

中医伤科手法治疗颈椎病图说

龙杞

Illustrated Cervical Spondylosis Manual Therapy Treatment in TCM Traumatology

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内容简介

本文以中英文编写，第 1-4 章为颈椎病基础部分，详细论述了颈椎病的病因病理、解剖特征、发病机理、临床症候、望闻问切的诊断方法、颈椎病的诊断及鉴别诊断。第 5-8 章为颈椎病的治疗手法，包括手法的学习、常用单式，复式手法的运用和颈椎病治疗的基本手法、分型手法及辩证手法。本书内容简明扼要，语言通俗易懂，图文并茂。每种手法不仅有具体文字说明，而且配以插图，以便于读者理解。强调在中医理论指导下实践操作是本书的重要特征。

Introduction of Contents

This book is written both in English and Chinese. Chapter 1 to 4 introduce the basic knowledge of cervical spondylosis, including the etiology and pathology, anatomical characteristics, pathogenesis, clinical symptoms, four diagnostic methods of observation, inquiry, auscultation, and palpation, as well as the diagnosis and differential diagnosis of cervical spondylosis. Chapter 5 to 8 discuss manipulation therapy for cervical spondylosis, including the learning and training in manipulation techniques, practicing the single-technique manipulation and compound-technique manipulation. We list the basic threptic manucaption techniques in treating cervical spondylosis, followed by introducing the manipulation for diffident type of cervical spondylosis and pattern-based manipulations. The book is concise and easy to understand with both text and pictures. To help understanding easily, each manipulation technique is accompanied by specific written descriptions and illustrations. Emphasizing hand-on practice manipulation guided by TCM is the key point described in the book.

作者介绍



谢可永毕业于上海中医药大学，首位中医伤科学博士。师从著名中医骨伤学家，国医大师，上海中医药大学终身教授施杞教授，深得其真传。长期从事中药，手法，针灸及导引对骨伤病证的临床治疗和理论研究。对颈椎病的证治更具独特的见解和疗效。编撰《中医骨内科学》、《现代中医药应用于研究大系·伤骨科》等15本专著并发表30多篇相关论文。

The Introduction of Author

KEYONG XIE graduated from Shanghai University of Traditional Chinese Medicine, the first Ph.D. awarded in TCM Orthopedics and Traumatology. He is mentored by Professor Qi Shi, a renowned TCM orthopedics specialist, a National Master of TCM and a lifelong professor at Shanghai University of TCM. He has been deeply influenced by the master and has inherited his

true essence. Dr. Xie has been practiced Chinese herb medicine, manipulation, acupuncture and Daoyin for many years; his research interests include the treatment of bone and joint diseases. He has developed unique insights and demonstrated proven efficacy in the diagnosis and treatment of cervical spondylosis. Dr. Xie has authored over 30 scientific papers and chapters, 15 books. He co-authored “Traditional Chinese Orthopaedic Medicine” and “Encyclopedia of Modern Applications and Research in Traditional Chinese Medicine, Chapter of Orthopedics and Traumatology” .

作者介绍



林慶成，1983年毕业于上海中医药大学医学系，获医学学士学位。毕业后在附属龙华医院中西医结合外科工作7年。后在东京慈惠会医科大学做客座研究员7年。获得日本针灸·柔道整复执照后，在东京开设了针灸接骨诊所。长期致力于骨关节·软组织损伤等疾病的临床治疗和理论研究40年有余。主要研究的课题是运用“少阳主骨理论”对退行性骨疾病的治疗，其科研论文已在日本学术杂志发表。

The Introduction of Author

KEISEI HAYASHI graduated from the Shanghai University of Traditional Chinese Medicine in 1983 with a Bachelor of Medicine degree. After graduation, he worked in the Department of Integrated Chinese and Western Medicine Surgery at the affiliated Longhua Hospital for seven years. He subsequently served as a visiting researcher at the Jikei University of Medicine in Tokyo

for seven years. After obtaining Japanese licenses in acupuncture and judo therapy, Acupuncturist Moxibustion Practitioner and Bone Setting Clinic in Tokyo. For over 40 years, he has dedicated himself to the clinical treatment and theoretical research of musculoskeletal and soft tissue injuries. His primary research focuses on treating degenerative bone diseases using the “The Gall Bladder Madeiran of Shao-yang Foot and Bone”, with related scientific papers published in Japanese medical journals.

