyodynamia. 1 or 2 days later, paralysis of four limbs, on even dyspnea, dysphagia can be developed. The disease is involved both sides. Secondary myalgia may be seen.

Treatment is similar to that for paralysis due to apoplexy. For dyspnea and dysphagia: *Tiantu* (Ren 22), *Suliao* (Du 25) and *Tanzhong* (Ren 17) can be added; For palpitation: *Ximen* (P 4) and *Shenmen* (H 7) can be added.

(f) Hysterical Paralysis: Acute onset of paralysis, often induced by strong mental irritation, accompanied with palpitation, dizziness or mental symptoms. No positive signs on body examination.

Selecting *Jianshi* (P 5), *Sanyinjiao* (Sp 6), *Zusanli* (St 36), *Yanglingquan* (GB 34) with moderate stimulation. At the same time, psychotherapy and suggestion therapy should be applied.

(g) Periodic Paralysis: Sudden onset of paraplegia of the lower limbs or paralysis of four limbs while awake, the patient has history of this disease. No disturbance of pain sensation. The patient may recover spontaneously several hours or several days later.

Selecting *Hegu* (LI 4), *Quchi* (LI 11), *Yanglingquan* (GB 34), *Shousanli* (LI 10), *Zusanli* (St 36) with moderate or strong stimulation of twirling & rotating and lifting & thrusting methods. Retain needles 30 minutes.

PART VIII JAUNDICE

Jaundice is mainly manifested as yellow appearance of the skin, sclerae and urine. Yellow sclerae is the main characteristic.

Jaundice is commonly seen in the diseases of the digestive system, can be divided into obstructive jaundice, hemolytic jaundice and hepato cellular jaundice, which are mainly seen in acute jaundice hepatitis, acute cholecystitis, acute cholelithiasis, acute pancreatitis and fabism.

TCM thinks jaundice is due to attack of damp-heat pathogens or irregular food intake, and mainly involves the liver, gallbladder, spleen and stomach, can be divided into *Yang* type of jaundice or *Yin* type of jaundice. Acute jaundice mostly belongs to *Yang* type of jaundice and in the range of excess and heat syndromes.

Retention of damp-heat or damp-cold in the middle *jiao*, and dysfunction of the liver in promoting the free flow of *Qi* which force bile out of its normal circulation tract. Out flowing of bile to the skin results in yellow skin. Upper flowing of bile to the sclerae results in yellow sclerae. Down flowing of bile to the urethra results in yellow urine. Main principle of treatment is diuresis to eliminate damp-heat pathogens.

Acupuncture has function of promoting diuresis to eliminate damp pathogen and jaundice, anti-inflammation and killing pain. So it has good effect on treatment of jaundice, particularly on acute jaundice.

1. MAIN POINT OF DIFFERENTIAL DIAGNOSIS

(a) Colour of Jaundice: Bright lemon colour refers to hemolytic jaundice. Golden colour refers to jaundice of hepatitis and cholepathy. Deep yellow with green colour refers to obstructive jaundice.

(b) Associated Symptoms: Anemia is often accompanied with hemolytic jaundice. Fever and severe abdominal pain is commonly seen in cholepathy and acute hepatonecrosis. No abdominal pain only mild dull pain is often accompanied with acute hepatitis.

Table 10 DISCRIMINATION OF JAUNDICE

Classification	Main Symptom	Commonly Seen Diseases	Principles for Treatment	Acupuncture & Moxibustion
Yang Type of Jaundice	abrupt onset of lustrous yellow of the skin and sclera, fever, thirst, nausea, vomiting, deep yellow urine, fullness of the abdomen, or even high fever restlessness, coma, delirium, yellow greasy fur, wiry and rapid pulse.	acute jaundice hepatitis, cholelithiasis, hemolytic jaundice, obstructive	clearing away heat pathogen and promoting diuresis	mainly with acupuncture
Yin Type of Jaundice	lustrousless yellow, poor appetite, stuffiness feeling over the epigastrium, fatigue, aversion to cold, loss stool, pale tongue, greasy or thin fur, soft and floating pulse or wiry and unsmooth pulse.	chronic hepatitis, later stage of hepatocirrhosis, liver cancer.	warming Yang to promote diuresis	acupuncture and moxibustion

(c) Discrimination Table for Yang Type of Jaundice and Yin Type of Jaundice (see Table 10)

2. TREATMENT

I Acupuncture and Moxibustion Therapy

Body Acupuncture: *Zhiyang* (Du 9), *Danshu* (B 19), *Yanglingquan* (GB 34), *Taichong* (Liv 3), *Neiting* (St 44), *Zusanli* (St 36) etc.

Manipulation: Mainly with moderate or strong stimulation of reducing method. First select *Zhiyang* (Du 9) and *Danshu* (B 19) and needling reaction should spread to the abdomen or the spinal cord. Then selecting *Yanglingquan* (GB 34), penetrating to *Yinlingquan* (Sp 9) with method of penetrating heaven coolness and needling reaction should spread downwardly; *Zusanli* (St 36) is with even manipulation (method of conducting Qi); *Taichong* (Liv 3) and *Neiting* (St 44) should be with methods of *Choutifa* and *Lufa*, or with methods of twirling & rotating and lifting & thrusting, so as to spread needling reaction. Retain needles 30 to 60 minutes. *Dazhui* (Du 14) and *Quchi* (LI 11) for are added fever; *Dannangxue* (Extra 39), *Qimen* (Liv 14), *Shangwan* (Ren 13) for are added hypochondriac pain;

Geshu (B 17), *Gao Huang* (B 43) and *Sanyinjiao* (Sp 6) for anemia; Pulse current stimulation (sparse and dense wave) can be added.

II Other Therapies

(a) **Ear Acupuncture:** Liver, Gallbladder, Spleen, Stomach, End or Inferior Antihelix Crus. Diaphragm, Ear-*Shenmen* etc.

Manipulation: Moderate or strong stimulation with 0.5 *cun* filiform needle, continuous twirling and rotating needles for 5 to 10 minutes. Retain needles 30 to 60 minutes. Embedding needle, pressing therapy and pulse current stimulation can be added.

(b) **Point Injection:** Selection of points is similar to that for body acupuncture and ear acupuncture.

Manipulation: Vit B, *Banlangen* injection (板蓝根注射液), 0.5-1% Procaine injection, *Daqingye* injection (大青叶注射液), Penicillin injection, etc. can be used. 0.2 to 1 ml for each point, 1 to 2 times a day.

(c) **Foot Acupuncture:** It is applied for Yang-type jaundice with severe abdominal pain. Select *Neitaichong*, Stomach, Gallbladder, *Lineiting*.

Manipulation: Gauge 26 or 28 filiform needle is used with continuous twirling and rotating needles for 10 minutes or with method of penetrating heaven coolness. Retain needles 30 minutes.

3. TREATMENT ACCORDING TO DISEASES

(a) **Jaundice Due to Acute Infection of Biliary Tract.** Fever, jaundice, accompanied with paroxysmal severe abdominal pain which radiates to the right shoulder and back.

Selecting *Yanglingquan* (GB 34), *Dannangxue* (Extra 39), *Taichong* (Liv 3), *Heug* (LI 4), *Zhiyang* (Du 9) etc. with strong stimulation of reducing method. Retain needles longer than 1 hour.

(b) **Acute Jaundice Hepatitis:** Acute onset of jaundice, accompanied with aversion to greasy food, fatigue, fever, hepatomegaly and dull pain.

Selecting *Zhiyang* (Du 9), *Xingjian* (Liv 2), *Zusanli* (St 36), *Yinlingquan* (Sp 9), *Sanyinjiao* (Sp 6) etc. with moderate or strong stimulation of reducing methods of twirling & rotating and lifting & thrusting. Retain needles longer than 30 minutes.

(c) **Fabism:** Acute hemolytic jaundice and accompanied with severe anemia, caused by eating fresh broad bean.

Selecting *Zusanli* (St 36), *Yinlingquan* (Sp 9), *Sanyinjiao* (Sp 6), *Zhiyang* (Du 9), *Hegu* (LI 4), *Taichong* (Liv 3) etc. with moderate stimulation of reducing methods of twirling & rotating and lifting & thrusting, or with method of penetrating heaven coolness. Retain needles 30 minutes. For severe anemia, *Ganshu* (B 18), *Geshu* (B 7), *Xuehai* (Sp 10) can be added.

PART IX ACUTE POISONING AND ELECTRIC SHOCK

Acute poisoning is one of the common acute disease in clinic, and pathological condition is severe. The disease is mainly manifested as coma, convulsion, paralysis, dyspnea, arrhythmia, vomiting, abdominal pain, diarrhea, salivation, dilated pupil or contracted pupil, flushed skin, hemoglobinuria, mental disorder. This disease is commonly related to the heart, liver and kidney, and involves the digestive system, respiratory system, nervous system and circulatory system. Poisoning is caused by contacting poisons, eating poisonous food or intake over dosage of drug.

Electric shock is the trauma due of electricity, caused by contacting electricity or stricken by thunderstorm.

Acupuncture only has some effect of relieving symptoms on poisoning, comprehensive therapy should be applied to rescue the patient. Acupuncture has good effect on syncope, shock, inhibition of respiration and heart beat due to electric shock. But other corresponding therapy should be added too.

1. MAIN POINT OF DIFFERENTIAL DIAGNOSIS

1. Food-intoxication

- (1) History of eating poisonous food.
- (2) Gastrointestinal symptoms such as: nausea, vomiting, abdominal pain and diarrhea.
- (3) Anhydant symptoms: In severe cases, symptoms of collapse, shock or syncope such as: dry lips, deep socked of eyeball, poor

dermal elasticity, lower blood pressure may be seen.

(4) Symptoms of the nervous system, such as: dizziness, blurring of vision, allation convulsion, change of pupils, or even the patient may die of the respiratory paralysis.

2. Poisoning Due to Drug

- (1) History of intake drug on hypersensitivity to drug.
- (2) There are many kinds of poisons, such as: acute poisoning due to poisonous plant, acute poisoning due to drug or medicinal plant, acute poisoning due to chemical poisons. Their clinical manifestations are different. Generally, symptoms of the circulatory system, nervous system and digestive system or skin rash can be seen.

3. Carbon Monoxide Poisoning

- (1) History of contacting coal gas.
- (2) Symptoms of severe headache, distention of the head, tinnitus, dizziness, blurring of vision, palpitation, weakness of the limbs, nausea, vomiting can be seen. In severe cases, collapse, syncope and convulsion can be seen.
- (3) Cherry-like colour of the lips, mucous membranes and nails, or dilated pupil. the patient may die of the respiratory paralysis.

4. Electric Shock

- (1) History of electric shock or contacting electric appliance.
- (2) Different degree of burning wound can be seen at the place of electric shock. The wound is painless.
- (3) Green and purple complexion or pallor, disappearance of cardiac sound, feeble pulse or even no pulse can be felt, syncopes or no respiration, convulsion of the muscle or rigidity of the body. After recovery, the patient may still suffer pain of the muscle and headache.

2. TREATMENT

1. Food-Intoxication or Poisoning Due to Drug

Acupuncture and Moxibustion Therapy:

- (1) Body Acupuncture: *Neiguan* (P 6), *Zusanli* (St 36), *Zhongwan* (Ren 12), *Tianshu* (St 25), *Liangqiu* (St 34), etc.

Manipulation: Firstly selecting *Neiguan* (P 6), *Zusanli* (St 36) and *Liangqiu* (St 34) with moderate or strong manipulation of reinforcing

or reducing methods of lifting & thrusting and twirling & rotating (reinforcing deficiency syndrome and reducing excess syndrome), or with methods of *Longhujiaozhan* and there is *Yang* in the *Yin*. The needling reaction should spread and conduct; Then selecting *Zhongwan* (Ren 12) and *Tianshu* (St 25) with even reinforcing and reducing method of twirling & rotating, or accompanied with lifting & thrusting method. The needling reaction should spread.

(2) Moxibustion: It is for collapse syndrome. Selection of *Baihui* (Du 20), *Neiguan* (P 6), *Shenque* (Ren 8), *Guanyuan* (Ren 4) etc.

Manipulation: *Baihui* (Du 20) and *Neiguan* (P 6) are with moxibustion with moxa sticks; *Shenque* (Ren 8) is with indirect moxibustion with salt; *Guanyuan* (Ren 4) is with indirect moxibustion with singer. Keep moxibustion until the patient's limbs become warm, sweating stops, consciousness regained, pulse has resumed. For symptoms of the circulatory system: *Neiguan* (P 6), *Shenmen* (H 7), *Xinshu* (B 15) and *Dushu* (B 16) can be added; For skin rash: *Xuehai* (Sp 10), *Quchi* (LI 11), *Yinlingquan* (Sp 9) and *Sanyinjiao* (Sp 6) can be added with moderate stimulation.

II Electric Shock or Carbon Monoxide Poisoning

First switch off the electricity and remove the patient from on-the-spot.

(a) Acupuncture and Moxibustion Therapy:

(1) Body Acupuncture: *suliao* (Du 25), *Shaoshang* (L 11), *Hegu* (LI 4), *Zusanli* (St 36) etc.

Manipulation: *Hegu* (LI 4), *Zusanli* (St 35) and *Suliao* (Du 25) are with strong stimulation of reducing method of twirling and rotating, in combination with methods of *Lufa* and *Quezhuofa*; Pricking for bloodletting is for *Shaoshang* (L 11). For headache: *Baihui* (Du 20), *Taiyang* (Extra 1) and *Yintang* (Extra 2) can be added; For palpitation: *Neiguan* (P 6), *Ximen* (P 4) or *Daling* (P 7) can be added; For dyspnea: *Huiyin* (Ren 1), *Yongquan* (K 1) and *Suliao* (Du 25) can be added; For fever: *Quchi* (LI 11), *Weizhong* (B 40), *Quze* (P 3) can be added; For coma and collapse: Treatment refer to the corresponding parts (See page 60).

(b) Other Therapies:

(1) Ear Acupuncture: Heart, Lung, End of Inferior Antihelix Crus,

Brain, Intratragic Apex.

Manipulation: With strong stimulation. continuously twirling and rotating needles for 10 to 30 minutes.

(2) Nose Acupuncture: Lung, Kidney, Liver, Stomach etc.

Manipulation: Penetrating needling from upper to down with strong stimulation. Continuously twirling and rotating needles for 10 to 30 minutes.

(3) Foot Acupuncture: It is for severe poisoning. Selection of Kidney, Pericardium, Lung, Heart etc.

Manipulation: With strong stimulation, Continuously twirling and rotating needles for 10 to 30 minutes.

(4) Point Injection: Selection of points is similar to that for body acupuncture, ear acupuncture, nose acupuncture and foot acupuncture.

Caffeine injection (0.125g/ml) can be used for point injection 0.2 to 1 ml for each point. For severe dyspnea, electric needle (intermittent wave) can be used with anode to *Neiguan* (P 6) and cathode to *Tiantu* (Ren 22), so as to stimulate the phrenic nerve and resume breathing.

PART X CONVULSION

It is a disorder marked by paroxysm of involuntary muscular contractions, accompanied with or by loss of consciousness, caused by the disease of central nervous system, such as: epidemic meningitis, epidemic encephalitis B, or secondary encephalitis, meningitis succeed to many kinds of epidemic diseases, encephaloncoma, cerebratrauma, tetanus, epilepsy, hysteria and disturbance of metabolism. It can be divided into fever type of convulsion with syncope and no-fever type of convulsion with syncope. The fever type is commonly seen in all kinds of severe infections. The no-fever type is seen in epilepsy, hypertensive cerebrosis, tetanus and hysteria. This disease is in the range of "*Jing-Syndrome*", "*Jue-Syndrome*", "*Epilepsy*", "*Convulsion*" and "*Hysteria*" of TCM, caused by stagnation of the wind, cold and wetness pathogens in the channels leading to disorder of *Qi* and blood; or stagnation of phlegm damp pathogen

in the channels; of deficiency of *Qi* and blood resulting in malnutrition of the muscle and tendon. The disease mainly involves the channels of heart, liver, spleen and kidney.

1. MAIN POINT OF DIFFERENTIAL DIAGNOSIS.

(a) **Main Symptoms:** Sudden onset of muscular spasm, tetanus, upward staring of eyes or strabismus, spasm of the angle of the mouth, lock-jaw, or even loss of consciousness and incontinence of urine and stool.

(b) **Accompanying Symptoms and History:** Sudden onset of convulsion after trauma, accompanied with opisthotonos, lock-jaw, spasm of the facial muscles, refers to tetanus; sudden onset of unconsciousness, convulsion of limbs, upward staring of eyes, foam on the lips, screaming as pig or sheep, the patient has history of similar onset, refers to epilepsy; High fever, headache, vomiting or coma suggests encephalitis. The patient is with nephritis or late stage of pregnancy with edema suggests hypersensitive encephalopathy or eclampsia. The patient is with history of operation on thyroid, suggests athetoid syndrome; Infantile or child is with convulsion, accompanied with high fever, diarrhea and emaciation, suggests acute infantile convulsion; convulsion, caused by mental irritation and has history of similar onset, refers to hysterical onset.

(c) **Discrimination for Convulsion Syndrome** (See Table 11)

2. TREATMENT

(a) Acupuncture and Moxibustion Therapy:

(1) Body Acupuncture: *Dazhui* (Du 14), Penetrating from *Houxi* (SI 3) to *Hegu* (LI 4), *Renzhong* (DU 26), *Taichong* (Liv 3), *Yanglingquan* (GB 34) etc.

