

NADA Ear acupuncture protocol: *Some perspectives*



AcuDetox

for Wellness, Trauma and Addiction
....a chance to communicate



"NADA Ear acupuncture teaches the person to relax from the inside out." This increased sense of calm and the quieting of symptoms that occurs as a result of the acupuncture treatment stimulate patients' own "Qi" (one's inner energy) and bring them back into a more balanced state. As the person become calmer inside, they become much more aware of themselves and others. From this quieter, inner place the person can then make more careful choices in his/her reactions to life situations.....

Dr. Michael O. Smith, psychiatrist, acupuncturist and founder of NADA International



Ear Acupuncture Protocol meets Global needs

* Dr.Michael O.Smith

Developed in the 1970s at Lincoln Hospital (Bronx, NY), the National Acupuncture Detoxification Association (NADA) protocol was originally used as a supportive component in drug and alcohol treatment settings. The 3-5 point ear acupuncture formula controlled withdrawal symptoms and helped patients become more clear-headed and comfortable. Nearly 1,000 licensed drug treatment programs use acupuncture in the U.S. according to federal N-SSATS statistics.

The 21st century has brought a remarkable expansion in the use of the NADA protocol. It is used in 130 prisons in England. Correction officers provide all the treatments under a 5 year training contract by Smart-UK. The jail program was expanded because of an 80% reduction in violent incidents. Post-trauma treatments have been given to community members after 9/11 and Katrina. Treatments for firemen have been permanently institutionalized in both cities. NADA ear acupuncture for well being by NADA India has been used by corporate & NGOs for team work, de-addiction centers for relapse prevention. Nada India also trained and conducted Acudetox for police, para military personnel and inmates of prisons in Gujarat, M.P.& Delhi.

NADA acupuncture has changed the face of psychiatric hospital care in Northern Europe. 3,000 nurses have been trained in 100 different government facilities. Refugee services in war-torn areas have been particularly impressive. The DARE program in Thailand has provided ear acupuncture for many years with a dozen different Burmese tribes in border camps. NADA was introduced during a 2 week training sponsored by Real Medicine Foundation in refugee camps in East Africa in May 2008. By the end of the year, 18,000 treatments were provided by the refugee trainees. Support was provided for survivors of a violent land dispute.

NADA members have used magnetic beads to treat children with ADHD and autism-spectrum disorders, and violence-prone adolescents. The beads are placed on the back of the ear opposite the shen men point. Bead remains in place with and adhesive 1-2 weeks at a time. Many instance of prolonged improvement have occurred, but this technique is only in an early stage of evaluation.

NADA acupuncture is used on a public health model. Treatments are commonly given in large groups on a frequent basis. Patients sit quietly for 45 minutes in a collective experience. Many jurisdictions have laws that allow a wide range of clinical personnel to be trained to use the NADA protocol in state approved facilities under general supervision of a fully licensed acupuncturist or physician. States that do not have this provision, such as Florida and California, have few NADA programs in comparison with states like Virginia and New York which do have this arrangement.

NADA uses 3 ear acupuncture points: sympathetic, shen men, lung.NADA training also involves sterile precautions and social integration with other services. Apprenticeship training is always necessary because the clients are often troubled and distracted.

NADA is a non-verbal approach. There are no diagnostic procedures. The ear points provide a balancing effect: some fall asleep; some feel relief of depression; some seem to be meditating. These balancing effects continue from one to several days even though the patient may be exposed to contrasting emergencies during that time. It is a coping and preventive effect. As an added note, Lincoln used electro acupuncture extensively in the 70s. Symptom relief lasted 6-8 hours. Our patients always preferred the prolonged preventive effects of manual acupuncture. NADA acupuncture adds a valuable component to the behavioral health fields. Its worldwide validation strengthens the entire acupuncture profession. *Dr.Michael O.Smith Founder & Chairman NADA International

NADA protocol for Protection, Treatment & Recovery: Social Worker's Perspective

**Suneel Vatsyayan, Ajay Vats and V. Vindhya

The National Acupuncture Detoxification Association (NADA) is a not-for-profit training and advocacy organization which encouraged community wellness through the use of a standardized auricular acupuncture protocol for behavioural health, including addictions, mental health, and disaster and emotional trauma. NADA works to improve access and effectiveness of care through promoting policies and practices which integrate NADA-style treatment with other western behavioural health modalities. It will be appropriate to mention that some expression such as substance abuse/drug abuse, patient/client, abuse/harmful use and addiction/dependence are interchangeably used throughout this article.

