Administration of Acupressure for Relief of Low Back Pain

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Low back pain (LBP) is experienced at some point in life by approximately 80% of the population, with 70% of affected individuals improving or remaining stable after four years of treatment. Conventional treatment of LBP includes spinal manipulation, behavioral therapies, pharmaceutical interventions, and home exercise programs. The majority of LBP is chronic (80-90%), which is typically characterized by a nonspecific musculoskeletal origin and unremarkable diagnostic tests. Prolonged recovery and chronic pain often motivate patients to seek nontraditional treatments.

The literature suggests that acupuncture and acupressure treatments are effective for reduction of LBP, but a debate persists concerning the physiologic basis for the reduction in pain. According to traditional Chinese medicine theory, back pain is caused by stagnation or an obstruction in the flow of “chi”—or vital energy—throughout the back region. Obstruction or stagnation in the channels where the chi flows is believed to lead to malnourishment in the area, thereby giving rise to pain. The goal of traditional Chinese medicine is to stimulate the blocked points of energy flow, restore the chi by removing obstructions, and improve circulation to the area. The use of acupressure as an adjunct modality early in treatment process appears to facilitate return to work.

Evaluation and Treatment Options

Each LBP patient should receive a thorough examination to ensure that an acute injury is not overlooked and that appropriate treatment is administered. Although acupressure may alleviate pain caused by an acute injury (e.g., disk herniation, spondylopathy, fracture, etc.), other interventions may be necessary. Regardless of the primary cause of LBP, the primary indication for the application of acupressure is pain reduction. The literature suggests that acupuncture and acupressure treatments are effective for reduction of LBP, but a debate persists concerning the physiologic basis for the reduction in pain. According to traditional Chinese medicine theory, back pain is caused by stagnation or an obstruction in the flow of “chi”—or vital energy—throughout the back region. Obstruction or stagnation in the channels where the chi flows is believed to lead to malnourishment in the area, thereby giving rise to pain. The goal of traditional Chinese medicine is to stimulate the blocked points of energy flow, restore the chi by removing obstructions, and improve circulation to the area. The use of acupressure as an adjunct modality early in treatment process appears to facilitate return to work.

Acupressure

Acupressure is effective for relief of pain, regardless of its cause, but it does not change the underlying condition that created the pain. This report will focus on three acupres-
sure points that are effective for relief of LBP, whether the procedure is performed by an athletic trainer or therapist (AT) or self-administered by a patient. Acupressure points should not be confused with myofascial trigger points, which are focal areas of sensitivity in the fascia that are identified through AT/patient communication. Myofascial trigger points do not directly correspond to meridians.

The technique used to administer acupressure is the same for each of the points that are specified. The AT or patient should maintain manual pressure on the acupressure point associated with the desired meridian. The AT may also massage in small circles or administer a pulsating pressure. The acupressure point should be massaged for one to two minutes or until the patient relates that pain relief has been achieved. Patients should be instructed to close their eyes and slow down breathing during the administration of acupressure.

The specific acupressure points that are effective for LBP relief are BL-60 (ankle), LV-3 (foot), and LI-4 (hand). BL-60 (or “High Mountains”) is located on the outer ankle, between the Achilles tendon and the lateral malleolus. Massage should be performed on both ankles for optimal pain relief.

General pain relief can be accomplished by treating two areas: LV-3 ("Great Rushing") on the foot (Figures 2 & 3) and LI-4 on the hand (Figure 4). Combined treatment of these two points is effective for relief of pain originating from areas other than the back, such as headache or neck pain. The “Great Rushing” point (LV-3) is located on the top of the foot (Figure 2). The point is easily located by running a finger between the first and second metatarsals, to the area near the junction of the first and second rays. The finger should slide into the interosseous membrane between the Achilles tendon and the lateral malleolus. Massage should be performed on both ankles for optimal pain relief.

![Figure 1](image1.png)  [BL-60 High Mountains.](image1.png)

![Figure 2](image2.png)  [LV-3 Great Rushing.](image2.png)

![Figure 3](image3.png)  [Self-massage of LV-3.](image3.png)

![Figure 4](image4.png)  [LI-4 Joining of the Valleys.](image4.png)
metatarsals. This acupressure point can be quite painful, which will confirm that the correct point has been identified. Massage this point for at least one minute on each foot. The magnitude of pressure administered should be modified on the basis of pain level tolerated by the patient. In addition to the traditional finger massage technique, a patient can self-administer an acupressure treatment by using the heel of the opposite foot to massage the “Great Rushing” point (Figure 3). Heel massage is particularly beneficial for patients who are unable to bend over to reach their feet. The massage should be performed with downward strokes and continued until the point becomes less tender or the LBP decreases.

San Jiau 3 (Central Islet) and the “Back Pain Point” are also used to treat LBP. The Central Islet point is located between the heads of the fourth and fifth metacarpals, just proximal to the web space between the fourth and fifth digits. The “Back Pain Point” is located between the second and third metacarpals in the same space. These points should be massaged simultaneously for at least one minute to relieve pain. The AT can use a two-handed approach (Figure 5), and a patient can use the knuckles of the opposite hand to identify and massage these two points simultaneously.

**Summary**

Traditional Chinese medicine offers an integrated approach to treatment of LBP, which is an extremely common condition. The use of acupressure massage improves the flow of chi (or energy) to improve the circulation and nutrition of the injured area, thereby reducing pain.14-16 Treatment of LBP may also include postural evaluation, therapeutic exercises, relaxation exercises, deep breathing, and stress reduction. The AT who chooses to use nontraditional treatment methods should consult with a physician, particularly if neurological symptoms are present. Acupressure can be an effective means to decrease LBP, particularly for patients who suffer from chronic discomfort.

**References**


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**Figure 5** San Jiau 3-Central Islet (left) and Back Pain Point (right).