

Auricular Therapy: Is there a place for it in your NP tool kit?

Karen Williams, DNP, FNP-BC
KDW Health Management

NP Symposium 2022

Disclosures & Acknowledgement

- Karen Williams, DNP, FNP-BC has no financial relationships with commercial interests to disclose
- Any unlabeled/unapproved uses of drugs or products referenced will be disclosed
- The views expressed in this presentation are those of the author and do not reflect the official policy of the Department of the Veterans Affairs, Department of Defense, or U.S. Government
- This presentation was developed by Karen Williams FNP and Karen Sova, MSN, ARNP, ANP-BC, COHN-S /National Institutes of Health

Objectives

- Provide an overview of history of acupuncture and review of types of acupuncture
- Discuss the history and significance of Auricular Acupuncture
- Explain the particulars of auricular therapy through case reviews

Which One Am I Talking About?

- Auriculotherapy
- Auricular Therapy
- Auricular Acupuncture

Auriculotherapy/Auricular Acupuncture Evolves with Chinese Acupuncture

- Meridian based medicine - Seeks to restore harmony and balance: **Qi - life force energy** - travels along 12 main pathways or meridians within the body
- **Qi is profoundly disturbed by traumatic stress**
- Historically evolved in China over 5000 years ago
- Yellow Emperor's Inner Classic- earliest major medical source dating back to 206 BC- 220 AD¹



- China – isolated from rest of world because of internal feuding for power.
- 1800's- Outside trade and influx of Christianity and Western medicine
- 1822 – Order to stop teaching of acupuncture at Imperial Medical college by Qing Emperor
- Restrictions on acupuncture continued resulting in the decline of traditional Chinese medicine.
- 1949 - Rise of Mao Zedong- poor rural healthcare created need for 'Barefoot Doctors'¹

Interest in Acupuncture Begins in the United States

- On a trip to China with President Richard Nixon, NY Times reporter, James Reston, suffered appendicitis
- 1971- Front page of NY Times, James Reston reported on his emergency appendectomy in China - post op pain relieved by 3 needles²
- 3 months later a report in Journal of American Medical Association³
- National Institutes of Health sponsored physicians to study Chinese health care and research acupuncture⁴ (NICAM)

Different Types of Acupuncture

- Traditional Chinese Acupuncture (TCM)
- Medical Acupuncture
- Japanese Acupuncture
- Korean Hand Acupuncture
- Scalp Acupuncture
- Auricular Acupuncture and Auriculotherapy
- Veterinary Acupuncture
- Acupressure

Does It Work? - Research -

- Auricular acupuncture in the treatment of acute pain syndromes: A pilot study(2006).** Pilot study of 87 active duty military personnel with acute pain- the acupuncture group showed a 23% reduction in pain versus the standard medical care group⁵
- Efficacy of Auricular Therapy for Pain Management: A Systematic Review and Meta- Analysis (2014).** Meta – analysis of 13 studies on Auricular Therapy (Acupressure, Acupuncture and Electro-acupuncture) showed a greater decrease in pain score than sham or control group⁶

Does It Work? - Research -

- A Randomized Exploratory Study to evaluate Two Acupuncture Methods for the treatment of Headaches Associated with traumatic Brain Injury(2016).** Post concussive headaches in active duty service members. Randomized exploratory study evaluated: usual care, TCM and Auricular Acupuncture. Acupuncture improved headache related quality of life more than usual care⁷
- Auricular acupuncture for chronic pain and insomnia: A randomized clinical trial (2018).** 32 participants were randomized to either usual care vs usual care plus one treatment with BFA. The BFA group showed a statistically significant reduction in both chronic pain and insomnia vs the usual care group⁸

Does It Work? - Research -

- Clinical observation in the VA headache clinic-** acupuncture used daily to stop the headache and general pain reduction, improve mood and help with sleep - no use of narcotics
- Clinical anecdotal observation at NIH –** across the spectrum of diverse problems – success with pain reduction, muscle relaxation, lessening of acute presentations and improvement in sleep and stress reduction – no use of narcotics
- Further research is ongoing; some of the difficulty is having a control group

