Introduction to Acupuncture

• Acupuncture is an ancient Chinese method that involves placing fine needles at specific points on the body’s surface.
• The belief is that there is a continuous circulation of energy, or life force, “Qi” in the organism.
• Blockage in the flow of Qi cause “imbalance” that may result in disease.
• These imbalance can be corrected by inserting needle into skin at identifiable sites (acupoints).

Acupuncture points

- Acupoints are like wells that connect water from underground waterways to the earth’s surface.
- The wells conduct electricity better, because water conducts electricity better.
- Wells are places where materials can sink into the ground easily.
- The temperature of water in the wells reflects the temperature of the ground directly below, or from distant places connected by underground waterways.
- The water in meridians is actually comprised of stable water clusters. Underground waterways are like meridians. Water flows between soil particles, as if flows between cells of ordinary connective tissues inside the human body.

Y Lu, Acupuncture Today, 2004, 05 (5)

Meridians

• Acupuncture points linked together in lines called “meridians”
• Meridians named for associated organ
  – Kidney, Heart, Small Intestine, Bladder
  – Liver, Pericardium, Triple Energizer, Gallbladder
  – Spleen, Lung, Large Intestine, Stomach

Meridians

<table>
<thead>
<tr>
<th>Meridians</th>
<th>6 Yang</th>
<th>6 Yin</th>
</tr>
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<tbody>
<tr>
<td>365 Main Points</td>
<td>Extra Points</td>
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Chinese Medicine and Acupuncture

• Form a diagnosis first before the treatment of acupuncture

• The following concepts must be understood prior to make the diagnosis

Yin and Yang

• Four (4) possible states of imbalance:
  – Excess of Yin
  – Excess of Yang
  – Deficiency of Yin
  – Deficiency of Yang

• In general, every treatment modality aims to:
  – Tonify Yang
  – Tonify Yin
  – Disperse excess Yang
  – Disperse excess Yin

The Principles of Traditional Chinese Medicine

• 8 Principles of Disease
  – Yin & Yang
  – Interior & Exterior
  – Cold & Hot
  – Deficiency & Excess

Acupuncture Treatment

• By “Tonifying” deficiencies and “Dispersing” excesses to restore the body balance
  – Release excess Fire
  – Tonify deficient Water
  – Use Acupuncture and Chinese Herbs in combination

Chinese Diagnostics

• Tongue
  – Color, size, wetness/“scalloping”, coating, cracks
  – Geographic representations of organs
  – Clinical changes occur slowly (weeks)

• Pulses
  – Radial artery
  – Organ assessment at certain positions/depths
  – Clinical changes occur quickly (during treatment)
Biological Effects of Acupuncture

Hypotheses:
- May be mediated by nerves
- Produce endogenous opioids
  - The analgesic effects of acupuncture are at least partially explained by this action.
  - The opioid antagonist, naloxone, reverses the analgesic effects of acupuncture
- Activation of the hypothalamus and the pituitary gland → alteration in the secretion of neurotransmitters and neurohormones & changes in the regulation of blood flow, both centrally & peripherally → a broad spectrum of systemic effects.
- Alterations in immune functions.

History of Acupuncture in America

- 1973 – 1st Acupuncture practice laws passed in Maryland, Nevada and Oregon
- 1982 – The National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) was established to set national standards of competence
- 1988 – The Accreditation Commission for Acupuncture Oriental Medicine (ACAOM) was recognized by the U.S. Department of Education (USDE) for the accreditation of Masters degree and Masters level acupuncture. In 1992 this was expanded to include programs in Oriental Medicine.
- 1996 – The U.S. Food and Drug Administration (FDA) approved acupuncture needles for use by licensed practitioners, listing them as Class II medical devices.
- NIH 1997 Consensus Conference showed “clear evidence” of acupuncture efficacy in various clinical conditions and deemed appropriate as “part of comprehensive care for others.”
- 2002 – The National Institutes of Health (NIH) conducted the largest and most comprehensive survey of complementary and alternative medicine (CAM) used by Americans adults – over 8 million adults have used acupuncture and 2.1 million U.S. adults had used acupuncture in the previous year.

