

Acupuncture for the treatment of acute neck pain caused by stiff neck: a case report

Jinhuan Yue

Department of Acupuncture and Moxibustion, Heilongjiang University of Chinese Medicine, Harbin, 150040, China

Letter to Editor

Abstract: A 31-year-old man suffered from acute neck pain caused by stiff neck with serious limitation of neck activity. The neck pain relieved significantly after acupuncture treatment at Zhongzhu (SJ3) acupoint for three days; and it completely disappeared after 2 and 4 weeks after treatment cessation.

Key words: Acupuncture; Acupoint; Zhongzhu (SJ3); Neck pain; Stiff neck; Case report.

Correspondence to: : yjh_2008@163.com>

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Stiff neck (SN) (also known as *Laozhen* in China) is a common clinical syndrome manifested by the sharp onset of severe and persistent neck pain and soreness in the cervical region in the morning and limited neck activity, mostly caused by improper sleep posture, an uncomfortable pillow, cold attacking the neck during sleep or the strain of neck muscles (1-2). Treatment with Tuina has been reported to be effective for SN acute neck pain (SN-ANP) (3). However, using of acupuncture at the Zhongzhu (SJ3) acupoint specifically for SN-ANP has not been reported. Here we report a case of the successful use of acupuncture to relieve neck pain caused by SN.

A 31-year-old man suffered from SN-ANP with Northwick Park Neck Pain Questionnaire (NPQ) of 63.89% and McGill Pain Questionnaire (MPQ) scale of 35.7 on the right neck (Figure 1), and affecting the shoulder in the morning 2 days before, with limitation of neck activity. No local swelling or redness was seen in the neck region. X-rays examination showed no abnormal cervical vertebra. He had massage (Grasp the neck with hand and put thumb on one side of the neck, and other fingers on the other; knead the neck on both sides by digging in the thumb and other fingers, gently squeezing them together; repeat the motion up and down the neck for five minutes each time) by himself for three times, with no benefit.

After examination, he was treated with acupuncture. A disposable, sterile needle (40 mm in length and 0.30 mm in diameter; Andy brand, Guizhou Andy Medical Instrument Co., Ltd.) will be perpendicularly inserted to a depth of 10 mm at the right SJ3 point (located on the dorsum of the hand, between the fourth and fifth metacarpal bones, in the depression proximal to the fourth metacarpophalangeal joint). The needle was manipulated by twirling about 200 rounds per minute, for 3min after *deqi* sensation (soreness, numbness, distention, and heaviness) achieved and the needle retained for 30 min, during which time the needle was maneuvered 3 times for every 10min. The patient moved his head in all directions during the treatment period. The neck pain relieved markedly 5min after needle retention and eliminated almost completely

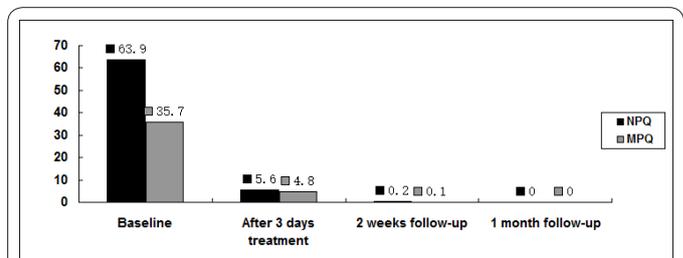


Figure 1. Outcome measurements of SN-ANP before and after treatment.

with NPQ of 5.56% and MPQ scale of 4.8 (Figure 1), when the needle was withdrawn. The head moved freely after intervention for just once and never recurred at the 2 weeks and 1 month after treatment cessation respectively with zero of both NPQ and MPQ scale (Figure 1).

The use of acupuncture at SJ3 acupoint for acute SN-ANP has rarely been reported, although three studies reported acupuncture for stiff neck at other acupoints (4-7). Unfortunately, all these studies failed to provide objective tools for outcomes evaluation (4-6). This study used acupuncture at SJ3 acupoint for relieving SN-ANP and achieved a successful outcome. This case report demonstrates that acupuncture should be considered to treat SN-ANP. However, controlled studies are needed to confirm the efficacy of acupuncture therapy for patients with SN-ANP.

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