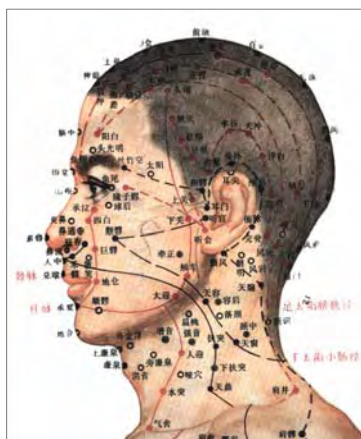


# Acupuncture et oncologie

## Bibliographie



Centre de documentation du GERA  
192 chemin des cèdres  
83130 La Garde France  
[centre.doc@gera.fr](mailto:centre.doc@gera.fr)



# ACUDOC2

Centre de documentation du Groupe d'Etudes et de  
Recherches en Acupuncture  
192 chemin des cèdres  
83130 - La Garde, France

[www.acudoc2.org](http://www.acudoc2.org)

[www.gera.fr](http://www.gera.fr)

**Base de donnée spécialisée en acupuncture et médecine  
traditionnelle chinoise.**

## Domaine

Acupuncture et médecine traditionnelle chinoise. Aspects historiques et sociologiques.  
Théories médicales traditionnelles. Etudes cliniques et expérimentales.

## nombre de références disponibles

140.200 références au 1er janvier 2006.

## Origine des documents

Périodiques spécialisés en acupuncture et MTC (publiant régulièrement des articles  
d'acupuncture) : collection de 350 revues d'acupuncture et MTC titres ([voir catalogue des  
périodiques](#)). Articles de périodiques "extérieurs" (ne publiant qu'occasionnellement des  
articles d'acupuncture). Thèses et mémoires. Traités (bibliothèque de 2690 livres  
d'acupuncture et MTC (voir catalogue des traités).

## Antériorité

Pour les publications en langues occidentales, les documents sont indexés à partir de 1683  
(De Acupunctura de Wilhem Then Rhyne) : 1090 références avant 1950. Une recherche  
bibliographique rétrospective systématique a été menée. Pour les publications en langues  
asiatiques, les documents sont indexés à partir de 1980 (date antérieure pour certains  
documents).

## Bibliographies sélectives

L'informatisation du centre de documentation du GERA permet la diffusion de bibliographies  
sélectives. ([voir demande de bibliographie](#)). Le tri peut notamment s'effectuer à partir :  
-de 220 descripteurs primaires (sections, [voir plan de classement](#)).  
-de 1800 descripteurs secondaires (mots-clés, [voir thésaurus](#))

## fourniture des documents

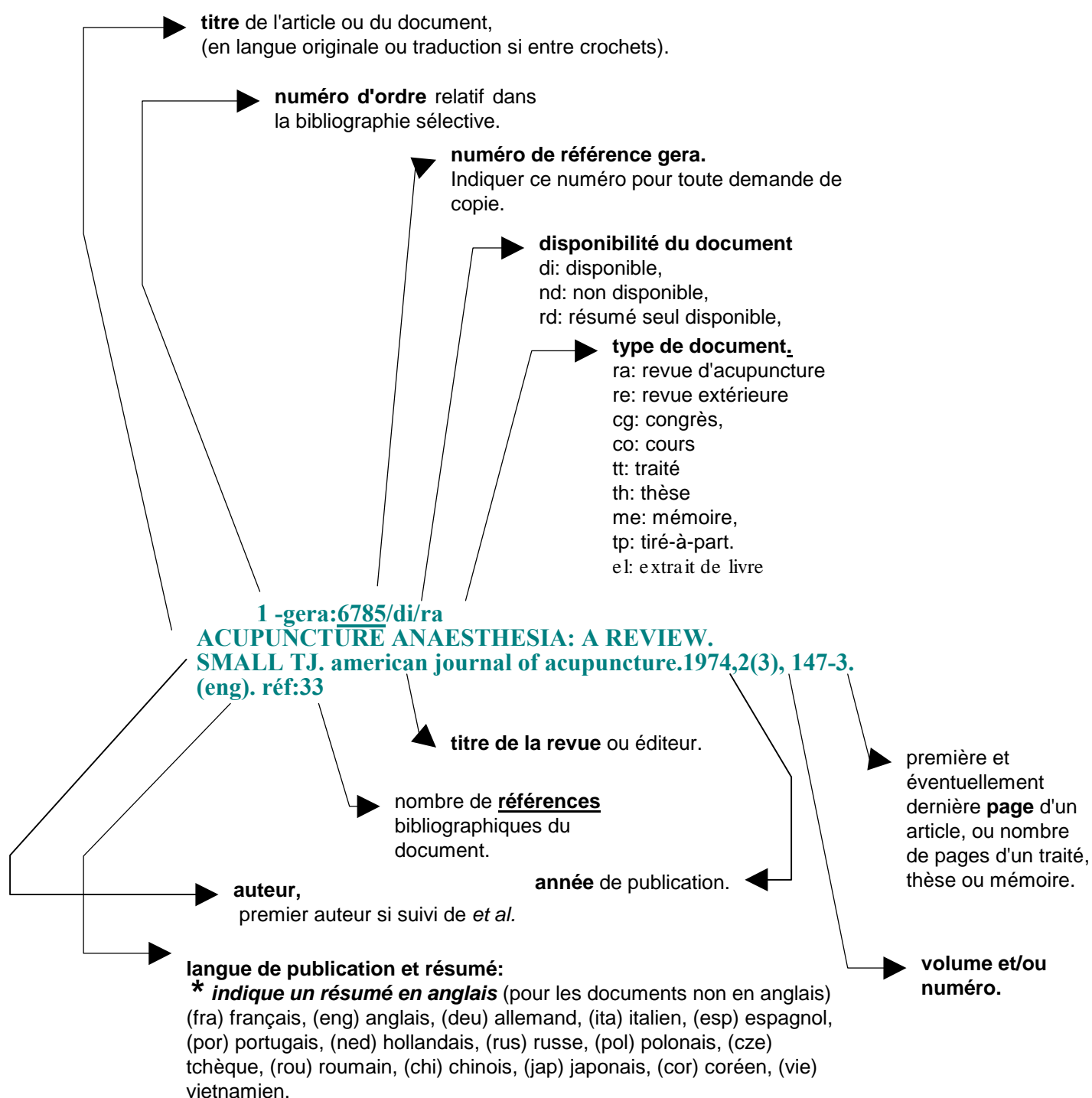
Le centre de documentation du GERA peut donner accès aux documents sous forme de  
photocopies. (3.2 €par article). [voir demande de copie de document](#)

## Informations / Demande de documentation

Dr Johan Nguyen

☎ : 04.96.17.0030/ 📠 : 04.96.17.00.31 ✉ [centre.doc@gera.fr](mailto:centre.doc@gera.fr)

# référence type



Les résumés correspondent soit à la reproduction du résumé présentation de l'auteur, soit à un résumé assuré par le CD GERA

centre de documentation du gera  
192 chemin des cèdres  
83130 La Garde- France  
fax : 04.96.17.00.31  
[centre.doc@gera.fr](mailto:centre.doc@gera.fr)

## Demande de copie de document

Les reproductions sont destinées à des fins exclusives de recherches et réservées à l'usage du demandeur. tarif: **3.20 € par article**, gratuit pour les membres du gera.

**Joindre un chèque d'un montant correspondant à la commande (nombre d'articles x 3.20 €)**

Pour toute thèse ou mémoire, s'adresser directement à la société ou à la bibliothèque universitaire concernée. Les prêts de livres ne sont assurés qu'aux membres du GERA

<b>nom:</b>	<b>date et signature:</b>
<b>adresse:</b>	
<b>e-mail :</b>	

<i>n° réf.gera</i>	<i>auteur</i>	<i>n° réf.gera</i>	<i>auteur</i>
1/		16/	
2/		17/	
3/		18/	
4/		19/	
5/		20/	
6/		21/	
7/		22/	
8/		23/	
9/		24/	
10/		25/	
11/		26/	
12/		27/	
13/		28/	
14/		29/	
15/		30/	

ci-joint un chèque de € (nombre d'articles x 3.20 €) à l'ordre de **CD GERA**  
**une facture sera automatiquement jointe à l'envoi des copies**

attention !

vérifier la disponibilité de l'article (di)

vérifier la langue de publication

vérifier le type de document (pas de copie de thèse ou mémoire)

- 1- gera: 37260/di/re- num  
**P6 ACUPUNCTURE : AN EFFECTIVE NON-TOXIC ANTI-EMETIC IN CANCER CHEMOTHERAPY.**  
 DUNDEE JW ET AL. **british journal of anaesthesia.** 1975,53(12),1322. (eng). ref:0  
 Patients avec cancer du testicule et subissant une chimiothérapie. l'électroacupuncture au 6MC diminue l'incidence des nausées et vomissements. voir ref. gera [38868]. [10.03 / 23.04- ecr- 22.07- chimiotherapie- 6mc- testicule- ]
- 2- gera: 15069/di/ra  
**ACUPUNCTURE ET CANCER.** BLASSELLE. **bulletin de la societe d'acupuncture.** 1960,38,23-4 (fra). ref:2 [23.04 / - ]
- 3- gera: 15063/di/ra  
**NEUF REACTIONS A LA RADIOTHERAPIE TRAITÉES PAR ACUPUNCTURE.** HOPITAL UNIVERSITAIRE DE TIANJIN. **meridiens.** 1974,27-28,61-65 (fra\*). ref:2 [23.04 / radiotherapie- ]
- 4- gera: 17663/di/ra  
**CHINESE MEDICAL THERAPY AND THE USE OF AN ELECTRIC NEEDLE ON PAIN DUE TO CANCER.** WATANABE Y ET AL. **journal of the kyoto pain control institute.** 1974,3,8-21 (eng). ref:0 [6.01 / 23.04- 05.12- ]
- 5- gera: 15064/di/ra  
**[ACUPUNCTURE ET CANCER (lettre)].** KIM YS. **american journal of chinese medicine.** 1975,3(3),302-3 (eng). ref:0 [23.04 / - ]
- 6- gera: 18480/di/ra  
**ACUPUNCTURE AND CANCER.** CHEIN EY ET AL. **american journal of acupuncture.** 1976,4(2),145-8 (eng). ref:16 [23.04 / - ]
- 7- gera: 1070/di/ra  
**[L'ACUPUNCTURE DANS LE TRAITEMENT DE LA DOULEUR CANCEREUSE].** CHU LSW ET AL. **american journal of acupuncture.** 1976,4(4),323-31 (eng). ref:9 [6.01 / 23.04- ]
- 8- gera: 6448/di/ra  
**[MORT DANS LA DIGNITE, TRAITEMENT DE LA DOULEUR CANCEREUSE PAR ACUPUNCTURE].** LEE JF. **acupuncture and electrotherapeutics research.** 1976,2(1-2),137 (eng). ref:13 [6.01 / 23.04- ]
- 9- gera: 15080/di/ra- num  
**[EFFETS DE L'ACUPUNCTURE DANS LE TRAITEMENT DES EFFETS SECONDAIRES DE LA RADIOTHERAPIE].** CHUNG C ET AL. **acupuncture research quarterly.** 1977,3-4,135-6 (eng). ref:0  
 Cas d'un patient traité par radiothérapie pour cancer nasopharyngé, se plaignant de troubles sensitifs et moteurs de la région cervicale et buccale, traitement par 4GI et 34VB. [23.04 / radiotherapie- 19.02- 16.05- ]
- 10- gera: 6462/nd/re  
**[DOULEUR CANCEREUSE TRAITÉE PAR ACUPUNCTURE ET STIMULATION ELECTRIQUE].** WEN HL. **modern medicine asia.** 1977,13,12 (eng). ref:0 [6.01 / 23.04- ]
- 11- gera: 3104/di/ra  
**APPROCHE D'UNE CONCEPTION DU MECANISME DU CANCER A TRAVERS L'ACUPUNCTURE ENERGETIQUE.** LE PRESTRE C. **acupuncture.** 1978,56,13-8 (fra). ref:0 [23.04 / - ]
- 12- gera: 3103/di/ra  
**A PROPOS DE L'ACUPUNCTURE ET DE LA MALADIE CANCEREUSE.** DARRAS JC. **acupuncture.** 1980,66,26-32 (fra). ref:0 [23.04 / - ]
- 13- gera: 6550/rd/th- num  
**PLACE DE L'ACUPUNCTURE DANS LE TRAITEMENT DES DOULEURS REBELLES DES CANCERS DEPASSES.** JUBINEAU-ZELPHATI C. **these medecine,montpellier.** 1980,128,93P (fra). ref:0  
 1) L'introduction à l'acupuncture, la philosophie, la médecine chinoise. 2) Le concept douleur en médecine chinoise. 3) Etat de l'antalgie en cancérologie. 4) Procédés actuels des bilans de la douleur. 5) Action de l'acupuncture sur les douleurs rebelles. [6.01 / 23.04- ]
- 14- gera: 16093/di/cg  
**OBSERVATION OF CHANGES OF PLASMA CORTISOL BEFORE AND AFTER INDUCTION OF ACUPUNCTURE ANESTHESIA AND DRUG ANESTHESIA IN TUMOR PATIENTS.** ZANG JUNFANG ET AL. **advances in acupuncture and acupuncture anaesthesia,beijing.** 1980,,465 (eng). ref:80 [25.11 / 23.04- 09.05- cortisol- ]
- 15- gera: 1497/di/ra  
**60 CAS DE CANCER DU SEIN OPERES SOUS ANESTHESIE PAR ACUPUNCTURE.** HOPITAL DES TUMEURS DE HANGZHOU. **mensuel du medecin acupuncteur.** 1982,93,928 (fra). ref:0 [11.11 / 11.07- 23.04- ]
- 16- gera: 1461/di/ra- num  
**[OPERATION RADICALE POUR CANCER GASTRIQUE SOUS ANESTHESIE COMBINEE EPIDURALE LASER ACUPUNCTURE].** WANG YOULIANG ET AL. **chinese acupuncture and moxibustion.** 1982,2(6),23 (chi\*). ref:0  
 Clinical observation of 10 cases of radical operation of gastric cancer under laser-epidural combined anesthesia was made. The results showed that this method had remarkably analgesic effect, which provided a new way for overcoming the incompleteness of acupuncture anesthetic analgesia. When this method was applied, the epidural anesthetic doses were obviously reduced, and the influence of hemodynamics reduced as well, however, the anesthetic safety was increased. The anesthetic effect of this method is markedly higher than that of acupuncture anesthesia group (P<0.005). [10.17 / 23.04- ecr- comparaison- 05.14- ]
- 17- gera: 94/di/ra  
**[OBSERVATIONS CLINIQUES SUR LA TRIPLE COMBINAISON ACUPUNCTURE-MOXIBUSTION-PHYTOTHERAPIE DANS LE TRAITEMENT DU CANCER DE \*].** ZHU RUGONG ET AL. **chinese acupuncture and moxibustion.** 1982,2(4),22 (chi\*). ref:0  
 Acupuncture et moxibustion sont utilisées pour renforcer l'énergie vitale et disperser les facteurs pathogènes. Les plantes médicinales sont utilisées pour renforcer les fonctions immunologiques de l'organisme, inhiber le développement

des cellules cancéreuses et prolonger la survie des patients. Un effet positif est observé chez 12 patients (60 %), aucun effet n'est observé chez 8 patients (40 %). [10.04 / 23.04-05.09- ec- ]

18- gera: 15079/nd/th

**L'ACUPUNCTURE DANS LA LUTTE CONTRE LES VOMISSEMENTS SECONDAIRES AUX CHIMIOThERAPIES ANTI- CANCEREUSES.**

DESNOS P. *these medecine,caen*. 1983,1144,134P (fra).

ref:0

[23.04 / chimiotherapie- 10.03- ]

19- gera: 23240/di/

**THE CLINICAL SUMMARY OF 60 CASES OF BREAST CANCER UNDER COMPOUND ACUPUNCTURE ANESTHESIA.** HANG ZHOU TUMOUR HOSPITAL. *second national symposium, beijing*. 1984.,163 (eng). ref:0

[11.11 / - ]

20- gera: 15100/di/ra- num

**STUDY OF THERAPEUTIC EFFECTS OF MOXIBUSTION ON MICE BEARING SUBCUTANEOUS TUMOR (abstract).** HAU DM ET AL. *international journal of chinese medicine*. 1984,1(3),57-8 (eng). ref:0

Résumé de l'article ref. GERA [18430]. [23.04 / 05.09- eaa+souris- ]

21- gera: 18430/di/ra- num

**PRELIMINARY STUDY ON EFFECTS OF MOXIBUSTION ON MICE BEARING SUBCUTANEOUS TUMOR.** HAU DM ET AL. *acupuncture research quarterly*. 1984,31,91-7 (eng). ref:0

The present study was conducted to determine the effects of moxibustion on mice bearing subcutaneous tumor. In this research, a total of 166 male young mice (ICR strain), 6-8 weeks of age, were chosen to implant Ehrlich ascites tumor tells (1x10 puissance 7) in the sacral subcutaneous area. When the subcutaneous tumor (ST) of mice few to  $10 \pm 2$  mm in diameter, they were divided into the control and experimental groups. The experimental group was treated with moxibustion on those skin points near ST. The results revealed a mortality rate within 120 days after moxibustion treatment to be 14.3% (85.8% for tumor control). The tumor consul rate in the moxibustion group was 95.2% (14.2% for tumor control). The mean surviving time within 120 days for the moxibustion group was 99.5 days (46.3 day for the control). Therefore some therapeutic effects in the experimental group treated with moxibustion were observed. [23.04 / 05.09- eaa+souris- 23v- 26v- 27v- 28v- ]

22- gera: 37238/nd/re

**PRELIMINARY STUDY ON THERAPEUTIC EFFECTS OF LOCALLY FRACTIONATED HEAT ACUPUNCTURE ON SUBCUTANEOUS TUMOR OF MICE.** HAU DM ET AL. *chinese oncol soc bul*. 1984,5,9-17 (eng). ref:25

[Pas en France]. [23.04 / - ]

23- gera: 15074/di/ra- num

**L'ACUPUNCTURE ET LE CANCER.** LIU ZHUOYOU. *mtc et acupuncture*. 1984,7(2),17-8 (fra). ref:25

1) L'examen de l'oreille permet un diagnostic du cancer, notamment quant au cancer du foie. 2) Une douleur au point Hxing Dashih (à mi-distance entre 36V et 40V) est significative de néoplasie, la palpation des points Shu permet la localisation. 3) Les modifications radiologiques induites par la puncture du 36E permettent de différencier l'ulcère

gastroduodéal du cancer. 4) L'acupuncture permet de diminuer les effets secondaires de la radiothérapie (36E, 12VC, 6Rte et 3F) ou de la chimiothérapie. 5) La technique d'incision (ablation du tissu graisseux sous-cutané) permet, sauf dans les cas d'obstruction complète d'améliorer le transit oesophagien en cas de cancer. 7) L'acupuncture améliore les index immunologiques. [23.04 / radiologie- 04.05- shu- du dos- 04.04- 10.10- lcp- ]

24- gera: 11490/di/ra

**[TRAITEMENT DU CANCER DU SEIN PAR LE HEXIANGZHUANG QIGONG].** SHI SHIAI. *qigong and science*. 1984,9,11 (chi). ref:0

[11.07 / 23.04- qg- ]

25- gera: 6644/di/ra

**TRAITEMENT PAR ACUPUNCTURE DE LA DOULEUR D'UN CANCER VISCERAL.** TRINH R ET AL. *revue francaise de mtc*. 1984,104,544-5 (fra). ref:0

Action antalgique de l'acupuncture sur un cas de cancer du pancréas inopérable. [6.01 / 23.04- 10.12- ]

26- gera: 15071/di/ra

**[ACUPUNCTURE EN COMBINAISON AVEC LA CHIMIOThERAPIE ET LA RADIOTHERAPIE CHEZ LES PATIENTS CANCEREUX].** XIA YUQING ET AL. *journal of tcm*. 1984,25(7),58 (chi). ref:0

[23.04 / radiotherapie- chimiotherapie- ]

27- gera: 15092/di/ra- num

**[TRAITEMENT PAR ACUPUNCTURE DE LA REACTION A LA RADIOTHERAPIE CHEZ DES PATIENTS AVEC TUMEUR MALIGNNE].** XIA YUQING ET AL. *chinese acupuncture and moxibustion*. 1984,4(6),6 (chi\*). ref:0

La puncture de 6MC + 11GI + 36E renforce l'hématopoïèse et améliore les signes cliniques (nausée, vomissements, vertiges et insomnies). [23.04 / radiotherapie- 12.02- 10.03- ecr- ]

28- gera: 11491/di/ra

**[EFFETS DU GINSENG ET DE LA GELEE ROYALE SUR LES CELLULES HUMAINES DU CANCER DU SEIN MCF-7].** ZHU-SAN YE ET AL. *international journal of chinese medicine*. 1984,1(1),39-40 (eng). ref:0

[11.07 / 26.03- 23.04- ]

29- gera: 11492/di/ra

**[CANCER DE LA GLANDE MAMMAIRE TRAITÉ PAR COMBINAISON MTC-MO, RAPPORT DE 134 CAS].** GUANG'ANMEN HOSPITAL. *journal of traditional chinese medicine*. 1985,26(3),41 (chi). ref:8

[11.07 / 23.04- ]

30- gera: 15107/di/ra

**[DIAGNOSTIC PRECOCE DES MICRO-CANCERS PAR LE CANCER CHECK OF RELATED ACUPUNCTURE MERIDIAN].** KOBAYASHI T. *american journal of acupuncture*. 1985,13(1),63-8 (eng). ref:8

Il apparait une différence entre le groupe porteur de micro-cancer (au niveau du milligramme) et groupe sans cancer. [23.04 / 04.05- ]

31- gera: 36282/co/re- num

**ESSAI RANDOMISE D'ANALGESIE ELECTRO-ACUPUNCTURALE CONTRE ANALGESIE CLASSIQUE PER ET POST OPERATOIRES CHEZ LE PATIENT CANCEREUX.** POULAIN P ET AL. *bull cancer*. 1985,72,342 (eng). ref:8

[6.01 / 23.04- cta- ecr- ]

32- gera: 6700/di/me

**APPORT DE L'ACUPUNCTURE AU TRAITEMENT DE LA DOULEUR EN SERVICE DE CANCEROLOGIE, ETUDE PORTANT SUR 30 CAS SUIVIS DE 1982 A 1984.** RIBETON L. *memoire d'acupuncture, bordeaux* 2. 1985,,44P (fra). ref:8

30 malades souffrant de douleurs liées à un cancer ont été traités en service hospitalier de 1982 à 1984. Un traitement antalgique acupunctural était entrepris lorsque la thérapie médicamenteuse préalablement instituée s'avérait insuffisante. Résultats : effet moyen ou important : 13 cas ; résultat nul : 11 ; cas ininterprétables : 4. Ont été également étudiés les facteurs que représentent le mécanisme de la douleur, et le type de traitement médicamenteux associé. [6.01 / 23.04- ec- medication- hopital- ]

33- gera: 11495/di/ra

**[CONTRIBUTION DE LA THERMO-MOXIBUSTION AU TRAITEMENT CHIRURGICAL DU CANCER MAMMAIRE TRANSPLANTE CHEZ LA SOURIS].** STERNFELD M ET AL. *acupuncture and electrotherapeutics research*. 1985,10(1-2),73-8 (eng). ref:20

[11.07 / ea- souris- 05.09- 23.04- ]

34- gera: 13941/di/ra

**[CONDUCTIBILITE ELECTRIQUE AU NIVEAU DES POINTS D'ACUPUNCTURE DU POUMON CHEZ DES SUJETS SAINS ET ATTEINT DU CANCER DU POUMON].** SULLIVAN SG ET AL. *american journal of acupuncture*. 1985,13(3),261-66 (eng). ref:12

Mesure de la conductibilité des points du poumon chez 4 patients porteurs de cancer du poumon et 36 sujets sains. On ne retrouve que 4 faux positifs avec cette méthode de diagnostic. [17.05 / ec- 23.04- 02.06- resistance- 04.05- ]

35- gera: 20550/di/ra

**[ACUPUNCTURE MOXIBUSTION, ENKEPHALIN, IMMUNITY AND TUMOR].** CHENG BAIHUA. *chinese acupuncture and moxibustion*. 1986,6(5),28 (chi\*). ref:26

L'acupuncture peut entraîner la libération d'Enkephalines endogènes. L'auteur de l'article décrit la régulation de l'immunité, et l'action sur le mécanisme de croissance des tumeurs, de l'acupuncture, à partir de la libération d'enkephaline d'origine neurologique, en combinaison avec le développement de l'immunité moderne. En général, maladies et tumeurs sont traitées par régulation des fonctions immunitaires de l'organisme. [23.04 / endorphine- 5..09- ]

36- gera: 24689/di/ra- num

**STUDY ON THERAPEUTIC EFFECT OF ELECTROACUPUNCTURE AND IRRADIATION ON MICE BEARING SUBCUTANEOUS TUMOR.** DOUMONG HAU. *acupuncture research quarterly*. 1986,37,1-8 (eng). ref:26

The effects of electroacupuncture (EA ) and fractionated irradiation (RT) on mice bearing subcutaneous tumor (ST) was investigated in the present study. A total of 300 male young mice (ICR strains), 6-8 weeks old were inoculated with Ehrlich ascitic tumor cells (1x10<sup>7</sup>) into their subcutaneous sacral tissue. When each tumor had grown to 0.45 ± 0.2 cm<sup>3</sup>, the animals were divided into five groups. Groups A and B served as the normal and tumor controls. Group C was exposed to 3500 rads of 137 Cs gamma-rays in 10 fractions (one fraction each day). Group D was treated with EA in 10 fractions (one fraction each day). Group E was treated with a combination of EA and RT. The therapeutic effect, leukocyte counts and the biosynthetic rate of DNA in

splenic lymphoid cells were also investigated. The results revealed that the best therapeutic effect was obtained from group E. Some therapeutic effects also occurred in group C. However, the effect is not conspicuous in the group treated with EA alone. The present result also revealed that total leukocyte, lymphocyte, neutrophil and monocyte counts were significantly higher in the experimental control group than in the normal control. Nevertheless, gamma-irradiation had a considerable inhibitory effect on total leukocyte counts in group C. Electroacupuncture brought about a recovery to the leukocyte counts and synthetic DNA rate in the splenic lymphoid cells of the gamma-ray irradiated mice bearing subcutaneous tumor. [23.04 / 05.12- eaa+souris- 26v- 25v- 23v- 27v- 28v- ]

37- gera: 40604/rd/re

**[TREATMENT OF 77 CASES OF BREAST CANCER WITH TENGHUANG].** LEI QIU MO ET AL. *cancer research in prevention and treatment*. 1986,13(2),111. (chi\*). ref:19

Résumé Acme (870994). ACME:870994 [11.07 / 23.04- ]

38- gera: 15033/di/ra

**[ETAT IMMUNOLOGIQUE DE PATIENTS AVEC CANCER TRAITES PAR ACUPUNCTURE].** XIA YUQIN ET AL. *chinese acupuncture and moxibustion*. 1986,6(2),17 (chi\*). ref:19

[23.02 / 23.04- ]

39- gera: 15116/di/ra- num

**AN APPROACH TO THE EFFECT ON TUMORS OF ACUPUNCTURE IN COMBINATION WITH RADIOTHERAPY OR CHEMOTHERAPY.** XIA YUQING ET AL. *journal of tcm*. 1986,6(1),23-6 (eng\*). ref:19

76 patients avec cancer (poumon, oesophage ou estomac) traités par chimiothérapie ou radiothérapie sont randomisés en 2 groupes : 1) acupuncture et 2) contrôle. L'acupuncture : 36E + 6MC associés à des points fonctions de la localisation et du syndrome, tonification, séance quotidienne de 15-30 minutes. Séries de 30 séances. On observe sous acupuncture : une élévation du poids, une amélioration des symptômes, une diminution des effets secondaires, un maintien ou une élévation des fonctions immunitaires (Rosette, leucocytes, plaquettes, mais non immunoglobuline). [23.04 / ecr- 10.04- 10.05- radiotherapie- 17.06- chimiotherapie- ]

40- gera: 23285/di/ra

**EFFECTS OF MICROWAVE ACUPUNCTURE ON THE IMMUNOLOGICAL FUNCTION OF CANCER PATIENTS.** CHENGJIANG H ET AL. *journal of traditional chinese medicine*. 1987,7(1),9-11 (eng). ref:0

[23.04 / 23.04- 23.02- ]

41- gera: 20263/di/ra

**[CLINICAL OBSERVATION OF TREATING CANCER OF STOMACH AND ESOPHAGUS BY ACUPUNCTURE].** CUI KAIXIAN. *chinese acupuncture and moxibustion*. 1987,7(2),7-9 (chi\*). ref:4

Etude de 11 cas de cancer de l'oesophage et de 19 cas de cancer de l'estomac. L'acupuncture stimule les fonctions immunitaires et prolonge la survie, particulièrement chez les patients qui refusent la chimiothérapie et la chirurgie. Points principaux : 12VC, 36E, 6Rte, 17VC, 40E, 21V. Manipulation par enfouissement-retrait et rotation jusqu'à irradiation du deqi à la région malade. Séance de 20 minutes avec manipulations ou électrostimulation. [10.05 / deqi- 10.04- 23.04- ]

