



The Concept of an Acupuncture Recipe Based on the Modular Systematization of Acupuncture Points

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Received: October 21, 2022

Published: December 05, 2022

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Abstract

At the present stage of development and practical application of acupuncture, a doctor engaged in reflexotherapy reveals the nature of the lesion of certain organs with the help of modern diagnostic methods that are extremely different from the ancient Eastern ones. But even now, acupuncture treatment has not gone far from the level and approaches of ancient physicians, doctors use those combinations of acupuncture points that have been tested by thousands of years of practice. All this causes the complexity of treatment by acupuncture. The author's experience of forming a plan and constructing an acupuncture recipe based on modular systematization of acupuncture points is presented. This will allow the doctor to make a treatment plan for almost any patient. In order to eliminate errors and avoid a template approach to patients, it is necessary to correctly assess the functional state of the meridians and acupuncture points, understand the causes that caused these disorders, formulate an acupuncture diagnosis based on the leading etiopathogenetic mechanism, and develop a basic line of treatment. For specialists who do not know pulse diagnostics, we suggest using the pressure diagnostics, which allows you to evaluate and analyze the effectiveness of reflexotherapy, to adjust the treatment process in a timely manner. In the U-sin cycle, evaluate the functional state of the meridians, choose the right technique for stimulating acupuncture points.

Keywords: Acupuncture Points (APs); Reflexology; Acupuncture

Introduction

The choice and combination of acupuncture points (APs) is the most complex and responsible issue of reflexology (RT), determining the effectiveness of its application. There are different approaches to making an acupuncture prescription and determining the treatment plan. These include a combination of ATs, simultaneous use of upper and lower extremity ATs, outer and inner sides, etc. [1].

S. Yanagiya offered the scheme of treatment based on the segmental principle of AT selection, supplemented by the influence on the points according to yin-yang and wu-shin theories [2]. E. D.

Tykochinskaya believes that the correct choice of the AT and their combinations as well as the choice of the method of action requires analysis of the pathogenetic essence of the disease, its leading syndromes and symptoms, revealing the mechanisms underlying their development and using first of all the basic and the most effective AT according to the data of the traditional oriental medicine taking into consideration their anatomico-topographic location and innervation connections. At the same time, she singles out points of general action, points of collar zone (influencing cervical vegetative apparatus and higher vegetative centers), segmental and spinal (corresponding to the place of exit of somatic and vegetative fibers) AT, regional points (along the nerve trunks) and local AT [3].

D.M. Tabeeva has developed a detailed scheme of three-level influence:

- The first level - application of miracle meridian key points together with group lo points or application of a separate miracle meridian;
- Second level - application of transverse lo points or lo points based on “upper-lower” relation (in a pair of meridians interconnected in a great circle of energy circulation) and “left-right” (according to the “husband-wife” rule);
- The third level - application of sedative and tonic points of their meridians or points of the five primary elements replacing them, application of sedative and tonic points of other meridians (according to the rule “mother - son”), application of a voice point in combination with a sympathetic point of one’s meridian [4].

Г. Luvsan, based on the recommendations of traditional zhen-tszu therapy, believes that one should not start treatment by influencing the miraculous meridians, it is necessary to choose combinations of points on the 12 paired meridians first. In his opinion, when treating chronic diseases and persistent pain syndromes, the impact on the connecting points (stabilizing lo points, points of group lo, key points of miracle meridians) is of special importance [5].

It is possible to agree with the statement of M.K. Usova and S.A. Morokhov, who believe that further research in the field of the theory and practice of RT should be aimed at substantiation of the general principle of selection of the points of influence, meanwhile we have to use the available and tested by centuries-old practice rules of their combination [6].

Analyzing a variety of properties of AT, possible combinations of their interaction, we come to the conclusion that Nature has taken care of a man, having placed a whole pharmacy on his body, the doctor has to correctly dispose of the opportunity provided, correctly make up an acupuncture prescription (AP), choose the appropriate technique of PT.

Every time has its own rules and laws. A low bow to all those who helped us to comprehend reflexotherapy, however the recommendations listed above are more similar to the formulation of a treatment plan, rather than the AR that we are offered by schemes,

tables by M.K. Usova or Tabeeva. Of course, they are made to simplify the material, but this seriously impoverishes PT. So when do we “turn on” professional medical thinking, which allows us to analyze and predict the healing process?

In traditional ancient oriental medicine, the method of RT was seen as a way to influence the vital energy Qi in order to normalize its flow in the meridians and restore the disturbed balance of yin and yang. Such interpretation of the RT mechanism was the only possible and correct. Recently, the prevailing opinion is that the vegetative-regulating and restorative effect of RT on the body is a response to acupuncture. The mechanism of therapeutic effect is realized through somatic and vegetative nervous systems, their peripheral and central levels. This position is the basis of our method of diagnostics and treatment.

