

Pain Management with Auricular Therapy/Auricular Acupuncture

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National Institutes of Health

TNP 2019
BFA/NADA Workshop

Objectives

- Overview of history of acupuncture
- Review of types of acupuncture
- Discuss history and significance of Auricular Acupuncture/Auriculotherapy
- Review particulars of Auricular Acupuncture/Auriculotherapy
- Demonstrate Battlefield Acupuncture Protocol
- Case presentations

Disclosures

- The views expressed in this presentation are those of the author and do not reflect the official policy of the Department of the Veterans Affairs, Department of Defense, or U.S. Government
- This course is for an introduction to auricular acupuncture only and is not for credentialing purposes. This course does not credential the participant to perform auricular acupuncture

Which One Am I Talking About?!

- Auriculotherapy
- Auricular Therapy
- Auricular Acupuncture

Auriculotherapy/Auricular Acupuncture Evolves with Chinese Acupuncture

- Meridian based medicine - Seeks to restore harmony and balance: **Qi - life force energy** - travels along 12 main pathways or meridians within the body
- **Qi is profoundly disturbed by traumatic stress**
- Historically evolved in China over 5000 years ago
- Yellow Emperor's Inner Classic- earliest major medical source dating back to 206 BC- 220 AD¹



History

(continued)

- China – isolated from rest of world because of internal feuding for power.
- 1800's- Outside trade and influx of Christianity and Western medicine
- 1822 - Qing Emperor orders teaching of acupuncture to stop at Imperial Medical college
- Restrictions on acupuncture continued resulting in the decline of traditional Chinese medicine.
- 1949 - Rise of Mao Zedong- poor rural healthcare created need for 'Barefoot Doctors'¹

Interest in Acupuncture Begins in the United States

- On a trip to China with President Richard Nixon, NY Times reporter, James Reston, suffered appendicitis
- 1971- Front page of NY Times, James Reston reported on his emergency appendectomy in China - post op pain relieved by 3 needles²
- 3 months later a report in Journal of American Medical Association³
- National Institutes of Health sponsored physicians to study Chinese health care and research acupuncture⁴ (NICAM)

Different Types of Acupuncture

- Traditional Chinese Acupuncture (TCM)
- Medical Acupuncture
- Japanese Acupuncture
- Korean Hand Acupuncture
- Scalp Acupuncture
- Auricular Acupuncture and Auriculotherapy
- Veterinary Acupuncture

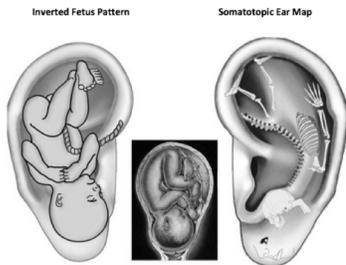
Traditional Chinese Medicine (TCM)

- TCM Most common form of acupuncture in the US – uses the 12 meridians plus several ‘curious’ meridians that transverse the body
- All 12 meridians at some point pass through the ear
- Herbs as well as acupuncture can be used
- Diagnosis based on 8 principles:
 - Exterior/interior,
 - Deficiency/excess,
 - Cold/heat,
 - Yin/Yang

Auriculotherapy/Auricular Acupuncture Theory

- Utilizes the ear as a homunculus/microcosm representation of human body with specific corresponding acupuncture points on ear
- 12 Meridians pass through ears
- Embryological development of the ear allows access to brain and subsequently the body organs
- Stimulation of nerve endings sends signals to the brain and then to the body
- By observing the ear one can identify specific issues/disease processes⁵

History of Auriculotherapy



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Embryological Auricular Development and Areas of Influence

Embryological Divisions

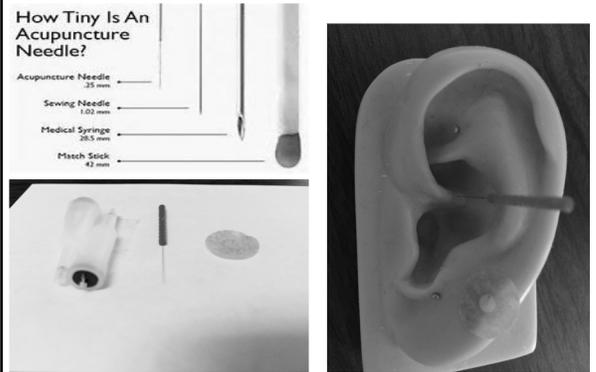
Endodermal Tissue	Mesodermal Tissue	Ectodermal Tissue
Inner Tissue Layer	Middle Tissue Layer	Outer Tissue Layer
Stomach	Muscles	Skin
Small Intestines	Bones	Hair
Large Intestines	Tendons	Sweat Glands
Lungs	Ligaments	Peripheral Nerves
Tonsils	Heart	Spinal Cord
Liver	Blood	Brainstem
Pancreas	Circulatory System	Subcortical Brain
Bladder	Lymphatic System	Limbic System
Urethra	Kidneys	Cerebral Cortex

