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# CLINICAL APPLICATION OF ACUPUNCTURE IN THE PAIN CLINIC

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# Objetives

1. Acupuncture related to the type of pain
2. Gait analysis
3. Clinical cases
4. Acupuncture related to manual therapy

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# 1. Acupuncture related to the type of pain

- The classification of type of pain differs in TCM and in Western Medicine. Even though the terms are different both are related.

**TCM**

a) Heat Bi Syndrome
b) Cold Bi Syndrome
c) Damp Bi Syndrome
d) Wind Bi Syndrome
e) Bony Bi Syndrome

**Western Medicine**

a) Acute pain
b) Chronic pain
c) Osteoarthritic pain
d) Neuropathic pain
e) Oncological pain

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# 1. Acupuncture related to the type of pain

- **TCM – Heat Bi Syndrome**

  Clinical signs

  - Acute onset
  - Painful, hot and swollen muscles or joint
  - Fever and/or excessive thirst
  - Tongue: red with yellow coating
  - Pulse: strong and fast

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# 1. Acupuncture related to the type of pain

- **TCM – Heat Bi Syndrome –** Useful acupuncture points

| Nerve | Innervation/Location | Indication |
|---|---|---|
| GV 14 | C7-T1 dorsal root | Cervical, thoracic, forelegs & back problems |
| LI 11 | Braquialis n. | Disperse heat/inflammation. Painful shoulder/elbow. Support sinews & joints |
| LI 4 | Radial n.<br>Palmar n. (n. Median) | Channel obstructions/pain. Anti spasmolytic, Pain face/mouth. Carpal problems |
| ST 44 | Plantar n. | Knee problems, tendinitis, abdominal pain. Meridian obstructions (face) |
| GBl 20 | C2 | Cervical problems, Wobbler, Inflammation ears/nose |

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# 1. Acupuncture related to the type of pain

- **TCM – Heat Bi Syndrome –** Useful acupuncture points

| Nerve | Innervation/Location | Indication |
|---|---|---|
| SP 6 | Tibial n.<br>Saphenous n. | Improves Yin, abdominal pain (gastrointestinal/genitourinary) |
| SP 9 | Saphenous n. | Hip & knee pain |
| Er-Jian | Tip ear | Spasmolytic/colic pain. Headache |
| Wei-Jian | Tip tail | Spasmolytic/colic pain |

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# 1. Acupuncture related to the type of pain

- **TCM – Cold Bi Syndrome**

  Clinical signs

  - Acute and severe  pain
  - Acute difficult movement of the joints
  - Relief of pain when exposed to heat
  - Exacerbation of pain when exposed to cold
  - Tongue: purple. Coating: slight and pale
  - Pulse: slow and wiry

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# 1. Acupuncture related to the type of pain

- **TCM – Cold Bi Syndrome –** Useful acupuncture points

| Nerve | Innervation/Location | Indication |
|---|---|---|
| GV 3 | L4 | Problems at the hind limbs, improves lumbosacral area & knees |
| GV 4 | L2<br>At the height of Kidney Shu | Problems at the hind limbs, improves lumbosacral area & knees<br>Genitourinary and intestinal problems |
| Bai Hui | Last lumbar n. | Hip displasia, lameness hind limb |
| Liv 3 | Deep peroneal | Hind limb paralisis, spasmolytic GI |
| GB 20 | C2 | Cervical problems, Wobbler, Inflammation ears/nose |

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# 1. Acupuncture related to the type of pain

- **TCM – Cold Bi Syndrome –** Useful acupuncture points

| Nerve | Innervation/Location | Indication |
|---|---|---|
| Shen-Shu | Extra point dorsal hip | Pelvic pain/displacement |
| Shen-Peng | Extra point dorsal hip | Pelvic pain/displacement |
| Shen-Jiao | Extra point dorsal hip | Pelvic pain/displacement |
| Moxibustion | | |

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# 1. Acupuncture related to the type of pain

- **TCM – Damp Bi Syndrome**

  Clinical signs

  - Chronic stiffness
  - Difficult movement of joints
  - Greater stiffness than pain
  - Pain relieved when exposed to hot and dry conditions
  - exacerbated when exposed to Cold Damp
  - Tongue: pale. Coating: greasy
  - Pulse: slow and soft

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# 1. Acupuncture related to the type of pain

- **TCM – Damp Bi Syndrome –** Useful acupuncture points

| Nerve | Innervation/Location | Indication |
|---|---|---|
| SP 6 | Tibial n.<br>Saphenous n. | Improves Yin, abdominal pain (gastrointestinal/genitourinary) |
| SP 9 | Saphenous n. | Hip & knee pain |
| ST 36 | Superficial & deep peroneal | Knee problems, weakness hind limbs, lumbar pain, stomatch pain, general weakness |
| BL 20 | Thoracic n. | Medial knee pain. Back pain |

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# 1. Acupuncture related to the type of pain

- **TCM – Damp Bi Syndrome –** Useful acupuncture points

| Nerve | Innervation/Location | Indication |
|---|---|---|
| Bl 21 | Thoracic n. | Gastrointestinal pain, lateral knee pain & hind limb |
| Gbl 20 | C2 | Cervical problems, Wobbler, Inflammation ears/nose |
| GV 4 | L2<br>At the height of Kidney Shu | Problems at the hind limbs, improves lumbosacral area & knees<br>Genitourinary and intestinal problems |
| Liv 3 | Deep peroneal | Hind limb paralisis, spasmolytic GI |

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# 1. Acupuncture related to the type of pain

- **TCM – Wind Bi Syndrome**

  Clinical signs

  - Rapid onset of pain
  - Pain that move from one area to another
  - Pain radiating to a remote area
  - Pain in the channels and joints
  - Pain worse when exposed to Wind
  - Tongue: pale. Coating: thin
  - Pulse: superficial

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# 1. Acupuncture related to the type of pain

- **TCM – Wind Bi Syndrome –** Useful acupuncture points

| Nerve | Innervation/Location | Indication |
|---|---|---|
| Bl 12 | Thoracic n. | Cervical & thoracic vertebral pain |
| Gbl 20 | Auricular caudal | Cervical pain, otitis, conjuntivitis, uveitis, rinitis, neurological problems |
| BL 17 | Thoracic n. | Stomatch, lung & heart problems |
| BL 18 | Thoracic n. | Abdominal pain, thoracic vertebral pain, tendinitis, myositis, conjuntivitis, uveitis |

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# 1. Acupuncture related to the type of pain

- **TCM – Wind Bi Syndrome –** Useful acupuncture points

| Nerve | Innervation/Location | Indication |
|---|---|---|
| Bl 23 | Lumbar | Bone problems, chronic ear problems, kidney pain, lumbosacral pain, paralysis hind limb |
| SP 10 | Femoral & saphenus | Sacral pain |
| Liv 3 | Deep peroneal | Hind limb paralisis, spasmolytic GI |

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# 1. Acupuncture related to the type of pain

- **TCM – Bony Bi Syndrome**

  Clinical signs

  - Arthritis, chronic intervertebral disc disease, spondylosis or degenerative joint disease
  - Pelvis limb weakness
  - Difficulty getting up or walking
  - Tongue: pale, swollen and wet
  - Pulse: deep and weak, especially on the right side

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# 1. Acupuncture related to the type of pain

- **TCM – Bony Bi Syndrome –** Useful acupuncture points

| Nerve | Innervation/Location | Indication |
|---|---|---|
| Ki 3 | Tibial | Tarsal pain, cistitis, lumbar pain, hind limb paralysis |
| Ki 10 | Tibial | Knee pain, Pain in urinary tract |
| BL 23 | Lumbar | Bone problems, chronic ear problems, kidney pain, lumbosacral pain, paralysis hind limb |
| BL 26 | Lumbar | Rectal prolaps, bladder/kidney problems |
| BL 40 | Femoralis & tibial | Acute lumbar pain, isciatic/hip pain, hind limb pain, knee pain |
| BL 60 | Plantar cutaneus & tibial | Chronic lumbar pain, paralysis lumbar & hind limb Cervical pain, headache |

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# 1. Acupuncture related to the type of pain

- **TCM – Bony Bi Syndrome –** Useful acupuncture points

| Nerve | Innervation/Location | Indication |
|---|---|---|
| Liv 3 | Deep peroneal | Hind limb paralisis, spasmolytic GI |
| GV 3 | L4 | Problems at the hind limbs, improves lumbosacral area & knees |
| GV 4 | L2<br>At the height of Kidney Shu | Problems at the hind limbs, improves lumbosacral area & knees<br>Genitourinary and intestinal problems |
| St 36 | Superficial & deep peroneal | Knee problems, weakness hind limbs, lumbar pain, stomatch pain, general weakness |

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# 1. Acupuncture related to the type of pain

- **TCM – Bony Bi Syndrome –** Useful acupuncture points

| Nerve | Innervation/Location | Indication |
|---|---|---|
| LI 4 | Radial n.<br>Palmar n. (n. Median) | Channel obstructions/pain. Anti spasmolytic, Pain face/mouth. Carpal problems |
| LI 10 | Between ext. Carporadial & ext. Dig. com | Radial paralysis/pain, ellbow pain, back pain, gastrointestinal problems |
| Shen-Shu | Extra point dorsal hip | Pelvic pain/displacement |
| Shen-Peng | Extra point dorsal hip | Pelvic pain/displacement |
| Shen-Jiao | Extra point dorsal hip | Pelvic pain/displacement |

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# 1. Acupuncture related to the type of pain

- **Western Medicine – Acute pain**
  - Characteristics
    - Pain that follows some bodily injury
    - It disappears with healing, and tends to be self-limiting (limiting)
    - It is beneficial to the body and a defence mechanism
  - Bi syndrome related: heat Bi and sometimes cold and wind Bi

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# 1. Acupuncture related to the type of pain

- **Western Medicine – Acute pain**
  - Treatment
    - Combination of local and distal points Distal points. Sometimes is not possible to place needles locally
    - Examples
      - Gastrointestinal pain: PC 6 on the arm + ST-36 on the leg
      - Sore throat or toothache: LI 4 on the hand + ST 44 on the foot
    - Mirror imagen: left pain, use points right. Hip pain, use points in shoulder
    - Electroacupuncture
    - Frequency of treatment:  Once a day, until pain relief. 1-2 treatments are enough

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# 1. Acupuncture related to the type of pain

- **Western Medicine – Chronic pain**
  - Characteristics
    - Pain that lasts several weeks to months and persists beyond the expected healing time when non-malignant in origin
    - t is a pathological pain, it is not a defence mechanism
  - Bi syndrome related: damp, cold and bony Bi

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# 1. Acupuncture related to the type of pain

- **Western Medicine – Chronic pain**
  - Treatment
    - Local and distal point: puncture 2 to 3 needles at each local point
    - Combination of points above and below the chosen ones
    - Mirror image
    - Electroacupuncture
    - Manual therapy
    - Moxibustion
    - Frequency of treatment: 1-2 weekly according to the pain intensity. Long term according to the patient

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# 1. Acupuncture related to the type of pain

- **Western Medicine – Osteoarthritic pain**
  - Characteristics
    - It is the most frequent cause of pain in the canine and feline population (20% dogs > 1year old)
    - The suggested therapy is a combination of nonsteroidal anti-inflammatory drugs and adjuvant analgesics, nutraceuticals, functional foods, physical therapies and complementary medicine
  - Bi syndrome related: Bony, damp and cold Bi

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# 1. Acupuncture related to the type of pain

- **Western Medicine – Osteoarthritic pain**
  - Treatment
    - Local and distal point: puncture 2 to 3 needles at each local point
    - Combination of points above and below the chosen ones
    - Electroacupuncture
    - Laser acupuncture
    - Trigger points treatment & Manual therapy
    - Moxibustion
    - Pharmacopuncture: B12, homeopathy, stem cell.
    - Frequency of treatment: 1-2 weekly according to the pain intensity. Long term according to the patient

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# 1. Acupuncture related to the type of pain

- **Western Medicine – Neuropathic pain**
  - Characteristics
    - Pain that originates from an injury or related to peripheral or central nervous system
    - It is described as burning or shooting, possibly associated with motor, sensory, or autonomic deficits
  - Bi syndrome related: Wind and heat Bi

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# 1. Acupuncture related to the type of pain

- **Western Medicine – Osteoarthritic pain**
  - Treatment
    - Distal points. Local points are usually not recommended
    - Some suggested points to treat this type of pain: SJ 5, GlB 34, ST 36, ba xie and ba feng points
    - Mirror image
    - Electroacupuncture
    - Laser acupuncture
    - Trigger points and Manual therapy
    - Frequency of treatment: 1-2 weekly according to the pain intensity. Long term according to the patient

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# 1. Acupuncture related to the type of pain

- **Western Medicine – Oncologic pain**
  - Characteristics
    - Pain can be acute, chronic or intermittent
    - Different aetiologies
      - Directly produced to the tumor growing
      - Originated by the treatment
      - Related to chronic debility
      - Unrelated to the tumor. Originated by a concurrent disease
  - Bi syndrome related: wind, heat, cold and damp Bi

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# 1. Acupuncture related to the type of pain

- **Western Medicine – Osteoarthritic pain**
  - Treatment
    - Distal points. Local points are usually not recommended
    - Back- Shu and Mo of the affected organ
    - Electroacupuncture
    - Frequency of treatment: 1-2 weekly according to the pain intensity. Long term according to the patient

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# 2. GAIT ANALYSIS – SESSION DESCRIPTION

1. Anamnesis: Breed, surgeries, passed and actual diseases, medication, walks, games and activities
2. Position and gait analysis
   - Standing position
   - Sitting (lying, getting up) position
   - Walking and trot: position, anatomy and limping
   - Turning to the right & left
3. Palpation of the whole body, location of painful areas and its relation to meridians and acupuncture points

# **2. GAIT ANALYSIS –** Anamnesis - activities

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# 2. GAIT ANALYSIS – Anamnesis position

Both fore- & himblimb aligned at the height of the shoulders and hip, respectively

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# 2. GAIT ANALYSIS

| Observation | Possible problem |
|---|---|
| Can move the head to the right & to the left? | Atlas/Axis rotation. Overwhelm neck muscles. Sacrum rotates compensating |
| Are the scapulas at the same height? | Overwhelm structures: Rhomboid m. , Trapezium m., fascia and paravertebral m. Trigger points at supra- &/or infraspinatus |
| What do the elbows do? Are they lateral or medial when bearing weight? | Elbow laterally: To increase stability and breathing capacity. Overwhelm cranial body<br><br>Elbow medially: Overwhelm biceps braquial, triceps m. & fascia |
| What do the carpal joints do? Are they lateral or medial when bearing weight? | Congenital<br><br>Adaptative: Overwhelm cranial body, wrong alignment of carpal bones<br><br>Stumble: accessory bone |

