

THE ROLE OF THE IG13 ACUPUNCTURE POINT IN ENDOCRINE REGULATIONS

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- **Introduction:**
- Studying the acupuncture points and at the suggestion of dr. Angela Tudor I was caught my attention by the IG 13(Shou wu li) and its action on any kind of endocrine disorders, and I thought I could objectify its action on the endocrine glands through laboratory tests on hormones.
- Then I thought to using Bio-well, a device that uses the Kirlian effect on the fingertips, to highlight the effect on the chakras, knowing that each endocrine gland is influenced by one chakra.

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IG13, Shǒu wǔ lǐ 手五里, Five measures from the hand

Qualities :

It promotes the return of peripheral Yang to the center (the F10 dialectic for Yin). Hence its Yang-peripheral and Yin-central symptomatology: F10 Zu Jue Yin (Zu Wu Li). IG13 Shou Yang Ming (Shou Wu Li). Releases the meridian and invigorates the collaterals.

Fullness of peripheral Yang: joint pain, the 4 members paralyzed.

Yang vacuum within: spasms within the trunk.

It acts in the opposite direction to IG4, which distributes the central Yang.

Barrier Point: Brings the Yang from the hand (coming from P) to the shoulder, the center (the place where everything comes from and where everything goes).

Functions:

It acts on the joints.

Removes Dampness, Blood Heat, Emotional Disturbances, Madness.

Harmonizes medium TF.

Holds the Blood

Controls the F Yang.

Location: 3 cun above IG11 on the line IG15 to IG11.

Clinical uses :

Venous stasis of the lower limbs

Hemoptysis. Pneumonia. Cough, nodular TB.

Intestinal spasms. Peritonism. Hematemesis. Bowel obstruction. Abdominal swelling and fullness. Stools as narrow as a "pencil".

Tenesmus of the bladder. Retention by spasm of the sphincter. Emotional anuria.

Any endocrine disorder.

Pain in elbow and wrist joints, thumb, hip, foot

Blurry vision. Vision problems.

Inflammation of the throat. Adenitis. Hypoesthesia of the tongue

The four members paralyzed. Sequelae of poliomyelitis

Beneficial for the Spirit helping in states of emotionality and worry. Fears. Fear.

Sleepiness. Likes to lie down, clinomania. Asthenia.

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- **Material and method:**
 - I chose a number of 5 participants in the study, generally female, people with various endocrine disorders. An initial blood sample was taken, and then another sample after 30 minutes, then the bilateral IG13 point was stimulated for 30 minutes, then the tests were collected again. I considered that the second harvest, taken after the first, performed after 30 minutes without stimulation, is the placebo test, and it was taken also to see if the hormonal values change significantly over time, then the third harvest was after 30 minutes of point stimulation. An analysis of the biofield and the chakras of each person that was analyzed, was also performed. Initially, I did the tests on myself and I harvested before and after stimulation, and the third harvest was a month later to see how the effect was maintained.
 - An analysis of the biofield and the chakras of each person that was analyzed, was also performed.

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- This is the point IG13 punctured bilaterally in each participant.



Patient B.P. aged 61 with a pituitary adenoma treated with Doxtinex a few years ago, currently without any other treatment, as it can be seen Prolactin tends to approach normal values, being 62-410 uU/ml for the postmenopausal period.

B.P	PROBA 1	PROBA 2	PROBA 3
ATPO	3.834 UI/mL	3.2 UI/mL	3.349 UI/mL
Cortisol	164.6 ng/mL	121.6 ng/mL	102.3 ng/mL
Estradiol	19.59 pg/mL	25.06 pg/mL	23.54 pg/mL
FSH	77.18 U/L	62.77 U/L	67.24 U/L
FT4	12.99 pg/mL	12.72 pg/mL	12.69 pg/mL
LH	41.32 U/L	32.74 U/L	30 U/L
Seric Parathormone	29.2 pg/mL	30.2 pg/mL	29.2 pg/mL
Progesterone	0.782 ng/mL	0.605 ng/mL	0.56 ng/mL
Prolactin	628.3 µU/ml	527.8 µU/ml	493.7 µU/ml
TSH	2.005 µU/ml	1.658 µU/ml	1.47 µU/ml

Patient C.E-S, aged 45, with Hashimoto's autoimmune thyroiditis it is observed how ATPO values decrease significantly, and also, slightly, the TSH, and FT4 tends to stay at the upper limit, while the Cortisol, our stress hormone, decreases significantly

C.E-S	PROBA 1	PROBA 2	PROBA 3
ATPO	513.1 UI/mL	490.2 UI/mL	478.4 UI/mL
Cortisol	92.66 ng/mL	103.7 ng/mL	68.49 ng/mL
Estradiol	23.42 pg/mL	20.92 pg/mL	14.26 pg/mL
FSH	86.35 U/L	84.75 U/L	88.39 U/L
FT4	14.27 pg/mL	13.42 pg/mL	13.84 pg/mL
LH	38.39 U/L	37.23 U/L	32.9 U/L
Seric Parathormone	45.71 pg/mL	39.49 pg/mL	36.22 pg/mL
Progesterone	0.597 ng/mL	0.537 ng/mL	0.533 ng/mL
Prolactin	114 µU/ml	124.2 µU/ml	73.89 µU/ml
TSH	2.303 µU/ml	2.054 µU/ml	2.006 µU/ml

**Patient D.T. 62 years old with joint problems
(inflammation of the inner side of the elbow, knees), HTA,
cardiac aneurysm, hypotonic biliary dyskinesias, kidney stones, gastritis,
inflamed cervical ganglions, it is observed how the Parathormone
normalizes, the normal values being 15-65 pg/ml.**

DT	PROBA 1	PROBA 2	PROBA 3
ATPO	4.541 UI/mL	2.827 UI/mL	4.446 UI/mL
Cortisol	94.21 ng/mL	92.8 ng/mL	70.3 ng/mL
Estradiol	30.03 pg/mL	30.04 pg/mL	28.27 pg/mL
FSH	84.68 U/L	74.48 U/L	80.11 U/L
FT4	13.56 pg/mL	14.24 pg/mL	13.33 pg/mL
LH	41.68 U/L	41.1 <u>U/L</u>	44.32 U/L
Seric Parathormone	81.59 pg/mL	76.01 pg/mL	57.62 pg/mL
Progesterone	1.079 ng/mL	0.952 ng/mL	1.055 ng/mL
Prolactin	161.4 µU/ml	142.9 µU/ml	160.2 µU/ml
TSH	1.91 µU/ml	1.292 µU/ml	1.52 µU/ml

Patient G.D. at the age of 68, known to have Hashimoto's autoimmune thyroiditis, it can be seen how ATPO tends to decrease, along with Cortisol and TSH which also turned out to be too increased and tends to normalize under acupuncture. It is also observed how the Parathormone, which was low, increases and tends to normalize.

G.D	PROBA 1	PROBA 2	PROBA 3
ATPO	714.6 UI/mL	685 UI/mL	679 UI/mL
Cortisol	119.8 ng/mL	102.2 ng/mL	93.47 ng/mL
Estradiol	14.65 pg/mL	18.43 pg/mL	12.48 pg/mL
FSH	92.28 U/L	90.09 U/L	89.17 U/L
FT4	10.78 pg/mL	10.89 pg/mL	11.51 pg/mL
LH	28.89 U/L	26.17 U/L	39.85 U/L
Seric Parathormone	12.15 pg/mL	13.21 pg/mL	14.96 pg/ml
Progesterone	0.553 ng/ml	0.501 ng/mL	0.587 ng/mL
Prolactin	208.3 µUI/mL	233.9 µUI/mL	238.4 µUI/mL.
TSH	8.808 UI/mL	7.909 UI/mL	6.32 µUI/ml

Patient D-L A., 50 years old, diagnosed with incipient Hashimoto's autoimmune thyroiditis, uterine fibroids, stressed, in principle the analyzes at the moment are within normal limits.

D-L.A	PROBA 1	PROBA 2	PROBA 3
ATPO	1.854 UI/mL	4.043 UI/mL	1.894 UI/mL
Cortisol	77.01 ng/ml	72.87 ng/mL	90.07 ng/mL
Estradiol	74.05 pg/mL	82.96 pg/mL	82.72 pg/mL
FSH	9.714 U/L	9.559 U/L	8.839 U/L
FT4	12.74 pg/mL	12.26 pg/mL	12.88 pg/mL
LH	14.76 U/L	10.49 U/L	13.22 U/L
Seric Parathormone	27.36 pg/mL	23.73 pg/mL	23.47 pg/mL
Progesterone	12.75 ng/mL	11.56 ng/mL	11.61 ng/mL
Prolactin	204.3 µUI/ml	214.6 µUI/mL	200.8 µUI/ml
TSH	1.093 µUI/mL	0.999 µUI/mL	0.927 µUI/ml

D-N C-A, aged 54, with uterine problems (2 fibroids) and osteoarticular problems (osteophytes) can be seen how Cortisol drops significantly under acupuncture, as well as LH which was a little above the upper limit, TSH drops significantly and FT4 increases slightly (so it let the thyroid function better)

and a significant increase in Prolactin is also observed, but still within normal limits.

- I specify that in the present case sample 2 was after 30 minutes of stimulation and sample 3 after one month.

- I also specify that all the participants in this study had their analyzes taken uneaten.

