

Acupuncture treatment of torticollis in a foal

Duck-Hwan Kim*, Jianzhu Liu, Jung-Yeon Lee¹, Philip MacManus², Padraic Jennings²
Karl Darcy², Fiona Burke², Philip A. M. Rogers³

College of Veterinary Medicine, Chungnam National University, Daejeon 305-764, Korea

¹Obihiro University of Agriculture and Veterinary Medicine, Obihiro, Hokkaido 080-855, Japan

²Glenina Veterinary Clinic, Galway, Co. Galway, Ireland

³Teagasc Grange Research Centre, Dunsany, Co. Meath, Ireland

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Abstract : A 6-month-old thoroughbred filly foal had torticollis and circled towards the right side. A local veterinarian treated her twice using dexamethasone for 1 week but there was little clinical improvement. Needles were inserted into Ting points of both hind limb and one ocular acupoint (shang jiao area from GB01). Injection acupuncture (dexamethasone, twice/week) was used at GV16, GB20, BL10 and LU07, for the neck and head. Acupoint GB34 was added to those points at session 4. In addition, a trigger point in the left neck was injected with 0.2 ml (200 µg of apitoxin) of bee-venom diluted with 1 ml of 2% lidocaine from session 1 to session 3. At session 2, the symptoms had ameliorated a little. At session 3, they were much improved; the right ear was completely normal and the neck could be moved about 60% of normal range. At session 4, nodding was possible and stiffness of the neck was much improved, having returned to about 80% of normal range. Three days after session 4, the symptom of torticollis had disappeared completely and the foal could walk in a straight line. In conclusion, the present patient was a case with equine torticollis which showed favourable therapeutic response by combination of needle-acupuncture plus injection-acupuncture with dexamethasone and apitoxin.

Key words : horse, injection-acupuncture, oculo-acupuncture, torticollis

Introduction

Torticollis (wry-neck, unilateral bent neck) can be congenital, including contracture of the neck muscle by abnormal fetal posture *in utero*, or acquired, including trauma of the cervical vertebrae and muscles [1, 4, 11, 16]. There are many reports of torticollis in humans [7, 12, 15], horses [1, 4, 6], goats [2] and dogs [10]. Animals with torticollis usually have a unilaterally bent neck and circle towards affected side. Treatments include physical therapy, including warm pack and massage, and drug therapy such as dexamethasone, vitamin B₁ and ATP [2, 12, 15].

Complementary or alternative medicine has been widely used to treat many human and animal diseases [1]. Oculo-acupuncture(oculo-AP)-more accurately called periorbital AP-is a new modality of AP therapy. In this therapy, there are thirteen special points on eight parts around the orbit [21]. It is based on the ancient medical

concept by Hua Tuo, a Han Dynasty physician that diagnoses diseases by inspecting eyes and applying needles at acupoints around the eyeball and on the orbital edge. Oculo-AP had good therapeutic effects in human diseases, such as vomiting [17, 18, 20], acute muscular sprain [3, 19], apoplexy and hemiplegia [9, 13] and pain [21].

We report a case of equine torticollis that responded favourably to AP treatment.

Case

History

The patient was a 6-month-old thoroughbred filly foal reared at Gort, County Galway in Ireland. She showed symptom of torticollis and circled towards the right side by falling down after jumping. A local veterinarian treated her twice with intramuscular dexamethasone injection for one week but there was little clinical improvement.

*Corresponding author: Duck-Hwan Kim
College of Veterinary Medicine, Chungnam National University, Daejeon 305-764, Korea
[Tel: +82-42-821-6756, Fax: +82-42-821-8903, E-mail: dhkim@cnu.ac.kr]



Fig. 1. The present patient with torticollis.

Clinical findings

On presentation at Glenina Vet Clinic, the foal had torticollis to the right and could not walk in a straight line (Fig. 1). The right ear was a little floppy. The muscles in the left neck were markedly spastic and had a trigger point.

