

经验传承

安军明针灸治疗周围性面瘫临床经验总结

刘涛平¹ 杨婷²

(1. 陕西省友谊医院, 陕西 西安 710068; 2. 陕西中医药大学, 陕西 咸阳 712046)

摘要:总结安军明教授诊治周围性面瘫上的临床经验。安教授主张在针灸治疗时实行分期治疗,即根据患者处于不同的发病期,并辨证取穴拟定不同的针灸处方。急性期浅刺激发阳气以祛邪通络;静止期采取加强刺激量,多种针刺手法结合的治疗方法;恢复期根据病情变化可配合艾灸、电针综合治疗,疗效显著。

关键词:安军明;针灸;周围性面瘫

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Clinical Experience of An Junming on the Treatment of Peripheral Facial Paralysis by Acupuncture

Liu Taoping¹ Yang Ting²

(1. Friendship Hospital of Shaanxi province, Xi'an 710068, China;

2. Shaanxi University of Chinese Medicine, Xianyang 712046, China)

Abstract The paper is to summarize the clinical experience of professor An Junming on the treatment of peripheral facial paralysis. Professor An maintains that the treatment of acupuncture is implemented by different stages, with the syndrome differentiation and points selection, namely the patient in different diseased periods is prescribed different acupuncture formula. In acute stage, light stimulation executed is to activate yang-qi, remove pathogenic qi and dredging collaterals. Strengthening stimulus quantity combined with multiple needling techniques is done in the stable stage. Patients in the recovery stage are needled with moxibustion and electro-acupuncture therapy. It is remarkable to treat peripheral facial paralysis with Professor An's method in syndrome differentiation and points selection.

Key words An Junming, acupuncture, peripheral facial paralysis

安军明教授从事针灸临床工作近20年,现任西安市中医医院针灸科主任医师和陕西中医药大学硕士生导师。安军明教授在临床中善于将古代医家思维、经验和现代医学理论相结合,对一些临床疾病提出自己独到的治疗思路,并对针灸治疗常见疾病形成了一套独特的理论体系,尤其擅长治疗周围性面瘫、中风后遗症、痹症及各种疼痛等疾病。笔者有幸跟随安军明教授临床工作2年余,在临床实践中深受教诲,尤其在周围性面瘫的诊疗,临床经验丰富,疗效突出。临床中根据临床表现和面神经恢复的情况,将周围性面瘫可分为三期,即在面

瘫症状出现的1~7天为面瘫急性期,8~28天为面瘫的静止期,28天以上未痊愈者为面瘫恢复期^[1]。现将安军明教授在不同期分别采用辨证取穴针刺治疗周围性面瘫的临床经验总结如下。

1 急性期

取穴:印堂、阳白、太阳、颧髎、四白、颊车、下关、地仓、水沟、合谷、太冲、翳风。取穴以患侧面部为主,多采用直刺进针得气后常采用一针透2~3穴停留1~2分钟后提针到皮肤浅表处,面部穴位以平补平泻手法为主,肢体远端配合合穴以泻法为主,每个穴位针刺深度0.5 cm,不宜过深,手法不宜