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CONTENTS

Acknowledgements	<i>Page ii</i>
List of Tables, Figures, Diagrams, Illustrations and Appendices.	<i>Page iv</i>
Abstract and Key words.	<i>Page 1</i>
Research Question.	<i>Page 1</i>
Why research this question?	<i>Page 2</i>
Why use Medical Acupuncture references?	<i>Page 2</i>
Aims of this research.	<i>Page 3</i>
Criteria for inclusion	<i>Page 5</i>
Method.	<i>Page 5</i>
How was the internet searched and which electronic resources were used?	<i>Page 7</i>
Why were E-mail questions used?	<i>Page 9</i>
How were the points analysed from a TCM viewpoint?	<i>Page 9</i>
How were further points suggested?	<i>Page 9</i>
Results and Analysis	<i>Page 10</i>
What research is available that shows the Acupuncture points used by Dental Acupuncturists?	<i>Page 10</i>
Points left out.	<i>Page 10</i>
How are Acupuncture points used in Traditional Chinese Medicine?	<i>Page 13</i>
Can the selection and use of points by dental acupuncturists be explained by TCM theory?	<i>Page 17</i>
Local Points.	<i>Page 17</i>
Distal Points.	<i>Page 23</i>
Can Chinese medical theory suggest further points for Dental purposes?	<i>Page 28</i>
Discussion.	<i>Page 33</i>
Scientific Thought.	<i>Page 33</i>
The roles of dental Acupuncturists and Professional Acupuncturists.	<i>Page 34</i>
‘Points’ of interest.	<i>Page 35</i>
Implications of this research.	<i>Page 36</i>
Could the research have been improved?	<i>Page 36</i>
What problems emerged?	<i>Page 37</i>
Could the research have been done differently?	<i>Page 38</i>
Conclusion.	<i>Page 38</i>
References.	<i>Page 40</i>
Bibliography.	<i>Page 43</i>
Glossary of terms and abbreviations.	<i>Page 47</i>

List Of Tables, Figures, Diagrams, Illustrations And Appendices

Table 1.	Acupuncture points used by Dentists trained in Medical Acupuncture.	Page 4
Table 2.	Table of websites searched for dental acupuncture papers.	Page 8
Table 3.	Points found for use in Dental Acupuncture.	Page 11
Table 4.	Sources of information for Table 3.	Page 12
List 1.	A list of Dental ailments with points used to treat them.	Page 13
Figure 1.	Showing Meridians that go to the face and head (Front).	Page 14
Figure 2.	Showing Meridians that go to the face and head (Back).	Page 14
Figure 3.	The none-Primary meridians that cross the face, neck and back of the head.	Page 16
List 2.	Points of use for Dental Acupuncture.	Page 28
Figure 4.	Ear anti-gagging point.	Page 29
Figure 5.	Points used for Xerostomia	Page 32
Appendix One	An abstract of a paper by Palle Rosted (2001).	Page 48
Appendix Two	By N. Enkling (2006). An abstract of a paper on Dental Acupuncture without points listed.	Page 49
Appendix Three	A list of Libraries searched for information.	Page 51

Abstract

A paper investigating the uses and selection of points by Dental Acupuncturists, a group consisting of Dentists trained in Western non-traditional Acupuncture. Investigation was by literature search through books, Journals, CD-ROMs and the internet. The investigation uses the Traditional Chinese Paradigm and then using this model, suggests further points for use with Dental ailments. Most of the uses of the points can be explained in Traditional Chinese Medical (TCM) terms although some were found to be used empirically. TCM theory proved to be a valid method for suggesting further points and further points are suggested within. Clinical experimentation is needed to determine good general points for use when the practitioner is not trained in traditional methods and for determining the efficacy of the points listed within. Dentists trained in Acupuncture are a good 'first stop' for Patients with Dental Acupuncture problems. Cases that are more complex should then be referred to professional Acupuncturists. The two professions should be working much closer together for the good of our mutual patients.

Key Words: Dental, Medical Acupuncture, Traditional Chinese Medicine.

Introduction

Research question

Can the selection and use of points by Dental Acupuncturists be explained by Chinese Medical theory and can Chinese Medical theory suggest further points for dental purposes?

Why research this question?

Very few Traditional Acupuncturists are able to treat Patients with Dental problems especially when the Patient needs treatment in the Dentists chair. In fact, very few traditionally trained Acupuncturists would consider attending a Patient whilst they are at a Dentist's but, Acupuncture is used for Dental reasons and Dentists trained in Medical Acupuncture usually provide this.

Traditional Acupuncture looks at the body from a traditionally Chinese viewpoint and so a Traditional Acupuncturist would consider the qualities of the Patient's Qi, Blood, Yin and Yang for example. Whereas a Medical Acupuncturist would consider points to activate nerve fibres, which send impulses to the spinal, cord and then activate the midbrain and pituitary-hypothalamus (P. Rosted 2000). They also tend to use points on an empirical basis, so they would use PE6 to help postoperative nausea (Lu D.P. Et al. 2000) with no TCM reasoning behind this. Both approaches are different but, each discipline can learn from the other, to ignore another person's ideas because they are different is arrogant and does not lead to learning.

For this reason, this dissertation uses information from both Traditional Acupuncture (TA) and Medical Acupuncture (MA). I hope that this collection of information and suggestions will then inform both traditions.

Why Use Medical Acupuncture references?

In the UK, Medical Acupuncturists have conducted the majority of work on Dental Acupuncture (DA). In other parts of the world such as parts of the USA Dentists are not allowed to carry out Acupuncture procedures without undergoing full Acupuncture

training often of three years duration, this involves undergoing the study of traditional Chinese Medicine as a Traditional Acupuncturist (CSOMA 2005). The majority of information that is freely available via the internet and Dental Journals comes from the British Dental Acupuncture Society (BDAS) (Medical Acupuncturists). Their published papers are easily obtainable, free and comprehensive. This dissemination of information only promotes the spread of Dental Acupuncture unlike the majority of research data for which payment is expected. Another problem with finding useable information is that a lot of the research into DA comes from China and of course, this is in Chinese.

Aims of this research

By the end of this research, a list of ailments in Dentistry and the Acupuncture points to treat these ailments will be presented. The effectiveness of each point will be investigated later. The aim of this research is to bring all of the current available information together in one place. Upon demonstrating the TCM basis for these points, further points will be suggested. A drawback of this approach is what is 'Dental'? The Microsoft Bookshelf (1994) says "den-tal (dèn'tl) adjective. Of, relating to, or for the teeth. So simply put 'Dental' means relating to the teeth. Why then do surveys such as 'A survey on the uses of Acupuncture by a group of UK dentists (Rosted, P. and Warnakulasuriya, S. 2005) mention such problems as neck pain, sinusitis and anxiety? If narrowed to that which pertains to the teeth then some of what Dental Acupuncturists do will be ignored, that would be a pity and would limit the usefulness of the research. Yet, if widened, where does one stop? Is dizziness included? Or eye problems? The decision was taken to stay with the conditions treated primarily by Dental Acupuncturists. The above survey was used as a basis; this was built on, as further information became known.

Acupuncture points used by Dentists trained in Medical Acupuncture

Points Used	Anxiety	Facial Pain, Headache, Neck Pain	Neuralgia	TMD	Sinusitus and Allergies	Gagging Reflex	Xerostomia	Other
<i>Local Points</i>								
LI 20	1		2		2			
St 2			3		6			
St 3	1		3		1			
St 4			1		1		4	
ST 5	1	2		9	1		4	3
ST 6		2		11			5	3
ST 7	1	1		13			5	1
ST 8								
TB 16				1				
TB 17				1				
TB 21				4				
SI 17								1
SI 18								1
SI 19	2	1	2	12	1			1
GB 8								
GB 14								
GB 20	1	17		4	1			
GB 21		16		4				
BL 2					2		1	
BL 10.5		4						
DU 14		1						
DU 20	9	5		5				2
Ren 24			1			11	1	1
EX 1 Yintang		1			6			
EX 2 Taiyang	1	3		2	1			
EX 3 Yuyao								
EX 6 Sishencong	7	2		1				1
New Point (near nose).			2		5			
<i>Distal Points</i>								
LI4	18	6	1	7	4	3		2
LI 11			1					
Liv 3	1							
<i>Other Techniques</i>								
Trigger Points		6		6				1
Ear	2				1	6		1
Scalp		1					Table 1	

Table 1. Was taken from ‘A survey on the uses of Acupuncture by a group of UK dentists’ (Rosted, P. and Warnakulasuriya, S. 2005). Mr T. Thayer, President of the BDAS, supplied information about the Extra points. This table is included as an example of the information available in the field of Dental Acupuncture at present.

For a list of the available information, please see the Reference and Bibliography section at the end of this work. The majority of the items in the reference section include reference to Acupuncture points used and these references have been used to build the information within this Dissertation, an example of which is **Appendix One**. This is an article by Palle Rosted (2001).

Appendix Two. By N. Enkling (2006). Is a paper on DA without points listed. This survey investigates the occurrence of Dental anxiety in a large German city showing that 11% of those surveyed suffered from Dental phobia. This proves that a therapy such as Acupuncture, which can reduce anxiety, is needed and that this dissertation is relevant.

