Review

A Clinical Survey of Acupuncture Slimming

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Acupuncture is affirmatively effective in treating obesity with its flexible point selection and various methods without toxic and side effects. This review will focus on different therapeutic methods and academic thoughts in acupuncture slimming and evaluate its current state and prospect.

Key Words: Obesity; Acupuncture Therapy; Review

Along with the improvement of the living standard, obesity has become a popular disease in modern society, and attracted people’s attention. How to prevent and treat the disease has become a hot subject for investigation. Acupuncture known as a green therapy, is simple in manipulation, effective for reducing weight with no toxic and side effects. In recent years, research on acupuncture slimming has widely been conducted. Advances in its clinical investigation in the past 10 years are reviewed in this paper.

CLASSIFICATION ACCORDING TO THERAPEUTIC METHODS

Simple body acupuncture

In applying simple body acupuncture, needling maneuvers were stressed. Chen Shiwei et al. treated 198 cases of obesity, in which Daheng (SP 15), Tianshu (ST 25), Daju (ST 27), Siman (KI 14), Shuidao (ST 28), Qixue (KI 13), Shimen (CV 5) and Guanyuan (CV 4) were selected as main points, and secondary points were added according to symptoms. A lifting-thrusting and twirling method was applied and needles were retained for 30 minutes. The treatment was given once daily and 15 sessions constituted a therapeutic course with an interval of 10 days between two courses. Meanwhile, sweet and greasy food was appropriately confined. Therapeutic effects were estimated after two courses of treatments. A total effective rate of 90.0% was achieved. By using Hu’s water-points therapy, Li Ji et al. treated 72 cases of simple obesity, which were divided into two groups: Henggu (KI 11), Dahe (KI 12), Qixue (KI 13), Siman (KI 14), Zhongzhu (KI 15) and Zhigou (TE 6) were used in the first group, and Dachangshu (BL 25), Guanyuanshu (BL 26), Xiaochangshu (BL 27), Pangguangshu (BL 28), Biaihuanshu (BL 30) and Taixi (KI 3) selected in the second group, among which bilateral points were alternately used. A lifting-thrusting and twirling uniform reinforcing-reducing method was applied in the first two weeks, which was followed by a lifting-thrusting and twirling method with the intensity tolerable to patients. Needles were retained for 30 minutes, during which needles were manipulated twice. The treatment was given 5 times weekly in the first two weeks and then followed by 3 times a week, and 3 months of treatments constituted a therapeutic course. Short-term results showed that 16 cases were clinically cured, 18 cases markedly effective, 34 cases effective and 4 cases failed.

Simple electroacupuncture

Meng Lijuan et al. treated 180 cases of female simple obesity by using electroacupuncture (EA) with joint use of points based on differentiation of symptoms and signs, and also treated 60 cases by acupuncture instead of EA as control. Zhongwan (CV 12), Tianshu (ST 25), Guanyuan (CV 4) and Zusanli (ST 36) were selected as main points in both groups.
In the treatment group, points were combined according to the syndrome differentiation and punctured with method of reinforcement and reduction. Tianshu (ST 25) was punctured bilaterally and the stimulated by G6805 Electric Apparatus with disperse and dense wave and the intensity tolerable to patients. Needles were retained for 40 minutes, and the treatment was given 5 times a week followed by a 2-day-interval in both groups, and 20 sessions made up of a therapeutic course. The total effective rate of 97.8% and 88.0% was achieved in the treatment and control group respectively. It was considered that deep needle insertion in Tianshu (ST 25) plus EA had the functions not only to intensify the effect of point stimulation, but also to accelerate lipodiersis in the abdomen, which was especially beneficial to the patients with central obesity. Yin Zhifang selected Zhongwan (CV 12), Daheng (SP 15), Guanyuan (CV 4) and Sanyinjiao (SP 6) as main points, and added secondary points according to symptoms and signs. After the arrival of qi by lifting and thrusting for reinforcing and reducing, the main points were connected to a G6805-2 Electrical Apparatus with the stimulation intensity tolerable to patients and the frequency of 150-200/min for 20 minutes, during retention, needles were manipulated once. The treatment was given once every other day, and 10 treatments constituted a therapeutic course with an interval of 3 days between two courses, and two courses of treatments were given. The total effective rate was 87.5%. It was found that acupuncture was rather effective for the patients aged 25-50, and the effect was better for males and those with short course of disease. Further weight loss was found in some patients within 2 weeks after treatment. By using EA to treat 50 cases of simple obesity of excess syndrome, Yang Jinshan selected Quchi (LI 11), Zusanli (ST 36), Tianshu (ST 25) and Zhongwan (CV 12) as main points and secondary points according to differentiation of symptoms and signs. A G6805 Electric Apparatus was applied with continuous waves and 20/sec in frequency and intensity tolerable to patients. The treatment was given 6 times weekly, and 30 days of treatments constituted a therapeutic course. After one course of treatment, the total effective rate reached 94.0%.

