

5th International Meeting on
TRADITIONAL & ALTERNATIVE MEDICINE
&
International Conference on
ACUPUNCTURE AND MERIDIAN STUDIES

April 23-24, 2019 | Rome, Italy

A comparative study of acupotomy and acupuncture in patients with primary frozen shoulder

Farid Mokhtari

Beijing University of Chinese Medicine, China

Adhesive capsulitis is a common disease that causes pain and reduced range of motion, but vague on the shoulder. Inflammation of joint or tissues around the joint can cause limitation in range of motion and painful joint. There is no known racial or genetic tendency. Most patients with adhesive capsulitis will improve with nonsurgical treatment. The prevalence of shoulder complaints in the UK is estimated to be 14%, with 1% to 2% of adults consulting their general practitioner annually regarding new-onset shoulder pain. Ancient Chinese medicine called frozen shoulder as Fifty Years Old Shoulder. Acupotomy is the novel medical device and technology which is derived from the combination of the acupuncture needle with the surgical knife to treat soft tissue trauma characterized by severe Pains of neck, shoulder, back, buttock arm or leg. Using acupotomy the doctors can remove tissue adhesion of trauma resulting in the improvement of the local circulations that pain is released. As to its pathogenesis there have been different opinions: one opinion state that the slight shifts of the muscles around shoulder are the responsible factor and caused a groups of tender points into six to ten focal points; on the other hand, most of the literature says this disease starts with degenerative changes of soft tissues of the shoulder, which, coupled with the invasion of cold and dampness, causes a chronic aseptic inflammation in a wide area around the joint and its capsule, and extensive adhesion of the soft tissue that limits the movement of the shoulder joint. So we also call it "frozen shoulder. both opinions are correct since they look into the whole matter from different aspect. adhesion of soft tissues leads to imbalance of muscle motion, so we observe limitation in ROM and pain. As we mention soft tissue adhesion is one of the main reason that caused Frozen shoulder, Acupotomy needles have both properties of Acupuncture needles and also have properties of surgery blades for cutting and separating soft tissues,

so that Acupotomy can solve resolve this problem.

Method: According to previous studies we evaluate 20 patients divide them in to two groups, acupuncture group and acupotomy group. Each group contain 10 patients. All the patients with primary frozen shoulder and with TCM pattern of wind-damp-cold entire to our study and rest of frozen shoulder patients excluded. The whole course of treatment for acupuncture group in 10 session 3 days a week and for acupotomy group in 4 sessions that every 5 days have one session. In Acupuncture group, the needles were retained for 30 minutes and in Acupotomy group acupotomy needle were removed after manipulations, and were not retained

Results: From total of 20 patients, there were 13 female cases and 7 male cases. According to compression of VAS Score of before-after treatment (acupotomy group: from 7.72 ± 1.34 changed to 5.23 ± 1.57 and acupuncture group from 7.15 ± 1.56 changed to 5.75 ± 1.42), it showed that both treatment was effective and have significant changes in VAS scale for before and after treatment, although the treatment in both group were effective but Acupotomy group was superior to Acupuncture group and there was significant difference between changes of VAS score in these two group. The range of motion in different direction were examine before and after treatment and the results compare and analyze separately. ROM in all direction were proved significantly in each group and curative effects of these two groups compare to each other have significant difference that show that acupotomy group have better improvement of ROM than Acupuncture group. Curative rate (acupotomy group: 40% VS acupuncture group: 20%) and effective rate of treatment (acupotomy group: 100% VS acupuncture group: 80%) in these two groups were significantly different and acupotomy group was superior to acupuncture group

5th International Meeting on
TRADITIONAL & ALTERNATIVE MEDICINE
&
International Conference on
ACUPUNCTURE AND MERIDIAN STUDIES

April 23-24, 2019 | Rome, Italy

Conclusion: The result of our study showed that curative effect of acupotomy is superior to acupuncture in different aspects, VAS score, and curative effect for ROM. The quality of day life activity can be recovery quickly with acupotomy in this patients. And also this method is cost benefit and time saving method in comparison with the other way of treatment in western medicine or Chinese medicine. According to mechanism of acupotomy treatment, it had high curative rate and quick response of treatment and less failure than other treatments.

Biography

Farid Mokhtari is an Acupuncturist and General Practitioner in Tehran, Iran. He was invited as a lecturer to the Tehran University of Medical Science for numerous medical-related workshops. He is the inventor of the first "High definition digital video endoscope" and Family Physician in Iran. He has also given poster presentations at international medical conferences and published articles and in the field of medicine.

farid.mokhtari@yahoo.com