

Conference Report

**Report from the 11th International Symposium on Auriculotherapy Held in Copenhagen, 8-10 September 2023 - Auriculotherapy meets the field of Psychology**Claire Marie Rangon <sup>1</sup>, Gerhard Litscher <sup>2,\*</sup>, Robert Bering <sup>3</sup>, Gary Stanton <sup>4</sup>, Anne Marie Bering <sup>5</sup>, Stephen W. Porges <sup>6,7</sup>, Raphaël Nogier <sup>8</sup>

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## **1. Introduction**

This publication presents a compilation of abstracts from the 11th International Symposium on Auriculotherapy in Copenhagen, Denmark (September 8-10, 2023), focusing on the convergence of Auriculotherapy and the field of Psychology. Auriculotherapy, a complementary therapy based on the stimulation of specific points on the ear, is gaining recognition for its potential in enhancing psychological well-being. The abstracts within this volume explore various aspects of this interdisciplinary connection, including the physiological mechanisms, clinical applications, and the psychological implications of Auriculotherapy. Researchers and practitioners in both fields will find valuable insights into the promising intersection of Auriculotherapy and Psychology, fostering a holistic approach to mental health and well-being.

## **2. Symposium Welcome Address**

### ***2.1 Symposium Welcome Address – From Robert Bering (MD) and Anne Marie Bering (PgD)***

Dear presenters,  
Dear participants,

Welcome to the 11th International Auriculotherapy Symposium **“Auriculotherapy meets the Field of Psychology”**.

The Auriculotherapy Symposium is designed to build bridges between the psychological field and complementary medicine. The number of people diagnosed with psychological disorders is rising worldwide. This causes disabilities in the working and in the social life. In line with the Auriculotherapy tradition of Paul Nogier several directions, protocols and ideas to the treatment of psychic syndromes have been developed. By this, auriculotherapy opens new approaches to psychic disorders. Thank you to all international Auriculotherapy experts, researchers and practitioners to share interdisciplinary knowledge, experiences, and inspiration and contribute to a complex multidisciplinary approach, a milestone in integrative medicine.

*Best regards,*  
*Anne Marie and Robert Bering*

### ***2.2 Symposium Welcome Address – From Raphaël Nogier (MD)***

Ladies and gentlemen, dear friends,

As President of GLEM, I am happy to open the 11th International Symposium on Auriculotherapy, the subject of which is fascinating. This is the sixty-second time I have come to this beautiful country of Denmark. Indeed, from 1989, I came here to teach auriculotherapy, invited by Anne Marie Bering.

By opening this symposium, I would like us to have a thought for Doctor Michel Maignan who himself has taught in Denmark on many occasions. He unfortunately died in 2021. A few days before his death, he told me that Copenhagen was an ideal place to host this XIth symposium.

In 1951, Paul Nogier, a doctor in Lyon, tried to understand why certain healers obtained good therapeutic results on sciatica by cauterizing a specific ear point. This process, known for several centuries, was used around the Mediterranean Sea. Although the results of the cauterization were spectacular, no scientist had investigated why. Professor Brown Sequard thought it was a reflex phenomenon. Later, Paul Nogier understood that there was a somatotopia on the ear. From there, he created a real method that he called auriculotherapy.

He very quickly used the ear points to treat pain of any kind, functional disorders but also disorders with a psychic expression. In particular, he described on the ear the sounds line located below the antitragus. This line is used today to treat the sequelae of psychoemotional trauma.

Subsequently, Paul Nogier described a vascular phenomenon called RAC or VAS, perceptible on the radial artery. This phenomenon, dependent on the sympathetic system, reflects an adaptation of the organism, sometimes a defense. The RAC is very often affected in psychological disease.

This symposium is organized by Professor Robert Bering and his wife Anne Marie. The scientific committee is chaired by Dr Claire Marie Rangon assisted by Dr Gary Stanton. The Presidency is held by Professor Stefen Porges, well known for his polyvagal theory. Thanks to all of them and to all those who participated in this great achievement. Thank you also to Diana Bittner of Glem. Thanks for all lecturers. Thanks for the translators. For all this work, I deeply thank them.

*Raphaël Nogier*

### **2.3 Symposium Welcome Address – From Stephen W. Porges (PhD)**

First, I want to thank the organizing committee for inviting me to preside as President of the Symposium. A special thanks to Dr. Claire-Marie Rangon and Professor Robert Bering their help in making me feel welcomed in your community.

When asked to participate, I was curious about how my work would fit the mission of your organization. How could my work be of interest to you and your colleagues? How would the research questions that I have worked on for over five decades be of interest to the field of auricular therapy? Interestingly as I engaged in learning more about the history of your discipline and especially about the bold insightful pioneering work of Dr. Paul Nogier, I began to feel more comfortable. As I realized that we shared a perspective in the ‘healing’ role of sensory information in ‘reflexively’ shifting neurophysiological state. I started to see parallels between Polyvagal Theory and the insightful model of auricular therapy proposed by Dr. Paul Nogier that identified locations in the auricle that when stimulate influenced the autonomic nervous system and the function of specific structures in the body.

Our overlap has to do with both an interest in the neural regulation of the autonomic nervous system and our vision of an optimally regulated ANS that supports the broad homeostatic functions of health, growth, restoration, and sociality. Basically, we share an implicit model in the innate intelligence of the body to regulate and self-heal when an appropriate signal is encoded by the nervous system. We share a view that when we know the parameters of the signal that the neurobiological sensor is tuned to, the organ function will reflexively return to a more optimal state. In contrast to the specificity of auricular therapy linking organs to locations on the auricles, Polyvagal Theory provides a more general model linked to more diffuse autonomic states associated with calmness and safety, danger, and life threat. Both auricular therapy and Polyvagal Theory assume

that when the appropriate signals are processed, the nervous system gives up its threat reactions and self-organizes to enhance health. Within Polyvagal Theory this is emphasized as signals of safety that can reflexively move the autonomic nervous system out of threat to states of calmness that would optimistically support health and sociality.

My scientific journey started in the late 1960s, when I was investigating how heart rate changed during various forms of stimulation and mental effort. I noticed that heart rate stabilized during sustained attention and that individuals who had more endogenous baseline heart rate variability were more autonomically reactive and even had faster reaction times. This led me to become the first scientist to quantify heart rate variability as a reliable indicator of both a response to stimulation and psychological challenges as well as an individual difference. This was a time when variability in heart rate was assumed to be measurement error since the dependent variable of choice was heart rate. As an individual difference I thought it would be diagnostic or at least predictive of a propensity to autonomically react to stimulation. The decades that followed and the proliferation of HRV research supports both insights.

