

## Acupuncture Care for Adiposity Patients at "T'ADE" Cilegon Health Clinic

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### Keywords:

*obesity;*  
*acupuncture;*  
*body mass index;*  
*traditional Chinese medicine;*  
*Complementary Therapy*

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### Abstract

Adiposity is a chronic metabolic disorder characterized by excessive fat accumulation and an increased risk of noncommunicable diseases. Its rising prevalence in Indonesia requires effective and safe therapeutic approaches. Acupuncture, as a complementary therapy, is considered to have potential in regulating metabolism and energy balance. This study aims to determine the effectiveness of acupuncture treatment for weight loss in adiposity patients at the Sehat "Tade" Clinic, Cilegon. The study used a qualitative approach with a case study method involving one 48-year-old female participant with a BMI of 37 kg/m<sup>2</sup>. Acupuncture therapy was performed in six sessions over three weeks. Data were obtained through the four Traditional Chinese Medicine (TCM) examination methods: observation (Wang), listening and smelling (Wen), inquiry (Wen), and palpation (Qie). Effectiveness was assessed based on a comparison of pre- and post-intervention conditions, including weight loss, changes in BMI, clinical complaints, and TCM examination results. After six therapy sessions, there was weight loss and improvement in clinical complaints such as low back pain and headache. TCM examination showed improvement in tongue condition, reduced abdominal tenderness on palpation, and enhanced energy levels and emotional regulation in the patient. The participant also demonstrated positive changes in diet, rest, and physical activity. Acupuncture treatment administered in a structured and individualized manner is effective in promoting weight loss and improving clinical conditions in adiposity patients. This therapy has the potential to serve as a complementary approach in adiposity management and can be further developed through studies with a larger number of participants.

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## INTRODUCTION

Adiposity is a condition characterized by excessive accumulation of fat tissue in the body that negatively affects health. This condition is categorized as a chronic metabolic disorder that can increase the risk of non-communicable diseases such as hypertension, type 2 diabetes mellitus, dyslipidemia, cardiovascular disease, and musculoskeletal disorders (Mina et al., 2024). Adiposity not only decreases quality of life but also increases the economic and social burden on patients. Traditionally, adiposity management has focused on diet and physical activity; however, its effectiveness is often constrained by behavioral factors, hormonal influences, and metabolic adaptations, thereby requiring complementary therapeutic approaches such as acupuncture to assist with weight control (L. Chen & Wang, 2022; Q. Chen & Liu, 2020).

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The prevalence of overweight and adiposity in Indonesia continues to increase dramatically, making it one of the major public health challenges (Ching & Halpin, 2017). Data from Riskesdas 2018 show that one in three Indonesian adults (aged >18 years) is living with this condition, with a combined prevalence of 35.5 percent. Furthermore, the prevalence of overweight and adiposity was recorded to be higher in urban areas (39.7 percent) compared to rural areas (30.0 percent) among adults (UNICEF, 2022). The results of a preliminary study at the Sehat "Tade" Clinic, Cilegon from January to August 2025 recorded that 30 out of 75 outpatients experienced adiposity based on body mass index ( $BMI \geq 25 \text{ kg/m}^2$ ).

Adiposity occurs due to an imbalance between energy intake and energy expenditure, triggered by a high-calorie diet, sedentary lifestyle, genetic factors, and dysregulation of the hormones leptin and insulin, which interfere with fat metabolism (Ullah & Tamanna, 2025). If not properly managed, adiposity can lead to complications such as coronary heart disease, osteoarthritis, sleep apnea, and infertility. Pharmacological management is often administered in the form of appetite-suppressant drugs or fat-absorption inhibitors; however, these may cause side effects such as dry mouth, insomnia, palpitations, and gastrointestinal disorders (Tak & Lee, 2021).

Acupuncture is a complementary therapy that has been shown to be safe, relatively inexpensive, and capable of helping reduce fat tissue by modulating appetite-regulating hormones, increasing energy metabolism, and improving the balance of organ functions according to the Traditional Chinese Medicine (TCM) concept (Wang et al., 2024). Recent meta-analyses report that acupuncture is effective in reducing body weight, body mass index, and waist circumference in patients with adiposity (Cui, 2025). Based on the background described above, the researcher is interested in conducting a case study entitled "Acupuncture Treatment for Obesity Patients at Sehat 'Tade' Clinic, Cilegon." The scope of this case study is limited to acupuncture treatment for adiposity patients at the Sehat "Tade" Clinic, Cilegon. The research question is: How effective is acupuncture treatment for weight loss in adiposity patients at the Sehat "Tade" Clinic, Cilegon?

The purpose of this case study is to determine the effectiveness of acupuncture treatment for weight loss in patients with adiposity at the Sehat "Tade" Clinic, Cilegon. It is expected that this case study can serve as an applied learning medium for acupuncture, as well as an additional reference on acupuncture treatment for adiposity patients, thereby enriching the literature and contributing to the development of clinical acupuncture science in Indonesia. The results of this study may also be used as teaching materials and supplementary references for students in acupuncture study programs in learning both the theory and practice of acupuncture treatment in adiposity cases. Additionally, this research may serve as a reference for further studies on adiposity and as a supporting resource in the clinical management of patients with adiposity.

## **METHOD**

This study used a qualitative approach with a case study method. This approach was chosen because it aims to describe holistically and deeply the effectiveness of Acupuncture. The processes observed include observation, diagnosis enforcement, therapy planning, therapy application, and evaluation of parenting and prognosis, all of which are guided by the standard rules of Acupuncture therapy action.

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Data was obtained from the Patient Data Sheet through four examination methods. The collected data is carefully processed to obtain a differential diagnosis of the patient's disease. The results of this diagnosis are the main guideline in preparing an action plan for Acupuncture services in this study.

The selection of case studies for the effectiveness of Acupuncture is in line with current research practices in the field of complementary health. According to research by Zhang et al. (2023), case studies were judged to be effective in the clinical implementation and outcomes of Acupuncture therapy on specific conditions that are difficult to cover by Randomized Controlled Trials (RCTs), mainly due to the variation of the syndrome and individualization of treatment. Therefore, this case study is valid to provide an in-depth description of Acupuncture Care in its entirety.

Term limitations, which in quantitative versions are referred to as operational definitions, are statements that describe the key terms that are the focus of the case study (Hayati, 2023). In this subchapter, the researcher provides limitations (definitions) of the central terms used in this study, including:

#### 1. Obesity

Adiposity is defined as a condition of excess body fat. In the context of this study, Adiposity is restricted based on:

- a. Medically Western: The condition of patients who have a Body Mass Index (BMI)  $\geq 25$  kg/m<sup>2</sup> (referring to Asia Pacific criteria) and are the subject of a case study.
- b. In Traditional Chinese Medicine (TCM): Adiposity will be reviewed from the perspective of TCM, including Tan Shi syndrome (Phlegm and Moisture) or Qi and Blood Stagnation, which is the basis for establishing the diagnosis of the syndrome in Acupuncture Nursing.

#### 2. Acupuncture Care

Acupuncture Care is defined as a series of complementary therapeutic actions carried out by therapists at the TADE Cilegon Healthy Clinic. The creation of these actions includes:

- a. TCM Diagnosis: Perform four ways of examination (anamnesis, observation, palpation, and hearing/olfactory examination) to establish the diagnosis of TCM syndrome.
- b. Therapy: Determine specific Acupuncture points in the treatment of Adiposity in accordance with the applicable clinical protocols.

#### 3. Effectiveness of Nurturing

The effectiveness of care is measured quantitatively through clinical outcomes measured in adiposity patients. This measurement is carried out by comparing the data obtained before (pre-intervention) and after (post-intervention) the patient completes the set series of Acupuncture therapy. The effectiveness of care in this study was specifically measured through:

- a. Difference in weight loss (kg), and/or
- b. Decrease in the patient's Body Mass Index (BMI).