**Simple ear-acupuncture**

Clinically, Endocrine, Subcortex, Sympathesis, Sanjiao, Lung, Spleen, Stomach and other ear acupoints are generally used as main ear points for embedding with modification of ear acupoints according to symptoms and signs. Qi Shulan et al. used Liver, Spleen, Kidney, Lung, Stomach, External Nose, Endocrine and Subcortex as main ear acupoints combined with modified ear acupoints. The patients were divided into two groups: Group I and Group II. For Group I, bilateral points were alternately used, and for Group II, bilateral points were simultaneously used. The ear acupoints were pressed for 3-4 minutes, 15-20 minutes before meals; the seeds were replaced once every 3-5 days with a day off before replacement. One month of treatments was taken as a therapeutic course, after which the therapeutic effects were estimated. The results showed that a total effective rate was 85.0%, and there was no significant difference in therapeutic effects between the two groups. Hao Zhongyao et al. divided the patients into two groups. The first group of the ear acupoints: excitation point, thalamus, kidney, lung, stomach and the points corresponding to the affected areas, and the second group: Forehead, Hunger, Sanjiao, Large Intestine, Spleen and related points. The two groups of acupoints were alternately used, and the ear points were bilaterally used for 3-4 days. The first group of acupoints was used on Mondays, and the second one used on Thursdays. The points were pressed three times every day by the patients themselves to cause pain sensation, and 15 sessions constituted a therapeutic course. The total effective rate was 94.0%.

**Other Therapies**

Thread imbedding therapy: By catgut imbedding at acupoints for slimming in 60 cases, Qi Fengjun et al.
selected Zhongwan (CV 12), Tianshu (ST 25), Shuidao (ST 28), Quchi (LI 11), Zusanli (ST 36), Fenglong (ST 40), Shangjuxu (ST 37) and Xiajuxu (ST 39), with modification of points according to symptoms and signs. Usually, 7-13 points were used, depending on the severity of obesity. Generally, thread imbedding was made once every half a month, and for those with severe obesity, thread imbedding can be made once every 10 days. The above-mentioned points can be used alternately. The total effective rate was 90.0%, and the effect was even better for the patients with more severe obesity.

Meng Shan et al. selected Shangjuxu (ST 37), Fenglong (ST 40), Sanyinjiao (SP 6), Gongsun (SP 4), Liangqiu (ST 34), Tianshu (ST 25), Pishu (BL 20), Weishu (BL 21) and Dachangshu (BL 25) plus A-shi points in local areas for catgut imbedding, which was made once weekly, and one month of treatments constituted a therapeutic course. Results were estimated after three courses of treatments, and compared with those treated by acupuncture as control. The total effective rate of 97.9% and 87.5% was obtained in the catgut implantation group and in the control group respectively with a significant difference between the two groups.

Magnetized needling: Using self-made magnetized needles made of neodymium, iron and other permanent-magnetic materials, Zhang Li et al. treated simple obesity complicated with hyperlipemia by selecting Fujie (SP 14), Tianshu (ST 25), Zusanli (ST 36) and Fenglong (ST 40) with point modification according to differentiation of symptoms and signs. After the arrival of qi, the handles of needles inserted in Fujie (SP 14) and Fenglong (ST 40) were covered with a Magnetic Apparatus with 5000 gauss in magnetic strength, and the needles were retained for 30 minutes. The treatment was given once daily and 10 treatments constituted a therapeutic course. After two courses of treatments, the total effective rate was 86.7%.

Eight methods of intelligent turtle (for selecting acupoints): Piao Lianyou et al. used the points selected according to day and time of needling as the main points and combined with the points connecting the Eight Extra Channels as secondary points, such as Neiguan (PC 6) with Gongsun (SP 4), Houxi (SI 3) with Shenmai (BL 62), Lieque (LU 7) with Zhaohai (KI 6), and Waiguan (TE 5) with Zulinqii (GB 41), and made point modification based on symptoms and signs. Needling maneuvers were selected according to the principle of reducing for the excess and reinforcing for deficiency. Needles were retained for 30 minutes. The treatment was given once daily and 5 treatments constituted a therapeutic course with an interval of 2 days between two courses. The total effective rate was 90.0%.

