# Severe Allergic Reaction to Omega-3 Fatty Acid Fish Oil Supplements: A Case Study

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Acupuncture, allergy, allergic reaction, omega-3 fatty acid, fish oil. Abstract

Oily fish and omega-3 fatty acid supplements have become extremely popular in recent years, due in part to the proliferation of research studies that suggest that they can be beneficial for a wide variety of health problems. This article describes a case history in which a woman experienced a severe allergic reaction after consuming fish oil capsules that had been prescribed by her doctor. The resulting allergic symptoms were successfully treated using acupuncture, but only after complete abstinence from the fish oil supplements.

### Introduction

ily fish and omega-3 fatty acid supplements have become extremely popular in recent years. Many research studies worldwide have demonstrated that omega-3 fatty acid supplementation can be beneficial for a wide variety of health problems, from coronary problems to behavioral problems. In fact, some papers demonstrate its usefulness in almost every recorded health issue, giving it the reputation of a veritable panacea. This short case study describes the experience of a 59-year-old woman who developed a severe allergic reaction to omega-3 fatty acids derived from halibut fish. Her condition was eventually completely resolved, but only after complete abstinence from the fish oil supplements.

#### **Basic information**

Mrs S. came to my clinic in Nahariya, Israel in January 2008, presenting with a severe allergic condition around both of her eyes. The skin and tissues surrounding her eyes were red, swollen, traversed by deep wrinkles, painful to touch and appeared extremely sore (see Fig. 1).

The condition had begun six months prior to her visit and developed gradually to its present state. It had first appeared as a small red spot under her left eye and in the following month developed into a large red bulging sack of tissue, which eventually affected both her eyes. Upon questioning she was unable to identify any recent significant changes in lifestyle, diet or emotional state. She had visited many physicians during this six month period, including ophthalmologists and allergologists. Oral steroids had alleviated the condition for a short period, only for it to worsen immediately after cessation of the medication. Mrs S. ended up staying at home all day as she felt unable to go to work and had become very nervous and depressed.

Pulse diagnosis revealed a fast, wiry quality at the Liver position, and weakness at the Spleen position. Her tongue was scalloped on both sides and a thick white coating covered the surface. Left Qimen LIV-14 was very tender on palpation, as was left Fengchi GB-20 and the epigastric area on the midline. Her demeanour was one of a very nervous, easily irritated and depressed woman.

It was clear to me from the beginning that this was a case of Liver qi stagnation causing Liver yang to ascend upwards to the eye region. "The Liver opens into the eyes," state the classic Chinese medical texts. Excess yang qi will float upwards, and can manifest as red eyes, headaches (which she did not have) and nervousness. The appearance of the initial symptoms under the left eye, as well as the tenderness of the left Qimen LIV-14 front-mu point made sense, as disorders involving excessive yang qi tend to appear more frequently and acutely on the left side of the body, whereas problems from yin qi manifest more frequently on the right side.<sup>1</sup>

The Spleen qi deficiency, which showed in the shape of her tongue and her deficient Spleen pulse, may have been a causative factor for the Liver qi stagnation. This phenomenon can be explained using the wu xing (five phase) theoretical model, in which the Spleen is unable to exert enough counterweight force to balance the Liver. Mrs S. reported that her stomach was frequently upset, she suffered from frequent abdominal gas, and her muscles were feeble and without strength (all signs and symptoms of Spleen qi deficiency).

The abrupt appearance of the symptoms, as well as their rapid development, suggested a yang toxin (the allergic reaction in this case) that was either sourced in the Liver itself, or that was coming from an exogenous source and was directly influencing the Liver. On questioning the patient about factors that might affect her Liver (dietary habits, coffee and alcohol intake, emotional crises etc.), nothing was revealed that might account for the disease.

Before commencing acupuncture treatment, I prescribed strict dietary guidelines, excluding all substances that irritate the Liver such as alcohol, coffee<sup>2</sup>, fried and spicy food and medications. I also instructed her to avoid foods that weaken Spleen qi, such as cakes, dairy products and sweet foods. We then began acupuncture treatment.

