

ACTCM LIBRARY NEWSLETTER

No. 6
December 2009

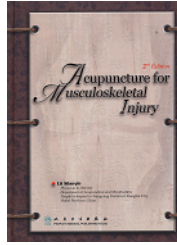
<http://www.actcm.edu>
library@actcm.edu

NEWLY ACQUIRED BOOKS



The Acupuncture Handbook of Sports Injuries & Pain: A Four Step Approach to Treatment / by Whitfield Reaves & Chad Bong; Hiddn Needle Press, 2009.

The Acupuncture Handbook of Sports Injuries and Pain is a clinical manual that integrates traditional Chinese acupuncture with western orthopedic and sports medicine. It clearly outlines the diagnosis, assessment, and treatment protocol for 25 common sports injuries and pain syndromes. Using a simple Four Step approach, treatment for each condition is organized into 10 easy-to-follow techniques. The Acupuncture Handbook brings new insight and intrigue into treating injuries and pain. This spiral-bound book is designed for easy use by the practitioner of acupuncture, and may serve as a clinical guide for diagnosis, assessment, and treatment. Section I presents a unique Four Step Approach, which includes 10 techniques of acupuncture. Section II covers the diagnosis and assessment of each of the 25 injuries, followed by acupuncture treatment and techniques using the Four Steps. Section III contains the appendices, with commentary on the techniques and protocols from the first two sections. Features: Includes common conditions such as plantar fasciitis, rotator cuff tendonitis, and arthritis of the knees and hip. Diagnosis and assessment is summarized from both western and Chinese medical perspectives. And typical orthopedic recommendations are clearly listed for each injury. The Acupuncture Handbook uses a simple Four Step approach, making point selection and needle technique simple, logical, and systematic. Treatment protocol includes trigger points, motor points, and other needle techniques not commonly discussed in the standard acupuncture texts. Detailed illustrations and descriptions allow for more precise treatment.



Acupuncture for Musculoskeletal Injury / by Shao-jie Lu; People's Medical Publishing House, 2008.

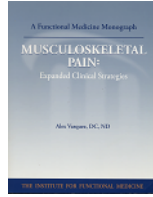
This book introduces the etiology and pathogenesis, diagnostic highlights, syndrome differentiation and treatment, selection of acupuncture points and therapeutic methods for 69 kinds of musculoskeletal injuries with commentaries, acupuncture points and clinical explanations. It also records the manipulation and needling techniques as well as the course of treatment. The final part describes the therapeutic efficacy, treatment time for the disease and recommended modifications. It not only introduces empirical therapeutic schemes of acupuncture and moxibustion, but also discusses the external application of Chinese medicinals for the diseases that do not respond well to acupuncture therapy.



Clinical Research & Application of Acupuncture & Tuina / by Song-he Jiang & Guan-hu Yang; People's Medical Publishing House, 2008.

This book is based on their former book *Chinese Acupuncture and Massage: A Concise Annotation*. It introduces the traditional Chinese medicine theory, clinical treatment techniques and modern research in Chinese medicine and biomedicine. The authors have also included their personal experience and some research. This book integrates ancient Chinese medicine with biomedicine by absorbing traditional Chinese philosophy and the ideas of evidence based medicine. Thus, this book continues to form a modern treatment system approach of multi-principles acupuncture therapy.

In addition, acupuncture and tuina share the same theory and a similar mechanism. Based on their clinical experience, these forms of treatment can be coordinated to treat most diseases. So, integration of their theory and application in this text makes this book more reasonable and practical. Thus, in this edition, the authors attempt to form a modern acupuncture and tuina treatment system.



Musculoskeletal Pain: Expanded Clinical Strategies / by Alex Vasquez; The Institute for Functional Medicine, 2008.