We consider it expedient to acquaint physicians interested in this issue with the unorthodox approach of Zhenjiu therapy [7]. For successful treatment, it is not enough to have basic knowledge of reflexology, acupuncture diagnostics, it is equally important to be able to correctly formulate a treatment plan, draw up an acupuncture prescription (AR), taking into account the pathogenesis of the disease. The treatment plan and acupuncture prescription is an accurate and detailed algorithm of action. It is created taking into account the nature of the disease and pathological manifestations, the time of exposure and the properties of the individual points included in it. The formation of AR, taking into account the mechanism of reflexology, is based on the same principles on which the disease develops (stages of inflammation). The treatment plan should follow the same principles as classical therapy.

Necessary conditions for drawing up a basic treatment plan:

- Established clinical diagnosis;
- Acupuncture diagnosis (after ranking diagnoses and complaints);
- Diagnostics of the functional state of points;
- Formation of the leading etiopathogenetic mechanism.

The functional state of acupuncture points (AP) characterizes its “excess” or “deficiency” identified during pressure diagnostics (increased soreness or reduced sensitivity, increased or decreased tissue turgor over the AP, indicated by + or - signs).

Principal plan

To build it, you need to decide on the main line of treatment:

- Draw up a basic line of treatment (vascular, restorative, etc.), based on the formed etiopathogenesis;
- Choose the frequency and number of procedures;
- Plan auxiliary methods of RT, mei-hua-zhen (MHCh), cupping massage (BM), chiu, etc.;
- Before and after the procedure, ask the patient about the dynamics of his condition.

Goals

- Alignment of “vegetative distortions” (excess/lack) on the paired branches of the meridians,
- Increase of adaptive potential (AII),
- Strengthening the cardiovascular system,
- Improvement of the psycho-emotional sphere.

The principle of building an acupuncture prescription:

- In the first 2–3 procedures, AT with a pronounced vegetotropic effect is used (40–50% of the total amount used in the procedure); also AT with a pronounced “strengthening” effect on the cardiovascular system (20–25%); AT with general strengthening effect (20-25%).
- From 3-4 procedures as a general strengthening action with the use of MHCh, tszyu, (collar zone, thoracic region, lumbar, etc.) and mini-acupuncture systems;
- Introduction of segmental AT;
- Strengthening of the emotional-volitional sphere by the influence of antidepressant action on AT;
- Maximum reduction from the 4th–7th procedure in the number of vegetative-regulating points;
- From the 3-5th procedure, in addition to vegetative-regulating and general strengthening AT, the use of AT with a specific (eg, antispasmodic, antidepressant) action;
- Used AT are used in accordance with their functional state.

When the desired result is achieved, the doctor’s tactics is to maintain the therapeutic effect by influencing the general strength-

ening antibodies, the procedures are carried out every other day or less. In the case of an unstable therapeutic effect due to the low efficiency of AII, the procedures are performed less frequently (every other day, 2-3 days) with a minimum number of needles. The number of AT in the last procedures is from 2 to 4.

Let us give an example of building a basic plan for cervical, thoracic osteochondrosis and some vascular diseases of the head.

Modular systematization of acupuncture points

The RT procedure is carried out taking into account the functional state (excess, lack) of AT.

AT used in the first procedure

- AT vegetative-regulating (40-50%);
- General strengthening AT (20-25%);
- antispasmodic AT (20-25%).

AT used in the second procedure

- HCG therapy of the thoracic spine and collar zone;
- AT vegetative-regulating (40-50%);
- AT for unloading the collar zone (20-25%);
- AT of general strengthening (vasoregulatory) action (20-25%).

AT used in the third procedure

- Segmental AT, for the cervical and thoracic spine (25-30%);
- AT vegetative-regulating (25-30%);
- AT of general strengthening (vasoregulatory) action (20-25%);
- Microacupuncture systems (auriculotherapy, “brush - foot”, etc.);
- AT for unloading the collar zone;
- Anti-depressant effects, etc.

AT with known properties

Vegetative-regulating AT

- Central action: BL10, 11; GB12, 20, 21;
- Peripheral action: PC6, 7; TE5; BL60.

General strengthening

AT: LU2, 7; LI4, 10, 11; ST25, 32, 36, 38, 40; GB21; PC6; ST36. (combination option); GB20; BL60; LI10 (combination option).

