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## Efficacy of TEAS Intervention on Rehabilitation of Amphetamine Addiction

Meng-Shiuan Wu<sup>1</sup> · Tsung-Chieh Lee<sup>1</sup> · Wen-Yu Hsu<sup>2</sup> · Lun-Chien Lo<sup>3</sup> · Yun-Tai Chen<sup>1</sup>

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#### **Abstract**

**Aim**: In recent years, amphetamines have become one of the most widely used drugs in Taiwan. Drug abuse has been an important public health problem. However, the Chinese medicine participating in the rehabilitation of drug addiction is limited at present. This study attempts to explore the efficacy of TCM acupoint stimulation combined with Western medicine addiction treatment, using non-invasive transcutaneous electrical acupoint stimulation (TEAS) to intervene in the of amphetamine addiction treatment. This study hopes to establish a mode of TCM participating in the treatment of amphetamine addiction.

**Method:** This is a non-blind, non-randomized controlled trial. The study admitted 68 patients aged of 18-65 who were meet the diagnosis of drug addiction. According to the willingness of patients to receive treatment, they are divided into treatment group and control group. The treatment group received TEAS stimulation at Hegu, Laogong, Neiguan, and Waiguan, and received at least 8 treatments, while the control group received only conventional psychiatric treatment and were required to come back to OPD regularly. Both of two groups Both groups were tested on four scales before and after. The changes of the scores of the scales would be the basis for efficacy measurement.

**Results:** Compared with the control group who received only conventional addiction treatment, treatment group receiving at least eight TEAS treatments were able to effectively alleviate the drug cravings and depression symptoms encountered during the addiction treatment course. The combination of TEAS and conventional treatment can achieve better withdrawal effects.

**Keywords:** Amphetamines, Drug addiction, Detoxification, Traditional Chinese medicine, TEAS.

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# A preliminary study on the correlation analysis between medical treatment behaviors and clinical prescriptions of skin diseases and meteorological factors

#### -- Take the TCM clinic of a hospital in the eastern Taiwan as an example

Ming-Ying Hsieh <sup>1</sup> · Mu-Fan Tsou <sup>2</sup> · Tsung-Jung Ho<sup>4,5</sup> · Ming-Hsien Yeh<sup>3,5,#</sup> · Yi-Chen Chen<sup>4,5,6,\*</sup>

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#### **Abstract**

This article traced back to the relationship between the number of patients with skin diseases (ICD9:690-698) and meteorological factors in the traditional Chinese medicine department of a hospital in eastern Taiwan from November 2015 to November 2018. Based on the correlation coefficient and stepwise regression analysis, it was found that when the average relative humidity is higher, the proportion of patients with skin diseases as the main diagnosis is higher (p < 0.05).

In drug analysis, five of the top ten compound prescriptions are related to the dehumidification effect. On the other hand, the most commonly used of single-medicine is poncirus trifoliata, followed by rhubarb, both of which can help gastrointestinal peristalsis and excretion of stool, and stool is one of the important ways to discharge dampness in the body. Therefore, no matter in the use of compound or single-medicine, it can be seen that dispelling dampness is a common prescription for treating skin diseases.

Traditional Chinese medicine (TCM) treatments focus on three indexes, that are individual, time, and local conditions. In the future, the research scope may be expanded to the whole of Taiwan for further exploring the relationship among different meteorological factors and skin diseases in various parts of Taiwan, and providing clinicians a reference for precision medical therapeutic strategy for skin diseases based on these three factors.

Keywords: Skin diseases, meteorological factors, medical treatment behavior, medication analysis

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# Myocardial Bridge with Arrhythemia: A case report of Chinese Medicine

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A 53 years old man, who had suffered from recurred tachycardia and palpitation came to our ward for help. According to his statement, this illness had happened about half one year ago, episodic left chest pain combined with dyspnea, cold sweating and syncope happened, he was sent to the Emergency ward of another medical center and admitted under the diagnosis of unstable angina. 24hours Holter's EKG showed Ventricular premature contraction and Paroxysmal atrial tachycardia. ECG-gating coronary artery CTA Tomography revealed complete Myocardial Bridge 1.2 cm at the anterior descending branch of the left coronary artery. The illness was subsided after treatment, so he was discharged. But the persistent tachycardia>130 beats/min every morning ` chest tightness ` palpitation and easily scared kept him away from his routine work, so he came to our ward for help.

As the principle of Chinese Syndrome Differentiation: Repeated tachycardia, chest tightness, palpitation, easily scared, afraid of cold, easily fatigue, easily sweating, pale and red tongue indicated the Qi and Yang Deficiency of the Heart. Obesity, hyperlipidemia, obstructive sleep apnea syndrome, deep and slippery pulse and the enlarged tongue revealed the Phlegm retention. So, Gui-zhi decoction • Sheng-Mai San and Er-Chen decoction were prescribed in combination with herbs of nourishing the Qi and Blood of the Heart. The Recurrent tachycardia was controlled progressively within 3 weeks. The chest tightness and palpitation gradually disappeared in the following 3 months. As the illness was under stable controlled, the Chinese medicine was discontinued in the following four years. As the recent telephone follow up, the patient said the paroxysmal tachycardia, chest tightness and palpitation had never recurred up to now.