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Easy Auricular Acupuncture Protocols

- National Acupuncture Detoxification Association (NADA)
 - Lung, Liver, Kidney, Shen Men, Autonomic Point
- Battlefield Acupuncture (BFA)
 - Cingulate gyrus, Thalamus, Omega 2, Point Zero, Shen Men
- Auricular Trauma Protocol (ATP)
 - Master Cerebral, Amygdala, Hypothalamus, Hippocampus, Insula, Vagus, Point Zero, Shen Men¹²

How big are the needles?



Does It Work? - Research -

- **Auricular acupuncture in the treatment of acute pain syndromes: A pilot study(2006).** Pilot study of 87 active duty military personnel with acute pain- the acupuncture group showed a 23% reduction in pain verses the standard medical care group⁷
- **Efficacy of Auricular Therapy for Pain Management: A Systematic Review and Meta- Analysis (2014).** Meta –analysis of 13 studies on Auricular Therapy (Acupressure, Acupuncture and Electro-acupuncture) showed a greater decrease in pain score than sham or control group⁸
- **A Randomized Exploratory Study to evaluate Two Acupuncture Methods for the treatment of Headaches Associated with traumatic Brain Injury(2016).** Post concussive headaches in active duty service members. Randomized exploratory study evaluated: usual care, TCM and Auricular Acupuncture. Acupuncture improved headache related quality of life more than usual care⁹

Research

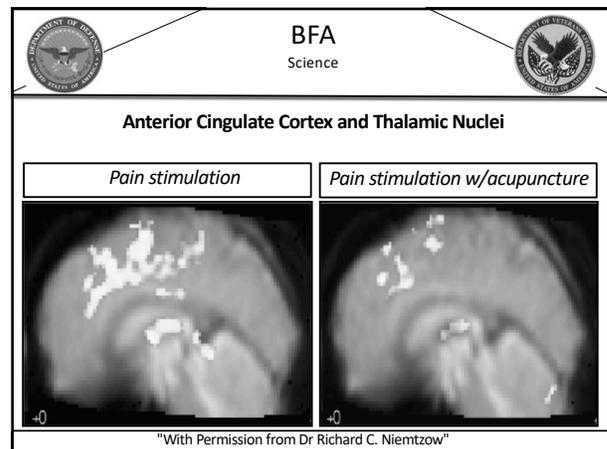
(continued)

- **Auricular acupuncture for chronic pain and insomnia: A randomized clinical trial (2018).** 32 participants were randomized to either usual care vs usual care plus one treatment with BFA. The BFA group showed a statistically significant reduction in both chronic pain and insomnia vs the usual care group¹⁰
- Clinical observation in the Temple VA headache clinic- acupuncture used daily to stop the headache and general pain reduction, improve mood and help with sleep. No use of narcotics.
- Clinical anecdotal observation at NIH – across the spectrum of diverse problems – success with pain reduction, muscle relaxation, lessening of acute presentations and improvement in sleep and stress reduction – no use of narcotics
- Further research is definitely needed, some of the difficulty is having a control group.

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Acupuncture Systemic Reviews

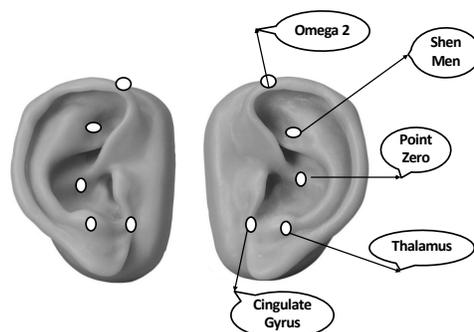
- NIH systemic review 2012
 - Acupuncture is effective for chronic pain treatment and can be considered a reasonable option
 - Chronic pain to include back and neck pain, osteoarthritis, chronic headache and shoulder pain¹³
- Cochrane systemic review 2016
 - Acupuncture should be considered for migraine patients for prevention, particularly if having adverse effects from medications
 - Acupuncture effect size was statically significantly larger in real acupuncture verses sham acupuncture for chronic headaches
 - Acupuncture should be considered for treating episodic or chronic tension headaches¹⁴



