# Acupuncture Treatment at Suo-Xi Specialized Hospital in Prolapsed Lumbar Intervertebral Disease (PLID): A Case Study

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### Abstract

**Background:** Low back pain and sciatica are two of the most common types of medical complaints. This change will result in fewer hours worked, which will relieve pressure on the economy on a national level. These folks must first complete a comprehensive medical examination before initiating therapy for their condition. Inadequate medical or surgical therapy increases the risk of this developing, making it more probable that it will occur. The purpose of this research is to investigate whether or whether traditional PLID therapy may be improved by acupuncture. **Methods:** This inquiry took place at Suo-Xi Hospital (Acupuncture) at Shaan Tower, Chamelibag, Shantinaga, Dhaka, Bangladesh. A 54-year-old male patient has been complaining of lower back discomfort for the last fifteen years. **Results:** The results of the follow-up study were excellent. The patient's lower back pain, which he had been suffering for fifteen years, was no longer present. **Conclusion:** Patients with PLID may benefit from acupuncture, according to this research.

Keywords: PLID, Acupuncture, Acupuncture, Physiotherapy, Mobilization, Manipulation, Stretching, Chinese Method, Low Back-pain, lumbar disc.

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Received: 02 January 2023

Revised: 09 February 2023

Accepted: 24 February 2023 P

Published: 30 March 2023

## Introduction

Chronic non-specific low back pain (CNSLP), which cannot be traced to a single cause, affects 23% of individuals in developed countries.<sup>[1]</sup> In addition to medical expenditures, time off from work, and the incapacity to work, CNLBP causes an increase in all of these factors. Treatments that don't rely on medicine to alleviate chronic back pain are successful despite worries about the long-term effects of paracetamol, non-steroidal anti-inflammatory medications (NSAIDs), and opioids.<sup>[2-3]</sup> In the event of a catastrophic collapse of the annular fibers, high biomechanical loads may cause disc material to seep from a healthy, normal disc. When the annulus fibrosus and the annular radiculus of an intervertebral disc are ruptured, the result is condivergent disc herniation (PLID) or sliding disc (slipped disc). If you lose bowel or bladder control, you need immediate medical attention. A ruptured or herniated lumbar disc may be to blame for lower back and leg pain. Other symptoms of a herniated disc include pain, numbness, or tingling in the legs. Coughing, sneezing, or bending over seems to exacerbate the agony. Disk dryness in the intervertebral space is the root cause of prolapsed disc disease. Back and sciatica pain may

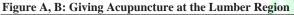
be caused by many different disorders, including lumbar disc disease. Lumbar spine herniated disc is shown in this article. About a third of all cases of back pain may be attributed to the degeneration of the lumbar discs. Patients may suffer pain, weakness, and a loss of touch if nerve fibers that provide sensation to the skin are compressed by the hernia.<sup>[4,5]</sup> PAIN may move down a limb, down the calf's outer surface, and even into the foot when a nerve is damaged (sciatica). Between the fourth and fifth lumbar vertebrae, or between the fifth lumbar vertebra and the first sacral segment, nerve root impingement is most common. It has been shown that those who work in the construction, manufacturing, food service, and transportation industries are more likely to develop PLID. When PLID is present, everyone's driving danger goes up, whether they're a professional or not. Domestic service, private service, and garment industry jobs for women all pose a risk. These women are just as common as their male colleagues in the workforce. PLID sufferers are more likely to be hospitalized than their colleagues who do not have the ailment, according to medical data.

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# Case Report

A 54-year-old man who had been coming to our facility for the preceding fifteen years complaining of increasing low back discomfort finally got some relief. According to the patient, the discomfort had been becoming worse for some time and needed to be addressed. The key issue of the patient was that their pain level had progressively deteriorated during their therapy. It had been seven years since he initially reported experiencing troubles with the condition before opting to seek medical attention. This experiment was carried out in a laboratory under constant observation in a controlled environment. MRI results on the cervical spine also demonstrate that PLID is compatible with these findings, which is in line with what was reported. This is consistent with what was discovered. In line with our results, this seems to be the case].





Lower back acupuncture and lumbar spine mobilization, manipulation, and stretching are often used as the first lines of defense in the treatment of low back pain. Some doctors utilize acupuncture on the lower back as well. We use a combination of lumbar mobility and manipulation in one of our therapies to assist calm the patient down. Results from the follow-up investigation were favorable, and the conclusions drawn from them were also generally positive. The patient's health improved significantly after undergoing acupuncture on his lower back for the third time, demonstrating that the therapy was successful. Patient's longstanding lower back discomfort was suddenly alleviated, which was a surprise to him.

# Discussion

A prolapsed intervertebral disc is the most frequent cause of low back pain since it is the most common orthopedic illness (lower back pain). One of the most popular surgical procedures used to treat lumbar intervertebral disc prolapse is vertebral fenestration. Positive effects on inflammation, edema, blood flow and collateral drainage of this medicine are accompanied by no unfavorable effects.<sup>[6,7]</sup> As

acupuncturists, we must understand the principles of channels and collaterals in order to employ acupuncture and moxibustion to their full potential. Those concepts will be explored in further depth in the following paragraphs. Neuromuscular and skeletal systems collaborate to create channels that are subsequently used by other systems.<sup>[8,9]</sup> A 54-year-old man visited our clinic complaining of chronic low back discomfort that was interfering with his day-to-day activities. Living in continual, agonizing agony was tough to adjust to. On our own initiative and with our own money, we were still responsible for a substantial portion of the assessments and paid for all of the materials we utilized. This patient was diagnosed with PLID using an MRI of the cervical spine. It was discovered early on that the lumbar spine was deteriorating. Acupuncture and physical therapy helped alleviate the patient's discomfort. It was evident that this was the best decision when all the variables were taken into account. After having acupuncture for the third time, the patient's lower back discomfort has significantly improved. Despite this, the treatment was successful, and the disease was eliminated

## Conclusion

The results of the follow-up research surprised the experts. The patient reported less low back pain during the fourth acupuncture treatment. A prolapsed lumbar intervertebral disc may be treated well with acupuncture (PLID).

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**How to cite this article:** Islam SS, Li HH, Yasmin S, Sheik SM. Case Report of a Male Breast Schwannoma – A Rare Entity. Asian J. Med. Res. 2023;12(1):6-8.

DOI: dx.doi.org/10.47009/ajmr.2023.12.1.2

Source of Support: Nil, Conflict of Interest: None declared