Western Medicine controlled unstable angina and paroxysmal atrial tachycardia of the myocardial bridge patient during the hospitalized period. After discharged, Chinese medicine solved the repetitive tachycardia, chest tightness and palpitation of the patient, and recover him to his normal lifestyle.

Key words: Myocardial bridge \ Unstable Angina \ Tachycardia \ Qi Deficiency of the Heart. \ Gui-zhi decoction \ Sheng-Mai San

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#### Integrated Treatment of Acupuncture and Speech Therapy for Poststroke Aphasia: a Case Report

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<sup>1</sup>Department of Chinese Medicine, Buddhist Dalin Tzu Chi General Hospital, Chiayi, Taiwan

#### **Abstract**

Cerebrovascular disease is the fourth leading cause of death in Taiwan in 2020, and aphasia is one of the common sequelae after stroke. Impairment of language understanding or expression often causes severe social problems in patients and seriously affects the quality of life. This was a case of 55-year-old male who has difficulties in language understanding and expressing for two days. He went to the emergency department due to cold sweating, chills, chest tightness, dizziness and inability of expressing on 2019/07/25. At that time, he was diagnosed with a left cerebral infarction and was hospitalized for further treatment. The patient's consciousness was clear and was independent in ADL. But he was unable to express in words and had difficulties in hearing and reading comprehension. The patient's usual diet was heavy taste and preference for red meat, and had a history of hypertension and hyperlipidemia without medical control. He had 35 years of smoking history and often had a drink before sleeping. The overall complexion of his appearance was dark red, the tongue was dry, the coating was yellow and greasy, and the sublingual veins were obviously irritated. He was diagnosed with phlegm and blood stasis blocking collaterals with heat transmission and confused orifices in Chinese medicine syndrome type. After the treatment with integrated Chinese and Western medicine, his language function gradually recovered, and most of the subtests in the Concise Chinese Aphasia Test showed significant improvement.

Key words: stroke, aphasia, acupuncture

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### 「中西整合醫學雜誌」投稿簡則

#### Journal of Integrated Chinese and Western Medicine

- 一、凡與中西醫藥整合有關之論著原著(包含基礎研究、臨床研究、文獻綜述meta-analysis)、病例報告、專題報導均為本誌刊載之對象,但以未曾刊載於其他刊物者為限。
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- 三、凡投稿經同儕審查及編輯委員會同意登載於本誌之著作,其著作財產權溯及投稿時移轉予臺灣中西整合醫學會所有;除商得本誌編輯委員會同意外,不得轉載於其它雜誌。惟著者仍保有集結出版、教學及個人網站等無償使用之權利。
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Wu BY, Liu CT, Su YL, Chen SY, Chen YH, Tsai MY. A review of complementary therapies with medicinal plants for chemotherapy-induced peripheral neuropathy. Complement Ther Med. 2019 Feb;42:226-232.

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c. 引用書籍中之章節:

Partridge H, Hallam G. Evidence-based practice and information literacy. In: Lipu S, Williamson K, Lloyd A. (eds.) Exploring methods in information literacy research. Wagga Wagga, Australia: Centre for Information Studies; 2007. p.149–170

d. 引用網站:

Cancer Research UK. Cancer statistics reports for the UK. http://www.cancerresearchuk.org/aboutcancer/statistics/cancerstatsreport/; 2003 Accessed 13 March 2003.

e. 引用數據集 (dataset):

[dataset] 6. Oguro M, Imahiro S, Saito S, Nakashizuka T. Mortality data for Japanese oak wilt disease and surrounding forest compositions, Mendeley Data, v1; 2015. https://doi.org/10.17632/xwi98nb39r.1.

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## 目錄

原著O	rigin	ıal
-----	-------	-----

經皮穴位電刺激(TEAS)介入安非他命成癮戒治的治療成效 巫孟萱、 李聰界*、 許文郁、 羅綸謙、 陳運泰1
Efficacy of TEAS Intervention on Rehabilitation of Amphetamine Addiction
Meng-Shiuan Wu, Tsung-Chieh Lee*, Wen-Yu Hsu, Lun-Chien Lo,
Yun-Tai Chen······18
皮膚疾病就醫行為及臨床處方與氣象因子相關分析初探
以東部某醫院中醫門診為例 謝明穎、鄒牧帆、何宗融、葉明憲#、陳怡真*············19
翻明賴、鄭伐帆、阿示融、集明惠。、陳信真 ····································
treatment behaviors and clinical prescriptions of skin diseases
and meteorological factorsTake the TCM clinic of a hospital in
the eastern Taiwan as an example
Ming-Ying Hsieh, Mu-Fan Tsou, Tsung-Jung Ho, Ming-Hsien Yeh#,
Yi-Chen Chen*·····33
病例報告 Case Report
心肌橋合併心律不整的中醫診療病例報告
陳曉瑱、施志遠、許堯欽*······34
Myocardial Bridge with Arrhythemia: A case report of Chinese
Medicine
Hsiao Tien Chen, Jhih Yuan Shin, Yao Chin Hsu*······48
中風後失語症之針灸介入結合語言治療:病例報告
林伯儔、 林正德、 阮膺旭*······
Integrated Treatment of Acupuncture and Speech Therapy for Poststroke Aphasia: a Case Report
Po-Chou Lin, Cheng-Te Lin, Ying-Hsu Juan* ······68

