

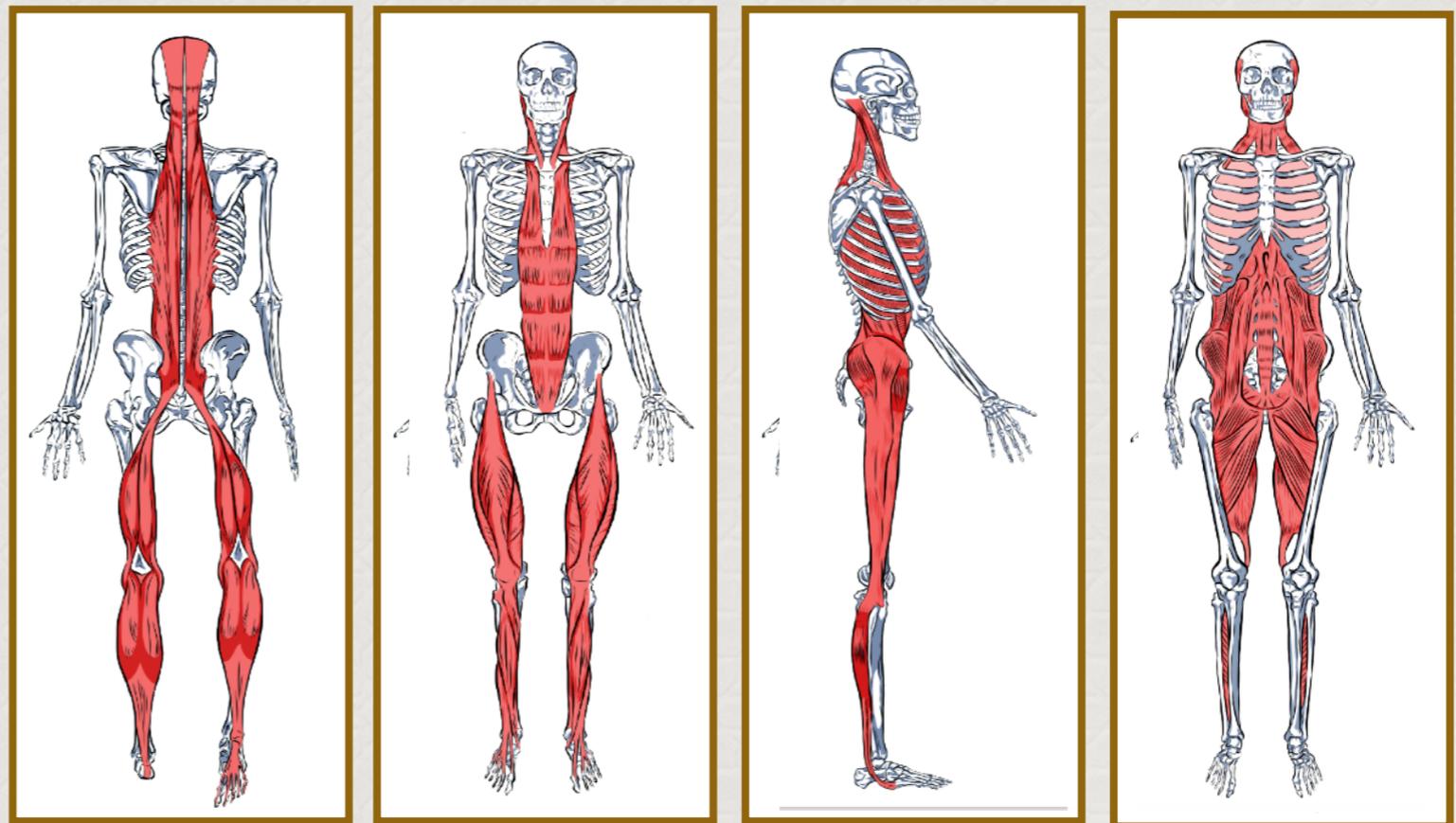
Acupuncture & Myofascial Lines for the Hips, Pelvis, & Low Back

James Spears M.S.

Intro

- The Anatomy of 4 for Treating the Hip. Posterior, Anterior, Lateral, and Deep (Groin) Regions.
- Movement is necessary for getting good responses for treating the hips.
- Understand how to use arm and leg points and when they will and will not be effective.
- Non-local (distal) needling vs. local or direct needling.
- Start with distal needling & move proximally or toward the area of pain.

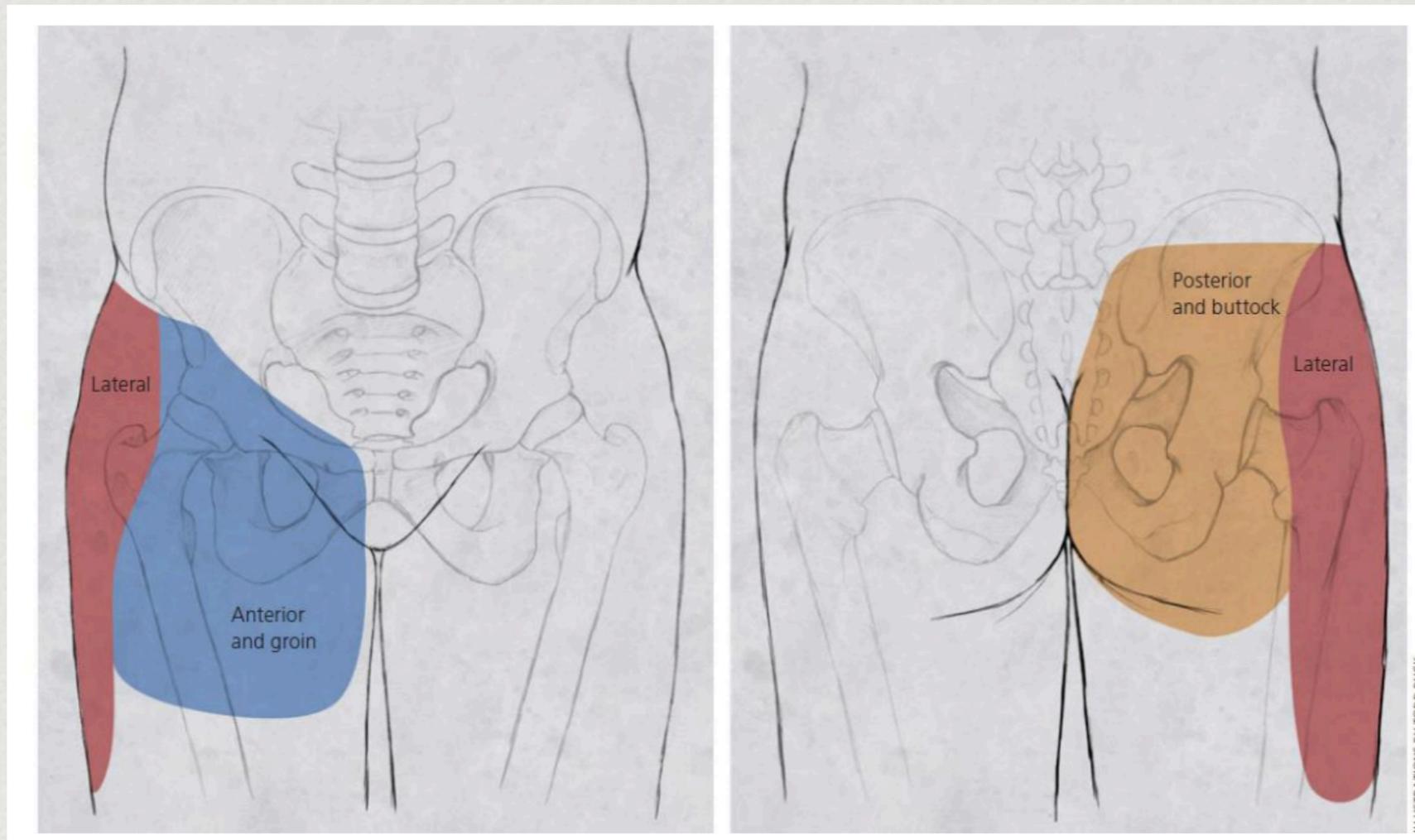
What meridians are affected? Tan's 6 Systems



Images derived from:
Tom Myers, Anatomy Trains, Elsevier Publishing

3 Categories of Patients Based on Responsiveness

Hip Pain & System 6



Wilson JJ, Furukawa M. Evaluation of the patient with hip pain. *American Family Physician*. 2014; 89(1): 27 - 34
From: *Diagnostic Approach to Hip Pain*: Zoe J. Foster, M.D., 2018

The Yin - Yang of Contraction & Strain

Pain may be felt in areas of muscular contraction or strain. For any muscle that shortens there are antagonists which lengthen. Chronic contractions and strains effect the opposing muscle groups. Understanding these dynamics will allow you to have more accurate diagnoses, reduce adverse needle reactions, and get you better clinical results,

Direct and local needling into contractions and strains vary according to:

- ★ Acute Sprains and Strains (lengthening of the muscles) & Acute Contractions and Muscle Spasms - Don't needle locally for most acute conditions. Start with non-local system 1.
- ★ Chronic Contractions & Strains and Trigger Points - These often respond with local needling, but local needling may also aggravate some conditions, especially if it is a neuropathic condition and in cases of hypertonicity. Structural and postural changes are often necessary. System 6.

