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Survey of the History, Development, and Medical Uses of Chinese Acupuncture

Kendell G. Hansen
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SURVEY OF THE HISTORY, DEVELOPMENT AND MEDICAL USES OF CHINESE ACUPUNCTURE

by

Kendell G. Hansen

A thesis submitted in partial fulfillment of the requirements for graduation in HONORS

Approved:

UTAH STATE UNIVERSITY
Logan, Utah

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<table>
<thead>
<tr>
<th>TABLE OF CONTENTS</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>LIST OF TABLES</td>
<td>iii</td>
</tr>
<tr>
<td>LIST OF FIGURES</td>
<td>iv</td>
</tr>
<tr>
<td>INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>ORIGIN</td>
<td>3</td>
</tr>
<tr>
<td>CHINESE THEORY</td>
<td>5</td>
</tr>
<tr>
<td>YIN AND YANG</td>
<td>6</td>
</tr>
<tr>
<td>PRINCIPLES OF ACTION</td>
<td>8</td>
</tr>
<tr>
<td>SPREAD OF ACUPUNCTURE</td>
<td>12</td>
</tr>
<tr>
<td>TREATMENT</td>
<td>15</td>
</tr>
<tr>
<td>ANESTHETIC VALUE</td>
<td>20</td>
</tr>
<tr>
<td>WESTERN THEORY</td>
<td>22</td>
</tr>
<tr>
<td>POSITIVE AND NEGATIVE</td>
<td>26</td>
</tr>
<tr>
<td>CONCLUSION</td>
<td>29</td>
</tr>
<tr>
<td>BIBLIOGRAPHY</td>
<td>30</td>
</tr>
<tr>
<td>APPENDIX</td>
<td>32</td>
</tr>
</tbody>
</table>
# LIST OF TABLES

<table>
<thead>
<tr>
<th>Table</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>THE CHINESE COSMOGONY--YIN AND YANG</td>
<td>7</td>
</tr>
<tr>
<td>2.</td>
<td>THE TWELVE CHANNELS OF ENERGY CIRCULATING THROUGH THE BODY</td>
<td>9</td>
</tr>
<tr>
<td>Figure</td>
<td>Description</td>
<td>Page</td>
</tr>
<tr>
<td>--------</td>
<td>------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>1.</td>
<td>Charts illustrating acupuncture channels</td>
<td>10</td>
</tr>
<tr>
<td>2.</td>
<td>Charts illustrating acupuncture needle points</td>
<td>17</td>
</tr>
<tr>
<td>3.</td>
<td>Chinese gods of medicine</td>
<td>33</td>
</tr>
<tr>
<td>4.</td>
<td>Picture of individuals being treated with acupuncture</td>
<td>34</td>
</tr>
<tr>
<td>5.</td>
<td>Physician proscribing acupuncture</td>
<td>35</td>
</tr>
</tbody>
</table>
INTRODUCTION

It is difficult to pick up a magazine, medical or otherwise, that does not include an article about the Chinese method of diagnosis and treatment known as acupuncture. This ancient technique, about which there is so much current interest, is reputed to have originated nearly 30 centuries ago when a Chinese warrior emperor made the observation that certain arrow wounds caused pain to disappear in remote parts of the body.

During World War II, the new China of the Red Army rediscovered the effectiveness of acupuncture in the treatment of wounded or sick soldiers during combat conditions. Today, Chinese medical schools have established courses in this traditional therapy. Its results, in China, are many times considered superior to those of western methods, also taught in the same schools.

