

This book is dedicated
to all the patients
and the staff of the
Kusht Nivaran Davakhana Clinic
in Vadoli (Talasari, India)

Acknowledgements

I wish to express my thanks and gratitude to my teachers, my family and to my friends.

My special thanks to Fr. Peter Massanet SJ (Peter Baba) for introducing me to India and its wonderful people. To Rosa Mercader, the editor, since without her help this manual would not have been published. And to Marina Ponseti for the statistics.

A healing touch

I first met Reyes in MPSM (Maharashtra Prabodhan Seva Mandal, Nashik, India) as a tourist interested in India. This was 2011. MPSM works on education, health and sustainable agriculture in tribal or Adivasi villages of rural Nashik. After learning that she had professional skills in acupressure and acupuncture, we started organizing her workshops with our Adivasi women tutors.

Reyes' desire to heal was so earnest that in the tutor trainings as well as in MPSM's neighbourhood, she overcame all linguistic obstacles. Her zest and skill in communicating therapies of cupping and massage stirred interest in everyone who participated in her workshops.

Reyes and I decided to offer short workshops beyond Nashik in other rural centres working for the Adivasi or on tribal health. Thus, she initiated training sessions for those who wanted to learn how to become healers themselves. She demonstrated acupuncture and acupressure therapies in tribal social centres as far spread as Amravati, Kalimpong Valsad, Manor, Bahre, Ambatha, Talasari and Nashik, among others, developing the skills of nurses and others interested in the treatment.

Since then, interest in her therapies has been growing steadily. In the Vadoli leprosy clinic she has pioneered an acupuncture treatment for leprosy-affected patients with growing success. Reyes intends to keep up her workshops so that more skilled healers could serve the needs of so many people whose access to expensive treatments is limited.

Reyes has now recollected her vast experience in the fields of acupuncture and acupressure in this manual which will serve as a guide to nurses, health workers and acupuncturists working with leprosy affected patients. Having observed her dedication to the cause I earnestly support her mission. I am convinced that it will have a positive impact on the health of the poor in India and other countries where an approach like hers is especially needed.

Fr. Godfrey D'Lima, SJ
Director
Maharashtra Prabodhan Seva Mandal
Nashik
August 21, 2016

Presentation

It all started with an invitation by the Canossian sisters at the Vadoli hospital in Talasari (Maharashtra, India). I was training them in the use of acupuncture for the treatment of pain. Seeing the good results, they were interested in the possibility of acupuncture being helpful in alleviating the symptoms of leprosy (Hansen's disease) since they had a specialist clinic attached to the main hospital. Without thinking twice about it I said we should give it a try.

I have to admit that I really knew nothing about the disease. In the West, leprosy has generally been eradicated and therefore it is not something we study when learning acupuncture. Moreover, there are no protocols to follow – or at least I could not find any reliable information on the web.

According to my diagnosis, leprosy cases show a Qi and Blood stagnation and internal heat. The main goal of the treatment should therefore be to activate Qi and Blood to resolve heat and to alleviate pain. And so I decided to proceed using my previous experience with acupuncture in setting up specific guidelines that I thought would make sense in terms of reducing the pain of leprosy patients. To my big surprise, we obtained excellent results.

With this manual I wish to share our experience at the Kusht Nivaran Davakhana clinic for leprosy patients between January and March 2016. It summarizes the protocols we developed, which I hope will be a useful tool to health workers who are concerned with increasing life quality of patients afflicted with Hansen's disease.

Reyes Rigo Lic. Ac.
Talasari, India. March 2016

The damage to motor nerves in leprosy causes imbalance at various joints and these postural alterations result in various deformities. Active exercise which can prevent disuse muscle atrophy is not possible when the muscles are completely paralysed.

Electroacupuncture can provide active exercise to the paralysed muscles and thus prevent their disuse atrophy.

It also serves as the most effective physical therapy to prevent and treat early deformities such as claw hand, foot drop, trophic ulcer, etc. Moreover, acupuncture can give relief from neuritic pain, tingling, heaviness and burning sensation in leprosy.

Treatment principle

to activate Qi and Blood

to resolve heat

to alleviate pain

Acupuncture points

In all cases: GB34 & 4 Gates (L4 & LIV3) all points needled bilaterally.

If median nerve is affected: add PC7 or PC6 (PC7 can be extremely painful in leprosy patients, you can use PC6 instead)

If ulnar nerve is affected: add HT3

If popliteal nerve is affected: add BL40

If claw hand: use electro on LI4 & GB34

If drop foot: use electro on GB34 & ST41

If numbness or pain in eyebrows: add Yuyao

Electro acupuncture stimulation

For claw hand: LI4 & GB34

For drop foot: GB34 & ST41

Treatment duration

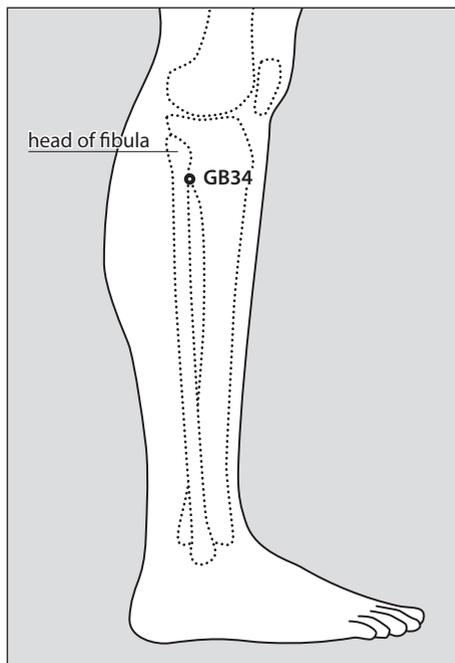
Retain the needles for 30 minutes

Location of the acupuncture points

GB34

It is the main point for tendons and joints.
It helps to clear heat.

- **Location:** In the tender depression approximately 1cun anterior and inferior to the head of the fibula.
- **Needling:** Perpendicular insertion 0.5 to 1 cun.

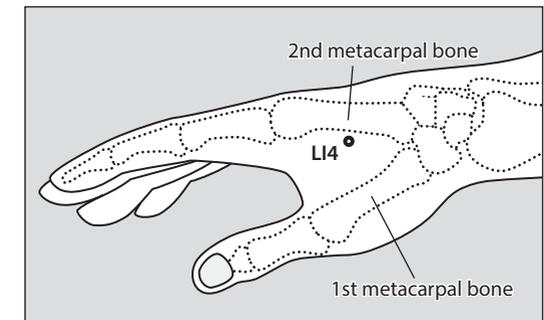


4 Gates (LI4 & LIV3)

The combination of these four points are thought to enhance the circulation of Qi and blood throughout the body and to have a calming and analgesic effect. They are used to alleviate pain.

Warning: Absolutely do not use in case of pregnancy.

- **Location of the LI4:**
On the dorsum of the hand, between the 1st and 2nd metacarpal bones, approximately in the middle of the 2nd metacarpal bone on the radial side.



- **Needling:**
Perpendicular insertion 0.5 to 1 cun.

- **Location of the LIV3:**
On the dorsum of the foot, in the depression distal to the junction of the 1st and 2nd metatarsal bones.

- **Needling:**
Perpendicular insertion 1 to 1.5 cun.

