

Acupuncture Treatment for Patients with Musculoskeletal Disorders and Low Back Pain at the MCO Ladies Clinic in Bekasi

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Keywords:	Abstract
acupuncture; chronic low back pain; musculoskeletal disorders; traditional chinese medicine; complementary therapy.	Low back pain (LBP) is one of the leading causes of disability worldwide and significantly affects physical function and quality of life. This study aimed to describe the management and clinical outcomes of acupuncture treatment for patients with musculoskeletal low back pain at the MCO Ladies Clinic, Bekasi. This study employed a qualitative case study design involving one participant diagnosed with chronic low back pain. Comprehensive assessments were conducted using the four Traditional Chinese Medicine (TCM) examination methods (Wang, Wen, Wen, and Qie). The participant underwent six acupuncture treatment sessions between May 6 and May 16, 2025. Therapy was administered according to TCM syndrome differentiation using acupuncture points BL23 (Shenshu), BL25 (Dachangshu), GV3 (Yaoyangguan), BL40 (Weizhong), KI3 (Taixi), BL60 (Kunlun), and Ashi points. Data were analyzed descriptively by comparing clinical findings and therapeutic outcomes across treatment sessions. The participant was diagnosed with Kidney Deficiency accompanied by Qi and Blood Stagnation. Progressive clinical improvement was observed throughout the six treatment sessions. Pain intensity decreased from 6 to 1 on the Numeric Rating Scale (NRS), muscle spasms diminished, lumbar range of motion improved, and daily functional activities became easier to perform. No adverse events were reported during therapy. Acupuncture management based on Traditional Chinese Medicine principles demonstrated favorable clinical outcomes in reducing pain, improving lumbar function, and enhancing daily activities in a patient with chronic low back pain. These findings support acupuncture as a promising complementary intervention for managing chronic musculoskeletal low back pain.

INTRODUCTION

Low back pain is a generalized musculoskeletal or neurologic disorder that affects the lumbar segment of the spine. Back pain is the second most common illness in the United States after headaches. Acute low back pain usually lasts a few days to a few weeks. It is often the result of trauma, such as a sports injury or a car accident. In acute cases, damaged structures are more likely to occur in soft tissues such as muscles, ligaments, or tendons (Chen et al. 2023; Flores et al. 2019; Kawa et al. 2025; Luokkala et al. 2019; Vila Pouca et al. 2021).

If low back pain persists for more than three months, it is considered chronic. It is often caused by, osteoarthritis, rheumatoid arthritis, degeneration of the disc, or herniasidisc, a broken spine, tumours, or infections. Some patients first feel low back pain right after lifting heavy objects, moving suddenly, or sitting in one position for long periods of time. However, before such activities, their structure may have lost strength, or become too rigid and tight (Freeman 2023; Leach et al. 2021; Osman et al. 2015; Vaidhyanathan 2018; Vuori et al. 2016).

Low back pain ranges from muscle pain to stabbing pain. It is often accompanied by pain limited flexibility or range of motion. Low back pain can radiate to the buttocks, and sometimes

to the legs. The pain may be worse when bending and sitting. Sometimes turning over in bed and sitting is also painful. The muscles of the lower back can experience spasms and pain (Kocak et al. 2019; Koppenhaver et al. 2017; Tüzün et al. 2017).

In Western medicine, treatment for acute low back or chronic pain involves a combination of prescription drugs and over-the-counter medications. Lumbar and spine surgery is another option when conservative treatment is not effective or when the patient's neurological symptoms develop progressively such as weakness of the legs, bladder or intestinal incontinence. When people with low back pain do not respond to more conventional approaches, then they should consider acupuncture therapy.

According to Chinese medicine, chronic low back pain is usually thought to be related to someone experiencing symptoms of kidney deficiency, either qi, yin, yang or a combination of both. However, other patterns may also exist that inhibit recovery, including deficiency of spin qi leading to the liver, lack of blood, as well as inhibiting the transformation and transport of fluids in the body. In addition, any chronic condition can also cause local blood static if it lasts for a long time.

