Clinical Observation on Treatment of 63 Cases of Enuresis by Scalp Acupuncture, Body Acupuncture plus Moxibustion with Box

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Abstract Objective: To observe the clinical therapeutic effect of scalp acupuncture, body acupuncture plus moxibustion with box in treating enuresis. Methods: Ninety-three patients were divided into treatment group of 63 cases and control group of 30 cases. Scalp acupuncture, body acupuncture plus moxibustion with box were used in treatment group. Routine western medicine therapy was used in control group. Results and Conclusion: The cured rate was 69.8% and the total effective rate was 95.3% in the treatment group and 33.3% and 76.7% in the control group. The therapeutic effect in treatment group was superior to that in control group (P<0.05).

Key Words: Scalp Acupuncture; Acupuncture Therapy; Moxibustion Therapy

General Materials

Enuresis is an abnormal urinary disease commonly seen in childhood. The author treated 63 cases of this disease by scalp acupuncture, body acupuncture plus moxibustion with box from October 1998 to October 2006, compared with 30 cases in routine western medicine group. Now it is reported as follows.
differentiation in TCM. Statistic showed there was no significant difference in gender, age, course of disease and so on between the two groups ($P>0.05$) and there was comparability.

**Therapeutic Methods**

1. **Treatment group**

   Scalp acupuncture: Middle line of Vertex and bilateral lateral line 3 of forehead were used in the patients of insufficiency of kidney-yang type. Middle line of Vertex and bilateral lateral line 1 and 2 of forehead were used in the patients of deficiency of spleen-qi and lung-qi type and stagnated heat in liver meridian type. The filiform needles of 25 mm were inserted fast for the children under 8 years old. For the children over 8 years old, incoming gas method and horizontal needling were used for children of insufficiency of kidney-yang type or deficiency of spleen-qi and lung-qi type, and the mild degassing method and horizontal needling were used for children of stagnated heat in liver meridian type.

   Acupuncture: Guanyuan (CV 4), Zhongji (CV 3), Shenshu (BL 23), Pangguangshu (BL 28) and Taixi (KI 3) were the main acupoints for the patients of insufficiency of kidney-yang type. Qihai (CV 6), Taiyuan (LU 9), Zusanli (ST 36), Sanyinjiao (SP 6) and Shenshu (BL 23) were the main acupoints for the patients of deficiency of spleen-qi and lung-qi type. Zhongji (CV 3), Guanyuan (CV 4), Sanyinjiao (SP 6) and Taichong (LR 3) were the main acupoints for the patients of stagnated heat in liver meridian type. The needles were inserted painlessly to subcutaneous part. Cool-inducing needling technique was applied in Taichong (LR 3) and pyrogenic needling technique was applied in the rest for the patients of all the three types.

   The scalp and body needles all were remained for 5-15 min and manipulated every 3 min or so.

   Moxibustion with box: After the needles were withdrawn, moxa cones of 1.0-0.5 cm in length made from the moxa stick were put evenly on the bracket of moxibustion box (made from thin stainless steel of reticulate structure densely covered with pores of $16 \times 8 \text{ cm}^2$ in area). The moxa cone was ignited by alcohol cotton ball. Moxibustion with box was applied on the patients of all the three types along Conception Vessel from Zhongji (CV 3) to Shenque (CV 8) and Governor Vessel from Yaoshu (GV 2) to Mingmen (GV 4) for about 10 min. According to the feeling of the patient to temperature, the height of bracket was regulated to the degree that the patient could tolerate.

   The treatment was given everyday and 7 days consisted of one course of treatment. The interval of 1-2 days was given between two courses. The therapeutic effects were observed after 3 courses of treatment.

2. **Control group**

   First, the doctor let the sick children relax and remove spiritual or psychological factor. Imipramine hydrochloride was given to the excited sick children (12.5-25 mg every time for children of 5-7 years old, 30-45 mg every time for children over 7 years old and once every evening at bedtime). After the symptoms were improved, the drug was taken every other day with the same dose. Meclofenoxate was given to the children with general manifestation or excessive deep sleep (100 mg every time, three times every day). Nandrolone phenylpropionate was combined to treat the patients with obvious weakness and malnutrition (5-10 mg, intramuscular injection, once every 10 days). The treatment was given successive 45 days.

**Therapeutic Effects**

1. **Criteria of therapeutic effect**

   Cure: After 3 courses of treatment, symptom of enuresis disappeared and the patient had micturition desire at night and was easy to be awakened to urinate voluntarily.

   Marked effectiveness: After 3 courses of treatment, symptom of enuresis disappeared and appeared accidentally when fatigue or emotional fluctuation.

   Effectiveness: After 3 courses of treatment, the times of enuresis was less obviously than that of pretreatment and the interval time prolonged correspondingly.

   Ineffectiveness: After 3 courses of treatment, the clinical symptoms had no change.

2. **Therapeutic results**

   Seen in table 1, the cure rate in treatment group was obviously superior to that in control group ($P<0.01$). The total effective rate in treatment group was also superior to that in control group ($P<0.05$).