





## Improvement after tattoo eradication with acupuncture in a case of fibromyalgia

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### Abstract

The disruptive area is the problem areas of the body that create effects far from where it is located. Scars, tattoos, dental problems, paranasal sinuses are the most common disruptive areas. In the treatment of disruptive areas is neuropsychopathogen elimination acupuncture method and neural therapy. In this article, the improvement with neuropsychopathogen elimination acupuncture method that we applied to our patient with fibromyalgia and depression is discussed.

**Key words:** Fibromiyalgiya; disruptive area; acupuncture

### Introduction

Fibromyalgia is a chronic disease characterized by pain and stiffness in the muscles, tendons, and joints. Its prevalence is between 2-4%. In medical treatment, duloxetine hydrochloride and pregabalin are used. Complementary treatments include acupuncture, moxibustion, electroacupuncture, herbal extracts, and massage. The 2017 EULAR treatment guidelines specifically recommend the use of acupuncture [1].

In patients who do not respond to classical acupuncture practices, disruptive fields that block the flow of stimuli in the fascia should be suspected. Disruptive fields are problematic areas of the body that create effects distant from their location [2]. These areas are chronic, nonspecific, have few symptoms, or are asymptomatic. Scars, tattoos, dental problems, and paranasal sinuses are the most common disruptive fields [2]. In addition to neural therapy, the Neuropsychopathogen Elimination (NPPE) acupuncture method is used for treating disruptive fields. Neuropsychopathogen elimination is an acupuncture method that optimizes the primo vascular channel systems of consciousness [3,4]. The primo vascular channel system ensures the transmission of biophotonic

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activity (Qi) to all anatomical compartments of the body within the fascial network through acupuncture meridians. NPPE aims to eliminate the pathology by optimizing these channel systems [3].

This case report discusses the dramatic clinical improvement and neutralization of the disruptive field with the application of neuropsychopathogen elimination acupuncture.

### Case

A 26-year-old female patient presented to our clinic with complaints of widespread body pain starting in the right arm, insomnia, and depression, progressively increasing over the past eight months. On examination of the patient, Adler-Langer points were found to be bilaterally positive at C3, and the Kibler skin sliding test was normal. According to the ACR 1990 criteria, 11 of the fibromyalgia tender points were positive on palpation [5]. The widespread pain index score was 14, and the symptom severity scale was 8 according to the ACR 2010 criteria [5]. Her pain level was 8 on the visual analog

scale. The patient's Beck depression inventory score was 60 at the initial evaluation, and she had a history of a previous suicide attempt. The fibromyalgia impact questionnaire score was 70 [5]. The patient had a large tattoo covering the entire brachial area of her right arm. Diagnosed with fibromyalgia and severe depression, the patient underwent 5 sessions of acupuncture, each lasting 50 minutes, twice a week. Since her pain did not subside, 5 sessions of neuropsychopathogen elimination and disruptive field therapy were performed (Figures 1A,B). After 10 sessions, the patient had no pain, the number of tender points was 0, the widespread pain index score was 3, the symptom severity scale was 2, the Beck depression inventory score was 8, and the fibromyalgia impact questionnaire score was 16. During the clinical follow-up, a significant lightening of the tattoo color was observed in the areas where the disruptive field therapy was applied (Figures 1A,B).

### Discussion

There is a considerable amount of research on the effectiveness of acupuncture in fibromyalgia [6-8]. In

fibromyalgia patients where clinical outcomes with classical acupuncture are unsuccessful, it is necessary to reevaluate the patient in terms of disruptive fields. In this patient, dramatic improvement in treatment process was observed with the eradication of disruptive fields.

Disruptive fields are formed by the chronic stimulation of afferent sympathetic fibers. With the NPPE acupuncture application used in our patient, resynchronization is achieved through the retransport of dielectric abnormal transmissions in the fascia system and primo vascular optical channels.

There is a magnetoinformational transformation between the primo vascular channel system and connective tissue. In the presence of tattoos, burns, or scar surfaces, stagnation areas with signal-disruptive properties develop in all dermatomuscular



**Figure 1A:** The needled version of tattoo before treatment

**Figure 1B:** The needled version of tattoo after treatment

surfaces, including collagen fibers, and the transmission of the primo vascular channels is blocked. As a result, signal-disruptive properties develop in the tissue compartments where the primo vascular channels pass, and the integrated neuronal communication of the central and peripheral nervous systems is disrupted.

The NPPE technique was developed within the scope of the Tekci Diagonal Acupuncture Systems (TDAS) and offers interaction diagonally (crosswise). In the TDAS microacupuncture system, the micro and macro holographic images of the organism are projected onto the head, face, nose, back, abdomen, feet, wrists, knees, and thigh zones [3]. The neurocranial zone in the medial thigh depicts anatomical components belonging to the prefrontal cortex, temporal, parietal, occipital brain surfaces, and subcranial cortex [3]. In NPPE, the optimization of physical, cognitive, and mental pathological conditions in humans is achieved through the activation of somatotopic points of the amygdala, nucleus raphe, and hippocampus, which are members of the limbic system. This system was developed based on Benoit Mandelbrot's Fractal Field Model on a fasciology basis, and it operates through the interaction of quantum-holographic Hopfield-like integrative neural networks via the primo vascular system using Feynman's propagator version [9,10,11].

In our case, the application of the NPPE acupuncture technique resulted in both the complete regression of the patient's fibromyalgia and depression and the simultaneous lightening of the tattoo colors, demonstrating the correlation between the two. The localized superficial fascial network on the dermatomal surface of the tattoos caused distransportation of the magnetoinformational field between the primo vascular channels and the superficial fascial structure due to stagnation areas on collagen surfaces, leading to the clinical presentation of fibromyalgia and depression. Further studies are needed regarding the effectiveness of the NPPE microacupuncture method in this area.

### Conflict of interest

The authors declare no competing interests. The authors declare they have no financial interests.

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