

FIRST RESEARCH EXPERIENCES WITH CHINESE-STYLE ACUPUNCTURE INSIDE LITHUANIAN REHABILITATION CENTER IN KLAIPEDA

Louisa Silva¹, Artūras Razbadauskas², Nijolė Šostakienė^{2,3}, Rita Vaičekauskaitė²,
Jonas Tilvikas³

¹Western Oregon University, USA, ²Klaipėda University, ³Klaipėda Seamen's Hospital

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Summary

Acupuncture is one of the oldest complementary therapies used to treat chronic pain. WHO in Review and Analysis of Reports on Controlled Clinical Trials about Acupuncture note that researches on acupuncture are extremely difficult to conduct. It is already proved that acupuncture analgesia works better than a placebo for most kinds of pain [1]. Since the 1970's there has been a sharp increase in global scientific acupuncture research [4]. However, in Lithuania we still lack both research and training programs for physicians at University level. Klaipėda University Health Sciences Faculty wished to conduct a pilot test of the feasibility of providing acupuncture training in the rehabilitation hospital setting. Method. Ten patients received a short course of acupuncture at the Rehabilitation Center at Klaipėda Seamen's Hospital. Interested physicians were invited to observe. Pre- and post-qualitative data were collected. Results and conclusions. Patients reported positive experiences with acupuncture and improvement of symptoms. Physicians reported growing professional interest in acupuncture. No barriers to providing acupuncture training in the setting of a Rehabilitation hospital were identified.

Introduction

Acupuncture is little known in Lithuania, and there are no academic training programs where it is taught. Lithuania has very few trained acupuncturists; compared to several thousands acupuncturists in all of Europe. There are only three centers for acupuncture in Lithuania listed in the internet. This lack of availability does not mean lack of pu-

blic and scientific interest in acupuncture in the context of Chinese medicine. To the contrary, Klaipėda University Faculty of Health Sciences is very interested in introducing Complementary and Alternative Medicine (CAM) studies in Lithuania, and is in the final stages of making a CAM University Masters Program available to Lithuanians. Faculty of Health Sciences is also committed to a parallel research process whereby evidence-based scientific data evaluating the Lithuanian experience with the effectiveness of acupuncture is collected. This paper is the first report of a Lithuanian experience with acupuncture for chronic pain in a Klaipėda Rehabilitation hospital.

Despite impressive technological advances in medical diagnosis, surgery and drug therapy, there are many people with pain for whom a solution is not readily available. Although Western medicine has many resources to diagnose and treat symptoms of pain, it cannot by itself, cause the actual healing of injured and painful tissue. Its theory and practice are mainly focused upon diagnosing and treating disease processes, and do not generally include theory and methods for promoting the body's healing processes. Drugs are offered to patients with chronic pain to reduce symptoms of one or another part, but there are no pharmaceutical elixirs to take away pain permanently and restore the person to health.

The roots of alternative medicine can be found in Lithuanian folk medicine which was based on healing with natural materials (herbal plants, animal and birds products such as milk, egg shells, also for healing purposes were used stone, fire, salt, honey) which were integral part of person's environment; therefore the healing process was a holistic integrating persons and environments powers. There is fascinating linguistic evidence that closely connects man's transcendent being and its expression with health as a holistic phenomenon. Hence the Lithuanian 'spirit' is etymologically associated with '*pant, breathe*' - the res-

piratory function is very closely associated with the Indian life force 'prana', which means breathing. The Chinese life force 'chi' pictograph is the water symbol which is close to the Lithuanian conception of soul. Etymologically Lithuanian *siela* (soul) is associated with *seile* (saliva) which is conceived of as a fluid.

Lithuanians were exposed to folk medicine of other countries from ancient times. There is documented evidence dating back to the 16th century about Palestine, North Africa and China from the journals of traveling Lithuanians: M. K. Radvila Našlaitėlis' *Journey to Jerusalem* and The Jesuit's A. Rudaminos recorded activities of China comes from other sources. In the beginning of 20th century Lithuanians were familiar with Indian medicine from teacher, poet, humanist, and philosopher Vyduanas' writings. Vyduanas was interested in the conceptualization of health as holistic phenomenon and followed an Indian philosophy for this. He healed himself from tuberculosis and successfully lived into vital elderhood. Vyduanas attaches particular importance to personal improvement for overall health strengthening including the guidelines proposed by Indian Yoga.

