

Treatment Away from Home

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I am rather attached to my acupuncturist. I think this is part of the nature of the relationship that can develop between a practitioner and patient. My acupuncturist has helped me through some tremendous difficulties, doing so with compassion and respect. This shared experience built a bond and loyalty that is quite strong. Because of this bond, I prefer to be treated only by my regular practitioner. I'm sure other patients can relate.

Getting Sick Away from Home

During a visit to another city, I became ill. This wasn't run-of-the-mill feeling under the weather. I couldn't just go to the pharmacy and buy something for symptomatic relief. I was unable-to-get-out-of-bed-easily sick, and I was more than a thousand miles away from my acupuncturist. The problem was straight-forward. I had menstrual cramps. For the past year, I'd had some cramping with my periods. I'd normally use a hot pack and drink ginger tea. I might take ibuprofen. The symptoms would ease. This month, however, the cramping was the worst I had ever experienced. It woke me in the night. It felt as if someone had taken a searing hot butter knife and sliced across the top of my pelvic bone. Accompanying this cramping was severe nausea. I was miserable.

I e-mailed my acupuncturist in California. Staying in a hotel, I had no hot packs or ginger tea and no way to prepare them if I picked up the components required. I tried massaging Stomach 36 at the lateral edge of the tibia. I took double doses of ibuprofen. Those measures had taken the edge off the pain, but that was all. In my e-mail, I asked if I should see an acupuncturist in the local city. I didn't want to be needled by someone other than my regular practitioner, or at least someone who uses the Five-Element system (as he does), but I was desperate. My practitioner agreed that I should seek local treatment in whatever form I could find.

A friend of mine happens to be on faculty at an acupuncture college in that town. I e-mailed him (as it was now three in the morning) and asked him if he could get me an appointment at his school's clinic as soon as it opened. If they could not accommodate me, I would have asked him to treat me. However, we are quite close so this would not have been appropriate as a first line of treatment.

My friend e-mailed back and asked if I wanted to be treated by a licensed acupuncturist in the professional clinic or if I was willing to be treated by a student. He said that the student would likely have the first available appointment. By this point, I was in such pain that I would have consented to treatment by anyone who had even looked at an acupuncture book. I wasn't presenting with a difficult medical case. Isn't symptomatic relief of menstrual cramps and nausea something acupuncturists are taught on or about the first day of acupuncture school? "First available appointment," I replied and agreed to meet my friend at the clinic when it opened at 8 a.m.

A Different Treatment System

For the last 18 months, I've seen a Worsely-style Five-Element acupuncturist. He approaches

treatment in a particular way. We spend the first half of my hour session talking. Relatively unconcerned with particular symptoms (though he will treat symptomatically if indicated), my regular acupuncturist works with the spiritual connotations of the points in order to bring my mind, body and spirit into balance.^{1,2} Rapport between patient and practitioner is considered important. My acupuncturist never leaves the room during a treatment. Needles are not left in place, but inserted and quickly removed. Moxa is regularly used. The Five-Element approach to acupuncture is not biomedical, but based upon causative factor.² It is not at all like TCM.

However, I needed help urgently and could not afford to be loyal to a particular system. I took the first available support I could get, which came from TCM students.

Receiving Treatment from Students

I have worked with students in the past. My practitioner also teaches the Five-Element system. At times, his students will sit in on, or assist with, a treatment. But I had never had a student as the main actor in a treatment, and I was nervous.

A young woman called for me in the waiting room. She was dressed in a white lab coat and had her hair pulled back. She was neat and clean and reminded me of my physician. I mentally prepared myself for a more biomedical approach to acupuncture than that which I receive at home, and followed her to the treatment room.

In the treatment room, I met two more students. Again, all were in lab coats. Something about the lab coats made the whole enterprise feel formal and unnerving. I was introduced to a young man who would be my herbalist and a woman who was a beginning student and would simply observe. It was a bit overwhelming to have three people in the room with me. But I was in too much pain to do anything but accept the arrangement.

Let me be honest. I didn't expect the students to be competent; they looked very young. I only submitted to being treated by students because I figured that it was only cramps, the symptomatic relief of which is really a sort of first aid; my friend would never place me in incompetent hands and; if the kids made me worse, I'd call my friend out of his office and have him fix whatever the students messed up. I was whistling in the dark. Looking at these young people made me long for my acupuncturist at home. I wanted to see graying hair and experience his paternal streak. I began to rethink my ideas about students.

As the young woman, the lead practitioner in the group, asked me questions, my confidence in her grew. She took a proper case history. She was personable and professional. She was not cocksure, but possessed an appropriate certainty that she understood and could treat my problem. The young man recognized me from an event we had both attended. He had met my regular acupuncturist and assured me that while he was not terribly familiar with the Five-Element system, they would be able to help me. I think they recognized how ill at ease I was, and how much I wished I was with my regular practitioner receiving treatment in a way that was more familiar. They did their best to quell my fears.

Once on the table, each student took my pulses and checked my tongue. The young herbalist pressed various points on my feet as he took my pulse. Some of these points immediately began to relieve my nausea. My friend later told me that the student pressed these points to see if my pulse responded. If my pulse responded as the student wanted, the team would needle those points. (They did.) But on the table, all I knew was that my nausea was easing. I didn't realize that this was diagnosis. I thought it was part of the treatment and was feeling so much better that I couldn't help

but relax.

After a supervising practitioner checked my pulses, the group went outside to discuss my treatment plan. Once decided, the young man and woman returned. She explained the points they had chosen and why, then set about inserting the needles. With needles inserted on my forearms, feet, and all over my abdomen, a heat lamp was aimed directly at my uterus and the acupuncturists left the room.

A Positive End

My clinical problem was stagnation. The treatment got everything moving. My flow immediately became heavy; I belched consistently for about 20 minutes; and had three bowel movements within two hours of the treatment. The nausea was gone before I left the office and the cramps subsided by evening. I had dinner with my friend and his family that night. I could not stop kissing him because I felt so much better. Most important, I felt good about the treatment I received. While these students did not provide the type of treatment to which I was accustomed, they were thoughtful, respectful, able to help me, and did their best to make me comfortable when I was ill far from home.

References

1. Gumenick N. Diagnosing the Three Levels of Imbalance. *Acupuncture Today* 2005;6(8).
2. Worsley JR. *Traditional Acupuncture: Volume II Traditional Diagnosis*. Miami Lakes, Fla.: The Worsley Institute of Classical Acupuncture, 1990.

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