

Patients With Issues That Resist Treatment, Part 1

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There is perhaps nothing in our work more frustrating than having to face the situation of a patient whose symptoms/issues seem to resist our best efforts at treatment. Patients come to us, often with the expectation we will make their symptoms disappear, entrusting us with the state of their bodies, minds and spirits.

Our Expectations

We always must consider whether our expectations are realistic. Every patient is a unique individual; we cannot accurately be guided by the experience of other patients. The fact that the same symptom(s) cleared in a particular time frame for another patient might not apply to the patient who stands before us today.

How long a patient has had their particular symptom(s), whether it is an inherited or acquired condition, what lifestyle factors have contributed to it, and the level (body, mind, or spirit) from which the symptom originates are among many factors contributing to a patient's issues that resist treatment.

How Long Has the Patient Had the Symptom?

The Law of Cure (aka Herring's Law) teaches that in a system of natural healing, symptoms clear in reverse chronological order of their appearance. In other words, the longer a person has had a disease, the longer it will take to clear. Similarly, if a condition has been in a patient's family for generations, we would expect it to take longer to clear than a condition of recent origin. That is one reason why a thorough medical case history is of vital importance. In the initial examination, I ask new patients what they have had in the way of illnesses, allergies, operations, medications and periods of poor health starting from earliest childhood and continuing chronologically to the present. I ask about the health of family members and causes of death. This information helps put the issues into a reasonable perspective with which many patients must be educated so their expectations are realistic.

Avoid Focusing on a Single Symptom

Many patients tend to focus on the specific symptom that motivated them to seek our aid. In taking the case history and reviewing all aspects of their health, we often discover other areas that are functioning less than healthfully. We might find, in fact, that some of the secondary complaints are more distressful than the primary one. It is very often the case that these secondary complaints will diminish or resolve before the primary issue. Perhaps the patient's primary complaint of headaches has persisted, yet when we inquire about other problem areas, we find the patient reports sleeping better, having a better appetite and having normal bowel movements for the first time in years. This is evidence that treatment is working and is cause for celebration. Patients often forget that such "secondary issues" had previously been problematic as they improve, focusing more on the

primary complaint instead.

We must not forget that our job is to get the patient into balance. As this occurs, Nature decides when symptoms clear, not us. My teacher, J.R. Worsley, taught that the most important words we will ever hear from a patient are, "I feel better in myself." In Classical Five-Element Acupuncture, we teach that if we find a palpable pulse improvement and a change for the better in the patient's odor, facial color, vocal sound and emotional expression, we know our treatment is working and symptoms will clear on Nature's timetable.

Blocks to Successful Treatment

In Classical Five-Element Acupuncture treatment, it is believed that there are a number of energetic conditions which might be present and will prevent treatment from being effective, however accurate our diagnosis or precise our delivery of treatment. These blocks include Possession, Aggressive Energy, the Husband/Wife Imbalance, The Umbilical (or Center) Pulse) being off center, the [Akabani Imbalance](#),¹ and the Entry/Exit block. By far, the most common of these conditions is the [Entry/Exit block](#).² Thus, one consideration in regard to a patient not improving must be, "Is the patient blocked?"

Am I Reaching the Cause?

Merely palliating symptoms is not the same as reaching the cause. In this system, we diagnose the causative factor by sensing the odor, color, sound and emotional expression of the patient. With some patients, the causative factor is obvious; in others, it might be more subtle, or there might be what appear to be expressions coming from more than one element. Regardless of style of practice, there are indicators as to how to arrive at a diagnosis that underlies the manifestation of symptoms. Symptoms are the distress signal of imbalance, like the warning light on the dashboard of a car - not the cause itself.

Dismantling the warning light does not cure the problem. There inevitably will be another symptom - potentially more serious - which will appear, as the cause of the issue has not been addressed. Once the cause has been resolved, the light will cease to flash. This might take more than one treatment, or more time than the patient expected. Again, patients must be educated as to realistic expectations.

In Classical Five-Element Acupuncture, our treatment strategy is based on the causative factor, the root imbalance in the system. We focus our treatment strategy on that elemental imbalance to bring all the elements into harmony. J.R. Worsley encouraged practitioners not to abandon treatment of the causative factor in favor of pursuing symptoms. It might well take several treatments to be certain we are following the correct treatment strategy, that we have identified the correct underlying imbalance in the patient. If, after three or four treatments, we sense no significant change in pulse or in the diagnostic indicators of odor, color, sound and emotion, only then do we consider changing treatment strategy and addressing a different element. If we commit to one treatment strategy and stay with it for three to four treatments, we will know by then whether to stay with our original choice or rule it out and continue elsewhere.

Frequency of Treatment

We must consider the question, "Am I treating this patient at the correct interval?" Too much treatment encourages the 12 Officials to become dependent and, rather than taking up the jobs that Nature intended for them, they become weaker, increasingly relying on the needle to do their jobs for them. Too little treatment does not give the Officials the help they need, boosting them up,

then abandoning them for too long. Abandoned in this way, they are likely to shut down, as if to say, "I thought help was on the way. Where did you go? I can't maintain any longer on my own."

Knowing the correct frequency of treatment for a given patient is the practitioner's responsibility, not that of the patient. It is as important as knowing which points to use. If we find we are with a patient whose issues seem to resist treatment, it is a time to see them more frequently, not less. Problems usually will not go away on their own.

If the patient balks at the cost of a second (or even a third) treatment in a week, I suggest charging for the first one and considering the others in the week "parts B and C," and charge a lesser fee or none at all. Use the subsequent visit(s) to confirm your diagnosis and treatment strategy, to give the support that is needed. View these subsequent visits as seminars for you - learning opportunities. Do not fear losing the patient because you have to enforce an appropriate treatment interval. You are far more likely to lose them if you do not. Once you have the treatment strategy sorted out, you can proceed with confidence, increasing the length of time between treatments as appropriate, knowing (not merely hoping) the patient is getting better. Such a patient will be grateful for your help and will be far more likely to remain in your practice and refer others.

References

1. Gumenick N. "[Centering the Umbilical Pulse and Akabani Testing](#)." *Acupuncture Today*, September 2010;11(09).
2. Gumenick N. "[Entry and Exit Points and Blocks](#)." *Acupuncture Today*, March 2006;7(03).

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