In this study, 1 (one) patient with Adiposity complaints was involved in Acupuncture therapy at the Tade Cilegon Health Clinic. The expected characteristics of participants in this study are as follows:

1. Client at TADE Cilegon Healthy Clinic.
2. Female.
3. Aged 40-55 years.
4. Have adiposity problems.

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#### 5. Willing to be a participant in this study.

The research will be conducted at the "TADE" Cilegon Health Clinic with 6 (Six) Acupuncture therapy sessions which are carried out 2 (two) times in one week, namely from November 18, 2025 to December 05, 2026.

### Data Collection

#### 1. Licensing

The activity process begins after the research proposal is approved by the supervisor. After that, the data collection process is carried out which is preceded by a Research Permit issued by the Head of Study Program. D-III Acupuncture ITSK Hospital dr. Soepraoen Malang. Then it was continued by submitting a Statement Letter from the Manager of the TADE Cilegon Healthy Clinic, that the manager gave permission to take research data

#### 2. Data Collection

Data collection is a process of approaching the subject and the process of collecting the characteristics needed in a research (Nursalam, 2017). The data collection process begins with:

- a. The researcher looked for the research subject, namely patients (participants) with cases of Adiposity.
- b. The researcher asked for informed consent from the patient (participant).
- c. The researcher performs an Acupuncture examination (Wang, Wen, Wen, and Qie), formulates a diagnosis (disease and syndrome), develops a therapy plan, and performs Acupuncture Therapy actions. The examination method applied refers to the four basic examination techniques (Si Zhen) in Traditional Chinese Medicine, including inspection (wang), auscultation and olfaction (wen), anamnesis (wen), and palpation (qie) (Maciocia, 2015). The Patient Data Sheet instrument used has been developed with reference to the guidelines (Organization, 2022).

#### 1) Observation Inspection (Money)

Includes observations of: Shen: mental state, eye luster, facial color and expression, level of awareness, way of speaking, posture, and movement reflexes. Face: skin color and freshness, as well as the topography of the organs. Body condition: body shape, movement, head, hair, neck, eyes, ears, nose, mouth, gums, throat, and skin. Tongue: shape, color, movement, tongue layer, and topography of Zang Fu's organs.

#### 2) Hearing and Smell Screening (Wen)

Auditory aspects include: voice discharge, speech, breathing pattern, coughing, sneezing, vomiting, hiccups, belching, sighing (long breathing) and intestinal sounds. Olfactory aspects include: mouth odor, nose odor, body odor, sweat odor, and smell from excretory substances.

#### 3) Interview Examination (Wen)

Includes identity anamnesis, main and additional complaints, current and previous disease history, lifestyle, family history, and systemic symptoms.

#### 4) Touch Inspection (Qie)

This includes palpation of the complaint area, certain acupuncture points, and pulse examinations.

#### 5) Supporting Examinations

Additional data from medical examinations such as laboratory results or imaging, if available.

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### 3. Therapy Schedule

Acupuncture therapy is carried out 6 (six) times in a span of 3 (three) weeks, with the following schedule:

**Table 1. Therapy Schedule**

Sunday	Day	Date
I	Tuesday	18 November 2025
	Friday	21 November 2025
II	Tuesday	25 November 2025
	Friday	28 November 2025
III	Tuesday	02 December 2025
	Friday	05 December 2025

Source: Prepared by the author based on the acupuncture treatment schedule at Sehat "Tade" Clinic, Cilegon, 2025

Each therapy session lasts about 30 minutes and involves the piercing of acupuncture points according to the diagnosis of the syndrome at the time of the examination of the patient,

#### **Data Reduction**

Data reduction is a data processing process. The researcher processed the data from four methods of examining patients. The data collected through the Patient Data Sheet is selected and grouped according to its category. Next, the researcher compiles a data resume, which is to select data that has diagnostic value or abnormal data only. This data will later be used as the basis for establishing the diagnosis of Acupuncture.

#### **Diagnosis Enforcement (Diseases and Syndromes)**

The diagnosis of Acupuncture work is upheld as an essential foundation for developing an individualized Acupuncture therapy plan (Maciocia, 2015). The diagnosis referred to in this study includes two things, namely the Disease Statement (Western Medical) and the Syndrome Statement (TCM).

The diagnosis of TCM Syndrome is established based on the data of the results of the Four Ways of Examination (Anamnesis, Observation, Palpation, and Hearing/Olfactory Examination). The adequacy of data from these four examination methods is crucial because it is an absolute prerequisite for identifying the patient's energy balance pattern. In one type of disease (e.g. Adiposity), it is common to find more than one Syndrome (e.g., Tan Shi Syndrome, Stagnation of the Liver's Qi Slate). Effective therapy planning is structured by following how many Syndromes are successfully found and prioritized (Deadman & Al-Khafaji, 2016).

Disease Statement Refers to the identification of a patient's medical condition according to biomedical nomenclature (e.g. Adiposity) using measurable parameters (e.g. BMI). The enforcement of the diagnosis of this disease aims to understand the treatment of Acupuncture with a universally recognized clinical condition. This linkage between the diagnosis of Disease (biomedical) and Syndrome (TCM) is important for the validity of the research and is in line with the guidelines of modern Acupuncture clinical practice (WHO, 2021).

#### **Preparation of a Therapy Plan**

Principles and Methods of Therapy The principles of therapy are formulated based on the established Acupuncture Diagnosis. In the case of adiposity, it consists of several syndromes with the focus of the following therapeutic principles:

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1. Spleen weakness syndrome with accumulation of dampness (Pi Xu Tan Shi Zheng) the principle of therapy is focused on efforts to strengthen the spleen (Jian Pi), eliminate moisture (Hua Shi), and dissolve sputum (Hua Tan).
2. Liver Qi Stagnation Syndrome and Moist Phlegm (Gan Qi Yu Jie Tan Shi Zheng) The principle of therapy is focused on regulating the flow of liver Qi (Shu Gan Li Qi), strengthening the spleen (Jian Pi), and draining moisture (Zao Shi).
3. Heat-Phlegm Syndrome (Tan Re Zheng) The principle of therapy is focused on efforts to clear the heat (Qing Re), dissolve the phlegm (Hua Tan), and calm the Qi (Ping Gan).
4. Renal Deficiency Syndrome (Shen Xu Zheng) The principle of therapy is focused on strengthening the kidneys (Bu Shen), warming the Yang (Wen Yang), and overcoming dampness (Li Shui).
5. Blood and Phlegm Stasis Syndrome (Xue Yu Tan Zu Zheng) The principle of therapy is focused on improving blood circulation (Huo Xue Hua Yu), shedding phlegm (Hua Tan), and regulating Qi (Li Qi).
  - a. Selection of Therapeutic Equipment and Materials. Therapy uses disposable sterile acupuncture needles with sizes 0.25 × 25 0.25 x 50 mm (2 cun), electrostimulators, Moxsa and TDP.
  - b. Point Selection and Manipulation Techniques. The selection of acupuncture points is based on the identified syndrome, by combining local and distal points.
  - c. Giving Advice and Recommendations. Patients get guidance to avoid consuming fatty and cold-energy foods, exercise regularly and manage emotions well. Additional recommendations include the importance of getting enough rest and maintaining consistency in undergoing therapy.

#### **Implementation of Therapy Plan**

In this case study study, the implementation of therapeutic actions includes:

1. Preparation of facilities, tools, and materials
2. Patient consent (participant)
3. Positioning of patients (participants)
4. Hand decontamination
5. Wearing personal protective equipment
6. Preparation of the location of the target of the stabbing
7. Needle preparation
8. Duration of retention
9. Needle collection
10. Decontamination of equipment
11. Be on standby
12. Presumption of action (responsiveness)
13. Prevention of trauma/injury risk
14. Rewearing of the client's clothes
15. Storage of sharp objects
16. Obedience to the principles of health and safety

#### **Preparation of Evaluation**

In this case study study, evaluation includes:

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1. Process evaluation, which is an evaluation that is carried out immediately after all needles are removed. This evaluation is quite short including Acupuncture Examination (Four Ways of Examination). i.e. observations of: Former incarceration. Changes in Observation Examinations include shen, xing tai, and others. Changes in Olfactory and Hearing Examinations include coughing sounds, speech sounds, and others. Changes to the Interview Examination include main complaints, additional complaints, and others. Changes in the Touch Examination include temperature, pulse, location of complaints, and others. Questions about the use of assistive devices and others.
2. Evaluation of results, which is a temporary conclusion of the results of the process evaluation in the form of feasibility to continue therapy in the next session according to the schedule agreement or other appropriate and urgent actions needed.

