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## CLINICAL PERSPECTIVES

# Chinese Medicine and the Betrayal of Intimacy: The Theory and Treatment of Abuse, Incest, Rape and Divorce with Acupuncture and Herbs — Part III: Case Study

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**Abstract:** Parts I and II of this article focused on the main types of betrayal of intimacy, e.g., abuse, incest, rape, and divorce, and the theoretic considerations for treatment from the perspective of the constitutional Five-element tradition of Chinese medicine as practiced by the author. In Part III, he takes the reader step-by-step through a detailed case study in which betrayal plays a significant etiological role in the patient's condition. Emphasis is placed on the diagnostic process including the implications of the constitutional type, pulse findings, the role of intuition and formulation of a treatment plan utilizing acupuncture, Chinese herbs and visual imagery or suggestions.

IN THE FINAL installment of this series, I present a detailed case study on the treatment of betrayal of intimacy with Chinese medicine utilizing the concepts discussed previously in Parts I and II. This case study is presented from the perspective of a con-

stitutional Five-element tradition of Chinese medicine which I have identified throughout my writing<sup>1</sup> as an "inner tradition" of Chinese medicine. This lineage of thought holds that the highest purpose of medicine lies in assisting the patient in the fulfillment of their personal destiny.<sup>2</sup>

Part III of this article is divided into two sections. The first presents my orientation toward conducting an intake and the process of diagnosis in general. This includes, in order, the questions I ask during an intake and highlights the depth of information potentially inherent in the patient's response. The second section presents a case study.

### I. The Nature of the Diagnostic Process<sup>3</sup>

In my practice, the goal of the diagnostic process is threefold.

First, it offers an opportunity to assess an individual's Five Element constitutional type (CT), as well as the important deficiencies, excesses, and stagnations, all of

**Author's Note:** The case in this article is presented within the theoretical framework which I have described in my previous writing. The reader is referred to these references in the bibliography.

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which may be harmonized with acupuncture and herbal medicines.

Secondly, the diagnostic process involves the collection of a detailed patient history which may be used as a reference point for assessing the patient's progress as treatment proceeds.

Finally, the diagnostic session should help establish rapport between the practitioner and patient and, most importantly, initiate the patient's process of healing.

One of the most powerful approaches I have incorporated in my practice is that of assisting the patient in acknowledging the connection between their specific symptoms and their beliefs, thoughts and actions. The first opportunity for directing the patient's attention to these fundamental relationships and initiating them into the process of healing is afforded during the initial diagnostic sessions.

The verbal aspect of the diagnostic process may be divided into outer and inner components. On an outer level, the questions asked by the practitioner are necessary to ascertain specific information from the patient. Additionally, every interaction with a patient offers an opportunity for establishing trust and rapport. Therefore, on an inner level, the practitioner must have clear intention regarding the manner in which each question is asked, being absolutely clear about the nature of the messages they are sending and receiving. The energetic context for the communication which the practitioner consciously creates is just as important as the specific meanings of the spoken words.

Similarly, a patient's responses to the practitioner's questions also consist of an outer and inner component. Superficially, the content of the patient's answers is informational. During the course of the interview each answer contributes to an elaborate story. As in a book, the story changes with every sentence as the interview progresses. However, the main concern of the practitioner is not with the unfolding

story but, rather, with its theme. For the practitioner, of utmost import in forming a constitutional diagnosis is the way in which the patient relates energetically to the events described during the telling of their story. Hence, one patient may display the theme of loss and grief (associated with the Metal element) while discussing their parent's divorce. Another patient may manifest neediness and a lack of sympathy (which establish an energetic theme associated with the Earth constitution) while discussing the same material. Therefore, it is the nature of the *inner theme*, revealed during the diagnostic process, that is of primary concern in establishing a constitutional diagnosis and assessing the quality of the patient's unique destiny.

### A. General Guidelines

#### 1. Ask Open-Ended Questions

Questions must be phrased in a way that allow the patient the greatest liberty in their response. For example, consider the relatively "closed" question, "What is your address?" This offers the patient little latitude in interpreting the question; the practitioner will generally receive only numbers and a street name.

The practitioner whose purpose is directed to the deeper energetic aspects of the patient's response is more concerned with how the patient *interprets* the questions they are being asked. The patient's interpretation is dictated by their CT and, therefore, deeply revealing regarding the nature of their fundamental imbalance. One may, instead, rephrase the preceding question to, "Where is your home?" Of course, a patient may respond with an address. However, the open-ended nature of the question may evoke a more personal expression of their relationship to the concept of home. For instance, the patient might respond, "I haven't had a home since my father died." The energy present during this response could then establish any number of themes relating to CT. For instance, a theme of anger and resent-



ment associated with the Wood CT might be established.

## 2. Avoid Undue Focus on the Presenting Complaints and Attempt to Ascertain the Patient's Needs Indirectly

Patients often know what they want—not what they need.<sup>4</sup> My clinical experience has made me a firm believer in the general truth of this statement. The specific symptomatic complaint for which a patient comes to receive treatment is often representative of their desire to be comfortable and to be rid of physical pain. This tends to be true to the degree that the patient's life is dictated by unconscious habitual reaction.<sup>5</sup> Since pain is often the result of separation from one's inner nature, in virtually every case a deeper reason exists for seeking treatment. From the perspective of the inner tradition, this arises from the will of Heaven attempting to express itself spontaneously in a way that supports the patient's evolution. To eliminate physical pain without also endeavoring to direct the patient's attention toward their inner purpose may be to perpetuate ignorance. Thus, one of the unique features of the inner aspect of Chinese medicine is its ability to promote conscious awareness in people who are drawn to treatment solely for relief from physical symptoms.

In order to glean the unconscious reasons for seeking treatment, during the intake and thereafter, the practitioner's inquiries should *not* continually focus on the patient's symptoms. When one proceeds in this manner, it may become apparent that patients often will not emphasize their symptoms either.<sup>6</sup> The more one discusses something the more "real" it becomes. Undue focus on the patient's presenting complaint will tend to reinforce the reality of the condition and does not contribute to a timely healing. In most instances it is more beneficial to help patients understand that the context in which their symptoms occur is defined by their diverse patterns of physical, emotional and spiritual function.

## 3. Observe and Listen Expectantly

According to my clinical experience, a primary assumption underlying diagnosis may be stated as follows: All of who a patient is, manifests in every nuance of personal expression in every moment. As such, every interaction with the patient offers an opportunity for achieving the three primary goals of diagnosis discussed above. A patient's response to any seemingly mundane question may contain the "golden key" which grants the practitioner insight into the patient's depth and path of healing. Therefore, the practitioner must maintain an attitude of openmindedness to the myriad nuances of the patient's responses.

### B. *The Intake*

The diagnostic process begins with the practitioner's initial experience with the patient. In my practice this frequently occurs when I listen to the messages left on my answering machine.

#### 1. The Telephone Answering Message

I have often found that I'm able to formulate an accurate constitutional diagnosis after hearing the patient's voice on the answering machine. This information may be significant. For instance: (a) the patient's ability to clearly state their purpose in calling; (b) the cadence of their voice; (c) the quality of breath; (d) the capacity to listen and follow directions (e.g., do they have to call back a second time to leave their phone number as requested, or clarify the previous message?); (e) the sound of their voice in accordance with the Five-element associations; (f) what is happening in the background? For example, are children screaming? Is someone interrupting? How are they responding to this input? Hence, merely from a simple phone message, with the proper focus, one may glean a wealth of information.

#### 2. The Return Telephone Call

Here, again, a great amount of diagnostic information may be available in the form of emotional and energetic responses.

Further, this presents the opportunity to initiate the process of healing. After identifying myself, I ask, "How may I help you?" This begins to reinforce the notion that help may be available and also requires that the patient make a request for this process to commence. The patient's response to this question may also inform the practitioner as to: (a) their capacity for "speaking up" for their own needs; (b) their relationship to hope as reflected in their belief that help may be available; and (c) their clarity regarding the reasons for seeking treatment.

After discussing general concerns regarding the patient's desire for treatment, the conversation then turns toward scheduling an appointment. This offers an ideal opportunity to observe the patient's relationship to time, which may yield insights particularly into the function of their Wood element and Heart official [organ].<sup>7</sup> One may also note: (a) The patient's relative decisiveness and flexibility in determining a specific appointment time, and (b) the patient's response if they must wait for an appointment.

I usually schedule 90 minutes for an initial appointment.<sup>8</sup> I conclude the conversation on a positive note by suggesting that they should be optimistic that treatment will be effective.

### *C. Initial Meeting*

Upon first meeting the patient, a wealth of sensory information is available that has direct bearing on the diagnosis. I often try to catch a glimpse of the patient coming up the walkway. I note possible differences in the patient's comportment when they are not aware of being watched as compared to any changes upon entering the office. Immediately upon meeting the patient I extend my hand in greeting and attempt to make direct eye contact. The patient's ability to sustain eye contact is an important indicator of the overall integrity and quality of their energy.<sup>9</sup> The practitioner may also note the following from the handshake: (a) the quality of contact; (b) the quality of warmth; and (c)

whether or not the patient clings to the practitioner's hand as it is withdrawn.<sup>10</sup> Many other factors may be noted, including the quality and style of the patient's attire, jewelry, facial characteristics and movement.

Such observations may be helpful in supplementing the primary diagnostic criteria for determining a constitutional diagnosis according to Five-element associations, i.e., the patient's color, sound, odor, and emotion (CSOE).

### *D. The Treatment Room*

The treatment room is a special space and should be arranged in a way that is conducive to the process of diagnosis. I always have the patient sit near a window so that available light may help facilitate assessment of their color. I previously arrange my chair and the patient's chair about three feet apart. This distance is close enough to allow me to physically touch the patient at an appropriate time during the verbal intake and potentially glean the nature of their response to this contact. Upon sitting down, it is always interesting to note if the patient moves their chair closer to mine or farther away.

Upon entering the room I instruct the patient to "please have a seat in the red chair on the left." I note whether or not these instructions are followed. I then ask the patient how they learned about me. Since virtually all of my patients are referred by word of mouth, this helps to establish rapport through the common bond of someone they know and trust. If the patient is wearing glasses, I then ask if they would mind removing them in order to facilitate my diagnosis (of facial characteristics as well as the color emanating from the area of the lateral canthus of the eye<sup>11</sup>). The patient's response to this question may provide information relevant to their: (1) vision, (2) ability to trust, and (3) flexibility.

Lastly, I inform the patient what to expect during this session. I explain that I will be asking many questions, that they are free to answer each to any degree that they are

comfortable and that it is fine to notify me if a topic comes up with which they are not comfortable. This reassures them and helps them feel safe in the diagnostic process.<sup>12</sup>

A chief task of the traditional practitioner is to create the proper context in which healing may occur for each patient. The creation of this context is afforded with every communication prior to and concurrent with the placement of an acupuncture needle. This includes the cultivation of the proper atmosphere in the treatment room—the altar upon which the ritual of acupuncture occurs.