The novelty of this research lies in its comprehensive documentation of the complete acupuncture care process, including detailed assessment using all four TCM examination methods (Wang, Wen, Wen, Qie), syndrome differentiation, rational point selection based on TCM principles, evaluation of therapy outcomes across six sessions, and correlation of clinical findings with TCM theory. This case study provides a practical illustration of how acupuncture management is conducted in a clinical setting in Indonesia, which can serve as a reference for acupuncture practitioners and contribute to the evidence base for acupuncture in chronic low back pain management.

The limitations of the problem in this Case Study are limited to the management of acupuncture treatment to overcome musculoskeletal Low Back Pain cases at the MCO Ladies clinic. Based on this background, the formulation of the problem in this study is as follows: How is acupuncture administered in musculoskeletal low back pain patients at the MCO Ladies Clinic. The purpose of this case study research is to find out the management of Acupuncture in cases of Low Back Pain patients at the MCO Ladies clinic.

METHOD

Research Design

The design of this study used a qualitative approach of the case study type. The research design of acupuncture case studies here is not purely an exploration of a social problem either individually or as a group that ends with recommendations for alternative solutions as befits case studies in general, but as a form of report on Handling health complaints with acupuncture modality. Main activities carried out is to observe the process of managing acupuncture service activities from beginning to end. The preparation is guided by the standard rules of acupuncture therapy. In-depth data collection is carried out using instruments in the form of Client Data Sheets. The data that has been obtained is carefully processed to be used as a basis for establishing the diagnosis (Diseases and Syndromes). In the management of acupuncture services, a correct diagnosis is needed to be used as a guideline in compiling and implementing a work plan for acupuncture service actions. Each session of service actions in a person who is in need of health services is analyzed until it becomes a case report. This research was

conducted to get a comprehensive overview of Acupuncture Care. However, the implementation of this case study is limited by time and place, unless there are situations and conditions that require change.

Term Limitations

The limitation of terms in case study research is an explanation of the key terms used in the research so that they have a clear, specific meaning, and do not cause differences in interpretation. The term limits are compiled to provide clarity about the concepts being researched so that readers understand the scope of research and the context of using each term in accordance with the purpose of the research. In acupuncture case study research, term limitations are focused on terms that are the main concept in the research title so that the discussion becomes more directed and consistent (Nursalam, 2020).

Participants

Participants in this study were limited to one client/participant. Participants who It is hoped that in this study the characteristics will be mentioned in general. Characteristics that Intended to include gender, age, health, willingness, social status, and others who are eligible as participants or research subjects.

Research Location and Time

The location of this case study research refers to the address where the research was carried out in the form of clinics in hospitals, clinics, joint foundations, independent practices or other health service facilities. The time of the research implementation is adjusted to the academic calendar or the schedule of research activities that have been consulted with the Supervisor by mentioning the date, month and year of the start and end of the research in the form of a Final Project.

Data Collection

Licensing

The process of research activities begins after the proposal is approved by the supervisor. After that, the data collection process is carried out which is preceded by bureaucratic procedures or licensing letters issued by the Head of the Acupuncture Study Program ITSK RS dr. Soepraoen Malang.

Data collection

Data collection is a systematic process to obtain information needed in a research through various techniques and instruments that are in accordance with the research objectives so that the data obtained is valid, accurate, and accountable (Nursalam, 2020). The data collection process in this study is carried out through the following stages:

- 1) The researcher asked for informed consent from the research subject.
- 2) The researcher conducted an Acupuncture study. The researcher in conducting the assessment uses a data collection tool in the form of a list of contents (Client Data Sheet) filled in by the researchers, including:

Observation Inspection (Money)

This Observation Examination (Wang), includes:

- Shen examination, including: Eye light, Face color, Facial expressions, Awareness, Language/Speech, Body condition, and Reflection of movement/behavior.
- Facial Examination, including: Facial skin color, facial skin freshness, and topography of organs on the face.

- Body Condition Examination, including: Body Shape, Body Movements (Posture/Pose), Head, Hair, Face, Neck (Front), Neck (Back), Eyes, Ears, Nose, Mouth / Lips, Gums, Throat, and Skin.
- Tongue Examination, including: Tongue Muscles / Tongue Body, Tongue Membranes / Moss, and Topography of Zang Fu Organs on the Tongue.

Hearing and Smell Examination (Wen).

