

Treatment of Cervical Spondylitis with Acupuncture

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Cervical spondylosis is very common among the middle-aged and the elderly. Clinically, four types may be distinguished: radicular; spinal; sympathetic; and vertebral artery. A result of compression or irritation of nerves and blood vessels by the protruding and degenerative intervertebral disc(s), it is characterized by pain, soreness and numbness of neck, shoulder, and upper arm. Paralysis of limbs, incontinence, and vertigo may be found in severe cases. It falls in the traditional Chinese Medical category of Bi disorders, which is thought to be due to invasion by Evil wind and cold, leading to Stagnancy of Qi and blood and obstruction of Channels. For most cases, nonsurgical treatments are preferred to surgical intervention; acupuncture treatment is receiving increasing emphasis as nonsurgical treatment.

Body Acupuncture:- The commonest approach is body acupuncture, in which local points are usually selected though remote points along the involved channel are chosen sometimes as supplementary ones. The acupuncture points were stimulated with medium intensity and the needles were retained for 30 minutes. Acupuncture was carried out every day or every other day. Of the 250 cases treated, the effective rate for neck and shoulder pain was 97.6% while that for numbness of fingers, 89.54%.

Blood Letting:-Bloodletting in the broadest sense includes bleeding with cupping (bleeding into subcutaneous tissue) and plum-blossom acupuncture. It is aimed at removing obstruction in channels. In the approach called "Bleeding & Cupping", we tap an acupuncture point with needle and finally cups were applied. Of the 38 cases treated, cure was obtained in 23, effect in 14 and no effect in 1.

Moxibustion with warmed needles:- With this approach, acupuncture is first done before ignited moxa is applied to the needle fixed in point. Of the 22 cases treated, marked effect was noted in 7, effect in 22 and no effect in 3.

Ear Acupuncture:- Main points in the ear (Liver, Kidney, and neck which were used every time, and the complementary points included Endocrine, Sympathetic, Spleen, Shenmen, Heart, Taiyang, Occiput, and shoulder. Ear Press needles were fixed over the points with adhesive tape for 10 to 15 days. Of the 51 cases treated, cure was found in 30, marked effect in 18, effect in 3 with the radicular type showing the best result.

Cervical spondylitis

As can be seen from above, body acupuncture is the commonest approach in current use. Ear-pressing led to better result to the radicular type while Moxibustion seemed the choice for cases due to cold and dampness.

It has also been found that close correlation exists between clinical symptomatology and bone pathology of the involved cervical vertebrae on the one hand and reactions found in the cervical vertebrae region in the ear on the other, and that ear pressing induced significant changes in plasma monoamines which showed clear correlation with therapeutic effects. All these findings demonstrated the definitive effects of acupuncture.

The current trend is to adopt a comprehensive approach, which shows better effects for most cases. Examples include acupuncture plus electroacupuncture plus ear acupuncture plus cupping etc.

In short, rational and wise combinations of therapies to offset each other's weaknesses promise to give better and better results. It would be reasonable to expect optimal effects from a comprehensive approach of acupuncture.

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