NIH Consensus Conference on Acupuncture, Nov. 1997

- “There is sufficient evidence of acupuncture’s value to expand its use into conventional medicine and to encourage further studies of its physiology and clinical value”
  - JAMA 280:1518-1524, 1998

NIH Consensus Panel

- Clear evidence for acupuncture’s efficacy for treating:
  - postoperative and chemotherapy-induced nausea and vomiting
  - nausea of pregnancy
  - postoperative dental pain
**Acupuncture in Women's Health**

- Greater awareness in recent years
- Became one of the forefront options of the complementary/alternative medicine
- Been used to treat: menstrual problems, menopausal symptoms, infertility and general fertility issues, labor pain, general health, and the other unique problems related to women's health

**Acupuncture and Dysmenorrhea**

- Dysmenorrhea is painful menstruation occurs before, during, and after a woman's menstruation.
- The cramping can occur mainly in the lower abdomen, but can also be experienced in the lower back and even down the legs.
- Pain symptoms vary from woman to woman but normally present as throbbing, sharp pain that often come and go or a constant, dull pain.

**Acupuncture and Dysmenorrhea**

- From a Chinese medicine perspective, the symptoms point to underlying imbalances that can be corrected
- Pain is related to a blockage of body's internal energy, Qi
- Balance body's Ying and Yang, and unblock the internal channel (meridian) will result in relief of pain and other symptoms
- There are multiple patterns of imbalance involved in a patient's health presentation.
Acupuncture and Dysmenorrhea

Acupuncture may be able to play a unique role in treating pain conditions influenced by an underlying hormonal imbalance.

- **Qi and Blood stagnation**
  - Goal of acupuncture: to regulate Qi, promote circulation of blood, remove stasis
  - **Acupoints:** LR 3, 8, SP 6, Ren 6
    - add SJ 5, 6, BL 18 if chest/breast distension
    - add BL 32 if severe low abdominal pain
    - add PC 6, ST 36 if nausea, vomiting

- **Damp/Cold stagnation**
  - Goal of acupuncture: to disperse Cold, eliminate Damp, warm Jing
  - **Acupoints:** Ren 3, ST 28, SP 6, 8
    - add BL 23, Ren 4 if Kidney deficiency
    - add BL 11, 23 if body aches
    - add LR 2 if large clots

- **Liver Qi stagnation with Damp/Heat**
  - Goal of acupuncture: to clear Heat and Damp, regulate Liver Qi
  - **Acupoints:** LR 3 & SP 6, Ren 3 & BL 32
    - add LR 8 if low abdominal burning

- **Qi and Blood deficiency**
  - Goal of acupuncture: to correct the deficiency and "boost" Qi
  - **Acupoints:** Ren 6, BL 20, SP 6, ST 36, Zi Gong
    - add Ren 4, ST 30, and moxa if "deficient" and "cold"

Acupuncture in patients with dysmenorrhea: a randomized study on clinical effectiveness and cost-effectiveness in usual care

- **OBJECTIVE:** To investigate the clinical effectiveness and cost-effectiveness of acupuncture in patients with dysmenorrhea.
- **STUDY DESIGN:** A randomized controlled trial plus non-randomized cohort, patients with dysmenorrhea were randomized to acupuncture (15 sessions over three months) or to a control group (no acupuncture). Patients who declined randomization received acupuncture treatment. All subjects were allowed to receive usual medical care.
- **RESULTS:** Of 649 women (mean age 36.1 +/- 7.1 years), 201 were randomized. After three months, the average pain intensity (NRS 0-10) was lower in the acupuncture compared to the control group: 3.1 (95% CI 2.7; 3.6) vs. 5.4 (4.9; 5.9), difference -2.3 (-2.9; -1.6); P<.001. The acupuncture group had better quality of life and higher costs. (overall ICER 3,011 euros per QALY).
- **CONCLUSION:** Additional acupuncture in patients with dysmenorrhea was associated with improvements in pain and quality of life as compared to treatment with usual care alone and was cost-effective within usual thresholds.