### **Prognosis Statement**

In this case study study, the prognosis statement includes:

1. Prognosis. Prognosis is a scientific prediction about the possible development of a disease and its outcomes. The prognosis statement is as follows:  
Sanam: healed  
Bonam: Good.  
Dubia: not sure/doubtful.
2. References. Referral is a follow-up and/or additional health care process in a more comprehensive health care facility. The referred participant (client) is a participant (client) who needs health services outside the authority of the Therapeutic Acupuncture.

### **Data Validity Test**

The data in this study was tested for data validity using the triangulation method. Triangulation in credibility testing is defined as checking data from various sources in various ways and at various times (Suryono, 2011).

1. Source triangulation to assess the credibility of the data is carried out by checking the data that has been obtained through several sources. The source is the participant.
2. Triangulation techniques to test the credibility of data are carried out by checking data to the same source with different techniques. The technique is by conducting interviews.
3. Time triangulation can also affect the credibility of the data, as a good time to conduct an interview or data collection will provide more valid data.

In addition, data validity tests were also carried out, through:

- a. Extension of action/care time,
- b. Confirmation of additional information sources using triangulation from three main data sources, namely participants (patients). Acupuncture Therapists, and the families of the participants (patients) who are very closely related to the research subject.

### **Data Analysis**

Data analysis in this study was carried out using a cross-comparison technique of data between therapy sessions. The data compared is process data and result data. Process data includes the process of examining patients, preparing diagnoses (diseases and syndromes), preparing therapy plans, and implementing therapeutic measures. Outcome data is the data of observations on changes that occur after receiving therapy treatment, which includes the condition of the participant's (patient) recovery rate, prognosis, and referral. The data analysis process is in the form of cross-referencing between therapeutic actions which is carried out by

Acupuncture Care for Adiposity Patients at "T'ADE" Cilegon Health Clinic comparing the implementation of the 1st therapy session with the 2nd therapy session, the 1st therapy session with the 3rd therapy session, the 1st therapy session with the 4th therapy session, and so on.

## RESULTS AND DISCUSSIONS

### Research Results

#### A. Overview of Research Locations

The research was conducted at the Tade Cilegon Healthy Clinic – TCI Cluster Amarilys Complex Block F5 No.17 Cilegon. The Acupuncture equipment provided is in the form of: measuring tape (meter), digital weight scale, patient bed, electrostimulator, moxa, TDP (Thermal Deep Penetration) lamp, filiform needles of various sizes, sphygmomanometer, cotton, 70% alcohol, medical and non-medical waste disposal, gloves, mouth masks, and other tools/materials according to needs.

#### B. Participant Characteristics

In this study, the author took participants as research material on female clients aged 48 years with a BMI above 25 kg/m<sup>2</sup>, which is 37 kg/m<sup>2</sup>.

First Date Comes : Tuesday, November 18, 2025.

Name : Mrs. Yy

Date of Birth / Age : Mancak, February 10, 1977.

Gender : Female.

Religion : Islam.

Jobs : Housewives.

Residential Address : Kapudenok, Cilegon.

Phone Number : 087771164xxx.

#### C. Acupuncture Care Procedures

In this case study study, Acupuncture Care was carried out as planned for 6 (six) therapy sessions. The first therapy session begins on Tuesday, November 18, 2025.

The data from the Acupuncture Care that has been collected is identified and selected that has diagnostic value for data reduction. The results are as follows:

Tahapan Terapi	TERAPI					
	Sesi 1 Tgl. 18 November 2025	Sesi 2 Tgl. 21 November 2025	Sesi 3 Tgl. 25 November 2025	Sesi 4 Tgl. 28 November 2025	Sesi 5 Tgl. 02 Desember 2025	Sesi 6 Tgl. 05 Desember 2025
<b>I. PEMERIKSAAN</b>						
<b>1. Pengamatan (Inspeksi)</b>						
- Pemeriksaan Shen						
- Cahaya mata	: Sayu, tidak bersemangat	: Sayu, tidak bersemangat	: Bersemangat	: Bersemangat	: Bersemangat	: Bersemangat
- Bicara	: Suara lemah dan jelas	: Suara lemah dan jelas	: Jelas	: Jelas	: Jelas	: Jelas
- Pemeriksaan Wajah						
- Kesegaran kulit wajah	: Kusam	: Kusam	: Bersinar	: Merah	: Bersinar	: Bersinar
- Bagian wajah	: Pipi tampak tembem	: Pipi terlihat lebih tirus	: Pipi terlihat lebih tirus			
- Bibir	: Bibir merah muda kurang	: Bibir merah muda dan kurang	: Bibir merah muda dan kurang	: Bibir kemerahan dan segar.	: Bibir kemerahan dan segar.	: Bibir kemerahan dan segar.
- Keadaan Tubuh						
- Bentuk tubuh	: Buah Pir					
- Gerakan kegiatan tubuh ketika berdiri	: Membungkuk	: Membungkuk	: Sedikit membungkuk	: Agak tegak	: Tegak	: Tegak
- Refleksi gerak ketika berjalan	: Berjalan agak membungkuk	: Berjalan sudah tegak	: Berjalan sudah tegak			
- Lidah						
- Otot/Badan Lidah						
- Warna	: Merah .	: Merah .	: Merah .	: Merah .	: Merah muda.	: Merah muda.
- Selaput/Lumut Lidah						
- Ketebalan	: Agak tebal.	: Agak tebal.	: Agak tebal.	: Agak tebal	: Tipis	: Tipis.
- Warna	: Putih.					
<b>2. Pendengaran (Auskultasi) dan Penciuman (Olfaksi)</b>						
- Pendengaran (Auskultasi)						
- Keluarnya suara	: Lemah dan meringis.	: Lemah dan meringis.	: Lantang dan keras.			

