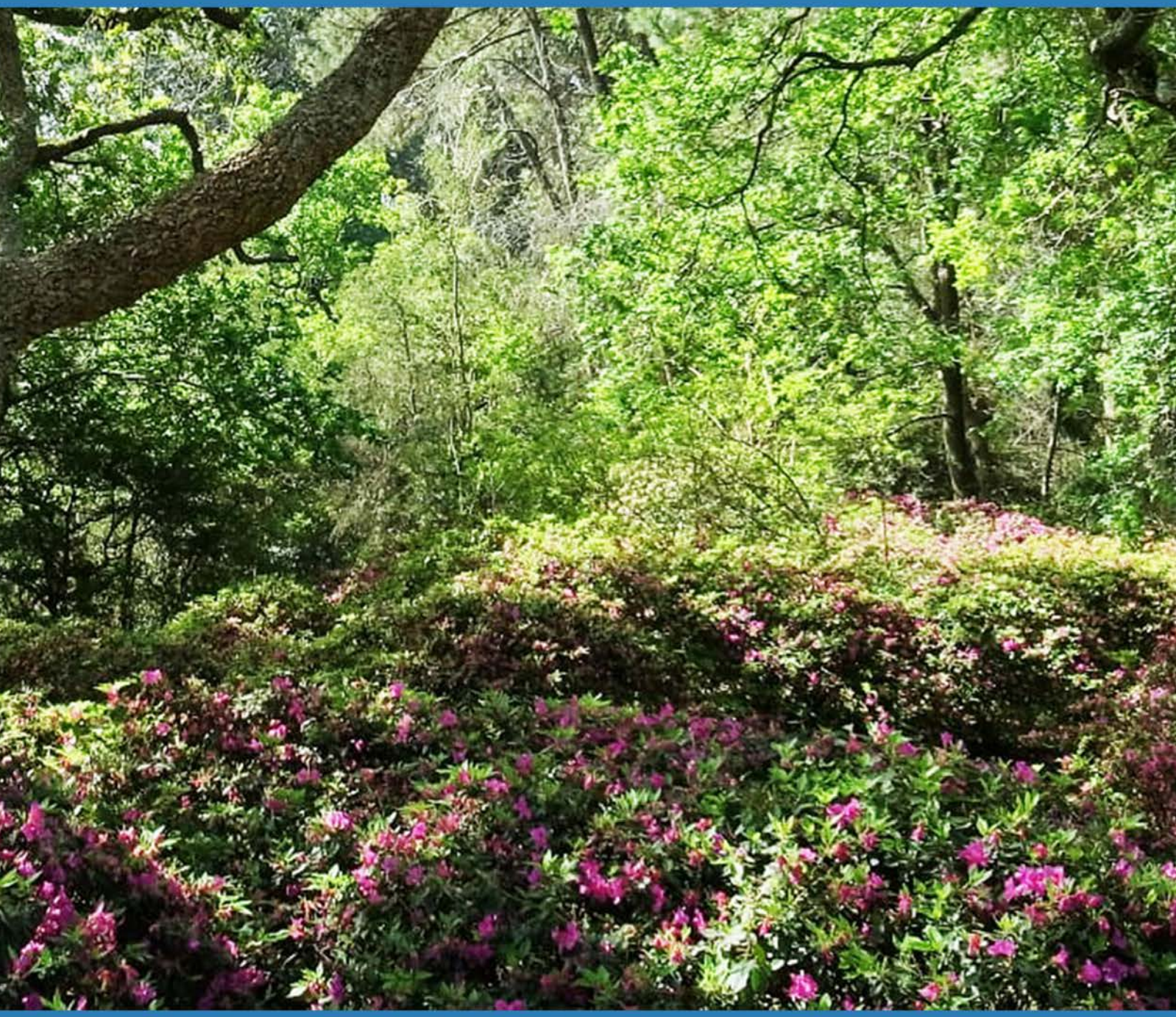
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By members, for members



This digest contains the spring features downloaded from Acu. online. For all the spring 2023 content - including interactive links, audio and video - go to www.acupuncture.org.uk/acu

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Green

04 April 2023 | Editorial

Gillian Nicol
Student Member: Tyne & Wear

This spring we are discussing relationships with our environment and experiences of transformation. New growth, blooming and blossoming, the tended garden and the natural wilderness. Unstoppable, reaching, spreading tendrils, roots and branches... and where they might take us in our journey and practice.

As a student member of BAcC I'm new here. Almost half way through a four-year acupuncture BSc, I'm mid-transformation, deep in a period of intense personal growth and learning.

In transitioning from one life to another, I've plunged myself into a whole world of newness – a mid-life start-over, a beginner again, learning new language, concepts and skills. I'm working hard to gain understanding, making inevitable mistakes, accepting the not-knowing, and the many 'it depends' scenarios found in Chinese medicine. Four years of challenge and discovery towards a life more nourishing, heart-centred and holistic. As Paul Douglas recommends in Hooked on CPD, 'True learning only ever happens at the edge of your comfort zone'.

From my past life I bring editorial experience of creating content with and for a different membership, visual artists. Similarly, and useful for contributing to Acu. at this time of change, that member organisation also made the shift from print magazine to online.

And so Acu. has made a deep dive and entered a period of reinvention, a brave step into newness. From the winter issue on 'darkness' - the last in print - to 'the SRringing__1!_R and unfolding' of this green-themed spring release, as we unfurl towards the bright light of summer, with the help of your contributions.

This first Acu. online-only aims to give a vibrant taster of digital delivery. New webpage design with lots of visual options allows the creation of beautiful articles to rival the sensual qualities of print.

