



The following essay outlining an integrative approach to the use osteopathic palpation in the practice of acupuncture was originally published in the Australian journal of Chinese medicine, *The Lantern*, (v. 5 No. 1, Jan. 2008: 4-11). The ideas presented in that original paper are now part of a more comprehensive system of qi palpation called Engaging Vitality developed by Dan Bensky, Marguerite Dinkins and myself. The Engaging Vitality approach is currently practiced by a growing number of acupuncturists in the United States, Europe and Australia. The vocabulary we use to describe the shape of qi has evolved as more people have adopted this perspective and the present version of this essay reflects those refinements. I have also adapted the content of the paper to better meet the needs of those specifically interested in the Engaging Vitality approach. Since its original publication, Dan Bensky and I have published a number of essays on related topics that more fully develop some of the ideas presented here. I have cited these papers wherever they are relevant. For more on Engaging Vitality see, Bensky and Chace 2014, and please visit [www.Engagingvitality.com](http://www.Engagingvitality.com), and [www.Engagingvitality-Europe.com](http://www.Engagingvitality-Europe.com).

I am not suggesting that we can become better acupuncturists by becoming osteopaths. On the contrary, a fundamental premise of the Engaging Vitality approach is that we can adapt some osteopathic conceptual maps and sensibilities to our own approaches without ever having to concern ourselves with dural restrictions or sphenobasilar lesions. For this reason, I have kept the osteopathic jargon to a bare minimum and have focused instead on some of the most general concepts of palpation that are most easily adapted to acupuncture.<sup>1</sup>

Much of this discussion is framed in the context of a style of acupuncture known as Toyohari. Developed by blind practitioners in Japan about 60 years ago, Toyohari is a form of meridian therapy characterized by the highly developed palpatory sensitivity of its practitioners and its extensive use of contact needling. Because of its emphasis on subtle palpation and the rudimentary nature of its theoretical framework, Toyohari is particularly well suited to the integration of the palpatory sensibilities described here, making it a useful bridge between modalities. I have trained extensively in the Toyohari style and although I do not identify myself as a Toyohari practitioner as such, it has been especially influential for me in providing a model of how a group of like-minded practitioners can develop a common vocabulary of palpatory experience. For a more detailed discussion of Toyohari see: [www.Toyohari.org/](http://www.Toyohari.org/). Nevertheless, in teaching these principles over many years, it has been my experience that the sensibilities presented here relevant to nearly all styles of acupuncture practice.

I would like to thank Dan Bensky, Marguerite Dinkins, Manuel Rodríguez, Rayén Antón, Ferdinand Beck, Bart Wintjes and Felix de Haas for their thoughtful comments in the preparation of the revised version of this paper.

---

<sup>1</sup>. Those interested in a more detailed discussion of cranial osteopathy are referred to Magoun, 1997, and Sills 2001.



# The Shape of Qi

## Enhancing the vocabulary of contact in acupuncture

By Charles Chace

In most styles of acupuncture we tend to describe the goal of treatment in terms of harmonizing or regulating the qi. When our patients ask us what acupuncture is supposed to be doing, we generally tell them something to the effect that we're balancing their qi. We may tonify deficiencies or drain excesses in the service of this goal but our primary operating premise is that our patient's ailments will disappear once their qi is balanced. But how do we really know when we have balanced the qi or had any impact at all?

In the classical literature, balanced, harmonized or regulated qi is most often described in terms of how it improves the quality of the blood, the luster of the skin, the quality of the flesh, or the sparkle in the eyes. This is not surprising in that a defining characteristic of qi is that it is primarily perceived through the things it influences. Indeed, the word qi is sometimes translated as influence.<sup>2</sup> Whether or not we realize we are doing so, we most often talk about the expressions of qi rather than the qi itself. We speak of the sensation of air moving through our lungs, and in the quality of an abdomen, a voice, a pulse. From these signs, we make inferences regarding the state of the qi and the impact that we are having on it.

Pulse diagnosis is among the most important tools in acupuncture practice for assessing health and disease, and in the Toyohari style, the pulse is considered the prime indicator of the state of the qi at any given moment. To be sure, we palpate the abdomen, stroke the channels, listen to the quality of the voice, and ask questions throughout the course of diagnosis and treatment. Yet when we are tracking the subtle changes that occur at every stage of needling, we take the pulse. However immediate the experience of pulse diagnosis may seem, it is worth remembering that most of what we are feeling is not the qi. The best we can say is that we are feeling the expression of the qi *through* the pulse. In diagnostic assessment, it seems that we are always at least one step away from directly contacting the qi. When we feel a weak wrist pulse in the right middle position we may say to ourselves "this person's Spleen qi is very weak", but all we really know for sure is that there is a particularly weak spot on the radial pulse. Everything beyond that is an inference.