My work lead in two directions. One focused on an intellectual curiosity to understand the neural mechanisms mediating the changes in heart rate and heart rate variability. When I started my research, the vagus was seldom mentioned, however my research led to an interest in the vagal regulation of the heart. The second focus on the development of methods to dynamically assess vagal regulation. These research trajectories led me into questions of how measures of heart rate could contribute to medical diagnosis and predictions of survival.

Along this journey I was confronted with a challenge, how could the vagus when expressed in features of heart rate variability (i.e., respiratory sinus arrhythmia) be associated as supporting homeostatic functions but could be lethal when expressed as bradycardia. Solving this vagal paradox, led to the conceptualization of the polyvagal theory. The solution emerged when the phylogenetic transition from extinct ancient reptiles to mammals was uncovered with the identification of a uniquely mammalian ventral vagus that integrated the regulation of the structures of the face and head with the vagal regulation of the heart. This innovation enabled mammals to signal conspecifics through facial muscles and vocal intonation the autonomic state they were in. This system, labelled the social engagement system, enabled ingestion (nursing), social communication, and co-regulation.

During the evolutionary journey cardioinhibitory neurons migrated ventrally from the dorsal motor nucleus of the vagus to the source nuclei of the nerves that arise from pharyngeal arches during embryonic development and regulate the striated muscles of the face and head. Through evolution interneuronal connections emerge between the ventral vagus (nucleus ambiguus) and the source nuclei of cranial nerves V, VII, IX, X, and XI. The product of this ventral migration is the social engagement system and its anatomical substrate, the ventral vagal complex. It is through these interneuronal connections that portals of vagal stimulation are expanded to enable acoustic stimulation and sociality to function as efficient and effective forms of vagal nerve stimulation.

It is this journey of the ventral migration of cardioinhibitory vagal neurons led me to the ear. However, my interests were not in the auricle, my interests were in the neural regulation of middle ear structures and my map of stimulation was focused on how to stimulate the afferent limb of the social engagement system. Specifically, this is how signals of safety could be input in the structures regulated by cranial nerve V, VII, IX, X, and XI as portals to move the ANS into a state that would support health, growth, restoration, and sociality. For example, signals of safety, including patterns

of vocalizations, could be used to calm the ANS and function as an acoustic vagal nerve stimulator. Thus, the social engagement system links the vagus with sociality and sociality with health.

I am looking for to sharing the next few days with you and learning from your pioneering work.  
Thank you.

*Stephen W. Porges*

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## 3. Symposia Abstracts

### ***3.1 Vagal Nerve Stimulation Through the Lens of the Polyvagal Theory***

Stephen W. Porges<sup>1, 2, 3</sup>

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#### **Abstract**

Vagal nerve stimulation, through the lens of the Polyvagal Theory, highlights three key aspects. Firstly, it emphasizes the link between the ventral vagal complex's functions and symptom relief through stimulation, benefiting mental and physical well-being. Secondly, it focuses stimulation on specific afferent pathways that communicate with brainstem regions regulating somatomotor and special visceral efferent pathways from the ventral vagal complex. Thirdly, it acknowledges the impact of trauma and chronic stress on autonomic function, disrupting the adaptive role of the ventral vagal complex in managing threats and optimizing health. As our understanding of vagal pathways improves, stimulation methods and targets are expected to evolve, potentially resulting in vagal neuromodulators serving as neural exercises for a resilient autonomic nervous system, without requiring chronic usage.

### **3.2 How the Vagus and Oxytocin Evolved to Form the Neurophysiological Basis of Humanity: A Marriage of Love and Trust**

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#### **Abstract**

Through the lens of evolution, sociality emerged in mammals as a product of modifications of ancient foundational neurobiological survival circuits. This process required modifying circuits initially dedicated for defense and enable two sequential biobehavioral steps to enable trust, the basis of sociality, to occur: 1) detection of cues of safety in other, 2) down regulation of threat reactions.

This talk will discuss how two interdependent neurobiological systems (i.e., vagal and oxytocin) have evolved to synergistically support sociality and homeostatic functions (health, growth, and restoration).

### **3.3 Science and Research in Auricular Medicine**

Gerhard Litscher

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#### **Abstract**

This keynote lecture on the topic of 'Science and Research in Auricular Medicine' will highlight the latest findings and advances in this field. Auricular medicine is a form of complementary medicine that uses the stimulation of specific points on the ear to diagnose and treat health conditions. This technique has been used for many years in Europe but also in traditional Chinese medicine and has enjoyed renewed popularity in the Western world in recent years. Our research team in Austria in Europe, together with international renowned research teams, has made essential basic contributions to the study of this practice. Recent research has also shown that auricular stimulation including acupuncture with different modalities (needle, laser, electro, etc.) can be effective in treating a variety of conditions, including chronic pain, anxiety, and addiction. However, we have also performed joint studies on basic research, robotic, and artificial intelligence for treating various health problems.

This keynote lecture will present the latest basic research on auricular medicine, with a focus on our own findings. The potential benefits and limitations of this practice should also be discussed, as well as its role in integrative medicine. Whether you are a researcher, a practitioner, or simply interested in learning more about basic science and research of

auricular medicine, this lecture will hopefully provide valuable insights into this fascinating field.

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### ***3.4 Theory and Application of Auricular Therapy in Psychoemotional Disorders via the Modulation of the Vagus Nerve***

Peijing Rong

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#### **Abstract**

The vagus nerve (VN), the “great wondering protector” of the body, comprises an intricate neuro-endocrine-immune network that maintains homeostasis. With reciprocal neural connections to multiple brain regions, the VN serves as a control center that integrates interoceptive information and responds with appropriate adaptive modulatory feedbacks. Our team has discovered the auricular branch of the vagus nerve overlaps with the visceral auricular points and proposed a new idea of stimulating the visceral auricular points instead of implantable vagus nerve stimulation, that is to say, transcutaneous auricular vagus nerve stimulation (taVNS). The pre-clinical studies revealed that taVNS can be potentially modulated by vagus nerve stimulation (VNS) with a broad vagal neural network and exert a neuromodulatory effect to activate certain innate “protective” pathways for restoring health. From the perspective of clinical observation, we found that taVNS has a potential clinical effect on depression, epilepsy, insomnia, and other psychoemotional disorders. For the stimulation technique, we develop digital, integrated, and wearable common technology of ear treatment on psychoemotional disorders and build a deep learning and multimodal sentiment analysis approach for acupuncture. In summary, we are proposing and continuously improving a new paradigm of the overall regulation of body functions from ear to peripheral nerve and brain network.

