

## Acupuncture Treatment of Neck Pain in Cold Wind Pathogen Syndrome

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### Abstract

**Introduction:** Neck pain is one of the health problems that exist in modern society. Neck pain is one of the main musculoskeletal disorders in the adult population, where the prevalence in the world ranges from 16.7% to 75.1%. In Indonesia, every year, around 16.6% of the adult population complains of neck disorders, of which 0.6% start with discomfort in the neck and progress to severe neck pain. **Objective:** This study aims to provide an in-depth description of the role of acupuncture in specific neck pain cases caused by cold-weather pathogens. **Method:** The research design used a qualitative approach with a case study type and was conducted in March–April 2023. **Result and Discussion:** The acupuncture points used were Feng Chi (GB 20), Tian Zhu (BL 10), Jianjing (GB 21), Dazhu (BL 11), Extra Xinshe, and Jianzhongshu (SI 15). The results of this study showed that participants felt pain at the beginning on a scale of 8 before changing to a scale of 1 and 5, and the neck and shoulders no longer felt stiff. **Conclusion:** And the participants can sleep comfortably and are not disturbed by pain because the complaints they feel have improved.

**Keywords:** Acupuncture; Neck Pain; Neck Stiffness:

## **Introduction**

Neck pain is one of the health problems that exist in modern society. In an article on medical acupuncture, FKUI-RSCM (Yunita and Didi, 2021), based on The International Association for the Study of Pain (IASP), neck pain is pain that is felt in the superior area of the nuchal line up to the first thoracic spinous process. Symptoms of neck pain include neck pain and stiffness, sore neck muscles, headaches, and migraines. Almost any injury or disease process to the neck or adjacent structures will produce muscle spasm and loss of motion (Huldani, 2013). Pain can radiate to the shoulders, arms, and hands, accompanied by complaints of feeling numb or like being pricked by a needle. Pain can also radiate to the head, causing headaches (Samara, 2007).

Neck pain is one of the main musculoskeletal disorders in the adult population, where the prevalence in the world ranges from 16.7% to 75.1%. In Indonesia, every year, around 16.6% of the adult population complains of neck disorders, of which 0.6% start with discomfort in the neck and progress to severe neck pain. The incidence of neck pain increases with age, which is more common in women than men with a ratio of 1.67:1 (Yunita and Didi, 2021). Most neck pain gets better on its own after 2–3 weeks. However, this also depends on the cause. Medical action by providing drugs, physiotherapy, or surgery if needed.

The risk that may arise as a result of treating neck pain with drugs is that, when used excessively, it can cause dependency or addiction effects. Although there are many methods of dealing with neck pain that can be done, efforts to reduce pain can also use complementary therapies, namely, acupuncture. Acupuncture therapy that is easy, safe, rational, effective, inexpensive, and natural is expected to reduce the risk of side effects from anti-pain drugs. Medicines can be given to reduce pain in the neck, such as paracetamol or ibuprofen. Therapy can also be carried out with traction, heating or cooling, and nerve stimulation with electricity if needed (Tjandra and Zakaria, 2023).

Acupuncture, which has been practiced for thousands of years in the Eastern world (China, Vietnam, Korea, and Japan), is able to reduce and even eliminate pain, both mild and severe, acute, and chronic. Acupuncture is a method of treatment by piercing needles, and literally, acupuncture comes from the words *acus* (needle) and *puncture* (prick), and in Chinese, it is called *Cen Jiu* (Saputra, 2017).

Acupuncture indications for treating pain have been recommended by the WHO (1999), and in the last decade, the number of patients seeking pain relief through acupuncture has increased (Saputra, 2009). In an article in the *Journal of Chinese Medicine* No. 38, January 1992, entitled "The Treatment of the Neck And Upper Back With Acupuncture" (Macpherson, 1992), it was concluded that Acupuncture is very effective. moist, whereas medical treatment gives slow results. The effectiveness of acupuncture stems from a broad-based approach in which diagnosis and treatment include both local and systemic aspects. According to TCM, a stiff neck, called *Luo Zhen* in Chinese, is caused by improper sleeping position, sprains, and cold wind attacks, resulting in obstruction of *qi* and blood in the meridians (Kie Jie, 2010). Stiff neck refers to stiffness, pain, and limited neck movement.

Usually caused by improper posture during sleep or exposure to damp or cold air during sleep. Clinically characterized by neck stiffness and pain that usually radiates to one or both shoulders and upper arms, accompanied by neck muscle tension, extreme tenderness at the medial angle of the scapula, and impaired neck movement (Yin and Liu, 2000). According to Sim Kie Jie (Kie Jie, 2021), acupuncture in cases of neck pain caused by cold wind pathogens is performed by expelling windborne pathogens and eliminating cold pathogens, increasing the flow of Qi and Xue (blood) to relieve pain.

## **Method**

This research uses a qualitative approach with a case study type. Case studies are chosen with the aim of exploring a problem or phenomenon with detailed boundaries; data collection can be more in-depth and include various sources of information. This case study is limited by time and place and is intended to explore the role of acupuncture in cases of neck pain caused by cold pathogens.

The research subjects in this case study amounted to one person with the following criteria: experiencing acute neck pain caused by cold wind pathogens, having symptoms of headache in the neck and back, possibly radiating to the arms, numbness, and tension; may also have symptoms such as gradual reluctance to wind, mild or no fever, headache, pale tongue, thin or thick white membranes, floating, and a slow pulse; age 24-35 years; and not currently undergoing treatment other than acupuncture. The research was conducted in March 2023 for five treatments.

