Modernization of Chinese Medicine

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Language – written, spoken, signed, or otherwise is learned as a means to express our individualized perceptions about the world around us. Language is designed to communicate our personal experiences. What problems arise when different languages are used to describe similar experiences? Additionally, how do these issues translate over time? Do cultural beliefs, expressed through language from thousands of years ago, written in a highly ideographic script translate well into our modern day life and experience?

My premise, is that they really do not. Translational symmetry may seemingly occur but it is only one sided. It can seldom be accurately assessed as access to the original writers, their thoughts and perspective can only be viewed from the present. Writers from the past never get the chance to speak in our present. They never get to modernize their thoughts and perspectives in the now.

Yet, we often find great value studying the scholars of the past. Their hard work, industry, application and dedication is often still valuable in our present day. Some works of the past appear timeless in their relevance. These works speak to the human condition of the time they were written, but also transcend time to connect us with our past.

This connection of past and present is likely at the heart of all providers who choose to invest in Chinese Medicine (CM). There is a tangible sense of timelessness in the literature, and in the language used to describe health, wellness, physiology, and life in general. It is a very naturalistic language.

The modernization of CM has very little to do with the tool-set of the practice. Modernization is directly centered on the language used to describe its processes and understandings. This can be seen effectively in the contemporary argument that "dry needling" is not acupuncture. If we tease the politics out of this issue what we are left with is a medical intervention (the insertion of filiform needles into the human body) that is the same no matter what it is called in any language. Yet advocates of dry needling believe that dry needling is not acupuncture due to a lack of understanding on what acupuncture is. This lack of understanding is partly due to their own ignorance, and inadequate training in the intervention itself. It is also due to the continued usage of naturalist terminology in a biomedical landscape that is decidedly not naturalist.
Needle insertion into the human body, no matter what we call the procedure, is a sensory process changing source level physiological signaling mechanics to effectively control and maintain morphological responses in the maintenance of our daily health and wellness. Local experiences at the site of insertion are translated globally throughout the entire organism. It is a serious intervention with profound impact on the human body. When performed by poorly trained providers there is great risk of injury to the public. Currently, licensed acupuncturists receive the most in-depth training in this specialized intervention.

Terminology and the use of specific terms to describe our experiences, perceptions, and beliefs is at the core of many of our medical and health issues. It is also at the center of the acupuncture/dry needling issue. The current, outdated terminology of CM is difficult to relate to without in-depth study. Even with extensive education how many CM providers really understand the terms? By the time we do fully understand the terms, we have often been in practice for many years which provided the clinical practice necessary to make clear connections between classical CM concepts and modern day biomedicine. Once gained, we can move seamlessly between the conceptual terminology and use what is best suited for the audience.

The CM language does need to be modernized. The holistic perspective on which the language is based does not. There is no harm in referring to qi/blood as neuro/vascular. Advocates against modernization of the CM language may argue that the CM terms are broader in context, but maybe our knowledge of the neuro-vascular matrix is insufficient. "Qi is the commander of blood and blood is the mother of qi" is a phrase from the CM foundation that clearly describes neuro-vascular integration. Nerve impulses (Qi) drive circulatory patterning, and circulation (blood), in turn, nourishes nervous system tissues. The CM classics were speaking directly about neuro-vascular patterning and diseases thousands of years ago, they just were using different language to describe it. To see the commonality amongst the different terms is the key but to do this well requires in-depth knowledge of both medical paradigms.

Modernization of the language of CM is of vital importance in our modern times. Modernization will promote better awareness and understanding of the medical paradigm to other healthcare providers as well as to the public. Not only is this process important for existing providers, but it is of great importance for educational institutions to move their curriculum forward and better prepare our students with the skills they need to succeed.
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