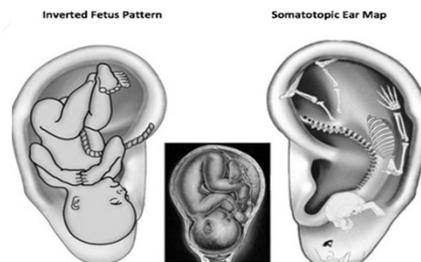
Acupuncture Systematic Reviews

- NIH systematic review 2012
 - Acupuncture is **effective for chronic pain treatment** and can be considered a reasonable option
 - Chronic pain to include back and neck pain, osteoarthritis, chronic headache and shoulder pain⁹
- Cochrane systematic review 2016
 - Acupuncture should be **considered for migraine patients for prevention**, particularly if having adverse effects from medications
 - Acupuncture effect size was **statically significantly** larger in real acupuncture verses sham acupuncture **for chronic headaches**
 - Acupuncture should be **considered for treating episodic or chronic tension headaches**¹⁰

Auriculotherapy/Auricular Acupuncture Theory

- Utilizes the ear as a homunculus/microcosm representation of human body with specific corresponding acupuncture points on ear
- 12 Meridians pass through ears
- Embryological development of the ear allows access to brain and subsequently the body organs
- Stimulation of nerve endings sends signals to the brain and then to the body
- By observing the ear one can identify specific issues/disease processes¹¹

History of Auriculotherapy



With permission from Terry Oleson, Ph.D

Early Documented Use of Auriculotherapy

- Egypt, Greece and Rome 500 BC to 100AD - Hippocrates and Galen used ear rings and other forms of ear stimulation
- Persians in 200AD after the fall of Rome, recorded cauterization for sciatica pain
- 1500 to 1700 the Dutch East India Company
- 1957 Dr. Paul Nogier (French) noticed scarring on patients ears, which was used for the treatment of sciatica¹¹

Early Documented Use

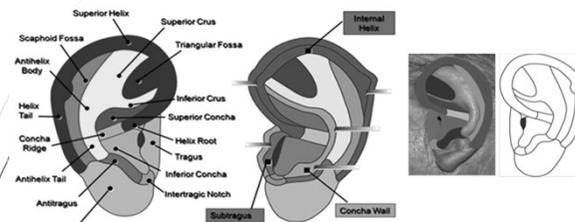
(continued)

- 1958 the Chinese learned of Dr. Nogier's charts and verified the accuracy of the points¹¹
- 1980 – Dr. Terry Oleson from UCLA verified the scientific accuracy of the auricular diagnosis¹²
- 1990 WHO standardized the terminology¹¹
- 2001 Col. Richard Niemtow, MD, PhD develops 'Battlefield Acupuncture'

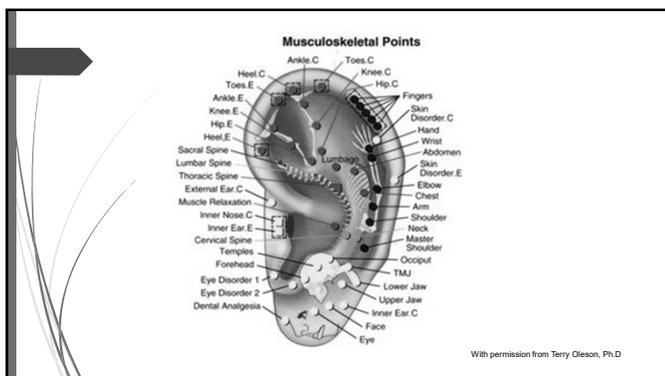
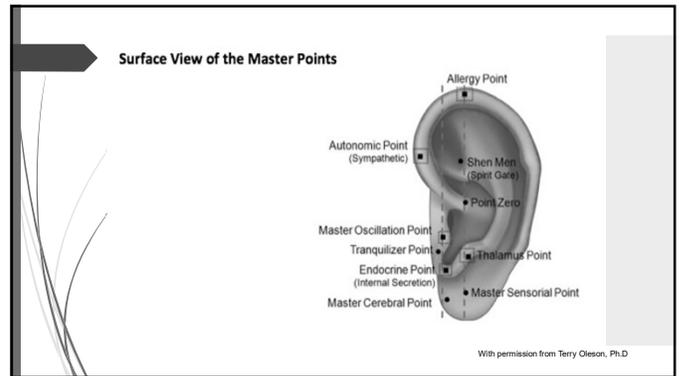
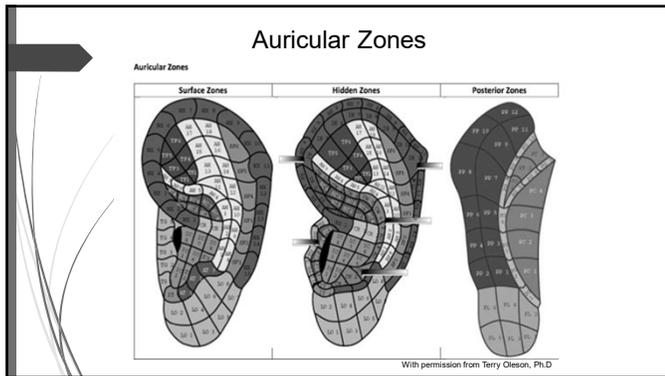
Auriculotherapy/Auricular Acupuncture