Criteria for inclusion The criteria are simple if Dental Acupuncture information is present then the paper will be included either in the main body of work if point use is mentioned or in the bibliography, if it is not.

Method

The type of research design used in this dissertation is a Literature review and the methods are Literature search and questionnaire by E-mail. The main literature search was internet based but also six libraries were searched for relevant information. See **Appendix Three** (Thank you to the staff at all of these Libraries for their help and patience).

Research papers searched for information on point use and ailments treated were collated and condensed so i.e. If information on the use of LI4 for anaesthesia has been found four

times then this has been recorded, the fact that it has been found four times gives more weight to the use of that point. This is a systematic literature review because of the following;

- a) State the objectives of the review.
- b) Outline eligibility criteria for inclusion of primary research studies in the review.
- c) Identify all the relevant primary research studies.
- d) Assess the quality of these primary research studies.
- e) Obtain the necessary data from these studies.
- f) Assess whether it is sensible to combine the results from the various studies.
- g) Analyse the data and draw appropriate conclusions.
- h) Present the review in a structured report.

(The above information came from; Somerset R&D Support Unit, Taunton and Somerset NHS trusts. Helpsheet 13).

The only part not done is, d) the reason why this has not been done is that the quality and methodology of the research was not of such great importance and much of the research written is fundamentally flawed. For instance the use of 'sham' needling; what is the difference between using a hollow tool designed to look like a needle and manipulating the point as in Tuina? The sham needle has an effect as the Acupuncture point activated just by pressing upon it. This review is aimed at finding points mentioned for use in Dental Acupuncture, so review techniques such as Meta Analysis are irrelevant. This research is *secondary research* because it reviews other papers.

The above methods gathered information from all over the world, so the internet was of vast importance. During the initial planning **Table 1** was identified. It is based on an already completed questionnaire. As there are 256 members of the BDAS, a large sample,

a questionnaire to Dentists was not necessary. Experimental research can be done later so, a Literature review was the best design incorporating **Table 1** and other Dental Acupuncture papers from the Internet.

This research is rather unique as it uses two paradigms, Western Medical Acupuncture and Traditional Chinese Acupuncture.

How was the internet searched and which electronic resources were used?

The Internet was searched using search engines such as *Google* and *Google Scholar*, other search engines were compared but found not to be so efficient. When searching the words “Dental Acupuncture” were used in the ‘search’ field. Other words such as “Acupuncture for Dentists” yielded very few results. *Google* provided a list of websites where Dental Acupuncture was found, these sites then had to be searched individually. The College ‘Athens’ account was also used; this revealed further websites. **Table 2** is a list of websites searched for papers. Once a research paper was found it was analysed to see if it was relevant by reading the abstract, then a search was conducted for a full paper, this was not usually the case without paying large sums to copy the article. The abstract was read to see if it listed points used and why. The Listed points were built into **Table 3** the research papers that the points came from were referenced in the References section and a shortened version of the papers’ reference was included in **Table 4**, “sources of information for table 3”. If the abstract was found not to mention points used, it was usually referenced in the Bibliography so that it may help the readers of this Dissertation with further research. Some full text articles were found on the Internet and others were received by E Mail from interested parties, their References and Bibliographies were used as ‘leads’ to see if they lead to further articles, which happened. All avenues were explored in the pursuit of Dental Acupuncture articles.

TABLE OF WEBSITES SEARCHED FOR DENTAL ACUPUNCTURE PAPERS

Acupuncture.com	http://www.acupuncture.com
Acupuncture in Medicine	http://www.acupunctureinmedicine.org.uk
Annals of Internal Medicine	http://annals.org
Anaesthesia & Analgesia	http://www.anesthesia-analgesia.org
American Academy of Medical Acupuncture	http://www.medicalacupuncture.org
Atypon-Link	http://www.atypon-link.com
BBC	http://www.bbc.co.uk
Bibliographies in Medicine	http://www.healthy.net
Biomed Central	http://www.biomedcentral.com
Blackwell-Synergy	http://www.blackwell-synergy.com
British Acupuncture Council	http://www.acupuncture.org.uk
British Dental Journal	http://www.nature.com
British Medical Journals Online	http://ebm.bmjournals.com
Cambridge Journals Online	http://journals.cambridge.org
Complementary Medical Association	http://www.the-cma.org.uk
Cochrane Library Gateway	http://www.nelh.nhs.uk/cochrane.asp
Datastarweb	http://www.datastarweb.com
EBSCOhost databases	http://web9.epnet.com
EBSCOhost EJS	http://ejournals.ebsco.com
Index Copernicus	http://www.cisi.org
IngentaConnect	http://www.ingentaconnect.com
internurse.com	http://www.internurse.com
JSTOR	http://www.jstor.org
Kingston E Book Library	http://www.kingston.ebib.com
Medical Acupuncture	http://www.medicalacupuncture.org
National electronic Library for Health	http://www.nelh.nhs.uk
Ovid Online	http://gateway.uk.ovid.com
Oxford Reference Online	http://www.oxfordreference.com
ProQuest	http://proquest.umi.com
PubMed Central	http://www.pubmedcentral.nih.gov
SAGE Publications	http://www.sagepub.com
Science Direct	http://www.sciencedirect.com
Springerlink	http://www.springerlink.com
SwetsWise	http://www.swetswise.com
Taylor & Francis Journals	http://journalsonline.tandf.co.uk
Web of Knowledge	http://portal.isiknowledge.com
Wiley Interscience	http://www3.interscience.wiley.com
ZETOC-BL Electronic Table of Contents	http://zetoc.mimas.ac.uk

Table. 2

Why were E- mail questions used?

Some interested parties (mentioned in the ‘acknowledgements’ section) sent helpful information, an example of this is Mr Mark Bovey who was helping to write a book about Electro-Acupuncture, he sent me some information on Dental Acupuncture from the book. In another example, some information in **Table 1** was unclear, Mr Tom Thayer, President of the BDAS was E-mailed, and he was very helpful. Dr. Warren M. Morganstein was E-mailed to obtain permission to use information from an article that he had written on Xerostomia.

How were the points analysed from a TCM viewpoint?

Table 3 ‘Points found for use in Dental Acupuncture’ had to be explained in TCM terms and so a number of books and a CD-ROM were used to find the uses of the points. These were as follows; Chaitow, L. (1976), CICM (1993), Deadman, P. Al-Khafaji, M. (2000), Kaptchuck, T. J. (1983), Maciocia, G. (1989), Ross, J. (1995), Xinnong, C. (1987), Zhaofa, Z. (1994). (Please see the Reference section for full titles). The relevant uses to Dental Acupuncture were then listed point by point.

How were further points suggested?

Initially **list 1** was used to provide a list of Ailments to research for further points, eventually this was expanded as more ailments that are relevant came to light but, this list is by no means comprehensive due to word count restraints. The sources listed above were extensively cross-referenced for treatment information, this information, together with that from **List 1** and clinical experiences from the author made up **List 2**.

Results and Analysis

What research is available that shows the Acupuncture points used by Dental Acupuncturists?

The following, **Table 3** shows points found for use in Dental Acupuncture, this comes from the papers found on the Internet, including the information in **Table 1**. Most of the information found comes from Medical Acupuncture and little from Traditional Acupuncture.

Points left out

Some points have not been included such as the Bladder points or some DU points on the back; it is not very practical to use points such as BL15 for neck pain (White. P. 2004) in the Dentist's couch. They can be used in Clinic but these points have been left out of the table so that **Table 3** can be used by Dentists trained in Acupuncture as a reference table. TCM Acupuncturists will already be aware of the use of these points in broad terms, for instance using BL15/44 for anxiety.

The following table (**Table 3**) "Points found for use in Dental Acupuncture" has had its font size reduced to Times New Roman size 10. This is so that the whole table could fit into one page and still be within the 3cm margin limit.

<u>Points found for use in Dental Acupuncture</u>	Anaesthesia	Anxiety	Facial, head and neck pain	Facial paralysis	Gagging reflex	Lips	Lower Jaw	Migraines and Headaches	Neuralgia	Post operative pain	TMD	Toothache	Sinusitis and allergies	Xerostomia	Upper Jaw
LI 18														1	
LI 20		1		1			1		2		1		2		1
ST 2				1		1	1		3		1		6		1
ST 3		1					1		3				1	1	
ST 4				1					1				1	4	
ST 5		1	2				1				9		1	5	1
ST 6			2	1			1			1	12	1		6	
ST 7		1	1				1			1	14	1		6	1
ST 8				1											
TB 16											1				
TB 17				1			1			1	1			1	1
TB 21											4				
TB 23											1				
SI 17														1	
SI 18											1				1
SI 19		2	1						2		12		1		
GB 8															
GB 14				1											
GB 20		1	18	1				1			5		1		
GB 21			16								4				
BL 1				1											
BL 2													2	1	
BL 10			2					1			1				
BL 10.5			4												
DU 14			2									1			
DU 20		9	9								7			1	
DU 26															1
Ren 24					12		1		1					1	
EX 1 Yintang			1										6		
EX 2 Taiyang		1	3								2		1		1
EX 3 Yuyao															
EX 6 Sishencong		7	2								1				
New Point									2				5		
GB 34			2	1							1				
GB 41															1
HE 7											1				1
KID 3												1			1
KID 5															1
LI 3															1
LI 4	4	18	8		3		1	1	1	2	10	1	4	1	1
LI 11	1		1						1						1
LIV 3		1	1	1				1			1				1
PE 6			1		1	1	1					1			1
TB 5			1	1							1	1			1
TB 6				1											
SP 6															1
SI 3			1												
ST 36			2	1			1								1
ST 44						1						1			1
Trigger Points			6								6				
Ear		2			7					TABLE 3			1		

Sources of information for Table 3.

