

April 2007 Newsletter

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Acupuncture Events for April 2007**09**

Shanghai - Shanghai International TCM Seminars. When: April 9-12 Where: The Hilton Hotel. Contact: SITCMS on 1800 888 198 or info@sitcms.com

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Sydney - ACU - Integrator of East & West (SITCM). When: 7.00pm - 9.00pm, Where: 92 - 94 Norton Street, Leichhardt. Contact: Igor Bilek & Garry Tam on (02) 9550 9906 or igor@sitcm.edu.au

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Melbourne - Toyohari Basic Training - Weekend 3. When: April 13-15. Contact: Australian Shiatsu College on (03) 9419 5520

21

Melbourne - The 5 Elements, The 5 Emotions. When: April 21-22. 9.00am - 5.00pm, Where: Australian college of Natural Medicine. Contact: Gye Bennetts on (02) 94404194 or courses@5element.com.au

22

Melbourne - The Enteric System: Part 1. When: All - Day. Contact: Emily Lewis on 1300 133 807 or emily@chmrd.com

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Sydney - Facial Rejuvenation Acupuncture Seminar. When: 7.30pm - 9.30pm, Where: 92 - 94 Norton Street, Leichhardt. Contact: Igor Bilek & Garry Tam on (02) 9550 9906 or igor@sitcm.edu.au

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Sydney - Oriental Medicine. When: April 28-29. 09.00 - 17.00, Where: Art of Health, 113b Booth Street, Annandale 2038. Contact: Art of Health on 1800 089 770 or info@artofhealth.com.au, www.artofhealth.com.au

Tested methods to increase the power of your clinic ads, flyers, sales letters and promotions. By Gavin Hurlimann

What makes one clinic marketing promotion get a huge response and another to fail miserably? More often than not, it's the execution. It's the way you do it.

All advertising and marketing is based on fixed principles. Advertising operates according to fundamental laws and not chance. These laws and principles were set out by Claude C. Hopkins (1867 – 1932) in 1923. They are based on 36 years of tested and monitored advertising – ads, letters and promotions whose results were monitored and compared.

These advertising laws were set by doing marketing campaigns on thousands of different services and products, from toothpaste to heavy machinery. Thousands of ads, headlines and layouts were compared and analyzed. There are some exceptions that don't follow these laws, but they are few and far between. These services or products are usually in such high demand that they would have been successful regardless.

Here are the eleven laws that will increase the results of your advertising...

#1. Free vouchers, gift certificates with a “scarcity” factor and 1800 numbers increase response. Countless tests prove that free vouchers or gift certificates multiply returns. People defer action, then forget. A gift certificate or free voucher reminds the person to take action and to either call your clinic or take it with them to the place of business. 1800 numbers encourage people to phone simply because it's free.

#2. Always use 8, 10 or 12 font size. Almost all of our reading is done in newspaper size print. If you test your results, you'll find that oversize font does not pay. Double your size and you double your cost. If your ad or flyer is interesting, people will read it in a font size they are used to. If it's not, they won't read it in any size or any style.

#3. Don't use capitals. Most of our reading is done in upper and lower case types. People are used to that. If you write in capitals, it takes time to study them out and you'll lose readers that way. Follow the natural and usual format.

#4. Pictures usually don't sell. In most cases, the cost of the extra space taken up by a picture will not pay for itself. You must experiment by trying ads with and without pictures and working out the cost of each. The one exception to this rule is a “headshot” of you (smiling). Often this will create the feeling of “familiarity and trust” with the reader.

#5. Always tell the full story. People don't read ads in a series. Every ad should tell the full story. When you attract a readers' attention, present all the arguments for your service or product. You may not get another reading from that person in months. Always include all the important benefits your service or product has. You wouldn't send out a salesperson for your clinic and tell them to “keep it brief”. You'd want them to present all the advantages of coming to your clinic and not your competitors. Newspaper or flyer advertising is simply “Salesmanship in Print”, so the general rule for ads, flyers and letters is always...