Anatomy of An Ear - A Guide to Finding the Points



With permission from Terry Oleson, Ph.D



Auriculotherapy/ Auricular Acupuncture use

- Treatment for substance abuse (NADA protocol) and more recently for PTSD, TBI, and battlefield acupuncture (BFA)
- Wide range of disorders to include headache, chronic back pain, asthma, allergic rhinitis, dental pain, anxiety, insomnia
- Points can be needled, seeded, electrically stimulated
- Allows quick and easy access for treatment
- Treatments take as little as 20 minutes, provide relief for days to weeks
- Easy to learn¹¹

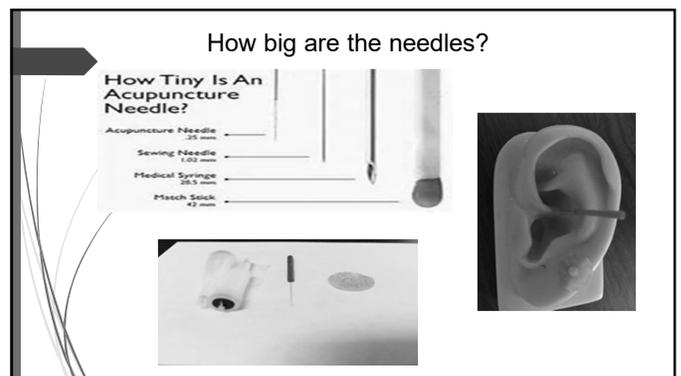
Relative Value Unit (RVU) for acupuncture

Acupuncture without electric stimulation

- 97810 - 0.6 RVU's - first 15 minutes
- 97811 - 0.5 RVU's - additional 15 minutes

Acupuncture with electric stimulation

- 97813 - 0.65 RVU's - first 15 minutes
- 97814 - 0.5 RVU's - additional 15 minutes



Auricular Exam

- ▶ General health history, PE as needed
- ▶ Education and informed consent obtained
- ▶ Examine ears closely – dry patches, lesions, congestion and redness
- ▶ May palpate or use point finder to determine irregularities or painful spots
- ▶ May measure skin resistance with electrical probes

Precautions

Should not be performed on patients who are:

- ▶ Weak/exhausted
- ▶ Very hungry or have just eaten or drank alcohol
- ▶ * Pregnant- NADA protocol allows this, BFA does not
- ▶ *Under 7 years of age
- ▶ Anemia
- ▶ Elderly – perform with care
- ▶ Adverse to needles – use acupressure or seeds

Side Effects

- ▶ Bruising, bleeding at the insertion site
- ▶ Infection at placement of the needle (very rare)
- ▶ 'Needle Shock' /AKA vaso-vagal reaction
 - ▶ Dizziness
 - ▶ Nausea
 - ▶ Sweating
 - ▶ Numbness
- ▶ Remove needles and allow patient to rest
- ▶ Occasionally symptoms increase but then resolve