1. Chronic contraction or strengthening in one group of muscles can cause the antagonist to become weak and strained.

2. Discuss how this relates to various patterns and disorders of the hips and back.

3. Treatment Principle: Ease chronic contractions and strengthen where there is strain.

Tensegrity

Tensegrity = tension + integrity. Describes systems of compressed parts in a net of tension, and how tension moves through a system. Like the meridians the fascia are an integrated system that connects the entire body.

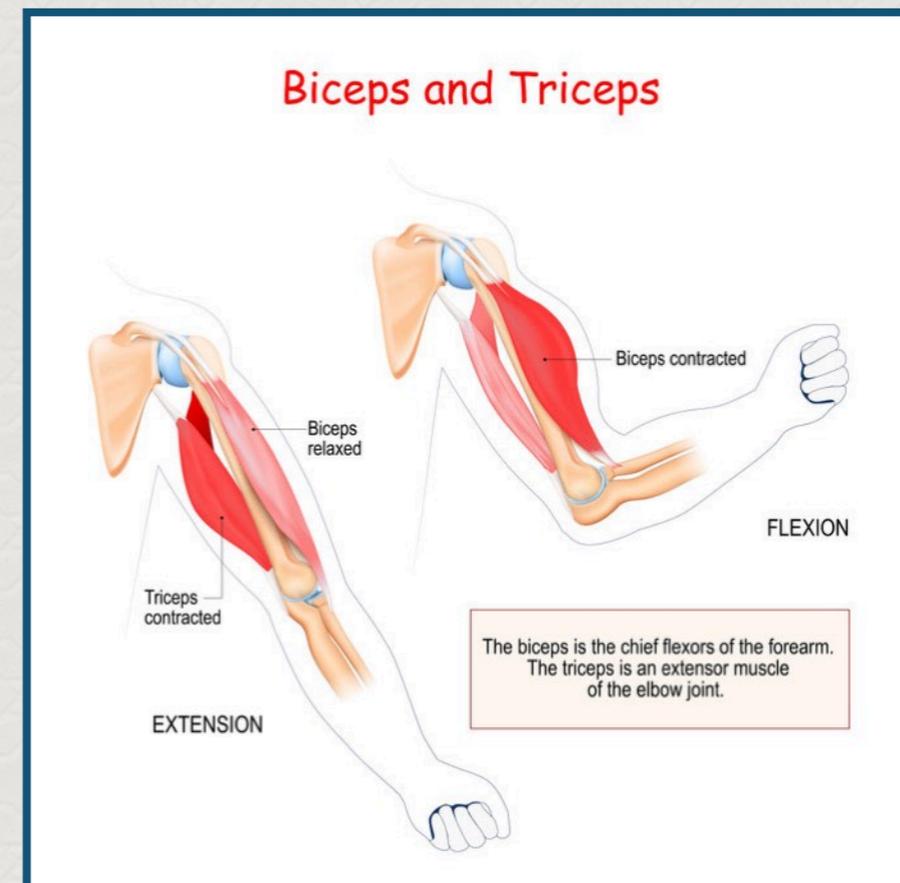
Tension is a pulling force and creates strain.

Our job is to find where their tension is being held and how to best release it. How does tension move in each client? What group of 3 - 6 needles will best release it?

Fascia connect the interior and exterior and play structural and functional roles. Externally, junctions in the fascia often correspond to meeting points in meridian theory. Internally, the fascial connections relate to internal - external meridian theories and Tan's systems.

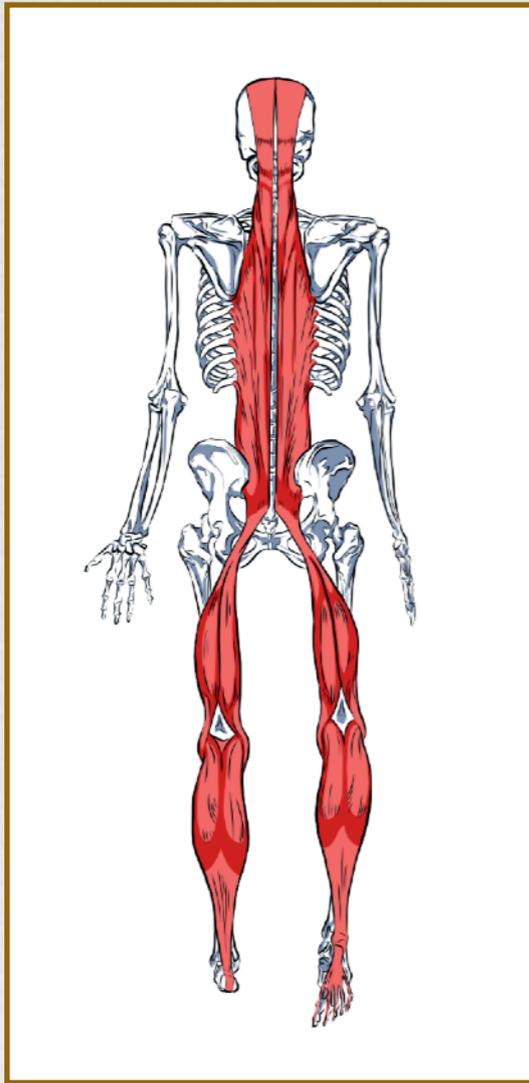
Dr. Helene Langevin's research has shown that acupuncture stretches fascia when grasp and twirling occur. (1,2)

