

# Oriental Medicine

SUMMER 2015

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## Pacific Symposium 2015

For nearly 30 years, the globally recognized Pacific Symposium has been an interactive environment for brilliant minds of the Eastern medical profession to learn from innovators in the field. This annual event opens the way for the exchange of industry information by bringing together acupuncture practitioners, massage therapists, students, and professors.

Set in a beautiful retreat setting at the Catamaran Resort and Spa in San Diego, California, Pacific Symposium guarantees an array of speakers at the cutting edge of the integrative health community. At this year's conference, experts including Jill Blakeway, Elisabeth Ro-chat de la Vallée, Jeffrey Yuen, Mazin al-Khafaji, Mark Kastner, and Kiiko Matsumoto will present seminars and lead interactive workshops covering a broad array of today's Oriental medicine topics. With such an impressive lineup of speakers, there will be something to satisfy everyone's interests. As the conference's keynote speaker, Michael Tierra will capture the essence of Pacific Symposium and highlight the practice of Planetary Herbology, which synthesizes Western, Eastern, and Ayurvedic herbal traditions into an integrated whole. **OM**



See Inside For More Details

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## Can Acupuncture Really Benefit Stroke Recovery?

By **MING QING ZHU**, LAc, OMD (China) and **MOYEE SIU**, LAc, MTCM

The World Health Organization estimates that 15 million individuals suffer from stroke annually worldwide, most of whom live in developed countries, where hypertension, hypercholesterolemia and cardiac diseases are prevalent. Stroke is the third leading cause of fatality and ranks highest as a cause of disability.<sup>1</sup>

Western medicine has made some advances in the treatment of strokes, including the use of Tissue Plasminogen Activator (tPA) and intracranial angioplasty. However, these procedures are not indicated for or accessible to all stroke patients. Despite receiving tPA in the recommended window, 58% of patients still die or end up with severe disabilities.<sup>2</sup>

Typical post-stroke care in the USA starts with seven days of hospital stay followed by one to two weeks of physical therapy, occupational therapy and speech therapy in a rehabilitation facility. After three or more weeks of outpatient rehabilitation, the treatment comes to an end,

but the patient's recovery is far from complete. In one study<sup>3</sup> on ischemic stroke survivors who were at least 65 years of age, the following disabilities were observed six months after stroke:

- 50% had some hemiparesis
- 30% were unable to walk without some assistance
- 26% were dependent in activities of daily living
- 19% had aphasia
- 26% were institutionalized in a nursing home

Obviously, there is a lot of room for improvement in standard stroke protocol.

### CAN ACUPUNCTURE REALLY BENEFIT STROKE PATIENTS?

Many people have asked this question. Our answer is a definite "yes", but recent western research and meta-analyses make the claim that there is no clear evidence for the additional value of acupuncture for post-stroke rehabilitation.<sup>4,5</sup>

continued on page 28

### INSIDE THIS ISSUE....

- 3 Think About the "Chin Point"
- 4 Post-Earthquake Benefits for Nepal
- 4 Naomi C. Broering Hispanic Heritage Award/Grant
- 5 Alumni Award 2015
- 5 Graduation 2015
- 6 The Science of Medicinal Mushrooms
- 7 Jing 精 Essence
- 8 A Practitioner's Guide to Longevity Medicine for Women
- 10 The Art of Practice – 6 Simple Ways to Spice Up Your Practice
- 11 Classical Medicine for Treating Male Sexual Disorders
- 13 What Is Sympathy: Reflections on Si Jun Zi Tang
- 17 Pacific Symposium 2015
- 26 Wind Of The Four Crooks

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# Think About the “Chin Point”

By KIIKO MATSUMOTO, LAc and MONIKA KOBYLECKA, LAc

In the United States, as many as 50-70% of kids wear braces; many adults also use these and other orthodontic devices. Requests to take pressure off a painful or tight TMJ are all too common in our practices. While wearing enamel-protecting night guards shields the teeth from damage, it does little to reduce pain in the jaw. In kids, braces may serve as a corrective measure but they often come with a price of discomfort or even migraines.

Tightness and pain on the TMJ contributes to problems beyond the local area. There is a strong connection between pressure on the jaw and frontal lobe activity. A 2015 United Kingdom study from Cardiff University showed that the best way to remove a song that is stuck in your head, also known as an earworm, is by chewing gum<sup>1</sup>. Serge Obyper conducted a study at St. Lawrence University that showed that chewing gum before a test improved test scores<sup>2</sup>. These and other studies suggest that the jaw may be a key to accessing certain functions of the brain. It may also provide a clue as to why we often press our hand or finger up to the chin when deep in thought – Rodin's sculpture *The Thinker* is a good example.

## CHIN – “MENTAL AREA” AND REN MAI

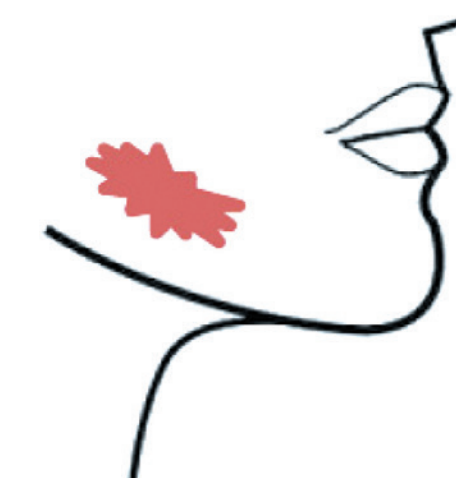
In anatomy texts, the chin is often called the “mental area.” In the Chinese Medicine Classics, the Ren Mai is described in Su Wen chapter 60 as moving up above the neck, to the chin, then to the cheeks, before it travels up to the eyes (brain). Approximately 500 years later the Nan Ching writer, commenting on the Ren Mai in chapter 28, decides to omit the six Chinese characters that previously, in Su Wen, described the pathway of the Ren Mai above the neck. This is a calculated omission and one that is very bold for this period of time. It is possible that the reason for this brave move is that the author of Nan Ching chapter 28 considered the Ren Mai above the neck to be completely separate from the main line of the Ren Mai. In other words, the pathway from the chin and up to the brain served a different function than the main Ren Mai structure.

## CLINICAL OBSERVATIONS

The structure of the jaw, dental procedures, and orthodontic procedures can all have a negative impact on the TMJ. Many patients present with pressure pain on the area of St6-7, which serves as a good reflex area for these problems. Consider checking it in patients that:

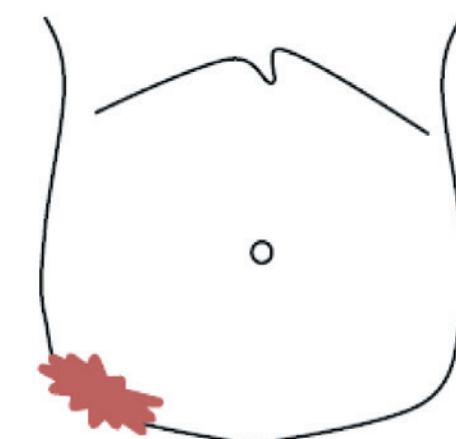
\* These and other studies suggest that the jaw may be a key to accessing certain functions of the brain. *It may also provide a clue as to why we often press our hand or finger up to the chin when deep in thought – Rodin's sculpture The Thinker is a good example.*

- Complain of jaw tension
- Wear braces or have a history of orthodontic procedures
- Have had surgery to restructure their jaw alignment
- Have an overbite
- Have a very narrow jaw structure with a pointed chin
- Have depression and possibly other emotional problems associated with the frontal lobe
- Have head injuries to the front of the head (as well as contra coup areas)



You will find that many of these patients present with pressure pain in the St6-7 area, usually more on one side than the other. You may also find that in these patients there is tightness in the following areas:

- One side SCM
- Behind GB21 area (TMJ point)
- ASIS pressure pain – especially if one side is worse than the other
- Shoulder problems affecting one side



In all of the above mentioned cases, the “chin point” can produce very good results. Needle it in the exact location that reduces pressure pain on the St6-7 area. Usually the best needle direction is upward, toward Du20. This point will reduce the pressure exerted on the jaw. When pressure pain is reduced or eliminated from the reflex at the St6-7 area, there is often a more systemic effect as well. Using the “chin point” produces a balancing effect on the horizontal/vertical aspects of the body and works well in cases where there are structural symptoms asymmetrically affecting one side more than the other, such as shoulder pain, jaw pain on one side, and ASIS imbalance.

## CLINICAL EXAMPLE

A journalist in his forties came to the clinic with the chief complaint of insomnia and headaches. He also suffered from a lot of tightness in his shoulders. His stressful job and constant last minute deadlines had put a lot of pressure on him and his sleep was severely affected. He had been taking the sleeping pills his doctor had prescribed for a while, but was noticing decreasing effectiveness over time. He had been having trouble with his sleep for so long that by the time he reached age 40, he looked more like someone a decade older. The headaches were tied to the lack of sleep. He also reported that when he did fall asleep, he would grind his

teeth so much that it disturbed his wife's sleep.

On examination, he presented with a very rapid pulse and an overall sympathetic type presentation. The St6-7 area was extremely painful and he had a lot of pain on Du20, with heat coming off the area when touched. He reported that he often felt like his “head was too hot to allow him to sleep.”

Since he had strong pressure pain and heat in the area of Du20, the first treatment approach tested was “oket-su in the head.”<sup>3</sup> When tested, this combination of points only produced about a twenty percent change in the pain on Du20 and little change in the St6-7 area. However, pressing on the “chin point” significantly reduced pressure pain in the St6-7 area and almost immediately made the patient say “That's it! I love this point.” After leaving the patient in the room for 10-15 minutes, the patient was asleep on the treatment table.

In a follow-up treatment, the patient reported improvement in his sleep. He continued to wear a night guard because he was still grinding his teeth, but the pain on Du20, the heat on top of his head, shoulder tightness, and headaches were all reduced. In follow-up treatments, additional points were incorporated (adrenal treatments, TH5, and so on) to reduce his sympathetic dominance, but the “chin point” continued to produce the greatest change of the reflexes and created the most dramatic shift in his symptoms. **OM**

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2. Onyper SV, Carr TL, Farrar JS, Floyd BR. Cognitive advantages of chewing gum. Now you see them, now you don't. *Appetite*. 2011 Oct;57(2):321-8.
3. For more information on this treatment strategy and diagnosis, see *Kiiko Matsumoto's Clinical Strategies, Vol. 1 & 2*.

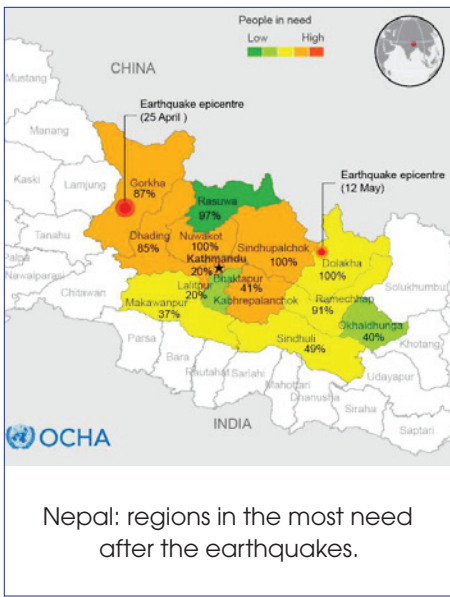
**KIIKO MATSUMOTO** is internationally known for her scholarly work on acupuncture and the interpretation of Chinese Classic texts. She is best known for her ability to integrate the work of very important Japanese Masters, including Master Nagano, Master Kawaii, and Dr. Manaka. Ms. Matsumoto practices in Newton Highlands, MA and teaches all over the world. She is currently collaborating with Monika Kobylecka, LAc on a clinical textbook that describes Ms. Matsumoto's latest work. In addition to this collaboration, Ms. Kobylecka practices Kiiko Matsumoto Style (KMS) acupuncture at Children's Hospital Los Angeles (CHLA) and teaches hands-on introductory classes in KMS acupuncture.



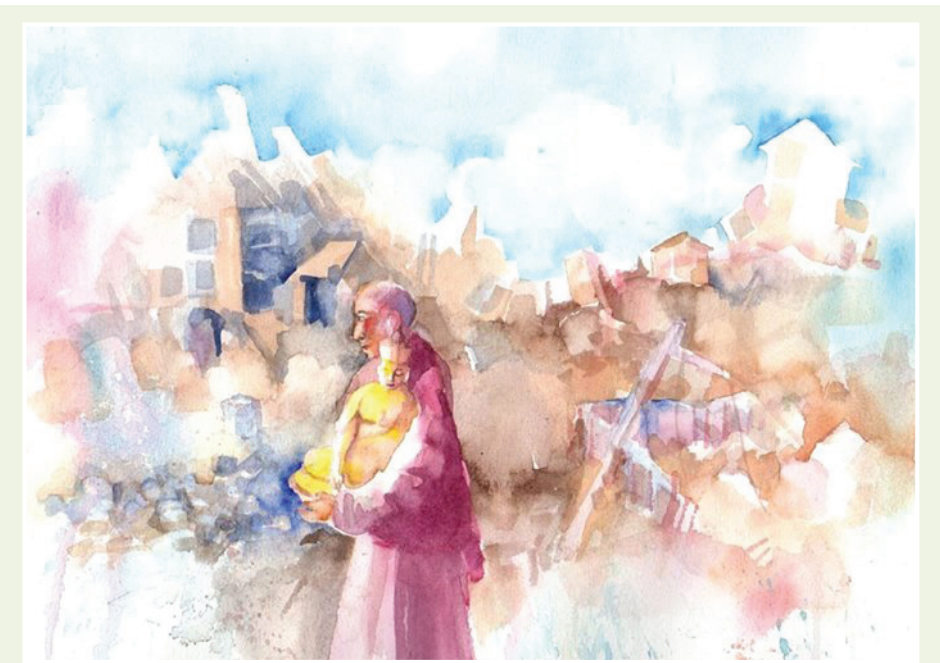
# Post-Earthquake Benefits for Nepal

On April 25, 2015, a massive, magnitude 7.8 earthquake near Kathmandu demolished vast regions of the small Himalayan nation of Nepal. Nearly 9,000 people were killed and hundreds of thousands were left without shelter in the worst natural disaster to hit the nation in nearly a century. More than 20 people were killed on Mount Everest itself, marking the deadliest day ever for the mountain. The earthquake struck with such force that the entirety of Mount Everest actually moved over an inch southwest in a matter of seconds. A 7.3 aftershock struck on May 12, compounding the damage.

On May 28th, Pacific College of Oriental Medicine's Chicago campus collaborated with the Chicago-based Himalaya Project (<http://www.himalaya-project.org>) for a benefit to raise disaster relief funds for Karuna-Shechen, a trusted international non-governmental organization working to provide disaster relief in Nepal. Himalaya Project is a Chicago-based non-profit organization consisting of volunteer board members who seek



to provide education and public health to an entire district of Nepal. Himalaya Project seeks to preserve Tibetan Buddhism, its culture, and its medical practices. In its usual line of work, the project seeks to directly benefit the under-served district of Dolpo by providing a 5-year school for Tibetan medicine and, in the process, keep its medical traditions from being lost.



A monk saving the altar statue from his temple, the rubble of his village in the background. Watercolor, by Honora Lee Wolfe.

The fundraising event included acupuncture and bodywork provided by PCOM faculty and alumni and Nepali momos (dumplings) provided by Curry House. The central feature, however, was the Nepali Bazaar sale with Buddhist art, Tibetan incense, books about Nepal, and one of Honora Lee Wolfe's beautiful watercolor paintings.

In total we raised \$2500, all going directly to Karuna-Shechen. As of early June, Karuna-Shechen had reached and helped nearly 150,000 people in 375 villages spread across a dozen of the most affected districts, in particular focusing on those areas not being helped by other INGOs due to their isolation. The organization also put in place a special program for pregnant women and new mothers, providing iron, calcium, and vitamin B supplements in addition to normal food rations. On behalf of Himalaya Project, Pacific College of Oriental Medicine-

Chicago, and Karuna-Shechen, thank you to all who attended, donated, volunteered and participated.

The Himalaya Project is, of course, not the only organization providing relief to Nepal: another is Acupuncturists Without Borders (<http://acuwithoutborders.org>), which is currently providing trauma relief support in Kathmandu and surrounding areas with a team of volunteer acupuncturists. AWB is also sponsoring a World Healing Exchange to Nepal in October, which will give US practitioners an opportunity to support AWB's Nepali partners and clinics, who will continue to need help far into the future.

Resources are still needed: Nepal is still only beginning to recover from this catastrophe. For more information about donating to the Himalaya Project or AWB, visit: <http://www.himalaya-project.org>, <http://acuwithoutborders.org>. **OM**



# Naomi C. Broering Hispanic Heritage Award/Grant

On May 18, 2015, Naomi C. Broering, PCOM's Dean of Libraries, endowed the Medical Library Association's (MLA) first Hispanic heritage award at the annual MLA conference in Austin, Texas. Named the Naomi C. Broering Hispanic Heritage Award, the award honors and recognizes her past accomplishments in medical librarianship and library informatics. Naomi has a long interest in medical informatics and knowledge management, having been the first recipient

of the National Library of Medicine's Integrated Advanced Information Management Systems grant to integrate information.

In celebration of her more than 45 years as a member of the MLA, Naomi and her husband, Gregory A. Chauncey, endowed the award as a grant. Hereafter, the Broering Hispanic Heritage Grant will award \$1,000 annually to a person of Hispanic or Latino ethnicity who wants to pursue a professional development/research activity in the areas of medical infor-

matics and/or data management, to encourage librarians to gain knowledge about these important areas of practice and support MLA's emphasis on evolving roles for the profession.

Naomi, who is approaching her fifteenth year as Dean of Libraries at Pacific College of Oriental Medicine, teaches information literacy classes to PCOM masters and doctoral students in addition to managing a vibrant, digital, high-tech library. In addition to managing the San Diego campus library, she coordinates the New York

and Chicago campus libraries and maintains the library webpage, online tutorials, and digital resources.

Naomi is a distinguished Fellow of MLA and the American College of Medical Informatics. She served as Chair of the MLA Consumer Health Section in 2007-8, is active in the MLA Complementary Medicine Section, and has received the Frank Bradley Rogers information advancement award, the Special

continued on page 38







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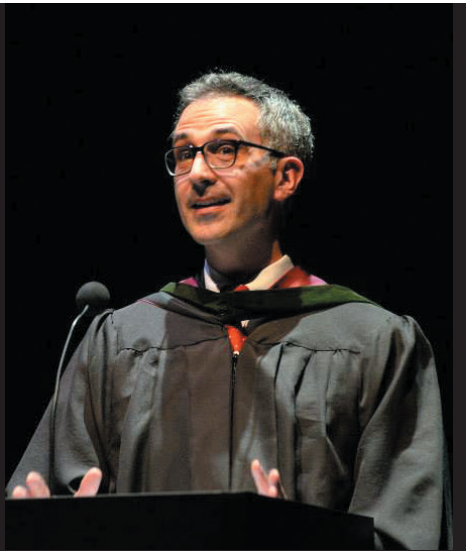
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## GRADUATION 2015

Congratulations to the students graduating in 2015 and to their families. PCOM is honored to have worked with our students, and we look forward to many more years with them as our graduates join the PCOM Alumni network and family.



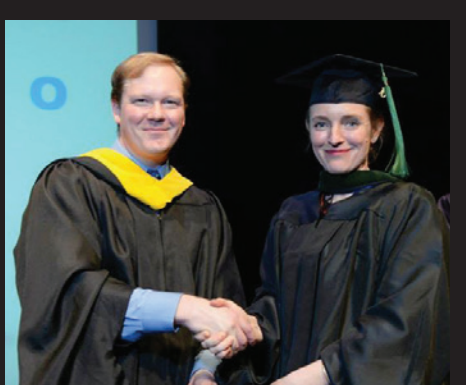
# Alumni Award 2015



We know that our alumni are increasing the recognition of acupuncture and Oriental medicine and we want to award you for it! One of the advancements we are seeing in both Western medicine and Chinese Medicine is the movement towards INTERPROFES-SIONAL COMMUNICATION.

Pacific College of Oriental Medicine is working with the Academic Consortium for Complementary and Alternative Health Care (ACCAHC) to inform our community of the trends and advancements in healthcare. Inter-professional Communication is one of the six competencies that have been identified as key components to moving our medicine forward. For more information on these competencies, visit [www.accahc.org](http://www.accahc.org).

The application deadline has passed and all applicants are under consideration. The winners will be announced and honored at Pacific Symposium 2015! Good luck to all! **OM**





# The Science of Medicinal Mushrooms

By ANDREW GAEDDERT

### WHAT ARE MEDICINAL MUSHROOMS?

Medicinal mushrooms are fungal organisms that are used in traditional Chinese Medicine, nutritional supplements and drugs. It is estimated that China is responsible for 70 percent of the world's mushroom production. Shiitake cultivation is reported to have begun in China in the 12th century. It is estimated that the worldwide market was \$18 billion in 2014. As more medicinal mushrooms come to market it is becoming increasingly important for practitioners to utilize effective products and learn to differentiate between the types of medicinal mushroom products on the market for the health of their patients. There are three distinct parts to a medicinal mushroom: the mycelium, which accumulates food and energy to produce a mushroom; the mushroom itself, or fruiting body; and lastly, the spores the mushroom produces.

