

**Review Article**

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Treatment of 102 Cases of Lumbar Intervertebral Disc Herniation with Acupuncture of Lumbar Jiaji and Cluster Needling of the Buttocks

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The author in recent years by acupuncture jiaji and Cluster Needling of the buttocks to treat 102 cases of lumbar disc prolapse, using acupuncture waist clip ridge and hip clumps of beneficiary hole and tail poor bone hole attachment of six meridians, once per day, clinical cure rate 86.3%; The effective rate is 97%; The improvement rate is 100%; This method is simple, easy to learn, good curative effect, worthy of clinical popularization.

Keywords: Acupuncture; Jiaji; Cluster Needling of the buttocks; Treatment; Lumbar disc disease

Introduction

With the rapid development of social progress and science and technology, the widespread popularization of artificial intelligence, and the continuous change of people's work nature and lifestyle, the incidence of lumbardischerniation (LDH) has also changed. The former heavy manual workers, people engaged in bending work and obese people are prone to suffer from lumbardischerniation. Nowadays, the incidence of lumbar disc herniation among office workers is increasing year by year, and tends to be younger, which seriously affects people's work and life. The author reviewed and analyzed the treatment of lumbar intervertebral disc herniation with acupuncture of lumbar Jiaji and Cluster Needling of the buttocks Remarkable curative effect has been achieved. The report is as follows:

Clinical Data

102 patients were from the neck and back pain rehabilitation Clinic of the Department of Rehabilitation Medicine, Dongning First People's Hospital from October 2019 to October 2021. There were 67 males and 35 females, aged 15-76 years, with an average age of (38.15 ± 12.14) . The course of disease ranges from 2 days to 30 years. All patients had pain in the waist to varying degrees, including 69 patients with numbness and pain in one lower limb and 17 patients with numbness and pain in both lower limbs; MRI examination of lumbar spine showed that there were only 18 cases of L3/L4 disc herniation, 38 cases of L4/L5 disc herniation, 23 cases of L5/S1 disc herniation, and 23 cases of 2 or more intervertebral discs herniation. According to the medical history, clinical mani-

festations and imaging examination, it was definitely diagnosed as lumbar disc herniation. All patients were excluded from having cardiovascular, cerebrovascular, liver, kidney and hematopoietic systems. Patients with serious diseases such as spinal tuberculosis, tumor, compression fracture, and needle fainting.

Treatment

Acupoint selection

Select the points and take the Jiaji points from L1 to L5 on both sides; The hip cluster needling connects the Yaoyan acupoint and Weiqionggu acupoint, and it is divided into five equal parts, a total of six points. The numbness and pain of one side of the lower limbs are taken from one side, and the numbness and pain of both sides of the lower limbs are taken from both sides.

Operation method

The patient was in prone position, and the acupoint local skin was routinely disinfected with 75% ethanol. At Jiaji point, 0.30mm×40mm Huatuo stainless steel millimeter needle was selected. The acupuncture direction was perpendicular to the skin of the acupoint, and the needle was stabbed about 10-20mm straight. Then select one group of acupoints on the left and right respectively to connect the wire of Huatuo SDZ II electroacupuncture instrument; After 75% ethanol routine disinfection of local skin of buttock cluster acupuncture points, 0.35mm×75mm Huato-brand stainless steel millimeter needle was selected, with the needle pointing towards the same side of the greater trochanter, with the filiform needle at an angle of 30°-45° to the skin of the acupoint, and the oblique puncture is about 40-50mm; Then select 1-2 groups of acupoints or one group on the left and one group on the right to connect the lead of Huatuo SDZ II electroacupuncture instrument; All patients chose to choose the density wave, 2-100Hz, adjust the intensity to the extent that the patient can tolerate, and acupuncture once a day.

Results

Efficacy assessment method

It was formulated according to the Standard of Diagnosis and Curative Effect of Diseases in Traditional Chinese Medicine [1]. Clinical cure: low back pain disappeared completely, accompanied by symptoms and signs disappeared or disappeared basically; Significant effect: the degree of low back pain was significantly relieved, and the accompanying symptoms and signs disappeared or improved significantly; Improvement: the degree of low back pain was reduced, and the symptoms and signs were relieved. Ineffective: no improvement in symptoms and signs before and after treatment.

Treatment effect

In this group, 88 patients reached the standard of clinical cure, 11 patients reached the standard of significant effect, 3 patients were afraid of acupuncture pain and did not complete the treatment, but the waist and leg pain was still relieved, reaching the improvement standard; The clinical cure rate was 86.3%. The

effective rate is 97%; The improvement rate is 100%; The shortest healing time was 3 days, the longest 108 days, and the average healing time was 16.38±15.87 days.

