



JING SHEN

Issue 5 : April 2010

from the College of Integrated Chinese Medicine

The shen

Peter Firebrace delves right down to the root, or *ben*

Humanitarian disasters

Danny Maxwell explains how our skills can help and calls for support

Nourishing the Spirit

John Hicks encourages us not to neglect the inner

Good morning!

Danny Blyth's breakfast menu

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Why *Jing Shen*?
Just as *jing*
and *shen* stand
alone but unite
as a combined



The wait is over! Emerging from winter, we harness the energy of the tiger to inject new life and vigour into our practice of Chinese medicine. This issue will reach those attending the Rothenburg conference, so we extend a warm welcome to all new readers. What has *Jing Shen* in store for you? Peter Firebrace explores the

power, so do TCM and Five Element theory come together to create the integrated style of acupuncture taught here at the College of Integrated Chinese Medicine. We aim to spark ideas, fuel discussion, and help nourish our professional community.

精神

omnipotence of the *shen* and how we can invite its resonance into our treatments via specific acupuncture points. Mindful of recent events in Haiti, Chile and the Pacific islands, Danny Maxwell of World Medicine and Jo Bond look at the contribution we can make, as practitioners of such a versatile medicine. Angie Hicks discusses how to identify the level of our treatments and John Hicks guides us through how acupuncture treatment can clear 'clouds' making way for inner change in our patients. Plus we have our usual tasty morsels from Danny Blyth, *qi* exercises from Gio Maschio, and focused coaching from Ian McDermot. Not forgetting my favorite fun stuff – Angie's crossword and 15 treasures from Lillian Bridges. *Jing Shen* continues to thrive with the support of our new sponsors Balance and the *Journal of Chinese Medicine*, and we extend our gratitude to them. Now I'm off to read this issue with a hot cup of *chai* in the company of my daffodils. Grrrrrrreat! Enjoy.

Charlotte Brydon-Smith Lic Ac, BSc (Hons) Editor
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Charlotte



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Editor Charlotte Brydon-Smith
Design The Design Works, Reading

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The facts, in a nutshell



The shen

Peter Firebrace delves right down to the root, or *ben*

神



Jing can be seen in sperm and ova, *qi* we breathe in and out every day, *shen* can't be seen, can't be felt, can't be heard, but without it we'd never find the way. *Jing, qi, shen, dao,*

they're the heart of now, the essence of life, known, unknown. There's a space without a place beyond time's ceaseless race, beyond left and right, beyond flesh, blood and bone. Find it, you're at rest and deeply refreshed, lose it and you no longer feel at home. It's inaudible, invisible, unreachable, unteachable, an inexhaustible source of radiance in an ever-present zone.

I have wrestled for some years to understand the *shen* (神) and have studied many Chinese classical sources including Chinese medical, Daoist philosophical and *Neidan* (內丹) alchemical texts. Over time I have realised that this is a problem of equivalent complexity to trying to define God – with the proviso that it/he/she/they may not exist at all!

The *shen*'s earliest origins were as spirits of the ancestors, then later as spirits of heaven (in contrast to the *gui* (鬼) spirits of earth). Later still they were considered to be gods, genies and divinities and then powers beyond *yin/yang* (as in the *Yijing*) and therefore beyond rational comprehension. Finally they were seen as the manifestation of Spirit in man (as in *Zhuangzi*).

The *shen* are expressed through key phrases such as *jing shen* (精神). This is the perfect balance of Water and Fire – Heart and Kidney in harmonious free communication and an expression of health and vitality itself. They are also expressed as *shen ming* (神明), the radiant illumination that gives perceptive intelligence, clarity of thought and conscious awareness, which manifests as brightness of mind and warm generosity of spirit.

The *shen* has indisputable links with the transcendent place in the realm of philosophy and religion. It also has a medical perspective that places the *shen* in the heart, in the blood and in the brain. It is eminently immanent, so we are left speechless (as perhaps we should be, in true Daoist fashion!) before something indefinable. And all this when we do not know even whether it is singular or plural, let alone treatable or untreatable! Yet it consistently appears as the most subtle and precious of the three treasures (*san bao* 三寶) and we are urged to go to the root of the *shen* (*ben shen* 本神) for full and effective treatment of illness (*Benshen, Lingshu*, chapter 8). Without it there is sadness or madness, with it serenity and peace. It therefore appears as the crux of health itself.

The *shen* is crucial in my acupuncture practice – for myself as a practitioner and for the patients themselves. In abstract

terms I might define it as a link with the limitless. It will show in the traditional brightness of the eyes, an inner content not related to circumstance, an understanding and awareness that is full of brightness and spontaneity, an openness of the Heart without pretension and an atmosphere of clarity and warmth.

How to restore it when it is lost? We can restore the balance of *yin/yang*, of taking in and giving out and of Blood and *qi*. These will nourish and move each other in perpetually circulating abundance. If we bring harmony to the emotions, to the stability and serenity of the Heart, which is rooted and anchored in the Kidneys, the *shen* will return.

I have always found it interesting that 'shen points', that is acupuncture points with the character *shen* (神) in their names, are clustered in four main areas of the body – at the navel, Heart, head and wrist.

At the navel, itself known in ancient times as *ming men* (命門) the Gate of Destiny, we find Ren 8 *shen que* (神闕) the Watchtower of the *Shen*. This is just above the lower *dan tian* (下丹田), on the border between the middle and lower *jiao*. It is therefore perfectly placed to tonify the Kidneys and Spleen in cold deficient exhaustion. Here we have our own personal 'ancient' link to the ancestors through the umbilical cord in our prenatal days, fed by the blood of the mother.

Around the Heart, in most traditions, is the middle *dan tian* (中丹田). Here we find a whole cluster of *shen* points. On the back is Du 11 *shen dao* (神道) Way of the *Shen*. This is helpful



in all kinds of depressive or manic states. Also Bl 44 *shen tang* (神堂), Hall of the *Shen*, which is useful in calming the heart and relaxing and opening the chest.

At the sides, Gb 23 *zhe jin* (輓筋) Flank Muscles and Gb 24 *ri yue* (日月) Sun and Moon both refer to the *shen* in their common alternative name *shen guang* (神光) Light of the *Shen*. Both points help to free stagnant Liver *qi* that is causing sadness and sighing. Gb 24, as the *mu* point of the Gallbladder, particularly moves a situation forward. It is clarifying with its incisive decision-making power.

On the front, Kid 23 *shen feng* (神封) Sealing in the *Shen* and Kid 25 *shen cang* (神藏) Storing the *Shen* (so restoring it) help to balance Fire and Water as the Kidney meridian enters the Heart area. They are calming and open the chest and relieve oppressive anxiety. It is also interesting to note Ren 15 *jiu wei* (鳩尾) Dove Tail, which has *shen fu* (神府) Storehouse of the



Shen as an alternative name. This has excellent calming and stabilising effects in panic, anxiety, mental instability and tightness of the chest.

On the head the eyes themselves are described in ancient texts as *shen zhu* (神珠) the pearls of the *shen*, where we can see the *shen ming* (神明) shine. Above the eyes is the point Du 24, *shen ting* (神庭) Courtyard of the *Shen*, which affects the brain (*yuan shen zhi fu*, 元神之府, the storehouse of the original *shen*). This is where the *tai yang* bladder and *yang ming* Stomach meridians bring their strong yang influence and where the internal Wind of epilepsy and wild mania can be calmed and cleared. Next to it, Du 23 *shang xing* (上星) Upper Star has as alternative name *shen tang* (神堂) Shen Hall and also *gui tang* (鬼堂) Demon Hall as well as *ming tang* (明堂) Bright Hall. It is one of Sunsi Miao's 13 *gui* (鬼) points for the treatment of possession. Here with the background of blocked sinus and thick phlegm congestion in the head, the patient is dull and apathetic. Dispersing the point restores the brightness of the *shen*. Moving sideways, Gb 13 *ben shen* (本神) Root of the *Shen* reunites with the *yang wei mai*. This point can clear the wind of madness or epilepsy while restoring peace to the brain. With these *shen* points on the head we are not far from *yin tang* (印堂) Seal Hall and the calm detached serenity of the upper *dan tian* (上丹田).

At the wrist we find Ht 7 *shen men* (神門) Shen Gate or Door, *yuan* (原) source point of the heart, though in some early texts such as *Lingshu* chapter 1 and *Nanjing* chapter 66,

P 7 *da ling* (大陵) Big Mound is used instead. This is perhaps everyone's favourite *shen* point. Here we can open the door to let the *shen* back in or close the door to keep the *shen* safe inside. A door is a space in between two places. Ht 7 *shen men* opens that space to restore free communication and a calm focus and concentration. It can be used in fearful anxiety, memory loss, madness with sadness or laughter, the bipolar roller coaster of emotional highs and lows.

As a final note, *shen* has great importance in the classic sexual texts, such as *He Yin Yang* (合陰陽) Uniting Yin and Yang. When man and woman fuse together, there is no *yin*, no *yang*, each has gone beyond to be achieved and fulfilled in the other. They then return to the regenerate transcendent source of *yin/yang*, the *shen*.

In conclusion we may be unable to define *shen* precisely, we may be uncertain as to its/ their exact whereabouts, but we know when we are connected or disconnected. Acupuncture treatment is one way to reconnect to the *shen*, allowing the *shen ming* (神明) to shine once again and full health to be restored. The importance of going to the root (*ben* 本) of the *shen*, (as in *Benshen*, the title of *Lingshu* chapter 8) cannot be over-emphasised:

You may be good at feeling the pulse, may be brilliant at reading the tongue

You may know the Neijing inside out, you may follow the *Shang Han Lun*

You may dream of the Yellow Emperor, he may whisper right into your ear

You may have worked out your own system, so every symptom disappears

You may treat according to the season, adapt it to the hour and the day

You may pore over your stems and branches charts to make sure the *qi* doesn't slip away

You may be good at treating creaking joints, have the gift to take away pain

May straighten up the bent like you're heaven-sent, help the crippled to walk again

You may know how to cure with herbs, push and pull the *qi* with *tui na*

Qi gong it, *kung fu* it, if you can really do it, your patients will think you're a star

You may know how to treat with food, banish Cold with moxa's fire

Regulate the *qi* with the needle as your key, opening and closing as desired

You may do cosmic or cosmetic, Five Elements or TCM

You may do Japanese, Vietnamese, Korean or your very own special blend

You may be strictly medical, whatever that may mean

You may work from home, you may work on your own or you may be part of a team

You may do *akabani*, you may prefer Aka Bilk
Do impro, retro, mix and match metro, smooth your patient's *qi* like silk

You may be old, you may be young, your healing powers weak or strong

But you do what you can with the *yin* and the *yang* to keep them healthy and living long

But sometimes you mix up your *yin* and your *yang*

And don't leave enough space for the *shen*

Don't be fooled by the *biao*, don't give up on the *dao*

Make sure you go right to the *ben*

The main text of this article was originally published in *Thieme Almanac 2008: Acupuncture and Chinese Medicine* – it is reprinted here by kind permission. www.thieme.com See p 39 for details of Peter's forthcoming CPD event



Peter Firebrace studied acupuncture in England, France and China. He has also studied Chinese language and philosophy. Past principal of ICOM, he is a co-founder of Monkey Press, writes books and poetry and has produced Chinese medicine DVDs. He teaches widely in Europe and practises acupuncture in London.