Albrecht, F. (2006),
Blom, M. et al. (1999),
Bovey, M. (2006). Personal E Mail. (With many thanks),
Chapman, C.R. et al. (1982),
Chapman, C.R. (1983),
Fiske, J. Dickinson, C. (2001),
Goddard, G. (2005),
Lee Wolfe, H. (2003),
Lin, M.T. et al. (1981),
Liu, J. et al. (1992),
Lixing, L. et al. (1999),
Lu, D. P. Et al (2000),
Ma, C.A. (2006),
Parameswaran, P.G. (ca 2006),
Rosler, A. (2003),
Rosted, P. (2001),
Rosted, P. And Warnakulasuriya, S. (2005),
Schimek. F. et al. (1982),
Sung, Y.F. (1977),
Thayer, T. (2006). Personal E Mail. (With many thanks),
White. P. (2004),
Yang, Z.L. (1995).

Table 4

The following is a list of ailments with points used to treat them this comes from **Table 3** and is intended to simplify things;

- ✚ Anaesthesia, LI4/11.
- ✚ Anxiety, DU20, GB20, LI4/20, LIV3ST3/5/7, SI19, Sishencong, Taiyang, and Ear point Shenmen.
- ✚ Facial, Head and Neck Pain, BL10, DU14/20, GB20/21/34, LI4/11, LIV3, PE6, ST5/6/7/36, SI3/19, TB5, Sishencong, Taiyang, Yintang and Trigger Points.
- ✚ Gagging Reflex, LI4, PE6, REN24, Ear Point.
- ✚ Migraines and Headache, BL10, GB20, LI4, LIV3.
- ✚ Neuralgia, LI4/11/20, REN24, SI19, ST2/3/4.
- ✚ Post Operative Pain, LI4, ST6/7, TB17.
- ✚ TMD, BL10, DU20, GB20/21/34, HE7, LI4/20, LIV3, SI18/19, ST2/5/6/7, TB5/16/17/21/23, Sishencong, Taiyang, Trigger Points.
- ✚ Toothache, KID3, LI4, PE6, ST6/7/44, TB5.
- ✚ Sinusitis and Allergies, BL2, GB20, LI4/20, SI19, ST2/3/4/5, Yintang, Taiyang, Ear Points.
- ✚ Xerostomia, BL2, DU20, GB41, HE7, KID3/5, LI3/4/11/18, LIV3, PE6, REN26, SI17, SP6, ST3/4/5/6/7/36, TB5/17.

List 1

How are Acupuncture points used in Traditional Chinese Medicine?

This in itself is a vast subject, to understand the subject the reader would have to take part in full Traditional Chinese Medicine training or at least read a good book written on the subject such as "The Foundations of Chinese medicine" by Giovanni Maciocia. It is assumed that most readers of this section have a reasonable grounding in TCM, as the word allowance for this Dissertation is not sufficient to allow full explanations. Meridian pathways are shown below.

Figures 1 and 2. Showing Meridians that go to the face and head

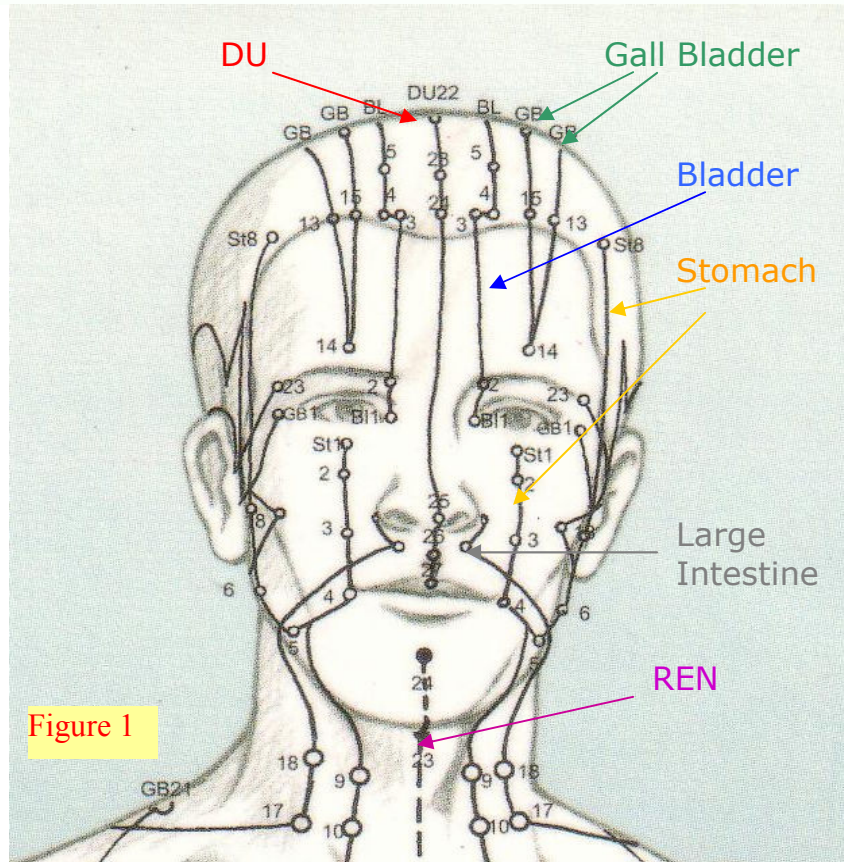


Figure 1

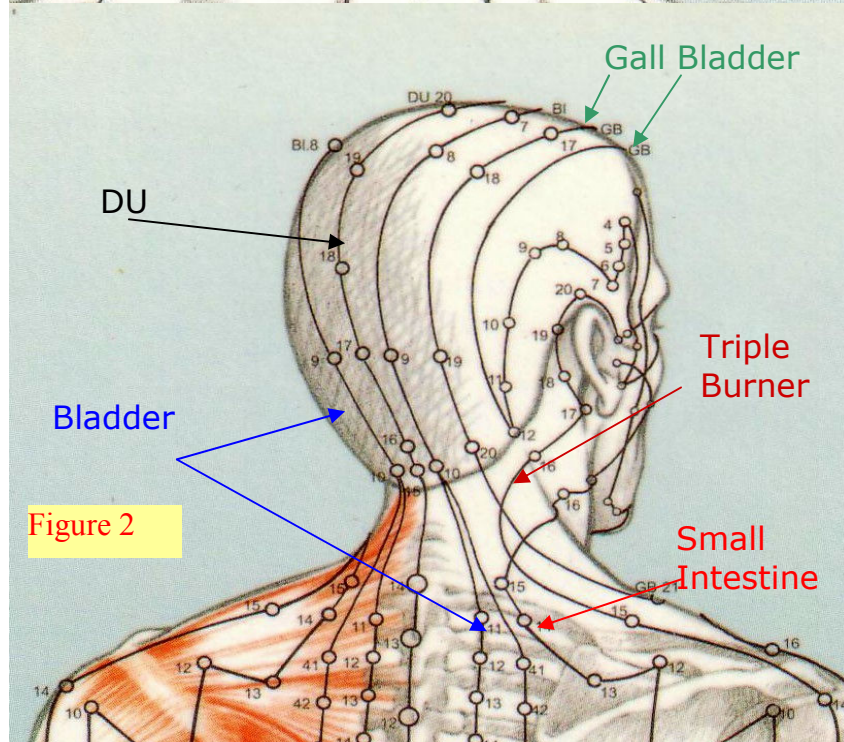


Figure 2

(Modified from a College of Integrated Chinese Medicine diagram)

As the subject of this dissertation is Dental Acupuncture, the Meridians that go to the face and neck are those of concern. From **Figures 1, 2 and 3** we can see that the Bladder, Du Mai, Gall Bladder, Large Intestine, Ren Mai, Stomach and Triple Burner Meridians go to the face. The Heart Primary Channel crosses the face, and the Heart Luo and Divergent Channels meet at the eye. The Gall Bladder Divergent channel goes roughly in a leaf pattern from ST6 to GB1 and so is very important for the cheek area. The Bladder, Du Mai, Gall Bladder, Small Intestine and Triple Burner Meridians all cross the back of the neck and head. The Liver Primary Channel also crosses the face and goes through the eyes. So to recap the following meridians cross the face, neck and back of the head; Bladder(BL), Du Mai(DU), Gall Bladder(GB), Large Intestine(LI), Liver(LIV), Pericardium(PE), Ren Mai(REN), Small Intestine(SI), Stomach(ST) and Triple Burner(TB) Primary and none-Primary meridians.. The none-Primary meridians do not have separate points of their own to activate them; points on the Primary meridians activate them. The Cutaneous regions being quite superficial in depth are activated by lightly inserted needles in points in the local area to the problem. Local needling can also take place in problem areas to move the Qi and clear stagnation, this is often done intuitively by a skilled Acupuncturist as this type of needling comes with experience.

