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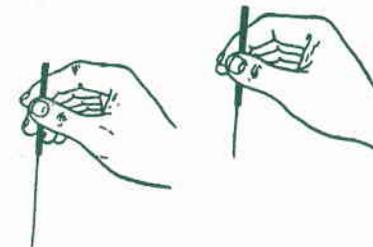
Reporter

JAN 1 2 1967

**CHINESE
TRADITIONAL MEDICINE**

AN OBSERVATION ON ACUPUNCTURE

A Practitioner's View
By Felix Mann



Holding the needle

CHINESE
TRADITIONAL MEDICINE:
A PRACTITIONER'S VIEW
By Felix Mann

AN OBSERVATION ON ACUPUNCTURE

INTRODUCTION

This article, "Chinese Traditional Medicine: A Practitioner's View", by Felix Mann, appeared in THE CHINA QUARTERLY of July-September 1965, and is reproduced with the permission of the editor, Roderick MacFarquhar.

In Western medical circles and among Americans suffering with arthritis there is increasing interest in ACUPUNCTURE, a therapeutical method, a part of China's medical legacy handed down through centuries.

As Dr Mann writes, "China had a system of medicine long before the advent of scientific medicine in the West ...very much down to earth, being largely the result of minute observations. Consequently the symptoms of many diseases are much better described in traditional Chinese textbooks than in their modern scientific counterparts.. It would seem that, with his reliance on laboratory procedures, the Western doctor may have been gradually losing this art of close observation..."

Of Felix Mann, Dr Han Su-yin writes

Dr Felix Mann, who has long been a student and practitioner in the subject, has now produced a book on acupuncture,¹ which is simply written, packed with information, and extremely timely. The first edition appeared in 1962

It is not only about the treatment of disease by a certain method, but also a mind-broadening text about the human being as an entity, and as such, thought-provoking for medical practitioners, who need more than anyone else to keep themselves informed, not only of the mechanics and technical aspects of the science of healing, but of the underlying principles of the phenomenon called health, which is inseparable from an understanding of man. The human being is more than a mechanical assemblage of organs, functioning more or less well; he is infinitely more complex than any computer can be. It is by giving us glimpses of how the philosophic view of the universe, by moulding the human mind, also determines how we are going to approach the theories of disease, of ill-health and good health, that Dr Mann's book is interest-rousing.

And Dr Han calls attention to a further revolutionary study of Acupuncture, by a Korean doctor:

Acupuncture points have now been seen, the meridians demonstrated, and the whole theory laid on a solid scientific basis materially evident, visible, palpable. This discovery, which is revolutionary, was made by Dr Kim Bonghan, of North Korea, and only very recently made public (1962 and again 1963).

In short, what has now been shown to exist is yet another system in the body, what is called the KYUNGRAK system in Korean or, in Chinese, the *Ching-lo* system, or acupuncture system. It is a system on its own, structurally as complete as the vascular, the nervous or the lymphatic systems. Its discovery is of equal importance to that of the others. The presence of this 'fourth' complete system in our living body will affect and revise our anatomical and histological knowledge, and our physiological concepts.

And Dr Han calls attention to a still further source of information:

Dr Needham, in his magnificent series on Science and Civilization in China,² will have much more to tell us about this.

¹ *Acupuncture—The ancient Chinese art of healing*, by Felix Mann MB, BChir (Cambridge), LMCC (McGill), published by William Heinemann Medical Books Ltd., London.

² *Science and Civilization in China*, by Joseph Needham, published by Cambridge University Press. Volume VI of this series is to deal with biology and biological technology.

⁴ *On the Kyungrak System—The Scientific, Material Bases of Acupuncture*, thesis by Professor Kim Bonghan, November 1963, Pyongyang, North Korea.

