Chapter 1

Modalities of Chinese Medicine

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1.1 Introduction

Chinese medicine uses a number of modalities or therapies for both prevention and treatment of disease. There are two main categories of treatment modalities: herbal and manual treatment. Many medicinal herbs are usually used in combination. Manual therapies are applied under special situations or are used to supplement herbal treatment. Examples of manual therapies include acupuncture, cupping, moxibustion, tuina (massage) and exercise. All of these may be used as forms of treatment and as ways of preventing illnesses and achieving better health.

Regardless of the type of therapy used, they are all guided by the fundamental theories of Chinese medicine. All forms of treatment are used to help the body return to its natural state of harmony of Yin and Yang. This chapter will provide a brief description of the various forms of therapies used in Chinese medicine. Further reading is recommended for readers who would like to know more about the individual therapies.

1.2 Chinese Herbal Medicine

Chinese herbal medicine uses herbs that are combined in a prescription according to Chinese medicine theories. The term ‘herb’ includes not only plants but also various minerals and animal products. Different parts of plants may be used as herbal medicine, including leaves, roots, stems, flowers and seeds. Interestingly, different parts of the same plant may have very different therapeutic actions, such as the root and twigs of *ma huang*
(Herba Ephedrae). In addition, the part of the plant used in herbal medicine can differ between Chinese herbalism and Western herbalism, i.e., in Western herbalism, the leaves may be used, whereas in Chinese medicine, it may be root that is considered to have therapeutic actions and values. Mineral substances can include shells such as abalone shell, oyster shell and turtle shell, and minerals such as amber, haematite and iron filings. Animal products included such substances as cicada moulting, silk worm passings, deer horn and in the past, more exotic substances such as tiger bone and rhinoceros horn. Fortunately, most countries now do not condone the use of endangered species of wildlife and plant life, so the use of many animal products and plants that are endangered is decreasing.

There are approximately 1,000 different Chinese herbs in the Chinese Materia Medica, the Chinese medicine pharmacological reference book, and a typical outpatient clinic uses around 200–400 of these. Herbs may be processed using a variety of methods (discussed in more detail later). The most complex aspect of the clinical use of herbs is the combination of several herbs to be used for treatment.

1.2.1 How is Chinese herbal medicine understood?

Herbs are categorised primarily according to their actions on the body, which depend on the properties of the herbs that include the flavour (or taste) and other characteristics. Herbs are designated as hot, warm, neutral, cool or cold, and there may be varying degrees of “temperature”, e.g., slightly cold or slightly warm (Bensky and Gamble, 1993). In terms of taste or flavour, herbs are classified as acrid, bitter, sweet, sour, salty, bland and astringent (Bensky and Gamble, 1993; Lin et al., 1985). The “temperature” characteristics and tastes can also be further classified into Yin and Yang. Acrid, sweet and bland herbs are considered Yang, and sour, salty and bitter herbs are considered Yin (Lin et al., 1985). Yin herbs are those that are cool or cold, and Yang herbs are those that are warm or hot.

In terms of how the properties of the herbs help determine the action, cool or cold herbs (that correlate with Yin) are generally used to treat conditions in the body in which there is heat associated. Heat may manifest when there is a deficiency of Yin leading to a relative excess of Yang (heat), known as a deficient-heat condition or syndrome (since the root
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cause is deficiency of Yin), or when there is an absolute excess of Yang (heat), called an excess-heat condition or syndrome. Yin herbs may also be used in a formula to down-regulate or moderate the characteristics of warm or hot herbs used in a formula to strengthen Yang; in this way, the formula is not excessive in one therapeutic direction. In contrast, warm or hot herbs are classified as Yang and are used to treat conditions characterised by cold. These conditions may be deficiency-type conditions where there is a deficiency of Yang leading to a relative excess of Yin (cold), termed a deficiency-cold condition or syndrome (since the root cause is deficiency), or when there is an absolute excess of Yin (cold), termed an excess-cold condition. Similarly, Yang herbs may also be added to formulae that contain predominantly Yin herbs in order to moderate the action of the Yin herbs, i.e., balance the formula.

The flavours also help determine the specific effects of the herbs on the body. For example, bitter herbs are said to drain and dry (Bensky and Gamble, 1993) and so may be useful in draining heat from the body (heat can manifest in many ways including sore throat, sores, swellings and fever), draining dampness in the body (that can manifest as fluid accumulation, including oedema) or drying dampness in the body (dampness can manifest as excessive discharges from the body such as leucorrhoea or other disorders such as diarrhoea). Sweet herbs like liquorice root (the Chinese herb gan cao) or ginseng nourish and tonify, and may be useful in treating conditions in which there is deficiency of qi, for example. Bland herbs such as poria (the Chinese herb fu ling) can leach dampness and promote urination; many are diuretics that help eliminate water from the body (Lin et al., 1985; Bensky and Gamble, 1993). Sour herbs have an astringent action and help prevent the loss of fluids and essence and qi from the body (Lin et al., 1985). Salty herbs have an affinity with the kidney and induce the action of purging and softening hardness (hardness may manifest, for example, as masses in the body such as tumours). Many mineral herbs, particularly shells, are salty in flavour. Examples include oyster shells, abalone shells, pearls, mother of pearl (nacre) and magnetite. Most herbs are characterised by one to two flavours (Bensky et al., 2004).

The theories of Chinese medicine also hold that herbs enter specific meridians. It is understood that each individual herb has an affinity with one or more specific organs, and it is this tendency to travel to specific
organs via the meridians that helps explain the therapeutic effect of an herb on conditions associated with those organs. This is probably the earliest form of understanding of receptors and target organs. For example, the herb jie geng enters the lung meridian and is often used to treat conditions such as coughing with excessive phlegm, with the lung being the zang-fu organ of interest.

The affinity of certain herbs for particular internal zang-fu organs is also related to the flavours of the herbs. The sour flavour is believed to have an affinity for the liver, the sweet flavour for the spleen, saltiness for the kidney, bitterness for the heart and acridity for the lung (Pharmacopoeia Commission of China, 1997).