To treat Dental problems the points below the knees and elbows could be called 'Distal Points', points on the body would be 'Medial Points' and points on the face, neck and head would be 'Local Points'. Usually Distal and Local points are used at the Dentist's due to the difficulty in reaching body points.

Figure 3. The none-Primary meridians that cross the face, neck and back of the head.

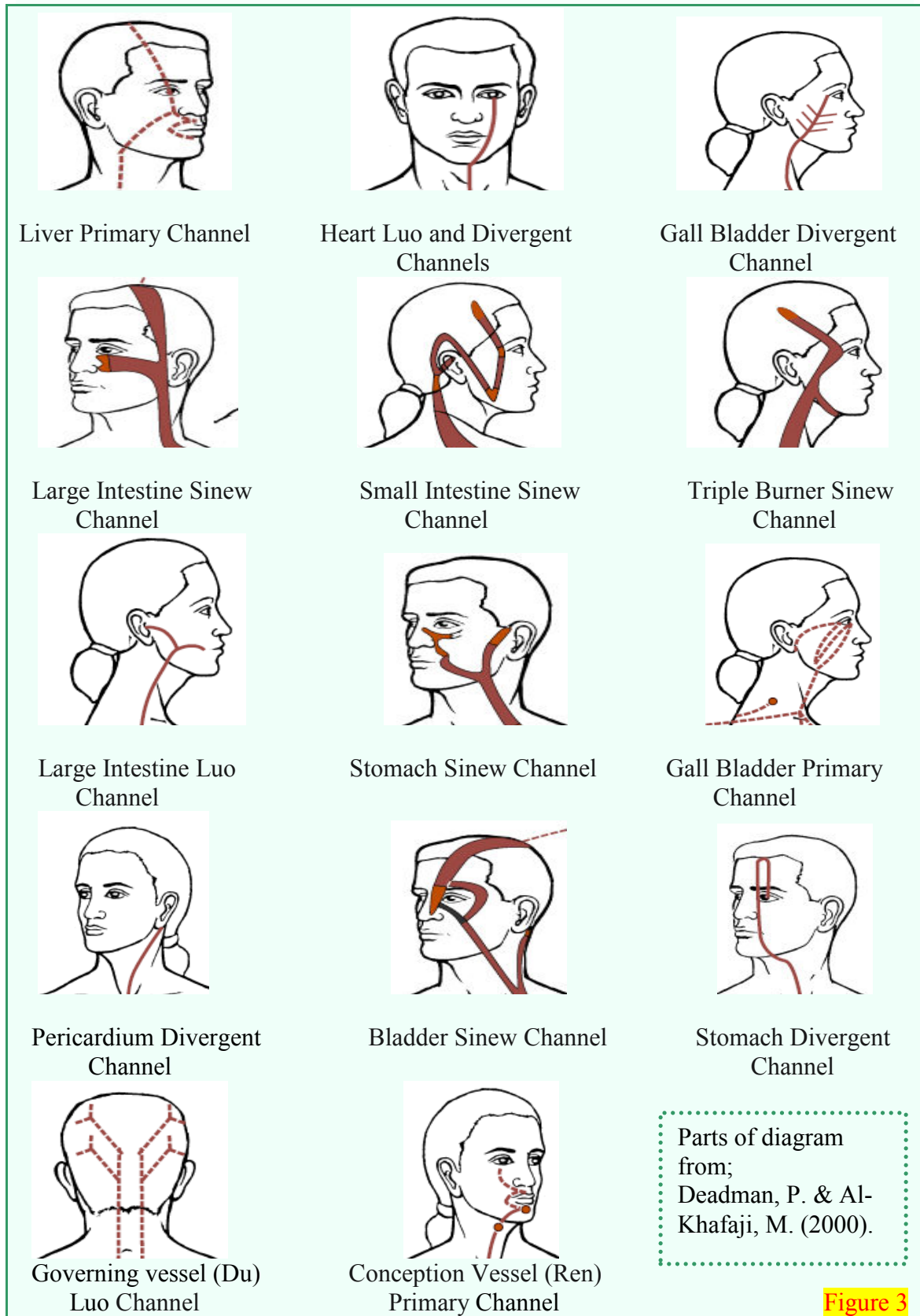


Figure 3

Can the selection and use of points by dental acupuncturists be explained by TCM theory?

Table 3 illustrates the points used by Dental Acupuncturists; they are explained below in TCM terms point-by-point starting at the top of the table with LI18. Only the Actions and indications relevant to Dental Acupuncture are noted.

Local Points

LI18 - This point Benefits the throat, relieves cough, Resolves Phlegm, Disperses masses, and is a ‘Window of the sky’ point (opens up the flow of energy between the body and head). It may influence the Thyroid due to its proximity. May help Xerostomia due to its effect on the Salivary Glands.

LI20 - A local point for the nose called “Welcome Fragrance”. This is the Exit point of the Large Intestine and joins with the Stomach meridian. Its action is to Dispel exterior Wind. As the upper path of this meridian goes around the mouth this point influences the jaw and mouth. Possibly for TMD and neuralgia. There is no indication for its use for anxiety.

ST2 - Eliminates Wind, Clears Heat, Benefits the eyes and stops lacrymation. Used mainly for eye problems but can be used for deviation of the mouth. Use local points for neuralgia. Used for sinusitis due to its ability to Eliminate Wind and Clear Heat.

ST3 - Eliminates Wind, Dissipates swelling, alleviates pain and Clears the Channel. Similar uses to ST1 and ST2 but the actions of this point extend to the nose so use in epistaxis and nasal obstruction. Use for toothache and deviation of the mouth. There is no TCM reference to use in anxiety.

- ST4** – The Meeting Point of the Stomach and Large Intestine Meridians. Expels Wind, Clears Channel and Benefits tendons and muscles and alleviates pain. Used in deviation of the mouth and aphasia, neuralgia and problems of the eye. Due to its action on the tendons and muscles, this may be a good point for TMD. Used for Xerostomia, the action of Clearing the Channel may help after damage by Radiotherapy.
- ST5** - Eliminates Wind and reduces swelling. Use for toothache of the lower jaw, also use in TMD due to its proximity to the Masseter muscle.
- ST6** - Expels Wind and Clears the Channel, Benefits the jaw and teeth. Use this point for TMD being within the Masseter muscle; also used for toothache as well as deviation of the mouth and eye.
- ST7** - Benefits the ears, jaw and teeth, alleviates pain and clears the Channel. Used frequently in facial paralysis and trigeminal neuralgia. Not listed for anxiety but may prove useful for anaesthesia. Meeting point of Stomach and Gall Bladder.
- ST8** - Another Meeting point of the Stomach and Gall Bladder its actions are; Expels Wind, Relieves pain, Brightens the eyes and Clears heat. Use for dizziness deriving from Damp or Phlegm, can also clear an invasion of Wind in the head and so use for headache, eye pain and twitching of the eyelids.
- TB16** - ‘Window of the Sky’ point. Benefits the head and sense organs, Regulates and Descends Qi. Use for sudden deafness, headache, dizziness and problems with the sense organs such as loss of the sense of smell. No TCM reference for TMD.

TB17 -Meeting point of Triple Burner and Gall Bladder. Expels Wind, Benefits the ears, Eliminates wind, Clears Heat, Activates the channel and alleviates pain. For hysterical deafness, tinnitus, toothache of the lower jaw, deviation of the eye and mouth, trigeminal neuralgia and mania. A TCM combination using this point would be; Toothache and tooth decay: TB17, ST7, ST5 and SI4. Unfortunately, there is not enough space for a full explanation. No indication for TMD but, it would be a good point to try due to its location.

TB21 -Benefits the ears and Clears heat. Use for tinnitus, deafness, earache and other ear problems, TMD and toothache.

TB23 -Expels Wind, Brightens the eyes and stops pain. Use for headache, dizziness, toothache, deviation, redness and pain of the eye. Not indicated for TMD.

SI17 -‘Window of the Sky point’ similar in action to LI18. Resolves Damp-Heat, Expels Fire-Poison, clears the Channel, Benefits the neck and throat, Disperses swelling, Descends Rebellious Qi and Benefits the ears. Use for mumps, swelling of the neck glands, including tonsils, teeth clenching, cough, asthma and tinnitus.

SI18 -Eliminates Wind and alleviates pain, Clears Heat and reduces swelling. Important local facial point for facial paralysis, tic or trigeminal neuralgia. Treats TMD due to Wind Invasion. Calms the spirit. Use for anxiety, neuralgia and TMD.

SI19 - Exit point of the meridian. Benefits the ears. Similar point to TB21 and GB2 but SI19 calms the spirit. Use for toothache, tinnitus, epilepsy and discharge from the ear. Any of these three points would help TMD.

GB8 - Meeting point of the Gall Bladder and Bladder Channels. Clears the Channel, Benefits the ears, Eliminates Wind, Benefits the head, alleviates pain, Harmonises the diaphragm and Stomach, and alleviates vomiting. (Treats alcohol intoxication!)
Use for headache, deviation of the eye, dizziness, neuralgia, tinnitus and deafness.