Chinese medicine is one of the oldest systems of holistic medicine, and contains many methods to assist natural healing processes in the body. It is founded upon a comprehensive theory of health and illness which encompasses ancient and modern diseases and complements Western medicine. Diagnosis of the whole person includes mental and emotional as well as physical aspects. Acupuncture is a 3,000 year old branch of Chinese medicine that is one of the main Chinese medicine methods used to treat pain. Pain is considered to be a result of blocked or insufficient blood (capillary) circulation to the painful part. Treatment is with thin, sterilized, needles inserted into acupuncture points to restore normal circulation to painful areas and improve circulation and energy as a whole. Specific acupuncture points are used to stimulate internal states of relaxation and healing, improve local and regional circulation, and strengthen normal restorative processes of sleep and digestion. Today, many different styles of acupuncture have sprung up in different parts of the world, (e.g. Japanese-style, Korean-style, Chinese-style); of these Chinese-style is the oldest, and has been practiced in the greatest number of people.

The Rehabilitation Center at Klaipeda Seamen's Hospital conducted a small pilot study to explore the feasibility of using Chinese-style acupuncture to augment treatment of patients with pain. A full course of acupuncture treatment is 10-12 visits given over 5-6 weeks, and has the potential to provide lasting relief of pain. For this pilot study,

time constraints limited the duration of treatment to two weeks. As such, the intention of the pilot was to explore whether a short course of acupuncture would provide relief of pain, how well acupuncture would be accepted by Lithuanian patients, whether there were negative side-effects, and whether there were any unforeseen difficulties in providing acupuncture treatment within the context of the Rehabilitation Hospital. Ten patients received a short course of acupuncture treatments while visiting the Rehabilitation Center. Treatment was provided by visiting Fullbright Specialist, Dr. Louisa Silva, from Western Oregon University, U.S.

Pilot study. Methodology

Acupuncture originated in China some 3,000 years ago, and developed over thousands of years into a unique medical system useful in treating a wide range of diseases, including the various kinds of pain [2]. In the past fifty years, acupuncture practice by both physician and lay acupuncturists diffused significantly into Europe and U.S., and became an established form of complementary and alternative medicine, best known for its value in treating pain [3, 8, 7]. Since the 1970's there has been a sharp increase in global scientific acupuncture research, with representation in 15 languages from 65 countries; pain control has been the most prevalent direction of study [4]. However, in Lithuania we have no research studies on acupuncture.

WHO in Review and Analysis of Reports on Controlled Clinical Trials about Acupuncture [1] note that researches on acupuncture are extremely difficult to conduct. It is already proved that acupuncture analgesia works better than a placebo for most kinds of pain, and its effective rate in the treatment of chronic pain is comparable with that of morphine. In addition, numerous laboratory studies have provided further evidence of the efficacy of acupuncture's

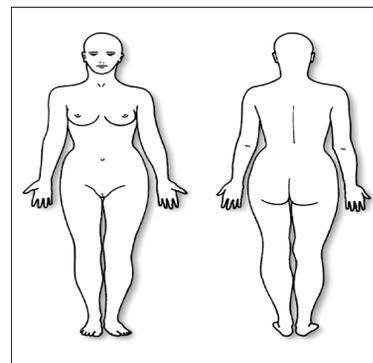


Figure 1. Location of pain

analgesic action as well as an explanation of the mechanism involved. In fact, the excellent analgesic effects of acupuncture have stimulated research on pain. Because of the side-effects of long-term drug therapy for pain and the risks of dependence, acupuncture analgesia can be regarded as the method of choice for treating many chronically painful conditions [1].

Participants and measures

The ten patients were recruited from the Klaipeda Seaman's Hospital Rehabilitation Center's clinic patient roster; none had previously received acupuncture treatment. There were six females and four males. Age ranged from 24-64 years old. Patients were asked to indicate the location of their pain on the diagram in Figure 1.

Patients reported pain in the following areas: lower back (6), neck (2), shoulder (2), upper back (1), arm (1), wrist (1), knee (1) and groin (1). Six of the ten patients had pain in more than one area. One patient did not have pain, but instead had insomnia immediately following surgery eight months previously. She was included in this pilot study because her symptoms were diagnosable according to Chinese medicine as a block due to surgery. Duration of pain is indicated in Table 1.