Herbs are also said to have a directional tendency; they tend to rise or float, sink or fall (Bensky and Gamble, 1993). Flowers tend to ascend and are often used to treat conditions of the head including headache and sore throat. An example is the herb ju hua or chrysanthemum flower that is often used to treat headache. This herb is acrid, sweet, bitter and slightly cold and also enters the lung and liver meridians. The eye is the sense organ associated with the liver. Ju hua is commonly used in prescriptions that treat eye disorders because of its ability to target the eyes. Descending substances can move qi downward (Bensky and Gamble, 1993); many of the mineral herbs have a descending action (Stickel and Schuppan, 2007).

Putting the flavour and temperature characteristics of an herb together, along with information on meridians that it enters, we begin to understand the action of the herb. For example, the herb lian xin (lotus plumule) is bitter and cold and enters the heart and pericardium meridians (Pharmacopoeia Commission of China, 1997). It may be used to drain heart-fire that can manifest as insomnia and restlessness.1

In general, each herb has a number of actions, one of which is usually its primary action. For example, the primary action of the herb yu xing cao is to clear heat and toxicity and to reduce swellings and abscesses for conditions such as a cough with thick yellow sputum or lung abscess (Bensky and Gamble, 1993). However, it also has the action of draining damp-heat and promoting urination and can be used to treat conditions including

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1 According to Chinese medicine.
diarrhoea and urinary tract infection (Lin et al., 1985; Bensky and Gamble, 1993; Bensoussan et al., 1998).

The actions of Chinese herbs may be explained in terms of modern biomedical concepts. For example, herbs belonging to the categories such as “herbs that drain fire”, “herbs that cool the blood” and “herbs that clear heat and relieve toxicity” generally have antipyretic (i.e., reduce fever), anti-inflammatory and anti-microbial or anti-infection actions (Lin et al., 1985; Bensky and Gamble, 1993). Many of the herbs in the category of “herbs that drain dampness” have a diuretic action (Lin et al., 1985). They are used to treat conditions in which there is an accumulation of fluids (for example, oedema) or internal dampness in the body that may be combined with heat that may manifest as conditions such as urinary tract infections, excessive vaginal discharge and weeping skin ulcers (Bensky and Gamble, 1993). The modern pharmacological actions of many of the herbs are in fact well known (Xue et al., 2003).

Examples of other categories of herbs include: “herbs that stop bleeding”, “herbs that relieve coughing and wheezing” (used in the treatment of cough and/or asthma), “herbs that invigorate blood” (these are herbs that promote blood circulation and are used in conditions where there is blood stasis) and “herbs that transform phlegm-cold” (used in the treatment of cough with phlegm, bronchial disorders and lung abscess). “External application herbs” are used to treat skin disorders and “herbs that extinguish wind and stop tremors” may be used in the treatment of hypertension, stroke, migraine, arthritis (including joint pain), dizziness and spasms that are caused by “internal wind” according to the theory of Chinese medicine (Lin et al., 1985).

1.2.2 How are the herbs used?

Chinese herbs are rarely used individually. They are usually combined into a prescription of typically 2 to 12 herbs. This prescription is called a “medicinal formula”. The choice of herbs follows Chinese medicine theories and the prescription is individualised according to the patient’s condition, constitution, age, gender and for females, time of the menstrual cycle. The dosage of each herb is very important — all herbs have a recommended dosage range within which the herb will have a therapeutic
action but is considered safe. As a general rule, the dosage range for herbs should not be exceeded, particularly for those herbs that are considered to have toxicity associated. On the other hand, using too little of an herb may result in it having no therapeutic effect. Dosage of individual herbs is always tailored to the individual. For herbs that are considered strong in action, the dosage used will be less for an individual who is elderly or very young, or of weak constitution. Certain herbs that are toxic are contraindicated (i.e., should be avoided) in certain patients including those who are pregnant.

Herbs are often processed using a variety of methods including dry frying, baking and frying with other substances such as wine or salt or vinegar. The reasons that herbs are processed includes increasing the potency of the herb, decreasing toxicity and minimising side effects, and changing the herb’s properties and thereby its therapeutic action (Lin et al., 1985). For example, frying an herb with salty water is believed to increase that herb’s actions on the kidney and frying wine will enhance an herb’s ability to promote blood circulation.

1.2.3 How are Chinese herbal medicinal formulae developed?

The art of prescribing herbs is built on a solid knowledge of the guiding theories of Chinese medicine, the actions and properties of the herbs and on years of clinical experience. Following the diagnosis of disease and syndrome (symptom/sign pattern complex) that is achieved through the analysis of the signs and symptoms and presenting the complaints in terms of Chinese medicine theories, the treatment principle(s) is/are formed. From this, the key representative medicinal formula is chosen or the formula developed.

There are hundreds of known medicinal formulae that treat many diseases and their various syndromes. Practitioners may simply choose the key representative formula for a given condition and syndrome or use a formula as the basis of their own formulae and modify it according to the patient’s presenting condition. Rarely, practitioners may also develop their own medicinal formulae based on their understanding of the disease aetiology (cause) and mechanism (pathogenesis), knowledge of the actions and properties of the herbs and clinical experience. Regardless of which
option is chosen, Chinese medicine theories guide the choice and formulation of the medicinal formula.

The structure of a medicinal formula is precise and was originally described in terms of positions within the imperial court hierarchy (Zhang and Rose, 1995). There are four classes of herbs that generally make up the structure of an herbal formula. The first is the chief herb(s) or king, usually one or two herbs that produce the main therapeutic action of the formula. The deputies or ministers are those herbs that support the main actions of the chief herb(s). The assistants or adjutants are the herbs that treat other secondary signs and symptoms, moderate or lessen any toxicity or harsh properties associated with the main herbs and assist the chief herb(s) and deputies in achieving their therapeutic aims (Bensky and Gamble, 1993). The assistants may also be used to balance the formula (Bensky and Gamble, 1993). For example, in a formula where the main aim is to tonify Yang, the herbs will be predominantly warm and may also be drying, so one or two Yin-nourishing herbs (predominantly cool or cold and moistening) may be used to moderate the warming and drying action of the Yang herbs, so that overall, the formula is not too warm or drying. The fourth category of herbs is the guide herb or envoy or courier (Bensky and Gamble, 1993). It has the action of guiding the other herbs in the formula into a particular meridian or area of the body and/or harmonising the herbs in the formula so as to eliminate any side effects that could occur in combining the herbs. The third and fourth classes are usually considered together. In the development of a formula, this structure is not always strictly adhered to, but it provides the general principles for the formation of an herbal medicinal formula. In addition, historically, the use of the metaphor of positions of the court (to describe the structure of an herbal formula) was a reflection of the influence of Confucian philosophy and social order at the time on the development of Chinese medicine (Zhang and Rose, 1995).