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### **3.5 Mechanisms and Clinical Application of Ear Treatment for Brain Disorders**

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#### **Abstract**

Depression has a high global prevalence and limited treatment options. Auricular acupuncture stimulation can be widely used for the treatment of mental disorders. Our team has discovered the auricular branch of the vagus nerve overlaps with the visceral auricular points and proposed a new idea of stimulating the visceral auricular points instead of implantable vagus nerve stimulation, that is to say, transcutaneous auricular vagus nerve stimulation (taVNS). Our team confirmed taVNS for the first time the clinical effectiveness of taVNS in the treatment of depression by analyzing the HAMD and SDS scale scores before and after treatment. In terms of mechanistic studies, we have distributed morphological, physiological, and functional imaging techniques to observe structurally and functionally the distribution of vagal fibers in the auricular region project directly to the nucleus of the Solitary Tract. Functional imaging studies revealed taVNS modulated the limbic system, mood-related brain networks, and neuroendocrine functions, elucidating the mechanism of its antidepressant brain effects and further identifying the anterior insula as an early cortical predictive biomarker of antidepressant efficacy of auricular electrical stimulation in patients. From this mechanism, taVNS has been explored on other brain disorders such as insomnia and epilepsy which has broad application prospects.



### **3.6 Polyvagal-informed Neuro-auricular Modulation**

Dave Maybee, Duvan Hoffmann

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#### **Abstract**

Given the complex interplay of neural networks involved in the projection of the cortical homunculus onto the ear — the auricular microsystem, it is not surprising that vagal-related aspects in the body that have been activated via auricular targets innervated by the vagus nerve have also been activated via auricular targets not innervated by the vagus nerve. Polyvagal Theory describes an autonomic nervous system (ANS) characterized by three phylogenetic human response systems: 1) social communication, 2) mobilization, and 3) immobilization [1]. Only two of the three response systems are vagal (parasympathetic) aspects, the third is non-vagal (sympathetic) — nonetheless affected by vagal tone [2]. This is because vagal tone has everything to do with the ANS and our sense of safety [3]. As Polyvagal Theory suggests, this sense of safety is rooted deep within our biology, and deep within the neural complexity projected on our ear. This presentation relates three auricular vagus points to the polyvagal framework and offers a helpful lens for assessing and supporting sympathetic and parasympathetic regulation. A lens with which to move beyond the concept of niVNS, inform trauma treatment and support the sense of safety critical for all healing.

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### **3.7 Is Vagus Nerve Therapy the Pathway Towards Recovery from Long Covid?**

Claire Marie Rangon

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#### **Abstract**

For the first time in the history of human infectious diseases, clinical trials assessing noninvasive vagus nerve stimulation (nVNS) in acute severe sepsis have been launched during the COVID-19 pandemic. Likewise, growing evidence lays emphasis on nVNS as a convenient therapeutic solution to recover from Long COVID (LC), the entity gathering heterogeneous long-term symptoms of SARS-CoV-2 infection, probably one of the greatest healthcare crises facing the world today.

Vagus nerve and central cholinergic system impairment do play a central pathogenic role in the post-COVID condition, independently of the severity of SARS-CoV-2 infection, explaining why vaccines do not fully protect against LC. Therefore, nVNS could pragmatically help to recover from the whole spectrum of phenotypes described in LC, supported by the first promising clinical trials, showing efficiency, innocuity, and large-scale patient-self-administered use. Even, the same rationale supports nVNS as an efficient prevention tool against LC, whatever the SARS-CoV-2 variant, in the at-risk population, easily screened based on HRV prediction and other affordable diagnosis tools.

At last, understanding the pivotal role of vagus nerve dysfunction during SARS-CoV-2 infection could, paradoxically, turn the burden of LC into an opportunity to unravel the pathophysiology of neurodegenerative diseases and “Medically Unexplained Symptoms” so far.

### **3.8 Dynamic Ear Acupuncture-supported Trauma Regulation (DESTaR)**

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#### **Abstract**

Cognitive Behavioral Therapy (CBT), EMDR and Psychodynamic Trauma Therapy (PTT) are established in treatment guidelines of posttraumatic stress disorder (PTSD). However, a subgroup of patients feel attracted to alternative or complementary therapy methods like acupuncture, meditation, physiotherapy, or yoga for different reasons. Beside personal beliefs, non-responding or side effects lower the compliance and accelerate dropouts in established trauma therapy. Dynamic Ear acupuncture-supported Trauma Regulation (DESTaR) combines basic elements of trauma therapy with Ear-acupuncture. The DESTaR protocol consists of three steps. 1. A case formulation that follows basic principles of PTT. 2. Exposure supported by light application on the limbic area on the ear. The client’s reaction is monitored by VAS. 3. Treatment outcomes are measured by DESTaR assessment tools. We address the question if DESTaR is effective in treatment of PTSD.

**Method:** Review of DESTaR pilot studies.

**Result:** DESTaR pilot studies show positive effect in clients diagnosed with trauma related disorders.

**Conclusion:** Auriculotherapy can be integrated in first line methods of trauma therapy. However, controlled studies are needed.

### **3.9 RAC (Arterial Circulatory Reflex) and Cold Stimulation**

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#### **Abstract**

The RAC (Réflexe auriculo-cardiaque), also called VAS (Vascular autonomic signal) is a phenomenon discovered by Paul Nogier in 1966. First, he discovered that a mechanical ear point stimulation can induce a change of the pulse on the radial artery. This change does not affect the rhythm and the cardiac frequency. The radial pulse is perceived to become harder or softer. Thereafter, he found, that some physical skin stimulations apart from the ear, could also induce an arterial response on the radial artery. So far, this phenomenon has not been proved. In this study, the authors try to check clinically the reality of the phenomenon RAC using a cold stimulation on the belly.

#### **Keywords**

RAC; VAS; Signal de Nogier; système sympathique; stimulation thermique; Leriche; auriculotherapy

### **3.10 Psycho-emotional Pathologies: Childhood Wounds Auricular Treatment**

Bernard Bricot

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#### **Abstract**

Childhood wounds auricular treatment: Introduction, discovering the auricular points according to the morphotype. Pure cases, mixed cases, complementary treatments, conclusions. The wounds of childhood mark the morphotype of the person. It is on the basis of the morphotype that the auricular location of these wounds have been found. They occurred before the age of maturity of the prefrontal, they cannot be relativised and therefore turn permanently at the level of the archaic brain but also at the level of the basal ganglia which regulates muscle tone.