Battlefield Acupuncture protocol

- Cingulate gyrus
- Thalamus
- Omega2
- Point zero
- Shen Men

BFA Point Locations - CTOPS



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Significance of Points/BFA

- **Cingulate gyrus**- memory and emotion with pain
- **Thalamus**- Communication of nervous system to cerebral cortex (Grand Central station), reducing shock, restoring tranquility
- **Omega 2** Psychosomatic d/o & pain in limbs
- **Point zero**- General body homeostasis/autonomic brain controlling visceral organs
- **Shen Men**- Parasympathetic switch, alleviates excessive sensitivity, calming, pain reduction, insomnia – supports other auricular reflex points

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Precautions

- Know what you are treating
- Do not relieve pain if it is needed to limit the patients activity
- Do not use during pregnancy
- Needle cautiously with bleeding disorders
- Do not use electric current with a cardiac pacemaker
- No ETOH, drugs before treatment

Precautions

(continued)

- Avoid treating those that are extremely weak, anemic, tired, hungry or have eaten a big meal- treatment will not be effective
- Those that are weak after, need to rest before leaving
- Needle shock- vasovagal reaction (uncommon, but can happen)
- Treat with antibiotics if infection develops (very rare)
- Most common side effect is red or tender ear

Procedure

- Verbal Consent for Auricular Acupuncture
- Wash hands or use hand sanitizer
- Wipe ears with alcohol swap
- Assess pain level prior to placement of needle

Patient Information and Consent Form for Acupuncture and Auriculotherapy

Please read this information carefully and ask your acupuncture provider if there is anything that you do not understand.

What is acupuncture?
Acupuncture is a form of therapy in which fine needles are inserted into specific points on the body. Auriculotherapy involves inserting needles on one or both ears.

Is acupuncture safe?
Acupuncture is generally very safe. Serious side effects are very rare – fewer than 1 in 10,000 treatments.

Does acupuncture have side effects?
Yes, the common side effects of an acupuncture treatment are listed below.

- Drowsiness may occur after a treatment. If you are so affected, you are advised not to drive.
- Minor bleeding or bruising may occur when the needles are removed.
- Indwelling ear needles can become painful or inflamed. If this occurs, promptly remove the needle(s) involved.
- Symptoms can get worse after a treatment. Be sure to tell your doctor about this at your next appointment.
- Fainting may occur in certain patients, particularly at the first treatment.

In addition if there are particular risks that apply in your case, your doctor will discuss these with you.

Is there anything your doctor needs to know?
Apart from the usual medical details, it is important to tell your doctor

- if you have ever become faint or had a seizure,
- if you have a bleeding disorder,
- if you are taking anticoagulants or any other medication,
- if you have a damaged heart valve or other cardiac problem,
- if you have any other particular risk of infection.

Only single-use, sterile, disposable needles are used in the clinic.

Statement of Consent
I confirm that I have read and understood the above information. I consent to having acupuncture treatment. I understand that I can refuse treatment at any time.

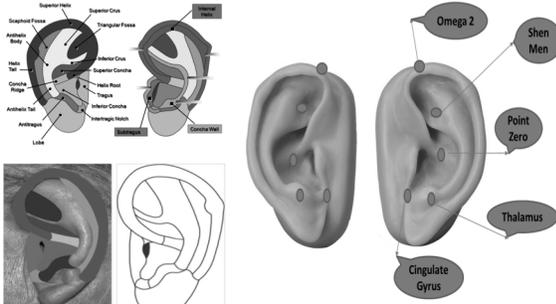
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Anatomy Differences



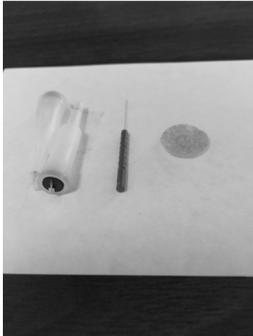
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Ear Anatomy and BFA points



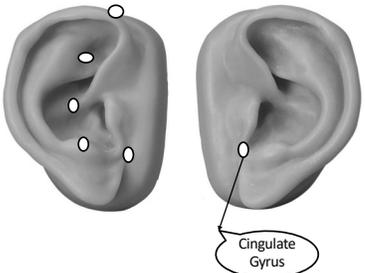
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Needle practice