Easy Auricular Acupuncture Protocols

Battlefield Acupuncture (BFA)

- ▶ Cingulate gyrus, Thalamus, Omega 2, Point Zero, Shen Men

National Acupuncture Detoxification Association (NADA)

- ▶ Lung, Liver, Kidney, Shen Men, Autonomic Point

Auricular Trauma Protocol (ATP)

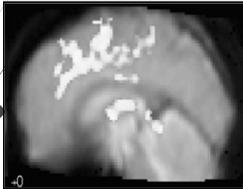
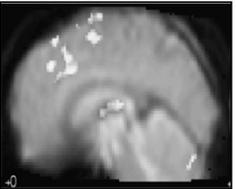
- ▶ Master Cerebral, Amygdala, Hypothalamus, Hippocampus, Insula, Vagus, Point Zero, Shen Men¹³



BFA
Science

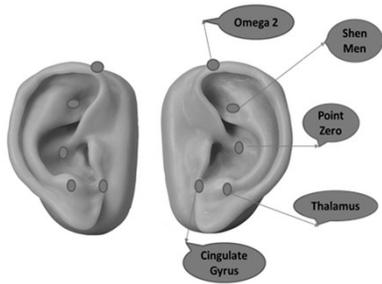


Anterior Cingulate Cortex and Thalamic Nuclei

Pain stimulation	Pain stimulation w/acupuncture
	

With Permission from Dr Richard C. Niemtzow

BFA Points



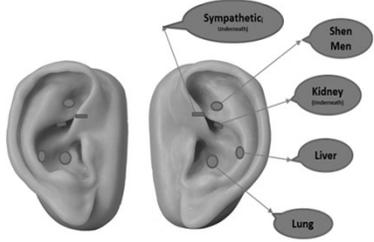
K2W Health Management LLC

Significance of Points/BFA

- **Cingulate gyrus**- memory and emotion with pain
- **Thalamus**- Communication of nervous system to cerebral cortex (Grand Central station), reducing shock, restoring tranquility
- **Omega 2** Psychosomatic d/o & pain in limbs
- **Point zero**- General body homeostasis/autonomic brain controlling visceral organs
- **Shen Men**- Parasympathetic switch, alleviates excessive sensitivity, calming, pain reduction, insomnia – supports other auricular reflex points

KDW Health Management LLC

NADA Points



KDW Health Management LLC

Significance of Points/NADA

- **Sympathetic/Autonomic point**- fight or flight- Balances, strong analgesic and relaxant, calms the spirit
- **Shen men**- spirit gate/calms the mind, opens the heart, reduces B/P, alleviates pain
- **Kidney**- relieves fear, allows one to hear positive
- **Liver**- anger/relieves muscle cramps aids in clear thinking, relieves depression, helps to find direction
- **Lung**- regulation of grief/sadness, provides inspiration¹⁴

History of National Acupuncture Detoxification Association (NADA) and the NADA protocol

- Auricular acupuncture first evolved by Dr Nogier in the 1950's
- Dr. Wen and Dr. Cheung (Hong Kong) published their findings on using electric stim to the ear and body for opium addiction, 1973
- Dr. Michael Smith expanded ear points and utilized it at Lincoln Hospital (South Bronx) for drug and alcohol abuse, 1983
- NADA was founded by Dr. Smith and others in 1985
- *Not a stand alone treatment- facilitates other treatments*¹⁴⁻¹⁷

Consideration of use

- Substance abuse to include Alcohol, nicotine, cocaine and opioids
- Recovery from trauma- helps with sleep, which may help with processing recent events
- Chronic pain reduction
- Safe in pregnancy
- works well in groups
- Cost effective and safe

Additional uses of NADA

- NADA helpful for stress reduction, improving sleep and coping
 - 9/11 attacks- stress reduction clinic¹⁴⁻¹⁷
 - Burmese (India and Thailand) refugee camps, 2001¹⁴⁻¹⁷
 - Gulf Coast recovery – hurricanes Katrina and Rita, 2005¹⁴⁻¹⁷
 - Kashmir earthquake and other disaster and relief efforts around the world¹⁴⁻¹⁷
 - Richmond VA- administers 16 sessions for those starting the chronic pain program- helpful for pain reduction and the ability to focus on other pain reduction modalities

