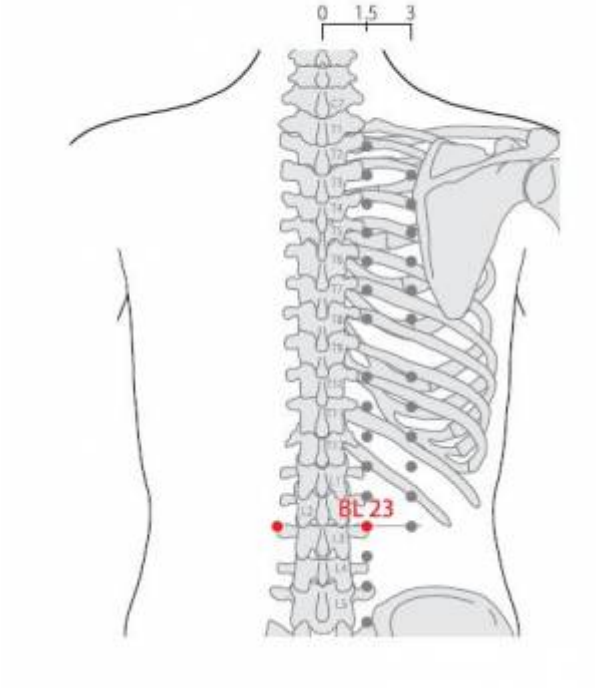
Table des matières

23V Shenshu 腎俞［腎俞］

prononciation 23v-shenshu.mp3

articles connexes: - 22V - 24V - Méridien *zutaiyang* -



WHO 2009

1. Dénomination

1.1. Traduction

腎輸［腎輸］***Shenshu***	Point qui répond aux reins (Nguyen Van Nghi 1971) Point *shu* correspondant aux Reins (Pan 1993) Creux des Reins (Lade 1994) *Beishu* des Reins (Laurent 2000)

- Zhou Mei-sheng 1984 : *shen* kidney *shu* pivot; convey.
- *Shen* : Rein (Pan 1993), (Ricci 4319) : Reins (Guillaume 1995) ; *chen*, 臣, glosé comme l'image d'un personnage se prosternant (devant son maître); désigne les serviteurs d'un prince. *Jian*, 又, tenir ses gens ferme et solide. Recatégorisé par la clé de la chair *Rou*, 月, (K 130), le caractère *Jian* devient *Shen* : les Reins (Laurent 2000).
- *Shu* : transporter (Pan 1993), (Ricci 4462) : transporter, offrir (Guillaume 1995) ; transporter, faire écouler... Cf. *Naoshu* 10IG (Laurent 2000).

1.2. Origine

- Ling shu, chapitre « Bei shu » (Guillaume 1995).

1.3. Explication du nom

- Zhou Mei-sheng 1984 : *Shenshu* It leads to the kidney. The kidney stores up the essence of the vital organs of the human body and it is responsible for water which is used to irrigate the whole body; This point has the function of drawing water and storing up the essence.
- Lade 1994 : le nom fait référence à la relation de ce point avec les Reins. Creux évoque un récipient ou un moyen de transport par lequel passe le *Qi* circulant (voir V-13, *Fei shu*).

1.4. Noms secondaires

Shǎo yīn shū 少阴输[少陰輸]（1）	Su wen (Guillaume 1995)
Gāogài 高盖[高蓋]（2）	Zhong guo zhen jiu xue tu jie ci dian (Guillaume 1995)
Jīnggōng 精宫（3）	Laurent 2000

1. *Shao* (Ricci 4279) : peu, peu souvent, un peu, légèrement ; manquer de, ne pas avoir, se passer de ; sans ; faire défaut, manquer, diminuer ; insuffisant, moins ; se perdre, disparaître. / *Yin* (Ricci 5789) du couple Yin-Yang. / *Shu* (Ricci 4462).
2. *Gao* (Ricci 2591) : haut, élevé ; honorer ; noble, sublime, supérieur / *Gai* (Ricci 2512) : couvrir, cacher, bâtir ; couvercle, toit, couverture ; dôme surélevé (Laurent 2000).
3. palais du *Jing* (Laurent 2000).

- Laurent 2000 : Suwen 9 “Le Rein est l'officier tonifiant” “L'énergie des Reins puissante donne un corps gai et augmente l'intelligence”.

1.5. Romanisations

- (EFEO et autres)
- (Wade-Giles et autres)

1.6. Autres langues asiatiques

- (viet)
- (cor)
- (jap)

1.7. Code alphanumérique

- VE23, 23V, 23VE (Vessie)
- BL23, B23, Bladder 23 (Bladder)
- UB 23 (Urinary bladder)

2. Localisation

2.1. Textes modernes

- Nguyen Van Nghi 1971 : A une distance et demie de la ligne médiane postérieure à hauteur du

Ming Menn (4VG) au-dessous de la deuxième vertèbre lombaire.
- Roustan 1979 : à 1,5 distance en dehors de l'apophyse épineuse de la deuxième vertèbre lombaire.
- Lu HC 1985 : Location-1 : 1.5 *cuns* laterally from the lower end of the spinous process of the 2nd lumbar vertebra. Location-2 : On a level with the space between the spinous processes of the 2nd and 3rd lumbar vertebrae. How-to-locate-1 : Locate this point 1.5 *cuns* away from the depression below the 2nd lumbar vertebra. How-to-locate-2 : Let the patient sit down and bend forward or lie on stomach, locate this point below the spinous process of the 2nd lumbar vertebra, 1.5 *cuns* away from *Mingmen* = D4.
- Deng 1993 : Sur les reins, au-dessous de l'apophyse épineuse de la deuxième vertèbre lombaire, à 1,5 *cun* de la ligne médiane postérieure.
- Pan 1993 : *Shenshu* est situé à 1,5 distance du point *Mingmen* (4VG), au-dessous de l'apophyse épineuse de la deuxième vertèbre lombaire.
- Guillaume 1995 : À 1,5 distance en dehors du processus épineux de la deuxième vertèbre lombaire.
- Laurent 2000 : sur les lombes, à 1,5 *cun* en dehors de l'extrémité de la 2° épineuse lombaire.
- WHO 2009: In the lumbar region, at the same level as the inferior border of the spinous process of the second lumbar vertebra (L2), 1.5 B-*cun* lateral to the posterior median line.

Items de localisation

- Ligne médiane postérieure
- Apophyse épineuse de L2
- *Mingmen*, 4VG

2.2. Textes classiques

- Ling Shu : Au niveau de la quatorzième vertèbre et à 3 *cun* l'un de l'autre (Deng 1993).
- Jia Yi : Au-dessous de la quatorzième vertèbre et à 1,5 *cun* de celle-ci (Deng 1993).
- Shen Ying : Au-dessous de la quatorzième vertèbre, au niveau du nombril, et à 2 *cun* de la ligne médiane postérieure (Deng 1993).
- Deng 1993 : tous les anciens ouvrages de médecine s'accordent sur la localisation de ce point, et c'est la définition de Jia Yi qui prévaut actuellement. *Shenshu* (V23) est donc localisé au bas du dos, au-dessous de l'apophyse épineuse de la deuxième vertèbre lombaire et à 1,5 *cun* de la ligne médiane postérieure.

2.3. Rapports et coupes anatomiques

- Roustan 1979 : Rami dorsales des 2ème artère et veine lumbalis, rami dorsales du ler nerf lumbalis.
- Deng 1993 : Peau—tissu sous-cutané—aponévrose du muscle grand dorsal et couche superficielle de l'aponévrose thoraco-lombaire—muscle érecteur épineux. Dans la couche superficielle, on trouve les branches cutanées des branches postérieures du deuxième et du troisième nerf lombaire, et les artères et les veines correspondantes. Dans la couche profonde, on trouve les branches musculaires des branches postérieures du deuxième et du troisième nerf lombaire, et les branches ou tributaires des branches dorsales des artères et des veines lombaires qui s'y rattachent.
- Guillaume 1995 : Branches postérieures des artères et des veines lombaires. Rameau médial de la branche dorsale de Ll.

2.4. Rapports ponctuels

2.5. Localisation chez l'animal

- Gao S, Li R, Tian H. [Research progress of Shenshu (BL 23)]. Chinese Acupuncture and Moxibustion. 2017;37(8):845-850. [48435].