It is estimated that there are about 62.5 million alcohol users, 8.7 million cannabis users and about 2 million opiate users in our country. There are an estimated 250 million tobacco users of age 10 and above. Serious public health impact among women is now becoming more evident in India. Licit substances like tobacco and alcohol are widely prevalent, while abuse of illicit substances like cannabis, heroin, other opiates including opium and propoxyphene is recognized throughout the country.

Table 12.1: Common Drugs of Abuse in India (Males)

Drug Type	Current Prevalence
Tobacco	55.8%
Alcohol	21.4%
Cannabis	3.0%
Heroin	0.2%
Opium	0.5%
Other Opiates	0.1%

(National Household Survey 2002)

Interventions for Substance Abuse

Interventions for substance abuse in India are largely limited to Ministry of Social Justice and Empowerment funded 400 de-addiction centers, 110 hospital based psychiatry department limited to tertiary intervention for those with established late stage problems. Now there is fast growing in numbers of peer led de-addiction centres across the country to fill the gap in the demand and available services. According to National Institute on Drug Abuse (NIDA) (1999) guiding principles for effective intervention no single treatment is effective for all individuals. The treatment should be culture and gender specific, and geared towards addressing individualized needs of the patient. Counseling and other behaviour treatment are critical components of substance use disorder treatment. The treatment which focuses on motivation, relapse, life style change and problem solving ability yields better outcome result.

A gap between the streets or natural settings' associated with drug use or the outreach worker and the threshold of the drug treatment programme where the drug user is

expected to arrive committed, ready or interested in quitting drugs. Drug treatment that is limited to abstinence and acceptance of the addict identity has excluded the majority of drug users who are not ready or interested in quitting drugs or taking on this identity or disease (c). Much of the therapeutic nihilism (the belief that nothing works) associated with substance use is related to the delays in help seeking and help providing. Help is rarely offered early in the substance abuse phase, it is often delayed until end-stage addiction develops. At this stage, the recurrent, relapsing nature of the problem makes treatment more difficult, however, it must not be forgotten condition and life style related new learning and requires long-term intervention and monitoring with objective of helping him to help himself (3).

Nobody can undermine the role of psychosocial interventions in the management in all the phases of substance abuse. There are inherent challenges in the effective delivery of these interventions.

1. Poor treatment retention: It is the patient and not the therapist who invariably controls the duration and intensity of treatment because the patient is usually free to drop out at any time or fail to comply with the expectations of their therapists.
2. "I have a problem" or "I think I should quit" or "I have to do something about this".....Each time he carries a feeling of failure and a burden of guilt not to be successful in each desire and attempt. Society never provides a person a right to fail. Person becomes more and more vulnerable and continues to live with mixed feeling of ambivalence and not ready to forgive himself and carry the burden of past deeds and thoughts.
3. Many of treatments, methods and process create barriers and have no way to deal with these vulnerabilities of a traumatized person with addiction problem.
4. Neither patient nor the therapist is ready to lose the control and start blaming themselves for being failed in their attempts to help.
5. Personal characteristics of therapist affect the outcome: There are indications that the therapist is a significant factor in detaining treatment outcome for psycho-social interventions.

Resistance in Psychosocial Intervention

Occasionally, despite a counselor's best efforts, some clients fail to act in their best interests and negatively respond to all counseling interventions. These clients are often called oppositional, reactionary, noncompliant, intractable, and unmotivated (3). The behaviours displayed by the difficult clients are often collectively referred to as resistance. In clinical terms, resistance is defined as "a process of avoiding or diminishing the self-disclosing communication requested by the interviewer because of its capacity to make the interviewee uncomfortable or anxious" (6) it is an active process that has the potential to become a fundamental obstacle to positive counseling outcomes. Resistance interferes with the counselor's perceived efficacy, impedes client motivation, and undermines the change process (5)

The Bio-Psycho-Social Perspective of Drug Abuse

The World Health Organization (WHO) definition of health as a state of complete physical, mental and social well-being and not merely the absence of disease and

infirmity reflects the holistic view of health most widely accepted today. Even drug abuse can be considered within this model, as it is a bio-psycho-social problem (1).

