



The Mechanism Study of Head Rhythm Pattern Massage Consistent with Five-Tone Rhythm for Insomnia Patients

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Abstract: Main research objectives: To observe and compare the effects of head rhythmic massage with five-tone rhythmic massage on the improvement of insomnia patients. Method: The sources of the cases are all from May 2020 to May 2021 in our hospital's Tuina ward, 60 patients with insomnia symptoms were selected. Randomly divided into two groups: Group A is treated with head rhythmic hand massage therapy consistent with the five-tone rhythm. The treatment group B is a traditional head massage method combined with five-line music therapy. Each treatment is 15 minutes, two times per day, five times per week, two weeks and one course of treatment, and one course of treatment. The Hamilton Anxiety Scale HAMA, the Bisborg Sleep Quality Index Scale PSQI and the Insomnia Severe Index Scale ISI were compared for all patients before and after treatment. The therapeutic effect of two groups was observed and the mechanism of action was discussed. Conclusion: Insomnia in both groups improved. But the head hand massage therapy which is consistent with the five-tone rhythm can relieve and improve the insomnia symptoms, and the curative effect is obviously better than the traditional massage therapy combined with the five-line music therapy in the treatment group B, which is worth clinical promotion.

Keywords: Massage, Music Therapy, Insomnia, Five Music Lines, Head Massage

1. Introduction

Insomnia is called sleepless in traditional Chinese medicine, where the main medical condition is yin-yang imbalance. The earliest available textual research documents are the Yin-Yang Eleven-Pulse Moxibustion Scriptures and the Foot-Arm Eleven-Pulse Moxibustion Scriptures, which were copied on silk before the Tang Dynasty. The first two books call this certificate "sleepless", "sleepless" and "sleepless"; [1] it is also recorded in the Internal Classic; Head massage therapy insomnia has a long history, the earliest can be traced to the "Lingshu · Jingmai" records that "Hand-foot Yang Ming Jing is distributed in the forehead and face, hand-foot Yang Jing is distributed in the side of the head", [2] and Ren Mai and Du Mai are all yin-yang qi of the Governor General and moving in the middle of the head, so the head massage therapy insomnia is feasible.

Head rhythmic five-line music massage therapy is a rhythmic music therapy method which is based on the head massage method in the traditional massage method, combines with the traditional Chinese medicine five-tone therapy theory

as the basis, and combines with the modern music therapy theory as the idea to integrate and innovate. In clinical practice, the author has been recognized by the vast number of patients, and achieved good treatment effect. The clinical observation of the treatment program is as follows.

1.1. General Information

The 60 patients were insomnia patients in May 2020-May 2021 in Tuina ward of our hospital. According to the double numbers of the clinic visit, after informed consent and signing the letter of consent with knowledge, the clinic treatment may be randomly divided into 30 cases in Group A of treatment and 30 cases in Group B of treatment. The youngest patients were 23 years old and the oldest 60 years old. the shortest one week, the longest five. There was no significant difference ($P > 0.05$) between the basic conditions of admission of the two groups, which was comparable, as detailed in Table 1.

Table 1. Comparison of the basic information of patients admitted to hospital.

Groups	Male/Female	Age	History (weeks)
Treatment group B (n = 30)	12/18	45±1.513	3.074±1.661
Treatment group A (n = 30)	10/20	46±1.455	3.050±1.633

After statistical analysis, the sex, age and course of the two groups of patients had no significant differences in $P>0.05$ and were comparable.

The Hamilton anxiety scale (HAMA), Bisborg sleep quality index (PSQI) and insomnia severity index (ISI) were compared before treatment ($P>0.05$). There were no significant differences between the two groups, and they were comparable.

1.2. Diagnostic Criteria

1.2.1. Diagnostic Standards for Western Medicine

According to the diagnostic criteria for insomnia in the Chinese Classification and Diagnosis of Mental Disorders (3rd Edition, CCMD-3, and JAMA Psychiatry Branch):

(1) Typical symptoms of insomnia, taking sleep disorder as the main symptom, other symptoms are secondary to insomnia, including difficulty falling asleep, easy to wake, multiple dreams, early waking, can no longer sleep after waking, wake feeling tired or daytime sleepiness. (2) The aforesaid sleep disorders shall occur at least 3 times a week and last for more than January. (3) Insomnia causes significant distress or decreases in the efficiency of mental activities or hinders social functioning. (4) Not being part of any of the symptoms of a physical illness or mental disorder.

