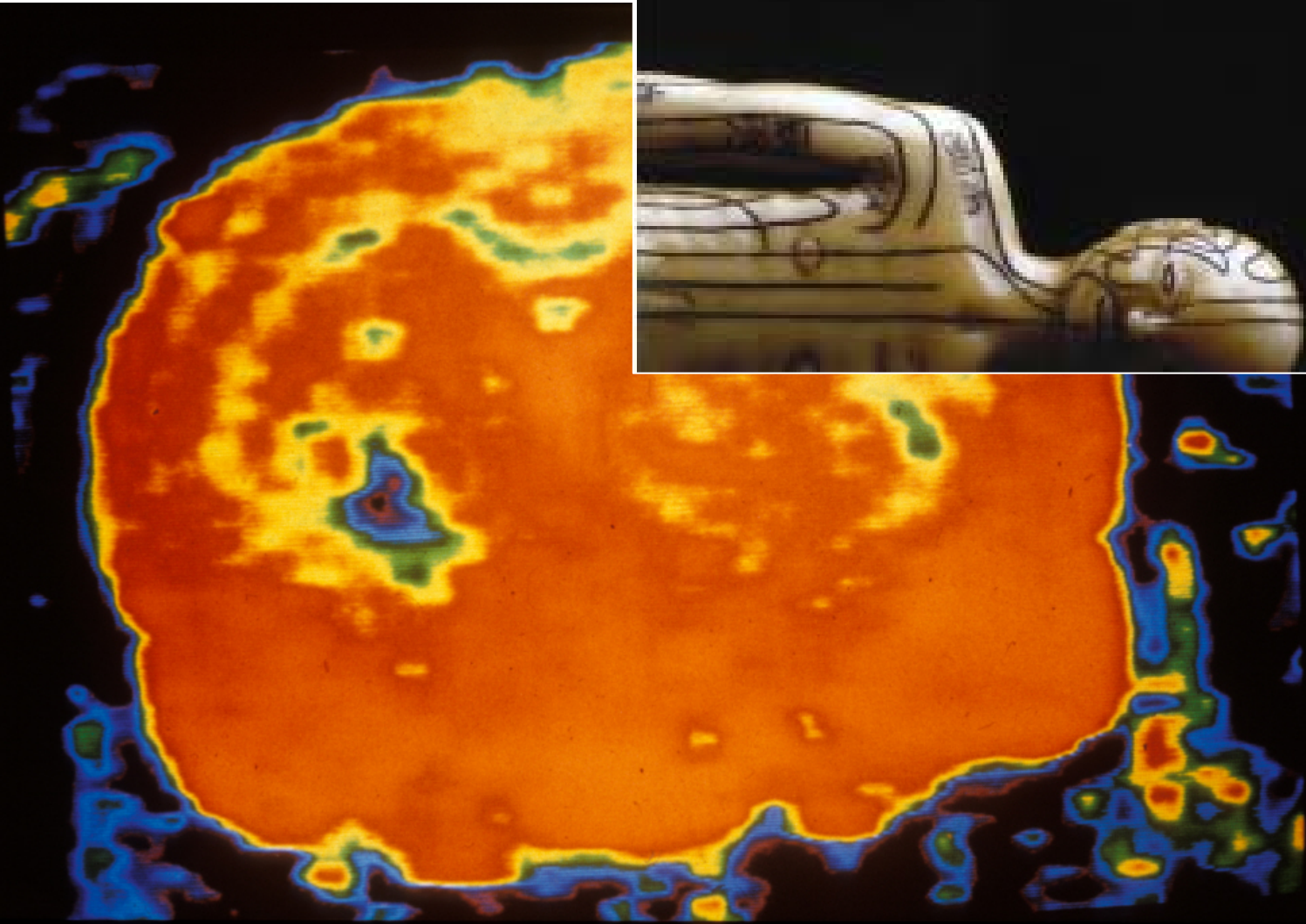


# Acupuncture, MTC & maladie de Parkinson

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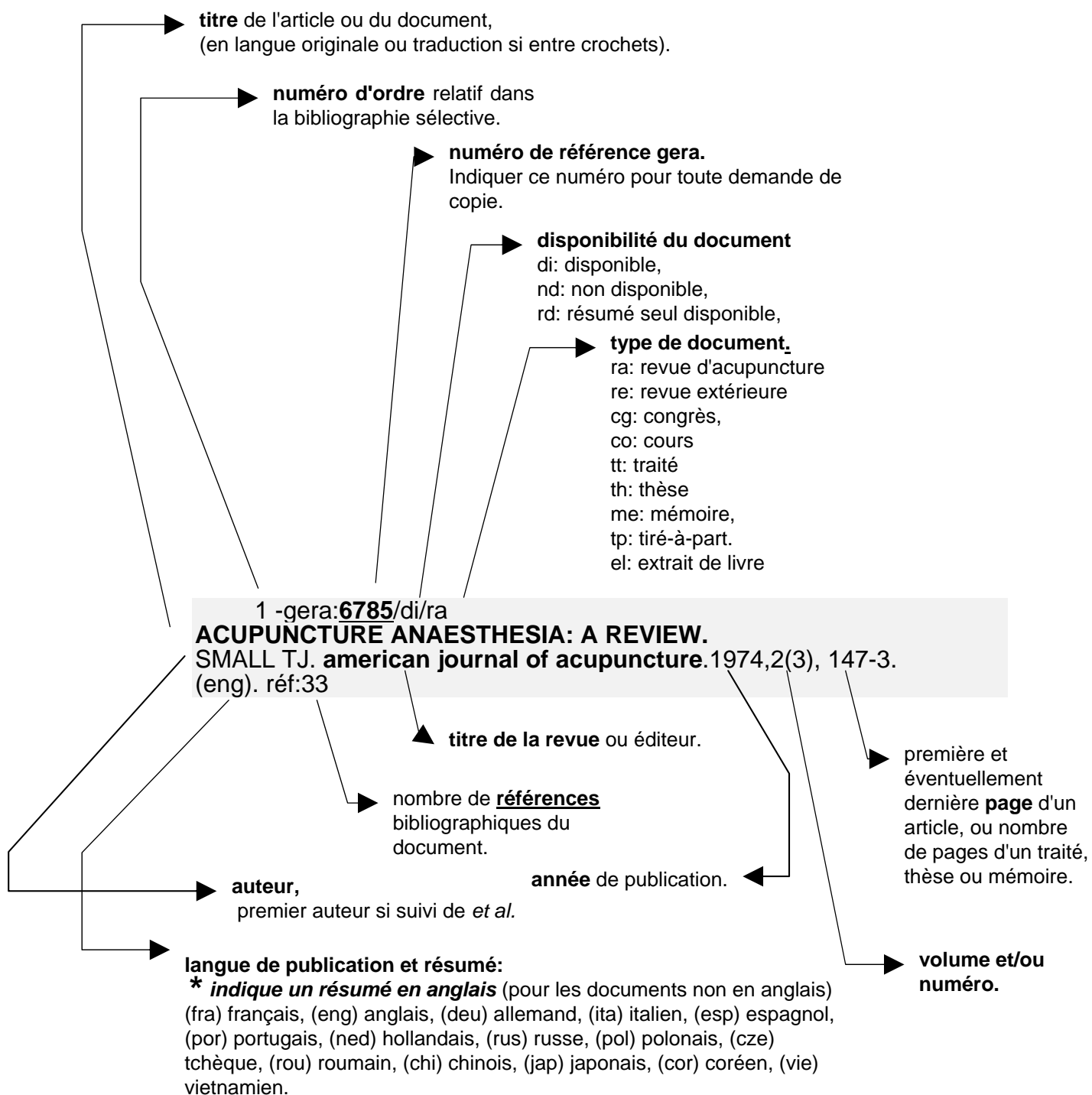


# Acupuncture, TCM & Parkinson's disease

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1- gera: 10448/di/ra

**UN CAS DE MASSOTHERAPIE CHINOISE. GOMO M. revue internationale d'acupuncture.** 1951;3(4):127-8 (fra).

Rapport d'un cas de traitement de maladie de Parkinson.

2- gera: 6032/di/ra

**[LA CRANIOPUNCTURE DANS LES AFFECTIONS CEREBRALES]. CHIAO SHUNFA. chinese medical journal.** 1977;3(5):325-8 (eng).

Publication de l'initiateur de la craniopuncture : 1) Sélection et description des zones. 2) Effets thérapeutiques chez 500 cas de thrombose cérébrale, 32 hémorragie cérébrale, 20 chorée, 31 parkinson, 50 hypertension et 60

3- gera: 6486/nd/re

**ESSAI DE TRAITEMENT PAR ACUPUNCTURE D'UN SYNDROME THALAMIQUE EN MILIEU NEUROLOGIQUE. ARMERO R ET AL. medecine et hygiène.** 1978;1284:1545-8 (fra).

Etude comparée de plusieurs techniques d'acupuncture sur un cas de syndrome thalamique (algie de l'hémicorps droit) : 1) Une acupuncture simple 4GI + 60V ne donne pas de résultat satisfaisant. 2) La craniopuncture entraîne une amélioration rapide mais transitoire après chaque séance tant sur le syndrome algique que sur les tremblements. 3) La puncture des points Huatuojiji entraîne également une cédation rapide, mais transitoire. 4) Le meilleur résultat est obtenu par la mise en place de catgut au niveau des points Huatuojiji.

4- gera: 12636/di/ra

**[CRANIOPUNCTURE : THERAPEUTIQUE ET ASPECTS BIOCHIMIQUES]. TENK M ET AL. akupunktur.** 1978;1:12 (deu).

Puncture de la zone de la motricité et tremblements et action sur les états spastiques et choréothétosiques. Résultats : baisse de l'hypertonie, amélioration des possibilités de rééducation.

5- gera: 12635/di/ra

**PARALYSIS AGITANS. (SHAKING PALSY). HONG-YEN HSU. bulletin of the oriental healing arts institute.** 1979;4(5):10-2 (eng).

6- gera: 12637/di/cg

**[ETUDE PRELIMINAIRE SUR L'EFFET DE L'ACUPUNCTURE SUR L'ATAXIE HEREDITAIRE ET LA PARALYSIE AGITANS]. HUASHAN HOSPITAL. advances in acupuncture and acupuncture anaesthesia,beijing.** 1980;:71 (eng).

7- gera: 531/di/ra

**[CAS CLINIQUE : NYSTAGMUS]. ANGELI C ET AL. quaderni di agopuntura tradizionale.** 1981;3(4):21 (ita).

8- gera: 533/di/ra

**[SYNDROME DIFFERENTIEL DE LA MALADIE DE PARKINSON BASE SUR LA MTC ET SON TRAITEMENT PAR COMBINAISON MTC-MO]. ZAI CHUNHUO ET AL. shanghai journal of traditional chinese medicine.** 1981;5:16-7 (chi).

9- gera: 1589/di/ra

**[TRAITEMENT DE L'ATAXIE CEREBELLEUSE HEREDITAIRE PAR GANODERMA CAPENSE. RAPPORT DE 4 CAS]. WANG ZHIYUAN ET AL. journal of traditional chinese medicine.** 1981;1(1):47 (eng).

Ganoderma capense a été utilisé précédemment avec des

résultats favorables sur les dystrophies musculaires. L'ataxie cérébelleuse est considérée comme une affection dégénérative des muscles et du système nerveux. Sur le plan de la MTC cela correspond à un vide de Yin et principalement à un vide des reins Yin, ganoderma a un effet tonique général. Sur 4 cas on observe dans un cas une disparition complète des symptômes, dans 1 cas une amélioration permettant au patient de travailler. Dans les deux autres cas les résultats ne sont pas satisfaisants. Les résultats semblent liés à l'ancienneté de l'affection.

10- gera: 1649/di/ra

**ETUDE PRELIMINAIRE DE L'EFFET THERAPEUTIQUE DE L'ACUPUNCTURE SUR L'ATAXIE HEREDITAIRE ET LA MALADIE DE PARKINSON (64). HOPITAL HUASHAN. mensuel du medecin acupuncteur.** 1981;78:282-3 (fra).

11- gera: 532/di/ra

**[TRAITEMENT DE LA CHOREE]. JIANG SHIYING. journal of new chinese medicine.** 1982;14( ): (chi).

12- gera: 1650/di/ra

**[PARALYSIS AGITANS TRAITÉ PAR LES ANESTHESIQUES DE LA MTC]. QIAN KEJIU ET AL. journal of traditional chinese medicine.** 1982;23(2):38 (eng).

13- gera: 12634/di/ra

**FISIOPATOLOGIA Y TRATAMIENTO DEL TEMBLOR. PADILLA JL. sociedad espanola de medicos acupuntores sema.** 1982;5:10-4 (esp).

14- gera: 9951/di/ra

**[TRAITEMENT DE L'ISCHEMIE PERIPHERIQUE ET DES ULCERATIONS CHRONIQUES PAR STIMULATION NERVEUSE TRANSCUTANEE (TNS)]. KAADA B. acupuncture and electrotherapeutics research.** 1983;8(1):71 (eng).

Traitement par TNS de 30 patients avec maladie de raynaud. L'électrode active est placée entre le pouce et l'index, et l'autre électrode au rebord cubital de la même main. Séance de 30 minutes, 1 à 3 fois par jour au domicile du patient. On observe une élévation de la température cutanée 15 à 20 minutes après, élévation qui persiste 2 à 6 heures. Les accès ischémiques sont diminués en fréquence et en intensité. Des résultats identiques sont observés chez 16 patients souffrant de neuropathie diabétique, d'insuffisance veineuse, de trombo-angéite oblitérante, d'artériosclérose ou de maladie de Parkinson. 30 patients avec des ulcères chroniques d'étiologie variable (neuropathie, artériosclérose, varice, phlébite, sclérodémie) ont été guéris par TNS, qui améliore la circulation locale. L'avantage du TNS par rapport à l'acupuncture par aiguille est qu'il peut être administré par le patient lui-même à domicile sans risque d'infection sur un membre hypovascularisé.

15- gera: 7558/di/ra

**[ATAXIE CEREBELLEUSE TRAITÉE PAR ACUPUNCTURE : RAPPORT D'UN CAS]. QIAN YIXIAN. zhejiang journal of traditional chinese medicine.** 1984;19(4):153 (chi).

16- gera: 7562/di/ra

**[TRAITEMENT EFFICACE DE L'ATAXIE CEREBELLEUSE HEREDITAIRE PAR QIGONG]. ZHONG MING QUAN. qigong and science.** 1984;5(2):70 (chi).

17- gera: 8478/di/ra

**[AFFECTION SENSITIVE PROPAGEE LE LONG DES MERIDIENS, RAPPORT CLINIQUE DE 80 CAS].** LIU CHENG ZHONG. **chinese journal of integrated traditional and western medicine.** 1984;4(12):711 (chi\*).  
L'affection est caractérisée par des sensations paroxystiques (paresthésies) progressant le long d'une zone particulière du corps humain. La crise débute au niveau d'un point fixe et se propage sur une largeur de 10 à 40 mm. Le trajet correspond à un méridien. Chaque crise dure 3 à 5 minutes laissant une zone hypoesthésique le long du méridien. Depuis 1959, 224 cas ont été rapportés en Chine. Le tableau clinique correspond à celui de la "maladie se développant automatiquement dans les méridiens" décrit dans la littérature ancienne, et peut être appelé "épilepsie sensorielle à propagation méridienne".

18- gera: 8819/di/cg  
**RESEARCH ON THE PROPAGATION OF SOUND INFORMATION ALONG MERIDIANS (PSIM) IN PARAPLEGIC PATIENTS.** SUN PINGSHENG ET AL. **second national symposium on acupuncture and moxibustion, beijing.** 1984;:301 (eng).

19- gera: 12638/di/ra  
**[CAS DE TREMBLEMENTS DES MEMBRES INFÉRIEURS].** CHEN KENIAN. **shaanxi journal of tcm.** 1984;5(3):25 (chi).

20- gera: 12639/di/ra  
**[CAPITIS TREMOR].** YANG NIEMI. **journal of new chinese medicine.** 1984;12:16 (chi).

21- gera: 7590/di/ra  
**[TRAITEMENT PAR ACUPUNCTURE D'UN CAS D'ATAXIE].** DAI YIJIUN. **shanghai journal of acupuncture and moxibustion.** 1985;1:6 (chi).

22- gera: 7595/di/ra  
**[TRAITEMENT DE L'ATAXIE CEREBELLEUSE].** QIN MAOLING. **zhejiang journal of traditional chinese medicine.** 1985;20(11-12):517 (chi).

23- gera: 30993/di/ra  
**[ACUPUNCTURE FOR TREATMENT OF ONE CASE OF ATAXIA].** DAI YIJUN. **shanghai journal of acupuncture and moxibustion.** 1985;1:6 (chi).

24- gera: 32838/di/ra  
**[EXPERIENCE IN THE TREATMENT OF CEREBELLAR ATAXIA].** QIN MAO-LING. **zhejiang journal of traditional chinese medicine.** 1985;20(12):517 (chi).

25- gera: 12640/di/ra  
**[MALADIE DE PARKINSON].** X. **journal of tcm.** 1986;6(1):52-4 (eng).  
Discussion sur la pathogène et le traitement du Parkinson à propos d'un cas : une femme de 62 ans se plaignant depuis 16 mois de tremblements légers des mains et des pieds atteignant la tête 1 mois plus tard. D'abord les symptômes sont occasionnés par l'émotion et la fatigue ensuite, ils sont permanents. L'examen de médecine traditionnelle montre à côté des tremblements déjà cités une langue rouge avec enduit peu abondant, flush de la face, irritabilité, insomnie, douleur musculaire sous les coudes et les genoux, voix faible et tremblotante. Les hypothèses pathogéniques envisagées sont : la stase du Qi du foie., Les insuffisances du Yin du Foie, exubérance du foie Yang. En fait seules sont retenues l'exubérance du foie Yang (augmentant le syndrome vent et les tremblements) et l'insuffisance Yin du foie (irritabilité,

insomnie, langue rouge enduit fin). La douleur musculaire des extrémités est analysée comme un trouble du Qi et du sang dans les méridiens. Le déséquilibre coeur Rein peut donner des signes proches de l'insuffisance Yin du foie. Le traitement de l'insuffisance du foie du Rein, de la transformation du Foie Yang du vent et du déséquilibre coeur Rein : 20VB, 3F, 7C, 3Rn, 6Rt, 20VG, 21VG, 18VB. Le traitement ensuite des douleurs musculaires : 4GI, 11GI, 37E, 40VB, 41E. Traiter tous les jours 20 minutes. Après 5 séances diminution des signes après 30 séances tremblements et douleurs des ? .

26- gera: 30581/di/ra  
**[CLINICAL OBSERVATION ON TCM TREATMENT OF PARKINSON'S DISEASE . ANALYSIS OF 35 CASES].** WANG YONGYAN ET AL. **journal of tcm.** 1986;27(8):22-4 (chi).

27- gera: 20781/di/el  
**TRAITEMENT D'UN CAS DE PARALYSIE TREMBLANTE ET PARALYTIQUE.** ZHANG JIANQIU ET AL. **in sélection des theses de la revue d'acupuncture de shanghai, shanghai.** 1987;:59 (fra).

Traitement d'un cas de Parkinson évoluant depuis 10 ans et résistant aux traitements occidentaux ou aux plantes chinoises. 20VG, 11GI, 4GI, 3GE, point de paralysie (2cun au dessous de 36E, 34VB, 9Rte, 6Rte. 1 séance tous les deux jours, série de 10 séances. Après 2 séries, amélioration des tremblements. A la 3ème série, 20VG est remplacé par Si Shen Cong (1 cm à gauche, droite, arrière et avant du 20VG) et 20VB et 16VG ajoutés. Le patient peut à nouveau marcher.

28- gera: 20962/di/cg  
**CURE OF RHEUMATIC CHOREA BY ACUPUNCTURE.** SINGH BK ET AL. **in compilation of the abstracts of acupuncture and moxibustion papers, beijing.** 1987;:44 (eng).

29- gera: 21569/di/ra  
**QUEL EST VOTRE DIAGNOSTIC ? (TREMBLEMENT DES MAINS).** KESPI JM. **revue francaise d'acupuncture.** 1987;50:80-1 (fra).

30- gera: 30692/di/ra  
**[CLINICAL OBSERVATION ON TCM TREATMENT OF HYPERKINETIC SYNDROME].** WANG JIARUI. **journal of traditional chinese medicine.** 1987;28(4):30-7 (chi).

31- gera: 32979/di/ra  
**[TREATING CONVULSION DUE TO SEASONAL FEBRILE DISEASE].** XU QIU-YUN ET AL. **zhejiang journal of traditional chinese medicine.** 1987;22(6):246 (chi).

32- gera: 32998/di/ra  
**["GUA LOU GUI ZHI TANG" THERAPY OF TREMOR].** WU PEI-TIAN. **zhejiang journal of traditional chinese medicine.** 1987;22(4):184 (chi).

33- gera: 26027/di/el  
**TREMORS (PARKINSON'S DISEASE) (ZHEN CHAN).** CHEN JIRUI ET AL. **in acupuncture case histories from china, eastland press, seattle.** 1988;:136-138 (eng).  
Tremblement des mains chez un patient de 17 ans. Le cas est interprété comme vent interne par vide de sang. 20VB, 3F, 17V, 20V et 18V. Après trois séries, aucune amélioration. Ajout des points 36E et 6VC avec une nette

34- gera: 48492/di/ra

**[THE SIX ITEMS OF TREATING SENILE TREMOR].**

JIA MEI HUA. *liaoning journal of traditional chinese medicine*. 1988;12(12):27 (chi).

35- gera: 48504/di/ra

**[QI GONG CURE TREMBLING HANDS].** LI LIN-YUN. *qi-gong*. 1988;9(3):105 (chi).

36- gera: 53255/di/ra

**[QI GONG CURE TREMBLING HANDS].** LI LIN YUN. *qi gong*. 1988;9(3):105. (chi).

37- gera: 26513/di/ra

**THE DIFFERENTIATION AND TREATMENT OF PARKINSON'S DISEASE ACCORDING TO TRADITIONAL CHINESE MEDICINE.** LI GENG HE ET AL. *journal of chinese medicine*. 1989;30:25-28 (eng).  
Analyse du Parkinson et des tremblements d'après les classiques médicaux. Rôle du Foie et des Reins. Distinction de 3 formes cliniques : vide de Yin du Foie et Rein, stase de Qi et du Sang, vide de Qi et de Sang. Prescription de base visant à tonifier le Foie et les Reins, modifiée selon la forme clinique. Rapport de 30 cas. Les meilleurs résultats sont obtenus en cas de stase de Qi et du Sang.

38- gera: 27299/di/ra

**[30 CASES OF PARKINSONISM TREATED BY ACUPUNCTURE].** QIN LIANGFU. *shanghai journal of acupuncture and moxibustion*. 1989;8(3):18-27 (chi).

39- gera: 27404/di/ra

**MEDECINE CHINOISE ET HOMEOPATHIE : ENERGETIQUE DE STRAMONIUM ET DE ZINCUM METALLICUM.** DUBOIS JC ET AL. *meridiens*. 1989;85:99-123 (fra\*).

Remède des délires de grande violence et d'états purement nerveux, Stramonium est également indiqué dans certains syndromes aigus fébriles. L'analyse sémiologique de ces derniers permet de les qualifier en termes d'énergétique chinoise : "Agitation du Feng par Plénitude Chaleur". Zincum Metallicum intéresse au contraire des organismes affaiblis et débilités présentant une agitation particulière, surtout des pieds. "L'Agitation du Feng" est ici due au Vide. La thérapeutique comparée autorise un rapprochement de ces deux remèdes avec les "anti- convulsivants" et les "toniques du Yin" de la Médecine Traditionnelle Chinoise.

40- gera: 27448/di/ra

**[30 CASES OF PARKINSONISM TREATED BY ACUPUNCTURE].** LIANGFU Q. *shanghai journal of acupuncture and moxibustion*. 1989;8(3):18-27 (chi).

41- gera: 27872/di/el

**THE THEORETICAL RESEARCH AND APPLICATION OF SCALP ACUPUNCTURE.** FANG YUNPENG. *essentials of contemporary chinese acupuncturists' clinical experiences, foreign lang*. 1989;:55-61 (eng).

42- gera: 33956/di/ra

**[CLINICAL OBSERVATION ON 76 CASES OF CHILDREN MULTIMOVEMENT SYMPTOM (CHOREA) TREATED BY "JING LING" ORAL SOLUTION].** ZHANG YONG HUA ET AL. *shanxi journal of tcm*. 1989;5(4):18 (chi).

43- gera: 34623/nd/re

**[58 CASES OF PARKINSON'S SYNDROME TREATED WITH CALMING WIND TANG].** GUANGXING R. *shandong journal of tcm*. 1989;3:23. (chi).

44- gera: 42524/nd/re

**[L-STEPHOLIDINE TREATMENT OF CHOREA INDUCED BY LEVODOPA OR MADOPAR IN PATIENTS WITH PARKINSONISM].** ZHANG XIN GEN ET AL. *chinese journal of nervous and mental diseases*. 1989;15(1):16-7 (chi\*).

45- gera: 50705/di/ra

**[CLINICAL OBSERVATION ON 30 CASES WITH PARALYSIS AGITANS TREATED BY ACUPUNCTURE].** QIN LIANGFU ET AL. *chinese acupuncture and moxibustion*. 1989;9(6):16. (chi\*).

30 cases with paralysis agitans were treated by author. Sishencong, Fengchi, Hegu, Yanglingquan, Taichong should be selected with reducing method. According to the symptoms above points can be used, for 30 minutes, every other day and 10 times makes one course. After 3 courses 5 cases were cured; obvious improvement : 9 cases; improvement : 10 cases; failed : 6 cases and total effective rate : 80%.

46- gera: 146901/di/re

**THE YALE GLOBAL TIC SCALE : INITIAL TESTING OF A CLINICIAN-RATED SCALE OF TIC SEVERITY.** LECKMAN JF, RIDDLE MA, HARDIN MT, ORT SI, SWARTZ KL, STEVENSON J, COHEN DJ. *j am acad child adolesc psychiatry*. 1989;28(4):566-73 (eng).

47- gera: 61771/di/ra

**[TREATMENT OF CEREBELLAR ATAXIA BY THERAPY OF WARMING YANG, REMOVING BLOOD STASIS AND ELIMINATING WIND : A CLINICAL OBSERVATION ON 11 CASES].** HE YUGUANG ET AL. *new journal of traditional chinese medicine*. 1990;22(8):23-5 (chi).

48- gera: 62104/di/ra

**[CONTRAST OF THE EFFECT OF XIFENGTANG WITH ARTANE TREATING PARKINSON'S SYNDROME].** REN GUANXING. *shandong journal of traditional chinese medicine*. 1990;2:21-3 (chi).

49- gera: 63023/di/ra

**[AN OBSERVATION ON THE CURATIVE EFFECT OF COMBINED TREATMENT OF ACUPUNCTURE AND DRUG IN 113 CASES OF PARKINSON'S SYNDROME].** JIANG DASHU ET AL. *journal of traditional chinese medicine*. 1990;31(12):29-31 (eng).

50- gera: 35771/di/ra

**PARKINSON'S DISEASE IN CHINA.** WANG YAO-SHAN ET AL. *chinese medical journal*. 1991;104(11):960-4 (eng).

51- gera: 65305/di/ra

**[REPORT OF 1 CASE OF PARKINSON SYNDROME INDUCED BY BRAIN INJURIES].** DENG GUANG-YUAN. *jiangxi journal of traditional chinese medicine*. 1991;22(5):27 (chi).

