

Clinical Report

Acupuncture for chronic daily headache: based on muscular fascia theory

基于肌筋膜理论针刺治疗慢性每日头痛

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ABSTRACT

Objective To observe the efficacy of acupuncture in treatment of chronic daily headache (CDH) based on muscular fascia theory. **Methods** Sixty patients were randomly divided into group A (30 cases) and group B (30 cases). In group A, based on muscular fascia theory combined with the anatomical position of injection site of kreotoxin in treatment of chronic headache, 10–16 acupoints were selected on frontal muscle, occipital muscle, temporal muscle, splenius capitis, semispinalis capitis, suboccipital muscle and sternocleidomastoid muscle. 0.25 mm×30 mm acupuncture needles were adopted for acupuncture. After acupuncture, 2–3 groups of acupoints were selected for electroacupuncture device. In group B, Nèiguān (内关 PC 6), Shuǐgōu (水沟 GV 26), Héngǔ (合谷 LI 4), Tàichōng (太冲 LR 3), Bǎihuì (百会 GV 20), Sìshéncōng (四神聪 EX-HN 1), Fēngchí (风池 GB 20), Wángǔ (完骨 GB 12) and Tiānzhu (天柱 BL 10) were selected for acupuncture. After acupuncture, 2–3 groups of acupoints were selected for electroacupuncture device. Acupuncture was conducted once a day in the two groups, five days were one course of treatment, and two days were free from treatment between two courses. The treatment lasted for eight weeks. Daily headache record was considered as efficacy index, and VAS score and the number of days of headache in each month were observed. **Results** After treatment for eight weeks and follow-up visit for three months, the efficacy of acupuncture treatment for CDH based on muscular fascia theory (group A) was superior to conventional acupuncture (group B), and the comparison result between the two groups was statistically significant (VAS score between two groups, after treatment: $t=2.2864$, $P=0.0259$, follow-up: $t=2.6735$, $P=0.0097$; the frequency of attack between the two groups after treatment: $t=2.1520$, $P=0.0364$). **Conclusion** CDH may be related with muscular fascia dysfunction of head and neck, and the efficacy of acupuncture treatment based on muscular fascia theory was significant.

KEY WORDS: muscular fascia; acupuncture; chronic daily headache (CDH)

Chronic daily headache (CDH) refers to any kind of headache attacks patients for more than fifteen days within one month and lasts for more than three months^[1]. Patients with CDH may suffer from reduction of quality of life induced by body and mental disorders, and serious injury in daily life, social and vocational functions^[2]. Most patients take painkillers for a long time, which is harm to their

health^[3]. The author obtained significant efficacy of acupuncture in treatment of CDH based on muscular fascia theory, and the results were reported as follows.

CLINICAL DATA

General data

Sixty patients with CDH were collected from

the outpatient service of Rehabilitation Department of Heilongjiang Dongning First People's Hospital from October, 2010 to February, 2013, with 21 males and 39 females. The average age was (45.5 ± 10.5) years old. All the patients were divided into muscular fascia group (group A) and acupuncture group (group B) in the proportion of 1:1 according to random number table method, the differences were not statistically significant based on the comparisons of age, gender and course of disease [the course of disease was (4.8 ± 1.0) years in group A and (4.6 ± 1.2) years in group B] between the two groups ($P > 0.05$).

Diagnostic criteria

The diagnostic criteria of CDH was established by reference to the diagnostic criteria of chronic daily migraine and chronic daily tension headache in ICHD-II^[4-5].

Inclusive criteria

① Male or female patients conforming to above diagnostic criteria; ② patients within the age of 18–65 years old; ③ patients signed Informed Consent Form; ④ patients without severe hypertension, cardiac, liver, renal or other diseases.

Exclusive criteria

① Patients with cluster headache or other headache caused by mental factors; ② patients with secondary headache; ③ patients with poor control of blood pressure; ④ patients rejecting to join in the study due to fear or fainting of needle.

METHODS

Treatment methods

Group A: based on muscular fascia theory combined with the anatomical position of injection site of kreotoxin in treatment of chronic headache, 10–16 acupoints were selected among 20–30 acupuncture sites on frontal muscle, occipital muscle, temporal muscle, splenius capitis, semispinalis capitis, suboccipital muscle and sternocleidomastoid muscle according to the muscular fascia pain site (acupuncture sites were shown in Figure 1). The patient was asked in sitting position, and 75% alcohol was used for disinfection. 0.25 mm \times 30 mm acupuncture needles were adopted for oblique insertion. After acupuncture, 2–3 groups of acupoints were selected to connect *Hwato* SDZ- II electroacupuncture device. Dilatational wave was selected with the frequency of 2–100 Hz. The intensity was just tolerated by the patient. Acupuncture was conducted once a day, five days were one course of treatment, and two days were free from

treatment between two courses. The treatment lasted for eight weeks.

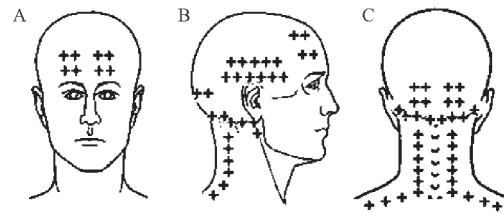


Figure 1 The acupuncture sites

Group B: based on *SHI Xue-min Practical Acupuncture*^[6], Nèiguān (内关 PC 6), Shuǐgōu (水沟 GV 26), Héǔ (合谷 LI 4), Tàichōng (太冲 LR 3), Bǎihuì (百会 GV 20), Sishéncōng (四神聪 EX-HN 1), Fēngchí (风池 GB 20), Wángǔ (完骨 GB 12) and Tiānzhu (天柱 BL 10) were selected for acupuncture. The patient was asked in sitting position, and 75% alcohol was used for disinfection. After oblique insertion, 2–3 groups of acupoints were selected to connect *Hwato* SDZ- II electroacupuncture device. Dilatational wave was selected with the frequency of 2–100 Hz. The intensity was just tolerated by the patient. Acupuncture was conducted once a day, five days were one course of treatment, and two days were free from treatment between two courses. The treatment lasted for eight weeks.

Observational indices

The patients were asked to record the conditions on their headache, including the number of days of headache and VAS score within one month before treatment; and after treatment, the patients were asked to record the conditions on their headache, VAS score was evaluated once every two weeks, and the number of days of headache was evaluated once every four weeks. After treatment, the conditions on their headache were recorded continuously for three months, and final evaluation was performed three months later.

Statistical analysis

SPSS 13.0 statistical software was used for data analysis, analysis of variance was measured repeatedly to detect the difference between the two groups, and *Chi-square* test was applied for enumeration data. ($P < 0.05$) indicated that the difference was statistically significant.

RESULTS

VAS score of CDH patients before and after treatment (Table 1)

According to Table 1, VAS score of group A after treatment for two weeks was statistically significant

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