1.2.2. Diagnostic Standards of Traditional Chinese Medicine

Refer to State Administration of Traditional Chinese Medicine, Traditional Chinese Medicine Diagnostic Curative Effect Standard: [3] Criteria for the Diagnosis of Insomnia:

(1) The light person is difficult to get sleep or awake easily, and sleepless after waking up for more than 3 consecutive weeks, the heavy person is hard to sleep all night. (2) Often accompanied by headache, dizziness, palpitations, amnesia, mental fatigue, restlessness, multiple dreams and other symptoms. (3) The disease often has the history of eating disorders, mood disorders, labored, thinking too much, after illness, deficiency of body etc. (4) No other organic diseases that interfere with sleep were found after examination by the system and laboratory.

1.2.3. Incorporation of Criteria

(1) The insomnia diagnosis standard is met. (2) According to the overall rating of PSQI >7 . (iii) All patients should discontinue the treatment within the week prior to inclusion. (4) Patients should be included in the study with voluntary participation and the signing of the relevant ethical consent.

1.2.4. Exclusion Criteria

(1) Those who do not meet the diagnostic criteria or are included in the criteria. (2) Temporary insomnia caused by environmental and external factors. (3) Insomnia caused by various organic lesions. (4) Insomnia caused by sleep disorders. (5) Those who have been diagnosed as suffering from mental diseases by specialized doctors.

1.2.5. Test Case Termination Criteria

(1) Those who suffer serious adverse reactions, special physiological changes or other unexpected events during the duration of the experiment are no longer suitable to be tested; (2) The worsening of the disease during the trial period and the possibility of danger necessitating urgent measures; (3) Patients are unwilling to continue to be tested during the test; and (4) the subject violated the clinical trial scheme during the treatment period.

1.3. Methods of Treatment

The main source of the case: The source of the cases is all from May 2020 to May 2021. There were 60 cases of insomnia in the ward of our hospital. The patients were randomly divided into two groups, 30 cases of treatment group A and 30 cases of treatment group B. The specific research methods were as follows:

1.3.1. Treatment Group A

On the basis of the conventional treatment of the massage department, the traditional massage treatment is given to the patient's head; the massage method adopts the acupoints which are commonly used in the head, and the acupoints of the head are respectively arranged according to the acupoints such as Baihui, Sishencong, etc., and each acupoint is about one minute; then the dispersing method, the massage method, the massage method, and the other methods are adopted; the frequency of the massage method is 60 to 100 times per minute; the strength of the massage method is based on the tolerance of the patient. Meanwhile, the music is composed of five lines and the volume is controlled by the comfort and relaxation of the patient. The music selecting formula also adopts different tunes according to different TCM syndromes of insomnia patients, including five types of tunes of palace, commerce, horns, emblem and feather. The Selection Angle of Stagnation of Liver-Qi-Commercial Music The Choice of Angle-Gong Tune Music Based on Deficiency of Heart and Spleen the spleen and stomach injury type chooses palace-feather type music; Incompatibility of the heart and the kidney type selector-synchro type music. Patients and physicians alike use headphones to listen to music and observe and record their effects. Each patient is treated for 15 minutes, 2 times per day, 5 days per week, 2 weeks and 1 course of treatment, and the treatment lasts for 1 course.

1.3.2. Treatment Group B

On the basis of the conventional treatment of massage department, the head rhythm type hand massage therapy which is consistent with the five-tone rhythm is given, the strength of the hand massage is based on the patient tolerance, and the frequency of the hand massage is the same as the music. That is, the patient massage is simultaneously matched with the five-line music treatment, wherein, the frequency and the rhythm of the therapist's method completely coincide with the selected music melody and rhythm, and the therapist and the patient listen to the same group of music at the same time. The treatment track is simultaneously played on the four lines by the

headphone shunt. to facilitate the physician's need for consistency with the tone. The volume is controlled by the comfort and relaxation of the patient. According to different types of TCM syndromes of insomnia patients, the music selection formula adopts different tunes, including five types of tunes of palace, commerce, horns, emblem and feathers. The Selection Angle of Stagnation of Liver-Qi-Commercial Music The Choice of Angle-Gong Tune Music Based on Deficiency of Heart and Spleen the spleen and stomach injury type chooses palace-feather type music; Incompatibility of the heart and the kidney type selector-synchro type music. And observe and record its therapeutic effects. Each patient is treated for 15 minutes, 2 times per day, 5 days per week, 2 weeks and 1 course of treatment, and the treatment lasts for 1 course.