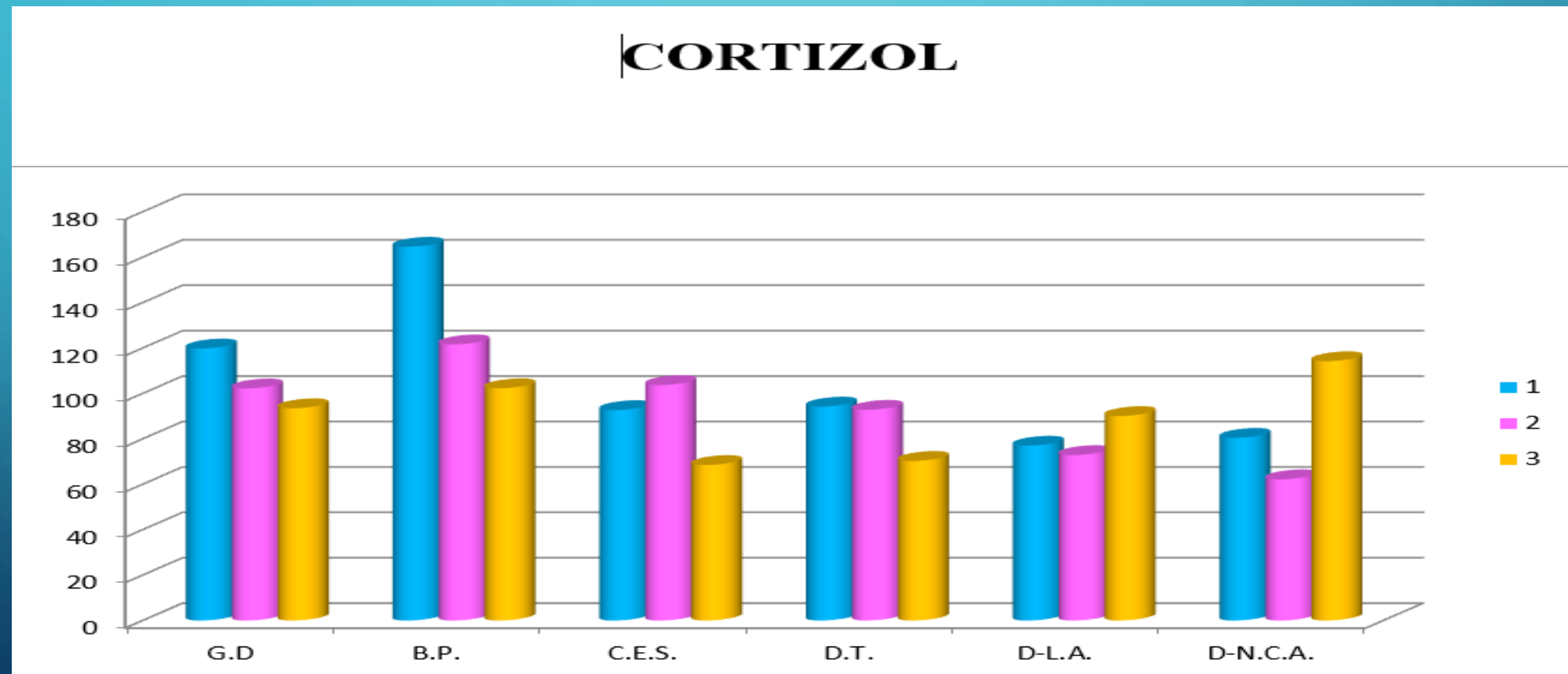
D-N.C-A	PROBA 1	PROBA 2	PROBA 3
ATPO	5.106 UI/mL	5.121 UI/mL	4.952 UI/mL
Cortisol	80.44 ng/mL	52.19 ng/mL	114.2 ng/mL
Estradiol	17.21 pg/ml	14.46 pg/mL	24.52 pg/mL
FSH	95.11 U/L	87.88 U/L	99.9 U/L
FT4	10.72 pg/mL	11.06 pg/mL	13.38 pg/mL
LH	52.95 U/L	51.71 U/L	51.52 U/L
Seric Parathormone	38.37 pg/mL	52.26 pg/mL	53.53 pg/mL
Progesterone	0.423 ng/mL	0.464 ng/mL	0.595 ng/mL
Prolactin	97.88 µUI/mL	128.9 µUI/mL	105.8 µUI/mL
TSH	2.039 µUI/mL	1.821 µUI/mL	2.499 µUI/mL

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	G.D.			B.P.			C.E.S.			D.T.			D-L.A.			D-N.C.A.		
	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3
Cortizol	119.8	102.2	93.47	164.6	121.6	102.3	92.66	103.7	68.49	94.21	92.8	70.3	77.01	72.87	90.07	80.44	52.19	114.2
ATPO	714.6	685	679	3.834	3.2	3.349	573.1	490.2	478.4	4.541	2.827	4.446	1.854	4.043	5.894	5.106	5.121	4.952
TSH	8.808	7.909	6.32	2.005	1.658	1.47	2.303	2.054	2.006	1.91	1.292	1.52	1.093	0.999	0.927	2.039	1.821	2.499
FT4	10.78	10.89	11.51	12.99	12.72	12.69	14.27	13.42	13.84	13.56	14.24	13.33	12.74	12.26	12.88	10.72	11.06	13.38
Prolactina	208.3	233.9	238.4	628.3	527.8	493.7	114	124.2	73.89	161.4	142.9	160.2	204.3	214.6	200.8	97.88	128.9	105.8
FSH	92.28	90.09	89.17	77.18	62.72	67.24	86.35	84.75	88.39	84.68	74.48	80.11	9.714	9.559	8.839	95.11	87.88	99.9
LH	28.89	26.17	39.85	41.32	32.74	30	38.39	37.23	32.9	41.68	41.1	44.32	14.76	10.49	13.22	52.95	51.71	51.52
Estradiol	14.65	18.43	12.48	19.59	25.06	23.54	23.42	20.92	14.26	30.03	30.04	28.27	74.05	92.96	82.72	17.21	14.46	24.52
Porgesteron	0.553	0.501	0.587	0.782	0.605	0.56	0.597	0.537	0.533	1.079	0.952	1.005	12.75	11.56	11.61	0.423	0.464	0.595
PTH	12.51	13.21	14.96	29.2	30.2	29.2	45.71	39.49	36.22	81.59	76.01	57.62	27.36	23.73	23.47	38.37	52.26	53.53

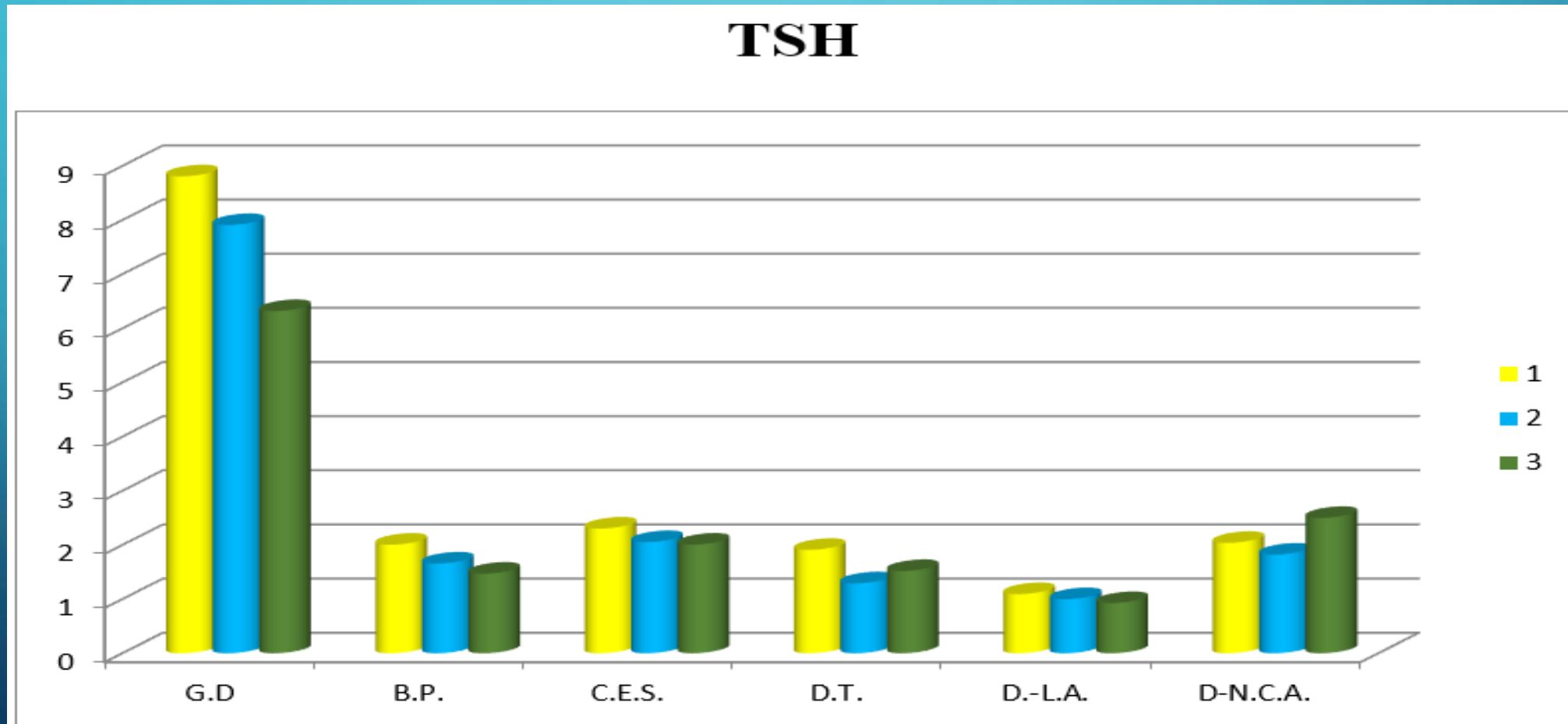
THE GRAPHIC OF CORTISONE VARIATION BEFORE AND AFTER ACUPUNCTURE POINT IG13

Specification: D-L A. was under acute stress related to her mother, who had to have a surgical intervention 2 days later, and at D-N C-A the 3rd sample is one month after the puncture