- Hearing Examination, including: Sound Output, Speech, Breathing, Sneezing, Cough Guide, Vomiting, Hiccups, Burping, Sighing (Deep Breathing), and Bowel Sounds of the client that can be heard by the examiner.
- Olfactory Examination, including: Bad Breath, Nose, Sweat Odor, Body Odor, and Odor of Excreta from the Client that can be smelled by the examiner.

Interview Examination (Wen).

This Interview Examination (Wen), includes:

- Interviews about Client Identity.
- Interview about the Main Complaint.
- Interview about Additional Complaints.
- Interview on Current History of Illness.
- Interview about the History of Past Illness.
- Interviews about the Client's Personal Lifestyle History.
- Family History Interviews.
- Interview on Symptoms of Current Illness: Cold Heat, Sweat, Complaints (Taste/Sensation) in body parts, Bowel Movements, Urination, Eating and Drinking Habits, Taste in the mouth, Thirst (Throat Problems), Hearing (Ear Problems), Vision (Eye Problems), Sleep, Women's Specific Problems, Men's Specific Problems, and Children's Special Problems.

Touch Examination (Qie).

This Touch Examination (Qie) includes: Touching the complaint area, Touching Special Points, and Pulse Touching.

Medical diagnostic examinations and other relevant data.

Observation of data supports the results of medical diagnostic examinations and other relevant data, such as: results of clinical laboratory examinations, results of radiology examinations, medical record data, and others.

Data Reduction.

Data reduction is a data processing process. The researcher processed the results of four methods of examining clients. The data collected through the Client Status Sheet is sorted by category. Next, the researcher compiles a data resume, namely selecting data that has diagnostic values or abnormal data only. This data will later be used as the basis for establishing acupuncture diagnoses.

Establish Diagnosis (Diseases and Syndromes).

The diagnosis of acupuncture work is established as a basis for compiling a work plan for acupuncture care. The diagnosis in question includes two things, namely the statement of the disease and the syndrome. The disease and its syndrome can be established if the data from the results of the four-way examination are sufficient. In one type of disease it is often found that there is more than one syndrome. Thus, acupuncture care planning can be arranged by following how many syndromes have been successfully discovered.

Preparation of a Care Plan

In this acupuncture case study research, the arrangement of acupuncture care plans includes:

- 3) Principles and Methods of Parenting
- 4) Selection of Tools and Nurturing Materials
- 5) Spot Selection and Manipulation Methods
- 6) Determination of Parenting Schedule
- 7) Submission of Recommendations and Suggestions

Implementation of the Care Plan

In this acupuncture case study research, the implementation of acupuncture actions includes:

- 1) Preparation of facilities, tools and materials
- 2) Client consent
- 3) Client positioning
- 4) Hand decontamination
- 5) Wearing personal protective equipment
- 6) Preparation of the location of the stabbing target
- 7) Needle preparation
- 8) Duration of retention
- 9) Needle collection
- 10) Decontamination of equipment
- 11) Standby
- 12) Action response (responsive)
- 13) Prevention of trauma/injury risk
- 14) Rewearing of the client's clothes
- 15) Storage of sharp objects
- 16) Obedience to the health and safety azaz

Preparation of Evaluation

In this acupuncture case study study, the evaluation of acupuncture actions includes:

Process Evaluation

That is, the evaluation is carried out immediately after all the needles are removed. This evaluation is quite short covering four methods of examination, namely observation of the former prisoner, changes in shen*), sing, and others. Hearing examinations include coughing sounds, speech sounds, etc., and touch, including temperature, pulse, location of complaints, and others, as well as questions about the use of assistive devices, reactions to the results of the hearing to complaints, and others.

Evaluation of results

That is the provisional conclusion of the results of the process evaluation in the form of feasibility to continue therapy in the next session according to the schedule agreement or other appropriate and fast action is needed.

Prognosis Statement

In this case study study, the prognosis statement of acupuncture includes Prognosis.

Prognosis is a scientific prediction about the possible development of a disease and its outcomes. The prognosis statement is as follows:

- a) Sanam : healed
- b) Bonam : good
- c) Dubia : uncertain / doubtful

References.

Referral is a follow-up and/or additional healthcare process in a more comprehensive healthcare facility. Referred clients are clients who need health services outside the authority of a therapist's acupuncture.