Acupuncture in humanitarian work

With the situations in Haiti and Chile fresh in our minds we ask – what part can we play as acupuncturists in the relief effort? **Jo Bond**'s final-year research dissertation sheds light



Although there is a wealth of research on international humanitarian aid, there is very scant research and knowledge about how acupuncturists are currently

working in this field, and the potential acupuncture has to contribute positively to humanitarian work globally.

My research set out to identify the motivations and intentions of acupuncturists engaged in humanitarian situations, and to explore the main issues that impact on the effectiveness and appropriateness of acupuncture used across different countries and cultures affected by crisis.

The global and philosophical views that were expressed about the use of acupuncture for humanitarian work were among the most interesting ideas that came out of talking to participants.

One participant expressed the opinion that humanitarian acupuncture is 'a very pure manifestation of why people get into acupuncture as a profession'. I understood this to mean that acupuncturists train to care for people with a desire to help them achieve higher levels of health. We, as practitioners of Chinese medicine, place great importance on the deeper aspects of *yin* and *yang*. We seek to find the source of the imbalance that

is causing the problem and to find a way to restore balance.

Disaster and post disaster situations were seen as '*yang* situations, which need the soothing *yin* healing aspect to balance them – part of the world balancing itself'. In this respect the acupuncturists are the *yin* healing aspect.

The same participant further stated that it had been part of his aim 'to export good intentions, compassion and skills with the effectiveness of acupuncture in treating trauma and emotional blockage'. Empathy with desire and intention for your patient to get better are very much part of the philosophy of acupuncture, and it can be seen as a natural progression for this to extend more widely to a world view.

It struck me that acupuncture has a unique way of understanding the world, people and illness. The holistic nature of acupuncture, treating the mind, body and spirit on an individual basis makes it a uniquely appropriate therapy to be used in communities that have been through traumatic events, or live in a state of anxiety due to chronic poverty or an uncertain future. The ability to reach the person at all levels when treating is highly valuable. This was well illustrated by one participant when she said 'acupuncture (as an energetic therapy) has a deeper understanding



Palestinian men receiving their first acupuncture treatment administered by World Medicine volunteers

of how people are...in situations where there have been dramatic energetic changes'. This is particularly important as people tend to somatise their experiences, especially if they are not from a culture where it is normal and acceptable to seek help for mental and emotional disturbance or distress. So where there is thought to be no cause in Western medical terms and therefore no cure, acupuncture works on a different level treating both the person and the root of the imbalance that is manifesting in signs and symptoms of ill health.

An interesting issue was raised as to how acupuncture projects brought in from outside a community could be culturally

appropriate for the people within the community. It seemed that a collaboration with local traditional healing practices might help Western practitioners to understand some of the distinct concepts of self and healing held by different communities. Some training took place with local healing traditions and amongst practitioners, such as teaching ayurveda students ear acupuncture, and getting traditional healers involved in projects. Overall there was some awareness that the intention should be to help preserve culturally embedded self concepts and effective traditional healing practices while at the same time offering something new and potentially very beneficial in acupuncture.

One participant said 'Traditional healers have participated in the training... a lot of traditional... forms of healing have commonality... they understand *qi*.' This idea that there is commonality is echoed in research that has found that acupuncture can appeal to people who use traditional medicine, as it seems less intimidating and more familiar somehow than some Western medicines (references available in full dissertation document). However it was unclear how much shared learning there was and whether there was an openness for further collaboration to achieve better and more appropriate treatments for the communities.

Lack of local knowledge and understanding can be a hindrance, as was described by one participant in Nepal trying to understand the impact of the patients' medication in Chinese medicine terms. 'We spoke to local herbalists but couldn't find common names for plants.' He also explained how they had tried to use a so-called universal pain scale, only to find it wasn't so universal and the community didn't understand – more experience and understanding of the culture and language may have led to culturally appropriate methods of measuring.

Aid or opportunity?

The practitioners I spoke to were keen to point out the great benefits they gained in terms of learning and experience from their voluntary aid work. I find it personally inspiring to consider how acupuncture as a profession might benefit from this type of work, in

terms of raising its public profile, increasing research, showcasing its effectiveness for different people across diverse settings, and demonstrating its cost effectiveness. These benefits could combine to encourage integration with Western and other models of healing.

In conclusion, although there are clearly challenges to acupuncture being used in a humanitarian way, I was left with the impression that acupuncture, by its very nature and in what and how it can treat, is a therapy that has very positive potential for being beneficial in communities affected by crisis. If acupuncturists can bring an holistic awareness to their practice (as they do with their treatment) and apply this to looking at the whole situation when treating globally within culturally different communities, then acupuncture can make very positive and appropriate contributions. Especially when used along humanitarian lines to bring health benefits and healing to communities suffering from the effects of disasters and chronic poverty.

Jo Bond recently qualified from the College of Integrated Chinese Medicine and is now practising as an acupuncturist in Bristol. Her previous studies of developing nations and experiences while travelling led to an interest in humanitarian work, and her dissertation completed as part of her acupuncture degree provided the ideal opportunity to explore the part acupuncture could play in this.

World Medicine

Danny Maxwell reports on five years of humanitarian acupuncture... and counting



For many physicians – Chinese and Western alike – the harrowing suffering recently witnessed in Haiti and Chile elicit a powerful natural desire to help.

As acupuncturists, not only are many of us motivated by the urge to be of service, we are also trained in a unique system of medicine that can offer huge benefits to survivors of traumatic global events.

In the beginning...

World Medicine was conceived in the months following the Asian tsunami of December 2004. Initially it was just an idea – so big, scary and inspiring it would set you physically shaking. Back then we were called Acupuncture sans Frontières, and with the backing of the Sri Lankan Buddhist community 24 practitioners of acupuncture, herbal medicine, massage and homeopathy travelled to the south coast of Sri Lanka to offer their skills to survivors. This initial three-week project was followed by two others in Sri Lanka, during which time we provided thousands of treatments. The work was challenging but deeply rewarding, carried along as we were on a swell of compassion, camaraderie and commitment to our chosen healing arts.

The vision

The vision of this work has always been in line with the holistic perspective of Chinese medicine: imagine the earth as a huge being –

Gaia if you like. Just as human beings develop points of friction and constraint that produce heat, so does the earth – like global *ashi* points. World Medicine's vision entails groups of skilled CAM practitioners travelling to places in the world where their skills are needed to relieve suffering. It seems to me that no matter what these practitioners do in terms of specific medical interventions, the introduction of a group of energetically balanced people with



The pioneering Acupuncture sans Frontières team with the Venerable Makure Mangala prior to the first project in Sri Lanka

compassionate intentions into an energetically deranged place is potentially revolutionary – like needling a global *ashi* point to disperse and transform its *qi*. Although our practitioners include osteopaths, massage therapists and homeopaths (amongst others), I like to think that through their connection to

Chinese medicine acupuncturists have an earthy and robust approach to healing that provides access to something eminently useful for the aftermath of acute trauma.

The time for our services is not, of course, in the acute stages of disaster relief; we do not wish to become part of the problem or to place our volunteers in any danger. World Medicine comes into the picture once the dust has settled and people have food and shelter – when they are needed again by their community to be part of the solution. We all know how difficult life can become when a person is sick or out of balance – the internal chaos frequently manifests outwardly into the world around them. In the same way, those affected by global disasters may not only suffer physical impediment, but can be damaged by the psycho-emotional trauma. As acupuncturists we witness daily the transformative effects of acupuncture on physical and emotional pain. Whilst the literature is scanty, anecdotal evidence suggests acupuncture can be very effective in the treatment of post-traumatic stress disorder. That said, as volunteers we frequently find ourselves treating people with the same chronic ailments seen in our clinics at home; patients who have lived through devastating trauma do not necessarily express their pain openly, although the clinical signs are there for the attentive practitioner.

It is, of course, not just the patients who receive benefit. The rewards for volunteers are immense – and not just in terms of personal fulfillment. The clinical experience gained

from working in such situations cannot be overemphasised. As a volunteer one is called to treat people suffering from the whole gamut of diseases to which human beings are prey – people dying of cancer, children with severe learning disabilities, patients with severe epilepsy – to name but a few. I recall my silent terror when a translator cheerfully informed me that the patient in front of me suffered from leprosy. In such situations the immense value of the Western biomedical knowledge base is brought sharply into focus. Symptoms and disease states that in the West are either to be moderated with drugs or confined within hospitals are witnessed in their raw, untreated state by a visiting physician (often with equally spectacular clinical results). A volunteer's clinical skills and emotional stability are thus frequently pushed to the limit.

This kind of work thus performs a valuable function: it matches those people fortunate enough to be healthy, happy and skilled with their counterparts elsewhere in the world who temporarily find themselves vulnerable and in need. Volunteering thus provides a valuable opportunity for practitioners to give something back to a world that has treated them well.

The acupuncture

The practicalities of this work – treating many patients in limited space with limited communication – mean that practitioners have to find creative ways of applying their art; these frequently include the use of microsystems, point protocols, and the



Sean Cleere defining 'multibed' treatment at the World Medicine project in Mysore, India

honing of visual and palpatory diagnosis. It is a rich environment in which to work, in which sectarian politics of schools and styles pale into insignificance in relation to the task in hand. Such humanitarian work seems also to have had an effect on the practice of acupuncture itself; many volunteers have returned from work overseas to become staunch advocates of multibed acupuncture.

Passing it on

Some people suggested initially that it would be pointless travelling abroad to treat patients for just a couple of weeks. Whilst the results of the projects so far suggest this is not the case, it is of course better to provide sustainable projects where patients can receive ongoing treatment. The concept of proverbially 'teaching a man to fish' is high on World Medicine's agenda. In both Sri Lanka and more recently in Gaza, World Medicine volunteers have taught auricular

acupuncture to local physicians – who can then use it to treat both their patients, and themselves.

Into the future...

Like most charities no doubt, the greatest challenge currently facing World Medicine is funding. Thus far our work has involved volunteers raising funds to cover their own flight, accommodation and in-country costs. We are currently restructuring World Medicine in order to make this work sustainable. To support the imminent return of another team to Gaza we are holding a fundraising party in London; in the longer term we intend to recruit professional fundraisers to procure larger sums of money from Trusts. For the moment, however, fundraising necessarily remains part of the overall experience of volunteers' involvement with this work.

Another major challenge is finding project leaders of suitable skills and experience. In the



World Medicine volunteer Gisela Norman treating a patient in Gaza

past we have had to shelve projects due to the lack of suitable project leaders. It takes a broad pair of shoulders to head up projects of this kind. Not only is there the preparatory work involved in setting up a project and dealing with overseas authorities, once out in the field it can be equally testing to manage a group of practitioners who find themselves well out of their comfort zone.

