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BRIEF REPORT

Acupuncture Treatment of Pain along the Gall Bladder Meridian in 15 Horses

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Abstract
This study reports on clinically significant relief of pain along the gall bladder meridian in 15 sport horses. Both local and distant points were needled in this study. Pain relief was marked not only locally but also in remote areas along the gall bladder meridian. Clinical improvement was observed in all 15 horses within 30 seconds to 2 minutes after the treatment had started. Twelve horses and three horses were rated as "cured" and "improved", respectively, when they were re-examined 1—8 days after the treatment. The relief of somatic pain was often associated with improved riding performance of the horses. These data are relevant in terms of equine clinical pain relief, as well as in terms of meridian therapy and the scientific theory of acupuncture.

1. Introduction

Linear patterns of pain resembling the pathway of the gall bladder (GB) meridian were described in 100 sport horses by this author [1] (Fig. 1). It was then hypothesized that dry needling of selected acupuncture points (APs) along the meridian might be effective in relieving this particular pattern of soft tissue pain. This paper reports on treatment data in 15 horses.

2. Material and methods

2.1. Horses

Fifteen horses from the author's private practice were included in this study. The horses were 11 geldings and four mares; 10 Thoroughbreds, three Warmbloods, one American Saddlebred horse, and one pony; average age 7 years (2—15 years).

The horses were presented for clinical/acupuncture evaluation with various riding problems and poor performance. On the initial assessment, they were showing musculoskeletal tenderness/pain along the GB meridian, as described in an earlier study [1]. The horses were neither displaying signs of any major lameness, active

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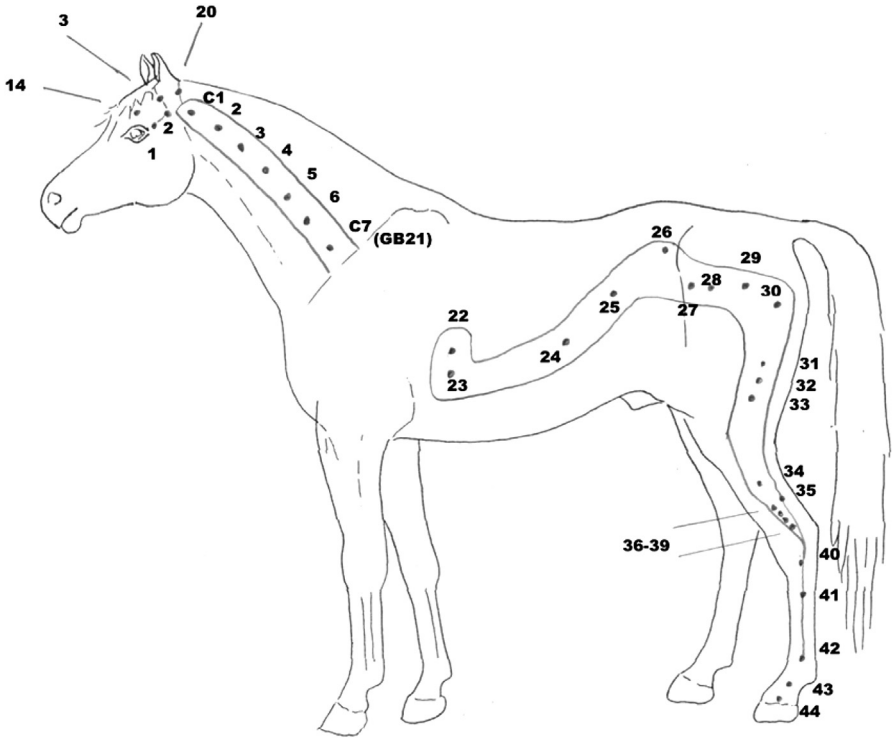

Figure 1 Pain along the gall bladder meridian in horses. Body areas displaying pain on palpation are depicted using a solid line. The 44 gall bladder points are in locations used by this author. C = cervical vertebra/segment.
Note. From "Pain along the Gall Bladder meridian in 100 horses" by J. Still, 2012, *J Acupunct Meridian Studies, 6,* p. 169—72. Copyright 2012, *J. Still*. Reprinted with permission.

osteoarthritis, or painful hoof conditions, nor were they suffering from any clinically detectable internal, neurological, or skin diseases. No unruly, stressed, excessively anxious, or hyperactive animals in which the clinical examination might be incomplete and the pain assessment unreliable were included in this study. Acupuncture treatment, as described further, was not combined with any other form of orthodox or alternative treatment in these horses.

2.2. Clinical diagnosis: detection and grading of the pain

The entire body of the horses was palpated digitally with the objective to detect and record any signs of pain (tenderness). Additionally, a wooden probe with a rounded tip of a diameter of 5 mm was used to detect pain located in the deep layers of muscles. The applied pressure was within the range of 2—4 kg/cm^2. As in the previous diagnostic study [1], linear patterns of pain along the GB meridian were recorded in detail before the acupuncture treatment was initiated. The scoring system used in the previous paper by this author [1] was applied in this study as follows: no pain = normal sensitivity; mild pain = slightly sensitive to palpation; moderate pain = a moderately painful response characterized by a purposeful/definitive local muscle spasm; and severe pain = a marked painful response manifested by a major muscle spasm/withdrawal away from the pressure. The intensity and extent of pain was evaluated as follows: (1) on the initial (baseline) evaluation before the treatment; (2) during the acupuncture treatment; and (3) on a subsequent clinical examination carried out several days later.

2.3. Meridian diagnosis

As in the previous study by this author [1], only horses displaying a moderate to severe pain reaction along the course of the GB meridian were included in this study. A large number of GB points, and at least two linear areas along the trajectory of the meridian were detected in the horses. The linear pain sensitivity had to extend over at least two out of five body areas including the head, neck, chest, abdomen, and hind quarter. The course of the meridian and its points were according to Still [1].

2.4. Treatment

Standard stainless steel acupuncture needles were employed. Seirin B type needle No. 8 0.30 × 30 mm (Seirin Corporation, Shizuoka, Japan) acupuncture needles were used to stimulate GB APs situated on the head and lower hind limbs, while the Ding Dragon 0.35 × 75 mm (Wujiang Kangtai Medical, Tuncun Town Wujiang, Suzhou, China) needles were applied into more muscled APs situated on the neck and trunk. Various APs were needled in different horses depending on the initial clinical diagnosis (extent of pain) and the author's clinical experience.

Bilateral needling was employed in horses displaying bilateral GB pattern. All 12 horses showing the bilateral