  > In order to accurately understand the location of Shenshu (BL 23) and to improve the efficacy of acupuncture, a discussion is performed in this paper from aspects of acupoint function, anatomical structure, experiment research, clinical application, etc., hoping to provide benefit for future animal experiments and clinical selection of acupoint. The characteristics of rat spine is different from that of human, and the reliability and authenticity of acupoint location would be compromised if the anatomical characteristics of human was inflexibly applied on animals. “Shenshu” (BL 23) belongs to the bladder meridian of foot taiyang, and is located 1.5 cun lateral to the lower border of the spinous process of the second lumbar vertebra. It is close to kidney, therefore deep insertion or repeated lifting and thrusting of needle would damage kidney and causes acupuncture accident. Therefore, to locate “Shenshu” (BL 23) in rat, the 6th lumbar vertebra is located firstly based on tuber coxae of rat, and then 11th thoracic vertebra is located by upward 4 vertebral bodies or locate 9th to 11th thoracic vertebra which are tight, and finally 2nd lumbar vertebra is located by downward 4 vertebral bodies, and “Shenshu” (BL 23) is 5 mm lateral to it. During clinical treatment, the technique should be gentle; oblique and outward insertion of needle is not allowed; the maximum depth of needle insertion is 1.6 cun (approximately 4.30 cm); the vertical or oblique insertion with needle 45° towards spine is appropriate; the depth of 0.8 to 1.2 cun (2.00 to 3.10 cm) is suitable. In cases of too thin or fat patients, the depth of needle insertion should be adjusted for safety.

3. Classes et fonctions

3.1. Classe ponctuelle

- Nguyen Van Nghi 1971 : Point recevant un vaisseau venant directement des reins. Point de dispersion de l'énergie Yang des reins. So Ouenn (Chapitre 28) : « Si le ventre est brusquement gonflé, c'est que l'estomac est en plénitude. Il faut puncturer cinq fois le point Mo de l'estomac (Tché Tcheng, 7IG) et le point Iu des reins (Chenn Iu) en utilisant l'aiguille ronde et pointue. So Ouenn (Chapitre 28) : « Dans le cas de diarrhée (vide), il faut puncturer le point Iu des reins (Chenn Iu) 5 fois et de plus en plus profondément comme si on le poursuivait pour le rattraper et le point Iu de l'estomac (Oé Iu, 21V) de plus en plus profondément sans ressortir l'aiguille pour le tonifier. » Fait partie du groupe des points de dispersion de l'énergie Yang des cinq organes (voir Fei Iu, 13V). Point employé dans les affections des reins par la technique Iu-Mo. Le point Iu des reins est le Chenn Iu et le point Mo des reins est le Tsing Menn (25VB).
- Point *Shu* du dos correspondant aux Reins (Pan 1993, Guillaume 1995)

3.2. Classe thérapeutique

- Roustan 1979 : traite les reins, tonifie la colonne vertébrale, éclaircit les yeux et les oreilles.
- Guillaume 1995 : *Shenshu* nourrit le Yin, tonifie le Yang, fortifie le cerveau et la moelle, est utile au cerveau et clarifie la vue. Selon le Tai yi shen zhen, *Shenshu* tonifie le Rein, fortifie la région lombaire, renforce la moelle, nourrit le Yin et tonifie l'insuffisance de *Yang* du Rein.
- Laurent 2000 : régularise l'énergie des Reins, traite le vide de Rein (*Yin* ou *Yang*), chauffé : renforce le Yang originel des Reins, élimine l'humidité, soulage les lombes, nourrit les oreilles et les yeux, consolide le *Jing*.

4. Techniques de stimulation

Acupuncture	Moxibustion	Source
Selon Tong ren, puncturer à 0,3 distance, laisser l'aiguille le temps de 7 expirations	Appliquer un nombre de moxas en fonction de l'âge ; 3 cônes, selon Ming tang	Zhen jiu ju ying (Guillaume 1995)
Puncture perpendiculaire entre 0,5 et 1 distance de profondeur	Cautérisation avec 5 à 7 cônes de moxa, moxibustion pendant 10 à 20 minutes	Guillaume 1995
Piquer perpendiculairement, diriger l'aiguille vers le rachis à 1,5-2 distances	Cautériser 3-7 fois, chauffer 5-20 minutes	Roustan 1979
Piqûre perpendiculaire de 0,5 à 1 *cun*	Moxas : 5 à 15 ; chauffer 30 à 90 mn	Laurent 2000

Sensation de puncture

- Roustan 1979 : sensation de gonflement ou de décharge électrique qui diffuse aux fesses.

Sécurité

- Roustan 1979 : Ne pas piquer trop profondément.
- Selon Su wen, si la puncture atteint le Rein, le sujet meurt en six jours ; la perturbation concerne l'éternuement. D'autres disent que le sujet meurt en cinq jours (Guillaume 1995).

5. Indications

Classe d'usage	★★	point essentiel

5.1. Littérature moderne

- Nguyen Van Nghi 1971 : Point à puncturer spécialement dans les cas de : lombalgie, spermatorrhée, priapisme, énurésie, dysménorrhée, pathologie pelvienne, pathologie rénale, troubles mentaux.
- Roustan 1979 : néphrite, douleurs de colique néphrétique, ptose rénale, lombalgie, spermatorrhée, pertes d'urines, impuissance, dysménorrhée, bronchite asthmatiforme, bourdonnements d'oreille, chute des cheveux, lumbago, séquelles de poliomyélite. Surdité, hématurie, œdème, épilepsie, fièvres intermittentes, gonalgie.
- Lade 1994 :
  - Tonifie les Reins (surtout le *Qi* et le *Yang*) et l'Essence, régularise le Réchauffeur Inférieur, réchauffe le *Yang* et le Froid, et tonifie le *Qi* Originel. Indications : syndrome de consomption avec soif du Réchauffeur Inférieur, syndrome atrophique par vide, paralysie infantile, tuberculose pulmonaire avec frissons et respiration courte, asthme, asthme bronchique, neurasthénie, anémie, faiblesse généralisée, perte de cheveux, épilepsie, syndrome ménopausique, règles irrégulières, aménorrhée, dysménorrhée, leucorrhée, impuissance, douleur génitale, crampes abdominales, et diarrhée avec aliments non digérés.
  - Régularise la Voie des Eaux, favorise la miction, et résoud l'Humidité. Indications : diabète, néphrite chronique, prostatite, strangurie, infection des voies urinaires,

incontinence d'urine, sang dans l'urine, rétention d'urine et œdème.
    - Est bénéfique pour les oreilles et éclaire les yeux. Indications : surdité, diminution de l'audition, acouphènes, vision diminuée et brouillée, fatigue visuelle, et atrophie du nerf optique.
    - Rend ferme le *Qi* des Reins et fortifie les lombes et les genoux. Indications : éjaculation précoce, spermatorrhée, incontinence urinaire, amaigrissement et faiblesse, froid et faiblesse, et douleur chronique des genoux, du sacrum et des lombes.
    - Expulse les calculs (surtout des voies urinaires). Indications : calculs rénaux.
    - Fortifie le Cerveau. Indications : troubles de la mémoire, désorientation, difficulté de concentration, léthargie, et sensation de lourdeur de la tête.
- Guillaume 1995 : Vide de Rein avec lombalgie, spermatorrhée, impuissance, écoulement uréthral, hématurie, irrégularités menstruelles, leucorrhées, céphalée, obscurcissement de la vue (lipothymie), bourdonnements d'oreille, surdité, dyspnée et souffle court, diarrhée, œdème, énurésie, polydipsie-*xiao ke*, syndrome *dian*-folie ; néphrite, coliques néphrétiques, ptose rénale, polyurie, incontinence d'urine, annexite chronique, surdité d'origine nerveuse, hypertension artérielle, glaucome, héméralopie, névrite, blessure des parties molles de la région lombo-sacrée.

