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*Acupuncture  
Chinese Herbology  
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## ACUPUNCTURE EFFECTIVE FOR SHOULDER PAIN

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The shoulder is a ball and socket joint connecting the upper arm to the torso. On the upper back, the scapula (shoulder blade) and its four related muscles (taking the acronym "SITS muscles") form the rotator cuff that provides the muscle tension necessary to rotate the upper arm. These muscles are prone to overuse causing early degeneration. From a physical, western medical perspective shoulder pain is caused by an injury such as inflammation, strains, impingement and tears to the muscles and tendons of the shoulder joint and rotator cuff.

In a younger, active person, these injuries are often due to repetitive use: frequent repeating of a particular movement when playing sports or during manual labor. As we age the body weakens. The muscles, tendons and ligaments that join the bones and provide movement become less elastic, strong and flexible. The body becomes less resilient and has a more difficult time repairing itself. Therefore, seniors are especially prone to injuries of the shoulder and other joints such as the back, hip or knee, due to weakness of the structures in these joints.

Progressive rubbing contacts of muscles, tendons and ligaments against bones cause inflammation and swelling called "itis", as in tendonitis (inflammation of the tendon) or bursitis (inflammation of the joint capsule, or 'bursa'). In this case, the body has sent an increased amount blood to the area with high numbers of white blood cells to attack and destroy the pathogens causing tissue damage. Increased blood in the area produces the accumulation of heat, a key feature of these various 'itises' (inflammations).

Standard, western medicine addresses shoulder and other joint pain in one of three ways: physical therapy to strengthen and aid the rebuilding process to the damaged structures, drugs to block the sensation of pain, and surgery to repair severely torn muscles, ligaments or tendons.

Chinese medicine (acupuncture, Chinese herbs and other related modalities) takes a holistic approach to treating the injured tissue. The body is able to spontaneously heal without outside intervention. We see this healing process at work with cuts, bruises or simple strains, colds and flu's. There are times when the injuries and disease processes become too complicated for the body to resolve on its own, causing us to seek outside intervention from a healthcare practitioner.

Chinese medicine is able to signal the body and tell it what it needs to do to repair itself. Acupuncture points have different functions. Analgesic points are effective for stopping pain. Others circulate blood, sending nutrients to strengthen and repair the damaged tissues. Local points direct energy and treatment to the affected area. They are combined with points having functions to treat tendons and ligaments and affect specific areas such as the shoulder, neck or back.

Chinese medicine uses herbs instead of drugs to treat conditions both internally and externally, with topical applications. Like acupuncture points, the herbs also have specific functions for treating injuries and disease. Some herbs strengthen the body and build blood, useful for injuries due to weakness of the tissues. Others affect circulation, moving blood and draining fluids, useful for treating edema, swelling and bruises. Herbs that clear heat are used to reduce inflammatory processes. Some herbs can stop spasms and contractions of the muscles. Herbalists may use internal herbal formulas, or external plasters and liniments. Special 'hit medicines' were developed over a millennium ago for treating injuries sustained while practicing the martial arts.

So how effectively does acupuncture treat shoulder pain? A 2004 study published in *Pain* magazine answered this question. 130 patients with shoulder pain (cuff tendonitis, capsulitis, etc.) received

either 8 weekly acupuncture treatments or 8 sham treatments. A blinded and independent assessor checked progress at seven weeks, three and six month intervals using the scientific standard: visual analogue scale (VAS). After 7 weeks, VAS score fell by 43% in the acupuncture group compared to 20% in the control (sham acupuncture) group. The improvement was maintained in the three and six month interval assessments. Similar improvements were shown in the pain and disability, range of movement, pain medication consumption, quality of life and Lattinen Index scores.<sup>1</sup>

Let me illustrate the effectiveness of Chinese medicine in treating shoulder pain with a case study. I was approached by the mother of a young woman who had been experiencing shoulder pain for five months, beginning when she entered college (I'll call her Mary). The pain began after a stress related, emotional episode caused Mary to lose consciousness. She awoke to the first onset of pain that began in the rhomboid muscles of the upper back, by the shoulder blade (scapular area) and radiated down the outside of her left arm, causing a prickly, pins and needles type of sensation (paresthesia) from the elbow to the pinky finger. Mary was an active female, and a member of her college lacrosse team. Owing to the stress of college life, Mary was frequently tense and irritable, erupting with angry outbursts.

Four months previous, Mary was seen by a doctor who ran a number of scans and diagnostic tests, none of which showed a structural problem or nerve damage that would explain why Mary was experiencing pain and paresthesia. The doctor prescribed medications and physical therapy. After four months of weekly physical therapy sessions with no improvement, the doctor ordered an MRI to find the cause of the pain. The MRI scan came back normal. The doctor theorized that due to frequent stress and tension Mary was tightening her muscles causing the nerve impingement. When we are under stress, we tend to tighten the muscles of the upper back. The mid-back and rotator cuff muscles had become weakened by repetitive use from years of playing lacrosse. Excessive tightening the muscles due to stress became the proverbial straw that broke Mary's back, producing the nerve impingement. The doctor offered treatment options of acupuncture, trigger point injections or electric shock treatment. Mary's mother wondered if acupuncture would help.

I suggested weekly acupuncture treatments, and prescribed a topical herbal liniment to address the pain. After two days of using the liniment, Mary's noticed improvement in symptoms. After two acupuncture treatments, Mary reported that she was less irritable and that her shoulder was much improved. She had no elbow pain and rarely noticed the paresthesia sensation in her lower arm and pinky finger. After four acupuncture treatments, Mary no longer had any pain in her left arm or shoulder. At both the four and eight month follow-ups Mary reported that the pain had resolved and there was no recurrence of symptoms.

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<sup>1</sup> Pain 2004; 112: 289-98.

## *Experienced, Dedicated, Effective*

**Kath Bartlett, MS, LAc** is the owner of the Asheville Center for Chinese Medicine. Bartlett practices in a traditional Chinese style incorporating acupuncture, Chinese herbal medicine, Tui Na massage, dietary and lifestyle counseling to treat a wide variety of health problems. Bartlett has effective results treating joint pain, including back, neck, shoulder, elbow, carpal tunnel, hip, knee and ankle.

Bartlett relocated to Asheville from San Diego, California. There, she externed at several University of California, San Diego Medical School sites, including the Owen's Clinic for HIV+ at Mercy Hospital. Bartlett earned her Masters of Science degree in Traditional Oriental Medicine from the respected Pacific College of Oriental Medicine, San Diego. She is board certified in Oriental Medicine by the National Certification Commission of Acupuncture and Oriental Medicine (NCCAOM). Bartlett completed advance studies of the classics texts of Chinese medical theory with Dr. Min Fan, formally of Bei Jing University. Bartlett received her Bachelor of Arts degree from UCLA. Bartlett is a member of the Board of Directors of the North Carolina Association of Acupuncture and Oriental Medicine (NCAAOM) and is a member at large of the American Association of Oriental Medicine (AAOM).

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