



Oriental Medicine

SUMMER 2018

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Dear Colleagues,

As part of our 30th anniversary celebration of Pacific Symposium, we want to take Chinese medicine continuing education one step further. In addition to speakers who will address the treatment of commonly and uncommonly seen disorders, we have asked many of our presenters to tackle the challenge of “peak performance,” i.e., how Chinese medicine can help healthy patients achieve lofty goals, athletic performance, and ensure optimal health and extended “health span.” After all, the best medicine prevents illness and helps patients (should we call them patients if they’re not sick?) get the most from their precious lifetime. We hope you enjoy such topics as The Golden Elixir of Longevity and Immortality; Herbs and Nutrients for Athletic Performance; Wu Wei Zi: Fruit for Peak Performance; Creating Exceptional Treatment Experiences; Yangsheng Teachings on Living Longer, Healthier, Happier, and

Wiser; and Combining Ancient Wisdom and Modern Neuroscience for Peak States, along with many other lectures and workshops.

Chinese medicine luminaries who were at the first Symposium in 1989—Ted Kaptchuk, Kiiko Matsumoto, Subhuti Dharmananda, Whitfield Reaves, and Misha Cohen—will be there. They’ll be joined by our newest generation of brilliant presenters: Drew Pierson, Sarica Cernohous, David Bomzon, Chad Conner, Guohui Liu, and Andrew and JulieAnn Nugent-Head. Rounding out this stellar faculty will be ten other perennial favorites. Our keynote presenter is Paul Chek, founder of the C.H.E.K Institute and an embodiment of our peak performance theme. Chek is the author of an amazing array of 60 DVDs and 17 advanced-level home study courses designed for the fitness and clinical professional. He will also present an in-depth two-day, pre-symposium workshop. Whether you join us for a day or the whole week, we look forward to celebrating our 30th anniversary with you. **OM**

Jack Miller,
President of Pacific College of Oriental Medicine

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Grains: *Friend or Foe?*

By **SARICA CERNOHOUS, LAc**

While speaking at the National Association of Nutrition Professionals’ annual conference recently, between sessions I enjoyed a quick visit with another participant, a nutrition professional born and raised in Taiwan and of Chinese ancestry, who relocated to California a few years ago. I asked her who her nutrition clients had been in Taiwan. With a wry grin, her reply was “only ex-pats”, noting that many of the native Taiwanese were incredulous that someone could even have a career in nutrition; in fact, a question she was asked by locals was, “What do you mean people need help with their food? Do they need help with actually eating, getting the food to their mouths?”

I think this short conversation points to a very unique concern, one that could be deemed an issue of living a privileged existence. In many modern, Westernized societies, we are so very fortunate to have such an abundance of foods available to us, something unheard of even a century ago in the West; food that is available inexpensively, regularly. In turn we have created a culture around the

harm that comes from too much—too much food, too much refinement of ingredients, eating too frequently, consuming too much of the same kinds of foods.

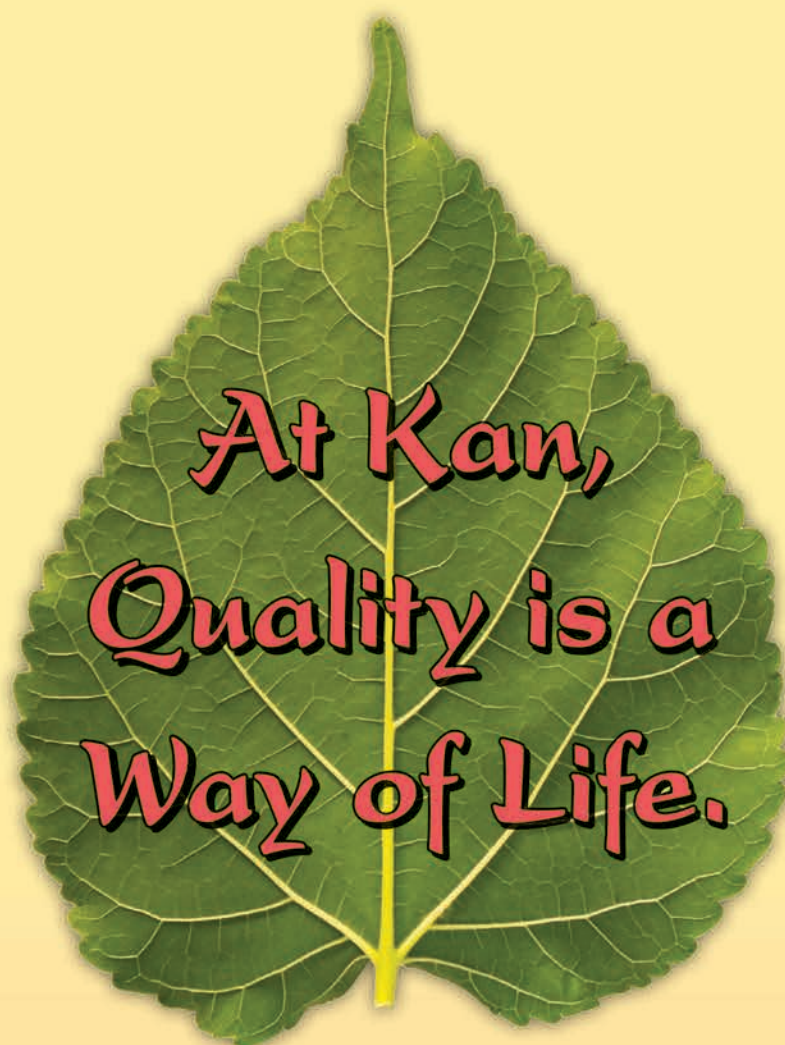
One of the biggest players in this modern-day issue deeply affecting human vitality is the “cheap and easy” grain-based food culture, comprised of foods that are the base of most Westerner’s diets—and it is not only an issue in the West anymore. As our lifestyle and culture has spread around the globe, this modern-day issue is touching down everywhere and, as happens when we pinpoint a supposed culprit, grain consumption has been slandered among the health-conscious as a key player for many ills from leaky gut to cardiovascular disease to Alzheimer’s, and even cancer.

How is it that something as seemingly innocuous as eating grains has become such a polarizing topic? From the low-carb revolution to the Paleo wave, from the Atkin’s Diet to the gluten-free frenzy, and now the keto craze, grains have been pillo-

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Ask the Herbalist: *How Do You Treat Sinus and Respiratory Allergies?*

By **ANDREW GAEDDERT, RH**

Tell us about some of the allergy clients who have been helped with Chinese herbs.

When I was going over my files in preparation for my class on allergies and Chinese herbs, three cases really stood out. There was a gentleman who didn't want to take any allopathic medicines. He was suffering constantly, so most days, just about every hour, he was having significant allergy symptoms. He followed the allergy protocol and the Digestive Clearing Diet¹ I developed, and within two weeks his condition totally turned around. The next case was a gentleman who was on a combination of Flonase®, two antihistamines, NasalCrom®, and steroid eye drops, and he was still having symptoms, which is why he came to me. He simply followed the protocol and a no-alcohol diet and within days his symptoms were eliminated. The final case involves a practitioner who used to exclusively use Asian patent medicines, typically what is seen on the shelves of apothecaries in Chinatown. He recommended an allergy relief formula to a patient who, after taking his first dosage,



experienced sweating, dizziness, and a racing heartbeat. As a precaution, the patient drove to an urgent care clinic, where he was stabilized. The herbs were analyzed and found to have ephedra, which is currently banned in the USA. The practitioner decided to use Chinese herbal formulas made in the USA due to improved quality controls and trans-

parent labeling. An overdose of ephedrine can lead to unpleasant symptoms such as anxiety, restlessness, tremor, insomnia, dizziness, difficulties in breathing, excessive sweating, delirium, convulsions, and others. A couple of the most dangerous overdose symptoms are heightened blood pressure and irregular heartbeat.

What typical allergy symptoms do you have success treating?

Many symptoms of allergic rhinitis include itching of the nose, roof of the mouth, and eyes; sneezing; excessive mucus; and frontal headache. We have had success reversing sinusitis and helping clients with have allergic asthma who sought to reduce their use of pharmaceutical medicines, especially steroids and inhalers.

Cause of allergy according to TCM

Allergic symptoms are related to wind in Chinese medicine. In order for wind to invade, defensive energy, wei qi, must be weak.

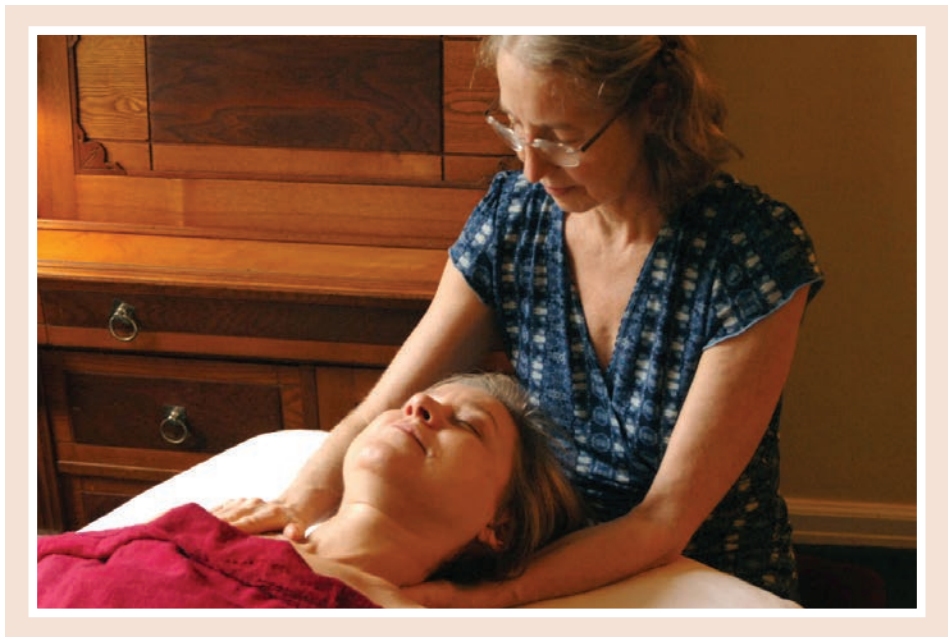
It is our experience that almost all clients with allergic rhinitis have spleen qi deficiency. Spleen deficiency can cause phlegm, including deep lying phlegm. In American patients, spleen qi deficiency can be caused by poor diet, excessive work, overworry, or Western medicine side effects. In this context, poor diet means too much sugar, sweets, alcohol, and allergens (particularly dairy products). It is said in TCM that the lungs are a “delicate viscus”. This means

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The Rosen Method

By **KIERA NAGLE, MA, LMT**

The client lies prone, on a soft warm table, in a comfortably lit room. The practitioner asks permission to begin, and places her hands in passive touch on the client's back, ever so gently and thoughtfully. There is the breath, one, and then another. With each exhale, the client softens into the practitioner's hands, which remain stable on the back, vibrant with her own breath and energy, receptive to the minute changes in the client's response. The practitioner may acknowledge verbally, “I feel the work your body is doing here. The great work of holding yourself up.” The response from the client may be varied, but often, deeper breathing, a sigh, a gasp at being acknowledged in this way. Perhaps tears. Perhaps words: “I work so hard. I carry so much. I'm tired...” In this practice, the tone is caring, but not overwhelmingly so. The practitioner exhibits a genuine care, one that's not coming from their ego in their role as care-taker



or fixer, but from their commitment to just being, being-with the client, not only “holding space” to repeat an overused phrase, but “holding” the client. The energy is warm, comforting. The talk is quiet, slow, low in tone.

The dynamic is set for being held and supported, and often, the client is able to let go and melt into that opportunity. They find themselves able to take deeper breaths. They may be able to release muscular tension which they

have unconsciously molded into a character armor over the years. The invitation to bring awareness to it is often the first step to allowing oneself to release it, and to notice what it feels like to experience that release in the body. Clients may feel that to have attention drawn to their body's work, their breath, their struggle and their strength, can be extremely cathartic. Perhaps they have not experienced this since they were held in their mother's arms. Perhaps they have never experienced this. Either way, it is needed. The client may not know it is needed until it is experienced.

The Rosen Method, as this practice is called, evolved through the work of Marion Rosen, (1914-2012), a German-American physiotherapist. Marion grew up in Germany in the tumultuous 1920s. She was a dancer and loved movement. After an accident, her mother was treated by Lucy

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Postpartum Care: *The Bridge that Sustains and Supports Us as Our Families Grow*

By **AMY E. MAGER**, DACM, LAc

Postpartum, that most magical and sometimes overwhelming time right after giving birth, can be as pregnant with excitement as birth itself. Postpartum is celebrated, cherished, and protected around the world. In China, India, and the Philippines, new mothers are cooked for, cared for, and nourished by mothers, mothers-in-law, and other family members.¹

In our “advanced” industrial society, this often does not happen. Extended family is frequently not around, so the new mother is left to fend for herself and her baby. In my practice, women often express feeling the societal expectation to be “super mom”. In this impossible situation, the new mom will somehow manage to nurse while keeping her house immaculate and do craft projects with older kids, while also keeping to the theoretical family schedule developed before the new addition. Some have worked until the birth and don't realize how changes like recovering from the birth and sleepless nights can drastically affect one's activities. These prevailing attitudes leave postpartum women feeling the pressure to continuously do more. This is a time, however, when the utmost priority is integrating the gift of new life into one's growing family, not maintaining the previous status quo of individual family needs without sacrifice. It can be overwhelming to take care of yourself, the new baby, and sometimes even other children—not to mention household labor! So how do we, as women and mothers, make a smooth transition from life before the baby to the hectic, vulnerable state of postpartum?

“For every day a woman doesn't take care of herself in the first two weeks postpartum, she adds a month to her postpartum recovery.” Dr. Raven Lang, my teacher, midwife for twenty years, and an acupuncturist, shared this sage wisdom with patients and with me. Just yesterday, I was working with a new mom who felt relatively well. Wanting to do everything she had done before the baby was born, however, she chose not to rest while her two-week-old baby was sleeping. We spoke of the importance of doing less and being more. When we worked together, she checked in with her body and realized that she had been undergoing unnoticed changes—a message from her body that she needed to give herself more attention

and get more rest. There are some women who do bounce back quickly, but that is not a realistic goal for everyone; we come to birth with our own histories and our own needs, and out of it with our own unique experiences. This is a sacred time to be gentle with yourself and listen to your needs as well as those of your precious one.

When women bleed and give birth, they lose heat and essence, also known as jing or life energy. During the postpartum period, we need to focus on getting and maintaining warmth. In most parts of the world, “mother roasting” fulfills this need by deeply warming the mother after birth. In the Philippines and India, that might mean filling a pit with rocks, building a fire in the pit, then layering moss and other material over the fire, over which the mother then lays. In China and the U.S., acupuncture and moxibustion treatments (a Chinese medical technique to generate a deep, healing heat) are ideal, hot water bottles sufficing if moxa is unavailable. Immediately or as soon as possible postpartum, moxibustion treatments (and acupuncture and herbal medicine, if appropriate) speed the involution (return to normal size) of the uterus, promoting and building your energy so that you are available to yourself and your loved ones.²

Use local resources to line up support in advance for doula services, breastfeeding assistance, postpartum help, and a meal train. Take a breastfeeding class before your baby is born. Consider attending a La Leche League meeting. Seek out a nursing pillow that supports the baby and brings a newborn to the perfect height for nursing. We always want to bring our babies to the breast rather than the breast to the baby. Nursing stools align your body and raise your knees, making it easier to be in the best position to nurse. Remember: good habits and good positioning in the beginning will help both you and your baby establish a successful breastfeeding relationship. Find a group or store to try on different options for wearing your baby to see if a sling, wrap, or structured carrier works best for you.

For friends who want to help, let them cook meals for you either to be eaten right away or frozen until you need them. Please ask those who make meals to bring them in recyclable containers and not their favorite ceramic piece that Aunt Sally gave them for their wedding. Remember that some babies do get

✿ FOR EVERY DAY A WOMAN DOESN'T TAKE CARE OF HER- SELF IN THE FIRST TWO WEEKS POSTPARTUM, *she adds a month to her postpartum recovery*

colicky if you eat broccoli, cauliflower, spinach, kale, beans, or uncooked onions. Some babies don't like soy and some don't tolerate dairy, but this is only temporary; as your baby grows, he or she will tolerate many different kinds of foods. Ask the friends who bring meals to plan only a short visit because you may need to rest. Some find it helpful to have a list of tasks on the fridge that would be helpful to any visitors.

If you notice an increase in lochia (afterbirth flow) after resuming more activity, remember to slow down! If you heed this first sign of doing too much, your body won't have to give you another one—your bleeding will slow down again. Progressive signs can include fatigue, insomnia, and mastitis. “Mastitis is a breast infection, and you get it from doing too much,” said Dr. Raven Lang in many patient rooms. Your breasts are your barometer. Mastitis is uncomfortable, debilitating, and requires a timely recovery. Some women describe it as feeling like a war is going on inside their bodies. This is avoidable!

Make choices that support you to stay warm and healthy. Let helpers help. “Thank you” is a crucial phrase postpartum, especially for women who do too much. Whether it's shopping, doing dishes, laundry, or reading a story to an older sibling, get the support you need after birth. The now famous author and television personality Dr. Penelope Leach learned this the hard way. After her first birth, her mother-in-law came to care of her, but what happened instead was her mother-in-law taking care of her baby while Dr. Leach scrubbed the floor. She was left exhausted, ill, and unable to do what she really wanted: to take care of and bond with her new baby.

Food choices are integral to maintaining warmth. If your body is an ATM, eating anything cold is an automatic withdrawal of energy. Your body has to use energy to digest the

food. If you eat something warm, you are putting money in the bank. This is why soup is always served first in Chinese restaurants; when you eat something warm first, you aid your digestion. For the same reason, Chinese salads are marinated; marinating any food in vinegar warms its nature. Warm or room-temperature foods aid in postpartum recovery. Know how foods affect you and make choices that are healing for you.

Seemingly small things become very important postpartum. Make sure you are drinking enough water. Every time you nurse, drink an eight-ounce glass of water. Ask your partner (or an older child who wants to help) to keep a full glass or pitcher always within reach when you are breastfeeding.

Remember, a new mother has just completed her own personal physical, emotional, and psychological marathon, and will have her hands full recovering from birth, learning to breastfeed, and meeting a tiny new person's many needs. Take good care of yourself: it's an investment in your future, your family's future, the happiness of your family, and in modeling self-care for your children. When Mom is happy and healthy, everything flows more easily. The well-known corollary is that “when mama ain't happy, ain't nobody happy”.

Chinese herbal medicine, acupuncture, and chiropractic care are invaluable for postpartum recovery and helping you regain the vital energy you expend nursing, nurturing, and caring for your loved ones. Investing in and caring for your new family will allow you to engage in the all-important task of baby-gazing. **OM**

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- 2 Lang, R.(1972) Birth Book. Santa Cruz, CA: Self Published.

AMY E. MAGER is a licensed acupuncturist and practitioner of Chinese herbal medicine who has been working with women, mothers, and families for over 27 years. She was a breastfeeding peer counselor for the Hampshire County WIC for eleven years, and through this program became a certified lactation counselor. She serves as secretary of the Acupuncture Society of Massachusetts and as vice chair of the American Society of Acupuncturists. Amy lives in the Pioneer Valley with her husband and main editor, Dan Garfield, DC, and their six children. You can also hear her on WHMP with Bob Flaherty on “Healing Outside the Box, Inside the Heart”.

that lungs are particularly vulnerable to allergens and pathogens. When the lung organ system is weak, it fails to direct energy downward. If the lungs fail to descend fluids, they may accumulate, transforming into dampness and phlegm.

Sneezing, nasal discharge and congestion are examples of counter-flow lung qi. Thus, the treatment for most clients in USA with allergic rhinitis is to tonify the lungs and spleen, dry dampness, circulate blood, and eliminate wind. Other diagnoses we occasionally see in Western allergic rhinitis clients are kidney yang deficiency and liver stagnation.

Could you describe allergy in greater detail?

In biomedicine, allergic rhinitis occurs when the body's immune system over-responds to specific non-infectious particles like plant pollens, molds, dust mites, animal hair, industrial chemicals, foods, medicine, and insect venom. Seasonal allergic rhinitis, sometimes called hay fever, typically occurs in late summer or spring and is basically a sensitivity to ragweed not hay. About 75 percent of all Americans have some level of seasonal

allergic rhinitis, which is why these protocols are so important. There is also perennial allergic rhinitis. For my patients who suffer allergy symptoms 24/7, they can have sensitivity to pet hair, mold, houseplants, carpeting, and upholstery, and it seems that air pollution such as auto exhaust can also aggravate allergic rhinitis. It is surprising to me how many people live with cats when they are allergic to them. One of my herb teachers taught class in his house where he lived with his wife and three cats. Both the herb teacher and I were allergic to the cats, so I always had to take anti-allergy herbs before going there. The herb teacher had built up his immune system with herbal formulas, so he didn't have to take seasonal herbs routinely as long as the cats did not sleep in the bedroom.

What is the link between sinusitis and rhinitis?

The new term for sinusitis is rhino-sinusitis, because in the Western clinic, it has been observed that most patients start out with rhinitis and it may develop into sinusitis. There is definitely a link between sinusitis and rhinitis. ENT practitio-

ners have concluded that sinusitis is often preceded by rhinitis and rarely occurs without recurrent rhinitis. The symptoms of nasal obstruction and discharge and loss of smell occur in both disorders. CT scans validate these findings. Therefore, it is important that we treat on the basis of traditional Chinese medicine; again, because for many years the Western concept was to look at these conditions separately, and now we know they're very linked, which is entirely consistent with the principles of traditional Chinese medicine.

Can drugs contribute to allergy symptoms?

Drugs can cause allergic rhinitis; the overuse of decongestant sprays can worsen the problem, as well as oral contraceptives, hormone replacement therapy, anti-anxiety drugs, some antidepressants, and drugs used to treat erectile dysfunction. Some blood pressure medications such as beta blockers and vasodilators can also cause rhinitis. Of course, cocaine can damage the nasal passages, and estrogen in women can cause allergic rhinitis. Chemotherapy agents and biologi-

cal drugs used in the treatment of autoimmune diseases can increase hypersensitivity.

The side effects of antihistamine drugs, which many of our clients have tried, include dry mouth, drowsiness, dizziness, nausea and vomiting, restlessness or moodiness, trouble urinating, blurred vision, and confusion.

What is the allergic load?

Allergic load means there is a pileup of allergens, just like a pileup on the freeway, that typically causes the major symptoms, and so we need to remove some of the burden placed on the immune system by reducing the allergic burden. How can we eliminate the allergic burden? One aspect is industrial chemicals; for instance, there was a man we weren't able to help. It turned out that his rhinitis and sinusitis were actually caused by a gas leak, so we always want to make sure we are ruling out chemical exposure and pollutants. Pollens, molds, dust mites, animal hair, and tobacco smoke, including second-hand smoke, also increase the allergic load.

