Acupuncture in the Treatment of Chronic Pain Due to Endometriosis: Western HealthSciences A Case Study



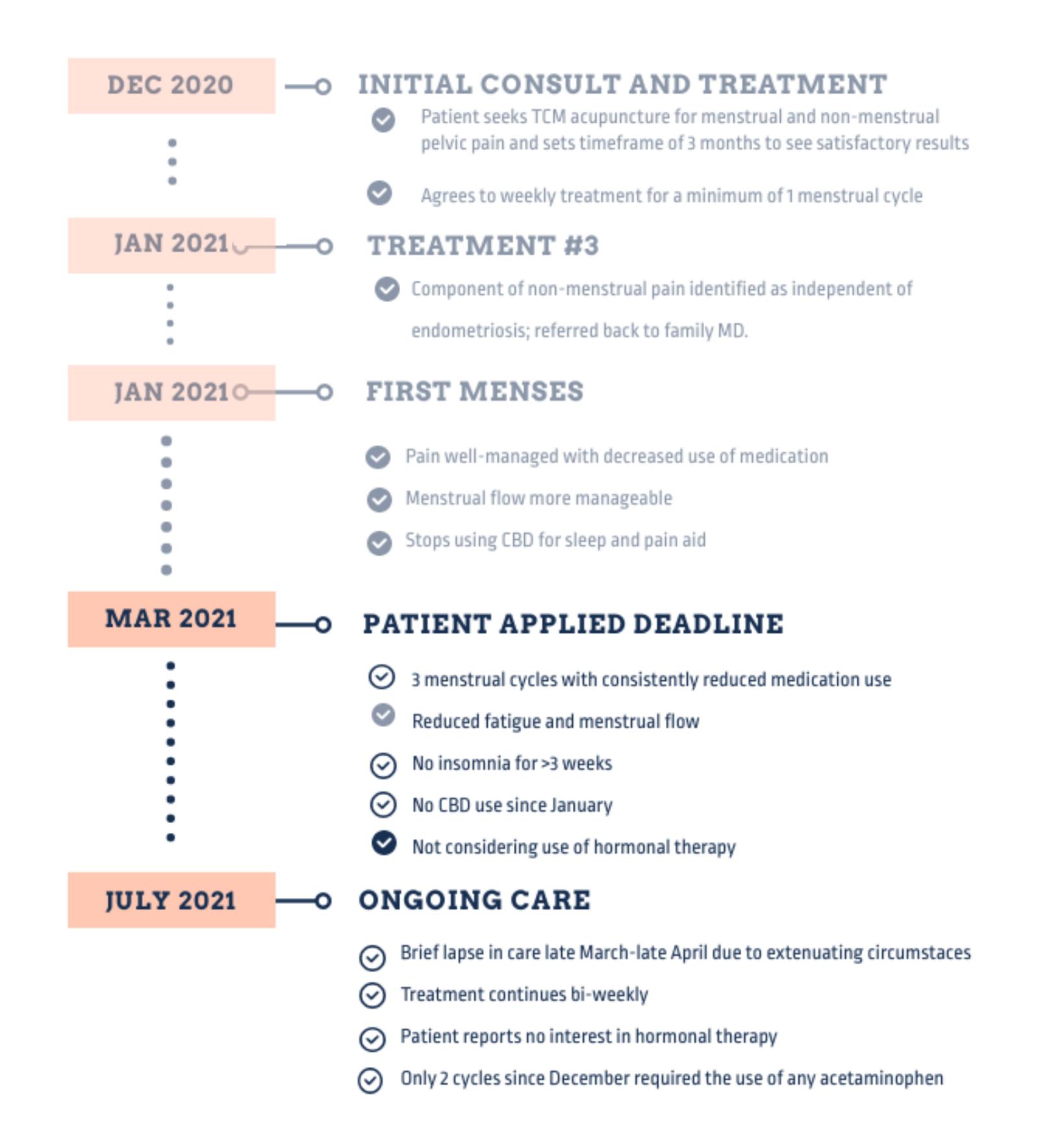
Dix, Anna R. R. Ac., MClSc (candidate), Walton, David M. PT PhD (Supervisor) Advanced Healthcare Practice (Interprofessional Pain Management), Western University, London, Ontario, Canada

Background

- An estimated 7% of menstruating people aged 18-49 in Canada live with a diagnosis of endometriosis with an average time to diagnosis of 5 years (Singh 2020).
- Conventional treatments are not curative and conservative treatments include hormonal therapy or surgical intervention.
- Purpose: To report on a case of a 40-year old nulliparous ciswoman with chronic pain due to endometriosis treated with Traditional Chinese Medicine (TCM) acupuncture.

Timeline

FIGURE 2. Timeline of interventions / outcomes



Narrative

- Diagnosed in 2003, the patient had undergone numerous conservative medical and surgical treatments for the treatment of dysmenorrhea and menorrhagia due to endometriosis, with varying results.
- The patient's goal was to experience sufficient menstrual and nonmenstrual pain relief within a 3-month timeframe.
- TCM acupuncture and tui na (TCM manual therapy) was performed weekly for 5 weeks, then bi-weekly on an ongoing basis.
- Acupoints chosen changed between treatments, but all were based on TCM diagnosis and their ability to calm the Shen (spirit), regulate Liver Qi, invigorate Liver Blood, and regulate the Dai Mai (Girdling Vessel). Distal points consistently needled: auricular microsystem points ShenMen, Endocrine Point, and Uterus; head/body points GV24(Shenting), LV5(Ligou), SP8(Diji) and ST36(Zusanli). Infrequently needled local points: ST29(Guilai), Zigong, CV7(Yinjiao).
- Tui na techniques included: digital ischemic pressure, gentle holding to facilitate fascial release, rocking and Grade 1 mobilization of the spine and hips.