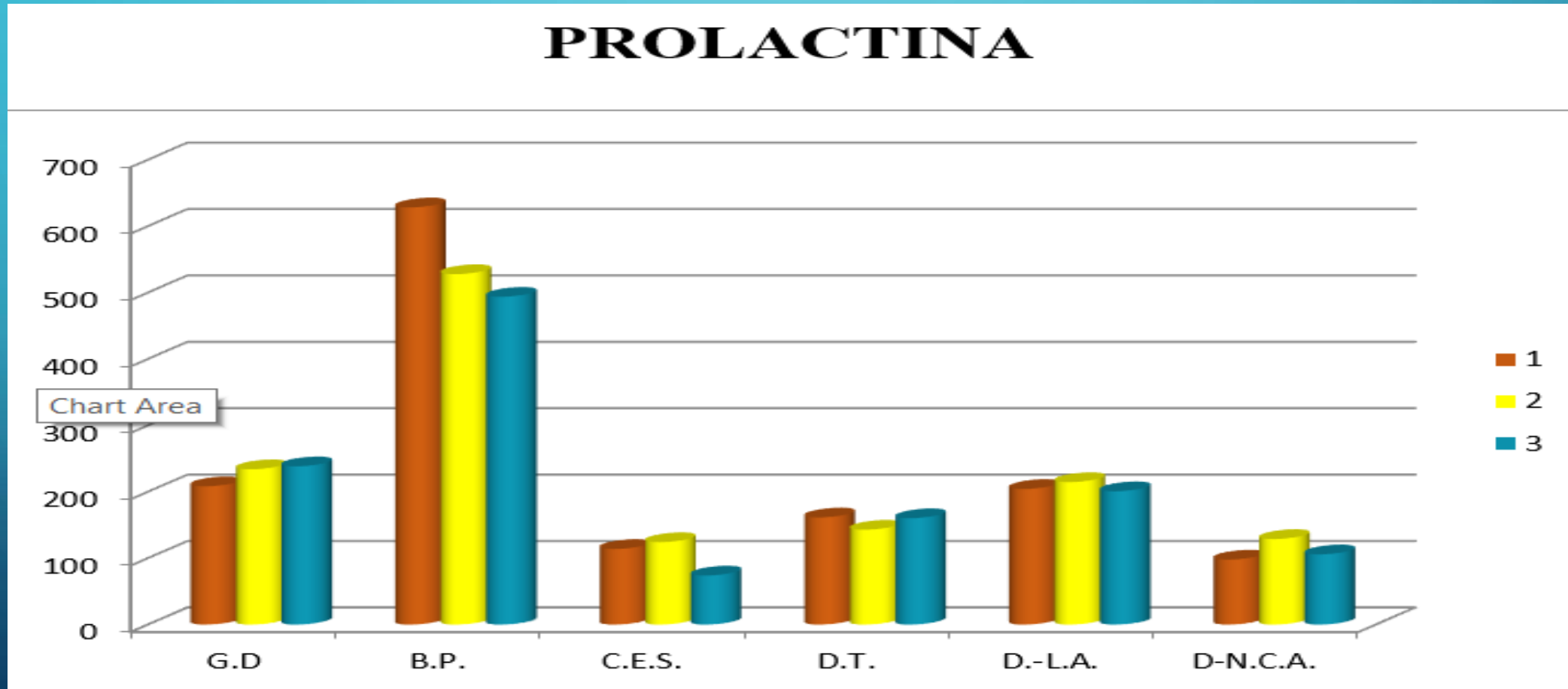
THE GRAPHIC OF TSH VARIATION BEFORE AND AFTER ACUPUNCTURE POINT IG13

A general trend of slight decrease in TSH values is observed



THE GRAPHIC OF PROLACTIN VARIATION BEFORE AND AFTER ACUPUNCTURE POINT IG13

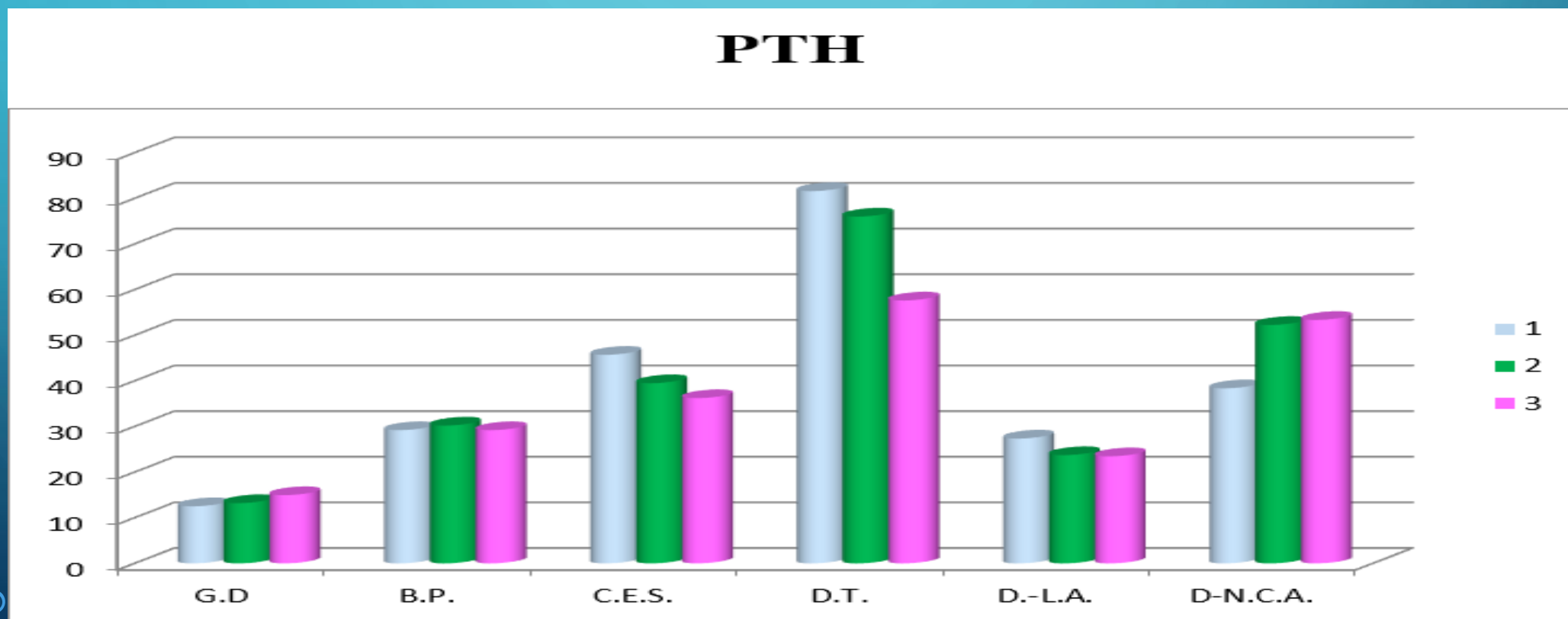
It is observed how the values decrease towards normalization in the patient with pituitary adenoma



THE GRAPHIC OF PTH VARIATION BEFORE AND AFTER ACUPUNCTURE POINT IG13

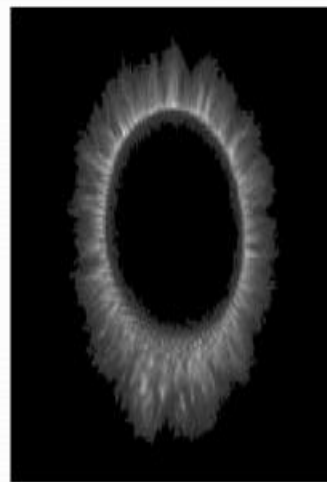
It can be seen how in patient G.D. who had low PTH, it increases her level, and in patient D.T. who had it too big it lowers it.

Clarification: all analyzes were collected uneaten, so in a way the purpose of PTH was to remove calcium from the bones to ensure the necessary concentration of calcium in the blood necessary for contractility in the body.



STUDY ON THE ENERGY CHANGES PRODUCED FOLLOWING THE PUNCTURING OF THE IG13 POINT WITH THE HELP OF THE BIOWELL DEVICE

Captarea acestor imagini si prelucrarea lor sub forma unor reprezentari grafice permite evaluarea nivelului energetic general al organismului, nivelului de stress si influenta factorilor nocivi asupra fenomenelor electro-magnetice din corp. Corelatiile intre descarcarile electro-fotonice de la nivelul degetelor si proiectia anumitor organe / zone conform sistemelor de medicina chineza si ayurvedica permite deasemenea evaluarea functionalitatii centrilor energetici principali (chakre-lor), meridianelor de acupunctura si organelor propriu-zise. Experienta de peste 20 de ani a producatorilor (Prof. Dr. Korotkov) include studii pe mii de pacienti, care dovedesc veridicitatea acestor corelatii.

