

Acupuncture for Dyspepsia Patients at the Griya Sehat Thabib Clinic Prof. Jim Bekasi

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Keywords: *dyspepsia; Acupuncture; Food Stagnation; Complementary Therapy; Traditional Chinese Medicine*

ABSTRACT

Dyspepsia is a collection of symptoms related to gastroduodenal disorders, such as pain or burning in the epigastrium, postprandial fullness, upper abdominal bloating, and early satiety. Dyspepsia is classified into two types, namely organic dyspepsia and functional dyspepsia. Organic dyspepsia is accompanied by structural abnormalities such as gastritis, peptic ulcers, gastric cancer, gastroesophageal reflux disease (GERD), and gastric acid hypersecretion, whereas functional dyspepsia does not show abnormalities on physical examination or endoscopy. Dietary and lifestyle factors play a major role in the occurrence of dyspepsia, including the consumption of spicy, fatty, and baked foods; overeating; coffee consumption; smoking habits; alcohol intake; the use of anti-inflammatory drugs; and lack of physical activity. This study is qualitative research with a case study approach using a purposive sampling technique on one respondent. The measuring tool used was the change in dyspepsia symptoms before and after the intervention. The results showed that after four sessions of acupuncture therapy, there was a decrease in pain intensity and dyspepsia symptoms. Based on these results, acupuncture can be considered a complementary therapy for the treatment of dyspepsia in patients at the *Griya Sehat Thabib Clinic Prof. Jim Bekasi*.

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INTRODUCTION

Dyspepsia is one of the disorders of the upper gastrointestinal tract that is often encountered and is characterized by discomfort or pain in the epigastrium, a feeling of fullness, bloating, early satiety, and nausea. This condition can be triggered by various factors, including the type of food consumed, psychological factors, and irregular or excessive eating patterns (overeating) (Brytek-Matera & Czepczor, 2017; Piccinni et al., 2015; Serin & Şanlıer, 2018). Dyspepsia due to overeating usually appears acutely after the consumption of large amounts of food or foods high in fat, which cause increased intragastric pressure and gastric acid secretion (Habibie, 2021). Globally, the prevalence of dyspepsia is estimated to reach 15–40% and is one of the main causes of visits to health facilities. In Indonesia, the prevalence of dyspepsia is reported at 40.8%, with a higher incidence rate in women than in men, and the prevalence increases with age (Prasetyo et al., 2023). Data from visits at the Griya Sehat Thabib Clinic Prof. Jim Bekasi also show that dyspepsia is a digestive complaint that is quite commonly encountered, with patients regularly visiting to receive acupuncture therapy (Habeib et al., 2026).

Management of dyspepsia generally involves pharmacological therapies such as H₂ receptor blockers and proton pump inhibitors; however, long-term use has the potential to cause side effects (Habibie, 2021). Therefore, a safer complementary therapy approach is needed, one of which is acupuncture. Acupuncture is a treatment method within Traditional Chinese Medicine (TCM) that aims to balance the flow of Qi in the body through stimulation of specific acupuncture points (Hamvas et al., 2016; Matos et al., 2021; Qi et al., 2024). From the perspective of TCM, dyspepsia is viewed as a manifestation of various syndromes, one of which is food stagnation (Shi Ji) caused by overeating, which interferes with the function of the Spleen and Stomach, resulting in feelings of fullness, distension, nausea, and decreased appetite (Maciocia, 2015).

Various previous studies have demonstrated the effectiveness of acupuncture in treating indigestion. Kim et al. (2020), in their meta-analysis, reported that acupuncture significantly reduced the symptoms of functional dyspepsia compared with placebo or conventional treatment. Chen et al. (2021) also found that acupuncture was effective in improving the quality of life of patients with functional dyspepsia with minimal side effects. From a biomedical perspective, Sun et al. (2022) explained that acupuncture modulates the autonomic nervous system by increasing parasympathetic activity, thereby improving gastrointestinal motility and decreasing visceral pain sensitivity. Tian et al. (2021) added that stimulation of certain acupuncture points, such as ST36 (Zusanli) and PC6 (Neiguan), has been shown to improve gastric motility and accelerate gastric emptying in patients with dyspepsia. In the context of TCM, Jie (2008) and Maciocia (2015) have extensively documented the patterns of dyspepsia syndromes as well as the acupuncture points relevant to each pattern, including food stagnation.