“The more you tell, the more you sell”

Tested methods to increase the power of your clinic ads, flyers, sales letters and promotions. By Gavin Hurlimann

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#6. Superlative claims don't count. Give actual facts and specifics. To say something like, "best in town", "for all your health needs" or "outstanding clinical results" makes no impression. These are expected claims and the reader loses interest and respect for you because of the exaggeration. If you say, "same day appointment" or "no appointment necessary" (when you're starting out), "serving the health needs of XXX community since XXX" or "official treatment provider for XYZ rugby team", people will realize you have credibility as they don't expect you to lie about these claims in print.

#7. Never advertise negatively. Always present the positive aspect of your service or product. Show and feature the great results your treatment has provided for your patients by including one or two line testimonials in your advertising. All people seek the same basic wants in life – happiness, safety, health, love and acceptance. Show prospects through your advertising that you and your clinic can provide these wants.

#8. Prevention does not sell. Cure does. All tests in advertising show that people will do little to prevent ill health but they will do almost anything to cure it. Patients seek the latest improvements, advantages and new ways to satisfy their desires in life. Focus your ad copy on providing the solutions and your advertising results will quickly multiply.

#9. It is an uphill battle to sell your service in print (or in person) without vouchers and free trials. To succeed in your business, you must let prospective new patients sample your treatment skills or health products. This allows them to be "emotionally" involved with you and your clinic. So offer them a FREE initial consultation on enquiring to do this. The cost of this free "sampling" is the cheapest way to get the highest results from your ads.

Free "sampling" of your clinic will build up your business in the quickest and cheapest way, particularly if you are starting from scratch.

#10. Learn what headline most appeals to your target market. You will multiply the results of your ads by eight, fourteen or nineteen times by a change of headline. A headline acts as a flashing light with a person's name on it. You select what you read by headlines. So it is with ads. You must always measure what effect a change in headline has on your results (see page 38 for the best headlines).

#11. Never rely on your judgement and experience in advertising. Test everything you do in the most exact way possible. In Australia, a panel of advertising "experts" was asked to vote on a series of ads to determine which ads had the best results. In all cases, they got 50% wrong when comparing these ads. Are you game to say you know better?...

"Test everything you do and monitor the results".

Always "sell" your benefits.

So having now established your "thing" or UBA, you should now concentrate on "branding it"

The best way to do this is to decide on your "benefits to the patient" and stick to them. Your

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benefits are the main reasons why people come to your clinic in the first place. As we have already discussed, benefits are what the patient gets from using your service, herbal formulas or other health products.

However, benefits must not be confused with “features”. In all your marketing you must always turn features into benefits. Most clinic businesses when producing a flier, brochure, or even a business card will merely list their features without pointing out the benefits of those features.

For example, here is a list of some common clinic features one always sees in many NZRA practitioners’ advertisements or fliers...

‘NZRA registered’

‘ACC healthcare provider’

‘Free parking’

‘We are on the main street’

‘We are right next to the XYZ medical centre’

‘We are the largest importer of...’

‘We have the best and largest variety of...’

‘We care’

“Masters Degree China”

These are all features that still don’t tell the prospective patient what these features mean to them or what benefit these are to them. By adding a benefit to each feature listed you can turn any piece of marketing material into a great selling tool that entices a prospective patient to your clinic and not your competitors. For example, add the following benefits to the above listed features and you will see what I mean.

NZRA registered -

‘So you will receive only professional, qualified treatment from us’

ACC healthcare provider -

‘Prompt, qualified ACC injury treatment from us’

Free parking -

‘No hassles with parking for you’

We are on the main street -

‘Easy for you to find us at our central location’

Next to the XYZ medical centre -

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'Convenient ACC referrals for any injury available from Dr XXX next door'

We are the largest importer of -

'Because of our large range, all your health requirements are taken care of here'

We have the best and largest variety of -

'You will have no need to walk all over town'

We care -

'We give you personal, individualized treatment every time'

Masters Degree China -

'Providing a wealth of treatment knowledge tailored specifically for you'

Benefits are the most important "selling tool" for any clinic business and should always be used when presenting your service or products. Never market on features alone. For a patient to pay for your services you need to spell out what the benefits of your service and clinic are for them.

