

Editorial Views

This Is No Humbug—or Is It?

ACUPUNCTURE. The insertion of needles into critical points on the skin to produce subjective and, more rarely, objective responses in areas of the body often quite remote from the site of manipulation. An art associated with traditional Chinese medicine, acupuncture has been used for well over a thousand years for the treatment of a rich variety of diverse ailments, from deafness to dysmenorrhea, from asthma to constipation, from whiplash injuries to enuresis. Long ignored by Western medicine except for a hardy band of French acupuncturists, acupuncture has suddenly, however, become the center of popular attention, especially in the lay press, principally as a result of the recent opening of the People's Republic of China to visits by American scientists, parascientists, and non-scientists. The observations of these visitors concerning the merits of acupuncture have been based upon various degrees of objectivity, medical sophistication and credulity. The result has been controversy, especially in medical and scientific circles. It has become evident, however, that regardless of its controversial aspects, acupuncture does indeed warrant consideration and re-evaluation by Western scientists. This is already being undertaken in a number of areas, and Chinese medicine, including acupuncture, is being seriously discussed in several prestigious American universities.

The controversy about acupuncture results, on the one hand, from the sincere, almost evangelical belief on the part of its proponents that it represents not only an effective, safe form of therapy, but that it often represents the best or only method of treatment for a

number of ailments. On the other hand, one finds widespread incredulity on the part of Western physicians that such a system could possibly be effective in the treatment of anything except, perhaps, through the power of suggestion. Three aspects of acupuncture boggle the Western medical mind to the point where it has been rejected out of hand almost universally. One of these is that acupuncture apparently has no basis whatsoever in terms of physiology, especially neurophysiology, as classically taught in Western medicine. An American physician simply cannot accept the concept that insertion of a needle into a carefully defined area of skin on the wrist can affect heart rate and rhythm. It is so foreign to everything he has been taught that he has an almost Pavlovian reflex to refuse to believe it if not to ridicule it. Whether possible neurophysiologic bases for certain types of acupuncture are as farfetched as they might appear to be at first blush is not, however, all that certain. The jury is still out, and is likely to remain so for some time. A second and perhaps more cerebral reason for the mental block in accepting acupuncture rests in the mystique which has grown up about it and which has been incorporated into its practice. The jargon, bordering on witchcraft, the mannikin with blue meridian lines connecting black dots, the emphasis on the manner in which the needle is vibrated or turned, the special qualities ascribed to different needles. The metaphysical semantics used by practitioners of acupuncture just cannot be taken seriously by the physician trained in Western medicine. The biggest and perhaps best reason for dis-

belief in acupuncture, however, reflects the unwillingness or the inability of acupuncturists to *prove* what they say, to subject claims of success to objective, scientific, and statistically valid analysis, complete with controls and double-blind studies. The hyperboles of its proponents are so patent, if not impossible, that they soon become self-defeating, especially without proof in terms acceptable to the objective observer. With such friends, who need enemies?

Despite these problems in acceptance of acupuncture as a matter worthy of serious consideration, the possibility remains, however remote, that there may indeed be something to acupuncture, that a reasonable but as yet unknown explanation may really exist to explain at least part of the claims made for it. One area for proof or disproof of acupuncture as a technique lies in its use as a means of providing operative anesthesia. The application of acupuncture for this purpose is a relatively recent innovation; until two or three years ago acupuncture was employed almost solely for relief of symptoms. It is, however, now being used in China as a method for producing surgical anesthesia. This is a situation in which acupuncture can be judged on its own merits, a situation in which no control studies are needed: everyone knows the response to a surgical incision in the absence of anesthesia. If acupuncture prevents the normal reaction to operative pain, then indeed it is no humbug,

regardless of what its uses or abuses may be in other fields.

It is now apparent on the basis of first-hand observations by at least four qualified individuals, Professor Arthur Galston, Dr. E. Gray Diamond, Dr. Victor Sidel, and Dr. Paul Dudley White, that acupuncture is in fact capable of providing surgical anesthesia. Their conclusions are substantiated by reports published in the medical literature of the People's Republic of China, reports which, while unfortunately difficult to obtain, do appear to prove the efficacy of acupuncture used in this manner for this purpose. What are now lacking are objective data on details of how the technique is used, its rate of success (or failure), its complications, its indications, its contraindications. At the present time there is no Western physician skilled enough in this particular use of acupuncture to answer these questions. Nor is it presently possible for Chinese acupuncturists to come to the United States, or for American anesthesiologists to visit China to obtain the requisite first-hand knowledge. Hopefully, this will change, and an exchange of information, ideas and practices will be possible in the future. In the meantime, Western anesthesiologists should keep an open mind on the subject and await further data on what might just prove to be a potentially valuable contribution to the field of anesthesiology.

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