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BFA Cingulate gyrus

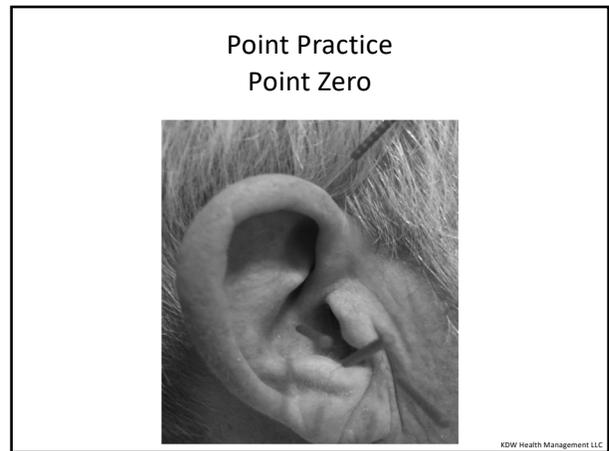
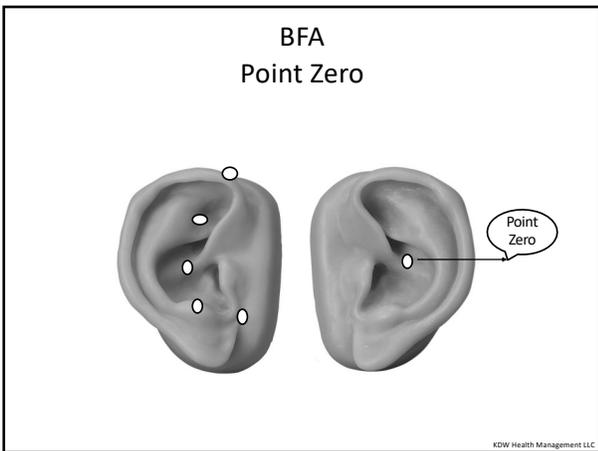
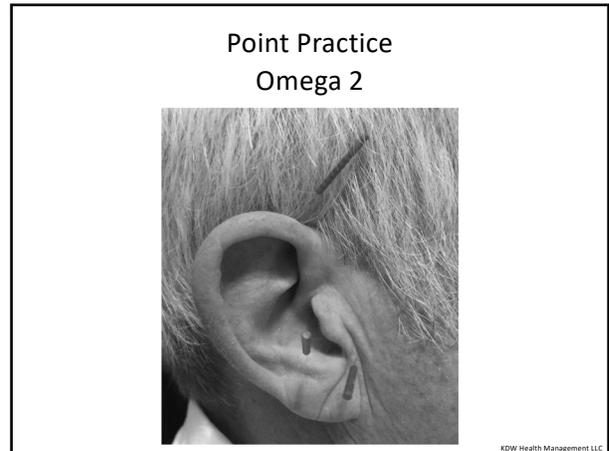
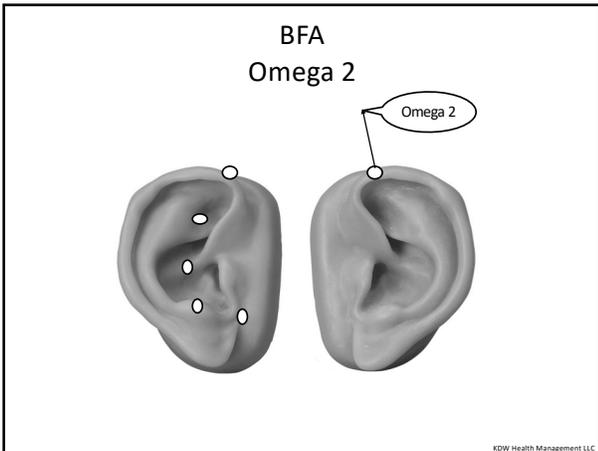
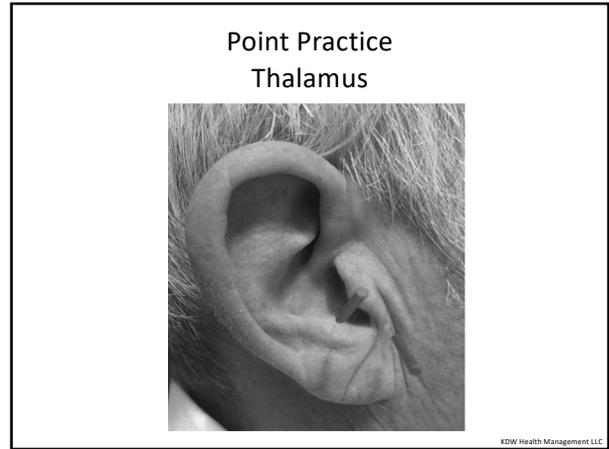
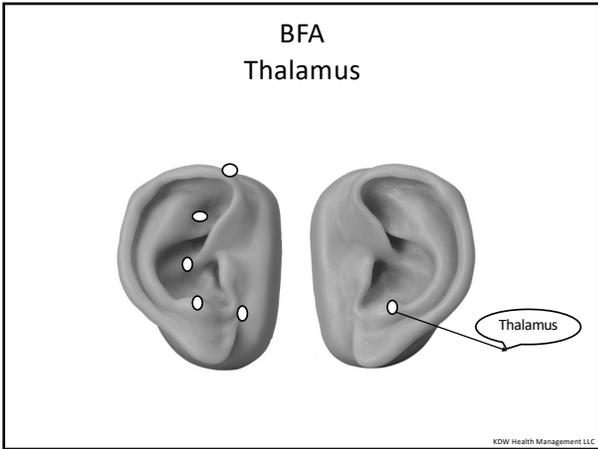


