Japanese Meridian Therapy - Preserved Tradition of the Five Phases

By Cameron Bishop, MAc, AP

For me, the attraction to Japanese acupuncture started in Japan. During a martial arts class, I was injured and they sent me to an acupuncturist. Because my response to acupuncture was so good, I became fascinated. The acupuncturist befriended me and soon was sharing the great depth of his family’s knowledge of acupuncture, qi and healing. My understanding and my age limited my absorption, but the seed was planted. His ability to do much with few points and no stimulation intrigued me. I wanted to know all about his kind of medicine.

Japanese acupuncture has a long and interesting history. The earliest Chinese writings point to balancing the Five Phases through the use of tonification and sedation techniques on the various points. Buddhist priests brought this new technology to Japan, along with the knowledge of working with the Five Elements through mantras, mudras, rituals and secret rites, transmissions and meditations. The earliest acupuncturists went through years of priest trainings in the Six Elements before they were allowed to work with the phases. Much of this has been kept secret to this day.

The word wu-hsing has been improperly translated as element and, more correctly, is translated as phase. The Five Phases (earth, metal, water, wood and fire) of the planet and seasons are used to treat the body since the body shell is made from the planets’ materials. Five, six and seven element systems are used to treat the spiritual aspects of the person.

Keiraku chiryo (meridian therapy) was introduced in Japan some 1,300 years ago. Some of it was lost with modernization, but a small group of acupuncturists and family traditions in Japan kept variations of it alive. Various professional organizations continue to research, develop, teach and practice their variations. Keiraku chiryo, as an art unto itself, developed over the centuries, but the word itself might have only been used since the 1920s.

One of my loves is Japanese meridian therapy’s (JMT) emphasis on the practical rather than the theoretical. The aim is the regulation of qi in the meridians through proper palpation, precise point location, needling posture, proper needling technique and feedback though change in the hara, pulse, shen, channel qi and symptoms. There is strong emphasis on palpation of the qi of the channels, pulse diagnosis (Five Phase
pulse diagnosis has always been used for acupuncture), hara diagnosis (specialized palpation of the abdomen), listening of the voice and more.

The acupuncturist’s sensing of qi at the point is of primary importance. The anatomical location of the point is the address, while the actual point found through honed palpation abilities is the mailbox. The delivery of the message involves the proper use of both hands, as described in the classics. The oshide (left hand) regulates the qi during the needling while the sashide (right hand holding the needle) supports that work. The most important hand according to the classics is the left hand. The classics say that "chi (qi) must be felt at the point." TCM might interpret this to mean the patient needs to feel the qi at the point, while JMT would interpret this to mean that the acupuncturist must feel the qi at the point. TCM might argue that the needling stimulates the qi, while JMT might argue that needling regulates the qi.

Proper regulation of the qi in JMT often involves proper posture. This involves various elements most of us are familiar with, such as both feet planted on the ground, shoulders relaxed, no tension in the body, breath regulated and mind at ease. Improper posture can lead to poor technique and the inadequate flow of qi.

Good needling involves painless insertion that does not disrupt the rhythm of the pulse, but rather harmonizes it by consolidating the blood to the center. It also regulates the qi which is reflected in the speed, depth and strength of the pulse. The harmonization of qi will manifest in holistic changes of the qi of the abdomen, facial shen, window of the sky points, reduction of knots, sense of well-being, breathing rate/quality and, of course, reduction of symptoms. The whole body will speak of the proper regulation of the qi in the meridians. All of these signs are feedback that our technique is adequate.

Disruptions in the qi or pulse after our needling indicate problems with our technique. If the patients pulse became harder, perhaps our oshide hand was too heavy. If the patient’s pulse became more rapid and floating, we perhaps had tension in our body or picked the wrong point. If the pulse became weak, the abdomen more deficient or the facial color were off, perhaps qi was leaked during the needling. If the symptoms became worse, we might have picked the wrong phase pattern. These are just a few possibilities.

Meridian therapy offers a pragmatic structure to gain a great intimacy of the technique and evaluation of the qi in treatment. It reminds us of the power of the possibilities of acupuncture treatments through the art of palpation, feedback of the qi fields and pulse rhythms.
CASE STUDY (SIMPLIFIED FOR SPACE)

Patient: 26-year-old man.

Main complaint: slight allergies, acute stiff neck, occasional digestive and bowel weakness and unusual irritability.

Clinical findings: His pulse was most deficient in the lung position, slightly deficient in the spleen position, and his liver pulse was slightly excessive. His hara showed weakness in the lung and spleen reflex areas. His pulse qualities were floating, slightly fast and slightly deficient.

Procedure: I applied supplementing technique to Lung 9 and Spleen 3 on the left side using non-inserting technique with a silver needle. His pulse became more consolidated and the speed regulated. He breathed in deeply and reported his nose "opened up." His liver pulse felt normal and I chose not to apply needling to the Liver meridian (control cycle). His UB channel was slightly deficient and I applied supplementing sanshin technique to his calves. I palpated Kikei points (EV) and found SI 3 on the left and UB 62 on the right reactive. I placed zinc and copper kikei pellets on these points. The pulse continued to improve and after a short time, his neck was able to move at full range of motion. His abdomen improved but still reflected weakness in the Ren 9 area. I burned a moxa cone (chinetsukyu technique) on the area. The treatment ended after reviewing his pulse and abdomen again. JMT monitors the pulse constantly. All monitoring showed improvement in pulse, which indicates treatment success.

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