Experience

With the development of economy and the prolongation of human life span, the aging of the population is accelerating all over the world, and the degenerative diseases of the lumbar spine in the elderly have increased significantly. The number of elderly patients with lumbar disc herniation should increase significantly. However, it is found that the younger age of lumbar disc herniation is particularly obvious in clinical practice, especially since the epidemic in 2020, the number of adolescent and middle-aged patients with lumbar disc herniation has increased significantly, especially preferring office white-collar workers. Considering that due to the change of people's lifestyle, from outdoors to indoors, the sitting and standing work time is too long, especially in the round back or hunchback sitting position with poor posture, the waist and back muscles and hip muscles are stretched for a long time, resulting in adaptive stretching, weakness and deactivation [2], however the iliac and lumbar muscles and abdominal muscles have adaptive shortening, resulting in imbalance of the muscles and fascia in front and back of the spine, when standing upright or walking, The compensatory tension of the back muscle fascia increases, and the muscle reflex tension and spasm lead to the increase of the pressure load of the lumbar spine and the degeneration and protrusion of the intervertebral disc. This is consistent with the reported lumbar disc pressure and muscle tension [3].

Our group were treated with acupuncture Lumbar Jiaji and Cluster Needling of the buttocks, the treatment of Lumbar intervertebral disc protrusion, the erector spinae and gluteus muscles were mainly stimulated, and the inactive muscles were activated. Meanwhile, Lumbar Jiaji, Yaoyan Acupoint and Weiqionggu Acupoint bone points all belong to The Extraordinary Point, which have the effect of treating low back pain and leg pain. Lumbar Jiaji is located at the place where Du vein and foot sun bladder are overlapped by air extension, and the two veins are connected and communicated. Therefore, acupuncture can regulate ventilation, regulate body balance, and help to improve Lumbar spine function and relieve pain in LDH patients. The commonly used points for treating LDH [4, 5] have the medial cutaneous branches of the 1-5th lumbar nerve and the accompanying arteries and veins on the superficial layer, the muscular branches of the 1-5th posterior lumbar nerve on the deep layer, and the branches or branches of the dorsal branches of the intercostal posterior arteries and veins; Yaoyan point has the effect of strengthening the waist and kidney, relieving and treating lumbago and leg pain, sciatica, etc. Yaoyan Acupoint [6] location: under the spinous process of the fourth lumbar spine, in the lumbar dorsal fascia, latissimus dorsi muscle and iliocostal muscle in a 3.5-inch depression with lateral opening; The superficial layer is mainly covered with the gluteal epithelial nerve and the cutaneous branch of the posterior branch of the fourth lumbar nerve. The deep layer is mainly distributed with muscular branches of the posterior branch of the fourth lumbar nerve and branches or branches of the

fourth lumbar artery and vein; the muscle branch of the fourth lumbar nerve posterior branch and the branch or genus branch of the fourth lumbar artery and vein. Weiqionggu Acupoint is located in the sacral region, 1 inch above the tip of the coccyx and 1 inch beside the opening, with the posterior branch of the fourth and fifth sacral nerves and the tail nerve. Treating lumbago, sacral neuralgia, constipation, hemorrhoids and anal muscle spasm. The attachment between Yaoyen acupoint and Weiqionggu acupoint, Bisect five equal points, there are four points in the middle, subcutaneous superficial distribution of lumbar 5, 1-3 sacral nerve posterior branch or branch. All the acupuncture points in this group are adjacent to the posterior branch of the lumbar nerve or the posterior branch of the sacral nerve. The significant effect of this group may be related to the stimulation of the posterior branch of the lumbar nerve or the posterior branch of the sacral nerve. However, further research is needed to determine the relevant mechanism, which is consistent with some literatures [7, 8]. In addition, EA can effectively stimulate the proliferation and differentiation activity of muscle satellite cells (MSCs), up-regulate the expression of myogenic differentiation factor (MyoD), promote muscle repair, reduce the proportion of adipocytes, enhance contractile function, and ultimately improve the biomechanics of spine [9]. At the same time, it can inhibit cell apoptosis, reduce nerve damage and inhibit muscular atrophy [10]. Jiaji point is not only consistent with the distribution of the ganglion segment, but also located on the multifidus muscle. Electroacupuncture at Jiaji point can not only improve the pain and dysfunction of LDH patients, but also affect the multifidus muscle, thus rebuilding the spinal biomechanics [11].

To sum up, acupuncture at lumbar spine clip and buttock cluster needling has a significant effect on the treatment of lumbar disc herniation. Since the shortest cure time is 3 days and the longest cure time is 108 days, the control and other related studies cannot be completed, so further systematic research is still needed. However, one more clinical treatment takes effect, which is worthy of clinical promotion.

Acknowledgment

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Conflict of Interest

No conflict of interest.

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