Benefits when constantly used become your "brand". You already have a great CAM skill and now it's the actions and methods you employ to deliver that skill that your clinic business will become known for. In other words, the benefits to the patient of dealing with you.

You should write down all the features of your clinic business and turn them into benefits. List all of the benefits of dealing with your clinic business and have them visible everywhere. Don't just rely on yourself and your staff to tell patients - have these benefits in everyone's view every day.

Put them on all your advertising material, on your windows, on your newsletters, and on your business cards. Actually, your business card should be the number one brochure for your business. Don't waste your money by just putting your name and contact details on it, but also use it to sell your service and products (see pages 76 to 79 for business cards).

Prospective patients want to know why they should come to your business and not your competitors. The reasons "why" are your benefits and they form your brand and what it stands for. So you must push your brand in front of everyone out there, and the best way to do this is to sell the benefits. Don't sell the features, sell the benefits of your service and you will automatically sell the product - which is your TCM clinic - and get more profits.

Set out to create an image that people are drawn to and then be consistent in developing that image in the public eye. Create that perception of value by always "selling" your benefits (see page 23 for UBAs and Branding).

This article is an excerpt from "How to get more profits from your clinic – even if you have little or no money!" Gavin Hurlimann is the editor in chief of the NZRA Journal of TCM, a practicing acupuncturist in Auckland, New Zealand and an acknowledged expert in marketing for healthcare practitioners. For more info, email: hurlimann@slingshot.co.nz

10/03/2007 - Clinical observation on treatment of melancholia

10/03/2007 - Clinical observation on treatment of melancholia by acupuncture following principle of relieving depression and regulating mentality.

Country: China

Institute: The First Teaching Hospital of Tianjin Traditional Chinese Medicine College, Tianjin. tjnlsj@sina.com



Author(s): Li SJ, Liu T.

Journal: Zhongguo Zhong Xi Yi Jie He Za Zhi.

Abstract:

OBJECTIVE: To observe the curative effect of acupuncture following principle of relieving depression and regulating mentality (RDRM) in treating patients with melancholia, and compare it with that of Western medicinal treatment.

METHODS: Patients in the observed group were treated with needling and electroacupuncture (EA), and those in the control group orally taken Fluoxetine or Paroxetine. The curative effect, Hamilton Depression Scale scores (HAMD), effect initiating time and sustaining time were observed and compared.

RESULTS: The total effective rate was 87.5% and 79.1% in the observed group and the control group respectively, showing insignificant difference between them ($P > 0.05$), but comparison of the initiating time and sustaining time between the two groups did show significant different ($P < 0.01$).

CONCLUSION: Acupuncture with following RDRM principle has definite effect in treating melancholia, which is comparable to Western medicinal treatment, and shows a superiority to the latter in effect initiating and sustaining time.

12/03/2007 - Electro-acupuncture in relieving labor pain.

Country: China

Institute: Heilongjiang University of Chinese Medicine
Harbin China.

Author(s): Qu F, Zhou J.

Journal: Evid Based Complement Alternat Med. 2007
Mar;4(1):125-30. Epub 2006 Aug 17.

**Abstract:**

To study the efficacy of electro-acupuncture for the relief of labor pain, and to build a better understanding of how electro-acupuncture might influence the neuroendocrine system, 36 primiparas were randomly divided into an electro-acupuncture group and a control group.

Assessments of pain intensity and degree of relaxation during labor were analyzed. The differences between the electro-acupuncture group and the control group on the concentration of beta-endorphin (beta-EP) and 5-hydroxytryptamine (5-HT) in the peripheral blood were compared.