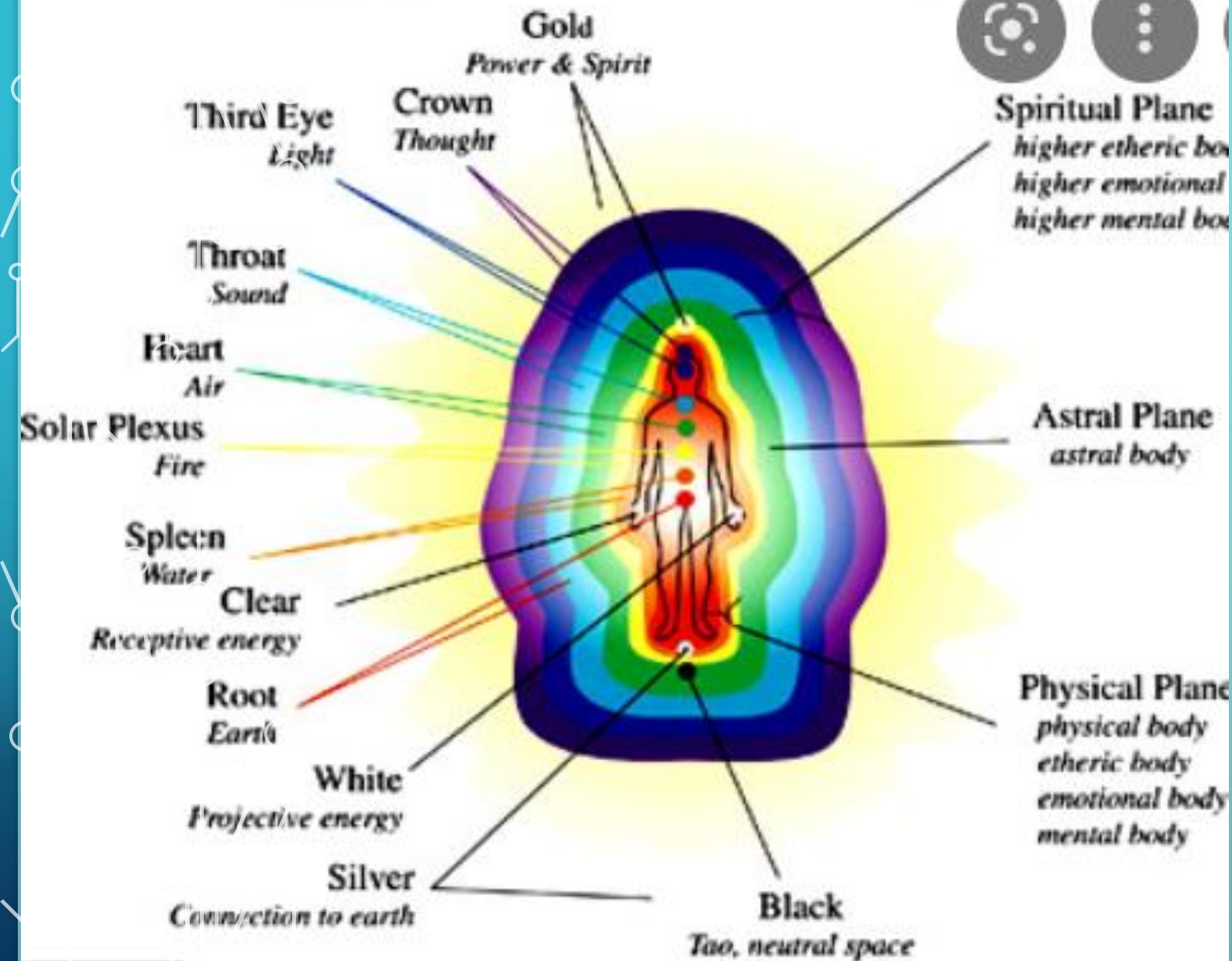


Tehnica GDV (Gas Discharge Visualisation)

reprezinta inregistrarea si analiza computerizata a emisiei electro-fotonice a organismului uman (de la nivelul degetelor mainilor), care rezulta la contactul cu o lentila speciala plasata intr-un camp electro-magnetic de intensitate ridicata. Cand o astfel de evaluare se efectueaza, un curent electric extrem de slab este aplicat la nivelul terminatiilor degetelor pentru mai putin de o milisecunda. O prima informatie pe care o ofera aceasta analiza este de fapt starea capilarelor periferice de la nivel digital, de care depinde intensitatea fotonilor emisi la acest nivel.

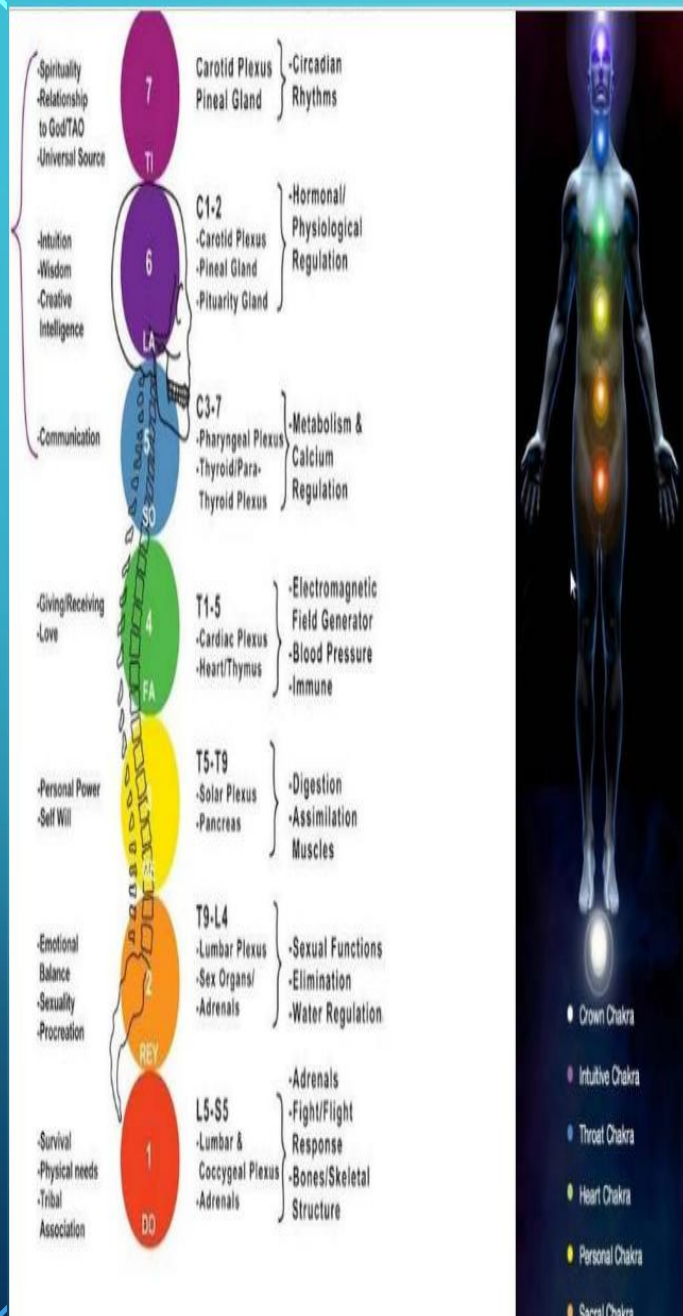
Chakras*

Aura*



THE AURA OF THE HUMAN BODY

- It is the **ENERGY FIELD OF THE HUMAN BODY** or **BIOFIELD** and it consists of several layers of energies of different frequencies that come into contact with the **7 CHAKRAS** or **ENERGY VORTEXES**, which control various organs and endocrine glands, but also various emotions, feelings, thoughts and experiences.



CHAKRAS = A system of energy vortices that correspond to nerve plexuses.

Chakra 1 (of the root/vitality) - controls the adrenals, kidneys, prostate, uterus, rectum and anus. Sense organ - the nose (smell);

Chakra 2 (of sexuality) - controls the ovaries/testicles, uterus/prostate, genitals, spleen, GI, appendix, kidneys. Sense organ - the tongue (taste);

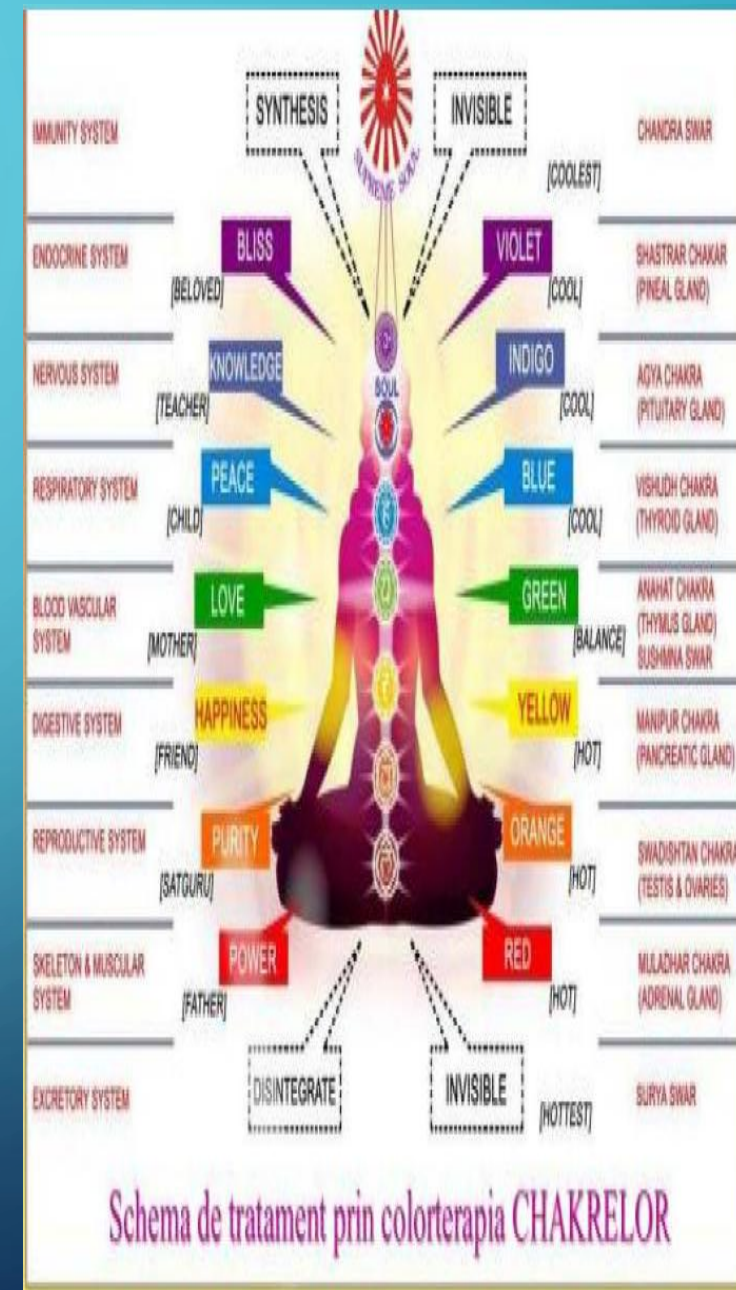
Chakra 3 (of the will) - controls the Leyden glands, pancreas, liver, gall bladder, small intestine, stomach, NS, diaphragm and muscles. The sense organ - the eye (vessel);

Chakra 4 (of the heart) - controls the thymus gland, the heart, the circulatory system, the lungs, the shoulders, the arms, the hands, the skin, which is also the sense organ (feeling);