Chronic Contraction and Strain

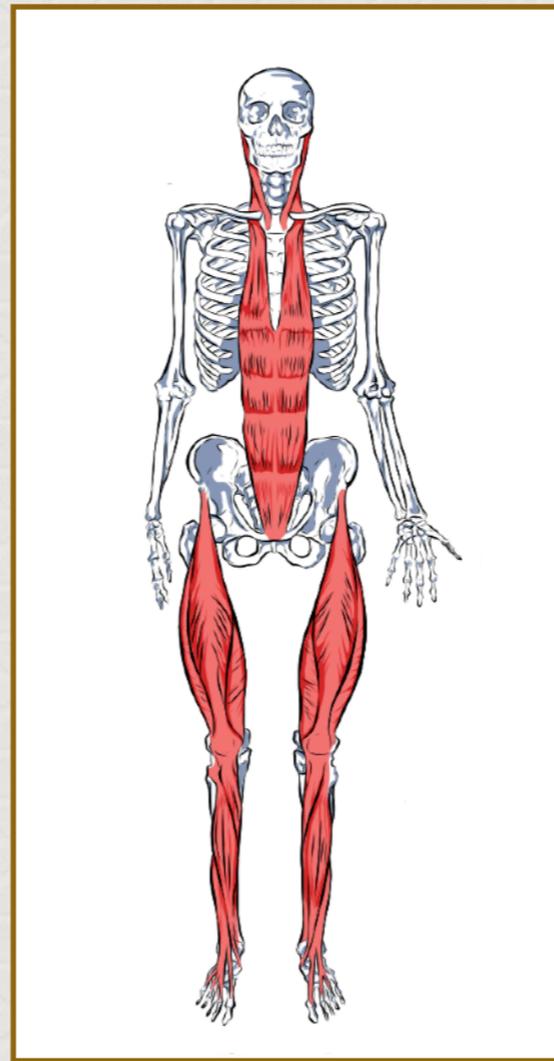


Myofascial Lines

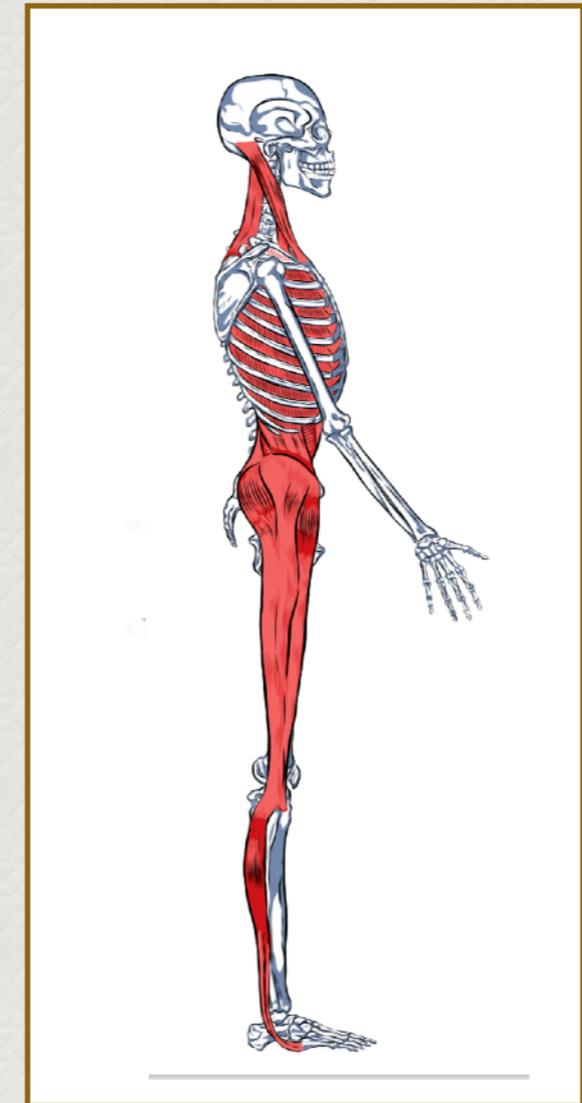
Images from:
Tom Myers
Anatomy Trains, Elsevier Publishing



Superficial Back Line

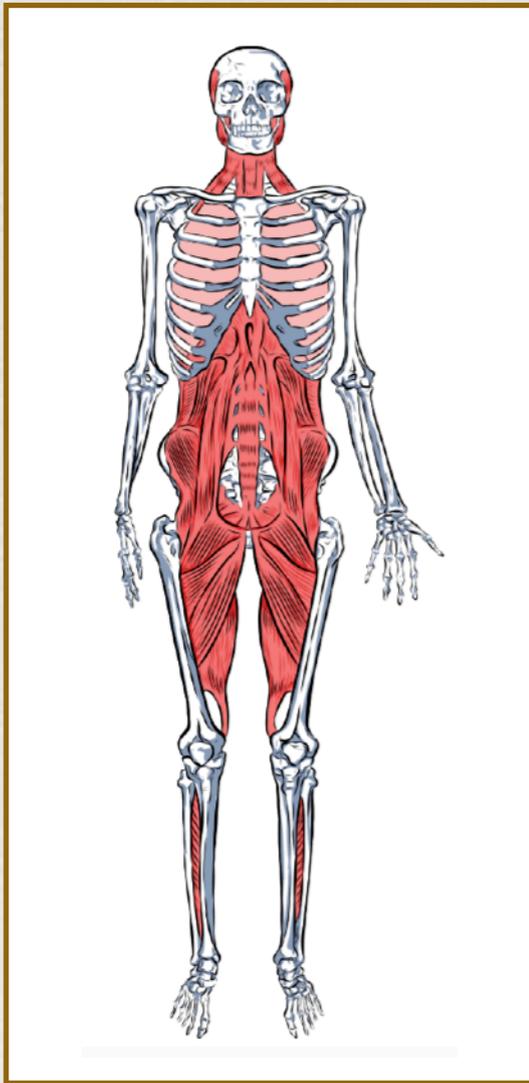


Superficial Front Line

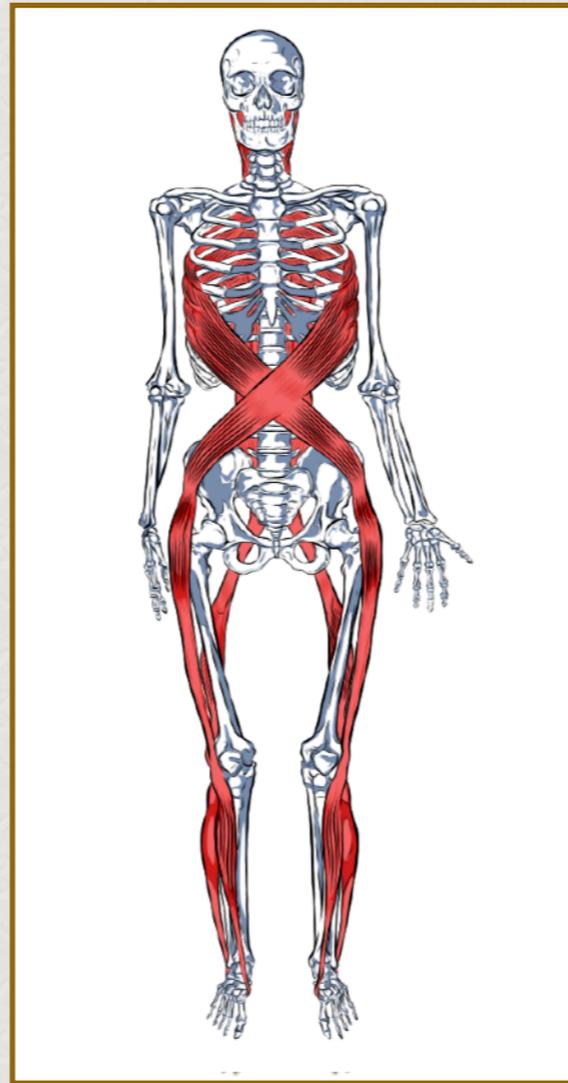


Lateral Line

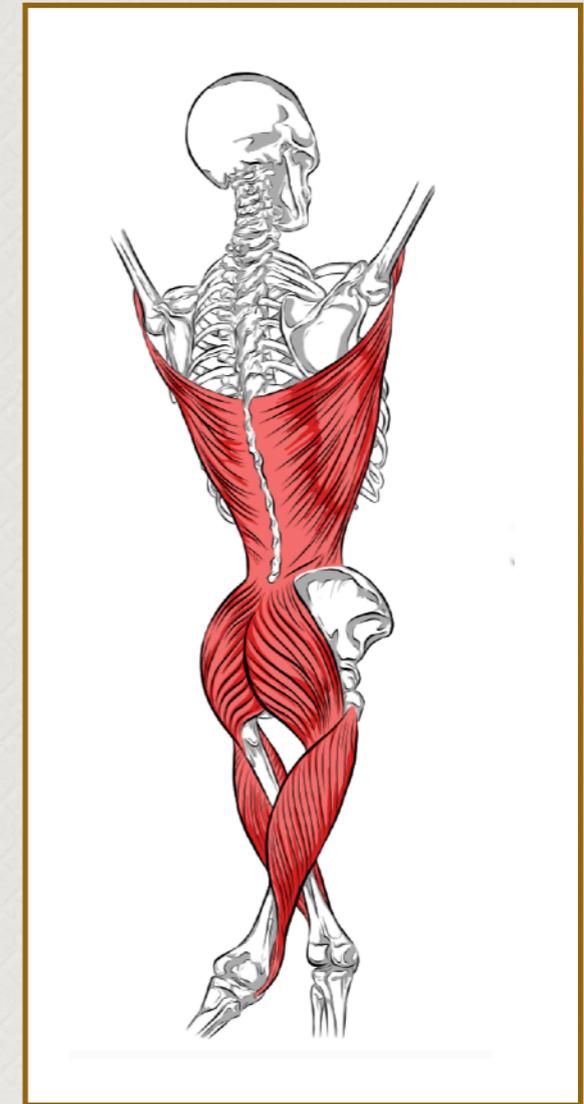
Myofascial Lines



Deep Front Line
(DFL)