GB14-Meeting point of the Gall Bladder with the Yang Linking vessel and the Triple Burner, Stomach and Large Intestine channels. Subdues rising Qi and Benefits the head and eyes. An important and often forgotten point to eliminate exterior Wind. Used for facial paralysis and local one-sided headaches and for eye problems such as twitching of the eyes. Also a good point to calm the patient.

GB20- “Wind Pond” is the Meeting point of the Gall Bladder and Triple Burner Channels with the Yang Motility and Yang Linking vessels. Eliminates wind, Subdues Liver Yang, Clears Heat, Benefits the head and eyes, Clears the sense organs and brain, Activates the channel and alleviates pain. Often used for neck pain and migraines, could be used for TMD and Sinusitis and much more. A real ‘command point’ of the head.

GB21- Meeting point of the Gall Bladder, Triple Burner and Stomach channels with the Yang Linking vessel. Used to relax the tendons of the neck and for Windstroke, shoulder and neck problems. No TCM indication for TMD.

BL1 - A difficult point to needle, not for the inexperienced. Meeting point of Yin and Yang Motility vessels as well as the Bladder, Small Intestine and Stomach Channels. Expels Wind, Clears Heat and Benefits the eyes. Use to treat diseases of the eyes especially those involving Wind and Heat.

BL2 - Expels Wind, Brightens the eyes, Clears Heat, stops pain and itching, Clears the nose. Used for eye problems and for frontal headaches in the eyebrow region, also used for Rhinitis. Not known for Xerostomia in TCM.

BL10 -Point of the sea of Qi. Regulates Qi and Pacifies Wind, Benefits the head and sensory orifices, Soothes the sinews, Calms the spirit, Activates the channel and alleviates pain. A major point for occipital or vertical headache, used for stiff neck and to help memory and concentration, dizziness and inability of the legs to support the body. May be useful for TMD associated with Wind.

BL10.5-No information as to this points location. Suspect this is an ‘Ashi’ point (Tender Point) as the Bladder Channel just below BL10 meets with DU17, DU14 and DU13, therefore the Bladder and DU channels flow together at this point, along the centre of the body.

DU14- Meeting point of the Governing vessel with the six yang channels of the hand and foot, Point of the Sea of Qi. Clears Heat, Releases the Exterior, Expels Wind, Regulates Nutritive and Defensive Qi and Tonifies Yang. Used to clear Heat from the body such as inflammation and can bring clear Yang to the head to clear the Mind. Could use for toothache with inflammation, bleeding nose or stiff neck.

DU20- Known as “One Hundred Meetings” A meeting point of all the Yang Channels and point of the Sea of Marrow. Pacifies Wind, both Tonifies and Subdues yang, Raises Yang and Counters prolapse, Benefits the head and sense organs, Nourishes the sea of marrow, Benefits the brain and calms the spirit, Promotes resuscitation. For headache, dizziness, TMD, problems with the nose and eyes and for prolapse. A

TCM example of the use of this point would be a patient with a muzzy head who feels dizzy and unsteady, use this point to bring clear Yang to the head and clear the dizziness especially when combined with ST8. Not listed for Xerostomia.

DU26-The actions of this point are; Promotes Resuscitation. Restores consciousness and Benefits the lumbar spine. Used for nasal discharge with difficulty in breathing and for swelling of the face. May be useful for Xerostomia.

REN24-Expels Exterior Wind. Meeting point of the Conception Vessel with the Governing Vessel, Large Intestine and Stomach Channels. Treats hemiplegia, deviation of the mouth and eye, TMD, Wind epilepsy, stiffness of the head and nape and tetany. Empirical point to stop the gagging reflex. Possible point for Xerostomia.

Yintang - Pacifies Wind and Calms the Mind, Benefits the nose, Activates the Channel and alleviates pain. Usually used to Calm the mind and to influence the nose. A definite point for anxiety.

Taiyang - Eliminates Wind and Clears Fire. Often used for headaches in the temple and eye problems such as sore red eyes. Also use for trigeminal neuralgia and toothache, it may be used for TMD and sinusitis due to its Wind clearing action. Not listed for anxiety.

Yuyao - Clears heat, Removes obstructions from the Channel and Brightens the eyes. Used mainly to treat the eyes in diseases which result from Liver Blood Deficiency, for example 'floaters' or twitching of the eyes.

Sishencong - Calms the spirit, Pacifies wind, Benefits the eyes and ears. Used for Windstroke, epilepsy, mania-depression, insomnia, poor memory. One-sided and generalised headache, dizziness, deafness, disorders of the eyes. Could be used for stiff jaw due to Wind also palsy and neuralgia. The head is susceptible to the invasion of external Wind and this is one point to clear it.

Distal Points

GB34 -He-Sea and Earth point of the Gall Bladder channel, Hui-meeting point of Sinews. Activates the Channel and alleviates pain, Spreads Liver Qi and Benefits the lateral costal region, Clears Liver and Gall Bladder Damp-Heat, Harmonises shaoyang. Used for tightness of muscles and tendons, headaches and migraines. Used for TMD if caused by Qi Stagnation. In addition, if the patient is suffering from tight neck muscles which in turn are causing facial problems.

GB41 -Shu-Stream and Wood point of the Gall Bladder channel, Opening point of the Girdle vessel. Spreads Liver Qi, Benefits the chest, lateral costal region and breasts, Clears the head and benefits the eyes, Transforms Phlegm and dissipates nodules. In facial terms, this point is for the control of tears, headaches and toothache. Not listed for Xerostomia but is worth investigating due to the paths of the GB Primary and Divergent Channels.

HE7 - Shu-Stream, Yuan-Source and Earth point. Calms the Spirit, Regulates and Tonifies Heart Qi and Yin, Nourishes Heart Blood, Opens the Orifices, Cools Heart Fire. Use for anxiety, not listed for TMD but, may help due to the paths of the Heart Luo

and Divergent Channels. More use for Cold sores and red, sore mouth especially when accompanied by palpitations.

KID3- Shu-Stream and Source point, Earth point. Nourishes Kidney Yin and Clears Deficiency Heat, Tonifies Kidney Yang, Anchors the Qi and benefits the Lung, Strengthens the lumbar spine, Benefits Essence and Regulates the Uterus. Use to treat; deafness, tinnitus, headache and dizziness, toothache, nosebleed, sore throat, heat sensation in the mouth, phlegm in the mouth that feels like glue, due to the point's function of Tonifying Kidney Yin and Clearing Deficiency Heat. Use for an anxious patient due to empty Heat, also patients with hay fever often benefit from Kidney Tonification.

KID5-Xi-Cleft point. Indicated in **Table 3** for use in Xerostomia. As this is a Cleft point it is used more often for pain in the Kidneys or Uterus. There are better points for Xerostomia such as KID6/7.

LI3 - Shu-Stream and Wood point. Expels Wind and Heat, Clears Heat and Benefits the throat and teeth, Dispels Fullness and treats diarrhoea. Used in modern day China to treat severe or recalcitrant toothache. Use with LI4 and Electro-Acupuncture to anaesthetise the jaw.

LI4 - This point had to be on the list, it is the Source point for the LI, its actions are, Regulates the Defensive Qi and Adjusts sweating, Expels Wind and Releases the Exterior, Clears Heat, Regulates the face, eyes, nose, mouth and ears, Activates the Channel and alleviates pain. Used to treat problems of the face due to the path of the LI Luo, Divergent and Primary Channels. Often combined with LIV3 to become

“The Four Gates”, this combination treats general pain and anxiety. If you use any point for Dental Acupuncture, use this one!

LI11 - He-Sea and Earth point of the Large Intestine channel, Expels External Wind, Clears heat, Cools Blood, Resolves Damp, Regulates Ying Qi and Blood, Benefits tendons and joints. Use for; throat painful obstruction, loss of voice, toothache, redness and pain of the eyes, lacrimation, pain in the front of the ear. No record of Anaesthesia, use for neuralgia and paralysis caused by invasion of Wind. There is no TCM reason to use this point for Xerostomia.

LIV3 -Part of the “Four Gates”. Shu-Stream, Yuan-Source and Earth point of the Liver channel. Spreads Liver Qi, Subdues Liver Yang and Extinguishes Wind, Nourishes Liver Blood and Liver Yin, Clears the head and eyes, Calms the Spirit and Calms spasms. Used for Migraines, some headaches, facial spasms and Tics, sequelae of Windstroke, Blurred vision, cloudy vision, redness, swelling and pain of the eyes. Also use for dry, sore throat and “plum-stone” throat.

PE6 - Luo-Connecting point of the Pericardium channel, Unbinds the chest and Regulates Qi, Regulates the Heart and Calms the Spirit, Harmonises the Stomach and alleviates nausea and vomiting and Clears Heat. Often used to treat nausea but can also treat anxiety and restlessness as it calms the mind. May be used for toothache originating from Heat in the Stomach. No indication for Xerostomia.

TB5 - Connecting point of the triple Burner Channel. Expels Wind and Releases the Exterior, Benefits the head and ears, Clears Heat, Subdues Liver yang, Activates the channel and alleviates pain. Used for sore throat, ear infections, tinnitus, migraines,

headaches, dizziness, redness and pain of the eyes, swelling of the cheek, stiffness of the tongue, toothache, cracked lips, cold sores, nosebleeds and hemiplegia. No TCM indication for Xerostomia.

