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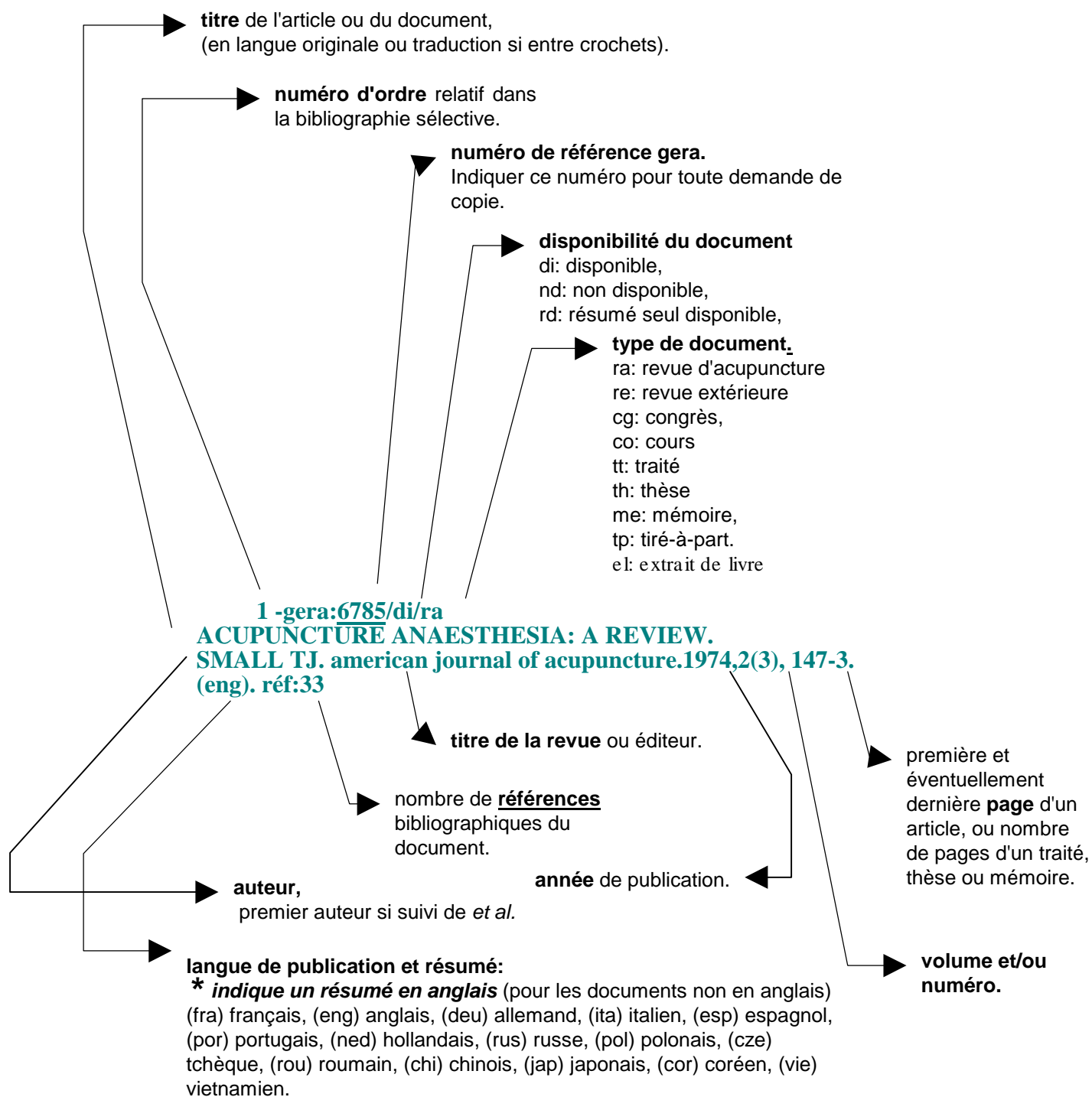
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1- gera: 119241/di/ra

[[CLINICAL OBSERVATION ON TREATMENT OF 61 CASES OF INSOMNIA WITH AURICULAR PLASTER THERAPY]]. ZHANG JIA-TONG, ET AL. . 0:; (chi).

2- gera: 7491/di/ra

L'INSOMNIE. FERREYROLLES P. **bulletin de la societe d'acupuncture.** 1950;1: (fra).

3- gera: 153384/di/ra

REEQUILIBRATION DANS L'INSOMNIE. GILLARD L-M. **la revue d'acupuncture.** 1965;3-4:27-32 (fra).

4- gera: 7492/di/ra

CONTRIBUTION DE L'ACUPUNCTURE A L'ETUDE DE LA PATHOGENIE ET DES THERAPEUTIQUES DES TROUBLES DU SOMMEIL. ERAUD M. **cahiers de biotherapie.** 1970;25:47 (fra).

5- gera: 7493/di/el

INSOMNIES. NGUYEN VAN NGHI. **pathogenie et pathologie energetique en medecine chinoise.** 1971;:682 (fra).

6- gera: 17455/di/ra

INSOMNIE. NGUYEN VAN NGHI. **revue francaise d'acupuncture.** 1972;25:421 (fra).

7- gera: 17938/di/ra

LES INSOMNIES EN MEDECINE CHINOISE. GOURION A. **mensuel du medecin acupuncteur.** 1973;1:21-60 (fra).

8- gera: 7495/di/ra

[TRAITEMENT DE L'INSOMNIE PAR ACUPUNCTURE]. DU DUKGIAN E. **american journal of acupuncture.** 1974;2(3):175 (eng).

9- gera: 7496/nd/th

INSOMNIE ET ACUPUNCTURE A PROPOS DE 197 CAS. PY B. **these medecine,paris.** 1974;265: (fra).

10- gera: 7497/di/el

[TRAITEMENT COMBINE PAR ACUPUNCTURE ET PRESCRIPTION DE L'INSOMNIE ET PALPITATIONS]. X. in **a research into acupuncture and its clinical practice,commercial press,hong kong.** 1975;:48-52 (eng).

11- gera: 7498/di/ra

LA PLACE ET LA PRATIQUE DE L'ACUPUNCTURE DANS LES TROUBLES DU SOMMEIL. OLIVO H. **meridiens.** 1976;35-36:97-145 (fra*).

12- gera: 7499/di/ra

LE SOMMEIL. ASTIER ET AL. **7eme congres national d'acupuncture,paris.** 1976;:161 (fra).

13- gera: 7500/di/ra

[INJECTION DE LIDOCAINE AU NIVEAU AURICULAIRE DANS LE TRAITEMENT DE L'INSOMNIE]. LEE TN. **american journal of chinese medicine.** 1977;5(1):71-7 (eng).

14- gera: 7501/di/th

BASES THEORIQUES, ASPECTS CLINIQUES ET THERAPEUTIQUES DU TRAITEMENT DE L'INSOMNIE PAR L'ACUPUNCTURE. CAROZ-PONCET F. **these medecine,marseille.** 1978;:182P (fra).

L'acupuncture n'est pas plus une sorcellerie, qu'elle ne saurait être une religion. Son berceau fut une philosophie : le taoïsme, elle grandit suivant sa loi, son alternance et ses corrélations. Parce que l'exotisme symbolique de cette richesse orientale est venu frapper à notre porte, nous expliquer le nord et nous conter le sud, nous décrire le inn, nous découvrir le yang, l'homme dans sa nature : tendu vers le ciel, juché sur le sol, nouveau soudain, découvre d'inconnus mystères de sa physiologie parfaite. L'énergie rencontre l'énergie, et l'acupuncture comme Einstein crée la matière. Ainsi jadis en eau profonde, la première cellule sentit peut-être la vie sous l'éclat du soleil. Quand les rayons de l'aube et l'énergie oé, profonde, enroulée frappent à nos paupières, lentement elles

revivent aux sons et aux couleurs, la conscience renaît et la force s'ébranle, alors l'énergie oé jaillit vers notre peau. La physiologie orientale du sommeil repose sur la circulation nyctémérale de l'énergie oé qui régle l'alternance des phases de sommeil et d'éveil, suivant sa circulation profonde nocturne et superficielle diurne, calquée sur le rythme du soleil. Elle subit encore à une échelle moindre les variations annuelle des saisons. L'homme se présente donc comme le reflet harmonieux du monde extérieur. Les énergies cosmiques et humaines se heurtent et se dominant. Pas à pas le terrain se déchire, le vent, le soleil, l'humidité, la sécheresse, le froid encore s'acharnent contre l'homme. De violents sentiments, des nourritures excessives l'affaiblissent encore. Ces mouvements s'expriment en vide et en plénitude énergétique et l'insomnie n'est que la manifestation extérieure d'un phénomène de défense, contre la mort, la séparation du inn et du yang, qu'évite la plénitude du yang kéo. La symptomatologie associée de l'insomnie est variée et rend compte de l'étiologie propre à chaque type d'insomnie. Nous avons analysé les aspects particuliers de l'insomnie due à l'énergie perverse vent, celle d'origine psychique avec le rôle de la réflexion et des soucis, puis celui de la colère. Le rôle de l'alimentation au premier rang dans la formation de l'énergie nourricière et défensive, ainsi que quelques perspectives communes entre les données diététiques traditionnelles et contemporaines concernant le rôle des fibres alimentaires dans la pathologie moderne. Puis les insomnies par perte de liaison entre le coeur et les reins. Les insomnies réclament un traitement étiologique spécifique à chaque forme. Celui-ci est la base de la thérapeutique des maladies chroniques en acupuncture. L'acupuncture ne doit pas être l'application de recettes magistrales, elle doit percer le raisonnement énergétique que sous-tend tout traitement pour lui donner sa force et sa vraie dimension. L'illustration de cette étude par quelques cas cliniques, permet de conclure de l'effet certain de l'acupuncture dans le traitement de l'insomnie, puisque les bons résultats représentent 50% environ des cas, et qu'une amélioration de la symptomatologie existe dans plus d'un quart des cas. Il faut encore souligner le caractère partiel de ce travail qui rend inexacte toute statistique mais lui confère cependant une valeur indicative. Le rôle de l'acupuncture dans le traitement de l'insomnie serait donc intéressant à développer dans les années à venir, d'autant plus que l'on connaît l'importance des prescriptions hypo-sédatives en médecine générale. Dans l'état actuel de développement respectif de la médecine occidentale et orientale de

15- gera: 7503/di/ra

SCHEMA DU SOMMEIL. SERFATI H. **auriculomedecine.** 1978;11:7 (fra).

16- gera: 7504/di/re

ESPERIENZE DI AGOPUNTURA NELL'INSONNIA. TOZZI A. **minerva medica.** 1978;69(44):3027-9 (ita*).

[EXPERIENCE WITH ACUPUNCTURE IN INSOMNIA]. Dans un premier groupe (4 patients) sont utilisés les points 6V, 30V, 62V et 36E. Dans un deuxième groupe (7 patients) les points extra 1, 20VB, et les points auriculaires sympathiques, Shen Men et Plexus. Stimulation manuelle ou électrique à basse fréquence. Un résultat positif est observé chez 11 patients à 8 mois.

17- gera: 12931/di/ra

[L'ACUPUNCTURE ELECTRO-SUGGESTIVE DANS LE TRAITEMENT PSYCHIATRIQUE DES PENSEES OBSESSIONNELLES ET DES CAUCHEMARS]. CANTON B. **american journal of acupuncture.** 1978;6(2):147-8 (eng).

18- gera: 19318/di/ra

INSOMNIE. CAS CLINIQUE N°2. X. perspectives yin yang. 1978;2:21 (fra).

19- gera: 19335/di/ra

INSOMNIE YANG. CAS CLINIQUES N°3. X. perspectives yin yang. 1978;3:17 (fra).

20- gera: 1856/di/cg

LES INSOMNIES. COLIN D. **1er seminaire de la saa,bordeaux.** 1979;:23 (fra).

- 21- gera: 7505/di/ra
LES INSOMNIES. FRESNET. *revue francaise d'acupuncture.* 1979;5-20:5-22 (fra).
- 22- gera: 7506/di/me
PHYSIOLOGIE DU SOMMEIL. COLIN D. *memoire d'acupuncture,afa,paris.* 1979;62: (fra).
- 23- gera: 7507/di/ra
ELECTRIC ACUPUNCTURE STIMULATION IN THE TREATMENT OF INSOMNIA. HSUE H PJ. *american journal of acupuncture.* 1979;7(4):335-338 (eng).
Electric acupuncture stimulation therapy was evaluated on twelve elderly male patients who had insomnia associated with chronic diseases. The results suggested that electric acupuncture stimulation may be useful in treating such complaints. No side effects, such as those produced by hypnotics, were noted in this study.
- 24- gera: 7508/di/me
TROUBLES DU SOMMEIL. FABAS-EYRAUD P. *memoire d'acupuncture,afa.* 1979;60:54P (fra).
- 25- gera: 7509/di/ra
[SOMMEIL DE DESYNCHRONISATION]. SCHULDT. *akupunktur.* 1979;3:121 (deu).
- 26- gera: 17451/nd/ra
UNE NOUVELLE COULEUR QUI SEMBLE INTERESSANTE DANS LES TROUBLES DU SOMMEIL. PIRO CC. *auriculomedecine.* 1979;14:25-26 (fra).
- 27- gera: 17452/di/ra
SOMMEIL ET MALADIES. SECONDY CA. *auriculomedecine.* 1979;14:29-30 (fra).
- 28- gera: 4244/di/cg
[SOMMEIL INDUIT PAR PSC, RAPPORT D'UN CAS]. HUNAN COLLEGE OF TCM. *advances in acupuncture and acupuncture anaesthesia,beijing.* 1980;:277 (eng).
- 29- gera: 4245/di/cg
[OBSERVATION SUR LE DEVELOPPEMENT DU SOMMEIL DURANT LE PSC, RAPPORT D'UN CAS]. ZHANG DENGBU ET AL. *advances in acupuncture and acupuncture anaesthesia,beijing.* 1980;:277 (eng).
- 30- gera: 4727/di/me
SIGNIFICATION DU SYMPTOME REVE. DO CAO PHUC. *memoire d'acupuncture,afera,nimes.* 1980;:19 (fra).
- 31- gera: 7510/nd/re
[EFFECT OF AURICULAR APUCUNTURE ON THE ORGANIZATION OF NIGHT SLEEP]. TABEEVA DM ET AL. *klin med (mosk).* 1980;58(10):102-5 (rus).
- 32- gera: 7511/di/me
LES TROUBLES DU SOMMEIL EN MTC. DI RUGGIERO A. *memoire d'acupuncture,afera,nimes.* 1980;:31 (fra).
- 33- gera: 7512/di/el
[INSOMNIE]. X. *in essentials of chinese acupuncture,foreign language press,beijing.* 1980;:349-50 (eng).
- 34- gera: 17450/di/ra
SUCCESSFUL TREATMENT OF SLEEP APNEA SYNDROME BY TRANSFUSION OF VITAL ENERGY. ZHU SS. *chinese medical journal.* 1980;93(4):279-80 (eng).
A case of sleep apnea syndrome was successfully treated by transfusion of "vital energy". The donor was the patient's son, 20 years old and healthy. The machine used was type 701 electroacupuncture apparatus. Treatment was carried out by needling Zusanli unilaterally with the anode connected to the needle in the patient, and with the catode to the needle in the donor. All symptoms and signs disappeared after 2 treatments.
- 35- gera: 21649/di/ra
- LE INSONNIE IN AGOPUNTURA CINESE NUOVA TECNICA TERAPEUTICA COL "POWER 79 INN-YANG".** PALETTA C. *rivista italiana di agopuntura.* 1980;39:67-75 (ita).
- 36- gera: 26452/di/co
COMMON DISEASES. SEQUELA OF APOPLEXY, ASTHMA, INSOMNIA. X. *guangzhou traditional medical college, guangzhou.* 1980;:12P (eng).
- 37- gera: 541/nd/re
[L'ACUPUNCTURE EN TANT QUE METHODE DE REGULATION DU SOMMEIL HUMAIN]. AKHTYAMOV I. *va med nauk.* 1981;6:62-4 (rus*).
Des études cliniques et électrophysiologiques chez 50 malades présentant des troubles du sommeil type insomnie due aux névroses attestèrent de la haute efficacité clinique de la thérapeutique par acupuncture laquelle a entraîné des modifications importantes de la structure du sommeil (comme c'était indiqué par 170 études polygraphiques de nuit) et de la personnalité.
- 38- gera: 542/di/ra
LES TROUBLES DU SOMMEIL ET L'ACUPUNCTURE. BOSSY J ET AL. *meridiens.* 1981;55-56:95-100 (fra*).
Lors de la table ronde organisée sur les troubles du sommeil, il a semblé souhaitable de réunir les opinions de médecins provenant d'horizons différents pour essayer de présenter les données théoriques et pratiques, et des résultats dans lesquels les praticiens pourraient trouver des renseignements ou des orientations variées. Cette formule de présentation concernant l'originalité de chacun est apparue préférable à une synthèse qui, en plus des difficultés de réalisation, aurait risqué de déformer la pensée de certains. Rappel des données fondamentales (Bossy). Classification des insomnies en médecine occidentale (Olivo). Troubles du sommeil selon la théorie du Yin Yang (Olivo). Troubles du sommeil selon la théorie des Zang-Fu (Lafont). Interrogatoire de l'insomniaque (Vibes). Traitement des troubles du sommeil par acupuncture (Nguyen Tai Thu). Résultats statistiques (Lafont).
- 39- gera: 6553/di/ra
[TRAITEMENT PAR ACUPUNCTURE DE LA DOULEUR CHRONIQUE]. STRAUSS S. *american journal of acupuncture.* 1981;9(1):73-5 (eng).
Traitement de 134 cas par acupuncture avec en moyenne 9,8 séances entre 2 à 4 mois. 84 % des patients ressentent une amélioration. 88 % des patients avec troubles du sommeil sont améliorés.
- 40- gera: 7513/nd/re
[POTENTIAL FOR THE DIFFERENTIAL CORRECTION OF NIGHT SLEEP STRUCTURE BY ACUPUNCTURE THERAPY]. TABEEVA DM. *soviet medicine.* 1981;3:32-6 (rus).
- 41- gera: 7514/di/el
[INSOMNIES]. X. *in doctor's manual of chinese medical diet.* 1981;:82 (eng).
Formes cliniques et principes thérapeutiques.
- 42- gera: 7515/di/el
INSOMNIES. NGUYEN VAN NGHI ET AL. *in semiologie et thérapeutique en medecine energetique orientale.* 1981;:157-65 (fra).
- 43- gera: 1851/di/ra
LES TROUBLES DU SOMMEIL. MOREZ JB ET AL. *perspectives yin yang.* 1982;19:2-6 (fra).
- 44- gera: 1852/di/cg
LES INSOMNIES. LAMBERT G ET ET AL. *conferences d'acupuncture,gera,toulon.* 1982;7:144 (fra).
- 45- gera: 1853/di/ra
LES PROBLEMES DU SOMMEIL. NOGIER P. *auriculomedecine.* 1982;26:23-4 (fra).
- 46- gera: 1854/di/ra
[LA METHODE "FACILITATION DE LA CIRCULATION

SANGUINE POUR ELIMINER LA STASE" DANS LE TRAITEMENT DE LA NARCOLEPSIE. RAPPORT DE 4 CAS]. CHEN JINGHE ET AL. *journal of traditional chinese medicine*. 1982;2(6):13 (eng).

Les auteurs pensent que selon la MTC la narcolepsie est due à une stagnation du sang liée à une peur, un traumatisme ou une stagnation de l'énergie vitale. Les médicaments favorisant la circulation sanguine sont

47- gera: 1855/di/ra

[OBSERVATIONS OF THE THERAPEUTIC EFFECT OF 50 CASES OF INSOMNIA TREATED BY EAR ACUPUNCTURE]. LIU FUXIN. *chinese acupuncture and moxibustion*. 1982;2(6):13 (chi*).

Le traitement a un effet rapide, sans effet secondaire et est d'une application simple, aiguilles à demeure bilatéralement. Points principaux : cœur, hépatite, shen men, cerveau. Points secondaires : apex de l'oreille (cas sévères), vésicule biliaire (rêves), point cœur (palpitations), estomac ou rate (anorexie). 86% de guérison, 12 % d'amélioration et 2 % d'échecs. L'auriculopuncture diminue l'excitation du cortex cérébral.

48- gera: 1860/di/ra

[NEVROSE ANXIO-DEPRESSIVE AVEC INSOMNIE REBELLE (CAS CLINIQUE N°11)]. BORDINI A. *quaderni di agopuntura tradizionale*. 1982;4(2):8 (ita).

Cas de névrose anxio-dépressive avec insomnie rebelle chez une femme âgée de 42 ans. Le cas est considéré comme une insuffisance du Inn de la rate due à une cause interne, avec une plénitude relative du Yang de l'estomac et avec une insuffisance du Inn du cœur et une plénitude relative du cœur Yang. Le traitement effectué a conduit, dans l'espace de deux mois à une rémission complète de la symptomatologie.

49- gera: 7516/di/ra

SOULIE DE MORANT ET L'INSOMNIE. LILE P. *contrepont*. 1982;15:6-15 (fra).

50- gera: 7517/di/ra

FISIOPATOLOGIA Y TRATAMIENTO DEL INSOMNIO. FIDALGO-MARTINEL A. *sociedad espanola de medicos acupuntores sema*. 1982;8:5-11 (esp).

51- gera: 17453/di/ra

THE ACUPUNCTURE ORGAN CLOCK. ITS IMPORTANCE FOR SLEEP AND SYNCHRONIZATION. SCHULDT H. *american journal of acupuncture*. 1982;3:227-237 (eng).
The old classical acupuncture teachings about the organ clock regain their importance in view of modern transmeridional flights by jetliners. Current research results make it doubtful to regard the organ clock as an internal prestabilized datum. In agreement with the old acupuncture rules, external influences play an important role, as this paper attempts to establish in more detail.

52- gera: 3085/di/ra

FATIGUE ET INSOMNIE. SERRES G. *revue française d'acupuncture*. 1983;36:25-31 (fra).

Cet article envisage la fatigue ou Pi Chuan comme due à un stress ou à des efforts qui blessent le sang, ou à un repos prolongé, après une fatigue, qui blesse le Qi. Suivant le stress les lésions siègent au niveau des cinq Zang ou des sept sentiments. Pour le foie, par exemple, maître des muscles, l'effort donne des lésions musculaires. L'insomnie, elle, est due à un surmenage intellectuel ou à un effort physique exagéré, alors se crée un trouble dans la circulation de l'énergie Wei perturbée par les pervers et non épurée dans le cycle Ke, ou un épuisement du Qi (jue). Dans l'insomnie comme dans la fatigue, les Zang ou les âmes végétatives, Ben Shen, jouent un rôle

53- gera: 5410/di/re

LA CONSULTATION D'ACUPUNCTURE HOSPITALIERE. BILAN DE CINQ ANS D'ACTIVITE. KHALATBARI E ET AL. *journal de medecine de lyon*. 1983;64:117-20 (fra).

864 patients ont été traités en consultation du 1er avril 1976 au 1er avril 1981. Avec un recul minimum de 3 mois, l'acupuncture apporte en 3 à 4 séances espacées de dix jours à trois semaines, de très bons résultats dans au moins 67 %

des algies rhumatismales d'origine dégénérative ou abarticulaire, dans 60 % de déséquilibre neuro-végétatif (nervosisme et insomnie) et des migraines ainsi que dans 68 % des cas de rhinite allergique.

54- gera: 7518/di/ra

INSOMNIES. DAHOUT C. *auriculomedecine*. 1983;32:31-2 (fra).

55- gera: 12824/nd/re

[REFLEXOTHERAPIE CHEZ LES MALADES NEVROTIQUES AVEC MANIFESTATIONS DEPRESSIVES HYPOCHONDRIQUES]. KOCHETKOV ET AL. *zhurnal nevropatologii i psikiatrii*. 1983;83(12):1853-55 (rus*).
Amélioration du sommeil et de la capacité de travail après acupuncture chez 41 patients.

56- gera: 13737/di/el

SUCCESSION DU TRAITEMENT D'UN SYNDROME APNEIQUE DURANT LE SOMMEIL PAR TRANSFUSION D'ENERGIE VITALE. MUSARELLA PS. *in memoire d'acupuncture, cedat, marseille*. 1983;:58 (fra).

Traduction d'un article du chinese medical journal 1980, 93 (4), 279-80.

57- gera: 18426/di/ra

THE ACUPUNCTURE ORGAN CLOCK ITS IMPORTANCE FOR SLEEP AND SYNCHRONIZATION. SCHULDT H. *acupuncture research quarterly*. 1983;27-28:113-85 (eng).

58- gera: 20441/di/me

TRADUCTION DE QUATRE ARTICLES CHINOIS. MUSARELLA PS. *memoire d'acupuncture, cedat*. 1983;78:60P (fra).

"Les remèdes traditionnels chinois des maladies mentales". "L'anesthésie par acupuncture en neurochirurgie". "Les théories médicales chronobiologiques du Neijing". "Succès du traitement d'un syndrome apnéique durant le sommeil par transfusion d'énergie vitale".

59- gera: 26148/di/el

INSOMNIES. LEBARBIER A. *in l'acupuncture pratique, maisonneuve, ste ruffine*. 1983;:424-428 (fra).

60- gera: 7519/di/ra

[INSOMNIE, FORMES CLINIQUES ET TRAITEMENT]. WU ZI MOU. *journal of the american college of traditional chinese medicine*. 1984;3:51-4 (eng).

61- gera: 7520/di/ra

[L'INSOMNIE SELON LE MAITRE LI JI CHANG]. CHEUNG SC. *journal of the american college of traditional chinese medicine*. 1984;3:56-8 (eng).

62- gera: 7521/di/ra

[RETABLISSEMENT DU YIN ET DU YANG DANS LE TRAITEMENT DE L'INSOMNIE]. LIU SHU NONG. *journal of the american college of traditional chinese medicine*. 1984;3:58-9 (eng).

63- gera: 7522/di/ra

[INSOMNIE REBELLE]. JIAO SHU DE. *journal of the american college of traditional chinese medicine*. 1984;4:3-5 (eng).

64- gera: 7523/di/ra

[INSOMNIE ET INCONTINENCE DE FLUIDE SEMINAL]. SIAO SHU DE. *journal of the american college of traditional chinese medicine*. 1984;4:6-8 (eng).

65- gera: 7524/di/ra

THE APPLICATION OF "DECOCTION FOR RESTORING SPLEEN" FOR INSOMNIA. LU YONG CHIANG. *journal of the american college of traditional chinese medicine*. 1984;4:9-12 (eng).

66- gera: 7525/di/ra

WARM TONIFICATION WITH SEDATION IN THE TREATMENT OF INTRACTABLE INSOMNIA. X. *journal of*

the american college of traditional chinese medicine.

1984;4:13-25 (eng).

Traitement par phytothérapie.

67- gera: 7526/di/cg

INSOMNIES, EXPERIMENTATIONS ACUPUNCTURALES STANDARDISEES TECHNIQUE DU DR MUSSAT.

BOURDEL P ET AL. **actes du 3eme seminaire des associations d'acupuncture du midi,nimes.** 1984;:85 (fra).

A travers les connaissances actuelles des mécanismes du sommeil, qui répondent à des rythmes biologiques et apparaissent comme ayant une certaine indépendance vis à vis du vécu diurne des individus, les auteurs ont testé une approche standardisée de la plainte alléguée d'un certain nombre de patients présentant des troubles attribuables à une insuffisance de sommeil, selon la méthodologie du docteur Maurice Mussat. Bien que fragmentaire, le nombre d'observations étant limité, les résultats colligés avec un maximum d'objectivité ont été conformes aux résultats annoncés par le docteur Mussat.

68- gera: 7527/di/ra

LES INSOMNIES. GALBRUN M. **cahiers de biotherapie.**

1984;81:59 (fra).

Différents traitements en fonction du déséquilibre énergétique.

69- gera: 7528/di/ra

[TRAITEMENT DE L'INSOMNIE PAR QIGONG DYNAMIQUE SPONTANE ET ACU-PRESSION]. YANG YUAN JING ET AL. **qigong and science.** 1984;4:14 (chi).

70- gera: 7529/di/ra

UNE INSOMNIE (CAS CLINIQUE). SCHMIDT A.

acupuncture. 1984;81:31 (fra).

71- gera: 7530/di/el

INSOMNIES. NGUYEN VAN NGHI ET RECOURS-NGUYEN C. **in medecine traditionnelle chinoise.** 1984;:591 (fra).

72- gera: 7531/di/ra

[TRAITEMENT DES INSOMNIES PAR REGULATION DES FONCTIONS ENTRE LE YIN ET LE YANG]. BEI RUN FU. **zhejiang journal of traditional chinese medicine.**

1984;19(12):539 (chi).

73- gera: 7532/di/ra

[EXPERIENCE CLINIQUE DANS LE TRAITEMENT DE L'INSOMNIE PAR ACUPUNCTURE : ORIENT ET OCCIDENT]. SPONZILLI U. **agopunctura e tecnica di terapia antalgica.** 1984;2(1):43-9 (ita*).

Etude chez 81 patients. D'excellents résultats sont obtenus en dessous de 55 ans.

74- gera: 7533/di/ra

[INSOMNIE : REVUE HISTORIQUE DU DIAGNOSTIC DIFFERENTIEL ET TRAITEMENT]. LI KESHAO. **journal of the american college of traditional chinese medicine.**

1984;3:33-41 (eng).

75- gera: 7534/di/ra

[CAS CLINIQUE D'INSOMNIE]. XIONG YONG HOU. **journal of the american college of traditional chinese medicine.**

1984;3:47-8 (eng).

76- gera: 7535/di/ra

[DECOCTION DES NEUF INGREDIENTS DIRIGES PAR BULBUS LILII DANS LE TRAITEMENT DE L'INSOMNIE]. HUANG ZHI QIANG. **journal of the american college of traditional chinese medicine.** 1984;3:49-50 (eng).

77- gera: 7542/di/el

[INSOMNIES]. X. in nanjing seminars transcript (qiu maolian and su xin ming),london. 1984;:33-37 (eng).

78- gera: 8787/di/cg

SPECIAL SLEEP PHENOMENON INDUCED BY PROPAGATED SENSATION ALONG MERIDIANS REACHING THE HEAD. WU BAOHUA ET AL. **second national symposium on acupuncture and**

moxibustion,beijing. 1984;:264 (eng).

79- gera: 10302/di/ra

[LE MASSAGE DANS L'INSOMNIE, LE SYNDROME DE MENIERE ET L'HYPERTENSION]. X. **orientamenti mtc.**

1984;1(3):168-172 (ita).

80- gera: 146330/di/ra

TRAITEMENT EFFICACE DU SYNDROME D'APNEE PENDANT LE SOMMEIL PAR TRANSFUSION "D'ENERGIE VITALE". DRIOT HM. **memoire d'acupuncture, cedat.**

1984;: (fra).

81- gera: 7536/di/ra

86 CASES OF INSOMNIA TREATED BY DOUBLE POINT NEEDLING-DALING THROUGH TO WAIGUAN. REN YI.

journal of traditional chinese medicine. 1985;5(1):22 (eng).

Puncture du 7MC jusqu'au 5TR. Après obtention du deqi, l'aiguille est laissée en place 5 à 15 minutes avec manipulation d'enfoncement-retrait et rotation toutes les 5 minutes pour renforcer le deqi. 39 guérisons, 36 améliorations nettes et 11 améliorations. Rapport d'une observation type.

82- gera: 7537/nd/th

COSMOGENESE ET CYCLES DES ENERGIES DANS LE TAOISME. APPORT DES DONNEES TRADITIONNELLES ET CONTEMPORAINES DE L'ENERGETIQUE CHINOISE*.

GENOTELLE L. **these medecine,lille.** 1985;377: (fra).

La notion de cycle, de rythme, de périodicité apparait dès le début de la cosmogénèse taoïste, car elle représente la résolution instantanée de la contradiction apparente des couples d'opposés : le Yin et le Yang. La manifestation telle que le conçoit le taoïsme est donc cyclique par essence car elle est une dualité dynamique. En même temps, elle représente la totalité du principe dans la multiplicité des ses aspects. Celle-ci résulte des mutations et polarisations successives de "l'énergie primitive indifférenciée" en "énergies différenciées", des plans les plus subtils et immatériels vers les plans les plus condensés et matériels. L'énergétique chinoise a pour objet l'étude de ces mutations et décrit, dans sa logique propre, les interactions des différents constituants du manifeste. Son application particulière à l'être humain représente le champ d'étude et d'application de la médecine chinoise. L'embryogénèse énergétique de l'organisme humain est point par point similaire à la cosmogénèse du tao, et fait de lui un microcosme, image du macrocosme. Son organisation temporo-spatiale est donc également cyclique car elle est la résolution dynamique de la contradiction du couple d'opposés "ciel- terre". Ses différents rythmes font parties du champ d'étude de la chronobiologie. Elle en constitue l'approche analytique et inductive, l'énergétique chinoise, l'approche synthétique et déductive. Les deux méthodes sont donc complémentaires, et nous avons tenté d'en donner un exemple dans l'analyse du rythme circadien de la température corporelle. La médecine chinoise peut être considérée comme ayant pour but la réharmonisation des différents rythmes biologiques en rééquilibrant les différentes "fonctions énergétiques" de l'organisme. Les dyssonnies sont traitées ici sous cet angle c. à d. comme des dérèglements du rythme circadien de l'alternance veille-sommeil. Quelques cas cliniques viennent ici illustrer la conception et les traitements acupuncturaux des

83- gera: 7541/di/re

[L'EFFICACITE DE L'ACUPUNCTURE ET D'EXERCICES DE DECONTRACTION ET DE CONDITIONNEMENT DANS LE TRAITEMENT DES TROUBLES DU SOMMEIL]. BECKER-CARRUS C ET AL. **zeitschrift fuer klinische,psychologie,psychopathologie und psychotherapie.** 1985;33(2):161-73 (deu).

44 insomniaques, répartis dans 4 groupes : un groupe contrôle de 12 personnes, trois groupes thérapeutiques (12 conditionnement- décontraction, 8 acupuncture classique, 12 acupuncture-laser). Acupuncture classique : 9 séances : 20VG, anmien I, anmien II, 7C, 6MC, 36E, 4GI : recherche du De Qi, sans stimulation, durée 20'. Amélioration rapide de la qualité du sommeil, sensation de récupération surtout dans le groupe décontraction et acupuncture classique, sans véritable incidence dans le degré d'endormissement et fréquents réveils

nocturnes qui ne viennent qu'à long terme mais essentiellement dans le groupe décontraction.

84- gera: 8918/di/ra

DISCOURS SUR LA PATHOGENIE. NGUYEN VAN NGHI. *revue française de mtc.* 1985;113:281-4 (fra).

Traduction du chapitre 46 du Su Wen. Ce chapitre 46 et les suivants jusqu'au chapitre 49, étudient les maladies dites "curieuses", ne subissant pas l'influence de la variation climatique des 4 saisons (6 énergies perverses). En clinique, il faut savoir distinguer les maladies singulières et les maladies courantes. L'examen des pouls et celui des signes des maladies singulières doivent être toujours associés à la recherche étiologique. C'est pourquoi, Wugon spécifie : "pathogénie", implique aussi le sens de "forme", à savoir des formes de la maladie. En conclusion, ce chapitre est consacré à l'étude étiologique, physiopathologique, diagnostique et thérapeutique des 7 maladies suivantes, dites communes : abcès oesophagien, sommeil agité, décubitus dorsal pénible, lombalgies, colère et folie-yang, maladie du vent (chez les alcooliques). Les deux formules magistrales citées dans ce chapitre 46 sont relativement simples, ce qui nous permettra d'aborder avec moins de difficulté des

85- gera: 10484/di/ra

[EXERCICES DE QIGONG POUR QUELQUES AFFECTIONS COMMUNES (HEMORROIDES, PTOSE GASTRIQUE, OTITE, ODONTOPTHIE, INSOMNIE)]. X. orientamenti *mtc.* 1985;2(5):246-51 (ita).

Traduction italienne d'une publication chinoise.

86- gera: 19100/di/ra

STRUCTURATION DE L'ENFANT. LACOURTE B. *revue française d'acupuncture.* 1985;44:5-17 (fra).

Cet article étudie certains éléments de la genèse qui concourent tout au long de l'enfance à assurer la maturation somatique, psychique et spirituelle d'un être humain. En illustration, certains troubles neuropsychiatriques provoqués par une perturbation de cette genèse sont envisagés : l'énurésie, les cinq retards et les cinq ramollissements, les pleurs nocturnes du nourrisson.

87- gera: 22513/di/cg

NEURO-MEDIATEURS ET ACUPUNCTURE. PIZAY M. **14ème congrès national d'acupuncture, paris.** 1985;:43-57 (fra).

L'étude de neuro-médiateurs peut se diviser en deux pôles distincts qui peuvent entrer l'un et l'autre dans le cadre global des correspondances avec les 5 "mouvements" de l'acupuncture : Synthèse et vie des NM en général : éveil, activation, dépolarisation, évacuation, diffusion, modulation, captage, dégradation ou recaptage. 2) Action proprement dite, clinique ou métabolique des différents NM. concernés, avec des "ambiances" ou des "climats" spécifiques se rapprochant de ceux connus, et ce , en plusieurs étapes ou "pas" concentriques, selon leur importance actuellement reconnue. 3) Exemples de maladies "codées" dans les deux systèmes de pensée :

88- gera: 22519/di/cg

CONCEPTION DE L'INSOMNIE EN MEDECINE TRADITIONNELLE CHINOISE. CHAMPAGNAT C. **14ème congrès national d'acupuncture, paris.** 1985;:191-208 (fra).

L'insomnie n'est pas une maladie mortelle sans doute, mais sa fréquence et ses conséquences sur la qualité de la vie de tous les jours en constituent la gravité. Son diagnostic étiologique précis est parfois difficile et laborieux car il fait intervenir l'Homme dans toute la finesse de ses modes de pensée, de son émotivité et de ses habitudes nutritionnelles et de vie propre. "La vie simple, c'est le bonheur pour les organes, les entrailles et les entités viscérales". Le traitement des insomnies par la MTC est long et difficile. Il apporte certainement beaucoup plus de satisfactions au malade et à son médecin que la banale prescription d'un somnifère. Le sevrage définitif de ce dernier (sevrage qui devra se faire par paliers successifs) sera la plus belle récompense pour le thérapeute.

89- gera: 22520/di/cg

LES INSOMNIES. ELIE P. **14ème congrès national d'acupuncture, paris.** 1985;:209-17 (fra).

La base du traitement des insomnies repose sur le rétablissement de l'équilibre énergétique des organes, en première intention. Il convient donc de connaître les "syndrômes" pathologiques des organes dans lesquels l'insomnie peut se présenter. Un diagnostic étant posé : "vide de sang du foie", "vide de Yin des reins", "coeur et reins n'ont pas d'échange"... une thérapeutique appropriée peut être réalisée. On ajoutera à ce traitement des points de symptômes en fonction du type de l'insomnie : endormissement difficile, insomnie par soucis... etc...

90- gera: 22521/di/cg

LES TROUBLES DU SOMMEIL, LES INSOMNIES. LEPRON PA. **14ème congrès national d'acupuncture, paris.** 1985;:218-49 (fra).

Le traitement de l'insomnie n'est pas fait d'une recette ou de points miracles ou points de sommeil. Il s'agit d'harmoniser la circulation de l'Energie dans le corps et spécialement au niveau du Shen. Excès de Yang ou Energie pathogène. Lei Jing dit : "Quand le pervers est abondant (sheng) on dit qu'il y a plénitude (Shi), quand le souffle dépérit (Shuai) on dit qu'il y a vide (Xu)". Vide de Sang-vide de Rein, sont l'expression d'un blocage de la circulation des substances, des humeurs, des liquides. C'est en assurant la transformation du Yang vers le Yin que l'on permettra à l'insomniaque de retrouver le sommeil naturel.

91- gera: 1939/di/el

[INSOMNIE ET TERREUR NOCTURNE]. SCOTT J. **in the treatment of children by acupuncture, the journal of chinese medicine, hove.** 1986;:157-63 (eng).

92- gera: 2071/di/me

TRAITEMENT ACUPUNCTURAL DES INSOMNIES (A PROPOS DE QUELQUES OBSERVATIONS PERSONNELLES). DESWARTE JL ET MACAIGNE M. **memoire d'acupuncture, lille 2.** 1986;:44P (fra).

Au terme de cette étude, on retrouve une fois de plus une distorsion étrange entre la médecine occidentale et la médecine traditionnelle chinoise. La première accumule des connaissances fondamentales de plus en plus fines sur les mécanismes biologiques, en l'occurrence du sommeil, mais ne sait pas en extraire une conduite autre qu'uniforme et créatrice de dépendance. La seconde qui perpétue depuis des millénaires une tradition d'observation de l'homme et du monde, de déduction sur des mécanismes également complexes mais radicalement différents (dans leur énoncé, au moins) et qui en tire une conduite adaptée à chaque individu reclassé dans son élément, replacé dans son équilibre. Pour la médecine traditionnelle chinoise tout est dans la circulation de l'énergie. L'insomnie est alors une fenêtre sur un déséquilibre énergétique de l'individu. Lui rendre

93- gera: 7538/di/me

LES REVES ET LA MEDECINE TRADITIONNELLE CHINOISE. MEUNIER D. **memoire d'acupuncture, afa, paris.** 1986;:110P (fra).

Ce mémoire est une étude sur les songes et les rêves dans la société traditionnelle chinoise à travers les textes classiques de Liezi, Shuang-Zi, des ouvrages médicaux Su Wen, Chamfrault, Soulié de Morant et l'étude d'une clef des songes du VIII ème siècle. Nous avons étudié et comparé les rêves dans d'autres grandes traditions Egyptienne, Indienne et Hébraïque. Les exemples de songes rapportés dans ce travail peuvent permettre de nous faire une idée sur l'importance de cette activité nocturne dans la civilisation chinoise et nous aider à reconsidérer l'intérêt que nous portons aux rêves et à leur lecture dans une pratique médicale. (directeur de Mémoire :

94- gera: 7539/di/ra

PHYSIOLOGIE DU SOMMEIL. PORT-HELLEC J. **acupuncture.** 1986;87:13-20 (fra).

Physiologie occidentale et analyse selon les 5 mouvements.

95- gera: 7540/di/ra

LES TROUBLES DU SOMMEIL. LEPRON. **acupuncture.**

1986;87:21-34 (fra).

96- gera: 12840/di/me

INSOMNIES ET ACUPUNCTURE. MOLIA J. **memoire d'acupuncture, bordeaux 2.** 1986;:61P (fra).

Après un rapide rappel des insomnies en médecine occidentale et traditionnelle chinoise, l'auteur expose l'expérimentation clinique acupuncturale réalisée à partir de protocoles standardisés selon une symptomatologie occidentale. L'auteur montre qu'avec une application simplifiée de l'acupuncture il obtient de bons résultats chez 40 patients sur 47. Cette étude est suivie d'une analyse bibliographique sur les insomnies et leur traitement par

97- gera: 19017/di/me

ETUDE ACUPUNCTURE DE L'INSOMNIE (A PROPOS DE 128 CAS). GUILLLOT JP. **memoire d'acupuncture, college d'acupuncture du sud-ouest.** 1986;:25 (fra).

98- gera: 19025/di/me

A PROPOS DU SOMMEIL. VINOGRADOFF M. x. 1986;:87P (fra).

Nous avons essayé au cours de ce travail, d'étudier le sommeil en médecine traditionnelle chinoise en partant du niveau le plus simple et le plus palpable pour arriver à un niveau plus subtil et plus spirituel. Nous avons tenté de dégager les rôles propres de chaque "structure" impliquée dans le cycle veille-sommeil en nous attachant aux textes et nous avons cherché à en faire une synthèse cohérente. Nous avons particulièrement insisté sur le rôle du Foie, du Hun, qui nous a semblé capital ici, le Foie étant le seul organe à être référence par rapport au Tao dans le chapitre 5 du Su Wen, où il y a description de la structure de l'homme, mise en place des 5 éléments et de leurs rapports analogiques. Cela lui confère une place à part parmi les 5 organes ce que nous avons tenté de mettre au clair. Le sommeil, au terme de cette étude, nous apparaît comme un moment privilégié du cycle nyctéméral, le corps est en reports, l'esprit est dans état particulier. Le rêve se révèle d'après ce travail comme étant une fonction du Shen, cédé dans le plus profond du sommeil, protégé par l'énergie Wei, animé par les Hun, ressourcé par les Quiao, et ayant pour rôle de garder le souvenir du Principe pour permettre le Retour.