42- gera: 22394/di/th

**ACUPUNCTURE ET TOXICITES DIGESTIVE HAUTE ET GENERALE DE LA CHIMIOThERAPIE ANTICANCEREUSE. LAN CHOW WING TF. these medecine, bordeaux 2. 1987,,52P (fra). ref:4**

La chimiothérapie des cancers mammaires présente une toxicité digestive (et générale) importante. Notre but est d'évaluer l'utilité de l'acupuncture dans ce domaine par l'étude comparative de deux protocoles, l'un antiémétique et l'autre neurosédatif. Nous avons réalisé un essai clinique randomisé, en simple aveugle, à la Fondation Bergonié sur des patientes traitées en ambulatoire par un des protocoles chimiothérapeutiques suivants : AVM, CMF, EVM, MTV. Les malades étaient séparées en deux groupes pour plus d'homogénéité statistique. Groupe A : patientes traitées par acupuncture dès leur premier cycle de chimiothérapie. Groupe B : patientes résistantes à un traitement antiémétique classique bien conduit. Une analyse statistique n'a été possible que pour le groupe A. L'acupuncture semble utile dans ce domaine ; le protocole antiémétique semble supérieur au protocole neurosédatif. [23.04 / chimiotherapie- ecr- ]

43- gera: 25289/di/cg- num

**A STUDY OF ELECTROSTIMULATION OF ACUPOINTS ON ALLEVIATING THE HARM OF HEMOGRAM INDUCED BY ANTICANCER DRUGS (abstract). NIU HAITONG ET AL. selections from article abstracts on acupuncture and moxibustion, beijing. 1987,,608. (eng\*). ref:31**

Stimulation chez le lapin des points JING (electrostimulation directe sans aiguille). Différence significative par rapport au groupe de contrôle quant au nombre de leucocytes après médicaments antibiotiques. [12.02 / chimiotherapie- 23.04- 05.12- eaa+lapin- ]

44- gera: 21227/di/cg- num

**INDUCTION OF TUMOR RESISTANCE IN MICE BY ACUPUNCTURE STIMULATION AND- PHENYLALANINE ADMINISTRATION (abstract). NORIO SHIMURA ET AL. in compilation of the abstracts of acupuncture and moxibustion papers, beijing. 1987,,182 (eng). ref:0**

Acupuncture et D-Phénylalanine diminuent de façon significative la croissance du sarcome-180 chez la souris. [23.04 / potentialisation- ]

45- gera: 24406/di/ra

**THE CLINICAL OBSERVATION ON THE TREATMENT OF CANCER BY ELECTROHEATED NEEDLE. TANG XUEZHENG. international conference on tcm and pharmacology, shanghai. 1987,,813-4 (eng). ref:0**

[23.04 / 05.09- ]

46- gera: 20436/di/cg

**THE DUAL ACTIONS OF "EVEN MOVEMENT OF NEEDLING" IN REGULATING BODY AND TUMOR TEMPERATURE IN PATIENTS OF BENIGN TYROMA. XUE LIGONG ET AL. selections from articles abstracts on acupuncture and moxibustion, beijing. 1987,,149 (eng). ref:0**

Etude de la température cutanée au creux axillaire et de la température du centre du goitre prise par une aiguille-thermomètre. Traitement selon la technique du Dr Guo Xiazhong. Il existe une relation entre efficacité thérapeutique et diminution de la température au niveau du goitre. [9.02 / temperature- goitre- ]

47- gera: 21226/di/cg

**EXPERIMENTAL STUDY OF ANTITUMOR EFFECT OF MOXIBUSTION. YANG YOU MI ET AL. in**

**compilation of the abstracts of acupuncture and moxibustion papers, beijing. 1987,,181 (eng). ref:0**  
[23.04 / 05.09- ]

48- gera: 25310/di/cg

**EXPERIMENTAL STUDY OF ANTITUMOR EFFECT OF MOXIBUSTION (1). YANG YOU MI ET AL. selections from article abstracts on acupuncture and moxibustion, beijing. 1987,,629 (eng). ref:0**  
[23.04 / 05.09- ]

49- gera: 25311/di/cg

**EXPERIMENTAL STUDY OF ANTITUMOR EFFECT OF MOXIBUSTION.(3) YANG YOU MI ET AL. selections from article abstracts on acupuncture and moxibustion, beijing. 1987,,630 (eng). ref:0**  
[23.04 / 05.09- ]

50- gera: 20178/di/ra

**[RECENT DEVELOPMENT ON THE TREATMENT OF TUMOR WITH ACUPUNCTURE AND MOXIBUSTION IN CHINA AND ABROAD]. YAXIAN T. chinese acupuncture and moxibustion. 1987,7(4),44-6 (chi\*). ref:0**  
[23.04 / - ]

51- gera: 20878/di/tt

**ECIWO BIOLOGY AND MEDICINE. A NEW THEORY OF CONQUERING CANCER AND A COMPLETELY NEW ACUPUNCTURE THERAPY. YINGQING ZHANG. neimenggu people's press, neimenggu. 1987,,257P (eng). ref:0**  
[23.04 / - ]

52- gera: 24499/di/ra

**[ACUPUNCTURE AND ACU-POINTS INJECTION FOR CANCER PAIN]. CHEN YUFEN. chinese acupuncture and moxibustion. 1988,8(5),30 (chi\*). ref:34**  
De janvier à juin 84, 86 patients ont été suivis pour des cancers à un stade évolué ; 78 d'entre eux présentaient des douleurs d'intensité variable, dont 24 souffraient de douleurs sévères. Les patients ont été divisés en 2 groupes : un groupe de 20 malades traités par acupuncture et injections aux points d'acupuncture, sans recevoir d'analgésique. L'autre groupe (66 cas) n'a été traité qu'avec des analgésiques. Le premier groupe a eu non seulement une diminution des douleurs cancéreuses, mais les patients ont eu une survie prolongée. [6.01 / 23.04- 05.15- ]

53- gera: 80615/di/ra- num

**ACUPUNCTURE, OPIOID PEPTIDES, IMMUNITY AND TUMOR. CHENG BAIHUA. chinese journal of acupuncture and moxibustion. 1988,1(3-4),107-111 (eng). ref:34**

Revue générale sur les relations entre endorphines et système immunitaire. L'action de l'acupuncture sur le système immunitaire semble passer par le système des endorphines. [23.04 / 23.02- rg- endorphine- 25.10- ]

54- gera: 82446/di/ra- num

**ACUPUNCTURE/ACUPRESSURE AS AN ANTIEMETIC : STUDIES OF ITS USE IN POST- OPERATIVE VOMITING, CANCER CHEMOTHERAPY AND SICKNESS OF EARLY PREGNANCY. DUNDEE J. complementary medical research. 1988,3(1),2-14 (eng). ref:0**

Studies on the use of P6 (Neiguan) acupuncture or acupressure as an antiemetic have been reviewed. Both manual and electro (10z) acupuncture applied for five minutes given at the same time as a preoperative opioid will



significantly reduce the incidence of postoperative : sickness in patients undergoing minor gynaecological operations under a standard non-emetic anaesthetic. This protection is not afforded by stimulation of a point at the right elbow ("dummy" acupuncture). Problems were encountered in applying these findings to patients having cancer chemotherapy and for ethical reasons only a limited control (dummy) study was possible. Patients who had previously been sick following cancer chemotherapy, and who were very likely to have sickness on the second occasion, were subjected to P6 electroacupuncture at the same time as giving the infusion of the chemotherapeutic agent and this produced a partial reduction in sickness. The antiemetic effects only lasted for 8 hours and an alternative means of teaching patients to do this themselves is currently being studied. Acupressure at P6 point will significantly reduce the incidence of morning sickness of early pregnancy as compared with a control group and a group of women using pressure at another "dummy" point. The problems encountered in these studies are reviewed but no suggestions have been made as to the reasons for this beneficial therapeutic effect. Despite wide dissemination of this knowledge no-one has yet attempted to confirm or refute the findings. [10.03 / 11.10- chimiotherapie- 23.04- rg- ]

55- gera: 85022/di/re- num

**RANDOMIZED COMPARISON OF THE ANTI-EMETIC EFFECTS OF OF METOCLOPRAMIDE AND ELECTRO ACUPUNCTURE IN CANCER CHEMOTHERAPY.** DUNDEE JW ET AL. **british journal of clinical pharmacology.** 1988,25,678-9 (eng). ref:22

Etude contrôlée chez 20 patients sous chimiothérapie répartis en 2 groupes : 1) Métoproclamide 10mg IV . 2) Acupuncture au 6MC. Les résultats sont similaires dans les deux groupes, mais le traitement IV semble plus simple à réaliser. [10.03 / ecr- ecr- 6mc- 23.04- chimiotherapie- ]

56- gera: 23083/di/ra

**[DIAGNOSIS OF LUNG CANCER IN EARLY STAGE WITH DOUBLE IMAGES OF BRONCHOGRAPHY UNDER ACUPUNCTURE ANESTHESIA (ATTACHED WITH THE \*)].** FAN SHAOYU. **chinese acupuncture and moxibustion.** 1988,8(1),25 (chi\*). ref:2

L'anesthésie par acupuncture pour les bronchographies et scopies permet une meilleure qualité d'images et une meilleure approche dans le diagnostic des cancers des poumons. [17.09 / radiologie- ]

57- gera: 26619/di/ra

**DOG-ACUPUNCTURE ANALGESIA FOR REMOVAL OF 10LB.LIPOMA TUMOR.** HUMPHREYS VJ. **veterinary acupuncture newsletter.** 1988,14(3),14-15 (eng). ref:2 [24.02 / - ]

58- gera: 26868/di/ra

**DOG-ACUPUNCTURE ANALGESIA FOR REMOVAL OF 10LB. LIPOMA TUMOR.** HUMPHREYS VJ. **veterinary acupuncture newsletter.** 1988,14(3),14-15 (eng). ref:2 [24.02 / - ]

59- gera: 23082/di/ra

**[REPORT ON ACUPUNCTURE TREATMENT OF 303 CASES OF ESOPHAGEAL CANCER].** SHAO WENSHENG. **chinese acupuncture and moxibustion.** 1988,8(1),23 (chi\*). ref:0 [303 cas de cancers de l'oesophage traités par acupuncture]. L'auteur a traité 3303 cas de cancer de l'oesophage par

acupuncture, dont 6 cas pris au début et 2297 cas d'évolutions moyenne ou ancienne. Les points utilisés : Lianquan (23VC), jiuwe(15VC), Shangwan (13VC), Zhongwan (12VC), Xiawan (10VC), Jianli (11VC), Weishang (PC 14, 4d. de part et d'autre du 10VC), Xuanji (21VC), Huagai (20VC), Zigong, Yutang (18VC), Zhongting (16VC), Burong (19E), Chengman (20E), Liangmen (21E), Guanmen (22E), TTaiyi (23E), Huaroumen (24E). Les points sont utilisés par groupes de 3, avec une séance par jour, technique enfoncement-retrait sans laisser les aiguilles en place, 15 séances par traitement. Les 6 patients traités précocement sont toujours vivants, ce depuis plus de 8 ans. 96,37 % des autres patients ont vu leur dysphagie s'amender et ont pu s'alimenter, leur vie a été prolongée. [10.04 / 23.04- ]

60- gera: 23063/di/ra

**[ACUPUNCTURE ANESTHESIA IN THE RADICAL OPERATION OF THYROID CANCER].** ZHOU QUANRAI ET AL. **chinese acupuncture and moxibustion.** 1988,8(2),34 (chi\*). ref:0

Analgésie par acupuncture lors de thyroïdectomie totale pour cancer thyroïdien. 129 cas, 134 interventions chirurgicales. 3 groupes de points sélectionnés : 1er groupe (21 patients) acupuncture somatique ou auriculaire. 2ème groupe (25 patients) acupuncture somatique plus auriculopuncture, 3ème groupe (88 patients) acupuncture somatique plus rhinopuncture. Points principaux : 6MC, 4GI. Auriculopuncture : Shen Men, Jiaogan, Fei, Jing. Naso : Shuangen, Fei, Throghxin, Yanhou. Meilleur effet avec acupuncture somatique plus rhinopuncture. [16.09 / 05.10- 09.02- rhino- 23.04- 05.11- comparaison- ]

61- gera: 26941/di/ra

**[ORIGINAL CANCER TREATED BY ACUPUNCTURE AND INJECTION ON THE POINTS].** CHEN YUFEN. **chinese acupuncture and moxibustion.** 1989,9(3),27-29 (chi\*). ref:0 [23.04 / 05.15- ]

62- gera: 29756/di/cg

**CLINICAL OBSERVATION OF 30 CASES SUFFERING CANCER OF ESOPHAGUS AND STOMACH TREATED WITH ACUPUNCTURE COORDINATED EAR NEEDLING.** CUI KAIXIAN. **international symposium on diagnosis and treatment with auricular points, beijing.** 1989,,150-1 (eng). ref:0 [23.04 / 10.04- 10.05- ]

63- gera: 83179/di/re- num

**ACUPUNCTURE PROPHYLAXIS OF CANCER CHEMOTHERAPY INDUCED SICKNESS.** DUNDEE JW ET AL. **journal of the royal society of medicine.** 1989,82(5),268-71 (eng). ref:0

In a multi-facet study we evaluated the efficacy of P6 electroacupuncture (10 Hz applied for 5 min) as an antiemetic in patients receiving a variety of cancer chemotherapy drugs. The study involved 130 (15 in an open pilot study, 10 in a randomized placebo controlled crossover study and 105 in a definitive study) patients who had a history of distressing sickness after previous treatment, and who, on the basis of a previous survey, would be expected to have a 96% chance of this with subsequent therapy. Sickness was either completely absent or reduced considerably in 97% of patients and no side effects were encountered. The limited crossover study, using a 'dummy' acupuncture (ACP) point showed that the beneficial effects were limited to the P6 point. Logistic and ethical considerations excluded the possibility of carrying out a larger placebo-controlled study. While in our hands P6 ACP was an effective antiemetic in patients having cancer chemotherapy, because of the time

involved and the brevity of the action (8 h) an alternative approach to electro-ACP is required before this technique is adopted clinically. [10.03 / 23.04- ecr- chimiotherapie- ]

64- gera: 27147/di/ra

**AN ELECTROPHYSIOLOGIC VIEW OF ACUPUNCTURE : ROLE OF CAPACITIVE AND CLOSED CIRCUIT CURRENTS AND THEIR CLINICAL EFFECTS IN THE TREATMENT OF CANCER AND CHRONIC PAIN.** NORDENSTRÖM BEW. *american journal of acupuncture*. 1989,17(2),105-117 (eng). ref:35  
[2.01 / 06.01- 23.04- biophysique- ]

65- gera: 27354/di/ra

**ACUPUNCTURE ET CANCEROLOGIE. QUELQUES ELEMENTS DU COURS DE Mr LE PROFESSEUR TAO ZHI DA - CANTON.** X. *brochure pratique d'acupuncture veterinaire*. 1989,7,37-41 (fra). ref:39  
[23.04 / - ]

66- gera: 26943/di/ra

**[EXPERIMENTAL STUDY OF ANTITUMOR EFFECT OF MOXIBUSTION].** YANG YOU MI. *chinese acupuncture and moxibustion*. 1989,9(3),32-33 (chi\*). ref:39  
[23.04 / 05.09- ]

67- gera: 81318/di/ra

**TREATMENT OF CANCER WITH RADIOFREQUENCY ACUPUNCTURE.** AMAN O. *british journal of acupuncture*. 1990,13(1),7-11 (eng). ref:0  
[23.04 / - ]

68- gera: 82445/di/ra- num

**DUNDEE JW ET AL. ACUPUNCTURE PROPHYLAXIS OF CANCER CHEMOTHERAPY-INDUCED SICKNESS.** BOTTOMLEY DM ET AL. *complementary medical research*. 1990,4(1),48-9 (eng). ref:18

Présentation de l'article de DUNDEE JW, Acupuncture prophylaxis of cancer chemotherapy-induced sickness, *Journal of the Royal Society of Medicine*. (ref. GERA : 83179). [10.03 / 23.04- chimiotherapie- ]

69- gera: 83204/di/ra

**ACUPUNCTURE AND ACUPOINT INJECTION FOR LATE STAGE PRIMARY LIVER CANCER.** CHEN YUFEN. *american journal of acupuncture*. 1990,18(4),355-57 (eng). ref:9

This paper reports on the result of the treatment with acupuncture and acupoint injection combined with traditional and general medicine (excluding chemotherapy and radiotherapy) in 34 cases of late stage primary liver cancer. After treatment, the tumor disappeared in two patients who recovered their health and were able to work 3 years, 3 months and 4 years, 2 months respectively. Another three patients lived comfortably with their tumor 2-4 years and were able to do regular housework. Median survival after treatment of the 34 cases was 7. 84 months. Pain in all cases was relieved. [10.10 / 23.04- 05.15- ]

70- gera: 85023/di/re- num

**PROLONGATION OF THE ANTI-EMETIC ACTION OF P6 ACUPUNCTURE BY ACUPRESSURE IN PATIENTS HAVING CANCER CHEMOTHERAPY.** DUNDEE JW ET AL. *journal of the royal society of medicine*. 1990,83,360-2 (eng). ref:2

Previous work from our department has shown that P6 acupuncture is an effective adjuvant to conventional

antiemetic therapy for patients having citotoxic drugs. However, its efficacy is limited to about 8h. The current studies show that the application of an elasticized wrist band with a stud placed over the acupuncture point, and pressed regularly every 2h, will prolong the antiemetic action for 24h. This proved more effective in hospitalized patients (20/20) than in outpatients (15/20), presumably due to the encouragement given to regularly press the stud. [10.03 / acupression- 6mc- 23.04- 05.12- chimiotherapie- ]

71- gera: 62692/di/ra

**[EXPERIENCE WITH CURED CASES OF BREAST CANCER].** GU LINJIANG. *jiangsu journal of traditional chinese medicine*. 1990,11(12),26. (chi). ref:16  
[11.07 / 23.04- ]

72- gera: 82278/di/cg

**COMPARATIVE STUDY OF THERAPEUTIC EFFECTS BETWEEN MOXIBUSTION AND INFRARED ON MICE BEARING SUBCUTANEOUS TUMORS.** HAU DOUMONG ET AL. *2eme congres mondial d'acupuncture et moxibustion, paris*. 1990,,184. (eng). ref:16  
[23.04 / 05.09- ]

73- gera: 83383/di/re- num

**IODINE-131 UPTAKE IN A PATIENT WITH THYROID CANCER AND RHEUMATOID ARTHRITIS DURING ACUPUNCTURE TREATMENT.** NOBUAKI OTSUKA ET AL. *clinical nuclear medicine*. 1990,15(1),29-31 (eng). ref:16

A patient with thyroid carcinoma had an abnormal accumulation of I-131 in the areas of both feet and hands on whole body scan. The sites of abnormal accumulation of I-131 were similar to those on bone scintigraphy. The radiographic examination of the lesions showed characteristic findings of rheumatoid arthritis and also the presence of small gold needles for acupuncture treatment was demonstrated. There were no findings of bone metastases. Although the mechanism of accumulation of I-131 in this patient is unknown, interpreters of I-131 whole body scintigraphs should keep this case in mind when acupuncture treatment has been done. The authors can only speculate on a common blood flow mechanism for enhanced HMDP and I-131 uptake in this arthritic patient who had been treated by acupuncture. [5.19 / 09.02- 23.04- 18.04- isotope- ]

74- gera: 81512/di/ra- num

**NEW ADVANCE OF ACUPUNCTURE AND MOXIBUSTION IN THE TREATMENT OF TUMOR AT HOME AND ABROAD.** TIAN YAXIAN. *chinese journal of acupuncture and moxibustion*. 1990,3(2),136-42 (eng). ref:4

This paper covers the diagnosis, treatment and experimental research of tumor by acupuncture moxibustion at home and abroad. Some tumors may be diagnosed by the meridian theory. Acupuncture improve some clinical symptoms of the cancer, prolong the patient's survival time, reduce and prevent chemotherapeutic reaction and relieve the pain resulted from malignant tumor. The minimization of the tumor and disappearance by acupuncture has also been reported. The mechanism for treating cancer by acupuncture may be related to immunity and bioelectricity. The investigation on acupuncture treatment of cancer is a subject, which is waiting for further study. [23.04 / rg- 05.09- ]

75- gera: 60315/di/ra

**[CURE OF POSTOPERATIVE ULCER FOR MAMMARY CANCER].** WANG YUZHANG. *beijing journal of traditional chinese medicine*. 1990,3,3-5 (chi).

ref:4

[11.07 / 23.04- ]

76- gera: 65443/di/ra

**[HYPERPLASIA OF MAMMARY GLANDS AND MAMMARY CANCER].** CHEN HONGFENG. **shanghai journal of traditional chinese medicine.** 1991,7,31 (chi).

ref:4

[11.07 / 23.04- ]

77- gera: 84114/di/el

**APPORT DE L'ACUPUNCTURE AU MALADE CANCEREUX.** DINOUART-JATTEAU P. **encyclopedie des medecines naturelles.** 1991,IC-17,11P (fra). ref:4

Au cours de son histoire, la médecine traditionnelle chinoise (MTC) a effectué une approche de la notion de tumeur, cancéreuse ou non, et a tenté de lui donner des explications étiopathogéniques. L'objectif de cet article est de montrer le rôle utile que peut jouer le médecin-acupuncteur auprès d'un malade atteint d'un cancer, sans pour autant substituer l'acupuncture aux méthodes thérapeutiques classiques dans une telle affection. Enfin, sans nuire à ce traitement, le médecin-acupuncteur peut aider le patient dans bien des cas et sur bien des plans : c'est ce qui ressort de mon expérience de dix années passées comme attaché dans un service de cancérologie. [23.04 / - ]

78- gera: 83420/di/re- num

**NONINVASIVE STIMULATION OF THE PC6 (NEIGUAN) ANTI-EMETIC ACUPUNCTURE POINT IN CANCER CHEMOTHERAPY.** DUNDEE JW ET AL. **journal of the royal society of medicine.** 1991,84(4),210-12 (eng). ref:28

The beneficial effects of transcutaneous electrical stimulation (TCES) of the PC-6 anti-emetic point (Neiguan) as an adjuvant to standard anti-emetics was studied in over 100 patients in whom chemotherapy-induced sickness was not adequately controlled by antiemetics alone. Although the results were not quite as good as with invasive acupuncture, more than 75% of patients achieved considerable benefit from what was a nontoxic procedure. The use of large diffuse low impedance electrodes simplifies the technique. The 2 hourly application of commercially available Sea Bands prolongs the anti-emetic action. Best results were obtained from the 2 hourly self-administration of 5 minutes of TCES of PC-6 using a simple battery-operated TENS machine (15 Hz) to activate a large, easy-to-place surface electrode and increasing current until Qi is elicited. [10.03 / 6mc- chimiotherapie- acupression- 05.12- cta- 23.04- ]

79- gera: 83469/di/ra

**CLINICAL OBSERVATION ON 130 CASES OF SUPERFICIAL TUMORS TREATED BY ACUPUNCTURE.** LIANG QINGHU. **chinese journal of acupuncture and moxibustion.** 1991,4(2),79-83 (eng). ref:16

This article presents 130 cases of superficial tumors treated by acupuncture. Local points needling methods were mainly cutaneous needling, Yang Ci acupuncture (quintuple), Qi Ci acupuncture (triple), Leopard-spot needling, Collateral needling, Hegu acupuncture, meridian needling and radial needling according to the variety of tumor, Reducing technique was used. Stagnated blood or other contents in the tumor were squeezed. Distant points needling were also combined in the light of differentiation. Among 130 cases, 44 were cured (33. 8%), 53 marked effectiveness, and 27 effective. The total effective rate was 95. 39%. [23.04 / profondur- ]

80- gera: 50615/di/re- num

**THE ROLE OF TRANSCUTANEOUS ELECTRICAL STIMULATION OF NEIGUAN ANTI-EMETIC ACUPUNCTURE POINT IN CONTROLLING SICKNESS AFTER CANCER CHEMOTHERAPY.** MCMILLAN CM ET AL. **physiotherapy.** 1991,77,499-502 (eng). ref:0

The already proven anti-emetic action of P6 (Neiguan) acupuncture has been used with success in patients having cancer chemotherapy. The more patient-acceptable alternative to needling, transcutaneous electrical stimulation of P6, has been equated using a simple, custom-built stimulator and large surface electrodes. This can be administered by the patient and preliminary findings show it to be a useful adjunct to both the older anti-emetics and the new 5 HT 3 antagonist, ondansetron. [10.03 / 6mc- 05.12- chimiotherapie- ]

81- gera: 29384/di/ra- num

**ACUPRESSURE AS AN ANTIEMETIC IN CANCER CHEMOTHERAPY.** PRICE H ET AL. **complementary medical research.** 1991,5(2),93-4 (eng). ref:8

Acupressure using Sea Bands was used as an anti-emetic in patients receiving cancer chemotherapy. The study was a randomized, single blind, crossover study, comparing acupressure on the correct point (Pericardium 6) with an incorrect point on the ankle. The hypothesis to be tested was that acupressure over Pericardium 6 decreases nausea during the time patients actually receive chemotherapy. The conclusion demonstrated a highly significant difference between the correct and incorrect acupressure point. Those receiving wrist acupressure had significantly less sickness and nausea and their overall mood and condition was substantially better than those treated with the incorrect acupressure point. This was particularly noticeable in those receiving chemotherapy with a high emetic potential. [23.04 / ecr- 10.03- chimiotherapie- 6mc- acupression- ecr- ]

82- gera: 64108/di/ra

**ANALGESIC EFFECT OF ACUPUNCTURE ON TUMOR PAIN : 77 CASES. (abstract).** SHEN RONGFU ET AL. **acupuncture research.** 1991,16(3-4),243 (eng). ref:15

72 cases of tumor patients at the late stage were treated with acupuncture. The total effective rate of analgesic with acupuncture treatment was 58% and the ineffective rate was 42%. [6.01 / 23.04- ]

83- gera: 64109/di/ra

**CLINICAL OBSERVATION ON ACUPUNCTURE AT ZUSANLI POINTS FOR TREATMENT OF CANCEROUS ABDOMINALGIA IN 69 CASES. (abstract).** XU SHUYING ET AL. **acupuncture research.** 1991,16(3-4),244 (eng). ref:15

For 4 years (1987-1990), 69 cases of cancerous abdominalgia were treated by acupuncture at bilateral Zusanli points. The effective rates for the gastric, hepatic, colonic cancers, and the intraperitoneal lymphosarcomas were 93%, 87%, 88% and 90% respectively. [10.14 / 36e- 23.04- ]

84- gera: 36647/di/cg

**EFFECT OF SALT-PARTITION MOXIBUSTION AT SHENQUE ON SPONTANEOUS LUNG METASTASIS FROM UTERINE CERVIX CANCER UI4 IN MICE.** CAO QIAOLI ET AL. **wfas international symposium on the trend of research in acupuncture, roma.** 1992,,191 (eng). ref:15

[23.04 / eaa+souris- 11.02- 17.05- 05.09- 8vc- ]

85- gera: 35886/di/ra- num

**ACUPUNCTURE ET CHIMIOThERAPIE.** KESPI JM.

**revue française d'acupuncture.** 1992,70,65. (fra\*). ref:15  
 Cette observation illustre l'aide que peut apporter l'acupuncture à la tolérance des chimiothérapies. [23.04 / 39vb- 12vc- chimiothérapie- ]

86- gera: 36650/di/cg  
**THE SUPPLY OF ACUPUNCTURE IN BIOLOGICAL TREATMENT OF CANCER.** KUEBLBOECK J. *wfas international symposium on the trend of research in acupuncture, roma.* 1992,,197 (eng). ref:0  
 [23.04 / - ]

87- gera: 39387/di/ra  
**[EXPERIENCE OF TREATING POST-OPERATIVE MAMMARY CANCER BY MEANS OF CHINESE MATERIA MEDICA].** LIU MINGSHENG ET AL. *shanghai journal of traditional chinese medicine.* 1992,3,21 (chi). ref:0  
 [11.07 / 23.04- ]

88- gera: 57395/nd/re  
**[ANALYSIS OF THE EFFECT OF NEEDLING HOLOGRAPHIC POINTS OF THE SECOND PHALANGEAL BONE FOR PAIN IN TERMINAL CANCER PATIENTS].** LOU ZHENGHUI ET AL. *journal of guangdong medicine.* 1992,13(2),94-5 (chi\*). ref:0  
 The most tender points on the radial side of the 2nd phalangeal bone of both hands were punctured in 33 cases (67 visits). According to the holographic principle of selecting acupoints, the points on the radial side of the 2nd phalangeal bone represent, from the distal to proximal end, the head, neck, thorax, abdomen, pelvic cavity and lower extremity. Points in the left hand are punctured when pains occur in the left side of the body and vice versa; and points on the distal end are punctured when pains occur in the upper part of the body and vice versa. The needles are inserted vertically or at an angle of 30° to a depth of 1.5 - 2.0 cm and retained for 30 minutes during which manipulation is done once every 5 minutes. As a control group, a series of 40 cases (115 visits) were treated with oral or i.m. analgesics. Results showed that in the treated group and control group pain was eliminated respectively in 27 and 7 cases/visits, markedly ameliorated in 17 and 11 cases/visits respectively, and alleviated in 18 and 67 cases/visits respectively. The treatment was ineffective in 5 and 30 cases/visits respectively. The total effective rate was 92.3% and 73.7%, the markedly effective rate was 65.5% and 15.5% respectively in the treated and control group. The statistical difference was significant. [6.01 / ecr?- 23.04- 04.05- mano- ]