Manifestations of Drug Addiction

- Irresistible urge for drug
- Lack of self-control
- Change in daily routine of activities –neglect of personal appearance and hygiene
- Moody-often subject to extreme of temper
- Guilt feeling
- Lack of self-confidence and self-image
- Inability to take decisions

Treatment Components: The following components are involved in treatment drug abuser.

- Detoxification
- Treatment Withdrawal
- Prevent Complications
- Correct / Treat Damage Done

Usually done in hospitals /specialized setting and using medicines.

- ▶ Psychotherapy and Counselling
- ▶ Individual Therapy
- ▶ Family Therapy
- ▶ Group Therapy with recovering addicts. As in AA, NA
- ▶ Craving Control Techniques
- ▶ Behavioural Therapies
- ▶ Relaxation and Leisure Time

Rehabilitation

- ▶ Whole person recovery
- ▶ Commitment to a drug free life
- ▶ Acceptance of higher value
- ▶ Adaptation to work and responsibilities
- ▶ Social re-integration
- ▶ 'De-addiction'-usually done in a specialized facility.

Addiction is a bio-psycho and social problem in nature, so treatment approach needs to be equally broad and inclusive. As drug addiction is one of the major emerging areas of social work practices, one of the authors is a social work practitioner realized while working with addicts how other disciplines NADA (National Acupuncture Detoxification Association) acupuncture can be used as an adjunct treatment. He was trained as an apprentice at Lincoln Recovery and Acupuncture Centre, New York, in the year 2001. Then he introduced it at Navjyoti Delhi Police Foundation Drug Treatment Centre as a value added service. He observed that use of such techniques can also be applied for the healthy rapport building and developing trust with the clientele.

Social Work and Acupuncture Works on Similar Dimension

The internationally accepted definition of professional social work is very well received. The social work profession promotes social change, problem solving in human relationships and the empowerment and liberation of people to enhance well-being. Utilizing theories of human behaviour and social systems, social work intervenes at the points where people interact with their environments. Principles of human rights and social justice are fundamental to social work. Acupuncture and all Qi (Chi)-flow therapies “Help the body help itself.” So is the goal of the social work.

NADA Protocol

At three designated ear points in each auricle (outer ear), clinicians trained through NADA apply fine gauge, sterilized, one-time use stainless steel needles just under the skin, where they remain for up to an hour while the client (in most circumstances) relaxes quietly in a comfortable chair. Ordinarily, groups of clients sit together while undergoing the treatment.

The procedure functions as an adjunct to a comprehensive treatment programme offering the basic therapeutic elements of counseling, education, family involvement, mutual support group involvement, supportive health care of general nature. Clients in all types of treatment settings including inpatient, outpatient, incarcerated, shelters, harm reduction and street outreach can utilize this treatment. Among the benefits reported by clients and clinicians are improved programme retention, a more optimistic and cooperative attitude toward the process of recovery, as well as reductions in cravings, anxiety, sleep disturbance and need for pharmaceuticals.

The NADA protocol is also known and commonly referred to as: Acudetox, acupuncture detoxifications, three point ear acupuncture protocol. Beyond the actual needling treatment, a key element of the protocol specifies qualities of behaviour and attitude on the part of the clinician, consistent with what is known as the Spirit of NADA. There are no diagnostic procedures as part of NADA Protocol. The ear points provide a balancing effect: some may fall asleep; some feel relief of depression; some seem to be meditating. These balancing be exposed to contrasting emergencies during that time. It is a coping and preventive effect (7,8)

The spirit of NADA

Since the NADA Protocol works by mobilizing the existing internal resources of the patient, every aspect of a clinician’s interaction with persons in need is to help them help themselves. Opening access to the treatment itself comes first. This occurs through eliminating unnecessary bureaucratic, socio-economics and environmental barriers to starting a programme of recovery. The next task is to create a zone of peace within which patients can begin to experience their own inner strengths. Finally, and in respect to the other aspects, keep it simple. As a social work practitioner, these are the following challenges:

- Can we treat a client before assessment and diagnosis are completed so that the client can be calm and cooperative enough for a useful diagnosis to be made.
- Confronting about drug use is necessary?
- Can we help a client even while they are in denial about the need for treatment.
- Can we make a client relax without him losing control.
- Is the treatment to which client may return at any time, especially following a relapse and still find all the benefits.

