



ACUPUNCTURE AS A METHOD OF TREATMENT TO QUIT SMOKING

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Abstract

Smoking is a well-known risk factor for cardiovascular disease, chronic obstructive pulmonary disease, and early cancer-related mortality the significance of smoking's adverse health effects on education, communication, training, and public awareness. Acupuncture therapy, which works on the principles of soothing the shén/mind, removing anxiety, and harmonizing yin and yang, is one strategy that is thought to be able to be used to prevent the increase in smoking behaviour. This study looked at the effectiveness of acupuncture in helping people quit smoking. This research technique uses a case study approach model and is qualitative. With the aid of essential individuals, research subjects were chosen using a purposive technique. Research samples were selected using a purposive technique to assess the issues to be studied in line with the research objectives. Methods for gathering data include interviews, observation, and literature reading. Data organization by categorizing the data, followed by four types of organization: pattern matching, explanation construction, model logic discovery, and time series analysis. The study's findings indicate that using acupuncture to stop smoking can have quick, safe, effective, and noticeable outcomes. Patients' internal solid motivation to quit smoking and support from their environment are the keys to success.

Keywords: Acupuncture, Case Study, Quit Smoking, Cigarette, Tobacco

INTRODUCTION

Smoking can be characterized as the frequency of smoking throughout the previous 30 days, the number of days the person smoked within the previous 30 days, 100 cigarettes consumed within the past 30 years, or even only a portion of those cigarettes (Park & June, 2006). Most individuals agree that smoking can lead to significant illnesses; however, many still smoke. This is due to smokers' inaccurate perceptions of how seriously detrimental smoking can be to their health (Krosnick et al., 2017). Most smokers know that smoking increases the risk of heart disease, lung cancer, and throat cancer. However, fewer smokers are aware that smoking also raises the chance of mouth cancer, lung disease, stroke, impotence, blindness, and other conditions. Smoking in each of the six nations (Trofor et al., 2018). Smoking is a well-known risk

factor for cardiovascular disease, chronic obstructive pulmonary disease, and early cancer-related mortality. Additionally, there is proof that exposure to secondhand smoke can cause neutrophil-sensitized atherosclerosis, which activates neutrophils and causes oxidant-mediated tissue damage in non-smokers (Ravichandran et al., 2020). In most nations, there is a fair amount of knowledge on the dangers of passive smoking to health. The significance of smoking's negative health effects on education, communication, training, and public awareness (Trofor et al., 2018).

Even though combustible cigarettes (hereafter referred to as cigarettes) still account for the majority of sales of tobacco products, the development and explosive rise of electronic cigarettes (e-cigarettes) over the past ten years has had a profound impact



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on tobacco (Huang et al., 2019). The introduction of the tobacco industry has changed significantly over the past few decades thanks to electronic cigarettes (or "e-cigarettes"), which are widely seen as a risk-free substitute for traditional cigarettes. Since heating the e-liquid in e-cigarettes replaces the burning of tobacco, several manufacturers claim that using e-cigarettes has less dangerous respiratory consequences than smoking tobacco (Marques et al., 2021). However, albeit in smaller proportions than traditional cigarettes, the vapour produced by e-cigarettes contains varying amounts of nicotine and potentially hazardous chemicals (Drummond & Upson, 2014). Due to the heating element's interaction with the liquid's components and the chemical flavouring ingredients, there appear to be a variety of toxins, including reactive aldehydes and carbonyls, in the vapours. The chemistry of these systems demonstrates that environmental contaminants frequently surpass federal occupational exposure limits in the vapours generated by e-cigarettes. Additionally, it appears that toxin levels in the vapour are kept in the host fluids and tissues at rates that frequently exceed 90% of the level in e-cigarette vapour. These water-soluble reactive toxins can strain the cells and microbes that make up the oral cavity, which may modify them in ways that affect the mouth's homeostasis (Ebersole et al., 2020).

Six million people die each year as a result of tobacco use worldwide. Direct tobacco use may result in up to five million fatalities, while exposure to secondhand smoke kills more than 600,000 people who are not smokers. If controlled by 2030, tobacco usage could result in more than eight million annual fatalities (Raghu et al., 2015). After China and India, Indonesia has the third-highest percentage of smokers worldwide, according to WHO statistics. The higher illness load and higher mortality resulting from smoking are both impacted by

increased cigarette use. According to estimates, 10 million smokers will pass away worldwide in 2030, with 70% of those deaths occurring in developing nations. According to recent studies, adult smokers in Indonesia increased significantly over the past ten years, rising from 60.3 million in 2011 to 69.1 million in 2021, a rise of 8.8 million persons (Health, 2022; Health, 2018).