89- gera: 36411/di/ra- num  
**AN OBSERVATION ON THE EFFECT OF MOXIBUSTION ON THE IMMUNOLOGICAL FUNCTIONS IN 69 CASES OF LUNG CANCER.** OUYANG QUN ET AL. *international journal of clinical acupuncture.* 1992,3(4),369-73 (eng). ref:0  
 69 cas de cancer bronchique sont randomisés en deux groupes : traitement classique + moxibustion au 8VC, ou traitement classique sans moxibustion. Moxibustion : moxa au sel (remplir l'ombilic jusqu'à 2 mm au dessus de la peau), appliquer 15 à 20 cônes de 0,2 g, les enlever quand le patient ressent une brûlure. La séance dure 30 mn. 30 séances constituent une série, espacer 2 séries de 3 à 5 jours, 10 séries. on observe une amélioration significative des symptômes, une élévation significative des CD4 et CD11, mais non une modification de la numération leucocytaire par rapport au groupe de contrôle. [17.05 / 23.02- 05.09- 8vc- ]

90- gera: 36046/di/ra

**CAN CANCER BE DEFEATED BY ACUPUNCTURE ?.** SHMUEL HALEVI. *journal of chinese medicine.* 1992,40,5-7 (eng). ref:0  
 [23.04 / - ]

91- gera: 45757/nd/re  
**TRAITEMENT DE LA DOULEUR CHRONIQUE CANCEREUSE SEQUELLAIRE. APPORT DE L'ACUPUNCTURE, DE L'AURICULOTHERAPIE ET DE LA MESOTHERAPIE.** BRULE-FERMAND S. *soins.* 1993,39-40 , (fra). ref:0  
 [6.01 / 23.04- ]

92- gera: 2718/di/cg- num  
**INHIBITORY EFFECTS OF MOXIBUSTION ON GROWTH AND LYMPH NODE METASTASIS OF MH134 TUMOR CELLS (abstract).** SHINOHARA S ET AL. *third world conference on acupuncture, kyoto.* 1993,,177. (eng). ref:0  
 Etude chez 90 souris après implantation de cellules cancéreuses MH134 au niveau de la patte droite. 4 types de moxibustion sont étudiés. 1) 2 semaines avant l'implantation, 2) une semaine avant, 3) le jour même et 4) une semaine après. Séances quotidiennes de 1 cône (0,65 ou 2 mg) au niveau de 3 points au niveau du dos ou de l'abdomen. Les groupes moxibustion sont comparés à 3 groupes de contrôle 1) sans traitement, 2) lentinan I.P., 3) mitomycine I.P.. Le traitement par petit cône de 0,65 mg débuté 1 semaine avant implantation inhibe le développement de la tumeur. L'effet observé est similaire à celui observé dans les groupes avec traitement médical. De même, les métastases ganglionnaires sont fortement diminuées. [23.04 / eaa+souris- 05.09- ]

93- gera: 3834/di/cg  
**EVALUATION OF INDICATIONS FOR ACUPUNCTURAL AND MOXA THERAPY IN THE TREATMENT OF MALIGNANT TUMORS.** TAMAGAWA T ET AL. *third world conference on acupuncture.* 1993,,137. (eng). ref:0  
 [23.04 / 05.09- ]

94- gera: 10004/di/cg  
**EFFECT OF ELECTRICAL ACUPUNCTURE FOR POSTOPERATIVE URINARY DISTURBANCE OF ANO-RECTAL CANCER.** TSUJIMOTO T ET AL. *third world conference on acupuncture.* 1993,,480. (eng). ref:0  
 [22.04 / 10.04- 23.04- 32v- 05.12- ]

95- gera: 38656/di/ra  
**[TREATING MAMMARY CANCER WITH INTEGRATED TCM AND WM].** WU ZHONGJIU ET AL. *journal of zhejiang college of traditional chinese medicine.* 1993,17(2),33 (chi\*). ref:0  
 [11.07 / 23.04- ]

96- gera: 38880/di/ra  
**EFFECT OF ACUPUNCTURE ON PERIPHERAL T LYMPHOCYTES AND THEIR SUBGROUPS IN PATIENTS WITH MALIGNANT TUMORS.** YUAN JIANGUO ET AL. *international journal of clinical acupuncture.* 1993,18(104),53-8 (eng). ref:0  
 [23.04 / - ]

97- gera: 2720/di/cg- num  
**RESEARCH OF IMMUNE REGULATION OF MOXIBUSTION ON CANCER-BEARING MICE (abstract).** ZHAI D ET AL. *third world conference on acupuncture, kyoto.* 1993,,180. (eng). ref:0  
 Il a été rapporté que la moxibustion au 4VC prolonge la survie de souris après inoculation de cellules cancéreuses

HAC. La moxibustion (2 cônes de 1,5 mg, 10 séances), entraîne une élévation des  $\beta$ -endorphines plasmatiques et une diminution au niveau de l'hypophyse et de la surrénale. Il s'agit sans doute d'un des mécanismes d'action de la moxibustion sur [23.04 / eaa+souris- 05.09- endorphine- ]

98- gera: 49814/di/ra- num

**COMBINED TRADITIONAL CHINESE MEDICINE AND WESTERN MEDICINE. RELIEVING EFFECTS OF CHINESE HERBS, EAR-ACUPUNCTURE AND EPIDURAL MORPHINE ON POSTOPERATIVE PAIN IN LIVER CANCER.** LI QI-SONG ET AL. *chinese medical journal*. 1994,107(4),289-94 (eng). ref:0

In the evaluation of Chinese herbs (A), ear-acupuncture (B) and epidural morphine (C) to relieve postoperative pain and abdominal distension, sixteen male patients with primary liver cancer were observed. This study was conducted by means of orthogonal experiment and double blind, randomized design. The patients received various treatments according to the display of the orthogonal table L16(2)15 which corresponds to 2(3) factorial experiment design. C+ (morphine 2 mg) was given before the peritoneum was sutured. A+ (orally administered) and B+ were given 24 hours after operation. 50-100 mg of pethidine was given when the pain intensity VAS (0-100) exceeded 50-70. The observation parameters included plasma leucine enkephalin (LEK), postoperative total dosage of narcotics administered for 5 days, VAS for pain and pain reliever, abdominal distension, urinary retention, constipation, etc. The results were as follows: a. Patients who had received A (A+B+C+, A+B+C-, A+B-C-, A+B-C+); C (C+A+B+, C+A+B-, C+A-B+, C+A-B-), or B (B+A+C+, B+A+C-, B+A-C+, B+A-C-) produced better analgesic effects than those who had received placebo. The A, B, and C reduced narcotics 650, 450 and 550 mg respectively when compared with placebo. The effects of A and C were of statistical significance ( $P < 0.05$ ), while AB, BC, and AC interactions were not found; b. A and B minimized abdominal distension and urinary retention, while C prolonged them. As compared with the placebo, A and B accelerated restoration of bowel peristalsis ( $P < 0.05$ , ANOVA). [10.10 / ecr- 23.04- 05.10- ]

99- gera: 85224/di/ra

**APPLICATION OF ACUPUNCTURE COMBINED WITH INTRAVENOUS PROCAINE IN RADICAL OPERATION OF GASTRIC CANCER (abstract).** QIN BIGHUANG ET AL. *acupuncture research*. 1994,19(3-4),158-9 (eng). ref:10  
[10.18 / - ]

100- gera: 3100/di/ra- num

**ACUPUNCTURE ET CHIMIOThERAPIE.** REMPP C. *asclepios*. 1994,4,19-21 (fra). ref:0

La chimiothérapie cancéreuse est souvent mal suivie parceque mal tolérée digestivement. La prévention des nausées et vomissements par acupuncture optimise donc ces traitements et améliore le confort du patient. [23.04 / chimiotherapie- ]

101- gera: 45412/di/ra

**EFFECTS OF CHINESE HERBAL MEDICINES ON DNA-SYNTHESIZING ENZYME ACTIVITIES IN MAMMARY TUMORS OF MICE.** SAKAMOTO S ET AL. *american journal of chinese medicine*. 1994,22(1),43-50 (eng). ref:9

Sho-saiko-to (SST) and Juzen-taiho-to (JTT), Japanese modified Chinese herbal prescriptions, suppressed the activities of thymidylate synthetase and thymidine kinase involved in de novo and salvage pathways for pyrimidine nucleotide synthesis, respectively, in mammary tumors of

SHN mice with the reduction of serum prolactin level. These results indicate that SST and JTT may have the antitumor effects on mammary tumors. [11.07 / - ]

102- gera: 49975/di/ra- num

**[EFFECT OF ACUPUNCTURE ON INTERLEUKIN-2 LEVEL AND NK CELL IMMUNOACTIVITY OF PERIPHERAL BLOOD OF MALIGNANT TUMOR PATIENTS].** WU BIN ET AL. *chinese journal of integrated traditional and western medicine*. 1994,14(9),537 (chi\*). ref:11

This paper deals with the observation of acupuncture therapy affecting interleukin-2 (IL-2 level and natural killer (NK) cell immunoactivity in the peripheral blood of patients with malignant tumors. In this clinical-laboratory test research, randomized double blind method was used. The patients were divided into an acupuncture treated group (n = 25) and a control group (n = 20). The former group was treated using points, ST36, LI11, RN6 and locations of symptomatic points bilaterally. They received one treatment of 30 minutes daily for 10 days. The results showed that the IL-2 level and NK cell activity were lower than normal in patients with malignant tumor, but there was an increase in the acupuncture group after 10 days of treatment. Significance was found to be remarkable ( $P < 0.01$ ). The difference between the two groups was also significant ( $P < 0.01$ ). This increase might be related to the mechanism of acupuncture that adjusting the body's immune function. Thus, acupuncture therapy could enhance the cellular immune function of patients with malignant tumors and providing a beneficial effect in anti-cancer treatment. [23.04 / 23.02- 36e- 11gi- 6vc- il- ecr- ]

103- gera: 53681/nd/re

**INHIBITION BY GUAN-MU-TONG (CAULIS ARISTOLOCHIAE MANSURIENSIS) OF THE GROWTH OF SPONTANEOUS MAMMARY TUMORS IN SHN VIRGIN MICE.** WU G ET AL. *anticancer drugs*. 1994,5(6),641-4 (eng). ref:11

Multiparous SHN mice with spontaneous mammary tumors (5-10 mm in size) were given water extract of Guan-mu-tong (Gmt; Caulis aristolochiae manshuriensis) (0.5%) ad libitum as drinking water for 10 days. This treatment retarded significantly the growth of mammary tumors compared with the controls. By contrast, normal mammary gland growth, histology of adrenals and ovaries, and body weight were affected little by the Gmt treatment. Gmt appears to be the first agent inhibiting the growth of spontaneous mouse mammary tumors of palpable size by per os treatment. [11.07 / eap+souris- ]

104- gera: 85138/di/ra- num

**OBSERVATION OF 50 CASES OF CANCER PAIN RELIEVED BY ACUPUNCTURE (abstract).** XIAO JIANHUA ET AL. *acupuncture research*. 1994,3-4,139-40 (eng). ref:11  
[6.01 / ecr- 23.04- ]

105- gera: 85128/di/ra

**CLINICAL OBSERVATION ON ACUPUNCTURE AT ZUSANLI POINTS FOR TREATMENT OF GASTRIC CANCER PAIN IN 42 CASES (abstract).** XU SHUYING ET AL. *acupuncture research*. 1994,3-4,131-2 (eng). ref:0  
[10.05 / 36e- 23.04- ]

106- gera: 49849/di/ra

**[REGULATION ON BETA-END IN TUMOR-BEARING MICE BY MOXIBUSTION ON GUANYUAN POINT].** ZHAI DAODANG ET AL. *acupuncture research*. 1994,19(1),63-5, 58 (chi\*). ref:0

The experimental results demonstrated that moxibustion on Guanyuan point could promote the hyperplasia of the pituitary and the adrenal gland which showed atrophy in control group. Also, the moxibustion treatment stimulated the secretion of beta-END from the pituitary and the adrenal gland, increased the level of serum beta-END significantly and kept the high level for quite a long time, that was advantageous for beta-END to carry out the immunomodulation. The data further suggested that moxibustion treatment do not cause the instant release but probably constant release of the beta-END. [23.04 / 05.09- eaa+souris- 4vc- ]

107- gera: 3289/di/ra- num

**EFFECT OF ACUPUNCTURE ON IMMUNE FUNCTION OF PATIENTS TREATED WITH RADIOTHERAPY AND CHEMOTHERAPY.** ZHAO RONG ET AL. *world journal of acupuncture-moxibustion*. 1994,4(2),24-8 (eng). ref:0

In comparison with the normal people group, values of blood CD2+ and CD4+ in patients with malignant tumors treated with radiotherapy and chemotherapy were significantly lower and the ratio of CD4+ and CD8+ decrease obviously (all  $P < 0.001$ ); CD8+ had no apparent change ( $P > 0.05$ ). Following acupunctural treatment, values of CD2+, CD4+ and the ratio of CD4+ to CD8+ increased obviously (all  $P < 0.001$ ); while those of the medicinal control group ad no significant change after treatment ( $P > 0.05$ ). Values of IgG, IgA and IgM in patients' serum presented an abnormal decreasing or increasing tendency, and C3 in minority of patients were raised. Results indicated that there was a biphasic regulatory effect of acupuncture on the disturbance of humoral immunity and could correct the deviation of C3 level; and its effect was better than or similar to that of the medicine control group. It demonstrates that acupuncture can enhance and regulate the immune function of patients treated with radiotherapy and chemotherapy and thus reduce side effects of these two therapies. [23.04 / 23.02- chimiotherapie- radiotherapie- ]

108- gera: 55736/di/ra

**CANCER DE MAMA CON METASTASIS PULMONAR. TRATAMIENTO CON MTC.** CHEN ZI FU. *el pulso de la vida*. 1995,5,5-8 (esp). ref:3 [11.07 / 23.04- ]

109- gera: 84768/di/ra

**THE TREATMENT OF PAIN IN BONE METASTASIS OF CANCER WITH THE ANALGESIC DECOCTION OF CANCER AND THE ACUPOINT THERAPEUTIC APPARATUS.** GUO RENXU ET AL. *journal of tcm*. 1995,15(4),262-4 (eng\*). ref:0

The pain in 286 cases of bone metastasis of cancer was treated with an analgesic decoction of herbal drugs in combination with the Acupoint Therapeutic Apparatus that generated low frequency electric impulses into the acupoints. This series of patients comprised 104 cases of medium pain and 182 Cases of severe pain, which was practically or completely relieved in 17 or 29 minutes respectively after the treatment; the total effective rate was 74.2% for 212 cases, and the duration of analgesic effect lasted 2.7 hours to 5.2 hours, averaging 3.6 hours. The cases that needed considerable dosages of analgesic tablets or sedatives markedly reduced their requests of such drugs. Determination of bone marrow stem cells indicated that the herbal treatment produced effects of promoting and protecting the stem cell. The rate of lymphocyte transformation was 45-76% before the treatment and rose to 57-96 % after the treatment, demonstrating an increase of 15.2%, which was statistically significant ( $P < 0.001$ ). The analgesic effect of the decoction

was not correlated to the age and sex of the patients or the variety of cancer, except that it was not effective for uterine carcinoma. The main side effects included nausea, vomiting, somnolence, and numbness of the tongue. [6.01 / 18.06- 23.04- ]

110- gera: 54819/di/ra

**[EFFECT OF ACUPUNCTURE ON IMMUNOLOGIC FUNCTION AND HISTOPATHOLOGY OF TRANSPLANTED MAMMARY CANCER IN MICE].** LIU LI-JUN ET AL. *chinese journal of integrated traditional and western medicine*. 1995,15(10),615-7 (chi). ref:0

This experiment mainly describes the effects of acupuncture on immunologic function and histopathology of transplanted mammary cancer in mice. The results were as follows: in acupuncture group, NK cell activity and T-lymphocyte positive rate of acid alpha-naphthyl acetate esterase (ANAE) and lymphocyte transformation rate were all increased. Compared with the control group, there was a significant difference ( $P < 0.01$ ). The difference was insignificant, when compared with normal group ( $P > 0.05$ ). Comparing the pathology grading of acupuncture group with control group, it showed marked difference in pathological section ( $P < 0.01$ ). Adenoid structure and the degree of lymphocytic infiltration also have marked difference between acupuncture and control group ( $P < 0.05$ ). Less tumour volume in acupuncture than control group were observed ( $P < 0.01$ ). This indicated that acupuncture might increase the immunologic function of transplanted mammary cancer in mice and inhibit the growth of mammary cancer and enhance both differentiation level of mammary cancer cells and lymphocytic infiltration. Possibly acupuncture might reduce the malignancy of mammary cancer cells. [11.07 / - ]

111- gera: 57257/di/ra

**ACUPOINT DIAGNOSTICS AND CHINESE HERBAL SUPPORT FOR BREAST CANCER PATIENTS.** VAN BENSHOTEN MM. *american journal of acupuncture*. 1995,23(1),63-72 (eng). ref:0

Biophoton measurements of acupuncture points in patients with a diagnosis of breast cancer reveal the need for comprehensive support of the immune system, mitigation of side effects related to chemotherapy and radiation treatments, inhibition of tumor growth, and initiation of DNA detoxification and repair. Based on our limited clinical observations, petrochemical and pesticide induced damage of the immune system and DNA appear to be at the root of this modern epidemic. Comparing in vitro tests of anti-tumor Chinese herbs with in vivo clinical prescriptions confirms the complex challenge of supporting breast cancer patients so that the best possible clinical outcome can be achieved with the minimum of side effects. [11.07 / 04.04- 23.04- ]

112- gera: 22757/di/ra

**[CLINICAL INVESTIGATION ON ACUPUNCTURE TREATMENT OF PAIN INDUCED BY CANCER OF STOMACH].** WEN D. *journal of tcm*. 1995,36(5),277 (chi\*). ref:29

By observation of 48 cases of pain due to gastric carcinoma, it was shown that acupuncture ( including filiform needling and acupoint injection) with patient's mind concentrating at the tender site. The results were rather satisfactory. After a therapeutic course of one month, the long-term analgesic rate of both treating groups was similar to that of the western drug group (all around 81 %) while the markedly effective rate was superior to the later group. Treatment in all groups upgraded the living qualities of the patients. Acupuncture and acupoint ejection inhibited the side and toxic effect of chemotherapy, improved the indexes of high viscosity in

hemorheology, elevated the powered activity of Cu, Zn, SOD. Based on the above results, the author claims that, the analgesic effect of acupuncturing in gastric carcinoma has a bearing on the elevation of PLEK, improvement of cellular immunity and upgrading of living quality. [10.05 / 23.04- ]

113- gera: 21412/di/ra  
**[EXPERIENCES OF ACUPUNCTURE AND MOXIBUSTION TREATMENTS FOR LEG EDEMA AFTER RADICAL OPERATIVE HYSTERECTOMY AND RADIOTHERAPY].** X. **journal of the japan society of acupuncture.** 1995,45(1),44. (jap). ref:29  
 [23.12 / 23.04- radiotherapie- 11.02- ]

114- gera: 54645/di/ra  
**TREATMENT OF CANCEROUS ABDOMINAL PAIN BY ACUPUNCTURE ON ZUSANLI (ST 36). A REPORT OF 92 CASES.** XU MANYING ET AL. **journal of traditional chinese medicine.** 1995,15(3),189-91 (eng). ref:0  
 [10.14 / 23.04- ]

115- gera: 54303/di/ra- num  
**[INFLUENCE OF RADIOTHERAPY AND CHEMOTHERAPY ON THE FUNCTION OF MALIGNANT TUMOR PATIENTS AND REGULATION FUNCTION OF ACUPUNCTURE].** YANG JINHONG ET AL. **acupuncture research.** 1995,20(1),1-4 (chi\*). ref:5  
 The observation on the indexes of cortisol, estradiol, estriol and testosterone showed that secretory function of malignant tumor patients had different extent of pathologic changes, after radiotherapy and chemotherapy, making the change strengthened. Acupuncture can regularize this disorder of incretory function of patients treated with radiotherapy and chemotherapy to some extent. [23.04 / radiotherapie- 09.10- chimiotherapie- ]

116- gera: 85697/di/ra  
**[P-NMR ANALYSIS OF THE HEPATIC CELL ENERGETIC METABOLISM IN TUMOR-BEARING MICE BY MOXIBUSTION TREATMENT].** ZHAI DAODANG ET AL. **acupuncture research.** 1995,20(2),36-9 (chi\*). ref:5  
 The new technique, NMR (nuclear magnetic resonance) spectrum analysis was used in this research to measure the state of energetic metabolism of hepatic cells at the organic level. The experimental results demonstrated that moxibustion on Guanyuan (CV4) point could remarkably increase the ATP molecules in the hepatic cells, significantly raise the thermodynamic reserve and phosphate potential of the hepatic cells, so as to enhance the functional activities of liver. It is discussed here of the mechanism of anti-tumor by moxibustion treatment and of the theory of warming the kidney and enhancing the Yang to tonify to energetic Qi by moxibustion on Guanyuan point. [23.04 / - ]

117- gera: 55394/di/ra  
**[THE EXPERIMENTAL STUDY OF THE EFFECT OF MOXIBUSTION AND ITS COMBINATION WITH IMMUNOMODULATORS ON BIOLOGICAL PROPERTIES OF TUMOR CELLS OF MICE].** ZHAO JIAZENG ET AL. **acupuncture research.** 1995,20(4),43-6 (chi\*). ref:3  
 [23.02 / - ]

118- gera: 84799/di/ra- num  
**TRAITEMENT DU GROS BRAS DOULOUREUX POST-CHIRURGICAL OBSERVE DANS LES SUITES D'INTERVENTION DU CANCER DU SEIN.** BRAHIMI

A. **meridiens.** 1996,106,155-62 (fra\*). ref:10  
 Le lymphoedème douloureux observé dans les suites d'intervention chirurgicale du Cancer du sein ne trouve pas de solution thérapeutique efficace en Occident alors qu'il est traité avec succès en Chine. La Médecine Traditionnelle Chinoise propose un protocole de traitement faisant appel à la méthode des Aiguilles de Feu et à celle de la puncture suivie de saignée. Les résultats sont très intéressants et nous encourageant à utiliser cette technique dans nos [11.07 / 23.04- ]

119- gera: 55166/di/ra- num  
**[OBSERVATION ON THERAPEUTIC EFFECTS OF ACUPUNCTURE TREATMENT IN 44 CASES WITH GASTROINTESTINAL REACTION INDUCED BY RADIOTHERAPY AND CHEMOTHERAPY].** CHEN GUIPING ET AL. **chinese acupuncture and moxibustion.** 1996,16(7),9 (chi). ref:0  
 [23.04 / chimiotherapie- ecr- radiotherapie- ]

120- gera: 56346/di/ra  
**ACUPUNCTURE IN KILLING CANCER-ASSOCIATED PAIN.** DING DU-MING. **international journal of clinical acupuncture.** 1996,7(3),323-4 (eng). ref:0  
 [6.01 / 23.04- ]

121- gera: 94363/nd/re  
**ANTITUMOR ELECTROCHEMOTHERAPY: NEW ADVANCES IN THE CLINICAL PROTOCOL.** DOMENGE C ET AL. **cancer.** 1996,77(5),956-63 (eng). ref:0  
 [11.07 / - ]

122- gera: 91601/di/ra  
**[CLINICAL VALUE OF CA15-3 LEVELS IN PLASMA ON PATIENTS WITH BREAST CANCER].** DONG YONG-HONG ET AL. **practical journal of integrating chinese with modern medicine.** 1996,9(2),67 (chi\*). ref:0  
 [11.07 / 23.04- ]

123- gera: 86951/di/re- num  
**ACUPUNCTURE FOR THE RELIEF OF CANCER-RELATED BREATHLESSNESS.** FILSHIE J ET AL. **palliative medicine.** 1996,10(2),145-50 (eng). ref:0  
 The palliation of cancer-related breathlessness is challenging and complex. An open pilot study was conducted, exploring the safety and efficacy of acupuncture in 20 patients who were breathless at rest and whose breathlessness was directly related to primary or secondary malignancy. Sternal and LI4 acupuncture points were used. Outcome measures included pulse, respiratory rate, oxygen saturation and patient-rated visual analogue scales of breathlessness, pain, anxiety and relaxation. At each time point the mean values of the variables were calculated and compared to their pretreatment levels (Student's t-test). Seventy per cent (14/20) of patients reported marked symptomatic benefit from treatment; there were significant changes in VAS scores of breathlessness, relaxation and anxiety at least up to 6 hours post acupuncture which were measured to be maximal at 90 minutes ( $p < 0.005$ ,  $p < 0.001$ , respectively). There was a significant reduction in respiratory rate, which was sustained for 90 minutes post acupuncture ( $p < 0.02$ ). The therapeutic value of acupuncture in the management of breathlessness requires further evaluation. [23.04 / - ]

124- gera: 56673/di/ra  
**[CLINICAL OBSERVATION OF ACUPUNCTURE IN TREATMENT OF LEUKOPENIA PATIENTS WITH RADIOTHERAPY AND CHEMOTHERAPY].** LIANG

YAZHEN ET AL. **shanghai journal of acupuncture and moxibustion**. 1996,15(6),11 (chi). ref:10  
[12.02 / chimiotherapie- radiotherapie- ]

125- gera: 107200/di/ra  
**EFFECT OF ACUPUNCTURE ON IMMUNOLOGIC FUNCTION AND HISTOPATHOLOGY OF TRANSPLANTED MAMMARY CANCER IN MICE**. LIU LI-JUN, GUO CHENG-JIE, JIAO JINGMING, ET AL. **chinese journal of integrated traditional and western medicine (english edition)**. 1996,2(3),225 (eng). ref:10  
[11.07 / - ]

126- gera: 72654/di/ra- num  
**(EFFECT OF ACUPUNCTURE ON IMMUNOMODULATION IN PATIENTS WITH MALIGNANT TUMOR)**. WU BIN ET AL. **chinese journal of integrated and western medicine**. 1996,16(3),139 (chi\*). ref:10

In order to investigate the role of acupuncture in the regulation of cellular immune function, the changes of T lymphocyte subsets (CD3+, CD4+, CD8+), soluble interleukin-2 receptor (SIL-2 R) and,  $\beta$ -endorphin  $\beta$ -EP) in the peripheral blood of patients with malignant tumors before and after acupuncture were observed with double blind method. Forty patients were divided randomly into two groups, 20 for each. One group treated with acupuncture and the other one for control. Results showed that acupuncture has the effect of enhancing the cellular immunity of patient with malignant tumor. Acupuncture treatment could increase the percentage of T lymphocyte subsets CD3+, CD4+ and the CD4+/CD8+ ratio ( $P < 0.01$ ) and the level of  $\beta$ -EP, as well as decrease the level of SIL-2 R ( $P < 0.01$ ). The correlation analysis of the three criteria showed there was a positive correlation between  $\beta$ -EP and T lymphocyte subsets and a negative correlation between S-EP and SIL-2 R. there was also a negative correlation between T lymphocyte subsets and SIL-2 R. Based on these results, a discussion on the acupuncture immunomodulation network was conducted in this article in order to explore the possible mechanism of acupuncture on immunomodulation. [23.04 / 23.02- ecr- ]

127- gera: 103863/di/ra- num  
**EFFECT OF ACUPUNCTURE ON IMMUNOMODULATION IN PATIENTS WITH MALIGNANT TUMORS**. WU BIN, ZHOU RONG-XING, CHEN MING-JIN, ET AL. **chinese journal of integrated traditional and western medicine (english edition)**. 1996,2(4),266 (eng\*). ref:10  
In order to investigate the role of acupuncture in the regulation of cellular immune function, [23.04 / ecr- ]

128- gera: 69070/di/ra  
**[EXPERIMENTAL STUDY ON ACUPUNCTURE AND MOXIBUSTION PROMOTING BLOOD CIRCULATION AND REMOVING BLOOD STASIS IN MICE WITH TRANSPLANTATION TUMOR]**. LIU HONGWEI ET AL. **chinese acupuncture and moxibustion**. 1997,17(11),659 (chi\*). ref:10  
Voir traduction espagnole de: Ener Qi, 1999; 6: 22-28. Réf gera: [73944]. Effect of acupuncture and moxibustion promoting blood circulation and removing blood stasis was studied and inhibition of acupuncture and moxibustion on tumor, and life quality and immunologic function were observed in tumor-bearing mice. The results indicated that acupuncture and moxibustion could decrease viscosity of whole blood, markedly shorten erythrocyte electrophoresis time, elevate macrophage phagocytic rate, increase thymus index and lymphocyte transformation rate, effectively prevent the inhibition of cyclophosphamide on leukocytes

and lymphocyte transformation rate, reduce tumor weight and prolong the multiplication time of the tumor diameter in the tumor-bearing mice. [23.04 / - ]

129- gera: 55862/di/ra  
**EFFECT OF MOXIBUSTION OF DAZHUI (GV14) ON CELLULAR IMMUNE FUNCTION IN TUMOR-BEARING MICE**. PEI JIAN ET AL. **world journal of acupuncture-moxibustion**. 1997,7(2),42-6 (eng). ref:10  
Résumé à entrer. [23.04 / - ]

130- gera: 56590/di/ra  
**[OBSERVATION ON 17 CASES OF CANCERS OF THE ESOPHAGUS TREATED USING ACU-MOXIBUSTION COMBINED WITH HERBS]**. WANG YING. **acupuncture research**. 1997,22(3),191 (chi\*). ref:18  
[10.04 / 23.04- 05.09- ]