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Tahapan Terapi		TERAPI					
		Sesi 1 Tgl. 18 November 2025	Sesi 2 Tgl. 21 November 2025	Sesi 3 Tgl. 25 November 2025	Sesi 4 Tgl. 28 November 2025	Sesi 5 Tgl. 02 Desember 2025	Sesi 6 Tgl. 05 Desember 2025
3.	Wawancara (Anamnesis)						
	- Keluhan Utama	Berat badan terasa berat dan jalan sakit.	Berat badan terasa berat dan jalan sakit.	Berat badan terasa berat dan jalan sakit.	Agak berat dan jalan sakit.	Agak berat	Agak berat
	- Keluhan Tambahan	Nyeri pada area L4-L5. Mudah marah, perut kembung, napsu makan tidak menentu	Nyeri pada area L4-L5. Mudah marah, perut kembung, napsu makan tidak menentu	Nyeri pada area L4-L5. Mudah marah, perut kembung, napsu makan tidak menentu	Nyeri pada area L4-L5. Mudah marah, perut kembung, napsu makan tidak menentu Kepala terasa pusing	Mudah marah, perut kembung, napsu makan tidak menentu	Napsu makan tidak menentu
	- Sejarah penyakit sekarang						
	- Keadaan terjadinya penyakit	3 hari yang lalu, merasakan badan sangat berat sekali dan tidak dapat mengontrol asupan makanan.	3 hari yang lalu, merasakan badan sangat berat sekali dan tidak dapat mengontrol asupan makanan.	3 hari yang lalu, merasakan badan sangat berat sekali dan tidak dapat mengontrol asupan makanan.	3 hari yang lalu, merasakan badan sangat berat sekali dan tidak dapat mengontrol asupan makanan.	3 hari yang lalu, merasakan badan sangat berat sekali dan tidak dapat mengontrol asupan makanan.	3 hari yang lalu, merasakan badan sangat berat sekali dan tidak dapat mengontrol asupan makanan.
	- Perubahan keadaan penyakit	Kalau malam hari selalu tidur larut malam sehingga asupan cemilan tidak dapat dihindari pagi hari baru terasa kaki dan punggung belakang sakit.	Kalau malam hari selalu tidur larut malam sehingga asupan cemilan tidak dapat dihindari pagi hari baru terasa kaki dan punggung belakang sakit.	Sudah mulai dapat mengontrol asupan cemilan namun masih tidur larut malam. pagi hari terasa punggung belakang bawah sakit.	Tidur masih larut malam, selarian banyak pekerjaan rumah sehingga kaki terasa sakit	Karena tidur selalu larut malam, punggung terasa berat karena memakai kipas angin. pagi hari terasa punggung belakang bawah sakit.	Tidur masih larut malam.
	- Perjalanan terapi yang pernah dilakukan	Diberi obat.	Belum pernah diterapi.	Belum pernah diterapi.	Belum pernah diterapi.	Belum pernah diterapi.	Belum pernah diterapi.
	- Gejala penyakit sekarang						
	- Panas Dingin	Tidak panas (demam). Takut angin dan dingin.	Tidak panas (demam). Takut angin dan dingin.	Tidak panas (demam). Takut angin dan dingin.	Tidak panas (demam). Tidak takut angin dan dingin.	Tidak panas (demam). Tidak takut angin dan dingin.	Tidak panas (demam). Tidak takut angin dan dingin.
	- Keluhan rasa/sensasi pada kepala				Nyeri kepala sisi atas dan belakang kepala.		
4.	Perabaan (Palpasi)						
	- Perabaan daerah keluhan	Nyeri tekan pada abdomen atas (zhongwan-CV12) dan pada Qimen (LV14)	Nyeri tekan pada abdomen atas (zhongwan-CV12) dan pada Qimen (LV14)	Nyeri tekan pada abdomen atas (zhongwan-CV12) dan pada Qimen (LV14)	Nyeri tekan pada abdomen atas (zhongwan-CV12) dan pada Qimen (LV14)	Nyeri tekan pada abdomen atas (zhongwan-CV12) dan pada Qimen (LV14)	Nyeri tekan pada abdomen atas (zhongwan-CV12) dan pada Qimen (LV14)
	- Perabaan nadi						
	- Nadi umum	Licin dan tegang	Licin dan tegang	Licin dan tegang	Licin dan tegang	Licin dan tegang	Licin dan tegang
Tahapan Terapi		TERAPI					
		Sesi 1 Tgl. 18 November 2025	Sesi 2 Tgl. 21 November 2025	Sesi 3 Tgl. 25 November 2025	Sesi 4 Tgl. 28 November 2025	Sesi 5 Tgl. 02 Desember 2025	Sesi 6 Tgl. 05 Desember 2025
2.	DIAGNOSIS AKUPUNKTUR						
	1 Penyakit	Adipositas	Adipositas	Adipositas	Adipositas	Adipositas	Adipositas
	2 Sindrom	Stagnasi Qi Hati dan Dahak Lembab	Stagnasi Qi Hati dan Dahak Lembab	Stagnasi Qi Hati dan Dahak Lembab	Stagnasi Qi Hati dan Dahak Lembab	Stagnasi Qi Hati dan Dahak Lembab	Stagnasi Qi Hati dan Dahak Lembab
3.	RENCANA TERAPI						
	1 Prinsip Terapi dan Cara Terapi	Mengatur Aliran Qi Hati, Meluruhkan Dahak, Mengeringkan lembab, Memperkuat Limpa. Cara terapi dengan Akupunktur	Mengatur Aliran Qi Hati, Meluruhkan Dahak, Mengeringkan lembab, Memperkuat Limpa. Cara terapi dengan Akupunktur	Mengatur Aliran Qi Hati, Meluruhkan Dahak, Mengeringkan lembab, Memperkuat Limpa. Cara terapi dengan Akupunktur	Mengatur Aliran Qi Hati, Meluruhkan Dahak, Mengeringkan lembab, Memperkuat Limpa. Cara terapi dengan Akupunktur	Mengatur Aliran Qi Hati, Meluruhkan Dahak, Mengeringkan lembab, Memperkuat Limpa. Cara terapi dengan Akupunktur	Mengatur Aliran Qi Hati, Meluruhkan Dahak, Mengeringkan lembab, Memperkuat Limpa. Cara terapi dengan Akupunktur
	2 Pemilihan Alat dan Bahan Terapi	Jarum Akupunktur ukuran 1 <i>cun</i> , 1,5 <i>cun</i> , 2 <i>cun</i> . Elektrostimulator. TDP. Moxsa. Kapas steril. Alkohol 70%.	Jarum Akupunktur ukuran 1 <i>cun</i> , 1,5 <i>cun</i> , 2 <i>cun</i> . Elektrostimulator. TDP. Moxsa. Kapas steril. Alkohol 70%.	Jarum Akupunktur ukuran 1 <i>cun</i> , 1,5 <i>cun</i> , 2 <i>cun</i> . Elektrostimulator. TDP. Moxsa. Kapas steril. Alkohol 70%.	Jarum Akupunktur ukuran 1 <i>cun</i> , 1,5 <i>cun</i> , 2 <i>cun</i> . Elektrostimulator. TDP. Moxsa. Kapas steril. Alkohol 70%.	Jarum Akupunktur ukuran 1 <i>cun</i> , 1,5 <i>cun</i> , 2 <i>cun</i> . Elektrostimulator. TDP. Moxsa. Kapas steril. Alkohol 70%.	Jarum Akupunktur ukuran 1 <i>cun</i> , 1,5 <i>cun</i> , 2 <i>cun</i> . Elektrostimulator. TDP. Moxsa. Kapas steril. Alkohol 70%.
Tahapan Terapi		TERAPI					
		Sesi 1 Tgl. 18 November 2025	Sesi 2 Tgl. 21 November 2025	Sesi 3 Tgl. 25 November 2025	Sesi 4 Tgl. 28 November 2025	Sesi 5 Tgl. 02 Desember 2025	Sesi 6 Tgl. 05 Desember 2025
	3 Pemilihan Titik dan Cara Manipulasi	Taichong (LV 3). Reduksi.	Taichong (LV 3). Reduksi.	Taichong (LV 3). Reduksi.	Taichong (LV 3). Reduksi.	Taichong (LV 3). Reduksi.	Taichong (LV 3). Reduksi.
		Yanglingquan (GB 34). Reduksi.	Yanglingquan (GB 34). Reduksi.	Yanglingquan (GB 34). Reduksi.	Yanglingquan (GB 34). Reduksi.	Yanglingquan (GB 34). Reduksi.	Yanglingquan (GB 34). Reduksi.
		Hegu (LI 4). Reduksi.	Hegu (LI 4). Reduksi.	Hegu (LI 4). Reduksi.	Hegu (LI 4). Reduksi.	Hegu (LI 4). Reduksi.	Hegu (LI 4). Reduksi.
		Zusanli (ST 36). Reduksi.	Zusanli (ST 36). Reduksi.	Zusanli (ST 36). Reduksi.	Zusanli (ST 36). Reduksi.	Zusanli (ST 36). Reduksi.	Zusanli (ST 36). Reduksi.
		Fenglong (ST 40). Reduksi.	Fenglong (ST 40). Reduksi.	Fenglong (ST 40). Reduksi.	Fenglong (ST 40). Reduksi.	Fenglong (ST 40). Reduksi.	Fenglong (ST 40). Reduksi.
		Neiting (ST 44). Reduksi.	Neiting (ST 44). Reduksi.	Neiting (ST 44). Reduksi.	Neiting (ST 44). Reduksi.	Neiting (ST 44). Reduksi.	Neiting (ST 44). Reduksi.
		Tiansu (ST 25). Reduksi.	Tiansu (ST 25). Reduksi.	Tiansu (ST 25). Reduksi.	Tiansu (ST 25). Reduksi.	Tiansu (ST 25). Reduksi.	Tiansu (ST 25). Reduksi.
		Qimen (LV 14). Reduksi.	Qimen (LV 14). Reduksi.	Qimen (LV 14). Reduksi.	Qimen (LV 14). Reduksi.	Qimen (LV 14). Reduksi.	Qimen (LV 14). Reduksi.
		Sanyinjiao (SP 6). Reduksi.	Sanyinjiao (SP 6). Reduksi.	Sanyinjiao (SP 6). Reduksi.	Sanyinjiao (SP 6). Reduksi.	Sanyinjiao (SP 6). Reduksi.	Sanyinjiao (SP 6). Reduksi.
		Yinlingquan (SP 9). Reduksi.	Yinlingquan (SP 9). Reduksi.	Yinlingquan (SP 9). Reduksi.	Yinlingquan (SP 9). Reduksi.	Yinlingquan (SP 9). Reduksi.	Yinlingquan (SP 9). Reduksi.
		Quchi (LI 11). Reduksi.	Quchi (LI 11). Reduksi.	Quchi (LI 11). Reduksi.	Quchi (LI 11). Reduksi.	Quchi (LI 11). Reduksi.	Quchi (LI 11). Reduksi.
		Shuifen (CV 9). Reduksi.	Shuifen (CV 9). Reduksi.	Shuifen (CV 9). Reduksi.	Shuifen (CV 9). Reduksi.	Shuifen (CV 9). Reduksi.	Shuifen (CV 9). Reduksi.
		Fengshi (GB 31). Reduksi.	Fengshi (GB 31). Reduksi.	Fengshi (GB 31). Reduksi.	Fengshi (GB 31). Reduksi.	Fengshi (GB 31). Reduksi.	Fengshi (GB 31). Reduksi.
		Xuehai (SP 10). Reduksi.	Xuehai (SP 10). Reduksi.	Xuehai (SP 10). Reduksi.	Xuehai (SP 10). Reduksi.	Xuehai (SP 10). Reduksi.	Xuehai (SP 10). Reduksi.
		Jiayu (LI 15). Reduksi.	Jiayu (LI 15). Reduksi.	Jiayu (LI 15). Reduksi.	Jiayu (LI 15). Reduksi.	Jiayu (LI 15). Reduksi.	Jiayu (LI 15). Reduksi.
				Baihui (GV 20). Reduksi.			
				Naokong (GB 19). Reduksi.			