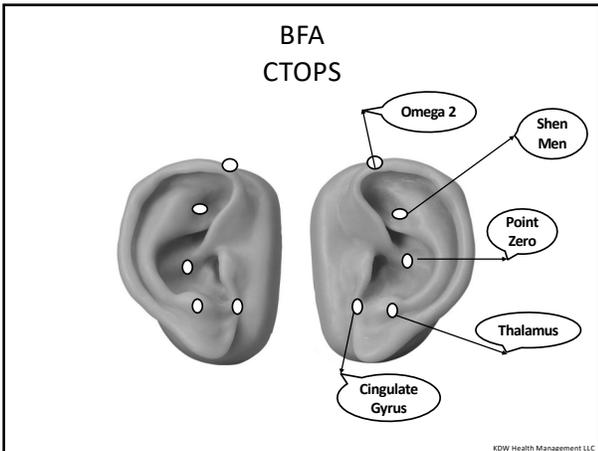
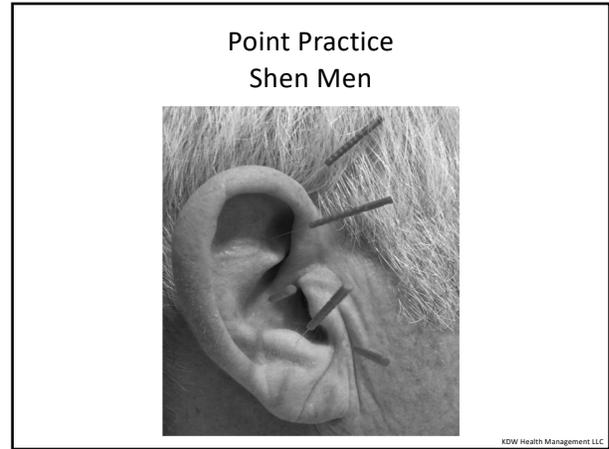
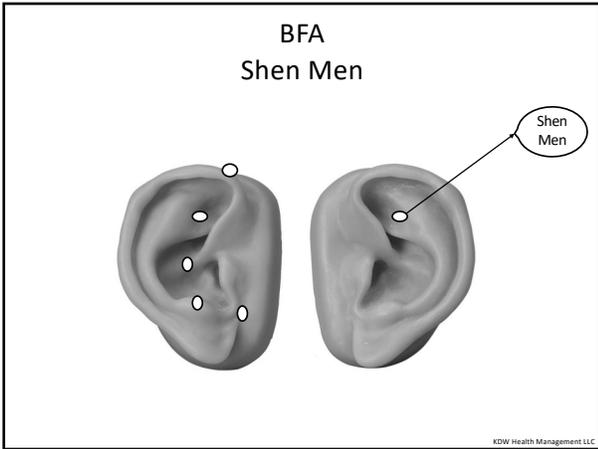
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Point Practice Cingulate Gyrus



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Reasons to stop the treatment

- Patient asks
- Pain is at 0 – 1/10
- Lightheadedness

STOP

Patient Discharge Instructions

- Drink plenty of water
- Avoid strenuous activities for rest of day
- Avoid heavy meals
- Avoid alcohol and sex for 6 hours
- Continue medications as directed
- Monitor response to the treatment

Indicate on pictures above those sites on ear where reactive ear reflex points were found

1. Patient ID: _____ 2. Date: _____ Onset: _____ End: _____
3. Time: _____ 4. Time: _____
5. Patient Complaints Prior to Treatment: _____
6. Objective Body Assessments Prior to Treatment: (i.e. symptoms, vital signs in range of medical) _____
7. Auricular Diagnosis Observations: (i.e. regions of tenderness and electrodermal conductance) _____
8. Auriculotherapy Treatments Used: Acupuncture Needles Transcutaneous Stimulation
 Electroacupuncture Acupoint Pellets Acupressure Other: _____
9. Auricular Points Treated: _____
10. Patient Experience Following Treatment: _____
11. Objective Body Assessments Following Treatment: _____