5.2. Littérature ancienne

- Su wen : Chapitre « Commentaires sur les vacuités et les plénitudes » de Wang Bing : « Dans la plénitude soudaine de l'abdomen que la palpation ne peut déprimer, on puncture le *Shoutaiyang* Jing luo (le *luo* de *Shoutaiyang-Zhizheng*- 7IG qui est point *-mu de* l'Estomac) et le point *shu* du *Shaoyin*, *Shenshu*- 23V) » (Guillaume 1995).
- Jia yi jing : « Gonflement des Reins-*shen zhang* », « Accès de froid et de chaleur des os, dysurie », « Accès de frissons et de fièvre, amaigrissement malgré une alimentation abondante, douleur des flancs, douleur sous le Cœur, le Cœur est comme suspendu, douleur qui irradie vers l'ombilic, douleur brutale du bas-ventre fièvre, faciès vultueux, vision trouble, toux chronique, souffle court, urines troubles et rouges », « Accès pernicieux-*nue ji* » (Guillaume 1995).
- Qian jin yao fang : « Froid des Reins », « Accès de frissons et de fièvre avec spasmes et opisthotonos », « Accès de fièvre qui débute à la colonne lombaire », « Ictère », « Pollution nocturne, dysurie masculine », « Surmenage des Cinq Organes », « Tension du bas-ventre qui est gonflé et chaud », « Syndrome de surmenage-*xu lao* avec uréthrite », « Atteinte des Reins par le vent avec vide et obstruction », « Froid des membres inférieurs », «Polydipsie avec polyurie », « Froid du Réchauffeur moyen, diarrhée liquide et indigestion », « Céphalée de type vent », « Visage rouge et chaud », « Crainte du vent et du froid », « Chaleur et rougeur de la tête et du corps, frissons, sensation de lassitude et absence de force des lombes et des quatre membres, nausée », « Surmenage par vide-*xu lao* et enflure » (Guillaume 1995).
- Qian jin yi fang : « Œdème des cent maladies « Hématurie » (Guillaume 1995).
- Wai tai mi yao : « Lombalgie avec impossibilité de se pencher, se redresser, se tourner », « Ballonnement abdominal », « Constipation » (Guillaume 1995).
- Ishimpo : Lombalgie ; spasmes dus à la fièvre ; amaigrissement malgré une alimentation abondante ; gêne costale ; douleur congestive sous le Cœur ; halètement ; toux ; dysurie ; céphalée ; pieds froids ; diarrhée ; indigestion (Guillaume 1995).
- Shang hui fang : « Surmenage par vide-*xu lao*, surdité, vide de Rein, ballonnement de l'organe de l'Eau contracture et douleur lombaires, urines troubles, douleur à l'intérieur de la verge, hématospermie, les Cinq Surmenages et les Sept Blessures, vomissement de type froid, contracture des pieds et des genoux, tendance à dormir seul, œdème généralisé ». « Accumulation chronique du *Qi* froid-*jiu ji leng qi*, laquelle se transforme en fatigue-l*ao bing* » (Guillaume 1995).

- Tong ren : « Accumulation-*ji* de *Qi* froid chez la femme, qui se transforme en fatigue-*lao*, altération de l'état général due au coït pendant les règles, accès de frissons et de fièvre » (Guillaume 1995).
- Bian que xin shu : « Atteinte directe par le vent-*zhong feng* avec aphasie, paralysie des membres, grand vent et convulsions-*da feng* et *dian ji* » (Guillaume 1995).
- Yu long fu : « Associé à *Mingmen*- 4VG, il traite la pollakiurie des sujets âgés. Associé à *Xinshu*-15V, il traite les pollutions nocturnes dues au vide de Rein et des lombes » (Guillaume 1995).
- Bai zheng : « Associé à *Juliao*- 29VB, il élimine la stagnation de Sang au niveau du thorax et du diaphragme » (Guillaume 1995).
- Tong xuan fu : « *Shenshu* peut éliminer la douleur des lombes et des fesses » (Guillaume 1995).
- Zi sheng jing : « Frissons et fièvre, douleur abdominale et borborygmes, reflux du *Qi* avec douleur du Cœur », « Gonflement et froid de l'Estomac » (Guillaume 1995).
- Zhen jiu ju ying : surmenage avec amaigrissement-*xu lao*, surdité vide de Rein, froid chronique de l'organe de l'Eau, ballonnement plénitude thoraco-abdominal avec envie d'aller à la selle, plénitude des flancs qui irradie vers le bas-ventre avec sensation douloureuse, ballonnement et chaleur, dysurie-lin (uréthrite), vision trouble, souffle court, hématurie, urines troubles, pollution nocturne, atteinte du Rein par le vent, lombalgie en position assise, polydipsie, Cinq Surmenages et Sept Blessures, syndrome de vide, contracture des pieds et des genoux, froid des lombes comparable à la présence d'eau, tête lourde et corps chaud, frissons, amaigrissement malgré une alimentation abondante, faciès jaune et sombre, borborygmes, lassitude et absence de force des quatre membres, diarrhée liquide et maldigestion des aliments, gonflement généralisé, accumulation de froid-*ji leng* chez la femme, qui se transforme en fatigue-*lao*, amaigrissement suite à des rapports sexuels pendant les règles, accès de fièvre et de frissons » (Guillaume 1995).
- Yi xue ru men : « Eau des Reins, gonflement des organes, surdité, obscurcissement de la vue, rougeur du faciès, douleur du Cœur qui est comme suspendu, douleur des flancs avec distension, vomissement, froid du Réchauffeur moyen et diarrhée profuse, lombalgie, contracture des pieds et des genoux, urines foncées avec égouttement blanchâtre, hématurie, spermatorrhée, douleur du bas-ventre, tendance à s'allonger seul, corps lourd comme de l'eau, chaleur des os-*gu zheng* avec frissons et fièvre, les Cinq Fatigues et les Sept Blessures » (Guillaume 1995).
- Da cheng : « Surmenage avec amaigrissement-*xu lao*, surdité vide de Rein, froid chronique de l'organe de l'Eau (syndrome chronique froid du Rein), ballonnement plénitude thoraco-abdominal avec envie d'aller à la selle, plénitude des flancs qui irradie vers le bas-ventre avec sensation douloureuse, ballonnement et chaleur, dysurie-lin (uréthrite), vision trouble, souffle court, hématurie, urines troubles, pollution nocturne, atteinte du Rein par le vent (les lombes sont le logis des Reins, aussi l'atteinte des Reins se traduit par des lombalgies), lombalgie en position assise, polydipsie, Cinq Surmenages et Sept Blessures, syndrome de vide, contracture des pieds et des genoux, froid des lombes comparable à de la glace, tête lourde et corps chaud, frissons, amaigrissement malgré une alimentation abondante, faciès jaune et sombre, borborygmes, lassitude et absence de force des quatre membres, diarrhée liquide et mal digestion des aliments, gonflement généralisé, accumulation de froid-*ji leng* chez la femme qui se transforme en fatigue-*lao*, amaigrissement suite à des rapports sexuels pendant les règles, accès de fièvre et de frissons » (Guillaume 1995).
- Lei jing tu yi : « Surmenage par vide-*xu lao* avec amaigrissement, faciès jaune et brunâtre, surdité, vide de Rein avec froid chronique de l'organe de l'Eau, lombalgie avec pollution nocturne, contracture douloureuse du pied et du genou, chaleur du corps, céphalée; frissons, ballonnement thoraco-abdominal, plénitude et douleur des deux flancs, qui irradie vers le bas-ventre, insuffisance de Souffle et présence de sang dans les urines, écoulement uréthral avec lassitude et absence de force, pertes blanches et rouges, irrégularités menstruelles, douleur de

la région génitale, les Cinq Surmenages et les Sept Blessures, faiblesse et absence de force, pieds froids comme de la glace, diarrhée profuse avec indigestion, corps gonflé, syndrome de stagnation chronique-*jiu ji* chez les hommes et chez les femmes avec douleur du Qi qui se transforme en Lao ji (altération de l'état général). Ce point est utilisé pour disperser la chaleur des Cinq Organes, son rôle est comparable à celui des points *shu* des Cinq Organes ». Selon Qian jin : « En cas de vent et de vide entre les Reins, faire 100 cônes de moxa. En cas d'écoulement uréthral (urines troubles) avec pollution nocturne, faire 100 cônes de moxa. *Shenshu* est utilisé pour traiter le surmenage par vide-*xu lao* des Cinq Organes, les contractures, le ballonnement et chaleur du bas-ventre, faire 50 cônes de moxa, diminuer le nombre chez les sujets âgés et les enfants. En cas de froid-vide, faire 100 moxas. En cas de soif avec sécheresse de la bouche, faire des moxas au niveau des “yeux des lombes”. En cas d'hématurie, appliquer 100 cônes de moxa. En cas d'œdème-*shui zhong* dans les cent maladies, appliquer 100 cônes de moxa ». « Selon certains, *Shenshu* traite les excès sexuels, les œdèmes dus au vide avec otalgie et bourdonnements d'oreille » (Guillaume 1995).

