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Acupuncture Treatment of Numbness of the Lower Extremity

Hong, Soon Baek (Oriental Medical Doctor)

Patient: Male, 67 years old, Pusan, Korea

Main complaint: Numbness of the lower limb, hypertension

Patient history: The patient was hospitalized with symptoms of walk impairment, numbness, and anxiety due to collapse on the ground while hiking. He was given a diagnosis of paralysis caused by hypertension and anti-hypertension. I was invited to examine him. On the examination, there was no evidence of hemiplegia-caused hypertension or cerebral hemorrhage. The 5th vertebrae and lumbosacral area were tender when finger tip pressure was applied. His left toes and podarthrum had no problem in extension and contraction. However, there was motion impairment around the hip joint. The paralysis worsened gradually during or after walking. He suffered from severe pain, like an electric shock, along the urinary bladder meridian and the gall bladder meridian.

Diagnosis: The clinical observations appeared to confirm that the sciatic nerve had been damaged by the external trauma due to collapsing on the ground. The patient was told that all complaints were caused by nothing but inflammation and that acupuncture would result in complete and permanent recovery, but he was very suspicious of the efficacy of acupuncture and wondered how he could possibly be treated in a short time although the Western medicine doctor said it would take 3–4 months to recover. Worrying about becoming disabled because of maltreatment, at first, he rejected acupuncture treatment. As his brother persuaded him to try it once and as I showed confidence, he finally changed his mind.

Treatment: The treatment consisted of GV8 at 9th, 10th thoracic, Shangshen point at 5th vertebrae and lumbar sacrum, GV16, and UB40. When the leg was moved, the needle at UB40 wasn't stable, so the author inserted the needle deeply into 1 cun below UB40, which is called Xia WeiZhong (UB40 below). UB56, UB57, UB62 were needled on the first occasion. For a healthy side, acupuncture was applied at UB62, UB60, and UB56 in turn with a silver needle for sedation. Especially, when the needle was inserted into UB40, the patient screamed loudly, so I removed it quickly. He said that the pain had subsidized faster than he had expected; the presence of pain and paralysis was much relieved, and the injured leg could be moved. Besides acupuncture, massage therapy along the urinary bladder was administered. I asked his family to help him stand up and walk. Putting weight on injured leg, even though there was a body tremor, he could step on the ground. Soon, without help, he started to walk step by step forward. The patient was fully satisfied with the result of treatment saying that he found acupuncture to be just like a miracle. Next morning, I called and checked the patient's prognosis. The patient was able to resume all activities, and cramps and knotted sensation were endurable. He felt like he had been reborn.
