

Transferring Qi: An Examination of Methods

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Transfer of qi is the process of moving qi from one channel or area to another channel, area or organ. The transfer of qi is implied in the Nei Jing but is not clearly explained. Chapter 9 of the Ling Shu, *From Beginning to End*, presents using Yin-Yang paired channels to treat an imbalanced channel, which is two channels working together to treat one channel.

This combination is the original host-guest treatment and transfer method. For example, if the liver is in excess the treatment includes the liver and gallbladder channels. The treatment transfers an influence (reinforcing and reducing) between the channels. The chapter does not include which points to select and there are no case studies providing examples. There is no explanation of how this method works within the body and the acupuncture channel system. Here is a historical view of common transfer of qi methods after the Nei Jing.

The Nan Ching

The Nan Ching introduces the five-phases (five element) acupuncture points. This addition provides the structure for a five-phases reinforcing and reducing method that can be applied on each channel. The Nei Jing does not list any five-phase points, there is only the five-shu points: well, spring, stream, river and sea points.

The Nan Ching offers the following strategy: to tonify an organ treat the parent five-phase, and to reduce an organ treat the child five-phase. For example, if the kidneys are deficient, the treatment plan is to tonify the metal point on the kidney channel, which is Fu Liu, Kidney 7. And if the liver is excess, the treatment plan is to reduce Xing Jian, Liver 2, which is the fire point on the wood channel, the five-phase child point. There is no explanation of how these treatments work from an acupuncture channel perspective. This acupuncture strategy varies significantly from the Nei Jing.

The Da Cheng, The Great Compendium

In the Ming Dynasty, Jizhou Yang wrote the Zhen Jiu Da Cheng, "The Great Compendium." In this classic book Yang presents a Host-Guest treatment. This treatment does two things. First, it combines Yin-Yang paired channels in all treatments, which follows the guidance in chapter 9 of the Ling Shu, *From Beginning to End*.

Second, Yang presents a point combination: treat the source point on the problem channel and the luo point on the Yin-Yang paired channel. He does not explain how this method works or what needling technique to apply on each of the points. Also, Yang does not provide a source for this method. According to the "Manual of Acupuncture," "An examination of many classical point combinations shows that this method seems to have been little used (or at least recorded) through the centuries."

George Soulie De Morant

George Soulie De Morant was a pioneer in bringing acupuncture from China to France. He based some of his teachings on Yang's Great Compendium. Morant created a new way to practice acupuncture based on his interpretation of the Host-Guest.

Morant states, "If a meridian is empty and its coupled meridian is full, tonification of the point of passage (luo point) of the empty meridian is enough to replenish it, while at the same time the coupled meridian in excess will become normal." Morant uses the luo point to transfer qi and blood between Yin-Yang main channels to balance the two. His guidance is to use the luo point only, and if that does not work then add the source point.

Nguyen Van Nghi and Albert Chamfrault

Nguyen Van Nghi was born in Vietnam and was an important scholar, writer, teacher and practitioner. He moved to France and eventually collaborated with Dr. Albert Chamfrault, who carried on the tradition of Morant. The two expanded on Morant's theory of the transfer of qi; they promoted combining the source and the luo point to transfer qi between the channels. They present the transfer is through the "transverse luo collateral". There is no mention of transverse luo collaterals in any classic Chinese medical texts.

This theory can be viewed as an attempt to explain how the host-guest combination works. The theory is a major shift from the classical function of luo points and collaterals. See the author's articles on the Source-Luo point combination in the [June](#), [July](#) and [August](#) 2015 issues of *Acupuncture Today*.¹⁻³ From a classical Chinese acupuncture viewpoint, the transverse luo collaterals and the transfer of qi via them is highly controversial and potentially harmful, as pathogens can be transferred.

Korean Four-Needle, Five-Element Technique

The four needle five-element technique is an acupuncture method that includes three channels to influence one imbalanced channel; it includes a transfer effect. The method expands on the Nan Ching's five-phases basic strategy. In this method the imbalanced, controlling, parent or child five-phases channels are treated.

When there is a deficiency two points are tonified: the parent point on the problem channel and the horary point on the parent channel. For example, if there is spleen qi deficiency, tonify the fire points on the spleen and heart channels. The remaining two needles are the controlling point on the spleen channel and the horary point on the liver channel.

The method does not include any internal or external pathway explanation for how this technique works; the reasoning is the theory of the five-phases cycles. For example, when the parent channel is tonified the energy will fill the child channel (organ). When the five-phases parent point on the imbalanced channel is treated it will cause an internal circulation to the organ to strengthen it.

Treating the controlling points/channels will release the controlling effect, allowing the energy to grow and supplement. Some practitioners in the five-element systems state the reason it works is by way of resonance. Needling fire points will generate fire systemically and bring the weak child element to homeostasis.

The five-phases are a metaphor, there is no fire, wood, metal, water or wood inside the point and channel; it is a metaphor for how qi moves. In my clinical experience there is a direct and effective method based on the foundation aspect of Chinese acupuncture: the acupuncture pathways.

Twicken-Style Channel Acupuncture

Every professional acupuncture text presents the acupuncture pathways; they are the main topography for how qi flows throughout the body. For example, if there is a lung deficiency the goal is to tonify the lungs, which means to direct qi into the lungs.

Guiding qi through the pathways is the most direct way to tonify the lungs. The lungs originate in the middle jiao/stomach, which is the earth element. Needling Zu San Li, Stomach 36, Zhong Wan, Ren 12 and then Zhong Fu, Lung 1, guides qi in the stomach channel/organ into the lungs; this flow stimulates the normal pathway connection between the channels. In my experience, this direct channel circuit is the clearest and most effective way to transfer qi.

Another example is when there is spleen qi deficiency. Needling Chong Yang, Stomach 42, Zu San Li, Stomach 36, Zhong Wan, Ren 12 and then Zhang Men, Liver 13 (front mu point of the spleen) is a direct way to transfer stomach qi into the spleen; it is also a host-guest type treatment. This approach can be applied to all the channels and organs. The number of acupuncture points in a treatment depends on the condition and response of the patient.

The ancient Chinese medical practitioners left a detailed description of the inner pathways in the human body. Strategically performing acupuncture within the pathways is applying the guidance of the founders of Chinese medicine. It is my experience guiding (transferring) qi in a systematic way based on channel distribution, acupuncture point sequencing and direction, significantly increases clinical effectiveness.

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