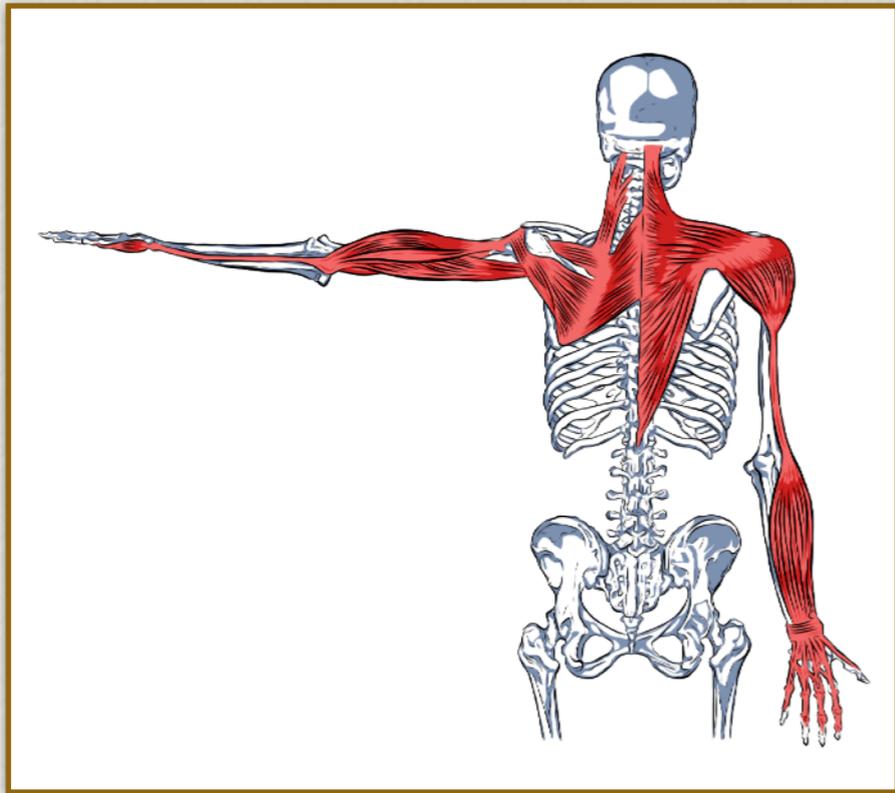


Spiral Line
(SL)

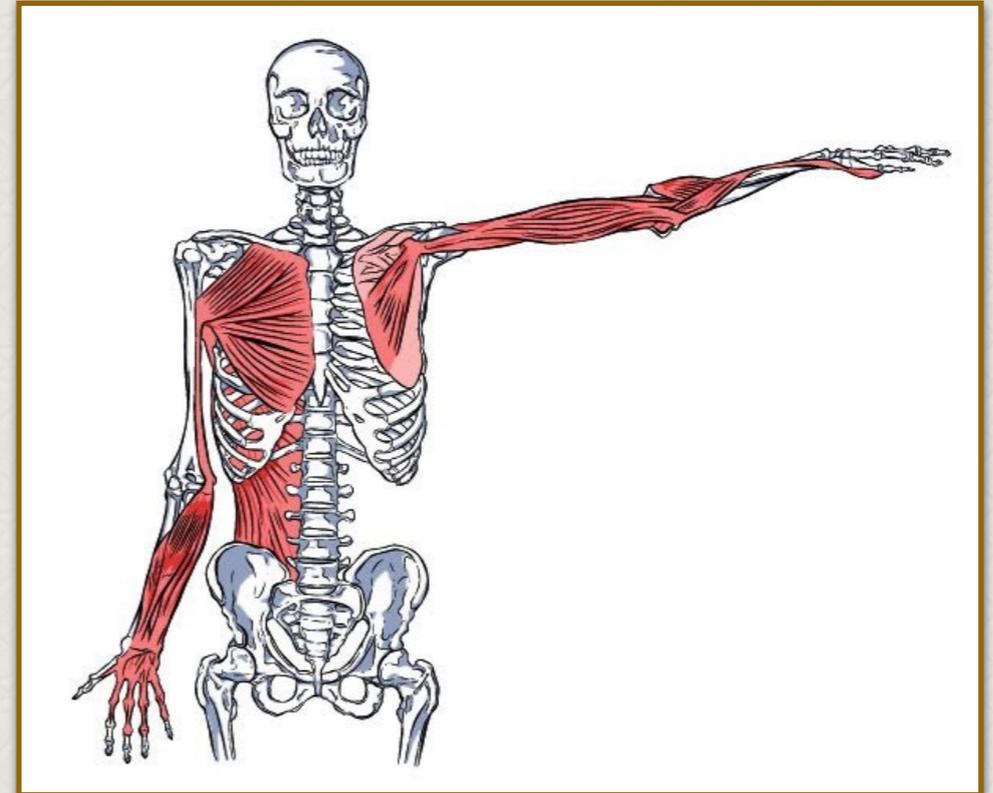


Back Functional Line
(BFL)

4 Myofascial Arm Lines



Superficial Back Arm Line (SBAL)
Deep Back Arm Line (DBAL)

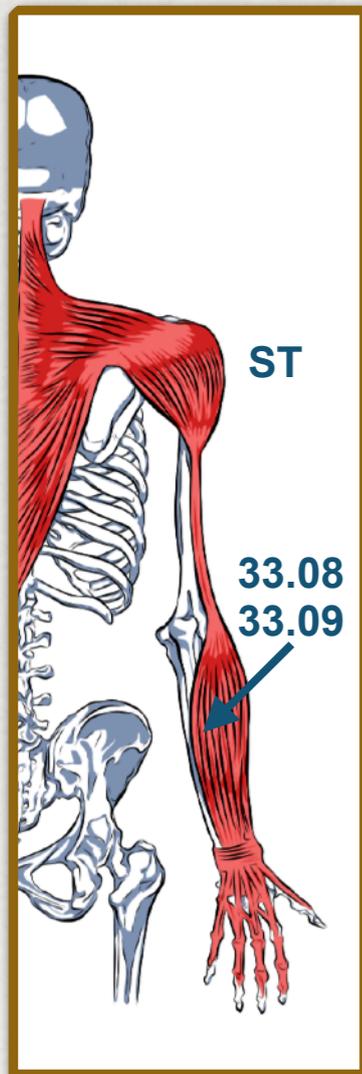


Superficial Front Arm Line (SFAL)
Deep Front Arm Line (DFAL)

Section 2

*Common Hip Points &
a System for Treating the Hips & Pelvis
(Abbreviated Sample from Course)*

Common Points for Hip Pain



SBAL

TCM

LI 4, SJ 5 & GB 41
GB meridian points: GB 29, GB 30,
GB 31, GB 34, GB 41
UB points: UB 40, UB 57, UB 60
ST: ST 31, ST 40

Groin Pain

TCM - LV 3 & Local Points on the LV and SP

Tung Style for Groin Pain

Ling Gu (22.05) / LI 4.5
33.12

TCM Styles

Primarily utilize the GB & UB meridians (**LL & SBL**). Liver and kidney patterns may also be recognized, as in bi syndrome. (**LV and KI are DFL**).

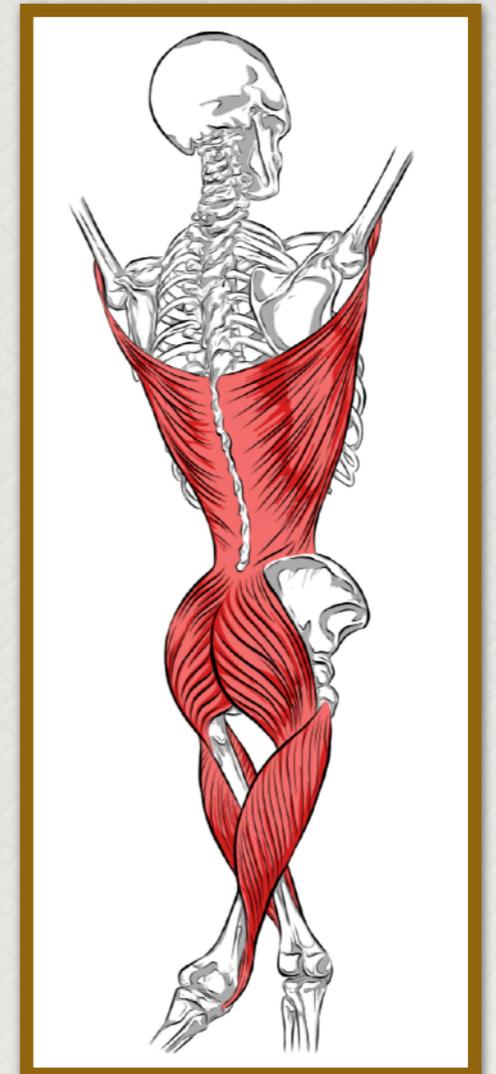
Tung's Points

The Shoulder Triplets and 33.08 & 33.09 are on the **SBAL**, and can effect the glutes through the **Back Functional Line**. These only get to a superficial level, and can be as effective as needling distal points on the GB meridian like GB 31, Thigh Nine Miles, GB 34 - GB 39 region.