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When The Root is Sound, The Branch Will Prosper: *Balance Your Microbiome for a Sound Root*

By CATHY MARGOLIN, LAc, DiplOM

Three years ago, I wrote an article for this newspaper entitled "New Chinese Medicine Tools to Replenish and Repair Our Gut", where I discussed recent research and ideas on how practitioners of Eastern Asian medicine can identify themselves as experts in helping patients achieve a "healthy gut" and rightfully take their place as part of one of the largest movements in health care today: the "Healthy Gut Movement".

In the three years since, a mountain of research has been published on our microbiome. This has inspired every variety of health practitioner to join the Healthy Gut Movement. Our foundation, as practitioners of traditional Chinese medicine (TCM), has been proven rock solid. Western science has just begun to understand what TCM has known for thousands of years: digestion is of utmost importance to a healthy body and

healthy mind. A healthy gut is the root of a healthy body. We have been taught well by the classics and understand the importance of the spleen and stomach channels. How do we use the research that has emerged from the worldwide microbiome project to help us explain the importance of our spleen/stomach to our patients? Are you prepared to expand your client reach to a new population of patients that desperately need this information?

We know more about the one-celled organisms that live in and on us than at any other time in history. We know that they greatly affect our health. The increasingly large probiotic supplements sections at health food stores alone tells us that consumers are buying into the idea that a healthy gut is important. Yet acupuncturists have yet to emerge as experts in this

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Pain Free – *A Revolutionary Method for Stopping Chronic Pain* by Pete Egoscue

By PETE EGOSCUE

The Egoscue Method is about our bodies—yours and mine. We are different in height, weight, and possibly gender, but our common possession is the body's inner power to heal itself and be pain free. Being pain-free takes personal effort and commitment, however. It doesn't come from a pill bottle, a surgeon's knife, a brace, or specially designed mattresses, chairs, and tools. The thousands of men and women who visit one of our clinics or affiliated therapists in the course of a typical year know it, or they soon find out, and we watch them transform their lives as they rediscover the joy and health that had seemed lost forever. While each client is dedicated to stopping chronic pain in one form or another, they are all taking the easy way out—the easiest, really.

It does not involve high-tech medicine or elaborate physical therapy routines. You won't need to buy special equipment or consult cadres of experts. You will, however, discover how the human body is designed to maintain its own health throughout a long lifetime. Episodes of pain are aberrations that can be easily treated if the body is permitted to do its work. Unfortunately, many of us don't understand even the most basic features of this magnificent "machine".

It is important to note that, unless treatment addresses underlying musculoskeletal dysfunctions, pain relief can only be temporary. Nobody wants to hurt, and nobody should have to, but eliminating the pain symptom is only the first step. Without taking the next one, the muscles will continue to tell the bones to move in ways that violate the body's design, and the chronic pain will return. The only product worth investing in is a fully functional musculoskeletal system. It's not a luxury, but a basic necessity within everyone's reach.

Our approach to therapeutic exercise is based on fundamental anatomical, physiological, and biomechanical principles. By using the blueprint of the human body as a guide, the goal of the Method is to bring about a state of muscular balance and internal homeostasis. It is not a form of treatment that seeks short-term, symptomatic relief. A client's symptoms dictate not an instant formula for treatment, but a beginning frame of reference based on each individual's unique limitations. Our primary objective applies to everyone we treat: to remove the person's structural dysfunction.



The "blueprint" we speak of is one that is familiar to all health professionals: the standing normal anatomical position. In the sagittal plane, the axis of the hip, knee and ankle joints are directly aligned. The head sits evenly between the shoulders and the hips are level. In the coronal plane, the mastoid process should sit directly over the shoulder joint; the shoulder, hip, knee and ankle joints should be vertically aligned. In the transverse plane, there should be no rotation of the torso on a fixed pelvis. There should be no rotation of the humerus, femurs, or shank outside what is considered appropriate in literature.

We believe that an individual whose body deviates from this design must do so for a reason, which, in cases not involving past trauma, is a muscular imbalance in strength and/or flexibility. Standing posture, for the sake of argument, is a static position. It provides essential information to the therapist in predicting what the body will do dynamically. These predictions can be confirmed and often reinforced by observing the client's gait pattern.

Postural changes impact each individual in different ways and at different rates. A person's age, activity level, occupation, and weight are just some of the factors that help determine where and to what extent a person will be affected anatomically. The process begins with an alteration of normal joint mechanics. This alteration, or compensation, leads to a decrease in performance, which can be expressed differently depending on the limitations on the client. These mechanical changes often go unnoticed as the body unconsciously avoids the pain stimulus or the extra muscular demand, but eventually manifest as a variety of pathologies and disorders if allowed to continue. These can include, but are not limited to, inflammatory responses to overstressed tendons and bursa, non-congruency of joints surfaces, unequal loading of the intervertebral discs, laxity of ligaments, and muscle pain.

These problems are not limited



to the musculoskeletal system. As the foundation of the body is shifted from its most efficiently-functioning position, the nervous, circulatory, respiratory, and digestive systems can all be affected. The internal organs can become misarranged or compressed, neural pathways are disrupted or impinged, and venous and arterial blood flow can be compromised. Any one or a combination of these scenarios can contribute to a multitude of medical problems.

When the Egoscue Method is presented with a symptomatic client, our initial assessment is markedly different from that of conventional medicine. As mentioned previously, the symptom never dictates our approach to therapy, but is instead regarded as a temporary limitation. The body is a highly integrated structure; in focusing on one area of pain or abnormality, we ignore the rest of the factors in a very large equation. Compensation that results from the individual's dysfunction can appear as a symptom in another area of the body.

The body also has a tremendous capacity for self-healing. To effectively facilitate that healing, we must first remove the noxious stimulus that has disrupted normal function. This is a major premise of the Egoscue Method.

An Egoscue therapist does not administer "hands-on" therapy. The client is instructed in a series of personalized exercises and then expected to continue them on their own at home. Modifications are readily made whenever necessary. The home program prevents the client from developing a dependency on someone else while pursuing their own well-being. Instead, they assume responsibility for their own health.

The exercises alone are not the sole determining factor in improving structural/mechanical function. There are three primary components:

1. The application of specific exercises to a given individual's dysfunction. We have a catalog of over 400 different exercises. Only those exercises that apply to that individual will be of benefit.
2. The sequencing of the exercises

within a given routine is critical. Each therapy session has a given objective. That objective can only be reached through a properly designed menu. The exercises must be sequenced such that one exercise prepares the body for the next and that a successive exercise does not negate a prior exercise.

3. The exercises are performed for an average of seven days. At this point we re-evaluate the client and redesign the routine accordingly. Often the exercises are of low demand and as the neuromuscular efficiency improves, the exercises become less effective. Therefore, the body must be put under an increased or varied demand to adjust to the changes that have occurred as a result of the prior routine, providing the means to continued progress.

The Egoscue Method has had enormous success in helping people overcome their physical ailments. It is a technique that is attractive to many people because it is a commonsense approach to the human body. The individual can see and feel the physical changes that take place as a result of their efforts, associated with an increased feeling of confidence that accompanies the improved health that he or she is responsible for. Reduced cost and prevention are major concerns of healthcare. This therapy requires no special equipment or dependency on anyone other than you and, because we do not treat the symptom, but instead look to restore optimum function to the body, the implications for prevention are obvious. **OM**

PETE EGOSCUE created the Egoscue Method to provide others with safe, effective, and permanent relief from chronic pain without prescription painkillers or invasive surgery. An anatomical physiologist since 1978, his exercise therapy program is based on the belief that most pain is the result of postural imbalances, and that the human body can heal itself if postural alignment is restored.

As the Father of Postural Therapy, Pete is acclaimed worldwide for treating chronic musculoskeletal pain attributed to overuse, injury, accidents, aging, and other conditions. He has worked with some of the biggest names in sports and business and is in demand as a thought-leader and public speaker.

He is the author of several books, including *Pain Free: A Revolutionary Method for Stopping Chronic Pain*, *The Egoscue Method of Health Through Motion*, *Pain Free Living*, *Pain Free for Women*, and *Pain Free at Your PC*.

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Heyer, a massage therapist, who was married to Dr. Heyer, a psychologist and colleague of Carl Jung. In their healing community, they became aware that patients in psychoanalysis were able to access their subconscious more readily when they received “breath massage” from Lucy and Marion, and their analytic processes progressed more quickly.

Of Jewish heritage, Marion had to flee Germany at the start of World War II. She came to California and worked as a physical therapist in medical settings and in private practice. As she worked with clients, she developed a movement practice for her clients to engage in to extend the benefits of the physical therapy work. In the 1950s, Marion began to teach the movement classes to members of the community, as well as her patients and other practitioners.

In her years of practice, Marion developed an awareness that patients who spoke about their emotions seemed to progress through physical healing more quickly and came back less often, with fewer complaints. By the 1970s, Marion had developed a curriculum for teaching her method of working with breath, bodywork, and movement, and the

Rosen Institute was formed. Marion trained practitioners in her method and created a process for them to become trainers of others, so the Rosen Method could be learned and shared around the world.

In May 2018, Pacific College of Oriental Medicine’s NY Campus hosted a gathering of five experienced practitioners of Rosen Method Bodywork and Movement for an introductory workshop. Those in attendance included Heather Brown, LMT; Elizabeth Smith, RN; Louise Murray, LMT CPC; Ivy Green, LMT; and Adrienne Stone, PT. Each shared a different aspect of the practice with students, faculty, and staff. Louise Murray introduced the group and defined the Rosen Method. Heather Brown spoke about Marion’s personal path and development of the method through her work in Europe and California. Elizabeth Smith expanded on how the Rosen Method can be used in various practice settings, including from her own experience in hospice care and medical settings, as well as private massage and PT practice environments. Adrienne Stone led the group in a Rosen Method movement exercise. Ivy Green asked for a participant from the group and

demonstrated the hands-on components of Rosen Method, interacting with the recipient through touch and talk, but also relaying what she was sensing in reaction from the client to the others in the room. Even in this context, with all eyes on her, the recipient felt a transformational shift of her posture and accessed the emotions she was holding in her upper body as Ivy worked with her upright in a chair. Afterwards, the participants asked many questions about aspects of the Rosen Method, the experiences with clients, the training requirements, and other queries. Words of wisdom were shared by the seasoned practitioners who have each worked with the Rosen Method for significant periods of time in various settings.

Acupuncturists, nurses, and massage therapists are eligible to train in the Rosen Method as they all have “license to touch” within their scopes of practice. However, even if one does not decide to pursue the entirety of this training, we can all glean some important elements of this practice to take into our work in various ways. There are many places where the Rosen Method overlaps with Eastern theoretical and practical

approaches, as there is a significant energetic component to the Rosen Method work. For example, the practitioner could incorporate some unstructured movement into their getting-prepared moments before working with clients, or suggest the same for client’s self-care. Practitioners can all benefit from, when possible, slowing down the process of the interaction with clients, especially in New York City, where we are operating at warp-speed much of the time. We can all benefit from better awareness and listening. We may begin, end, or bookend a session with the passive touch, holding without movement, so our clients can tune in to their own holding patterns and rhythms. If emotional release happens, we can be present for it, and we can always be ready to refer our clients to other practitioners when what comes up falls outside of our scope of treatment. It is not outside of our scope to acknowledge the hard work of living that our clients are doing, and call their attention to the effects of that work on their body. We can also acknowledge the joy that comes from relief. We can all

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ried as food item *non grata*. How is it that this staff of life has become so slandered and avoided by many, and with such fervor?

While each of these dietary prescriptions and practices have their reasons for grain avoidance, they can be mostly summed up by one or more of the following:

- Concerns with too rich a source of carbohydrates, straining an already challenged pancreas and leading to further cellular inflammation
- Nutrition which is not in alignment with our ancestors' diets, something that adherents to the paleo-style and ketogenic dietary principles believe we are not designed to handle very well, again leading to strain on the pancreas and leading to cellular inflammation and all its associated presentations (overweight and obesity, numerous degenerative diseases, from type II diabetes to cardiovascular weaknesses and autoimmune patterns)
- Concerns with specific components in the grains themselves, from gluten to various "anti-nutrients" such as phytic acid and lectins

Looking more closely into each of the above dietary and lifestyle choices will reveal sound reasons for their premise. The modern nutritional supply of processed foods, full of GMO-, pesticide- and herbicide-laden ingredients, stripped of their inherent fats, minerals, and vitamins, then fortified with laboratory-derived vitamins and preserved with various chemicals and partially-hydrogenated oils for shelf-stability, delivering foods that are shrink-wrapped or boxed and left on the shelves of grocery store—it doesn't take a trained eye to see this is a recipe for disaster for human vitality, and yet it is the foundation of most people's diets.

Additionally, the quantity of refined carbohydrates of the type being consumed today is unprecedented in human history—we are simply not designed to eat this kind of food in the amounts people are eating.

Might it be that it isn't so much that grains are the issue, but rather their quality (and I posit, their preparation) and their *balanced* place in a diet that is full of other nutritious foods—healthy fats, fresh produce, pastured meats, eggs and dairy, naturally-fermented foods, and clean water? (Also that we take fallow periods of no food, where only water is consumed, allowing the full digestion of a meal and then an opportunity to rest the digestive function—in our snacking society, this is another tremendous impact, but it will have to be a topic for another day.)

Grains are foods upon which entire societies have been built and

maintained. The storability of grains allows them to be socked away, sustaining lives when all other rations have been exhausted. By design, they are hard and durable. How is it that grains have been instrumental in human nutrition over the millennia when there seems to be this conundrum of how we can extract the nutrition from them?

When we think of the human design, with well-developed brains sitting atop rather rudimentary digestive tracts, it isn't too much to wonder how we might properly digest and humanize such durable foods, putting them to use in our bodies. We are not equipped with the multiple stomachs of the cow, with various pH gradients and varieties of bacteria, nor do we have large, rotund bellies like the gorilla, teeming with digestive enzymes and plenty of opportunity for fermentation of consumed cellulose. As research of the human genome and the human biome has revealed, we do have many, many inherent bacteria (it is estimated that the bacteria in our bodies actually outnumber our body's cells by about 9:1), and we are equipped with various digestive enzymes, beginning in the saliva and carrying on throughout the GI tract—but as is well-documented, our enzymatic production and protein-cleaving hydrochloric acid availability declines with age, unfortunately. The chronic stress patterns of modern-day living further compromise digestive function as we stay in patterns of sympathetic override, as opposed to the "rest-and-digest" of parasympathetic tone.

As has been brought up by proponents of traditional food preparation techniques, however, might it also be that we are missing some simple, necessary steps that lend themselves to using the nutrition stored in the grain, while reducing or eliminating some of the challenges these foods offer? What is different today from what came before?

If we look at traditional societies around the world, or if we look back on anthropological research of foods consumed by human ancestors, we see that the simple act of soaking the grains creates a much more easily-digested food. Soaking grains allows water and time to "predigest" the grain, reducing lectins (carbohydrate-binding proteins that have been linked to immune reactions, digestive disturbances and obesity) and phytic acid (a component found in the bran of grains that binds to the minerals, causing them to pass largely undigested through the GI tract).

Additionally, many of the traditional preparations of grains allow a degree of fermentation. With organically-grown, non-irradiated grains, there is a natural composition of beneficial bacteria on their surface, as well as wild yeasts on the air, that



will flourish under the conditions of moderate temperature, carbohydrate availability, and time, eventually giving way to fermentation.

However, using a small amount of a culture "starter", such as sourdough, will allow for guided fermentation of the grain. When this method is undertaken, another benefit arises: the beneficial bacteria and yeasts use and transform much the carbohydrate and protein content in the grain, further enhancing the predigestion, transforming the carbohydrate load of the grain, turning complex carbohydrates into simpler sugars, carbon dioxide, and acids, and proteins into amino acids and peptides. In the wake of the transformation, beneficial bacteria are further propagated, creating a probiotic- and enzyme-rich food (though both of these qualities are lost when the grain is cooked). By way of these changes, there is now a food that is generally much easier to digest, as it is broken down into its smaller components.

But what happens to gluten? How do soaking and fermenting of gluten-bearing grains affect the gluten content? For those that are truly allergic to gluten (who have been diagnosed with celiac disease) it is probably best to simply steer clear of any gluten-containing grains. However, research has revealed that traditional "sourcing" of gluten-bearing grains parses the gluten content into smaller peptides and amino acids—deconstruction of a challenging protein.

When preparing even non-gluten grains, soaking and fermentation is still a very good idea for the reasons listed above. For those that are simply avoiding gluten for other health concerns, one might find that using fresh grains soaked in room-temperature, non-chlorinated water that has been primed with a starter culture such as a sourdough starter, water kefir, kombucha (beverages that are rich in beneficial bacteria and yeasts), or even raw apple cider vinegar can yield a much more-easily digested food.

We can be sure that most commercially-prepared grains and breads do not use these methods—the busyness of our modern lives is riding on the ease of inexpensive foods that are made in huge quantities, as quickly as possible. To ensure quality preparation of foods, it really is best to make your own. Good soaking, possibly with some fermentation over a 12- to 36-hour period, is a simple first step to enjoying whole, organic grains in the context of a balanced diet. **OM**

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The Transformative Power of Deep, Slow Breathing

By PETER DEADMAN

Slow, deep, lower abdominal breathing, a mainstay of Asian internal cultivation practices for millennia, is a powerful tool for healing and transformation. A wide range of emotional and physical problems can be helped by slow breathing and it can be easily taught to patients, both while lying on the couch and as home practice. For practitioners it is a pathway to calm, centered, and intuitive states that can enhance our interactions with patients. For all of us, the growing understanding of the physiology behind deep breathing offers a wonderful insight into the interplay of yin and yang in every aspect of our lives. This article examines the traditional Chinese medical and self-cultivation perspective on breathing, describes a simple breathing practice suitable for teaching to patients, delves into some of the burgeoning science behind breath regulation, and gives an overview of research on the use of breathing practice for the treatment of mental and physical disorders.

“As for the vitality of all human beings
It inevitably occurs because of
balanced and aligned breathing.
The reason for its loss
Is inevitably pleasure and anger,
worry and anxiety.”
Original Tao, 4th century BCE1

This article stems from my growing curiosity about why practices such as qigong, taiji, and yoga are so good for us. After all, they are barely aerobic, don't follow conventional strength training methods, and in their original and authentic forms at least, may do little for body sculpting or weight loss—all seemingly major preoccupations of modern exercise. Yet those of us who have a regular practice know the rich physical, mental and emotional rewards they offer. As is so often the case, traditional Chinese yin-yang classification—in this case of exercise—offers useful insight into some of these questions.

WAIJIA AND NEIJIA

The martial arts, more or less synonymous with exercise itself through most of Chinese history, are often divided into two broad categories: external (wajia) and internal (neijia). This distinction dates from the 17th century, and although not hard and fast, can serve as a useful guide to understanding body-mind-breath practices.

External exercise is more yang. It prioritises aerobic fitness, muscular strength, speed, and agility. Training may be hard, often to the point of profuse sweating and exhaustion. Its martial application may involve large and dramatic movements; for example, the flying kicks and punches typical of Shaolin styles. Wajia is clearly similar to much modern exercise: running, weight training, gym, high intensity interval training, boxercise, boot camp workouts, and even some modern forms of yoga practice. The advantages of external exercise include high levels of fitness and muscular development, as well as reliable

mood-altering effects due to its rapid effect on moving qi and blood. Disadvantages include the risk of acute or chronic injury and other physical damage due to over-training, the often short-term nature of the mood-altering and qi and blood moving effects, and the fact that it may become increasingly harder to practise as we age.

Internal exercise is more yin. In the Chinese tradition, it includes practices such as qigong, neigong, taijiquan, baguazhang, yiquan and xingyiquan. More broadly, it can be said to embrace yoga (sometimes called 'Brahmin qigong'), Pilates, Feldenkreis method and more. The advantages of internal exercise include healing, development of core strength and soft power, fluid and integrated movement, improved balance and alignment, minimal risk of injury, mental and emotional development, and prolonged mood-altering effects. It can also be practiced at any age. Its disadvantages include

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A Personal Story about Yamamoto New Scalp Acupuncture

By DAVID BOMZON

About five years ago, I traveled to Japan to participate in a five-day seminar that was to be given Dr. Toshikatsu Yamamoto, the developer of Yamamoto New Scalp Acupuncture (YNSA). At the time, I was also training to run a marathon. When training for a marathon, all workouts are important and missing one workout might affect my participation.

On the morning of the first day of the seminar, I decided to go for a 15-kilometer run along the shores and beachfront of Aoshima, the town where Dr. Yamamoto has his clinic and seminar. The area is breathtakingly beautiful, and I found myself concentrating on the landscape: the beautiful views of the water, the waves smashing on the rocks, the green palm trees. After about ten kilometers, I was so concentrated on the views that I did not concentrate on the road's surface and did not see the pothole in the road. I stumbled into the pothole and severely twisted my left ankle. It was so severely twisted that I fell down, and when I tried to get up, I could not stand on my left foot. After about three minutes, I tried to stand again but was still unable to do so. A minute or so later, I started to walk slowly, limping on one foot, when a thought crossed my mind: if I continue to run, the pain will go away and the swelling will subside. I started to walk slowly, the walk turned into a slow run, and after about ten minutes, the pain was gone. Thinking back, that was a dumb thing to do: I should have just caught a taxi back to the hotel.

When I returned to the hotel and finished my stretches and showered, I rested on the bed, waiting to be picked up for the seminar. When the time came to get up, I looked over my ankle. It was very swollen, blue, and painful: I could not put any weight on my foot. I hopped on one foot down to the taxi, and from there we were taken to the seminar for the first day of training. When Dr. Yamamoto saw me, he asked me what happened and I told him the story. He offered to treat my ankle. I was very happy, excited that I would have the opportunity to be treated by Yamamoto. According to Dr. Yamamoto's diagnosis, he needled the D basic point on the left side to affect the lower part of the body from the diaphragm down to the lower limbs. Then, he needled the I somatotope on the left side in the area that reflects the ankle; the I somatotope was developed from the I point over



the past 7 years, is located on the scalp over the temporal muscle, and is a reflection of the whole body. By needling different areas on this somatotope, you affect that area of the body (see figure).

After he needled these points on the scalp, he kept on asking me to slowly move my ankle. I felt that it was moving more easily and it was less painful. He then needled the H basic point and asked me to try to walk on my foot. Although it was painful when I walked, the pain was a bit less and there was some slight improvement in the angles that I can turn my ankle. Next, he decided to try to treat the ankle by working on my wrist, but this time he used ASP needles and needled the area of my wrist that reflects the area of my ankle (very similar to working with the balance method of Dr. Tan). After needling this point, my ability to walk improved.