Acupuncture treatment

Needles were inserted into both hind limb equine Ting Points (GB44 and BL67) and one ocular acupoint (shang jiao area, above the lateral canthus of the eye, oblique insertion from GB01) (Fig. 2). Also, injection-AP was used at GV16, GB20 and BL10 as local points, and LU07 as a distant point, for the neck and head. Each of those acupoints was injected with 0.2 ml mixture of 1 ml dexamethasone (Voren, Boehringer Ingelheim Ltd, UK, 10 mg/ml), diluted with 1 ml saline, twice a week. Acupoint GB34 was added to those points at session 4. Also, from session 1 to session 3, a trigger point in the left neck was injected with 0.2 ml (200 µg of apitoxin) mixture of bee-venom (apitoxin, Guju Pharmacological Co., Korea, 1 mg/bottle) diluted with 1 ml of 2% lidocaine hydrochloride (Huons Co., Korea). Treatment ended after session 4. At session 2, the symptoms had improved a little. At session 3, they were much improved; the right ear was completely upright position and the neck could be moved about 60% of normal range. At session 4, nodding was possible and the stiffness of the neck was much improved, having returned to about 80% of normal range. Three days after session 4, the torticollis had disappeared completely and the foal could walk in a straight line (Fig. 3).

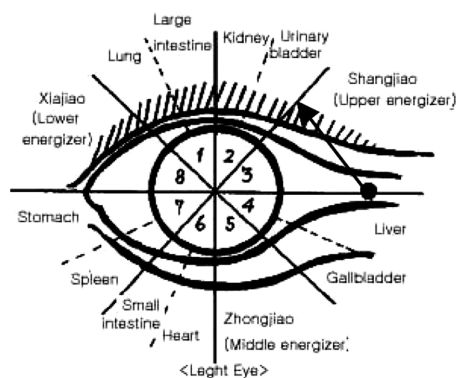


Fig. 2. Eye acupoint (Top: ocular acupoint used in a patient, bottom: needling direction).



Fig. 3. The patient after acupuncture treatment.

Discussion

This foal with torticollis responded favourably to needle-AP therapy (Ting-zone and oculo-AP) combined with injection-AP with dexamethasone and bee venom in neck.

Equine Ting-zone therapy is a diagnostic and therapeutic

method using reactive zones proximal to each hoof. Simple needling of the Ting-zones gave clinical improvement after a single treatment in 60-70% of 1,700 horses with various diseases [14]. Ting-zone AP was also applied in the present case, however, it was unclear whether it played a role for treatment of this patient. Further research should be performed to evaluate therapeutic effect by Ting-zone acupuncture alone in the future.

Favourable therapeutic responses by oculo-AP were reported in various human diseases such as vomiting [17, 18], acute muscular sprain [19], apoplexy and hemiplegia [9], and pain [21] in China. Oculo-AP was also applied in the present patient with torticollis, however, it was unclear whether oculo-AP played a role in treatment of this foal. The therapeutic effect by oculo-AP alone should be investigated in various animal diseases in near future.

Injection-AP with diluted dexamethasone was used in this foal also. Injection-AP produces better therapeutic effects on various diseases than those by conventional treatment methods, such as subcutaneous or intramuscular injection with the same drugs. Hong *et al* [8] reported that injection-AP with methionine at acupoint BL18 was more effective than laser-AP to recover liver damage in rats. In addition, it was already known that apitoxin has powerful anti-inflammatory and analgesic effects [5]. Apitoxin was injected into the trigger point of the muscle in spastic neck, and it may have helped by its anti-inflammatory and analgesic effect.

Conclusion

A six-month-old foal diagnosed into torticollis was treated by needle-AP and injection-AP, twice a week. The clinical symptoms of this patient became normal on three days after session 4. The present patient was a case with equine torticollis which showed favourable therapeutic response by needle-AP(Ting-zone and eye) combined by injection-AP with dexamethasone and apitoxin.

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