The treatment room itself is a sacred space and should be approached as such. I have discovered that there is no place in which my healing abilities are as focused or effective as in my primary place of practice. Personally, and in one's patients, one should cultivate a sense of quietude and respect for this special place. Patients have remarked that they feel a sense of relaxation and peace even as they approach my office.

### E. *The Interview*

The order of the questions is designed to gradually build trust by easing the patient into the examination. The history consists of three sections: (1) The general background appears to be superficial, concerning their family's health history, their job and relationships; however, it may contain subtle clues relevant to the patient's diagnosis and specifically their boundaries. (2) The second part involves the patient's reasons for seeking treatment. (3) The third part covers the patient's basic patterns of function as reflected in their lifestyle and habits.

#### 1. General Background

The first part of the interview has a twofold purpose. On an outer level it eases the patient into the exam with a discussion of their general background and family history. During this part of the exam patients often feel they are talking more about others than themselves, which helps relax them. However, I find this provides some of the

most important information relevant to the patient's constitutional diagnosis and prognosis. In my experience, the way one relates to their parents and siblings, career, and intimate relationships and/or their own family are key predictors of health and balanced function in all realms.

The family in which one is raised provides both one's genetic endowment (Anterior Heaven) and one's early environment (Posterior Heaven). If one's relationship to family members plays a significant role in perpetuating patterns of habitual behavior, this will become evident in all aspects of the patient's expression when this topic is discussed. Patients who have major unresolved issues with family members (such as incest or physical abuse) will most often carry those issues forward into their intimate relationships with their own spouses and children. Thus, the energetic theme of a person's life, which is synonymous with their destiny, frequently emerges during the discussion of these significant relationships.

#### a. *Family*

- Question (Q): Where did you grow up?
- Q: Do you still have family there?
- Q: How is your father's health? mother's? sibling's?
- Q: Are you close to them?

#### b. *Relationship*

- Q: Are you in a relationship?
- Q: For how long?
- Q: How is the relationship for you?
- Q: How is your partner's health?
- Q: Do you have children?
- Q: How is their health?
- Q: Are you close with them?

#### c. *If not in a relationship*

- Q: How long has it been since you were in a relationship?
- Q: Is not being in a relationship an issue for you?

#### d. *If divorced or separated*<sup>13</sup>

- Q: Why did the relationship end?
- Q: Was it your choice to end it?
- Q: Have you been in another relationship since?

*e. If married several times or if they have a history of failed relationships*

Q: Are you aware of any similarities among your various relationships and the reasons they ended?

In my experience, the degree to which a patient exhibits awareness of their own patterns reflects the degree to which a positive prognosis may be made. It is important for the practitioner to discern between true awareness and mere repetition of a story or interpretation regarding the event. This is particularly important since some patients may have arrived at an intellectual understanding of their life story through assorted therapies, which does not necessarily correlate to the process of deep healing. A traumatic event may still be blocking the patient's progress regardless of the degree of their intellectual understanding. Again, I find that Chinese medicine can be unique in harmonizing the unbalanced energy upon which dysfunction is based.

#### *f. Career*

Q: What do you do for a living?

Q: Do you enjoy your work?

Q: Is there something you would rather be doing?

Ideally, one's career should be an expression of their deepest inner purpose; however, this is not always possible. The time one spends engaged in earning a living represents a significant portion of life. Therefore, I don't believe it is possible to be entirely healthy if one is in an occupation they intensely dislike. The way in which one relates to their occupation often serves as a potent metaphor for the state of one's general health and well-being.

### 2. Reasons for Seeking Treatment

When queried as to their reasons for seeking treatment, patients will often not mention their primary complaint or may place little emphasis on it. Rather than continually asking the patient to elaborate on the condition they've already described, I offer them several opportunities to discuss their deeper reasons for seeking treatment.

At this point in the exam I often ask, "What benefits would you like to get from receiving acupuncture?" This is an open-ended question which may allow a greater truth to emerge.

To reiterate, the degree of the patient's understanding relative to the deeper nature of their symptoms reflects the degree to which their prognosis may be positive. In my clinical experience, denial is one of the primary bases of illness.

### 3. Patterns of Function

I gather information relevant to the patient's general function and daily habits. This information is interpreted in the context of the patient's CT and is not of primary diagnostic value. It may, however, serve as a reference point when assessing the patient's progress and path of healing. Further, this information may influence both herbal prescription, as well as acupoint selection.

#### *a. Sleep*

Q: Do you have difficulty falling asleep or staying asleep?

Q: What time do you wake up? (so that you can determine the correspondence to the Chinese clock)

Generally, I am most concerned with what the patient is doing when they are not sleeping. Patients with "Wood" insomnia often lay awake either regretting the past or reviewing current emotional material. Their mental conversation usually revolves around things they should have done, ought to be doing, or what they are planning to do.<sup>14</sup> I have often found that patients who are awake and working productively and/or whose minds are active and do not fall asleep until after 3am (the transition of "Wood" time to Metal) will often sleep more easily if they go to sleep around 10pm, before the Wood element reaches its high point at 11pm.

Earth insomnia presents as a feeling of constraint and worry in which the patient is bound by their own, sometimes obsessive, thoughts.<sup>15</sup> Metal insomnia is often indicat-

ed by waking at about 3am (the transition of the Wood to the Metal element). Often the patient will be either grieving for that which has been lost in the past or experiencing a vague longing for something that seems to continually withdraw beyond their grasp into the future.

I find that Water insomnia often presents as a pattern in which the Kidney function is not appropriately controlling Heart function across the Ke (Ko, "restraining") cycle. In this relationship, the function of the Kidney (associated emotion = fear) is unbalanced and is pathologically paired with a continual inappropriate opening and closing of the Heart. In my experience, all types of insomnia in some way fundamentally stem from or agitate the Heart and, thus, therapeutic attention to the Heart in conjunction with other involved organs is appropriate in most cases.

#### *b. Energy*

Q: When is your energy at its highest level?  
lowest level?

Q: When was the last time your energy was consistently good?

The more recently the patient has experienced good energy, the better the prognosis. As in all cases, the practitioner must weigh the patient's response with their own assessment. For example, a patient may report feeling that their energy is good in a weak voice while slouching in the chair.

#### *c. Food*

Appetite  
Cravings  
Digestion

#### *d. Bowels*

#### *e. Urination*

#### *f. Menstrual Period*

Regularity  
Difficulties

Of course, a women's menstrual cycle is deeply tied to her health and reflected in all aspects and levels of personal expression.<sup>16</sup> Further, menstrual problems may often represent complex relationships between

physiological function, sexuality, and intimacy as it relates to the inner function of Blood according to Chinese medicine.<sup>17</sup>

#### *g. Pregnancies*

Difficulties

Frequency

The above information may yield useful insights into the functional state of a woman's Earth element relative to the ability to create a healthy balance between her needs and those of others (her children, partner, etc.). For instance, does she ask for sympathy for the pain felt during the birthing process? Or does she downplay what was actually a difficult and painful process which may have involved surgery? Is resentment expressed regarding the pain, indicating possible unbalanced function of the Wood element? On the other hand, the patient may discuss this material in a balanced way indicating a healthy functioning Earth element.

The frequency of pregnancies may have some bearing on patterns of Qi, Blood, and ultimately, jing deficiency.

#### *h. Circulation*

#### *i. Surgeries*

I have not commented at length on the preceding categories (c - i) relating to the patient's patterns of function. I sense that my interpretation of this material is probably not significantly different from other traditions of Chinese medicine. Paying close attention to the *manner* in which the patient is relating to their discussion of these and all other topics during the intake is an important aspect of the inner tradition.

#### *j. Habits and Medications*

This information is particularly relevant in assessing the patient's pulse. All of the following substances may affect the patient's presentation and the pulse in unique ways:

##### Medications

Coffee and caffeine-containing beverages,  
e.g., black tea, cola drinks, etc.

Tobacco

Recreational drugs (types, frequency, etc.)

Alcohol

The patient's use of these substances also reflects their overall condition and the degree of concern for their own health. In my experience, habitual reaction is the source of all illness, and as such, addictive behaviors are indicative of deep imbalance. A rule which I have found to be true regarding a patient's habits is that "they are generally unaware of many specific patterns of behavior related to their addiction."<sup>18</sup> For this reason, rarely will a patient provide accurate information about the frequency and amount of alcohol, cigarettes or coffee they consume. The practitioner will have to pursue the reliability of this information. For instance, a patient may state that they drink only one cup of coffee daily, unless they are "under stress." Knowing that the patient is, e.g., an air traffic controller may lead the attentive practitioner to suspect that their consumption may be somewhat higher than stated.

Of course, the usage of any of the aforementioned substances may diminish the value of diagnostic information gleaned from the pulse. However, I have found that substance abuse and medications do not often negatively impact the ability to determine a patient's CT by their color, sound, odor and emotion (CSOE). Given the percentage of people using these substances and the degree to which they alter the pulse, I consider this to be of significance when comparing an assessment of the pulse with that of the patient's CSOE.

#### *k. Preferences*

This information is of secondary importance and may support a diagnosis of a specific CT. Additionally, the patient's clarity regarding their preferences may also be significant.

Seasons

Like, dislike

Colors

Like, dislike

#### *l. Additional Topics*

Q: If you could change anything about your life, what would it be?

Q: Where would you like to be in 10 years?

Q: Is there anything that we haven't discussed that is important to you?

This last question is phrased in such a way that it ends the oral interview by hopefully leaving the patient with a feeling of having been "taken care of," yet being in control of the current process.

#### *F. Pulse Diagnosis and General Physical Considerations*

The shift from the interview to the physical exam marks an important turning point in the diagnostic process. During the interview the patient's mind has been engaged with their responses. However, these demands are suspended during the physical exam, which is usually conducted with the patient quietly lying down or sitting. This offers the practitioner an opportunity to assess how the patient responds to physical contact in contrast to verbal communication.

Generally, I ease the patient into this part of the exam by talking in a quieter and less direct tone of voice. I endeavor to create an environment in which the patient's mind becomes quiet and receptive. It is during this part of the exam that I ask specific questions that I may have saved until this time. For example, if I suspect that a woman has been the victim of some form of sexual abuse, I may wait until an appropriate moment during the pulse diagnosis to ask if she has such a history. I find it helpful to be in direct contact with the pulse while asking and receiving responses to such potent questions.<sup>19</sup>

#### *G. Concluding the First Session*

Upon completion of the interview, tongue and pulse diagnosis and evaluation of general physical considerations, I briefly explain the fundamental ways in which Chinese medicine is complementary to Western medicine.

This explanation entails a discussion of how Chinese medicine views health and well-being. I describe that the role of destiny

and how it is viewed (as emphasized in the tradition I practice) is fundamental to weaknesses and strengths of a particular organ system. I then discuss the patient's specific health concerns within this context. This part of the exam affords the important opportunity of helping the patient to make specific connections between their illness, lifestyle, beliefs and behavior patterns.<sup>20</sup>

Note that I rarely perform acupuncture or prescribe herbs during this initial meeting; I do so only if the patient is in acute distress. My focus is on establishing rapport with the patient while gathering information necessary to formulating a diagnosis. Generally, I prefer to allow the patient to assimilate, on its own merits, the energetic contact made during this session before receiving treatment so they have a clear understanding regarding their commitment to treatment.