In general, the formula is chosen or developed to address the primary presenting complaint. The practitioner must decide whether she/he will treat the root cause (ben), the (secondary) manifestations (biao) or both. The relevant formula is chosen and necessary modifications made — herbs may be added or subtracted from the base formula and the dosage of the herbs will be tailored to the individual. The balance of herbs used
in treating the root cause (ben) and its manifestations (biao) will depend on the individual condition. Sometimes if the manifestations are the more urgent issue, the formula will use a majority of herbs to address these and in subsequent formulae, the underlying root cause is addressed. For example, in the case of bleeding haemorrhoids, there may be an underlying deficiency condition that is the root cause of the bleeding. However, the most pressing issue is to stop the bleeding first and herbs that stop bleeding will form the bulk of the prescription. Once the acute episode is over, subsequent formulae may be used to address the underlying root cause that is a deficiency condition to prevent future episodes. Signs and symptoms in addition to the presenting complaint are often taken into account and herbs may be added to the main formula to address these problems.

Certain herbs are contraindicated in combination since the combination can lead to toxicity and cause adverse reactions, or because the addition of one reduces or negates the positive effect of the other. Conversely, there are combinations of herbs that are advantageous; the combination accentuating the action of one or more of the herbs or reducing undesirable toxicity or side effects of one of the herbs.

In practice, certain categories of herbs are often used together. For example, herbs that regulate qi are often used in combination with herbs that tonify to moderate the rich and sometimes cloying nature of these tonifying herbs, so that the qi of the body does not become stagnant. Herbs in the “stop bleeding” category are often used in combination with herbs that cool blood since the root cause of bleeding in its acute stage is often “heat in the blood”.

1.2.4 What are the forms of herbal medicine?

There are many different forms of herbal medicine. These include decoction, tablets, pills, powder, granules, medicinal wines, tinctures and herbal plasters. In ancient times, herbal decoction was the primary method of preparation of the herbs and is considered the fastest-acting form of internal medicine. In a decoction, the raw herbs are boiled in water for about 30 to 45 min until the volume of liquid is reduced, then the thickened liquid drunk warm. Decoction is still used today, but is time-consuming and not always convenient. It has the advantage that the formula can be
tailored or individualised according to the patient’s condition in terms of selection of the kinds of herbs and dosage.

Granules are a more modern form of Chinese herbal medicine and are dissolved in hot water and drunk. Powders may be placed on the tongue and chased down with water. Single herbs in granulated or powder form may be combined in a formula that is individualised for the patient. Chinese medicine in the form of pills and tablets are forms of proprietary medicines and are convenient to use though their action is considered slower than that of decocted raw herbs. The disadvantage with propriety forms of herbal medicine is that the combination and dosage of the herbs is fixed and cannot be altered. Medicinal wines are made by steeping herbs in, typically, rice wine for a number of months. Wine is thought to promote blood circulation. Tinctures and herbal plasters are used for external application, for example in the treatment of sprains and to help broken bones mend.

1.2.5 What types of conditions are herbs used for?

Chinese herbal medicine has been used for over 2,500 years to treat a wide range of disorders from skin diseases to internal diseases of the body. Herbal medicine is used to treat mild disorders such as the common cold or flu and more serious diseases including heart disease, hepatitis (liver disease) and cancer. Some examples of conditions that may be treated with herbal medicine include period pain, arthritis, angina, urinary tract infection, infertility, prostate hyperplasia, stomach ulcer, irritable bowel syndrome, cough, sore throat, asthma, haemorrhoids, chronic fatigue syndrome and stomach pain.

The effectiveness of Chinese herbal medicine in treating different diseases varies and is beginning to be investigated and established scientifically. Obviously some diseases are better treated with Western medicine, particularly certain acute diseases and those that require surgical intervention. Chinese herbal medicine shows particular promise in the treatment of many chronic diseases that are not effectively treated with Western medicine.

1.2.6 What are the benefits of Chinese herbal medicine?

Chinese medicine is relatively safe with few side effects in comparison with Western medicine. With its long history of clinical use, Chinese
herbal medicine has established its unique role in health care, particularly in China and most Asian countries. The increasing popularity of Chinese herbal medicine, more recently in Western countries, is due to the public belief that Chinese herbal medicine is milder and safer.

In considering the benefits of Chinese medicine, the practice has been criticised for lack of scientific evidence of efficacy (i.e., that it works). Currently, Chinese medicine is not well understood by the Western medicine fraternity. However, no evidence of effect is different from evidence of no effect. Research that assesses Chinese herbal medicine according to scientific research methodology is still in its infancy due to various constraints including lack of funding, the small numbers of researchers trained in Chinese medicine and a lack of receptivity within orthodox medical circles. Despite this, extensive laboratory research on herbs has been conducted and a number of recent clinical trials have demonstrated the value of Chinese herbal medicine for a variety of clinical conditions such as irritable bowel syndrome, hay fever and hepatitis C.

Experiential evidence of safety and efficacy over thousands of years of practice is a strong form of evidence. It is therefore somewhat naïve to say that there is inadequate evidence to support clinical efficacy and safety of herbal medicine. In fact, the majority of current Western medical interventions also lack “scientific evidence” with regard to efficacy and safety but are routinely used in everyday practice. The concept of evidence-based medicine that demands that a treatment or substance be investigated according to scientific principles has only been popularised in the last 10 to 20 years. In contrast, Chinese medicine has been in practice for over 25 centuries. With more research being conducted, the overall role of Chinese herbal medicine in the management of common clinical conditions will be better understood.

1.2.7 Cautions and contraindications

Although herbs are generally safe, a number of herbs are toxic, and the toxicity ranges from mild to strong. Certain herbs are toxic in the raw state but rendered relatively safe when correctly processed. It is thus important that the practitioner is properly trained in the use of herbal medicine. Herbs that are strongly toxic are not commonly used and in some countries such as Australia, the use of certain toxic herbs is prohibited by law.
As discussed previously, certain herbs should not be used in combination with each other as they can either negate the action of the other herb or the combination can cause adverse effects. Interactions of Chinese herbs with Western medications can occur and whilst some of these have been documented, in general, there is not enough known about such interactions.