Chakra 5 (of communication) - controls the thyroid, parathyroids, hypothalamus, throat, larynx, esophagus, tongue and oral cavity;

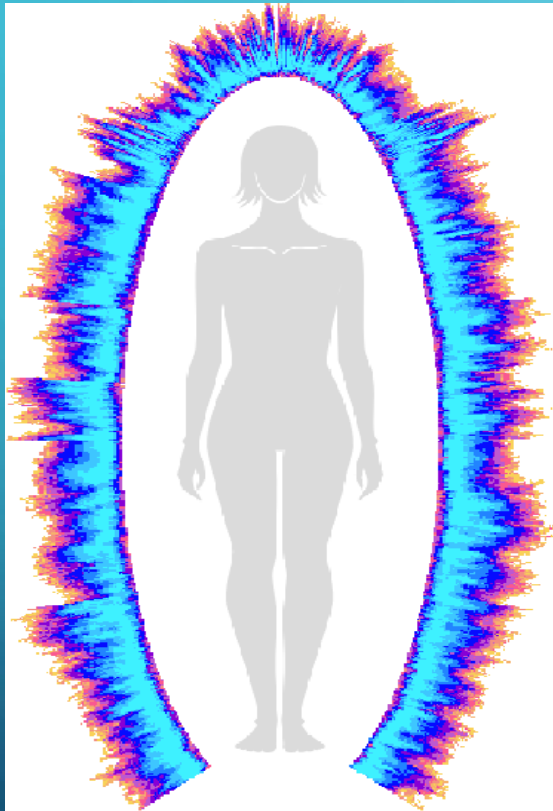
Chakra 6 (of intuition) - controls the Pituitary gland, nose, sinuses, ears and eyes, but also reason, mind, memory, intelligence, intuition;

Chakra 7 (of spirituality) - controls the pineal gland, cerebral cortex, CNS. It makes the connection with the Universal Cosmic Consciousness.

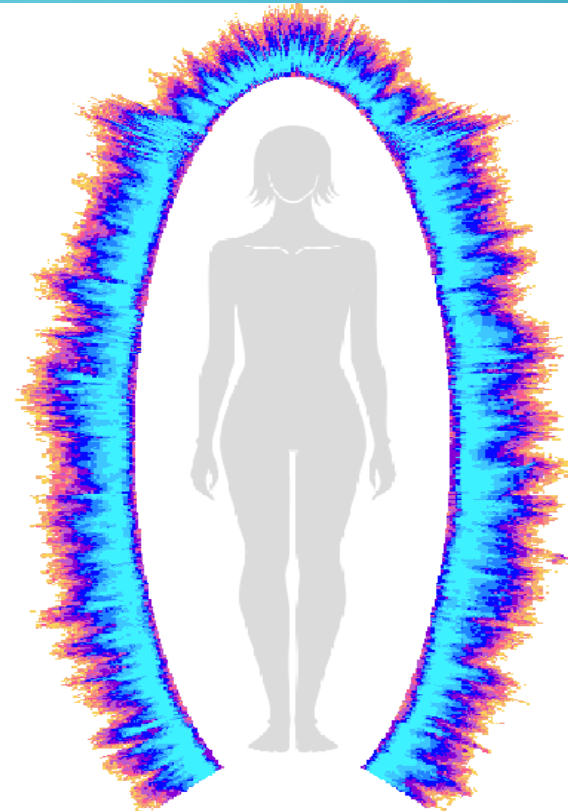


COMPARISON OF THE ENERGY FIELD (AURA) BEFORE AND AFTER STIMULATING THE ACUPUNCTURE POINT IG13.