Although scientific evidence regarding the effectiveness of acupuncture for dyspepsia continues to grow, a significant research gap still exists (Fan et al., 2025; Huang et al., 2022; Wei et al., 2025; J. Zhang et al., 2024; T. Zhang et al., 2023). Most existing research focuses on functional dyspepsia in general clinical settings using randomized controlled trial designs; however, there are still limited studies exploring the application of holistic acupuncture care in patients with acute dyspepsia with food stagnation patterns in community-based traditional health services. Research employing an in-depth qualitative case study approach remains rare, yet this approach is important for understanding the examination process, TCM diagnostic procedures, therapy planning, and comprehensive evaluation of symptom changes in the context of real clinical practice.

The novelty of this study lies in the application of acupuncture care through a qualitative case study approach that simultaneously integrates TCM and biomedical perspectives in dyspepsia patients with food stagnation patterns at the Griya Sehat Thabib Clinic Prof. Jim Bekasi. The study not only measures changes in symptoms but also documents in detail the TCM diagnostic process (including tongue and pulse examinations), acupuncture point selection based on syndrome patterns, and the evaluation of therapy responses from session to session. This holistic approach is expected to provide a comprehensive picture of how acupuncture works in a real clinical context and how patients respond to therapy both subjectively and objectively.

This research focuses on the application of acupuncture care through a qualitative case study approach in dyspepsia patients within traditional health services. This study aims to determine the changes in dyspepsia symptoms after acupuncture therapy and to describe in

depth the process of acupuncture care for dyspepsia patients at the Griya Sehat Thabib Clinic Prof. Jim Bekasi. The benefits of this research include several aspects. For the development of scientific knowledge, this research contributes to the acupuncture literature on dyspepsia through a qualitative case study approach that is still limited in number. For health practitioners, the results of this study may serve as a reference in the application of acupuncture as a complementary therapy for dyspepsia in health services. For the community, this study provides information about safe and effective therapeutic alternatives for managing indigestion. Meanwhile, for the development of traditional health services, this study supports efforts to integrate acupuncture into the national health service system as part of a holistic approach to managing functional disorders of the gastrointestinal tract.

RESEARCH METHODS

This study used a qualitative method with a case study approach. This approach was chosen to obtain an in-depth picture of acupuncture care in dyspepsia patients, including the process of studying, enforcing diagnosis, planning, implementation, and evaluation of acupuncture therapy holistically. The research was carried out at the Griya Sehat Thabib Clinic Prof. Jim Bekasi, on September 18-29, 2025. The study participants amounted to one dyspepsia patient who was selected using the purposive sampling technique, with the criteria that the patient experienced dyspepsia, was willing to become a respondent, and underwent acupuncture therapy according to the therapy plan. Data collection was carried out through clinical observation, direct interviews, literature studies, and documentation. Observations were made to assess the subjective and objective condition of the patient before and after therapy. Interviews are used to explore complaints, therapeutic responses, and changes felt by patients. Literature studies are used as a theoretical basis related to dyspepsia and acupuncture therapy, while documentation is in the form of recording and photographing therapy activities. The ethical aspect of the research is fulfilled through the provision of informed consent and the confidentiality of respondents' identities. The data analysis in this study was carried out in a qualitative descriptive manner with a thematic approach. The data obtained from interviews, observations, and documentation is analyzed through several stages, starting with data reduction which is carried out by selecting, simplifying, and transforming raw data into more systematic records. Furthermore, data presentation was carried out in the form of descriptive narratives, symptom development tables, and matrix of changes in patient conditions before and after the intervention to facilitate interpretation. Conclusions were drawn by comparing field findings with relevant theories, both from a biomedical perspective and Traditional Chinese Medicine (TCM), in order to understand the pattern of symptom changes and the mechanism of action of acupuncture in the case of dyspepsia. The validity of the data is maintained through source triangulation, which is comparing the results of interviews with the results of clinical observations and documentation, as well as conducting member checks on participants to ensure the accuracy of data interpretation.