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Tahapan Terapi		TERAPI					
		Sesi 1 Tgl. 18 November 2025	Sesi 2 Tgl. 21 November 2025	Sesi 3 Tgl. 25 November 2025	Sesi 4 Tgl. 28 November 2025	Sesi 5 Tgl. 02 Desember 2025	Sesi 6 Tgl. 05 Desember 2025
4	Jadwal Terapi	Terapi dilaksanakan sebanyak 2 kali seminggu. Partisipan dianjurkan datang 3 hari lagi untuk terapi berikutnya.					
5	Anjuran dan saran	<ul style="list-style-type: none"> <li>Menghindari tidur larut malam dan stop asupan cemilan, mengganti asupan makanannya menjadi makanan sehat.</li> <li>Lakukan olahraga ringan setiap pagi minimal 30 menit, seperti jalan pagi dan peregangannya, dapat juga melakukan olahraga renang minimal 1 minggu 1x.</li> <li>Rutin menjalani Terapi Akupunktur sesuai jadwal yang ditentukan untuk mendapatkan hasil yang optimal.</li> </ul>					
<b>4. PELAKSANAAN TERAPI</b>							
1	Persiapan fasilitas, alat, dan bahan	Jarum Akupunktur ukuran 1 <i>can</i> , 1,5 <i>can</i> , 2 <i>can</i> . Elektrostimulator. Moxsa. TDP. Kapas steril. Alkohol 70%.					

Tahapan Terapi		TERAPI					
		Sesi 1 Tgl. 18 November 2025	Sesi 2 Tgl. 21 November 2025	Sesi 3 Tgl. 25 November 2025	Sesi 4 Tgl. 28 November 2025	Sesi 5 Tgl. 02 Desember 2025	Sesi 6 Tgl. 05 Desember 2025
2	Persetujuan partisipan	Mengisi lembar <i>informed consent</i> yang meliputi tata cara tindakan pelayanan, tujuan tindakan alternatif tindakan lain, risiko, komplikasi, dan prognosis tindakan yang akan dilakukan.					
3	Penataan posisi partisipan	Partisipan diposisikan telentang dan tengkurap secara nyaman selama terapi.					
4	Dekontaminasi tangan	Tangan terapis disterilisasi menggunakan alkohol 70%.					
5	Pemakaian Alat Pelindung Diri	Handglove, Masker, Face Shield, Jas Laboratorium.					
6	Persiapan lokasi penusukan	Titik Akupunktur yang dipilih disterilisasi menggunakan alkohol 70%.					
7	Persiapan jarum	Memilih dan menggunakan Jarum Akupunktur sesuai dengan kebutuhan.					
8	Durasi penjaruman	Menggunakan jarum baru, dengan kondisi jarum yang masih bagus. Setelah ditusukkan, Jarum Akupunktur dibiarkan tertancap selama 30 menit. Dilakukan manipulasi Reduksi.					
9	Pengumpulan jarum	Mencabut, mengumpulkan, dan menghitungkan jarum bekas pakai untuk memastikan tidak ada jarum yang tertinggal di tubuh partisipan, untuk selanjutnya dibuang ke dalam tempat sampah khusus jarum. Jarum bersifat sekali pakai untuk 1 partisipan dalam 1 kali sesi terapi.					

Tahapan Terapi		TERAPI					
		Sesi 1 Tgl. 18 November 2025	Sesi 2 Tgl. 21 November 2025	Sesi 3 Tgl. 25 November 2025	Sesi 4 Tgl. 28 November 2025	Sesi 5 Tgl. 02 Desember 2025	Sesi 6 Tgl. 05 Desember 2025
10	Dekontaminasi peralatan	Peralatan kapas, alkohol, dan jarum ditempatkan di lemari khusus. Ruangannya selalu dibersihkan dan disterilisasi.					
11	Kesiapsiagaan	Menunggu di samping partisipan. Menjaga dan mengamati partisipan apakah ada perubahan yang tidak diinginkan.					
12	Tanggapan Tindakan (Respons)	Menanyakan pendapat partisipan tentang proses penjaruman, perubahan pada keluhan utama dan keluhan tambahan, atau ketidakyamanan.					
13	Pencegahan risiko trauma dan cedera	Melakukan tindakan terapi sesuai SOP untuk mencegah terjadinya trauma/cedera, agar partisipan tidak takut dan merasa nyaman. Memberikan saran kepada partisipan agar tidak merubah posisi tubuh saat terapi dan memberitahukan terapis apabila TDP terlalu panas pada area abdomen.					

