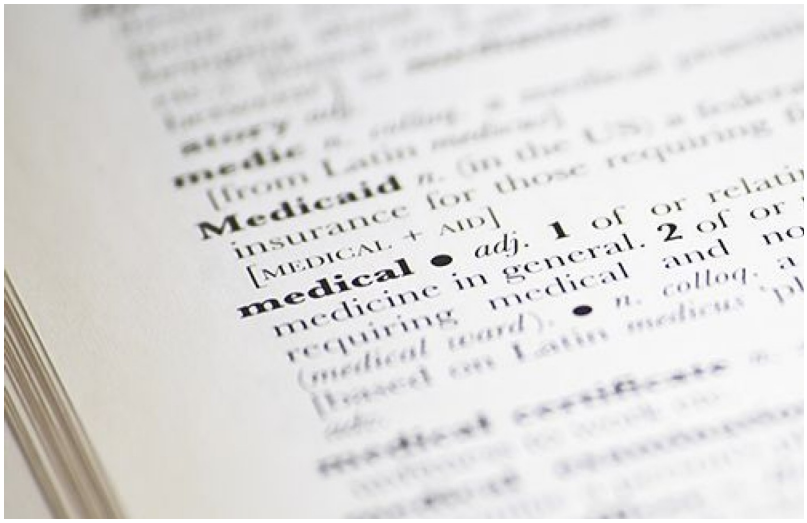
ACUPUNCTURE Today



YOUR PRACTICE / BUSINESS

The Importance of Knowing Mainstream Lingo

CONCEPTS THAT CAN HELP YOU IN YOUR QUEST TOWARDS MAINSTREAM INCLUSION

Christian Nix

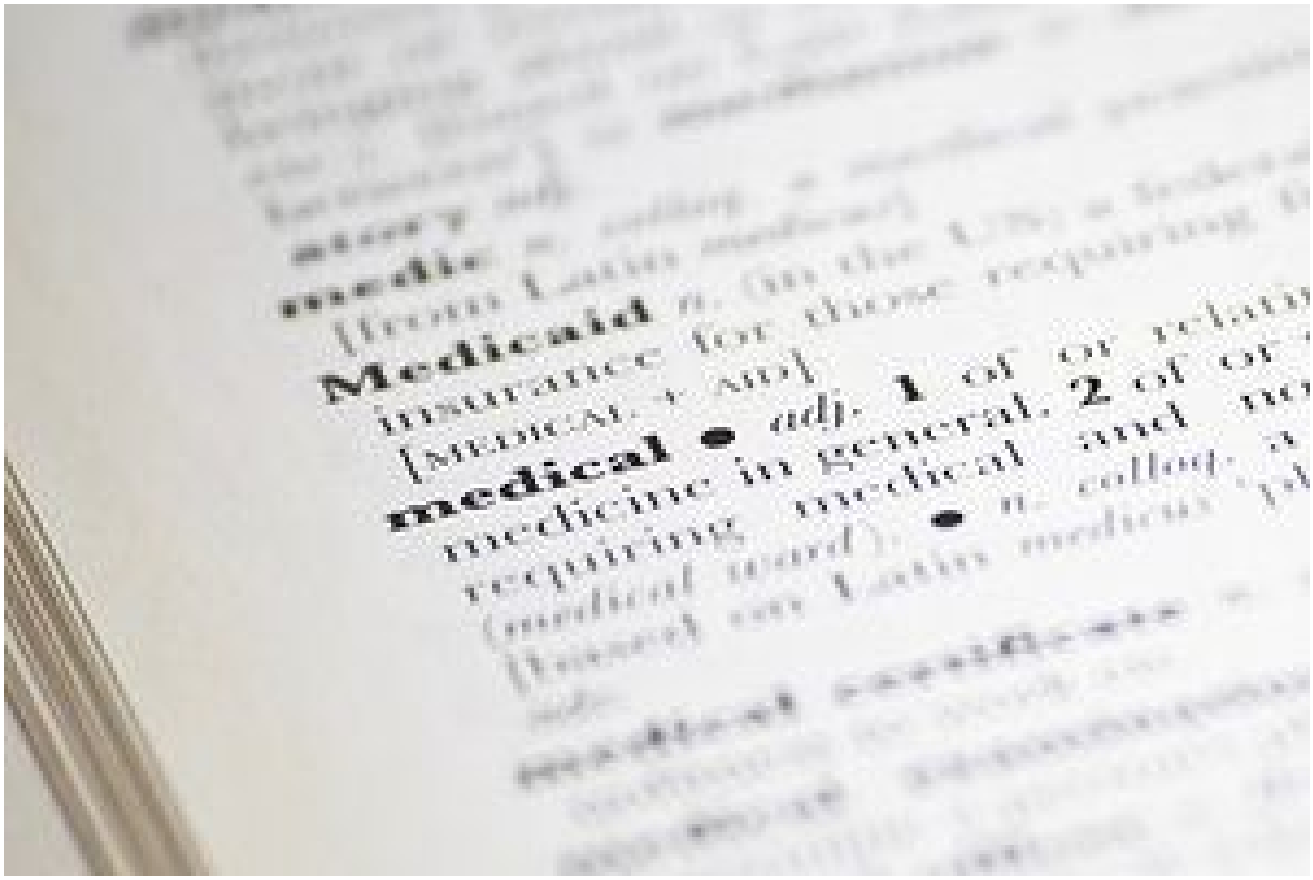
There is a secret lingo within mainstream medicine of which the vast majority of acupuncturists and Chinese medical professionals are unaware.

