Clinical Observation on Treatment of Migraine with Acupuncture

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Abstract Objective: To study the effect of puncturing points Taiyang (Ex-HN 5), Jiaosun (TE 20), Qixu (GB 40) and Shenmai (BL 62) on migraine. Methods: The 120 cases in the treatment group were treated with routine acupuncture therapy, while the 40 cases in the control group were treated with Ergotamine and Caffeine Tablet, and then the therapeutic effect and recovery time of the two groups were compared. Results: The recovery rate of the treatment group was 90.0%, which is higher than 70.0% of the control group (P< 0.01). The total effective rate of the treatment group was 100%, which is better than 92.5% of the control group (P < 0.05), the therapeutic effect of the treatment group was significantly better than the control group and the treatment group needed shorter treatment period (P < 0.05). Conclusions: Acupuncture has higher recovery rate and total effective rate as well as shorter treatment period than oral ergotamine and caffeine tablets, which indicated that acupuncture is superior to the routinely-administered oral western tablets in treating migraine.

Key Words: Migraine; Acupuncture Therapy; Caffeine; Ergotamine

The author treated 160 cases of migraine with two different methods, routine acupuncture and oral tablets of ergotamine and caffeine from June of 1999 to December of 2004, and now the report is as follows.

Clinical data

1. Diagnostic criteria

Refer to the head-wind symptoms in Complete Book on Diagnosis and Treatment of TCM Diseases and Symptoms[1]: the headache usually attacks one-side fronto-temple, forehead, and vertex, or alternating right- or left-side headache, or entire headache. The nature of the pain includes jumping pain, stabbing pain, distending pain, dizzy pain, dull pain, or feel like splitting headache. Each attack can last several minutes, hours, days, or even weeks. Sometimes it can also attack mildly at first and then gradually aggravate, or repeated attack.

2. General data

All the cases were out-patients with the diagnosis of migraine. They were randomly allocated into observation group and control group according to their visit order. Among 120 cases in the observation group, male cases: 48; female cases: 72; age range: 20-58 years old; the shortest disease duration: 2.5 hours; the longest disease duration: 24 months; among the 40 cases in the control group, male cases: 14; female cases: 26; age range: 19-59 years old; the shortest disease duration: 2 hours; the longest duration: 22 months; In addition, all the cases were excluded from organic diseases, and Chi-square test on the general data showed that the two groups were comparable.
Therapeutic Approaches

1. Observation group

Major points: Taiyang (Ex-HN 5) toward Jiaosun (TE 20) and Qiuxu (GB 40) toward Shenmai (BL 62) of the affected side.

Adjunctive points: bilateral Fengchi (GB 20) and Hegu (LI 4)

Operation: After routine sterilization of the local area, the filiform needle 0.38 mm in diameter and 13-60 mm length was inserted into Taiyang (Ex-HN 5) first and then turned subcutaneously toward Jiaosun (TE 20) by rotating manipulation, and the patients' needling sensation was supposed to transmit posterior along the direction of the needle tip. The needle was manipulated once every 20 min during the 2-hour retaining. The same filiform needle was inserted into Qiuxu (GB 40) perpendicularly first, then lifted up the needle subcutaneously after arrival of qi (needling sensation) and turned toward Jiaosun (TE 20) by 15°, followed by even reinforcing-reducing manipulation after arrival of qi of the two points simultaneously. The needles retained for 30 min. As for the adjunctive points, the stimulation and manipulation are both up to the arrival of qi, and the needles also retained for 30 min. The treatment was done once every day, 5 times made up a treatment course. And all the cases got one treatment course at most.

2. Control group

Oral administration of Ergotamine and Caffeine Tablets (each tablet containing 1 mg of Ergotamine Tartrate and 100 mg of Caffeine), 2 tablets for the first time, 1 more tablet 30 min later, after that 1 tablet every day until the disappearance of the symptoms, and the patients took 8 tablets at most in 6 days.

Therapeutic effect

1. Therapeutic effect criteria

Recovery: headache completely disappeared and no attack during the observation period.

Better: headache alleviated, attack period shortened or longer attack cycle.

Failure: the above indexes remained no change before and after the treatments.

2. Therapeutic results

The therapeutic result of the two groups on the 5th day is shown in the table 1.

<table>
<thead>
<tr>
<th>Group</th>
<th>N</th>
<th>Recovery</th>
<th>Better</th>
<th>Failure</th>
<th>Total effective rate(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation</td>
<td>120</td>
<td>108</td>
<td>12</td>
<td>0</td>
<td>100.0</td>
</tr>
<tr>
<td>Control</td>
<td>40</td>
<td>28</td>
<td>9</td>
<td>3</td>
<td>92.5</td>
</tr>
</tbody>
</table>

Statistical management showed that the total effective rates of the two groups had significant difference ($P < 0.05$), and that the total effective rates of the two groups had very significant difference ($P < 0.01$), which indicated that the observation group had better effect than the control group.

The time-effect relationship of the recovery cases in two groups is shown in the table 2.

<table>
<thead>
<tr>
<th>Treatment time (h)</th>
<th>Observation group</th>
<th>Control group</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 1</td>
<td>30</td>
<td>5</td>
</tr>
<tr>
<td>24</td>
<td>40</td>
<td>7</td>
</tr>
<tr>
<td>72</td>
<td>29</td>
<td>6</td>
</tr>
<tr>
<td>&gt; 72</td>
<td>9</td>
<td>10</td>
</tr>
</tbody>
</table>

As shown in table 2, the treatment course was shorter in the observation group, 99 cases got recovery within 72 hours, which occupied 82.5%, and 9 cases got recovery after 72 hours, which occupied 7.5%; while in the control group, 18 cases got recovery within 72 hours, which occupied 45%, and 10 cases got recovery after 72 hours, which occupied 25.0%. And statistical management showed the difference in the two groups had significant meaning ($P < 0.05$).

3. Case report

The patient, female, 35 years old, a cadre, came for the first visit on June 19, 1998 because of 3-hour attack of left-side migraine headache with the following complaints: left-side migraine for more than one year, and the migraine headache got worse in the last 2 months, especially after watching TV within menstruation period or emotional distress, and this time after arguing with others, she got severe distending pain of the left-side headache, EEG by a certain hospital showed normal and rheoencephalogram showed spasm of the left-side cerebral vessels. What's more, the patient also got nausea, general fatigue, restlessness and irritability. Routine blood test and blood pressure all appeared normal, tenderness in left-side point Taiyang (Ex-HN 5), pale tongue with thin and white coating and wiry pulse. Therefore she was diagnosed with migraine headache. And then she was treated according to the above-