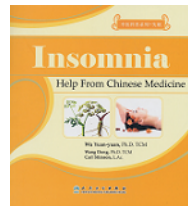
Musculoskeletal pain disorders are a major cause of human suffering, healthcare expenses, and lost productivity, yet conventional treatments for these disorders often have high rates of inefficacy and iatrogenesis in addition to their high costs. Education is needed to improve prevention, assist physicians in developing strategies for pain conditions, and provide an integrated, evidence-based model of care that includes not only drugs and surgery, but also manual therapies, nutritional and dietary approaches, botanical medicines, and acupuncture. This monograph responds to this urgent need for education and new approaches.



Integrative Rheumatology: Concepts, Perspectives, Algorithms, and Protocols / by Alex Vasquez; Integrative and biological medicine Research and Consulting, LLC, 2007.

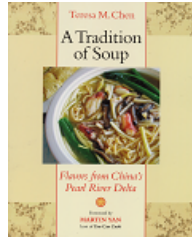
Integrative Rheumatology is a clinically-oriented textbook that extends beyond Integrative Orthopedics to outline treatment plans for autoimmune and systemic inflammatory disorders. Since approximately 1 of every 7 (14% of total) visits to a primary healthcare provider is for the treatment of musculoskeletal pain or dysfunction, every physician needs to have 1) knowledge of important concepts related to musculoskeletal medicine, 2) awareness of urgent and emergency conditions, 3) skills to competently perform orthopedic examination procedures and clinical assessments, 4) ability to interpret common laboratory tests, and 5) the knowledge and ability to design and implement effective treatment plans. Integrative Rheumatology empowers students and doctors with the insight necessary for the design and implementation of truly integrative treatment plans for conditions such as systemic lupus erythmatosus, rheumatoid arthritis, ankylosing spondylitis, psoriasis and psoriatic arthritis. Diagnostic, therapeutic, risk reduction and patient management strategies are emphasized throughout. Students in chiropractic and naturopathic medical colleges will find Integrative

Rheumatology to provide a needed blend of concepts as well as the practical how to information on patient management that is often neglected in other textbooks or which can only be obtained after years of clinical experience. This book will help you synthesize your courses in physical examination, manipulation, physiotherapy, nutrition, botanical medicine, neurology and therapeutic exercise into a cohesive set of skills that enables you to effectively help your patients overcome their musculoskeletal problems while you simultaneously promote wellness by looking at the bigger picture of their overall health rather than simply focusing on the problem. Integrative Rheumatology provides the information and citations to the research literature that you need in order to feel confident about your skills and the responsibilities that you will face as a healthcare provider. Clinicians of all disciplines whether ND, DC, DO, Lac, MD, PA, or NP will find the blend of research and clinical pearls helpful in their integrative management of patients with systemic autoimmune and rheumatic disorders. The text is abundantly referenced to textbooks and peer-reviewed biomedical journals. Integrative Rheumatology will give you a clinical advantage and the research justification to help treat your patients in the most natural, safe, and holistic means possible. Accessing the website provides links to updates and recently published articles by Dr. Vasquez.



Insomnia: Help from Chinese Medicine / by Yuan-yuan Wu, et al; People's Medical Publishing House, 2009.

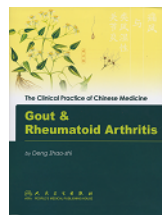
This clear and thorough book, designed especially for those with insomnia, introduces the basics of Chinese medicine, describes treatment methods used, gives helpful advice on diet and exercise, and takes you step-by-step through what being under the care of Chinese medicine will involve. This is not merely a text to help you understand an ancient healing art, but a manual that will prove useful to you on each step of your journey back to health.



A Tradition of Soup: Flavors from China's Pearl River Delta / by Teresa M. Chen; North Atlantic Books, 2009.

Through recipes that use time-honored medicinal ingredients, *A Tradition of Soup* provides a fascinating narrative of the Southern Chinese immigrants who came to the United States in large numbers during the last half century, the struggles they faced and overcame, and the soups they used to heal and nourish their bodies.

