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# Acupuncture may be solution for chronic pain

Updated Tue. Jan. 15 2008 7:52 AM ET

The Canadian Press

TORONTO -- For 10 years, Janet Sawyer tried just about everything to find relief for chronic severe pain in her head, neck and shoulders after she suffered a whiplash injury in a car

accident.

Prescription narcotic painkillers, physiotherapy, even going under general anesthetic to have more than 50 needles injected into the area to freeze the nerves had little or no lasting effect.

It wasn't until she tried acupuncture two years ago under the skilled hands of an expert in the ancient medical art that she finally found an answer for the debilitating pain.

"It was amazing, just amazing," says Sawyer, 52, a former nurse and mother of four grown children from Courtice, Ont., near Oshawa just east of Toronto.

"I was in agony. I couldn't do a thing before I started ... and that was even with getting the freezing injections at the hospital."

Acupuncture is one of the oldest medical therapies in the world, developed thousands of years ago by the Chinese. Traditional acupuncture uses super-fine needles inserted into specific points on the body in a bid to restore the flow of energy, called qi, or chi.

The theory is that manipulating these acupoints frees up blocks in energy along pathways called meridian throughout the body.

While researchers have known for decades that acupuncture causes the release of natural painkilling endorphins from the brain, it's still not fully understood how the therapy works.

But for many people, it clearly does, says Toronto pain specialist Dr. Linda Rapson, chair of complementary medicine for the Ontario Medical Association, who has been practising acupuncture since 1975.

"In terms of the energy issues, what's going on in terms of the model the Chinese developed, where the meridian are named after the organs and so on, that stuff is harder to measure," Rapson says.

"What is being measured now is brain activity as you do acupuncture."

She says research using functional MRIs shows which areas of the brain are engaged when an acupuncture needle is placed in a particular point on the body.

So, for instance, a needle put in a spot on the foot that is related to pain in the eye will clearly show activity in the visual cortex, "the same as if you'd



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flashed a light in front of the eye," she says.

But Rapson doesn't rely only on traditional Chinese meridian. She also bases her choice of needle position on anatomy.

For shoulder pain, in which a patient can't raise the arm, Rapson might determine that the deltoid muscle is involved and she will stimulate the nerve related to that muscle.

"So we choose that point. And that will help your shoulder to go up."

To the uninitiated, needle placement may seem to have no relation whatsoever to the area of pain.

"It depends on where it is," Rapson says. "If a person comes in ... and they have an acute back problem, they're twisted like a pretzel and they can't sit down, the place we usually put the first needle is between their upper lip and their nose. And that is the best point for an acute back that you can do."

In traditional Chinese medicine terms, she explains, that spot between the nose and upper lip is near the end of the "governing vessel meridian that starts at the tail bone and goes up the middle of the back and over the head and ends on the upper lip."

"But in anatomical terms, it has huge input into the autonomic nervous system to the sympathetic side of the nervous system."

Many patients with acute back pain will feel immediate relief; others will have an actual herniated disc that takes much longer to resolve, she says. "But in terms of the acute situation right at that moment, you get them out of that and they don't go back there."

"Other people just get better."

Dr. Kien Trinh, a Hamilton sports medicine specialist, uses acupuncture as one treatment option for patients who come to him seeking relief from various types of musculoskeletal pain.

"A lot of the athletes that come, especially the swimmers or baseball players, because they use their shoulders repetitively, they usually have a rotator cuff type of tendonitis," says Trinh, elective co-ordinator for acupuncture in sports medicine for medical students at McMaster University.

"We give them therapy, medication, and also we can use acupuncture to improve their range of motion and also decrease their pain."

Trinh says western medical doctors are far more accepting of acupuncture than they once were because they have seen clinical research reviews showing its benefits are scientifically sound.

"I would say we have very few patients who just look up in the Yellow Pages and call us to say 'I want to give acupuncture a try.' It's usually the ones who are sent to us have been having problems for quite a long time and tried conventional treatments," and their doctors refer them for acupuncture.

But Trinh advises people to take care in choosing an acupuncturist by making sure the practitioner has been fully trained and certified. As well, note should be taken about the types of conditions a practitioner says acupuncture can successfully treat.

"We know that good evidence (exists) to support it in terms of musculoskeletal problems," he says. "But a lot of people make claims about treating heart disease, blood pressure and so on, so they have to be careful of people making these claims."

"If someone tells you they have a treatment that works for every single problem, you better think twice."

Rapson, who bolsters her patients' acupuncture treatments with nutritional supplements, says the needling treatment does not carry the side-effects of painkilling drugs (which she says "don't work very well"), so it's safer for patients.

"In medicine, we always have to look at the risk and the benefit. If the risk

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is high and the benefit is low, we can't justify doing it. But with acupuncture, because the risk is so low, even if the potential benefit doesn't seem to be all that high, it's not putting your patient at risk to take a try at it."

Sawyer, who was having acupuncture several times a week when she first started seeing Rapson two years ago, now needs treatment only about once a month to keep her pain at bay.

"When I first went, I can vividly remember ... I couldn't even drive myself from Oshawa to Toronto to go there. I was in so much pain I couldn't concentrate to even do that."

"Now I have no trouble doing that at all  $\dots$  It's like totally night and day."

Some facts about acupuncture: Needling away discomfort, pain

Here are some facts about acupuncture, a therapy originally developed in China thousands of years ago:

How it's done: Traditional acupuncture uses extremely fine, sterile needles, which are inserted through the skin to different depths at targeted points on the body.

How it works: In Chinese medicine, acupuncture is believed to free up areas of blocked energy (qi or chi) along pathways throughout the body known as meridians, thereby rebalancing the flow of energy and restoring health.

In western medicine, acupuncture points are viewed as anatomical points for stimulating nerves and musculoskeletal tissues. Acupuncture appears to increase the body's natural painkilling endorphins and increase blood flow.

Needles can be inserted and twirled briefly before removal or left in place for up to 30 minutes.

What it's used for: Conditions include back and shoulder pain, headaches and migraines, osteoarthritis in joints, nausea and vomiting linked to chemotherapy or surgery, motion sickness and digestive disorders.

Other types of acupuncture:

- Electroacupuncture: Mild electrical stimulation applied to acupoints with or without needles.
- Sonopuncture: An ultrasound device or tuning forks transmit sound waves through specific points.
- Acupressure: The practitioner applies pressure directly on acupoints using the fingers. Patients can be taught to do the technique as well.
- Moxibustion: A cone or cylinder of dried herbs (moxa) is burned on or near the skin at acupuncture points to deliver heat. The cone is removed before skin is burned.

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