

# CHAPTER ONE

## BASIC KNOWLEDGE

### 新針灸治療法

英文部份

#### I. TECHNIQUE OF ACUPUNCTURE

##### (I) Instruments of Acupuncture

There are three kinds of stainless steel needles: Hao Chen, San Ling Chen and Pi Fu Chen which are commonly used in acupuncture.

Hao Chen: The needles must be very fine, flexible, should not break-well polished and should not rust or tarnish. The point should be sharp. The most serviceable one is made of stainless steel. There are several kinds in length, i.e.: 0.5 tsun, 1 tsun, 1.5 tsun, 2 tsun, 2.5 tsun, 3 tsun and up to 5-6 tsun, etc.

The long ones, about three or more than three tsun in length, are used (when they are employed) for deep insertion in the buttock muscles and shoulder muscles.

The medium ones, about two tsun in length, are for the deep points of the limbs and trunk.

The shorter ones, about one tsun in length, can be used in treating superficially the arms and legs and the very fine

needle, about a half tsun in length, is used for the face (Fig. 1).

San Ling Chen (prismatic needle) is an instrument for "Tienchih"\*. Most of which are made of stainless steel, about 2 tsun in length. The needle-handle is as if a cylinder, the needle body shows a triangle and its tip is very sharp (Fig. 2).

Pi Fu Chen (Dermal needles) is the instrument for inserting the superficial skin regions. They consist of several little needles. One, which consists of 5 little needles, is called "plum-blossom" needle and the other which consists of seven little needles are called "seven-star" needle. Although there are a little difference in shapes, but the treating effects

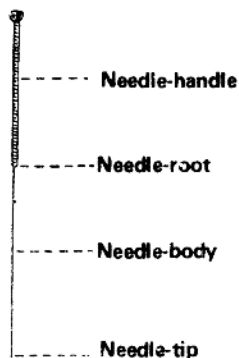


Fig. 1 The Structure of the needle

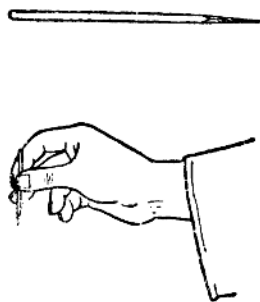


Fig. 2 A prismatic needle and a posture of grasping the needle

\* "Tienchih" (blood-letting)

Insert a San Ling Chen (prismatic needle), Hao Chen No. 26-28, an injection needle or a little oblique knife exactly and rapidly into the point or region about one fen deep, shake the needle several times, and then draw the needle to let the blood out. Such a method is called "Tienchi". It is suitable for cases of heat stroke, unconsciousness and painful oropharynx, etc.

are almost the same (Fig. 3).

The sterilizing the needles and desinfecting the skin, 75% alcohol and a pack of cotton wool are also required.



Fig. 3 Pi Fu Chen (Dermal needle)

## (II) The Position of Patient's Body

The position of patient's body may be taken according to three principles: The patient is persistent and comfortable, the point is unmasked and convenient to be manipulated.

The patient may sit down, lie on his back, on his stomach or on his side, etc. (Fig. 4).

## (III) Localization of the Points

### 1. Methods of Bone Convertible-Measurement

This method is used for determining the fixed length between the different regions of the body, for example:

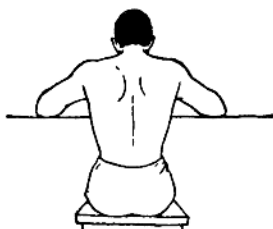
The distance between the middle of the eyebrows and the middle of the natural line of the hair on the forehead is 3 tsun;

The distance between the middle of the natural line of the hair on the forehead and the middle of the natural line of the hair at the back of the head is 12 tsun;

The distance between the middle of the natural line of the



**Sitting position 1**



**Sitting position 2**



**Lateral position**



**Supine position**



**Abdominal position**

**Fig. 4 Postures of patient's position on acupuncture**

hair at the back of the head and the 7th cervical vertebrae is 3 tsun;