I always leave the patient with a warm handshake, reaffirming once again that they should be optimistic about receiving the help they are seeking through treatment.

#### ***H. Assimilation of Diagnostic Information and the Cultivation of Intuition***

During all parts of the interview the practitioner must listen attentively to several "voices" simultaneously, keeping them distinct. *Externally*, the practitioner must distinguish between the superficial information and the deeper energetic messages from the patient's Heart striving for expression. *Internally*, the practitioner must be aware of two other levels of their listening. The loudest inner voice generally represents the function of the practitioner's own mind as it organizes the incoming material according to whichever system(s) the practitioner has learned. However, the practitioner must also listen attentively for the messages which spontaneously arise through the intuitive function of their own Heart.

For example, while one touches the pulse in pulse diagnosis, one should listen to what their intuitive voice is saying, rather than only attending to the formalities of

interpretation.<sup>21</sup> When appropriate, it is important to follow-up on one's intuitions by substantiating the accuracy of insights one has gained in this manner.

For example, if one touches any position on the pulse and senses an inner voice suggesting, e.g., that the patient is considering a divorce, then the practitioner might ask the patient how their relationship is going and note the quality of the patient's response. Only in being willing to miss the target will one ever be rewarded with a bulls-eye. Over time, one's aim becomes increasingly accurate with the result that, as the spontaneity of one's practice gradually increases, one becomes less and less burdened by the constraint of theory. Hence, each session provides the practitioner with the opportunity to cultivate the highest aspect of diagnosis which is to merely "look and know."

#### ***I. Formulating a Diagnosis and Treatment Plan***

In general, my process of formulating a diagnosis involves first identifying the patient's constitutional type. This process is usually rapid and occurs within the first few minutes after meeting the patient. Unless compelling information to the contrary arises during the exam or later treatment, I generally stay with my constitutional diagnosis indefinitely. Constitution is the thread which joins together all observations regarding the relative balance of the energetic relationships. The patient's CT may, therefore, guide the practitioner's intuition in interpreting diagnostic clues as the interview unfolds. Arriving at a constitutional diagnosis allows me to identify the virtues<sup>22</sup> that are trying to emerge spontaneously. In part, these virtues define specific inner changes which will occur as healing proceeds, thus allowing for the close monitoring of progress in treatment.

Having established a Five-element constitutional diagnosis, I then proceed to evaluate how the patient's physiology is expressing itself in relation to their CT. This is



done by comparing my observations of the pulse, tongue, and eyes with the dynamics of the constitutional diagnosis. I then proceed to formulate short-, intermediate- and long-term therapeutic goals.

The short-term goals usually involve achieving relative stability in the patient's life by first dealing with the most obvious aspects of habituated functioning. This may involve addressing obvious behaviors such as addictions (e.g., coffee, drugs, tobacco) or other self-destructive habits. In terms of the pulse, this means addressing the larger issues such as stability of Rhythm, Rate, and Intensity. I often think of this stage of treatment as taking a person out of "shock."<sup>23</sup> The primary strategy usually involves a direct focus on integrating the functioning of the yin and yang officials associated with the patient's CT. In terms of herbal treatment, this stage of therapy often involves administering formulas which are clarifying and stabilizing.<sup>24</sup>

As an intermediate and often secondary goal, I generally address the patient's main complaint. Of course this may be done simultaneously with the short-term plan at the beginning of treatment. Often, as habituated behavior decreases, there is more authentic energy (*zheng-qi*) available for healing. Thus, this phase of treatment generally involves harmonizing the functional dynamics of the constitutional officials with the other officials that are involved in the energetic pattern. For instance, if Lung (Metal) is primary and HP (Fire) is secondary, this stage of treatment might involve the harmonization of the balance between Metal and Fire across the Ke cycle. This stage of therapy often involves introducing herbal formulas which are constitutional in nature, in addition to formulas that are resolving or harmonizing.

My long-term strategy generally involves integrating the function of the constitutional organs with the functioning of the rest of the officials around the Ke and Sheng ("generating") cycles. Hence, if a person is constitutionally Metal, over time I

would integrate the function of the associated organ systems (LU and LI) with the element's Mother (Earth), Child (Water), Grandmother (Fire) and Grandchild (Wood) in an order appropriate to the functional dynamics of the situation. This stage of therapy often involves administering one or two long-term herbal formulas which are constitutional in nature.

Of course, these are only general considerations, and the merits of each individual case must be assessed. If there are signs of impending serious illness such as cancer or heart disease, then these may need to be addressed directly and aggressively in the initial stages of treatment. Furthermore, with occasional patients I sense that if they do not experience quick relief of a symptomatic nature, they may not return for further treatment. In such instances, constitutional points always serve as the basis for whatever local or symptomatic points I may treat.

#### *J. Treatment Schedule*

Generally, I see patients once each week for six to eight weeks. I find that this is enough time for people to have a sense that they are receiving benefit from the treatments. After that, I see the patient every other week, once every three weeks, and then monthly.

My goal is that each patient should derive sufficient benefit from treatment that they consider it worthwhile to continue coming at a rate of about every six to eight weeks. For most people, I consider the first six months to a year of treatment to be a time of "leveling the playing field." By the end of one year, most patients are receiving treatment at the longer intervals mentioned. Once progress has been made with the initial complaints and grosser levels of addictive behavior (tobacco, alcohol, etc.) have been removed to the degree possible, I find the opportunity arises to more directly pursue the preventive and evolutionary aspects of therapy offered by Chinese medicine.

Ultimately, I find that three years constitutes sufficient time for most patients to



achieve a deep lasting balance whereby the patient is not likely to again lose contact with his/her original nature,<sup>25</sup> regardless of the magnitude of challenging events in their life.

### **Restoration Toward Treatment**

Patients must be assessed and treated in the context of their own unique energetic expressions. The restoration of creative spontaneity, which is synonymous with health, springs forth from the practitioner's own spontaneity in treatment—the source of strength which lies at the heart of the inner tradition of Chinese medicine.

I have attended lectures by practitioners of primarily-somatic-oriented traditions where it is abundantly clear that the practitioner views acupuncture points as though they are buttons with predictable effects that may be pushed in order to cause certain results to happen. My clinical experience suggests that if one is treating primarily on a physical level that this can be true. However, the *Dao De Jing* (DDJ) tells us that the Sage does not impose his will on people; but rather, merely recognizes and utilizes the special functions of each individual.<sup>26</sup> If one's treatment is aimed at a deep level, focused on balancing emotional and spiritual function, then the specific actions of acupuncture points become less predictable.

Rather than pushing the patient in a specific direction with one's treatments, the practitioner must assess the "direction" that is trying to spontaneously emerge from the patient. It is as though the patient is walking down a path and the practitioner is always just around the next corner, beyond the patient's awareness. From the perspective of the inner tradition, it is the job of the practitioner to remove obstacles in the patient's path so that the patient's only awareness is that of moving with increasing effortlessness in the direction that is continually striving to manifest from within. Hence, with the best treatment the patient may not be able to attribute their specific progress to the practitioner from whom they receive treatment! This is in accord with the DDJ, which tells us

that the people are unaware of the presence of the highest type of ruler.<sup>27</sup>

## **II. Case Study**

**KH:** I have treated KH since April 1994. This presentation includes only the initial treatments in order to convey a glimpse of the manner in which I approach the essential components of her case.

*Sex/age:* Female, age 33

*Height:* 5'4" *Weight:* 144 lbs

*Reason for seeking treatment:* (a) Cervical carcinoma *in situ*; (b) concerns related to emotional stability

*Color:* Yellow

*Sound:* Singing<sup>28</sup>

*Odor:* Fragrant<sup>29</sup>

*Emotion:* Excess sympathy<sup>30</sup>

*Constitutional Type:* Primary: Earth (Spleen); secondary: Fire (Heart).

### **A. General Impression**

#### **1. First Telephone Communication**

The message left by KH on my answering machine was short, yet, her voice clearly had the "singing tone" associated with the Earth element. During our first conversation she informed me that she was scheduled for a cone biopsy following a positive Pap smear and punch biopsy. She was interested in knowing if acupuncture and herbs could help her avoid the procedure. I sensed that her voice reflected a degree of anxiety deeper than the immediate concern. I suggested that it would be best if she had the procedure and scheduled our initial appointment shortly afterward. I assured her that in addition to addressing her physical concerns that she could also look forward to generally feeling better with Chinese medicine. She seemed quite open to this suggestion and welcomed the reassurance. Her general openness was a positive sign.

#### **2. First Meeting**

Upon entering my office KH greeted me with a warm, welcoming smile. She was

dressed neatly and colorfully and wore several silver rings as well as an ankle bracelet. Very attractive, she appeared about 20 pounds overweight for her height. Her face and body were round and full, and her color was clearly yellow. Her odor was clearly "fragrant." The warmth and quality of her smile and overall energy were "enveloping," engendering a welcoming quality which gave the impression of a deep desire to both nurture and be nurtured. This tendency corresponds to the emotion of sympathy, which is associated with the Earth CT. [Note: Throughout the process of diagnosis, I freely associate with the names and functions of the acupoints which match the patient's momentary energy. In this instance, the names of SP-21 ("great enveloping") and ST-9 ("people welcome") came to mind.]

My initial impression, which was borne out throughout the diagnostic process, was that KH is an Earth constitutional type, specifically Spleen. This assessment was made based upon my observation of her CSOE which was yellow, singing, fragrant, and sympathy, respectively.

## **B. Highlights of Intake Interview**

### **1. General Background**

KH's parents were divorced when she was nine and she was raised by her mother. Upon mentioning the divorce she exhibited a rapid fluttering of her eyelids, which I associate with dissociation for reasons discussed in Part I (p. 46). This immediately alerted me to the possibility of problems, possibly "shock," related to her parent's divorce.

#### **a. Parents**

Father: She related very little information regarding her father's history except that he had developed psoriasis at age 20 while in the military service. As she responded, "he's in agony," her eyelids again exhibited rapid fluttering. At this point, her yellow color was vibrant and the singing tone in her voice changed to a monotone. (Both signs are associated with the Earth constitution.)

Impression: The flatness of her voice was present simultaneously with what appeared to me to be repressed anger and the lack of a "shouting" quality which is associated with Liver disharmony. This fluctuation suggests that the Earth element was under immediate stress in relation to the currently discussed material and that the Wood element might be overcontrolling Earth across the Ke cycle. The image of her father being in agony with an aggravating skin condition suggests that some inner emotional issue may be "eating away" at him. The pairing of the father's own agony with his daughter's repressed anger and its undermining effect on the stability of her Earth element suggested to me that, in some essential way, KH's relationship with her father was a key factor in her dysfunctional energetic dynamic.