### WHAT ARE THE ACTIVE COMPONENTS OF MEDICINAL MUSHROOMS?

There are a number of compounds that are believed to be important in the clinical use of mushrooms. These compounds can be identified and analyzed for reasons of efficacy and quality control. These compounds include polysaccharides, which are generally thought of as biological response modifiers. They activate macrophages, NK cells, and T-cells. It is thought that these compounds might offer protection against cancer cells, as well as viral, bacterial, and fungal infections. Another component common to many medicinal mushrooms

is triterpenoids, which have been researched in Ganoderma (*reishi*) and chaga, a medicinal mushroom used in Russia. In Ganoderma, triterpenoids are responsible for the bitter taste as well as the liver protecting, lipid lowering, antioxidant and anti-inflammatory properties. They also inhibit the release of histamine, which may explain Ganoderma's anti-allergic activity (see food allergy product/research). Ergosterol, a triterpenoid, has been discovered to have antitumor and antioxidant properties (Chilton 12). Ergosterol is also a precursor to vitamin D, as exposure to UV light converts ergosterol to vitamin D2. Certain medicinal mushrooms may also have nucleosides, enzymes, beta glucans, chitin and naturally occurring statins.

### WHAT TYPES OF PRODUCTS ARE ON THE MARKET?

There are three main types of products currently available: whole mushrooms, mycelium, and spores. Most of the research in China and Japan has focused on extracts of whole mushrooms. Some products involve complex extractions of whole mushrooms, whereas others involve a traditional decoction, which is then rendered into a concentrated powder. These are typically used in tablet or capsule form in order to concentrate certain compounds. Mycelium and spore products do not have the same level of data.

There are also tinctures or liquid extracts on the market. There is a concern that certain mushroom components such as polysaccharides are insoluble in alcohol and also a concern that these products may not have sufficient strength for clinical improvement.

### HOW CAN HIGH-QUALITY PRODUCTS BE IDENTIFIED?

In general, quality products are available as concentrated powder made from the whole mushroom. The terms 3:1, 10:1, and 100:1 have very little meaning for mushroom quality control. The level of active components, careful species identification and processing is what actually yields results. Whereas some of the cheapest products may contain mostly starch, quality products usually contain active compounds that are assayed in the laboratory. For example, polysaccharides, triterpenoids and ergosterol can be evaluated by high performance liquid chromatography (HPLC).

### WHAT ARE THE MOST USEFUL MEDICINAL MUSHROOMS IN CLINICAL PRACTICE?

The most useful and unique are Ganoderma (*ling zhi*), Turkey Tail (*Coriolus, yun zhi*), and Cordyceps (*dong chong xia cao*).

**Ganoderma**  
**Scientific Name:** Ganoderma lucidum  
**Chinese Name:** Ling zhi  
**Clinically Effective Dosage:** 10-30g/day in decoction; 1-6g/day in powdered extract

I first learned about Ganoderma over 30 years ago. At that time there were "miracle" stories out of Japan claiming that it was a possible cancer cure. As a result, these miracle cases may have stimulated an increase in Chinese and Japanese research. I have found that Ganoderma is can help patients with under- and overactive immune systems. It is useful for a wide range of immune-mediated conditions, including chronic fatigue

syndrome, allergies, fibromyalgia syndrome, and as an adjunct to cancer therapies when adequate dosage is administered. The Pharmacopeia of the PRC lists Ganoderma as effective for dizziness, insomnia, palpitations, and shortness of breath, cough and asthma.

Ganoderma is best used in the context of a TCM treatment plan. It is important to make sure genuine red Ganoderma (Ganoderma lucidum) is used, as other species such as black Ganoderma (Ganoderma japonicum), have not been as well researched. Very little research has been conducted on mycelium and spore products. Ganoderma can be added to a TCM formula or prepared with other medicinal mushrooms and administered alongside TCM formulas. The typical dosage is 10-30g per day in decoction or 1-6g per day in a powdered extract.

**Cordyceps**  
**Scientific Name:** Cordyceps sinensis  
**Chinese Name:** Dong chong xia cao  
**Clinically Effective Dosage:** 2-4g/day of extract in pill form

Cordyceps is also known as caterpillar fungus. The traditional preparation of this fungus, which is grown on the larvae of caterpillars and is considered endangered, currently costs thousands of dollars per kilogram. Chinese farmers have cultivated this fungus on silkworm and purple corn. Products are made by selecting microorganisms from Cordyceps and concentrating them in the laboratory. Cordyceps enters the liver and kidney meridians and

continued on page 35



Ganoderma lucidum



Ganoderma japonicum

# JING 精 ESSENCE

## A Brief Attempt at Elucidation of a Key Notion in Chinese Medicine

By ELISABETH ROCHAT de la VALLÉE

### THE CHARACTER

On the left hand side of the character for essence, *jing*, 精, we find the grain of rice or husked seed, 米, ready to be ground, kneaded and cooked. On the right, a green color is added, 青, *qing*. This is the green of young growing plants, 生, fed by rich sap; its life's fluid, 丹, like the blood of human beings. *Qing*, 青, is the color that symbolizes the strength of human internal vitality that spreads to the furthest external parts. Husked seed, 米, also appears in the character for *qi*, 氣, depicting the release of vapor, 气, that results from cooking grain. *Jing*, 精, stresses the vitality that results from this same act of cooking. The character *jing*, 精, is used to describe husked grain that makes flour of the finest kind. It contrasts with whole grain, *cu*, 粗, which makes coarse flour. It is a gruel made from very pure rice, which would be something Confucius would enjoy, since one who nourishes oneself thus maintains life as a human being with the expected level of quality and purity.

### CLASSICAL MEANINGS

*Jing*, 精, signifies what is purified, subtle, fine, excellent: the elite, the flower of quintessence, clarity (of spirit). It denotes things without artifice—the clever, the experienced, intelligent, penetrating—to concentrate upon. It is the Spirit (of a person) and the sperm. These meanings give the impression of a pure and powerful vitality expressed both in mind and body. Essence is the subtlest of all substances, in that it represents vitality as animation, like the soul or the spirit. It is also the vitality of substances that enables them to transform. It forms the basic fabric, the raw material that makes bringing life to beings possible.

When it is associated with Heaven, essence forms the subtlety of animation, the power that organizes all life and enables form to begin on Earth. It is the seminal pattern that controls everything that takes form and maintains it, its permanent reconstruction. When essence is associated with Earth, it represents the vitality in substances that enable them to ceaselessly transform, that is to say, to live. The term is so similar to the concept of spirit, *shen*, 神, that the two terms are not only used together as vital spirit, *jing shen*, 精神, but also sometimes as substitutes for one another.



### THE MEDICAL USE

Essence, *jing*, 精, always refers to the concentration or composition of substance. It is *qi* in concentrated form, analogous to the yin movement of condensate that forms the Earth. An embryo in the womb begins from this yin movement. This act of concentration is both mutual penetration, intertwining, interlocking, and the composition of substances endowed with the most vital form that comes from a father and mother (sperm and blood).

Essence is the raw material required to organize the composition of life. It contains specific qualities (like the seed of a tree) that come from Earth (such as genetic factors, the quality of the father and mother's essences) but also from Heaven. The vital *qi* of Heaven arrives at a given moment upon this particular composition of essences, allowing a new life to start and determining its specific nature; it is the Anterior Heaven essence.

Essence is stored by the Kidneys to ensure their quality and to make it possible to produce and reproduce life, enabling it to grow and develop according to its initial model. With authentic yin, *zhen yin*, 真陰, essence

spirit, perspicacity, and intelligence will also be at its height; their brain function perfectly and they develop their spirit and their mental power. If they continue increasingly to refine their essence through internal or external alchemical processes, it becomes the elixir of life, the cinabar, *dan*, 丹, that opens the path to immortality.

### ESSENCE AND QI

In Chinese thought, the play of yin/yang, the foundation of all manifestations and vital activities, is expressed by the interaction of essence and *qi*. This interaction makes and breaks all the forms and expressions of life and endows them with their qualities and determining features. Essence and *qi*, *jing qi*, 精氣, are the pivot of the mechanism that enables life to move, supporting life at all its levels. They represent the play of yin/yang at the most subtle and the most general levels, being the essence of vitality expressed in substances animated by movement and transformation—that is, living creatures.

Essence is constantly transformed to release *qi*, nourishing and sustaining all physiological and mental activities. The *qi* ensures that essence is renewed and appropriately used in the body. The *qi* proceeding from the transformation of essence is the *qi* of the profound, authentic life of the human being. Transformations, *hua*, 化, represent the outcome of *qi* operating on essence.

As always, the *qi* can be understood in terms of two levels, as yin/yang, or as yang.

It is everything, the totality of yin and yang. *Jing qi* (精氣) can be understood as essential *qi*, vital *qi*, *qi* in the form of essence; that is, essence as yin. Likewise, when substance or fluid is penetrated and shaped by essence, in their vitality they lean toward transformation and movement (yang).

Essence can be thought as a condensation of *qi*, *qi* in its yin aspect. At the same time, it contrasts with *qi* in its yang aspect.

It is the yang. *Jing qi* (精氣) can then be understood to be a yin/yang pairing where the yang *qi* operates upon the yin essence and transforms and transports it.

The difference between these two meanings is not great, because there is always an interaction between yin and yang. The relationship of the essence released as *qi* and the

continued on page 16



# A Practitioner's Guide to *Longevity Medicine for Women*

By DR. LIA G ANDREWS, DAOM, LAC

*"The superior physician treats that which is not yet ill. The inferior physician treats that which is already ill." Ling Shu Chapter 55*

Every practitioner of Traditional Chinese Medicine is armed with this famed quote in school, yet quickly finds him or herself out in the real world of paying bills and unrealistic patient expectations. It always seems to come back to this fundamental question: "How do we practice this incredible art in a chaotic, imperfect world?" In regards to the above quote, how do we treat what has yet to manifest when our patients come to us seeking immediate results for current symptoms? As good Daoists, we utilize what is given to us and transform it to a higher end.

Chinese medicine scholar Z'ev Rosenberg explained during a recent lecture that one of the key differences between our medicine and mod-

ern Western medicine is the sense of time. When we see a patient we see them with their present symptom, just like Western medicine. Unlike Western medicine, however, we see that moment in time within the context of the season, patient lifestyle and emotions, phase of life, childhood experiences, and their ancestral inheritance. We use several tools to predict what will happen in the future, both in terms of progression of current symptoms and those of yet unmanifested disharmonies. The right actions will affect the trajectory of that patient's health for the rest of his or her life and onward to what is inherited by future generations.

Use the symptom. Human nature often requires desperation to bring us to the point of change.

Let that bring your patient in the door. Give them relief and then open the door for what their lives can be. The system I have created for my practice and my series of books takes inspiration from several schools of thought on women's longevity practices.

First and foremost, patient attitude, diet, and lifestyle comprise the foundation of health. The act of giving patients health homework empowers them to take responsibility for their own health. Next I incorporate the philosophy of Dr. Shuqi Zhuang,<sup>1</sup> a renowned Taiwanese TCM physician of women's health, who teaches that there are three golden opportunities for women to change their constitutions: regulating menstruation, recovering from childbirth, and balancing the menopausal transition. Additionally, I recommend sexual cultivation exercises as a means of circulating jing to promote longevity.

### GIVE DAILY SELF-CARE HOMEWORK

When treating a patient for the first time, it should be explained that all the actions of the TCM practitioner (acupuncture, cupping, moxa, herbs, etc.) are attempts to stimulate their system to correct itself. If they do not already have a meditation practice, you can give them a simply breathing exercise at the beginning of the acupuncture treatment that subsequently becomes the foundation of a daily practice. During the consultation or after treatment, you can explain the importance of Yin and Yang balance in their lives as a balance between rest and activity. Explain the ideal hours of sleep, eating with the seasons, and other basic concepts, then offer them dietary recommendations for their particular imbalance. For patients who do not already have some kind of relaxation practice, recommend they take a class (or video or

continued on **NEXT PAGE**

podcast) in meditation, qigong, tai chi, yoga, or other similar practice. Most patients are already aware how diet and stress contribute to their symptoms; they just need guidance on the first step.

### TAKE ADVANTAGE OF THE "GOLDEN OPPORTUNITIES"

Jing preservation is the primary goal when we discuss longevity. Jing can be leached away through overwork, regular stress, and poor diet, but is lost in greater quantities during procreation, or the potential for procreation, through the egg and sperm. Thus, men lose jing through ejaculation and women through menstruation and pregnancy. Most traditional cultures have prescribed ritual rest around menses and the postpartum month to protect women.<sup>2</sup> On the one hand, modern women enjoy greater freedom and gender equality, but on the other, there is no medical or cultural framework that acknowledges women's transitions and cycles. I have seen in my practice infertility and premature menopause result from this lack.

TCM practitioners are in a key position to educate the public on this matter. Symptoms during menses, after childbirth, and during peri-menopause are what most often bring women through the door. Fertility issues are typically linked to the menstrual cycle, and they may be complicated by poor recovery from a previous pregnancy.

### MENSTRUAL CARE

Monthly menses signals more than just blood loss. The link between menstruation and longevity is seen in the concept of *tian gui*. The *tian gui* is related to hormonal and endocrine system maturation, manifesting in the sperm in men and in the menstrual blood and ova in women. *Tian gui* is intimately tied to jing essence and the ministerial fire<sup>3</sup>; women must carefully mitigate blood and jing loss during menses, and supplement afterwards. Menstrual care practices include diet and lifestyle. Women are advised to rest, stay warm, eat foods that support blood flow and nourish the body, and promptly address any imbalances in the menstrual cycle or flow with acupuncture and herbal treatment.

### POSTPARTUM CARE

Pregnancy, childbirth, and breastfeeding represent a major depletion in kidney qi, blood, and jing. Postpartum care, known as *zuò yuèzi*, 坐月子, is one of the single most important practices for a woman's health. Like menstrual care, postpartum care includes diet and lifestyle recommendations, but stricter and lasting for the first month or more after delivery. Postpartum women are to rest, bind their abdomens, and eat special foods. This facilitates the passage of lochia, the return of the uterus and waist to normal size, and the production of healthy breast milk.

### PERI-MENOPAUSAL CARE

A major obstacle to peri-menopausal care is that most women refuse to associate with that term until their periods have stopped and their symptoms are unmanageable, while peri-menopausal care should begin much earlier. The *Huangdi Neijing* outlines women's seven year jing cycles and notes that jing begins to decline during the fifth cycle, at age 35. If a woman begins rejuvenation practices at this age she can delay menopausal symptoms and minimize their severity. She will reduce the temptation to use oral contraception to halt her periods as she approaches menopause, which is becoming common practice.<sup>4</sup> She will be less likely to rely on Hormone Replacement Therapy and cosmetic procedures. It is also easier for the practitioner, as the patterns are less entrenched, complicated, and difficult to resolve.

### TREATING PRE-MENOPAUSAL JING DECLINE

In addition to the above mentioned practices, herbal medicine is very effective in promoting longevity and rejuvenation. Perhaps the easiest way for patients to incorporate this on a daily basis is by using food herbs, also known as medicated diet or *yào shān*, 药膳. Food herbs can be taken long-term without side effects, they taste good, and they are less intimidating to those afraid of "herbs". There are a number of food

herbs I recommend to women beginning at the age of 35 including *shan yao* (Rhizoma dioscoreae), *bei zhi ma* (Semen sesame nigrum), *gou qi zi* (Fructus lycii) and *long yan rou* (Arillus longan).

In addition to food herbs, tonic herbs and formulas are required. One of the most effective anti-aging herbs is *ren shen* (Radix ginseng). TCM Dermatology and Cosmetology expert Dr. Yueying Yi, OMD recommends that women begin taking 1 gram of *ren shen* daily beginning at age 35 to delay onset of menopause and mitigate symptoms.<sup>5</sup> There are studies showing marked improvement in menopausal symptoms with Korean red ginseng<sup>6</sup> at slightly higher daily doses, even after the onset of menopause.

A 1990 study on the effects of Korean red ginseng and menopause used 47 female subjects diagnosed with menopausal disorder. Each subject took 4.5-6.0 g/day of red ginseng powder orally for 8 weeks. By the end of the study, the women showed a marked increase in blood flow to the ovaries. The study concluded that Korean red ginseng powder was effective to treat anxiety, dizziness, ovarian dysfunction (promoted secretion of estrogen), digestion disorder, sexual function, and depression associated with menopause.<sup>7</sup> A 2002 study demonstrated significant relief in 30

continued on page 16

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# The Art of Practice – 6 Simple Ways to Spice Up Your Practice

By EAST HARADIN, DAOM, LAc

Over the course of more than 15 years of private practice, I have realized that there truly is an art to being a continuously successful and completely fulfilled practitioner. Sometimes we get burned out. Sometimes our patients get bored with the same treatment every time they come in. Sometimes we get a patient that our traditional treatments don't seem to help effectively. So, what do we do? In this article I hope to offer you some ideas.

While I have a steady stream of new patients, I also have a solid base of returning patients – my “regulars.” They have been coming to see me every week, or every two weeks, for years. I have found that for these regular patients, it is important to keep the treatments fresh, new and exciting. Luckily for us, practitioners of TCM and alternative medicine, we can be creative and add different things to our treatments to enhance

the experience, maintain the transformation in our patients, and keep them coming back to us.

Whether you are a brand new practitioner or a “seasoned” one like me (so much better than saying “old”), it is absolutely vital to keep your practice fresh and keep your bag of tricks filled so you can approach all types of situations. By doing so, you will not only increase patient satisfaction but also greatly increase your own job satisfaction. In this article, I share 6 simple and effective things you can add to your treatments and/or practice to prevent burn out and/or stagnation, enhance the overall treatment experience, and increase patient satisfaction:

**1.Aromatherapy.** I have always used aromatherapy in my practice and patients love it. The easiest way to incorporate this ancient healing technique is to simply add essential oils or aromatherapy sprays onto a

cotton ball and place the cotton ball within your patient's sniff zone while they are receiving a treatment (i.e., place the cotton ball on their chest or under the head rest if they are face down). Then, when the patient leaves after their treatment, have them take the cotton ball with them, instructing them to smell the aromatherapy frequently to keep the treatment going through their body. Even though it is a cheap little cotton ball with aromatherapy on it patients will covet it like prized gold and look forward to their cotton balls with each treatment. I once walked a patient to her car and saw a line of cotton balls on her dashboard from prior treatments. For basic aromatherapy, you can add lavender to cotton balls to help them relax, or try a citrus oil like grapefruit or orange to move qi and increase energy. It's simple – we all have cotton balls. It's effective – efficacy of aromatherapy has been

proven over and over again in clinical trials. It is inexpensive – it costs you pennies and pays you back in spades when your patients want to come see you regularly. It has even been proven that adding aromatherapy to an acupuncture treatment increases its efficacy.

**2.Cards.** No, I don't mean business cards. I'm talking more about oracle cards or positive affirmation cards. While thought leaders like Doreen Virtue and Denise Linn were some of the first people to come up with these cards, everyone seems to have their own deck and there are decks for all areas of life. Louise Hay has positive affirmation cards, Deepak Chopra has several decks for spirituality, Doreen Virtue has dozens of decks and now Gabby Bernstein, one of our newest thought leaders in personal development, has her own

continued on page 27

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# Classical Medicine for Treating Male Sexual Disorders

By SUZANNE ROBIDOUX, PhD, CM, DOM, LAc

As practitioners, we always want to bring the quickest, most effective treatment at the lowest price possible. In TCM, sexual disorders are mainly due to either liver qi stagnation, liver and kidney depletion, or the kidney and heart not communicating. What can we offer our patients, however, once we have used all the resources TCM has without any success?

In the Han Dynasty, Zhang Zhong Jing had already recorded effective formula patterns for male and female sexual disorders in the Lun Guang Tang Ye Jing, later renamed and compiled by Wang Shu He as the Shang Han Za Bing Lun.

Like every classical school of thought, understanding the medical system within the Shang Han Za Bing Lun is essential to applying it correctly in clinic. It is important to clarify that this system is unrelated to the constitution of the patient; whether they are young or old, thin or heavyset, has no correlation to the acupuncture channels or their pathways—it does not integrate with the *zang fu* TCM diagnosis. Furthermore, it does not depend on the season or the weather. This system is based entirely on the full spectrum of symptoms presentation, including the tongue and pulse. Analysing these symptoms will tell us if the pathogens are lodged within the external layers, internal layers, or the half exterior-half interior layers of the body. According to the symptoms presentation, we will also be able to diagnose if the syndrome are of a yang and/or yin nature in each layer.

When we are treating acute or chronic cases of impotence, spermatorrhea, premature ejaculation, lack of libido, or any other male sexual disorders, we must again record all of the presenting symptoms, diagnose which of the syndromes are affected, and eventually target a treatment formula and its modifications. The symptoms analysis according to syndromes has been listed in this newspaper in a previous article, but since they are the basis of this system, I will review them briefly. As Dr. Feng Shi Lun often says: “Being a true classical practitioner is not only using classical formulas, but also fully understanding the six syndrome system and formula and medicinal patterns.”

The key characteristics of the Six Syndrome System are:

- Tai Yang Syndrome** (external yang pattern): Fever, sweating or no sweating; aversion to cold and wind; pain and stiffness of the neck; severe pain of the joints and muscles; itchy skin disorders; floating pulse.