Auricular Acupuncture Training Opportunities

- **Battlefield Acupuncture/Acupressure BFA/BAA**- taught throughout the VA-
 - 4-hour course, online post quiz, work with your credentialing department
 - Open to Health Care Professionals in the VA (Physician, NP, PA, PharmD, RN)
- **Acupuncture and BFA Community** - Home (sharepoint.com) for help in finding a BFA class

Auricular Acupuncture Training Opportunities

- **NADA (National Acu-Detox Association)**
- **Regulations - National Acupuncture Detoxification Association (acudetox.com)**
 - 30-hour course
 - Complete 40 encounters under the supervision of a certified acudetox specialist/can usually be done in a group settings
 - State specific, in some states this is open to MD, NP, PA, Social Work, Psychologist, RN, LVN
 - VHA is developing a NADA course, expected to be launched sometime in 2022
- **Auricular Therapy Certification Institute (ACI)- online program**

Case Reviews



Battlefield Acupuncture Refractory Migraine

History and Treatment

- 28 year old active duty soldier was being seen for a 2 weeks migraine that did not resolved even after ER treatment with IV medication
- BFA protocol placed in both ears and allowed the patient to rest in a chair for 20 minutes
- Migraine was completely resolved
- The soldier left pain free without any adverse side effects

NADA Acute opioid withdrawal

History and Treatment

- 40 yr old female with chronic pain and migraines. Weaning off oral opioids and titrating up on a internal pain pump. Was being seen for Botox administration. Appeared uncomfortable with irritability, jitteriness. Complained of nausea and a diffuse headache, appeared uncomfortable
- Placed NADA protocol in each ear. Symptoms resolved within 5 minutes, Botox administered to a very calm and headache free patient

Back Pain

Acute

Occupational Injury – Back Strain History

- 44 yr. old male helping to transport a 300lb. anesthetized pig back to pen when pig suddenly awoke and in the struggle that ensued the employee injured his back.
- Presents in acute pain, unable to find a position of comfort, unable to stand or sit, lying on side without relief.
- Healthy, alert male: No meds, NKA, PMH: NC
- Pain: 10/10 P: 96 BP: 156/84

Back Strain - Treatment

- NP and PT unable to exam employee in current state of pain – restless in fetal position
- Needed points BFA plus muscle relaxation, sacral and lumbar spine in only one ear – encouraged to deep breathe – cold pack to back

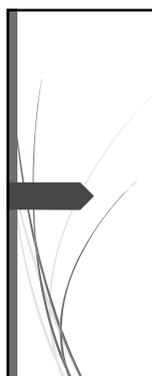
Back Strain - Treatment

- In less than 5 minutes, suddenly pulled himself to the side of the bed, stood up still bending slightly forward and said (smiling) 'you're a witch' his pain had gone to 5/10 with increased mobility and ability to withstand further evaluation
P: 76 BP: 132/74
- Was able to treat with NSAIDs and Physical therapy with Auriculotherapy for added pain management. On light duty returned to full duty in 2 weeks.

Words of Wisdom

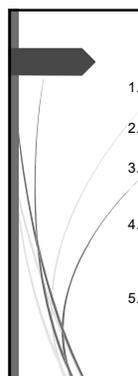
" Anyone who is trained and licensed to give injections or do sutures could learn to use a few simple acupuncture protocols in a matter of weeks, and could relieve an enormous amount of suffering." ¹⁸

