



# Latest Research

June 2009

## Pubmed

1. **Low-frequency Electro-Acupuncture and Physical Exercise Decrease High Muscle Sympathetic Nerve Activity in Polycystic Ovary Syndrome.**  
Stener-Victorin E, Jedel E, Janson PO, Sverrisdottir YB.  
Am J Physiol Regul Integr Comp Physiol. 2009 Jun 3. [Epub ahead of print]
2. **Efficacy of Acupuncture as a Treatment for Chronic Shoulder Pain.**  
Lathia AT, Jung SM, Chen LX.  
J Altern Complement Med. 2009 Jun 2. [Epub ahead of print]
3. **[Observation on therapeutic effect of surrounded needling therapy on acute gouty arthritis].**  
Xie XQ, Cao YX, Li F, Meng Y, Deng L.  
Zhongguo Zhen Jiu. 2009 May;29(5):375-7. Chinese.
4. **[Clinical observation on acupuncture regulating "double vitality" for treatment of insomnia].**  
Ruan JW.  
Zhongguo Zhen Jiu. 2009 May;29(5):371-3. Chinese.
5. **[Observation on therapeutic effect of Chuzhen therapy on insomnia].**  
Hu YP, Li H, Yin C, Wang YJ, Luo R.  
Zhongguo Zhen Jiu. 2009 May;29(5):365-9. Chinese.
6. **[Clinical observation on acupuncture for treatment of chronic atrophic gastritis].**  
Gu W, Hu QC.  
Zhongguo Zhen Jiu. 2009 May;29(5):361-4. Chinese.
7. **[Observation on therapeutic effect of acupuncture on stroke by "Najia method of Ziwu Liuzhu"].**  
Liu DR, Hao SF, Liu ZY.  
Zhongguo Zhen Jiu. 2009 May;29(5):353-6. Chinese.
8. **[Multi-central randomized controlled study on electroacupuncture at Fenglong (ST 40) for regulating blood lipids].**  
Xie JP, Liu GL, Qiao JL, Gu Q, Gai YN, Huang SF, Gao AA, Zhou Y, Li XH, Wang CY, Liu RQ, Jia JJ.  
Zhongguo Zhen Jiu. 2009 May;29(5):345-8. Chinese.
9. **A prospective randomized placebo-controlled study of the effect of acupuncture in infertile patients with severe oligoasthenozoospermia.**  
Dieterle S, Li C, Greb R, Bartsch F, Hatzmann W, Huang D.  
Fertil Steril. 2009 Apr 24. [Epub ahead of print]
10. **Acupuncture for Alcohol Dependence: A Systematic Review.**  
Cho SH, Whang WW.  
Alcohol Clin Exp Res. 2009 Apr 30. [Epub ahead of print]

11. **The effects of acupuncture stimulation at PC6 (Neiguan) on chronic mild stress-induced biochemical and behavioral responses.**  
Kim H, Park HJ, Han SM, Hahm DH, Lee HJ, Kim KS, Shim I.  
Neurosci Lett. 2009 May 7. [Epub ahead of print]
12. **Acupuncture for Treating Acute Attacks of Migraine: A Randomized Controlled Trial.**  
Li Y, Liang F, Yang X, Tian X, Yan J, Sun G, Chang X, Tang Y, Ma T, Zhou L, Lan L, Yao W, Zou R.  
Headache. 2009 Apr 27. [Epub ahead of print]

## Other databases

1. Bijak M.  
**Case report: Male patient, status after cardiac infarction, pain in left arm and shoulder, anxiety disorder and panic attacks.**  
Revista Internacional de Acupuntura. 2(2)(pp 119-122), 2008.

### Abstract

**Background:** A 54-year-old male patient suffered an anterior wall myocardial infarction in 2003. Although his physical condition had stabilised, he complained of recurrent pains in his left shoulder and arm. In addition severe anxiety panic attacks and sleep disorder arose after the infarction which affected the patient so greatly that he no longer ventured to leave his house.

