

Acupuncture Treatment of Long-COVID: A Narrative Review of Selected Case Studies and Review Articles

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Asian Journal of Complementary and Alternative Medicine. Volume 10 Issue 04

Published on: 28/10/2022

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Cite this article as: Williams JE. Acupuncture Treatment of Long-COVID: A Narrative Review of Selected Case Studies and Review Articles. Asian Journal of Complementary and Alternative Medicine, Vol 10(4), 95-97:2022.

ABSTRACT

Background: Long-COVID is the "long tail" of the COVID-19 Pandemic. Even though surges in cases have occurred since early 2020, overall, the Pandemic is in decline. However, a chronic form emerged that affects millions and without any sign of letting up. Diagnosis of Long-COVID is illusive. No specific drug safely and effectively addresses this condition. Restoring health and the search for relief became essentially the responsibility of patients and self-help groups. Acupuncture has proven safe and effective in symptom management and may flatten the disease progression curve.

Objective: To systematically review reports and case studies since 2020 to evaluate the safety and efficacy of acupuncture for the management of Long-COVID.

Results: The author reports on three review papers and two case studies. All results support the thesis that acupuncture is an effective and safe treatment for Long-COVID. Acupuncture provides symptom relief and may shorten the duration of illness.

Conclusions: Acupuncture is a safe and effective treatment for managing Long-COVID.

Keywords: Acupuncture; Long-COVID; COVID-19

INTRODUCTION

There is no definitive laboratory test to diagnose Long-COVID. A cluster of symptoms defines it along a timeline. Mild to moderate acute COVID-19 symptoms typically last one to two weeks. In severe cases, some experience lingering symptoms for up to six weeks. Debilitating symptoms that persist or return for twelve weeks or longer define Long-COVID.

The three main symptoms of Long-COVID are (1) unrelenting fatigue not associated with activity, (2) shortness of breath, and (3) trouble thinking clearly and difficulty remembering things, referred to by patients as "brain fog." Some have headaches and dizziness. Many have anosmia. Others have sensorimotor symptoms, like those associated with idiopathic polyneuropathy [1]. A complete list includes over fourteen symptoms [2].

Figure 1: Long-COVID Symptoms.

List of Long-COVID Symptoms Lasting More Than 7		
Months		
Fatigue		
Post-Exertional Malaise		
Brain Fog		
Sensorimotor Symptoms		
Headaches		
Faulty memory		
Sleep disturbance		
Muscle aches		
Speech difficulty		
Shortness of breath		
Joint pain		
Tachycardia		
Chest tightness		
Other issues		



Traditional medicine employs a patchwork of drugs for the symptom management of Long-COVID. These include inhalers for respiratory symptoms, colchicine as an anti-inflammatory, antihistamines like famotidine and loratadine for airway relief, antidepressants for fatigue, analgesics for pain, and anticoagulants for high-risk patients after post-hospital discharge to prevent clots.

In general, basic intervention involves rest, breathing exercises, physical therapy, and mild exercise at home. However, most patients are left to manage on their own. Many Long-COVID sufferers seek information about how to manage symptoms from self-help groups. And more are turning to natural alternative therapies including nutritional supplements, herbal extracts, and acupuncture.

METHODS

Review of Acupuncture Studies for Long-COVID

In a 2021 review paper, Chen C, et al. [3] found 16 observational articles, 8 of those in English, about hospitalized COVID-19 cases treated with conventional medicine and acupuncture. The outcomes found no adverse effects, and all patients who received acupuncture recovered faster than those who did not have acupuncture. These results are consistent with the Long-COVID studies reviewed in this paper, as well as with anecdotal patient reports of their progress. Acupuncture is a common practice in the modern Chinese healthcare system. A main difference between Chinese and American acupuncture treatment is that, in China, acupuncture is administered daily for an average course of 10-14 days. And the cost per treatment is considerably less than in the United States.

However, few peer-reviewed papers are available on acupuncture and Long-COVID. The author conducted extensive reviews in multiple data bases including PubMed and the Cochrane Library. Only three reviews and two case studies were found. The results are summarized below.