Following the Chinese approach to health, Teresa Chen, who was born into a family of food connoisseurs and raised by a gourmet cook, groups the recipes by seasons and health concerns according to Cantonese taxonomy: *tong* (simple broths, soups, and stews), *geng* (thickened soups), *juk* (rice soups or porridges), and *tong shui* (sweet soups), as well as noodle soups, wonton and dumpling soups, and vegetable soups. Also focusing on *dahn* (steaming) and *louhfo* (slow-cooking) soups associated with good health, the book features fresh, natural, and seasonal food. *A Tradition of Soup* highlights recipes that serve a wide range of purposes, from gaining or shedding weight to healing acne and preventing wrinkles. While some ingredients may seem foreign to Western readers, most are available in Chinese grocery stores. To help readers identify and procure these items, Chen provides a beautifully photographed ingredients glossary complete with Chinese names, pronunciation, and detailed descriptions.



The Clinical Practice of Chinese Medicine: Gout & Rheumatoid Arthritis / by Zhaozhi Deng; People's Medical Publishing House, 2008.

This book is an important component text in the series, The Clinical Practice of Chinese Medicine. The focus of this book is to provide effective complementary treatment methods for gout and rheumatoid arthritis, both chronic diseases that affect great numbers of people around the world.

Although current pharmaceutical approaches to treatment achieve a certain therapeutic effect, many side effects usually result. Systematic literature review shows that the application of Chinese medicine also results in a definite therapeutic effect, but with very few side effects.

The general symptoms in both conditions are associated with what is referred to in Chinese medicine as bi syndrome. Combined treatments utilizing Chinese medicinals, acupuncture, massage, and physical therapy show excellent results in reducing both pain and uric acid levels, while also improving joint function and rates of recurrence.

Features:

- Pattern differentiation and treatment with Chinese medicinals & acupuncture
- Clinical experience of renowned physicians
- Famous physicians' case studies
- Relevant contemporary research on pattern differentiation & formulas
- Selected quotes from classical texts

ARTICLE ABSTRACTS

Clinical Observation on Combined Warming Needle and Patented Chinese Medicine for Irritable Bowel Syndrome / by Yu-qi Chen & Xin-sheng Lai; Journal of Acupuncture and Tuina Science, Vol. 7(5), P. 274-277, 2009.

Objective: To evaluate the clinical efficacy and quality of life of combined warming needle and patented Chinese medicine for patients with irritable bowel syndrome (IBS) due to liver-qi stagnation with spleen deficiency.

Method: Sixty IBS cases were randomized into a treatment or control group by single-blind method. Warming needles on Tianshu (ST 25) AND Dachangshu (BL 25) combined with patented Chinese medicine were adopted for cases in the treatment group, whereas the patented Chinese medicine alone was adopted in the control group.

Results: The therapeutic efficacies in the two groups did not show substantial differences. The main symptoms were significantly improved after the treatment ($P < 0.01$). After 2 weeks of treatment, the cases in the treatment group obtained a better improvement than the control group ($P < 0.01$, $P < 0.05$) in the severity or frequency of abdominal pain, abdominal distension, restlessness, insomnia, anxiety, suspiciousness, and loose stools with a sense of incomplete emptying. The patient's quality of life was improved in both groups ($P < 0.01$).

Conclusion: Both treatment methods could improve the clinical symptoms and increase the patient's quality of life. The total effective rate in the treatment group was slightly higher than the control group. Also, the combined warming needle and Chinese herbs could improve the main symptoms in a faster way.

Clinical Observation on Scraping the Bladder Meridian for Prevention and Treatment of Bronchial Asthma / by Yu-ling Fan; Journal of Acupuncture and Tuina Science, Vol. 7(5), P. 278-279, 2009.

Objective: To observe the clinical effects of scraping method for preventing and treating bronchial asthma.

Methods: Thirty-eight cases were treated with scraping method on the Bladder Meridian once every 10-12 day, by follow up once every half a year, for 3 years continuously. The mean frequency of asthma acute attack was recorded every year.

Results: The annual frequency of acute attack of asthma before scraping method was (2.3 +- 1.3) times on average, and reduced to (0.6+- 0.4) times after scraping therapy.