52- gera: 84593/di/ra

**PARKINSON'S DISEASE IN CHINA.** WANG YAO-SHAN ET AL. *chinese medical journal*. 1991;104(11):960-4 (eng).

An epidemiological study on the incidence and prevalence of Parkinson's disease (PD) was carried out in 29 provinces, cities and autonomous regions in this country in 1986. The survey was conducted in 117 areas, and 566 patients with PD were found among 3.869.162 persons examined, giving a

point prevalence for men and women of 16.9 / 10\*5 and 12.4 / 10\*5, with the highest prevalence after the fifth decade of age. The disease was most prevalent in the southern part of China, especially in Hunan and Guangxi provinces. The incidence was 1.5 / 10\*5 / yr in 1986. Both the prevalence and incidence of PD in China are lower than those in the white race and

53- gera: 35894/di/ra

**PARKINSON'S DISEASE TREATED WITH TRADITIONAL CHINESE MEDICINE.** SAN HONG HWANG. *international journal of oriental medicine*. 1992;17(2):106-7 (eng).

54- gera: 36153/di/ra

**[THE EFFECT OF ELECTROACUPUNCTURE THERAPY ON HEART RATE OF PARKINSON DISEASE].** X. *journal of the japan society of acupuncture*. 1992;42(1):86. (jap).

55- gera: 36205/di/ra

**[ORT RESPONSIVE ROUTE TO SUBSTANTIA NIGRA AND PARKINSONISM].** X. *journal of the japan society of acupuncture*. 1992;42(1):138. (jap).

56- gera: 39272/di/ra

**[CLINICAL ANALYSIS ON 50 CASES OF PARALYSIS AGITANS TREATED WITH TCM MAINLY].** LI GENHE. *shanghai journal of traditional chinese medicine*. 1992;2:12 (chi).

57- gera: 42807/di/ra

**[TCM CRITERION OF DIAGNOSIS AND THERAPEUTIC EFFECT FOR SENILE TREMOR SYNDROME (FOR TRIAL IMPLEMENTATION)].** SOCIETY OF GERONTOLOGY CATCM. *journal of beijing college of traditional chinese medicine*. 1992;15(4):39 (chi).

58- gera: 42898/di/ra

**[A CLINICAL REPORT ON TREATMENT OF CHOREA WITH ACUPUNCTURE : 11 CASES].** XU XIN-HUA ET AL. *zhejiang journal of traditional chinese medicine*. 1992;27(7):324 (chi).

59- gera: 44670/di/ra

**[OBSERVATION ON EFFECTS OF 8 CASES OF CEREBELLAR ATAXIA BY SCALP-ACUPUNCTURE].** LI QIAO-JU ET AL. *shanxi journal of traditional chinese medicine*. 1992;8(6):37 (chi).

60- gera: 37888/di/ra

**[TREATING 11 CASES OF PARKINSONISM WITH "DING ZHEN WAN"].** LI HUAI-SHENG. *zhejiang journal of traditional chinese medicine*. 1993;28(4):186 (chi).

61- gera: 38193/di/ra

**[ELECTRICAL ACUPUNCTURE COMBINED WITH POINT INJECTION THERAPY TO TREAT 25 CASES OF BRACHIAL PLEXUS PARALYSIS].** ZENG ZHAOJIE. *hubei journal of traditional medicine*. 1993;1:37 (chi).

62- gera: 38531/di/ra

**[METHOD OF WARMING KIDNEY AND TONIFYING SPLEEN FOR 20 CASES OF CEREBELLAR ATAXIA].** LI RUKUI. *shanghai journal of traditional chinese medicine*. 1993;2:14 (chi).

63- gera: 38774/di/ra

**MECCANISMO D'AZIONE DELL'AGOPUNTURA NELLA SOPPRESSIONE DELLE CRISI EPILETTICHE.** WU DINGZONG. *rivista italiana di medicina tradizionale cinese*. 1993;50(2):59-61 (ita).

64- gera: 38870/di/ra

**COMBINATION OF ACUPUNCTURE, QIGONG AND HERBS IN THE TREATMENT OF PARKINSONISM.** WANG XUECHENG. *international journal of clinical acupuncture*. 1993;4(1):1-7 (eng).

65- gera: 48632/di/ra

**[TREATING 11 CASES OF PARKINSONISM WITH "DING ZHEN WAN"].** LI HUAI-SHENG. *zhejiang journal of traditional chinese medicine*. 1993;28(4):186 (chi).

66- gera: 57195/di/ra

**ACUPUNCTURE TREATMENT OF TREMOR IN ALCOHOL WITHDRAWAL SYNDROME.** MILANOV I ET AL. *american journal of acupuncture*. 1993;21(4):319-22 (eng).

The aim of this investigation was to establish the efficacy of acupuncture treatment during the withdrawal period after chronic alcohol intake. Twenty five patients who met the criteria for chronic alcoholism were evaluated by electromyography (EMO) for the pattern, frequency and amplitude of tremor before and after treatment. Patients were treated with acupuncture for three weeks and no medication or alcohol were ingested during this period. After treatment a decrease of tremor amplitude and disappearance of tremor in some patients were found. However, as revealed by EMG, most patients have a significant reduction of tremor amplitude without any change of the tremor frequency. Most of the other symptoms of alcoholic withdrawal syndrome were improved. Spontaneous improvement was ruled out. In conclusion acupuncture is effective for treatment of alcoholic withdrawal symptoms

67- gera: 2658/nd/me

**ETUDE COMPARATIVE DE LA MORPHOTYPOLOGIE DE LA MAIN DE 30 SUJETS PARKINSONIENS EN MEDECINE TRADITIONNELLE CHINOISE.** LI FOON CHEONG K. *memoire d'acupuncture, bordeaux ii*. 1994; (fra).

Cette étude cas-témoins propose de comparer la morphotypologie de la main de 30 parkinsoniens selon les principes des 5 éléments de la Médecine Traditionnelle Chinoise. On retrouve chez les parkinsoniens âgés avec hypertonie extrapyramidale une plus grande fréquence de typologie METAL-BOIS.

68- gera: 3047/di/ra

**NEUROSTIMULATION IN THE TREATMENT OF THE SYMPTOMS OF PARKINSON DISEASE, PARTICULARLY DEPRESSION, PAIN SYMPTOMS, HYPOKINESION AND RIGIDITY.** THE PL. *acupunctuur*. 1994;17(5):15-6 (eng).

The purpose of this method is to reduce intake of medication (anti-Parkinsonian medication). Most Parkinson patients, above 60 years, are afflicted with heart disease or cerebrovascular diseases. Due to side effects, anti-Parkinsonian medication is mostly contra-indicated with cardiac diseases. But a new method, namely the neurostimulation or electrical stimulation of the central nervous system can reduce the amount of medication to treat the symptoms of the disease. In the 70s and 80s Douyon and Serby already published in the "Archive of Neurology" about this method. They noticed that there is an obvious changing

in behaviour after treatment with neurostimulation, particularly the depression and the reducing of pain symptoms. The most recent publications reported the changes of hypokinetic and rigid behaviour of the Parkinsonian patients after neurostimulation.

69- gera: 49659/di/ra

**[ACUPUNCTURE IN THE TREATMENT OF CHOREA MINOR. ANALYSIS OF 30 CASES].** HU YIN-HU ET AL. **chinese acupuncture and moxibustion.** 1994;14(2):11 (chi\*).

Dazhui (GV14), Fengfu (GV16), Baihui (GV20) and Renzhong (GV26) points were selected as main points and additional points were added according to the symptoms as adjunct points. After needling sensation was obtained the manipulation of lifting, thrusting and twirling, was applied to make the sensation radiated to the surrounding areas or remote regions, The needles were retained for 10-15 min. or simply withdrawn immediately, while those punctured in the adjunct points retained for an hour with 1-2 manipulations. The treatment was performed everyday. If the patients were not cured after 10 times of treatments, acupuncture was resumed after days. Of the patients treated, 29 cases were cured after 6-36 sessions of treatments, and 1 case was improved with a total effective rate of

70- gera: 53940/di/ra

**[AN EXPERIMENTAL STUDY ON THE TREATMENT OF PARKINSON'S DISEASE WITH ELECTROACUPUNCTURE].** LUO MINGFU ET AL. **chinese acupuncture and moxibustion.** 1994;14(5):39 (chi\*).

Experimental Parkinson's disease made in rats was treated with electric acupuncture on bilateral "Yang Lingquan (GB 34)" And "Chorea-tremor zone". The times of rotation induced by dehydromorphine were remarkably reduced ( $P < 0.01$ ) and other symptoms were also improved. No such changes were found in the control animals. The outcome of the research shows that the experimental model can be utilized in clinical study on the mechanisms of acupuncture in treating Parkinson's disease.

71- gera: 54156/di/ra

**[PROGRESS IN TREATMENT OF PARALYSIS AGITANS BY TCM].** ZHANG YUNLING ET AL. **journal of traditional chinese medicine.** 1995;36(2):113 (eng).

72- gera: 54652/di/ra

**CLINICAL ANALYSIS OF PARKINSON'S DISEASE TREATED BY INTEGRATION OF TRADITIONAL CHINESE AND WESTERN MEDICINE.** LI GENGHE. **journal of traditional chinese medicine.** 1995;15(3):163-9 (eng).

Parkinson's disease is an extrapyramidal disease characterized by tremor, hypokinesia and postural reflex disturbance. It often occurs in the middle and the old-aged. People usually use synthetic drugs such as atropine, levodopa or medopa to gain temporary relief, but the side effects are serious. Along with prolongation of medication, the effective rate reduces step by step. Hence, seeking for a new therapy via the approach of integrating traditional Chinese and western medicine becomes a pressing issue. Since the early 1970's, the author has made use of Chinese herbal drugs, acupuncture and moxibustion as the main measures to treat this affection, and definite therapeutic effects have been obtained. Owing to the scarceness of data regarding syndrome differentiation and treatment of such illness in traditional Chinese medicine (TCM), the author puts forward some

73- gera: 55081/nd/re

**THE CURRENT SIGNIFICANCE OF PHYSIOTHERAPEUTIC MEASURES IN THE TREATMENT OF PARKINSON'S DISEASE.** ULM G. **j neural transm suppl.** 1995;46:455-60 (eng).

Physical measures as adjuvant therapy in Parkinson's disease have so far received insufficient investigation from the viewpoint of either their clinical effectiveness or of their theoretical rationale, although they are widely prescribed in practice and contribute a substantial cost factor to the overall treatment. Most attention has been devoted to movement therapy, which may admittedly only achieve minor improvements in motor performance but contributes substantially to subjective improvement of the well-being of the patients and to the maintenance of their physiological functions. Speech therapy seems to be effective only for patients who are highly motivated and have not suffered any psychological deficits and who continue exercising on their own. Massage, ergonomic treatment approaches and the nowadays fashionable area of various relaxation techniques have received very little attention. Our own trials with vibromassage (swing-exbusar) for the loosening of muscular rigidity have led to no sustained improvement, and our attempts to improve speech defects in Parkinsonian patients by the application

74- gera: 56170/di/ra

**A NEW METHOD OF ACUPUNCTURE IN TREATMENT OF PARKINSON'S SYNDROME.** LI SHENG-PING. **international journal of clinical acupuncture.** 1995;6(2):193-4 (eng).

75- gera: 84676/di/ra

**[CLINICAL OBSERVATION OF ACUPUNCTURE AND HERB FOR PARKINSONISM].** GUIFANG X ET AL. **shanghai journal of acupuncture and moxibustion.** 1995;14(6):243 (chi).

76- gera: 55195/di/ra

**[THE EFFECT OF SCALP POINT ELECTROSTIMULATION ON MYOELECTRIC POTENTIAL IN PATIENTS WITH PARKINSON'S DISEASE].** XI GUIFANG ET AL. **shanghai journal of acupuncture and moxibustion.** 1996;15(3):5 (chi).

77- gera: 55427/di/ra

**[EFFECT OF ELECTROACUPUNCTURE ON CHOLECYSTOKININ GENE EXPRESSION IN RATS HIPPOCAMPUS DURING PENICILLIN-INDUCED EPILEPTIC SEIZURE].** YANG RU ET AL. **acupuncture research.** 1996;21(2):62-6 (chi\*).

78- gera: 55471/di/ra

**[CLINICAL OBSERVATION ON TREATMENT OF PARKINSON'S DISEASE BY COMBINATION OF ACUPUNCTURE WITH MEDICINE].** ZHANG NAIZHENG ET AL. **chinese acupuncture and moxibustion.** 1996;16(12):11 (chi).

79- gera: 55654/di/ra

**[ZHOU ZHONGYING'S EXPERIENCE ON TREATMENT OF PARALYSIS AGITANS].** FAN YING. **journal of tcm.** 1996;37(11):663 (chi).

80- gera: 56668/di/ra

**[EFFECT ON ANTIOXYDASE IN THE TREATMENT OF PARKINSON'S DISEASE WITH CHINESE HERBS AND ACUPUNCTURE].** ZHANG LI ET AL. **shanghai journal of acupuncture and moxibustion.** 1996;15(6):3 (chi\*).



- 81- gera: 56990/di/ra  
**[ANALYSIS OF 196 CASES OF PRIMARY OSTEOPOROSIS ACCORDING TO DIFFERENTIATION OF SYMPTOMS AND SIGNS].** WEI ZHIYU ET AL. *journal of shandong college of tcm.* 1996;20(1):30 (chi).
- 82- gera: 57125/di/ra  
**[THE ADVANCES IN TREATMENT OF PARKINSON'S DISEASE BY TCM],** CHEN KAI ET AL. *traditional chinese medicinal research.* 1996;9(1):48 (chi).
- 83- gera: 57719/di/ra  
**ESTUDIO CLINICO DE LA ENFERMEDAD DE PARKINSON TRATADA CON LA COMBINACION DE CRANEOPUNTURA Y ACUPUNTURA.** HUANG LI MIN. *pulso de la vida.* 1996;10:35-8 (esp ).
- 84- gera: 57757/di/ra  
**ANALISI CLINICHE DEL MORBO DI PARKINSON TRATTADO CON L'INTEGRAZIONE DELLA MEDICINA TRADIZIONALE CINESE E DELLA MEDICINA OCCIDENTALE.** GENGHE L. *rivista italiana medicina tradizionale cinese.* 1996;65(3):30-4 (ita ).
- 85- gera: 71039/di/ra  
**L'AGOPUNCTURA NEL TRATTAMENTO DEL MORBO DI PARKINSON.** MONTFIORE I ET AL. *revue francaise de medecine traditionnelle chinoise.* 1996;172:185-187 (ita).
- 86- gera: 55217/di/ra  
**40 CASES OF PARKINSON'S DISEASE TREATED WITH ACUPUNCTURE.** WANG XUANWEI ET AL. *world journal of acupuncture-moxibustion.* 1997;7(1):48-9 (eng).  
 40 cases of Parkinson's disease were treated with acupuncture at Baihui (GV20), Taichong (LR3), Shaohai (HT3), Hegu (LI4), Waiguan (TE5) and Juegu (GB39) points. As a result, the total effective rate was 95%. The therapy has the action of regulating Qi and Blood, and balancing Yin and Yang.
- 87- gera: 56531/di/ra  
**[ELECTRICAL STIMULATION AT HEAD ACUPOINTS COMBINED WITH HERBAL MEDICINE FOR TREATING PARKINSON'S DISEASE : REPORT OF 150 CASES].** XI GUIFANG ET AL. *acupuncture research.* 1997;22(1-2):105 (chi\*).
- 88- gera: 56894/di/ra  
**ADVANCES IN TCM TREATMENT OF PARALYSIS AGITANS.** ZHANG YUNLING ET AL. *journal of tcm.* 1997;17(2):148-53 (eng).
- 89- gera: 68405/di/ra  
**[EFFECT OF BRAIN ANTIOXIDASE ON MODEL MICE OF PARKINSON'S DISEASE TREATED BY SCALP ACUPUNCTURE AND HERBS].** ZHANG LI ET AL. *shanghai journal of acupuncture and moxibustion.* 1997;16(6):32 (chi\*).
- The activities of total superoxide dismutase (T-SOD), glutathione peroxidase (GSH-PX) catalase (CAT) and level of malondialdehyde (MDA) were investigated in the brain of MPTP-treated parkinson's disease (PD) model in C57 mice. The results showed that acupuncture and chinese medicine caused declining in both the activities of antioxidase in midbrain and caudate in PD model mice and the level of MDA with no marked difference from the normal level. The above results suggested that acupuncture chinese medicine and acupuncture combined with chinese medicine exert neuroprotective effect on parkinson's disease.
- 90- gera: 87074/di/ra  
**A CASE OF PARKINSON'S DISEASE TREATED BY ACUPUNCTURE.** ZHENG QI-WEI. *international journal of acupuncture.* 1997;8(4):431-32 (eng).
- 91- gera: 57844/di/ra  
**CLINICAL OBSERVATIONS ON FORTY CASES OF PARALYSIS AGITANS TREATED BY ACUPUNCTURE.** CHEN LIGUO. *journal of traditional chinese medicine.* 1998;18(1):23-6 (eng ).
- 92- gera: 68222/di/ra  
**TAPPING AND MASSAGE IN TREATMENT OF PARKINSONISM.** WU WEN-GANG ET AL. *international journal of clinical acupuncture.* 1998;9(4):447-9 (eng).  
 Parkinson's disease (Paralysis agitans) is a disease of the extra-pyramidal system with an unknown cause. It begins to show itself in later middle age, and is thought to be a consequence of degeneration. There is no single effective treatment for it at present. The authors of this article tried point-pressing (as the main form of manipulation) and herbal medicine for 3 cases of Parkinson's syndrome and obtained good results. This paper reports on their work.
- 93- gera: 68363/di/ra  
**DR. ZHOU ZHONGYING'S EXPERIENCE IN TCM TREATMENT OF PARKINSON'S DISEASE.** FAN YING. *journal of traditional chinese medicine.* 1998;18(3):163-8 (eng).
- 94- gera: 68640/di/ra  
**[EFFECTS OF ACUPUNCTURE-MOXIBUSTION ON THE CONTENTS OF MONOAMINE TRANSMITTERS IN THE STRIATUM OF RATS IN PARKINSON'S DISEASE].** HE CHONG ET AL. *acupuncture research.* 1998;23(1):44 (chi\*).
- In this research, the changes of three monoaminotransmitters, ie. dopamine (DA), noradrenaline (NA) and serotoniu (5-HT), in striatum corpus of Parkinson's disease rat model induced by 6-hydroxydopamine (6-OHDA) before and after acupuncture and moxibustion therapy were compared. Also the different effects of various acupuncture stimulation factors were observed. The results showed that the levels of three transmitters were significantly elevated after the treatment of Acu. & Mox. And among the treatment groups, the effects of Baihui and Dazhui points were better than Siguan group selected from limb points. The authors consider that Acu. or Mox. is a good way to raise monoaminotransmitters in rat brain, therefore it conduces to the recovery of Parkinson's disease.
- 95- gera: 68641/di/ra  
**[A STUDY ON TREATMENT OF EXPERIMENTAL PARKINSON'S DISEASE WITH POINT INJECTION].** XU BING ET AL. *acupuncture research.* 1998;23(1):49 (chi\*).
- Experimental Parkinson's disease in rats was treated with point injection with different reagents on bilateral "Yang Lingquan (GB 34)". The results indicated that the times of rotation induced by apomorphinum were remarkably reduced no matter whether extra dopamine was given or not. The degree of reduction of rotation was closely related to increase of DA in the striatum. Though the change of serotonin had no significant correlation with the change of times of rotation,

dopamine had significant positive correlation with the numbers of rotation. These findings suggest that point injection at experimental Parkinson's disease had significant correlation with dopamine, and related to serotonin and harmony of neurotransmitters in striatum.

96- gera: 69108/di/ra

**[SURVEY OF TREATMENT OF PARKINSON'S DISEASE WITH ACUPUNCTURE AND MOXIBUSTION]. HUANG WENYAN ET AL. chinese acupuncture and moxibustion. 1998;18(4):252 (chi).**

97- gera: 69218/di/ra

**PRIMARY PARKINSON'S DISEASE: THE USE OF TUINA AND ACUPUNCTURE IN ACCORD WITH AN EVOLVING HYPOTHESIS OF ITS CAUSE FROM THE PERSPECTIVE OF TCM. WALTON-HADLOCK J. american journal of acupuncture. 1998;26(2-3):163-177 (eng).**

The author presents a hypothesis based on acupuncture channel theory regarding the cause of Parkinson's disease (PD). Following clinical experience with PD patients suggesting a similar history of energetic trauma, a preliminary observation was conducted to investigate its prevalence in subjects with PD and in non-PD controls. A system of Yin-type Tuina, termed FSR (forceless spontaneous release), was used to locate and assess the injury. Results indicated that all observed PD subjects and only one of the control subjects shared such similar injury. The PD subjects were then treated with a combination of FSR and acupuncture, resulting in various degrees of relief from their symptoms, (e.g., tremor, rigidity, decreased dyskinesia; improved balance, circulation) regardless of the stage of the disease, and in several cases enabled a reduction of conventional medication. Based on these findings, the author proposes a hypotheses in which rebellious (retrograde) qi flow, beginning at the site of injury, could set in motion the cascade of changes in Qi flow that precipitate the symptoms and neurologic damage found in PD. It is proposed that decreased dopamine is not the cause of PD, but is a side effect of this cascade of changes. Included

98- gera: 70317/di/ra

**PARKINSONISM. DONGYUN LIANG ET AL. journal of chinese medicine. 1998;58:21-3 (eng).**

99- gera: 72915/di/ra

**PROGRESSI NELLA TERAPIA DELLA PARALISI AGITANTE MEDIANTE LA MTC. ZHANG YUNLING ET AL. rivista italiana di medicina tradizionale cinese. 1998;72(2):81-5 (ita).**

Clinicamente, la paralisi agitante è caratterizzata principalmente da tremore alle estremità, rigidità muscolare e ridotti movimenti muscolari. La malattia esordisce lentamente, va gradualmente intensificandosi e generalmente si manifesta in età geriatrica o presenile. Essa è anche nota come morbo o sindrome di Parkinson a eziologia ignota, generalmente trattata con terapia sostitutiva di levodopa che dà effetti terapeutici solo a breve termine, ma non è in grado di prevenire l'evoluzione naturale della malattia e presenta importanti effetti collaterali. La ricerca clinica più recente in MTC ha subordinato la conoscenza dell'etiopatogenesi di questa malattia al trattamento differenziato basato sull'analisi dei sintomi e dei segni, ha accresciuto la sua efficacia terapeutica, ha rallentato l'evoluzione della malattia e ha ridotto notevolmente gli effetti collaterali determinati dai farmaci di

100- gera: 59184/di/ra

**PRIMARY PARKINSON'S DISEASE: THE USE OF**

**TUINA AND ACUPUNCTURE IN ACCORD WITH AN EVOLVING HYPOTHESIS OF ITS CAUSE FROM THE PERSPECTIVE OF CHINESE TRADITIONAL MEDICINE- PART 2. WALTON-HADLOCK J. american journal of acupuncture. 1999;27(1-2):31-49 (eng ).**

In Part II of this series, the author continues the discussion of a hypothesis based on acupuncture channel theory regarding the cause of Parkinson's disease (PD). A system of Yin-type Tuina, termed FSR (forceless spontaneous response) evolved from this theory; its clinical application has resulted in various degrees of relief from PD symptoms, (e.g., tremor, rigidity, decreased dyskinesia; improved balance, circulation) regardless of the stage of the disease, and in several cases enabled a reduction of conventional medication. This installment includes basic instruction in the technique, and a discussion of the dyskinesia which occurs during restoration of Qi to the Large Intestine and Stomach channels during treatment. A case study chronicles the weekly changes in symptoms

101- gera: 59881/nd/re

**TRADITIONAL AND COMPLEMENTARY THERAPIES IN PARKINSON'S DISEASE. MANYAM BV ET AL. adv neurol. 1999;80:565-74 (eng).**

Parkinson's disease has existed in different parts of the world since ancient times. The first clear description is found in the ancient Indian medical system of Ayurveda under the name Kampavata. Traditional therapies in the form of herbal preparations containing anticholinergics, levodopa, and monoamine oxidase inhibitors were used in the treatment of PD in India, China, and the Amazon basin. Scientific reevaluation of these therapies may be valuable, as shown in the case of *Mucuna pruriens* and *Banisteria caapi*. Complementary therapies such as massage therapy, biofeedback, and acupuncture may have beneficial effects for patients and deserve further study.

102- gera: 59942/di/ra

**[CLINICAL AND EXPERIMENTAL STUDIES ON ACUPUNCTURE TREATMENT OF PARKINSONISM]. REN XIAOQUN ET AL. chinese acupuncture and moxibustion. 1999;19(10):617 (chi\*).**

In the present study, 41 patients of Parkinsonism were treated with acupuncture and 27 case with western medicine as control. Results indicated that 9 cases were markedly effective, 24 effective and 8 ineffective, with an effective rate of 80.49% in the acupuncture group; One cases was effective, 14 effective and 12 ineffective, with an effective rate of 55 . 56 % in the control group. The therapeutic effect in the acupuncture group was superior to that in the control group ( $P < 0.05$ ). Biochemical study indicated that acupuncture could raise the content of superoxide dismutase in red blood cells of the patient, and animal experiment showed that acupuncture increased activities of tyrosine hydroxylase in substantia nigra of the midbrain and adrenal medulla in the rat of

103- gera: 59957/di/ra

**ACUPUNCTURE AND HERBS IN THE TREATMENT OF NEURODEGENERATIVE DISORDERS: ALZHEIMER'S DISEASE, STROKE, AND PARKINSON'S DISEASE. CHEN JK. medical acupuncture. 1999;11(1):10-2 (eng ).**

Neurodegenerative disorders (such as Alzheimer's disease, sequelae of stroke, and Parkinson's disease) plague a sizable portion of the geriatric population. They are poorly recognized due to low public visibility and social isolation of those affected. Although neurodegenerative disorders include a vast number of illness, this article focuses on Alzheimer's disease, stroke sequelae, and Parkinson's disease.

Approached from perspectives of both Western and Traditional Chinese medicine, treatment using acupuncture and herbal therapies is discussed.

104- gera: 69572/di/ra

**[THE EFFECT OF ACUPUNCTURE AND MOXIBUSTION ON STATE OF BLOOD FLOW IN THE BRAIN OF PATIENTS WITH PARKINSON'S DISEASE].** WANG LINGLING ET AL. **chinese acupuncture and moxibustion.** 1999;19(2):115 (chi).

105- gera: 70353/di/ra

**UN CAS DE MALADIE DE PARKINSON AVEC PARALYSIE DES MEMBRES INFERIEURS.** CHEN MU YUAN. **acupuncture traditionnelle chinoise.** 1999;1:114-118 (fra).

106- gera: 73174/di/ra

**SITUACION ACTUAL DEL USO DE ACUPUNTURA Y MOXIBUSTION EN EL TRATAMIENTO DE LA ENFERMEDAD DE PARKINSON.** HUANG WENYAN ET AL. **revista mexicana de medicina tradicional china.** 1999;3(2):4-8 (esp).  
Voir: AM China. 1998, 18(4), 252-4.