99- gera: 19154/di/ra

LE SOMMEIL EN MEDECINE TRADITIONNELLE CHINOISE. PARIS F. **acupuncture.** 1986;90:29-40 (fra).

100- gera: 19160/di/ra

L'INSOMNIE. ALQUIE R. **acupuncture.** 1986;89:33-38 (fra).

101- gera: 19175/di/ra

"FLOTTER SUR LES NUAGES BLANCS", L'ACUPUNCTURE DE DEUX POINTS COUPLES LIBERE-T-ELLE UN NEURO-MEDIATEUR A EFFET RELAXANT ?.

MICHAUD JC. **meridiens.** 1986;73-74:173-201 (fra).
Le couple de points He Gu (4GI) et Tai Chong (3F) est connu dans la tradition chinoise sous l'appellation de "quatre barrières". L'emploi conjugué de ces deux points suffit à montrer qu'en dehors de toute action anti- algique (AAA), l'acupuncture exerce des effets subtils de détente, de facilitation du sommeil, de tranquillisation. Ces effets entrent dans le cadre encore inexploré des actions non antalgiques de l'acupuncture (ANA). Ils semblent proches de l'action de certains médicaments tels les benzodiazépines et suggèrent l'implication de neuro- médiateurs différents des endorphines dans l'ANA. A partir de sa pratique quotidienne, l'auteur : 1) a sélectionné 17 observations cliniques en faveur de l'action non antalgique des points couplés He Gu (4GI) et Tai Chong (3F), en analyse les données dans un tableau récapitulatif et en synthétise les résultats; 2) a recueilli et commente les textes chinois traitant des quatre barrières ; 3) expose la technique, les effets, les indications et suggère le mode

102- gera: 20283/di/me

SOMMEIL ET ACUPUNCTURE. AVELLANEDA A ET AL. **memoire d'acupuncture, bordeaux 2.** 1986;:60P (fra).

Ce travail constitue une approche clinique et polygraphique du sommeil et de l'acupuncture. Pour ce faire nous avons

comparé les résultats cliniques et polygraphiques avant et après traitement acupunctural ou placebo au sein de deux groupes de patients. Il ressort de cette analyse : 1) une différence très significative en faveur du groupe standard quant aux résultats subjectifs, 2) une différence non significative quant aux résultats objectifs avec toutefois une amélioration du nombre et de la durée des éveils au sein du groupe standard, 3) une discordance des résultats cliniques et polygraphiques.

103- gera: 20567/di/ra

[OBSERVATION OF THE THERAPEUTIC EFFECT ON TREATMENT OF 2485 CASES OF INSOMNIA BY NEEDLING SHENMEN POINT]. CHENG LONGGUANG.

chinese acupuncture and moxibustion. 1986;6(6):18 (chi*).
[Traitement de 2485 cas d'insomnies par le 7C, observation de l'effet thérapeutique]. Le taux d'efficacité est de 98,9 %, les insomnies simples et d'apparition récente étant les mieux améliorées. On associe au 7C le 36E et le 12VB, 1 séance par jour, 12 à 15 séances. Tonification ou dispersion suivant le contexte pathologique. Durée 20 à 40 mn par séancer séance. (Voir traduction anglaise réf. GERA [80525]).

104- gera: 30512/di/ra

[73 CASES OF NARCOLEPSY TREATED WITH ACUPUNCTURE]. ZHAO WANCHENG. **journal of tcm.** 1986;27(3):42-9 (chi).

105- gera: 32412/di/ra

[ACUPUNCTURE AS THE THERAPY FOR SOMNOLENCE]. KONG LINGFU ET AL. **journal of new chinese medicine.** 1986;18(11):33 (chi).

106- gera: 33147/di/ra

[46 CASES OF INSOMNIA TREATED BY THE METHOD OF ACTIVATING THE BLOOD AND ELIMINATING THE STAGNANT]. ZHAO QINGLIN. **hubei journal of traditional chinese medicine.** 1986;2:35 (chi).

107- gera: 33188/di/ra

[OBSERVATION ON THE EFFECT OF 100 CASES INSOMNIA TREATED BY OTOPOINT PRESSING PILL]. YANG FU ET AL. **hubei journal of traditional chinese medicine.** 1986;6:42 (chi).

108- gera: 40305/nd/re

[TREATMENT OF 100 CASES OF INSOMNIA WITH INJECTION OF SALVIA MILTIORRHIZA INTO MERIDIAN POINTS]. DAI JIAN LIN. **sichuan zhongyi.** 1986;4(4):42. (chi*).

Résumé Acme (870642). ACME:870642

109- gera: 40875/di/ra

[240 CASES OF INSOMNIA TREATED BY ACTIVATING CIRCULATION AND ELIMINATING BLOOD STASIS]. XIE YONG ET AL. **journal of traditional chinese medicine.** 1986;27(3):194-95 (eng).

110- gera: 85169/di/ra

CLINICAL OBSERVATION AND PHARMACOLOGICAL INVESTIGATION ON THE SEDATIVE AND HYPNOTIC EFFECTS OF THE CHINESE DRUG RHIZOME AND ROOT OF PATRINIA SCAIOSAEFOLIA FISH. LUO HECHUN ET AL. **journal of tcm.** 1986;6(2):89-94 (eng).

111- gera: 19842/di/cg

LES INSOMNIES. YANG JIA SAN. **in congres de vannes 1986, cercle sinologique de l'ouest, rennes.** 1987;:29-36 (fra).

112- gera: 19880/di/el

[INSOMNIES]. X. **in patent medicine, harmonious sunshine cultural center, san francisco.** 1987;2:111-5 (eng).
Formes cliniques et phytothérapie.

113- gera: 20041/di/ra

LECTURES ON FORMULATING ACUPUNCTURE PRESCRIPTIONS - SELECTION AND MATCHING OF ACUPOINTS. ACUPUNCTURE TREATMENT OF

INSOMNIA. CHANGXIN Z. *journal of tcm.* 1987;7(2):151-2 (eng).

Le traitement de l'insomnie peut être fait par une approche générale standardisée en utilisant comme points principaux 7C, 6Rte, Point "anmian" entre 17TR et 20VB ; comme points adjuvants 19TR, 3TR, 6MC, 5C, hors méridiens n°2 et n°6. Les punctures se font en tonification ou dispersion suivant les indications spécifiques. On peut traiter suivant une approche des différents syndrômes qui peuvent être : plénitude chaleur du foie, stagnation alimentaire de l'estomac, vide du rein yin, vide du coeur et de la rate, vide d'énergie du coeur et de vésicule biliaire. Deux autres approches sont proposées : l'auriculopuncture (points coeur, shenmen, rate, rein, subcortex) et la fleur de prunier à 2 à 3d de chaque côté des dorsales.

114- gera: 20356/di/ra

ACUPUNCTURE TREATMENT OF INSOMNIA. ZHAO CHANGXIN. *journal of traditional chinese medicine.* 1987;7(2):151-2 (eng).

115- gera: 20768/di/ra

CLASSIFICATION AND TREATMENT OF MENTAL DISORDERS BY TRADITIONAL CHINESE MEDICINE. CHANG JIAN HSU. *journal of the american college of tcm.* 1987;3:31-63 (eng).

1)Classification des maladies mentales en MTC : Revue historique. 2) Formes cliniques et rapport de cas traités par phytothérapie dans : a) état dépressif, b) état maniaque, c) état maniaco-dépressif, d) épilepsie, e) association épilepsie-manie, f) démence psychotique, g) autres : céphalée, vertiges, palpitations, insomnie.

116- gera: 21204/di/ra

[AN ANIMAL MODEL FOR HEART DEFICIENCY SYNDROME INDUCED BY SLEEP DEPRIVATION]. SUN FULI ET AL. *chinese journal of integrated traditional and western medicine.* 1987;7(1):35 (chi*).

117- gera: 23305/di/ra

TEACHING ROUND : INSOMNIA. X. *journal of traditonal chinese medicina.* 1987;7(1):73-6 (eng).

118- gera: 23617/di/ra

I SOGNI COME ESPRESSIONE INCONSCIA DI UNA PATOLOGIA D'ORGANO. CICHETTI A. *rivista italiana di agopuntura.* 1987;59:65-71 (ita).

119- gera: 24672/di/cg

LES REVES EN MTC : APPORT DANS LE DIAGNOSTIC ET L'EVOLUTION DES MALADIES. DEROC D. *actes du 2eme congres d'acupuncture afera, nimes.* 1987;:81-114 (fra).

Il s'agit dans ce travail, dans un premier temps, de dresser la liste exhaustive des rêves et de leur signification sémiologique, tels qu'on les retrouve, classiquement décrits, dans le Su Wen et le Ling Shu. A partir de cette base, l'auteur se propose d'étendre ces notions à d'autres rêves, en fonction des analogies qui peuvent exister soit sur le plan symbolique, soit sur le plan structural. Enfin à partir d'observations cliniques, essayer de dégager quelle est la valeur sémiologique que l'on peut attendre du récit des rêves dans le diagnostic et le suivi de

120- gera: 24760/di/el

INSOMNIA (APPENDIX : POOR MEMORY). CHENG XINNONG. *in chinese acupuncture and moxibustion, foreign languages press, **. 1987;:416 (eng).

121- gera: 30681/di/ra

[TREATMENT OF INSOMNIA BY EAR-POINT PRESSURE WITH ADHESIVE PLASTER. ANALYSIS OF 67 CASES]. LIU FUXI. *journal of traditional chinese medicine.* 1987;28(2):53-4 (eng).

122- gera: 30934/di/ra

[TREATMENT OF INSOMNIA BY MASSAGE. 57 CASES REPORT]. LI DONGSHENG. *shandong journal of traditional chinese medicine.* 1987;3:15 (chi).

123- gera: 32128/di/ra

[THEORY ABOUT DREAM CONTENT IN TCM]. MA PENGREN. *journal of shandong college of traditional chinese medicine.* 1987;11(3):8 (chi).

124- gera: 32975/di/ra

[BRIEF INTRODUCTION OF TREATMENT OF SOMNAMBULISM BY TCM]. HE SONG-LIN. *zhejiang journal of traditional chinese medicine.* 1987;22(7):331 (chi).

125- gera: 32993/di/ra

[TREATMENT OF 92 CASES OF INSOMNIA BY AURICULAR-PLASTER WITH BORNEOL]. WU XI-QIANG. *zhejiang journal of traditional chinese medicine.* 1987;22(4):158 (chi).

126- gera: 41178/di/re

[SEDATIVE AND HYPNOTIC ACTIONS OF RAW AND FRIED SUANZAOREN]. LOU SONG NIAN ET AL. *zhongchengyao yanjiu.* 1987;2:18-9 (chi*). Résumé Acme (880171). ACME:880171

127- gera: 51072/di/ra

[STUDIES ON THE SEDATIVE AND HYPNOTIC CONSTITUENTS OF FLAVONOIDS IN SEMEN ZIZIPHI SPINOSAE]. YUAN CHANGLU ET AL. *bulletin of chinese materia medica.* 1987;12(9):34-5 (chi*).

128- gera: 22228/di/ra

CAS CLINIQUE : UNE INSOMNIE TERRE. ALTHERR J. *acupuncture.* 1988;96:51-2 (fra).

129- gera: 23757/nd/re

ACUPUNCTURE FOR MOOD AND SLEEP DISTURBANCE. STRAUSS S. *australian family physician.* 1988;17(4):287-9 (eng).

130- gera: 23779/di/me

LES INSOMNIES DANS LES SYSTEMES REFERENTIELS DE LA MEDECINE TRADITIONNELLE CHINOISE. LY NGIEM HEANG. *memoire d'acupuncture, bordeaux 2.* 1988;:49P (fra).

La Médecine Traditionnelle Chinoise est une médecine énergétique dans laquelle la maladie résulte d'un déséquilibre entre les différents composants de cette énergie. La diversité des formes de l'énergie justifie l'existence des systèmes référentiels qui servent de points repère pour classer un symptôme donné. Chaque chapitre est composé d'un rappel de la référence concernée suivi de tableaux cliniques où se manifeste

131- gera: 23839/di/ra

CLINICAL OBSERVATION OF 62 CASES OF INSOMNIA TREATED BY AURICULAR POINT IMBEDDING THERAPY. YANG CANGLIANG. *journal of traditional chinese medicine.* 1988;8(3):190-2 (eng).

En fonction des critères d'auriculothérapie et de la différenciation des syndromes en MTC, une composition à base de Semen Vaccariae est fixée sur les points auriculaires choisis suivant les différentes étiologies d'insomnie : Déficit de Yin du Foie et du Rein, Vide du Coeur et de la Rate, Humidité-Chaleur du Coeur, Excès de Feu par déficit de Yin. Par ailleurs, 2 groupes témoins sont traités. Des pilules de la préparation d'environ 7mm2 sont appliquées aux points auriculaires et massées 2 à 3mm chaque soir au coucher; les 2 côtés sont traités 2 à 3 fois par semaine, un protocole comprend 10 traitements. Avec 95,16% d'efficacité le groupe thérapeutique est

132- gera: 26002/di/el

INSOMNIA (BU MEI). CHEN JIRUI ET AL. *in acupuncture case histories from china, eastland press, seattle.* 1988;:62-64 (eng).

133- gera: 26023/di/el

EXCESSIVE SLEEPING (NARCOLEPSY) (DUO MEI ZHENG). CHEN JIRUI ET AL. *in acupuncture case histories from china, eastland press, seattle.* 1988;:123-125

(eng).

134- gera: 33739/di/ra

[THE VETERAN PHYSICIAN CHEN YAOTING'S EXPERIENCE IN TREATING SOMNOLENTIA : A FEW EXAMPLES]. CHEN QISHI ET AL. *jiangsu journal of tcm.* 1988;9(4):1 (chi).

135- gera: 51839/di/ra

[DR. WU SHI YUAN'S EXPERIENCE IN USING FIVE METHODS OF TREATING INSOMNIA. WU ZHO JIAN. *zhejiang journal of traditional chinese medicine.* 1988;23(11):483-84 (chi).

136- gera: 53004/di/ra

[EFFECTS OF FRUCTUS MORI ON SENILE CONSTIPATION AND SOMNIPATHY]. WENG MINGHAN ET AL. *journal of traditional chinese medicine.* 1988;29(11):40. (eng).

137- gera: 53048/di/ra

[TREATMENT OF INTRETABLE INSOMNIA MAINLY WITH TONGYAN HUOXUE TANG IN 112 CASES]. SHU SHENG LIANG. *journal of traditional chinese medicine and chinese materia medica of jilin.* 1988;4:15. (chi).

138- gera: 53442/di/ra

[RECENT DEVELOPMENTS OF THE TREATMENT OF INSOMNIA BY TCM]. LAIO HUIMING. *shaanxi traditional chinese medicine.* 1988;9(10):474. (chi).

139- gera: 80144/di/el

L'INSOMNIE. X. in *cliniques d'acupuncture, nanjing et beijing.* 1988;:70-1 (fra).

140- gera: 80441/di/ra

SCHLAFSTORUNGEN UND IHRE BEHANDLUNG MIT AKUPUNKTUR UND AKUPRESSUR. MENG A. *deutsche zeitschrift fur akupunktur.* 1988;6:141. (deu*).

141- gera: 80525/di/ra

TREATMENT OF INSOMNIA WITH ACUPUNCTURE AT SHENMEN POINT IN 2,485 CASES. CHENG LONGGANG. *chinese journal of acupuncture and moxibustion.* 1988;1(1-2):43-4 (eng).
7C. Points secondaires : 12VB, 36E. Vide Coeur + Rte : 6Rte, 7MC. Vide Coeur + VB : 20VG, 40VB. Vide Reins : 3Rn, 6Rn. Atteinte de l'Estomac : 12VC, 6MC. Feu du Foie : 2F, 17V, 20VG. Tonification ou dispersion selon le syndrome. Séance de 20 à 40mn. Une séance / jour. Moxibustion au 7C ou 20VG 20mn en cas de Vide, juste avant le coucher. Diminution et arrêt des hypnotiques. Insomnie simple : guérison de 74,65%, en moyenne 29 jours de traitement. Insomnie secondaire : guérison 41,18% en 167 jours.

142- gera: 82681/di/el

INSOMNIA. NANJING COLLEGE OF TCM. in *acupuncture treatment of common diseases based upon differentiation of syndrome.* 1988;:133-39 (eng).

143- gera: 153405/di/ra

ACUPUNCTURE ET SOMMEIL. AVELLANEDA A., *annales de la societe d'acupuncture d'aquitaine.* 1988;2:11-21 (fra).

144- gera: 25705/di/ra

[OBSERVATION ON EFFICACY AND EXPERIMENTAL STUDY WITH COMPOUND SUANZAOREN ANSEN CAPSULES FOR INSOMNIA]. MA YOU DU. *chinese journal of integrated traditional and western medicine.* 1989;9(2):83-85 (chi*).

145- gera: 26192/di/el

INSOMNIE. INSTITUT DE MTC DE TIANJIN. in *seca et al, acupuncture en medecine clinique, decarie, montreal.* 1989;:32-37 (fra).

146- gera: 26901/di/ra

[INITIAL ANALYSIS FOR THE REALIZATION TO DREAM IN NEIJING]. DONG SHANGPU ET AL. *journal of beijing*

college of traditional chinese medicine. 1989;(12)2:9-16 (chi).

147- gera: 27874/di/el

PROFICIENCY IN PENETRATING POINTS WITH THE GOLD NEEDLE. YE XINQING. *essentials of contemporary chinese acupuncturists' clinical experiences, foreign lang.* 1989;:79-84 (eng).

148- gera: 27879/di/el

PRIORITY FOR QI REGULATION AND MAGIC USE OF NEW POINTS. BI FUGAO. *essentials of contemporary chinese acupuncturists' clinical experiences, foreign lang.* 1989;:140-45 (eng).

149- gera: 27920/di/el

REINFORCING AND REDUCING MANIPULATIONS AND THE PROPERTIES OF THE POINTS, INVESTIGATION OF NEW POINTS AND EMPHASIS ON DIFFERENTIATION ACCORDING TO THE THEORY OF MERIDIANS AND COLLATERALS. GAO ZHENWU. *essentials of contemporary chinese acupuncturists' clinical experiences, foreign lang.* 1989;:500-14 (eng).

150- gera: 29749/di/cg

CLINICAL OBSERVATION IN EFFECT OF TREATMENT OF EAR-PRESSURE ON INSOMNIA. YAN QINGMING ET AL. *international symposium on diagnosis and treatment with auricular points, beijing.* 1989;:143-4 (eng).

151- gera: 34104/nd/re

[INITIAL ANALYSIS FOR THE REALIZATION TO DREAM IN NEIJING]. SHANGPU D. *journal of beijing college of tcm.* 1989;12(2):9-16 (chi).

152- gera: 34647/nd/re

[122 CASES OF BABY MORBID NIGHT CRYING TREATED BY CHIROPRACTICE]. JIANG L ET AL. *shandong journal of tcm.* 1989;5:24. (chi).

153- gera: 35240/di/ra

[TREATMENT OF NARCOLEPSY BY ZHANG JIGAO]. ZHANG KONG. *new journal of traditional chinese medicine.* 1989;21(9):20-1 (chi).

154- gera: 50408/di/ra

[ADJUST AND CONTROL SPORTSMEN'S SLEEP BEFORE COMPETITION BY QI GONG REMOTE INFORMATION]. SUNG XIN HONG XIA SHUNAG QIUAN. *qigong and sport.* 1989;5:22. (chi).

155- gera: 80302/di/ra

"DOCTEUR, JE NE DORS PAS". AUTEROCHE B. *folia sinotherapeutica.* 1989;2:4-8 (fra).

156- gera: 80637/di/ra

10 CASES OF SOMNAMBULISM TREATED WITH COMBINED ACUPUNCTURE AND MEDICINAL HERBS. LI JIARONG. *journal of traditional chinese medicine.* 1989;9(3):174-75 (eng).

Les 10 cas présentant des signes de Vide de Yin, associé à Vide de Yang (6 cas), de syndrome Chaleur + Dépression du Foie (3 cas). 1) 6MC et 7MC. 2) 7C et 3Rn. Séance de 30mn. Une séance par jour. Utilisation en alternance des points du groupe 1 et 2. Séries de 15 séances espacées de 3 à 5 jours. Association à phytothérapie. Guérison de 8 cas, 1 amélioration et 1 échec. Traitement minimum : 30 séances, maximum 60 séances.

157- gera: 80720/di/ra

THE THERAPEUTIC EFFECT OF MULBERRY IN THE TREATMENT OF CONSTIPATION AND INSOMNIA IN THE ELDERLY. WENG MINGHAN ET AL. *journal of traditional chinese medicine.* 1989;9(2):93-4 (eng).

158- gera: 80790/di/ra

INTERFERENZA DELLA PATOLOGIA DELL'APPARATO DIGERENTE SUL RITMO SONNO-VEGLIA. VISCONTI M ET AL. *rivista italiana di agopuntura.* 1989;65:85-105 (ita).

159- gera: 81269/di/ra

LES TROUBLES DU SOMMEIL DU NOURRISSON : TRAITEMENT PAR STIMULATION ELECTRO-ACUPUNCTURALE. STEPHAN JM. *meridiens*. 1989;87:149-67 (fra*).

Les troubles du sommeil du nourrisson, motif fréquent de consultation, peuvent bénéficier d'un traitement électro-acupunctural associant stimulation cutanée et électroacupuncture des "fosses du Qi" : Neiguan (MC6), Daling (MC7), Shenmen (C7), Taiyuan (P9), Zhaohai (R6), Shenmai (V62), Yintang (HM1) et Baihui (VG20). Après un rappel de définition de l'insomnie selon la médecine occidentale, puis selon la médecine traditionnelle chinoise, l'étude commentera le choix des points en fonction des textes, le tout appliqué à la physiologie propre du nourrisson. Auparavant, six observations auront permis d'illustrer les différents propos.

160- gera: 29093/di/cg

TREATMENT OF 55 CASES OF INSOMNIA BY ACUPUNCTURE. JIN CHEN. *proceedings of the fifth international congress of chinese medicine,berkeley*. 1990;:91. (eng).

161- gera: 29513/di/el

INSOMNIA. SHANG XIANMIN ET AL. *in clinical experiences, new world press, beijing*. 1990;:66-70 (eng). Traitement par phytothérapie.

162- gera: 62672/di/ra

[36 CASES OF INSOMNIA TREATED BY ACUPUNCTURE]. LIU YINGCAI. *shandong journal of traditional chinese medicine*. 1990;6:23-30 (chi).

163- gera: 62819/di/ra

[TREATMENT OF NARCOLEPSY WITH DECOCTION FOR AWAKENESS]. GUO HUIJIN ET AL. *liaoning journal of traditional chinese medicine*. 1990;14(10):30-2 (chi).

164- gera: 63903/di/ra

[EAR-PRESSURE THERAPY FOR INSOMNIA]. LAI XINPING. *shaanxi traditional chinese medicine*. 1990;11(6):273 (chi).

165- gera: 81273/di/ra

INSOMNIA TREATED BY AURICULAR PRESSING THERAPY. LIAN NAN ET AL. *journal of tcm*. 1990;10(3):174-75 (eng). Traitement de 160 patients. 80 sont traités par mise en place de Semen Vaccariae au niveau des points auriculaires Shen Men, Sympathique, Coeur, Foie, Endocrine, Vertèbres Cervicales et Subcortex. Pressions effectuées par le patient 1h avant le coucher. Changement des graines tous les 3 jours. Traitement de 30 jours. Groupe de contrôle de 80 patients avec Diazepam 10mg. Efficacité supérieure de l'acupression.

166- gera: 81539/di/ra

LES CADRES CLINIQUES DE LA SOMNOLENCE DIURNE EXCESSIVE SHI MIAN ZHENG. AUTEROCHE B. *folia sinotherapeutica*. 1990;5:10-3 (fra).

167- gera: 81578/di/ra

THE TREATMENT OF CHRONIC INSOMNIA WITH ORIENTAL HERBS. TOWNSEND P. *australian journal of acupuncture*. 1990;12:12-4 (eng).

168- gera: 81699/di/el

INSOMNIA. WANG GUOCAI ET AL. *in chinese massage, publishing house of shanghai college of tcm, shanghai*. 1990;:622-23 (eng).

169- gera: 82167/di/cg

LES TROUBLES DU SOMMEIL DU NOURRISSON : TRAITEMENT PAR STIMULATION ELECTRO-ACUPUNCTURALE. STEPHAN JM. *2eme congres mondial d'acupuncture et moxibustion, paris*. 1990;:105. (fra).

170- gera: 82420/di/cg

OBSERVATION OF ACUPUNCTURE TREATMENT FOR 55 CASES OF INSOMNIA. CHEN JIN. *2eme congres mondial d'acupuncture et moxibustion, paris*. 1990;:275. (eng).

1) Vide Qi Coeur et Rate : tonification 15V, 20V, 6MC, 6Rte. 2) Dissociation Rein-Coeur : tonification 23V et 3Rn, dispersion 6MC et 8MC. 3) Chaleur Foie et VB : tonification 18V, 19V, 3F, 2F, 6M. 4) Déséquilibre Estomac-Rate : dispersion 12VC, 36E, 6MC, tonification 6Rte. Association dans les 4 syndromes au PA Shen Men (aiguille à demeure dans les cas sévères). Amélioration nette dans 85% des cas.

171- gera: 82564/di/cg

L'INSOMNIE: APPROCHE SEMIOLOGIQUE ET THERAPEUTIQUE. DEROC D. *journees europeennes d'acupuncture, strasbourg*. 1990;:10-15 (fra).

L'auteur se propose de faire une analyse sémiologique du symptôme "insomnie" selon différents critères de différenciation clinique faciles à utiliser en pratique quotidienne. Les propositions thérapeutiques seront calquées sur les différents modes d'expressions cliniques de ce symptôme.

172- gera: 82789/di/ra

INSOMNIA TRATTATA CON AURICOLOPRESSIONE. LIAN NAN ET AL. *rivista italiana di medicina tradizionale cinese*. 1990;6:12. (ita).

173- gera: 83214/di/ra

THE APPLICATION OF BLOODLETTING IN ACUPUNCTURE THERAPY. XU RONGSHENG. *journal of traditional chinese medicine*. 1990;10(4):274-75 (eng).

Rapport de 4 cas cliniques traités par saignée. 1) Migraine (Fleur de Prurier au niveau de Tai Yang). 2) Céphalée post-traumatique (40V). 3) Phlébite (saignée à l'extrémité supérieure et inférieure du cordon veineux enflammé). 4) Insomnies (Fleur de Prurier au niveau du yin Tang).

174- gera: 83246/di/ra

AN SHEN TANG/WAN. LA DECOCTION, LES PILULES ANTI-STRESS, CALMANTES DE L'ESPRIT. VANGERMEERSCH L ET AL. *folia sinotherapeutica*. 1990;6:8-10 (fra).

175- gera: 109938/di/ra

L'INSOMNIE. FRIMAT M. *glem*. 1990;1(2):5 (fra*). L'auteur, bien connu de ceux et celles qui ont suivi une formation d'acupuncture au GLEM, expose avec son langage coloré habituel une manière d'aborder le traitement de l'insomnie par l'acupuncture. Une évocation au passage est faite à l'auriculomédecine et sa contribution en ce domaine.

176- gera: 29208/di/ra

[THE CLINICAL STUDY OF SLEEPLESSNESS -THE QUESTIONNAIRE FACT OF ACUPUNCTURE AND MOXIBUSTION TREATMENTS-. X. *journal of the japan society of acupuncture*. 1991;41(1):87. (jap).

177- gera: 29253/di/ra

[A CASE SLEEPLESSNESS. X. *journal of the japan society of acupuncture*. 1991;41(1):93. (jap).

178- gera: 29620/di/el

INSOMNIA. GENG JUNYING ET AL. *in acupuncture and moxibustion, new world press, beijing*. 1991;:162-3 (eng).

179- gera: 35735/di/ra

ETUDE DE CINQ CAS CLINIQUES. GOURION A. *revue française de médecine traditionnelle chinoise*. 1991;145:59-66 (fra).

180- gera: 37240/nd/ra

[REFLEXOTHERAPY IN THE COMPLEX CORRECTION OF PSYCHOSOMATIC DISORDERS IN PATIENTS. PARTICIPANTS IN EMERGENCY WORK AT THE CHERNOBYL NUCLEAR POWER PLANT]. ROSHCHIN SL ET AL. *gig tr prof zabol*. 1991;10:1-3 (rus*).

181- gera: 37551/nd/ra

INSOMNIE ET ACUPUNCTURE (ETUDE ET REFLEXIONS

THEORIQUE A PROPOS D'UNE ETUDE DE 12 CAS REPERTORIES). BENHAMOU E. *memoire d'acupuncture, diu acupuncture, nice.* 1991;: (fra).

182- gera: 62324/di/ra
[ACUPUNCTURE FOR 62 CASES OF INSOMNIA]. YU KUANGSEN. *shanghai journal of acupuncture and moxibustion.* 1991;1:22. (chi).

183- gera: 63982/di/ra
[EAR POINT PRESSURE METHOD FOR 300 CASES OF INSOMNIA]. WU XIJIANG. *shanghai journal of acupuncture and moxibustion.* 1991;2:24 (chi).

184- gera: 65023/di/ra
[A TALK ON TREATMENT OF INSOMNIA FROM STOMACH THESIS]. XIE SHENGEAL. *beijing journal of traditional chinese medicine.* 1991;6:16 (chi).

185- gera: 65088/di/ra
[INSOMNIA AND RHIZOMA PINELLIAE]. LI JUNYUN. *new journal of traditional chinese medicine.* 1991;23(3):15 (chi).

186- gera: 65838/di/ra
[TREATMENT OF SLEEPLESSNESS BY MEDICINAL ADHESION ON EAR ACUPOINTS : A CLINICAL SUMMARY OF 200 CASES]. LIU AOSHUANG. *new journal of traditional chinese medicine.* 1991;23(4):36 (chi).

187- gera: 65927/di/ra
[OBSERVATION ON THERAPEUTIC EFFECTIVENESS FOR TREATMENT OF 54 CASES WITH INSOMNIA BY APPLICATION OF DRUG ON THE PALM OF THE HAND ACCORDING TO DIFFERENTIATION]. WU YUE-E ET AL. *jiangxi journal of traditional chinese medicine.* 1991;22(2):36 (chi).

188- gera: 66072/di/ra
[NIGHTMARE SYNDROME AND ITS TREATMENT]. YANG RUZHE ET AL. *shanghai journal of traditional chinese medicine.* 1991;9:6 (chi).

189- gera: 70179/nd/re
[REFLEXOTHERAPY IN THE COMPLEX CORRECTION OF PSYCHOSOMATIC DISORDERS IN PATIENTS. PARTICIPANTS IN EMERGENCY WORK AT THE CHERNOBYL NUCLEAR POWER PLANT]. ROSHCHIN SL ET AL. *gig tr prof zabol.* 1991;10:1-3 (rus*).
 The article contains an analysis of current medical techniques in the reflexotherapy (acupuncture in combination with needle application therapy) of the psychosomatic syndrome in 96 patients who had participated in the Chernobyl disaster control. The contributors worked out a set of biologically active points and areas, and described the peculiarities of the acupuncture therapeutic effects.

190- gera: 83318/di/ra
DIE BEHANDLUNG VON ZWEIUNDERT FÄLLEN VON SCHLAFLOSIGKEIT ÜBER EINE NADELUNG DES ORIGO ASCENDENTIS YANG ALS HAUPTFORAMEN. ZHANG RUNMIN ET AL. *chinesische medizin.* 1991;6(3):76-7 (deu*).
 [Acupuncture treatment of two hundred cases of insomnia using origo ascendens Yang, V62, as principal

191- gera: 84089/di/ra
TRATAMIENTO DEL INSOMNIO CON TERAPIA DE PRESION AURICULAR. LIAN NAN ET AL. *revista de la medicina tradicional china.* 1991;1(3):15-16 (esp).

192- gera: 84129/di/ra
TREATING NIGHTMARES BY DISSIPATING ECCHYMOSIS AND PACIFYING SPIRIT. CHEUNG CS. *abstract and review of clinical traditional chinese medicine.* 1991;1:25-6 (eng).
 Abstract from Wang Zhi Hong, Henan TCM journal, 1990, 4, 37.

193- gera: 84168/di/ra
LE INSONNIE BU MEI. MORANDOTTI R ET AL. *rivista*

italiana di medicina tradizionale cinese. 1991;6:38-42 (ita).

194- gera: 84511/di/ra
ETUDE DES CINQ CAS CLINIQUES. GOURION A. *revue francaise de medecine traditionnelle chinoise.* 1991;145:59-66 (fra).

195- gera: 84607/di/ra
[A STATISTICAL STUDY OF INDEFINITE COMPLAINTS IN TYPICAL PAIN DISEASES TREATED WITH ACUPUNCTURE AND MOXIBUSTION. A COMPARISON OF THE EFFECTIVENESS BETWEEN MALE AND FEMALE]. CAI YUAN WANG ET AL. *journal of the japan society of acupuncture.* 1991;41(3):316-9 (jap*).
 Authors examined indefinite complaints accompanying headache, neck, shoulder or low back pains. Masked Depression questionnaire (Inoue et al.) was conducted on outpatients of Osaka Medical College whose chief complaints were above mentioned painful disorder. In the cases with low back pain, female patients showed a less number of complaints. The complaints seen more often in the male group than in the female group were sleep disorder and disturbance in the stomach and intestines. It is noted that male patients often reported psychological problems such as "feeling groggy", "having no willingness to do anything", or "being anxious about his health". Female patients often complained of headache. Unexpected difference was found in the decline of sexual desire, that was more frequent in the female group than in the male (50% of the female and 30% of the male).

196- gera: 35648/di/ra
AN OBSERVATION ON THE THERAPEUTIC EFFECT OF ACUPUNCTURE IN TREATING 50 CASES OF INSOMNIA. WANG YUKANG. *international journal of clinical acupuncture.* 1992;3(1):91-3 (eng).
 Insomnia is a functional disturbance characterized by frequent instances of difficulty in falling asleep. The author of this article selected two points, i.e. Baihui (Du 20) and Sishenchong (extra 6) to treat this disorder and achieved fairly satisfactory therapeutic results. A brief summary follows.

197- gera: 35898/di/ra
APPLICATION OF CHINESE HERBAL FORMULAS (YI GAN TANG) AND SCIENTIFIC RESEARCH (XXIII) : BUPLEURUM FORMULA AND BUPLEURUM AND CHIH-SHIH FORMULA (SI NI TANG). HONG-YEN HSU. *international journal of oriental medicine.* 1992;17(2):114-20 (eng).

198- gera: 36013/di/ra
TREATMENT OF INSOMNIA AND SLEEPINESS BY ALTERNATELY INVIGORATING AND REDUCING LEFT OR RIGHT SHENMAI AND ZHAOHAI. XU YING. *international journal of clinical acupuncture.* 1992;3(3):286-7 (eng).
 62V et 6Rn. En cas d'insomnie, tonification du 6Rn et dispersion du 62V; inversement, en cas d'hypersomnie, utiliser en alternance 62V droit + 6Rn gauche et 62V gauche + 6Rn droit. Dispersion : insertion rapide sans douleur, puis rotation rapide pour entrainer distension locale. Tonification : insertion superficielle, puis l'aiguille est poussée à 1,5cun, puis rotation lente jusqu'à obtention d'une distension locale; au retrait de l'aiguille, pression avec le doigt pour boucher le point. Séance de 30mn, manipulation 30 secondes toutes les 5mn.

199- gera: 36022/di/ra
SCHLAFSUCHT NACH DEM ESSEN. LI ZHIJIAN. *chinesische medizin.* 1992;7(2):46-8 (deu*).
 A case study of striking somnolence consecutive to the intake of food gives rise to a review of pertinent case histories in classical texts of CM.

200- gera: 36131/di/ra
[CLINICAL TRAINING IN ACUPUNCTURE AND MOXIBUSTION FOR INSOMNIA AND DEPRESSION]. X. *journal of the japan society of acupuncture.* 1992;42(1):64. (jap).

201- gera: 36315/di/ra
L'INSOMNIE. DIAGNOSTICS ET TRAITEMENTS DIFFERENTIELS. MARIE E. *medecine chinoise et*

medecines orientales. 1992;2:15-26 (fra*).

Insomnia is a very common disease in western countries. It can be caused by excessive emotions, improper diet, imbalance exertion and rest, poor constitution, chronic illness or any factor leading to a disorder of Yin/Yang. The Heart, palace of the Shen, is the main organ involved also affecting the Liver, Spleen and Kidneys, according to the differentiation of TCM. aetiology, pathology, diagnosis and treatment. Acupuncture, herbal treatment and food therapy of six different patterns are developed in this article. Classical and experimental formula are also included.

202- gera: 36397/di/ra

SHONISHIN : JAPANESE PEDIATRIC ACUPUNCTURE. MIKI SHIMA. *american journal of acupuncture.* 1992;20(4):327-36 (eng).

The history, diagnostic and treatment techniques of Shonishin, the Japanese acupuncture system used for infants and children, is presented. This system is applicable for children from one month to 10 years of age and incorporates the unique index finger vein diagnostic system enabling the practitioner to ascertain conditions in infants. Included are specific treatments for numerous childhood disorders including asthma, colic, eczema, fever, hives, hyperactivity, insomnia, teething, chronic rhinitis, urinary tract infections, etc.

203- gera: 36429/di/ra

INSOMNIE - BU MEI. CAS CLINIQUE D'ACUPUNCTURE. CHEN JIRUI ET AL. *asclepios.* 1992;4:13-4 (fra*).

Lin, sexe féminin, 62 ans. La patiente se plaignait depuis 30 ans d'insomnie, et déclarait ne pas arriver à dormir plus de 3 heures chaque nuit. Son état fut diagnostiqué comme étant de la neurasthénie. Plusieurs hypnotiques furent essayés pour induire le sommeil, mais aucun traitement n'eut de succès. La patiente se tourna alors vers

204- gera: 36601/di/cg

TREATMENT ON 55 CASES OF INSOMNIA BY ACUPUNCTURE. JING CHEN. *wfas international symposium on the trend of research in acupuncture, roma.* 1992;:159 (eng).

205- gera: 36696/di/cg

TREATMENT OF INSOMNIA BY THE "PLUM BLOSSOM" NEEDLE THERAPY (abstract). NOVARA E ET AL. *wfas international symposium on the trend of research in acupuncture, roma.* 1992;:232 (eng).

Traitement de 19 patients sans prescription du protocole.

206- gera: 10033/di/cg

CLINICAL STUDY ON TREATMENT OF NEUROSIS AND NIGHT-TERRORS OF CHILDREN WITH FOOT THERAPEUTIC PAD FOR NEUROSIS. ZHENZHUANG W. *third world conference on acupuncture.* 1993;:484. (eng).

207- gera: 13795/di/ra

INTERPRETAZIONE PSICOSOMATICA DEL SOGNO IN MTC. MINELLI E. *rivista italiana di agopuntura.* 1993;77:39-57 (ita).

208- gera: 38707/di/ra

[INSOMNIA TREATED WITH AURICULAR-PLASTER THERAPY : REPORT OF 100 CASES]. REN XIAO-MING. *zhejiang journal of traditional chinese medicine.* 1993;28(10):464 (chi).

209- gera: 47287/di/ra

[INSOMNIA TREATED WITH AURICULAR PLASTER THERAPY IN 218 CASES]. ZHANG XIAO-FEN. *chinese acupuncture and moxibustion.* 1993;13(6):17 (chi*).

Two hundred eighteen cases of insomnia were treated by auricular plaster therapy, with seeds of *Vaccaria segetalis*. The auricular points, Heart, Shenmen, Occiput and Brain were selected. The seeds were changed once every 5-6 days, and 5-7 treatments made a course. Compared with the application of Western medicine, it was shown that the effect of auricular plaster therapy was significantly better than that of medication ($P < 0.01$). (Voir

210- gera: 47928/di/ra

[27 CASES OF CURING PERSISTENT INSOMNIA THROUGH INCREASING VITAL AND POSITIVE ENERGY]. ZHANG YUANHONG. *the practical journal of integrating chinese with modern medicine.* 1993;6(12):750 (chi).

211- gera: 48685/di/ra

LES REVES DANS LE DIAGNOSTIC EN MTC. MA FAN. *medecine chinoise et medecines orientales.* 1993;4:47. (fra).

212- gera: 48842/di/me

LES INSOMNIES DANS LES SYSTEMES REFERENTIELS DE LA MEDECINE TRADITIONNELLE CHINOISE (MISE A JOUR). NGIEM HEANG LY. *d i u d'acupuncture, bordeaux 2.* 1993;:69 (fra).

La médecine traditionnelle chinoise est une médecine énergétique dans laquelle la maladie résulte d'un déséquilibre entre les différents composants de cette Energie (Qi). La diversité des formes de l'Energie justifie l'existence des systèmes référentiels qui servent de points de repère pour classer un symptôme donné. Chaque chapitre est composé d'un rappel de la référence concernée suivi de tableaux cliniques où se manifeste l'insomnie.

213- gera: 10857/di/ra

UNE INSOMNIE YANGQIAO ANCIENNE. MICHAU A. *revue francaise d'acupuncture.* 1994;77:73-4 (fra).

Traitement d'une insomnie ancienne avec endormissement correct par le point clé du Yangaiao mai, shenmai

214- gera: 27221/di/ra

[A BRIEF INVESTIGATION ON HISTORY OF RECOGNITION OF DREAMS IN TCM]. BILLIANG H. *chinese journal of medical history.* 1994;24(4):244 (chi).

215- gera: 31286/di/ra

[INSOMNIA TREATED WITH SHALLOW ACUPUNCTURE : CLINICAL OBSERVATION OF 58 CASES]. YONGREN W ET AL. *fujian journal of tcm.* 1994;25(4):26 (chi).

216- gera: 45223/nd/re

[EFFECT OF OREN-GEDOKU-TO ON CHANGES IN HEXOBARBITAL-INDUCED SLEEPING TIME IN CHLORPROMAZINE-TREATED MICE]. SASAKI K ET AL. *yakugaku zasshi.* 1994;114(6):431-4 (jap*).

The effects of Oren-gedoku-to on the hypnotic duration induced by hexobarbital, and on the change of this duration in chlorpromazine-treated mice were investigated. Single dose of Oren-gedoku-to (1.0 or 2.0 g/kg, p. o.) or chlorpromazine (10 mg/kg, p. o.) prolonged the hexobarbital hypnosis time. And the simultaneous dose of chlorpromazine (6.0 mg/kg, p. o.) and Oren-gedoku-to (1.0 g/kg, p. o.) indicated the equal effect for the administration of chlorpromazine (10.0 mg/kg, p. o.) alone. Although the mechanism of the action remains to be unknown, administration of Oren-gedoku-to in combination with chlorpromazine seems to be useful from the

217- gera: 48861/di/ra

INSOMNIA TREATED WITH AURICULAR-PLASTER THERAPY IN 218 CASES. ZHANG XIAOFEN. *world journal of acupuncture moxibustion.* 1994;4(1):32-3 (eng).

218 cases of insomnia were treated by auricular plaster therapy with seeds of *vaccaria segetalis*. The auricular points heart, Shenmen, occiput and brain were selected. The results showed that 136 cases were cured, 76 markedly improved and 6 no effect. The effect of this therapy was significantly better than that of medication ($P < 0.01$) in comparison with the application of western medicine.

218- gera: 49715/di/ra

124 CASES OF DYSSOMNIA TREATED WITH ACUPUNCTURE AT SISHENCONG POINTS. XIE LEYE ET AL. *journal of traditional chinese medicine.* 1994;14(3):171-3 (eng).