1.4. Course of Treatment

The two groups of patients are treated for 15 minutes each time, two times each day, five days each week, two weeks and one period of treatment, and the treatment lasts for one period.

1.5. Observation Indicators

1.5.1. Criteria for Determining Curative Effect

According to the Guidelines of the Ministry of Health for Clinical Research of New Traditional Chinese Medicine in 93 years, the criteria for determining the curative effect of insomnia: [4] (1) Clinical recovery: The sleep time is restored to normal or the night sleep time is more than 6 hours, the sleep is deep and the spirit is full after waking; (2) Significant effect: Sleep improved significantly, sleep time increased more than 3 hours, sleep depth increased; (3) Effective: symptoms are reduced, sleep time is less than 3 hours longer than before; (4) Invalid: Insomnia without improvement or exacerbation after treatment.

1.5.2. The Pittsburgh Sleep Quality Index Scale (PSQI)

Which was developed by Dr. Buysse, a psychiatrist at the University of Pittsburgh in the United States, in 1989 and used to evaluate the subjects' subjective sleep quality in the last month. Consists of 18 entries. The invention mainly comprises seven components of subjective sleep quality, sleep time, sleep time, sleep efficiency, sleep disturbance, hypnotic drug application and daytime functional disturbance dimension, and takes a total score of > 7 as the standard for poor sleep

quality. The score of each component before and after treatment and the accumulated PSQI total score of the patient were recorded, the total score range is 0 to 21, the higher the score is, the worse the sleep quality is. The sleep quality is better when the total score is ≤ 7 points.

1.5.3. The Insomnia Severity Index (ISI)

The scale is divided into two parts: the severity of insomnia and the degree of self-satisfaction for sleep. The higher the score, the more serious the insomnia, and the self-assessment of patients before and after treatment. [5]

1.5.4. Hamilton Anxietyscale (HAMA)

The scale is divided into body anxiety and mental anxiety. The higher the score, the more serious the anxiety. Before and after treatment, the patient self-evaluation.

1.6. Criteria for Determination of Curative Effect

Determined by reference to the 2012 edition of Curative Effect Standard for Diagnosis of Traditional Chinese Medical Evidence [6] and the PSQI rating, it is divided into 4 grades, namely, recovery, efficacy, effectiveness and invalidity. Healing: symptoms disappear, PSQI rating ≤ 7 ; Showing efficacy: remission, PSQI rating ≤ 7 ; Valid: Symptom reduction, PSQI rating > 7 ; invalid: Symptoms did not improve. PSQI rating > 7 . Efficiency = (Heals + Effects + Effects) / $n \times 100$.

1.7. Statistical Methods

In this study, the data are analyzed by SPSS 21.0 software package. The data of normal distribution is expressed by X², and the data of normal distribution is described by median if it is not. If normal distribution is satisfied, t test is used, and if normal distribution is not satisfied, rank sum test is used. If $P < 0.05$, the difference is statistically significant.

2. Treatment Outcomes

2.1. Two Groups of Clinical Efficacy Comparison

Such as table 2, table 3, the results have significant differences ($P < 0.05$), with statistical significance, indicating that the treatment of A group significantly better than the treatment of B group.

Table 2. Comparative observation of the clinical effect of two groups of therapy.

Group	Total Effective/ total valid	Invalid	Total	total efficiency/ total valid
Treatment of group A n=30	20	10	30	66.67%
Treatment of group B n=30	28	2	30	93.33%
Total	48	12	60	80.00%

(Using the latest SPSS21.0 software analysis results, where $P < 0.05$, has significant statistical significance).

Table 3. Comparison of clinical efficacy between two groups of therapies.

Groups	Recovery (rate)	Significant (rate)	Effective (rate)	Invalid (rate)
Treatment group A n = 30	4 (13.33%)	6 (20.00%)	10 (33.33%)	10 (33.339%)
Treatment group B n = 30	19 (63.33%)	6 (20.00%)	3 (10.00%)	2 (6.67%)

Analysis results: $P < 0.05$ showed that the clinical healing, effective, effective and ineffective group comparison between the two groups of treatment patients has statistical significance.

2.2. Comparison of the Scores and Each Item Before and After PSQI Treatment Between Two Groups of Patients as Shown in Table 4

Table 4. The Scores and Comparison of PSQI Treatment Before and After Treatment ($\bar{x}\pm s$).

