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HYPNOACUPUNCTURE: WELL-BEING CASE REPORTS

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Abstract: The Brazilian Ministry of Health approved the National Policy on Integrative and Complementary Practices, which includes *acupuncture* and *hypnotherapy*, among others. More and more people seek care with integrative practices, as they are minimally invasive, more natural and very well accepted for a range of treatments. The relevance of this study lies in associating, simultaneously, the integrative practices of *acupuncture* and *hypnosis*, *hypnoacupuncture*, a consolidated term from the evidence of the present work, whose proposition was to socialize the results obtained with *hypnoacupuncture* in a social action – *one day*, to encourage new clinical research.

Keywords: Acupuncture. Well-being. Hypnotherapy. Hypnoacupuncture. Case Reports.

INTRODUCTION

The Brazilian Ministry of Health issued Ordinance Number: 971/2006, which approved the National Policy on Integrative and Complementary Practices (PNPIC) in the Unified Health System, including acupuncture, among others. And Ordinance number: 702/20 18, included *hypnotherapy* in PNPIC, “a set of techniques that, through intense relaxation, concentration and/or focus, induces the person to reach an increased state of consciousness”; with the following therapeutic indications: fears, phobias, insomnia, depression, anguish, stress and chronic pain (BRASIL, 2006, 2018. ZANGARI; PEREIRA; MACHADO, 2023).

More and more people seek care from integrative practices, as they are minimally invasive, more natural and very well accepted for a range of treatments. The relevance of the scientific novelty of this study lies in associating, simultaneously, the integrative practices of *acupuncture* and *hypnosis*, *hypnoacupuncture*, a consolidated term from

the evidence of the present work, whose proposition is to socialize the results obtained with *hypnoacupuncture* in a social action – *one day*, to encourage new clinical research.

CASE REPORTS

The consultations took place in the Paróquia de São Francisco, Boa Vista, Roraima, Brazil, during the II Social Action, an initial forecast of 10 *hypnoacupuncture consultations*, however, interest exceeded expectations, 32 people signed up, but due to structure limitations (stretcher) and event closing time – *one day*, 23 people were assisted. Ethical emphasis is placed on the fact that people received all the information, clarification of doubts and signed their respective consents to be assisted.

The following information was collected: name; sex; age; profession; naturalness; nationality; pregnancy; personal and family health-disease history; chief complaint; symptom onset (0 to 10); emotions of joy, worry, sadness, fear, anger; favorite color; preferred location; final symptom I (0 to 10); and observations.

The adopted *hypnoacupuncture therapeutic interventions* were administered as follows: *acupuncture*, through the personalized selection of acupoints (*acupuncture* points), according to the individualized diagnosis; a sterile, single-use needle, brand Dong Bang, 0.8 cm and 0.18 mm in length and diameter, respectively, was used; average duration of 40 minutes, 15 for reception, anamnesis, diagnostic evaluation, planning and application of the needles and 25 with the needles in conjunction with hypnotherapy suggestions, for progressive muscle relaxation and well-being; there were good adherence to the interventions with no record of adverse events; the results were evaluated as satisfactory by the professionals.

Table 1 highlights the general data of *hypnoacupuncture care*: most females (65%); the most attended age group was 20 – 34 (43%); the main complaints were musculoskeletal pain (52%) and emotional pain with 48%; (anxiety, worry, sadness, mourning and depression); important social inclusions occurred, with people with special needs, others of Venezuelan nationality and pregnant women, with expressive improvement results (91%).

The present study adopted the standard international *acupuncture nomenclature*, in Portuguese and English (British 2) languages for the name of each meridian and the alphanumeric code of the acupoint (*acupuncture point*), with its respective *Pinyin* (use of names from the Chinese phonetic alphabet). Such conduct is justified to promote the broadest global exchange in the areas of research, teaching and clinical practice of *acupuncture* (WHO, 1993).