107- gera: 73177/di/ra

**ENFERMEDAD DE PARKINSON.** ROBERTO GG ET AL. **revista mexicana de medicina tradicional china.** 1999;3(2):16-7 (esp).

108- gera: 73378/di/ra

**[CLINICAL OBSERVATION ON 29 CASES OF PARKINSON'S DISEASE TREATED BY ACUPUNCTURE AND MOXIBUSTION].** WANG LINGLING ET AL. **chinese acupuncture and moxibustion.** 1999;19(12):709 (chi).

109- gera: 74477/di/ra

**[CLINICAL OBSERVATION ON 30 CASES OF PARALYSIS AGITANS TREATED BY ACUPUNCTURE PLUS DIRECT MOXIBUSTION].** CHEN XINGHUA. **journal of tcm.** 1999;40(6):342 (chi\*).  
Sixty cases of paralysis agitans were randomly divided into 2 groups, each 30 cases, and treated by acupuncture alone and acupuncture plus direct moxibustion respectively. Comparison of the markedly effective results between the two groups were significantly different statistically ( $P < 0.05$ ). Significant statistical differences were also found between the 2 groups in markedly effective and effective results ( $p < 0.01$ ). It is thus claimed that acupuncturing plus direct moxibustion is a safe, simple, and effective measure for treatment of Parkinson's disease.

110- gera: 75254/di/ra

**[EXPERIENCES OF PROF. LIU BICHEN ON THE TREATMENT OF GILLES DE LA TOURETTE'S SYNDROME IN CHILDREN].** WANG JUNHONG. **journal of beijing university of tcm.** 1999;22(3):17 (chi).

111- gera: 76137/di/ra

**[ASSESSMENT OF THERAPEUTIC EFFECT OF "TREMOR-RELIEVING DECOCTION" IN TREATMENT OF PARKINSON'S DISEASE].** ZHAO HONG ET AL. **shanghai journal of tcm.** 1999;9:12 (chi\*).

112- gera: 78735/di/ra

**[DEVELOPMENT ON TREATMENT OF PARKINSON'S DISEASE WITH TCM].** TU YINGMEI ET AL. **beijing journal of tcm.** 1999;5:56 (chi).

113- gera: 139690/di/ra

**ENFERMEDAD DE PARKINSON.** x. **revista mexicana de medicina tradicional china.** 1999;2(3): (esp).

114- gera: 139693/di/ra

**SITUACIÓN ACTUAL DEL USO DE ACUPUNTURA Y MOXIBUSTIÓN EN EL TRATAMIENTO DE LA ENFERMEDAD DE PARKINSON.** X. **revista mexicana de medicina tradicional china.** 1999;2(3): (esp).

115- gera: 71283/di/ra

**[INFLUENCE OF RADIX SALVIAE MILTIORRHIZAE ON MORPHOLOGY AND EXPRESSION OF HEAT SHOCK PROTEIN 70 (HSP 70) OF RAT BRAIN TISSUE WITH SEIZURE].** SHANG WEI ET AL. **chinese traditional patent medicine.** 2000;22(2):148 (chi\*).

Objective: To investigate the effect and mechanism of Radix Salviae Miltiorrhizae (RSM) on the damage of neuron in rat brain induced by seizure. Methods: A seizure model induced by pentylenetetrazol (PTZ) was used. The injured conditions of neuron of RSM group and control group were compared by the methods of routine pathology and electronic microscope detection. And the expression changes of HSP70 of RSM group and control group were investigated by the immunohistochemistry method. Results: The numbers of injured neuron in the cortex and hippocampus were significantly lower in the RSM group ( $P < 0.01$ ), and the extent of ultrastructure damage in the RSM group was milder, the numbers of HSP70 immunoreactivity positive cells in the cortex and hippocampus were significantly higher in the RSM group ( $P < 0.01$ ), the intensity of HSP70 in the RSM group were stronger, as compared with the control group. Conclusions: RSM can protect neurons from the damage by

116- gera: 71489/di/ra

**[CLINICAL OBSERVATION ON 22 CASES OF PARKINSONISM TREATED BY WULONG DECOCTION].** WANG JIANGUO ET AL. **hunan journal of tcm.** 2000;16(1):13 (chi).

117- gera: 71639/di/ra

**COMPARATIVE STUDY OF D2 RECEPTORS AND DOPAMINE CONTENT IN STRIUM BEFORE AND AFTER ELECTRO-ACUPUNCTURE TREATMENT IN RATS.** LIN YANSONG ET AL. **chinese medical journal.** 2000;113(5):408-11 (eng).

Objective To evaluate the change in D2 receptors and their relationship with dopamine (DA) content in experimental hemi-parkinsonism rats before and after electro-acupuncture (EA) treatment. Methods 125I-IBZM D2 receptor cerebral autoradiographic analysis, HPLC-ECD detection of DA and its metabolites, homovanillic acid (HVA), 3, 4-dihydroxyphenylacetic acid (DOPAC) were used to study their levels in striatum in pre-EA, EA and EA control group. Results The DA, HVA and DOPAC levels in striatum of the lesioned side in the EA group were elevated compared to the pre-EA and EA control group ( $P < 0.05$ ). For the EA group, the striatum/ cerebellum 125 I-IBZM uptake ratio of the lesioned side was  $8.04 \pm 0.71$ , ( $29.34\% \pm 4.83\%$ ) more than that of the contralateral side ( $P < 0.05$ ), while no significant difference was observed as compared with that in the pre-EA group ( $8.09 \pm 0.52$ ,  $30.12\% \pm 4.53\%$ , higher than that of the intact side  $P > 0.05$ ). It was longer than the EA control group ( $8.61 \pm 0.63$ ,  $P < 0.05$ ), and the latter was ( $38.63\% \pm 3.71\%$ ) higher than that in its contralateral side ( $P < 0.05$ ). Conclusion 6-OH-DA lesions in the substantia nigra and ventral segmental areas induce an up-regulation of striatal D2 binding sites. EA treatment could elevate the DA level of the

lesioned side striatum and prevent D2 receptor up-regulation in rats with experimental hemiparkinsonism.

118- gera: 72578/di/ra

**[PROBE INTO TREATMENT OF HEREDOATAXIA WITH SUPPLEMENT QI].** LU MING ET AL. *zhejiang journal of tcm*. 2000;35(3):107 (chi).

119- gera: 77171/di/ra

**[CLINICAL ANALYSIS OF INTEGRATION OF TCM AND WESTERN MEDICINE ON TREMBLING PALSY].** LAO GUOPING. *hebei journal of tcm*. 2000;22(10):777 (chi\*).

120- gera: 77254/di/ra

**[TREATMENT OF 30 CASES OF PARKINSON'S DISEASE BY ZHEN CHAN SHU CAPSULE].** FENG GUANGKUI. *shaanxi journal of traditional chinese medicine*. 2000;21(11):481 (chi).

121- gera: 77268/di/ra

**[REVIEWS AND PROSPECTS ON TCM RESEARCH ON SENILE TREMOR (PARKINSON'S DISEASE)].** LONG CHENGXIANG. *chinese journal of information on tcm*. 2000;7(10):10 (chi).

122- gera: 77649/di/ra

**[AN ANALYSIS OF EFFECT OF ACUPUNCTURE IN INDUCING BRAINSTEM EVOKED POTENTIAL IN PATIENTS WITH PARKINSON'S DISEASE].** ZHU LILI. *jiangsu journal of tcm*. 2000;21(5):42 (chi).

123- gera: 79305/di/ra

**[A CLINICAL OBSERVATION ON THE TREATMENT OF HEMILATERAL CHOREA DUE TO DIABETIC CEREBRAL HEMORRHAGE BY TCM COMBINED WITH WESTERN MEDICINE].** YANG SHUIQING ET AL. *new journal of tcm*. 2000;32(7):45 (chi).

124- gera: 79399/di/ra

**ACUPUNCTURE TREATMENT OF PARKINSON'S DISEASE-A REPORT OF 29 CASES.** ZHUANG XIAOLAN ET AL. *journal of tcm*. 2000;20(4):265-7 (eng).

125- gera: 87337/nd/re

**EFFECTIVENESS OF THE KAMPO KAMI-SHOYO-SAN (TJ-24) FOR TREMOR OF ANTIPSYCHOTIC-INDUCED PARKINSONISM.** ISHIKAWA T ET AL. *psychiatry clin neurosci*. 2000;54(5):579-82 (eng).

The aim of the present study was to evaluate the effectiveness of the Kampo medication kamishoyo-san against tremor due to antipsychotic-induced parkinsonism. Kami-shoyo-san consists of several medicinal herbs that are known in traditional Chinese medicine to be effective in treating Parkinson's disease and convulsions. We gave kami-shoyo-san to eight patients at Higashiowari National Hospital who were exhibiting tremor, a symptom of antipsychotic-induced parkinsonism. The tremor was evaluated on a five-point scale before and after the administration of kamishoyo-san, and the findings were compared statistically. The results showed a statistically significant reduction in the tremor after the administration of kami-shoyo-san ( $P < 0.01$ ), with 62.5% of patients showing an improvement of one point or more. The tremor did not worsen in any of the patients, and none complained of side-effects. Thus, kami-shoyo-san appears to be effective against the tremor from parkinsonism. Kami-shoyo-san consists of 10 medicinal herbs, including Radix Bulpleuri, Radix Paeoniae, Radix Angelicae Sinensis, and Radix Glycyrrhizae, which are effective in treating

disturbances in muscular movement according to TCM theory. Of the 10 herbs contained in kami-shoyo-san, we believe the abovementioned ones are particularly effective in helping to reduce the tremor associated with parkinsonism.

126- 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-

127- gera: 87565/di/ra

**[TREATMENT OF PARKINSON'S DISEASE BY ACUPUNCTURE COMBINED WITH LASER PRICK AND ANALYSIS ON DA IN URINE].** ZHANG QIN ET AL. *chinese journal of information on tcm*. 2000;7(12):78 (chi).

128- gera: 87708/di/ra

**[EFFECTS OF YANGGAN XIFENG RECIPE ON CHANGES OF NEUROLOGICAL BEHAVIOR OF RAT PARKINSON MODEL].** LI WENWEI ET AL. *chinese journal of integrated traditional and western medicine*. 2000;20(12):920 (chi\*).

129- gera: 88909/di/ra

**[EFFECTS OF ACUPUNCTURE ON BRAIN STEM EVOKED POTENTIAL IN PATIENTS WITH PARKINSON'S DISEASE].** WANG LING-LING ET AL. *journal of nanjing university tcm*. 2000;16(4):229 (chi\*).

**OBJECIIVE:** To observe effects of acupuncture on the three indices-latent period of V wave, III-V peak interval and I-V peak interval of the brain stem evoked potential in patients with Parkinson's disease. **METHOD:** The cases were randomly divided into a treatment group and a control group. Then, the three indices of brain stem evoked potential and the integrals in Webster quantity table were studied in all cases before and after acupuncture. **RESULT:** In the treatment group, the latent period of V wave, III-V peak interval and IV peak interval were shortened obviously, which corresponded with the decrease in Webster quantity table. **CONCLUSION** Acupuncture may increase the intracerebral dopamine content, enhance the excitability of intracerebral dopamine neurons, and thus achieve its clinical effects. From the aspect of syndrome differentiation of Traditional Chinese Medicine, the result, to some extent, reflected the effects of calming die endogenous mind (and tranquillising the wind) by

130- gera: 89256/di/ra

**[THE CURATIVE RESEARCH OF VENERE ENZYME TO PARKINSON'S DISEASE AND PARKINSON'S SYNDROME].** XU JIPING ET AL. *china journal of traditional chinese medicine and pharmacy*. 2000;15(6):34 (chi).

131- gera: 89853/di/ra

[PARKINSON'S DISEASE POSTOPERATIVE COMPLICATIONS TREATED BY COMBINATION OF TRADITIONAL CHINESE MEDICINE AND WESTERN MEDICINE. ATTACHING REPORT OF 83 CASES]. LI XIAN-BIN ET AL. *journal of chengdu university of tcm*. 2000;23(4):44 (chi).

132- gera: 90917/di/ra  
[PRESENT SITUATION AND LOOKING INTO THE FUTURE OF TREATING PARKINSON'S DISEASE WITH TRADITIONAL CHINESE DRUGS]. LI JIAN SHENG ET AL. *journal of henan college of tcm*. 2000;15(3):15 (chi).

133- gera: 94259/di/re  
TREATMENT OF CHOREA BY ACUPUNCTURE: A REPORT OF 26 CASES. KONG ZHAO-XIA. *tcm shanghai journal of acupuncture and moxibustion*. 2000;3(1):44 (eng).

134- gera: 89263/di/ra  
[OBSERVATION ON WALLEBERG'S SYNDROME (36 CASES) TREATED BY COMBINED TREATMENT]. WANG JIANBIN ET AL. *journal of practical tcm*. 2001;17(1):9 (chi).

135- gera: 91778/di/ra  
[CURRENT THERAPEUTIC SITUATION OF PARKINSON DISEASE IN TRADITIONAL CHINESE MEDICINE]. LING LING. *shaanxi journal of traditional chinese medicine*. 2001;22(3):187 (chi).

136- gera: 93710/di/ra  
[19 PARKINSON PATIENTS TREATED WITH KANLI PILL]. GUO SHU-REI ET AL. *liaoning journal of tcm*. 2001;28(3):154 (chi\*).

137- gera: 94536/di/ra  
[PRELIMINARY EXPERIMENTAL STUDY ON THERAPEUTIC MECHANISM OF KANGZHEN ZHIJING CAPSULE IN TREATING PARKINSON'S DISEASE]. BAO YUAN-CHENG ET AL. *chinese journal of integrated traditional and western medicine*. 2001;21(3):193 (chi\*).

138- gera: 94718/di/ra  
[TREATMENT OF 77 CASES OF PARKINSON'S SYNDROME WITH YUZHEN POWDER]. SUN SISHENG ET AL. *jiangsu journal of tcm*. 2001;22(4):22 (chi).

139- gera: 96373/di/ra  
[EAR-POINTS APPLICATION WITH COWHERB SEED FOR INFANTILE HYPERKINETIC SYNDROME: A REPORT OF 33 CASES]. YU QING GU YI-CHENG CHEN XIAO-FEN, ET AL. *shanghai journal of traditional chinese medicine*. 2001;35(10):38 (chi\*).

33 children of hypokinetic syndrome were treated by carpoints application with cowherb seed. Result "wed that the total effective rate was 84. 8 %. Futhermore in the period of treatment, the children' s emotions should be

140- gera: 96374/di/ra  
[GAN'S ACUPUNCTURE" FOR DYSTAXIA: A REPORT OF 30 CASES]. GAN XUE-PEI. *shanghai journal of traditional chinese medicine*. 2001;35(10):39 (chi\*).

141- gera: 96551/di/ra  
[12 CASES OF GILLES DE LA TOURETTE' S

SYNDROME TREATED BY DADING FENGZHU]. JIAWEI LU LEI. *hubei journal of traditional chinese medicine*. 2001;23(7):28 (chi).

142- gera: 98673/di/ra  
[EXPERIMENTAL STUDY ON THE PROTECTIVE EFFECT OF PINGCHAN DECOCTION AND ITS COMPOSITIONS ON FREE RADICAL INJURY IN RAT WITH PARKINSON DISEASE]. LI RU KUI ET AL. *chinese journal of traditional medical science and technology*. 2001;8(6):346 (chi\*).

143- gera: 98856/di/ra  
[DIAGNOSIS AND TREATMENT OF HYPERKINETIC SYNDROME OF CHILDHOOD WITH TRADITIONAL CHINESE MEDICINE COMBINED WITH WESTERN MEDICINE]. ZHANG BIAO. *jiangsu journal of traditional chinese medicine*. 2001;22(12):55 (chi).

144- gera: 99595/nd/re  
THE USE OF ALTERNATIVE THERAPIES BY PATIENTS WITH PARKINSON'S DISEASE. RAJENDRAN PR ET AL. *neurology*. 2001;57(5):790-4 (eng).

OBJECTIVE: To determine the prevalence and spectrum of use of alternative therapy (AT) by patients with PD and to determine whether use of AT correlates with demographic, social, or disease-specific characteristics. METHODS: The authors administered a structured questionnaire, by interview, regarding the use of AT to 201 patients with PD. Demographic, social, and disease-specific characteristics were recorded for all patients. RESULTS: Eighty-one patients (40%) used at least one AT. Vitamins and herbs, massage, and acupuncture were most common. Users of AT were younger ( $p = 0.0021$ ) and had a younger age at onset of PD ( $p = 0.0011$ ) than nonusers of AT. There was no correlation with sex or race. Patients who used AT had a higher income ( $p = 0.038$ ) and education level ( $p = 0.006$ ) than did nonusers of AT. There was no association between the use of AT and the Hoehn and Yahr score, duration of PD, duration of treatment with levodopa, surgery for PD, and presence of fluctuations. CONCLUSIONS: The use of AT is common in patients with PD. The age at onset of PD is the most potent predictor of AT use. There is no association between the use of AT and the severity of PD. The widespread and largely unexamined use of AT for PD requires more attention. This should be directed at testing their safety and efficacy and improving physician and patient knowledge about the potential benefits, costs, limitations, and risks of AT.

145- gera: 99612/nd/re  
OWNER SURVEY OF HEADSHAKING IN HORSES. MADIGAN JE, BELL SA. *j am vet med assoc*. 2001;219(3):334-7 (eng).

OBJECTIVE: To determine signalment, history, clinical signs, duration, seasonality, and response to various treatments reported by owners for headshaking in horses. DESIGN: Owner survey. ANIMALS: 109 horses with headshaking. PROCEDURE: Owners of affected horses completed a survey questionnaire. RESULTS: 78 affected horses were geldings, 29 were mares, and 2 were stallions. Mean age of onset was 9 years. Headshaking in 64 horses had a seasonal component, and for most horses, headshaking began in spring and ceased in late summer or fall. The most common clinical signs were shaking the head in a vertical plane, acting like an insect was flying up the nostril, snorting excessively, rubbing the muzzle on objects, having an anxious expression while headshaking, worsening of clinical

signs with exposure to sunlight, and improvement of clinical signs at night. Treatment with antihistamines, nonsteroidal anti-inflammatory drugs, corticosteroids, antimicrobials, fly control, chiropractic, and acupuncture had limited success. Sixty-one horses had been treated with cyproheptadine; 43 had moderate to substantial improvement. **CONCLUSIONS AND CLINICAL RELEVANCE:** Headshaking may have many causes. A large subset of horses have similar clinical signs including shaking the head in a vertical plane, acting as if an insect were flying up the nostrils, and rubbing the muzzle on objects. Seasonality and worsening of clinical signs with exposure to light are also common features of this syndrome. Geldings and Thoroughbreds appear to be overrepresented. Cyproheptadine treatment was beneficial in more than two thirds of treated horses.

146- gera: 99777/di/ra

**[EXPERIMENTAL STUDY ON THE PROTECTIVE EFFECT OF PINGCHAN DECOCTION AND ITS COMPOSITIONS ON FREE RADICAL INJURY IN RAT WITH PARKINSON DISEASE].** LI RU KUI ET AL. **chinese journal of traditional medical science and technology.** 2001;8(6):346 (chi\*).

147- gera: 99960/di/ra

**[DIAGNOSIS AND TREATMENT OF HYPERKINETIC SYNDROME OF CHILDHOOD WITH TRADITIONAL CHINESE MEDICINE COMBINED WITH WESTERN MEDICINE].** ZHANG BIAO. **jiangsu journal of traditional chinese medicine.** 2001;22(12):55 (chi).

148- gera: 104412/di/ra

**[EFFECTS OF ACUPUNCTURE TREATMENT ON BLOOD LPO AND SOD CONTENTS IN PARKINSONISM PATIENTS].** DONG XIAOTONG, WANG SHUANGKUN, REN XIAOQUN, ET AL. **acupuncture research.** 2001;26(1):28 (chi\*).

149- gera: 104438/di/ra

**[TREATMENT OF 86 CASES OF GILLES DE LA TOURETTE'S SYNDROME BASED ON TCM SYNDROME DIFFERENTIATION].** SUN XIAODENG, QIU WENJING. **journal of traditional chinese medicine.** 2001;42(7):425 (eng).

150- gera: 104640/di/ra

**[CLINICAL OBSERVATION ON TREATMENT OF MULTIPLE TOURETTE'S SYNDROME WITH SCALP ACUPUNCTURE.].** SHAN YONGHUA, YAO WEIJU. **chinese acupuncture and moxibustion.** 2001;21(6):331 (chi\*).

151- gera: 111305/di/ra

**[A MECHANISM STUDY ON THE EFFECT OF ELECTROACUPUNCTURE ON A PARTIALLY LESIONED RAT MODEL OF PARKINSON'S DISEASE].** LIANG XIBIN, LIU XIANYU, LI FENGQIAO, ET AL. **acupuncture research.** 2001;26(3):210 (chi\*).

Acupuncture has been applied in the treatment of Parkinson's Disease (PD) in China for over decades. Clinical practice revealed that it could relieve the sufferings of PD patients and improve their life quality. Besides, acupuncture is also effective for other neurological disorders such as optic nerve atrophy, spinal cord injury and brain dysplasia. But the mechanism underlying the phenomenon is still unknown. In the present study, we gave high and low frequency electroacupuncture (EA) stimulation to the medial forebrain bundle (MFB) transected rats in order to find whether EA could attenuate the abnormal rotational behavior and

dopaminergic neuron degeneration or increase the gene expression of GDNF and BDNF in the dopaminergic neurons. The main findings are. (1) Transection of the MFB with a wire knife resulted in abnormal ipsilateral rotational behavior of rats induced by amphetamine and reduction of DA in the striatum to about 50 % two weeks after the transection. (2) Both chronic low (2 Hz) and high (100 Hz) frequency EA stimulation were effective in attenuating the rotational behavior within 2 weeks of MFB transection. The same effect could last for at least 4 weeks in the animals stimulated with high frequency EA but not low frequency EA. (3) The content of DA in the striatum was increased significantly in the unlesioned side of both the low and high frequency EA stimulated rats. No increase had been found in the lesioned side. (4) High frequency EA could increase the gene expression of GDNF on the unlesioned side of substantia nigra reticular (SNr) region, and both sides of the globus pallidus, while low frequency EA was effective in increasing gene expression of GDNF in the unlesioned side of globus pallidus. (5) High frequency EA could attenuate the degeneration of dopaminergic neurons in the SNC. The low frequency EA had no effect. (6) High frequency EA, but not the low frequency, could increase the gene expression of BDNF in the SNC and the ventral tegmental area (VTA) of the lesioned side of rats after MFB transection, indicating that high frequency EA stimulation could be more effective than the low frequency EA in accelerating the synthesis of endogenous neurotrophic factors and in attenuating the degeneration of dopaminergic neurons.

152- gera: 112601/di/ra

**REFLEXOTHERAPY IN PARKINSONISM.** WIKTOROWNA ET AL. **deutsche zeitschrift fur akupunktur.** 2001;44(2a):262 (deu).

153- gera: 115592/di/ra

**REFLEXOTHERAPY IN PARKINSONISM .** WIKTOROWNA ET AL. **deutsche zeitschrift fur akupunktur.** 2001;44(2a):262 (deu).

The objective : The analysis of clinical forms of parkinsonism . parkinsonism in our region, the efficiency . treatment of disease by a method of reflexotherapy in combination with hyperbaric oxygenation. Methods: Revealing of clinical forms of parkinsonism was followed by clinico-electrophysiologic characteristics of 262 patients at the age of from 20 - 85 years. The treatment with antiparkinsonic preparations in combination with hyperbaric oxygenation and acupuncture was carried out under the electromyograph control. The main method was scalp therapy with the effect on the zone of extrapyramidal system and frontoparietal triangle in addition to the stimulation on the points of the canal of kidneys. Procedures were carried on every day. The course of treatment made up 7-10 procedures of acupuncture and hyperbaric oxygenation. Results: The distribution of parkinsonism in the Amur Region made up 43,4: 100000 of the population, in the town 97: 100000. The correlation of the men and women was 1: 1,5. The disease began more often at he age of 50-59 (34,9 % of the patients) and 60-69 (30,5 %) years. All patients had the syndrome of insufficiency of kidneys. The decrease of hyperkinesia, rigidity after the treatment was confirmed by the decrease of the pear activity on electromyogram in all patients. Conclusion : Among nosologic forms the Parkinson's disease proceeding as a syndrome of insufficiency of kidneys prevailed. The therapeutic effect was higher in combined treatment with the daily procedures of scalpotherapy. The efficiency of this treatment can be controlled with the help of electromyography.