131- gera: 67751/di/ra- num  
**[EFFECT OF ACUPOINT IRRADIATION WITH Q-WAVE MILLIMETER MICROWAVE ON PERIPHERAL WHITE BLOOD CELLS IN POST-OPERATIONAL TREATMENT WITH CHEMOTHERAPY IN STOMACH AND COLORECTAL CANCER PATIENTS]**. WU JIAN-GUANG ET AL. **chinese journal of integrated traditional and western medicine**. 1997,17(5),286 (chi\*). ref:18  
Objective: To explore the biological effect of Q-wave millimeter microwave (QWMM). Methods: The QWMM was used to irradiate the acupoints Xuehai (Sp 10) and Geshu (B 17) in treating post-operational and chemotherapy treated stomach cancer and colorectal cancer patients. The effect of irradiation on chemotherapy affected peripheral white blood cells was observed. 62 cases (stomach cancer 42, colorectal cancer 20) in total were divided into two groups group A, 21 cases (stomach cancer 15, colorectal cancer 6) the irradiation began 10 days after operation, and on the 16th day the chemotherapy combined with irradiation started. Group B had 41 cases (stomach cancer 27, colorectal cancer 14), in which the irradiation began immediately after the occurrence of chemotherapy induced peripheral WBC reduction, which persisted for at least 12 days. Results: The effective rate for the group A and B was 85. 7% (18/21) and 73. 2% (30/41) respectively. The total effective rate of the two groups was 77. 4% (48/62). The effective rate of group A was significantly higher than that of group B,  $P < 0. 01$ . Conclusion: GWMM irradiation at acupoints could promote the hematopoietic function of bone marrow, and the irradiation performed 1 week before chemotherapy yielded even better protection on bone marrow. [23.04 / 17v- ecr- 10.06- 10.05- chimiotherapie- 10rte- ]

132- gera: 103954/di/ra  
**CLINICAL EFFECT OF ELECTRO-ACUPUNCTURE THERAPY IN TREATMENT OF SUPERFICIAL TUMORS**. XIN YU-IING, ZHAO FENG-RUI, SHI BIN, ET AL. **chinese journal of integrated traditional and western medicine (english edition)**. 1997,3(4),314 (eng). ref:9  
[8.01 / - ]

133- gera: 58378/nd/re  
**THE USE OF COMPLEMENTARY THERAPIES BY BREAST CANCER PATIENTS ATTENDING CONVENTIONAL TREATMENT**. CROCETTI E ET AL. **eur j cancer**. 1998,34(3),324-8 (eng ). ref:9  
The aim of this study was to measure the proportion and characteristics of complementary therapy (CT) users among female breast cancer patients receiving conventional treatment. 473 women who had received surgical



intervention for breast cancer in the year of diagnosis were sent a questionnaire for completion, and 242 responded. CT had been used by 16.5% after cancer diagnosis, only 8.7% before. The most commonly used CTs were homeopathy, manual healing method, herbalism and acupuncture. The main reason for using CTs was physical distress. Only a minority was searching for psychological support. 24 users were satisfied with these treatments, and two-thirds would suggest them. Users were significantly younger, more educated, and previous users of CTs than non-users. Adjusting each variable for the effect of the others, only previous use had an independent effect on increasing the probability of being users after cancer diagnosis. [11.07 / 23.04- patient- ]

134- gera: 67216/di/ra

**[INFLUENCE OF ACUPUNCTURE ANALGESIA ON NK CYTOTOXICITY OF TUMOR-BEARING RATS INDUCED BY ELECTRO- MOXIBUSTION].** FANG JIANQIAO ET AL. **acupuncture research.** 1998,23(2),117 (chi\*). ref:

To investigate the correlation between acupuncture analgesia and immunomodulation by acupuncture, the splenic natural killer cell cytotoxicity in normal and tumor bearing rats was detected, results of which were compared among electro-moxibustion treatment (EM), EM plus D-phenylalanine and D-phenylalanine treatment in acupuncture analgesia responding rats and non-responding rats. The results showed that the NK cytotoxicity was much lower in W256 tumor-bearing rats than that in normal group, which was significantly upgraded by electro-moxibustion treatment. There existed individual differences in analgesic effect in rats (acupuncture analgesia responders and non-responders) by the 2 Hz electro- stimulation at Zusanli (ST 36). Electro-moxibustion at Guanyuan (CV 4) greatly improved the tumor-bearing rat's NK cell activity in AA responders, but failed to regulate that in AA non-responding rats. The NK cytotoxicity was remarkably improved near to normal level in AA responders and significantly upgraded in AA non-responders when treated by EM and 250 mg/kg D-phenylalanine intraperitoneal injection. 250 mg/kg D-phenylalanine itself did not modulate the NK cell activity. The work indicates that modulation of NK cell activity by moxibustion is related to the rat's individual differences in acupuncture analgesic effect. Acupuncture analgesia does affect the regulation of NK cytotoxicity by moxibustion. [23.04 / 4vc- 05.12- 36e- nk- potentialisation- 05.09- 23.02- ]

135- gera: 68449/di/ra- num

**CLINICAL STUDY ON ACUPUNCTURE TREATMENT OF SIDE REACTIONS OF RADIOTHERAPY AND CHEMOTHERAPY FOR MALIGNANT TUMOR.** LI HUA ET AL. **world journal of acupuncture-moxibustion.** 1998,8(2),8-12 (eng). ref:13

Forty-two cancer patients were randomly divided into acupuncture plus radiotherapychemotherapy (acupuncture) group and radiotherapy-chemotherapy (control) group. The indexes observed were the counts of leukocytes and thrombocytes, and the activities of both natural killer (NK) cells and interleukin (IL) - 2. The findings showed that the counts of both leukocytes and thrombocytes in acupuncture group had no significant changes while those of control group lowered considerably, displaying a significant difference between the two groups ( $P < 0.01$ ). The activities of NK cells and IL - 2 of acupuncture group raised apparently while that of NK cells and IL - 2 in control group lowered markedly. There was a significant difference between the two groups ( $P < 0.01$ ). In acupuncture group, radiotherapy and chemotherapy induced symptoms of the digestive system and nervous system were strikingly less than those of the control

group, suggesting that acupuncture can pronouncedly ameliorate radiotherapy and chemotherapy induced symptoms of arrest of bone marrow, immunosuppression, digestive system and nervous system. [23.04 / ecr- chemotherapy- dacliotherapy- 10.03- ]

136- gera: 67223/di/ra

**[THE CURATIVE EFFECT OF DIRECT CURRENT ELECTRICAL NEEDLE ON EXPERIMENTAL MALIGNANT TUMOR].** LI ZHAOHUI ET AL. **acupuncture research.** 1998,23(2),149 (chi\*). ref:8

The curative effect of direct current (DC) electrical needle on malignant tumor was observed. Forty-eight Wistar rats inoculated with Walker-256 tumor line under right axillary skin were divided into two groups. There were 23 rats in test group and 25 in control group. After a week, the diameter of tumor reached 1cm. The rats (23) in test group were treated by DC electrical needle with 5~7V, 10~20mA and 100C. while the rats (25) in control group were not taken any treatment. [23.04 / 05.12- rat- eaa- ]

137- gera: 67239/di/ra- num

**[EFFECT OF ACUPOINT-INJECTION OF AUTOBLOOD AND CHIROPRACTIC ON CELLULAR IMMUNITY IN PATIENTS OF MALIGNANT TUMOR].** QIAN BAOYAN ET AL. **chinese acupuncture and moxibustion.** 1998,18(11),648 (chi\*). ref:10

Effect of acupoint-injection of autoblood and chiropractic on cellular immunity in the patient of malignant tumor during radio- chemical therapy, and treatment of immunopotentiator was used as control. Results showed that the two methods could increase total T-lymphocyte; after treatment CD3 and ERFC (rosette forming cell) raised significantly ( $P < 0.05$ ), and CD4/CD8 ratio improved significantly ( $P < 0.01$ ) as compared with the control group; and lymphocyte transformation rate enhanced significantly ( $P < 0.01$ ) in the chiropractic group. It is indicated that acupoint-injection of autoblood and chiropractic can increase and regulate cellular immune function. [23.04 / ecr- lymphocyte- 26.04- 05.15- 23.02- ]

138- gera: 75611/di/ra

**[EXPERIENCE OF LU DUMING IN THE TREATMENT OF RECURRENCE AND TRANSFER OF MAMMARY CANCER BY STRENGTHENING THE BODY RESISTANCE MAINLY].** QUE HUAFA ET AL. **liaoning journal of tcm.** 1998,25(7),297 (chi\*). ref:10

With inquiring into the pathogenic factors and pathogenesis, differentiation and treatment of common syndromes, health preservation and rehabilitation on recrudescence and metastasis of breast cancer, this thesis has produced Lu Deming's Experience of prevention and treatment, both has stressed the theory of "to promote the health energy to expel evil factors", the co-ordination of differentiation of syndromes and disease, strengthening the body resistance and eliminating pathogenic factors, the portion and the entirety. [11.07 / 23.04- d\$- ]

139- gera: 73354/di/ra

**58 CASOS DE TUMOR DE MAMA CON EL TRATAMIENTO ACUPUNTURAL.** YU RONG. **energi.** 1998,1,71-2 (esp). ref:10

[11.07 / - ]

140- gera: 73155/di/ra- num

**EFFECT OF AURICULOACUPUNCTURE ON LIFE QUALITY OF PATIENTS WITH MALIGNANT TUMORS. ABSTRACT.** ZENG QIANG ET AL. **acupuncture and electrotherapeutics research.** 1998,23(3-4),292 (eng). ref:10

The prognosis of malignant tumor includes the patient's life quality and life expectancy after the diagnosis of the tumor. How to improve the patients' life quality is one of the important issues to be addressed in clinical practice. Since 1995, we have carried out a randomized controlled study and examined the effects of auriculoacupuncture accompanied by conventional medication on the life quality of patients with malignant tumors. Sixty cases were selected from Hubei hospital of Traditional Chinese Medicine. All cases were diagnosed and confirmed by the Oncology Department of the hospital. These patients were randomly assigned to a group treated by auriculoacupuncture accompanied by conventional medication (n=30) and a control group treated by conventional medication only (n=30). Acupuncture points selected were shenmen, adrenal, endocrine, sympathetic, spleen, kidney, and the ear points corresponding to the tumor organ. Two points of the helix were selected as the sham acupuncture points. Stainless steel needles were applied for 30 minutes. The life quality of each patient was assessed before and after the treatment. This assessment was consisted of twelve factors: the patients' psychosis, appetite, sleep, countenance, fatigue, pain, side effects of conventional medication, understanding and cooperation of colleagues and family members, self recognition of cancer, daily life, and the attitude toward the treatment. Each factor was graded from 1 to 5, from the worst to the best, respectively. The grades from all twelve factors were summed up to a total score of the individual patient in the two groups. When compared with the patients in the control group, the patients treated with auriculoacupuncture and conventional medication had significantly higher scores for psychosis, appetite, sleep, pain, and side effects of conventional medication ( $P < 0.05$ : the patient's psychosis, appetite, pain or  $P < 0.01$ : sleep and side effects of conventional medication) after treatment than before treatment, whereas in the control group these scores did not vary much before and after treatment. The result indicates that auriculoacupuncture accompanied by conventional medication can effectively improve the life quality of patients with malignant tumors. [23.04 / ecr-05.10- ]

141- gera: 74770/di/ra

**SURVEY SHOWS EXTENSIVE ALTERNATIVE THERAPY USE BY BREAST CANCER PATIENTS.** CASSILETH B. **focus on alternative and complementary therapies.** 1999,4(4),184-5 (eng). ref:10

Analyse et commentaire de l'article: VandeCreek L et al. Use of alternative therapies among breast cancer outpatients compared with the general population. *Alt Ther Health Med*, 1999; 5(1): 71-6. Réf gera: [74777]. [11.07 / patient- 23.04- ]

142- gera: 76064/di/ra

**[PROGRESS OF CLINICAL AND EXPERIMENTAL STUDY ON MAMMARY CANCER].** CHEN GUOAN ET AL. **shanghai journal of tcm.** 1999,5,42 (chi). ref:3 [11.07 / rg- ]

143- gera: 74669/di/ra

**[THE INFLUENCE OF ELECTROACUPUNCTURE ON THE ACTIVITIES OF T CELL SUBGROUP AND NK CELLS IN PATIENTS WITH TUMOR DURING CHEMOTHERAPY].** CHEN SHAOZHONG ET AL. **shanghai journal of acupuncture and moxibustion.** 1999,18(5),17 (chi\*). ref:3

Objective: To observe the influence of electropuncture on the activities of T cell subgroup and NK cells in patients with tumor during chemotherapy. Method: During chemotherapy, electropuncture was performed and the activities of T cell subgroup and NK cells were determined before chemotherapy and after 4 courses of electropuncture

treatment. Result: Before chemotherapy, CD3 was in normal range but low in value, CD4 was markedly below normal range, and CD8, CD4/CD8 and the number of NK cells were in normal range; after 1 month's chemotherapy accompanied by chemotherapy, each index didn't drop ( $P > 0.05$ ). Conclusion: Electropuncture can reduce the toxic side effect of chemotherapeutic drugs on immunocytes (T cells and NK cells). [23.04 / lymphocyte- 05.12- chimiotherapie- ]

144- gera: 59774/di/ra

**THERAPEUTIC EFFECTS OF MOXIBUSTION ON EXPERIMENTAL TUMOR.** DOU-MONG HAU ET AL. **american journal of chinese medicine.** 1999,27(2),157-66 (eng ). ref:3

This work investigated the therapeutic effects of the improved form of moxibustion (MT) on experimental tumor. Sarcoma 180 cells (1 x 10<sup>6</sup> puissance 7) were transplanted into the subcutaneous tissue in the breast area of female ICR mice. Mice bearing a tumor were divided into one control and four experimental groups. The experimental groups were treated with MT for 1, 2, 3 and 4 times (abbreviated as MT1, MT2, MT3, MT4 respectively). This study showed that the experimental group treated with MT3 displayed the optimal therapeutic response. The longest mean survival time (87.8 days) within 120 days after treatment of MT3 significantly differed from the control group (60.2 days). In addition, uptake of <sup>86</sup>Rb-radioactive tracer significantly decreased in tumors treated with MT3. The improved form of moxibustion used in this study is a reliable model of localized hyperthermia in tumor therapy. [23.04 / eaa- 05.09- souris- ]

145- gera: 71769/di/ra

**ACUPUNCTURE FOR KILLING CANCER PAIN.** FU WEN-BIN AND ZHANG BO. **international journal of clinical acupuncture.** 1999,10(4),383-86 (eng). ref:22

According to an estimate made by WHO, at least 3.5 million cancer patients are suffering from cancer pain these days. Pain killing has been a hot topic in medical research in both modern medicine and TCM. From the viewpoint of TCM, pain arises when local channels are obstructed by diseases processes. A time-honored method for improving Qi and Blood circulation in channels, acupuncture has proved effective in killing cancer pain. Moreover, it is convenient, inexpensive, and does not cause addiction. [6.01 / - ]

146- gera: 59813/di/re- num

**PAIN-RELIEF AND MOVEMENT IMPROVEMENT BY ACUPUNCTURE AFTER ABLATION AND AXILLARY LYMPHADENECTOMY IN PATIENTS WITH MAMMARY CANCER.** HE JP ET AL. **clin exp obstet gynecol.** 1999,26(2),81-4 (eng ). ref:22

INTRODUCTION: In the traditional Chinese medicine (TCM), pain and movement restrictions are considered as the result of a blocking of the "Jing-Luo-system" or of a disordered flow of the Jing-Qis in the "Jing-Luo-system". PATIENTS AND METHODOLOGY : In this study 48 patients with mammary cancer after ablation and axillary lymphadenectomy were treated with acupuncture (group I); a control group of 32 patients with the same operation but without acupuncture was compared (group II). RESULTS: The results showed a significantly higher maximum abduction angle (AA) at the first treatment immediately after acupuncture without pain (59.1 degrees vs. 80.4 degrees,  $p < 0.001$ ) with respect to maximum tolerable pain barrier (73.6 degrees vs. 92.3 degrees,  $p < 0.001$ ). Between group I (12.3%) and group II (50%) there was a statistically significant difference ( $p < 0.01$ ) in the appearance of pain in the operation field in the rest position on the 5th postoperative day, while on the 7th postoperative day 8.3% vs. 12.5%) and at the time of discharge a significant

difference could not be seen ( $p > 0.05$ ). The percentage of patients with pain during arm movements showed a statistically significant difference between group I and group II on the 5th postoperative day (81% vs. 100%,  $p < 0.01$ ), on the 7th postoperative day (43% vs. 96.9%,  $p < 0.01$ ) and at time of discharge (27.1% vs. 65.6%,  $p < 0.001$ ). The differences in the abduction angle between group I and group II were also statistically significant on the 5th postoperative day at indolency (89.3 degrees vs. 74.5 degrees,  $p < 0.001$ ) with respect to maximum tolerable pain (105.8 degrees vs. 87.4 degrees,  $p < 0.001$ ). The differences in the abduction angle on the 7th postoperativeday at indolency (97.5 degrees vs. 81.2 degrees,  $p < 0.001$ ) and at maximum tolerable pain (118.5 degrees vs. 93.4 degrees,  $p < 0.001$ ) were statistically significant. This statistically significant difference in the maximum abduction angle between group I and group II at indolency (116.1 degrees vs. 91.5 degrees) with respect to maximum tolerable pain (129.4 degrees vs. 112.7 degrees,  $p < 0.001$ ) could be observed until discharge. **DISCUSSION:** Acupuncture seems to be an effective treatment to relieve pain and improve arm-movements after ablation and axillary lymphadenectomy. The "Xie-technique" is used at the main acupuncture points and the patient's feeling must be particularly considered. The combination of the different main points with the correctly selected additional acupuncture points--referred to the basic state and the pre- and post-operative state of the patient--are very important for a successful application of acupuncture. [11.07 / cta- 23.04- ecr- ]

147- gera: 69552/di/ra

**[EFFECTS OF CAKE-SEPARATED MOXIBUSTION ON HEMATOPOIETIC SYSTEM AND CELLULAR FACTOR AFTER RADIOTHERAPY IN THE PATIENT OF CANCER]. HUANG XIAO. chinese acupuncture and moxibustion.** 1999,19(1),35 (chi). ref:5 [12.02 / - ]

148- gera: 59656/di/ra

**[ACUPUNCTURE TREATMENT IN A PATIENT WITH IMPAIRED DEFECTION AND URINATION AFTER RADICAL OPERATION FOR UTERINE CERVICAL CANCER]. KEISOU ISHIMARU ET AL. journal of the japan society of acupuncture.** 1999,49(1),15-8 (chi\*). ref:5 patient with uterine cervical cancer underwent radical operation and radiotherapy in 1956 and subsequently began to suffer from impaired bowel movements. For the next 40 years, a large amount of cathartics was used to induce defecation, a urination was induced by applying abdominal pressure, but a large volume of urine remained. In this patient, the effects of acupuncture treatment were evaluated using the vesical residual urine volume as measured by abdominal ultrasonography. After acupuncture treatment, defecation became easily, and the amount of cathartics could be reduced. Simultaneously, spontaneous urination became possible, and residual urine disappeared. [22.04 / 23.04- 22.04- 10.09- radiotherapie- 11.02- ]

149- gera: 71936/di/ra- num

**HE-NE LASER ACUPUNCTURE FOR CHEMOTHERAPEUTIC REACTION IN CANCER CASES. LIU XIA. international journal of clinical acupuncture.** 1999,10(2),169-71 (eng). ref:16 Traitement par laser en alternance de deux groupes de points: a) 6MC, 6RTE, 13F et b) 10RTE, 36E, 20V - Etudes sur les effets secondaires au niveau gastro-intestinal, oro-pharyngé, rectal, vesical et sanguin. [23.04 / chimiotherapie- 05.14- ]

150- gera: 59031/di/re- num

**TRADITIONAL CHINESE MEDICINE, ACUPUNCTURE, AND OTHER ALTERNATIVE MEDICINES FOR PROSTATE CANCER: AN INTRODUCTION AND THE NEED FOR MORE RESEARCH. MOYAD MA ET AL. seminars in urologic oncology.** 1999,17(2),103-10 (eng ). ref:0

There are several other alternative medicines apart from vitamins and minerals that the clinician should be aware of because they have grown in popularity in other fields of medicine. In time, these therapies should impact the arena of urologic oncology. Traditional Chinese Medicine, which includes acupuncture, is an area that has received some attention. The theory behind it can be quite daunting because it is so different from the theory behind Western Medical Science. In addition, exactly how acupuncture can be applied to a patient and its potential use in prostate cancer need to be addressed. Other herbal therapies for the patient experiencing symptoms related to a localized cancer diagnosis also need to be evaluated. St John's Wort for depression and Kava for anxiety are two examples of herbal alternatives that some prostate patients are inquiring about. Finally, Ginkgo biloba has received a great deal of attention in the media for erectile dysfunction, but there is a dearth of evidence in this area and the information that already exists can be misleading until further studies are conducted. Also, it is imperative that additional studies be performed in all of the above subjects as they relate to prostate cancer, but a general survey on alternative medicine use in urologic diseases is needed first before an adequate review of the most popular therapies can be published. [22.07 / prostate- 23.04- ]

151- gera: 59199/di/ra

**POST-RADIOTHERAPY ACUPUNCTURE. CASE REPORT. RAJAN S. acupuncture in medicine.** 1999,17(1),64-5 (eng ). ref:72

Shortly following mastectomy and radiotherapy 17 years ago for cancer of the breast, post-radiation brachial plexus neuralgia had developed, together with a weeping radiation ulcer along the scar. The lady also suffered from multiple sclerosis with peripheral sensation loss, such that she was unable to walk properly, often burnt her hands and arms, and could not manage fine movements of the fingers. Simple manual acupuncture treatment gave rapid pain relief, induced healing of the ulcer, and restored peripheral sensation. [23.04 / cc- 11.07- 58.11- radiotherapie- sep- ]

152- gera: 74777/nd/re

**USE OF ALTERNATIVE THERAPIES AMONG BREAST CANCER OUTPATIENTS COMPARED WITH THE GENERAL POPULATION. VANDECREEK L ET AL. alt ther health med.** 1999,5(1),71-6 (eng). ref:0 [11.07 / - ]

153- gera: 59718/di/ra

**[EXPERIMENTAL STUDY ON PROTECTIVE ACTION OF MEDICINAL MOXIBUSTION AT SHENQUE (CV 8) POINT ON GASTRIC MUCOSA OF RATS CARRING TUMOR IN CHEMOTHERAPY]. YANG DANHONG ET AL. chinese acupuncture and moxibustion.** 1999,19(8),483 (chi\*). ref:0

Therapeutic effect of medicinal moxibustion at "Shenque" (CV 8) point on toxic reaction of digestive tract induced by antineoplastic chemotherapeutic drug 5-fluorouracil (5-Fu) was observed in the rats bearing tumor 256. Results indicated that medicinal moxibustion at "Shenque"(CV8) point could raise obviously PGE2 level and volume of blood flow in gastric mucosa, decrease injury index of gastric mucosa, and slightly thicken gastric mucosa as compared with those of chemotherapy group. It is suggested that medicinal

moxibustion at "Shenque" point has protective action on injury of gastric mucosa induced by 5-Fu, which is related to increase of PGE2 level and improvement of volume of blood in gastric mucosa. [10.05 / 23.04- eaa- 8vc- 05.09- rat- pg- chimiotherapie- ]

154- gera: 77092/di/ra

**[THE EXPERIMENTAL RESEARCH ON THE EFFECT OF DRUG-PARTITIONED MOXIBUSTION AT "SHENQUE" ON THE GASTROINTESTINAL FUNCTION OF TUMOR-BEARING CHEMOTHERAPY RAT]. YANG DANHONG ET AL. acupuncture research. 1999,24(4),303 (chi\*). ref:**

In this experiment, the gastrointestinal hormones and pathology were used as indices to research the protective effect of drug-partitioned moxibustion at "Shenque" (RN8) on the function of gastrointestinal tract in tumor-bearing chemotherapy rats. The results show that the way drug-partitioned moxibustion at "Shenque" (RN8) can avoid thinning gastric mucosa, prevent the necrosis of epithelial cells and superficial glands from exfoliating, and can also raise the levels of serum gastrin, serum motilin and gastrin of gastric mucosa. As a result, the repair of gastric mucosa is promoted and the gastrointestinal dynamic is adjusted. The experiment has proved that this method can effectively alleviate the gastrointestinal toxic reaction of chemotherapeutic drug (5-Fu) and protect the gastrointestinal functions. [23.04 / eaa- rat- 05.09- 6vc- ]

155- gera: 59178/di/ra

**[SURVEY OF STUDY ON ACUPUNCTURE AND MOXIBUSTION TREATMENT OF CANCER]. ZENG JINXIONG ET AL. chinese acupuncture and moxibustion. 1999,19(6),376 (chi ). ref: [23.04 / - ]**

156- gera: 72708/di/ra

**EXPERIMENTAL STUDY OF CYTOBIOLOGY ON ANTITUMOR EFFECT OF MOXIBUSTION AND IMMUNOMODULATORS. ZHAO CUIYING ET AL. word journal of acupuncture-moxibustion. 1999,9(4),28-1 (eng). ref:**

In the study, the antitumor effect was observed by employing HAC-tumor-bearing mice treated with direct moxibustion on point Guanyuan (CV 4) (Group M), subcutaneous administration of liposome encapsulated immunomodulators called IMC (Group IMC), and combination of these two methods (Group M+ IMC). Parameters reflecting biological characteristics of tumor cells, including 5 kinds of lectins, mitotic cycle, expression of C-erbB-2 oncogene and counts of AgNORs were further investigated. The results showed that treatment with combination of moxibustion and IMC could significantly lower three lectins (ConA, LCA, RCA) among these five lectins (BSL, ConA, LCA, RCA, WGA), significantly reduce the expression of C- erbB-2 oncogene, the counts of AgNORs and the percentage of phase S in HAC tumor cells (compared with Group IMC). Moxibustion or IMC alone did render a certain degree of influence on the above-mentioned parameters, although most of changes were not statistically significant. The above-mentioned results indicated that the antitumor efficacy achieved by treatment with combination of moxibustion and IMC was mainly through its influence on biological characteristics of the tumor cells, namely, its reducing effect on DNA synthesis or on the proliferating rate of tumor cells and its influence on other biological characteristics of tumor cells [23.04 / 4vc- souris- eaaa- 05.09- 23.02- ]

157- gera: 59835/di/ra- num

**A CLINICAL STUDY ON ACUPUNCTURE FOR PREVENTION AND TREATMENT OF TOXIC SIDE-EFFECTS DURING RADIOTHERAPY AND CHEMOTHERAPY. ZHOU J ET AL. journal of traditional chinese medicine. 1999,19(1),16-21 (eng ). ref:9**  
Revue des études cliniques chinoises dans le domaine de la chimiothérapie et radiothérapie. [23.04 / chimiotherapie- rg- radiotherapie- ]

158- gera: 72869/di/ra

**A CLINICAL STUDY ON ACUPUNCTURE FOR PREVENTION AND TREATMENT OF TOXIC SIDE-EFFECTS DURING RADIOTHERAPY AND CHEMOTHERAPY. ZHOU JUNQIN ET AL. journal of tcm. 1999,19(1),16-21 (eng). ref:**

Yu Cong Tang (Li), a TCM decoction, was used to treat senile dementia. It has the action of invigorating the spleen, reinforcing the kidney, nourishing yin, strengthening yang, improving blood circulation, dredging the channels, removing phlegm and restoring consciousness. CT, EEG, KEG, Hb, PaO<sub>2</sub>, Tch, TO and 17-OHCS were tested, showing significant differences (P<0.05 or <0.01) before and after the treatment. Remarkable improvement was found in clinical symptoms, and the effective rate was 94.1%. Significant differences were found between the TCM and western medicine (WM) groups in symptom improvement (P<0.05-0.01) and therapeutic results (P<0.001). [23.04 / radiotherapie- chimiotherapie- ]

159- gera: 58951/di/ra

**[RECENT DEVELOPMENTS AND LOOKING AHEAD IN ALLEVIATING PAIN OF TUMOR WITH ACUPUNCTURE AND MOXIBUSTION]. ZHOU QINGHUI. journal of zhejiang college of tcm. 1999,23(1),57 (chi ). ref: [6.01 / rg- 23.04- ]**

160- gera: 71175/di/re- num

**ANALGESIC EFFECTS OF AURICULAR ACUPUNCTURE FOR CANCER PAIN. ALIM D ET AL. journal of pain and symptom management. 2000,19(2),81-2 (eng). ref: [6.01 / 23.04- 05.10- ]**

161- gera: 86839/di/ra

**[EXPERIMENTAL OBSERVATION ON ANTITUMOR EFFECTS OF MURINE MOXIBUSTION SERUM (MS)]. CHEN YUN-FEI ET AL. shanghai journal of acupuncture and moxibustion. 2000,19(6),39 (chi\*). ref:9**  
Objective To observe the anti-tumor effect of Marine Moxibustion Serum (MS). Methods Anti-tumor experiment with MS was performed on marine solid carcinoma model transplanted with thymoma (E1 4) to observe growth of tumor in vivo and survival period of tumor-bearing mice. Results MS could delay the occurrence of the tumor and prolong the survival period of tumor-bearing mice. The anti-tumor effect of pre-therapy group with MS was superior to that of therapeutic group. Moxibustion existed relative specificity of acupoints. Conclusion Distinct anti-tumor effect of MS has been observed in the experiment. [23.04 / eaa- specificite- souris- ]