From

ACUPUNCTURE—THE SCIENTIFIC EVIDENCE *Han Suyin*

Eastern Horizon, Volume III Number 4, April 1964)

18 Causeway Road, 1st fl., Hong Kong

What is Acupuncture? DANA STOVICKOVA

The word 'acupuncture' comes from the Latin words *acus*-needle and *pungere*-pierce. It signifies the old method of Chinese needle treatment. The Chinese term *chen-chiu* is broader because it embodies two meanings. *Chen* means needle and *chiu* means moxibustion, i.e., the burning of moxa (*artemisia vulgaris*).¹ *Chen-chiu* signifies a special type of therapy by acupuncture or moxibustion. In both cases it means to stimulate the nerves at fixed places of the body (so-called sensitive spots) and by this means to stimulate or tone down the central nervous system. Stimulation can be attained either by inserting a needle to a certain depth between the joints, or muscle tissue, or by burning a specific amount of moxa.

Origin and History of Acupuncture and Moxibustion

There are only guesses as to the date of origin of acupuncture and moxibustion. The Chinese date its origin from the neolithic period. The first records are from the Han dynasty (207 B.C.-220 A.D.). The main development was during the T'ang dynasty (618-907) and the Sung dynasty (960-1273). The first bronze figure with marked spots was cast in the Sung dynasty; the first illustrated document on acupuncture is from the same period.

Dana Stovickova,
a Czechoslovakian medical scientist, in
Eastern Horizon.

From Arts & Sciences in China,
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January/March, 1963 Vol. 1. No. 1.

The Western doctor seeking to unravel the mysteries and learn the art of his traditional colleagues, must approach his task with both scientific detachment and with humility.

He will find the necessary humility easier to acquire if he bears in mind the great service which traditional doctors rendered the Chinese people throughout the long centuries when the mass of the people in the Western world were almost totally without medical care. During all this time, Chinese traditional doctors introduced huge numbers of herbal and other remedies, sometimes making important advances sometimes only appearing to do so and at other times, following blind alleys.

Some of these remedies, shipped out of Chinese ports by adventure-some sailors, or carried on the backs of mules or camels along the seemingly endless Silk Road, reached Western countries and were incorporated into Western pharmacopoeias as new and precious oriental cures.

Among such herbal remedies, the Chinese drug Ma Huang, under its Western name of Ephedrine, is still widely used in the West in the treatment of asthma—just as it was by Chinese traditional doctors more than 1,000 years ago. But I have seen acupuncture arrest an attack of asthma even more dramatically than an injection of Ephedrine—although its mode of action is as yet inexplicable by Western medical science.

Just as modern science has established the pharmacological action of the ancient Chinese drug Ephedrine, so it must now patiently undertake the far more difficult task of unravelling the complexities of acupuncture.

J. S. HORN, F.R.C.S., Eng.

From

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The following article "Chinese Traditional Medicine: A Practitioner's View" by Felix Mann is reprinted from THE CHINA QUARTERLY of July-September 1965 with the permission of the editor, Roderick MacFarquhar.

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Chinese Traditional Medicine: A Practitioner's View

By FELIX MANN

CHINA had a system of medicine long before the advent of scientific medicine in the West. The first book about it, the *Su Wen Nei Ching*,¹ was written about 300 B.C., and its detailed description of some medical phenomena cannot be surpassed even today. Despite the fact that much of the terminology is metaphysical, this traditional system of Chinese medicine is at the same time very much down to earth, being largely the result of minute observations. Consequently the symptoms of many diseases are much better described in traditional Chinese textbooks than in their modern scientific Western counterparts. Reading the Chinese books indeed opens up a new vista to a Western doctor, transforming the small range of obvious symptoms he learned at a Western medical school into a vast panorama of interconnected phenomena. It would seem that, with his reliance on laboratory procedures, the Western doctor may have been gradually losing this art of close observation; perhaps it is only artists who retain it today.

Traditional Chinese medicine also manifests the Chinese genius for classification. A system of "medical laws" has evolved, embodying the direct and indirect (and even further removed) relations between cause and effect in every activity of the body. These laws are similar to the "scientific laws"—Charles' Law, Boyle's Law, Newton's theory of gravity, etc.—discovered more recently in the West. Both the Chinese and the Western laws can be proved correct by observed experiment, but the Chinese laws are somewhat more elastic. This stems from their direct concern with the animate world and, in this respect, they contrast with the laws of science, which describe only the inanimate, or at best the inanimate in the animate.