[For Office Use Only] Clinic ID: _____ Practitioner ID: _____
© Copyright 1998. Free permission to use this form may be granted by writing to: Terry Clinco of the following:
HCA, P.O. Box 2071, 8033 Sunset Blvd., L.A., CA 90068 FAX: (310) 659-2084 E-mail: terry@wonderland.net

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Cost of Acupuncture

- The cost actually varies by the type of provider (physician vs "other" (NP)) and the type of Patient. The Price Quote : as of Jan 17th 2013. The rate tables are changed 1-2 times each year and rates do go up and down, usually only slightly.
- Price quote for acupuncture without stimulation**
 - 97810- \$35.74 (Physician) \$30.38 (Extra Medical/NP) -first 15 minutes
 - 97811- \$26.89 (Physician) \$22.86 (Extra Medical/NP) -additional 15 minutes
- Price quote for acupuncture with stimulation**
 - 97813 - \$38.12 (Physician) \$32.40 (Extra Medical/NP) -first 15 minutes
 - 97814 - \$30.63 (Physician) \$26.04 (Extra Medical/NP) -additional 15 minutes

Relative Value Unit (RVU) for acupuncture

- Acupuncture without electric stimulation**
 - 97810- 0.6 RVU's - first 15 minutes
 - 97811- 0.5 RVU's -additional 15 minutes
- Acupuncture with electric stimulation**
 - 97813 – 0.65 RVU's - first 15 minutes
 - 97814 – 0.5 RVU's – additional 15 minutes

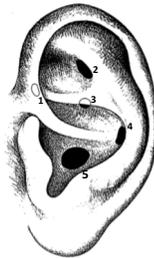
Great News!

- The Texas Board of Nursing has granted approval for use of Auricular acupuncture, if you have taken the appropriate courses. The use of auricular acupuncture does not overlap into the territory of the Licensed Acupuncturist, according to Texas Medical Board definition of acupuncturist.
- Possibility for learning this valuable skill
 - The Auriculotherapy Certification Institute www.auriculotherapy.org
 - *This certificate does not replace the need for state licensure in a specific health care field, but it does acknowledge specialty of training in this particular health care modality.
- Acudetox Specialist- NADA protocol 3 day class to be offered soon

ACUETOX Specialist

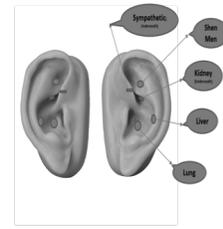
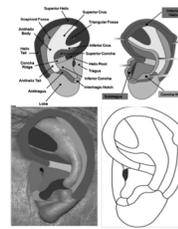
- OCCUPATIONS CODE; TITLE 3. HEALTH PROFESSIONS; SUBTITLE C. OTHER PROFESSIONS PERFORMING MEDICAL PROCEDURES; CHAPTER 205. ACUPUNCTURE
- "Acudetox specialist" means a person certified under Section 205.303.
- (A) is a licensed social worker, licensed professional counselor, licensed psychologist, licensed chemical dependency counselor, licensed vocational nurse, or licensed registered nurse; and
- (B)has successfully completed a training program in acupuncture detoxification that meets guidelines approved by the medical board; and
 - (2)pays a certification fee in an amount set by the medical board.
- (b)An acudetox specialist may practice acupuncture only:
 - (1)to the extent allowed by rules adopted by the medical board for the treatment of alcoholism, substance abuse, or chemical dependency; and
 - (2)under the supervision of a licensed acupuncturist or physician.

NADA Protocol

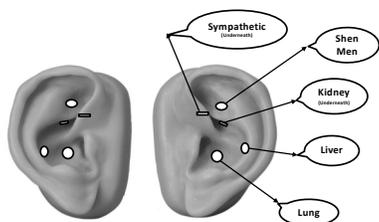


1. Sympathetic
2. Shen Men
3. Kidney
4. Liver
5. Lung

Ear Anatomy and NADA points



NADA Point Locations



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Significance of Points/NADA

- **Sympathetic/Autonomic point**- fight or flight- Balances, strong analgesic and relaxant, calms the spirit
- **Shen men**- spirit gate/calms the mind, opens the heart, reduces B/P, alleviates pain
- **Kidney**- relieves fear, allows one to hear positive
- **Liver**- anger/relieves muscle cramps aids in clear thinking, relieves depression, helps to find direction
- **Lung**- regulation of grief/sadness, provides inspiration¹⁵

Who can be certified to be a acu-detox specialist?