154- gera: 152110/di/el

**TREMBLEMENTS - CHAN ZHENG. LU JING DA, LERICHE CC. *etude des traitements en acupuncture chinoise, éditions you feng.* 2001;:473 (fra).**

155- gera: 99565/di/ra

**EFFECT OF ACUPUNCTURE ON THE AUDITORY EVOKED BRAIN STEM POTENTIAL IN PARKINSON'S DISEASE. WANG LINGLING ET AL. *journal of tcm.* 2002;22(1):15-7 (eng).**

156- gera: 100996/di/re

**ACUPUNCTURE THERAPY FOR THE SYMPTOMS OF PARKINSON'S DISEASE. SHULMAN LM ET AL. *mov disord.* 2002;17(4):799-802 (eng).**

Interest in alternative medical treatments, including acupuncture, is increasing. Alternative treatments must be subjected to the same objective standards as all medical treatments. A non-blinded pilot study of the safety, tolerability, and efficacy of acupuncture (ACUPX) for the symptoms of (PD) was performed. Twenty PD patients (mean age, 68 years; disease duration, 8.5 years; Hoehn and Yahr [H&Y] stage, 2.2; Unified Parkinson's Disease Rating Scale score [UPDRS], 38.7) each received acupuncture treatments by a licensed acupuncturist. All patients were treated with two acupuncture treatment sessions per week. The first seven patients received 10 treatments and the last 13 patients 16 treatments. Patients were evaluated before and after ACUPX with the Sickness Impact Profile (SIP); UPDRS; H & Y; Schwab and England (S & E); Beck Anxiety Inventory (BAI); Beck Depression Inventory (BDI); quantitative motor tests, including timed evaluations of arm pronation supination movements, finger dexterity, finger movements between two fixed measured points, and the stand-walk-sit test; and a patient questionnaire designed for the study. Following ACUPX, there were no significant changes in the UPDRS, H&Y, S&E, BAI, BDI, quantitative motor tests, total SIP or the two SIP Dimension scores. Analysis of the 12 SIP categories not corrected for multiple comparisons revealed a post-ACUPX improvement in the sleep and rest category only ( $P = 0.03$ ). On the patient questionnaire, 85% of patients reported subjective improvement of individual symptoms including tremor, walking, handwriting, slowness, pain, sleep, depression, and anxiety. There were no adverse effects. ACUPX therapy is safe and well tolerated in PD patients. A range of PD and behavioral scales failed to show improvement following ACUPX other than sleep benefit, although patients reported other discrete symptomatic improvements. A broad battery of tests in PD patients suggested that ACUPX resulted in improvement of sleep and rest only. This finding needs to be verified using more in-depth and controlled evaluation of ACUPX for PD-related sleep disturbance. Copyright 2002 Movement Disorder Society

157- gera: 101735/di/ra

**[THE DISCUSSION OF THE DETERMINATION OF TREATMENT RULE OF 110 CASES OF TREMBLING PALSY]. LIU TAI . *liaoning journal of traditional chinese medicine.* 2002;29(2):82 (chi\*).**

This article is based on the determination of treatment according to different conditions in 110 cases, and discusses trembling palsy in traditional Chinese medical treatment rule. The result is that the center of pathogenesis is wind stirring inside and failure in nourishment of muscles. In clinic, there are four categories: yin- deficiency of liver and kidney, insufficiency of vital energy and blood, stagnation of vital energy and blood stasis, morning sickness due to the stagnation of phlegm. According the four basic types, we make four principles of treatment. The research shows that the age and course of disease are the important index. In

treatment, calming

158- gera: 101885/di/ra

**[THE INFLUENCE OF ACUPOINT INJECTION ON CENTRAL MONOAMINE TRANSMITTERS IN PARKINSON'S DISEASE]. XU BING MA CHENG CHEN GUO-ZHI. *shanghai journal of acupuncture and moxibustion.* 2002;21(2):1 (chi\*).**

Purpose : To observe the curative effect of acupoint injection on primary Parkinson's disease and its relationship to monoamine neurotransmitters in the cerebrospinal fluid of the patients. Method : Primary Parkinson's disease was treated by points Zusanli (ST 36) and Yanglingquan (GB 34) injection of Mailuoning and the curative effect was evaluated by Modified Webster Symptom Score Table. A change in monoamine neurotransmitters in cerebrospinal fluid was examined by high performance liquid chromatography-electrochemical process. Results : The total effective rate from acupoint injection was 65%. The treatment had an influence on central monoamine neurotransmitters, but there was no significant correlation between the curative effect and a change in transmitters. Conclusion : Acupoint injection has a certain curative effect on primary Parkinson's disease and can cause a

159- gera: 102582/di/ra

**[CLINICAL OBSERVATION ON REGULATIVE ACTION OF ACUPUNCTURE ON MONOAMINE NEUROTRANSMITTERS IN CEREBROSPINAL FLUID IN THE PATIENT OF PARKINSON DISEASE]. XU BIN, MA CHENG, CHEN GUOZHI. *chinese acupuncture and moxibustion.* 2002;22(3):183 (chi\*).**

Purpose : To observe the relation of the therapeutic effect of acupuncture for treatment of primary Parkinson disease with monoamine neurotransmitters of cerebrospinal fluid (CSF) in the patient of Parkinson disease. Methods : Acupuncture at Neiguan (PC 6) and other acupoints was used to treat primary parkinson disease, and Improved Webster Rating Table of Symptoms was adopted for assessment of therapeutic effects, and high performance liquid chromatography-electrochemical detector (HPLC-EC) method was used for determination of monoamine neurotransmitters in CSF. Results The total effective rate was 71 %, and acupuncture had an effect on Monoamine neurotransmitters, but the therapeutic effect was not correlated with the change of the neurotransmitters. Conclusion : Acupuncture has a certain therapeutic effect and induces changes of DA and NA, but the precise relation of the therapeutic effect with changes of monoamine neurotransmitters remains to be

160- gera: 104024/di/ra

**THE USE OF YIN TUI NA AND STOMACH CHANNEL ACUPUNCTURE POINTS IN THE TREATMENT OF FACIAL IMMOBILITY IN PARKINSON'S DISEASE.. WALTON-HADLOCK J. *journal of chinese medicine.* 2002;69:43 (eng).**

161- gera: 104204/di/ra

**[CLINICAL OBSERVATION ON THE TREATMENT OF PARKINSON'S DISEASE WITH ZHICHAN DECOCTION], LIU YI, LI RU-KUI. *shanxi journal of traditional chinese medicine.* 2002;18(3):16 (chi\*).**

31 cases of Parkinson's disease were differentiated into three types: deficiency of both qi and blood, deficiency of liver-yin and kidney-yin and stagnation of wind-phlegm in the channels. All of the types were treated with Zhichan Decoction (ZD) for three months. Webster test was performed before and after the treatment according to the symptoms and signs. Results: 4 cases had significant effect, 19 cases effective and 8 cases had no effect. The total

effective rate was 74.19%. The improvements of the symptoms were as follows: To tremor, the effective rate was 86.67% to rigidity of limbs was 70.00%, to constipation was 72.72% and to insomnia was 28.57%. The Webster points decreased averagely 6.47 after the treatment, the difference was significant ( $P < 0.01$ ). This had suggested that ZD had good effect on Parkinson's disease.

162- gera: 106570/di/ra  
**[CLINICAL OBSERVATION ON TREATMENT OF 30 CASES OF PARKINSONIAN SYNDROME WITH WESTERN MEDICINES COMBINED WITH DINGCHAN LIQUID]**. GU XI-ZHEN. *journal of nanjing university of traditional chinese medicine*. 2002;18(5):275 (chi).

163- gera: 107667/di/ra  
**[EFFECT OF XIFENG JINGNING DECOCTION ON THE LEVELS OF PLASMA DOPAMINE AND AMINO ACID IN THE CHILDREN WITH GILLES DE LA TOURETTE SYNDROME]**. LIU CHUSHENG ET AL. *chinese journal of information on traditional chinese medicine*. 2002;9(5):19 (chi\*).

164- gera: 107723/di/ra  
**[CONTRAST CLINICAL OBSERVATION IN THE TREATMENT OF PARKINSON'S DISEASE WITH YICHAN DECOCTION]**. YANG MING HUI, DOU YONG-QI, LIU YI, ET AL. *chinese journal of integrated traditional and western medicine in intensive and criti*. 2002;9(5):256 (chi\*).

165- gera: 108087/di/ra  
**[DISCUSSION ON PATHOGENESIS OF PARKINSON'S DISEASE TREATED WITH METHODS OF TONIFYING THE KIDNEY AND REMOVING TOXIC SUBSTANCES]**. WANG JIE-MIN, WANG YA-LI. *shandong journal of tcm*. 2002;21(10):581 (chi).

166- gera: 110356/di/ra  
**[EFFECT OF YICHAN DECOCTION ON BEHAVIOR PATTERN AND CEREBRAL BLACK SUBSTANCE CELL MORPHOLOGY IN PARKINSON'S DISEASE MODEL RATS\*]**. YANG MING-HUI ET AL. *chinese journal of integrated traditional and western m*. 2002;22(11):841 (chi\*).

167- gera: 139308/di/ra  
**AVANCES EN EL TRATAMIENTO DE LA PARALISIS AGITANTE EN MTC**. X. *medicina energetica*. 2002;14:31 (esp).

168- gera: 111214/di/ra  
**[INFLUENCE OF ELECTROACUPUNCTURE ON THE CONTENT OF GLUTAMINE IN STRIATUM OF PARKINSON'S DISEASE RATS]**. MA J, TIAN Q, WANG YC ET AL. *shanghai journal of acupuncture and moxibustion*. 2003;22(1):36 (chi\*).

Objective : To observe the influence of electro-acupuncture on the glutamine (Glu) in the striatum of Parkinson's disease (PD) rats, Methods The rat model of PD was established by injuring the unilateral nigra. The contents of Glu in the bilateral striatum in normal group, sham operation group, electro-acu puncture group and model group were assessed. Results : Electro-acupuncture could reduce the content of Glu obviously ( $P < 0.05$ ). Conclusion : Glu has a close relation with the development of PD, and electro-acupuncture can reduce the release of Glu to treat

169- gera: 111722/di/ra  
**[TREATMENT OF 36 CASES OF PARKINSONIAN SYNDROME WITH TCM COMBINED WITH WESTERN MEDICINE]**. LI XIAN. *jiangsu journal of tcm*. 2003;24(1):14 (chi).

170- gera: 112389/di/ra  
**EFFETTO DELL'AGOPUNTURA SUL POTENZIALE EVOCATO Uditivo DEL TRONCO CEREBRALE NEL MORBO DI PARKINSON**. WANG LINGLING ED ALTRI. *rivista italiana di medicina tradizionale cinese*. 2003;91(1):33 (ita\*).

171- gera: 113121/di/ra  
**[ETIOPATHOLOGY AND TREATMENT BASED ON SYNDROME DIFFERENTIATION OF EPILEPTICISM]**. HUANG PEIXIN, ET AL. *chinese archives of tcm*. 2003;21(2):176 (chi).

172- gera: 113918/di/ra  
**[CLINICAL STUDY ON HEAD POINT-THROUGH-POINT ELECTROACUPUNCTURE FOR TREATMENT OF PARKINSON'S DISEASE]**. WANG SHUN, ZHOU ZHENKUN, HU BINGCHENG, ET AL. *chinese acupuncture and moxibustion*. 2003;23(3):129 (chi\*).

173- gera: 114713/di/ra  
**[TREATMENT OF 36 CASES OF PARKINSONIAN SYNDROME WITH TCM COMBINED WITH WESTERN MEDICINE]**. LI XIAN. *jiangsu journal of tcm*. 2003;24(1):14 (chi).

174- gera: 115380/di/ra  
**EFFETTO DELL'AGOPUNTURA SUL POTENZIALE EVOCATO Uditivo DEL TRONCO CEREBRALE NEL MORBO DI PARKINSON**. WANG LINGLING ED ALTRI. *rivista italiana di medicina tradizionale cinese*. 2003;91(1):33 (ita\*).

175- gera: 116112/di/ra  
**[ETIOPATHOLOGY AND TREATMENT BASED ON SYNDROME DIFFERENTIATION OF EPILEPTICISM]**. HUANG PEIXIN, ET AL. *chinese archives of tcm*. 2003;21(2):176 (chi).

176- gera: 116909/di/ra  
**[CLINICAL STUDY ON HEAD POINT-THROUGH-POINT ELECTROACUPUNCTURE FOR TREATMENT OF PARKINSON'S DISEASE]**. WANG SHUN, ZHOU ZHENKUN, HU BINGCHENG, ET AL. *chinese acupuncture and moxibustion*. 2003;23(3):129 (chi\*).

Objective : To observe clinical therapeutic effect of head point-through-point electroacupuncture on Parkinson's disease. Methods : 180 cases of Parkinson's disease were randomly divided into a treatment group (100 cases) treated with head point-through-point electroacupuncture, and a control group with oral administration of Madopa. The points on the head, Fengchi (GB 20), Xuanli (GB 6) Qianding (GV 21), Xuanlu (GB 5) were selected in the treatment group. Electromyogram before and after treatment were investigated. Results : The effective rate was 75.00% in the treatment group and 66.25% in the control group with a significant difference between the two groups ( $P < 0.05$ ). Conclusion : The head point-through-point electroacupuncture has a definite therapeutic effect

177- gera: 118320/di/ra  
**CLINICAL RESEARCH ON TREATMENT OF**



**HYPERKINETIC SYNDROME OF CHILDHOOD BY ELECTROACUPUNCTURE PLUS ACUPOINT APPLICATION.** WU YAO-CHI. *journal of acupuncture and tuina science.* 2003;1(4):35 (eng\*).

178- gera: 118695/di/ra

**[STUDY OF PARKINSON'S DISEASE TREATED WITH INTEGRATED TRADITIONAL CHINESE AND WESTERN MEDICINE.].** ZHAO XIAO-HUI, GU CHENG-ZHI, HUANG HUAI-YU, ET AL. *modern journal of integrated traditional chinese and western medicine .* 2003;12(18):1923 (chi\*).

179- gera: 118852/di/ra

**SHI YANQING'S EXPERIENCE ON TREATMENT OF PARKINSON'S DISEASE.** SHI XIAOWEN. *journal of tcm.* 2003;44(7):502 (eng).

180- gera: 118907/di/ra

**[CLINICAL ANALYSIS ON TREATMENT OF PARKINSON'S DISEASE BY ACUPUNCTURE OF POINTS ON THE GOVERNOR VESSEL].** LI XIAOJUN. *chinese acupuncture and moxibustion.* 2003;23(8):445 (chi\*).

181- gera: 118909/di/ra

**[RESEARCHING DEVELOPMENT OF PARKSON'S DISEASES TREATED BY TRADITIONAL CHINESE MEDICINE].** JIA ZHIWEI. *inner mongol journal of tcm.* 2003;22(4):34 (chi).

182- gera: 118910/di/ra

**[MODIFIED ZHENWU DECOCTION IN THE TREATMENT OF 32 CASES OF SENILE INVOLUNTARY MOVEMENT].** CAO ZUSHENG. *henan tcm.* 2003;23(9):8 (chi).

183- gera: 119381/di/ra

**[CLINICAL OBSERVATION ON EFFECT OF COMBINED THERAPY OF BUSHEN PINGCHAN RECIPE AND MEDOPA TABLET IN TREATING PARKINSON'S DISEASE\*].** CUI LING, YU XIANG-DONG, CUI JUN. *chinese journal of integrated traditional and western medicine.* 2003;23(7):504 (chi\*).

184- gera: 119511/di/ra

**[THE TREATMENT OF PARKINSON'S DISEASE BY ACUPUNCTURE AND HERBAL MEDICINE].** YUFANG XUE. *journal of chinese medicine.* 2003;73:9 (eng).

185- gera: 120648/di/ra

**[PRESENT SITUATION AND PROSPECTS OF STUDIES ON TCM TREATMENT OF PARKINSON'S DISEASE].** HE JIANCHENG, WEI HONGCHANG, YUAN CANXING, ET AL. *journal of tcm.* 2003;44(5):390 (chi).

186- gera: 120842/di/ra

**[ZHENG SHAOZHOU' S EXPERIENCE OF SYNDROME DIFFERENTIATION AND TREATMENT FOR PARKINSON' S DISEASE].** ZHANG BAOPING ET AL. *china journal of tcm and pharmacy.* 2003;18(4):221 (chi).

187- gera: 120945/di/ra

**[EFFECTS OF YICHAN DECOCTION ON M AND DA RECEPTORS AND CATECHOLAMINES IN THE MODEL RAT OF PARKINSON'S DISEASE].** YANG MINGHUI, DOU YONGQI, LIU YI. *journal of tcm.* 2003;44(6):463 (chi).

188- gera: 121206/di/ra

**ACUPUNCTURE PLUS HERBAL MEDICINE TREATED 30 CASES OF MINOR CHOREA.** ZHANG SHU-JUN FENG FU-HAI. *journal of acupuncture and tuina science.* 2003;1(1):34 (eng\*).

189- gera: 122409/di/ra

**[CUN-ENT STUDY OF AND PROSPECT FOR THE TREATMENT OF PARKINSON'S DISEASE WITH BOTH CHINESE AND WESTERN MEDICINE].** WANG BAOQI. *journal of henan university of chinese medicine.* 2003;18(105):78 (chi\*).

190- gera: 122567/di/ra

**TCM TREATMENT OF PARKINSON'S SYNDROME - A REPORT OF 40 CASES.** CHEN JIANZONG, GUO JIANYING, SUN JING, ET AL. *journal of tcm.* 2003;23(3):168 (eng).

191- gera: 123772/di/ra

**[EFFECT OF PEIBU GANSHEN RECIPE ON CHANGES OF BEHAVIOR AND NIGRA MONOAMINE TRANSMITTERS OF BRAIN IN MICE WITH PARKINSON'S DISEASE].** LI GANG, CHENJIAN-ZONG, LIANG HONG-JUAN, ET AL. *journal of anhui traditional chinese medical college.* 2003;22(6):40 (chi\*).

192- gera: 124205/di/ra

**[CLINICAL OBSERVATION ON THE EFFICACY ENHANCING AND TOXICITY ATTENUATING EFFECT OF NUZHEN YANGYIN GRANULE TO THE ANTI-PARKINSONISM THERAPY MAINLY WITH MEDOPA \*].** HU XUE-JUN, YANG XIAO-SU, YANG XU-GUANG, ET AL. *chinese journal of integrated traditional and western medicine.* 2003;23(11):811 (chi\*).

193- gera: 124304/di/ra

**[THE EFFECT OF ANTI - PARKINSON POTION ON SUBSTANTIA NIGRA AND STRIATUM TH - POSITIVE NEURONS IN PARKINSON DISEASE RATS].** HUANG HUAIYU , ZHAO XIAOHUI , HUANG ZHIDONG , ET A. *chinese journal of integrative medicine on cardio-/cerebrovascular disease.* 2003;1(12):709 (chi\*).

194- gera: 124511/di/ra

**[ACUPUNCTURE FOR TREATMENT OF DYSKINESIAS OF PARKINSON'S DISEASE ].** ZHANG HANLIANG, ZHU WEIFENG. *chinese acupuncture and moxibustion.* 2003;23(12):709 (chi\*).

195- gera: 125270/di/ra

**[THE EXPERIMENTAL STUDY ON CYTO - PROTECTIVE FUNCTION OF GLUTATHION COMBINED WITH KANGZHEN ZHIJING CAPSULE ON PARKINSON DISEASE].** ZHOU HOUQUANG, BAO YUANCHENG, LU JIANMING, ET AL. *chinese journal of integrative medicine on cardio-/cerebrovascular disease.* 2003;1(11):652 (chi\*).

196- gera: 125291/di/ra

**[TREATMENT FOR 62 CASES OF GILLES DE LA TOURETTE' S SYNDROME OF CHILDHOOD WITH GRANULES OF JIANNAO ZHICHOU ].** YANG JIAN, ET AL. *beijing journal of tcm.* 2003;22(6):8 (chi).

197- gera: 136134/di/ra

**L'EXPERIENCE DU MAÎTRE SHI YAN QING DANS LE TRAITEMENT DE LA MALADIE DE**

**PARKINSON. SHI XIAO WEN. acupuncture traditionnelle chinoise.** 2003;9:64 (fra).

Source : Zhong Yi Za Zhi 07A-'e (Revue de Médecine Chinoise) 7/2003 p. 502

198- gera: 136135/di/ra

**OBSERVATION CLINIQUE DE 40 CAS DE MALADIE DE PARKINSON TRAITÉS PAR ACUPUNCTURE. CHEN LI GUO. acupuncture traditionnelle chinoise.** 2003;9:71 (fra).

Source : Zhong Yi Za Zhi (Revue de Médecine Chinoise) 4/96 p. 216-217

199- gera: 146244/nd/re

**ACUPUNCTURE PREVENTS 6-HYDROXYDOPAMINE-INDUCED NEURONAL DEATH IN THE NIGROSTRIATAL DOPAMINERGIC SYSTEM IN THE RAT PARKINSON'S DISEASE MODEL. PARK HJ, LIM S, JOO WS, YIN CS, LEE HS, LEE HJ, SEO JC, LEEM K, SON YS, KIM YJ, KIM CJ, KIM YS, CHUNG JH. experimental neurology.** 2003;180(1):93-8 (eng).

Parkinson's disease (PD) is a chronic neurodegenerative disorder, and it has been suggested that treatments promoting survival and functional recovery of affected dopaminergic neurons could have a significant and long-term therapeutic value. In the present study, we investigated the neuroprotective effects of acupuncture on the nigrostriatal system in rat unilaterally lesioned with 6-hydroxydopamine (6-OHDA, 4 microg/microl, intrastriatal injection) using tyrosine hydroxylase (TH) and receptor for brain-derived neurotrophic factor, trkB, immunohistochemistries. Two weeks after the lesions were made, rats presented with asymmetry in rotational behavior (118.3 +/- 17.5 turns/h) following injection with apomorphine, a dopamine receptor agonist (0.5 mg/kg, sc). In contrast, acupunctural treatment at acupoints GB34 and LI3 was shown to significantly reduce this motor deficit (14.6 +/- 13.4 turns/h). Analysis via TH immunohistochemistry revealed a substantial loss of cell bodies in the substantia nigra (SN) (45.7% loss) and their terminals in the dorsolateral striatum ipsilateral to the 6-OHDA-induced lesion. However, acupunctural treatment resulted in the enhanced survival of dopaminergic neurons in the SN (21.4% loss) and their terminals in the dorsolateral striatum. Acupuncture also increased the expression of trkB significantly (35.6% increase) in the ipsilateral SN. In conclusion, we observed that only acupuncturing without the use of any drug has the neuroprotective effects against neuronal death in the rat PD model and these protective properties of acupuncture could be mediated by trkB.

200- gera: 124063/di/ra

**[TREATMENT OF PARKINSON'S DISEASE BY DEALING WITH SPLEEN]. MA YUN-ZHI, WU JI-TAO. new journal of tcm.** 2004;36(1):3 (chi\*).

201- gera: 124155/di/ra

**[CLINICAL OBSERVATION ON TREATMENT OF PARKINSON'S DISEASE WITH CIWUJIA ]. KUANG SHIXIANG ET AL. jilin journal of tcm.** 2004;24(1):14 (chi).

202- gera: 124474/di/ra

**[CLINICAL STUDY ON THE TREATMENT OF PARKINSON'S DISEASE WITH MODIFIED ZHENCHANSHU CAPSULE, A REPORT OF 42 CASES ]. ZHOU XIAO-LIN. shanxi journal of tcm.** 2004;20(1):23 (chi\*).

203- gera: 124939/di/ra

**[THE EFFECT OF RENSEHNZAIZAOWAN COMBINED WITH MADOPAR ON SUB-STANTIA NIGRA AND STRIATUM TH - POSITIVE NEURONS IN PARKINSON DISEASE RATS]. HUANG HUAIYU , ZHAO XIAOHUI , HUANG ZHIDONG, ET AL. chinese journal of integrative medicine on cardio-cerebrovascular disease.** 2004;2(1):35 (chi\*).

204- gera: 127250/di/ra

**[EFFECTS OF CHINESE DRUGS FOR NOURISHING THE LIVER AND KIDNEY AND REMOVING OBSTRUCTION IN COLLATERALS AND DETOXICATION ON TYROSINE HYDROXYLASE AND ITS MRNA IN PARKINSON'S DISEASE MODEL RATS]. HE JIANCHENG, YUAN CANXING, WEI HONGCHANG, ET AL. journal of tcm university of hunan.** 2004;45(2):140 (chi).

205- gera: 127805/di/ra

**[CHILDREP FREQUENT HEAD-SHAKING AND NICTITATION]. X. china reflexology journal.** 2004;2: (chi).

206- gera: 128709/di/ra

**[CLINICAL CONTROL STUDY ON ZIYIN XIFENG HUOXUE DECOCTION FOR TREATMENT OF PARKINSON'S DISEASE AT EARLY STAGE]. WANG WENTONG, LUO XIAODONG, WU WEI, ET AL. journal of tcm.** 2004;45(4):274 (chi\*).

207- gera: 129463/di/ra

**[PROGRESS IN MECHANISM ON SHE TREATMENT OF PARKINSON'S DISEASE WISH TRADITIONAL CHINESE MEDICINE]. FANG XIANG. journal of anhui traditional chinese medical college.** 2004;23(3):57 (chi).

208- gera: 130155/di/ra

**[CLINICAL OBSERVATION ON THE TREATMENT OF PARKINSON'S DISEASE BY SCALP ]. YANG YAN, CHEN HONG-TAO. journal of clinical acupuncture and moxibustion.** 2004;20(6):36 (chi\*).

Objective: To observe the effect of Scalp Acupuncture treatment for Parkinson's Disease. Methods:60 cases were divided into two groups, 30 cases in the control group were treated by regular western medicine and 30 cases in the therapy group were added by Scalp Acupuncture. Results: The total effective rate of the therapy group was 73. 3%, and the control group was 40%. The difference of effective rate Was significance (P < 0.05) .

209- gera: 130404/di/ra

**[EFFECTIVE OBSERVATION ON TREATING SHAKING PALSY WITH TCM AND WM COMBINED ], GE HONG-XIA, XIE YAN-YAN, SHEN HUI-JUN, ET AL. liaoning journal of tcm.** 2004;31(7):593 (chi).

210- gera: 130846/di/ra

**[THE EXPERIMENTAL STUDY ON TREATMENT OF YINXINGPINGCHAN RECIPE AND ITS DEFERENT COMBINATION IN THE MODEL MOUSE WITH PARKINSON DISEASE]. ZHANG JUN, ZHANG HONG-MEI, BAI 11-MIN, ET AL. acta chinese medicine and pharmacology.** 2004;32(3):12 (chi\*).

211- gera: 131918/di/ra

**[THREE-PHASE DIFFERENTIATION AND TREATMENT OF PARKINSON'S DISEASE]. LI YAN-JIE ZHANG WEN-XUE ZHAO GUO-HUA ET AL. chinese journal of basic medicine in tcm.** 2004;10(8):51 (chi).

