

Oral Diseases

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According to TCM, the oral cavity is an integral part of the human body. The state of Qi and Blood is manifested through the oral cavity. Thus by examining the oral cavity, a physician is able to judge the functioning of internal organs and channels in terms of Excess/Insufficiency or Heat/Cold. On the other hand, one can treat diseases involving oral cavity by needling points far away on the limbs. The following is a review of recent advances in acupuncture treatment of oral diseases.

1. ORAL ULCERS

Dong Zi-an [1] treated recurrent oral ulcers by needling Zusanli (ST 36), Sanyinjiao (SP 6), and Yongquan (KI 1) on both sides, applying reinforcing manipulation to the first points and mild reinforcement and reduction to the last. The needles were retained for 30 minutes. Seven daily treatments made up a course. All were cured within two courses and no relapse was found. Sun Chun-ying [2] treated seven cases of stubborn oral ulcer by needling Hegu (LI 4), Dicang (ST 4), and Chengjiang (RN 24), by applying rotating reducing manipulation to all the points. The needles were retained for 20-30 minutes after arrival of Qi. All patients were cured. Li Ai-zhen [3] treated 110 cases of recurrent oral ulcer by needling two groups of points: (1) Fengchi (GB 20), Xiaguan (ST 7), Hegu, Zusanli, Taichong (LR 3); (2) Baihui (DU 20), Yifeng (SJ 17), Jiache (ST 6), Taixi (KI 3), Xiangjian (LR 2). For all the points, both sides were punctured in alternation. Reinforcing manipulation was adopted for Baihui, Zusanli, and Taixi; mild reinforcement and reduction, for Xiaguan, Fengchi, Jiache and Yifeng; reducing manipulation, for Hegu, Taichong, and Xiangjian. The needles were retained for 30 minutes and manipulation was practiced once at the middle. Ten daily treatments made up a course. After a month of treatment, cure was observed in 62 cases, improvement in 40 cases and no effect in one. This reflects a total effective rate of 96%. Compared with the blank control, a significant difference was noted. Ni Ke-qian [4] reported a case of recurrent oral ulcer, and when she needled Neiguan, Sanyinjiao, and Yongquan and three daily treatments led to a cure.

Yang Tie-chi [5] punctured sites around the ulcer in the shape of a plum-blossom with a three-edged needle deep to the muscle layer. Disappearance of the yellowish exudate was taken as the criterion for cure. Of the 41 cases treated, 23 cases were cured with two daily treatments, 20 cases with three treatments, 6 cases with four treatments and no effect was found in 2 cases, for a total effective rate of 95%. To treat stubborn oral ulcer, He Ming-bo [6] applied moxibustion to both Laogong (PC 8) for about 15 minutes until the skin turned red. Treatment was carried out twice a day and 7 daily treatments made up a course. All were cured with two courses. Yang Xiao-pei [7] applied pills made of 3 g of Evodia Fruit (*Evodia rutaecarpa*) mixed with vinegar to both Yongquan for 24 hours each time. Of the 110 cases treated, cure was noted in 103 cases, improvement in 4, no effect (no improvement after 5 treatments) in 3. Significant difference was found between the treatment group and the control group.

2. TOOTHACHE

2.1. Periodontitis

Liu Zhong et al. [10] used a three-edged needle to tap Lidui (ST 45) and Erjian (LI 2) to let out about 1 milliliter of blood, and then punctured Taixi, retaining the needle for 30 minutes during which time manipulation was practiced every 5 minutes. Treatment was carried out every other day and 7 treatments made up a course. Of the 98 cases treated, 63 cases were cured, 29 cases showed improvement, and no effect in 6. Fu Yun-ying [11] treated chronic periodontitis by blood-letting on the diseased gum using a three-edged needle and punctured Sibai (ST 2), Xiaguan, and Jiache. Of the 121 cases who received 6 treatments, a total effective rate of 95.8% was achieved. Wang Chun-yi [13] searched for pink points along both lines 1~2 cun lateral to midline of the back between C₇ and T₅. Usually 2~4 points were found each time and the center of each point was tapped to bleeding and followed by cupping. Of the 21 cases treated, all showed marked improvement in 3 minutes and were cured after 1~2 treatments. Ni Ke-qian [4] treated acute periodontitis by blood-letting at Ear Apex and needling Tragus Apex and Tooth in the ear. Reducing manipulation was practiced and the needle was retained for 30 minutes. Wang Yan-ying [5] punctured Ear Apex and Tooth on the diseased side with a three-edged needle to let out 3~5 drops of blood once a day and punctured both sides in severe cases. Of the 10 cases treated, 3 were cured after one treatment, 4 after two treatments, and 3 after three treatments. Liang Shui-yuan et al. [8] treated 40 cases of acute periodontitis by needling Shenmen and Occiput in the ear on the diseased side. A five fen long filiform needle was inserted horizontally into the point while rotating it clockwise and was retained for 20~30 minutes. The needle might also be embedded in the point. Immediate termination of pain was achieved in 24 cases, termination after 5 minutes in 4 cases, the pain was reduced in 10, and no effect was observed in 2 cases.