Smoking and carbon monoxide respiration are connected. Smokers' respiratory carbon monoxide level of 72.5% is affected by their smoking history's length, frequency, and most recent smoking session, as well as their residence's proximity to the source of exposure. Smoking less frequently and quitting altogether can stop and regulate carbon monoxide respiration (Sitorus et al., 2021). At any age, quitting smoking is always a good thing. The sooner you stop smoking, the better your lung health will be, and you can reduce your risk of dying from smoking-related illnesses and becoming disabled. The initial battle to stop smoking is quite tricky. Don't be shocked if you have symptoms like irritation, problems managing emotions, loss of concentration, anxiety, trouble sleeping, coughing, slowed pulse rate, and increased appetite. The withdrawal phase is this stage. It is going to fade after three to four weeks, naturally (Hasanah, 2014).

Smoking behaviours do not emerge overnight. An activity will take place since it begins with intention if it is repeated repeatedly, which is what is known as a habit. To identify the core cause of the smoking habit and its behaviour, we must first identify the original purpose of smoking. The aim that first was only a matter of trial and error is what gives rise to a person's smoking behaviour. Similarly, a person's ability to stop smoking will depend on how strongly and honestly they want to, in addition to receiving treatment from a smoking cessation therapist (Aminuddin et al., 2019). There are several approaches to



quitting smoking, including therapies that can end cigarette addiction (Fawzani & Triratnawati, 2005).

Acupuncture therapy, which works on the principles of soothing the shén/mind, removing anxiety, and harmonizing yin and yang, is one strategy that is thought to be able to be used to prevent the increase in smoking behaviour. According to historical Chinese medical writings like the A-B Classic of Acupuncture and Moxibustion, acupuncture has been utilized for more than three thousand years in traditional Chinese medicine. To reactivate or restore qi (energy), heal and prevent disease, and promote a balanced state of health and longevity, specifically) in the 14 meridians throughout the body connected to the appropriate organs for a period ranging from a few seconds to several minutes. It may cause cerebral activity and press nerve endings (Cheng, 2019). Smokers who use acupuncture to stop smoking can resume their everyday lives by having specific points on their bodies pricked, recovering all physical symptoms, and receiving support for psychological, environmental, and other factors. Acupuncture, on the other needles, plays a psychological role in relieving symptoms associated with quitting smoking and changing one's disgust or distaste for tobacco smoke. Regarding long-term smoking cessation, acupuncture combined with counselling, cessation education programs, or moxibustion is more effective than acupuncture alone (Wang et al., 2019). This study looked at the effectiveness of acupuncture in helping people quit smoking. Tax increases, social marketing, and brief medical advice can boost efforts to reduce tobacco. Giving these quit attempts psychological and pharmaceutical support can improve their chances of success. Implementing national programs and different smoking cessation strategies successfully lowers

smoking prevalence and disease and death caused by smoking (West, 2017).

RESEARCH METHOD

This research technique uses a case study approach model and is qualitative. With the aid of essential individuals, research subjects were chosen using a purposive technique. Research samples were selected using a purposive technique to assess the issues to be studied in line with the research objectives. Methods for gathering data include interviews, observation, and literature reading. Data organization by categorizing the data, followed by four types of organization: pattern matching, explanation construction, model logic discovery, and time series analysis (Prihatsanti et al., 2018). The stages of this research were as follows:

1. Define the research question to start the process.
2. Choose a few examples from a specific population
3. Developing research instruments and procedures in which researchers use data collection methods from multiple sources, using quantitative and qualitative data, and using more than one investigator or researcher.
4. Going into the field to collect data and analyse, including taking field notes.
5. Data analysis through pattern-spotting
6. Developing a hypothesis
7. Review the literature by comparing it to related and contradictory material.
8. Making judgments