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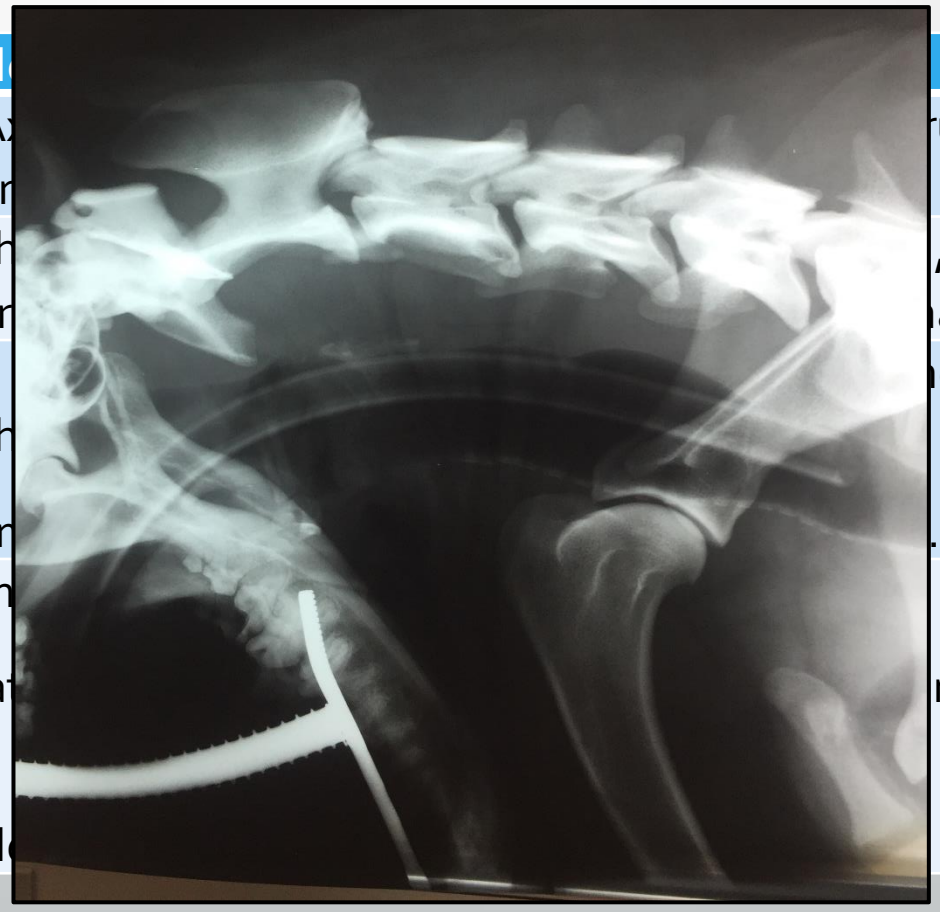
# 2. GAIT ANALYSIS

| Observation | Possibl | |
|---|---|---|
| Can move the head to the right & to the left? | Atlas/A<br>compen | rum rotates |
| Are the scapulas at the same height? | Overwh<br>paraver | , fascia and<br>natus |
| What do the elbows do? Are they lateral or medial when bearing weight? | Elbow<br>Overwh<br>Elbow n | g capacity.<br>. & fascia |
| What do the carpal joints do? Are they lateral or medial when bearing weight? | Congen<br>Adapta<br>bones<br>Stumbl | nt of carpal |



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# 2. GAIT ANALYSIS

| Observation | Possible problem |
|---|---|
| Is the spine aligned? | Paravertebral m. contratures. Vertebral rotation |
| Are the Ilium wings at the same height? | Dorsal or ventral displacement secondary to contractures at the sartorius m., biceps femoralis m. & latissimus dorsi) |
| Can move the tail in all directions? | Sacral Nutation/contranutation. Sacroilíac joint |
| Is the back part/hip at a normal height? | Holding muscles weakness |
| What do the knees do while moving? | Knees laterally: hind limb weakness<br><br>Unstability: Ligaments |
| What do the tarsal joints do? Are they lateral or medial when bearing weight? | Congenital<br><br>Adaptative:Sinews and overweight |
| Is it leaking any part? | Painful |
| Is there any anatomical deformation or further relevant information? | Old fracture, scar, wound, feces, urinating position, walking habits,... |

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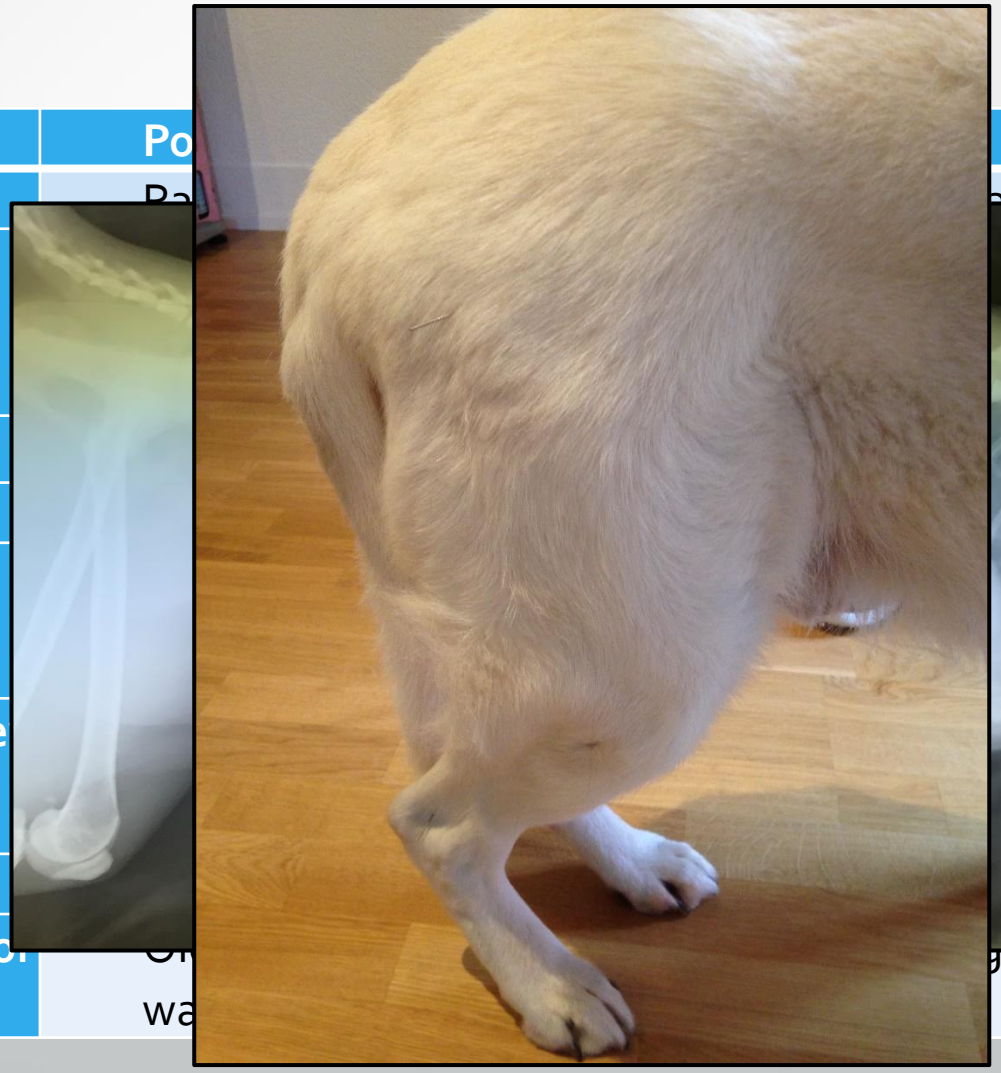
# 2. GAIT ANALYSIS



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# 2. GAIT ANALYSIS

| Observation | Possible problem |
|---|---|
| How is the sitting position? | Hip, sakrum |
| Does it always lie down directly? | Hip, hindlimb muscular weakness |
| Does it always lie down on the same side? | Unilateral |
| How does it stand up? Does it need several attempts or support from the forelegs? | hindlimb muscular weakness<br>Even back problems |

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# 2. GAIT ANALYSIS

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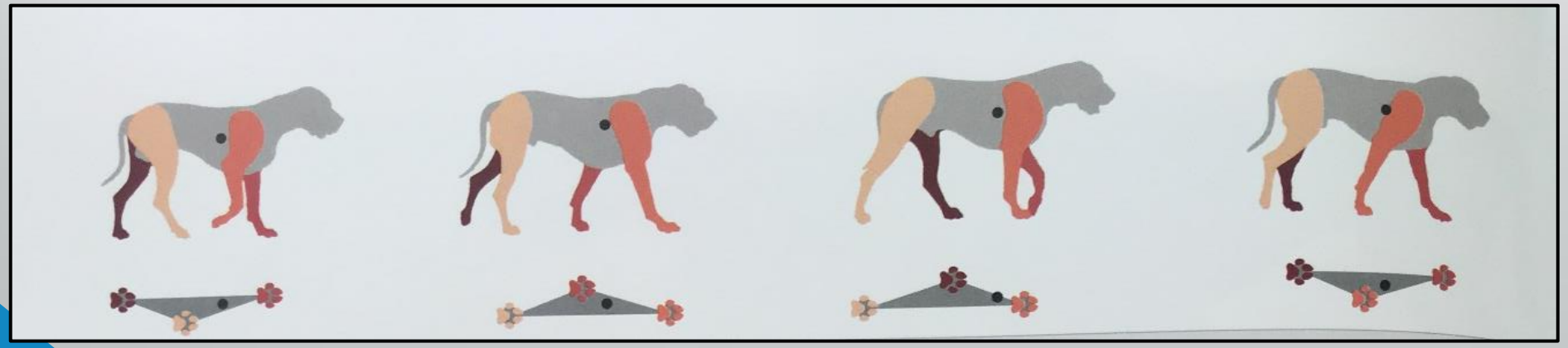
# 2. GAIT ANALYSIS

The locomotion is going to be altered according to the problem and it is going to be different walking, trotting or galloping

- **Walking**: The weight is always shared on 3 legs. The corporal mass center is in the triangle formed. A shorter step is caused because on the involved legs is damaged



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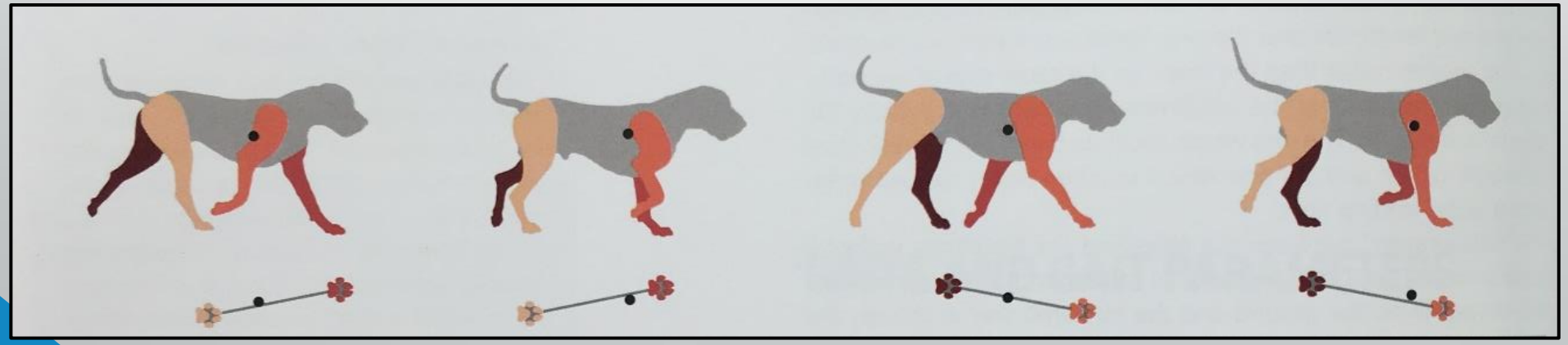
# 2. GAIT ANALYSIS

The locomotion is going to be altered according to the problem and it is going to be different walking, trotting or galloping

- **Trotting**: The weight is always shared on 2 diagonal legs. The corporal mass center is in the diagonal formed. When more than 2 legs are affected the dog prefers trotting



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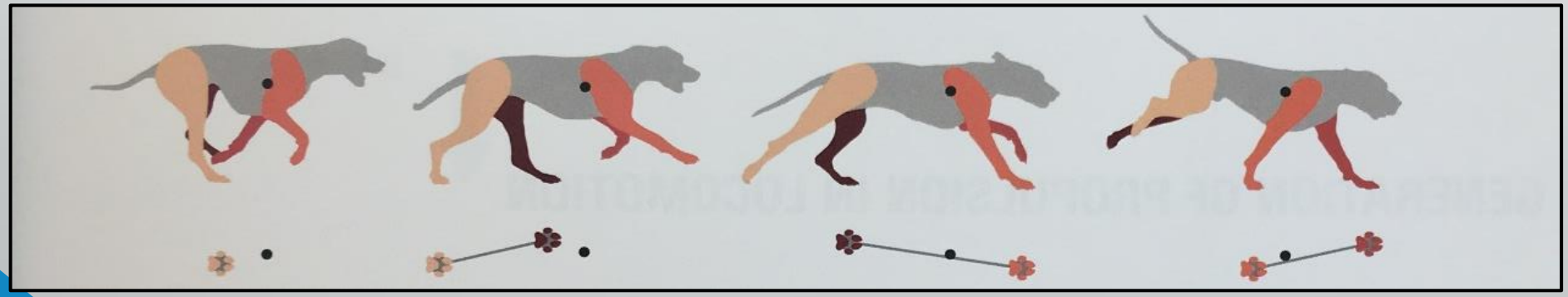
# 2. GAIT ANALYSIS

The locomotion is going to be altered according to the problem and it is going to be different walking, trotting or galloping

- **Diagonal galloping**: The weight is shared on 2 legs. The corporal mass center is in the diagonal formed. The forces formed are stronger. When the problem is the propulsion muscles the dog will barely go galloping



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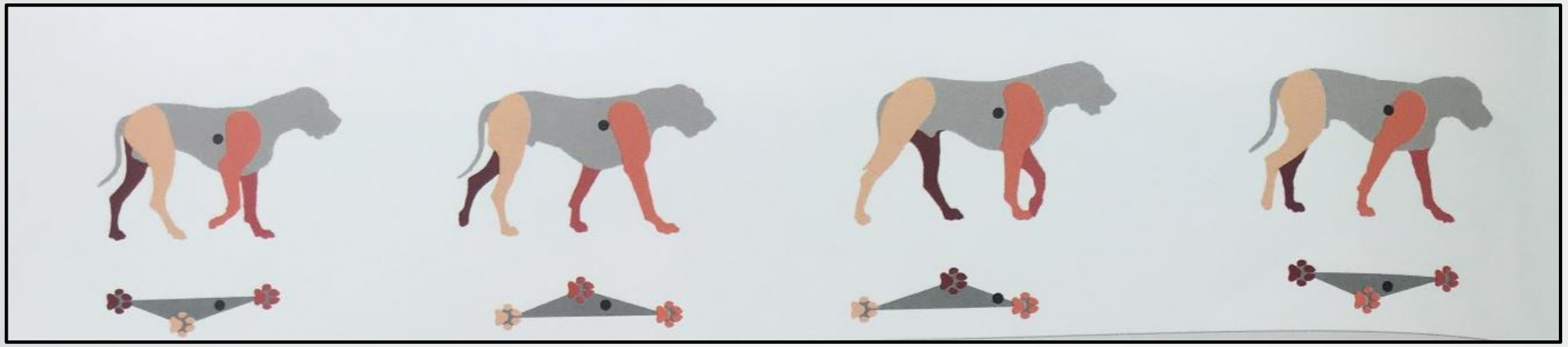