Mother: Unspecified seizure disorder and angioedema

Impression: The responses regarding both parents' health are consistent with unbalanced function of their nervous systems. This suggests a genetic (and possibly karmic) background of nervous system disorder with which KH may be contending. (If there is a karmic component, KH has the possibility of resolving this issue in this lifetime, which would have direct bearing on the fulfillment of her own destiny.<sup>31</sup>)

#### **b. Marriage**

KH has been married for six years in what she describes as a "good" marriage. However, while answering this question she exhibited ambivalence, which I often associate with the relationship between the SI and SP officials.

Impression: When describing her marriage as "good," her ambivalence became apparent in a hesitancy in her voice, which seemed to resemble a question rather than a declaration. The presence of her ambivalence suggested several potentially important possibilities regarding her diagnosis: First, there was the possibility that emotional pain from her past may be affecting

her marriage in the present; and secondly, that her answer revealed a tendency to externally portray that things were all right when, in fact, they were not. This tendency to be "ingratiating" is a strong indicator of the Earth CT.<sup>32</sup> (This type of observation, essential to constitutional diagnosis, emphasizes the importance of discerning the differences between what the patient says [their story] and the energetic dynamics *underlying* their story [the theme].) At this point I chose not to further press KH on the nature of her marriage, preferring instead to allow the opportunity for this information to surface at her own pace during the interview.

#### c. Children

She responded that she did not have children and that this was a big question in her life. She indicated a concern that, because of her own psychological instability, she might not be a good mother. Further, she feared that the responsibilities of having a child might overwhelm her.

Impression: Her response indicates a good degree of awareness regarding the decision to have children and of the issues involved. (As discussed above, the degree of a patient's awareness of issues is indicative of the degree to which they may be given a positive prognosis.) Here, KH revealed the ability to be introspective, thoughtful, and honest with herself. KH's concern about her own needs relative to the needs of a child and about being a good mother, evokes imagery of an unbalanced Earth element. A sense of reciprocity, a virtue associated with the Earth element, must emerge between mother and child if the relationship is to nourish both parties healthfully.

#### d. Career

KH is employed in social services. She enjoys her work, the nature of which suggests a desire to assist and serve others (again, Earth element).

Impression: This is an example of how the constitutional theme of an individual's life often manifests in their chosen field of work.

## 2. Reasons for Seeking Treatment

### a. Cervical Carcinoma *in situ*

Following a positive pap smear several months prior, KH had undergone a cervical conization in which carcinoma *in situ* was excised.

She indicated that her menstrual cycle had begun at age 14 but lasted for one day only and that she became "so freaked out" [distressed] that it did not recur for another two years.

Impression: This finding suggests a strong link between her emotional state, emerging sexuality, and the vulnerability associated with Blood.<sup>33</sup> These functional relationships are of such import that a traumatic event in proximity to that time of her life is strongly suggested. Currently, her menstrual cycle was regular due to having been on the birth control pill since age 19 (14 years). However, prior to having taken the pill, her cycle had always been irregular. She still has some pain with cramping, and her menstrual blood is dark and clotted. She reported feeling "depressed and on edge" for one week before each period.

### b. Concerns Regarding Emotional Stability

KH reported that in 1991 she experienced a "complete break with reality," for which she had been hospitalized for one week. This occurred after using the nicotine patch method to quit smoking. Over four consecutive nights she developed nightmares and insomnia leading to hospitalization. She exhibited episodes of paranoia that included "imagining triangles of relationships with other people." Having been left by a previous boyfriend who had an affair with another woman, KH was constantly worried that her husband was in love with someone else and would eventually also leave her. This quality of worry is an extreme example of the obsessive thought which I associate with the Earth CT.

KH then indicated that eight years previously in 1986 she had also been hospitalized for cocaine addiction and alcoholism. Her cocaine use occurred over a period of

seven years; the final several years included its use three to four times weekly. During that time she also drank alcohol heavily. Upon ceasing the use of all substances simultaneously, KH experienced a severe withdrawal reaction. However, in an attempt to protect her father, who had been selling drugs to her, she neglected to mention her drug use to her physicians, who proceeded to diagnose her as psychotic and treat her accordingly. (Note: This is a classic example of the Earth constitution's tendency to take care of others instead of their own needs.) It was at this time that KH was able to admit to herself that she was an addict and thus began the process of recovery.

At the time of our interview, she had been drug free and sober for seven years. KH attributed her addictions to her attempt to avoid the pain involved with the relationship that had ended with such difficulty. However, the use of drugs and alcohol had begun *prior* to the relationship and it was my feeling that the emotional pain from the breakup was just another contributing factor to her habitual behavior.

### 3. Patterns of Function

a. *Sleep*: Fine now.

b. *Exercise*: Lifts weights and uses treadmill two to three days weekly.

c. *Energy*: "Average." High in the mornings and drops in the afternoon about 3pm.

d. *Appetite*: "My appetite is okay. I try to eat good food. Eating fruit in the morning helps my energy. I try to avoid eating protein and starch together. My digestion is all right now but has been bad historically."

e. *Cravings*: Pasta and sweets

f. *Bowels*: "My diet now helps but I tend toward constipation. In the past my bowels fluctuated between constipation and being loose."

#### g. *Surgeries*

1992: A swollen lymph node removed from her breast. She reports feeling ongoing breast tenderness. 1994: Cervical conization for carcinoma *in situ*.

### h. *Substance Use*

Coffee: 1 cup daily

Alcohol: Not for seven years.

Tobacco: Quit two years previously.

Recreational Drugs: Not for seven years

Medications: Birth control pill

### i. *Preferences*

Colors: Likes blue and purple, least favorite is yellow.

Seasons: Likes fall and winter

Q: *What would you like to see for yourself five years from now?*

A: "I want to feel at peace and feel connected to spirit." KH's awareness of her spiritual journey began during participation in "12 Step Programs" after her hospitalization for drug addiction. She has read *A Course in Miracles*,<sup>34</sup> a text frequently used in groups that focus on addictive behavior, as well as studies in Native American spiri-

tuality. (It is important to note that KH did not take this opportunity to mention her presenting symptomatic complaint of carcinoma *in situ*.)

### C. *Analysis of the Interview*

#### 1. Constitutional Analysis: Destiny & Virtue

My initial assessment of KH's CSOE was substantiated throughout the interview confirming her as being Earth, constitutionally. Other findings which are consistent with the manifestations of this assessment include: (a) Her high energy in the morning which is Earth time (Stomach: 7-9am, and Spleen: 9-11am) according to the Chinese clock, (b) poor digestion and fluctuating bowels indicating deficient Spleen Qi and a weak digestive system, (c) craving for the sweet flavor associated with the Earth CT, (d) dislike of the color yellow associated with the Earth CT, (e) insecurity regarding becoming a mother—a role which requires all of the virtues associated with the Earth element,<sup>35</sup> (f) dysplasia and carcinoma of the reproductive organs—the physical basis of reproduction and mothering which are associated with the Earth element, and (g)

mucus on the tongue suggesting deficient Spleen Qi.

Her unbalanced relationship to nurturing and sympathy was apparent in the dynamic that emerged during the interview. Each time I offered concern and support (for instance while discussing her symptoms, addictions, and hospitalizations) she would relax, becoming more grounded and centered as her worry momentarily subsided. However, the nurturing did not seem to have a lasting effect in shifting her energetic expression—a need for more sympathy and support—away from the energetic themes of the Earth element to which she continually returned.<sup>36</sup>

I was continually impressed by KH's empathy. She often seemed to be on the verge of tears, which gave me the sense of her desire to give and have others know how much she cares. Her need to take care of others was also evident in the apparent compassion she displayed for her father. It was as though she was suppressing her natural instincts toward anger in an attempt to take care of him instead of herself. This dynamic is inherent in the Earth constitutional type whose destiny it is to transform ingratiating behavior (evidence of a distortion of the virtue "sincerity") into the virtues of "sincerity" (*xin*) and "reciprocity" (*shu*), which manifest as the balanced relationship between fulfilling one's own needs and the needs of others.<sup>37</sup>

KH's tears were accompanied by a brightness in her eyes that suggested that she was overwhelmed by both the joy and pain in her heart. It is as if she was frustrated at never feeling sated in either giving or receiving nurturing and support. These qualities immediately call to mind several acupuncture points, a process which may aid in refining a diagnosis. Her quality of Earth neediness combined with her heart sorrow suggests the energetic dynamic contained in the entry/exit combination of SP-21 and HT-1.<sup>38</sup> The constant welling up of tears calls forth the image of ST-1 ("receive tears") and her display of and need for

sympathy conjures the energy of ST-9 ("people welcome").

As stated, the virtues associated with the Earth element are sincerity and reciprocity. It is my expectation that in the course of treatment KH will exhibit more of a balance in her ability to trust that her sincerity and heart are felt by others. Concurrently, she should manifest more of an ability to stay grounded and centered within herself, rather than constantly "spilling" out emotionally in the form of tears. Further, I expect that the virtue of reciprocity will emerge progressively strengthened as her need to give and receive constant support subsides.

## 2. The Issue of Betrayal

Throughout the interview there were numerous signs of betrayal (see below) which suggested to me that KH may have been a victim of incest involving her father. Having noted these, I chose to wait until I could evaluate the pulse for consistent signs before broaching the subject. As also detailed below, the pulse itself reflected a great deal of instability as well as other qualities, which further suggested that she had received an emotional shock of great magnitude. At an appropriate moment during the pulse exam, I quietly asked her if she had ever been sexually abused. Tears welled up in her eyes as she revealed several episodes of incest with her father beginning when she was 14 years old. Though clearly upset, she was unable to express anger; however, she clearly needed to be comforted. As described above, she displayed compassion for her father even when tearfully discussing the pain of incest.

The following findings, when taken together, alerted me to the possibility of betrayal as an etiologic factor.

The dissociation evidenced by the rapid flickering of KH's eyes when discussing both her parent's divorce and her father's skin condition provided my initial clue that she had received a substantial shock to her emotional Heart (see Part I, p. 46). The dy-

namic between her suppression of anger and the instability of her CT (Earth) was strongly present while discussing her father's skin condition. This indicated to me that perhaps her relationship with him was of primary importance in her energetic imbalance.

The fact that her father was supplying her with cocaine and her subsequent attempt to protect him during her hospitalization for withdrawal is objective evidence of the dysfunctional nature of this relationship.

KH's hesitancy in stating that her marriage was good, along with her obsessive fears that her husband will leave her, suggest that perhaps habitual patterns from the past are preventing her from having a fulfilling relationship in the moment. Though it is true that she had been hurt in a previous relationship, it is my assessment that her pattern of behavior and emotional instability predated that particular incident.

Her addictive behaviors began during her mid-teens, strongly suggesting that at that time she was already struggling to avoid some great emotional pain.