#### The five wounds (Lise Bourbeau):

- The wound of rejection
- The wound of abandonment
- The wound of humiliation
- The wound of betrayal
- The wound of injustice

They are found on the ear of laterality, but also on the contralateral ear in scar. We also find a prefrontal points but as a scar on the laterlaity ear as an organ point on the opposite ear.

Treatment of wounds:

- EFT
- Auriculotherapy
- PS: the emotions that can accompagny them (Sébastien Chatry)

### ***3.11 The Influence and Therapeutic Possibilities of Solfeggio Frequencies in Auriculotherapy on Emotional Disorders***

Stefanie Kocher

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#### **Abstract**

Solfeggio frequencies (SF), an ancient Gregorian musical scale, involve a set of tones that are believed to possess therapeutic properties including the promotion of physical, emotional, and spiritual healing. In auriculotherapy, combining SF with the reflex auriculo cardiaque (RAC) can support the diagnosis and therapy of emotional disorders. This narrative review aims to summarize the medical applications and possibilities of SF within auriculotherapy.

**Methods:** The author performed a synthesis of relevant literature using the search terms “Solfeggio, Frequencies, Resonance, Emotional disorders, Auriculotherapy” within the data bases “Pubmed” and “Google Scholar” as well as print media.

**References:** The main literature describes the use and therapeutical effects of SF in music therapy, less in low-level laser therapy and auriculotherapy.

**Discussion:** Currently, limited evidence supports the use of SF within auriculotherapy. However, there are some promising results showing beneficial effect of SF in the treatment of emotional disorders like anxiety, depression or sleep disorders. Case reports also described a prolonged treatment effect when using SF in auriculotherapy and in combination with permanent needles which needs to be further investigated using randomized clinical trials.

### ***3.12 The Microbiota-Gut-Brain Axis: Targeting Vagal Tone Through Vagus Nerve Stimulation in Auriculotherapy***

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#### **Abstract**

The gut communicates bidirectionally with the brain through the microbiota-gut-brain axis. A perturbation of this axis is involved in the pathogeny of irritable bowel syndrome (IBS) and inflammatory bowel diseases (IBD) which are biopsychosocial diseases. The vagus nerve (VN), a key component of the parasympathetic nervous system, can sense the microbiota,

transferring this gut information to the central nervous system which is integrated and generates an adapted or inappropriate response perpetuating a pathological condition of the gut. A dysbiosis is observed in IBS and IBD. Stress is involved in the pathogeny of IBS and IBD and modifies the gut microbiota, stimulates the sympathetic nervous system, and inhibits the VN. The VN has anti-inflammatory properties through its afferents and efferent fibers, activating respectively the hypothalamic-pituitary adrenal axis and the cholinergic anti-inflammatory pathway. The VN modulates intestinal permeability, which is perturbed in IBS and IBD. A reduction in vagal tone is observed in IBS and IBD. Monitoring vagal tone would be an interesting marker of the microbiota-gut-brain axis. Targeting vagal tone through vagus nerve stimulation, auriculotherapy, microbiota modulation, drugs activating the cholinergic system, hypnosis, meditation, cognitive behavioral therapy, deep breathing, and physical activity, could restore a homeostatic microbiota-gut-brain axis.

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### **3.13 Application of Body-Qi-Spirit Auricular Diagnosis and Treatment in Psychosomatic Diseases**

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#### **Abstract**

Psychosomatic disorders are a group of diseases closely related to psychological and social factors. Based on the exploration of the relationship between traditional Chinese medicine theory of emotions, psychosocial medicine, and Body-Qi-Spirit theory, this paper analyzes the formation and prevention of psychosomatic disorders, clarifies the forward-looking nature of traditional Chinese medicine thinking, and advocates the integration of Body-Qi-Spirit theory and Auricular diagnosis and treatment, based on the complementary clinical application. Drawing on clinical research in Auricular treatment of psychosomatic disorders over the past five years, this paper discusses and summarizes the practical application of Body-Qi-Spirit Auricular diagnosis and treatment in the diagnosis, treatment, and health benefits of psychosomatic disorders, and promotes the continuous improvement and popularization of the "Body-Qi-Spirit Auricular Diagnosis and Treatment" method.

#### **Research Team**

##### **Research Team Leader**

Jihong Liu, professor, chief physician, doctoral supervisor, currently the director of the Treatment and Prevention Center of Foshan Hospital of Traditional Chinese Medicine and director of the Prevention and Treatment Department of the Eighth Clinical Medical College of Guangzhou University of Traditional Chinese Medicine, engaged in clinical treatment of auricular points, basic research and teaching training for more than 30 years. Doctoral tutor of integrated traditional Chinese and Western Medicine in Guangzhou University of Traditional Chinese Medicine, and the master supervisor of Acupuncture and Massage in Southern Medical University, now serving as the vice-chairman of the External Treatment Branch of the Chinese Association of Traditional Chinese Medicine, the vice-chairman of the auricular point Diagnosis and Treatment Professional Committee of the Chinese Association of Acupuncture and Western Medicine, the chairman of the auricular point professional committee of the Guangdong Association of Acupuncture and Western Medicine, and the vice-chairman of the treatment and prevention Professional Committee of the Guangdong Association of Integrated Chinese and Western Medicine.

##### **Research Team Member**

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### ***3.14 Auriculo Diagnostic and Auriculo-therapy of Psychological Damage and Trauma in the Soul. Development of the Finding of the Psychosomatic Points***

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#### **Abstract**

Emotional traumas can have a lasting negative impact on the self-healing process of "ordinary" illnesses, as they trigger energetic Yin/Yang imbalances. A differential diagnostic distinction from "typical" sources of disruption must be considered. Our practical experiences attest that successful acupuncture therapy should often be combined with herbal substances. The presentation delves into the profound disturbances that an emotional trauma can trigger. Through an intensified patient history, we can even trace the timeline of events using the identified trauma key acupuncture point (negative Qi as an indicator) and explore the circumstances of trauma development with psychological sensitivity.

During the presentation and live workshop, we discuss the treatment with acupuncture, recommended flower essences, TCM herbs, and homeopathy. We also address, even though critically, esoteric approaches such as shamanic soul retrieval and family constellations.

Lastly, the soul is something special! It is essential to differentiate emotional traumas from psychosomatic "disturbances" like envy, resentment, aggression, self-aggression, greed, hatred, hysteria, and others. In this context, the localization of corresponding acupuncture points is highly beneficial.