## **Result and Discussion**

### **Result**

Before therapy, neck observations were carried out, and the neck was found to be very stiff, not free to move in the neck area, head movements were not free, and the neck was very stiff. The color of the tongue is pink, with a thin and slightly thick coat. History of the disease since 2 days ago, suddenly after waking up, previously often typed on the laptop under the air conditioner, then the bedroom is also air-conditioned when you wake up with a stiff neck. Tense with pain scale 8. Based on these observations, the patient was diagnosed as having stiff neck pain radiating to the shoulders with obstructive wind syndrome that attacks the SI, GB, and BL meridians.

The acupuncture points taken were: Feng chi (GB 20), which is located at the lower border of the occipital bone, in an indentation between the base of the sternocleidomastoid and trapezius muscles. This point works to eliminate wind pathogens, benefit the head, cleanse the sense organs, and open the channels. Tian zhu (BL 10) is located approximately 1.3 cun lateral to → Du-15, where the trapezius muscle inserts at the lower border of the occiput, close to where the main occipital nerve arises. Jianjing (GB 21) is located at the highest point of the shoulder, at the midpoint of the line connecting the 7th cervical vertebra (C7) and the lateral end of the acromion. Points that open channels expel pathogens and regulate Qi flow, including local points on the shoulder area.

Dazhu Point (BL11) Point located 1.5 cm lateral to the posterior midline, at a lesser level bordering the spinous process of the 1st thoracic vertebra (T1, with the shoulder hanging at the level of the acromion). This point serves to expel wind pathogens, opens channels, and benefits joints and bones. The Extra Xinshe point is a point located on the nape of the neck, 1.5 cm below the back hairline, one line below the Feng chi point (GB 20), next to the fourth cervical bulge.

This point functions to smooth the flow of Qi and Xue from the neck up to the arm area, causing neck stiffness and arm pain. Jianzhongshu point (SI 15) is a point located 2 Cun lateral to GV-14 (Dazhui) point. This point functions to smooth the flow of Qi and Xue in the neck and shoulder region. All points were manipulated using sedation techniques.

## **Discussion**

After examining Mr. X, there was a change in the examination results in the 1st therapy session with the 2nd therapy session, namely in the observation examination of the condition of the shen facial expression, which was originally seen grimacing, the reflection of the neck motion looked stiff, making it less free to move in the neck area.

So, in the 2nd therapy session, there have started to be changes, namely the facial expressions look a little grimacing and the reflection of the neck movement looks a little stiff, but it is still not free to move in the neck area. Then, in the third therapy session, another change was seen, namely that the expression on the face did not look grimacing. And in the fourth therapy session, the neck didn't look stiff and was free to move.

Changes are also seen in the state of the body. In the examination results in the 1st therapy session, it was found that when standing, the neck looks stiff; when sitting, the neck looks stiff; when lying down, it is uncomfortable in the neck area; head movements are not free to move; and the nape of the neck looks stiff. In the 2nd therapy session, there were visible changes when standing and sitting, with the neck looking a little stiff; and in the 3rd therapy session, when lying down, it felt a little comfortable around the neck.

Changes in the state of the body also occur again in the therapy session, namely when standing and sitting, the neck does not look stiff, and when lying down, it is comfortable in the neck area and the movement of the head is free to move, and the neck area is no longer stiff.

From the results of the examination of the tongue, it was seen that there was a difference between the 1st therapy session, which originally had a slightly thick white tongue coating, and the 4th therapy session, which had a thin white tongue coating.

For sleep problems, there were many significant changes during session 1. Sleep was disturbed; in the 2nd therapy session, he slept quite soundly, and in the 3rd session, he slept quite soundly. Until the 5th therapy session, he could sleep well without any disturbance of pain in the shoulder and neck area.

The above conditions occur due to the presence of acupuncture punctures, which, according to TCM perception, cause neck pain caused by cold wind pathogens due to blockage of Qi flow in the meridians. By stimulating several points on the blocked

meridians, it can restore the flow of energy circulation (Qi) smoothly and cure pain. According to the perspective of western medicine, the analgesia effect caused by acupuncture is the secretion of endogenous opioid compounds from the pituitary gland (in the form of beta-endorphin, enkefalin, and dynorphin) into the cerebrospinal fluid after an acupuncture point is stimulated with various levels and modulations and has been shown to increase pain threshold values.

The condition is better because the client obeys and carries out routine therapy according to schedule and carries out recommendations and suggestions from the therapist so that the symptoms that appear before being treated change in a good direction in the 2nd therapy session and get better in the last therapy session, namely the 2nd therapy 5 with an initial pain scale of 9 to a pain scale of 1 at the 5th therapy interview.

Related to this acupuncture diagnosis, Yin (2000) states that a stiff neck is always manifested as a meridian obstruction syndrome by cold wind attacks. The points of the small intestine, gallbladder, and bladder meridians are often chosen for their treatment. During treatment, it is often best not to change prescriptions and points until later, when treatment proves to be ineffective. Even though the condition of the client's complaints has improved, it is still advisable not to immediately change the pattern of therapy considering that the improvement of the client's root condition takes time, according to Xiaoming (Xiaoming, 2006).

## **Conclusion**

Acupuncture in cases of neck pain caused by cold wind pathogens at Griya Sehat Hartadinata Bandung using 6 acupuncture points, namely Feng Chi Point (GB 20), Tian Zhu Point (BL 10), Jianjing Point (GB 21), Dazhu Point (BL 11), Extra Point xinshe, and Jianzhongshu Point (SI 15), it can be concluded: Participants felt pain at the beginning on a scale of 8, and in the last therapy session (5th therapy), it changed to a scale of 1. Stiffness in the neck and shoulders was not felt; when sitting, standing, and lying down, the participants felt comfortable; the neck could move freely; the participants could sleep comfortably and not bothered by his neck pain because the neck pain has healed slowly.

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