Acupuncture with elongated needles: Wang Chengshan et al. selected Qihai (CV 6), Guanyuan (CV 4), Shuidao (ST 28), Zhongwan (CV 12), Tituo (Extra), Tianshu (ST 25), Daheng (SP 15) and Zusanli (ST 36) to treat 24 cases of obesity. Elongated needles with 5 cun in length were inserted into the abdominal points to the depth of 3.5-4 cun. Twirling reducing method was used for Qihai (CV 6), Guanyuan (CV 4), Shuidao (ST 28), and Tituo (Extra) to cause needling sensation radiating toward the umbilicus, and uniform reinforcing-reducing method used for Tianshu (ST 25), Daheng (SP 15) and Zhongwan (CV 12) to cause local needling sensation. For Zusanli (ST 36), the needle was inserted to the depth of 1.5-2 cun, and twirling reinforcing method was performed. According to differentiation of
symptoms and signs, some of the other points may be selected, and appropriate reinforcing or reducing method can be used. Twelve treatments constituted a therapeutic course. After 1-4 courses of treatments, weight reduction by $\geq 12$ kg was found in 20 cases, and that by $\geq 6$ kg found in 4 cases, and the related complications were somewhat controlled.

**Moxibustion by light irradiation:** Using a self-made light moxibustion apparatus for slimming, Yu Changqin et al. treated simple obesity in children, and compared its effect with that by using ear point embedding. Zhongwan (CV 12), Juque (CV 14), Zusanli (ST 36), Tianshu (ST 25), Daheng (SP 15), Qihai (CV 6), Guanyuan (CV 4), Fenglong (ST 40) and Yinlingquan (SP 9) were selected, and 3-5 of them were used each time. Each point was irradiated for 2-3 minutes. The treatment was given once daily, and 3 months of treatments made up of a therapeutic course. The results showed that light moxibustion was significantly superior to ear point embedding ($P<0.01$).

**Electrical stimulation through cutaneous nerve:** By using Han’s Electrical Stimulator through Cutaneous Nerve, Tian Derun et al. treated 16 cases of simple obesity. Liangmen (ST 21), Tianshu (ST 25), Shuidao (ST 28), left Liangqiu (ST 34) and Gongsun (SP 4) were stimulated for 30 minutes. The treatment was given 3 times weekly, and changes of body weight were recorded. It was shown that their body weight was gradually reduced after treatment by Han’s Electrical Stimulator through cutaneous nerve without diet control. After the treatment for 12 weeks, their body weight was reduced by 2.06±0.31 kg, with a reduction rate of 2.78±0.4% ($P<0.01$). After stop of the treatment for 4 weeks due to Spring Festival, their body weight slightly increased. Then, the treatment by Han’s Electrical Stimulator through cutaneous nerve was given again for another 15 weeks, and the body weight was lowered by 2.81±0.68 kg, with a reduction rate of 3.90±0.40%, compared with that before treatment. It indicated that Han’s Electrical Stimulator through cutaneous nerve was effective to control weight, and better effects may be achieved by combination with restrictive diet and exercise.

