

News

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*****Acupuncture found effective
in treating both physical
and psychological pain.

DALLAS--Acupuncture has been shown to relieve physical pain, according to two psychiatrists at The University of Texas Health Science Center at Dallas. But their studies now show that acupuncture may also relieve psychological pain -- depression -- as well.

Studying patients with "chronic pain syndrome," characterized by chronic pain and depression, health science center psychiatrists Drs. Manoochehr Khatami and Sanford Kiser have found a common denominator between acupuncture, pain and depression.

The reason acupuncture treatment seems effective in alleviating both pain and psychiatric symptoms, they say, is that acupuncture causes an increase in blood levels of "endorphins" (opiate-like chemicals released in the brain and throughout the body). Endorphins are known to be effective as pain relievers and mood elevators. These chemicals have been speculated to be responsible for the feeling of euphoria experienced by runners--the "runner's high."

The research performed by Khatami and Kiser shows a marked increase of the endorphin called "met-enkephalin" in both blood and spinal fluid of their patient volunteers after acupuncture.

"Acupuncture treatment resulted in significant improvement of both pain and psychiatric symptoms and higher plasma concentrations of met-enkephalin," says Kiser, clinical associate professor of Psychiatry.

Khatami and Kiser found that those patients in their studies with the greatest response to the analgesic and mood altering effects of acupuncture were those who had the greatest increase in endorphin release.

In a group of 20 patients with "chronic pain syndrome," pain continuing for at least six months for no surgical nor medical reason, results show a decrease in both pain and depression with acupuncture. Of the 20 patients in this study, five reported complete pain relief and nine experienced partial pain relief. Alleviation of psychiatric symptoms accompanied pain relief.

Several research groups have found subnormal endorphin activity in patients with chronic pain, Kiser says.

Pain and depression, commonly linked, have long presented difficulties for medical science. "The complex mixture of pain and psychiatric symptoms, particularly depression, creates difficulties in determining whether the pain results from the psychiatric symptoms or whether the psychiatric symptoms are the consequence of long-standing pain," says Khatami, clinical visiting associate professor of Psychiatry. "Due to the complexity of the intricate mixture of psychiatric and pain symptoms, many patients are left without effective treatment."

Research involving a team of investigators led by Khatami and Kiser was published in the British medical journal, The Lancet, and was recently reported by Khatami at an international pain symposium in Seattle, sponsored by the International Association for the Study of Pain.

In this study of 20 patients, those patients with pain caused by an identifiable, currently active surgical or medical condition were excluded. Also excluded from the study were patients with major psychiatric disorders, endocrine disease and those receiving treatment or medications elsewhere.

After a comprehensive psychological and physical evaluation, patients entered a course of acupuncture treatment consisting of nine 30-minute sessions spread over

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acupuncture--add one

three to four weeks. The acupuncture was administered according to Oriental methods.

Patients rated their pain on a subjective scale from one (no pain) to 100 (unbearable pain). Depression was measured by established psychiatric tests.

The average blood met-enkephalin levels were higher after acupuncture, while levels of another endorphin called "beta-endorphin" did not change. The largest increases in blood met-enkephalin levels occurred in the five patients reporting total acupuncture pain relief.

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