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## Traditional Chinese Medicine Acupoint Massage Combined with Specialized Nursing Care for Insomnia in a Lung Cancer Patient: A Case Report (Postprint)

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### Abstract

**Objective:** To summarize the therapeutic experience of one case of lung cancer complicated by insomnia treated with traditional Chinese medicine acupressure combined with specialized nursing care. **Methods:** By employing the non-invasive TCM technique of acupressure to exert specific force on cutaneous acupoints and meridians, penetrating from the exterior to the interior, thereby promoting blood circulation and nerve repair and regeneration, alleviating patient tension and anxiety, and producing a sedative effect to improve insomnia; combined with specialized nursing interventions including oxygen therapy care, respiratory tract management, emotional care, and dietary management, successfully relieving dyspnea, cough, and sputum production. **Results:** Through meticulous nursing care, the patient's symptoms improved and the patient was discharged after 14 days. **Conclusion:** The appropriateness of the nursing methods was evaluated; acupoint massage can divert patient attention, achieve pain relief effects, improve quality of life, and is safe, free of side effects, and cost-effective.

### Full Text

## Experience of Acupressure Combined with Specialized Nursing in the Treatment of Insomnia in a Lung Cancer Patient: A Case Report

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## Abstract

**Objective:** To summarize the clinical experience of treating a lung cancer patient with comorbid insomnia using traditional Chinese medicine (TCM) acupressure combined with specialized nursing care. **Methods:** Non-invasive TCM acupressure was applied to stimulate acupoints and meridians on the skin surface with appropriate force, working from the exterior to the interior to promote blood circulation and nerve repair, alleviate tension and anxiety, and produce sedative effects to improve insomnia. This was combined with specialized nursing interventions including oxygen therapy care, respiratory management, emotional care, and dietary management to successfully relieve dyspnea, coughing, and sputum expectoration. **Results:** Through meticulous nursing care, the patient's symptoms improved and she was discharged after [DAYS] days. **Conclusion:** This nursing approach proved appropriate. Acupoint massage can divert patients' attention, relieve pain, and improve quality of life. The method is safe, non-toxic, and cost-effective.

**Keywords:** lung cancer; insomnia; acupressure; specialist care

## Introduction

Lung cancer has become one of the most common malignant tumors, with its incidence showing a clear upward trend in China [1]. Insomnia comorbid with lung cancer severely impacts patients' quality of life and accelerates disease progression [2]. Chronic sleep deprivation can induce various psychological problems such as anxiety, irritability, mental tension, and emotional volatility, which may eventually develop into depression and anxiety disorders. Concurrently, it compromises immune function, leaving the body more vulnerable to pathogenic invasion and various diseases. Current clinical treatment of insomnia primarily relies on Western medications, which easily produce side effects including drug dependence and addiction [3]. Traditional Chinese medicine represents one of the effective methods for preventing and treating insomnia clinically, significantly increasing sleep onset time and improving sleep quality [4]. In recent years, mechanistic research on TCM interventions for insomnia has deepened [5], and the preparation of TCM insomnia syndrome models has become important in insomnia mechanism research [6]. As a traditional TCM nursing technique that can be independently performed by nursing staff, acupressure offers advantages of convenience and safety in treating insomnia [7]. The massage techniques are simple, facilitating health education by clinical nurses. For patients, acupressure is easier to master and learn, and treatment delivery is not limited by location [8].

## Case Report

A 69-year-old female patient was admitted on [DATE] with a diagnosis of lung cancer. She had a history of bilateral knee osteoarthritis for 5 years. The main reason for admission was intermittent coughing for 3 months and dysphagia for 1 month. On examination, she exhibited post-exertional dyspnea, occasional cough with white, viscous sputum that could be expectorated, no hemoptysis, poor appetite with tolerance for semi-liquid foods, poor sleep, normal urination, decreased bowel movements, and recent weight loss of 5 kg. Laboratory tests showed: complete blood count + CRP: white blood cells  $9.8 \times 10^9/L$ , red blood cells  $3.12 \times 10^{12}/L$ , hemoglobin 89 g/L, hematocrit 27.8%, CRP 64.3 mg/L. Chest CT revealed tracheal occupancy with multiple metastatic tumors in both lungs.