Particularly telling is the fact that at age 14 she became so emotionally disturbed at starting her menstrual period that it did not return for another two years. From the perspective of Chinese medicine, one can only wonder what sort of energetic insult could contribute to this dysfunction. It is my assessment that the intensity of this suppression in regards to both her sexuality and the function of the associated organ systems has progressed directly to her current symptom of carcinoma *in situ*. This may be seen as a direct correlate of damage to the spiritual aspect of Blood (a Congealed Blood pattern), which can occur as a result of betrayal (see Part I, page 47). That the quality of her Blood was compromised is also suggested by the presence of dark, clotted menstrual blood and the finding of the engorged purple veins under her tongue (see D below).

The presence of Congealed Blood may be viewed as a separation of one's self from pain which is too threatening to integrate

into one's conscious awareness. I believe that the "complete break with reality" experienced by KH when she quit smoking represented a "turning point" and the beginning of being able to integrate the emotional material regarding her experience of incest.<sup>39</sup> As discussed below, my findings on the pulse further confirmed my suspicion of "shock" related to betrayal.

#### **D. Pulse Diagnosis and General Physical Considerations<sup>40</sup>**

**Tongue:** Her tongue showed a bit of mucus. The veins underneath were purple and engorged.

**Pulse:** I begin by taking the pulse on all six positions simultaneously. This allows me to quietly orient myself to the larger picture on the pulse while creating an atmosphere of stillness in the room.

##### **1. General Pulse Findings**

**Rate (BPM):** Beginning: 75; End: 70; with movement: 72

The overall quality of her pulse showed continuous changes in Intensity, Rate, and Amplitude. This finding indicates a condition of "chaos" predicated on compromised Heart and attendant circulatory function. The Heart is the monarch which presides over one's inner kingdom. Instability of the magnitude found on KH may indicate that Heart function is compromised to the extent that there is little foundation for stability in the other organ systems. I interpret this finding as a response to emotional and/or physical shock.<sup>41</sup> In view of my constitutional assessment, I suspect that a focus of this energetic imbalance lies in the functional relationship between the Spleen and Heart officials.

The Qi depth of the entire pulse was Tense, indicating the presence of a Nervous System Tense condition. This condition is predicated upon a heightened sense of vigilance. Its presence suggests that there may be factors in KH's past that cause her to habitually respond to life as though she were in danger. Further, the entire pulse revealed

a Hesitant quality, indicating a tendency toward obsessive thought and worry.

## 2. Individual Positions

Upper Jiao: (a) Both distal positions exhibited Inflated and Tense qualities, suggesting that Qi and Heat have stagnated and were trapped in her Upper Jiao. Upon questioning she revealed that, in fact, she did experience tightness in her throat. In my mind I immediately associated this stagnation with her frustration, difficulty communicating, breast tenderness, neediness, and the function of the acupuncture point ST-9 ("people welcome"). This also suggested the possible application of the herbal formula Pinellia and Magnolia (Ban Xia Hou Po), which circulates the Qi in the chest, helps to remove frustration, and can empower appropriate communication of one's needs in a similar way to ST-9.<sup>42</sup>

b) The left Neuropsychological pulse was present, indicating involvement of the *shen* as it manifests through the function of the nervous system.

c) The right distal position exhibited a Vibration at all depths, indicating compromised function of the Lungs. This finding was supported by the presence of the Special Lung pulse, bilaterally. These pulses manifested with a Tight quality and Vibration, indicating yin deficiency of the Lungs and compromised organ function.

Between Upper and Middle Jiao: The Diaphragm pulse was present bilaterally, suggesting that the painful conclusion of her previous relationship was still negatively affecting her. Additionally, this finding indicated that separation may still be an issue in her present relationship. Again, the herb formula Pinellia and Magnolia came to mind as an ideal way to clear this stagnation.<sup>43</sup> Further, the entry/exit combinations of LV-14 and LU-1, and SP-21 and HT-1 offered an ideal way to move the Stagnant Qi through the chest.

Middle Jiao: Both middle positions exhibited an overall *change in qualities*, which indicates that the Middle Jiao as a whole

was experiencing great disharmony, perhaps predicated on the separation of yin and yang in the involved organ systems; in this case, the Liver and Spleen. These positions particularly showed changes from Tight (yin deficiency) to Spreading (Qi deficiency) to Empty (indicating a severe deficiency of True [Zhen] Qi).<sup>44</sup>

Lower Jiao: (a) Both proximal positions exhibited Tight and Pounding qualities, suggesting yin deficiency resulting from overwork of the nervous system and from the Kidney being overtaxed in her system's attempt to overcome stagnation. Hence, the excess Heat generated from overwork and overstimulation had produced a condition of yin deficiency.

b) Both the Large and Small Intestine positions are Tight and exhibited a Biting quality which, together, indicate yin deficiency, stagnation, and/or possibly pain.

c) The Pelvis and Lower body position was present and Tense, bilaterally, indicating the stagnation upon which her gynecological problems are likely predicated.

## 3. Interpretation of Pulse

The most significant pulse finding in need of immediate attention was that of chaos. This, I believe, was predicated upon an emotional shock stemming from the betrayal by incest which affected the stability of her Heart (official) function. Further, it is likely that the habitual use of cocaine also greatly contributed to the instability on her pulse.

The presence of the Neuropsychological pulse suggested an involvement of Heart *shen*. Additionally, the presence of the Hesitant quality on her pulse indicated excessive, compulsive thought and worry which, to me, implicates the involvement of not only Heart *shen*, but also of the *yi* (thought, ideation), which is the *shen* of the Spleen and the emissary of the Heart spirit as it is present in that organ. In this case, the emotional shock to the Heart exacerbated the functional weakness in the constitutional organ—Spleen.



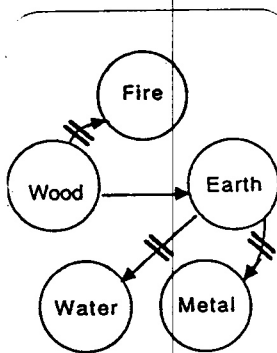


Figure 1.

The double bars in this depiction of KH's Five-element energetic configuration indicate pathways of restricted energy flow. Her weak Earth does not provide an adequate center and the functioning of all the Elements and Organ systems suffer. The Metal element is not empowered in its function of "letting go," which exhibits as constant mental vigilance, constipation, and failure to grieve and move past the loss of her previous relationship. The Earth also fails to control the Water element across the Ke cycle, which manifests as constant fear and anxiety as the nervous system overworks. Due to an insubstantial Earth element, the Liver does not support the function and stability of the Heart, but instead attacks the Spleen across the Ke cycle. This manifests as poor digestion and a constant knot and burning in the area from CV-12 to CV-16. Finally (not depicted), the Spleen (the twelfth meridian) is not nourishing the Heart, which is the first meridian (and the next meridian after the Spleen) in the direction of qi flow according to the Chinese clock.<sup>45</sup>

Another fundamental contributing factor to the chaos in KH's life was the imbalance exhibited in the Middle Jiao. This condition of unraveling yin and yang suggested that the dysfunction in the Middle Jiao was an "energetic hole" that was depleting the entire system of True Qi. This finding was consistent with the constitutional diagnosis of Spleen. Little stability was afforded by the Earth element whose function is to empower a sense of being "grounded" and "centered" in all aspects of being. Further, with Liver function so compromised, the virtues of vision, planning, and self esteem had been eroded. Since Spleen (Earth) is KH's CT, it was imperative to focus on balancing its function and re-establishing harmony with the functions of

both the Liver (thus closing the "hole" in the Middle Jiao) and the Heart.

The presence of chaos on KH's pulse, the effects of drug use, emotional instability, and her inability to feel secure in her present relationship due to habitual reaction to past emotional pain, provided strong confirmation that the shock of sexual abuse was an etiological factor contributing to the imbalance in her energetic configuration. It was, therefore, important to clear the shock regarding this issue in her life so that a foundation of stable energy could be established. In this way, her emotional pain could be confronted directly so that this issue could be healed and so that it no longer dictates her patterns of dysfunction.

### E. Therapeutic Strategy

The emerging overall picture indicated that the Spleen was not fulfilling its task of nourishing, grounding, and creating a strong physical and emotional center. In turn, the weak Earth was not supporting the function of the Liver, which constantly invaded the Earth in a desperate attempt to "put down roots" and stop the physical and emotional erosion that was occurring. Further, the function of the Heart was not being supported by either the creative energy of the Wood element or by the nourishing functions of the Spleen (see Figure 1). In light of this diagnosis, the primary therapeutic strategy was to first stabilize the function of the organ systems (Spleen, Heart and Liver) responsible for this situation. Improvement in the overall stability of the pulse would be a strong indication that stability of the organ systems was being restored.

Toward this end, I recommended discontinuation of the birth control pills, which I consider to have a significant detrimental impact on women's health. Additionally, I had KH wean herself from coffee, which tends to overstimulate the nervous system and undermine the functions of the Heart, Liver and Kidneys. Finally, I suggested restricting the intake of dairy products, which cause excessive Dampness and were, I be-



level, contributing to her overall Damp condition as reflected by the tongue mucus, digestive problems, excess weight, and obsessive thoughts.

### 1. Suggestions and Imagery

a) Self Esteem: KH's fear that her husband could leave her at any time was partially based on her low self esteem. The fact that she had been previously hurt by a man who had "dumped" her indicates that her past experience is currently limiting her ability to be spontaneous and to assess her new relationship on its own merits. Energetically, the connection between Wood and Earth across the Ke cycle was relevant here. The Wood was not appropriately controlling the Earth. Her constant state of worry may be likened to the erosion of Earth that was being washed away, leaving no solid ground beneath her feet. For the same reason that one might plant trees on a hillside so that their roots might inhibit this erosion, one may strengthen the Wood Element, specifically Liver function, so that it may appropriately control the Earth element across the Ke cycle. Additionally, strengthening the weak Earth element may create sufficient grounding to anchor the tree and to keep it from continually "falling over" in the face of adversity.

In this regard, KH's self esteem was also supported in treatment by using images associated with point functions that are congruent with this message.

b) Facing Death: KH's fear of her husband leaving the relationship may be interpreted as representing a death of her self image and ego.<sup>46</sup> (When applicable, in this regard, it can be useful to remind patients that, in fact, they have lived through worse before.) It was essential to point out to KH that her interpretation of the event was "made up" and, therefore, had no actual basis in "reality." I worked with her regarding this material by taking her through a series of mental exercises. Her fear of being "left for another woman" was based on her interpretation that if her husband did leave

her it would have confirmed her poor self image, and the fact that she was indeed not enough for him.

Over the course of treatment, I continually pointed out when she was making interpretations which undermined her inner stability. I suggested an alternative interpretation of the possibility of her husband leaving—"if he leaves, he doesn't deserve a woman as beautiful and loving as she is. If he leaves, it's his own fault for failing to value and be nurtured by her."

After making this suggestion the atmosphere in the room became very still. KH had been brought to a state of mind in which she could not interpret the incoming data in a way consistent with previous experience. This represents a significant moment of potential receptivity and offers the practitioner an excellent opportunity to remain silent and to reinforce the suggestion and state of openness with the specific acupoints that have been chosen.