- Xun jing : « Troubles des menstruations avec leucorrhées et métrorragies, froid chronique de l'utérus » (Guillaume 1995).
- Tai yi shen zhen : « Amaigrissement et faiblesse, visage jaunâtre et noirâtre, surdité par vide de Rein, lombalgie avec sensation de froid, spermatorrhée, contracture du genou ou de la taille, fièvre avec sensation de tête lourde et de pieds légers, pertes blanches ou rouges, sensation de froid aux pieds » (Guillaume 1995).

5.3. Associations

Indication	**Association**	**Source**
Diarrhée de type Rein	**23V** + 20V + 12VC + 25E + 4Rte + 3Rn	Zhong hua zhen jiu xue (Guillaume 1995)
Céphalée de type vent	**23V** + 2V + 6V + 23TR + 18TR + *He liao* (situé entre 23TR et 1VB)	Zi sheng jing (Guillaume 1995)
Vide de Rein avec surdité	**23V** + 2VB	Yu long jing (Guillaume 1995)
Vide de Rein avec surdité	**23V** + 6GI + 2VB	Lei jing tu yi (Guillaume 1995)
Bourdonnements d'oreille de type vide	**23V** + 36E + 4GI	Da cheng (Guillaume 1995)
Dyspnée par vide de Rein	**23V** + 6VC + 4VC + 40E	Zhong hua zhen jiu xue (Guillaume 1995)
Dyspnée par vide de Rein	**23V** + 4VG + 6VC + 17VC	Zhong guo zhen jiu xue gai yao (Guillaume 1995)
Lombalgie	**23V** + 3VG + 58V	Zhong guo zhen jiu xue gai yao (Guillaume 1995)
Néphrite	**23V** + 3VC + 6Rte + 58V + 7Rn + *Zi Gong* (PC12)	Roustan 1979
Affections urétérales	**23V** + 3VC + 6Rte + 28V	Roustan 1979
Pertes d'urine	**23V** + 28V + 3VC + 6Rte + 1F	Zhong guo zhen jiu xue gai yao (Guillaume 1995)
Hématurie	**23V** + 4VC + 6Rte + 3Rn	Zhong hua zhen jiu xue (Guillaume 1995)
Infection urinaire	**23V** + 28V + 3VC + 6Rte + points secondaires 32V + 8F	Shanghai zhen jiu xue (Guillaume 1995)
Impuissance	**23V** + 6VC	Zhen jiu feng yuan (Guillaume 1995)

Indication	Association	Source
Impuissance	**23V** + 4VG + 6Rte + 4VC	Si ban jiao cai zhen jiu xue (Guillaume 1995)
Spermatorrhée	**23V** + 12Rn + 6Rte + 4VC + 6VC	Zhong guo zhen jiu xue gai yao (Guillaume 1995)
Diabète	**23V** + 4VC + 36E	Roustan 1979

5.4. Revues des indications

6. Etudes cliniques et expérimentales

6.1. Déficience du Rein Yang

- Min You-jiang, Yao Hai-hua, Cheng Li-hong. [The Effect of Suspended Moxa Stick Moxibustion on Points Shenshu(BL23) and Guanyuan(CV4) on the Pituitary-adrenal Axis and the Pituitary-thyroid Axis in Rats with Kidney Yang Deficiency]. Shanghai Journal of Acupuncture and Moxibustion. 2016;35(12):1469-147. [191553].

  Objective To investigate the effect of suspended moxa stick moxibustion on points Shenshu(BL23) and Guanyuan(CV4) on the pituitary-adrenal axis and the pituitary-thyroid axis in rats with kidney yang deficiency. Method A rat model of corticosterone kidney yang deficiency was made by intramuscular injection of hydrocortisone. The rats were randomized into model control and moxibustion treatment groups. A blank control group was set up. The moxibustion treatment group received suspended moxa stick moxibustion on points Shenshu and Guanyuan 20 min once daily, for a total of 14 times. After the completion of treatment, serum CORT, ACTH, T3, T4 and TSH contents were measured by ELISA and pituitary expressions of ACTH and TSH mRNA were determined by RT-PCR. Result There was no significant difference in serum CORT (P>0.05), there were significant differences in serum ACTH, T4 and TSH and pituitary ACTH and TSH mRNA (P<0.05) and there was a very significant difference in serum T3 (P<0.01) between the moxibustion treatment and model control groups. There were no significant differences in the above indicators between the moxibustion treatment and blank control groups (P>0.05). Conclusion Suspended moxa stick moxibustion on points Shenshu and Guanyuan produces a therapeutic effect on rat kidney yang deficiency by decreasing serum TSH content, down-regulating pituitary TSH mRNA expression, increasing serum ACTH, T3 and T4 contents and up-regulating pituitary ACTH mRNA expression.

6.2. Analgésie interventionnelle

- Zhang S, Zhao Z, Li X, Wang J, Su X. [Impacts of the Injection with Flurphen Mixture at Shenshu (BL 23) on Hemodynamics and Analgesia in Patients with Extracorporeal Shock Wave Lithotripsy]. Chinese Acupuncture and Moxibustion. 2015;35(3):233-6. [182618].

  OBJECTIVE: To compare the differences in pain reaction, hemodynamics and clinical efficacy between extracorporeal shock wave lithotripsy (ESWL) after injection with flurphen mixture (mixture of droperidol and fentanyl citrate) at Shenshu (BL 23) and simple ESWL in the patients. METHODS: Sixty-four cases of urinary calculi with ESWL were randomized into an observation group and a control group, 32 cases in each one. In the observation group, 15 to 20 min before ESWL, flurphen mixture (droperidol injection 1.25 mg and fentanyl citrate injection 0.05 mg were diluted to 6 mL with 0.9% sodium chloride solution 4.5 mL) was injected at bilateral Shenshu (BL 23). In the control group, no any adjuvant therapy and medication were used before ESWL. The changes in blood pressure and heart rate, visual analogue scale (VAS) score, lithotripsy frequency till calculi complete removal and the rate of calculi complete removal after the first lithotripsy were observed in the two groups. RESULTS: In the control group, blood pressure and heart rate were higher during lithotripsy than those before lithotripsy (both P<0.05). In the observation group, the differences in blood pressure and heart rate were not significant statistically as compared with those before

lithotripsy (both P>0.05). The blood pressure and heart rate during lithotripsy in the observation group were apparently lower than those in the control group (both P<0.05). VAS scores during lithotripsy in the observation group were lower apparently than those in the control group (both P<0.05). The lithotripsy frequency in the observation group was less than that in the control group. The rate of calculi complete removal in 1 week after the first lithotripsy in the observation group was higher than that in the control group [75.0% (24/32) vs 50.0% (16/32), P<0.05]. CONCLUSION: The flurphen mixture at Shenshu (BL 23) significantly alleviates pain reaction in patients undergoing ESWL, avoids the fluctuation of hemodynamics and improves the clinical effect of lithotripsy.

6.3. Gastralgies

- Wang Fu. Finger-Pressing Shenshu in Prompt Relief of Epigastric Pain. International Journal of Clinical Acupuncture. 1997;8(3):289-90. [87094].

  Pressing, pinching, or pinch-pressing Shenshu (BL 23) with both hands is effective in relieving severe epigastric pain. It is easy, simple, and immediately effective.

6.4. Vieillissement du système génital

- Zhu Dini et al. Effect of Stimulation of Shenshu Point on the Aging Process of Genital System in Aged Female Rats and the Role of Monoamine Neurotransmitters. Journal of TCM. 2000;20(1):59. [71171]. Voir traduction italienne de réf gera: [94774].