Having acknowledged that the pulse, tongue, abdomen, flesh and skin are perhaps indirect, or somewhat abstracted expressions of qi, we are left to wonder if there might be some means of assessing the qi in a more direct way. We might wonder what might even look and feel like? We certainly tend to speak about and interpret the sensations that we feel in our hands when needling as a direct experience of qi. We say that we have obtained the qi, or more generally, that we have felt its arrival. We have the sense that we are tracking changes in the qi from moment to moment. The words that we use to describe these experiences belie a tacit assumption that our experience of qi in this way is somehow more immediate.

Yet the qi does not only arrive at the point beneath the needle. A pulse taker who knows what to look for beyond the mechanics of vascular fluid dynamics will readily feel the arrival of qi. In the Toyohari system, the arrival of qi is experienced as an energetic wave that is distinct from changes in the pulse itself. Toyohari practitioners are carefully trained to track the arrival of qi in this manner and to provide the person who is needling with feedback on the efficacy of his or

---

<sup>2</sup> See, for instance, Unschuld, Paul, *Medicine in China, A History of Ideas*, Berkeley, University of California Press, 1985.

her technique. This is an integral component of the so-called Kozato method of needling practice in the Toyohari style.<sup>3</sup>

Once we stop to think about it, it is obvious that the qi not only arrives at an acupuncture point and in the pulse; in practical terms, it arrives everywhere at once. Regardless of what diagnostic parameter we are attuned to, the pulse, abdomen, skin, or flesh, we typically perceive an almost instantaneous change in those parameters when we have needled effectively. We typically explain this phenomenon by saying that we have effected an overall change in the qi. Is there a means of tracking this overall change as opposed to its expressions in the particulars of the pulse, abdomen etc.?

This paper is an exploration of the premise that the state of a person's qi at any given moment is palpable anywhere on the body and the information we receive in this manner is of clinical relevance. It is also an attempt to develop a consensual vocabulary for these perceptions as a means of refining our own skills and in more effectively communicating with colleagues.

We take it as a matter of principle that qi is pervasive throughout the body. It is therefore rather ironic to consider the lengths to which we go to abstract it into its expressions in the pulse, tongue and abdomen. As a rule we spend most of our formal training in acupuncture school learning to work with these abstractions and very little time learning to directly engage the qi. Still, many of us naturally develop some facility for this kind of assessment simply through years of clinical practice. Yet it is precisely because we are left to stumble upon this on our own that we often lack the capacity to communicate our perceptions in a manner that makes sense to others. Students, especially, are left thinking that what their teachers are describing is just another one of those arcane experiences that maybe they too will have after a few decades of practice. Their problem is not so much that they lack the experience or capacity to feel such things; it is that their teachers so often lack the words to clearly communicate what they are experiencing. What we as acupuncturists lack is a consensual vocabulary of qi: a verbal and conceptual map that allows us to more fully engage the terrain that we traverse every time we contact our patients.

A number of years ago, I participated in a large Kozato style practice session at a yearly meeting of Toyohari practitioners in Tokyo. I found myself crowded around a treatment table with eight or nine blind acupuncturists and a senior instructor. The instructor was taking a patient's pulse and another participant palpating the other pulse. The rest of the participants simply placed a hand somewhere on the patient. The two people on the pulse gave me feedback on my needling technique in a manner consistent with the Kozato method. They informed me of the changes I had produced in the pulse on a moment-to-moment basis. What struck me, however, was that all of those who were simply touching the patient gave precisely the same feedback at exactly the same moment as the pulse takers.

Regardless of how they might have described it themselves, it was evident to me that what these palpators were doing was listening to the qi in the most general way possible. At the time I simultaneously impressed that they were tracking these without recourse to the pulse and yet astounded by their incapacity to describe what they were feeling. Although the Toyohari style had developed a highly refined terminology and conceptual framework for assessing changes in qi as perceived through the pulse, abdomen and skin, it apparently has absolutely no vocabulary for this more immediate assessment of qi, at least none that has been communicated to sighted practitioners in the West.<sup>4</sup> This experience prompted me to articulate for myself the systemic changes that are palpable in the qi as a whole. What follows is in initial step in that direction.

My interest in qi palpation has not been limited to the realm of Chinese medicine. Osteopathic palpatory sensibilities have been deeply influential in the development of my own palpatory awareness. My experience with clinicians in this field far more skilled than myself has convinced me that these disciplines have a

---

<sup>3</sup> The Kozato method is a cornerstone of the Toyohari style of practice. It is a systematised approach to honing one's diagnosis and needle technique that requires at least three people. One person needles, one lies on the table and gives feedback on the quality of the needling, one person tracks the changes elicited by the needling through the radial pulse.