Acupuncture and Infertility

Causations of Infertility in Chinese Medicine

**Male-**
1. Kidney Yin deficiency
2. Kidney Yang deficiency
3. Liver Qi stagnation
4. Spleen deficiency
5. Blood stagnation

**Female-**
1. Kidney deficiency
2. Cold uterus
3. Blood deficiency
4. Liver depression
5. Stagnant heat
6. Phlegm dampness

Kidney deficiency: signs & symptoms
- Scanty, dark discharge at the end of the period or amenorrhea
- Severe lumbago, dizziness, tinnitus
- Cold sensation in the lower abdomen, loose stools, copious, clear urine
- Dark facial complexion
- Tongue is pale with thin white coating
- Pulse is deep, thread and weak

Cold Uterus
- Prolonged menstrual discharge but scanty in volume and mixed with dark clots
- Cold lower abdominal pain relieved by warmth
- The tongue coating is thin and white
- The pulse is sunken and slow

Blood Deficiency: signs & symptoms
- Withered, sallow complexion
- Scanty menstrual discharge during the last few days of the period but light in color, dizziness, blurred vision, dry skin, constipation
- Insidious pain after menstruation.
- Tongue is pale
- Pulse is thread and weak

Liver Depression: signs & symptoms
- Early or late menstruation, scanty in volume and dark in color
- Abdominal distention
- Premenstrual breast distention
- Mental depression, eructation and sighing
- Tongue is red with a thin coating
- Pulse is wiry and rapid

Stagnant Heat: signs & symptoms
- Scanty menstrual volume, red purplish in color and mixed with clots.
- Distention and pain in the lower abdomen, especially along the sides, which refuses palpation.
- History of lumbar soreness
- Distension & pain of the chest and hypochondria
- Tongue is red with a thin coating
- Pulse is wiry and rapid
**Phlegm dampness: signs & symptoms**

- An obese constitution
- History of excessive phlegm
- Pallor or puffiness
- Delayed menstruation or amenorrhea and excessive leucorrhea
- Tongue has a thin, white coating
- Pulse is wry and slippery

**Acupuncture for Infertility**

- Regulating the menstrual cycle
- Invigorate the sperm qualities
- Enhancing the ovarian function
- Healing PMS, Amenorrhea, Endometriosis and blocked fallopian tubes
- Balance the hormone
- Increase the effectiveness of IVF, GIFIT, ZIFT, and ET procedures

**Acupuncture Enhances Fertility by**

- Enhance hormone regulation
- Regular menstrual cycles
- Protect the fragile embryo
- Reduces stress
- Strengthen the immune system

**Mechanisms of acupuncture in treating infertility**

- Endorphins releases
  - mitigate one’s response to stressful stimuli, enhance the possibility of conception
- Minimize prolactin
  - Elevated prolactin could cause irregular ovulation

**Mechanism of Acupuncture**

- Highly increase of the egg production
- Regulate the function of hormone levels

**Acupuncture & Protection of Embryo**

- Acupuncture boost blood flow to women’s reproductive organs and providing better nourishment
- Improve the lining of the uterus, enhance the embryo becomes embedded after conception
- Improve implantation and prevent the risk of miscarriage.
Acupuncture & IVF procedures

- Research in Christian Laurizen Institute in Germany

- 160 women getting IVF
- Acupuncture before & after the embryo transfer
- 50% of the patients increased successful implantation.
- IVF group: 26.3%
- IVF plus acupuncture: 42.5%

Acupuncture and Pregnancy related Nausea

- Nausea and vomiting of pregnancy (NVP) is the most common medical condition in pregnancy, affecting 50%–90% of women.
- The most severe form of NVP is commonly referred to as hyperemesis gravidarum (HG).

Acupuncture To Treat Nausea and Vomiting in Early Pregnancy: A Randomized Controlled Trial

- **Background**: A single blind randomized controlled trial to determine whether acupuncture reduced nausea, dry retching, and vomiting, and improved the health status of women in pregnancy.
- **Methods**: The trial was undertaken at a maternity teaching hospital in Australia, where 563 women < 14 wks pregnant with symptoms of nausea or vomiting were randomized into 4 groups: traditional acupuncture, P6 acupuncture, sham acupuncture, or no acupuncture (control). Treatment was administered weekly for 4 weeks. The primary outcomes were nausea, dry retching, vomiting, and health status. Comparisons were made between groups over 4 consecutive weeks.
- **Results**: Traditional acupuncture group reported less nausea (p < 0.01) throughout the trial and less dry retching (p < 0.01) from the second week compared with women in the no acupuncture control group. P6 acupuncture group (p < 0.01) reported less nausea from the second week of the trial, and less dry retching (p < 0.001) from the third week compared with women in the no acupuncture control group. Sham acupuncture group (p < 0.01) reported less nausea and dry retching (p < 0.001) from the third week compared with women in the no acupuncture group. No differences in vomiting were found among the groups at any time.
- **Conclusion**: Acupuncture is an effective treatment for women who experience nausea and dry retching in early pregnancy. A time-related placebo effect was found for some women. (BIRTH 29:1 March 2002)

