

# An Interview with Robert Chu, LAc, QME, Master Tong-Style Acupuncturist: Part Two of Two

Brian Carter, MScI, LAc

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Brian Benjamin Carter (BBC): What's unique about Master Tong's acupuncture style?

Robert Chu (RC): Master Tong's style emphasizes bleeding, especially on the torso. *Fang xue* ("bloodletting"), in certain circumstances, clears the channels more effectively than regular needling. I use a modern lancet device, usually after we've tried other methods and the patient knows me better. Master Tong's system includes Five Elements bleeding - a technique of bleeding across the areas of the Five Elements on the limbs and body. I also bleed stubborn arthritis or heel spurs. Patients respond well - usually a drop or two is all you need. Classically in the Tong school, they cup right after bleeding, and fill the bottom of the cup with blood. Many acupuncturists will be hesitant to do this. Some patients - and doctors - will faint at the sight of blood! Master Tong's methods also emphasized varying depths of needle insertion; no manipulation of the needle; needling contralaterally while a patient exercises the painful area; and needling according to the proper time and season. Also, in the Tong school, they use palm diagnosis to diagnose a patient for internal disorders.

BBC: Why do you think acupuncturists practice the way they do?

RC: I believe acupuncturists practice what they know. Esther Su said to me, "People may know many different things, but not put enough mental energy in to really delve into any of them." In the U.S., we have many systems from different countries. Most acupuncturists practice a blend of systems. There's a lot of information out there: some of it good, and some that's rather "foo-foo." If you don't know the basics of Chinese medicine, how can you distinguish good from bad? You can judge a system by its clinical results. I have two mottoes in life: "Let application be your guide" and "Let function rule over form." It seems a lot of acupuncturists use the points they were taught, but don't always know the theory behind them. For example, TCM teaches the back pain formula UB 23, UB 40, UB 57, *yao tong xue*, K3, etc. You can follow this cookbook recipe, but when it doesn't work, what do you do? The more tools you have at your disposal, the more options you have.

BBC: What does this mean for U.S. acupuncturists and their patients?

RC: Patients may not be treated by an expert, but by a technician or mediocre practitioner. Ultimately, our profession develops a bad rap for being ineffective. Clinicians should have a deep hunger to be the best. Research, study, learning and practice should be a way of life. You owe it to yourself and your patients to be the best you can! Attend lectures and seminars; read books and case studies; listen to audio tapes; apprentice yourself with great practitioners; have mentors and

role models; and research as much as you can. Then apply it in the clinic. This way, the level of acupuncture in the U.S. will improve, and we'll grow. The better your results with patients, the more they refer, and the more your practice grows.

BBC: What are your clinical goals with acupuncture, and how do you achieve them?

RC: What counts with acupuncture is results. I see about four patients an hour, and each patient is on the table for 45 minutes. Pain patients should feel relief immediately. In internal medicine cases, they should feel profoundly relaxed and their symptoms should subside. My goals are flexibility and efficiency. There are many styles - if they get results, then great. TCM acupuncture is just a beginning - the basics. I built my style upon that foundation. As you develop and test your methods clinically, theory gives way to principle. Daily, you improve in ability and understanding, and try to get good results every time. If you follow a "paint-by-numbers" method, your results will be inconsistent, because every patient is different. That's the difference between the principle-based approach and being a technician. My method is easy, but one should have the basics in TCM to understand why I do things differently. I focus on many different strategies: Needling on the more sensitive contralateral side is better than bilateral needling. Fewer needles are better. Distal points get results immediately - faster than local or *ah-shi* points. I use thinner gauges than the 28 gauge needles they use in China. I sometimes go for a milder *de qi* sensation. I leave the needles rather than stimulating, because the *qi* will arrive anyway. Instead of inserting the needles without directing needle sensation, it is better to control it. For greater effect, patients can exercise their affected area while the needles are in. I am ambidextrous and needle from any position, and instead of choosing points "by the book," I always have a reason for the points selected according to imaging, point category and/or channel relationship. I use these methods because I've found that they work better for my patients. I believe practicing these methods can make a mediocre practitioner into a great clinician.

BBC: What do you think about practitioner ethics? What kinds of attitudes should we have toward our patients, other practitioners, and the medicine as a whole?

RC: I believe a medical professional needs to develop a compassionate heart. I see some doctors who are just driven by money or profit, but we must remember we are healers first. Sometimes it is necessary to extend charity to a patient. Many times our patients are suffering long term, and we are their last resort. We have to take a proper history, understand their suffering, and use our medicine as a vessel to deliver them from their suffering. Often it's not easy; patients are depressed, frustrated, cynical, angry, and have no hope. We have to empty ourselves, focus on the patient's needs, and tell them if we cannot help them. Since Chinese medicine is based on harmonizing and balancing. We should fit in the moment and be appropriate and apply medicine at hand. Sometimes it's not just herbs or acupuncture, but counseling them properly - how to behave, how to eat, what to think. A skillful practitioner helps his family, friends and community to be healthy. This is the proper mindset for a practitioner.

BBC: Thank you for sharing your experiences and insights, Doctor Chu.

RC: My pleasure!

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