INTRODUCTION

The pain shows some somatic components that distinguish by means of sensation carried by a big affectionate component. That feeling, in the routine one, is associated mainly the past experiences and in the momentary affectionate state of the patient. Believing that the pain is always subjective, all of the symptoms that the patient describes as such should be led in consideration.

Second to International Association for the Study of Pain (IASP) the pain is defined like an unpleasant sensorial and emotional experience associated with a real or potential tissue mischief, or described in the injury terms. The occurrence of pain varies according to constitutional aspects of the individual, physiopathological and psychological characteristics physical, emotional preparation and pharmacological interventions. (GOZZANI, 2003; TEIXEIRA & VALVERDE, 2003).

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The analgesia provided by the acupuncture has been enough utilized (TSIBULIAK et al, 1995; LEGUANG et al, 1996; KOTANI et al, 2001; OLESON, 2002; GILBERTSON et al, 2003; CHU et al, 2003), showing itself adequate, free of side effects (KOTANI et al, 2001), beyond be well accepted for the patients. Therefore, the objective of this work was verify the answer of the intervention of the MTC in the handling of cervicalgia of a ballet dancer, 52 years old, attended by Nurses in training for acupuncture care.

PATIENT AND APPROACHES

The clinical services during the period of training students in acupuncture and electroacupuncture specialization occurred in a therapeutic background of an educational institution of health professionals in the city of Natal (RN). The patients sought this kind of service knowing that would be being evaluated and treated by the students and by an instructor.

During the period of therapeutic approach different complaints one with many kinds of complaints. Among all complaints referred during the consultations, we describe in this article the considerations about the chronic pain in cervical region of a ballet dancer, 52 years age, as well her energy diagnose, the therapeutic chosen and subsequent her treatment conclusion by elimination of the referred pain after her experience with the acupuncture treatment.

After the initial treatment we request to the patient a permission to relate his clinical history, diagnosis, treatment and the therapy results to the scientific community, maintaining his anonymity and giving him all guaranteeing to make a free choice as abandonment of the treatment or not publication of her health case. The patient signed a Term of Free and Cleared Consent approving the disclosure of the facts previously referred.

The visual analog scale (VAS) was choose as measurement in this study because is a sensible, valid, extremely simple instrument and easy for evaluate the patient pain. This instrument is comprised of a line of 10 cm, in that the extremity to the left one corresponds to the absence of pain and, to the right, to the possible most intense pain. The patient designates the localities, in that line, that finds adequate for his pain, recording it in the rank of pain in that moment.

THE CASE STUDY

The patient show complaint of burning pain and twinge radiating to the region occipital, passing for the nape, scalpula and shoulders having this problem initiated around 4 years ago. He said that the painkillers and anti-inflammatory did not supply more effect, being necessary in her routine the use of bonds cervical around 2 times weekly, interpolating to each 15 days. The countenance of the individual showed expression of discomfort and the even found being used the cervical necklace, having referred value 9.0 for the countenance of the individual showed expression of discomfort and the even found being used the cervical necklace, having referred value 9.0 for the pain in the moment of this consults based in the VAS.

The approach of the initial complaint occurred as routine, by means of a meticuluous anamnesis including of the childhood diseases, past diseases, health family history, occupation, use of medications, physical exam, anthropometrical, aspect of the of, nose, tongue, throat, voice, skin, alimentation habits, hydration level, digestion, elimination, sexuality, habits of life, climatic preferences, main characteristic of the personality, biotype, the hands movements and behavior during the consultation willing to understand emotions appeared in the discussion while she answered the inquiries and described the sensations that came up. The main characteristics reaped revealed that the patient was a person with easy emotional alteration and accesses of rage, critical of social standards, alcohol dependence, nocturnal habits of work and fun.

Faced with to the first evaluation, we perceive that the patient was of constituent element wood, nature Yang, presenting expression of discomfort and the even found being used the cervical necklace, having referred value 9.0 for the countenance of the individual showed expression of discomfort and the even found being used the cervical necklace, having referred value 9.0 for the pain in the moment of this consults based in the VAS.

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digitorium muscle, GB21 (Jianjing), in the equidistant point between the Dazhui (DM14) and the acromion of the shoulder, 1 tsun above the point Tianliao (SJ15); GB34 (Yinglingquan), 1 tsun under the knee, in the lower and previous depression of the head of the fibula, in the fascia of the metatarsus; LR3 (Taichong), between the first and the second one metatarsus, behind the articulations metastarsus-falangial; BL17 (Geshu), 1.5 tsun in the central line, in the level of the lower border of the spinal trial of the vertebra (T7); B40 (Weizong), in the center of the popliteal fossae, in the wrinkled popliteal; BL43 (Pohu), 3 tsun, lateral of the central line (Du-Mai), in the vertical line in the middle between the points Weizhong (BL40) and the heel, 8 tsun under the point Weizhong (BL40); BL60 (Kunlun), between the tendon of Aquiles and the border of the malleolous lateral of the ankle, at the same level to the point more high of the lateral malleolus; DM9 (Zhiyang), in the central line of the column; between the seventh one and spinous process of the eighth thoracic vertebra; DM14 (Dahzui), in the first thoracic vertebra; DM20 (Bahu) in the center-vertical line of the head, 7 tsun above the subsequent margin of the hair. All of the points aimed at stabilize the energy disorder deduced by means of the history of life of the patient.

