

Acupuncture on the Cutting-Edge

You may not have heard or read about microcurrent stimulation of acupuncture points nor of Auricular Acupuncture or Korean Hand Therapy. These discoveries allow me to treat you effectively, in briefer treatment sessions without needles.

These technologies and forms of treatment are being used, right now, in medical centers, physician's offices, and clinics throughout the world. I am a Licensed Acupuncturist with 4 years of education and clinical supervision. Also, I have been in practice for many years. Having learned Traditional Chinese Medicine and various forms of Japanese Acupuncture, I know very well their diagnostic criteria, treatment protocols, and acupuncture treatment styles. I have not discarded what I learned in all of those years. Simply, I have integrated what I learned then with other systems to treat you as effectively and rapidly as possible.

The three presentations that follow present an overview of microcurrent stimulation, Auricular Therapy, and Korean Hand Therapy. Auricular Therapy or Auricular Acupuncture was developed in the 1950s by a French neurologist by the name of Paul Nogier, M.D. Korean Hand Therapy was developed in the early 1970s via the research and clinical use of Tae Woo Yoo, O.M.D. Microcurrent stimulation of acupuncture points is based upon principles developed by scientists and applied in medical settings throughout the world.

NUMBER ONE: MICROCURRENT THERAPY WITH THE ACUTRON MENTOR

The Acutron Mentor
By Christina Heide - Microcurrent Research, Inc.



It's not often that the actual performance of a product exceeds the claims made for it by manufacturers and salespeople. Yet that is the case with the multi-purpose Acutron Mentor state-of-the-art electrical stimulator manufactured by Microcurrent Research, Inc., of Phoenix, Arizona. This brief article describes the Acutron Mentor technology, and some of its benefits.

Electrical stimulation has been used for relieving aches and pains since ancient times, starting with shocks to the feet of gout patients induced by agitating torpedo fish in a bucket. Many devices have been constructed and sold, with varying claims, since the start of the Industrial Revolution. It was not until recent decades, however, that micro-controller technology made it possible to precisely regulate

treatment currents in the microamp, or millionth of an amp, range.

The reason electrical stimulators work at all is that the human body is an electrical organism. This makes our bodies exquisitely sensitive to external electrical currents. All of our life functions are dependant on or regulated by subtle electrical currents, passed through the nervous system and the fascial connective tissue network of the body. Because the fascia inter-connects every body part, it is the physical substrate for the subtle energy communication systems of the body, the basis for the meridian system described by the ancient Chinese.<1> Because we are so sensitive to electrical currents, it is vital that appropriate levels and frequencies of current be applied. This is not always possible or convenient with the use of most clinical stimulators today.

There are two levels of electrical stimulation (ES) that are clinically valuable. Milliamps are currents regulated in the thousandth of an amp range, and are what are delivered from devices used in most physical therapy, chiropractic and pain clinic practices. Milliamps are so overbearing on the body's innate electrical activity that they literally shut down some of the pain-carrying pathways in the central nervous system, thus reducing the sensation of pain. This is the basis for TENS devices and other clinical milliamp stimulators. Milliamps are useful for acute pain control, muscle spasm softening, reduction of gross edema and circulatory enhancement.

The other valuable form of ES is microamps, commonly called microcurrent. These currents, which are 1000 times lower in intensity than milliamps, are only offered through specialized stimulators called microcurrent devices. Quality microcurrent devices offer both pad and probe electrodes for application of treatment currents. Pad electrodes are used for generalized stimulation of large joints and body regions, and probes are used for acupuncture, auricular and trigger point stimulation. Because of their gentle nature, generally low frequency applications, and greater precision of probe electrodes, microcurrent therapeutics act in a more harmonious relationship with the body's innate bio-electricity, and can deliver a form of electro-acupuncture without needles. Microcurrents are appropriate for treatment of acute or chronic pain conditions, neuropathic disorders, energy balancing treatments, and treatment of children, elderly and sensitive patients.

The Acutron Mentor is engineered to offer both milliamp and microamp treatments through each of its four independent output channels. Each channel also offers it's own feedback sensors, used to confirm proper electrode placements and to evaluate changes in the body during and after treatment. It literally contains the functionality of 6 devices that have been sold separately, each with its own unique clinical value. These functions are:

1) Microcurrent stimulator - With 4 waveforms, 5 custom modulations, GSR feedback and combination protocols, Acutron technology is the most versatile offering of microcurrent that has ever been produced. No other device comes close. Easy-to-use treatment presets allow even the technology-shy to set it up

with ease.

2) Conventional milliamp stimulator - Comparable to TENS unit and low-volt stimulators found in many pain clinics, which stimulates the nerves through the skin.

3) High-volt galvanic - Research has shown great value in wound healing acceleration and pain management, as they put out extra high peak milliamp voltage.

