

Look Like You Have a Brilliant Needling Technique Even if You Don't

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Let's face it. Most of us are not 97-year-old 23rd-generation Chinese acupuncturists, and we never will be. I know, the truth hurts and all that. Even if your best will never be as good as that, there are things you can do now to make your treatments feel and work better for your patients, and not hurting them is a really good place to start.

Needling is always the toughest hurdle to jump for new acupuncturists and even some old ones. I was needling myself before I ever went to school. If you want to develop a technique, try stabbing yourself with big Chinese needles without any formal training or insertion tubes. I was everyone's favorite lab partner at school because by the time I got there and discovered that some needles actually come with insertion tubes, I had spent a year torturing myself with manual insertion. By comparison, using a tube was a piece of cake. Now that I have logged a few years in the treatment room I have discovered a few needling secrets to make you look good.

First, Do No Harm

Almost without exception, I use the finest needles I can buy for everyone's first treatment; Japanese green 02 (0.12 mm). The cells, and therefore the body, have a perfect memory. A pain-free first acupuncture treatment will establish a pleasant baseline cellular memory and ensure that Mr. Smith will come back for his second treatment. Hurt him, and he will decide at the last minute he needs to shampoo his hamster and cancel.

At least half of my patients are varying degrees of nervous when they come in for their first treatment. Some will put on their brave face. However, after you do acupuncture for a while, you can sense who is OK with trying acupuncture, and whose inner child is running for the closet and slamming the door. For nearly all, but especially for these patients, I always use green 02s for the entire first treatment. Americans are not Chinese peasants and do not want their acupuncture to hurt. They are weaker and thinner skinned. You can't undo the body memory of a bad treatment.

"How can that work," you are thinking. "Those needles are thinner than a hair." You're right. They are. But it works because I am taking advantage of a little-discussed phenomenon I call "The Honeymoon Treatment." I, and other acupuncturists I've talked to, find that most people's *qi* is so screwed up by the time they come to see you that you could probably stand across the room and shoot the needles in with a dart gun and still have great results from the first treatment. The good news is that if you are reasonably competent, i.e. gone to acupuncture school and read a few books, 99 percent of your patients will kiss your feet when they come back for the second treatment. They will think you are the Acupuncture God. The bad news is that the work actually starts with the second treatment. It's all uphill from there, and if you are a beginner, I'm sorry to say that this is when you get beaten up.

I think most people who give up acupuncture do so because they can't stand hearing, "Boy, that first treatment was great. Can you do that again?" one more time. I know at some point I even considered only doing one treatment per patient. Ever. My treatments would be so great I'd be famous! So if you can stand feeling like a failure for a few years until you get your chops, enjoy the honeymoon treatment and do the best you can with the rest. At least if you've followed my needling advice, you won't have tortured your patients into giving up on acupuncture, and they will give you several more chances to do magic again.

I have patients who have had bad (painful) treatments elsewhere and are determined to give it another chance. These are the people I want to be especially careful with. Every time, they are happily amazed at my painless needle technique. Don't attack an acupuncture point, even with a green 02 needle. Introduce yourself to the point first by touching either the point or an area close by. Give your patient a good memory of the first treatment and their body will forgive you (up to a point) when you have to use the occasional tender point in later treatments. I have found that most people have a tolerance limit of three or four "ouch" points before their body starts to go, "Hey! What the hell is wrong with you? Knock it off!" When they start to flinch and creep away from you on the table, you know you have maxed them out. At that point, get out the greens and be nice for the rest of the treatment.

You can also fall back on the green 02s on those days when you "just don't got it." You know; the days you'd really rather roll over and go back to sleep than make the lame walk and the blind see? I notice that I get a lot more cringing, moving targets, and "yowch!" on those days. If you don't trust yourself to give amazing, ethereal treatments that day, then at least if you use greens, you won't be hurting anybody.

You will find that some patients are very needle-sensitive. I continue to use greens for these people. Why put you both through all that tension? If they feel the thinner needles that much, then they are getting results.

I also prefer to make all my insertions shallowly first, let the body get used to the needle, then come back later to manipulate and insert it deeper. If you ram a needle into a nervous patient, it will hurt.