- Shao Yin Syndrome** (external yin pattern): Sweating (spontaneous deficient); aversion to wind and cold; joint and body pain; skin disorders; floating or deep pulse. Notice the lack of heat sensation and fever.
- Yang Ming Syndrome** (internal yang pattern): Fever; heat sensation; day or night sweating; aversion to heat; vexation; insomnia; depression; restlessness (excessive and deficient type); fullness in the epigastrium; chest oppression; diarrhea or constipation; swollen red and painful joints; rapid and slippery pulse.
- Tai Yin Syndrome** (internal yin pattern): Cold sensation; fatigue; bloating or vomiting after eating or drinking; diarrhea or constipation; with internal rheum, there will be insomnia; restlessness; joint and body pain; deep and slow pulse. (lack of heat sensation).

It is also important to note that the symptoms of external internal Tai Yin Syndrome are often seen in the symptom of upsurging qi, with internal rheum retention bringing the pathogens upward, along with symptoms of dizziness, vertigo, vomiting and heaviness of the head.

- The syndromes of the half exterior-half interior layers are mainly seen as heat in the upper with cold in the middle or the lower, bitter taste, and pain in the rib sides:
- Shao Yang Syndrome:** Fever; heat sensation; sore throat; restlessness; irritability; introverted; tensed; glomus & tension under the heart; wiry pulse.
  - Jue Yin Syndrome:** Acne; hot

flushes; cold sores; cold sensation in the lower; fatigue; weakness; bloating after eating or drinking; diarrhea or constipation; restlessness; joint and body pain; deep and slow pulse demonstrating a depletion of body fluid and blood.

Furthermore, to deepen our review of this system, I have collected a few meaningful clinical cases from Dr. Feng Shi Lun and Professor Hu Xi Shu and have added in depth analysis according to this system to shed some light on the medical legacy given to us by Zhang Zhong Jing.

## Case Studies and Formula Patterns

### CASE 1: CHRONIC PROSTATITIS WITH URGENT URINATION

Mr.Yu, 25 years old  
1<sup>st</sup> consultation on March 3<sup>rd</sup>, 2011

The patient was suffering from prostatitis for about 8 months before being treated with IV infusions for half a year, followed by micro-wave therapy and self-administration of the Chinese patent medicine Ba Zheng San, all of which proved to be ineffective.

The presenting symptoms were: severe frequent urination, roughly once every hour; a damp sensation in the scrotal area; a pulling sensation in the lower abdomen and perineum; night urination, 2-3 times a night; passing formed stools once every 2-3 days; a neutral taste in the mouth; normal appetite; occasional night sweats; a pale tongue with white and greasy coating; and a wiry rapid pulse—his left *cun* pulse was slightly floating and thin.

**Analysis:** The symptoms of severe frequent urination, pulling sensation in the lower abdomen and scrotum, and frequent bowel movement all belong to the Tai Yin internal depletion syndrome. This internal depletion has created internal rheum seen in the symptoms of dampness in the scrotum area, night urination and greasy tongue coating. In addition, this patient has the symptoms of occasional night sweats and a rapid pulse, demonstrating that the internal rheum has slightly transformed into heat, giving us a slight Yang Ming syndrome. The full differentiation is a Tai Yin Yang Ming Syndrome.

Prescription given was Shen Zhuo Tang plus Chi Xiao Dou Dang Gui San plus Sheng Yi Ren for seven days. (See Table 1)

Shen Zhuo Tang (also commonly referred to as Gan Jiang Ling Zhu Tang) was recorded on line 16 in the Jin Gui Yao Lue. **On Visceral Wind and Cold, Accumulation and Gathering Disorders:** “Patients with kidney disease will feel diffused body heaviness and coldness in the lower back, as if sitting in water, presenting with symptoms similar to rheumatic conditions, but without thirst or inhibited urination, thirst and hunger will be normal. This disease belongs to the lower *jiao*, sweating with exertion and damp-coldness inside the clothes. Over time, there will be cold soreness below the waist and abdominal heaviness which will feel as

continued on page 14



# MICHAEL TIERRA'S PLANETARY HERBOLOGY



Founder of the American Herbalist Guide (AHG) in the United States, Michael Tierra is a California State licensed acupuncturist and herbalist OMD (Oriental Medical Doctor) with over 35 years of clinical practice. He is the formulator of Planetary Formulas and herb products by various companies.

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#### Co-Author of:

*Herbal Tarot* (Candis Cantin)  
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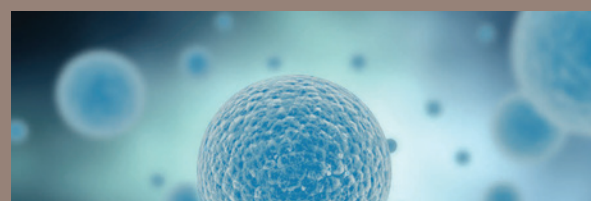
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## What Is Sympathy: *Reflections on Si Jun Zi Tang*

By THEA ELIJAH, LAC

### WHAT IS SYMPATHY?

I say sympathy is the way of total acceptance and total transformation. Total acceptance is the job of the stomach and total transformation is the job of the spleen. This is the highest skill of the Earth element: total acceptance, total transformation. What most of us work with in life is partial acceptance and partial transformation, and this is not enough.

On the simplest physical level, at first, all of our digestion is done for us through the umbilical cord. Everything comes predigested. Next we have milk, something very simple to digest, which we can accept and transform into us. Next we have some solids, something with a little more foreignness that we have to *accept*—we can't receive nourishment without starting with acceptance—and then we transform it. When it comes in, it isn't gu qi; when it comes in, it is a *foreign element* that does not look like nourishment. What is food? It is something that could be nourish-

ment, after the acceptance and the transformation.

So this is the skill of Earth: first, the total acceptance of that which sure doesn't look like nourishment—because this is true of every piece of broccoli you eat. It is a piece of broccoli; what is that thing? And every other new food that comes along—it is another foreign object that you have to accept. *Completely*. You have to swallow it. Take it in. And then transform it into nourishment. What does transform mean? All manifestation arises out of Source. Our digestive system's job is breaking it back down again to get the sweetness out of it. Getting to the heart of the manifestation: that is what nourishes us.

This is an important process, and it is important in this process not to skip steps. We are talking about the way of total acceptance and total transformation until after the acceptance. A lot of what I see in spiritual practice, whether overt spiritual practice or "I'm just trying to make

my life better", is skipping that step of acceptance before transformation, and taking a more surgical approach. I see a lot of confusion about the difference between transcendence and avoidance. Yes, we want to go beyond manifestation, we don't want to be *stuck* with just the material stuff, and instead get straight to the heart and be with that non-material reality that is the source of it all.

You cannot, however, just skip over manifestation, whatever the manifestation is: for instance, I have a stomach ache. The manifestation is my muscles hurt. The manifestation is I can't stop worrying about whether my mother is okay. The manifestation is I'm terrified of people. Whatever it is, don't try to jump straight to bliss, or union, or harmony. You have to break down that broccoli, and the nourishment is *within* whatever it is you've got on your plate—and now in your stomach.

First, be present to the manifestation. It is not a distraction from non-material reality; it is the *door-*

*way*, it is the *cradle*, it is the child; material reality is the *child of Source*. Every manifestation is the child of Source. So what do you do with your children—ignore them until they are grown up? Oh, I'm sorry, I have this pathology; this pathology is a child of Source, but it hasn't yet grown up into a virtue yet. So I'm going to ignore it until it has—but who will raise it? No, hold it in its junior perfection, now, all the while knowing that it is going to have to transform deeply to grow up and bear its fruit.

The pathology is the youth of the virtue. All pathology, all manifestation, whether you are enjoying it or not (so pathology is included) is incompletely transformed food. When you have completely transformed it and gotten to the heart of the matter, then you taste the sweetness—and then you easily let go of the form: at this point it is not difficult; it is not an effort.

continued on page 15

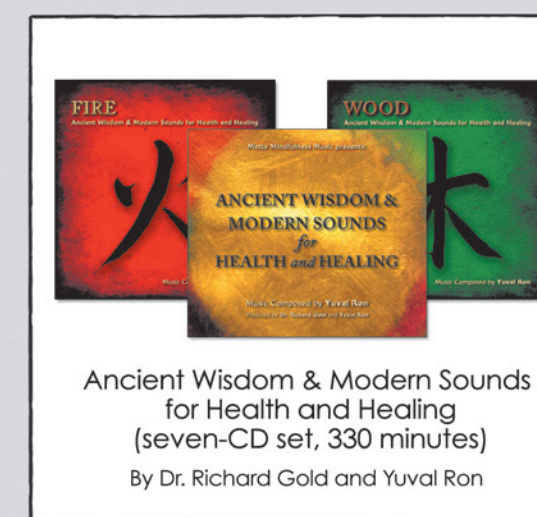
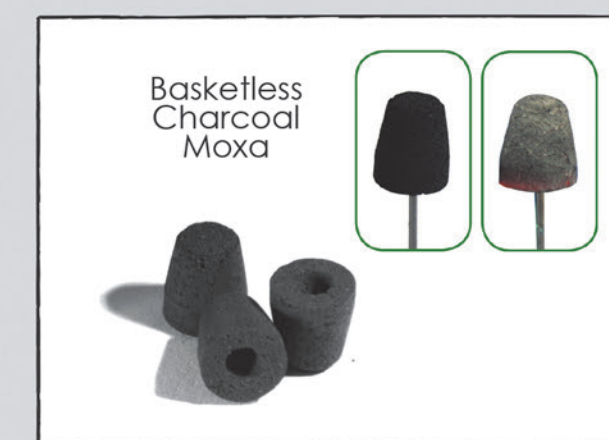


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TABLE 1

Cang Zhu	15g	Gan Jiang	15g	Fu Ling	15g
Zhi Gan Cao	6g	Chi Xiao Dou	15g	Dang Gui	10g
Sheng Yi Ren	18g				

if one is carrying five thousand coins; Gan Jiang Ling Zhu Tang governs.”

Shen Zhuo Tang includes Gan Cao, Gan Jiang, Fu Ling, and Bai Zhu, which fortify and warm the middle to treat the Tai Yin Syndrome and promote urination to drain the stagnation of the internal rheum.

In this case, the chronic retention of internal rheum intermingles with blood and creates blood stasis. Chi Xiao Dou Dang Gui San was added to move stasis and drain internal rheum. Sheng Yi Ren is also added in this case to treat the slight Yang Ming Syndrome and expel dampness, since it is cool in nature and drains dampness by promoting urination.

**2<sup>nd</sup> consultation on March 10<sup>th</sup>, 2011:** After a week of this formula, the urinary frequency and scrotal dampness reduced, the pulling pain in the scrotum also resolved, the nocturia reduced to once a night, he passed formed stools 1-2 times a day, had occasional borborygmus, normal appetite, normal taste in the mouth, his tongue was pale with white and slightly greasy coating, right pulse was wiry, rapid, and forceful, the left guan pulse was slightly slippery, and both *cun* positions were floating.

At this time the symptoms improved, but the syndrome remained the same except for the resolution of the internal heat symptoms of night sweating, so the same prescription was given by removing Sheng Yi Ren. However, there was still a slight urine frequency and slight night urination, so the medicinals Sang Piao Xiao 10g and Yi Zhi Ren 10g were used to astringe fluid and consolidate essence.

**Results:** After taking this formula for 7 more days, the urinary frequency and scrotal dampness were no longer evident and his borborygmus resolved.

Chronic prostatitis can be the cause of many sexual disorders in men, such as spermatorrhea, impotence, and premature ejaculation. By treating the prostatitis, we can also treat the secondary symptoms successfully. This case is also a clear example of how 6 months of TCM costly treatment brought no relief and instead aggravated the symptoms. However, only two simple classical formulas, applied according to the Six Syndrome system, were able to bring relief within 2 weeks.

TABLE 3
\*1 qian is equal to 3g.

Gui Zhi	3qian - 9g	Bai Shao	3qian - 9g	Bai Wei	3qian - 10g
Long Gu	8qian - 24g	Mu Li	8qian - 24g	Zhi Gan Cao	2qian - 6g
Chuan Fu Pian	3qian - 9g	Sheng Jiang	3qian - 9g	Da Zao	4pcs - 20g

TABLE 2

Gui Zhi	10g	Bai Shao	10g	Bai Wei	10g
Long Gu	15g	Mu Li	15g	Cang Zhu	15g
Chuan Fu Pian	15g	Sheng Jiang	15g	Da Zao	20g
Zhi Gan Cao	6g	Fu Ling	12g	Sheng Mi Ren	18g

Er Jia Long Gu Mu Li Tang comes from the formula Gui Zhi Long Gu Mu Li Tang was recorded in the Jin Gui Yao Lue· On Blood Impediment and Taxation Disorders, line 8: “If a man loses his essence, his lower abdomen will be urgently tense, his glans penis will be cold, his vision will be blurry and he will lose his hair, and his pulse will be extremely deficient, hollow and slow, indicating clear food [diarrhea], causing blood collapse and seminal loss. Hollow, stirred, faint, or tight pulses indicate seminal essence loss in men and dreaming of intercourse in women; Gui Zhi Long Gu Mu Li Tang governs.”

Seminal loss and dreaming of intercourse are both lustful in nature and have a tendency to occupy the mind incessantly. This disorder also stems from body fluid damage due to sweating, leading to *ying-wei* disharmony. Long Gu and Mu Li not only astringe the essence, they also calm the mind and focus on clearing internal Yang Ming heat, restraining the spirit and checking nervousness. When combined with Gui Zhi Tang, which harmonizes *ying-wei*, this formula targets the pattern entirely. In the Xiao Pin Essay Quotations, it was recorded: “In case of weakness, floating heat and sweating, remove Gui Zhi and add Bai Wei and Fu Zi, otherwise known as Er Jia Long Gu Tang.” In clinic, however, Prof. Hu Xi Shu and Dr. Feng Shi Lun often add Gui Zhi to this formula to fortify the effect of harmonizing the *ying-wei*.

**CASE 3: IMPOTENCE**  
**Mr. Cang, 30 years old**  
**1<sup>st</sup> consultation on February 28<sup>th</sup>, 1963**  
**(treated by Professor Hu Xi Shu and recorded by Dr. Feng Shi Lun)**

The patient suffered from impotence and premature ejaculation for 4 years. During this time he had taken both TCM and Western medicines, which had had no effect. An examination revealed that he was suffering from chronic prostatitis, for which he was prescribed Gui Fu Di Huang Wan, but had no curative effect.

**Symptoms:** inability to maintain a full erection, premature ejaculation, excretion of urethral white mucus-like substance before and after defecation, lower back pain, tinnitus, white tongue coating, wiry and thin pulse.

If we analyze the symptoms, the impotence and premature ejaculation, inability to maintain a full erection, white tongue coating, lower back pain, wiry and thin pulse point to a external and internal concurrent syndrome of Shao Yin Tai Yin Syndrome. The excretion of urethral white mucus-like substance before and after defecation and

continued on **NEXT PAGE**

After one more week of the second formula, the symptoms of nervousness and depression were completely resolved and his spirit was calmer. The patient could remain erected for 5-6 minutes during intercourse and all his other symptoms resolved. He continued taking the same formula for another week to consolidate the treatment.

As Chinese medicine practitioners, we see the conventional TCM treatments were ineffective since they were not aiming at the full syndrome. If there is a pathogen remaining on the exterior layer of either Tai Yang or Shao Yin Syndromes, as well as symptoms of these syndromes' interior layers, we need to slightly promote sweating to resolve the pathogen on the exterior layer while simultaneously clearing the internal Yang Ming heat, addressing the internal deficiency of Tai Yin syndrome and harmonizing the interior and exterior *ying-wei*. The medicinal Fu Ling and Cang Zhu were effective to further drain the internal retention of rheum by warming the middle.

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tinnitus show internal rheum retention turning into heat, creating a Yang Ming Syndrome. The full Six Syndrome diagnosis is Shao Yin Tai Yin Yang Ming concurrent syndrome.

**Formula pattern:** Er Jia Long Gu Mu Li Tang pattern (See Table 3)

**Result:** After taking 3 packs, his tinnitus reduced and the amount of urethral fluid-excretion after defecation was markedly less severe. However, he would still occasionally suffer from tinnitus and lower back pain so he was given Si Ni San to target the slight Shao Yang syndrome causing the tinnitus and Dang Gui Shao Yao San was added to the original prescription to further treat the Tai Yin syndrome with blood depletion. After 6 further packs of this formula, all symptoms improved greatly and his impotence resolved.

The key to successfully using classical formulas in clinic and reaching results worth noting is to fully

WHAT IS SYMPATHY: REFLECTIONS ON SI JUN ZI TANG
 continued from page 13

When we are looking at the virtue of Earth and giving sympathy to people, we are talking about Si Jun Zi Tang. Various people may need more of one ingredient than another. In working through any manifestation, we will probably need all 4 Gents to be able to go the way of sympathy, but we may need one of them more than another.

Does the situation need ren shen ginseng? Do I need to be the ground, the stability for someone? There are times when giving sympathy means giving the other person the feeling that you are there for them, like ground under their feet; that you will hold them; that you will be steady. You will be their ground point. You will be a basket if they need to be a basket case for a little while. Total acceptance from firmness, from strength. This is the steadiness, the support, the ‘I am here for you’ that gives rise to suddenly being able to see myriad possibilities for transformation. This is a form of sympathy, that *fidelity*, that ground.

Then there is fu ling poria: that plain, simple-spoken clarity; it's *practicality*; the kind of sympathy that allows you to say, in simple words, what is up with you. Earth virtue is the ability to be—just be—to be at home not in a sense of comfort or necessarily, but plain-spoken, an ordinary vessel for everyday use. A level of clarity comes from that—simple concrete direct unvarnished statements, like “I'm sad.” It is a kitchen table conversation. It is not a horizontal plane representing a level of abstraction and

understand the classical system from which they stem. Every modification of the formula is able to reach a different syndrome combination. Particular care needs to be brought when adding or removing a medicinal, since every formula pattern is a key to unlocking a specific syndrome. Every change of symptoms might indicate an additional syndrome, at which time a new formula pattern or medicinal will be needed. Chinese medicine treatment is not a rigid system of prescriptions given for specific diseases as it is commonly seen in TCM and Western medicine. The essence of Chinese medicine resembles nature, with its multiple changes according to changes in the symptoms. Constant change and appropriate adaptation of the treatment are integral parts of the true nature of health and healing in classical Chinese medicine.

By reviewing these cases, we see that the commonly known treatment



talking around the issue that Earth can get into. Sitting across the kitchen table from somebody—how often is that incredibly useful when you've got a problem, whether there is a kitchen table there or not? Things suddenly become very clear, like fu ling poria, once you are actually sitting down across the table from somebody who wants to understand. It's no longer felt as just a big mush of “Oh, I got problems! I feel so bad.” Does the person need fu ling poria, a kitchen table discussion where you plainly state very clearly what are the issues in simple words? Clarification by plain-spokenness. All of a sudden you feel so much better; it's more manageable.

Do you understand how it's a different thing to give sympathy thing in terms of fu ling poria kitchen table talk, versus ren shen ginseng ‘I'll be your rock’? When you know that you've got a rock, you can change,

in both western medicine and TCM did not relieve the symptoms of these patients, and in some cases worsened their condition, whereas the correct syndrome diagnosis with the appropriate formula pattern brought about satisfactory results in a timely and cost-effective manner. As Dr. Feng often repeats: “**有是诊，有是方：有是诊，有是药**.” This quote translates to: “For each syndrome, there is a formula; for each syndrome, there are medicinals.” This lineage of the understanding of the works of Zhang Zhong Jing does not link the classical formulas to any of the acupuncture channels, *zang-fu* diagnosis, body constitutions, or the changing seasons. Instead, each prescription is based solely upon syndrome diagnosis according to the symptom presentations.

Hopefully, this long standing lineage and understanding of the classical text from the Han Dynasty, handed down to us by the empirical

doctors and dedicated teachers like Professor Hu Xi Shu and Dr. Feng Shi Lun, will survive the test of time and we will continue to keep the system pure and effective. **OM**

**DR. SUZANNE ROBIDOUX** is a renown international teacher and author of Chinese medicine in Europe, Asia and North America. She has learned and practiced in China for the last 15 years. She teaches one of the 3 classical acupuncture techniques from Taiwan effective for rapid pain management, three different scalp acupuncture techniques from Bei Jing, Shang Hai and Nan Jing, traditional and modern moxa techniques, and classical medicine. Dr. Robidoux completed her doctorates education in Nanjing with a clinical research on treating neurological pain. She is currently completing her post doctoral clinical research on the classical system of the Shang Han Za Bing Lun at the Beijing University of Chinese Medicine. and has also founded an international online teaching portal online.”

needs: sympathy that gives enough energy to get action started. Once somebody has actually helped us to get started on whatever the issue is, we are able to complete the transformation process ourselves; we just needed somebody to say, “Oh man, *I get it*.” Sometime that is enough, just to have somebody temporarily hitched next to you in the harness, saying, “Wow, that is a heavy load to pull.”

What's most helpful is when the person is actually trying it on with you and pulling it with you, just for a few steps. The load feels a lot easier the moment that somebody else is willing even for a moment to try on that yolk and say “that must be really hard,” to take that next step pulling with you, then one step more, and one step more. Transformation can happen step by step by step. A lot of things take a while, and Earth is fidelity through the whole mix phase; this means being able to stick with a process like endlessly changing diapers, raising a child... bai zhu atractylodes is the energy to stay with that long transformational process. This is the kind of sympathy that bai zhu atractylodes offers. It's energy to slog, power to trudge, by offering to fall into step and trudging *with*... for a few steps.