World Medicine currently runs an ongoing project in Mysore, India, which provides acupuncture and other therapies to child victims of human trafficking. We also intend to continue our work in the Middle East, following previous well-received projects in the area (returning to Gaza in March and August 2010 and Nablus in October 2010). New projects are possible in Haiti or Africa. Our vision is eventually to be able to provide ongoing treatment and instruction to multiple communities around the world.

How you can help

World Medicine needs you. We need project leaders, committee members, fundraisers and volunteers to join us in our work. If you are as inspired as we are about this work and wish to get involved email us at

info@worldmedicine.org.uk. To find out more about our work or to donate go to www.worldmedicine.org.uk. World Medicine is organising a workshop in conjunction with ACMAC (the Association of Community and Multibed Acupuncture Clinics) and Balance Healthcare for practitioners interested in humanitarian acupuncture – see the events section at jcm.co.uk for details.

Acknowledgements

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Notes and references

- 1 Maxwell, D, Cassidy, M, Kivity, O (2006) 'Acupuncture sans Frontières', *Journal of Chinese Medicine* 80, 34–39
- 2 World Medicine is running a joint training day with ACMAC (the Association of Community and Multibed Acupuncture Clinics) in July 2010

Danny Maxwell gained an MA at Cambridge University before going on to train in acupuncture at the College of Integrated Chinese Medicine. He has since trained in *tui na* and is currently completing an MSc in Chinese herbal medicine. Danny is co-editor of the *Journal of Chinese Medicine* and chairs the British Acupuncture Council Editorial Committee. He founded World Medicine (www.worldmedicine.org.uk) in response to the Asian tsunami of December 2004. Danny lectures in Chinese medicine, and is an enthusiastic practitioner of *tai chi*, *qi gong* and meditation, which form the foundation of his understanding of Chinese medicine.

Eight key ways to monitor core level change

Angie Hicks describes some valuable indicators which track our patients' progress



I have treated Sally for 17 years. Acupuncture helped her to conceive and supported her through her pregnancy. Her daughter is now 16. She has come for treatment every six to eight weeks since then. Why does she still come? She comes because treatment keeps her healthy and on an even keel.

Before she had treatment she was terrified that her husband would die suddenly (just as her father had). At her first consultation she described having 'catastrophic fantasies' while she was washing up. During the early stages of treatment these gradually faded along with many other fears. Since then she has dealt with life's ups and downs (and life hasn't always been smooth) and remained healthy.

Sally knows that treatment doesn't just help her physically but has a huge effect on her mind and spirit too. This is because it is directed at a 'core' level of her being. Treatment is about treating her as a whole *person* rather than just her physical *symptoms*.

The eight key indicators

This article discusses eight indicators that show whether our patients are progressing at this core level. Awareness of them can be

extremely helpful because their absence or presence can give practitioners important feedback about the efficacy of treatment.

Practitioners who treat patients on their constitutional factor (CF) may be familiar with these indicators but all practitioners, no matter what style of treatment, can use this list to monitor their patients' progress.



1 Patients feel better in themselves

To assess our patients' overall progress from treatment we monitor improvements to the main complaint. We might also ask about more general areas including sleep, appetite, bowels, urination and menstruation.

There is one other important question, however. This is, 'How are you feeling in yourself?' This question monitors deep levels

Patients feel better in themselves

A number of symptoms change together

of transformation arising from treatment and tells us whether patients are changing from the inside out.

A change in wellbeing can be difficult for patients to verbalise. They may say 'I can't put my finger on it, I just feel more positive' or simply that they are calmer or more relaxed inside.

Even if people have treatment for purely physical symptoms and are generally healthy they can still experience an improved sense of wellbeing from core level treatment.

If patients only experience physical improvements with no accompanying internal changes (other than their delight at the symptoms improving) we might question whether we're really treating the patient at this core level. Patients who are not feeling 'better in themselves' are giving us important feedback. Rather than ignoring it, it can stimulate us to reassess the diagnosis. Maybe we need to treat another Organ or Element to reach the core level?

A patient was better from a urinary problem but there were no other changes. After I changed the emphasis of treatment from his Kidney to his Lung he noticed that he had more energy and felt 'back to his old self' – even though he had previously said he felt well. The previous lack of any change in his wellbeing had told me that treatment hadn't yet reached a core level and I needed to re-evaluate my diagnosis.

2 A number of symptoms change together

Another key sign of deep level transformation is several signs and symptoms changing at the

same time. Patients may be surprised. They expected help with their main complaint first and maybe other symptoms later – but now they're all changing simultaneously!

Why does this happen? This can best be explained metaphorically. Chinese medicine describes twelve Organs that interact and affect each other, rather like a family unit. Sometimes in our own families if one member becomes ill it puts a strain on the whole family. The other family members try to cope with the additional pressure, but may become exhausted, stressed and ill in the process.

Once the sick family member becomes well again, everyone sighs with relief. The strain has been lifted and the whole family feels better. In the same way if one Organ (the sick family member) is restored to health many signs and symptoms (the other family members showing their stress and exhaustion) improve at the same time.

If we are not treating a patient at a core level the opposite can happen. We find that treatment deals with only one symptom at a time. In fact we could say it's a bit like 'pulling teeth' one by one. For example, it may be that the patient's sleep improves but the poor appetite, chest problem and backache remain. The symptoms disappear one at a time and sometimes as one symptom goes another reappears.

Following on from the analogy above, it's like treating one of the exhausted family members but not the person who originally became ill. That person remains untreated and is still sick and so the problem remains.

Awareness moves from symptom to self

Certain changes are outwardly noticeable

Maybe we need to ask ourselves ‘What is the best treatment for this whole family unit?’.

3 Awareness moves from symptom to self

Another key indication of core level change is patients’ change in attitude to their symptoms. As they notice shifts in their mind and spirit they start to handle life issues better. As a result they may switch their concentration from their presenting symptoms to themselves.

They may still want to discuss their main complaint but they may also want to talk about other areas to do with their wellbeing. They might even connect some aspects of their health to how they feel inside.

A patient initially came for treatment for a skin problem and a bowel condition. After a few treatments she described her surprise at finding herself skipping happily along the road after a treatment and later that week how much better she felt relating to her boss. Her skin and bowels gradually improved but she became much more focused on her general wellbeing and the fact that she was gradually coping better with her life.

If patients’ concentration remains on physical symptoms alone it may be a sign that they haven’t been touched at a core level and haven’t yet experienced the depth of change that can result from treatment.

It is interesting to note that patients who decide to have long-term acupuncture treatment often do so because they notice improvements in their wellbeing and their ability to handle stress. This improved internal

balance can result in patients being less likely to succumb to severe physical illness.

4 Certain changes are outwardly noticeable

Understanding what constitutes health is multi-dimensional and our patients can’t usually verbalise everything that is going on for them. Many times practitioners have to rely on their observational skills when assessing patients’ progress.

Sometimes we have almost a ‘gut’ feeling that the patient is better. We may notice an increased strength that the patient has not yet become aware of or that the patient looks better. Alternatively it may be something more palpable such as the signs discussed below.

For example, a shine in the eyes may be something we notice immediately after a treatment. Or sometimes there is a more gradual clearing over a few treatments.

Five Element practitioners are trained to look at colour, sound, emotion and odour as part of the patient’s diagnosis. These will always change when a patient is being treated at a core level – so all practitioners can look out for them.

Changes to the facial colour can be subtle. For instance, the skin tone may become slightly less yellow or blue. A change can also be more obvious, such as redness disappearing from the patient’s face or the face becoming less dull-pale. We can also expect the voice tone and odour to change.

Emotional changes are sometimes the most noticeable. Again and again we see patients come to treatment feeling distressed,

depressed, anxious, despairing or frustrated or in some other emotional state. After treatment patients may get off the couch feeling better.

If a recurring negative emotional state becomes less frequent, we can be sure that the Organs, which reflect the emotions, are becoming healthier. If there are no changes to the shine in the eyes or the patient's colour, sound, emotion or odour it is less likely that we are treating our patients at a core level.

5 Patients' pulses harmonise

Core level transformation is also indicated by changes to our patients' pulses.' The depth, width, strength, shape, rhythm and rate of the pulses can be monitored to assess patients' progress but just as important is the overall harmony between the pulses. We can feel changes on the pulses both from treatment to treatment and during a treatment.

An *overall* change to all the pulse qualities during treatment is a good sign. Practitioners often notice that the pulses feel more similar when treatment is going well as opposed to less harmonised if the treatment is not going well. Going back to our analogy in core level change 2, now that the sick family member is being treated the whole family is less stressed, so can work together as a family unit. This is reflected on the pulses.

Pulse changes also indicate that the correct Organ is being treated. If the treatment is reaching a core level it will often have very little impact on the pulse of the Organ being treated, but there will be a change to all the other pulses. Many students have been puzzled by this as it seems counterintuitive. Surely the



pulse of the main Organ being treated should be the one that gets better?

As we become more experienced we learn to accept and appreciate this response. In fact, if the pulse of the main organ being treated becomes stronger and fuller but the other Organs on the pulses don't change, then it is not a good sign and indicates that the key Organ or Element which needs treatment has been missed. Continuing the previous analogy, the family members who were trying to help out now feel under less pressure and regain their energy because the sick family member is being treated.

6 Treatment reactions lead to positive change

A treatment reaction (or healing crisis) will indicate that the patient is making progress at a deep level. Not all patients have treatment reactions. If they do, however, it is worth checking that they really are reactions and not aggravations. In order to assess that a patient is truly progressing it is important for practitioners to recognise the difference between them.

When patients have treatment reactions they often feel temporarily worse for 12 to

Patients participate more readily in lifestyle changes

Life has a forward momentum

48 hours and then feel *better than before they had the treatment*. This may be an important part of a patient's healing process. Some typical characteristics of a healing crisis are:

- it usually has a rapid onset
- although the symptoms may be severe, patients are not brought down by them and retain a sense of wellbeing throughout the reaction.

It is essential to warn patients about treatment reactions and to reassure them if one occurs, as it is a very positive effect of treatment.

An aggravation, as opposed to a treatment reaction, can give a practitioner important feedback. It signals that treatment was *not* on the patient's core Element or Organ. Patients who have an aggravation may *not* experience feeling better after the reaction and their symptoms may return to how they were prior to the treatment. If aggravations happen frequently it can alert practitioners that they may need to reassess their patients' diagnoses.

7 Patients participate more readily in lifestyle changes

When a patient changes at a core level, a shift will often happen in their relationship to their lifestyle. They may naturally want to change their diet or to rest or exercise more. Where there might have been resistance to suggestions, now they are welcoming your advice.

For this reason it is often a good idea for practitioners to consider how to present lifestyle suggestions and choose their timing with great care. Rather than throwing too many suggestions at a patient at the

early stages of treatment it could be less overwhelming to suggest small changes that the patient can cope with step by step as they progress.

Recently a patient who drank too much coffee and had never looked at a vegetable in her life (a slight exaggeration but almost true!) changed effortlessly to a healthier diet after she was treated on her core Element a number of times.