RESULTS AND DISCUSSIONS

Acupuncture therapy, which mainly aims to balance yin and yang and relax the shén/mind, is one effective strategy in helping people quit smoking. Ear acupuncture and body acupuncture are two acupuncture techniques that can be used. Auricular acupuncture, also known as ear acupuncture, is frequently used to stimulate acupuncture sites around the ear, reflecting the networks connecting



biological functions in these microsystems. It has also been shown to be helpful in therapies for anxiety and weight control (Cheng, 2019). One of the earliest and most popular ways to stop smoking in China and other nations is ear acupuncture. Vaccaria seeds are attached and pushed, a small needle is used to pierce the skin, and the area is exposed to laser radiation. The 365 lu, q, and xuè from the meridian go up and walk through the aperture of the senses, and the jing yángq from the meridian go up to the eye and may see, at the point where the twelve meridians and the meridians meet in the ear. Q has an ear branch that allows it to hear. The zàngf organs and jing/meridians are closely related to the microneedle system found in the ear. It can rejuvenate human organs and meridians, lessen smoking addiction and associated consequences, and have a positive effect by stimulating auricular points or places in the ear. The acupuncture points in the ear include shénmén/fèi/ku/nèib/jiogn/nèifm. 内分泌、qìguǎn/气管、pízhíxià/皮质下、yādèh、áyānhóu/咽/咽/咽/咽大肠、shènshàngxiàn/肾上腺. The patient is stabbed with a needle in the stabbing technique, though you can alternatively use vaccarian seeds. The pain site must be located before being pressured or stabbed. The patient was instructed to abstain from smoking for 12 hours before treatment, and the stabbing had to be performed simultaneously. It is essential to focus on sterility and cleanliness during treatment. For patients who cannot receive treatment daily, the first therapy may involve a needle; the subsequent therapy may be substituted by using an implanted press needle that is changed every three and a half days. The patient is instructed to press the ear spot if they need to smoke during this procedure. Typically, during this time, the urge to smoke will lessen, the mouth will taste different, smoking again will not taste the same, and it will feel like sucking

on dry grass. Additionally, respiratory symptoms like coughing up a lot of phlegm during this time will also lessen, and you'll be calmer and better able to sleep. To help smokers stop, ear acupuncture regulates their nerves, causing them to smell cigarette smoke and causing their plasma levels of the stress hormones cortisol and enkephalin to return to normal.

The following technique uses body acupuncture on the acupoints bihu (DU20), shénmén (HT7), and jièynxuè (Tim-Mee). Add the jiách/(ST6)snynjio/(SP6) point if the patient complains of a sore throat. Add the end "yngquán" if the patient exhibits any signs of anxiety or unease (KL1). Add láogng/ if the patient enjoys and desires to sleep (PC8). Methods A fine needle was introduced into the puncture following the point Bihu/(DU20) point sterilizing procedure at a 30° angle. The needle was left in place for 15 minutes in the middle of the needle manipulation. The needle can be left until the patient returns home, 1-2 days later, and then taken in cases when the patient can maintain the stability and location of the needle well. Using needles manipulation, point shénmén/(HT7) png pngxiè is inserted with a thin needle and left for 15 minutes without tonification or anaesthesia. Point jièynxuè/ (Tim-Mee) was punctured with a fine needle that was inserted about 3 millimetres deep, "dég" manipulation of the needles was performed for 1 minute, and the needle was left in place for 15 minutes.

Tim-mee Point

There is a strong line of pain at this location of the hole, which is located between the lièqu/ (LU7) and yángx/ (LI5) points, starting from the wrist approximately one knuckle of the soft area. Alternatively, if the two hands are entwined, a hole can be felt between the thumb and upper index finger above the wrist; this is the jièynxuè (Tim-Mee) or tiánmi xué point. The Tim-Mee Point, also



known as *tiánmi xué* or *jièynxué*, is a new strategy for quitting smoking (Tim-Mee). The success rate is above 90% because this idea has been demonstrated by studies employing laser light on 2282 cigarette smokers. This area has the power to govern and restore lung function. Smokers who receive acupuncture or massage until

this stage may experience symptoms such as headache, dry mouth, and thirst. Smokers develop an aversion to cigarette smoke due to smoking, which causes them to stop smoking. This point comprises points with miraculous qualities that are not located along the 14 meridian lines.

