



ACUPUNCTURE & ACUPRESSURE

Before You Use Your Needles...

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WHAT YOU NEED TO KNOW

- In learning traditional East Asian medicine, when it comes to palpation, there is often a quick mention of feeling the acupuncture channels, and then the focus moves on to pulse diagnosis.
- Checking the entire back from UB 11 through UB 15, as well as along the outer UB line (subscapular) for tension will yield excellent results for any symptomatology affecting the chest.
- All the tools we are given are not only useful for treatment, but also diagnosis through treatment.

Two years ago, I began an apprenticeship in a little-known Japanese style my teacher, Alexander Audette, calls deep-tissue lymphatic acupuncture. If you were to ask *his* teacher, Haruo Matsumoto, who lives in Japan, what this style is called, he'd tell you: *acupuncture*.

My goal is to make some of the lessons I have learned accessible to all practitioners of acupuncture. When learning traditional East Asian medicine, we are taught the four pillars of diagnosis: inspection, auscultation and olfaction, inquiry, and palpation. When it comes to palpation, there is often a quick mention of feeling the acupuncture channels, and then the focus moves on to pulse diagnosis. Little to no time is spent palpating the channels – or the skin for that matter.

...Use Your Hands

Some practitioners of acupuncture come from a massage background. They have advanced skills in feeling the skin and what is lying beneath. While it would seem they have an advantage, any practitioner, if they are willing to put in the time, can attain proficiency in feeling what the tissue is

telling us.

There are many sayings when learning a new skill. When learning how to ride a horse, a coach often tells their student they just need more time in the saddle. When learning how to grapple, a coach often tells their student they just need more time on the mat. I argue that your sense of touch can be honed over time, and it's never too late to learn. You just need more time using your hands before you use your needles.

A Collaborative Effort

One of my favorite Chinese medicine quotes comes from Bob Flaws, who wrote that Western medicine psychologizes, while Chinese medicine somatizes. What this means is that in order to make a proper diagnosis, we need our patients to explain how they feel, not think, inside their bodies.

We need to lead them to describe the where, when, why and how of their sensations and discomfort without putting words in their mouth. This leads us to local, adjacent, root, and helping (command, confluent, influential, and distal) acupoints.

TCM-style is a very effective approach because it uses pattern diagnosis to lead us to our acupoint selection. This allows a practitioner to come up with a whole-body treatment in a matter of minutes. However, other than checking the wrist pulse, it can be very hands-off. Diagnosis should be, as I have learned even this late in my career, a collaborative, hands-on effort.

After gaining verbal consent, and within moral and legal reason, we are likely able to place our hands on our patient's area of chief concern. Take shoulder pain, for example. One could easily just ask the patient to use one finger to point to where the pain is, get the patient in position, and then start needling the acupoints that are close to where the patient pointed. Add GB 34 for influential of tendon and the treatment is complete. However, a more complete diagnosis would entail us placing our fingers close to the site of pain, and then the area around it.

Speaking to our patients, we can collaborate to improve our findings. Asking our patient how they feel while we press around the area, and just logging in our minds where we feel irregularities under the skin, improves our diagnosis and point selection.

What the Tissue Tells You

I was taught to primarily look for tension; followed by lumps, nodules, depressions or sensations of cold. All of these tell us there is stagnation of some sort in the area and improves our point selection.

Acupuncture has anti-inflammatory, analgesic, and calming and sedative effects, while simultaneously changing tissue morphology.¹ These effects are created by improving blood circulation and warming the tissue due to acupuncture stimulation.

Another lesson from Chinese medicine college that I feel was glossed over was: *Treat the front to treat the back, and treat the back to treat the front*. Taking the example of lower back pain, it would be easy to palpate and locate the tension in the lower back. It would also be a good idea to treat the groin crease, which has inguinal ligament and iliopsoas attachments.

Another example of using one side of the body to treat the other is in the case of heart palpitations and pressure on the chest. These symptoms are often associated with heart and pericardium patterns, and while using *Ren 17* is a decent choice, the rest of the sternum and rib cage do not

allow for much else.

Checking the entire back from UB 11 through UB 15, as well as along the outer UB line (subscapular) for tension will yield excellent results for any symptomology affecting the chest. The areas that need treating can be felt with our sense of touch.

Tuina, Cupping, Scraping, and Needling

All the tools we are given are not only useful for treatment, but also diagnosis through treatment. One of my favorite ways to improve my point selection is to give some light massage over and around the area (keeping in mind the “treat the back to treat the front” lesson). While what I do may not fit into the strict category of high-speed and high-powered *tuina*, just by placing hands on someone’s back gives me so much more information.

The same can be said for cupping and scraping. These tools also give incredible feedback if a practitioner is open to receiving it. And finally, if we are able to change our mode from treatment to always gathering more information, even needling, when done slowly and gently, can give us massive feedback about what’s going on underneath the skin.

But before you use your needles, remember to use your hands.

Reference

1. Chin Wan Fun P. Plausible Biomedical Consequences of Acupuncture Applied at Sites Characteristic of Acupoints in the Connective-Tissue-Interstitial-Fluid System. In: *Acupuncture in Modern Medicine* (Chen LL, Cheng TO, editors), 2013. <https://www.intechopen.com/chapters/42452>.

JUNE 2023