  In this experiment, among some aged female rats aged over 18 months, and young female rats aged 3 months whose central noradrenergic nerve endings were injured by ventricular injection of 6-hydroxy-dopamine (6-OHDA), it was observed that catgut embedding at bilateral Shenshu (UB 23) points could obviously shorten sexual cycles, increase the frequency of sexual cycle, and slow down the aging process of the genital system in both the aged rats and in the rats with injured noradrenergic endings. After electroacupuncture (EA) at Shenshu (UB 23) points in the aged rats, the frequency of neuronal discharges in locus coeruleus (LC) was elevated and the activating rate of LC to neurons in the medial preoptic area (MPOA) of the hypothalamus was increased, while obvious effect on nucleus rapines magnus (NRM) and the effect of NRM on MPOA were not marked. It is suggested that stimulation of Shenshu (UB 23) point can strengthen the excitability of noradrenergic neurons, activate the ascending pathway of the brain stem - hypothalamus, raise the catecholamine (CA)/5-hydroxytryptamine (5-HT) ratio in the hypothalamus of the aged rats, so as to delay the aging process of the genital system.

- Yang Lian et al. [Effects of Warmed Needling of “Shenshu” Point on Uteri,Ovaria and Sex Hormones of Senile Female Rats]. Acupuncture Research. 2000;25(3):207. [76242].

  This work was to investigate the effects of warmed needling of “Shenshu” points on uteri, ovaria, dominant folliculi and its regulation on estrin levels. The bilateral “Shenshu” points were acupunctured with the needles warmed by burning moxa in their ends. The wet weight of uteri and ovaria, the number of dominant folliculi and the changes of estrins (E2, P, FSH and LH) were measured and compared with that of drug group (Nilestriol), young rat control group and senile rat control group. The results showed that warmed needling of “Shenshu” points produced no obvious effects on the wet weights of uteri, ovaria and the number of dominant folliculi; It might significantly increase the level of E2 contents, remarkably decrease the contents of FSH, improve the P level but exert no obvious influence on LH contents. This suggested that warmed needling of “Shenshu” points can distinctly improve the levels of E2 and P contents and decrease FSH. It produced stronger regulation on E2 and FSH than P and LH.

- Yang Lian et al. [Effects of Warm Acup-Moxibustion at Shenshu Point on Sexual Hormones in Senile Female Rats]. Chinese Acupuncture and Moxibustion. 2001;21(3):172. [93373].

6.5. Rétention d’urine du post-partum

- Zhang Ke-Bin. Treatment of Postpartum Retention of Urine by Needling Shenshu (Bl 23). Journal of Acupuncture and Tuina Science. 2003;1(2):13. [121263].

6.6. Ostéoporose post ménopause

- Lin ZW, Li J, Gao LP, Zhang XL. [Effect of Embedding Thread at Shenshu (BL 23) on Clinical Pain of Postmenopausal Osteoporosis]. Chinese Acupuncture and Moxibustion. 2005;25(12):844-6.. [125936].

  OBJECTIVE: To explore the effect of embedding thread at Shenshu (BL 23) on clinical pain of postmenopausal osteoporosis. METHODS: Fifty-six cases were randomly divided into an embedding thread group, an embedding thread plus Leli group and a Leli group. The pain of the patient before treatment, 3 months and 6 months after treatment were assessed. RESULTS: There was significant difference before and after treatment in the score of pain in both the embedding thread group and the embedding thread plus Leli group ($P < 0.001$), with no significant difference between the two groups ($P > 0.05$); there was no significant difference before and after treatment in the score of pain in the Leli group ($P > 0.05$), but with significant differences as compared with other two groups (both $P < 0.001$). CONCLUSION: Embedding thread at Shenshu (BL 23) has very obvious therapeutic effect on clinical pain of postmenopausal osteoporosis, and oral administration of Leli capsule has no significantly therapeutic effect on clinical pain of postmenopausal osteoporosis.

- Zhang X, Peng Y, Yu J, Liu C, Cheng H, Liu L, Han J. Changes in Histomorphometric and Mechanical Properties of Femurs induced by Acupuncture at the Shenshu Point in the Samp6 Mouse Model of Senile Osteoporosis. Gerontology. 2009. [152818].

  Background/Objective: The effect of acupuncture on the changes in the histomorphometric and mechanical properties of femurs in senescence-accelerated mice strain P6 (SAMP6) was evaluated in this work. Methods: Six-month-old male SAMP6 and SAMR1 mice were allocated to 1 of 4 groups: SAMP6 control group (Pc), SAMP6 non-acupoint control group (Pn), SAMP6 acupuncture group (Pa) and SAMR1 control group (Rc). The Pa group was acupunctured at the Shenshu point (BL23) once daily for 8 weeks. Two non-acupoints at the hypochondria were needled for the Pn group. Mice in the other 2 groups were grasped using the same method as for the Pa group. The serum testosterone and osteocalcin (OC) levels were determined by radioimmunoassay. The histomorphometric data were obtained from undecalcified specimens, and the mechanical properties of the femur were assessed by the 3-point bending test. Results: After acupuncture treatment, the decreased serum testosterone level in SAMP6 mice increased markedly, whereas the increased OC concentration declined sharply. The bone histomorphometric and mechanical indexes of SAMP6 mice also improved significantly. The values of trabecular thickness, trabecular bone volume, osteoid volume, mineral apposition rate and bone formation rate in Pa mice increased by 20.4, 18.1, 14.1, 9.9 and 14.7%, respectively, compared with Pc mice. The scores for ultimate force, yield force, elastic stress, ultimate stress and energy to yield force for Pa mice were significantly higher than those of Pc and Pn mice. Conclusion: Therefore, acupuncture at BL23 was effective in promoting bone formation, restoring the amount of bone volume, improving bone architecture and reversing osteoporosis in SAMP6 mice to some degree by enhancing the secretion of testosterone and declining bone turnover.

- Lin ZW, Pan WQ. [Investigation on the Rate of Bone Fracture of Primary Osteoporosis treated by Embedding Thread at Shenshu (BL 23) during Five Years]. Chinese Acupuncture and Moxibustion. 2010;30(4):282-4. [155704]

  OBJECTIVE: To observe the clinical effect of embedding thread at Shenshu (BL 23) for preventing and treating primary osteoporosis. METHODS: Seventy cases, who had been treated in 2001-2003 at our hospital, were selected and the bone mineral density (BMD) before and after treatment and the incidence condition of bone fracture during 5 years after treatment were analyzed in the embedding thread group and the medication group.RESULTS: The BMDs of hip and lumbar vertebrae were both increased in the embedding thread group, and the BMDs of femoral neck and femoral trochanter in this group were

significantly higher than those in the medication group (both P < 0.05). The rate of bone fracture during 5 years after treatment was 2.1% (1/48) in the embedding thread group, which was significantly lower than 18.2% (4/22) in the medication group (P < 0 05).CONCLUSION: Embedding thread at Shenshu (BL 23) can raise the BMD of primary osteoporosis and significantly reduce the rate of bone fracture during 5 years.

- Zhang YS, Xu YX, Chen CS, Chen GZ, Weng ZX, Yao Y. Effects of Laser Irradiation of Acupuncture Points Shenshu on Ovariectomized Rats. Photomed Laser Surg. 2011;9:. [155974].

  Background and Objective: The effect of laser acupuncture on obesity in postmenopausal women remains unknown. The aim of this study was to investigate the effects of this form of treatment using an animal model. Materials and Methods: Seventy-seven female Sprague-Dawley rats were assigned into seven groups: normal control (Normal), sham-operation control (Sham), ovariectomized (OVX) control rats (OVX), OVX rats treated with estrogen (OVX + E), and three groups of ovariectomized rats treated with laser acupuncture (OVX + L). Bilateral ovaries were removed to decrease estrogen levels. After 2 wk, semiconductor laser irradiation was administered to bilateral Shenshu (BL 23) acupoints of rats in the three OVX + L groups at 12, 30, and 60 J/cm(2), respectively. Changes in body weight and pituitary estrogen receptor (ER) mRNA expression were analyzed. Morphological differences in the uterus and pituitary glands were also observed. Results: The OVX group exhibited marked weight gain and a significant decrease in pituitary ERα mRNA expression. Semiconductor laser irradiation at 30 J/cm(2) reduced body weight and increased ERα expression compared with the control, whereas irradiation at 12 or 60 J/cm(2) presented slightly weaker effects. Significant differences in pituitary ERβ mRNA were not observed due to lack of optical density data. Conclusions: The semiconductor laser irradiation of bilateral Shenshu (BL 23) acupoints can exert beneficial effects on OVX rats through reducing body weight and increasing pituitary ERα expression, and 30 J/cm(2) was the most effective dose among those used.