* This article seeks to give no more than a broad impression of the general approach to medical matters in the Chinese People's Republic, as seen in the eyes of a Western practitioner. The views expressed are entirely those of the writer and are based on information acquired while visiting Peking, Nanking and Shanghai in 1963 as a guest of the Chinese Medical Association. The visit was a short one, devoted mainly to the study of certain developments in the field of acupuncture, and afforded insufficient time for a comprehensive survey of medical activities. As a consequence the picture presented is necessarily rather sketchy, and needs to be viewed in the light of the more detailed information forthcoming from time to time in this Journal.

¹ Translated by Ilsa Veith under the title *The Yellow Emperor's Classic of Internal Medicine* (Baltimore: Williams & Wilkins).

Traditional Chinese medicine is divided into several specialties, much as Western medicine. The basic theory underlying the Chinese specialties is the same, but the treatments employed are different. Acupuncture (chen-chiu), the insertion of needles at certain nerve points, is the most typical. Other methods include herbal medicine, massage, medical breathing exercises, medical gymnastics, etc.

Like many other things in the formerly closed-in civilisation of China, medicine remained static for centuries. Consequently the traditional system tended to acquire disrepute when the Chinese began to be aware of developments in scientific Western medicine. This knowledge was first brought by the Jesuits, and later by other missionaries. One of these was Dr. Cochrane, who founded the Peking Union Hospital and Medical School—later to be supported by the Rockefeller Foundation.

By far the greatest achievement in China attributable to Western medicine is in the field of sanitation and the prevention of parasitic diseases, though execution is, of course, mainly the province of the sanitary engineer. The conquests of plagues and even of many of the infectious diseases, which have largely been eradicated from Europe, come into this category. The "four pests"—flies, mosquitoes, rats and grain-eating sparrows—have been attacked on a national scale. Drainage ditches have been deepened, stagnant ponds and refuse dumps drained. Though still not uncommon in South China, very few flies or mosquitoes are seen in Peking these days—when they appear, they are usually chased with a fly swat, with a determination suggesting that something important is at stake. The sparrow-killing campaign proved to have been over-zealous, as the slugs and insects formerly eaten by the sparrows have multiplied. A moderate increase in the sparrow population is consequently being permitted. Parasites of the human body are gradually being eradicated by composting human excreta, the heat developing in the compost heap killing some of the parasites. Hookworm, however, is proving resistant.

As regards the medical profession itself, the general approach is of course reflected in the pattern of training. Nowadays medical students in China study either predominantly Western scientific medicine or traditional Chinese medicine and there are separate faculties for each in the medical schools. Each faculty, however, also learns the basic principles of its opposite number. Training for Chinese medicine extends over five years, as compared with five or six years for Western medicine for the ordinary doctor, or eight years for the university research doctor. Recently more doctors who formerly knew only Western medicine have taken up the study of traditional Chinese medicine as applied in their

particular field. There are also some experiments in working together. For instance, an orthopaedic surgeon in Peking has been working with Chinese bone setters in the orthopaedic department of his hospital. It was found that by a combination of Western and traditional Chinese methods many fractures of bones heal considerably more quickly than by only using the Western method alone. The results of this collaborative work will soon be published in the medical press.

Similarly the system of medicine practised in individual hospitals is either predominantly Western or predominantly traditional. Western-type hospitals, however, usually have a few traditional-type doctors, as they are considered better able to deal with some phases of the treatment of patients otherwise cared for on Western lines. For instance, acupuncture has been found to be effective for post-operative vomiting. It has also been found effective for increasing the movement of the lungs and for preventing hypostatic pneumonia, which is so frequently a complication of upper abdominal operations in the elderly; in some hospitals acupuncture is regarded as a safer treatment for post-operative retention of urine than the Western method of passing a catheter into the bladder, with the resultant possibility of infection; and in some hospitals it is considered that the post-operative recovery period can also be reduced by acupuncture. A hospital of traditional Chinese medicine similarly has a few Western doctors on its staff, thereby making possible X-ray diagnosis, pathological laboratory investigations, etc. Sometimes the doctors have *ad hoc* conferences to decide in which way a patient can best be treated.