### ***3.15 Auricular Therapy Combined with Cognitive Behavioral Intervention for Depression after COVID-19: A Case Report from Zhengzhou, China***

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#### **Abstract**

**Background:** Depression is one of the sequelae of Long COVID and severely affects the quality of life of survivors.

**Case presentation:** In this case report, a 54-year-old female patient diagnosed with depression after COVID pneumonia was treated with auricular therapy combined with cognitive behavioral intervention. 4 weeks later, all the scores of HAMA, HAMD, SCL-90, Pittsburgh Sleep Scale and Somatization symptom Scale were significantly improved compared to the initial results. In addition, the patient's depressive symptoms and accompanying symptoms disappeared or relieved. The patient was very satisfied with the results of the treatment.

**Conclusion:** This case suggests that auricular therapy combined with cognitive behavioral intervention may be an effective treatment option for depression after COVID pneumonia. The mechanism may be related to the auricular vagal nerve stimulation and theoretical system of Traditional Chinese medicine.

### Keywords

Depression; COVID-19; auricular therapy; cognitive behavioral intervention

### **3.16 Auriculotherapy with a Double Effect**

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### Abstract

This lecture is about the effect of acupuncture with the combination of an exactly matching flower whose resonance exactly matches the meaning of the acupuncture point.

### **3.17 Laser in Diagnosis and Therapy: Fascinating Results by the seven Resonance-Frequencies According to Paul Nogier et Frank Bahr**

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### Abstract

Laser acupuncture (LA) is a synthesis of the treasures of so called Traditional Chinese Medicine (TCM) and modern science. Laser acupuncture is the use of nonthermal, low-intensity laser irradiation to stimulate acupuncture points on the body or ear. LA is a safe and non-invasive alternative to traditional acupuncture. Laser is a unique form of light; it is light of only one wavelength (color) and in contrast to all other sources of light a coherent movement.

These physical properties of the laser enable it to be used very precisely for diagnostics and therapy. The German physicist F. A. POPP describes the acupuncture points in general as transmitters and receivers of electromagnetic signals<sup>1</sup>. Laser is physically an electromagnetic

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<sup>1</sup> POPP, F.-A. Deutungsversuche zur Akupunktur. Der Akupunktuarzt/Aurikulothérapeut, DZA, 5 (1979), S. 118.



(highly pure/ “coherent”) oscillation, which according to the POPP concept fits like a key into the acupuncture lock.

Worldwide the most commonly used resonances are the seven resonances by Paul Nogier and the corresponding seven basic resonances by Frank Bahr<sup>2</sup>.

Indication	Original Nogier	Higher Octave	Bahr
Disorganization; detection of foci	A 2.28 Hz	A´ 292 Hz	5
Nutritive; inner organs	B 4.56 Hz	B´ 584 Hz	4
Mesenchymal, “orthopedic”	C 9.12 Hz	C´ 1168 Hz	3
Tragus, laterality, sympathetic	D 18.25 Hz	D´ 2336 Hz	2
Bone marrow, peripheral nerves	E 36.50 Hz	E´ 4672 Hz	1
Denta-oral-maxillary region	F 73.00 Hz	F´ 9344 Hz	7
Psychosomatic, cortex, eyes	G 146.00 Hz	G´ 18 688 Hz	6

The values of these resonances for diagnostic and treatments will be discussed using various examples.

### Keywords and Abbreviations

LASER; acupuncture; laser-acupuncture (LA); low-level-laser-therapy (LLLT); photobiomodulation (PBM); RAC (Dynamic Puls Testing); resonances

### 3.18 Ear Acupuncture as An Adjunct to In-patients with Anorexia Nervosa. Two Qualitative Studies

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#### Abstract

**Background:** Persons with Anorexia Nervosa have a high co-morbidity with anxiety, obsessive compulsive disorder (OCD), self-harm, depression and posttraumatic stress disorder (PTSD). The mortality rate is high and in severe cases the hospitalization periods can be several months.

**Methods:** We will present results from two qualitative studies conducted with patients receiving a simple, standardized type of ear acupuncture (NADA) twice a week plus on demand as an adjunct to usual care in a highly specialized ward for Anorexia Nervosa. Data was collected in 62 interviews with 33 patients.

**Results:** Ear acupuncture was described as a framework for rest, relaxation, and reflection, as a pause button and a lifeline during the recovery process. Both psychological and physiological effects were perceived. Patients appreciated this non-verbal and non-pharmacological adjunct to the strict treatment program. Anxiety decreased and eating became easier.

**Conclusion:** When anxiety is intense and sleep problems severe, and pharmaceuticals have a modest effect, non-pharmacological methods can be interesting supplements in ordinary care

<sup>2</sup> BAHR F.R. Systematik und Praktikum der wissenschaftlichen Ohrakupunktur für Fortgeschrittene (Aurikulomedizin III. Stufe) Skriptum 1998

increasing both patients' participation and subjectively perceived mental health. Standardized auricular acupuncture can have a palpable effect, even in severely ill patients who are in a stressful and challenging treatment.

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### ***3.19 Auricular Trauma Protocol (ATP) in the Mitigation of Extraordinary Stress and Its Psychologic and Somatic Manifestations***

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#### **Abstract**

In 2012, I presented the newly developed HMI Auricular Trauma Protocol (ATP) at GLEM VII on the Nervous System and Neurologic Disorders in Lyon. This protocol was developed at the request of the US Military for the treatment of Post-Traumatic Stress Disorder (PTSD).

The ATP consists of the points: Hypothalamus, Amygdala, Hippocampus, and Prefrontal cortex, adding Point zero and Shen men for further centering and autonomic balancing.

In this presentation, I will report on our experience using the ATP over the past ten years. I will present the newer ATP Basic I and II modified ATP protocols for sleep, pain, stress, and dependency clinical presentations.

What we designed as a neurological treatment turned out to have major effects on sleep, pain, stress mitigation, and pharmacologic dependencies. The neurophysiology and the relationship of these same limbic structures underly much of what is considered the domain of Psychology. This includes affective behavior, mood, anxiety, depression, chronic pain, disturbed sleep, stress overload, and pharmacologic dependencies. The ATP and its derivatives address the subcortical and brainstem aspects of feeling and emotion in a novel and potent way. This is where auriculotherapy meets psychology.

### ***3.20 Place of Auriculotherapy in the Management of Cancer Patients, from a Cohort Study in Integrative Medicine Conducted in the Institut Rafaël***

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## **Abstract**

The objectives of the study were:

- to describe the place of auriculotherapy in the coordinate healthcare pathway
- to assess the impact of the auriculotherapy on a few symptoms.

**Methods:** The auriculotherapy is proposed to the patients with other complementary health approaches in a coordinate way to treat the whole person. All the symptoms are collected upstream before a proposal of pathway is given to the patient.