The electro-acupuncture group was found to exhibit a lower pain intensity and a better degree of relaxation than the control group ($p = 0.018$; $p = 0.031$). There existed a significant difference in the concentration of beta-EP and 5-HT in the peripheral blood between the two groups at the end of the first stage ($p = 0.037$; $p = 0.030$).

Electro-acupuncture was found to be an effective alternative or complementary therapy in the relief of pain during labor. The benefit of electro-acupuncture for relieving labor pain may be based on the mechanism of producing a synergism of the central nervous system (CNS) with a direct impact on the uterus through increasing the release of beta-EP and 5-HT into the peripheral blood.

Electro-Acupuncture reduces inflammation and regulates immune activity in arthritic mice.**14/03/2007 - Electro-acupuncture at acupoint ST36 reduces inflammation and regulates immune activity in Collagen-Induced Arthritic Mice.****Country:** South Korea**Institute:** Department of Meridian and Acupoint, Department of Acupuncture and Moxibustion and East-West Cancer Center of Dunsan Hospital, College of Oriental Medicine, Daejeon university South Korea.**Author(s):** Yim YK, Lee H, Hong KE, Kim YI, Lee BR, Son CG, Kim JE.**Journal:** Evid Based Complement Alternat Med. 2007 Mar;4(1):51-7. Epub 2006 Aug 18.**Abstract:**

This study aimed to investigate the anti-inflammatory, anti-arthritic and immuno-regulatory effects of electro-acupuncture (EA) at ST36 on Collagen-induced arthritis (CIA) in mice. Male DBA/1J mice were divided into five groups: Normal, Control, NR (needle retention), EAI and EAll. All mice except those in the normal group were immunized with Collagen II for arthritis induction.

Acupuncture needles were inserted into mice ST36 and electrical currents at a frequency of 2 Hz in a continuous rectangular wave form were conducted through the needles for 15 min, 3 times a week. EA treatments were administered for 5 weeks in the EAI group and for 9 weeks in the EAll group. The mice in the NR group were acupunctured in the same manner as the EA groups and the needles were retained for 15 min without electrical stimulation. CIA incidence analysis, ELISA, histological analysis and FACS analysis were performed to evaluate the effect of EA on CIA.

EA at ST36 significantly reduced CIA incidence, IL-6, TNF- α , INF-gamma, collagen II antibody, IgG and IgM levels in CIA mice serum and prevented knee joint destruction. EA at ST36 also reduced CD69+/CD3e+ cells and CD11a+/CD19+ cells in CIA mice lymph nodes, and CD11b+/Gr1+ cells in CIA mice knee joints. The ratios of CD3e+ cells to CD19+ cells, and CD8+ cells to CD4+ cells were maintained closer to the normal range in the EA groups as compared with the control group or the NR group. EAll was more effective than EAI throughout all the measurements. The NR was effective as well, though less effective than EA. EA at ST36 may have an anti-inflammatory, anti-arthritic and immuno-regulatory effects on CIA in mice. The effectiveness is stronger when EA starts earlier and is applied longer. Needle retention without electrical stimulation may be effective on CIA as well, however less effective than EA. Electrical stimulation and acupoint ST36 may have synergistic effects on CIA.

Electro Acupuncture produces a cardioprotective effect.

20/03/2007 - Electro Acupuncture produces a cardioprotective effect against ischemia and reperfusion which may be mediated via the beta(1)-AR-Gs-protein-cAMP pathway

Country: China

Institute: Department of Physiology, Institute of Acupuncture, China Academy of Chinese Medical Sciences, PR China.

Author(s): Gao J, Fu W, Jin Z, Yu X.