Acupuncture for nausea and vomiting: an update of clinical and experimental studies

- **Background**: Summarized existing knowledge about the effects of acupuncture-point stimulation on nausea and vomiting.
- **Methods**: Included systematic reviews, postoperative nausea and vomiting, chemotherapy-induced nausea and vomiting, and pregnancy-related nausea and vomiting.
- **Results**: For postoperative nausea and vomiting, results from 26 trials showed acupuncture-point stimulation was effective for both nausea and vomiting. For chemotherapy-induced nausea and vomiting, results from 11 trials differed according to modality with acupressure appearing effective for first-day nausea, electroacupuncture appearing effective for first-day vomiting, and randomized sham acupuncture appearing no more effective than placebo for any outcomes. For pregnancy-related nausea and vomiting, results were mixed. Experimental studies showed effects of acupuncture on gastric myoelectrical activity, vagal modulation and cerebellar vestibular activity. There is evidence that acupuncture stimulates or suppresses the vomiting center in the brain, resulting in preventing or stimulating nausea and vomiting. A growing number of experimental studies suggest mechanisms of action.

Acupuncture and Menopause

- Changes in periods.
- Hot flashes.
- Heavy sweating and cold shivering, and night sweats.
- Mood changes and irritability
- Sleep problems.
- Sex Drive Change and dry vagina
- Other signs and symptoms: poor memory, ear ringing, dizziness, vertigo,
- Blurred vision, dry skin, itching skin, or joint and muscle stiffness and pain.

Causes & Mechanisms

- **Imbalance of Yin and Yang caused by**
  - Deficiency of Kidney
  - Qi deficiency
  - Yin deficiency
  - Yang deficiency
  - Essence deficiency (Tian Kui, one kind of congenital essence – may compare to hormones in western medicine)
- **Deficiency of Chong & Ren Channels**
- **Disorder of functions of Liver, Spleen, Heart, etc**
Treatment Principles

- Restore and Maintain the balance of Yin & Yang of internal organs (include Qi, Blood, and essence, etc.)
  - For Yin deficiency: Nourish Yin, Kidney, Liver, Heart;
  - For Yang deficiency: Warm the Yang, Kidney, Spleen
  - For both Yin & Yang deficiency: Tonify both Yin and Yang

Acupuncture and Menopause

- Acupuncture Points: the common points, need modify based on symptoms.
  - Du 26 - Located on the top of the head, midway between the ears. This point helps clear the spirit and balances the yin and yang elements of the body.
  - Bladder 23 (BL 23) - A lower back point that is level to the second lumbar vertebrae. The point helps invigorate the kidney system and balances kidney essence. It is often used to strengthen the lumbar region and the knees.
  - Kidney 3 (KI 3) - Located in the depression between the inside ankle bone and the Achilles tendon, level with the tip of the ankle bone. Kidney 3 invigorates and strengthens the kidney system and helps regulate the clitoris.
  - Kidney 7 (KI 7) - Located approximately 2 fingers breadth above Kidney 3. It is used to treat hot flashes and night sweats.
  - Spleen 6 (SP 6) - Located about 4 fingers breadth above the tip of the inside ankle bone in a depression. This is one of the most influential points for women's health.

The Acupuncture on Hot Flushes Among Menopausal Women (ACUFLASH) Study: a randomized controlled trial

- OBJECTIVE: The study compared the effectiveness of individualized acupuncture plus self-care versus self-care alone in improving health-related quality of life in postmenopausal women.

- METHODS: This study included 120 women randomly assigned to two parallel arms. Participants were postmenopausal women experiencing ≥ 7 hot flashes per 24 hours during 7 consecutive days. The acupuncture group received 10 acupuncture treatment sessions and advice on self-care, while the control group received advice on self-care only. The frequency and severity of ≥ 10 episodes of hot flashes were recorded in a diary. Urinary excretion of calcitonin gene-related peptide was assessed at baseline and after 12 weeks. The primary outcome was change in mean hot flash frequency and severity.