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Tahapan Terapi		TERAPI					
		Sesi 1 Tgl. 18 November 2025	Sesi 2 Tgl. 21 November 2025	Sesi 3 Tgl. 25 November 2025	Sesi 4 Tgl. 28 November 2025	Sesi 5 Tgl. 02 Desember 2025	Sesi 6 Tgl. 05 Desember 2025
14	Pengemaran kembali pakaian partisipan	Mempersilakan atau membantu partisipan untuk mengenakan pakaian semula kembali ketika tindakan terapi sudah berakhir.	Mempersilakan atau membantu partisipan untuk mengenakan pakaian semula kembali ketika tindakan terapi sudah berakhir.	Mempersilakan atau membantu partisipan untuk mengenakan pakaian semula kembali ketika tindakan terapi sudah berakhir.	Mempersilakan atau membantu partisipan untuk mengenakan pakaian semula kembali ketika tindakan terapi sudah berakhir.	Mempersilakan atau membantu partisipan untuk mengenakan pakaian semula kembali ketika tindakan terapi sudah berakhir.	Mempersilakan atau membantu partisipan untuk mengenakan pakaian semula kembali ketika tindakan terapi sudah berakhir.
15	Penyimpanan benda tajam	Memastikan jarum masih baru dan jarum selalu steril dan disimpan dalam lemari khusus.	Memastikan jarum masih baru dan jarum selalu steril dan disimpan dalam lemari khusus.	Memastikan jarum masih baru dan jarum selalu steril dan disimpan dalam lemari khusus.	Memastikan jarum masih baru dan jarum selalu steril dan disimpan dalam lemari khusus.	Memastikan jarum masih baru dan jarum selalu steril dan disimpan dalam lemari khusus.	Memastikan jarum masih baru dan jarum selalu steril dan disimpan dalam lemari khusus.
16	Ketaatan azas kesehatan dan keselamatan	Tindakan Terapi Akupunktur dilakukan dengan mengutamakan kesehatan dan keselamatan partisipan agar tidak terjadi hal-hal yang tidak diinginkan.	Tindakan Terapi Akupunktur dilakukan dengan mengutamakan kesehatan dan keselamatan partisipan agar tidak terjadi hal-hal yang tidak diinginkan.	Tindakan Terapi Akupunktur dilakukan dengan mengutamakan kesehatan dan keselamatan partisipan agar tidak terjadi hal-hal yang tidak diinginkan.	Tindakan Terapi Akupunktur dilakukan dengan mengutamakan kesehatan dan keselamatan partisipan agar tidak terjadi hal-hal yang tidak diinginkan.	Tindakan Terapi Akupunktur dilakukan dengan mengutamakan kesehatan dan keselamatan partisipan agar tidak terjadi hal-hal yang tidak diinginkan.	Tindakan Terapi Akupunktur dilakukan dengan mengutamakan kesehatan dan keselamatan partisipan agar tidak terjadi hal-hal yang tidak diinginkan.
Tahapan Terapi		TERAPI					
		Sesi 1 Tgl. 18 November 2025	Sesi 2 Tgl. 21 November 2025	Sesi 3 Tgl. 25 November 2025	Sesi 4 Tgl. 28 November 2025	Sesi 5 Tgl. 02 Desember 2025	Sesi 6 Tgl. 05 Desember 2025
5. EVALUASI SETELAH TERAPI							
I. Evaluasi Proses							
1	Pengamatan	Daerah bekas tusukan Jarum Akupunktur berwarna merah. Tidak ada pendarahan bawah kulit. Gerakan berjalan agak membungkuk. Ada pengurangan ukuran lingkaran perut. Ada pengurangan ukuran lingkaran lengan dan paha. Ada pengurangan ukuran lingkaran dada. Wajah terlihat segar. Lidah: merah, dengan selaput lidah agak tebal warna putih.	Daerah bekas tusukan Jarum Akupunktur berwarna merah. Tidak ada pendarahan bawah kulit. Badan sudah tidak membungkuk. Ada pengurangan ukuran lingkaran perut. Ada pengurangan ukuran lingkaran lengan dan paha. Ada pengurangan ukuran lingkaran dada. Wajah terlihat segar. Lidah: merah, dengan selaput lidah agak tebal warna putih.	Daerah bekas tusukan Jarum Akupunktur berwarna merah. Tidak ada pendarahan bawah kulit. Badan sudah tidak membungkuk. Ada pengurangan ukuran lingkaran perut. Ada pengurangan ukuran lingkaran lengan dan paha. Ada pengurangan ukuran lingkaran dada. Wajah terlihat segar. Lidah: merah, dengan selaput lidah agak tebal warna putih.	Daerah bekas tusukan Jarum Akupunktur berwarna merah. Tidak ada pendarahan bawah kulit. Badan sudah tidak membungkuk. Ada pengurangan ukuran lingkaran perut. Ada pengurangan ukuran lingkaran lengan dan paha. Ada pengurangan ukuran lingkaran dada. Wajah terlihat segar. Lidah: merah, dengan selaput lidah agak tebal warna putih.	Daerah bekas tusukan Jarum Akupunktur berwarna merah. Tidak ada pendarahan bawah kulit. Badan sudah tidak membungkuk. Ada pengurangan ukuran lingkaran perut. Ada pengurangan ukuran lingkaran lengan dan paha. Ada pengurangan ukuran lingkaran dada. Wajah terlihat segar. Lidah: merah, dengan selaput lidah mulai tipis warna putih.	Daerah bekas tusukan Jarum Akupunktur berwarna merah. Tidak ada pendarahan bawah kulit. Badan sudah tidak membungkuk. Ada pengurangan ukuran lingkaran perut. Ada pengurangan ukuran lingkaran lengan dan paha. Ada pengurangan ukuran lingkaran dada. Wajah terlihat segar. Lidah: merah, dengan selaput lidah tipis warna putih.
2	Pendengaran-Penciuman	Bau keringat menyengat.	Bau keringat menyengat.	Bau keringat menyengat.	Bau keringat menyengat.	Bau keringat menyengat.	Bau keringat menyengat.
3	Perabaan	Tidak nyeri tekan pada abdomen Nadi umum: Licin dan tegang.	Tidak nyeri tekan pada abdomen Nadi umum: Licin dan tegang.	Tidak nyeri tekan pada abdomen Nadi umum: Licin dan tegang.	Tidak nyeri tekan pada abdomen Nadi umum: Licin dan tegang.	Tidak nyeri tekan pada abdomen Nadi umum: Licin dan tegang.	Tidak nyeri tekan pada abdomen Nadi umum: Licin dan tegang.
2. Evaluasi Hasil							
1. Kelayakan kelanjutan terapi : Layak dilanjutkan							
6. PROGNOSIS DAN KESIMPULAN							
1. Prognosis : Baik							
2. Kesimpulan : Terapi dilanjutkan sesuai jadwal.							

Figure 1. Resume of Acupuncture Care Stages

Source: Primary data from patient examination and author's analysis, 2025

WAKTU	AKTIVITAS				
	MAKAN	MINUM	OLAHRAGA	TIDUR MALAM	MANDI SUBUH
SARAPAN 07.00-09.00	-Telur Rebus 2-3 butir -Kurma 3-5 butir -4 sdm Oatmeal ditambah susu rendah lemak dan potongan pisang atau strawbery - Roti gandum dengan telur rebus - lainnya : serat tinggi dan protein tinggi	-Air putih : 2 Gelas atau 200-400 ml	- Jalan Pagi 5000 langkah - Yoga / Renang - Cardio / angkat beban	- Tidur Malam selambat-lambatnya 22.00 wib - Bangun Tidur Jam 04.00	-Mandi sebelum subuh pukul 04 - 05 pagi
CEMILAN PAGI 10.00 - 11.00	-Pepaya - Melon - Semangka - Pir - lainnya : buah tidak tinggi gula	-Air putih 1 gelas atau 200 ml			
MAKAN SIANG 13.00 - 15.00	- Nasi 3-4 sdm - Urab / Capcay / Sop / atau lainnya dengan tinggi serat - ikan / daging ayam tanpa lemak/ daging merah sepotong / lainnya tinggi protein	- Air Putih 3 gelas atau 200-400 ml			
CEMILAN SIANG 16.00 - 17.00	-Pepaya - Melon - Semangka - Pir - kacang-kacangan secukupnya - lainnya : buah tidak tinggi gula	- Air Putih - Air Teh tanpa gula/ - Air Kopi tanpa gula			
MAKAN MALAM 19.00 - 20.00	- Sayur hijau atau sayuran yang memiliki serat tinggi - Sepotong daging/2-3 butir telur rebus / ikan / ayam tanpa lemak	- Air Putih 1 gelas			
SEBELUM TIDUR 20.00		- Air Putih 1 gelas			
* Catatan	Setelah makan bila ingin minum jeda dulu sekitar 1/2 - 1 jam Konrol / kendalikan emosi berlebih				