<sup>4</sup> This statement has been confirmed by Steven Birch and Junko Ida, the two most senior teachers of Toyohari in the West

great deal to offer acupuncturists in developing a more fluent vocabulary of qi palpation. For instance, when I refer to the “qi as a whole” I mean the sum total of all different kinds of qi described in Chinese medicine and their expressions in the pulse, tongue, abdomen, channels, spirit in the eyes, etc. From an osteopathic perspective, the qi as a whole also encompasses the state of a person’s nervous system, fluids, physiological functioning and the various tidal flows that are perceptible when contacting a patient. The capacity to assess the qi on these levels adds another dimension to our appreciation of the overall state of a patient’s being.

An essential premise of the biodynamic approach to cranial osteopathy is that for any meaningful change to occur, a patient’s system must reach a point of quiescent self-regulation known as neutral or wholistic shift. Advocates of this approach to cranial osteopathy consider this state of neutral to be quite literally the ground of healing within the body. This perspective on the dynamics of healing has profound ramifications for the practice of acupuncture and I will have more to say about the role of neutral in our appreciation of qi later. For now it is sufficient to say that neutral is a generalized phenomenon perceptible everywhere in the body. As such, it is an excellent benchmark for a system in which qi is balanced. The pathologies themselves may not have resolved, but the proper conditions have been established for their resolution.

A number of my cranial teachers were very adept at conceptually mapping the stages and characteristics of the body’s transition to neutral in the context of teaching students. In studying with them I was struck by how much their descriptions had in common with the pulse vocabulary of Chinese medicine. It slowly dawned upon me that at their roots both disciplines were ultimately attending to the same phenomena. This realization allowed me to deepen and refine my palpatory skills in both realms. In the course of teaching this material it became clear that it is often counterproductive to use osteopathic terminology in adapting these techniques to acupuncture practice. Doing so tends to create a sense of “otherness,” that this is not really about the qi at all, that we are importing a different technique into the medicine. What is important is the overall sensibility or approach to palpation that is characteristic of osteopathy and not the terminology associated with it. When teaching the Engaging Vitality approach, we frame our palpatory sensibilities in Chinese medical terms whenever possible to remind us that these experiences are all just expressions of qi.

With a few notable exceptions, the vocabulary used in this paper is already used in Chinese pulse diagnosis to one extent or another. All I have done is to expand the scope of its application into a realm for which we have little language, despite the fact that this realm is central to the effective practice of acupuncture. Even those concepts that are indeed new for acupuncturists nevertheless describe terrain that should not be entirely foreign.

## The qi shapes the pulse

If we take seriously the premise that that the pulse is a meaningful reflection of the overall state of qi then it stands to reason that the qualities we feel in the pulse should be palpable in the qi as a whole. At very least, we should be able to use the descriptive vocabulary of pulse diagnosis as a template for articulating our overall experience of the qi. The Toyohari style in particular has a highly formalized criterion for the most general attributes of a positive pulse change. Modifying this criterion somewhat to reflect we feel in both the pulse and the qi as a whole, we can say that effective needling should produce four fundamental changes. There should be a palpable **settling, increased suppleness, and integration and opening**, both during and after needling. These attributes are not limited to the pulse but are characteristics of positive changes in the overall qi that are perceptible anywhere on the body. Settling, suppleness, Integration and Openness each have descriptive characteristics of their own, not all of which may be present in every patient. For instance, when the qi settles this is generally but not invariably accompanied by a sense of slowing. In engaging the qi we not only listen, but we enter into a conversation with it. The questions

that we ask of qi help to clarify our palpatory experience. Of course, it is essential to ask such questions in the right way, without judgment (Chace 2006).

## *Settling*

Perhaps the most fundamental thing that qi does as it comes into balance is that it settles. For us, the word settling is both a more general and a more inclusive term, evoking a sense of grounding characterized by a settling or rooting in of the pulse and qi. This grounding is expressed in the buoyancy, depth and speed of the qi, as well as in an overall sense of relaxation.

### GROUNDING

Regardless of how buoyant a the qi and pulse may be, effective needling inevitably elicits some experience of settling or grounding that is perceptible to the person needling and the person taking the pulse, even in patients with deep pulses. The palpator and the patient themselves typically has the sense that the patient is settling into the treatment table. Deep pulses and sunken qi should ultimately move upward towards the middle depth.