Manipulation: With strong stimulation. First select *Renzhong* (Du 26), Penetrating from *Houxi* (SI 3) to *Hegu* (LI 4) from *Taichong* (Liv 3) to *Yongquan* (K 1). Insert the needle perpendicularly or to the upper direction obliquely with continuous twirling and rotating method can be applied to *Renzhong* (Du 26), so as to maintain the needling reaction; penetrating from *Houxi* (SI 3) to *Hegu* (LI 4), from

Table 11 DISCRIMINATION FOR CONVULSION SYNDROME

Syndrome	Symptoms	Commonly Seen Diseases	Principles for Treatment	Acupuncture and Moxibustion
Hyperactivity of heat pathogen and accumulation of phlegm	fever, flushed face, headache, blurring of vision, rattling in the throat, convulsion of four limbs, red tongue, yellow fur, wiry, smooth and rapid pulse.	infantile convulsion or infectious diseases	clearing away heat-pathogen and dissipating phlegm.	Acupuncture
Attack of pathogenic exogenous wind.	chills, fever, lock-jaw, opisthotonos, stiffness of four limbs, convulsion, red tongue, white or yellow fur, wiry and rapid pulse.	tetanus or diseases of central nervous system	dispelling wind and damp damp pathogen regulating <i>ying-fen</i> and drying the damp pathogen	Acupuncture
Wind due to deficiency of the spleen	weakness of four extremities, convulsion, dark and yellow complexion, emaciation, diarrhea white fur or no fur, feeble and weak pulse.	chronic infantile convulsion, or diseases	nourishing blood and <i>Qi</i> Consumptive	mainly with moxibustion, accompanied with acupuncture
Wind due to <i>Yin</i> deficiency	fever, flushed face, irritability, unconsciousness, delirium, convulsion, red and purplish tongue, no fur thin, wiry and rapid pulse.	eclampsia, hypertensive encephalopathy or infectious diseases.	nourishing <i>Yin</i> to clear away heat	acupuncture

Taichong (Liv 3) to *Yongquan* (K 1), *Yanglingquan* (GB 34), with reducing method of twirling and rotating or method of penetrating heaven coolness can be applied. The needling reaction should be spread and conducted; Then selecting *Dazhui* (Du 14) with methods of twirling & rotating and lifting & thrusting, avoid deep insertion. Depth of insertion is about 0.8 to 1 *cun*. Retain needles longer than 30 minutes.

(2) Moxibustion: It is for convulsion due to deficiency of the spleen. Selection of *Baihui* (Du 20), *Guanyuen* (Ren 4), *Shenshu* (B 23), *Susanli* (St 36), *Yongquan* (K 1) etc.

Manipulation: Indirect moxibustion with monkshood cake or with

singer can be applied to *Guanyuan* (Ren 4) and *Shenshu* (B 23) until the patient regains one's consciousness and convulsion stops. Moxibustion with moxa sticks (10 to 20 minutes) can be applied to *Baihui* (Du 20), *Zusanli* (St 36) and *Yongquan* (K 1).

(b) Other Therapies:

(1) Ear Acupuncture: Liver, Kidney, Heart, Ear-*shenmen*, Brain etc.

Manipulation: Depth of insertion is about 0.5 *cun*. Manipulating needles with strong stimulation of continuous twirling and rotating method until red and distention of the ear are achieved. Pulse current stimulation (Sparse and dense wave) can be added.

(2) Foot Acupuncture: *Lineiting*, Liver Kidney, Heart etc.

Manipulation: Insert needles (Gauge 26 or 28) swiftly about 0.5 to 0.8 *cun* depth. Manipulating needles with strong stimulation of continuous twirling and rotating method. Retain needles about 30 minutes.

(3) Point Injection: Selection of points is similar to that for body acupuncture, ear acupuncture and foot acupuncture.

Manipulation: 0.1-1% Procaine injection, 0.19 Phenobarbital, *Dilong* injection (地龍注射液) or *Dangui* injection (當歸注射液) can be chosen. 0.2 to 1 ml for each point. 2 to 4 points for one treatment, 1 to 2 times a day.

(4) Scalp Acupuncture: *Dingzhong Xian*, *Ezhong Xian*, *Zhen-shang Zhengzhong Xian*, *Dingpang Xian* etc.

Manipulation: Insert needles from front to back with 3 needles for each line, continuously twirling and rotating needles for 10 to 20 minutes. Retain needles 1 to 2 hours.

(5) Digital Depression Therapy: *Renzhong* (Du 26), *Hegu* (LI 4), *Yongquan* (K 1), *Kunlun* (B 60) and place on the dorsum of the hand, at both sides of the third metacarpal bone, 0.5 *cun* from the metacarpophalangeal joint.

Manipulation: With moderate or strong stimulation. Repeat several times.

3. TREATMENT ACCORDING TO DISEASES

(a) Acute Infantile Convulsion: The patient is younger than 3 years old, sudden onset of convulsion, accompanied with high fever, irritability, vomiting, asthma cough, and coma.

Penetrating from *Hegu* (LI 4) to *Houxi* (SI 3), from *Taichong* (Liv 3) to *Yongquan* (K 1) with strong stimulation of continuous twirling & rotating and lifting & thrusting methods. For high fever: *Quchi* (LI 11), *Zhongchong* (P 9) and *shixuan* (Extra 24) with pricking for bloodletting can be added; For accumulation of phlegm: *Fenglong* (St 40), *Chize* (L 5) can be added. For Lock-jaw: *Jiache* (St 6) and *Xiaguan* (St 7) can be added. *Neiguan* (P 6), *Sifeng* (Extra 25) with pricking for yellow liquid can be added to vomiting. For coma: *Renzhong* (Du 26) and *Shixuan* (Extra 24) can be added.

(b) Eclampsia: Pregnant women at the late stage of pregnancy with hypertension, edema, proteinuria, and then dizziness and distention and headaches, blurring of vision, stuffiness of the chest, and nausea, is preeclampsia. In severe cases, proxysmal convulsion, coma can be seen.

Penetrating from *Hegu* (LI 4) to *Houxi* (SI 3), from *Taichong* (Liv 3) to *Yongquan* (K 1) with strong stimulation of reducing methods of twirling & rotating and lifting & thrusting. *Quchi* (LI 11) for hypertension. *Yinlingquan* (Sp 9) and *Sanyinjiao* (Sp 6) for edema. For proteinuria: *Guanyuan* (Ren 4), *Zusanli* (St 36), *Shenshu* (B 23) and *Zhaohai* (K 6) are with moxibustion with moxa sticks (10 to 20 minutes). *Yintang* (Extra 2), *Taiyang* (Extra 1) and *Baihui* (Du 20) for dizziness and headache. *Neiguan* (P 6) for stuffiness of the chest and nausea; *Renzhong* (Du 26) and *Shixuan* (Extra 24) for coma. Pregnant women should sleep in left lateral recumbent in order to relieve symptoms.

(c) Epilepsy: Sudden onset of unconsciousness and falling down, convulsion of the four limbs, foam on the lips, screaming as pigs and sheep. The patient has history of similar onset.

Selection of *Renzhong* (Du 26), penetrating from *Houxi* (SI 3) to *Hegu* (LI 4), from *Taichong* (Liv 3) to *Yongquan* (K 1). For night time onset of the disease; *Zhaohai* (K 6) can be added; For day-time onset of the disease: *Shenmai* (B 62) can be added.

(d) Tetanus: The patient has history of injury, sudden onset of tetanus, opisthotonos, spasm of the facial muscle, lock-jaw, accom-

panied with fever and headache.

(1) Penetrating from *houxi* (SI 3) to *Hegu* (LI 4) from *Taichong* (Liv 3) to *Yongquan* (K 1), *Dazhui* (Du 14) with moderate or strong stimulation of reducing methods of continuous twirling & rotating and lifting & thrusting; *Quchi* (LI 11) can be added for fever; For lock-jaw: *Xiaguan* (St 7) and *Jiache* (St 6) can be added.

(2) Point injection with *Kangpuo* injection No1 (抗破一號注射液) can be applied to *Hegu* (LI 4), *Quchi* (LI 11) and *Taichong* (Liv 3), 0.5 to 1 ml for each point 1 to 2 times a day.

(e) **Athetoid Syndrome:** Athetoid syndrome can be caused by hypoparathyroidism, thyroidectomy or low serum calcium of infants and children.

Selection of penetrating from *Houxi* (SI 3) to *Hegu* (LI 4), from *Taichong* (Liv 3) to *Yongquan* (K 1), *Zusani* (St 36), *Yanglingquan* (GB 34). Manipulating needles with moderate or strong stimulation of continuous twirling and rotating method or *Longhujiaozhan* method, accompanied with *Lufa* method. Retain needles for 30 minutes after convulsion stops.

PART XI ABNORMAL URINE AND STOOL

Abnormal urine and stool includes acute diarrhea, constipation, acute retention of urine, incontinence of urine etc, caused by acute infection, irregular food intake, trauma and diseases of some internal organs.

1. ABNORMAL STOOL

Abnormal stool includes diarrhea, and constipation. Acute constipation is mostly caused by acute intestinal obstruction and manifested as pain, distention, constipation, and vomiting. Treatment for acute constipation refers to the part of acute painful disease (See page 82).

Acute diarrhea is mainly manifested as acute onset of disease, abnormal frequency and liquidity of fecal discharge, or loose stools with undigested food, or mixing of pus and blood in stool, abdomi-

nal pain; due to dysfunction of the gastroenteral tract in secretion, digestion, absorption and movement resulting in large amount of secretion, incomplete digestion or small amount of absorption, commonly seen in the diseases of acute enteritis, indigestion, cholera etc.

TCM think it belongs to *Xie Xie*, usually due to attack of cold-damp or damp-heat pathogens in the stomach and intestine, or internal damage of food, *Yang* deficiency of the spleen and kidney, leading to failure in transportation and transformation. Acupuncture has a satisfactory effect on all kind of acute diarrhea.

1 Main Points of Differential Diagnosis

(a) It is characterized by abnormal frequency and liquidity of fecal discharge, usually no tenesmus, mostly seen in summer and autumn, accompanied by fever, borborygmus, abdominal pain, nausea, vomiting etc.

(b) History of excessive eating and drinking, or improper diet.

(c) Discrimination of cold, heat, deficiency and excess for diarrhea (see Table 12).

II Treatment

(a) Acupuncture and Moxibustion Therapy:

(1) Body Acupuncture: *Tianshu* (St 25), *Shangjuxu* (St 37), *Zusanli* (St 36).

Manipulation: First, selecting *Shangjuxu* (St 37) and *Zusanli* (St 36) with strong stimulation of *Chouti* method, accompanied by method of *Lufa* and *Cuofa*. Then acupuncture *Tianshu* (St 25). After arrival of *Qi* is achieved, manipulating the needle with small range of twirling & rotating and lifting & thrusting methods. The needling reaction should spread and conduct to around. Retain needles 30 minutes. 2 to 4 treatments a day can be applied to severe diarrhea.

(2) Moxibustion: *Shenque* (Ren 8), *Tianshu* (St 25), *Guanyuan* (Ren 4), *Zusanli* (St 36) etc.

Indirect moxibustion with salt can be applied to *Shenque* (Ren 8). Indirect moxibustion with singer can be applied to other point. 5 to 7 cones for one treatment.

(b) Other Therapies:

(1) Ear Acupuncture: Stomach, Spleen, Large Intestine, End of

Table 12 DISCRIMINATION OF DIARRHEA

Nature	Etiology, Pathology	Main Symptoms	Commonly-Seen Disease
Cold syndrome	attack of exogenous cold-damp to the intestine and stomach leading to failure in separating the food essence and the waste	loose stools, or even watery stools, abdominal pain, borborygmus, accompanied by chills, fever, soreness and pain of limbs, pale tongue, white and greasy fur, slow and soft pulse.	acute enteritis, indigestion, diarrhea due to gastro-intestinal neurosis.
Heat syndrome	attack of damp-heat or summer heat pathogen to the intestine and stomach leading to abnormal transportation	diarrhea, abdominal pain, yellow hot and fetid stools, burning sensation in the anus, yellow and greasy fur, soft and rapid pulse or smooth and rapid pulse.	
Excess syndrome	retention of food due to improper diet which affects transportation and transformation	abdominal pain, borborygmus, diarrhea with fetid stools, abdominal pain, relieved after bowel movement, stools with undigested food, eructation with foul odour, acid regurgitation thick and greasy fur, smooth pulse.	
Deficiency syndrome	weakness of the spleen and stomach leading to failure in transportation and transformation	loose stools with indigested food, anorexia, epigastric distress after eating, sallow complexion, lassitude, pale tongue, white fur, thin and feeble pulse.	
	deficiency of the kidney Yang leading to failure in warming the spleen.	pain below the umbilicus, borborygmus, and diarrhea usually occurring at dawn, relieved after bowel movement, soreness and weakness of the lumbus and knees, cold lower extremities, pale tongue, white fur, deep and thin pulse.	

Inferior Helix Crus, *Sanjiao*, Kidney, Ear-*Shenmen* etc.

Manipulation: With strong manipulation of continuous twirling and rotating method. Manipulating needles for 5 to 10 minutes. Retain needles 30 to 60 minutes. Embedding needles and pressing therapy can be applied.

(2) Point Injection; Selection of points is similar to that for body acupuncture and ear acupuncture.

Manipulation: 2% *Huangliansu* injection (黄连素注射液), Normal saline or 5% Glucose injection can be used. 0.2 to 1 ml for each point. 2 to 3 points for one treatment, 1 to 2 times a day.

(3) Scalp Acupuncture: *Epany Xian* II, *Dingzhong Xian* etc.

Manipulation: Inserting needles from upper to the forehead with relay acupuncture of three needles is for *Epany Xian* II; inserting needles from front to back with relay acupuncture of three needles is for *Dingzhong Xian*. Retain needles for 1 to 2 hours, manipulating needles at intervals. At the same time, tell the patient to do abdominal breathing.

III Treatment According to Disease

(a) **Acute Gastroenteritis:** Abdominal pain, diarrhea, yellow watery stool, accompanied by fever, vomiting, or even dehydration. The patient has history of improper diet, intake of contaminated food.

Zhongwan (Ren 12), *Gongsun* (Sp 4) can be added for abdominal pain; *Quchi* (LI 11), *Hegu* (LI 4) can be added for fever; *Neiguan* (P 6) can be added for vomiting.

(b) **Bacillary Dysentery:** Diarrhea with bloody, pus and mucous stool, tenesmus, accompanied with chills, fever, abdominal pain, vomiting. In severe cases, toxic symptoms, such as high fever, coma, shock can be seen.

2 to 4 treatments a day, continue for 5 to 7 days. *Hegu* (LI 4) is added for high fever; Penetrating from *Houxu* (SI 3) to *Laogong* (P 8) is added for convulsion. Treatment for coma and shock refers to corresponding parts (See page).

(c) **Cholera, Paracholera:** Sudden onset of severe abdominal pain and diarrhea, more than 10 times a day, watery stools but without blood and pus, accompanied with severe dehydrant symptoms.

Tianshu (St 25) is with thick needle of Gauge 24. Indirect moxibustion with salt is for *Shenque* (Ren 8) (10 to 20 cones). 2 to 4 treatments a day.

(d) **Infantile Indigestion:** It is more often encountered in infant younger than 2 years old, manifested as loose stools with yellow and green colour, increase of frequency, may be accompanied by vomiting or emaciation. In severe cases, fever, irritability, or even convulsion, coma can be seen.

Selecting *Sifeng* (Extra 25) with pricking for yellow liquid.

2. ABNORMAL URINE

Abnormal urine includes retention or incontinence of urine.

Acute retention of urine refers to acute onset of disease, failure in urination with distention and feeling of emergency. Incontinence of urine refers to involuntary discharge of urine. Both are due to diseases of the nervous system or urinary system. Retention of urine can be divided into obstruction and non-obstruction. Obstructive retention of urine usually caused by obstruction of the urethra, castration, enlargement of the prostate, visicae cervix stenosis, tumor of the bladder, or cystolithiasis. Non-obstructive retention of urine usually caused by trauma of the brain or spinal cord, or injury after abortion and after operation of the lower abdomen, perineum and anus. Incontinence of urine can be divided into four types: True incontinence of urine is due to infection of the urethra and bladder, or tuberculosis, tumor, false incontinence of urine is due to obstruction of the urethra, nervous disturbance of the bladder; stress incontinence of urine is due to looseness of musculus sphincter urethrae and high pressure of the abdomen resulting from cough, laugh or sneezing. Congenital incontinence of urine is due to congenital deformity of the urethra.

TCM think these diseases are in the range of "Long Bi" and "Yi Niao" due to dysfunction of Qi in the bladder and Sanjiao, which are caused by stagnation of Qi and lung heat leading to dysfunction of the lung in resulting water passage (the upper Jiao; The lucid Yang fails to ascend leading to the turbid Yin fails to descend (the middle Jiao); Retention of damp-heat or deficiency of the kidney Yang and decline of the Mingmen-fire, which affect the transmission function and lead to failure of the bladder in discharging urine (the lower Jiao). Further more, obstruction or injury of the urethra can also cause retention of urine and incontinence of urine.

Acupuncture has good effect on this disease. But the causes should be found when the treatment is given. So comprehensive therapy can be applied according to the causes.