Dyssomnia is a syndrome consisting mainly in persistent difficulty in falling asleep, dreamfulness, and early or frequent waking, leading to dizziness, heaviness in the head, amnesia and inability of mental concentration. This study consisted of

124 patients (57 males, 67 females, aged 21-48 years) with a morbid course ranging from 1 week to 4 years, averaging 5 months. They were needled at Sishencong (Extra 6) and Baihui (GV-20) with adjuvant points Shenmen (HT-7) and Taixi (K-3). The treatment was administered daily; 7-10 sessions constituted one course, with a rest interval of 3 days between courses. Results: Among the 124 cases, 73 cases (59%) were cured (recovered to normal sleep with disappearance of all accompanying symptoms), 26 cases (21%) markedly effective, 10 cases (8%) effective and 15 cases (12%) ineffective, including 7 cases that did not finish the first course of treatment; the total effective rate was 88%. Among the cured and markedly effective cases, the length of treatment

219- gera: 56109/di/ra
INSOMNIA. JI XIAO-PING. **international journal of clinical acupuncture.** 1994;5(4):435-7 (eng).

220- gera: 71669/di/re
L'EFFET DE L'ACUPUNCTURE DANS LE TRAITEMENT DE L'INSOMNIE. MONTAKAB H ET AL. **schweiz med wochenschr suppl.** 1994;62:49-54 (fra*).
[THE EFFECT OF ACUPUNCTURE IN THE TREATMENT OF INSOMNIA. CLINICAL STUDY OF SUBJECTIVE AND OBJECTIVE EVALUATION]. The sleep-wake cycle is the most important circadian rhythm in man and thus constitutes an excellent indicator of internal equilibrium and of health. Sleep disorders, and particularly insomnia, affect a great percentage of the population. In daily practice, an inappropriate treatment may transform a bad sleeper into an insomniac dependent on pharmaceuticals for life. It is therefore necessary to give priority to non- chemical treatments in the management of insomnia. Acupuncture, which offers a personalized treatment, is particularly indicated for reharmonizing a disturbed sleep-wake cycle. Furthermore, there is an interesting similarity between the 5000-year-old theoretical basis of Chinese medicine and the recent scientific discoveries about man's internal rhythms. Clinical and statistical studies of the effects of acupuncture on insomnia are rare and evaluate only the subjective appreciation of sleep. Objective analysis of sleep by polysomnography permits evaluation of sleep architecture and visualizes the site and depth of action of the therapeutic method. Such studies have only been conducted in relation to pharmaceutical treatments. No such study has been carried out for acupuncture. A scientific and objective evaluation of the effects of acupuncture on insomnia by polysomnography could be not only of academic but mainly of great practical interest. If the efficiency of acupuncture is thus verified, this method could be integrated and proposed along with other classical therapeutic

221- gera: 82595/di/ra
DEBORDEMENT DE L'ENERGIE PERVERSE ET MANIFESTATION DES REVES. NGUYEN VAN NGHI ET AL. **revue francaise de mtc.** 1994;163:132-4 (fra).

222- gera: 87476/di/ra
[EAR ACUPUNCTURE THERAPY FOR INSOMNIA]. DI LING. **shaanxi journal of traditional chinese medicine.** 1994;15(12):549 (chi).

223- gera: 88880/di/ra
[EFFECT OF CURDIOUE ON BRAIN ELECTRICAL ACTIVITY OF SLEEP IN CAT]. HAO HONGQIAN ET AL. **chinese traditional and herbal drugs.** 1994;25(8):423 (chi).

224- gera: 90192/di/ra
[TREATMENT OF SOMNIPATHY BY NEEDLING SI SHENG CHONG: A STUDY OF 124 CASES]. JIE LEQING ET AL. **new journal of tcm.** 1994;26(6):31 (chi).

225- gera: 103969/di/ra
NIGHT CRYING IN INFANTS TREATED BY ACUPUNCTURE . LIU BAISHENG. **journal of chinese medicine.** 1994;46:38 (eng).

226- gera: 50916/di/ra
[THE TREATMENT OF NARCOLEPSY WITH TCM]. HONGBIN Z. **china journal of traditional chinese medicine**

and pharmacy. 1995;10(6):35 (chi).

227- gera: 54147/di/ra
[CLINICAL STUDY OF SENILE INSOMNIA TREATED WITH RADIX SALVIAE PLUS CEREBROLYSIN]. ZHOU JIANXUAN ET AL. **journal of traditional chinese medicine.** 1995;36(2):92 (eng).

228- gera: 54269/di/re
L'AUTOMASSAGE NOCTURNE CONTINU D'UN POINT D'ACUPUNCTURE MODIFIE LE SOMMEIL DE SUJETS SAINS . BUGUET A ET AL. **neurophysiologie clinique.** 1995;25(2):78-83 (fra).
Afin d'analyser les effets hypnogènes de l'automassage du point 7 coeur d'acupuncture le sommeil nocturne de six volontaires sains (27,8 ± 1,6 ans) a été étudié par polygraphie de 23 h à 7 h, après une nuit d'adaptation au laboratoire. Une première session de 2 nuits consécutives a été analysée avec le système des cônes PEBA (polyether block amides Isocones) soit en application active (AA, point 7 coeur), soit en application placebo (AP, dos de la main). L'application inverse a été analysée 2 semaines plus tard, l'étude étant randomisée, en double- aveugle et selon un ordre de passage équilibré. L'organisation des activités cycliques biphasiques électroencéphalographiques (CAP : cyclic alternating patterns) a été analysée au cours du sommeil orthodoxe (stades 1 à 4). L'efficacité du sommeil a augmenté en AA, l'éveil diminuant au profit d'un accroissement du temps de sommeil total lié à celui du sommeil orthodoxe. Le nombre de CAP a décru en AA, ainsi que le nombre de séquences de CAP et le taux de CAP rapporté au temps de sommeil total et à la durée du sommeil lent profond. L'application des cônes au point 7 coeur chez des sujets sains a donc induit une diminution de l'éveil

229- gera: 54375/nd/re
COLUMBIN ISOLATED FROM CALUMBAE RADIX AFFECTS THE SLEEPING TIME OF ANESTHETIZED MICE. . WADA K ET AL. **biol pharm bull.** 1995;18(4):634-6 (eng).
In a screening series of bioactive components in edible and medicinal plants, we found that Calumbae Radix (Colombo root, 1% powdered feed, for 5 d) and its component, columbin (20-40 mg/kg/d, for 5 d, orally), shortened the sleeping time induced by a urethane and alpha-chloralose mixture and prolonged the sleeping time induced

230- gera: 55498/di/ra
REVES REPETITIFS ET DESEQUILIBRES ORGANIQUES SELON LA MTC. 1. CHEZ DES SUJETS HOSPITALISES. SAMSON H ET AL. **meridiens.** 1995;105:99-114 (fra*).
Résumé. - Intéressés par les implications sur le diagnostic, les chercheurs ont tenté de vérifier l'hypothèse tirée des textes anciens de la Médecine Traditionnelle Chinoise selon laquelle les rêves répétitifs sont corrélés aux pathologies organiques. Ils ont étudié les rêves de 80 patients hospitalisés pour des pathologies typiques en médecine occidentale. Les résultats ne confirment pas l'hypothèse principale. L'étude révèle un problème méthodologique majeur : celui de la correspondance des diagnostics d'un modèle médical à l'autre. Toutefois, les observations chinoises ancestrales quant aux thèmes oniriques récurrents sont confortées de même que certaines

231- gera: 55499/di/ra
REVES REPETITIFS ET DESEQUILIBRES ORGANIQUES SELON LA MTC. 2. CHEZ DES CONSULTANTS EXTERNES DU SERVICE D'ACUPUNCTURE. SAMSON H ET AL. **meridiens.** 1995;105:107-14 (fra*).
Résumé.- Cette étude met en corrélation trois ensembles de données: l'état de santé selon la Médecine Traditionnelle Chinoise, les rêves répétitifs et le profil de personnalité selon le MMPI, dans le but de cerner la valeur sémiologique du rêve répétitif en Médecine Traditionnelle Chinoise. Elle porte sur 22 patients du service d'acupuncture du CHU de Nîmes, qui ont tenu un - journal de rêves - pendant un mois. Les résultats supportent l'hypothèse d'un lien entre certains rêves répétitifs et les tableaux cliniques de la Médecine Traditionnelle Chinoise. Ils montrent aussi la prépondérance de la dépression dans le profil de personnalité des rêveurs et sa relation avec un thème répétitif précis: « Etre perdu... ». Se trouve confirmée la relation entre les cauchemars répétitifs et

la psychopathologie. Les auteurs envisagent ces résultats selon les points de vue distincts de la

- 232- gera: 55741/di/ra
TRATAMIENTO DE 57 CASOS DE INSOMNIO CON APLICACION DE MICROSANGRIA DEL APICE AURICULAR. ZENG WEI FENG. *el pulso de la vida*. 1995;5:22. (esp).
- 233- gera: 56199/di/ra
INSOMNIA. CHEN KE-ZHENG. *international journal of clinical acupuncture*. 1995;6(3):289-94 (eng).
- 234- gera: 67074/di/ra
[TREATMENT OF INSOMNIA BY REGULATING THE FUNCTION OF THE LIVER. AN ANALYSIS OF PROF. WANG QIAOCHU'S ACADEMIC THINKING]. XU JIAN ET AL. *shanghai journal of traditional chinese medicine*. 1995;7:1 (chi).
- 235- gera: 84917/di/ra
124 CASI DI ALTERAZIONE DEL SONNO TRATTATI CON AGOPUNTURA SUI PUNTI SISHECONG. LEYE X ET AL. *rivista italiana di medicina tradizionale cinese*. 1995;61(3):33-4 (ita).
Résumé à entrer.
- 236- gera: 86960/di/ra
ACUPUNCTURE TREATMENT FOR INSOMNIA AND ACUPUNCTURE ANALGESIA. YINLI LIN. *psychiatry and clinical neurosciences*. 1995;49:119-20 (eng).
- 237- gera: 86961/di/ra
SLEEP DISORDERS IN CHINESE CULTURE : EXPERIENCES FROM A STUDY OF INSOMNIA IN TAIWAN. YUE-JOE LEE. *psychiatry and clinical neurosciences*. 1995;49:103-6 (eng).
- 238- gera: 90461/di/ra
[PROF LIU SHICHANG'S EXPERIENCE ON THE TREATMENT OF INSOMNIA]. ZHONG JIAXI. *new journal of tcm*. 1995;27(9):12 (chi).
- 239- gera: 136251/di/ra
TRATAMIENTO DE 124 CASOS DE DISOMNIA MEDIANTE ACUPUNTURA EN LOS PUNTOS SESHENGONG. XIE LEYE ET AL. *revista de la medicina tradicional china*. 1995;5(1):12-14 (esp).
- 240- gera: 55183/di/ra
[120 CASES OF SLEEPNESS TREATED BY ACUPUNCTURE]. WU XUEZHANG. *journal of tcm*. 1996;37(6):344 (chi).
- 241- gera: 68254/di/ra
QUEL EST VOTRE DIAGNOSTIC ?. KESPI JM. *revue francaise d'acupuncture*. 1996;86:55-7 (fra).
- 242- gera: 56415/di/ra
ACUPUNCTURE TREATMENT OF INSOMNIA : CLINICAL OBSERVATION OF 288 CASES. GAO QING-WEI. *international journal of clinical acupuncture*. 1997;8(2):183-5 (eng).
- 243- gera: 56447/di/ra
THROUGH PUNCTURE TO HUATUOJIAJI POINTS PLUS WRIST-ANKLE NEEDLING IN TREATMENT OF INSOMNIA. YU GUO-XIONG. *international journal of clinical acupuncture*. 1997;8(1):69-71 (eng).
- 244- gera: 56702/di/ra
[TREATMENT OF SOMNIPATHY BY ELECTRICAL STIMULATION OF AURICULAR POINTS COMBINED WITH BODY ACUPUNCTURE IN NARCOTICS]. WEI YONG ET AL. *chinese acupuncture and moxibustion*. 1997;17(2):110 (chi).
- 245- gera: 66628/di/ra
[53 CASES OF SLEEPLESS TREATED BY AURICULA-

SEED-PRESSING]. JU LUSHENG. *shanghai journal of acupuncture and moxibustion*. 1997;16(3):15 (chi).

246- gera: 68399/di/ra
[45 CASES OF INSOMNIA TREATED BY ACUPUNCTURE]. XU GANG. *shanghai journal of acupuncture and moxibustion*. 1997;16(6):10 (chi).

247- gera: 72133/di/ra
EFEITO DA ACUPUNTURA NO TRATAMENTO DE PACIENTES PORTADORES DE SONO NAO REPARADOR. BRECHERET AP ET AL. *revista paulista de acupuntura*. 1997;3(2):72-8 (por*).

[Acupuncture effect in the treatment of patients with non-repairing sleep]. Sleep disorders, mainly the non-repairing type, are among the most frequent findings in clinical trials. They are often related to chronic pain in the musculoskeletal system, chronic fatigue, and emotion changes. Material- 23 individuals, 22 female and 1 male, with non-repairing sleep were studied. Mean time of complaint was 6 years and 4 months. Methods- were individually examined and treated according to their clinical and energy manifesto lions. All patients were submitted to BI-62 (Shenmai), SI-3 (Houxi) and K-3 (Taixi). According to the symptoms they presented, the following specific points were used: emotional disorders Du 20 (Baihui), Yin Tang, H7 (Shenmen) and Ren- 17 (Shanzhong); migraine GB-4 1 (Linqi), TB5 (Waiguan), and Tai Yang; catamenial migraine GB-3 (Shangguan), GB-4 Banyan), GB-5 (Xuanlu), Sp-6 (Sanyinjiao) and Ren-3 (Zhongji); epigastralgia St-36 (Zusanli), Ren-12 (Zhongwan), GI-4 (Hegu) and St-25 (Tianshu); cervicodorsal pain GB-21 (Jianjing), Du-14 (Dazhui), and Du-16 (Fengfu); lumbar pain BI-27 (Xiaochangshu), BI-28 (Pangguangshu), and BI-32 (Ciliao); knee pain - 4 curious local points, Liv-8 (Ququan), St-36 (Zusanli), and GB-34 (Yanglingquan). Two weekly acupuncture sessions with individual and sterilized needles were performed until each patient completed 15 sessions. Results - Statistic analyses of the results with Friedman, Kappa, and McNemar tests showed significant improvement regarding insomnia, fatigue after sleep, chronic pain, morning muscle pain, fatigue, calm sleep, and mood for leisure. Results did not show significant differences regarding emotional parameters. Conclusion - The methodology used in the treatment showed an important statistical improvement. Emotional manifestations did not show significant

248- gera: 87062/di/ra
INSOMNIA. BAO XIANG-YANG. *international journal of acupuncture*. 1997;8(4):385-88 (eng).

249- gera: 87077/di/ra
TREATMENT OF SLEEPWALKING BY NEEDLING BAIHUI. HU RUN-SHU. *international journal of acupuncture*. 1997;8(4):441-43 (eng).

250- gera: 87110/di/ra
QUICK TREATMENT OF STUBBORN INSOMNIA. CHEN YU-XIA. *international journal of acupuncture*. 1997;8(3):341-42 (eng).

251- gera: 67320/di/ra
ACUPUNCTURE TREATMENT OF A CASE OF PTOSIS AND INSOMNIA. CAI XIAO-GANG. *international journal of clinical acupuncture*. 1998;9(2):197-9 (eng).

252- gera: 67321/di/ra
TREATMENT OF INFANTILE NIGHT CRYING WITH ACUPUNCTURE AT YINTANG. LU FEI-XIAN. *international journal of clinical acupuncture*. 1998;9(2):201-2 (eng).
The author was taught in a clinic by the acupuncturist Professor Wang Dengqi, who was skilled in selecting Yintang (EX-HN 3) for the treatment of insomnia. This led the author to try to puncture Yintang in treating infantile night crying over the past five years. Success was achieved in almost every trial. This is the report of 85 cases.

253- gera: 68091/di/ra
LE TAO DU SOMMEIL. CHARLES G. tao yin. 1998;11:19-21 (fra).

254- gera: 68728/di/ra

[THE TREATMENT OF SENILE INSOMNIA WITH ACUPUNCTURE AND CHINESE HERBS. ABSTRACT]. FEN XIAOQIN. *acupuncture research*. 1998;22(3):193 (chi*). 117 cases of senile insomnia were treated by acupuncture combined with Chinese herbs. The result showed that 53 cases were cured, 13 cases significantly improved, 14 cases improved and 2 cases ineffective, the total effective rate was 97.5%, comparing with control group, there is a significant difference ($P < 0.05$), which indicated that acupuncture combined with Chinese herbs have a good clinical effect on senile insomnia.

255- gera: 69477/di/ra

[DIFFERENTIATION AND DIAGNOSIS OF COMMON SYMPTOMS IN TCM (4)- INSOMNIA AND AMNESIA]. ZHU WENFENG ET AL. *liaoning journal of traditional chinese medicine*. 1998;25(4):155 (chi).

256- gera: 69623/di/ra

[TREATMENT OF STUBBORN INSOMNIA BASED ON DIFFERENTIAL DIAGNOSIS OF SYNDROMES]. QIAN YANFANG. *journal of traditional chinese medicine*. 1998;39(11):658 (eng).

257- gera: 70295/di/ra

EXCES. LACOURTE B. *revue française d'acupuncture*. 1998;96:65-6 (fra).

Mme A., âgée de 29 ans, mariée et mère de deux enfants, de trois ans et un an, vient consulter pour une insomnie en février 1998.

258- gera: 72435/di/ra

EIN SCHWIERIGER FALL: HYPERTONIE UND SCHLAFSTÖRUNGEN. WULLINGER M. *chinesische medizin*. 1998;13(3):129-31 (deu*).

[The difficult treatment of a patient suffering from hypertension and insomnia]. The author describes the treatment of a patient suffering from high blood pressure and insomnia. The focus in therapy was put on sedating the Yang, strengthening the "middle" and transforming pituita. Finally, the treatment was successfully modified by combining sedation with warming of Yang.

259- gera: 74135/di/ra

[TREATMENT OF 40 CASES OF SENILE HYPOSOMNIA WITH SYMPTOM OF BLOOD STASIS BY TONGQIAO HUOXUE DECOCTION]. WU JIPING. *traditional chinese medicinal research*. 1998;11(4):19 (chi).

260- gera: 94392/di/ra

INSOMNIA. A SUMMARY OF RESULTS. WHITE A. *compmed bulletin*. 1998;1(4):1 (eng).

261- gera: 94393/di/ra

INSOMNIA. OPINION. IDZIKOWSKI C. *compmed bulletin*. 1998;1(4):2 (eng).

262- gera: 58603/di/ra

INSOMNIA: TREATMENT WITH AN MIAN TANG. LU YUBIN. *journal of chinese medicine*. 1999;59:28-9 (eng).

263- gera: 59079/di/re

AKUPUNKTUR UND SCHLAFLOSIGKEIT. MONTAKAB H. *forsch komplementarmed*. 1999;6(1):29-31 (deu*). [ACUPUNCTURE AND INSOMNIA]. 40 patients with primary difficulties in either falling asleep or remaining asleep were diagnosed according to the traditional Chinese medicine, allocated to specific diagnostic subgroups and treated individually by a practitioner in his private practice. The patients were randomized into two groups, one receiving true acupuncture, the other needled at nonacupuncture points for 35 sessions at weekly intervals. The outcome of the therapy was assessed in several ways, first and foremost by an objective measurement of the sleep quality by polysomnography in a specialized sleep laboratory, performed once before and once after termination of the series of treatments. Additional qualitative results were obtained from

several questionnaires. The objective measurement showed a statistically significant effect only in the patients who received the true acupuncture. The subjective, qualitative assessment was better in the proper treatment group than in the control group but was not calculated statistically for methodological reasons. Based on the results of this study, it can be concluded that true and individualized acupuncture indeed shows efficacy in primary sleep disorders. However, a direct influence by

264- gera: 59232/di/ra

[ACUPUNCTURE OF POINT BAIHUI (GV 20) FOR 78 CASES OF INSOMNIA]. FENG JUNXING. *shanghai journal of acupuncture and moxibustion*. 1999;18(3):13 (chi).

265- gera: 59233/di/ra

[OBSERVATION ON THE CURATIVE EFFECT OF FOOT-POINT MASSAGE ON INSOMNIA]. ZHU WENHAO ET AL. *shanghai journal of acupuncture and moxibustion*. 1999;18(3):14 (chi).

266- gera: 59324/di/ra

[SEASONS MUST BE KNOWN IN ADJUSTMENT OF DIET AND SLEEP]. SHEN HONG ET AL. *knowledge of ancient medical literature*. 1999;2:18 (chi).

267- gera: 59496/di/ra

[TREATING 52 CASES OF INSOMNIA WITH TINGXIAN GAOZHENGWUYOU SHANG]. LOU YOUGEN. *zhejiang journal of tcm*. 1999;34(6):241 (chi).

268- gera: 59547/di/ra

[EIGHT METHODS OF YUJIA SLEEPING QIGONG]. FU JIONG. *qigong and physical training*. 1999;7: (chi).

269- gera: 59548/di/ra

[SLEEPING GUIDING METHOD BY SU DONGPO]. FU JIONG. *qigong and physical training*. 1999;7: (chi).

270- gera: 59560/di/ra

[THE CURATIVE EFFECT OF QIGONG ON 98 NEARSIGHTED ADOLESCENTS]. SONG YONGQUAN. *qigong and physical training*. 1999;7: (chi).

271- gera: 59571/di/ra

[ABOUT SLEEPING QIGONG]. QIAN BIN ET AL. *qigong and physical training*. 1999;7: (chi).

272- gera: 59575/di/ra

[ON DREAMS]. X. *qigong and physical training*. 1999;7: (chi).

273- gera: 59756/di/ra

PROF. KONG LINGXU'S EXPERIENCE IN TCM TREATMENT OF ISOMNIA. PENG JIN. *journal of tcm*. 1999;19(3):175 (eng).

274- gera: 59873/nd/re

INSOMNIA IN THE ELDERLY. WOODWARD M. *aust fam physician*. 1999;28(7):653-8 (eng).

BACKGROUND: Insomnia is more common in older people. There are multiple causes of insomnia including medical and psychiatric illness, medications, specific sleep disorders, environmental and behavioural factors and age-related changes in sleep quality and sleep patterns. OBJECTIVE: This article reviews the causes of insomnia, assessment issues and management approaches, to provide the reader with a practical approach to the problem. A comprehensive assessment often reveals reversible factors. Non pharmacological approaches include sleep hygiene measures, increasing sunlight exposure and acupuncture. Only after use of these approaches should short term hypnotic treatment be commenced. DISCUSSION: With appropriate management, most older people

275- gera: 69546/di/ra

[CLINICAL OBSERVATION ON ACUPUNCTURE TREATMENT OF DISTURBANCE OF AWAKENING-SLEEP RHYTHM IN THE PATIENT OF APOPLEXY]. LI JIANQIANG

- ET AL. **chinese acupuncture and moxibustion**. 1999;19(1):11 (chi).
- 276- gera: 69548/di/ra
[**ACUPUNCTURE TREATMENT OF INTRACTABLE INSOMNIA IN 156 CASES OF NARCOTICS**]. WEN TUNQING. **chinese acupuncture and moxibustion**. 1999;19(1):17 (chi).
- 277- gera: 70349/di/ra
TRAITEMENT DE L'INSOMNIE PAR LES POINTS YUAN DES MERIDIENS DU PIED. YANG YUAN DE ET AL. **acupuncture traditionnelle chinoise**. 1999;1:96-100 (fra).
- 278- gera: 70607/di/sp
RETROUVER LE SOMMEIL DU JUSTE TOUT NATURELLEMENT. X. santerama. 1999;JUIL:2P (fra).
Avec mention de l'acupuncture : " Certains points ont un effet sédatif et hypnotique et permettent de libérer l'énergie bloquée dans certains organes. Consulter un acupuncteur pour programmer quelques séances hebdomadaires."
- 279- gera: 72892/di/ra
46 CASES OF INSOMNIA TREATED BY SEMICONDUCTOR LASER IRRADIATION ON AURICULAR POINTS. YAO SHUYING. **journal of tcm**. 1999;19(4):298-9 (eng).
- 280- gera: 73563/di/re
THE EFFECTIVENESS OF ACUPRESSURE IN IMPROVING THE QUALITY OF SLEEP OF INSTITUTIONALISED RESIDENTS. MEI-LI CHEN ET AL. **journal of gerontology: medical sciences**. 1999;54A:389-94 (eng).
Background. Elderly people often suffer from disturbed sleep. Because traditional Chinese medicine indicates that accupressure therapy may induce sedation, testing the effectiveness of accupressure in enhancing the quality of sleep of institutionalised residents with a well-designed scientific study is needed. Methods. A randomized block experimental design was used. The Pittsburgh Sleep Quality Index (PSQI) questionnaire was used as a screening tool to select subjects with sleep disturbance. By marching the effects of hypertension, hypnosis, naps, and exercise subjects were randomly assigned to an accupressure group, a sham accupressure group, and a control group. Each group had 28 subjects for a total of 84 subjects. The same massage routine was used in the accupressure group and the sham accupressure group, whereas only conversation was employed in the control group. Results. There were significant differences in PSQI subscale scores of she quality, latency, duration, efficiency, disturbances of sleep and global PSQI scores among subjects in the three groups before and after interventions. Furthermore there was a significant reduction in the frequencies of nocturnal awakening and night wakeful time in the accupressure group compared to the other two groups. Conclusions. This study confirmed the effectiveness of accupressure in improving the quality of sleep of elderly people and offered a nonpharmacological therapy method for sleep- disturbed elderly people.
- 281- gera: 73581/di/ra
TREATMENT OF 67 CASES OF INSOMNIA BY BODY ACUPUNCTURE COMBINED WITH EAR-PRESSING THERAPY. FENG SHUHONG. **word journal of acupuncture- moxibustion**. 1999;9(3):48 (eng).
- 282- gera: 74367/di/ra
[**PERSONAL EXPERIENCE OF TREATMENT OF HYPERSOMNIA**]. RONG SHAOKUI ET AL. **journal of tcm**. 1999;40(4):208 (chi).
- 283- gera: 74914/di/ra
[**STUDIES ON THE SEDATIVE AND SLEEPING EFFECTS OF WULING MYCELIA AND ITS PHARMACOLOGICAL MECHANISM**]. MA ZHIZHANG ET AL. **chinese pharmaceutical journal**. 1999;34(6):374 (chi*).
- 284- gera: 76020/di/ra
[**ACUPUNCTURE THERAPY OF 100 CASES OF INFANT NIGHT CRYING BY PUNCTURING ZHONGCHONG (PC 9)**]. ZHAO JIANXIN. **shanghai journal of tcm**. 1999;1:43 (chi).
- 285- gera: 77136/di/ra
[**INSOMNIA WITH KIDNEY YIN DEFICIENCY TREATED BY DABUYUAN GIAN: A REPORT OF 112 CASES**]. HU XIN. **beijing journal of tcm**. 1999;1:23 (chi).
- 286- gera: 78704/di/ra
[**CLINICAL OBSERVATION ON TREATMENT FOR 65 CASES OF INSOMNIA WITH PINGGAN YUSHEN CHONGJI**]. MA SHENGHUA ET AL. **beijing journal of tcm**. 1999;4:4 (chi).
- 287- gera: 87990/di/ra
[**TREATMENT OF INSOMNIA BY OPEN-TIANMEN MASSAGE MANIPULATION: A REPORT OF 53 CASES**]. QIU RUIJUAN ET AL. **new journal of tcm**. 1999;31(12):23 (chi).
- 288- gera: 88017/di/ra
[**TREATMENT OF INSOMNIA BY ACUPUNCTURE AND AURICULAR-PLASTER THERAPY: A REPORT OF 100 CASES**]. LU AIWEN. **new journal of tcm**. 1999;31(2):20 (chi).
- 289- gera: 70722/di/ra
[**DR. WANG KUNSHAN'S EXPERIENCE ON THE TREATMENT OF INSOMNIA BY DEALING WITH LIVER**]. WANG HUIYAN. **new journal of traditional chinese medicine**. 2000;32(2):5 (chi).
- 290- gera: 70747/di/ra
[**45 CASES OF SLEEPLESS TREATED BY SHENGMAI INJECTION**]. TAN WENLAN. **hubei journal of tcm**. 2000;22(3):31 (chi).
- 291- gera: 71174/di/ra
ACUPUNCTURE TREATMENT OF INSOMNIA. HU JINSHENG. **journal of tcm**. 2000;20(1):76 (eng).
Voir traduction italienne de réf gera: [94777].
- 292- gera: 71195/di/ra
[**EXPERIMENTAL STUDY OF BAOSHENGKAIYUCHONGJU INFLUENCING ON MONOAMINE NERVAL TRANSMITTERS OF BRAIN OF INSOMNIA RATS**]. LIU BIN ET AL. **liaoning journal of tcm**. 2000;27(2):92 (chi*).*
The experiment, forming the rat model of asomnia, treated with Baoshenkaiyuchongji at high dose, low dose and other Control medicine by means of perfusion (IG), analysising the variation of the content of 5-HT, 5-HIAA, NA, DA of midbrain, pons, medulla ablongata by spectrophofluorometric, was designed to make further inquiry into the mechanism of Baoshenkaiyuchongji increasing deep sleep and improving sleep. Results: In the Baoshenkaiyuchongji group at HD or LD, the content of 5-HT increased but the content of NA and DA decreased, compared with other control groups, difference was significant (P<0. 05). Conclusion: The intrinsic mechanism of Baoshenkaiyuchongji increasing deep sleep probably lied in which it acted on sleep awakening mechanism by
- 293- gera: 71647/di/ra
[**TREATMENT OF MORBID NOCTURNAL CRYING CAUSED BY FRIGHTENED IN BABY**]. AN CHANGQING ET AL. **chinese journal of ethnomedicine and ethnopharmacy**. 2000;43:79 (chi).
- 294- gera: 72218/di/ra
CLINICAL APPLICATION OF "FOUR-PASS" POINTS. YAO SHUYING. **word journal of acupuncture-moxibustion**. 2000;10(1):28 (eng).
- 295- gera: 72225/di/ra
ACUPUNCTURE TREATMENT FOR 100 CASES WITH INSOMNIA OF THE TYPE OF THE HEART AND SPLEEN DEFICIENCY. X. **word journal of acupuncture-moxibustion**. 2000;10(1):57 (eng).
100 cases of insomnia of the type of heart and spleen deficiency were treated by acupuncture. Results indicated that 95 cases were cured, accounting for 95 %; 3 cases were

markedly effective, accounting for 3 % and the 2 cases were ineffective, accounting for 2 %, the total effective rate was 98%.

296- gera: 72566/di/ra
[BRIEF DISCUSSION OF SENILE INSOMNIA]. HAN YAN.
guang ming journal tcm. 2000;15(1):33 (chi).

297- gera: 72925/di/ra
MERIDIENS CURIEUX ET INSOMNIES. TRUONG TAN
 TRUNG H. *revue francaise de mtc.* 2000;186-187:84-90
 (fra).

298- gera: 73004/di/ra
EXPERIENCE WITH LINGUAL POINTS. CAO WEN-ZHONG
 ET AL. *international journal of clinical acupuncture.*
 2000;11(1):1 (eng).

Clinically, lingual points refer to four acupoints on the Lingual tip, i.e. Jugquan (EX1~10), Jingjing (EX-HN 12), and Yuye (EX-HN 13), of them, Juquan is located both on the right and the left side of the lingual area, 0.5 cun apart from the middle point of the midline of lingual, while Jingjin and Yuye, are both separately located on the veins of the frenulum of lingual. The left is Jingjin and the right, Yuye. The Lingual tip refers to the middle point of the tip. All these are jointly called the four extraordinary points of the lingual. Clinically it was found that in application they have different actions on the treatment. The authors used them to treat the refractory cases and cases which were difficult to cure, and obtained satisfactory results. The following is a report of some experiences

299- gera: 73018/di/ra
EAR PRESSING FOR INSOMNIA : OBSERVATION OF 82 CASES. SHANG YA-TING. *international journal of clinical acupuncture.* 2000;11(1):65 (eng).

A mild case of insomnia, according to the relative contents of National TCM Administration, the newest issued, The Diagnostic Therapeutic of TCM Diseases, refers to difficulty falling asleep or when one is easily woken up and has difficulty in sleeping again. A severe case of insomnia is regarded as the inability to sleep all night, and is frequently accompanied with symptoms of headache, dizziness, palpitation, amnesia and dreamfulness. In the 82 cases, through systematic and laboratory examinations, no abnormal phenomenon were found. The author has only used ear pressing to treat this disease and has achieved good results.

300- gera: 73019/di/ra
TREATMENT OF INSOMNIA BY YONGQUAN AND PINCHING TOES. WAN FU ET AL. *international journal of clinical acupuncture.* 2000;11(1):69 (eng).

Pressing Yongquan (KI 1) point (located in the depression at the junction of the anterior and middle third of the sole when the toes are planter flexed) and pinching toes in treating insomnia are convenient and easy in performance. This method can not only cure insomnia but also promote body metabolism and speed up the excretion of harmful materials from the body. In addition, it can also improve the appetite and prevent the lower limbs from swelling and varicosity. The particular manipulation is stated below:

301- gera: 73838/di/ra
[CHILDREN'S MYOGENIC TORTICOLLIS (30 CASES) TREATED WITH MASSAGE]. SUN BO. *journal of practical tcm.* 2000;3(16):30 (chi).

302- gera: 73990/di/ra
TRATAMIENTO ACUPUNTURAL DE 156 CASOS DE INSOMNIO REBELDE EN DROGADICTOS EN TRATAMIENTO. WEN TUNQING. *enerqi.* 2000;9:65-7 (esp).

303- gera: 75966/di/ra
[CUURENT ANALYSIS OF "PEACELESS SLEEP DUE TO STOMACH DISCOMFORT"]. XU LIANG. *shanghai journal of tcm.* 2000;34(1):22 (chi).

304- gera: 76231/di/ra
LECTURES ON ACUPUNCTURE. PART I. CLINICAL ACUPUNCTURE. LECTURE NINETEEN. INSOMNIA. XU LI

ET AL. *world journal of acupuncture-moxibustion.* 2000;10(3):60-63 (eng).

305- gera: 76246/di/ra
[CASES OF INSOMNIA TREATED WITH ACUPUNCTURE THERAPY]. HUANG GUIXING. *acupuncture research.* 2000;25(3):220 (chi*).

The author uses the method of combination of body and ear acupuncture therapy to treat 22 cases of insomnia, compared with 22 cases with body acupuncture therapy and 22 cases with ear acupuncture therapy respectively. The results of effectiveness: Body and ear acupuncture therapy group is proved to be 95. 46 %; Body acupuncture therapy group is proved to be 71. 27 %; Ear acupuncture therapy group is proved to be 72. 73 %. Statistics shows that body and ear acupuncture therapy group is obviously prior to body acupuncture therapy group and ear acupuncture therapy group (P < 0. 01), there is no difference between body acupuncture therapy and ear acupuncture therapy (P>0.05). This indicates that the combination therapy of body and ear acupuncture for insomnia has co-operative effect in adjusting the function disturbance of brain.

306- gera: 76672/di/ra
[GUASHA (SAND SCRAPING) THERAPY IN TREATMENT OF 24 CASES WITH OBSTINATE INSOMNIA]. JIA YINGLI ET AL. *journal of clinical acupuncture and moxibustion.* 2000;16(3):39 (chi).

307- gera: 76967/di/ra
[CLINICAL OBSERVATION ON 54 CASES OF INSOMNIA TREATED WITH REDUCING YANG AND REINFORCING YIN METHOD]. LIAO YU. *chinese acupuncture and moxibustion.* 2000;20(11):665 (chi).

308- gera: 77504/di/ra
[DIETETIC TREATMENT OF SLEEPLESSNESS]. FANG YISHUN. *chinese journal of ethnomedicine and ethnopharmacy.* 2000;10(5):308 (chi).

309- gera: 77964/di/ra
[CLINICAL OBSERVATION ON 32 INSOMNIA CASES TREATED BY " WEN DAN TANG" MAINLY]. CAI MU XIANG. *chinese journal of basic medicine in tcm.* 2000;6(7):60 (chi).

310- gera: 78274/di/ra
EPISODIC SLEEP DISORDER CURED BY NEEDLING. GE JI-KUI ET AL. *international journal of clinical acupuncture.* 2000;11(4):347-8 (eng).

Episodic sleep disorder is originally classified under the categories of Drowsiness or Sleepiness in TCM classics. It mainly manifests symptoms such as paroxysmal involuntary sleepiness. It usually occurs in the daytime, especially at a post-meal time, in a monotonous environment, at a meeting or when attending a lecture. The symptom may occur several times a day, and each lasts no more than 15-20 minutes. After the attack is over, the patient may remain in an excited manner for a few hours. The symptom of drowsiness is varied in individuals; some remain in a state of half-sleepiness, and some in sleep plus snoring. However some may have symptoms of sudden death. When under extreme excitement, e.g., laughing or crying, the sudden decrease of muscle tension may result in a sudden fall to the ground, although the patient is clearly conscious and recovers quickly. Usually the medication of an exciting is effective in the short term. The application of acupuncture to 2 cases of paroxysmal sleepiness is

311- gera: 78588/di/ra
[CLINICAL OBSERVATION ON 151 CASES OF INSOMNIA WITH SHU MIAN CAPSULES]. ZHANG HONG ET AL. *journal of tcm.* 2000;41(7):418 (chi).

312- gera: 78674/di/ra
[THE TREATMENT OF INSOMNIA WITH COMPREHENSIVE METHODS]. HUANG YINGJUN ET AL. *journal of clinical acupuncture and moxibustion.* 2000;16(10):12 (chi).

313- gera: 79362/di/ra

[ANALYSIS OF THERAPEUTIC EFFECTS OF 108 CASES OF INSOMNIA TREATED WITH EAR-POINT TAPING AND PRESSING OF MAGNETIC BEADS AND VACCARIA SEEDS]. LU WEN. *chinese acupuncture and moxibustion*. 2000;20(12):722 (chi).

314- gera: 79787/di/ra

[THREE DIFFICULT CASES TREATED BY DEEP NEEDLING AT FENGFU DU 16]. XIAO FEI ET AL. *journal of chinese medicine*. 2000;63:30-3 (eng).

315- gera: 86330/di/ra

[INSOMNIA TREATED BY ACUPUNCTURE IN COMBINATION WITH HEAD MASSAGE]. DONG FENGYUN ET AL. *journal of clinical acupuncture and moxibustion*. 2000;16(4):28 (chi).

316- gera: 86895/di/ra

L'ESPERIENZA DEL PROF. KONG LINGXU NEL TRATTAMENTO DELL'INSOMNIA MEDIANTE LA MEDICINA TRADIZIONALE CINESE. PENG JIN. *rivista italiana di medicina tradizionale cinese*. 2000;81(3):40-3 (ita).

In oltre 30 anni di pratica clinica, il prof. Kong Lingxu ha inesso in pratica un gran numero di formulazioni per la terapia dell'insonnia, trattando molti casi gravi e protratti nel tempo con la sua eccezionale esperienza nell'uso di specifici farmaci in base alla differenziazione delle sindromi e delle malattie. Quelli che seguono sono alcuni

317- gera: 87349/di/ra

[EXPERIENCE ON CLINICAL APPLICATION OF HEAD ACUPUNCTURE THERAPY]. SU RE LIANG ET AL. *journal of liaoning college of tcm*. 2000;2(2):136 (chi*).

The head acupuncture treatment has remarkable effect on nerve system diseases. The efficiency is 93.3% in 781 cases of sequelae of apoplexy, 77.4% in 53 cases of paralysis agitans, 89.8% in 98 cases of epilepsy, 92% in 388 cases of neurasthenia, 96% in 100 cases of insomnia and 94% in 52 cases of lumbago and leg aching. It is also effective to such a difficult and complicated case as diabetes, especially to pattern II diabetes. After twenty courses of treatment, the blood sugar of 156 diabetics have dropped down to normal level with the efficiency of 90.5%. The head acupuncture is based on the theory of Chinese traditional medicine, which is directed by four methods of examination and eight principal Syndromes, is supported by viscera and meridian and combines syndrome-

318- gera: 88179/di/ra

OBSERVATION ON THE THERAPEUTIC EFFECT OF TREATMENT OF 150 CASES OF INSOMNIA BY PUNCTURING BODY ACUPOINTS AND OTOPOINTS. LI ZHONGLIAN. *world journal of acupuncture-moxibustion*. 2000;10(4):28 (eng).

In the present paper, the therapeutic effect of needling Baihui (GV 20) and Sishenchong (EX-HN 1) combined with otopoint Xin (MA-IC), Shenmen, Naodian and Pizhixia (MA-AT 1) for treatment of insomnia was observed in 150 patients. Results showed that the cure rate, effective rate and ineffective rate were 84 %, 13. 33 % and 2. 67 % respectively. Comparison between Western medicine group and acupuncture group showed a significant difference in the therapeutic effect (P < 0.01). It displays that acupuncture can correct the imbalance between excitement and suppression of the cerebral cortex and had effects of tranquillising and allaying excitement.

319- gera: 89344/di/ra

[219 PATIENTS WITH INTRACTABLE INSOMNIA TREATED PRIMARILY WITH FINGER-NEEDLE]. JIANG HUA ET AL. *journal of clinical acupuncture and moxibustion*. 2000;16(12):25 (chi).

320- gera: 89533/di/ra

46 CASI DI INSONNIA TRATTATI CON IRRADIAZIONE CON LASER A SEMICONDUITTORE SUI PUNTI AURICOLARI. YAO SHUYING. *rivista italiana di medicina tradizionale cinese*. 2000;82(4):66 (ita).

L'insonnia è un sintomo che si incontra comunemente nella pratica clinica. L'autore lo ha trattato usando irradiazione con laser a semiconduttore sui punti auricolari con risultati terapeutici soddisfacenti. Eccone di

321- gera: 92030/di/ra

[ZHANG LEI'S EXPERIMENT ON TREATING INTRACTABLE INSOMNIA]. SUN YU-XIN ET AL. *journal of henan college of tcm*. 2000;15(1):10 (chi).

322- gera: 93092/di/ra

[PROF. DENG TIETAO'S EXPERIENCE ON THE TREATMENT OF INSOMNIA]. XU YUNSHENG. *new journal of traditional chinese medicine*. 2000;32(6):5 (chi).

323- gera: 93685/di/ra

[TREATMENT OF INSOMNIA WITH MASSAGE AND DAOYIN]. DING SHIYONG. *chinese manipulation and qigong therapy*. 2000;16(5):4 (chi).

324- gera: 94007/di/ra

L'ACUPRESSION AMELIORE LA QUALITE DU SOMMEIL CHEZ LES PERSONNES AGEES EN INSTITUTION, CETTE ACTION EST SPECIFIQUE DU POINT D'ACUPUNCTURE. NGUYEN J. *revue francaise de mtc*. 2000;188:34-5 (fra). Résumé et commentaire de l'article de: Mei-Li Chen et al. The effectiveness of acupuncture in improving the quality of sleep of institutionalized residents. *Journal of Gerontology: Medical Sciences* 1999; 54A(8): M389- M394. Réf Gera: [73563].

325- gera: 94116/di/ra

[TREATMENT OF 68 CASES OF SLEEPLESSNESS BY RADIX ACANTHOPANACIS SENTICOSI INJECTION]. WANG JIZHI. *journal of guiyang college of tcm*. 2000;22(3):32 (chi).

326- gera: 108712/di/ra

OBSERVATION ON CHINESE HERBAL MEDICINE IN TREATMENT OF LONG-TERM INSOMNIA. WANG, CHARLIE XUE, NOEL LIM, ET AL. *chinese journal of integrated traditional and western medicine*. 2000;6(2):122 (eng).