- Liu Lan-Ying, Lin Zhi-Wei, Liu Xian-Jun. [The Effect of Catgut - Embedding Therapy in Pishu and Shenshu on Endocrine Hormone of Women with Primary Osteoporosis]. Journal of Clinical Acupuncture and Moxibustion. 2011;27(4):32. [174428].

  Objective: Through observing the change in the level of serum estradiol (E2) , testosterone (T) and parathyroid hormone (PTH), to investigate clinical efficacy of catgut - embedding therapy in pishu and shenshu on the change of endocrine hormone of women with primary osteoporosis. Methods: Sixty women patients with primary osteoporosis were randomly assigned into acupoint catgut - embedding (n = 30) group and acupuncture group (n =30) , 6 weeks after treatment , patients were evaluated with the level of serum estradiol (E7), testosterone (T) and parathyroid hormone (PTH). Results: ())E2 , T: Compared with baseline data, serum estradiol (E9) and testosterone (T) of both groups after treatment are increased and significant differences were showed in both groups (P <0. 05). There were not significant differences between the two groups (P > 0. 05) ;② PTH: Compared with the data before the treatment, both groups were not significant differences after the treatment (P > 0. 05.). There were not significant differences between acupoint catgut - embedding group and acupuncture group (P > 0. 05). Conclusion: Both acupuncture and acupoint catgut - embedding therapy in pishu and shenshu can make the level of serum estradiol (E2) and testosterone (T) of women with primary osteoporosis rise after 6 weeks treatment. The level of parathyroid hormone (FF11) is not strongly influenced by the two types treatments. The mechanism of clinical efficacy of acupuncture and acupoint catgut - embedding methed in pishu and shenshu for primary osteoporosis depends on increasing the level of serum estradiol (E2) and testosterone (T).

6.7. Fonction immunologique des Globules rouges

- Liao Fangzheng et al. [Regulative Action of Acupuncture at Shenshu Point (Bl 23) on Immunologic Function of Erythrocytes]. Chinese Acupuncture and Moxibustion. 1998;18(2):75. [68990].
- Tian Yuanxiang et al. [The Effect of Electro-Acupuncture in Shenshu, Geshu and Baihui on the Immune Organs of Synthetic VD Mouse]. Hebei Journal Of TCM. 2001;23(1):67. [90031].

6.8. Accidents vasculaires cérébraux

- Qin Min, Li Li - Dong. [Clinical Observation on 20 Cases of Convalescence of Stroke treated by Point Application of Ganshu and Shenshu]. Journal of Clinical Acupuncture and Moxibustion. 2007;23(7):54. [152150].

  Objective: To observe the clinical effect on convalescence of stroke by traditional acupuncture and point application. Methods: Divided the treatment group patients into Qi Zhi Xue Yu Type and Shen Xu Xue Yu Type , traditional Chinese medicine 1 applied Shen Xu Xue Yu Type patients, traditional Chinese medicine 2 applied Qi Zhi Xue Yu Type patients. The main points were Gan Yu and Shen Yu, adding other points such as Xue Hai, Zu San l3, San Yin Jiao. Observed the clinical effect on the limb function of patients and compared with the antitheses gmup.Results: Total availability rate of Shen Xu Xue Yu Type was 75%; ; Qi Zhi Xu Yu Type was 87.5% . And antitheses group was 60% . ($P < 0.01$) . Conclusion: Traditional acupuncture combined with point application of Gan Shu and Shen Shu can improve the patients' limb function more quickly.

- Yan Hong-da, Yang Nan, Zhao Ming-hua, Zheng Li-qun. [Therapeutic Observation of Thunder-fire Moxibustion at Dazhui (GV14) and Shenshu (BL23) plus Cognitive Training for Mild Cognitive Impairment Due to Ischemic Cerebral Stroke]. Shanghai Journal of Acupuncture and Moxibustion. 2016;35(12):1410-141. [191641].

  Objective To observe the clinical efficacy of thunder-fire moxibustion at Dazhui (GV14) and Shenshu (BL23) in treating mild cognitive impairment (MCI) due to ischemic cerebral stroke. Method Sixty patients with MCI due to ischemic cerebral stroke were randomized into a treatment group and a control group, 30 cases each. The control group was intervened by joint treatment plus cognitive training, while the treatment group was by thunder-fire moxibustion in addition to that given to the control group. The two groups were evaluated by the Montreal Cognitive Assessment (MoCA), Mini-Mental State Examination (MMSE) and Wechsler Memory Scale (WMS), the major symptoms were observed, and the clinical efficacies were compared between the two groups. The two groups were both treated for 8 weeks. Result The total effective rate was 80.0%in the treatment group, versus 70.0% in the control group, and the difference was statistically significant($P<0.05$). Conclusion The selected acupoints can improve the cognition and activities of daily living (ADL) in MCI patients;thunder-fire moxibustion at Dazhui and Shenshu plus cognitive training can produce a better clinical efficacy than dry cognitive training. Therefore, we can combine thunder-fire moxibustion with modern rehabilitation to enhance the therapeutic efficacy in preventing and treating MCI.

6.9. Démence expérimentale

- Zhao Jian-Xin et al. [Effect of Electroacupuncturing Shenshu Geshu and Baihui Points on SOD Activity and MDA Content in Brain Tissue of Mouse with Synthetic Vascular Dementia]. Chinese Journal Of Traditional Medical Science And Technology. 2000;7(2):65. [86290].

  Purpose: To observe the effect of electroacupuncturing Shenshu, Geshu and Baibaw ponits on brain tissue SOD activity and MDA content of synthetic Vascular Dementia (VD) mouse. Method: duplicated the re-perfusion synthetic VD mouse model of cerebral ischemia,electroacupunctured Shenshu, Geshu and Baihui points, compared with Hydergine after seven days, fiteen days and thirty days and determined the mouse's brain tissue SOD activity and MDA content im each group. Result: the brain tissue SOD activity in model group was remarkably reduced in every time- point and MDA content was obviously increased, which suggested that the free radical injury was obvious and the ability of anti - freeradical injury was reduced; while both electroacupuncture amd Hydergine could increase SOD activity, reduce MDA content and resist free radical injury and the electroacupuncture got a better result. Conclusion: electroacupuncturing Shenshu - Geshu - Baihui points could increase SOD activity and reduce free radical injury, which might be one of the action mechanism of treating VD with acupuncture.

- Zhao Jian-Xin et al. [Effect of Shenshu (BL23)-Geshu (BL17)-Baihui (DU20) Electroacupuncture on Cerebral Ischemia, Cerebral Anoxia and Cerebral Edema of Synthetic Vascular Dementia

Mouse]. Chinese Journal of Basic Medicine in TCM. 2000;6(6):60. [91414].

> Objective: to observe the effect of Shenshu-Geshu-Baihui electropuncture on cerebral ischemia, cerebral anoxia and cerebral edema of synthetic vascular dementia mouse. Methods: duplicated cerebral ischemia and perfused the mouse model of synthetic vascular dementia as well as electropunctured Shenshu, Geshu and Baihui. And then compared Hydergine with the model after seven days, fifteen days and thirty days recorded the mouse's gasp time and calculated cerebral index and cerebral water content. Results: Modelling led to mouse's cerebral ischemia, cerebral anoxia, and cerebral edema at the early stage, which showed a, shortening of gasp time and increase of cerebral index and cerebral water content. Both electropuncture and Hyderegine could lengthen the gasp time; reduced cerebral index and cerebral water content resist cerebral anoxia and reduce the degree of cerebral edema. But the curative effect in electropuncture group was superior to that in medical group. Conclusion - Shenshu-Geshu-Baihui electropuncture can remarkably improve the model's cerebral ischemia, cerebral anoxia and cerebral edema at early stage, which might bc one of the mechanism of treating VD with acupuncture therapy.

6.10. Pneumonie

- Wang Hong-yan, Zhao Qin, Li Peng-fei, Su Qing-lun,Wang Ping. [Effect on Immune Function and Clinical Efficacy of Cupping on Feishu, Pishu and Shenshu in the Treatment of Children Suffering from Mycoplasma Pneumonia] Journal of Clinical Acupuncture and Moxibustion. 2015;31(7):48. [188062].

