Navigating through Covid-19

2020 - Year of the Rat (Zi Branch).

Return: What the ancient kings saw in this was that everything revives when the positive creative energy operates, so does the living potential return to humans when their positive energy becomes manifest. So they closed the gates on the winter solstice, not allowing caravans to go forth and trade, no allowing the ruler to go out and inspect the regions. This was all to emulate the restoration of heaven and earth, nurturing this point of living potential, not letting it be damaged. ¹

A year has already passed since the pandemic struck. We may or may not know more about virus behavior, but we certainly know more about ourselves. Restricted and not allowed to travel and go out, we were given an opportunity to observe our own interiors. Witnessing the beginning of a new cycle, being pushed into or surfing a new reality, having the chance to find *the celestial within the mundane*.

Especially during this year I've been extremely grateful of having the Engaging Vitality tools and framework. Why? Because in the midst of confusing information, restrictions, doubts, contradictions, and a generalized state of fear and anxiety, the palpatory references showed the way out of all mazes, and allowed me to facilitate a way to return to integration.

Orientation has been the key. Keeping in mind that if we listen carefully to the body, it will tell us the way forward. Knowing that the self-healing mechanisms involve all three realms of Shen, Qi and Jing as an integrated whole. In people whose system had already become compartmentalized, whether because of specific pathologies (e.g., WM diagnosed renal, cardiac, pulmonary diseases) drugs (including recreational drugs, or self-prescribed medication such as ibuprofen), or Shen related issues (mostly fear) *the virus* hit harder. To reverse this path, we need to de-compartmentalize the situation, integrate the organism again, and allow the Shen to lead the way in order to restore the proper functioning of Qi and Jing. This is what I call *orientation*.

When we talk about orientation maybe landscapes images come to mind, mountain treks and journeys at the sea, and actually, we can engage treatment the same way as when we go out into these unknown territories. When we're out in the nature, no matter how adventurous the trip, we need to orient to something to navigate our path a mountain peak, the polar star, just some thing that remains constant no matter what. In the case of treatment, this constant to orient to, in my case is facilitating the patient's system to get back into communication with its self-healing mechanisms, the inherent capacity to re-create itself out of the harmonious template ever present, its inherent potency².

If we orient to this underlying reality, no matter how intricate the presentation, we will be able to find ways to open up the gateways of communication. Techniques and points become navigation

¹ The Taoist I-Ching. version of Liu I-Ming, translated by Thomas Cleary. Shambala publications 1986.

² "Inherent potency" here as used in the following passage from Zhuang Zi: "In the cosmic phase of Grand Initiation, there was nothingness: nonexistent and nameless. From here oneness arose: existent yet without distinct forms. Things attained this oneness and came to life—we speak of their inherent potency [virtue]. They still were without distinct individual form, but they each had their allotment [from Tao] and remained close to it—we speak of their original destiny. With continued unfolding, things came forth. As things were completed, they gave rise to ordered structure [principle]—we speak of their form. Their physical form contains spirit, each with its peculiar manifestation—we speak of essential nature. When essential nature is cultivated, it returns to potency; when this is perfect, you are at one with Cosmic Initiation. At one, you are empty; empty, you are great". Zhuang Zi Ch. 12—translated by Livia Kohn

tools, the same way that maps and ships are tools to take us to our destination when embarked on a journey in an unknown environment.

In my clinical practice Engaging Vitality as frame of mind is and has been the lighthouse in this stormy and tormented sea, allowing me to navigate the myriad of symptoms, unexpected and novel events, while always maintaining the right orientation.

We're not out of this stormy sea just yet, but nonetheless I dare to say I'm happy and willing to navigate these waters, the proven effects (in my personal practice) of this orientation keep encouraging me forward.

The unexpected hard fact:

Normally in my practice I would see around 55 patients a week. Aside of very few exceptions, as in the case presented below, I see the patients once a week to once every three weeks depending on their particular situation.

During the strict lockdown starting on march 2020, when only essential activities were allowed, my practice went down to 15-20 patients per week. Those who continued coming did so because they were at-risk patients (mostly respiratory and immune system issues) who felt they were safer continuing with acupuncture treatments than without. After 2-3 weeks of lockdown had gone by, a second group started to come, the ones with psycho-emotional aspects that had begun to get out of hand. As soon as this strict phase was over, most patients came back (along with some new ones), and the practice stabilized at about 65 patients a week.