The history of the development of acupuncture in China is a thesis unparalleled in the annals of medicine. It was under the Chinese Communists the treatment found its first official support in modern China, for a reason similar to one at the very inception of its use. Acupuncture was reserved first for the Emperor's warriors, the official guardians of China. In the late 1930's, faced with a desperate lack of drugs and western trained doctors, Mao and his Red Army resorted to battlefield use of acupuncture and Chinese herbalists. A clinic for practitioners was opened in Yenan Province under Communist control and political indoctrination, in the words
of Mao, "Chinese medicine and pharmacology are a great treasure house and effort should be made to explore them to a higher level."\(^1\)

\(^1\)Newsweek, August 12, 1972.
ORIGIN

The actual origin of acupuncture dates from ancient days of a Chinese warrior emperor who made observations that certain arrow wounds caused pain to disappear in remote part of the body. The story is certainly apocryphal; the date when the actual practice began and the first exponent of it are unknown. The theories concerning acupuncture are said to have been originated by Huang Ti, an Emperor of China during the Legendary Age, about 2697 B.C. There has been little modification of the supposed origin and basis of the present-day ideas on the subject; practically nothing new has been added in forty centuries. Beginning with the Chou dynasty (circa 1122 B.C. to 256 A.D.), every important household had masters of the occult arts which then included acupuncture.

During the Tang dynasty (circa 618 to 692 A.D.), Sun Ssu Miao (one of the recognized gods of Chinese medicine) collected the treatises of those who had formerly written on the subject in the book "Acupuncture and Cautery." He specified some 650 needling points, and listed some 345 special points by name. This book was later revised and illustrated by Wang Tao, but this work has been lost.²

In the Sung Dynasty (circa 960 A.D.), Emperor Jen Tsung founded a school of acupuncture and emperors themselves set the pace by

becoming excellent acupuncturists. The Emperor also ordered Wang Wei I to construct a bronze image, the "T'ung Jen," in which all the old theories of anatomy were to be corrected and thereon set forth according to Sun Ssu Miao's description. The interior of this figure is fitted with models of the organs and viscera, and these were surrounded with water. On the exterior of the image holes were made to represent the needling points. Acupuncture procedures were taught apprentice students by placing thin paper over the holes and the pupil instructed to apply the needle, for extraordinary care must be taken to prevent injury to vessels of the circulation proper.\(^3\)

In the Ming Dynasty (1368-1628 A.D.), Yang Che Chou collected all the old records and compiled the most important works which were published nationally. In the 46 centuries since the reign of the Yellow Emperor there have been 50 different editions in Chinese of the Nei Ching, the basic acupuncture document. These, and "Ancient and Modern Medical Generalities" by Sin Ch'ong Fu, 1556 A.D., and the eight-volume summary, 1575 A.D., constitute the basic Chinese library on acupuncture.

The most important of the medical classics was called the Nei Ching or "The Yellow Emperor's Cannon of Internal Medicine." The authorship of this book was attributed to the Yellow Emperor and his physicians. The Nei Ching is a treatise on the Oriental therapy. It is in the form of questions and answers and it embraces hygiene, pathology, physiology as well as politics, economics, and the arts and sciences of that day (26 A.D.). The work was definitive and the development and evolution of Oriental medicine stemmed from it.\(^4\)

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3 Morse, p. 184.

CHINESE THEORY

Behind acupuncture are a host of Chinese concepts. The Chinese theory of Cosmogony premises that all nature possesses the two vital invisible intangible creative and destructive essences, the Yang and Yin. It also states that all nature is from one source and is guided by an unalterable universal law, the "Tao." Man as a part of nature is of course governed by these forces or essences or breaths. "These essences exactly counterbalance each other in all nature, that is, theoretically they are qualitatively and quantitatively of equal amounts but are in a continual state of ebb and flow; they are continuously causing successive changes of energy."\(^5\) The distribution of these essences is not uniform at any time or place in the body. From this original abstract idea there was developed a dualistic or sexual conception of nature. Certain parts of the body, for example the organs, are female, and the Yin predominates; the viscera are male and in them the Yang predominates. There are other situations, especially on the head and particularly near the eyes and ears, where the essences congregate, like force in a storage battery. If the state of flux is continuous and uninterrupted and there is no stagnation of the essences in certain parts, there is harmony and health, but if the conduction and radiation is interfered with, there is disharmony and disease. This is obviously reminiscent in more than one particular of the classical and medieval doctrine of the four humors.