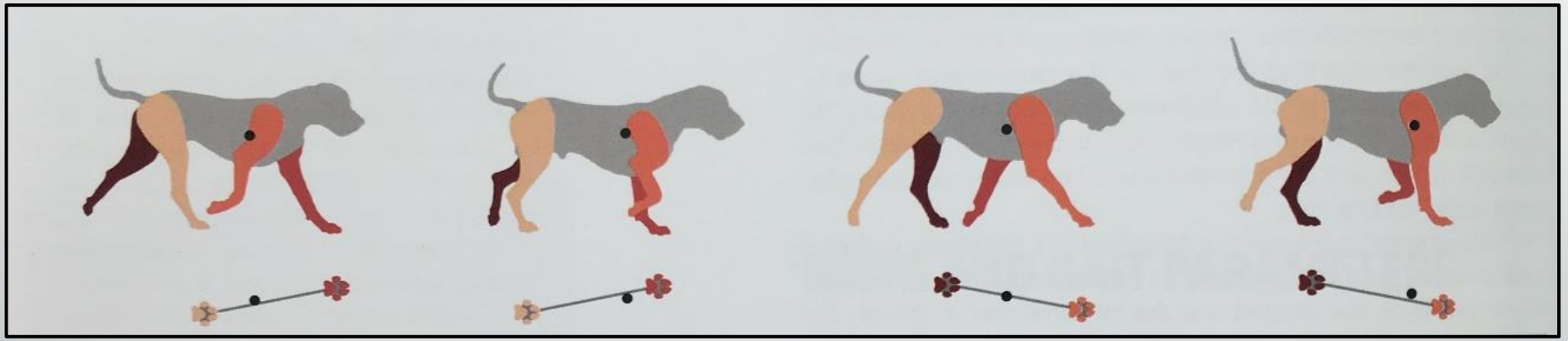

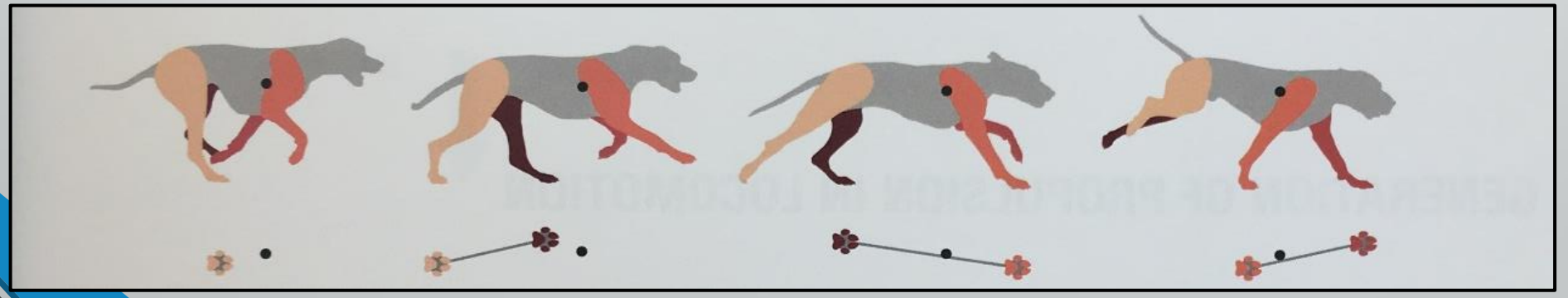

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# 2. GAIT ANALYSIS

- Internal rotation both sides

The limb inside the circle is overwhelmed. The smaller the circle the higher the intensity

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# 3. CLINICAL CASES

- Guide to run a complete observation
  - Front, side, back view
  - Walking, trotting, galloping
  - Focus on an area:
    - Head/neck
    - Foreleg right/left (proximal to distal)
    - Back/spine/sacrum/tail
    - Hindlimb right/left (proximal to distal)

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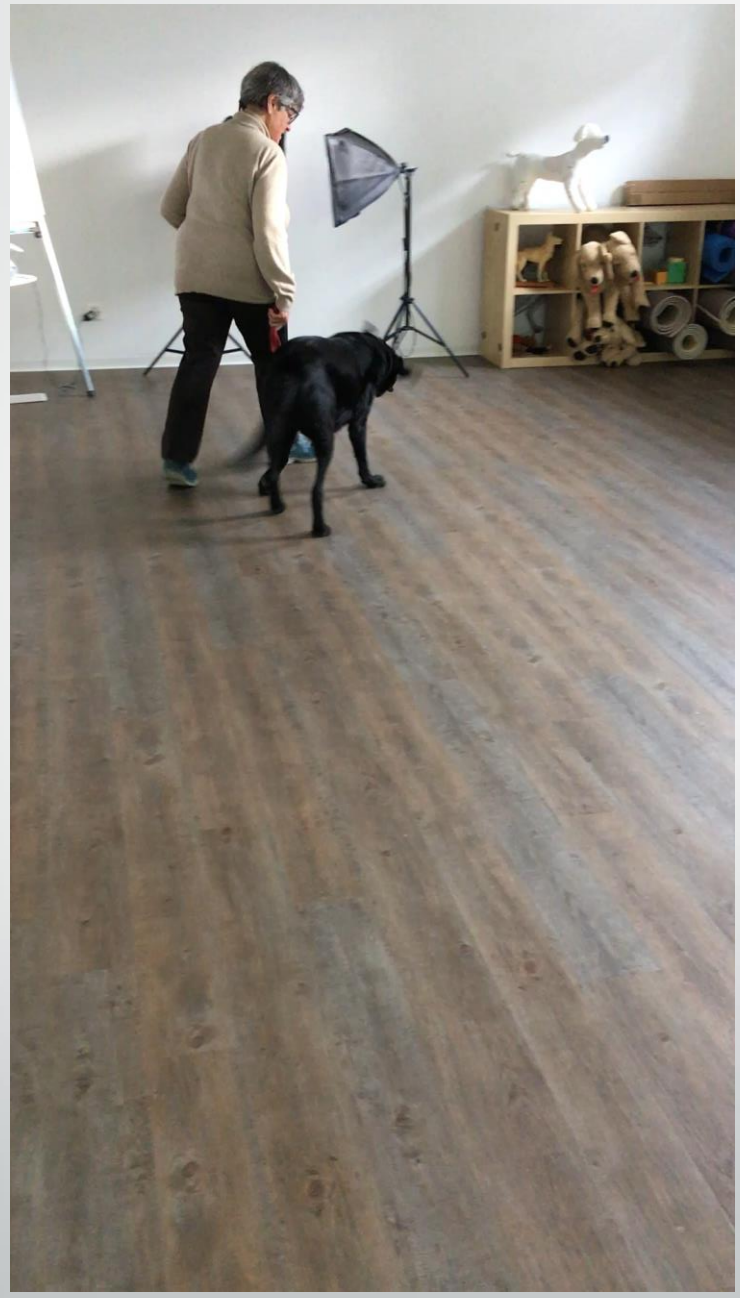

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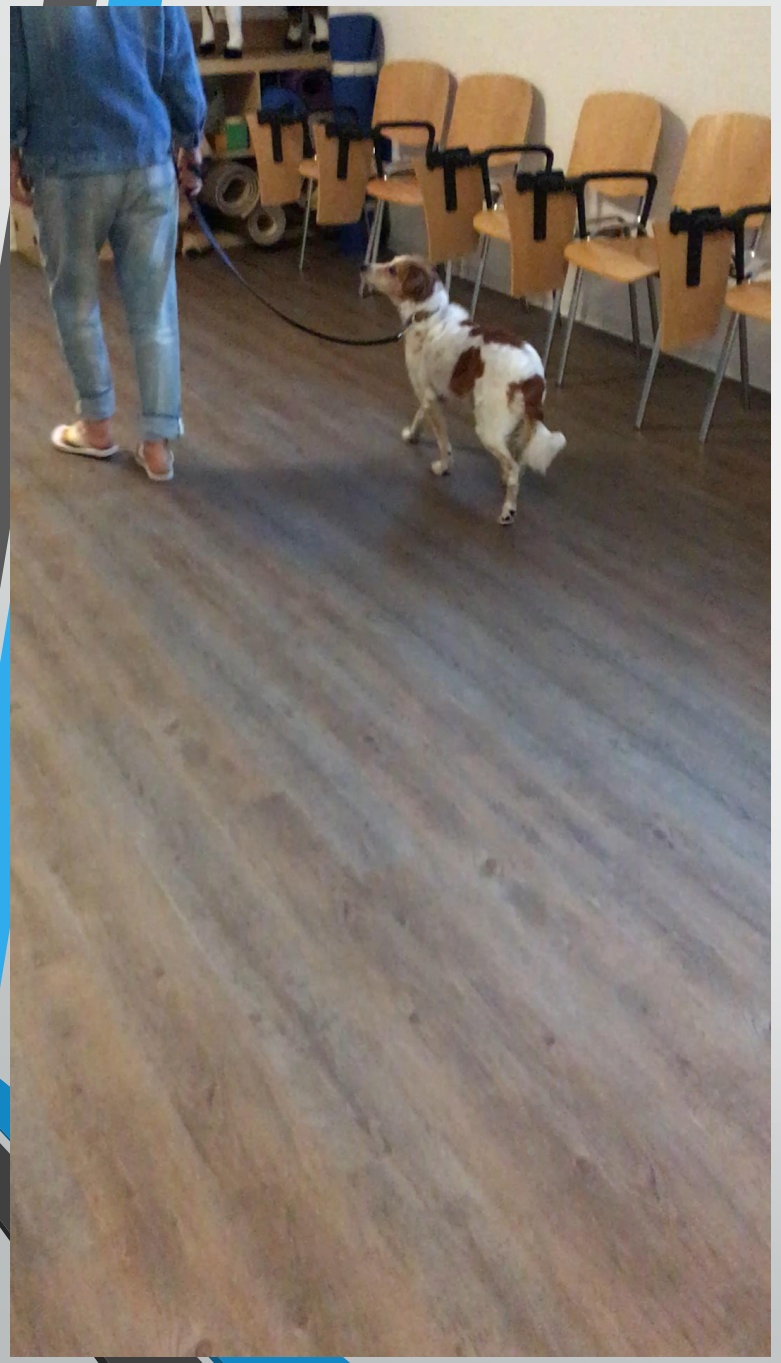

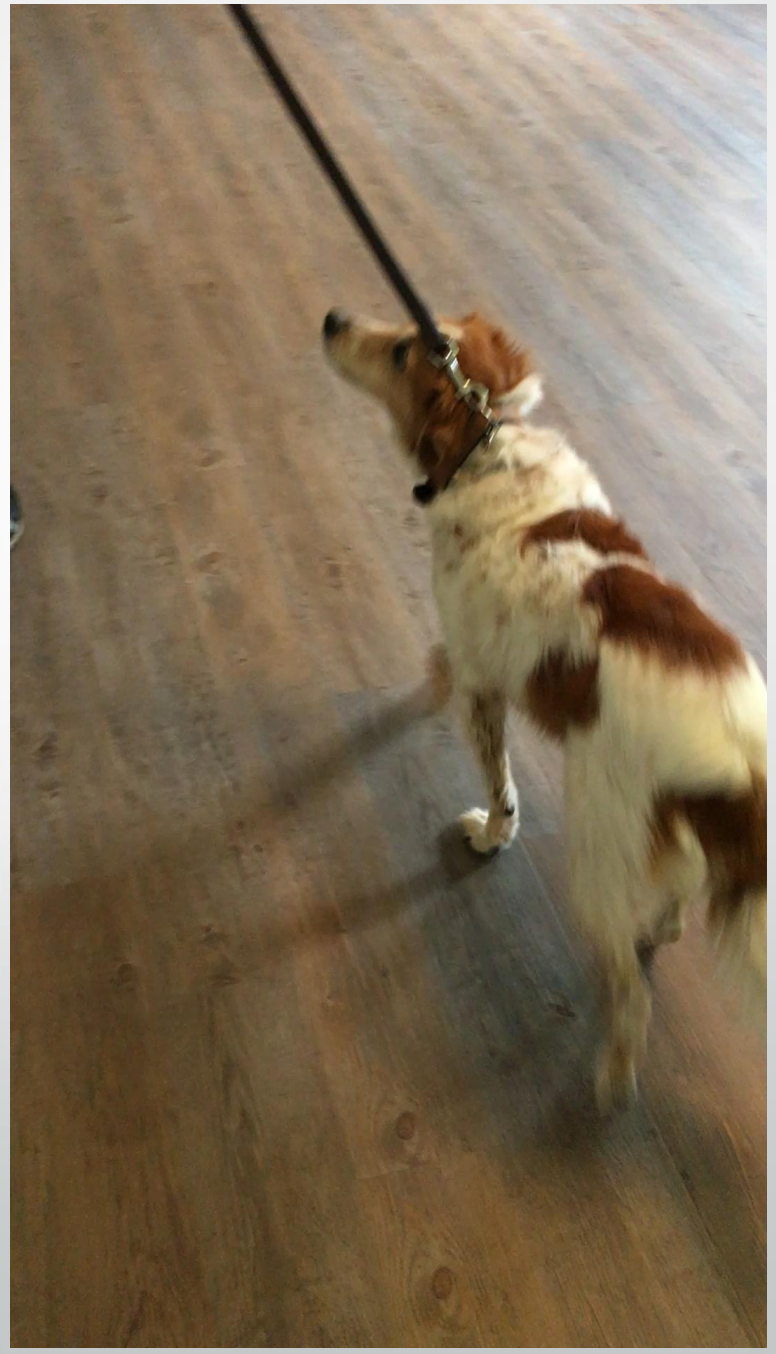

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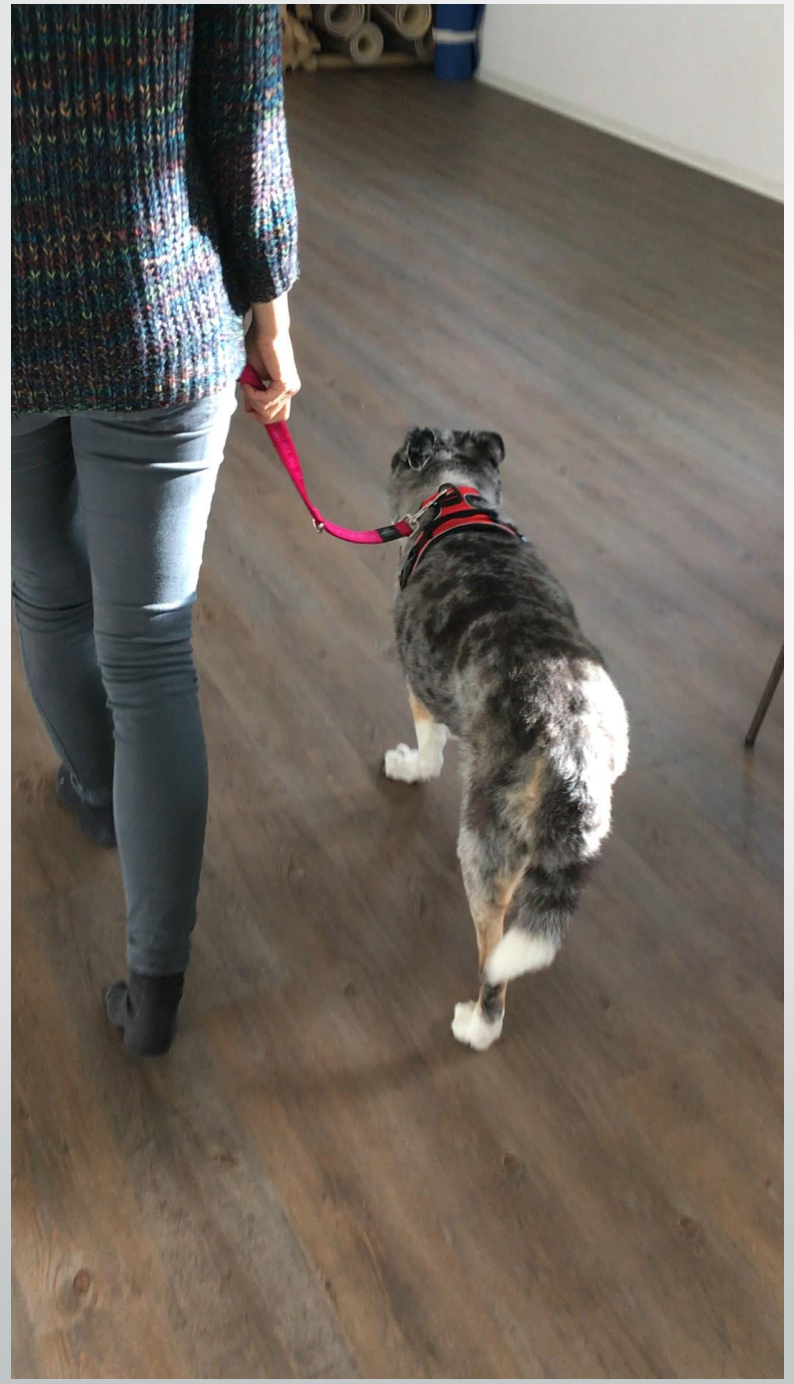