Groups	Treatment of group A n=30		Treatment of group B n=30	
	before treatment	after treatment	before treatment	after treatment
Sleep quality	2.48±0.70	2.01±0.69*	2.43±0.65	1.24±0.76* ^{&}
Falling asleep	2.29±0.98	1.90±0.84*	2.30±0.76	1.21±0.54* ^{&}
Sleep time	2.45±0.80	2.12±0.73*	2.37±0.74	1.53±0.60* ^{&}
Sleep efficiency	2.42±0.97	2.13±0.75*	2.19±1.02	1.25±0.88* ^{&}
Sleep disorder	1.69±0.80	1.03±0.77*	1.74±0.71	0.61±0.32* ^{&}
Daytime function	2.47±0.81	1.97±0.99*	2.51±0.77	1.30±0.75* ^{&}
PSQI Total	13.78±2.50	10.11±3.36*	13.54±2.37	6.13±2.27* ^{&}

Note: Compared with the group before treatment, *P<0.5; &P<0.5) Comparison with Treatment of Group B.

The differences between the two groups were not statistically significant ($P>0.05$), and the two groups were comparable. The differences between the two groups of PSQI scale factors were similar. After treatment and before treatment, the PSQI factors and the total score decreased, and the differences were statistical ($P<0.05$), indicating that both

treatments can improve the symptoms of insomnia patients. The difference between treatment group A and treatment group B was statistically significant ($P<0.05$), which indicated that the experimental group was better than treatment group B in improving PSQI score. See table 3.

2.3. Comparison of ISI and HAMA Scores Between Two Groups Before and After Treatment, as Shown in Table 5

Table 5. Comparison of ISI, HAMA Scores ($\bar{x}\pm s$) in Two Patients before and after Treatment.

Groups	ISI		HAMA	
	Before treatment	After treatment	Before treatment	After treatment
Treatment group A n=30	18.86±5.48	13.24±4.75*	16.92±8.60	11.74±7.32*
Treatment group B n=30	19.05±5.58	8.17±4.25* ^{&}	17.15±8.73	8.36±6.55* ^{&}

(Note: Compared with the group before treatment, *P<0.5; &P<0.5) Comparison with Treatment of Group B.

ISI and HAMA scores of insomnia patients in two groups were compared before and after treatment with ISI and HAMA scores in two groups, and the differences were not statistically significant ($P>0.05$). The difference was statistically significant ($P<0.05$), and the treatment group A was better than the treatment group B ($P<0.05$).

3. Discussion

3.1. Understanding of Five Elements Music Theory by TCM

The theory and mechanism of music therapy in China first appeared in the period of "Internal Classic". The five-tone therapy of "Gongdong Spleen, Shangdong Lung, Jaodong Liver, Zhengdong Heart and Feather Dongshen" was recorded. The viewpoint of "There are six qi in the sky, five tastes are produced, five sounds are produced, five sounds are produced, six symptoms are produced, six symptoms are produced, and six symptoms are salacious" was also stated in the chapter of "Medical Theory and Music" in the period of spring and autumn. In the Jin and Yuan period, Zhang Zi, one of the four masters, was good at using music to cure his illness, "dancing all the time under the needle, responding to the flute and drums, and treating those who are worried and sore." In the Yuan Dynasty, Zhu Zhenheng clearly pointed out that "Music is also medicine". [7] Zhang Jiebin, a doctor in the Ming Dynasty, wrote in "The Book of Music Is Attached to the Wing Luyuan," that

"the spirit of harmony between heaven and earth is also the spirit of music..... The Law is the righteous spirit of heaven and earth, and the voice of man is the voice of man," which holds that music "can fit heaven and earth." The expression of music and the regulation of yin and yang can be traced back to the Internal Classic which regards the secret of yin and ping yang as the basis of physical and mental health. The dialectic of Bagang points out that yin and yang disorder is the pathologic root, and the fundamental of disease treatment lies in regulating yin and yang to make them balance. In the Taiping Scriptures of Eastern Han Dynasty, the author used the theory of yin and yang to explain the meaning of health preservation and the origin of music. The book believed that the laws of the universe corresponding to the movement of all things, and the laws of yin and yang living together were the basis of the development of music. [8] Music can be explained by yin and yang: high as sun, low as overcast; make light of the major wind, while change slightly to overcast; strong is positive while weak is negative; use light and shade; gold leather sound for yang, silk wood sound for yin and so on. [9] Many studies have shown that the good use of music can have an impact on people's mood and therapeutic effect. In order to better observe the impact of different treatment, in this clinical observation, both groups of patients were equipped with a unified treatment track to eliminate the interference of music therapy itself for treatment.