1 Main Points of Differential Diagnosis

(a) **Excess and heat Syndromes:** Anuria is difficulty in urination,

distention of the lower abdomen, constipation, red, yellow and sticky fur tongue.

(b) **Deficiency and Cold Syndromes:** Anuria is difficulty in urination, accompanied by pallor, fatigue, soreness and coldness of the lumbus and knee, pale tongue, deep and thin pulse.

II Treatment

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture: *Guanyuan* (Ren 4), *Qihai* (Ren 6), *Zhongji* (Ren 3), *Yinlingquan* (Sp 9), *Sanyinjiao* (Sp 6), *Zhaohai* (K 6) etc.

Manipulation: Deficiency and cold syndromes are treated with moxibustion with moxa sticks to points on the abdomen; Excess and heat syndromes are with acupuncture and reducing method. Or digital depression therapy can be added, press 2 to 3 minutes for each point with moderate manipulation. *Yinlingquan* (Sp 9), *Sanyinjiao* (Sp 6) and *Zhaohai* (K 6) are with strong stimulation of twirling and rotating method. Reinforcing deficiency and reducing excess, in combination with *Lufa* method to maintain the needling reaction. Retain needles 30 minutes.

(b) Other Therapies:

(1) Ear Acupuncture: Kidney, Bladder, *Sanjiao*, End of Inferior Helix Crus, Ureter.

Manipulation: With moderate or strong stimulation, continuously twirl and rotate needles for 5 to 10 minutes. Retain needles 30 minutes. Embedding needles, pressing therapy can be added.

(2) Scalp Acupuncture: *Dingzhong Xian*, *Epang Xian* III.

Manipulation: Insert needles from front to back with *Chouti* method. 1 or 2 needles for each line. Retain needles for 2 hours, accompanied with massage of the lower abdomen and abdominal breathing.

PART XII ASTHMA

Asthma is a disease characterized by recurrent attacks of dyspnea with bronchial wheezing, opening mouth and up lifted shoulders. In severe cases, asthma with short and rapid breathing, dyspnea, attack

may last for a long time, which is chronic asthma. It is resulting from severe bronchial spasm, edema of the mucous membranes, and obstruction of phlegm. If asthma can not be controlled with usually therapy, and the attack of asthma lasts longer than 12 hours, this is the acute disease of the internal medicine, and the disease is dangerous, resulting from the acute onset of bronchial asthma, chronic bronchitis, pneumonectasis and congestive heart failure.

TCM divide asthma into *Chuai Zheng* and *Xiao Zheng*. *Chuai Zheng* is characterized by short and rapid breathing, or even opening mouth, lifted shoulders; *Xiao Zheng* is characterized by recurrent attacks of paroxysmal rapid breathing with wheezing. *Xiao Zheng* always accompanies *Chuai Zheng*, but *Chuai Zheng* may be seen alone. *Chuai Zheng* can be divided into deficiency and excess types. *Xiao Zheng* can be divided into heat and cold types. Both of them are caused by exogenous attack of pathogens, internal damage of retention of food, seven emotional of factors, and weak body resistance after illness. The lung dominates *Qi* and controls respiration. The kidney is the root of *Qi* and dominates receiving *Qi*. The spleen is the origin for production of phlegm. The lung is the storing place for phlegm, so both stagnation of the liver *Qi* leading to abnormal rushing up of *Qi* and retention of phlegm-damp in the lung can induce the onset of the disease. Asthma mainly involves the lung and kidney, and also relates to the liver and spleen.

Acupuncture has a soothing and therapeutic effect on this disease.

1. MAIN POINTS OF DIFFERENTIAL DIAGNOSIS

(a) Main Symptoms: Shortness of breathing, particularly expiratory dyspnea, nares flaring. In severe cases, opening mouth and lifted shoulder, cannot sleep in supine position, orthopea, or even cyanosis can seen.

(b) Accompanied Symptoms and History: Pulmonary dyspnea is often accompanied with cough or chest pain. Pneumonia or pleuritis can produce sudden onset of the disease and accompanied by chills and fever; History of frequent recurrence, accompanied with wheezing in the throat, which mostly refers to bronchial asthma or asthmatic bronchitis; History of heart disease, asthma on exertion or

onset of asthma is related to mental factors, accompanied with numbness and convulsion of extremities or other mental disorder symptoms, no positive signs can be found by body examination, which belongs hysteria.

(c) Discrimination of Asthma (See Table 13)

2. TREATMENT

(a) Acupuncture and Moxibustion Therapy

(1) Body Acupuncture: *Tiantu* (Ren 22), *Dingchuan* (Extra 14), *Dazhui* (Du 14), *Renying* (St 9), *Yuji* (L 10), *Neiguan* (P 6) etc.

Manipulation: *Dazhui* (Du 14) and *Dingchuan* (Extra 14) are with moderate or strong stimulation of even reinforcing and reducing method, or with method of penetrating heaven coolness. The needling reaction should spread to the shoulder, back or chest. Manipulating needles 5 to 10 minutes. Do not retain needles.

For *Tiantu* (Ren 22), insert the needle along the anterior wall of the trachea, then manipulation is with small range of twirling & rotating and lifting & thrusting methods. The needling reaction should spread to the whole chest. Do not retain needles.

For *Renying* (St 9), insert the needle avoid the carotid about 0.5 *cun* depth, then with moderate stimulation of small range of twirling and rotating method. Retain the needle 10 to 20 minutes.

Selecting *Neiguan* (P 6) and *Yuji* (L 10) with strong stimulation of twirling and rotating method. The needling reaction for *neiguan* (P 6) should be conducted upwardly along the medial aspect of the upper limbs.

For profuse phlegm, *Fenglong* (St 40) and *Hegu* (LI 4) can be added; *Quchi* (LI 11) is added for fever.

(2) Moxibustion: It is for deficiency of the lung and kidney. *Dazhui* (Du 14), *Feishu* (B 13), *Guanyuan* (Ren 4), or *Qihai* (Ren 6), *Shenshu* (B 23), *Tanzhong* (Ren 17), *Zusanli* (St 36).

Manipulation: For *Dazhui* (Du 14), *Feishu* (B 13), *Tanzhong* (Ren 17) and *Zusanli* (St 36), moxibustion with moxa sticks (10 to 20 minutes) or scaring moxibustion (3 to 5 cones) can be applied. Indirect moxibustion with monkshood cake (5 to 7 cones) is for *Guanyuan* (Ren 4), *Shenshu* (B 23) and *Qihai* (Ren 6).

Table 13 DISCRIMINATION OF ASTHMA

Syndrome	Nature	Etiology, Pathology	Main Symptoms	Commonly Seen Diseases	Principle for Treatment	Acupuncture and Moxibustion
Chuai Zheng	Excess type	stagnation of the lung Qi due to exogenous pathogenic phlegm-damp and stagnation of the liver, abnormal rushing up of Qi	dyspnea and shortness of breath, long and slow inspiration, long and strong voice, or fever, cough, profuse sputum, stuffiness sensation of the chest, rapid and strong pulse	bronchial asthma, chronic bronchitis with asthma, pneumonia, pneumonectasis, cardiac asthma,	releasing stagnated lung Qi to soothe asthma	mainly with acupuncture
	Deficiency Type	Qi deficiency of the lung and kidney, dysfunction in receiving Qi	short and rapid breathing, long inspiration, feeble voice, dyspnea on exertion, lassitude and weakness feeble and fading pulse or hollow, large and floating pulse	tuberculosis, pneumosilicosis dyspnea due to hysteria	invigorating the lung and kidney to soothe asthma	mainly with moxibustion
Xiao Zheng	Cold type	retention of cold-phlegm in the lung which blocks air passage, attack of phlegm and Qi to the air passage	short and rapid breathing with wheezing, white and sticky sputum, fullness and oppression sensation over the chest, or chills, fever, white sticky fur deep and smooth pulse, or floating and tense pulse		warming Yang and dissipating phlegm, releasing stagnated lung Qi to soothe asthma	mainly with acupuncture
	Heat type	retention of phlegm-heat leading to stagnation of the lung Qi	short and rapid breathing with wheezing, strong and coarse voice, yellow sticky sputum, stuffiness sensation of chest, restlessness, thirst, sweating, red tongue yellow greasy fur, smooth and rapid pulse		releasing stagnated lung Qi to soothe asthma, clearing away heat and dissipating phlegm	mainly with acupuncture

(b) Other Therapies

(1) Ear Acupuncture: Lung, Kidney, Infratragic Apex, *Dingchuan*, End of Inferior Antihelix Crus.

Manipulation: With moderate stimulation. Continuously twirl and rotate needles for 5 to 10 minutes. Retain needles 30 to 60 minutes. Embedding needle, pressing therapy and pulse current stimulation can be applied.

(2) Digital Depression Therapy: *Tanzhong* (Ren 17), *Dazhui* (Du 14), *Feishu* (B 13), *Hegu* (LI 4) and Tender spots on the back.

Manipulation: Selecting these points with moderate or strong manipulation. Pressing 3 to 5 minutes for each point. Repeat 2 to 3 times.

(3) Cutaneous Needle: Tapping the skin of the neck and upper part of the back, particularly the area where the bladder channel runs through. Cupping method can be applied too.

(4) Point Injection: Selection of points is similar to that for body acupuncture and ear acupuncture.

Manipulation: 0.25 to 0.5 g Aminophylline or Vit B 2 (2 to 4 ml) can be used. 0.2 to 1 ml for each point. 1 to 2 times a day.

(5) Hand Acupuncture: Point for Asthma.

Manipulation: Manipulating the needle with strong stimulation of continuous twirling & rotating method for 5 to 10 minutes. Retain the needle 30 minutes.

(6) Scalp acupuncture: *Epang Xian* I, *Ezhong Xian*.

Manipulation: Insert 1 or 2 needles for each line. Manipulating needles with methods of twirling & rotating and lifting & thrusting for 2 to 3 minutes. During manipulating needles, tell the patient to do deep thoracic breathing. Retain needles 2 to 3 hours.

PART XIII PALPITATION

Palpitation refers to unduly rapid action of the heart which is felt by the patient and accompanied by uncomfortable feeling in the precardiac region, usually caused by heart disease, arrhythmia, anemia, hyperthyroidism, hypoglycemia and cardioneurosis.

TCM think palpitation belongs to *Jing Ji* and *Zheng Zhong*, charac-

terized by palpitation, nervousness, restlessness, stuffiness sensation of the chest, easy fear and fright, mostly caused by deficiency of heart *Qi* and heart blood, or stagnation of *Qi* which turns into fire, upward perversion of phlegm-fire, and stagnation of *Qi* leading to blood stasis, obstruction of the heart channel.

Acupuncture has good effect on functional palpitation due to mental factors. Good effect can also be achieved to some organic palpitation.

1. MAIN POINTS OF DIFFERENTIAL DIAGNOSIS

(a) Organic Palpitation: Palpitation is accompanied with stuffiness of the chest, chest pain, exophthalmus, arrhythmia, change of ECG, which refers to heart disease or hyperthyroidism.

(b) Functional Palpitation: Palpitation is accompanied with irritability, insomnia, poor memory, nervousness, fatigue etc., but no positive body signs, which refers to cardioneurosis.

2. TREATMENT

(a) Acupuncture and Moxibustion Therapy

(1) Body Acupuncture: *Neiguan* (P 6), *Ximen* (P 4) *Shenmen* (H 7), *Zusanli* (St 36), *Sanyinjiao* (Sp 6).

Manipulation: Selecting *Neiguan* (P 6), *Ximen* (P 4) and *Shenmen* (H 7) with the needle tip to upward and with moderate or strong stimulation. the needling reaction should spread to the chest along the medial aspect of the upper limbs, in combined with *Lufa* method to maintain the needling reaction, or with methods of *Canglongbaiwei* and *Jinqi* method. Retaining needles longer than 20 minutes; *Zusanli* (St 36) and *Sanyinjiao* (Sp 6) are with even reinforcing and reducing method.

(2) Moxibustion: It is for deficiency and cold syndrome which manifested as pallor, coldness of four extremities, insomnia, dizziness etc. Selection of *Zusanli* (St 36), *Xinshu* (B 15), *Pishu* (B 20) etc.

Manipulation: Moxibustion with moxa sticks or indirect moxibustion can be used. 5 to 7 cones for indirect moxibustion and 10 to 20 minutes for moxibustion with moxa sticks. First moxibustion on the

back, then on the chest and abdomen.

(b) Other Therapies

(1) Ear Acupuncture: *Hear*, *Brain*, *Ear-Shenmen*, End of Inferior Antihelix Crus etc.

Manipulation: Insert needles with 0.5 *cun* length filiform needle and with moderate stimulation of continuous twirling and rotating method. Retain needle longer than 30 minutes. Embedding needle and pressing therapy can be added.

(2) Point Injection: Selection of points is similar to that for body acupuncture and ear acupuncture.

Manipulation: Vit B1 (100mg/2 ml) or 0.5% Procaine (2 ml) can be used. 0.2 to 1 ml for each point. 1 to 2 times a day.

(3) Scalp Acupuncture: *Ezhong Xian*, *Epang Xian* I.

Manipulation: Insert three needles for each line at upper, middle and down point for 0.2 to 0.5 *cun*. Manipulating needles for 1 to 2 minutes with method of twirling & rotating and lifting & thrusting. Retain needles 1 to 2 hours.

(4) Nose Acupuncture: *Heart*, *Spleen*, *Kidney* etc.

Manipulation: Insert needles with 0.5 *cun* length needle and strong stimulation of continuous twirling and rotating method. Retain needles longer than 30 minutes.

PART XIV MENTAL DISORDER

Mental disorder refers to abnormal mental activity due to disturbance of the brain function it includes disturbance of patient's action, emotional disorder and irregularity of thinking and consciousness, commonly seen in the diseases of all kinds of psychosis and neurosis.

TCM thinks this disease in the range of *Dian Kwang* (mania-depressive syndrome), "Depressive Syndrome" and *Zang Zao*. Acute stage of mental disorder usually belongs to excess syndrome. *Dian* syndrome is due to stagnation of *Qi* and phlegm. *Kwang* syndrome is due to upward perversion of phlegm-fire. Mental disorder is caused by mental injury, excessive worry, thinking and anger, which result in incoordination between *Yin* and *Yang*, the heart fails

to control mental and emotional activities. The disease mainly relates to the liver, gallbladder, heart and spleen.

Acupuncture has good effect on functional mental disorder (mania-depressive syndrome) and is one of the main therapy for the treatment of psychosis:

1. MAIN POINT OF DIFFERENTIAL DIAGNOSIS

(a) **Kind of Diseases:** Mental disorder occurs in the juvenile, mainly manifested as change of nature, disturbance of action, thinking and consciousness. This is usually seen in schizophrenia; psychosis with the emotional disorder as the primary symptoms, this refers to mania-depressive syndrome. Mania syndrome is mainly manifested as high emotion, nimble thinking, arrogant and conceited, excessive action. Depressive syndrome is mainly manifested as emotional dejection and mental dullness, delayed thinking, decreased speaking and action. First onset of the disease is in the climacteric age, mainly manifested as worry, depression, suspicion. This is climacteric melancholia; Onset of mental disorder is in monthly period; Mental activity is totally normal at the intervals. This is periodic psychosis; The disease is characterized by exaggerated artificial action, easy to be suggested, no sequelae symptoms at the intervals. Onset of disease relates to the mental factors, no corresponding positive signs. These are commonly seen in hysteria.

(b) **Discrimination Table for Dian Syndrome and Kwang Syndrome** (See Table 14)

2. TREATMENT

(a) Acupuncture and Moxibustion Therapy

Body Acupuncture: *Renzhong* (Du 26), penetrating from *Hegu* (LI 4) to *Houxi* (SI 3), from *Taichong* (Liv 3) to *Yongquan* (K 1), from *Shenting* (Du 24) to *Xinhui* (Du 22).

Manipulation: Gauge 24 to 28, 2.5 *cun* needle is used. For *Renzhong* (Du 26), insert the needle obliquely to the direction of the nasal septum about 1 *cun*; Selecting *Hegu* (LI 4), *Taichong* (Liv 3) and *Shenting* (Du 24) with strong stimulation of twirling and rotating

Table 14 DISCRIMINATION OF MANIA-DEPRESSIVE SYNDROME

Syndrome	Etiology, Pathology	Main Symptoms	Commonly Seen Disease	Principles for Acupuncture Treatment
Depressive syndrome	Qi deficiency of the heat and spleen, stagnation of phlegm and Qi	mental depression, mental dullness, somnolence, speak to oneself, incoherent speech, laugh and cry for no apparent reason, suspicion, easy fright, thin and greasy fur, wiry thin and wiry smooth pulse.	schizophrenia, depressive syndrome, climacteric melancholia, hysteria	regulating Qi and dissipating phlegm, waking up patient from unconsciousness and calming the mind, mainly with acupuncture.
Mania syndrome	hyperactivity of the liver fire, upwards perversion of phlegm-fire	abrupt onset of disease, easy anger, headache, insomnia, flushed face, red eyes, or even irrational rage and shouting, violent behavior with increased energy, insomnia, loss of appetite, red tongue, yellow and greasy fur, wiry, smooth and rapid pulse.	schizophrenia, mania syndrome, periodic psychosis	clearing away fire and dissipating phlegm, calming the heart and mind, mainly with acupuncture

method. Manipulating needles continuously until the patient falls into sleep. Then retain needle 1 to 2 hours; For mania syndrome; With strong stimulation and manipulating needles continuously with method of twirling and rotating; For profuse phlegm, *Fenglong* (St 40) and *Zusanli* (St 36) can be added; *Laogong* (P 8), *Sanyinjiao* (Sp 6) and *Yintang* (Extra 2) are added for insomnia; *Taiyang* (Extra 1), penetrating from *Hanyan* (GB 4) to *Xuanli* (GB 6) are added for headache.