- Under the Texas Medical Board the following may be certified:
 - Licensed Social Worker
 - Licensed Professional Counselor
 - Licensed Psychologist
 - Licensed Chemical Dependency Counselor
 - Licensed Registered Nurse
 - Licensed Vocational Nurse
 - *Medical Doctors do not need certification to administer this protocol*

Current Texas Law

- Acu-detox specialist may practice acupuncture only:
 - To the extent allowed by rules adopted by the medical board for the treatment of alcoholism, substance abuse or chemical dependency; and
 - Under the supervision of a licensed acupuncturist or physician (may be telephonic supervision)
- The Texas NADA group is working on language modifications, to current acu-detox law, to include Mental health/Behavioral health issues
- <https://statutes.capitol.texas.gov/Docs/OC/pdf/OC.205.pdf> (pg 21)

Certifying Process

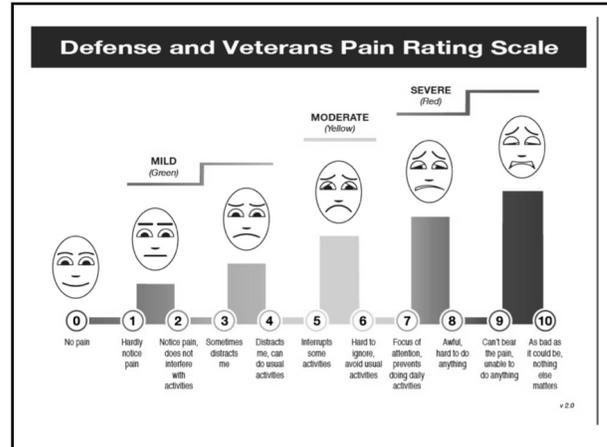
- Complete a 30 hour NADA course (usually completed over a long weekend)
 - Complete 40 encounters under the supervision of a certified acu-detox specialist/can usually be done in a group settings
 - Attend 2 AA meetings
 - Submit all to NADA for a *Certificate of Training Completion*
- ↪
- Apply to the medical board and pay a \$52.00 fee, once the above is completed

Words of Wisdom

" Anyone who is trained and licensed to give injections or do sutures could learn to use a few simple acupuncture protocols in a matter of weeks, and could relieve an enormous amount of suffering."¹¹

¹¹Acupuncture is like noodles': community based acupuncture concept

Case Presentations



Refractory Migraine

Failed treatment in ER

History and Treatment

- 38 yr. old female with a 2 weeks history of migraine
- Failed all abortive treatments of triptans and IV medication in the ER
- Placed BFA protocol bilaterally, for 20 minutes
- Resolution of the migraine

Occipital neuralgia and neck pain

Chronic pain

History

- 40 year old male with a history of multiple concussions, neck and low back pain related to multiple deployments: to include hard landings with parachute jumps, head strikes on vehicles and multiple blasts from Identified explosive devices (IED)
- Chronic posterior occipital pain with jab and jolt forward behind the eyes. Occurring 2-3 times per week lasting 2 hours, rated as 7/10. Headaches have been occurring since 2006 (10 years)
- Prior treatments with acupuncture and massage to back helpful, not tolerant of Topamax, Robaxin - would prefer to stay away from medications
- Past medical history- Migraines, PTSD, Sleep Apnea, Insomnia, Low back pain, Neck pain, Tinnitus, GERD

Auricular Acupuncture treatment

- Placement of needles at the following points:
- Shen men, Amygdala, Master Cerebral, Vagus, Hypothalamus, Hippocampus, Thalamus, Cingulate gyrus, point zero, Cervical (Sensory & Motor), Lumbar (Motor)
- Pain prior to treatment: 7/10 neck and shoulders, mild occipital pain
- Anxiety prior to treatment: 6/10
- Needles left in for 20 minutes
- Pain after treatment: 4/10 neck and shoulders, occipital pain resolved
- Anxiety after treatment: 3/10

Occipital neuralgia and anxiety

Pre-procedure pain

History

- 38 yr. old female with a Hx of occipital neuralgia/tension headaches occurring since 1998- unsure of trigger other than was on active duty as a medic at time of onset. In addition had a medication overuse component to her current headaches (taking daily Excedrin/Imitrex for 3 weeks)
- failed multiple medications to include Paxil, Celexa, nortriptyline, Topamax, Depakote, Motrin
- Medical history- PTSD, Sexual assault in adolescence/ MST, Anxiety, Insomnia, Constipation, Allergic rhinitis, Asthma, GERD, Low back pain, Dizziness, Polyarthralgia
- Seen in clinic for trial of Botox- at time of appt had a 5/10 headache located in the left occipital area radiating to behind her left eye. In addition she was extremely anxious about the administration of Botox. Rated anxiety as 10/10