4) Electro-acupuncture - Although considered an experimental use by the FDA, this device can match any of the outputs of international electro-acupuncture devices. Microcurrent, which is not offered in such devices, may be a superior means of stimulating the acupuncture meridians in cases other than acute pain and anesthesia.

5) Interferential stimulator - The favored ES treatment among most chiropractors, interferential is a four-electrode mixed-frequency treatment that reputedly creates deeper penetration of current and a broader, more dynamic current pattern. It is excellent for low back pain, as well as pain and rehab applications for all the large joints of the body. Acutron Mentor offers 6 interferential presets, for uses ranging from assisted rehabilitation exercises to acute analgesic interventions.

6) Russian stimulation - This protocol was developed by doctors working for the Russian Olympic team for the purpose of helping athletes speed development of muscles mass during exercise. Originally developed for passive muscle mass enhancement, it has found positive acceptance for treatment of sports injuries.

Why all this versatility? Because what is required to achieve clinical success varies from patient to patient. A thin, sensitive and fatigued woman cannot be treated with the same current as an overweight one with abundant energy. Extremity pain must be treated in a different pattern than neck or low back pain. While in some cases the immediate pain control offered by classic interferential is a priority, in many other sessions it is appropriate to support healing and rehab with gentle microcurrent interferential. It is the ability to respond appropriately to the individual needs of each patient that makes a successful practitioner. This is a far better service than "assembly line" care in which every patient gets the same treatment. This one unit, the Acutron Mentor, can accurately match the clinical needs of most patients with pain or injury complaints, who are ready to get well.

NUMBER TWO: AURICULAR ACUPUNCTURE OR AURICULAR THERAPY

According to the principles of auricular therapy, each area of the ear corresponds to a different anatomical portion of the body. A large number of sites have been identified on the ear which become spontaneously tender or otherwise react to the presence of disease or injury elsewhere in the body. These sites are reportedly

consistent from one individual to the next. Stimulation of these ear points with fine, sterile and disposable needles or with electrical stimulation in time exerts certain therapeutic effects on those parts of the body with which they are associated. As a comprehensive system of diagnosis and treatment, ear reflexology is of recent origin. A French physician by the name of Nogier, writing in a German acupuncture periodical in 1957, first drew serious attention to the correspondences between specific sites on the ear and other parts of the body. After years of careful observation relating points of tenderness, morphological and coloration changes on the ear to disease elsewhere in the body, more than 200 sites were charted on the auricle (ear) by Chinese medical workers. Ear reflexology is not only effective in the treatment of a wide range of common diseases, it can also be used with good results in the treatment of difficult emotional states.



Besides assessing the treatment effects resulting from auricular therapy, both French, German and Chinese physicians have reported that it is possible to diagnose a variety of pathological conditions by examining the ear. When there is a pain problem involving a given area of the body, the corresponding ear point is said to be "reactive", manifesting greatly increased tenderness and electrical conductivity as compared to the surrounding areas of the ear. Several investigators have provided clinical evidence supporting the therapeutic efficiency of auricular therapy for the relief of pain and the healing of disease.

Auricular therapy helps to treat...

- acute and chronic pain of all kinds
- myalgias
- headaches
- digestive disorders
- muscle aches
- tennis and golf elbows
- sports injuries
- anxiety
- insomnia
- sciatica and back pain
- addictions
- and many more conditions and complaints

In addition to the Acutron Mentor, I often use another medically developed hand-held device called the NET 2000 which automatically stimulates all seven of the Nogier frequencies.

NOGIER frequencies

Seven frequencies were developed experimentally by Dr Paul NOGIER in the 1970s. These frequencies are constantly used in routine medical practice, as they are preferentially recognized by the body. They enter into resonance with the body and specific exert effects on the body. These frequencies are used both for detection and for treatment.

Frequencies	U	A	B	C	D	E	F	G
Value (Hz)	1.14	2.28	4.56	9.125	18.25	36.5	73	146

The U frequency is the so-called "universal" frequency and the resulting 7 fundamental frequencies are multiples of 2.

The same frequencies are used for laser devices, but at a higher harmonic. They have an identical action.

Frequencies	A	B	C	D	E	F	G
Value (Hz)	292	584	1168	2336	4672	73	146

Variations with respect to reference frequencies are also used. They range from -30% to +30%.

Definition of frequencies by Drs Paul and Raphaël NOGIER:

Extract from "The man in the ear", Maisonneuve, 1979, 255 p.

The "A" frequency is associated, in the animal kingdom, with non-organized, embryonic structures. It is the frequency of the primitive living being; it is in sympathy with the cell in the crude, undifferentiated state. This frequency, the most archaic, can also be considered to be the most anarchic.