(b) Other Therapies

(1) Ear Acupuncture: Heart, Kidney, Ear-Shenmen, Brain, Liver etc.

Manipulation: With moderate stimulation. Continuously twirling and rotating needles for 10 minutes. Retain needles 1 hour. Pulse current stimulation (intermittent wave) can be added.

(2) Scalp Acupuncture: *Ezhong Xian*, *Dingzhong Xian*, Lower 1/3 of *Dingnie Houxie Xian*, *Dingpang Xian* I.

Manipulation: Insert needles about 1 *cun* with Gauge 26 or 28 needle. Relay acupuncture with 3 needles for each line. Manipulating needles with methods of twirling & rotating and lifting & thrusting. Retain needles about 1 to 2 hours.

(3) Foot Acupuncture: *Leitaichong*, Kidney, Heart, Gallbladder, Stomach etc.

Manipulation: Insert needles about 1 *cun* with Gauge 28 or 30 needles. Manipulating needles 10 to 30 minutes with strong stimulation and continuous twirling and rotating method.

(4) Nose Acupuncture: Penetrating from Brain to Lung, Heart, Liver, Kidney etc.

Manipulation: Insert needles about 0.5 *cun* with Gauge 30 and 1 *cun* length needle. Manipulating needles 10 to 30 minutes with strong stimulation and continuous twirling and rotating method.

(5) Point Injection: Selection of points is similar to that for body acupuncture, ear acupuncture and nose acupuncture.

Manipulation: 25-50g Chlorpromazine can be used. 0.2 to 0.5 ml for each points, 2 to 3 points for each treatment. 1 to 2 times a day.

PART XV ALLERGIC REACTION

Allergic diseases is caused by drug, serum and eating or inhaling allergen, commonly seen in the diseases of pharmacodermatitis, urticaria, allergic shock, transfusion reaction. Treatment of pharmacodermatitis and urticaria with acupuncture is the same. Treatment of allergic shock refers to the part of shock. So only urticaria and transfusion reaction are discussed.

1. ACUTE URTICARIA

Urticaria is an intermittent occurrence of various sizes of elevated patches with red or pale colour which are attended by intense itching, due to hypersensitivity to certain substances, such as: fish, shrimp, feather; flower powder, pains, chemical drug and sunshine, cold or hot air; infection of parasite, mosquito biting or insect biting.

TCM call it *Yin Zhen* and *Feng Zhen Kuai*. The diseases relate to

the lung, stomach, and is, caused by attack of wind, wetness and heat pathogens. These pathogens stagnate in the skin and muscles which could neither be dispersed from the interior nor removed from the exterior, or accumulation of damp heat in the stomach and intestine with further attack of wind-cold pathogen to the skin and muscles.

I Main Point of Differential Diagnosis

(a) Sudden onset of various sizes of flat topped wheels, red or pale colour with intense itching, caused by the attack of exogenous pathogen. Red rashes belongs to wine-heat. White or light red colour, accompanied by heaviness of the body, belongs to wind-damp. Skin rashes, accompanied by abdominal pain, constipation or diarrhea belongs to accumulation of heat in the stomach and intestine.

(b) For the patient with drug history, refers to pharmacocurticaria, with history of parasite or insect biting, refers to infectious urticaria; onset of the disease is caused by some kinds of sensitinogen, which is allergic urticaria. In severe cases, fever, oppression sensation over the chest, dyspnea, or even coma, shock can be seen.

II Treatment

(a) Acupuncture and Moxibustion Therapy

Body Acupuncture: *Quchi* (LI 11), *Hegu* (LI 4), *Sanyinjiao* (Sp 6), *Yinlingquan* (Sp 9), *Xuehai* (Sp 10).

Manipulation: With strong stimulation of twirling & rotating and lifting & thrusting methods. Retain needles longer than 30 minutes, or with penetrating heaven coolness method, in combine with *Lufa* method to maintain the needling reaction. *Dazhui* (Du 14) is added for fever; *Zusanli* (St 36) and *Tianshu* (St 25) are added for abdominal pain; *Suliao* (Du 25) and *Tiantu* (Ren 22) are added for dyspnea; Tender spot at the entocnemial margins or *Diji* (Sp 8), *Tianjing* (SJ 10) are added for severe itching of the skin; *Juegu* (GB 39), *Weizhong* (B 40) with pricking for bloodletting are added for black colour skin rashes; *Baichongwu* (Extra 35) is added for parasite diseases; For treatment for shock, coma refer to the corresponding parts (See page).

(b) Other Therapies

(1) **Ear Acupuncture:** Lung, Infratragic Apex, Interior Tubercle, Ear-*Shenmen*, Antitragic Apex etc, or pricking for bloodletting at the back of ear.

Manipulation: With strong stimulation of continuous twirling and rotating method. Retain needles 30 minutes. After withdrawal of needles, pressing therapy with vaccaria seed or embedding needle can be applied.

(2) **Scalp Acupuncture:** *Ezhong Xian*, *Epang Xian* I.

Manipulation: Insert needles from front to back, 2 needles for each line with *Chouti* method, accompanied with the patient's deep thoracic breathing.

(3) **Point Injection:** Selection of point is similar to that for body acupuncture, ear acupuncture.

Manipulation: Diphenhydramine Hydrochloride (50 mg/1 ml) can be used. 0.2 to 1 ml for each point, 2 to 4 points for one treatment. 1 to 2 times a day.

(4) **Cupping Method:** Selection of *Geshu* (B 17), *Pishu* (B 20), *Shenque* (Ren 8), *Xuehai* (Sp 10) etc.

Manipulation: *Geshu* (B 17) and *Pishu* (B 20) are with retaining jar for 10 minutes; For *Shenque* (Ren 8), retaining the jar for 3 to 5 minutes, remove it and cupping again. Repeat about 5 times; For *Xuehai* (Sp 10), First puncturing and then cupping.

2. TRANSFUSION REACTION

Transfusion reaction occurs during transfusion, mainly manifested by chills, shiver of the limbs, pallor, lower blood pressure, or even dyspnea, shock; or with urticaria.

I. Acupuncture and Moxibustion Therapy

Body Acupuncture: *Baihui* (Du 20), *Zusanli* (St 36), *Sanyinjiao* (Sp 6).

Manipulation: Moxibustion with moxa sticks is for *Baihui* (Du 20); *Sanyinjiao* (Sp 5) and *Zusanli* (St 36) are with moderate stimulation of lifting & thrusting and twirling & rotating method, or with penetrating heaven coolness. *Hegu* (LI 4) and *Quchi* (LI 11) are added for fever;

Tiantu (Ren 22) is added for dyspnea.

II Other Therapies

(a) **Ear Acupuncture:** Ear-*Shenmen*, Intertragus, Lung, Spleen etc.

Manipulation: With moderate stimulation of continuous twirling and rotating method. Retain needles 30 minutes.

(b) **Scalp Acupuncture:** *Dingzhong Xian*, *Epang Xian* I etc.

Manipulation: Insert needles from front to back. 2 needles for each line with *Jinqi* method, accompanied with the patient's deep breathing exercise.

PART XVI OPHTHALMIC ACUTE SYNDROMES

Ophthalmic acute syndromes refer to redness, swelling and pain of the eyeball; Lacrimation, visual disturbance, are mainly caused by trauma; Acute infection of eye or fundus diseases, and commonly seen diseases are: acute conjunctivitis, acute electric ophthalmia, acute keratitis, acute iridocyclitis, acute angle-closure (congestive) glaucoma, acute optic neuritis, retinal periphlebitis, hysteria, cortical blindness and trauma of the eye.

TCM theory understands and treats eye diseases by the five orbiculi theory and symptoms of the eye. The five orbiculi is a collective term of flesh orbiculus (eyelid, belongs to spleen), blood orbiculus (canthus, belongs to heart), *Qi* orbiculus (the white of the eye, belongs to lung), wind orbiculus (the black of the eye, belongs to liver) and water orbiculus (pupil, belongs to kidney).

Acupuncture has good effects on acute external ophthalmitis, has good effect of relieving symptoms and treatment on other acute eye diseases, has remarkable effect on hysterical blindness.

Some acute eye diseases should be treated properly, otherwise, lifelong disability may developed. So other therapies should be considered while acupuncture treatment is applied.

1. MAIN POINTS OF DIFFERENTIAL DIAGNOSIS

(a) **Redness of the Eye:** Redness of the eye refers to congestion of

the eye, which can be divided into diffuse congestion and localized congestion. Diffuse congestion includes conjunctival congestion (superficial congestion), ciliary congestion (deep congestion which caused by acute infection or irritability of the cornea, iris and ciliary body) and mixed congestion (both superficial and deep congestion are existed). It is commonly seen in acute conjunctivitis, Keratitis, acute iridocyclitis and acute angle-closure glaucoma; Localized congestion refers to local superficial congestion and commonly seen in phlyctenular conjunctivitis, scleritis and pterygium etc.

Discrimination of conjunctival congestion and ciliary congestion (See Table 15).

(b) Acute Hypopsia: Acute hypopsia refers to sudden onset of anopia or hypopsia of one eye or both eyes. It can be caused by many kinds of disease, such as: embolism of central artery of retina, commotio retinae, ischemic disease of optic disc, embolism of central vein of retina, retinal periphlebitis, trauma of the eye, hysterical blindness and cortical blindness.

2. TREATMENT

1. Redness of the Eye

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture: *Hegu* (LI 4), *Taiyang* (Extra 1), *Jingming* (B 1), *Zanzhu* (B 2) etc.

Manipulation: *Hegu* (LI 4) is with moderate or strong stimulation of reducing method of lifting & thrusting and twirling & rotating; *Taiyang* (Extra 1) is with twirling and rotating method, in combined with *Quezhuo* method. The needling reaction should be spread around the eyes, or with pricking for bloodletting with three-edged needles; *Jingming* (B 1) is inserted 0.5 *cun* depth with reducing method of small range of twirling and rotating method. Manipulation for *Zanzhu* (B 2) refers to that for *Taiyang* (Extra 1)

(b) Other Therapies

(1) Ear Acupuncture: Ear Apex, Eye 1, Eye 2, Eye etc.

Manipulation: Pricking for bloodletting is for Ear Apex, Eye 1, Eye 2 and Eye are with moderate stimulation of continuous twirling and rotating method. Retain needles for 30 minutes.

Table 15 DISCRIMINATION OF CONJUNCTIVAL CONGESTION AND CILIARY CONGESTION

	Conjunctival Congestion	Ciliary Congestion
Origin of blood	Posterior conjunctival arteries	anterior ciliary arteries
Superficial and deep	Superficial	deep
Place	fornical conjunction	around cornea
Colour	flesh red	dim red
Shape of vessels	thick, large and zigzag, clear	thin and straight, unclear
Activity	Movement following the conjunctiva	No Movement following the conjunctiva
Vasoconstrictor	disappear of congestion, become pale	relieve of congestion but don't disappear
Pressing the eyeball	no fade	fade
Secretion	yes	no
Disease site	diseases of the conjunctiva and eyelid	diseases of cornea, iris and ciliary body, or some kind of glaucoma
Principles for treatment	clearing away lung fire, acupuncture with reducing method	clearing away heat-virulent pathogen from the liver and gallbladder, clearing away liver fire, acupuncture with reducing method

(2) Scalp Acupuncture: *Ezhong Xian*, *Zhenshang Zhengzhong Xian*, *Zhenshangpang Xian* etc.

Manipulation: Each line is divided into two points. Insert needles from upper down to about 1 *cun* depth. Manipulating needles with methods of twirling & rotating and lifting & thrusting. Retain needles 1 hour.

(3) Point Injection: Selection of points is similar to that for body acupuncture and ear acupuncture.

Manipulation: *Qianliquang* injection (千里光注射液), *Huanglian-shu* injection (黄连素注射液), *Yinghuang* injection (银黄注射液), *Yejiuhua* injection (野菊花注射液) or *Pugongying* injection (蒲公英注射液) etc., can be used. 0.5 to 1 ml for each point, 2 to 3 points for one treatment, 1 to 2 times a day.

II Acute Hypopsia

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture: *Jingming* (B 1), *Qiouhou* (Extra 7), *Fengchi* (GB 20), *Taiyang* (Extra 1), *Chengqi* (St 1), *Guangming* (GB 37), *Zhongfeng* (Liv 4), *Zusanli* (St 36) etc.

Manipulation: First select *Guangming* (GB 37), *Zhongfeng* (Liv 4) and *Zusanli* (St 36) with methods of twirling & rotating and lifting & thrusting to reinforce deficiency and reduce excess, or with method of "There Is Yin in the Yang" to reinforcing first and then reduce. For *Jingming* (B 1), *Qiouhou* (Extra 7), *Chengqi* (St 1) or other points around the eye: Select 1 to 2 points each treatment with 32 gauge needle. Insert needles slowly to the deep orbit along the orbital wall about 1 to 1.5 *cun* depth. After arrival of *Qi* is achieved, manipulate needles with small range of twirling and rotating, so as to induce strong needling reaction. Avoid large range of twirling & rotating and lifting & thrusting. Retain needles 30 minutes. The needling reaction for *Fengchi* (GB 20) should spread to the eye area. *Taiyang* (Extra 1) is with twirling and rotating method, accompanied with *Quezhuofa* method. The needling reaction should reach to the orbit.

(b) Other Therapies:

(1) Ear Acupuncture: Eye 1, Eye 2, Eye, Liver, Kidney and the corresponding sensitive spot.

Manipulation: With moderate stimulation of twirling and rotating method. Manipulating needles continuously for 10 minutes. Retain needles 1 to 2 hours. Embedding needle, pressing therapy and pulse current stimulation can be added.

(2) Scalp Acupuncture: *Ezhong Xian*, *Zhenshang Zhengzhong Xian*, *Zhenshangpang Xian* etc.

Manipulation: It refers to that for redness of the eye.

(3) Point Injection: Selection of points is similar to that for body acupuncture and ear acupuncture.

Manipulation: Profound *Dansheng* injection (丹参注射液), *Danggui* injection (当归注射液), *Honghua* injection (红花注射液), Vit. B injection or other injections can be used. 0.5 to 1 ml for each point, 2 to 3 points for one treatment, 1 to 2 times a day.

3. TREATMENT ACCORDING TO DISEASES.

(a) **Acute Conjunctivitis:** It is an acute infectious eye disease caused by bacterial and viral infection, manifested as redness and swelling of the eyelid, congestion of bulbar conjunctiva, accompanied with itching of the eye or foreign body sensation, hypersecretion etc. But it does not affect vision and movement of the eyeball.

Treatment refers to redness of the eye. Pricking for bloodletting with three-edged needle is added to *Shaoshang* (L 11) and Ear Apex.

Treatment of acute catarrhal conjunctivitis, epidemic hemorrhagic conjunctivitis, epidemic keratitis, hordeolum, acute dacryocystitis, acute follicular conjunctivitis and acute keratitis can refer this.

(b) **Acute Electric Ophthalmia:** The patient has a history of exposure to electric welding, ultraviolet rays sudden onset of disease, foreign body sensation of both eyes, severe pain, photophobia, lacrimation, spasm and swelling of the eyelid, mixed congestion of the conjunctiva etc.

Mainly selection of *Hegu* (LI 4) and *Taiyang* (Extra 1): Pricking for bloodletting is for *Taiyang* (Extra 1). *Hegu* (LI 4) is with reducing method of continuously twirling and rotating for 3 to 5 minutes. Retain needles 30 minutes; *Taichong* (Liv 3) is added for severe pain; *Jingming* (B 1) is added for lacrimation.

(c) **Acute Iridocyclitis:** Acute iridocyclitis, i.e. anterior uveitis, can be caused by different kinds of infections and trauma, mainly manifested as ciliary congestion or mixed congestion, hypopsia, pain of the eye, miosis, asthenocoria and corneal precipitation. In severe cases, secondary glaucoma can be developed.

Treatment is similar to that for redness of the eye. Penetrating from *Taichong* (Liv 3) to *Yongquan* (K 1) is added for headache, pain of the eye. *Yinlingquan* (Sp 9) and *Sanyinjiao* (Sp 6) are added for oliguria with reddish urine. *Zhongfeng* (Liv 4), *Guangming* (GB 37) are added for hypopsia; *Taixi* (K 3), *Zusanli* (St 36) and Intertragus, Infratragic Apex are added miosis; *Neiguan* (P 6), *Zusanli* (St 36), *Zhaohai* (K 6), *Xiaxi* (GB 43) and *Taichong* (Liv 3) are added for secondary glaucoma with moderate or strong stimulation of twirling & rotating and lifting & thrusting methods. Reinforcing deficiency and

reducing excess.

(d) Acute closed-angle Glaucoma: It is also called acute congestive glaucoma and can be caused by many causes, sudden onset of disease, sudden decline of vision; only light sensation exists or iridization. The disease usually involves both eyes, accompanied by severe headache, pain of the eye, pain may radiate to the area where the trigeminal nerve runs through, nausea, vomiting, severe mixed congestion of bulbar conjunctiva, hyperintraocular pressure, platycoria and no pupillary light reflex.