162- gera: 77626/di/ra

**[EXPERIMENTAL STUDY ON MURINE MOXIBUSTION SERUM INDUCING APOPTOSIS OF TUMOR CELLS]. CHEN YUNFEL. acupuncture research. 2000,25(1),38 (chi\*). ref:9**

By culture EL-4 tumor cells with Murine Moxibustion Serum (MS), influence of MS to cell structure, cell cycle and breaking point of DNA was studied. The results proved that

MS could induce apoptosis of tumor cells, result in typical apoptosis changes in vitro, influence transforming process of tumor cells from phase S to phase G2M and enhance the positive marking percentage of breaking point of DNA. The conclusion is that MS may contain certain known or unknown ingredients which inhabit the growth of tumor cells. [23.04 / - ]

163- gera: 73548/di/ra

**DOES ACUPUNCTURE INFLUENCE THE VASOMOTOR SYMPTOMS EXPERIENCED BY BREAST CANCER PATIENTS TAKING TAMOXIFEN? ABSTRACT.** CUMINS SM ET AL. *acupuncture in medicine*. 2000,18(1),28 (eng). ref:9 [11.06 / 23.04- ]

164- gera: 94362/di/ra

**BREAST CANCER. NATUROPATHY,OSTEOPATHY,ACUPUNCTURE-A PRACTITIONER'S PERSPECTIVE.** GOODMAN J. *compmed bulletin*. 2000,2(2),4 (eng). ref:9 [11.07 / 23.04- ]

165- gera: 74026/di/ra

**ACUPUNCTURE TREATMENT OF SEQUELAE AFTER RESECTION OF CEREBRAL TUMORS.** HU LI-NING ET AL. *international journal of clinical acupuncture*. 2000,11(3),261 (eng). ref:9

This study reports on the case of a forty-nine-year-old woman with a brain tumor in her left temple. Some symptoms appeared after her subtotal tumor resection. Acupuncture was applied successfully in conjunction with medical treatment. This case illustrates that acupuncture is effective for patients with brain tumors. We advocate that acupuncture be used widely in the clinical treatment in order to accelerate rehabilitation and improve the quality of life of patients after surgery. Furthermore, the research activities of acupuncture theory should speed up. [14.03 / cc- ]

166- gera: 77628/di/ra

**[INDIRECT MOXIBUSTION ON HYPOXIC TUMOR CELLS AND IMMUNOLOGICAL FUNCTION OF TUMOR UNDERGOING RADIOTHERAPY].** HUANG XIAO ET AL. *acupuncture research*. 2000,25(1),46 (chi\*). ref:9

This article studies the effect of indirect moxibustion on HAC-tumor bearing mice treated with radiotherapy. The results of hypoxic tumor regeneration after irradiation showed that combination of the indirect moxibustion and radiotherapy had the coordinating efficiency of antitumor effect. The NK activity, LAK activity, IL-2 content and IL-6 activity of tumor bearing mice were all significantly depressed. All the above parameters were further depressed after irradiation except for NK activity. Indirect moxibustion could promote all the parameters in different degrees, and LAK activity reached the normal level. The results showed that indirect moxibustion's influence on IL-6 activity and IL-2 content can promote NK activity, LAK activity and recover immunological function. [23.04 / - ]

167- gera: 70447/nd/re

**RESEARCH ON COMPLEMENTARY/ALTERNATIVE MEDICINE FOR PATIENTS WITH BREAST CANCER: A REVIEW OF THE BIOMEDICAL LITERATURE.** JACOBSON JS ET AL. *j clin oncol*. 2000,18(3),668 (eng). ref:9

**PURPOSE:** This article reviews English-language articles published in the biomedical literature from 1980 to 1997 that reported results of clinical research on complementary and

alternative medical treatments (CAM) of interest to patients with breast cancer. **METHODS:** We searched 12 electronic databases and the bibliographies of the retrieved papers, review articles, and books on CAM and breast cancer. The retrieved articles were grouped by end point: breast cancer (eg, tumor size, survival), disease-related symptoms, side effects of treatment, and immune function. Within each end point, we organized the articles by modality and assessed study design, findings, and qualitative aspects. **RESULTS:** Of the more than 1,000 citations retrieved, 51 fit our criteria for review. Of the articles reviewed, 17 were randomized clinical trials; three of these were trials of cancer-directed interventions, two of which involved the same treatment (melatonin). Seven articles described observational studies, and the remainder were reports of phase I or II trials. Relatively few CAM modalities reportedly used by many breast cancer patients were mentioned in articles retrieved by this process. Most articles had shortcomings. **CONCLUSION:** Although many studies had encouraging results, none showed definitively that a CAM treatment altered disease progression in patients with breast cancer. Several modalities seemed to improve other outcomes (eg, acupuncture for nausea, pressure treatments for lymphedema). If CAM studies are well-founded, well-designed, and meticulously conducted, and their hypotheses, methods, and results are reported clearly and candidly, research in this controversial area should acquire credibility both in the scientific community and among advocates of unconventional medicine. [11.07 / rg- ]

168- gera: 72031/di/tp- num

**EXPOSE SUR LA LUTTE CONTRE LA DOULEUR CHEZ LES CANCEREUX PAR ACUPUNCTURE.** LE PHI. *dalat*. 2000, JUIN, (fra). ref:9 [6.01 / 23.04- ]

169- gera: 70473/nd/re

**ALTERNATIVE THERAPIES USED BY WOMEN WITH BREAST CANCER IN FOUR ETHNIC POPULATIONS.** LEE MM ET AL. *j natl cancer inst*. 2000,92(1),42-7 (eng). ref:9

**BACKGROUND:** Interest in alternative therapies is growing rapidly in the United States. We studied the types and prevalence of conventional and alternative therapies used by women in four ethnic groups (Latino, white, black, and Chinese) diagnosed with breast cancer from 1990 through 1992 in San Francisco, CA, and explored factors influencing the choices of their therapies. **METHODS:** Subjects (n = 379) completed a 30-minute telephone interview in their preferred language. Logistic regression models assessed factors associated with the use of alternative therapies after a diagnosis of breast cancer. **RESULTS:** About one half of the women used at least one type of alternative therapy, and about one third used two types; most therapies were used for a duration of less than 6 months. Both the alternative therapies used and factors influencing the choice of therapy varied by ethnicity. Blacks most often used spiritual healing (36%), Chinese most often used herbal remedies (22%), and Latino women most often used dietary therapies (30%) and spiritual healing (26%). Among whites, 35% used dietary methods and 21% used physical methods, such as massage and acupuncture. In general, women who had a higher educational level or income, were of younger age, had private insurance, and exercised or attended support groups were more likely to use alternative therapies. About half of the women using alternative therapies reported discussing this use with their physicians. More than 90% of the subjects found the therapies helpful and would recommend them to their friends. **CONCLUSIONS:** Given the high prevalence of alternative therapies used in San Francisco by the four ethnic

groups and the relatively poor communication between patients and doctors, physicians who treat patients with breast cancer should initiate dialogues on this topic to better understand patients' choices with regard to treatment options. [11.07 / 23.04- ]

170- gera: 94361/di/ra  
**BREAST CANCER. OPINION. MILES D. compmed bulletin.** 2000,2(2),2 (eng). ref:9  
 [11.07 / 23.04- ]

171- gera: 91987/di/ra  
**[TREATMENT OF 49 CASES OF MAMMARY CANCER WITH XIAOHE PILL]. PAN SUBAI. jiangsu journal of tcm.** 2000,21(9),24 (chi). ref:9  
 [11.07 / - ]

172- gera: 91526/di/ra  
**[EXPERIMENTAL STUDY ON THE EFFECT ON COLORECTAL CANCER IN ANIMAL TAKING BY TUMOR NECROSIS FACTOR AND ACUPUNCTURE]. RAO BEN-QIANG ET AL. chinese journal of basic medicine in tcm.** 2000,6(9),55 (chi\*). ref:9  
 Objective: it were to study the effect on the central neurotransmitter of moxibustion when it were used to treat rheumatoid arthritis, so as to determine the mechanism of anti-inflammatory and immunity action of moxibustion. Method: adjuvant arthritis models rats were made, and the degree of inflammatory swelling, IL-6, IL-2 and NE, 5-HT, NO in hypothalamus after moxibustion on point "Shen shu" were measured. Result: 1) treatment of moxibustion alleviated the swelling, reduced IL-6 and increased IL-2 (P<0.01, comparing with control group), indicating that moxibustion can relieve inflammation, restrain the forming of inflammatory factors and raise the immunity of body; 2) treatment of moxibustion elevated the level of NE, 5-HT and brought down the level of NO, indicating that moxibustion can activate or regulate the anti-inflammatory and immunity function of HPA axis, and help relieve adjuvant arthritis. Conclusion: moxibustion has the effect of anti-inflammatory and immunity and hypothalamic neurotransmitters may take part in its action of central regulating. [10.06 / rat- 05.09- 23v- ne- 5ht- 05.09- il- eaa- ]

173- gera: 95043/di/re- num  
**PREVALENCE OF COMPLEMENTARY THERAPY USE BY WOMEN WITH BREAST CANCER: A POPULATION-BASED SURVEY. REES RW ET AL. eur j cancer.** 2000,36,1359-64 (eng). ref:9  
 [11.07 / - ]

174- gera: 94360/di/ra  
**BREAST CANCER. A SUMMARY OF RESULTS. SHAW S. compmed bulletin.** 2000,2(2),1 (eng). ref:9  
 [11.07 / 23.04- ]

175- gera: 73547/di/ra  
**TREATMENT OF HOT FLUSHES IN BREAST CANCER PATIENTS WITH ACUPUNCTURE. TUKMACHI E. acupuncture in medicine.** 2000,18(1),22-7 (eng). ref:9  
 A common treatment for post-menopausal hot flushes is to raise oestrogen levels with hormone replacement therapy. However this option is not considered suitable for breast cancer patients with hormone sensitive carcinoma, since an increase in oestrogen is contraindicated. This leaves little available as an effective conventional therapy. There has been some evidence that acupuncture is a suitable treatment for hot flushes, so a series of 22 consecutive breast cancer patients referred by an oncologist for treatment of hot flushes

were given a course of classical body acupuncture with two 20-30min treatment sessions per week for up to 7 weeks. The frequency of recorded hot flushes (both day and night) had improved significantly (p<0.001) by the end of treatment. All patients claimed some benefit and 82% had effective relief. [11.06 / 23.04- ]

176- gera: 74256/di/ra- num  
**TREATMENT BY ACUPUNCTURE AND DIETARY MODIFICATION. HOT FLUSHES IN BREAST CANCER PATIENTS. TUKMACHI E. journal of chinese medicine.** 2000,64,22-31 (eng). ref:43

Many women treated surgically for early breast cancer, who then undergo treatment with chemotherapy and/or Tamoxifen and/or ovarian ablation, may have vasomotor symptoms that usually continue for years. Hot flushes are brought out from the thermo-regulatory centre, and are possibly attributable to a decrease in hypothalamic opioid activity produced by low oestrogen concentrations. Acupuncture therapy stimulates hypothalamic opioid activity and relieves hot flushes. Twenty-two breast cancer women with vasomotor symptoms following chemotherapy and Tamoxifen received acupuncture treatment sessions of 20-30 minutes twice weekly for 3-8 weeks, with a detoxifying healthy diet programme and changes in life style. All patients were followed up 3-5 weeks after the last acupuncture session and showed a reduction in the number of hot flushes (average 80% after the completion of treatment course). This study concludes that acupuncture, associated with a dietary programme and healthy life style may be an alternative treatment of choice in breast cancer survivor women suffering from hot flushes following chemotherapy and/or Tamoxifen and deserves further clinical appraisal. [11.06 / 11.07- 23.04- ]

177- gera: 78467/di/ra  
**[EFFECT OF RUNING NO 2 ON THE GROWTH OF MGF 7 HUMAN BREAST CANCER LINES IN VIVRO AND IN VITRO]. WUE XUE QING ET AL. chinese journal of traditional medical science and technology.** 2000,7(4),211 (chi\*). ref:64  
 [11.07 / 23.04- ]

178- gera: 77918/di/ra  
**[EXPERIMENTAL RESEARCH OF ANTICANCER ACTIONS WITH MOXIBUSTING SHENQUE POINT]. YE XIANG RONG ET AL. journal of shandong university of tcm.** 2000,24(3),229 (chi\*). ref:64

It has been observed in mice with transplanted liver cancer (H22) that the anticancer actions with moxibusting Shenque point. It shows that moxibusting every other day is much more effective than moxibusting everyday in results. It can increase the thymus exponent of mice with tumor. On the other hand, it can decrease saliva acid in serum (P<0. 05). With moxibusting, the node amount of pulmonary tumor is obviously less than that of the control group (P<0. 05). It also happened in weight of lymphnodes in both transplanted lateral armpit and renal hilus (P<0. 05), and the invasive grade of cancer cell in axially lymphnodes was decreased than that of the control group. It shows that it can prevent lymphatic metastasis by moxibustion: it: to improve immune functions and decrease saliva acid in serum. [23.04 / 05.09- 8vc- ]

179- gera: 90593/di/ra  
**NON-INVASIVE MEASUREMENT OF TELOMERE IN NORMAL AND CANCER TISSUE IN HUMANS AND THE TELOMERE- INCREASING EFFECT OF ACUPUNCTURE ON NORMAL TISSUE AND TELOMERE-DECREASING EFFECT OF ACUP ON**

**CANCER. ABSTRACT YOSHIKI OMURA.**  
**acupuncture and electrotherapeutics research.** 2000,25(3-4),208 (eng). ref:64  
 [23.04 / - ]

180- gera: 75807/di/ra  
**[CLINICAL STUDY ON THE EXPRESSION LEVEL OF LYMPHOCYTE FUNCTION-RELATED ANTIGEN OF BREAST CANCER PATIENTS].** ZHANG JIN ET AL.  
**chinese journal of integrated traditional and western medicine.** 2000,20(2),110 (chi\*). ref:64  
 [11.07 / - ]

181- gera: 77634/di/ra- num  
**[ANALGESIC EFFECT OF CHINESE HERBS AND ACUPUNCTURE ON CANCER PATIENTS].** ZHANG MEI ET AL. **acupuncture research.** 2000,25(1),64 (chi\*). ref:64  
 90 cancer patients with different degree pain were observed in the study. They were divided into 4 groups: acupuncture group, Chinese Herbs group( combination of oral medication and Chinese herb iontophoresis treatment), western medicine group and Chinese herbs and acupuncture group. The results showed that the analgesic effect of acupuncture group and Chinese herbs group was better than that of the western medicine group. The Chinese herbs and acupuncture group had a very significant difference from the western group. Therefore, we can conclude that the acupuncture and Chinese herbs' analgesic effect on cancer patients has a high value in clinical treatment. [6.01 / ecr - ]

182- gera: 93847/di/ra  
**[EXPERIMENTAL STUDY ON THE GROWTH AND METASTASIS OF MAMMARY CANCER OF CA761 MICE INHIBITED BY "RU-NING II"].** CHENG QIANJUN ET AL. **research of tcm.** 2001,17(2),43 (chi\*). ref:64  
 [11.07 / - ]

183- gera: 95148/di/ra- num  
**[CLINICAL COMPARATIVE STUDY ON DIFFERENT ACUPUNCTURE METHODS FOR PREVENTION AND TREATMENT OF TOXIC AND SIDE-EFFECTS IN CHEMOTHERAPY OF MALIGNANT TUMOR].** FAN YU ET AL. **chinese acupuncture and moxibustion.** 2001,21(5),259 (chi\*). ref:64  
 Purpose: to investigate the different actions of moxibustion and acupoint-injection on toxic and side-effects of chemotherapy in patients of malignant tumor. Methods: sixty-three cases of malignant tumor were divided into 3 groups, moxibustion group (23 cases), acupoint-injection group (22 cases) and control group (18 cases). They were treated with moxibustion, acupoint-injection of Huangqi injectio and routine western medicine in chemotherapy respectively; and WBC count and immunoglobulin contents before and after treatment were observed. Results: both acupoint-injection and moxibustion could increase WBC count and immunoglobulin contents, being better than those of the control group ( $P < 0.05$  or  $P < 0.01$ ); acupoint-injection was better than that of the moxibustion in improvement of WBC count ( $P < 0.05$ ); and moxibustion was better than that of the acupoint-injection in improvement of immunoglobulin content ( $P < 0.05$ ). Conclusion: both moxibustion and acupoint-injection can prevent and cure the toxic and side-effect caused by chemotherapy in the patient of malignant tumor and different therapies have different effects. [23.04 / 05.15- 05.09- 10.03- ecr- chimiotherapie- ]

184- gera: 111857/di/ra

**CLINICAL STUDY ON THE TIME OF TREATING CHEMOTHERAPY-INDUCED TOXIC AND SIDE EFFECTS IN MALIGNANT TUMOR PATIENTS BY ACUPOINT- INJECTION OF ASTRAGALUS ROOT INJECTION.** FAN YU ET AL.. **world journal of acupuncture-moxibustion.** 2001,11(1),20 (eng\*). ref:64  
 [23.04 / - ]

185- gera: 114848/di/ra  
**CLINICAL STUDY ON THE TIME OF TREATING CHEMOTHERAPY-INDUCED TOXIC AND SIDE EFFECTS IN MALIGNANT TUMOR PATIENTS BY ACUPOINT- INJECTION OF ASTRAGALUS ROOT INJECTION..** FAN YU ET AL.. **world journal of acupuncture-moxibustion.** 2001,11(1),20 (eng\*). ref:64  
 Objective : To investigate the suitable time of treating virulent and side effects of chemotherapy for malignant tumor by acupoint-injection of Astragalus Root injection. Methods : Sixty-three patients with malignant tumor were divided into three groups: prevention treatment (PT) group (n = 23 cases), post-chemotherapy treatment (POT) group( n = 22 cases), Western medicine (WM) group ( n = 18 cases). The patients in PT, POT and WM groups were treated respectively from the fifth day on before chemotherapy and from the first day on after chemotherapy, 18 days in all. The patients in WM group were administered Batilol and Leucogen from the first day on after chemotherapy. Changes of leukocytes and immunoglobulin before and after treatment were observed. Results : 1) Acupoint- injection of Astragalus Root Injectio could increase the number of leukocytes and immunoglobulin content and its effect was better than that of Western medicine ( $P < 0.05$ ); 2) The effect of PT group was better than that of POT group in preventing and treating virulent and side effects of chemotherapy ( $P < 0.05$ ). Conclusion : It should be stressed on prevention of malignant tumor by using acupoint- injection of Astragalus Root for relieving virulent and side effects of chemotherapy. [23.04 / - ]

186- gera: 97013/di/ra  
**[TANG HANJUN'S EXPERIENCE IN TREATING THE POSTOPERATION STAGE OF MAMMARY CANCER WITH TRADITIONAL CHINESE MEDICINE].** JIA XIHUA. **zhejiang journal of traditional chinese medicine.** 2001,36(10),419 (chi). ref:64  
 [11.07 / 23.04- ]

187- gera: 94824/di/re- num  
**ACUPUNCTURE FOR PILOCARPINE-RESISTANT XEROSTOMIA FOLLOWING RADIOTHERAPY FOR HEAD AND NECK MALIGNANCIES.** JOHNSTONE PA ET AL. **int j radiation oncology biol phys.** 2001,50(2),353-7 (eng). ref:64  
 OBJECTIVE: Xerostomia is a frequent and potentially debilitating toxicity of radiotherapy (XRT) for cancers of the head and neck. This report describes the use of acupuncture as palliation for such patients. METHODS AND MATERIALS: Eighteen patients with xerostomia refractory to pilocarpine therapy after XRT for head and neck malignancy were offered acupuncture as palliation. All patients are without evidence of cancer recurrence at the primary site. Acupuncture was provided to three auricular points and one digital point bilaterally, with electrostimulation used variably. The Xerostomia Inventory (XI) was administered retrospectively to provide an objective measure of efficacy. RESULTS: Acupuncture contributed to relief from xerostomia to varying degrees. Palliative effect as measured by the XI varied from nil to robust (pre- minus post- therapy values of over 20 points). Nine patients had benefit of over 10 points on the XI. CONCLUSIONS:

Acupuncture reduces xerostomia in some patients who are otherwise refractory to best current management. [19.02 / radiotherapie- 05.10- ]

188- gera: 94201/di/ra- num

**[STUDY ON EFFECT OF MOXIBUSTION AND GUBEN YILIU COMBINED WITH CHEMOTHERAPY IN TREATING MIDDLE-LATE STAGE MALIGNANT TUMOR].** LIU JU ET AL. **chinese journal of integrated traditional and western medicine.** 2001,21(4),262 (chi\*). ref:19

Objective: To observe the complementary function of moxibustion and Guben Yiliu JU (GBYL), a Chinese herbal composite preparation, in combination with chemotherapy. Methods: Eighty-one patients of middle-late stage malignant tumor were randomly divided into three groups, 16 in the control group treated with chemotherapy alone, 35 in the TCM group treated with chemotherapy combined GBYL and 30 in the TCM combined moxibustion group. The therapeutic effect of treatment was evaluated according to the immediate effect, living quality scoring, etc. Results: The comprehensive living quality score and Karnofsky score dropped significantly in the control group after treatment with significant increase of pain score and decrease of tongue figure score ( $P < 0.05$  or  $P < 0.01$ ). In the TCM group, the former two criteria lowered less than those in the control group did, but no significant difference in the latter two criteria was shown. For those in the TCM combined moxibustion group, all the four criteria were improved better than those in the control group, ( $P < 0.01$  or  $P < 0.05$ ). Conclusion: GBYL combined or not combined with moxibustion could improve the living quality of patients received chemotherapy. [23.04 / ecr- 05.09- ]

189- gera: 104294/di/ra

**[THE EFFECT OF ACUPOINT APPLICATION WITH ANTICANCER OINTMENT TOGETHER WITH ORAL ADMINISTRATION OF CHINESE MEDICINE ON THE ACTIVITY OF SPLEEN LAK CELLS AND SIL-2R LEVEL IN MICE BEARING TUMOR].** SUN LIU-HE CAO JIAN-MEI. **henan traditional chinese medicine.** 2001,21(3),15 (chi\*). ref:19 [23.04 / - ]

190- gera: 94879/nd/re

**COMPLEMENTARY AND ALTERNATIVE MEDICINE IN EARLY-STAGE BREAST CANCER.** TAGLIAFERRI M ET AL. **semin oncol.** 2001,28(1),121-34 (eng). ref:19

Complementary and alternative medicine (CAM) are becoming increasingly popular in many medical situations, particularly among patients with cancer. CAM encompasses a range of modalities including dietary and vitamin supplements, mind- body approaches, acupuncture, and herbal medicines. In contrast to standard chemotherapeutic and hormonal regimens used for the adjuvant treatment of early-stage breast cancer, controlled clinical trials have generated few data on the relationship between CAM and the outcomes of recurrence or survival, or even overall quality of life and safety. The objectives of CAM treatments are manifold: the reduction of toxicities of therapy, improvement in cancer-related symptoms, enhancement of the immune system, and even a direct anticancer effect. The primary basis of CAM rests on empirical evidence and case studies, as well as theoretic physiologic effects. In some cases, laboratory or clinical data lend support to these modalities. Some types of CAM are based on ancient Oriental forms of medicine founded on centuries of experience documented through oral and written text. Nevertheless, the paucity of evidence in the clinical setting limits firm conclusions about the effectiveness

or safety of most CAM approaches in breast cancer. This review will summarize the basis for the application of certain CAM modalities in the therapy of early-stage breast cancer and will highlight some of the directions of investigative work that could lead to a rational integration of CAM into conventional adjuvant therapy. [11.07 / 23.04- ]

191- gera: 95001/di/ra

**EFFECTS OF MOXA-CONE MOXIBUSTION AT GUANYUAN ON ERYTHROCYTIC IMMUNITY AND ITS REGULATIVE FUNCTION IN TUMOR-BEARING MICE.** WU PING ET AL. **journal of tcm.** 2001,21(1),68-71 (eng). ref:19

[23.04 / eaa- 05.09- 4vc- 23.02- ]

192- gera: 94530/di/ra

**[CLINICAL OBSERVATION ON EFFECT OF ELECTROACUPUNCTURE THERAPY IN TREATING SUPERFICIAL TUMOR].** XIN YU-LING ET AL. **chinese journal of integrated traditional and western medicine.** 2001,21(3),174 (chi\*). ref:13

Objective: To investigate the clinical effect of electroacupuncture therapy (EAT) in treating superficial tumors. Methods: The healthy tissue was protected by insulation sleeve, and the platinum electrodes served as needles was inserted into the tumor and connected to an EAT instrument using galvanic current. The electric voltage applied was 6 - 8V, the electric current was in a range of 40 - 80mA, and 80 - 100 coulomb electricity for 1 cm diameter of tumor mass was administered. Results: In the 320 cases, 123 were complete remission (CR), 129 partial remission (PR), 36 with their tumor shrunk by 1/4 and 32 with size of tumor unchanged. The total effective rate (CR + PR) was 78.7%. Conclusion: EAT shows good effect in treating superficial tumor and provides a new therapeutic means for the patients with tumor of unresectable or relapsed. It is a simple, convenient, safe and effective method with less injury and quick recovery. [23.04 / 05.12- ]

193- gera: 119957/di/ra

**LUNG CANCER TREATED BY ACUPUNCTURE-MOXIBUSTION COMBINED WITH TRADITIONAL CHINESE MEDICINE: 40 CASES.** ZENG XIAOZHI ET AL. **international journal of clinical acupuncture.** 2001,12(4),370 (eng\*). ref:13 [17.05 / - ]

194- gera: 97273/di/ra

**[EFFECT OF DIFFERENT PRESCRIPTIONS OF ACUPUNCTURE POINTS ON ANTI - OXIDATION SYSTEM OF TUMOR - BEARING MICE RECEIVING CTX CHEMOTHERAPY].** ZHA WEI, SHANG MING-HUA SUN YI-NONG. **journal of nanjing university of traditional chinese medicine(natural science).** 2001,17(5),312 (chi\*). ref:13

To investigate into the effect of different combinations of acupuncture points on the anti - oxidation system of mice with S 180 ascitic tumor receiving chemotherapy with CTX. METHOD : 90 Kunming mice were divided randomly into 9 groups and injected with S 180 tumor strains. Chemotherapy with CTX was given and acupuncture with warming needle method at Zusanli, Mingmen and Dazhui and moxibustion were also given. The observation indexes included serum MDA, GSH - PX and SOD. RESULT: Acupuncture and moxibustion have good protecting effect on serum MDA and SOD, with marked difference between the treatment groups and the control groups ( $P < 0.01$ ). The contents of serum MDA in the treatment groups were also greatly lower than those in the experimental and control groups ( $P < 0.01$ ). CONCLUSION : Marked difference exists between different



combinations of points in their actions upon the anti-oxidation system of tumor-bearing mice receiving CTX chemotherapy. [23.04 / - ]

195- gera: 96097/di/ra

**[THE GIST ON DIFFERENTIAL DIAGNOSIS AND TREATMENT OF MAMMARY CANCER].** ZHANG HONG-LIANG, WANG NING. *xinjiang journal of traditional chinese medicine*. 2001,19(3),3 (chi). ref:13 [11.07 / - ]

196- gera: 92231/di/ra

**[DIFFERENTIATION OF SYMPTOM COMPLEX OF BREAST CANCER BY INTEGRATED MEDICINE].** ZHANG JIN ET AL. *chinese journal of surgery of integrated traditional and western medicine*. 2001,7(1),13 (chi\*). ref:13

Objective: To study the differentiation of syndromes of breast cancer by integrated traditional Chinese and western medicine Methods: A series of 147 cases of breast cancer were studied by using traditional Chinese method of differentiation of syndromes, the states of humoral immunity and cytoimmunity were also, detected. Results: According to the clinical manifestation and tongue inspection. Patients with breast cancer were divided into five clinical types: stagnation of qi; blood stasis; Yin-blood deficiency; Yang-qi deficiency and breast cancer without general abnormality. Immunological examination showed that in the early stage most humoral immunity criteria were elevated and those of cytoimmunity decreased, especially in late cases. Conclusion: Stagnation of qi and blood stasis occurred mostly in early cases of breast cancer, whereas Yin-blood and Yang-qi deficiency usually appeared in late cases with depressed immunofunction. [11.07 / d\$- mo- ]

197- gera: 101925/di/ra

**[EFFECT OF MOXIBUSTION SERUM ON PROLIFERATION AND PHENOTYPES OF TUMOR-INFILTRATING LYMPHOCYTES].** CHEN YUNFEI, ZHAO CUIYING, CHEN HANPING, ET AL. *chinese acupuncture and moxibustion*. 2002,22(4),261 (chi\*). ref:13 [23.04 / - ]

198- gera: 103995/di/ra

**TRADITIONAL CHINESE MEDICINE IN THE TREATMENT OF BREAST CANCER (PART ONE) ..** COHEN I, TAGLIAFERRI M, TRIPATHY D. *journal of chinese medicine*. 2002,68,40 (eng). ref:13 [11.07 / - ]

199- gera: 104025/di/ra

**TRADITIONAL CHINESE MEDICINE IN THE TREATMENT OF BREAST CANCER (PART TWO) ..** COHEN I, TAGLIAFERRI M, TRIPATHY D. *journal of chinese medicine*. 2002,69,49 (eng). ref:13 [11.07 / - ]

200- gera: 108960/di/ra

**TRADITIONAL CHINESE MEDICINE IN THE TREATMENT OF BREAST CANCER (PART THREE).** COHEN I, TAGLIAFERRI M, TRIPATHY D. *journal of chinese medicine*. 2002,70,44 (eng). ref:13  
Yue ju wan is a recipe that moves and regulates qi, dissolves stagnations and clears heats. [11.07 / 23.04- ]

201- gera: 101525/di/ra

**[EFFECTS OF GENISTEIN AND DAIDZEIN ON THE PROLIFERATION OF HUMAN BREAST CANCER CELL LINE IN VITRO].** HE FUJIN ET AL. *journal of*

*beijing university of traditional chinese medicine*.