The more elaborate "B" frequency is specific to the nutritional visceral system and is related to the primitive gastrointestinal apparatus.

The "C" frequency indicates motor elements of the body. It reflects movement, the limbs, the renal system, the genital tract.

The "D" frequency leads us to a higher level of organization, as it introduces the concept of symmetry, by selectively affecting certain unpaired organs, presenting the characteristic of being solitary, but anatomically symmetrical; for example the

corpus callosum or the white commissure, two symmetrical cerebral structures, situated between the right hemisphere and the left hemisphere.

The "E" frequency is that of the spinal cord and central nervous system, which perceives and communicates between functional units situated at different levels.

The "F" frequency represents subcortical cerebral regions. These structures are found in the brain of higher animals, dogs, for example.

The "G" frequency resonates with the most elaborate structures of the body, those of the cerebral cortex, the typically human part of the brain, which gives man the capacity to think, create and imagine.

The following table summarizes the main therapeutic applications of NOGIER frequencies:

NAME	THERAPEUTIC ACTION
A	action on the tissues wounds, epithelial tumours,epidermal reactions...
B	gastrointestinal and metabolic problems trophic functions, polarity, parasympathetic, interoceptive impulses...
C	locomotor problems ergotropic function, sympathetic polarity....
D	disorders of laterality
E	pain and nerve conduction spinal cord diseases
F	Brain and bone reconstruction
G	action on the cerebral cortex cortical, mental disorders ...

NUMBER THREE: KOREAN HAND THERAPY

**Advantages Of The Korean Hand
Microsystem In Clinical Practice:
Reflections After 15 Years Of Experience**
Lowell E. Kobrin, MD

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I began the transition from using the traditional body acupuncture points as my primary locus of treatment to using the corresponding points on the Korean Hand microsystem in 1988. I reported in this journal¹ that the patient acceptance of using tiny needles that penetrate only 1 millimeter into the skin was excellent, and that results of treatment appeared the same as if the traditional body acupuncture points had been used. These observations, made early on in my adventure into this elegant treatment system, continued to be the case over the last 15 years as my use of the Korean Hand Therapy (KHT) model became more and more refined. I have used the Korean Hand microsystem to set up treatments based on the Traditional Chinese Medicine (TCM) model (Eight Principles), the Five Element System, French Energetics, the Distinct (Divergent) Meridians, the Tendinomuscular Meridians, the Cerebral Circulation, Extraordinary Meridian Therapy and others, all with results that paralleled deep needling on the body points.

When we, as physicians well-learned in the constructs governing contemporary Western medicine, were first exposed in our training to the paradigm under which the rules for using acupuncture operate, there was a certain "leap of faith" required until we actually witnessed the successful outcome of our treatments in our patients. Molecular medicine, with its linear thinking, that had been the fundamental basis for understanding the etiology and pathogenesis of human disease states throughout our entire medical education, was profoundly shaken up when we

were taught the thinking process required to design acupuncture treatments. Our colleagues often looked upon us as "strangers in a strange land" as we practiced this ancient art - even though we, as physicians, were able to integrate this knowledge with the molecular model whenever possible. Nonetheless, we persisted in our "new" specialty over the last 2 decades, at last seeing acupuncture emerge as an accepted treatment modality by our colleagues. Most non-acupuncture trained physicians, however, can only appreciate acupuncture in a linear sense, i.e., as an alternative to pharmaceutical therapy or surgery for chronic pain. There is no sense of "wholeness," i.e., the ability to integrate the factors of emotions, physical complaints, diet, and lifestyle to formulate a treatment plan for the patient.

With the introduction of the KHT system^{2,3} and its ability to effect treatment non-

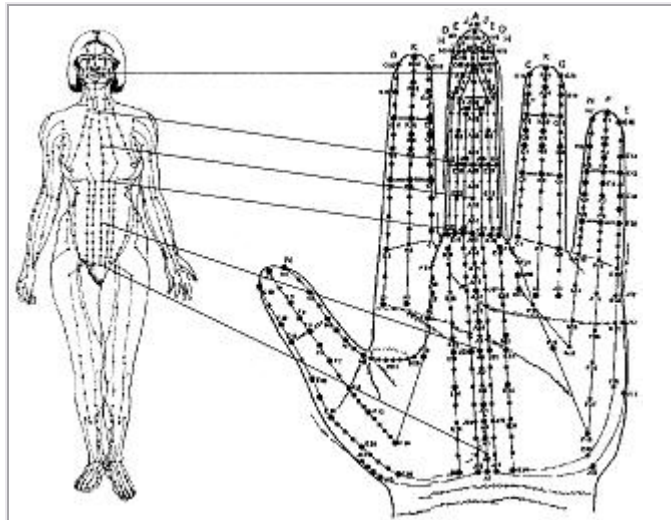


Figure 1. The traditional meridians and acupuncture points are duplicated in the micromeridians and points of the Korean Hand Therapy hologram.