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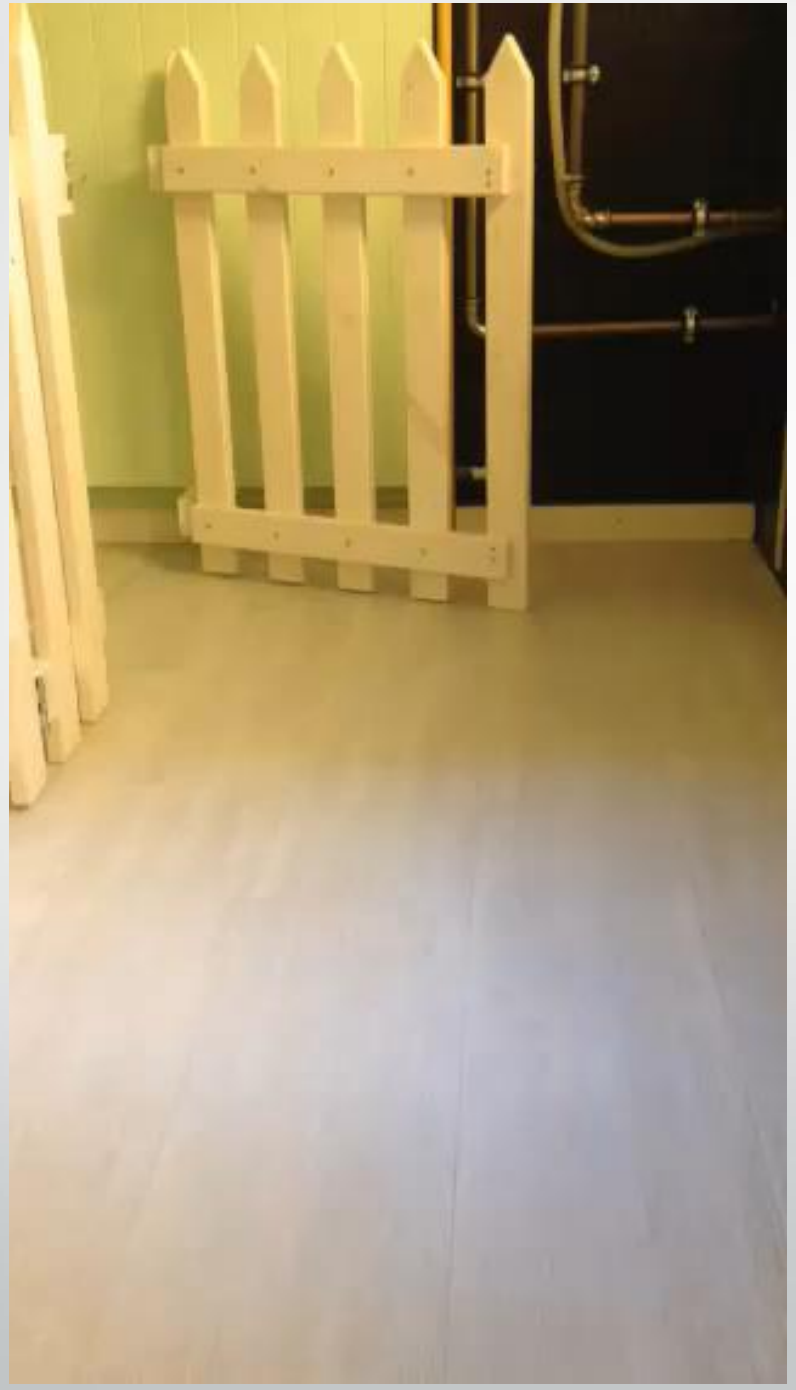

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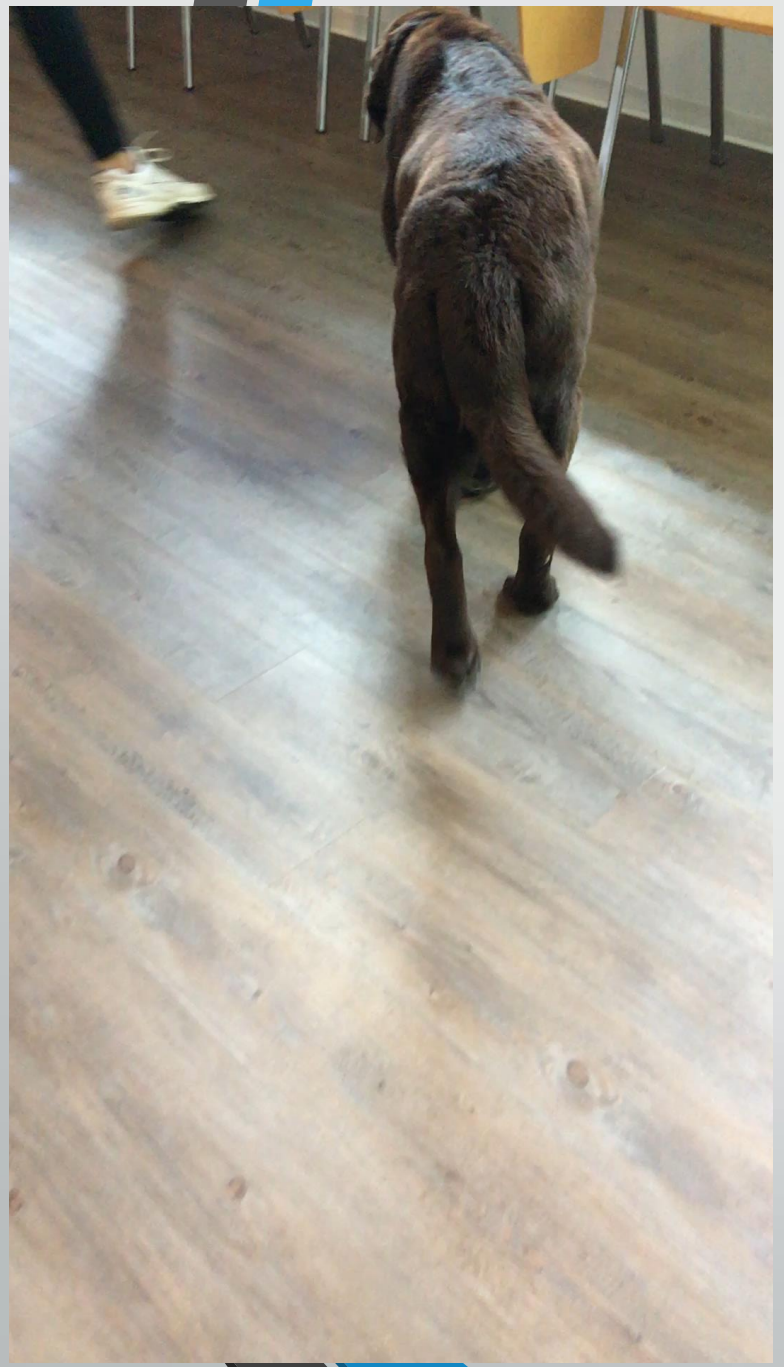