The reason to give you this numbers is for you to have a framework to the following (striking, in my opinion) statement: In the group of what I would call "regular patients in treatment", **none** contracted COVID 19. In the group of "older patients who had <u>not</u> been in treatment for long time", who decided to resume treatment after the lockdown was over, only 2 of them contracted COVID 19, with minor symptoms and a quick recovery. "New patients" who called me in because they had contracted COVID 19 and were in acute phase, came out from critical phase and returned to their previous state of health.

When I realized this odd situation, I tried to find a common pattern, and came to the conclusion it was not related to social class, kind of work, lifestyle, number of members per family, age, gender, sleeping patterns, or activity level. The common thing among them was acupuncture. The one thing I would dare to say I have done as acupuncturist to support them, was Engaging Vitality [as a way] + (awful lot of) okyu [as specific technique, added to needling].

So, to me this year has been a striking confirmation of:

- Within us humans we have a wonderful system capable of unsuspected adaptation, integration and evolution. Shen-Qi-Jing working as an integrated whole is capable of things our rational mind can't even dare to imagine.
- Listening and working with the natural capacity for health (versus against some specific pathogen) has proven effective even under novel and stressful circumstances.
- Chinese Medicine offers an outstanding set of tools and frame of mind to help thrive, cope and evolve.

Although it is something frequently stated in Chinese medicine, I had the chance to observe first-hand the relationship between Shen and immunity, witnessing Wei Qi as an agent of connection, not only of defense. Probably my idea of what we imply when we talk about immunity got a bit more nuanced and clearly structured, and at the same time it boiled down to one fundamental concept: Tong 通.

Tong as communication between Shen and Wei Qi, the ruler directing wisely so the parts can act swiftly, correctly, and without hesitation.

When there is Tong the entire system is connected, so the natural normal order can override any local disturbances.

Tong as openness, so the radiating capacity of Wei Qi leads the disrupting influence externally and out, instead of encapsulating it and trapping it ever deeper in an attempt to fight and eventually neutralize it.

Tong as communication, connection and openness of Shen itself, realizing the fact that the path the external pathogenic influence had taken to penetrate, was through the spaces in the fabric where the Shen itself had failed to remain. (and be able to reverse that).

Tong as openness, communication and connection of the whole integrated system with the greater system it is part of, realizing the changes in rhythms and influences, and acting accordingly (seen in the need of different sleeping patterns/amount of sleep needed, necessity for quiet spaces to process information, etc.).

Seeing the landscape through a case:

In the following case most of the things I've been able to observe in COVID 19 patients come together. Many of these signs have been present in other patients during these times. Oddly enough, in a less packed and extreme form, I've been observing this same constellation of findings (with this same set of characteristics and some of the transformation patterns) in many patients in my clinic over the last 5 years.

The key points I would like to highlight on this case are:

| General state | Compression (mostly involving Chong) and qi (mostly Liver) stagnation. | |
|------------------------|---|--|
| Shape of Qi | agitation, tension and graininess | |
| Channel listening | a quality of tension and a sensation of heat consuming the fluids in the channel. | |
| Yang Rhythm | Tension in the motions | |
| Fluids | Gummy texture, apparent insufficiency (often as if fluids have been reduced by heat), difficulty in expressing the tide, and even more difficulty in expressing the wave. | |
| Viscera | Liver — motility restricted, feeling of congestion. Kidney — motility and mobility restricted, congestion. This improved more when working with the Shao Yin axis than with working just on the kidneys Gut — congestion and sense of fluid consumption. Lung - motility restricted with tightness and congestion. | |
| Transformation pattern | There's a small pause in between each transformation . Each of these gaps is a huge window for reversing the path, but it requires almost a total shut down of the system (manifested usually as an extreme need to sleep) and inward focused attention. If that necessity is not met, then the pathogenic influence advances one step deeper. | |

In the following case we can see how the treatment morphed from working on the acute situation, to a more complex landscape involving an attempt of the whole system to find integration, and finally the settling into a more straightforward presentation where the underlying fabric was able to hold, so that treatment became supporting a recovery process that was already in progress.

The orientation was always the same: facilitating the system's integration so the self-healing mechanisms could take the lead.

L.P. Female, 59 years old.3

Past history: Liver surgery. Constipation. Hot flashes. Tendency to lung issues, colds easily transform into bronchitis or pneumonia. Stress and a heavy workload.

COVID 19 disease development:

Note: During the course of L.P.'s disease and treatment, her father contracted COVID 19, was hospitalized, and, after about a month of isolation, died without any family members with him. This had a devastating effect on L.P., but she recovered from COVID 19 disease nonetheless.

