

Treating an acute episode of Transient Ischaemic Stroke with Acupuncture and Chinese Herbs: a case history

Abstract

Transient ischaemic strokes (TIAs) are transient focal disturbances of neurological function. Attacks may revert spontaneously or leave lasting sequelae, especially if not attended to in the first few days. Symptoms include temporary derangement of consciousness, transient paralysis, loss of sight or speech, or failure to recognise familiar faces etc. One or more TIAs often precede a major stroke. Treatment by acupuncture and Chinese herbs, along with appropriate lifestyle changes, can be very important in preventing sequelae and recurrence after such strokes. And, as the following article shows, Oriental medicine can be used right from the onset to treat such attacks successfully.

It is rare for most acupuncturists with private practices to treat an acute crisis unless they are also working in a hospital setting. I have seen and treated many sequelae of strokes in my practice, but I never thought I would be called to treat a stroke as it was happening. It has almost been five months since the stroke from the time this article was written and the patient has not only fully recovered but he is in even better health than before.

The patient, Mr. S., is 67 years old, slightly overweight with a strong family history of stroke and heart disease. He was diagnosed with high blood pressure in his forties. He took allopathic medications for a few months and then switched to acupuncture and Chinese herbs. His blood pressure became stabilised after two or three years of regular treatments and different herbal formulas. He has not regularly used either allopathic drugs or herbal medicine for his blood pressure for the past 20 years. Very occasionally, when the blood pressure spikes, he takes herbs for a few days, and this brings it back to normal.

He was diagnosed with an enlarged prostate 17 years previously, which was also treated and stabilised with Oriental medicine.

He has a mildly elevated LDL cholesterol level, a residual symptom of indulgence in rich foods and alcohol for many years. Fourteen years ago he stopped drinking alcohol and adopted a vegetarian diet.

In the week prior to the attack, he had two or three bouts of dizziness that came suddenly and subsided quickly. He had had minor bouts of dizziness before, but none as strong or frequent as these. His blood pressure was checked at this time, and despite some sleep disturbance and a higher than usual level of stress due to family matters, it was found to be normal.

I was sitting with Mr. S that morning when he suddenly had an attack of vertigo. There was a strange look on his face and he whispered that it felt much more intense than previous attacks. Suddenly he started to vomit violently and when he tried to get up he fell back down, saying that everything was spinning around him. I first thought it might be a severe case of food poisoning. I suggested that he lay down but this did not diminish the intensity of the vertigo or nausea.

His pulse was full, rapid and slippery and his tongue had a thick white coat. At this stage I revised my opinion about food poisoning and made a diagnosis of rebellious qi due to phlegm (tongue coating, pulse and watery vomit) and Liver wind (intense vertigo and sudden collapse).

At around 7.30 a.m. I administered *Di Tan Tang* (Scour Phlegm Decoction) as a granular decoction, and gave him an acupuncture treatment, needling Quze P-3, Neiguan P-6, Shenmai BL-62, Baihui DU-20, Shenting DU-24, Xingjian LIV-2 and Taichong LIV-3, and applying stick moxibustion to Yongquan KID-1 for about five minutes. The needles were retained for thirty minutes.

The vertigo and nausea subsided a little, but when he attempted to prop himself up again they both violently returned, with another round of projectile vomiting. As he tried to get up to use a nearby bucket, he realised that he had lost motor coordination of his arms and legs and was unable to walk.

By then, I knew something more severe was going on. I called a local allopathic physician but he was unavailable at that moment. I took his blood pressure, which was slightly elevated (145/90) but not excessively so. Since his heart rate and vital signs seemed normal, I concluded that his life was not in any danger. This episode was taking place in a third

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world country where the medical emergency services have a poor reputation for safety and efficacy. The patient who has great faith in Chinese medicine urged me to proceed with whatever treatment I could give him until we found out what exactly was happening. He was also complaining of a headache, which seemed to originate from the left side of his occipital protuberance.