- RESULTS: Significant frequency decreased by 6.4 per 24 hours in the acupuncture group (p = 0.04) and 2.7 per 24 hours in the control group (p = 0.2), a difference of 3.7 (95% CI: 0.40-6.97). Urinary excretion of calcitonin gene-related peptide was assessed at baseline and after 12 weeks. The secondary outcome was change in health-related quality of life measured by the Women's Health Questionnaire.

- CONCLUSIONS: Acupuncture plus self-care can contribute to a clinically relevant reduction in hot flashes and increased health-related quality of life in postmenopausal women.

Manual and Electroacupuncture for labor pain: study design of a longitudinal randomized controlled trial

- INTRODUCTION: This study aimed to evaluate the effects of SP6 acupressure on labor pain and delivery time in women in labor.

- METHODS: This study involved a multicenter, randomized, controlled trial with two parallel arms. Participants were women in active labor randomized to receive SP6 acupressure or control intervention. The primary outcome was the change in VAS scores (visual analog scale). Secondary outcomes included delivery time, blood loss, and neonatal outcomes.

- RESULTS: Significant differences were observed in VAS scores between the intervention and control groups. The intervention group had a lower VAS score immediately after the intervention and at 30 and 60 minutes after the intervention. Length of delivery time was significantly shorter in the intervention group. Neonatal outcomes were comparable between the groups.

- CONCLUSIONS: SP6 acupressure can be an effective nursing management for women in labor.

Effects of SP6 acupressure on labor pain and length of delivery time in women during labor

- OBJECTIVE: To evaluate the effects of SP6 acupressure on labor pain and delivery time in women in labor.

- DESIGN: Randomized clinical trial.

- SETTING/LLOCATION: Delivery room in a university hospital.

- PARTICIPANTS: Women in labor were randomly assigned to receive the SP6 acupression (n = 120) or control intervention (n = 120). The participants were matched according to parity, cervical dilation, labor stage, rupture of amniotic membrane, and intervention: immediately after the intervention (p = 0.012); 30 minutes after the intervention (p = 0.021); and 60 minutes after the intervention (p = 0.006).

- RESULTS: There were significant differences between the groups in subjective labor pain scores at all time points following the intervention. Immediately after the intervention (p = 0.012), 30 minutes after the intervention (p = 0.006), and 60 minutes after the intervention (p = 0.006). The length of delivery time was significantly shorter in the SP6 acupression group than in the control group (p = 0.006). Neonatal outcomes were comparable between the groups.

- CONCLUSIONS: These findings showed that SP6 acupression was effective for decreasing labor pain and shortening the length of delivery time. SP6 acupression can be an effective nursing management for women in labor.

Acupuncture for chronic headache in primary care: large, pragmatic, randomized trial

- OBJECTIVE: To determine the effects of a policy of "use acupuncture" on headache, health status, days off sick, and use of resources in patients with chronic headache compared with a policy of "no acupuncture".

- DESIGN: Feasibility, controlled trial.

- SETTING: General practices in England and Wales.

- PARTICIPANTS: 401 patients with chronic headache predominantly migraine. Expansion of NHS acupuncture services should be considered.

- MAIN OUTCOME MEASURES: Headache score, SF-36 health status, and use of resources were assessed at baseline, three, and 12 months. Use of resources was assessed every three months.

- RESULTS: Significant reductions were found in headache score, SF-36 health status, and use of resources compared with baseline and control group at three and 12 months. Use of resources was assessed every three months.

- CONCLUSIONS: Acupuncture can be an effective treatment for chronic headache, particularly migraine. Expansion of NHS acupuncture services should be considered.

A randomized controlled trial of acupuncture added to usual treatment for fibromyalgia.

**OBJECTIVE:** To evaluate the effectiveness of acupuncture for fibromyalgia.

**METHODS:** 58 women with fibromyalgia were allocated randomly to receive either acupuncture together with tricyclic antidepressants and exercise (n=34), or tricyclic antidepressants and exercise only (n=24). Patients rated their pain on a visual analogue scale. A blinded assessor evaluated both the mean pressure pain threshold value over all 10 fibromyalgia points and quality of life using SF-36.