### 2. Herbal Treatment

Short Term: My first strategy was to harmonize the overall condition of chaos and to mend the energetic imbalance in the Middle Jiao. With regard to establishing stability on the pulse, I initially prescribed Yunnan Paiyao to ease the shock to her Heart, Heart Protector and circulatory system that were impacted by the sexual abuse.

Long Term: With regard to balancing the functional relationships between the Liver and Spleen, I prescribed Xiao Yao Wan (XYW: Bupleurum sedative pills). Gui Pi Wan (GPW: Restore Spleen pill) was also prescribed to nurture the relationship between the Spleen and Heart. These two formulas were continued for three months. After that time I discontinued the XYW and replaced the GPW with "Gather Vitality," which is a much more potent form of the same formula.<sup>47</sup> Note that GPW addresses both Spleen Qi deficiency, a source of the imbalance in the Middle Jiao, and nourishes the Heart Blood. On a psychospiritual level this formula is greatly "centering" and ad-

dresses the overall dynamic between the Spleen and Heart discussed in my evaluation above. I consider this formula to be similar in function to the point combination of SP-21 and HT-1.<sup>48</sup>

### 3. Acupuncture

#### *Session 1*

Points: Check for "Aggressive energy,"<sup>49</sup> SP-3, LV-3, HT-7

KH showed no signs of the presence of Aggressive energy. I chose the three Earth and Source points to assist in gently grounding her and helping to establish an initial balance of the officials most involved in her energetic dynamic.

Herbs: Yunnan Paiyao; dose: one pill, three times daily

#### *Session 2*

Report from last session: KH felt generally relaxed after the first session.

Points: ST-36, SP-4, LI-11, HP-6. The Earth point on the Stomach meridian was treated in conjunction with the Luo point on the Spleen meridian. Together, these points were chosen to assist in integrating the functions of the Earth officials in order to continue supporting the constitutional basis of the imbalance and heal the source of the imbalance in the Middle Jiao. Acupoint LI-11 was chosen as the Earth point on the meridian, which is the "Child" of the CT.<sup>50</sup> According to traditional Chinese medicine, one function of this point is to clear Blood Heat, which was found to be generally present in the pulse diagnosis. Additionally, this point may empower the Large Intestine to eliminate stagnation resulting from "undigested" past experience. Symptomatically, this could help ease her complaint of constipation and possibly also her throat blockage, which may be viewed as resulting from undelivered communications harbored from the past.

Heart Protector-6 was treated to bring energy into her Heart and to support the process of relaxing the tightness in her chest. Note that HP-6 and SP-4 are also the Mas-

ter and Couple points of the Chong Mai. Together, these points are deeply nourishing to the womb and Heart, and are quite grounding in nature.

#### *Session 3*

Report from last session: Again, KH mentioned feeling relaxed and "centered" after the session. She noted that a skin outbreak from Poison Sumac, which had been bothering her, had cleared up immediately following that treatment. In this regard, note that LI-11 is an ideal point for draining Heat from the Blood.

Points: ST-40, 8; SP-4, 6; HT-7. With this selection, I continued to support the integration of the functions of KH's constitutional organ systems, the Stomach and the Spleen. Acupoint ST-40 ("abundant splendor") was needled with several intentions. As the name indicates, this can be a primary point for helping one to feel supported and nourished by life. As the Luo point, ST-40 drains Dampness, which in this case may be interpreted as an accumulation resulting from that which should have been transformed into nourishment—instead, becoming a burden. KH's Dampness manifested as the burden of excess weight, as well as worry. Stomach-8 ("head tied") was paired with ST-40 and was treated as a local point to assist in easing KH's mental constraint. I have found ST-8 to be an excellent point for someone whose mind is "tied in knots," constrained by excessive thought. By needling Luo points SP-4 and ST-40 simultaneously, the functions of these two officials may be brought into balance with each other. Spleen-6 was treated here as a reunion point of the Spleen, Liver and Kidney officials.

#### *Session 4*

Report from last session: Again, KH reported feeling well for one day after the session. She noted that her moods were fluctuating up and down, as opposed to remaining down as they had before. This indicated to me that the function of the Earth was stabilizing. I expected that, as the Earth continued to grow more substantially, KH

moods would stabilize at a generally healthier and happier level.

Points: SP-4, HP-6, K-16, CV-14, LV-3

Herbs: GPW and XYW; dose: 8 pills each, three times daily

Again, SP-4 and HP-6 were treated to open up the Chong Mai. This time, however, I channeled this energy through K-16 up to CV-14—both points for nourishing Heart function.<sup>51</sup> I find the pairing of these four points to be extremely potent for this purpose.

#### *Session 5*

Report from last session: KH reported that her energy was increasing, digestion was improving, and cravings for sweets were subsiding. These results may, in part, be attributed to the function of the herbal formulas. I have found that GPW can be quite helpful in treating cravings for sweets for those who are Earth and Fire, constitutionally.

Points: ST-42, SP-3, HP-7. The Source points were chosen on the meridians of her CT. Thus, the functions of the HP and SP were joined along the Sheng cycle by needling the Earth point on each meridian. This was a gentle treatment in which the intention was to continue to establish the connection between the Mother (Fire) of the CT and her Child (Earth).

#### *Session 6*

Report from last session: KH returned complaining of tension in her chest with an intense "stabbing" pain directly behind her heart and between her shoulder blades, which prevented her from taking a deep breath. She also reported that she had begun perspiring, which was unusual for her, even with strenuous activity.

This session represented the turning point in KH's healing. I associated the pain that she felt in her chest and between her shoulder blades with her Heart. Our efforts in removing the stagnation and strengthening the Middle Jiao were beginning to pay off. Her pain indicated to me that her Heart was struggling as it was being "asked" to

open and begin addressing the past pain that had been suppressed.

Points: BL-14, 43/38,<sup>52</sup> SP-2 and HP-8

Bladder-14, the Shu point of the HP, was treated in conjunction with BL-43, which supports the spirit level function of the HP. This combination of points was chosen to support the continued opening of the HP and ease the tension between the shoulders and in the diaphragm. Heart Protector-8 ("palace of weariness") was treated as a distal point to ground BL-14 and BL-43. As the Fire point on the HP, it is particularly capable of strengthening and stabilizing a weary Heart. Spleen-2, the Fire point on the constitutional meridian of the Spleen, was treated in conjunction with HP-8 to continue integrating the function of these officials.

#### *Session 7*

Report from last session: KH indicated that she felt less tension and pain in her chest and between her shoulder blades and, therefore, that her "Heart had improved." This was validated by increased stability on the pulse, indicating that the condition of chaos was beginning to subside. Still, she reported having pain between her shoulder blades radiating up her neck. She also reported having a sore throat. In retrospect, considering the following two treatments and their results, her sore throat could be taken to indicate that her Liver was discharging as she was becoming increasingly empowered to speak her inner truth.

Points: GV-10, 11; HT-8, SP-2, BL-20, 21

Governor-10 and 11 were treated as points which bring perspective to the Heart. These points align the function of the Heart with the Governor Vessel, the central axis of yang in the body, and itself aligned with the center of centers, the North Star.<sup>53</sup> Here, SP-2, the Fire point on the constitutional meridian of the Spleen, was treated in conjunction with HT-8 in a continued effort to integrate the functioning of these two officials. Bladder-20 and 21 are the Shu points for the SP and ST, associated with KH's CT.

As powerful reserves of energy, these points were treated in order to ground and support the function of their associated organs. Typically, I treat Shu points after I feel the basic functioning of an organ system has been integrated and stabilized using distal points.

After inserting the needles, I left KH with the image of bringing her heart up into a tower so that it could gain perspective. This visualization is consistent with the discussions on the functions of GV-10 and GV-11 given above and in Part II of this article.

### Session 8

Report from last session: KH felt very relaxed after the last treatment and reported that her "Heart pain" was gone. However, she also felt very "emotional" and reported this with tears welling up in her eyes. KH also reported feeling pain in her lower back from gardening.

Points: ST-9, 42 ; BL-10, 54 ; GV-3

While KH's pulse continued to indicate increased stability, the distal positions, bilaterally (corresponding to the Heart [left] and Lung [right] officials), manifested an Inflated and Tense quality. The bilateral presence of these qualities indicated that Qi and Heat were trapped in the Upper Jiao. Very often, this finding is associated with throat tightness, suggesting that constraint is inhibiting the communication of emotionally significant material.<sup>54</sup>

In this regard, I have treated ST-9 ("people welcome") in conjunction with the meridian's Source point, ST-42, in order to provide grounding. Stomach-9, as the "window of the sky" on the ST meridian, is a point that provides access to the deepest spiritual dimensions of the ST official's realm of function. I often use this point to empower the patient to communicate their needs appropriately, always a key issue for the Earth CT. This point is ideal for someone who has been ingratiating, always trying to please people. However, every time they take care of another person they swallow a

little bit of resentment until, finally, they've "had it up to here" (often the patient will gesture toward their throat while stating this). Additionally, for someone who is overly "self-sufficient," this point may empower them to bring others into their "process."<sup>55</sup>

Having treated the preceding points on the front of the body, which corresponds to yin, I then pair these with points on the back, corresponding to yang. These points were treated to empower KH's resolve, allowing her to access deep levels of spiritual strength. Bladder-10 ("heavenly pillar") is the "window of the sky" on the Bladder meridian. Located at the top of the trapezius muscle,<sup>56</sup> this point may empower one to access a deep source of inner strength. I grounded this point with BL-40/54 (*Weizhong*: "equilibrium middle"), the Earth point on the Bladder meridian. This point allows the Earth element to control the Water element across the Ke cycle. The function of this point may be considered as being energetically similar to bringing earth to a river that is overflowing its banks. This may serve as a metaphor for the Earth element providing the inner stability needed to control the fear associated with the Water element. This function is underscored by the location of this point behind the knee (in the middle of the crease within the popliteal fossa) which is a fundamental joint for providing balance and stability to the body.<sup>57</sup>

Finally, acupoint GV-3 is treated to enhance the effectiveness of BL-10 and 40 by strengthening the lower back. I occasionally use these three points together to empower the patient to "stand up for themselves."

After needling the points, I then wait for an indication that the patient has reached a moment of receptivity as indicated by positive changes in breathing, color, sound, odor, emotion, pulse and other general indicators of relaxation. It is then that I deliver the specific suggestion that I want the patient to receive. In this case I suggested that this treatment would put her in

touch with a deep reserve of spiritual energy and strength that would empower her to speak the truth and communicate her needs appropriately to others.

#### Session 9

Report from last session: KH reported that she had decided to confront her father for having sexually abused her when she was younger. She would soon be with him at a family gathering and had enlisted the help of her sisters to be present for emotional support. Note that here she is manifesting the virtues of self expression and inner strength addressed by the previous treatment. The recruitment of her sisters is evidence of the empowerment enabled by treatment of ST-9 (see above). She was understandably nervous and quite emotional about the upcoming discussion.