Treatment refers to redness of the eye (See page 147 and acute hypopsia (See page 148). Penetrating from *Taichong* to *Yongquan* (K 1), from *Taixi* (K 3) to *Kunlun* (B 60) are added for headache, severe pain of the eyes *Yinlingquan* (Sp 9), *Zhaohai* (K 6) and *Xiaxi* (GB 43) are added for hyper-intraocular pressure *Neiguan* (P 6) and *Taichong* (Liv 3) are added for nausea, vomiting *Zusanli* (St 36) is added for weakness of the whole body. For killing pain, twirling and rotating method, or *Longhujiao* method is applied; Others are with lifting and thrusting method, in combination with *Lufa* method, or penetrating heaven coolness method.

This is an emergency disease which should be controlled in 24 to 48 hours. Other therapy should be added. Acupuncture only has good effects of killing pain and reducing intraocular pressure.

(e) Hysterical Blindness: Onset of the disease is mostly induced by mental factors sudden onset of blindness, with normal pupil and fundus. Vision may be recovered or relieved by suggestive therapy.

Selecting *Hegu* (LI 4), *Sanyinjiao* (Sp 6), *Quchi* (LI 11), *Jingming* (B 1) etc. with moderate stimulation. Retain needles for 15 minutes, accompanied by suggestive therapy.

(f) Cortical Blindness: Cortical blindness can be caused by many causes which lead to injury of the visual center of cerebral cortex, commonly seen in cerebrovascular accident, injury of the brain, meningitis, carbon monoxide poisoning, and may accompanied with hemiplegia, sensory disturbance, aphasia etc.

Treatment refers to acute hypopsia (See page 148) Mainly with treatment by scalp acupuncture by selection of *Ezhong Xian*, *Zhen-shang Zhengzhong Xian*, *Zhenshangpang Xian* etc.

(g) Acute Retrobulbar Neuritis: It can be caused by many factors.

Sudden decline of vision, or even blindness. There is a dark spot at the center of field of view, or partial visual field defect. Pain when moving the eyeball, dull pain at the deep part of the orbital or tenderness of the eyeball. At the early stage there is asthenocoria: at the later stage is with platycoria, no pupillary light reflex.

Treatment refers to that for acute hypopsia (See page 148). Selecting *Jingming* (B 1), *Qiouhou* (Extra 7), *Chengqi* (St 1) and *Jianming* (Extra) with thin filiform needle and deep insertion about 1 to 1.5 *cun*. Points at four limbs are with moderate stimulation to reinforcing deficiency and reducing excess. *Ganshu* (B 18) and *Shenshu* (B 23) can be added.

(h) Trauma of the Eye: Symptoms for trauma of the eye may be different according to the place and degree of trauma. Acupuncture has good effects on killing pain and relieve symptoms.

For different kinds of eye trauma; *Hegu* (LI 4) and *Taichong* (Liv 3) can be selected with moderate or strong stimulation of continuous twirling and rotating method. Retain needles 30 minutes. For bleeding of the sclera, hyphema or bleeding of optical fundus; direct moxibustion with moxa cone should be applied to *Yinbai* (Sp 1), *Dadun* (Liv 1) and *Shaoshang* (L 11) quickly (3 to 5 cones). *Taiyuan* (L 9) and *Taixi* (K 3) are with reducing method first and then reinforcing. Retain needles 30 minutes. *Hegu* (LI 4), *Jingming* (B 1) and *Taiyang* (Extra 1) are added for corneal abrasion *Jingming* (B 1), *Qiouhou* (Extra 7), *Jianming* (Extra), *Zusanli* (St 36) and *Zhongfeng* (Liv 4) etc. are selected for commotio retinae. 2 points each from eye region and four limbs are selected for one treatment. Points at eye region is with light manipulation and distant points are with heavy manipulation. 1 to 2 times a day. Retain needles 30 minutes.

PART XVII EAR-THROAT ACUTE SYNDROMES

Sudden onset of deafness, suppurative otitis media, acute swelling and pain of the throat and sudden onset of aphonia are the common ear-throat acute syndromes, caused by exogenous attack of wind-heat pathogens and accumulation of fire and virulent in the interior. Commonly seen diseases are: acute otitis media suppurative, sud-

den deafness, acute tonsillitis, acute tonsillar abscess, acute pharyngitis and hysteria. Acupuncture has remarkable effects of anti-inflammation and killing pain on these diseases.

1. DIFFERENTIAL DIAGNOSIS

(a) **Sudden Onset of Deafness:** In sudden onset of deafness, there is mental irritability before onset of disease, accompanied with numbness of the foot and hand, aphonia, nervousness and such symptoms of neurosis. In hysteria, first tinnitus, which involve one ear or both ears, then deafness, no positive signs for the tympanic membrane and nose-throat region, may be accompanied with light dizziness. In sudden deafness, recurrent tinnitus, deafness, accompanied with severe dizziness, which is labyrinthine hydrops. Bilateral deafness after application of drugs, is toxic deafness.

(b) **Suppurative Otitis Media:** Sudden onset of disease, chills, fever, headache, jumping pain of the deep part of the ear, discharge of yellow pus or with blood; this is acute otitis media suppurative.

(c) **Swelling and Pain of Throat:** Sore throat, redness and swelling of tonsil, odynophagia, chills, fever, headache, no difficulty in opening mouth, is acute tonsillitis; For high fever, difficulty in opening mouth, salivation, history of recurrent tonsillitis, is acute peritonsillitis. For sore throat, fever, gray-white pseudo membrane which cannot be removed readily on the tonsil, accompanied with arrhythmia, palatal paralysis; is diphtheria.

(d) **Hoarseness and Aphonia:** Hoarseness, or even aphonia, sore throat, fever, redness and swelling of throat, dysphagia and dyspnea, is acute pharyngolaryngitis; sudden onset of aphonia due to mental irritability, no positive signs by body examination, accompanied with neurosis symptoms, such as numbness of foot and hand, nervousness, is hysteria.

2. TREATMENT

I. Sudden Onset of Deafness and Suppurative Otitis Media

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture: *Waiguan* (SJ 5) or *Zhongzhu* (SJ 3), *Ermen* (SJ 21), *Tinggong* (SI 19), *Tinghui* (GB 2), *Yanglingquan* (GB 34), *Hegu* (LI 4) etc.

Manipulation: *Waiguan* (SJ 5), *Zhongzhu* (SJ 3), *Yanglingquan* (GB 34) are with moderate or strong stimulation of reducing method of twirling and rotation or *Longhujiaozhan* method. Retain needles 30 minutes. *Ermen* (SJ 21), *Tinggong* (SI 19) and *Tinghui* (GB 2) are with methods of *Quezhuofa* and *Choutifa*. Depth of insertion is 1 to 1.5 *cun*. Retain needles 30 minutes; *Hegu* (LI 4) is added for suppurative otitis media.

(b) Other Therapies:

(1) Ear Acupuncture: Interior Ear, Sanjiao, Kidney.

Manipulation: With strong stimulation. Retain needles 30 minutes. Embedding needle, pressing therapy and pulse current stimulation can be added.

(2) Scalp Acupuncture: Lower 2/5 of *Dingnie Houxie Xian*, *Niehou Xian*, *Dingpang Xian* II.

Manipulation: Insert needles by three spots for each line. Retain needles longer than 2 hours.

(3) Point Injection: Selection of points is similar to that for body acupuncture and ear acupuncture.

Manipulation: Water for injection, Normal saline or other corresponding injections can be used. 0.5 to 1 ml for each point. 1 to 2 times a day.

II Swelling and Pain of Throat

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture: *Hegu* (LI 4), *Yuji* (L 10), *Shaoshang* (L 11), *Liangquan* (Ren 23) etc.

Manipulation: *Hegu* (LI 4) and *Yuji* (L 10) are with reducing methods of lifting & thrusting and twirling & rotating, or with methods of penetrating heaven coolness: *Liangquan* (Ren 23) is with *Choutifa* Pricking for bloodletting is for *Shaoshang* (L 11); *Quchi* (LI 11), *Shangyang* (LI 1) with pricking for bloodletting are added for fever.

(b) Other Therapies:

(1). Ear Acupuncture: Lung, Throat, Tonsil, Infratragic Apex.

Manipulation: With strong stimulation of continuous twirling and rotating method. Retain needles 30 minutes. Embedding needle, pressing therapy and pulse current stimulation can be added.

(2) Point Injection: Selection of points is similar to that for body acupuncture and ear acupuncture.

Manipulation: *Yinghuang* injection (银黄注射液), *Banlangeng* injection (板蓝根注射液) or other injections with functions of anti-inflammation, clear heat-pathogen and removing toxic material can be chosen. 0.2 to 1 ml for each point, 1 to 2 times a day.

(3) Hand Acupuncture: Point for Sore Throat and Toothache. Point for Pain of Head Back.

Manipulation: With moderate and strong stimulation of continuous twirling and rotating method. Retain needles 30 minutes.

III Hoarseness and Aphonia

(a) Acupuncture and Moxibustion Therapy:

Body Acupuncture: *Lingdao* (H 4) or *Tongli* (H 5), *Jianashi* (P 5), *Lianquan* (Ren 23) etc.

Manipulation: With even reinforcing and reducing method of twirling and rotating, in combination with *Chouti* method. Retain needles 30 minutes. *Yuji* (L 10) and *Hegu* (LI 4) are added for hoarseness; *Yongquan* (K 1) is added for severe aphonia.

(b) Other Therapies:

(1) Ear Acupuncture: Ear-*Shenmen*, Heart, Kidney, Throat, Lung etc.

Manipulation: With moderate or strong stimulation of continuous twirling and rotating method. Retain needles 30 minutes. Sensitive spots on the ear can be added.

(2) Scalp Acupuncture: *Ezhong Xian*, *Epang Xian* I.

Manipulation: Insert 2 needles for each line with methods of lifting & thrusting and twirling & rotating, accompanied with the patient's action of pronouncing.

PART XVIII ABNORMALITY OF FORCE IN LABOR AND PAINLESS LABOR

Abnormality of force in labor is one kind of difficult labor. It is the condition of weak contractility or spasm of the endometrium and muscle of abdominal wall which affect normal labor, mainly manifested as prolonged first, second and third birth process.

Acupuncture has good oxydonic effect and also has good effect of killing pain on pain due to uterine contraction during normal labor. So It can used in the birth process.

1. ACUPUNCTURE AND MOXIBUSTION THERAPY

(a) Body Acupuncture: *Hegu* (LI 4), *Sanyinjiao* (Sp 6)

Manipulation: With moderate stimulation of continuous twirling and rotating method. manipulating needles 3 to 5 minutes. Retain needles 30 minutes.

(b) Moxibustion: Moxibustion with moxa sticks can be applied to the abdomen for 15 minutes.

2. OTHER THERAPIES

(a) Ear Acupuncture: Ear-*Shenmen*, Triangular Fossa, Intertragus.

Manipulation: Manipulating needles continuously for 5 to 10 minutes with twirling and rotating method. Embedding needle, pressing therapy and pulse current stimulation can be added.

(b) Point Injection: Selection of points is similar to that for body acupuncture and ear acupuncture.

Manipulation: Water for injection or Normal saline with oxytocin (5 unite/2-4 ml) can be used. 0.2 to 1 ml for each point.

(c) Digital Depression Therapy: Pressing *Hegu* (LI 4), *Sanyinjiao* (Sp 6) or Tender spots at the medial margin of the tibia with moderate manipulation for 5 to 10 minutes or until labor heguis.

(d) Scalp Acupuncture: *Dingzhong Xian*, *Epang Xian* III etc.

Manipulation: Insert needles from front to back for *Dingzhong Xian* and from back to front for *Epang Xian* III. 2 to 3 needles for *Epang Xian* III. Accompanied with the patient's deep abdominal breathing.

APPENDIX I

Form of Medical History for Acupuncture and Moxibustion

I General Items

Name, sex, age, native place, occupation, address and date.

II Chief Complaint and Case History

This part includes the patient's chief complaint main symptoms, present case history and related past history and family history.

III Body Examination

Corresponding body examination according to chief complaint corresponding laboratory examination and other examinations according to the signs of acute syndromes.

IV Diagnosis

Syndrome of TCM and disease of western medicine

V Selection of Treatment Based on the differential Diagnosis

Includes: Etiology, pathology and principles for point selection.

Prescription: Includes therapy and points; Manipulation, time for retaining needles, time of treatment for each day, course of treatment; Other rescue method; Other medical orders which include contraindication of diet, prognosis of the disease and related precaution, etc.

VI Signature of Doctor

Signature of doctor and date of signature.

APPENDIX II

Index of Commonly Used Points for
Acute Syndromes**Bafeng** (Extra 40) (八風)

On the dorsum of foot, in the depressions on the webs between toes, proximal to the margins of the webs, eight point in all.

Baihui (Du 20) (百會)

On the midline of the head, 7 *cun* directly above the posterior hairline, approximately on the midpoint of the line connective the apexes of the two auricles.

Baxie (Extra 27) (百邪)

On the dorsum of the hand, at the junction of the white and red skin of the the hand webs, eight in all, making a loose fist to locate the points.

Biguan (St 31) (髀關)

At the crossing point of the line drawn directly down from the anterior superior iliac spine and the line level with the lower border of the symphysis pubis, in the depression on the lateral side of m. sartorius when the thigh is flexed.

Binao (LI 14) (臂臑)

On the line joining *Quchi* (LI 11) and *Jianyu* (LI 15), 7 *cun* above *Quchi* (LI 11), on the radial side of the humerus, superior the the lower and end of m. deltoideus.

Changqiang (Du 1) (長強)

Midway between the tip of the coccyx and the anus, locating the point in prone position.

Chengfu (B 36) (承扶)

In the middle of the transverse sluteat fold, locate the point in prone postion.

Chengjiang (Ren 24) (承漿)

In the depression in the center of the mentolabial groove.

Chengqi (St 1) (承泣)

With the eyes looking straight forward, the point is directly below the pupil, between the eyqball and the infraorbital ridge.

Chengshan (B 57) (承山)

Directly below the belly of m. gastrocnemius, on the line joining *Weizhong* (B 40) and tendo calcaneus, about 8 *cun* below *Weizhong* (B40).

Chize (L 5) (臑澤)

On the cubital crease, on the radial side of the tendon of m. biceps brachii. this point is located with the elbow slightly fixed.

Chongyang (St 42) (冲陽)

Distal to *Jiexi* (St 41), at the highest point of the dorsum of the foot, in the depression between the second and third metatarsal bones and the cuneiform bone.

Ciliao (B 32) (次髎)

In the second posterior sacral foramen.

Dadu (Sp 2) (大都)

On the medial side of the great toe, distal and inferior to the first metatarsodigital joint, at the junction of the red and white skin.

Dadun (Liv 1) (大敦)

On the lateral side of the dorsum of the terminal phalanx of the great toe, between the lateral corner of the nail and the interphalangeal joint.

Daheng (Sp 15) (大橫)

4 *cun* lateral to the center of the umbilicus, lateral to m. rectus abdominis.

Daling (P 7) (大陵)

In the middle of the transverse crease of the wrist, between the tendons of m. palmaris longus and m. flexor carpi redialis.

Dannangxue (Extra 39) (膽囊穴)

The tender spot 1-2 *cun* below *Yanglingquan* (GB 34)

Danshu (B 10) (膽俞)

1.5 *cun* lateral to *Zhongshu* (Du 7), at the level of the lower border of the spinous process of the tenth thoracic vertebra.

Dazhui (Du 14) (大椎)

Below the spinous process of the seventh cervical vertebra, approximately at the level of the shoulders.

Dicang (St 4) (地倉)

Lateral to the corner of the mouth, directly below *Juliao* (St 3).

Diji (Sp 8) (地機)

3 *cun* below *Yinlingquan* (Sp 9), on the line connecting *Yinlingquan* (Sp 9) and the medial malleolus.

Dingchuan (Extra 14) (定喘)

0.5 *cun* lateral to *Dazhui* (Du 14).

Dubi (St 35) (犢鼻)

When the knee is flexed, the point is at the lower border of the patella, in the depression lateral to the patellar ligament.

Ermen (SJ 21) (耳門)

In the depression anterior to the supratragic notch and slightly superior to the condyloid process of the mandible. The point is located with the mouth open.

Feishu (B 13) (肺俞)

1.5 *cun* lateral to *Shenzhu* (Du 12), at the level of the lower border of the spinous process of the third thoracic vertebra.

Fengchi (GB 20) (風池)

In the depression between the upper portion of m. sternocleidomastoideus and m. trapezius, on the same level with *Fengfu* (Du 16).

Fenglong (St 40) (豐隆)

8 *cun* superior to the external malleolus, about one finger-breadth lateral to *Tiaokou* (St 38).

Fujie (Sp 14) (腹結)

1.3 *cun* below *Daheng* (Sp 15), 4 *cun* lateral to the *Ren* channel, on the lateral side of m. rectus abdominis.

Fuliu (K 7) (復溜)

2 *cun* directly above *Taixi* (K 3), on the anterior border of tendo calcaneus.

Futu (St 32) (伏兔)

On the line connecting the anterior superior iliac and lateral bor-

der of the patella, 6 *cun* above the laterosuperior border of the patella, in m. rectus femoris.

Ganshu (B 18) (肝俞)

1.5 *cun* lateral to *Jinsuo* (Du 8), at the level of the lower border of the spinous process of the ninth thoracic vertebra.