Care must be taken with pregnant women. Certain categories of herbs, for example, those that are purgatives or have a strong draining action, those that promote blood circulation and all toxic herbs are contraindicated in pregnancy (Ried and Stuart, 2011). Caution should also be taken in the case of elderly patients, children, those of delicate constitution or those who have been suffering prolonged illness and are weak. Herbs with strong actions and toxic herbs are usually avoided in such cases.

1.2.8 What issues need to be addressed in the future?

Research is needed to establish the safety, quality and effectiveness of herbal medicines in the treatment of different conditions. Thousands of years of traditional use or experiential evidence is a form of evidence of safety and effectiveness that should not be disregarded. However, there is now a shift in Western medicine towards evidence-based practice that demands that a treatment or medicine be tested using scientific methodology. Chinese medicine is not the same as a Western pharmaceutical and the practice of Chinese medicine is vastly different from that of Western medicine. Therefore, laboratory studies and clinical trials that test Chinese herbal medicine in ways that stay true to the underlying principles and practice of the medicine will be necessary.

The issue of safety and quality of herbal medicines needs to be addressed and there is no simple solution. Proprietary medicines (i.e., tablets and pills) are more readily controlled than raw herbs in terms of quality via the requirements of good manufacturing practice (GMP) set down by governments in different countries. However, the quality control of raw herbs remains a challenge. Problems with quality control include misidentification of herbs and incorrect labelling, substitution of herbs, contamination (for example, with heavy metals) and adulteration with Western medications. There can be variations in the quality of herbs in terms of the amount or concentration of active constituents within the herb. This can vary from season to season or between regions that the herbs are grown
in. This is a particularly important issue with respect to toxic herbs. In addition, some herbs have a shorter shelf-life than others (for example, those herbs containing volatile oils like bo he, i.e., field mint) and may lose their therapeutic effect if not used in a timely manner. Quality control systems will need to be put in place in the future.

Research into interactions between Chinese herbal medicine and Western medications is necessary. There are a number of known interactions such as that between warfarin (an anti-coagulant) and the herb dan shen (Salvia root). Furthermore, adverse event reporting is a critical issue that needs to be addressed to ensure public safety.

Since many medicinal herbs could trigger similar effects, those with known severe toxicity could be left out for safety reasons. Similarly, those that could present with difficulties in quality control and toxicity identification, e.g., animal products and minerals, should also be left out (Da Nobrega Alves et al., 2008; Feng et al., 2009; Li and Wilcover, 2005).

1.3 Diet Therapy

In ancient China, medicine and diet were believed to be the same (Zhao, 1996). Diet therapy, the use of foods to sustain or improve health or treat illness, was used by ordinary people and in the imperial courts of China as far back as 2,000 years ago (Zhao, 1996).

Certain herbs used in medicinal formulae are also used as foods in soups or other dishes and families passed down recipes to younger generations to help alleviate various illnesses. For example, the herb dang gui (Chinese angelica root, a herbs that nourishes blood) can be added to chicken soup, which is particularly nourishing for women following childbirth and for those patients who are weak following long-term illness. The herb gou qi zi (the Chinese wolfberry fruit, a herb that nourishes the liver blood and kidney Yin) can be cooked with pork (which also strengthens the kidney) in order to help strengthen the kidney system. The herb shan yao (Chinese yam) can be cooked with rice — the combination helps strengthen the spleen system and may help those who have hyper- or hypo-acidity of the stomach.

Like medicinal herbs, everyday foods are understood and categorised according to Chinese medicine theories. The properties of the foods — the temperature characteristics and flavours — help determine the action of the foods on the body. Foods have different actions on the body as understood
in terms of Chinese medicine theories. Some foods tonify qi, others tonify yin and yang and nourish blood, and yet others may clear heat or are diuretics. Foods can have specific effects on certain zang-fu organs. For example, apricots are sweet, sour and neutral in flavour, “moistens the lung” and “nourish the stomach Yin”; they may be used in the diet to help alleviate a dry cough and in conditions associated with stomach Yin deficiency such as gastritis (inflammation of the stomach). Grapes are sweet, slightly sour and neutral in flavour and act particularly on the stomach, kidney and liver zang-fu organs. They also help strengthen deficient qi, nourish the blood for conditions of qi and blood deficiency, and can also help generate body fluids. Pork helps strengthen the kidney, chicken invigorates the lung, beef bolsters the liver and lamb fortifies the heart.

Foods should be eaten during the season in which they naturally grow. During winter, warm foods should be eaten and cold and raw foods that can damage the spleen and stomach zang-fu organs (responsible for digestion in Chinese medicine) should be avoided (Kastner, 2004).

Not all foods have a positive effect on the body, and how the body reacts depends on the individual. Mangoes and bananas, for example, are believed to contribute to internal dampness; in Chinese medicine, dampness can manifest as abnormal discharges. Certain foods can aggravate or exacerbate pathological conditions. A good example is alcohol. Alcohol can contribute to the formation of internal heat in the body. Internal heat or fire that flares upwards can lead to headache, red eyes and contribute to hypertension. Alcohol can also lead to “internal dampness” that can manifest in some women, such as stomach bloating and thrush, an itchy vaginal discharge.

The knowledge of the properties and action of foods on the body can thus be utilised in two ways:

- To ascertain whether there are foods in the diet that are aggravating or causing the patient’s condition; and
- To suggest dietary modifications including the addition of certain foods that may be beneficial to the patient.

A Chinese medicine practitioner will question a patient about his diet, followed by a diagnosis of the disease and syndrome involved, and will give advice on foods that should be avoided and those that may be beneficial
to add to the diet. Chinese medicine theories guide this dietary analysis and advice. There are many diet therapy books containing recipes that are indicated for certain internal diseases or ailments. Recipes also exist for external treatment of various skin diseases including psoriasis, eczema and tinea (Zhao, 1996).