Points: ST-36; LI-10, 17; CV-22

Herbs: Women's Palace<sup>58</sup>

Stomach-36 and LI-10 are both Earth points on their respective meridians. The two points were treated to empower the integration of these functions and to support KH in letting go of that which no longer serves her. I consider LI-17 to be quite similar in function to a "window of the sky" point. I associate the function of this point (*tianting*: "heavenly vessel") with the energetic contained in *Yi-jing* (*I Ching*) hexagram No. 50 (*ting*: cauldron).<sup>59</sup> This point may empower the pristine clarity that comes from letting go of the old in order to receive the new.

Note also that, whereas the Earth element may be said to be associated with the Mother through the umbilical connection, the Metal element is associated with the Father (Heaven) through the breath and Lungs. Finally, CV-22 (*tiantu*: "heaven rushing out") is needled as the window of the sky on the CV. Located at the throat center, this point may empower communication "centered" by the CV, the central axis of yin in the microcosm. In this session I prescribed the Jade Pharmacy herbal formula Women's Palace to assist in helping to clear out the

past residue of betrayal manifested as dysplasia and general stagnation in the uterus.

Report: KH returned for the following session after having confronted her father. She reported having found a "centered place" and that, although there were a lot of tears, he had been open to hearing what she had to say. She had felt a tremendous reserve of strength from the last session and reported that the knot that she had felt in her stomach (CV-12 to CV-16) was completely gone.

#### F. Discussion

As a result of these sessions, KH found she was able to unleash what was for her a profound undelivered communication—confronting her father for having sexually abused her. She was able to stand up for her needs and take care of herself rather than stifling her own expression due to being overly sympathetic toward the feelings of others. Hence, the virtues of the Earth element, sincerity and reciprocity, have become increasingly established as her habitual behavior has subsided.

In the year since the last of the sessions reported above, KH has begun successful counseling with her husband and had two negative Pap tests, further indicating no evidence of the carcinoma *in situ*. Additionally, her Heart function is increasingly stable and she has not reported any tension or stabbing pains in her chest for the last year.

In her most recent session she reported "feeling on the fence about needing to forgive her father." This was stated with sadness and judgment against herself for "being stuck" and not being able to move on in life. I suggested that forgiveness is not a finality, but rather a process, and that throughout her life she will encounter deeper levels of forgiveness. A feeling of "being stuck" is her interpretation of the emotion that arises each time she is about to encounter a new level of forgiveness.<sup>60</sup> Often, patients interpret the re-emergence of old feelings and emotional material as not having made progress in treatment or in their lives. It is

important to help direct their attention to the reality that, in fact, they have made progress and are currently reaching a deeper level of understanding.<sup>61</sup>

The treatments in Sessions 7 and 8 demonstrate a very important principle regarding the role of the practitioner's knowledge and intention, and the function of acupuncture points. In Session 7 the points GV-10 and GV-11 might have been treated by a practitioner of any tradition to alleviate the pain that KH was feeling between her shoulder blades. In Session 8, ST-9 and ST-42 could similarly have been treated solely for relieving "tightness" in her throat and her digestive complaints. In the same session, BL-54, BL-10 and GV-3 could have been treated just for her lower back and neck pain. Certainly, when I choose these points I am taking the physical aspects of the patient's condition into consideration. However, due to the familiarity with the broader scope of these acupoint functions, it was possible to direct the patient's awareness to the inner virtues empowered by the points selected and to monitor her progress in manifesting these virtues during treatment.

### G. Conclusion

*I suggest that if a practitioner's awareness is confined to the physical aspects of point function, then many opportunities for supporting the patient's deeper process of healing may be missed.* Although patients treated in the former manner may report "improvement," there may be no discernment or acknowledgment of the quality and direction of this feeling. Therefore, one of the most significant opportunities for healing afforded by the inner aspects of Chinese medicine lies in the practitioner's capacity for guiding the patient to comprehend the functional relationships between their physical complaints with their unbalanced thoughts, attitudes and belief systems. As this connection is firmly reinforced, a process of healing may commence, which embraces all aspects of personal expression.

### Endnotes

1. See Jarrett LS: V, VI and VII. I will also address the notion of my concept of the "inner tradition" in a future issue of this journal.
2. This view is contained in the introduction to the three sections of the *Shen Nong Ben Cao*.
3. The style and principles of diagnosis discussed here are based upon those taught at the Traditional Acupuncture Institute (TAI) in Columbia, Maryland (USA). I elaborate this information as it is consistent with my own style and clinical experience.
4. A goal which is central to my practice is promoting the patient's ability to know what lies in their own heart. There is always a quality of objectivity that is available when the patient is receptive to input from a practitioner who has been empowered to guide one's process of healing. Knowing one's self is not mutually exclusive of receiving direction from others regardless of the degree of conscious awareness that one has obtained.
5. It is important to note that many people are not aware that Chinese medicine is capable of addressing deeper issues. Therefore, if a patient is solely focusing on physical issues during the intake, I often inform him that Chinese medicine is capable of addressing many aspects of function which affect health and ask if there are any non-physical issues that they wish to address in treatment.
6. Through a multitude of diagnostic procedures, the practitioner may, of course, monitor the progression of the patient's symptoms in many ways less explicit than directly asking about them. On the other hand, it can be equally important to direct a patient's attention to the subtle ways that their symptoms are improving. The practitioner needs to direct their own attention toward striking a reasonable balance between these two approaches.
7. Liver function is associated with planning and Gallbladder function with decision making. As Emperor, the Heart is responsible for clear insight and the performance of ritual (being in the right place at the right time).
8. Generally this is divided as follows: 35 minutes to gather information verbally, 40 minutes for the pulse diagnosis, and 15 minutes to explain my findings and answer questions.
9. Inability to sustain eye contact may be indicative of the existence of "shock" which has disintegrated the balanced functioning of the Fire officials, thus disturbing the delicate balance of the Heart's shen and ling spirits. This observation, along with other signs of chaos, may also be indicative of "possession." (see Part II, p. 149, Endnote 12)
10. A patient who clings to the practitioner's hand may be manifesting a Fire imbalance. Note

that "flaming" is the translation of the *Yi-jing* program for Fire.

According to the Five-element tradition of JR Worsley, the color observed in this region is one of the pillars of constitutional diagnosis along with the patient's sound, odor, emotion and pulses (CSOE).

Ultimately, the patient must be conscious of the fact that they are in the office of their own volition having extended their own initiative in asking for help. Only occasionally do patients seem especially uncomfortable with particular questions regarding their personal life. Most people seem pleased that I take the time to discuss their concerns with them. However, the nature of the material that a patient wishes not to discuss may be as revealing as any answer they might have given.

13. Here, I use the term "divorce" to signify that a long-term relationship to which the partner had made a major commitment has ended.
14. It is as though the patient is haunted by ghosts of regret and indecision, which keep the patient awake. I have found GB-44, the Metal point on the GB meridian, to be ideal for this type of insomnia. The Metal within Wood may empower the Wood to "let go," thus, empowering the healthy balanced control of Metal over the Wood element.
15. It is as though the patient is like a plant that is constrained and being choked by its own roots. In this regard I have found the classic point for insomnia, SP-1, to be most useful. As the Wood point on an Earth meridian, SP-1 may help to re-establish a balanced relationship between the Wood and Earth elements. Its effect may be likened to taking a root-bound plant and transplanting it into a larger pot so that it may thrive. My interpretation of this point's inner function was gleaned from a set of old lecture notes that were attributed to JR Worsley. Generally, when using SP-1 in this fashion I pair it with ST-43 (Wood point) and ST-8, whose name may be translated as "head tied" for one who is bound by their own thoughts.
16. I find that the menstrual cycle provides a type of "outlet valve" that may allow women to express pent up feelings on a regular basis so that they do not accumulate. I have seen PMS completely disappear in women after merely suggesting that their feelings of anger or frustration were real and should be attended to, rather than being dismissed as "just being PMS." In general, I think that the outlet provided by a women's menstrual cycle tends to make them more emotionally healthy than men. Compare, for instance, a woman who becomes emotional once each month for a few days with a seemingly "emotionally stable" man who may be diagnosed by their physician to be "in good health." For lack of an outlet, however, the man may eventually go into a sudden rage that appears to "come from nowhere."

17. See Parts I and II of this article.
18. Of course, being unaware of one's own behavior is a hallmark indicator of habitual patterns of behavior.
19. The pulse may afford the practitioner with an opportunity to receive immediate feedback from specific officials and organ systems pertaining to the quality of the question and the patient's response. The ability to extract this information from the pulse is a diagnostic skill that I hope to elaborate in future writing.
20. On occasion, practitioners of other traditions have expressed their concern about intervening at the level that I access in treatment when a patient has only come for a sore shoulder. In this regard, I clearly explain to each patient what my view of their condition is, and what treatment will entail. Hence, each patient has a clear view of the agreement that they are making when receiving treatment. I must also emphasize my belief that patients often know what they want and not what they need. If they knew what they needed, and had the will to take the appropriate actions, they would most likely be well and not be seeking treatment.
21. The process of diagnosis all too often involves compiling long lists of observations, which are then categorized according to the limited theories of a diagnostic system. This is often done at the expense of creativity, the cultivation of intuition, and trust in one's own "knowing." It occurs to me that this is perhaps rooted in modern models of standardized education based upon an analytic, causative thought process. Generally, I find that my practice of Chinese medicine proceeds best according to a delicate balance of theory and intuition.
22. Each of the Five elemental constitutional types has an associated "virtue," which emerges spontaneously as a result of the balanced functioning of each given element. The five virtues are wisdom (*zhi*), benevolence (*jen*), propriety (*li*), sincerity (*xin*), and justice (*yi*), which are associated with the elements of Water, Wood, Fire, Earth and Metal, respectively. For a discussion of the virtues as they pertain to constitutional type see: Jarrett LS: VI.
23. "Shock" is defined here as habituated behavior that keeps a person from self discovery.
24. See Part II (pp. 132-134) which covers herbal therapy utilizing Yunnan Paiyao, Meridian Passage and Sheng Mai San in this regard.
25. Original nature (*de*) is the virtue imparted to each individual at the moment of conception as it is present in the *yuan-qi* and *jing*. According to the inner tradition, a major component of illness may be a consequence of having lost touch with one's original nature. For further discussion, see Jarrett LS: II-XI.
26. My interpretation of the meaning of *DDJ*, ch 28.
27. *DDJ*, ch 17.