AT with a pronounced vasoregulatory effect

- LU7, 8, 9; LI5; ST7; SP4,6; HT3, 4, 7, 9; SI3;
- KI3, 6, 7; PC6; TE5; GB10, 11, 12, 20, 21; LR2, 3;
- GB20, TE5, SP6 (combination option);
- GB21, LU7, BL60 (combination option).

AT with antispasmodic effect

- SI3, 4; BL12; TE5; KI6; LR2(3).
- AT reducing excessive muscle tone of the collar zone: GB20; BL11; PC7; SI3 (MXH, BM).

Hormone-regulating

AT: LI4; TE3, 4, 5, 20; SP6, 7; GB21; TE4; SP6 (combination option).

AT of psychoregulatory action

LU2, 5; LI5; ST36; HT3, 4, 5, 7, 9; PC3, etc.;

- Combination variant - BL11, PC 3, HT7;
- Combination variant - GB21, HT7,4, ST36;
- Combination variant - GB20, HT7, PC3;
- Combination variant - CV17, ST36 in 10-15 min;

Immune-stimulating effect

- ST38(40); LI4; TE17 (combination variant);
- VC17 (18, 19) (combination variant).
- Combination variant - LI4; TE17;
- Combination variant - VC17 (18,19), after 10-15 min ST36 (combination option)

AT organo-strengthening action

- Gastrointestinal tract GB21, PC6, ST36; GB20, PC3, CV12;
- Genitourinary system — BL11, TE5, SP6 (combination option); BL10, LU7, KI7 (combination option), etc.

AT of tonic action

- LU2, 7; LI4, 10, 11; ST25, 32, 36, 38, 40; GB21;
- PC6; ST36 (combination variant); GB20; BL60; LI10 (combination variant).

ATs with pronounced vaso-regulatory action

- LU7, 8, 9; LI5; ST7; SP4,6; HT3, 4, 7, 9; SI3; KI3, 6, 7; PC6; TE5; GB10, 11, 12, 20, 21; LR2, 3;
- GB20, TE5, SP6 (combination option); GB21, LU7, BL60 (combination option).

Example of constructing a principle plan for cervical, thoracic osteochondrosis and some vascular diseases of the head

The PT procedure is carried out taking into account the functional state (excess, deficiency) of the AT.

AT used in the first procedure

- VEGATOR-regulating AT (40-50%);
- General tonic AT (20-25%);
- Antispasmodic type AT (20-25%).

AT used in the second session

- MHCH THERAPY of the thoracic spine and collar zone
- Vetoregulatory therapies (40-50%);
- AT for collar zone unloading (20-25%);
- AT with tonic and vaso-regulating action (20-25%).

AT used in the third session

Segmental AT for cervical and thoracic spine (25-30%);

- Vetoregulatory AT (25-30%);
- General tonic-vascular-regulating AT (20-25%);
- Micro acupuncture systems (auriculotherapy, hand-foot or other);
- AT for unloading of the collar zone;
- General strengthening ATs, etc.

AT with known properties

Vetoregulatory ATs

- Centrally acting: BL10,11; GB12,20,21;
- Peripheral action: PC6,7, TE5, BL60.

AT of general tonic action: LU2,7; LI4,10,11; ST25,32,36,38,40;

- Combination variant - GB21, PC6, ST36;
- Combination variant - GB20, BL60, LI10.
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AT with a pronounced vaso-regulatory action

- LU7,8,9; LI5, ST7; SP4,6; HT3,4,7,9; SI3; KI3,6,7; PC6; TE5; GB10,11,12,20,21; LR2,3;
- Combination option - GB20, TE5, SP6;
- Combination option - GB21, LU7, BL60.

AT with antispasmodic action:

- SI3,4; BL12; TE5; KI6; LR 2 (3);
- ATs that reduce excessive muscle tone of the collar zone: GB20; BL11; PC7; SI3 (MHC, BM);
- Hormone-regulating ATs: LI4; TE3,4,5,20; SP6,7;
- Combination option - GB21, TE4, SP6;

Conclusion

The modular grouping of AT allows the doctor to quickly navigate among the indications for the use of points, to form a treatment plan for almost any patient.

The detailed technique of AT irritation (harmonization towards sitting/toning) allows you to get a greater therapeutic effect.

The method is based on the principles of traditional oriental medicine, the doctrine of its three main links (method, moment, place) and their correct interaction. The correct choice of the method of exposure, taking into account the initial functional state of the body and its biologically active points in the mechanism of reflex action of various stimuli, is a guarantee of a successful therapeutic effect. Knowledge of etiopathogenesis, knowledge of press diagnostics, the ability to analyze and rank complaints allows you to form an acupuncture prescription, this brings the points of view of classical acupuncture and European medicine closer.

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