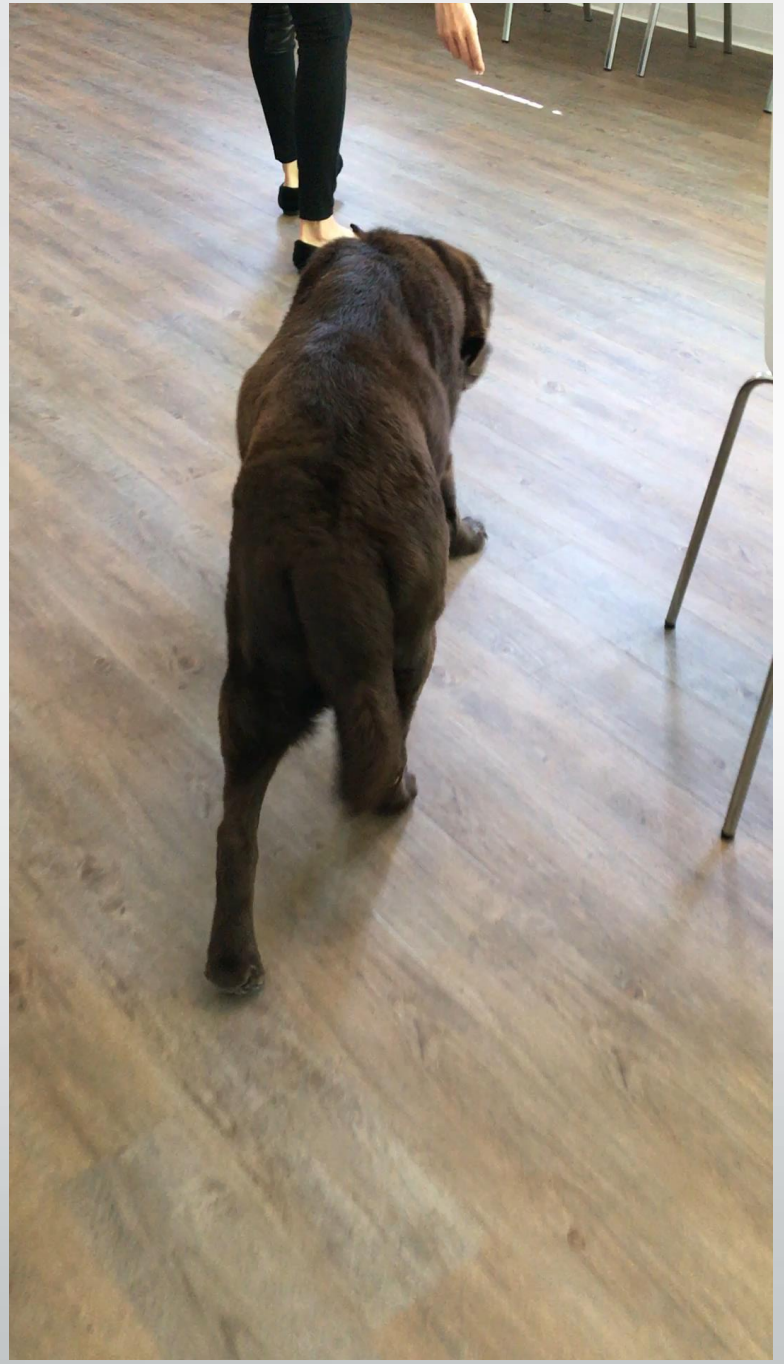

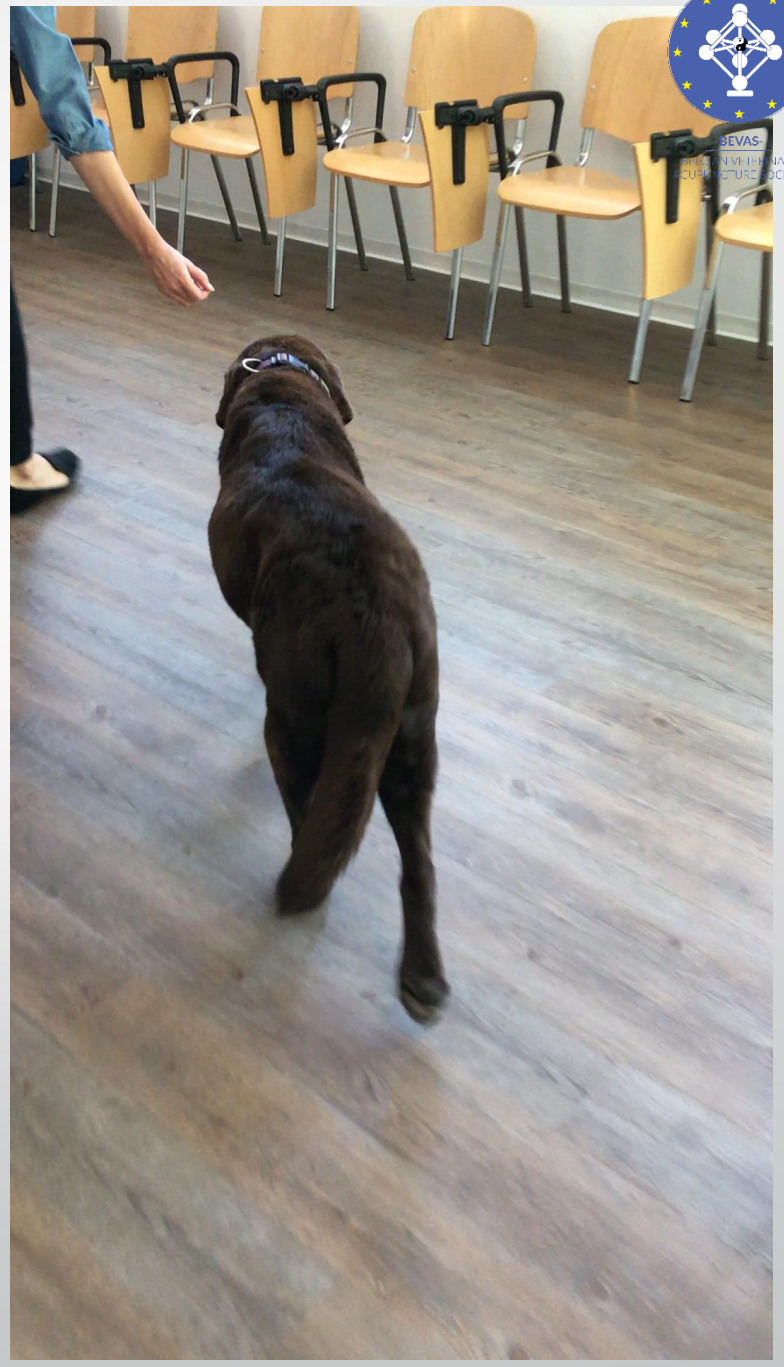

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Baseline Trotting
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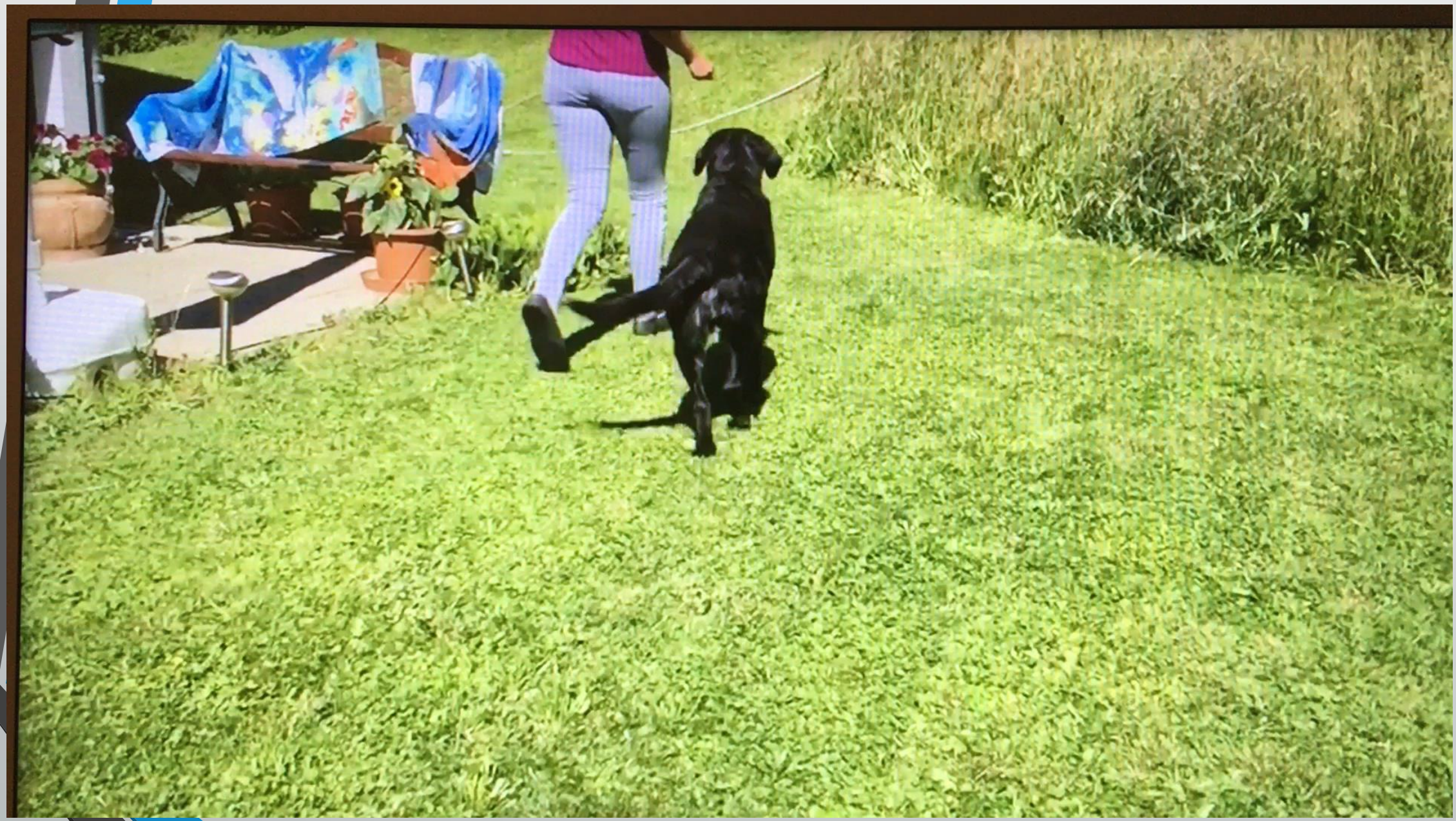

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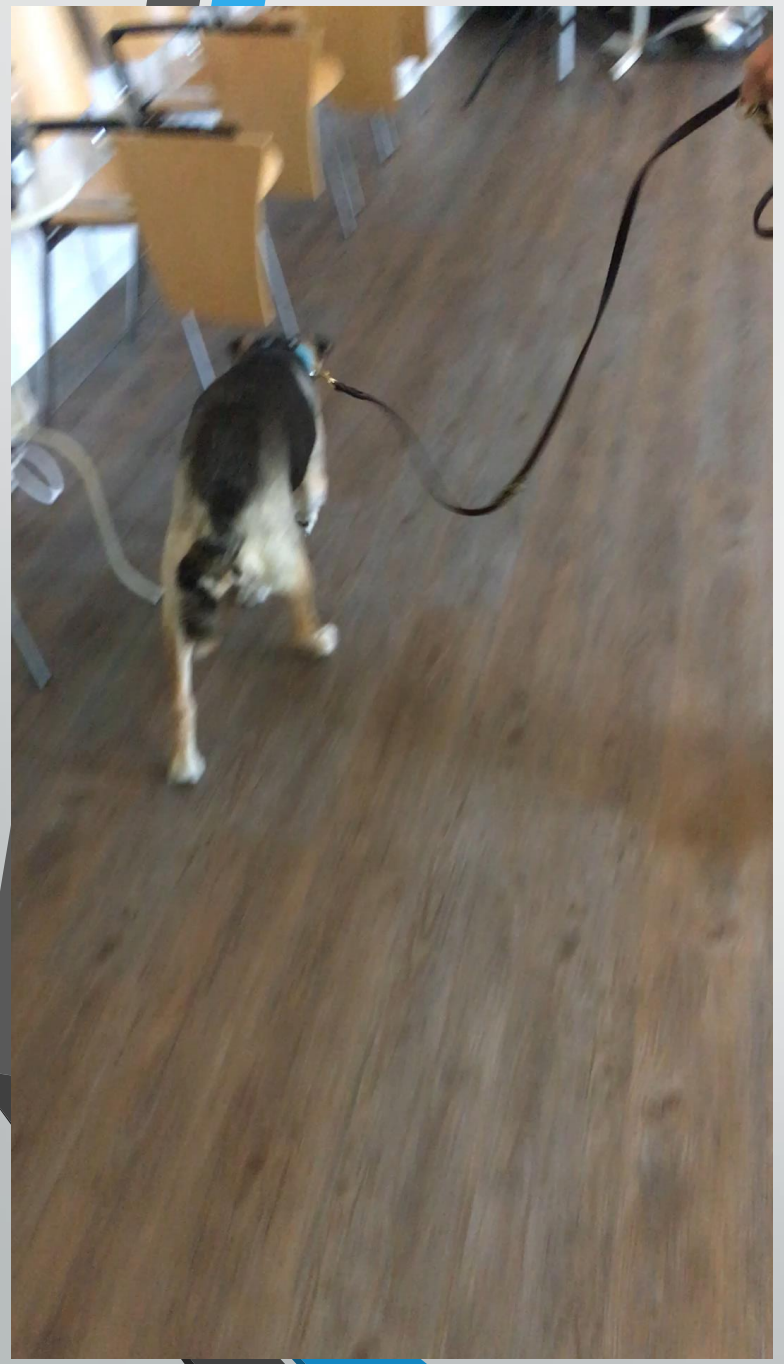

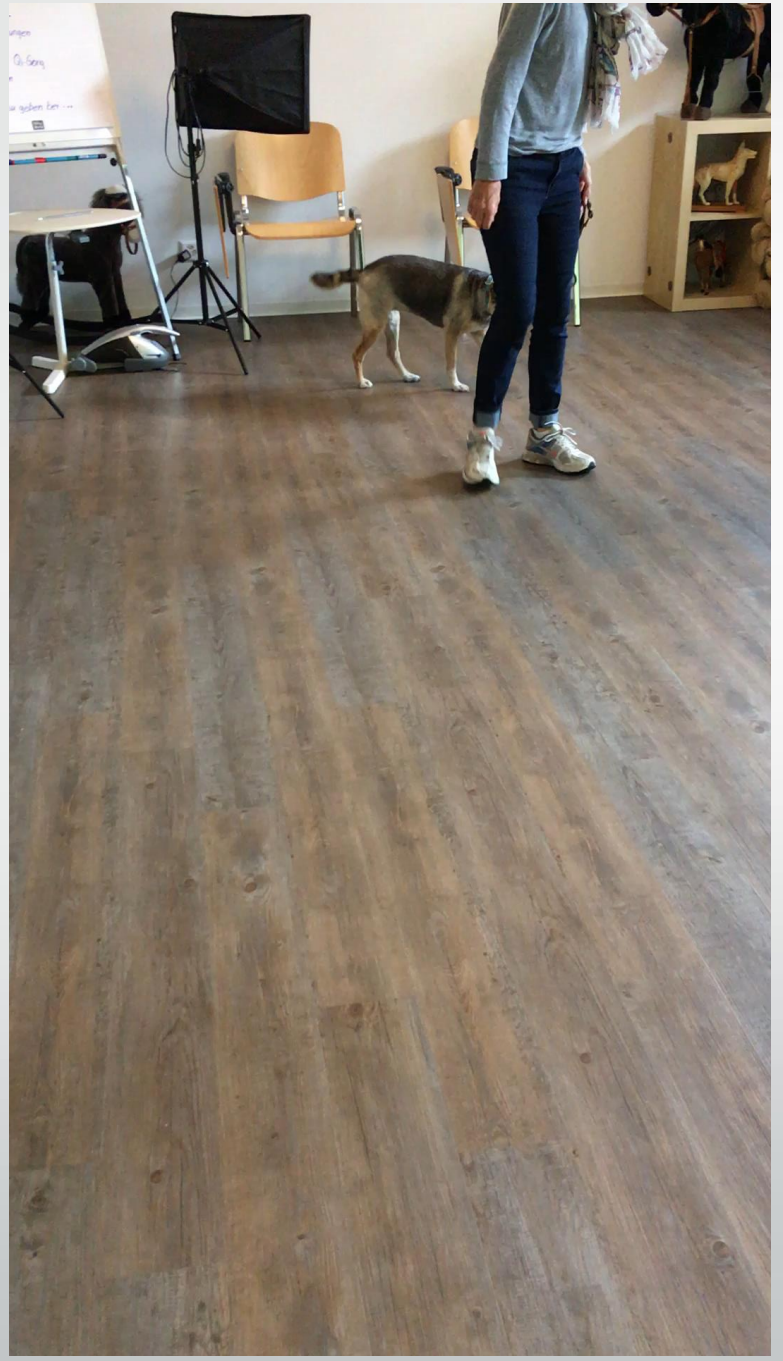

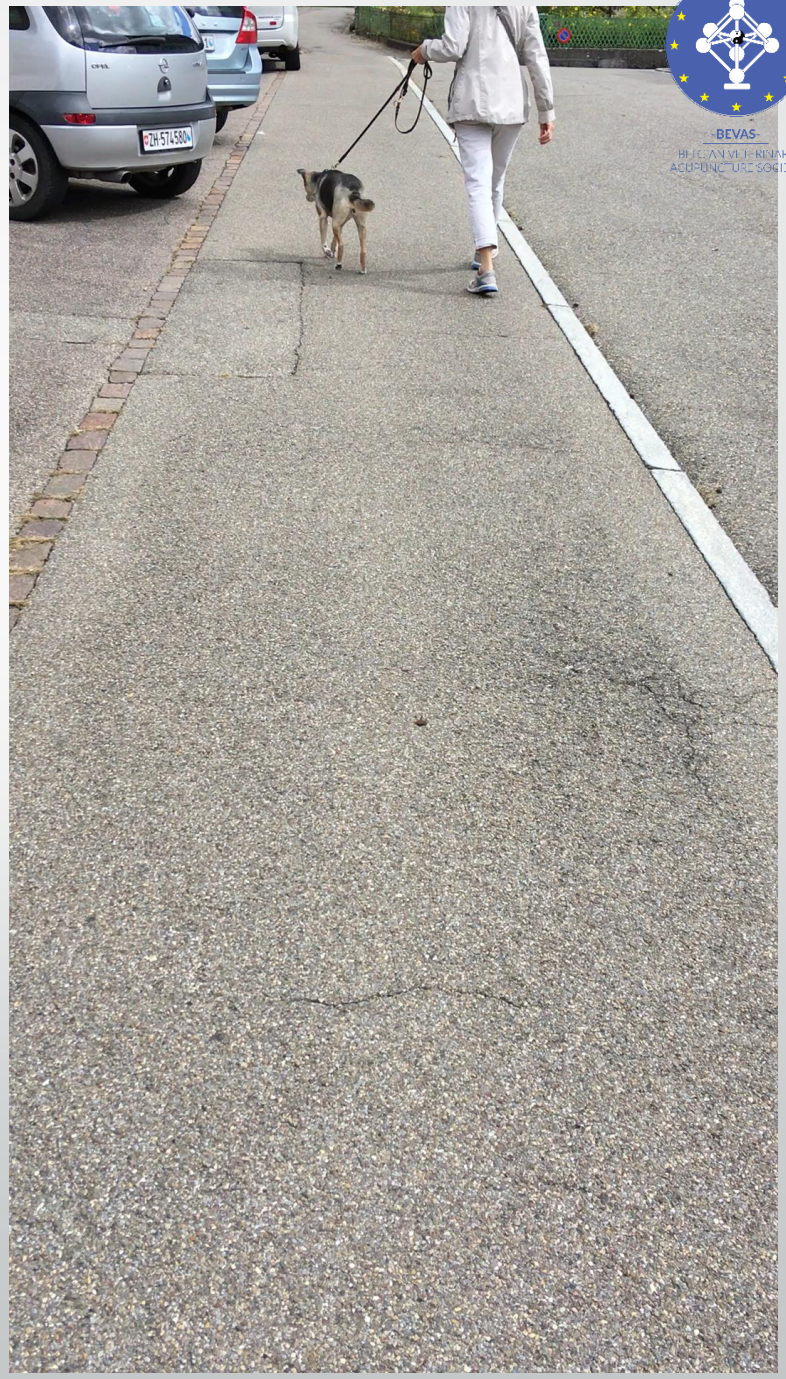

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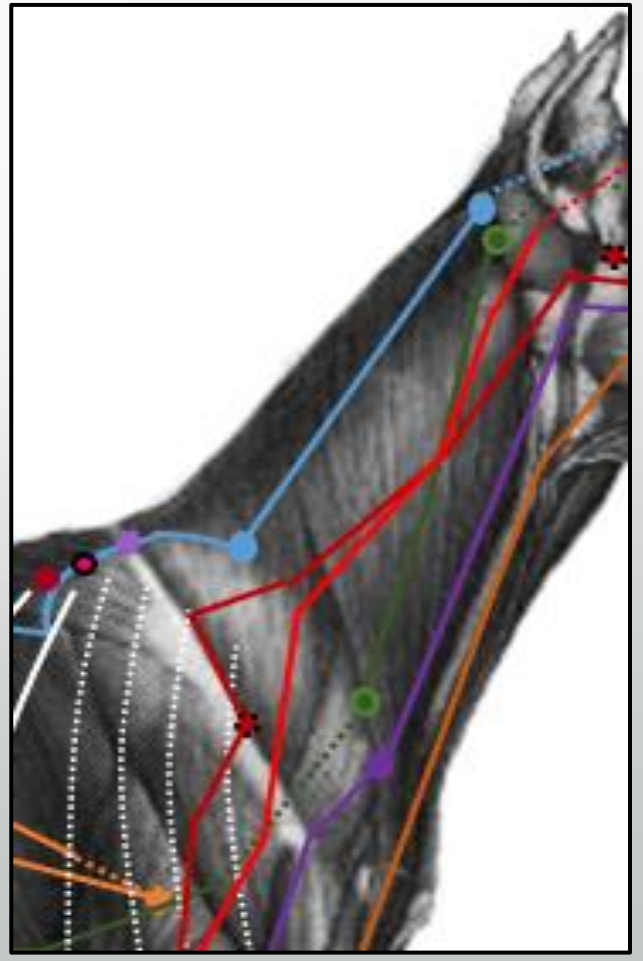
# 4. Acupuncture related to manual therapy

1. **Palpation of the whole body**
2. **Location of painful or abnormal areas**
3. **Relation to the meridians and acupuncture points**



## Neck & C1-C2

- Muscle tone
- Vertebral mobility
- Palpation of the neck meridians

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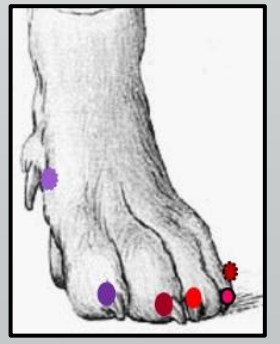
# 4. Acupuncture related [illegible] therapy

**Foreleg**

- Muscle tone and amount
- Mobility of the scapula
- Mobility of the shoulder, ellbow and carpal joint. Touching at the same time the most relevant acupuncture points
- Fascial limitations
- Ting points reaction



