Acupuncture Points and Myofascial Anatomy

UNITED STATES, April 27, 2021 /EINPresswire.com/ -- The acupuncture meridians are beginning to be better understood in the context of myofascial anatomy. Taking an anatomical perspective based on myofascial lines, gives substantial credibility to the effects of acupuncture. Researchers have found that acupuncture effects the fascia and connective tissues in a variety of ways, and that signals from fascia can translate into neurological changes. (1)

According to the detailed anatomical research of Tom Myers there are 12 myofascial lines. (2) While these are similar to the traditional meridians, there are distinctive differences which explain many things about point functions and other phenomena observed in acupuncture. For instance, there are several points on the hands which are known to treat neck pain. These points include SI 3, SJ 3, SJ 5 and Luo Zhen. From a myofascial perspective, small intestine 3 is located on what is known as the Deep Back Arm Line (DBAL), while the other points are on the Superficial Back Arm Line (SBAL).

The large intestine and triple warmer meridians are located on the SBAL, and this myofascial line includes the dorsal fascia of the hands, the extensors, deltoids and trapezius muscles. This creates a direct myofascial link between the trapezius and points like SJ 3 and SJ 5. The point small intestine 3 is also commonly used for neck and spinal pain, but this point is located on the DBAL. The deep back arm line includes the deeper muscles of the arms, shoulders, back and neck such as the levator scapulae, rhomboids, and rotator cuff muscles. Distinguishing between these two fascial arm lines is clinically useful and can greatly assist in making better point selections.

For instance, pain at GB 20 and GB 21 may be effectively treated with SJ 3 and SJ 5 as the gallbladder points are located on the trapezius muscle. As SJ 3 and SJ 5 are on the SBAL, which includes the trapezius, we can expect these points to have an effect on GB 20 and GB 21. A myofascial approach to understanding acupuncture, also corresponds with many traditional theories about connecting meridians and meeting points. The gallbladder and triple warmer meridians are both connected via their designation as shao yang meridians, which essentially is the recognition that these lines transverse the lateral aspect of the body. Similarly, GB 20 and GB 21 are both meeting points for the GB and SJ meridians.

In traditional meridian theory the small intestine and urinary bladder meridians are also known as the tai yang channels. From a myofascial perspective, the SI meridian is on the DBAL and includes the levator scapulae which attaches to the cervical vertebrae and medial superior border of the scapula at SI 13. The rhomboid muscles are also located on the DBAL and will be

affected when needling small intestine points. Therefore, needling SI points like small intestine 3 on the hands and arm, can benefit the cervical and upper thoracic regions via the connections to levator scapulae and the rhomboids. The acupuncture point UB 11 is considered a meeting point for the SI and UB meridians, and this corresponds with the rhomboid attachments at the vertebrae T1.

The urinary bladder meridian closely parallels the myofascial chain known as the Superficial Back Line (SBL). Anatomically, this line begins in the plantar fascia, extends up the gastrocnemius, hamstrings, erector spinae, and includes many of the small neck muscles and occipital fascia. This would provide an explanation for why points like UB 62, UB 60, UB 59, UB 58, and the 7 Tigers (77.26) can be useful for treating neck and shoulder pain. Additionally, there is a special group of points located on the achilles tendon (Tung's points 77.01 - 77.04), which are used for treating occipital headaches, whiplash, and disorders of the cervical vertebrae. These points are recognized in Master Tung acupuncture and are highly effective. As the achilles tendon is part of the SBL, we can understand how needling these points could effect the occipital and cervical regions when we consider the myofascial connections.

Learn more at Acupuncture and Fascia

1. Bianco, Gianluca. Fascial neuromodulation: an emerging concept linking acupuncture, fasciology, osteopathy and neuroscience, European Journal Translation Myology, 2019 Aug 2

2. Myers, T. Anatomy Trains, Elsevier, 2009

James Spears
Integrative Healing Society
+1 415-367-3610
email us here