- 212- gera: 132189/di/ra  
**[CLINICAL PROGRESS OF PARKINSON'S DISEASE TREATED BY TCM].** ZHOU HOU GUANG, BUO YUANCHENG. *chinese journal of integrative medicine on cardio-/cerebrovascular disease*. 2004;2(10):593 (chi\*).
- 213- gera: 132408/di/ra  
**[ZHAO GUO-HUA'S EXPERIENCE TO CURE PARKINSONISM].** LI YAN-JIE LI DU-XUAN . *guang ming journal of tcm*. 2004;113(4):42 (chi).
- 214- gera: 133791/di/ra  
**[TREATMENT OF PARKINSON'S DISEASE IN 30 CASES BY NOURISHING LIVER AND KIDNEYS, UNBLOCKING COLLATERALS AND RELIEVING TOXIN].** YUAN CAN-XING HU JIAN-HUA. *shanghai journal of tcm*. 2004;38(8):8 (chi\*).
- 215- gera: 134221/di/ra  
**[RESEARCH CLEW AND PRACTICE OF TREATING PARKINSONISM WITH METHOD OF TONIFYING LIVER AND KIDNEY].** CHEN JIANZONG ET AL. *china journal of tcm and pharmacy*. 2004;19(11):687 (chi).
- 216- gera: 134302/di/ra  
**[INQUIRY INTO THE CLINICAL CHARACTERISTICS OF 12 PATIENTS WITH PAROXYSMAL KINESIGENIC CHOREATHETOSIS].** WANG LIYING, DUO ZHENSHUN, FANG XIAOFEN, ET AL. *chinese journal of basic medicine in tcm*. 2004;10(10):643 (chi).
- 217- gera: 134378/di/ra  
**[INQUIRY INTO THE CLINICAL CHARACTERISTICS OF 12 PATIENTS WITH PAROXYSMAL KINESIGENIC CHOREATHETOSIS.].** WANG LIYING, DUO ZHENSHUN, FANG XIAOFEN, ET AL. *chinese journal of integrative medicine on cardio-/cerebrovascular disease*. 2004;2(11):643 (chi\*).
- 218- gera: 134711/di/ra  
**[APPLICATION OF ACUPUNCTURE AND MOXIBUSTION IN TREATING GILLES DE LA TOURETTE'S SYNDROME ].** MA XIAO-FAN, LI ZU-JIAN, ZHAO CUI-YING. *journal of clinical acupuncture and moxibustion*. 2004;20(9):48 (chi).
- 219- gera: 134741/di/ra  
**[NOVEL APPROACH TO EXPLORE PARKINSON'S DISEASE BASED ON INTEGRATION OF DISEASE AND SYNDROME INVOLVEMENT DEFICIENCY OF KIDNEY - YIN].** AN HONGMEI, ET AL . *journal of emergency in tcm*. 2004;13(12):818 (chi\*).
- 220- gera: 135016/di/ra  
**PRESENT SITUATION AND PROSPECTS OF TCM TREATMENT OF PARKINSON'S DISEASE.** HE JIANCHENG, WEI HONGCHANG, YUAN CANXING, ET AL. *journal of tcm*. 2004;24(4):308 (eng).
- 221- gera: 135122/di/ra  
**HISTORIA CLÍNICA: SINDROME PARKINSONIANO.** VILLANUEVA R. *medicina tradicional*. 2004;193:22 (esp).
- 222- gera: 135302/di/ra  
**TRATTAMENTO SECONDO LA MEDICINA TRADIZIONALE CINESE DELLA SINDROME DI PARKINSON.** CHEN JIANZONG ED ALTRI. *rivista italiana di medicina tradizionale cinese*. 2004;97(3):29 (ita\*).
- 223- gera: 135711/nd/re  
**[DIFFERENTIAL THERAPY OF ADVANCED PARKINSON'S DISEASE WITH SPECIAL REFERENCE TO COMPLEMENTARY THERAPEUTIC APPROACHES].** PARACELSUS-ELENA-KLINIK, KASSEL. *schweiz runds ch med prax*. 2004;93(45):1869-72 (deu\*).
- In Parkinson's disease advanced symptoms (fluctuation, dyskinesia) and/or psychiatric side-effects of medication require a very individual and often complicated therapeutic regime. All pharmacological groups can be useful. The adjustment of medication needs clinical control, especially when psychiatric symptoms occur. Ideally, this task should be left to specially trained medical staff. Moreover, there are a number of complementary strategies recommended by various suppliers. Physiotherapy, speech therapy and ear acupuncture have in the past been shown to be useful even in advanced cases. The German Parkinson Society (dPV) has supported clinical trials in respect of the application of ear acupuncture, Qigong and the coenzyme Q10. Positive results are expected from Q10. Acupuncture cannot be recommended, while Qigong may be helpful for some patients.
- 224- gera: 137706/di/ra  
**[THE CURATIVE EFFECT ESPIAL IN CURING PARKINSONISM WITH DINGZHEN DECOCTION].** AI LI-XIN. *guang ming journal of tcm*. 2004;115(6):31 (chi).
- 225- gera: 137958/di/ra  
**[CLINICAL OBSERVATION ON 30 CASES OF PARKINSON' DISEASE WITH COMBINED TREATMENT].** ZHAO BINGXIANG, ET AL. *hunan journal of tcm*. 2004;20(6):13 (chi).
- 226- gera: 138733/di/ra  
**[OBSERVATION ON DIFFERENT SYNDROMES OF PARKINSONISM TREATED BY KAN LI DECOCTION].** GUO SHURUI, ZHANG CAIYU , FU WENYU ET AL. *journal of practical tcm*. 2004;20(12):675 (chi\*).
- 227- gera: 138882/di/ra  
**LA EXPERIENCIA DEL DR. SHI YANQING EN EL TRATAMIENTO DE LA ENFERMEDAD DE PARKINSON CON ACUPUNTURA. X. el pulso de la vida-** *journal of tcm*. 2004;41:29 (esp).
- 228- gera: 138913/di/ra  
**ACTUAL SITUACIÓN Y AERSPECTIVA DE LA MEDICINA TRADICIONAL CHINA EN EL TRATAMIENTO CE LA ENFERMEDAD DE PARKINSON. X. el pulso de la vida-** *journal of tcm*. 2004;42:41 (esp).
- 229- gera: 123918/di/ra  
**[OBSERVATION ON THERAPEUTIC EFFECT OF HERBS-PARTITIONED MOXIBUSTION ON PARKINSON DISEASE OF 54 CASES].** ZHANG JF, SUN GS, ZHAO GH. *chinese acupuncture and moxibustion*. 2005;25(9):610-2. (chi).
- OBJECTIVE: To observe clinical therapeutic effect of herbs-partitioned moxibustion at Shenque (CV 8) on Parkinson disease. METHODS: Ninety cases of Parkinson disease were randomly divided into a treatment group (n=4) and a control group (n=36) in order of visiting. The two groups were treated with routine western medicine for

treatment of Parkinson disease, and herbs-partitioned moxibustion at Shenque (CV 8) was added to the treatment group. Their comprehensive therapeutic effects were observed and modified UPDRS cumulative scores were compared. RESULTS: The total effective rate was 83.3% in the treatment group, significantly better than 58.3% in the control group ( $P < 0.01$ ); the modified UPDRS cumulative score was reduced by 74.1% in the treatment group, significantly better than 16.7% in the control group ( $P < 0.01$ ). CONCLUSION: Herbs-partitioned moxibustion at Shenque (CV 8) has a certain therapeutic effect on Parkinson disease.

230- gera: 126237/di/ra

**OBSERVATION CLINIQUE 50 CAS DE SYNDROME D'HYPERKINESIE INFANTILE TRAITES PAR PHARMACOTHERAPIE TRADITIONNELLE ET AURICULOTHERAPIE.** WANG WENLI, FAN FLUA. *journal de medecine traditionnelle chinoise*. 2005;1(4):5 (fra).

231- gera: 136397/di/re

**EFFECT OF ACUPUNCTURE ON 6-HYDROXYDOPAMINE-INDUCED NIGROSTRATAL DOPAMINERGIC NEURONAL CELL DEATH IN RATS.** KIM YK, LIM HH, SONG YK, LEE HH, LIM S, HAN SM, KIM CJ. *neurosci lett*. 2005;May 10:1-5 (eng).  
In this study, we investigated the effect of acupuncture at the Zusanli acupoint (ST36) on the nigrostriatal dopaminergic neuronal cell death in the rats with Parkinson's disease. Two weeks after unilateral injection of 6-hydroxydopamine (6-OHDA) into the striatum, an apomorphine-induced rotational behavior test showed significant rotational asymmetry in the rats with Parkinson's disease. Immunostaining for tyrosine hydroxylase demonstrated a dopaminergic neuronal loss in the substantia nigra and dopaminergic fiber loss in the striatum. Acupuncture at the ST36 for 14 days significantly inhibited rotational asymmetry in the rats with Parkinson's disease, and also protected against 6-OHDA-induced nigrostriatal dopaminergic neuronal loss. These effects of acupuncture were not observed for the non-acupoint (hip) acupuncture. The present study shows that acupuncture at the ST36 acupoint can be used as a useful strategy for the treatment of Parkinson's disease

232- gera: 136406/di/re

**EVALUATION OF ACUPUNCTURE IN THE TREATMENT OF PARKINSON'S DISEASE: A DOUBLE-BLIND PILOT STUDY.** CRISTIAN A, KATZ M, CUTRONE E, WALKER RH. *mov disord*. 2005;may 9: (eng).

As many as 40% of patients with Parkinson's disease (PD) use some form of complementary medicine during the course of their illness, and many try acupuncture. One nonblinded study of the effects of acupuncture in PD suggested that it might be helpful for some aspects of PD. We performed a double-blind, randomized, pilot study comparing acupuncture to a control nonacupuncture procedure to determine the effects of acupuncture upon a variety of PD-associated symptoms. Fourteen patients with Stage II or III PD received acupuncture or a control nonacupuncture protocol. Before and after treatment, patients were evaluated using the Motor subscale of the Unified Parkinson's Disease Rating Scale (UPDRS), the Parkinson's Disease Questionnaire (PDQ-39), and the Geriatric Depression Scale. There were no statistically significant changes for the outcomes measured. In the patients who received acupuncture, nonsignificant trends toward improvement were noted in the Activities of Daily Living score of the PDQ-39, the PDQ-39 Summary Index, and the Motor subscale of the UPDRS. (c) 2005

233- gera: 138361/di/ra

**[CLINICAL OBSERVATION OF 64 PATIENTS WITH CHOREA TREATED WITH ACUPUNCTURE].** YANG BAI-YAN. *journal of clinical acupuncture and moxibustion*. 2005;21(1):15 (chi).

234- gera: 138650/di/ra

**[A CLINICAL OBSERVATION OF 100 CASES OF TREATING GILLES DE LA TOURETTE'S SYNDROME WITH LINGJIAO ZHICHOU PILL ].** GONG HUIZHEN . *journal of henan university of chinese medicine*. 2005;20(117):60 (chi).

235- gera: 140102/di/ra

**[EFFECTS OF ZHILING CAPSULE ON EXPERIMENTAL PARKINSON' S IN MICE].** XU LI, WE CUT' E, LIU JIANXUN , ET AL. *traditional chinese drug research and clinical pharmacology*. 2005;16(2):87 (chi\*).

236- gera: 140891/di/ra

**[TREATMENT OF 25 CASES OF CHILD GILLES DE LA TOURETTE'S SYNDROME BY COMBINED SCALP AND BODY ACUPUNCTURE].** SUN DONG-WEI. *shanghai journal of acupuncture and moxibustion*. 2005;24(7):15 (chi\*).

Objective To compare the clinical efficacy of acupuncture with simple Western medicine for treating child Gilles de la Tourette's syndrome. Method The acupuncture group was treated by point selection based on syndrome differentiation and the control group, with oral haloperidol. Results The efficacy rate was 93% in the acupuncture of 25 cases and 82% in the control group of 24 cases. Conclusion The results show that acupuncture has a satisfactory effect on child Gilles de la Tourette's syndrome. Traduction française disponible.

237- gera: 141563/di/ra

**TREATMENT OF PARKINSON DISEASE BY MERIDIAN MUSCLE REGION TUINA PLUS EARTHLY BRANCHES PRESCRIPTION OF POINT SELECTION ALONG MERIDIAN: A REPORT OF 1 CASE.** YE GUI-NENG, ZHI LAN-YING. *journal of acupuncture and tuina science*. 2005;3(4):52 (eng).

238- gera: 142002/di/ra

**CLINICAL ANALYSIS ON TREATMENT OF PARKINSON'S DISEASE BY ACUPUNCTURE OF THE MAIN POINTS ON THE GOVERNOR VESSEL MERIDIAN.** LI XIAOJITN. *europaean journal of integrated eastern and western medicine*. 2005;3(3):23 (eng).

Parkinson's disease, also called shaking palsy, is a commonly seen degenerative disease of the nervous system in e middle-aged and elderly, clinically characterized mainly by static tremor, bradykinesia and an increase of uscular tension. At present, there is no therapy or radical cure for it. The author treated 30 cases of Parkinson's sease by western medicine combined with acupuncture at points on the Governor Vessel Meridian and control vestigation was conducted with satisfactory results as reported in the following.

239- gera: 142133/di/ra

**TREATMENT OF PARKINSON DISEASE BY MERIDIAN MUSCLE REGION TUINA PLUS EARTHLY BRANCHES PRESCRIPTION OF POINT SELECTION ALONG MERIDIAN: A REPORT OF 1 CASE.** YE GUI-NENG, ZHI LAN-YING. *journal of*

**acupuncture and tuina science.** 2005;3(4):52 (eng).

240- gera: 142604/di/ra

**[INFLUENCE OF ELECTROACUPUNCTURE ON THE APOPTOSIS OF SUBSTANTIA NIGRA DOPAMINERGIC NEURONS IN A RAT MODEL OF PARKINSON'S DISEASE].** MA J, ZHU SX, WANG YC;AL. **shanghai journal of acupuncture and moxibustion.** 2005;24(10):36 (chi\*).

Objective To investigate the influence of electroacupuncture on the apoptosis of substantia nigra dopaminergic neurons in parkinsonism rats. Methods A rat model of unilateral substantia nigra-destroyed Parkinson's disease was made by injecting 6-OHDA into the right mesencephalic substantia nigra. The rat model was treated with electroacupuncture. The number of substantia nigra apoptotic dopaminergic neurons was determined by a TH and TUNEL double labeling method in the normal, sham operation, model and electroacupuncture groups. Results The number of apoptotic dopaminergic neurons was significantly larger on the destroyed side in parkinsonism rats than in the normal group ( $P < 0.01$ ) and on the undestroyed side ( $P < 0.01$ ). Electroacupuncture could effectively decrease the number of apoptotic dopaminergic neurons in parkinsonism rats ( $P < 0.05$ ). Conclusion The apoptosis of dopaminergic neurons may be involved in the occurrence of Parkinson's disease.

241- gera: 142981/di/ra

**[A CASE OF ACUPUNCTURE TREATMENT FOR INDEFINITE COMPLAINTS ACCOMPANYING WALLEBERG SYNDROME].** KINUTA AKIRA. **journal of the japan society of acupuncture and moxibustion.** 2005;55(4):73 (chi).

[Objective] For objective investigation of symptomatic changes in indefinite complaints accompanying Wallenberg syndrome, efficacy of acupuncture treatment was investigated following seven acupuncture treatments using charts on indefinite complaints developed by Yasuzo Kurono, the chief of the indefinite Complaint Section in the Japan Society of Acupuncture and Moxibustion, Research Committee. [Design] A case report providing descriptive research [Methods] Single acupuncture was administered by *zuishou* therapy (therapy based on the symptoms), *taikyoku* therapy (basic meridian points for total body adjustment according to the Kurono style) and topical therapy, using 30-mm 16-gauge needles. The charts on indefinite complaints were used for assessment, and the treatment period was 52-days, from May 20 to July 10, 2003 (seven times). [Results] Improvement of the indefinite complaints was observed, and effect assessment using the charts on indefinite complaints showed marked improvement. Improvement of symptoms associating Wallenberg syndrome was also observed. [Conclusions] Efficacy of acupuncture treatment for the indefinite complaints accompanying Wallenberg syndrome was suggested by the improvement of symptoms associated with Wallenberg syndrome. The patient subsequently returned to work, indicated the potential of acupuncture treatment as QOL.

242- gera: 143004/di/ra

**[THE SIGNIFICANCE OF THE SPLEEN FUNCTIONAL SYSTEM (O. LIENALIS, PI) IN THE TREATMENT OF PARKINSON'S DISEASE].** MA YUNJI, WU JITAO. **chinesische medizin.** 2005;20(3):117 (deu).

In this article the authors present their views on the ever increasing incidence of Parkinson's disease, which is assigned to the category in Chinese medicine described as "shaking and trembling" (*chanzhen*). In contrast to the way it is presented in classical works, the disease is described by the

authors of this article as the result of a Qi deficiency in the spleen functional system (depletion of o. lienalis, pi). This deficiency has an influence on both the kidney functional system (o. renalis, shen) and the liver functional system (o. hepaticus, gan) which, in turn, causes blockages of phlegm (pituita, tan) and Xue stases. The article describes the precise mechanisms of the disease, explains how the typical symptoms arise and provides the reasons for the increased incidence of Parkinson's disease. The authors recommend that therapy should first of all concentrate on strengthening the spleen functional system (o. lienalis, pi), transforming the phlegm (pituita, tan), clearing the reticular channels (reticulares, luo) and removing wind (ventus, feng). Taking a case study as an example, the authors demonstrate their approach and indicate the prescription they use. By adopting the approach described, they were able to

243- gera: 143058/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.

244- gera: 143138/di/ra

**ATTUALE SITUAZIONE E PROSPETTIVE DEL TRATTAMENTO SECONDO LA MTC DELLA MALATTIA DI PARKINSON.** HE LINCHENG. **rivista italiana di medicina tradizionale cinese.** 2005;102(4):74 (ita).

Parkinson's disease (PD) is a chronic degenerative disease of the nervous system marked by tremor, muscle rigidity, hypokinesia, abnormal posture, and pathologically, selective loss of dopaminergic neurons in the substantia nigra of the midbrain and obvious decrease of dopamine content in the striatum. It is encountered mostly in the middle-aged and old persons and is one of main causes inducing their deformity. The morbidity of this disease tends to increase with gradual aging of the population. In recent years, TCM treatment of this disease has obtained gratifying achievements. A review follows.

245- gera: 144109/di/ra

**CLINICAL ANALYSIS ON TREATMENT OF PARKINSON'S DISEASE BY ACUPUNCTURE OF THE MAIN POINTS ON THE GOVERNOR VESSEL MERIDIAN.** LI XIAOJUN. **europaean journal of integrated eastern and western medicine.** 2005;13(3):23 (eng).

Parkinson's disease, also called shaking palsy, is a commonly seen degenerative disease of the nervous system in the middle-aged and elderly, clinically characterized mainly by static tremor, bradykinesia and an increase of muscular tension. At present, there is no therapy or radical cure for it. The author treated 30 cases of Parkinson's disease by western medicine combined with acupuncture at points on the Governor Vessel Meridian and control investigation was conducted with satisfactory results as reported in the following.

246- gera: 144882/ra/di

**THE SIGNIFICANCE OF THE SPLEEN FUNCTIONAL SYSTEM (O. LIENALIS, PI) IN THE TREATMENT OF PARKINSON'S DISEASE.** MA

YUNJI, WU JITAO. *chinese medicine*. 2005;21(3):117 (deu).

In this article the authors present their views on the ever increasing incidence of Parkinson's disease, which is assigned to the category in Chinese medicine described as "shaking and trembling" (chanzhen). In contrast to the way it is presented in classical works, the disease is described by the authors of this article as the result of a Qi deficiency in the spleen functional system (depletion of o. lienalis, pixu). This deficiency has an influence on both the kidney functional system (o. renalis, shen) and the liver functional system (o. hepaticus, gan) which, in turn, causes blockages of phlegm (pituita, tan) and Xue stases. The article describes the precise mechanisms of the disease, explains how the typical symptoms arise and provides the reasons for the increased incidence of Parkinson's disease. The authors recommend that therapy should first of all concentrate on strengthening the spleen functional system (o. lienalis, pi), transforming the phlegm (pituita, tan), clearing the reticular channels (reticulares, lu) and removing wind (ventus, feng). Taking a case study as an example, the authors demonstrate their approach and indicate the prescription they use. By adopting the approach described, they were able to

247- gera: 144897/di/ra

**[THE SIGNIFICANCE OF THE SPLEEN FUNCTIONAL SYSTEM (O. LIENALIS, PI) IN THE TREATMENT OF PARKINSON'S DISEASE]**. MA YUNJI, WU JITAO. *chinesische medizin*. 2005;20(3):117 (deu).

In this article the authors present their views on the ever increasing incidence of Parkinson's disease, which is assigned to the category in Chinese medicine described as "shaking and trembling" (chanzhen). In contrast to the way it is presented in classical works, the disease is described by the authors of this article as the result of a Qi deficiency in the spleen functional system (depletion of o. lienalis, pixu). This deficiency has an influence on both the kidney functional system (o. renalis, shen) and the liver functional system (o. hepaticus, gan) which, in turn, causes blockages of phlegm (pituita, tan) and Xue stases. The article describes the precise mechanisms of the disease, explains how the typical symptoms arise and provides the reasons for the increased incidence of Parkinson's disease. The authors recommend that therapy should first of all concentrate on strengthening the spleen functional system (o. lienalis, pi), transforming the phlegm (pituita, tan), clearing the reticular channels (reticulares, lu) and removing wind (ventus, feng). Taking a case study as an example, the authors demonstrate their approach and indicate the prescription they use. Adopting the approach described, they were able to achieve very significant

248- gera: 145245/di/ra

**ATTUALE SITUAZIONE E PROSPETTIVE DEL TRATTAMENTO SECONDO LA MTC DELLA MALATTIA DI PARKINSON**. HE LINCHENG. *rivista italiana di medicina tradizionale cinese*. 2005;102(4):74 (ita).

Summary Parkinson's disease (PD) is a chronic degenerative disease of the nervous system marked by tremor, muscle rigidity hypokinesia, abnormal posture, and pathologically, selective loss of dopaminergic neurons in the substantia nigra of the midbrain and obvious decrease of dopamine content in the striatum. It is encountered mostly in the middle-aged and old persons and is one of the main causes inducing their deformity. The morbidity of this disease tends to increase with gradual aging of the population. In recent years, TCM treatment of this disease has obtained gratifying achievements. A review follows.

249- gera: 145311/di/ra

**CLINICAL ANALYSIS ON TREATMENT OF PARKINSON'S DISEASE BY ACUPUNCTURE OF THE MAIN POINTS ON THE GOVERNOR VESSEL MERIDIAN**. LI XIAOJUN. *European journal of integrated eastern and western medicine*. 2005;3(3): (eng).  
Parkinson's disease, also called shaking palsy, is a commonly seen degenerative disease of the nervous system in middle-aged and elderly, clinically characterized mainly by static tremor, bradykinesia and an increase of muscular tension. At present, there is no therapy or radical cure for it. The author treated 30 cases of Parkinson's disease by western medicine combined with acupuncture at points on the Governor Vessel Meridian and control stimulation was conducted with satisfactory results as reported in the following.

250- gera: 148634/di/re

**EFFECTIVENESS OF TAI CHI FOR PARKINSON'S DISEASE: A CRITICAL REVIEW**. LEE MS, LAM P, ERNST E. *Parkinsonism related disorders*. 2005;mar 26;x (eng).

The objective of this review is to assess the effectiveness of tai chi as a treatment option for Parkinson's disease (PD). We have searched the literature using 21 databases from their inception to January 2008, without language restrictions. We included all types of clinical studies regardless of their design. Their methodological quality was assessed using the modified Jadad score. Of the seven studies included, one randomised clinical trial (RCT) found tai chi to be superior to conventional exercise in terms of the Unified PD Rating Scale (UPDRS) and prevention of falls. Another RCT found no effects of tai chi on locomotor ability compared with qigong. The third RCT failed to show effects of tai chi on the UPDRS and the PD Questionnaires compared with wait list control. The remaining studies were either non-randomised (n=1) or uncontrolled clinical trials (n=3). Collectively these data show that RCTs of the tai chi for PD are feasible but scarce. Most investigations suffer from methodological flaws such as inadequate study design, poor reporting of results, small sample size, and publication without appropriate peer review process. In conclusion, the evidence is insufficient to suggest tai chi is an effective intervention for PD. Further research is required to investigate whether there are specific benefits of tai chi for people with PD, such as its potential effect on balance and on the frequency of falls.

251- gera: 125805/di/ra

**[EFFECTS OF SHUANGGU YITONG NEEDLING METHOD ON PROLIFERATION AND DIFFERENTIATION OF NERVE STEM CELLS IN THE PARKINSON'S DISEASE MODEL RAT]**. WANG YC, MA J, WANG H. *chinese acupuncture and moxibustion*. 2006;26(4):277-82. (chi).

**OBJECTIVE:** To explore the mechanism of acupuncture in treatment of Parkinson's disease. **METHODS:** Fifty Wistar rats were randomly divided into a normal control group, a sham-operation control group, a model group, a Fengfu-Taichong group and a Shuanggu Yitong group. The hemilateral rotation Parkinson's disease model was prepared by micro-injection of 6-hydroxyl-dopamine into the right striatum. Effects of acupuncture at "Fengfu" (GV 16), "Taichong" (LR 3) by Shuanggu Yitong needling method on proliferation and differentiation of nerve stem cells in the Parkinson's disease model rat were compared. Proliferation and number changes of the nerve stem cells in the substantia nigra and the striatum were investigated with immunohistochemical method, and the number of nerve stem cells transforming neurons were observed with immunohistochemical double-labeling method. **RESULTS:** In the two acupuncture groups, the proliferative cells in the

substantia nigra and the striatum of the destroyed side increased significantly ( $P < 0.01$ ), and the number of nerve stem cells and the number of transformed neurons in the destroyed side of the substantia nigra and the striatum increased significantly only in the Shuanggu Yitong group ( $P < 0.01$ ). **CONCLUSION:** Shuanggu Yitong needling method can induce proliferation and differentiation of nerve stem cells in the substantia nigra and the striatum regions in the Parkinson's disease model rat.

252- gera: 125821/di/ra

**[EFFECTS OF HEAD POINT-THROUGH-POINT ELECTROACUPUNCTURE ON SOD AND LPO IN THE PATIENT OF PARKINSON'S DISEASE].** WANG S, CAI YY, SHANG YJ, JIN-RONG L. **chinese acupuncture and moxibustion.** 2006;26(4):240-2. (chi).

**OBJECTIVE:** To observe clinical therapeutic effect of head point-through-point electroacupuncture on Parkinson's disease and the mechanism. **METHODS:** Seventy-six cases of Parkinson's disease were randomly divided into a treatment group ( $n=37$ ) treated with head point-through-point electroacupuncture and oral administration of madopa, and a control group ( $n=39$ ) with only oral administration of madopa. Superoxide dismutase (SOD) and lipids peroxides (LPO) were determined before and after treatment. **RESULTS:** The effective rate was 97.3% in the treatment group and 61.5% in the control group with a very significant difference between the two groups ( $P < 0.01$ ). SOD activity and LPO content were significantly improved after treatment in the treatment group ( $P < 0.01$ ), with a significant difference between the two groups ( $P < 0.01$ ). **CONCLUSION:** Head point-through-point electroacupuncture can improve SOD activity and LPO content in the body so as to cure Parkinson's disease.

253- gera: 141270/nd/re

**EARLY DESCRIPTIONS OF PARKINSON DISEASE IN ANCIENT CHINA.** ZHANG ZX, DONG ZH, ROMAN GC. **arch neurol.** 2006;63(5):782-4 (eng).

254- gera: 141686/di/ra

**[EFFECT OF ELECTROACUPUNCTURE ON THE EXPRESSION OF BDNF AND BDNF MRNA IN PARKINSON'S DISEASE MICE].** TANG YONG, YU SHU-GUANG, CHEN JIN. **acupuncture research.** 2006;31(1):38 (chi\*).

**Objective:** To observe the effect of electroacupuncture (EA) on the expression of brain-derived neurotrophic factor (BDNF) in substantia nigra compacta (SNC) of Parkinson's disease (PD) mice so as to study the synaptic plasticity. **Methods:** Twenty-four male mice (C57BL/6J) were averagedly and randomly divided into normal control, EA, model and model +EA groups. PD model was induced by injection (i. p.) of 1-methyl,4-phenyl- 1, 2, 3, 6 tetrahydropyridine (30 mg/kg). EA (2-100 Hz, 2-4 V, dense-sparse waves) was applied to "Hegu" (LI 4) and "Taichong" (LR 3) for 20 min, once daily. After 21 treatments, the mice were killed for sampling SNC tissue which was then cut into sections for detecting the expression of BDNF and BDNF mRNA by immunohistochemical and in situ hybridization techniques respectively. **Results:** Both immunohistochemical and in situ hybridization assays showed that compared with normal control group, the number of BDNF and BDNF mRNA positive cells and integral optical density (OD) values of model group were significantly lower ( $P < 0.05$ ,  $0.01$ ); compared with model group, the number of BDNF and BDNF mRNA positive cells and integral OD values in model +EA group were significantly higher ( $P < 0.05$ ,  $0.01$ ). No significant differences were found among normal control, EA and model + EA groups in these indexes. **Conclusion:** EA can

inhibit the down-regulation of expression of BDNF and BDNF mRNA of SNC in PD mice which may contribute to its effect in raising the synaptic plasticity of the degenerative dopaminergic neurons.

255- gera: 141763/di/ra

**[EFFECTS OF ELECTROACUPUNCTURE ON BEHAVIORS AND DOPAMINERGIC NEURONS IN THE RAT OF PARKINSON'S DISEASE].** MA J, WANG YC, GAN SY. **chinese acupuncture and moxibustion.** 2006;26(9):655 (chi\*).