IT CAN BE SEEN HOW THE ENERGY INCREASES FROM 56 JOULES TO 59 JOULES, AND THE LEFT-RIGHT BALANCE FROM 97% TO 99%

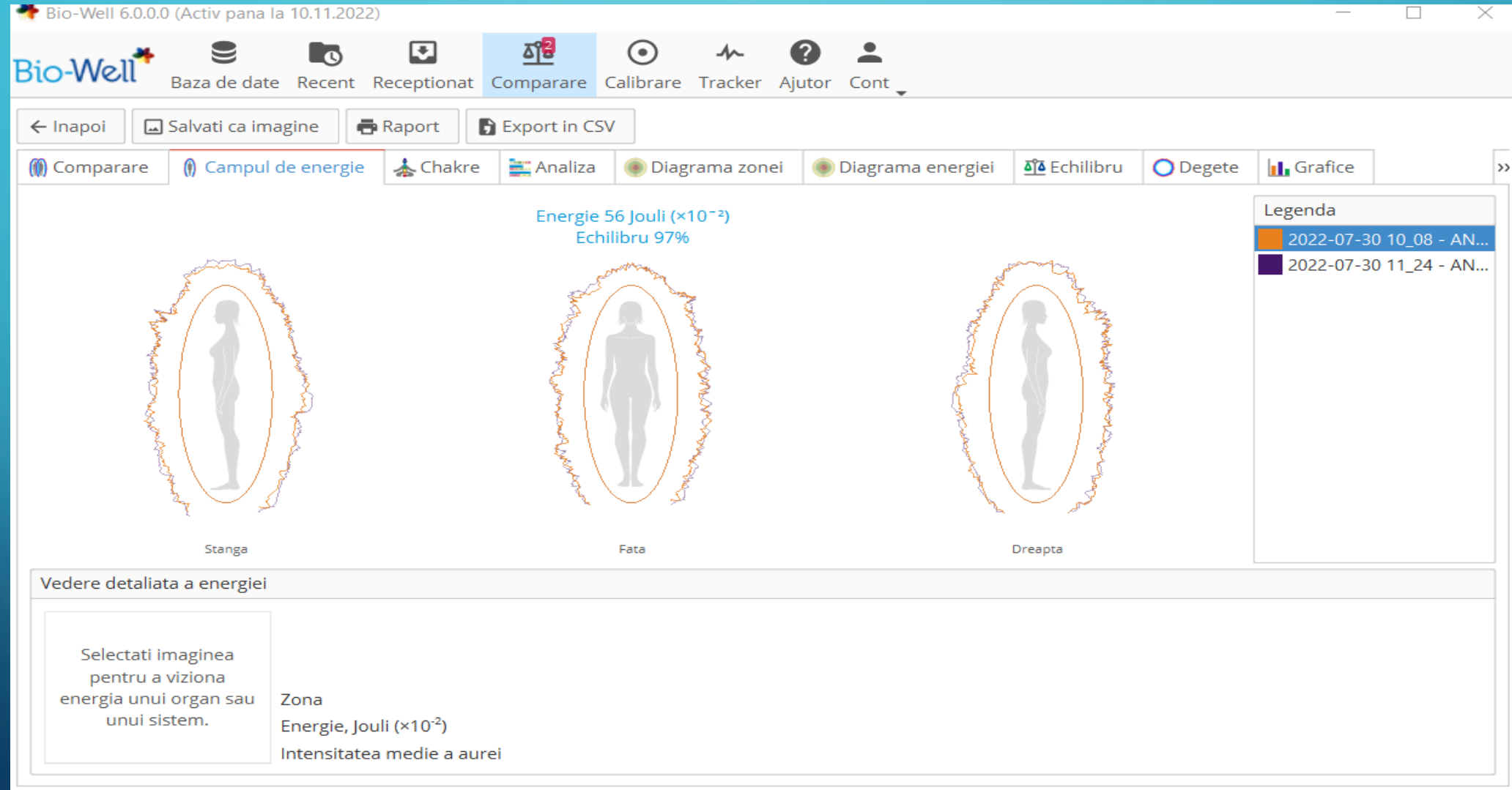


Energie 56 Jouli ($\times 10^{-2}$)
Echilibru: 97%



Energie 59 Jouli ($\times 10^{-2}$)
Echilibru: 99%

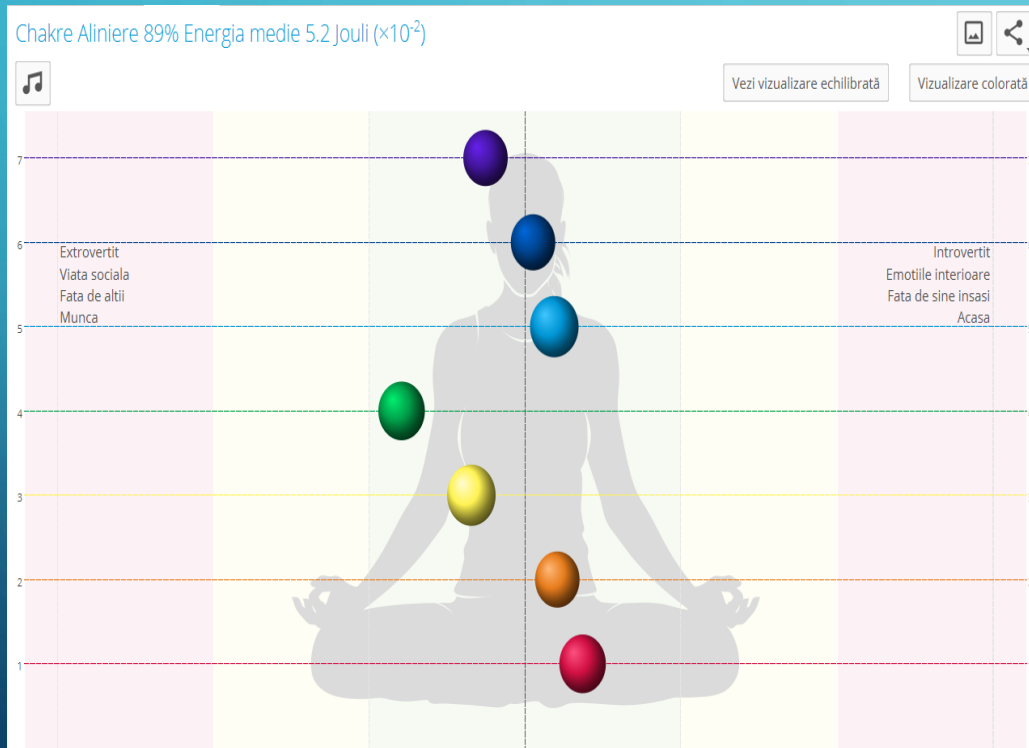
ANOTHER IMAGE OF THE OVERLAPPING FIELDS



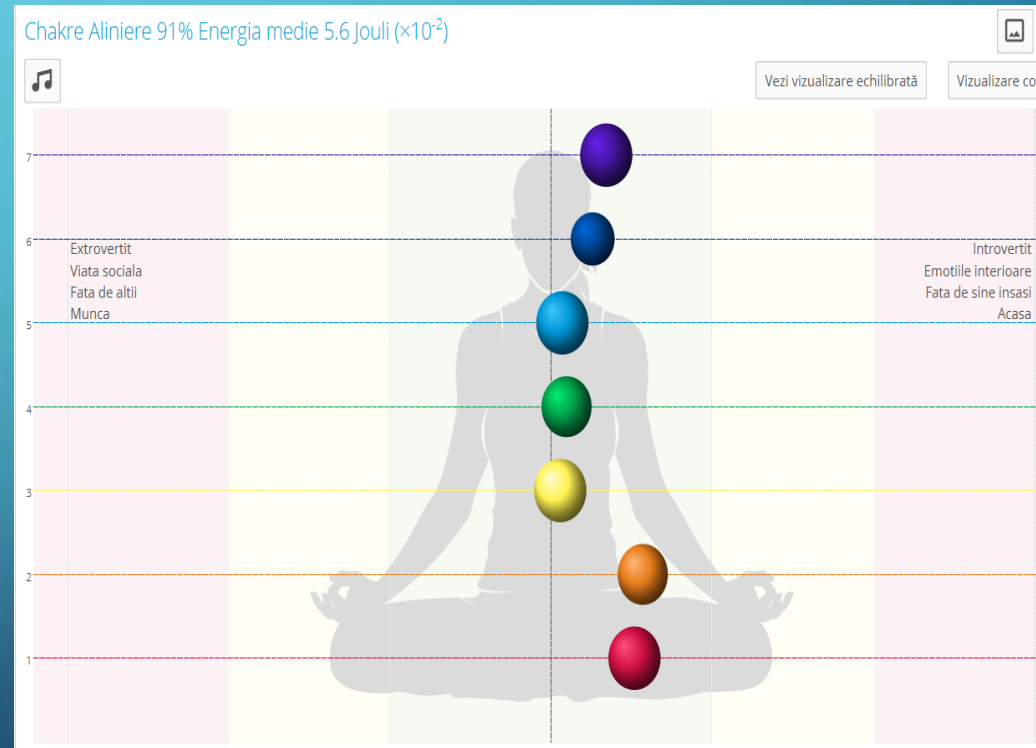
The distribution of the chakras before the piercing of the point ig13

IT IS OBSERVED HOW THE 3 CHAKRAS WHICH WERE MORE YANG, MORE EXTROVERTED, AFTER THE IG13 POINT IS PUNCTURED, THEY BECOME EASILY MORE YIN, INTROVERTED, AND ALSO THE OTHER CHAKRAS

**DISTRIBUTION OF THE CHAKRAS
BEFORE THE STIMULATION OF THE
POINT IG13**



**DISTRIBUTION OF THE CHAKRAS
AFTER THE STIMULATION OF THE
POINT IG13**



IT CAN BE SEEN HOW THE ENERGY INCREASED ON THE LUNG, LARGE INTESTINE, SPLEEN, URINARY BLADDER, LIVER MERIDIANS AND LESS ON THE GALL BLADDER AND STOMACH. IT IS ALSO NOTICEABLE THAT ON THE HEART MERIDIAN THE ENERGY DECREASED A LITTLE, BUT THE YIN-YANG BALANCE INCREASED, WHICH WAS ALSO OBSERVED ON THE REPRESENTATION OF THE CHAKRAS.

THE STATE OF THE MERIDIANS BEFORE THE STIMULATION OF THE POINT IG13

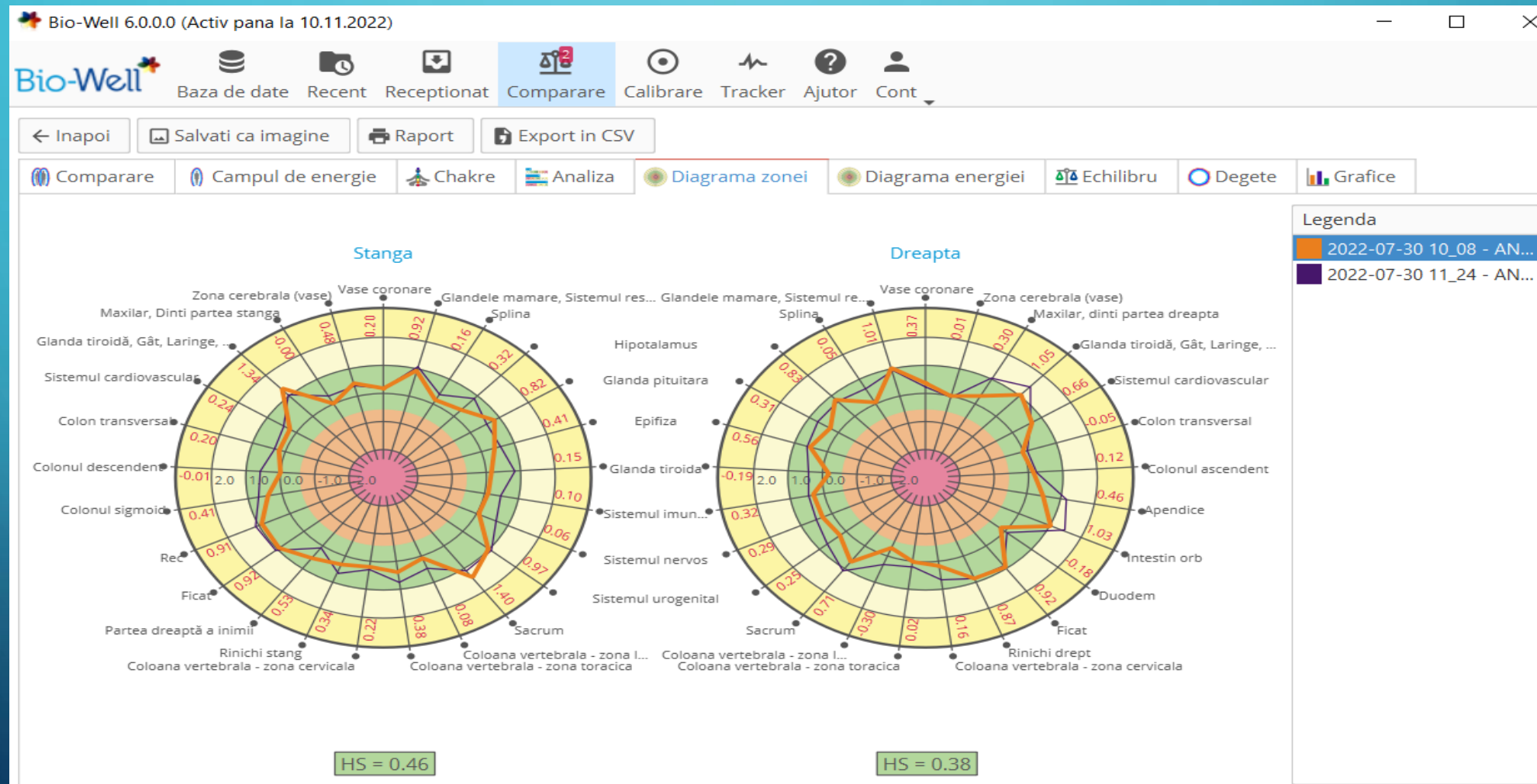
Meridian (Energie/Echilibru)	
	Yin-ul plamanilor (5.92/90%)
	Yang-ul intestinului gros (4.91/91%)
	Yang-ul stomacului (5.73)
	Yin-ul splinei (4.91/96%)
	Yin-ul inimii (5.08/85%)
	Yang-ul intestinului subtire (4.51/100%)
	Yang-ul vezicii urinare (5.50/73%)
	Yin-ul rinichilor (5.34/84%)
	Yin-ul pericardului (5.12/89%)
	Yang-ul meridianului ce controleaza capacitatea
	Yang-ul vezicii biliare (4.48)
	Yin-ul ficatului (5.95/93%)

