

## **Dry Needling: A Novel Technique**

By Steven Collins, LAc

The following technique is a method for relieving muscle spasms that are otherwise intractable and don't respond to conventional needling or *tuina*. It's based on the concept of muscle fiber fatigue.

Although variations of this technique have appeared in print elsewhere,<sup>1</sup> this is, to the author's knowledge, the most distilled and efficient presentation.

It is said: "Where there is stagnation, there is pain." Although stagnation is not the only cause of pain, it's the one with which we are concerned about in this context. In cases of *qi* or *xue* stasis, a common presentation is muscle spasm. Frequently, these spasms are seen on the back in the large muscle groups such as the deltoids or paraspinal. These spasms obviously are excess in nature, as they cause pain and discomfort when pressure is applied. Often, acute spasm responds relatively poorly to conventional needling and occasionally well with good massage/*tuina* techniques. Dry needling the spasm directly will produce resolution of the spasm and affect a free flow of *qi* and *xue* to the site. This technique particularly is suited to acupuncture because of the structure of our needles. Being solid and rounded, they "tap" the muscle, rather than slice through it as conventional needles would. The technique is safe, and the response is nearly immediate. The author cautions that although it can be described in detail, it should preferably be seen first-hand to appreciate the nuances of the technique.

Physiologically, and as a result of *qi/xue* stagnation, a muscle will spasm due in part to contracture of the actin-myosin cross-bridges locking up. Although this can theoretically occur in any skeletal muscle, it occurs most commonly in the large muscles of the back and the calves. Regardless of the cause, the result is the same: a local knot of muscle fibers that have contracted and refuse to release. By continually stimulating these fibers, it's possible to affect a release. Essentially, the needle causes the nerves at the knot to keep firing until the knot becomes so fatigued it can no longer sustain itself.

To perform the technique, select a 32-gauge needle, one inch in length. Find the spasm and insert the needle perpendicularly through the subcutaneous tissue until you contact the spasm. You will feel a definite density change. Do not insert the needle into the muscle. Rather, "bounce" the needle on the muscle using wrist action. This is done anywhere from one to three times a second. When the spasm releases, you will feel the release as a "softening." It's unmistakable and often is felt by the patient as well. Immediately withdraw the needle, and gently massage the area to facilitate *qi* and *xue* flow. This might be repeated as necessary along the muscle if there are numerous spasms, or in other muscle groups.

Although you can perform this technique with the patient sitting, it's much easier to perform if the patient is lying down. The technique can be performed on the upper shoulder in the region of *jian jing* (GB 21), and safely on the sternocleidomastoid with due care. The technique can be performed either before or after *tuina*. However, in the author's opinion, releasing spasms before a *tuina* session can facilitate the bodywork greatly. In addition, since this technique immediately resolves the discomfort associated with the spasm, the patient will be much more accepting of further treatment once you solve his or her pressing complaint.

#### *Reference*

1. Seem M. *A New American Acupuncture*. Boulder, CO: Blue Poppy Press, 1993.
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