Audette J [4] Provides insights from his practice into TCM about acupuncture point selection. Of particular interest is his reminder that COVID-19 cases often have moderate splenomegaly. Therefore, comprehensive acupuncture treatment should address the spleen meridian including acupoints ST36, SP6, CV12, and SP9.

Groopman and Elkins suggest that specific Western medical diagnoses are unnecessary for treating Long-COVID patients successfully with acupuncture. They organize symptom presentation into four main categories: (1) Depletion of the lung, spleen, and kidney Qi, (2) Autonomic dysregulation, (3) neurocognitive disturbances, and (4) respiratory symptoms [5].

My paper, coauthored with Moramarco [6], proposed mechanisms and models for acupuncture treatment of Long-COVID based on published research, and our clinical experience. We found seven documented benefits of acupuncture that could improve Long-COVID outcomes.

Figure 2: Physiological Effects of Acupuncture.

7	Acupuncture Effects That Improve Long-COVID	
Outcomes		
1.	Regulates vagal tone	
2.	Manages chronic inflammation	
3.	Manages vasoconstriction	
4.	Improves nitric oxide production (NO)	
5.	Modulates reactive oxygen species (ROS)	
6.	Improves adaptive immunity	

Few published case studies of acupuncture for Long-COVID are available. Two are discussed for the purpose of this review.

7. Improves autonomic nervous balance

Hollifield M, et al. [7] Described Long-COVID cases as those patients with residual symptoms of acute SARS-CoV-2 infection. In a detailed observational case study, a 46-year-old male with diabetes mellitus presented with mild elevation of liver enzymes and symptoms associated with Long-COVID. He had confirmed SARS-CoV-2 from an antigen test. Lingering symptoms included brain fog, joint pain, headache, cough, and anxiety. He had a history of post-traumatic stress associated with active military duty. His acupuncture treatments occurred over four months. Based on a 1-1 symptom severity scale, most symptoms improved by 50 percent or more, except for fatigue, that was unchanged. This case was thorough and provided well-defined TCM diagnostic pattern targets. The symptom survey gave a visual report of the results.

Trager RJ [8] Reported a case of a non-diabetic, 50-year-old female with the main complaint of fatigue easily worsened even with mild activity. Other complaints included anosmia, ageusia, anxiety, dyspnea upon exertion, cough, palpitations, and brain fog. The TCM diagnosis was global deficiency of the Yin organs. The treatment principle included harmonization of defensive and nutrient Qi, modulating Yin energy, smoothing liver Qi, and regulating the Shao Yang layer. The patient's energy returned to normal after six acupuncture treatments.

This case is an example of the role the Shao Yang layer plays in delayed recovery from respiratory infections. According to the Shang Han Lun (Treatise of Exogenous Febrile Diseases or Discourse on Cold-Damaged Disorders), one of the classic texts of Chinese medicine, it describes 112 TCM herbal formulas for clearing the Shao Yang layer in the treatment of infectious disease [9].



DISCUSSION

This small number of acupuncture studies for Long-COVID and a few cases with positive outcomes is hopeful but should not be generalized across all people with Long-COVID. However, from clinical experience treating Post-Acute COVID and Long-COVID cases, I found similar positive results as reported by Hollifield, Trager, and Chen. Further clinical research utilizing the Hand (Triple Heater) and Foot (Gall Bladder) Meridians is a direction for consideration.

CONCLUSION

In summary, these studies contribute to the clinical understanding of chronic post-SARS-CoV-2 infection to relieve suffering in Long-COVID patients. In conclusion, acupuncture is a safe and helpful therapy for treating Long COVID syndrome.

ETHICAL APPROVAL

This article does not require ethics approval since it does not use human or animal subjects. It is a review of previously published information available in the public domain.

ABOUT THE AUTHOR

James E. Williams is the author of *Viral Immunity and Beating the Flu*. He has taught integrative therapies at the University of Miami Miller School of Medicine and NOVA Southeastern University and teaches at Emperor's College.

CONFLICTS OF INTEREST

The author declares no conflicts of interest. No competing financial interests exist.

ACKNOWLEDGMENTS AND FUNDING

No funding was received for this article.

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