327- gera: 146061/di/ra

L'ACUPRESSION AMELIORE LA QUALITE DU SOMMEIL CHEZ LES PERSONNES AGEES EN INSTITUTION, CETTE ACTION EST SPECIFIQUE DU POINT D'ACUPUNCTURE. JOHAN NGUYEN. *revue francaise de medecine traditionnelle chinoise*. 2000;188:34 (fra). RÉSUMÉ Question L'acupression améliore-t-elle la qualité du sommeil chez les personnes âgées en institution ? Plan expérimental Essai comparatif randomisé acupression versus acupression sur non-points et versus absence d'acupression. Cadre expérimental Institution de 750 lits à Taipei (Taiwan). Patients Sont recrutés les résidents volontaires de l'institution remplissant les critères suivants : age de 60 ans ou plus ; score 5 au Pittsburgh Sleep Quality Index qui détecte le ; troubles du sommeil ; état mental normal ; capacité communiquer en mandarin ou en taiwanais ; capacité à rester assis 15 minutes ; maintien dans l'institution le week-end ; absence de pathologie locale proche des point:d'acupression choisis. 102 patients sont inclus dans l'étude (62% d'hommes, age moyen 79 ans, données basées sur les patients ayant terminé l'étude). Interventions les patients sont randomisés en 3 groupes : acupression (n=34) : 20VG (Bai Hui), 20VB (Fengchi), An mian, 7C (Shen Men) et Shen Men auriculaire. La pression du point doit déclencher une réaction d'en-gourdissement, de distension ou de chaleur. La séance est limitée à 15 minutes : 5 minutes de massages des doigts, puis 10 minutes de massages des points à rai-son de 2 minutes par point. La séance a lieu entre 13h00 et 22h00, une séance par jour, 5 jours par semaine sur 3 semaines (de la 2ème à la 4ème semaine). Les séances sont réalisées par un praticien qui a spécialement suivi une formation de base de 10 semaines en acupuncture dans le cadre d'une formation continue certifiée par l'Association of the Modern Acupuncture Research. acupression sur non points (n=34) : utilisation de non-points situés de 1 à 3 cun des vrais points et hors du trajet du méridien. contrôle sans acupression (n=34) Critères de

jugement Critère principal : le score au Pittsburgh sleep quality index (PSQI). Cette échelle possède 7 items (qualité subjective du sommeil, latence de l'endormissement, durée du sommeil, utilisation d'hypnotiques ...) avec un score global PSQI variant de 0 à 21 (un score ≥ 5 détectant un trouble du sommeil). Le PSQI est évalué en pré-intervention (1^h semaine) et en post-intervention (5^{ème} semaine). Critères secondaires : la fréquence et la durée des réveils nocturnes. Ces données sont recueillies quotidiennement de la 2^{ème} à la 4^{ème} semaine. Résultats 18 patients, 6 par groupe sont sortis de l'étude pour diverses raisons (hospitalisation, voyage...). L'amélioration du score global PSQI est plus importante dans le groupe acupression comparée aux deux autres groupes ($p < .001$). A l'analyse item par item, l'acupression a un effet supérieur dans la qualité subjective du sommeil, la latence d'endormissement, la durée du sommeil, mais non sur la consommation d'hypnotique. La diminution de la fréquence et la durée des réveils nocturne est plus importante dans le groupe sous acupression ($p < .001$). Conclusions L'étude confirme l'efficacité de l'acupression dans les troubles du sommeil du sujet âgé.

328- gera: 89086/di/ra
[CHINESE MEDICAL METHODOLOGY: EXPERIENCE OF APPLYING LIGUSTICI RHIZOME]. YAN DE-XIN. *shanghai journal of tcm*. 2001;35(1):14 (chi*).
 Ligustici Rhizome is a frequently used herbal medicine. Prof Yan has achieved much experience in the coordination, meridian tropism and action of Ligustici Rhizome in his long-term clinical practice. Many difficult and stubborn diseases can be cured when mere Ligustici Rhizome is added.

329- gera: 89268/di/ra
[SOMNIPATHY (100 CASES) TREATED BY PUNCTURING ACUPOINTS SISHENCONG (EXTRA 6)]. GU FENGYANG ET AL. *journal of practical tcm*. 2001;17(1):23 (chi).

330- gera: 89510/di/ra
[29 PATIENTS WITH INSOMNIA TREATED BY INTRADERMAL NEEDLE]. ZHANG FENGHUA. *journal of clinical acupuncture and moxibustion*. 2001;17(1):31 (chi).

331- gera: 89681/di/ra
[EXPERIMENTAL STUDY OF CURATIVE EFFECT COMPOUND ANMEI ORAL LIQUID ON INSOMNIA]. HE JIAN-CHENG ET AL. *chinese traditional patent medicine*. 2001;23(1):48 (chi*).

332- gera: 90860/di/ra
[JI LIANGCHEN'S EXPERIENCE ON TREATMENT OF INSOMNIA ZHENG]. CHANG BIAO ET AL. *beijing journal of tcm*. 2001;1:7 (chi).

333- gera: 91673/di/ra
[28 PATIENTS WITH INSOMNIA TREATED BY ACUPUNCTURE]. SHI DONGLI. *journal of clinical acupuncture and moxibustion*. 2001;17(2):7 (chi).

334- gera: 91780/di/ra
[OBSERVATION ON INSOMNIA (63 CASES) TREATED BY THERAPY OF DISPERSING DEPRESSED LIVER-QI, RESOLVING PHLEGM AND TRANQUILISATION]. YANG WEILI. *journal of practical tcm*. 2001;17(3):9 (chi).

335- gera: 93568/di/ra
[CIRCULATION CHARACTERISTICS AND INDICATION LAWS OF QIAO VESSEL]. WANG LEI. *chinese acupuncture and moxibustion*. 2001;21(4):221 (chi).

336- gera: 93736/di/ra
[CLINICAL OBSERVATION ON TREATING INSOMNIA WITH INJECTION OF ACANTHOPANAX ROOT]. ZENG ZHONGYI ET AL. *heilongjiang journal of tcm*. 2001;2:10 (chi).

337- gera: 94553/di/ra
[TREATING INSOMNIA 38 CASES WITH HUIXIN CAO AND SANREN POWER]. ZHANG LIPING. *chinese journal of ethnomedicine and ethnopharmacy*. 2001;49:86 (chi).

338- gera: 94777/di/ra
TRATTAMENTO DELL'INSOMNIA CON AGOPUNTURA. HU JINSHENG. *rivista italiana di medicina tradizionale cinese*. 2001;83(1):78-9 (ita*).
 Traduction italienne de réf gera: [71174]. This article describes a case history of insomnia treated by acupuncture.

339- gera: 94894/di/re
EFFECTS OF INDIVIDUALIZED ACUPUNCTURE ON SLEEP QUALITY IN HIV DISEASE. PHILLIPS KD ET AL. *journal of the association of nurses in aids care*. 2001;12(1):27-39 (eng).

Although it may begin at any point, sleep disturbance often appears early in HIV disease and contributes to decreased quality of life during the course of the illness. Relatively few studies have explored the complex nature of poor sleep quality in HIV disease or tested interventions to improve sleep quality. The purpose of this study was threefold: explore the nature of sleep quality in HIV disease, test the relationship between pain and sleep quality, and test the effectiveness of acupuncture delivered in a group setting for improving sleep quality in those who are HIV infected. A pretest, posttest, preexperimental design was used to test the effects of acupuncture on sleep quality. Participating in the study were 21 HIV-infected men and women between the ages of 29 and 50 years who reported sleep disturbance three or more times per week and who scored greater than 5 on the Pittsburgh Sleep Quality Index. The Wrist Actigraph was used to measure sleep activity, and the Current Sleep Quality Index was used to measure sleep quality for 2 nights before and after a 5-week acupuncture intervention (10 treatments). Acupuncture was individualized to address insomnia and other symptoms reported by the participants. Sleep activity and sleep quality significantly improved following 5 weeks of individualized acupuncture delivered in a group setting.

340- gera: 95456/di/ra
[CLINICAL OBSERVATION ON 53 CASES OF INSOMNIA TREATED BY SHENMAI DECOCTION]. TANG GUILAN. *hunan journal of traditional chinese medicine*. 2001;17(3):11 (chi).

341- gera: 95465/di/ra
[CLINICAL STUDY ON 48 CASES OF CEREBRAL INFARCTION TREATED BY TONGNIAI HUATAN DECOCTION]. TANG HAIBING. *hubei journal of traditional chinese medicine*. 2001;23(5):11 (chi).

342- gera: 96078/di/ra
[STUDIES OF MECHANISM ON SLOW-WAVE SLEEP]. ZHANG JING-XING. *chinese journal of basic medicine in traditional chinese medicine*. 2001;7(8):66 (chi).

343- gera: 96205/di/ra
[EXPERIENCE IN THE TREATMENT OF INSOMNIA THROUGH LIVER : AN ANALYSIS OF 1000 CASES]. XU LIANG. *shanghai journal of traditional chinese medicine*. 2001; 35(9):16 (chi*).

344- gera: 96292/di/ra
[ACUPOINT APPLICATION FOR INSOMNIA OF HEART-KIDNEY DISHARMONY IN 42 CASES]. YU BIAO YU QIAN. *shanghai journal of traditional chinese medicine*. 2001;35(6):23 (chi*).

Eighty-four cases of insomnia were randomly classified into treatment group and control group, 42 cases in each group. In treatment group, the patients were treated with application of medicinal pellet containing Thistle milkwort root and Szechwan lavage rhizome an acupoints Shenmen (HT7), Taxi (Kiz) and Mingmen (GV4). In control group, the patients were treated with and valium. Results showed that the curative effects were obviously better in treatment group than in control group.

345- gera: 96645/di/ra
[DISCUSSION ON THE RELATION BETWEEN "THE DISORDER OF THE STOMACH-QI" AND THE INSOMNIA FROM THE RUNNING OF WEI-QI]. LI YAN, YAN XIAO-TIAN. *chinese journal of basic medicine in traditional*

chinese medicine. 2001;7(7):14 (chi).

346- gera: 96765/di/ra

[CLINICAL OBSERVATION ON 70 PATIENTS WITH INSOMNIA TREATED WITH ACUPUNCTURE]. LI JUNMIN. *Journal of clinical acupuncture and moxibustion.* 2001;17(7):25 (chi).

347- gera: 96810/di/ra

[TREATING SLEEPLESSNESS BY PUSHING MANIPULATION WITH ONE - FINGER MEDITATION]. HAO JING-HONG. *chinese journal of ethnomedicine and ethnopharmacy.* 2001;8(4):221 (chi).

348- gera: 96952/di/ra

[53 CASES OF INSOMNIA TREATED WITH MAGNETIC BEAD THERAPY ON AURICULAR AND ELECTRIC STIMULATION THERAPY]. JIN HONGFU. *journal of external therapy of traditional chinese medicine.* 2001;10(5):10 (chi).

349- gera: 96956/di/ra

[TALKING ABOUT EXTERNAL THERAPY OF TRADITIONAL CHINESE MEDICINE OF CERVICAL INSOMNIA]. XU SANWEN JIN FUXING. *journal of external therapy of traditional chinese medicine.* 2001;10(5):24 (chi).

350- gera: 97005/di/ra

[TREATING SLEEPLESS WITH SOOTHING THE LIVER AND REGULATING THE CIRCULATION OF QI]. WANG PING, ET AL. *hubei journal of traditional chinese medicine.* 2001;23(10):17 (chi).

351- gera: 97149/di/ra

[TREATMENT OF INSOMNIA WITH MASSAGE AND DAOYIN]. DING SHIYONG. *chinese manipulation & qi gong therapy.* 2001;16(5):4 (chi).

352- gera: 97283/di/ra

[CURATIVE EFFECT OBSERVATION ON TREATMENT OVER EMPHRAXIS SLEEPING APNEA SYNDROME]. ZHANG YUAN-BING. *jiangxi journal of traditional chinese medicine.* 2001;32(5):22 (chi).

353- gera: 97475/di/ra

[50 CASES OF INSOMNIA TREATED BY ACUPUNCTURE OF SYNDROME DIFFERENTIATION]. LI QINGYU, ET AL. *chinese journal of information on traditional chinese medicine.* 2001;8(6):82 (chi).

354- gera: 97648/di/ra

[TREATMENT OF INSOMNIA]. JIANG LI-HONG ET AL. *journal of traditional chinese medicine and chinese materia medica of jilin.* 2001;21(5):1 (chi).

355- gera: 97827/di/ra

[EXPERIMENTAL STUDY ON THE HYPNOTIC EFFECT OF ZAOREN (WILD JUJUBE)]. LI TINGLI, ET AL. *acta chinese medicine and pharmacology.* 2001;29(5):35 (chi*).

356- gera: 98059/di/ra

[TREATING 113 CASES OF SLEEPING DISTURBANCE WITH ACUPUNCTURE THERAPY]. DONG ZHI-PING, JIA JUN-LI. *henan journal of traditional chinese medicine and phrmacy.* 2001;16(1):26 (chi).

357- gera: 98788/di/ra

[MASSAGE THERAPY FOR CHRONIC INSOMNIA AT FOOT ACUPOINT AND ANALYSIS IT WITH POLYSOMNOGRAN]. WANG XUELI ET AL. *chinese manipulation and qi gong therapy.* 2001;18(6):6 (chi).

358- gera: 98822/di/ra

[A COLLECTION OF PROFESSOR TANG SONG'S EXPERIENCE IN TREATING INSOMNIA]. CHEN YU-LONG ET AL. *henan traditional chinese medicine.* 2001;21(6):11 (chi).

359- gera: 98951/di/ra

[THE DISCUSSION OF THE FUNCTIONAL OBSTACLE OF DEFENDING QI CAUSING INSOMNIA]. ZHOU DONGHAO ET AL. *guang ming journal traditional chinese medicine.* 2001;12(6):8 (chi).

360- gera: 98980/di/ra

[INSOMNIA(40 CASES) TREATED BY MASSAGE COMBINED WITH EXERCISES FOR NOURING HEART.]. SUN DONG. *journal of practical traditional chinese medicine.* 2001;12(17):28 (chi).

361- gera: 99255/di/ra

[EXPERIENCE ON TREATMENT OF INSOMNIA (PHLEGM - HEAT INTERNAL CONFUSION TYPE) WITH ACUPUNCTURE AND MOXIBUSTION]. CUIRUI. *beijing journal of traditional chinese medicine.* 2001;20(6):38 (chi).

362- gera: 99310/di/ra

[RUDIMENTARILY EXPLORING THE TREATMENT OF RESPIRATION PAUSE SYNDROMES IN SLEEPING IN TRADITIONAL CHINESE MEDICINE]. ZHANG YUANBING ET AL. *china journal of traditional chinese medicine and pharmacy.* 2001;16(5):53 (chi).

363- gera: 99926/di/ra

[A COLLECTION OF PROFESSOR TANG SONG'S EXPERIENCE IN TREATING INSOMNIA]. CHEN YU-LONG ET AL. *henan traditional chinese medicine.* 2001;21(6):11 (chi).

364- gera: 100414/di/ra

[RUDIMENTARILY EXPLORING THE TREATMENT OF RESPIRATION PAUSE SYNDROMES IN SLEEPING IN TRADITIONAL CHINESE MEDICINE]. ZHANG YUANBING ET AL. *china journal of traditional chinese medicine and pharmacy.* 2001;16(5):53 (chi).

365- gera: 104388/di/ra

COMBINED TREATMENT OF 198 CASES OF INSOMNIA WITH ACUPUNCTURE OF BODY ACUPOINTS PLUS PELLETT PRESSING OF OTOPOINTS. LI LANMIN, ET AL. *world journal of acupuncture-moxibustion.* 2001;11(3):56 (eng*).

Objective: To observe the therapeutic effect of acupuncture of body acupoints plus otopoint pellet-pressing for treatment of insomnia. Methods: A total of 198 cases of insomnia patients were observed. Straight inserted the filiform needles into Shenmen (HT 7), Neiguan (PC 6), Zhaohai (KI 6) and Zusanli (ST 36) and manipulated the needles with uniform reinforcing-reducing method, then otopoints as Ershenmen (MA-TF 1), Shen (MA-SC), Gan (MA-SC 5), etc. were stimulated by pressing the stuck vaccaria seeds. Ten treatments were considered as a therapeutic course. Results: Of the 198 cases, 65 (32%) were cured, 76 (38%) had remarkable improvement, 53 (26%) had improvement and 4 (2%) had no effect, with the total effective rate being 97% . Conclusion: Acupuncture of body acupoints plus otopoint pellet pressing works well in treatment of insomnia.

366- gera: 104627/di/ra

[OBSERVATION ON THERAPEUTIC EFFECTS OF 50 CASES OF REFRACTORY INSOMNIA TREATED WITH TE 23- THROUGH-GB 8 POINTS]. RAO ZHONGDONG, WEN MING, HU YUEHUA. *chinese acupuncture and moxibustion.* 2001;21(7):407 (chi*).

367- gera: 107460/di/ra

[CLINICAL OBSERVATION ON TREATMENT OF POST-APOPLEXY INSOMNIA-SOMNOLENCE IRREGULAR SYNDROME MAINLY WITH MOVING CUPPING ALONG MERIDIANS]. HE LINGNA, JIANG ZHENYA, ZHU MANJIA. *chinese acupuncture and moxibustion.* 2001;21(10):587 (chi*).

Moving cupping along the Urinary Bladder Channel and massage on the Kidney Channel from Yongquan (KI 1) to Taixi (KI 3) were used for treatment of 98 cases of post-apoplexy insomnia-somnolence irregular syndrome. Results showed that the cured rate was 39. 8 % , the markedly effective rate was 49. 0 % , suggesting the therapy has a

better therapeutic effect.

368- gera: 111326/di/th

TRAITEMENT DES TROUBLES DU SOMMEIL PAR ACUPUNCTURE LASER : ESSAI THERAPEUTIQUE : MARS 99- DECEMBRE 00. REYNAUD LEVY O. *these medecine, faculte de medecine de marseille.* 2001;:126 (fra).

369- gera: 111808/di/ra

EXPERIENCE IN DIFFERENTIATION AND TREATMENT OF STUBBORN INSO 'A. QIAN YANFANG. *journal of tcm.* 2001;21(3):168 (eng).

370- gera: 111864/di/ra

NEEDLING BODY ACUPOINTS COMBINED WITH OTOPOINT-PELLET PRESSING THERAPY FOR TREATMENT OF 43 CASES OF INSOMNIA. WANG YING ET AL. *world journal of acupuncture-moxibustion.* 2001;11(1):40 (eng).

371- gera: 112207/di/ra

EXPERIENCIA CLINICA CON LA DIFERENCIACION Y EL TRATAMIENTO DEL INSOMNIO REFRACTARIO. QIAN YAN FANG. *journal of tcm.* 2001;29:11 (esp*).

372- gera: 112243/di/ra

DISCUSSION OF MAGNETIC SLEEP PAD STUDY . TAYLOR AG, FORESMAN PA , MR CONAWAY, AND ALFANO. *journal of alternative and complementary medicine: research on paradigm , practice , .* 2001;7(5):394 (eng).

373- gera: 152087/di/el

INSOMNIE - SHI MIAN. LU JING DA, LERICHE CC. *etude des traitements en acupuncture chinoise, editions you feng.* 2001;:133 (fra).

374- gera: 152088/di/el

HYPERSOMNIE - DUO MEI. LU JING DA, LERICHE CC. *etude des traitements en acupuncture chinoise, editions you feng.* 2001;:149 (fra).

375- gera: 99563/di/ra

TREATMENT OF INFANTILE MORBID NIGHT CRYING BY ACUPUNCTURE AT ZHONGCHONG POINT IN 100 CASES. ZHAO JIANXIN. *journal of tcm.* 2002;22(1):11 (eng).

376- gera: 101155/di/ra

[OBSERVATION OF CURATIVE EFFECT OF 32 PATIENTS WITH INSOMNIA TREATED WITH ACUPUNCTURE AND MASSAGE]. DUAN JINCHENG ET AL. *journal of clinical acupuncture and moxibustion.* 2002;18(1):23 (chi).

377- gera: 101186/di/ra

[CLINICAL OBSERVATION OF PREPARATION FROM THE BRANCH AND LEAF OF PEANUT IN TREATING INSOMNIA]. WANG QIAO-CHUN ET AL. *shanghai journal of tcm.* 2002;35(5):8 (chi).

378- gera: 101966/di/ra

[ZHU CHENYU' S EXPERIENCE IN TREATMENT OF INSOMNIA]. YANG BING. *zhejiang journal of traditional chinese medicine.* 2002;37(4):168 (chi).

379- gera: 101967/di/ra

[TREATING OBSTINATE INSOMNIA FROM TREATING PHLEGM AND BLOOD STASIS]. BIAN JIANFENG. *zhejiang journal of traditional chinese medicine.* 2002;37(4):173 (chi).

380- gera: 102560/di/ra

[TREATMENT OF 56 CASES OF INSOMNIA WITH COMPOUND LONGZAO DECOCTION]. CHEN LIEHONG, TAN YOUFEN. *jiangsu journal of traditional chinese medicine.* 2002;23(3):16 (chi).

381- gera: 102573/di/ra

[CONTROL OBSERVATION ON TREATMENT OF 52 CASES

OF INSOMNIA BY PENETRATION NEEDLING WITH ELONGATED NEEDLE]. CHEN XINGSHENG . *chinese acupuncture and moxibustion.* 2002;22(3):157 (chi*).

Methods : Penetration needling with elongated needle was used for treatment of 52 cases of insomnia and Chinese herbs Suanzaoren Tang was adopted for 30 cases as control group. Results The total effective rate was 90.4 % in the treatment group and 70.0 % in the control group with a significant difference between the two groups (P < 0.05). Conclusion : This therapy is of a good tranquilizing and somnific action.

382- gera: 102710/di/ra

[THE ACHIEVEMENT ON THE RESEARCH OF DREAM IN HUANGDI NEIJING (THE YELLOW EMPEROR'S CANNON OF INTERNAL MEDICINE)]. FU WENLU. *journal of traditional chinese medicinal literature.* 2002;73(1):8 (chi).

383- gera: 103131/di/ra

[ON EMOTIONAL THEORY AND SOMNIPATHY]. SHI HENGJUN. *journal of shaanxi college of traditional chinese medicine.* 2002;25(3):13 (chi).

384- gera: 106005/di/ra

SCALP AND BODY ACUPUNCTURE FOR TREATMENT OF SENILE INSOMNIA - A REPORT OF 83 CASES. LU ZEQUIANG. *journal of traditional chinese medicine.* 2002;22(3):193 (eng).

385- gera: 106527/di/ra

[20 PATIENTS WITH OBSTINATE INSOMNIA TREATED WITH ACUPUNCTURE IN ACCORDANCE WITH CHECKING MARROW SEA]. ZHENG CHENGZHE ET AL. *journal of clinical acupuncture and moxibustion.* 2002;18(8):7 (chi).

386- gera: 106612/di/ra

[EXPERIENCE OF TREATMENT WITH SYNDROME DIFFERENTIATION ABOUT INSOMNIA OF THE DIABETES MELITUS PATIENTS]. YANG QIANYU YAN JIANYU. *guang ming journal traditional chinese medicine.* 2002;8(4):31 (chi).

387- gera: 107086/di/ra

[STUDY DEVELOPMENT OF TREATMENT OF INSOMNIA WITH ACUPUNCTURE]. SHA YAN. *information on traditional chinese medicine.* 2002;19(5):31 (chi).

388- gera: 107587/di/ra

[INSOMNIA TREATED ACCORDING TO HEART SYNDROME DIFFERENTIATION IN TRADITIONAL CHINESE MEDICINE]. YAN SHI-LIN, LI ZHENG-HUA. *journal of chengdu university of traditional chinese medicine.* 2002;22(5):59 (chi).

389- gera: 107648/di/ra

[INSOMNIA TREATED ACCORDING TO HEART SYNDROME DIFFERENTIATION IN TRADITIONAL CHINESE MEDICINE]. YAN SHI-LIN, LI ZHENG-HUA,. *journal of chengdu university of traditional chinese medicine.* 2002;25(3):59 (chi).

390- gera: 107765/di/ra

[CLINICAL OBSERVATION ON TREATING 30 CASES OF SLEEPLESSNESS WITH ZHUHUANG PILLS]. LI MINSONG. *chinese journal of ethnomedicine and ethnopharmacy.* 2002;10(5):278 (chi).

391- gera: 107990/di/ra

[CLINICAL OBSERVATION OF ACUPUNCTURE TREATING PATIENTS TREATED WITH INSOMNIA]. WANG YIN. *journal of clinical acupuncture and moxibustion.* 2002;18(9):9 (chi).

392- gera: 108210/di/ra

[CLINICAL OBSERVATIONS ON ELECTROACUPUNCTURE TREATMENT ON REFRACTORY INSOMNIA]. WU JIU-WEI. *shanghai journal of acupuncture and moxibustion.* 2002;21(5):12 (chi*).

Purpose and method : The clinical effect of electroacupuncture treatment on refractory insomnia was observed, and a simple

acupuncture and electroacupuncture plus herb groups were established for comparison. Results and conclusion : Electroacupuncture also had an effect on refractory insomnia patients who had received Chinese and western medicines without a good effect, and the total effective rate reached 80.65%. But the effect was better in electroacupuncture plus herbs than in simple electroacupuncture. The total effective rate from the former reached 90.62%. Electroacupuncture treatment has an exact effect on insomnia. It is of no side effect and worthy to be

393- gera: 108211/di/ra

[THE OBSERVATION ON THE CURATIVE EFFECT OF ACUPUNCTURE PLUS AURICULARPLASTER THERAPY ON INSOMNIA]. SHAO MIN, WEN LING-JIE, HUANG WAN-YI. *shanghai journal of acupuncture and moxibustion*. 2002;21(5):14 (chi*).

Purpose : To observe the curative effect of acupuncture plus auricular-plaster therapy on insomnia. Method : Insomnia patients were randomly divided into 3 groups. A composite group was treated by acupuncture with the cooperation of auricular-plaster therapy. The effect was compared with those in simple acupuncture and auricular-plaster groups. Results : There was a marked curative effect on insomnia in all 3 groups. The total effective rate was 95.56% , 84.38% and 77.14% respectively. But the recover and markedly effective rate was 71.11% in the composite group, 40.63% in the acupuncture group and 31.43% in the auricular-plaster group. There was a significant difference ($P < 0.05$). And the course of treatment was significantly shorter in the composite group than in the acupuncture and auricular-plaster groups ($P < 0.05$). Conclusion : Acupuncture plus auricular-plaster therapy

394- gera: 108307/di/ra

[TREATING 35 CASES OF SLEEPLESS WITH METHOD OF RELIEVING THE DEPRESSED LIVER]. ZHOU JING. *shandong journal of tcm*. 2002;21(11):662 (chi).

395- gera: 108374/di/ra

[THERAPEUTIC EFFICACY OF SHUIHUO JIJI TANG FOR CLIMACTERIC INSOMNIA WITH YIN DEFICIENCY FIRE EXCESS TYPE:A REPORT OF 30 CASES]. WANG JIANHONG. *beijing journal of tcm*. 2002;21(5):283 (chi).

396- gera: 108965/di/ra

ESPERIENZA NELLA DIFFERENZIAZIONE E NEL TRATTAMENTO DELL' INSOMNIA CRONICA. QIAN YANFANG. *rivista italiana di medicina tradizionale cinese*. 2002;89:27 (ita*).

397- gera: 109125/di/ra

CLINICAL OBSERVATION ON INTRACTABLE INSOMNIA TREATED BY POINT PRESSURE IN 42 CASES. ZHANG QINGPING. *journal of tcm*. 2002;22(4):276 (eng).

398- gera: 109514/di/ra

[PRELIMINARY EXPLORATION ON WANG QIAOCHU' S ACADEMIC THOUGHT ON THE TREATMENT OF INSOMNIA]. XU LIANG. *journal of traditional chinese medicinal literature*. 2002;76(4):42 (chi).

399- gera: 109705/di/ra

[HEALING 30 CASES OF INSOMNIA WITH REFLEX THERAPY CASES]. X. *china reflexology journal*. 2002;6: (chi).

400- gera: 109789/di/ra

TRAITEMENT ACUPUNCTURAL DE 156 CAS D' INSOMNIE REBELLE CHEZ DES DROGUES EN COURS DE DESINTOXICATION. WAN CHUN-QING. *acupuncture traditionnelle chinoise*. 2002;7:112 (fra).

401- gera: 110093/di/ra

[PROFESSOR SHI GUANQING'S EXPERIENCE IN TREATING INSOMNIA]. YAN XIAO-TIAN, CUI AI-ZHU. *henan tcm*. 2002;22(6):13 (chi).

402- gera: 110255/di/ra

[INSOMNIA (84 CASES) TREATED BY BODY POINT AND

EAR POINT OF ACUPUNCTURE]. WANG DONGMEI. *journal of practical tcm*. 2002;18(12):27 (chi).

403- gera: 110885/di/ra

EFFECTIVENESS OF AURICULAR THERAPY ON SLEEP PROMOTION IN THE ELDERLY. SUEN LKE ET AL. *american journal of chinese medicine*. 2002;30(4):429 (eng*).

Sleep disturbances are a particularly common problem in the elderly. The purpose of this study was to examine the effectiveness of auricular therapy on sleep behaviors in the elderly. One hundred and twenty participants of 60 years old or above and who were suffering from sleep disturbances were invited to participate in this study. Eligible participants were randomly allocated to receive auricular therapy using Junci Medulla (Group A = 30), Semen Vaccariae (Group B = 30) or magnetic pearls (Group C = 60). Groups A and B were the control groups, while Group C was the experimental group. Seven auricular points which are thought to have an effect on promoting sleep were selected. The total treatment course lasted for three weeks. Objective measurement using actigraphic monitoring was performed before the therapy commenced, in the middle period of the therapy, and within one week after the therapy had been completed. After the therapy, there were significant differences among the three groups in terms of the nocturnal sleep time (NST) ($F_2, 117 = 6.84, p < 0.05$) and sleep efficiency (SE) ($F_2, 117 = 7.69, p < 0.05$). Significant improvement in the sleep behaviors was observed in the experimental group using magnetic pearls. In a backward multiple regression, the effect of auricular therapy on SE after allowing for age in female participants is of high statistical significance ($F_3, 106 = 9.04, p < 0.001$). The paper concludes that auricular therapy using magnetic pearls is an effective means of improving the quantity and quality of sleep in the elderly.

404- gera: 111019/di/ra

[THE ABSTRACT OF CHINESE TRADITIONAL MEDICINE TREATING INSOMNIA]. WANG GUOMING YANG JIANYU YU ZHENG. *guang ming journal traditional chinese medicine*. 2002;12(6):61 (chi).

405- gera: 112030/di/ra

[NIGHTIME PHYSIOLOGICAL STATE]. HUANG HUI,ZHANG LI, LIU YAN-JIAO. *chinese journal of basic medicine in tcm*. 2002;8(12):50 (chi).

406- gera: 122637/di/ra

AURICULAR THERAPY USING MAGNETIC PEARLS ON SLEEP: A STANDARDIZED PROTOCOL FOR THE ELDERLY WITH INSOMNIA. LOMA KP SUEN ET AL. *clinical acupuncture and oriental medicine*. 2002;3(1):39 (eng*).

407- gera: 122689/di/ra

AN INTERNET-BASED RANDOMIZED PLACEBOCONTROLLED CLINICAL TRIAL ON KAVA AND VALERIAN FOR ANXIETY AND INSOMNIA (ABSTRACT). JACOBS BP ET AL. *complementary therapies in medicine*. 2002;10(2):109 (eng).

408- gera: 111699/di/ra

[THE TREATMENT OF INSOMNIA WITH PLANTAR REFLEXOTHERAPY AND LOCAL MASSAGE. AN ANALYSIS OF 56 CASES .]. ZHANG JUN. *chinese manipulation and qi gong therapy*. 2003;19(1):11 (chi).

409- gera: 111758/di/ra

[TREATING 36 CASES OF OBSTINATE INSOMNIA WITH MODIFIED XIAO YAO ZHEN ZHU WAN]. LU QIYUN. *zhéjiāng journal of tcm*. 2003;38(2):54 (chi).

410- gera: 111979/di/ra

[TREATMENT OF 40 CASES ON INSOMNIA IN ;HE WAYS OF BODY ACUPUNCTURE AND AURICULAR POINTS PLASTER THERAPY]. GUI WENJIN. *heilongjiang journal of tcm*. 2003;1:47 (chi).

411- gera: 112387/di/ra

TRATTAMENTO DEL PIANTO NOTTURNO PATOLOGICO INFANTILE CON L'AGOPUNTURA SUL PUNTO ZHONGCHONG IN 100 CASI. ZHAO JIANXIN. *rivista italiana di medicina tradizionale cinese*. 2003;91(1):29 (ita*).

412- gera: 112672/di/ra
[REVIEW ON TCM TREATING SLEEP APNEA SYNDROME]. LI JIAN-SHENG, LI SU-YUN. *journal of laoning college of tcm*. 2003;5(1):60 (chi).

413- gera: 112781/di/ra
[OBSERVATIONS ON THE CURATIVE EFFECT OF COMBINED ACUPOINT INJECTION AND ELECTROACUPUNCTURE ON 40 INSOMNIA CASES]. WANG QQ, CHEN HL. *shanghai journal of acupuncture and moxibustion*. 2003;22(2):27 (chi*).

414- gera: 112941/di/ra
TREATMENT OF PHLEGM- AND HEAT-INDUCED INSOMNIA BY ACUPUNCTURE IN 120 CASES. CUI RUI AND ZHOU DEAN. *journal of tcm*. 2003;23(1):57 (eng).

415- gera: 113074/di/ra
[ON THE SYNDROME DIFFERENTIATION AND TREATMENT ADMINISTRATION OF INSOMNIA]. SHI MING XU JIAN XU HONG, ET AL. *shanghai journal of tcm*. 2003;37(3):18 (chi*).

416- gera: 113181/di/ra
[CLINICAL PROGRESSION OF ASOMNIA TREATED WITH EXTERNAL THERAPY OF TRADITIONAL CHINESE MEDICINE]. HUANG YINGJUN. *journal of external therapy of tcm*. 2003;12(1):28 (chi).

417- gera: 113425/di/ra
[TREATMENT BASED ON SYNDROME DIFFERENTIATION OF INSOMNIA IN ACUPUNCTURE AND MOXIBUSTION.]. ZHANG QIN-CHUN, UANG XUE-FANG, HUANG QING-LIN. *journal of clinical acupuncture and moxibustion*. 2003;19(2):17 (chi).

418- gera: 114109/di/ra
[NARCOLEPSY]. LIU YAN-JIAO. *chinese journal of basic medicine in tcm*. 2003;9(3):64 (chi).

419- gera: 114690/di/ra
[THE TREATMENT OF INSOMNIA WITH PLANTAR REFLEXOTHERAPY AND LOCAL MASSAGE. AN ANALYSIS OF 56 CASES]. ZHANG JUN. *chinese manipulation and qi gong therapy*. 2003;19(1):11 (chi).

420- gera: 114749/di/ra
[TREATING 36 CASES OF OBSTINATE INSOMNIA WITH MODIFIED XIAO YAO ZHEN ZHU WAN]. LU QIYUN. *zhejiang journal of tcm*. 2003;38(2):54 (chi).

421- gera: 114799/di/ra
EXPERIENCE IN DIFFERENTIATION AND TREATMENT OF STUBBORN INSOMNIA. QIAN YANFANG. *journal of tcm*. 2003;21(3):168 (eng).

422- gera: 114970/di/ra
[TREATMENT OF 40 CASES ON INSOMNIA IN ;HE WAYS OF BODY ACUPUNCTURE AND AURICULAR POINTS PLASTER THERAPY]. GUI WENJIN. *heilongjiang journal of tcm*. 2003;1:47 (chi).

423- gera: 115021/di/ra
[NIGHTIME PHYSIOLOGICAL STATE]. HUANG HUI, ZHANG LI, LIU YAN-JIAO. *chinese journal of basic medicine in tcm*. 2003;8(12):50 (chi).

424- gera: 115198/di/ra
EXPERIENCIA CLINICA CON LA DIFERENCIACION Y EL TRATAMIENTO DEL INSOMNIO REFRACTARIO. QIAN YAN FANG. *journal of tcm*. 2003;29:11 (esp*).

El insomnio rebelde se caracteriza por: 1.un curso patológico prolongado de más de 3 meses de duración; 2. el fracaso de;

tratamiento de rutina; 3.la incapacidad de dormir ás de 2 horas de noche 4. un estado anímico bajo, acompañado de palpitaciones, hipomnesia y disfunciones de las vísceras.Todos estos factores afectan definitivamente la vida y el trabajo M paciente. A continuación se presenta una síntesis de la experiencia clínica de; autor en el tratamiento M insomnio refractario.

425- gera: 115378/di/ra
TRATTAMENTO DEL PIANTO NOTTURNO PATOLOGICO INFANTILE CON L'AGOPUNTURA SUL PUNTO ZHONGCHONG IN 100 CASI. ZHAO JIANXIN. *rivista italiana di medicina tradizionale cinese*. 2003;91(1):29 (ita*).

426- gera: 115663/di/ra
[REVIEW ON TCM TREATING SLEEP APNEA SYNDROME]. LI JIAN-SHENG, LI SU-YUN. *journal of laoning college of tcm*. 2003;5(1):60 (chi).

427- gera: 115772/di/ra
[OBSERVATIONS ON THE CURATIVE EFFECT OF COMBINED ACUPOINT INJECTION AND ELECTROACUPUNCTURE ON 40 INSOMNIA CASES]. WANG QQ, CHEN HL. *shanghai journal of acupuncture and moxibustion*. 2003;22(2):27 (chi*).

Purpose and method : Acupoint injection and electroacupuncture were combined to treat 40 insomnia cases. A medication group of 40 cases was established for comparison. Results : The effective rate was 97. 5 % in the treatment group and 77. 5 % in the medication group. A X2 text showed a significant difference between the two groups (P<0. 01). Conclusion : The combination of acupoint injection and electroacupuncture has a better effect

428- gera: 115932/di/ra
TREATMENT OF PHLEGM- AND HEAT-INDUCED INSOMNIA BY ACUPUNCTURE IN 120 CASES. CUI RUI AND ZHOU DEAN. *journal of tcm*. 2003;23(1):57 (eng).

429- gera: 116065/di/ra
[ON THE SYNDROME DIFFERENTIATION AND TREATMENT ADMINISTRATION OF INSOMNIA]. SHI MING XU JIAN XU HONG, ET AL. *shanghai journal of tcm*. 2003;37(3):18 (chi*).

According to the epidemiological survey of 1812 patients with insomnia, it is found that their clinical symptoms are characterized by more cases of high spirit and less mental asthenia, more cases of adequate qi-blood and less of inadequate qi-blood, more cases of no exogenous aspect and less of exogenous aspect, more young cases and less old cases, more cases of mental and body factors and less of simple constitutional weakness, more cases of excess syndrome and less of deficiency syndrome. Moreover, all the five zang-organs are believed to be involved in insomnia but its treatment focuses on the liver as well as other organs.

430- gera: 116172/di/ra
[CLINICAL PROGRESSION OF INSOMNIA TREATED WITH EXTERNAL THERAPY OF TRADITIONAL CHINESE MEDICINE]. HUANG YINGJUN. *journal of external therapy of tcm*. 2003;12(1):28 (chi).

431- gera: 116416/di/ra
[TREATMENT BASED ON SYNDROME DIFFERENTIATION OF INSOMNIA IN ACUPUNCTURE AND MOXIBUSTION.]. ZHANG QIN-CHUN, UANG XUE-FANG, HUANG QING-LIN. *journal of clinical acupuncture and moxibustion*. 2003;19(2):17 (chi).

432- gera: 117100/di/ra
[NARCOLEPSY]. LIU YAN-JIAO. *chinese journal of basic medicine in tcm*. 2003;9(3):64 (chi).

433- gera: 117385/nd/re
ACUPUNCTURE THERAPY FOR SLEEP-RELATED LARYNGOSPASM. SCHIFF E, OLIVEN A, ODEH M. *am j med sci*. 2003;326(2):107-9. (eng).

Sleep-related laryngospasm is a rare disorder that may cause

severe disablement. It refers to episodic arousal from sleep with a sense of suffocation followed by stridor. This phenomenon, which is caused by laryngospasm, is probably secondary to gastroesophageal reflux. The reflux is the target for current treatment of this serious disorder. Treatment by acupuncture for sleep-related laryngospasm has not been previously reported in the English medical literature. We describe a previously healthy patient with sleep-related laryngospasm caused by gastroesophageal reflux refractory to current medical treatment who was treated successfully using acupuncture.

434- gera: 117484/di/ra

THE LONG-TERM EFFECTS OF AURICULAR THERAPY USING MAGNETIC PEARLS ON ELDERLY WITH INSOMNIA. SUEN LK, WONG TK, LEUNG AW, IP WC. *complement ther med.* 2003;11(2):85-92. (eng).

OBJECTIVE: To examine the long-term effect of auricular therapy using magnetic pearls administered for the elderly suffering from insomnia. **DESIGN:** A follow-up study after a randomized controlled trial. **SETTINGS:** Four hostels for the elderly in Hong Kong. **INTERVENTIONS:** This paper focuses on reporting the long-term effect of auricular therapy using magnetic pearls in the experimental group of a randomized controlled study. Fifteen volunteer participants were followed up at 1-, 3-, and 6-month intervals after a 3-week treatment course. **OUTCOME MEASURES:** Objective sleep parameters using actigraphic monitoring were collected at different intervals of time after the therapy. **RESULTS:** Results of RANOVA demonstrate that there was a significant difference of nocturnal sleep time ($F(2.30,29.90)=3.63, P<0.05$) and marginally differences of sleep efficiency ($F(4.52)=2.52, P=0.05$) at baseline, immediately after the therapy, and at the three time intervals at 1, 3 and 6 months. The results illustrate that the mean nocturnal sleep time ($F=4.95, P=0.30, R(2)=0.91$) and the mean sleep efficiency ($F=13.50, P=0.19, R(2)=0.96$) also remained constant over the 6-month follow up period. The results of least square polynomial regression analysis also illustrate that the mean NST ($F=4.95, P=0.30, R(2)=0.91$) and the mean sleep efficiency ($F=13.50, P=0.19, R(2)=0.96$) remained constant over the 6-month follow up period. **CONCLUSION:** The results of this follow up study indicate that auricular therapy using magnetic pearls could have a long-term effect, at least within the observed period of time, on improving the quality as well as the quantity of sleep among the elderly.

435- gera: 117494/di/re

EFFECTS OF ACUPUNCTURE THERAPY ON INSOMNIA. SOK SR, ERLÉN JA, KIM KB. *j adv nurs.* 2003;44(4):375-84. (eng).

BACKGROUND: Acupuncture therapy, commonly used in clinical practice in oriental cultures, has the potential to produce a positive effect with patients experiencing insomnia. **AIM:** The purposes of this systematic review were: (1) to assess the trends across intervention studies using acupuncture for insomnia from 1975 to 2002, (2) to examine dependent variables, and (3) to evaluate the effects of acupuncture therapy on insomnia in older people. **METHOD:** Data were collected from November 2001 to January 2003. A wide range of electronic databases was searched using the keywords 'insomnia', 'acupuncture' and 'experimental design'. Papers were included if they were published in the English language between 1975 and 2002 and described an experimental study using acupuncture therapy to treat insomnia. Eleven reports met these criteria. **FINDINGS:** Most of the studies had been conducted since 1990. The findings showed that the first author was usually a Chinese medical doctor ($n = 9$) employed in a traditional department of medicine. Most of the papers were published in two journals: *International Journal of Clinical Acupuncture* and *Journal of Traditional Chinese Medicine*. Data were limited because of the small number of studies available. Half the studies had small samples (50 subjects or fewer), which were composed mainly of older women who had a variable duration of insomnia from 3 days to 34 years. The main method used to assess outcomes was questionnaire. All the studies reported statistically significant positive results. **CONCLUSION:** The results of this review suggest that acupuncture may be an

effective intervention for the relief of insomnia. Further research, using a randomized clinical trial design, are necessary to determine the effectiveness of acupuncture. More work is also needed to promote the long-term therapeutic effects of acupuncture and to compare it with other therapies for insomnia.

436- gera: 117584/nd/re

ACUPUNCTURE THERAPY FOR SLEEP-RELATED LARYNGOSPASM. SCHIFF E, OLIVEN A, ODEH M. *am j med sci.* 2003;326(2):107-9. (eng).

Sleep-related laryngospasm is a rare disorder that may cause severe disablement. It refers to episodic arousal from sleep with a sense of suffocation followed by stridor. This phenomenon, which is caused by laryngospasm, is probably secondary to gastroesophageal reflux. The reflux is the target for current treatment of this serious disorder. Treatment by acupuncture for sleep-related laryngospasm has not been previously reported in the English medical literature. We describe a previously healthy patient with sleep-related laryngospasm caused by gastroesophageal reflux refractory to current medical treatment who was treated successfully using acupuncture.

437- gera: 117600/di/ra

ACUPUNCTURE TREATMENT OF INSOMNIA--A REPORT OF 28 CASES. SHI D. *journal of traditional chinese medicine.* 2003;23(2):136-7. (eng).