Despite widespread interest in Western medicine, it appears that many Chinese doctors are unaware of the National Health Service in Britain, and of the fact that most countries of Europe have medical and social insurance schemes. In this respect, the Chinese view European medicine as it was in the early part of this century.

In China in 1963 only factory workers had completely free medicine, the others paying the equivalent of about 6d. to visit their doctor. Drugs had to be paid for in full, herbs being quite cheap, but Western drugs being expensive to the Chinese purse. The cost per week of in-patient treatment in hospital appeared to be about as much as the average Chinese earns in a week. A patient can decide whether he wants traditional Chinese or Western-type medical treatment, and patients can choose their own hospitals or doctors broadly to the same extent that they can under the National Health Service in England. On the whole the country population have greater faith in traditional Chinese medicine, the townspeople in Western medicine.

The tendency to evaluate Western medicine more highly than their own traditional system is probably due to the fact that Western medicine, particularly since the advent of antibiotics, can cure quite a number of diseases which their own system cannot. The diseases that traditional Chinese medicine can cure, tend accordingly to be taken for granted and forgotten, much as we take electricity for granted and only realise its value when there is a power cut. On the other hand, there appear to be fewer patients with migraine headaches, rheumatoid arthritis, asthma, etc., in Chinese hospitals than in English hospitals, and this is possibly due to the fact that these diseases can often be effectively treated by acupuncture and not by Western medicine. It could in fact be said that just as much as China needs Western medicine, the West needs Chinese traditional medicine.

Some Westerners seem to think, or at least try to believe, that traditional Chinese medicine is advocated by the Government at the expense of Western scientific medicine because traditional medicine is practised by believers, while Western medicine is practised by sceptical scientists, who because of their objective training in science are less likely to be believers in Communism. Other Westerners say the Chinese Government helped traditional Chinese doctors because there were not enough Western-type doctors available. If this were true, only Western-type doctors would nowadays be trained at the Chinese medical schools, which is not the case. Undoubtedly the Chinese Government had a large say in the matter, though we in England are not free from such influences either: it was, after all, the British Government (and not the British Medical Association) who were the main initiators of the National Health Service.

China now has more doctors of both schools as well as more hospitals, and more research is being undertaken into the scientific evaluation of traditional Chinese drugs. The Government has also done much to encourage the production in China of Western-type drugs which formerly had been imported. It may, nevertheless, be some time before the Chinese restore their former esteem for their own medical tradition. Most of the things that have enabled the country to catch up with the twentieth century have come from the West, for instance, the internal combustion engine, electricity, factories, the change from an agricultural to an industrial civilisation. Except for the "arts," their culture and language, much of their former way of life has been changed by these ideas. It is, therefore, not surprising that acupuncture or other indigenous systems of medicine have tended to be regarded as backward, particularly amongst the intelligentsia. At the same time, some intellectuals have revived their regard for acupuncture after learning

that it is now practised in Europe and in other Western medical circles.

A certain amount of antagonism has existed between the two types of doctors, initiated mainly by those trained in Western medicine. But now that the two schools of medicine are beginning to know more of each other, and of their respective successes and failures, and particularly since the traditional doctors receive a training in the basic medical sciences, the doctors are more tolerant of each other. There is no reason to suppose that China will not one day be able to integrate both systems to their mutual benefit.

ACUPUNCTURE

The Theory of Acupuncture

In all disease, whether it be physical or psychosomatic, if one examines a patient very carefully it will be found that there are one or more tender spots on the surface of his body. These spots vary from a millimetre to one or two centimetres in diameter. Some of these spots will be near the source of injury or the place where the main symptoms of the disease show themselves. Other of these spots will be far away, on the arms or on the feet, for example.

If the patient is cured, whether it be by medicine, surgery or acupuncture, on re-examination these tender spots, most of which are called acupuncture points, will no longer be detectable.

