

EAST MEETS WEST

Meridians: Understanding the Science (Pt. 3)

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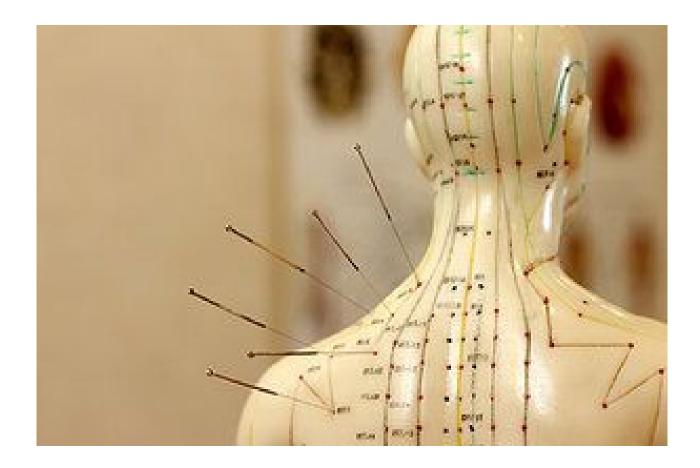
Editor's Note: All three parts of this article are excerpted from Mark's book, *Electro-Acupuncture* for *Practitioners*. They have been formatted to meet our style and publication guidelines. Part 1 ran in the March issue; part 2 ran in April.

Additional Channels

There is one more issue associated with what the channels are that should be addressed: the existence of channels *between* the traditional channels found in TCM. These are well-known and accepted in German electrodiagnostic techniques such as EAV, BFD and Vega testing. They even give them names.

For example, on the hands on the other side of the fingernail from the triple warmer channel (which they also call the endocrine channel) is the organ degeneration channel. On the other side of the fingernail from the pericardium channel (which they call the circulation channel) is the allergy channel. On the other side of the fingernail from the large intestine channel is the nerve degeneration channel.

On the other side of the fingernail from the lung channel, you have the lymph channel. On the feet, on the other side of the toenail from the stomach channel, is the joint degeneration channel. On the other side of the toenail from the gallbladder channel is the fatty degeneration channel. Finally, on the toe next to the pinky toe, you have the connective tissue degeneration channel (medial) and the skin channel (lateral).



In my own practice, I have observed several patients whose conditions strongly suggested the existence of these channels. Two patients had massive leg trauma with shattered bones and some tissue torn out. That massive trauma, and even the surgery to repair it, left the tissues with significant disruption in the circulation of extracellular fluid.

In one patient, pain along the areas between the stomach and gallbladder channels, and between the gallbladder channel and the urinary bladder channel in the thigh, was not responding to treatment along the traditional channels. Palpation revealed local *ahshi* points that "felt" just like typical acupuncture points, and which also fell into the typical grid-like pattern found with acupuncture points throughout the body. Electrostim along all the channels (both traditional and non-traditional) gradually opened the circulation and relieved the chronic pain this patient was suffering from.

I have occasionally observed a similar situation with lateral epicondylitis. One patient had pain not at points along the *san jiao* and large intestine channels (typical), but along a pathway *between* the two (in addition to pain at the tendon, of course). The pain is due to the muscle tension in the muscles in the dorsal forearm, which is typical in lateral epicondylitis. This is why heat helps (which you wouldn't expect with inflammation).

There was a local *ahshi* between SJ 9 and LI 10, and lateral to and a bit more distally than SJ 5. Treating them like any other local-distal point combination worked just like the more traditional points usually do. (This was an inflammatory condition.)

It would be very interesting to see the French research [discussed extensively in parts 1 and 2] applied to these channels as well. And if the channels are related to the circulation of extracellular fluid, then it would make sense that where there is significant space between the channels, there might be another channel to help with the circulation there.

At any rate, my experience has been that there *are* additional channels, just as the Germans say there are. Now, whether they represent what they say they do is another matter. All I am sure of is that they do exist. And knowing that sometimes is the only way you are going to be able to help some patients.

Treatment for Lymphedema

I have come up with an effective treatment for lymphedema based on the above knowledge. It is actually very simple. Lymphedema usually affects the feet because of gravity, so the patient will have either achy or burning in the feet and lower legs. There will be no indication of problems with blood circulation (no coldness or discoloration, but evidence of fluid accumulation).

Problems with lymph circulation don't always result in fluid accumulation. That has been my experience. All you have to do is needle points around the knee in channels that go through the problem area (and even the "extra channels). That will draw the fluid toward the knee, flushing the toxins from the affected tissues and helping get rid of the pain and any swelling.

I have used this technique not only to successfully treat lymphedema, but also to help with pain from diabetes, gout and drug toxicity. One patient had burning pain in her feet and lower legs that even affected her sleep, since it was worse at night (typical). She was told by her doctor that it was probably a toxic reaction from the anesthetic used in the surgery, but he didn't have a treatment for it. She then went to an acupuncturist for eight treatments; but it didn't help at all with her leg pain.

A friend of hers who was a patient of mine convinced her to come and see me. Talking with her, I quickly knew what was going on, so I explained it to her and the proposed treatment; and told her if I was right, we would see improvement right away.

Sure enough, we saw improvement with the first treatment and continuing improvement with further treatments. Then we hit a plateau: she wasn't seeing improvement, but wasn't getting worse, either. I realized we were not treating the extra channels, so I included points for them as well, and we broke through the plateau and got more improvement.

You see, knowledge is a powerful tool when you know what to do with it – but there is much we don't know and aren't taught in school. This three-part article is just a taste. So join me in making acupuncture a true science, because it is for me and it can be and should be for you, too.

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