The distance between the two mastoid process on the posterior side of the auricle is 9 tsun;

The distance between the Tientu point (this depression is jugular notch) and the costophrenic angle is 9 tsun;

The distance between the nipples is 8 tsun;

The distance between the xiphoid process and the umbilicus is 8 tsun;

The distance between the umbilicus and the superior border of the symphysis pubis is 5 tsun;

The distance between the anterior axillary fold and the elbow crease is 9 tsun;

The distance between the elbow crease and the wrist crease is 12 tsun;

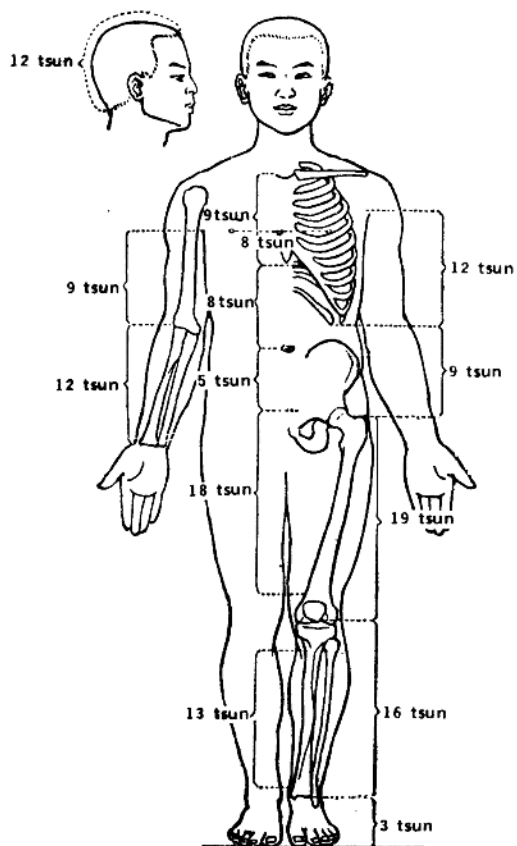
The distance between the greater trochanter of the femur and the lateral patella is 19 tsun;

The distance between the middle of the popliteal fossa and the superior border of the lateral malleolus is 16 tsun;

The distance between the superior border of the lateral malleolus and the inferior border of the heel is 3 tsun (Fig. 5).

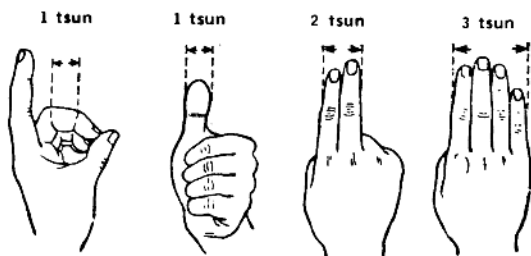
## 2. *Methods of Finger-Measurement*

These methods are used the width of the patient's fingers as a standard to measure the localizations of points. If the patient's body is correspond to the doctor himself, that may also use the width of the doctor's fingers to measure the localization of points. The methods of finger measurement in common use are:



**Fig. 5 Diagram of the Bone-convertible measurement**

- (1) **The Middle Finger Measurement**  
When the patient forms a ring by jointing his middle finger to his thumb, the inside instance between the first and the second joints of the middle finger is one tsun or ten fen.
- (2) **The Thumb Measurement**  
The width of the first joint of the thumb is one tsun.
- (3) **The Finger Combined Measurement**  
The width of the second joint of the index finger, middle finger, ring finger and the little finger linked together is 3 tsun (Fig. 6).



**Fig. 6 Methods of the "Finger-measurement"**

### 3. *The Method of Anatomical Marks*

This is a method for localizing the points in accordance with the anatomical marks of the human body. For example: When bowing the head, the middle of the highest bone of the scapula is on the same level with the spinous process of the 7th thoracic vertebrae; the middle of the second and third lumbar vertebrae is on the same level with the umbilicus; the

highest point of the iliac crest is on the same level with the spinous process of the third lumbar vertebrae; standing upright the point where the tip of the middle finger touching is Fengshih; the space between the thumb and the index finger of the left and the right hand put at an intersection, where the end of the indexfinger is Liehchueh point.

