



Scalp Acupuncture

Scalp acupuncture is based on TCM theories of Zang Fu, meridians and collaterals, and, in modern medicine, the projection of functional locations of the cerebral cortex on the scalp. – CAM

INDICATIONS:

- Brain diseases (wind stroke, hemiplegia, numbness of the four extremities, aphasia, cortical polyuria, dizziness and vertigo, tinnitus, chorea, epilepsy, cerebral palsy, infantile mental retardation, Parkinsonism, pseudobulbar paralysis, etc.
- Headache, hair loss, spinal paraplegia, hypertension, psychosis, insomnia, eye diseases, nose diseases, peri-arthritis of the shoulder, lumbosacral pain and various other kinds of pain

PROCEDURE:

- Best to perform the procedure while the patient is lying down to prevent fainting
- Disinfect the local area
- Insert a filiform needle (**recommended:** 26-28 gauge and 2.5-3cm in length) horizontally at an angle of 15-30 degrees into the subcutaneous level to the subgaleal level then to the proper depth generally 3cm along the scalp line
- Use the thumb of the left hand to steady the needle with little pressure while using the index finger and thumb of the right hand to rotate the needle quickly with a frequency of 200 twirls/min (2-3 rotations forward, 2-3 rotations backward) for 2-3 minutes (never lift and thrust), (or twirl for 3-4 minutes and leave in place for 5-10 and then twirl again, repeat 2-3 times and then remove needles)
- Retain needles for 15-30 minutes or over 2 hours if necessary
- Patient may perform some movements under the guidance of the doctor for therapeutic effect
- Do not manipulate the needles once inserted
- When withdrawing the needle lift slowly to the subcutaneous level first and then take it out quickly. Cover the hole with a sterilized dry cotton ball to stop any bleeding
- **Common reaction:** hot sensation on the limbs opposite side of the needling site. Sensation can be felt all over the body or a single joint or muscle. Patient may also feel numbness and a tightening sensation, cold or pain which disappears as needling continues. This response is a good sign and the patient will have good results. In some cases, treatment is effective without these sensations

PRECAUTIONS:

- Always leave about 0.5cm of the needle body exposed
- Avoid accidental contact with the inserted needle
- If there is discomfort in the local region, lift the needle a little
- Increase monitoring if using long term retention in patients with serious cardio-cerebral vascular disease to prevent accidents
- Never apply strong needle stimulation for patients who are nervous, famished or who have overeaten
- When removing needles double check to see if a needle has accidentally been forgot. The hair can hide the needles

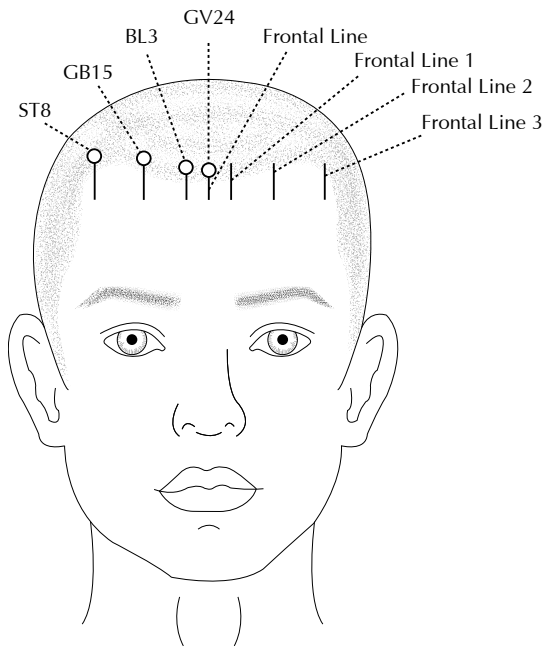
CONTRAINDICATIONS:

Never use scalp acupuncture in infants whose fontanels are not closed, patients who suffer from open injury of the cranial bone, those with serious infections, ulcerations or scars on the head or those with serious heart disease, diabetes, anemia, acute inflammation or heart failure.