**OBJECTIVE:** to explore the possibility of electroacupuncture (ea) for prevention of the injury of dopaminergic neurons in the substantia nigra of the rat with parkinson's disease. **methods:** wistar rats were randomly divided into a normal group, a model group, a sham-operation group and an ea group. 6-oh-da was injected into right substantia nigra of the midbrain to made parkinson's disease rat model with single side substantia nigra injury, and th/tunel method and rotation behavior observation method were used to observe changes of rotation behavior and apoptosis of dopaminergic neurons in the substantia nigra after ea at "taichong" (lr 3) and "fengfu" (gv 16) for 3 d, 7 d and 14 d. **results:** the rotation times/min were same at 3 d, 7 d and 14 d were the basically same in the model group, and at 14 d significantly decreased in the ea group ( $p < 0.05$ ); the rotation starting time at 7 d and 14 d in the model group were significantly longer than those in the ea group ( $p < 0.05$ ); the rotation lasting time at 3 d, 7 d and 14 d in the model group and the ea group were gradually shortened ( $p < 0.01$ , or  $p < 0.05$ ), but at 7 d, 14 d in the model group were significantly longer than those in the ea group ( $p < 0.05$ ); the da neuron apoptosis number in the model group were significantly higher than those in the normal group, with a very significant difference ( $p < 0.01$ ); the apoptosis number in the ea group tended to decrease, at 7 d and 14 d were significantly lower than that in the model group ( $p < 0.05$ ). **conclusion:** electroacupuncture can effectively prevent from injury of dopaminergic neurons in the substantia nigra of the rat with parkinson's disease.

256- gera: 141844/di/ra

**[OBSERVATIONS ON THE EFFICACY OF ACUPUNCTURE PLUS WESTERN DRUG ON REHABILITATION TREATMENT OF PARKINSON'S DISEASE].** YANG DAN-HONG, CHEN HUA — DE, FANG ZHEN. **journal of clinical acupuncture and moxibustion.** 2006;22(6):16 (chi\*).

**Objective:** To observe the therapeutic effect of Acupuncture plus western, medicine on rehabilitation treatment of Parkinson's Disease (PD). **Method** 26 patients with PD (in Hoehn - Yahr IV phase) were selected and randomly equally divided into the Acupuncture plus Medopa treatment group and the Medopa therapy group as a control, to-tally for 4 courses. To observe the score d UPDRS and the symptoms. **Results** The totally effective rate, in the treated group and the control group was 84.6% and 61.5%. The former is obviously better than, the latter ( $P < 0.05$ ). UPDRS scoring in the treated group lowered after 4 courses treatment as compared with that before treatment ( $P < 0.05$ ,  $P < 0.01$ ). UPDRS scoring d the control group was a lifter lower with no significance. The improvement of symptoms in the treated group was better than that in the control group ( $P < 0.05$ ,  $P < 0.01$ ). **Conclusion** Acupuncture plus western medicine can effectively the clinic symptoms of Parkinson's Disease and the

257- gera: 141961/di/ra

**FURTHER DISCUSSION ON THE THREE METHODS FOR STAGE-TREATMENT OF PARKINSON'S**

**DISEASE. ZHAO GUOHUA TREATING. eastwest integration medicine.** 2006;4(2):36 (eng).

Based on repeated clinical practice and scientific research on the three methods for stage-treatment of Parkinson's disease put forward in early year: this essay further discusses the division of the three stages of Parkinson's disease. Early stage people having already had the manifestations of Parkinson's disease, but with shorter duration and mild symptoms, which do not affect their daily life and work and having their modified Hoehn & Yahr grading from grade 1.0 — 1.5. Mid stage: people having the symptom and signs of Parkinson's disease getting worse and affecting their daily life and work, necessary for treatment; and having their modified Hoehn & Yahr grading from grade 2 — 3. Late stage: people having severe clinical symptoms of Parkinson's disease, with the therapeutic effect of Levodopa preparation insufficient for then to maintain their daily life; and having their modified Hoehn & Yahr grading from grade 4 — 5. The three treating methods are: Chinese medical treatment adopted (at the early stage; combined treatment with Chinese and Western medicine at mid stage; and

258- gera: 142266/di/ra

**CLINICAL OBSERVATION ON ACUPUNCTURE TREATMENT OF PARKINSON'S SYNDROME. ZOU YONG. journal of acupuncture and tuina science.**

2006;4(4):211 (eng).

Objective: To explore if the therapeutic effect can be enhanced, the dose of levodopa-like medications can be decreased and the complications can be reduced by acupuncture treatment in the patients with Parkinson's disease (PD) who took levodopa-like medications for a long time. Methods: thirty cases of the patients, most of whom were noticed with the decreased therapeutic effect and drug-induced complications, were treated by puncturing Shuigou (GV 26) and Baihui (GV 20), by reduction of Madopa dose, and the patients' conditions and complications were evaluated six months later. Results: After treatments for six months, the physiological functions were improved and the dose of Madopa was reduced and the total effective rate was 66.7%. Conclusion: After acupuncture treatments in PD patients, the therapeutic effects of levodopa were enhanced, with its dose and

259- gera: 142649/di/ra

**[CLINICAL OBSERVATIONS ON ACUPUNCTURE TREATMENT OF PARKINSON'S DISEASE]. ZHOU Y. shanghai journal of acupuncture and moxibustion.**

2006;25(1):27 (chi\*).

Objective To investigate if acupuncture treatment can improve the curative effect, decrease the dosage of L-Dopa and reduce the complications in Parkinson's disease (PD) patients who have taken L-Dopa-kind medicine-for a long time. Methods Thirty PD patients, in most of whom there were the reduced effect and drug complications, were selected and treated by acupuncture of points Shuigou, Baihui, etc with the dosage of medopa decreased. The patients' conditions and the complications were evaluated 6 months later. Results After 6 months' treatment, the function improved in degree and the dosage of medopa decreased, with a total efficacy rate of 66.7%. Conclusion Acupuncture treatment can improve the curative effect of L-Dopa-kind medicine, decrease the dosage of the

260- gera: 143230/di/ra

**[EFFECTS OF ELECTROACUPUNCTURE ON BEHAVIORS AND DOPAMINERGIC NEURONS IN THE RAT OF PARKINSON'S DISEASE]. MAJUN, WANG YAN-CHUN, GAN SHUI-YONG. chinese acupuncture and moxibustion.** 2006;26(9):655 (chi).

Objective To explore the possibility of electroacupuncture (EA) for prevention of the injury of dopaminergic neurons in the substantia nigra of the rat with Parkinson's disease. Methods Wistar rats were randomly divided into a normal group, a model group, a sham-operation group and an EA group. 6-OH-DA was injected into right substantia nigra of the midbrain to make Parkinson's disease rat model with single side substantia nigra injury, and TH/TUNEL method and rotation behavior observation method were used to observe changes of rotation behavior and apoptosis of dopaminergic neurons in the substantia nigra after EA at "Taichong" (LR 3) and "Fengfu" (GV 16) for 3 d, 7 d and 14 d. Results The rotation times/min were same at 3 d, 7 d and 14 d were the basically same in the model group, and at 14 d significantly decreased in the EA group ( $P < 0.05$ ); the rotation starting time at 7 d and 14 d in the model group were significantly longer than those in the EA group ( $P < 0.05$ ); the rotation lasting time at 3 d, 7 d and 14 d in the model group and the EA group were gradually shortened ( $P < 0.01$ , or  $P < 0.05$ ), but at 7 d, 14 d in the model group were significantly longer than those in the EA group ( $P < 0.05$ ); the DA neuron apoptosis number in the model group were significantly higher than those in the normal group, with a very significant difference ( $P < 0.01$ ); the apoptosis number in the EA group tended to decrease, at 7 d and 14 d were significantly lower than that in the model group ( $P < 0.05$ ). Conclusion Electroacupuncture can effectively prevent from injury of dopaminergic neurons in the substantia nigra of the rat with Parkinson's disease.

261- gera: 143355/di/ra

**[EFFECT OF ELECTROACUPUNCTURE ON THE EXPRESSION OF BDNF AND BDNF MRNA IN PARKINSON'S DISEASE MICE]. TANG YONG, YU SHU-GUANG, CHEN JIN. acupuncture research.**

2006;31(1):38 (chi).

Objective: To observe the effect of electroacupuncture (EA) on the expression of brain-derived neurotrophic factor (BDNF) in substantia nigra compacta (SNC) of Parkinson's disease (PD) mice so as to study the synaptic plasticity. Methods: Twenty-four male mice (C57BL/6J) were averagedly and randomly divided into normal control, EA, model and model +EA groups. PD model was induced by injection (i. p.) of 1-methyl, 4-phenyl- 1, 2, 3, 6 tetrahydropyridine (30 mg/kg). EA (2-100 Hz, 2-4 V, dense-sparse waves) was applied to "Hegu" (LI 4) and "Taichong" (LR 3) for 20 min, once daily. After 21 treatments, the mice were killed for sampling SNC tissue which was then cut into sections for detecting the expression of BDNF and BDNF mRNA by immunohistochemical and in situ hybridization techniques respectively. Results: Both immunohistochemical and in situ hybridization assays showed that compared with normal control group, the number of BDNF and BDNF mRNA positive cells and integral optical density (OD) values of model group were significantly lower ( $P < 0.05, 0.01$ ); compared with model group, the number of BDNF and BDNF mRNA positive cells and integral OD values in model +EA group were significantly higher ( $P < 0.05, 0.01$ ). No significant differences were found among normal control, EA and model + EA groups in these indexes. Conclusion: EA can inhibit the down-regulation of expression of BDNF and BDNF mRNA of SNC in PD mice which, maybe contribute to its effect in raising the synaptic plasticity of the degenerative dopaminergic neurons.

262- gera: 143427/di/ra

**CLINICAL OBSERVATION ON ACUPUNCTURE TREATMENT OF PARKINSON'S SYNDROME. ZOU YONG. journal of acupuncture and tuina science.**

2006;4(4):211 (eng).



Objective: To explore if the therapeutic effect can be enhanced, the dose of levodopa-like medications can be decreased and the complications can be reduced by acupuncture treatment in the patients with Parkinson's disease (PD) who took levodopa-like medications for a long time. Methods: thirty cases of the patients, most of whom were noticed with the decreased therapeutic effect and drug-induced complications, were treated by puncturing Shuigou (GV 26) and Baihui (GV 20), by reduction of Madopa dose, and the patients' conditions and complications were evaluated six months later. Results: After treatments for six months, the physiological functions were improved and the dose of Madopa was reduced and the total effective rate was 66.7%. Conclusion: After acupuncture treatments in PD patients, the therapeutic effects of levodopa were enhanced, with its dose and

263- gera: 143538/di/ra

**OPEN-LABEL TRIAL REGARDING THE USE OF ACUPUNCTURE AND YIN TUI NA IN PARKINSON'S DISEASE OUTPATIENTS: A PILOT STUDY ON EFFICACY, TOLERABILITY, AND QUALITY OF LIFE.** ENG ML, LYONS KE, GREENE MS, PAHWA R. *Journal of alternative and complementary medicine.* 2006;12(4):395-9. (eng).

OBJECTIVES: This study evaluates the effects of sequential tui na massage, acupuncture, and instrument-delivered qigong for patients with Parkinson disease (PD) over a 6-month period. DESIGN: Patients received weekly treatments, which included tui na massage prior to acupuncture followed by instrument-delivered qigong. Each patient was assessed at baseline and at 6 months. SETTING: The setting was an outpatient research/academic clinic for patients with PD and nonacademic acupuncture clinic. SUBJECTS: Twenty-five (25) patients with idiopathic PD were the subjects. OUTCOME MEASURES: Before and after treatment patients were evaluated with the Unified Parkinson Disease Rating Scale (UPDRS), Hoehn and Yahr Staging (H&Y), Schwab and England Activities of Daily Living (S & E), Beck Depression Inventory (BDI), Parkinson's Disease Questionnaire (PDQ-39) quality of life assessment, and patient global assessments. RESULTS: There were no significant improvements in treatment measures; however, there was a 2.4-point worsening in UPDRS motor scores (24.0 versus 26.4,  $p = 0.018$ ). There was a 16% improvement in the PDQ-39 total score (23.2 versus 19.6,  $p = 0.044$ ) and a 29% improvement in the BDI (9.6 versus 6.8,  $p = 0.006$ ). Sixteen (16) patients reported moderate to marked improvement. There were no adverse effects. CONCLUSIONS: Acupuncture is safe and well tolerated in patients with PD. Most patients reported subjective improvement. The BDI and PDQ-39 total score, measuring depression and quality of life, demonstrated some improvement, but UPDRS motor scores worsened.

264- gera: 143673/di/ra

**EFFECT OF ELECTROACUPUNCTURE ON THE EXPRESSION OF BDNF AND BDNF MRNA IN PARKINSON'S DISEASE MICE.** TANG YONG, YU SHU-GUANG, CHEN JIN. *acupuncture research.* 2006;31(1):38 (chi).

Objective: To observe the effect of electroacupuncture (EA) on the expression of brain-derived neurotrophic factor (BDNF) in substantia nigra compacta (SNc) of Parkinson's disease (PD) mice so as to study the synaptic plasticity. Methods: Twenty-four male mice (C57BL/6J) were averagely and randomly divided into normal control, EA, model and model +EA groups. PD model was induced by injection (i. p.) of 1-methyl, 4-phenyl-1, 2, 3, 6 tetrahydropyridine (30 mg/kg). EA (2-100 Hz, 2-4 V, dense-

sparse waves) was applied to "Hegu" (LI 4) and "Taichong" (LR 3) for 20 min, once daily. After 21 treatments, the mice were killed for sampling SNc tissue which was then cut into sections for detecting the expression of BDNF and BDNF mRNA by immunohistochemical and in situ hybridization techniques respectively. Results: Both immunohistochemical and in situ hybridization assays showed that compared with normal control group, the number of BDNF and BDNF mRNA positive cells and integral optical density (OD) values of model group were significantly lower ( $P < 0.05, 0.01$ ); compared with model group, the number of BDNF and BDNF mRNA positive cells and integral OD values in model +EA group were significantly higher ( $P < 0.05, 0.01$ ). No significant differences were found among normal control, EA and model + EA groups in these indexes. Conclusion: EA can inhibit the down-regulation of expression of BDNF and BDNF mRNA of SNc in PD mice which, maybe contribute to its effect in raising the synaptic plasticity of the degenerative dopaminergic neurons.

265- gera: 143858/nd/re

**TRADITIONAL CHINESE MEDICINE FOR PARKINSON'S DISEASE: A REVIEW OF CHINESE LITERATURE.** LI Q, ZHAO D, BEZARD E. *behav pharmacol.* 2006;17(5-6):403-10 (eng).

Occidental medicine has a given definition for Parkinson's disease and knowledge of Parkinson's disease pathophysiology has led to development of its therapeutic management. Parkinson's disease, however, is likely to have always existed in different parts of the world. Description and management of this neurodegenerative condition could be found in ancient medical systems. Here, we introduce the philosophical concepts of traditional Chinese medicine and the description, classification and understanding of parkinsonian symptoms in traditional Chinese medicine. We have conducted an in-depth review of Chinese literature reporting anti-parkinsonian and anti-dyskinetic efficacy of more than 60 traditional medicines in Parkinson's disease patients. A number of issues, however, plague the relevance of these reports and call for a scientific re-evaluation of these therapies in preclinical models of Parkinson's disease before proposing traditional Chinese medicine-based symptomatic

266- gera: 144355/ra

**IS IT FEASIBLE TO RUN A SUBJECT- AND ASSESSOR-BLIND RCT TO EVALUATE THE EFFECT OF INTRAMUSCULAR ACUPUNCTURE FOR PARKINSON'S DISEASE?.** Park J. *focus on alternative and complementary therapies.* 2006;11(1):40 (eng).

résumé et commentaire de : Cristian A, Katz M, Cutrone E, Walker RH. Evaluation of acupuncture in the treatment of Parkinson's disease: a double-blind pilot study. *Mov Disord* 2005; 20:

267- gera: 144806/di/ra

**[EFFECTS OF ELECTROACUPUNCTURE ON BEHAVIORS AND DOPAMINERGIC NEURONS IN THE RAT OF PARKINSON'S DISEASE].** MA J, WANG YC, GAN SY. *chinese acupuncture and moxibustion.* 2006;26(9):655 (eng).

OBJECTIVE: To explore the possibility of electroacupuncture (EA) for prevention of the injury of dopaminergic neurons in the substantia nigra of the rat with Parkinson's disease. METHODS: Wistar rats were randomly divided into a normal group, a model group, a sham-operation group and an EA group. 6-OH-DA was injected into right substantia nigra of the midbrain to make Parkinson's disease rat model with single side substantia nigra injury, and TH/TUNEL method and rotation behavior

observation method were used to observe changes of rotation behavior and apoptosis of dopaminergic neurons in the substantia nigra after EA at "Taichong" (LR 3) and "Fengfu" (GV 16) for 3 d, 7 d and 14 d. **RESULTS:** The rotation times/min were same at 3 d, 7 d and 14 d were the basically same in the model group, and at 14 d significantly decreased in the EA group ( $P<0.05$ ); the rotation starting time at 7 d and 14 d in the model group were significantly longer than those in the EA group ( $P<0.05$ ); the rotation lasting time at 3 d, 7 d and 14 d in the model group and the EA group were gradually shortened ( $P<0.01$ , or  $P<0.05$ ), but at 7 d, 14 d in the model group were significantly longer than those in the EA group ( $P<0.05$ ); the DA neuron apoptosis number in the model group were significantly higher than those in the normal group, with a very significant difference ( $P<0.01$ ); the apoptosis number in the EA group tended to decrease, at 7 d and 14 d were significantly lower than that in the model group ( $P<0.05$ ). **CONCLUSION:** Electroacupuncture can effectively prevent from injury of dopaminergic neurons in the substantia nigra of the rat with Parkinson's disease.

268- gera: 145546/di/ra

**[THERAPEUTIC EFFECT OF SCALP ELECTROACUPUNCTURE ON PARKINSON DISEASE].** JIANG XM, HUANG Y, ZHUO Y, GAO YP. *nan fang yi ke da xue xue bao.* 2006;26(1):114-6 (chi).

**OBJECTIVE:** To observe the therapeutic effect of scalp electroacupuncture on Parkinson disease (PD) of grade 1.5-3.0 on Hoehn-Yahr scale. **METHODS:** Thirty patients with Parkinson disease were randomized equally into the treatment group and control group. Patients in the treatment group were treated by scalp electroacupuncture at the contralateral points of MS6, MS4, MS8, MS9 and MS14 in cases of unilateral lesions or at the bilateral points for bilateral lesions, with also medication with Madopar. The patients in the control group were given Madopar only. The scores of Webster scale and the motor function of United Parkinson's Disease Rating Scale (UPDRS) were used to for assessment before and after the therapeutic course (6 weeks). **RESULTS:** Tremor, rigidity and bradykinesia were obviously improved in both the groups ( $P<0.05$ ). The difference in the score of Webster scale was not significant between the two groups ( $P>0.05$ ), but the treatment group showed greater improvement in motor functions than the control group ( $P<0.05$ ). **CONCLUSION:** Scalp electroacupuncture is effective and safe for

269- gera: 144610/di/ra

**[PET STUDY OF EFFECTS OF COMBINATION OF DIFFERENT POINTS ON GLUCOSE METABOLISM IN THE PATIENT OF CEREBRAL INFARCTION].** ZHANG XY, GAO S, ZHAO JG, CAI L, PANG JP, LU MX. *chinese acupuncture and moxibustion.* 2007;27(1):26 (eng).

**OBJECTIVE:** To observe effects of combination of different points on glucose metabolism in the patient of cerebral infarction. **METHODS:** Neiguan (PC 6), Shuigou (GV 26), Fengchi (GB 20), Sanyinjiao (SP 6), Yinlingquan (SP 9), Taichong (LR 3) were selected for the Xingnao Kaiqiao group ( $n=7$ ), and Hegu (LI 4), Quchi (LI 11), Zusanli (ST 36), Yanglingquan (GB 34) and Xuanzhong (GB 39) for the routine acupuncture group ( $n=5$ ). PET-CT was used to observe the local cerebral glucose metabolism. **RESULTS:** The cerebral regions activated in the the Xingnao Kaiqiao group included infarction center, gyrus temporalis superior, thalamus, gyrus temporalis inferior, gyrus rectus, insula, lateral occipital lobe, parietal lobe and cerebellum, and in the routine acupuncture group included gyrus frontalis inferior, caudate nucleus, cingulate gyrus, hippocampus, precuneus and parietal lobe. **CONCLUSION:** PET is very suitable for

exploring acupuncture mechanisms in treatment of cerebral infarction, and further shows the specificity of acupoints-brain functional region.

270- gera: 145403/di/ra

**CROSS-CULTURAL EVALUATION OF THE SHORT FORM 8-ITEM PARKINSON'S DISEASE QUESTIONNAIRE (PDQ-8): RESULTS FROM AMERICA, CANADA, JAPAN, ITALY AND SPAIN.** JENKINSON C, FITZPATRICK R. *parkinsonism relat disord.* 2007;13(1):22-8 (eng).

**OBJECTIVE:** The purpose of this study was to evaluate the psychometric properties of a short form health survey, the Parkinson's Disease Questionnaire (PDQ-8), cross-culturally, by comparing results gained from this instrument to the original longer form instrument-the PDQ-39. **DESIGN:** Data are from the Global Parkinson's Disease Survey. **OUTCOMES:** The 8-item Parkinson's Disease Questionnaire Single Index Score (PDQ-8-SI). In this study, we evaluate response rate, scaling assumptions, and data quality, in terms of comparability of results with the parent form from which the PDQ-8 was derived, of the instrument in the USA, Canada, Spain, Italy and Japan. **RESULTS:** The PDQ-8 was found to produce results that were very similar to the parent form across all five countries. However, it should be borne in mind that the PDQ-8 was nested within the PDQ-39, and results may be influenced by this. **CONCLUSIONS:** Results suggest that the PDQ-8 is a valid and reliable measure that can be appropriately

271- gera: 145561/di/re

**ACUPUNCTURE FOR PSYCHOGENIC MOVEMENT DISORDERS: TREATMENT OR DIAGNOSTIC TOOL?.** VAN NUENEN BF, WOHLGEMUTH M, WONG CHUNG RE, ABDO WF, BLOEM BR. *mov disord.* 2007;may 7:x (eng).

Psychogenic movement disorders are common in everyday neurological practice, comprising up to 25% of the patient population in movement disorders clinics. The diagnosis is often difficult, as is illustrated by the high proportion of patients with an organic neurological disease whose movement disorder is misdiagnosed as psychogenic. Here, we describe a woman with a longstanding and treatment-resistant psychogenic movement disorder that responded dramatically to acupuncture. The diagnostic and therapeutic merits of acupuncture are

272- gera: 146884/di/re

**TAI CHI-BASED EXERCISE FOR OLDER ADULTS WITH PARKINSON'S DISEASE: A PILOT-PROGRAM EVALUATION.** LI F, HARMER P, FISHER KJ, XU J, FITZGERALD K, VONGJATURAPAT N. *journal of aging and physical activity.* 2007;15(2):139-51 (eng).

The primary objective of this study was to provide preliminary evaluation of the feasibility, safety, and efficacy of a newly developed Tai Chi-based exercise program for older adults with Parkinson's disease (PD). Using a one-group pretest-posttest design, 17 community-dwelling adults (mean age 71.51 years) with mild to moderate idiopathic PD (Stage I, II, or III on the Hoehn and Yahr scale) and stable medication use completed a 5-day, 90-min/day Tai Chi exercise-evaluation program. Outcome measures included face-to-face exit interviews on appropriateness and safety and physical performance (i.e., 50-ft speed walk, up-and-go, functional reach). At the end of this brief intervention, exercise adherence was 100% and the program was shown to be safe. Exit interviews indicated that the program was well received by all participants with respect to program appropriateness, participant satisfaction and enjoyment, and intentions to continue. Furthermore, a significant pretest-to-

posttest change was observed at the end of the 5-day program in all three physical-performance measures ( $p < .05$ ). The results of this pilot evaluation suggest that Tai Chi is an appropriate physical activity for older adults with PD and might also be useful as a therapeutic exercise modality for improving and maintaining physical function. These preliminary findings warrant further investigation.

273- gera: 147022/nd/ra

**CHINESE HERBS AND HERBAL EXTRACTS FOR NEUROPROTECTION OF DOPAMINERGIC NEURONS AND POTENTIAL THERAPEUTIC TREATMENT OF PARKINSON'S DISEASE.** CHEN LW, WANG YQ, WEI LC, SHI M, CHAN YS. **cns neurolog disorder drug targets.** 2007;6(4):273-281 (eng).

Parkinson's disease (PD) is a common and debilitating degenerative disease resulting from massive degenerative loss of dopamine neurons, particularly in the substantia nigra. The most classic therapy for PD is levodopa administration, but the efficacy of levodopa treatment declines as the disease progresses. The neuroprotective strategies to rescue nigral dopamine neurons from progressive death are currently being explored, and among them, the Chinese herbs and herbal extracts have shown potential clinical benefit in attenuating the progression of PD in human beings. Growing studies have indicated that a range of Chinese herbs or herbal extracts such as green tea polyphenols or catechins, panax ginseng and ginsenoside, ginkgo biloba and EGb 761, polygonum, triptolide from tripterygium wilfordii hook, polysaccharides from the flowers of nerium indicum, oil from ganoderma lucidum spores, huperzine and stapholidine are able to attenuate degeneration of dopamine neurons and symptoms caused by the neurotoxins 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (MPTP) and 6-hydroxydopamine (6-OHDA) in vitro and in vivo conditions. In addition, accumulating data have suggested that Chinese herbs or herbal extracts may promote neuronal survival and neurite growth, and facilitate functional recovery of brain injuries by invoking distinct mechanisms that are related to their neuroprotective roles as the antioxidants, dopamine transporter inhibitor, monoamine oxidase inhibitor, free radical scavengers, chelators of harmful metal ions, modulating cell survival genes and signaling, anti-apoptosis activity, and even improving brain blood circulation. New pharmaceutical strategies against PD will hopefully be discovered by understanding the various active entities and valuable combinations that contribute to the biological effects of Chinese herbs and

274- gera: 147090/di/ra

**EFFECTS OF SCALP CATGUT EMBEDDING ON SOD, NO, MDA IN THE RAT WITH PARKINSON'S DISEASE.** XIE XIAO-XIA, KOU SUO-TANG, PU ZHI-HONG, ET AL. **chinese acupuncture and moxibustion.** 2007;27(10):753 (chi).

Objective To explore the mechanism of scalp catgut embedding for treatment of Parkinson's disease. Methods Parkinson's disease model rats were prepared, and randomly divided into a model group, scalp acupuncture group, medication group, with a control group set up. The scalp acupuncture group were treated with catgut embedding at "the chorea-trembling conrouted area" lateral to "Baihui" (GV 20) and the medication group with intragastric perfusion of L-dopa suspension. After treatment for 30 days, behavior indexes were investigated and malondialdehyde (MDA) and nitric oxide (NO) contents and superoxide dismutase (SOD) activity in the brain were detected. Results MDA content in the brain of the model rats were significantly decreased ( $P < 0.01$ ), NO level significantly increased ( $P < 0.05$ ), by scalp catgut embedding, with no significant change of SOD

activity ( $P > 0.05$ ); and the behavior indexes and tissue and form of the brain had significant improvement. Conclusion Scalp catgut embedding has regulative action on anti-oxidant enzyme system in the Parkinson's disease rats, has significant

275- gera: 147540/di/ra

**[PROTECTIVE EFFECT OF BAICALIN ON MOUSE WITH PARKINSON'S DISEASE INDUCED BY MPTP].** CHEN X, ZHANG N, ZOU HY. **chinese journal of integrated traditional and western medicine.** 2007;27(11):1010 (chi).