Mahar's Hip Triplets are local points in the hip but needed on the opposite side as the pain.

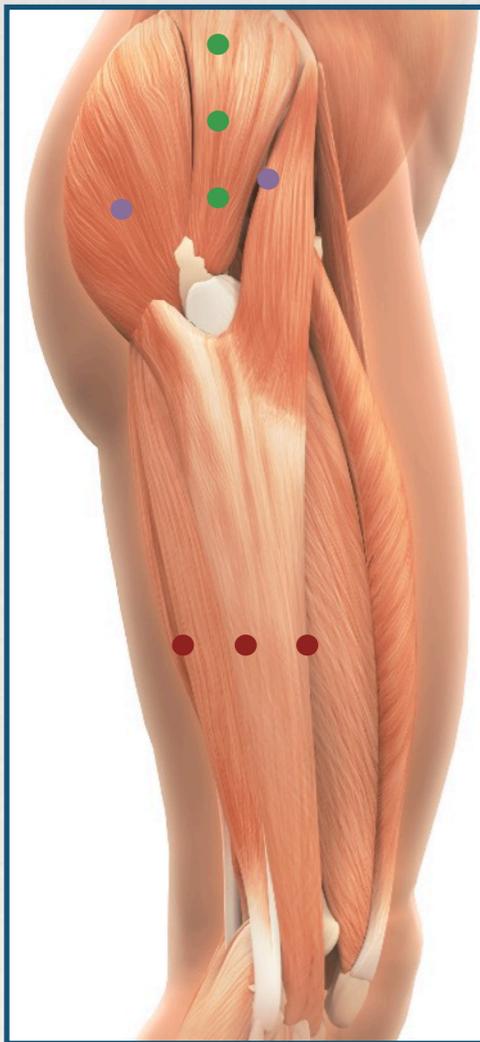
Tung's Points for the Hips

Shoulder Triplets - SBAL
33.08, 33.09 - SBAL
Thigh Nine Miles 3 - GB / LL
Hip Triplets - Local



Back Functional Line

Local Points for Hip Pain



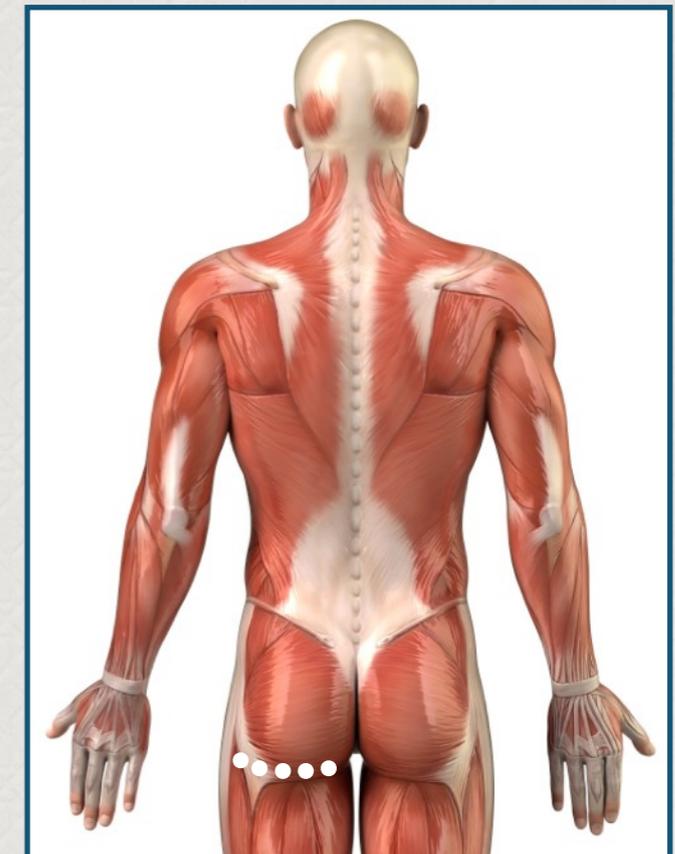
88.08 (Maher) Pacify the Spine Three Needles: From UB 36 move medial and lateral 0.5, 1.5 and 2.5 cun.

88.09 (Maher) Fortify the Hip Three Needles: First point 1/2 way between apex of iliac crest and greater trochanter.

GB 29 + GB 30

Much like the shoulder locating the 3 - 5 of the most sensitive points and surrounding the hip is an effective local technique. Needling may be done ipsilateral or contralateral.

For non-reactive clients local points with EA may be necessary for optimum results.



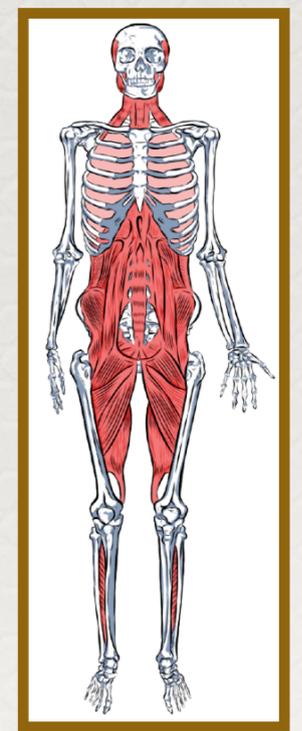
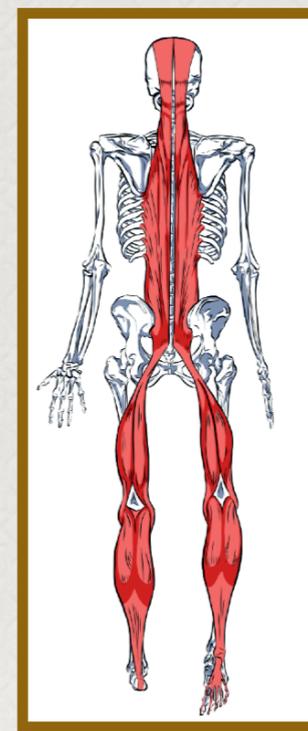
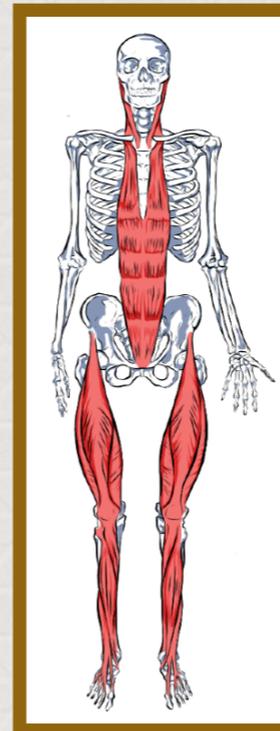
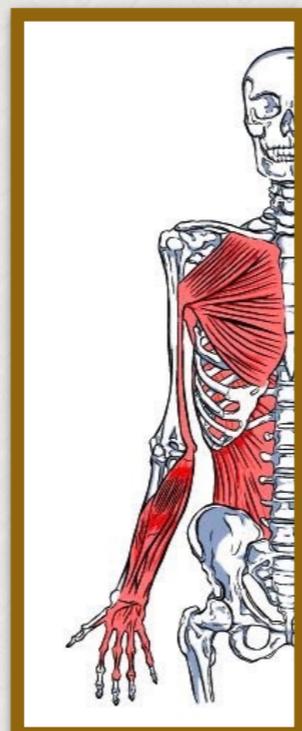
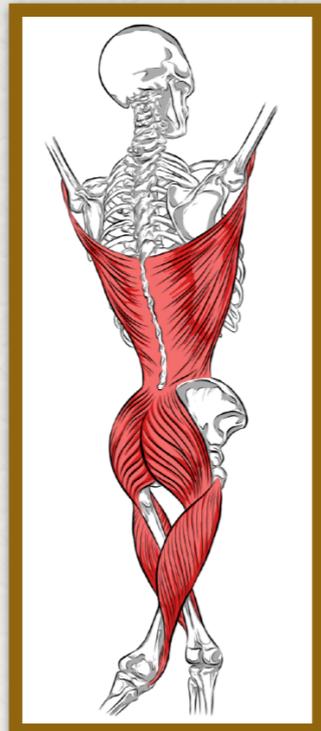
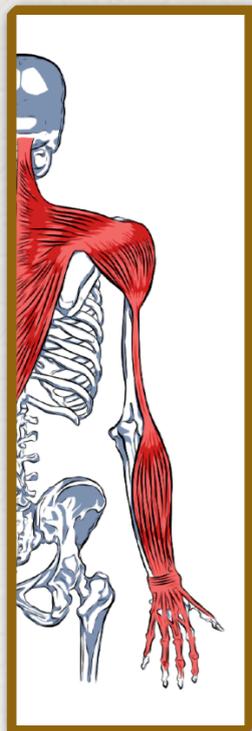
Additional Points for Hip Pain

