

Acupuncture for Post-surgical patients and the prevention and treatment of chronic pain

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Who is here?

- Providers? Patients? Caregivers?
- Surgeries?
- Chronic pain?
- Been to a provider and not gotten a problem resolved?
- As a provider, not knowing what else to do?

Who am i?:

- Private practice, PIQUE Integrative Medicine, in Beverly Hills, CA
- Teach orthopedic assessment and serve as a guest lecturer on the topics of advocacy and business building
- Serve on the board of CSOMA, CA's oldest and most integrative Eastern Medicine association
- My why: I want everyone to know how valuable integrative medicine can be, especially in the treatment of chronic disease and see acupuncture in the standard of care

My story

- Always wanted to be a part of medicine; endlessly fascinated by the body
- Orthopedic surgery? Athletic Training? PT? EMT?
- Entry level PT- the game changer
 - Protocols- why weren't they always working?
 - Limited scope of practice
- My own frustration with chronic pain
- Starting to believe in root cause medicine
- Wanted to write post-ortho surgery protocols with a diagnosis of underlying deficiencies

My specialty: post-surgical recovery optimization

- First interest: beat the protocol
 - Scars₂₂ and wound healing_{7,20}
 - Pain
- Other issues: anesthesia_{14,15}
- Huge gap in the standard of care in a critical area of opportunity
 - Patient empowerment
- Rise in chronic pain conditions and chronic disease in general
- Pain memory/Pain cycle

Chinese medicine: a system

- Multiple modalities: acupuncture, moxa, cupping, gua sha, tui-na, herbal medicine
- TCM: easiest leap from western medicine (ICD 11 codes?)
 - Pattern is a collection of symptoms = diagnosis
- In Asia, traditional medicine is in hospitals with western medicine
 - Not about competition; everything has its place where it shines
- Root cause medicine: incredible for chronic disease

Case report

- [D:\iPain\Total Knee Replacement.pptx \(1\).pdf](#)

Modalities: acupuncture

- Different techniques: will demo
 - Local/dry needling, semi local, distal, distal-active, auricular, e-stim
- Channels/pathways/meridians: 95+% overlap with the nervous system₂₈
 - Very well demonstrated with electrical stimulation₁₉
 - Energy medicine = electrical medicine?₂₆
- Technique matters!



Modalities: cupping

- Uses a negative pressure (as opposed to a positive pressure like massage)
- Leaves marks: not a bruise
 - These marks stimulate a systemic anti-inflammatory response in the body and affect the lymph₂₉
- Technique matters: suction cups have limited
- Also used for colds (fun fact)



Modalities: Gua sha

- Scraping technique
- Can be gentle or more aggressive
- Effective for pain, scar tissue, adhesions, etc.
- Increases circulation, boost immune system
- Chiros developed Graston technique



Modalities: moxa

- Warming herb
- Very important if pain is cold based- everything is part of function
- Also used for fertility and reproductive disorders (fertility)



Modalities: herbal medicine

- Often used for internal medicine, but in TCM, everything is internal medicine
 - Pain is the branch...what is the root?
- Supplement the acupuncture (or multiple modality treatment)
- Can extend the treatment
- Herbs vs pharmaceutical medication: The Runner



Chinese medicine as a system and root cause medicine

- Not as simple as, “You have back pain so _____ is the treatment plan”.
- Individualized approach: root and branch
- Treatment vs Cure
- Holistic: gives you the biggest bang for your buck

What's the hold up?

- Does it work?
- How does it work?
- Why isn't it in the standard of care?
- Where's the research?
- Education?

Does it work? How then?