Journal: Life Sci. 2007 Jan 20; [Epub ahead of print]

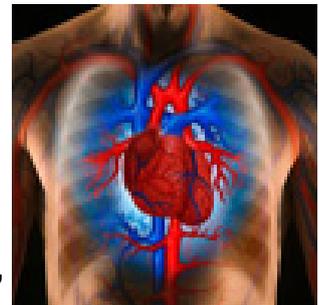
Abstract:

Our previous study showed that a cardioprotective effect was produced by pre-treatment with acupuncture at bilateral Neiguan acupoints (PC6) and the effect of EA was diminished by propranolol, a nonspecific antagonist of beta-adrenoceptors (beta-ARs) which are the most powerful cardiac receptors, indicating an involvement of beta-ARs. The present study explored further the signaling mechanism underlying the cardioprotective effect of acupuncture pretreatment in rats subjected to myocardial ischemia and reperfusion (MIR). Myocardial ischemia was achieved by ligating the left anterior descending coronary artery and reperfusion by releasing the ligation.

Adult rats were divided into three groups, namely, a normal control (NC) group, a group subjected to ischemia and reperfusion (IR) only, and a group given electroacupuncture (EA) before IR. For EA, bilateral Neiguan points (PC6) of the rats were stimulated for 30 min once a day for 3 consecutive days. The ST segment of ECG, the ratio of infarct size over risk zone, and the contents of beta(1)-adrenoceptor (beta(1)-AR), Gsalpha protein and cAMP in ischemic myocardium were compared among the three groups.

IR increased the elevation of ECG ST segment, myocardial infarct size, contents of beta(1)-AR, Gsalpha protein and cAMP. These effects were attenuated by EA pretreatment at bilateral Neiguan acupoints.

In conclusion, the present results indicate that EA produces cardioprotective effect against IR which may be mediated via the beta(1)-AR-Gs-protein-cAMP pathway.



Triple-puncture for tennis elbow.

23/03/2007 - Therapeutic effect of triple puncture at Tianzong (SI 11) as main method on obstinate tennis elbow.

Country: China

Institute: Shanghai Guanghua Hospital of Integrated Traditional Chinese and Western Medicine, Shanghai 200052, China. giq1973@sohu.com



Author(s): Gu JQ, Shan YH.

Journal: Zhongguo Zhen Jiu. 2007

Abstract:

OBJECTIVE: To compare the therapeutic effects of triple puncture at Tianzong (SI 11) and routine acupuncture on obstinate tennis elbow.

METHODS: Sixty-two cases were randomly divided into 2 groups. The treatment group of 32 cases were treated with triple puncture at Tianzong (SI 11) combined with local points of the elbow, and the control group of 30 cases were treated with local points of the elbow. After one therapeutic course, changes of the symptoms and signs between the two groups were compared.

RESULTS: The cured rate of 71.900 in the treatment group was significantly better than 43.3% in the control group ($P < 0.05$).

CONCLUSION: Triple puncture combined with routine acupoint selection therapy has a better therapeutic effect on obstinate tennis elbow than the routine acupoint selection therapy.

Acupuncture with motortherapy for early treatment of cerebral palsy.

24/03/2007 - Clinical observation on acupuncture combined with motortherapy for early treatment of cerebral palsy high risk infants

Country: China

Institute: Department of Rehabilitation, Guiyang Children's Hospital, Guizhou 550002, China. zhxb29@126.com

Author(s): Zhong XB, Xia ZH, Kong YY, Yuan Y, Liu LW.

Journal: Zhongguo Zhen Jiu. 2007 Feb;27(2):106-8.

Abstract:

OBJECTIVE: To observe the effect of early treatment with acupuncture and motortherapy on developmental quotient (DQ) of cerebral palsy high risk infants.

METHODS: Sixty cerebral palsy high risk infants were divided into an acupuncture combined with motortherapy group (treatment group) and a control group, 30 cases in each group. Changes of DQ were investigated by the children mental development scale.

RESULTS: The DQ in the treatment group was significantly higher than that in the control group ($P < 0.001$), with a very significant difference between the two groups in the different grades of DQ ($P < 0.005$). Incidence of cerebral palsy in the treatment group significantly lower than that in the control group ($P < 0.005$).