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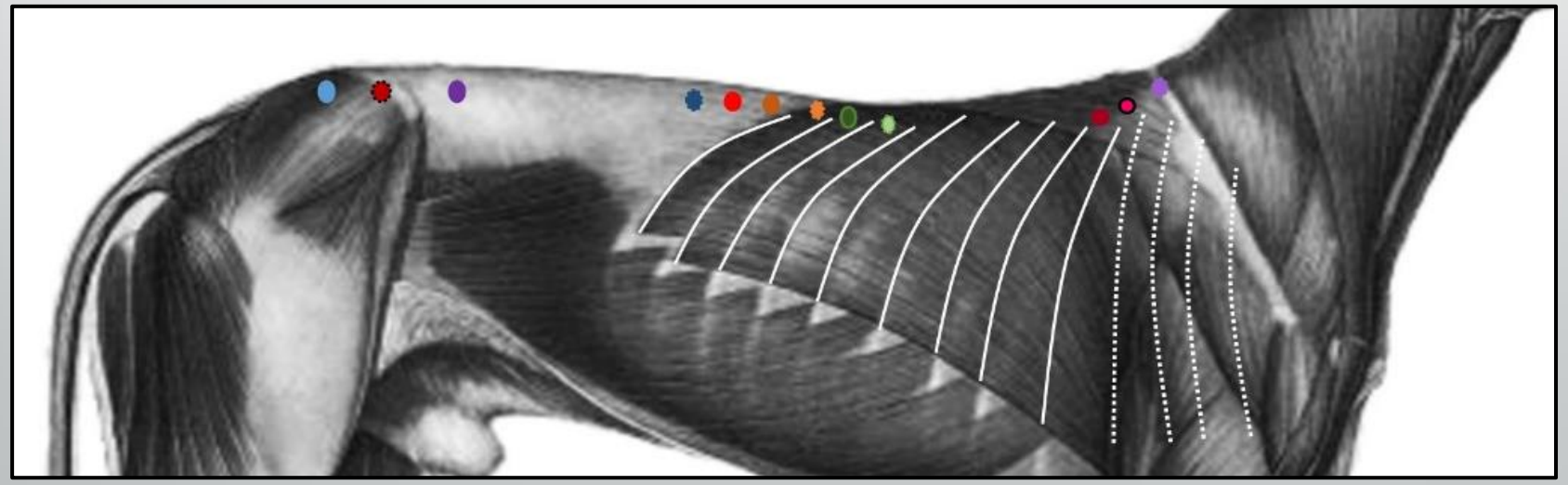
# 4. Acupuncture related to manual therapy

**Core body & Spine**

- Muscle tone inter- & paravertebral m.
- Mobility of vertebral articular facetes
- "vertebral rotations"
- Fascias
- Reaction to dorsal SHU points



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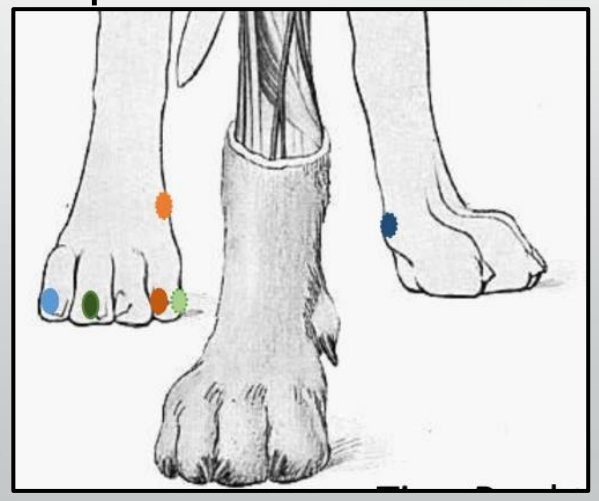
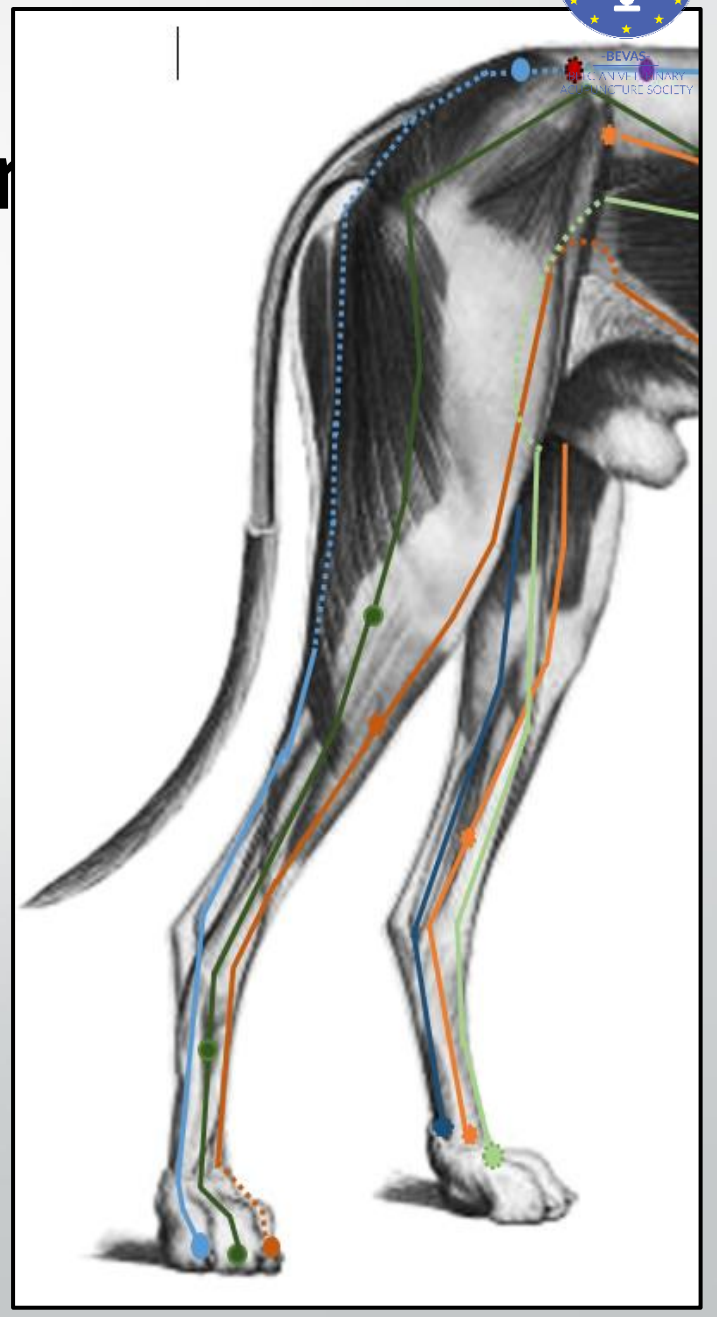
**Hind limb**

- Muscle tone and amount
- Mobility of the hip, knee & tarsus. Palpate the most relevant acupuncture points
- Fascial limitations
- Reaction of Ting points





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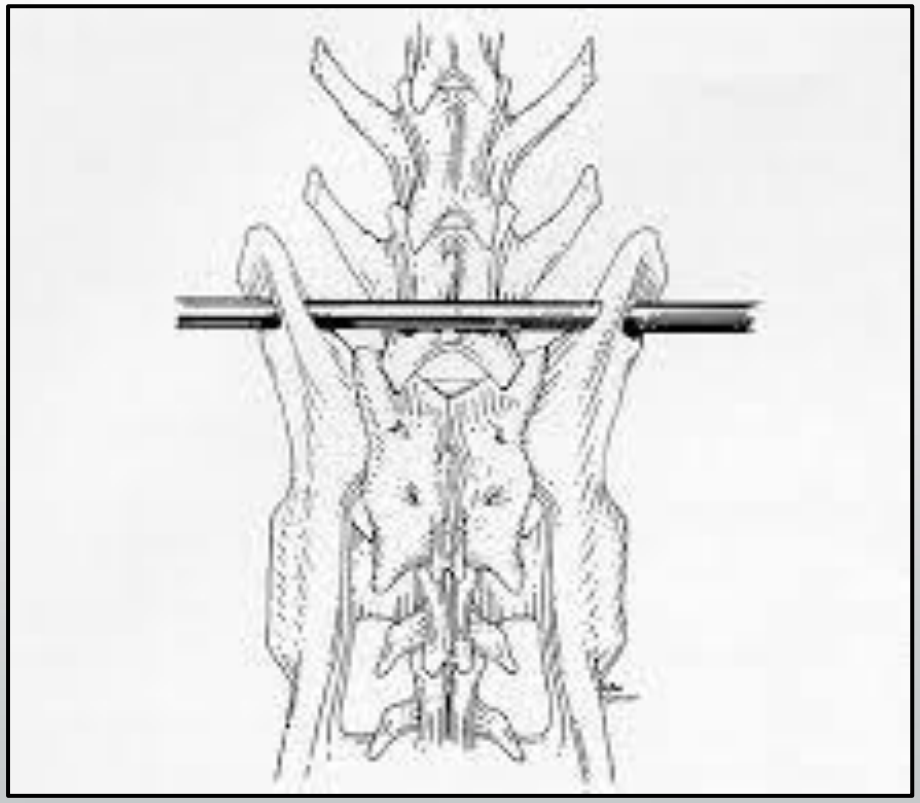
# 4. Acupuncture related to manual therapy

**Sacroiliac joint**

- Sacrum mobility



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# 4. Acupuncture related to manual therapy

| Element | Most common problems |
|---|---|
| **Wood**<br><br>**(German shepherd)** | Neck muscle contractions. Steps without strength and rigid. Hindlimb ataxia. Standing up problems |
| **Fire**<br><br>**(Irish setter)** | Low head position. Neck, back and pectoral muscle contractions. Tripping /trip on |
| **Earth**<br><br>**(Labrador)** | Loss muscular mass, loss of sinews strenght, loss of strength to perform the steps<br><br>Knee problems, hind limb lameness |
| **Metall**<br><br>**(Border Collie)** | Respiratory problems. Hind limb weakness<br><br>Scapla, shoulder, carpal joint problems |
| **Water**<br><br>**(dachshund)** | Spine, hip and tarsal problems. Degenerative disease. Paravertebral m. contractures |

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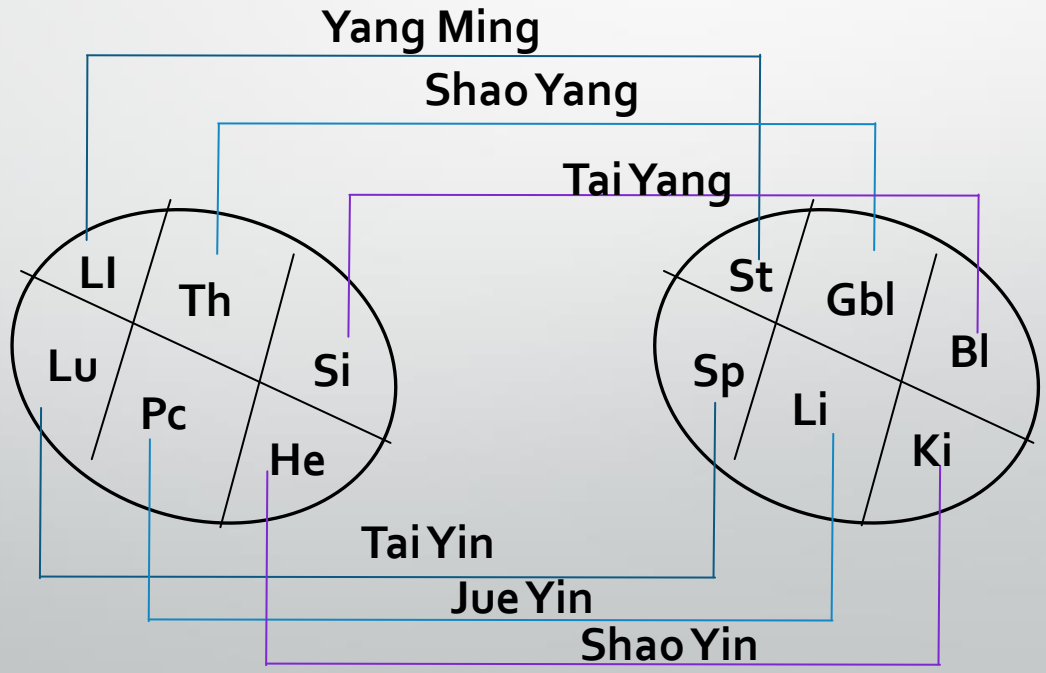
# 4. Acupuncture related to manual therapy

- Energetic levels



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# 4. Acupuncture related to manual therapy

- The 8 wonder vessels with their openning key points:
  - Ren mai (Lu 7) & Chong mai (Sp 4): Ventral
  - Du mai (Si 3) & Yang qiao mai (Bl 62): Dorsal
  - Yin qiao mai (Ki 6) & Yang qiao mai (Bl 62): Lateral relating dorsal with ventral
  - Yin wei mai (Pc 6) & Yang wei mai (Th 5): conects right with left & front with back part
  - Dai mai (Gbl 41): Horizontal belt at the height of L2

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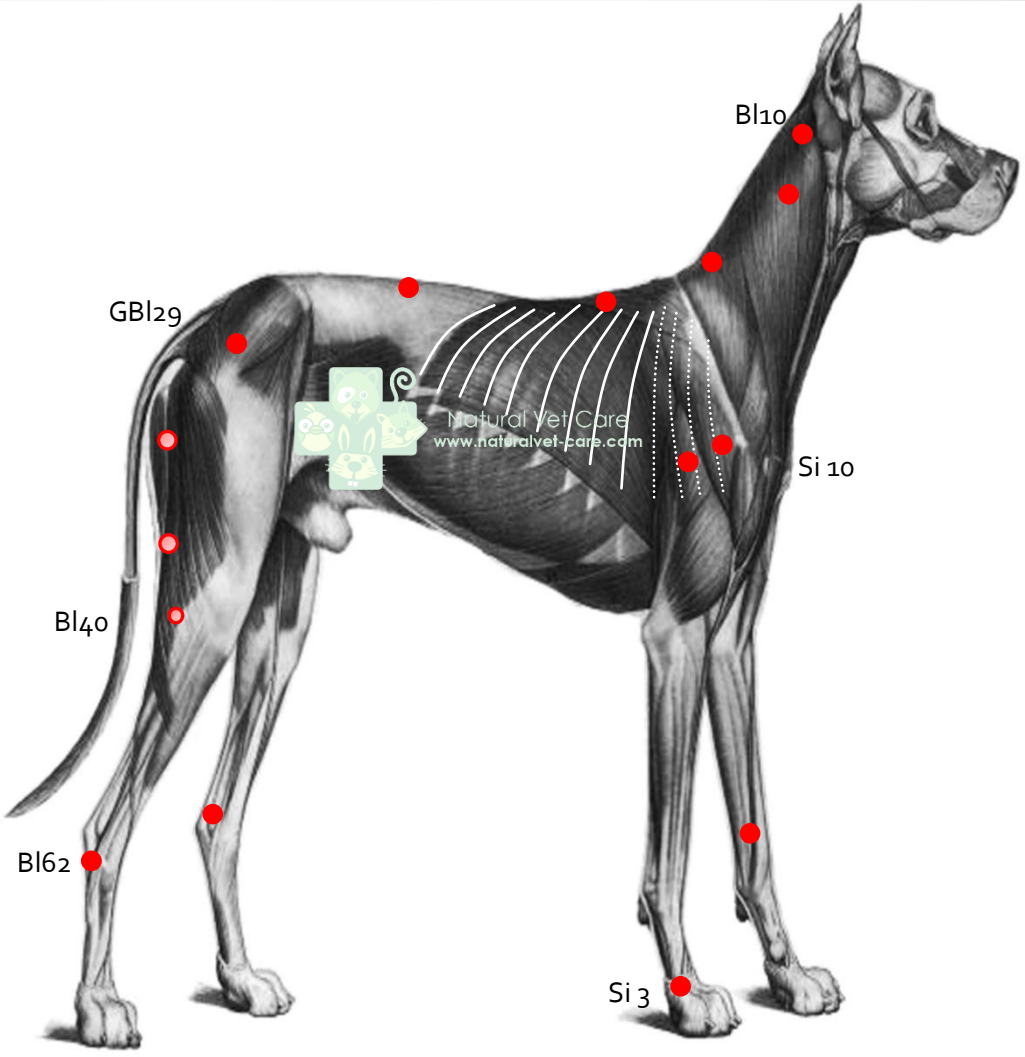
# 4. Acupuncture related to manual therapy

- Dorsal Area
  1. Treat myofascial chronic pain through wonder vessels (Du mai y Yang qiao mai): 3ID & 62V on both sides. 10 – 20 min.
  2. (Less advisable): Add local points on areas with contractures (i.e. Hua Tuo Jia Ji) for the paravertebral m., Gbl 29 for the gluteal m. or the Si 10 for infraspinatus & deltoid m.
  3. Involve divergent meridians: Shao yin (Ki) & Tai Yang (Bl): Bl 40 & 10 Bl. 15 – 20 min.