If you are treating a patient in a coma due to cerebrovascular accident or very high blood pressure, wait until the blood pressure is controlled and the symptoms have stabilized.

Scalp Lines:

Scalp lines standardized by World Federation of Acupuncture and Moxibustion Societies in May 2013.



Frontal Midline

LOCATION: In the center of the forehead, 0.5 cun below and within the hairline, 1.0 cun in length, along the Governor Vessel, puncturing 1.0 cun downward from Shenting (GV 24).

INDICATIONS: Headache, hysterical laughter or crying, insomnia, forgetfulness, dream-disturbed sleep, manic-depressive disorder, nasal disease, etc.

Frontal line 1 (formerly: thoracic area)

LOCATION: On the forehead, directly above the inner canthus, 0.5 cun below and within the hairline, 1.0 cun in length, along the Bladder Meridian of Foot-Taiyang, puncturing 1.0 CLH1 downward from Meichong (BL3).

INDICATIONS: Coronary heart disease, angina pectoris, bronchial asthma, bronchitis, insomnia, etc.

Frontal line 2 (formerly: stomach area/liver and gall bladder area)

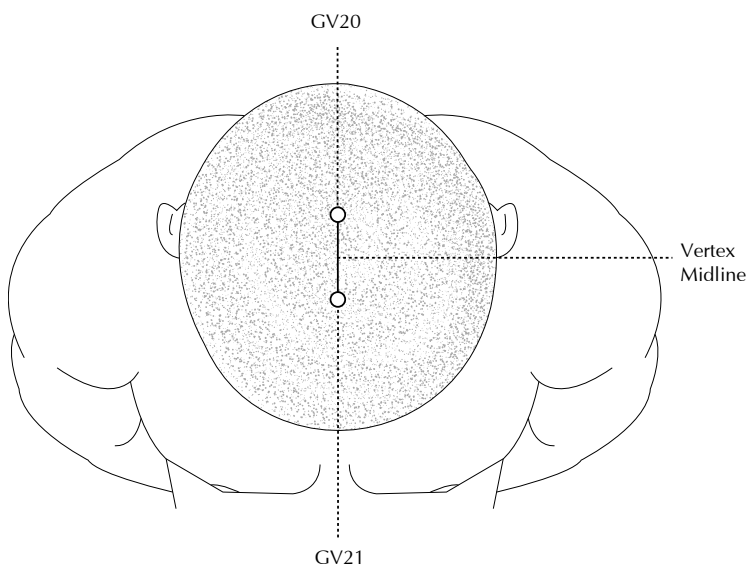
LOCATION: On the forehead, lateral to the Frontal line, above the pupil, 0.5 cun below and within the hairline, 1.0 cun in length, along the Gall Bladder Meridian of Foot-Shaoyang, puncturing 1.0 cun downward from Toulinqi (GB 15).

INDICATIONS: Acute and chronic gastritis, gastric duodenal ulcer, liver and gall bladder diseases, etc.

Frontal line 3: (formerly: reproductive area)

LOCATION: On the forehead, lateral to the Frontal Line 2, 0.75 cun medial to Touwei (ST8), 0.5 cun below and within the hairline, 1.0 cun in length, between the Gallbladder Meridian of Foot-Shaoyang and the Bladder Meridian of Foot-Taiyang.

INDICATIONS: Functional uterine bleeding, impotence, spermatorrhea, uterine prolapse, frequent and urgent urination, etc.