CONCLUSION: Acupuncture combined with motortherapy can effectively improve intelligence level and motor function, and reduce the incidence of cerebral palsy for cerebral palsy high risk infants at early stage.



Acupuncture for treatment of peptic ulcer

25/03/2007 - Multicentral randomized controlled trials of acupuncture at Zhongwan (CV 12) for treatment of peptic ulcer

Country: China

Institute: Department of Acupuncture, First Affiliated Hospital of Tianjin, TCM University, Tianjin 300193, China.

Author(s): Niu HY, Yang M, Qiang BQ, Guo QJ, Yang ZG.

Journal: Zhongguo Zhen Jiu. 2007 Feb;27(2):89-92.

Abstract:

OBJECTIVE: To evaluate the efficacy and safety of acupuncture at Zhongwan (CV 12) for treatment of peptic ulcer.

METHODS: Two hundred and seventy-six cases enrolled were randomly divided into an acupuncture group and a control group, 138 cases in the acupuncture group were treated with deep needling at Zhongwan (CV 12) with a long needle, and 138 cases in the control group were treated with climeidine. The therapeutic effects were evaluated by clinical symptoms and gastroscopy. They were investigated for 6 weeks.

RESULTS: The acupuncture group was better than the control group in rapid alleviation of stomachache and improvement of appetite ($P < 0.05$). The total effective rate was 90.6% in the acupuncture group and 88.4% in the control group with no significant difference ($P > 0.05$). The symptoms improved significantly in the two groups ($P < 0.01$), but with no significant difference between the two groups ($P > 0.05$). There was no significant difference between the two groups in the therapeutic effect of gastroscopy ($P > 0.05$).

CONCLUSION: Acupuncture at Zhongwan (CV 12) has a reliable therapeutic effect on peptic ulcer.



Acupuncture as therapy for essential hypertension.

27/03/2007 - Acupuncture, a promising adjunctive therapy for essential hypertension: a double-blind, randomized, controlled trial.

Country: Korea

Institute: Department of Acupuncture, CHA Biomedical Center, College of Medicine, Pochon CHA University, Seoul 135-081, Korea.

Author(s): Yin C, Seo B, Park HJ, Cho M, Jung W, Choue R, Kim C, Park HK, Lee H, Koh H.

Journal: Neurol Res. 2007;29 Suppl 1:98-103.

Abstract:

BACKGROUND: This study assessed effects of acupuncture as an add-on to conventional antihypertensive managements such as medication or lifestyle modification for hypertensive or pre-hypertensive subjects.

METHODS: A randomized, double-blind, placebo-controlled trial was conducted at Kyung Hee University Hospital. Forty-one hypertensive or pre-hypertensive (systolic BP \geq 120 mmHg or diastolic BP \geq 80 mmHg) volunteers were recruited and randomly assigned into real or sham acupuncture groups. The hypertensive subjects on antihypertensive medication continued their medication. Acupuncture point prescriptions were partially individualized, based on the Saam acupuncture theory. Park's sham needle method was adopted for the sham procedure. Measurements were performed at baseline, weeks 4 and 8. BP, scales of overall health and pain, and anticipation or satisfaction for the treatments, were recorded.

RESULTS: Thirty subjects completed the intervention, all of whom were on anti-hypertensive medication. The sham acupuncture group showed no significant change in mean BP, while the real acupuncture group showed a significant ($p < 0.01$) decrease in mean BP after 8 weeks of intervention from 136.8/83.7 to 122.1/76.8 mmHg. Other factors showed no difference between the groups throughout the study.

CONCLUSION: Acupuncture seems to offer an additional benefit to the treatment of hypertensive patients.



Acupuncture decreases apoptosis and cell proliferation.

29/03/2007 - Acupuncture decreases ischemia-induced apoptosis and cell proliferation in dentate gyrus of gerbils.

Country: Korea

Institute: College of Korean Medicine, Semyung University, Jechon 390-711, Korea.