8 Life has a forward momentum

Deep level treatment often creates a general forward momentum in a person's life. Patients may find it easier to deal with the challenges and events that everyday life presents them.

A patient never learned to drive. She always visualised herself crashing the car so didn't take the risk. After some treatment she felt less fearful and started to have driving lessons, eventually passing her test. She didn't think she could have achieved this without the support of acupuncture treatment.

If a patient is not changing at a core level we may find that treatment either doesn't hold and the patient appears to get better then falls back, or the change may be erratic. This can be confusing. Sometimes the patient feels better from the treatment – then a similar treatment seems to precede a relapse. If this keeps happening we should reassess the diagnosis.

Treating at this core level can take patients to increased vitality and better health rather than just taking away a symptom. What do I prefer to do? For me there is no contest.

Summary of signs and symptoms that a patient is being treated at a core level

Changes to these areas	Signs of treating at the core	Signs that treatment isn't reaching the core
1 Patients feel better in themselves	The patient reports greater wellbeing and feeling 'better in her/ himself'	The patient does not feel better in her/himself and only feels a change in the physical symptoms
2 A large number of symptoms change together	A large number of symptoms disappear at the same time	The patient's symptoms change but each symptom is dealt with individually
3 Awareness moves from symptom to self	The patient switches in consciousness from symptoms to her/himself	The patient only notices changes to symptoms
4 Certain changes are outwardly noticeable	Outward signs changes. For example, the patient is more robust, has greater vitality, eyes look shinier and facial colour, voice tone, emotion and odour improves	There is no change in the patient's outward signs. Overall robustness, eyes, colour, sound, emotion or odour do not change
5 Patients' pulses harmonise	There is an overall harmonisation in the pulses. The pulses of the main Organ change less than the other pulses or not at all	There is no harmony in the pulses as a whole and they may have many different qualities. Only the pulse of the Element treated changes
6 Treatment reactions lead to positive change	There may be an exacerbation of signs and symptoms after the treatment. This settles and then the patient feels better than before	There may be an aggravation (rather than exacerbation) after treatment. After this settles the patient does <i>not</i> feel better
7 Patients participate more readily in lifestyle changes	The patient is more able to make lifestyle changes	The patient finds it difficult to make lifestyle changes
8 Life has a forward momentum	The patient's life starts to move forward	Treatment doesn't hold. The patient may feel better for a while then regresses or sometimes feels better but sometimes doesn't

* For more on this see Hicks, J, 'Feedback from the pulses', *Jing Shen* 1, page 10 available at cicm.org.uk

Angie Hicks is co-founder and joint principal of the College of Integrated Chinese Medicine. An acupuncturist since 1976, she is also a Chinese herbalist and author/co-author of books including *Five Element Constitutional Acupuncture*, *77 Ways to Improve your Wellbeing* and *The Acupuncture Handbook*. As well as acupuncture, she is especially interested in body-based therapies, *qi gong*, meditation and focusing.



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www.tcm-kongress.de

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(YANGSHENG – NOURISHING LIFE, PREVENTION) | MOXIBUSTION

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Gustav Dobos (D)	Henry McCann (USA)
Virginia Doran (USA)	Michael McCarthy (IR)
Felice Dunas (USA)	Michael McIntyre (GB)
Kevin Ergil (USA)	Jason Robertson (USA)
Marnae Ergil (USA)	Jan Schroen (NL)
Pierre Guiliani (F)	Denmei Shudo (JP)
Huang Huang (CN)	Gabriel Stux (D)
Sybill Huessen (NL)	Richard Tan (USA)
Li Jie (NL)	Alex Tiberi (USA)
Wu Jie (CN)	Robin Tiberi (USA)
Barbara Kirschbaum (D)	Peter Wayne (USA)
Livia Kohn (USA)	Sabine Wilms (USA)
Kajsa Landgren (NO)	Zhang Boli (CN)

Theme Days

- Fertility Symposium 2010
- TCM-Science Day
- Pediatric Day

Forums

- 2nd TCM-Social Forum
- The Journal of Chinese Medicine presents: Debra Betts
- Forum of European Journal of Oriental Medicine

European Meetings

- 4th Symposium of TCM-Schoolleaders of ETCMA
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TCM Congress

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Chinese medicine at its best

The TCM Kongress, held each year in Rothenburg, southern Germany, has grown especially over the last two decades from a small symposium to a six day international event which last year attracted 1240 participants from 30 countries. First held in 1968, when a small group of acupuncturists came together in pursuit of deepening their knowledge of acupuncture, the aims and values of the founders still underpin the congress forty two years later. Appealing to everyone from the most highly experienced to beginners, from the outset TCM Kongress Rothenburg has attracted leading practitioners, writers, speakers and pioneers from across the spectrum of Chinese medicine and from each of the different schools. The organisers (AGTCM – Arbeitsgemeinschaft für Klassische Akupunktur und TCM e.V., founded 1954) place particular emphasis on open-mindedness, freedom from dogma, a friendly attitude and willingness to share experiences and views, fostering direct contact between participants and speakers. The setting too, in an ancient park with old trees by the banks of the River Tauber, in the 1920 built art deco building “Wildbad”, has enabled participants to both concentrate on serious listening, discussion and reflection, but also to relax, enjoy the social side, the networking that is a fundamental part of the Rothenburg experience.

At Rothenburg a vital element is networking, which is expressed in Chinese as wang luò. We all know what jing luò means, the meridian system. We acupuncturists know and experience daily what networking in the therapeutic sense means and how effective it is. Networking means that together we are strong. The more networkers there are, the stronger we are. Ted Kaptchuk talked about ‘the web that has no weaver’ – networking builds a web with many weavers.

Rothenburg 2010 – key elements

The general themes for this year’s congress are:

- Trauma – Psychological and Physical
- Allergies
- Life Counselling (Yangsheng – Nourishing Life, Prevention) and
- Moxibustion

Nearly each congress day one can find a contribution by a renowned speaker. More than half of the courses are in English, partly being translated into German.

At Rothenburg we are always trying to find new

formats for exchanging information, in addition to the traditional format we all know, with one lecturer and everyone else listening. For some years now we have organised days (6.5 hours) devoted to important themes of Chinese medicine. So for instance we have a two day Fertility Symposium, moderated by Anat Mendler Shefer from Israel, for experienced practitioners with speakers from all over Europe, and one day for beginners – there is a scientific part as well as enough time for the Chinese medicine side.

This year we will host the fourth European TCM School Leaders’ Symposium, enabling participants to discuss their specific problems and ideas, organised by the European TCM Association (ETCMA).

A new format developed in Rothenburg and which has been pretty well received in recent years are the meetings designed to attract highly experienced specialists who have been working a long time in their field and/or have published on these specialist themes, to discuss specific questions we have in the West which are not answered in the classical texts or by Chinese teachers. This year there will be meetings for specialists in: Dietetics; Tuina; Qigong; TCM paediatrics; Five Element acupuncture; Midwifery lecturing; TCM journalism; Organisation of study trips to China.

This year we have invited some special speakers: It is a great honour to announce that grandmaster Dr. Shudo Denmai, who may be visiting Europe for the last time, will be teaching on the following themes, as well as on Japanese acupuncture:

- Basics of Meridian Therapy and Superficial Needling
- Treatments for headaches, dizziness, and cervical syndrome (3.5 hours)
- Treatment of the mind (psychosomatic disorders) (6.5 hours)

And grandmaster Richard Tan (USA): Dr. Tan’s Balance Method to treat Trauma and Allergy and Enhance the Jing, Qi, Shen.

*Gerd Ohmstedt
Chairman of the Congress*

*PS: TCM Kongress Rothenburg special rate:
BACc members receive the reduced ETCMA fee.*



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SPEAKERS

Richard Bertschinger: Unfurling the banner: how the names of points guide us towards the qi

Isobel Cosgrove & Sally Blades: Supervision - taking charge of our professional lives

Charlie Buck: The Dao of medicine: How do Masters get to be Masters?

Stefan Chmelik: Increasing your effectiveness and enriching your practice by completing the circle: adding the yin of herbs to the yang of acupuncture

Gordon Faulkner: Daoyin yusang gong: qigong for stress reduction

Mike Freeman & Isobel Cosgrove: Treating and talking: caring for and working with dying patients

Angela Hicks: Qi is magic! Practical ways to balance body and mind in the treatment room. Possession, obsession and suppression: a new look at the seven dragon treatment

Gaby Hock: The doctor is the medicine: the heart and the five spirits in the life of the healing practitioner.

What has wu wei got to do with it? TCM practice in the 21st century

Nancy Holroyde Downing: Diagnosis in Chinese medicine: has it always been the same?

Dr Val Hopwood: Acupuncture and neurological conditions

Elisabeth Hsu: Generating synchronicity: an exploration into the efficacy of Chinese medicine

Barbara Kirschbaum: Tongue diagnosis and blood stasis

Daverick Leggett: Qigong Nutrition: ten top tips for healthy eating

Dr Christopher Low: Healing intention and external qi: the chaos connection

Yair Maimon: Treating the shen and psychological disorders

Colonel (Dr) Heather Pickett: Can your needle hit the ache? An evidence based review on migraines and acupuncture in the new millennium

Colonel (Dr) Heather Pickett & Dr Terri Ruitcel: Battlefield auricular acupuncture

Michael Pringle: Fire cupping: transforming your practice with safe and effective cupping

Tony Reid: Depression: a multi-faceted problem
Mood disorders and TCM: depression and anxiety

Dr Terri Ruitcel: Acupuncture in the United States Air Force: the physician's experience

Tuvia Scott: Abdominal acupuncture: to balance fire and water and strengthen yuan qi

Radha Thambirajah: Musculo-skeletal pain: differential diagnosis and treatment according to the four bi syndromes

Frances Turner with Joanna Attwell: The language of the pulse

Beverley de Valois: To needle or not to needle: using acupuncture in the management of lymphoedema

Dr Trevor Wing: Diagnosing and treating postpartum diseases using acupuncture and herbs



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‘It’s the not knowing that eats you up’

For many people it has been a tough twelve months. Some have lost their jobs, some even their homes. Relationships have been put under great strain and some have gone past the point of no return. And a lot of people have lost a lot of sleep.

However, it’s also true to say that the majority of people still have a job, still have a home and still have a relationship. So you could say what’s all the fuss about? The problem is that people have experienced increased levels of uncertainty and this continues. One of the things we know about human beings is that we find it even more stressful not knowing how things may turn out than knowing that they will turn out badly. The same is true of illness. As one client said to me, ‘one of the hardest things about living with IBS is not knowing what triggers the flare-up’.

Recent research underlines how debilitating and anxiety-provoking uncertainty can be. In an experiment at Maastricht University subjects were given 20 electric shocks. Some knew that they would receive 20 intense shocks; others knew there would be 17 mild shocks and only three intense shocks. Guess who handled this situation better? Those who knew they were going to get 20 intense shocks prepared themselves and adjusted for what was to come. The other group found it much harder. Using standard fear indicators, such as sweating and heart rate, it was this second group that registered much higher fear levels.

So though they experienced less physical discomfort they actually worried more.