My further diagnosis was that this was a case of phlegm not only causing rebellious qi but also invading the channels.

At around 11am, I decided to administer modified *Zhen Gan Xi Feng Tang* (Sedate the Liver and Extinguish Wind Decoction), also as a granular decoction: Dai Zhe Shi (Haematitum), Huai Niu Xi (*Achyranthis bidentatae* Radix), Xuan Shen (*Scrophulariae* Radix), Tian Men Dong (*Asparagi* Radix), Mu Li (*Ostreae Concha*), Tian Ma (*Gastrodiae Rhizoma*), Gou Teng (*Uncariae Ramulus cum Uncis*), Dan Shen (*Salviae miltiorrhizae* Radix), Ban Xia (*Pinelliae ternatae* Rhizoma), Chen Pi (*Citri reticulatae* Pericarpium), Tian Nan Xing (*Arisaematis Rhizoma*), Di Long (*Pheretima*).

This time the herbs were administered as a granular powder. He took two grams every two hours with warm water and received another acupuncture treatment using the same points as above about four hours later.

By now it was mid-afternoon. The nausea was still present but the vomiting had subsided and the vertigo had lessened in intensity. The headache however was still strong. He was able to sit up in bed without too much discomfort but when he attempted to stand, he still had no control over his lower limbs and the dizziness returned with the slightest movement of the head or even the eyes.

His voice was weak and raspy and he complained of a strong pain extending from his neck to the left occipital protuberance.

I had been on the phone with several different people since morning and in the late afternoon a friend, who is also an allopathic physician, confirmed my fear that it might be a stroke. In his experience he said, these symptoms can indicate either a brain tumor or an infarction and the only way to find out for sure was to go to the hospital for an MRI of his brain. The earliest we could get an appointment was for the next day.

I decided to immediately give him the "Emergency Treatment of the Initial Stage of Wind Stroke" from the *Qian Kun Sheng Yi* (this text appears in "The Divinely Responding Classic", translated by Yang Shou-zhong and Liu Feng-ting, published by Blue Poppy Press). This treatment consists of bleeding all ten jing-well points on the fingers.

The next morning, the nausea and vomiting had improved considerably. The other symptoms were unchanged but he felt mentally clearer and a bit stronger. The trip to the hospital took a large portion of the day. In addition to the MRI, he received a full examination by a neurologist, an

ECG and extensive blood work. The neurologist felt that he should remain at the hospital under supervision but Mr. S. declined, feeling that acupuncture and herbs could be as effective in dealing with his condition as allopathic drugs.

We received the test results that evening, confirming an infarction on the left lobe of the cerebellum. Both the MRI technician and the neurologist told us that the prognosis was not good, both because the MRI showed 60% of the left cerebellum affected, and because some nerve reflexes, especially on the left side of his legs, seemed affected. He was diagnosed with a transient ischaemic stroke and was prescribed Plavix, a blood thinner and Piracetam, a neurogenic drug for the dizziness. Mr. S. declined to take these but made the decision to start on a daily low dose of aspirin and to continue taking Chinese herbs instead.

I decided to continue with the same herbal formula, modified *Zhen Gan Xi Feng Tang*, two grams four times a day, and bleed his jing-well points again. Later that day, I gave him a second acupuncture treatment in order to address the headache and dizziness. I used the following points: Hegu L.I.-4, Fenglong ST-40, Jiexi ST-41, Fengchi GB-20, Xiashi GB-43, Guanchong SJ-1, Shaohai HE-3, Baihui DU-20, Shenting DU-24, and Houxi SI-3 with Shenmai BL-62.

On the fourth day of daily treatments, there were some substantial improvements in Mr. S's condition. The nausea was totally gone. The dizziness was only felt in the morning on rising, or if he performed sudden or jerky movements. His gait was unsteady and his legs felt weak but he was able to walk for short distances with the aid of a walker. His appetite returned. The pain on the left side of his neck was still quite severe and extended along the Gall-bladder channel to the area above the left eye.

