



ACUPUNCTURE TECHNIQUES

## Pain Treatment Case Histories Using Microcurrent and Color Light Therapies

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*Author Note:* Dr. Leong is now deceased. It is my honor to share these insights and case histories he wrote up almost 10 years ago. They are still very valuable and reflect a dedicated and highly skilled acupuncturist's work and experience. I offer them so that the value of his work may live on.

Pain can be useful, and may be a lifesaver at times because it alerts us to take urgent precaution as well as action for survival and self healing. Yet, in a lot of cases, pain becomes a self-perpetuating experience that remains long after the actual damage to the body is resolved. For instance, some medical cases with fibromyalgia or with neuropathy, severe pain can arise when there are no apparent injuries present. It is these chronic pain cases that most challenges the Western pain paradigm.

One of the great contributions Traditional Chinese Medicine (TCM) has made is the understanding of both the Root, and the Branch of pain (and other disorders). In its simplest form, "disease root" refers to underlying causative factors, which predisposes a patient to pain. Although "Disease Root" may have multiple underlying causative factors, it usually refers to a single causative factor. These may involve long-standing emotional upsets and repression, viral or parasitic effects, organ imbalances, unresolved old injuries, heredity or Karmic past influence, and malnutrition effect (i.e. with expression of organ imbalance or imbalances). We deploy high-tech meridian diagnostic equipment for testing for these today. In terms of pain, the "Branch" refers to the actual sensations of pain related to restricted range of motion, visible swelling, and joint degeneration or vertebral mis-alignment. The sensation of pain can be associated with any dysfunctional bodily systems, not just the nervous system.

The meridian system is a network of information highways, through which photons, also known as light particles, and electrons travel. The network is similar to fiber-optics, and emanation from the network creates the aura, or bio-spectrum field. The sensation of pain is related to the improper

flows of particles in this optical pathway system. It is largely an echo-like resonant effect of light particles.

We may say that there are two pathologic levels at which the body's meridian optical system may become disturbed or partially shut down, leading to various levels of pain. One is the physiologic level, and the other is the informational level. The physiologic level regards to the functioning ability of the tissues, organs, and the bio-chemistry. This level is largely orchestrated by electrical feedback systems. The informational level is that of subtle energy regulatory and communicational system and it is primarily based on light transmission. These very profound photon feedback systems can be verified by measurement of the bio-spectrum and be pictured by an aura camera. Research has shown that all living things communicate with each other in an environment of electro-magnetic field resonance and light radiation.

Western pain treatments focus almost exclusively on physiologic treatment. For instance, analgesic drugs stimulate bio-chemical reactions which reduce inflammation, block nerve impulses, and switch pain-controlling centers in the brain and spinal cord. Physiologic non-drug approaches include physical therapy, spinal manipulation, electro-therapy, and surgical removal of nerve cells. These approaches often interfere with the subtle balance of the light informational systems.

Acupuncture and moxibustion are very complex subjects of study with multiple angles that they may work through both the physiologic and informational levels. Further research is required to understand this relationship. Acupuncture can also work on an informational level through the energetic rapport between practitioner and patient, when the practitioner communicates his clear *qi* through the needles or direct bio-field interface. Much of the healing interaction between practitioner and patient is on the basis of light communication. Externally fed colored light therapy is the treating technology that most directly informs the body's subtle energy. Colored light influences the Disease Root aspects of pain in a very authentic way as overcoming the obstacle.

Both physiologic and informational therapeutics are valuable for different levels of pain control, and pain related illness. I have researched ways of combining these therapies, and have designed a probe device, which delivers microcurrent and colored light beam simultaneously onto acu-points and disease affected region. Using this approach, I have had great success in treating many patients with pain related diseases and who have suffered with recalcitrant pain conditions, often addressing both diseased Root and Branch of their imbalance in particle flows. Following are some clinical examples from the practices of myself and Dr. Leong, in which we used this new energy medicine method. I based my selection of color light on both time tested clinical indication for each color, confirmed with O-Ring muscle testing (kinesiology).

#### Case #1

Female, age 55, shoulder pain. Patient complained of chronic pain with restricted range of motion in the left scapular region, which had not been improved by massage or manipulation. She received two treatments, after which the pain was 95 percent reduced and movement was much easier.

Tx 1- Noticing that she had leg length imbalance, that I suspected was contributing to the shoulder pain, I used microcurrent and colored light on extraordinary vessel confluent points of *Dai Mai/Yang Wei* vessels. Treatment was administered as follows: negative microcurrent on GB 41 on long leg, positive probe on TW 5 on opposite arm. Light color: green for wood element and energetic balance. Next, I used positive probe on SI 3 and negative probe on the same side UB 62, bilaterally. Light color: blue for water element and anti-inflammatory effect. Treatment times: 20 seconds per set of points.

After this treatment the patient's legs were the same length. Next, I used the positive probe on the painful shoulder area points, with the negative probe on the Mandel shoulder point on the lower abdomen, also with blue color light. This point is two finger widths above the navel, about two finger widths to the right or left. Palpate for the most sensitive point. During the course of the treatment, the patient and I intuitively connected with a Root cause of her pain- "shouldering" the burden of carrying a disempowering belief in suffering passed down through many generations of women in her ancestry. In the heightened state of awareness, the session opened, she declared a new decision to not carry that burden any longer.