The technical of insertion chosen was the tonification because was one clinical case of a chronic process, starting for the points located in the neck going direct with the purpose of send energy stream from the lower members to the cephalic region, considering that the main focus of the complaint was the cervical region. Still considering the fact of the patient is of the male sex and for so much the insertion of the needles gave initially in left side, interest to each pair of points inserted, respecting the techniques of anti-sepsias with alcohol to 70% previuosly to the drilling of the derma.

In the end of each session we left needles of 1mm (steril and disposable) in specific points of the ear to make the treatment prolonged during the week until the near meeting, where the commitment of the patient was to occasionally promote delicately stimulus in the needled points during the days, maintaining hygiene in the localities.

The auricuals points utilized during all the treatment involvted regions regarding liver, cervical, Shen men, anxiety and Yang of the liver, repeating the insertion of needles in the same localises to each 15 days and alternating with others to each week, choosing an different ear to each session.

One regarding for us to boost the therapeutic was interpole the sessions in equal order (second, Wednesday and Friday session) to electroacupuntura during 10 minutes by means of placement of electrodes "alligator" in the needles 0,25mm x 30mm inserted in the following points:

GB21 (Jianjing), BL17 (Geshu), BL43 (Pohu), BL40 (Weizong), BL57 (Chengshan), BL60 (Kunlun), K6 (Zhaohai). It was avoided to cross the electric bundle through the spine. From this moment the intensity of the stimulus were increased gradually until the sensation of tingling by the individual went perceptible and bearable. The device used to promote the electric discharges had a battery of 9volts as spring of energy, procausing waves of sedation and tonification concomitant under frequency chosen of 10 to 80hertz.

RESULTS

After the first session the patient felt a "general well being" and important relief of the cervical pains. He marked 5.0 as value in the scale of pain VAS in that moment. A prominent fact was noticeable, the patient relaxed and fallen sleep during the session. In the following session, the patient related an improvement of the sleep without the use of the cervical necklace.

To each subsequent acupuncture session the patient showed satisfaction and serenity to walk. After 6 episodes of therapy the uncomplant sensation was eliminated, marking a value 0.0 in the scale of pain VAS. In this way he finished his treatment totally recovered of the main complaint made by him in the beginner. He was oriented to maintain 2 returns spaced out to each 15 days and 2 to each 30 days, with this schedule we could evaluate the energy-functional answer of the therapy in his body. However the patient just returned after 2 months to assure that he was not more feeling the same pain that leaded him to seek the treatment.

ARGUMENT

Considering the pain as a complex problem, and focusing the approach to the dysfunctions as hermia of disk, low back pain, neck pain and injury for repeated movements, characteristics of chronic symptoms, the efficacy of the acupuncture can be boosted in those situations through the use of techniques like: electroacupuncture, that is substantiates in the emission of electric bundles of galvanic current with intensity of 200 microamperes and alternated shackle with electric prompting frequency from 01 to 10 cycles per second with the purpose of regular the imbalance homeostatic; and moxabustion, by means of application of heat of the Artemisia herb or coal with the aim to energize the meridian affected (IMAMURA, 1996; INADA, 2006).

With the intention of associate auxiliary conducts to the therapy, is still important mention the existence of the auriculotherapy as complement in the therapy of acupuncture. The technique acquired scientific endorsement through the first publication in the world, in 1958 (acupuncture of the ear) going to promote analgesia and diagnoses by means of stimulus of specific points in the ear for obtain psychosomatic homeostasis regulating the energy inside the meridians (DALMAS, 2005), ). It is worth detach that in the assembly of inherent actions to the handling of the acupuncture, it does necessary combine points for satisfy the specific needs of each individual. Following that reasoning, the success of the technical is based in the diagnosis more near to the original energy dysfunction of the patient, therefore of this made decisions will be taking as regards the localities of application, needs of tonification, dispersion and/or harmonization, as well like the use of moxa, cup, bleeding and/or electroacupuncture (ROSS, 2003).