OBJECTIVE: To observe the protective effect of baicalin on mouse with Parkinson's disease induced by 1-methyl-4-phenyl-1, 2, 3, 6-tetrahydropyridine (MPTP). METHODS: The mouse model of Parkinson's disease was established by intraperitoneal injection of MPTP at the daily dose of 30 mg/kg for 3 days to the aged (ten months old) C57BL mouse. And to the model mice in the tested group, baicalin (100 mg/kg) was given via gastric perfusion per day for 15 days. The motor function of limbs in mice was tested through hanging and swimming tests; the dopamine content of striatum was measured by HPLC; and the contents of malondialdehyde (MDA), glutathione (GSH) and glutathione peroxidase (GSH-Px) in the brain tissue were measured by spectrophotography. Besides, the freezing section of mouse brain was made through immunohistochemical stain with tyrosine hydroxylase (TH) to determine the condition of dopaminergic neuron damage in mesencephalon. RESULTS: (1) The decreased score in the hanging test and swimming test, the reduced DA contents of striatum and lessening of TH positive neurons in substantial nigra illustrated the model of Parkinson's disease was successfully established. (2) Medication of baicalin could prevent the loss of TH positive neurons in substantial nigra and the decrease of dopamine content of striatum in Parkinson mouse, and significantly raise the content of GSH in the brain, but MPTP induced motor dysfunction in model mouse was not significantly improved by a short-time medication. CONCLUSION: The preventive medication of baicalin shows a protective effect on C57 BL mouse with Parkinson's disease induced by MPTP.

276- gera: 147601/di/ra

**DISCUSSION ON THE INFLUENCING FACTS OF ACUPUNCTURE TREATING INSOMNIA.** SU QIU-JU. **journal of clinical acupuncture and moxibustion.** 2007;23(10):51 (chi).

277- gera: 147913/di/ra

**EFFECTS OF ELECTRO-SCALP ACUPUNCTURE ON CEREBRAL DOPAMINE TRANSPORTER IN PATIENTS WITH PARKINSON'S DISEASE (ABSTRACT).** HUANG YONG ET AL. **journal of alternative and complementary medicine.** 2007;13(8):894 (eng).

278- gera: 152038/di/ra

**EFFECTIVE POINTS TO TREAT PARKINSON'S DISEASE AND THE POSSIBLE MECHANISM.** YU X. **international journal of clinical acupuncture.** 2007;16(1):43 (eng).

279- gera: 148713/di/ra

**[PROTECTIVE EFFECTS OF CISTANCHE TOTAL GLYCOSIDES ON DOPAMINERGIC NEURON IN SUBSTANTIA NIGRA OF MODEL MICE OF PARKINSON'S DISEASE].** LI WEN-WEI, YANG RU, CAI DING-FANG, ET AL. **chinese journal of integrated traditional and western medicine.** 2008;28(3):248 (chi).  
Objective To investigate the protective effects of cistanche

total glycosides ( CTG) on dopaminergic neuron in substantia nigra (SN) of model mice of Parkinson's disease (PD) . Methods Experimental mice were randomly divided into 5 groups, the normal control group, the model group, the high (400 mg/kg) , moderate (200 mg/kg) and low (100 mg/kg) dose CTG groups. Mouse model of chronic PD was induced by peritoneal injection of MPTP (1-methyl-4-phenyl-1 , 2 , 3 , 6-tetrahydropyridine) 30 mg/kg for 5 successive days. Climbing test was used to estimate the neurobehavior of mice on the 7th and 14th day (D7 and D14) after initiating MPTP injection ; meantime , quantitative immunohistochemistry was conducted to detect the number of dopaminergic neuron in SN and expression of tyrosine hydroxylase (TH) in striatum. Results The average time of climbing in the high dose CTG group on D7 and D14 was significantly shorter than that in the model group ( $P < 0. 01$ ) . The mean optic density (OD) of TH in striatum was higher in the three CTG groups than that in the model group on D7 ( $P < 0. 01$ ) ; but on D14 , significance only showed in the high and moderate dose CTG groups ( $P < 0. 01$ ) . Moreover, the MPTP induced decrease of TH positive neuron could be antagonized by CTG , but significant difference only showed between the high dose CTG group and the model group at the two time points of observation ( $P < 0. 05$ ) . Conclusion CTG could improve the neurobehavior of PD model mice significantly, and inhibit the decrease of nigral dopaminergic neurons and TH expression in striatum.

280- gera: 148761/di/re

**THERAPEUTIC STRATEGIES FOR PARKINSON'S DISEASE: THE ANCIENT MEETS THE FUTURE-TRADITIONAL CHINESE HERBAL MEDICINE, ELECTROACUPUNCTURE, GENE THERAPY AND STEM CELLS.** WANG X, LIANG XB, LI FQ, ZHOU HF, LIU XY, WANG JJ, WANG XM. *neurochem res.* 2008;apr 11:x (eng).

In China, it has been estimated that there are more than 2.0 million people suffering from Parkinson's disease, which is currently becoming one of the most common chronic neurodegenerative disorders during recent years. For many years, scientists have struggled to find new therapeutic approaches for this disease. Since 1994, our research group led by Drs. Ji-Sheng Han and Xiao-Min Wang of Neuroscience Research Institute, Peking University has developed several prospective treatment strategies for the disease. These studies cover the traditional Chinese medicine-herbal formula or acupuncture, and modern technologies such as gene therapy or stem cell replacement therapy, and have achieved some original results. It hopes that these data may be beneficial for the research development and for the future clinical utility for treatment of Parkinson's disease.

281- gera: 148847/di/ra

**FURTHER DISCUSSION ON THE THREE METHODS FOR THE STAGE-TREATMENT OF PARKINSON'S DISEASE.** ZHAO G. *journal of traditional chinese medicine.* 2008;28(1):39 (eng).

Based on the long-term clinical practice and scientific researches on the three methods for the stage-treatment of Parkinson's disease put forward by the author in the early years, this essay further discusses the division of the three stages of Parkinson's disease. Early stage: Appearance of the early symptoms and signs of Parkinson's disease, but short in duration and mild in severity, which do not affect the social communications, daily life and work of the patient; and their modified Hoehn & Yahr grading is 1.0-1.5. Mid stage: With the symptoms and signs of Parkinson's disease getting worse and affecting the social communications, daily life and work of the patient, those who have their modified Hoehn & Yahr

grading 2-3 need medical treatment. Late stage: The patients have severe clinical symptoms of Parkinson's disease, and Levodopa preparation is insufficient for them to maintain their daily life; and their modified Hoehn & Yahr grading is 4-5. The three treating methods are: TCM medical treatment adopted at the early stage; the combined treatment of Chinese and western medicine at the mid stage; and

282- gera: 149208/di/ra

**FURTHER DISCUSSION ON THE THREE METHODS FOR THE STAGE-TREATMENT OF PARKINSON'S DISEASE 1 T-R C.** ZHAO GUOHUA. *journal of traditional chinese medicine.* 2008;28(1): (eng).

283- gera: 149866/di/re

**EFFECTIVENESS OF ACUPUNCTURE FOR PARKINSON'S DISEASE: A SYSTEMATIC REVIEW.** LEE MS, SHIN BC, KONG JC, ERNST E. *mov disord.* 2008;jul 11:x (eng).

The objective of this review is to assess the clinical evidence for or against acupuncture as a treatment for Parkinson's disease (PD). We searched the literature using 17 databases from their inception to September 2007 (searched again 3rd January 2008), without language restrictions. We included all randomized clinical trials (RCTs) regardless of their design. Methodological quality was assessed using the Jadad score. Eleven RCTs met all inclusion criteria. Three RCTs assessed the effectiveness of acupuncture on Unified Parkinson's Disease Rating Scale (UPDRS) compared with placebo acupuncture. A meta-analysis of these studies showed no significant effect ( $n = 96$ , WMD, 5.7; 95% CI -2.8 to 14.2,  $P = 0.19$ , heterogeneity:  $\tau(2) = 0$ ,  $\chi(2) = 0.97$ ,  $P = 0.62$ ,  $I(2) = 0\%$ ). Another six RCTs compared acupuncture plus conventional drugs on improvement of symptoms of PD with drugs only. A meta-analysis of two of these studies suggested a positive effect of scalp acupuncture ( $n = 106$ , RR, 1.46, 95% CI = 1.15 to 1.87,  $P = 0.002$ ; heterogeneity:  $\tau(2) = 0.00$ ,  $\chi(2) = 1.14$ ,  $P = 0.29$ ,  $I(2) = 12\%$ ). Two further RCTs tested acupuncture versus no treatment. The meta-analysis of these studies also suggested beneficial effects of acupuncture. The results of the latter two types of RCTs fail to adequately control for nonspecific effects. In conclusion, the evidence for the effectiveness of acupuncture for treating PD is not convincing. The number and quality of trials as well as their total sample size are too low to draw any firm conclusion. Further rigorous trials are warranted. (c) 2008 Movement Disorder Society.

284- gera: 149982/di/ra

**EFFICACY AND SAFETY OF ACUPUNCTURE FOR IDIOPATHIC PARKINSON'S DISEASE: A SYSTEMATIC REVIEW.** YUEN CHI LAM, WAN FUNG KUM, SIVA SUNDARA KUMAR DURAIRAJAN, JIA HONG LU, SUI CHEUNG MAN, MIN XU, XIAO FEI ZHANG, XIAN ZHANG HUANG, MIN LI. *journal of alternative and complementary medicine.* 2008;14(6):663 (eng).

Objectives: To assess the efficacy and safety of acupuncture therapy (monotherapy or adjuvant therapy), compared with placebo, conventional interventions, or no treatment in treating patients with idiopathic Parkinson's disease (IPD). Data sources: International electronic database: (1) The Cochrane Controlled Trials Register, (2) Academic Search Premier, (3) ACP Medicine, Alternative Medicine, (4) CINAHL, (5) EBM Reviews, (6) EMBASE, (7) MEDLINE, (8) OLD MEDLINE, (9) ProQuest Medical Library. Chinese electronic databases searched included: (1) VIP, (2) CJN, (3) CBM disk, (4) China Medical Academic Conference. Hand searching was conducted on all appropriate journals. Reference lists of relevant trials and reviews were also

searched to identify additional studies. Selection criteria: All randomized controlled trials (RCTs) of any duration comparing monotherapy and adjuvant acupuncture therapy with placebo or no intervention were included. Data collection and analysis: Data were abstracted independently by Y. C. Lam and S. C. Man onto standardized forms, and disagreements were resolved by discussion. Main results: Ten (10) trials were included, each using a different set of acupoints and manipulation of needles. None of them reported the concealment of allocation. Only two mentioned the number of dropouts. Two (2) used a nonblind method while others did not mention their blinding methods. Nine (9) studies claimed a statistically significant positive effect from acupuncture as compared with their control; only one indicated that there were no statistically significant differences for all variables measured. Only 2 studies described details about adverse events. Conclusions: There is evidence indicating the potential effectiveness of acupuncture for treating IPD. The results were limited by the methodological flaws, unknowns in concealment of allocation, number of dropouts, and blinding methods in the studies. Large, well- designed, placebo-controlled RCTs with rigorous methods of randomization and adequately concealed allocation,

285- gera: 150120/nd/ra

**DOPAMINE TRANSPORTER INHIBITORY AND ANTIPARKINSONIAN EFFECT OF COMMON FLOWERING QUINCE EXTRACT.** ZHAO G, JIANG ZH, ZHENG XW, ZANG SY, GUO LH. *pharmacol biochem behav.* 2008;90(3):363-71 (eng).

Common flowering quince (FQ) is the fruit of *Chaenomeles speciosa* (Sweet) Nakai. FQ-containing cocktails have been applied to the treatment of neuralgia, migraine, and depression in traditional Chinese medicine. The present study assessed whether FQ is effective in dopamine transporter (DAT) regulation and antiparkinsonism by utilizing in vitro and in vivo assays, respectively. FQ at concentrations of 1-1000 microg/ml concentration- dependently inhibited dopamine uptake by Chinese hamster ovary (CHO) cells stably expressing DAT (D8 cells) and by synaptosomes. FQ had a slight inhibitory action on norepinephrine uptake by CHO cells expressing the norepinephrine transporter and no inhibitory effect on gamma-aminobutyric acid (GABA) uptake by CHO cells expressing GABA transporter-1 or serotonin uptake by the serotonin transporter. A viability assay showed that FQ mitigated 1-methyl-4-phenylpyridinium-induced toxicity in D8 cells. Furthermore, in behavioral studies, FQ alleviated rotational behavior in 6-hydroxydopamine-treated rats and improved deficits in endurance performance in 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (MPTP)-treated mice. Furthermore, immunohistochemistry revealed that FQ markedly reduced the loss of tyrosine hydroxylase-positive neurons in the substantia nigra in MPTP-treated mice. In summary, FQ is a selective, potent DAT inhibitor and has antiparkinsonian-like effects that are mediated possibly by DAT suppression. FQ has the potential to be further developed for Parkinson's disease treatment.

286- gera: 150278/di/ra

**TAI CHI CHUAN IN THE MANAGEMENT OF PARKINSON'S DISEASE AND ALZHEIMER'S DISEASE.** KLEIN PJ. *med sport sci.* 2008;52:173-81 (eng).

BACKGROUND: Parkinson's disease (PD) and Alzheimer's disease (ALZ) represent later-life onset neurodegenerative disorders that gradually rob those afflicted of their quality of life. PURPOSE: This chapter offers practice-based recommendations on how instruction and practice of Tai Chi Chuan (TCC) can be adapted for individuals with PD and

those with ALZ. RESEARCH EVIDENCE: Practice of TCC is widely advocated as an exercise option in PD; however, little validating research exists. Even less is known about feasibility of applications of TCC for individuals with ALZ. CLINICAL IMPRESSIONS: The slow, rhythmic pace of functionally based exercises, internal organ stimulation, flexibility maintenance, balance-training effects, and general health benefits of TCC and Tai Chi-like exercise practice have clinical relevance for both conditions. Falls prevention, tremor reduction and motor control may be of most importance in management of PD. Behavioral and general health benefits as well as slowing of functional and cognitive decline are considerations with ALZ.

RECOMMENDATIONS: Strategies of exercise adaptation include use of Tai Chi-like exercise for individuals with ALZ and those in middle or late stages of PD as well as providing instructional resources and training for caregivers and exercise aides to facilitate practice as a part of daily life.

287- gera: 150853/di/ra

**[OBSERVATION ON THERAPEUTIC EFFECT OF ACUPUNCTURE COMBINED WITH MEDICINE ON PARKINSON DISEASE].** CHANG XH, ZHANG LZ, LI YJ. *chinese acupuncture and moxibustion.* 2008;28(9):645 (eng).

OBJECTIVE: To observe therapeutic effect of acupuncture on Parkinson disease (PD). METHODS: Sixty cases of PD were randomly divided into 2 groups, an acupuncture plus medication group and a medication group, 30 cases in each group. The acupuncture plus medication group were treated with acupuncture at Shenting (GV 24), Baihui (GV 20), Sishencong (EX-HN 1), etc. and oral administration of Madopa, and the medication group only with Madopa. Their therapeutic effect and scores of Parkinson disease function rating scale (modified UPDRS) were compared. RESULTS: The total improvement rate of 80.0% in the acupuncture plus medication group was significantly higher than 60.0% in the medication group ( $P < 0.05$ ); the decrease of cumulative score of UPDRS in the acupuncture plus medication group was better than that in the medication group ( $P < 0.05$ ). CONCLUSION:

288- gera: 150894/di/ra

**CLINICAL EXPERIENCE OF ACUPUNCTURE TREATING PARKINSONISM BY PROFESSOR CHENG WEIPING.** GONG YU HUA, CHI YAN RU, CHENG WEIR PING. *journal of clinical acupuncture and moxibustion.* 2008;24(9):54 (chi).

289- gera: 150993/di/re

**PROTEOMIC ANALYSIS OF THE NEUROPROTECTIVE MECHANISMS OF ACUPUNCTURE TREATMENT IN A PARKINSON'S DISEASE MOUSE MODEL.** JEON S, KIM YJ, KIM ST, MOON W, CHAE Y, KANG M, CHUNG MY, LEE H, HONG MS, CHUNG JH, JOH TH, LEE H, PARK HJ. *proteomics.* 2008;oct 22:x (eng).

Acupuncture is frequently used as an alternative therapy for Parkinson's disease (PD), and it attenuates dopaminergic (DA) neurodegeneration in the substantia nigra (SN) in PD animal models. Using proteomic analysis, we investigated whether acupuncture alters protein expression in the SN to favor attenuation of neuronal degeneration. In C57BL/6 mice treated with 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (MPTP, 30 mg/kg/day), intraperitoneal (i.p.) for 5 days, 2 or 100 Hz electroacupuncture (EA) was applied at the effective and specific acupoint, GB34, once a day for 12 consecutive days from the first MPTP treatment. Both treatments in MPTP mice led to restoration of behavioral impairment and rescued tyrosine hydroxylase (TH)-positive DA

neurodegeneration. Using peptide fingerprinting MS, we identified changes in 22 proteins in the SN following MPTP treatment, and nine of these proteins were normalized by EA. They were involved in cell death regulation, inflammation, or restoration from damage. The levels of cyclophilin A (CypA), which is a neuroprotective agent, were unchanged by MPTP treatment but were increased in MPTP-EA mice. These results suggest that acupoint GB34-specific EA changes protein expression profiles in the SN in favor of DA neuronal survival in MPTP-treated mice, and that EA treatment may be an effective therapy for PD patients.

290- gera: 151233/di/ra

**FIFTY CASES OF PARKINSON'S DISEASE TREATED BY ACUPUNCTURE COMBINED WITH MADOPAR.** REN XM. *journal of traditional chinese medicine*. 2008;28(4):255-7 (eng).

OBJECTIVE: To search for an effective therapy for treating motor disorder due to Parkinson's disease (PD). METHODS: Fifty cases in a treatment group were treated by acupuncture combined with madopar, and 30 cases in a control group treated by madopar only. RESULTS: A total effective rate of 92% was achieved with obvious alleviation of motor disorder in the treatment group, which was significantly higher than that in the control group ( $P < 0.05$ ). CONCLUSION: Acupuncture can enhance therapeutic effects of western medicine and lessen the dose of

291- gera: 152522/di/ra

**PROTEOMIC ANALYSIS OF THE NEUROPROTECTIVE MECHANISMS OF ACUPUNCTURE TREATMENT IN A PARKINSON'S DISEASE MOUSE MODEL.** JEON S, KIM YJ, KIM ST, MOON W, CHAE Y, KANG M, CHUNG MY, LEE H, HONG MS, CHUNG JH, JOH TH, LEE H, PARK HJ.. *proteomics*. 2008;8(22):4822-32 (en).

Acupuncture is frequently used as an alternative therapy for Parkinson's disease (PD), and it attenuates dopaminergic (DA) neurodegeneration in the substantia nigra (SN) in PD animal models. Using proteomic analysis, we investigated whether acupuncture alters protein expression in the SN to favor attenuation of neuronal degeneration. In C57BL/6 mice treated with 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (MPTP, 30 mg/kg/day), intraperitoneal (i.p.) for 5 days, 2 or 100 Hz electroacupuncture (EA) was applied at the effective and specific acupoint, GB34, once a day for 12 consecutive days from the first MPTP treatment. Both treatments in MPTP mice led to restoration of behavioral impairment and rescued tyrosine hydroxylase (TH)-positive DA neurodegeneration. Using peptide fingerprinting MS, we identified changes in 22 proteins in the SN following MPTP treatment, and nine of these proteins were normalized by EA. They were involved in cell death regulation, inflammation, or restoration from damage. The levels of cyclophilin A (CypA), which is a neuroprotective agent, were unchanged by MPTP treatment but were increased in MPTP-EA mice. These results suggest that acupoint GB34-specific EA changes protein expression profiles in the SN in favor of DA neuronal survival in MPTP-treated mice, and that EA treatment may be an effective therapy for PD patients.

292- gera: 152963/di/ra

**A PROPOS D'UN CAS CLINIQUE : INTÉRÊT DE L'ACUPUNCTURE DANS LA MALADIE DE PARKINSON.** STEPHAN JM., *acupuncture & moxibustion*. 2008;7(4):322-330 (fra).

L'étude d'un cas clinique de maladie de Parkinson, diagnostiqué vide de yin du Foie et du Rein selon la différenciation des syndromes (zheng) de la Médecine Traditionnelle Chinoise objective que l'acupuncture doit être

envisagée dans l'arsenal thérapeutique de cette maladie neurodégénérative. En effet, même si les tremblements persistent après cinq mois de traitement, on constate une très nette amélioration des activités de la vie quotidienne avec disparition de la constipation, amélioration de l'insomnie et de l'anxiété, ce que confirment les essais comparatifs randomisés retrouvés dans la littérature. Les mécanismes neurophysiologiques de cette action commencent à être connus. Ils résultent d'une neuroprotection entraînant une inhibition de la microglie avec suppression des réponses inflammatoires (TNF- $\alpha$ , interleukine-1 $\beta$ , cyclooxygénase-2), action neurotrophique du BDNF (Brain-derived neurotrophic factor) et du GDNF (Glial cell line-

293- gera: 153494/di/ra

**IMPACTS OF PENETRATION THERAPY WITH HEAD ELECTRICAL ACUPUNCTURE ON PROLIFERATION OF NEURAL STEM CELLS IN SUBSTANTIA NIGRA OF RAT MODEL OF PARKINSON'S DISEASE.** WANG Shun, QI Xiu-jie, HAN Di., *world journal of acupuncture-moxibustion*. 2008;18(4):23 (eng).

To probe into the function mechanism of penetration therapy with head electrical acupuncture on Parkinson's disease. Methods Microinjection of 6-hydroxydopamin (6-OHDA) on the left corpus striatum was adopted to prepare rotation model of Parkinson's disease in rat. Penetration therapy with head electrical acupuncture was administered in treatment. Normal group, sham-operation group, model group and penetration therapy group were set up. ~Immunohistochemical (IHC) method was used to test the morphology and count of positive cell of tyrosine hydroxylase (TH). @RT-PCR technology was used to detect the expression of nestin mRNA of neural stem cell (NSC). Results compared with model group, in penetration therapy group, the expressions of TH-positive neurons in immune response were increased in areal density (AD), numerical density (ND) and integrating optic density ( $P < 0.05$ ). OCompared with model group, in penetration therapy group, the expression of nestin mRNA was increased ( $P < 0.05$ ). Conclusion Penetration therapy with head electrical acupuncture promotes the proliferation of endogenous neural stem cells in substantia nigra of rat model of Parkinson's disease.

294- gera: 152246/di/re

**QIGONG FOR MOVEMENT DISORDERS : A SYSTEMATIC REVIEW,** LEE MS, ERNST E. *movement disorders*. 2009;24(2):301-3 (eng).

295- gera: 152512/co/ra

**ACUPUNCTURE INHIBITS FERRIC IRON DEPOSITION AND FERRITIN-HEAVY CHAIN REDUCTION IN AN MPTP- INDUCED PARKINSONISM MODEL.** CHOI YG, PARK JH, LIM S. *neurosci lett*. 2009;450(2):92-6 (eng).

This study investigated the effect of acupuncture on iron-related oxidative damage in a mouse model designed as a 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (MPTP)-induced parkinsonism model. To generate the chronic parkinsonism model, mice were intraperitoneally injected with MPTP (20mg/kg, one daily injection) for 30 days and acupuncture was performed at acupoints LR3 (Taichong) and GB34 (Yanglingquan) at 48h intervals. Acupuncture inhibited decreases in the immunoreactivities of tyrosine hydroxylase (TH) and dopamine transporter (DAT) that occurred as a result of MPTP neurotoxicity. The presence of ferric iron (Fe(3+)), but not ferrous iron (Fe(2+)), was strongly increased in the substantia nigra (SN) as a result of chronic loading of MPTP, whereas the ferritin-heavy chain (F-H) was

significantly decreased. However, acupuncture treatment inhibited the increase in ferric iron and the decrease in the F-H that was induced by MPTP. Additionally, treatment with MPTP and acupuncture caused no changes in the presence of ferrous iron and ferritin-light chain (F-L) as a result of the treatments. The mRNA of F-H was also not affected. These results suggest that acupuncture may inhibit iron-related oxidative damage and may prevent the deleterious alteration of iron metabolism in the MPTP model.

296- gera: 152695/di/ra

**CLINICAL OBSERVATION OF COMBINED ACUPUNCTURE AND HERBS IN TREATING PARKINSON'S DISEASE.** HUAN WEN-YAN. *journal of acupuncture and tuina science*. 2009;7(1):33-36 (eng).

297- gera: 153304/nd/re

**ALTERNATIVE APPROACHES TO EPILEPSY TREATMENT.** MCELROY-COX C. *curr neurol neurosci rep*. 2009;9(4):313-8 (eng).

Complementary and alternative medicine (CAM) is a diverse group of health care practices and products that fall outside the realm of traditional Western medical theory and practice and that are used to complement or replace conventional medical therapies. The use of CAM has increased over the past two decades, and surveys have shown that up to 44% of patients with epilepsy are using some form of CAM treatment. This article reviews the CAM modalities of meditation, yoga, relaxation techniques, biofeedback, nutritional and herbal supplements, dietary measures, chiropractic care, acupuncture, Reiki, and homeopathy and what is known about their potential

298- gera: 153587/nd/re

**ELECTRO-ACUPUNCTURE STIMULATION IMPROVES MOTOR DISORDERS IN PARKINSONIAN RATS.** JIA J, SUN Z, LI B, PAN Y, WANG H, WANG X, YU F, LIU L, ZHANG L, WANG X. *behav brain res*. 2009;JUN 20: (eng).

Electro-acupuncture (EA) is believed to be effective for alleviating motor symptoms in patients with Parkinson's disease. In a rat hemiparkinsonian model induced by unilateral transection of the medial forebrain bundle (MFB), the effects of EA stimulation were investigated. EA stimulation at a high frequency (100Hz) significantly reduced amorphine-induced rotational behavior. Tyrosine hydroxylase immunohistochemical staining revealed that EA at 100Hz protected axotomized dopaminergic neurons from degeneration in the substantia nigra (SN). Moreover, high frequency EA reversed the axotomy-induced decrease in substance P content and increase in glutamate decarboxylase-67 (GAD 67) mRNA level in the midbrain; however, it did not affect the axotomy-induced increase in enkephalin content in the globus pallidus. These results suggest that the effects of high frequency EA on motor symptoms of parkinsonian rats may involve restoration of the homeostasis of dopaminergic transmission in the

299- gera: 153689/di/ra

**[EFFECT OF ELECTROACUPUNCTURE SCALP POINT-THROUGH-POINT THERAPY ON THE EXPRESSION OF TYROSINE HYDROXYLASE AND DOPAMINE TRANSPORTER MRNAS IN SUBSTANTIA NIGRA OF PARKINSON'S DISEASE MODEL RATS].** WANG S, QI XJ, HAN D. *chinese acupuncture and moxibustion*. 2009;29(5):391-4 (chi).