Note that both the fu ling poria and the bai zhu atractylodes people feel bogged down and overwhelmed; it is a damp situation. There is this stuff that is midway between nourishment and junk and there may be confusion in you about which it is. With fu ling poria, it is clarification



qi that ensure the renewal, protection and function of the essence is yin and yang. Either one of the above interpretations can be taken depending on context.

The expression “essence and qi” (jing qi 精氣) has some similarity with blood and qi, *xue qi*, 血氣. In both cases there is absolute solidarity between the two components that include all that is vital. Blood and qi relates specifically to humans or animals, while essence and qi has a more cosmic aspect and a more general resonance. Although essence and qi relate to all the yin/yang interactions of vital processes, they cannot be grasped. They are seen through their effects, in strength and harmony, in decline or impairment of vitality. Blood has more visibility, making it possible to perceive the quality of the essence, while they remain imperceptible and subtle.

There is a strong connection between essence and origin, since reference is made to the essence of Anterior Heaven, *xian tian*, 先天, as well as to the essence of Posterior Heaven, *hou tian*, 後天. Blood always relates to Posterior Heaven. The essence and qi pairing adheres more faithfully to the original model.

The balance between essence and qi, rooted in their adherence to the original model, forms the basis of the movement and operation of life. It represents the dynamism and nourishing richness of substances, as well as their interactions that create vital activity. It is the basis for the proper functioning of the body, in relation both to nourishment and defense, to blood and qi, to organs and reproduction.

It is also the foundation for the harmony that enables the spirits, *shen*, 神, to be present, and enables spiritual intelligence to develop, *shen ming*, 神明. OM

**ELISABETH ROCHAT DE LA VALLÉE**, born in Paris in 1949, holds Master's degrees in classics, literature and philosophy, with postgraduate work in Chinese. She has collaborated extensively with Father Claude Larre and Dr. Jean Schatz in analysing Chinese thinking and classical medical texts. She now teaches Chinese thinking at the Institut Ricci de Paris and the theoretical basis of Traditional Chinese Medicine at the Ecole Européenne d'Acupuncture, as well as other schools and universities in more than 14 countries. She has also written several books and articles that have been published in French, English and Italian.

menopausal subjects with a mean age of 57.3 years, taking 3g/day red ginseng powder with *dang gui* (Radix angelicae sinensis) and *bai shao* (Radix paeoniae alba) powder for 12 weeks.<sup>8</sup> A third, randomized, placebo-controlled, double-blind study in 2012 studied 72 women ages 45-60. The subjects took 3 g/day of red ginseng in capsule form for 12 weeks. The study analyzed changes in menopausal symptoms using the Kupperman index. Subjects showed remarkable improvement, particularly a decrease in cardiovascular risk factor and increase in estradiol level.<sup>9</sup>

#### TREATING PERI-MENOPAUSE

As women near menopause it is common to experience increasingly irregular, and often heavy, menstrual cycles. The decline in Jing, which characterizes the onset of menopause, allows other imbalances to surface. Symptoms experienced during peri-menopause are key to resolving a woman's primary imbalances before she enters the latter half of her life.

Peri-menopausal women typically present complex and changing patterns and thus need to rely more

on TCM practitioners to guide them on diet and lifestyle and offer appropriate treatments and herbal medicine. As jing declines it can manifest as a yin and/or yang deficiency. Yin deficiency is more prevalent amongst women as they age, which is why hot flashes and dryness symptoms are almost universal during menopause.

Self-care becomes paramount with age. Women must practice daily stress relief such as qigong, tai chi, meditation, and yoga. Additionally, they must balance rest with work and play. Women can no longer live an unbalanced lifestyle without consequences. As women enter the post-menopausal phase of life, generalized jing deficiency becomes more pronounced and emphasis is placed on tonification.

#### PROMOTE A DIFFERENT MODEL OF SEXUALITY

Sexual cultivation offers a model of sexuality that is distinct from both the religious sexual shaming and pornographic disempowerment that are rampant in our culture. It transforms sexuality into a balancing force in

continued on page 38

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# A Guide To Pacific Symposium 2015

October 27- November 3, 2015



San Diego, CA • 64 CEUs Possible

Jeffrey Yuen • Kiiko Matsumoto  
Elisabeth Rochat de la Vallée • Whitfield Reaves  
Michael Tierra • Ming Qing Zhu  
Jill Blakeway • Suzanne Robidoux  
Arnaud Versluys • Thea Elijah  
East Haradin • Mazin Al-Khafaji  
Mark Kastner • Marie-France Collin  
Andrew Gaeddert • Lia Andrews  
Belinda Anderson • Bill Helm • Robert Nations

Keynote Address: Michael Tierra - October 30

Pre-Symposium Workshops with:

Jeffrey Yuen - October 28

Suzanne Robidoux - October 27-28

Post-Symposium Workshops with:

Thea Elijah - November 2-3

Mazin Al-Khafaji - November 2-3

TCM • Acupuncture • Massage



Pacific Symposium 2015 Schedule at a Glance

Tuesday/Wednesday 10/27-10/28		Thursday 10/29	Friday 10/30	Saturday 10/31	
Early Morning Qi Gong (1 CEU per session)					
7-7:50 am	One-Day Session, 10/28:  Chinese Medicine and Cardiovascular Health <i>Jeffrey Yuen</i>	Qi Gong for Health Professionals <i>Bill Helm</i>	Qi Gong for Health Professionals <i>Bill Helm</i>	Qi Gong for Health Professionals <i>Bill Helm</i>	
9 am-12 pm		Morning Workshop: Alternative to General Session Lectures (3 CEUs)			
				Signs and Symptoms of Aging: Acupuncture for Menopause <i>Kiiko Matsumoto</i>	
General Sessions (1 CEU per speaker/3 per morning)					
9-9:50 am	Two-Day Session:  Yuan Qi Classical Acupuncture For Quick Pain Relief <i>Suzanne Robidoux</i>	The Often-Overlooked Gluteus Medius and Why Every Practitioner Must Use It <i>Whitfield Reaves</i>	Postpartum Recovery: the Secret to Women's Jing Conservation <i>Lia Andrews</i>	Evidence Based Medicine – How Does It Apply to Chinese Medicine, Why Do We Need It, and What Are the Issues? <i>Belinda Anderson</i>	
9:55-10:45 am		Acupuncture for Acute Pain <i>Jeffrey Yuen</i>	Incorporating Aromatherapy Into Your Practice <i>East Haradin</i>	An Introduction to an Essential Notion in Chinese Medicine: Essence (Jing) <i>Elisabeth Rochat de la Vallée</i>	
11:10 am-12 pm		Review of Male Disorders Case Studies with Classical Medicine <i>Suzanne Robidoux</i>	The Decoction Classic and Its Relation to the Shanghan Lun <i>Arnaud Versluys</i>	Overview of Dermatology in Chinese Medicine <i>Mazin Al-Khafaji</i>	
Afternoon Qi Gong (1 CEU per session)					
12:15-1:05 pm		Qi Gong for Health Professionals <i>Robert Nations</i>	Qi Gong for Health Professionals <i>Robert Nations</i>	Qi Gong for Health Professionals <i>Robert Nations</i>	
Afternoon Workshops (3 CEUs per workshop)					
2-5 pm		Contemplation on a Contrarian Approach to Treating Back and Hip Pain <i>Whitfield Reaves</i>	Incorporating Aromatherapy Into Your Practice <i>East Haradin</i>	Integrating Western Herbs Into a TCM Practice <i>Michael Tierra</i>	
		Levels of Healing - Cultivation and Its Role in Transference and Transmission <i>Jeffrey Yuen</i>	The Origins of Zhang Zhongjing's Prescriptions: The Yin Yang and Six Spirit Formulas <i>Arnaud Versluys</i>	An Essential Notion in Chinese Medicine: Essence (Jing) <i>Elisabeth Rochat de la Vallée</i>	
		Acupuncture and Myofascial Therapy for Spinal Injuries <i>Mark Kastner</i>	Clinical Use of Medicinal Mushrooms <i>Andrew Gaeddert</i>	Signs and Symptoms of Aging: Acupuncture for Menopause and Osteoarthritis <i>Kiiko Matsumoto</i>	
		Classical Medicine Treatment of Male Disorders <i>Suzanne Robidoux</i>	Pediatric Tui Na <i>Marie-France Collin</i>	Evidence Based Medicine – How To Find, Critically Appraise, and Use Evidence To Improve Patient Care and Build Your Practice <i>Belinda Anderson</i>	
			Postpartum Recovery: Diet, Lifestyle, and Treatment <i>Lia Andrews</i>	Pompholyx Eczema <i>Mazin Al-Khafaji</i>	
Evening Events					
7-9 pm		Healing Hands: An Evening of Qi Flowing <i>Bill Helm</i>	Keynote Address: Michael Tierra <i>Roots of Planetary Herbology</i>	Symposium Party	

2015 Package Prices	EARLY (by Aug. 13)		REGULAR (Aug. 14 - Oct. 1)		LATE AND ONSITE (After Oct. 1)	
	Online	Mail/Phone	Online	Mail/Phone	Online	Mail/Phone
Full plus 2-Day Pre AND 2- Day Post (Tues-Tues) 64 CEUs	\$900	\$990	\$940	\$1,035	\$980	\$1,080
Full plus 1-Day Pre AND 2-Day Post (Wed-Tues) 57 CEUs	\$835	\$920	\$870	\$960	\$915	\$1,010
Full plus 1-Day Pre (Wed-Sun) 50 CEUs	\$655	\$720	\$705	\$775	\$730	\$805
Full plus 2-Day Pre (Tues-Sun) 50 CEUs	\$730	\$805	\$785	\$865	\$835	\$920
Full plus 2-Day Post (Thurs-Sun) 43 CEUs	\$730	\$805	\$785	\$865	\$835	\$920
Full (Thurs-Sun) 36 CEUs	\$520	\$570	\$575	\$635	\$630	\$695
3 Day General Pass	\$435	\$480	\$475	\$525	\$515	\$570
2 Day General Pass	\$330	\$365	\$385	\$425	\$435	\$480
1 Day General Pass (Thurs or Fri)	\$180	\$200	\$215	\$240	\$250	\$275
1 Day General Pass (Sat or Sun)	\$170	\$190	\$205	\$225	\$240	\$265
1 Day Pre 7 CEUs	\$195	\$215	\$225	\$250	\$260	\$285
2-Days Post OR Pre 14 CEUs	\$320	\$350	\$360	\$395	\$390	\$430

Pre-Symposium - 64 CEUs/PDAs

Sunday 11/1	Monday/Tuesday 11/2-11/3
Qi Gong for Health Professionals <i>Bill Helm</i>	Two-Day Sessions:  Dermatology in Chinese Medicine - A Clinical Perspective <i>Mazin Al-Khafaji</i>
Signs and Symptoms of Aging: Acupuncture for Internal Geriatric Diseases <i>Kiiko Matsumoto</i>	Spirit of the Herbs: Addressing Symptoms and Constitution with Chinese Herbs <i>Thea Elijah</i>
Embodying the Medicine: Make or Break Treatment Efficacy with Personal Presence <i>Thea Elijah</i>	
How Can Acupuncture Benefit Stroke Recovery? <i>Ming Qing Zhu</i>	
Preparing For Menopause: How a Well-Managed Perimenopause Sets the Stage For a Smooth Transition <i>Jill Blakeway</i>	
Qi Gong for Health Professionals <i>Robert Nations</i>	
Brief Introduction to Zhu's Scalp Acupuncture <i>Ming Qing Zhu</i>	
Signs and Symptoms of Aging: Acupuncture for External Geriatric Diseases <i>Kiiko Matsumoto</i>	
Whole Heart Connection: Cultivating Personal Presence in the Treatment Room <i>Thea Elijah</i>	
Treating Menopausal Symptoms Naturally <i>Jill Blakeway</i>	

10% Discount for PCOM Alumni and Groups of 10 or More Registering Together (individual workshop fees excluded)

Observers, Students, and Non-Professionals: See Online Pricing, [www.PacificSymposium.org](http://www.PacificSymposium.org)

Pre-Symposium Workshops

Chinese Medicine and Cardiovascular Health

by Jeffrey Yuen

7 CEU/PDA

Wednesday, October 28, 9:00 am-5:00 pm

Heart disease continues to be the leading cause of death in the United States, along with its common associations such as hypertension, apoplexy, hemorrhage, and mental distress. While the Western medical paradigm has been quite adept in critical intervention and palliative care of coronary heart disease, there are insights that can emerge from Chinese medicine. Coming primarily from the Chinese medical perspective that heart disease is generally involved with heat (i.e. inflammation/irritation) and its complications (such as damp-heat, blood-heat, phlegm-heat, etc.) within our contemporary society, this course will explore different insights from Chinese medical classics and traditions in the prevention, management, and treatment of heart conditions.

Yuan Qi Classical Acupuncture For Quick Pain Relief

by Suzanne Robidoux

14 CEU/PDA

Tuesday and Wednesday, October 27-28, 9:00 am-5:00 pm

Within this 2-day workshop, students will receive the full level-1 system of the Yuan Qi Classical Acupuncture for quick pain tension relief within a few minutes. The course was made for serious practitioners who want to refine their technique with a thousand-year-old lineage of skills and technique. This system includes complete concepts involving all channels, elements, and 60 new points. Students will learn the exact locations of these points, as well as the specific needling technique. Time will also be allocated for practice of the location of the points as well as the classical needling technique. By the end of the course, students will be able to practice this technique in their daily practice.

Post-Symposium Workshops

Dermatology in Chinese Medicine - A Clinical Perspective

by Mazin Al-Khafaji

14 CEU/PDA

Monday and Tuesday, November 2-3, 9:00 am-5:00 pm

Skin disorders, in their various forms, are amongst the most common diseases suffered by mankind, accounting for no less than 1 in 5 of all visits to outpatient departments in the Western world. Chinese herbal medicine has a very real and enduring answer for a significant number of sufferers of many diseases of the skin. It can induce spectacular and lasting change in a whole range of intractable conditions such as eczema, acne and psoriasis, and yet, due to a lack of specialist training and clinical experience, numerous practitioners of Chinese medicine fail to achieve optimal results that are well within their grasp. In this introductory two-day lecture, the fundamental principles of treating the most common skin diseases will be presented using many case examples with photographic slides from Al-Khafaji's own practice. Practical and clinically relevant information will be emphasized throughout, serving as a foundation to enable doctors to understand the essential concepts required to construct effective formulae to suit the vagaries of clinical reality.

Spirit of the Herbs: Addressing Symptoms and Constitution with Chinese Herbs

by Thea Elijah

14 CEU/PDA

Monday and Tuesday, November 2-3, 9:00 am-5:00 pm

Healing may be practiced as a means of dispelling illness, of fostering health, or of cultivating virtue. When an herbal formula is designed, the client's physical symptoms (and the patterns of disharmony from which they arise) form a basic matrix guiding the prescription. However, the eradication of physical illness is a doorway through which practitioners may impart deeper transformation: the development of constitutional virtue. Through the herbal formulas themselves, practitioners are able to glimpse how physical disharmonies reflect deeper concerns, and make according herbal choices that allow them to treat the whole person with greater precision and elegance.

Ready to Register? [www.PacificSymposium.org](http://www.PacificSymposium.org)



## Daily Exercise

**Qi Gong for Health Professionals** *by Bill Helm and Robert Nations*

**1** CEU/PDA Daily, 7:00-7:50 am and 12:15-1:05 pm

The class will teach a series of qi gong health exercises to enable the practitioner to maintain a flexible, strong, and energetic body. These exercises emphasize flexibility, stretching and strength development. They can also easily be taught separately to patients for improved clinical outcomes.

## Thursday, October 29, 2015

**The Often-Overlooked Gluteus Medius and Why Every Practitioner Must Use It** *by Whitfield Reaves*

**1** CEU/PDA Thursday, October 29, 9:00-9:50 am

The meridian-based treatment of back pain emphasizes the Tai Yang channels, specifically the UB meridian and the Hua Tuo Jiaji points. For many practitioners, however, the commonly recommended points from UB 23 distally to the foot do not produce favorable clinical outcomes. There is often something “missing”. When the practitioner takes a contrarian approach and includes the gluteus medius, results significantly improve. Treatment to the gluteus medius is at first elusive, as there are NO acupuncture points on this important muscle that engages in every step we take. However, simple-to-palpate zones in the muscle belly give the practitioner easy access, without any contraindications from hitting the sciatic nerve or other sensitive structures. When the practitioner includes the gluteus medius, results significantly improve; as it is a GB Shao Yang meridian muscle, treatment now accounts for a significant core stabilizer. In fact, each step we take requires that the gluteus medius to properly engage. Yet, as important as the gluteus medius is, there are no acupuncture points in the traditional texts that are on the muscle, so a new look at the lumbo-sacral and gluteal region is required, and a new strategy to treat it, with a perspective including the lateral trunk to the more common UB meridian and Hua Tuo Jiaji points that are the mainstay of traditional point prescription.

**Acupuncture for Acute Pain** *Jeffrey Yuen*

**1** CEU/PDA Thursday, October 29, 9:55-10:45 am

The relief of acute pain has become one of the pillars associated with the practice of acupuncture. Often the focus has been the use of ah-shi points on the painful area, command points associated with the painful area, or palpational points pertaining to the affected channel. However, based on historical recipes, the use of local or distal points is dependent on where the pain is located and differential factors that would warrant the combination of both types of points. Using the point recipes from classical acupuncture, this course will briefly elucidate the role of local and distal points in the treatment of acute pain.

**Review of Male Disorders Case Studies with Classical Medicine** *by Suzanne Robidoux*

**1** CEU/PDA Thursday, October 29, 11:10 am-12:00 pm

In this lecture, students will gain a better understanding of classical diagnosis and treatment approaches for male disorders. In order to better grasp the broad differences between TCM and Classical Medicine, Robidoux will guide a review of case studies for a deeper look at severe male disorders.

**Contemplation on a Contrarian Approach to Treating Back and Hip Pain** *by Whitfield Reaves*

**3** CEU/PDA Thursday, October 29, 2:00-5:00 pm

The meridian-based treatment of back pain emphasizes the Tai Yang meridians, and specifically the UB meridian. The zang-fu basis in TCM is often considered the kidneys, which reside at the “lumbus” and are responsible for low back pain. For many practitioners, however, the commonly recommended points from UB 23 distally to the foot do not produce favorable clinical outcomes. There is often something “missing”. When the practitioner takes a contrarian approach and includes the gluteus medius and the quadratus lumborum, results significantly improve. These are the more lateral muscles of the trunk, with important postural and lumbar stabilization roles. As Shao Yang meridian muscles, treatment shifts to the GB meridian—often not included in typical TCM point selection—and with the addition of the sacroiliac joint, where the forces of the lumbo-sacral spine “hinge”, the practitioner relies on the “triad” of back pain, all without ever treating a UB meridian, Du Mai, or the Hua Tuo Jiaji points located along the vertebral column.

**Levels of Healing - Cultivation & Its Role in Transference and Transmission** *by Jeffrey Yuen*

**3** CEU/PDA Thursday, October 29, 2:00-5:00 pm

The course will explore the role of a clinician from how he/she works during a treatment. Coming from the perspective that one can work “on” the patient based on their signs and symptoms/patterns/disease/etc.; one can work “with” the patient

based on the subjective empathy and even perhaps transference with the patient; one can also work “through” the patient based on the cultivation of a clinician to elevate the patient beyond their current situation through forces that cannot be understood intellectually. So rather than becoming attached to the system of healing, the clinician is more conscious of their participation in the healing process. This course is intended to be thought provoking for a clinician to assess oneself during the therapeutic encounter and to ponder what exactly constitutes “healing”.

**Acupuncture and Myofascial Therapy for Spinal Injuries** *by Mark Kastner*

**3** CEU/PDA Thursday, October 29, 2:00-5:00 pm

Mark Kastner has specialized in acupuncture orthopedics for the last 27 years. He has developed a number of simple needling and myofascial techniques for treating chronic and acute spinal injuries that are simple to learn and easily integrated into your practice. This course will touch upon chronic problems such as cervical disc protrusions, paresthesia in arms and legs, and arthralgia of the spine. Numerous acute problems such as stiff neck, brachial plexus syndrome, sciatica, and occipital headaches will also be discussed. There will be extensive needling and myofascia demonstrations in this workshop.

**Classical Medicine Treatment of Male Disorders** *by Suzanne Robidoux*

**3** CEU/PDA Thursday, October 29, 2:00-5:00 pm

Students will gain knowledge of the treatment approach for an array of male disorders from the classic Chinese medicine approach. The course will leave time for discussion on the differences in the diagnostic and treatment focus, as well as analysis on each formula pattern and individual medicinal.

**Healing Hands: An Evening of Qi Flowing** *By Bill Helm*

**2** CEU/PDA Thursday, October 29, 7:00-9:00 pm

Students will practice some simple, but powerful Taoist qi gong exercises to activate the flow of qi and develop sensitivity to their own and a partner's qi fields. They will also focus on activating and balancing the three dan tian, the major energy centers of the body, and harmonizing the du and ren channels. The course will also improve needling and manual therapy skills by helping the practitioner to direct more qi to their hands and increase sensory perception.