- Acupuncture vs Acupuncture and additional modalities
 - Creates localized immune response_{6,7,8}
 - Increases circulation_{9,10}
- E-stim: energetic = electrical medicine₂₆



Not in the standard of care

- Post-surgical example shows this clearly
- Not all insurances cover it
 - Was included in the 2014 bill as an essential health benefit₃₁
- Competes with other industries

Research challenges

- Lacking in US (not other countries)
 - Germany for example
- Difficult to do double blind
 - Issues with Sham Acupuncture
- Many variables, often gets complicated

Lack of education leads to misconceptions

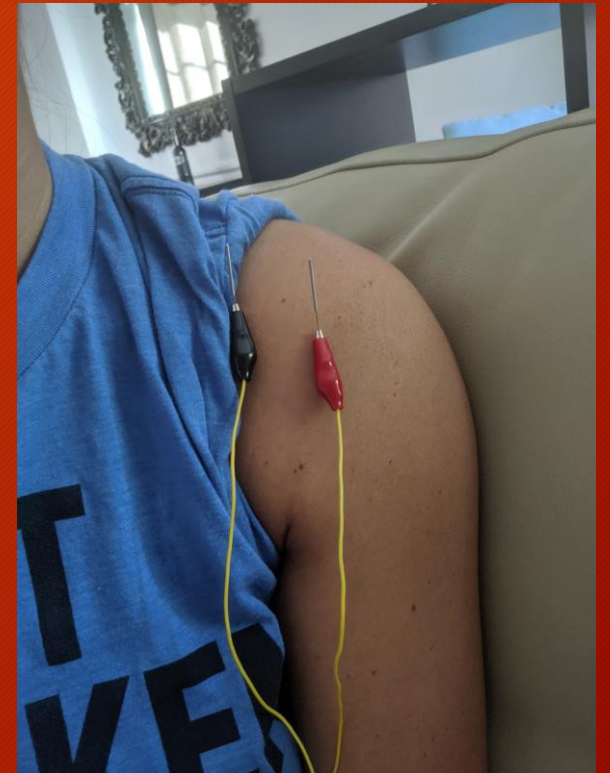
- Fears around an integrative model
- Immediate relief from a treatment vs lasting relief from a cure
- Dosage
- Passive vs Active
- Education of providers (acupuncture specifically)
- Needle phobias

What to do?

- Be your own advocate
- Ask trusted sources:
 - NCCAOM
 - California Acupuncture Board
 - EAM Directory
 - Ask me for a referral

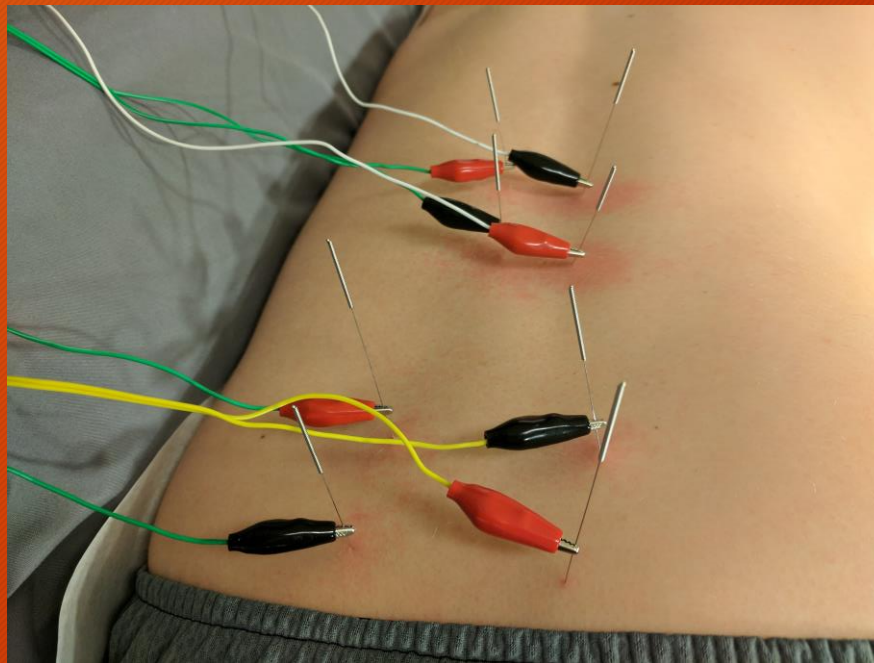
Demo: local needling

- Basic local / dry needling
- Local with e-stim



Demo: up the chain, still semi local

- Neuromodulation up the chain
- With e-stim



Demo: Distal

- Distal



- Distal/Active



Demo: Auricular



Questions?

Resources

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Resources, continued

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