

Auriculotherapy (Ear Acupuncture)

Auriculotherapy is the stimulation of the auricle of the external ear for the diagnosis and treatment of health conditions in other parts of the body. It is also known as ear acupuncture or auricular acupuncture when the stimulation is achieved by the insertion of acupuncture needles, whereas the term auriculotherapy often refers to electrical stimulation of the surface of ear reflex points. Specific points on the ear can also be stimulated by manual pressure, referred to as auricular acupressure or ear reflexology. Acupuncture points on the ear can also be stimulated with lasers, magnets, and ear pellets.

Auriculotherapy is typically considered one form of acupuncture, but there are both differences and similarities between the two procedures. Acupuncture is a form of medical treatment involving the stimulation of acupuncture points located on energy channels extending over the surface of the body, which are known as meridians. From the philosophy of Taoism, there are six Yang meridians and six Yin meridians. In classical acupuncture, it is the Yang meridians that directly connect to the external ear. These energy lines of force are blocked or congested when there is some pathology in a specific area of the body. Insertion of acupuncture needles into specific acupoints can relieve the symptoms and underlying pathology of a health problem. Some of the meridian energy lines of force connect to the external ear, thus creating the field of auricular acupuncture. Different perspectives of auriculotherapy focus not on the acupuncture meridians but on the use of the ear as a localized reflex system connected to the central nervous system.

Auriculotherapy is used widely for pain control, addictions of all kinds, internal disorders, emotional issues, and a host of other problems. Medical doctors, chiropractors, acupuncturists, naturopaths, dentists, and laypeople alike routinely see excellent results from properly applied auricular treatments.

History

The earliest written records of ear acupuncture date back to the Yellow Emperor's Classic of Internal Medicine, a compilation of acupuncture procedures that were in practice in 500 BC. Within this extensive text, that covers a variety of acupuncture treatments, there is mention of specific acupuncture points on the external ear for the relief of certain medical disorders. In the West, the earliest references to ear treatments were referred to in medical records from ancient Egypt, Greece, and Rome. The most

complete descriptions of medical treatments through the ear were recorded in ancient Persia. A trail of evidence of the use of auricular stimulation for the treatment of sciatica back pain can be followed from these Persian records through medieval Europe to modern France.

Historically, the ear pavilion was cauterized to treat sciatica or toothache. These techniques were reported in 1850 by Lucciana in Corsica, France; and almost simultaneously by Joseph François Malgaigne, MD, in Paris, France; and Giambattista Borelli, MD, in Turin, Italy. However, because of a lack of objective mechanistic explanations, this technique was never utilized again until 1950, when some nonbiomedical healers from Southeastern France were treating sciatic pain by cauterization of the ear antihelix. That technique was observed by the late French physician Paul Nogier, MD, of Lyon, France, who started a long series of clinical investigations and observations. In 1957, Nogier published in the *German Magazine for Acupuncture (Deutsche Zeitschrift für Akupunktur)* his first map defining a somatotopic arrangement on the auricle with a drawing made by Gerhard Bachmann. Dr. Nogier's work demonstrated the ear is actually a micro-map of the entire body, with all body parts represented. Thus, all parts of the body can be evaluated and treated by means of the external ear. The publication of Nogier's auricular map led to the very widespread and rapid diffusion of the original Nogier concept in Russia, Japan, and China. The World Health Organization recognized the auricular points in 1987 and developed the First International Nomenclature in 1990.

Anatomically, a primary distinction of the ear pavilion is its composition of thin skin that is firmly attached to fibrous cartilages fixed around the external auditory meatus, which gives the ear pavilion its typical shape. It has a very rich innervation and blood supply. Embryologically, the auricle is only derived from the ectoderm and mesoderm. The four mixed cranial nerves (motor and sensitive roots with ganglions) controlling the four visceral arches give the ear more than half its innervation by the trigeminal (V), facial (VII), glossopharyngeal (IX), and vagal nerves (X), and also the cervical plexus (C2/C3). This composition of nerves allows one to consider this organ as a specific *neurovascular organ*.

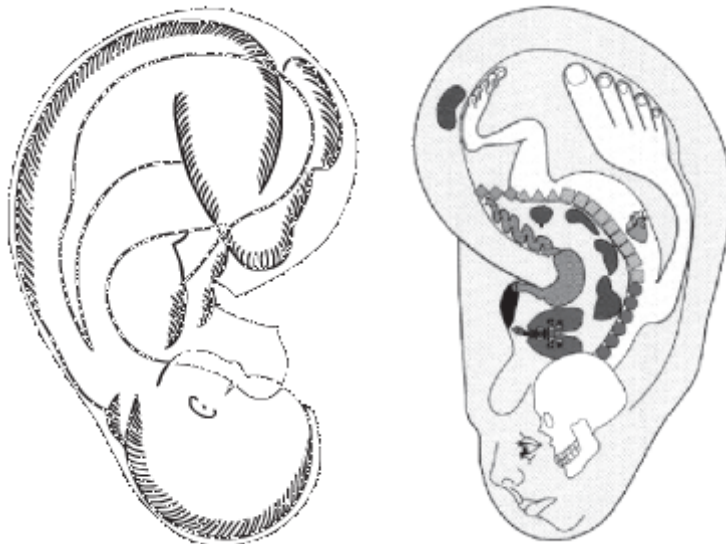
The Traditional Asian Medicine practiced in ancient China included just a scattered array of acupoints on the auricle for just a few health problems, whereas the current practice of auricular acupuncture shows a more complete organization of ear reflex points that can be used to relieve many health problems. Since the 1950's and Nogier's auricular map, the use of specific ear points as a complete reflex system that can alleviate many health problems has been utilized by clinical practitioners in other parts of Europe, in Asia, and in North and South America.

Mechanism - Organo-Cutaneous Reflexes

One of the basic concepts in auriculotherapy is that nerves in the skin overlying specific areas of the external ear correspond to specific parts of the brain, which have reflex connections to the body. Organo-Cutaneous Reflexes are activated when organic pathology in a specific part of the body induce reflex reactions in the external ear, manifested as localized changes in tenderness, altered blood circulation, and electrodermal reactivity. Cutaneo-Organic Reflexes are activated when specific points on the auricle are stimulated to relieve organic pathology in another part of the body.

Auricular Chart

In Asian medicine there is a hypothesis related to acupuncture that the auricle is a projection of the functional anatomy of the whole human body. The auricle is a map of the body in an inverted or upside-down fetus pattern. The inverted fetus pattern that is represented on the auricle is referred to as somatotopic inversion. The word "soma" means "body" and the word "topic" refers to a topographic "map." According to this system, areas of the auricle where there is increased electrical conductivity and heightened tenderness to touch correspond to specific areas of the body where there is some pathological condition. The hypothetical map of different bodily regions appears on the external ear as an inverted fetus, with the head represented towards the lower lobule, the hands and feet represented at the uppermost portion of the auricle, and the body in between.







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