1.4 Acupuncture

Acupuncture is a technique that uses very fine needles to puncture the surface of the skin and underlying tissues at specific points along energy channels or pathways known as meridians and collaterals. These sites are called acupoints, and are chosen according to Chinese medicine theories in order to elicit specific therapeutic effects. Following diagnosis of the disease and syndrome (symptom/sign complex), the treatment principle and acupuncture prescription is formulated. Needles are inserted and manipulated using a variety of techniques, each having a specific therapeutic effect.

1.4.1 What theory guides acupuncture practice?

The practice of acupuncture is guided by the major theories of Chinese medicine including the Yin-Yang theory, zang-fu theory, five-element theory and in particular, the theory of meridians and collaterals. These will be discussed in later chapters of this book. According to these theories, acupoints are points through which the meridian qi and qi of the zang-fu organs are transported to the body’s surface (Cheng, 1987; Qiu et al., 1993). The number of acupoints on each meridian varies from nine on the heart and pericardium meridians to 67 on the bladder meridian.

Acupoints can have a local effect and/or a distal effect, i.e., an effect on another part of the body remote from the acupoint (Cai et al., 1997). Acupoints on the same meridian share common functions; in addition, each acupoint has its own specific function(s). For example, the acupoint Qu Chi (Large Intestine 11) near the elbow shares common functions

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2 Acupoints are named after features in nature, animals, utensils and architectural structures (Cheng, 1987). Qu Chi means “crooked pool” (Cheng, 1987). They are also named in chronological order according to the meridian they belong to. Qu Chi is the 11th point on the large intestine meridian.
with several other points on the large intestine meridian including the treatment of pain, numbness and motor impairment (such as immobility and spasm) of the lateral arm and shoulder (Cheng, 1987; Deadman et al., 1998). However, its special function is relieving fever and is usually the acupoint of choice for conditions with high fever. Each regular meridian has specific points with functions that are common to all meridians. For example, each meridian has a Yuan or primary point that is used to treat deficiency-type conditions, and a Xi-Cleft point that is used to treat acute disorders.

In treatment, a variety of points may be chosen. Acupoints are usually chosen from the affected side of the body; however, in some cases, acupoints from the opposite side may be chosen (this is called cross-needling) (Deadman et al., 1998). Local points are those that overlie or are very close to the diseased area of the body (Deadman et al., 1998). Adjacent points are those nearby. Distal points of the regular meridians have actions on parts of the body remote from their location (Qiu et al., 1993). Distal points are located below the elbow and knees and are primarily chosen from the meridian involved in the disorder, being commonly used to treat conditions of the head, chest, abdomen and back (Deadman et al., 1998). For example, the acupoint He Gu (Large Intestine 4) on the hand is commonly chosen to treat conditions of the head, face and eyes such as headache, sinusitis, conjunctivitis, toothache and facial paralysis (Maciocia, 1989). In practice, a combination of local, adjacent and distal points are commonly chosen to treat pain and disorders of the zang-fu organs (Deadman et al., 1998).

According to the zang-fu theory, each zang organ (considered deeper in the body) is connected or paired with a more superficial fu organ, and the connection is provided by the respective meridians (this is described as an interior–exterior relationship). In the treatment of a disorder of a particular zang-fu organ, points from its paired meridian may also be chosen. For example, in the treatment of a lung disease, a point from the lung meridian’s paired meridian, the large intestine meridian, may be chosen. Empirical points are those that have a historically established and specific

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3The term regular meridian refers to the 12 meridians of the body but is often used to include the two meridians along the midline of the body — the Du and Ren meridians.
effect that does not necessarily bear a relationship with its course. For example, Lie Que (Lung 7) is traditionally used to treat headache even though the lung channel does not pass to the head (Deadman et al., 1998). There are also combinations of points that historically have been found to be effective.

Acupoints may be chosen according to many principles that include:

- From the front of the body to treat the back and vice versa;
- From the lower body to treat the upper body and vice versa;
- From one meridian to treat its interior–exteriorly related meridian;
- Selection of empirical points or empirical combinations;
- From the opposite side of the body (cross-needling); and
- Treatment of the root cause (ben) and the secondary manifestations (biao) (Deadman et al., 1998).

1.4.2 How is acupuncture performed?

Following the formulation of an acupuncture prescription, the patient is generally asked to lie on the treatment couch. The skin is cleaned and swabbed with an alcohol swab and an appropriate sterile needle chosen. Acupuncture commonly uses very fine filiform needles that have a handle at one end and the needle at the other. A modern variation on traditional needles is the addition of plastic guide tubes may be supplied with the needle that limit the initial depth of insertion of the needle into the skin: once inserted, the guide tube is removed and the needle inserted deeper and/or manipulated. The needles vary in length and thickness. For insertion into an area of abundant muscle such as the buttocks, a needle of greater length and usually greater thickness is chosen, whereas for insertion into, for example, areas on the face where only superficial insertion is needed, a shorter and finer needle is generally chosen.

The angle, direction and depth of needle insertion are all important factors in acupuncture technique. The needle may be inserted at right angles (90°) to the body surface, inserted obliquely (approximately 45° to the body surface) or transversely (at an angle of 15°) (Cai et al., 1997). A transverse insertion is usually used where the muscle coverage is thin, such as acupoints on the head or face (Qiu et al., 1993). An oblique
insertion is usually used when the needle is to be inserted into acupoints near important organs or close to bones (Cai et al., 1997). A perpendicular insertion is used in areas where soft tissue is thick and on the limbs (Cai et al., 1997).

Direction of insertion depends on where on the body the needle is to be inserted and is related to angle of insertion (Cai et al., 1997). Depth of insertion depends on where on the body the needle is to be placed and the overlying musculature and fat. Extreme care with depth of insertion must be taken when needling acupoints close to or overlying vital internal organs. Depth of insertion is less for a thin person with little body fat and muscles, for example, than someone who has a lot of muscle. Shallow insertion is suitable for those with a poorer constitution or who are weaker, such as elderly people, whereas deeper insertion is suitable for those with a strong constitution, and generally young and middle-aged people (Cai et al., 1997).

The therapeutic effect of needling depends on achievement of the “arrival of qi” or “de qi”. This is a subjective sensation felt by the practitioner and the patient. The patient may feel as sensation of heaviness around where the needle is inserted. In some cases, the sensation may be like a tiny electric shock that travels along the course of the meridian (that the acupoint belongs to). The practitioner feels a sensation akin to the needle having been grasped by the tissue.