Data Validity Test

Data validity testing is a process to ensure that the data obtained has a level of credibility, validity, and reliability so that it can be scientifically accounted for. In case study research, the researcher plays a role as the main instrument so that the integrity, accuracy, and consistency of the researcher greatly determine the quality of the data obtained (Nursalam, 2023; Creswell & Creswell, 2023).

In this study, the validity test of data was carried out in several ways, namely:

1. **Extension of the time of action or care**, namely observing and providing therapy repeatedly during six meetings so that the researcher obtained more complete data on the development of the participant's condition.
2. **Source triangulation**, which is comparing and confirming information obtained from three main sources, namely participants, acupuncture therapists, and family members who know the participant's condition. Triangulation is done to increase the credibility of the data and minimize the occurrence of bias in research.

Data Analysis

Data analysis in this study was carried out using a cross-comparison technique of data between acupuncture care sessions. The data compared is process data and result data. Process data includes the process of examining clients, preparing diagnoses (diseases and syndromes), preparing care plans and implementing care measures.

Outcome data is data from observations of changes that occur after receiving care measures, which include the client's recovery rate, prognosis, and referral. The data analysis process is in the form of cross-referencing between actions carried out by comparing the implementation of 1st care with 2nd care, 1st care with 3rd care, 1st care with 4th care and so on.

Writing Ethics

In order for this case study research to take place properly and the researcher is safe from ethical issues, the researcher prepares several things, namely:

- 8) Ask permission from the person in charge of the Owner of the Independent Practice of Acupuncture / Foundation / Rumah Sehat while providing an explanation of the purpose and objectives of the research.
- 9) Placing the person being researched not as an "object" but as a person whose degree is the same as the researcher.
- 10) Respect, respect, and obey all rules, norms, societal values, beliefs, customs, and cultures that live in the community where the Acupuncture Clinic is located.
- 11) Hold all secrets related to the information provided.

- 12) Information about the subject is not published if the subject does not want to, including the subject's name will not be included in the research report, as well as the subject's face being blurred or eyes closed if it is necessary for documentation.
- 13) The researcher in recruiting participants first provides informed consent, which is to honestly inform the purpose and objectives related to the research objectives to prospective participants as clearly as possible and ask for permission in writing.
- 14) During and after the research, privacy is maintained, the participant's name is replaced with an initials (anonymity), the researcher will maintain the confidentiality of the information provided and is only used for research activities and will not be published without the participant's permission.
- 15) During data collection, the researcher provided comfort to the participants by taking a place that suited the participants' wishes. So that participants can be free without any environmental influence to express the problems experienced.

RESULTS AND DISCUSSION

Research Results

This case study research was carried out at the MCO Ladies Clinic from May 6, 2025 to May 16, 2025. During this period, participants received six times of acupuncture therapy according to the care plan that had been prepared. The assessment was carried out before the first therapy, then continued with evaluation in each session to determine the development of the participant's condition, including changes in pain intensity, range of motion, subjective complaints, and acupuncture examination results. The results of the study were presented based on study data, acupuncture diagnosis, implementation of therapy, and evaluation at each visit.

Location Overview

This case study research was conducted at MCO Ladies Clinic, which is a healthcare facility that provides complementary treatment services, including acupuncture therapy. The clinic provides examination, diagnosis enforcement, therapeutic actions, and health education services to patients in accordance with applicable service standards.

Acupuncture services at MCO Ladies Clinic are carried out by health workers who have competence in the field of acupuncture by applying the principles of patient safety, the use of disposable sterile devices, and infection prevention and control procedures. The action room is designed to provide comfort and privacy during the therapy process. This study was conducted on patients who met the inclusion criteria and had given consent to become a research participant through informed consent.

Participant Characteristics (general participant data)

This study involved one participant who met the inclusion criteria as the subject of the case study. The general characteristics of the participants are presented in Table 1.