\(^5\) Morse, p. 163.
YIN AND YANG

In order to appreciate what acupuncture represents in Chinese medicine one must attempt to understand the developed dualistic speculation known as Yang and Yin theory.

In the beginning there was the "Absolute Nothing," that is chaos, called wu chi. The wu chi envolved of itself, and there was formed the t'ai chi, the "Great Absolute" or "Primordial Matter." The t'ai chi is defined to mean two things: the "Great Principle" which formed the Universe, and "Primordial Matter" from which the earth was made.

The t'ai chi then revolved and congealed, or generated, by unions and disunions the liang i, or "two vital essences" of the Universe. These two are the Great Principles of the Cosmic Breath, Spirit, or Force called ch'i, and are designated as the Yang i and the Yin i. They are represented pictorially by the circumference of a circle which is equally divided by a curved line shaped something like the letter S (see Table 1). Quite frequently the Yin half is colored black with a white dot, and the Yang half remains white with a black dot. The Yang and the Yin are the positive and negative principles of the dualism of the Chinese cosmogony. These forces are respectively creative and destructive, constantly uniting and separating. They are also mutual affinities, complementary to each other, and at the same time, are antipathetic to each other. Their sexual interactions create, and their separation destroys all objects
The Chinese Cosmogony—Yin and Yang

The Chinese cosmogony is the "absolute nothing," chaos, Wu Chi, represented by 0, which evolved of itself the "great absolute" or "great ultimate" or "great limit" or Tai Chi "primordial matter" represented by ●. This concealed by revolving, by unions and disunions and formed the Liang I, or, vital essences of the universe: two great principles of the cosmic breath, or CH'I.

These are the YANG I. and YIN I.

Represented by

The great positive and negative principles of the dualism of Chinese cosmogony. Their ceaseless permutations produced the four Hsiang:

SSO HSIANG

Tai Yang The greater positive, the Sun.
Tai Yin The greater negative, the Moon.
Shao Yang The lesser positive, the fixed stars.
Shao Yin The lesser negative, the five planets.

In their productions and decay, unions and disunions, there was followed an inscrutable and inevitable law in strict accord with mathematical principles. The law of these changes is the "Li or Tao and the fixed form the SU.

In nature. Taken broadly, the Chinese have a fixed idea regarding the unalterable powers underlying all animate and inanimate nature.
PRINCIPLES OF ACTION

To the Chinese, the theory of Yin and Yang is the basic principle of everything in creation. Each human being is a harmonious combination of Yin and Yang, of earthly and celestial principles. Any disturbance of that balance produces physiological disorders. According to the Chinese idea, the organs work harmoniously and serve to develop the body. They are related to the six viscera with which they are reciprocal, as follows: The lungs relate to the large intestines which respond to the skin. The heart relates to the small intestines which respond to the arteries. The liver relates to the gall bladder which responds to the muscles. The kidneys relate to the three burning spaces and bladder which respond to the bones and hairs.

When the needle punctures the different tissues, for example, the skin, ligaments, muscles, etc., at various depths, there will be a reaction in the organ to which the tissue is related; that is, when the skin is punctured the lungs are affected, when the muscles are pierced the spleen will be affected, etc. This channel system is thus connected indirectly with all the parts of the body, and causes the blood and air to circulate and nourishes the male and female principles, it moistens the bones and ligaments, and lubricates the joints. (See Table 2 and Figure 1.)

In the modern treatment with acupuncture, the Chinese deal with the twelve pulse movements in various parts of the body. All
TABLE 2
THE TWELVE CHANNELS OF ENERGY CIRCULATING THROUGH THE BODY

1. The hand great female lung vessel goes from the middle burning space to the tip of the thumb.

2. The hand male proper large intestine vessel proceeds from the tip of the thumb and of the small finger to the large intestine.