Nor is this an isolated study. To take just one other example, researchers at the University of British Columbia looked at people at risk for developing Huntington’s Disease. A year after testing, those who were informed that they had a high likelihood were happier than those who were not informed of their risk level and who were left hanging.

So how does this apply in a practical way in our own lives and those of the people we work with? First of all, it’s going to be worth looking at uncertainty as a potential stress factor when evaluating any person’s present state – especially at the present time. Ask yourself and your clients about the cause of any uncertainty. Find out if it’s stressful for them. Not knowing when you’re going to die, for instance, doesn’t seem to be much of a problem for most people. So not all uncertainty is equally stressful.

Most people have particular areas where they are able to tolerate uncertainty and others where they have a much lower threshold. So while one person really needs to know for sure where they stand *vis a vis* their relationship but isn’t that bothered about financial certainty, for another person it could be exactly the opposite.

Some useful questions will be:

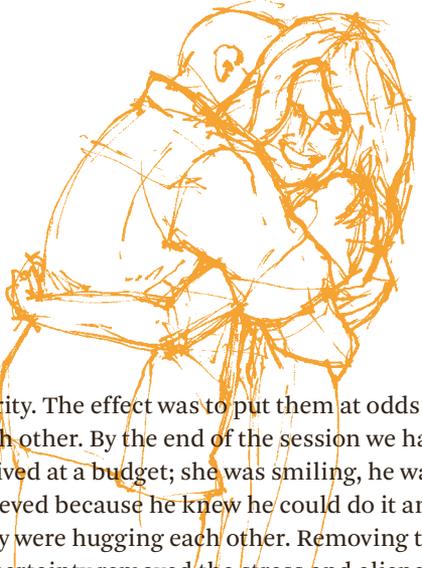
- How long has this uncertainty been going on?
- How long can you tolerate this uncertainty?
- Is there any end in sight?

- What do you need to feel stable and grounded?
- Where in your life do you feel stable and grounded?

Also, ask yourself if they – or indeed you – are carrying a high level of uncertainty? Is this in just one area of their life, say regarding continued employment? Or is there uncertainty in multiple areas of their life? How would you feel if, like one of my clients, you didn't know if you'd keep your job, be able to pay the mortgage, whether your partner was having an affair or if the stress you're feeling may already be compromising your health?

Anything you can do to reduce the stress of this kind of uncertainty is almost certainly going to yield disproportionately beneficial results to a person's overall sense of wellbeing. Breaking his concerns down into manageable bite-sized chunks made this client feel quite different. While he couldn't know whether he was going to keep his job, talking to his partner was something he *could* do. This and some budgeting proved a powerful antidote to anxiety. It was enough to stop his disturbed sleep pattern in its tracks. While nothing had changed externally everything felt different inside of him. He was surprised at how different it made him feel. As he said 'I feel strangely in control again.'

Last week I was coaching a couple who were having a tough time of it. We met for one hour. At the beginning they were both tense and she often close to tears. This summer she wanted to be able to celebrate their daughter's engagement with a proper party. Then there was their son's twenty-first too. She was afraid that her husband would hit the roof about the cost. His car hire business was suffering in the recession, he had no idea what they were budgeting for and so felt anxious about being able to fund it. They were experiencing a high level of stress born of uncertainty and a lack of



clarity. The effect was to put them at odds with each other. By the end of the session we had arrived at a budget; she was smiling, he was relieved because he knew he could do it and they were hugging each other. Removing the uncertainty removed the stress and alienation. Now they shared a common goal and had come together again. Uncertainty had created fear and anxiety and these can mask – even erode – love. Now they can once more feel the tenderness and love they have for each other.

And you?

Ian McDermott is an acknowledged authority on the application of NLP to health. Over the past 25 years he has created special NLP trainings around the world at the request of various professional bodies for health professionals. A prolific writer, he has co-authored some of the most widely read and respected books in the field, including *NLP and Health*, *The Art of Systems Thinking*, *Way of NLP*, *The NLP Coach*, *Your Inner Coach* and *The Coaching Bible*. He is the founder of International Teaching Seminars (ITS) which celebrated its twentieth anniversary in 2008. What has made ITS the most consistently successful NLP organisation in the world is its emphasis on the practical applications of NLP and the importance of personal congruence in implementing NLP. Ian spends much of his time training the next generation – of coaches and NLP practitioners. If you'd like to learn more about ITS Health Coaching or NLP training with Ian contact ITS direct via their website itsnlp.com.

Gods Playing in the Clouds

John Hicks shares his wisdom on treating the inside



The classic text, the *Nei Jing*, can be translated as *The Internal Classic*. *Wai* or ‘outer’ is contrasted with *nei* or ‘inner’.¹ The character for *wai*

suggests, via a plant growing up towards Heaven, extending outwards or coming out. The character for *nei* suggests, via the roots of a plant going down into the soil, re-entering or going back inside.² The authors of *Survey of Traditional Chinese Medicine* say that the *Nei Jing* places a lower value on the outer, *wai*, and a higher value on the inner, *nei*. For example, objects reserved for use ‘far from the capital’ were *wai* objects and those reserved ‘for imperial use’ were called *nei*. They comment that modern usage, which places *nei* and *wai* on the same level, cannot be applied to the classic texts. They conclude that:

‘If acupuncture practised today is to remain faithful to its tradition, it must retain the asymmetry, the inequality between the terms in the internal/external coupling. It must respect a hierarchy which holds the internal as the ruler of the external and also acknowledges the connection between the internal and the heavenly principle.’

The authors quote from the *Zhuangzi* to show both the asymmetry and the hierarchy.

內 外
nei wai

**‘Heaven exists inside (*nei*)
Man exists outside (*wai*)’**
Zhuangzi, chapter 17

The authors also refer to this distinction in the context of the *Su Wen*:

‘In treating illness, according to the *Su Wen*, one must specify whether the illness develops from within the body moving outward, or from the exterior moving inward, in order to know to rebalance either the inside or the outside.’

This article discusses *nei* and *wai* in the context of acupuncture practised in the West. It also takes further the ideas in a previous article (*Jing Shen 3*) and touches on **qi gong**, the **internal causes of disease**, **Five Element constitutional acupuncture** and treating the **‘Spirit’**.

Gods Playing in the Clouds

The Daoists have a notion of ‘Gods Playing in the Clouds’. Who are the gods? Anyone wanting to be free. What are the clouds? Any blockage that clouds our consciousness, stopping us from being totally conscious and free.

Have we all got clouds? To experience a cloud, sit or stand in a relaxed way and scan through your body from top to bottom. Go slowly, noticing where there is some contraction or tension or strength or where something doesn't feel quite right and you don't know what it is.³ You may find several of these places – maybe around your eyes, in the jaw, at the occiput, shoulders, upper chest, abdomen, hips, or even ankles. The more you softly scan, the more clouds you will find.

How do we acquire clouds? Some clouds develop from physical trauma, but many are stored emotions, developed from the inside. They are memories stuck in the body and left as unopened parcels. These are often in the abdominal and chest areas. Acupuncture can clear blocks of physical origin, but it can also clear blocks of emotional origin. Needles move *qi* and the movement of *qi* can clear clouds.⁴

We habituate to our 'clouds', but they obscure the Heavens. They clog up our inner space, inhibit full breathing and impoverish our inner lives. Dispersing these kinds of clouds is a worthwhile task.

How do the clouds arise from emotions?

Emotions involve both bodily sensations and thoughts. The thoughts are often interpretations ('I was abandoned') and often lead to generalisations about the world that we describe as someone's beliefs ('closeness is risky').

The thoughts come and go, but the bodily sensations lurk below the surface in the form

of clouds. Treatment that moves clouds of emotional origin softens the consequences of the internal causes of disease and allows a person more internal space and comfort.⁵

How do emotions cause disease?

Emotions are the internal causes of disease, yet we pay more attention to the external and miscellaneous causes. The reason, I suspect, is that when we undergo an unpleasant emotion *we pay limited attention to the accompanying bodily sensations*. Take for example anger. During the experience of anger, people tend to pay attention to who or what has made them angry and to their notion of the injustice suffered. Test that out. When were you last really angry? Was it not true that your conscious focus was more on what the anger was about than what the bodily sensations felt like? But it's the bodily sensations accompanying the emotion that cause the illness. The damaging bodily sensations are somehow hidden. Once an emotion has become habitual, people are mainly unaware of the clouds and focus more on the thoughts associated with them.

I have explored with students in class what bodily sensations go with different emotions. The method used was as follows.

We chose one or more repetitive damaging emotions associated with each Element. 'Damaging' means in part that the emotion gets stuck and repeats. For example, anger is not necessarily damaging, but continued inappropriate and repetitive anger is. Anger purely in response to a situation of abuse may

Bodily sensations associated with the Five Elements

Fire Misery, sadness, withdrawal	Ache in the chest, body feels as if it is crumpling, sensation of draining downward, drop from my throat to my stomach, inward compression in chest, sensation of blackness around the heart, face squeezing in and down, heart is being crushed, as if my chest is having knives stuck in from all around, feels black and dark in the chest, lips tensing, as I am contracting inside
Earth Worry, feeling unsupported, overthinking	Collapse in my midriff, face muscles dropping, turning palms up, eyes squinting and pressing outwards, collapsing in chest, thoughts whirling around, almost lose balance, squeezing into the abdomen, mouth/neck dropping, hardly breathing in, head slowly moving back and forth, eyes strained, bending in the middle, occiput squeezed, shoulders pushing up, head rolling, forehead furrowed
Metal Grief, loss, sadness	Slumping sensation through abdomen, cheeks/face dropping down, breathing stops/restricted, tightness in chest, chest pushed backwards, head dropping down, hurt in chest area, tightening across back and into arms, feeling of restriction between shoulder blades, crumbling/contracting in the chest, tendency to look down
Water Fear, apprehension, fright	Holding tight in whole body, whole body feels as if pulled back, eyes stressed and open, breathing caught in chest, tight in chest, breath held, forehead up, throat tight, squeezing my arms, eyes strained, feeling like being strangled, tight down my arms, whole body alert/tense, eyes tighter, chest held in, felt like a stick of wood
Wood Frustration, holding back, repressing assertion	Body trembling, diaphragm pushing down on stomach, tunnel vision, eyes tight, stomach knotted up, face forward like a vee, tightening of the jaw, breath laboured and forced, breath irregular, rising up feeling that drops after, hardening of the eyes, heat rising up in body, arms/shoulders tight

be appropriate. Anger, which is repetitive and not appropriate to a situation, can be damaging.

In the method used, students were asked to remember a strong emotion associated with an Element, using the words indicated in the second line of the boxes below. They chose an event/emotion and remembered it by seeing what they saw at the time, hearing what they heard and then feeling whatever they felt. They entered the emotion for no more than 20 seconds at a time. They did this four or five times with an *increasing intent each time to*

notice the accompanying sensations.

As stated above, this is not what people usually do. These are sensations that no one likes to experience. Avoiding them, however, and concentrating on the thoughts, seems to ensure their continued existence. When these emotions repeat for long enough, the tissue can be damaged.⁶

The recorded descriptions of bodily sensations above are not definitive, but just what several groups of students recorded. They have been edited for brevity.