After Dr. Yamamoto needled my wrist and my scalp (the D and H points, and the region of my ankle on the I somatotope), he decided to needle two more points on my scalp: the first was the I somatotope in the area that reflects the cervical spine (this area is located between the tragus of the ear and the temporal mandibular joint). The second point he needled was the foot point, which is located on the zygoma. After nee-

dling this point, I could rotate my ankle with no pain and walk with a slight limp. In days to come, I realized that the cervical region of the I somatotope overlaps a point that is reflected on the gastrocnemius muscle (see figure). I frequently needle this point to treat heel spurs, ankle sprains, and plantar fasciitis.

About two hours after the treatment, with the needles still in my scalp and wrist, the pain in my ankle became more severe and the intensity shot up from a VAS scale of 2 to about 10. I started to feel that blood was pumping in my ankle and I had a throbbing feel in my ankle. The pain was so severe that I decided to pull out all the needles because I could not take the pain anymore. As I took out the needles, I felt the pain slowly subside. About three hours later, I suddenly realized that I did not feel any pain in the ankle and it seemed that the swelling was reduced. I was amazed by the results and overwhelmed by how quickly the swelling went down.

At the end of the day, when we were leaving for dinner, I suddenly noticed that I was walking with a slight limp. When I looked at my ankle, it seemed that there was less swelling. I was astonished that this had happened.

The next day, when I woke up, I could walk normally with no limp.

Although the ankle was still a bit blue and bruised, I felt pain in my left ankle only when it was at certain angles. I also remember the other participants looking at my ankle and being amazed by the outcome of the treatment and the rapid response of my foot and ankle.

During the day, I mentioned to the other participants that I might go for a run the next day. They recommended that I should not, in order to rest my ankle. Since my thought was on the marathon, and every day that I don't run would affect the training, I went for a run the next day. When I started the run, I felt a very slight pain which completely disappeared when I continued to run. When I finished the run, I felt no pain at all and I was walking and running normally, and without pain. The pain did not return.

I have related my personal experience on how YNSA affected me because I was so amazed with the result. This personal experience left me with an impression that I can treat any disorder and get fast results using this wonderful method. This experience also inspired me to dig deeper into YNSA, to improve my technique, and to understand how YNSA works and what other disorders it can treat. YNSA was originally developed for pain management, but as the years go by, I see it can be used to treat not only pain but also internal disorders such as those affecting the cardiovascular system, gastrointestinal system, endocrine system, allergies, skin, and others.

Over time, I have come to understand that the simplicity of the method is its greatness. YNSA is a very simple method to use and anyone can get fast results in the clinic with their patients. I believe that if more practitioners will use this method then more patients will benefit from it.

As for the marathon? I did not run it in the end because life is full of surprises... and there is always next time. **OM**

DAVID BOMZON is one of the leading authorities in Israel on rehabilitative and integrative acupuncture, specializing in classical Chinese medicine and Yamamoto New Scalp Acupuncture (YNSA). He is the founder of the Pnima Center in Haifa, Israel, which has become the leading center for Chinese medicine in Haifa since its establishment in 2007. Bomzon teaches rehabilitative Chinese medicine and is a senior lecturer in complementary and integrative medicine at Reidman College in Israel. He is involved in clinical research into the benefits of YNSA in neurological rehabilitation.

What's In a Name?

The Sweet Dew of Gan Lu Yin

By SUBHUTI DHARMANANDA, PhD, Director of the Institute for Traditional Medicine (ITM), Portland, Oregon

THE FORMULA AND ITS NAME

Gan lu yin is a prescription in the Song Dynasty compilation *Tai Ping Hui Min He Ji Ju Fang*, one of the main sources of formulas used in modern practice of traditional Chinese medicine (TCM). That text includes many formulas with herb-combining characteristics parallel to those found in the *Shang Han Lun* and *Jin Gui Yao Lue*, which are also primary sources of ancient TCM prescriptions utilized today.

The name refers to “sweet dew” (*gan* = sweet; *lu* = dew).

甘露

The herbs are to be made in the form of a quickly-prepared cooling drink (*yin*), rather than taken as a long-boiled hot decoction (*tang*). *Gan lu* is a term found in Chinese Buddhist literature, designating those things which are exceedingly wonderful, sometimes referring to food and to healing. For example, Master Zibo Zhenke (1543-1603), a monastic Buddhist knowledgeable about traditional concepts of taste and effect of foods, wrote an essay mentioning *gan lu* titled “On the Kitchen,” quoted here at some length as this may have value beyond the topic under discussion (1):

The Buddha said, “the place in the temple for preparing offerings and food and drink for the Buddha, the Dharma, and the Sangha [the ‘three jewels’: the Buddha, the teaching of the Buddha, and the community who follow the teaching] is known as the ‘kitchen of accumulated fragrance’”. But if those who prepare food and drink do not understand the three virtues or distinguish among the six flavors, and if their three karmas of body, speech, and mind are impure, then the kitchen ought instead to be called the “kitchen of accumulated filth”. What are the three virtues? They are purity, gentleness, and acting in accordance with the rule [of ethical compassionate behavior]. What are the six flavors? They are plain, salty, spicy, sour, sweet, and bitter. If the food offered to the Buddha and the Sangha is impure and consists of meat and fish [not vegetarian], then the virtue of purity is lost; if it is not fine and pleasing and somewhat astringent [as opposed to oily and rich], then the virtue of gentleness is lost; if it is not made on time, not properly made, not prepared carefully, and not tasted before it is offered to the public, then the

virtue of acting according to the rule is lost. If the three virtues are not blended in harmony with the six flavors, the three virtues are lost. The plain flavor is the essence of all flavors. The salty flavor is by nature moist, and it can moisten the muscle and skin. Thus, when blending flavors one should begin with salt. The spicy flavor is by nature hot, and can warm the coolness of the internal organs. Thus the flavor of peppers is called spicy. The sour flavor is by nature cooling, and can release the ill effects of the other flavors. Thus the flavor of vinegar is called sour. The sweet flavor is by nature gentle and it can be gentle on the spleen and stomach. Thus the flavor of sugar is called sweet. The bitter flavor is by nature cold and it is capable of releasing the heat of the internal organs. Thus acidity [a sharp bitterness] is called bitter... When the three virtues are not lacking and the six flavors are not absent, if such food and drink were smelled by the Buddha or entered the mouth of a monastic, it would be like smelling sandalwood and tasting sweet dew. The five internal organs will be balanced and the skin smooth and pleasant, the body comfortable and the mind at peace; [the one who consumes such food and drink will be] externally endowed with physical strength while internally endowed with mental vigor. Endowed with physical strength, the body is healthy. When the mind is endowed with vigor, the spirit will be undisturbed. When the body is healthy, one can advance toward the Way; when the spirit is undisturbed the wisdom of contemplation is easy to achieve. When food does not accord with the rule, then the body sickens and the mind is filled with anxieties. When body and mind are racked with illness and worry, it is impossible to progress toward enlightenment. This being the case, the lives and fates of those practicing the Way are inextricably linked to those in the kitchen...

As can be seen from this explanation, *gan lu* does not refer to sweetness of taste. Indeed, another similarly named formula, *gan lu xiao du dan* (antitoxin pills [valued as] sweet dew), is not at all sweet, but rather bitter, sharing in common with *gan lu yin* two bitter herbs that provide a dramatic effect on damp-heat

syndromes: *yin chen bao* and *huang qin*. The Buddhist origin of the term *gan lu* has been associated with the Hindu term *amrita*, indicating the “drink of the gods,” which is an immortality elixir; in Buddhism it refers to a special drink consumed before certain rituals. Thus, the name of the formula, *gan lu yin*, is a reference to its remarkable healing qualities, especially as expressed by its balanced and careful formulation approach along the lines Master Zibo has so eloquently explained for the manner of preparing food.

SEEMING CONTRADICTION IN DIAGNOSTIC/THERAPEUTIC CATEGORIES

Gan lu yin has the functions of nourishing yin of the organs and clearing damp-heat of the affected secondary parts. Since dampness is a type of excess yin, there would seem to be a contradiction, but this is simply a case of underlying internal deficiency giving rise to a manifestation of external excess. The primary strategy is to resolve yin deficiency of the stomach; but for its intended action, the herbs also are chosen to replenish the lungs. By nourishing the yin of these upper organs, the formula is directed to alleviating heat that manifests above the stomach and lungs. The patient for which the formula is well suited presents signs of stomach deficiency-fire. That fire has combined with the dampness of mucous membranes (e.g., throat and mouth) to yield a local damp-heat syndrome.

The underlying pathogenic factors of yin deficiency and fire may cause symptoms in the stomach, such as recurrent hunger yet difficulty digesting food, but the dominant presentation is experienced as disorders of the throat and oral cavity. A common modern indication is stomatitis, an inflammatory process affecting the mucous membranes of the mouth and lips; additionally, the tongue, gums, and throat can be affected. In the book *Chinese-English Manual of Common Used Prescriptions in Traditional Chinese Medicine* (2), the primary indications for the formula are: aphthae (mouth and/or tongue ulcerations), foul breath, gingivitis and bleeding from the gums, dry mouth, and sore throat. As fits yin deficiency and damp heat, the tongue appearance is said to be red tongue body with yellow and dry fur, and the pulse is said to be small and rapid. According to the *Taiwan Herbal Pharmacopoeia*, second edition (3), *gan lu yin* treats dampness heat

of the stomach meridian with fetid mouth odor and sore throat, mouth and tongue sores, gum atrophy and swollen gums. For any individual patient, the disorder may reveal itself through only one or several of these indicators of stomach yin deficiency with damp-heat.

THE FORMULA

Ten herbs are measured in equal proportions and then ground to powder. Each dose is 6 grams of the powder, quickly boiled to make a tea which is somewhat thick, and drunk when cooled. The dose may be repeated two or three times in a day.

Gan Lu Yin

mai men dong + tian men dong
shu di + sheng di
shi bu
yin chen bao
zhi shi
huang qin
pi pa ye
gan cao

YIN NOURISHING PART OF GAN LU YIN

The formula has five herbs for nourishing yin and four herbs for clearing heat. The latter are used especially when heat is associated with dampness; additionally, *gan cao* is used as a soothing agent that also helps unite the two divergent therapeutic principles.



Mai men dong



Tian men dong

The five yin nourishing herbs are an expansion of a well-known and widely-used pair referred to as “*er dong*” (the two “*dong*” herbs): *mai men dong* plus *tian men dong*. These are cooling, yin-nourishing herbs that

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The Chinese Wellness Yang Sheng-Based Health Care System: *An Inspiring Solution to Health and Economic Crisis in America*

By ROGER JAHNKE, OMD

YANG SHENG

The most profound medicine is produced naturally—in the human body—for free!” This phrase, from *The Healer Within*, is the innovative foundation of a very low-cost healthcare system.

There are many ways to activate, create, and maximize this profound internal medicine. By enhancing wellbeing and function, disease is neutralized or, even better, prevented. These methods were fully described in the ancient yet practical tradition of Chinese medicine. The Yellow Emperor and his master physicians compiled an entire book on mobilizing the “healer within”: *The Classic of Inner Medicine* or *Huang Ti Nei Jing* (1).

Some of these methods, such as acupuncture and massage, require treatment from a licensed medical provider, for which there is a cost. Some of them require the ingestion of nourishing and functional activating substances (i.e. herbal medicine), which also have a cost.

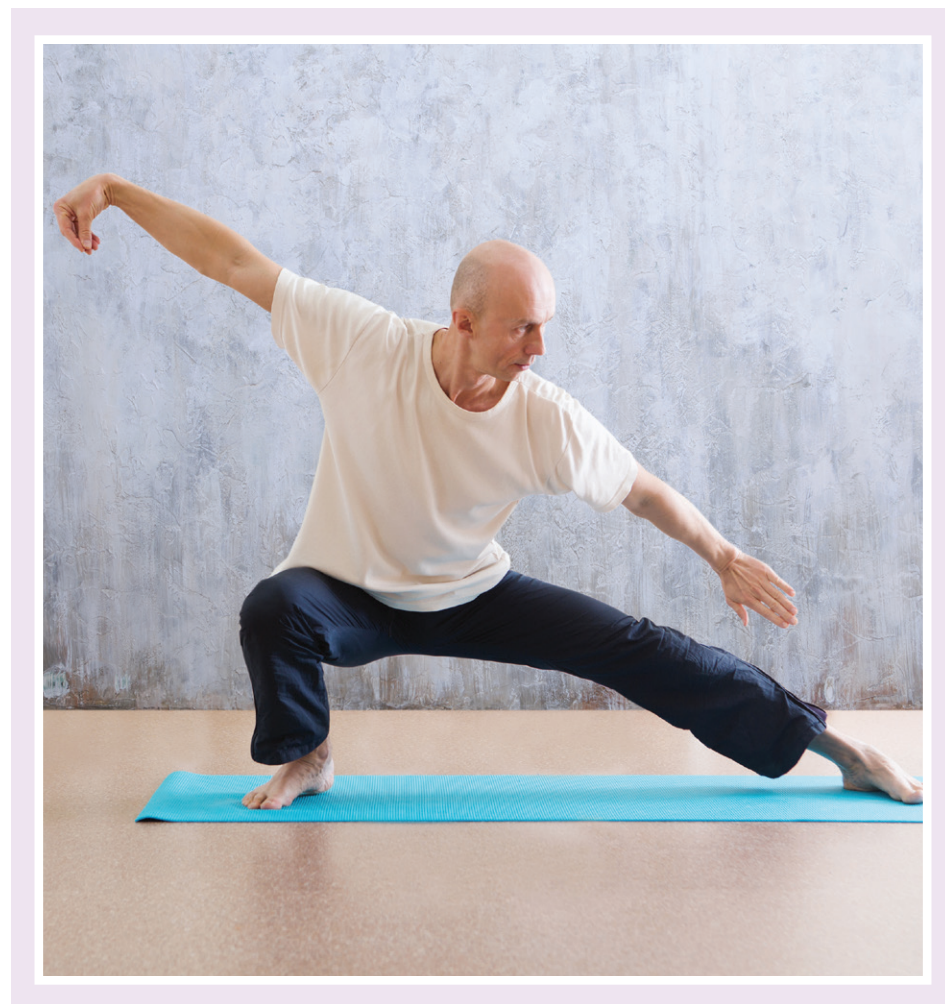
One set of methods—self-cultivation practices such as qigong, taiji, and meditation—can be used at home or in public venues such as parks, churches, schools, and hospitals for free.

By virtue of this inner healing capacity, Asian medicine—both clinical treatment and proactive health protection—is a form of wellness-based medicine, mobilizing inherent capacity.

This profound approach to healthcare has a multitude of positives for personal wellbeing. Why don’t professionals in Asian medical fields like acupuncture, massage, and herbal medicine make a big deal of low-cost wellness practices such as qigong and taiji? The foundational premise of healing and prevention in Asian medicine is to activate inner healing resources through acupuncture, herbs, manual therapy and, least expensively, qigong, and taiji. Based on the knowledge, wisdom, and application of Chinese wellness-based practices, individuals, families, agencies, institutions, communities, states, and even nations can easily prevent diseases that are widely known to be preventable and eliminate unnecessary medical costs—now.

THE BASIS: QIGONG AND TAIJI

It is widely known that the most horrific diseases are preventable (2,3). The American wellness revolu-



tion, which had a false start in the 1970s, is now wide awake again. Recently, the current U.S. president put the words “prevention” and “personal responsibility” into the same phrase and set eight principles of healthcare that included “invest in prevention and wellness” (4). When our society looks for what to actually do about this, one of the cheapest “programs” (due to group based implementation) is Asian self-care: qigong and taiji.

Buried in the controversial Affordable Care Act, which was declared constitutional by a conservative Supreme Court Justice, are numerous clauses that incentivize health promotion and disease prevention with financial benefits, and even penalties for the neglect of health promotion. This suggests that the application of qigong and taiji and all of the Asian wellness-oriented yang sheng practices will have the support of policy in coming years.

A BOLD CLAIM

The same mechanism that mobilizes healing resources through Chinese clinical therapeutics can be activated by average citizens at home for no cost, healing themselves for free as they collaborate with their integrative medical team. The citizens of

any nation can solve any health crisis that is due to chronic degenerative disease through the application of personal practice of qigong and taiji, as well as yoga and meditation.

It is possible for people to curtail the waste of billions of dollars annually. It is a potential bailout.

MY OWN REVELATION

The words of Lao Zi (or Lao Tze) launched me into Asian medicine in 1967, in Cincinnati, Ohio. From *Dao De Jing*, #10: “Can you cultivate your essential energy and sustain the suppleness of a newborn with no cares?” To me this is the ultimate health/medical insight. Is it possible that doctors—of both conventional medicine and traditional medicine—should have more questions for their clients and fewer answers? In my career, this question, and others posed by Lao Zi, form the theoretical and economic basis for the Chinese wellness-based system of healthcare and medicine. Later in 1967, I took my first taiji class, and by 1977, I was opening my clinical practice in Columbus, Ohio, a state that only recently embraced licensure.

Another question that comes from the *Dao De Jing*, #52: “Do you practice eternity?” Questions like this

are not typically a part of medical inquiry, but they point to aspects of personal awareness that can lead to healing insights offered by neither surgery nor pharmaceutical products.

THE HEALER WITHIN

Those trained in Chinese medicine know, either overtly or covertly, that the medicine is in not the acupuncture needle but the patient. The job of the provider, whether doctor or practitioner, is not to cure the disease, but to maximize the natural healing capacity of the human system.

In a time when we have ample evidence that nearly every form of disease is preventable, it is fair to say that the key solution to all problems in healthcare and medicine is to focus on the prevention of preventable disease. The underlying wellness basis which is inherent to Chinese medicine is rapidly becoming a prominent new feature of healthcare and medicine in many innovative initiatives, policies, and programs.

Certainly, the Western conventional medicine breakthroughs in surgery, pharmacy, and diagnostics are relevant. It is however the “discovery”, probably better referred to as the recovery, of behavioral prevention and the healer within that will leave a prominent mark in the medical history of the early years of the 21st century. Awareness of the inner medicine, the inherent functional elixir, is rapidly infusing into popular culture.

FUNCTIONAL MAXIMIZATION: FOSTER THE RIGHTEOUS

The profound holistic power of Asian medicine stems from its roots in two wellness principles that conventional Western medicine has neglected until very recently. The first is the “holistic ideal” of body-mind-spirit. These Three Treasures are always linked in Chinese medicine, but in the emerging new conventions of Western healthcare, they are only just becoming linked.

The second is the “two medicines in one” principle of Chinese medicine. Shared with Western medicine is the “attack the disease” model. This is to kill or modify the pathogen or pathogenic factors. Both Western and Chinese medicine have excellent tools for “attacking the disease” strategies.

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are complemented in many formulations by a mixture of *shu di* and *sheng di* so as to further nourish yin and clear heat. The two “dong” are of the lily family, *Ophiopogon japonicus* and *Asparagus lucidus* (or closely related species of each). They have overlapping properties and when properly prepared they also have similar appearance, with a translucent yellowish color (see page 12). *Er dong* is mainly used for moistening dryness and clearing heat. Frequently, these herbs are combined with phlegm-resolving and antitussive herbs for conditions such as dry cough, dry throat, and dry mouth secondary to lung yin deficiency. The key herb directing the action of *gan lu yin* to the stomach is *shi hu*, which is derived from numerous *Dendrobium* species. Since *Dendrobium* is in the orchid family, and since orchids are highly restricted in international trade (due to the endangered status of wild orchids), this herb is difficult to obtain outside of China. One of the species used for *shi hu* was designated *Ephemerantha fimbriata*, which has since been reclassified into the *Dendrobium* genus (e.g., as *D. fimbriatum* or *D. plicatile*), but because it has been overlooked among the restricted items, this species is sometimes accessible today. *Shu di huang* (cooked rehmannia) is one of the herbs considered most broadly useful for nourishing yin and blood.

DAMP-HEAT RESOLVING PART

The key herb of this part of the formula is *yin chen hao*, which clears heat and dries damp; it is used to alleviate damp-heat affecting the stomach/spleen and the liver/gallbladder (one of its better-known applications is treating jaundice). Together with *zhi shi*, *yin chen hao* clears heat and stagnation of the stomach/spleen. The two herbs direct the flow of qi downward while encouraging clear fluid (rather than turbid fluid) to rise up and nourish the chest, neck, and head; these herbs settle the fiery stomach heat that causes symptoms in the oral cavity. They are combined with two ingredients that are especially valued for clearing heat that is damaging the lungs, *huang qin* and *pi pa ye* (eriobotrya, also known as loquat); the latter is often used in syrups for dry cough and dry throat, considered useful for both stomach heat and lung heat. *Sheng di huang*, dried rehmannia, is used to clear heat, and is especially effective for heat affecting the upper body.

OBSERVATIONS

Gan lu yin may get less attention than it deserves, especially outside of China; currently its broadest use is in Taiwan, from which it has come to the West in the form of dried decoctions (granules). The original Western

designation for it was “sweet combination”, whereby it loses the important meaning of *sweet dew* and the name may even deter people who suffer from the ill effects of eating too much sweet foods and beverages. In *Chinese Herbal Medicine Formulas and Strategies* (4,5), which is often used as a textbook for TCM formula education in the U.S., the formula was not mentioned at all in the first edition, and is given only a single paragraph of explanation in the revised edition. When searching online documents, *gan lu yin* is usually mentioned only in passing, such as a formula that might be selected for treatment of diabetes, but monographs depicting its nature and use are lacking.

✿ THE FIVE YIN
NOURISHING HERBS
are an expansion of a well-known and widely-used pair referred to as “er dong” (the two “dong” herbs): mai men dong plus tian men dong.

I propose that one barrier to elevating the status of *gan lu yin* in modern TCM texts is the unusual therapeutic combination of treating both yin deficiency and damp heat in roughly equal measure, a method that is difficult to classify in the modern approach of presenting formulas within a certain set of established groupings for herbal actions. Further, the therapeutic method is one not frequently described in the modern TCM literature, even for conditions like stomatitis. The *English-Chinese Encyclopedia of Practical Traditional Chinese Medicine* volume on otorhinolaryngology (6) has a section on stomatitis and related disorders; while there is mention of methods of nourishing yin and purging fire, the yin-nourishing portion of the formulas is always rather small compared to that of *gan lu yin*.

NEW APPLICATIONS OF THE FORMULA

Herbal prescribers and researchers in Taiwan have found additional value from this formula, especially for aiding cancer patients and those with certain autoimmune disorders. For example, *gan lu yin* is employed in treatment of liver cancer and one of its mechanisms is proposed to be anti-angiogenesis, that is, having a potential benefit by preventing new vascularization needed for tumor growth (7,8). It is also used as an adjuvant in treating oral cancer, shown to have

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the fact that some styles are very slow—and therefore frustrating—for younger practitioners whose bodies and minds need more dynamic challenges. Indeed, without combining aspects of external exercise, yin neijia can be an incomplete form of cultivation and may sometimes encourage excessive introversion in those prone to it, which means it may need to be practised with caution in cases of depression.

As always, we need to flexibly balance yin and yang according to our age, physical condition, and health needs. If all our practice is internal, quiet, and slow, it may be just as imbalanced as if it was all fast, hard, and external. In the taijitu (yin-yang symbol), of course, yin and yang each include a portion of their complementary opposites.