前 言

颈椎病，古称“痹症”，“项强”是现代文明社会的一种慢性疾病，颈椎退化性改变是其重要的发病基础。然而随着电子设备的广泛使用以及低头工作时间的增加，使颈椎病的发病率一直居高不下，并且呈年轻化趋势。颈部僵硬和疼痛，肢体麻木等颈椎病症状严重影响人们的工作和日常生活，使人们生活质量下降，还对社会和个人造成一定的经济损失。

中医伤科手法治疗筋骨损伤有着悠久的历史，起源于《黄帝内经》，后经过几代医家的传承和发展，已形成了独特的治疗方法且疗效显著。中医伤科手法治疗颈椎病以“整体观”为基础，植根于“辨证论治”，以“筋骨并重”的理论，建立了“舒筋松肌、理筋正骨、平衡筋骨”的三步疗法，达到调和气血，筋柔骨正，标本兼治的目的。

现代解剖学研究表明，手腕由 27 块骨骼组成，28 块肌肉提供动力源以及丰富的神经网络。手部的结构和特殊功能赋予了医者灵巧的双手，能完美的承担复杂的手法操作，即使在科技十分发达的今天，也决定了手法的不可替代性。为此我们编著了中英文版《中医伤科手法治疗颈椎病图说》一书，以图文并茂的形式介绍基本手法的操作、作用和颈椎病的治疗手法。希望为颈椎病患者提供一种有效，安全的治疗方法。

作者 2025-08 于纽约

Preface

Cervical spondylosis is referred to as “Bi Syndrome” or “Xiang Qiang” in Traditional Chinese Medicine (TCM). It is a chronic disease caused by the progressive degenerative changes of the cervical spine under the aging process. However, the widespread use of electronic devices with long-term poor sitting posture have led to consistently high incidence rates of cervical spondylosis, particularly among younger populations today. Symptoms such as neck stiffness and pain, along with numbness in limbs, severely impact people’s work and daily life resulting in decreasing quality of life and causing certain economic losses for both society and individuals.

TCM orthopedics and traumatology manipulation approach to treat the injury of bones and tendons has a long history. Originating from Huang Di Nei Jing (《黄帝内经》The Yellow Emperor’ Inner Classic) has been passed down and developed through generations of providers, forming a unique and effective treatment method. The treatment of cervical spondylosis in TCM is based on a holistic view and the principle of syndrome differentiation and treatment. It is established on the theory of emphasizing both tendons and bones, creating a three-step therapy of Tendons-Relaxing and Muscle-Smoothing; Tendon-Regulating and Bone-Setting, and Tendon and Bone-Balancing manipulations. which aims to harmonize qi-blood, soften tendons and bones, and treating

both symptomatic and underlying causes.

The human wrist is composed of 27 bones, powered by 28 muscles, with a rich network of nerves. The special structure and functions of the hand give providers dexterous hands to perform the manipulation therapy, which is irreplaceable, even in today's advanced era. To this end, we have compiled the Illustrated Cervical Spondylosis Manual Therapy Treatment in TCM Traumatology, written in English-Chinese to introduce the commonly used manipulation techniques of cervical spondylosis in an illustrated format. We hope to provide an effective and safety method for patients with cervical spondylosis.