Geshu (B 17) (膈俞)

1.5 *cun* lateral to *Zhiyang* (Du 9), at the level of the lower border of the spinous process of the seventh thoracic vertebra.

Gongsun (Sp 4) (公孫)

In the depression distal and inferior to the base of the first metatarsal bone, at the junction of the red and white skin.

Guangming (GB 37) (光明)

5 *cun* directly above the tip of the external malleolus, on the anterior border of the fibula.

Guanyuan (Ren 4) (關元)

On the midline of the abdomen, 3 *cun* below the umbilicus.

Hanyan (GB 4) (頰厭)

Within the hairline of the temporal region, at the junction of the upper 1/4 and lower 3/4 of the distance between *Touwei* (St 8) and *Qubin* (GB 7)

Hesu (LI 4) (合谷)

On the dorsum of the hand, between the 1st and 2nd metacarpal bones, approximately in the middle of the 2nd metacarpal bone on the radial side.

Houxi (SI 3) (後溪)

When a loose fist is made, the point is on the ulnar side, proximal to the fifth metacarpophalangeal joint, at the end of the transverse crease and the junction of the red and white skin.

Huantiao (GB 30) (環跳)

At the junction of the lateral 1/3 and medial 2/3 of the distance between the great trochanter and the hiatus of the sacrum (*Yaoshu*, Du 2). When locating the point, put the patient in lateral recumbent position with the thigh flexed.

Huanzhong (Extra 34) (環中)

Midway between *Huantiao* (GB 30) and *Yaoshu* (Du 2).

Huatuojiayi (Extra 15) (華陀奇經)

Also called "*Jiaji*". A group of 34 points on both sides of the spinal

column, 0.5 *cun* lateral to the lower border of each spinous process from the first thoracic vertebra to the fifth lumbar vertebra.

Huiyin (Ren 1) (會陰)

Between the anus and the root of the scrotum in males and between the anus and the posterior labial commissure in females.

Jiache (St 6) (頰車)

One finger-breadth anterior and superior to the lower angle of the mandible where m. masseter attaches at the prominence of the muscle when the teeth are clenched.

Jianliao (SJ 14) (肩髃)

Posterior and inferior to the acromion, in the depression about 1 *cun* posterior to *Jianyu* (LI 15) when the arm is abducted.

Jianneiling (Extra 23) (肩內陵)

Anterior and inferior to the shoulder joint. When the arm is abducted, the point is 1 *cun* above the anterior end of the axillary fold.

Jianshi (P 5) (肩髃)

3 *cun* above the transverse crease of the wrist, between the tendons of m. palmaris longus and m. flexor carpi radialis.

Jianyu (LI 15) (肩髃)

Antero-inferior to the acromion, on the upper portion of m. deltoideus. When the arm is in full abduction, the point is in the depression appearing at the anterior border of the acromioclavicular joint.

Jianzhen (SI 9) (肩貞)

Posterior and inferior to the shoulder joint. When the arm is abducted, the point is 1 *cun* above the posterior end of the axillary fold.

Jiaosun (SJ 20) (角孫)

Directly above the ear apex, within the hairline.

Jiexi (St 41) (解溪)

On the dorsum of the foot, at the midpoint of the transverse crease of the ankle joint, in the depression between the tendons of m. extensor digitorum longus and hallucis longus, approximately at the level of the tip of the external malleolus.

Jingming (B 1) (睛明)

0.1 *cun* superior to the inner canthus.

Jiuwei (Ren 15) (鳩尾)

Below the xiphoid process, 7 *cun* above the umbilicus: locate the point in supine position with arms uplifted.

Jueyinshu (B 14) (厥陰俞)

1.5 *cun* lateral to the *Du* channel, at the level of the lower border of the spinous process of the fourth thoracic vertebra.

Juliao (GB 29) (居髎)

In the depression of the midpoint between the anterosuperior iliac spine and the great trochanter.

Jugue (Ren 14) (巨關)

On the midline of the abdomen, 6 *cun* above the umbilicus.

Kongzui (L 6) (孔最)

On the palmar aspect of the forearm, on the line joining *Taiyuan* (L 9) and *Chize* (L 5), 7 *cun* above the transverse crease of the wrist.

Kunlun (B 60) (崑崙)

In the depression between the external malleolus and tendo calcaneus.

Lanweixue (Extra 37) (蘭尾穴)

The tender spot about 2 *cun* below *Zusai* (St 36).

Laogong (P8) (勞宮)

On the transverse crease of the palm, between the second and third metacarpal bones. When the fist is clenched, the point is just below the tip of the middle finger.

Lianggiu (St 34) (梁丘)

When the knee is flexed, the point is 2 *cun* above the laterosuperior border of the patella.

Liangmen (St 21) (梁門)

4 *cun* above the umbilicus, 2 *cun* lateral to *Zhongwan* (Ren 12).

Lianguan (Ren 23) (廉泉)

Above the Adam's apple, in the depression of the upper border of the hyoid bone.

Lieque (L 7) (列缺)

Superior to the styloid process of the radius, 1.5 *cun* above the transverse crease of the wrist.

Meichong (B 3) (眉冲)

Directly above the medial end of the eyebrow, 0.5 *cun* within the

- anterior hairline, between *Shenting* (Du 24) and *Quchai* (B 4).
- Mingmen** (Du 4) (命門)
Below the spinous process of the second lumbar vertebra.
- Naohu** (Du 17) (腦戶)
On the midline of the head, 1.5 *cun* directly above *Fengfu* (Du 16), superior to the external occipital protuberance.
- Naoshu** (SI 10) (臑髎)
When the arm is abducted, the point is directly above *Jianzhen* (SI 9), in the depression inferior to the scapular spine.
- Neiguan** (P 6) (內關)
2 *cun* above the transverse crease of the wrist, between the tendons of *m. palmaris longus* and *m. flexor radialis*.
- Neiting** (St 44) (內庭)
Proximal to the web margin between the second and third toes, in the depression distal and lateral to the second metatarsophalangeal joint.
- Pishu** (B 20) (脾俞)
1.5 *cun* lateral to *Jizhong* (Du 6), at the level of the lower border of the spinous process of the eleventh thoracic vertebra.
- Qianting** (Du 21) (前頂)
On the midline of the head, 1.5 *cun* anterior to *Baihui* (Du 20).
- Qiangjian** (Du 18) (強間)
On the midline of the head, 1.5 *cun* directly above *Naohu* (Du 17), midway between *Fengfu* (Du 16) and *Baihui* (Du 20).
- Qichong** (St 30) (氣沖)
5 *cun* below the umbilicus, 2 *cun* lateral to *Qugu* (Ren 2).
- Qihai** (Ren 6) (氣海)
On the midline of the abdomen, 1.5 *cun* below the umbilicus.
- Qimen** (Liv 14) (期門)
Directly below the nipple, in the sixth intercostal space.
- Qiuhou** (Extra 7) (球後)
At the junction of the lateral 1/4 and the medial 3/4 of the infraorbital margin.
- Qubin** (GB 7) (曲髎)
Directly above the posterior border of the preauricular hairline, about one finger-breadth anterior *Jiaosun* (SI 20).
- Quchi** (LI 11) (曲池)

- When the elbow is flexed, the point is in the depression at the lateral end of the transverse cubital crease, midway between *Chize* (L 5) and the lateral epicondyle of the humerus.
- Ququan** (Liv 8) (曲泉)
When the knee is flexed, the point is in the depression above the medial end of the transverse popliteal crease, posterior to the medial epicondyle of the femur, on the anterior part of the insertion of *m. semimembranosus* and *m. semitendinosus*.
- Quze** (P 3) (曲澤)
On the transverse cubital crease, at the ulnar side of the tendon of *m. biceps brachii*.
- Rangu** (K 2) (然谷)
Anterior and inferior to the medial malleolus, in the depression on the lower border of tuberosity of the navicular bone.
- Renying** (St 9) (人迎)
Level with the tip of Adam's apple, just on the course of the common carotid artery, on the anterior border of *m. sternocleidomastoides*.
- Renzhong** (Du 26) (人中)
A little above the midpoint of the philtrum, near the nostrils.
- Riyue** (GB 24) (日月)
One rib below *Qimen* (Liv 14), directly below the nipple, in the seventh intercostal space.
- Sanjiaoshu** (B 22) (三焦俞)
1.5 *cun* lateral to *Xuanshu* (Du 5), at the level of the lower border of the spinous process of the first lumbar vertebra.
- Sanyinjiao** (Sp 6) (三陰交)
3 *cun* directly above the tip of the medial malleolus, on the posterior border of the medial aspect of the tibia.
- Shangjuxu** (St 37) (上巨虛)
3 *cun* below *Zusanli* (St 36), one finger-breadth from the anterior crest of the tibia, in *m. tibialis anterior*.
- Shangqu** (K 17) (商丘)
2 *cun* above the umbilicus, 0.5 *cun* lateral to *Xiawan* (Ren 10).
- Shangwan** (Ren 13) (上腕)
On the midline of the abdomen, 5 *cun* above the umbilicus.
- Shangxing** (Du 23) (上星)

1 *cun* directly above the midpoint of the anterior hairline.

Shaoshang (L 11) (少商)

On the radial side of the thumb, about 0.1 *cun* posterior to the corner of the nail.

Shaoze (SI 1) (少澤)

On the ulnar side of the little finger, about 0.1 *cun* posterior to the corner of the nail.

Shenmai (B 62) (申脈)

In the depression directly below the external malleolus.

Shenmen (H 7) (神門)

At the ulnar end of the transverse crease of the wrist, in the depression on the radial side of the tendon of m. flexor carpi ulnaris.

Shenque (Ren 8) (神闕)

In the center of the umbilicus.

Shenshu (B 23) (腎俞)

1.5 *cun* lateral to *Mingmen* (Du 4), at the level of the lower border of the spinous process of the second lumbar vertebra.

Shenting (Du 24) (神庭) *

0.5 *cun* directly above the midpoint of the anterior hairline.

Shixuan (Extra 24) (十宣)

On the tip of the ten fingers, about 0.1 *cun* distal to the nails.

Shuaiguo (GB 8) (率谷)

Superior to the apex of the auricle, 1.5 *cun* within the hairline.

Sibai (St 2) (四白)

Below *Chengqi* (St 1), in the depression at the infraorbital foramen.

Sifeng (Extra 25) (四縫)

On the palmar surface, in the midpoint of the transverse crease of the proximal interphalangeal joints of the index, middle, ring and little fingers.

Sishencong (Extra 6) (四神聰)

A group of 4 points, at the vertex, 1 *cun* respectively posterior, anterior and lateral to *Baihui* (Du 20).

Suliao (Du 25) (素髎)

On the tip of the nose.

Taibai (Sp 3) (太白)

Proximal and inferior to the head of the first metatarsal bone, at

the junction of the red and white skin.

Taichong (Liv 3) (太沖)

On the dorsum of the foot, in the depression distal to the junction of the first and second metatarsal bones.

Taixi (K 3) (太溪)

In the depression between the medial malleolus and tendo calcaneus, at the level with the tip of the medial malleolus.

Taiyang (Extra 1) (太陽)

In the depression about 1 *cun* posterior to the midpoint between the lateral end of the eyebrow and outer canthus.

Taiyuan (L 9) (太淵)

At the radial end of the transverse crease of the wrist, in the depression on the lateral side of the radial artery.

Tanzhong (Ren 17) (膻中)

On the anterior midline, at the level with the fourth intercostal space, midway between the nipples.

Taodao (Du 13) (陶道)

Below the spinous process of the first thoracic vertebra.

Tianjing (SJ 10) (天井)

When the elbow is flexed, the point is in the depression about 1 *cun* superior to the olecranon.

Tianshu (St 25) (天樞)

2 *cun* lateral to the center of the umbilicus.

Tiantu (Ren 22) (天突)

In the center of the suprasternal fossa.

Tiaokou (St 38) (條口)

2 *cun* below *Shangjuxu* (St 37), midway between *Dubi* (St 35) and *Jiexi* (St 41).

Tinggong (SI 19) (聽宮)

Anterior to the tragus and posterior to the condyloid process of the mandible, in the depression formed when the mouth is open.

Tongtian (B 7) (通天)

1.5 *cun* posterior to *Chengguan* (B 6), 1.5 *cun* lateral to the *Du* channel.

Toulingqi (GB 15) (頭臨泣)

Directly above *Yangbai* (GB 14), 0.5 *cun* within the hairline, midway between *Shenting* (Du 24) and *Touwei* (St 8).

Touwei (St 8) (頭維)

0.5 *cun* within the anterior hairline at the corner of the forehead,
4.5 *cun* lateral to *Shenting* (Du 24).

Waiguan (SJ 5) (外關)

2. *cun* above *Yangchi* (SJ 4), between the radius and ulna.

Weishu (B 21) (胃俞)

1.5 *cun* lateral to the *Du* channel, at the level of the lower border of the spinous process of the twelfth thoracic vertebra.

Weizhong (B 40) (委中)

Midpoint of the transverse crease of the popliteal fossa, between the tendons of m. biceps femoris and m. semitendinosus.

Xiaguan (St 7) (下關)

At the lower border of the zygomatic arch, in the depression anterior to the condyloid process of the mandible. This point is located with the mouth closed.

Xiawan (Ren 10) (下脘)

On the midline of the abdomen, 2 *cun* above the umbilicus.

Xiaxi (GB 43) (俠溪)

On the dorsum of foot, between the fourth and fifth toe, proximal to the margin of the web.

Ximen (P 4) (邪門)

5 *cun* above the transverse crease of the wrist, on the line connecting *Quze* (P 3) and *Daling* (P 7), between the tendons of m. palmaris longus and m. flexor carpi radialis.

Xingjian (Liv 2) (行間)

On the dorsum of the foot between the first and second toe proximal to the margin of the web.

Xinhui (Du 22) (顙會)

2 *cun* posterior to the midpoint of the anterior hairline, 3 *cun* anterior to *Baihui* (Du 20).

Xinshu (B 15) (心俞)

1.5 *cun* lateral to *Shendao* (Du 11), at the level of the lower border of the spinous process of the fifth thoracic vertebra.

Xuanli (GB 6) (懸厘)

Within the hairline, at the junction of the lower 1/4 and upper 3/4 of the distance between *Touwei* (St 8) and *Qubin* (GB 7).

Xuanzhong (GB 39) (懸鐘)

3 *cun* above the tip of the external malleolus, in the depression between the posterior border of the fibula and the tendons of m. peroneus and brevis.

Xuehai (Sp 10) (血海)

When the knee is flexed, the point is 2 *cun* above the mediosuperior border of the patella, on the bulge of the medial portion of m. quadriceps femoris.

Yangbai (GB 14) (陽白)

On the forehead, 1 *cun* directly above the midpoint of the eyebrow.

Yanggu (SI 5) (陽谷)

At the ulnar end of the transverse crease on the dorsal aspect of the wrist, in the depression between the styloid process of the ulnar and the triquetral bone.

Yanglingquan (GB 34) (陽陵泉)

In the depression anterior and inferior to the head of the fibula.

Yangxi (LI 5) (陽溪)

On the radial side of the wrist. When the thumb is tilted upward, it is in the depression between the tendons of m. extensor pollicis longus and brevis.

Yaoshu (Du 2) (腰俞)

In the hiatus of the sacrum.

Yifeng (SJ 17) (翳風)

Posterior to the lobule of the ear, in the depression between the mandible and mastoid process.

Yinbai (Sp 1) (隱白)

On the medial side of the great toe, 0.1 *cun* posterior to the corner of the nail.

Yindu (K 19) (陰都)

4 *cun* above the umbilicus, 0.5 *cun* lateral to *Zhongwan* (Ren 12).

Yingxiang (LI 20) (迎香)

In the nasolabial groove, at the level of the midpoint of the lateral border of ala nasi.

Yinlingquan (Sp 9) (陰陵泉)

On the lower border of the medial condyle of the tibia in the depression on the medial border of the tibia.

Yintang (Extra 2) (印堂)

Midway between the medial ends of the two eyebrows.

Yinxi (H 6) (陰郄)

When the palm faces upward, the point is on the radial side of the tendon of m. flexor carpi ulnaris, 0.5 *cun* above the transverse crease of the wrist.

Yongquan (K 1) (涌泉)

On the sole, in the depression when the foot is in plantar flexion, approximately at the junction of the anterior third and posterior two thirds of the sole.

Yuji (L 10) (魚際)

On the radial aspect of the midpoint of the first metacarpal bone, on the junction of the red and white skin.

Yuyao (Extra 5) (魚腰)

At the midpoint of the eyebrow.

Yuzhen (B 9) (玉枕)

1.3 *cun* lateral to *Naohu* (Du 17), on the lateral side of the superior border of the external occipital protuberance.

Zanzhu (B 2) (攒竹)

On the medial extremity of the eyebrow, or on the supraorbital notch.

Zhaohai (K 6) (照海)

In the depression of the lower border of the medial malleolus, or 1 *cun* below the medial malleolus.

Zhengying (GB 17) (正營)

1.5 *cun* posterior to *Muchuang* (GB 16), on the line joining *Toulingqi* (GB 15) and *Fengchi* (GB 20).

Zhibian (B 54) (秩邊)

Directly below the belly of m. gastrocnemius, on the line joining *Weizhong* (B 40) and tendo calcaneus, about 8 *cun* below *Weizhong* (B 40).