#### (IV) Insertion of the Needle

Pressing the point tightly with the left thumb's nail, grasp the needle handle with the right thumb and indexfinger, and put the other finger on the needle trunk, then insert the needle rapidly and exactly to the skin, and adjust the needle to the spesified depth; or pressing the point with the left thumb's nail, grasp the needle with the right thumb and indexfinger at a distance of 1-2 fen from the tip of the needle, and insert it suddenly to the skin, then adjust the needle into the spesified depth (*Fig. 7*).

There are three kinds of angles for inserting the needle:

1. Vertical insertion ( $90^{\circ}$ ). This is suitable for regions of abundant musculature;
2. Slanting Insertion ( $10^{\circ}$ - $45^{\circ}$ ). This is suitable for the chest and back region;
3. Transversal Insertion ( $10^{\circ}$ - $15^{\circ}$ ). This is suitable for the head and the superficial regions (*Fig. 8*).

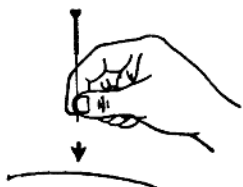
#### (V) Manipulation after Insertion of the Needle

When the patient has a special feeling of needle sensation in the point where the needle is inserted, this is called

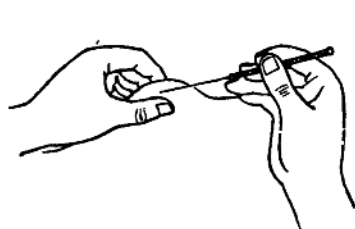




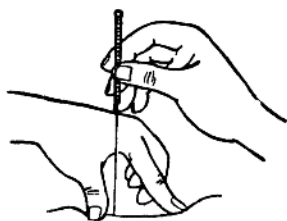
(1)



(2)



(3)



(4)

**Fig. 7 Postures of inserting the needle**

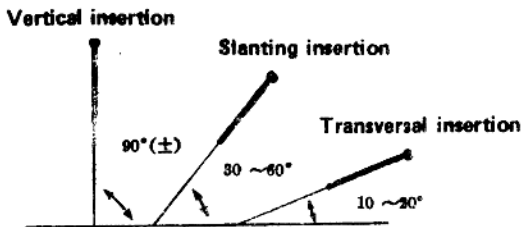


Fig. 8 Diagram of the angles of needle insertion:

"Tehchi"\*. Then the following stimulations should be made:

1. *The Diffuse-Conductive Method:*

Grasp the needle handle with the thumb and the indexfinger of the left hand while put the thumb of the right hand on the top of the needle and use the indexfinger's or the middle finger's nail paring the needle body from the lower to the upper part several times; Or use the thumb's and indexfinger's nail paring on the top of the needle with a screwy action from the lower to the upper part. This method does not injury the tissue of the body so it is intirely suitable for using. When a feeling of electro-sensibility of diffusion and conduction arises around the

\* "Tehchi"

In traditional Chinese medicine, "Tehchi" is considered essential for ensuring the curative effect of acupuncture. This rather obscure term admits of two different interpretations. On the part of the patient, it refers to the particular subjective feeling experienced in the region being needled, which is often described as a combined deep sensation of soreness, heaviness, tightness, and swelling, while on the part of the acupuncturist it means the manual feeling of resistance or palpable motions of the impaling needle in the tissue during the maneuver, in which the needle is felt to be coughed or sucked in by something in the tissue.

point where the needle inserted, the treating purpose is achieved.

## 2. *The Tremulous Method*

During the appearance of "Tehchi", the tremulous action with the needle-handle should be made until the uniform tremor and a feeling of electro-sensibility of the diffusion and conduction arises around the point.

