

## *Foreword*

I became interested in Traditional Japanese Medicine in 1966, which was around the time when Kampo, acupuncture, and moxibustion were regaining popularity in Japan. During that time the Meridian Therapy association was already becoming active and well known. Practitioners who were interested in Traditional Medicine were attending Meridian Therapy summer school, which was held in the Atami area and organised by the Meridian Therapy Association. These practitioners, who gained knowledge by attending these seminars, started to develop their own theories and form local study groups. After this period, Traditional Chinese Medicine was also introduced to Japanese society. As a result, the number of practitioners who practiced TCM increased in Japan.

During that time Kampo was mainly practiced by doctors and pharmacists. These doctors mainly used abdominal diagnosis to decide the syndrome pattern, while the pharmacists used questioning diagnosis to decide the syndrome pattern.

I attended many seminars organised by the Meridian Therapy Association, doctors, and other practitioners, but I always questioned their theories. For example, practitioners who followed Meridian Therapy mainly used pulse diagnosis to observe the deficiency and excess of the meridians, and their main focus of treatment was to balance the meridians using tonification and dispersion. But this theory was missing an understanding of the physiology, aetiology, and pathology of the Zang Fu organs and meridians.

Generally people who practice TCM have a very good understanding of aetiology and pathology; however, their selection of acupuncture points for treatments is very

poor as they mainly focus on the indication of these acupoints instead of understanding them as a part of the meridian system.

Especially in the past, doctors who mainly used Kampo utilised abdominal diagnosis to decide the herbal formula, but they were not concerned about why these abdominal patterns appeared in certain syndromes. For example, they understood which formulas to use to treat the abdominal pattern called Xiong Xie Ku Man [胸脇苦滿], known as "suffering from fullness of chest and ribs" but they didn't really consider why this abdominal pattern appeared. The same thing can be said for pharmacists who use herbal medicine to treat patients. They tend to question without considering the aetiology and pathology; therefore, they tend to misdiagnose the syndrome pattern.

What has caused the theory of Traditional Medicine to become twisted like this? I thought that the true intention of Traditional Medicine would not be passed on to the next generation due to these misunderstood theoretical concepts. I believed that in order to correct this situation, I needed to repeatedly read the classics, such as the Su Wen [素問], Ling Shu [靈樞], Nan Jing [難經], Shang Han Lun [傷寒論], Jing Gui Yao Lue [金匱要略], and Shen Nong Ben Cao Jing [神農本草經] in order to summarise the basic theories (such as the theory of Yin and Yang and the Five Phases), physiology, aetiology, pathology, symptomatology, diagnosis, and treatment methods. This is the reason I have decided to write this textbook.

If you read the classics using this textbook as a guide, you will realise that herbal medicine, Meridian Therapy, and TCM are all the same and that their theories are coming from the same sources. But for those that do not agree with this, I would like to give you another example here.

Practitioners of Meridian Therapy and practitioners of TCM tend to have some crucial misunderstandings. They do not realise that the functions of the meridians and the functions of the Zang Fu organs are opposite. To explain this another way, these practitioners have difficulty combining the theory of the meridian functions with the theory of the organ functions. The practitioners of Meridian Therapy tend to focus on the functions of the meridians, and practitioners of TCM tend to focus on the indications of the acupuncture points.

For example, the Liver stores the Blood, and the Liver becomes active in spring. The Liver also triggers the generative function by using the nature of Blood. In TCM, this function is called Shu Xie [疏泄/flowing and generating]. On the other hand,

the Liver meridian has an astringing function, which can be classified as the function of Yin nature. The Blood is collected into the Liver by this astringing function of the Liver meridian. The Kidney meridian also has a cooling and firming function, so it is appropriate to say that the Kidney meridian functions as Yin nature as well.

In another example, the Tai Yin meridian (Spleen meridian and Lung meridian) has a radiating function, but the Spleen organ holds and wraps the Blood, and the Lung organs astringe.

This is a simple explanation of the relationship between the Zang organs and the meridians. The functions of the Zang organs and the functions of the meridians are completely opposite. This is the reason why practitioners who do not realise these important theories by reading the classics cannot explain parts of the theory or treatment protocol very well. As a result, some practitioners say that “applying tonification or dispersion can cure disease,” and some practitioners are very good at analysing pathology and aetiology, but they select acupuncture points by following the indication of the points.

I would like to talk about one more thing.

What is the role of a therapist?

I believe that the role of a therapist is to treat patients who become connected to our lives through fate and to eliminate their suffering. If your intention matches what I believe, we should have a flexible mind and we should also stop being judgmental.

Takashi Furue, Momoko Hashimoto, Andrea Claypoole, and Audrey De Jager, who are a part of the Traditional Medicine study group in Australia, translated and edited this textbook. I wish for the people who become connected to me through fate, or people who are interested in studying this field of medicine, to read this book. If you feel that something is special about this book, I would like you to use it to increase your knowledge and skills. One day or one year is not enough to understand the whole of Traditional Medicine, especially the practical aspect of Traditional Medicine. Your skills will develop without limit as you practice hard. I wish you the best of luck.