Graph 1 – Wonderful Vessels used, highlights the therapeutic indications for musculoskeletal and emotional pain (anxiety, worry, sadness, mourning and depression).

Graph 2 – Systemic acupoints used, in a similar way, also emphasizes energy therapy for diagnosed symptoms.

Considering ethical precepts, the data were anonymized to preserve the patients' privacy, each one received a letter to share their experiences regarding the main complaints (before) and their self-assessment right after the *hypnoacupuncture sessions*.

Patient **A**, reports: "difficulty sleeping, high degree of tension due to studying", right after the intervention: "light without weight on the back, a very good feeling, I would do it again"; **B**, "poor quality sleep, neck pain, occasional anger at those who don't look at me", after: "I felt very relaxed, calm, I would do it again"; **C**, "concern, anxiety, small episodes I keep mulling over", after: "very relaxed, emotion, I

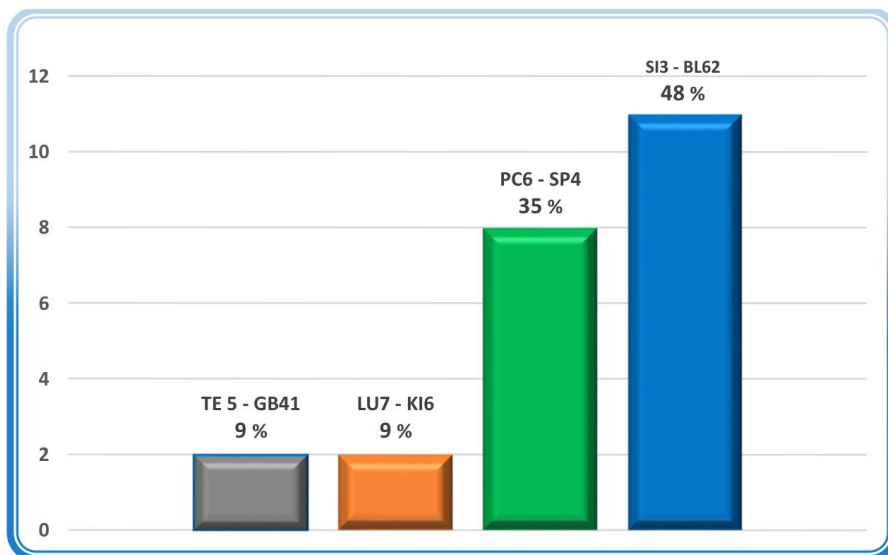
would do it again, well-being, the meditation was very good"; **D**, "tension in the cervical region, especially after a death in the family, concern about the job market", after: "relaxed, calm, calmer, I would do it again"; **E**, "a mother's mourning for 7 months, tired, I sleep badly, sadness because of the departure", after: "well-being, calmer, relax"; **F**, "I'm adapting to two changes, married life, I'm very worried about bills, living together", after: "I improved a lot, in time I didn't feel that way, good, very good, too relaxed, I needed it "; **G**, "I have a problem with migraines with vomiting, it started when I was 17", after: "very relaxing, very good"; **H**, "very anxious, undergoing *in vitro* treatment, fear of not working, terrified of frogs", after: "I relaxed a little close to what I was"; **I**, "fear and concern for a daughter who attempted suicide", after: "I would do it many times, relaxed, very relaxed"; **J**, "pain in the lower back near the kidneys, very worried, I take care of grandchildren, I have no energy", after: "more serene, relaxation in paradise"; **K**, "shoulder pain, nervous tension, knee pain for a year", after: "very relaxed"; **L**, "headache on the left forehead, a lot of worry, tension in the neck", after: "very relaxed, very well"; **M**, "looking for relaxation and low back pain", after: "mind and body relaxation"; **N**, "very tense, neck and shoulder pain", after: "tension relief, well-being, relief"; **O**, "pain in the back, wrists and feet", after: "improved little"; **P**, "search for relaxation", after: "take it for the first time, I felt good, congratulations"; **Q**, "lumbar, neck and right elbow pain", after: "100% relaxation"; **R**, "I want to relax", after: "very relaxed"; **S**, "pain in the left neck goes down to the chest and arm", after: "very well, relaxed, calm"; **T**, "seeking relaxation", after: "relaxed"; **U**, "cervical pain", after: "I wanted to sleep, lightness, well-being"; **V**, "pain in the wrist, back and feet", after: "relieved"; **X**, "lumbar and sciatic", after: "I am impressed, lightness, fatigue disappeared".