TB6 - Jing-River and Fire point of the Triple Burner. Regulates Qi and Clears Heat in the three Jiao, Expels Wind, Removes obstruction in the LI. Used to treat tinnitus, deafness, sudden loss of voice, TMD, pain of the eyes, redness, swelling and pain of the eyes, swelling and pain of the throat.

SP6 - Meeting point of the three Yin Channels of the leg. Tonifies the Spleen and Stomach, Resolves Dampness, Harmonises the Liver and Tonifies the Kidneys, Calms the Spirit, Invigorates Blood, Nourishes Yin, Activates the Channel and alleviates pain. Can be used for tinnitus, xerostomia, anxiety and as the point Harmonises the liver and Invigorates the Blood it could be used for neuralgia, postoperative pain, headache, TMD. A major point for sinusitis.

SI3 - Shu-Stream and Wood point of the Small Intestine. Benefits the occiput, neck and back, Activates the Channel and alleviates pain, Clears Wind and Heat, Calms the Spirit, Benefits the sensory orifices, Regulates the Governing vessel. In TCM this point is used mainly for neck pain. Can use for; one-sided headache, Deafness, tinnitus, superficial visual obstruction, redness and pain of the eyes, swelling of the eyes with lacrimation, nosebleed, toothache, swelling of the throat and cheek, redness, loss of voice following Windstroke. Some of this is due to the path of the Small Intestine Sinew Channel.

ST36 -He-Sea and Earth point of the Stomach channel, Point of the Sea of Nourishment.

Benefits the Stomach and Spleen, Tonifies Qi and Blood, Dispels Cold, Strengthens the Body, Brightens the eyes, regulates Yang and Wei Qi, Raises Yang Expels Wind and Damp, Resolves oedema. Known as “the greatest Tonifying point in the body”. Can treat any deficiency condition such as headache, TMD, xerostomia, dizziness, tinnitus, hemiplegia, neuralgia, sinusitis and allergies. Use after a stroke to Tonify, Clear Wind and Damp. This Channel connects to the face via the Primary, Divergent and Sinew Channels, so has direct bearing on the face.

ST44- Ying-Spring and Water Point of the Stomach Channel. As this is a Spring and Water point it is used for Clearing Heat. Its other actions are; Eliminates fullness, Regulates Qi, Calms the Spirit, Stops pain, Promotes digestion and Eliminates Wind from the face. Used for, toothache, pain of the teeth and/or eyes, pain of the face, deviation of the mouth and eye, nosebleed, sore throat, tinnitus and thirst. Also, use for red, sore, painful eyes when associated with a tongue with a thick, yellow coating.

Trigger Points- These are not often used by Traditional Acupuncturists, instead “Ashi” points are used. They are tender points and are usually local to the problem.

Ear Points- The Oesophagus and Throat points are just below “Point Zero”, use for gagging. Use Upper and Lower Jaw for toothache and extraction. Use Shenmen for Anxiety. There are many more points but they are outside the scope of this dissertation.

Can Chinese medical theory suggest further points for Dental purposes?

Further uses of the points that appear in **Table 1** are listed above. Further points are suggested below by adding to those in the list of Ailments in **List 1** (Please re-read “points left out”).

Points of use for Dental Acupuncture

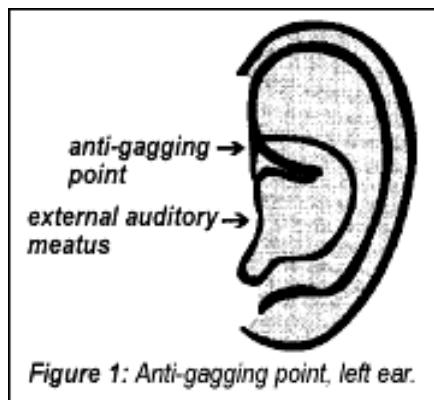
List 2.

- ✚ Anaesthesia or Analgesia, (For teeth) LI3/4/11/19/20, PE8, REN24, SI18, ST5/6/7, extra points, Renzhong, Taiyang(M-HN-9), and Zhilong, ear points Erjian (M-HN-10), Upper and Lower Jaw. (For lips) LI4, PE6, ST2/40, ear points Shenmen and Subcortex. (For Mandibular Bone) BL59, GB38, LI4, LIV3, PE6, SP4, ST40 and Anmian(M-HN-54). (For Sub-Mandible) BL59, GB38, LIV3, LU7, PE6, SP4, ST40, TB6 and ear points Neck, Subcortex and Tongue.
- ✚ Anxiety, BL2/7/9, DU17/20/24/26, GB13/20/44, HE3/5/7/8, KID1/6, LI4/20, LIV1/2/3, PE3/6/7/8, REN4/6/12/14/17/24, SI19, SP4/6, ST3/5/7/36/44/45, Sishencong(M-HN-1), Taiyang(M-HN-9), Yintang(M-HN-3) and ear point Shenmen.
- ✚ Ear Disorders, BL23, DU20, GB2/4/8/11/12/20/34/40/41/43, HE5/6, KID3/7, LI4/5, LIV2/3, LU9, PE6, REN4/6/9/12/14/17, SI3/4/5/16/17/19/40, SP6/9, ST7/36/40, TB1/2/3/5/17/19/21. Extra Anmian.

✚ Eye Disorders, BL1/2/10/62/63/67, DU20/23, GB1/14/20/37/41/43/44, HE5, KID1/3/6, LI4, LIV1/2/3/8, SI3, SP6, ST1/2/8/36/40/44/45, TB3/5/23, Erjian(M-HN-10), Qiuhou(M-HN-8), Taiyang, Yintang, Yuyao(M-HN-6).

✚ Facial Paralysis, BL2, DU14/16/20, GB14/20/21, LI3/4/10/11/15, LIV3, PE2/7, SI3/18, ST2/4/6/43/44, TB5/14/17, Sishencong, Yuyao.

✚ Gagging Reflex, LI4, PE6, REN24, ear points; Oesophagus, Throat, Anti-gagging point (see below).



From Acupuncture Today (2001).

Figure 4 (Anti Gagging point)

✚ Hay-fever (Acute), BL1, DU1/2, GB20/34LI4/11/19/20, LIV3, LU5/7, PE6, SP10, ST36, TB5, Bitong, Yintang. (Prevention) DU4, KID3, LI4/11, LIV8, LU9, REN12/17, SP6/9, ST36/40,

✚ Insomnia, BL1/62, DU19/20/24, GB12/13/15/20/40/44, HE3/5/6/7/8, KID1/2/3/6, LI11, LIV2/3/8/14, LU10, PE3/4/5/6/7/8, REN4/6/9/12/14/15/17/24, SP1/6/9, ST8/36/40/45, Anmian, Yintang, and ear Shenmen.

✚ Laryngitis, KID6, LU7, REN23, SP6, ST9, extra Pangliaquan (1.5 Cun lateral to REN23, 1.5 Cun superior to ST9).

✚ Migraines and Headache, The treatment of headaches and migraines needs a TCM diagnosis, as there are at least seventeen types of headache in TCM. Here are the points used, BL2/3/4/5/6/7/9/10/11/58/60/62/66/67, DU14/15/16/18/20/23/24, GB1/8/14/19/20/34/38/39/40/41/43/44, HE5, KID1/3/6, LI4/6/11, LIV2/3/8/14, LU7, PE6, REN4/6/10/12, SI3, SP3/4/6/9/10, ST8/9/21/34/36/40/44/45, TB5/6/10/16/17/23, Taiyang, Yintang, Yuyao, ear points, Forehead, Occiput, Shenmen, Subcortex, and Sympathetic Nerve. LIV3 is by no means the only point for headache and if the diagnoses is incorrect, LIV3 will not work.

✚ Neuralgia (General), GB20/43, LI4/11/LI20, LIV2, REN24, SI18/19, SP10, ST2/3/4/36/40, TB5/17, Taiyang, Local points are very important.

✚ Nosebleeds (Chronic), DU23, KID6, LI4/11/20, ST44,

✚ Pain, Facial, Head and Neck, (These points are mixed because some are in common, i.e. GB20 will treat head and neck) BL10/66, DU14/16/20, GB2/3/20/21/34/36/39/43, LI2/4/11/20, LIV2/3/5/6/8, LU7/10, PE6, REN6, SI3/6/10/14/15/18/19, SP3/6/9, ST3/4/5/6/7/34/36/40/42/44, TB5/10/17 and extra points; Bailao(M-HN-30), Bitong, Jiachengjiang(M-HN-18), Sishencong, Taiyang, Yintang, ear points, Cervical Vertebra and Neck.

✚ Post Operative Pain, GB34, LI4, LIV3, PE6, ST6/7, TB17.

✚ Smoking Cessation,

- i) Ear Shenmen and Lung for 20 Mins. Then Erxing, Lung, Shenmen, or Subcortex
With ear seeds.