To explore the mechanism of electroacupuncture scalp point-through-point therapy in the treatment of Parkinson's disease. METHODS: Thirty-six Wistar rats were randomly divided into a normal group, a sham-operation group, a model group

and a point-through-point therapy group. 6-(OH)DA was injected into left striatum to make lateralization Parkinson's disease rat model. The point-through-point therapy group was treated with electroacupuncture at "Baihui" (GV 20) -through-"Taiyang" (EX-NH 5), once each day, 6 days constituting one course, for 2 courses, and the rats of other groups were not treated. HE staining method was used for observation of the histo-morphologic changes of the substantia nigra neurons, and RT-PCR for the expression of tyrosine hydroxylase (TH) and dopamine transporter (DAT) mRNAs. RESULTS: The expressions of TH mRNA (1.22 +/- 0.19) and DAT mRNA (0.62-0.11) in the point-through-point therapy group were significantly higher than (0.65 +/- 0.17) and (0.41 +/- 0.08) in the model group, respectively (all  $P < 0.05$ ). As compared with the model group, the number of neurons in the substantia nigra increased and degeneration of the neurons relieved in the point-through-point therapy group. CONCLUSION: The electroacupuncture scalp point-through-point therapy can increase expressions of TH mRNA and DAT mRNA in the substantia nigra in the Parkinson's disease model rat, and promote synthesis and reuptake of dopamine, hence Parkinson's disease is cured.

300- gera: 154295/di/ra

**[ EXPERIMENTAL STUDY ON TREATING PARKINSON'S DISEASE RATS BY ELECTROACUPUNCTURE COMBINED WITH QUFENGZHIDONG CAPSULE].** LI Y. *journal of clinical acupuncture and moxibustion*. 2009;25(7):50 (chi0).

301- gera: 154749/di/ra

**[STUDY ON THE MECHANISM OF ELECTROACUPUNCTURE SCALP POINT PENETRATION THERAPY IN ACTION ON APOPTOSIS IN THE PARKINSON'S DISEASE RAT MODEL].** Wang S, Jiang H, Qu L.. *chinese acupuncture and moxibustion*. 2009;29(4):309-13 (chi).

OBJECTIVE: To explore the mechanism of electroacupuncture scalp point penetration therapy in treatment of the Parkinson's disease (PD). METHODS: Forty Wistar rats were randomly divided into a normal group, a sham-operation group, a model group and an electroacupuncture (EA) group. 6-OHDA was injected into the left striatum to make lateralization PD rat model. Acupuncture at "Baihui" (GV 20)-through-"Taiyang" (EX-HN 5), once each day, 6 days constituting one course. Immunohistochemical method was used to observe the facio-density and the integral optical density of brain-derived neurotrophic factor (BDNF) in the left substantia nigra, and TUNEL method was used to observe the apoptotic amount, and high performance liquid chromatography was used to observe DA contents of the left striatum in each group. RESULTS: As compared with the model group, in the acupuncture group, the facio-density and the integral optical density in the left substantia nigra increased significantly ( $P < 0.05$ ), the amount of apoptosis decreased significantly ( $P < 0.05$ ), and the content of striatum DA increased significantly ( $P < 0.05$ ). CONCLUSION: EA scalp point-through-point therapy may enhance BDNF protein expression level in the substantia nigra to decrease the amount of apoptosis in the PD model rat.

302- gera: 154797/di/ra

**[EFFECT OF ELECTROACUPUNCTURE SCALP POINT-THROUGH-POINT THERAPY ON THE EXPRESSION OF TYROSINE HYDROXYLASE AND DOPAMINE TRANSPORTER MRNAS IN SUBSTANTIA NIGRA OF PARKINSON'S DISEASE MODEL RATS].** WANG S, QI XJ, HAN D.. *chinese*

**acupuncture and moxibustion.** 2009;29(5):391-4 (chi).

**OBJECTIVE:** To explore the mechanism of electroacupuncture scalp point-through-point therapy in the treatment of Parkinson's disease.**METHODS:** Thirty-six Wistar rats were randomly divided into a normal group, a sham- operation group, a model group and a point-through-point therapy group. 6-(OHDA was injected into left striatum to made lateralization Parkinson's disease rat model. The point-through-point therapy group was treated with electroacupuncture at "Baihui" (GV 20 )-through-"Taiyang" (EX-NH 5), once each day, 6 days constituting one course, for 2 courses, and the rats of other groups were not treated. HE staining method was used for observation of the histomorphologic changes of the substantia nigra neurons, and RT-PCR for the expression of tyrosine hydroxylase (TH) and dopamine transporter (DAT) mRNAs.**RESULTS:** The expressions of TH mRNA (1.22 +/- 0.19) and DAT mRNA (0.62-0.11) in the point-through-point therapy group were significantly higher than (0.65 +/- 0.17) and (0.41 +/- 0.08) in the model group, respectively (all P < 0.05). As compared with the model group, the number of neurons in the substantia nigra increased and degeneration of the neurons relieved in the point-through-point therapy group.**CONCLUSION:** The electroacupuncture scalp point-through-point therapy can increase expressions of TH mRNA and DAT mRNA in the substantia nigra in the Parkinson's disease model rat, and promote synthesis and reuptake of dopamine, hence Parkinson's disease is cured.

303- gera: 154831/di/ra

**[CLINICAL STUDY ON SCALP ACUPUNCTURE WITH LONG NEEDLE-RETAINED DURATION FOR TREATMENT OF TOURETTE SYNDROME].** ZHU BC, SHI-FEN X, SHAN YH.. **chinese acupuncture and moxibustion.** 2009;29(2):115-8 (chi).

**OBJECTIVE:** To observe therapeutic effects of different needle-retained durations at scalp acupoints on Tourette syndrome (TS).**METHODS:** Sixty-two cases of TS were randomly divided into an observation group and a control group, 31 cases in each group. In the observation group, the needles were retained for 2 h and in the control group, they were retained for 30 min. The middle line of forehead, middle line of vertex and lateral line 1 of vertex were selected as main acupoints, and anterior oblique line of vertex-temporal and posterior temporal line were selected as adjuvant acupoints. They were treated for 2 months, once other day. Yale Global Tic Severity Scale (YGTSS) and Tourette Syndrome Global Scale (TSGS) were used for assessment of therapeutic effects and their therapeutic effects were compared.**RESULTS:** After treatment, YGTSS and TSGS scores had very significant changes in the two groups as compared with those before treatment (both P < 0.01), indicating an obvious improvement in kinetic Tic and vocalizing Tic. The total effective rate was 61.3% in the observation group and 67.7% in the control group with no significant difference between the two groups (P > 0.05). **CONCLUSION:** Scalp acupuncture therapy of both 2 h and 0.5 h retaining needle can significantly improve symptoms of TS patients, with a similar therapeutic effect.

304- gera: 154875/di/ra

**[STUDY ON THE MECHANISM OF ELECTROACUPUNCTURE SCALP POINT PENETRATION THERAPY IN ACTION ON APOPTOSIS IN THE PARKINSON'S DISEASE RAT MODEL].** WANG S, JIANG H, QU L.. **chinese acupuncture and moxibustion.** 2009;29(4):309-13 (chi).

**OBJECTIVE:** To explore the mechanism of electroacupuncture scalp point penetration therapy in treatment of the Parkinson's disease (PD). **METHODS:** Forty

Wistar rats were randomly divided into a normal group, a sham-operation group, a model group and an electroacupuncture (EA) group. 6-OHDA was injected into the left striatum to make lateralization PD rat model. Acupuncture at "Baihui" (GV 20)-through-"Taiyang" (EX-HN 5), once each day, 6 days constituting one course. Immunohistochemical method was used to observe the facio-density and the integral optical density of brain-derived neurotrophic factor (BDNF) in the left substantia nigra, and TUNEL method was used to observe the apoptotic amount, and high performance liquid chromatography was used to observe DA contents of the left striatum in each group.**RESULTS:** As compared with the model group, in the acupuncture group, the facio-density and the integral optical density in the left substantia nigra increased significantly (P < 0.05), the amount of apoptosis decreased significantly (P < 0.05), and the content of striatum DA increased significantly (P < 0.05).**CONCLUSION:** EA scalp point-through-point therapy may enhance BDNF protein expression level in the substantia nigra to decrease the amount of apoptosis in the PD model rat.

305- gera: 154924/di/ra

**[EFFECT OF ELECTROACUPUNCTURE SCALP POINT-THROUGH-POINT THERAPY ON THE EXPRESSION OF TYROSINE HYDROXYLASE AND DOPAMINE TRANSPORTER MRNAS IN SUBSTANTIA NIGRA OF PARKINSON'S DISEASE MODEL RATS].** Wang S, Qi XJ, Han D.. **chinese acupuncture and moxibustion.** 2009;29(5):391-4 (chi).

**OBJECTIVE:** To explore the mechanism of electroacupuncture scalp point-through-point therapy in the treatment of Parkinson's disease.**METHODS:** Thirty-six Wistar rats were randomly divided into a normal group, a sham- operation group, a model group and a point-through-point therapy group. 6-(OHDA was injected into left striatum to made lateralization Parkinson's disease rat model. The point-through-point therapy group was treated with electroacupuncture at "Baihui" (GV 20 )-through-"Taiyang" (EX-NH 5), once each day, 6 days constituting one course, for 2 courses, and the rats of other groups were not treated. HE staining method was used for observation of the histomorphologic changes of the substantia nigra neurons, and RT-PCR for the expression of tyrosine hydroxylase (TH) and dopamine transporter (DAT) mRNAs.**RESULTS:** The expressions of TH mRNA (1.22 +/- 0.19) and DAT mRNA (0.62-0.11) in the point-through-point therapy group were significantly higher than (0.65 +/- 0.17) and (0.41 +/- 0.08) in the model group, respectively (all P < 0.05). As compared with the model group, the number of neurons in the substantia nigra increased and degeneration of the neurons relieved in the point-through-point therapy group.**CONCLUSION:** The electroacupuncture scalp point-through-point therapy can increase expressions of TH mRNA and DAT mRNA in the substantia nigra in the Parkinson's disease model rat, and promote synthesis and reuptake of dopamine, hence Parkinson's disease is cured.

306- gera: 155480/nd/re

**Potential influences of complementary therapy on motor and non-motor complications in Parkinson's disease.** Zesiewicz TA, Evatt ML. **cns drugs.** 2009;23(10):817-35 (eng).

Nearly two-thirds of patients with Parkinson's disease (PD) use vitamins or nutritional supplements, and many more may use other complementary therapies, yet <50% of patients have discussed the use of these complementary therapies with a healthcare professional. Physicians should be aware of the complementary therapies their patients with PD are using, and the possible effects of these therapies on motor and non-



motor symptoms. Complementary therapies, such as altered diet, dietary supplements, vitamin therapy, herbal supplements, caffeine, nicotine, exercise, physical therapy, massage therapy, melatonin, bright-light therapy and acupuncture, may all influence the symptoms of PD and/or the effectiveness of dopaminergic therapy. Preliminary evidence suggests complementary therapy also may influence non-motor symptoms of PD, such as respiratory disorders, gastrointestinal disorders, mood disorders, sleep and orthostatic hypotension. Whenever possible, clinicians should ensure that complementary therapy is used appropriately in PD patients without reducing the benefits of

307- gera: 154482/di/ra

**36 CAS DE CHORÉE MINEURE TRAITÉS PAR L'ACUPUNCTURE.** GUO CUI PING. **acupuncture traditionnelle chinoise.** 2010;22:108-111 (fra).

La chorée mineure est également appelée chorée rhumatismale, chorée infectieuse et chorée de Sydenham. Souvent observée chez les enfants de 5 à 15 ans, chez les filles notamment, cette maladie peut correspondre au domaine « Chi Zong » (convulsions) de la MTC. Ces dernières années, l'auteur de cet article la traite avec de bons résultats en acupuncture : 29 cas guéris, 5 cas améliorés.

308- gera: 154483/di/ra

**CAS CLINIQUES DE CHORÉE MINEURE SOURCE.** ZHONG GUO DANG DAI MING YI ZHEN FANG ZHEN SHU JI CHENG. **acupuncture traditionnelle chinoise.** 2010;22:112-113 (fra).

Cas clinique de XU Ben Ren (médecin chef du département d'acupuncture-moxibustion et de médecine chinoise à l'Hôpital militaire de l'armée de l'air de la ville de Shen Yang, province de Liao Ning) et celui du professeur JIAO Shun Fa (l'inventeur de l'acupuncture crânienne).

309- gera: 155080/di/ra

**[EFFECTS OF ELECTROACUPUNCTURE ON THE EXPRESSION OF GDNF AND RET IN PARKINSON'S DISEASE MODEL RATS].** WANG YC, CHENG YH, MA J, GAN SY, WANG SJ, ZHOU H, DU YJ, YANG M, SHEN F.. **chinese acupuncture and moxibustion.** 2010;30(9):739-43 (chi).

**OBJECTIVE:** To explore the mechanism of electroacupuncture therapy on Parkinson's disease (PD). **METHODS:** Fifty Wistar rats were randomly divided into a normal group, a sham-operation group, a model group, a Fengfu-Taichong group and a Shuanggu Yitong group. PD model was duplicated by microinjection of 6-Hydroxyl-Dopamine into right corpora striata, and by microinjection of normal saline in sham-operation group. Rats in normal group, sham-operation group and model group were not treated. In Fengfu-Taichong group, the rats were treated by electroacupuncture at "Fengfu" (GV 16) and "Taichong" (LR 3) on the basis of the PD model, and by electroacupuncture at "Fengfu" (GV 16), "Taichong" (LR 3), "Guanyuan" (CV 4) and "Zusanli" (ST 36) in Shuanggu Yitong group, once daily for 2 weeks. GDNF and Ret expression were detected by immunohistochemistry and western blotting, respectively. **RESULTS:** The number of GDNF positive cells and the content of Ret receptor increased significantly in the two electroacupuncture groups compared with those in the other groups (all  $P < 0.01$ ), and the expression of GDNF increased significantly in Shuanggu Yitong group compared with that in Fengfu-Taichong group ( $P < 0.01$ ). **CONCLUSION:** Electroacupuncture can not only increase the expression of GDNF, but also enhance its effect. "Shuanggu Yitong" method is better than simple acupuncture at "Fengfu" (GV 16) and "Taichong" (LR 3) in

310- gera: 155187/nd/re

**Neuroprotective effects of bee venom pharmaceutical acupuncture in acute 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-induced mouse model of Parkinson's disease.** Doo AR, Kim ST, Kim SN, Moon W, Yin CS, Chae Y, Park HK, Lee H, Park HJ. **neuro res.** 2010;32:88-91 (eng).

**OBJECTIVES:** We explored the neuroprotective effects of bee venom acupuncture in acute 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-induced mouse model of Parkinson's disease. **METHODS:** Male C57BL/6 mice were divided into three groups: saline-injected control group, 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-injected group and bee venom acupuncture-pretreated plus 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-injected group. Mice were injected with 0.02 ml bee venom (1 : 2000 w/v) to GB34 (Yangneungcheon) bilaterally once every 3 days for 2 weeks. After 2 weeks' pre-treatment, the mice were injected with 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (20 mg/kg, i.p.) four times in 2 hour intervals. Tyrosine hydroxylase and phospho-Jun immunoreactivities in the substantia nigra and striatum were observed 3 days after 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine injection. **RESULTS:** Bee venom acupuncture prevented the 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-induced loss of tyrosine hydroxylase immunoreactivity in the substantia nigra and striatum. Moreover, bee venom acupuncture attenuated 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-induced phospho-Jun immunoreactivity in the substantia nigra. **DISCUSSION:** We found that bee venom acupuncture effectively protected dopaminergic neurons against 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine toxicity, possibly through inhibition of Jun activation. Our results suggest that bee venom acupuncture could be a potential preventive agent

311- gera: 155190/nd/re

**Gene expression profile of acupuncture treatment in 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-induced Parkinson's disease model.** Hong MS, Park HK, Yang JS, Park HJ, Kim ST, Kim SN, Park JY, Song JY, Park HK, Jo DJ, Park SW, HwanYun D, Ban JY, Chung JH. **neuro res.** 2010;32:74-8 (eng).

**OBJECTIVES:** To find new biomarkers by stimulating acupuncture point GB34 (Yangneungcheon) which has neuroprotective effect on the mouse model of Parkinson's disease, analysis of cDNA microarray on mRNAs of the substantia nigra was performed. **METHODS:** Male C57BL/6 mice were divided into two groups: 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-treated mice (MPTP group, n=3); 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine and acupuncture (GB34)-treated mice (MPTP + ACU group, n=3). The mice received an intraperitoneal injection of 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (30 mg/kg) once daily for 3 consecutive days. Manual acupuncture was performed 2 hours after every injection of 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine. The total RNA in the substantia nigra of each mouse was isolated on 3 days after the last 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine injection. Agilent mouse whole genome 44K chip was used for microarray analysis and the hybridization image was analysed by GenePix Pro 6.0. Data normalization and analysis were performed using GeneSpring GX 7.3.1 program. **RESULTS:** The acupuncture stimulation revealed 799 genes (424 up- and 375 down-regulated) of which expression levels were changed more than two-folds in the MPTP + ACU group, compared to the MPTP group. The genes selected were classified into several categories based on their functions using DAVID Bioinformatics Resources 2008 (<http://david.abcc.ncifcrf.gov/>) and KEGG PATHWAY Database (<http://www.genome.jp/kegg/pathway.html>).

**DISCUSSION:** Biomarkers in response to acupuncture stimulation to GB34 were identified in a mouse model for Parkinson's disease. These biomarkers might provide a promising clue for understanding the neuroprotective effect of acupuncture in Parkinson's disease. **OBJECTIVES:** To find new biomarkers by stimulating acupuncture point GB34 (Yangneungcheon) which has neuroprotective effect on the mouse model of Parkinson's disease, analysis of cDNA microarray on mRNAs of the substantia nigra was performed. **METHODS:** Male C57BL/6 mice were divided into two groups: 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-treated mice (MPTP group, n=3); 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine and acupuncture (GB34)-treated mice (MPTP + ACU group, n=3). The mice received an intraperitoneal injection of 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (30 mg/kg) once daily for 3 consecutive days. Manual acupuncture was performed 2 hours after every injection of 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine. The total RNA in the substantia nigra of each mouse was isolated on 3 days after the last 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine injection. Agilent mouse whole genome 44K chip was used for microarray analysis and the hybridization image was analysed by GenePix Pro 6.0. Data normalization and analysis were performed using GeneSpring GX 7.3.1 program. **RESULTS:** The acupuncture stimulation revealed 799 genes (424 up- and 375 down-regulated) of which expression levels were changed more than two-folds in the MPTP + ACU group, compared to the MPTP group. The genes selected were classified into several categories based on their functions using DAVID Bioinformatics Resources 2008 (<http://david.abcc.ncifcrf.gov/>) and KEGG PATHWAY Database (<http://www.genome.jp/kegg/pathway.html>). **DISCUSSION:** Biomarkers in response to acupuncture stimulation to GB34 were identified in a mouse model for Parkinson's disease. These biomarkers might provide a promising clue for understanding the neuroprotective effect

312- gera: 155201/nd/re

**Recent development of acupuncture on Parkinson's disease.** Joh TH, Park HJ, Kim SN, Lee H. *neurol res.* 2010;32:5-9 (eng).

**OBJECTIVES:** Parkinson's disease is a complex disease with multiple etiological factors involved in disease pathogenesis, and the molecular and cellular pathways for neurodegeneration are still elusive. **METHODS:** We reviewed all the relevant laboratory findings regarding acupuncture mechanism on Parkinson's disease. **RESULTS:** Acupuncture treatments in animal experiments have generated valuable mechanistic insights of Parkinson's disease and shown that acupuncture therapy is in fact a neuroprotective therapy which increases various neuroprotective agents such as brain-derived neurotrophic factor, glial cell line-derived neurotrophic factor and cyclophilin A. In addition, acupuncture therapy decreases cell death processes and attenuates oxidative stress to substantia nigra dopaminergic neurons. **DISCUSSION:** These results suggest that early application of acupuncture therapy for Parkinson's disease patients may be helpful for the best efficacy of acupuncture treatment.

313- gera: 155243/nd/re

**Complementary acupuncture in Parkinson's disease: a spect study.** Huang Y, Jiang X, Zhuo Y, Wik G. *int j neurosci.* 2010;120(2):150-4 (eng).

**ABSTRACT** We studied cerebral effects of complementary acupuncture in Parkinson's disease using single photon emission computed tomography (SPECT) measures of (99m)Tc-ECD and (99m)Tc-TRODAT-4, before and after five weeks of treatment. Ten patients were randomly assigned to receive levodopa alone (controls) or levodopa and

complementary scalp electro-acupuncture. Before treatment, no hemispheric regional cerebral blood flow (rCBF) differences were found, whereas striatal dopamine transporter (DAT) activity was lower in the most affected hemisphere. Treatment with levodopa alone did not change rCBF, whereas it increased basal ganglion DAT activity in the most affected hemisphere. Patients who received levodopa and complementary acupuncture had increased rCBF in the frontal lobe, the occipital lobe, the basal ganglion, and the cerebellum in the most affected hemisphere as compared to baseline, but there were no changes in basal ganglia DAT levels. Thus, complementary acupuncture treatment in Parkinson's disease may affect rCBF but not basal ganglion DAT.

314- gera: 155354/nd/re

**Electro-acupuncture stimulation acts on the basal ganglia output pathway to ameliorate motor impairment in Parkinsonian model rats.** Jia J, Li B, Sun ZL, Yu F, Wang X, Wang XM. *behav neurosci.* 2010;124(2):305-10 (eng).

The role of electro-acupuncture (EA) stimulation on motor symptoms in Parkinson's disease (PD) has not been well studied. In a rat hemiparkinsonian model induced by unilateral transection of the medial forebrain bundle (MFB), EA stimulation improved motor impairment in a frequency-dependent manner. Whereas EA stimulation at a low frequency (2 Hz) had no effect, EA stimulation at a high frequency (100 Hz) significantly improved motor coordination. However, neither low nor high EA stimulation could significantly enhance dopamine levels in the striatum. EA stimulation at 100 Hz normalized the MFB lesion-induced increase in midbrain GABA content, but it had no effect on GABA content in the globus pallidus. These results suggest that high-frequency EA stimulation improves motor impairment in MFB-lesioned rats by increasing GABAergic inhibition in the output structure of the basal ganglia. (PsycINFO Database Record (c) 2010 APA, all rights reserved).

315- gera: 155439/nd/re

**Neuroprotective effects of bee venom pharmaceutical acupuncture in acute 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-induced mouse model of Parkinson's disease.** Doo AR, Kim ST, Kim SN, Moon W, Yin CS, Chae Y, Park HK, Lee H, Park HJ. *neurol res.* 2010;32:88-91 (eng).

**OBJECTIVES:** We explored the neuroprotective effects of bee venom acupuncture in acute 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-induced mouse model of Parkinson's disease. **METHODS:** Male C57BL/6 mice were divided into three groups: saline-injected control group, 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-injected group and bee venom acupuncture-pretreated plus 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-injected group. Mice were injected with 0.02 ml bee venom (1 : 2000 w/v) to GB34 (Yangneungcheon) bilaterally once every 3 days for 2 weeks. After 2 weeks' pre-treatment, the mice were injected with 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine (20 mg/kg, i.p.) four times in 2 hour intervals. Tyrosine hydroxylase and phospho-Jun immunoreactivities in the substantia nigra and striatum were observed 3 days after 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine injection. **RESULTS:** Bee venom acupuncture prevented the 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-induced loss of tyrosine hydroxylase immunoreactivity in the substantia nigra and striatum. Moreover, bee venom acupuncture attenuated 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-induced phospho-Jun immunoreactivity in the substantia nigra. **DISCUSSION:** We found that bee venom acupuncture effectively protected

dopaminergic neurons against 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine toxicity, possibly through inhibition of Jun activation. Our results suggest that bee venom acupuncture could be a potential preventive agent

316- gera: 155442/nd/re

**Gene expression profile of acupuncture treatment in 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine-induced Parkinson's disease model.** Hong MS, Park HK, Yang JS, Park HJ, Kim ST, Kim SN, Park JY, Song JY, Park HK, Jo DJ, Park SW, HwanYun D, Ban JY, Chung JH. *neurolog res.* 2010;32:74-8 (eng).

317- gera: 155453/nd/re

**Recent development of acupuncture on Parkinson's disease.** Joh TH, Park HJ, Kim SN, Lee H. *neurolog res.* 2010;32:5-9 (eng).

**OBJECTIVES:** Parkinson's disease is a complex disease with multiple etiological factors involved in disease pathogenesis, and the molecular and cellular pathways for neurodegeneration are still elusive. **METHODS:** We reviewed all the relevant laboratory findings regarding acupuncture mechanism on Parkinson's disease. **RESULTS:** Acupuncture treatments in animal experiments have generated valuable mechanistic insights of Parkinson's disease and shown that acupuncture therapy is in fact a neuroprotective therapy which increases various neuroprotective agents such as brain-derived neurotrophic factor, glial cell line-derived neurotrophic factor and cyclophilin A. In addition, acupuncture therapy decreases cell death processes and attenuates oxidative stress to substantia nigra dopaminergic neurons. **DISCUSSION:** These results suggest that early application of acupuncture therapy for Parkinson's disease patients may be helpful for the best efficacy of acupuncture treatment.

318- gera: 155464/nd/re

**Acupuncture for Parkinson's disease?** Jeon BS, Lee KM. *mov disord.* 2010;25(6):795-6 (eng).

319- gera: 155549/nd/re

**Complementary acupuncture in Parkinson's disease: a spect study.** Huang Y, Jiang X, Zhuo Y, Wik G. *int j*

*neurosci.* 2010;120(2):150-4 (eng).

We studied cerebral effects of complementary acupuncture in Parkinson's disease using single photon emission computed tomography (SPECT) measures of <sup>99m</sup>Tc-ECD and <sup>99m</sup>Tc-TRODAT-4, before and after five weeks of treatment. Ten patients were randomly assigned to receive levodopa alone (controls) or levodopa and complementary scalp electro-acupuncture. Before treatment, no hemispheric regional cerebral blood flow (rCBF) differences were found, whereas striatal dopamine transporter (DAT) activity was lower in the most affected hemisphere. Treatment with levodopa alone did not change rCBF, whereas it increased basal ganglion DAT activity in the most affected hemisphere. Patients who received levodopa and complementary acupuncture had increased rCBF in the frontal lobe, the occipital lobe, the basal ganglion, and the cerebellum in the most affected hemisphere as compared to baseline, but there were no changes in basal ganglia DAT levels. Thus, complementary acupuncture treatment in Parkinson's disease may affect rCBF but not basal ganglion DAT.

320- gera: 155608/nd/re

**Electro-acupuncture stimulation acts on the basal ganglia output pathway to ameliorate motor impairment in Parkinsonian model rats.** Jia J, Li B, Sun ZL, Yu F, Wang X, Wang XM. *behav neurosci.* 2010;124(2):305-10 (eng).

The role of electro-acupuncture (EA) stimulation on motor symptoms in Parkinson's disease (PD) has not been well studied. In a rat hemiparkinsonian model induced by unilateral transection of the medial forebrain bundle (MFB), EA stimulation improved motor impairment in a frequency-dependent manner. Whereas EA stimulation at a low frequency (2 Hz) had no effect, EA stimulation at a high frequency (100 Hz) significantly improved motor coordination. However, neither low nor high EA stimulation could significantly enhance dopamine levels in the striatum. EA stimulation at 100 Hz normalized the MFB lesion-induced increase in midbrain GABA content, but it had no effect on GABA content in the globus pallidus. These results suggest that high-frequency EA stimulation improves motor impairment in MFB-lesioned rats by increasing GABAergic inhibition in the output structure of the

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