

Auriculotherapy in the Treatment of Smoking: A Possible Approach?

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Received Date: October 05, 2020; Published Date: October 21, 2020

Abstract

Auriculotherapy is part of a set of therapeutic techniques based on the precepts of Traditional Chinese Medicine (TCM), and promotes the psycho-organic regulation of the individual by stimulating the energy points located in the ear. And the study aims to discuss the use of this modality in medicine complement the light of scientific literature. The use of electronic cigarettes and pharmacological treatment are among the approaches present in traditional medicine, and auriculotherapy can act as a complementary therapy to other interventions used.

Keywords: Auriculotherapy; Nicotine; Smoking

Introduction

The nicotine contained in tobacco is highly addictive and tobacco use is an important risk factor for cardiovascular and respiratory diseases, more than 20 different types or subtypes of cancer and many other debilitating health conditions. Every year, more than 8 million people die from tobacco use. Most tobacco-related deaths occur in low- and middle-income countries, which are often the targets of intense interference and marketing by the tobacco industry. According to WHO (2020) the projection is that in 2020 there will be 10 million fewer tobacco users, men and women, compared to 2018, and another 27 million fewer in 2025, totaling 1.299 billion [1].

Auriculotherapy is part of a set of therapeutic techniques based on the precepts of Traditional Chinese Medicine (TCM), together with body acupuncture, and promotes the psycho-organic regulation of the individual through the stimulation of energy points located in the ear, in which the whole organism is represented as a microsystem, which can be performed in a complementary way to conventional therapy. Materials

such as needles, crystals and mustard seeds, among others, are used in the application of auricular therapy. This practice can be called auricular acupressure when seeds are used, and is characterized by not using invasive materials, having easy applicability and minimal side effects [2,3].

There are reports in several countries on the use of auriculotherapy for different conditions, including to combat smoking, but is this therapy effective? Therefore, this study aims to discuss the use of this modality in complementary medicine in the light of scientific literature.

Approaches Available for the Treatment of Smoking

In the approach to smoking cessation in Western medicine, different medications are usually used, associated or not with psychotherapy.

Use of Electronic Cigarettes

Heated tobacco products (HTPs), also known as electronic

cigarettes (e-cigarettes) are electronic devices that generate aerosol containing combustion nicotine is usually a battery powered product designed to provide nicotine, flavor (which can be chosen by the user) and other chemicals, including propylene glycol and / or glycerol. Tobacco companies market HTPs as a less harmful alternative to conventional cigarettes, however regulators do not claim that electronic devices are safer, and the debate about the health risks of these devices is ongoing, so they are not the best alternative available for smoking cessation [4,5].

Pharmacological Therapy

Pharmacological strategies contribute to the treatment of smoking cessation. A commonly used alternative is nicotine replacement therapy. Nicotine replacement therapy (NRT) is considered a first-line pharmacological treatment for tobacco dependence. From the standpoint of reduction of damages, "clean nicotine" is less risk than exposure to infinity ingested toxins with smoking combustible cigarettes in dose are minimal are effective es short - acting (e.g., gum, lozenge, oral spray, inhaler). The combination of NRT with behavioral supports is known to improve smoking cessation results [6,7].

In addition to NRT, the use of psychotropic drugs also contributes to treatment. The main drugs currently used for smoking cessation are Bupropion and Varenicline [8]. A combination of behavioral support and pharmacotherapy to treat nicotine addiction maximizes the chances of successful long-term cessation. Combined nicotine replacement therapy (patch and short-acting oral form) or psychotropic drugs are the most effective forms of pharmacotherapy [9].

Currently available pharmacological and non-pharmacological strategies can bring some adverse effects, interfering with the quality of life of individuals who use them. Thus, auriculotherapy can contribute to smoking cessation.

Auriculotherapy Protocols Used for Smoking

A study carried out in Brazil described the application of auriculotherapy for a period of 5 weeks in 2 weekly sessions in patients 30 smokers, organized into two treatment groups. The points used with the experimental group were: Shenmen, Kidney, Sympathetic, Anxiety 1, Anxiety 2, Hunger, Thirst and Vices. For the Control Group, the points stimulated and considered irrelevant for the control of smoking were Elbow and Arm. Auriculotherapy contributed to the reduction in the number of cigarettes smoked in 61.9% of the participants ($p = 0.002$), in reducing the difficulty of abstaining from smoking in places prohibited by 38% ($p = 0.050$) and in not smoking when sick 23, 8% ($p = 0.025$) [10].

Randomized trial carried out with 125 individuals for a period of 5 weeks, with applications once a week in the points Lung, Shen Men, Nicotine, Point Zero and Palate - were used in this study. The auriculotherapy group achieved an abstinence rate of 20.9% against 17.9% for the placebo arm after 6 weeks [11].

Pilot study performed the description to assess how self-administered atrial cuff contributed to smoking cessation. Sixty participants who consented to the confirmed habit of smoking tobacco received atrial acupressure at five true acupuncture points (NADA protocol), atrial acupressure at five sham points or no atrial acupressure whenever they felt like smoking. However, the results obtained were not disclosed in the study [12].

By analyzing 7 smoking patients with weekly sessions and applications in points Shen Men, upper and lower lung, kidney, thirst, fame, addiction, adrenal, anxiety, diaphragm, endocrine and vagus nerves, it was found that AA average reduction of consumption cigarettes was 9.2 ± 1.8 cigarettes to 1.7 ± 0.3 after 9 weeks of treatment.

Conclusion

The reduction or cessation of smoking contributes to the reduction of diseases and the reduction of deaths, in addition to contributing to a greater quality of life for individuals who adhere to these interventions.

It was found that the points selected for stimulation varied between studies. It is important that the choice of points for treatment is made correctly to achieve the goal. Individualized treatment seems to be a promising proposal for adding unique benefits such as well-being and energy balance, for guaranteeing interventions in other conditions, in addition to smoking cessation. Thus, auriculotherapy can act as a complementary therapy to other interventions used, such as psychotherapy and pharmacological measures.

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