**Results:** The size of the sample was 74 patients (December 2020 to February 2023). The main symptoms treated in auriculotherapy are hot flashes (22%), pain (14%), anxiety (9%) and sleep disorders (9%). The data analysis shows an impact on the decrease of frequency, intensity or quality of life (figures 1-4). The auriculotherapy forms part of a general pathway including other interventions of health care providers as psychology (54,9%, figure 5).

**Discussion:** The role of these other approaches could impact the efficacy of the auriculotherapy (reflexotherapy, neurofeedback, psychotherapy, sophrology, yoga, ...). These interactions should be study.

**Conclusions:** Auriculotherapy helps to reduce frequency and severity of the hot flashes, pain anxiety or sleep disorders.

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### **3.21 Application and Curative Effect of Chinese Acupuncture in Auriculotherapy**

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## **Abstract**

Traditional Chinese medicine focuses on the balance of YIN and YANG in the human body, which is the foundation of curing diseases including psychological disease, in Chinese medicine in the past thousands of years. Finding a systematic method to achieve this ultimate balance in the human body has become the effective solution in the treatment of the

psychological disease. The role of the two channels of Ren and Du are particularly important at the farthest end of the human body.

The liver depression and the Qi stagnation will induce the gallbladder dampness, which manifests various symptoms of depression. The treatment should start from the liver and the gallbladder, combining with Shenmen, the distal Ren vessel of the toes and the Du vessel of the heel, and the neck. These six acupoints are treated as the basic acupoints. Other auxiliary acupoints are introduced basing on unique characteristics of individual patients. If the depression is severe, more acupoints can be included, i.e. fingers, wrists, elbows, shoulders, ankles, knees, groins, etc., along the pathogenic meridians passage. This method of analogy has achieved unexpectedly practical results.

### **3.22 Vagus Nerve Stimulation in Drug Resistant Restless Legs Syndrome: Rationale and Preliminary Data**

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#### **Abstract**

**Introduction:** Vagus nerve stimulation (VNS) could modulate brain's dopaminergic and sensory-motor pathways. We hypothesize that it might be useful in drug-resistant restless legs syndrome (RLS).

**Materials and Methods:** We studied the effects of transauricular VNS (taVNS) in fifteen patients with severe drug-resistant RLS (mean IRLS  $31.9 \pm 2.9$ ). After 8 initial weekly 1-hour taVNS sessions in the hospital, patients were trained in self-use of taVNS at home and followed for 6 months. The International Restless Legs Rating Scale (IRLS), Quality of Life (RLSQOL), and Hospital Anxiety and Depression Scale (HAD) were assessed.

**Results:** At 6-month, 13/15 patients continued to use weekly taVNS. The severity of symptoms decreased significantly (IRLS  $24.6 \pm 5.9$  at 8 weeks and  $22.2 \pm 9.32$  at 6 months,  $p = 0.0005$ ). Quality of life improved significantly (baseline  $49.3 \pm 18.1$  vs 6 months  $65.66 \pm 22.58$   $p = 0.0005$ ). Anxiety and depression also improved: initial HADA  $8.9 \pm 5.4$  vs 6 months  $7.53 \pm 4.42$  ( $p = 0.029$ ) and initial HADD  $5.2 \pm 4.5$  vs 6 months  $4, 73 \pm 4.44$  ( $p = 0.03$ ). No adverse events were reported.

**Conclusion:** taVNS therapy shows promise in patients with severe drug-resistant RLS.: Randomized controlled trials are needed.

### **3.23 Clinical Study on Auriculotherapy Efficiency on Fibromyalgia Symptoms**

Bernard Deffontaines <sup>\*</sup>, Michel Barberis Bianchi, Pauline Vandromme

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### **Abstract**

We created a Web Application specifically for a study on the effectiveness of Auriculotherapy on the symptoms of Fibromyalgia. It can also be used for other pathologies.

The analogy of certain signs of Fibromyalgia with those found in psychiatric pathologies led us to focus more particularly on the cerebral elements involved and their auricular projection zones. A protocol was applied to 84 people diagnosed with fibromyalgia.

The analysis of the data collected answers our questions:

- Would there be a reduction in symptoms with auriculotherapy? Yes
- Is a standard protocol applicable in all cases? Perhaps, to be validated.
- Are there obstacles accompanying or amplifying the pain? Some common
- what could be avenues for future research? Multidisciplinary

### **Keywords**

Auriculotherapy - Fibromyalgia - Chronic pain - GLEM - TNM Non-drug therapies - INM Non-drug interventions

In 2021, following the announcement of this Symposium on “Auriculotherapy and Psychiatry” with Michel Marignan, we considered carrying out a study on the possible contribution of Auriculotherapy in patients suffering from Fibromyalgia, which could, perhaps, be lead to the creation of a treatment protocol.

We formed a team for this achievement with Michel Barberis Bianchi and Pauline Vandromme and obtained the participation of GLEM teachers, numerous auriculotherapist colleagues trained by GLEM and the support of the French-speaking fibromyalgia associations.

It was necessary to create a Web application to represent the data in images.

Fibromyalgia is defined as a syndrome made up of chronic symptoms, including widespread pain, fatigue, sleep disorders, cognitive disorders and numerous somatic complaints.

INSERM in 2020 suggests that psychological factors contribute to significant stress which could consequently be at the origin of the changes observed in the brain pain pathways. Stress and pain regulation systems are very interconnected at the brain level. Fibromyalgia could therefore be a sign of a dysfunction in brain areas responsible for perceiving and analyzing pain and find its origin in a failure to adapt to the environment.

It is an extremely complex syndrome, most likely arising from various physiopathological mechanisms, explaining on the one hand the anxiety-provoking medical wandering for fibromyalgia patients and on the other hand the feeling of helplessness of practitioners in the face of this pathology.

Its treatment is symptomatic: medication, physical exercises and psychological support. (shouldn't we add “dietary advice”?)

**Objectives:** What is the place of auriculotherapy in improving the symptoms of fibromyalgia?

We tried to answer this question by creating a protocol focused on brain elements.

**Protocol and Methods:** The protocol requires two sessions spaced 4 weeks apart followed one month later by an evaluation by telephone. The search for points is done with an ELECTRIC DETECTOR.

The diagnosis of fibromyalgia must have been made by a rheumatologist, an internist, the treating physician or a pain center. Inclusion criteria and exclusion criteria were defined.

**Conclusion:** The various graphs above give the impression of improvement in symptoms according to those received. It is striking to note that the appearance of the first symptoms of fibromyalgia is often (no statistical exploration in this study, nor elsewhere to our knowledge) concomitant with physical and/or psycho-emotional trauma. We are aware of certain biases in our approach:

- diversity of training, experiences and prejudices of practitioners;
- uncodified treatments (each treated in their own way);
- we had no control over how we recorded pain feelings;
- some used the RAC after the electrical detection to choose the points to treat;
- availability, empathy, the caregiver-patient relationship are non-measurable;
- we had not anticipated the exclusivity of auriculotherapy over other non-drug interventions.

