



Career Management

Magazine Articles

Pin-Pointing the Practice of Acupuncture

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Joyce K. Anastasi, RN, PhD, FAAN, LAc, a licensed acupuncturist, administers acupuncture. Photo by Rene Perez.

Acupuncture has been practiced for more than 2,000 years. It involves inserting very fine needles into specific points on the body to reduce pain and produce balance in order to create physiologic changes. The concept of Qi is the central focus of acupuncture. Qi is a vital life force that moves through energy pathways called channels. Acupuncture points are selected for stimulation on the basis that when the flow of Qi is blocked, imbalance can result in pain and dysfunction. Thus acupuncture can restore the balanced flow of Qi and promote health.

How Can Acupuncture Be Wed With Nursing Practice?

Although I am also a registered nurse, currently, my primary practice is acupuncture. As a licensed acupuncturist, I trained in traditional Chinese medicine (TCM), and I am also a clinical nurse scientist. Each day, I rely on my training in both Eastern and Western medicine to provide optimal care to subjects in my clinical research and to patients in my practice.

For much of my career, my research has focused on symptom management for persons with HIV disease with a specific interest in non-invasive interventions. Currently, I am the principal investigator of two NIH-funded clinical trials. The first involves the use of a nutrition and behavioral intervention aimed at reducing chronic diarrhea in patients with HIV (awarded \$600,000); the second, now

in its second year, is a awarded \$2.1 million funded study for evaluating the efficacy of acupuncture for the treatment of nonpathogenic chronic diarrhea in patients with HIV. Both studies are randomized, controlled trials.

In my primary practice I am an acupuncturist in the Columbia Advanced Practice Nurse Associates (CAPNA) practice. Many of my patients are referred by nurse practitioners (NPs) from the CAPNA practice as well as from outside referrals. Before a patient sees an acupuncturist, it is important that he or she have a medical evaluation and diagnostic work-up. Acupuncture can be combined with prescription drugs and other conventional treatments, but it is important for one's primary provider to be aware of the patient's condition when seeking an acupuncture consult. If patients have not seen their primary care providers, a referral is always the rule of thumb. In some states, like New York, it's the law.

Acupuncture is integrated in the patient's current healthcare regimen. Patients continue to take their prescribed medications, get their usual laboratory tests and continue to see their nurse practitioner or physician. The integrative piece is that I am able to treat some of the conditions or areas where many of the conventional therapies have been less than effective. For example, a 42-year-old woman with chronic low back pain for six years, secondary to injury, was referred to me by her NP. The patient had gone to a physical therapist and had some relief, but the pain returned. The patient takes Motrintm PRN for pain with some relief.

Low-back pain is commonly treated with acupuncture with good results. After the first visit, the patient reported a 50% improvement. At the second visit, I reassessed her condition and her comfort level and made adjustments in the treatment plan. Typically, the practitioner reassesses the patient's condition in terms of the traditional Chinese medicine (TCM) diagnosis and continually fine-tunes his or her treatment plan at every session. After this session, the patient reported a 90% improvement.

How Do You Evaluate a Patient for Acupuncture?

Generally, the patient's primary complaint is first assessed. For example, if a patient has low-back pain, I will ask about the signs and symptoms of his or her pain, and find out the types of treatment they have tried. I obtain a history from the patient and have a thorough discussion of their current complaint.

As an acupuncturist, I assess the patient by making a tongue diagnosis, and pulse diagnosis. The tongue provides a geographic map of the organ systems and the pulse provides important information about specific organ networks as they relate to Chinese medicine. Specific information about each patients' excess or deficiency condition(s) and areas of imbalance is identified. Next, a

TCM diagnosis and treatment plan is made. I identify and record the necessary acupuncture points to stimulate and the techniques and methods that will be implemented during the session.

Before implementing the treatment plan, a discussion with the patient includes the estimated duration of the treatment sessions. The number of treatments varies from patient to patient depending on the nature of the condition and if the condition is new versus chronic. On average six treatment sessions are usually recommended to allow enough time to make an evaluation.

When Is Acupuncture Considered as an Alternative?

According to the World Health Organization, acupuncture has been cited to be effective for 104 conditions including arthritis, migraines, sinusitis, asthma, addictions, and trigeminal neuralgia, carpal tunnel syndrome, constipation, diarrhea, menstrual cramps, stroke rehabilitation, and tennis elbow, to name a few.

Based on both personal experience and available research data, many patients seek “alternative therapies” for chronic conditions in which there is no cure. Many persons with HIV/AIDS, arthritis, cancer and asthma are active seekers of “alternative therapies.” They may use alternative therapies in hopes of delaying disease progression or symptom relief.

How Do I Know If My Acupuncturist Is Licensed?

The title L.Ac. indicates that the practitioner has successfully passed the national exam given by the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) and has been licensed by the state. Once one passes the national exam they also

confer the title Diplomate of Acupuncture (Dipl. Ac.). For a list of credentialed acupuncturists visit the Website:

<http://www.nccaom.org/>

Where Can I Learn More About Complementary and Alternative Medicine?

At Columbia University School of Nursing, we are attempting to further bridge the gap between Eastern and Western medicine. I was recently awarded a three-year grant from Health Resources and Services Administration (HRSA) to offer the Integrative Therapies in Primary Care© graduate subspecialty program. The first class was offered in September 2000. The program consists of three courses. The first two provide an overview of, and theoretical grounding in, the different integrative modalities. Lecture topics focus on various systems of healthcare, such as Ayurveda, Homeopathic Medicine, Latin-American, Kampo (Japanese) and Traditional Chinese Medicine. In addition, several classes on herbology, acupuncture, homeopathy, and manual therapies are included.

The third course is clinical in focus with each student assigned to observe a practitioner of integrative medicine in a chosen modality. Weekly seminars with actual case studies are presented to address the appropriateness of incorporating integrative therapies into the treatment plans of clients with traditional western diagnoses such as hypertension and cancer are included in this course. Enrollment is open to all advanced practiced nurses. For more information about the Integrative Therapies in Primary Care© graduate subspecialty program contact Dr. Anastasi at (212) 305-2941.

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