March 9^{ts} : Her symptoms started with a cough and chest pain, diagnosed as bronchitis by her MD who prescribed Algidol and Salbuterol. The cough increased in severity and on March 12^{th} she also began to have a fever. On March 14^{th} her MD ruled out pneumonia, but the continued presence of rhonchi supported the diagnosis of bronchitis. From March 15^{th} till 17^{th} her fever increased, especially during the afternoon. The cough had improved with Algidol, but this medicine significantly worsened her constipation so it was discontinued. After an online consultation, the MD also discontinued Salbuterol because she was not choking. She was so fatigued March 16^{th} and 17^{th} that she spent both days in bed.

March 17th, afternoon, she had her first acupuncture treatment. While the next day the fever remained, it had begun to decrease steadily, which continued until it disappeared completely after the second acupuncture treatment. She continued to be fatigued but less, started breathing better, the constipation had improved a little, and over all she started to feel better.

| Date | Points Unless specifically stated, the points used are not bilateral; only the active point is selected for needling | Notes Regarding the specific palpatory techniques, such as Shape of Qi, motility, mobility, or Ba Mai morphology, please refer to the glossary at the end of this writingessay. |
|-------------------------|--|--|
| [1] March 17 2020 | St34 (inserted needle) Bl62, Bl64, GB34 Du14 Bl20 | All points are worked with silver teishin, the only insertion is at St34. Overall she feels as if heat had scorched the whole system. Liver motility and mobility are restricted, with the texture of the organ itself tight on the surface. The entire abdomen, especially the large intestine feels full and hot. Lungs feels restricted and congested. Fluids overall are murky, condensed, and as full as a balloon about to burst. Shape of qi generally agitated, stratified, empty. Channels feel like tight tubes. Yang Rhythm is restricted everywhere, and tight in quality. Yang Qiao inherent movement manifests clearly and violently. |
| [2] March 18 | Ren17, Bl62, GB35 inserted needle. Lu10, Lu5, Lu6, Liv7 with silver teishin | Fever is reduced. LL still pulls towards the Lung. Visceral findings similar to day before, but less. Lungs still quite restricted, and fluids get stuck as they pass through them. Lung channel seems to not be clearly defined and have only a short trajectory, so that it does not enter the trunk. Shape of qi slightly less agitated, less stratified. Bottom layer very thick and compressed. |
| [3] March 19 | Ki9, Bl59 inserted needle. GB35, PC6 teishin. Tonification of weak spots in the abdomen area as a whole. | No more fever. Constipation. Still intense fatigue. Fluids feel dry. Shape of qi less agitated, empty. Channels feel less tight, content more fluid, but empty. Yang Rhythm better in general but still restricted at shoulders and chest. In the Ba Mai palpation, both in the Morphology felt in the Fluids as in the Inherent Movement, the Yin Wei and Yang Wei show up. |

³ The notes of this case are scarce, most of them were just a memory aid about specific and outstanding findings, and the points used (that actually explain by themselves the dynamics found, especially the Ba Mai dynamics)