438- gera: 117617/di/ra

CLINICAL OBSERVATION ON ACUPUNCTURE TREATMENT OF INSOMNIA IN 35 CASES. ZHANG Q. *journal of traditional chinese medicine.* 2003;23(2):125-6. (eng).

439- gera: 117850/di/ra

CLINICAL OBSERVATION ON TREATMENT OF 61 CASES OF INSOMNIA WITH AURICULAR PLASTER THERAPY. ZHANG JIA-TONG, ET AL. *world journal of acupuncture-moxibustion.* 2003;13(2):58 (eng*).

Objective: To observe the therapeutic effect of auricular plaster (otopoint-pressure) therapy in the treatment of insomnia. **Methods:** In this paper, 61 cases of insomnia patients including 16 males and 45 females were treated with Ershenmen (MA-TF 1) , Zhen (MA-AT) , Yuanzhong (MA-AT) , Nao Dian and E (MA-AT) , combined with other otopoints according to symptoms. The otopoint was stuck with a piece of plaster adhered with vaccaria seeds and pressured by the patient him- or her-self. The treatment was given twice a week, with 7 times being a therapeutic course. **Results:** After 1-2 courses of treatment, 19 (31. 15%) cases were cured, 34 (55. 74%) had improvement and 8 (13. 11%) had no changes, with the total effective rate being 86. 9%_ **Conclusion:** Auricular plaster therapy

440- gera: 118174/di/ra

[INSOMNIA TREATED BY ACUPUNCTURE PLUS PSYCHOLOGICAL THERAPY]. ZHANG MINYING. *shaanxi journal of tcm.* 2003;24(8):731 (chi*).

441- gera: 118370/di/ra

CRANIOPUNTURA E AGOPUNTURA SOMATICA NEL TRATTAMENTO DELL'INSONNIA SENILE. LU ZEIQIONG. *rivista italiana di medicina tradizionale cinese.* 2003;93(3):43 (ita*).

442- gera: 118514/di/ra

INSOMNIES. GORET O. *acupuncture & moxibustion.* 2003;2(1-2):76 (fra).

443- gera: 118761/di/ra

[HUOCHUAN ERZHI DECOCTION IN THE TREATMENT OF 30 CASES OF INSOMNIA DUE TO CHRONIC COLITIS]. LIN DE. *journal of henan university of chinese medicine.* 2003;18(107):63 (chi).

444- gera: 118926/di/ra

[COMPARISON OF SEDATIVE-HYPNOTIC FUNCTION BETWEEN "GANMAI DAZAO DECOCTION" AND ITS

MODIFIED PRESCRIPTIONS IN RATS]. LI JUN LIN XIU-FENG YUAN CAN-XING, ET AL. *shanghai journal of tcm.* 2003;37(8):6 (chi*).

445- gera: 118927/di/ra
[CLINICAL OBSERVATION OF LIVER DISCHARGING AND BLOOD ACTIVATING THERAPY FOR PERSISTENT INSOMNIA]. XU JIAN WANG QIAO-CHU XU HONG. *shanghai journal of tcm.* 2003;37(8):9 (chi*).

446- gera: 118928/di/ra
[BRIEFING ON THE RELATIONSHIP BETWEEN DISHARMONY OF YING AND WEI AND SENILE SLEEPLESSNESS]. ZHANG SHIJIN. *henan tcm.* 2003;23(8):5 (chi*).

447- gera: 119250/di/ra
THE LONG-TERM EFFECTS OF AURICULAR THERAPY USING MAGNETIC PEARLS ON ELDERLY WITH INSOMNIA. L K P SUEN, T K S WONG, A W N LEUNG, W C. *complementary therapies in medicine.* 2003;11(2):85 (eng).

448- gera: 119402/di/ra
[TREATING OBSTRUCTIVE SLEEP APNEA SYNDROME WITH TUINA]. CHEN JIAN. *chinese manipulation and qi gong therapy.* 2003;19(4):15 (chi).

449- gera: 119421/di/ra
[PROMOTE BLOOD CIRCULATION AND REMOVE BLOOD STASIS: AN IMPORTANT THERAPEUTIC METHOD FOR TREATMENT OF INSOMNIA IN THE OLD]. ZHAO ZONG-GANG, LI CHUAN-SEN, YU XIAO. *chinese journal of basic medicine in tcm.* 2003;9(7):14 (chi).

450- gera: 119432/di/ra
[SELECTION OF PROFESSOR YAN DEXIN'S EXPERIENCE IN DIAGNOSIS AND TREATMENT OF INSOMNIA BASED ON DISORDERS OF QI AND BLOOD]. YANG ZHIMIN, ET AL. *chinese archives of tcm.* 2003;21(8):1247 (chi).

451- gera: 119708/di/ra
[116 CASES OF NOCTURNAL FRETFULNESS IN INFANTS TREATED BY MASSAGE]. YUE GUOQIANG. *journal of external therapy of tcm.* 2003;12(2):36 (chi).

452- gera: 119716/di/ra
[EXPERIMENTAL STUDY ON TREATMENT OF INSOMNIA WITH THE METHOD OF SUPPLEMENTING THE HEART AND DREDGING THE VESSELS]. WU YUHONG, ET AL. *chinese archives of tcm.* 2003;21(4):506 (chi).

453- gera: 119769/di/ra
[STUDY DEVELOPMENT OF REACTIVE COMPONENT WITH SEDATION AND HYPNOSIS ACTION]. LI TING-LI, HUANG LI-LI,HAO LI-LI,ET AL. *information on tcm.* 2003;20(3):18 (chi).

454- gera: 120218/di/ra
[OBSTINATE INSOMNIA TREATED BY SEPARATE REGULATION OF YIN AND YANG]. LI SHAO-ZUN, GONG JIAN-GANG. *henan tcm.* 2003;23(4):46 (chi).

455- gera: 120502/di/ra
CLINICAL OBSERVATION ON ACUPUNCTURE TREATMENT OF INSOMNIA IN 35 CASES. ZHANG QIUJU. *journal of tcm.* 2003;23(2):125 (eng).

456- gera: 120666/di/ra
ACUPUNCTURE TREATMENT OF INSOMNIA - A REPORT OF 28 CASES. SHI DOUGH. *journal of tcm.* 2003;23(2):136 (eng).

457- gera: 120730/di/ra
OBSERVACION CLINICA DE 42 CASOS DE INSOMNIO REFRACTARIO TRATADO MEDIANTE LA ACUPRESION. ZHANG QINGPING. *journal of tcm- el puso de la vida.* 2003;34:21 (esp).

458- gera: 121072/di/ra

[CONNECTION ACUPUNCTURE AND CHINESE MEDICINE HERBS TO SUFFER FROM INSONMID CLINICAL OBSERVATION]. WANG RUO-MEI, YE TIAN, LIU LAN. *journal of clinical acupuncture and moxibustion.* 2003;19(5):20 (chi*).

459- gera: 121269/di/ra
TREATMENT OF INSOMNIA BY BODY ACUPUNCTURE AND AURICULAR-PLASTER THERAPY: A REPORT OF 45 CASES. WANG SHU-GAO ZHANG FU-BIN SONG SHU-LAN. *journal of acupuncture and tuina science.* 2003;1(2):53 (eng*).

460- gera: 122149/di/ra
EFFECT OF ORALLY ADMINISTERED SHAO-YAO-GAN-CAO-TANG (SHAKUYAKU-KANZO-TO) ON MUSCLE CRAMPS IN MAINTENANCE HEMODIALYSIS PATIENTS: A PRELIMINARY STUDY. FUMIHIKO HINOSHITA ET AL. *american journal of chinese medicine.* 2003;31(3):445 (eng*).

461- gera: 122197/di/ra
[CLINICAL STUDY ON EAR POINT TAPPING AND PRESSING THERAPY FOR TREATMENT OF OBSTRUCTIVE SLEEP APNEA SYNDROME]. WANG XIAOHONG YUAN YADONG, WANG BAOFA, ET AL. *chinese acupuncture and moxibustion.* 2003;23(7):386 (chi*).

462- gera: 122200/di/ra
[ACUPUNCTURE REGULATING YINQIAO AND YANGQIAO MERIDIANS FOR TREATMENT OF 87 CASES OF INSOMNIA]. ZHANG HONG, DENG HONG, XIONG KE. *chinese acupuncture and moxibustion.* 2003;23(7):394 (chi*).

463- gera: 122253/di/ra
[56 CASES OF INSOMNIA OF DEFICIENCY SYNDROME IN HEART AND SPLEEN TREATED WITH GUIPI DECOCTION COMBINED WITH CHIROPRACTIC]. XIAO SIFEI, ET AL. *chinese journal of information on tcm.* 2003;10(7):60 (chi).

464- gera: 122416/di/ra
[CLINICAL STUDY ON ACUPUNCTURE AND TRADITIONAL CHINESE MEDICINE COMBINED IN THE TREATMENT OF INSOMNIA]. XU HONG, HU ZHEN-XIA, WANG QIAO-CHU. *liaoning journal of tcm.* 2003;30(7):570 (chi*).

465- gera: 122439/di/ra
[SLEEPLESS (86 CASES) TREATED BY PRESSING BORNEOL ON EARS]. CHEN HONG,WANG LIQUN. *journal of practical tcm.* 2003;19(7):372 (chi).

466- gera: 122560/di/ra
[TREATMENT OF OBSTRUCTIVE SLEEP APNEA SYNDROME WITH ACUPUNCTURE AND MOXIBUSTION]. XIA XIAOHONG, CHEN MEIE. *jiangsu journal of tcm.* 2003;24(7):44 (chi).

467- gera: 122561/di/ra
[PHARMACOLOGICAL STUDY ON TREATMENT OF INSOMNIA WITH GROUNDNUT LEAVES]. SHI MING, XU HONG, ZHANG XIAOFENG, ETAL. *jiangsu journal of tcm.* 2003;24(7):48 (chi).

468- gera: 122624/di/ra
[INSOMNIA]. X. *china reflexology journal.* 2003;4: (chi).

469- gera: 122782/di/ra
[OBSERVATIONS ON THE CURATIVE EFFECT OF COMBINED ACUPUNCTURE AND MEDICINE ON INSOMNIA]. CHEN XH. *shanghai journal of acupuncture and moxibustion.* 2003;22(11):30 (chi*).

470- gera: 122928/di/ra
[CLINICAL OBSERVATION ON EFFECT OF AURICULAR ACUPOINT PRESSING IN TREATING SLEEP APNEA SYNDROME]. WANG XIAO-HONG, YUAN YA-DONG, WANG

BAO-FA, ET AL . **chinese journal of integrated traditional and western medicine**. 2003;23(10):747 (chi*).

471- gera: 123433/di/ra
[**INSOMNIA**]. X. **china reflexology journal**. 2003;6: (chi).

472- gera: 124426/di/ra
ACUPRESSURE IMPROVES SLEEP QUALITY IN PATIENTS WITH END-STAGE RENAL DISEASE COMPARED WITH NO TREATMENT CONTROLS (BUT NOT COMPARED WITH SHAM ACUPRESSURE). X. **focus on alternative and complementary therapies**. 2003;8(2):210 (eng).

Résumé et commentaires de: Tsay S-L, Chen M-L.
Acupressure and quality of sleep in patients with end-stage renal disease – a randomized controlled trial. *Int J Nurs Stud* 2003; 40: 17.

473- gera: 125640/di/ra
[**SHALLOW-NEEDLING METHOD IN ACUPUNCTURE FOR 45 CASES OF INSOMNIA**]. XIONG XIU-DONG, CHEN XU-JUN, LIANG DONG-FU, ET AL. **journal of fujian college of tcm**. 2003;13(5):44 (chi*).

474- gera: 125756/nd/re
ACUPUNCTURE THERAPY FOR SLEEP-RELATED LARYNGOSPASM. SCHIFF E, OLIVEN A, ODEH M. **am j med sci**. 2003;326(2): (eng).

475- gera: 125854/nd/re
EFFECTS OF ACUPUNCTURE THERAPY ON INSOMNIA. SOK SR, ERLÉN JA, KIM KB. **j adv nurs**. 2003;44(4): (eng).

476- gera: 131530/di/ra
TERAPIA DI 42 CASI DI INSONNIA INTRATTABILE MEDIANTE PRESSIONE SU PUNTI. ZHANG QINGPING. **rivista italiana di medicina tradizionale cinese**. 2003;94(4):48 (ita*).

The author have in recent years treated 42 cases of intractable insomnia (with a history of over 2 years) by point pressure, yielding quite satisfactory results when compared with those treated with clorazepam. This is reported as

477- gera: 133497/di/ra
TRATAMIENTO ACUPUNTURAL DEL 156 CASOS DE INSOMNIO REBELDE EN DROGADICTOS EN TRATAMIENTO. X. **medicina energetica**. 2003;19:20 (esp).

478- gera: 133658/di/ra
ANGUSTIA E INSOMNIO. X. **revista argentina de acupuntura**. 2003;104:2732 (esp).

479- gera: 134844/di/ra
OBSERVACIÓN CLÍNICA DEL TRATAMIENTO ACUPUNTURAL DE 35 CASOS DE INSOMNIO. ZHANG QIU JU . **el pulso de la vida**. 2003;36:24 (esp).

480- gera: 134852/di/ra
TRATAMIENTO DEL INSOMNIO CON ACUPUNTURA -UN INFORME DE 28 CASOS. SHI DONG LI. **el pulso de la vida**. 2003;36:34 (esp).

481- gera: 136120/di/ra
80 CAS DE SOMNAMBULISME ET DE PLEURS NOCTURNES TRAITÉS PAR EXTRACTION D'UN LIQUIDE BLANC DES POINTS SI FENG (PC 21 / P.E-M.S.10). LIN ZHI WAN. **acupuncture traditionnelle chinoise**. 2003;8:76 (fra).

Source : Zhong Guo Zhen Jiu (L'Acupuncture-Moxibustion de Chine) 1/1990, p. 16

482- gera: 123626/di/ra
[**BRIEF TALK ON DONG DEMAO'S EXPERIENCE IN TREATMENT OF INSOMNIA**]. XU LINGYUN. **chinese archives of tcm**. 2004;21(1):9 (chi).

483- gera: 124187/di/ra
[**EXPERIMENTAL STUDY OF SINISAN ON SLEEP**]. LI TING-LI, ZHU WEI-LI, QI FENG-QIN, ET AL. **information on tcm**. 2004;21(1): (chi*).

484- gera: 124586/di/ra
[**EFFECT OBSERVATION OF ASOMNIA TREATED WITH ELECTRO-PUNCTURE AND MASSAGE: 86 CASES REPORTED**]. KONG FAN-ZHONG, ZHOU QIU-YING. **journal of clinical acupuncture and moxibustion**. 2004;20(1):8 (chi).

485- gera: 124590/di/ra
[**CLINICAL OBSERVATION OF REFRACTORY INSOMNIA TREATED WITH SCALP SEVEN ACUPUNCTURE**]. LUO PING, ZHANG SHU-YI . **journal of clinical acupuncture and moxibustion**. 2004;20(1):29 (chi).

486- gera: 125059/di/ra
[**RECENT CONDITIONS ABOUT DIAGNOSIS AND TREATMENT OF INSOMNIA**]. JIN SHUO-XUAN. **tianjin journal of tcm**. 2004;21(1):76 (chi*).

487- gera: 129297/di/ra
[**THERAPEUTIC ANALYSIS ON TREATMENT OF 76 CASES OF INSOMNIA BY USING ACUPUNCTURE NAMED SANJIAOHUIXUE**]. ZHANG DAXU ET AL. **jilin journal of tcm**. 2004;24(5):43 (chi).

488- gera: 129313/di/ra
[**SIX METHODS OF DIFFERENTIATION OF SYNDROMES FOR CHILD SOMNAMBULISM**]. LIU CHUANZHEN . **henan tcm**. 2004;24(5):62 (chi).

489- gera: 129364/di/ra
[**ANSHEN LIMIAN TANG FOR INSOMNIA : AN OBSERVATION OF 160 CASES**]. YAN LIXIN. **journal of gansu college of tcm**. 2004;21(2):23 (chi).

490- gera: 129418/di/ra
[**THERAPEUTIC OBSERVATIONS ON 68 CASES OF INSOMNIA TREATED WITH ADDITIONAL AND REDUCED XUE FU ZHU YU TANG**]. LIU AILING . **forum on tcm**. 2004;19(3):24 (chi).

491- gera: 129613/di/ra
[**EFFECT STUDY OF ZHENZAO CAPSULE ON RATS' SPONTANEOUS ACTIVITY AND SLEEP**]. LIU HAI-YAN, FANG TAI-HUI, XU HUI-QIN. **modern journal of integrated traditional chinese and western medicine**. 2004;13(12):1568 (chi*).

492- gera: 129718/di/ra
[**ADOLESCENT INSOMNIA AND ANXIETY TREATED BY DUSHU PILL**]. YANG YONGFENG. **shaanxi journal of tcm**. 2004;25(6):494 (chi).

493- gera: 129905/di/ra
[**TREATMENT OF 40 CASES ON INSOMNIA WITH NEEDLING OF HEAD**]. SANG PENG,WANG SHUN(. **helongjiang journal of tcm**. 2004;3:43 (chi).

494- gera: 130141/di/ra
[**STUDY ON THE TREATMENT OF INSOMNIA IN ESSENTIALS OF INTERNAL CLASSIC**]. TENG JING . **traditional chinese medicinal research**. 2004;17(3):7 (chi).

495- gera: 130151/di/ra
[**THE CHANGES OF MERIDIAN ENERGY IN INSOMNIA PATIENT'S HEART AND KIDNEY MERIDIAN**]. LIU YUE-YANG, ZHOU HENG-DE. **journal of clinical acupuncture and moxibustion**. 2004;20(6):7 (chi*).

This paper investigates the Heart and Kidney meridian energy changes of insomnia patient. Methods: This paper investigates the Heart and Kidney meridian energy changes of insomnia patient through the measurement between insomnia patient and the healthy by using MEAD (Meridian Energy Analysis Devic) . The investigation is conducted respectively from nine different conditions of the Heart and Kidney meridian energy changes. Result: The result shows that there exists significant difference (P < 0. 05) between the insomnia patient and the healthy when their Heart meridian energy increased and the Kidney meridian energy decreased. Conclusion:The pathologic

change of insomnia patient is related to their hearts and kidneys. Disharmony of heart and kidney is the

496- gera: 130252/di/ra

[THE TCM SYNDROME PATTERNS OF OBSTRUCTIVE SLEEP APNEA HYPOVENTILATION SYNDROME]. SU JUN, LI LEI . *new journal of tcm*. 2004;36(7):25 (chi).

497- gera: 130274/di/ra

[INSOMNIA TREATED BY JIEYU'ANSHEN DECOCTION]. QIAO SHUZHEN, LUO XIAOMIN, TIAN LAMEI. *shaanxi journal of tcm*. 2004;25(7):599 (chi).

498- gera: 130373/di/ra

[STUDY OF ZHENZAO CAPSULE ON SENILE INSOMNIA]. LIU HAI-YAN, WANG HAN, ZHANG BIAO, ET AL. *modern journal of integrated traditional chinese and western medicine*. 2004;13(13):1706 (chi*).

499- gera: 130381/di/ra

[CLINICAL OBSERVATIONS ON TREATMENT OF INSOMNIA BY TRANQUILIZING AND ALLAYING EXCITEMENT IN 32 CASES]. WANG XIAO-LING ET AL. *jilin journal of tcm*. 2004;24(6):37 (chi).

500- gera: 130492/di/ra

[CLINICAL OBSERVATIONS ON THE TREATMENT OF INSOMNIA BY A YANG-REDUCING AND YIN-REINFORCING METHOD]. CHEN HW, CAO DF, TANG YC . *shanghai journal of acupuncture and moxibustion*. 2004;23(7):14 (chi*).

Purpose To find a best method for treating insomnia. Method Sixty patients were randomly divided into two groups. A treatment group was treated by a yang-reducing and yin-reinforcing method according to the Chinese medical theory of "the upper is yang and the lower is yin" and the acupuncture therapeutic principle of "motion means reducing and rest means reinforcing". Yingdang (Ex-HN 3), Baihui (GV 20), Fengchi (GB 20) and Yifeng (TE 17) were needled by a reducing technique and Sanyinjiao (SP 6), Taichong (LR 3), Taixi (KI 3) and Zusanli (ST 36), by a reinforcing technique. A control group was treated by oral administration of oryzanol, diazepam and Qiye'anshenpian. The curative effects were evaluated after 2 courses of treatment in both groups. Results In the treatment group, the cure rate and the marked effectiveness rate were 47. 40o and 42. 100, respectively, with a total effective rate of 97. 4%; in the control group, the cure rate and the marked effectiveness rate were 23. 30o and 26. 700, respectively, with a total effective rate of 83. 3%. There was a significant difference in the total effective rate between the two groups (P<0. 05). There were very significant differences in the cure rate and the marked effectiveness rate between the two groups (P<0. 01 in both). Conclusion The yang-reducing and yinreinforcing method of acupuncture is very effective in treating insomnia and its effect is significantly superior to that of medication.

501- gera: 130515/di/ra

["XINGPI YANGER GRANULE" FOR NIGHT SWEATS IN 36 CHILDREN]. DING LI-FENG. *shanghai journal of tcm*. 2004;38(7):38 (chi*).

502- gera: 130726/di/ra

[INQUIRY AND ANALYSIS OF DIAGNOSIS AND TREATMENT OF INSOMNIA AND LETHARGY]. HUANG SHUIQING,XU ZHIWEI . *forum on tcm*. 2004;19(4):5 (chi).

503- gera: 130737/di/ra

[ADVANCE IN THE TREATMENT OF SENILE INSOMNIA TREATED WITH TCM]. LIU HAIYAN,ZHU JIA . *forum on tcm*. 2004;19(4):51 (chi).

504- gera: 131411/di/ra

[INSOMNIA TREATED BY MODIFIED XUEFUZHUYU DECOCTION]. MENG LEI . *shaanxi journal of tcm*. 2004;25(8):700 (chi).

505- gera: 131510/di/ra

TRATTAMENTO CON AGOPUNTURA DELL'INSONNIA

CAUSATA DA MUCOSITÀ E CALORE IN 120 CASI. CUI RUI ED ALTRI. *rivista italiana di medicina tradizionale cinese*. 2004;95(1):65 (ita*).

The authors treated 120 cases of phlegm- and heat-induced insomnia by using a lot of acupoints to regulate the spleen, the stomach, the mind and the heart. The points used together brought about satisfactory effects.

506- gera: 131806/di/ra

[EXPERIENCES OF TONG XIAOLIN IN TREATING INSOMNIA WITH GRASP OF MAIN SYNDROMES]. WANG XIA. *china journal of tcm and pharmacy*. 2004;19(8):493 (chi).

507- gera: 131922/di/ra

[FEATURES AND APPLICATION OF CHINESE HERBS FOR PROMOTING SLEEP]. LIU YAN-JIAO . *chinese journal of basic medicine in tcm*. 2004;10(8):65 (chi).

508- gera: 131996/di/ra

[CLINICAL STUDY ON THE DECOCTION FOR CLEARING AWAY GALLBLADDER-HEAT WITH COPTIDIS FOR THE TREATMENT OF OBSTRUCTIVE SLEEP APNEA HYPOPNEA SYNDROME]. SU JUN, ET AL. *chinese journal of information on tcm*. 2004;11(10):854 (chi*).

Objective To appraise the effect of Decoction for Clearing away Gallbladder-Heat with Coptidis for the treatment of Obstructive Sleep Apnea Hypopnea Syndrome (OSAHS), especially hypoventilation. Methods 27 patients with OSAHS was treated with Decoction for Clearing away Gallbladder-Heat with Coptidis for 2 weeks. 27 patients with OSAHS was treated with Duxil served as controls. Polysomnography was performed and questionnaires recorded prior to and immediately after treatment both group. Results The efficiency of Decoction for Clearing away Gallbladder-Heat with Coptidis was 77%. The medial sleep-time increased 47 minutes, the medial hypopnoea time decreased 10 minutes, and the medial time for SaO₂ less than 90% decreased 15 minutes. Comparing with the Duxil group, the difference was significant (P<0.01). Conclusion The Decoction for Clearing away Gallbladder- Heat with Coptidis improved OSAHS, especially those with hypoventilation and hypo-oxygen.

509- gera: 132168/di/ra

[AN INVESTIGATION ON THE FACTORS ASSOCIATED WITH THE THERAPEUTIC EFFECTS OF UVULOPALATOPHARYNGOPLASTY FOR THE TREATMENT OF OBSTRUCTIVE SLEEP APNEA HYPOPNEA SYNDROME]. BAI XIA, SHEN YI. *chinese journal of integrated traditional and western medicine otorhinolaryngology*. 2004;12(5):263 (chi*).

510- gera: 132406/di/ra

[IT'S BECOMING TO USE BANXIA TO CURE INSOMNIA]. SUN JIAN-PING. *guang ming journal of tcm*. 2004;113(4):36 (chi).

511- gera: 132642/di/ra

[LIU YI-SHENG'S CLINICAL EXPERIENCE OF TREATING INSOMNIA]. LIN YAN,YUAN QUAN-YING . *jiangxi journal of tcm*. 2004;35(10):7 (chi).

512- gera: 132722/di/ra

CLINICAL OBSERVATION ON TREATMENT OF WOMEN CLIMACTERIC INSOMNIA BY PLUM-BLOSSOM NEEDLE: A REPORT OF 50 CASES. LI XIAO-QING, LI NAI-RONG . *journal of acupuncture and tuina science*. 2004;2(4):35 (eng*).

To observe the treatment of 50 female patients with climacteric insomnia by plum-blossom needle therapy. According to differentiation of symptoms and signs the head, back, belly and other location were tapping. Besides 50 patients were treated with Western medicine as a control group. The result showed the immediate and long- term effect in plum-blossom needle group was better than that in control group (P<0.01).

513- gera: 132737/di/ra

TREATMENT OF INFANTILE NIGHT CRYING BY DR. SHAN'S INFANTILE TUINA THERAPY. ZHENG LAN-FENG.

journal of acupuncture and tuina science. 2004;2(5):19 (eng*).

In order to observe the clinical effect of Tuina therapy for infantile night crying, 20 cases of infantile night crying were treated by Dr. SHAN's infantile Tuina therapy upon pattern identification. In 20 cases, the results showed cure in 12 cases, improvement in 6 cases, failure in 2 cases and the total effective rate in 90.0%. Dr. SHAN's infantile Tuina therapy was created by late Dr. SHAN Ji-ping and is remarkably effective in the therapeutic effects and easy to be accepted by sick children.

514- gera: 132743/di/ra

OBSERVATIONS ON THE TREATMENT OF 32 CASES OF INSOMNIA BY MANIPULATIONS OF DIGITAL- PRESSING ACUPOINTS AND TUINA ALONG MERIDIANS. ZHANG YU-XIN , JIA CHAO . **journal of acupuncture and tuina science.** 2004;2(5):30 (eng*).

Five kinds of manipulations of plucking, circular rubbing, pecking, pinching and patting were performed on the channels of Governor Vessel and bilateral Bladder Meridian. According to syndrome differentiation, all the 32 cases were divided into 5 syndromes of the stagnated liver-qi causing fire syndrome, the phlegm-heat attacking upper parts syndrome, the hyperactivity of fire due to yindeficiency syndrome, the deficiency of both heart and spleen syndrome and the timidity due to insufficiency of qi and deficiency of blood of the heart syndrome and were then treated by different manipulations. After 2 courses of treatment, 25 cases were cured, 7 cases got marked effectiveness, no case failed and the effective rate was 100%.

515- gera: 132881/di/ra

[NEW THERAPEUTICS METHOD OF INSOMNIA TREATED WITH ACUPUNCTURE]. CHEN LI-YI, GUO YUAN-QI. **journal of clinical acupuncture and moxibustion.** 2004;20(10):21 (chi).

516- gera: 132896/di/ra

[THE CLINICAL EFFECT OBSERVATION OF INSOMNIA TREATED WITH ACUPUNCTURE:42 CASES REPORTED]. WANG SHU-JUAN, TIAN LI-JIAN . **journal of clinical acupuncture and moxibustion.** 2004;20(8):20 (chi).

517- gera: 133667/di/ra

[TREATMENT OF INSOMNIA WITH XIAOYAO PILL]. QUAN SHIJIAN. **shaanxi journal of tcm.** 2004;25(10):875 (chi).

518- gera: 134068/di/ra

AURICULOTHERAPIE ET SOMMEIL. ROUXVILLE Y. **cahiers de biotherapie.** 2004;189:56-60 (fra).

Le pavillon de l'oreille est relié aux centres nerveux supérieurs. Agir par l'oreille modifie l'état du système sympathique. Les insomnies réactionnelles sont accessibles à des protocoles d'auriculothérapie simples. Par contre, dans les cas chroniques ou pour le sevrage d'hypnotiques, un diagnostic plus élaboré des points d'oreille par auriculomédecine permettra un meilleur choix des points à traiter, en personnalisant les soins.

519- gera: 134175/di/ra

ACUPRESSURE AND TRANSCUTANEOUS ELECTRICAL ACUPOINT STIMULATION IN IMPROVING FATIGUE, SLEEP QUALITY AND DEPRESSION IN HEMODIALYSIS PATIENTS . SHIOW-LUAN TSAY, K-CHING CHO AND MEI-LI CHEN. **american journal of chinese medicine.** 2004;32(3):407 (eng*).

The purpose of this study was to test the effectiveness of acupressure and Transcutaneous Electrical Acupoint Stimulation (TEAS) on fatigue, sleep quality and depression in patients who were receiving routine hemodialysis treatment. The study was a randomized controlled trial; qualified patients were randomly assigned to acupressure, TEAS or control groups. Patients in the acupressure and TEAS groups received 15 minutes of treatment 3 times a week for 1 month, whereas patients in the control group only received routine unit care. A total of 106 patients participated in the study. Methods of measurement included the revised Piper Fatigue Scale (PFS), the Pittsburgh Sleep Quality Index and the Beck

Depression Inventory. Data were collected at baseline, during the intervention and post-treatment. The results indicated that patients in the acupressure and TEAS groups had significantly lower levels of fatigue, a better sleep quality and less depressed moods compared with patients in the control group based upon the adjusted baseline differences. However, there were no differences between acupressure and TEAS groups in outcome measures. This study provides an alternative method for health care providers in managing

520- gera: 134207/di/ra

INTRADERMAL ACUPUNCTURE ON SHEN-MEN AND NEI-KUAN ACUPOINTS IN PATIENTS WITH INSOMNIA AFTER STROKE . YOUNG SUK KIM, SANG HO LEE, WOO SANG JUNG, SEONG UK PARK, SANG KWAN MOON, CHANG NAM KO, KI HO CHO AND HYUNG SUP BAE. **american journal of chinese medicine.** 2004;32(5):771 (eng*).

This is the first study that focuses on the effects of intradermal acupuncture on insomnia after stroke. We enrolled hospitalized stroke patients with insomnia and assigned them into a real intradermal acupuncture group (RA group) or a sham acupuncture group (SA group) by randomization. The RA group received intradermal acupuncture on Shen-Men (He-7) and Nei-Kuan (EH-6) for 2 days, and the SA group received sham acupuncture on the same points. The effectiveness was measured by the Morning Questionnaire (MQ), Insomnia Seventy Index (ISI), and Athens Insomnia Scale (AIS). These scales were examined by an independent, blinded neurologist before, and 1 and 2 days after treatment, repeatedly. Thirty subjects (15 in the RA group and 15 in the SA group) were included in the final analysis. The RA group showed more improvement on insomnia than the SA group. Repeated measures analysis detected that there were significant between-subjects effects in the MQ, the ISI and the AIS. In conclusion, we suggest that intradermal acupuncture on Shen-Men and Nei-Kuan is a useful treatment for post

521- gera: 134296/di/ra

[CHIEF PHYSICIAN ZHANG LIANGJI' S THINKING IN DIAGNOSIS AND TREATMENT OF INSOMNIA]. ZHANG ZHENLEI, ET AL. **chinese archives of tcm.** 2004;22(11):1994 (chi).

522- gera: 134319/di/ra

[RESEARCH OF INSOMNIA TREATED BY SAIFUSI ORAL LIQUID]. SHI SHI-DE, ET AL . **chinese journal of information on tcm.** 2004;11(11):967 (chi*).

523- gera: 134393/di/ra

[INVESTIGATION ON THE TITLE OF BU MEI (SLEEPLESS)]. SUN HONG-SHENG, YANJI-LAN. **chinese journal of medical history.** 2004;34(4):214 (chi*).

There are various titles applied for "sleepless", including mu bu ming (unclosed eyes), bu de mian (unable to sleep), bu de wo (unable to lie down), shi mian (insomnia). The implications of the titles vary according to different periods. Bu de wo (unable to lie down) was first appeared in Zu bi shi yi mai jiu jing (Moxibustion Classic of Foot and Arm Eleven Channels) and Yin yang shi yi mai jiu jing (Moxibustion Classic of Yin – Yang Eleven Channels), while bu de o, mu bu ming, and ye bu mei were appeared in Huang di nei jing (Inner Canon of Yellow Emperor), bu mei was first seen in Nan jing (Classic of Questioning). When bu de mian and bu de o were applied in Zhang Zhongjing's Shang han lun (Treatise on Cold Pathogenic Diseases) and Jin kui yao lue (Synopsis of Golden Chamber), it exerted good influence in later generations. The title of bu mei was more popular after the Ming and Qing dynasties. This title is the most appropriate one from the standpoint of syndrome

524- gera: 134516/di/ra

[ANALYSIS OF INSOMNIA TREATED WITH ANCIENT ACUPUNCTURE]. LIU LIGONG, GU JIE, YANG YUNHUA . **forum on tcm.** 2004;19(6):13 (chi).

525- gera: 134534/di/ra

[EXPERIMENTAL STUDY OF INSOMNIA TREATMENT OF MIDDLE -AGED AND ELDERLY PEOPLE BY YANGWEI ANSHEN ORAL LIQ-UID]. BAI YAPING, LU JINCANG, LIU

ERJUN, ET AL. *hebei journal of tcm*. 2004;26(8):639 (chi*).

526- gera: 134697/di/ra

[78 PATIENTS WITH INSOMNIA TREATED WITH ACUPUNCTURE ON BAIHUI]. WANG HAI - BO. *journal of clinical acupuncture and moxibustion*. 2004;20(11):40 (chi).

527- gera: 134909/di/ra

[CLINICAL OBSERVATION ON 31 CASES OF INSOMNIA TREATED BY CHINESE DRUG JIE YU PILLS]. HONG YONGBO, LAO HECHUN, YAO WEIHAI ET AL. *el pulso de la vida*. 2004;45(11):843 (chi*).

528- gera: 135233/di/ra

LE REVE EN MEDECINE TRADITIONNELLE CHINOISE. ZHAO BAIXIAO. *revue francaise d'acupuncture*. 2004;117:28 (fra*).

529- gera: 135244/di/ra

LE REVE EN MEDECINE TRADITIONNELLE CHINOISE (SUITE). ZHAO BAIXIAO. *revue francaise d'acupuncture*. 2004;118:34 (fra*).

Dreams were studied in antiquity in the light of their divinatory meaning. Since then, generations of physicians took interest in dreams and described their mechanism, essentially related to the motion of hun and po, various categories of dreams (premonitory, metaphorical, pathological... dreams) the causes of dreams and in the case of pathological dreams, methods for diagnosis and principals of treatment.

530- gera: 135285/di/ra

STUDIO CLINICO SUL TRATTAMENTO CON AGOPUNTURA DELL'INSONNIA IN 35 CASI. ZHANG QIUJU. *rivista italiana di medicina tradizionale cinese*. 2004;96(2):55 (ita*).

Since 1998, the author of this article has treated 35 cases of insomnia with body acupuncture plus the plum- blossom needle tapping, and obtained satisfactory results as reported in the following.

531- gera: 135291/di/ra

TRATTAMENTO CON AGOPUNTURA DELL'INSONNIA. SHI DONGLI. *rivista italiana di medicina tradizionale cinese*. 2004;96(2):64 (ita*).

Insomnia, also called hyposomnia, refers to the disorder characterized by failure to obtain a normal sleep. For mild cases, the patients are slow to go unto sleep, or in an oneirism or with very short sleep. For severe cases, the patients can only have a sleep of 2 to 3 hours or even no sleep during the night, which inserts a serious impact on the normal life of the patients. Using shenmen (HT 7) and bensen (GB 13) as the main points, the author has treated 28 cases of insomnia with quick and satisfactory therapeutic effect. A report follows.

532- gera: 135418/di/ra

[CLINICAL CHARACTERISTICS AND THROUGH-LIVER TREATMENT OF SEDATIVE-HYPNOTIC- INDEPENDENT INSOMNIA]. SHI MING. *shanghai journal of tcm*. 2004;38(11):13 (chi*).

533- gera: 135647/di/re

EFFECTS OF ELECTROACUPUNCTURE AT 'ANMIAN (EXTRA)' ACUPOINTS ON SLEEP ACTIVITIES IN RATS: THE IMPLICATION OF THE CAUDAL NUCLEUS TRACTUS SOLITARIUS. YI PL, TSAI CH, LIN JG, LIU HJ, CHANG FC. *j biomed sci*. 2004;11(5):579-90 (eng*).

Electroacupuncture (EAc) possesses a broad therapeutic effect, including improvement of sleep disturbances. The mechanism of sleep improvement with EAc, however, is still unclear. The present study investigated the effects of EAc stimulation of 'Anmian (extra)' acupoints on sleep organization and the implication of an active structure, the caudal nucleus tractus solitarius (NTS). Rats were implanted with electroencephalogram (EEG) recording electrodes, and 32-gauge acupuncture needles were bilaterally inserted into 'Anmian (extra)' acupoints in the rats, followed by electrical stimulation for 20 min. Twenty-three-hour continuous EEGs were then recorded. Results showed that rapid eye movement sleep (REMS) was enhanced during the dark period when a

single EAc stimulation was given 25 min prior to the onset of the dark period. REMS and slow-wave sleep (SWS) increased during the dark period after administration of EAc stimuli on 2 consecutive days. Electrical stimulation of non- acupoints produced no change in the sleep pattern. Pharmacological blockade of muscarinic cholinergic receptors by systemic administration of scopolamine dose-dependently attenuated EAc-induced changes in REMS and SWS. Furthermore, electrical lesions in the bilateral caudal NTS produced significant blockade of EAc-induced sleep enhancement. However, in rats without EAc, scopolamine increased SWS during the dark period, but caudal NTS lesions did not alter sleep. In addition, neither EAc nor scopolamine with EAc manipulation produced any change in the slow-wave activity (SWA) during SWS; however, the SWA during SWS was significantly reduced after caudal NTS lesion with EAc. These results suggest that the caudal NTS may be involved in the regulation of EAc- induced sleep alterations.

534- gera: 136075/di/ra

OUR PLACE IN NATURE: RECONNECTING WITH THE EARTH FOR BETTER SLEEP. OSCHMAN JL. *journal of alternative and complementary medicine*. 2004;10(5):735-36 (eng).

535- gera: 136080/di/ra

THE BIOLOGIC EFFECTS OF GROUNDING THE HUMAN BODY DURING SLEEP AS MEASURED BY CORTISOL LEVELS AND SUBJECTIVE REPORTING OF SLEEP, PAIN, AND STRESS. GHALY M, TEPLITZ D. *journal of alternative and complementary medicine*. 2004;10(5):767-76 (eng).

Objectives: Diurnal cortisol secretion levels were measured and circadian cortisol profiles were evaluated in a pilot study conducted to test the hypothesis that grounding the human body to earth during sleep will result in quantifiable changes in cortisol. It was also hypothesized that grounding the human body would result in changes in sleep, pain, and stress (anxiety, depression, irritability), as measured by subjective reporting. Subjects and Interventions: Twelve (12) subjects with complaints of sleep dysfunction, pain, and stress were grounded to earth during sleep for 8 weeks in their own beds using a conductive mattress pad. Saliva tests were administered to establish pregrounding baseline cortisol levels. Levels were obtained at 4-hour intervals for a 24-hour period to determine the circadian cortisol profile. Cortisol testing was repeated at week 6. Subjective symptoms of sleep dysfunction, pain, and stress were reported daily throughout the 8-week test period. Results: Measurable improvements in diurnal cortisol profiles were observed, with cortisol levels significantly reduced during night-time sleep. Subjects' 24-hour circadian cortisol profiles showed a trend toward normalization. Subjectively reported symptoms, including sleep dysfunction, pain, and stress, were reduced or eliminated in nearly all subjects. Conclusions: Results indicate that grounding the human body to earth (_earthing_) during sleep reduces night-time levels of cortisol and resynchronizes cortisol hormone secretion more in alignment with the natural 24- hour circadian rhythm profile. Changes were most apparent in females. Furthermore, subjective reporting indicates that grounding the human body to earth during sleep improves sleep and reduces pain and stress.

536- gera: 136655/di/ra

[THE 4 MEDICAL RECORDS OF PROFESSOR CAO HONG XIN IN INSOMNIA]. ZHANG YE-HUI, LIN XIAO-FENG. *acta chinese medicine and pharmacology*. 2004;32(6):49 (chi).

537- gera: 137015/di/ra

[DIAGNOSIS AND TREATMENT OF INSOMNIA IN PATIENTS WITH TUMORS]. XIAO LI, YU ZHENG, LI YUAN. *chinese journal of basic medicine in tcm*. 2004;10(10):21 (chi).

538- gera: 138445/di/ra

[200 CASES OF INSOMNIA TREATED BY PULSE IN EAR POINTS]. GE YANAN, XU HAIYAN. *journal of external therapy of tcm*. 2004;13(6):31 (chi).

539- gera: 138877/di/ra

200 CASOS DE INSOMNIO TRATADOS POR PRESIÓN AURICULAR MÁS ACUPUNTURA. X. el pulso de la vida- journal of tcm. 2004;41:11 (esp).

540- gera: 139092/di/ra
[COMPARATIVE STUDIES ON THE SEDATIVE AND HYPNOTIC EFFECTS OF THE SEMEN ZIZIPHI SPINOSAE (SZS) AND THE PARCHED SEMEN ZIZIPHI SPINOSAE (PSZS)]. LU JIN – FANG, ZHANG ZHENG, NING KANG – JIAN. *journal of traditional chinese veterinary medicine.* 2004;23(6):3 (chi*).

541- gera: 139411/di/ra
INQUIETUD DE VIVIR: EL SUEÑO EXCESIVO COMO MECANISMO DE BLOQUEO. VILLANUEVA R. *medicina tradicional.* 2004;198:21 (esp).

542- gera: 139425/di/ra
EL SUEÑO . X. medicina tradicional. 2004;199:27 (esp).

543- gera: 139426/di/ra
TRATAMIENTO DEL INSOMNIO. X. medicina tradicional. 2004;199:29 (esp).

544- gera: 140935/di/re
TAI CHI AND SELF-RATED QUALITY OF SLEEP AND DAYTIME SLEEPINESS IN OLDER ADULTS : A RANDOMIZED CONTROLLED TRIAL. LI F, FISHER KJ, HARMER P, IRBE D, TEARSE RG, WEIMER C. *j am geriatr soc.* 2004;52(6):892-900 (eng).

545- gera: 116847/di/ra
TCM TREATMENT FOR 63 CASES OF SENILE DYSSOMNIA. YANG Y, LI H, ZHANG S, LI Q, YANG X, CHEN X, ZHAO D, WANG Y. *journal of traditional chinese medicine.* 2005;25(1):45-9. (eng).
 In order to study the therapeutic effects of the tcm drugs on senile dyssomnia, 121 such patients were randomly divided into a treatment group of 63 cases (given the tcm drugs) and a control group of 58 cases (given estazolam). The changes shown in the sdrs and hama scores and the other indexes were observed in both of the two groups to evaluate the therapeutic effects. The results showed that the effective rate was 76.3% in the treatment group, and it was 69.1% in the control group; and that the tcm drugs had better effects in improving such symptoms as lethargy, dry mouth, and rebound of insomnia. Therefore, it can be concluded that the effect of the tcm drugs is better for senile dyssomnia than that of the western drug estazolam.