## 3. *The Method of Twisting, Withdrawing-Inserting*

Twisting the needle with a large angle or withdrawing-inserting the needle with force (the needle is actioned up and down in the point, strong stimulating quantity).

The above stimulations may all produce strong, medium or weak reactions.

- (1) **Strong Stimulation:** The strong and lasting stimulations are commonly used by twisting and withdrawing-inserting the needle in a wide range for relieving pain, calmness and hypnotism, etc. This method is often used, the result is good.
- (2) **Weak Stimulation:** In clinical practice, it is widely used weak stimulation for exhaustive diseases and functional disturbances. When "Tehchi" appears, the needle may then be withdrawn.
- (3) **Medium Stimulation:** The stimulation is weaker than (1) but stronger than (2). This method is also widely used in clinical practice.

## (VI) **Withdrawal of Needle**

Twist the needle slightly, then withdraw it rapidly. The

points on the facial region and the other regions which is easily bleeding should be pressed for 1-3 minutes after withdrawing the needle to avoid blood-shed.

## II. NOTE – WORTHY MATTERS DURING TREATMENT

(I) "China's New-Needling Treatment" is simple and easy to be practiced nevertheless a high degree of duty must be required in order to absolutely prevent any carelessness and bad results causing the patient much distress. The doctor has to acquaint conscientiously to the patient's condition, the treating circumstances and examine him in detail, take under way with conscientious analysis, then contrive a treating scheme and correct it in time according to the patient's condition. Before treating, the doctor should explain the whole process of the acupuncture to the patient and tell him the problems that may arise. So that he could cooperate conscientiously with the doctor and is able to strengthen his confidence in overcoming his illness.

(II) The doctor should make a thorough preparations before treating, check on the needles, in order to learn whether the needles are in normal, straight and fine, to learn whether the needle-handle is tight (especially pay attention to the jointing place between the needle-body and the needle-root). If the needle is in the abnormal condition, it must not be used. Furthermore the doctor has to let the patient lie on a comfortable position, then disinfect the patient's skin with 75% alcohol, etc.

### (III) Prevention and disposal of the unexpected accidents

#### 1. *Vertigo or Fainting*

After the needle being inserted, if the patient becomes in vertigo, flurried, pale, in cyanosis accompanied with perspiration even unconscious in a sudden, it is called "Yun-Chen". In order to prevent the occurring of "Yun-Chen", we should use the method of weak stimulation for the patient who is treated for the first time. At the same time, if the patient is in an empty stomach, overstrained, weak in body, that may easily cause the appearance of "Yun-Chen". Therefore if these conditions are happening, we should let the patient take a rest or give him something to eat, then continue the further treatment. If once "Yun-Chen" is occurring, we should quickly withdraw the needle and let the patient lie down with his head at a low position. A light "Yun-Chen" can be cured by giving a drink of boiled water to the patient, and the serious case may be cured by inserting the needle into the patient's Jenchung, Neikuan, Chungchung or Tsusanli points, so that could be restored at once.

#### 2. *Bend of Needle*

During needling, as the force of insertion is too strong or the patient removes his position, it might cause the needle to bend. If this condition comes about, we should not forcibly withdraw or twist the needle. On the contrary, we should carefully find out the direction towards which the needle is bending, and then following the direction, we may slowly withdraw the needle.

### *3. Obstruction of needle*

When the needle is obstructed during twisting or withdrawing, even the needle can not be withdrawn at all, it is called "Chih-Chen". This is chiefly due to the tension of the surrounding muscles. At this time the needle may not be pulled out hardly, but wait for a while, then we twist the needle in a small range and withdraw it out. We may also slightly press the skin around the local or insert again a needle in the neighbourhood of this point, then withdraw the needle.