**Objective:** Improvement in his general condition so that he can participate again in social.

**Methods:** Acupuncture after careful medical and pharmacological treatment.

**Results:** The results of western medical investigations, such as stress electrocardiogram and blood tests did not show any abnormalities. Apart from muscle-relaxing and psychopharmacological agents, which the patient had already discontinued on his own initiative, psychotherapy seemed, from the standpoint of orthodox medicine to be indicated. At this point the patient decided in favour of acupuncture. After four weekly sessions of acupuncture his sleep improved and the intensity of the pain was reduced by 50 %. His anxiety and his refusal to leave his house changed only after eight weeks of therapy.

**Conclusion:** Acupuncture can as a holistic and regulatory treatment complement orthodox medicine even in therapy-resistant patients, and can significantly improve the quality of life.

2. Bijak M.  
**Possibilities of treatment by acupuncture and related techniques for psychosomatic disorders - The treatment of the prostate received the worst rating.**  
Revista Internacional de Acupuntura. 2(2)(pp 92-101), 2008.

### Abstract

**Objective:** Specialist in various fields who are experienced in TCM and psychotherapy received a questionnaire to evaluate the results of TCM therapy for different psychosomatic disorders.

**Methods:** The questionnaire included three groups of disorders: 1) illnesses with pathologic findings, which were triggered by psychosocial factors; 2) so-called functional diseases without organic diagnostic findings, which had arisen because of adverse psychological factors, and 3) illnesses which manifest themselves primarily in psychological symptoms according to ICD 10 group F.

**Results:** In the first group problems of the gastrointestinal region, such as irritable bowel syndrome, are very frequently triggered by psychological factors and can be treated successfully. TB of the prostate received the worst rating. In group two vertigo, headache, tiredness and functional problems of the musculoskeletal system are most amenable to treatment. Treatment with acupuncture is most effective with dysmenorrhoea. In the third group (behavioural disorders and/or personality disorders ICD Group F) only sleep disorders can be treated adequately with acupuncture, which must be supplemented by psychotherapy or relaxation techniques.

**Discussion:** Psychosomatic disorders are represented in almost every discipline of medicine. Accordingly, there is a wide variety of diagnoses. According to the experts there is no difference with respect to TB whether it manifests itself in a functional way or in organic changes. Acupuncture is supposed to be particularly suitable for the treatment of functional disorders, in which no organic changes have been found. Perhaps this is because the specialists have a comprehensive training, do not often use just the one therapeutic method, but a combination of orthodox methods, such as psychotherapy and/or relaxation techniques, such as autogenic training, as a necessary supplement to acupuncture.

**Conclusion:** Only few experts found time to return the questionnaire. Despite this a general trend became apparent. Acupuncture on its own is a good physical treatment for patients, but very often has to be supplemented with western methods, such as psychotherapy.

3. Krenn H.

**Acupuncture may improve vision in patients with age-related macular degeneration (AMD): An observational study.**

Revista Internacional de Acupuntura. 3(1)(pp 26-29), 2009. Date of Publication: March 2009.

**Abstract**

**Background:** Age-related macular degeneration (AMD) is a disease associated with aging that gradually destroys sharp, central vision. Treatment options for AMD are limited and often vision loss cannot be prevented. The present study was performed to evaluate the effects of acupuncture treatment on vision in AMD patients.

**Methods:** A total of 328 patients with a clinical diagnosis of AMD were treated over a period of 2 weeks (Monday to Friday) with acupuncture given two times per day with a minimum time of 60 min between treatments. Vision was evaluated at baseline, after one and after two weeks of treatment by a distant (3 m) and at near (40 cm) standard reading test.

**Results:** Median visual acuity improved during the first treatment week at both distances ( $p < 0.001$ ). Further improvement of visual acuity was observed during the second week ( $p < 0.001$ ). From baseline examination to the final examination, vision at 3 m distance improved in 145 (44.2 %) patients and vision at 40 cm distance improved in 290 (88.4 %) patients.

**Conclusion:** We conclude that acupuncture may be a useful treatment option in patients with AMD. Double-blinded, randomized sham-controlled studies will be necessary for final proof of action. copyright 2009 Elsevier Espana S.L.

