Acupuncture Treatment of Trauma in the Canine

By Gene Bruno, OMD, LAc, FABAA

From 1972 until 1976, John Ottaviano and I were treating dogs at five different veterinary clinics in the Los Angeles county area. Usually, we were at a clinic for seven to eight hours. During a typical day, we treated around 25 dogs at each clinic.

Most of cases were musculoskeletal disorders, but occasionally we would treat cases that involved injuries that were due to trauma. The following case is an interesting one that involves injuries in a dog due to trauma.

Case Study

Barbara Ota, DAc, LAc, FABAA, has been treating small animals with acupuncture for nearly two decades. Her clinic is on the Big Island in Hawaii. She is also on the faculty of the International Academy of Animal Acupuncture (IAAAA) and this is her case study.

Dexter is a 10 year-old neutered Jack Russell Terrier who was referred to me six weeks after a traumatic auto accident where his head had been run over by a truck. He was lucky enough to have been partly cushioned by a grassy lawn during the incident. His owners took him to his veterinarian where emergency therapy and treatment were administered. The veterinarian recorded in the chart notes that "...no fractures or major external tissue trauma were sustained." It was also charted that, "Dexter has abrasions on the right side of his face. His mouth and teeth and pupils are normal. His heart and lung sounds are hoarse likely due to possible contusions. He is alert and active." He was then sent home with antibiotics and anti-inflammatories.

Six weeks later his owners returned to the veterinarian and reported that although Dexter showed significant improvement since the date of the accident, they noticed that he was having a difficult time chewing his food.

Upon examination, his veterinarian noted in the chart that there was atrophy of the right masseter muscle and right temporalis muscle. It was also noted that, "... his eyes were normal, and his pupils were equal and there was no facial paralysis." The veterinarian concluded that the "... atrophy was due to the prior auto
accident trauma and would continue to be detrimental for Dexter’s continued improvement." She told the owners that, "Traditional Chinese Medicine would be the therapy of choice" for Dexter, and referred them to me.

At Dexter’s initial visit to my clinic he presented with a happy disposition and was easy to examine. His tongue was a pink/red and it had a moist and balanced look and texture. His pulses were quick and tight at all positions and his activity level was elevated. The owners reported that his weight was being maintained, and his diet consisted of a commercial kibble at the time of this first visit.

Divots on the right side of his head, where right masseter muscle and right temporalis muscle had atrophied, were distinct and easily palpable. I observed that the several other facial muscles were pronounced, compensating for the ones that had atrophied. Dexter’s sense of smell appeared to be intact. Interestingly, he showed no facial paralysis and his tongue did not deviate to one side or the other. The menace (blink) reflex in both eyes was normal, and his eyes were equal and not drooping.

I diagnosed Dexter with the TCM pattern of Painful Obstruction Syndrome due to trauma, with associated Spleen Qi Deficiency. A treatment plan was chosen to eliminate pain and support the Spleen in order to stimulate new muscle growth. This treatment plan included acupuncture, food therapy, neutraceuticals and at-home massage.

Dexter’s diet was changed to a homemade one, consisting of pumpkin or rice with vegetables, and grass fed beef, or chicken with a bone broth. When cooled, super greens, canine vitamins and omega-3 fatty acids were added to the mix. He was given probiotics and sublingual vitamin B12. Food was initially liquid-like, and gradually became mildly blended when he could chew with improved muscle strength and without pain.

Dexter received acupuncture twice a week, over a three-week period. I chose among the following points and treatment methods during this time: Du-24 threaded to Yin Tang; threading needle at St-7 to St-6; multiple threading needles in the m. orbicularis oculi and temporalis muscles (R); Yu Yao (R) and Tai Yang (R). Points that were also needled bilaterally at some treatments were: Bl-23, Bl-20, Bl-18, Bl-17, St-36, Sp-10, LI-4, and Lv-3.

As early as the third treatment, palpable improvements to the right masseter and temporalis muscles could be felt. By Dexter’s fourth treatment, he was chewing with less pain and more force. Acupuncture continued through six treatments. Food and nutritional therapy continued as a part of his daily regimen. His muscles
continued to have a better palpable tone and it was recommended that Dexter have monthly periodic rechecks and treatments.

It is always rewarding to see improvement in a patient. As of this date, Dexter is healthy and thriving. Dexter’s owners, although previously unfamiliar with acupuncture, were very satisfied with the results of his improved well-being. Dexter’s case dramatically illustrates the importance of the integration of Chinese medicine and veterinary treatment for the health and well being of our companion animals.

*Author’s Note:* Barbara Ota is the medical director at the Kohala Clinic on the Big Island of Hawaii. She is a consultant on the staff of the North Hawaii Community Hospital, and a medical director of Traditional Chinese Medicine at Kamuela Veterinary Clinic. Barbara is co-author of *Happy, Healthy Dogs* and other research publications. She is currently a lead instructor with the International Academy of Animal Acupuncture. She can be contacted at otab83 -at- gmail.com.

**Geno Bruno** is one of the pioneers in the profession, he has dedicated his career to the advancement of acupuncture and Oriental Medicine in the U.S. He’s served in teaching and research positions, and has been in private practice for over 45 years. In 2007 he established the Trudy McAlister Foundation.