Leg Yin Meridians - DFL - LV 3 - LV 11, SP 6 - SP 9 (Lower Three Emperors), KI 7, KI 8 Xi - Cleft YQ, KI 9 Xi - YW, DFL Points for pelvic conditions, Yin Qiao indicated for hip and low back. Tung's point groups - feet, legs, thigh.

ST Meridian - Four Horses for LU deficiency back pain, anterior hip pain, and APT (system 6).

UB Meridian - UB 40, UB 57

Leg Lines for Hip Pain



Research Review

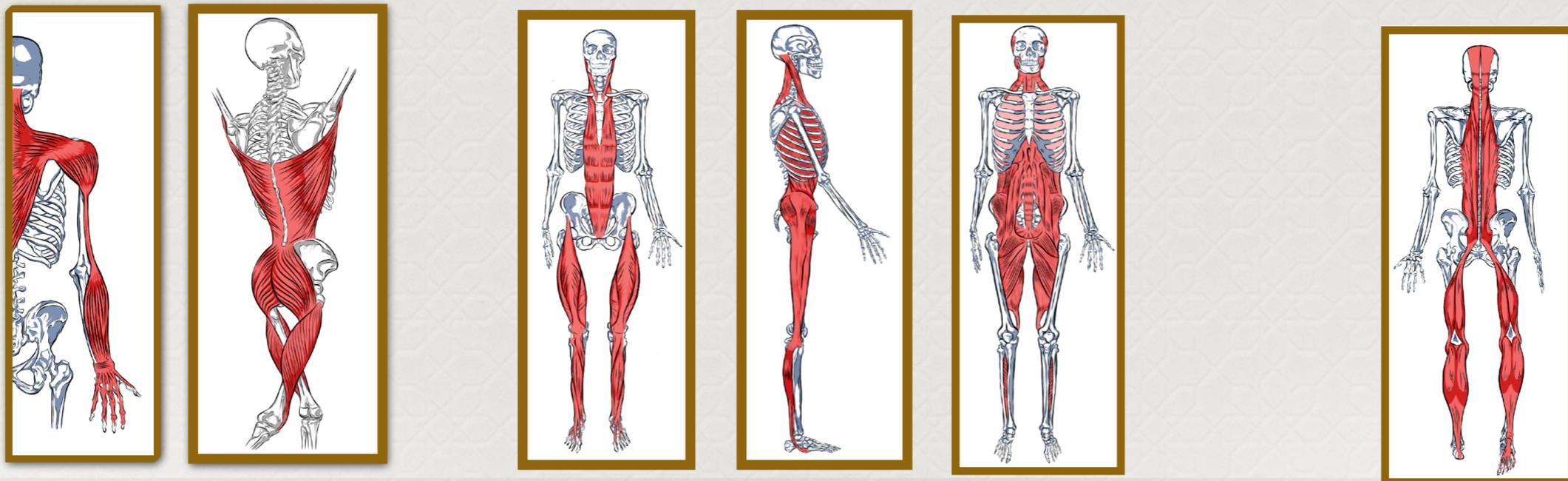
Acupuncture Provides Short-term Pain Relief for Patients in a Total Joint Replacement Program

Crespin D., Griffin K., et al. Pain Med. 2015 Jun; 16(6): 1195–1203.

Note: This study was done on patients with knee and hip replacements at the Joint Replacement Center in Abbott Northwestern Hospital at Minneapolis, Minnesota from 2010 - 2012

Treatment Methods: Bilateral LI 4, LI 11, non-surgical limb ST 36, GB 34, SP 6, LV 3, auricular points - hip point and ear shen men. For cases with bilateral surgery no leg points were done. **Results:** “Average short-term pain reduction was 1.91 points (95% Confidence Interval: 1.83, 1.99), a 45% reduction from the mean pre-pain score. Forty-one percent of patients reported moderate/severe pain prior to receiving acupuncture, while only 15% indicated moderate/severe pain after acupuncture.”