Our contribution with this study is on the side of relieving the effects of fibromyalgia. Perhaps we would be in stress management.

### **Research Direction Suggestions**

- Aim for an overall balance by taking into account diet, physical exercise, stress management and the provision of relaxation/recovery periods.
- Explore the environment of the appearance of the first symptoms of fibromyalgia, and Post Traumatic Stress Disorder
- A postural assessment due to the perception in the study of auricular manifestation of the pontine and bulbar reticular formation, which can lead to dysfunction of muscle tone.
- For auriculotherapy, treat the Obstacles first
- A quarterly visit is desirable.

The complete study was carried out in the form of a dissertation and remains available on the GLEM website: [auriculoformation.fr](http://auriculoformation.fr).

All the protocols carried out are at your disposal at GLEM to continue.

### ***3.24 The Psychic Injuries in the Case of COVID Diseases with the Corresponding Psychic Blockage Points and the Exact Matching Flowers***

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#### **Abstract**

In this lecture I will talk about the emotional consequences of the Covid 19 pandemic with its different effects including the Long- and Post-Covid Syndrome and the possibilities to work

against it with acupuncture. In particular, the psychic blockage points on the ear with their exactly matching flower essences, but also the search for the suffered trauma and the corresponding flower essence are in the foreground here. This approach has proven very successful in the last months in my practice with the many patients with multiple psychological and physical disorders after a covid illness, after a drastic loss or also due to the restrictions in daily life.

### **3.25 Application of Auricular Diagnosis and Treatment Technology in China**

Sixian Zhou, Jihong Liu

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#### **Abstract**

Through the review of auricular literature in China and the investigation and investigation of the application of auricular diagnosis and treatment in some domestic hospitals, clinics and health institutions, the application of auricular diagnosis and treatment technology in China in the past ten years is understood. From the three aspects of auricular diagnosis, treatment and health care, especially the diagnosis and treatment of common diseases are analyzed statistically. To reflect the application of auricular diagnosis and treatment technology in China. In this paper, the application of auricular diagnosis and treatment technology is summarized, indicating that the auricular diagnosis and treatment technology with Chinese characteristics has great application and development space in the field of medical treatment, nursing, rehabilitation and health care. It can play a certain beneficial role in disease prevention and control, health care, and is accepted and loved by the Chinese people.

#### **Research Team**

##### **Research Team Leader**

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### **3.26 Rationale and Implementation of Vagus Nerve Biofeedback for Mental and Physical Health of Ukrainian Forced Migrants**

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#### **Abstract**

Major causes of death include coronary heart disease (CHD), cancer, stroke, COPD and diabetes. Adding chronic pain, anxiety and depression, covers major health care burdens.

The Russia-Ukraine war caused millions of Ukrainians to leave their homes, interrupting health-care for such diseases or causing them. Is there one common protective factor which is epidemiologically related to lower risk of such diseases and which inhibits pathophysiological processes?

Can this protective factor be activated at no cost for such emergency situations?

The vagal nerve meets these criteria. Its activity is indexed by heart-rate variability (HRV) which predicts a lower risk of these diseases and better prognosis in such conditions (e.g., cancer, CHD). The vagus inhibits inflammation and sympathetic activity, which otherwise contribute to these diseases. Finally, evidence shows that vagal activation via HRV-biofeedback, a treatment with little or no costs, has positive clinical effects on some of these conditions (e.g., chronic pain, anxiety, CHD).

My talk will cover these issues with scientific evidence, and will provide an example in which we taught Ukrainian migrants in an Israeli humanitarian clinic, to perform HRV-biofeedback, and will show its effects on pain, distress, HRV and blood pressure. Activating the vagal nerve may help wandering people.



### **3.27 The Auriculotherapy Certification Institute**

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#### **Abstract**

The French physician Dr. Paul Nogier wrote his text *From Auriculotherapy to Auricular Medicine* to provide a more in-depth, embryological orientation to his seminal work, whereas *From Auriculotherapy to Ear Reflexology* seeks to provide guidance in the use of auricular acupressure by lay practitioners who are not medical doctors. Like foot and hand reflexology, tactile stimulation of the surface on the external ear is utilized to alleviate discomfort in other parts of the body. First discovered by Paul Nogier in the 1950's, the external ear corresponds to a map of the physical body in an inverted fetus pattern. A double-blind study at UCLA statistically demonstrated the relationship of musculoskeletal pain to certain areas of the ear, but not other auricular areas. In developing Ear Reflexology, much of the complexity of Latin anatomical terminology previously used in medical textbooks has been reduced to simpler terms more familiar to the general public. Distinctive features of the outer ear anatomy and different landmarks on the external ear are described with easy-to-understand, commonly used words. This presentation will provide guidance in the location of ear reflex points used to alleviate pain and stress in multiple areas of the human body.

### **3.28 Ear Acupuncture in Addiction, Anxiety, Depression and Sleeping Problems: Evidence, Visions, and Experiences from Psychiatric Care**

Kajsa Landgren

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#### **Abstract**

Anxiety, depression, addiction, stress and sleeping problems are common and affect all dimensions of life. The effect of medication is modest with severe side effects. It is essential to find a safe and effective treatment that reduces suffering. Complementary methods like ear acupuncture are interesting options. I will focus on evidence, clinical experiences, and implementation of ear acupuncture in psychiatric care. I will also present results from two qualitative studies where interviews were conducted with patients receiving ear acupuncture as an adjunct to usual care in a highly specialised ward for Anorexia Nervosa. Another interview study with health care professionals who use ear-acupuncture in different psychiatric settings report how they perceive ear acupuncture as a valuable tool. Utilization rate of ear acupuncture in a psychiatric ward is reported, and a survey reports how many Swedish psychiatric wards that use ear acupuncture. Decision-makers have been interviewed about how they decide about implementation of ear acupuncture in psychiatric care. I argue that ear acupuncture is a safe, effective and cost-effective intervention, highly appreciated by patients. Therefore, I argue that it is reasonable to implement ear acupuncture in publicly funded care so that more people can benefit from it.

Kajsa Landgren, assistant professor, Lund University, Sweden.