Figure 2. Diet-Drink-Activity Guide

Source: Prepared by the author based on patient care guidelines at Sehat "Tade" Clinic, Cilegon, 2025

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WAKTU	AKTIVITAS / WAKTU																
	19/11/2025	20/11/2025	21/11/2025	22/11/2025	23/11/2025	24/11/2025	25/11/2025	26/11/2025	27/11/2025	28/11/2025	29/11/2025	30/11/2025	01/12/2025	02/12/2025	03/12/2025	04/12/2025	
<b>SARAPAN</b>																	
07.00-09.00	Roti Bakar 2 slice	Telur Rebus	Nasi Uduk 3 sdm	Makan Snack	Ikan Sarden	Roti Gandum	Soto ayam	Telur dadar	Telur Dadar	Sushi	oatmeal	oatmeal	Roti gandum	Roti gandum	Telur Dadar	Telur Rebus	
		Jagung Rebus	Olah raga ringan			Telur Rebus					Susu non fat	Susu non fat	Selai strawberry	Selai coklat		poikcoy	
<b>CEMLAN PAGI</b>																	
10.00 - 11.00	Kue Gabin 4 pcs	Bubur Ayam 1/2 porsi			Biskuit Gabin 4 pcs	Pepaya	Alpukat	Melon	Semangka	Buah Pir	Jeruk	Nenas	Alpukat	Alpukat	Semangka	Apel	
							Susu rendah Kalori							Jambu Kristal			
<b>MAKAN SIANG</b>																	
13.00 - 15.00	Telur Rebus 2 butir		Ikan sarden		Ayam Goreng	Nasi	Telur rebus	Nasi	Nasi	Nasi	Nasi	Nasi	Nasi	Nasi	Nasi	Nasi	
						Sayur Poikcoy	Labu siam	Ayam Bakar	Telur rebus	Ayam Goreng	Ayam sayur	Ikan Kembung	Ayam Bakar	Ayam Bakar	Ayam bakar	Telur Dadar	
<b>CEMLAN SIANG</b>																	
16.00 - 17.00					Nasi 4 sdm	Pepaya	Alpukat	Semangka	Semangka	Alpukat	Nenas	Alpukat	Jambu Kristal	Buah Pir	Jambu Kristal	Semangka	
					Ayam Katsu								Jambu Kristal	Jambu Kristal			
<b>MAKAN MALAM</b>																	
19.00 - 20.00		Ikan bakar			Ayam Goreng	Soto ayam	Soto ayam	Nasi	Ayam Bakar	Telur Rebus	oatmeal	Telur Rebus	Nasi	Oatmeal	Oatmeal		
		Ayam goreng asem			Kentang Goreng				Ayam bakar			Susu non fat	Ayam Bakar	Ayam Bakar	Susu non fat	Susu non fat	
		Nasi sedikit															
<b>SEBELUM TIDUR</b>																	
20.00														Buah Pir	semangka	Brokoli	
																poikcoy	
<b>Catatan</b>	Setelah makan bisa ingin minum jeda dulu sekitar 1/2 - 1 jam																
Air Minum per hari	Minum air the	2 gelas	2 gelas	3 gelas	2 liter	2,5 liter	2,5 liter	2 liter	2 liter	2 liter	2 liter	2 liter	2 liter	2 liter	2,5 Liter	2,5 liter	
Emosi	Marah	kesal mendongkol	Sedih berlebih	Banyak pikiran	stabil	marah over	stabil	stabil	marah	bisa kontrol	bisa kontrol	stabil	stabil	stabil	stabil	Ceria	
Tidur malam	04.00 wib	01.00 wib	03.30 wib	04.10 wib	03.00 wib	01.30 wib	01.30 wib	01.00 wib	02.00 wib	01.30 wib	01.30 wib	01.45 wib	01.45 wib	01.30 wib	01.30 wib	01.00 wib	
Mandi Subuh	-	-	-	-	4.50 wib	06.00 wib	06.00 wib	-	-	04.30 wib	04.30 wib	-	-	06.00 wib	06.00 wib	06.00 wib	
Olahraga	-	-	-	-	Jalan santai	Jalan santai	Jalan santai	Jalan santai	Jalan santai	Jalan santai	Jalan santai	Jalan santai	Jalan santai	Naik Turun Tangga	Naik Turun Tangga	Naik Turun Tangga	

Figure 3. Recording of Patients' Meals and Drinking

Source: Primary data from patient monitoring records and author's documentation, 2025

TANGGAL	JENIS PENGUKURAN												
	TENSI		BERAT BADAN		LINGKAR								
	SEBELUM	SESUDAH	SEBELUM	SESUDAH	DADA		PERUT		LENGAN		PAHA		
				SEBELUM	SESUDAH								
3 Maret 2026	157/111		98,35		104	103	115	115	40	40	66	66	
7 Maret 2026	163/118		97,25		104	102	115	110	40	40	72	68	
11 Maret 2026	177/133		97,65		102	102	114	111	41	40	72	69	
15 Maret 2026	222/188	178/150	96,45		103	102	110	112	40	40	70	70	
19 Maret 2026	125/98		95,23		102	101	113	110	40	39	70	69	
24 Maret 2026	120/100		94,55	94,35	101	100	111	108	39	38	69	68	

Figure 4. Resume Patient Physical Measurements

Source: Primary data from patient physical examination and author's analysis, 2025

Discussion of Research Results

A. Discussion at the Examination

The results of the examination in the 1st therapy session (November 18, 2025) obtained the following data:

1. Main Complaint: Adiposity with a BMI of 37 kg/m<sup>2</sup>.
2. Additional Complaints: Leg and lower back pain.
3. Observation (Money) Examination Results:

Posture with excess weight, walking slightly bent and slow. His face was a little pale. Lips are pink and less fresh. Tongue: red, with a rather thick membrane of white color.

- a. Hearing and Smell (Wen) test results: The sound is not too loud, a little grimacing and holding pain.
- b. Interview Examination Results (Wen): The patient complained that his body felt heavy and painful when walking. Pain is also felt by patients in the area of Lumbar 4 (L4) to Lumbar 5 (L5), irritability, bloated stomach and erratic appetite.

The state of the disease: since 3 days ago, I felt very heavy because I had an overweight body so that there was pain in the lower back area which resulted in painful walking. Changes

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in disease status: In the morning after waking up, the body feels heavy and painful in the lower back area which causes pain when walking. Therapy trip done: Have never been to therapy and taken medication. Symptoms of the disease now: Cold Heat: Not hot (fever). Afraid of wind and cold.

1. Results of the Touch (Qie) examination:

Sensation of the complaint area: Pressure pain in the upper abdominal area, precisely at the zhongwan point and at the 6th and 7th ribs, precisely at the Qimen point (LV14). General pulse: slippery and tense.

The results of the examination in the 6th therapy session (December 5, 2025) obtained the following data:

- a. Main Complaint: Excess weight ( Adiposity ).
- b. Additional Complaints: Lower back pain (L4-L5) has decreased.
- c. Observation (Money) Examination Results:

The participant's body experienced weight loss, a decrease in size in abdominal circumference, chest circumference, arm circumference and thigh circumference. And can walk without bending over. Reddish and fresh lips. Tongue: red with a thin membrane of the tongue of white color.

2. Hearing and Smell (Wen) test results:

The sound was loud, clear.

3. Interview Examination Results (Wen):

Weight has already decreased. Fat glands begin to shrink marked by a change in size in the circumference of their limbs. Symptoms of the disease now: Cold Heat: Not hot (fever). Not afraid of wind and cold. Complaints of sensation in the head: Back pain in the head is no longer felt.

4. Results of the Touch (Qie) examination:

Feeling of the complaint area: The abdominal area (zhongwan) and the area between the 6th and 7th ribs at the Qimen point no longer feel painful. General pulse: Slippery and tense.