FEATURE	(n)	(%)
Service		
Signed consent	32	100%
Total attended	23	72%
Total unattended due to low stretcher and lack of time	9	28%
Gender		
Total female patients attended	15	65%
Total attended male	8	35%
Nationality		
Brazilian	21	91%
Venezuelan	2	9%
Patient with special needs		
Acoustics	1	4%
Physical	1	4%
Age group		
15 – 19	4	17%
20 – 34	10	43%
35 – 49	5	22%
50 – 59	3	13%
60 – onwards	1	4%
Chief complaint (reason for care)		
Musculoskeletal pain	12	52%
Emotional	11	48%
Pregnancy		
No	21	91%
Yes	2	9%
Result after care		
Significantly improved	21	91%
Little improved	2	9%
It didn't get better or worse	0	0%

Caption: (n), frequency; and (%), percentage.

Table 1 – General data on hypnoacupuncture care.

Source: Clinical Handbook.



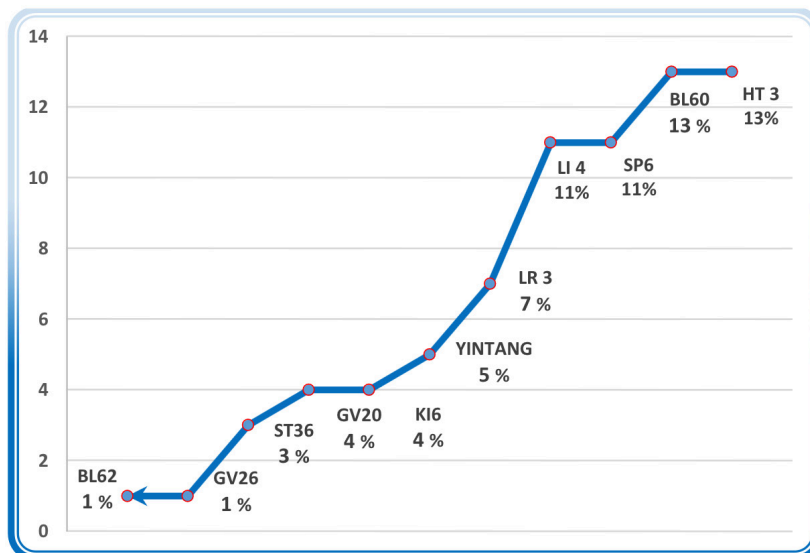
Subtitle: **BL**, Bladder Meridian; **GB**, Gallbladder Meridian; **KI**, Kidney Meridian; **LU**, Lung Meridian; **PC**, Pericardium Meridian; **SI**, Small Intestine Meridian; **SP**, Spleen Meridian; and **TE**, Triple Energizer Meridian.

Pinyin (use of the Chinese phonetic alphabet): **BL62**, *Shēnmài*; **GB41**, *Zúlíngqì*; **LI6**, *Zhàohǎi*; **LU7**, *Lièqùe*; **PC6**, *Nèiguān*; **SI3**, *Hòuxī*; **SP4**, *Gongsūn*; **TE5**, *Wàiguān*.

Standard international acupuncture nomenclature adopted (WHO, 1993).

Graph 1 – Wonderful vases used.

Source: Own authorship.



Subtitle: **BL**, Bladder Meridian; **GV**, Governor Vessel; **HT**, Heart Meridian; **KI**, Kidney Meridian; **LI**, Large Intestine Meridian; **LR**, Liver Meridian; **SP**, Spleen Meridian; **ST**, Stomach Meridian; **YINTANG**.