## Friday, October 30, 2015

**Postpartum Recovery: the Secret to Women’s Jing Conservation** *by Lia Andrews*

**1** CEU/PDA Friday, October 30, 9:00-9:50 am

Postpartum women are a special class of patient that needs to be understood and treated uniquely, and as acupuncturists, we treat a population of increasingly overworked and older mothers, many of whom undergo fertility treatments. Acupuncturists learn that the single greatest depletion of a woman's jing happens during pregnancy and childbirth, but we are not given the tools to address this. These factors makes postpartum care more critical than ever before. In this course we will outline the theory and practice of this ancient tradition and its modern practice.

**Incorporating Aromatherapy Into Your Practice** *by East Haradin*

**1** CEU/PDA Friday, October 30, 9:55 -10:45 am

Students will gain a better understanding of how aromatherapy works to increase treatment efficacy and patient satisfaction, as well as learn about three essential oils that can be used in any practice immediately to start seeing results.

**The Decoction Classic and Its Relation to the Shanghan Lun** *by Arnaud Versluys*

**1** CEU/PDA Friday, October 30, 11:10 am -12:00 pm

Up until the discovery and recreation of parts of the historical Decoction Classic or Tangye Jing, there remained a big gap between the formula architecture of the prescriptions of the Mawangdui tombs and the Eastern Han dynasty Shanghan Lun. This seminar will explain the relation between the Tangye Jing and the Shanghan Lun; and illustrate how the Shanghan Lun is based on the herbal knowledge of the Shennong Bencao Jing and formula knowledge of the Yiyin Tangye Jing.

**Incorporating Aromatherapy Into Your Practice** *by East Haradin*

**3** CEU/PDA Friday, October 30, 2:00-5:00 pm

Students will begin by gaining a basic understanding of the history and use of aromatherapy. The top 10 essential oils will be discussed, along with risks, contraindications, and potential side effects of this ancient healing modality. Finally, appropriate applications of aromatherapy for the major TCM patterns will be presented. The class is designed to be dynamic and interactive. Students will be able to ask questions, share experiences, and practice the methods and techniques taught in the class.

**The Origins of Zhang Zhongjing’s Prescriptions: The Yin Yang and Six Spirit Formulas** *by Arnaud Versluys*

**3** CEU/PDA Friday, October 30, 2:00-5:00 pm

In the Han dynasty, the constant movements of night and day were viewed as the yin yang interplay of sun and moon; the five seasons were calculated based on the planetary positions of five planets; and the six meteorological qi were calculated by the positions of six star constellations in the sky. When treating external invasion by one of those six qi, herbal formulas were applied, and these herbal formulas were named after those very six star constellations. This seminar will explore the relation between the Western Han dynasty Decoction Classic prescriptions known as the Yin Yang Formulas and the Six Spirit Formulas and the Eastern Han dynasty formulas of the Shanghan Lun; ultimately, it will unequivocally show how the Shanghan formulas’ intent is to harmonize man with heaven.

**Clinical Use of Medicinal Mushrooms** *by Andrew Gaeddert*

**3** CEU/PDA Friday, October 30, 2:00-5:00 pm

Medicinal Mushrooms is a clinical review of the most popular medicinal mushrooms used today. These include ganoderma, poria, cordyceps, shiitake, enoki, lion's mane and turkey tail, which are now prominently used in both the US and Asia. Best known for their effects on the immune system and cancer, mushrooms are also used for the treatment of chronic fatigue, cardiovascular disease, diabetes, hepatitis, lung disorders and obesity. Herbalist Andrew Gaeddert will uncover little known facts about these and other mushrooms and he will explain how processing affects clinical results. Students will review indications and contraindication for medicinal mushrooms on the basis of Western research and Traditional Chinese Medicine. The types of products in the market including whole mushrooms, extracts and mycelia products will be presented.

**Pediatric Tui Na** *by Marie-France Collin*

**3** CEU/PDA Friday, October 30, 2:00-5:00 pm

Infants and young children are prone to afflictions of the respiratory and digestive systems in particular. When applied right away, simple techniques on specific body areas, channels and points will resolve the problem within a couple of days. This course will focus on the most common ailments such as cold, asthma, constipation and diarrhea. Students will learn the corresponding locations and techniques to be practice upon, as well as benefits, contraindications, precautions, and various mediums used, depending on pattern and season. There will also be a demonstration and supervised practice.

**Postpartum Recovery: Diet, Lifestyle, & Treatment** *by Lia Andrews*

**3** CEU/PDA Friday, October 30, 2:00-5:00 pm

As acupuncturists, students have learned that the single greatest depletion of a woman's jing happens during pregnancy and childbirth, but they are not given the tools to address this. Chinese medicine and culture has an extensive tradition of postpartum care called zuo yue zi that until now was inaccessible to westerners. After the depletion of jing and Kidney energy during gestation, the Qi, Blood,

and fluid loss of childbirth, and the demands of breast feeding, women are left relatively Qi and Blood deficient with a propensity towards Blood stasis. This course will cover the theory behind postpartum care and how it affects diagnosis and treatment plans. Next, the course will review traditional diet and lifestyle guidelines and how to adapt them to Westerners, and finally, differential diagnosis and treatment of common postpartum symptoms.

## Saturday, October 31, 2015

**Signs and Symptoms of Aging: Acupuncture for Menopause** *by Kiiko Matsumoto*

**3** CEU/PDA Saturday, October 31, 9:00 am-12:00 pm

As the Baby Boomer generation ages, practitioners are likely to see an increasing number of patients with symptoms related to the changes of mid-life and beyond. Menopause can be an uncomfortable transitional phase for patients with underlying health problems. This course will cover both symptoms and diagnosis for common patterns in menopause, as well as Kiiko Matsumoto-style treatment strategies for these conditions.

**Evidence Based Medicine – How Does It Apply to Chinese Medicine, Why Do We Need It, and What Are the Issues?**

*by Belinda Anderson*

**1** CEU/PDA Saturday, October 31, 9:00-9:50 am

Evidence based medicine (EBM) is the universal language of Integrative Medicine. It unites all medical practices through the recognition that evidence of effectiveness is the best basis for choosing the most optimal patient treatment. Evidence, gained through research, comes in many forms, including scientific studies, textbooks, opinions of respected clinicians and scholars, and patient treatment outcome data. However, research is just one of three critical components of EBM, and must always be considered along with patient preferences, and clinician experience. Using and discussing evidence (both from external sources and collected through ongoing treatment) with patients improves treatment effectiveness, and enhances patient confidence and retention. Chinese medicine presents unique challenges to practicing EBM, being a medical practice based on thousands of year of anecdotal evidence whose paradigms differ significantly from biomedicine. Adoption of EBM as a practice standard in Chinese medicine will require that these issues are explored, and that the application of EBM methodologies is adapted accordingly.

**An Introduction to an Essential Notion in Chinese Medicine: Essence (Jing)** *by Elisabeth Rochat de la Vallée*

**1** CEU/PDA Saturday, October 31, 9:55-10:45 am

This course presents the various aspects of the notion of jing or essence in the classical and medical Chinese texts. This overview allows a better understanding of this concept in the theory, as well as in the practice of Chinese medicine.

**Overview of Dermatology in Chinese Medicine** *by Mazin Al-Khafaji*

**1** CEU/PDA Saturday, October 31, 11:10 am-12:00 pm

Al-Khafaji has treated and taught about unusual and difficult diseases with great success for the last 28 years, with a particular focus on skin, autoimmune and allergic diseases. In this course, he will present a brief outline of what Chinese Medicine can achieve for sufferers of dermatological conditions when it is correctly applied. This includes an explanation of fundamental concepts of dermatology, including pattern differentiation and case examples illustrating these approaches in a clinical context from Al-Khafaji's own practice.

## Keynote Address

**Roots of Planetary Herbology** *by Michael Tierra*

**2** CEU/PDA Friday, October 30, 7:00-9:00 pm

In this presentation, Michael Tierra will inform attendees how to expand their herbal horizons with the Way of Herbs. Planetary Herbology, which unifies Eastern, Chinese, and Ayurvedic herbal traditions, is about connecting more fully with the immediate natural environment. Each herbal tradition's own materia medica has a unique relevance and value that another tradition may lack. Ethnic and cultural boundaries are increasingly blurred, the international marketplace is rapidly expanding, and students

of herbal medicine are exposed to a wide variety of herbs from all over the world. Each herbal tradition's own materia medica has a unique relevance and value that another tradition may lack. For too many, mainstream medicine remains inaccessible due to the rising cost of health care insurance, but with the information that will be presented in this keynote, attendees will begin to learn how to effectively substitute expensive or difficult-to-find herbs with herbs from their own neighborhood.

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## Integrating Western Herbs Into a TCM Practice

by Michael Tierra

**3** Saturday, October 31, 2:00-5:00 pm  
CEU/PDA

This course will explore the evolution of Tierra's "Way of Herbs", which unifies Eastern, Chinese, and Ayurvedic herbal traditions, from its genesis in the 1960s to the present. Students will trace the fractured history of Western herbalism, starting from its ancient Greco-Roman-Arabic origins. With Planetary Herbology, students can learn how to effectively substitute expensive or difficult-to-find Chinese herbs with herbs they can find in their own neighborhood, wherever they live. The course will also cover the basics of preparing doses, making tinctures, and formulating herbs.

### An Essential Notion in Chinese Medicine: Essence (Jing)

by Elisabeth Rochat de la Vallée

**3** Saturday, October 31, 2:00-5:00 pm  
CEU/PDA

This course will illustrate de la Vallée's work with a presentation of a basic notion in Chinese medicine, which all too often remains vague and imprecisely defined. What is usually translated as essence, jing, is present at the core of life and as such is also a fundamental concept in Classical Chinese Medicine, both by itself or in conjunction with other basic concepts such as qi, jingqi or shen, jingshen, and eventually others. The three-hour workshop will examine jing as it appears in some basic texts in the medical classic Huangdi Neijing and in conjunction with its uses in some non-medical classics to illustrate the resonance in meaning that develops over centuries of the use of these terms. A presentation of the new Classical Chinese Medicine Interactive Database (CID) will end this workshop.

### Signs and Symptoms of Aging: Acupuncture for Menopause and Osteoarthritis by Kiiko Matsumoto

**3** Saturday, October 31, 2:00-5:00 pm  
CEU/PDA

As the Baby Boomer generation ages, practitioners are likely to see an increasing number of patients with symptoms related to the changes of midlife and beyond. Menopause can be an uncomfortable transitional phase for patients with underlying health problems. The focus of this course will look at symptoms that can arise in postmenopausal women, especially those related to pain associated with joint and bone degeneration. Strategies will be discussed that can be applied to all patients dealing with symptoms of osteoarthritis.

### Evidence Based Medicine – How To Find, Critically Appraise, and Use Evidence To Improve Patient Care and Build Your Practice by Belinda Anderson

**3** Saturday, October 31, 2:00-5:00 pm  
CEU/PDA

Evidence based medicine (EBM) is the universal language of Integrative Medicine. It unites all medical practices through the recognition that evidence of effectiveness is the best basis for choosing the most optimal patient treatment. Evidence, gained through research, comes in many forms, inclusive of scientific studies, textbooks, opinions of respected clinicians and scholars, and from patient treatment outcome data. However, research is just one of three critical components of EBM, and must always be considered along with patient preferences, and clinician experience. Finding, critically evaluating, and applying evidence are necessary skills for all medical practitioners to improve the efficacy of their treatments and to best inform patients. This workshop will outline how to practice EBM as a Chinese medicine practitioner, and how to use this for networking, practice building, and patient retention.

### Pompholyx Eczema by Mazin Al-Khafaji

**3** Saturday, October 31, 2:00-5:00 pm  
CEU/PDA

Al-Khafaji has treated and taught about unusual and difficult diseases with great success for the last 28 years, with a particular focus on skin, autoimmune and allergic diseases. In this course, Al-Khafaji will feature an in-depth presentation on Pompholyx Eczema, a common reoccurring symmetrical eczema on the palms of the hands, between the fingers, and occasionally on the soles of the foot. The course will cover clinically relevant descriptions of presentation, aetiological and pathological factors, and differential diagnosis, as well as clear description of clinical patterns and treatment options. All points will be illustrated with case examples from Al-Khafaji's own practice, explaining his treatment protocols.

## Symposium Party

Saturday, October 31, 7:00-11:00 pm

Be sure to join our 27th Anniversary Symposium Party in the Aviary Ballroom on Saturday, October 31st from 7–11 pm. Landing on Halloween, this year's party is sure to be extra special. Feel free to come dressed in costume! Enjoy live music, light dinner, and a cash bar. Make sure you bring your business card to enter the raffle sponsored by our generous Symposium exhibitors. We give away amazing prizes!

## Sunday, November 1, 2014

### Signs and Symptoms of Aging: Acupuncture for Internal Geriatric Diseases by Kiiko Matsumoto

**3** Sunday, November 1, 9:00 am-12:00 pm  
CEU/PDA

As the Baby Boomer generation ages, practitioners are likely to see an increasing number of patients with symptoms related to the changes of midlife and beyond. This course will focus on the treatment of the autonomic nervous system and sympathetic dominance as it relates to aging. As such this course will offer broad applications to symptoms of aging including pain, visceroptosis, prevention of pneumonia, constipation, incontinence, fatigue and more.

### Embodying the Medicine: Make or Break Treatment Efficacy with Personal Presence by Thea Elijah

**1** Sunday, November 1, 9:00-9:50 am  
CEU/PDA

In Western medicine, it is assumed that it is basically unimportant who is performing any particular procedure. It does not matter whether the practitioner is personally virtuous, or how they feel about the client. In the practice of Chinese medicine, our own alignment is very important, and it forms the basis of our relationship to the client and to the treatment principles that we serve. At the best of times, our unconscious "practitioner qi gong" helps us to generate extraordinary levels of efficacy (often dismissed by Western medicine as the placebo effect). At worst, students may be inadvertently sabotaging their own effectiveness in the treatment room, counteracting their own treatment strategies with body language, movement and voice. Elijah will teach simple yet effective "practitioner qi gong" for creating congruence between treatment intentions and a context which supports healing.

### How Can Acupuncture Benefit Stroke Recovery?

by Ming Qing Zhu

**1** Sunday, November 1, 9:55-10:45 am  
CEU/PDA

Stroke affects 700,000 people annually in the US. Students will find more and more patients seeking their help to maximize their functional recovery; students can make a great difference in their patients' lives by doing it right. This course will help students identify the essential elements for successful treatments.

### Preparing For Menopause: How a Well-Managed Perimenopause Sets the Stage For a Smooth Transition by Jill Blakeway

**1** Sunday, Novemer 1, 11:10 am-12:00 pm  
CEU/PDA

The decade before menopause is a time of subtle hormonal changes. Managing these changes can have a profound effect on a woman's subsequent experience. In this lecture, Blakeway will examine the hormonal changes women experience in their late 30's and early 40's from both a biomedical and a Chinese medical perspective, with an emphasis on correcting imbalances, using Chinese herbs, acupuncture, diet, and exercise to ensure a smooth transition at menopause.

### Brief Introduction to Zhu's Scalp Acupuncture by Ming Qing Zhu

**3** Sunday, November 1, 2:00-5:00 pm  
CEU/PDA

Zhu's Scalp Acupuncture (ZSA) is one of a number of specialized microsystem acupuncture techniques. This technique has yielded outstanding results for thousands of patients and has become recognized worldwide as one of the most effective methods for the treatment of a wide variety of medical conditions. It's simple, effective, and easy to learn. Zhu's Scalp Acupuncture has shown exceptional results in the following areas: neurological disorders, pain, rare/difficult conditions, and complementary urgent care.

## We Are Proud to Say We Have Over 50 Exhibitors Showcasing Their Products This Year!

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*Friday:* 11 am - 2:15 pm and 4:45-7:00 pm

*Saturday:* 11 am - 2:15 pm and 4:45-7:00 pm

*Sunday:* 8:30 am-1:00 pm

## Ready to Register? Go to

### Signs and Symptoms of Aging: Acupuncture for External Geriatric Diseases by Kiiko Matsumoto

**3** Sunday, November 1, 2:00-5:00 pm  
CEU/PDA

As the Baby Boomer generation ages, practitioners are likely to see an increasing number of patients with symptoms related to the changes of midlife and beyond. This course will cover external medical issues of aging and how to diagnose and treating underlying patterns using Kiiko Matsumoto-style Japanese acupuncture methods. It will focus on the treatment of pain, degeneration and dysfunction in the context of aging. Strategies will include structural treatments, including visceroptosis and buttock-scapula treatments, osteoarthritis and spine treatments, and ANS treatments to reduce sensitivity to pain.

### Whole Heart Connection: Cultivating Personal Presence in the Treatment Room by Thea Elijah

**3** Sunday, November 1, 2:00-5:00 pm  
CEU/PDA

Chinese medicine provides many styles and techniques to choose from. At the root of them all is a skill called tong shen ming, or Whole Heart Connection. This Whole Heart Connection is the basis of what in Western medicine is dismissed as the placebo effect, but in Chinese medicine is considered to be the highest form of healing. No matter what techniques are used, the quality of a practitioner's presence is potentially their greatest healing asset. In this workshop, Elijah will introduce students to simple yet profound practices to ensure that they are not inhibiting their own greatest efficacy in the treatment room, and that they are instead using their Whole Heart Connection to awaken the client to their own fullest healing resources.

### Treating Menopausal Symptoms Naturally by Jill Blakeway

**3** Sunday, November 1, 2:00-5:00 pm  
CEU/PDA

This course will explore the hormonal changes that take place at menopause, as well as the Chinese medical interpretation of the kinds of imbalances that lead to vasomotor issues, mood and emotional changes, menstrual irregularities and urinary and vaginal symptoms. Blakeway will focus on accurate diagnosis and the use of Chinese herbs and acupuncture, combined with lifestyle modifications, to treat these symptoms naturally. The aim is to support women in making this transition smoothly and easily. As part of that, we'll also look at risk factors for some of the diseases that are more common in post-menopausal women, including reproductive cancers, osteoporosis and heart disease. The emphasis will be on preventing these diseases using Chinese medicine to address risks.

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East Haradin  
Arnaud Versluys  
Michael Tierra (Afternoon Session and Keynote)  
Beau Anderson  
Elisabeth Rochat de la Vallée  
Mazin Al-Khafaji  
Thea Elijah  
Ming Qing Zhu  
Jill Blakeway

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A confirmation postcard will be mailed to you. Please contact the Pacific Symposium office if your information is incorrect. Bring the postcard to Symposium for a smooth registration.

#### CANCELLATION/ REFUND POLICY:

All cancellations must be in writing via email to [symposium@pacificcollege.edu](mailto:symposium@pacificcollege.edu). An administrative fee of \$50 is assessed on ALL cancellations, postmarked or email dated prior to Thursday, October 15, 2015. After Friday, October 16, 2015 a 50% cancellation fee will apply. NO refunds will be granted after Saturday, October 24, 2015, including no-shows. Refunds will be processed within 3 weeks of your request. Your refund will either be credited back to your credit card or mailed by check.

Schedule is subject to change. No audio or video recording will be permitted by cellphone or any other equipment. Violators will be asked to leave, and will be subject to badge confiscation with no refund opportunity.

#### Meeting Space and Seating

All seating is 'first come, first served'. All meeting spaces are locked while not in session, and no items can be left in rooms to reserve a seat. The doors will open and seats will become available 15 minutes prior to the 2 pm workshop start time. Please arrive 15 minutes early to lectures and workshops to secure a seat. Once a room is full and there are no seats remaining, please plan to go to another workshop location. No refunds will be granted based on no seats available to preferred courses.

## Conference Details

### Hotel Accommodations

**The Catamaran Hotel (Symposium site)**  
3999 Mission Blvd., San Diego, CA 92109  
1-800-422-8386  
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**\$179 Single/Double, \$199 Triple, \$219 Quad**

### Questions Regarding Hotels and Airlines

Contact Barbara Weber, (619) 334-3180 or [Conffoord@aol.com](mailto:Conffoord@aol.com), for information regarding room sharing options.

### Parking

Please note the following rates if you are planning to park at the Catamaran Hotel.  
**Hotel Guest:** \$13.00, \$17.00 Valet  
**Non-Catamaran Hotel Guest:** \$8.00 for the first hour, \$1.50 each additional hour, Day Maximum \$25.00. Hotel Parking validation stickers (all day parking for non-Catamaran guests) are available at the Symposium Registration desk after 11 am – rate \$13 per day.

\*Street parking is available. If you choose street parking, please note the street sweeping signs posted in the Pacific Beach area.

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Pacific Symposium provides up to 64 Continuing Education hours total.

\* You must pay the professional rate to receive CEU credit. Pacific College of Oriental Medicine Alumni receive 10% off the professional rate.

### Recording

By registering for the Symposium, you understand that lectures and presentations held within the Symposium venues may be video and/or audio recorded for internal, broadcast, non-broadcast and promotional purposes. As an audience member, some of these recordings may contain your likeness and/or your voice. By your registration, you grant Pacific Symposium and its affiliates the irrevocable right to record and use any recordings containing your likeness and/or your voice for internal, broadcast, non-broadcast and promotional purposes.

No personal audio or video recording will be permitted, dismissal from the conference will be enforced. High quality CD recordings will be made of most sessions and available for purchase during and after the Symposium.



