

Acupuncture Herniated Disc Pain Finding

Published by [HealthCMi](#) on June 2018



Researchers demonstrate that acupuncture is an effective treatment modality for patients with herniated lumbar discs. [1] Jinan Number Three People's Hospital researchers conducted a clinical trial with 90 herniated lumbar disc patients, each with lumbar, iliac, and sciatic region pain due to the condition. To test the effectiveness

of warm needle acupuncture, the researchers randomly assigned patients to two groups. One group received postural adjustments with acupuncture and the other group received only postural adjustments. The two groups were statistically similar in terms of gender and age, and had all been suffering from discogenic pain for at least 7 months and up to 4 years.

All patients received postural adjustments, including manual traction and stretching of affected limbs for 10 minutes each session. This also included infrared heat lamps warming the affected areas for 15 minutes each session along with hugging the knees to the chest exercises for 30 minutes each session. If patients reported an improvement during this period, they were advised to rest in a prone position, taking care to keep the back warm. Postural adjustment sessions were provided to patients 3 times daily, for a total of 4 weeks. Patients in the acupuncture group received daily acupuncture treatments at the following acupoints:

- Ashi points
- MBW35 (Huatuojiuji)
- BL23 (Shenshu)
- BL40 (Weizhong)
- BL54 (Zhibian)
- BL32 (Ciliao)

- KD3 (Taixi)
- SP6 (Sanyinjiao)

Single use, filiform needles were inserted and manipulated using reinforcing-reducing methods to obtain deqi. The needles were retained for a total of 30 minutes with rotation carried out once every 10 minutes. Warm needle acupuncture was performed on points BL23, BL40, BL54, and BL32 by way of a 2cm long, encased piece of moxa attached to the needle handle. This was ignited and allowed to burn out before the ash was removed by hand. Treatments were provided once daily for a total of 4 weeks.

Results

Patient outcomes for the study were measured by the Visual Analogue Scale (VAS), Japanese Orthopedic Association Lower Back Pain Evaluation (JOA and Oswestry Disability Index). Levels of pro-inflammatory cytokines interleukin 4 (IL-4), interleukin 6 (IL-6), and tumor necrosis factor alpha (TNF α) were also measured before and after treatment.

Both groups experienced statistically significant improvements ($p < 0.05$) in VAS, JOA, and ODI scores following treatment, with the warm needle acupuncture group having significantly better ($p < 0.05$) results than the control group. Both groups also experienced a significant reduction ($p < 0.05$) in levels of all three pro-inflammatory cytokines. Again, the reduction was more marked in the warm needle acupuncture group ($p < 0.05$).

The overall effective rate was 93.3% in the warm needle acupuncture group, compared with 82.2% in the control group. Additionally, 19 patients in the warm needle acupuncture group experienced a 95% improvement in symptoms and were considered cured. This is in comparison to the control group wherein only 7 patients experienced that level of recovery. The researchers conclude that warm needle acupuncture is a highly effective tool in the treatment of lumbar disc herniations.

Related Findings

Nantong Hospital of Traditional Chinese Medicine researchers conclude that acupuncture is effective in treating post-operative pain following surgery for lumbar disc herniations. [2] A total of 110 participants were recruited for the study, all of whom were suffering from post-operative pain following lumbar disc surgery. Their symptoms included lower back pain, ischial pain, and difficulty raising the legs. Duration

of symptoms was between 3 weeks and 5 months prior to inclusion in the trial. The participants were randomly assigned to receive either acupuncture treatment (n=55) or conventional care (n=55). There was no statistically significant difference ($p>0.05$) between the demographics of the two groups prior to the investigation.

Acupuncture treatment was administered to patients in the prone position. Acupuncture points MBW24 (Yaoyan), MBW35 (Huatuojiaji), BL25 (Dachangshu), and BL23 (Shenshu) were selected along with ashi points (according to each patient's needs). Points GB30 (Huantiao), BL54 (Zhibian), and BL36 (Chengfu) were added for patients with ischial pain. Following disinfection of the needle site, filiform acupuncture needles were inserted perpendicularly. They were manually manipulated using reinforcing-reducing techniques to obtain deqi. Needles were retained for 30 minutes. Treatment was provided once daily, for a total of 15 days.

Conventional care involved the intravenous administration of mannitol 20% (twice daily, 125ml each time) and dexamethasone in sodium chloride 0.9% (once daily, 100ml each time, for three days). Patients also took oral 0.5mg mecobalamin (vitamin B12) capsules (three times daily for a total of two weeks).

Results

Results were obtained using the Visual Analogue Score (VAS) at 7, 14, and 21 days after treatment. Results were divided into four categories: full recovery, effective, somewhat effective, ineffective. Diagnostic criteria of a full recovery included the following: absence of lower back pain, normal leg mobility, ability to raise the leg above 70°. Criteria for the effective group included the following: improved lower back pain, normal leg mobility with mild neurological symptoms, ability to raise the leg 30°–70°. Criteria for the somewhat effective group included the following: improvement in lower back pain, limited leg mobility, ability to raise the leg 15°–30° with occasional use of analgesics. Those in the ineffective group showed no satisfactory improvement in symptoms.

At 7 day and 14 day follow-up appointments, patients in the acupuncture group showed statistically significant improvements ($p<0.05$) compared with the conventional care group. The total effective rate was calculated by adding together the full recovery, effective, and somewhat effective rates. The acupuncture group had a total effective rate of 96.36% compared with 83.64% in the conventional care group. The researchers conclude that acupuncture may be more effective than conventional care when treating post-operative pain following lumbar disc surgery.

References:

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