Once the needle is inserted, the needle is generally left in the body for 15–30 min, although for certain conditions, the needle retention time is only a matter of seconds (usually in acute conditions such as pain syndrome and in conditions such as hay fever). During the period of needle retention, the practitioner may manipulate the needle. Again, there are a variety of manipulation techniques that have different therapeutic effects. For example, the needle may be lifted up and thrust down again, or twirled and rotated continuously. Another technique is to shake the needle or cause it to vibrate. Force and speed of needle manipulation, depth of insertion and amplitude of rotation of the needle have therapeutic significance. For example, in order to reinforce in the case of a deficiency-type condition, the needle is rotated gently and slowly using a small amplitude: this is

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4 A deficiency condition denotes a deficiency of antipathogenic qi. More specifically, there can be a deficiency of qi, blood, body fluids, Yin, Yang, and jing (essence).
called a reinforcing technique. In comparison, in order to reduce an excess-type condition,\(^5\) the needle is rotated rapidly using a large amplitude: this is called a reducing technique.

At the end of the treatment, the needle is removed from the patient. Again, the technique of removal has therapeutic significance. For example, in a reinforcing technique, the removal of the needle is gentle whereas it is more forceful in a reducing technique. The acupoint is generally pressed with a sterile cotton swab or ball after removal of the needle in order to prevent swelling around the site that may be caused by bleeding beneath the skin or to stem spot bleeding from the acupoint if it occurs.

There are other kinds of acupuncture needles and techniques. For example, the dermal hammer is a hammer-shaped instrument with many fine needles in the head. It is tapped against the skin to cause superficial bleeding. It is used to treat mainly musculoskeletal conditions in which there is blood stasis.

### 1.4.3 What kinds of conditions is acupuncture used for?

Acupuncture is used for a wide range of conditions including pain relief, treatment of musculoskeletal problems (such as lower back pain, sprains and strains, frozen shoulder, tennis and golfer’s elbow), digestion problems, women’s health problems, asthma, chronic fatigue syndrome, urinary dysfunction, infertility, common cold, fever, sore throat, constipation and diarrhoea — to name only a few.

### 1.4.4 What are the benefits of using acupuncture?

The purpose of acupuncture is to bring the body back into internal balance, harmonising the Yin and Yang and qi and blood of the body. In Chinese medicine, acupuncture is believed to have immediate action on the vital energy via the meridians and collaterals. In the past, acupuncture was believed to be one of the most effective methods in treatment of medical emergencies. This role obviously has been diminished due to the advancement of

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\(^5\)An excess condition is one in which the pathogenic factors are strong and the body is fighting back strongly.
Western medicine; however, it is still frequently used for acute pain management. Recent research has also demonstrated the value of acupuncture for the management for disorders including various pain syndromes (acute and chronic), urinary tract infection, nausea, vomiting, morning sickness and hay fever (Macpherson et al., 2008).

1.4.5 What are the risks of using acupuncture?

Risks of acupuncture are minimised by correct technique and adherence to infection control guidelines. Problems can include broken or bent needles, stuck needles and haematoma (swelling around the acupuncture site due to bleeding beneath the skin) (Cheng, 1987). Fainting can also occur, particularly in patients who are very nervous, over-fatigued or have a weak constitution. For this reason, the practitioner should monitor the patient’s response carefully, and in general, first-time patients should be needled lying down, not sitting up. More serious problems can include puncture of major body organs such as the lung (e.g., pneumothorax), and infection of the local acupuncture site or even introduction of pathogens deeper into the body. There are risks to the practitioner too. These can include needle-stick injury where the practitioner accidentally pricks himself/herself with a needle that has been used on the patient. Aseptic technique is vital in order to avoid infection of the body. The use of disposable single use needles (instead of re-usable needles) is recommended in order to decrease the risks of contamination and spread of infection. Blood-borne diseases including HIV-AIDS and hepatitis B and C can be spread with contaminated needles.

1.4.6 Precautions/Contraindications

Care must be taken with first-time patients and those who are particularly nervous or of weak constitution to avoid fainting. Acupuncture should be avoided in patients who are over-fatigued, over-hungry or intoxicated (Cheng, 1987; Qiu et al., 1993). Strong needling techniques should not be used in patients who are very weak and deficient in qi or blood. Certain acupoints are contraindicated in pregnant females, particularly those on the abdomen or lumbo-sacral areas (lower back region) and those that stimulate
blood circulation (Qiu et al., 1993). There are points that can stimulate uterine contraction and obviously these must be avoided in pregnancy. Acupuncture should also be avoided during menstruation unless it is for the purpose of regulating menstruation (Qiu et al., 1993). Acupuncture should not be performed on patients who are prone to spontaneous bleeding and is contraindicated in local areas where there are skin infections, ulcers or other lesions, broken skin, some rashes, scars or a tumour (Qiu et al., 1993).

### 1.5 Electro-acupuncture

Electro-acupuncture is a relatively modern variation on acupuncture in which electrodes are attached to the handles of the filiform needles once inserted into the body, and a small electrical current applied. In terms of the Western biomedical model, application of the electrical current has the effect of altering ion concentration and distribution in the body tissues and can be used to regulate the functioning of the body, promote analgesia and regulate muscle tone (Qiu et al., 1993). In terms of Chinese medicine theories, it is able to promote the circulation of qi and blood (Qiu et al., 1993). Different waveforms of electrical activity may be applied and each has its own therapeutic action.

Electro-acupuncture has a similar wide range of indications as regular needling (Qiu et al., 1993). However, it is contraindicated in patients with pacemakers and caution must be taken to avoid the current loop passing the heart for persons with heart disease (Qiu et al., 1993). It is generally not recommended for use in pregnant females.