## This Year’s Speakers

**Mazin Al-Khafaji** is one of the leading experts in the practice of Chinese Herbal medicine in the West, with particular expertise in dermatology, allergy and autoimmune diseases. Over the past 25 years he has taught his successful and innovative approach to clinical practice to many hundreds of students worldwide. Originally brought up and educated in the Middle East and later the UK, he began his studies in acupuncture and modern and classical Chinese in 1979. From 1983 onwards, he studied in Nanjing, Taiwan, and Shanghai, specializing in Herbal Medicine. His thorough grasp of the Chinese language earned him the first Sino-British scholarship to study internal medicine at the Shanghai College of Traditional Chinese Medicine alongside Chinese students, graduating as a Doctor of Chinese Medicine in 1987. On his return to the UK, he founded the Avicenna Centre of Chinese Medicine, where he has been in practice for the last 27 years. He runs his own traditional herbal dispensary and has developed the Avicenna range of topical products and skin creams to use as supportive treatment to internal therapy. Al-Khafaji also lectures at a postgraduate level and at conferences worldwide, and runs the Diploma course in Chinese Medicine Dermatology and the Register of Chinese Medicine Dermatologists. He is co-author of the international textbook *A Manual of Acupuncture*, and is working on his long awaited book on the treatment of dermatological conditions.

**Belinda Anderson** earned her PhD in Molecular Biology from the University of Sydney (Australia), and her Master’s degree in Acupuncture and Chinese Herbal Medicine from the New England School of Acupuncture (NESA, Boston, MA). Anderson has over 20 years of administrative, clinical, research and teaching experience. She is currently the Academic Dean and Research Director at Pacific College of Oriental Medicine (PCOM-NY), an Assistant Professor at Albert Einstein College of Medicine (Einstein, NY), and maintains a private practice at New York University Fertility Center. Anderson is widely published, serves as an editor for several complementary and alternative medical journals, regularly participates on National Institute of Health (NIH) National Center for Complementary and Integrative Health (NCCIH) study sections, and is a member of the Research Working Group of the Academic Consortium for Complementary and Alternative Health Care. She is also principal investigator of an NIH NCCIH five-year project entitled Evidence Informed Practice Faculty Training and Curriculum Development, at PCOM-NY, and is co-investigator of a clinical trial comparing community-style and individualized acupuncture for chronic neck and back pain, and osteoarthritis, in a low socioeconomic status patient population, funded by the Patient Centered Outcomes Research Institute (PCORI).

**Lia Andrews**, founder of Cinnabar Acupuncture, was first introduced to Chinese medicine when she faced her own health problems as a teen, leading her on to a lifelong study of health. Andrews received her BA from the College of William & Mary, where she was premed. She received her MATCM from Yo San University in 2005, where she was mentored in TCM Dermatology and Mian Shiang. She was trained in traditional Daoist style according to the lineage of the Ni family, including extensive study in qi gong. She went on to receive her DAOM from Pacific College of Oriental Medicine in 2012. There she participated in a study of acupuncture for chronic prostatitis at the Balboa Naval Medical Center. She published her capstone on the subject of TCM postpartum care practices. Andrews pioneered the holistic spa, opening Cinnabar Acupuncture in 2007, where she integrates Chinese medicine with massage, detox services, and natural skincare. She has treated thousands of patients for injuries, hormonal imbalances, psycho-spiritual disorders, and premature aging. During this time, Andrews travelled extensively around the country, and to China, Thailand, and Brazil to study with local masters. Andrews’ experience led her to author 12 books on Chinese medicine and women’s health, including *The Postpartum Recovery Program*. She published her discoveries in TCM medical journals and appeared on local TV shows. In 2015 she launched The Lia Andrews Show, a health show that airs weekly on her website and by podcast.

**Jill Blakeway** is a practitioner, author and speaker who appears regularly in the media to talk about Chinese medicine. Blakeway graduated from Pacific College of Oriental Medicine in San Diego in 1999 and is the founder and Clinic Director of the YinOva Center, which is a large multi-disciplinary complementary medical center in New York City. Blakeway wrote her first book, *Making Babies*, with a reproductive endocrinologist; published by Little Brown in 2009, it has so far been translated into 6 languages and remains a bestseller in its genre. Blakeway’s second book, *Sex Again*, on low libido, was published by Workman Press in 2013. Blakeway is a former Associate Professor of Chinese Medicine at Mercy College in New York and currently teaches Obstetrics and Gynecology

in the Doctoral Program at Pacific College of Oriental Medicine in San Diego. Blakeway has given a TED Talk and appears regularly on Dr. Oz. She has given Katie Couric acupuncture on TV, discussed libido on The Talk and Fox News, appeared on Good Morning America and The Early Show, and has been interviewed many times in the national print media.

**Marie-France Collin** is a PCOM graduate and licensed acupuncturist in Illinois and California, presently a faculty member of the Chicago campus, chair of the Acupuncture Department, and holds a private practice. She spent over 20 years in Asia learning the language and cultural aspects of her host countries. She studied tui na for both adults and children in various hospitals in China (Shanghai and Beijing) at different times between 1991 and 1998, then taught pediatric tui na to parents and caregivers in Hong Kong and at PCOM for both massage and acupuncture students.

**Thea Elijah** has been a student, practitioner, and teacher of acupuncture, herbal studies, and qi gong for more than 20 years. She is most interested in the intersections of different lineages, where we can explore diversity while maintaining rigor. Her own practice is rooted in classics studies with Elisabeth Rochat de la Vallée, 5 Element studies in the Worsley tradition, pulse studies with Leon Hammer, herbal studies with Ted Kaptchuk, and many others. Elijah is the former director of Chinese herbal studies at Academy for Five Element Acupuncture and Maryland University of Integrative Health (formerly Traditional Acupuncture Institute). She is also a teacher of the Shadhiliyya Order, a perspective that aids her in considering energy medicine from a cross-cultural perspective. At her students’ request, she has created a body of work called Whole Heart Connection, which draws upon the principles of both Chinese medicine and Sufism to bring these healing principles and practices into daily life. Elijah maintains a practice in southern Vermont and practices all over the United States.

**Andrew Gaeddert** began his studies with master herbalists from both the United States and China. He is founder and president of Health Concerns, the first company in America to produce traditional Chinese formulas for professionals. Since 1992, Gaeddert has been involved in researching the effects of herbs on gastrointestinal and immune disorders. He has worked with the University of California, the University of Zurich, and NCCAM (National Center for Complementary and Alternative Medicine). He was also regional coordinator for Citizens for Health, which was instrumental in the passage of DSHEA and saving Chinese herbs from extinction in the United States. In addition to being an internationally recognized authority on herbal medicine, Gaeddert is a lecturer and the author of several books, including Healing Digestive Disorders, Healing Immune Disorders, Healing Skin Disorders, Digestive Health NOW, Chinese Herbs in the Western Clinic, and his first novel, *Jailing of Dr. Hu*. He has been interviewed in the NY Times, appeared on the Gary Null show, and written articles for health publications and medical journals. Gaeddert has also helped thousands of practitioners by establishing the Herbal Helpline, a resource for practitioners to present their questions about herbs, formulas, and patient treatment. Gaeddert is a strong supporter of continuing education and recently established a scholarship at the American College of Traditional Chinese Medicine to help ensure access to education is available to all practitioners of Oriental medicine.

**East Haradin** is deeply committed to helping others actualize their full potential and wellbeing and has been a licensed acupuncturist and practitioner of integrative medicine since 1999. Her private practice has focused on the use of East Asian Medicine, nutrition, and aromatherapy in the treatment of anti-aging/rejuvenation, sports therapy, fertility enhancement, and overall wellbeing. In 2013 she joined the Mind Body Medical Group at the Chopra Center in Carlsbad, CA as a specialist offering acupuncture. In addition to a private practice, she shares her passion for this medicine as a professor and clinical supervisor at the Pacific College of Oriental Medicine in San Diego, CA. Her education includes a BA in Business, a Master’s Degree in Traditional Oriental Medicine and a Doctorate of Acupuncture and Oriental Medicine, with her research and clinical trial focused on combining aromatherapy with acupuncture. Haradin is also the founder of Gem Elixirz, a company offering unique aromatherapy products that combine the power of aromatherapy and gemstones for the purpose of transformative healing and wellbeing. As an approved Continuing Education Provider for acupuncturists, Haradin holds various workshops on subjects such as Incorporating Aromatherapy into your Practice & Life, Ageless – Ancient and Modern Day Secrets to Longevity & Facial Rejuvenation, The Art of Practice and The Business of Acupuncture.

**Bill Helm** was born in Tucson, AZ and has lived in southern California since 1952. He began his study of Asian arts in 1965, travelling to China to study tui na in 1986. Bill has been teaching and practicing tai chi chuan since 1973 and began to study Chen-style tai chi chuan in 1986, becoming a Disciple of Chen Xiao Wang in 2007. He currently resides in San Diego, CA and is Department Chair of Massage and Bodywork at PCOM and Director of the Taoist Sanctuary of San Diego and the Chenjiagou Chentaijiqian Branch school of California.

**Mark Kastner**, practicing since 1986, graduated from California Acupuncture College and spent four months in Beijing, China interning at Guan An Men Hospital. He wrote a pioneering book on alternative medicine in 1983 entitled *The Complete Guide to Alternative Medicine*, which has sold over 10,000 copies. He has specialized in acupuncture orthopedics and has worked with numerous professional sports teams, including the Lakers, Padres, and Chargers. For the last 6 years Kastner has been teaching orthopedics in the Pacific College of Oriental Medicine’s doctoral program. Currently he is in practice with his wife Marie at Circle of Living Acupuncture Wellness. His groundbreaking article on tendon repair with Chinese medicine was recently published in the Journal of Chinese Medicine.

**Kiiko Matsumoto** is a world-renowned acupuncturist and teacher of the unique Master Nagano-style of clinical-based strategies. She is the author of several books on acupuncture, based on a growing understanding and deep interest in classical Chinese medical texts. Her two-volume *Kiiko Matsumoto’s Clinical Strategies* is a seminal work and cornerstone of palpation-based acupuncture. She continues to travel all over the world to teach her style of acupuncture and sees an average of 60 patients each week at her private clinic in Newton, MA, allowing her to always re-evaluate and refine her techniques.

**Robert Nations** has been involved with healing and natural medicine for over 30 years. He graduated from Pacific College of Oriental Medicine in San Diego, CA and has been on their faculty since 1997. He also trained and taught at the Taoist Sanctuary of San Diego for 14 years. His studies of healing have included time in both China and Senegal. Robert and his wife maintain their private practice, Nations Integrative Acupuncture, in San Diego. He was a staff acupuncturist with Sharp Hospital in Coronado and currently contracts with the University of California, San Diego Center for Integrative Medicine as an educator and acupuncturist. In 2010, he was certified as the master trainer for the California Department of Public Health, teaching the Tai Chi Moving for Better Balance Program, designed for fall prevention in older adults. His teaching experience also includes the San Diego Community College Continuing Education Emeritus Program where he conducts classes in tai chi and qi gong.

**Whitfield Reaves** is one of the leading practitioners in the field of acupuncture sports medicine. He has specialized for over 30 years in the field of orthopedics and sports acupuncture. Licensed in California in 1981, Reaves earned a Doctor of Oriental Medicine degree in 1983. His thesis, “Acupuncture and the Treatment of Common Running Injuries”, demonstrated that TCM could address many clinical issues in sports medicine. His experience includes the 1984 Los Angeles Olympic Games as well as numerous track and field, cycling and other national events over the last 25 years. Reaves is the author of *The Acupuncture Handbook of Sports Injuries and Pain*, one of the few texts integrating traditional acupuncture with orthopedic and sports medicine. He is also the director of the Acupuncture Sports Medicine Apprenticeship Program. Reaves continues to teach seminars and apprenticeship-style workshops in North America and Europe.

**Suzanne Robidoux** is an international speaker and teacher focused on teaching classical and clinically proven acupuncture, moxibustion, and Chinese herbal medicine. Her clinical experiences and courses have a strong focus on treating various neurological and debilitating diseases. Robidoux, herself Canadian, has been living and studying in Asia for the last 15 years. During this time, she has focused her search on learning with the best teachers and physicians with remarkable clinical results. She has also found interesting and powerful masters and spent several years with them. Robidoux is now completing a clinical post-doctorate with the Beijing University of Chinese Medicine, with a focus on the effect of classical medicine on difficult diseases. She has also dedicated her life to documenting lost lineages or lineages that have not yet found a voice in the West, with books, courses, webinars and DVDs to make them available for like minded practitioners.

**Elisabeth Rochat de la Vallee** was born in Paris in 1949 and has studied Chinese literature, philosophy and medicine extensively, holding degrees in Philosophy and the Classics and in Chinese Studies. She collaborated with Dr Jean Schatz until his death in 1984, and with Fr Claude Larre for nearly 30 years, both as a researcher and translator on classical Chinese thinking and medical texts. After a year in Taiwan (1974-75), she began teaching at the Ricci Institute in Paris; she was afterward the Institute’s secretary general, until 2005. She worked for more than 12 years on the *Grand Ricci*, a comprehensive encyclopedic Chinese-French dictionary, and was its chief editor for the 4 last years before its publication in 2001. She is a senior lecturer on classical Chinese medicine at the European School of Acupuncture and has exceptional knowledge of the medical classics, grounded by her experience as an acupuncture practitioner. She teaches Chinese Philosophy, Chinese Classical Language and Chinese Traditional Medicine in more than 15 countries at various universities, institutes and schools. She has written numerous books, articles and pamphlets.

**Michael Tierra** is author of the best selling *Way of Herbs*, which has sold over 450,000 copies, *Planetary Herbology*, *Biomagnetic Herbal Therapy*, *The Way of Chinese Herbs*, and co-author with Candis Cantin of the *Herbal Tarot*, his wife Lesley Tierra of *Chinese Traditional Herbal Medicine Vol I & II*, with the late Dr. John Lust of the *Natural Remedy Bible*, and with Karta Purkh Singh Khalsa of *The Way of Ayurvedic Herbs*. Founder of the American Herbalist Guild in the US, Michael is a California-licensed acupuncturist and herbalist Oriental Medical Doctor with over 35 years of clinical practice. He is the formulator of Planetary Formulas and many other herb products by various companies. His East West School of Planetary Herbology, created with his wife, Lesley Tierra, reaches thousands of students throughout the world by way of its thorough and extensive herbal correspondence course. Michael is also an avid gardener and an accomplished classical concert pianist and choral conductor.

**Arnaud Versluys** is one of the very few Western scholars to have received his full medical training in China. He spent more than ten years at the Chinese medical universities of Wuhan, Beijing, and Chengdu, where he pursued his Bachelor, Master’s and Doctoral degrees in Chinese medicine. He also trained in traditional discipleship for many years. Versluys’ passion lies in the Han dynasty (200 CE) canonical style of Chinese medicine. He worked as a Professor at the School of Classical Chinese Medicine of the National College of Natural Medicine in Portland, Oregon, USA. In 2008, he founded the Institute of Classics in East Asian Medicine to offer postgraduate training in canonical Chinese medicine worldwide. Versluys travels worldwide to offer trainings in Chinese herbal medicine. He also has a private practice in Portland, OR, as well as a part-time practice in New Orleans, LA.

**Jeffrey Yuen** comes from two Daoist traditions: the Shangqing and Quanzhen schools. He was instrumental in developing the first PhD program in Classical Chinese Medicine in the State of California, and is the Director of Classical Studies in Daoist Traditions, an acupuncture school in Asheville, NC. He was the first recipient of the “Educator of the Year” award, conferred by the AAAOM. Yuen is most noted for bringing the influence of Daoism into the practice and teachings of Chinese medicine. He resides in New York City and serves as President of the International Tai Chi Institute.

**Ming Qing Zhu** was born in Shanghai in 1940. Upon graduating in 1964 from the first acupuncture class of the Shanghai University of Traditional Chinese Medicine, Zhu was sent to Guizhou and in no time had earned the reputation of a seasoned doctor because of his remarkable results. On November 24, 1987, he demonstrated his scalp acupuncture treatment on two hemiplegic patients at the Inaugural Conference of the World Federation of Acupuncture and Moxibustion Societies (WFAS), whereby the patients stood up and ambulated without support; since then he has gained international recognition. In 1989 he was invited by the Red Cross and the China Medical University to make the first medical professional exchange in forty years across the Taiwan Strait. The sensational response to his visit in Taiwan was described by the media as the “Whirlwind of Zhu’s Magic Needles.” Zhu was also honored with the title “Acupuncturist of the Year” in 1990 by the International Congress of the Chinese Medicine and Qi Gong. He is the author of *Zhu’s Scalp Acupuncture* and *Treatment of Acute Syndromes with Acupuncture and Moxibustion*, founder of Zhu’s Scalp Acupuncture Research and Education Foundation, and Director of Zhu’s Neuro-Acupuncture and Rehabilitation Center located in San Jose, California.



# Wind Of The Four Crooks

## An Atopic Eczema Case Study

By MAZIN AL-KHAFAJI

She was the last patient of the day, and although I can always muster an interest in a new case, it had been a gruelling day and I was keen to finish and head home. No question about it: it was her eyes that made me wake up and pay attention. I felt a shudder run down my spine. I had seen them, or something very similar many years ago. They had haunted me ever since, and although the passage of time had faded the impact, it all came flooding back again. Sixteen years ago a young woman in her early twenties had walked into my practice with severe and widespread eczema. The eczema was so intense that the unfortunate woman could not sleep at night nor rest in the day. Not only had the years of incessant itching worn her down and convinced her of her hopeless plight, but the stigma of her dry red scaly skin had also condemned her to a lonely existence. Instead of leaping into adult life, her teenage years had been a nightmare

as she became increasingly isolated and unable to socialise with her contemporaries. She had struggled for almost her entire life and her grip was slipping. I could see that her eyes, when she mustered the courage to look at me, were empty, lacking that indefinable glint, instead betraying years of desperate and anonymous suffering. This lack of a sparkle, which I have ever since associated with motivation, fulfilment, and the will to live, was utterly absent. Having taken a full case history and written the prescription, I ushered her to the door, my heart heavy, determined to do all in my power to get her better. I don't recall her exact words, but as she walked out the door she mumbled something about nothing being worth it. A week later her inconsolable mother called to tell me that she had taken her own life. Mercifully, it is rare that I see such eyes, but when Anne walked in at the end of my day, there they were again.

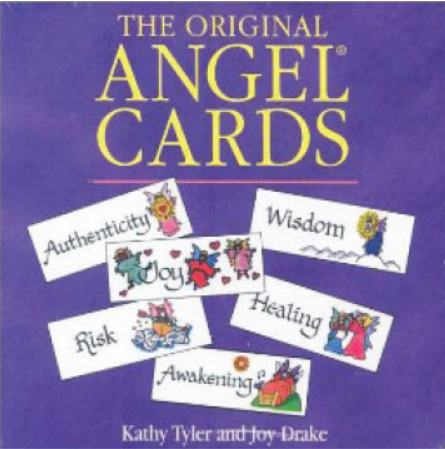
She was 31 years old and suffered from widespread atopic eczema. Almost her entire face and neck were covered with a dry scaly erythema, punctuated by eroded, excoriated lesions where she had dug her nails deep into her skin in an attempt to quell the unrelenting itch. Around her ears, I could clearly see yellow crusts that pointed to recent exudation of serous fluid, indicating localised infection. Around her desperate, empty eyes, her skin was darkened, thick and swollen from the constant rubbing and scratching that continued even in her sleep. The oedema around her eyes was accentuated further by two deep lines that ran from just below the inner canthi, around the lower border of her eyes, the so called Dennie-Morgan lines, so characteristic of more severe cases of atopic eczema. The few areas of her face that were not livid red with inflammation were unnaturally pale, so called white dermatographism, again a strong feature of atopy. Both inner and outer

aspects of her arms were also covered with red maculopapular lesions, with the telltale excoriated scratch marks. Scattered across the outer aspect of her forearms I noted pustular lesions, and as with the area around her ears, discreet yellow crusted lesions could be seen spread around her wrists and on the dorsum of her hands. Between most of her fingers a multitude of vesicles were apparent, surrounded by a halo of erythema and yellow crusts. Around her wrists and anti-cubital fossa, I was glad to see the skin was thickened, so that the skin markings were more pronounced into what is termed lichenification. I say I was glad, because after almost two decades of seeing 20-30 atopic eczema patients a week, I have learned to fear the lack of lichenification in severe eczema more than any other single sign as an indicator of a poor prognosis. Lichenification occurs

continued on page 29

6 Simple Ways to Spice Up Your Practice continued from page 10

positive card deck “*Miracles Now.*” There are even little tiny angel notes that have positive affirmations on them that you can have placed in a bowl in your waiting room. Patients can pull one while they are waiting and take it with them as a little positive pick me up.



There are several ways you can use them with your treatments. You can have your patient pull a card before treatment as a way to get them to share what is going on inside them. Perhaps the chosen card reminds them of something they forgot to mention to you, or the card really speaks to how they are feeling. So much is revealed in these discussions. You can also use them to provide encouragement.