#### Acupuncture treatment

The main acupuncture points<sup>3</sup> used were as follows:

- Hegu L.I.-4 and Quchi L.I.-11: These two points are probably the strongest combination to disperse heat and excess yang qi from the head. They are both situated on the hand yangming channel, which is known to have the most ample supply of qi and blood. It is thus best suited to invigorate and disperse qi and blood, either systemically, or specifically from the head. Both points were manipulated using dipersing and cooling techniques.<sup>4</sup>
- Fengchi GB-20, Zanzhu BL-2, Taiyang (M-HN-9) and Sibai ST-2: Fengchi GB-20 and Zanzhu BL-2 used together can reduce yang qi that is adversely affecting the eyes. Fengchi GB-20, which pertains to the Liver and Gall Bladder system, is probably the best point to remove excess yang qi from both the head and eyes. Both were manipulated using a dispersing technique. Taiyang (M-HN-9), an extraordinary channel point that particularly affects the shaoyang channel, can also be used for excessive yang qi in the eye region. Sibai ST-2 is indicated for swelling and pain of the eve and its surrounding tissues, and it was needled in a distal direction (downwards) and threaded under the skin to connect with Juliao ST-3.
- Taichong LIV-3 and Xingjian LIV-2: Both of these points disperse and regulate Liver qi, disperse yang qi from the eyes and relieve nervousness and depression.

In addition to the main points above, the following secondary points were used at alternate sessions:

 Zhongwan REN-12 and Taibai SP-3: These points were needled using a reinforcing technique in order to strengthen Spleen qi. This was intended to have an indirect effect on regulating the Liver, subduing Liver yang via the controlling cycle of the five phases.



**Xiangu ST-43**: This point is indicated for facial swelling and conjunctivitis (a disease which also involves excess yang qi). It also acts as a counterbalance to the points Hegu L.I.-4, Quchi L.I.-11 and Sibai ST-2 because, being situated on the yangming channel, it will draw down excess yang qi from the head.<sup>5</sup>

Fig 1: Mrs S

In my own experience, if a practitioner is able to direct the needling sensation so that it reaches the site of the disease, the rate of clinical success in the treatment of acute disorders increases significantly.

Acupuncture treatment was given to Mrs S. on a daily basis, excluding Saturdays. Fortunately she was not particularly sensitive, which allowed me to manipulate most of the needles quite vigorously. In particular I manipulated Quchi L.I.-11 with the "Cooling the Sky"6 technique, massaging the channel route proximal to the point until she felt a cooling sensation travelling to her neck and head. I also ensured at every session that she could feel the needling sensation radiating from the point Fengchi GB-20 directly to her eye region. In my own experience, if a practitioner is able to direct the needling sensation so that it reaches the site of the disease, the rate of clinical success in the treatment of acute disorders increases significantly. As a sidenote to practitioners who find it difficult to achieve propagated needle sensation, in my personal experience if a patient experiences the needling sensation along a particular channel once, it tends to be easy to repeat this in subsequent treatments. This might be either because the patient is expecting it to happen following their first experience (thus helping

the qi move freely along this route), or perhaps because the qi has already been forced into the channel, making the route more open for subsequent treatments.

Immediately after her first few treatments Mrs S. would feel a cooling sensation in her eye region, which continued for a whole day and night following the treatment. Thus, even without noticing a significant change in the superficial appearance of the eye symptoms after the first few sessions, I was reassured that the prognosis was good. At this stage her Liver pulse had lost its wiry quality, and there was significantly less white coating on her tongue. Her abdomen became less distended and more comfortable. After seven daily treatments the swelling and redness around her eyes had decreased significantly. It took five more sessions on alternate days until Mrs S. recovered completely. We were both happy, and at this point we decided to conclude treatment.

Less than two weeks later, Mrs S. called me, clearly very upset and weeping down the telephone: "Dr. Halevi, everything has returned. I am cursed ... My eyes look just the same as before the treatment began!" I was aghast.

When she returned to the clinic I could see that she was right. Her eyes looked just as before: swollen, crimson-red and sagging. I told her that we must find the cause of this condition, otherwise I would be treating her forever.