3.2. The Basis and Significance of Head Rhythmic Five-Line Music Massage Therapy

The physiological characteristics of the five viscera correspond to the five tones. The Four Diagnostic Decisions Wen Zhen records that the spleen responds to the business, the voice of the spleen responds to the business, the voice of the spleen responds to the business, the voice of the liver responds to the angle, the voice of the liver responds to the angle, the voice of the liver responds to the voice of the liver responds to the voice, the voice of the kidney responds to the feather, and the voice of the liver responds to the feather, and the voice of the liver responds to the feather. Because the five tones correspond to the physiological functions of the five viscera, the five viscera correspond to the five tones. [10]

The neurobiological mechanisms of insomnia are complex. From the proposed mechanism of excessive arousal, to the release of neurotransmitters in different brain areas, from neuroendocrine to neuroimmune mechanism, from cell level to gene molecular level, multiple factors are linked together to take part in regulating the sleep-arousal cycle. Any abnormal link may lead to sleep-arousal rhythm disorder causing insomnia. [11] Music regulates human emotions, which change with the music. The book *The King of Qin in Jingche Forest, The Imperial Conquest*, records "As the Emperor Passes Away, His Majesty the King Rises Away, His Majesty the King Sings with His Majesty the King. The 'variable emblem' is a scale close to a microtone between the horn and the microtone. Different sounds can have different effects on the emotion of people, the horn sound enters into the liver and is the characteristic of "wood", the melody is vigorous, the emotion micro sound which can relieve the "thinking" is the heart, the melody is the special victory of "fire", and the melody is bright and happy. The neurobiological mechanisms of insomnia are complex. [12] From the proposed mechanism of hyperarousal, to the release of neurotransmitters in different brain areas, from neuroendocrine to neuro-immune mechanism, from cell level to gene molecular level, the multi-factor loop interlock. [13]

This study found that the head massage therapy consistent with the five-tone rhythm is based on the traditional massage method, combined with the traditional Chinese medicine five-tone treatment theory as the basis, and the modern music therapy theory as the idea of the integration of innovative a rhythmic treatment method with the rhythm of the hand rhythm and the five music rhythm consistent. The main feature of this method is that the change of rhythm is consistent with the rhythm of music. The invention is essentially different from the fixed massage rhythm of the traditional method. The characteristics of the technique change with the change of the selected music and the rhythm of the selected music. The invention can better integrate the patients into the music of five lines, thereby having a double effect on treatment. The method has higher requirements on the music quality of the massage physician, and needs not only a more pure massage method as the work foundation, but also

a strong sense of pleasure. The massage doctor is required not only to be familiar with music, but also to be able to combine the rhythm of the hands and the beat of the music most effectively, which is the key and difficult point of the method.

Long-term insomnia not only affects human life and work, but also causes severe anxiety and depression. Often causes the doctor-patient dispute, seriously affects the broad clinical workers medical safety problem. It is the fundamental task of clinical workers to study the mechanism of insomnia and to understand insomnia fundamentally and to help insomnia treatment. The Pittsburgh Sleep Quality Index (PSQI) scale is one of the common clinical insomnia patient observational scales. Massage therapy has a long history of insomnia treatment, and the five-tone therapy associated with insomnia can be traced back to ancient times. Five-tone therapy with massage has long been a combination of massage and music listening. [14] At present, the research on hand massage is still blank. The innovative point of this study is based on the combination of traditional head massage therapy for insomnia and music therapy. It proposes a new massage method, which is the frequency of hand, rhythm and rhythm of the selected music. It provides a new development direction for traditional Chinese massage therapy. The invention aims to popularize the new idea of better combination of traditional Chinese medicine massage and traditional Chinese medicine five-element music. The invention breaks the traditional massage method with relatively uniform rhythm and frequency, drives the frequency of the massage method by music, and forms a novel massage method with uneven frequency of the massage method but exact curative effect. Based on the traditional five-tone therapy theory of traditional Chinese medicine as the starting point, combined with the application of traditional head massage, at the same time, the use of modern music therapy theory, and from which select suitable for contemporary insomnia patients more acceptable music for treatment. The present invention selects and integrates the five-tone music in the modern music to obtain a set of massage method specially used for combining music therapy. But many of the objective data affecting the efficacy of the treatment need to be collected by deeper and higher software. Due to the clinical equipment, software and other factors, there is no more objective data collection, pending further research. At present, the most popular research on insomnia mechanism is 5-HT expression. [15] The therapeutic mechanism of the drug needs to be perfected and discussed. It is expected that clinical application will be extended and further research will be carried out.

