A Brief History of Acupuncture for Detoxification in the United States

By John Kolenda

While acupuncture has been around for thousands of years, the specific treatment of addiction with acupuncture only dates back to the early 1970s. The work of Dr. Wen led to the discovery of what ultimately would become a hybrid of acupuncture. Dr. Wen, a neurosurgeon in Hong Kong, was researching the effects of acupuncture for postsurgical pain and coincidentally found that applying electrical stimulation to the lung point in the ear relieved opiate withdrawal symptoms.

At about the same time, two detoxification centers, each at opposite ends of the continent, began utilizing acupuncture for the treatment of addiction. One was the Lincoln Center in the South Bronx; the other was Haight Ashbury Free Clinic in San Francisco. Having heard the recent news of Dr. Wen’s work, these centers were excited to utilize acupuncture as a treatment for addiction. As you will read, each embarked on this journey in very different ways.

In 1974, Lincoln Hospital in New York, which at the time had a methadone detoxification program, began to incorporate the ear/lung point with electrical stimulation as an adjunctive treatment for prolonged withdrawal symptoms after a 10-day methadone detoxification cycle. The acupuncture was administered in a group setting, with everyone getting the basic ear treatment. Soon, twice-daily acupuncture treatments were added concurrently with tapering methadone doses. Reduction in opiate withdrawal symptoms and prolonged program retention were noted.

In the mid-to-late 1970s, the Haight Ashbury Free Clinic (HAFC) obtained significant funding through a grant from benefactor Bill Pone to start an acupuncture detox center. HAFC differed from Lincoln Hospital in that earlier, it had philosophically decided not to become a methadone distributor. HAFC also decided to administer acupuncture according to the signs and symptoms each patient presented. This meant that each patient was placed in a treatment room and was diagnosed and treated independently of others. This allowed HAFC acupuncturists to treat with full body acupuncture.

Because Lincoln Hospital was in the impoverished South Bronx with very limited funding, it was not possible to treat each patient individually, so the group setting was the only way to administer the
acupuncture. Funding was so tight that there was not even enough money in the budget to replace the batteries for the stimulators. It was quickly discovered, however, that simple manual needling produced a more prolonged effect than that produced by electrical stimulation. This follows the acupuncture principle that strong stimulation has primarily a symptom suppression or "sedation" effect, and that more gentle stimulation has more of a long-term, preventative or "tonification" effect.

Gradually, the acupuncture protocol at Lincoln Hospital was expanded by adding \textit{shen men} (spirit gate), a well-known point for producing relaxation. Over several years, other ear points were tried on the basis of lowered resistance, pain sensitivity and clinical indication. Dr. Michael Smith of Lincoln Hospital added the "sympathetic", "kidney" and "liver" ear points to create the basic "five-point" protocol. Numerous other ear point combinations and body acupuncture points were tried on an individual basis without any significant improvement to the basic five-point protocol.

In 1978, the clinic relocated and stopped providing methadone. Over the ensuing years, Lincoln Hospital further developed a client-centered acupuncture-assisted model of treatment. It became clear during the 1980s crack cocaine epidemic that the five-point protocol was effective in assisting crack-addicted persons to become and remain clean.

In the early 1980s, HAFC’s acupuncture grant money ran out. While HAFC had several very dedicated acupuncturists, without an objective study to measure the effect of acupuncture on addiction, the acupuncture clinic was forced to close. Anecdotally, many patients reported great improvement and were very disappointed when they could not continue with a therapy they felt had helped them.

If HAFC’s acupuncture efforts had been measured, it is believed that it would have shown favorable outcomes, but it was the five-point protocol developed at Lincoln Hospital that proved to have staying power. This can be attributed to the following factors:

1. \textbf{Therapeutic model.} The group setting, just as with group therapy, brings out the group dynamics and helps break down the isolation that is so devastating in addiction.

2. \textbf{Egalitarian treatment.} As all participants are treated equally, the treatment supports each individual’s effort to overcome "denial."

3. \textbf{Disclosure issues.} Since each client receives the same treatment, there is no need for the client to disclose personal and potentially embarrassing information and/or need to perform to please the health provider.
4. **Efficiency.** The five-point protocol allows one practitioner to treat many patients at a time. This makes it more time- and cost-effective.

In 1985, the National Acupuncture Detoxification Association (NADA) was established to promote education and training of chemical dependency clinicians in the NADA ear acupuncture protocol. The five-point protocol is now referred to as the NADA protocol and is specifically designed to address the multiple issues of addiction.

There are currently 5000 NADA-trained clinicians worldwide, and more than 800 programs within the United States. For more information, please call 1-888-765-6232 (888-765-NADA).

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