invasively, the physician acupuncture practitioner is faced with yet another "leap of faith." We (and our patients) have been obsessed with the requirement of breaking the skin as being the necessary input for effective treatments in acupuncture. The points on the KHT micromeridians are uniquely sensitive to metallic press pellets. These blunt-tipped pellets appropriately placed on the Korean Hand microsystem points have been found to be every bit as good as using the quarterinch KHT needles.⁴ Tonification of a KHT point is done using a gold pellet, while sedation of a point is effected using a silver pellet. Thus, an efficient, yet comprehensive needleless method for acuthery has evolved. This is not to say that one must abandon using body points or auricular points or scalp acupuncture points. Indeed, while the KHT microsystem is used for the main treatment, it is perfectly acceptable and often advantageous, for example, to add appropriate auricular points. We use traditional body point palpation for Three Constitutions diagnosis.¹ It is mandatory to use the traditional body points to bridge scars that cross meridians, and I often do local therapy on body, using acupuncture points that affect the local problem (Figure 1). However, I now even use non-invasive techniques to obtain De Qi on the body points.⁴ The advantages of using Korean Hand Therapy are obvious:

1. Painless, non-invasive therapy is easy with children and those with needlephobia.
2. Positioning and repositioning the patient is not necessary.
3. Neither sterility nor contaminations are concerns.
4. Placement of KHT pellets or needles is rapid and efficient.
5. The patient does not have to remain for 30 or 40 minutes if needles are not used (however, it is often advantageous for the patient to sit quietly for about 15 minutes after a KHT needleless treatment is placed).
6. Press pellets (gold and silver), a mini cun stick, a fine, water-soluble marker to measure relative distances on the hand, and a good point finder are all one needs to execute any treatment protocol using the KHT microsystem. These items will fit into a medium-size pocket.
7. If one masters the Three Constitutions System^{5,6} of diagnosis unique to KHT, the practitioner will see a level of accuracy in diagnosis which, in my experience, surpasses anything I have learned to date in my acupuncture training. That diagnostic system gives the practitioner the flexibility to design appropriate treatments ranging from simple sedation or tonification of the appropriate meridians to elegant Five Element or Extraordinary Meridian treatments. In fact, Three Constitutions Diagnosis is the most accurate system I have found for the appropriate use of the Extraordinary Meridians.⁶
8. The patient can be taught the most basic therapeutic level, i.e., Correspondence Therapy,^{2,5} to easily and accurately use press pellets at home to help reduce pain instead of using pharmaceuticals - with the understanding that self-therapy is not a substitute for returning as advised to the practitioner, who is trained to design treatments that go far beyond this temporary pain relief.

So why is the acupuncture community so slow to explore and convert to the KHT microsystem? I believe there are several reasons: 1) Tradition: Not unlike Tevye, the main character in "Fiddler on the Roof," we are reluctant to change from a system that works even if the system is, by comparison, more cumbersome and time-consuming. There is definite gratification in having the knowledge and skill to perform needling, cupping, etc. It took many hours to master this art. This method has worked for thousands of years and the patient expects it; 2) Anatomy: The traditional acupuncture meridians and points are at least more closely related to the body's "real" anatomy, which is emotionally more comfortable to many practitioners than using the Korean hand hologram of the body. We can give some sort of structural and physiologic credence to the effects of acupuncture when body points are needled (influencing movement in the ionic milieu in the interstitial fluid), but when the KHT micromeridians and points are used in treatments to get the same effect as body needling, we are truly at a loss to explain any possible mechanism of action. In an interesting and provocative article, Bouevitch suggests that microacupuncture systems may be based on the principle of fractalization;⁷ and 3) Time Constraints: Work overload often makes us reluctant to expend the time to learn yet another system to accomplish the same ends ? even if it has significant benefits.

Nevertheless, here is the challenge...Learn enough of the main KHT correspondent points so that you can apply a treatment on the hand, using any system of acupuncture diagnostics in which you are comfortable, to design the treatment. Ask a few of your long-standing patients to allow their next 3 treatments to be placed on the KHT points in lieu of the traditional body points. Question them as to the efficacy of the KHT treatment compared with prior treatments that were done using the traditional system. If your treatment protocol is appropriate and you placed the KHT points accurately, the effectiveness of the treatment should be equal to that seen from piquing the traditional points.

I believe that the use of the KHT microsystem is destined to become the next step in the evolution of acupuncture medicine. I make this prognostication because this system is the only complete point by point miniature template (much like your remote control is to your TV set) of the traditional body system known.⁸

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