**Integrated therapies**

**Body acupuncture combined with ear acupuncture:** In treating 72 cases of obesity, Yao Huiyan et al. basically selected Zhongwan (CV 12), Shuifen (CV 9), Yujiao (CV 7), Guanyuan (CV 4), Tianshu (ST 25) and Shuidao (ST 28), and added Shangjuxu (ST 28) and Zhigou (TE 6) for the patients with constipation due to dryness of the intestine. Ear points: Large Intestine, Constipation, Sanjiao and Hunger Point were used. Shenshu (BL 23), Pishu (BL 20), Sanyinjiao (SP 6) and Taixi (KI 3), and the ear points: Kidney and Spleen were added for those with qi deficiency and yin deficiency. Weishu (BL 21), Pishu (BL 20), Zhangmen (LR 13), Zusanli (ST 36) and Sanyinjiao (SP 6), plus ear points: Stomach and Spleen were added for those with qi deficiency in Spleen and Stomach. Secondary points were selected according to differentiation of symptoms and signs. Reinforcing and reducing maneuvers were used. Twenty treatments made up of a therapeutic course. The treatment was given once daily on the first ten days, and later given once every other day. Needles were retained for 25 minutes. Ear point embedding was replaced once every 5 days. The ear points were pressed for 1-2 minutes, 4-5 times every day, and 6 treatments constituted a therapeutic course. The total effective rate was 97.2%. Wang Su’e et al. selected Zhongwan (CV 12), Shuifen (CV 9), Qihai (CV 6), Tianshu (ST 25), Wailing (ST 26), Huaroumen (ST 24), Zusanli (ST 36), Fenglong (ST 40), Quchi (LI 11), Sanyinjiao (SP 6), Liangqiu (ST 34), Yinlingquan (SP 9), Taichong (LR 3), Gongsun (SP 4) and Taixi (KI 3), and reinforcing and reducing maneuvers were chosen based on syndrome differentiation. Needles were retained for 30 minutes. The treatment was given 6 times weekly with one day off on Sundays, and 4 weeks of treatments constituted a therapeutic course. The ear points: Endocrine, Spleen, Kidney, Hunger Point, Large Intestine, Sanjiao, Constipation, Brainstem, Esophagus, Shenmen and thyroid were chosen. 5-8 of
them were used each time, and replacement was made twice weekly, and 8 treatments constituted a therapeutic course. The ear points were pressed by the patients themselves before meals to cause soreness and distending sensation to the extent tolerable to them. A total effective rate of 96.71% was achieved.

Electroacupuncture combined with auricular-plaster therapy: Wei Qunli et al. treated obesity according to differentiation. For the cases with stomach-intestine heat syndrome, Quchi (LI 11) Hegu (LI 4), Zusanli (ST 36), Shangjuxu (ST 37), and Neiting (ST 44) were selected, for those with retention of damp due to deficiency of the spleen, Zusanli (ST 36), Fenglong (ST 40), Sanyinjiao (SP 6), Yinlingquan (SP 9), Zhongwan (CV 12) and Qihai (CV 6) selected, for those with deficiency of kidney qi, Shenshu (BL 23), Guanyuan (CV 4), Zhigou (TE 6) and Zhaohai (KI 6) selected, and for those with stagnation of the liver qi, Ganshu (BL 18), Ququan (LR 8), Xiaxi (GB 43) and Taichong (LR 3) selected. Needles were retained for 30 minutes each time. The treatment was given once every other day. 12 sessions made up of a therapeutic course. Meanwhile, ear point taped with seed of Vaccaria segetalis was combined, in which the Hunger Point located in the middle of the external tragus, Endocrine, Lung and Shenmen were selected, and the bilateral points were alternately used. The treatment was given once every other day, and 12 sessions constituted a therapeutic course. A 2-year-follow-up was made in the 98 cases treated with a total effective rate of 88.8%. Kang Suobin et al. selected Tianshu (ST 25), Guanyuan (CV 4), Sanyinjiao (SP 6), Zusanli (ST 36) and Fenglong (ST 40) as main points, and combined them with ear points: Shenmen, Endocrine, Spleen, Stomach, Sanjiao, Large Intestine and Brain, and secondary points based on syndrome differentiation. After having needling sensation, a G68052II Electrical Apparatus was used with disperse and dense waves and 50/100 Hz in frequency and the intensity tolerable to the patients. For the points without being connected with the apparatus, needling manipulation was made 2-3 times for 2-3 minutes each time during a 30-minute needling retention. The treatment was given once daily on the first 5 days, and then given once every other day. One month of treatments constituted a therapeutic course. Ear point for auricular-plaster was bilaterally alternated once every 3 days, and 10 treatments made up of a therapeutic course. Results obtained after 2 courses of treatments showed that the total effective rate was 88.0%.