I'd like to share one particular experience I had with using these types of cards. I had a fertility patient who was finishing her third month of treatments. She was becoming impatient, as she wanted to get pregnant now and didn't understand why it was taking so long. I asked her if she wanted to pull an angel card from Doreen Virtue's *Daily Guidance From Your Angels* card deck. She agreed and after shuffling the cards a bit she pulled one from the middle and it was the “Child” card which reads: “Your life purpose involves helping children – A child in Heaven is saying ‘I love you’ – Pregnancy or adoption might be part of your life.” She couldn't believe it and started to cry (I couldn't believe it either!). Then she said to me: “Hey, are they all Child cards?” inferring that I may have stacked the deck. I reached over to flip all of the cards and show her that there were 44 different types of cards in the deck, and a card fell on the floor between us. I picked it up and we both looked at it. It was the “Have Confidence” card. We both laughed. She felt encouraged and left my office. She conceived 2 weeks later. True story!

3. Auricular To Go. If you are not already using ear seeds, I recommend adding them to your practice—even if you just put a seed on Shen Men. I do not provide ear seeds on every treatment or even on the first treatment; I save it to add to future treatments. It can also be something that you can suggest at the end of a treatment. For example: “While you were resting, I was thinking that next time you come in, I want to give you ear seeds.” Now your patient has more reason to come back. Furthermore, I encourage you to educate your patients that the efficacy of auricular acupuncture has been proven many times. I recently searched PubMed for research articles and found up to a hundred studies. One study that I found really interesting used an fMRI to prove the efficacy of acupuncture. You can find it here: <http://www.ncbi.nlm.nih.gov/pubmed/24867864>. You can also get rather creative with your ear seeds. There are several options, including traditional vaccaria ear seeds, essential oil-infused ear seeds, silver seeds, gold seeds, and the now increasingly popular Swarovski Crystal Ear Pellets.

4. “Happy Tea” Packets. One of the simplest and most profound formulas in TCM is Gan Mai Da Zao Tang. I remember when I was in school, a local acupuncture center would serve this formula as a tea in their waiting room and call it “Happy Tea.” And, it really does make us happy by calming our shen and soothing our Liver qi. I have little packets of “Happy Tea” in a large mason jar in my office; I give single-use packets to patients as little giveaways/gifts. Using Microsoft Word, I created a simple little label with instructions on how to make the tea at home: It looks like this:

### Happy Tea 愉快茶

**Directions:** Add contents of package to 6-8 cups of water. Boil on medium heat for 25-30 minutes. Strain & drink throughout the day.

**Ingredients:** Da Zao, Gan Cao, Fu Xiao Mai

The single use giveaway packets cost you about \$0.75 after you buy the three herbs for the formula in bulk. Like the aromatherapy, this patient giveaway/gift pays off in spades. Patients love to try Chinese Herbal formulas, especially if they taste as good as this one. If patients really love your “Happy Tea”, sell the packets in

continued on page 32



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Why is there a discrepancy? Both statements are valid. What is more accurate is that acupuncture can significantly benefit stroke patients if it is done right, but otherwise it is of little value. Our own experience with stroke patients over the years demonstrates that when applied correctly, acupuncture can shorten recovery time to as little as two weeks and restore function to over 95% in some patients.

#### CASE REPORTS

1. In December 2010, a man in his fifties suffered an ischemic stroke. Three days after the stroke onset, he presented himself at our clinic with slurred speech, right hemiparesis and wheelchair bound. After two hours of acupuncture treatment, he was able to move his right upper extremity. The next day, less than 24 hours later, he stood up and walked on his own. On his third day of treatment, he climbed the stairs. He recovered all motor functions within two weeks.<sup>6</sup>
2. One night in 1992, a man suddenly dropped on the floor and became stuporous. A CT scan of his brain revealed a large lesion in the left cortex and basal ganglia, due to hemorrhage of the middle cerebral artery. Within seven hours, we started Zhu's Scalp Acupuncture treatment on him, and continued for 20 consecutive days. Two weeks later, he started to talk. After three months, he was able to return full-time to his acupuncture practice and administrative work.
3. In 1998, a 55 year-old man discharged himself from the Taipei Veterans General Hospital of Taiwan, despite his doctor's advice. It was the 8th day after his stroke when he arrived at our clinic in a wheelchair. His ischemic stroke left him paralyzed on the right side. Twenty minutes after applying scalp acupuncture needles, he stood up. An hour later, he took a few steps. After two weeks of daily acupuncture, he started walking with a cane. He ultimately regained all of his gross and fine movements. Today he is living his life as a fully recovered stroke patient and still persists in his daily exercise routine to stay healthy.
4. In 2007, an MD referred his 58-year-old male patient to us. This patient had an ischemic stroke and was bedridden for 20 days. On the first visit, he came in a wheelchair, but walked out of our clinic down two flights of stairs without assistance. After 10 daily Zhu's Scalp Acupuncture treatments of three hours each, he returned to work.



These four case histories are a small representative sample of the large number of stroke cases we have treated. What is common in these patients is that all were treated very early and had nearly full functional recovery.

#### DISCUSSION

How can we make acupuncture maximally beneficial for stroke patients? Below are recommendations based on Zhu's 50 years of clinical experience. There are a few important factors to consider.

#### I. TIME IS CRUCIAL

There is a misconception that acupuncture is contraindicated in the acute stage of stroke. Quite the contrary, acupuncture should intervene promptly, as early as the first hour after onset. Every hour of delay can potentially harm the outcome. The best treatment windows are, in decreasing order of therapeutic value: (1) the first three hours, (2) the first three days, (3) the first week, (4) the first month, (5) the first three months, and (6) the first six months. Both ischemic and hemorrhagic stroke can receive acupuncture treatment from the first day, but they differ in operation details.

Acupuncture has exceptional value in the first 3 to 72 hours. As evidenced by our own clinical cases, acupuncture seems to be able to salvage the penumbra surrounding the core of the stroke. Usually, about 72 hours after a stroke, cerebral edema starts to form and it is very damaging. Although the

mechanism is not well understood, acupuncture triggers changes in the brain that result in the protection of brain cells from necrosis, thereby preventing or reducing edema and consequently promising a better prognosis. The often dramatic results in our stroke patients suggest that acupuncture could promote the reperfusion of the brain in a very short time, perhaps through the activation of the collaterals or the dissolution of fibrin around the clot. More research is needed to understand the mechanism.

Rehabilitation, like acupuncture, should also start as soon as vital signs are stable. This is particularly important for aphasia and dysphagia. Our experience shows that if speech therapy does not begin within the first month, speech recovery will be almost impossible or very limited. Again, ischemic and hemorrhagic strokes call for different types of rehabilitation exercises during the acute phase.

#### II. THE TREATMENT METHOD

**1. Choose the right acupuncture style**  
Which acupuncture protocol is better for treating strokes? For many years Zhu had used conventional body acupuncture to treat strokes but was not satisfied with the results. So in the 1970's he started to explore scalp acupuncture and developed Zhu's Scalp Acupuncture. Often people are amazed at the outcome. For neurological conditions such as strokes, scalp acupuncture is by far the most effective.

#### 2. Do the correct needle manipulation

Acupuncture is not just about inserting needles at certain points; it is about regulating the qi flow. Hence manipulation of the needles is necessary to affect the qi. The technique and amount of manipulation vary with the type of stroke, stage of the disease, and the patient's condition. For example:

- If the patient is hypertensive, nervous or still hemorrhaging, very light stimulation is desirable on the scalp treatment areas.
- It is not uncommon for the paralyzed side of the body to feel colder to touch. When this happens, the classical technique "Setting Mountain on Fire" often brings miraculous change to the body temperature. "Unblocking the channels, warming the Yang and promoting qi", as these practices are called in Chinese medicine, will certainly benefit the patient's recovery. It should be noted, however, that this warming effect is not achievable through electrical stimulation.
- During the recovery stage, one can use stronger stimulation both on the scalp and body.
- A comatose stroke patient whose vital signs are stable needs stronger stimulation.
- Strong stimulation is contraindicated for spasms.

continued on page 30

most commonly around the inner aspects of wrists and ankles, behind the knees, antecubital fossa, and the neck. Most atopics are particularly prone to this. There are some, however, who, despite constant scratching, will continue to have smooth albeit red skin. It is such patients, who account for probably no more than 5-10% of cases that are the most recalcitrant to treatment. Why this should be I cannot say, but that it is so is indisputable.

The skin on her back and upper chest was similarly covered with inflamed red patches, erosion and occasional yellow crusting. Her nipples, a common site of eczema in women who are atopic, were also encrusted with yellow exudation that had dried hard, all but obliterating the area below.

As anyone who regularly treats dermatological disease knows, the skin is like an open book; the vast majority of information is there to be deciphered by those who can read the language. By closely observing the morphology, a formula will almost write itself. So what information had been gleaned so far?

The erythema is a clear indication of heat rampaging on the blood level; the fact that it was pronounced in colour and covered half her body simply signified intensity. The excoriation left by her scratching is clearly indicative of the itch that she experienced. Intense heat as we know generates wind, and one important sign of the presence of wind in dermatology is excoriated scratch marks. However it is not only wind that leads to itching, and when reflecting on the source of the itch in atopic eczema, dampness and heat need to be considered as well. Damp, by obstructing the circulation of qi and blood in the skin, can and frequently does generate itching. Neither is it just an academic question; to decide that the itch is predominately created by wind will necessitate the use of wind scattering herbs, while on the other hand, if dampness predominates, then damp draining herbs will need to be used. In many instances, to use wind scattering herbs when dampness prevails will not only have little impact on the itching, but by virtue of its dispersing nature will frequently compound the eczema and encourage it to spread. Likewise, if damp draining herbs were used in a patient who primarily suffers with wind type itching, the dampness will be drawn inwards instead of venting via the skin, and similarly may well exacerbate the eczema. There was clear evidence of both in Anna's case. Lesions principally congregated on the face and upper body is a useful indicator of prevalence of wind. This observation has to be tempered however by the presence of the erosion and yellow crusting that was so pronounced. Yellow crust-

ing indicates exudation of fluid from the skin that has subsequently dried, whilst erosion is a sign of retained dampness and heat. The profusion of vesicles also firmly points towards the existence of substantial amount of dampness and fire toxin. The pustules found on her arms are an indication of either excessive application of unduly greasy emollients, or if that were not the case, then a sign of fire toxin. Anna used a light emollient, so I had to conclude that it was not an artefact, but a sign of fire toxin. This fitted well with the other signs I had observed, fire toxin often being present in more severe and intense cases.

While when treating dermatological disease the primary source of information is available to you by observing the patients skin, other symptoms and signs are of course also of great importance when weaving a picture of the pathology.

Anne told me that she had lived with eczema since she was three months old. This early onset is typical of at least 50% of cases and, counter-intuitively, is a favourable sign. Unlike allergic asthma (a related condition), early onset is associated with a better chance of improvement. A late onset (eczema developed after age one) often correlates with a poorer prognosis. Although she did not have a history of asthma, she suffered from severe perennial allergic rhinitis, a common accompanying problem. This meant that she had almost continual nasal congestion and discharge, paroxysmal attacks of sneezing, and a concomitant poor sense of smell and taste, all made much worse with exposure to dust or certain animals such as cats or horses.

Itching invariably disturbed her sleep. This is an indication of heat in the blood and is almost a universal finding in the moderate and more severe cases. Other than that, she had a normal appetite and bowel function, and although her skin often became worse pre-menstrually, she had a normal menstrual cycle. She suffered no abnormal thirst, and aside from the burning sensation of her skin, she did not feel particularly hot.

Her tongue was predictably dry and red, with red prickles on the tip, extending towards the sides. The coating was thin and white. Her pulse was wiry and slightly rapid.

It is clear that she suffered from an underlying condition of heat in the blood with wind, complicated with dampness and fire toxin. In such instances a successful strategy can be found by first peeling, as it were, the outer layer, before attempting to tackle the core problem. What I intended to do first was to drain the damp heat and clear the fire. I used the following formula:

continued on page 36

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### CAN ACUPUNCTURE REALLY BENEFIT STROKE RECOVERY?

continued from page 28

#### 3. Perform appropriate Daoyin

As mentioned before, acupuncture is not simply an act of inserting needles at certain points. Acupuncture is a complete therapy that involves not only needling but psychological counseling, encouragement, building the patient's confidence to heal, helping the patient to relax, and teaching the patient how to talk and to move. All these things, which we call "Daoyin,"<sup>7</sup> should be organically integrated into every acupuncture session.

Daoyin has a much broader implication than conventional physical, occupational or speech therapy. Since its content can vary so much, an experienced acupuncturist customizes specific Daoyin activities to suit the needs of the patient at particular points in time. It requires the acupuncturist's knowledge of the nervous system, the musculoskeletal system, sports medicine, and rehabilitation science, and various traditional Chinese healing modalities such as martial arts and tai chi.

The following are a few examples of Daoyin:

- a. A stroke patient with dysarthria or Broca's aphasia is instructed to move his/her tongue in different directions and make sounds during acupuncture.
- b. A stroke patient with facial palsy is instructed to open/close his/her affected eye, and to exercise his/her face muscles during acupuncture.
- c. A stroke patient with paralytic lower limb is instructed to stand and walk with support.
- d. A stroke patient with paralytic upper limb is instructed to push and pull on his/her affected arm during needle manipulation.

Acupuncture with Daoyin is not a replacement but a great enhancement to conventional rehabilitation therapies. However, there are several areas where they differ.

- a. Our approach is proactive. We help a patient sit before he can sit on his own. We make the first attempt to stand when the patient cannot even imagine or believe it is possible. We provide whatever support the patient needs to regain his lost function instead of waiting for the first sign of the function to come back spontaneously. A proactive approach not only speeds up recovery, it boosts the patient's self-confidence.
- b. When doing Daoyin, we give the patient only minimal assistance while taking adequate precaution and safety measures. The more active efforts from the patient, the better the treatment results. By the same token, we discourage the use of orthoses; muscles, tendons

and ligaments can be strengthened by proper exercises. We have corrected countless foot inversion without using ankle-foot orthoses (AFO) and without causing any harm to the patient. Orthoses rob the patient's opportunity to exert effort on his/her own, resulting in muscle atrophy and permanent dependence on a brace.

- c. Unlike conventional therapy, we find that supporting a patient on his paralyzed side instead of the good side brings better outcome in the end.

#### III. THE RIGHT DOSE OF TREATMENT

Concentration and repetition are necessary to provoke and reinforce plastic changes in the brain. Hence, to achieve speedy functional recovery after a stroke, intensive treatments are paramount. The frequency and duration of acupuncture treatments (needling and Daoyin combined) must be adequate especially in the first three months. A daily three to six hours of focused and active Daoyin engagement is the most desirable. We recommend multiple short sessions to avoid fatigue. The average two to six hours a week that most stroke patients currently receive in outpatient rehabilitation facilities is dismally insufficient.

#### IV. MANAGEMENT AND PREVENTION OF COMPLICATIONS FOLLOWING A STROKE

- a. Seizures: Because anti-seizure medication is usually sedative, it hampers the rehabilitation process. Scalp acupuncture is an effective substitute without causing adverse side effects.
- b. Blood thinning: Avoid overuse of warfarin or coumadin to prevent secondary hemorrhage.
- c. Body postures: Spasticity does not set in immediately after a stroke, and can be avoided if more attention is given to body postures in the first month. Always keep the patient's head, body, and limbs in normal physiological positions, especially the joints—neck, elbow, wrist, fingers, ankle and feet.
- d. Dementia and Parkinsonism: These are common after-effects that manifest after a long period of inactivity as the brain atrophies.<sup>8,9</sup> Because they are not always apparent immediately after a stroke, they are often neglected in the rehabilitation process. Acupuncture is an excellent preventative treatment.

#### CONCLUSION

Acupuncture can be a major benefit to stroke rehabilitation when

continued on page 35

### WHAT IS SYMPATHY: REFLECTIONS ON SI JUN ZI TANG continued from page 15

that is needed, the sitting down at the kitchen table, so that unclarity can drain out and we can see what it is we've got. This is a different approach to a bog-down than the bai zhu atractylodes, which is the power to trudge and the falling into step and the gaining of momentum. Again, both treat dampness in different ways; both give sympathy in two different ways. What do you need? Someone to fall into step and help you trudge? Someone to sit down across the kitchen table and plain-talk? Or ren shen ginseng, someone to be steady for you like the ground under your feet?

I've been deliberately leaving gan cao licorice for last, because in ever so many situations it is a completely inappropriate form of sympathy: to give just a little sweetness. It is, however, the most overused form of sympathy. So often, gan cao licorice sweetness is absolutely not what's needed. Gag me! Come on, help me pull. Sit down at the kitchen table and let's talk turkey. Be firm for me, be ground, not mush. I don't need you to get all soft on me, man, I want you to help me get solid. So if gan cao licorice isn't what is needed, don't give it! The most over-used knee-jerk quick-fix, it may not be the form of sympathy that is needed.

When it is needed, it's really great. When it is sincere, sometimes that is actually what we really need: a little bit of milk straight from the mother's breast. For instance, to get really really physical, sometimes there is just no way that I can eat my lunch until I have some apricot juice first. I can't get right down to the hard work; I need to have a little bit of harvest now before I can get out in those fields and till the soil. When a person looks at their life and all they can see is a *pile of rocks* that they are going to have to accept and transform into nourishment, some gan cao licorice may be called for.

When we are faced with someone in that situation, there is this feeling that happens in the stomach meridian, especially when someone is crying: for instance when you are a nursing mother and you go to *Babies R Us*. Any time a baby cries, every woman in the store has a soaked blouse because there is this feeling that happens in the chest area. I am sure it must happen to men too; otherwise they wouldn't have nipples. We just want to give; I never knew before I had a child the meaning of this familiar feeling in my chest that happens whenever somebody is sad and in pain. I didn't know that this feeling is the stomach meridian letting the milk down, the milk of kindness. This is gan cao licorice; this is that moment when all you've

got to eat is rocks, and I know that that is what the Tao has given you for food, but can't I give you a little bit of apricot juice so that you are not *starving* between now and when you have tilled and tended and harvested from your own rocky field?

All through my teenage years, I was sent to many a shrink to try to do something about me. There was one who, while she did not necessarily do me all that much good, was part of this one moment in which she did me *so much good* with exactly this gan cao licorice type of sympathy. She was this very old woman—I didn't know how old she was, she looked like she was in her seventies or something—listening to this fifteen-year-old talking about all the crazy, absolute horrible mayhem that a teenager in Manhattan could be in to. And at the end of listening to it, she sighs and says, "would you like some tea?" and I actually really got it, that she really got it, that there *actually* is not anything that she could do to *change* it except give me some tea. I really *appreciated* that. I really appreciated somebody getting that they are actually not going to be able to make it better, and so they are giving me a sweetie, some little sweet thing—like, you've got a *disaster*, would you like a cookie? It is not *in any way* saying that this is *transformation*; that is going to take a long time. But it may at least help with the acceptance, so you can get it down your stomach. When your life is like nothing but a field full of rocks, sometimes some gan cao licorice that's really sincere, offered from the Heart, that "can I give you *something* sweet to eat right now?" is really, really helpful and really, really nice. So I do not in any way want to disparage the spirit of sympathy of giving gan cao licorice. Sometimes it really does save your life to have somebody just give a kind word. It gives you the ability to taste the sweetness, the ability to taste what transformation is for, and then you have a little more stomach for your field of rocks. **OM**

**THEA ELIJAH** has been a student of Chinese herbal medicine and acupuncture for over 20 years. She is the former director of the Chinese Herbal Studies Program at TAI Sophia Institute and the Chinese Herbal Studies Program at the Academy for Five Element Acupuncture. Elijah maintains a private healing practice, incorporating her Chinese medical knowledge and heart centered healing. At the request of her clients and students, she has developed a series of workshops teaching Whole Heart Connection (formerly Medicine Without Form). She currently teaches Chinese Medicine, Sufi Healing, and Whole Heart Connection across the United States.

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your office. You can also use this formula as a kind of “gateway” formula to warm them up for more advanced formulas in the future.

**5. Gemstones.** So many people love, and are attracted to, gemstones. Gemstones are energetic just like many facets of our medicine so they are a perfect complement to a TCM practice. Now, I don’t always use gemstones in my treatments. Rather, I pull them out in order to add something new to my treatments for my regulars, or for a patient who really needs an outside-of-the-box treatment. Sometimes, after a treatment, I will tell a patient, “I sometimes incorporate gemstones into my treatments. On your next visit I’d like to add some gemstones if you are up for it.” If you do this your patient is excited and already looking forward to their next treatment with you, as they know that they get to try something new. With gemstones you can be basic or elaborate, as there are as many stones as there are single herbs in our Materia Medica.

For a really basic gemstone addition, you can have your patient hold rose quartz in their left hand while being treated (the left hand is considered the receiving hand). Rose quartz is considered the *Universal Stone of Love*, nourishing the heart, spirit, and shen, and recharging and opening the heart to universal love. You can also place chunks of rose quartz on acupuncture points or chakras.

Amethyst is another great healing stone and has been used by many cultures in healing practices to balance the body, calm the mind, heal grief, promote emotional balance, ease stress, encourage tissue regeneration and much, much more. Like the rose quartz, you can have the patient hold a piece of amethyst in their left hand or place it on points or chakras. Gemstones also make for an inexpensive and fun giveaway/patient gift. For example, you can use

✿ Whether you are a brand new practitioner or a “seasoned” one like me (so much better than saying “old”), *it is absolutely vital to keep your practice fresh and keep your bag of tricks filled so you can approach all types of situations. By doing so, you will not only increase patient satisfaction but also greatly increase your own job satisfaction.*

rose quartz or amethyst in a treatment, then give your patient a small stone to take home. Small pieces of these stones cost as little as \$0.10 to \$0.25—very little investment for a great reward. Like the cotton ball with aromatherapy, you would be surprised how much your patient will value this tiny little stone.