Vertex Midline

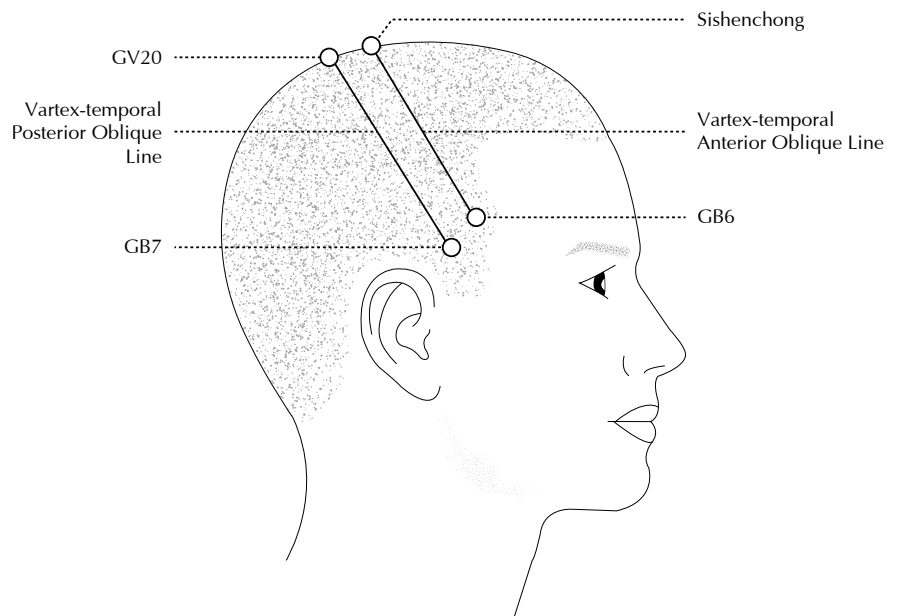
LOCATION: On the vertex, along the Governor Vessel, puncturing from 1.5 cun anterior to Baihui (GV 20) to Qianding (GV 21).

INDICATIONS: Lumbar, low back and foot diseases, such as paralysis, numbness and pain, cortical polynria, pediatric enuresis, prolapse of the rectum, gastropnoxis, uterine prolapse, high blood pressure, headache in the vertex region, etc.

Vertex-temporal anterior oblique line (formerly: motor line)

LOCATION: On the lateral side of the head, along the line from the front point of Sishenchong (EX-HN1) to Xuanli (GB 6), passing through the Bladder Meridian of Foot-Taiyang and the Gall Bladder Meridian of Foot-Shaoyang.

INDICATIONS: Cerebral motor impairment of the limbs of the opposite side. Divide the line into 5 equal parts. The upper 1/5 is indicated in the motor impairment of the lower limbs of the opposite side; the middle 2/5 indicated in the motor impairment of the upper limbs of the opposite side; and the lower 2/5 indicated in cerebral facial paralysis, motor aphasia, salivation, cerebral arteriosclerosis, etc.



Vertex-temporal posterior oblique line (formerly: sensory area)

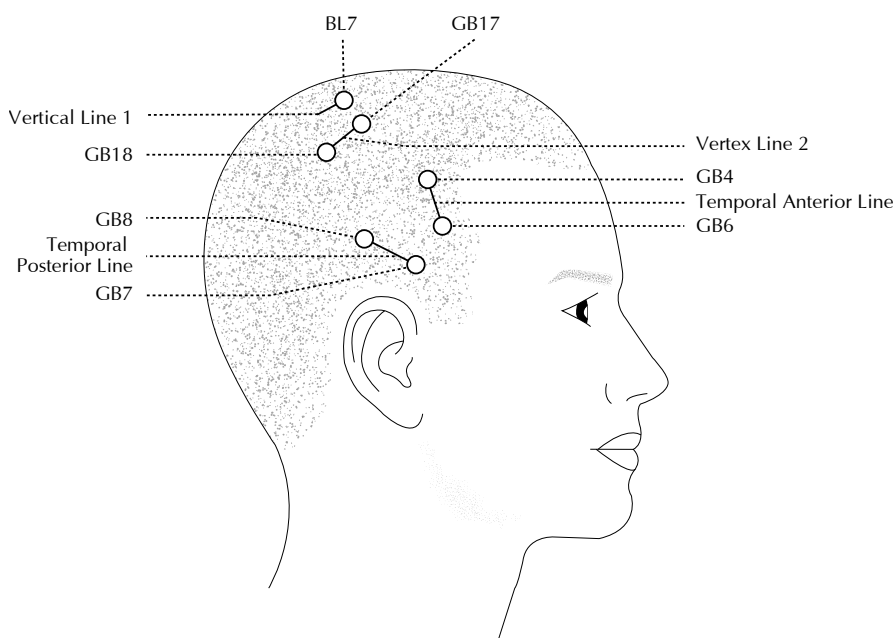
LOCATION: On the lateral side of the head, along the line from Baihui (GV20) to Qubin (GB 7), passing through the Bladder Meridian of Foot-Taiyang and the Gall Bladder Meridian of Foot-Shaoyang.