Body acupuncture combined with ear acupuncture plus Tending Diancibo Pu (TDP) irradiation: Yu Aoshuang et al. selected the following points in the upper limb as Binao (LI 14), Quchi (LI 11), Neiguan (PC 6) and Hegu (LI 4), those in the lower limb as Futu (ST 32), Xuehai (SP 10), Liangqiu (ST 34), Zusanli (ST 36), Fenglong (ST 40), Sanyinjiao (SP 6), Gongsun (SP 4) and Taichong (LR 3), those in the abdomen as Zhongwan (CV 12), Xiawan (CV 10), Qihai (CV 6), Guanyuan (CV 4), Tianshu (ST 25), Daju (ST 27), Huaroumen (ST 24) and Dabeng (SP 15), and those on the back like Feishu (BL 13), Xinshu (BL 15), Geshu (BL 17), Ganshu (BL 18), Danshu (BL 19), Pishu (BL 20), Weishu (BL 21), Shenshu (BL 23), Dachangshu (BL 25) and Xiaochangshu (BL 27). The points on the back were alternately used with those in the limbs. Lifting, thrusting and twirling maneuvers were chosen for reinforcing or reducing according to differentiation of symptoms and signs, and after the arrival of qi, needles were retained for 45 minutes and manipulated for 4 times. The treatment was given once every other day. Irradiation by TDP was applied on the abdomen for 45 minutes each time. The ear points Hunger, Thirsty, Endocrine, Sanjiao, Mouth, Spleen, Stomach and Large Intestine were chosen, and bilateral points were alternately used and auricular-plaster was replaced once every 3 days. The ear points were pressed for 10 minutes before 3 meals every day. Two months of treatments constituted a therapeutic course. Results obtained after 1 course of treatments showed that the total effective rate was 91.6%. Zhao Haiyin chose Tianshu (ST 25),
Daheng (SP 15), Zhongwan (CV 12), Fenglong (ST 40), Yinlingquan (SP 9), Fujie (SP 14) and Taiyi (ST 23) as main points, and other points according to differentiation of symptoms and signs. After achievement of needling sensation, a reinforcing method by lifting, thrusting and twirling was applied at Zhongwan (CV 12) and Yinlingquan (SP 9), and a reducing method applied at Fenglong (ST 40) and Fujie (SP 14), and uniform reinforcing-reducing method applied at the other points. Then, a G68052-2 Electrical Apparatus was used with the frequency and intensity tolerable to the patients. Needles remained for 40 minutes, during which a CQ27 TDP was applied over the abdomen. The ear points: Endocrine, Shenmen, Spleen, Stomach and Abdomen were bilaterally and alternately used and auricular-plaster was replaced once every 2-3 days. The patients were asked to press the points 100 times before each meal. The treatment was given once daily on the first 3 days, and then 3 times weekly. Fifteen acupuncture treatments comprised a therapeutic course, and the therapeutic effects were estimated after one course of treatments. A total effective rate of 84.4% was achieved.

Body acupuncture combined with ear acupuncture plus cupping: Liu Yunzhu selected Liangqiu (ST 34), Gongsun (SP 4), Tianshu (ST 25) and Zhigou (TE 6), and manipulation of mild thrusting and strong lifting and twirling with large amplitude and high frequency was carried out to cause intensive needling sensation, following which a G68052II Electrical Apparatus was used with continuous waves and the intensity tolerable to the patients, and needles were remained for 30 minutes. After needle withdrawal, slide-cupping was applied on abdomen and was slid up and down, leftward and rightward for several times to cause the skin to become flushed. The ear points: Mouth, Stomach, Lung, Apleen, Sanjiao, Endocrine, Spleen and Kidney, and acupuncture at Zhongwan (CV 12), Tianshu (ST 25), Qihai (CV 6),Guanyuan (CV 4), Huaroumen (ST 24), Wailing (ST 26), Shuifen (CV 9), Shuidao (ST 28), Yinjiao (CV 7), Daimai (GB 26), Shenshu (BL 23), Dachangshu (BL 25), Pangguangshu (BL 28) and Yaoyan (EX-B7), and other points according to symptoms, and moxibustion at Shenque (CV 8) and its surrounding area, and achieved a total effective rate of 89.3% after 2-4 courses of treatments. In treating 60 cases of obesity, Xi Haifong applied point-penetration from Taiyi (ST 23) in the upper abdomen through Xiawan (CV 10), from Fujie (SP 14) in the
lower abdomen through Daju (ST 27), and plus modified points based on differentiation of symptoms and signs. Following point-penetration applied in the main points, a G68052-2 Electrical Apparatus was used to produce stimulation. Bilateral ear points: Spleen, Stomach and Hunger Point were alternately used, and modification was made according to symptoms. In addition, indirect moxibustion with salt and ginger was applied at Shenque (CV 8). 2 cones were used for each treatment. After one course of treatments, a total effective rate of 93.3% was obtained.