### BUOYANCY

We might describe this in terms of the buoyancy of the pulse or qi. Both pulses and qi may be buoyant, sinking, or somewhere in between. Both may seem to float while still feeling rooted to the bone. Conversely may both may feel buoyant and yet unrooted.

### OVERALL DEPTH

Aside from this, we should appreciate the depth at which the qi is the strongest, just as we assess the depth of a pulse's "stomach qi". After all, is it not the overall state of qi in the body that makes a pulse float or sink in the first place? Why shouldn't this quality be palpable in a generalized manner? Another way of describing this is to define at what level the qi feels the most dense.

### SPEED

As pulses improve they generally slow. This may register as palpable decrease in pulse rate two to 10 beats a minute. Sometimes though, the pulse simply feels less rushed after needling without there being an actual change in the rate. Pulses in our culture are more often rapid than they are slow, though we nevertheless expect that effective needling will speed up the pulses of patients with severe bradycardia. As for the speed of the qi, I don't generally experience it as being fast or slow although I do typically get a sense of its overall activity as distinct from its strength.

### RELAXATION

All of the above qualities combine to produce a sense of grounded relaxation. This is perhaps the hallmark experience of settling. The patient may feel as if they were sinking into the treatment table and palpator may experience them as doing precisely that.

In learning to identify the quality and degree of settling it is helpful to ask some very specific questions of the qi.

QUALITY	INQUIRY
SETTLING	How buoyant is the qi?
	Is the Qi grounded?
	What is the overall sense of depth, its region of greatest density, its stomach qi?
	How fast or slow does it feel?
	What is its overall Sense of ease and relaxation?

## *Suppleness*

This relaxation does not imply a loss of form or structure. The pulse should simply become more supple in that hard, wiry or tense pulses should soften, and yet soft and scattered pulses should also become better defined. The radial artery becomes lithe. When experienced in the qi as a whole, this quality of suppleness feels wonderfully fluid while still conveying a sense of structure and integration.

QUALITY	INQUIRY
SUPPLENESS	How "tight" does the qi feel; is it too bounded?
	Does the qi have borders at all; is it unbounded?
	Does it have a quality of fluidity? This may or may not be experienced as flow.
	What is its overall sense of ease?

## *Integration*

In terms of pulse diagnosis the quality of integration can be seen as a subcategory of the others. The pulse as a whole becomes more coherent, and better organized. This is undeniably the most subtle of the qualities discussed thus far but it nevertheless has some very tangible expressions. In the Toyohari style, this sense of integration is often referred to as consolidation. It is not enough for a pulse to become stronger; its strength should be contained within well-defined boundaries without feeling hard or constrained.

When experienced in the qi, the quality of integration is much more easily distinguished as a distinct characteristic of its own. The qi is often perceived as being segmented or stratified. With effective treatment, we experience a homogenization and an increased coherence within the qi. Integration is, in essence, our fundamental concern when assessing qi as a whole and the rest of this discussion should be understood in the context of this quality.

## STRATIFICATION

Direct palpation of the qi can often give us a clearer sense of the overall stratification and integration of the qi. This is especially useful when orienting to the fluidic aspects of the body. Sometimes a pulse that appears to be very buoyant will actually be the strongest with deep pressure. These distinctions come into sharp relief when directly palpating the qi. We look to the strength of the pulse to tell us something about the vitality of the qi, and this information is also readily expressed in the qi as a whole

QUALITY	INQUIRES
INTEGRATION	Is the qi segmented or stratified?
	Does the qi feel the same in the flesh as it does at the bone?
	What is the overall sense of depth, its region of greatest density, its stomach qi?
	Does the qi hang together?

## Opening

A fundamental criterion for nearly all qi-based approaches to acupuncture is that the qi flows freely. It would be more accurate to say that qi is open (*tong* 通). Pulses that for one reason or another are not open may be wiry (*xian* 弦), tight (*jin* 緊) or confined (*lao* 牢), to name a few, and these qualities are readily palpable in the system as a whole (see Chace and Bensky, 2016 XXXX). An aspect of the concept of openness is that in some circumstances there may be an accompanying sense of flow.

QUALITY	INQUIRIES
OPENING	Does it have an overall sense of ease?
	Again, does the qi feel tight or unbounded ?
	Is the qi in communication with the tissue?

## SSIO

The four qualities of settling, becoming supple, integrating and opening (SSIO) are the cornerstones of the palpatory experience of balanced qi and essential hallmarks of the osteopathic experience of neutral. Though not meant to be comprehensive, any definition of balanced qi must include them. The presence or absence of SSIO is a criterion for beginning to articulate the state of qi in the body. It is evident that all of these factors depend upon one another and must present together for an optimal change in the pulse and qi. Our fundamental premise is that any therapeutically effective intervention on the qi will influence the pulse in the manner just described. This is not so much a characteristic of the radial pulse as it is a characteristic of the qi as it is expressed throughout the body. As such, it is indeed perceptible anywhere

in the body. Moreover, nearly everything that can be perceived in the pulse can be felt in the qi anywhere in the body.