3. The foot male proper stomach vessel passes from the middle of the nose to the middle toe of the foot.

4. The foot great female spleen vessel arises at the great toe and connects with the lower part of the tongue.

5. The hand young female heart vessel goes from the heart to the inside of the middle finger.

6. The hand great male small intestine vessel proceeds from the little finger to the small intestine.

7. The foot great male bladder vessel connects the inner corner of the eye with the little toe of the foot.

8. The foot young female kidney vessel originates from the little toe and extends to the root of the tongue.

9. The hand female proper pericardium vessel connects the middle of the stomach with the tip of the middle finger.

10. The hand young male three burning spaces vessel arises from the tip of the little finger and goes to the three burning spaces.

11. The foot young male bladder vessel connects the outer angles of the eye with the little toes.

12. The foot female proper vessel arises from the hairy spots on the big toes and proceeds to the vertex of the head and connects with the central vessels.
Fig. 1. Charts illustrating acupuncture channels.
treatment begins with the analysis of these pulsations. Acupuncture restores health by controlling the flow of "universal energy" in the body, that is, by blocking the energy points with the acupuncture needles. In Taipei, China, is the world center for acupuncture and the offices of Dr. Wu Pei-Ping, probably the most celebrated author and master practitioner of contemporary acupuncture. His associate is Dr. Giore Harel, who has stated:

In acupuncture you must take six pulses in each wrist to decide the diagnosis . . . The Chinese believe there is a universal energy called CHI which travels through the human body in 12 pathways or meridians. We believe that illness is caused by interruptions in that flow of energy. Disease means imbalance and the Chinese found the way to restore balance—by stimulating with needles.6

There are 720 acupuncture points, with 180 more secret ones known only and used only by the Chinese masters. Each point has a precise anatomical location. Acupuncture is also augmented by a process known as "moxibustion," which heats the inserted needles and this heat descends the needle shaft to increase stimulation and extract dampness. Depth of insertion depends upon the disease or ailment treated, ranging from superficial sub-cutaneous "scratching" or deeper organic penetration.

6Life, September 13, 1971.
SPREAD OF ACUPOUNTURE

Oriental medical science originated in China four or five thousand years ago. Due to the nature of Chinese culture, the dissemination of its practices was relatively slow and limited. Acupuncture, the main tenet of the Chinese healing art, first found acceptance outside China with its neighbor, Japan.

It [acupuncture] has been practised in Japan for about two thousand six hundred years. It developed in this country through the close economic and cultural interchange with our neighbor country of China.\(^7\)

Acupuncture came to Japan via a physician, Jofku, 250 years before Christ, who brought to Japan a collection of ancient medical books, whose contents were quickly adopted by the Japanese in their traditional manner.

Relations between China and the West came about late in modern history. For centuries silk and paper were the only known commodities of Chinese culture in the western world. Then, in the middle of the 17th century, Jesuits sent to Peking by French King Louis XIV came into contact with Chinese medicine and were startled with their discoveries. The first western document on the art of acupuncture appeared in 1671, which also contained a study of the Chinese concept of the pulse in medical treatment. Since then, hundreds of authors have written on the subject of acupuncture.

The first half of the 19th century saw increasing public interest in acupuncture in Europe. In 1863, Dabray, the French consul in

\(^7\)Hashimoto, p. 13.
China, wrote "Chinese Medicine" which contained a chapter on the acupuncture needles. It remained for George Soulie de Morant, who was to spend 20 years in China with a French bank, to write about acupuncture in such detail that it could produce genuine international information. It must be remembered that the 19th century was full of new western medical discoveries and China was a remote factor in the scientific world. It is unique that acupuncture received the interest it did. By virtue of his travels, Morant learned much about current Chinese treatment by acupuncture and in 1908 he was awarded an honorary medical status by the Viceroy of Yunnan Province. Returning to France, Morant gave public demonstrations on acupuncture, in one curing a case of hemiplegia. Continuing his translation work, Morant revealed all available Chinese knowledge and became an inspiration for the modern western study of acupuncture. In fact, in 1950 Morant was proposed for a Nobel Prize in Physiology as the French candidate for that honor. Today, he is recognized as the primary agent in making the west aware of the benefits of acupuncture. From his scholarship, this speciality of medicine has found roots throughout the world.