**RESULTS:** At the end of 20 sessions, patients who received acupuncture were significantly better than the control group in all measures of pain and in 5 of the SF-36 subscales. After 6 months, the acupuncture group was significantly better than the control group in numbers of tender points, mean pressure pain threshold at the 18 tender points and 3 measures of pain and in 5 of the SF-36 subscales. After 1 year, the acupuncture group showed significance in one subscale of the SF-36; at 2 years there were no significant differences in any outcome measures.

**CONCLUSIONS:** Addition of acupuncture to usual treatments for fibromyalgia may be beneficial for pain and quality of life for 3 years.

**CONCLUSION:** At the end of 20 sessions, patients who received acupuncture were significantly better than the control group in all measures of pain and in 5 of the SF-36 subscales. After 6 months, the acupuncture group was significantly better than the control group in numbers of tender points, mean pressure pain threshold at the 18 tender points and 3 measures of pain and in 5 of the SF-36 subscales. After 1 year, the acupuncture group showed significance in one subscale of the SF-36; at 2 years there were no significant differences in any outcome measures.

**J Rehabil Med. 2008 Jul;40(7):582-8**

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The efficacy of acupressure at the Sanyinjiao point in the improvement of women's general health

**OBJECTIVES:** To examine the effectiveness of Sanyinjiao point (SP6) acupressure on women's general health.

**DESIGN:** This was a randomized, single-blinded clinical trial.

**SETTING:** A Medical University, Rejov University of Medical Science, Rejov, Iran.

**INTERVENTIONS:** Forty-two university women were recruited for this study. Then demographic characteristics were gathered, and general health (GHQs) were completed before the intervention. The participants were randomly assigned to either the acupressure receiving group (n=21) or the sham pressure receiving group.

**OUTCOME MEASURES:** Both groups completed GHQs both before and second month of intervention. Data analysis was carried out using SPSS version 13.5 for Windows.

**RESULTS:** Both groups completed GHQs both before and second month of intervention. Data analysis was carried out using SPSS version 13.5 for Windows.

**CONCLUSIONS:** Both acupressure and sham pressure were effective in improving women's general health; however, the efficacy of acupressure was more than that of sham pressure. SP6 acupressure could be regarded as a self-manageable approach to improve women's general health.

**J Altern Complement Med. 2011 Dec;17(12):1141-7.**

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Is acupuncture real?

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The vision-related acupoints VA1, VA2, VA3, and VA8. These acupoints are known in the oriental acupuncture literature as BL67 (VA1), BL66 (VA2), BL56 (VA3), and BL60 (VA8), respectively.

**Clee et al. 1994, 95 (5). Proc Natl Acad Sci**

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fMRI and visual stimulation

**Clee et al. 1999, 95 (4). Proc Natl Acad Sci**

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Brain and Acupuncture

**New approach to old acupuncture. Conceptual relationship of therapeutic acupuncture, functional MRI, and the role of the brain.**

**Clee et al. 1998, 95 (1). Proc Natl Acad Sci**
Acupuncture and Women’s health

What Should Your Patient Know?

- Does it hurt?? – Very minimal discomfort
- Clean needle technique
- High degree of safety
- 6-12 sessions
- Limited insurance coverage

Complications and Precautions

- Retained Needle
- Pneumothorax (any organ puncture)
- Auricular infections
- Other skin infections
- Temporary clinical worsening
- Pregnancy
  - Not a contraindication
  - Theoretical concern of causing contractions
- Anticoagulation - not a contraindication

I feel good!

I can sleep better now!

Conclusion

- Acupuncture represents part of an ancient system of comprehensive health care
- As scientific knowledge expands, modern correlations are being developed which help translate this ancient wisdom into today’s terms
- May the Qi be with you!!!
Resources & Statistics

- NCCAOM National Survey – conducted by Harris Interactive
- National Health Interview Survey-conducted by the NIH
- Ethnicity and Disease, Volume 1, Winter 2006, “Research in the Acupuncturist Community”
- Employer Health Benefits 2004 Annual Survey – Henry J. Kaiser Family Foundation

Recommended Readings

- Between Heaven and Earth, Beinfield and Korngold. Easily read book on Chinese Medicine
- Alternative Therapies in Health and Medicine. Peer-reviewed journal on integrative medicine. Excellent articles. Inexpensive. 6 issues per year.
- Vibrational Medicine, Gerber. Very well written on various forms of “energy medicine” - acupuncture, magnets, homeopathy, Bach flower essences, reiki...

Thank You!