## *Unfiltered perception*

To take this idea a step further, although some things are easier to feel in the pulse, many other things are often easier to feel in the qi. Some of these things are immediately relevant to Toyohari practice. For instance, one of the pivotal aspects of an effective *ho* (chin. *bu* 補, tonification) technique in this style of acupuncture is knowing when to remove the needle, which should occur just before the arrival of qi completely peaks. As mentioned above, the perception of this “qi wave” is not something that is fundamentally vascular in nature and this distinction is often difficult for beginning practitioners to distinguish. If the *ho* technique has been applied properly, the pulse has already softened, slowed, become more supple and integrated prior to the moment one removes the needle.

One’s sense of the ebb and flow of qi in the pulse is a qi phenomenon that is expressed *through* the pulse but is in actuality a generalized effect perceptible anywhere in the body. Beginning students of Toyohari spend a great deal of time trying to feel this wave of qi *in* the pulse when it is in fact something that is happening *through* the pulse. We must filter it out from all the other gross physiological input that we are feeling from the modulations in the flow of blood through the radial artery. It has been my experience that when properly attuned, students often find it easier to feel this characteristic wave in the qi with a hand placed anywhere on the body rather than looking for it in the radial pulse.

This more generalized palpatory awareness of qi has the potential for greatly enhancing our appreciation of the overall state of an individual’s health. It informs our understanding in ways that go far beyond our assessment of a patient’s pulse, abdomen, tongue, etc.

In pulse diagnosis we tend to compartmentalize our experience of the pulse. For instance, we rarely say that a pulse is both a floating (浮 *fu*) and a prison (牢 *lao*) pulse, yet we routinely describe pulses as wiry and floating on the surface and soft, squishy and empty upon deeper palpation. Because our perception of the pulse is so intimately tied with how firmly we are pressing, we tend to focus on one characteristic or another. When palpating the qi, however, it is much easier to feel a subject’s qi all at once in its entirety. We may indeed experience the qi as light and floating on top, and strong and hard down deep with not much activity in between. Because it is so much easier to appreciate all of these layers at once, we can more clearly assess the qi as a whole. The range of information that becomes available to us is highly nuanced, seemingly endless, and well beyond the scope of this paper. For now, however, we will focus on those phenomena that occur both in the qi and the pulse, and that lend themselves to description in terms more familiar to pulse diagnosticians. Still, even in its most rudimentary expression the global quality of the information gained from qi palpation both informs and complements our other diagnostic tools.

## *The Right Touch*

Before discussing the details of a systemic experience of qi, it is worth defining the manner in which it must be engaged. In conversing with the qi as a whole it is necessary to attend to more than just the lightness of our touch and we must cultivate a somewhat different set of palpatory skills. Much of this terrain has been mapped in the field of cranial osteopathy. There are three aspects to effective contact. First, the contact must have the right pressure or firmness. It may be lighter or heavier depending on the patient and the practitioner, but it must feel comfortable to the patient. We cannot be too heavy-handed in our touch, but neither can we be too ethereal. In and of itself, a very light touch often fails to confer enough of a presence for the qi to talk to us very deeply and its furtiveness can leave patients with the sense that the practitioner is not really there. Next, our touch must be soft, water-like and most of all, receptive.



Our hands must soften and melt to receive the qi. The final and perhaps most evasive aspect of contact is that we must find the right level of presence that will encourage the qi to speak to us.

Finally, we must *show up* for the qi in a way that is neither intimidating nor aloof. One of the simplest and most difficult things that we can do as humans is to be present. Some master acupuncturists do indeed have a very light touch, but what makes their contact remarkable, soothing and therapeutic is the sense of compassionate presence their touch conveys to the patient. We must make contact in the same way that a mother cradles her child, simply holding, letting the qi know that we are present, and appreciative, but without judgment, questing, or inquiry (Chace 2006). If we approach the qi with some preconceived notion of how lightly or firmly we need to touch the body to get the information we are looking for, then we are not really listening. The qi has its own agenda for contact.