The biggest difficulty found by the researchers in developing treatment with acupuncture consists of the impossibility to establish adequate criteria that bear studies inside the acceptable standards in the present time, however, several studies show the advantages of the acupuncture in what concerns the decrease consumption of painkillers (ERNST & PITTLER, 1998; PELIMON, 2000; GUPTA et al, 2000; BIELLA et al, 2001).

The mechanism of the acupuncture action in the analgesia is frequently questioned; studies were developed in this sense. One explanation would be that the intramuscular penetration with needles and the classical or electric manipulation prompt a local muscular contraction. These micro contraction are capable of expand for the adjacent muscular fibers contractured. This reduces the mechanical effect of traction produced by those muscular fibers contractured in the sensitive structures of pain including intramuscular nerves bloood vessels and arterries (CHU, 2002). The gate theory says that the stimulation of coarse fibers, A, drive stimuli to the posterior horn of the marrow, and then by antidromic conduction inhibits the conduction of noxic stimuli.

The literature show evidences that the opioidal properties are involved in the analgesic mechanism of the acupuncture. Gao & He (1996), relate that the density of receptors ( ) in mice submitted to the acupuncture, increased in particular areas linked with the nociception: nucleus caudate, nucleus accumbens, tonsil, periaqueductal gray substance, interpeduncular nucleus, great nucleus of the rafe, dorsal horn of the marathon, cinguless cortex, septal area, pre-optical area, upper central nucleus, cunicullus upper and geniculate medial bocy. Still regarding the participation of properties opioidal, Han et al (1999) stood out that the endogenous endorphins is involved in the analgesia produced by the electroacupuncture of decrease frequency (2Hz), but not with the high frequency (100Hz). Second Lee et al (2003) the colecistokinin enable activity antagonist about the morphinics neurotransmitters concluding that analgesic effect of the acupuncture is straitly related with the expression of receivers of colecistokinin-A.
CONCLUSION

Faced with the results, the handling for cervicalgia proposed in that study respected the methodological premises of the Chinese Traditional Medicine and the analgesic effect in the cervicalgia achieved by the patient. The aid of therapies as the electroacupuncture and the auriculotherapy were important interventions in the obtaining of the success in the therapy. The results obtained bear evidences of that the properties opioidal were involved in the analgesic mechanism of the acupuncture as described by Gao & He (1996). Still regarding the participation of properties opioidal, to endogenous endorphins is involved in the analgesia produced by the electroacupuncture of decrease frequency (2Hz), but not with the high frequency (100Hz), corroborating with Han et al (1999).

It is fundamental stand out that the scientific knowledge was essential part for foment the reasoning of the aching dysfunction of the cervical muscular chain when it comes to the original organic cause. However the obtaining of a precisely diagnosis and consequent elimination of the pain symptoms was intimate linked to our capacity while therapists in act by means of perception sharpened in the subjective information naturally involved in the psyche and in the emotional inherent to the individual.

In this way we perceive the essential association to the use of the Chinese Traditional Medicine, the capacity of holistic perception and the humanization of the Nurses as regards the origin bio-psycho-emotional of the problem presented by the client for the choice of the actions developed.

REFERENCES


PAINFUL DISFUNCTION OF CERVICAL MUSCULAR CHAIN OF DANCER TREATED BY NURSES BY MEANS OF ACUPUNCTURE

ABSTRACT

Under the holistic perspective of Traditional Chinese Medicine (TCM), we believe that the anxiety, fear, sadness, anger and/or pain case psychosomatics imbalance in humans being responsible for symptoms of discomfort causing the decrease in quality of life. Acupuncture is a treatment of the TCM, accessible and with the response time minimum for obtaining or cure of symptoms, especially without the use of medications. In this sense, therapy used takes into account habits of life, poles Yin and Yang, strength of life, constituent elements of each person, personal and family history. The anamnæses collected aims to diagnose patterns of disharmony as deficiency, excess, stagnant, cold, heat, internal and external. The purpose of the survey was to check the response of the TCM intervention in the treatment of neck pain of a dancer of 52 years old attended by nurses during a stage of training in acupuncture. We diagnosed as the original question Qi stagnation and advancement Yang of the liver taking wood as a trainer element of the patient. We chose key points for obtaining relief from pain and balance the energy flow in patients to know: EX-HN3, LI4, TH5, GB21, GB34, GB41, LR3, BL17, BL40, BL57, BL60, BL62, LR6, VB21, VB34, VB41, VB57, VB60, VB62, VB66, VB9, VG14, VG20. The meetings took place once a week, applying needles and electro acupuncture in points in the posterior anatomical position, in pairs sessions. After 6 episodes of treatment, the painful discomfort and use of cervical collar were eliminated. Thus, we can see the effectiveness of the treatment of neck pain by intervention of TCM considering the bio-psycho-emotional context of the patient for the selection of acupuncture’s points.