In the search for new and painless needling techniques, I also have found creative ways to use intradermals. If I need to use really tender face, ear or *jing* well points on the highly needle-sensitive (never, of course, on the first treatment) I will sometimes use intradermals. Place them with surgical tweezers.

If you are trying a new brand or size of needle or a new technique, try it on yourself first. Yes, I am serious. If you can't make yourself do it, try it on someone close to you who won't hold back the criticism - your teenager, for example, or your cat. No critic like a cat.

Make small talk with nervous patients while you needle. If you have to "focus" so hard that you can't talk with them while you insert the needle, they will just freak out and negate all that *qi* you are pumping in there. Distraction is an effective, time-honored technique. "Look over there! It's the Queen of England!" probably got you more than your share of stolen cookies as a kid.

Cut Your Tubes

I end up trimming a smidge off of my insertion tubes for several reasons. Obviously, if you are needling calloused or thick-skinned areas, you want to get through the top layer fast, so trim tubes then. I find that most men have thicker skin in general than women, so I usually trim tubes for men. I do a lot

oblique insertions and sometimes trim at an angle for those.

I once had a 2-year-old redheaded patient with severe eczema. Having tried everything else by that time, her mother was an expert on the skin of redheads. According to her, redheads have thicker than average skin, which explained why they usually seemed jumpier on my table. Now I trim tubes for all redheads and it does seem to be more comfortable. Some of my redheads even remind me to do it.

Most of the time, but especially when I trim my tubes and/or use coil-handled needles, I get a firm grip on the shaft when I remove the tube so it doesn't yank it out. Sometimes the coil gets caught on the end of the tube or I've had the plastic handle catch on the glue dot. I hate having to reinsert a needle.

Save Time

I do a lot of Japanese-style acupuncture that calls for both back and front points in one treatment. Two days a week, I have a sliding-fee community clinic, and I may see 12 or more patients a day. I'm too busy to flip everyone over for front and back points on those days, so I developed the following technique for doing both at the same time. To add back *shu* points to a front treatment, I pinch skin and insert green 02s at back points at a very oblique angle toward the spine and tape them down flat. Fold over a corner of the paper tape before you put it over the handle so you don't have to excavate a hole in the back trying to scratch it off. The patient then lays on the back needles. Often they don't know what I was doing back there and that they have needles in their back. No one has ever complained of discomfort.

Send a Needle Home

My new patients get an orientation folder with various goodies in it. The faint of heart who survive their first treatment without passing out get an "I Was Very Brave" sticker, which they proudly wear out of the office. I always tape a packaged green 02 needle to the inside of the folder for everyone to use for show and tell. Believe me, nine times out of 10, they will be giving the "Acupuncture Report" to numerous friends and family after their treatment, and the first two questions will be, "Did it hurt," and "What do the needles look like?" When you say "needle," most people still think "hypodermic." Don't miss this valuable public-relations opportunity. Quite often, after examining and playing with the show-and-tell needle, people will lose their misconceptions and fear, and make an appointment.

Needle in a Haystack

Understand that when you spend several years poking people with thousands of needles, you are bound to leave one in from time to time. You don't want to send a needle home that way, but at least you aren't leaving forceps in somebody's head or cutting off the wrong leg. Maybe you are too busy to chart every exact point. I used to sweat this until I noticed one of my teachers, a Chinese gentleman with about 50 years under his belt, did it too. If it could happen to him, it would surely happen to me. If I'm really busy running between multiple patients and am putting in "hidden" needles under clothes or in hair or using intradermals, I will even tell my patients, "Don't let me forget to take this one out, OK?" They might chuckle a little, but they understand and they do remind me. If I'm keeping up with the charting, I put a little star by the points I'm likely to forget.

The basic thing is to look competent but don't think you have to be the "Head Expert in Charge of the Universe." Explain everything you can about what happens during the first treatment to your new patient before you do it so they aren't surprised. That takes some of the edge off. Some people want a

running commentary during the treatment, want to see the needles, want to know what all the points are for and so on. Some people want a blindfold and headphones so they can pretend they are at the beach. Ask before you start, and let your patient determine the tone of the treatment. They are paying for it, after all.

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