## *No agenda*

In Chinese medicine in general and Toyohari in particular, we are perpetually asking and analyzing. In the Toyohari system we have only four diagnostic possibilities for the primary *sho* or pattern, and the secondary pattern is typically even more limited than that. We are forced to cram our perceptual reality in an almost absurdly narrow set of boxes. This requires a fair amount of diagnostic analysis. Part of the beauty of this system, however, is that within this almost ludicrously simple model we then have a remarkable degree of freedom to work directly with the qi. But we cannot let ourselves become hamstrung by the model, and when we draw our attention to the qi as a whole we must at least initially leave our diagnostic agenda at the door and just listen to what it has to say. Only after we have fully appreciated the situation can we then place the information we have gained in the context of whatever treatment style we are working with.

## *Varieties of palpatory experience*

Much of the highly nuanced language of pulse diagnosis can be readily adapted to the palpation of qi. For instance, one of the easiest pulses for a beginner to feel is a floating pulse. Floating or buoyant pulses are very common in people who are stressed out. It comes as no surprise then that the qi of people who are stressed also tends to float. By this I mean that we experience their qi as being closer to the surface of their body.<sup>5</sup> In such individuals, it may also be difficult to feel their qi down “close to the bone”; it is somehow unrooted in the same way that their pulses and their very being can be.

Regardless of whether we are supplementing or draining, pulses generally become slower and suppler when we have needled effectively, and this is accompanied by an overall sense of settling that is palpable even in very deep pulses. The same is true of the qi. The settling I am referring to here does not mean that the qi is collapsing and no longer able to hold itself up. This is the settling of qi back to a state of stillness and clarity like the clearing of sediment in a stream. It is the ground in which all of the other positive changes occur and its full expression is described in cranial osteopathy as “neutral” or “holistic shift” wherein all the tissues and physiological functions of the body both settle and homogenize. The tissues reach a state of harmonic resonance such that distinctions between them become meaningless. The salient characteristic of neutral is an ever-deepening dynamic stillness. Everything becomes very integrated, undifferentiated, absolutely quiet, and yet vibrantly alive. It is from this place that the inherent intelligence of the self-regulating mechanisms of the body take over and do whatever needs to be done.

---

<sup>5</sup> Of course, seasonal factors must also be taken into account. For instance, we expect the qi to be more superficial in the summer and deeper in the winter.

This is as good a definition of an effective root (*ben* 本) treatment as one could ask for and acupuncture can be a powerful tool in facilitating such a holistic shift. From a Toyohari perspective, every needle, every touch, should improve the pulse; from my perspective it should also nudge the patient further into neutral. The settling is felt on all levels, and it is not surprising that the patients themselves typically feel as if they are melting into the treatment table.

When needling, if we do not perceive this settling and homogenization in the qi, we almost certainly will not feel it in the pulse. But when all of the body's tissues, fluids, flows and functions begin to speak to us in a single coherent voice, it will tell us what it needs if we know how to listen. The sense of systemic integration that is perceptible in the qi when simply touching the body informs and enriches the relatively mechanical experience of a supple, relaxed, pulse that we define as perfectly balanced.

## *You Say tomato...*

The pulse and the qi can tell us similar things in different ways. For instance, when locating points in practice sessions, even relatively experienced practitioners will occasionally run right over them before the evaluator on the pulse can tell them they have found the best point. The pulse responds to proper point location in an almost binary manner. The location is either right or it isn't. By contrast, the sense of sinking and settling that expresses through the qi tends to come on a little more gradually, letting us know when the optimal point is coming up, so that we don't just roll on past. The phenomenon is true for both the point locator and the evaluator.

## *Grain*

The quality of activity also conveys a sense of coarseness or refinement, a grain. It helps me to think of the qi as having a quality of effervescence, like the bubbles in soda water or champagne. These bubbles might be large and turbulent or fine little pinpricks. They may feel agitated or languid. I think that the image of bubbles is also apt because bubbles are essentially little packets of empty space moving through fluid. This image puts us in touch with both the fluid qualities of qi and its essential stillness. So it can be helpful to define the grain of the qi's effervescence.

Of course, we may feel other things as well. We may feel the coursing of fluids and tides, and many other things that we cannot even name, but the four criteria just described are our gateway to our appreciation of the qi. It is essential to remember, though, we are not diagnosing, merely describing.

The next step after gaining an impression of the qi in this way is to compare it with our pulse findings. Are they entirely same? If not, what aspects differ? In most cases, you will find a substantial congruity between the pulse and the qi, but if they were invariably the same then it would be redundant to listen pulse may each tell us something different about a patient's condition, so too may the qi. These differences will typically become more congruent over the course of treatment, ultimately resolving as the system becomes more fully integrated.