Author 2025-08 NewYork

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一、本书目的说明

本书旨在介绍与探讨有关颈椎病的手法治疗理论与实践经验，供相关专业人员学习、研究及参考之用。书中所涉内容基于作者的知识积累、临床经验及文献整理，不构成对任何个人或群体的诊断建议或治疗处方。

二、非医疗建议声明

本书内容仅供参考，不能替代专业医师的诊断与治疗。颈椎病具有病因复杂、个体差异大等特点，任何未经专业评估的手法操作均可能带来风险。

三、操作者资格与技术限制

书中所述手法需在专业培训下掌握，部分技术仅适用于具备资质的医生或治疗师。非专业人员擅自模仿操作，可能导致脊髓受压、神经损伤、血管意外等严重后果。

四、风险提示

若您存在高血压、骨质疏松、颈椎间盘突出、椎动脉供血不足、骨肿瘤、骨折等疾病，手法治疗可能加重病情，甚至引发不可逆后果。请务必在专业医生指导下进行治疗决策。

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特别提示

如您出现颈部疼痛、肢体麻木、眩晕等症状，请及时就医，由具备执业资格的医生评估治疗。切勿自行施治或请非专业人士作颈部手法操作。

Disclaimer for “Illustrated Cervical Spondylosis Manual Therapy Treatment in TCM Traumatology

1. Purpose of This Book

This book aims to introduce and discuss the theoretical foundations and clinical experiences related to manual therapy for cervical spondylosis. It is intended solely for learning, academic research, and reference by qualified professionals. The content is based on the author's knowledge, clinical experience, and literature review. It does not constitute medical advice, diagnosis, or treatment recommendations for any individual or group.

2. No Medical Advice Provided in the content of this book is for reference only and cannot replace the diagnosis and treatment of a licensed medical professional. Cervical spondylosis involves complex causes and individual variability. Any manual technique performed without proper evaluation by a qualified practitioner may pose significant health risks.

3. Practitioner Qualifications and Technique Limitations

The manual techniques described herein should be learned and applied only after professional training. Certain methods are intended solely for licensed physicians or certified therapists. Unauthorized imitation or use by unqualified individuals may result

in severe consequences such as spinal cord compression, nerve damage, or vascular incidents.

4. Risk Warning

If you suffer from conditions such as hypertension, osteoporosis, cervical disc herniation, or vertebrobasilar insufficiency, manual therapy may worsen your condition or cause irreversible harm. Always consult a qualified physician before undertaking any form of treatment.

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Important Notice

If you experience neck pain, numbness, dizziness, or similar symptoms, please seek immediate medical attention and receive evaluation and treatment from a licensed healthcare provider. Never attempt self-treatment or allow unqualified individuals to perform manual neck techniques.

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第 1 章 颈椎病概论

颈椎病又称颈椎综合征，是一种公认的难治性疾病，其特点是症状繁多、反复发作、久治不愈。探讨其发展过程和 Related 发病人群，常见症状，对于准确诊断和有效治疗至关重要。

第 1 节 颈椎病定义命名和发病率

1. 颈椎病定义

颈椎病是指单个或多个颈部椎间盘及其邻近椎间结构发生退行性改变刺激或压迫脊髓、神经、血管等，而引起的综合征。

2. 颈椎病命名

颈椎病的命名经历了漫长的时期，是融合中西医理论体系而形成的现代临床病名。在中医古籍中虽无颈椎病名，但记载有类似颈椎病的各种典型症状，相应的病因病理，诊断和治疗方法。如《黄帝内经》中载有项背僵硬，疼痛，手麻等典型症候群，提出风寒湿邪和外伤是引起这些症状的重要外界因素。而气血不足，脏腑失调则为重要的内部因素，把“项痹”“项强”“痹症”等作为颈椎病中医的诊断名。西方脊椎学对颈椎病的认识，始于公元 2000 年前的 Edwin Smith Papyrus 《艾德温·史密斯纸草文稿》，其对包括颈椎的 6 例脊柱损伤者的症状，治疗作了详细的描述。1871 年 Parkinson 描述了一位“风湿”病患者出现颈部不适，伴上臂和手指疼痛的类似于神经根型颈椎病。在 1930 到 1940 年代，随着 X 光技术的发展，人