546- gera: 124420/di/ra
[CONTROLLED STUDY ON ACUPOINT GROUP PRESCRIPTIONS FOR ELECTROACUPUNCTURE TREATMENT OF INSOMNIA]. CHEN L. *chinese acupuncture and moxibustion.* 2005;25(10):687-8. (chi).
 OBJECTIVE: To probe into the best acupoint group prescription for electroacupuncture treatment of insomnia. METHODS: Sixty-six cases were randomly divided into 3 groups. In the group I Sishencong (EX-HN 1) and Fengchi (GB 20) were selected, in the group II, Baihui (GV 20) and left Shenmen (HT 7), in the group III. Yin-tang (EX-HN 3) and Shenting (GV 24). Their therapeutic courses and therapeutic effects were compared. RESULTS: The effective rate was respectively 72.73%, 77.27% and 95.45% in the 3 groups, the group III being significantly better than the group I and the group II (P < 0.01), but there was no significant difference between the group I and the group II (P > 0.05). CONCLUSION: Electroacupuncture at Yintang (EX-HN 3) and Shenting (GV 24) has obvious

547- gera: 124735/di/ra
[CLINICAL OBSERVATION ON ACUPUNCTURE AT ZHAOHAI (KI 6) AND SHENMAI (BL 62) FOR TREATMENT OF INSOMNIA]. WANG SG. *chinese acupuncture and moxibustion.* 2005;25(11):771-2. (chi*).*
 OBJECTIVE: To observe therapeutic effect of acupuncture at Zhaohai (KI 6) and Shenmai (BL 62) on insomnia. METHODS: Seventy-eight cases of insomnia were randomly divided into a treatment group of 40 cases and a control group of 38 cases.

The treatment group were treated with acupuncture at Zhaohai (KI 6) using reinforcing method and at Shenmai (BL 62) using reducing method, combined with acupuncture at acupoints selected according to syndrome differentiation. The control group were treated with acupuncture at acupoints selected according to syndrome differentiation. Their therapeutic effects were compared. RESULTS: The cured rate and the total effective rate were 62.5% and 97.5% in the treatment group, and 31.6% and 68.4% in the control group, respectively, with significant difference between the two groups (P < 0.01). CONCLUSION: Acupuncture at Zhaohai (KI 6) and Shenmai (BL 62) has a better therapeutic effect on insomnia. PROTOCOLE TRADUIT.

548- gera: 125935/di/ra
[EFFECT OF ACUPUNCTURE AT SISHENCONG (EX-HN 1) ON SLEEPING IN THE PATIENT OF INSOMNIA]. ZHANG CH, LIU JM. *chinese acupuncture and moxibustion.* 2005;25(12):847-9. (chi).
 OBJECTIVE: To assess therapeutic effect of acupuncture at Sishencong (EX-HN 1) on insomnia. METHODS: Sixty-five cases of insomnia were treated with acupuncture at Sishencong (EX-HN 1) and their quality and compositions of sleeping before and after treatment were evaluated with a multichannel sleep detector. RESULTS: After treatment, the quality of sleeping increased significantly (P < 0.05), and the sleeping rate increased from (61.95 +/- 22.90)% before treatment to (79.27 +/- 11.05)% after treatment (P < 0.05). CONCLUSION: Acupuncture at Sishencong (EX-HN 1) has obvious therapeutic effect on insomnia.

549- gera: 126022/di/ra
CHAI-HU-GUI-ZHI-GAN-JIANG-TANG REGULATES PLASMA INTERLEUKIN-6 AND SOLUBLE INTERLEUKIN-6 RECEPTOR CONCENTRATIONS AND IMPROVES DEPRESSED MOOD IN CLIMACTERIC WOMEN WITH INSOMNIA. USHIROYAMA T, IKEDA A, SAKUMA K, UEKI M. *american journal of chinese medicine.* 2005;33(5):703-11. (eng).
 This study was performed to compare the effects of Chai-hu-gui-zhi-gan-jiang-tang (Saiko-keishi-kankyo-to), an herbal medicine, in improving depressed mood and on plasma interleukin-6 (IL-6) and soluble interleukin-6 receptor (sIL-6R) concentrations with those of anti-depressants in peri- and post-menopausal women. Ninety patients complaining of menopausal symptoms including insomnia who were diagnosed with mood disorder based on DSM-IV were recruited and separated into two groups (Chai-hu-gui-zhi-gan-jiang-tang group was selected on the basis of SHO for 42 cases, while anti-depressants were used for 48 cases), and plasma IL-6 and sIL-6R concentrations were determined before and after three months of the treatment. There were no significant differences in the decrease in both climacteric and Hamilton depression score after treatment between the two groups. Plasma IL-6 and sIL-6R concentrations were significantly lower in the Chai-hu-gui-zhi-gan-jiang-tang group (-34.8 +/- 15.5% and -22.4 +/- 14.6%, respectively) than in the anti-depressant group (7.5 +/- 4.8% and 2.4 +/- 3.8%, respectively) after 3 months of treatment. Correlations between rate of decrease in climacteric score and plasma IL-6 (R = 0.498, P = 0.0056) and sIL-6R (R = 0.512, P = 0.0045) concentrations were observed. Chai-hu-gui-zhi-gan-jiang-tang reduced plasma IL-6 and sIL-6R concentrations in relation to improvement of depressed mood during treatment. The findings of this study suggest that Chai-hu-gui-zhi-gan-jiang-tang has the potential to decrease morbidity by alleviation of stress reactions in peri- and post-menopausal women.

550- gera: 135804/di/ra
FORTY CASES OF INSOMNIA TREATED WITH ACUPUNCTURE, MASSAGE AND MUSIC THERAPY. WANG LIN-YU. *world journal of acupuncture-moxibustion.* 2005;15(3):54 (eng*).

551- gera: 135936/di/ra
CLINICAL OBSERVATION OF THE TREATMENT OF 87 CASES OF INSOMNIA WITH ACUPUNCTURE TO REGULATE THE YINQIAO AND YANGQIAO CHANNELS. HONG ZHANG, HONG DENG AND JING HE. *international*

journal of clinical acupuncture. 2005;14(2):91 (eng).
Objective: To observe the therapeutic effect of acupuncture by regulating the Yinqiao and Yangqiao Channels in the treatment of insomnia. Method: 87 cases of insomnia were treated with acupuncture to regulate the Yinqiao and Yangqiao Channels (treatment group) and 45 cases were treated with Klonopin (control group). The therapeutic effects were assessed and compared using the Self-Rating Scale of Sleeping. Results: The total effective rate was 94.2% in the treatment group and 82.2% in the control group, with a very significant difference before and after treatment ($p < 0.001$), and with no significant difference between both groups ($P > 0.05$). Conclusion: The therapeutic effect of acupuncture to regulate the Yinqiao and Yangqiao Channels is superior to that of Klonopin in the treatment of insomnia and is especially useful for treating patients who cannot take or

552- gera: 135941/di/ra
THE EFFECT THAT PASTING GARLIC CREAM ON RN8 HAS ON AMYLASE, CORTISONE AND IGA LEVELS IN SLEEP-DEPRIVED YOUTH. NA SHI, YONG HUANG, QIUSHI LI, JING CHEN, AND SHENGXU WANG. **international journal of clinical acupuncture.** 2005;14(2):119 (eng).

Objective: To study the effect that pasting garlic cream on RN8 has on amylase, cortisone and IgA levels in youth deprived of sleep for 48 hours. Method: Twenty healthy young men were divided randomly into three groups: the control group (A), the sleep deprivation (SD) group (B) and the treatment group (C). Volunteers in groups B and C were deprived of sleep for 48 hours and, in the mean time, those in group C were treated by pasting garlic cream on RN8. The volunteers in group A remained in a normal state without any treatment. After 48 hours of sleep deprivation for groups B and C, levels of cortisone in saliva, amylase in urine and IgA in serum of all the volunteers were tested. Results: After 48 hours of SD, the levels of IgA in groups B and C decreased, and overall, there was a significant difference between groups A and B and groups A and C ($P < 0.05$); the amylase levels in groups B and C decreased and the difference between groups A and B was significant ($P < 0.05$); Cortisone levels in groups B and C were higher than that of group A and there were significant differences between groups A and B and groups B and C ($P < 0.05$). Conclusion: Pasting garlic cream on RN8 has the effect of resisting fatigue caused by sleep

553- gera: 136821/di/ra
[EXPERIENCES OF WANG JINJUE IN TREATING INSOMNIA]. QIU PING. **china journal of tcm and pharmacy.** 2005;20(1):46 (chi).

554- gera: 136899/di/ra
[A SYSTEMATIC EVALUATION OF RANDOMIZED CONTROLLED TRIALS FOR ACUPUNCTURE AND MOXIBUSTION TREATMENT OF INSOMNIA]. LI NING, WU BIN, WANG CHENG-WEI, ET AL. **chinese acupuncture and moxibustion.** 2005;25(1):7 (chi*).

Objective To assess the therapeutic effect of acupuncture on insomnia. Methods A systematic evaluation of all relevant randomized controlled trials (RCT) about acupuncture and moxibustion treatment of insomnia was carried out. The data were statistically analyzed with a special software RevMan 4.1. Results Six papers of RCT including 585 patients met the enrolled criteria. All of the trials were of lower in methodological quality with-out using blind method; Meta-analysis indicated that odds ratio was 3.55, 95% confidence interval [2.50, 5.05], $P < 0.0001$, as acupuncture group compared with drug group. Conclusion Acupuncture is possibly effective for insomnia. However, because of lower methodological quality of all the trials, this conclusion has not enough evidence.

555- gera: 137062/di/ra
[TREATMENT PHLEGM AND BLOOD STAISS HANDS OVER A CHINESE MEDICINE FOR INSOMNIA]. HUANG TAO, QIAN WEI-ZHONG. **chinese journal of basic medicine in tcm.** 2005;11(1):46 (chi*).

Summary: The cause of disease of insomnia is numerous, generalizing its disease machine, gross from brain mansion yin and yang transportation" cannot from its teachings" , the spirit

blood quarrels with the result that. Investigate its reason, in addition to internal organs weakly, have the muddy phlegm, extravasated blood still, this text overview the treatment phlegm and blood stasis hands over a Chinese medicine for with the result that not the of insomnia make use of medicine certificate cures the method with turn the phlegm and blood stasis rather the absolute being medicine goes together with five applications and relevant medicine reason function report way .

556- gera: 137528/di/ra
[OBSERVATION OF CURATIVE EFFECT ON TREATMENT SECOND HEALTH INSOMNIA BY MASSAGE]. LUO REN-HAN. **chinese manipulation and qi gong therapy.** 2005;21(2):6 (chi).

557- gera: 137636/di/ra
[YANG ZHI MIN'S OBSERVATION KNOWLEDGE AND TREATMENT EXPERIENCE OF INSOMNIA OF FIRE SYNDROME CAUSED BY STAGNATION OF THE LIVER QI]. LIN HAO, LAO YINGRONG, LI XIANXIONG. **forum on tcm.** 2005;20(2):12 (chi).

558- gera: 137736/di/ra
[THE METHOD AND THE TRAIN OF THOUGHTS OF TREATING SEILE ASOMNIA IN TRADITIONAL CHINESE MEDICINE]. JIN RONG-HUA ZHU YING-WEN. **guang ming journal of tcm.** 2005;20(2):46 (chi).

559- gera: 138154/di/ra
[ON TREATMENT OF 72 CASES OF INSOMNIA BY ACUPUNCTURE]. WANG RUICHAO ET AL. **jilin journal of tcm.** 2005;25(3):42 (chi).

560- gera: 138203/di/ra
PRELIMINARY INVESTIGATION ON REGULARITY OF SELECTING ACUPOINTS FOR TREATMENT OF INSOMNIA BY ACUPUNCTURE . LIN XUE. **journal of acupuncture and tuina science.** 2005;3(1):53 (eng*).

In the literatures from 1994-2004, points selected for treatment of insomnia were Shenmen (HT 7), Sanyinjiao (SP 6), Taichong (LR 3), Baihui (GV 20), Sishencong (Ex-HN 1), Taixi (KI 3) and Anmian etc. Most of the key acupoints are yuan source points of yin meridians or located at head region, and back-shu points were selected as

561- gera: 138286/di/ra
[TO DISCUSS THE DOCTRINE ON SLEEP IN THE TCM CLASSIC, THE YELLOW EMPEROR' S CANON OF INTERNAL MEDICINE ON THE BASIS OF SEASONS, ZANG-ORGANS AND YIN-YANG]. SUN HONGSHENG, YAN JILAN. **journal of beijing university of tcm.** 2005;28(1):20 (chi).

562- gera: 138366/di/ra
[CLINICAL STUDY OF SENILE INSOMNIA TREATED WITH OTOPOINTS]. SUN JIA-PING. **journal of clinical acupuncture and moxibustion.** 2005;21(1):36 (chi*).

Objective: Adopting a scientific approach to examine the effectiveness of auricular therapy using magnetic pearts on sleep promotion in the elderly. Methods: One hundred and twenty eligible participants were randomly allocated to receive a 3 – week auricular therapy using Junci Medulla (control group) , Semen Vaccariae (control group) or magnetic pearts (experimental group) . Seven auricular points(Shen-men, Heart, Kidney, liver, Spleen, Subcortex, Occiput) which are thought to have an effect on promoting sleep in the elderly were selected. Re-sults:Significant improvement in the sleep efficiency (SE) collected by wrist actigraphy was observed in the experimental group using magnetic pearts after the therapy ($P < 0.05$) , the markedly effective rate was 17% , the effective rate was 65% , and the overall effective rate was 82% . In a backward multiple regression, the effect of auricular therapy on sleep efficiency (SE) after allowing of age in female participants is of high statistical significance ($F_{3,106} = 9.04$, $P < 0.001$, $R^2 = 0.20$) . Conclusion: Auricular therapy using magnetic pearts is an

563- gera: 138380/di/ra

[45 PATIENTS WITH INSOMNIA TREATED WITH ACUPUNCTURE]. ZHANG XING-YUAN. *journal of clinical acupuncture and moxibustion*. 2005;21(2):24 (chi).

564- gera: 138493/di/ra

[PROFESSOR WU LIWEN'S EXPERIENCE ON TREATING INSOMNIA BY TRADITIONAL CHINESE MEDICINE]. ZHOU QIANG, EN LIU ENYUAN. *journal of gansu college of tcm*. 2005;22(1):5 (chi).

565- gera: 138590/di/ra

[THE ETIOLOGY AND DIFFERENTIAL TREATMENT OF INSOMNIA]. MIAO LINGNA, LI WENZHAN. *journal of henan university of chinese medicine*. 2005;20(1):43 (chi*). Discussing the etiology and treatment of insomnia, the paper holds that the etiology of insomnia is connected to heart, *spleen, liver, kidney and deficiency of yin-blood. It is also argued that yin-blood and the pathologic changes belong to imbalance of yin and yang. Excess and deficiency should be differentiated and body and mind should be regulated in treatment.

566- gera: 138663/di/ra

[RECENT STUDY ON TCM TREATING INSOMNIA]. CHENG QIAN, SHI XIN-DE. *journal of liaoning college of tcm*. 2005;7(1):20 (chi).

567- gera: 138968/di/ra

[STUDY ON CORRELATIVITY BETWEEN CHANGES OF RESPIRATORY AT SLEEP AND TCM SYNDROME TYPES IN THE PATIENT OF CEREBRAL INFARCTION]. GUO XIANGFANG, SU JUN. *journal of tcm*. 2005;46(2):128 (chi*). Objective: To observe characteristics of TCM syndrome types in the patient of cerebral infarction, and cerebral infarction with respiratory disorder at sleep. Methods: 90 in-patients of cerebral infarction were monitored by polychannel somnogram (PSG) within 72 hours of admission 'which were used as diagnosis of respiratory disturbance at sleep 'and all of the patients with apoplexy involving the channels and collaterals were divided into 3 types, collaterals hollow and pathogenic wind attacking the(interior; Yin-deficiency of the liver and kidney, and wind-Yang stirring upper; hot phlegm and excess of Fu-organs, and wind phlegm stirring the upper. Results: The patient had sleep structure disorder, with large change of blood pressure and lower hear variety ,and decrease of degree of blood oxygen saturation. The apnea indexes were the highest for the patient with phlegm-heat hollow- organ excess, wind-phlegm stirring the upper, and basic normal for collateral hollow and pathogenic wind attacking th(interior. Conclusion : There is close relation of cerebral infarction, especially in the patient of hot

568- gera: 139023/di/ra

[TREATMENT OF NARCOLEPSY USING ACUPUNCTURE COMBINED WITH EAR ACUPRESSURE.]. ZHOU YI . *journal of the japan society of acupuncture and moxibustion*. 2005;55(1):97 (jap).

569- gera: 139052/di/ra

[YE JINGHUA'S CLINICAL EXPERIENCE ON THE TREATMENT OF INSOMNIA USING COMPLEX POTION OF CALMING MIND]. YE YUMEI . *journal of traditional chinese medicinal literature*. 2005;1:33 (chi).

570- gera: 139519/di/ra

[CLINICAL OVERVIEW OF INSOMNIA TREATED WITH NON-MEDICINE IN MODERN MEDICINE]. PANG JUN, LEI LONG-MING. *modern journal of integrated traditional chinese and western medicine*. 2005;14(2):267 (chi).

571- gera: 139786/di/ra

[INSOMNIA OF HEART SPLEEN DEFICIENCY TYPE TREATED BY MODIFIED GUIPI DECOCTION]. ZHAO JIANMEI, LIU ZONGCHUN, ZHAO JIANLI. *shaanxi journal of tcm*. 2005;26(2):128 (chi).

572- gera: 139818/di/ra

[DISCUSSION ON TREATMENT OF INSOMNIA FROM HEART AND LIVER]. TENG JING, ZHANG JI-XIANG.

shandong journal of tcm. 2005;24(1):6 (chi*).

To study the main pathogenesis mechanism of insomnia, The internal injury by seven emotions is the reason, the irritability is the important mechanism, the liver dysfunction is the cause of the disease, Therefore the disease should be treated from heart and liver, In clinical treatment, the insomnia can be divided into five kinds of syndrome, which are qi stagnation of heart and liver, blood stasis of heart and liver, heart disturbed by liver-fire, blood-deficiency of heart and liver, hyperactivity of fire due to deficiency of yin syndrome,

573- gera: 139994/di/ra

[CLINICAL APPLICATION OF ACUPOINT ZHAOHAI (KI 6) IN FOUR CASES]. NI JIAN-ZHENG . *shanghai journal of tcm*. 2005;39(3):46 (chi*).

This paper summarized the clinical application of Zhaohai (KI 6) and presented its application in four cases of insomnia, chronic pharyngitis, retention of urine and neurodermatitis.

574- gera: 140260/di/ra

ACUPUNCTURE FOR INSOMNIA IN PREGNANCY A PROSPECTIVE, QUASI-RANDOMISED, CONTROLLED STUDY. JOÃO BOSCO GUERREIRO DA SILVA, MARY UCHIYAMA NAKAMURA, JOSÉ ANTONIO CORDEIRO, LUIZ KULAY JR. *acupuncture in medicine*. 2005;23(2):47 (eng). Objective This study was undertaken to test the effects of acupuncture on insomnia in a group of pregnant women under real life conditions, and to compare the results with a group of patients undergoing conventional treatment alone (sleep hygiene). Methods A total of 30 conventionally treated pregnant women were allocated at random into groups with or without acupuncture. Seventeen patients formed the study group and 13 the control group. The pregnant women scored the severity of insomnia using a Numerical Rating Scale from 0 to 10. Women were followed up for eight weeks and interviewed five times, at two-week intervals. Results Eight women dropped out, five in the study group and three in the control group. The study group reported a larger reduction on insomnia rating (5.1) than the control group (0.0), a difference which was statistically significant (P=0.0028). Average insomnia scores decreased by at least 50% over time in nine (75%) patients in the study group and in three (30%) of the control group. Conclusion The results of this study suggest that acupuncture alleviates insomnia

575- gera: 140433/di/ra

[OBSERVATION ON THERAPEUTIC EFFECT OF ACUPUNCTURE AT POINTS DALING (PC 7) AND "SIMIAN" IN 48 CASES OF REFRACTORY INSOMNIA.]. LI PEI, DU YE-LAN, LIU MEI. *chinese acupuncture and moxibustion*. 2005;25(5):331 (chi*).

Objective To find the best method for increasing clinical therapeutic effect on refractory insomnia. Methods Ninety- one cases of refractory insomnia were randomly divided into an observation group (n = 48) and a routine acupuncture group (n =43). The observation group were treated by acupuncture at acupoints Daling (PC 7) and "Shimian", and the routine acupuncture group by routine acupoints. After treatment of 4 courses, their therapeutic effects were compared. Results The cured rate was 81. 25% in the observation group and 34. 88% in the routine acupuncture group, the observation group being significantly better than the routine acupuncture group (P< 0. 01). And the cured rate of one course in the observation group was significantly higher than that in the routine acupuncture group (P<0. 01). Conclusion The therapeutic effect of acupuncture at Daling (PC 7) and "Shimian" is significantly better than that of acupuncture at routinely selected acupoints.

576- gera: 140453/di/ra

[TO EVALUATE THE EFFECTIVENESS OF A STANDARDIZED PROTOCOL OF AURICULAR THERAPY USING MAGNETIC PEARLS ON SLEEP PROMOTION IN THE ELDERLY.]. SUEN KWAI-PING LORNA. *chinese acupuncture and moxibustion*. 2005;25(4):257 (chi*).

Objective: To examine the effectiveness of adopting a standardized protocol of auricular therapy using magnetic pearls on sleep promotion in the elderly. Methods Sixty eligible participants were invited to receive a 3-week auricular therapy using magnetic pearls (@66 Gauss). Seven auricular points

(Shenmen, Heart, Kidney, Liver, Spleen, Subcortex, Occiput) which are thought to have an effect on promoting sleep in the elderly were selected. Results Significant improvement in the sleep efficiency (SE) collected by wrist actigraphy was observed before, during and after treatment course ($P < 0.01$). The overall effective rate in insomnia with different TCM syndrome types ranged from 66.7% to 90.9% (average 81.7%). No significant difference in the effect of the therapy in terms of SE could be observed between clients with excessive or deficiency syndrome even when the treatment protocol was standardized ($P > 0.05$). Conclusion A standardized protocol of auricular therapy using magnetic pearls for sleep improvement might be appropriate for the ageing population who are homogeneous in terms of age and general

577- gera: 140486/di/ra

[COMPARISON OF THE THERAPEUTIC EFFECT OF ACUPUNCTURE ON INSOMNIA AT THE TIME OF CHEN AND XU]. TANG PING, WANG ZHANG-LIAN, CHEN LI-FANG. *journal of clinical acupuncture and moxibustion*. 2005;21(4):32 (chi*).

Objective: To compare the therapeutic effects of acupuncture on insomnia at the different time: chen and xu. Methods: Forty four patients with insomnia were randomly divided into two groups: twenty two observed groups and twenty two control group, the same main acupoints combining modification and the same stimulation were given at the time of xu and chen respectively. After three treatment courses continually, the therapeutic effects were observed. Results: The total effective rate of observed group is 95.46 percent, the total effective rate is 77.27 percent. Conclusion: The therapeutic effects of acupuncture on insomnia is better at the time of xu than chen.

578- gera: 140596/di/ra

[OBSERVATIONS ON THE EFFICACY OF MIND-TRANQUILIZING ACUPUNCTURE FOR TREATING 63 INSOMNIA PATIENTS.]. WANG XL. *shanghai journal of acupuncture and moxibustion*. 2005;24(6):21 (chi*).

Objective To investigate the clinical efficacy of mind-tranquilizing acupuncture for treating insomnia. Method Sixty-three patients were randomly divided into a treatment group of 32 cases and a control group of 31 cases. The treatment group received mind-tranquilizing acupuncture and the control group, oral depression-relieving and mind-calming herbal granules, for 30 days. Results The response rate was 87.50% in the treatment group and 77.43% in the control group. There were significant differences in falling-asleep time, continuous sleep time and number of nocturnal waking ($P < 0.05$) and a very significant difference in dream improvement ($P < 0.01$) between the two groups. There were no significant differences in after-waking status and sleep evaluation ($P > 0.05$). Conclusion Clinically mind-tranquilizing acupuncture has a better effect on insomnia than depression-relieving

579- gera: 140603/di/ra

[CLINICAL OBSERVATION ON TREATMENT OF DYSSOMNIA OF HEROIN ADDICTS AFTER DETOXIFICATION BY ELECTRO-ACUPUNCTURE.]. ZHU ZC, MU JP, LIANG Y, ET AL. *shanghai journal of acupuncture and moxibustion*. 2005;24(5):6 (chi*).

Objective To investigate the effect of the electro-acupuncture in the treatment of dyssomnia of heroin addicts after detoxification. Methods Fifty heroin dependent patients who had been abstained from drugs for 7 days, with negative urinary test for morphine, were randomly divided into treatment group of 25 cases and control group of 25 cases; patients in treatment group were treated with electro-acupuncture and patients in control group were given no any treatment; Based on the three items of dyssomnia in the Pro-longed Withdrawal Symptoms Rating Scale; the symptoms of patients in two group were rated before treatment, 4 weeks, 8 weeks and 10 weeks after treatment respectively. Results After treatment, the scores of the single item and the total scores of dyssomnia in treatment group were remarkably reduced when compared with before treatment ($P < 0.001$), and also were remarkably lower than those in control group during the same periods ($P < 0.001$). Conclusion Electro-acupuncture could rapidly improve the dyssomnia of heroin addicts after detoxification, deepen sleeping status, improve sleeping

580- gera: 140749/di/ra

A CLINICAL STUDY: THE TREATMENT OF 50 CASES OF SENILE INSOMNIA WITH MEDICINAL PLASTERS ON RN8. LI H. *international journal of clinical acupuncture*. 2005;14(3):187 (eng).

Objective: To observe the effect of ginkgo extract on treating senile insomnia by pasting it on Shenque (RN 8). Method: Fifty cases were randomly divided into 2 groups. The 25 patients in the treatment group were treated with the application of ginkgo extract on RN 8 and oral doses of Vitamin C. The 25 patients in the control group were treated with the application of amyllum on RN 8 and the medicine Surazepam. One treatment course is three days and all patients were observed for 7 courses. The curative effects and sleep quality were compared between both groups. Results: There was not an obvious difference in the curative effect between the groups, but the sleep quality improved more in the treatment group than in the control group. Conclusion: The therapy of pasting ginkgo

581- gera: 140936/di/re

LE TAI CHI AMÉLIORE LA QUALITÉ DU SOMMEIL CHEZ LES PERSONNES ÂGÉES. MARC I. *critique et pratique*. 2005;16 fev:43 (fra).

Résumé et commentaires de : Tai chi and self-rated quality of sleep and daytime sleepiness in older adults : A randomized controlled trial. Li F, Fisher KJ, Harmer P, Irbe D, Tearse RG, Weimer C. *J Am Geriatr Soc*, juin 2004;

582- gera: 140967/nd/re

MODULATION OF THE SLEEP STATE-DEPENDENT P50 MIDLATENCY AUDITORY-EVOKED POTENTIAL BY ELECTRIC STIMULATION OF ACUPUNCTURE POINTS. BRAY PA, MAMIYA N, FANN AV, GELLMAN H, SKINNER RD, GARCIA-RILL EE. *arch phys med rehab*. 2005;86(10):2018-26 (eng).

OBJECTIVE: To determine if the P50 midlatency auditory evoked potential, a sleep state-dependent waveform thought to be generated by the reticular activating system, is modulated after surface stimulation of acupuncture points (ie, electroacupuncture). DESIGN: P50 potential recordings were carried out before, during, and after electroacupuncture. SETTING: A clinical research center. PARTICIPANTS: Eighty healthy subjects ages 25 to 55 were recorded in 7 investigations. INTERVENTIONS: Stimulation of 3 specific acupuncture points (Pericardium 6, Heart 3, Liver 3) was compared with no stimulation or with stimulation of control points (Gall Bladder 34, Large Intestine 11, Small Intestine 3). We compared different frequencies of stimulation (5, 60, 100Hz), unilateral versus bilateral stimulation, and the effects of repeated episodes of stimulation. MAIN OUTCOME MEASURES: P50 auditory evoked potential latency, amplitude (measure of level of arousal), and habituation (measure of sensory habituation) at interstimulus interval of 250ms. RESULTS: Electroacupuncture at specific points decreased P50 potential amplitude versus electroacupuncture at control points ($P = .006$) or versus no stimulation ($P < .001$). The optimal effective frequency was 5Hz ($P < .05$ at 5Hz, $P > .05$ at 60 and 100Hz), and unilateral electroacupuncture was not as effective as bilateral electroacupuncture ($P = .007$). Repeated episodes of bilateral electroacupuncture showed additive effects ($P < .05$). There were no differences in responsiveness across sexes ($P = .79$), and electroacupuncture did not affect P50 potential habituation ($P > .05$). CONCLUSIONS: Electroacupuncture may be effectively used to decrease arousal levels, perhaps as adjunct therapy for disorders of hypervigilance.

583- gera: 141526/di/ra

CLINICAL OBSERVATIONS OF THE ACUPUNCTURE TREATMENT OF INSOMNIA, EMOTIONAL DISORDERS AND ADHD. HOU W, XU G, BUTLER JC, WANG H. *international journal of clinical acupuncture*. 2005;14(3):221 (eng).

Objective: To explore the effect of treating insomnia, emotional disorders (i.e., anxiety, depression or stress) and ADHD (Attention Deficit Hyperactivity Disorder) with acupuncture. Methods: 55 cases of insomnia and/or emotional disorder and/or ADHD were treated with acupuncture with two groups of acupuncture points (scalp and body). The therapeutic

effects were quantified and assessed with the Self-Rating Scale of Sleeping, Emotion and Activities. Results: The total effective rate was 96.4% in all 55 patients; 95.5% in the subgroup of 47 insomnia patients; 89.4% in the subgroup of 39 emotional disorder patients and 100% in the subgroup of three ADHD patients. Conclusion: Acupuncture can treat insomnia, emotional disorders and ADHD with few Side effects.

584- gera: 142045/di/ra

CLINICAL OBSERVATIONS OF THE ACUPUNCTURE TREATMENT OF INSOMNIA, EMOTIONAL DISORDERS AND ADHD. HOU W, XU G, BUTLER JC, WANG H. *international journal of clinical acupuncture*.

2005;14(3):221 (eng).

Objective: To explore the effect of treating insomnia, emotional disorders (i.e., anxiety, depression or stress) and ADHD (Attention Deficit Hyperactivity Disorder) with acupuncture. Methods: 55 cases of insomnia and/or emotional disorder and/or ADHD were treated with acupuncture with two groups of acupuncture points (scalp and body). The therapeutic effects were quantified and assessed with the Self-Rating Scale of Sleeping, Emotion and Activities. Results: The total effective rate was 96.4% in all 55 patients; 95.5% in the subgroup of 47 insomnia patients; 89.4% in the subgroup of 39 emotional disorder patients and 100% in the subgroup of three ADHD patients. Conclusion: Acupuncture can treat insomnia, emotional disorders and ADHD with few Side effects.

585- gera: 142330/di/ra

[TREATMENT OF 37 FACIAL SPASM PATIENTS BY SEVERAL-NEEDLE SHALLOW PUNCTURE AND CIRCULATING QI]. TANG YP. *shanghai journal of acupuncture and moxibustion*. 2005;24(11):17 (chi*).

Objective To investigate the curative effect of acupuncture on facial spasm. Method Seventy-one patients with facial spasm were randomly divided into treatment and control groups. The 37 cases of the treatment group were treated by several-needle shallow puncture and circulating qi and the 34 cases of the control group with mind- tranquilizing Chinese and Western medicines: bamamide Dilantin and Eight Precious Ingredients Decoction plus Antispasmodic Powder. All were treated 10 days as a course. The curative effects were evaluated after 3 courses of treatment. Results There were significant differences in cure rate and effective rate between the two groups ($P < 0.05$). Conclusion Several-needle shallow puncture in combination with circulating qi is more effective than

586- gera: 142610/di/ra

[COMPARISON OF THE CURATIVE EFFECTS OF ELECTROACUPUNCTURE ON INSOMNIA BETWEEN DIFFERENT POINTS]. CHEN L. *shanghai journal of acupuncture and moxibustion*. 2005;24(11):13 (chi*).

Objective To investigate the curative effects of electroacupuncture of different points on insomnia. Method Sixty out-patients were randomly divided into groups, and the courses of treatment of and the curative effects on insomnia were compared between different points. Results There was a significant difference in curative effect between different groups. The curative effect was significantly better in the third group (Yintang and Shenting selected) than in the first group (Sishenchong and Fengchi selected) and in the second group (Baihui and Shenmen selected) ($P < 0.01$). There was no significant difference between the first and the second groups ($P > 0.05$). Conclusion Point Yintang electroacupuncture is of certain value in clinical treatment of insomnia.

587- gera: 143051/di/ra

DUECENTO CASI DI INSONNIA TRATTATI MEDIANTE COMPRESSIONE DEGLI OTOPUNTI E AGOPUNTURA. SHEN PEIWEN. *rivista italiana di medicina tradizionale cinese*. 2005;101(3):28 (ita).

In recent years, the author has treated 200 cases of insomnia by otopoint pressure plus acupuncture, with good therapeutic results reported as follows.

588- gera: 143753/di/ra

DUECENTO CASI DI INSONNIA TRATTATI MEDIANTE COMPRESSIONE DEGLI OTOPUNTI E AGOPUNTURA. SHEN PEIWEN. *rivista italiana di medicina tradizionale*

cinese. 2005;101(3):28 (ita).

In recent years, the author has treated 200 cases of insomnia by otopoint pressure plus acupuncture, with good therapeutic results reported as follows.

589- gera: 143760/di/ra

L'ESPERIENZA DEL DR. SHI YANQING NEL TRATTAMENTO MEDIANTE AGOPUNTURA DELLA PARALISI AGITANS. SHI XIAOWEN. *rivista italiana di medicina tradizionale cinese*. 2005;101(3):43 (ita).

Dr. Shi Yanqing, a chief physician of traditional chinese medicine, is an expert using warm-needling therapy to treat obstinate and miscellaneous diseases. In his long years of clinical practice, Dr. Shi has treated several tens of paralysis agitans cases, and obtained quite good therapeutic effects as is introduced in the following.

590- gera: 144070/di/cg

ETRE OU NE PAS ETRE SEVRE, TELLE EST LA QUESTION. LEMOINE P. *9eme congrès faformec, lyon*. 2005;:17 (fra).

591- gera: 144096/di/cg

LES CHEMINEMENTS DIAGNOSTICS FACE A UNE INSOMNIE. AMA74. *9eme congrès faformec, lyon*. 2005;:162 (fra).

592- gera: 144103/di/cg

LES INSOMNIES DE LA GROSSESSE. POINTS, LOCALISATION. COLIN D. *9eme congrès faformec, lyon*. 2005;:187 (fra).

593- gera: 144167/di/ra

LES TABLEAUX CLINIQUES ELEMENTAIRES D'INSOMNIE. LAFONT JL. *acupuncture & moxibustion*. 2005;4(4):274 (fra).

Résumé : L'exposé qui suit est une présentation des principaux tableaux cliniques élémentaires d'insomnie et de leurs points de traitement. L'auteur distingue 12 tableaux cliniques élémentaires permettant d'utiliser environ 45 points d'acupuncture portant l'indication insomnie.

594- gera: 144169/di/ra

SOMMEIL ET REVES. ROMANO L. *acupuncture & moxibustion*. 2005;4(4):287 (fra).

Résumé : Après un rappel des principales notions physiologiques et historiques sur le sommeil et les rêves, l'auteur tente de déterminer comment « se servir » des rêves dans la pratique quotidienne en acupuncture.

595- gera: 144448/ra

THE EFFECTIVENESS OF ACUPUNCTURE AND REFLEXOLOGY IN PRIMARY INSOMNIA. MCCULLOUGH CA, HUGHES CM, MCDONOUGH SM. *focus on alternative and complementary therapies*. 2005;10(1):36 (eng).

596- gera: 145039/di/ra

OBSERVATION OF EFFECTIVENESS OF 80 CASES WITH INSOMNIA TREATED WITH ACUPUNCTURE. CENG XIAN — FENG, WANG MEI — KANG, XU JIAN — YANG., *journal of clinical acupuncture and moxibustion*. 2005;21(12):22 (chi).

597- gera: 145065/di/ra

SUMMARY ON CLINICAL STUDY OF INSOMNIA TREATED WITH ACUPUNCTURE AND MOXIBUSTION IN RECENT 5 YEARS. ZHENG TONG. *journal of clinical acupuncture and moxibustion*. 2005;21(5):64 (chi).

598- gera: 150656/di/ra

COMPARAISON DE TRAITEMENT D'INSOMNIE PAR ACUPUNCTURE AUX HEURES CHEN ET XU. TANG PINGPING, WANG ZHANGLIAN, CHEN LIFANG. *journal of clinical acupuncture and moxibustion*. 2005;21(4):32 (chi).

599- gera: 150733/di/ra

[CLINICAL OBSERVATION OF 42 PATIENTS WITH INSOMNIA TREATED WITH PLUM BLOSSOM NEEDLE AND PINCH BACK WITH FINGERS]. YUE YAN RONG.

journal of clinical acupuncture and moxibustion. 2005;21(10):30 (chi).

600- gera: 125758/di/ra

[EFFECTS OF THE DEGREES OF ANXIETY AND DEPRESSION ON THE THERAPEUTIC EFFECT OF ACUPUNCTURE IN THE PATIENT OF INSOMNIA]. RUAN JW, HU YH, RAO ZD, WEN M, ZENG XX. **chinese acupuncture and moxibustion.** 2006;26(3):186-8. (chi).

OBJECTIVE: To probe factors of influencing therapeutic effects of acupuncture in the patient of insomnia. METHODS: According to scores of degrees of anxiety and depression, 52 cases of insomnia were divided into 3 groups, group I (mild or less degree) and group II (moderate degree) and group III (serious degree). The Pittsburgh sleep quality index (PSQI) were compared before and after treatment in the 3 groups, and between two groups after treatment. Results There were significant differences in the therapeutic effect as the groups I, II compared with the group III ($P < 0.01$). The total sleep quality in the group I was better than that in the group II ($P < 0.05$). CONCLUSION: The degree of anxiety and depression in the patient of insomnia is one of important factors

601- gera: 125760/di/ra

[OBSERVATION ON THERAPEUTIC EFFECT OF ROLLING NEEDLE THERAPY ON INSOMNIA]. LUO L, HU YP, YU SG, LI N. **chinese acupuncture and moxibustion.** 2006;26(3):183-5. (chi).

OBJECTIVE: To assess the effect-increasing action of rolling needle therapy on insomnia. METHODS: Sixty-four cases were randomly divided into a rolling needle treatment group and a control group, 32 cases in each group. The control group were treated with oral administration of clonazepam 4 mg, once each night, for 4 consecutive weeks. The rolling needle therapy group were treated with the same treatment as the control group, plus the rolling needle stimulation of the back. The therapeutic effect was assessed by effective rate of sleep improvement and Pittsburgh sleep quality index (PSQI). RESULTS: After treatment there was a significant difference between the two groups in the score of PSQI ($P < 0.01$). CONCLUSION: The rolling needle therapy can increase the improving action of clonazepam on insomnia, and increase life quality of the patient.

602- gera: 125772/di/ra

[STUDY ON THE SHU-POINTS OF FIVE ZANG (VISCERA) FOR TREATMENT OF INSOMNIA BASED ON THE THEORY OF THE FIVE ZANG (VISCERA) STORING VITALITY]. HU JF. **chinese acupuncture and moxibustion.** 2006;26(1):69-71. (chi).

According to Prof. DONG Gui-rong's law of syndrome differentiation of "viscera, yin and yang, qi and blood, deficiency and excess" in internal injury diseases and academic thought of syndrome differentiation of regulating five zang vitality for treatment of insomnia, the author consults a great number of ancient and modern literature of TCM, analyzes the controlling functions of five zang storing vitality on whole organism and the relation between heart vitality and brain vitality, and explain the basis of acupuncture at five-zang shu-points of the Gallbladder Channel to regulate vitality of five zang-organs for treatment of insomnia from intension and functions of five zang vitality, whole regulative mechanism of five zang vitality, the cause and pathogenesis of insomnia of over or too less five zang-vitality induced by pathogenic factors, and according to typing and syndrome differentiation of five zang vitality, theory and principle of acupoint selection, so as to establish and put forward the method and theory

603- gera: 125849/di/ra

[CLINICAL OBSERVATION ON GOVERNOR VESSEL DAOQI METHOD FOR TREATMENT OF DYSSOMNIA IN THE PATIENT OF DEPRESSION]. WANG J, JIANG JF, WANG LL. **chinese acupuncture and moxibustion.** 2006;26(5):328-30 (chi).

OBJECTIVE: To explore clinical therapeutic effects of Governor Vessel Daoqi needling method combined with antidepressants on dyssomnia in the patient of depression. METHODS: depression with dyssomnia were randomly divided into a treatment group (n=23) and a control group (n=22). The

treatment group were treated with Governor Vessel Daoqi needling method and oral administration of antidepressants, with Shenting (GV 24), Baihui (GV 20), Dazhui (GV 14), Shendao (GV 11) and Zhiyang (GV 9) selected as main acupoints; and the control group with simple antidepressants. They were treated for 4 weeks. Changes of scores for Hamilton Depression Rating Scale (HAMD) and Pittsburgh Sleep Quality Index (PSQI) were investigated in the two groups. RESULTS: Significant differences before and after treatment in the scores for HAMD ($P < 0.01$) in both the two groups, and a significant difference before and after treatment in the score for PSQI only in the treatment group ($P < 0.01$) were found; after treatment, there were significant differences between the two groups in the scores of HAMD and PSQI ($P < 0.01$). CONCLUSION: The combined therapy of Governor Vessel Daoqi needling method and antidepressants can

604- gera: 125895/di/ra

[EFFECT OF ROLLING NEEDLE THERAPY ON QUALITY OF LIFE IN THE PATIENT OF NON-ORGANIC CHRONIC INSOMNIA: A RANDOMIZED CONTROLLED TRIAL]. WANG CW, KANG J, ZHOU JW, HU YP, LI N. **chinese acupuncture and moxibustion.** 2006;26(7):461-5. (chi).

OBJECTIVE: To probe therapeutic effect of rolling needle therapy on insomnia and standardize the therapeutic program. METHODS: Multi-central randomized blind controlled trials were used, and 180 cases were randomly divided into a rolling needle group and a medication group, 90 cases in each group. The rolling needle group were treated with rolling needle therapy at the Urinary Bladder Channel line 1 and 2 at the back and the Governor Vessel, and the medication group with clonopin 4-6 mg, for 4 weeks. Effective rates for sleep disturbance improvement and Spitzer index of life quality were evaluated after 4 weeks' treatment and 3 months' follow-up. RESULTS: The effective rate was 82.2% in the rolling needle group and 60.0% in the medication group with a significant difference between the two groups ($P < 0.05$), and with a significant difference between the two groups in Spitzer index of life quality ($P < 0.05$). After 3 months' follow-up, the effective rate was 40.0% in the rolling needle group and 30.3% in the medication group with no significant difference between the two groups ($P > 0.05$), and there was a significant difference between the two groups in Spitzer index of life quality. CONCLUSION:

605- gera: 135910/di/ra

BRIEF INTRODUCTION TO THEORETICAL INTENTION OF "NEEDLING METHOD FOR TRANQUILLIZATION AND CALMING THE MIND" FOR TREATMENT OF INSOMNIA. WANG HONG-FENG, WANG FU-CHUN. **world journal of acupuncture-moxibustion.** 2006;16(1):54 (eng).

A set of scientific theories and an effective acupuncture therapy for insomnia about "the needling method for tranquillization and calming the mind" are gradually formed through many years' theoretical and clinical studies. In this paper, the theoretical intention about "the needling method for tranquillization and calming the mind" for treatment of insomnia are briefly introduced mainly from the cause of disease, pathogenesis, therapeutic method and characteristics of composition of a prescription, etc. in order to provide a new train of thoughts and a new method for working out scientific and standard prescriptions in the treatment of insomnia.

606- gera: 141461/di/re

TREATMENT OF MODERATE OBSTRUCTIVE SLEEP APNEA SYNDROME WITH ACUPUNCTURE: A RANDOMISED, PLACEBO-CONTROLLED PILOT TRIAL. FREIRE AO, SUGAI GC, CHRISPIN FS, TOGEIRO SM, YAMAMURA Y, MELLO LE, TUFIK S. **sleep med.** 2006;oct 3: (eng).