2002,25(1),22 (chi\*). ref:13 [11.07 / - ]

202- gera: 107038/di/ra

**TRADITIONAL CHINESE MEDICINE IN THE TREATMENT OF BREAST CANCER (PART ONE)..** ISAAC COHEN, MARY TAGLIAFERRI AND DEBU TRIPATHY. *journal of chinese medicine*. 2002,68,40 (eng). ref:13 [11.07 / - ]

203- gera: 112766/di/ra

**[INFLUENCE OF "BREAST PEACE NO. 2 FORMULA" AND ITS MODIFIED FORMULAS ON VEGF AND FLK -1 IN MAMMARY CANCER].** JIA XI-HUA TANG HAN-JUN GAO SHANG-PU, ET AL. *acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai*. 2002,16(4),41 (chi\*). ref:13 [11.07 / - ]

204- gera: 115757/di/ra

**[INFLUENCE OF "BREAST PEACE NO. 2 FORMULA" AND ITS MODIFIED FORMULAS ON VEGF AND FLK -1 IN MAMMARY CANCER].** JIA XI-HUA TANG HAN-JUN GAO SHANG-PU, ET AL. *acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai*. 2002,16(4),41 (chi\*). ref:13 [11.07 / - ]

205- gera: 102471/di/ra

**[CLINICAL OBSERVATION OF ELECTRO-ACUPUNCTURE COMBINED WITH COMPOUND SALVIA MILTIORRHIZA INJECTION IN TREATING LYMPHATIC EDEMA OF UPPER LIMB OF POSTOPERATION IN THE PATIENTS WITH MAMMARY CANCER].** LI HANZHONG, HUANG ZHIFEN, ZHANG ZUOJUN, ET AL. *hebei journal of tcm*. 2002,24(4),255 (chi\*). ref:13

Objective : To investigate the therapeutic effect of electro-acupuncture combined with compound Salvia miltiorrhiza injection on the lymphatic edema of upper limb of postoperation in the patients with mammary cancer. Methods : 42 patients with lymphatic edema of upper limb of postoperation of mamary cancer were randomly divided into two groups, 22 patients in treatment group were treated by electro-acupuncture combined with compound Salvia miltiorrhiza injection; 22 patients in control group were treated with diuretics, with a treatment course of 10 days for both groups. The therapeutic effects were evaluated after two treatment courses. Results : The total effective rate was 86.4% in treatment group and 45.0% in control group, there was a significant difference between the two groups ( P < 0.01 ) . Conclusion : Electro-acupuncture combined with compound Salvia miltiorrhiza injection can increase the excitability of muscular tissue, improve the lymphokinesis and local microcirculation, increase the activity of macrophages, induce the apoptosis of fibroblast of granulation tissue, relieve the synulosis, as a result, to improve the symptoms caused by lymphatic edema of upper limb. [11.07 / ecr- ]

206- gera: 107482/di/ra

**[TREATMENT OF 32 CASES OF ADVERSE EFFECTS INDUCED BY RADIOTHERAPY AND CHEMOTHERAPY WITH MOXIBUSTION COMBINED WITH AURICULAR ACUPOINT TAPING AND PRESSING THERAPY].** LI XIAOJUN, LI XIUHUA, LIU YASHU. *chinese acupuncture and moxibustion*. 2002,21(9),523 (chi\*). ref:13  
Methods : Combination of moxa-roll moxibustion and

moxa-cone moxibustion with auricular point taping and pressing therapy was used to treat 32 cases of leukopenia, immunosuppression and gastrointestinal reaction induced by radiotherapy and chemotherapy. Results : Twenty-one cases were markedly effective, 8 cases effective and 3 cases ineffective, the total effective rate being 90.6%. Conclusion : This method can relieve obviously adverse effects induced by radiotherapy and chemotherapy, increase immunity and strengthen hematopoietic function, so as to exert better effects of radiotherapy and chemotherapy, and it is a key of successfully helping anticanceration to apply earlier immunotherapy. [23.04 / - ]

207- gera: 114349/di/ra

**MOXIBUSTION TREATMENT OF TOXIC REACTION PRODUCED IN MALIGNANT TUMOR CHEMOTHERAPY: 36 CASES.** LIANG XIN AND XIAO JUN. *international journal of acupuncture*. 2002,13(2),145 (eng\*). ref:\*  
[23.04 / - ]

208- gera: 117340/di/ra

**MOXIBUSTION TREATMENT OF TOXIC REACTION PRODUCED IN MALIGNANT TUMOR CHEMOTHERAPY: 36 CASES.** LIANG XIN AND XIAO JUN. *international journal of acupuncture*. 2002,13(2),145 (eng\*). ref:\*

Purpose and method: to observe the treatment effect of moxibustion therapy on toxic reaction caused by malignant tumor chemotherapy. We took 36 inpatients from July to October 2000 as the treatment group in which the patients were treated with both chemotherapy and moxibustion therapy on Zusanli (ST 36) and Zhongwan (RN 12); meanwhile, another 36 cases in the same period comprised the control group, treated only with chemotherapy. Result: the treatment group is better than the control group by such indicators as white blood cell (WBC) reduction and toxic reaction of alimentary canal. Conclusion: moxibustion therapy can indeed treat toxic reaction produced by malignant tumor chemotherapy. Acupuncture and moxibustion are the particular non-drug therapies of TCM. In treating tumors today, acupuncture and moxibustion are new therapies that have had outstanding achievements in promoting immunity and relieving toxic reaction due to chemotherapy. 36 chemotherapy patients were treated with moxibustion therapy from July 2000 to October 2000. The details are reported below. [23.04 / - ]

209- gera: 101326/di/ra

**[INFLUENCE OF COMBINED THERAPY OF GUBEN YILIU III, MOXIBUSTION AND CHEMOTHERAPY ON IMMUNE FUNCTION AND BLOOD COAGULATION MECHANISM IN PATIENTS WITH MID-LATE STAGE MALIGNANT TUMOR\*].** LIU JU ET AL. *chinese journal of integrated traditional and western medicine*. 2002,22(2),104 (chi\*). ref:\*

Objective : To observe the supplementary effect of moxibustion and Guben Yiliu III (GBYL), a Chinese herbal compound preparation, in combination with chemotherapy. Methods : Eighty-one patients of mid-late stage malignant tumor were randomly divided into 3 groups: 16 in Group A treated with chemotherapy and placebo; 35 in Group B treated with chemotherapy and GBYL and 30 in Group C treated with chemotherapy and GBYL plus moxibustion. The short-term effect of treatment, changes of blood picture, cell mediated immune function and blood coagulation in patients were observed. Results : After chemotherapy, the lymphocyte count was significantly lowered in Group A and B ( $P < 0.01$ ), but not in Group C ( $P > 0.05$ ); lymphocyte subset T3 raised significantly in Group B; the average level of T-lymphocyte

subsets was reduced in Group A while it increased in the other two groups; and a bi-directional regulation on plasma fibrinogen concentration was shown in Group C ( $P < 0.05$ ). Conclusion : Moxibustion prevented dropping of lymphocyte count caused by chemotherapy. Combination of GBYL and moxibustion could prevent the lowering of T-lymphocyte subsets caused by chemotherapy, and moxibustion could regulate bi-directionally the patients' abnormality in part of blood coagulation mechanism. [23.04 / ecr- ]

210- gera: 107426/di/ra

**[OBSERVATION ON THE THERAPEUTIC EFFECT OF ACUPUNCTURE ON POST-EMBOLIC SYNDROME AFTER ENDARTERIAL CHEMOTHERAPY FOR LIVER CANCER].** MU RONG, ZHENG QUBIN. *chinese acupuncture and moxibustion*. 2002,22(1),21 (chi\*). ref:\*

Purpose : To observe the therapeutic effect of acupuncture on post-embolic syndrome after endarterial chemotherapy for liver cancer. Methods : Thirty-six cases with post-embolic syndrome after endarterial chemotherapy for liver cancer were treated with acupuncture at Neiguan (PC 6) and Zusanli (ST 36), and treatment of Ondansetron was used as controls. and the clinical results of the two groups were compared. Results The effective rate was 97.2% and 95.2% in the treatment group and the control group respectively, with no significantly difference. But there was a significant difference in the markedly effective rate between the two groups ( $P < 0.05$ ). Conclusion : The therapeutic effect in the treatment group is superior to that in the control group. [10.10 / ecr?- 6mc- 36e- ]

211- gera: 100973/di/ra

**L'ELECTROACUPUNCTURE A UNE EFFICACITE SPECIFIQUE DANS LE CONTROLE DES VOMISSEMENTS INDUITS PAR CHIMIOTHERAPIE MYELOABLATIVE.** STEPHAN JM. *acupuncture & moxibustion*. 2002,1(1-2),58-62 (fra). ref:\*

Analyse et commentaire : Shen J, Wenger N, Glaspy J, Hays R.D, Albert P.S, Choi C, Shekelle PG: Electroacupuncture for Control of Myeloablative Chemotherapy-Induced Emesis. A randomized controlled trial. *JAMA*.2000;284,21,2755-2761. [10.03 / - ]

212- gera: 107026/di/ra

**[EFFECTS OF ACUPOINT APPLICATION OF ANTI CANCER PLASTER ON CANCER CELL CYCLES IN LEWIS LUNG CANCER MODEL MICE].** SUN LIUHE, YANG QINGYOU. *chinese acupuncture and moxibustion*. 2002,22(9),625 (chi\*). ref:\*

Purpose : To explore the mechanism of acupoint application of Anti-Cancer Plaster for treatment of cancer. Methods : Lewis lung cancer model mice were established by subcutaneous vaccination of suspension of tumor cells in C-57 BL/6 inbreeding mice. Five day later, Anti-Cancer Plaster was applied at the vaccinated position and point "Feishu" (BL 13), once every other day, for 7 sessions of treatment, and then flow cytometry was adopted to analyse the cancer cell cycles. Results : After treatment, the cancer cell cycle was blocked while shifting from G1 phase to S phase; the proportion of cells in G1 phase increased significantly ( $P < 0.05$ ); the proportion of cells in S phase decreased significantly ( $P < 0.01$ ); the index of cell proliferation decreased significantly ( $P < 0.05$ ). Conclusion : Anti-Cancer Plaster plays an action of anti-cancer through depressing proliferation of cancer cells. [17.05 / - ]

213- gera: 108010/di/ra

**[CLINICAL OBSERVATION OF 228 CASES TREATED BY CHINESE MEDICINE AFTER**

**SURGERY OF MAMMARY CANCER]. TANG HAN-JUN, GAO SHANG-PU, ZHENG YONG, ET AL. *acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai*. 2002,16(3),23 (chi\*). ref:\* [11.07 / - ]**

214- gera: 103098/di/ra  
**[FEELING OF TREATMENT ON MAMMARY CANCER CHEMOTHERAPY OF TCM]. TANG LUXIA. *heilongjiang journal of traditional chinese medicine*. 2002,3,25 (chi). ref:\* [11.07 / - ]**

215- gera: 103017/di/ra  
**[APPLICATION OF THE METHOD TO SUPPORT ANTI- PATHOGENIC ABILITY AND EXPEL PATHOGENS IN THE TREATMENT OF MAMMARY CANCER]. WAN HUA, WU XUE-QING, LU DE-MING. *acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai*. 2002,16(1),30 (chi\*). ref:\***  
 In the introduction of the clinical therapies for mammary cancer, this article stresses the therapeutic method to support antipathogenic ability and expel pathogens, by the methods to strengthen the spleen and benefit qi, nourish yin and produce body fluid, warm the kidney and assist yang to support the anti-pathogenic ability in predominance, and by the methods to dissolve phlegm, soften the hard, clarify heat and dissolve toxins and attack poisons with poisons to expel pathogens. [11.07 / 23.04- ]

216- gera: 113322/di/ra  
**[EFFECT OF ACUPUNCTURE ON SERUM TUMOR NECROSIS FACTOR IN THE PATIENT OF ACUTE CEREBRAL INFARCTION]. WANG LIPING, BIAN YIN, LI JIANYUAN, ET AL. *chinese acupuncture and moxibustion*. 2002,22(2),117 (chi\*). ref:\* [14.07 / - ]**

217- gera: 116313/di/ra- num  
**[EFFECT OF ACUPUNCTURE ON SERUM TUMOR NECROSIS FACTOR IN THE PATIENT OF ACUTE CEREBRAL INFARCTION]. WANG LIPING, BIAN YIN, LI JIANYUAN, ET AL. *chinese acupuncture and moxibustion*. 2002,22(2),117 (chi\*). ref:\***  
 Purpose : To observe effect of acupuncture on serum tumor necrosis factor(TNF) in the patient of acute cerebral infarction. Methods : Sixty- eight cases of acute cerebral infarction were divided into acupuncture group and control group, serum TNF contents before acupuncture and one week after acupuncture were determined with enzyme linked immunosorbent assay (ELISA) , and the clinical therapeutic effects before acupuncture and one week and on . one month after acupuncture were assessed. Results : TNF contents in the two groups lowered one week after acupuncture, with a significant decrease in the acupuncture group (P<0.01); There was no significant difference between the two groups in the therapeutic effect one week after acupuncture and there was a significant difference 30 days after acupuncture( P < 0. 05 ) . Conclusion : Acupuncture at early stage can decrease serum content of TNF, quicken inflammatory absorption or decrease inflammatory response and accelerate functional restoration of brain and limbs in the patient of acute cerebral infarction. [14.07 / ecr- ]

218- gera: 107025/di/ra  
**[EFFECTS OF ACUPUNCTURE AND MOXIBUSTION ON MEMBRANE LIPID FLUIDITY OF TUMOR CELLS AND ERYTHROCYTES IN THE TUMOR-BEARING MICE]. WANG XUEXIN, WEN JINGBO, YE XIANGRONG. *chinese acupuncture and moxibustion*.**

2002,22(9),623 (chi\*). ref:\*  
 To approach to the mechanism of acupuncture and moxibustion for anti-tumor Methods : Acupuncture and moxibustion was given at " Qihai" (CV 6) and " Zusanli " (ST 36), and then membrane lipid fluidity of tumor cells and erythrocytes was detected. Results : After treatment, membrane lipid fluidity of ascites carcinoma cells in the treatment groups was significantly lower, and the membrane lipid fluidity of erythrocytes was higher than that in the model group (P<0. 01) , respectively. conclusion : Acupuncture and moxibustion can decrease biological activity of tumor cells, increase biological activity of the organism, exploring biological Mechanisms of acupuncture and moxibustion for anti-tumor to a certain degree. [23.04 / - ]

219- gera: 101287/di/ra  
**[YUGUI GAO FOR SKIN FLAP NECROSIS AFTER OPERATIONS OF MAMMARY CANCER : A CLINICAL OBSERVATION OF 21 CASES]. WEN JIANYU ET AL. *new journal of traditional chinese medicine*. 2002,34(3),21 (chi\*). ref:\***  
 Objective : To observe the curative effect of Yugui Gao (YGG) for skin flap necrosis after operation of mammary cancer. Methods : 40 cases were allocated to treatment group (21 cases) treated by external application of YGG and control group (19 cases) treated by external application of rivanol gauze for 6 weeks. Results : The coloration of wound surface and the growth of granulation showed a very significant difference ( P < 0.00 ( P < 0.001) beginning from the second week between two groups. At the end of treatment, the curative rate was 90. 48% (19/21) and improved rate 9. 52% (2/21), the total effective rate being 100% in treatment group and curative rate was 36. 84% (7/19) and improved rate 47. 37% (9/19), the total effective rate being 84. 21% in control group. The difference was markedly significant ( P < 0.05) . Conclusion : YGG possesses a strong effect on promoting the growth of granulation and epithelium and its curative effect is markedly superior than that the control. [11.07 / - ]

220- gera: 107030/di/ra  
**[SURVEY OF ACUPUNCTURE AND MOXIBUSTION FOR PREVENTION AND TREATMENT OF LIVER CANCER]. YANG YUNKUAN, DIAO CANYANG, HU YOUPIING, ET AL. *chinese acupuncture and moxibustion*. 2002,22(9),638 (chi\*). ref:\***  
 Review present situation of clinical and laboratory studies for treatment and prevention of liver cancer, pain of liver cancer, and its complications with acupuncture, moxibustion , acupoint-injection and acupoint application in recent 20 years, and comment and study on its developing tendency and direction, in order to provide reference for deep study on prevention and treatment of liver cancer. [10.10 / - ]

221- gera: 110890/di/ra  
**EFFECTS OF HYDROXYAPATITE IN COMBINATION WITH FAR-INFRARED RAYS ON SPONTANEOUS MAMMARY TUMORIGENESIS IN SHN MICE. YOKO UDAGAWA, ET AL. *american journal of chinese medicine*. 2002,30(4),495 (eng). ref:\* [11.07 / - ]**

222- gera: 110569/di/ra  
**[THE INFLUENCE OF MOXIBUSTION ON IMMUNOGLOBULIN IN CERVICAL CARCINOMA PATIENTS RECEIVING RADIOTHERAPY]. YU ZHI-CHONG, XU LAN-FENG, ZHAN ZHEN, ET AL.. *shanghai journal of acupuncture and moxibustion*. 2002,21(6),15 (chi\*). ref:\***  
 Purpose : To investigate the improving effect of moxibustion

on immunologic function in cervical carcinoma patients receiving radiotherapy. Method : Agar diffusion method was used to measure IgG - IgA and IgM in 36 patients receiving radiotherapy and moxibustion and 30 patients receiving simple radiotherapy before and after the treatment. Results : Immunoglobulin was significantly higher in the moxibustion group than in the simple radiotherapy group. Especially IgG had a very significant difference. Conclusion : Moxibustion can improve immunologic function in cervical carcinoma patients receiving radiotherapy. [11.02 / ecr?- ]

223- gera: 105618/di/ra

**[CLINICAL STUDY ON MODIFIED OPERATION TO PREVENTION OF SKIN FLAP NECROSIS FOLLOWING ERADICATIVE OPERATION IN BREAST CANCER].** ZHANG CHEN-YANG JIA XIAO-QIANG. *chinese journal of integrated traditional and western medicine in intensive and criti.* 2002,9(4),224 (chi\*). ref:\*  
[11.07 / - ]

224- gera: 101404/di/ra- num

**[INFLUENCE OF SCALP ACUPUNCTURE ON SERUM TUMOR NECROSIS FACTOR IN PATIENTS WITH ACUTE CEREBRAL INFARCTION].** ZHOU WEI ET AL. *shanghai journal of acupuncture and moxibustion.* 2002,21(1),11 (chi\*). ref:\*

Purpose : To observe the influence of scalp acupuncture on serum tumor necrosis factor in patients with acute cerebral infarction. Methods Sixty cases of acute cerebral infarction were randomly divided into an acupuncture group and a non-acupuncture group. Enzyme linked immunoassay was used to measure serum TNF before and after acupuncture and evaluate limb function. Results : Serum TNF dropped in both the groups after the treatment was finished, but it did markedly in the acupuncture group and there was a significant difference ( $P < 0.01$ ). The evaluation of limb function showed that it improved markedly in the acupuncture group after 15 days and there was a significant difference between before and after acupuncture ( $P < 0.05$ ), while it did not in the control group 15 days after general treatment. Conclusion : Scalp acupuncture in the early stage of acute cerebral infarction can decrease serum TNF content and promote the recovery of brain tissues and limb function. [14.07 / ecr- cranio- ]

225- gera: 117516/nd/re- num

**ANALGESIC EFFECT OF AURICULAR ACUPUNCTURE FOR CANCER PAIN: A RANDOMIZED, BLINDED, CONTROLLED TRIAL.** ALIMI D, RUBINO C, PICHARD-LEANDRI E, FERMAND-BRU. *j clin oncol.* 2003,21(22),4120-6. (eng). ref:\*

PURPOSE: During the last 30 years, auricular acupuncture has been used as complementary treatment of cancer pain when analgesic drugs do not suffice. The purpose of this study is to examine the efficacy of auricular acupuncture in decreasing pain intensity in cancer patients. PATIENTS AND METHODS: Ninety patients were randomly divided in three groups; one group received two courses of auricular acupuncture at points where an electrodermal signal had been detected, and two placebo groups received auricular acupuncture at points with no electrodermal signal (placebo points) and one with auricular seeds fixed at placebo points. Patients had to be in pain, attaining a visual analog score (VAS) of 30 mm or more after having received analgesic treatment adapted to both intensity and type of pain, for at least 1 month of therapy. Treatment efficacy was based on the absolute decrease in pain intensity measured 2 months after randomization using the VAS. RESULTS: The main

outcome was pain assessed at 2 months, with the assessment at 1 month carried over to 2 months for the eight patients who interrupted treatment after 1 month. For three patients, no data were available because they withdrew from the study during the first month. Pain intensity decreased by 36% at 2 months from baseline in the group receiving acupuncture; there was little change for patients receiving placebo (2%). The difference between groups was statistically significant ( $P < .0001$ ). CONCLUSION: The observed reduction in pain intensity measured on the VAS represents a clear benefit from auricular acupuncture for these cancer patients who are in pain, despite stable analgesic treatment. [6.01 / 05.10- ecr- ]

226- gera: 119639/di/ra

**[INFLUENCE OF RUNING II ON CELLULAR IMMUNE FUNCTION OF POSTOPERATIVE PATIENTS WITH MAMMARY CANCER AND ALICE WITH MA - 891].** CAO SHANG-PU, ET AL. *chinese journal of traditional medical science and technology.* 2003,10(5),261 (chi\*). ref:\*  
[11.07 / - ]

227- gera: 122593/di/ra

**EFFECTS OF "MOXIBUSTION SERUM" ON PROLIFERATION AND PHENOTYPES OF TUMOR INFILTRATING LYMPHOCYTES.** CHEN YUNFEI, ZHAO CUIYING, CHEN HANPING, ET AL. *journal of tcm.* 2003,23(3),225 (eng\*). ref:\*  
[23.02 / - ]

228- gera: 119758/di/ra

**[CONTROLLED STUDY OF SONO CT HIGH FREQUENCY ULTRASONOGRAPHY WITH MAMMOGRAPHY IN DIAGNOSIS OF BREAST TUMOR].** DONG BEILI, JIN SUJUAN, LIANG ZHEHAO, ET AL. *chinese journal of surgery of integrated traditional chinese and western medicine.* 2003,9(2),83 (chi\*). ref:\*  
[11.07 / - ]

229- gera: 127479/di/ra

**[DETOXIC ACTION OF ACUPOINT-INJECTION IN CHEMOTHERAPY OF MALIGNANT TUMOR].** HU DINGZHENG. *chinese acupuncture and moxibustion.* 2003,23(10),587 (chi\*). ref:\*

Objective To search for a method for prevention and treatment of side-effects in chemotherapy of malignant tumor. Methods The treatment group (n = 71) were treated by injection of Huangqi injection and Danggui injection into Zusanli (ST 36), Xuehai (SP 10) and Shenshu (BL 23) in chemotherapy, and the control group (n = 52) were treated by administration of batyl alcohol tablets 50 mg, leucogen 20 mg, vitamin B6 20 mg, thrice each day. Results The treatment group in toxicity for the digestive tract and bone-marrow-arresting toxicity was significantly lower than the control group ( $P < 0.01$ ). Conclusion Acupoint-injection of Huangqi injection and Danggui injection can effectively prevent and cure toxic reactions in chemotherapy. [23.04 / - ]

230- gera: 121083/di/ra

**[STUDY OF BAZHEN DECOCTION AND CHEMOTHERAPY ON MAMMARY CANCER IN METAPHASE OR LATER PERIOD].** HUANG ZHI-FEN, WEI JIN-SONG, SHI ZHI-YAN, ET AL. *modern journal of integrated traditional chinese and western medicine.* 2003,12(11),1123 (chi\*). ref:\*  
[11.07 / - ]

231- gera: 120393/di/ra- num

[CLINICAL ANALYSIS OF TWO-PHASE ACUPUNCTURE-MOXIBUSTION THERAPY FOR LARGE INTESTINE CANCER IN 27 CASES]. JIN ZHE-XIU. *shanghai journal of tcm*. 2003,37(5),48 (chi\*). ref:\* [10.06 / ecr- 2gi- 5gi- 05.09- ]

232- gera: 133468/di/ra

**ELECTROACUPUNCTURE FOR HOT FLASHES SECONDARY TO CANCER THERAPY: RESULTS OF TREATING THE EASTERN DIAGNOSIS OF KIDNEY WATER EXHAUSTED (PILOT STUDY).** JOHNSTONE PAS. *medical acupuncture*. 2003,15(1),23 (eng\*). ref:\*

Background Many cancer patients experience hot flashes as toxicity of cancer therapy; this may be diagnosed by the Eastern practitioner a! Kidney Water Exhausted.Objective To review outcomes of acupuncture as palliation of hot flashes.Design, Setting, and Patients Thirteen patients with hot flashes secondary to hormonal manipulation for breast cancer (n=8), prostate cancel (n=3), chemotherapy (n=1), or pelvic radiation (n=1) were referred to the Naval Medical Center San Diego (NMCS) Acupuncture Service. Two patients had received medication for hot flashes prior to acupuncture with minor benefit. Patients were offered acupuncture therapy designed to replenish drained kidney Yin; this technique also relieves fatigue. A single physician acupuncturist provided all treatments; sterile single-use needles were exclusively used.Main Outcome Measure Using the Mayo Clinic Hot Flash Index, patients recorded the number of episodes in a 24-hour period and graded these from mild to very severe.Results After a median of 5 treatments in 3 weeks (range 2-6 treatments in 0.5 to 9 weeks), 12 patients responded with fewer and less severe hot flashes as measured by self-report. For these patients, benefits involved a decrease from a median of 8 "moderate" episodes per day to a median of 3 "mild" episodes a day. Subjectively, 12 of 13 patients expressed improvement in quality of life or reduction of symptomatic hot flashes. Conclusions In this cohort of cancer patients experiencing hot flashes, acupuncture may provide improvement in number and severity of episodes. Subjective improvement was noteworthy in many patients. An institutional prospective, randomized controlled trial has been approved for patient accrual. - ]

233- gera: 122142/di/ra

**SAIKOSAPONIN-A INDUCES APOPTOTIC MECHANISM IN HUMAN BREAST MDA-MB-231 AND MCF-7 CANCER CELLS .** JUNG-CHOU CHEN ET AL. *american journal of chinese medicine*. 2003,31(3),363 (eng\*). ref:\* [11.07 / - ]

234- gera: 120220/di/ra

[CLINICAL AND EXPERIMENTAL STUDY OF MAMMARY CANCER TREATED WITH CHINESE MEDICINE]. LI RONG-JUAN. *henan tcm*. 2003,23(4),68 (chi). ref:\* [11.07 / - ]

235- gera: 111411/di/ra

[CLINICAL STUDY OF NEEDLE ACUPUNCTURE FOR ANURESIS ON POST - OPERATIVE RECTAL CANCER PATIENTS]. LI YULIAN , LI LING, SHONG BINGBING. *journal of clinical acupuncture and moxibustion*19(1). 2003,19(1),10 (chi\*). ref:\* [21.04 / - ]

236- gera: 114402/di/ra

[CLINICAL STUDY OF NEEDLE ACUPUNCTURE FOR ANURESIS ON POST-OPERATIVE RECTAL

CANCER PATIENTS]. LI YULIAN, LI LING, SHONG BINGBING. *journal of clinical acupuncture and moxibustion*. 2003,19(1),10 (chi\*). ref:\*

Objective : To observe clinical therapeutic effect of combination of Dan Zhi Xiao Yao Powder with ear point taping and pressing therapy on optic nerve atrophy. Methods : In the treatment group (51 cases , 58 eyes) treated with combination of Dan Zhi Xiao Yao Powder with ear point taping and pressing therapy, and in the control group treated with simple Western medicine (43 cases, 49 eyes), vision and visual field were observed for 3 therapeutic courses. Results : The effective rate for vision was 79. 3% in the treatment group, and 44. 89% in the control group; and the effective rate for visual field was 59. 2% in the treatment group and 22. 6% in the control group, the therapeutic effect in the treatment group being superior to that of the control group (P<0. 05). Conclusion : Combination of Dan Zhi Xiao Yao powder with ear point taping and pressing therapy can increase vision and improve optic function for optic nerve atrophy. [21.04 / - ]

237- gera: 126628/di/ra- num

**ACUPUNCTURE FOR LEUCOPENIA INDUCED BY CHEMOTHERAPY OR RADIOTHERAPY-A META-ANALYSIS.** LIU BAO-YAN, ET AL. *world journal of acupuncture-moxibustion*. 2003,13(4),35 (eng\*). ref:\*