> Objective : To observe the influence of immune function and clinical efficacy of cupping on Feishu, Pishu and Shenshu(BLI 3,20 and 23)in the treatment of children suffering from mycoplasma pneumonia. Methods :60 children patients were randomly divided into two groups. The control group receivecl the traditional westem medicine including anti-infection , relieving cough and reducirig sputum and nebulizer treatnient ; while the treatment group added cupping on BLI 3 ,20 and 23 on the basis of the therapy in the control group. Then compare two groups according to disappearing time of coughing and lung' s rale , and the influence on patients' imn3une function. Results : The indexes'humora1 immunity:There was no difference of the leveis of IgA and IgG in two groups before and after treatment, and there was a statistically significant difference of the levels of IgM in the treatment group before and after treatment (P < 0. 05). The indexes of cell immunity: There was no statistical difference of the proportion of CD3 + cells in two groups before and after treatment. There was a statistically significant difference of the proportion of CD3+CD4 +,CD3+ CD8' and CD4+/CD8' cells in the treatment group before and after treatment (P<0.05).Inflammatory indexes: there was a statistically significant difference of the levels of hs-CRP in two groups before and after treatmet(P <O. 05).The indexes of clinical evaluation: there was a statistically significant difference of disappearing time on coughing and lung's rale in two groups before and after treatmet(P <0. 05).Conclusion: The therapy of cupping on BLI3 ,20 and 23 for treating mycoplasma pneumonia in ehildren can obviousiy shorten the time of treatment and improve children'simmune function. This therapy is worth promoting.

6.11. Lombalgies

- Schiantarelli C et al. Analgesic Effect of Acupoint Shenshu for Lumbago in Bi Syndrome. Third World Conference on Acupuncture. 1993;283. [6220].
- Ooba Yuzi et al. [A Study of Acupuncture Stimulation at a Remote Acupuncture Point (Weizhong-To-Shenshu): Relation to Lumbago Treatment]. Journal of the Japan Society of Acupuncture. 2000;50(3):429. [79213].

> Occasionally' remote acupuncture stimulation has dramatic effects on chronic pain, especially lumbago, headaches, and shoulder pain. It is well known that the Weizhong point can be used as a remote acupuncture stimulation point for the effective treatment of lumbago We investigated the effects of Weizhong (B 40) acupuncture stimulation on normal healthy volunteers and patients with stable' mild lumbago' all of whom gave informed consent. Using chronaxie values (determined from strength-duration

curves, together with rheobase and utilisation time), single pulse stimulation (duration, 0.001 to 9 msec: voltage 3.5 to 198 V) was applied and irritability was measured at the Shenshu (B 23) point. In the normal males, irritability/responsiveness at Shenshu was slightly lower than in the normal females (established using the chronaxie value) Weizhong stimulation had no apparent influence on these Shenshu responses However Prior to Weizhong acupuncture stimulation in lumbago patients' irritability at Shenshu was greater (and/or threshold value was lower) than in the normal group (chronaxie: 0113±0.022 msec vs. 0.141±0.147 msec. P<0.0I, n=10 or 12. respectively) In other words, an aphylaxis, or hyperalgesia or hyperaphia was present. After 30 min or Weizhong acupuncture stimulation in lumbago patients, chronaxie values showed a significant increase (p<0.0I) (e.g., immediately after stimulation, 0166±0.022 msec: 10 min later, 0164±0.023msec). This effect persisted for 30 min after removal of the acupuncture needles, with the highest values (0.174± 0.002 msec, p<0.0I) being recorded in that period. These data indicate that Weizhong acupuncture stimulation produced analgesic effects in the Shenshu region in-patients with stable, mild lumbago. In conclusion, our results confirm that remote acupuncture point stimulation, such as “Weizzhong-to Shenshu” may be useful in the treatment of lumbago.

- Yu Juan. [Study of Massaging Shenshu Point on Aged Lumbago caused by Deficiency of Kidney]. Modern Journal of Integrated Traditional Chinese and Western Medicine. 2004;13(10):1276. [128179].

6.12. Addiction à la morphine

- Liu Sheng, Zhou Wen-Hua, Liu Hui-Fen, et al . [Effects of Acupuncture at Shenshu (BL 23) on Morphine Withdrawal Syndrome and C-Fos Expression in Addiction-Relative Brain Regions]. Chinese Acupuncture and Moxibustion. 2004;24(11):805. [134266].

  Objective To probe the effect of electroacupuncture (EA) at Shenshu (BL 23) on morphine withdrawal syndrome and the mechanism. Methods Morphine dependence was induced in the rat by subcutaneous injection of morphine, and the acute withdrawal syndrome was precipitated by intraperitoneal administration of naloxone. The rats were pretreated with 100 Hz EA at Shenshu (BL 23) for one hour before the naloxone challenge. Withdrawal scores were calculated, and c-fos levels were detected by immunocytochemical method. Results EA at Shenshu (BL 23) could obviously inhibit withdrawal syndrome, decreased expression of c-fos in the PAG, paraventricular hypothalamus nucleus, lateral hypothalamic area and hypocampus while EA increase c-fos positive neurons in the amygdula and core of nucleus accumbens. Conclusion EA at Shenshu (BL 23) can effectively inhibit morphine withdrawal syndrome and many central nucleus groups are involved in the inhibition of EA on opioid medicine dependence.

- Wang K, Liu HF, Zhou WH. [Effects of Catgut Embedding at “Zusanli” (ST 36) and “Shenshu” (BL 23) on Morphine Analgesic Tolerance and Locomotor Sensitization in the Rat]. Chinese Acupuncture and Moxibustion. 2008;28(7):509. [150176].

  OBJECTIVE: To compare effects of catgut embedding at “Zusanli” (ST 36) and “Shenshu” (BL 23) on Morphine analgesic tolerance and locomotor sensitization induced by chronic Morphine administration and the mechanism. METHODS: The rats were randomly divided into a model group, a non-acupoint group, a Shenshu group and a Zusanli group. The rats, except those in the model group, were pretreated with acupoint catgut-embedding 10 days before the first Morphine injection. The Morphine-tolerance model was established and the pain threshold was detected by hot-plate test every day. Locomotor activities were recorded after the first Morphine injection and Morphine-challenging 1 week after withdrawal of Morphine. The positive neurons of nitric oxide synthetase (NOS) were showed by NADPH-d histochemical method. RESULTS: Compared with the non-acupoint group, catgut embedding at “Zusanli” (ST 36) could attenuate the Morphine analgesic tolerance and the increase of locomotor activities in rats. Meanwhile, the expression of NOS positive neurons in nucleus accumbens septi and dorsal striatum decreased in the Zusanli group. There were no significant differences between the Shenshu group and the non-acupoint group in the analgesic threshold and locomotor sensitization, but the expression of NOS positive neurons in the striatum region significantly decreased. CONCLUSION: Catgut embedding at “Zusanli” (ST 36) can attenuate Morphine analgesic tolerance and reverse formation of locomotion sensitization induced by chronic Morphine administration, which are possibly related with inhibition of the expression of NOS positive neurons in nucleus accumbens septi and dorsal striatum.

6.13. Fonctions rénales

- X. [The Studies of Renal Function by Acupuncture on Shenshu : Part 3 Changes of GFR Judging from CCR Test (Ii)]. Journal of The Japan Society of Acupuncture. 1990;40(1):129. [80964].
- X. [The Studies of Renal Function by Acupuncture on Shenshu (B-23) ; (Part 4). Changes of Urinary Volume. Journal of the Japan Society of Acupuncture. 1991;41(1):134.. [29293].
- Hiroyuki Senuma et al. [The Studies of Renal Function by Acupuncture on Shenshu. 1) Changes of PSP Test Valuations]. Journal of the Japan Society of Acupuncture. 1989;39(4):408-12. [83057].

  > We investigated effects of renal function by acupunctur stimulation on Shenshu as an index on phenol-sulfonphthalein (PSP) test. Acupuncture stimulation on Shenshu group was increased excretion rate in PSP values in 15minutes with consistency of statistical value when comparted to without acupuncture stimulation group (P<0. 02). From the results of this experiment, acupuncture stimulation on Shenshu seems to activate the excretory function in proximal renal tubule. And this suggests that acupuncture stimulation on Shenshu may accelerate the renal plasma flow (RPF) rate.

- Cai Naizhen et al. [A Research in the Mechanism of the Promoting Effect of Needling Point Shenshu (Bl23) on Diuresis and Natriuresis in Rabbit]. Shanghai Journal of Acupuncture and Moxibustion. 1993;12(4):169. [47972].
- Daizaku Kudoh et al. [The Studies of Renal Function by Acupuncture on Shenshu 2. Creatinine Clearance]. Journal of the Japan Society of Acupuncture. 1990;40(2):213-18. [83066].