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4478153/>

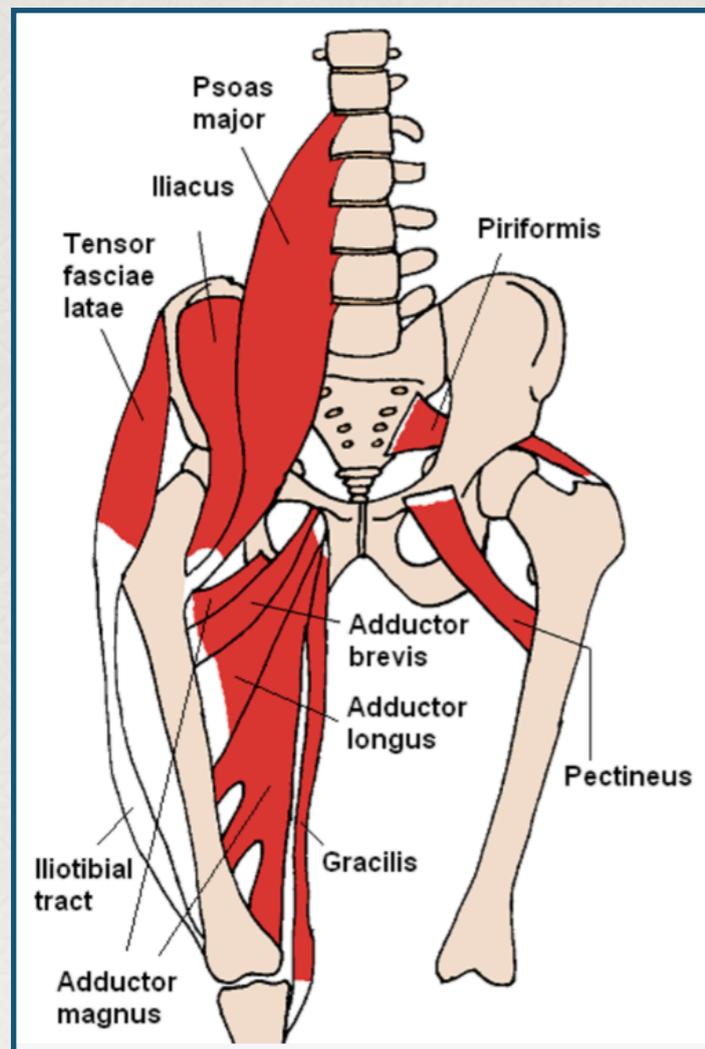


Section 3

Hip Anatomy & Functional Movements

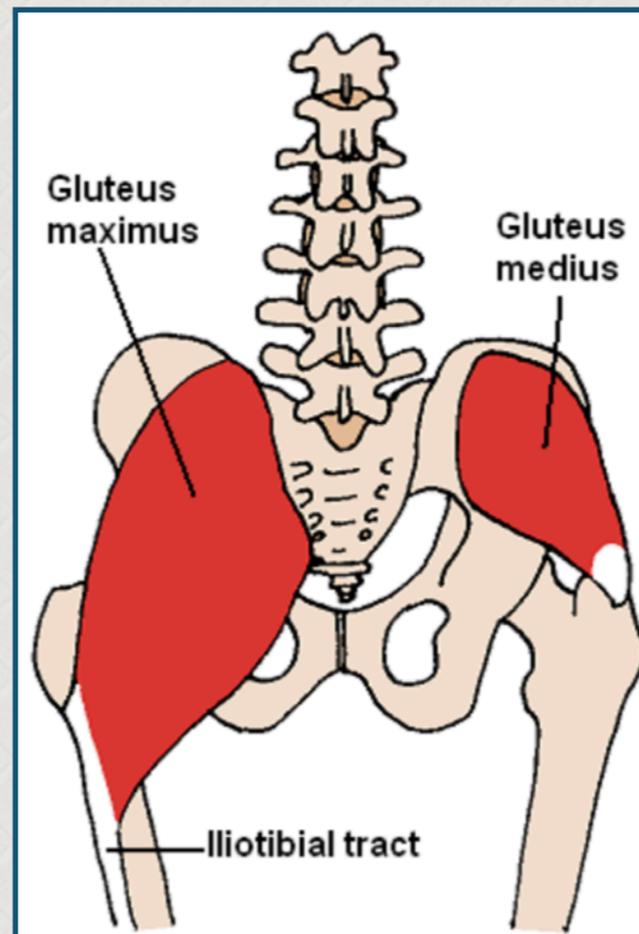
Hip Anatomy

Hip Muscles - Anterior View

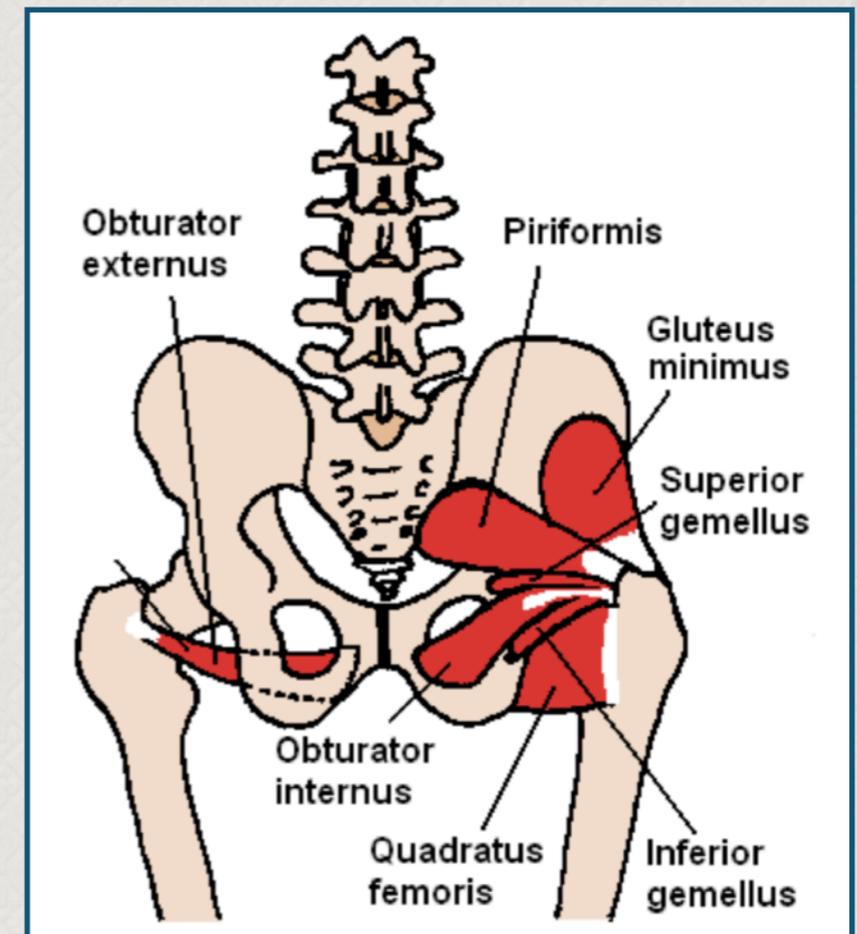


Beth Ohara https://commons.wikimedia.org/wiki/File:Anterior_Hip_Muscles_2.PNG

Posterior Hip Muscles



Posterior Hip Muscles



Individual muscles vs. functional groups
Working with functional groups allows for
a holistic systems perspective.

Hip Muscle Groups

Hip Flexors

Hip Extensors

Hip Abductors

Hip Adductors

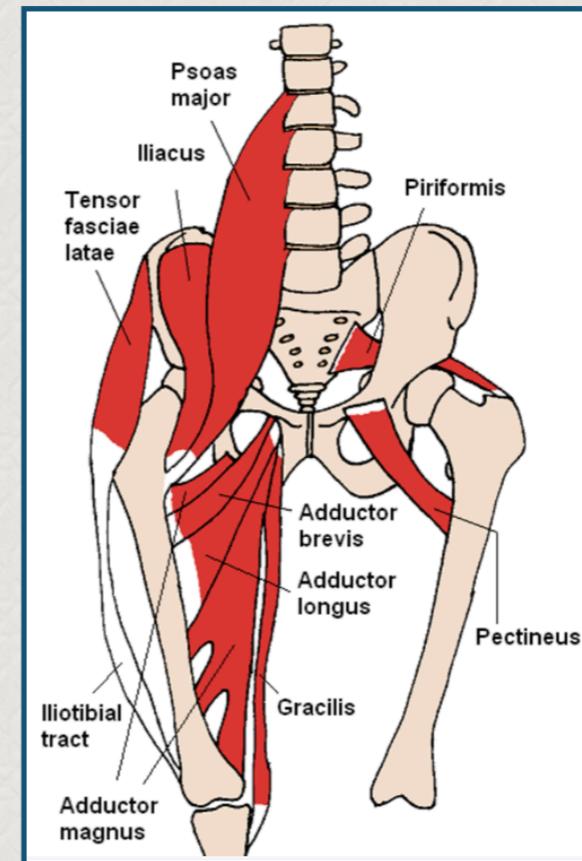
External Rotators

Internal Rotators

Anterior Pelvic Tilts

Posterior Pelvic Tilts

Lateral Tilts in the Pelvis



To get optimum results when treating the hips and pelvis it is essential to understand the functional anatomy of these muscle groups, how they connect to myofascial lines, meridians and acupuncture points.

Hip Extensors

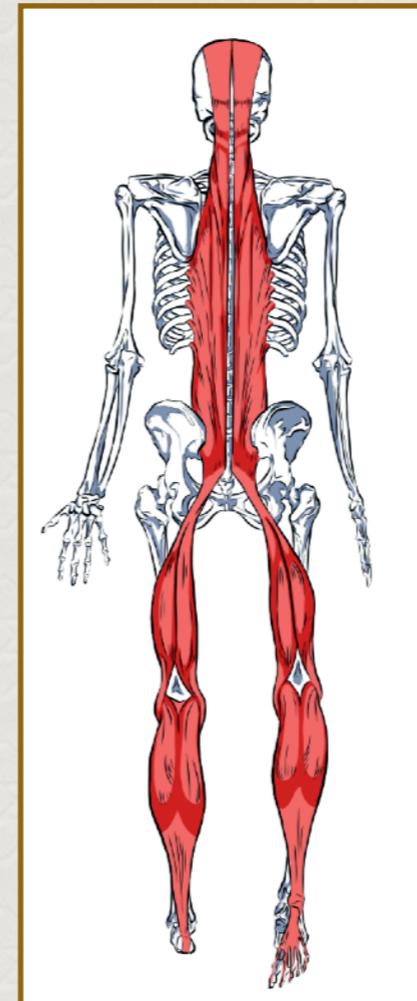
Gluteus maximis and hamstrings (biceps femoris, semimembranosus, and semitendinosus)

Psoas is antagonistic to the gluteus maximus. Chronic contraction in the psoas can cause pain through the hips, glutes, lumbar region, and tai yang - shao yang channels.

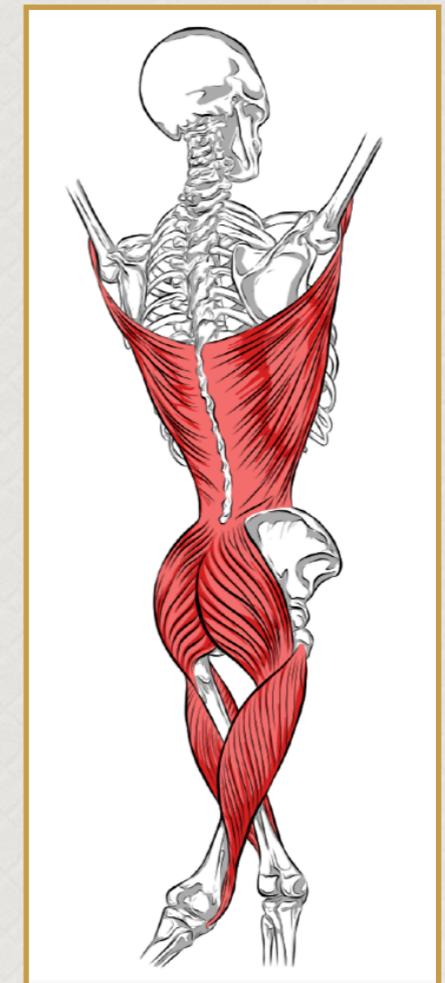
Contraction in the hip extensors can strain the hip flexors and produce pain in the anterior hip.