In the present paper, the authors analyze the academic theses of acupuncture for treatment of leucopenia induced by chemo- or radio-therapy. A total of 14 theses are retrieved and all written in Chinese. Quantitative meta-analysis is done for 4 studies of dichotomous data and 5 studies of continuous data. Both of them have positive results. Majority of these trials have methodological and/or reporting shortcomings. Overall, the existing evidence supports the value of acupuncture for the treatment of leucopenia induced by chemo- or radio-therapy. However, the evidence is still not fully convincing. There is an urgent need for well planned, large-scale and multiple-center studies to assess the effectiveness and cost-effectiveness of acupuncture under real-life conditions. [12.02 / meta analyse- ]

238- gera: 113792/di/ra

[THERAPEUTIC FEATURES OF ANCIENT ACUPUNCTURE FOR DISEASES RELATED TO TUMOR]. LIU LI-GONG GU JIE. *acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai*. 2003,17(1),33 (chi\*). ref:\* [23.04 / - ]

239- gera: 116783/di/ra

[THERAPEUTIC FEATURES OF ANCIENT ACUPUNCTURE FOR DISEASES RELATED TO TUMOR]. LIU LI-GONG GU JIE. *acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai*. 2003,17(1),33 (chi\*). ref:\*

In summarizing and analyzing the features of ancient acupuncture for tumor-like diseases, the authors believe that ironing moxibustion, acupuncture, bleeding technique and external application of herbal drugs were the commonly used therapeutic methods and the acupoints selected were those in local region of tumor, adjacent to tumor and remote ones along the meridians. [23.04 / - ]

240- gera: 119098/di/ra

**EFFECTS OF ACUMOXI IN IL2-IFN-NKC IMMUNOREGULATORY NETWORK AND ITS RELATED MACROPHAGE IL1-TH NETWORK AND ON TUMOR.** MA ZHEN-YA, ET AL. *world journal of acupuncture-moxibustion*. 2003,13(2),20 (eng\*). ref:\* [23.04 / - ]

241- gera: 113611/di/ra  
**EFFECTS OF MOXIBUSTION AT SHENQUE (CV 8) ON SERUM IL-12 AND NK CELL ACTIVITY IN THE MOUSE WITH TRANSPLANTATION TUMOR.** QIU XINGSHENG, CHEN KAI, TONG LI, ET AL. *journal of tcm.* 2003,44(3),186 (eng). ref:\*  
 [23.04 / - ]

242- gera: 116602/di/ra  
**EFFECTS OF MOXIBUSTION AT SHENQUE (CV 8) ON SERUM IL-12 AND NK CELL ACTIVITY IN THE MOUSE WITH TRANSPLANTATION TUMOR.** QIU XINGSHENG, CHEN KAI, TONG LI, ET AL. *journal of tcm.* 2003,44(3),186 (eng). ref:\*  
 [23.04 / - ]

243- gera: 120840/di/ra  
**[RUDIMENTARY STATISTICAL ANALYSIS RESEARCH OF SYNDROME DIFFERENTIATION LAW OF BREAST CANCER PATIENT AFTER THE OPERATION IN TCM].** SUN MUPING ET AL. *china journal of tcm and pharmacy.* 2003,18(4),211 (chi). ref:\*  
 [11.07 / - ]

244- gera: 112074/di/ra  
**[CLINICAL STUDY ON THE PREVENTION AND CURE OF POSTOPERATIVE COMPLICATION OF MAMMARY CANCER WITH XUEFU ZHUYU CAPSULE].** SUN YI-AN. *journal of shandong university of tcm.* 2003,27(1),39 (chi). ref:\*  
 [11.07 / - ]

245- gera: 115065/di/ra  
**[CLINICAL STUDY ON THE PREVENTION AND CURE OF POSTOPERATIVE COMPLICATION OF MAMMARY CANCER WITH XUEFU ZHUYU CAPSULE].** SUN YI-AN. *journal of shandong university of tcm.* 2003,27(1),39 (chi). ref:\*  
 [11.07 / - ]

246- gera: 113120/di/ra  
**[BRIEF ON CLINICAL AND EXPERIMENTAL STUDY OF MAMMARY CANCER].** TANG HANJUN, ET AL. *chinese archives of tcm.* 2003,21(2),168 (chi). ref:\*  
 [11.07 / - ]

247- gera: 116111/di/ra  
**[BRIEF ON CLINICAL AND EXPERIMENTAL STUDY OF MAMMARY CANCER].** TANG HANJUN, ET AL. *chinese archives of tcm.* 2003,21(2),168 (chi). ref:\*  
 [11.07 / - ]

248- gera: 125584/di/ra  
**[CLINICAL OBSERVATION OF HEALTH-SUPPORTING AND PATHOGEN-ELIMINATING THERAPY FOR TOXIC AND NEGATIVE EFFECTS FOLLOWING CHEMOTHERAPY IN TREATING BREAST CANCER].** WENG YONG-QIANG TANG HANJUN CHENG AI-QUN, ET AL. *acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai.* 2003,17(3),28 (chi\*). ref:\*  
 [11.07 / - ]

249- gera: 117492/nd/re- num  
**A PHASE I-II STUDY IN THE USE OF ACUPUNCTURE-LIKE TRANSCUTANEOUS NERVE STIMULATION IN THE TREATMENT OF RADIATION-INDUCED XEROSTOMIA IN HEAD-AND-NECK CANCER PATIENTS TREATED WITH**

**RADICAL RADIOTHERAPY.** WONG RK, JONES GW, SAGAR SM, BABJAK AF, WHELAN T. *int j radiat oncol biol phys.* 2003,57(2),472-80. (eng). ref:\*

PURPOSE: Recent studies have suggested that acupuncture may improve radiation-induced xerostomia with an increase in the median salivary flow rate and sustained symptom relief. An acupuncture-like transcutaneous nerve stimulation method (Codetron) without invasive needles was developed to mimic acupuncture treatment. This Phase I-II study examined the effectiveness of Codetron in treating radiation-induced xerostomia. METHODS AND MATERIALS: Patients with symptomatic xerostomia after radical radiotherapy for head-and-neck cancer but with evidence of residual salivary function were recruited into the study. Two 6-week courses of Codetron treatment of acupuncture points preselected according to traditional Chinese medicine principles were given with a 2-week break between each course. Basal and citric acid-primed whole saliva production were measured at baseline and up to 1 year after treatment completion. Xerostomia symptoms were assessed by a five-item xerostomia symptom questionnaire with a visual analog scale and quality of life was evaluated using the Head and Neck Radiotherapy Questionnaire. RESULTS: We enrolled 46 patients in the study. All patients had received radiotherapy doses of  $\geq 50$  Gy to bilateral head-and-neck fields, including the parotid glands. Of the 46 patients, 37 completed the follow-up assessments at 3 and 6 months after treatment completion. No Codetron treatment-related complications occurred. Improvement in xerostomia symptoms was noted, with a mean increase in the visual analog scale score of 86 ( $p < 0.0005$ ) and 77 ( $p < 0.0001$ ) at 3 and 6 months after treatment completion, respectively. For all patients, the increase in the mean basal and citric acid-primed whole saliva production at 3 and 6 months after treatment completion was also statistically significant ( $p < 0.001$  and  $p < 0.0001$ , respectively). No statistically significant change in the quality-of-life evaluation compared with baseline was observed. CONCLUSION: The results suggest that Codetron treatment improves whole saliva production and related symptoms in patients with radiation-induced xerostomia. The treatment effects were sustained for at least 6 months after Codetron treatment completion. A prospective randomized Phase III trial with appropriate controls is being planned.  
 [19.03 / - ]

250- gera: 126166/re/nd  
**A PHASE I-II STUDY IN THE USE OF ACUPUNCTURE-LIKE TRANSCUTANEOUS NERVE STIMULATION IN THE TREATMENT OF RADIATION-INDUCED XEROSTOMIA IN HEAD-AND-NECK CANCER PATIENTS TREATED WITH RADICAL RADIOTHERAPY.** WONG RK, JONES GW, SAGAR SM, BABJAK AF, WHELAN T. *int j radiat oncol biol phys.* 2003,57(2),472-80. (eng). ref:\*  
 [19.03 / - ]

251- gera: 113068/di/ra  
**[CONDITION OF RESEARCH ON LIFE QUALITY OF PATIENTS WITH MAIN MARY CANCER].** XU JIE-NAN ET AL. *journal of tcm and chinese materia medica of jilin.* 2003,23(2),43 (chi). ref:\*  
 [11.07 / - ]

252- gera: 116059/di/ra  
**[CONDITION OF RESEARCH ON LIFE QUALITY OF PATIENTS WITH MAIN MARY CANCER].** XU JIE-NAN ET AL. *journal of tcm and chinese materia medica of jilin.* 2003,23(2),43 (chi). ref:\*  
 [11.07 / - ]

253- gera: 111553/di/ra- num

**[EFFECTS OF MOXIBUSTION ON IMMUNOREGULATORY FACTORS IN THE PATIENT OF CERVICAL CARCINOMA IN RADIOTHERAPY].** XU LANFENG, YU ZHICHONG, ZHAN ZHEN, ET AL.. **chinese acupuncture and moxibustion.** 2003,23(1),41 (chi\*). ref:\*  
[11.02 / ecr- ]

254- gera: 114544/di/ra

**[EFFECTS OF MOXIBUSTION ON IMMUNOREGULATORY FACTORS IN THE PATIENT OF CERVICAL CARCINOMA IN RADIOTHERAPY].** XU LANFENG, YU ZHICHONG, ZHAN ZHEN, ET AL.. **chinese acupuncture and moxibustion.** 2003,23(1),41 (chi\*). ref:\*  
Objective : To explore the mechanism of moxibustion in the patient of cervical carcinoma in radiotherapy. Methods : The treatment group (n = 32) were treated with routine radiotherapy plus moxibustion and the control group (n = 21) with routine radiotherapy, and changes of serum IL-2, IL-6 and IL-8 contents before and after treatment were investigated. Results : Moxibustion could regulate and increase immunoregulatory factors in the patient of cervical carcinoma in radiotherapy, with a more obvious action on IL-2. Conclusion : Moxibustion is one of effective measures for regulating and increasing immunologic function, and can be used as adjuvant therapy for the patient of cervical carcinoma in radiotherapy. [11.02 / - ]

255- gera: 121852/di/ra

**[THERAPEUTIC EFFECT AND THINKING OF MAMMARY CANCER TREATED BY CHINESE MEDICINE].** XUE XIAO-HONG, MU SHENG. **acta universitatis traditional medicinalis sinensis pharmacologiaeque shanghai.** 2003,17(2),14 (chi). ref:\*  
[11.07 / - ]

256- gera: 124665/di/ra

**[EFFECT OF MOXIBUSTION ON IMMUNOLOGIC FUNCTION IN PATIENTS WITH CERVICAL CARCINOMA IN RADIOTHERAPY].** YU ZHI-CHONG WANG HE-FANG XU LAN-FENG. **modern journal of integrated traditional chinese and western medicine.** 2003,12(24),2629 (chi\*). ref:\*  
[11.02 / ecr?- ]

257- gera: 121876/di/ra

**[INFLUENCE OF MOXIBUSTION ON HEMOGLOBIN DURING RADIOTHERAPY IN PATIENTS WITH CERVICAL CANCER].** YUAN HX YU ZC CHENG HZ ET AL.. **shanghai journal of acupuncture and moxibustion.** 2003,22(7),33 (chi\*). ref:\*  
[12.02 / ecr- ]

258- gera: 119101/di/ra

**[INFLUENCE OF MOXIBUSTION ON THE IMMUNOLOGIC FUNCTION OF THE TUMOR-BEARING MICE].** YUAN MIN, FU LI-PING, CHEN XUE-HUA, ET AL. **acupuncture research.** 2003,28(2),115 (chi\*). ref:\*  
[23.04 / - ]

259- gera: 111213/di/ra

**[INFLUENCE OF ACUPUNCTURE ON CELLULAR IMMUNITY OF T LYMPHOCYTE IN PATIENTS WITH LUNG CANCER OPERATION].** ZHOU H, TONG WP SHI LL. **shanghai journal of acupuncture and moxibustion.** 2003,22(1),34 (chi\*). ref:\*  
Objective : To observe the influence of acupuncture on

cellular immunity in patients with lung cancer operation, the patients were randomized into electro-drug group and drug group. The T subsets in peripheral blood were assayed one week before operation, eight days after operation and before the fourth chemotherapy respectively. In the electro-drug group, acupuncture was performed to boost the immunity before and during operation and before chemotherapy. Results : On the eighth day, the T<sub>H</sub>1 increased more greatly in electro-drug group than in drug group,  $t=2.54, P<0.05$ ; before the fourth chemotherapy, T<sub>H</sub>1 increased more greatly,  $t=2.2927, P<0.05$ ; the effect were better in electro-drug group than in drug group. Conclusion : Acupuncture can boost human immunity. [17.05 / - ]

260- gera: 112150/di/ra

**[EFFECT OF MOXIBUSTION ON PERIPHERAL T-CELL SUBGROUPS OF PATIENTS WITH CANCER OF UTERINE CERVIX].** ZHU MIAO-HUA, XU LAN-FENG YU ZHI-CHONG, ET AL. **journal of nanjing university of tcm.** 2003,19(1),44 (chi\*). ref:\*  
[11.02 / - ]

261- gera: 115141/di/ra

**[EFFECT OF MOXIBUSTION ON PERIPHERAL T-CELL SUBGROUPS OF PATIENTS WITH CANCER OF UTERINE CERVIX].** ZHU MIAO-HUA, XU LAN-FENG YU ZHI-CHONG, ET AL. **journal of nanjing university of tcm.** 2003,19(1),44 (chi\*). ref:\*  
OBJECTIVE : To investigate into the effect of moxibustion on the peripheral T - cell subgroups of patients with cancer of the uterine cervix who receive chemotherapy. METHOD Monoclonal antibody ( MCAB) and APAAP bridged enzyme labelling method were used to detect the number of peripheral T - cell subgroups. RESULT : Two months after the moxibustion treatment, the number of the peripheral blood CD3 and CD4<sup>+</sup> T - cells in the patients receiving chemotherapy for cancer of the uterine cervix increased greatly (  $P < 0.01$  ) and the number of CD8<sup>+</sup> T - cells decreased markedly (  $P < 0.05$  ). In the control group, the number of CD3<sup>+</sup> and CD4<sup>+</sup> T cells decreased insignificantly (  $P > 0.05$  ). CD4<sup>+</sup> to CD8<sup>+</sup> ratio increased markedly (  $P < 0.05$  ) in the treatment group but decreased in the control group, with no significant difference. CONCLUSION : Moxibustion has protecting and immunologically regulating effect on the peripheral T - cells of patients receiving chemotherapy for cancer of uterine cervix [11.02 / - ]

262- gera: 121821/di/ra

**[MECHANISM OF ACUPOINT APPLICATION WITH ANTICANCER PLASTER IN RATS BEARING LEWIS LUNG CARCINOMA].** ZUO XIAO-YANG, SUN LIU-HE. **journal of ch engdu university of tcm.** 2003,26(2),41 (chi\*). ref:\*  
[17.05 / - ]

263- gera: 131375/di/ra

**[HISTORY OF SURGERY FOR BREAST CANCER ].** GAO JIN-BO, SHI WEN-JIA. **chinese journal of medical history.** 2004,34(3),166 (chi\*). ref:\*  
Surgery is the major treatment for breast cancer. This paper reviews the history of surgery for breast cancer, which can be divided into five stages, namely, primary local excision, radical mastectomy, extensive radical mastectomy, modified radical mastectomy and breast - conserving surgery. Modified radical mastectomy and breast - conserving surgery are the most popular surgical therapy. The breast-conserving surgery which have good therapeutic and cosmetic outcome is especially the preferred method for early breast cancer. [11.07 / 01.02- ]

264- gera: 130049/di/ra

**[CLINICAL OBSERVATION ON WRIST ANKLE ACUPUNCTURE FOR TREATMENT OF PAIN OF MIDDLE-LATE LIVER CANCER].** HU XIA, LINA CHANG-QUAN, ZHOU QING-HUI . **chinese acupuncture and moxibustion.** 2004,24(3),149 (chi\*). ref:\*

Objective To observe therapeutic effect of stone needle therapy on primary dysmenorrhea. Methods Twenty-one cases of primary dysmenorrhea were divided into three types, stagnation of Qi and blood stasis, accumulation of cold and dampness, deficiency of Qi and blood, and treated by 16 manipulations of stone needle therapy using Bian-stone cone made by Sibin float-stone. Results Three cases were markedly effective, 15 cases were effective and 3 cases were ineffective. Conclusion Stone needle therapy is a safe and effective for primary dysmenorrhea. - ]

265- gera: 131449//

**ACUPUNCTURE IN THE TREATMENT OF HORMONETHERAPY-INDUCED HOT FLUSHES IN BREAST AND PROSTATE CANCER PATIENTS.** MEL DRISKO. **journal of chinese medicine.** 2004,75,5 (eng\*). ref:\*

Treatment of hormone-dependent breast and prostate cancers with hormone analogues or medications that alter hormone levels are effective, but also carry several side effects. Symptoms secondary to hormonal therapy include vasomotor effects such as tachycardia, anxiety, profuse sweating and hot flushes. Of all the hormone therapy-induced symptoms in breast and prostate cancer patients, hot flushes are the most distressing and common complaint. Poor control of these symptoms often results in reduced patient quality of life, as well as premature discontinuation of adjuvant cancer treatment. There is a need for new and innovative therapies to reduce these symptoms, and electro-acupuncture provides a convenient, effective and safe method with a well defined mechanism of action specific to vasomotor symptoms. The role of electro-acupuncture in reducing vasomotor symptoms and clinical case studies is provided. [11.06 / - ]

266- gera: 126571/di/ra

**[EFFECTS OF MOXIBUSTION AT SHENQUE (CV 8) ON SERUM IL-12 LEVEL AND NK CELL ACTIVITIES IN MICE WITH TRANSPLANTED TUMOR].** QIU XINGSHENG, CHEN KAI, TONG LI, ET AL. **journal of tcm.** 2004,24(1),56 (eng\*). ref:\*

The study was to investigate the effect of moxibustion on the serum IL-2, IL-12 levels and NK cell and ascitic tumor cell activities in H-22 mice with tumor and its mechanisms. The method used in the study was that the IL-2 and IL-12 levels were determined by the double antibody method with ELISA, and the NK cell activities by the MTT measure. The results showed that moxibustion elevated the serum IL-2 and IL-12 levels and the NK cell activities of the mice with tumor, and the elevations were of significance as compared with the controls (P<0.05). It is concluded that moxibustion can inhibit the growth of tumor, which is related to the increase of the serum IL-2 and IL-12 levels and the strengthening of NK cell activities. [23.04 / - ]

267- gera: 129232/di/ra

**PROMISING RESULTS OF AURICULOACUPUNCTURE IN THE TREATMENT OF CANCER PAIN.** RUBINO C. **focus on alternative and complementary medicine.** 2004,9(2),132 (eng). ref:\*

résumé et commentaire de: alimi d, rubino c, pofard-leandri e, fermand-b rule s, dubreuil-lemaire ml, hill c. analgesic effect of auricular acupuncture for cancer pain: a randomized blinded, controlled trial. *i clin oncol* 2003; 21: 4120-6. [6.01 / - ]

268- gera: 132741/di/ra

**TREATMENT OF INTRACTABLE HICCUP WITH ACUPUNCTURE IN 56 CANCER PATIENTS.** WANG FANG, GAO QI-QUAN . **journal of acupuncture and tuina science.** 2004,2(5),28 (eng\*). ref:\*

Fifty-six cases of intractable hiccup in cancer patients treated with acupuncture in a treatment group were compared with 58 cases treated with routine western medicine in a control group. The result showed that the effective rate was 87.5% in the treatment group and 32.8% in the control group. Redit was used for analysis. The effective rate in the treatment group was much higher than that in the control group (P<0.01). [10.02 / 23.04- ecr- ]

269- gera: 135403//

**[EFFECTS OF ELECTROACUPUNCTURE ON PERIPHERAL T-LYMPHOCYTE SUBSETS AND PROLIFERATION IN PATIENTS WITH GASTROINTESTINAL TUMOR TREATED WITH SURGERY AND CHEMOTHERAPY].** WANG J, JIANG JW, CAI SJ, ET AL . **shanghai journal of acupuncture and moxibustion.** 2004,23(11),5 (chi\*). ref:\*

Objective To explore the effects of electroacupuncture (EA) on peripheral T-lymphocyte subsets and proliferation in patients with gastrointestinal tumor treated with surgery and chemotherapy. Method The changes in peripheral T lymphocyte subsets were evaluated by flow cytometry, peripheral lymphocyte proliferation was detected by MTT assay. Results Results The results indicated that the CD3<sup>+</sup> T cells and lymphocyte proliferation decreased significantly on day 3 postoperation (P<0.05, P<0.01, respectively), whereas no changes were observed in EA treatment group. Ten days post-operation, the lymphocyte proliferation back to the level of pre-operation. At the same time, EA treatment decreased CD8<sup>+</sup> T cells (P<0.05) and increased the CD4<sup>+</sup>/CD8<sup>+</sup> ratio on day 10 post-operation (P<0.05). In the other groups which patients undergone surgery and chemotherapy, CD3<sup>+</sup> T cells, CD4<sup>+</sup>/CD8<sup>+</sup> ratio declined on day 3 post-operation combined chemotherapy, EA could increase CD4<sup>+</sup> T cells (P<0.05) and CD4<sup>+</sup>/CD8<sup>+</sup> ratio (P<0.05) in patients who suffered surgical procedure and chemotherapy and enhanced the lymphocyte proliferation when compared with pre-operation (P<0.001). Conclusion EA could improve the immune function in patients with gastrointestinal tumor undergone surgery and chemotherapy. - ]

270- gera: 134345//

**[CLINICAL APPLICATION OF ACUPUNCTURAL ANESTHESIA WITH NEW COMBINATION PRINCIPLE OF ACUPOINTS IN SUPRATENTORIAL CRANIOCEREBRAL OPERATION OF TUMOR IN VITAL FUNCTIONAL AREA OR DEEP SITE OF BRAIN].** ZHANG JIAN-MIN, ZHANG HONG, ZHU XIANG-DONG, ET AL . **chinese journal of integrated traditional and western medicine.** 2004,24(11),969 (chi\*). ref:\*

Objective To summarize the experience in applying acupunctural anesthesia (AA) with new combination principle (NCP) of acupoints in supratentorial craniocerebral operation of tumor in functional area or deep site of brain. Methods With the acupoints selection of AA changed from the previous combination principle of near segmental and peri-operational region to the NCP of near-remote along corresponding meridian, craniotomy was carried out under AA in 23 patients. Results Operation was performed successfully in all the patients, 82.6 of them with the effectiveness reaching I A grade. In those operated on the vital functional area, such as central anterior/posterior gyrus and language center, the accidental functional injury could be



well prevented. Conclusion AA with NCP of acupoints has satisfactory effect in supratentorial craniocerebral operation of functional area or deep site of brain, it is especially valuable in monitoring the effect of operation on function of around normal cerebral area to avoid accident injury. - ]

271- gera: 124722/di/ra

**[CORRELATIVE STUDIES ON HORMONE REPLACEMENT THERAPY AND OCCURRENCE OF MAMMARY CANCER IN MENOPAUSAL WOMEN]. ZHANG JIE,LIU LI,HE FENGJIE. journal of shaanxi college of tcm. 2004,27(1),32 (chi\*). ref:\* [11.07 / - ]**

## INDEX DES AUTEURS

- ALIMI D ET AL<sup>α</sup> 230 ,  
 ALIMI D, RUBINO C, PICHARD-LEANDRI E,  
 FERMAND-BRU<sup>α</sup> 295 ,  
 AMAN O<sup>α</sup> 137 ,  
 BLASSELLE<sup>α</sup> 72 ,  
 BOTTOMLEY DM ET AL<sup>α</sup> 138 ,  
 BRAHIMI A<sup>α</sup> 16 , 188 ,  
 BRULE-FERMAND S<sup>α</sup> 161 ,  
 CAO QIAOLI ET AL<sup>α</sup> 154 ,  
 CAO SHANG-PU, ET AL<sup>α</sup> 55 , 296 ,  
 CASSILETH B<sup>α</sup> 23 , 211 ,  
 CHEIN EY ET AL<sup>α</sup> 76 ,  
 CHEN GUIPING ET AL<sup>α</sup> 189 ,  
 CHEN GUOAN ET AL<sup>α</sup> 24 , 212 ,  
 CHEN HONGFENG<sup>α</sup> 8 , 146 ,  
 CHEN SHAOZHONG ET AL<sup>α</sup> 213 ,  
 CHEN YUFEN<sup>α</sup> 122 , 131 , 139 ,  
 CHEN YUN-FEI ET AL<sup>α</sup> 231 ,  
 CHEN YUNFEI, ZHAO CUIYING, CHEN HANPING, ET  
 AL<sup>α</sup> 267 ,  
 CHEN YUNFEI, ZHAO CUIYING, CHEN HANPING, ET  
 AL . <sup>α</sup> 297 ,  
 CHEN YUNFEL<sup>α</sup> 232 ,  
 CHEN ZI FU<sup>α</sup> 13 , CHEN ZI FU<sup>α</sup> 178 ,  
 CHENG BAIHUA<sup>α</sup> 105 , 123 ,  
 CHENG QIANJUN ET AL<sup>α</sup> 36 , 252 ,  
 CHENGJIANG H ET AL<sup>α</sup> 110 ,  
 CHU LSW ET AL<sup>α</sup> 77 ,  
 CHUNG C ET AL<sup>α</sup> 79 ,  
 COHEN I, TAGLIAFERRI M, TRIPATHY D<sup>α</sup> 41 , 42 , 43 ,  
 268 , 269 , 270 ,  
 CROCETTI E ET AL<sup>α</sup> 20 , 203 ,  
 CUI KAIXIAN<sup>α</sup> 111 , 132 ,  
 CUMINS SM ET AL<sup>α</sup> 233 ,  
 DARRAS JC<sup>α</sup> 82 ,  
 DESNOS P<sup>α</sup> 88 ,  
 DING DU-MING<sup>α</sup> 190 ,  
 DINOUART-JATTEAU P<sup>α</sup> 147 ,  
 DOMENGE C ET AL<sup>α</sup> 17 , 191 ,  
 DONG BEILI, JIN SUJUAN, LIANG ZHEHAO, ET AL<sup>α</sup>  
 56 , 298 ,  
 DONG YONG-HONG ET AL<sup>α</sup> 18 , 192 ,  
 DOU-MONG HAU<sup>α</sup> 106 ,  
 DOU-MONG HAU ET AL<sup>α</sup> 214 ,  
 DUNDEE J<sup>α</sup> 124 ,  
 DUNDEE JW ET AL<sup>α</sup> 71 , 125 , 133 , 140 , 148 ,  
 FAN SHAOYU<sup>α</sup> 126 ,  
 FAN YU ET AL<sup>α</sup> 253 ,  
 FAN YU ET AL<sup>α</sup> 254 , 255 ,  
 FANG JIANQIAO ET AL<sup>α</sup> 204 ,  
 FILSHIE J ET AL<sup>α</sup> 193 ,  
 FU WEN-BIN AND ZHANG BO<sup>α</sup> 215 ,  
 GAO JIN-BO, SHI WEN-JIA<sup>α</sup> 69 , 333 ,  
 GOODMAN J<sup>α</sup> 27 , 234 ,  
 GU LINJIANG<sup>α</sup> 6 , 141 ,  
 GUANG'ANMEN HOSPITAL<sup>α</sup> 3 , 99 ,  
 GUO RENXU ET AL<sup>α</sup> 179 ,  
 HANG ZHOU TUMOUR HOSPITAL<sup>α</sup> 89 ,  
 HAU DM ET AL<sup>α</sup> 90 , 91 , 92 ,  
 HAU DOUMONG ET AL<sup>α</sup> 142 ,  
 HE FUJIN ET AL<sup>α</sup> 44 , 271 ,  
 HE JP ET AL<sup>α</sup> 25 , 216 ,  
 HOPITAL DES TUMEURS DE HANGZHOU<sup>α</sup> 85 ,  
 HOPITAL UNIVERSITAIRE DE TIANJIN<sup>α</sup> 73 ,  
 HU DINGZHENG<sup>α</sup> 299 ,  
 HU LI-NING ET AL<sup>α</sup> 235 ,  
 HU XIA, LINA CHANG-QUAN, ZHOU QING-HUI <sup>α</sup> 334  
 ,  
 HUANG XIAO<sup>α</sup> 217 ,  
 HUANG XIAO ET AL<sup>α</sup> 236 ,  
 HUANG ZHI-FEN, WEI JIN-SONG, SHI ZHI-YAN, ET  
 AL<sup>α</sup> 57 , 300 ,  
 HUMPHREYS VJ<sup>α</sup> 127 , 128 ,  
 ISAAC COHEN, MARY TAGLIAFERRI AND DEBU  
 TRIPATHY<sup>α</sup> 45 , 272 ,  
 JACOBSON JS ET AL<sup>α</sup> 28 , 237 ,  
 JIA XIHUA<sup>α</sup> 37 , 256 ,  
 JIA XI-HUA TANG HAN-JUN GAO SHANG-PU, ET AL<sup>α</sup>  
 46 , 47 , 273 , 274 ,  
 JIN ZHE-XIU<sup>α</sup> 301 ,  
 JOHNSTONE PA ET AL<sup>α</sup> 257 ,  
 JOHNSTONE PAS<sup>α</sup> 302 ,  
 JUBINEAU-ZELPHATI C<sup>α</sup> 83 ,  
 JUNG-CHOU CHEN ET AL<sup>α</sup> 58 , 303 ,  
 KEISOU ISHIMARU ET AL<sup>α</sup> 218 ,  
 KESPI JM<sup>α</sup> 155 ,  
 KIM YS<sup>α</sup> 75 ,  
 KOBAYASHI T<sup>α</sup> 100 ,  
 KUEBLBOECK J<sup>α</sup> 156 ,  
 LAN CHOW WING TF<sup>α</sup> 112 ,  
 LE PHI<sup>α</sup> 238 ,  
 LE PRESTRE C<sup>α</sup> 81 ,  
 LEE JF<sup>α</sup> 78 ,  
 LEE MM ET AL<sup>α</sup> 29 , 239 ,  
 LEI QIU MO ET AL<sup>α</sup> 5 , 107 ,  
 LI HANZHONG, HUANG ZHIFEN, ZHANG ZUOJUN,  
 ET AL<sup>α</sup> 48 , 275 ,  
 LI HUA ET AL<sup>α</sup> 205 ,  
 LI QI-SONG ET AL<sup>α</sup> 168 ,  
 LI RONG-JUAN<sup>α</sup> 59 , 304 ,  
 LI XIAOJUN, LI XIUHUA, LIU YASHU<sup>α</sup> 276 ,  
 LI YULIAN , LI LING, SHONG BINGBING<sup>α</sup> 305 ,  
 LI YULIAN, LI LING, SHONG BINGBING<sup>α</sup> 306 ,  
 LI ZHAOHUI ET AL<sup>α</sup> 206 ,  
 LIANG QINGHU<sup>α</sup> 149 ,  
 LIANG XIN AND XIAO JUN<sup>α</sup> 277 , 278 ,  
 LIANG YAZHEN ET AL<sup>α</sup> 194 ,  
 LIU BAO-YAN, ET AL<sup>α</sup> 307 ,  
 LIU HONGWEI ET AL<sup>α</sup> 198 ,  
 LIU JU ET AL<sup>α</sup> 258 , 279 ,  
 LIU LI-GONG GU JIE<sup>α</sup> 308 , 309 ,  
 LIU LI-JUN ET AL<sup>α</sup> 14 , LIU LI-JUN ET AL<sup>α</sup> 180 ,  
 LIU LI-JUN, GUO CHENG-JIE, JIAO JINGMING, ET  
 AL<sup>α</sup> 19 , 195 ,  
 LIU MINGSHENG ET AL<sup>α</sup> 9 , 157 ,  
 LIU XIA<sup>α</sup> 219 ,  
 LIU ZHUOYOU<sup>α</sup> 93 ,  
 LOU ZHENGHUI ET AL<sup>α</sup> 158 ,  
 MA ZHEN-YA, ET AL<sup>α</sup> 310 ,  
 MCMILLAN CM ET AL<sup>α</sup> 150 ,  
 MEL DRISKO<sup>α</sup> 335 ,  
 MILES D<sup>α</sup> 30 , 240 ,  
 MOYAD MA ET AL<sup>α</sup> 220 ,  
 MU RONG, ZHENG QUBIN<sup>α</sup> 280 ,  
 NIU HAITONG ET AL<sup>α</sup> 113 ,  
 NOBUAKI OTSUKA ET AL<sup>α</sup> 143 ,  
 NORDENSTRÖM BEW<sup>α</sup> 134 ,  
 NORIO SHIMURA ET AL<sup>α</sup> 114 ,  
 OUYANG QUN ET AL<sup>α</sup> 159 ,  
 PAN SUBAI<sup>α</sup> 31 , 241 ,  
 PEI JIAN ET AL<sup>α</sup> 199 ,  
 POULAIN P ET AL<sup>α</sup> 101 ,  
 PRICE H ET AL<sup>α</sup> 151 ,  
 QIAN BAOYAN ET AL<sup>α</sup> 207 ,  
 QIN BIGHUANG ET AL<sup>α</sup> 169 ,  
 QIU XINGSHENG, CHEN KAI, TONG LI, ET AL<sup>α</sup> 336 ,