INDICATIONS: Cerebral sensory disturbance of the limbs of the opposite side. Divide the line into 5 equal parts. The upper 1/5 is indicated in the sensory disturbance of the lower limbs of the opposite side; the middle 2/5 indicated in the sensory disturbance of the upper limbs of the opposite side; and the lower 2/5 indicated in the sensory disturbance of the head and facial regions.

Vertex line 1 (formerly: leg motor and sensory)

LOCATION: On the vertex, 1.5 cun lateral and parallel to the Vertex midline, puncturing 1.5 cun backwards from Chengguang (BL 6), along the Bladder Meridian of Foot-Taiyang.

INDICATIONS: Lumbar, low back and foot diseases, such as paralysis, numbness and pain, etc.



Vertex line 2

LOCATION: On the vertex, 0.75 cun lateral to the Vertex line 1, 2.25 cun lateral to the midline, puncturing 1.5 cun backward from Zhengying (GB 17), along the Bladder Meridian of Foot-Taiyang.

INDICATIONS: Shoulder, arm and hand diseases, such as paralysis, numbness and pain, etc.

Temporal anterior line

LOCATION: On the lateral side of the temple, below the frontal angle, from Hanyan (GB 4) to Xuanli (GB 6), along the Bladder Meridian of Foot-Taiyang.

INDICATIONS: Migraines, motor aphasia, peripheral facial paralysis, oral cavity diseases, etc.

Temporal posterior line

LOCATION: On the lateral side of the temple, above the ear, from Shoaigu (GB 8) to Qubin (GB 7), along the Bladder Meridian of Foot-Taiyang.

INDICATIONS: Migraines, dizziness, declining of hearing, tinnitus, etc.

Occipital midline

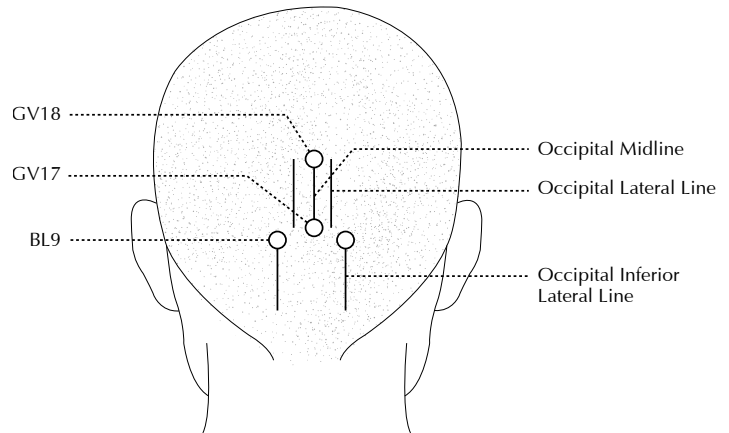
LOCATION: In the occipital region, in the middle above the external occipital protuberance, from Qiangjian (GV 18) to Naohu (GV17), along the Governor Vessel.

INDICATIONS: Eye diseases.

Occipital lateral line (formerly: vision line)

LOCATION: In the occipital region, 0.5 cun lateral to the occipital midline.

INDICATIONS: Eye diseases, such as cortical visual disturbance, cataract, myopia, redness and pain in the eyes, etc.



Occipital inferior lateral line (formerly: balance line)

LOCATION: In the occipital region, a line from Yuzhen (BL 9) vertically downward, 2 cun in length, along the Bladder Meridian of Foot-Taiyang.

INDICATIONS: Balance disorders due to cerebellar diseases, occipital headache, low back pain.