| [4] March 20 | St37, Ren22 Husband will do daily okyu at | Better. No fever. Fluids feel gummy and congested. |
|------------------|---|--|
| [5] | upper back shu points. Ren7, SI3, Bl62 with teishin. | Better but more emotional stress due to deterioration of her |
| March 24 | Various points at the neck region | father's situation. He is hospitalized (with Covid), isolated and not really making progress. Fluids feel more fluid. Shape of qi more coherent. Channels with more definition. Listening points out to the entire spine as if the Du mai was a tight metal bar. |
| [6] March 25 | Yintang inserted needle GB35, SJ3 with teishin St40, Sp9, Sp7, Ki3, Ki1 okyu | Emotional stress. Fear. Constipation. Phlegm in the lungs and intestines. LL around stomach area. |
| [7] March 26 | | Treatment not recorded |
| [8] March 27 | Sp9, Sp1, Sp5 with teishin GB34 okyu Bl15, Bl23 okyu | Emotional stress. Fatigue. Weak pulses Ki, Liv, Lu. Systemic small amplitude of the yang rhythm, fluids still feel damp. |
| [9] March 31 | St39, St37, Ren17 inserted needle Ht7, LI6 teishin GB35, GB38 okyu | Emotional stress |
| [10] April 6 | Ki6 needle Lu5, PC3, Liv13, Ki4 with teishin | Sticky fluids. Ba mai: Yin Qiao and Dai morphology |
| [11] April 15 | Lu5, Ki27 teishin GB35, Sp1, Lu11, Bl64 Okyu Ren17 needle | Emotional stress. Deep sorrow and anguish. LL lung Fluids congested. |
| [12] April 20 | PC4, Yintang, Ht5 needle + (other points not recorded) | Emotional stress. Shape of qi quite unsettled. Fluids get stuck in the upper jiao. |
| [13] April 26 | Sp7, Ren17, Yintang, Bl64 needle Okyu shimian point | Insomnia. Emotional stress. Fluids sticky. Ba mai inherent movement violent in Chong and Yang Qiao |
| [14] May 4 | PC7 gold teishin GB35, Ki9, GB38 needle Sp1, Lu11 okyu | Emotional stress. Anxiety, anguish, etc. Unbearable loss (her father died in hospital, isolated). Mixed pathology Wei Mai in the Morphology and Inherent Movement. |
| [15] May 11 | Ki10, Bl1 Teishin St36, 37, 38 with teishin. Sp8 teishin Lu11 okyu Back shu points okyu | Ki viscera and pulse are both abnormal. Chong mai |
| [16] May 20 | Liv2, Liv7, teishin Bl59, Ren17 needle Sp1, Lu11, SJ5, SI7 okyu Back shu okyu | Emotional stress Liver restricted. |

As you can see, as the patient improved, less notes were taken, sorry about that...!

The listenings that lead to specific points unfortunately didn't make it to the notes. We can see the development of each session by following the sequence of points one by one. Every point selected had a clear QSA signal, and the reason to check that specific channel was mainly related to pulse + fluids + LL + Ba mai morphology and inherent movement + channel listening. Once channel and point had been selected, criteria for dose was based on changes on shape of qi, fluids, yang rhythm while needling, and improvement of LL to be checked afterwards.

Case Analysis from the underlying waters perspective (Ba Mai):

At the first 2 treatments the system is clearly fighting the external pathogenic influence and heat is all over the place. As a way to deal with it, Yang Qiao and Du are struggling and active, Yin Qiao in the background also shows, probably signaling a dysregulation of the Yin and Yang Qiao axis. By the second treatment we see Ren and Chong manifest as well, with the Yang Wei and its *radiating outwards* kind of movement. After this the fever stops, and by the third treatment we can observe a Yin-Yang Wei vessel dynamic going on. The fourth treatment, the next day, shows how the system is now starting rebuild its innermost aspects: Chong, Ren, Yin Wei. With this treatment we finish the first round of daily treatments. We can observe how attending to this acute phase by carefully listening and acting only on what the system clearly required lead to it being sufficiently empowered to deal with the external factors and have the ability to then focus on the internal damage, the aftermath of the war.

During the days she didn't get treatment, her husband did daily okyu on the upper back shu points. This detail, I found out later, might have more importance than I was aware of at the time. Speaking with my colleague Elmar months later, he pointed out a very important aspect during this phase according to his own clinical experience: *Related to Chong and Fluids: after the acute heat phase damaging the fluids, one of the defining features was the development of static blood in the lungs as the body fluids became gluelike. This issue, when not addressed, seems to be one of the main factors as to why people end up in hospital⁴.*

I believe this feature was addressed by the home treatment; I was not aware of its great importance at the time, I just followed the findings. This, in turn, strongly backs my trust in the Engaging Vitality approach, since even when I didn't have the intellectual understanding of the full picture, following the findings lead to a beneficial treatment approach.

The second round of daily treatments (5th to 8th) shows less involvement of the Ba Mai (although the 5th itself is pretty much a Du vessel treatment) a much more ordered landscape and disturbances more discretely distributed. There were no more daily treatments after this.

As emotional stress starts to be the pressing issue, we see the Chong-Yang Wei or Yin Qiao-Dai dynamic build up. The system as a whole attempting to move from its very core outwards.

On the 11th and 14th treatment we see some Ghost points enter the scene; they continue to show up till the end of this sequence of sessions. At this time, prompted by the emotional situation (regarding L.P.'s father) we start to see a different set of players. The activity in the ghost points is something I've come across quite often in patients who (we can't know for sure, but feels like to me) were at the edge of contracting the illness, and although their underlying systems were quite Tong, the emotional and external, social situation of chaos, fear and anxiety was starting to creep in and run down their system (in my opinion, starting to crack the relation between Shen and Wei Qi). In L.P.'s case, they continued to show up till the end of this sequence of sessions.