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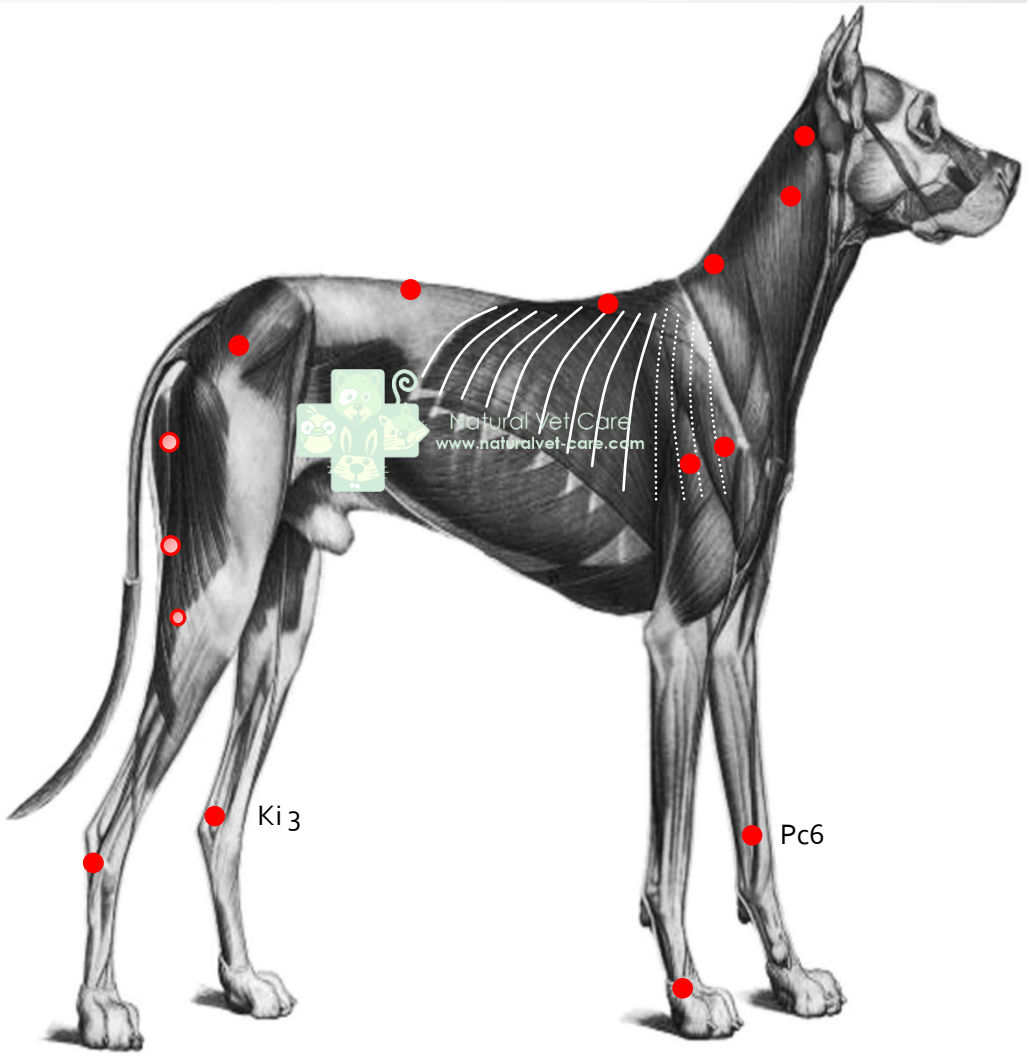
# 4. Acupuncture related to manual therapy

- Dorsal Area
  4. Treat the diaphragmatic tightness related to the rhomboid muscle and paraspinal m. on the left and the iliocostal and lumbar paravertebral m. on the right
  5. Add Pc 6 & Ki 3 if chronic pain to relax the area and avoid adrenal axhaustion
  6. Treat trigger points at the paravertebral m.
  7. Strength the Yin: If Tai Yang (Si & Bl) is reinforced, Shao Yin (He & Ki) must be reinforced as well, i.e. Tonifying with Ki 3 or Ki 7



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# 4. Acupuncture related to manual therapy

- Dorsal Area

8. Main points to support the treatment:

Si 9 for interscapular area

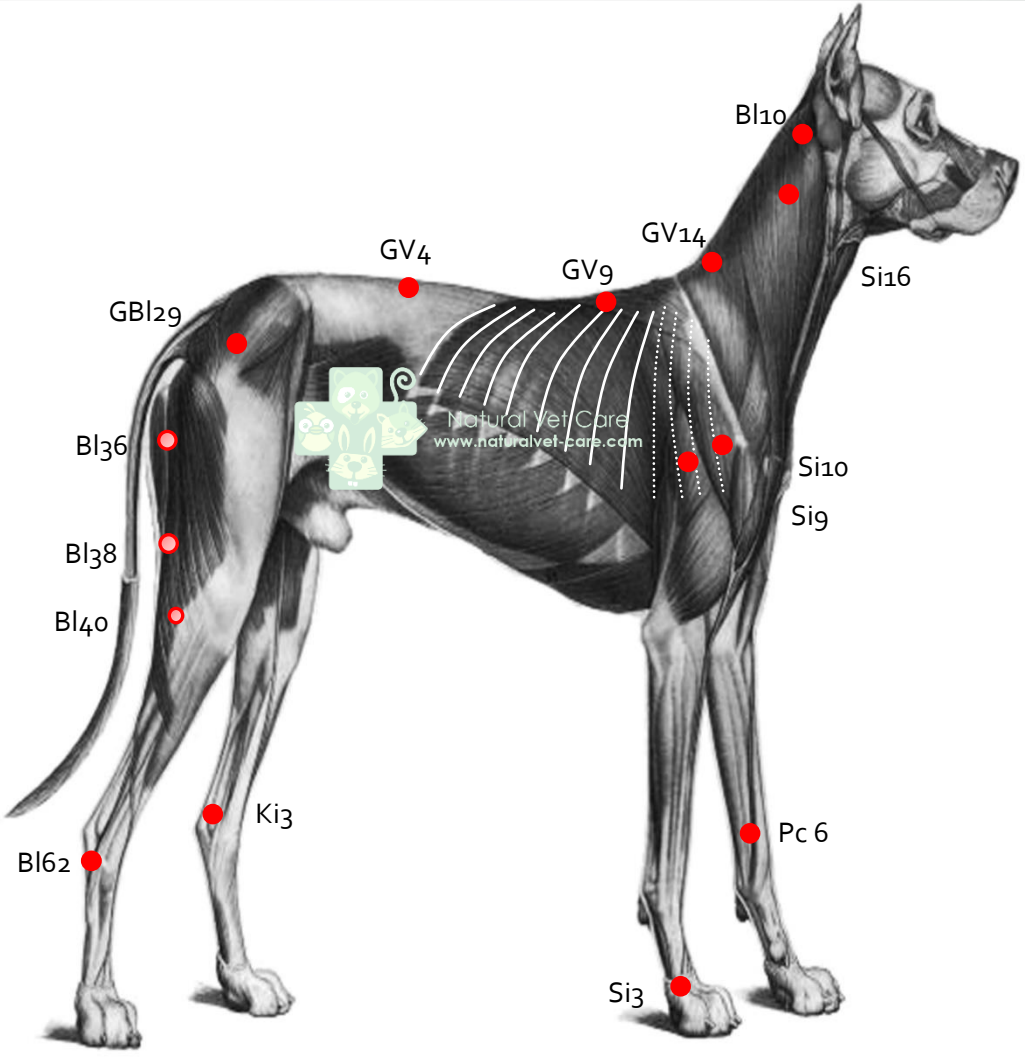
Si 16 for escaleno m.

Bl 36-38 for semitendinosus y semimembranosus m.

GV 4 for lumbar m.

GV 9 for the thoracic m.

GV 14 for the cervical m.



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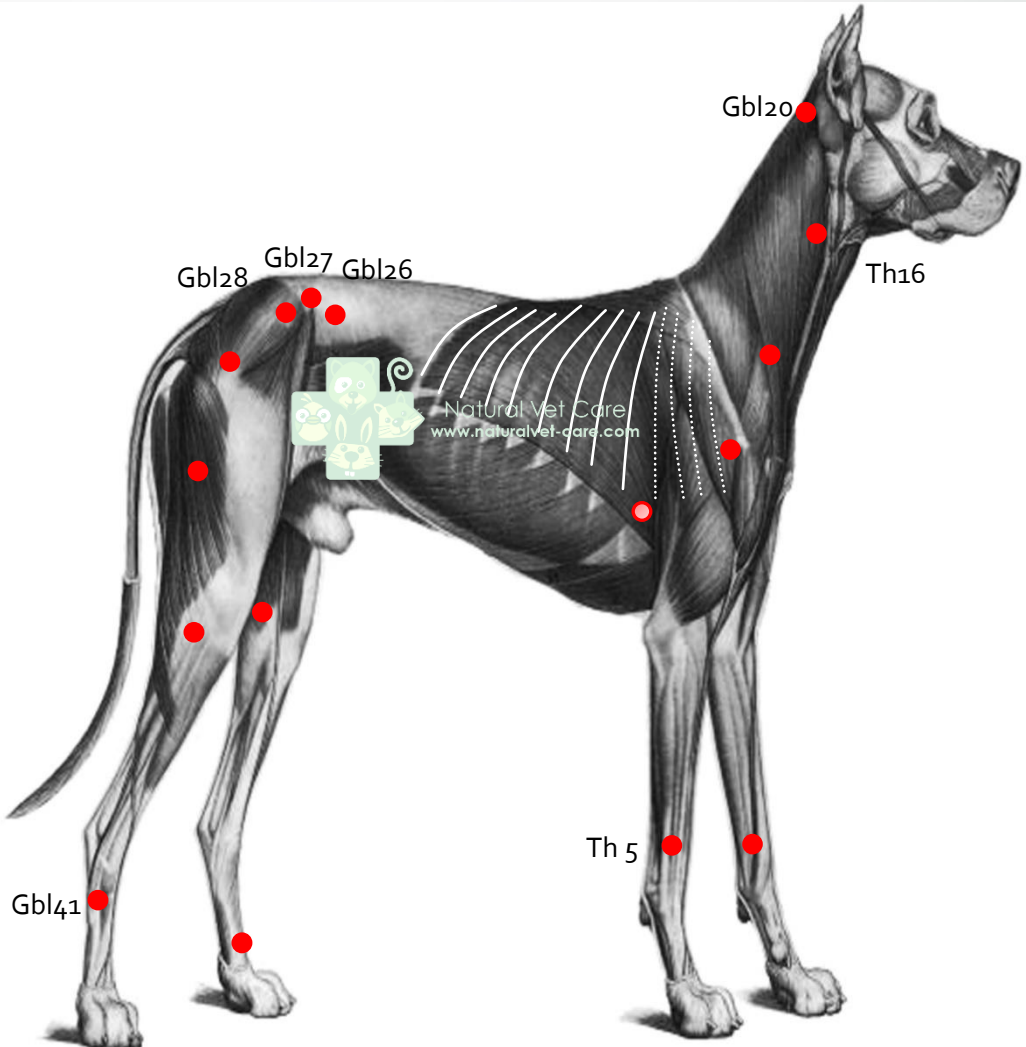
# 4. Acupuncture related to manual therapy

- Lateral Area
  1. Myofascial relaxation/pain relief through wonder vessels dominating the lateral area: Dai mai & Yang wei mai with Gbl 41 & TH 5 in opposite sides. 10 – 20 min.
  2. Add Gbl 26, 27 & 28 to relax the oblicual m. and iliopsoas.
  3. Treat with divergent meridians Th & Pc with Th 16 to release neck muscles. Combine with Gbl 20 to release trapezium m.



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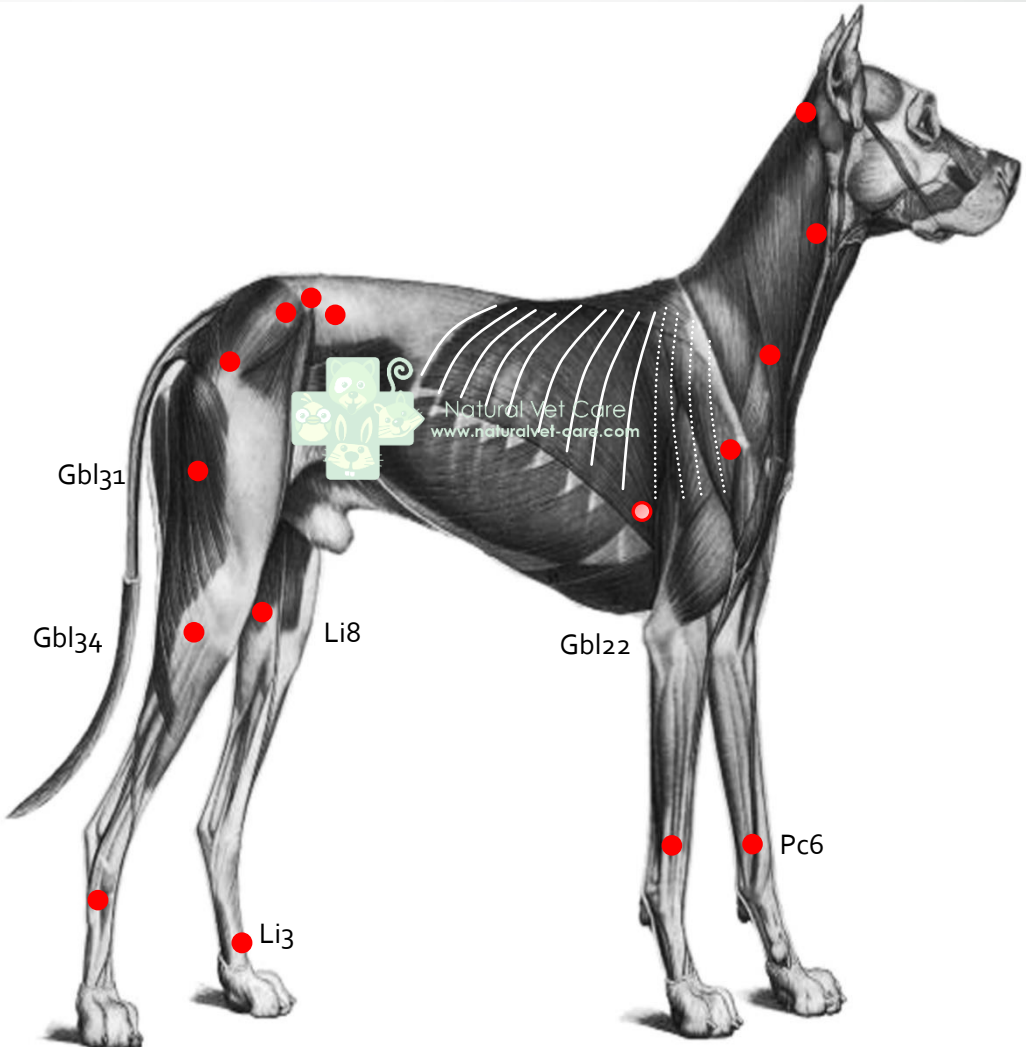
# 4. Acupuncture related to manual therapy