The great impetus leading to interest in acupuncture in the United States came very recently with the Nixon visit to China and the subsequent normalization of political activities. Many American physicians have now traveled to China to obtain firsthand data on the ancient art of acupuncture. The reported observations on the therapeutic and anesthetic value have aroused enthusiastic excitement
for this modality of treatment. The amazing thing about acupuncture is the almost universal acceptance that there is something to it.
TREATMENT

The tools of acupuncture are the needles. The first known were made of stone. Metals later took the place of jade. The next step was the use of gold or silver for the needles, mainly as a status symbol. Today, in China and elsewhere, the art is practiced, stainless steel is used, with a handle made from coiled wire. The needles are from half an inch to four inches long, depending on treatment called for. It was Morant who presented this history and who added the findings that needles of precious metal were also better than those of the neutral metals because of their greater rate of heat conductivity. Small needles are used on the face, fingers, toes, medium-sized ones for the limbs and trunk, large ones for the buttocks. Insertion is shallow for tonification, deep for sedation. Theoretically, one needling should be enough for each treatment. The Chen-Chiu I Sio, published in 1798, says: "One needling can make hundreds of ailments disappear. Use four at the most. Those who riddle the whole body with needles are detestable."  

Selection of the points with certainty and skill and training reduces the number of needlings required, despite some claims that more needles reduce the number of failures.

It was not until the middle of the present century that acupuncture became a hard point of discussion in American medicine. Today,

there are some 1000 medical acupuncturists in Europe and South America. There are very few in the United States. There is common acceptance among those now involved or concerned that physiologically acupuncture assumes the presence in the skin of a system of meridians and points and an energy circuit. It was Sir Henry Head who in his 1898 study of reflexology mapped out the painful and sensitive skin zones on the surface of the body. From his work modern practitioners base their investigations on neural pathways instead of on the old Chinese yin-yang concept.

Acupuncture in a sense may be considered a highly developed art of dermatologic medicine. Control of reflex mechanisms at standardized and charted surface points and meridians can benefit cases previously unresponsive or slightly responsive to other therapy. That needle pricking of the skin was recognized by Sir Henry Head.9

(See Figure 2.) These physiological findings are not new, having been reported between 1920 and 1930, but they do reinforce the findings of western investigators and serve as a base of the common principle that the autonomic nervous system influences disease mechanisms.

It appears that the impulses stimulated by various needle points on the skin are transmitted to the internal viscera through the somatovisceral neuronal synapses in the spinal cord. During the process of transmission through such synapses, one of the components of the visceral nerves—either the sympathetic or the parasympathetic—seems to be selectively stimulated and adjusts the function of the autonomic nervous system.10


Fig. 2. Charts illustrating acupuncture needle points.
The beneficial effect of acupuncture in the treatment of chronic and degenerative diseases can be seen in its action on the adjustment of function of the autonomic nervous system and the endocrine system as well. It seems to act to restore the body's natural defenses against stressors.

Only a few years ago, in the United States, acupuncture with its remote Chinese origins and vague philosophic accompaniment, was considered as valid as the Krebiozen cancer cure, the honey-and-vinegar treatment for arthritis, or the rub-it-with-a-raw-potato cure for warts. Today, it is as serious a study as the search for the cancer virus or the vaccine against VD. Several American doctors and investigators have taken on the challenge of acupuncture, notably seen in the work of Vieth and Dimond. Today, it has far greater significance than the mechanical needling associated with the removal, say, of oedema fluid. In the early part of 1972, at Michigan's Northville State Hospital, and in New York, U. S. and China-trained staff doctors, Dr. Pang Man, Calvin Chen, and Frank Warren of New York's Postgraduate Center for Mental Health, have put acupuncture through a series of tests ranging from skin grafts, tumor excisions, hernia repair, to tooth extractions. The art has been practiced by licensed physicians to bring pain relief and anesthesia and a growing number of patients claim therapeutic benefits as well. A woman in California reported acupuncture cured a tennis elbow.