Table 1 General Characteristics of Participants

Characteristics	Remarks
Participant's Initials	Mrs. A
Age	45 years old
Gender	Women
Final Education	High School

Jobs	Housewives
Marital Status	Married
Main Complaints	Pain in the lower back
Pain Location	Lumbar region (L4–L5/L5–S1)
Long Complaint	More than 3 months
Pain Scale	6/10 (NRS)

Based on these general data, participants were patients with the main complaints of low back pain who had met the study criteria. Furthermore, a comprehensive assessment was carried out using four examination methods in Traditional Chinese Medicine, namely inspection (Wang), auscultation and olfaction (Wen), interview (Wen), and palpation (Qie), as the basis for establishing the diagnosis of acupuncture and determining the principles of therapy.

Nursing Management (resume of each therapy session)

The management of acupuncture care for participants was carried out six times of therapy **during** the period from May 6 to May 16, 2025 at the MCO Ladies Clinic. Therapy is given based on the results of the assessment at each visit with the principle of therapy nourishing the kidneys, improving Qi and Blood circulation, opening meridian blockages, and reducing pain. A summary of the implementation of therapy is presented as follows.

Therapy I (May 6, 2025)

A preliminary assessment of the main complaint was carried out, the examination of Wang, Wen, Wen, and Qie. Participants complained of low back pain with an NRS pain scale of 6 accompanied by limited movement. The diagnosis of acupuncture is Kidney Deficiency accompanied by Qi and Blood Stagnation. Therapy uses BL23 (Shenshu), BL25 (Dachangshu), BL40 (Weizhong), GV3 (Yaoyangguan), KI3 (Taixi), and Ashi points. Evaluation showed that the pain was still felt but the body felt lighter after therapy.

Therapy II (May 8, 2025)

Pain complaints begin to decrease with NRS 5. The stiffness of the lumbar muscles begins to decrease and the range of motion improves slightly. Therapy is carried out using the same point according to the results of the evaluation. After therapy, participants stated that pain was reduced and movement became more comfortable.

Therapy III (May 10, 2025)

The intensity of the pain decreases to NRS 4. Muscle spasms are reduced and light activities can be done better. Acupuncture therapy is still administered based on the differentiation of the syndrome by maintaining the principle of Kidney notification and promoting Qi and Blood. The evaluation shows good development.

IV Therapy (May 12, 2025)

Pain reduced to NRS 3. Participants admitted that it was easier to sit, stand, and walk without excessive pain. The lumbar range of motion increased compared to previous therapy. Therapy is continued with the same acupuncture point according to the clinical condition.

V Therapy (May 14, 2025)

Pain complaints stay NRS 2. Muscle spasms are almost not found and daily activities can be carried out more comfortably. Evaluation shows consistent improvement so that therapy is focused on maintaining the results that have been achieved.

VI Therapy (May 16, 2025)

At the end of therapy, the intensity of pain decreases to NRS 1. Participants were able to carry out daily activities without significant obstacles, lumbar range of motion improved, and no meaningful muscle spasms were found. Based on the results of the evaluation, acupuncture therapy provided clinical improvement to Low Back Pain complaints in study participants.

Table 2 of Resumes of Acupuncture Therapy Implementation Stages

Therapy Sessions	Inspection	Diagnosis	Planning	Implementation	Evaluation
1st May 6, 2025	The patient comes with a major complaint of pain in the lower back area that has been felt for approximately three months. The pain is dull, sometimes stabbing when bending over, lifting weights, or sitting for long periods of time. The pain scale based on the Numeric Rating Scale (NRS) is 6/10. The results of the acupuncture examination are obtained as follows. a. Observation Examination (Money) Shen is kind, the patient is fully conscious and can	Medical Diagnosis Low Back Pain. Acupuncture Diagnosis Renal Qi deficiency is accompanied by stagnation of Qi and blood in the Bladder meridians. Diagnosis Basis Chronic pain in the lumbar region. Pain increases during activity. The waist feels weak. Pale tongue with a thin white membrane. Deep and weak pulse.	The principle of therapy is to nourish the Kidney Qi, improve Qi and blood circulation, unblock meridians, reduce muscle spasms, and relieve pain. Planned acupuncture points: BL23 (Shenshu) BL25 (Dachangshu) GV3 (Yaoyangguan) BL40 (Weizhong) KI3 (Taixi) Ashi points on the pain area Therapy was performed using sterile disposable acupuncture needles measuring 0.25 × 40 mm with retention for 30 minutes.	The patient is positioned on his stomach on the therapy bed. The skin on the puncture area is cleaned using 70% alcohol. The acupuncture needle is inserted at the BL23, BL25, GV3, BL40, KI3, and Ashi points until the sensation of Deqi is obtained. Tonification manipulation was performed at the KI3 and BL23 points, while sedation manipulation was performed at the BL40 and Ashi points. The needle is maintained for 30 minutes, then removed and lightly pressed using a sterile cotton swab on the puncture mark.	During therapy, no side effects such as excessive bleeding, dizziness, or syncope were found. After the therapy was completed, patients reported that the lower back area felt lighter and muscle tension began to decrease. The pain scale is still 6/10, but patients feel a decrease in pain intensity when standing and walking compared to before therapy. Patients are advised to avoid lifting heavy weights, improve posture while sitting, stretch the lumbar muscles regularly, and return to undergo therapy according to a predetermined schedule.