们开始能够识别颈椎退行性的改变。“cervical spondylosis”也随之被列为比较正规的病名而广泛使用。其中英国神经学家 Brain、Northfield 和 Wilkinson 于 1933 年在文献中正式使用“cervical spondylosis”描述因为颈椎退变压迫脊髓的临床表现，有助于该术语的推广使用，并在 1952 年的医学文献中得到认可，从而成为颈椎病发展史上重要的里程碑。与此同时，六十年代有中国学者翻译了“cervical spondylosis”相关的文献，使该病名进入中国医学界的视野。颈椎病作为中文的对应术语被提议并接受。1975 年中国学者出版了首部《颈椎病》专著，提出颈椎、椎间盘等退行性改变是颈椎病的病理核心，并将此类病变命名为“颈椎病”。近半个世纪来随着颈椎病的发病，病理、分型等的更多研究，为提高颈椎病的治疗和预防奠定了基础。从“项痹”到“颈椎病”的演变，体现了中医整体思维与西医精准医学的智慧结合。提示在临床实践中既要善用现代诊断技术，也需传承中医辨证论治精髓，以取得更好的疾病防治效果。

3. 颈椎病发病率

据统计全球颈椎病发病率的约占总人口比例的 10% - 17.6%，其增长速度已超过糖尿病和心血管疾病，成为威胁人类健康的主要病症之一。根据世界卫生组织 (WHO) 最新统计，颈椎病发病率在不同国家及地区的分布有所不同，曾以老年退行性病变为主的颈椎病已演变为跨越各年龄层次的病症。以中国颈椎病的发病率为例，颈椎病的发病率约为 10% - 20%，但年轻化趋势明显。传统上以 50 岁以上中老年群体为主的发病率可达 20% - 30%，但近年来 15 - 45 岁人群的发病率增加迅速。从 20 - 60 岁职业人群患病率统计显示，35 - 45 岁年龄的群体已构成核心发病群体。其中不同职业，发病率有显著差异。如金融从业者、程序员、教师等伏案工作者患颈椎病的风险较

体力劳动者高出 4.8 倍，同时，病程进展速度也加快 30%。北美与西欧等国家颈椎病发病率约为 12% - 18%。其中以办公室职员和司机为多见。拉丁美洲的巴西、墨西哥等国的发病率为 10% - 14%。北欧以瑞典、挪威为例，颈椎病发病率较低，通常低于 10% 以下。以上资料显示，颈椎病的发生除了与年龄增长有关，还与病人的体质和职业及生活习惯等因素密切相关。

第 2 节 颈椎病主要症状

颈椎病症状繁多，其最为常见的有颈部疼痛、僵硬、功能不利等症状。

1. 疼痛

约有 60%-80% 的颈椎病患者，在头、颈、项背、肩臂等部位有疼痛症状。多呈钝痛或隐痛，常见于晨起。

(1) 颈项疼痛：颈项部疼痛是颈椎病最常见的症状之一，约占颈椎病患者 70% - 90%。颈部容易受风寒湿邪侵袭，引起颈部肌肉痉挛，导致颈椎生理曲度减小，或反曲等异常变化。如斜方肌受损肿胀，流向斜方肌的血液减少，肌内张力持续增高，则出现颈肩疼痛。或由于长期低头工作，使颈部肌肉长期呈痉挛状态，刺激周围小关节滑膜及椎间盘周围的神经纤维或神经末梢，或因椎骨退行性变化形成骨赘压迫邻近神经，均可引起颈部疼痛。

(2) 肩部疼痛：大约 50% - 70% 的颈椎病患者会有肩部疼痛，当颈椎病影响到颈神经根时，肩部可出现放射性疼痛。表现为持续性钝痛，或呈现间隙性剧烈的刺痛、灼痛。疼痛常伴有肩部的僵硬和活动受限。

(3) 上肢疼痛：大约 30% - 60% 的颈椎病患者可沿肩膀、