The data mentioned above shows that there are several differences in the results of the examination in the 1st therapy session and the results of the examination in the 6th therapy session. Indeed, it is highly expected that there will be improvements in the results of participant examinations. This is because participants adhere to the therapy schedule and follow the recommendations and suggestions given by the therapist.

## **B. Discussion on Diagnosis**

Based on the resume of the examination data, it was determined that the Acupuncture Diagnosis that was upheld in the 1st therapy session (March 3, 2026) was: Adiposity Disease with Liver Qi Syndrome and Moist Phlegm. The diagnosis of Acupuncture work is upheld as an essential foundation for developing an individualized Acupuncture therapy plan (Maciocia, 2015). The established Acupuncture diagnosis is in accordance with Deadman & Al-Khafaji, 2016, the adequacy of data from these four examination methods is very crucial because it is an absolute prerequisite for identifying the patient's energy balance pattern. In one type of disease (e.g. Adiposity), it is common to find more than one Syndrome (e.g., Tan Shi Syndrome, Stagnation of the Liver's Qi Slate). Weight gain, the clinical manifestations of obesity are much more complex because they involve a variety of body systems — ranging from the metabolic, cardiovascular, musculoskeletal, to psychological systems (Guyton & Hall, 2021). Effective

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therapy planning is compiled by following how many Syndromes are successfully discovered and prioritized. From the research carried out, it shows clinical manifestations: Adiposity occurs for a long time, but is not felt and is realized to be excessive when there are other complaints that accompany it, in this case pain when walking, especially in the lumbar 4 to lumbar 5 area, plus discomfort in the abdominal area felt by pressure pain and unable to control angry emotions. Supported by observation, the tongue appears red with a thick white membrane and a slippery and tense pulse.

After being treated for up to 6 therapy sessions, in the 6th therapy session (December 5, 2025) the participants were declared to have lost weight and the existing complaints have been greatly reduced.

### **C. Discussion on Therapy**

Based on the Acupuncture Diagnosis that was upheld in the 1st therapy session (November 18, 2025), namely Adiposity Disease with Liver Qi Stagnation Syndrome and Moist Phlegm, the Principles and Methods of Therapy determined are focused on efforts to regulate the flow of liver Qi (Shu Gan Li Qi), strengthen the spleen (Jian Pi), and dry out moisture (Zao Shi).

Regulates the flow of Qi of the liver, Strengthens the spleen, Drains moisture and Sputum Removal. The selected Acupuncture points are as follows (Li et al., 2020; L. Chen et al., 2022)

1. Taichong (LV 3). It is a very important point of the Jueyin Meridian of the Heart. This point has a profound calming effect in the Mind and is effective in calming very tense people who tend to be irritable or repressed irritable. Function: promotes smooth flow of Qi when stagnant horizontally, especially in the epigastric or hypochondrium. Manipulation: Reduction.
2. Yanglingquan (GB 34). It is the dominant point of the tendons, a point that is very important for promoting the smooth flow of the Heart's Qi flow. This point is used whenever there is stagnation of the Liver Qi, especially in the hypochondrial region (combined with CV 12 Zhongwan) or the lower abdomen (combined with CV 6 Qihai). Function: regulate the flow of Liver Qi, overcome the humid heat in the Liver and Gallbladder (bitter taste, full taste of hypochondrium, inability to digest fats, feeling of heaviness). Manipulation: Reduction.
3. Sanyinjiao (SP 6). It is the meeting point of the three Yin legs. This point can strengthen the Qi Leap and the most important point in overcoming humidity, whether it is cold or hot. Function: strengthens the Spleen and is used in the pattern of spleen deficiency, with poor appetite, diarrhea and fatigue. Manipulation: Reduction.
4. Fenglong (ST 40). It is an important point to cope with moisture and phlegm. Function: removes phlegm. Manipulation: Reduction.
5. Zusanli (ST 36). It is the main point to strengthen Qi, blood, Yang, Yin and Original Qi. It is essential in all patterns of Stomach and Intestinal deficiency. Function: strengthens Zheng Qi and resistance to external pathogenic factors. Manipulation: Neutral.
6. Hegu (Li 4). It is a point to take out the hot wind and release it. This point is also to regulate sweat and Qi Defense between the skin and muscles so that it can be used either to stop sweating or promote sweating outside of the invasion of the Wind. Hegu Point also has a strong calming and antispasmodic effect, so it can be used in a wide range of painful conditions, both in the ducts and in the organs and especially in the stomach, intestines and uterus. Manipulation: Neutral.

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7. Neiting (ST 44). It is an important point of the abdominal canal. This point can clear heat from the stomach canal. Effective for stopping pain along the abdominal canal, especially the lower jaw. Function: Irritate the Intestines and overcome Humid Heat. Manipulation: Reduction.
8. Tianshu (ST 25). Used in all patterns of excess stomach that cause stomach problems (not epigastrium). Function: cope with moisture in the intestines and edema, stop diarrhea due to spleen deficiency. From a psychological point of view, this point is effective in mental irritation, anxiety and agitation due to abdominal disharmony, especially excessive abdominal patterns such as phlegm, fire in the stomach. Manipulation: Neutral.
9. Qimen (LV 14). Function: promotes the smooth flow of Qi-Liver and aligns the Liver and Stomach (hypochondrial distension, sighing, breast distension, epigastric distension and pain, hiccups, belching, vomiting, epigastric hardness). Manipulation: Neutral.
10. Yinlingquan (SP 9). It is the main point to overcome the dampness of the Lower Burner. It is widely used in all conditions caused by the obstruction of moisture in the lower burner, whether it is wet-cold or wet-hot. Manipulation: Neutral.
11. Quchi (Li 11). Function: cleans heat, cools the blood, overcomes humidity especially Heat-Damp, treats humid heat in the Spleen and Intestines with digestive symptoms such as diarrhea and is beneficial for muscles and joints. Manipulation: Neutral.
12. Fengshi (GB 31). Functions: expel wind, relieve itching, remove obstructions from the ducts (sciatica, hemiplegia, atrophy of the legs, numbness of the legs, knee stiffness). Manipulation: Neutral.
13. Shuifen (CV 9). Function: opens the waterways and promotes fluid transformation (edema). Manipulation: Neutral.
14. Xuehai (SP 10). Function: Nourishes the blood. Manipulation: Toning.

The Acupuncture points selected in the 1st therapy session (November 18, 2025) to the 6th therapy session (December 05, 2025) remain, except that at the 4th meeting on November 28, 2025 there was an addition of 2 points because the patient complained of back side head pain, with the formulation mentioned above the participant experienced weight loss and healing in his head and legs.

Acupuncture therapy works holistically in treating obese patients (adiposity) through the stimulation of specific points that function to eliminate moisture, clean heat, and expel wind pathogens from the body. Through precise healing techniques, this therapy is able to improve blood circulation and harmonize the flow of Qi, so that the function of the digestive system becomes more optimal. This approach has been shown to be effective in providing significant assistance for patients to achieve a healthy weight and beyond, as confirmed in a recent study on metabolic medicine by (Huang & Kuang, 2025).

## CONCLUSION

Based on the evaluation results, six sessions of acupuncture treatment for adiposity patients at the Sehat "Tade" Clinic, Cilegon led to reduced body weight, resolution of posterior headaches, decreased leg pain during walking, and improvements in lifestyle habits, including diet, rest, and exercise patterns, as well as better emotional control and an overall sense of improved physical well-being. These findings suggest that acupuncture may be an effective complementary therapy for managing adiposity when combined with behavioral modifications.

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It is recommended that acupuncture therapists consider these results when determining appropriate acupuncture point formulations for adiposity patients, while patients are encouraged to continue therapy until reaching their ideal weight and to maintain healthy lifestyle practices such as balanced nutrition, adequate rest, regular physical activity, and emotional regulation. For future research, it is suggested that studies involve larger and more diverse populations, apply more rigorous methodologies, and explore long-term outcomes to provide stronger evidence on the effectiveness of acupuncture in adiposity management.

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