**Treatment Protocol:** The patient underwent DSA-guided esophageal stent placement and upper gastrointestinal imaging. For retrosternal pain, she received Bucinnazine Hydrochloride injection 100 mg intramuscularly, and Lofexidine Sustained-release Tablets 2 tablets orally every 12 hours. She also received 100 mL of 0.9% sodium chloride injection + Omeprazole Sodium for injection 40 mg intravenously to inhibit gastric acid, and Mosapride Citrate Tablets 5 mg orally three times daily to promote gastrointestinal motility. TCM treatment included oral herbal decoction to ventilate the lungs, relieve cough, and dry dampness to resolve phlegm. External TCM therapies included acupoint plastering at Feishu (BL13) to ventilate the lungs and relieve wheezing.

**Acupressure Intervention:** The patient could assume sitting, supine, or prone positions to relax. The following acupoints were selected: Taiyang (EX-HN5), Yintang (EX-HN3), Baihui (GV20), Shenmen (HT7), Yongquan (KI1), Zusanli (ST36), Sanyinjiao (SP6), and Neiguan (PC6). Technique: Using the thumb pad, the nurse applied even, gentle pressure to each acupoint until the patient experienced soreness, numbness, distension, or pain. The pressure was uniform, gentle, and maintained at a tolerable level for the patient. Taiyang and Yintang belong to the extraordinary acupoints; massage promotes qi and blood circulation in the head. In TCM theory, Yintang regulates spirit, governs the Du meridian, and modulates local qi and blood [9]. Baihui and Yintang belong to the Du meridian (an extraordinary meridian). These acupoints are yang in nature yet contain yin within yang, connecting yin and yang throughout the body and effectively regulating the body's yin-yang balance according to natural patterns [10]. The combination of Taiyang, Yintang, and Baihui reflects TCM's principle of "combining meridian-based and syndrome-based acupoint selection." Shenmen has the effect of tonifying heart qi and calming the spirit. Yongquan regulates the kidney meridian and overall health. Zusanli, one of the "four major acupoints," has extensive indications, treating digestive disorders, consumptive diseases, cough, asthma, palpitations, insomnia, mania, knee pain, and edema. Sanyinjiao combined with Zusanli treats borborygmus and diarrhea; combined with Neiguan and Shenmen, it treats insomnia. Neiguan, one of the eight confluence points connecting with the Yinwei meridian, has effects

of calming the heart and spirit, soothing the liver and stomach, and unblocking collaterals to regulate qi and relieve pain. Strong stimulation of Neiguan can awaken the brain and open orifices.

**Outcome:** After treatment, the patient's food intake gradually increased, dysphagia improved, sleep quality enhanced, and mental status significantly improved. Following [DAYS] days of meticulous nursing care, the patient was discharged.

## TCM Nursing

Commonly used acupoints for improving sleep in lung cancer patients include: Taiyang (EX-HN5), Yintang (EX-HN3), Baihui (GV20), Shenmen (HT7), Yongquan (KI1), Zusanli (ST36), Sanyinjiao (SP6), and Neiguan (PC6).

## Specialized Nursing

### Oxygen Therapy Care

1. Patients with advanced lung cancer should receive low-concentration, low-flow oxygen therapy at a rate of less than 3 L/min. Prolonged high-concentration oxygen should be avoided to prevent further suppression of respiratory function.
2. Oxygen can be delivered continuously or intermittently via nasal cannula or face mask. Patients with respiratory failure may require invasive or non-invasive ventilator support to effectively improve hypoxia. Concurrently, if patients have excessive sputum or bronchospasm, appropriate treatment should be administered.

