projections, in both phase 1 and phase 3, with an electrical finder will identify the active points in need of treatment in either phase. Only electrically active points are treated. An auricular approach could be a solitary approach or in used in combination with general acupuncture treatment.^[4]

REFERENCES


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A persistent dry cough is a common symptom. The usual causes include postnasal drip, gastroesophageal reflux, asthma, drugs (e.g., angiotensin-converting enzyme inhibitors), irritants (smoking), and cancer. However, when these have been ruled out and/or treatment is unsuccessful in relieving symptoms, acupuncture is worth trying.

In Chinese medicine, cough is due to a wide variety of interior to exterior patterns, and the classification and treatment options are extensive.^[1] However, a persistent dry cough unrelated to Wind-Cold-Damp will likely be due to an interior pattern based on Lung Qi or Yin deficiency or simply Qi stagnation. A simple, yet elegant, approach originally described by Tian involves electrical stimulation of local neck points combined with a peripheral point based on 1 of the 3 basic patterns.^[2,3] These patterns can be differentiated by tongue and pulse findings (Table 1). One distal point and 2 local points are chosen for each session. Local points include ST 6 (Jiache), CV 22 (Tiantu) and 23 (Lianquan), and 2 extra Meridian points (Panglianquan and Qianyifeng), which stimulate the nerve innervations to the throat. During a treatment session, one or another of the Extra points are needled 3–4 cm toward the throat in order to get the Qi sensation. Electrical leads are attached left and right, and then low-frequency stimulation is applied at 1–2 Hz for 10–20 minutes. A course of 5–10 treatments, 2–3 times per week, will give an indication of whether treatment will be effective and can be repeated periodically.

Herbs are always useful as an adjunct to address constitutional factors. For example, for Lung Qi deficiency, Astra 8 (available from Health Concerns);^[4] for Lung Yin deficiency, Wise Judge; and for Qi stagnation with phlegm, Augmented Plum Pit Qi (both available from Kan Herbs).[5]

REFERENCES


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Table 1. **Common Cough Patterns with Tongue/Pulse Findings and Treatment Options**

<table>
<thead>
<tr>
<th>CM Pattern</th>
<th>Pulse</th>
<th>Tongue</th>
<th>Distal points</th>
<th>Local points</th>
<th>Herbs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yin Deficiency LU/KI</td>
<td>Thready, rapid</td>
<td>Red, striped</td>
<td>LU 7, KI 3</td>
<td>CV 22,23 plus Panglianquan*</td>
<td>Wise Judge</td>
</tr>
<tr>
<td>Qi Deficiency LU/SP</td>
<td>Feeble</td>
<td>Normal color, thin white coat, fluted</td>
<td>SP 6, LU 7</td>
<td>or</td>
<td>Astra 8</td>
</tr>
<tr>
<td>Qi/Blood Stagnation and Phlegm Stasis</td>
<td>Wiry/slippery</td>
<td>Dark red, yellow coat</td>
<td>SP 6, LV 3,4</td>
<td>ST 6 plus Qianyifeng*</td>
<td>Plum Pit Qi (augmented)</td>
</tr>
</tbody>
</table>

*Panglianquan is located 1.5 cun lateral to CV 23 (Lianquan) and 1.5 cun superior to ST 9 (Renyng). Qianyifeng is located halfway between TH 17 (Yifeng) and the angle of the mandible. Graphic illustrations of these points can be found in Tian’s original articles.[2,3] CM, Chinese medicine.