There is a saying in the traditional Chinese medical literature that all 'knotty' (deeply entrenched and difficult to treat) diseases involve phlegm and blood stasis. I now felt it was time to address the blood stasis, which I felt was responsible for the severe headache. I decided to use *Xue Fu Zhu Yu Tang* (Drive Out Stasis in the Mansion of Blood Decoction) with the additions of Ren Shen (*Ginseng* Radix) to tonify the qi, Di Long (*Pheretima*) to open the collaterals and Shi Chang Pu (*Acori tatarinowii* Rhizoma) to open the orifices. I also made a change in his acupuncture prescription and used the following points for the next three days: Hegu L.I.-4, Guanchong SJ-1, Zhongzhu SJ-3 (all on the left), Shaofu HE-8 (on the right), Fenglong ST-40, Jiexi ST-41, Fengchi GB-20, Xiashi GB-43, Xingjian LIV-2, Taichong LIV-3, Houxi SI-3, Shenmai BL-62, Muchuang GB-16 and Luoque BL-8 (all bilateral), and Fengfu DU-16, Baihui DU-20 and Guanyuan REN-4 (moxa).

On the sixth day he reported a significant improvement in the headache and the dizziness but complained of constipation. We continued the same acupuncture

prescription, omitting Guanyuan REN-4 and adding Zhigou SJ-6 and Zhaohai KID-6.

In addition to the acupuncture and herbs, Mr. S. had also received one homeopathic remedy for the vertigo and two bodywork treatments for his spine and neck.

At this stage he was only having two or three bouts of dizziness, each of a few minutes duration, during the day. He was able to walk in a straight line with the help of a walker, and the pain on the left side of neck and head had considerably diminished.

After two weeks, his physical condition was almost back to normal. He no longer required the walker and there were no longer any bouts of dizziness. However, as he started to deal with work and daily life again, he found that he had a difficult time handling too much at once. He felt an underlying sense of anxiety and restlessness and easily got stressed and upset with things. It seemed that his nervous system had suffered some damage as a consequence of the stroke. The word he kept using was 'frazzled'. At this stage, I modified the herbal and acupuncture prescription again to address what I diagnosed as shen disturbance from heat in the Heart and Liver. I added Ling Zhi (Ganoderma), Dan Shen (Salviae miltiorrhizae Radix) and Bai Shao (Paeoniae Radix alba) to the herbal decoction and Tongli HE-5 and Shenmen HE-7 to the acupuncture prescription.

For the next two weeks he continued to receive one acupuncture treatment every day using the same prescription with some slight modifications as needed, and he continues to take the herbal formula twice a day.

At this stage, I could declare that Mr. S. had made a full recovery. All the physical symptoms were back to normal and he was able to handle the daily stress of life again.

On the second month, we cut back the frequency of treatments to twice a week, then just once a week in the third month.

Mr. S. has also made some dietary and life style changes. He has drastically cut down on sugar, dairy products and coffee. He starts the day with a brisk walk and tries to spend less time on the computer.

Three months after the stroke, he has lost over ten pounds. He feels lighter, has more energy and feels healthier than he did prior to the stroke.

While we cannot be absolutely sure, just with a single case, that Chinese medicine, or any medicine, might have been responsible for the outcome, only one per cent of this type of stroke victims have such complete recovery, according to the doctors involved in this case. Both the local allopathic physician and the neurologist were astounded at his fast and thorough recovery and actually told me that I should write about it and "let the world know how good Chinese medicine can be with strokes".

I believe that bleeding the ten jing-well points on the fingers within the first 24 hours of the attack helped the rapid progress of the case. The robust life force and healthy

lifestyle of the patient were another contributing factor. However, I have no doubt that the incredible healing power and efficacy of acupuncture and Chinese herbs had a big role to play in what the allopathic physicians called 'an amazing recovery'. ■

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