- QIU XINGSHENG, CHEN KAI, TONG LI, ET AL. 311 ,  
 QIU XINGSHENG, CHEN KAI, TONG LI, ET AL. 312 ,  
 QUE HUAFU ET AL. 21 , 208 ,  
 RAJAN S. 221 ,  
 RAO BEN-QIANG ET AL. 242 ,  
 REES RW ET AL. 32 , 243 ,  
 REMPP C. 170 ,  
 RIBETON L. 102 ,  
 RUBINO C. 337 ,  
 SAKAMOTO S ET AL. 11 , 171 ,  
 SHAO WENSHENG. 129 ,  
 SHAW S. 33 , 244 ,  
 SHEN RONGFU ET AL. 152 ,  
 SHI SHIAI. 1 , 94 ,  
 SHINOHARA S ET AL. 162 ,  
 SHMUEL HALEVI. 160 ,  
 STEPHAN JM. 281 ,  
 STERNFELD M ET AL. 4 , 103 ,  
 SULLIVAN SG ET AL. 104 ,  
 SUN LIU-HE CAO JIAN-MEI. 259 ,  
 SUN LIUHE, YANG QINGYOU. 282 ,  
 SUN MUPING ET AL. 60 , 313 ,  
 SUN YI-AN. 61 , 62 , 314 , 315 ,  
 TAGLIAFERRI M ET AL. 38 , 260 ,  
 TAMAGAWA T ET AL. 163 ,  
 TANG HANJUN, ET AL. 63 , 64 , 316 , 317 ,  
 TANG HAN-JUN, GAO SHANG-PU, ZHENG YONG, ET AL. 49 , 283 ,  
 TANG LUXIA. 50 , 284 ,  
 TANG XUEZHENG. 115 ,  
 TIAN YAXIAN. 144 ,  
 TRINH R ET AL. 95 ,  
 TSUJIMOTO T ET AL. 164 ,  
 TUKMACHI E. 245 , 246 ,  
 VAN BENSCHOTEN MM. 15 , 181 ,  
 VANDECREEK L ET AL. 26 , 222 ,  
 WAN HUA, WU XUE-QING, LU DE-MING. 51 , 285 ,  
 WANG FANG, GAO QI-QUAN. 338 ,  
 WANG J, JIANG JW, CAI SJ, ET AL. 339 ,  
 WANG LIPING, BIAN YIN, LI JIANYUAN, ET AL. 286 , 287 ,  
 WANG XUEXIN, WEN JINGBO, YE XIANGRONG. 288 ,  
 ,  
 WANG YING. 200 ,  
 WANG YOU LIANG ET AL. 86 ,  
 WANG YUZHANG. 7 , 145 ,  
 WATANABE Y ET AL. 74 ,  
 WEN D. 182 ,  
 WEN HL. 80 ,  
 WEN JIANYU ET AL. 52 , 289 ,  
 WENG YONG-QIANG TANG HANJUN CHENG AI-QUN, ET AL. 65 , 318 ,  
 WONG RK, JONES GW, SAGAR SM, BABJAK AF, WHELAN T. 319 ,  
 WONG RK, JONES GW, SAGAR SM, BABJAK AF, WHELAN T. 320 ,  
 WU BIN ET AL. 172 , 196 ,  
 WU BIN, ZHOU RONG-XING, CHEN MING-JIN, ET AL. 197 ,  
 WU G ET AL. 12 , 173 ,  
 WU JIAN-GUANG ET AL. 201 ,  
 WU PING ET AL. 261 ,  
 WU ZHONGJIU ET AL. 10 , 165 ,  
 WUE XUE QING ET AL. 34 , 247 ,  
 X. 135 , 183 ,  
 XIA YUQIN ET AL. 108 ,  
 XIA YUQING ET AL. 96 , 97 , 109 ,  
 XIAO JIANHUA ET AL. 174 ,  
 XIN YU-IING, ZHAO FENG-RUI, SHI BIN, ET AL. 202 ,  
 XIN YU-LING ET AL. 262 ,  
 XU JIE-NAN ET AL. 66 , 67 , 321 , 322 ,  
 XU LANFENG, YU ZHICHONG , ZHAN ZHEN, ET AL. 323 ,  
 XU LANFENG, YU ZHICHONG, ZHAN ZHEN, ET AL. 324 ,  
 XU MANYING ET AL. 184 ,  
 XU SHUYING ET AL. 153 , 175 ,  
 XUE LIGONG ET AL. 116 ,  
 XUE XIAO-HONG, MU SHENG. 68 , 325 ,  
 YANG DANHONG ET AL. 223 , 224 ,  
 YANG JINHONG ET AL. 185 ,  
 YANG YOU MI. 136 ,  
 YANG YOU MI ET AL. 117 , 118 , 119 ,  
 YANG YUNKUAN, DIAO CANYANG, HU YOUPIING, ET AL. 290 ,  
 YAXIAN T. 120 ,  
 YE XIANG RONG ET AL. 248 ,  
 YINGQING ZHANG. 121 ,  
 YOKO UDAGAWA, ET AL. 53 , 291 ,  
 YOSHIAKI OMURA. 249 ,  
 YU RONG. 22 , 209 ,  
 YU ZHI-CHONG WANG HE-FANG XU LAN-FENG. 326 ,  
 ,  
 YU ZHI-CHONG, XU LAN-FENG, ZHAN ZHEN, ET AL. 292 ,  
 YUAN HX YU ZC CHENG HZ ET AL. 327 ,  
 YUAN JIANGUO ET AL. 166 ,  
 YUAN MIN, FU LI-PING, CHEN XUE-HUA, ET AL. 328 ,  
 ,  
 ZANG JUNFANG ET AL. 84 ,  
 ZENG JINXIONG ET AL. 225 ,  
 ZENG QIANG ET AL. 210 ,  
 ZENG XIAOZHI ET AL. 263 ,  
 ZHA WEI, SHANG MING-HUA SUN YI-NONG. 264 ,  
 ZHAI D ET AL. 167 ,  
 ZHAI DAODANG ET AL. 176 , 186 ,  
 ZHANG CHEN-YANG JIA XIAO-QIANG. 54 , 293 ,  
 ZHANG HONG-LIANG, WANG NING. 39 , 265 ,  
 ZHANG JIAN-MIN, ZHANG HONG, ZHU XIANG-DONG, ET AL. 340 ,  
 ZHANG JIE, LIU LI, HE FENGJIE. 70 , 341 ,  
 ZHANG JIN ET AL. 35 , 40 , 250 , 266 ,  
 ZHANG MEI ET AL. 251 ,  
 ZHAO CUIYING ET AL. 226 ,  
 ZHAO JIAZENG ET AL. 187 ,  
 ZHAO RONG ET AL. 177 ,  
 ZHOU H, TONG WP SHI LL. 329 ,  
 ZHOU J ET AL. 227 ,  
 ZHOU JUNQIN ET AL. 228 ,  
 ZHOU QINGHUI. 229 ,  
 ZHOU QUANRAI ET AL. 130 ,  
 ZHOU WEI ET AL. 294 ,  
 ZHU MIAO-HUA, XU LAN-FENG YU ZHI-CHONG, ET AL. 330 , 331 ,  
 ZHU RUGONG ET AL. 87 ,  
 ZHU-SAN YE ET AL. 2 , 98 ,  
 ZUO XIAO-YANG, SUN LIU-HE. 332 ,

## index des sujets/ subject index

### (non

-x /

x 93, 105, 205, 205, 221, 223, 226,

#### 1.01 -x GENERAL ASPECTS AND HISTORY/ ASPECTS GENERAUX ET HISTOIRE

combinaison médecine occidentale- mtcx 40, 266,  
hôpitalx 102,  
patientx 20, 23, 203, 211,

#### 1.02 -x history/ histoire

\*x 69, 333,

#### 2.06 -x points/ points

\*x 104,

biophysiquex 134,  
E36x 153, 172, 175, 204, 280,  
GI11x 172,  
GI2x 301,  
GI5x 301,  
MC6x 71, MC6x 125, 140, 148, 150, 151, 280,  
propriétés électriquesx 104,  
RTE10x 201,  
shux 93,  
spécificitéx 231,  
V17x 201,  
V23x 90, 106, 242,  
V25x 106,  
V26x 90, 106,  
V27x 90, 106,  
V28x 90, 106,  
V32x 164,  
VB39x 155,  
VC12x 155,  
VC4x 176, 204, 226, 261,  
VC6x 172, 224,  
VC8x 154, 159, 223, 248,

#### 4.04 -x face and ear diagnosis/ examen auriculaire et facial

\*x 15, 93, 181,  
lésion cutanée ponctuellex 93,

#### 4.05 -x point diagnosis/ examen des points somatiques

\*x 93, 100, 104, 158,

#### 4.07 -x syndromes/ syndromes

différenciation des syndromesx 21, 40, 208, 266,

#### 5.03 -x acupuncture/ acupuncture

association ou interaction médicamenteusex 102,  
deqjx 111,  
profondeur de puncturex 149,

#### 5.09 -x moxibustion/ moxibustion

\*x 4, 87, 90, 92, 103, 115, 117, \*x 118, 119, 136, 142,  
144, 154, 159, 162, 163, 167, 176, 200, 204, 214, 223,  
224, 226, 242, 242, 248, 253, 258, 261, 301,

#### 5.10 -x ear acupuncture. auricular medicine/ auriculopuncture. auriculomédecine

\*x 130, 168, 210, 230, 257, 295,

#### 5.11 -x nose, face, eye, hand and foot acupuncture/ rhinofacio, manopodo, craniopuncture

\*x 130,  
craniopuncturex 294,

manopuncturex 158,  
rhinopuncturex 130,

#### 5.12 -x electro-acupuncture/ electro-acupuncture

\*x 74, 106, 113, 140, 148, 150, 164, 204, 206, 213,  
262,

#### 5.14 -x laser acupuncture/ laser

\*x 86, 219,

#### 5.15 -x drug acupuncture/ chimiothérapie

\*x 122, 131, 139, 207, 253,

#### 5.16 -x qi gong. massages/ qi gong. massages

acupressionx 140, 148, 151,  
qi gongx 1, 94,

#### 6.01 -x algology/ algologie

\*x 134,

potentialisation médicamenteuse de l'acupuncturex 114, 204,  
,

#### 9.02 -x thyroid gland/ thyroïde

\*x 130, 143,  
goitrex 116,

#### 9.05 -x adrenal glands/ surrénales

\*x 84,  
cortisolx 84,

#### 9.10 -x sexual hormones/ hormones sexuelles

\*x 185,

#### 10.03 -x dyspepsia. nausea. vomiting/ dyspepsie. nausées. vomissements

\*x 88, 96, 151, 205, 253,

#### 10.04 -x oesophagus/ oesophage

\*x 109, 111, 132, 164,

#### 10.05 -x stomach. duodenum/ estomac. duodénum

\*x 109, 132, 201,

#### 10.06 -x intestines/ intestins

\*x 201,

#### 10.09 -x anus. rectum/ anus. rectum

\*x 218,

#### 10.10 -x liver/ foie

\*x 93,

#### 10.12 -x pancreas/ pancréas

\*x 95,

#### 11.02 -x vulva. vagina. uterus. adnexa/ vulve. vagin. utérus.annexes

\*x 154, 183, \*x 218,

#### 11.07 -x breast/ sein

\*x 85, 221, 246,

#### 11.10 -x obstetrics/ obstétrique

\*x 124,

#### 12.01 -x HEMATOLOGY/ HEMATOLOGIE

lymphocytex 207, 213,

#### 12.02 -x anemia. cytopenia/ anémie. cytopénie

\* 96 ,

**14.08 - paraplegia. myelitis/ paraplégie. myelopathies sclérose en plaques** 221 ,

**16.05 - pharynx. larynx/ pharynx. larynx**  
\* 79 ,

**17.05 - lung neoplasms/ tumeurs broncho-pulmonaires**  
\* 154 ,

**17.06 - pulmonary tuberculosis/ tuberculose pulmonaire**  
\* 109 ,

**18.04 - rheumatoid arthritis/ polyarthrite rhumatoïde**  
\* 143 ,

**18.06 - bone/ os**  
\* 179 ,

**19.02 - tongue/ langue**  
\* 79 ,

**22.04 - enuresis. urinary incontinence. urinary retention/ énuésie. incontinence et rétention d'urine**  
\* 218 ,

**22.07 - urologic and male genital diseases/ appareil génital masculin**  
\* 71 ,  
prostate 220 ,  
testicule 71 ,

**23.02 - allergology. immunology/ allergologie. immunologie.**  
\* 110 , 123 , 159 , 172 , 177 , 196 , 204 , 207 , 226 , 261 ,  
lymphocyte 207 , 213 ,  
natural killer 204 ,

**23.04 - oncology/ cancérologie**  
\* 1 , 2 , 3 , 4 , 5 , 6 , 7 , 8 , 9 , 10 , 13 , 15 , 16 , 18 , 20 , 21 ,  
23 , 25 , 27 , \* 29 , 30 , 33 , 34 , 37 , 38 , 41 , 51 , 71 , 74 ,  
77 , 78 , 80 , 83 , 84 , 85 , 86 , 87 , 94 , 95 , 98 , 99 , 101 , 102 ,  
103 , 104 , 107 , 108 , 110 , 111 , 113 , 122 , 124 , 125 , 129 ,  
130 , 133 , 134 , 138 , 139 , \* 140 , 141 , 143 , 145 , 146 ,  
148 , 152 , 153 , 157 , 158 , 161 , 164 , 165 , 168 , 174 , 175 ,  
178 , 179 , 181 , 182 , 183 , 184 , 188 , 190 , 192 , 200 , 203 ,  
208 , 211 , 216 , 218 , 220 , 223 , 229 , 230 , 233 , 234 , 238 ,  
239 , 240 , \* 244 , 245 , 246 , 247 , 256 , 260 , 268 , 285 ,  
338 ,  
chimiothérapie 71 , 88 , 97 , 109 , 112 , 113 , 124 , 125 ,  
133 , 138 , 140 , 148 , 150 , 151 , 155 , 170 , 177 , 185 , 189 ,  
194 , 201 , 213 , 219 , 223 , 227 , 228 , 253 ,

radiothérapie 73 , 79 , radiothérapie 96 , 97 , 109 , 177 ,  
183 , 185 , 189 , 194 , 218 , 221 , 227 , 228 , 257 ,

**24.07 - animaux de laboratoire**  
rat 206 , 223 , 224 , 242 ,  
souris 4 , 103 , 214 , 226 , 231 ,

**25.10 - central neurotransmitters/ neuromédiateurs centraux**  
\* 123 ,  
endorphine 105 , 123 , 167 ,  
sérotonine 242 ,

**26.03 - plants/ plantes**  
\* 2 , 98 ,

**26.04 - animal products/ produits animaux**  
\* 207 ,

**27.01 - methods/ méthodes**  
cas clinique 221 , 235 ,  
comparaison de 2 techniques de la MTC 86 , 130 ,  
essai comparatif éventuellement randomisé 158 , 207 , 280 ,  
292 , 326 ,  
essai contrôlé randomisé 25 , 48 , 71 , 86 , 96 , 101 , 109 ,  
112 , 125 , 125 , 133 , 151 , 151 , 168 , 172 , 174 , 189 , 196 ,  
197 , 201 , 205 , 210 , 216 , 251 , 253 , 258 , 275 , 279 , essai  
contrôlé randomisé 286 , 294 , 295 , 301 , 323 , 327 , 338 ,  
essai ouvert (acupuncture) 87 , 102 , 104 ,  
étude contrôlée (acupuncture) 25 , 101 , 148 , 216 ,  
expérimentation animale 4 , 103 ,  
expérimentation animale (acupuncture) 206 , 214 , 223 ,  
224 , 231 , 242 , 261 ,  
expérimentation animale (acupuncture)/ lapin 113 ,  
expérimentation animale (acupuncture)/ souris 90 , 92 , 106 ,  
154 , 162 , 167 , 176 ,  
expérimentation animale (phytothérapie) / souris 12 , 173 ,  
meta analyse 307 ,  
revue générale 24 , 28 , 123 , 124 , 144 , 212 , 227 , 229 ,  
237 ,

**27.02 - techniques d'exploration**  
isotope 143 ,  
radiologie 93 , 126 ,  
temperature 116 ,

**27.03 - biological products/ produits biologiques**  
cortisol 84 ,  
endorphine 105 , 123 , 167 ,  
interleukine 172 , 242 ,  
noradrenaline 242 ,  
sérotonine 242 ,

## INDEX DES SOURCES

### 1 - divers à vérifier

chinese journal of integrated traditional and western medicine 340 ,  
journal of chinese medicine 335 ,  
shanghai journal of acupuncture and moxibustion 339 ,

### 2 - divers à vérifier

second national symposium, beijing 89 ,

### 3 - congrès

2eme congres mondial d'acupuncture et moxibustion, paris 142 ,  
advances in acupuncture and acupuncture anaesthesia, beijing 84 ,  
in compilation of the abstracts of acupuncture and moxibustion papers, beijing 114 , 117 ,  
international symposium on diagnosis and treatment with auricular points, beijing 132 ,  
selections from article abstracts on acupuncture and moxibustion, beijing 113 , 118 , 119 ,  
selections from articles abstracts on acupuncture and moxibustion, beijing 116 ,  
third world conference on acupuncture 163 , 164 ,  
third world conference on acupuncture, kyoto 162 , 167 ,  
wfas international symposium on the trend of research in acupuncture, roma 154 , 156 ,

### 4 - extraits de traités

encyclopedie des medecines naturelles 147 ,

### 5 - mémoires

memoire d'acupuncture, bordeaux 2 102 ,

### 6 - divers à vérifier

int j radiat oncol biol phys 320 ,

### 7 - revues d'acupuncture et MTC

acta universitatis traditional medicalils sinensis pharmacologiaeque shanghai 68 , 325 ,  
acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai 65 , 318 ,  
acta universitatis traditionis medicalis sinensis pharmacologiaeque shanghai 46 , 47 , 49 , 51 , 273 , 274 , 283 , 285 , 308 , 309 ,  
acupuncture 81 , 82 ,  
acupuncture & moxibustion 281 ,  
acupuncture and electrotherapeutics research 4 , 78 , 103 , 210 , 249 ,  
acupuncture in medicine 221 , 233 , 245 ,  
acupuncture research 152 , 153 , 169 , 174 , 175 , 176 , 185 , 186 , 187 , 200 , 204 , 206 , 224 , 232 , 236 , 251 , 328 ,  
acupuncture research quarterly 79 , 90 , 106 ,  
american journal of acupuncture 15 , 76 , 77 , 100 , 104 , 134 , 139 , 181 ,  
american journal of chinese medicine 11 , american journal of chinese medicine 53 , 58 , 75 , 171 , 214 , 291 , 303 , asclepios 170 ,  
beijing journal of traditional chinese medicine 7 , 145 ,  
british journal of acupuncture 137 ,  
brochure pratique d'acupuncture veterinaire 135 ,  
bulletin de la societe d'acupuncture 72 ,  
china journal of tcm and pharmacy 60 , 313 ,  
chinese acupuncture and moxibustion 86 , 87 , 96 , 105 , 108 , 111 , 120 , 122 , 126 , 129 , 130 , 131 , 136 , 189 , 198 , 207 , 217 , 223 , 225 , 253 , 267 , 276 , 280 , 282 , 286 , 287 , 288 , 290 , 299 , 323 , 324 , 334 ,  
chinese archives of tcm 63 , 64 , 316 , chinese archives of

tcm 317 ,  
chinese journal of acupuncture and moxibustion 123 , 144 , 149 ,  
chinese journal of basic medicine in tcm 242 ,  
chinese journal of integrated and western medicine 196 ,  
chinese journal of integrated traditional and western medicine 14 , 35 , 172 , 180 , 201 , 250 , 258 , 262 , 279 ,  
chinese journal of integrated traditional and western medicine (english edition) 19 , 195 , 197 , 202 ,  
chinese journal of integrated traditional and western medicine in intensive and criti 54 , 293 ,  
chinese journal of medical history 69 , 333 ,  
chinese journal of surgery of integrated traditional and western medicine 40 , 266 ,  
chinese journal of surgery of integrated traditional chinese and western medicine 56 , 298 ,  
chinese journal of traditional medical science and technology 34 , 55 , 247 , 296 ,  
chinese medical journal 168 ,  
complementary medical research 124 , 138 , 151 ,  
compmed bulletin 27 , 30 , 33 , 234 , 240 , 244 ,  
el pulso de la vida 13 , 178 ,  
enerqi 22 , 209 ,  
focus on alternative and complementary medicine 337 ,  
focus on alternative and complementary therapies 23 , 211 ,  
hebei journa of tcm 48 , 275 ,  
heilongjiang journal of traditional chinese medicine 50 , 284 ,  
henan tcm 59 , 304 ,  
henan traditional chinese medicine 259 ,  
international conference on tcm and pharmacology, shanghai 115 ,  
international journal of acupuncture 277 , 278 ,  
international journal of chinese medicine 2 , 92 , 98 ,  
international journal of clinical acupuncture 159 , 166 , 190 , 215 , 219 , 235 , 263 ,  
jiangsu journal of tcm 31 , 241 ,  
jiangsu journal of traditional chinese medicine 6 , 141 ,  
journal of acupuncture and tuina science 338 ,  
journal of beijing university of traditional chinese medicine 44 , 271 ,  
journal of ch engdu university of tcm 332 ,  
journal of chinese medicine 41 , 42 , 43 , 45 , 160 , 246 ,  
journal of chinese medicine 268 , 269 , 270 , 272 ,  
journal of clinical acupuncture and moxibustion 306 ,  
journal of clinical acupuncture and moxibustion 19(1) 305 ,  
journal of nanjing university of tcm 330 , 331 ,  
journal of nanjing university of traditional chinese medicine (natural science) 264 ,  
journal of shaanxi college of tcm 70 , 341 ,  
journal of shandong university of tcm 61 , 62 , 248 , 314 , 315 ,  
journal of tcm 97 , 109 , 179 , 182 , 228 , 261 , 297 , 311 , 312 , 336 ,  
journal of tcm and chinese materia medica of jilin 66 , 67 , 321 , 322 ,  
journal of the japan society of acupuncture 183 , 218 ,  
journal of the kyoto pain control institute 74 ,  
journal of traditional chinese medicine 3 , 99 , 110 , 184 , 227 ,  
journal of zhejiang college of tcm 229 ,  
journal of zhejiang college of traditional chinese medicine 10 , 165 ,  
liaoning journal of tcm 21 , 208 ,  
medical acupuncture 302 ,  
mensuel du medecin acupuncteur 85 ,  
meridiens 16 , 73 , 188 ,  
modern journal of integrated traditional chinese and western medicine 57 , 300 , 326 ,  
mtc et acupuncture 93 ,

new journal of traditional chinese medicine 52 , 289 ,  
 practical journal of integrating chinese with modern  
 medicine 18 , 192 ,  
 qigong and science 1 , 94 ,  
 research of tcm 36 , 252 ,  
 revue francaise d'acupuncture 155 ,  
 revue francaise de mtc 95 ,  
 shanghai j ournal of acupuncture and moxibustion 327 ,  
 shanghai journal of acupuncture and moxibustion 194 , 213  
 , 231 , 292 , 294 , 329 ,  
 shanghai journal of tcm 24 , 212 , 301 ,  
 shanghai journal of traditional chinese medicine 8 , 9 , 146 ,  
 157 ,  
 veterinary acupuncture newsletter 127 , 128 ,  
 word journal of acupuncture-moxibustion 226 ,  
 world journal of acupuncture-moxibustion 177 , 199 ,  
 world journal of acupuncture-moxibustion 205 , 254 , 255 ,  
 307 , 310 ,  
 xinjiang journal of traditional chinese medicine 39 , 265 ,  
 zhejiang journal of traditional chinese medicine 37 , 256 ,

#### **8 - revues extérieures**

alt ther health med 26 , 222 ,  
 anticancer drugs 12 , 173 ,  
 british journal of anaesthesia 71 ,  
 british journal of clinical pharmacology 125 ,  
 bull cancer 101 ,  
 cancer 17 , 191 ,  
 cancer research in prevention and treatment 5 , 107 ,

chinese oncol soc bul 91 ,  
 clin exp obstet gynecol 25 , 216 ,  
 clinical nuclear medicine 143 ,  
 eur j cancer 20 , 32 , 203 , 243 ,  
 int j radiat oncol biol phys 319 ,  
 int j radiation oncology biol phys 257 ,  
 j clin oncol 28 , 237 , 295 ,  
 j natl cancer inst 29 , 239 ,  
 journal of guangdong medicine 158 ,  
 journal of pain and symptom management 230 ,  
 journal of the royal society of medicine 133 , 140 , 148 ,  
 modern medicine asia 80 ,  
 palliative medicine 193 ,  
 physiotherapy 150 ,  
 semin oncol 38 , 260 ,  
 seminars in urologic oncology 220 ,  
 soins 161 ,

#### **9 - thèses**

these medecine, bordeaux 2 112 ,  
 these medecine, caen 88 ,  
 these medecine, montpellier 83 ,

#### **10 - tirés-à-part ou manuscrits non publiés**

dalat 238 ,

#### **11 - traités**

neimenggu people's press, neimenggu 121 ,