Acupuncture is suitable for treating a wide variety of diseases, ranging from internal medicine to women's and children's ailments, from neurology to organotherapy. It is often used in combination with modern medical processes.
It generally takes effect very quickly particularly as regards the alleviation of pain, and often proves more efficacious than chemotherapeutical preparations.\textsuperscript{11}

ANESTHETIC VALUE

The most recent innovation associated with acupuncture is its use as an anesthetic. It is in this field that acupuncture today finds itself doubly questioned. Acupuncture does not eliminate surgery but it has unquestionably been shown to alleviate post-operative pain and also to provide a unique form of actual operative anesthetics. Much publicity was drawn to this use of acupuncture when New York Times Editor James Reston was traveling in China in 1971 and suffered acute peritonitis. His appendix was removed under conventional anesthesia but he was given acupuncture treatment afterward and immediately all pressure and distension went away with no recurrence of pain.

Some months later, Chinese hospitals were visited by Dr. Paul Dudley White of Boston, and Dr. Samuel Rosen, a New York ear surgeon, and they observed operations of partial removal of the stomach, extraction of a brain tumor, removal of an ovarian cyst, all under acupuncture operative anesthesia. "My colleagues and I [Dr. White] have seen the past and it works." For surgical anesthesia, the needling is enforced by rapid movement or connection to an electric current. Probably the first operation under acupuncture anesthesia in the United States is reported by Dr. Wei-Chi Lu, M.D., Louis Weiss Memorial Hospital of Chicago. Dr. Lu reported a case of tonsillectomy

\[12^{12}\] Newsweek, August 14, 1972.
in his hospital. All concerned believed that if the insertion of needles at proper points could control pain or inflammation of an organ, it was only logical to apply a stronger stimulus to obtain anesthesia. Therefore, a 31 year old male nurse was operated on. At 7:40 a.m. a series of needlings took place on the dorsum of the right and left arms. Further techniques are too detailed to record in this study. Suffice it to say that the only medication used was saline solution containing adrenalin for hemostasis. At 8:10 the operation began. The tonsils were cut out, sutures placed and the needles were removed after the second tonsil was cut away. The operation was over at 8:40. The postoperative period was uneventful, the patient was discharged the next morning. The patient suffered no pain during the operation, and watched or was aware of every step thereof. Dr. Wei concluded by speculating that the anesthetic effect was caused by the physical stimulation on the small nerve endings that jammed or sidetracked the higher center of pain. 13

WESTERN THEORY

Equally impressive was the witnessing by Dr. Rosen of the removal of a lobe of one lung from a TB patient at the Peking Medical College. During a two-hour operation the acupuncturist continued needling the patient’s arm and there was no pain or discomfort. Yet how acupuncture works as an anesthetic is still a matter of conjecture:

The most popular explanation is the "gate control" theory proposed in 1965 by Drs. Ronald Melzack of McGill University and Patrick Wall of University College, London, both of whom were concerned with the general mechanism of pain rather than acupuncture. This theory holds that stimulation of the large so-called A-delta fibers in the sensory nerves (as produced, presumably, by acupuncture needles), closes a hypothetical gate in the spinal cord. This would block pain impulses which travel along a different set of smaller nerve fibers from traveling up the cord into the brain.14

The acupuncture points theoretically correspond to areas of the skin whose nerves are linked to the sympathetic controls of certain organs. Earlier, physiologists have shown that close relations exist between painful spots on the skin and certain diseased organs. It is known that the first sign of angina pectoris is a sharp pain that rises from the left little finger to the shoulder, and that in kidney disorders there is sometimes pain in the arch of the foot. There is another physiological theory of acupuncture based on the fact that the skin, various organs, circulatory and nervous systems, develop from the same initial groups of cells in the human embryo. Until the death of the individual, the same relationship continues

14 Newsweek, August 14, 1972.
between that same organ and the skin by means of the nervous system. "This reminder of the origins of life suggests how the skin can be regarded as the link between the inner world of the organism and the outer world of nature."\textsuperscript{15}

A special electrical conductivity has been discovered at the acupuncture points on the body. It can be measured by a detector with a small light. The light comes on when the detector is placed a certain distance from the point. A scanning electrode can follow the meridians—the circulation of energy—along their entire course because they match the skin areas of low electrical resistance.