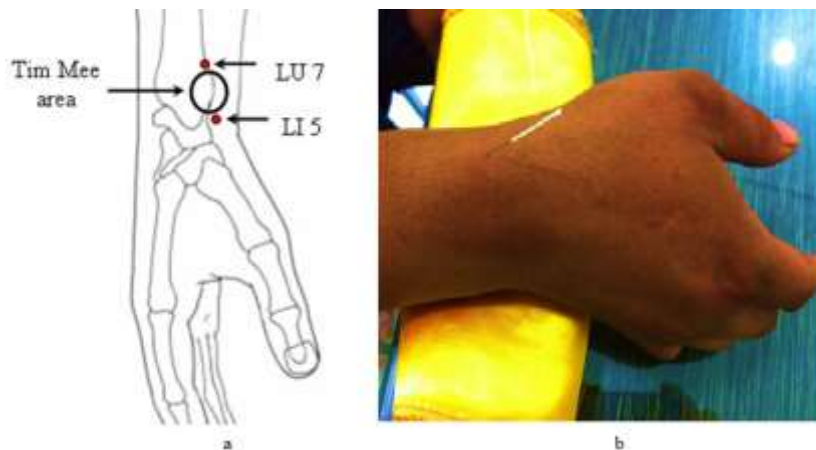


Figure 1. shows where the Mee Point crew is located.

Using acupuncture to stop smoking: a case study. Case One male patient, age 36, with a smoking history spanning more than 20 years and a strong desire to stop. Acupuncture is used for treatment at the points *nèigun/ (PC6)*, *Bihu/ (DU20)*, *hég/ (LI4)*, *yngxing/ (LI20)*, and *Bihu/ (DU20)*, *shénmén/ (HT7)*, *hég/ (LI4)*, and *jiách/ (ST6)*. Methods Fine needle insertion, sedation during needle manipulation, needle left in for 30 minutes, the needles moved once every 10 minutes, and twice weekly therapy. After one acupuncture session, the patient smoked 15 cigarettes instead of 35. After the second acupuncture, I smoked only four cigarettes instead of the previous 15 cigarettes. After receiving acupuncture for the third time, quitting smoking altogether, and repeating the procedure twice more, five times, the results were quite pleasant. Upon follow-up two months later, the person had quit smoking.

Case 2 A male patient, 41 years old, had smoked for 20 years before switching to electric cigarettes two years ago (vaping). Acupuncture is used to treat

patients at the points *dànzhng/ (RN17)**bihu/ (DU20)* and a pair of *nèigun/ (PC6)**chzé/ (LU5)**kngzu/ (LU6)**shénmén/ (HT7)**tàichng/ (LR3)**snynjio/ (SP6)**zsnl/ (ST36)**jièynxué/ (Tim-Mee)*. A little needle is used in the insertion technique; the patient is lying down, the needles is left in place for 30 minutes, and then it is moved every 10 minutes for around 5 seconds. Every day for 30 days, once. The patient sits down after receiving acupuncture, consumes moxa, and dimoxibustes two *jièynxué/ (Tim-Mee)**zsnl/ (ST36)* points. Two days per week are dedicated to therapy. Patients are advised to stay away from those who smoke tobacco cigarettes or vape once they go home. The patient told the acupuncturist that he had two types of vape before the first appointment but that there was no taste after the first treatment. Yet another emotion is still present. The patient did not come back after the second acupuncture session, and the patient's wife was warned that her husband probably had no plans to cease entirely.



The results of acupuncture for electric cigarette (Vape) smokers are favourable, based on the two prior cases. With a combined success rate of 74.6% and 15.4%, acupuncture and ear acupuncture were found to be the most well-liked and effective treatments for aiding people in quitting smoking, according to Lee et al. (2018) research. Less adverse effects (53.4%) and continuous acupoint stimulation (48.2%)—a lesser frequency of symptoms—were two advantages of smoking cessation therapy. The poll's findings indicate that acupuncture is the most well-liked and commonly acknowledged treatment for quitting smoking. To increase the number of people stopping smoking, though. The difference between quitting and not stopping is a solid will to stop. According to Q. Wang et al. (2022) smoking is both a psychological and physical addiction; quitting requires more than willpower. This research backs up a study by Y. Wang et al. (2016) and Dai et al. (2020) which indicated that whether acupuncture is administered alone or in combination, it is a successful, less expensive, and safer treatment for patients of all ages. The most effective approach is acupuncture. It might be more helpful, especially for those who want to stop smoking badly but don't have the time (Dai et al., 2021). The results of this review demonstrate the efficiency of acupuncture in lowering the desire to smoke, the quantity of tobacco ingested, and nicotine dependence.

CONCLUSION

Acupuncture can be used to quit smoking for fast, safe, effective and apparent results. The key for patients to stop smoking is a firm intention and will from within and support from the surrounding environment. Suggestions for further research are to do a combination therapy of acupuncture with other treatments or other currently recommended interventions to reduce

personal and public health problems caused by smoking.

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