BACKGROUND AND PURPOSE: To investigate the efficacy of acupuncture in the treatment of moderate obstructive sleep apnea syndrome (OSAS), assessed by polysomnography (PSG) and questionnaires of functional quality of life (SF-36) and excessive daytime sleepiness (Epworth). PATIENTS AND METHODS: We performed a randomised, placebo-controlled, single-blinded study, with blinded evaluation on 36 patients presenting an apnea/hypopnea index (AHI) of 15-30/h, assessed by PSG. The study took place at the Public Hospital

of the Universidade Federal de Sao Paulo, Brazil, in the Division of Sleep Disorders of the Department of Psychobiology, between January, 2002 and August, 2004. Patients were randomly assigned to three groups: the acupuncture group (n=12); the sham group, submitted to needle insertion in non-acupoints (n=12); and the control group, receiving no treatment (n=12). Patients received acupuncture or sham acupuncture once a week for 10 weeks. RESULTS: Twenty-six patients completed the study. The AHI (P=0.005), the apnea index (AI) (P=0.008) and the number of respiratory events (P=0.005) decreased significantly in the acupuncture group but not in the sham group. On the other hand, the control group displayed significant deterioration in some of the polysomnographic parameters, with a significant increase in the number of respiratory events (P=0.025). Acupuncture treatment significantly improved (before vs. after treatment) several dimensions of the SF-36 and Epworth questionnaires. There was no significant association between changes in the body mass index (BMI) and AHI. CONCLUSIONS: Acupuncture is more effective than sham acupuncture in ameliorating the respiratory events of patients presenting with moderate OSAS.

607- gera: 141605/di/ra

A CLINICAL OBSERVATION OF TREATING 128 CASES OF TEENAGE INSOMNIA WITH ACUPUNCTURE AND MOVING CUPPING. DIONGBIN XIA, MIN LI AND YONG HUANG. *international journal of clinical acupuncture.*

2006;14(3):151 (eng).

Objective: To observe the effect of treating teenage insomnia with acupuncture and moving cupping. Methods: 128 teenagers suffering from insomnia received acupuncture and moving cupping treatment. The points treated by acupuncture included: Fengfu (DU16), Baihui (DU20), Sishencong (EX-HNT1), Shenting (DU24) and Shangxing (DU23). In addition, moving cupping was applied along the bladder meridian on the back. Following 2 weeks of daily treatment, the efficacy was observed. Result: (1) The total efficacy of treating teenage insomnia with acupuncture and moving cupping was 93.75%; (2) The signs and symptoms related to insomnia disappeared or were reduced the treatment; (3) There were no side effects from acupuncture and moving cupping therapy; (4) Only 12 cases reoccurred after 3 months and were then cured with the same method. Conclusion: Acupuncture combined with moving cupping is an effective therapy to treat insomnia in teenagers.

608- gera: 141870/di/ra

STUDY ON THE FIVE ZANG SHU-POINTS FOR TREATMENT OF INSOMNIA BASED ON THE THEORY OF FIVE ZANG STORING SHEN. HU JIN-FENG. *journal of integrated eastern and western medicine.* 2006;4(4):20 (eng).

According to Prof. DONG Gui-rong's law of syndrome differentiation of "zang fu (viscera), yin yang, qi and blood, deficiency and excess" for endogenous diseases and academic thought of regulating five zang vitality for treatment of insomnia, the author consulted a great number of ancient and modern literature of TCM, analyzed the functions of five zang storing Shen (vitality) and the relation between heart vitality and brain vitality and explained the cause and pathogenesis of insomnia and the theory of acupuncture at five-zang shu-points of the Bladder Channel to regulate Shen (vitality) for its treatment.

609- gera: 142090/di/ra

A CLINICAL OBSERVATION OF TREATING 128 CASES OF TEENAGE INSOMNIA WITH ACUPUNCTURE AND MOVING CUPPING. DIONGBIN XIA, MIN LI, YONG HUANG. *international journal of clinical acupuncture.*

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Objective: To observe the effect of treating teenage insomnia with acupuncture and moving cupping. Methods: 128 teenagers suffering from insomnia received acupuncture and moving cupping treatment. The points treated by acupuncture included: Fengfu (DU16), Baihui (DU20), Sishencong (EX-HNT1), Shenting (DU24) and Shangxing (DU23). In addition, moving cupping was applied along the bladder meridian on the back. Following 2 weeks of daily treatment, the efficacy was

observed. Result: (1) The total efficacy of treating teenage insomnia with acupuncture and moving cupping was 93.75%; (2) The signs and symptoms related to insomnia disappeared or were reduced the treatment; (3) There were no side effects from acupuncture and moving cupping therapy; (4) Only 12 cases reoccurred after 3 months and were then cured with the same method. Conclusion: Acupuncture combined with moving cupping is an effective therapy to treat insomnia in teenagers.

610- gera: 142205/di/ra

MIND-TRANQUILIZING NEEDLING TECHNIQUE & INSOMNIA: THERAPEUTIC EFFICACY OBSERVATION OF 63 CASES. WANG XIAO-LING. *journal of acupuncture and tuina science.* 2006;4(1):37 (eng).

Objective: To investigate the clinical efficacy of treating insomnia with mind-tranquilizing acupuncture. Method: Sixty-three patients were randomly divided into a treatment group of 32 cases and a control group of 31 cases. The treatment group received mind-tranquilizing acupuncture and the control group, oral depression-relieving and mind-calming herbal granules, for 30 days. Results: The response rate was 87.5% in the treatment group and 77.4% in the control group. There were significant differences in falling-sleep time, lasting period and times of nocturnal waking (P < 0.05) and a very significant difference in dream improvement (P < 0.01) between the two groups. There were no significant differences in after-waking conditions and sleep evaluation (P > 0.05). Conclusion: Clinically mind-tranquilizing acupuncture has a better effect on insomnia than depression-relieving

611- gera: 142291/di/ra

STUDY ON EXTERNAL APPLICATION OF ELEUTHEROSIDES OINTMENT ON SHENQUE (CV 8) FOR RESISTING SLEEP DEPRIVATION. WEN RUI-LI, WANG SHENG-XU, LI QIU-SHI. *journal of acupuncture and tuina science.* 2006;4(5):279 (eng).

Objective: To investigate the efficacy of external application of Eleutherosides ointment on Shenque (CV 8) for treating sleep deprivation. Methods: Twenty four healthy young male volunteers at the age of 19-22 years old were randomly allocated to 4 groups (normal, model, treatment and control groups). Sleep was deprived for 48 hours except the normal group. Self-made Eleutherosides compound preparation was applied externally on Shenque (CV 8), to observe its influence on psychology and blood biochemical indices of cortisol and testosterone of the human body in sleep deprivation. Results: After sleep deprivation for 48 hours, an increment in cortisol concentration was lower in the Eleutherosides group (44.482 ± 96.065 nmol/L) than in the control group (146.809 ± 71.075 nmol/L); an increment in the self-evaluated depression scale was also lower in the Eleutherosides group (2.833 ± 16.746) than in the control group (20.417 ± 10.358). There were significant differences (P < 0.05). But, there was no significant difference between the treatment group and control group (P > 0.05) in the decrement of testosterone concentration and the increment of the anxiety scale. Conclusion: External application of Eleutherosides preparation on Shenque (CV 8) can regulate the stress reaction level and psychological endurance of the human body and produce an effect to resist sleep deprivation.

612- gera: 142416/di/ra

[THE CLINICAL OBSERVATIONS OF 110 TREATMENTS ON INSOMNIA BY NEEDLING 'BAI HUI' AND 'SHEN LING' POINTS]. LI ZI-PING. *journal of clinical acupuncture and moxibustion.* 2006;22(9):38 (chi).

613- gera: 142671/di/ra

[OBSERVATIONS ON THE EFFICACY OF SHALLOW PUNCTURE PLUS CUPPING FOR TREATING 30 INSOMNIA PATIENTS]. TANG T, WANG JL, GAO JX. *shanghai journal of acupuncture and moxibustion.* 2006;25(11):10 (chi*).

Objective To investigate the efficacy of shallow puncture plus cupping for treating insomnia. Methods Sixty patients were randomly allocated to treatment and control groups. The treatment group was treated by shallow puncture plus cupping and the control group, by auricular-plaster therapy. Treatment was given three times weekly for 2 weeks. Results The clinical

symptoms abated or disappeared in both groups after treatment. Of the treatment group, 16 patients were cured, 10 improved and 4 got no effect; of the control group, 15 patients were cured, 10 improved and 5 got no effect. Statistical analysis showed no significant difference between the two groups ($P > 0.05$). Conclusion Shallow puncture plus cupping can significantly improve sleep.

614- gera: 142686/di/ra

[CLINICAL OBSERVATIONS ON THE TREATMENT OF INSOMNIA BY HERBAL FUMIGATION PLUS ACUPUNCTURE]. LUO L, SHOU YQ, CHEN WJ. *shanghai journal of acupuncture and moxibustion*. 2006;25(2):19 (chi*).

Objective To investigate the clinical efficacy of herbal fumigation plus acupuncture for treating senile primary insomnia. Methods Seventy-six patients with senile primary insomnia were allocated to two groups by a randomized control method. The treatment group received herbal fumigation plus acupuncture and the control group took Estazolam orally. The curative effects were evaluated by using Pittsburgh sleep Quality index after two courses of treatment. Results The total efficacy rate was 92% in the treatment group and 84% in the control group and had a significant difference between the two groups ($P < 0.05$). Conclusion Herbal fumigation plus

615- gera: 142737/di/ra

[EXPERIMENTAL RESEARCH ON APPLICATION OF ELEUTHEROSIDES TO POINT SHENQUE FOR SLEEP DEPRIVATION]. WEN RL, WANG SX, LI QS. *shanghai journal of acupuncture and moxibustion*. 2006;25(6):3 (chi*).

objective to investigate the efficacy of application of eleutherosides to point shenque (cv 8) for treating sleep deprivation. method twenty-four healthy young male volunteers were randomly allocated to 4 groups (normal, model, treatment and control groups). sleep was deprived for 48 hrs in all except in the normal group. self-made eleutherosides compound was applied to point shenque (cv 8). its influence on psychology and blood biochemical indices: cortisol and testosterone was observed in the body with sleep deprivation. results after 48 hrs' sleep deprivation, an increment in cortisol concentration was lower in the eleutherosides application group (44.482 ± 96.065 nmol/l) than in the control group (146.809 ± 71.075 nmol/l); an increment in the self-evaluation depression scale was also lower in the eleutherosides application group (1.833 ± 16.746) than in the control group (20.417 ± 10.358). there were significant differences in both ($p < 0.05$). but there were no significant differences in the decrement in testosterone concentration and an increment in the anxiety scale between the treatment and control groups ($p > 0.05$). conclusion application of eleutherosides to point shenque (cv 8) can

616- gera: 143093/di/ra

MIND-TRANQUILIZING NEEDLING TECHNIQUE & INSOMNIA: THERAPEUTIC EFFICACY OBSERVATION OF 63 CASES. WANG XIAO-LING. *journal of acupuncture and tuina science*. 2006;4(1):37 (eng).

Objective: To investigate the clinical efficacy of treating insomnia with mind-tranquilizing acupuncture. Method: Sixty-three patients were randomly divided into a treatment group of 32 cases and a control group of 31 cases. The treatment group received mind-tranquilizing acupuncture and the control group received depression-relieving and mind-calming herbal granules, for 30 days. Results: The response rate was 87.5% in the treatment group and 77.4% in the control group. There were significant differences in falling-sleep time, lasting period and times of nocturnal waking ($P < 0.05$) and a very significant difference in dream improvement ($P < 0.01$) between the two groups. There were no significant differences in after-waking conditions and sleep evaluation ($P > 0.05$). Conclusion: Clinically mind-tranquilizing acupuncture has a better effect on insomnia than depression-relieving

617- gera: 143170/di/ra

[CLINICAL OBSERVATION ON INSOMNIA BY AURICULAR SEED - PRESSING THERAPY.]. TIAN JING, ZHAO JING -

DONG. journal of clinical acupuncture and moxibustion. 2006;22(10):22 (chi).

618- gera: 143389/di/ra

STUDY ON EXTERNAL APPLICATION OF ELEUTHEROSIDES OINTMENT ON SHENQUE (CV 8) FOR RESISTING SLEEP DEPRIVATION. WEN RUI-LI, WANG SHENG-XU, LI QIU-SHI. *journal of acupuncture and tuina science*. 2006;4(5):279 (eng).

Objective: To investigate the efficacy of external application of Eleutherosides ointment on Shenque (CV 8) for treating sleep deprivation. Methods: Twenty four healthy young male volunteers at the age of 19-22 years old were randomly allocated to 4 groups (normal, model, treatment and control groups). Sleep was deprived for 48 hours except the normal group. Self-made Eleutherosides compound preparation was applied externally on Shenque (CV 8), to observe its influence on psychology and blood biochemical indices of cortisol and testosterone of the human body in sleep deprivation. Results: After sleep deprivation for 48 hours, an increment in cortisol concentration was lower in the Eleutherosides group (44.482 ± 96.065 nmol/L) than in the control group (146.809 ± 71.075 nmol/L); an increment in the self-evaluated depression scale was also lower in the Eleutherosides group (2.833 ± 16.746) than in the control group (20.417 ± 10.358). There were significant differences ($P < 0.05$). But, there was no significant difference between the treatment group and control group ($P > 0.05$) in the decrement of testosterone concentration and the increment of the anxiety scale. Conclusion: External application of Eleutherosides preparation on Shenque (CV 8) can regulate the stress reaction level and psychological endurance of the human body and produce an effect to resist sleep deprivation.

619- gera: 144256/di/ra

6RN ET 62V POTENTIALISENT LE TRAITEMENT PAR DIFFERENCIATION DES SYNDROMES DANS L'INSOMNIE. PHAN-CHOFFRUT F, GORET O, NGUYEN J. *acupuncture & moxibustion*. 2006;5(4):356 (fra).

78 patients avec insomnie sont randomisés en 2 groupes : a) un groupe contrôle traité selon la différenciation des syndromes (tableau) et b) un groupe expérimental traité selon la même méthode mais avec adjonction des points 6Rn (zhaohai) et 62V (shenmai). Les résultats dans le groupe expérimental sont supérieurs à ceux du groupe contrôle ($p < 0,01$). Commentaires : Le traitement par différenciation des syndromes est classique dans l'insomnie [6], de même que le traitement par les méridiens curieux yangqiaomai et yinqiaomai en tonifiant le 6Rn (zhaohai) et en dispersant le 62V (shenmai) [7]. L'étude rapportée montre l'intérêt de l'association des deux méthodes. Le traitement selon les méridiens curieux apparaît ici clairement distinct de celui de la différenciation des syndromes. D'autres auteurs incluent au contraire le traitement selon les méridiens curieux dans le cadre de la différenciation

620- gera: 144921/ra/di

STUDY ON THE FIVE ZANG SHU-POINTS FOR TREATMENT OF INSOMNIA BASED ON THE THEORY OF FIVE ZANG STORING SHEN. HU JIN-FEN. *eastwest integration medicine*. 2006;4(4):20 (eng).

According to Prof. DONG Gui-rong's law of syndrome differentiation of "zang fu (viscera), yin yang qi and blood, deficiency and excess" for endogenous diseases and academic thought of regulating five zang vitality for treatment of insomnia, the author consulted a great number of ancient and modern literature on TCM, analyzed the functions of five zang storing Shen (vitality) and the relation between heart vitality and brain vitality and explained the cause and pathogenesis of insomnia and the theory of acupuncture at five-zang shu-points of the Bladder

621- gera: 145071/di/ra

CLINICAL OBSERVATION ON INSOMNIA BY AURICULAR SEED - PRESSING THERAPY. TIAN JING, ZHAO JING, DONG. *journal of clinical acupuncture and moxibustion*. 2006;22(10):22 (chi).

622- gera: 145808/di/ra

ACUPUNCTURE CASE STUDY : INSOMNIA TREATMENT.
LU SHOU-YAN. *lantern*. 2006;3(3): (eng).

623- gera: 146016/di/ra

40 CASOS DE INSOMNIO TRATADOS CON EL METODO DE VENTOSA EN MOVIMIENTO. SUN JINGQING, WANG QIUFENG,. *medicina energetica*. 2006;30:61 (esp).

624- gera: 150503/di/ra

ACUPUNCTURE THERAPY OF INSOMNIA AT PRESENT. LUO WEN ZHENG, LI YING, LAI XIN SHANG. *journal of clinical acupuncture and moxibustion*. 2006;22(1):49 (eng).

625- gera: 150516/di/ra

THE MECHANISM OF REGULATION OF TAIYANG AND YINTANG ELECTRO ACUPUNCTURE ON THE SLEEP OF RATS COURSED BY SODIUM PENTOBARBITAL. BAI YAN, ZHANG QIAN, DONG HONG SHENG, ET AL. *journal of clinical acupuncture and moxibustion*. 2006;22(2):36 (eng).
Objective: Probe into the mechanism of regulation of TaiYang and YinTang electro – acupuncture on the sleep of rats coursed by sodium pentobarbital. Methods: Take Taiyang and Yintang electro – acupuncture as therapy method to the treatment group after abdominal injection with sodium pentobarbital. Select the change of FRG and the total sleeping time as observing standards. Results: Acupuncture therapy prolonged the sleeping time of rats coursed by sodium pentobarbital in which slow wave sleep were increased most with, significance of $P < 0.01$. Conclusion: Taiyang and Yintang electro – acupuncture can effectively prolong the slow wave sleeping time of

626- gera: 150528/di/ra

EXPLORATION OF DAO QI METHOD ON DU MERIDIAN FOR TREATING SLEEP DISORDER SIN DEPRESSION. WANG JUN. *journal of clinical acupuncture and moxibustion*. 2006;22(3):33 (eng).

627- gera: 150541/di/ra

CONTRASTIVE OBSERVATION WITH INSOMNIA TREATED WITH ACUPUNCTURE. ZHOU WEN XUE, HE GUANG WU. *journal of clinical acupuncture and moxibustion*. 2006;22(4):21 (eng).

628- gera: 150560/di/ra

CLINICAL OBSERVATION ON ELECTRO ACUPUNCTURE COMBINED WITH HERBS THERAPY FOR INSOMNIA. WANG KAI. *journal of clinical acupuncture and moxibustion*. 2006;22(5):34 (chi).

629- gera: 144590/di/ra

[COMPARATIVE STUDY ON TREATMENT OF SOMNIPATHY IN PATIENTS WITH HYPERTENSION BY TRADITIONAL CHINESE MEDICINE AND BY ESTAZOLAM]. LI HC, YANG YL, MA M. *chinese journal of integrated traditional and western medicine*. 2007;27(2):123 (eng).
OBJECTIVE: To study the efficacy of traditional Chinese medicine (TCM) in treating somniphathy in patients with hypertension, and to observe the change of blood pressure after sleep being improved. METHODS: Two hundred and thirty-nine patients with hypertension accompanied somniphathy were randomly assigned to two groups, 123 patients in the treated group were treated with TCM according to syndrome differentiation, and 116 in the control group treated with Estazolam. Changes of blood pressure, scores of sleep dysfunction rating scale (SDRS), Hamilton anxiety rating scale (HAMA) and treatment emergent symptom scale (TESS) before and after treatment were observed. RESULTS: TCM showed a significant effect on hypnagogic disturbance, and significantly reduced the scores of insomnia syndromes in early sleep stage, improve the quality of sleep, prolong the sleeping time to fulfill the physiological requirement, the total effective rate being 80.5% (99/123 cases), with the overall effect higher than that (66.4%, 77/116 cases) in the control group ($P < 0.05$). Along with the improving of sleep, blood pressure, both systolic and diastolic, reduced in both groups, but with the reduction in the treated group superior to that in

the control group ($P < 0.01$), and the rate of reaching target BP ($< 140/90$ mmHg) in the former was also significantly higher than that in the latter (39.7%, 46/116 cases, $P < 0.05$). As compared with those in the control group, the occurrence of adverse reaction, were less in the treated group ($P < 0.05$). CONCLUSION: TCM has better efficacy in treating somniphathy of hypertension patients than Estazolam. And the improvement of somniphathy is favorable for improving the hypertensive condition of patient.

630- gera: 145448/di/ra

L'HARMONISATION DU YINQIAO/YANGQIAO EST EQUIVALENTE AU TRAITEMENT PAR CLONAZEPAM DANS LES INSOMNIES. FAURE M. *acupuncture et moxibustion*. 2007;6(1):68 (fra).

Objectif Comparer dans les insomnies un traitement par acupuncture (harmonisation du yinqiao et du yangqiao) au traitement médicamenteux par clonazepam. Plan expérimental Essai contrôlé quasi-randomisé acupuncture vs clonazepam (Rivo-tril®). Cadre de l'étude Third Municipal People's Hospital, Mianyang, Sichuan, Chine. Patients 132 patients hospitalisés. Critères d'inclusion : 1) critères diagnostiques des insomnies à partir du CCMD (Chinese Psychiatric and Diagnostic Criteria). 2) Score SRSS (self-rating scale of sleeping) > 20 . Interventions Randomisation en deux groupes selon la séquence d'entrée à l'hôpital. Groupe acupuncture (n=87) points des méridiens curieux yin qiao & yangqiao associés à 4 points complémentaires, séance quotidiennes (sauf le dimanche de 30 à 60 minutes durant quatre semaines [encadré protocole] Groupe témoin (n=45) : clonazepam 2 mg (Rivotril®) un comprimé une heure avant le coucher du soir quatre semaines. La posologie est ajustée en fonction du résultat Evaluation globale en quatre groupes (guérison, efficace, amélioré, non efficace) en fonction principalement de la durée et de la qualité du sommeil et de la nécessité de prise d'hypnotique supplémentaire. 2) Score SRSS (self-rating scale of sleeping). n-Principaux résultats 1) Amélioration globale dans les deux groupes, mais sans différence significative intergroupe. 2) Amélioration des scores SRSS dans chaque groupe ($p < 0.001$, tableau I), mais sans différence intergroupe ($p > 0.05$). Conclusions Le traitement par acupuncture est aussi efficace que le clonazepam dans les insomnies.

631- gera: 146118/di/ra

ADJUSTING EFFECTS OF APPLICATION OF GARLIC PASTE AT SHENQUE (I CV8) ON THE CIRCADIAN RHYTHM OF BODY TEMPERATURE INDUCED BY SLEEP DEPRIVATION. ZHU CHONG-TIAN, SHINA, WUDONG, HUANG YONG. *world journal of acupuncture moxibustion*. 2007;2007:23 (eng).

Objective To observe the effect of application of garlic paste at Shenque (I CV8) on the circadian rhythm in sleep deprivation young students. Methods Twenty healthy volunteer young male students from Southern Medical University were randomly divided into three groups: normal group (A), sleep deprivation group (B) and treatment group (C). Volunteers in group B and C received 48 h sleep deprivation (SD), and in the mean time volunteers in group C were treated by garlic paste at Shenque (*F CV8), while those in group A had no any treatment. The body temperature of all the volunteers was detected at 6:00 am, 12:00 am, 6:00 pm and 0:00 am, respectively, after the treatment. Results The mean body temperature values in group A and C both were highest at 6:00 pm and lowest at 6:00 am which had a significant difference in each group ($P < 0.01$); in group B, the mean body temperature was highest at 0:00 am and lowest at 6:00 am, no significant difference was found between them ($P > 0.05$). Results of cosine analysis showed that in subjects of group B the circadian rhythm of body temperature still kept going well after SD, but the peak amplitude and amplitude of vibration were higher than those of group A, and the acrophase of group B was obviously lower than that of group C and A. The 3 indexes of group C were similar to those of group A, denoting that garlic paste application of Shenque (I CV8) could prevent disorders of circadian rhythm of the body temperature. Conclusion The garlic paste application at Shenque (I CV8) can adjust circadian rhythm and accelerate the recovery processes of circadian rhythm in SD young

students.

632- gera: 146143/di/ra

[REVIEW OF INSOMNIA TREATED BY AURICULAR-PLASTER THERAPY.] WANG XIANG-YU' , HUO YONG-FANG. *shanghai journal of acupuncture and moxibustion*. 2007;26(4):47 (chi).

The objective of the review is to summarize the literature of insomnia treated by auricular-plaster therapy through the basic quality of the literature, concrete methods of treating especially selecting points, curative effect and its criterion and mechanism. The author concluded that auricular-plaster therapy was an effective method to treat insomnia, but it is urgent to standardize the methods of treating and surveying in order to spread it and serve for

633- gera: 146277/di/re

ACUPUNCTURE MAY BE AN ALTERNATIVE TO TREAT MODERATE OBSTRUCTIVE SLEEP APNEA. FREIRE AO, MELLO LE. *sleep med*. 2007;17may:x (eng).

634- gera: 146410/di/ra

ACUPUNCTURE FOR INSOMNIA. CHEUK D, YEUNG W, CHUNG K, WONG V. *cochrane database syst rev*. 2007;18(3):CD005472 (eng).

BACKGROUND: Although conventional non-pharmacological and pharmacological treatments for insomnia are effective in many people, alternative therapies such as acupuncture are still widely practiced. However, it remains unclear whether the existing evidence is rigorous enough to support its use. **OBJECTIVES:** To determine the efficacy and safety of acupuncture in people with insomnia. **SEARCH STRATEGY:** We searched the Cochrane Central Register of Controlled Trials (CENTRAL), MEDLINE, EMBASE, PsycINFO, Dissertation Abstracts International, CINAHL, AMED (the Allied and Complementary Medicine Database), TCMLARS (Traditional Chinese Medical Literature Analysis and Retrieval System), National Center for Complementary and Alternative Medicine, the National Institute of Health Clinical Trials Database, the Chinese Acupuncture Trials Register, the Trials Register of the Cochrane Complementary Medicine Field, from inception to 2006, and the sleep bibliography, which is available at www.websciences.org/bibliosleep. We searched reference lists of retrieved articles, and contacted trial authors and experts in the field for information on ongoing/completed trials. **SELECTION CRITERIA:** Randomised controlled trials evaluating any form of acupuncture involving participants of any age with any type of insomnia were included. Included trials compared acupuncture with placebo or sham or no treatment, or acupuncture plus other treatments compared with the same other treatments. Trials that compared only acupuncture methods or compared acupuncture alone against other treatments alone were excluded, since they did not yield the net effect of acupuncture. **DATA COLLECTION AND ANALYSIS:** Two review authors independently extracted data and assessed quality according to a set of criteria for risk of selection bias, performance bias, attrition bias and detection bias. Relative risk (RR) and standardised mean difference (SMD) with 95% confidence intervals were used for binary and continuous outcomes respectively. Data were combined in meta-analyses (on an intention-to-treat basis), where more than one trial without significant clinical heterogeneity presented the same outcome. **MAIN RESULTS:** Seven trials met the inclusion criteria. The studies included 590 participants with insomnia, of whom 56 dropped out. Participant age ranged from 15 to 98 years, and the duration of insomnia varied from 6 months to 19 years. Co-existing medical conditions contributing to insomnia included stroke, end-stage renal disease and pregnancy. Apart from conventional needle acupuncture, different variants of acupuncture such as acupressure, auricular magnetic and seed therapy, and transcutaneous electrical acupoint stimulation (TEAS) were evaluated. Meta-analysis was limited because of considerable heterogeneity between comparison groups and between outcome measures. Based on the findings from individual trials, the review suggested that acupuncture and acupressure may help to improve sleep quality scores when compared to placebo (SMD = -1.08, 95% CI = -1.86 to -0.31, p=0.006) or no treatment (SMD -0.55, 95% CI = -0.89 to -0.21, p=0.002).

TEAS also resulted in better sleep quality score in one trial (SMD = -0.74, 95% CI = -1.22 to -0.26, p=0.003). However, the efficacy of acupuncture or its variants was inconsistent between studies for many sleep parameters, such as sleep onset latency, total sleep duration and wake after sleep onset. The combined result from three studies reporting subjective insomnia improvement showed that acupuncture or its variants was not more significantly effective than control (RR = 1.66, 95% CI = 0.68 to -4.03) and significant statistical heterogeneity was observed. Only one study reported an adverse event, with one out of 16 patients (6.3%) withdrawing from acupuncture because of pain. **AUTHORS' CONCLUSIONS:** The small number of randomised controlled trials, together with the poor methodological quality and significant clinical heterogeneity, means that the current evidence is not sufficiently extensive or rigorous to support the use of any form of acupuncture for the treatment of

635- gera: 146411/di/ra

ROLE OF ACUPUNCTURE IN THE TREATMENT OF INSOMNIA: A COMPREHENSIVE REVIEW. KALAVAPALLI R, SINGAREDDY R. *complement ther clin pract*. 2007;13(3):184-93 (eng).

Insomnia is a common sleep disorder with devastating socioeconomic consequences. Even though there are pharmacological and behavioral treatments for insomnia, most of the patients are treated with medications. However, the long-term use of medications to treat insomnia is questioned and has potential side effects. More and more Americans are seeking complementary/alternative treatments for many conditions including insomnia and there are anecdotal reports/case series of use of acupuncture in treating insomnia. To examine critically the role of acupuncture in treatment of insomnia, we performed a systematic review of published literature. Among the selected studies for review many were clinical case series and few open or randomized clinical trials. Even though several of these studies did not clarify the nature of insomnia (primary vs. secondary), it seemed that many of the subjects enrolled in these studies had co-morbid other psychiatric (depression or anxiety disorders) and/or medical conditions (Hemodialysis, Stroke, Pregnancy). Except for few, several of these studies had methodological limitations. Despite the limitations of the reviewed studies, all of them consistently indicate significant improvement in insomnia with acupuncture. Further methodologically strong, randomized controlled studies with large sample size are needed to assess the usefulness of acupuncture in treatment of insomnia and explore the possible mechanisms underlying the effects of acupuncture on sleep and sleep disorders.

636- gera: 146665/di/ra

AURICULAR ACUPUNCTURE TREATMENT FOR INSOMNIA: A SYSTEMATIC REVIEW. CHEN HY, SHI Y, NG CS, CHAN SM, YUNG KK, ZHANG QL. *j altern complement med*. 2007;13(6):669-76 (eng).

Objectives: To review trials on the efficacy and safety of auricular acupuncture (AA) treatment for insomnia and to identify the most commonly used auricular acupoints for treating insomnia in the studies via a frequency analysis. **Data sources:** The international electronic databases searched included: (1) AMED; (2) the Cochrane library; (3) CINAHL; (4) EMBASE; and (5) MEDLINE. ((R)) Chinese electronic databases searched included: (1) VIP Information; (2) CBMdisc; and (3) CNKI. **Study selection:** Any randomized controlled trials using AA as an intervention without using any co-interventions for insomnia were included. **Studies using AA versus no treatment, placebo, sham AA, or Western medicine were included.** **Data extraction:** Two (2) independent reviewers were responsible for data extraction and assessment. The efficacy of AA was estimated by the relative risk (RR) using a meta-analysis. **Results:** Eight hundred and seventy eight (878) papers were searched. Six (6) trials (402 treated with AA among 673 participants) that met the inclusion criteria were retrieved. A meta-analysis showed that AA was chosen with a higher priority among the treatment subjects than among the controls (p < 0.05). The recovery and improvement rates produced by AA was significantly higher than those of diazepam (p < 0.05). The rate of success was higher when AA was used for enhancement of sleeping hours up to 6 hours in

treatment subjects ($p < 0.05$). The efficacy of using Semen vaccariae ear seeds was better than that of the controls ($p < 0.01$); while magnetic pearls did not show statistical significance ($p = 0.28$). Six (6) commonly used auricular acupoints were Shenmen (100%), Heart (83.33%), Occiput (66.67%), Subcortex (50%), Brain and Kidney (each 33.33%, respectively). Conclusions: AA appears to be effective for treating insomnia. Because the trials were low quality, further clinical trials with higher design quality, longer duration of treatment, and longer follow-up should be conducted.

637- gera: 146667/nd/ra

AURICULAR ACUPUNCTURE FOR INSOMNIA: DURATION AND EFFECTS IN KOREAN OLDER ADULTS. KIM KB, SOK SR. *j gerontol nurs.* 2007;13(6):633-6 (eng).

This study examined the duration and effects of auricular acupuncture on insomnia in a sample of 28 Korean older adults. The design was a group, pretest-posttest, repeated-measures study. Measures were the Sleep State Tool and the Sleep Satisfaction Tool. The effects of auricular acupuncture on insomnia among Korean older adults were significant. The duration effects of auricular acupuncture were maintained for 2 weeks. Clinicians should consider providing auricular acupuncture as an alternative method for improving quality of sleep in older adults.

638- gera: 146800/di/ra

FORTY CASES OF INSOMNIA TREATED BY MULTI-OUTPUT ELECTRIC PULSATION AND AURICULAR PLASTER THERAPY. LIU W. *journal of traditional chinese medicine.* 2007;27(2):106-7 (eng).

639- gera: 146908/di/ra

ANALYSIS OF ACUPUNCTURE TREATMENT CHARACTERISTICS OF INSOMNIA IN ANCIENT TIMES. LIU LI-GONG, ET AL. *journal of acupuncture and tuina science.* 2007;5(4):193 (eng).

Statistical analysis was made through computer on the information of insomnia treated by acupuncture in 93 ancient medical books. Statistical results showed that 65 acupoints were used in ancient times, up to 108 times in frequency. The common acupoints are as follows: Gongsun (SP 4), Danshu (BL 19), Yinbai (SP 1), Qihai (CV 6), Tianfu (LU 3), Sanyinjiao (SP 6), Yinlingquan (SP 9), Feishu (BL 13), Yemen (TE 2), Guanyuan (CV 4), Yinjiao (GV 28) et al. The common meridians are Bladder Meridian, Spleen Meridian, Conception Vessel, Stomach

640- gera: 147190/nd/ra

COMPLEMENTARY AND ALTERNATIVE MEDICINE FOR SLEEP DISTURBANCES IN OLDER ADULTS. GOONERATNE NS. *clin geriatr med.* 2007;24(1):121-38 (eng).

Complementary and alternative medicines (CAM) are frequently used for the treatment of sleep disorders, but in many cases patients do not discuss these therapies directly with their health care provider. There is a growing body of well-designed clinical trials using CAM that have shown the following: (1) Melatonin is an effective agent for the treatment of circadian phase disorders that affect sleep; however, the role of melatonin in the treatment of primary or secondary insomnia is less well established. (2) Valerian has shown a benefit in some, but not all clinical trials. (3) Several other modalities, such as Tai Chi, acupuncture, acupressure, yoga, and meditation have improved sleep parameters in a limited number of early trials. Future work examining CAM has the potential to significantly add to our treatment options for sleep disorders in older adults.

641- gera: 147254/di/ra

CLINICAL OBSERVATION ON INSOMNIA TREATED WITH COMBINATION OF ACUPUNCTURE, MEDICINE AND CUPPING. CUI SU ZHI, REN LI - HUI. *journal of clinical acupuncture and moxibustion.* 2007;23(9):14 (chi).

642- gera: 147270/di/ra

OBSERVATION ON THERAPEUTIC EFFECT OF ACUPUNCTURE PLUS MOXIBUSTION FOR INSOMNIA. WANG YU-RUING, ET AL. *journal of acupuncture and tuina*

science. 2007;5(5):281 (eng).

Objective: In order to observe the clinical effect of acupuncture plus moxibustion for insomnia. Methods: Seventy- six patients with insomnia were randomly divided into 38 cases in the treatment group and 38 cases into the control group. The main acupoints for the treatment group were Baihui (GV 20), Shenmen (HT 7), and Sanyinjiao (SP 6). The additional acupoints were Yintang (Ex-FIN 3), Amman (Ex-HN 22), Shemnai (BL 62), Zhaohai (KI 6), Neiguan (PC 6), Jueyinshu (BL 14), Xinshu (BL 15), Pishu (BL 20), Weishu (BL 21), Danshu (BL 19). The treatment was given by acupuncture plus moxibustion. Suspending moxibustion by moxa stick was used over the main acupoints. And the additional acupoints were punctured routinely. The main acupoints for the control group were Baihui (GV 20), Shemnai (HT 7), and Sanyinjiao (SP 6), Yintang (Ex-HN 3), Amman (Ex-HN 22), Shenmai (BL 62), and Zhaohai (KI 6). The additional acupoints were Jueyinshu (BL 14), Xinshu (BL 15), Pishu (BL 20), Weishu (BL 21), Danshu (BL 19). The treatment was given by acupuncture routinely. The therapeutic effects were compared in the change of Pittsburgh Sleep Quality Index (PSQI), therapeutic effect and therapeutic courses. Results: The treatment group was better than the control group in PSQI change, therapeutic effect and therapeutic course ($P < 0.05$). There was no adverse reaction. Conclusion: Acupuncture plus moxibustion has a better therapeutic effect for insomnia.

643- gera: 147481/nd/ra

[EFFECTS OF HAND ACUPUNCTURE THERAPY ON SLEEP QUALITY IN SLEEP DISRUPTED ADULTS: VERIFICATION BY POLYSOMNOGRAPHY AND CEREBRAL BLOOD FLOW TEST.] HWANG EH. *taehan kanho hakhoe chi.* 2007;37(7):1108-18 (ko).

PURPOSE: The purpose of this study was to identify the effects of hand acupuncture therapy on sleep quality by means of a sleep questionnaire, polysomnography and a cerebral blood flow test in 30-59 year old adults. METHODS: The study was a sham controlled design. Twenty-two adults were assigned to the pellet stimulating group (11) or sham group (11). The pellet stimulating group received hand acupuncture therapy using New Seoam Press Pellets number 1 for 4 weeks. On the other hand, the sham group used the same Adhesive tape in terms of shape, size and quality as New Seoam Press Pellets number 1 for 4 weeks. A Transcranial Doppler Ultrasonography and Carotid Duplex Ultrasonography examination were used for evaluating cerebral blood flow. Data was analyzed using the SPSS 12.0 version program with chi(2)-test, Fisher's exact test and Mann Whitney U-test. RESULTS: In the pellet stimulating group, subjective sleep quality significantly improved more than that of the sham group. Among the sleep indices of the polysomnography, total sleep time and sleep latency of the sham group significantly improved. The cerebral blood flow test didn't show any differences. CONCLUSION: These results suggest that hand acupuncture therapy is effective for subjective sleep improvement only, not polysomnographical sleep indices and cerebral blood flow.

644- gera: 147547/di/ra

[CLINICAL OBSERVATION ON EFFECT OF ELECTRIC ACUPUNCTURE AT SISHENCONG IN TREATING INSOMNIA]. TANG SC, LIU JM, LIU GL. *chinese journal of integrated traditional and western medicine.* 2007;27(11):1030 (chi).

OBJECTIVE: To evaluate the clinical therapeutic effect of electric acupuncture (EA) at Sishencong (EX-HN 1) on insomnia. METHODS: Two hundred and seventy-six patients were randomly assigned to 2 groups, 138 in each group, the EA group treated with EA at Sishencong, and the control group with oral administration of Tianmeng Capsule. The treatment course for both groups was 3 weeks. The quality and related parameters of sleep before and after treatment were evaluated with a multi-channel sleep detector. RESULTS: After treatment, the quality of sleep was improved in both groups ($P < 0.05$), as compared with before treatment, the difference in related parameters was significant respectively ($P < 0.05$ or $P < 0.01$), however, the improvement in the EA group was superior to that in the control group ($P < 0.01$). CONCLUSION: EA at Sishencong has obvious effect on insomnia.

645- gera: 147579/di/ra
ANHYPNOSIS TREATED WITH ACUPUNCTURE AND MEDICINE THROUGH SYNDROMME. YU ZHU - LI. *journal of clinical acupuncture and moxibustion.* 2007;23(11):24 (chi).

646- gera: 147588/di/ra
CLINICAL STUDY ON INSOMNIA TREATED WITH ABDOMEN - ACUPUNCTURE AND BODY - ACUPUNCTURE. XIE WEN- XIA, CAO GAO - ZHONG, YE TIAN - SHEN, ET AL. *journal of clinical acupuncture and moxibustion.* 2007;23(10):5 (chi).

Objective: To observe the therapeutic effect of insomnia treated with abdomen acupuncture and body acupuncture. Methods; Diagnose and divide 80 cases of insomnia into 4 types in TCM, treat them all with abdomen acupuncture and body acupuncture according to the different types. And investigate them by PSQI questionnaire after the treatment. Then analyze the effect by effective rate, PSQI scores. Results: Good effect occurred in the Xinpiliangxu type and Yinxuhuwang type, while bad occurred in Garihuoshangrao Type.

647- gera: 147725/di/ra
RANDOMIZED AND CONTROLLED STUDY ON EFFECT OF ACUPUNCTURE ON SLEEP QUALITY IN THE PATIENT OF PRIMARY INSOMNIA. XUAN YA-BO , GUO JING , WANG LIN-PENG , WU XI. *chinese acupuncture and moxibustion.* 2007;27(12):886 (chi).

Objective To observe characteristics of acupuncture in improvement of sleep quality in the patient of insomnia. Methods Forty-six cases of primary insomnia were randomly divided into an observation group (n = 24) and a control group (n =22). The observation group were treated by the needling method for regulating mental activity, with Baihui (GV 20), Shenting (GV 24), Shenmen (I-IT 7) selected as main points; the control group were treated with oral administration of Estazolam. The therapeutic effects and scores of Pittsburgh Sleep Quality Index Scale before and after treatment were compared between the two groups. Results The total effective rate was 83. 3% o in the observation group and 72. 7% o in the control group, the observation group being better than the control group (P<0. 05). Estazolam was better than acupuncture treatment in prolonging sleeping time, and the acupuncture treatment was better than the control group in the improvement of somniphathy and the increase of daytime functional state (P<0. 05). Conclusion Acupuncture treatment has advantages of improving somniphathy

648- gera: 147737/di/ra
PROFESSOR WU LIAN-THONG'S SPECIAL ACUPOINTS AND EFFECTS IN TREATMENT OF INTRACTABLE INSOMNIA. TANG YAN , YIN LI-LI. *chinese acupuncture and moxibustion.* 2007;27(12):927 (chi).

Professor WU Lian-zhong not only has meticulous scholarship, great learning, rich clinical experience, obvious therapeutic effects, but also is good at exploration and writing, weeds through the old to bring forth the new. The present paper introduces that the authors apply " hhuzinxue" association summarized by professor WU to treat various kinds of intractable insomnia and achieves very good results, which is a convenient and unique method, and 5 successful samples are given.

649- gera: 147820/di/ra
TREATING INSOMNIA, EMOTIONAL DISORDER AND ADHD BY ACUPUNCTURE (ABSTRACT). HOU, WANZHU ET AL. *journal of alternative and complementary medicine.* 2007;13(8):864 (eng).

650- gera: 147844/di/ra
EFFECTIVENESS OF ACUPUNCTURE/ACUPRESSURE IN THE TREATMENT OF INSOMNIA: A SYSTEMATIC REVIEW (ABSTRACT). MC CULLOUGH ET AL. *journal of alternative and complementary medicine.* 2007;13(8):872 (eng).

651- gera: 147914/di/ra
PROTECTIVE EFFECTS OF ELEUTHEROSIDES ACUPOINT

APPLICATION AGAINST SLEEP DEPRIVATION IN RATS (ABSTRACT). LI QIUSHI ET AL. *journal of alternative and complementary medicine.* 2007;13(8):895 (eng).

652- gera: 148020/di/ra
TREATMENT OF INSOMNIA WITH GUASHA (SCRAPING). LI XIANG-SHOO, ET AL. *journal of acupuncture and tuina science.* 2007;5(6):368 (eng).
 Guasha(scraping) therapy falls into the category of "non-medication therapy". It works well for insomnia in clinical

653- gera: 148150/di/ra
RELATIONSHIP BETWEEN HEEL VESSEL AND SLEEP IN LETHARGY. WANG QIAO-MEI. *world journal of acupuncture and moxibustion.* 2007;17(4):56 (eng).

654- gera: 148296/nd/ra
IMPROVEMENT IN ENERGY AND VITALITY OVER A SHORT-TERM CPAP TRIAL PREDICTS LONG-TERM COMPLIANCE IN PATIENTS WITH OBSTRUCTIVE SLEEP APNEA. PROCTOR A, BILLINGS C, BILLINGS C, MOLONEY ED. *j sleep res.* 2007;16(4):448-9 (eng).