Conclusion: Scraping therapy can effectively prevent the attack of bronchial asthma.

Tuina plus Cupping Therapy for 60 Cases of Infantile Cough / by Deng-hong Liu; Journal of Acupuncture and Tuina Science, Vol. 7(5), P. 280-282 , 2009.

Objective: To observe the clinical effect of tuina plus cupping therapy for infantile cough.

Methods: Sixty subjects were mainly treated with pinching and pushing the spine, coordinating with the tuina manipulations and cupping therapy based on syndrome differentiation.

Results: Among the 60 patients, 40 cases were cured and 20 cases got improved, the total effective rate was 100%.

Conclusion: Tuina plus cupping therapy works effectively on infantile cough and without adverse reactions.

Acupoints Volt-Ampere Characteristics of Patients with Qi Deficiency / by Jianzi Wei, et al; International Journal of Clinical Acupuncture, Vol. 18(2), P. 96-104, 2009.

Objective: To observe the change of volt-ampere specificity of acupoints of patients with Qi deficiency and to research the relationship; between acupoints function and the excess and deficiency of Qi and blood in human body.

Methods: A self-made high-sensitive detector for acupoint volt-ampere specificity was applied to detect the volt-ampere specificity at Taiyuan (LU0) and Taixi (KI3) or 33 patients with Qi deficiency and 77 healthy people.

Results: The volt-ampere curves of acupoints among healthy people and patients with Qi deficiency are nonlinear. The scanning beams from the high current to the low current did not overlap from that of the low current to the high current. From 2uA to 7 uA at many scanning spots, the resistance at Taiyuan (LU0) and Taixi (KI3) were significantly different in patients with Qi deficiency and were obviously lower than those of the healthy people.

Conclusion: Volt-ampere specificity of acupoints can reflect the change of Qi and blood in the human body. Profuse sweating and edema due to Qi deficiency might be the reason to bring about the decrease in resistance of acupoints of patients with Qi deficiency.

A Comparative Study Between Simple Bo's Abdominal Acupuncture and its Combination with Radiation by Electromagnetic Wave in Treating Chronic Gastritis / by To, Kin Man, et al; International Journal of Clinical Acupuncture, Vol. 18(2), P. 113-118, 2009.

Objective: To compare the curative effect between simple Bo's abdominal acupuncture and its combination with radiation by electromagnetic wave in treating chronic gastritis.

Methods: 60 patients with chronic gastritis were divided into 2 groups randomly with each group containing 30 patients. Patients in group 1, the treatment group, received the treatment of Bo's abdominal acupuncture and electromagnetic wave. Patients in group 2, the control group, received the treatment of simple Bo's abdominal acupuncture. The observation lasted for 4 weeks. The clinical curative effects of the two groups were compared, and the cured cases, the curative effect of different types and the scores of McGill Pain Scale were compared.

Results: There was not a significant difference in the curative effect between the treatment and control groups, but there were significant differences in the cured case numbers. The difference of the curative effect in different syndromes was obvious, but there was no difference in curing, deficiency heat and deficiency cold syndromes in the treatment group. After four week's of treatment, there were no differences in the McGill Pain Scale scores, however, notable differences did appear at the end of 2nd week.

Conclusion: Both simple Bo's abdominal acupuncture and the combination with electromagnetic wave radiation had a good effect on treating chronic gastritis. The combination methods could be used to treat both the heat and cold types by relieving pain and shortening the course of treatment.

Effects of Various Stimulation Methods on Bone Mineral Density in Patients with Primary Osteoporosis / by Gang Ouyang, et al; International Journal of Clinical Acupuncture, Vol. 18(2), P. 124-127, 2009.

Objective: To explore a method for increasing bone mineral density in the patient with primary osteoporosis.

Methods: Sixty-two cases of primary osteoporosis were randomly divided into the acupuncture group of 32 cases and the moxibustion group of 30 cases. They were treated by acupuncture or moxibustion at Zusanlu (ST 36), Guanyuan (CV4), Pishu (BL20), Shenshu (BL23), Taixi (KI3) and Sanyinjiao (SP6) respectively.