What is the essence of neijia?

There are three core components of internal exercise, body, breath and mind, corresponding to the ‘three treasures’ (jing-qi-shen)². While there are countless internal practices in the Asian traditions, they all cultivate these three to varying degrees. In my opinion, however, the highest forms—at least as far as health, wellbeing, and the development of wisdom are concerned—cultivate all three *equally*. When body, breath, and mind are wrapped up into a seamless whole, we enter an optimum physiological state and can truly flourish.

BODY AND MIND

“Once set in motion, the whole body is unified and must be light and filled with spirit”
Tai Chi Ch’uan Classic, 12th-14th centuries BCE³

Before considering breath in more detail, it is worth briefly reflecting on what cultivation of the body and mind may involve.

In internal training, body movements and postures are practised slowly and mindfully. They are designed to develop integrated movement and full body awareness, optimum alignment (top/bottom, left/right, forward/backward), balance and rootedness, fluid and relaxed lengthening and releasing, soft power and core strength. Practising faithfully under the guidance of a good teacher will slowly restore fascial/channel elasticity and natural movement, and promote healthy joints and pleasure in the body.

As far as the mind is concerned, the aim is absorption in the present moment. This offers many of the plastic brain benefits of meditation⁴;

indeed it has been argued that mindful movement may reduce uncontrolled mental wandering more easily than still meditation^{5 6 7}. The fully present mind can explore internally and dwell in the breath, the whole body, or its particular parts. Alternatively, it can move out to connect with sky, earth, sun and moon, trees, birds, flowing water and so on, especially when we practise outdoors. Some qigong styles also incorporate visualisations, repetition of sounds, healing words and phrases, and so on.

BREATHING

“A day and a night of regulated breathing can [reverse] twenty years of chronic illness.”

Yuan Hao, 15th century CE⁸

Breathing is unique among autonomic functions such as the cardiac, digestive, and hormonal systems, in that it is both automatic (most of us breathe without conscious awareness or intervention) and at the same time can be consciously controlled. In traditional Asian self-cultivation traditions, this ability to consciously control the breath is used as a powerful tool for emotional, mental and physical health, and wellbeing.

The Chinese perspective on breathing

“The perfected breathe all the way to their heels, unlike ordinary folk who breathe only as far as their throats.”

Zhuangzi, 3rd century BCE

Qigong and the internal arts teach long, slow, and deep breathing down into the lower abdomen, a method that is widely taught nowadays to help manage anxiety, depression, and post-traumatic stress disorder.

I remember one of my teachers in China laughingly saying that the human body has a design fault: it is both vertical and alive. Its lively yang therefore suffers from a tendency to rise excessively, especially as we age, when yin weakens and can no longer hold and counter the predilection of yang to soar upwards. Physically this can give rise to disorders such as dizziness, high blood pressure, headache, migraine and stroke, accompanied by dissociation from the lower body, poor balance, weak legs, and increased risk of falling. On a mental and emotional level, it can give rise to an unrooted, unstable shen. The result is a tendency to nervousness, anxiety, worry, fear, insomnia, a restless mind and general ungroundedness.

In the upper body, emotional factors or faulty practice can lead to chest breathing, where the upper chest is lifted and thrust out in the military posture on inhalation. Chest breathing increases feelings of stress, raises the centre of gravity, and further lifts qi to the upper body.

These varied physical and emotional manifestations of uprising of yang can be counteracted by sinking and grounding the lower body and by breathing slowly and deeply into the lower abdominal core, keeping the chest (heart and lungs) empty and quiet. Since inhalation descends qi, this can be a tool to counter rebellious lung qi, subdue uprising of liver yang, and help lower uncontrolled heart fire into the cooling embrace of kidney water, restoring yin-yang harmony.

THE PRACTICE OF BREATHING

Lower abdominal breathing can be practiced standing, sitting, or lying down. The standing position is described first, but this can be easily adapted for sitting and, in the clinic, lying on the couch whilst needles are retained.

Standing

Standing breathing can be taught to patients for home practice.

There is a basic qigong standing position: feet shoulder-width apart and parallel, knees relaxed so the whole pelvic region relaxes and drops (heavy like a hanging basket). At the same time the chin is slightly tucked in and the neck gently lengthened towards the sky. The shoulder blades separate, rounding and opening the upper back, and the arms hang loose, either to the sides or in front of the body, with ample space in the armpits. The chest hangs ‘empty like a bell’ so that the heart and lungs are quiet.

Once this posture is established, we can fold one hand over the other on the navel. Then, inhaling through the nose but imagining we are inhaling directly into the navel, we slowly allow the breath to radiate to the lower back (from Mingmen DU-4 outwards to Zhishi BL-52), the lower sides, and down into the pelvic cavity. We aim to breathe around five times a minute: six seconds for inhalation and six seconds for exhalation (see discussion later in this article). It is normal to be a little bit air-hungry, but the breath should never be forced and relaxation is key.

If people find this pace challenging, it can be speeded up until they get used to it. If they find it difficult to take the breath down low and deep, and feel blocked and constricted in the chest, the answer is to relax, to be patient, and above all to practice, for it will become easier with time.

Lying down

If you normally leave your patients lying with needles in, they can significantly enhance the effects of treatment with breathing practice. The patient can lie with their hands folded over the navel or by their

sides and breathe in the same way as described above. Note that lower abdominal breathing is often taught by asking people to rest one hand on their chest and the other on the lower abdomen. The idea is that the lower hand, but not the upper hand, should rise during inhalation. This method may be useful when learning lower abdominal breathing, but expanding the lower belly outwards is unnecessary and not desirable in the long term.

Once slow, deep breathing is well established, it can be adapted to different clinical situations. For example, those who suffer from uprising of qi can be encouraged to ‘breathe’ in and out of the soles of the feet. Patients can also be encouraged to breathe into the site of disease or discomfort, and to relax and dissolve the area as they breathe out. Alternatively, they can be asked to breathe into the region of the point or points being needled, or visualise breath flowing along specific channels.

THE SCIENCE OF SLOW BREATHING

A growing and relatively recent body of research into the physiology of slow breathing is confirming its extraordinary physical and emotional health benefits. This section discusses three aspects, in order of increasing importance: (a) nitric oxide and nasal breathing; (b) carbon dioxide; and (c) the relationship between autonomic yin-yang balance, heart rate variability, vagal tone, and breathing. Some of the science, especially in (c), may seem a bit daunting, but I believe it is well worth the effort.

(a) Nasal breathing and nitric oxide

“Heaven feeds man with the five qi ... The five qi enter through the nose and are stored in the heart and in the lung.”

Yellow Emperor’s Internal Classic, between 2nd century BCE and 2nd century CE⁹

Nitric oxide (not be confused with nitrous oxide) is a colourless gas that acts as a cellular signalling molecule. Nitric oxide (chemical formula NO) is synthesised inside the body in humans and other mammals and also elevated by eating NO-rich foods, especially leafy green vegetables. Medically, it can be taken in the form of nitroglycerin (for angina pectoris and heart failure¹⁰), sildenafil (Viagra) and similar erectile dysfunction medicines, and also in the form of NO-enhancing supplements, sometimes taken by athletes and body-builders.

The principal link between these varied uses is that NO relaxes smooth muscles fibers, especially in the blood vessels, therefore acting as a vasodilator—for example, increasing

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TCMceuticals® Clinical-Based TCM Formulas:

An Interview with Dr. Jipu “Dan” Wen, Founder of TCMzone

By JENNIFER KNAPP

Jennifer Knapp: Hi, Dr. Wen. Thank you for taking the time to talk with me about our newest brand of professional herbal formulas, TCMceuticals. I'm so excited about this new offering from TCMzone and would like to share some of your insights on this novel approach to Traditional Chinese Medicine. Let's get started.

JK: Can you give our readers a little background on yourself before getting started?

Dan Wen: I have a bit of an interesting background. Over the last several decades, I studied integrative medicine in the areas of liver disease and G.I. in China, then came to the U.S. and, moving from medical research and integrative medicine, headed TCMzone, LLC to become a

leading supplier of herbal products for licensed healthcare practitioners. After almost 20 years as an herbal products supplier in the U.S., our products are in top U.S. healthcare hospitals and educational institutions serving different types of practitioners.

JK: How did this concept of TCMceuticals come about and why did you think a new line of condition-specific clinical formulas was necessary for TCMzone?

DW: TCM plays a very important role in China, Japan, and other Asian countries, as a mainstream integrative medicine in the healthcare systems. In the U.S. we see acupuncture practiced widely and becoming more and more accepted by the public, but traditional Chinese herbs

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are still considered to be a more minor portion of integrative medicine in the U.S. Many insurance plans cover acupuncture but none cover Chinese herbal medicine. When we talk with our practitioner customers

who do administer herbs in their clinics, we hear such positive feedback regarding efficacy, simplicity of delivery systems, and overall

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Nine Essential Needling Techniques to Increase
Clinical Efficacy by *Andrew Nugent-Head*

14
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A needle is not meant to be inserted into a point, but to manipulate the qi of a patient. The point is only a location, and its actions only happen reliably with correct manipulation of the needle. Understanding how to change the motion and intensity of our needling and supporting hands as well as our body weight is critical to moving beyond insertion and hoped-for results. To reliably create warming, cooling, channel traveling, gathering, spreading, filling, or emptying sensations in our patients requires knowing how to tangibly manipulate the needle. In this seminar, Andrew walks through the physical mechanics of each technique as well as demonstrates them on volunteers from the audience to the keep the presentation practical. The Nine Essential Needling Techniques covered are Burning Mountain 燒山山火火法, Cooling Sky 透天涼法, Channel Traveling 行行行經通絡法, Softening/Spreading 散法, Gathering/Consolidating 聚 法, Sparrow Pecking 雀 啄 法, Pulling Out 提氣 法, Pinning In 扣 氣 法, and Awakening the Yuan 醒元法.

CHEK Life Alchemy 4 Health and Performance: Getting to the
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CEU/PDA

Tuesday and Wednesday, October 23-24, 9:00 am-5:00 pm

Chinese medicine, like alchemy, emerged from observations of the principles and functions of nature. Chek Life Process Alchemy (CLPA) is the product of 32 years of clinical experience and research into body-emotion-mind-soul interrelationships. CLPA will aid acupuncturists and healthcare professionals in understanding key physiological regulatory systems, and how the psyche and body of a patient respond to and mirror each other. Using key principles of alchemy as expressed via physiological regulatory systems and Jungian principles of depth psychology, the four functions of consciousness, and assessment of an individual's life story, CLPA provides an efficient means of identifying the etiology behind patient symptoms. Students of CLPA will learn a structured system of patient assessment progression, awareness training, behavioral change that is highly complementary to acupuncture theory and practice. You will learn to use CLPA in combination with acupuncture to resolve root causes of psychophysical challenges and facilitate the patient's ability to accomplish their stated dream, goal, or objective for healing and life.

Post-Symposium Workshops

Diode Rings: Non-Insertive Adjunct Treatments for Vascular
Disorders by *Kiiko Matsumoto*

7
CEU/PDA

Monday, October 29, 9:00 am-5:00 pm

Vascular system disorders are common, painful, and deadly. As an acupuncturist, it can be difficult to deal with these circulatory issues, and often it seems that there is little that we can offer besides the usual promise of reducing inflammation and boosting oxygen circulation in the blood. While that is, in fact, a benefit itself, the external manifestations of vascular issues, such as neuropathies and varicose veins, are often what patients want "fixed". In addition to the usual root- and condition-specific treatments, non-insertive diode rings offer a solution. By painlessly delivering microstimulation through the skin (without the use of electricity), they can reduce inflammation and increase circulation without needling these delicate areas, which are prone to infection.

Acupuncture Treatment of Joint Dysfunction Made Easy
by *Whitfield Reaves*

14
CEU/PDA

Monday and Tuesday, October 29-30, 9:00 am-5:00 pm

Learn how to integrate Chinese acupuncture practices with an understanding of anatomy, orthopedics, and sports medicine. Each attendee will improve their skills and gain confidence in the diagnosis, assessment, and treatment of many common joint injuries seen in the acupuncture clinic. Treatment of joint pain, injury, and dysfunction is a daily need in the acupuncture clinic, but effective treatment includes more than is typically described in the classic and modern acupuncture texts. A clear understanding of anatomy and the movement pattern of the joint results in a better treatment plan and choice of points. Reaves will teach attendees how to effectively use acupuncture, electrical stimulation, and other techniques for common injury sites. The role of muscles, tendons, ligaments, and fascia on the joint will be included, and will lead the practitioner to effective meridian and point selection.

Register Early!
Our Pre and Post-Symposium workshops sell out quickly.
PacificSymposium.org

DAILY EXERCISE, THURSDAY -SUNDAY

The Crane Frolic Qigong by *Bill Helm and Robert Nations*

1

CEU/PDA

Daily, 7:00-7:50 am and 12:15-1:05 pm

CAB Category: 2

Hua To was a famous Chinese medical practitioner who created a system of qigong health exercises based upon the movements and spirits of five animals: tiger, crane, deer, bear, and monkey. In the workshop, we will learn the Crane Frolic which emulates the movement patterns of the crane. These movements are graceful and flowing, integrating the breath with stepping and standing postures.

THURSDAY, OCTOBER 25, 2018

The Golden Elixir of Longevity and Immortality:
The Qigong and Taiji Wellness System by *Roger Jahnke*

1

CEU/PDA

Thursday, October 25, 9:00-9:50 am

CAB Category: 1

Ancient Chinese sages and medical innovators understood what conventional science is realizing now – thousands of years later. Taiji and qigong activate basic physiological mechanisms that are associated with the reduction of pathology – through naturally occurring self-regulatory mechanisms that neutralize the negative effects of oxidative and inflammatory process. In the ancient world, these were associated with longevity: the capacity to extend the duration of wellbeing and immortality. The process of sustaining a relationship with the quantum aspect of being wherein one is intimately connected with the aspect of oneself that is eternal. The foundations of these concepts are expressed in the Three Treasures: San Bao Science. Dr. Jahnke will explore ancient wisdom, contemporary research, and accessible practice to inspire practitioners to consider the power of qigong and taiji.

Creating Exceptional Treatment Experiences by *East Haradin*

1

CEU/PDA

Thursday, October 25, 9:55-10:45 am

CAB Category: 1

Instead of providing everyday, ordinary treatments you can create exceptional treatment experiences for your patients. By doing so, you have an opportunity to enjoy your work more fully and make your treatments more effective and valuable. Join Dr. East for this introductory discussion on the difference between an ordinary treatment and an extraordinary treatment experience. She will share with you a few simple, and highly effective, tools, techniques and modalities you can incorporate into your practice right away to begin to create exceptional treatment experiences for your patients. In addition, she will explain that by doing so has been clinically proven to increase patient satisfaction and treatment outcomes.

Classification and Clinical Application for Tai Yin Disease in Shang Han Lun by *Guohui Liu*

1

CEU/PDA

Thursday, October 25, 11:15 am-12:05 pm

CAB Category: 1

Tai yin disease in the Shang Han Lun is related to digestive disorders, which is a quite challenge for practitioners in clinic. As early as the 3rd century, Zhang Ji recorded many diagnostic skills and formulas to treat tai yin disease in his work based on his clinical practice. Nowadays, clinical practice has proven these skills and formulas are quite useful for us to deal with digestive disorders in our daily practice. This speech will classify all information about tai yin disease in the Shang Han Lun into two categories: disorders completely belonging to tai yin disease and disorders partially belonging to tai yin disease. We will also discuss how to identify them according to the speaker's experience and analyze the formulas related in details. Some case studies will be used to demonstrate how to manage these diagnostic skills and treatment approaches in clinical practice.

Accessible Medical Qigong for Patients and Clinicians
by *Roger Jahnke*

3

CEU/PDA

Thursday, October 25, 2:00-5:00 pm

CAB Category: 1

Long before acupuncture, and as a part of the methods for discovering herbal medicine and acupuncture, there was self-observation and self-cultivation: qigong. The insight and awareness cultivated by ancient sages created Chinese medicine. Clinical practitioners of Chinese medicine can cultivate the wisdom and insight of the ancients through the practice of qigong in modern times. Dr. Jahnke, with the experience accumulated through ten trips to China and 35 years of clinical practice, will support participants in learning and practicing an accessible form of medical qigong: Bu Zheng Qigong. The foundations for this class are the classical Chinese Three Treasures body-jing, heartmind-qi, spirit-shen, and the four baskets of practice: body practice, breath practice, mind practice, and self-applied massage. A key seminar theme is the idea that teaching people to help heal themselves is in accord with the Huang Di Nei Jing and actually increases financial success.

Creating Exceptional Treatment Experiences by *East Haradin*

3

CEU/PDA

Thursday, October 25, 2:00-5:00 pm

CAB Category: 1

Join Dr. East Haradin for this fun and interactive workshop which will explore specific ways you can take your treatments to the next level by providing exceptional treatment experiences rather than just plain treatments. By doing so you will not only improve patient satisfaction and treatment outcomes, you will have the potential to increase the value, and price, of your treatments. Dr. East will share with you the key components of an exceptional treatment experience, including: (1) A prepared practitioner: ways you can practice mindfulness, prevent burn out and work from your highest potential. (2) Tools, techniques, and adjunctive modalities you can include in your treatments to make them extraordinary. (3) The use of objective measurements. (4) A collective and mindful approach to patient care. Woven into the workshop will be hands-on-practice and experience of many of the tools, techniques, and modalities explored.

Treatment of Interstitial Cystitis According to Qi Transformation Theory in Shang Han Lun by *Guohui Liu*

3

CEU/PDA

Thursday, October 25, 2:00-5:00 pm

CAB Category: 1

Interstitial cystitis is a common yet difficult disease for middle-aged women. It is easily confused with urinary tract infection and treated as damp-heat alone in clinic. After studying the Shang Han Lun for more than four decades, Guohui Liu has found that the qi transformation theory related to the tai yang, tai yin, and jue yin diseases are quite useful in dealing with this disease. Based on analysis of a couple of his own case studies, the speaker will lay out the strategies and formulas to treat this disease.

Traditional Nutrition Considerations for the Modern Patient by *Sarica Cernohous*

3

CEU/PDA

Thursday, October 25, 2:00-5:00 pm

CAB Category: 1

Is nutritional guidance part of your care for your patients? Hopefully it is, as it is a powerful way to help your patients help themselves, and support the good you do for them in the treatment room. However, have you found that the standard suggestions to eat whole, organic foods, to read labels, or maybe to avoid gluten, or work within paleo principles...maybe that isn't enough? And how is it that legumes, grains, and dairy have been a common component of the human diet, but are now "off-limits" for many? If you are ready to deepen your support for your patients around nutrition (and benefit yourself in the process), this class is for you. Learn about the important methods of predigestion through traditional food preparation techniques and how they are a missing link in the modern picture of health!

Ancient Wisdom and Modern Neuroscience for the Implementation and Assessment of Peak States by *Drew Pierson*

3

CEU/PDA

Thursday, October 25, 2:00-5:00 pm

CAB Category: 1

This course will focus on the neuroscience of peak states and inherent trait changes, including what happens on a neurophysiological level while in peak states. We will also cover EEG assisted meditation, attention and state awareness, where “state” refers to the cognitive, sensory integration and self referential aspects that can arise during a peak experience, and Taoist wandering and the free mind: the loss of self-consciousness and how it is essential for states of flow. Learn about tools for assessment, training, and state attainment such as neurofeedback, heart rate variability, TCM, and a number of new neurostimulation technologies such as pulsed electromagnetic fields, transcranial direct current, and cryotherapy.

FRIDAY, OCTOBER 26, 2017

Herbs and Nutrients for Athletic Performance and Recovery, Part 1
by *Andrew Gaeddert*

1

CEU/PDA

Friday, October 26, 9:00-9:50 am

CAB Category: 1

Whether your clients are weekend warriors, amateurs, or professionals, we will discuss nutritional needs, eating plans, and mind-body approaches for athletes based on the latest research. Learn about alternatives to performance-enhancing drugs and pain pills. Protocols for anxiety, altitude sickness, anemia, blood sugar balance, injury prevention, muscle soreness, digestive health, sleep disorders, and overtraining will be presented. Discover how constitutional TCM herbs and formulas can maximize recovery and performance. We will look at methods for obtaining the best results from ginseng, schizandra, astragalus, cordyceps, curcumin, and pomegranate. Best practices for herbal dispensing and communications strategies will also be discussed.

READY TO REGISTER?

Maintaining Metabolic Balance with Integrated Chinese Medicine
by Misha Cohen

1 Friday, October 26, 9:55-10:45 am CAB Category: 1

The number of people in our society who suffer with type 2 diabetes, essential hypertension, elevated cholesterol, high BMI, abdominal fat, and fat in the liver is increasing exponentially. This is often characterized in Western medicine as "metabolic syndrome". Chinese medicine, along with other natural approaches, can offer support for prevention of development of metabolic syndrome as well as reverse the effects of metabolic syndrome once it has become entrenched. In this lecture, metabolic syndrome and Chinese medicine pattern differentiation will be identified. Practices will be recommended that can help prevent the development of the various components of metabolic syndrome as well as treat aspects of metabolic syndrome once it has developed.

Introduction to Cannabis Medicine from a TCM Perspective
by Chad Conner

1 Friday, October 26, 11:15 am-12:05 pm CAB Category: 1

The cannabis industry is the fastest-growing industry in the United States. Our grandfathers of Chinese medicine used cannabis as one of their supreme herbs over 3000 years ago. Throughout the centuries, knowledge of its powerful properties has been lost. It is time to bring back this herb that is part of our heritage and time to help lead this movement with the power of TCM. In this course, you will learn the history and properties of cannabis in Chinese medicine and why it was forgotten. You will learn about the endocannabinoid system, CBD:THC Ratios, dosing, and Terpenes from both a modern science and TCM perspective.

Wellness vs. Disease: Clinical Application of the Shen Nong Ben Cao (SNBC) by JulieAnn Nugent-Head

3 Friday, October 26, 2:00-5:00 pm CAB Category: 1

Qing dynasty practitioner Chen Xiuyuan said that the study of Chinese medicine was actually quite easy, yet today, herbal medicine is seen as either incredibly academic or encourages the use of set formulas without modification. In this short program, JulieAnn Nugent-Head outlines how the Shen Nong Ben Cao provides clear guidance to application of herbs for longevity, mild symptoms and disease. By its tripartite organization, the SNBC clarifies herb dosage and appropriate length of treatment. Discussing specific herbs from each category as well as clinical case examples, participants will come away from this lecture with a clear and applicable grasp on how to apply herbs for wellness and disease.

