# The most common acupuncture points prescribed for postoperative cognitive dysfunction/delirium – a data mining study

Krista Runcie, BS<sup>1</sup>, Shu-Ming Wang, MS., MD<sup>2</sup>, Maureen Helgren, PhD<sup>3</sup>

1. Quinnipiac University Frank H. Netter MD School of Medicine, North Haven, CT, 2. Department of Nurse Anesthesiology, University Frank H. Netter MD School of Medicine, North Haven, CT, and the connecticut, Farmington, CT & Department of Nurse Anesthesiology, University Frank H. Netter MD School of Medicine, North Haven, CT, and the connecticut, Farmington, CT & Department of Nurse Anesthesiology, University Frank H. Netter MD School of Medicine, North Haven, CT, and the connecticut, Farmington, CT & Department of Nurse Anesthesiology, University Frank H. Netter MD School of Medicine, North Haven, CT, and the connecticut, Farmington, CT & Department of Nurse Anesthesiology, University Frank H. Netter MD School of Medicine, North Haven, CT, and the connecticut, Farmington, CT & Department of Nurse Anesthesiology, University Frank H. Netter MD School of Medicine, North Haven, CT, and the connecticut, Farmington, CT & Department of Nurse Anesthesiology, University Frank H. Netter MD School of Medicine, North Haven, CT, and the connecticut, Farmington, CT & Department of Nurse Anesthesiology, University Frank H. Netter MD School of Medicine, North Haven, CT, and the connecticut, Farmington, CT & Department of Nurse Anesthesiology, University Frank H. Netter MD School of Medicine, North Haven, CT, and the connecticut of Nurse Anesthesiology, University Frank H. Netter MD School of Medicine, North Haven, CT, and the connecticut of Nurse Anesthesiology, University Frank H. Netter MD School of Medicine, North Haven, CT, and the connecticut of Nurse Anesthesiology, University Frank H. Netter MD School of Medicine, North Haven, CT, and the connecticut of Nurse Anesthesiology, University Frank H. Netter MD School of Nurse Anesthesiology, University Frank H. Netter MD School of Nurse Anesthesiology, University Frank H. Netter MD School of Nurse Anesthesiology, University Frank H. Netter MD School of Nurse Anesthesiology, University Frank H. Netter MD School of Nurse Anesthesiology, University Frank H. Netter MD School of

## Introduction:

Postoperative cognitive dysfunction (POCD) and postoperative delirium (POD) are common post-surgical complications. POD usually occurs 24-72 hours after surgery while POCD is seen weeks after and lasts longer (Huang et al., 2018). Acupuncture has been used to prevent and treat POCD and POD. The goal of this study was to use data mining by collecting all available published articles to identify the common prescriptions of acupuncture points used in prevention and treatment of POCD and POD in the adult population.

# **Methods:**

A search was conducted for all articles using perioperative acupuncture in post-operative cognitive dysfunction (POCD) and postoperative delirium (POD). PubMed, Scopus, and Google Scholar databases were utilized. Only articles from 2018-2023 were included. Limits applied to database search included: final articles, randomized controlled clinical trials, adult, and human subjects. Duplicates were removed using Refworks initially. Manual screening for the most relevant articles and removal of missed duplicates was done for final selection

Sternocleidomastoid

ZHONGWAN-CV12

XAIWAN-CV10

YINJIAO-CV7 QIHAI-CV6 Pectoralis Major

Serratus Anterior

Adductors

Sartorious

Rectus Femoris

Vastus Medialis

Peroneus Longus

Brachii

Brachoradialis

Flexors

Sternocleidomastoid

Trapezius

Infraspinatus

Triceps Brachii

Latisimus

External

Abdominous

Gluteus maximus

Biceps femoris

Gastroncnemius

Gastrocnemius

Calcaneal

Extensors

### Results:

A total of 5070 articles resulted during the initial search (261-Scopus, 2749-Pubmed, 2060-Google Scholar). Results were narrowed to 581 after filters were applied. Out of the 70 most relevant articles selected, 29 were included for data mining. A total of 60 acupuncture points were found. The top acupoints prescribed were: PC6 (Neiguan), GV20 (Baihui), St36 (Zusanli), LI4 (Hegu), GV24 (Shenting), SP6 (Sanjinjiao), HT7 (Shenmen), GV29 (Yintang), Ll11 (Qu chi), GV14 (Dazhui), Ex-HN1 (Shishencong), and LR3 (Taichong).

GV24 (Shenting)- Half cun directly above the midpoint of the anterior hairline of the head.

GV29 (Yintang)- Midpoint between the two medial ends of the eyebrows on the forehead.

LI11 (Qu chi)- While elbow is flexed, the point is on the lateral end of the transverse cubital crease, at midpoint between LU 5 and the lateral epicondyle of the humerus.

PC6 (Neiguan)- 2 cun above the transverse crease of the wrist, palmar aspect of the forearm, on the line connecting PC 3 and PC 7, between the tendons of m. palmaris longus and m. flexor carpi radialis.

HT7 (Shenmen)- Ulnar end of the transverse crease of the wrist, in the depression on the radial side of the tendon m. flexor carpi ulnaris.

St36 (Zusanli)- Anterior aspect of the lower leg, 3 cun below ST 35, one finger-breadth (middle finger) from the anterior crest of the tibia.

LR3 (Taichong)- Dorsum of the foot, in the depression proximal to the 1st metatarsal space.

Acupoints for POCD and POD

| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
| 167
|

Ex-HN1 (Shishencong)- Vertex of the head, a group of four points, 1.0 cun respectively anterior, posterior and lateral to DU 20.

SHANGYANG-LI1

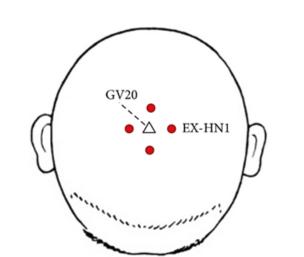
WEIZHONG-BL40

SANYINJIAO-SP6 FUYANG-BL59

HEYANG-BL55

CHENGJIN-BL56

CHENGSHAN-BL57



GV20 (Baihui)- 5.0 cun directly above the midpoint of the anterior hairline or at midpoint of the line connecting the apexes of the two auricles.

GV14 (Dazhui)- Posterior median line, in the depression below the spinous process of the 7th cervical vertebra.

LI4 (Hegu)- Dorsum of the hand, between the 1st and 2nd metacarpal bones, in the middle of the 2nd metacarpal bone on the radial side.

SP6 (Sanjinjiao)- On the medial side of the lower leg, three cun above the medial malleolus prominence.

# Frank H. Netter MD School of Medicine