Moxibustion with warming needle: Yang Jinshan used moxibustion with warming needle to treat 32 cases of simple obesity of deficiency type by selecting Qihai (CV 6), Guanyuan (CV 4), Zusanli (ST 36), Tianshu (ST 25), Yinlingquan (SP 9), and Sanyinjiao (SP 6) as the main points and secondary points according to differentiation of symptoms and signs. Following the arrival of qi, 1-2 lighted moxa sticks about 2 cm in length were consecutively put on the handles of the needles of the 2-3 main points, and the other needles were retained as usual. The treatment was given 6 times weekly, and 30 sessions constituted a therapeutic course. A total effective rate of 90.6% was achieved after one course of treatments.

Weight Reduction Related to Menstrual Cycle
Based on the situation that obesity occurs mostly in females with physiological cycle, Cai Zhenjiang treated 1068 female cases of obesity in relation to menstrual cycle. Zhongwan (CV 12), Shuifen (CV 9), Tianshu (ST 25), Huaroumen (ST 24), Wailing (ST 26), Guanyuan (CV 4), Shuidao (ST 28), Fengshi (GB 31) and Diji (SP 8) were used as conventional points, and Hegu (LI 4), Taichong (LR 3), Zusanli (ST 36) and Sanyinjiao (SP 6) were added during menstrual period, and Taixi (KI 3), Shenshu (BL 23) and Pishu (BL 20) added at the late stage of the period. After one week of treatment, conventional points were used till the onset of the next period. Taixi (KI 3), Zhongji (CV 3), Geshu (BL 17) were added for the patients with amenorrhea, menostasis or menstrual disorder. The ear points: Lung, Large Intestine, Shenmen, Thyroid, Stomach, Spleen, Sanjiao, Endocrine, Hunger Point, Pituitary, Kidney and Esophagus were selected, and 4-5 of them were used each time, and the patients were asked to press the points before 3 meals every day. A total effective rate of 84.7% was obtained. This method was especially appropriated to

CLASSIFICATION ACCORDING TO ACADEMIC THOUGHTS OBESITY WITH PAIN
Obesity with pain, also named as Dercum’s disease, which is seldom seen in China. It is characterized by occurrence of painful subcutaneous nodules in flaccid areas on body surface, especially around joints, which affect patients’ normal activities. By an integrated therapy including electrical stimulation with continuous waves and the intensity tolerable to patients by a G6805 Electrical Apparatus combined with cupping, ear acupuncture and body acupuncture, Chen Jianfei applied surrounding needling at the area around the painful nodes to treat 20 cases of obesity with pain, and achieved a total effective rate of 85.0%.
over-weight females aged from 18 to 40 years. The present therapy was to reduce weight by regulating hormone levels to control weight increase before menstruation, and improve health during the menses, and cause body weight to drop after menstruation.

**Obesity due to Stress**

Research made by The Rockefeller University of New York, U.S.A. showed that excessive stress could cause obesity. In treating simple obesity, Li Xueyi et al. found that hyperphagia, headache, and dysphoria might be caused by mental or environmental stress, which might result in generation or aggravation of obesity, especially in females. It could be alleviated by relief of stress. The principle of treating the liver and stomach simultaneously was adopted, and Liangmen (ST 21), Tianshu (ST 25), Fenglong (ST 40), Taichong (LR 3), Ganshu (BL 18), Pishu (BL 20), Weishu (BL 21) and Qihai (CV 6) were selected. Liangmen (ST 21), Tianshu (ST 25), Fenglong (ST 40) and Taichong (LR 3) were punctured with reducing maneuver. Ganshu (BL 18), Pishu (BL 20), Weishu (BL 21) and Qihai (CV 6) were punctured with reinforcing maneuver. Needles were retained for 30 minutes, during which needles were manipulated once every 5 minutes. The treatment was given once every other day, and 30 treatments constituted a therapeutic course. After one course of treatments, a total effective rate of 81.8% was achieved.

**COMMENTS**

To sum up, since acupuncture slimming is easy to operate, economic in cost, safe with affirmative effects, by which it can improve patients’ life quality and lessen generation of complication, it is worth popularizing. However, in its clinical studies the following shortcomings need to be resolved: 1) Lack of uniform criteria for inclusion and therapeutic effects, and lack of indices for estimation of effects which causes different effects reported. 2) Individual application of a single method without comparison of various methods resulting in difficulty in finding an accredited and effective scheme for general use. 3) Acupuncture prescriptions pertinent to different types of obesity in various affected parts of the body are needed. 4) Long-term effects and rebound reported by periodic follow-up are seldom seen. There should be further studies to resolve the above-mentioned problems so as to find a more scientific and standard acupuncture therapy to treat obesity.

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