## *Lag time*

The utility of listening to the qi lies in how it enriches information gained by other diagnostic methods. The presentation of the pulse and the qi when people have been sick with a cold for a few days is a simple and vivid example of this principle. The patient's pulse may still be floating and his symptoms may suggest that the pathogen is still in the exterior. By contrast, one may experience the qi in the interior, or one may

feel it on the surface but accompanied by an odd sensation of collapse, like the first flakes of fish food slowly beginning to sink to the bottom of the tank. In these cases, the sinking of the qi presages the movement of the pathogen into the qi aspect, deeper into the system. It just has not yet appeared in the pulse. This is useful information for both acupuncturists and herbalists. Particularly in the absence of other unambiguous diagnostic indicators, it can be a pivotal factor in deciding on what level to focus one's therapy.

We have posited that the qi shapes the pulse and we therefore expect changes to appear in the qi first. Sometimes the opposite is true and we perceive change first in the pulse. Once we do feel something in the qi, however, it may contain some other bit of information that is not yet being communicated through the pulse. It is as if that at any given moment, some kinds of information are transmitted through the qi and at others through the pulse. A dance of information takes place between them.

Then again, some details are just easier to feel in the pulse. The qi may enhance our appreciation of the big picture, but the pulse may still be the means by which we decide precisely where to put the needle. The pulse can tell us that the hardness that we feel in the surface of the qi is focused in the Small Intestine. We can see how the problem in the Small Intestine channel creates a resonance that is palpable throughout the body. The two tools complement each other.<sup>6</sup>

Some practitioners are undoubtedly capable of palpating currents of qi far deeper and more subtle than I have described here but the concepts I have presented comprise the fundamentals of all levels of palpatory awareness. Regardless of how deeply one may be able to plumb the depths of the qi, any therapeutic change will be characterized by an experience of settling, supple-ing, integration and opening on all levels. Whatever qualities of buoyancy, stratification, or agitation we may have begun with will have homogenized into a sense of coherence that ultimately facilitates a dynamic stillness within the patient. Whichever style of acupuncture we may use, this is the definition of a root treatment.

There are many ways to conceptualize root treatments. I like to think of them as establishing the optimal conditions for whatever will happen next. Root treatments are our attempt to make use of an existing situation, a propensity or momentum (*shi* 勢), and to subtly give it a nudge in the right direction. The more skillful we are at this, the less it seems that we have actually intervened at all (Chace and Rodriguez 2016). Things follow a spontaneous course. The branch treatment is effortless, or we simply allow the innate intelligence of the body to sort itself out. Toyohari is a masterful expression of this minimalist approach to ordering the qi.

## *Getting out of the way*

Once we indeed have the qi heading in the right direction, the most effective thing that we can do may be to just get out of the way. In the end, the patient's body is infinitely smarter than we are and at this point our challenge is not so much to lead the qi as to follow it. We can shepherd a system toward neutral with every touch or stroke, every contact. Yet, if we persist in attending to minutiae in the pulse, we can actually impede the qi's progress toward its complete expression of coherence and dynamic stillness.

Listening to the qi can be a helpful tool in avoiding this pitfall, particularly in sensitive individuals. It is not uncommon to find that although subtle, and sometimes not so subtle, imperfections remain in the pulse, the qi itself has become well integrated, coherent and still. This completeness may not yet have expressed in the pulse and indeed in some patients it may never. In such cases, I trust the qi. I would rather close with a good, if flawed, pulse change and a sense of coherent stillness in the qi, than with a perfect pulse and the nagging suspicion that I may have overworked the qi. Some sense of irritation or agitation often appears in the qi before it appears in the pulse and it typically begins to float. By the time such changes

---

<sup>6</sup> Though beyond the scope of this paper, it is worth noting that skilled osteopaths routinely identify visceral restrictions simply by touching the body. In this example, the qi could in principle be every bit as informative as the pulse in identifying a Small Intestine problem.

appear in the pulse it may be too late. Attending to this can save us from our impulse to do that one last needle that confounds all the masterful work we have done up until that point.

## *What's the Buzz?*

When people locate acupuncture points on me in Kozato practice, I often feel that some points are particularly buzzy or active. I used to identify these as the most "alive" or available points, the ones that we should pick for needling, but pulse takers would often find that some other point produced a superior change in the pulse. It took me a long time to realize that I was focusing on a sensory perception that reflected only part of the picture. I now find that that my experience of settling and supple-ing is a far more reliable indicator of positive changes as expressed through the pulse than the more superficial sense of qi activation alone.

The same principle holds true when actually needling. The sense of a surge of qi building, and peaking as we needle is really just a partial description, a yang expression that has a yin counterpart in this sense of settling. It is not that we need only focus on the sense of settling, we must attend to both. Once again, such buzzing is not a localized phenomena. Palpators very commonly experience some buzzing or fizzing in their patients in the initial stages of settling. This not so much an expression of the arrival of qi as it is an 'off-gassing" phenomena. The system is simply letting go of pent up nervous energy much as one may experience little twitches just as one falls off to sleep.