Fatty Liver: An Integrated Chinese Medicine Approach to a Growing Global Epidemic by Misha Cohen

3 Friday, October 26, 2:00-5:00 pm CAB Category: 1

Chances are good that you are treating people with chronic liver disease, including fatty liver, but may not know it. Chronic liver disease affects more 50 million people worldwide, yet the vast majority of people with liver disease have not been diagnosed and often feel well until the last stages of disease. The fastest growing chronic liver disease is fatty liver disease and, very soon, will become the primary reason for liver transplant in the developed world. People with liver disease need to be identified, receive a Western diagnostic workup, and can benefit from using Chinese medicine, nutritional support and other non-pharmaceutical treatments. This course will explore the theory and practice of integrated Chinese medicine for chronic liver disease, especially fatty liver disease in conjunction with metabolic syndrome. Supportive and safe Chinese herbal medicine and acupuncture will be explored. Case studies and open discussion will round out the seminar.

Treating Hips, Shoulders, and the SI Joint Successfully
by Mark Kastner

3 Friday, October 26, 2:00-5:00 pm CAB Category: 1

This workshop is focused on teaching simple clinical techniques to better understand how to evaluate and treat most shoulder, hip, and SI joint pain. This will include specific needling and myofascial massage protocols that are easily learned and can be immediately implemented into your clinical practice. There will also be a demonstration and discussion how to use electro-stimulation in treating these disorders.

Personalizing Cannabis Medicine from a TCM Perspective
by Chad Conner

3 Friday, October 26, 2:00-5:00 pm CAB Category: 1

Currently there are no systems that personalize cannabis medicine from either a Western or Eastern perspective. In this course, you will learn about the endocannabinoid system and its relation to yin and yang theory and the 8 principles of diagnosis to arrive at a differential diagnosis. This will allow the practitioner to personalize the patients' CBD:THC ratio, terpenes/strains, dosage, herb combinations, and modes of administration to treat a variety of conditions. Also, this course will discuss the major therapeutic directions of cannabis with case studies based on the 8 principles.

Herbs and Nutrients for Athletic Performance and Recovery, Part 2 by Andrew Gaeddert

3 Friday, October 26, 2:00-5:00 pm CAB Category: 1

Whether your clients are weekend warriors, amateurs, or professionals, we will discuss nutritional needs, eating plans, and mind-body approaches for athletes based on the latest research. Alternatives to performance-enhancing drugs and pain pills, as well as protocols for anxiety, altitude sickness, anemia, blood sugar balance, injury prevention, muscle soreness, digestive health, sleep disorders, and overtraining will be presented. Learn how constitutional TCM herbs and formulas can maximize recovery and performance. We will look at methods for obtaining the best results from ginseng, schizandra, astragalus, cordyceps, curcumin, and pomegranate. Best practices for herbal dispensing and communications strategies will be discussed.

SATURDAY, OCTOBER 27, 2017

Wu Wei Zi: Fruit for Peak Performance—Modern Discoveries
by Subhuti Dharmananda

1 Saturday, October 27, 9:00-9:50 am CAB Category: 1

The original applications of Wu Wei Zi, as recorded in ancient texts, mostly point to its inclusion as a minor ingredient in formulas for lung diseases and for astringent effects. This early work led to Wu Wei Zi as a frequently used herb, but one which did not generate much interest in further development. Perhaps the most important ancient use came with the formula Sheng Mai San, the pulse-generating powder that has become an important base for modern prescriptions. During the post-revolutionary period in China, research into Wu Wei Zi's effects on the brain and the immune system became a new area of interest, stimulated by research done outside of China. Most practitioners of Chinese medicine tend to use Wu Wei Zi according to its more limited ancient applications, so this presentation will broaden the understanding of its clinical use and notably for enhancing performance.

KEYNOTE ADDRESS

Peak Health and Performance: The 4-Doctor Approach by Paul Chek

1.5 Friday, October 26, 7:30-9:00 pm CAB Category: 1

Learn the 4-Doctor approach to create balance and structure in your clients' programs and experience high levels of body-mind performance with Paul Chek. As foundation principles, Dr. Happiness, Dr. Movement, Dr. Quiet, and Dr. Diet, are essential to long-term success for all people, and are the bedrock of any living philosophy. Start by clearly defining a dream, goal or objective to direct your client's intention, awareness and energy. Then explore your client's current 4-Doctor habits from the perspective of

yin/yang balance. Next, we establish goal-affirmative 4-Doctor core values to guide effective choices, so patients feel healthier, become stronger, recover from an injury, and enjoy improved mental-emotional capacity and athletic performance. Paul's 1-2-3-4-step system is efficient and provides a structured approach to balancing and enhancing performance, is harmonious with acupuncture principles and practices, and is used by healthcare professionals, coaches, and elite athletes worldwide.



Sleep: Ancient Teachings and Modern Research
by Felice Dunas

1
CEU/PDA Saturday, October 27, 9:55-10:45am CAB Category: 1

Sleep serves many purposes according to TCM, yet modern science is still discovering new facts that practitioners should know, some of which confirm what TCM has been espousing for generations. Learn how to merge TCM’s philosophical and physiological understanding of sleep with the newest research, with emphasis on practical strategies for enhancing patient care. Dr. Dunas will address the role of sleep, how much is needed, and how it affects peak performance and recovery.

The Fantastic Three: Yamamoto New Scalp Acupuncture, Physical Therapy, and Guided Imagery in Stroke Patients
by David Bomzon and Avi Amir

1
CEU/PDA Saturday, October 27, 11:15 am-12:05 pm CAB Category: 1

The current therapy for stroke patients is repeated stimulation to damaged neurons, and the extent of recovery is linked to the frequency of these stimulations. Over the years, knowledge of brain structure, development, and function has dramatically increased. This new knowledge has led to proposals that new neuronal connections can be forged within brain tissue damaged by cerebrovascular accidents (CVA) or trauma. This session will describe the combined use of three rehabilitative therapies for stroke patients: Yamamoto New Scalp Acupuncture (YNSA), physical therapy, and guided imagery. Bomzon and Amir will also cover the outcome of this combined therapy in patients who have experienced a CVA or who suffer from chronic pain.

Psyche, Breath, and Sex: Exercises to Optimize Treatment Outcomes
by Felice Dunas

3
CEU/PDA Saturday, October 27, 2:00-5:00 pm CAB Category: 1

This workshop will include discussion of the behavioral symptoms of illness, psychology as expressions of energetic syndromes, and the TCM view of sexual energy and breath healing techniques, or qigong. Dunas will also cover exercises for in-office treatments or take-home protocols for patients. Familiarity with this material broadens treatment room conversations to include emotion and behavior as viewed from a TCM perspective, which helps patients understand how the condition of their qi is responsible for their behavior, interpersonal interaction patterns, and love relationships, as well as physical health.

Getting Back in the Game: Strategies for Recovery from Injury, Surgery, and Other Damage
by Subhuti Dharmananda

3
CEU/PDA Saturday, October 27, 2:00-5:00 pm CAB Category: 1

Treatment of injury is one of the foundations of acupuncture practice, but the herbal component of therapy is often given little attention, relying primarily on a single therapeutic principle—vitalizing blood—and use of some well known topical oils, liniments, and plasters. However, TCM has a richly developed field of traumatology that includes consideration of injury in stages—initial, intermediate, and chronic—with different herbal therapeutics based on not only stage but location of injury, depth, and assessment of progress. The experience with traumatic injuries can be applied as well to the effects of surgery, radiation therapy, localized infection and inflammation, and childbirth.

Things My Teachers Said: Passing the Torch
by Andy Ellis

3
CEU/PDA Saturday, October 27, 2:00-5:00 pm CAB Category: 1

Andy Ellis has had the great fortune in the last 40 years to study with excellent practitioners of Chinese medicine. His goal for this workshop is to pass on some of the techniques, formulas, and life advice he has received from his teachers. He will select noteworthy lessons, particularly effective treatments, and sage advice to pass on to upcoming generations. Attendees will learn clinically applicable treatments for various disorders, including unique uses and external applications of herbs and self-massage techniques.

Shonishin, and Other Easy Ways to Treat Children from Birth to Seven Years
by Holly Guzman

3
CEU/PDA Saturday, October 27, 2:00-5:00 pm CAB Category: 1

When the people you know have children, it is great to be able to help from babyhood on. Shonishin, first popularized in southern Japan, is used to enhance childrens’ immunity, diagnose their constitutions, and get them through many common ailments. The main methods do not insert needles, but use gentle, brief tapping and rubbing of acupuncture channels. A lovely way of interaction, it can stand alone as treatment or be combined with herbs and other therapies. The workshop includes a demonstration of a once-a-month method for wellness, as well as techniques for acute and chronic issues. Whether you are experienced in treating children or want to begin now, this class will show quick, effective ways to positively influence childrens’ health.

Yamamoto New Scalp Acupuncture (YNSA) for Neurological Diseases
by David Bomzon and Avi Amir

3
CEU/PDA Saturday, October 27, 2:00-5:00 pm CAB Category: 1

Yamamoto New Scalp Acupuncture (YNSA) is named after the Japanese physician, Dr. Toshikatsu Yamamoto, who developed this acupuncture system in 1973. YNSA is used to treat neurological conditions, and is effective in stroke patients with pain and/or restricted mobility. YNSA is comprised of basic acupuncture points (somatopes), mainly on the scalp. In addition to providing symptomatic relief, YNSA is sometimes curative. Attendees will learn background of YNSA, and how to use it to treat patients with acute or chronic pain and neurological diseases, including the needling points of YNSA, its diagnostic area, and how to use them to select the correct needling point; how YNSA is applied to a patient with neurological disease and pain, how to apply it to treat any energy imbalance in the body, and how to combine YNSA with any TCM treatment.

SUNDAY, OCTOBER 28, 2017

Placebo Effect and Penetrating Divine Illumination
by Ted Kaptchuk

1
CEU/PDA Sunday, October 28, 9:00-9:55 am CAB Category: 1

What is the fundamental difference between "causality" as defined in biomedicine and East Asian medicine? What is "evidence" in the two systems? The difference will be examined by contrasting the biomedical idea of placebo effects and the concept of the "penetrating divine illumination". Professor Kaptchuk will present a history of the "penetrating divine illumination" from the Nei Jing to early 19th century and why it disappears from Asian medical texts. Clinical implications will be discussed, which will form the foundation for the afternoon talk on how the soul and physical body are inextricably linked.

Traditional Chinese Medicine and Human Performance
by Whitfield Reaves

1
CEU/PDA Sunday, October 28, 9:55-10:45 am CAB Category: 1

The skillful use of acupuncture, Chinese herbs, and nutrition provides benefits to athletes at a time when they are searching for any and all means of performance enhancement. What has been learned from this specialized application of Chinese medicine can be applied to anyone seeking optimal performance to achieve their personal goals. This lecture will focus on enhancing human performance beyond the sporting world. Reaves will discuss the integration of acupuncture and the principles of Chinese medicine used in sports medicine, both for the athlete and the active person.

Yangsheng Teachings on Living Longer, Healthier, Happier, and Wiser
by Peter Deadman

1
CEU/PDA Sunday, October 28, 11:15 am-12:05 pm CAB Category: 1

Gain inspiration from a broad overview of the 2500-year-old yangsheng (nourishment of life) teachings on how to live longer and be healthier, happier, and wiser in doing so. Attendees will learn how best to care for their own wellbeing and serve as models and teachers for their patients.

A Clinical Perspective on Human Performance
by Whitfield Reaves

3
CEU/PDA Sunday, October 28, 2:00-5:00 pm CAB Category: 1

The skillful use of acupuncture, Chinese herbs, and nutrition provides benefits to athletes at a time when they are searching for any and all means of performance enhancement. What has been learned from this specialized application of Chinese medicine can be applied to anyone seeking optimal performance to achieve their personal goals. This lecture will focus on enhancing human performance beyond the sporting world. Whitfield Reaves will discuss his favorite techniques, formulas, and acupuncture points, used in the athletic community since before the 1984 Olympics in Los Angeles, where Reaves supported American athletes. Included will be the importance of proper zang-fu diagnosis, mental preparation, and postural stability. Attendees will gain new skills and confidence in the care of the athlete and the active patient.

SYMPOSIUM PARTY

Be sure to join our 30th Anniversary Symposium Party in the Aviary Ballroom on Saturday, October 27th from 7:30–10 pm. 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!

READY TO REGISTER?

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Friday: 10:30 am-2:15 pm and 4:45-7:00 pm
Saturday: 10:30 am-2:15 pm and 4:45-7:00 pm
Sunday: 8:30 am-1:00 pm

Cultivating the Mind and Emotions for Health and Wellbeing
by Peter Deadman

3
CEU/PDA

Sunday, October 28, 2:00-5:00 pm

CAB Category: 1

In many cases, mental and emotional states play a greater role in health and wellbeing than any other factor, because without a level of emotional integration, it is impossible to truly care for ourselves. This workshop will delve into the harm caused by unregulated emotions and explain, using both yangsheng (nourishment of life) teachings and modern research, how practitioners and patients can transform them into positive mental states. It will then offer simple, practical ways to cultivate cooler, calmer, more centered, more connected, and more compassionate states.

The Ladder of the Soul in Chinese Medicine *by Ted Kaptchuk*

3
CEU/PDA

Sunday, October 28, 2:00-5:00 pm

CAB Category: 1

This presentation will describe the nature of the "soul" (ling-hun) in Chinese medicine. Far from being marginal, it is central to the Nei Jing and many other early Chinese medical texts. The talk will review the five components of the soul—hun, po, yi, zhi and shen—on existential, moral, and spiritual levels, and their intrinsic relationship to the physical body. After describing these five components, the unifying foundational Chinese medicine concept of "the ladder of the soul" will be examined. Examples of relevance to herbal and acupuncture practice will be presented.

Introduction to Diode Rings: Non-Insertive Adjunct Treatments
for Musculoskeletal Disorders *by Kiiko Matsumoto*

3
CEU/PDA

Sunday, October 28, 2:00-5:00 pm

CAB Category: 1

For those that practice a more distal approach to their acupuncture treatments, immediate relief of pain can be elusive. While inserting needles at local sites has the potential to harm inflamed tissues, it does offer a simple and often effective solution in the short term. A fantastic compromise is the use of diode rings, which are a non-insertive alternative to needles that can easily be applied along channels directly at the site of pain. Diode rings are similar to magnets, but more effective, and can offer profound long-term results. In this workshop, attendees will learn how to safely use diode rings as an adjunct to more traditional treatments for musculoskeletal and vascular disorders.

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Roger Jahnke · Andrew Gaeddert
Andrew Nugent-Head · Paul Chek
East Haradin · Drew Pierson
David Bomzon and Avi Amir · Guohui Liu
Sarica Cernohous · Chad Conner

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CONFERENCE DETAILS

REFUND POLICY

All cancellations must be in writing via email to symposium@pacificcollege.edu. An administrative fee of \$50 is assessed on ALL cancellations email dated before Thursday, October 4, 2018. Starting Friday, October 5, 2018, a 50% cancellation fee will apply. NO refunds will be granted after Saturday, October 20, 2018, 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.

MEETING SPACE + 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. For the afternoon workshops, the doors will open and seats become available 15 minutes prior to the start of the workshop start time. Plan accordingly and arrive 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.

HOTEL ACCOMMODATIONS

The Catamaran Hotel (Symposium site)
3999 Mission Blvd., San Diego, CA 92109
1-800-422-8386
<https://www.catamaranresort.com/groups/PCOM2018>
\$189 Single/Double, \$199 Triple, and \$209 Quad

QUESTIONS REGARDING HOTELS AND AIRLINES

Contact Barbara Weber, (619) 334-3180 or Confcoord@aol.com, for information regarding room sharing options. Airport shuttle service to and from the hotel. The Catamaran Resort Hotel uses Cloud 9 Shuttle.

PARKING

Please note the following rates if you are planning to park at the Catamaran Hotel. Hotel Guest: \$17.00, \$22.00 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 \$17 per day.

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

CEU/PDA HOURS PENDING

Pacific Symposium provides up to 59 Continuing Education hours total. Schedule is subject to change without notice. At the time of this publication, all CEUs/PDAs are pending as we apply for approval from NCCAOM and CAB. Any changes made to the CEU/PDA totals will be updated on the website. You must pay the professional rate to receive CEU credit. Pacific College of Oriental Medicine Alumni receive 10% off the professional rate.

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THIS YEAR’S SPEAKERS

Avi Amir

Avi Amir specializes in Chinese medicine and medical massage therapy, particularly the treatment of orthopedic problems and pain. He also practices Yamamoto New Scalp Acupuncture (YNSA), which he studied under the guidance of Dr. Toshikatsu Yamamoto himself, and with whom he maintains regular contact. Amir is one of the co-founders of the International School of Scalp Acupuncture and an active managing partner of the community clinic at the Pnima Center in Haifa, Israel, where he treats over 150 patients a week. Amir recently established a unique support center at Pnima, the first of its kind in Israel, to provide professional enrichment and guidance to new graduates in the field of complementary medicine.

David Bomzon

David Bomzon is one of the leading authorities in Israel on rehabilitative and integrative acupuncture, specializing in classical Chinese medicine and Yamamoto New Scalp Acupuncture (YNSA). He is the founder of the Pnima Center in Haifa, Israel, which has become the leading center for Chinese medicine in Haifa since its establishment in 2007. Bomzon teaches rehabilitative Chinese medicine and is a senior lecturer in complementary and integrative medicine at Reidman College in Israel. He is involved in clinical research into the benefits of YNSA in neurological rehabilitation.

Sarica Cernohous

While working in the natural foods industry, Sarica Cernohous, MSTOM, DACM, became a patient of acupuncture and TCM, and was deeply impressed by the results. As a result, she began her formal study at the San Diego campus of Pacific College of Oriental Medicine, graduating with her master’s in 2001 and doctorate in 2018. Dr. Cernohous couples traditional methods such as pulse diagnosis, tongue observation, and palpation of the abdomen with modern therapies such as cold laser and LED light therapy. She also has a life-long passion for nutrition, culminating in her book *The Funky Kitchen*, on traditional food preparation techniques for maximum bioavailability of nutrients, and its accompanying online course, “Fresh, Fun and Flavorful in The Funky Kitchen”. Dr. Cernohous has also created a cellular-healing, lab-based, personalized nutrition and lifestyle-support program, the LAPIS Lifestyle Method, the cornerstone of which is her work as a coach for Metabolic Balance of Germany.

Paul Chek

Paul Chek is an internationally-renowned expert in the fields of corrective and high-performance exercise kinesiology. For over twenty-five years, Chek’s unique, holistic approach to treatment and education has changed the lives of countless people worldwide. By treating the body as a whole system and finding the root cause of a problem, Chek has been successful where traditional approaches have consistently failed. He is also the founder of the C.H.E.K (Corrective Holistic Exercise Kinesiology) Institute, based in California, USA, and the PPS Success Mastery Coaching Program. Chek is a licensed holistic health practitioner in California, certified neuromuscular therapist, and clinical exercise specialist (ACE). He is also the author of six books, one of which, *The Golf Biomechanic’s Manual*, has been adopted for use by professional golf schools and was featured on the Golf Channel.

Misha Cohen

Misha Cohen, DOM, is the clinical director of Chicken Soup Chinese Medicine, executive director of the MRCE Foundation, and integrative medicine research specialist at the University of California Institute for Health and Aging, all in San Francisco. She is also an elected fellow of the National Academy of Acupuncture and Oriental Medicine. Dr. Cohen has been practicing traditional Asian medicine for nearly forty years.

Chad Conner

Chad Conner, MSOM, has nearly twenty years of experience developing and overseeing successful integrative medicine centers in both the United States and abroad. As a licensed acupuncturist, herbalist, and massage therapist, Conner has provided Chinese medical services to the University of San Diego medical school free clinic and San Diego Hospice while running a successful private practice. While abroad, Conner co-founded Ananda Health Centers in Casablanca, Morocco, the first multi-disciplinary wellness centers in the country, and the Institute of Wu Wei, the first acupuncture school in the country. Over the last five years, Conner has studied and incorporated cannabis medicine into his practice. He co-founded Pure Ratios, a vertically integrated medical cannabis and CBD hemp company specializing in combinations of Eastern natural medicine and Western scientific research, has been featured in several podcasts on cannabis and Chinese medicine, and is writing a book on cannabis medicine for natural health practitioners.

Peter Deadman

Peter Deadman has worked in the field of health education and complementary medicine for over 45 years as a practitioner, teacher, author, and entrepreneur. In 1971, he co-founded Infinity Foods, a natural and organic food shop in

Brighton, England, and subsequently co-founded the Brighton Natural Health Centre. Deadman qualified as an acupuncture practitioner in 1978 and as an herbalist some years later. He has taught Chinese medicine, health maintenance, and qigong internationally, and is the founder and publisher of the *Journal of Chinese Medicine*, co-author of *A Manual of Acupuncture*, and author of *Live Well Live Long: Teachings from the Chinese Nourishment of Life Tradition*.

Subhuti Dharmananda

Subhuti Dharmananda, PhD, helped initiate People’s Herbs Incorporated, All-The-Tea Company, and Dharma Consulting International, and has been a consultant to several major herb companies including Fmali Herbs (maker of Good Earth Teas), Health Concerns (maker of Chinese Traditionals), and Sen (maker of Sen traditional herbal formulae and other products). He has been an editor, reviewer, and contributor for several journals involved with traditional medicine, including the *International Journal of Oriental Medicine*, the *Protocol Journal of Botanical Medicine*, and *Herbalgram*.

Felice Dunas

Felice Dunas, PhD, is an international professional speaker, consultant, and executive coach who has used her understanding of behavior, the human body, and ancient principles to enhance the lives of individuals, couples, families, and corporate and healthcare industry CEOs for nearly forty years. Dr. Dunas brings her global patients, clients, and audiences better health, happiness, and quality of life through erotic and intimacy education, alternative medicine, and marriage coaching. She also serves as a consultant to corporations and hospitals seeking to lower health care costs with acupuncture and alternative medicine. She is the author of the best-seller *Passion Play: Ancient Secrets for a Lifetime of Health and Happiness Through Sensational Sex*, and her work has appeared in periodicals including *Cosmopolitan*, *Men’s Health*, *Glamour*, *Prevention*, *Marie Claire*, the *Los Angeles Times*, and the *Chicago Tribune*. She is also a veteran media guest and has appeared on numerous local, national, and international television and radio programs.

Andy Ellis

Andrew Ellis first studied Chinese medicine with Dr. James Tin Yau So at the New England School of Acupuncture. He left New England in 1983 to study the Chinese language in Taiwan and apprenticed with Chinese herbalist Xu Fu-Su there for several years. Later, he studied internal medicine and gynecology at the Xiamen Hospital of Chinese medicine, where he also specialized in the study of acupuncture with Dr. Shi Neng-Yun and dermatology with Dr. Zhang Guang-Cai. Ellis is the founding owner of Spring Wind Herbs in Berkeley, California and has authored, translated, or co-translated several books on Chinese medicine including *Chinese Herbal Medicine: Formulas & Strategies* (2nd Ed.), *Grasping the Wind*, *The Clinical Experience of Dr. Shi Neng-Yun*, *Notes from South Mountain*, and *Fundamentals of Chinese Medicine*.