Pre and post-treatment, patients were asked to rate their areas of pain according to the range of 0-10 scores (Pain Rating Scale developed by McCaffery 1999). The mean

pre-treatment rating of pain was 5.9 (SD 1.9). Patients were also asked to rate satisfaction with their overall health on a similar 1-10 point scale with zero being completely unsatisfied and 10 being completely satisfied. The mean Health rating score was 6.4 (SD 2.0) (Table 1). At each visit information was sought about side effects of treatment.

Measures were repeated at the final visit, and patients were asked to respond to the question: "What would you say to a patient with a similar problem as yours, about trying acupuncture?"

Treatment

Treatment was given by Dr. Silva with Chinese-style acupuncture. Following diagnosis of the condition, treatment was accomplished with sterilized 28 gauge 1.5 and 3 inch needles. Specific areas of block were treated with bleeding and cupping of points. Care was taken to stimulate the sensation of circulatory flow (known as *deqi*) evidenced by patient reports of a travelling sensation of warmth, coolness or heaviness moving down the back and extremities towards the hands and feet in the direction of arterial blood flow. Patients received 2-4 acupuncture treatments over the two-week period. Moreover, acupuncture treatment was open to observe for both rehabilitation physicians and by kinestherapists. Both aforementioned groups expressed interest in acupuncture training.

Table 1. Demographics and pre-treatment descriptors

Patient	Age (years)	Gender M/F	Location of Pain (or other)	Duration of Pain	Pain Rating Pre-Treatment	Health Rating Pre-Treatment
1	60	M	Upper back Shoulder Neck	2wks 4-5yrs 2-3yrs	4 6 7	8
2	24	F	Rib Back	9mo 9mo	7 9	9
3	45	F	Feet Arm	18mo 8wk	4 7	7
4	31	M	Back (2wk post surgery) Groin	2wks 4mo	5 7	5
5	44	M	Back Neck	2yrs	4 5	5
6	64	F	Back	30 yrs	6.5	5
7	32	F	Back	20yrs	6	9
8	30	M	Shoulder Knee Wrist	3-4yrs 2.5 yrs 2.5 yrs	3 3 2	7
9	24	F	Back	18mo	4.5	6
10	55	F	Insomnia since pelvic surgery	7mo	Not applicable	3

Table 2. Treatment outcomes

Patient ID	Pain score change by area	Health score change	What would you say to a patient with a similar problem as yours, about trying acupuncture?
1	-4 -4.5 -5	none	Nice thing. There is nothing to be scared of. It takes problem away without chemicals and fast.
2	-7 -6	none	It is really worth trying acupuncture, without any doubts. It is important not to be influenced by other points of view, because Lithuanians prefer pills.
3	-3 -3	+1	Indeed, for sure, and very strongly so, you need to try it.
4	-1 -5	none	I would recommend to try.
5	-1.5 -2.5	none	I would recommend to try. It was not a complete cure. I never experienced it before and the first acupuncture treatment was a little bit scary, but I'm glad I did it.
6	-3.5	none	You always have to try. My leg is less numb. I am not scared of acupuncture. I don't feel back pain since coming.
7	-6	none	You would like to come to Dr. Silva. It hurts when the needles go in.
8	-0.5 -2 -2	+0.5	I would recommend to try it. It can shorten the length of time of an illness. It can prevent illness.
9	-3.5	+4	I want to try it one more time, and to choose a really good specialist. I think that when you go to a doctor you must have acupuncture.
10	n/a	+1	Strange feeling at night in the hands and feet. No need of medicine for two days; sleeping well for the first time since the surgery, would like to do it again.

Results

Pain scores decreased in all ten patients for all areas involved; the average decrease was -3.5 scores. Health satisfaction scores remained the same in six patients and increased in four (Table 2). Mean increase was 1.6, and SD 1.6.

No negative side effects were reported, and no difficulties encountered in providing the treatment in the hospital clinic setting. In response to the question "What would you say to a patient with a similar problem as yours, about trying acupuncture?" one patient reported that the needles hurt when going in, one reported being afraid of acupuncture the first time, and two reported there was nothing to be afraid of. All patients recommended trying acupuncture. (Table 2).