4. Dorsher P.T. Fleckenstein J.

**Trigger points and classical acupuncture points part 1: Qualitative and quantitative anatomic correspondences.**

Revista Internacional de Acupuntura. 3(1)(pp 15-25), 2009. Date of Publication: March 2009.

**Abstract**

**Background:** Data from a recently published study suggest that substantial anatomic, clinical, and physiologic overlap of myofascial trigger points (mTrPs) and acupoints exists in the treatment of pain disorders.

**Objective:** To evaluate the anatomic relationships between classical acupoint locations and those of mTrPs both qualitatively and quantitatively.

**Methods:** Graphics software was used to demonstrate the different muscle layers of a virtual, digitized human cadaver. The locations of 255 "common" mTrPs described in the Trigger Point Manual were superimposed as a separate layer to these graphics as were the locations of the 361 classical acupoints and the meridians they exist on. The relationships of the anatomic locations of acupoints and meridians to those of muscles and common mTrPs could then be directly visualized. Classical acupoints and mTrPs that entered the same muscle regions and were physically closest to each other, as confirmed by acupuncture and human anatomy references, were termed "anatomically corresponding" point pairs. A quantitative analysis of these anatomically corresponding mTrP-acupoint pairs was also performed.

**Results:** Of 255 common mTrPs, 238 (93.3%) had anatomically corresponding classical acupoints. Quantitatively, 89 (37%) of these 238 corresponding mTrP-acupoint pairs were estimated to be within 1 cm of each other, 107 point pairs (45%) within 12 cm of each other, and another 32 point pairs (13%) within 23 cm of each other. Triggeracupuncture point correspondences would rise to 95.7% if six other common mTrPs are considered anatomically corresponding.

**Conclusions:** Analysis of the relationships of the anatomic locations of mTrPs and acupoints while adhering to the modern conceptualization of myofascial pain as a regional muscle disorder demonstrates [less-than or equal to] 93.3% anatomic correspondence of common mTrPs to classical acupoints. copyright 2009 Elsevier Espana S.L.

5. Linde K. Weidenhammer W. Streng A. Melchart D.  
**Adverse effects and complications of acupuncture treatment: Results from a large-scale, nationwide observational study.**  
Revista Internacional de Acupuntura. 3(1)(pp 6-14), 2009. Date of Publication: March 2009.

**Abstract**

**Background and objective:** Within a large research and reimbursement program by German social health insurance the effectiveness and safety of acupuncture for the treatment of patients suffering from chronic pain was investigated. We provide here the results regarding safety aspects from a large observational study.

**Methods:** Safety aspects were investigated in three ways: physicians were asked to make a global assessment of safety and to report adverse effects for all 503,397 treatment cycles documented between July 2001 and June 2003. Serious adverse effects had to be reported directly to the research center and were collected up to December 2004. In addition, a sample of 6,140 patients was asked about the side effects they had experienced.

**Results:** Physicians documented at least one adverse effect in 7.8% of all patients, the most frequent being needling pain in 3.9%. Serious adverse events were reported in 17 cases, the most frequent event being pneumothorax (5 cases). 9.3% of patients reported side effects, a quarter of these were considered as truly bothersome. The most frequent side effects reported by patients were pain, fatigue and circulatory disturbances.

**Conclusions:** Serious adverse effects of acupuncture are very rare; however, minor side effects occur frequently. Overall, acupuncture provided by trained physicians is a comparably safe therapy.

6. Park S.-H. Kim J. Koo T.-H.  
**Magneto-acupuncture stimuli effects on ultra-weak photon emission from hands of healthy persons.**  
JAMS Journal of Acupuncture and Meridian Studies. 2(1)(pp 40-48), 2009.