### *4. Breaking of Needle*

If the quality of the needle is bad or the needle is rusty, or the patient removes his position, it might cause the needle to be easily broken. Therefore we must examine the quality of the needle in detail before we use it. If there is something wrong, we have to get another one. As we insert the needle, we should take care that the needle need not be entirely adjusted into the fresh. If the needle is broken, we should handle the situation in a calm way, don't let the patient removes his position. In case of the broken needle exposed out of the body, it may be pulled out with a forceps or by giving slight press to the skin around the point, then the needle may be taken out. In case of the needle entirely broken within the fresh, an operation should be performed to get it out.

Treating a case of a palsy, we must pay a great attention to avoid breaking the needle.

### 5. *Pneumothorax*

When the needle is inserted in the thorax or the back too deep, the lung tissues may be damaged and comes about the pneumothorax. So that the gas enters the thoracic cavity, occur pneumothorax, chest pain, difficulty of breathing, cyanosis and perspiration even unconsciousness and descent of blood pressure. In order to avoid the pneumothorax occurring, we should take care during inserting the needle in the thorax and the back regions, select a comfortable position for the patient and advice him against coughing during inserting, and we must regulate the depth of the insertion according to the stoutness or the leanness of the recious, not insert too deep, or may use the method of slanting, transversal insertion. If the pneumothorax occurs, in a light case we may let the patient lie on a semireclining position, it would be restored by absorption of its own accord. On the contrary in a serious case, the patient should be immediately sent to the hospital to received a medical treatment.

### (IV) Prohibitory Case of Acupuncture

The following diseases and special cases are prohibited from acupuncture: The patients who suffer from serious haemorrhagic diseases, local malignant tumor, over-strain, severe cardiac failure or sensitive constitution. Hoku, Tsusanli, Sanyinchiao and all points over the abdomen of a pregnancy should be avoided.

# CHAPTER TWO

## ACUPUNCTURE POINTS IN COMMON USE

### I. ACUPUNCTURE POINTS ON THE UPPER LIMB

1. Chungchung-71 (P 9). Located at about one fen above the conner of the vallum unguis on the radial side of the middle finger (*Fig. 9*).

Needle: Slanting insertion, slantwise towards the upper direction, 1-3 fen deep; or use the "Tienchih"(blood-letting).

Indications: Cardiac colic, headache, tinitus aurium, shock, heat stroke, cry much and frightened by night in children.

2. Shaotse-124 (SI 1). Located at about one fen proximal to the conner of the vallum unguis on the ulnar side of the little finger (*Fig. 10*).

Needle: Vertical insertion, 1-3 fen deep.

Indications: Shock, neuralgia of the head, deafness, mammitis, shortage of breast milk.

3. Chungchu-103 (SC 3). Located between the 4th and



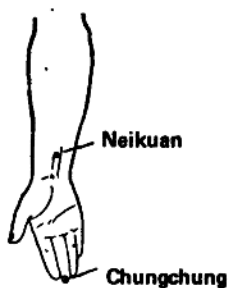


Fig. 9 Chungchung-71 (P 9)  
Neikuan-68 (P 6)

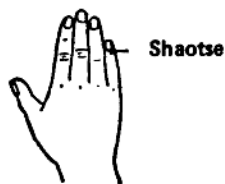


Fig. 10 Shaotse-124 (SI 1)

5th metacarpal bones, about one tsun from Yemen (Fig. 11).

Needle: Vertical insertion, 5 fen – 1 tsun deep.

Indications: Heavy pain in the back and shoulders, deaf-mutes, tinnitus aurium, aphasia.

4. Houhsi-126 (SI 3). Located laterally behind the distal end of the 5th metacarpal bone when the fist is lightly clenched (Fig. 12).

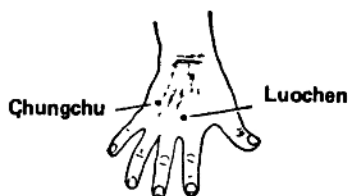


Fig. 11 Chungchu-103 (SC 3)  
Luochen-Str.



Fig. 12 Houhsi-126 (SI 3)