

# Management of possible accidents

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# Fainting / Acu-shock

## Manifestations:

- Mild: weak, dizziness, vertigo, cold sweating, palpitation, shortness of breath, oppression feeling in the chest, nausea, pallor, weak pulse
- Cold extremities, cyanosis of lip and nail, drop of blood pressure, incontinence of urine and stool, and loss of consciousness.

# Cause:

- Nervous tension,
- Delicate constitution, hunger, fatigue, extreme weakness after severe diarrhea/bleeding or sweating
- Improper position
- Too forceful manipulation
- Too hot or cold in the treatment room

# Management:

- Stop needling immediately and withdraw all the needles
- Help the patient to lie down with head lower, feet elevated, and clothes loosened
- Offer the patient some warm or sweet water
- Severe case:
  - acupressure or acupuncture on DU26, DU25, LI4, PC6, ST36, KD1, PC9;
  - moxibustion on DU20, Ren4, Ren6, Ren8
  - Other emergency measures

# Prevention:

- Relax and calm the patient before treatment
- Comfortable position
- Less points and mild manipulation for first treatment
- Patients who are hungry, thirsty, too tired: give treatment after eat, drink or rest.
- Always observe patient's condition during needling and retaining.
- Keep the room air fresh, temperature adequate

# Stuck needle

- Manifestations:
  - The needle, after insertion and retaining in place, is difficult or impossible to manipulate and withdraw.

- Cause:

- Nervousness of patient and strong spasm of local muscle
- Rotating the needle with too large amplitude or in one direction only
- Change of the position of the patient

- Management:

- Ask the patient to relax
- Leave the needle in place for a while
- Massaging or tabbing around the point
- Inserting another needle nearby
- Rotate the needle in the opposite direction
- Resume the original position, and then withdraw the needle

## • Prevention

- Relax and calm the patient before treatment
- Avoid rotate the needle in one direction only or with too big amplitude
- During needle retaining, the posture of the patient should remain original



# Bent needle

- Manifestations:
  - The body of the needle is bent, the direction and angle of needle is changed, causing difficulty of lifting, thrusting, rotating and withdrawing of the needle, and pain for the patient.

- Cause

- Unskillful manipulation or too forceful manipulation causing the needle striking the hard tissue
- Sudden change of patient's posture
- Collision of the needle from external force
- Improper management of stuck needle

## • Management

- No manipulation (lifting and thrusting, rotating, etc) should be applied
- Never try to withdraw the needle with force
- Resume the original position of the patient and remove the needle if applicable
- Following the course of the bend to remove the needle slowly and withdraw it.

- Prevention:
- Skillful manipulation
- Patients be placed in a comfortable position, and no change of posture during needle retaining
- No pressure on needle handle from external force
- Correct management for stuck needle

# Broken needle

- cause:
  - Poor quality of the needle or eroded root of the needle
  - Too strong manipulation of the needle causes strong muscle spasm
  - Sudden movement of the patient when the needle is in place
  - Withdraw the stuck needle inadequately
  - Use E-stimulation incorrectly
- Prevention:
  - Inspect the needle carefully before treatment
  - Gentle manipulation
  - The needle shaft should not be inserted into the body completely
  - No change of patient's posture
  - Adequate management of stuck needle and bent needle
  - Correct and safe operation of E-stimulation

## • Management:

- Keep the patient calm and not to change the posture to prevent the needle from going deeper into the body
- If the end of the broken part of the needle is above the skin:
  - Pull out the needle with fingers or forceps
- If the end of the broken part is level with the skin:
  - Press the skin around the needle immediately to make the end expose more to be above the skin, then pull it out with forceps
- If the broken part is completely under the skin surface:
  - Call 911 to perform surgical operation to take it out

# hematoma

- Manifestations:
  - Local swelling, purple and black bruise, and pain around the needling point, even limited movement

- Management:
  - A mild hematoma will disappear by itself
  - Local pressing with cotton ball
    - Vein: 30 seconds to 1 minute
    - Artery: up to 5 minutes
  - Severe case:
    - Cold compress to stop bleeding first;
    - Then warm compress with local pressure  
or light massage  
or moxibustion  
to help disperse and absorb the hematoma.



- Cause:

- Injury of the blood vessel and subcutaneous bleeding
- Lack of press after withdrawing the needle
- Patient's blood coagulation function is poor:
  - aged patients who have little elasticity of blood vessels
  - Bleeding disease history

- Prevention:

- Skillful insertion and manipulation to avoid puncturing the blood vessel
- Appropriate pressure after withdraw the needle
- Check patient's disease history
- Gentle manipulation for aged patients

# after-effect /post needling sensation

- Manifestations:
  - After withdrawal of the needle, the Qi sensation remain too strong and uncomfortable for a long time
- Management:
  - Press the local area, massage up and down
  - Moxibustion on the local area

- Cause:
  - Unskillful or too forceful stimulation
  - Too long retaining time
- Prevention:
  - Avoid too strong stimulation
  - Adequate retaining time
  - Withdraw the needle skillfully

# Pneumothorax

- Manifestation:
  - Chest tightness, chest pain, cough, shortness of breath, palpitation
  - Severe case: dsypnea, pallor, cyanosis, cold sweating, drop of blood pressure, coma, even death.

- Cause:

- Improper direction, angle or depth of needle on points of the chest, back or supraclavicular fossa → the pleura and lungs are injured and air enters the thoracic cavity.

- Management:

- Carefully withdraw the needle immediately
- Encourage the patient to lie calmly in a semireclining position
- The patient should be taken to the hospital; if the symptoms are severe, call for emergency help.

- Prevention

- Proper position of patient
- Proper needling depth on points of chest, back and supraclavicular fossa
- Oblique or transverse insertion on those points
- No big amplitude lifting and thrusting on those points
- No too long time needle retaining on those points

# Injury of brain, spinal cord

- Manifestations:

- Brain:

- Mild: Headache, nausea, vomiting,
    - Severe: dyspnea, convulsion, coma, even death

- Spinal cord:

- Mild: electric shock like sensation radiating to the distal ends of extremities
    - Severe:
      - paralysis of the extremities, movement limitation
      - Decreased sensation of the extremities



- Management:
  - Withdraw the needles immediately
  - Mild cases: rest for a while
  - Severe cases: emergency medical help should be called for immediately

- Cause:

- On points close to brain and spine such as: Du16, Du15, GB20, points along spine above the level of 1<sup>st</sup> lumbar vertebrae, jiaji points
  - Too deep insertion
  - Improper manipulation
  - Improper direction and angle

- Prevention:

- No deep insertion
- No lifting and thrusting manipulation
- For Du16, Du15, GB20: no upward oblique insertion, no deep insertion

# Injury of other internal organs

## Manifestations:

- Liver, spleen:  
rupture with bleeding → abdominal pain, rigidity of the abdominal muscles, and / or rebound pain upon pressure
- Kidney:  
pain in the lumbar region, tenderness and pain upon percussion around the kidney region, blood urine, even drop of blood pressure and coma in severe case
- Heart:  
severe stabbing pain, or tearing pain, shock

- Management:
  - Withdraw the needle immediately
  - If there are signs that an organ been punctured, the patient should be taken to the hospital or emergency medical help be called.

- Cause:

- Too deep insertion
- too big amplitude of lifting and thrusting manipulation
- Organ enlargement of patients

- Prevention:

- Understand the location of internal organs on the needle passage
- Proper needling depth
- No big amplitude manipulation
- Examine any suspected organ enlargement prior to acupuncture.