

Introduction to Prof. You-An Fang's Empirical Acupoints Applied to Treating Migraine

Yemeng Chen, L.Ac., FICAE
New York College of Traditional Chinese Medicine
155 First Street
Mineola, NY 11501

Dr. You-An Fang (1925 – 2004) was an Acupuncture Professor at the former Shanghai Medical University (now known as Fudan University), China. He learned from his father, Dr. Shen-An Fang, a noted acupuncturist during the mid-20th century and a pioneer of international acupuncture education, honored by the famous European acupuncture disseminator George Soulié de Morant as “The Twentieth Century Fang’s Acupuncture”. Besides his long-term practice since 1947, he also participated in acupuncture research and education. He published many books such as The Effective Acupuncture Indications, Acupuncture Treatment for Stroke, Acupuncture Treatment for Infantile Brain Diseases and Selections of You-An Fang’s Clinical Works in Acupuncture. Dr. Fang had been the Director of the Acupuncture Department of Huashan Hospital affiliated to the Shanghai Medical University, and also a Council Member of the China Acupuncture & Moxibustion Society and the Vice-President of the Shanghai Society of Acupuncture & Moxibustion. In his last 10 years, he had practiced acupuncture in Argentina and eventually returned to his hometown in 2003. On August 30, 2004, he suddenly passed away in Shanghai due to heart disease. According to his will, his remains were donated to Fudan University Medical Center for teaching purposes. Dr. You-An Fang will always be remembered for his enthusiastic participation in and benevolent attitude toward the health care profession.

As my mentor, Prof. Fang demonstrated and shared his distinguished techniques and expertise concerning certain acupuncture points in his clinical practice when we worked together in the Huashan Hospital. He insisted that palpation is a nonexclusive procedure of acupuncture practice, which is not only helpful for diagnosis but also for therapeutic purposes. He discovered so many tender points useful in treating different kinds of patients. In this article I will introduce just two of these points related to the treatment of migraine.

Taiyang (Ex.) is a good empirical point for headache. During his practice, especially relating to the treatment of migraine, he found another location more effective than the regular Taiyang (Ex.). The location is the intersection of a horizontal line starting from Sizhukong (SJ 23) backward with the hairline. Due to the location being posterior to the regular Taiyang (Ex.), it was temporarily named Posterior Taiyang. Dr. Fang found that this location is the pain area during episodes of migraine. He tried needling that point and achieved a better therapeutic effect than that achieved by needling regular Taiyang (Ex.). The needle techniques are applied as follows: shallow insertion in the way of joint puncture, whole needle body on the subcutaneous level, horizontally backward about 1.5 inches, small range rotation with reducing method, and retention for 30 – 60 minutes. It is usually applied bilaterally.

In addition, Dr. Fang also discovered one more extraordinary point for needling to treat migraine. Among migraine patients, especially young females with PMS, he discovered there was likely to be a slight eminence and tenderness at the location of the spinal process of the third cervical vertebra. The severity of the eminence and tenderness on that spot is in accordance with the severity of the migraine during or before the menstrual period. Needling that combines Posterior Taiyang and C3 spinal process is very helpful and always works for migraines during or before

the menstrual period. The spot of the spinal process of the third cervical vertebra is hardly palpable due to the curve of the cervical spine in a normal person. However, in migraine patients that spot is usually easily located because it is accompanied by obvious tenderness. It is interesting that there are never any abnormal changes observable in X-rays of the cervical spine either in the anterior view or in the lateral view, but that the positive signs are observed during palpation.



For the acupuncture treatment of migraine, Dr. Fang not only selected certain specific points but also considered the individual differentiation according to the accompanying symptoms. He observed that these patients usually were liable to upward stirring of liver wind and hyperactivity of the liver yang according to Traditional Chinese Medicine theory. Migraine is usually caused by liver wind and liver yang upward stirring to the lucid orifice, which is due to insufficient kidney water to nourish the wood. Therefore the treatment principle is to pacify liver and extinguish the wind, and to nourish kidney yin.

The following is the protocol for migraine treatment:

Main acupoints: Posterior Taiyang (Ex.), Fengchi (GB 20) and Zulinqi (GB 41).

Modifications:

1. Patient presents symptoms such as flushed face, irritability, and wiry or slippery pulse, which relates more to hyperactivity of the liver yang. For this kind of case, Ganshu (BL 18) and Taichong (LR 3) should be added with reducing method.
2. Patient presents symptoms such as skinny and withered body, irritability, wiry, thready and rapid pulse, weakness in the Chi position, and red tongue or even dark red with shining and floriated coating, which relates more to insufficient kidney water. In this situation, Shenshu (BL 23) and Fuliu (KI 7) should be added with tonification method.
3. Beihui (GB 20), Naohu (GV 18), and Shenmen (HT 7) should be added for those patients who have frequent emotional upsets with too much hypochondria or self-absorption.
4. For female patients who easily suffer from migraine during the menstrual period or 1-2 days before the period, Guanyuan (CV 4) and Sanyinjiao (SP 6) should be added.
5. If the spot of the spinal process of the third cervical vertebra has a slight eminence and severe tenderness, needling or warming needling on this spot first and then continuing with the main acupoints will be very helpful for headache relief.

The above-mentioned situations vary according to the individual. Sometimes a patient has more than one situation or the situation changes during different visits, so making differentiation and

acupoint modification each time is the key to achieving better therapeutic effects. Never have one fixed acupuncture plan for every different visit or every different migraine patient.

Prof. Fang also mentioned a book named A Great Revolution in the Brain World, written by Nounai Kakumei, in which the author described an A10 nerve discovered in the brain. The nerve, a horizontal line, is close to the hypothalamus area. When this nerve is stimulated, people will have a feeling of pleasure; also a human being's brain can control this nerve, such as through thinking or desire and release of β -endorphine. This A-10 nerve relates to basic physical requirements like sexual desire, food desire and body temperature adjustment, and also relates to the motor and memory function, and even connects to the higher level mental activity controlling center: commissural anterior. It is clear now that acupuncture stimulation will cause more release of β -endorphine, which is the key to analyzing the therapeutic effect of pain and internal organ function improvement by acupuncture. It is interesting that the A-10 nerve described coincides with the similar line of Posterior Taiyang (Ex.), especially the needle body line, which can be considered as the projection of the A-10 nerve on the scalp. This might explain the effectiveness of Posterior Taiyang (Ex.) for the treatment of migraine. About seven years ago Prof. Fang wanted to conduct in-depth research on this topic, but unfortunately he didn't complete it.

During my practice, especially the practice in the United States, I also found that this empirical point is very effective for migraine headache and also for depression and stress. Some patients experience an immediate effect after 20 to 30 minutes acupuncture treatment. Some patients suffering from depression and stress without migraine also present tenderness on Posterior Taiyang (Ex.). After treatment, they also feel that their symptoms are improved and they experience a better mood. Whether neuron transmitters like 5-HT are involved or not needs to be further researched. Since there is a significant number of patients suffering from migraine, depression and stress in the United States, it will be worth having a detailed and in-depth study of acupuncture applied to treat these health problems.

(The original article was published in the American Journal of Traditional Chinese Medicine, Vol. 5, No.2, 2004, Page 18 – 20)