In 1950, Dr. Niboyet, famed French acupuncturist, offered scientific study and proof of the existence and power of acupuncture points, and also their repercussions in the organism. The heart was chosen because its modifications correspond to electrical variations that can be faithfully recorded by an EKG. Dr. Niboyet performed the following experiments.\textsuperscript{16}

1. A needle was inserted at a point not related to any acupuncture point. No effect was made on the tracing of the EKG.

2. A needle was inserted at the tonification point of the heart meridian, detected by "the Pouret-Niboyet apparatus based on a cathodic oscillometer measuring the resistance of the body to the passage of electric current along the acupuncture meridians and points." The results demonstrated the existence of the acupuncture

\textsuperscript{15} Beau, p. 65.

\textsuperscript{16} Ibid., p. 105.
points. Other proofs were introduced by Dr. Niboyet. Blood analysis before and after needling of point 38 of the urinary-bladder meridian, located at the edge of the shoulder-blade, below the fourth rib, showed red corpuscles increased from half a million units in formation to two million after needling. "The action of this point restores perfect harmony to all the hormones that transport the blood; it therefore regulates and stimulates all the endocrine glands."\[17]

Acupuncture anesthesia therapy is finding an increasing number of reputable endorsers. Their feelings are similar to those expressed by Dr. Leroy Van Dam, chief anesthesiologist at the Peter Bent Brigham Hospital in Boston: "Why put the whole brain to sleep if you're just operating on a part?"\[18] Other supporters of this and the "gate-control" theory are Dr. Frank Warren, New York City Health Department head, Dr. John W. C. Fox, of the Downstate Medical Center in Brooklyn. To them, the "gate-control" theory is the right one and they maintain the rotation of the needles in the larger fibers of the spinal cord produces a vibratory stimulus that closes the gate and blocks the transmission of pain to the brain.\[19] During March and April, 1972, P. E. Brown, General Practitioner and one of the leading English exponents of acupuncture, toured China and reported on the following operations using acupuncture anesthesia therapy:

1. Right upper lobectomy for a large tuberculoma.

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17 Beau, p. 105.


19 Newsweek, June 12, 1972.
2. Excision of the external cartilage from the left knee.
4. A caesarean section for contracted pelvis.
5. A right-sided lobectomy for bronchiectasis.

All operations were photographed and discussed with the patient during and after the surgery. \(^{20}\)

POSITIVE AND NEGATIVE

It is obvious that within the framework of acupuncture case histories to date there must be failures, or, in other words, non-remedial effects. The reports coming from China of the high percentage of successful cases cannot be accepted as final or conclusive. There are still too many unknown or unexplored elements in the acupuncture field. As Dr. Paul Dudley White has stated:

If it were the world's best technique, we'd all be using it. If it were useless it would have been dropped thousands of years ago. There's something in it but it's difficult to say just what.21

Outstanding Chinese doctors themselves are cautioning against immediate acceptance of some of the highly uncritical press reports on acupuncture, knowing that claims not proved true can only hurt the efforts for acceptance of acupuncture. Dr. Chang, Director of the Peking Friendship Hospital in China, has issued a strong warning on this score.22 Dr. Chang underlined the need for more extensive research and better understanding of the acupuncture process.

Despite this, or perhaps as a corollary, Dr. Saul Heller, President of the New York State Board of Medicine, has predicted that in five years acupuncture's effectiveness could be more than experimentally confirmed as acceptable. Research in the direction


of the "gate-control" theory and its relation to the thalamus is claimed to hold the key to the future of acupuncture. So far no measured experiments have been performed to follow the path of the nerve impulses indicated by the meridians of acupuncture, or to determine the precise manner in which the "gate" is opened or closed. And a more precise definition between the general understanding of anesthesia and acupuncture anesthesia is required—in that conventional anesthesia deadens all sensation while acupuncture therapy simply blocks pain signals, not other types of signals.