655- gera: 148491/di/ra
CLINICAL STUDY ON OBSTINATE INSOMNIA OF 55 CASES TREATED WITH VERTICAL AND HORIZONTAL STIMULATION ON HEAD AND FACE MERIDIAN. SHANG RONG, MA QI - YI,LU MING ZHUANG. *journal of clinical acupuncture and moxibustion.* 2007;23(12):3 (chi).
 Object: To study the clinical therapeutic effects and possible mechanism on treatment of obstinate insomnia with vertical and horizontal stimulation on head and face meridian. Methods: Vertical and horizontal massage and plum blossom needle on head and face meridian were used for the treatment of 55 cases of obstinate insomnia, the Pittsburgh Sleep Quality Index(PSQI) and the hemorheologic indexes' were investigated before and after treatment. Results: After the treatment of ' 30 times the total effective rate was 96.4%, the PSQI scores were lowered markedly (P < 0.01) ; and the hemorheologic indexes were significant improvement (P < 0.01 P < 0.05) . Conclusion: Vertical and horizontal stimulation on head and face meridian can significantly improve sleep , lower the scores of PSQI of insomnia. The possible mechanism of it is to lower blood viscosity, improve blood circulation

656- gera: 148771/di/ra
USE OF COMPLEMENTARY AND ALTERNATIVE MEDICINE TREATMENTS BY PATIENTS WITH OBSTRUCTIVE SLEEP APNEA HYPOPNEA SYNDROME. SOOD A, NARAYANAN S, WAHNER-ROEDLER DL, KNUDSEN K, SOOD R, LOEHRER LL, HANSON AC, KUZNIAR TJ, OLSON EJ. *j clin sleep med.* 2007;3(6):575-79 (eng).

Study Objectives:To assess the proportion of patients with obstructive sleep apnea hypopnea syndrome (OSAHS) reporting previous or current use and interest in future use of complementary and alternative medicine (CAM) therapies.Design:Cross-sectional, point-of-care, anonymous survey. Setting:Sleep disorders center at a Midwest tertiary care center.Participants:Six hundred forty-six consecutive patients undergoing polysomnography.Measurements:The survey instrument comprised 45 items specifically related to CAM therapies, in addition to obtaining baseline data.Results:Response rate was 81% (522/646). A total of 406/522 (78%) patients were diagnosed with OSAHS. Mean age ± SD was 57 ± 14 years, and 267 participants (66%) were men. Overall, 237 (58%) participants reported ever using CAM. Ever and current CAM use specifically for improving sleep was reported by 20% and 7% of the participants, respectively. Twenty-six percent of participants reported ever using biologic products, and 52% reported ever using nonbiologic CAM treatments. A high proportion (58%) of the participants showed interest in future CAM use for improving sleep.Conclusion:A high proportion of patients with OSAHS report previous or current use, and interest in future use, of CAM treatments. This underscores the need to conduct further research in this field.

657- gera: 150693/di/ra

THE ADVANCES IN THE CLINICAL RESEARCH ON THE CURATIVE EFFECT OF ACUPUNCTURE COMBINED WITH MEDICINE ON INSOMNIA IN THE LATEST TEN YEARS. LI HONG, XIE XING, ZHU HUAN, ET AL. *journal of clinical acupuncture and moxibustion*. 2007;23(5):53 (chi).

658- gera: 152006/di/ra

52 CASES OF INSOMNIA TREATED WITH ACUPUNCTURE ON SHENMAI (BL62) AND ZHAOHAI. LIU WEI-ZHE. *world journal of acupuncture moxibustion*. 2007;17(2):61 (eng).

659- gera: 152178/di/ra

[THE ADVANCES IN THE CLINICAL RESEARCH ON THE CURATIVE EFFECT OF ACUPUNCTURE COMBINED WITH MEDICINE ON INSOMNIA IN THE LATEST 141 TEN YEARS]. LI HONG, XIE XING, ZHU HUAN, ET AL. *journal of clinical acupuncture and moxibustion*. 2007;23(5):53 (chi).

660- gera: 148097/di/re

COMPLEMENTARY AND ALTERNATIVE MEDICINE FOR SLEEP DISTURBANCES IN OLDER ADULTS.

GOONERATNE NS. *clin geriatr med*. 2008;24(1):121-38 (eng).

Complementary and alternative medicines (CAM) are frequently used for the treatment of sleep disorders, but in many cases patients do not discuss these therapies directly with their health care provider. There is a growing body of well-designed clinical trials using CAM that have shown the following: (1) Melatonin is an effective agent for the treatment of circadian phase disorders that affect sleep; however, the role of melatonin in the treatment of primary or secondary insomnia is less well established. (2) Valerian has shown a benefit in some, but not all clinical trials. (3) Several other modalities, such as Tai Chi, acupuncture, acupressure, yoga, and meditation have improved sleep parameters in a limited number of early trials. Future work examining CAM has the potential to significantly add to our treatment options for sleep disorders in older adults.

661- gera: 148202/di/ra

AURICULAR ACUPUNCTURE VERSUS SHAM ACUPUNCTURE IN THE TREATMENT OF WOMEN WHO HAVE INSOMNIA. SJÖLING M, MARIANNE ROLLERL, ERLING ENGLUND. *journal of alternative and complementary medicine*. 2008;14(1):39 (eng).

Background: Improvement in sleep parameters in relation to acupuncture treatment is often found and referred to as being a positive side-effect in the treatment of other illnesses. There is a lack of randomized studies, which primarily study the direct effect of acupuncture on sleep. Objectives: To investigate whether or not auricular acupuncture has an effect on sleep parameters among people with insomnia. Design: A single-blind, randomized pilot study where the treatment group received auricular acupuncture treatment (AAT) on active points and the control group received AAT on sham points during a 6-week treatment period. Setting: Participants were recruited from the psychiatric outpatient clinics in the geographical area connected to a local hospital in central Sweden. Subjects: In all, 28 women were included in the study, with 14 in each group. Their mean and median age was 53 years. Outcome Measures: Sleep parameters were obtained by using the Karolinska Sleep Diary. Results: No statistically significant differences were observed between the groups relating to parameters associated with the definition of insomnia. The treatment group experienced that it was easier to wake up in the morning compared with the control group (repeated-measures analysis of variance, $p = 0.04$). Both groups showed a statistically significant recovery in subjective sleep parameters during the study period (weeks 1–6) compared with baseline values (week 0). Conclusions: Only modest evidence was found supporting the hypothesis that AAT may have an effect on insomnia. Least improvements were found in total sleep time and number of awakenings, 2 parameters directly associated with the definition of insomnia. AAT may have a role in the treatment of insomnia, especially in combination with other treatments such as cognitive behavioral therapy. This study provides an example of how to perform studies using alternative therapies for sleep disorders.

662- gera: 148254/di/ra

A STUDY ON DIFFERENCES OF CURATIVE EFFECTS OF ACUPUNCTURE AND NCPAP FOR TREATMENT OF OSAHS. CHEN BO, ZHANG XIAO-SHAN, HUANG HUI, ET AL. *chinese acupuncture and moxibustion*. 2008;28(2):79 (chi).

Objective To compare curative effects of acupuncture and nasal continuous positive airway pressure (nCPAP) on obstructive sleep apnea-hypopnea syndrome (OSAHS), and to explore the characteristics and advantages of acupuncture in treatment of this disease. Methods Sixty-six cases of OSAHS were randomly divided into an acupuncture group ($n=44$) treated by acupuncture at Lianquan (CV 23) and Tianrong (SI 17) etc., and a nCPAP group ($n=22$) treated by nCPAP. Indexes of respiration, blood oxygen and sleep were monitored before, during and after treatment. Results Compared with those before treatment, no significant differences of these indexes were found in the acupuncture group during treatment ($P > 0.05$), but hypopnea index (HI), apnea-hypopnea index (AHI), the maximal apnea duration, the maximal hypopnea duration, sleep time spent when SaO_2 was below 90% ($SaO_2 < 90\%$) and the microarousal index improved significantly at the end of treatment ($P < 0.05$ or $P < 0.01$); while all the indexes improved significantly in the nCPAP group during treatment ($P < 0.01$), but the therapeutic effect was not maintained at the end of treatment with no significant difference as compared with those before treatment. The therapeutic effect in the nCPAP group was better than that in the acupuncture group during the treatment ($P < 0.05$ or $P < 0.01$), but no significant difference of the therapeutic effect was found between the two groups at the end of treatment ($P > 0.05$). Conclusion The therapeutic effect of nCPAP on OSAHS produces during treatment and the therapeutic effect of acupuncture produces after treatment, indicating they possibly have different mechanisms.

663- gera: 148412/di/ra

A RANDOMIZED CONTROL STUDY OF ABDOMINAL ACUPUNCTURE TREATMENT FOR PRIMARY INSOMNIA. YE TIAN-SHEN, WANG QING, XIE WEN-XIA, CHEN YONG, SUPERVISOR HE JIN-CAI. *shanghai journal of acupuncture and moxibustion*. 2008;27(2):3 (chi).

Objective To investigate the efficacy of abdominal acupuncture in treating primary insomnia. Methods Twenty-two patients with primary insomnia were randomly allocated to two groups, abdominal acupuncture plus medication and simple medication with diazepam (control). One course of treatment consisted of two weeks. The Pittsburgh Sleep Quality Index (PSQI) was used to assess sleep quality in both groups before and after treatment. A difference of PSQI score between pretreatment and posttreatment was compared between the groups. Results After treatment there was a significant difference in clinical therapeutic effect between the treatment and control groups ($P < 0.05$). Conclusion Abdominal acupuncture has a marked therapeutic effect on primary insomnia and is an effective

664- gera: 148413/di/ra

CLINICAL OBSERVATIONS ON TREATMENT OF INSOMNIA BY ACUPUNCTURE METHOD OF HARMONIZING NUTRIENT AND DEFENSE. LU JIN. *shanghai journal of acupuncture and moxibustion*. 2008;27(2):6 (chi).

Objective To investigate the efficacy of nutrient and defense harmonizing acupuncture in treating insomnia. Methods An acupuncture group of 12 patients were treated by acupuncture method of harmonizing nutrient and defense and a control group of 26 patients, with diazepam. Results The total efficacy rate was 88.1% in the acupuncture group and significantly higher than in the control group. The clinical cure rate was higher for patients with the duration of disease one year than for those > one year in the acupuncture group. Conclusion The results suggest

665- gera: 148732/di/ra

RANDOMIZED CONTROLLED OBSERVATION ON HEAD POINT-THROUGH-POINT THERAPY FOR TREATMENT OF INSOMNIA. DONG- J TUN PING, WANG SHUN SUN WEI-YI, LIU FEI. *chinese acupuncture and moxibustion*. 2008;28(3):159 (chi).

Objective To observe the therapeutic effect of head point-through-point therapy on insomnia and to probe the mechanism. **Methods** Seventy-one cases of insomnia were randomly divided into a head penetration needling group (n=36) and a routine acupuncture group (n 35). In the head penetration needling group, Shenting (GV 24)- through-anterior Shencong (EX-HN 1) , bilateral Toulinqi (CB 15)-through bilateral Shencong (EX- HN 1) . posterior Shencong-through-Qiangjian (GV 1á) were selected; and in the routine acupuncture group, Baihui (CV 20), Yintang (EX-HN 3), Sishencong (EX-HN 1), Neiguan (PC 6), etc. were selected. After treatment of 30 days, their therapeutic effects, cumulative scores of Pittsburgh Sleep Quality index (PSQI) and plasma serotonin contents before and after treatment were compared. **Results** The total effective rate of 91. 7% in the head penetration needling group was higher than 77. 1% in the routine acupuncture group (P<0. 05) , and the improvement of sleep quality, falling asleep time and the total cumulative score of PSQI in the head penetration needling group was superior to that in the routine acupuncture group (P<0. 05) , and plasma serotonin was significantly increased in the head penetration needling group with a significant difference as compared with that in the routine acupuncture group (P<0. 05). **Conclusion** The therapeutic effect of head penetration needling is better than that of the routine acupuncture, and the mechanism is related with regulation of serotonin metabolism.

666- gera: 148794/di/ra

MORE ABOUT AURICULAR ACUPUNCTURE FOR INSOMNIA. LEE MS, BYUNG-CHEUL SHIN. *journal of alternative and complementary medicine.* 2008;14(2):106 (eng).

667- gera: 148870/di/ra

STUDY OF ADJUSTING CIRCADIAN DYSRHYTHMIA DUE TO SLEEP DEPRIVATION BY POINT SHENQUE APPLICATION OF GARLIC PASTE. SHI NA, HUANG YONG , WU DONG , ZHU CHONG-TIAN. *shanghai journal of acupuncture and moxibustion.* 2008;27(3):13 (chi).

Objective To investigate the adjusting effect of point Shenque (CV 8) application of garlic paste on circadian dysrhythmia due to sleep deprivation and preliminarily explore the mechanism by which it adjusts circadian rhythm. **Methods** Twenty healthy male adults from Nanfang Medical University were randomly allocated to three groups: normal control (A) , sleep deprivation (B) and sleep deprivation plus point application (C) . Forty-eight hour sleep deprivation was performed in group B and C at the same time. Group A was not treated. Serum monoamine neurotransmitter (norepinephrine and 5-hydroxytryptamine) concentration was measured in group A, and group B and C after sleep deprivation. **Results** Norepinephrine (NE) had a typical circadian change in all the three groups (P < 0.01 in group A and C , P < 0.05 in group B) . The peak value was 158.377 and appeared at about 10:56 in group A , was 291.529 and appeared at about 19:44 in group B, and was 255.964 and appeared at about 17:06 in group C. The peak phase obviously deviated in group B as compared with group A and was somewhat restored in group C as compared with group B. 5-hydroxytryptamine (5-HT) had a typical approximate circadian rhythm in group A (P <0.01) . Its circadian rhythm disappeared in circadian rhythm (P > 0.05) . The peak value was 196.563 and appeared at about 13 :10 in group A. **Conclusion** Point application of garlic paste can adjust body' s circadian dysrhythmia and helps to restore the disordered rhythm to a certain extent. It is a simple and effective way to treat circadian dysrhythmia.

668- gera: 149201/di/ra

INSOMNIA DUE TO DEFICIENCY OF BOTH THE HEART AND SPLEEN TREATED BY ACUPUNCTURE-MOXIBUSTION AND CHINESE TUINA. LÜ MING & LIU XIAOYAN. *journal of traditional chinese medicine.* 2008;28(1): (eng).

669- gera: 149326/di/ra

CLINICAL OBSERVATIONS ON TREATMENT OF DYSSOMNIA BY NEEDLE EMBEDDING PLUS SSRIS IN DEPRESSION PAE. WANG TIAN-JUN, WANG LING-LING, TAO WEN-JIAN. *shanghai journal of acupuncture and*

moxibustion. 2008;27(5):5 (chi).

Objective To investigate an improvement in HAMD sleep score and its relationship with treatment frequency in treatment of dyssomnia by needle embedding plus SSRIs in depression patients. **Methods** Seventy-one depression patients were randomly allocated to three groups. The needle embedding group of 24 cases was treated by needle embedding plus SSRIs, the acupuncture group of 21 cases, by acupuncture plus SSRIs and the Medication group of 26 cases, with simple SSRIs. HAMD sleep score was counted in the three groups before treatment and at 1 , 2 , 4 and 6 weeks after. **Results** HAMD sleep score improved significantly more in the needle embedding and acupuncture groups than in the medication group. HAMD sleep score significantly improved from the first week of treatment in the needle embedding and acupuncture groups. There was a significant difference compared with the medication group (P <0. 01). The difference continued to exist at the following 2 and 4 weeks. There was no significant difference among the three groups at 6 weeks. SSRI treatment also improved HAMD sleep score. **Conclusion** Needle embedding or acupuncture plus SSRIs can significantly relieve dyssomnia in depression patients. Both produce a quick effect and are superior to simple SSRI treatment. There was no significant difference between needle embedding and acupuncture treatment, but needle embedding therapy decreases treatment frequency and has a practical clinical significance.

670- gera: 149345/di/ra

A PROPOS DES QIAO MAI (YANG QIAO ET YIN QIAO) ET DU SOMMEIL. LI MIN. *acupuncture traditionnelle chinoise.* 2008;18:67 (fra).

671- gera: 149346/di/ra

OBSERVATION CLINIQUE DE 87 CAS D'INSOMNIE TRAITÉS PAR UNE REGULATION DU YIN QIAO ET DU YANG QIAO OPERÉE PAR L'ACUPUNCTURE. ZHANG HONG ET XIONG KE. *acupuncture traditionnelle chinoise.* 2008;18:72 (fra).

672- gera: 149347/di/ra

OBSERVATION CLINIQUE DU TRAITEMENT ACUPUNCTURAL DE L'INSOMNIE PAR ZHAO HAI (6 RN) ET SHEN MAI (62 V.) EN TANT QUE POINTS PRINCIPAUX. WANG SI GUANG. *acupuncture traditionnelle chinoise.* 2008;18:78 (fra).

673- gera: 150140/di/re

AURICULAR ACUPUNCTURE FOR INSOMNIA: A SYSTEMATIC REVIEW. LEE MS, SHIN BC, SUEN LK, PARK TY, ERNST E. *int j clin pract.* 2008;aug 25:x (eng).

Objective: Auricular acupuncture (AA) is a therapeutic method by which specific points on the auricle are stimulated to treat various conditions. AA is often recommended as treatment for insomnia. The aim of this systematic review was to evaluate data from randomised, placebo-controlled clinical trials testing the effectiveness of AA for treating insomnia. **Methods:** We searched the literature using 18 databases from their inception to April 2008 without language restrictions. All prospective randomised clinical trials (RCTs) of AA for subjects with insomnia were considered. **Methodological quality** was assessed using the Jadad score. **Results:** We identified 433 possible relevant articles, in which include 10 acceptable RCTs. The methodological quality of the trials was generally poor. Magnetic pellets AA was compared with placebo AA in three of the studies. The results suggested beneficial effects on sleep efficiency compared with placebo AA. One RCT tested needle AA compared with placebo AA and failed to show the effectiveness of AA. Four RCTs compared Semen Vaccariae or magnetic pellet AA with conventional drugs (estazolam or diazepam). Favourable effects for AA were found. Two RCTs tested thumbtack needle AA vs. no treatment suggested beneficial effects of AA on a sleep score. **Conclusion:** We conclude that, because of the paucity and of the poor quality of the data, the evidence for the effectiveness of AA for the symptomatic treatment of insomnia is limited. Further, rigorously designed trials are warranted to confirm

674- gera: 150152/di/ra

[EFFECT OF ACUPUNCTURE COMBINED WITH MASSAGE OF SOLE ON SLEEPING QUALITY OF THE PATIENT WITH INSOMNIA]. ZHONG ZG, CAI H, LI XL, LÜ D. **chinese acupuncture and moxibustion.** 2008;28(6):411 (chi).

OBJECTIVE: To assess effect of acupuncture combined with massage of sole on sleeping quality of the patient with insomnia. **METHODS:** Fifty-eight cases of insomnia were randomly divided into an observation group (n = 32) and a control group (n = 26). The observation group were treated with oral administration of Alprazolam, massage of sole, and acupuncture at Zhongwan (CV 12), Guanyuan (CV 4), Qihai (CV 6), etc. on the abdomen as main points; the control group were treated with Alprazolam. Clinical therapeutic effects, and scores for Pittsburgh Sleep Quality Index (PSQI), Self-rating Anxiety Scale (SAS) and Self-rating Depression Scale (SDS) were assessed before and after treatment in the two groups. **RESULTS:** The effective rate was 93.75 in the observation group and 88.46% in the control group with no significant difference between the two groups; after treatment, there were significant or very significant differences in scores for various factors in the PSQI, SAS and SDS (P < 0.01, P < 0.05). **CONCLUSION:** Abdominal acupuncture as main combined with massage of sole can obviously improve

675- gera: 150584/di/ra

CLINICAL OBSERVATIONS ON TREATMENT OF INSOMNIA BY ACUPUNCTURE AND MOXIBUSTION PLUS AURICULAR PLASTER. SUN CHUN-HONG. **shanghai journal of acupuncture and moxibustion.** 2008;27(9):21 (chi).

Objective. To investigate the efficacy of acupuncture and moxibustion plus auricular plaster therapy in treating insomnia. **Methods** Acupuncture, moxibustion and auricular plaster therapy were performed at different points prescribed according to syndrome differentiation and types. The therapeutic effects were evaluated. **Results** Of the 66 patients, effectiveness occurred in 63, accounting for 95.5% and ineffectiveness occurred in 3, accounting for 4.5%. **Conclusion** Acupuncture, moxibustion and auricular plaster therapy at different points prescribed according to syndrome differentiation and classification has an exact therapeutic effect on insomnia.

676- gera: 151140/di/ra

EFFECTS ON MONOAMINE NERVE MEDIA IN SLEEP DEPRIVED YOUTH TREATED BY GARLIC CREAM PASTING ON CV8. NA SHI, YONG HUANG AND PETE TO. **international journal of clinical acupuncture.** 2008;17(2):85 (eng).

Objective: To study the effect of garlic cream pasting on Shenque (CV8) on monoamine nerve media in 48h sleep deprivation youth. **Methods:** Twenty healthy young men were divided randomly into three groups: the normal group (A), the sleep deprivation group (B) and the treatment group (C). Volunteers in groups B and C were deprived of sleep for 48 h and then were treated with garlic cream pasting on CV8, whereas the volunteers in group A stayed in a normal state without any treatment. After 48-hours of sleep deprivation, the temperature, blood pressure, heart rate, and serum levels of mNE and 5-HT of all the volunteers were tested. **Results:** After 48 hours of SD, the temperature and blood pressure in groups B and C had a tendency to increase compared with those of group A, but the heart rate increased obviously after 48 h of SD (P<0.05) and decreased after the garlic application therapy. NE in group B was lower than in group A (P<0.01) and increased obviously in group C (compared with that of groups A and B, both P<0.05). 5-HT levels were higher in groups B and C than in group A, and the difference between A and B was significant (P<0.05), while the difference between groups A and C was negligible. **Conclusion:** Garlic cream pasting on CV8 has an effect to resist the fatigue caused by sleep deprivation.

677- gera: 151228/di/ra

CLINICAL STUDY ON THE VISCERAL DIFFERENTIATION-BASED ACUPUNCTURE THERAPY FOR INSOMNIA. LING L, JIANG XM, XUE JW, WANG M, KE R. **journal of traditional chinese medicine.** 2008;28(4)::270-3. (eng).

OBJECTIVE: To investigate the clinical effects of acupuncture

for insomnia on the basis of visceral differentiation.

METHODS: Seventy cases of insomnia were randomly divided into a treatment group and a control group. The former was treated by acupuncture based on visceral differentiation and the latter by the routine acupuncture therapy. **RESULTS:** The clinical effects were significantly better in the treatment group than that of the control group (P<0.05). **CONCLUSION:** The visceral differentiation-based acupuncture therapy may enhance the

678- gera: 151263/di/ra

[OBSERVATION ON THE THERAPEUTIC EFFECT OF NECK CLUSTERED NEEDLING ON INSOMNIA]. QI LZ, MA XP, YANG L. **chinese acupuncture and moxibustion.** 2008;28(12):861-4 (chi).

OBJECTIVE: To compare therapeutic effects of neck clustered needling and medication on insomnia so as to search for a better method for treatment of insomnia. **METHODS:** Seventy-six insomnia patients were randomly allocated to an acupuncture group and a medication group, 38 cases in each group. The acupuncture group was treated by neck clustered needling, twice each week, 10 sessions constituting one course, and the medication group by oral administration of Alprazolam, before sleeping each day, 5 weeks constituting one course. The Pittsburgh Sleep Quality Index (PSQI) score was used for assessment of therapeutic effects, and the therapeutic effect and changes of PSQI scores before and after treatment were observed in the both groups. **RESULTS:** The total effective rate was 92.1% in the acupuncture group and 89.5% in the medication group with no statistically significant difference (P > 0.05). The cured rate of 34.2% and the cured and markedly effective rate of 84.3% in the acupuncture group were significantly higher than 7.900 and 36.9% in the medication group (both P < 0.01). Comparisons of the differences before and after treatment in scores of various factors between the two groups showed that the acupuncture group was better than the medication group in sleep quality, hypnotic use, activity of daily living and the improvement of the total score (P < 0.05 or P < 0.01), but the medication group was better than the acupuncture group in improvement of falling-asleep time (P < 0.05). **CONCLUSION:** The therapeutic effect of the neck clustered needling on insomnia is better than that of the medicine.

679- gera: 152500/di/ra

EFFICACY OF WRISTS OVERNIGHT COMPRESSION (HT 7 POINT) ON INSOMNIACS: POSSIBLE ROLE OF MELATONIN. NORDIO M, ROMANELLI F.. **minerva med.** 2008;99(6):539-47 (eng).

AIM: Insomnia is a major problem which decreases life quality. Many causes are involved with it and anxiety is often associated. The underlying mechanism is not completely understood, even though different factors seem to be associated. Among them melatonin and its circadian rhythm is thought to have an important role. In addition, acupressure and acupuncture are known to ameliorate insomnia and anxiety, when a specific wrist point is stimulated (HT 7 Shenmen). With these bases, the aim of the present study has been to evaluate the efficacy of an acupressure device, "H7-insomnia control", positioned on HT 7 points, during the night, in terms of general health and anxiety levels, together with the evaluation of sleep quality and the urinary melatonin metabolite 6-hydroxymelatonin sulphate determination, in a number of insomniacs. **METHODS:** Forty patients with insomnia were divided into two groups and randomly received either the H7 or placebo treatments, in a double-blind protocol, for 20 nights. Before and after treatments every subject answered a series of questionnaires (General Health Questionnaire 28 items; State-Trait Anxiety Inventory; Pittsburgh Sleep Quality Index) and collected 24 h urines, divided into two samples of 12 h each. Urinary melatonin metabolite was then determined using a RIA method. **RESULTS:** Data obtained indicate that the device H7-insomnia control is efficacious to ameliorate quality of sleep and reduce anxiety levels in insomniacs, at a higher extent than in the placebo group. In addition, the 24 hours urinary melatonin metabolite rhythm, obtained at the end of treatment, was considered as being normal in a higher percentage of H7-treated patients, with respect to the placebo group. **CONCLUSION:** It is plausible to hypothesize that the wrist

acupressure device might be considered a valid tool, without adverse effects since it does not contain pharmaceutical products, that is able to naturally ameliorate sleep quality in insomniacs, acting through a not yet completely clarified mechanism, that may involve melatonin.

680- gera: 152501/nd/ra

EFFICACY OF HT 7 POINT ACUPRESSURE STIMULATION IN THE TREATMENT OF INSOMNIA IN CANCER PATIENTS AND IN PATIENTS SUFFERING FROM DISORDERS OTHER THAN CANCER. CERRONE R, GIANI L, GALBIATI B, MESSINA G, CASIRAGHI M, PROSERPIO E, MEREGALLI M, TRABATTONI P, LISSONI P, GARDANI G.. *minerva med.* 2008;99(6):535-7 (eng).

AIM: The induction of sleep would depend on interaction between gabaergic system and the pineal gland through its main hormone melatonin. Until few years ago benzodiazepines were the only drugs effective in the treatment of insomnia. Recently, however, both melatonin and acupressure have appear to be active in sleep disorders. The aim of study was to evaluate the efficacy of HT 7 point acupressure in insomnia. METHODS: The study enrolled 25 patients affected by sleep disorders, 14 of whom had a neoplastic disease. They were treated by HT 7 stimulation for at least two consecutive weeks using a medical device named H7 Insomnia Control. RESULTS: An improvement in the quality of sleep was achieved in 15/25 (60%) patients, with a more evident efficacy in cancer patients (11/14 [79%]). CONCLUSION: This study confirms previous clinical data showing the efficacy of acupressure in the treatment of sleep disorders, particularly in cancer-related insomnia.

681- gera: 152967/di/ra

IL FAUT TRAITER LES INSOMNIES EN SOIRÉE ! GORET O, NGUYEN J.. *acupuncture & moxibustion.* 2008;7(4):337 (fra).

682- gera: 151291/nd/ra

TRADITIONAL NEEDLE ACUPUNCTURE TREATMENT FOR INSOMNIA: A SYSTEMATIC REVIEW OF RANDOMIZED CONTROLLED TRIALS. YEUNG WF, CHUNG KF, LEUNG YK, ZHANG SP, LAW AC. *sleep med.* 2009;mar 18: (eng).

OBJECTIVES: Previous reviews regarding traditional needle acupuncture (TNA) treatment for insomnia were limited to English scientific literature. A comprehensive review including Chinese and English literature has therefore been conducted to examine the efficacy of TNA for insomnia. METHODS: We performed systematic review of randomized controlled trials (RCTs) of TNA as intervention for insomnia against placebo, Western medication, and non-treated controls. The methodological quality of the studies was assessed by the modified Jadad score and the acupuncture procedure was appraised by the STRICTA criteria. RESULTS: Twenty RCTs were identified for detailed analysis. Majority of the RCTs concluded that TNA was significantly more effective than benzodiazepines for treating insomnia, with mean effective rates for acupuncture and benzodiazepines being 91% and 75%, respectively. In two more appropriately conducted trials, TNA appeared to be more efficacious in improving sleep than sleep hygiene counseling and sham acupuncture. Standardized and individualized acupuncture had similar effective rates. Despite these positive outcomes, there were methodological shortcomings in the studies reviewed, including imprecise diagnostic procedure, problems with randomization, blinding issues, and insufficient safety data. Hence, the superior efficacy of TNA over other treatments could not be ascertained. CONCLUSION: Since the majority of evidence regarding TNA for insomnia is based on studies with poor-quality research designs, the data, while somewhat promising, do not allow a clear conclusion on the benefits of TNA for insomnia. Moreover, the results support the need for large scale placebo-controlled double-blinded trials.

683- gera: 152528/nd/ra

A SYSTEMATIC REVIEW OF THE EFFECTS OF ACUPUNCTURE IN TREATING INSOMNIA. HUANG W, KUTNER N, BLIWISE DL. *sleep med rev.* 2009;13(1):73-104 (eng).

To examine the extent to which research supports the use of acupuncture in treating insomnia, a systematic review was conducted that included not only clinical trials, but also case series in both English and Chinese literature. Thirty studies were included in the review, 93% of which showed positive treatment effects of acupuncture in improving various aspects of sleep. Although acupuncture has been demonstrated to be safe and holds great potential to be an effective treatment modality for insomnia, the evidence is limited by the quality of these studies and mixed results from those with sham (or unreal treatment) controls. Of the thirty studies, twelve were clinical trials with only three double-blinded. Only five used sham controls, and of these, four showed statistically significant differences favoring real treatments; however, none evaluated the adequacy of sham assignment. Three studies used actigraphy or polysomnography as objective outcome measures. The considerable heterogeneity of acupuncture techniques and acupoint selections among all studies made the results difficult to compare and integrate. High-quality randomized clinical trials of acupuncture in treating insomnia, with proper sham and blinding procedures will be required in the future. This review highlights aspects of acupuncture treatments important to guide future research and clinical practice.

684- gera: 152738/di/re

COMPLIMENTARY AND ALTERNATIVE MEDICINE FOR SLEEP DISTURBANCES IN OLDER ADULTS. NALAKA S. GOONERATNE. *clin geriatr med.* 2009;: (eng).

Complimentary and alternative medicines (CAM) are frequently used for the treatment of sleep disorders, but in many cases, patients do not discuss these therapies directly with their health care provider. There is a growing body of well-designed clinical trials using CAM that have shown the following: 1) Melatonin is an effective agent for the treatment of circadian phase disorders that affect sleep, however, the role of melatonin in the treatment of primary or secondary insomnia is less well established. 2) Valerian has shown a benefit in some, but not all clinical trials. 3) Several other modalities, such as Tai Chi, acupuncture, acupressure, yoga and meditation have improved sleep parameters in a limited number of early trials. Future work examining CAM has the potential to significantly add to our treatment options for sleep disorders in older adults.

685- gera: 153260/di/ra

THE NEEDLE-ROLLING THERAPY FOR TREATMENT OF NON-ORGANIC CHRONIC INSOMNIA IN 90 CASES. HUANG LS, WANG DL, WANG CW, HU YP, ZHOU JW, LI N. *j tradit chin med.* 2009;29(1):19-23 (eng).

To evaluate the therapeutic effects of needle-rolling therapy for chronic insomnia. METHODS: In the present multi-central randomly controlled clinical study, 180 cases of chronic insomnia were randomly divided into the following two groups, a treatment group (90 cases) treated by the needle-rolling therapy and a control group (90 cases) treated with clonopin. The treatment course for both the two groups was 4 weeks. The therapeutic effects were evaluated based on improvement of the TCM symptoms and the Pittsburgh's sleep-quality index (PSQI). RESULTS: After treatment, there were significant differences between the two groups in the effective rate ($P < 0.05$), and in the total score of PSQI and in the scores of the 4 sub-items, i.e. sleep-quality, sleep-efficiency, hypnotic and daytime function ($P < 0.05$). Although there was no significant difference between the two groups in the effective rate after a 3-month follow-up period, significant differences still existed in the 3 sub-items of sleep- efficiency, hypnotic, and daytime function of the PSQI ($P < 0.05$). CONCLUSION: As compared with hypnotics of the second generation, the needle-rolling therapy may show better therapeutic effects for chronic insomnia patients.

686- gera: 153265/di/ra

INFLUENCE OF AURICULAR PLASTER THERAPY ON SLEEPING STRUCTURE IN OSAS PATIENTS. WANG XH, XIAO LY, WANG BF, YUAN YD, PAN WS, SHI YZ. *j tradit chin med.* 2009;29(1):3-5 (eng).

To evaluate the therapeutic effects of auricular plaster therapy for obstructive sleep apnea syndrome (OSAS) and the

influence on sleeping structure. **METHODS:** 45 OSAS patients were randomly divided into a treatment group of 30 cases and a control group of 15 cases for comparison of the changes in parameters of respiration and sleep at night. **RESULTS:** The auricular plaster therapy significantly improved the hypoventilation index, respiratory disturbance index and other respiratory parameters as well as the sleeping parameters such as the time and rate of sleep at stage I and II, and the waking time and rate. **CONCLUSION:** Auricular plaster therapy may show good therapeutic effects for OSAS, and with the advantages of low cost and less side effects.

687- gera: 153360/di/ra

[EFFECT OF MODIFIED XIAOYAO POWDER FOR IMPROVING SLEEP IN PATIENTS WITH PSYCHOLOGICAL STRESS INSOMNIA]. LI Y, XU BY, XIAO F. *chinese journal of integrated traditional and western medicine*. 2009;29(3):208-11 (chi).

To subjectively and objectively assess the effect of Jiawei Xiaoyao Powder (JXYP) on sleep in patients with psychological stress insomnia. **METHODS:** A randomized controlled study was conducted in 33 patients with psychological stress insomnia. They were assigned to 4 groups, 4 in the TCM group treated with JXYP, 5 in the Western medicine (WM) group treated with Estazolam, 9 in the integrated medicine (IM) group treated with JXYP plus Estazolam, and 10 in the control group treated with placebo. Quality of sleep in patients was assessed subjectively and objectively before treatment and 6 weeks after treatment by Pittsburgh sleep quality index (PSQI), self-rating scale of sleep (SRSS) and polysomnography (PSG), respectively. **RESULTS:** Subjective assessment on sleep showed that after 6-week treatment, the scores of PSQI and SRSS remarkably reduced in the TCM, IM and control groups ($P < 0.05$), while the decrease was insignificant in the WM group ($P > 0.05$), but no significant difference between groups was shown. The objective assessment by PSG showed that no significant change was found after treatment in parameters of total sleep time (TST), sleep time of phase 1 and 2, slow wave phase, rapid-eye-movement (REM) phase, sleep latency, REM sleep latency, also in long waking and short waking times in all group ($P > 0.05$), but a significant increase of sleep efficacy ($P < 0.05$) and an increasing trend of TST ($P > 0.05$) were shown in the IM group, and an increasing trend of both in the TCM group ($P > 0.05$). **CONCLUSION:** JXYP, combined with or without Estazolam, can improve the quality of sleep subjectively, and the combination of the two could enhance the efficacy of sleep in patients with psychological stress insomnia.

688- gera: 153361/di/ra

[ANALYSIS ON SOMNIPATHY RELATED FACTORS IN ELDERLY PATIENTS WITH STROKE AND COMPARATIVE STUDY ON THE EFFICACY OF TREATMENT BY TRADITIONAL CHINESE MEDICINE AND BY ESTAZOLAM]. LI HC, CHEN XG, TIAN X. *chinese journal of integrated traditional and western medicine*. 2009;29(3):204-7 (chi).

To analyze the somniphathy related factors in elderly patients with stroke and to compare effects of traditional Chinese medicine and estazolam on sleep and the followed nervous function. **METHODS:** The somniphathy related factors in 336 elderly patients with stroke, 221 accompanied with somniphathy and 115 with normal sleep, were studied and analyzed. Moreover, the 221 patients with somniphathy were assigned to two groups, 112 in the treated group treated with TCM according to syndrome differentiation, and 109 in the control group treated with estazolam. Changes of scores rated by neurological deficit scale (NDS), sleep dysfunction rating scale (SDRS), Hamilton anxiety rating scale (HAMA), Hamilton depression scale (HAMD), and treatment emergent symptom scale (TESS) were observed before and after treatment. **RESULTS:** The occurrence of somniphathy in patients with cerebral hemorrhage was significantly higher than in those with cerebral infarction; it was higher in patients with lesion in brain stem, cerebral hemisphere (frontal lobe), or basal ganglion than in those with lesion in other sites; and patients with severe neurological deficit were more liable to having somniphathy. TCM showed a significant effect in improving the insomnia symptoms in patients, with the total effective rate reaching 81.25% (91/112), which was higher than that in the

control group, 65.14% (71/109, $P < 0.01$). Along with the improving of sleep, marked recovery of the nervous function was shown in both groups, with NDS score reduced significantly ($P < 0.05$). **CONCLUSION:** The occurrence of somniphathy in stroke patients was closely related with the property and site of lesion, and the neurological deficit degree of patients. Better sleep is surely favorable for recovery of the nervous function, and TCM shows a favorable efficacy on somniphathy.

689- gera: 153426/di/ra

[ANALYSIS ON SOMNIPATHY RELATED FACTORS IN ELDERLY PATIENTS WITH STROKE AND COMPARATIVE STUDY ON THE EFFICACY OF TREATMENT BY TRADITIONAL CHINESE MEDICINE AND BY ESTAZOLAM]. LUO H-C, QIAN R-Q. *chinese journal of integrated traditional and western medicine*. 2009;29(3):204 (chi).

To analyze the somniphathy related factors in elderly patients with stroke and to compare effects of traditional Chinese medicine and estazolam on sleep and the followed nervous function. **Methods** The somniphathy related factors in 336 elderly patients with stroke, 221 accompanied with somniphathy and 115 with normal sleep, were studied and analyzed. Moreover, the 221 patients with somniphathy were assigned to two groups, 112 in the treated group treated with TCM according to syndrome differentiation, and 109 in the control group treated with estazolam. Changes of scores rated by neurological deficit scale (NDS), sleep dysfunction rating scale (SDRS), Hamilton anxiety rating scale (HAMA), Hamilton depression scale (HAMD), and treatment emergent symptom scale (TESS) were observed before and after treatment. **Results** The occurrence of somniphathy in patients with cerebral hemorrhage was significantly higher than in those with cerebral infarction; it was higher in patients with lesion in brain stem, cerebral hemisphere (frontal lobe), or basal ganglion than in those with lesion in other sites; and patients with severe neurological deficit were more liable to having somniphathy. TCM showed a significant effect in improving the insomnia symptoms in patients, with the total effective rate reaching 81.25% (91/112), which was higher than that in the control group, 65.14% (71/109, $P < 0.01$). Along with the improving of sleep, marked recovery of the nervous function was shown in both groups, with NDS score reduced significantly ($P < 0.05$). **Conclusion** The occurrence of somniphathy in stroke patients was closely related with the property and site of lesion, and the neurological deficit degree of patients. Better sleep is surely favorable for recovery of the nervous function, and TCM shows a favorable efficacy on somniphathy.

690- gera: 153427/di/ra

[EFFECT OF MODIFIED XIAOYAO POWDER FOR IMPROVING SLEEP IN PATIENTS WITH PSYCHOLOGICAL STRESS INSOMNIA]. LI YAN, XU BI-YUN, XIAO FANG. *chinese journal of integrated traditional and western medicine*. 2009;29(3):208 (chi).

691- gera: 153457/di/ra

[CLINICAL OBSERVATIONS ON THE TREATMENT OF INSOMNIA BY APPLICATION OF JIAOTAI WAN TO THE UMBILICUS]. LI YANG. *shanghai journal of acupuncture and moxibustion*. 2009;28(5):256 (chi).

To compare the efficacy of applicat treating insomnia (heart-kidney non-interaction type). **Methods** One hundred and fifty-two insomnia patients were allocated, in order of time, to a treatment group of 76 cases and a control group of 76 cases. The treatment group received application of Jiaotai Wan to the umbilicus and the control group took it orally. The course of treatment was four weeks in both groups. The clinical therapeutic effects were evaluated using the Pittsburgh Sleep Quality Index before treatment, at 1, 2 and 4 weeks after the beginning of treatment and at 1,2 and 4 weeks after the completion of treatment. **Results** Sleep quality improved without adverse reactions in both group of patients after four weeks' treatment. Improvement in sleep continued for a long time after the completion of treatment. **Conclusion** Application of Jiaotai Wan to the umbilicus and oral administration of it have an exact therapeutic effect on insomnia. There was no significant difference between the

692- gera: 153694/di/ra

[CLINICAL OBSERVATION ON ACUPUNCTURE REGULATING "DOUBLE VITALITY" FOR TREATMENT OF INSOMNIA]. RUAN JW. chinese acupuncture and moxibustion. 2009;29(5):371-3 (chi).

To observe the clinical therapeutic effect of acupuncture regulating "double vitality" for treatment of insomnia, and to enrich the therapeutic principle and the idea of acupoint selection. METHODS: Thirty-four cases of insomnia were selected. According to the therapeutic principle of regulating the primary vitality and calming the heart vitality, the acupoints on the Governor Vessel and the Bladder Meridian, Shenting (GV 24), Baihui (GV 20), Xinshu (BL 15), etc. were alternatively selected for regulating the primary vitality, and the points on the Heart Meridian and the Pericardium Meridian, Shaohai (HT 3), Shenmen (HT 7), Neiguan (PC 6), etc. were selected for calming the heart vitality. The main symptoms and the syndromes of insomnia were assessed and analyzed. RESULTS: After treatment for 4 courses, the total effective rate was 88.2%, and the time falling asleep was significantly shortened ($P < 0.05$) and the sleeping time was prolonged ($P < 0.05$), and also the syndromes induced by insomnia were significantly improved ($P < 0.01$). CONCLUSION: Acupuncture for regulating "double vitality"

693- gera: 153695/di/ra

[OBSERVATION ON THERAPEUTIC EFFECT OF CHUZHEN

THERAPY ON INSOMNIA]. HU YP, LI H, YIN C, WANG YJ, LUO R. chinese acupuncture and moxibustion. 2009;29(5):365-9 (chi).

To evaluate the therapeutic effect of Chuzhen therapy on insomnia through clinical randomized controlled trials. METHODS: Sixty cases of insomnia were randomly divided into a Chuzhen group ($n=30$) and an acupuncture group ($n=30$). Acupoints of Bazhen (Baihui Bazhen, Fengfu Bazhen, Shendao Bazhen) and Hechelu [from Dazhui (GV 14) to Mingmen (GV 4)] in the Chuzhen group, and Baihui (GV 20), Sishencong (EX-HN 1), etc. in the acupuncture group were selected, respectively. Four weeks treatments were carried out in the two groups, once daily for 5 times on week days. Three months after treatment, they were followed up and the therapeutic effects were assessed by the effective rate of sleep improvement and Pittsburgh Sleep Quality Index (PSQI). RESULTS: After treatment, the sleep quality in the two groups was improved, but there were no differences in the effective rate of sleep improvement and PSQI between the two groups (all $P > 0.05$). Three months after treatment, the total effective rate of 85.2% in the Chuzhen group was better than 78.6% in the acupuncture group ($P < 0.05$). The total cumulative score of PSQI, sleep effectiveness and the factors of sleep obstacle in the Chuzhen group were significantly different from those in the acupuncture group (all $P < 0.05$). CONCLUSION: Chuzhen therapy can increase long-term sleep quality and living quality through improving the effective rate of sleep and reducing the score of PSQI in the patients of insomnia.

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