communicate
well.

The posture
appears to be
slightly bent
due to pain.

Lumbar
flexion
movement is
limited.

The tongue is
pale reddish
with a thin
white
membrane.

b. Hearing
and Smell
Examination
(Wen)

The voice
speaks clearly
and normally.

Normal
breathing.

No typical
body odor or
bad breath
was found.

c. Interview
Examination
(Wen)

The main
complaint is
low back
pain.

Pain increases
when sitting
for a long
time, bending
over, and
lifting
weights.

Pain
decreases
after rest.

Get enough
sleep, good
appetite,

	defecate and urinate within normal limits.				
	d. Touch Examination (Qie)				
	Pressure pain was found in the lumbar region along the meridians of the bladder. The palpable lumbar paravertebral muscles are tense. Deep pulse (Chen) and weak (Xu).				
Sessions 2nd May 8, 2025	Patients come according to the control schedule. Patients stated that low back pain began to decrease compared to before the first therapy. Complaints still arise when sitting for more than 30 minutes and when bending over. The pain scale becomes 5/10. Examination showed that the movement of lumbar flexion began to increase, the pressure pain in the lumbar region was still present but	Medical Diagnosis Low Back Pain. Acupuncture Diagnosis Kidney Qi Deficiency is accompanied by Stagnation of Qi and Blood with the condition starting to improve.	The therapeutic principle maintains kidney tonification, promotes Qi and blood, reduces pain, and improves lumbar function. Points used: BL23 (Shenshu) BL25 (Dachangshu) GV3 (Yaoyangguan) BL40 (Weizhong) KI3 (Taixi) Ashi Point	Skin disinfection is carried out and then sterile needles are installed at a predetermined point. After obtaining the sensation of Deqi, tonification manipulation was carried out on BL23 and KI3 as well as sedation on BL40 and Ashi points. Needle retention for 30 minutes.	Patients feel lighter back after therapy. Pain when walking is reduced and no side effects are found during the action.

	decreased, paravertebral muscle spasms began to decrease. The tongue is still pale with a thin white membrane, a deep pulse and a little stronger than before.				
Sessions 3rd May 10, 2025	Patients stated that the pain was decreasing. Sitting for an hour is more comfortable. Pain only appears after strenuous activity. Pain scale 4/10. Flexion motion and lumbar extension are getting better. Reduced pressure pain. The tongue appears pale reddish with thin membranes. The pulse is deep and quite strong.	Medical Diagnosis Low Back Pain. Acupuncture Diagnosis Kidney Deficiency with stagnation of Qi and blood that begins to resolve.	The principle of therapy maintains the smooth flow of Qi and blood and strengthens kidney function. Point: BL23 GV3 BL25 BL40 KI3 BL60 Ashi Point	Therapy is carried out according to standard procedures. Tonification manipulation was given on BL23, KI3, while sedation was on BL40, BL60, and Ashi. Retention for 30 minutes.	Pain decreases after therapy. Patients find it easier to bend over and stand from a sitting position.
Sessions 4th May 12, 2025	Pain complaints only appear after standing or working for a long time. Daily activities can be done more comfortably. Pain scale 3/10. Muscle spasms are	Medical Diagnosis Low Back Pain. Acupuncture Diagnosis Kidney Deficiency with residual Qi stagnation in the Bladder meridians.	The principle of therapy maintains the tonification of the kidneys, eliminates residual stagnation, and improves lumbar function. Point: BL23	The needle is attached to all points until the sensation of Deqi is obtained. Manipulation is carried out according to the principle of therapy with retention for 30 minutes.	The patient stated that the pain was getting lighter. The movement of bending and walking becomes freer.