Keywords: neck pain, acupuncture analgesia, nursing

DISFUNCIÓN DOLOREUSA DE LA CADENA MILSUCULAR CERVICAL DE UN DANSEUR TRATADA POR MEDIANTE ACUPUNTURA

RÉSUMÉ


Nous avons donc constaté l’efficacité du traitement de cervicalgie par l’intervention de la MTC en mettant en valeur le contexte bio-psycho-emotional du patient par la sélection des points d’acuponcture. Mots-clés: cervicalgie, analgésie par acuponcture, infirmier

DISFUNCIÓN DOLOROSA DE LA CADENA MUSCULAR CERVICAL TRATADA POR EL ENFERMEROS POR ACUPUNTURA

RESUMEN

En virtud de la perspectiva holística de la Medicina Tradicional China (MTC), creemos que los sentimientos ansiedad, miedo, tristeza, ira y dolor causan desequilibrios psychosomáticos en los seres humanos siendo responsables por síntomas de malestar que producen la disminución en la calidad de vida. La acupuntura es un tratamiento de la MTC, accesible y con un tiempo mínimo para poder obtener el alivio o la curación, especialmente sin el uso de medicamentos de la medicina occidental. Para tanto, el uso terapéutico tiene en cuenta: estilo de vida, polos Yin y Yang, energía vital, constitución de cada persona, historia personal y familiar. Las historias clínicas recogidas tienen por meta diagnosticar los patrones de discordia como disfunción, exceso, estancamiento, frío, calor, internos y externos. El objetivo del estudio fue comprobar la respuesta de la MTC en el tratamiento del dolor de cuello de un bailarín de 52 años atendido por los enfermeros durante una etapa de la formación en la acupuntura. Después de la anamnesis, diagnosticamos la causa original del estancamiento de Qi y aumento del Yang de hígado considerando la madera como elemento formador del paciente. Los puntos clave para el equilibrio del flujo de energía en paciente a saber: EX-CC3, IG4, TR5, VB21, VB34, VB41, H3, V17, V40, V43, V57, V60, V62, R6, VG9, VG14, VG20. Las reuniones se realizaron una vez a la semana, intercalando electroacupuntura en acupuntos de posición anatómica posterior, a cada dos sesiones. Después de 6 sesiones de tratamiento conseguimos eliminar los dolores y el uso de collarín cervical. Así pues, podemos ver la eficacia del tratamiento del dolor de cuello por la intervención de la MTC teniendo en cuenta el contexto bio-psico-emocional del paciente para la selección de puntos de la acupuntura. Palabras-clave: dolor de cuello, analgesia por acupuntura, enfermería

DISFUNCIÓN DOLOROSA DE CADEA MUSCULAR CERVICAL DE BAILARINO TRATADA POR ENFERMEIROS MEDIANTE ACUPUNTURA

RESUMO

Sob a ótica holística da Medicina Tradicional Chinesa (MTC), entendemos que o ansiedade, medo, tristeza, raiva e/ou dor ocasionam desarmonias psychosomáticas no ser humano e são responsáveis por sintomas de desconforto causadores do declínio na qualidade de vida. A acupuntura é um tratamento da MTC, acessível e com tempo mínimo para obtenção do alívio ou cura de sintomas, principalmente sem o uso de medicações allopáticas da medicina ocidental. Nesse sentido, a terapêutica utilizada leva em consideração a existência de vida, os dois pólos Yin e Yang, a energia vital, os elementos constitutivos da pessoa, seus antecedentes pessoais e familiares. A anamnese concerne o diagnostico do degrau de desequilíbrio da pessoa, sendo excesso, estagnação, frío, calor, interno e externo. Diante do exposto, o objetivo do estudo é verificar a resposta da intervenção de acupuntura da MTC no tratamento de cervicalgia de um bailarino de 52 anos atendido por enfermeiros durante um estágio de formação em acupuntura. Após anamnense, diagnosticamos como causa original a estase de Qi e ascensão do Yang do fígado tendo madeira como elemento formador do paciente. Escolhemos pontos essenciais para obtenção do alívio das dores e equilibrar o fluxo energético do paciente, a saber: EX-CP3, IG4, TA5, VB21, VB34, VB41, F3, B17, B40, B43, B57, B60, B62, R6, VG9, VG14, VG20. Os encontros ocorreram uma vez por semana, onde intercalávamos electroacupuntura, nos acupontos da posição anatómica posterior, nas sessões pares. Após 6 episódios de tratamento, conseguimos eliminar o incômodo doloroso e o uso de collarín cervical. Da forma, podemos constatar a eficácia do tratamento de cervicalgia pela intervenção da MTC considerando o contexto bio-psico-emocional do paciente para a seleção dos acupontos.

Palavras-chave: cervicalgia, analgesia por acupuntura, enfermagem.