2.2. Pulpitis

Liu Cheng [6] punctured Hegu and Quchi (LI11) using reducing manipulation and retained the needles for 30 minutes with manipulation performed every 5 minutes in the meantime. He also tapped Ashi Point to bleeding with a three-edged needle. The patients were cured with only one treatment. As was with the case of periodontitis described in Sec. 2.1., Wang Chun-yi [13] again punctured up to the point of bleeding the pink points he found 1~2 cun lateral to the midline of the back between C₇ and T₅ and practiced cupping to the bleeding points. Of the 3 cases treated this way, all showed marked improvement within 3 minutes and were cured after 1~2 treatments. Similarly Liang Chui-yuan [8] needled Shenmen and Occiput in the ear on the diseased side, retaining the needle for 20~30

minutes. Of the 41 cases treated, immediate termination of pain was achieved in 33 cases, termination after 5 minutes in 2 cases, and pain was reduced in 6 cases.

2.3. Pericoronitis of the wisdom tooth

Liu Cheng^[6] needled Feishu (BL 13), Hegu on the diseased side, Quchi, and Jiache through to Dicang, using reducing manipulation and retaining the needles for 30 minutes with manipulation practiced every 5 minutes in the meantime. He also punctured Ashi Point until it bled. The patients were cured with one treatment. Liang Shui-yuan et al. punctured Shenmen and Occiput in the ear, retaining the needle for 20~30 minutes. Of the 31 cases treated, immediate termination of pain was achieved in 25 cases, termination after 5 minutes in 1 case and the pain was lessened in 5 cases.

2.4. Apicitis (apical periodontitis, periapical abscess)

Liu Cheng [6] needled Hegu on the diseased side and Quchi, using reducing manipulation and retaining the needles for 30 minutes with manipulation practiced every 5 minutes in the meantime. He also punctured Ashi Point until it bled. The patients were cured with one treatment. As for periapical abscess, He punctured Hegu on the diseased side and Neiting (ST 44), using reducing manipulation and retaining the needles for 30 minutes with manipulation practiced every 5 minutes in the meantime. Finally, a three-edged needle was used to puncture the abscess (Ashi Point) for drainage. Again, the patients were cured with one treatment. Wang Chun-yi [13] punctured, up to the point of bleeding, the pink points he found 1~2 cun lateral to the midline of the back between C7 and T5 and practiced cupping to the bleeding points. Of the 6 cases treated, all showed marked improvement within 3 minutes and were cured after 1~2 treatments.

2.5. Pain incident to tooth extraction

Before tooth extraction, Ni Ke-qian [4] punctured Jiache (in the case of extraction of lower tooth) or Xiaguan (in the case of extraction of upper tooth) with strong stimulation and left the needle in the point. During the procedure, Shenmen and Tooth were needled. The patient reported only negligible pain. Liang Shui-yuan et al. [8] treated pain resulting from extraction procedure by needling Occiput in the ear, retaining the needle for 20~30 minutes. Of the 18 cases treated, immediate termination of pain was achieved in 11 cases, termination after 5 minutes in 1 case, the pain was lessened in 5 cases, and no effect was observed in 1 case.

3. ACUTE AND CHRONIC TONSILLITIS, PHARYNGITIS AND STOMATITIS

Liu Zhong [11] treated acute and chronic tonsillitis and pharyngitis by needling Chize (LU 5) retaining the needle for 50 minutes. In the first 30 minutes, the needle was manipulated using the Cool-producing Method once every ten minutes while, in the next 20 minutes, reducing manipulation by rotating was practiced once every five minutes. Three daily treatments made up the entire course. Of the 168 cases treated, 155 were cured, 13 showed improvements. Ninety-eight cases were cured after one treatment; two 46 were cured after two treatments; 11 were cured after three treatments.

4. INJURY OF MASSETER MUSCLE

Ni Ke-xi needled Ashi Point (the injured muscle) and Tianrong (SI 17), applying moxa stick to

the needle at the latter point and retaining needles at both points for 30 minutes. Marked improvement was noted after 2 daily treatments and cure was effected after 5 treatments. For spasm of the masseter, Xiaguan, and Jiache on the diseased side and Shousanli (LI 10) on both sides were punctured. Moxibustion was added to the first two points and mild reinforcement and reduction was applied to the last point. The needles were retained for 30 minutes. Cure was achieved after 6 treatments.

COMMENTS

(1) Acupuncture has proved to be effective for oral ulcers, especially for stubborn ones, helping to shorten the course and alleviate the pain. In most cases, points are selected from the Yangming Channels, complemented with Taixi and Xingjian, points from Liver and Kidney Channels. Other effective approaches include: tapping of local ulcers, needling of Laogong, and external application of Evodia paste to Yongquan.

(2) For toothaches of various causes, acupuncture has proven to be a good pain-killer. Again, points from the Yangming Channels are selected in most cases, using strong stimulation and reducing manipulation. Other approaches include: puncture until bleeding occurs at pink spots found at the back, and puncture at Shenmen and Occiput in the ear.

(3) Despite the general belief in effects of acupuncture on oral diseases, no control groups were set up in the studies reported, so the conclusions drawn are not as convincing. In addition, lack of uniformity in the criteria for evaluation of clinical effects affects the comparison among the reports.

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