	almost not found. The lumbar range of motion increases. The tongue looks fresher with thin membranes. The pulse is stronger.		GV3 BL40 KI3 BL60 Ashi Point		
Sessions 5th May 14, 2025	Patients only complain of mild soreness after doing heavy homework. The pain no longer interferes with daily activities. Pain scale 2/10. Palpation shows minimal pressure pain. The lumbar range of motion is almost normal. The tongue and pulse show improvement.	Medical Diagnosis Low Back Pain. Acupuncture Diagnosis Kidney Deficiency in the recovery stage.	The principle of therapy maintains the results of therapy and prevents recurrence. Point: BL23 GV3 KI3 BL40 BL25	Therapy is carried out according to standard procedures with needle retention for 30 minutes.	Patients feel lighter, there are no muscle spasms, and daily activities go on without significant hindrance.
Sessions 6th Date 16 May 2025	The patient comes in for the final evaluation. Pain complaints are almost not felt. Pain only appears occasionally after very strenuous activity. Pain scale 1/10. Lumbar movements were normal, no muscle	Medical Diagnosis Low Back Pain with clinical improvement. Acupuncture Diagnosis Kidney deficiency is resolved, the flow of Qi and blood in the Bladder meridians is	Maintenance therapy to maintain treatment outcomes, strengthen kidney function, and prevent recurrence. Point: BL23 GV3 KI3 BL40	Acupuncture therapy is carried out according to the principle of notification with retention for 30 minutes. After the therapy is completed, the patient is given education on correct posture, back muscle stretching exercises, regular physical activity, and avoiding lifting excessive weights.	The results of the evaluation showed a decrease in pain intensity from NRS 6 to NRS 1, muscle spasms had disappeared, the lumbar range of motion returned to normal, and daily activities could be carried out without obstacles.

spasms or significant pressure pain were found. The tongue appears pink with a thin membrane, the pulse is quite strong and balanced.	smooth again.	Therapy is considered to provide good clinical improvement in Low Back Pain patients.
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Discussion of the Results of the Study

The results of the study showed that participants complained of pain in the lower back area that had lasted for more than three months so that it was included in the category of chronic low back pain. Complaints are felt when sitting for a long time, bending over, standing for too long, or lifting weights. The results of the physical examination showed that there was limited lumbar movement accompanied by pressure pain in the paravertebral muscles. Based on measurements using the Numeric Rating Scale (NRS), the intensity of pain before therapy was on a scale of 6.

The findings are in line with the theory that chronic Low Back Pain is characterized by pain in the area between the lower border of the costa to the gluteal fold that lasts more than three months and can be accompanied by limited functional activity. Pain occurs due to inflammatory processes, muscle spasms, degeneration of the intervertebral discs, and mechanical disorders of the lumbar structure resulting in nociceptor activation and decreased ability to move. According to the World Health Organization (2023), Low Back Pain is the main cause of disability in the world and often causes a decrease in quality of life if not treated optimally.

Based on the results of the acupuncture examination, a pale tongue with thin white membranes, a deep and weak pulse, accompanied by chronic pain. The findings show that there is a Kidney Deficiency that has lasted for quite a long time, causing stagnation of Qi and blood in the Bladder meridians. In the theory of Traditional Chinese Medicine, the Kidneys play a role in controlling bones and producing marrow. Kidney dysfunction causes the lumbar region to lose nutrients resulting in pain, weakness, and limited movement.

Acupuncture Diagnosis Discussion

The diagnosis of acupuncture in this study is Kidney Deficiency accompanied by Stagnation of Qi and Blood in the Bladder Meridians. The diagnosis was established based on the results of four examination methods (Si Zhen), namely observation, hearing and smell, interview, and touch.

Complaints of chronic pain, a weak waist, a pale tongue with thin white membranes, and a deep and weak pulse are signs that lead to Kidney Deficiency. Meanwhile, localized pressure pain in the lumbar region and muscle spasms indicate Qi and blood stagnation due to a long course of disease.