### 1.6 Magnetic Therapy

In modern times, the use of magnets as a form of acupuncture therapy has started in some centres. Magnets in the form of beads or sheets are applied to an acupuncture point, setting up a magnetic field (Cai et al., 1997). Magnetic sheets may also be placed opposite each other, for example, on either side of a limb (Cai et al., 1997). Such placement allow the magnetic force to penetrate deep into the tissue (Cai et al., 1997). Magnet therapy is used for a range of disorders including hypertension, sprains and muscular strains, heart disease, asthma, joint pain, period pain and dizziness (Cai et al., 1997).
1.7 Ear Acupuncture

Based on the principle that all meridians directly or indirectly communicate with the ear and each meridian is related to a zang-fu organ, theory holds the ear is closely related with the zang-fu (Qiu et al., 1993). The body structures are mapped onto the surface of the ear in the shape of an inverted foetus (Qiu et al., 1993). Not only are there areas on the ear surface that correspond to body parts, but there are also specific points that have particular therapeutic functions. For example, the ear acupuncture point Shen Men is commonly used for insomnia because of its therapeutic function of calming the heart and mind (Chen and Cui, 1990). According to Chinese medicine theories, sleep (quality and quantity) depends on the state of the shen (spirit) or mind (Maciocia, 1994), and the heart is the zang-fu organ that controls the mind.

Acupuncture needles are inserted into points in the ear. Alternatively, small seeds backed with sticking plaster are taped onto specific ear acupuncture points. They are generally left on the ear for 2 to 3 days and pressed daily 2 to 3 times per day in order to stimulate the point and elicit the proper therapeutic effect. Like in regular acupuncture, an acupuncture prescription is formulated following diagnosis of disorder and differentiation of syndrome according to Chinese medicine theories (Chen and Cui, 1990). Acupoints may be chosen according to:

- Chinese medicine theory (e.g., for disorders involving the spleen, the spleen point is chosen);
- Disease location (e.g., for bronchitis or cough, the lung point is chosen);
- Modern medical knowledge (e.g., the sympathetic point is chosen for disorders involving the sympathetic nervous system); and
- Clinical experience (e.g., Shen Men is chosen for insomnia or manic depression) (Qiu et al., 1993).

Ear acupuncture is not only used as a treatment option. Knowledge of the ear acupoints can aid in diagnosis. For example, when there is disease, corresponding areas on the ear may become tender or show a change in colour or form (Qiu et al., 1993). Ear acupuncture is indicated for a wide range of disorders including palpitations, insomnia, hypertension, hypotension, tonsillitis, dysmenorrhoea, epilepsy, constipation, various skin disorders, headache and sciatica (Chen and Cui, 1990).
1.8 Scalp Acupuncture

Scalp acupuncture differs from regular acupuncture or ear acupuncture in that areas on the scalp rather than specific points are stimulated, in general, the areas over specific regions of the brain that they have a therapeutic effect on (and after which they are named). For example, there is a sensory area overlying the Sensory Area of the brain (indicated for sensory disorders such as numbness, migraines and vertigo), a Motor Area (indicated for disorders such as paralysis of the lower limbs), a Speech III Area overlying the parietal area of the skull used for treatment of sensory aphasia (disturbance in understanding speech) and a Visual Area overlying the occipital lobe of the brain used to treat cortical (brain-related) visual problems (Qiu et al., 1993).

Electro-acupuncture is commonly used to treat cerebral or encephalic disorders such as stroke, epilepsy, chorea, paralysis, aphasia and vertigo (Qiu et al., 1993). It may also be used to treat different kinds of neuralgia, lower back and leg pain, nocturnal enuresis and other disorders (Qiu et al., 1993).

Electro-acupuncture may be applied to stimulate the specific regions of the scalp. Alternatively, manual manipulation of the needle may be performed; following rapid needle insertion, the needle is rotated very rapidly at a frequency of approximately 200 times per minute for approximately 30–60 s (Qiu et al., 1993). This manipulation is usually followed by a break of several minutes, and thereafter, the manipulation/break sequence is repeated twice (Qiu et al., 1993).

1.9 Moxibustion

Moxibustion is a form of therapy in which heat is applied to the body in the form of a cone or stick of the herb Artemisia valagaris (Chinese herb ai ye), an acrid, bitter and warm herb. This cone or stick of herb is known as moxa or moxa “wool” — its consistency is a little like that of unspun wool. In some forms of moxa, other herbs are added to ai ye. The moxa stick or cone is ignited and allowed to smoulder. As a consequence of the properties of ai ye, moxa may be used to warm the meridians and dispel cold and dampness, promote the flow of qi and blood in the meridians,
relieve swelling and pain, penetrate into muscles and strengthen the Yang qi of the body and prevent illness (Cai et al., 1997; Cheng, 1987).

If a moxa stick is used, it is usually held above the area or acupuncture point to be treated until the area becomes warm. The stick is usually moved around above the body so that it does not over-warm the area of skin. Moxa may be used in conjunction with acupuncture, i.e., a piece of moxa wool is placed over the handle of the acupuncture needle and ignited. This transfers the heat to the acupuncture point. Care must be taken that the ash from the moxa does not drop onto the patient’s skin.

An ancient method of using a moxa cone was to apply it directly to the skin, ignite it and allow it to burn out, leaving blisters — this was called scarring moxibustion (Cheng, 1987). Alternatively, before the cone burnt down completely, it would be removed and another placed on the body — this was called non-scarring moxibustion (Cheng, 1987). Direct moxibustion, particularly the scarring form, is not used much in modern Chinese medicine. Indirect moxibustion involves placing an insulating material such as a slice of ginger or garlic between the body and the moxa cone, then igniting the cone (Cheng, 1987).

Moxibustion must not be used (i.e., is contraindicated) when there is excessive heat in the body, for example, when there is fever, or when there is an excess-type syndrome (Cheng, 1987). Moxibustion on the abdomen and lumbar and sacral areas of the (lower) back of pregnant women is also contraindicated (Cheng, 1987). Scarring moxibustion must not be used on the face, head or over areas near large blood vessels or certain vital organs (Cheng, 1987).

Moxibustion is used in the clinic to treat many different kinds of disorders, providing the syndrome differentiated is one in which moxibustion is suitable. Such disorders can include arthralgia (joint pain), vertigo, amenorrhoea (absence of periods in a women who has not reached menopause), mastitis, prolapse of the uterus or anus, protracted diarrhoea, vomiting, diarrhoea and abdominal pain (Cai et al., 1997).