28. "Singing" may be heard in the voice as a modulation of tone which occurs regularly between low and high frequencies.
29. Patients are advised not to wear perfume or cologne to their sessions in order to facilitate diagnosis by their odor.
30. The Five-element associations of color, sound, odor and emotion for the various constitutional types are summarized below:

	Color	Sound	Odor	Emotion
Water	Blue	Groan	Putrid	Fear
Wood	Green	Shout	Rancid	Anger
Fire	Red	Laugh	Scorched	Joy
Earth	Yellow	Singing	Fragrant	Sympathy
Metal	White	Weeping	Rotten	Grief

31. See Endnote 12 on "karma" in Part I, p.48.
32. Jarrett LS: VI, p.151.
33. For a discussion of Blood and vulnerability, see: Part I, p.47; and Part II, pp.126, 130-133.
34. Foundation for Inner Peace: *A Course in Miracles*, Huntington Station, NY, 1975.
35. See Jarrett LS: VI.
36. A hallmark of one's CT is the form of energetic expression to which one habitually returns. During the interview the practitioner may interact with the patient in a way that brings each of the emotions [to the] present. This may allow him to assess the ease with which the patient is able to transition through each form of elemental expression. During this interview, KH moved fairly easily through the expression of the other four elements. However, she continually returned to the theme of exhibiting an excessive need to give and receive sympathy.
37. The virtues associated with the Five constitutional types are discussed at length in Jarrett LS: VI.
38. See Jarrett LS: VIII.
39. The concept of the "turning point" and its importance to health, healing and the fulfillment of destiny is discussed in Jarrett LS: VII.
40. My analysis of the pulse represents my own synthesis of 15 years of experience in the Worsley Five-element system of *Nan-Jing* pulse diagnosis and eight years of study with Dr. Leon Hammer (LH). Though much of my pulse nomenclature is taken from Dr. Hammer, my specific interpretation of pulse qualities often occurs within the context of constitutional diagnosis and does not necessarily correspond to the LH associations of these qualities in all cases. I encourage all readers to procure a copy of Dr. Hammer's much anticipated text tentatively entitled, *Contemporary Chinese Pulse Diagnosis*, scheduled for release in early 1996.
41. This interpretation of "chaos" and the importance of stabilizing the pulse is consistent with

the teachings of both the Traditional Acupuncture Institute in Columbia, Maryland, and Leon Hammer. For a discussion of "chaos" and the importance of establishing stability on the pulse, see Hammer L: I and II.

42. Leon Hammer taught me the use of this formula in the context of pulse diagnosis. The psychospiritual use of this formula and its connection to the function of ST-9 are from my own clinical experience.
43. From my studies with Leon Hammer.
44. For a discussion of pulse diagnosis and the separation of yin and yang, see Jarrett LS: VII.
45. The order of the meridians is according to Worsley, see Jarrett LS: VIII.
46. Jarrett LS: VII, p.37.
47. Jade Pharmacy, Eugene, Oregon, USA.
48. Jarrett LS: VIII, pp.21-22.
49. According to the teachings of the Traditional Acupuncture Institute (TAI), Columbia, Maryland, Aggressive energy (AE) is Qi that attacks organs following the Ke cycle. This is in contradistinction to healthy Qi that travels in the Sheng cycle. Its presence is indicative of energetic toxicity which, if left untreated, can form the basis of serious illness. Aggressive energy is "drained" through superficial needling of the yin Shu points. If present, AE often manifests as a dark red circle on the skin around the acupuncture needle in the Shu point corresponding to the effected organ. The needles are generally retained until the redness disappears, indicating that the AE has been drained.
50. The term "Child" refers to the next element in the Sheng cycle whose function is dependent upon the nourishment from the "Mother" element that proceeds it.
51. The use of K-16 as an acupoint which nourishes the Heart is taught by Leon Hammer. In my experience I have found this to be an ideal point for empowering communication between the Kidney and Heart; and often use it as a central focus of treatments aimed at balancing the functional relationships of these two organs.
52. BL-43 is designated as BL-38 according to the numbering scheme taught at the TAI.
53. Jarrett LS: II p.47 and III p.22.
54. I often treat these qualities and this condition with the herb formula Pinellia and Magnolia, which excels at circulating the Qi of the chest. From my studies with Leon Hammer.
55. See Jarrett LS: VI for a discussion of these issues as they relate to the Earth CT.
56. The trapezius muscle may be thought of as the "pillar which holds up the head (heaven)." See Part II, p.146.
57. Note that, in English, calling someone "weak kneed" is another way of saying that they are a coward.



■ See Part II p.149 (Endnote 26) for a discussion of this formula.

■ Wilhelm R: p 193.

■ Note that a virtue associated with the Earth element is the ability to move easily through transitions. This is reflected in some Five-element charts which place Earth as the transition point between each of the other four elements. Hence, "being stuck" is a typical interpretation to which Earth constitutional persons are prone. The process of "being stuck" may be interpreted as the Stomach and Spleen not performing their functions of transformation.

61. After a cycle of treatment (generally one year), patients often feel that they have gone "in a circle" and are back where they started, having made no progress. In fact, life never goes in a circle but in an upward evolutionary spiral. In this scenario the patient is reconnecting with constitutional life issues, but at a deeper level of integration. I always interpret this transition as indicating that a new level of balance and health is about to be achieved. Generally, the period of feeling that one has not progressed passes within a few days of onset. A well chosen acupuncture treatment is usually quite successful at ushering the patient through this transition. Note that this phenomena is an example of a "turning point" in healing and evolution in the sense discussed in my previous article on the subject. See Jarrett LS: VII.

### Bibliography

Hammer L (I): Contemporary pulse diagnosis: New perspectives on reviving an ancient art—Part I. *Amer J Acupun*, 1993; 21(2): 123-140.

Hammer L (II): Contemporary pulse diagnosis: Pulse taking method—Part II. *Amer J Acupun*, 1993; 21(3): 219-236.

Jarrett LS (II): Myth & meaning in Chinese medicine, *Trad Acupun Soc J (UK)*, 1992; No. 11, April.

Jarrett LS (III): The returned spirit (*gui ling*) of traditional Chinese medicine. *Trad Acupun Soc J (UK)*, No. 12, Oct, 1992.

Jarrett LS (IV): The role of human will (*zhi*), and the spirit of Bladder-52 (*zhi shi*). *Amer J Acupun*, 1992; 20(4): 349-359.

Jarrett LS (V): Constitutional type and the internal tradition of Chinese medicine: The ontogeny of life, Part I. *Amer J Acupun*, 1993; 21(1): 19-32.

Jarrett LS (VI): Constitutional type and the internal tradition of Chinese medicine: The ever present cause, Part II. *Amer J Acupun*, 1993; 21(2): 141-158.

Jarrett LS (VII): The loss and return of original nature: The law of husband/wife. *Amer J Acupun*, 1994; 22(1): 29-45.

Jarrett LS (VIII): The use of entry and exit points in traditional acupuncture. *J Nat'l Acad Acup & Oriental Med*, 1994; 1(1): 19-30.

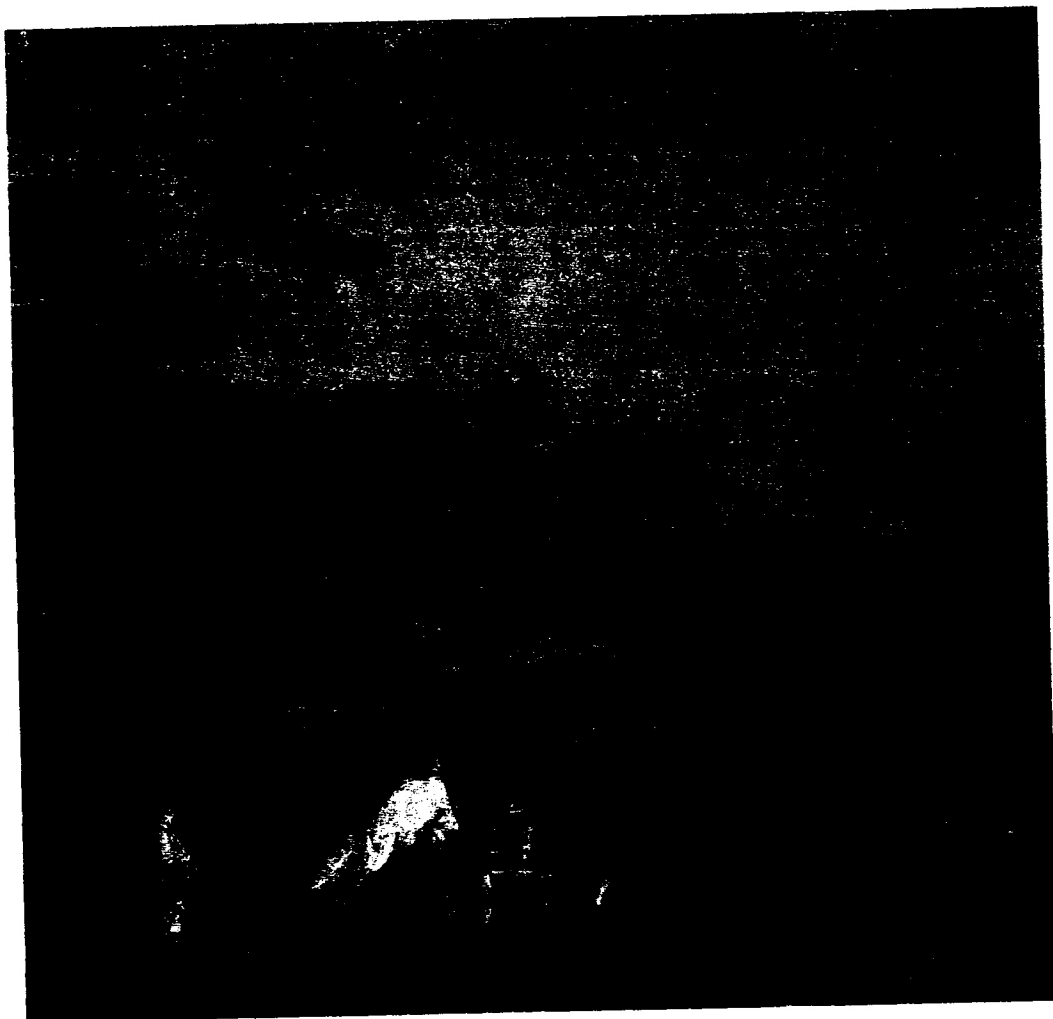
Jarrett LS (IX): Chinese medicine and the betrayal of intimacy: The theory and treatment of abuse, incest, rape and divorce with acupuncture and herbs, Part I. *Amer J Acupun*, 1995; 23(1): pp 35-51.

Jarrett LS (X): Chinese medicine and the betrayal of intimacy: The theory and treatment of abuse, incest, rape and divorce with acupuncture and herbs, Part II. *Amer J Acupun*, 1995; 23(2): pp 123-151.

Jarrett LS (XI): Niu Huang Qing Xin Wan, *Kanpo News Letter*, Summer/Fall 1995. (In press)

Wilhelm R: *The I-Ching or Book of Changes*, Princeton University Press, Princeton NJ, 1968.

Worsley JR: *Traditional Chinese Acupuncture, Volume 1, Meridians and Points*. Element Books, Ltd, Tisbury (UK), 1982. □



A SCHOLAR AND HIS SERVANT ON A TERRACE

*Ma Yuan (1190-1230)*

*Album leaf. Ink and light colors on silk, 9.75 x 10.25 inches. CC Wang Collection, New York*