Repetition of these sensations leads to stagnation or deficiency in various parts of the body.

As a contrast, consider some bodily sensations associated with feelings of respect/appreciation/gratitude. These do not have the same potential negative consequences – probably the opposite.

Bodily sensations associated with respect/appreciation

Awakened, sensation of up and out, breathing became free, as if whole body uplifted, feel lighter in my body, inspired, want to move out, want to reach out and touch the world, expansive, serious, poignant, teary, reflective, a tingling/lifting sensation

Changes from acupuncture

Changes from acupuncture range from single symptom changes to changes involving several symptoms to changes involving the whole person. These changes can occur together or separately. Whole person changes tend to come from clearing clouds of emotional origin. The patient refers to an overall and consistent feeling of wellbeing or to increased capacities to work and the ability to think and function more productively. These changes relate to the internal causes of disease and involve emotions clearing.

Patients frequently find these changes hard to articulate. What they say can sound trivial. I remember one patient saying ‘I don’t know

what it is but I am getting all those things done that I was putting off’. Another said: ‘I used to hate taking the dog for a walk, but now I really enjoy it’. Another: ‘I’m just getting on better with people and that’s great’.

An Earth constitutional type who came to the student clinic demonstrates these changes. She spent her childhood and marriage being physically abused and controlled. She came to the clinic complaining only of back pain. Electroacupuncture was used and the obvious Liver *qi* Stagnation was cleared, but the improvement held only for a short time and she kept returning. When she was treated on her constitutional Element, she began to have groups of symptoms, including the back, changing. She also began to share her feelings. She disclosed a family situation of abuse to both her and her children by her husband and similar previous abuse by her father.

She then connected her back pain with the feelings of anger and fear associated with the abuse. After months of treatment, she stood up to her husband, who apologised for the first time ever. Progress is still being made. Deeply stagnant areas of her body – clouds – are beginning to clear. The patient did not even imagine that these changes could result from acupuncture.

For many patients, whatever else is done for them, the capacity to grow, develop and live more productively can be increased. One person described this as being more ‘who I really am, not what the world wants me to be’. Clearly an *inner* change.

Five Element acupuncture fosters this



‘When the Spirit is master then the body follows and a person prospers. When the body is master, the Spirit follows and man is degraded.’

Huainanzi, chapter 1: quoted on Larre et al, 1986

‘In order to make all acupuncture thorough and effective, one must first cure the Spirit.’

Su Wen, chapter 25 Veith, 1972

Would we say that the patient described above was treated on her Spirit? I think so. Translating these quotes very loosely, we might say:

- 1 In treatment, maintain the Spirits before maintaining the body.
- 2 Treat so that the Spirit is in charge; otherwise the body is in charge and the patient will be less than she/he could be.
- 3 Work on the Spirit first in order that the treatment of the body is effective and holds. If the Spirit is ill, then treatment of the body will not hold.⁷

Can contemporary practitioners treat the Spirit ‘first’?

Some patients do present with problems of the Spirit. In these cases the treatment will be directed naturally to the issues of the Spirit. However many patients, encouraged by our culture, complain of something more physical – even though they may have clouds of emotional origin. So addressing their Spirits, when appropriate, makes sense. The *Nei Jing* recommends it. So why not do it – especially when staying better as well as getting better is

kind of change – especially as one of its main directions is to create more balance on an Elemental level. Why should such changes be associated with Five Element treatment?

Five Element treatments affect the longest existing imbalance and therefore an imbalance through which all phases of growth and emotional development take place.

Is this treating the Spirit?

Let us return to the *nei/wai* distinction. In the *Nei Jing* it is recommended that we treat the Spirit first. Consider some quotes from other Classics:

‘When the Spirits are overwhelmed, they leave; when left in peace, they remain. Thus, the most important thing in the treatment and conduct of a being is maintenance of the Spirits and then comes maintenance of the body.’

Zhang Jiebin: quoted in Larre and Rochat de la Vallée, 1995



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Notes

- ¹ As in the two points 'Inner Frontier Gate' and 'Outer Frontier Gate'.
- ² See, Larre, Rochat de la Vallée and Schatz 1986, pp 67–71
- ³ See Frantzis, 2009, pp169–174. This book is about meditation and the process described is that of clearing clouds. What is called 'inner dissolving' is the dispersing of clouds of emotional origin. Acupuncture has a similar role in clearing some clouds. Bruce Frantzis teaches a *qi gong* form called 'Gods Playing in the Clouds'.
- ⁴ As I am borrowing a metaphor from a book on meditation, I should make it clear that acupuncture will not have exactly the same effect as meditation. But patients well treated do clear many of their emotionally stuck clouds. Also, in this context, I am not equating a cloud with a full condition – clouds can be empty or full. But moving *qi* with a needle can help clear a cloud – needle stimulation is like wind and wind can clear and disperse clouds.
- ⁵ Other things help. For example, on the part of practitioners, the attitudes of unconditional positive regard, human kindness and compassion all make a difference.

important (see 3 in the previous section).

Patients do not always know what to ask for. When they do know what to ask for, it is often patients who are referred by other patients who have experienced such changes. The request often goes: 'My friend said that she felt more confident (or whatever) after having treatment and I wondered if acupuncture could...?'

There is a high value in our culture placed on being well enough to work or to cope with life. If that is the patient's priority, then it's easy for practitioners to focus more on what the patients ask for. I don't believe this is wrong and, indeed, that is what I saw in China. But it does neglect the *inner* and encourages acupuncture to do less than it can.

Trust the *Nei Jing*. Nourish the Spirit first or at least alongside the body.

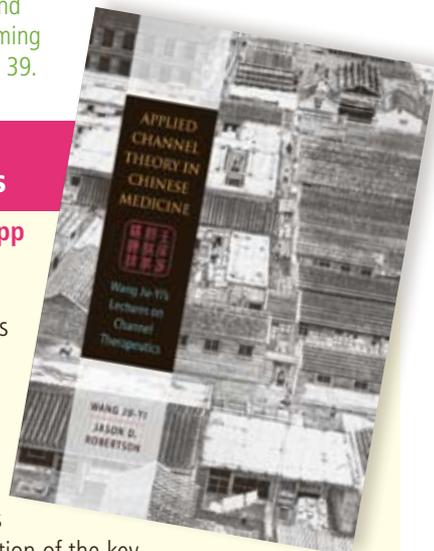
Summary

- 1 Repetitive stagnating emotions create clouds and become a cause of disease through a lack of free flow of *qi* or increasing deficiency.
- 2 A way to clear these clouds is through treatment of the constitutionally imbalanced Element, that is, the earliest imbalance that has been the context of the patient's journey through all stages of development.
- 3 Acupuncture can treat the Spirit first or at least alongside treatment of the body.

- ⁶ There is a gradual transition from 'cloud' to physical damage. For example, when participants in a study were asked to remember and recount an incident when they were angry, the pumping efficiency of their hearts dropped by 5%. A 7% drop is thought to be potentially dangerous! Why then should people do this repetitively without assuming that physical damage will result? Yet people do. See Hicks and Hicks, 1999, p 28 for this and other examples, e.g. p 29 and read Ledoux, 1999.
- ⁷ It may be hard to interpret 'before' in **1** and 'first' in **3** I would understand that you could be clearing a pathogen first, which might be considered treating the body, and in the same treatment nourishing the Spirit. They do suggest, however, that you consider the Spirit from the beginning.

John Hicks is co-founder and joint principal of the College of Integrated Chinese Medicine where he teaches and supervises students. He has been an acupuncturist since 1975 and is also a Chinese herbalist. John has written or co-written three books: *Five Element Constitutional Acupuncture*, *Healing your Emotions* and *The Principles of Chinese Herbal Medicine*. He has a special interest in NLP (neuro-linguistic programming) used therapeutically, and also practises *qi gong*.

See Angie and John's upcoming CPD event p 39.



Applied Channel Theory in Chinese Medicine: Wang Ju-Yi's Lectures on Channel Therapeutics

Wang Ju-Yi & Jason D Robertson, Eastland Press, hbk, 718pp

Channel theory is described by Dr Wang as one of the 'pillars' of Chinese medicine (along with *yin/yang*, the Five Phases and organ theory), and the essential aim of this book is to encourage students and practitioners to delve more deeply into this neglected subject. The book is innovatively structured, in an attempt to capture the essence of the master/apprentice tradition of Chinese medicine. Co-author Jason Robertson spent fourteen months in Beijing with Dr Wang before writing this book, and dialogues between the two are recreated to elaborate on the material covered. This works extremely well, and provides the reader with a welcome consolidation of the key concepts. Anecdotal narratives are also dotted throughout the book, which provide some fascinating insights into the life and mindset of a master practitioner. Plenty of case studies are used to further illuminate Dr Wang's methods, and to demonstrate how sometimes esoteric theories can be applied to clinical reality. This is a theme which is emphasised regularly – however intriguing or beautiful Classical theory may be, it is only useful if it leads the clinician towards tangible results. I have no doubt this beautifully realised book will inspire many practitioners to deepen their knowledge of channel theory. What a bonus that because of its intimate style, it is also easy and enjoyable to read. **Tom Kennedy practises in and around Bristol** Jason will be speaking at the TCM Kongress in Rothenburg, May 2010
To buy this book for £47.60/€54.74+p&p (normally £59.50) call 00 44 (0)1608 658862 quoting code JS5

fifteen treasures

Lillian Bridges



What is your idea of happiness?

A full pantry and all the creative possibilities that implies.

What is your greatest fear?

Being unable to help those that I love when they are in trouble.

Which historical figure do you most identify with?

The author Pearl Buck. She was Pennsylvania Dutch (German) and lived in China. I am half Pennsylvania Dutch and half Chinese. She helped me understand the dichotomy of my inherited cultures through her books.

What is the trait you deplore in yourself?

I am too self critical and I am working on being kinder to myself.

What is the trait you deplore in others?

Deliberate cruelty and intolerance are traits that upset me a great deal.

What makes you depressed?

I am not wired to get depressed, just blue and melancholy. Luckily it doesn't last too long as I am an eternal optimist!

What is your favourite smell?

I love the smell of soup bubbling on the stove, bread baking in the oven and the scent of flowers wafting on the breeze.

What is your favourite book?

I love cookbooks because they inspire my everyday creativity.

For what cause would you die?

None, because I have such a strong desire to live and so much left to do.

Which words do you most overuse?

'I know' when I really mean that I get what someone is saying.

What is your greatest regret?

I don't think regret is a very necessary emotion as what happened in the past has brought me here – even if it was painful – and I like it here!

What single thing would improve the quality of your life?

Not being on airplanes quite so often. I don't enjoy that part of travelling very much at all.

What keeps you awake at night?

Worrying – of course, it's not very productive and, thankfully, I don't do it very often.

How would you like to die?

Laughing like my great-grandmother did after a great meal.

What is the most important lesson that life has taught you?

That to be who you truly are allows you to follow your Golden Path and give back to the world in your own unique way. There is no better way to live.