- Zona lateral
  4. Myofascial relaxation with Gbl 22 to release pectoral m. Combine with Li 3 & Pc 6
  5. Release Vasto lateral m. With Gbl 31 and peroneal long m. with Gbl 34
  6. Trigger points of supraspinatus, latissimus dorsi, deltoid & triceps m.
  7. Strength Yin of this area: If Shao Yang (Th & Gbl is strenght , Jue yin (Pc & Li) needs reinforcement, i.e tonifiying Li 3 or Li 8



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# 4. Acupuncture related to manual therapy

- Zona lateral

  8. Main points to support the treatment

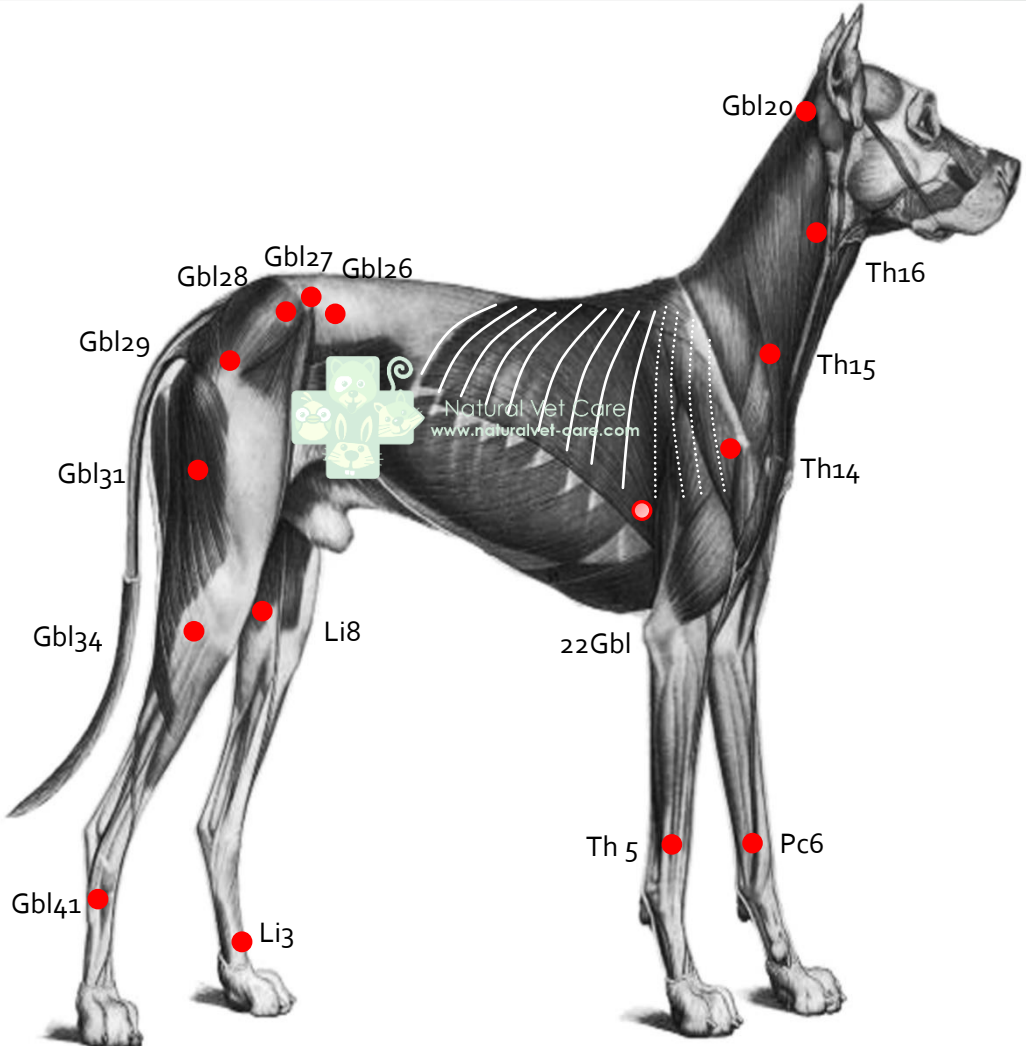
  Gbl 31 for the iliotibial area

  Gbl 29 for the tensor fascia lata m.

  Th 14 for the supraespinatus m.

  Gbl 20

  Th 15 for the supraespinatus m.



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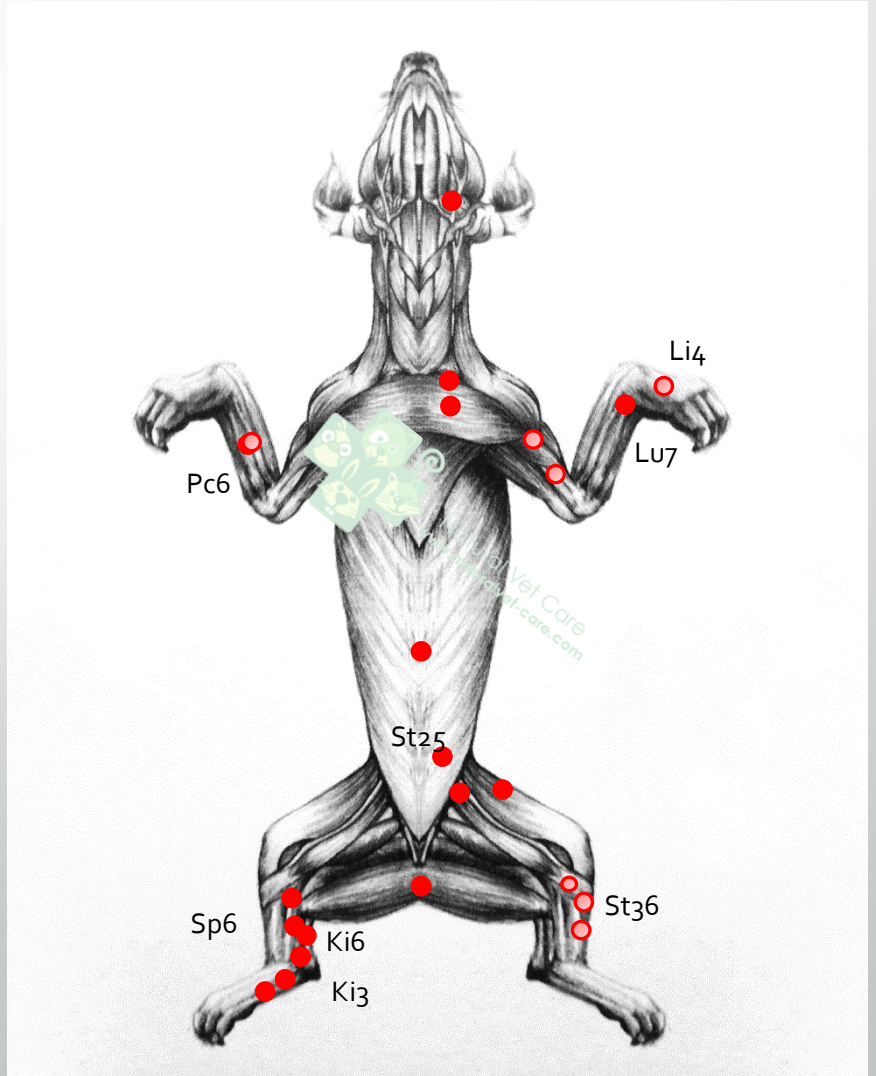
# 4. Acupuncture related to manual therapy

- Ventral Area
  1. Open the ventral area through the wonder vessels Chong mai & Yin wei mai: Sp 4 & Pc6 in oposite sides. 10 – 20 min. Add Ki 3 to reinforce Kidney and the relationship "cranial-caudal"
  2. Include union points of Ren mai (Lu7) & Yin qiao mai (Ki6) if there are problems in the umbilical area
  3. Open ventral Yang ming with St36, Sp6 & Li4. If there is gastrointestinal pain combine with St 25



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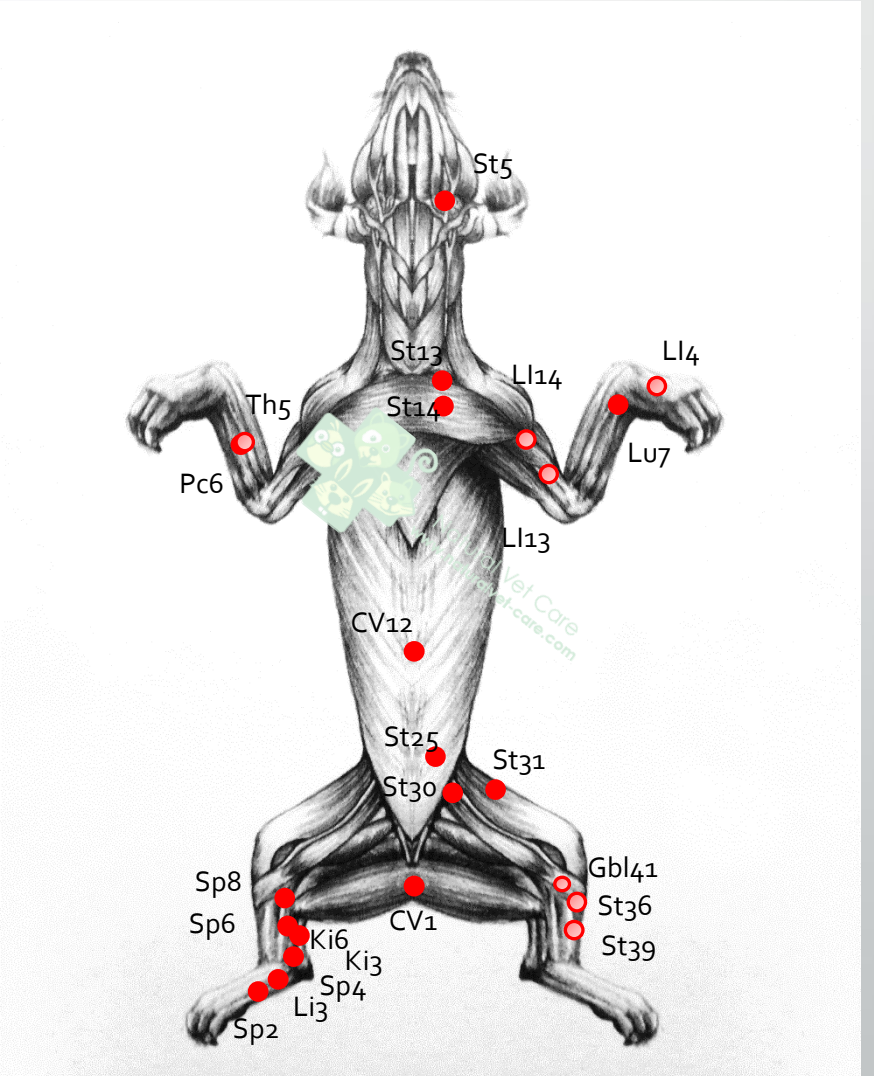
# 4. Acupuncture related to manual therapy

- Ventral Area

4. Use CV 12 & Li3 to open the medium jiao. I.e. cistitis use Li3 & Sp 8
5. Use St30 & St13 to help with the recto abdominalis m.
6. To treat the iliopsoas open Chong mai & Dai mai because it crosses both of them using a contralateral strategie: Sp 4 right, Gbl 41 left, Pc6 left, Th5 right
7. Strength Yin of the area: If Yang ming (LI & St) is reinforced, then Tai yin (Lu & Sp) should be tonified i.e eith Sp 2. Sp 6 should be included as it is the YIN meeting point



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# 4. Acupuncture related to manual therapy

- Ventral Area

8. Main points ti support the treatment:

St 36 – 39 for tibial anterior m.

St 31 for recto femoralis m.

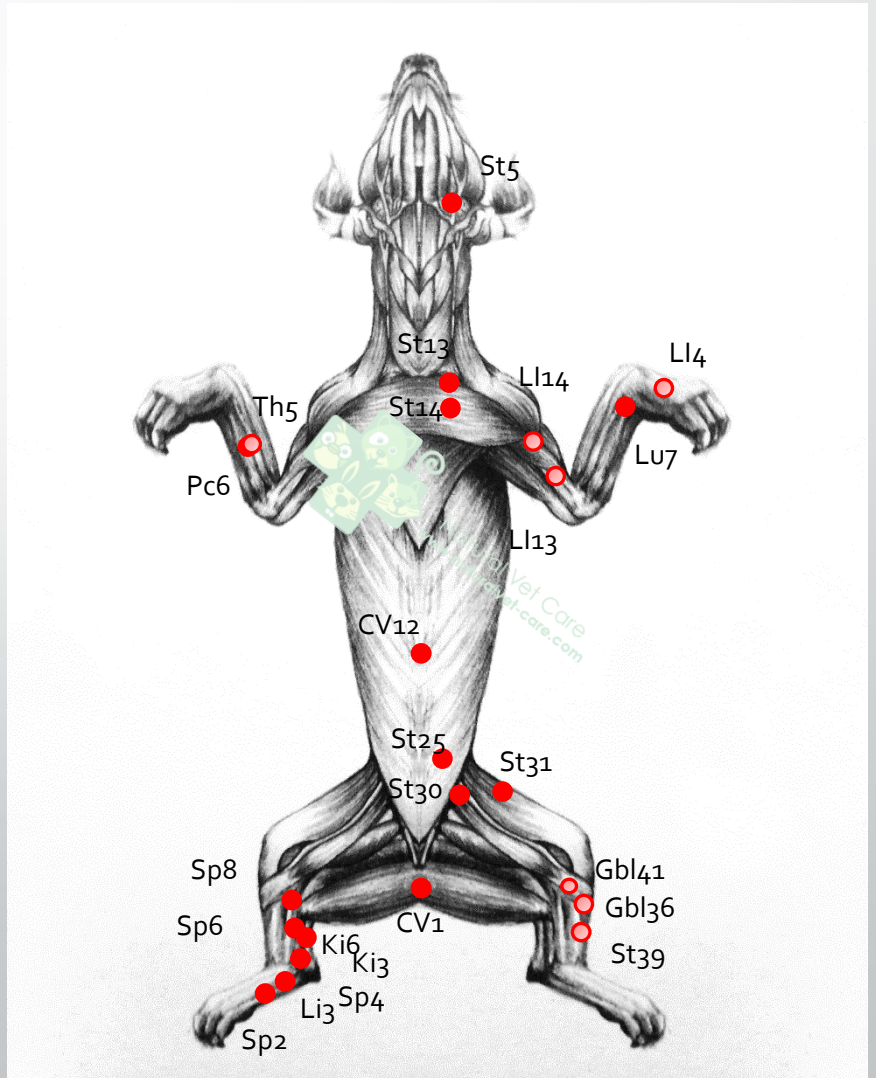
St 14 for pectoral m.

St 5 for maseter m.

LI 13 for biceps braquial m.

LI 14 – 15 for deltoid m.

CV 1 for the pelvic floor



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