

## Medical Record

# A case of lymphedema in both lower extremities

## 双下肢淋巴水肿案

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### ABSTRACT

Patient suffering from lymphedema in both lower extremities was treated, acupuncture was carried out at Zhōngwǎn (中腕 CV 12), Shuǐfēn (水分 CV 9), ShuǐDào (水道 ST 28), Zú sān lǐ (足三里 ST 36), Yīnlíngquán (阴陵泉 SP 9), Sānyīnjiāo (三阴交 SP 6), Yánglíngquán (阳陵泉 GB 34), Tàichōng (太冲 LR 3) and Tàixī (太溪穴 KI 3), and local TDP irradiation was also carried out to improve local blood circulation and promote lymph fluid backflow, and thus effectively alleviate lymphedema in both lower extremities. The treatment courses were short and painless, and no adverse effect was detected.

**KEY WORDS:** lymphedema in both lower extremities; acupuncture therapy; TDP irradiation

Patient, female, an undergraduate student, 17 years old. She visited to our hospital for help on April 20, 2013. Her chief complaints were as followed: repeated lymphedema in both lower extremities for more than two years. Previous medical records: pruritus was detected in her both toes when she was grade three in a junior middle school five years ago, particularly in dorso ventral boundary of the feet. Prunus papules were occasionally found, the patient had to scratch them and yellow fluid can be detected after they were disrupted. Therefore, the patient turned to a local county hospital for treatments, she was diagnosed as fungal infection in feet and the symptoms were improved after she used Miconazole cream externally. The patient began to suffer from lymphedema in both lower extremities after she came to Xiamen University two years ago, depression could be detected after pressing and recovered after several minutes. The swelling symptoms were particularly obvious after walking at daytime, the patient felt skin tenseness in her both lower extremities and sense of pressure at squatting, and she occasionally felt soreness and distention in her both lower extremities. She had ever turned out the Yanwu Division of Zhongshan Hospital of Xiamen for examinations on renal functions and hepatic functions, B ultrasound

examinations and other examinations, no abnormality was detected. She was diagnosed as lymphedema in both lower extremities, and then she was subjected to elevation of her diseased lower extremities, anti-fungal treatments, massage and other treatments, and the symptoms were not significantly improved. The patient thus turned to our division for help on April 20, 2013, lymphedema in both lower extremities was detected, she complained about skin tenseness in her both lower extremities and sense of pressure at squatting, and she occasionally felt soreness and distention in her both lower extremities, she was depressed, her diets were normal, she felt distention in her gastric cavity occasionally, loose stool and normal urine. It was found in the physical examinations: depression can be detected when the both low extremities were pressed and then it recovered after about one minute, the skin color in her legs was normal, skin damages can be detected between her toes, secretion was not detected, her skin temperature was normal, and the foot arteries at both sides can be detected. Her tongue was pink, imprints of the teeth can be found at the edge, the lingual fur was thin and white, the right bar pulses were soggy. Her father had previous medical records for beriberi.

Diagnosis in western medicine: lymphedema in both lower extremities; diagnosis in TCM: wet beriberi (damp abundance due to spleen deficiency). Treatments: acupuncture therapy in combination with thermal design power (TDP). The acupoints were selected as followed: Zhōngwǎn (中脘 CV 12), Shuǐfēn (水分 CV 9), ShuǐDào (水道 ST 28), Zú sān lǐ (足三里 ST 36), Yīnlíngquán (阴陵泉 SP 9), Sānyīnjiāo (三阴交 SP 6), Yánglíngquán (阳陵泉 GB 34), Tàichōng (太冲 LR 3) and Tàixī (太溪穴 KI 3). Manipulation: the selected acupoints were sterilized as routine by using alcohol cotton balls, the acupuncture needles (the diameter was 0.28 mm and the length was 25 or 40 mm) were rapidly needled into the acupoints by bouncing-pin method, the mild reinforcing-reducing method was used for CV 12, rotate-twirl reinforcing and lift-thrust reinforcing methods were used for ST 36, SP 6 and KI 3, rotate-twirl reducing method was used for CV 9 and ST 28, rotate-twirl reducing and lift-thrust reducing methods were used for SP 9, GB 34 and LR 3, and her both low extremities were irradiated with TDP. Needling manipulation was carried out once for every 10 minutes during this procedure, and the needles were withdrawn after retention for 30 minutes, and then the treatments were terminated. The treatments were carried out once for every two days, the symptom of lymphedema in both lower extremities was significantly alleviated after the treatments for three times, no obvious depression was detected after pressing, the lymphedema in both lower extremities completely disappeared after the treatments for five times, tenseness in skin was no longer detected, the patient felt soreness in gastrocnemius muscles in her both lower extremities at squatting, the lymphedema in both lower extremities and the soreness completely disappeared after the treatments for eight times, no obvious discomfort was detected, and the lymphedema in both lower extremities was healed.