Lillian Bridges is an internationally renowned specialist in the teaching of facial diagnosis. Her skills are passed down from a long line of Chinese practitioners in her family. Founder of the Lotus Institute, she is the author of *Face Reading in Chinese Medicine*. Lillian is coming to Reading to teach facial diagnosis in June 2010 – see page 39.

Breakfast in bed?

In another in his series on Chinese food energetics **Danny Blyth** considers some nutritious options to start the day



Modern studies show that athletes who eat breakfast perform better, children who breakfast concentrate better and adults who breakfast are less likely to have weight problems. And you can't argue with studies (or turn breakfast into a verb). Ancient wisdom tells us that we should eat 'breakfast like a king, lunch like a prince, and dinner like a pauper'. So what is a breakfast fit for a king, at a time when our digestive system is at its strongest? How am I going to have time to make it, eat it, beautify myself, and get to work on time?

Since most people eat a 'personally tailored' breakfast at home, it seems to be the easiest meal for people to change. The Daoist in me says that there is no good or bad food – just balance, and that any breakfast is better than no breakfast. The McDonald in me disagrees.

Try my 'shop cereal breakfast challenge'. Get a bowl full, grind it up with a pestle and mortar, and see how much you are actually eating. Now check the sugar content and see how much of that is just the sweet stuff (often given nice sounding names like glucose syrup and fructose). The fibre, vitamins and minerals are often processed out, added back (in manufactured form) at the end, and used to

advertise how healthy it is on the box!

If you need to be quick in the morning, why not make your own cereal? For **muesli** I use equal parts wheat or barley flakes, porridge oats and dried fruit (such as raisins, apricots and berries) along with a mixture of nuts and seeds. If you want the kids to eat it, put it in brightly coloured individual-sized boxes and add a small plastic toy (warning – choke hazard – may contain traces of nuts).

The sweet-warm nature of **oats** makes them easy to digest, and a fantastic *qi* tonic. They give a good, slow release of energy throughout the day, and are reported to reduce cholesterol. They have a calming effect on the *shen* (although not, apparently, on horses), and research suggests that they may help prevent some hormone-related cancers. What could be better in the winter than a warming bowl of **porridge**? You can have it salty, like daddy bear, with raisins or apricots, like mummy bear, or with just a little honey, like baby bear.

Granola is simply toasted oats mixed with nuts, seeds and dried fruit in the same way. I mix 900 grams of oats with 1 cup of sunflower oil, half a cup of runny honey and 2 teaspoons of vanilla essence, then toast them on shallow trays in the oven until browned (this takes about 20 to 30 minutes). It makes the oats sweeter, and even easier to digest.

What's wrong with... some grilled tomatoes (with black pepper and basil) on a piece of your healthiest wholemeal toast?



And of course there is the question of what to put on it. **Milk** is OK if you need to build *yin*, and have a strong digestion. **Natural yoghurt** is easier to digest, and really tasty on cereal. **Rice or oat milk** is becoming more available, and is a good substitute for milk in people with a tendency towards Damp and Phlegm. **Goat's and sheep's milk** is also easier to digest and less Phlegm-forming. **Fresh fruit** makes a welcome addition. **Tropical fruits** are colder, more detoxifying, and harder on the digestive system. Home-grown fruit (like **apples** and **pears**) are more moderate in nature, and suited to most constitutions, especially if cooked. Cooked apple and pear makes a great sauce for breakfast pancakes. **Grapes, cherries** and **blackberries** are warmer, strengthen *qi*, and are the best choice for a weak digestive system.



And what's wrong with a nice **egg** (an excellent *yin/jing* tonic) or some **grilled tomatoes** (with **black pepper** and **basil**) on a piece of your healthiest **wholemeal toast**? The sweet/cool nature of tomatoes makes them great *yin* tonics, whilst their sour/cool nature clears heat from the Liver. The lycopenes, which make tomatoes red, are reputed to help prevent many cancers and heart disease (I feel healthier just saying the word lycopenes). Tomatoes make a good vegetarian alternative to steak for black eyes and bruising too!

Or **mushrooms** fried in just a little oil with garlic and a splash of last night's red wine (as if there would be any left). Mushrooms are good immune tonics, have a cleansing detoxifying nature, and they absorb Damp and Phlegm. (If you cook them in a lump of Phlegm, like butter, they will absorb that instead of course!)

‘Breakfast like a king, lunch like a prince and dinner like a pauper.’

If your digestive system just doesn't deal with breakfast, eat something small and simple as early as you can, and retrain your stomach by making breakfast gradually earlier and more substantial. The stomach loves regularity, and will soon get used to a new pattern. Eating late will ruin your breakfast appetite, and leave you feeling tired and sluggish in the morning, as your tired digestive system is still trying to digest last night's meal.

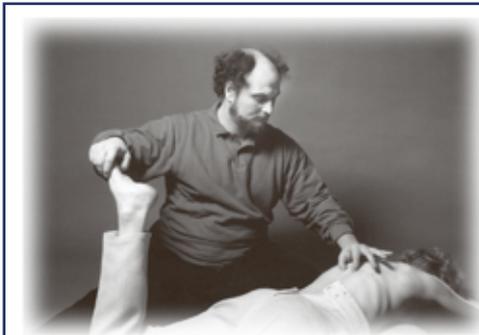
If you like extreme sports, why not try **buckwheat pancakes**, **rice congee**, or **vegetable dahl**? And most importantly – even if it is only

once a year – and to hell with the crumbs, make sure you have breakfast in bed.

Danny and Greg Lampert's concise and useful book **Chinese Dietary Wisdom** is available from cicm.org.uk price £3



Danny Blyth studied acupuncture and Chinese herbal medicine at this College and has a postgraduate diploma in Chinese language. He practises in Cheltenham and the Cotswolds as well as teaching *tai chi* and *qi gong*. He also teaches here at the College. See CPD events p 39.



EnergyArts Presents

Qi Gong Tui Na: Energy Bodywork

With Daoist Lineage Holder Bruce Frantzis

Bruce will demystify Qi healing methods and demonstrate how to apply your personal Qi to detect and resolve energetic imbalances using specific hands-on healing techniques. Potential topics include:

- Inducing and balancing energetic pulsing within the body's energetic points, centres, internal organs, joints, cavities and glands.
- Maintaining compassion while protecting yourself from absorbing your client's energy.
- Controlling the Qi flow through the client's channels while projecting or absorbing energy.

Prerequisites: All levels welcome, although some knowledge of Qi gong will be helpful.

Bruce Frantzis Ph.D. worked in Chinese hospitals where he treated over 10,000 patients. He has also taught the Daoist Arts to over 20,000 students in the past 30 years.

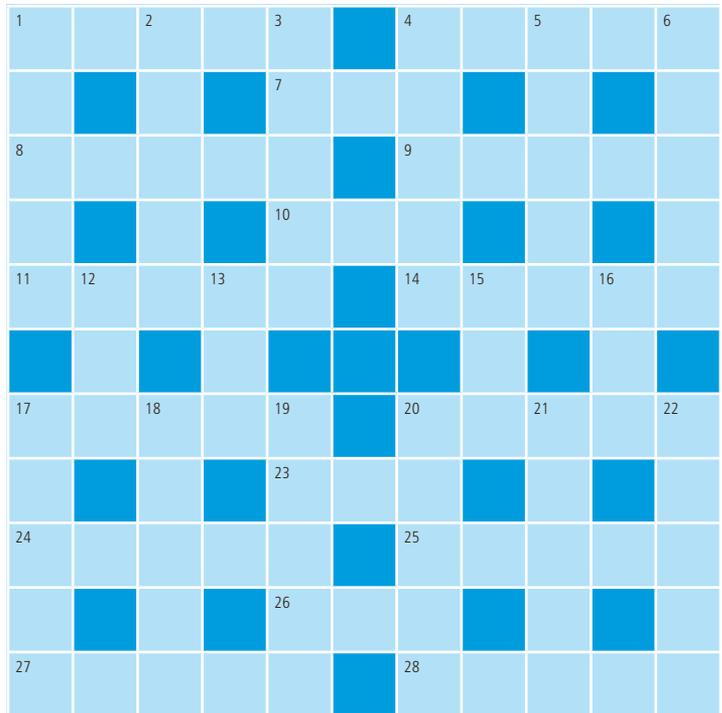
Brighton, England October 15-17, 2010
Course fee: £255 if paid by September 17
Register at www.EnergyArts.com

Local Contact: Patrick Foley/Jane Launchbury
Phone: 01725 514546 Web: TaichiArts.co.uk
Email: ukadmin@taichiarts.co.uk

crossword

Across

- 1 Our favourite one might be sweet, sour or salty...
- 4 The 'frontier gate' on an arm *yang* channel
- 7 We breathe it into our lungs
- 8 The 'frontier gate' on a *yin* arm channel
- 9 A very solid extra *fu*
- 10 Greater (*pin yin*)
- 11 They are generated by the Kidneys
- 14 Something to do with Wood?
- 17 Use it to get on the treatment couch
- 20 The emotion of Wood
- 23 Acupuncture can support this fertility treatment
- 24 Part of the small intestine
- 25 *Si Wu Tang* – tonic herbs translated soup of the four _____s
- 26 Physios use this to soothe injuries
- 27 In Chinese medicine it's connected to 'host'
- 28 Pass on to another practitioner
- ## Down
- 1 A turn of the needle
- 2 Organs such as the eyes, ears, nose and mouth
- 3 One of the Elements
- 4 Bony eye cavity
- 5 I'd rather be relaxed!
- 6 *Yang qi* goes in this direction
- 12 We do this to nourish ourselves
- 13 The unchanging, oneness (Wade Giles)



- 15 A very *yin* front channel
- 16 Sense organ of the Liver
- 17 Worn for upper limb injuries
- 18 Excessively fat
- 19 For women it's four units of alcohol a day!
- 20 A symptom of *yin* deficiency _____ noon fever
- 21 The emotion of the Lung
- 22 Sudden shivering before a fever
- Crossword solution** See page 39

Greetings and good luck for the year of the tiger from all of us at Jing Shen





Releasing the eyes

More from Gio on Daoist *qi* *gong* and energy practices

In spring we want to ensure that the body and its energies are able to awaken and open up like the world around us, and that nothing remains partially closed and stagnant. This liberates energy stored in winter for the rest of the year, and channels it away from irritability and frustration into action and life, balancing the Wood Element. It's important to allow the tissues to stretch – or rather 'lengthen' – open, to breathe more deeply and to loosen and open the joints. Here though, we'll take a look at the eyes.

Releasing the eyes

We are very visual creatures, and tension in the eyes works directly into the nervous system. Consequently, relieving tension from the eyes releases the nervous system very effectively. This technique is useful all year round as so many of us over-use our eyes at short focus. It's particularly useful in spring as it strongly and quickly releases the irritability and frustration associated with an unbalanced Liver and Wood Element. Its effects can also be integrated into any therapeutic practice you undertake, and into everyday life.

