

# HOWARD'S PTSD TECHNIQUE

**By John Howard, L.Ac.**

Post-Traumatic Stress Disorder (PTSD) can be one of the toughest conditions to treat successfully. The United States Military is now using Acupuncture including Auricular Therapy to address pain and PTSD. As an acupuncturist and a disabled vet, this has opened my eyes to some of the possible causes and triggers of PTSD. My clinical knowledge along with my 6 years of active duty have shown me the possibility of successfully using Auricular Therapy to treat Wounded Warriors with PTSD.

By no means do I claim to be an expert on PTSD. I can only share my clinical evidence and what has worked for me in my clinic the last few years. Along with these techniques on treating PTSD, I'm also going to give some advice that I have gained over the years with treat PTSD and having a few close friends with PTSD.

First and foremost don't stir up the pot any more than it has to be. What I mean is don't ask questions about why or what do think triggered this to happen. Most have seen or experienced on more than one occasion something so horrible that it has caused them to become this way. The good news is that the human body and spirit is strong and with the right treatment you can help them get their lives back. Given the possibility that anything and everything is possible again

## TREATING PTSD - BACKGROUND

If you feel in any way that the person standing in front of you may hurt themselves or anyone else, seek help ASAP!

Start off slow! When taking their history keep be mindful of what you are asking them. One thing that is almost universal in patients with PTSD is they have sleeping problems. This could mean they just can't fall asleep because of one reason or another. Or when they do fall asleep, they have nightmares and can't sleep long. Others try not to sleep because of the nightmares they know they will have. Lastly, some might not be able to sleep deeply and wake up many times per night.

So, one thing I always start off with is talking about their sleep because it is a "safe" topic of discussion. I ask the following:

1. What is your sleeping like?
2. How many hours a night or at a time do you sleep?
3. What time do you go to bed at night?
4. How many times do you wake up during the night?

Questions along those lines allow the patient to tell you if they are having nightmares without directly asking.

The two techniques I'm going to share with you can be used individually or together. You can choose the best one or what you feel is best for your patient. Along with the points to use I'm going to give you

my recommendations on what needles to use for this technique. Most of you know I love to use ASP® needles. On these patients and these points, I would not recommend using them or at the least don't use in the beginning. They do have advantages -- one of them is the ASPs® can stay in for a few days without falling out. They also come in gold which is a big plus. The drawbacks are they can hurt a little more than an acupuncture needle or Pyonex needle and they do move a lot more energy. This sometimes can be a bad thing when treating patients with PTSD.

The best needles to use for this technique are Seirins. I use two different types of Seirin needles for this. One type while they are in the Clinic getting treatment and the other when they are leaving to go home that stay in the ear. In the Clinic I use Seirin No. 3 or No. 5 (size color and picture). I will send them home the Seirin Pyonex Singles. I use the 1.2mm or the 1.5mm (Color and picture). If your patient has tight skin over the ears, or tough skin, or needles fall out quickly in the ear, I use the longer of the Pyonex needles, 1.5mm. The longer needle will go in just a little deeper and stay in the patient's ear longer. If this is not a problem for you, then you can use the 1.2mm ones. I have found that these needles work far better than ear seeds. Like ear seeds you can have your patient massage the needles while they are in the ears to increase the effectiveness if need be.

When your patient leaves your clinic with ear needles, this will help them. They are getting a treatment every day the needles stay in. When a patient leaves my clinic with Pyonex, Spinex or ASP ear needles, I refer to this as Chinese Takeout. Dr. Steven Burns came up with this phrase a few years back when he was treating patient with the Battlefield Acupuncture (BA) protocol. If any of you have taken my BA or advanced BA course you would have heard this term before. Editor's note: yes this was a shameless plug for my Battlefield Acupuncture classes. Just like the Asps, you can leave the Pyonex needles in for a few days.



available in

Color	Dia (mm)	Length (mm)
Yellow	0.20	0.6
Green	0.20	0.9
Blue	0.20	1.2
Pink	0.20	1.5

## CLINICAL APPLICATION AND POINTS

The four points are as follows along with an explanation on why that point and what that point's function is in TCM and Western Medicine terminology. Along with needling the points you can first stimulate the point with Nogier's HZ for 30 seconds as the best way to increase efficiency. The points and HZ are:

1. Nogier's Heart Phase 3, 80 HZ
2. Pineal Point, 20 HZ
3. Shenmen (Basal ganglia), 10 HZ
4. Nogier's wrist point, Phase1, 20 HZ

INSERT PICTURE HERE

A clinical observation I made some time ago, which I call line therapy can be seen in the two techniques. Line therapy is 2 or more points in a straight line that were used together can effectively treat pain, PTSD and other conditions. These are 2 of a few line therapy techniques I use in my clinic every day. (I go into more detail of line therapy techniques for treating pain in my advanced BA class.)

### CLINICAL PEARL FOR RAPID REDUCTION OF ANXIETY

Here is one of my Clinical Pearls I use for rapid reduction of anxiety. You can use this Clinical Pearl and the PTSD technique all in the same treatment, or just by itself.

If your patient tells you they have anxiety and their mind is racing and they are all over the place with their thoughts, look for Nogier's Phase 3 Heart point. If this point is read or active with a point finder, use a lance or a bleeding needle and prick and bleed this point. I will bleed so make sure you have a cotton ball or gauze to wipe the blood off. Wipe it lightly and let it bleed until it stops. You can do one or both ears. If you do one ear and that works you can just do one ear. I would advise against using this protocol if your patient is on aspirin therapy or blood thinners.

### HEART/PC/BASAL GANGLIA/PINEAL GLAND

Nogier PC Heart Phase 3, 80 HZ – Also is known as the basal ganglia

Clinical \_\_\_\_\_ of basal ganglia is Phase 1

ADHD, OCD, long term use of antipsychotic drugs with damage the basal ganglia and cause tardive dyskinesia??

Pineal Gland 0 Clinical application for

Controls the circadian rhythm, influences the sleep cycle. When this is dysfunctional \_\_\_\_\_ the gland ADD and ADHD develops many times. This point can help open energetic blockages and jet lag. The pineal gland known for centuries as the third eye.

Some other conditions assisted with this gland are SAD, Behavioral problems, insomnia, fertility related problems, and sexual dysfunction.

Shenmen/basal ganglia  
Wrist/prefrontal cortex

Shenmen clinical applications: \_\_\_\_\_, stress/anxiety, insomnia, depression, just to name a few.  
Basal ganglia phase 2

Nogier wrist Phase 1, (HTT) also known as Shenmen.  
Insomnia, mania-depression, \_\_\_\_\_ calms the spirit/rejuvenates and tonifies the \_\_\_\_\_.  
All diseases of the heart

Prefrontal Cortex – ADD, OCD, Sleep disorders, ADP, various learning disabilities, depression, anxiety.

#### WHAT A PHASE MEANS

A phase is a representation of the stage of pathology:

1. Acute
2. Degenerative
3. Chronic

They are out of order because \_\_\_\_\_

The normal progression of diseases is as follows: Phase 1 Acute, Phase 3 Chronic, Phase 2 Degenerative.

## Line Therapy Protocol for Mild Depression and PTSD

The following protocol is used for Mild Depression and PTSD.  
There are a total of 4 points on each ear.

