

### **Service Priorities and Programmes**

### **Electronic Presentations**

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# Body electro-acupuncture and auricular acupuncture treatment to improve slow transit constipation

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### **Introduction**

The functional outcomes of contemporary physiotherapy treatments, medications or even surgery for constipated patients with the diagnosis of colonic slow transit are in general not very promising. According to the Cochrane Review, the body electro-acupuncture and auricular acupuncture treatment may help patients with colonic transit constipation.

# **Objectives**

1. To investigate the difference in colonic transit time measurement between patients with and without electro-acupuncture and auricular acupuncture treatment. 2. To improve the constipation management service especially for patients with colonic slow transit constipation. 3. To plan for the extension of the physiotherapy service in terms of electro-acupuncture for constipated patients with colonic slow transit.

# **Methodology**

A "Pre-test" vs. "Post-test' design was employed. SPSS was used to analyze the results and the p-value was set as less than 0.05 for statistically significance. All subjects diagnosed as colonic slow transit constipation had the body electro-acupuncture and auricular acupuncture to the specific acupuncture points (body acupuncture points: ST 25, ST 36, ST 37, RN 12, GB 34 and LI 11; auricular acupuncture points: CO 7 and HX 2; electrical stimulator settings: 3&10Hz, 300µs, Fast & Slow mode, 30 minutes with comfortable tingling sensation) for 8 sessions. Assessments were done in the first session and the last session. The outcome measures were categorized as: (1) Colonic transit time; (2) Frequency of defecation per week; (3) Level of straining effort; (4) Straining time; (5) Subjective improvement (NGRCS)

# **Result**

From March 2012 to January 2013, totally 8 subjects (3 males & 5 females) were

recruited in this study. Colonic transit time reduced by 66.5% (pre: 20 hours, post: 6.7 hours, p=0.15) in day 7; the frequency of defecation per week increased by 29% (pre: 3.1 times/ week, post: 4 times/ week, p=0.45); the level of straining effort decreased by 39.5% (pre: 7.6, post:4.9, p=0.02\*); the straining time shortened by 42.4% (pre: 13.9 minutes, post: 8 minutes, p=0.13) and the mean of NGRCS was 5.9. Clinically, the results are very encouraging. However, only reducing in the level of straining effort is statistically significant, the sample size is too small to show significance in other aspects. Future study with larger sample size may be indicated to stipulate the positive effect of body electro-acupuncture and auricular acupuncture for patients with slow transit constipation.