Results: Acupuncture or moxibustion both can increase the bone mineral density of lumbar vertebrae ($P < 0.01$, $P < 0.05$), with acupuncture being better than that of moxibustion ($P < 0.05$).

Conclusion: The therapeutic effect of acupuncture is superior to that of moxibustion in treatment of primary osteoporosis.

The Use of Cerebral Function Imaging to Develop Externalized Research on Obtaining the Arrival of Qi in Acupuncture / by Xia, Maoli, et al; International Journal of Clinical Acupuncture, Vol. 18(2), P. 135-138, 2009.

“De Qi” (Getting the Qi Sensation of the Arrival of Qi), is a unique phenomenon during the process of acupuncture, The description of “De Qi” has been relevant to a kind of subjective description of feeling so far. Research on the essential “De Qi” relatively focuses on the aspect of substance foundation that it generates. This passage will indicate that acupuncture “De Qi” can be defined as needling reaction in the encephalic region integrated by the cerebrum after needling interferes with the meridians in human body. It will further point out that Cerebral Function Imaging Technique and Pattern Recognition Intelligent Image Managing Technique should be integrated and develop externalized research on “De Qi”.

Acupuncture of Motor-Implicated Acupoints on Subacute Stroke Patients: An fMRI Evaluation Study / by Anson C.M. Chau, et al; Medical Acupuncture, Vol 21(4): 233-241, 2009.

Background: Motor impairment is common after stroke. Along with classic integrated physical and occupational therapy, acupuncture is also suggested as an adjunctive therapy.

Objective: To evaluate the effectiveness of acupuncture on upper limb motor recovery of patients with subacute stroke.

Design, Setting, and Patients: Eighteen subacute stroke patients, transferred from a regional acute hospital to a convalescent hospital for rehabilitation in Hong Kong, from March 2005 to November 2007. Two clinical and behavioral evaluations for motor function were given to each participant along with 2 functional magnetic resonance imaging (fMRI) scans.

Intervention: Patients were treated with acupuncture 3 times a week over 8 weeks. The intervention set of 3 acupoints is known to influence the motor system, while a second control set does not. Physical and occupational therapy were also used as treatment (parallel to the interventions with acupuncture).

Main Outcome Measures: The primary outcome measure was fMRI, and the secondary measures were clinical and behavioral parameters, concentrating on motor function and disability using reliable and validated scales.

Results: Data on handgrip demonstrated reappearance of brain activations in the motor-related areas of the lesioned hemisphere in both groups after intervention. As with clinical and behavioral evaluations, the fMRI data on handgrip demonstrated no statistically significant differences between the groups.

Conclusions: These preliminary results suggest that acupuncture may be beneficial to motor recovery in subacute stroke patients. However, the application of control acupuncture points did not result in a different recovery. The supplemental effect of acupuncture to physical and occupational therapy needs to be explored in further studies.

Acupuncture and Menopausal Hot Flashes / by France Guévin, Bernard Lambert;
Medical Acupuncture, Vol. 21(4): 243-245, 2009.

Background: The activities regarding work, sports, and hobbies of a menopausal woman predominantly belong to the Yang principle. Hormones and their changes belong to the Yin (Xue) principle. The balance of Yin/Yang principles needs to be restored with acupuncture treatment and adjustment of lifestyle to control hot flashes.

Objective: To report the possible effectiveness of acupuncture in the treatment of hot flashes.

Design, Setting, and Patients: Two patients were treated with acupuncture for hot flashes in a private clinic setting.

Intervention: Patients were treated for both their presenting complaints and hot flashes with acupuncture.

Main Outcome Measure: Hot flash intensity was quantitatively evaluated.

Results: Both patients experienced symptom resolution with acupuncture. Patient 1 experienced a 98% decrease in hot flashes, and patient 2 also had a quick, durable remission.