Step 1

Shut your eyes gently, and place the pads of your of the index and middle fingers on your eyeballs somewhere along the outer edge, near

the eye socket. (NB If you wear contact lenses, please use your discretion as to whether or how you want to do this exercise, I have many students who wear contact lenses who are fine with it, but this may or may not hold for you. Also if you have eye damage, this technique may well not be for you.)

Relax the eyelids and eyeballs at the contact point between them and the pads of your fingers by allowing the sensation in the eyeballs themselves to become softer and more fluid. Begin to make small, slowish circles with the pads of your fingers to massage your eyeballs. Take a minute or two to work around the periphery of the eyeballs, and as you do this, also relax the back of the eyeballs, the hinges of the jaw, your lips, where the tip of your tongue meets the roof of your mouth, your throat, the two big veins running down your neck, your diaphragm, belly, genitals and anus, the joints of your legs, feet, toes and soles of your feet. You can do this sequentially from top to bottom. Allow all of these to soften, release and sink downwards as you massage around your eyeballs.

Step 2

When Step 1 feels comfortable, you can slowly and gently press a little deeper into your eyeballs, without massaging. You may feel the eyeballs and surrounding area ache, and may see patterns or lights, which is quite normal. If this is too much for you though, go back to the previous depth, or press in a little less. Or if you need to, stop and revert to Step 1 until

you feel ready to move to Step 2. In any case, it is very important to take your time to find your comfort zone before pressing to deeper levels – give yourself a week or two to go deeper, not first time! If it doesn't feel right, maybe come back to this exercise on another occasion.

Do your best to release and let go of this ache wherever you feel it, letting the accumulated tension in the aching areas soften and release outwards. Let go especially in the eyeballs, in the muscles around the eyes, at the back of the eyeballs, inside your head (the Daoists experience is that it is quite possible to feel inside your head, including the blood vessels and brain), the top of your head, the centre of your ears, the hinges of your jaw, the occiput, and all the places mentioned before – all the way to the ground. Releasing gradually in all the places down to the ground is important. You may make small circles again with the pads of your fingers or not, or a mixture, whatever you feel works best for you.

So again you work around the eyeballs at this deeper level. You may have to work on some particularly hard or tense areas in your eyeballs before moving to the next, and some spots will take longer than others. You may have to keep your fingers still for a while, massage for a while – go with what feels right. Eventually you will notice that the eyeballs as a whole will have softened, and sunk backwards a little into your skull. Keep releasing through all the points mentioned, all the way down to the ground.

Step 3

You are now ready to move towards the centre of the eyeballs. As the eyes soften and you become more proficient at this technique, you will be able to feel more easily where your eyes are still a little hard and tense and need to release. Feel for and release these areas in the same way as above.



Before: your eyes are reaching out towards what you're seeing, projecting and 'grabbing' images

Step 4

Now you can conclude the technique by pressing gently on the centre of your eyeballs and releasing in the same way as above. Make sure you include releasing inside your head.

Once you've finished, relax, then open your eyes very slowly, making sure you don't open your eyes into bright lights. Depending on how strongly you did this technique, it may take anywhere from a few seconds to a couple of minutes for your vision to return totally to normal. Give yourself time to readjust into normality before driving or engaging in other such activities.

This technique can be practised for anything from a couple of minutes to half an hour. Most people feel a deep sense of relaxation afterwards.

Integration

In modern life we accumulate so much tension in our eyes and all the nerves connected to them that in general this is a very valuable technique. It can be done several times during the day if you like.

Notice that afterwards your eyes and nerves are very relaxed. If you practise *tai chi* or *qi gong*, ideally you want to let your eyes relax like



You can do this as frequently as you like, but until you become accustomed to it, best not to do it while you are driving.

Enjoy!

Gio Maschio has taught Daoist internal arts for over a decade, and practised them for almost 20 years. He designed and teaches the College's *qi gong* for acupuncturists course, has conducted seminars for the BACC, and is one of Master BK Frantzis' most experienced instructors in Europe. He also studies Buddhism and *dzogchen* meditation. He practises and teaches internal arts full time, including classes, workshops and retreats – visit oxinar.com for more information.

After: your eyes relax and soften in, and all that you see 'falls' into your eyes

this so your nerves can release continuously while you practise. Your eyeballs do the opposite of 'bugging out', they relax and soften in, and you let all you see 'fall' into your eyes as opposed to reaching out towards what you are seeing, and you can release in all the points mentioned – as shown in the photos, above.

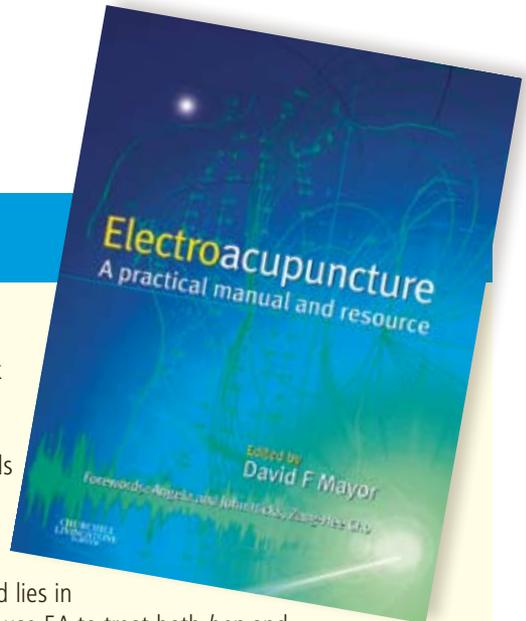
Electroacupuncture: A practical manual and resource

David F Mayor, Churchill Livingstone, hbk, 380pp + CD-ROM

There is, at last, a user friendly and well-researched book on electroacupuncture (EA) for acupuncturists. Described as a practical manual and resource, it lives up to both. A short introduction, setting EA in historical context, leads on to an indepth and balanced discussion of the limited evidence to support its use. For newcomers, directions are given for the 'tools of the trade' and the integration of its use into TCM. And, since David Mayor's background lies in Five Element and TCM acupuncture, he encourages us to use EA to treat both *ben* and *biao*. This point is argued from an evidence-based and neurophysiological perspective clearly represented using a broad spectrum of diseases which, in conjunction with the accompanying CD, offers a continuing source of reference. An infectious enthusiasm will encourage the reader to experiment and for this reason, and in my opinion, it is a book which deserves a place on your shelf and use in your clinic.

Annie Elliot is programme leader for conventional medical sciences on our acupuncture degree course here at the College

To buy this book for £43.99/€50.59+p&p (normally £54.99) call 00 44 (0)1608 658862 quoting code JS5



The art of feeling *qi* The art of projecting *qi*

Bill Ryan

John Hicks gives his feedback after attending Bill's classes last December

Acupuncture is an energy medicine, which suggests that practitioners should cultivate their *qi* as much as their knowledge. Bill's courses are intended to help practitioners to feel their *qi* and later to project it – for example when needling.

Bill Ryan is Bruce Frantzis' most senior student, and teaches *qi gong* and practises *qi gong tui na* bodywork. He works on his clients purely by feeling their *qi* and using his own *qi* to move energy and allow blocks to shift.



The art of feeling *qi* was run in December 2008 and again in December 2009. Bill began by outlining the

Daoist Water Tradition notion that we have eight different energy bodies, the most dense of which are the physical body, the *qi* body and the emotional body. The course focused on these. First we explored the physical body, touching skin, flesh and bones – describing them and the differences we felt – important for point location. Then we went to the *qi* or etheric body. We felt and described those feelings we get when bringing our hands close together or when getting closer to another person. We made an important distinction between feeling one hand's sensations, feeling what somehow is between two hands and then the effect of one hand projecting *qi* onto another. We went step by step, ensuring that



we could check exactly what we were feeling and under what circumstances. Throughout, Bill had us doing these 'experiments' with as controlled a procedure as we could. He stressed that there is no right or wrong – that what we felt was what we felt.

The art of feeling *qi* course (2 days) led on to **The art of projecting *qi*** (1 day). In the projecting *qi* course we were learning to direct our *qi* outside our body. For example, using my middle and index fingers, I would direct my *qi* at another's thenar eminence (Lu 10) and then get feedback as to whether I had hit the target. At first, my aim was poor, but in a short time I was getting more accurate. This illustrated the use of the mind in directing *qi* – an important aspect of needling.

Bill's art was in teaching this notion of feeling and projecting *qi* in small steps. The overall process and what it can lead to is both fascinating and promising. As a course follow-up, for several months he emails participants weekly suggestions for ten-minute-a-day practice which review course content and encourage further skill development.

Bill returns in March 2011 to teach these and the more advanced **The art of using *qi* to sense *qi* in others** – see opposite. Meantime, if you know Dragon and Tiger *qi gong* or another meridian-line *qi gong* set, keep practising. Otherwise, just play with the *qi* between your hands – it is as real as the chairs we sit on.

CPD events for practitioners



Peter Firebrace 26 Apr 2010
The five shen

Diana Griffin 20 May 2010
Auricular acupuncture

John Hicks 3 June 2010
**Energetic emotion testing:
seeing the unseen**

Lillian Bridges
23–24 Jun 2010 **Basic**
25 Jun 2010 **Advanced**
Facial diagnosis

Sandra Hill 8 Jul 2010
**Nourishing life
through the four seasons
and Five Elements**

Radha Thambirajah
20–21 Jul 2010
Cosmetic acupuncture

Steve Gascoigne 2 Sep 2010
**Supporting people
with cancer**

Barbara Kirschbaum
10 Sep 2010
**Advanced tongue
diagnosis**

Katherine Berry
16 Sep 2010
**Building a healthy
business: strategies
for success**

Julian Scott 23–24 Sep 2010
**Healing the eyes
with acupuncture**

Michael Pringle 14 Oct 2010
**You the therapist:
qi dynamics in the
therapeutic encounter**

**Danny Blyth
and Michael Ng**
21 Oct 2010
**Getting the point:
Liver and Gall bladder
locations and functions**

Charlie Buck
11 Nov 2010
**How do Chinese masters
become masters?**
12 Nov 2010
Needing skills

Sharon Yelland 9 Dec 2010
**Common midwifery
complications**

Elisa Rossi
22 Jan 2011
**Shen: emotional disorders
and our clinical practice**
23–24 Jan 2011
Paediatric tui na

**Angie and
John Hicks**
4 Feb 2011
**Getting better
at getting the CF**

Radha Thambirajah
9–10 Feb 2011
**Diseases in the over 40s:
advanced differentiations**

Bill Ryan
28 Feb and 1 Mar 2011
**The art of feeling qi:
point location and feeling
qi in the channels**
3 Mar 2011

The art of projecting qi
4 Mar 2011
**The art of using qi
to sense qi in others**



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Crossword solution Across 1 taste 4 outer 7 air 8 inner 9 bones 10 tai 11 teeth 14 trees 17 stool 20 anger 23 IVF 24 helium 25 thing 26 ice 27 guest 28 refer Down 1 twist 2 sense 3 earth 4 orbit 5 tense 6 rises 12 eat 13 tao 15 ren 16 eye 17 sling 18 obese 19 limit 20 after 21 grief 22 rigor

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