Zhigou (SJ 6) (支溝)

3 *cun* above *Yangchi* (SJ 4), between the radius and ulna, on the radial side of m. extensor digitorum.

Zhiyang (Du 9) (至陽)

Below the spinous process of the seventh thoracic vertebra, approximately at the level with the inferior angle of the scapula.

Zhiyin (B 67) (至陰)

On the lateral side of the small toe, about 0.1 *cun* posterior to the corner of the nail.

Zhongchong (P 9) (中冲)

In the center of the tip of the middle finger.

Zhongfeng (Liv 4) (中封)

1 *cun* anterior to the medial malleolus, midway between *Shangqiu* (Sp 5) and *Jiexi* (St 4), in the depression on the medial side of the tendon of m. tibialis anterior.

Zhongji (Ren 3) (中柱)

On the midline of the abdomen, 4 *cun* below the umbilicus.

Zhongwan (Ren 12) (中脘)

On the midline of the abdomen, 4 *cun* above the umbilicus.

Zhongzhu (K 15) (中渚)

1 *cun* below the umbilicus, 0.5 *cun* lateral to *Yinjiao* (Ren 7).

Zhongzhu (SJ 3) (中渚)

When the fist is clenched, the point is on the dorsum of the hand between the fourth and fifth metacarpal bones, in the depression proximal to the metacarpophalangeal joint.

Zulingqi (GB 41) (足臨泣)

In the depression distal to the junction of the fourth and fifth metatarsal bones, on the lateral side of the tendon of m. extensor digiti minimi of the foot.

Zusanli (St 36) (足三里)

3 *cun* below *Dubi* (St 35), one finger-breadth from the anterior crest of the tibia, in m. tibialis anterior.

APPENDIX III

Figure of Point for Acute Syndromes

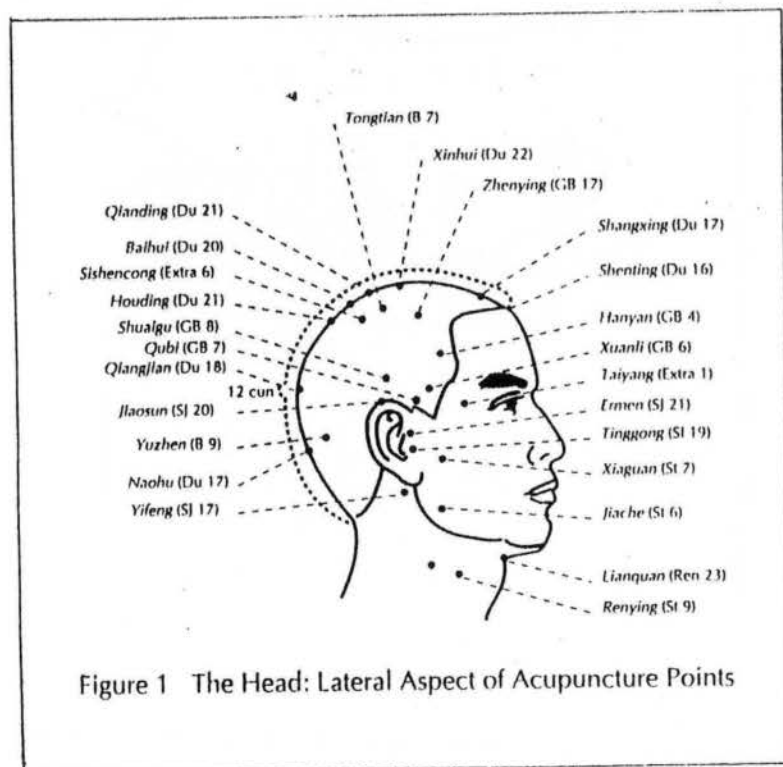
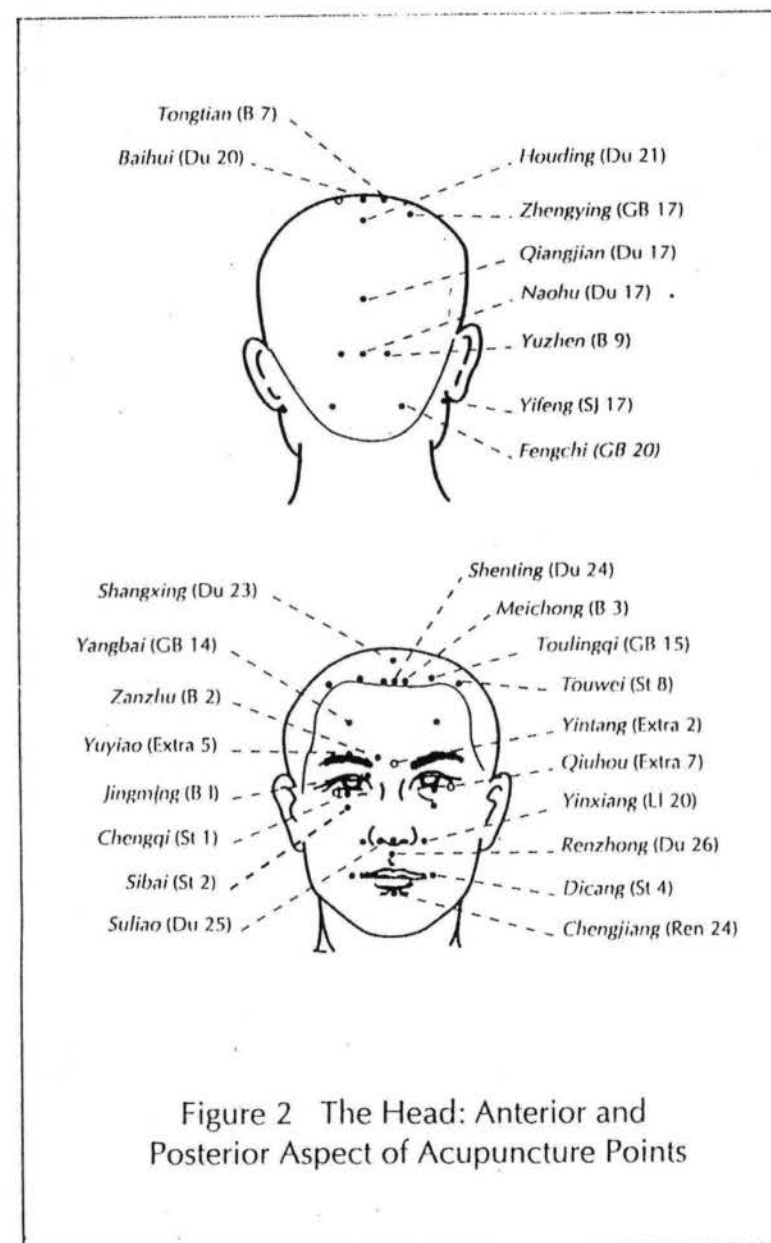


Figure of Point for Acute Syndromes

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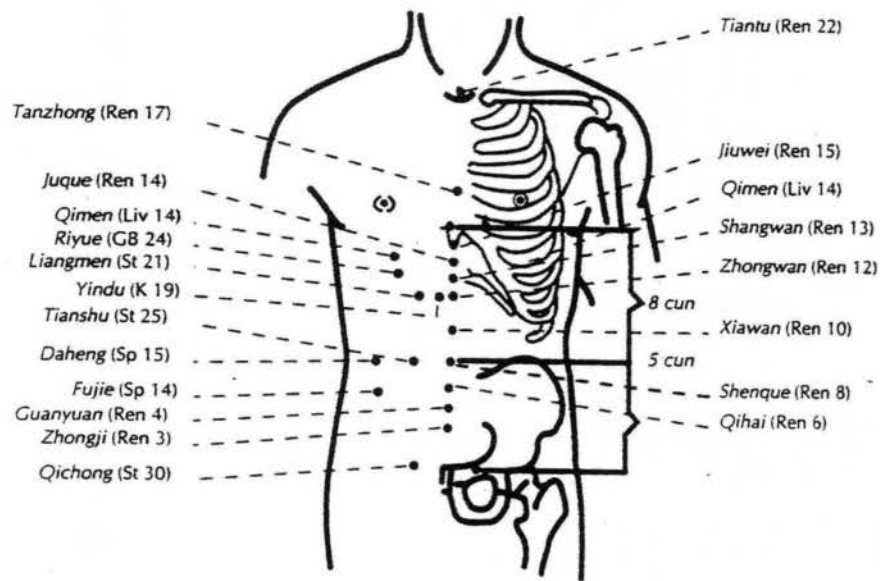


Figure 3 Thorax and Abdomen: Anterior Aspect of Acupuncture Points

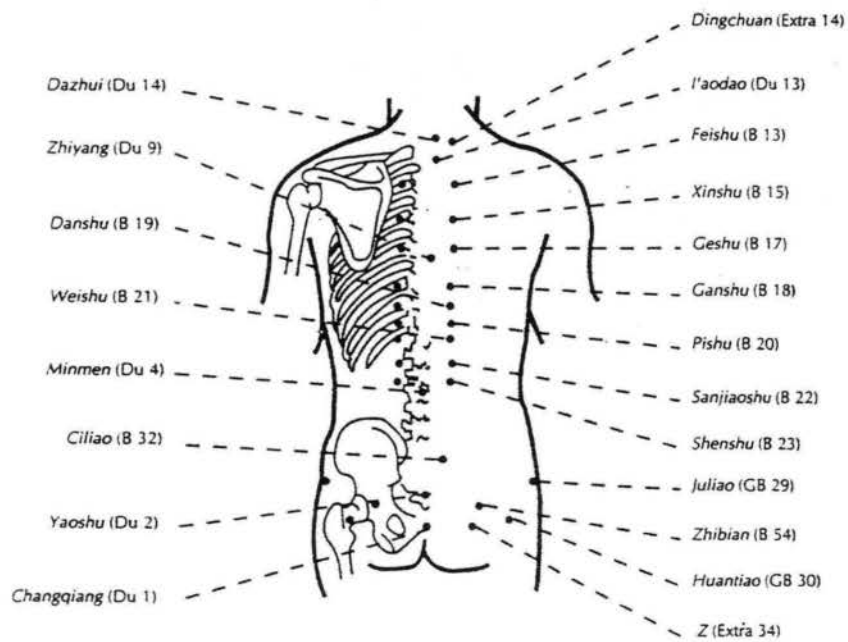
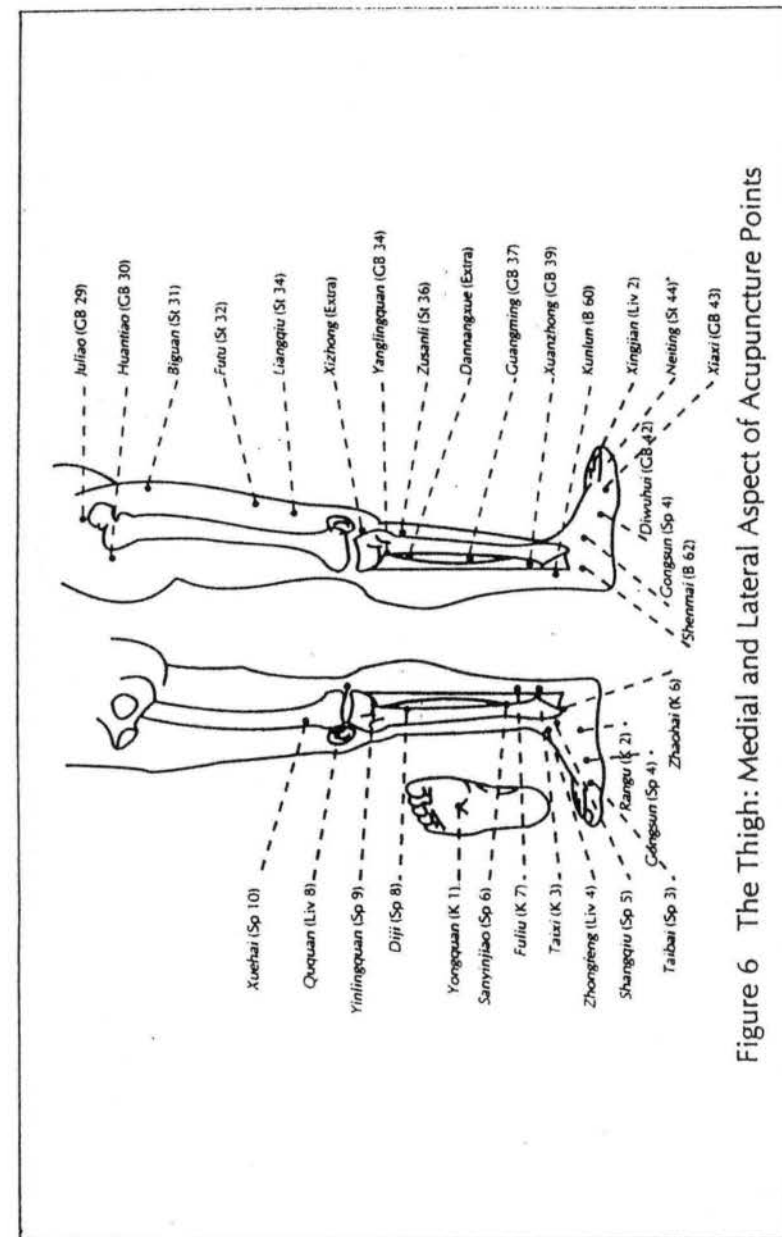
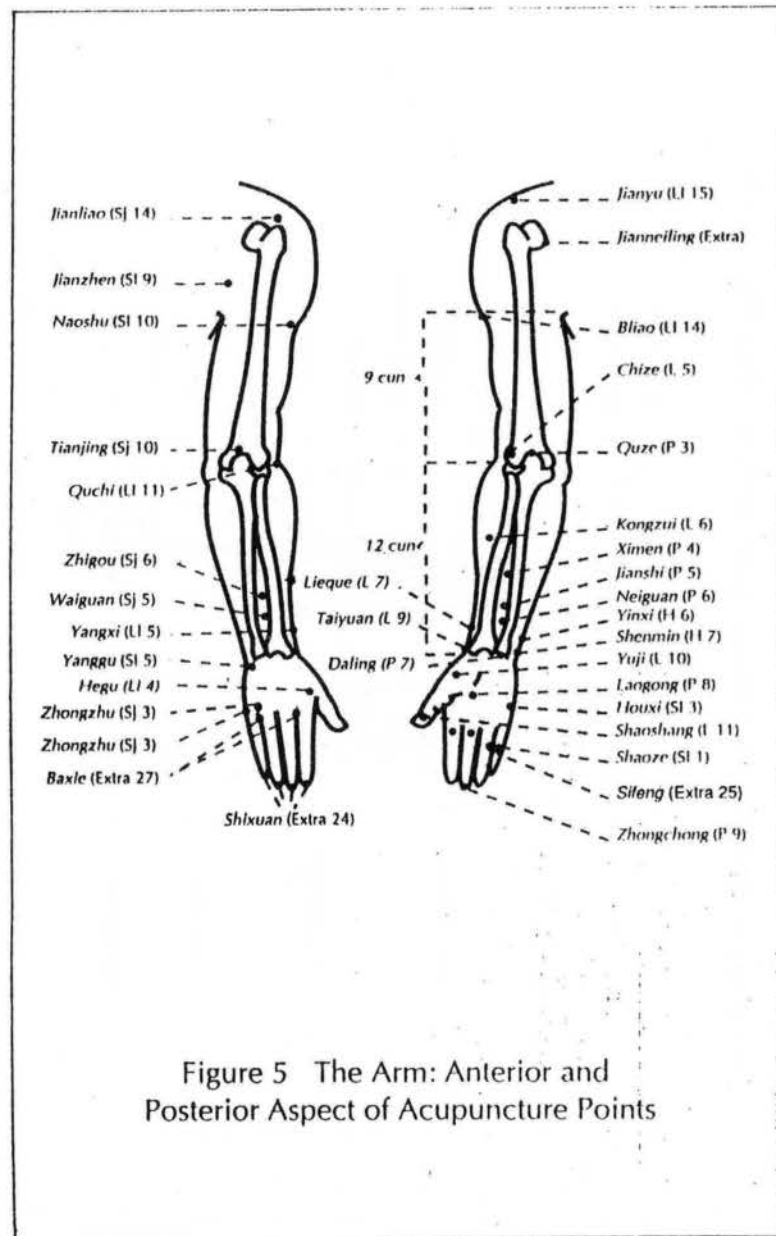