## *Into the Abyss*

There are many ways in which this principle of attending to both the yin and yang aspects of qi expression plays out when needling. For instance, when needling in the Toyohari style, one's *oshide* may be too heavy, making the pulse hard, or diffuse. Meridian therapists generally define the *oshide* as the ring made by the thumb and index fingers that holds the needle against the skin. In actuality, the *oshide* is the entire hand that is connected to that ring. This is a significant distinction because we appreciate the qi not just through the needle or through our fingers, but through the entirety of our hand. Of course, our ultimate concern is not with the pulse at all. The pulse is merely the vascular expression of a much more generalized resonance in the qi. A heavy *oshide* tends to express itself in the body as a whole by compromising the qi's natural tendency to ground and settle and generally makes it float back up. Sometimes the qi seems to somehow congeal, becoming sluggish or more viscous. These qualities are not represented in the qi *wave*; they are experienced in the level of perception that is deeper than that.

Just as we look for the pulse to settle, slow and become suppler in a particular way, the qi too, must settle in a very specific manner. In Toyohari, if one's *oshide* is too loose or otherwise imperfect during needling, the pulse will lose its boundaries or structure even though it may have slowed and settled. We say that we have "leaked qi." A sloppy *oshide* also tends to produce a unique sensation within the qi. Although it still sinks, the qi can feel as if it is plummeting into an abyss. The phenomena is not limited to the pulse but is palpable throughout the body. Our experience of the qi as a whole gives us a clear sense that it lacks a container. Like an infant that is more at ease when swaddled, the qi requires some structure that helps it to most fully define itself.

Once we are able to clearly identify the presence or absence of structure and integration that occurs in the qi beneath our fingers, we are no longer so dependent on feedback from the pulse. We know from moment to moment how well we are maintaining a container for the qi and we can adjust our technique accordingly. More fundamental than any preconceived notions regarding the proper way to needle, is our ongoing attention to what the qi is doing. A light *oshide* is useless if it fails to improve the *qi*. Conversely, in some instances a firm or loose *oshide* may well produce a better result. It is our job to figure this out.

## Conclusion

There are lots of ways of working with qi and many of us do so in ways that we cannot articulate. Although each of us may appreciate the qualities of qi in slightly different ways, we all have fundamentally the same sensory apparatus. It is therefore reasonable to expect that we should be able to describe our experience to one another. The approach presented here is a step toward developing a consensual vocabulary for qi palpation that both enhances clinical efficacy and facilitates communication among colleagues. While I believe that the qualities of settling, becoming supple, integrating, and opening are essential to describing qi in acupuncture, they are merely the foundation of a much broader scope of the palpatory experience of qi. They provide an introductory framework for articulating qi that has proven helpful for those who have taken the time to learn it.

### Works Cited.

- Bensky D., Chace C. (2014), **Engaging Vitality, An approach to more Effective Engagement with Qi**, The Lantern, V.11 No. Jan (2014) 12-17.
- Chace C. and Bensky D. (2016), **Opening to the Source, the Role of Tong in the Engagement of Qi**. *Forthcoming*
- Chace. C and Rodriguez. M. (2016), **Efficacy Born of Disposition (Shi 勢) A Broad Perspective on Treatment Strategy in Acupuncture Therapy**, *Forthcoming*
- Chace, C., and Bensky, D. (2014)b, **An axis of efficacy, in Restoring order in Health and Chinese Medicine**, Birch, S. Cabrer, M, Rodríguez, M. (Ed.), La Liebre de Marzo, Barcelona.
- Chace, C. (2013) **"The Pivot of Nothingness,"** The Lantern: v. 10, No. 1, Jan.(2013), 23-31.
- Chace C. (2006) **"On greeting a friend,"** The Lantern, v. 3. No.3, Sept.(2014), 4-7.
- Fukushima, K. (1993), **Meridian Therapy**. Tokyo: Toyo Hari Medical Association.
- Magoun, H. (1997), **Osteopathy In The Cranial Field**. Denver: SCTF.
- Sills, F. (2001) **Craniosacral Biodynamics**, Berkeley, North Atlantic Books.
- Unschuld, P.U. (1990) **Forgotten Traditions of Ancient Chinese Medicine**. Brookline, Paradigm Publications.



Charles Chace has been a student of chinese medicine and its literature for over 30 years. He graduated from the New England school of acupuncture in 1984.

He is the author and translator of a variety of books and maintains a clinic in Boulder, Colorado.