According to the TCM theory, if the essence of the Kidneys is deficient, the tendons and bones lose nutrients so that the waist area becomes weak and easily painful. The stagnation of Qi and blood causes the flow of energy in the Bladder meridians to be unsmooth, so the pain becomes more and more persistent. Therefore, the principle of therapy not only reduces pain,

but also improves the root cause of the disease by nourishing the kidneys and improving Qi and blood circulation.

Discussion of the Implementation of Acupuncture Therapy

Acupuncture therapy is performed six times with a frequency of twice every week. The principle of therapy is to nourish the kidneys, improve Qi and blood, open meridian blockages, reduce muscle spasms, and relieve pain.

The points used include BL23 (Shenshu), BL25 (Dachangshu), GV3 (Yaoyangguan), BL40 (Weizhong), KI3 (Taixi), BL60 (Kunlun), and Ashi points. BL23 is a kidney Back Shu point that functions to strengthen Kidney Qi and improve lumbar area function. GV3 works to strengthen the waist as well as smooth the flow of Qi in Du Mai. BL40 is the He-Sea point of the Bladder meridian that is often used to treat low back pain. KI3 is the Kidney Yuan point that functions to strengthen the Yin and Yang of the Kidneys, while BL60 and the Ashi point help reduce local pain through the promotion of Qi and blood circulation.

In each therapy, tonification manipulation was performed at BL23 and KI3 points to strengthen kidney function, while sedation manipulation was given at BL40, BL60, and Ashi points to reduce Qi and blood stagnation. The needle was maintained for approximately thirty minutes until the sensation of Deqi was obtained. All actions are carried out using disposable sterile needles according to patient safety procedures.

Discussion of Evaluation of Therapy Results

Evaluation after six rounds of therapy showed gradual clinical improvement. Pain intensity decreased from a scale of 6 to 1 based on the Numeric Rating Scale. In addition, paravertebral muscle spasms are reduced, lumbar range of motion is increased, and patients are able to return to daily activities more comfortably than before undergoing therapy.

The improvement is thought to occur because acupuncture stimulation is able to increase the release of neurotransmitters and neuromodulators, such as endorphins, enkephalins, serotonin, and inhibit the transmission of pain impulses in the central nervous system. In addition, acupuncture stimulation also improves tissue microcirculation, reduces muscle tension, and improves the tissue healing process so that pain gradually decreases.

The results of this study are in line with the World Health Organization (2023) guidelines which state that acupuncture can be used as one of the nonpharmacological interventions in the management of chronic primary low back pain. The guidelines explain that acupuncture can help reduce pain intensity, improve physical function, and improve patients' quality of life if given by competent health professionals. These findings are also supported by acupuncture clinical practice guidelines published by Chan et al. (2022), which report that acupuncture therapy provides benefits in reducing pain and improving function in Low Back Pain patients.

Based on the results of this study, it can be concluded that the administration of acupuncture therapy six times shows good clinical development in Low Back Pain patients. Improvement is characterized by a decrease in pain intensity, an increase in lumbar range of motion, a reduction in muscle spasms, and an increase in the ability to perform daily activities. These results show that acupuncture can be one of the effective complementary therapies in the management of Low Back Pain if carried out according to the diagnosis and principles of Traditional Chinese Medicine therapy.

CONCLUSION

Based on the results of a case study on the management of acupuncture care for Low Back Pain patients at MCO Ladies Clinic, it can be concluded that: The study of acupuncture through four examination methods (Wang, Wen, Wen, and Qie) showed that participants experienced complaints of chronic low back pain with an acupuncture diagnosis of Kidney Deficiency accompanied by Qi and Blood Stagnation. Acupuncture management is carried out six times of therapy using the principle of nourishing the kidneys, improving Qi and Blood circulation, opening meridian blockages, and reducing pain. The acupuncture points used were adjusted to the results of the differentiation of the syndrome and the clinical condition of the participants. After six times of acupuncture therapy, there was an improvement in the participants' condition characterized by a decrease in pain intensity, reduced muscle spasm, increased lumbar range of motion, and improved ability to perform daily activities. These results suggest that acupuncture management can help reduce complaints of Low Back Pain in study participants.

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