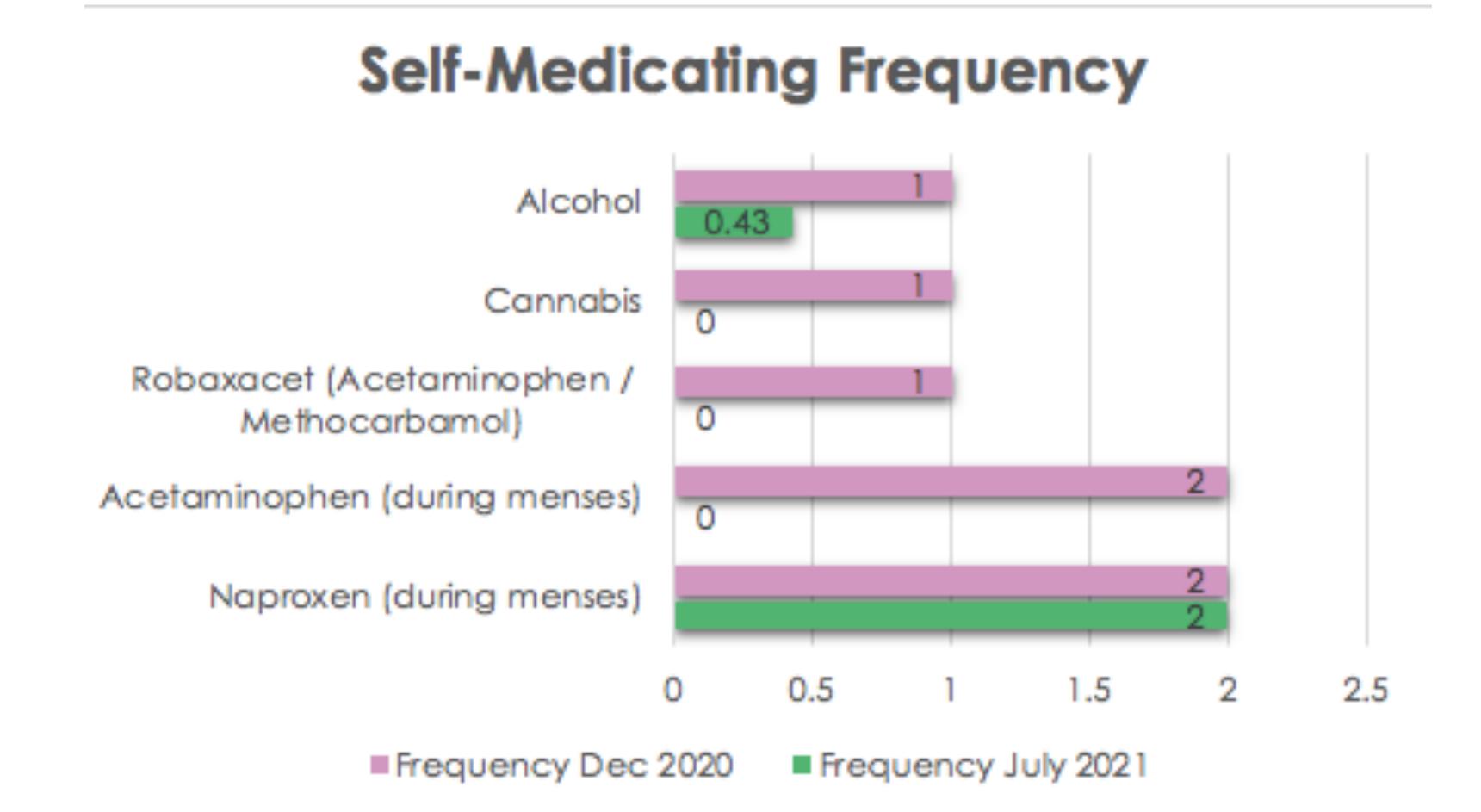
Outcomes

[TABLE 1]. Reported Symptom Outcomes

Cumpuntana	Symptom Description	Symptom Description
Symptom	December 2020	July 2021
Menstrual Pain	often debilitating; every cycle	decreased intensity; every cycle
Non-menstrual Pain	daily	infrequent; well- managed when occurs
Menorrhagia	every 2nd cycle	7 of 9 cycles moderate with 3 of those having one heavy day
Large blood clots	most cycles	only made notable on 2 cycles
Average cycle length	26 days	26 days +/- 3 days
Average duration of menses	7 days	inconsistent; 5-7 days
PMS	severe; every cycle	decreased intensity and duration; not every cycle
LLQ Pain	constant	infrequent
Insomnia	1/wk	<1/month
Mood fluctuations	daily	most days
Dyspareunia	significant pain with every penetrative sexual encounter	decreased intensity; every penetrative sexual encounter
Low Libido	consistent	slight improvement

Outcomes, cont'd.

[FIGURE 1]. Medication Use Outcomes



Perspective

- Qualitative and quantitative metrics were monitored for pain management, pain interference, and menstrual quality
- Patient's primary goal of pain control was achieved through weekly and bi-weekly TCM acupuncture treatments within the desired timeframe
- Mood concerns continue, with anxiety quite persistent, however she states, "Six months ago I was very overwhelmed by my health. I am definitely feeling like things are much more manageable now."

Discussion

- Having explored all conservative medical and surgical options available with semi-conservative surgery proposed, the patient was satisfied with the results of TCM acupuncture and the abatement of further intervention
- Ongoing treatment provided another 5 months of marked relief, decreased medication use and improved patient self-efficacy.
- Given the low-risk associated with the intervention, quantitative and qualitative research studies in the possible long-term efficacy of TCM acupuncture in the treatment of endometriosis pain and associated symptoms is indicated.