

## **Japan, China, South Korea Work Together to Standardize Acupuncture Points**

By Editorial Staff

Working under the auspices of the World Health Organization, a group of leading acupuncturists and scientists from China, Japan and South Korea has agreed to set aside cultural and philosophical differences and work together to create an internationally standardized set of acupuncture points.

If all goes as planned, the scientists expect to have the project completed in the summer of 2005. At that time, they will submit their findings to the WHO, with the ultimate goal of having a standardized location for every classical acupuncture point approved by the WHO in 2006.

"Once the standard is established, it can be used as a common language in order to discuss the effectiveness of acupuncture and moxibustion around the world," said Shuichi Katai, a professor at Tsukuba College of Technology and chair of the study group. Katai added that having a unified series of points would further the spread of acupuncture and related therapies throughout Asia.

Acupuncture is widely believed to have been invented in China between 2,000 and 3,000 years ago. Over time, as the knowledge and practice of acupuncture migrated to other countries, subtle differences in teaching practices, philosophy, educational programs and record-keeping have resulted in small variations in the location of some acupuncture points. These variations, while seemingly insignificant, have implications that could impact future research, effectiveness of treatment and, in the eyes of some practitioners, the overall perception of acupuncture as a legitimate form of healing.

The WHO has been interested in standardizing the location of acupuncture points for a quarter of a century. In 1980, the WHO's Regional Office for the Western Pacific (WPRO) began exploring the possibility of standardizing acupuncture nomenclature, and held a series of meetings in the Philippines the following year to investigate the names and locations of acupuncture points.

Building upon the results of those meetings, a WHO scientific group in 1989 reached a consensus that standard international nomenclature should comprise an alphanumeric code, along with the Han character names of meridians and acupuncture points, translations into the Chinese phonetic alphabet (Pinyin), and English translations. The group also proposed standard nomenclature for 14 main meridians, 361 classical acupuncture points, eight extra meridians, 48 extra points, and scalp acupuncture lines. However, no agreement was reached at that time on the exact location of the classical points.

According to an article in the *Asahi Shimbun*, a Japanese newspaper, one of the most significant differences regarding acupuncture nomenclature between countries is the way in which distances are measured between various body parts. For example, in Japan and South Korea, the distance between the wrist and elbow is divided into 10 sections to determine the location of specific acupuncture points. In China, however, practitioners divide the distance between the wrist and elbow into 12 sections.

The current project was implemented at an informal meeting at a WPRO facility in Beijing in March 2004, with experts from Japan, South Korea and China in attendance. Initial work on standardizing the locations of acupuncture points focused on three basic principles: selection of standard reference works, measurements, and descriptions of the locations of standard points.

Of the 361 classical points officially recognized by the WHO, the researchers discovered 92 points that had different locations. Among the points that had the greatest variance were *xi men* (PC 4; known as *gekimon* in Japanese); *si du* (TE 9; *shitoku* in Japanese); and *qi men* (LR 14; *kimon* in Japanese), a point found along the ribcage which is believed to improve the function of the liver.

Using classical documents found mainly in China, the researchers set about the task of reviewing the existing literature, deliberating the merits of the literature and related reference materials, and reaching an agreement on a specific point's location. At a follow-up meeting in October 2004, the group announced it had agreed on the locations of 77 points.

The locations of the remaining 15 points will continue to be reviewed by the scientists, with a standardized location to be applied to each point by July 2005. Among the points still in dispute are *lao gong* (PC 8; *rokyu* in Japanese), located on the palm, and *tian zhu* (BL 10; *tenchu* in Japanese), located on the nape of the neck. According to the *Asahi Shimbun*, many of the points in question will most likely be located according to the Chinese method of measurement.

Some practitioners have expressed concern that their patients may question the effectiveness of acupuncture, especially if a point used to provide care is no longer in the same location based on the international standard. However, most of the scientists in the working group believe implementing a new standard for point locations will not mean an immediate change in treatment methods, and as Shunko Katori, an instructor at the Gunma Prefectural School for the Visually Impaired, noted, acupuncture instruction has varied from institution to institution to some degree.

"There were always a large number of different schools in Japan, and there were slight differences in location for the same pressure points," Katori explained.

"The unified locations will not be absolute," added Yasuhiro Kawahara, vice chair of the Saitama Prefectural Acupuncture and Moxibustion Association. "But using them as a starting point, research should continue in order to find the most effective location for each."

#### **AAOM, Alliance Comment on New Project**

Because of the effect the acupuncture point project could have on the practice of acupuncture in the United States, *Acupuncture Today* contacted the Acupuncture and Oriental Medicine Alliance and the American Association of Oriental Medicine (AAOM) to comment on the issue. Responses are printed in the order in which they were received.

**Statement from the AOM Alliance** The membership of the Alliance is very diverse and, understandably, members hold many different views on this issue. In general, the Alliance supports any initiative that improves our ability to communicate about acupuncture. Insofar as the WHO initiative accomplishes that, the Alliance can support it. The Alliance is also very determined that diverse traditions and approaches to practice be respected. The Alliance would find it deeply distressing if efforts at standardization resulted in damage or dilution of the richness of our many different perspectives. Finally, the Alliance holds up the NCCAOM and its process for devising a test for point locations as a useful model for such an endeavor.

**Statement from the American Association of Oriental Medicine** The American Association of Oriental Medicine applauds the WHO-fostered group in its use of the classical literature for definition of point location wherever possible. And, the advent of an agreed-upon world standard for point location in no way precludes the unique perspectives of any single tradition, rather, it creates a fair arena for these traditions to occur.

Such new standards would not change the way practitioners practice, rather, they would create a testing system to assure the competency of new practitioners in a way that is fair to the range of traditions. In addition, it provides a common language for the furtherance of research in acupuncture. This will further the spread of acupuncture as a health care system to the nations of the world.

### *References*

1. Honda K. One treatment for all: unified acupuncture method in cards. *Asahi Shimbun*, Jan. 11, 2005. Available at [www.asahi.com/english/nation/TKY20050110118.html](http://www.asahi.com/english/nation/TKY20050110118.html).
2. *A Proposed Standard International Acupuncture Nomenclature: Report of a WHO Scientific Group*. Geneva: World Health Organization, 1991. ISBN # 92-4-154417-1.
3. East Asian neighbours readjusting acupuncture points. Agence France-Presse, Jan. 10, 2005.



Page printed from:

[http://www.acupuncturetoday.com/archives2005/mar/03acupuncturepoints.html?no\\_b=true](http://www.acupuncturetoday.com/archives2005/mar/03acupuncturepoints.html?no_b=true)