By introducing NADA Protocol, one can learn that Acudetox is Non-verbal...non-threatening. Acupuncture is usually non-threatening because it is non-verbal –the person does not have to explain or justify himself and it does not have to be associated with labeling or diagnosis, or an expectation that the person be interested in abstinence, much less drug or alcohol free at the time they are treated.

(i) *Acupuncture is useful because it doesn't revolve around the drug:* The acupuncture allows greater flexibility in treatment approaches because social worker can step out of the expert role because the approach itself models a more horizontal relationship: 'Did you swab your ears and are you ready for a treatment?'

(ii) *Acupuncture does not confront the person:* Michael Smith has noted that a verbal exchange is not required, nor is a readiness to talk with counselors or a willingness to complete an assessment or fill out a form. NADA Acupuncture has many characteristics in common with counseling. It uses group process in a tolerant, supportive and present-time oriented manner. Participation is independent of diagnosis and level of recovery. Both approaches are simple, reinforcing, nurturing, and conveniently available. The emphasis on 'self-responsibility' is common to both systems. In practice, acupuncture provides an excellent foundation for counseling process. Smith says, "Acudetox counseling teaches the person to relax from the inside out." This increased sense of calm and the quieting of symptoms that occurs as a result of the acupuncture treatment stimulate patients' own "Qi" (one's inner energy) and bring them back into a more balanced state. As person become calmer inside, they become much more aware of themselves and others. From this quieter, inner place the person can then make more careful choices in their reactions to life situations. Interpersonal relations and unresolved feelings can be a source of stress. The past and current traumatic events can leave a person with addiction problem chronically stressed. The bodily energy is balanced with NADA Ear acupuncture, peace of mind is restored so is life balance can be partially restored and works as foundation for growth and recovery.

The 21st century has brought a remarkable expansion in the use of the NADA protocol. It is used in 130 prisons in England. Correction officers provide all the treatments under a five years training contract by Smart-UK. The jail programme was expanded because of an 80 per cent reduction in violent incidents. Post-trauma treatments have been given to community members after 9/11 and Katrina. Treatments for fireman have been permanently institutionalized in both cities. Ear acupuncture for stress has been used by hundreds of para-military (Border Security Force) personnel and prisoners in Gujarat and Delhi through Nada –India.

NADA acupuncture has changed the face of psychiatric hospital care in Northern Europe. Around 3,000 nurses have been trained in 100 different government facilities. Refugee services in war-torn areas have been particularly impressive. The DARE

programme in Thailand has provided ear acupuncture for many years with a dozen different Burmese tribes in border camps. NADA was introduced during a two –week training sponsored by Real Medicine Foundation in refuge camps in East African in May 2008. By the end of the year, 1800 treatments were provided by the refugee trainees. Support was provided for survivors of a violent land dispute. (7,8) NADA Protocol has become part of the one month and three month training courses organized by National Institute of Social Defence (Ministry of Social Justice and Empowerment) for addiction counselors and social workers .(4)

In summary, NADA Ear acupuncture helps social work practitioner to encourage patients to participate in individual and group counseling sessions at stress reduction service or drug treatment service more effectively. It is a nonverbal, non-threatening, “first step” intervention, that has an immediate calming effect on people. Initial participation with Ear acupuncture has been found to improve patients’ overall treatment retention and to facilitate their subsequent involvement in bringing back work life balance. NADA acupuncture adds a valuable component to the behavioural health fields. Acudetox in the addiction treatment field and its worldwide acceptance validates and strengthens the entire acupuncture and social work profession as well.

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Role of Acupuncture in Future of Public Health

Dr. Arindarn Sinha*

The dedicated human endeavour in medical science all over the world has taken the public health scenario to the extent which was unimaginable even half a century ago. But during this time when the public health system was busy fighting these communicable diseases, we started losing countless lives to new demons. Road Traffic Accidents, Coronary Artery Diseases, Hypertension, Diabetes Mellitus, Cerebro-Vascular Diseases, and Obesity to name a few. India has been declared as world capital of Coronary Diseases and Diabetes, the two biggest killers of our time. But sadly the health system we have at present in the country still lacks the capacity to prevent these diseases.