1.10 Cupping

Cupping is a form of therapy in which a cup, usually made of glass or bamboo, is placed on the skin, usually in an area of abundant muscle, after
a negative pressure is created inside the cup by passing a flame into it. The negative pressure created draws the skin and underlying tissue up into the cup. The purpose of cupping is to relieve areas of blood and qi stagnation: cupping warms and dispels cold and stimulates or facilitates the flow of qi and blood in the meridians (Cheng, 1987). It is commonly used to treat musculoskeletal problems and may be used in combination with acupuncture where the needle is inserted into the skin first, with the cup then placed over the needle, or it may be used prior to or following acupuncture. The aftereffect of cupping is usually a localised area of blood stasis manifesting as a reddish purple circular area of bruising that subsides after several days. In general, the greater the amount of blood stasis, the darker the “bruised” area.

Cupping may also be used in combination with a technique called “blood-letting” in which the skin is pierced with a lancet or three-edged needle or dermal hammer and the cup placed over the area. This has the effect of drawing out the blood in areas where there is blood stagnation and is used to treat acute sprains where there is blood stasis (Cheng, 1987).

Cupping may be used as a form of massage: oil is applied to the body and a cup applied, creating a vacuum. The cup is then moved or dragged over the surface of the skin; again, the purpose is to encourage the flow of qi and blood in the meridians in areas where it may be stagnant, and to warm the area and dispel cold.

In cases where cupping is used in conjunction with needling or blood-letting, glass cups must be re-sterilised or disposed of after use. Bamboo cups are generally considered unsuitable for use from the point of view of infection control since they cannot be adequately cleaned and sterilised.

Cupping is contraindicated in patients prone to spontaneous bleeding, on areas where skin is broken or ulcerated, in patients with oedema or high fever, and over the sacral areas and abdomen of pregnant women (Cheng, 1987). Strong cupping should be avoided in patients who are very weak.

1.11 Tuina (Chinese Massage)

Tuina is used as a treatment modality and a form of preventive medicine and is guided by Chinese medicine theories.
One of the major differences between *tuina* and Western forms of massage is that it is traditionally done through the patient’s clothes, a reflection of the reserve that characterises Chinese culture. Herbal liniments may be used when necessary, but massage oils are not commonly used and *essential oils* (extracted from various flowers and plants) that are favoured in Western massage are absent.

Chinese massage developed throughout the many dynasties of Chinese history and numerous schools of massage were formed, each characterised by its own special manipulations or “chief manipulations” plus several auxiliary techniques (Zhang, 1990). The numerous schools and academic branches of massage in China include one-finger meditation massage, rolling massage, digital acupoint pressure massage, paediatric massage, organ and channel massage, sports massage, bone-setting massage and chiropractic therapy, to name but a few (Zhang, 1990; Nielsen et al., 2003).

The major schools and forms of massage include the following:

- **One-finger meditation massage**: Focuses on massage of acupoints along the meridians and in addition to its primary technique of using the radial side, tip or whorled surface of the thumb, uses 11 other hand techniques (Zhang, 1990).
- **Rolling massage**: Uses a rolling action as the chief hand technique and covers a large manipulation area while exerting strong force (Zhang, 1990).
- **Internal exercise massage**: One of the more interesting forms, requiring the practitioner to be schooled in *Shaolin* internal exercise. The practitioner directs qi inside while performing the massage and at the same time, the patient should also practise *Shaolin internal exercise* during the massage to strengthen their resistance (Zhang, 1990). Thus, both the outer and inner environments are treated. A large number of hand techniques are used.
- **Digital point therapy** developed from the actions of traditional Chinese martial arts; the basic hand techniques include energetic and swift digital pressing, hitting, thumping and patting (Zhang, 1990).

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6Shaolin monks in the Shaolin Temple in China are renowned for their amazing feats of physical strength that have as a foundation, a fierce strength of mind and spirit.
• Finger-pressing massage uses the fingertips to press acupoints and tender points (termed Ashi points) (Zhang, 1990).

The effectiveness of massage depends on the quality of manipulation, i.e., the practitioner’s technique, and the therapeutic effect related to the stimulation of the meridians, acupoints and other locations chosen (Zhang, 1990). Massage has a local effect on promoting blood circulation in soft tissue and muscles and helps the soft tissue, tendons, joints and bones recover from injury (Zhang, 1990). Massage also works by regulating Yin and Yang, regulating the function of the meridians and collaterals, and influencing the state of the body’s vital substances (such as qi, blood and body fluids), internal organs and the emotions via its action on the meridians and collaterals and specific acupoints (Zhang, 1990).

1.12 Exercise Therapy

Taichi and qigong are two of the major forms of exercise therapy of Chinese medicine. In both qigong and taichi, the breathing and body movements are coordinated and the mind is focused internally in order to promote the unobstructed flow of qi and blood around the body, calm the spirit, regulate the emotions, and strengthen the body’s qi and internal zang-fu organs.

Taichi has also been described as “an approach to following the earlier form of Taoist philosophy in movement” (Crompton, 1990: p. vii). Taichi consists of a series of slow, controlled, gentle movements and postures in a specific sequence. There are several different schools of taichi and also several forms of taichi. For example, in the Yang style (school) of taichi, the “long form” consists of 108 separate postures/movements linked together in a flowing sequence. However, gentle these movements appear, the individual movements are actually martial arts moves. Taichi is essentially a fighting form practised, as a rule, alone i.e., no partner is necessary for most of the forms of taichi, although there are some forms such as pushing hands in which a partner is necessary. There are also several forms of taichi involving weaponry such as swords (taichi jian). Taichi can be practised as simply a form of physical exercise or as a deeper meditative practice; it is often called “meditation in movement” (Crompton, 1990: p. vii).

Qigong (or chikung) means “cultivation of internal energy” (or qi) (Crompton, 1990: p. 82). Taichi is believed to have developed out of
qigong (Crompton, 1990). Qigong has both static forms in which different stationary postures are adopted, and dynamic forms in which postures are sequenced. Different postures and movements are thought to be beneficial to specific zang-fu organs. *Qigong self-massage* is another kind of therapy in which the hands are placed on certain parts of the body, particularly over a point below the navel believed to be a focal point of qi (Crompton, 1990). Different exercises may be prescribed by a practitioner in order to specifically improve the functioning of certain organs.

### 1.13 Conclusion

Chinese medicine consists of a rich variety of modalities that promote wellness, prevent illness and treat ill health. Different modalities may be utilised depending on the patient’s condition and preference for treatment. In practice, a combination of several of the modalities allows for a holistic treatment.

### References