Author(s): Chung JH, Lee EY, Jang MH, Kim CJ, Kim J, Ha E, Park HK, Choi S, Lee H, Park SH, Leem KH, Kim EH.

Journal: Neurol Res. 2007;29 Suppl 1:23-7.

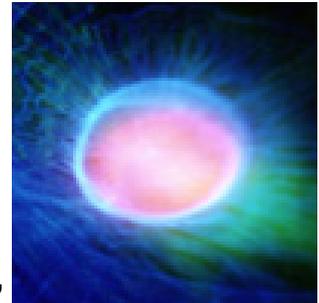
Abstract:

BACKGROUND: Acupuncture has been used for the enhancement of functional recovery from various disorders. In the present study, the effect of acupuncture on the apoptosis and new cell proliferation in the hippocampal dentate gyrus of gerbils (n = 25) following transient global ischemia was investigated.

METHODS: To determine the level of apoptosis and cell proliferation, terminal deoxynucleotidyl transferase-mediated dUTP nick end-labeling (TUNEL) assay and immunohistochemistry for 5-bromo-2'-deoxyuridine (BrdU) were employed respectively.

RESULTS: In the dentate gyrus of ischemic gerbils, the number of both TUNEL- and BrdU-positive cells ($66.01 \pm 2.45/\text{mm}^2$ and $514.38 \pm 44.90/\text{mm}^2$) was significantly increased compared to that of the sham-operated gerbils ($11.25 \pm 1.85/\text{mm}^2$ and $111.47 \pm 10.95/\text{mm}^2$). Among the acupuncture (ST36, LI4 or non-acupoint) treated groups, ST36 acupoint treated group showed the most potent apoptosis ($20.52 \pm 2.40/\text{mm}^2$) and proliferation ($159.38 \pm 24.05/\text{mm}^2$) suppressive effects (approximately 70% decreases in both apoptosis and cell proliferation).

CONCLUSION: These results may suggest that acupuncture treatment alleviates ischemia-induced apoptosis and presents possible therapeutic potentials in the recovery from ischemic cerebral injury.



Herbal Acupuncture against apoptosis in human neuroblastoma.

28/03/2007 - Neuroprotective effect by Dammishimgyu-herbal acupuncture against H₂O₂-induced apoptosis in human neuroblastoma, SH-SY5Y cells.

Country: Korea

Institute: TKM Research Group, Kyung Hee University, Seoul 130-701, Korea.

Author(s): Park HJ, Kim Y, Kim H, Ha E, Park H, Yoon S, Kim MJ, Choi S, Ryu Y, Park HK, Hong M.

Journal: Neurol Res. 2007;29 Suppl 1:93-7.

Abstract:

BACKGROUND: The free radical is involved in neuronal cell death in human neurodegenerative disease. Dammishimgyu (DMSG)-herbal acupuncture has been used to treat neurological disorders in Korea. The present study was aimed to investigate the neuroprotective effect of DMSG-herbal acupuncture against H₂O₂-induced apoptosis in human neuroblastoma cell line, SH-SY5Y.

METHODS: The neuroprotective effect of DMSG-herbal acupuncture on H₂O₂ induced apoptosis was investigated by 3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyltetrazolium bromide (MTT) assay, 4,6-diamidino-2-phenylindole (DAPI) staining, reverse transcription-polymerase chain reaction (RT-PCR), western blots and nitrite assay.

RESULTS: In this study, 100 μM H₂O₂-treated cells decreased the cell viability with apoptotic features and increased the production of nitric oxide (NO). However, 0.1% DMSG treatment after exposure to 100 μM H₂O₂ inhibited both H₂O₂-stimulated mRNA and protein expressions of BCL2-associated X protein (BAX) and caspase 3 apoptosis-related cysteine peptidase (CASP3). In addition, 0.1% DMSG treatment inhibited the increased NO production induced by H₂O₂.

CONCLUSION: These results suggest that DMSG-herbal acupuncture shows protective effect against H₂O₂-induced neuronal damage.

