

The patient is a 53-year-old female presenting with acute back pain. She experienced a back spasm four days before her first acupuncture appointment. She describes tension and tightness in her low back, with pain across the whole lumbar area. She says the pain is worse on the left side than the right. She describes the pain as achy and dull, and quite severe; when the back spasm began, she was limited to lying on her back and found any other positions or movement extremely painful. She says the area feels inflamed, and that pressure or heat on the area increases the pain. Ibuprofen is helping a little. The patient reports that she is under a great deal of stress lately, and that she has not been exercising very much recently. She feels that both of these factors contributed to the back spasm she has now. She saw her chiropractor the day before coming for acupuncture, and while that was somewhat helpful, she is still very uncomfortable.

The patient is generally in good health. She has been post-menopausal for many years, and remembers that her back would become painful around her period. Other than occasional stiffness in the shoulders, she is healthy and feels well most of the time. She does not take any medications on a regular basis. She has a soft body type and makes good eye contact while speaking. The area around her low back is cool to the touch, as compared with other areas of her body. The patient's pulse is deep and soft, and difficult to palpate. Her tongue is pale and swollen with toothmarks along the edges, and there is a thin, white coat.

The patient's primary diagnosis is qi and blood stagnation in the Urinary Bladder and Gallbladder channels. To address her acute back pain, the treatment principle is to move qi and blood in the affected channels. The patient also has a secondary diagnosis of Spleen qi deficiency causing dampness. The treatment principle for this diagnosis is to strengthen the Spleen qi and dispel dampness. Due to the acute nature of the back pain, acupuncture treatments are focused on moving qi and blood in the channels.

At the first acupuncture treatment, local points on the low back were used, as well as points on the backs of the knees and calves, the ankles, and the outer thighs. Cupping was suggested as an additional treatment modality, but the patient declined because her back was so sensitive to touch; therefore, only acupuncture was used at this visit. Immediately after the treatment, the patient reported feeling better with less tightness and pain in her back.

The patient returned to the office three days later and said that she still had some tightness in her back and that her back was still achy, but that the pain was no longer acute or debilitating. She was interested in trying cupping at this appointment, so cups were applied to her low back and allowed to stay for about 15 minutes. Following cupping, acupuncture points were inserted in the thighs, hands, ankles, and backs of the knees and calves.

The patient came in one more time, two days later. She said that she was feeling much better and expected that this treatment would eliminate any lingering back pain. Again, cups were applied to her low back, and similar acupuncture points were used. The patient left the office feeling good and said that she was satisfied with the results of her acupuncture treatments. Follow up 10 days later revealed that the patient continues to feel good.