From miles away in Japan  
December 2014  
**Masakazu Ikeda**



## *Translator's Introduction*

The Classical acupuncture texts are written in a style called the spring autumn method. Texts that are written in this style cannot be understood by anyone. Even for people who have been studying Traditional Medicine, it can take a very long time, or even their whole lifetime, to understand the true meaning of the classical texts. Therefore, it is thought that it is too difficult to apply the theories of the classics to clinical practice.

Ikeda sensei is a master class acupuncturist with a great understanding of Classical Medicine, and he applies its theories to treat patients every day. In this textbook, Ikeda sensei refers to the original texts of the classics to explain the fundamental theories of Traditional Medicine.

I believe the classics are like a massive treasure box, which can provide us with unlimited information. However, as they are very difficult to read and understand, some people don't know where to start. I believe this textbook will give you an idea of how to take the first steps to read and learn from the classics. I also hope that this will encourage you to start reading the original classical texts.

Another thing that I would like to mention is that some terminologies in the classics can have multiple meanings. For example, the term 'lack of urination' can mean less urine volume, poor urine flow, dysuria, or painful urination. We didn't specify the meaning of these terminologies on purpose because by doing so, it could destroy the effect of the spring autumn expression, which could limit the possibility of the classics. So when reading the classics, it is important to approach them with a flexible mind. This will allow you to respond to any type of illness you may encounter

in practice. This is why it is said that reading the classics can develop your intuition, which will be beneficial for all practitioners of Traditional Medicine.

I hope that this book will allow you to make a connection between the classics and clinical practice.

**Takashi Furue and the editing team**

# 1 The Foundation of Traditional Medicine

The fundamental theories are very important to understanding the Traditional Medicine system. These fundamental theories include the theory of Yin, Yang, deficiency, excess, the Five Phases, Qi, Blood, Nutritive, Defensive, Jin Ye, Zhong Qi (Pectoral Qi), and the Triple Heater. However, some practitioners assume that these theories of Yin, Yang and the Five Phases are just superstition without any clinical use. Are they really just superstition with no benefit to the treatment of patients? Traditional Medicine follows syndrome patterns in the treatment of patients, which include pathology, treatment methods, and prognosis. For example, if a patient has a headache, the practitioner must find the cause of the headache, which meridian is involved, and how the meridians are causing the headache by using diagnostic tools, such as pulse diagnosis and abdominal diagnosis. It is important to select the most effective points and treatment methods by carefully observing the condition of the patient. It is also important to make a prognosis by considering the patient's constitution and pathology. This is the foundation of the treatment principles based on the syndrome patterns.

The theory and methods of modern medicine, such as measuring blood pressure and blood oxygen levels, are not applied in Traditional Medicine. This is because we use needles and moxibustion in treatment and not western medications. It should be common sense to not mix these theories together; however, I don't understand why some practitioners apply modern medicine theory to acupuncture treatments.

I will first describe the syndrome patterns. If for example a patient has a headache, we should inquire about the cause of the headache. If the headache was caused by overwork, which has led to stiff shoulders, we can assume that this patient's Blood has been excessively consumed by labour, leading their body into a Liver deficiency pattern. If a patient has a fever, it can be caused by an external pathogenic factor; therefore, we can guess that this condition is due to Lung deficiency with stagnation of heat in a Yang meridian, causing an excess state. Secondly, we have to confirm the syndrome pattern by utilising different diagnostic tools, such as pulse diagnosis and abdominal diagnosis. If the pulses on the left bar position and left cubit position are floating and big, this obviously indicates Liver deficiency with Blood deficiency. This pulse pattern also tells us that there is a deficiency of Jin Ye within the Blood, generating empty heat and affecting the Gallbladder meridian. To treat this condition, KID10 and LIV8 should be tonified, and dispersive or shunting methods can be applied on the Gallbladder meridian. As this condition is caused by Liver deficiency with empty heat, needles should be inserted slightly deeper, and treatment methods such as heat perception moxibustion should be applied on the Gallbladder meridian of the shoulders. When making a prognosis, if this patient has Liver deficiency constitution, the symptoms will be easily cured, but if this patient has a Lung deficiency constitution, the symptoms may take longer to cure. Treatments that are based on the syndrome pattern require a good understanding of the patient's pathology in order to apply a sound treatment.

I must repeat myself in order to emphasise the importance of using Traditional Medicine theory when treating patients with needles and moxibustion. I wrote this textbook because I want everyone to have the ability to treat patients using Classical Medicine theory. To be able to apply treatment based on Traditional Medicine, it is important to learn about physiology, pathology, symptomology, aetiology, diagnosis, tonification, and dispersion. To understand these theories, it is also essential to have a clear understanding of fundamental theories such as Yin, Yang, deficiency, and excess.

I think that practitioners who don't try to understand the pathology of a disease are still applying true Classical Medicine if they apply a Liver deficiency treatment because the pulses on the left bar and left cubit positions are deficient. However, if one studies the classics but feels that the theories of Yin, Yang, deficiency, and excess are not important to treatment, it shows that their study methods and approach are incorrect.