THE STATE OF THE MERIDIANS AFTER THE STIMULATION OF THE POINT IG13

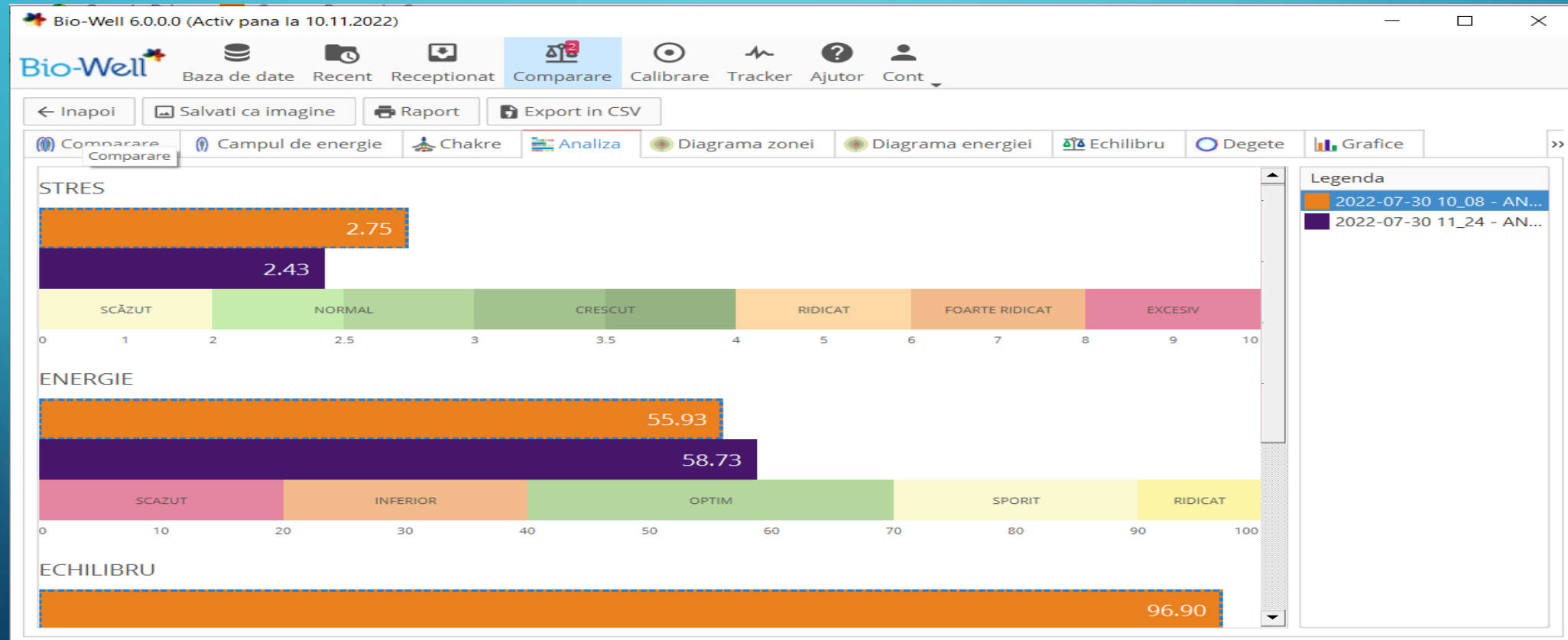
Meridian (Energie/Echilibru)	
	Yin-ul plamanilor (6.08/98%)
	Yang-ul intestinului gros (5.47/90%)
	Yang-ul stomacului (5.78)
	Yin-ul splinei (5.40/83%)
	Yin-ul inimii (4.63/95%)
	Yang-ul intestinului subtire (4.87/100%)
	Yang-ul vezicii urinare (6.04/94%)
	Yin-ul rinichilor (5.87/95%)
	Yin-ul pericardului (5.32/93%)
	Yang-ul meridianului ce controleaza capacitatea
	Yang-ul vezicii biliare (4.89)
	Yin-ul ficatului (6.32/94%)

THE ACTION ON THE INTERNAL ORGANS BEFORE AND AFTER THE PUNCTURE OF THE POINT IG13

It can be seen how it has a tendency to equalize the energies, but it also produced an energetic excess on the neck area, thyroid and the small intestine.



GRAPHIC IN WHICH IT IS OBSERVED HOW THE ENERGY LEVEL INCREASES AND THE STRESS LEVEL DECREASES

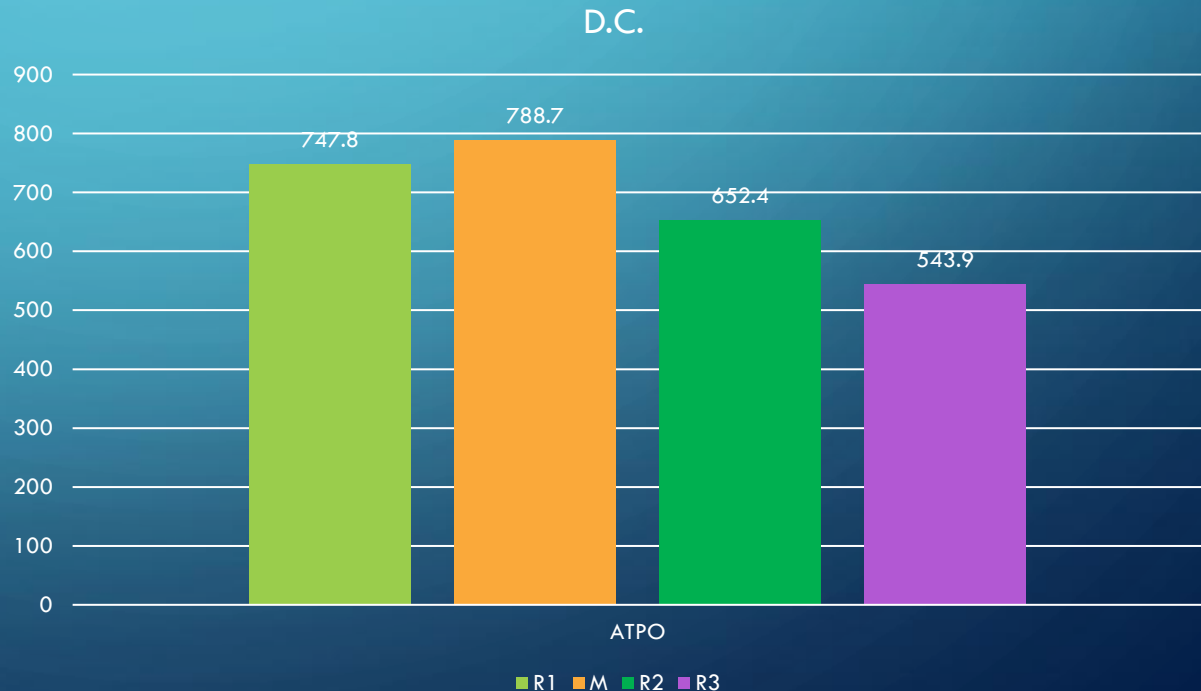
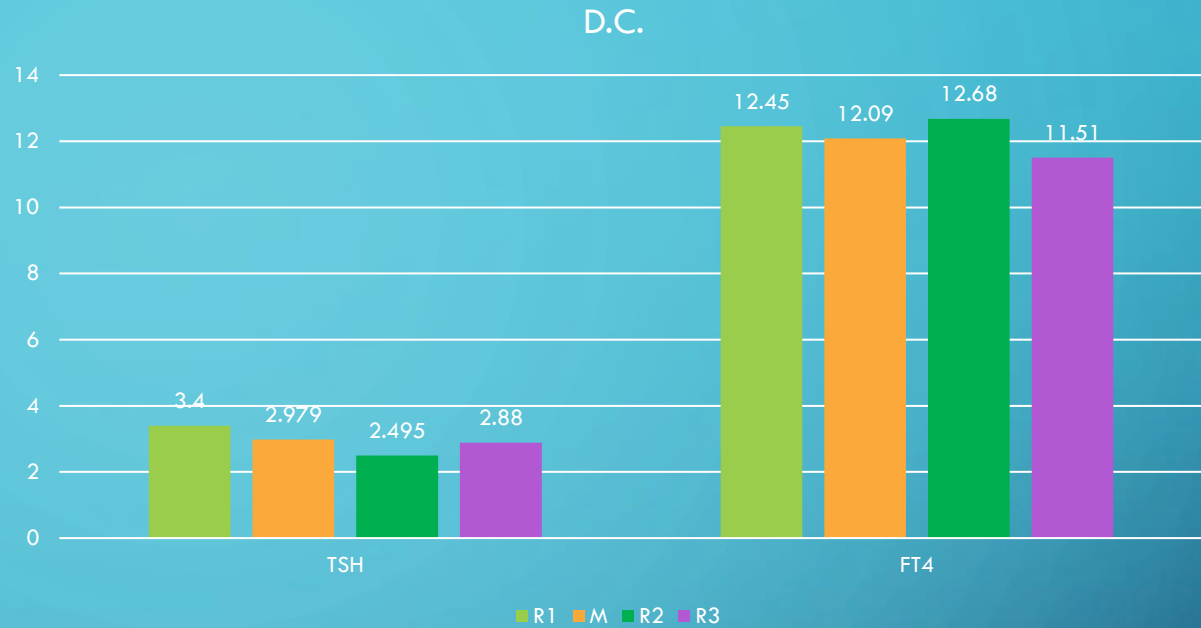


THE ROLE OF THE ACUPUNCTURE POINT IG13 IN ENDOCRINE REGULATION

- Encouraged by this pilot study and by my colleagues, I tried to expand the study with a statistically significant number of thyroid cases to make the battery of tests less expensive and to afford to carry it out.
- Unfortunately, I have not been able to gather many cases until now, but I hope, with the help of my colleagues and possibly an Endocrinology clinic that would want to get involved in this study, to manage to gather a statistically significant number so that we can demonstrate to the medical world that acupuncture really works and helps restore people's health.
- I used the same study protocol with the two initial collections at 30-minute intervals, the second sample being the control sample (M), then the bilateral insertion of needles on IG13 and collection after 30 minutes, and this time we also have a sample after 10 sessions of applying only the IG13 point.