We began by looking at her diet item by item. She did not drink coffee anymore, did not touch alcohol, ate very little spicy food, never drank Coke ... and then I remembered to ask a question that I had previously neglected to ask: "Mrs S., have you taken any medicines, herbs, vitamins or the like since we finished our sessions?"

"Why, nothing..." She said, "except those pills of omega-3 fish oil that the family doctor prescribed for me."

"And when did you start taking those?" I asked.

"Several months before I came to you. Then I stopped them while I came to you for treatment, because you told me to abstain from all medicines for that period."

"And did you resume taking the fish-oil pills after you got better?"

"Why, of course, it is very healthy for me - the doctor said so!"

The beauty of Chinese medical interrogation. One of the four methods of diagnosis, and by no means the least useful.

I asked Mrs S. to stop taking the fish oil capsules immediately, and this time her recovery was much faster. After eight further daily acupuncture sessions Mrs S. got her life back. To make sure, I gave her a call six months later (prior to publishing this article). She happily reassured that she was well, and that she had even got rid of the aquarium she used to have at home.

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#### Endnotes

- 1. According to Chinese medical theory the right side of the body pertains to yang and the left to yin. One example of this concept is the famous herbal formula You Gui Wan (Restore the Right Kidney Pill) mentioned in the herbal collections of Zhang Jin Yue (the Jing Yue Quan Shu [Collected Writings of Jing Yue] published in 1624CE). This formula is often prescribed in cases of Kidney yang deficiency. Clinical practice, however, usually shows that symptoms of excess yang qi tend to appear on the left side of the body, and symptoms of excess yin on the right. The answer to this puzzle is that energy circulates throughout the body in a spherical fashion. The energetic aura of the body is usually represented as a spherical shape, and the qi of the channel system behaves in a similar fashion. Thus yang qi originates in the right hemisphere and circulates to the left, and the yin follows suit vice-versa. When yang is in excess, it tends to stagnate on the opposite side, i.e. the left; when it is deficient, it tends to stagnate at its core, i.e. the right. The same principle applies to yin.
- In my experience, coffee with or without caffeine acts directly on the Liver. For a broader discourse on this issue see http://www. acumedico.com/female.htm or Halevi, S. (2001). "The treatment of Female Sexual Dysfunction With the Fire-Needle Technique" Journal of Chinese Medicine, No. 66 June 2001, pp34-38.
- All point indications, as well as some of the combinations, are taken from the following free database of acupoints: http://www. acumedico.com/acupoints.htm
- 4. The manipulation I usually use for this purpose is a swift insertion of the needle to the desired depth, obtain deqi, then twirl the needle anticlockwise with a slight upward pulling of the needle. I also sometimes use the "Wagging of the Tiger's Tail" technique to disperse qi, in which the handle of the needle is pushed and pulled to and fro along the trajectory of the channel.
- 5. This is a variation of the "one point above two points below" principle of point combining (see http://www.acumedico.com/ combinations.htm#CHAPTER%20B). This principle advocates combining local and distal points along the same channel segment (eg. yangming, shaoyang etc.). The practitioner needles a point close to the site of the disease, together with two points at the distal end of the channel. This combination draws excess pathogenic qi away from the area where the disease is focused, dispersing it along the channel. The two distal points exert extra "weight" at the distal end of the affected channel system.
- 6. The "Cooling the Sky" technique is used to treat conditions involving excessive heat. The needle is inserted swiftly to the desired depth, forcefully raised up a fraction, then gently reinserted to depth. This manipulation is repeated six times. The procedure is repeated at three different levels, from the deepest to the most superficial position, until the patient experiences a sensation of coolness (See Chen J. and Wang N. (1988) Acupuncture Case Histories from China. Eastland Press: Seattle).

## JCM 30th birthday

# Issue 90, June 2009, is our 30th birthday issue.

There will be special articles to mark this anniversary by Giovanni Maciocia, Heiner Fruehauf, Mazin Al-Khafaji, Peter Deadman and others.