**Notes:** Lymphedema cases are frequently seen in extremities, among which lymphedema in lower extremities are the most frequently seen<sup>[1]</sup>. Two methods are mainly used for treating lymphedema in clinic: surgical methods and non-surgical methods. Non-surgical methods include heating and bandage, tie-up, local high temperature and nursing manuduction and others<sup>[2]</sup>. Surgical methods include excision and skin grafting, skin flap burying and others, but the practical operations are difficult, the risks are high, the operations may readily lead to scars, lymph leakage and other further problems, and the therapeutic efficacy of surgical methods and non-surgical methods is not satisfactory<sup>[3]</sup>. It is believed

in TCM that lymphedema may be induced by the infection of wind, cold, dampness, heat and other exogenous evils in the people showing decreased functions in spleen-stomach transportation-metabolism in transformation of body fluid, liver controlling free flow of *qi* and the kidney controlling water metabolism and other functions, or *qi* stagnation, stagnant blood and accumulation of other pathological products, further aggravation in the accumulation due to some other causes, which lead to disturbance in transformation of body fluid. The patient in the present study was subjected to acupuncture therapy in CV 12, CV 9, ST 28, ST 36, SP 9, SP 6, GB 34, LR 3 and KI 3 to treat lymphedema in her lower extremities, the treatment course was short, the therapeutic efficacy was rapid and significant, the patient was painless and did not suffer from adverse effects. CV 12 and CV 9 are both major acupoints for conception vessels in eight extra meridians, whose function is strengthening spleen, eliminating dampness, conducting body fluids and regulating transformation of body fluids; ST 28 and ST 36 are both major acupoints of foot-*yangming* stomach meridian, which can regulate spleen and stomach, supplement the center and boost *qi*, transmit and distribute the fluids; SP 9 is the *he*-sea point of spleen meridian, which can harmonize circulation of *qi* and blood, *qi* can impel body fluid to flow and then distribute fluids; SP 6 is the converging point of spleen meridian, liver meridian and kidney meridian in feet, compatibility of SP 6 and CV 9 can eliminate edema; GB 34 is the *he*-sea point of foot-*taiyang* gallbladder meridian, LR 3 is one of the major acupoints in foot-*jueyin* liver meridian, liver controls dispersion and regulates functional activities of *qi*, liver meridian and gallbladder meridian are exterior and interior related, they can synergistically dredge body fluids; KI 3 is one of the major acupoints in foot-*shaoyin* meridian, the kidney controls water metabolism and thus puncture at KI 3 can promote and regulate the functions of other viscera in transporting transforming and distributing body fluids. Combination of these acupoints can promote diuresis and expel dampness, activate blood circulation to dissipate blood stasis, and dredge the meridian. Local TDP irradiation can accelerate the repairing of micro-circulation system, improve local blood circulation, promote lymph fluid backstreaming and alleviate lymphedema in lower extremities.

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#### ABSTRACT IN CHINESE

[摘要] 治疗双下肢淋巴水肿患者1例。采用针刺中腕、水分、水道、足三里、阴陵泉、三阴交、阳陵泉、太冲、太溪穴，配以TDP局部照射，改善局部血液循环，促进淋巴液的回流，从而有效减轻双下肢水肿。疗程短，效果显著，无痛苦，无副作用。

[关键词] 双下肢淋巴水肿 针刺疗法 TDP照射

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people may fall asleep; when *yang qi* transforms from static into active, people may be conscious, and it is the consequence of natural and regular transformation of *yin qi* and *yang qi*. Therefore, puncture at stimulation points on head can regulate *qi* and blood all over the body by the transduction of meridians in order to regulate *yin - yang* activities of viscera, adjust *yin - yang* balance of daytime and night, introduce *yin* into *yang*, and achieve the efficacy for treating insomnia.

Moreover, with the persistent efforts of acupuncture physicians in the foreign-aid medical teams in Uganda in the past 30 years, acupuncture therapy has been utilized in diagnosis and treatments on numerous difficult miscellaneous diseases for local residents and is highly favored due to its therapeutic efficacy. Therefore, the therapeutic efficacy for the treatment on patients with insomnia in Uganda is significant, convenient and liable to perform; patients believe in the therapeutic efficacy and it deserves to be further generalized.

#### ABSTRACT IN CHINESE

[摘要] 目的：观察头针治疗乌干达失眠病人的临床疗效。方法：对78例失眠患者给予头针治疗，选择额中线、额旁1线、顶中线、顶旁1线，隔天治疗1次，10次为一疗程，治疗后观察疗效。结果：治愈62例，显效8例，有效7例，无效1例，总有效率为98.72%。结论：头针治疗对乌干达失眠病人有确切疗效。

[关键词] 失眠 头针 乌干达

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