- ii) DU26 or DU20 or Yintang, then ear seed on Shenmen.
 - iii) Extra point Tianmei (Jieyan) midway between LU7 and LI5, once per day.
 - iv) LU9, HE7 with Electro-Acupuncture (E.A.) for 20 Minutes, once per day.
 - v) E.A. on ear points Lung, Stomach, Mouth, Shenmen. Every 2 days.
 - vi) Choose from ear points, Abdomen, Internal nose, Lower jaw, Upper Jaw, Kidney, Lung, Pharynx, Shenmen, according to sensitivity. Then DU24, HE7, LI4/13, LU4/5/7, PE6, SP8, ST36/40, according to symptoms. 3x per week in first week. Can use E.A.
 - vii) BL13/14/15/17/18/20/21/23. Patient leaves with an ASP needle in ear at Shenmen. Treat once per week on second and subsequent treatments use Acupuncture more for withdrawal symptoms, swap ear point to other ear.
- ✚ TMD, BL10, DU20, GB20/21/34, HE7, LI4/20, LIV3, SI18/19, ST2/5/6/7, TB5/16/17/21/23, Sishencong, Taiyang.
- ✚ Toothache, GB2/20, KID3, LI3/4/10/19, PE6, ST6/7/44, TB1/2/5/8/21, Jiachengjiang, ear points Teeth Lower and Teeth Upper.
- ✚ Trigeminal Neuralgia, (For all), GB20, LI3/LI4, LIV3, ST5/25, TB6. (Ophthalmic division), BL1/2, GB14, LI4, TB5/23, ST2/7/8/36/44, Taiyang, Yuyao. (Maxillary division), DU26, GB1, LI4/19/20, SI8, ST2/3/7/44. (Mandibular division), GB2, REN24, ST4/5/6/7/44, Jiachengjiang. Also use ear points, Cheek, Forehead, upper Jaw, lower Jaw, Mandible, Maxilla, Shenmen, Subcortex, Sympathetic.

✚ Sinusitis and Allergies, BL2/11/12/13/62, DU2/4/12/14/23/24, GB15/20, KID3/7, LI4/11/20, LIV2, LU6/7/10, REN4/9/12/13, SI3/19, SP3, ST2/3/4/5/36/40/44/45, TB1/5, Bitong, Taiyang, Yintang.

✚ Xerostomia, BL2, DU20, GB41, HE7, KID3/5/6/7, LI3/4/11/18/19, LIV3, PE6, REN26, SI17, SP6, ST3/4/5/6/7/36, TB5/17, Or a separate protocol (see **Figure 5** below). Use ear Shenmen, Point Zero and Salivary gland 2 prime plus ‘extra point for xerostomia’ bilaterally. Points may be stimulated with Electro-Acupuncture. Developed by Dr Richard Niemtzow (www.n5ev.com).

Points For Xerostomia

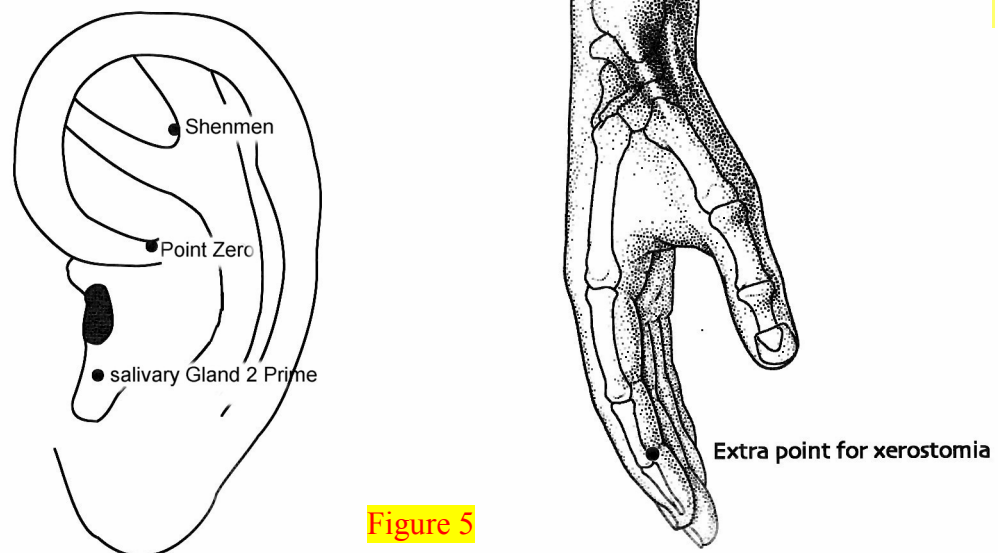


Figure 5

From: Morganstein (2005).

Discussion

Chinese Medicine is full of metaphors and what seems like poetic language, this comes from history, from a time when the medical tradition passed on through families by word of mouth. These metaphors still pass the test of time and when fully understood are an integral part of Chinese Medicine; this is the language of Traditional Chinese Medicine. When a TCM Practitioner talks of ‘clearing Wind’ or ‘moving Qi’ this is a common language that is used all over the world by Practitioners of Chinese Medicine and explains the actions of individual points working within the traditional paradigm. This model has developed over thousands of years by the experience of people using this model; to say that this model is ‘unscientific’ comes from a very narrow view of the way in which our world functions. Is the concept that everything is Qi so strange? Everything is made from atoms and atoms have their component parts. In years to come even smaller parts of the atom will be discovered. Atoms are minute yet how powerful is an atomic bomb? How powerful is Qi? Is it ignorant to say that as a person becomes stressed, their Qi does not flow freely? We can see how people’s muscles become tight when they are stressed; this is bound to affect the flow of energy. It is this way for the rest of TCM theory, if thought about deeply and without any preconceptions clouding our thoughts, it makes sense.

Scientific thought

Is now expected to be *the* standard, many of the books that have been referenced for this dissertation are pseudo-scientific, for example Xinnong, G. (1987). The Authors say of LI18 “Indications; cough, asthma, sore throat, sudden loss of voice Etc.” There is no mention of is the cough caused by a Pathogenic factor or Yin Deficiency, the tongue

colour or coating or mention of the qualities of the pulse, which are the corner stones of TCM diagnosis. This way of writing is trying to appeal to a Western audience but, is losing its TCM roots and in doing so is losing the individuality of each patient's treatment. Each patient is not the same and as TCM based Therapists, we must guard against this or we lose the *art* of Acupuncture.

The roles of Dental Acupuncturists and Professional Acupuncturists

In the world of Electronics if a piece of equipment goes wrong, a printer stops printing for example. The user would try a new cartridge. This is First line servicing. If this did not work, he would take it back to the shop. They might try to take it apart and look for loose connections or even find out if a circuit board is faulty, this is Second line servicing. If this doesn't work the shop will send the printer to a repair centre where the faulty board will be changed or repaired to component level, this is Third line servicing. In the world of Dental Acupuncture, the Dental Acupuncturist may treat a patient with the acute stage of Hay fever or treat a patient with an attack of Migraine. But, the root of the problem should be treated by 'Third line servicing' i.e. the Professional Acupuncturist who can do an in-depth diagnosis and treat the patient on a deep and consistent level so that the Migraine or Hay fever does not return. This is a partnership between an informed Dentist who can assess the patient's needs and a Professional Acupuncturist who is willing to meet those needs. This can only come about with open discussion and by putting aside any ill-informed prejudices. The Professional Acupuncturist may work alongside the Dentist occasionally to provide anaesthesia or to help with gagging Etc. this will help the Dentist who already has a lot to do! Different

Dentists/Acupuncturists will form different relationships but, it can only be to everyone's benefit especially the patient who usually enjoys all of the attention.

'Points' of interest

It is interesting, when the tables are studied that LI4 seems to be used as a 'cure all', there are records of it being used for most of the ailments considered. From a TCM perspective the Large Intestine meridian does cross the face to LI20 next to the nose but, so does the Stomach meridian amongst others so why is LI4 so popular? Could it be that it is a nice and easy point to reach for needling being on the top of the hand? It is a fact that there are no nerves in the top of the hand and the jaw that are shared. So the medical explanation of 'nerve innervations' could not cover the use of this point.

A very practical solution used to anaesthetise the jaw is to stimulate LI3/4 using Electro-Acupuncture. The wires going to the needles are taped to the wrists to prevent them from being dislodged as the Patient moves.

Whilst referencing many sources it was noticed that many of the Authors put their own 'spin' on the actions of the points for example Giovanni, M. (1994). Says that Bl44 "Calms the Mind" But, Deadman, P. (2000). Says of Bl44, "Unbinds the chest and regulates Qi, Activates the Channel and Alleviates Pain" but does not mention Calming the Mind at all. This made listing the actions of the points very difficult and has made the list of actions long for many of the points.

Implications of this research

This research has shown that explanation of many of the points used by Dental Acupuncturists in TCM terms is possible. Some of the points though, have no TCM explanation for example using LI20 for Anxiety, if it works empirically and, works consistently then why not use this point for this purpose? We would not have considered this point for this use because of TCM theory but a Dental Acupuncturist may do so. In this way, we are informed by the Dental Acupuncturists.

The reverse of this is to use TCM theory to suggest further points for use in DA, which has been done with success in this research. The points that are suggested have now to be experimented with to find the best results for each ailment.

Could the research have been improved?

