

Treatment of the Overuse of the Upper Extremities

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One of the most common referrals to our practice by neurologists and orthopedists is a patient who has been diagnosed with CTS (carpal tunnel syndrome). Most of the time, the patient will have a normal median nerve conduction. The main complaints consist of pain and burning of the elbow/hands/fingers and a lack of response to any of the usual NSAIDs (non-steroidal anti-inflammatory drugs), physical therapy or surgery. The medication usually prescribed for this condition will be 600-800 milligrams of ibuprofen two to three times a day; 500 milligrams of naproxen twice daily; or newer drugs like Vioxx or Celebrex. The secondary effects of these drugs are related to the upper GI tract, and include nausea; vomiting; heartburn; etc. In many cases, the secondary effects are so severe that the patient needs to discontinue the medication.

Examination of the patient can often uncover a misdiagnosis. What may be labeled carpal tunnel syndrome (in some cases treated with a failed surgery) may in fact be overuse of the upper extremities, a condition for which acupuncture can have excellent results. Overuse of the upper extremities includes a variety of conditions, including: carpal tunnel syndrome; ulnar entrapment; pectoralis syndrome; rotator cuff syndrome; and epicondylitis, to name a few.

In this article, I will deal with rotator cuff syndrome and pectoralis syndrome (myofascial pain). Examination of both areas will determine the points to be used. In general, SI9 and SI10 (as well as a few trigger points in between) will be very useful for the myofascitis of the rotator cuff, while Lung1 and Lung2 will be the primary points for the pectoralis inflammation.

Technique Used

Chinese acupuncture needles (#38 gauge); microcurrent device with biphasic pads (75-100 microamps).

Combination Points

SI9 and SI10 (plus active trigger points in between) and Lung 1/2 for the anterior area (pectoralis muscle). Under moderate digital palpation, the points will reproduce the patient's symptoms.

Treatment Treatment is delivered at a frequency of 1-3 times a week for four weeks. The acupuncture needles are inserted with a slant direction, with the microcurrent stimulation pads on top of the needles. The microcurrent device's pads (biphasic, with an output of 75 to 100 microamps for 15-20 minutes) are applied directly on top of the needles. In most cases, the use of microcurrent is sub-sensational (the patient does not feel the electric stimulation). Within 6-8 treatments, the patient should show an improvement in the pain and burning sensations, as well as a reduction in pain medication. The indication of stretching exercises for the muscles involved will assist in a speedy recovery. The use of a microcurrent device combined with acupuncture is, in our experience, an excellent tool for the treatment of overuse of the upper extremities.