**Abstract**

We investigated ultra-weak photon emissions from the hands of 45 healthy persons before and after magneto-acupuncture stimuli. Photon emissions were measured by using two photomultiplier tubes in the spectral range of UV and visible. Several statistical quantities such as the average intensity, the standard deviation, the S-value, and the degree of asymmetry were calculated from the measurements of photon emissions before and after the magneto-acupuncture stimuli. The distributions of the quantities from the measurements with the magneto-acupuncture stimuli were more differentiable than those of the groups without any stimuli and with the sham magnets. We also analyzed the magneto-acupuncture stimuli effects on the photon emissions through a year-long measurement for two subjects. The individualities of the subjects increased the differences of photon emissions compared to the above group study before and after magnetic stimuli. The changes on the ultra-weak photon emission rates of hand for the magnet group were detected conclusively in the quantities of the averages and standard deviations.

7. Cheing G.L.-Y. Wan S. Lo S.K.

**The use of auricular examination for screening hepatic disorders.**

JAMS Journal of Acupuncture and Meridian Studies. 2(1)(pp 34-39), 2009.

**Abstract**

Researches on auricular acupuncture (AA) have examined mainly its treatment effects. This study aimed to investigate the accuracy and precision of using auricular examination (AE) as a complementary diagnostic tool for screening hepatic disorders. Twenty patients suffering from liver dysfunction and 25 controls aged 18-60 years were recruited from an acute hospital. Participants were examined using three AE methods including visual inspection, electrical skin resistance measurement, and tenderness testing on the liver AA zone of both ears. Significant differences were found in visual inspection and electrical skin resistance on the AA zones between the two groups. Patients suffering from liver dysfunction tended to have at least one abnormality in skin color, appearance, presence of papules, abundance of capillary and desquamation on the ear (Relative Risk-Right ear: RR=2.9, 95% confidence interval (CI) 1.4, 6.2; Left: RR=1.8, 95% CI, 1.01, 3.1). The sensitivity for visual inspection was 0.7 for both ears; specificity was 0.76 for the (R) and 0.6 for the (L) ear. The mean difference in electrical skin resistance was 4.3Mfi (95% CI, 1.7, 6.9) for the (L) ear; 4.5MQ (95% CI, 1.5, 7.6) for the (R) ear. Our results suggest that malfunction of the liver appeared to be reflected by the presence of morphological changes on the liver AA zone. Visual inspection and electrical skin resistance on the liver AA zone are potentially sensitive to screen hepatic disorders.

8. Lee Y.-H. Ryu Y.-H. Jung B.

**Investigation of electrical responses to acupuncture stimulation: The effect of electrical grounding and insulation conditions.**

JAMS Journal of Acupuncture and Meridian Studies. 2(1)(pp 49-55), 2009.

**Abstract**

Acupuncture in Oriental medicine has been widely used as a core therapeutic method due to its minimal side-effects and therapeutic efficacy. However, the electrical response to acupuncture stimulation (ERAS) has not been clearly studied under acupuncture conditions that might affect the efficacy of acupuncture therapy. In this study, the ERAS was objectively investigated by measuring meridian electric potentials (MEPs) when the electrical grounding conditions of the operator and subject were varied, and when the insulation conditions of acupuncture needle were varied. MEPs between Sang-geoheo (ST37) and Ha-geoheo (ST39) of the Stomach Meridian (ST) were measured by stimulating Jok-samni (ST36) with an acupuncture needle. For non-insulated acupuncture stimulation (NIAS), the average MEP peak was 148.6+/-20.6 when neither the operator nor the subject were electrically grounded, 23.1 +/-8.8 when the subject only was electrically grounded, 348+/-76.8 when the operator only was electrically grounded, and 19.9+/- 4.7 when both the operator and the subject were electrically grounded. The MEPs presented various magnitudes and patterns depending on the electrical grounding conditions. The MEP pattern was very similar to that of the charge and discharge of a capacitor. For insulated acupuncture stimulation (IAS), the average MEP peak was 20+/-4 in all electrical grounding conditions, which is not a significant electric response for acupuncture stimulation. In terms of electricity, this study verified that acupuncture therapy might be affected by acupuncture conditions such as (1) the electrical grounding condition of the operator and the subject and (2) the insulation condition of the acupuncture needle.