'Acupuncture is like noodles': community based acupuncture concept



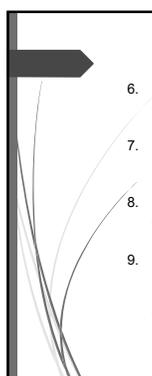
**Karen Williams,
DNP, FNP-BC, AQH**

KDWHealthManagement@gmail.com



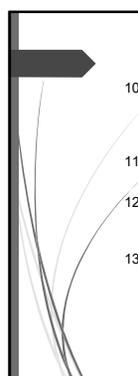
References

1. Helms J. (2007)*Acupuncture Energetics A Clinical Approach for Physicians*. New York: Thieme publishers, (pp. 3-17).
2. Reston J. (1991) Now about my operation in Piking. *The New York Times*, 1,6.
3. Diamond EG (1971). Acupuncture Anesthesia: western medicine and Chinese traditional medicine. *Journal of the American Medical Association*, 218,1558-1563.
4. Chen JYP. (1972)Acupuncture In Medicine and Public Health in the People's Republic of China. Edited by J.R. Quinn. *U.S. Dept. of Health, Education and Welfare: National Institutes of Health*, John S. Fogarty International Center, 65-90.
5. Goertz CM, Niemtow R, Burns SM, Fritts MJ, Crawford CC, Jonas WB. (2006)Auricular acupuncture in the treatment of acute pain syndromes: A pilot study. *Mil Med* 10, 1010-4.



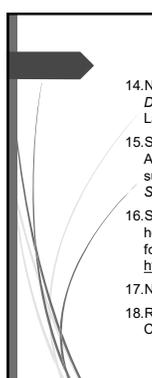
References

6. Yeh CH, et al. (2014)Efficacy of Auricular Therapy for Pain Management: A Systematic Review and Meta- Analysis. *Evidence-Based Complimentary and Alternative Medicine*,1-14.
7. Jonas WB, et al. (2016)A Randomized Exploratory Study to evaluate Two Acupuncture Methods for the treatment of Headaches Associated with traumatic Brain Injury. *Medical Acupuncture*, 28,113-130.
8. Garner B.K., Hopkinson S.G., Ketz A.K., Landis C.A., & Trego LL. *Auricular acupuncture for chronic pain and insomnia: A randomized clinical trial* Med Acupunct. 2018 30(5): 262-272.
9. Vickers, A. J., Cronin, A. M., Maschino, A. C., Lewith, G., MacPherson, H., Foster, N. E., . . . Acupuncture Trialists' Collaboration. (2012). Acupuncture for chronic pain: Individual patient data meta-analysis. *Archives of Internal Medicine*, 172(19), 1444-1453. doi:10.1001/archintermed.2012.3654.



References

10. Coeytaux, R. R., & Befus, D. (2016). Role of acupuncture in the treatment or prevention of migraine, tension-type headache, or chronic headache disorders. *Headache: The Journal of Head and Face Pain*, 56(7), 1238-1240. doi:10.1111/head.12857.
11. Oleson T. (2003)*Auriculotherapy Manual: Chinese and Western Systems of Ear Acupuncture*, 3rd edition. New York: Churchill Livingstone, 2-19.
12. Oleson T, Kroening R, & Bresler D. (1980) An experimental evaluation of auricular diagnosis: the somatotpic mapping of the musculoskeletal pain at ear acupuncture points. *Pain*,8,217-229
13. Koffman, R. L., & Helms J. M. (2013). Acupuncture and PTSD: 'Come for the needles, stay for the therapy'. *Psychiatric Annals*, 43(5), 236. doi:10.3928/00485713-20130503-09.



References

14. National Acupuncture Detoxification Association. (2011)*Acupuncture Detoxification Specialist Training Resource Manual*. 4th ed. Wyoming: Laramie.
15. Stuyt E., &Voyles C. (2016) The National Acupuncture Detoxification Association protocol, auricular acupuncture to support patients with substance abuse and behavioral health disorders: current perspectives. *Substance Abuse and Rehabilitation*. 7, 169-180.
16. Stuyt E., Voyles C., & Bursac S. (2018) NADA protocol for behavioral health. Putting tools in the hands of behavioral health providers: The case for auricular detoxification specialists. *Medicines*, 5(1), 20. Retrieved from <https://doi.org/10.3390/medicines5010020>
17. National Acupuncture Detoxification Association: <https://acudetox.com/>
18. Rohleder L, Et Al. (2009)*Acupuncture is like noodles*. Oregon: Working Class Acupuncture, 122.