Overall, we can observe a sort of wave, with a slow buildup of internal order, that was correlated with an improvement of symptoms and the exit from the danger zone.

It is this kind of internal order, equilibrium, Tong, what I take as **orientation**. Orientation, in a nutshell, is *facilitating the tong/connection of the patient with the source qi*. From here we can elaborate that is about the self-healing mechanisms of the organism taking over, with us facilitating their work until the connection is steady and uninterrupted. This leads to a reversal from a pathological to harmonious state. This leads to the next thread of ideas:

⁴ Also related to this, a recent study (April 30th 2021) pointing out to the disease being vascular, not respiratory, supports the idea that the okyu, and addressing the blood stasis, might be of paramount importance when dealing with the disease. You can find the article at https://www.salk.edu/news-release/the-novel-coronavirus-spike-protein-plays-additional-key-role-in-illness/

"We're the people saving the world of what might have been. The world would never know what might have happened. it is the bomb that didn't go off, the danger no one knew it was real. That's the bomb with the real power to change the world."⁵

Speaking with my colleague Gemma, we were happily surprised of having exactly the same experience regarding the absence of COVID 19 disease among our long-term patients. Exchanging ideas and searching for common threads, we found that what was the same, was our **orientation**.

Here in our practice, as probably in most places, we've gone through waves with peaks of *cases + fear + restrictions* and troughs when things were calmer and relaxed; although the orientation was always the same, the findings were different. Let's focus on the Peak times.

Mostly, the **initial findings** included:

| Shape of qi | Generally agitated. Upper layer tense. Grain somewhat coarse and murky. | |
|--------------------------|---|--|
| Yang Rhythm | Tightness in the motion, as if it was trying to move through a compressed environment. | |
| Fluids | Murky. Not much of the tidal movement. | |
| Viscera | Liver, Kidney, Lungs and gut. General feel of the viscera textures: congested, tight, as a balloon too full of water. Lungs as if being scorched. Kidney as trees turned to charcoal after a fire and still hot, and tight. | |
| Channels | Tight edges, congested content. Sensation of fluid condensed by heat. Short trajectories. Or no edges at all, murky content. | |
| Extraordinary Vessels | Luan and Unong Affer minimal infervention, yang Wei | |
| Pulse | Unspecified, odd and disturbing qualities at Kidney, Lung, Heart, Large Intestine, Small Intestine. | |

As the **treatments progressed**, what became more apparent was a need and intent of the whole system to expand and push things outwards (as in the inherent movement of the Yang Wei) but lacking the stamina to do so.

The oddities on the pulse tended to react much better to okyu than to needling.

Having a couple of needles in (mostly addressing Ba Mai points) and doing the rest of the treatment with okyu and some occasional non-insertive needling proved to get the best changes for most of the findings.

For the channels, when their edges where too tight, starting with needling proved best. The change in both the channel and the shape of qi was clear. When edges where absent, okyu proved the best option, and engaged the fluids much faster.

By **half the way through the treatment** most of the times there was a faint sensation of a Yang Wei inherent movement. It took me a while to realize that wasn't a pathological thing but a sort of

⁵ Neil's final comment, at Christopher Nolan's *Tenet*. 2020. Highly recommended movie!

low-grade Dian Hua⁶. Overtime I took this as one important marker of a good treatment. In my mind I picture this finding as healthy Wei Qi pushing outwards and demarcating a clear boundary. I took this as a sign of health and empowerment because the fluids clearly improved, with the tide becoming very fluid and the wave very calm. The fluids became quite clear and the obstructions disappeared.

I find interesting that during those times some ghost points were very active and the QSA spike from them very sharp and strong, mostly Lu11, Sp1, LI11 (which I mostly worked on using okyu, because it really made a change in the channel, in the motility, mobility and texture of the viscera, and the shape of qi), Du16 and PC7. Of course, these points make sense for many other reasons in addition to their being ghost points.