The Acupuncture Points

Certain acupuncture points are well known in ordinary medicine, for example, McBurney's point in appendicitis, or various points on the temple in migraine, or tender points on the little finger in heart disease. But if, for example, a needle is put into McBurney's point in appendicitis there will probably be no result, or possibly even a slight aggravation of the disease. The points that are used in acupuncture are generally distant from the place where the symptoms are felt. Migraine is usually best treated by points on the hands or feet, heart disease by points on the back or the arms. According to Niboyet, Voll and many others, the acupuncture points show a reduction in their electrical skin resistance. I have not been able to confirm this finding as I have found many points on the skin with a reduced electrical skin resistance which are not acupuncture points. Professor Vogralik and his co-workers have found that the absorption of sound and the degree of infra-red radiation is different at acupuncture points and also that the texture of the subcutaneous tissues is slightly looser than the surrounding tissues. Professor Kim Bong Han has discovered little groups of egg-shaped cells

at acupuncture points which are united to one another by bundles of hollow tubular cells, corresponding to the meridians (see below). These tubular cells also connect the acupuncture points to the internal organs. If the bundles of tubular cells are divided, stimulation of the acupuncture point has no effect. The speed of conduction is slower than that along a nerve. Professor Kim Bong Han calls this a fourth system of communication—the others being nervous, vascular and lymphatic.

The Meridians

There are about a thousand acupuncture points situated in the subcutaneous tissue of the body. They are divided into twelve main groups, all the points in one group being united via a line called a meridian.

The meridian of the liver, for example, goes from the region of the big toe, up the inside of the leg and thigh, to end on the front of the abdomen in the region of the liver. The course of the liver meridian may be palpated by a doctor experienced in the correct technique, and it is found that it is only about a tenth of an inch broad and follows a fairly unvarying path. Although the liver is mainly on the right side of the abdomen there are two liver meridians, in fact all the meridians are paired.

The meridians are arranged in such a way that they tend to follow embryological paths and take into account, for example, the twist of the foot through 180° in the course of embryonic development. In a disease of the liver, as a rule, various acupuncture points on the meridian of the liver will become tender to pressure. In addition, acupuncture points on other meridians will also become tender, following the laws of acupuncture.

Types of Acupuncture Points

As has already been seen, the thousand or so acupuncture points are divided from one point of view into twelve categories, the twelve meridians. Within the twelve meridians the acupuncture points are further sub-divided so that each point within each meridian has a certain function, the same type of point having the same function in whichever meridian it may be. For example:

(1) Point of tonification

This point, if stimulated, will cause an increased activity of the organ on whose meridian it appears.

(2) Point of sedation

If this point is stimulated it will decrease the activity of the appropriate organ.

(3) The alarm point

This point, which is usually on the abdomen for all the meridians, becomes tender in what is called in Chinese a yin type of disease. For example, the alarm point of the heart is just below the tip of the breastbone. If this point is stimulated in heart disease, it may cause the patient to collapse.

The Laws of Acupuncture

These laws describe, when, and under what conditions, certain acupuncture points should be used, and also the reason according to Chinese conceptions for their use. According to Chinese tradition a human being is alive because energy circulates through the twelve meridians in a certain order. This energy, ch'i, circulates first through one and then through another, and after it has circulated through all twelve, starts with the first meridian again.

The Law of Midday-Midnight

According to Chinese tradition, the twelve main organs of the body which are associated with the twelve main meridians each have a period of two hours during the day in which they are most active.

For example, the heart has its maximal activity for two hours around 12 noon, while the gall-bladder has its maximal activity for two hours around 12 midnight. Organs that are related to one another in this way follow the law which is called the law of midday and midnight, and have a reciprocal effect on one another. In Western medicine this fact is empirically known by the fact that various gall-bladder diseases may register on the electro-cardiogram (electrical heart test), or by the difficulty that is sometimes experienced in differentiating between acute cholecystitis (gall bladder inflammation) and angina pectoris (heart attack).

This relationship is sometimes used in treatment. For example, in a patient with a heart disease it is not necessary to treat a point on the meridian of the heart. In fact if the disease is rather acute and in a labile state, the direct treatment of the heart meridian may have a deleterious effect. Under these circumstances, an indirect treatment is usually preferred, and one method is to stimulate instead the gall-bladder meridian via one of its points that has an effect on the heart.