In conclusion, the head massage therapy which is consistent with five-tone rhythm has definite clinical curative effect, can significantly improve the PSQI, ISI and HAMA scores of insomnia patients and improve the discomfort symptoms of patients, the clinical effective rate is up to 93.33%, compared with the treatment of 66.67% group B, the difference is statistically significant ($P < 0.05$). The head hand massage which is consistent with the five-tone rhythm can exert the advantages of the traditional Chinese medicine massage and the five-line music for treating insomnia, and is a hand rule

treatment with good curative effect, no pain and easy acceptance.

References

- [1] Sun Hongsheng, Yan Jilan. A Summary of Non-Sleep Disease Syndromes in A Brief Account of Gold Collection [J] Shi Zhenguo Medical and Chinese Medicine 2005, 16 (3): 182-183.
- [2] Cai Huizi, Jiang Feng. Professor Zhang Boli's Experience in Treating Insomnia [J]. Journal of Tianjin University of Traditional Chinese Medicine 2019, 38 (6): 521-524.
- [3] State Administration of Traditional Chinese Medicine. Standard of Curative Effect on Diagnosis of Traditional Chinese Medicine Diseases [M]. Nanjing: Nanjing University Press, 1994: 19-20.
- [4] The Ministry of Health of the People's Republic of China. Clinical Study on Insomnia Treated by New Traditional Chinese Medicine No. 1 [M]. Beijing: People's Health Press 1993: 186-188.
- [5] Wang Xuexia, Zhang Honglei. Treatment of Insomnia after Stroke with "Sanshen Needle" [J]. Chinese Journal of Traditional Chinese Medicine, 2021, 35 (03): 666-670.
- [6] State Administration of Traditional Chinese Medicine. Therapeutic Effect Standard for Diagnosis of Traditional Chinese Medicine Syndrome [M]. Beijing: China Pharmaceutical Science and Technology Press, 2012, 31-32.
- [7] Zhang Wei. Study on the Theory and Clinical Application of Five-tone Regulating Meridians [D]. Beijing University of Chinese Medicine, 2010.
- [8] Xu Zhengguang, Zhang Xingping, Chen Junyu Wait. Insomnia: A Study on the Differences in Sleep Structure Parameters of PSG with Lung Non-Tibetan and Kidney Non-Tibetan Types in Chinese Medicine [J]. Chinese Journal of Traditional Chinese Medicine, 2018, 533 (7): 2795-2797.
- [9] Zhang Yu, Sun Shentian, Yang Shenqiu. Clinical Observation on Treatment of 30 Cases of Insomnia Caused by Liver Depression and Spleen Deficiency by Transcranial Repeated Acupuncture [J]. Chinese Journal of Traditional Medicine and Technology 2019, 26 (05): 714-715.
- [10] Wen Biqin. Music Therapy in China: A Case Study of Chinese Traditional Medical Theory of "Five-tone Therapy" [J]. Music Space-time, 2016 (04): 64-65.
- [11] Irwin M, Opp M. Sleep-health: reciprocal regulation of sleep and innate immunity [J]. Neuropsychopharmacology, 2016, 42 (1): 129-155.
- [12] He Xulin. Clinical Observation on Insomnia Treated by Acupoint Massage [J]. Hubei Journal of Traditional Chinese Medicine, 2012, 34 (1): 63.
- [13] Wang Qiaochu, Xu Hong, Su Hong Treatment of All Five Viscera by Liver Theory [J]. Shanghai Journal of Traditional Chinese Medicine, 2005, 19 (4): 3-4.
- [14] Uguen M, Perrin D, Belliard S, et al. Preclinical evaluation of the abuse potential of Pitolisant, a histamine H (3) receptor inverse agonist / antagonist compared with Modafinil [J]. Br J Pharmacol, 2013, 169 (3): 632-644.
- [15] Huang Z, Liang P, Jia X, et al. Abnormal amygdala connectivity in patients with primary insomnia: evidence from resting state M I [J]. Eur J adiolo, 2012, 81 (6): 1288-1295.