Pinyin (use of the Chinese phonetic alphabet): **BL60**, *Kūnlún*; **BL62**, *Shēnmài*; **GV20**, *Bǎihuì*; **GV26**, *Shuǐgōu*; **HT3**, *Shàohǎi*; **KI6**, *Zhàohǎi*; **LI4**, *Hegū*; **LR3**, *Tàichōng*; **SP6**, *Sānyinjīào*; **ST36**, *Zusānlǐ*.

Standard international acupuncture nomenclature adopted (WHO, 1993).

Graph 2 – Systemic acupoints used.

Source: Own authorship.

DISCUSSION

Acupuncture is the most widespread integrative practice in Brazil and about 80% of the member countries of the World Health Organization recognize its relevance, therapeutic mechanisms point to actions in three fundamental pillars: induction of analgesia; protect the body against infections and regulate physiological functions (FERREIRA, 2013. FERREIRA et al, 2020, 2021).

Montandon et al. (2019) highlight the benefits of acupuncture analgesia for elderly patients during dental surgical procedures, in particular by increasing the immune response and reducing stress and anxiety induced during dental procedures.

The Superior Court of Justice (2016) pacified an understanding of the practice of *acupuncture*, based on respect for cultural and sociological heritage, as it constitutes an ancient activity on the eastern side of the planet and, as long as there is no law that regulates acupuncture, the *principle* prevails of the freedom of the profession of the Brazilian legal system: “the exercise of any work, trade or profession is free, meeting the professional qualifications established by law”.

According to Neubern and Bioy (2023), in the work of *hypnosis*, science and contemporary Universities register complex relationships and their challenges, both in the field of research and clinical activities. They conclude by highlighting the diversity of theoretical and methodological perspectives for the integration of human subjectivity and understanding of *hypnosis*.

Evidence proves the relevance of *hypnotherapy* as a non-pharmacological therapeutic tool that is still little used and that can contribute to effective sedation, maintaining patient compliance and also helping patients to recover from anxiety, phobia and severe gag reflex (FERREIRA, 2022).

Studies by Neubern (2020), contribute to elucidate the relationship of hypnosis in chronic pain therapy, use iconicity, which refers to the ability of signs to transmit the qualities of the objects they represent and favors hypnosis communication.

Erickson et al. (1998), emphasize the advantages of *hypnosis* applied to dentistry, to reduce the patient’s apprehension, anesthesia, anxiety or nausea, patient fatigue, postoperative recovery, help in routine procedures and to reduce the dentist’s tensions.

Badra (1987), highlights the importance of *hypnotherapy* to promote human well-being and, therefore, for society and also to develop research with the aim of better understanding human capabilities and potential.

Regarding the limitations of the study, as it is a service in social action - *one day*, there is no way to predict the number of interested people, in this specific case, it exceeded the expectation of 10 to 23 calls, an increase of 230% beyond the initially forecast, therefore, the main lessons that can be drawn are: in addition to consumables, there was a need to look for more stretchers to meet this high spontaneous demand, which serves as a parameter for predicting inputs in another event of a similar nature.

It can be concluded that the strengths of these reports were certainly the interdisciplinary integration between professionals, which favored a more humane, welcoming, holistic service and also the relevant scientific therapeutic novelty of the synergism of the simultaneous association of *hypnotherapy* with *acupuncture*, *hypno-acupuncture*, term that is consolidated from the evidence of the present work and that new clinical research is recommended, whether in social action - *one day*, as well as others with a methodological design of a control group in a longitudinal study.

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AUTHORS' PARTICIPATION

Alberto Magalhães Cardoso de Medeiros Ferreira, 2nd Generation Acupuncturist, responsible for *acupuncture care*, preparation and revision of the text for submission.

Antonio Alberto de Medeiros Ferreira, Post-Doctor, responsible for the *Hypnotherapy service*, study design, guidance and final approval of the text for submission.

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