Acupuncture is a mode of therapy which is ancient in its roots and well documented and proven on scientific altar. Acupuncture is efficient in profoundly reducing the stress, regularizing the sleep, elevating the mood and harmonizing the body physiology. Easy access to quality Acupuncture Centres will help to fight painful symptoms and reduce the NSAIDs consumption thus saving millions of patients from kidney diseases and other side effects of NSAIDS.

NADA acupuncture is an Acupuncture Protocol used world over for Acudetox. We all have to understand the gravity of these Non communicable diseases and their economical and social burden on our population. Acupuncture can very efficiently help reduce this burden.

Role of Acupuncture in future of public health is manifold, as our public health scenario will move more and more towards non-communicable diseases, acupuncture will help both in prevention and treatment of Diabetic complications , hypertension, coronary artery diseases, Cerebrovascular accidents and sequels like hemiplegia , aphasia and paraplegia. Acupuncture is showing new hopes in treatment of Spinal Cord Injuries resulting from road traffic accidents.

One major roadblock in propagation of Acupuncture is its unique diagnosis and point selection method which varies even among experts. Our answer to this is developing Protocol Acupuncture for different conditions, we have the glowing example of NADA Acupuncture Protocol also known as AcuDetox developed by Dr.M.O.Smith. These points are easy to train and easy to administer and show reproducible results. In future this is going to become a useful tool in hands of health care providers to reduce Stress, increase productivity, regularizing sleep and harmonizing body equilibrium. Reducing stress is a big step towards reducing and managing most of lifestyle diseases such as Diabetes, Hypertension, CAD & CVA. But the sad reality is that Acupuncture does not even find mention in national health policy, whereas our health department runs a special National Program for NCD.

Acupuncture is proven to help in complications of DM such as Periarthritis or Frozen Shoulder, Intermittent Claudication, Diabetic Neuropathy and Dementia Hemiplegia and Paraplegia resulting from CVA or Stroke respond to early Acupuncture Treatment. But sadly big percentage of our population and medical fraternity have little or no first hand experience of the effectiveness of Acupuncture as mode of treatment. Acupuncture is not the panacea to every condition under the sun nor it is alternate to other treatment options but has a big role in combination to current treatment modalities and deserves our serious consideration for the betterment of mankind.

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Overcoming Addiction with Needles

***Dr.Raman Kapoor

National Acupuncture Detoxification Association (NADA) acupuncture is a simple standardised five-point auricular needling protocol that originated as a grassroots response to opiate addiction in the 1970s. It is increasingly recognised as a nonspecific behavioural health intervention of notable utility in a wide variety of other psychiatric settings and conditions.

This alternative therapy has been used as an adjunct to conventional therapy because acupuncture reduces cravings and withdrawal symptoms associated with addictive substance use and contributes to improved treatment engagement and treatment retention.

NADA acupuncture can be used in the acute and chronic phases of medical and psychiatric disease, across a broad spectrum of symptoms and conditions; this kind of acupuncture can also be used before and after a diagnosis has been made.

All study participants were residents of the highly structured Mecklenburg County Substance Abuse Services Centre (SASC). All 167 patients treated in the SASC's 28 day treatment programme between March 2008 and June 2008 were included in this study. One hundred and three patients received NADA acupuncture plus conventional treatment, while 64 patients received conventional treatment only. In this NADA acupuncture plus conventional treatment programme, patients were needled at five bilateral auricular acupuncture points while seated together in a large group of up to 20 patients per treatment session. Five specific needles were inserted at the beginning of the treatment hour and generally remained in place for 30-45 minutes. Both the treatment groups were offered sessions twice weekly.