With some guidance from my College, this research may have been improved. This has largely been a self-directed dissertation and because of this, the accepted format may not have been followed to the letter. As no Tutor was willing to read the rough draft of this dissertation the Author has no way of knowing if it is correct or not. It is hoped that it is as correct as possible.

With more experience, working with Dentists the scope of the research may have improved. For example, their day-to-day problems would be fully understood. This has been countered by using E mails to ask Dentists what their main problems are but, this does not compensate for actually 'being there'.

Ideally, if funds were available, instead of often using abstracts, the full articles would be obtained. This would give a much deeper understanding of the points being used and

would have greatly improved this research. The down side would be that the list of points for each ailment might have been much longer!

What problems emerged?

The main problem occurred because of the use of two medical models of the human body, i.e. the Western model and the Traditional Chinese model. The aim of this research was ultimately to produce a list of Acupuncture points that would be useful for Dental Acupuncturists. The great problem came with the realisation that most Dental Acupuncturists are not trained in Traditional Chinese Medicine, therefore the “Ben and Biao” (roots and branches) system could not be followed. If an example such as headaches is used, in TCM there are at least 17 reasons for headache (Roots). How can a Dental Acupuncturist tell if the patient has Liver Qi Stagnation or Kidney Yin Deficiency? These terms make no sense to them and some would say that these expressions are meaningless. In the section on headache, only a few of those points would be used at a time depending on the diagnosis. This is why the “1st, 2nd, 3rd level servicing” system has been suggested above so that the two professions may work more closely together. It is now necessary for further experimentation, using points from the lists above, to see if there are in fact ‘general’ points that will work for most types of headaches and the other ailments listed above. TCM has been used to suggest points that may work in this general fashion.

It was tempting to add more and more ailments to **List 2** for example Bell’s palsy and Post Herpetic Neuralgia to name a few. The problem with this is that there would be no room for the rest of the dissertation as there is a 10,000-word limit. This research can act as a model for further research into other ailments so this is not a great problem.

Could the research have been done differently?

The main components of this research consisted of Literature searches using books, journals, CD-ROMs and the internet. A survey of the uses of points by Dental Acupuncturists had already been completed and the results were incorporated into this research. Further research could have been pursued by using search criteria such as 'Anxiety and Acupuncture' or 'Trigeminal Neuralgia and Acupuncture. These were trialled but produced very few results.

As the initial part of the research question was aimed at Dental Acupuncturists, it was not appropriate to send a questionnaire to other TCM Acupuncturists. The Second part of the research question did concern TCM but due to the complexity of the question and lack of time this was not pursued, instead further points were searched for by using Literature Search. With more time a survey of TCM Acupuncturists, using a question such as "which points do you find most effective for treating head, neck and face problems?" could have been completed but, it would need to be a fairly large survey with a good response and a consistent mention of individual points, to be meaningful. It was felt that this path may have lead to many problems. Although it is not ruled out for the future.

Conclusion

The research question was, "Can the selection and use of points by Dental Acupuncturists be explained by Chinese Medical theory and can Chinese medical theory suggest further points for dental purposes?" The answer to this is yes, most of the uses of the points can be explained in Traditional Chinese Medical (TCM) terms, but some points are used empirically. TCM theory is a valid method for suggesting further

points. Clinical experimentation will be necessary to determine good general points for use when the practitioner is not traditionally trained. Dentists trained in Acupuncture are a good 'first stop' for Patients with Dental Acupuncture problems. Cases that are more complex should then be referred to professional Acupuncturists. The two professions should be working much closer together for the good of our mutual patients.

Traditional Acupuncturists should be actively promoting the use of Acupuncture within the Dental field by meeting with local Dentists and perhaps giving talks to groups of Dentists about the good work that can be done with Acupuncture within that field. There are other 'spin-offs', patients who are treated with Acupuncture successfully will be far more willing to have treatment when they develop none Dental problems and they will already know an Acupuncturist in their area. The Dentist may decide to train as a 'Dental Acupuncturist' and treat the patients him/herself within there own practice but, this will open the Dentist's mind to the benefits of Acupuncture, which is bound to benefit any Acupuncturist that the Dentist has a professional relationship with.

On a personal note, my longest attending patient was sent to me by a Physiotherapist trained in Acupuncture because the Physiotherapist said that the patient's problem was at a deeper level than she could treat. I also get patients sent to me by a local Doctor who "has done some Acupuncture". Therefore, I do gain from this. Naturally, an Acupuncturist with three and a half years training is going to feel resentment to someone who is able to treat NHS patients with only two weekends training but if this person understands their level of competence, they can be good advocates for Acupuncture. We all have bridges to build. Acupuncturists with degree qualifications will help the 'medical' professions realise that we are serious about our positions, we are also professionals and that we are here to stay.

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Glossary of Terms and Abbreviations

Terms from TCM, for example Wind, Heat, Stagnation, Heart, Gall Bladder, Blood, are capitalised, as is the convention in The Journal of Chinese Medicine.

Abbreviations

BDAS	=	British Dental Acupuncture Society
BL	=	Bladder
CD	=	Compact Disc
CICM	=	College of Integrated Chinese Medicine
DA	=	Dental Acupuncture
DU	=	Du or Governing Vessel
GB	=	Gall Bladder
HE	=	Heart
KID	=	Kidneys
LI	=	Large Intestines
LIV	=	Liver
MA	=	Medical Acupuncture
PE	=	Pericardium
REN	=	Ren or Conception Vessel
SI	=	Small Intestine
SP	=	Spleen
ST	=	Stomach
TA	=	Traditional Acupuncture
TB	=	Triple Burner or San Jiao
TCM	=	Traditional Chinese medicine
TMD	=	Temporomandibular joint dysfunction

Abstract

Oral Diseases

Volume 7 Page 109 - March 2001

doi:10.1034/j.1601-0825.2001.70208.x

Volume 7 Issue 2

Practical recommendations for the use of acupuncture in the treatment of temporomandibular disorders based on the outcome of published controlled studies

P. Rosted

MATERIALS: Literature searches performed by the Royal Society of Medicine and the University Library, Copenhagen were able to identify 74 publications regarding the use of acupuncture in dentistry. Among them 14 papers concerned the use of acupuncture in the treatment of TMD. To ensure reasonable methodological soundness of the involved studies, only randomised and blinded studies were included, which reduced the number of papers to six. Among these six papers three concerns the same study and were counted as one. One paper was a follow-up of a previous study and for this purpose counted as one.

METHODS: All publications were analysed for the following information: acupuncture points used, type of stimulation, number of treatments, duration of the individual treatment and the interval between the individual treatments.




MAIN OUTCOME: Acupuncture has in three out of three randomised controlled trials (RCT) proved effective for the treatment of TMD. The following local acupuncture points are recommended for the treatment of TMD: ST-6, ST-7, SI-18, GV-20, GB-20, BL-10. As a distant point LI-4 is recommended. After inserting the needles they should be manipulated manually to achieve the De-qui sensation and left *in situ* for 30 min. Treatment should be given weekly and a total number of six treatments is recommended.

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Appendix One

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1: [Clin Oral Investig.](#) 2006 Mar;10(1):84-91. Epub 2006 Feb 14.

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Dental anxiety in a representative sample of residents of a large German city.

PubMed Services

[Enkling N, Marwinski G, Johren P.](#)

Related Resources

Department of Oral Surgery, Faculty of Dental Medicine, University of Witten/Herdecke, Augustastrassen-11, 42699 Solingen, Germany.

In a demographic survey, 300 residents of a German city were questioned to determine the prevalence of dental anxiety. The correlation between the amount of dental anxiety and the age, sex, and education of the subjects was examined and the reasons for avoiding dentist's appointments, the duration of this avoidance, and what the subjects desire from future dental treatment. The Hierarchical Anxiety Questionnaire (HAQ) was used to measure the amount of dental anxiety. The average level of anxiety was 28.8+/-10.1 according to the HAQ. Young people were more afraid than older people (p=0.007), and women were more anxious than men (p=0.004). Of the women, 72% go to the dentist regularly, but only 60% of the men do (p=0.020). A painful experience while receiving dental treatment was given by 67% as the main reason for their dental anxiety, followed by a fear of needles (35%). The people wished for the most accurate information available about the dental treatment they receive (69%), followed by a compassionate dentist (62%), and treatment that is free of pain (62%). Of the people, 11% [95% CI: (7.5%; 14.5%)] suffer from dental phobia. All dental phobics were able to state the cause of their fear and more urgently wished for help from the dentist in overcoming their anxiety than the non-phobics (p=0.030). To satisfy the needs of the phobic patients, it appears necessary to screen the phobics out of the group of all patients and then offer them adequate therapy, or refer these patients to specialised treatment centres.

PMID: 16477408 [PubMed - indexed for MEDLINE]

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[Accessed 21/6/06].

The following Libraries have been used for my research;

- i. Exeter University Library. Exeter, Devon.
- ii. Paignton General Library, Paignton, Devon.
- iii. Peninsular Medical school Library, Exeter, Devon.
- iv. Torbay Hospital Medical Library, Torquay, Devon.
- v. Torquay General Library, Torquay, Devon.
- vi. College of Integrated Chinese Medicine specialist Library, Reading, Berkshire.

(Thank you to the staff at all of these Libraries for their help and patience).