Andrew Gaeddert

Andrew Gaeddert, president and founder of Health Concerns, originally became involved in herbal medicine after conventional medicine failed to help his symptoms of Crohn’s disease, a life-threatening digestive disorder. Through years of research, experimentation, and self-treatment with herbal medicine, Gaeddert was able to successfully treat his condition and regain his good health. Since then, he has helped thousands of people heal with herbal medicine through his private practice. He has authored numerous articles and books, including *Healing Immune Disorders*, *Healing Digestive Disorders*, and *Chinese Herbs in the Western Clinic*. Dedicated to the concept of lifelong education, has studied with master herbalists from the U.S. and China and lectured at Columbia University and many other colleges nationwide. He has worked with other herbalists to develop clinically tested formulas to help people with AIDS, cancer, and other chronic diseases, and served on the protocol teams of several scientific studies on herbal medicine. Currently Gaeddert is involved in endometriosis research.

Holly Guzman

At 13, Guzman studied acupuncture with help from the Chinese Embassy in Afghanistan, where she lived in 1972. There, she was given a booklet on curing deaf mutes. A few years later, Guzman traveled to the Guang Zhou School for the Deaf Mute in China to see the successful acupuncture protocol in action. Guzman attended NESA in 1979, and a year later assisted Ted Kaptchuk in opening the first acupuncture program at a state hospital. In 1983, she joined the first graduating class of ACTCM, assisted Miriam Lee, and studied with Yat Ki Lai. She is a contributing author in *Acupuncture in Practice*, *The Natural Health First Aid Guide*, and *Breast Cancer/Breast Health*. Holly has practiced in Santa Cruz, CA since 1983, specializing in women’s health, pediatrics, immune issues, cancer, and epilepsy. She currently teaches for the master’s, doctorate, and extension programs at Five Branches and offers students clinical training externships.

East Haradin

Dr. East Haradin, DAOM, LAc, has practiced integrative medicine since 1999. She shares her passion for this medicine as a professor and clinical supervisor at the Pacific College of Oriental Medicine in San Diego, California. In 2008, she created a special outreach program at the Family Recovery Center in Oceanside,

California, where residential and day-treatment patients receive acupuncture in group and private settings, and has worked for several years with patients at the San Diego Fertility Center, offering pre/post Assisted Reproductive Therapy treatments. In 2010, Dr. Haradin founded 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. She joined the Mind Body Medical Group at the Chopra Center in Carlsbad, California, as a specialist offering acupuncture in 2013. Dr. Haradin also holds workshops on subjects such as aromatherapy, longevity, and facial rejuvenation.

Bill Helm

Bill Helm is the director and lead instructor at the Taoist Sanctuary of San Diego and the former department chair of the massage and bodywork program at Pacific College of Oriental Medicine. He has been studying Chinese martial and healing arts since 1965, specializing in taijiquan, tui na Chinese bodywork, qigong, and herbal medicine. Helm is a 20th generation Indoor Disciple of Grandmaster Chen Xiaowang and holds a 6th Duan Wei from the Chinese Wushu Association. He has also studied with taijiquan Masters Chen Xiaoxing, Chen Zhiquang, Ren Guangyi, and Chen Bing. Helm studied traditional Chinese Medicine at the Shanghai College of Medicine and the Beijing Olympic Training Center in China and in the U.S. with Taoist Master Share K. Lew and Dr. Yu Da Fang.

Roger Jahnke

With over 40 years of clinical experience, Dr. Roger Jahnke, OMD, is director of the Institute of Integral Qigong and Tai Chi (IIQTC) and serves as a consultant to hospitals, social service agencies, and corporations in complementary and integrative medicine, wellness, and medical cost reduction. He co-convened the national expert meeting on qigong and taiji in collaboration with the University of Illinois at Urbana-Champaign, as well as the National Blueprint for Active Aging. Jahnke is the author of The Healer Within and The Healing Promise of Qi. He also edited and translated the clinical chapters for Chinese Medical Qigong, the first English translation of the only official textbook of medical qigong, used in Chinese colleges and universities. In 2010, Dr. Jahnke published a comprehensive review of the evidence base of the health benefits of taiji and qigong in the prestigious American Journal of Health Promotion in collaboration with Arizona State University and the University of Arizona.

Mark Kastner

Mark Kastner, LAc and herbalist, has been in private practice since 1987. He studied traditional Chinese medicine in Beijing and completed his degree at California Acupuncture College in San Diego, California. Kastner is the author of Alternative Healing, a complete A-Z guide to more than 150 complimentary therapies, and Closing the Circle, a novel that delves into healing interpersonal relationships. As a pioneer and specialist in the field of holistic health, Kastner has been actively involved in the local promotion of integrative medicine. He started a radio talk show, has made numerous guest appearances on the news, and has been featured in articles in the San Diego Union-Tribune. Over the years Kastner has worked with numerous major sports teams including the Los Angeles Lakers, San Diego Padres, and San Diego Chargers. He currently lectures, leads workshops on national level teaching orthopedic acupuncture, and teaches orthopedics and sports medicine in Pacific College of Oriental Medicine’s graduate program.

Ted Kaptchuk

The multidisciplinary career of Ted Kaptchuk began with his training as an acupuncturist and herbalist in Macao, China. He then went on to write a classic textbook on Chinese medicine, The Web That Has No Weaver, and wrote a BBC documentary series on global healing traditions. Kaptchuk was recruited to investigate Asian medicine at Harvard and subsequently trained in rigorous scientific methodology. He has gone on to lead groundbreaking studies across a variety of disciplines—including clinical science, neurobiology, psychology, anthropology, history, bioethics, and philosophy—all focused on placebo effects and the healing encounter. He is a professor of medicine at Harvard Medical School, where he directs the Placebo Studies and Therapeutic Encounter program, hosted at the Beth Israel Deaconess Medical Center.

Guohui Liu

Guohui Liu, MMed (China), LAc, received his MMed in internal medicine from Chengdu University of TCM in 1985. His areas of expertise include digestive disorders, pain syndromes, male disorders, and infectious disease. He is the author of the highly regarded text Warm Pathogen Diseases: A Clinical Guide.

Kiiko Matsumoto

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, including Kiiko Matsumoto’s Clinical Strategies, a 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. Matsumoto is well-known for her ability to integrate the work of some of the most famous Japanese masters into her practice. Her style of acupuncture focuses on treating the root cause with emphasis on the entire body rather than a single symptom. As a result, patients find her treatments to be effective and long lasting.

Robert Nations

Robert Nations graduated from Pacific College of Oriental Medicine in San Diego, California and has been a member of the faculty since 1997. Nations also trained and taught at the Taoist Sanctuary of San Diego for 14 years; his studies of healing included time in both China and Senegal. He and his wife maintain their private practice, Nations Integrative Acupuncture, in San Diego. He is also a staff acupuncturist with Sharp Hospital in Coronado and contracts with the University of California, San Diego Center for Integrative Medicine as an educator and acupuncturist. In 2010, Nations was certified as the master trainer for the California Department of Public Health, teaching the Tai Chi Moving for Better Balance Program. His teaching experience also includes the San Diego Community College Continuing Education Emeritus Program where he conducts taiji and qigong classes.

Andrew Nugent-Head

Founder and president of the Association for Traditional Studies, Andrew Nugent-Head lived in China for 28 years, studying Chinese medicine, internal cultivation practices, and martial arts before returning to the US in 2014. He was privileged to learn in traditional mentor-disciple relationships with the last generation of practitioners born and educated prior to the arrival of communism in 1949, one of the only contemporary practitioners to have learned classical medicine directly from the practitioners who were trained before it was modernized into what is known today as traditional Chinese medicine. Dedicated to saving the skills and perspectives of these practitioners, his work generated thousands of hours of footage and hundreds of seminars. He runs a teaching clinic highlighting the efficacy of classical Chinese medicine with his wife and fellow practitioner, Julie Ann.

JulieAnn Nugent-Head

After completing her master’s in Oriental medicine, Dr. Julie Ann Nugent-Head opened a private practice in Boulder, Colorado. She spent the summers of 2004 and 2005 in internships at Kuan Jie hospital in Beijing, then moved to China full-time in 2006 to learn Chinese and study under two of Beijing’s most famous practitioners, Drs. Li Hongxiang and Chen Tongyun. While working with them over the next 8 years, she provided medical care to the migrant workers and expat population of Beijing. After the birth of her third child, Dr. Nugent-Head and her husband Andrew relocated to the rural tea mountains of Hangzhou, where she completed her doctorate in Chinese medicine, at the Zhejiang University of Chinese Medicine. Dr. Nugent-Head has been published in the Journal of Chinese Medicine, teaches an online herbal program, lectures internationally, and treats patients locally in Asheville, NC.

Drew Pierson

Drew Pierson, DAOM, LAc, specializes in integrative medicine, mental/ neuropsychological issues in both adult and pediatric populations, neuroleadership, and peak performance, which is concerned with creating a complete lifestyle for excellence, peak mental health, sleep, stress, exercise, dietary intake, and environment. He is a board-certified neurotherapist and has been certified in EEG biofeedback since 1996. Dr. Pierson worked in a large neuropsychological practice where he specialized in attention disorders, depression, anxiety, autism, seizure disorders, and many other medication-resistant conditions. He is also a decorated veteran, having served 6 years in the U.S. Navy as an electronic engineer on a nuclear submarine.

Whitfield Reaves

Whitfield Reaves, OMD, LAc, has been in clinical practice since 1981. His thesis, titled "Acupuncture and the Treatment of Common Running Injuries", was one of the first-ever English language works integrating traditional Chinese acupuncture with Western orthopedic and sports medicine. Reaves’ 30 years of clinical experience includes medical care for athletes at the 1984 Olympic Games in Los Angeles as well as skiing, track and field, cycling, and triathlon events. In addition, he is the author of The Acupuncture Handbook of Sports Injuries and Pain, one of the only texts on sports acupuncture available in the West. Reaves is also the director and founder of the Acupuncture Sports Medicine Apprenticeship Program.

Z'ev Rosenberg

Z'ev Rosenberg, LAc, of the first generation of American-born practitioners of Chinese/East Asian Medicine, has been in clinical practice since 1981. With a background in macrobiotics, shiatsu, and Western herbal medicine, Z’ev taught at Pacific College of Oriental Medicine for twenty-three years, and continues to teach, write, and research. His first book, Returning to the Source: Han Dynasty Medical Classics in Modern Clinical Practice, has just been released by Singing Dragon press.

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blood flow to the heart, genitals, and muscles. It helps lower blood pressure, reduces blood clotting, functions as a neurotransmitter, increases blood and oxygen flow to the brain, strengthens immune function, reduces inflammation, and more.

In Chinese medicine, the nose is considered to be part of the lung system, and by implication plays a role in absorbing the qi of air. For this reason, all neijia breathing practices emphasize nasal inhalation.

The value of this practice was confirmed in 1995 when it was discovered that NO is produced in the paranasal sinuses and inhaled with every breath through the nose (but not mouth). The effect of local paranasal NO production is to enhance defense against exterior pathogens, due to its antimicrobial action, and when NO is inhaled into the lungs, it vasodilates pulmonary blood vessels and thus increases oxygen uptake¹¹. Unsurprisingly, nasal NO production is reduced by up to 50% in people with sinus disorders¹², but surprisingly, NO production was reduced by up to 83% after five minutes of vigorous exercise, attributed to reduction in blood flow to the nasal mucosa¹³. Slow breathing, by contrast, increases NO absorption.

Finally, studies show that humming (as in yogic OM chanting, for example) can increase NO production in the paranasal sinuses fifteen-fold¹⁴, as well as help cure chronic sinus disorders¹⁵. As we shall see below, exhaling against resistance, as in chanting, singing, etc., also activates the relaxing and soothing parasympathetic state.

(b) Breathing and carbon dioxide

If people are asked to breathe deeply, it is likely their response will be to inhale strongly and rapidly into the upper chest, assuming that this will increase oxygen uptake. In fact, the opposite is the case. Hyperventilation, whether deliberate (as above) or as a response to stress, does not increase oxygenation, but does reduce healthy levels of carbon dioxide (CO₂) in the blood. This lack of CO₂ leads to a whole raft of symptoms including anxiety, chest tightness, worsening feelings of stress, vasoconstriction, reduced oxygenation, raised blood pressure, and reduction of blood flow to the brain (affecting attention, concentration and effective functioning). The well-known remedy for anxiety induced by hyperventilation is to inhale and exhale into a paper bag, restoring CO₂ levels.

When we breathe slowly and deeply, we increase beneficial levels of CO₂ (we can feel this as a sensation of air hunger, which should not be allowed to become extreme). As CO₂ is a vasodilator, pulmonary blood vessels expand, increasing their ability to take up oxygen. More blood and

oxygen therefore flow to the heart and brain, blood pressure reduces, and the nervous system is calmed. This CO₂-induced vasodilation may also explain the experience of increased warmth in the hands or the whole body during qigong meditation, even when simply standing still.

(c) Breathing—the autonomic nervous system, heart rate variability, and vagal tone

This part of the article discusses the importance of achieving a health yin-yang balance in the autonomic nervous system (ANS). It then explains how heart rate variability (HRV) serves as a window into the state of the ANS—one which has allowed researchers to observe which practices and behaviours enhance its healthy functioning. Finally, it explains how slow, deep (“coherent”) breathing can be used to promote what is known as vagal tone to restore ANS balance, counter stress and negative physical and mental states, and help repair the body and mind.

THE YIN AND YANG OF THE AUTONOMIC NERVOUS SYSTEM

The yang sympathetic branch

Commonly known as the ‘fight or flight’ branch of the ANS, the sympathetic nervous system (SNS) is rapidly activated in the face of threat and danger. It is also raised in response to various other challenges, such as time pressure, stress, anger, most external exercise, voluntary exposure to thrill and excitement (“excessive joy”) and so on. A cascade of physiological responses accompanies raised SNS activity, including constriction of blood vessels, raised blood pressure, raised heart rate, faster breathing, and pupil dilation (which makes us better able to see danger).

While the SNS response is clearly a vital evolutionary defence adaptation, and in other circumstances a state of exciting stimulation¹⁶, many problems arise when it becomes chronically activated. Some of our patients, family, friends and community, even we ourselves, may suffer a kind of locked-in SNS activation. The result is varying levels of ongoing stress, anxiety, insomnia, fear, worry, feelings of sustained threat, chronically raised heart rate and blood pressure, defensiveness, depression, inflexibility, poor judgement, poor reasoning, inability to concentrate, PTSD, and so on. Sometimes compared to the gas pedal in a car, SNS activation burns energy in cells. If the SNS is chronically activated, it can lead to inflammation (with consequent cell damage from free radicals) and inability of the PSNS to restore energy to cells and repair them. Prolonged inflammation is increasingly understood to underlie most chronic non-infectious diseases (cancer, car-

diovascular disease, dementia, etc.) as well as premature aging and early death.

The yin parasympathetic branch

“The cool eye discerns men’s character. The cool ear hears the intent in their speech. Cool emotions plumb others’ feelings. The cool mind penetrates everything.”

Vegetable Root Discourse, 16th century CE¹⁷

The parasympathetic nervous system (PSNS) has traditionally been called the ‘rest and digest’ branch of the ANS. In this state, blood vessels relax and dilate, heart rate and blood pressure reduce, and the immune system is enhanced. Cell energy reserves are restored and anti-inflammatory pathways are activated to counter the inflammatory effects of SNS predominance.

Beyond this, there is ever-growing interest in the psychological and emotional implications of having a nervous system that defaults to PSNS activity. Along with calming and relaxing of the body comes a host of responses such as increased feelings of trust, safety, closeness, and affection.

The polyvagal theory

“The complete mind cannot stay hidden in the body. Rather, it takes shape and appears on the outside. It can be known from the complexion of the face. When people meet someone whose appearance and mind are full of positive energy, they will feel happier than if they had met their own brother.”

Guanzi, 4th century BCE¹⁸

Stephen Porges, distinguished psychiatry professor at the University of North Carolina, developed his ‘polyvagal theory’ in 1994. One aspect of this is a discussion of evolutionary defence systems associated with the ANS. The most primitive is the reptilian freeze (and play dead) response. This can still immobilise us in the face of threat and danger, as well as physical, emotional, and sexual abuse. Long-term consequences include dissociative states, inability to feel and inhabit the body, and digestive disorders such as IBS. When his patients report feelings of shame that, in the face of abuse, they neither fled nor fought back, Porges reassures them that in the circumstances they were responding with the best, or only, defense available to them at the time.

More evolutionarily advanced is the standard SNS ‘fight or flight’ response. Beyond that—the most recent and sophisticated defence system, and one unique to mammals—is the PSNS response, a ‘circuit for social interaction’ as Porges calls it. He proposes that fibers from the vagus nerve link to muscles of facial expression, vocalisation, and listening.

This means that when we ourselves are in a PSNS dominant state, we are signalling to others (friends, family, strangers and patients) via our facial expressions, tone and pattern of voice, and willingness to listen, that we are safe and can be trusted¹⁹.

These messages cannot easily be faked, but when genuine and springing from a deeply residing calm, centered and compassionate state, can help shift others from a SNS-dominant condition of stress, tightness, and fear, to a PSNS-relaxed and trusting one. For those unable to access this state without help, it can come as a blessed relief and is the starting point of healing—even before needles or herbs are applied.

Yin-yang balance

“The yang energy in people is firm; firmness without restraint turns into aggressiveness, like fire rising. Yin energy is flexible; flexibility without support becomes too weak, like water descending.”

Liu I-ming, 18th century²⁰

We no more want to be in a permanent state of blissed-out relaxation than we do in a high energy state of pressure and stress. What we do want is a flexible and appropriate autonomic response. We want to be able to go into a yang SNS-predominant state if there is genuine threat or by choice, and to return to a default PSNS-predominant state at will, or just automatically, like an elastic band the moment it stops being stretched.

At the same time, when we enter SNS-dominant states to deal with threat, conflict, challenge, work stress, business decisions, or competition, we want to be able to hold a calm PSNS centre (yin within yang) that helps us act smartly and skilfully in the most appropriate way.

Equally, in our relaxed and calm PSNS state, we want to retain a kind of latent SNS readiness, so we can swiftly and smoothly transition into effective action (yang within yin).

This kind of flexible and appropriately responding nervous system builds what is known as ‘stress resilience’: the ability to respond to, and recover from, challenging events.

Heart rate variability: a window into the autonomic nervous system

One of the problems in assessing the ANS is that there are few reliable, non-invasive markers as to how it is functioning, which makes observation of heart rate variability particularly valuable. **OM**

EDITOR’S NOTE: The complete references can be found online at <https://www.pacificcollege.edu/news/blog/2018/07/12/transformative-power-deep-slow-breathing>

integration of the herbs with their routine clinical protocols. However, I still see a wide gap in mainstream usage of TCM in the U.S. versus Asia and I want to see this narrow. One concept I'd always thought about was working with successful practitioners of Chinese herbal medicine, well-trained in China, with extensive clinical experience practicing in the U.S. Several years ago, I was in New York, meeting with one of my medical school mates from China, Dr. Guoping Zheng. She was studying gynecology and women's health and is now running a successful practice focusing on women's health and fertility. We began talking about this idea of using her vast clinical experience treating fertility patients in the U.S., combined with her extensive knowledge of Chinese herbs, to bring herbal usage to a broader audience, allowing other practitioners to gain from her ideas and using her custom formulations built on years of experience to help more patients in the U.S. She was interested, and over the years we kept this dialogue open until, recently, she was ready to prepare 3 formulas for TCMzone, which we brought to our quality manufacturer for production and quality control tests, and eventually to market as our first TCMCeuticals formulas: Fertile Wisdom*.

To summarize the concept behind TCMCeuticals: it represents a unique product line composed of different herbal products, formulated by master-level practitioners with decades of experience in clinical specialty areas. They understand the common conditions of U.S. patients in their specialty and come from high level training in China. We're all familiar with the terms nutraceuticals, pharmaceuticals, and even foodceuticals; now we are introducing the first ever TCMCeuticals. TCM+Ceuticals equals custom, condition-specific, traditional Chinese herbal products representing safety, efficacy and highest possible quality. These 3 important concepts are represented in our TCMCeuticals logo: the three yellow, natural earth pieces that support this product line.

JK: You mentioned Dr. Zheng's Fertile Wisdom line. Can you tell us about each of these new lines and what makes them different from classical TCM formulas?

DW: TCMCeuticals is a brand of herbal formulas that represent condition-specific formulas; this is important. Chinese herbal medicine is extremely broad, requiring intensive understanding of many areas. We designed this product line based on the experience of formulators and their in-depth understanding of Chinese herbal medicine. This opens the door for many practitioners in the U.S. to use these Chinese herbal formulas based on common conditions seen in their clinic.

The first two lines we launched are for G.I. and fertility, two focuses widely seen in the U.S.—not only by acupuncturists but also many other integrative practitioners (NDs, DCs, MDs) interested in progressing their integrative medical approach. TCMCeuticals provides a unique tool for the healthcare profession.

The last 18 years, our approach has been to provide high quality classical formulas and compounding single herbs in a variety of dosage forms, fundamental products for day to day use by Chinese medicine practitioners and acupuncturists. These practitioners can easily use our products with the support of our team and their knowledge of TCM. Our new line of TCMCeuticals represents a new concept of traditional herbal medicine, a line completely formulated by practitioners and based on classical formulas, but including practitioners' clinical experiences. These are not your classical TCM formulas; these are expert formulas using TCM as a guide but uniquely formulated for specific conditions seen in modern clinical settings. TCMCeuticals granules and capsules can be used alone or easily integrated with our existing TCMzone brands of classical formulas and compounding single herbs.

JK: What is your vision for TCMCeuticals down the line? What do you hope to see with this new brand?

DW: I am excited to see the launch of the brand new TCMCeuticals. This is a milestone for our business. I'm also very excited to see the initial results of this launch. We have received such positive feedback in only our first month and I feel strongly that the concept of TCMCeuticals, **Safety, Efficacy, and Quality** is a strong foundation to support and grow this line. I'm hoping this condition-specific line will create broader usage among integrative medicine practitioners, representing an important movement for our company in supporting a vast number of practitioners, creating consistent clinical results, and ultimately helping the general public achieve better health. In addition to these first six formulas, we have plans for another five, launching later this year under the TCMCeuticals brand. We're looking forward to this line covering many conditions. My goal is for TCMzone to carry a broad selection of herbal products from classical Chinese formulas, Japanese Kampo formulas, compounding single herbs and clinically-driven formulas so practitioners and consumers have access to many different kinds of quality herbal products to reach optimal health.