On July 20, 1972, the New York State Department of Education, which regulates the practice of medicine, disallowed the use of needle therapy by non-physicians, and closed the Acupuncture Center of New York. Here four Chinese-trained therapists were working under the supervision of a licensed physician, Dr. Arnold Benson. Dr. Benson closed the Clinic but said:

We're going to fight this. What they're saying is that someone with 20 or 30 years experience in acupuncture can't administer the treatment but that a licensed doctor who doesn't know a thing about it can.24

Since the clinic opened, 300 people had been treated for a variety of ailments and 3,000 more were on the waiting list. The action may be a blessing in disguise, to the extent it can bring forward or produce a conflict between the pros and the cons, all leading to an acceptable resolution. While the ruling is statutory rather than

24 Ibid., July 20, 1972.
scientific, it indicates the necessity of meeting the growing challenge. This is also the "status quo" position of the AMA. On the other hand, the California Medical Association wants to encourage further study and the state legislature has cooperated with a new law that allows acupuncture to be performed by unlicensed practitioners for scientific investigation. The pin-sticking, so-called, has to be supervised by a licensed physician. It is expected some Chinese acupuncturists can work in medical-school hospitals.\(^{25}\)

A leader in the opposition to acupuncture research is Dr. Arthur Taub, MD., Director of the Neurosurgical Research Laboratory at Yale University.

It is difficult to understand how the award of funds for the study of a modality of therapy for chronic pain can be envisaged when neither evidence for its efficacy nor a plausible hypothesis for its action can be advanced.\(^{26}\)

A direct and immediate answer to Dr. Taub came from Dr. Arthur Galston, Professor of Biology, Yale University:

> Acupuncture anesthesia does work, whether or not we understand why, and whether or not ancient discredited theories were applied to explain it in the past. To dismiss anecdotal evidence because it comes from nonspecialists is arrogant elitism which would have made us overlook many medicines springing from folk wisdom. . . . equivalent to denying funds for research on most medicinals like aspirin (we're not at all sure why it works), almost all hormones, and, more to the point, anesthetics like ether or chloroform which work but for whose action no satisfactory explanation is available.\(^{27}\)

\(^{25}\) *Time*, September 18, 1972.


\(^{27}\) Ibid.
CONCLUSION

Why should perforating subcutaneously a relatively healthy-appearing skin site with a needle have any therapeutic value? As far as we know, the needle itself cures nothing; it is rather the effect of the needle on the neuromechanical stimulus to the organism. Acupuncture, in a sense, may be considered a highly developed art of dermographic medicine whose points most likely represent topographic patterns of neurally integrated pathways to deeper structures, such as the viscera of the body. Western medicine is as yet uncomfortable with this Eastern art of healing. However, acupuncture has become much more than an ingenious or mystical needle treatment. Various medical scientists in biophysics, physiology, neuropsychiatry, and internal medicine have been deeply involved in its elaboration. A thorough knowledge of the various branches of medicine will enable the modern practitioner to achieve maximum results with this ancient and effective therapy. It appears it should be included in the practice of modern medicine.
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Fig. 1. Fu Hsi.

Fig. 2. Shên Nung.

Fig. 3. Chang Chung-Ching.

Fig. 4. Hua T'o.

Fig. 5. Pien Ch'iao.

Fig. 6. Sun Saül Miao (Yoh Wang).

Fig. 3. Chinese gods of medicine.
Fig. 4. Picture of individuals being treated with acupuncture.
"I'm afraid a house call is out of the question just now, Comrade Koo. Try pushing the needle in a bit farther, wiggling it as you do so, and if the pain persists call me in the morning."

Fig. 5. Physician proscribing acupuncture.