When testing extension note if the pain is in the anterior, lateral, or posterior regions.

Reduce chronic contractions and strengthen chronic weakness in regions under excessive strain and stretch.

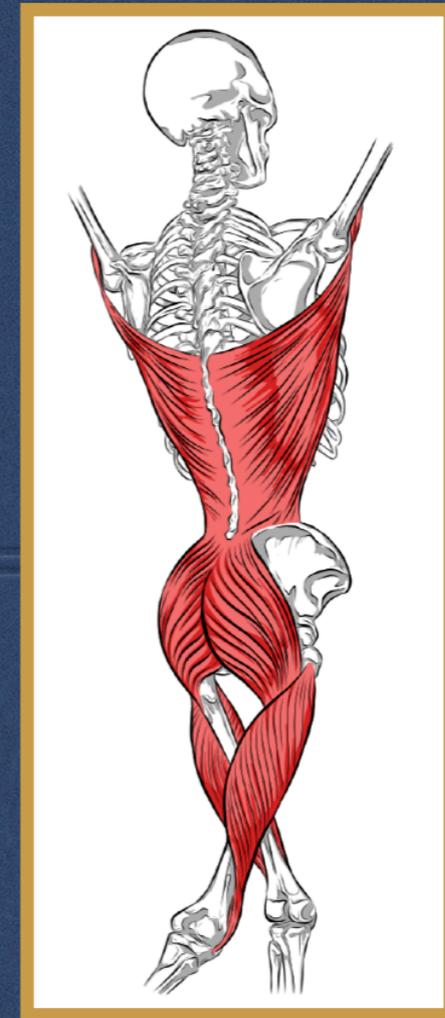
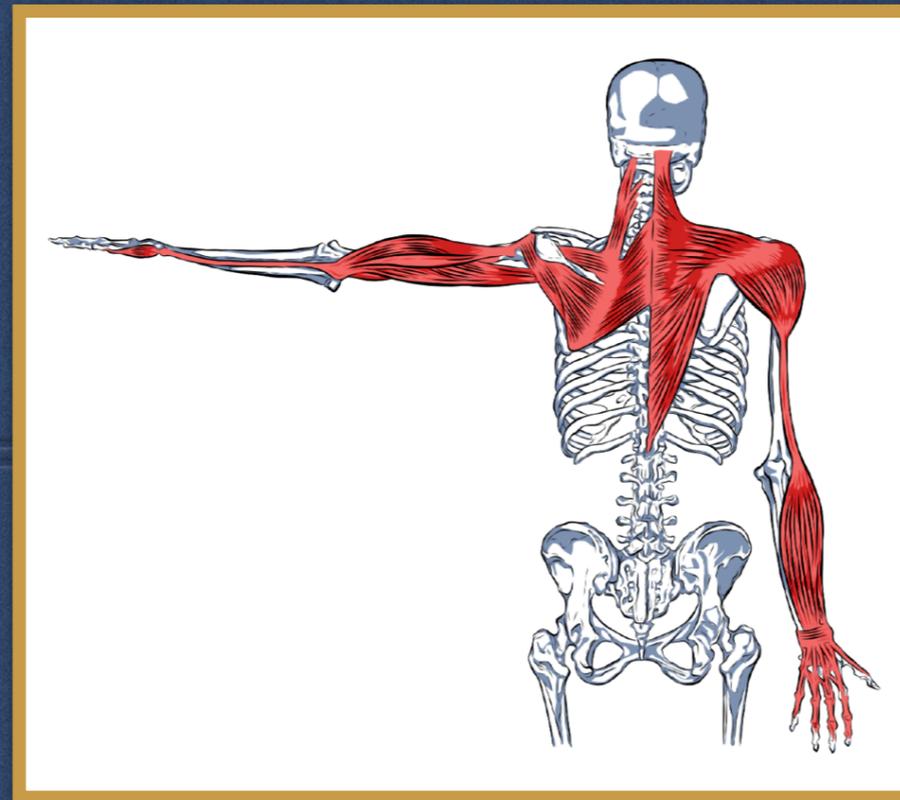
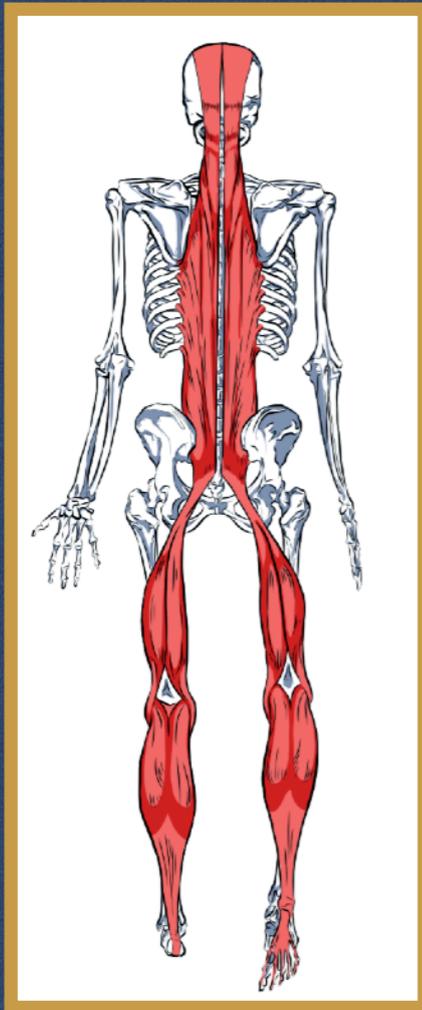


**SBL Points
Hamstrings**

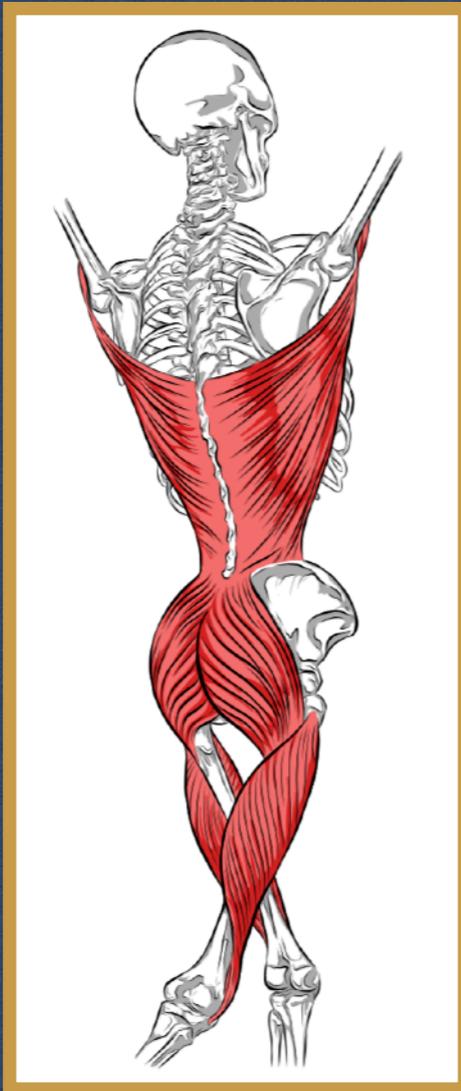


Tai Yang - Shao Yang Patterns

Acupuncture for the Hips and Pelvis



Acupuncture for the Hips and Pelvis



By James Spears M.S.

When treating the hips it is essential to make baseline structural assessments. While TCM and other traditional methods can have benefits, many clients with hip pain will only receive moderate results.

To achieve optimum benefits we can use traditional points; however, it is essential to understand the anatomy of the hips. My 214 level course allows for improved point selections based in functional anatomy, traditional methods, and prescriptive based movements.

To learn more visit:

<https://www.ihsociety.com/acupunctureforhippain>