JK: Thank you Dr. Wen, this was very educational and we're looking forward to another great new line at TCMzone! **OM**

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THE CHINESE WELLNESS YANG SHENG-BASED HEALTH CARE SYSTEM

continued from page 13

Until very recently, the wellness basis that complements these strategies was unique to Chinese medicine and other holistic forms of medicine (i.e. Ayurvedic, native, shamanic). It is known by numerous titles; in the literature of Chinese medicine as “foster the righteous” and contemporarily as “maximize function”. It is the very essence of wellness-based medicine. Rather than attacking what is wrong, the “foster the righteous” model maximizes what is right through the tools of Chinese medicine such as acupuncture, herbs, massage, and personal wellbeing cultivation methods like qigong. This strategy refines, awakens, and activate the “healer within” or “the inner elixir”. This is the most profound medicine, naturally produced in the body.

While clinically-based prevention methods such as vaccination and colonoscopies have been present in Western healthcare for some time, only recently has behaviorally-based prevention been of any relevance. As Western medicine transitions to the wellness and prevention framework, what are the primary innovations? Physical activity, anti-inflammatory nutrition and meditation. What is the key to behavioral prevention? These have been the central points of Chinese wellness, or yang sheng, for millennia.

Conventional medical facilities are currently borrowing numerous best practices of wellness and functional enhancement from the Asian healthcare model.

MIND-BODY ENERGETICS: QIGONG, TAIJI, AND MINDFULNESS

Among the most eloquent forms of behaviorally-based wellness practices is Chinese mind-body energetics. Qigong and taiji are the cousins of Indian yoga, but all are mindfulness methods. While the powerful wellness-based practices of acupuncture, body therapy, and herbs have a significant cost, qigong and taiji are pretty much free once one has learned them.

While the questions about qi (energy, function) and the nature of mind (xin-heartmind) are the most interesting aspects of qi cultivation, it is the economics of personal wellness that is most compelling in our society right now. Qigong and taiji (and other mind-body practices) are the underlying solution to many of the medical cost and quality challenges of contemporary time. They are easy to learn (simple forms), easy to get people enthusiastic about, easy to disseminate, and inexpensive due to the group-based learning context.

It is really very simple: people who prevent disease and activate the inner medicine through self-initiated health-enhancement practice need

less clinical medicine, whether conventional, allopathic, or holistic.

The science of estimating the magnitude of the savings is progressing. For now, we can say that if people prevent disease, then society (families, companies, school systems, the military) can save 70-90% of the \$3 trillion annual cost of the medical system.

PROVE IT

Chinese wellness practices are most widely referenced as mind-body practices, moving meditation, and Chinese self-care. Qigong and taiji, in a multitude of forms, are now being implemented in schools, universities, faith institutions, social service agencies, hospitals, clinics, spas, retreat centers, community centers, and even the military. Over 70 randomized clinical trials (RCT) have recently been reviewed (4), finding that the mind-body wellness practices of Chinese medicine are safe and effective in treating and preventing disease and reducing risk for numerous diseases. Inspired by this, the National Institutes of Health recently instituted an annual event called NIH Mind-Body Week with several keynotes on qigong and taiji (5).

In collaboration with the University of Illinois, the Institute of Integral Qigong and Tai Chi (IIQTC) convened the National Consensus Meeting on Qigong and Tai Chi (6). One of many new breakthroughs is the research on gene expression and the reduction of cell death (longevity enhancement) with qigong, taiji, and other forms of mind-body practice. (7) Tai Chi Easy, a program developed especially for bringing taiji and qigong wellness programs to schools, social service agencies, the military, and veterans, has trained 300 “practice leaders” in collaboration with the National Wellness Institute at the University of Wisconsin, the Veterans Administration, several faith institutions, Asian Pacific Health in California, the Western Nebraska Regional Health Authority, and the Southern Arkansas Council on Aging.

As a result, taiji and qigong are rapidly being embraced by policy makers, program coordinators, researchers, and funders.

WHO WILL BENEFIT FROM THIS PARADIGM SHIFT OPPORTUNITY?

In America, sadly, the major medical, social, and economic opportunities associated with Chinese wellness have been neglected by the Chinese medicine profession itself. In personal consulting experiences, including lectures to the AMA, the American Hospital Association (AHA), and the American College of Healthcare Executives

continued on **NEXT PAGE**

(ACHE), it appears that there is a far more robust interest in the implications of wellness in conventional medical institutions than in the institutions associated with Chinese medicine.

At the Institute of Integral Qigong and Tai Chi (IIQTC), we have trained many more MDs, nurses, and physical therapists than we have practitioners of Chinese medicine. The leveraging of the natural wellness currency of Chinese medicine is more in the hands of the Consortium of Academic Health Centers for Integrative Medicine (CAHCIM) than the Council of Colleges of Acupuncture and Oriental Medicine (CCAOM). For the public this is excellent. No one cares where taiji and qigong are coming from, they just want to be sure to have access.

In the past, it has probably been important that the institutions that protect and refine the Chinese medicine profession focus less on the wellness basis of Asian medicine, than the conventional methods of providing medical services and procedures within the American medical paradigm. However, it is also true that the Chinese medicine professional community is in the process of missing one of the most profound opportunities in the history of health-care (for both service and PR). While Chinese doctors are busy acting more like Western clinical practitioners, multitudes of MDs are acting more like Chinese doctors and vigorously recommending wellness through qigong, taiji, meditation, and natural foods. These doctors must unlearn and then learn much to do this, while practitioners of Chinese medicine already have deep training in the principles of wellbeing and balance.

WHAT TO DO

For the Chinese medicine community, only two actions are necessary to take advantage of the inherent benefits within their grasp:

1. For practitioners: implement Chinese wellness in word and deed. This is all inherent to the training in "the medicine".
2. For the institutions of the profession: make the policy decision to more overtly promote the wellness associated aspects of Chinese medicine.

A major transformation in health-care is taking place, and mind-body practice—qigong and taiji—is an essential component. The Chinese medical community is a natural beneficiary. It will require, however, that the Chinese medicine professional demonstrate the principles and promises of bona fide wellness-based medicine that flow naturally from the Asian healthcare tradition—in clinical practice, in professional promotion, and in the formation of policy. **OM**

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ROGER JAHNKE, OMD received Chinese medical training from traditional sources at the earliest Western schools: Tai Xuan School (Tai Hsuan in Hawaii, now the World Medicine Institute for Acupuncture and Herbal Medicine) from 1973-76 and the California Acupuncture College from 1980-83 (original root of the Pacific College of Oriental Medicine).

During his years of clinical practice (1977-present), Roger has had the opportunity to become a consultant for hospitals and institutions, investigating innovation and medical cost containment. He was contracted to present both to key conventional medicine institutions as well as holistic and complementary institutions including the American Medical Association, American Hospital Association, National Wellness Institute, National Council On Aging, American College of Healthcare Executives, and Institute of Health and Productivity Management, as well as all the major TCM and CAM conferences.

Dr Jahnke's first book *The Healer Within* (Harper-Collins, 1997) is used by wellness programs worldwide. He later published *The Healing Promise of Qi* (McGraw-Hill, 2002) which immediately became a classic in the mind-body, holistic, integrative, and energy medicine literature.

Roger has traveled to China eight times to explore the hospitals, institutes, sanatoriums, libraries, museums, research conferences, temples, and sacred mountains to work with scientists, master teachers and wizards. He is the medical director of the Institute of Integral Qigong and Tai Chi, a co-founder of the National Qigong Association, and a consultant on NIH research, with numerous articles and chapters published in respected journals and volumes. Dr. Jahnke has recently been contracted to lecture on qigong and taiji at NIH Mind-Body Week, and is a widely respected thought leader in medicine, healthcare, wellness, research, trends, and policy.

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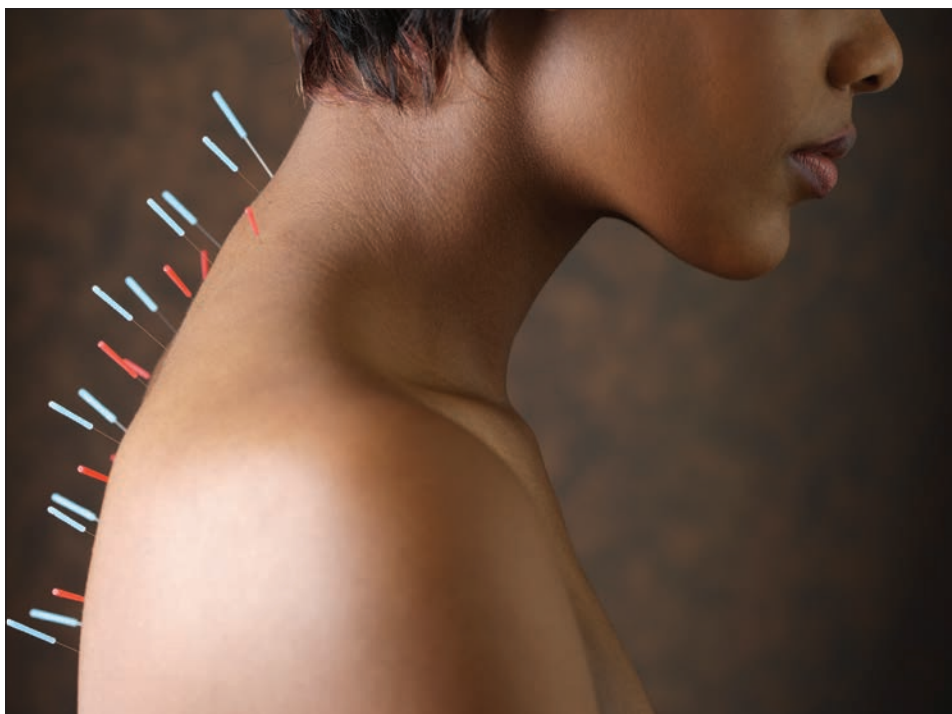
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Classical Five-Element Acupuncture: *Three Powerful Treatment Strategies*

By NEIL R. GUMENICK, LAc, MAC (UK)

In prior articles, this author has detailed the importance of diagnosing a patient's primary elemental imbalance, also called causative factor (CF), via odor, color, sound, and emotion. Once we have cleared any and all of the energetic blocks to treatment efficacy, in this system of medicine, we turn our attention to supporting, balancing, and harmonizing the CF, as it is the source of the symptoms that invariably spread throughout the entire system and manifest at the levels of body, mind, and spirit. So: when we speak of treating the CF, what do we mean, and how do we begin?

COMMAND POINTS

Command points are the “bread and butter” of this system of medicine. While any appropriate point can be used for its spiritual connotation based on the need of the patient, some points give virtually all of their energetic gifts to the mental and spiritual levels directly. Examples include KI 24 *Spirit Burial Ground*, UB 37 (#42 in some texts) *Soul Door*, HT 1 *Utmost Source*, GV (Du) 4 *Gate of Life*, and CV (Ren) 14 *Great Deficiency*, to name a very few.

Command points, located distal to the elbow or knee crease, give energy to all levels: about 70% to the physical, 20% to the mental, and 10% to the spiritual. Thus, if a patient were to come for treatment with a perception of spirit that was 50% diminished from its potential, treatment using only command points would successfully support the spirit in 5 treatments. If we're not in a hurry and choose a safer route to assist a patient to health, command points are the best choice. Using points for their strong physical, mental, or spiritual connotations, if unnecessary or incorrectly utilized, can create aggravations in the patient—like using a missile when asking nicely would suffice.

Command points also give us the clearest feedback as to whether our diagnosis of the elemental CF is accurate. Every needle we insert will have an energetic effect; staying on the CF will not dilute our feedback with input and effect from other points, and we will have confirmation of our diagnosis. Thus, by keeping the first treatments simple and staying on the meridians of the CF, we will, if our

diagnosis is correct, get an immediate pulse change on all 12 pulses, as well as a change in the intensity of the patient's odor, color, sound, and emotion.

THE TECHNIQUES OF NEEDLE TONIFICATION AND SEDATION

Determination of the appropriate action is made by pulse diagnosis. If the patient's pulses are deficient, we tonify. If excessive (and this is relatively rare), we sedate.

The needle technique for the action of tonification is as follows: insert to correct depth: left side first, on the patient's exhalation, the needle angled slightly in the direction of flow of the meridian; turn the needle 180 degrees clockwise; withdraw immediately and press the hole to seal it. Repeat on the right.

For sedation, insert on the patient's inhalation, right side first, needle angled slightly against the direction of flow of the meridian; turn the needle 180 degrees counter-clockwise and retain. Repeat on the left. The needles are left in place until the correct balance on the pulses is achieved.

The actions of tonification or sedation can be applied to any points on the body and should not be confused with “tonification points” (discussed in this article) or “sedation points”, both specific categories of points and only used under specific energetic conditions.

SOURCE POINTS

Every meridian has a source point. It is a command point and can be tonified or sedated, according to pulse findings. Source points affect the entire meridian without drawing or dispersing energy to or from anywhere else. As the vast majority of patients are found to be deficient in energy, our needle technique will mostly be tonification. The energy generated with source points comes from deep within the organ or function (also known as the “official”). They are the safest points on the whole of the body, as one cannot over-tonify or over-sedate these points. They have a built-in safety factor, which will “switch off” when the official has taken or dispersed the correct amount of energy that is

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What is Love?

An Exploration of Culture and Truth

By FELICE DUNAS, PhD

While reading a Harvard Business Review article on authentic leadership (leadership that includes the wholeness of self rather than just ambition based endeavors), I was intrigued by research addressing the importance of a strong support network for leaders. By loving and being loved, by leaning on and being leaned upon in their personal lives, leaders fly higher, bringing more goodness and transformation into the world. Without people by whom a leader can completely feel loved and let down, their wings are clipped and their power to positively influence the world is limited. This inspired me to think that we are leaders and need to feel loved to optimize our effectiveness.

This raises a question: what is the energetic dynamic that expresses as human loving in the medicine we practice? What is happening to qi and blood and organs and shen, hun, po and all the energetic components of the “beingness” that we are: body, intellect, emotions, and spirit? My life and career, like yours, has a high level of commitment to love, happiness, self-awareness, kindness, authenticity, pleasure, and truth, as well as the use of these wonderful experiences in creating health. Do you believe that our professional ancestors did the same thing? Did they understand love as we did? Where their treatments goals in alignment with ours? Was happiness something they strived for or saw as a goal for their patients?

Our patients live in heart-starved cultures. Their behaviors and yearnings reflect that there isn't enough love expressed in most of their small, arbitrary encounters. Most go through extended periods surrounded by people without sharing warm smiles or sincere hugs. They pay to go to “personal growth” seminars and are told to hug and be hugged more often. They consume bitter, fire-element tonics, like chocolate and coffee, to warm their hearts, and drink alcohol and take mood-altering medications to create the illusion of movement in the liver's ability to move qi, ameliorating despair and depression. Yet we all want what we define as love, and our organs show the lack of it.

We in the West take our concept of love for granted, yet the cultures from which our medicine evolved think quite differently about it. The texts you read may use words that you know, like love, but meanings that you don't. As a result, it is easy to misdiagnose a patient or misinter-

pret the necessary treatment.

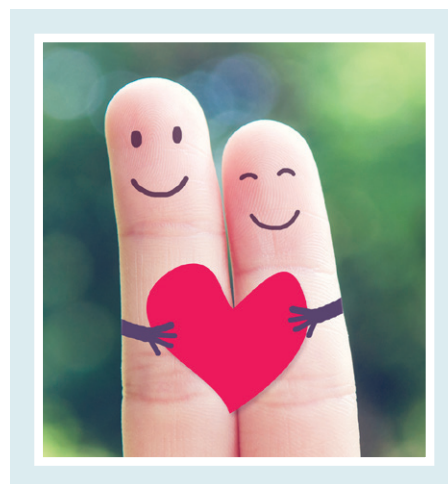
Chuang Zi 莊子 was an influential Chinese philosopher who lived during the 4th century BCE during the Warring States Period. When his wife died, at first he felt sadness. Then he sat on a rock, meditated on the changes of qi, and realized that death is nothing but a transformation (a dispersal) of qi, the same way that birth is a transformation (aggregation) of qi. At that, he said, his sadness dissipated and he felt joy. Some people might find this story philosophically uplifting and the source of great wisdom. This has been true for many of Chuang Zi's students and his students' students for over two millennia. We, however, would say he is being incredibly callous and insensitive, that his failure to acknowledge his grief is problematic, and that he is increasing his odds of getting sick as a result of his emotional emptiness/stagnation in a decade or two. Same patient with a different prognosis from the Eastern and Western acupuncturist.

Love, as we know it, is the result of a Western concept of self developed over 2500 years, from Plato down to Aristotle, through the Stoics, St. Paul, and the continuing evolution of biblical translation, including St. Augustine, St. Thomas, and St. Francis. European philosophers such as Locke, Hume, Descartes, Berkeley, Kant, Hegel, Marx, Freud, Jung, Nietzsche, and Sartre have tremendously influenced our view. Currently, the loud voices of psychologists, neuroscientists, gurus, and “human potential” movement authors define consciousness and selfhood for us.

The Chinese philosophies, however, do not envisage an individual, inward-looking, autonomous self as we have in the West. They do not perceive themselves as unique, emotional people needing time or room or cultivation of the “self”. There is no “self” as we know it to fall in love, need love, or get needs fulfilled!

This has to be seen with reference to the three major philosophies of China: Daoism, Buddhism, and Confucianism. I believe Confucianism has been the dominant philosophy since, at the very least, the Song dynasty. The Confucianist view of love is not vital, as it is to us.

Their focus would be on duty, responsibility, care, kindness, and, crucially, obedience. The translation of the Confucian *ren* as “compassion” is misleading. *Ren* is a state of family and social harmony that occurs when everybody behaves according to their duties and takes care of others. It is



based on ethics, morality, duty, and respect—but not love. We must also remember that, to the Confucians, there was nothing worse than losing control, which passionate, romantic love can lead to.

The Daoist does not “love” the Dao. Ideally, the Daoist witnesses and, with great dedication, experiences the Dao. But there is nothing personal about one's relationship to it. No silent communication. No self.

Self-esteem is paramount in American culture and you use your work to enhance a patient's self-esteem. This would be unheard of in China. Your view of patients is based upon your culture of origin. Is it possible that by seeing through this lens you are missing something? If a patient is not of a Western culture, could you be misinterpreting their need for care, sending them in a direction that is not appropriate to them?

I once worked with a middle aged Chinese woman who had come to the US as a child. She explained to me that, in her home, emotions were not expressed, and that she never felt very high or very low. She lived in a comfortable world, but was aware that other people were different. She was fond of her husband, cared deeply for him, but felt minimal passion. She described the relationship as appropriate and good. Passion wasn't something she understood well. It was helpful to her when I explained that supporting yin qi in her would allow her to become more receptive to her husband. Cultivating this form of qi could grow the marriage in a unique and new way and alleviate the menopausal problems for which she sought treatment. I told her that we could use the medicine to merge her culture of origin and Western culture by helping her feel more receptivity to everything, including love as it is defined in the West. She was very excited about this, but not all patients would be, and this is important to realize.

As published in the *Handbook of Emotions*, Shaver, Wu, and Schwartz interviewed young people in the U.S.A., Italy, and the People's Republic of China about their emotional experiences. In all cultures, men and women identified the same emotions and they agreed completely except on one: love. The U.S. and Italian subjects equated love with happiness; both passionate and compassionate love were assumed to be intensely positive experiences.

Chinese students, however, had a darker view of love. In China, passionate love tended to be associated with “infatuation”, “unrequited love”, “nostalgia”, and “sorrow-love”. In short, love was viewed more as a negative experience: the result of obsessive thinking, jealousy, and the like.

Many Chinese books only talk about “love” (*ai* 愛) as a cause of disease without specifying what it actually is. The term could be referring to the dark aspects of personal affection reflected in the responses Chinese students gave in the study above.

The old pictograph for “love” had “belching” at the top, a heart, and “gracious gait” (as in one's walking gait). “Belching” was later replaced by a “hand” and a “covering over the heart” and “gracious gait”. The modern Chinese removed the “heart” from the character so that now it looks very much like the character for “friendship”; i.e. are they more comfortable with friendship than love as we define it?

Yes, of course, Chinese people fall in love too and have passionate sexual desires. This happens more frequently now, due to exposure to the Western world, but all three of the philosophies of China considered “desire” the root of psychological and existential problems. Love is a form of desire. When we are in love we crave that person intensely. In Asian cultures, there has always been an awareness of emotional preference, affection, inebriation (as in drunkenness for wanting), and need for sex, as well as jealousy and despair over not having the person one wishes: these are not considered positive experiences and are not to be cultivated.

Does this mean that the rich, gooey, chocolaty goodness of snuggling with someone your entire being feels a “connection” with is not inherent to human nature? Can it not be found in our medical theory?

Yes, it can. One of the many areas of greatness in our medicine is its range and flexibility. Absolutely everything that any of our patients

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What are the most common food allergens and how does this relate to allergic rhinitis?

The most common food allergens in the United States are dairy, eggs, peanuts, wheat, soy, nuts, fish, and shellfish. Many people also have sensitivity to corn, particularly high fructose corn syrup. For clients with allergies, it is also important to greatly reduce sugars, sweets, sweeteners, and alcohol. Many of my clients with rhinitis and sinusitis symptoms can obtain significant relief just by eliminating alcohol and taking herbs.

I understand you have developed an effective allergy protocol. Please describe it.

I have developed a formula called Xanthium Relieve Surface™, which is an example of a modern tableted Chinese herbal formula developed in the west. It is comprised of xanthium fruit (*cang er zi*), magnolia flower (*xin yi hua*), Platycodon root (*jie geng*), Schizandra fruit (*wu wei zi*), Angelica root (*bai zhi*), wild chrysanthemum flower (*ye ju hua*), siler root (*fang feng*), Schizonepeta herb (*jing jie*), Astragalus root (*huang qi*), white

Atractylodes root (*bai zhu*), and licorice root (*gan cao*). In clinical practice, we can combine Xanthium Relieve Surface with formulas that tonify wei qi, clear phlegm, or treat allergic asthma symptoms. The vast majority of patients see results within a few days. Some of these clients have been on symptomatic medication for years. For example, Gary had had seasonal allergy symptoms for years when, seeking an antihistamine alternative, he visited our clinic. We recommended Xanthium Relieve Surface and a formula to build up wei qi based on *yu ping feng san* (YPFS) along with daily nasal irrigation. Within 24 hours, he contacted us to say the two formulas in combination worked better than the antihistamine he had been on for several years. We counseled him to stay on the two formulas until allergy season was over, and continue YPFS. Gary reported that his allergy symptoms were much milder in spring after taking YPFS all winter. YPFS is more beneficial when used for more than three weeks. It is particularly effective for itchy nose, sneezing, blocked nose and runny nose.²

* MANY SYMPTOMS OF ALLERGIC RHINITIS INCLUDE ITCHING OF THE NOSE, roof of the mouth, and eyes; sneezing; excessive mucus; and frontal headache.

Some patient's allergies are exacerbated by mold. What do you suggest?

For allergies and yeast syndrome or mold sensitivity, we use Xanthium Relieve Surface, an anti-fungal diet such as Digestive Clearing Diet, and either specific anti-fungal herbs or Western medicines to lower fungal counts. Many sinusitis cases we see involve fungal sinusitis, which is often caused by inappropriate use of antibiotics.