Conclusions: Acupuncture may offer an alternative treatment to control menopausal hot flashes, particularly when hormone therapy is contraindicated or refused.

Muscle Channel Technique / by Frank He; Medical Acupuncture, Vol.21(4): 247-250, 2009.

Muscle Channel Technique (MCT), a proprietary acupuncture technique, is a useful tool for pain management and injury healing. MCT is effective, easily accessible to both the patient and clinician, and safe. In its application, needles are inserted subcutaneously toward the pain or injury along the affected muscle channels at classically defined *access points* around the ankles or wrists. MCT's therapeutic effect can be enhanced by longer needle retention at the access points or the use of electrical stimulation between access and anchor points, which include He-Sea or Yuan-Source points.

Sinusitis With Polyposis Presenting as Refractory Trigeminal Neuralgia Treated With Acupuncture and Chinese Herbal Decoction / by Edwin Yong Miao; Medical Acupuncture, Vol. 21(4): 257-261, 2009.

Background: Trigeminal neuralgia is a common neuralgia condition. Most data available relate to primary trigeminal neuralgia, but little has been published about secondary trigeminal neuralgia treated with Chinese medicine.

Objective: To describe a case of secondary trigeminal neuralgia treated with acupuncture and Chinese herbal decoction.

Design and Patient: Case report of an Australian woman who presented in August 2005 with severe symptoms of trigeminal neuralgia (diagnosed in 2002). She had undergone carbamazepine treatment for 3 years. She also presented with sinusitis with polyposis.

Intervention: Acupuncture needles were applied with manual methods to the affected ophthalmic branch and maxillary branch of the trigeminal nerve. Acupoints selected were

ST 7 (Xiaguan), SI 19 (Tinggong), Ex-HN5 (Taiyang), GB 14 (Yangbai) (all right side), and LI 4 (Hegu) (both sides). De Qi was elicited every 3 minutes in a 20-minute session. Acupuncture was performed once a week for 12 sessions. Also, an individually designed Chinese herbal decoction was used as a coordinated approach for the treatment of sinusitis with polyposis.

Main Outcome Measures: Resolution of trigeminal neuralgia symptoms and improved symptoms of sinusitis.

Results: The severe trigeminal neuralgia gradually disappeared within 7 days after the first session of acupuncture treatment. This result was maintained during a 12-session acupuncture treatment course as well as during an herbal treatment period. Most importantly, this result has been maintained for more than 3 years. The patient's sinusitis was also resolved.

Conclusions: The combination of acupuncture and Chinese herbal decoction treatment led to a complete disappearance of symptoms of trigeminal neuralgia (after a 3-year course of carbamazepine, which became ineffective 2 months prior to acupuncture). This approach may offer a new treatment and supports the necessity for further research to evaluate Traditional Chinese Medicine in the treatment of trigeminal neuralgia and sinusitis.

Functional MRI and Acupuncture (Large Intestine 4 Acupoint) in Patients With Myofascial Pain of the Jaw Muscles: A Pilot Randomized Trial / by Yoshi F. Shen, Greg Goddard; *Medical Acupuncture*, Vol. 21(4): 263-268, 2009

Background: Myofascial pain of the jaw is a frequently encountered chronic pain syndrome. Recent trends have shown that alternative medicine, such as acupuncture, is becoming a popular treatment modality for this syndrome; however, little is known about the physiology behind acupuncture. Functional magnetic resonance imaging (fMRI) has been used with wide success in the mapping of human brain functions to better understand treatment and disease.

Objective: To examine the effects of acupuncture at LI 4 on brain activations through fMRI on patients with chronic myofascial pain.

Design, Setting, and Participants: Randomized, placebo-controlled, single-blinded pilot study conducted at a university dental clinic on 12 adults with myofascial pain of the jaw who had not undergone acupuncture treatment.

Intervention: Manual stimulation of LI 4 with dry needling acupuncture or sham acupuncture after clenching for 2 minutes while undergoing fMRI.