### Respiratory Management

- Position the patient sitting upright. The nurse stands beside the bed, cups the hand, and percusses the chest wall corresponding to the location of sputum while encouraging coughing. Percussion can also be performed from bottom to top and from outer to inner with rhythmic, moderate force to loosen sputum and facilitate expectoration.
- Family members should frequently turn the patient, encourage increased fluid intake, and maintain indoor air humidity to humidify the respiratory tract, dilute sputum, and promote expectoration.
- Administer medication as prescribed. Herbal decoctions should be taken after meals. Nebulized medications including Ipratropium Bromide solution, Acetylcysteine solution, normal saline, and Sodium Bicarbonate injection can be nebulized to dilute sputum for easier expectoration.
- For patients unable to expectorate sputum independently, obtain consent from patients and families for negative pressure suctioning as prescribed to prevent airway obstruction.

## Emotional Care

- TCM emotional nursing is based on syndrome differentiation of the seven emotions according to TCM theory. Combined with patients' psychological changes and analysis of affected viscera, emotional syndrome differentiation and treatment are applied to regulate emotions. Lung cancer patients typically exhibit worry, anxiety, sorrow, and fear, leading to blood deficiency, spirit damage, and blood failing to nourish the spirit, resulting in insomnia. Joy overcoming sorrow can improve sadness, regulate the seven emotions, and thereby improve sleep [11].
- Observe patient behavior closely and meet their needs as much as possible to prevent emotional and behavioral disturbances due to restricted needs.
- Influenced by family, social factors, and environment, lung cancer patients may feel loss of self-worth and experience loneliness and helplessness during treatment, becoming extremely sensitive and suspicious of medical staff's words and actions. Provide more care and support to help patients feel family presence, eliminating loneliness and suspicion.
- Provide distraction techniques. Many patients become irritable due to disease-related pain. Create a quiet, comfortable resting environment with adequate sleep to reduce pain. Teach patients distraction methods such as listening to music, watching videos, and chatting. Report to physicians promptly if pain is severe and unrelieved by these methods to ensure pain relief and improve quality of life.

## Dietary Management

- Lung cancer is a consumptive disease, so diet should be high in protein such as milk, eggs, fish, and soy products. Avoid smoked, spicy, and high-salt foods that may worsen cough and sputum.
- Guide patients to consume foods that clear lung heat, resolve phlegm, regulate qi, relieve cough, and calm wheezing, such as pear-white fungus-lily bulb soup, honeysuckle tea, radish-ginger juice, and ginkgo chicken stew.
- When appetite is poor, emphasize flavor and color combination. While ensuring nutritional balance, pay attention to taste and color matching to stimulate appetite and increase fresh vegetable and fruit intake to prevent constipation.
- Post-surgery and post-chemoradiotherapy often affect the digestive system, so easily digestible foods such as rice-meat porridge, rice cereal, and vegetable-meat porridge are appropriate. These foods can promote recovery of digestive function while providing adequate nutrition to improve disease resistance.
- Encourage small, frequent meals (80% full per meal). Increase meal frequency appropriately. Ensure suitable temperature, avoiding overly hot foods that may damage oral and esophageal mucosa, or overly cold foods that may cause discomfort.

## Health Education

Teach patients and families acupressure techniques and nursing methods, explaining their importance and necessity for this condition. Conduct telephone follow-up after discharge, encouraging patient and family participation to ensure benefit.

## Discussion

This article summarizes nursing experience in managing the psychological and physical adverse effects of insomnia in clinical lung cancer patients. Based on acupressure, nurses implemented comprehensive interventions including dietary management, oxygen therapy care, respiratory management, and emotional care. Additionally, health education and family teaching were strengthened to improve compliance outside the hospital, thereby improving sleep quality, relieving dyspnea, cough, and sputum expectoration, alleviating anxiety, and enhancing quality of life. The latest guidelines also recommend traditional Chinese medicine as a treatment for insomnia [12]. Meridian acupoint massage stimulates acupoints and meridians to soothe meridians, promote qi and blood circulation, and influence visceral function through reflex and conduction. Combined with TCM emotional care, this approach relieves negative emotions, awakens the brain and opens orifices, regulates visceral physiological functions, unblocks meridians, harmonizes qi and blood, calms the spirit, clears lung excess, expands the chest to relieve pain, cools blood to stop bleeding, and ventilates the lungs to relieve cough [13].

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