An intriguing feature or a *side effect* of the treatments, when these initial findings over time and in the following visits morphed to a less distinct constellation, was that people started experiencing less fear and a greater sensation of connection (and love, actually). Although the external situation remained more or less the same or worsened, their outlook changed. This change of mindset was clear as was an improvement in the shape of the qi (more coherent, less tight at the surface but more consolidated), the quality of the fluids and the general content of the channels. Compression diminished. Incipient neurosis receded and gave way to realistic and ordered behavior. I take all of these as a sign of the system becoming Tong and the Shen being able to regain its proper place as director and creator of reality, integrated with a greater whole, capable of shifting perspective and transforming itself and whatever external or internal influences or factors affect the organism, in order to settle in a harmonious state. These are signs of the person experiencing Health as harmony, as homeostasis, as *not-suffering*. This is different than taking health as coming from the absence of exchange and activity or as a system of walls protecting oneself from the environment -as we sadly saw promoted and happening during this past year. I see these signs of Tong as taking health not as closing but **as opening through a heightened awareness**

A true reversing of the path. A *Return*.

Glossary of EV terms and techniques used in this writing:

| | Technique or Term | Module or class when it's presented | Brief description |
|---|----------------------|--|--|
| С | Channel Listening | M2 and M3 Fundamentals | Assessing the channels: 1) in relation to a Local Listening (ChL selection), finding the one with the strongest connection to the LL 2) assessing the channel itself, palpating qualities of both the content and structure of the channel |
| D | Dian Hua | Ignition Intermediate Level Class | the whole system radiates from the inside, the quality of Qi is quite clean, and although Qi is pouring outwards incessantly, it is still rooted and coming from the person's midspace |
| F | Fluids | M3 Fundamentals | The Fluid Body refers to both the overall fluidic quality of the body as to all the fluids within it (JinYe, Blood, etc). We can palpate the Fluid Body as a whole ("the bag") or manifesting itself as a tide (Fluid Tide). |
| G | Global Listening | M2 Fundamentals | Global Listening is a technique that allows us to find the least <i>Tong</i> spot in the body in a few seconds. Palpation is done from the top of the head with the patient standing and then again sitting. |

⁶ Chip referred to this as Ignition or Dian Hua, when the whole system radiates from the inside, the quality of Qi is quite clean, and although Qi is pouring outwards incessantly, it is still rooted and comes from the person's midspace.

| | (m. 14.0) | | |
|---|----------------------------------|---|---|
| I | (Ba Mai) Inherent Movement | Ba Mai palpation Intermediate level class | Technique that allows us to palpate the Inherent Movement of the Ba Mai when disturbed. It can be felt either in the patient's fascia or in the practitioner herself as a resonance. |
| L | Local Listening | M1 Fundamentals | This technique allows us to palpate local restrictions in the body where the Qi is not <i>Tong</i> . Combined with other techniques as Global Listening or Yang Rhythm for instance, it gives us an idea of where the main restrictions are in the patient at the present moment. |
| М | Mobility | Visceral Palpation Intermediate Level Class | Mobility refers to the amount of amplitude and ease of movement that a structure, usually a viscera, can stand when actively moved by the practitioner. This palpation technique gives us valuable information about the Blood aspect of the organs. |
| | (Ba Mai) Morphology | M3 Fundamentals. Ba Mai palpation Intermediate Level Class | Within the Fluid Body we can track different layers, all oriented around a midline, that correspond to each of the eight extraordinary vessels. We call this map the Ba Mai morphology, or just the morphology for short. |
| | Motility | Visceral Palpation Intermediate Level Class | Motility refers to the inherent motion of the organs. This kind of palpation requires the practitioner to listen to the organ and tune with the movement, somehow similar to tune in with the motion of the Yang Rhythm, for instance. This palpation technique gives us valuable information about the Qi aspect of the organs. |
| Q | Qi Signal Assessment | M1 Fundamentals | This technique allows us to palpate the activity of the Qi, both in broad areas as the 3 Jiao or the channels, and at discrete locations as acupuncture points or the problem place. We check for a layer about 10cm off the body; it can be felt as heat, pressure, buzz, etc. In areas where the Qi is less Tong, the Qi Signal layer will be lower than normal; in active acupuncture points, the Qi Signal will be felt as a distinct spike. |
| S | Shape of Qi | M1 Fundamentals | Shape of Qi is a technique that allows us to palpate the general state of the Qi. We define its optimal state as being settled, supple, integrated and open (SSIO). It is an excellent tool to track the effect of the intervention; since it is a systemic response, it will tell us right away if what we're doing is acceptable or not for the patient at any given moment. |
| Y | Yang Rhythm | M1 Fundamentals | This technique tells us about the activity and functioning mostly of Yang qi, and its interaction with form. It can give local or systemic information. It can be used while needling to calibrate the rate of absorption and dose. It feels as movement of rhythmic expansion and contraction of the body. |