An unusual complication related to acupuncture point catgut embedding treatment of obesity

Yung-Ting Chuang,1 Tzong-Shiun Li,2 Tze-Yi Lin,3 Chih-Jung Hsu1

ABSTRACT
Treatment of obesity by embedding catgut in acupuncture points has a satisfactory therapeutic effect in many patients. Even though results of its effectiveness are mixed, serious complications are rarely reported with this Chinese traditional therapy. Here an unusual complication of the treatment is reported: multiple tender subcutaneous nodules developed where the catgut was embedded over the lower abdomen and both medial thighs 1 month after treatment. Clinicians should be alert to this possible cause of a rather strange presenting physical sign.

INTRODUCTION
Acupuncture point catgut embedding has been used for thousands of years in traditional Chinese medicine for the treatment of several conditions. Although it is regarded as safe, we present an unusual complication that occurred in the treatment of obesity: multiple tender subcutaneous nodules developed over the lower abdomen and both medial thighs 1 month after embedding the catgut. Her medical history did not include any systemic disease and she had not recently started any new drug. Our clinical impression was of foreign body granuloma, and in order to establish the diagnosis, and in particular to rule out iatrogenic infection, we arranged further investigation.

INVESTIGATIONS
Skin excisional biopsy and tissue cultures for bacteria, fungus and mycobacterium were performed. The histological report was of degenerative, individual or clustered, thread-like eosinophilic foreign material surrounded by localised mixed acute and chronic xanthogranulomatous inflammatory infiltrates with evident foreign body reaction figure 3. Special stains for infectious organisms, such as acid-fast stain, Gram stain, periodic acid–Schiff stain and Grocott’s methenamine silver stain were all negative. Tissue cultures for bacteria, fungus and mycobacterium were negative.

OUTCOME
These tender and pruritic nodules on her lower abdomen and both medial thighs regressed spontaneously with postinflammatory hyperpigmentation. The appearance 6 months later is shown in figures 1 and 2.

DISCUSSION
Acupuncture point catgut embedding has been used for thousands of...
years in traditional Chinese medicine for the treatment of perimenopausal syndrome (climacteric syndrome),1 chronic urticaria,2 depressive neurosis, refractory insomnia,3 Alzheimer’s disease, obesity, sciatica, ulcerative colitis, facial paralysis and trigeminal neuralgia.

Treatment of obesity with embedding catgut in acupuncture points has a satisfactory therapeutic effect in many patients. Even though results of its effectiveness are mixed, serious complications are rarely reported with this Chinese traditional therapy. We believe this is the first report of this unusual complication in which multiple tender subcutaneous nodules developed in the sites where catgut had been embedded 1 month previously.

Iatrogenic infection during the procedure must be the first consideration of doctors examining such cases. A differential diagnosis, including foreign body reaction, panniculitis, or atypical infection, might be considered. Infection is generally the most likely side effect in patients receiving an invasive procedure, and in the absence of systemic upset the possibility of a foreign body reaction cannot be ruled out.

When suture granuloma is suspected clinically, ultrasonography has been reported to be effective for diagnosis.4 Pathologically, the suture material is birefringent under polarised light.5 The correct diagnosis always depends on careful history taking and histopathological findings.

From our experience in this case, clinicians should remember the possibility of the presence of foreign body granuloma due to catgut embedding treatment in the differential diagnosis of skin conditions with this somewhat strange distribution.

1Department of Dermatology, China Medical University Hospital/China Medical University, Taichung, Taiwan, Republic of China
2Department of Plastic Surgery, Division of Plastic Surgery, China Medical University Hospital/China Medical University, Taichung, Taiwan, Republic of China
3Department of Pathology, China Medical University Hospital/China Medical University, Taichung, Taiwan, Republic of China

Contributors TSL: patient follow-up, CJH: instructor, YTC: manuscript, TYL: pathology explanation.

Correspondence to Chih-Jung Hsu, Department of Dermatology, China Medical University Hospital/China Medical University, No.2, Yu-Der Road, Taichung City 40447, Taiwan, Republic of China; dermahsucj@gmail.com

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Figure 2 (Left) A bean-sized tender erythematous subcutaneous nodule on the lower abdomen. (Right) This nodule regressed spontaneously leaving mild postinflammatory hyperpigmentation 6 months later.

Figure 3 Degenerative, individual or clustered, thread-like eosinophilic foreign material engulfed and surrounded by multinucleate foreign body giant cell. (haematoxylin and eosin stain; original magnification ×400).
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