Tx 2- Patient reported feeling about "90 percent better" over the two weeks since the first session and only needed a tune up. Microcurrent with yellow light was used to relieve stagnation in the lymphatics, giving further relief to the shoulder. (Starwynn)

#### Case #2

Female, age 37, knee pain- after a day of hiking, the patient had severe pain in the lateral left knee, around the area of the fibular head. The pain made walking difficult. I first used local and distal acupuncture needles for first aid, which reduced the pain about 50 percent. Walking was still difficult. The next day I applied polarized microcurrent and light, using the positive probe on several painful knee points and the negative probe applied to LI 11 and PC 6 on the opposite arm. After this I applied the positive probe to UB 40 on the back of the knee with the negative probe on the Mandel Knee point on the front of the opposite shoulder (palpate for most sensitive point). She muscle tested strongly for turquoise color light, which has both anti-inflammatory and energy balance effects, and this was applied with the probe treatment on all points. The probes were then set to biphasic and used to treat sets of local knee points with "circling the dragon" technique. Excellent relief was noted. (Starwynn)

#### Case #3

Male, age 51, hernia pain - Patient is a security guard of a casino and an athletic person. After his daily two-mile run over a period of time, he developed an intestinal hernia. A CT scan was taken in a hospital and surgery was recommended by a medical doctor. He had acute pain in the abdominal area and the hernia was visible as it protruded and lowered to the right side of the abdominal wall three inches below the belly button. With such an emergency, first aid acupuncture was needed and a belly brace was given to him for immediate use.

The acupuncture points were ST 36, ST 43, LI 5, LI 11, Ren 12, Lv 2, Lv 4, and Lv 13 with bilateral insertions of 16 needles. In association with this, the microcurrent electro-light probes were used with orange, then blue colored lights onto the auricle Zero point bilaterally. The Zero point is an "all-timer" with extremely good pain-killing effects on abdominal disturbances. The colored blue light is a good distal pain reliever and has an effect of detoxification. The orange light is a good messenger of taking the information flows to the Liver governed zone and is typically applied onto the auricle's stomach and Zero points. The orange colored light works like the orange peel in Materia Medica. The microcurrent probes were set to a relatively strong setting of 150  $\mu$ A @ 80 Hz in order to curb the pain. The patient reported a 95 percent of relief subjectively. The patient was advised to wear the abdominal belt for no less than four weeks in order to keep the small intestine in place.

At the second visit on the second day, the patient reported an 80 percent relief of pain. I then treated a new hernia point I discovered, which is situated at the right side, half an inch away from the side of the scrotum. This acu-point is good for the application of microcurrent-light therapies for intestinal hernia use. The light selected was magenta. I probed deep into the pubic bone to re-

establish the texture and strength of the muscles at the bottom of the abdomen using simultaneous application of the light and the microcurrent. I treated Tianshu (St 25), Daheng (Sp 15), Xing Jian (Lv 2), Zusanli (St 36), and the last acu-point of the Spleen Meridian Dabao (Sp 21) with needles in association with electro-light microcurrent probe work with green, yellow, and red colored lights respectively for 18 seconds for each colored light. The reasons are:

- Green for nerve recovery
- Yellow for muscle rebuild
- Red for small intestine's self-adjustment

The patient reported that the hernia was about to be resolved on the fifth office visit as he only felt a little dull pain after eating each meal. He started to request a release from wearing the brace at this point. There was not any intensity of pain after the eleventh office visit. (Leong)

#### Case #4

Male, age 56, scrotum dermatitis. Patient was diagnosed over 48 years ago, since he was 8 years old. He has been treated by doctors of all kinds but his problem had never been resolved. Scrotum dermatitis is considered within the category of deficient *qi* in Oriental medicine. The mechanism of such an illness is allergies to agents of all kinds such as cotton and nylon pants. I treated him with microcurrent and turquoise colored light on a simplified set of points on the basis of trial only. The acu-points selected were: Lv 2 and Lv 4, the reasons are, first, lower treating for higher illness and, second, liver meridian travels around the genitalia.

Before treatment, his Meridians were tested using the Acutron Mentor device for both accuracy and reference purposes, and the same device was used for microcurrent treatment. Most of the time, the tests showed the Liver meridian in excess and the Stomach meridian in excess. Points ST 40 or ST 41 were selected at different times, to reduce the wetness, or Disease Root, being produced. The polarized probes of the device were placed as Lv 2 at positive and Lv 4 at negative or Lv 2 at positive and St 40 or St 41. Localized treatment of the whole scrotum was added, dividing it into about 40 regions, using biphasic probes placed side-by-side.

This is often called Circling The Dragon Pattern. Each set of two points was treated for 18 seconds, treated three times each. Current was set at 150  $\mu$ A @ 80 Hz, and was used with the colored light probe, simultaneously. The color selected was turquoise, which has been well tested for skin irritability conditions. Then, I treated with the green or yellow colors again. The green is a good repairer of the nerve cells and the yellow is the "great builder" of tissues including the cuticle skin cells.

The patient felt much relieved from itching right after the first treatment, with continued reduction with each subsequent treatment. The patient reported 75 percent of itch recovery subjectively at the fifth office visit and treatment. He was cured during the eighth office visit and treatment session so he was released for good. (Leong)

#### References:

- Peter Mandel is a German pioneer in the field of color therapies. See his website for available books and articles: [www.colorpuncture.com/articles.html](http://www.colorpuncture.com/articles.html).
- Microcurrent Electro-Acupuncture, by Darren Starwynn, Desert Heart Press, 2002
- The Body Electric by Robert Becker, Bear and Sons, 1985
- Light Years Ahead, Celestial Arts, 1996, available through Amazon.com
- Color Me Healing by Jack Allanch, Available from Amazon.com Search for book # "1862041431

- Dinshah, Darius, Let There Be Light, Dinshah Health Society (available through their website)
- Information on therapeutic effects of colors, and methods of application, can be found on website [www.eastwestmed.com/color](http://www.eastwestmed.com/color)

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