Discussion and conclusions

As this was the first experience of acupuncture for the hospital, and for the patients, we were interested to see whether the treatment was accepted by Lithuanian patients, whether it was effective, and whether there were any negative side-effects or unforeseen difficulties in applying it within the hospital setting. Because time constraints limited the number of acupuncture treatments we could provide in this study, it was only possible to investigate effects of a short course of treatment. Acupuncture was not presented

to patients as a definite cure for their pain, but rather as a way to assist the body to improve circulation to painful areas.

The positive responses to treatment, lack of side effects, and lack of difficulties implementing treatment suggest that it is feasible and advantageous to give Chinese-style acupuncture to patients receiving Rehabilitation treatment. The main barrier remains the current scarcity of trained acupuncturists and lack of acupuncture training programs in Lithuania. Lithuanian law limits the practice of acupuncture to licensed physicians and there are currently no acupuncture training University programs for physicians in Lithuania.

Špokienė (2012) notes legal regulation system is tolerant for CAM services in Lithuania. Only the providers of manual therapy, acupuncture, reflexology, homeopathy, massage and physiotherapy need to get a special education. Their inclusion into the list of licensed ambulatory health care services emphasizes the careful view of the government to the methods put in practice. Fees for consultations with naturopathy, homeopathy, acupuncture, manual therapy practitioners are not reimbursed by the national health care insurance system. It shows incredulous rating of their effect to the patients' health. The special legal regulation comprehends only a very small part of aspects, which are

associated with the CAM services and products [6]. In 2011 established organization “Lithuania healthy lifestyle and natural medicine palace” will be important agent for regulating and expanding CAM services.

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KINŲ MEDICINOS AKUPUNKTŪROS TAIKYMO GALIMYBĖS LIETUVOJE: BANDOMASIS TYRIMAS REABILITACIJOS CENTRE KLAIPĖDOJE

L. Silva, A. Razbadauskas, N. Šostakienė, R. Vaičekauskaitė, J. Tilvikas

Raktažodžiai: kinų medicina, akupunktūra, rehabilitacija, skausmo gydymas.

Santrauka

Akupunktūra yra viena iš seniausių kinų medicinos šakų. Pasaulyje yra didelis susidomėjimas akupunktūra ir stiprėja jos pripažinimas kaip efektyvus ir patikimo gydymo metodo. Pasaulinės sveikatos organizacijos paskelbta studija [1] rodo, kad daug ligų atveju akupunktūra yra efektyvus gydymo metodas, ypač chroniško skausmo atvejais. Nuo 1970-ųjų metų pasaulyje sparčiai gausėja mokslinių tyrimų apie akupunktūrą [4]. Tačiau Lietuvoje trūksta ir mokslinių tyrimų, ir akupunktūros specialistų rengimo programų universitetiniu lygmeniu. Be to, specialistų rengimą ir praktiką riboja tai, kad akupunktūrą gali praktikuoti tik gydytojai. Todėl Klaipėdos universiteto Sveikatos mokslų fakulteto mokslininkų grupė atliko pilotąžinį tyrimą, kuriuo siekiama analizuoti akupunktūros taikymo galimybes ir jos priimtinumą. Metodus. Klaipėdos Jūrininkų ligoninės rehabilitacijos centre dešimčiai pacientų buvo suteiktas trumpas (keturių seansų) kinų akupunktūros gydymas, kurį atliko profesorė gydytoja Louisa Silva iš JAV. Taip pat buvo suteikta galimybė akupunktūros seansus stebėti suinteresuotiems specialistams. Prieš ir po gydymo seansų buvo surinkti tyrimo duomenys apie tai, kaip pacientai vertina savo skausmo intensyvumą ir sveikatą dešimties balų skalėje [5]. Rezultatai ir išvados. Pacientų skausmo ir sveikatos vertinimo rodikliai rodo, kad visų pacientų būklė pasikeitė teigiamai – sumažėjo skausmas, pagerėjo bendras sveikatos vertinimas. Medicinos specialistai, stebėję akupunktūros seansus, išreiškė teigiamą akupunktūros poveikio pacientams vertinimą ir sustiprėjusį profesinį interesą akupunktūros atžvilgiu. Nebuvo identifikuota akupunktūros realizavimą ribojančių barjerų rehabilitacijos procese.

Adresas susirašinėti: natalja.istomina@ku.lt

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