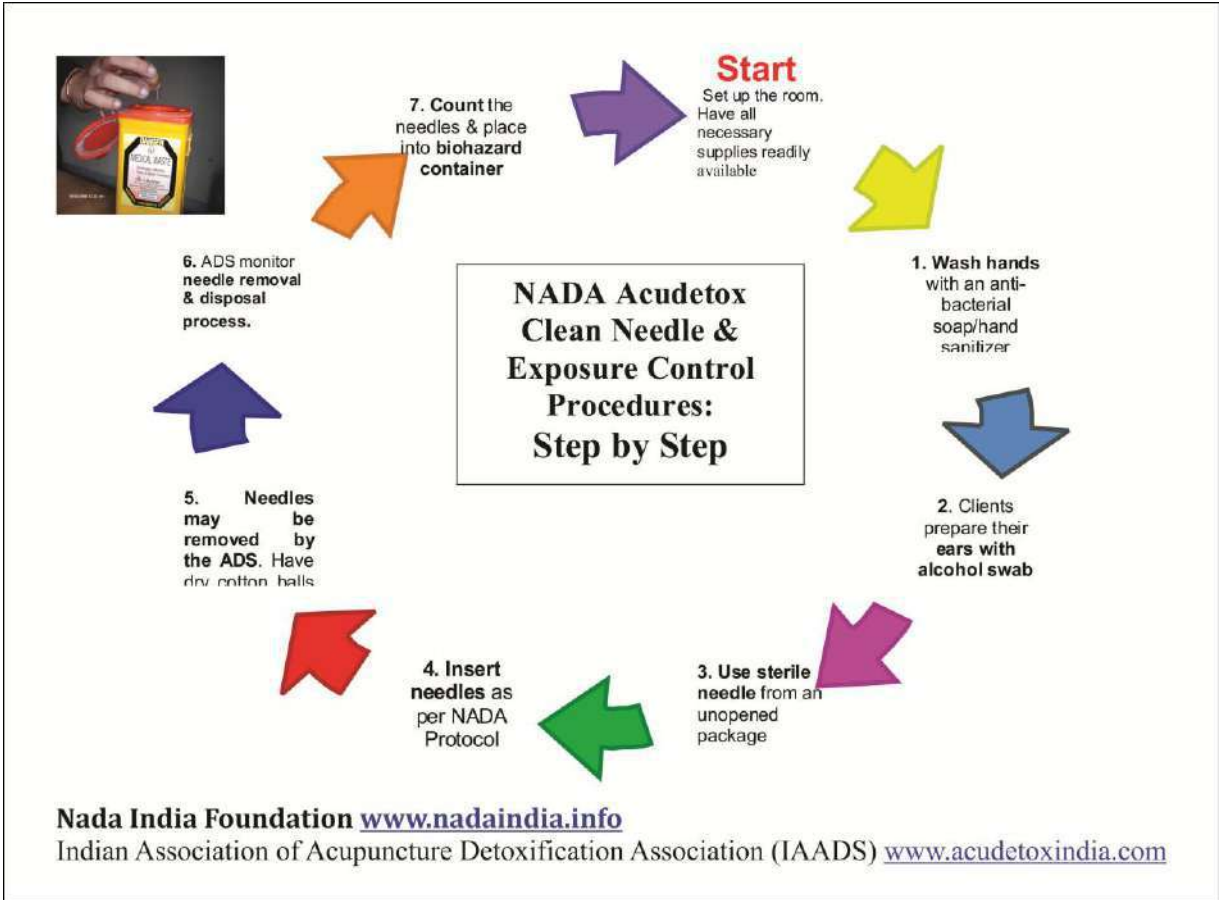
NADA acupuncture plus conventional treatment group scores, measured change from baseline, decreased significantly from pre to post treatment for all 7 measures. When comparing the NADA acupuncture plus conventional treatment group to the conventional treatment only group there was a statistically significant difference for cravings, depression, anxiety, anger, body aches/headaches, concentration and decreased energy.

The goal of this pilot study was to examine seven common behavioural health symptoms in a population of patients with substance use disorder diagnoses and to explore whether or not NADA acupuncture plus conventional treatment is helpful for alleviating symptoms measured.

The results in this study showed that patients had symptom reduction across all seven common behavioural health symptom measures. These results suggest that NADA acupuncture is a simple and inexpensive treatment that may help alleviate some of the behavioural health symptoms that can affect individuals with a diagnosis of substance use disorder.

This study showed that NADA acupuncture in combination with conventional treatment for substance use disorder produced substantial relief of seven common behavioural health symptoms while conventional treatment alone did not.

***<http://www.newindianexpress.com/lifestyle/health/Overcoming-Addiction-with-Needles/2014/10/11/article2471322.ece>



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