Kajsa is a registered nurse, specialized in psychiatry. After 25 years as an acupuncturist in a private clinic, she is now a senior lecturer and researcher at Lund University. Her doctoral thesis (2011) included articles on acupuncture in infants with colic. Recent projects include research on patients and health care professionals' experiences of standardized ear acupuncture (NADA), and how complementary medicine like ear acupuncture is implemented in psychiatric care in Sweden. Kajsa teaches ear acupuncture and has written textbooks on ear acupuncture: "Öronakupunktur" (2004, in Swedish), "Ear Acupuncture – a practical guide" (2008, in English, Churchill Livingstone, Elsevier) and the new book ("NADA. Öronakupunktur vid beroende och psykisk ohälsa" about the standardized five-point-protocol NADA used in addiction and psychiatric disease (2022. In Swedish, under translation into English.)

### **3.29 The Shenmen and Cosmonaut Points**

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#### **Abstract**

The Shenmen Point is an auricular acupuncture point that is also known in France as the Cosmonaut Point. It is widely utilized therapeutically for its property of reducing stress. In some ways it is a controversial point. Differences of opinion exist regarding the most appropriate name of the point, who discovered it first, its location within the triangular fossa, its best method of detection, its best method of stimulation, its actions, its indications, its contraindications, its therapeutic effects, and even its very existence. Furthermore, given the extent of controversy concerning the Shenmen and Cosmonaut points, one may reasonably question if they represent the same point, or two separate points. The aim of this keynote talk will be to review the similarities and differences of opinion regarding the Shenmen and Cosmonaut points, drawing mainly from French, German, Chinese, and American sources. The clinical implications of these comparisons will be summarized.

### **3.30 The Contribution of Qingdao Auricular points Tang to Auriculotherapy in the Last Decade – Clinical Application and Dissemination. Teaching and Tools**

#### **Educational Practice and Thinking of Auricular Diagnosis and Treatment**

Han Li <sup>1,2,\*</sup>, Cheng Kai <sup>2,3</sup>, Zhou Liqun <sup>1,2</sup>, Zhao Baixiao <sup>1,3</sup>, Wang Zhongyu <sup>1</sup>, Chen Fangfang <sup>1</sup>, Yang Danchen <sup>1</sup>

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### **Abstract**

New Medicine in response to the new scientific and technological revolution reform. Combined with auricular diagnosis and treatment, and my investigation, it is found that the college education of auricular diagnosis and treatment lags the clinical development of auricular diagnosis and treatment. The learning period of the courses is short, and the teaching content needs to be systematized further, and many other problems. There are some suggestions, such as to increase virtual reality technology for experiential teaching, and to explore a new model course combining theoretical teaching, classroom offline training, student community free clinic, and social practice teaching, and to build a social practice big data sharing platform. What is more, we need realize the mutual communication between patients and social practice students, and to create a closed-loop evaluation of patient feedback in social practice. Based on this, to create a public class for the society. We will develop precision medicine and accelerate the intelligent, digital, and integrated innovation of ear acupoint diagnosis and treatment instruments in combination with translational medicine and intelligent medicine. Ear acupoint diagnosis and treatment has many application scenarios, such as health care, rehabilitation and elderly care, military aerospace, wearable devices, artificial intelligence and so on.

Using 5G + VR technology to realize the virtual scene and virtual imitation ear model based on cloud computing. It shows: the ultimate three-dimensional display of the anatomical parts, the basic marking line and the ear points, presenting vivid and realistic ear acupoint scenes, as if being in an ear, which increasing the immersive immersion and viewing experience. At the same time, the relevant supplement and construction of ear experience points, and the three-dimensional display of the standard innovation of ear acupoint, will provide support for ear-related courses, and provide more accurate positioning standards for the medical treatment, teaching and scientific research of the ear acupoints, and creating more consistent language for ear-related academic communication. This will serve as an important basis for the work of international standardization of Auricular Diagnosis acupoints.



**Figure 1** Example of teaching platform construction with 5G + VR technology.

### **3.31 Porges's Polyvagal Theory Seen Through the Looking Glass of Nogier's Three Phases:**

Howard J. Wu

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#### **Abstract**

Polyvagal theory is Stephen Porges's interpretation of stress responses of the Autonomous Nervous System that emerged from an evolutionary hierarchy. Paul Nogier developed his three phases of Auricular reflexes inspired by his appreciation of embryological development of the ear. And as the saying goes "Ontology recapitulates Embryology."

Assuming both theories are true reflections of the neuroanatomy of the auricle. One should expect to see glimmers of each respectfully as we explore the mapping and reactive response in the Auricular.

### **3.32 Auriculotherapy in Stress and Anxiety in University Population**

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#### **Abstract**

In today's society, the population lives with stressors that can cause stress and anxiety. It is known that Auriculotherapy is an effective therapy against stress and anxiety and helps to reduce its severity, so this study aims to analyze the feasibility and effectiveness of auriculotherapy in the management of stress and anxiety in a university population. This is a pilot study, randomized with university students who had symptoms of stress and anxiety, divided into two groups, a control group and an intervention group with the NADA protocol (National Acupuncture Detoxification Association), whose points are: Shen Men, Kidney, Liver, Lungs 1 and 2, and Sympathetic; in four sessions during four weeks, using the Perceived Stress Scale (PRES-10) and the Manual for the State-Trait Anxiety Inventory (STAI) before the first session of auriculotherapy and in the last session. As a result, despite the limitations of the sample due to the closure of the university due to the worsening of the covid19 pandemic, auriculotherapy corroborated to an improvement in stress and anxiety in the university population. It is concluded that Auriculotherapy is a viable and effective therapeutic option in the management of stress and anxiety.

### **3.33 Auriculotherapy in Pregnant Women Up to 20 Weeks of Gestation**

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### **Abstract**

Pregnancy is a natural physiological event, which causes several body changes, bringing a series of discomforts arising from signs and symptoms, with varying tolerances and intensities. Among the most common symptoms are nausea and vomiting, which represent one of the major discomforts of pregnancy, causing a decrease in the quality of life and well-being of the mother-child binomial. The objective of the study was to evaluate the safety and feasibility of an auriculotherapy protocol in the treatment of nausea and vomiting in pregnant women up to 20 weeks of gestation. This is a series of four cases on an Auriculotherapy protocol in pregnant women up to 20 weeks of gestation, the points were used: Shen Men, Stomach and Cardia. The PUQE SCORE (Pregnancy Unique Quantification of Emesis) was performed before the auriculotherapy sessions. As a result, an improvement in the symptoms of nausea and vomiting was identified, which led one pregnant woman to continue the sessions for 6 weeks and three pregnant women for 8 weeks. Also, auriculotherapy contributed to the improvement of anxiety and stress. It is concluded that Auriculotherapy has the potential to be a viable and safe option during pregnancy.