Figure 4 The Back: Posterior Aspect of Acupuncture Points



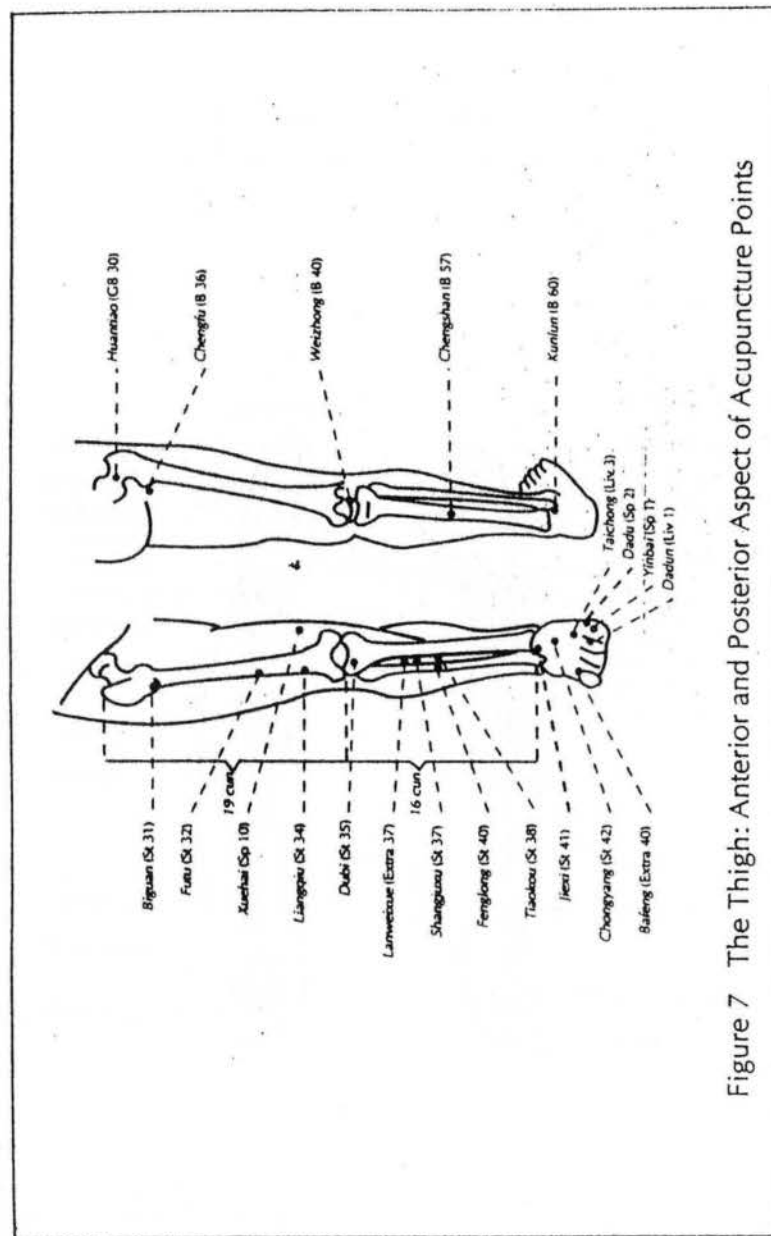


Figure 7 The Thigh: Anterior and Posterior Aspect of Acupuncture Points

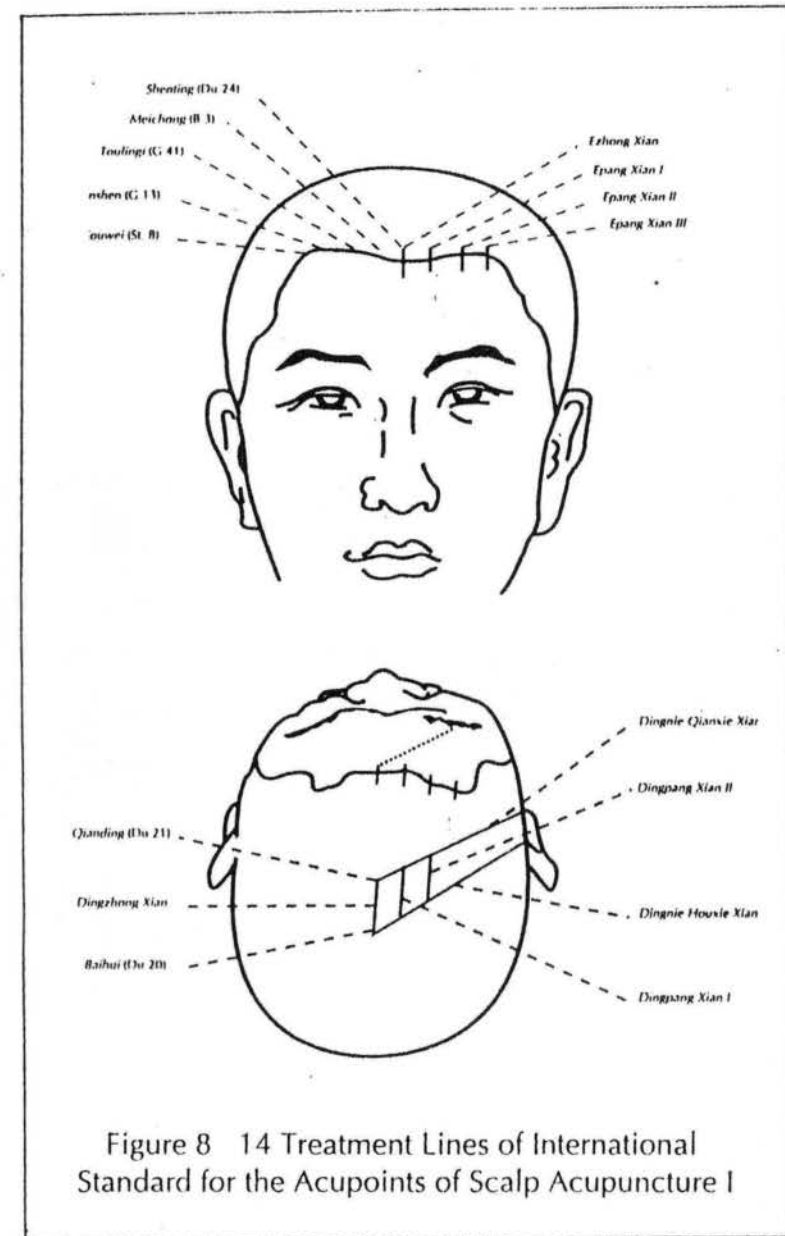


Figure 8 14 Treatment Lines of International Standard for the Acupoints of Scalp Acupuncture I

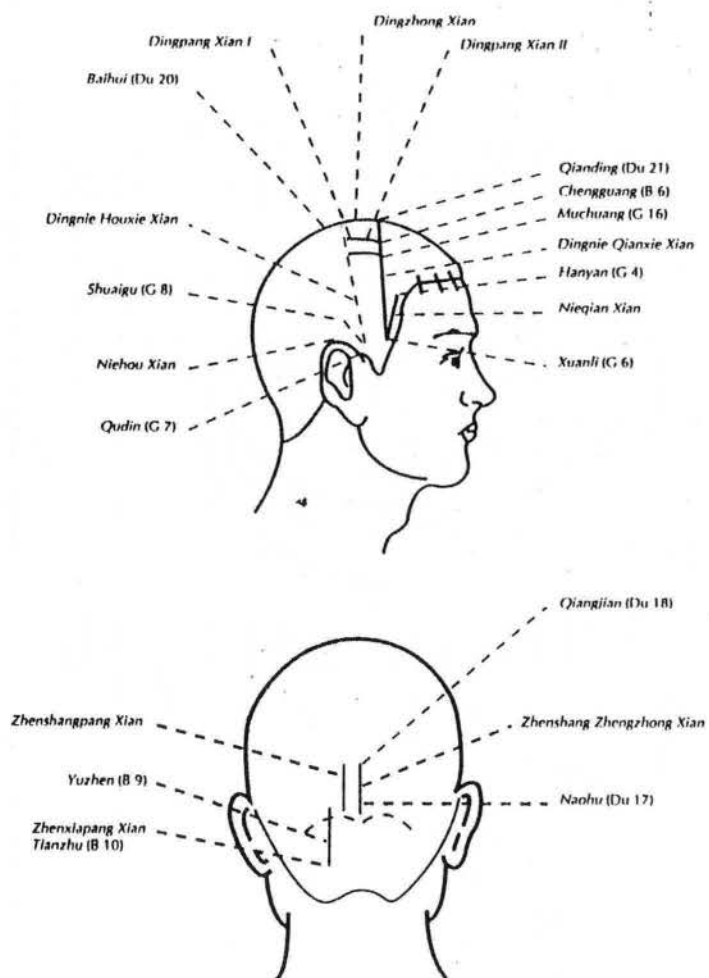


Figure 9 14 Treatment Lines of International Standard for the Acupoints of Scalp Acupuncture II

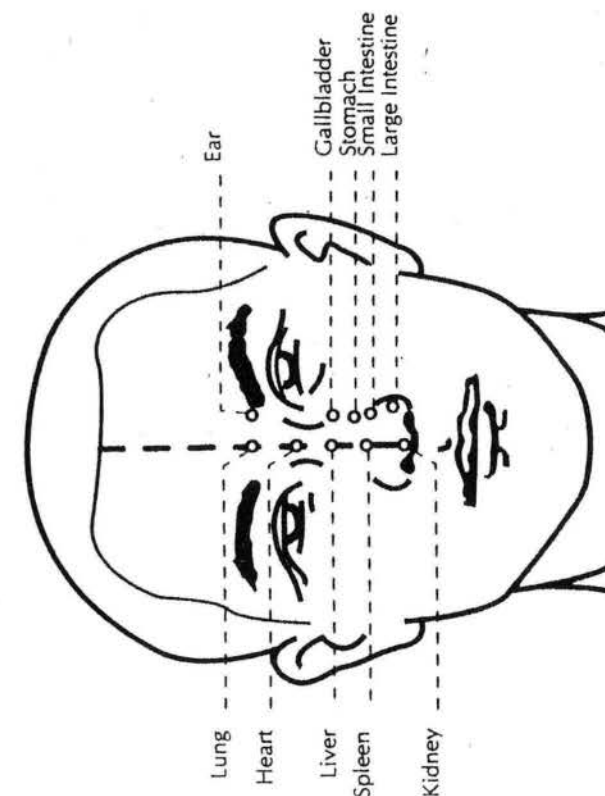


Figure 10 The Face: Schematic Diagram of Acupuncture Points

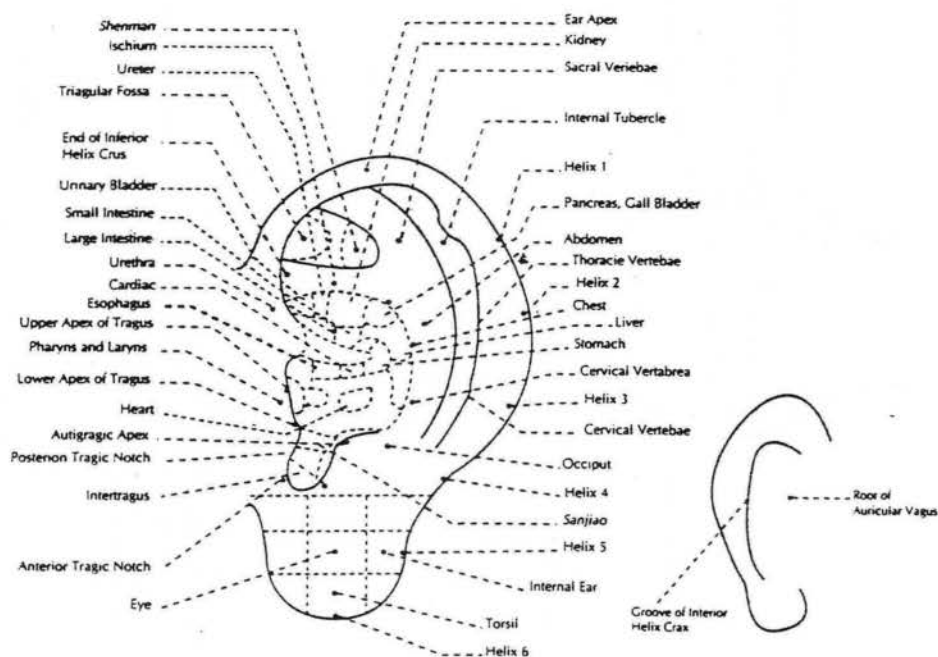


Figure 11 Schematic Diagram of Distribution of Auricular Points

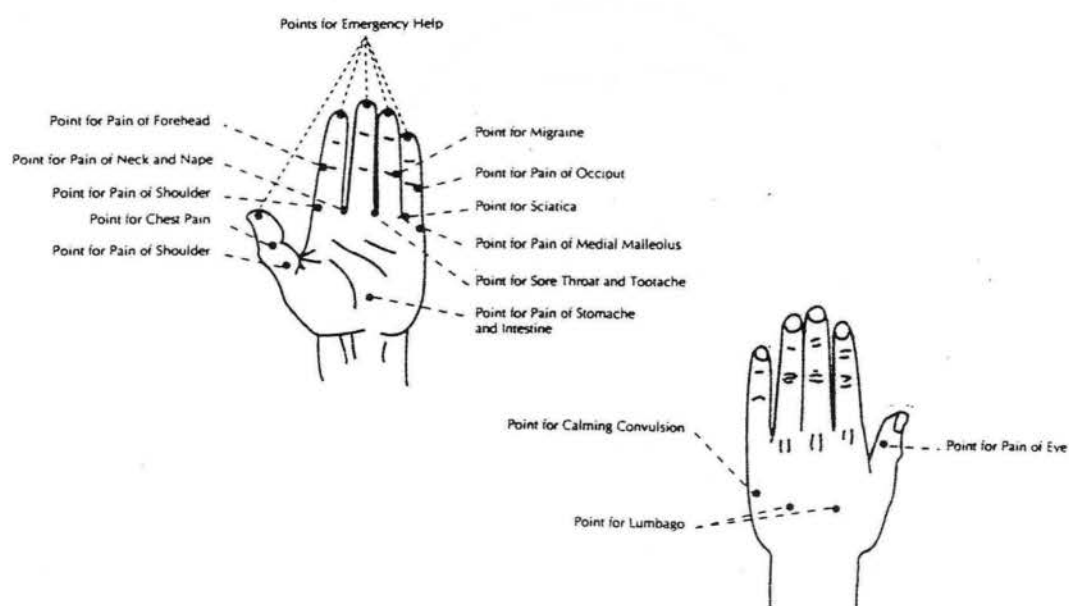


Figure 12 The Hand: Palmar and Dorsal Aspect of Acupuncture Points



Figure 13 Schematic Diagram of Acupuncture Points on the Plantar Surface of the Foot

Translator's Postscript

Words sometimes are inadequate to express the amount of gratitude in proportionate to the magnitude of kindness received. I wish to thank Professor Mingqing Zhu for inviting me to author the translation. I am indebted to Mr. Yuansheng Zhang, M. Sc. for contributing his efforts in preparing the text; to Mrs. Deborah C. Wong, R.N., B.S. and Mrs. Elisabeth C. Devy, M.B.A. who gave the manuscripts a thorough scrutiny and I gratefully acknowledge the valuable service of Miss Kara K. Chen, J.D. for checking the final proof of this book; to Dr. Eva Mun-wa Chau, former President of the California Certified Acupuncturist Association, who guided the book through and lastly to the Chinese Scalp Acupuncture Centre of U.S.A. For publishing this book, without them this book would not have been possible.

This book was written in haste during my hectic days at the Jinan University Guang Zhou Oversea's Chinese Hospital. Readers are cordially invited to point out the short-coming and mistakes of this book.

Dale Chow King (曹棣華) D.D.S., M.Sc.
Fall, 1991



About the Author

Prof. Mingqing Zhu born in Jiangsu, China, 1948, was one of the first graduates at the Acupuncture Department, Shanghai Institute of Chinese Medicine in 1964. After graduation, he worked in Guizhou, Zhejiang and Beijing as clinical doctor, instructor and researcher, and as associate professor of the Beijing Acupuncture Institute in 1987. Upon invitation, Prof. Zhu visited the U.S., Japan, Hongkong, Taiwan, the Philippines and Singapore on a lecture demonstration and workshop tour, and was warmly received everywhere, leaving behind a chain of Zhu's Scalp Acupuncture Research Centers in Japan and the U.S. In 1990, he settled in San Francisco, and joining with Dr. Eva Mun-wa Chau, former President of the California Certified Acupuncturists Association, established The Chinese Scalp Acupuncture Center of U.S.A. in San Francisco.

Prof. Zhu's publications includes *Zhu's Scalp Acupuncture, Text-book on Acupuncture, A Clinical Practice Handbook for Acupuncturists, A Compilation of the New Medical Therapy, Scalp Point Acupuncture and A Handbook for Treatment of Acute Syndromes by Using Acupuncture and Moxibustion*. At present, the *Zhu's Scalp Acupuncture* has been translated into Japanese and English. The *Handbook for Treatment of Acute Syndromes by Using Acupuncture and Moxibustion* also has been translated in English.



About the Translator

Dr. Dale Chow King borned in Canton, China, Studied traditional Chinese medicine in 1939-1941 at the Bow-yuen Chinese College in Hongkong. Returned to America in 1942 and enter the University of Southern California, College of Dentistry, graduating with B.S. and D.D.S. degree in 1947. After graduation, he was appointed as an instructor of Anatomy in the Anatomy Department, College of Dentistry, University of California at the San Francisco campus in 1947-1950. Returned to University of Southern California, graduate School of Orthodontics and recieved his M.Sc. degree in 1952.

A veteran of the Sino-Japanese and Korean War, he later settled in San Francisco and practice dentistry for over 30 years. At the present, he is completing his

M.B. degree studies at the Jinan University, School of Medicine Guangzhou, China. Eva Mun-wa Chau, former President of the California Certified Acupuncturists Association, is an acupuncture specialist in America and also a wife of the translator. After meeting Prof. Zhu, admiring his unique method and the amazing results of his treatments, decided to propagate the Zhu's Scalp Acupuncture Method of Treatment thru out the world. The two text, the *Zhu's Scalp Acupuncture* and the *Handbook of Treatment of Acute Syndromes by Using Acupuncture and Moxibustion*, has been translated by the translator and his colleague.