I sometimes hear from a certain segment of the TCM profession how there is a kind of conspiracy against our acceptance and inclusion; but this to me is not much more than a self-generated and self-fulfilling prophecy. It is becoming a more and more flimsy excuse with each passing day.

Yet, there are most certainly several "litmus test" kinds of criteria that determine whether or not physicians and mainstream medical professionals and administrators will find you valuable and worthy of their consideration – for either referrals or for outright employment and inclusion within their organization and setting.

Of all the criteria I can think of, perhaps none is more empowering and worthy of your effort than learning the lingo of how conventional medicine understands and communicates about mind-body medicine.

I recently caught a one-day intensive taught by William Sieber, PhD. Not only was the material utterly compelling and exactly relevant to those who quest for mainstream inclusion and serious authority status within conventional medical circles during this unprecedented era of opportunity, but I give the man himself high marks for the quality of his presentation skills. Before I get into the essential material, the workshop itself was sponsored by a group called Institute for Brain Potential (IBP) out of New Jersey. They essentially market this to healthcare professionals – knowing that many allied healthcare professionals will face and deal with the kind of burn-out that this material is intended to help manage and prevent.



The primary reason the material in this workshop is so profoundly empowering for acupuncturists and Chinese medical folks to learn and master is because it deals with precisely the conditions that most acupuncturists especially are being asked to treat.

To put it in a slightly different framework – the epidemiology, neurophysiology and psychology discussed in this workshop are precisely the conditions that acupuncturists can have the greatest effect and perceived value in treating and managing. The lingo required for effective communication about these conditions as well as acupuncture's ability to treat and manage such patients is of enormous value right now. This is your leverage when approaching the mainstream.

Not surprisingly, these are also the exact topics and conventional medical-speak that acupuncturists must master if they wish to break the communication barrier between holism and conventional medicine. By far, the biggest obstacle to inclusion within the mainstream is this communication chasm.

Topic Area	% LAc	% MD/ admin
Communication with MDs/nurses and other providers	96%	100%
Communicating AOM concepts in a language which works with conventional practitioners	91%	90%
Speaking-presentation skills to help build relationships	89%	70%
Leadership skills to give my services a more effective presence	88%	40%

Skills in articulating to the MDs/staff the value I offer patients	88%	80%

Is this really a surprise?

The language of a given medical system actually creates the clinical reality of that system.

The IBP workshop on "Calming and Overactive Brain" with all its attendant detail regarding the language of mind-body medicine within the conventional medical model is nothing other than a Rosetta Stone for acupuncturists who seek inclusion within the mainstream.

Just understanding the epidemiology of the situation in North America and the current best results of conventional approaches is an inspiring and encouraging motivation for specific ways you can approach and offer help to the mainstream.

Consider the following:

1. Depression, anxiety, stress, and pain as co-morbid conditions are validated as literally the most common presenting problems in primary care, and in most specialty practices.[1,2,3]
2. The life and fiscal impact and their association with an increasing number of other life-shortening conditions places these conditions among the most important of all medical conditions to detect, diagnose, and treat adequately.[4-9]
3. Yet, the actual validated rates of proper screening and diagnosis are among the lowest of serious diseases.[10-28]
4. Worse, even when detected, and even when treated according to accepted conventional guidelines, outcomes remain unacceptably low.[10-28]

U.S. Stress Statistics	Data
People regularly experiencing PHYSICAL SYMPTOMS from stress	77%
Regularly experience psychological symptoms caused by stress	73%
Feel they are living with extreme stress (vs. <22% "quite a bit" PLUS "extreme" in Canada)	33%
Saying stress has a negative impact on personal & professional life	48%
Percent who say they are "always" or "often" under stress at work	30%

Even if you don't – after six brief and intense hours – fully grasp the subtleties of: Stress hormones, hydrocortisone, noradrenaline and the effects of the prefrontal cortex, hippocampus and amygdala resulting in the behavioral and functional problems like poor memory, sleep and mood. Or how stress affects regional cerebral blood flow (rCBF) and thus social and emotional intelligence.

