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Acupuncture Can and Should Be Safely Practiced in Civilized Social Settings

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Acupuncture is known to have minimal risk ^{1, 2}, and has been practiced for more than 2000 years. Serious adverse events including pneumothorax, however, are not unheard. ³ Safe practice of acupuncture requires informed and accordant actions of health professionals, patients, and the society at large.

On April 28 in 2011, media reported a case of laparoscopic surgery to remove an acupuncture needle (60mm needle body and 20mm handle), which penetrated the right bronchus of a former president of South Korea (serving from 1988 to 1993), Tae-Woo Rho.⁴ The presence of an acupuncture needle was only found by an X-ray during the examination of a chest pain occurred about three weeks after a session of acupuncture. Despite the official petition from the Association of Korean Medicine to release the identity of the person performed the acupuncture; the case was mysteriously closed without releasing any enlightening information on how the needle ended there. An allegation that this was an unlicensed practice of acupuncture was popularized through media.⁵

The case reported by Kang in this issue reminds me of the unrest of the above case. ⁶ Through communication with the author, I learned that the patient was 60 year old women, who refused to answer the reason for receiving the acupuncture treatment. The allegedly unlicensed practitioner inserted the long-needle into the patients' abdomen, and later at the ER reported that the needle was stuck, and he was only able to pull out the handle. With missing investigative documentation, I reconstructed the circumstances based on the author's reply and my clinical and educational experiences to establish some facts as follows in italics. *After retaining the needle for a while, as he was trying to remove the needle, he realized the muscles around the needled site were tightly grabbing the needle, and they were not going to release it. Being panic, he hurried to pull it out hard; as a result the needle handle got separated from the needle body.* Hence when the patient was surgically operated, only needle body (73 mm in length) was found in the left side of abdominal aorta sheath at the level of L3. My best way to interpret is this is an ill handled case of a stuck needle.

Stuck needle is rather a well-documented adverse event, which every basic training of acupuncture covers and any qualified practitioner should be confident to handle.⁷ This phenomenon is attributable to muscle spasm, tissue fiber entanglement around the needle shaft by rotation technique, patient's anxiety and changing position during the retention of a needle. It is instructed to reassure and relax the patient, disentangle by rotating the needle in reverse direction, gently massaging around the needled site or even inserting another needle at nearby site to divert the patient's attention, or restore the initial position when needle was placed before withdrawing the stuck needle. It is a fundamental rule not to forcefully pull out the stuck needle, which seems exactly what caused the case reported here.

In my opinion this case illustrates multiple issues deserving full investigation. This should not only be published in English speaking specialty journal but also in medical journals that doctors of Korean Medicine (currently the only medical professionals in Korea licensed to practice other than around 200 acupuncturists from the past regulation) read. Furthermore, detailed investigation of the whole affair has to be carried out and be available to the public. Any attempt to cover up the truth blinds people, and deteriorates a society.

Lessons from this case include 1) patients should seek acupuncture only from a qualified and regulated provider or be aware of their risk of not doing so; 2) only confident trained and professionally licensed person should offer risk carrying treatment; 3) parallelized system of medicine may take a risk of paralyzing the medical practice of a society. The lack of cross talk between the systems of Western originated medicine and Korean medicine within the parallel educational and licensure system that Korea has juggled over the past six decades requires urgent attention from the perspectives of people, patients. In summary, acupuncture, a supposedly minimally risky and beneficial procedure, can only be safe when stake holders work together.

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