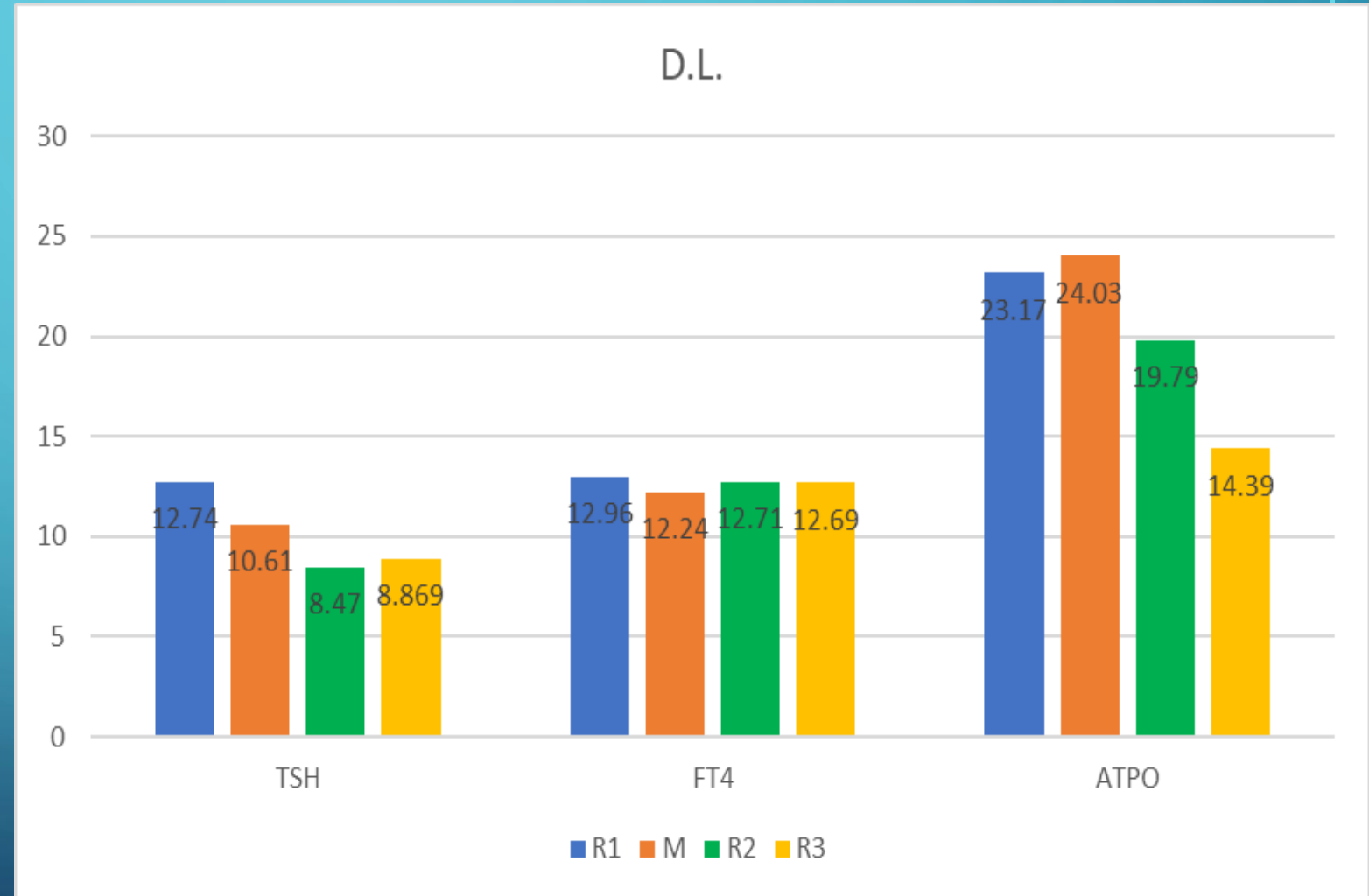
THE ROLE OF ACUPUNCTURE POINT IG13 IN ENDOCRINE REGULATION

Patient D.C., a 46-year-old with autoimmune thyroiditis and an initial ATPO (anti-thyroid peroxidase) level of 747.8 UI/ml (normal range=0-30), shows a decreasing trend in ATPO levels after the application of the IG13 acupuncture point. Other tests like TSH (thyroid-stimulating hormone) and Free T4, which were within normal limits, remain within normal limits.



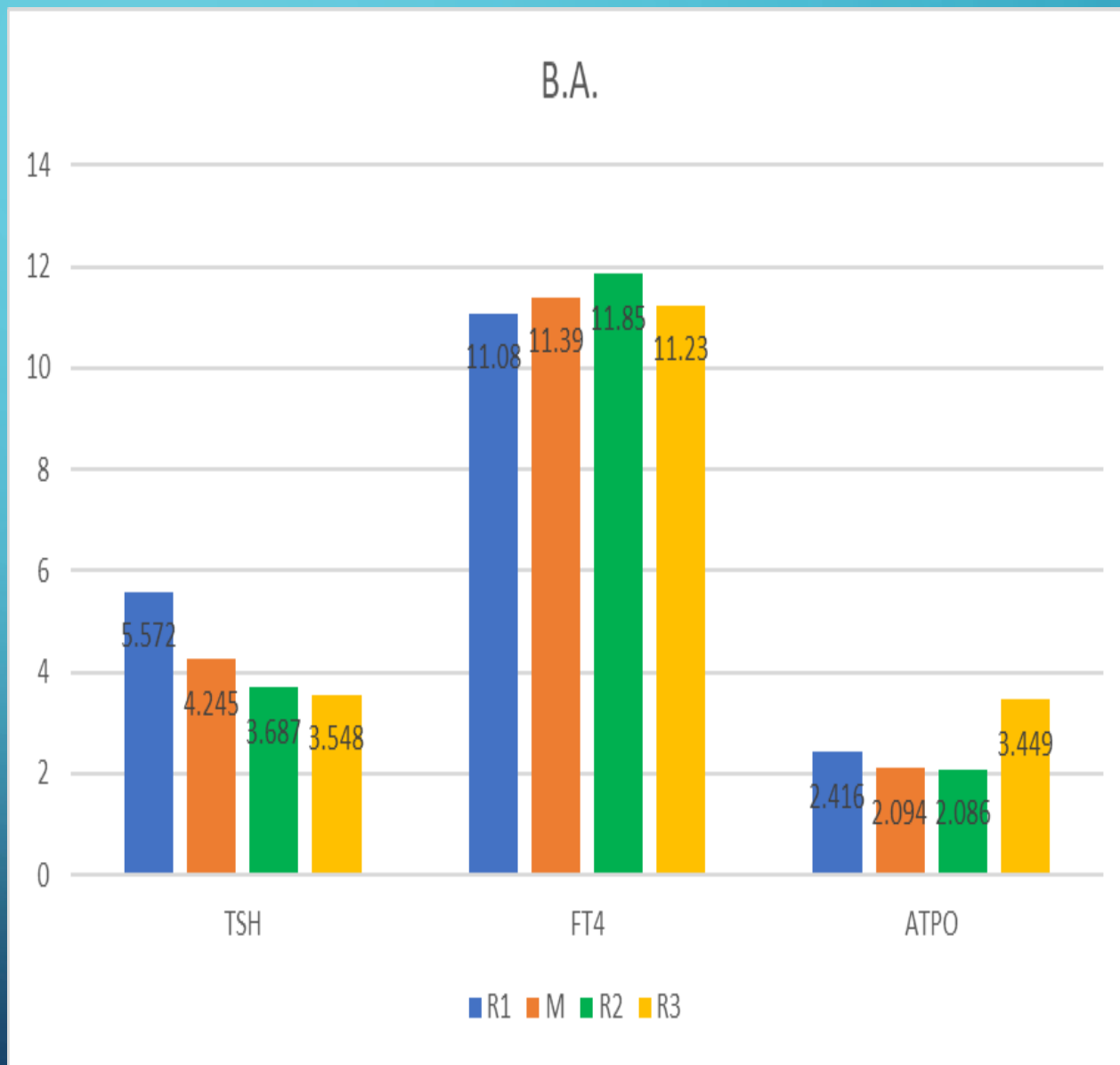
THE ROLE OF ACUPUNCTURE POINT IG13 IN ENDOCRINE REGULATION

- Patient D.L., a 71-year-old who presented with a TSH (thyroid-stimulating hormone) level of 12.74 (normal range=0.3-4.5), shows a significant decrease in TSH levels following acupuncture sessions with IG13. Additionally, her ATPO (anti-thyroid peroxidase) level also decreases, even though it was somewhat within normal limits.



THE ROLE OF ACUPUNCTURE POINT IG13 IN ENDOCRINE REGULATION

Patient B.A., a 34-year-old with Type 1 diabetes, obesity, and dyslipidemia, initially presented with a TSH (thyroid-stimulating hormone) level of 5.572 μ UI/ml, which exceeds the upper limit of 4.5 μ UI/ml. After the application of the IG13 acupuncture point in ten sessions, the TSH level decreases, normalizes, and maintains within the normal range.



THE ROLE OF THE IG13 ACUPUNCTURE POINT IN ENDOCRINE REGULATIONS

- CONCLUSIONS AND DISCUSSIONS:

- It has been clearly observed that the acupuncture point IG13 has an endocrine regulation role, **tending to normalize values, especially those outside the normal range;**
- It was also observed that it has an action of **decreasing Cortisol, thus the stress hormone**, which was also observed when testing with the Biowell device.
- There was also a general trend of **decreasing TSH values, ATPO, and balancing Parathyroid hormone and Prolactin.**
- In conclusion, the role of the acupuncture point IG13 **in endocrine regulation** has been demonstrated!

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- **LIFE DIAGNOSTIC CENTER-** Laborator de analize medicale a fost înființat în anul 2018 . Fondatorii Dr. Chimist medical principal Ramona Beloiu și economist Felicia Ileana Pîrvutoiu, aveau deja experiența de peste 10 ani în Managementul serviciilor medicale- analize medicale de laborator când s-au gândit că pot oferi comunității, persoanelor indiferent de vârstă, sex, categorie socială, serviciile medicale de care au nevoie.
- Analizoare performante, de mare acuratețe, infrastructura foarte bine dezvoltată, personal specializat -Medici, Biochimisti, Biologi, Chimisti, Asistenți medicali, Registratori medicali -și desfașoară activitatea în beneficiul pacientului.
- În laboratorul de analize aparținând de Life Diagnostic Center se execută o gama largă de analize medicale din domeniile Hematologie, Chimie clinica, Imunologie, Microbiologie.
- Laboratorul de analize medicale Life Diagnostic Center a dezvoltat, respectă și îmbunătățește continuu Politică calității serviciilor medicale. Acest lucru este reflectat de acreditarea obținută conform SR EN ISO 15189:2013 încă din 2019 de către Asociația de Acreditare din România.
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- Vă așteptăm, să beneficiați de serviciile noastre, în punctele de recoltare din București. Str. Ioan Bianu nr 24, sector 1
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**THOUSANDS OF THANKS TO YOU TO
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TO THE PARTICIPANTS IN THE STUDY**