

Fourteen Root Treatment Ideas to Improve Your Results

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One of the rules we learn in acupuncture school is, no matter what the symptoms or the patterns, always treat both root and branch. This insures that you are addressing both the symptoms that are causing the person to suffer, and the more deep-seated causes of that suffering. There are, of course, lots of possibilities for both root and branch therapies. In this article, I am only addressing root treatments, although in some cases they can become one and the same. In a class I once took with Dr. Shudo Denmai, the author of *Meridian Therapy*, he said that the secret to getting a good result with your branch treatments was to always treat the root. I agree with him.

This list of ideas for root treatments is not exhaustive by any means; that's not really possible where acupuncture is concerned. You can easily think up a dozen more treatments, and I hope you do. In the meantime, I hope these ideas help spark your intuition and your knowledge of the point and channel system.

Rules for Supplementation Therapy

Treating the root usually means supplementing the most apparent vacuity (or vacuities). Emptiness or weaknesses may be one or more of the viscera; it may be *qi*, blood, yin and/or yang; or some combination of items. In any case, there are a few basic rules we all learned for supplementing as opposed to draining. To review, these rules may include, but are not limited to, the following:

- Use fine needles.
- Use shallow insertions. (In some schools of thought, you can simply touch the point of the needle to the point and not insert it at all.)
- Use gold needles.
- Use moxa.
- Supplement the root vacuity with herbal medicine or diet.
- Use both your own and the patient's breathing patterns (breathe out to insert the needles, breathe in to take them out).
- Needle in the direction of the flow of the channel.

Ideas for Root Treatments

1. Try the meridian acupuncture approach using pulse diagnosis to determine the weakest channel and treating that channel's supplementation or mother point (Sp 2, Lu 9, Ki 7, Liv 8) using very fine needles with extremely shallow insertions and/or gold needles. Cause no stimulation. (Use either the spleen or pericardium channels for hand *shao yin* heart channel weakness.)
2. If you are not skilled with pulse diagnosis, palpate all the supplementation points and treat the sorest one with a gold needle. Try to cause no sensation upon insertion at all!
3. Based upon your overall pattern discrimination instead of palpation or pulse, choose the weakest of the five viscera and treat the related channel's supplementation or mother point as in treatment #1 above.

4. Determine the patient's basic pattern via abdominal diagnosis and use an ion pumping cord treatment on the eight extraordinary vessel points for that basic abdominal pattern. (For example, for tightness/tenderness under rib cage bilaterally and on St 11, Ki 16, St 30 and CV 22, use *chong* and *yin wei* treatment of Sp. 4 plus Per 6. Put the black clip from the IP cord on Sp. 4.)
5. Choose an extraordinary channel pair based upon the affected channels and treat with polarity of some kind (silver/gold, ion pumping cords, magnets). This is useful in pain cases, mostly in situations where your treatment is channel-based and not viscera-based. (For example, if there is pain on the hand *jue yin* as in carpal tunnel pain or medial knee pain, use *nei guan* [Per 6] and *gong sun* [Sp 4] with IP cords. Use the black clip from the cord on the channel that manifests the most tender points.)
6. Supplement the *jing* point of the affected channel on the opposite or contralateral limb with a gold needle. This can also be done by using 1-3 threads of moxa, or by touch needling. (For example, for pain on the lateral epicondyle of the elbow [LI channel], treat either LI 1 on the opposite hand or St 45 on the contralateral foot.)
7. Supplement the back *shu* points related to the channel's organ/bowel pair if there is a strong case for *zang-fu* involvement. (For example, for knee pain and weakness with frequent urination and cold feet, moxa Bl 23.)
8. In cases of general *qi* vacuity use special moxa points with thread moxa for global supplementation. (For example, with foot or low back pain related to kidney *qi* vacuity, supplement *guan yuan* [CV 4] with 100+ threads. For shoulder pain due to general *qi* vacuity, supplement *shi dou* [Sp 17] with 33+ threads.)
9. In cases of general *qi* and blood vacuity pain, needle St 36 with a gold needle and moxa either Sp 17 with thread moxa or Bl 20 with larger moxa on ginger slices.
10. Use yang ming channel points for *qi* vacuity pain because it has the most *qi* and blood. This is best represented by the classic use of St 38 on the opposite side for *qi* vacuity shoulder pain. This requires some manipulation of the needle.
11. For patients with strong constitutions, use Miriam Lee's Great 10 needles for general, global root supplementation. If the patient is not so strong, don't stimulate the needles or leave out the least relevant point in the particular case, and substitute some other point that seems more appropriate (St 36; Sp 6; Lu 7; LI 4; LI 11).
12. Use some version of a *tai chi* moxa treatment. This involves using 10-15 important points with moxa only to supplement a very weak person who is not strong enough for any needles at all. A few suggested points include CV 12 (*zhong wan*); St 25 (*tian shu*); CV 4 (*guan yuan*); Sp 20 (*da bao*); GV 20 (*bai hui*); and GV 14 (*da zhui*).
13. Use the channel divergence points for the *biao-li* pain you are mainly working with. (For example, use GB 1 [-] plus GB 34 [+] for migraine pain.) For detailed information on this option, see Miki Shima and Charles Chace's book *Channel Divergences, Deeper Pathways of the Web*.
14. Moxa Sp 17 for any patient that you know has a major spleen vacuity. This should be done with threads - 30 or 40 - every time they come in for treatment. If the point is going to be useful, it will be sore to palpation. In Korean systems of acumoxa therapy, this is considered the most important point for supplementation of the spleen.

There are no hard and final rules about root treatments other than the fact that we should do them on almost all of our patients. Undoubtedly some of these are treatments you have heard or seen before; hopefully others are new to you and give you an idea for treating that you have never seen or used. In my experience, your patients will see a difference when you treat the root gently and consistently and the branches aggressively at first, paying close attention to how these symptoms change. If your treatment results are not what you'd like to see, reassess your pattern discrimination carefully, and adjust the root treatments accordingly (and be sure to ask enough questions to determine if your patients are complying with any "homework" you've given where diet and lifestyle are concerned).

Please send me ideas for more root treatments if you have some good ones I did not mention. Best of luck!

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