Even if you do not fully appreciate the studies of the limbic system in psychiatric disorders and how abnormal rCBF is associated with specific emotional states related to stress, fear, anger ... and on and on.

Even if this seems a monumentally complex and challenging topic to comprehend, let alone to dialogue about with conventional medical physicians; nonetheless, I assure you that – just like any other difficult skill or topic:

1. You can and will grow your understanding if you commit to diligent study; and
2. The reward is well worth the effort during this era of healthcare reform where the mainstream is – for the first time in our country's history – actually being incented to seek out non-conventional approaches and where market forces will now work in favor of using what works.

Once you truly grasp how the mind-body concept is understood and discussed within the conventional medical world, it is not unrealistic that you could approach physicians and mainstream administrators on a par with what they expect and offer them a solution for what the current conventional approach to treating pain, stress, anxiety and depression both lack and need.

Where To Begin?

In my own efforts to bridge the communication chasm with physicians, small milestones stand out. One such milestone appeared when I made the discovery and connection about the pathophysiology of stress of according to biomedical terms.

In TCM - as hopefully we all know - stress is the subjective experience of liver depression *qi* stagnation (*gan yu qi zhi*).

Of course, no real-life patient only presents with this one discrete pattern so there is something important to add about the more complex understanding of pattern discrimination that is so often absent from all but a small segment of the TCM world's diagnostic skill level; but that is another topic for another day.

Clear understanding of both the language and concepts of the stress mechanism within the biomedical model can be learned and apprehended quickly and with little effort.

The Language of Stress

In biomedicine, the pathophysiology of stress is understood as an up-regulation of the sympathetic branch of the autonomic nervous system (ANS).

The result of a hyperactive sympathetic nervous system is:

- Increased blood pressure.
- Increased heart rate.
- Decreased heart rate variability.
- Decreased blood flow to digestive organs and soft tissue.
- Impaired cognition from irregular sleep.
- And several other key markers.

No source in modern medicine refutes this basic understanding and so you are on safe ground when you speak about stress in this manner to physicians or other conventional medical professionals or even to lay patients (though you must be cautious not to bludgeon patients with high-level scientific explanations because they will often pretend that they understand simply not to appear dumb and then may discretely disappear because they are put-off by your pretense of superior knowledge).

The curious effects of acupuncture are – to a large degree - the exact effects that down-regulate sympathetic nervous system hyperactivity and thus disrupt and modulate the stress response.

Now, it is essential that you are clear in your own mind just what acupuncture does (theoretically); as

well as just what you are doing clinically – i.e. in the actual application of your theory.

What Does Acupuncture Do In Holistic Medical Terms?

Acupuncture only moves *qi* in the body. That's it. Any other therapeutic effects or theoretically stated treatment principles all derive from this one primary effect.

If you think you are literally draining dampness, transforming phlegm, breaking blood stasis or supplementing blood vacuity with needles – you are delusional . . . unless, you understand that you are affecting the above aspects of yin substance via regulation of the *qi* mechanism.

In other words, it is by coursing the liver and rectifying the *qi* mechanism that any and all other therapeutic benefits are achieved.

And why should that be so far-fetched? Furthermore, why should this point be so important to understand?

If you go back to the biomedical explanation of the pathophysiology of stress (i.e. liver depression *qi* stagnation) you can see for yourself that each and every clinical marker of stress relates to:

1. Movement of blood, cardio/cerebrovascular function.
2. Digestive function.

From that basis, it only takes the most elementary logic to puzzle out for yourself that stress (i.e. gan yu qi zhi) causes or contributes to:

- Spleen vacuity – i.e. digestive dysfunction.
- Blood vacuity - from lack of spleen function.
- Fatigue - lack of spleen function unable to produce *qi*.
- Heart *qi* and blood vacuity - resulting from spleen vacuity and the spleen's inability to up-bear the clear *qi* and blood.

And so on...

This kind of logical introspection is the exact kind of bridge-building I do when I lecture to physicians about acupuncture and holism.

This is also exactly what they respect and respond to - i.e., logic and a little due-diligence in looking to the modern research that has already substantiated so much of what acupuncturists seek to convey to mainstream physicians.

Resources:

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