RESULTS AND DISCUSSION

The results of this study show that the application of acupuncture therapy provides clinical changes in dyspepsia patients with food stagnation patterns. The changes observed included a decrease in fullness and fullness in the epigastrium, a decrease in nausea, and an

increase in comfort after eating. These findings indicate that acupuncture plays a role in restoring digestive function through the regulation of the Gastric and Spleen systems. In the perspective of *Traditional Chinese Medicine* (TCM), dyspepsia due to food stagnation occurs when the transformation and transportation process by the Spleen is disrupted, so that the flow of gastric Qi becomes inhibited. This condition is reflected in the patient's subjective complaints as well as objective findings in the form of thick and sticky tongue membranes, pale tongue with cracks in the middle, and weak and deep pulse character. Stimulation of acupuncture points such as CV12 (*Zhongwan*), ST36 (*Zusanli*), SP6 (*Sanyinjiao*), LR3 (*Taichong*), and PC6 (*Neiguan*) plays a role in facilitating Qi flow, reducing food stagnation, and balancing the function of the stomach and spleen, so that the symptoms of dyspepsia gradually improve (Jie, 2008:196).

Biomedically, changes in dyspepsia symptoms after acupuncture therapy can be explained through modulation of the autonomic nervous system and improved gastrointestinal motility. Acupuncture stimulation is known to increase parasympathetic activity, reduce visceral pain sensitivity, and reduce nausea through the regulation of neurotransmitters that play a role in digestive function. In addition, the relaxing effect that acupuncture produces contributes to a decrease in stress, which is an important factor in aggravating dyspepsia disorders. The results of this study are in line with previous research which stated that the combination of CV12, ST36, and PC6 points is effective in improving gastric function and reducing symptoms of dyspepsia (Jie, 2008:196). The consistency of these findings suggests that although the research was conducted in the form of a case study, the clinical response to acupuncture therapy was consistent with previously reported scientific evidence.

The limitations of this study include the design of a case study with one participant, so the generalization of the findings needs to be done carefully. In addition, there were no control groups to compare the effectiveness of acupuncture with placebo or standard therapy. Nevertheless, the depth of analysis and detailed documentation makes a valuable contribution to understanding the acupuncture therapy process holistically in dyspepsia patients in real clinical settings. Overall, the findings of this study confirm that acupuncture therapy has the potential to be a safe and effective complementary therapy in treating acute dyspepsia due to food stagnation. In addition to improving digestive symptoms, acupuncture also has a positive impact on patients' comfort and quality of life, thus supporting its application as part of a holistic approach in healthcare.

CONCLUSION

The findings of this study indicate that the application of acupuncture therapy in dyspepsia patients with food stagnation patterns produces a positive clinical response and contributes to the improvement of digestive function. The results demonstrate that acupuncture can reduce the main symptoms of dyspepsia through mechanisms explained by the integration of Traditional Chinese Medicine (TCM) and biomedical perspectives. From the TCM viewpoint, stimulation of specific acupuncture points helps regulate the flow of gastric Qi and reduce food stagnation, while from a biomedical perspective it modulates the autonomic nervous system, thereby improving gastrointestinal motility and regulating the stress response. These mechanisms suggest that symptom improvement reflects not only symptomatic relief but also the restoration of digestive physiological function. Overall, the study strengthens evidence

that acupuncture can serve as a safe complementary therapy for dyspepsia management and may support the integration of acupuncture into conventional health services. Future research is recommended to employ more rigorous study designs, such as quasi-experimental studies with control groups or randomized controlled trials involving larger and more diverse patient populations, as well as laboratory-based investigations to explore the molecular mechanisms of acupuncture in improving digestive function.

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