Treatment

- Auricular acupuncture administered at the following sites: Tranquilizer, Shen men, Point zero, Amygdala, Hypothalamus, Hippocampus, Master Cerebral, Insula, Lesser occipital – needles left in for 20 minutes
- Alpha-stim AID (micro-current applied by way of ear tabs) was applied to help with anxiety
- Her headache resolved after 10 minutes and anxiety was reduced to 3/10
- She was able to complete the administration of Botox without issue, her headache did not return that day and her anxiety remained low

Dental pain

Acute pain

History and Treatment

- 51 yr. old male with 3 day history of right sided jaw pain following root canal. Rates pain as 8/10, constant throbbing and distracting him from working
- Acupuncture needle placed at Dental analgesia point
- Pain resolved before my hand was away from his ear- pain did not return
- 75 yr. old male with 2 day history left jaw pain following tooth extraction, "dry socket". Rated pain as 9/10, unable to eat or even brush his teeth
- Acupuncture needle placed at Dental Analgesia point x 2, Thalamus, Shen Men
- Pain resolved over 5 minutes- pain did not return

Dental Pain

(continued)

- 35 yr. old female with 10 days of left facial pain. Found to have infection in tooth, now needing dental surgery as the infection had surpassed the ability to do a root canal. In addition she was dx with sinus infection as tooth root was into the sinus cavity. Taking T&C#3 every 4 hours- reduced her pain to 5/10
- Placed auricular needles at Dental Analgesia, Jaw and Thalamus- pain resolved over 3 minutes. Needles removed and gold studs placed.
- Patient left pain free and happy, after being in the office a total of 10 minutes. Pain 0-2/10 for 3 days, no need to take T&C #3. Pain came back when gold studs fell out, needed to go back on T&C#3 until surgery as she could not get back in to the office.

Occupational Injury – Back Strain History

- 44 yr. old male helping to transport a 300lb. anesthetized pig back to pen when pig suddenly awoke and in the struggle that ensued the employee injured his back.
- Presents in acute pain, unable to find a position of comfort, unable to stand or sit, lying on side without relief.
- Healthy, alert male: No meds, NKA, PMH: NC
- Pain: 10/10 P: 96 BP: 156/84

Back Strain - Treatment

- NP and PT unable to exam employee in current state of pain – restless in fetal position
- Needled points BFA plus muscle relaxation, sacral and lumbar spine in only one ear – encouraged to deep breathe – cold pack to back
- In less than 5 minutes, suddenly pulled himself to the side of the bed, stood up still bending slightly forward and said (smiling) 'you're a witch' his pain had gone to 5/10 with increased mobility and ability to withstand further evaluation
P: 76 BP: 132/74
- Was able to treat with NSAIDs and Physical therapy with Auriculotherapy for added pain management. On light duty returned to full duty in 2 weeks.

Occupational Exposure – Allergy History

- 36 yr. old female presents with mild resp. distress after sustaining a mouse bite while moving the mouse to a different cage
- Employee was working with HPAI (High Path Avian Influenza) mouse had not been infected
- PMHx of seasonal and cat dander allergies. Meds: prn Loratadine – none taken in past 7 days
- P= 104 R=28 audible wheezing, BP=146/82

Allergy - Treatment

- Alert female begins 15 min. scrub of bite mark on right index finger
- While scrubbing, needles quickly placed in BFA in both ears and with allergy and antihistamine points bilaterally
- R=20 (no wheezing either audible or on auscultation) P= 76 BP=128/76 after 15 min. scrub with needles in place
- Oral antihistamine given. Employee able to return to work in an hour. Work-up for mouse allergies

Post Deployment Insomnia History

- 52 yr. old male in the U.S. Public Health Service recently returned from deployment in Africa during Ebola epidemic for 3months. He is unable to sleep through the night waking 5-6 times
- PMHx: Hypertension, hyperlipidemia
- Meds: Losartan 50mg qd, Rosuvastatin 10mg qd

Insomnia - Treatment

- First treatment: BFA in one ear and ATP (auricular trauma protocol) in other ear with Insomnia 1, Insomnia 2, in both. Left needles in for 45minutes. He fell asleep and reported he 'felt as if I haven't slept this well in months'
- Continued to have sleep disruption but only 3-4 times a night. After 2 similar treatments he was waking 0-2 times a night and stated felt 'less anxious'

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