There are at least a score of other laws, which relate organs and meridians to one another, and the judicious acupuncturist in treating an individual case will have to decide which of the laws and relationships it is best to use under the particular circumstances. To treat the diseased organ directly usually only produces mediocre results.

The Twelve Organs and the Twelve Meridians

According to tradition, twelve of the internal organs in the body are the all-important organs. The other parts of the body are considered dependent on one or several of these primary twelve. The head, for example, is not considered one of the twelve primary organs and migraine, or any other type of headache, will not be treated by treating the head. One type of headache may be cured by treating the liver; another type by treating the kidney; a third type of headache by treating the lung. Only if the disease of the head has persisted for a very long time, may the head be treated in addition to the organ of the original disease. In Chinese terminology the liver, the kidney or the lung, as the case may be, is called the root of the disease, while the head is considered the branch.

Chinese Diagnosis

Diagnosis in acupuncture depends on many of those subtle techniques which, to some extent, our forefathers used in the West, but which have been ousted by laboratory diagnosis.

A good diagnostician can make a diagnosis within the system of the twelve primary organs without the patient saying a word. He judges many individual factors: the gait of the patient, the movement of his eyes, the timbre of his voice, the colour of his skin, the quality of his hair, etc., so that a partial classification of a diagnosis into one of the basic twelve and into the yin-yang relationship should be made before the patient even sits down.

The pulse diagnosis is the highlight of Chinese diagnosis. In it, the radial artery at the wrist is palpated and, according to the varying elasticity of the different segments, the disease may be immediately classified as a disturbance of one or several of the basic twelve organs. Under the correct circumstances, this system of diagnosis is so accurate and certain that if a patient denies certain symptoms, the physician will not believe him, and on reflection, the patient will nearly always say "Ah yes, I forgot, I did have this, you are right!"

The Chinese diagnosis does not always correspond with the Western diagnosis, yet a little reflection will show that in reality they are both different aspects of the same thing. For example, a certain patient may be diagnosed as having a duodenal ulcer and this may be verified by X-ray examination. Under these circumstances the pulse diagnosis will most certainly show a disturbance in the pulse of the stomach but will probably show an even more marked disturbance in the pulse of the kidney. If acupuncture points that have an effect on the kidney are stimulated, one type of duodenal ulcer will usually be cured without

the stomach ever having been treated. If the stomach were treated directly by acupuncture there would be an improvement of the patient's condition, but not to the same degree. This possibly explains why Western medicine has such bad results in the treatment of stomach and duodenal ulcers. Presumably, the treatment of the kidney corrects the acid-base equilibrium, or possibly some other renal function, and thus secondarily corrects the gastric disturbance.

Field of Application

Acupuncture is a whole system of medicine, and theoretically any disease which is caused by, or causes a physiological dysfunction of the body can be corrected by acupuncture. For example, hay-fever, asthma, duodenal ulcer, appendicitis, colitis, migraine, etc., are all physiological disturbances and as such may, as a rule, be successfully treated. Emphysema, a cataract, a broken bone, are static anatomical alterations which no physiological process in the body can to any degree affect, and so cannot be treated by acupuncture. Certain diseases are best treated by acupuncture, others by orthodox Western medicine, and some very difficult ones by a combined approach.

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1) **Arts & Sciences in China Jan-Mar 1963 issue 50¢**

Foreword, <i>Joseph Needham</i>	2
A Science-Minded Nation	3
Tu Fu — Sage Among Poets	6
— Nine Poems, <i>translated by Andrew Boyd</i> ...	7
A Musician's Journal, <i>Frederick Page</i>	9
New Architecture and Tradition	16
A New Chinese Renaissance? <i>Denis and Anna Matthews</i>	20
What is Acupuncture, <i>Dana Stovickova</i>	24
<i>Comment by J S Horn FRCS Eng</i>	
Script Reform in China, <i>A. C. Barnes</i>	35
Science Notes	38

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