The Acu-Detox Ear Acupuncture Protocol

The object of the ear acupuncture protocol in this application is to bring into play a resourcefulness previously unavailable to the recipient - over the period of approximately one month, three weeks of which is taken up in receiving at least fifteen treatment sessions during the first 21 days.

Unlike being treated with medication, no treatment-by-treatment relief should be expected by recipients, and in fact a temporary intensification of symptoms experienced before treatment is sometimes seen to be part of the process. Those who are looking for instant relief should probably consider other methods. You may elect to take medications concurrently with this protocol. It may be that your need for them will be lessened afterwards.

Having said that, once the resourcefulness appears, mainly in the several weeks after the three weeks of treatments, the recipient will have better means to encounter and resolve stress without the necessity of trying (as occurs in psychotherapy) to dismantle dysfunctional patterns. For persons involved in psychotherapy, problem solving is likely to be enhanced. For those in learning situations, learning capacity is likely to be enhanced. For those who are vulnerable, openness may replace vulnerability. These fundamental changes in functionality tend to remove symptoms over the long run, by providing recipients with fuller access to the ability to be fully present to the situations their lives deal them.

How The Acu-Detox Protocol is Administered

Recipients make available a period of one hour at least 5 days out of every seven days for a period of three weeks. The acupuncture is administered with #34 gauge 1/2" acupuncture pins from a sterile manufacturers' package. These pins are inserted at 5 precise locations in each ear (10 pins altogether.) The pins are inserted to a depth of about 1/8" - or to the surface of the ear's cartilaginous skeleton. Deeper insertions are unnecessary, but are usually not problematic. The placement location of the pins is, however, crucial. The nature of the ear is such that accurate insertion is possible by familiarity with the ear's distinct architecture, even allowing for person-to-person variations. The ear is also relatively devoid of major vessels and nerves, such that bleeding, pain and damage to tissues are rare occurrences.

The ear has two concave surfaces which I like to call satellite dishes due to their similarity to the dishes in use in many households today. The larger one, which also shares the same function as a satellite dish, is right in front of the ear canal. Sound bounces off its surfaces and is directed into the ear canal. The dish is about the size of one's index finger, and a finger can easily be inserted to locate it. The second is in the upper half of the ear and remote from the ear canal, and is more oval, where the lower one is more rounded. In the accompanying picture, the FIVE acupuncture sites are represented by orange triangles, THREE of which (Lung, Sympathetic and Shen Men) are located by
their positions in relation to the two dishes. The names of the points are relevant to Five Element Theory, the basis of the Chinese acupuncture system, and should not be linked to Western connotations of the names, except as labels.

The Helix and Plateau

The architecture of the ear is further defined by the ear being roughly divided into an upper half and a lower half. The rim of the ear, as it reaches the top of the ear from the outer edge becomes a cartilaginous fold known as the HELIX. The HELIX, as it descends along the inner border of the ear, forms a spiral, becoming horizontal and dividing the ear into the two halves. At the end of the HELIX the architecture of the ear forms a plateau of tightly stretched skin, such that this area is often seen as shiny. (The ears pictured here are not shiny in this area, reminding us that the descriptions are relative and approximate at the best.) This plateau will be used to locate another of the acupuncture points - the Liver Point.

The Point Locations

The left ear is used here as a model, with the right ear added at the end so that the points are just as easily seen on the opposite side.

Point #1 is the LUNG Point. It may be located by finding the centre of the lower satellite dish.

Point #2 is the KIDNEY Point, which is found by tracing a mental straight line directly upward with the recipient sitting upright, crossing over the HELIX and locating this point in the cleft between the upper plateau, and the HELIX, as close to the upper border of the cleft as is feasible.

Point #3, the LIVER Point, completes a triangle with the previous two points, and is found along the upper part of the plateau formed by the HELIX, as shown above.

Point #4, SHEN MEN is found along the rim of the upper satellite dish. The oval of the dish is tipped slightly downward in most ears, drawing a mental line across the width of the
oval, SHEN MEN is located just above such a line, along the rim of the oval.

Point #5, **SYMPATHETIC**, is behind the HELIX, so to see it, move towards the back of the person and view it from behind so that you can see behind the rim. It is located more or less opposite to SHEN MEN, just below the imaginary midline, along the edge of the upper plateau, and just above the cleft below. Looking at this area from the back, the oval seems even more tipped downwards than from a side view.

People have asked me about inserting the pins themselves. The location and the necessary preciseness dictates strongly against doing so. Even with one or more mirrors, such insertion is at best difficult and at worst bound to be inaccurate. Do not try to insert pins yourself.

There are several sites on the internet which show the location of the points which can be consulted for comparison. Several people without full acupuncture training have been taught by NADA how to insert these points.

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**During the Session, and Removal and Care of Pins**

When the pins are inserted they may temporarily cause slight pain. This does not last and the hour will be spent without discomfort. A pin which continues to cause discomfort may either be removed or pushed a little deeper. During the session recipients may talk to others or simply relax. Activities such as watching television, reading or doing mental work are discouraged in order to increase the practice of presence which is made available.

If a pin falls out during the session it is not necessary to reinsert it unless this is right at the beginning. Some practitioners may feel differently about this. We all find our own best practice.

In response to my most frequently asked question *"Never mark the pin locations. Pins will drag this material into the body and act like a tattoo - or worse."*

When the pins are removed, they are simply
pulled out. Occasionally a pin site will bleed, but this is easily stemmed with a Kleenex tissue. Some people use the pins for subsequent sessions (but never with other recipients.) If they are to be reused, they should be stuck in a Kleenex used like a pincushion and stored in an envelope. THIS DOES TO CONSTITUTE ADVICE TO PROCEED IN THIS WAY.

It seems, in my experience both inadvisable and of little value to engage in talk sessions (psychotherapy) while the three week course is in play. The person is in an "in between" state, and little progress will be made. I say this, even though the recipient may experience the particular rigidity of their traditional coping mechanisms and defenses during the period. It is best, simply, to realize that these will happen and to observe them in passing. Talking will not generally relieve them, and may in fact make reactivity worse. This is in contrast to the value of talking things through after the sessions are complete.

I AM OBVIOUSLY UNABLE TO TAKE RESPONSIBILITY FOR CLIENTS NOT UNDER MY DIRECT CARE. THE INFORMATION ABOVE IS TO ASSIST MY COLLEAGUES IN THE WIDER USE OF THIS VALUABLE PROTOCOL AND DOES NOT SUBSTITUTE FOR PROPER TRAINING.