  > Effects of acupuncture on Shenshu were examined in Gromerular Filtration Rate (GFR) by creatinine clearance tests, urinary volume, urinary substancce (Na, K, Cl, Cre, BUN, UA) and plasma substance (the same substance as urines) on 7 normal examinees. The subjects were divided in two experimental groups (control and stimulation on Shenshu). Except for K level in plasma, there had not been found a significant change. However, urinary volume had a tendency to increase. Plasma K level at 90 minute in stimulation group showed a statitical increase. The results were as follows. Compared with control group, there was no significant change in GFR, urinary volume, urinary substance levels, plasma levels except for plasma K level.

- Xu Nenggui. [Effects of Electroacupuncture at “Shenshu” Point on Renal Blood Flow in Rabbits]. Acupuncture Research. 1995;20(2):48-50. [85700].

  > The purpose of this study is to observe the effect of electroacupuncture at “Shenshu” point (U. B. -23) on the renal blood flow (RBF) under the conditions of normal, glycerol-induced renal ischemia and renal neurotomy. The RBF, which is measured by hydrogen gas clearance method, was chosen as index. The results are as follows : 1. RBF is decreased by electroacupuncturing “Shenshu” point under both conditions of normal and glycerol-induced renal ischemia. 2. After renal neurotomy, RBF is increased by electroacupuncturing “Shenshu” point. These facts suggest that the effects of electroacupuncture at “Shenshu” point relate to the renal nerve and body fluid.

6.14. Lithiases urinaires

- Dong Cong-Hui et al. Renal Colic Treated by Puncturing Jingmen and Shenshu: Observation on 70 Cases. International Journal of Clinical Acupuncture. 2000;11(2):167. [72765].

  > When acute renal colic occurs, the chief symptom is a sharp pain in the lower back, hypochondrium and lower abdomen. Dolantin and progesterone i.m. are adopted to relieve the colic, but their effectiveness is often slow and sometimes unsuccessful. Seventy cases of acute renal colic were treated by acupuncture since March 1993 with a good effect. The report is as follows.

6.15. Fatigue chronique

- Cheng CS, Zhu YH, Liang FR, Wu X, Jin SG, Wu FP.. [Effect of Electroacupuncture at Shenshu (BL 23) and Zusanli (ST 36) on the Event-Related Potentials of Chronic Fatigue Syndrome]. Chinese Acupuncture and Moxibustion. 2010;30(4):309-12. [155697].

  OBJECTIVE: To observe the effective mechanism of electroacupuncture for chronic fatigue syndrome (CFS).METHODS: The dynamic detection of chronobiology was used to test the event-related potentials in 20 healthy subjects and 20 CFS patients. P3a and P3b latencies at 4 equidistant time points (8:00, 14:00, 20:00, 2:00) within 24 hours were collected and analyzed. RESULTS: (1) Latency of P3a in CFS group was obviously prolonged at 14:00 compared to health group with statistical significance ($P < 0.05$), latency of P3b was decreased at 14:00 after electroacupuncture treatment with statistical significance compared to that of pre-treatment ($P < 0.01$). (2) There were obviously circadian rhythm in latency of P3a and P3b in health group ($P < 0.05$), which were not seen in CFS group ($P > 0.05$); the circadian rhythm latency of P3b restored after treatment ($P < 0.05$). (3) The latency acrophase of P3a and P3b pre-treatment obviously shifted backward compared to that of healthy subjects ($P < 0.05$), shifted forward after electroacupuncture treatment ($P < 0.05$).CONCLUSION: The event-related potential circadian rhythms are lost in CFS patients. Electroacupuncture at Shenshu (BL 23) and Zusanli (ST 36) can regulate the circadian rhythm of P3a and P3b latency and improve the cognition of the patients in daytime.

- Tan Li-Jun, Zhu Yi-Hui, Fu Hui- Guo. [Analysis the Function of Acupuncture and Moxibustion on Zusanli and Shenshu to Treat Chronic Fatigue Syndrome]. Journal of Clinical Acupuncture and Moxibustion. 2010;26(3):8. [172545].

  Shenshu and Zusanli are important points on stomach meridian and gallbladder meridian. The function of Zusanil is regulate spleen and stomach, nourishing Qi and blood; the function of Shenshu is reinforce kidney and tonifying Qi, enriched kidney and nourish Yin, replenish essence. In this paper, through the understanding of the two points, analysis the effect of selected two points to treat CFS with acupuncture and moxibustion. To provide a theoretical basis for clinical treatment of CFS

.

6.16. Effets musculaires dans la senescence

- Zhang XZ, Peng YM, Yu JC, et al. [Effect of Puncturing Shenshu Point on the Femoral Biomechanical Properties in Senescence Accelerated Mouse Prone 6]. Chinese Journal of Integrated Traditional and Western Medicine. 2008;28(6):518. [149924].

  OBJECTIVE: To explore the mechanisms of puncturing Shenshu point in improving osteoporosis. METHODS: Serum levels of testosterone (T) and osteocalcin (BGP) in senescence accelerated mouse prone 6 (SAMP6, test animals) and senescence accelerated mouse resistant 1 (SAMR1, for control) were determined by radioimmunoassay and their femoral biomechanical properties were determined with three-point bending test before and after puncturing to observe the effect of puncturing on the femoral biomechanical properties and bone mineral contents. RESULTS: Compared with the SAMR1 control group, the serum level of T (20.91 +/- 3.41 nmol/L) decreased (11.09 +/- 1.48 nmol/L in SAMP6 mouse), BGP (6.7 +/- 2.07 microg/L) increased (12.29 +/- 2.29 microg/L in SAMP6 mouse), femoral bending strength lowered and fragility increased. These changes were all improved to some extent or normalized, serum T level 15.05 +/- 2.63 nmol/L and BGP 8.88 +/- 1.85 microg/L after needling at Shenshu point showed significant difference when compared with those in SAMP6. CONCLUSION: Puncturing Shenshu point could effectively prevent the bone loss in SAMP6 mice, increase their bone strength, the therapeutic effect is partly by way of promoting the secretion of sex hormone, improving bone metabolism, suppressing bone transformation rate and increasing bone minerals.

6.17. Distribution des nucléotides cycliques

- Qu Lifang et al. [The Distribution of Cyclic Nucleotide in Points Shenque (Rn8) and Shenshu (B23) Tissues of Normal Rats and the Changes after Acupuncture]. Shanghai Journal of Acupuncture and Moxibustion. 1999;18(4):36. [59681].

  Objective: To investigate the distribution of cyclic nucleotide in different points and its relation with acupuncture effect. Method: Radioimmunoassay was used to measure cAMP and cGMP in points Shenque (RN 8) and Shenshu (BL 23) tissues. Results: In normal rats, cAMP and cGMP were significantly higher in point Shenque than in point Shenshu tissue (P<0. 001, P<0. 05); the difference in cGMP between the two groups disappeared during electropuncture of point Shenshu. Conclusion: It is suggested that the different distribution of cyclic nucleoside in different points may be one of the substance bases for the different specific function that different points perform.

6.18. Hypothalamus

- Chen Zebin et al. [C-Fos Expressions in PVN of Rats Induced by Electroacupuncture and Acupuncture “Shenshu” Point]. Acupuncture Research. 1999;24(3):187. [77062].

  In order to research the relation between PVN [ParaVentricular Nucleus of the hypothalamus] and the effects of needling “Shenshu”, we studied C-fos expressions in PVN of rats induced by electroacupuncture and acupuncture at the right “Shenshu” using immunohistochemistry. The results show that densities of FLN in PVN are significantly different (P<0.01, all), the electroacupuncture group > the acupuncture group > the control group > the normal group; the stimuli side of electroacupuncture group > the non-stimuli side of electroacupuncture group > the non-stimuli side of acupuncture group > the stimuli side of acupuncture group. The results indicate that PVN takes part in the effecting process of needling “Shenshu” and the degree of PVN taking part in the effecting change depends on different ways and amount of stimuli. It is also indicated that the difference showed by the experiments may be one important link of different effects induced by different needling method and different effects between two sides induced by needling on one side.

7. Références complémentaires