Main Outcome Measures: All blood oxygen level dependent (BOLD)-related signal contrasts were made between the rest period after clenching and the first 5 minutes of acupuncture treatment.

Results: Acupuncture induced significant activation of the primary sensory cortex and significant deactivation of the limbic system.

Conclusions: Acupuncture performed at LI 4 deactivated the limbic system, suggesting that acupuncture decreases the activity of brain sites related to pain.

Infrared Radiation Spectrum of Acupuncture Point Daling (PC 7) in Patients With Coronary Heart Disease / by Yu Zhou, et al; Medical Acupuncture, Vol. 21(4): 269-274, 2009.

Background: The infrared spectrum analysis can reveal subtle changes of the body's infrared radiation. It provides a good method to research the specificity of acupoints.

Objective: To compare the acupoint infrared radiation spectra of patients and healthy volunteers to determine whether patients' spectra carry distinctive pathological information.

Design, Setting, and Participants: The study included 50 patients with coronary heart disease (CHD) and 47 healthy adults (controls). The study was performed in the Cardiology Department of Longhua Hospital affiliated with Shanghai University of Traditional Chinese Medicine in Shanghai, China.

Intervention: The head of the highly sensitive infrared spectrum detection device was placed against Daling (PC 7) and Taichong (LR 3) bilaterally.

Main Outcome Measures: Infrared radiation intensity.

Results: Infrared radiation intensities of 47 out of 146 detected wavelength spots significantly differed in the CHD patients at PC 7 versus those of controls ($P < .05$), while only 24 wavelength spots at LR 3 showed significant differences. By the χ^2 test, these differences between the 2 points were statistically significant ($P = .002$). At 2- to 2.5- μm related to energy metabolism, the intensity at PC 7 of the CHD patients on both sides was significantly lower than that of controls, while the intensity of LR 3 only on the left side was significantly lower than that of controls (all $P < .05$), and the right side had no difference ($P > .05$).

Conclusions: The data suggest that the changes of infrared spectrum at PC 7 in CHD patients may reflect distinct pathological changes. This may be the result of hypoactive energy metabolism in the acupoint area. Acupoints may have certain relationships to

certain organs.

Acupuncture for Severe Postoperative Occipital Neuralgia/Myofascial Pain Syndrome / by Christopher M. Andrews, Richard C. Niemtow; *Medical Acupuncture*, Vol. 21(4): 275-277, 2009.

A 27-year-old woman presented with severe chronic postoperative occipital neuralgia and myofascial pain syndrome occurring after revision of the middle ear due to a cholesteatoma removal. Acupuncture began 6 months after the onset of pain and relief was obtained immediately. The patient decided not to continue acupuncture after 2 treatments and wished to pursue other therapeutic modalities. A follow-up conversation with the patient many months later found her still in pain and pursuing possibly a spinal stimulator.

Auricular Signs of Severe Pulmonary Disease in an Adolescent / by Rosalie Tassone; *Medical Acupuncture*, Vol. 21(4): 279-281, 2009.

Background: The auricular acupuncturist frequently uses physical changes in the auricle, whether visible or not, in the diagnosis as well as the treatment of many maladies. However, the practice of auricular inspection in nonauricular disease processes is not common in Western medical practice.

Objective: To describe a case of significant physical auricular change correlated with severe pulmonary disease.

Patient: A 14-year-old previously healthy boy with worsening respiratory status secondary to a new diagnosis of Wegener granulomatosis. Physical examination revealed large blood-filled bullae in the lung distribution of the lower conchae.

Main Outcome Measure: Change in auricular appearance before and immediately after plasmapheresis.

Results: Immediately after plasmapheresis, there was notably significant improvement in auricular appearance, with near disappearance of the bullae.

Conclusions: Inspection of the auricle in patients with significant systemic disease may provide insight into the Western diagnosis and treatment of these patients. Further study of patients with concomitant auricular changes and pulmonary disease may better define the suspected auricular signs of pulmonary or systemic disease.