Any final clinical tips on herb recommendations?

In our experience, 80 percent of American clients do not take adequate dosages of herbs; therefore it is im-

portant to monitor compliance. It is also important to choose a delivery system for Chinese herbs that yields the best compliance. Teas, powders, and pills all have their place. For the vast majority of American patients with allergic rhinitis, high quality formulas in pill form will yield the most satisfactory results. Finally, if compliance is adequate and your clients are not achieving symptom relief, be prepared to re-evaluate your diagnosis and change your treatment strategy, and consider focusing more intently on dietary and lifestyle counseling. Because allergic symptoms are so common, clinicians should offer effective herbal formulas for themselves, family members, and patients. OM

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ANDREW GAEDDERT is an authority on the western applications of Chinese Herbs. He has over thirty years of experience. His latest book, *Healing Digestive Disorders*, 4th edition, is published by PMPH, one of the largest medical publishers in China. He can be reached at herbalist@healthconcerns.com.



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needed—no more and no less.

Source points are usually the first points considered to treat a patient's causative factor (CF) meridians. When first treating a patient, we do not know how the patient's energy will respond—how much or how little treatment is needed, or how strongly we need to treat to effect a change. Stronger or additional points may or may not be needed. Source points help give us that information. If we get a substantial pulse change on all pulses, and/or a significant odor, color, sound, and emotion change from source points alone, we know that we have diagnosed the CF correctly, that the patient's energy is very responsive, and that gentle treatments (i.e. command points) are appropriate at the time.

We generally treat the source points of both meridians within the CF element, giving in equal measure to each. In the case of fire, which has 4 officials within it, we must determine which side of the element is most challenged. It will be either the “organ side” (i.e. heart and small intestine) or the “function side” (i.e. pericardium and triple heater, or san-jiao). Rarely do we treat both sides of fire, as treating the correct side will balance the other side, just as treating the CF element will tend to balance all elements.

Source points are excellent as reinforcement of any treatment. They are often used to anchor or ground a treatment in which blocks have been opened, spirit points or any non-command points have been done, or after other command points have been treated and still more reinforcement (determined by pulse change) is needed. We always anchor a treatment with command points on the patient's CF. After going to a point for a strong spiritual connotation, for example, we need to regain control and command over the energy, lest the patient be left feeling untethered and lost in the “heavenly realms”. Source points, while not the only points to consider, are always a safe choice in these instances.

TONIFICATION POINTS

The tonification point of a meridian is the point that corresponds to its “mother”, the preceding element on the sheng or “creative” cycle. We observe that, on this cycle, wood is the mother of fire. It creates, promotes, and fuels fire just as a mother would feed her child. Thus, in the element fire, the tonification point of any of its officials is the wood point (HT 9, SI 3, PC 9, SJ 3), corresponding to its mother element. In earth, the tonification point is the fire point (ST 41, SP 2), and so on around the cycle.

These points can only be used as tonification points when, by pulse diagnosis, it is determined that there



is more energy in the mother than in the child. There must be, in other terms, more milk in the mother's breasts than in the child's tummy. Used as such, tonifying these points affects a simple transfer of energy from the mother to the child—just like putting a hungry baby to the breast of its mother. Often used early in the treatment process, it is one of the simplest, most elegant treatments we can give.

Unless the pulses show this state of relative excess in the mother and deficiency in the child, these points cannot be used as tonification points, though they retain other uses, such as providing their elemental gifts to the meridian, for their locations, and for the spiritual connotation associated with their point names.

As all of our treatments aim to balance and harmonize the CF, we generally treat the tonification points of both of the CF officials. In the case of the fire element, as mentioned above, we would treat the side of fire that we have diagnosed as the primarily imbalanced side. Typically, if one child is deficient, its brother or sister will likely (but not always) be deficient as well. If this is the case, we give to both paired officials in equal amounts. As the predominantly yin (zang) and yang (fu) Officials follow each other on the sheng cycle. When tonifying HT, for example, we use HT 9 to draw energy from wood, specifically LIV. When tonifying SI, we use SI 3 to draw energy from wood, specifically GB. On the other side of fire, we would use PC 9 to draw from wood, specifically LIV, and SJ 3 to draw from wood, specifically GB.

Using the tonification point, when appropriate, will do more than simply balance mother and child, but will be felt by all officials. Like source points, when we use tonification points properly, there will be a change in all pulses, as all officials are connected like members of a family, and also a change in intensity of the patient's odor, color, sound, and emotion. Sometimes the pulse change will be the more dramatic;

sometimes it will be the sensory indicators; it may well be both. If the simple transfer from the mother did not summon sufficient energy (determined by pulse diagnosis), this would be a time to consider reinforcement with the source points.

HORARY POINTS

Horary points are command points, and are the point on the meridian that is the same element as the official on which it resides. Thus, the horary point will always be the fire point of a fire meridian (i.e. HT 8, SI 5, PC 8, SJ 6) or the earth point on an earth meridian (i.e. ST 36, SP 3), and so on.

Horary points may be used as such only during the peak time of the official concerned. According to the Law of Midday and Midnight, also known as the circadian or “Chinese Clock”, each of the 12 officials has an extra measure of energy to do its job during the two hours allotted to it. For example, the lung official is at its peak between 3 and 5AM, often the time when breathing techniques are practiced in ashrams or monasteries. The stomach official is at its peak between 7 and 9AM, the best time to take in and digest a meal, as evidenced by the ravenous appetites of most babies at those hours. If we are doing a horary treatment of a patient with a CF in earth, we would bring him or her in at approximately 8:30AM. This would allow time to gather information, take pulses, perhaps do a point or points prior to the horaries, and then tonify ST 36 before 9:00AM. At 9:01, we could then tonify SP 3, giving a gift of equal value to both officials, both at their peak times. When we use horary points, we treat only the officials of the CF. In the case of a fire CF, we would treat the horaries of the primarily imbalanced side.

Tonifying the horary point of a meridian during its peak time harnesses that extra energy and power, available only at that time. Additionally, it provides a look into the true state of the official concerned. An official may have been desperately

“holding on” and presenting a façade. Feeling that help has finally arrived, the official may relax and its pulses may plummet, showing its true state of deficiency. On the other hand, the pulses may spring to life with a horary treatment, showing that there was truly a good amount of energy under the debris.

Using horary points is akin to blowing or shaking the ashes off a fire. We need to know if there is fire alive under the ashes—how much or how little. We need to know whether we must rebuild from scratch, or simply add a bit of wood to get the fire blazing. These examples are analogous to determining how much or how little treatment is needed. It gives us information as to what kinds of points will be needed, how many, and what the treatment interval should be.

Similarly, in the earth element, we need to know its true state. If the earth is covered over with dead leaves and litter, we cannot know its state. Is it dry and sandy, moist and rich? Is it capable of nourishing seeds? In metal, we need to know the state of the element beneath the layers of accumulated rust and tarnish. What kind of metal is it? In what condition is it? The answers to these questions will be largely determined by the pulse change that horary points provide.

SEASONAL HORARIES

Another use of horary points is during the season of the respective official's element. While not as potent as the use of these points during their peak time of day, the horary point can be used to great effect at any time of the day—during the element's season. Therefore, we could tonify LU 8 and LI 1 any time during the season of autumn on a metal CF. Were we to treat the horaries during the season *and* at the appropriate time of day, we would get the strongest horary treatment possible. As in the example, LU 8 would be used any time between 3 and 3:59AM, followed by LI 1 at 4:01AM (and before 7:00AM) in the autumn. **OM**

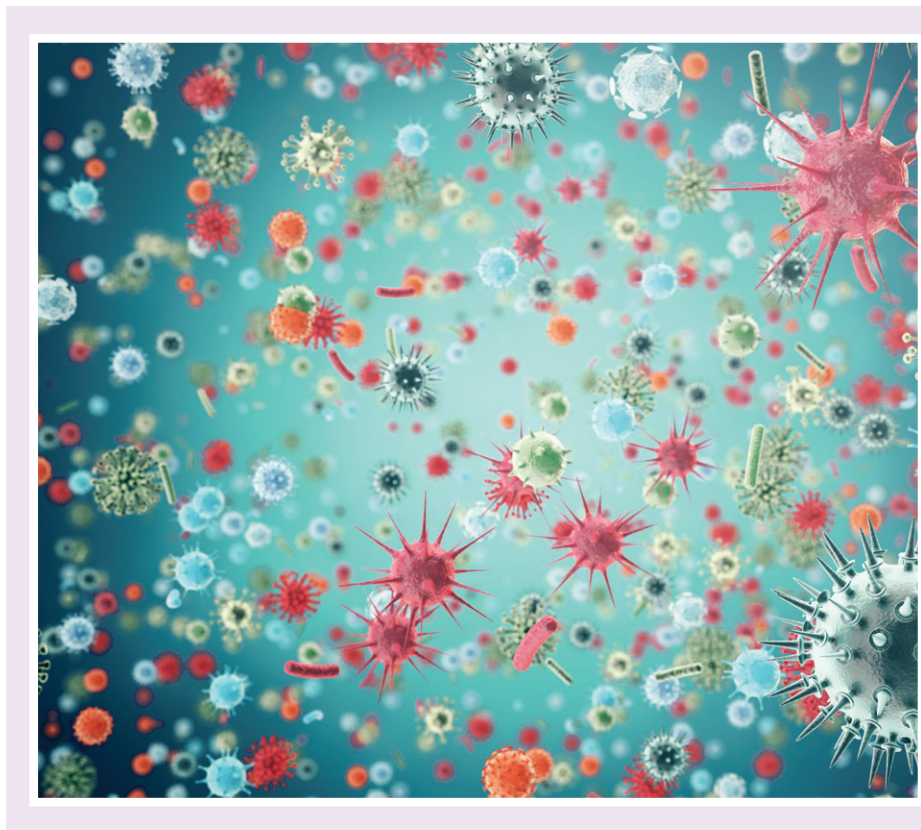
PROFESSOR NEIL R. GUMENICK is Founder and Director of The Institute of Classical Five-Element Acupuncture, which offers training in this profound system of body/mind/spirit medicine. He has maintained a private practice in Santa Monica, CA since 1981 and is a Professor at YoSan University and Emperor's College. Neil holds three degrees and an advanced teaching credential from The College of Traditional Acupuncture (UK) awarded by the late Professor J.R. Worsley. Neil was recipient of the 2007 AAAOM Pioneers and Leaders in Acupuncture and Oriental Medicine Award, and is one of the world's foremost practitioners, teachers, and writers on the subject of Classical Five-Element Acupuncture. He can be reached at www.5elements.com or at (310) 453-2235.

field. What's holding us back? Are we not having important conversations about diet with our patients because we don't feel skilled enough in this area, or because we can't bill enough for the time? Are we afraid to offer advice on supplements because we don't understand pre- and pro-biotics, herbs and vitamins? Do we lack the time to read the research and study the details? I hope this article will shed a little more light on the subject and encourage you to dive deeper into this information with your patients.

Most of us understand by now that bacteria live in and on our skin, eyes, ears, nose, mouth, and of course our gut. Our lower colon is the most populated with the largest diversity of these microscopic cells. In fact, they out-number our human cells 10 to 1, which means we are more microbial than human. Dr. Stephen Barrie, an expert with 30 years of research experience in the field of the microbiome, recently said in an interview that "it is our individual microbiome that is responsible for ALL disease states today". His mission is to make disease an option. In his words, "a healthy body relies on a healthy and diverse biome". He continued on to say that this statement may shock the masses, but the evidence that proves it correct has already been amassed by many experts around the world. His ebook *Microbiome: All Diseases Begin in the Gut - Short Guide to Fixing Your Gut* is a great place to expand your knowledge. His words echo many of the greatest teachers in traditional Chinese medicine.

Whole schools of thought were developed in the 12th century that stressed the importance of "preserving stomach-qi" as the most important treatment method. Zhang Jie Bin, one of the four great masters from the Ming Dynasty and one of the most important doctors in the history of TCM, wrote: "the doctor who wants to nourish life has to tonify stomach and spleen". According to Li Dong-Yuan, it is of paramount importance to protect the spleen/stomach if people want to stay healthy and to strengthen them once they become diseased no matter what other organs are affected; "if the root is sound the branch will prosper".

Emerging science shows that our gut, our lower colon, is acting as our "second brain". Many would say it is the first brain, because our gut bacteria produce hormones, neurotransmitters, serotonin, amongst other chemicals that have yet to be identified. Our microbiome affects our daily thoughts, moods, actions, and even dictates food cravings. The secret to weight control is now attributed to the types of bacteria you foster. If you thought you ran the show, think again. The bugs within are more powerful than we know.



We can, however, exert influence on the bacteria within by controlling what goes in and on our body. There is good news: our gut microbiota are malleable. Our bodies are constantly trying to find homeostasis, whether through balancing blood sugar levels with food intake or hormone levels with outside stressors. Our microbiome wants the same type of balance. It's not coincidental that TCM has taught us the importance of balance with our treatments. Our foundation has always emphasized that the primary goal is to bring balance to the body to achieve a healthy mental, physical, and emotional state. Although we may not think about "balancing" our microbiome, by balancing everything in the body we help the bacteria within us to achieve balance as well. This microbial balancing act is just another name for the treatments we perform. It's time we explain it to patients in ways that are more relatable.

HOW DO WE KEEP THE BUGS BALANCED?

Worldwide microbiome research confirmed what many of us have always understood. If we nourish our spleen and stomach channels, our biome, we simultaneously nourish both our physical and mental well-being, so what do your bugs within like to eat and how can we keep them in balance? I recently spent a week listening to a group of experts at the Healthy Gut Summit. A few of their best words of advice to keep your microbiome balanced and healthy:

THE TOP FIVE BEST PRACTICES FOR A BALANCED BIOME:

1. *Eat a variety of fermented foods—at least one every day.*
2. *Eat foods high in polysaccharides every day.*
3. *Eat at least 50 grams or more of fiber every day.*

4. *Individualized diets are best, NO diet is right for everyone.*
5. *Eat a diverse diet—seasonal foods are best. This rule is king.*

These five best practices may seem common sense to some, but how many of us are doing these five things daily? When talking with your patients about these five best practices, let's not forget our roots. Because everyone's microbiome is different, the best way to treat individuals is the way TCM teaches us to diagnose and treat: individually. Balance the spleen/stomach channels according to each patient's individual needs. A tonifying treatment, a sedating treatment, and qi moving treatment. You know best for your patients; you decide. The late, great, Giovanni said, "the stomach and spleen could be tonified at the end of each season, particularly at the end of winter, to regenerate the energy".

Number one in the list of five best practices is fermented foods. In traditional cultures worldwide, fermented foods have played a part of every culture. This history lesson should not be overlooked. Fermented foods play a huge role in feeding our microbiome. Kimchi, sauerkraut, pickles, kombucha, miso, kefir, and other fermented foods provide a variety of healthy bacteria. A daily sampling of new live bacteria from fermented foods makes your gut community more adaptable and diversified.

Since diversity has been proven a key factor in a healthy gut ecosystem, there is no substitute for eating a variety of raw and fermented foods. A healthy brain also requires a healthy gut, so make smart decisions every day, and if you need some encouragement, track what you eat in an app. This is a great way to give yourself positive feedback, as you can

review the past days of food intake easily and feel encouraged that the small changes will have a big impact over time. We can starve or nourish our gut bacteria in as little as two weeks and see measurable changes from stool tests.

Some of the most interesting research in the last few years shows that no diet is right for everyone, just like the same probiotic supplement cannot possibly be right for everybody. We all have individual sensitivities due to the colonies of bugs within. Some bodies are good at digesting sea foods and algae, others lack these bugs and cannot tolerate a diet rich in seafood. Research from just the last three years has shed light on the many diet programs and detoxing plans in books and online today.

Most of these fad programs have little to no effect on improving gut health for the masses. What works for one person does not work for all. What experts in the field do agree upon is that the best way to improve your microbiome is not an elimination diet or detox program, but rather a diet rich in polysaccharide foods, high-fiber foods (50-100 grams daily), and a diverse diet of seasonally harvested food; the more diversity of vegetables the better. Meat protein should be more like a condiment than a main course. Sugar should be completely eliminated for many reasons, including one you may not have considered: sugar is digested and absorbed in the small intestines. Most of your good gut bacteria live in the lower colon. A diet high in sugar leaves nothing for your gut bacteria to feed on, so they will eventually starve if all you eat is sugary foods. What's worse, when your gut bacteria have nothing to eat, they feed on the mucous membrane fence that divides their living space from the space human colon cells inhabit. You've heard the saying "fences make for good neighbors". When bacteria eat away at the fence, it creates inflammation. Starving your gut bacteria is a bad idea, but unfortunately, much of the processed food eaten today is doing exactly that. Take care of your bugs and they will take care of you. Nourish the spleen/stomach channels to nourish life.

I highly recommend the book *The Good Gut* by Drs. Justin & Erica Sonnenburg. Much of the information in this article is from the Sonnenburg research. I was lucky enough to meet Justin at conference a few years ago and he is not only brilliant but humble. He often mentions in his talks that his hope is that the research coming from their Stanford lab trickles down to everyone. Their book, written for exactly that purpose, is an

continued on page 38

experience can be defined and understood within the theoretical constructs of TCM. This is how we know the universality of it, the inherent correctness of it. People whose belief systems and perceptions of life are utterly different can all find answers here. The inherent truth of this medicine allows us to find wisdom that reflects our beliefs even if they directly contradict those of our professional ancestors, the people through whom this medicine was brought to the Western world.

For example, the capacity to feel and express love comes from every aspect of who we are and is not limited to a particular “place” in our beings. It isn’t stored within the reserves of our kidneys. Infants and children, who radiate a compelling, pure, adorable and adoring love, have inherently weak kidneys until their bodies age a bit. It isn’t the result of an abundance of qi. The weakest among us, the wounded, handicapped, infirmed and dying, express heroism in their belief and experience of the extraordinary nature of ordinary love. It is not born of an organ. All organs lay the foundation for different experiences and expressions of love. The liver allows us to feel warmth and kindness, the lungs the bliss of bonding, the heart bursts forth enthusiasm and the gift of laughter, the spleen allows us to “know” love and the kidneys are the fountain from which love blossoms into wisdom.

THINGS TO CONSIDER.

1. When practicing, think seriously about the culture of origin of each patient. Realize that the structure of their personality and relationship to the world may be foundationally different than yours. It is imperative to strive for results in alignment with the worldview that they hold, not the one that you hold.
2. We are all involved in a sociological experiment. We are the first generations of acupuncturists to integrate this medicine into American culture. We may not be accurate in all our interpretations and, as players in an ongoing medical expansion, mistakes and corrections are inevitable.
3. When we are taught Five Element theory, we are told that the locations, the directions, were originally presented to explain lifestyles and disease patterns in China. But this theory can be used to explain differences on a much larger scale. How might Five Element theory help you understand patients from the West, East, North, and South worldwide? If you use the entire world as your map, how might you view patients differently?
4. Many use the (romantic) love of an individual as a microcosmic example of divine love that can

be spread through all interactions and relationships of life. Essential Being = Essential Loving. We see love as a force that pervades everything, and our lives and actions as expressions of it. This is a Western view, not a Chinese one, but that doesn’t make it wrong.

As the Beatles told us, “All You Need Is Love”. While that song was probably not a hit in China, for us its truth is simple and profound. It is our gift to spread love to those we lead and heal. It is our gift to find love within this medicine and to use it to heal ourselves. It is our gift to grow this medicine in the soil of our thoughts and beliefs such that it nourishes Western patients, as it has so richly addressed the needs of those on the other side of the world, and in centuries past, whose beliefs have contradicted our own. We bring our unique gift to the multi-millennium old medicine that we practice. We contribute a blessing and a new dimension to it, something it has never seen before. We bring our frame of reference, our personalities, resulting from exposure to unique cultural experiences during childhood and neurological programming from parenting. We bring our understanding of emotion, our ability to treat western patients who are similarly programmed and who also experience love and loss and life as we do.

Empathy is an imperative if a practitioner is to experience higher levels of mastery in the medical arts. It takes one to know one. This is how we help our patients heal and come to know more love. **OM**

FELICE DUNAS, PhD, is an international professional speaker, consultant, and executive coach who has used her understanding of behavior, the human body, and ancient principles to enhance the lives of individuals, couples, families, and corporate and healthcare industry CEOs for nearly forty years. Dr. Dunas brings her global patients, clients, and audiences better health, happiness, and quality of life through erotic and intimacy education, alternative medicine, and marriage coaching. She also serves as a consultant to corporations and hospitals seeking to lower health care costs with acupuncture and alternative medicine.

Dr. Dunas was among the first non-Asian acupuncturists in the United States, having worked in her field since 1974. She is the author of the best-seller *Passion Play: Ancient Secrets for a Lifetime of Health and Happiness Through Sensational Sex*, now published in nine languages. Her work has appeared in periodicals including *Cosmopolitan*, *Men’s Health*, *Glamour*, *Prevention*, *Marie Claire*, *Women’s World*, the *Los Angeles Times*, and the *Chicago Tribune*. Dr. Dunas is also a veteran media guest and has appeared on numerous local, national, and international television and radio programs.

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easy read, a great overview of some of the latest science from the microbiome researchers, and a perfect introduction for patients to their gut health and the gut brain connection. The information will help you feel more knowledgeable about healing new patients as this gut health movement accelerates. It also has some fantastic recipes to create foods both you and your biome will love.

According to Dr. J. Sonnenburg, foods high in polysaccharides are powerhouses of nourishment for your microbiome. Sonnenburg says that “the safest way to increase your microbial biodiversity is to eat a variety of foods high in polysaccharides”. We are the lucky recipients of TCM herbal wisdom that understood that Astragalus (huang qi) and Reishi mushroom (ling zhi) are two amazing herbs with a high content of polysaccharides.

When you change and balance your microbiome, you change just about everything in your body. Whether you build it or destroy it, the reins are in your hands. This is one key piece of information from the last few years of microbiota research. Balance, like everything in TCM, is key. Rebalance your patient’s

microbiome with herbs, foods, and acupuncture, and watch their health blossom all year long. Educating your patients about the integral role these organisms play in our bodies can vastly improve their healing outcomes. By understanding and building on this knowledge you will not only improve the health of your patients; you will also be educating patients on some of the greatest discoveries and advances in healthcare today. Your patients want and need this knowledge. It’s time TCM practitioners take a larger role in treating patients with compromised gut health—which is to say, pretty much everybody today. **OM**

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benefit from fostering a caring presence to expand the benefits of treatment for our clients, and renew the joy of connection with other humans, as this is what probably drew Marion, and us, into our work in the first place. **OM**

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an effect on inhibiting TNF-alpha, a pro-inflammatory signaling protein that has some tumor necrosis activity but non-essential while chemotherapy is utilized (9). *Gan lu yin* is used for post-surgery colon cancer patients, to help with reduced food intake (10). For autoimmunity, the formula is sometimes selected for Sjögren’s syndrome (11) and for lupus (12). **OM**

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