**6. Healthy Food Giveaways.** We can educate our patients on proper nutrition, recommend they drink a lot of water after a treatment, or suggest that they go out and buy specific foods and/or supplements, but the likelihood that they will actually follow our advice and go drink a bunch of water or buy quinoa or chia seeds can be slim to none with many patients. What I like to do is have what I call “healthy food giveaways” in my office. I believe that if our patients have a taste of what we are recommending, they are more likely to go out and buy it for themselves. A few simple and fairly inexpensive healthy food giveaways are:

a. Chia Seeds. I have a large bag of organic chia seeds in my office along with small baggies. I can send a patient home with a “sample” of chia seeds to try. I can also place some chia seeds in a water bottle while they are getting their treatment and send them home with chia seeds in water. For flavor I sometimes add an Emergen-C pack to the water-chia combo. Once they try chia seeds and like them, they are more likely to go buy them for themselves and receive the super benefit of having more Omega 3’s and fiber in their diet.

- b. Emergen-C and Mineral Supplement Packets. I always have a few of these in the office. They are great to send patients home with or even have them drink while they are in the office. These cost about \$0.30 when you buy a box.
- c. Bottled Water. In addition to a larger water dispenser I like to have single bottled water for patients to take home after treatment, especially after receiving cupping. That way I know they are getting hydrated and flushing out toxins.
- d. Goji Berries. Like the chia seeds, I give little plastic baggies of goji berries to patients and tell them to try them by adding to hot water, tea or oatmeal. Sometimes I even steep some berries in hot water while they are getting treated and send them home with puffed up goji berries in warm water. This is a great Blood tonic and a way to get your patients to try them.
- e. Raw Gan Cao – These are great for the onset of external attacks, slight sore throat, or just feeling a bit “out of it.” Gan cao is so harmonizing and mild that I have little sealed baggies of gan cao that I will give to patients with instructions to steep the sticks in hot water and sip it throughout the day, making sure to re-fill the mug of hot water and reuse the same sticks for a few steeps. You can also steep some gan cao in hot water while they are getting treated and have them go home sipping it.
- f. Healthy Fast Food. I have single serving bags of anti-oxidant trail mix (Trader Joe’s brand). The mix includes only almonds (Vitamin E), walnuts (great brain food and Omega-3s), and cranberries (antioxidant). These are perfect for patients who consume a lot



of junk food. You can introduce them to a more healthy type of fast food for busy, eating-on-the-go lifestyles.

These are just six ideas, but the possibilities to enhance your treatments and keep them fresh and exciting are nearly endless. I didn’t even begin to explore ideas like adding sacred geometry or simple qi gong postures to your treatments.

If you are still finding yourself burned out from private practice, do yourself, and your patients, a favor by working hard to relieve that burn-out. It really affects you and your patients in a negative way. Find ways to recharge your own batteries and stay passionate about your chosen field; maybe start your own health-related or TCM product line. I used to make myself aromatherapy sprays to use in practice. Patients loved them and kept asking me to make them a spray, and as a result I ended up making an entire product line. It is also very easy to create an herbal liniment or therapeutic product line and put your name or practice name on the label. Just going through the creative process of developing products or unique services can prevent burnout and stoke the fire of your passion for this medicine and helping others. If you are not interested in creating a product line, how about receiving training in a synergistic modality such as feng shui, Chinese face reading, fertility, facial rejuvenation, the Tapping Method, reiki, or even shamanistic healing? When you feel ready, you can begin to add these modalities to your treatments. It has been said that variety is the spice of life, and we know from TCM that spice can be very helpful in treating stagnation. Prevent stagnation and burnout for yourself and your patients: keep your treatments fresh and exciting. I hope you have found this helpful. Be well. Be happy. Be successful! **OM**

**EAST HARADIN** she shares her passion for this medicine in her private practice and as a professor and clinical supervisor at the Pacific College of Oriental Medicine. Haradin is also the founder of Gem Elixirz, a company offering unique aromatherapy products that combine the power of aromatherapy and gemstones for the purpose of transformative healing and well-being.



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administered correctly. Results are most remarkable in the acute stage. First, treatment must begin promptly. Earlier intervention promises fewer deficits. Second, an effective acupuncture system should be employed. Scalp acupuncture excels over body acupuncture in treating neurological conditions such as strokes. After insertion, needles should be manipulated to ensure qi flow. Third, appropriate Daoyin must be carried out simultaneously. Finally, treatments have to be repeated frequently for reinforcement. In this manner a stroke patient will achieve a faster and more complete recovery.

By sharing our experience, we hope that acupuncture treatments for stroke can be optimized and that future research on this topic can yield more meaningful results. **OM**

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On November 24, 1987, **MING QING ZHU** demonstrated his scalp acupuncture treatment on two hemiplegic patients at the Inaugural Conference of the World Federation of Acupuncture and Moxibustion Societies (WFAS), whereby the patients stood up and ambulated without support; since then he has gained international recognition. In 1989 he was invited by the Red Cross and the China Medical University to make the first medical professional exchange in forty years across the Taiwan Strait. The sensational response to his visit in Taiwan was described by the media as the “Whirlwind of Zhu's Magic Needles.” He is the author of “*Zhu's Scalp Acupuncture*” and “*Treatment of Acute Syndromes with Acupuncture and Moxibustion*”, founder of Zhu's Scalp Acupuncture Research and Education Foundation, and Director of Zhu's Neuro-Acupuncture and Rehabilitation Center located in San Jose, California.

#### THE SCIENCE OF MEDICINAL MUSHROOMS continued from page 6

is widely used in Asia to treat immune disorders, heart disease, erectile dysfunction, asthma, chronic fatigue, and diminished kidney function.

#### Turkey Tail

**Scientific Name:** *Coriolus versicolor*  
**Chinese Name:** Yun zhi  
**Clinically Effective Dosage:** 3-9g/day of extract in pill form

Turkey Tail is traditionally used to treat dampness and phlegm. It is one of the best-researched herbal medicines, with over 400 trials demonstrating effectiveness as an adjunct to standard cancer care (chemo- and radiotherapy). It is believed to have antitumor effects based on Japanese and Chinese research and also stimulates NK cell activity. The U.S. Food and Drug Administration (FDA) re-

cently approved a clinical trial for a Turkey Tail extract that will examine its effects on advanced prostate cancer in combination with conventional chemotherapy. Another trial—pending FDA approval—will test the effects of taking the extract along with a vaccine treatment in women with breast cancer. “We didn't discover Turkey Tail,” says lead investigator Leanna J. Standish, PhD, ND, L.Ac, FABNO, medical director of the Bastyr Integrative Oncology Research Center. “It's been used in Asia for thousands and thousands of years, and it turns out to be a really potent immune therapy.”<sup>1</sup> In a study published recently in the peer-reviewed journal *ISRN Oncology*, Bastyr and the University of Minnesota found that a Turkey Tail supplement may support conventional breast cancer

therapies by strengthening patients' immune system.

#### TIPS FOR PRACTITIONERS WISHING TO INCORPORATE MEDICINAL MUSHROOMS IN THEIR PRACTICE

In my experience most health professionals are not aware of the complexity in selecting medicinal mushrooms. One of the biggest issues is species identification; other issues include processing and dosage. While some mushrooms can be selected at mushroom specialty stores and Asian markets and are suitable to be included in soups, teas, or powdered formulas, certain therapeutic mushrooms such as Ganoderma, Cordyceps, and Turkey Tail are best used in the forms pills made from powdered extracts by concentrating active compounds. **OM**

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Cordyceps



Turkey Tail



Sheng Di Huang (Rehmanniae Radix) 24  
Mu Dan Pi (Moutan Cortex) 24  
Chi Shao (Paeoniae Radix rubra) 9  
Long Dan Cao (Radix Gentianae) 9  
Huang Qin (Scutellariae Radix) 9  
Zhi Zi (Gardeniae Fructus) 9  
Ma Chi Xian (Herba Portulacae) 15  
Zi Hua Di Ding (Violae Herba) 15  
Bai Xian Pi (Cortex Dictamni Dasycarpi Radicis) 12  
Xi Xian Cao (Herba Siegesbeckiae Orientalis) 15  
Hai Tong Pi (Erythrinae Cortex) 12  
Fu Ling (Poria) 12  
Ze Xie (Alismatis Rhizoma) 12  
Gan Cao (Glycyrrhizae Radix) 6

This is of course based on *long dan xie gan tang* with modifications. Sheng Di Huang (Rehmanniae Radix) is almost always the chief ingredient in treating eczema. It has an unparalleled ability to cool the blood without injuring it. I often use a larger dose (30-45g or even 60g), but in Anna's case I did not, because of the presence of substantial dampness. Mu Dan Pi (Moutan Cortex) is second to none at plumbing the depths to reach and drain the hidden heat, so characteristic of atopic eczema. I use a larger dose (up to 30g) when the eczema is accompanied by allergic rhinitis, having as it does a specific action in treating it. Although my focus is on treating the eczema, I have found that in patients who have rhinitis, the nature of the heat that leads to the eczema, responds particularly well by using a large dose of Mu Dan Pi (Moutan Cortex) when draining heat form the blood. Chi Shao (Paeoniae Radix rubra) will act synergistically with Sheng Di and Mu Dan Pi (Moutan Cortex), accentuating their action. Of equal importance in this recipe is Long Dan Cao (Radix Gentianae), bitter, cold and fiercely drying, and outstanding at clearing damp heat from the skin. Although unpleasantly bitter, it is an excellent herb to use in cases where dampness presents so obviously. Huang Qin (Scutellariae Radix) and Zhi Zi (Gardeniae Fructus) act as its helper, aiding its action.

Ma Chi Xian (Herba Portulacae) is a specific ingredient for removing dampness and resolving fire toxin from the skin. Its forte is the treatment of dampness when it manifests as frank exudate (dampness may not always lead to weeping skin). Zi Hua Di Ding (Violae Herba) is used in tandem to strengthen its fire toxin resolving properties. Bai Xian Pi (Cortex Dictamni Dasycarpi Radicis), Xi Xian Cao (Herba Siegesbeckiae Orientalis) and Hai Tong Pi (Erythrinae Cortex) are all excellent herbs to alleviate itching from dampness when it coexists with wind. Herbs such as Fang Feng (Saposhnikoviae Radix) and Jing Jie (Schizonepetae Herba), though very effective

✿ As anyone who regularly treats dermatological disease knows, the skin is like an open book; *the vast majority of information is there to be deciphered by those who can read the language.*

at ameliorating itching, may well worsen the condition in cases like Anne's since they have a scattering effect. Fu Ling (Poria) and Ze Xie (Alismatis Rhizoma) are of course utilised to conduct the heat and dampness out via urination. Though not considered amongst the primary ingredients in the formula, they are none the less essential in facilitating the removal of damp heat from the body. This is highlighted by the adage "damp can not be cleared without activating urination."

I saw her a week later, and already there was clear improvement in her skin. All weeping from her skin had stopped, with the exception of the nipples. The erythema was reduced and she had 30-40% reduction in itching. I re-prescribed the above formula with the addition of 12g of Yin Chen Hao (Artemisiae Scopariae Herba), a specific for damp eczema of the nipples.

When I saw her two weeks later, there was further and substantial improvement. Because the itching was reduced, she was disturbed less at night, which meant she was less exhausted in the day. I re-prescribed the formula for a further two weeks with the addition of Bai Ji Li (Tribuli Fructus) 15 to further quell the itching. I judged that Bai Ji Li (Tribuli Fructus), though predominantly a wind scattering herb, would be of benefit since much of the dampness had already been removed. When I saw her two weeks later (5 weeks since the start of treatment), it was clear that she was doing very well indeed. I could sense that, though she didn't want to give herself false hopes, she was cautiously elated. Her guarded optimism was reflected in a more natural and sparkling gleam in her eyes. She could now muster a smile and even a laugh. Her skin was a good 75% better, and each day brought further improvement. From my point of view, the dampness and fire toxin, such clear factors in acute exacerbation of the underlying hot blood, had been driven off, and it was time to alter the recipe to reflect the changed circumstance. With that in mind, I prescribed the following:

Sheng Di Huang (Rehmanniae Radix) 30  
Mu Dan Pi (Moutan Cortex) 24  
Chi Shao (Paeoniae Radix rubra) 9  
Fang Feng (Saposhnikoviae Radix) 9  
Bai Xian Pi (Cortex Dictamni Dasycarpi Radicis) 12

Bai Ji Li (Tribuli Fructus) 15  
Xi Xian Cao (Herba Siegesbeckiae Orientalis) 12  
Lian Qiao (Forsythiae Fructus) 12  
Tong Cao (Tetrapanacis Medulla) 4  
Gan Cao (Glycyrrhizae Radix) 4

Once the dampness has been significantly reduced, it becomes important to increase the dose of Sheng Di Huang (Rehmanniae Radix), the primary ingredient, from 24 to 30g. The only side effect of such a large dose is mild and transient loose bowels (which in fact is an indications that the correct dose has been reached, and should be elicited in hot blood type eczema as a matter of course). Ma Chi Xian (Herba Portulacae) and Zi Hua Di Ding (Violae Herba) are no longer required, though it is prudent to retain a fire toxin resolving element in the form of Lian Qiao (Forsythiae Fructus). Many atopics who are prone to bacterial infection develop an allergic reaction to the toxin from the commonest bacteria that affects the skin, *staphylococcus aureus* (aureus comes from the Latin for gold, named for the characteristic golden exudation it produces), which of course sets up a vicious cycle where the skin is constantly stimulated to further inflammation. Lian Qiao (Forsythiae Fructus) is very well tolerated and excellent at dealing with low grade infections that may otherwise gain a foothold. Tong Cao (Tetrapanacis Medulla) is a worthy substitute for the now banned Mu Tong (Caulis Mutong) in draining dampness and heat via urination when hot blood dominates.

Aside from a minor setback following excessive celebration on her birthday, Anne continued to show rapid improvement. By week 12 of the treatment, 95% of her eczema had cleared with, for her, the unexpected bonus of substantial improvement of her allergic rhinitis. Now only minor erythema around her wrists and neck remained. The texture of her skin was all but normal, and even the post-inflammatory pigmentation that follows the clearing eczema was hardly discernable.

In Chinese medicine, the classic approach to consolidating the treatment for eczema is to nourish the skin via the blood and yin tonics. Though this is important to ensure a stable state upon coming off the herbs, a word of caution when treating atopic eczema: to use the standard tonics, will more often than not, lead to fanning of the flames and exacerbation of the eczema. A large

portion of the heat in atopics is hidden heat, which in practice means that tonics such as Dang Gui (Angelicae sinensis radix) and He Shou Wu (Polygoni multiflori radix) should be used with caution. As such, I prescribed the following as her final formula, initially to be taken daily, but with instructions to wean herself off of them as she grew confident that the skin would not relapse.

Sheng Di Huang (Rehmanniae Radix) 30  
Mu Dan Pi (Moutan Cortex) 9  
Dan Shen (Salviae miltiorrhizae Radix) 15  
Xuan Shen (Scrophulariae Radix) 15  
Ji Xue Teng (Spatholobi Caulis) 15  
Fang Feng (Saposhnikoviae Radix) 9  
Bai Xian Pi (Cortex Dictamni Dasycarpi Radicis) 12  
Dan Zhu Ye (Lophatheri Herba) 9  
Tong Cao (Tetrapanacis Medulla) 4  
Gan Cao (Glycyrrhizae Radix) 4

Anne has remained well since this treatment three years ago. In winter, she needs to make sure to apply emollients regularly to guard against skin, but in essence she leads a normal life, free of the agony of severe eczema. Although atopic eczema (known as *si wan feng*, 四 灣風, 'wind of the four crooks' in traditional Chinese medicine) has probably existed for many centuries, it must have been extremely uncommon in previous centuries, and in fact has only reached the epidemic proportions we see today in modern industrialized nations. It is therefore a great tribute to Chinese medicine, and to the insights made by so many, that by carefully using the concepts that have been formulated over centuries, a "modern" disease like atopic eczema can be so successfully controlled and managed. **OM**

**MAZIN AL-KHAFAJI** is one of the leading experts in the practice of Chinese Herbal medicine in the West, with particular expertise in dermatology, allergy and autoimmune diseases. Over the past 25 years he has taught his successful and innovative approach to clinical practice to many hundreds of students worldwide. Originally brought up and educated in the Middle East and later the UK, he began his studies in acupuncture and modern and classical Chinese in 1979. From 1983 onwards, he studied in Nanjing, Taiwan, and Shanghai, specializing in Herbal Medicine. His thorough grasp of the Chinese language earned him the first Sino-British scholarship to study internal medicine at the Shanghai College of Traditional Chinese Medicine alongside Chinese students, graduating as a Doctor of Chinese Medicine in 1987. On his return to the UK, he founded the Avicenna Centre of Chinese Medicine, where he has been in practice for the last 27 years. He runs his own traditional herbal dispensary and has developed the Avicenna range of topical products and skin creams to use as supportive treatment to internal therapy.

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one's life. Women are far less at risk of injuring their jing during sex than men. They are advised to practice moderation in sexual frequency and avoid intercourse when intoxicated or during menstruation.<sup>10</sup>

Though women are biologically resistant, cultural constructs surrounding women and sexuality can be highly injurious to health. Sexual intercourse before sexual maturity can deeply injure yin and affect menstruation and fertility later on in life.<sup>11</sup> Prostituted women, sexual violence victims, and molested girls are greatly injured by sex. Many women who have avoided these experiences may still suffer from body image issues or the burden of pleasing others.

If women are taught to have sex only when their bodies, hearts, and minds are all in agreement, this naturally leads to sexual moderation that is appropriate for their bodies

and lifestyles without the imposition of arbitrary rules. In addition to this attitude change, women's sexual cultivation practices typically include breast massage, ovarian massage, vaginal strengthening, and the circulation of sexual energy throughout the body. The stimulation and circulation of sexual energy has a rejuvenative effect on the body and stimulates hormonal balance.

CONCLUSION

Longevity medicine is the foundation of our medicine, particularly in the specialties of cosmetic acupuncture, fertility treatments, and menopausal care. If TCM practitioners are to do more than offer relief from symptoms, we must educate our patients on how to live better. Longevity practices need to be taken from theory into practices that can be incorporated into patient lifestyle.

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more potent. Red ginseng, or *Hong Shen*, is ginseng that has undergone a special steaming process that activates the ginsenosides and makes them more bioavailable. Korean red ginseng is far more potent as a Qi and Yang tonic than other types of ginseng but must be treated with respect. For example, it should be balanced with Yin nourishing herbs, particularly in women.

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LIA ANDREWS, DAOM, LAC is an educator, author, and practitioner of Longevity Medicine. Her books include *7 Times a Woman*, *The Postpartum Recovery Program™*, and *Secrets of the Daoist Courtesan*. She co-owns Cinnabar Acupuncture and co-produces *The Lia Andrews Show*.

NAOMI C. BROERING HISPANIC HERITAGE AWARD/GRANT continued from page 4

Libraries Association (SLA) Winifred Sewell award, and the SLA Professional award. In 2003, Naomi received the Marsha Noyes Lifetime Achievement Award, the highest honor given by the MLA. She served as President of the MLA, the first known president of Hispanic lineage, in 1997, and in 1995, received Georgetown University's Distinguished Service Vicennial award.



Big Data Fusion of Biomedical and Library Informatics for Patient Care at UCSD



Linda Walton, MLA President and Naomi C. Broering, PCOM's Dean of Libraries

Naomi, PCOM's Dean of Libraries, graduated cum laude with a BA from California State University Long Beach in 1960. She earned an MA in History in 1963 and an MLS in Library Information Science from UCLA, completed in 1966. As a Doctoral candidate at UCLA, she completed all her PhD course work in History in 1965. She was an NIH Postgrad Fellow of the National Library of Medicine (NLM) in 1967 and earned a Government Management Certificate at George Washington University (CGS) in 1973. Naomi is also a

founding member of the Friends of NLM, and the first librarian to be a Board of Directors officer.

Prior to joining PCOM, Naomi was Director of the distinguished Georgetown University Medical Center Library and Executive Director of the Houston Academy of Medicine Texas Medical Center Library, the second largest medical library in the country. She moved to San Diego in 1999 to retire, but decided she wanted to continue her professional work,

joining PCOM in 2001 as a part-time librarian and becoming Dean in 2003.

Naomi is a prolific writer and grant developer. She has written over 200 journal articles and over 20 grants. Since 2003, she has collaborated with Gregory Chauncey on nine government contract awards for PCOM from the NLM to provide Health Information Literacy Outreach Services. Recent NLM projects include Disaster Health Information, Emergency Preparedness, HIV AIDS Services, and Promoting MedlinePlus

Connect in San Diego. In April 2015, Naomi was invited by the University of California San Diego's Biomedical Informatics Department Chair to present a Distinguished Lecture on "Big Data Fusion of Biomedical and Library Informatics for Patient Care" (<http://nnlm.gov/psr/newsletter/2015/06/02/express-outreach-award-highlights-teaching-mobile-access-to-health-information-and-promoting-medlineplus-connect>) to their faculty and post-doctoral fellows. **OM**

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