The inclusion of sound and video offers a rich, new multilayered experience. We've poetry, art, qigong and other movement meditation, regular features like Chinese Lesson and Just My Point – marrow nourishing GB 39 for this issue, accompanied by a wonderful audio version read by Peter Firebrace himself – and new format Just Ten Questions premiering with Róisín Golding.

Nor has the Acu. past been jettisoned – instead the creation of a searchable pdf archive makes this valuable resource accessible going back (for now) to 2011. And we've kept some space for adverts to make sure there's visibility for upcoming events, courses and other offers from our regular advertisers.

Just like before, Acu. spring 2023 has been crafted with care and attention, creativity and imagination. We hope you'll join us in celebrating this transition to digital – read, watch, listen, breathe, move, participate… it's your space.

Acu.

A simple guide to carbon positive practice

04 April 2023 | Opinion



Joe Jennings MBAcC
Oxfordshire

Joe Jennings and the Community Acupuncture Team are on a journey to become sustainable across all of their community clinics. Here Joe shares what they've learnt so far – together with some of his infographics showing potential areas for reducing carbon emissions.

For most of my life I've worked with and around community groups focused on sustainability: In my early 20s I set up an eco-community in South Oxfordshire. In all these projects I have always advocated for strong environmental policies, this necessarily begins with taking account of our impact.

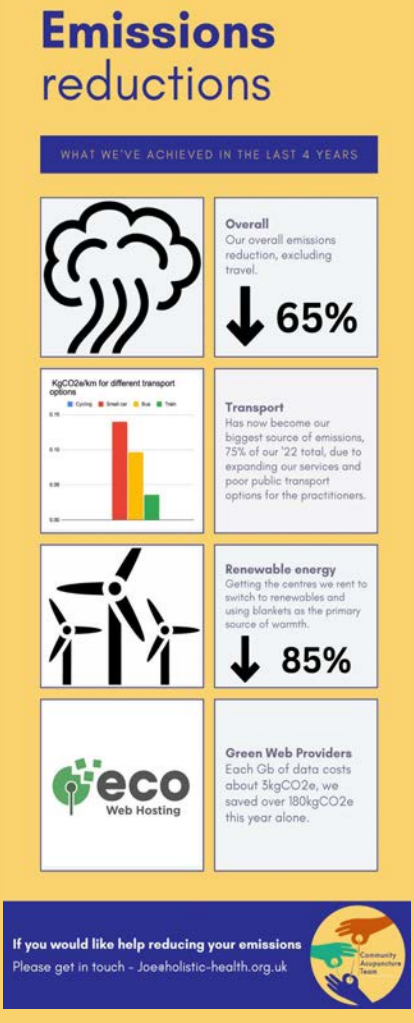
The standard tool for carbon emission accounting is a greenhouse gas report and they are mandatory for all publicly listed companies. You can easily get a flavour of how it works with an online search of different companies to see what they are doing.

Spoiler, most of the larger companies are just offsetting their damage – necessary and legitimate in some cases – but most are greenwashing as a way to prevent any actually wholesale change of business models. Fossil fuel extraction is the biggest example of this.

For the last four years I've been doing greenhouse gas reports for the Community Acupuncture Team. We have been accounting for and reducing our carbon footprint and making improvements wherever we easily can. We have also created an online tool – one that you can use to make accounting for your own

carbon emissions as easy as possible.

We've had a steep learning curve. It has been essential to account for all of our emissions – by area – so we know where we can make changes and how much of a difference those changes make. But as a result we've been able to legitimately and proudly call ourselves a carbon positive practice.





Greenhouse gas reports follow a pretty standard template and are relatively easy to do, at least for scope 1/direct emissions – eg travel and heating – and scope 2/indirect emissions – eg electricity, rented room heating, website data.

Scope 3 emissions – products used to run your practice – are a bit more challenging to calculate. I've had to estimate from other 'conversion factors' that the government publishes annually.

Anyway, boring details aside, we've made some pretty great strides and are reducing our emissions, absolutely in some areas and on an emissions per patient scale for others.

For us, one area in particular has gone up quite a lot over the years: travel. But we are a growing company taking on more practitioners over a wider area. We do what we can here, but it is tricky.

Banking is the exception. Although it wouldn't affect our emissions directly, green banking has an outsized effect by switching funding – from those who lend to fossil fuel projects towards those who only lend to renewables and positive impact projects.

For the areas we cannot reduce any further, like single-use needles, we need to work together with our suppliers to get them to reduce the carbon intensity of their products. HerbPrime are taking the biggest strides towards this. Using their products will make other suppliers want to follow in their footsteps – and also enable them to make more improvements.

To make the carbon emission accounting process as easy as possible for other practitioners I've made a carbon calculator. Feel free to give it a go. And do get in touch with any questions or if you want a hand with it.

I would love for more people to begin measuring and finding ways to reduce our carbon footprint – especially if we are able to work towards a 50-75 per cent reduction across the profession!

Given the most recent report from the Intergovernmental Panel on Climate Change (IPCC) – and to be fair it was pretty obvious before – it is essential that we act now. After all, our work is focused on the health and wellbeing of our patients and communities.

I would argue that not doing all in our power to reduce our carbon emissions is a dereliction of duty. It also rubbishes the physicians' axiom 'first do no harm'. I also implore the British Acupuncture Council to get behind our efforts, host and promote the tool with their much larger platform, and push suppliers to do more.

Please also get in touch if you'd like to ask about the assumptions and calculations I've made in making this tool. I would say it is accurate for scopes 1 and 2. Scope 3 gets tricky as we don't have any carbon intensity reporting on any of the products we as a community use. I have had to make assumptions using other calculations, like steel production for needles – but it will still give a solid ballpark figure for measuring any changes we make.

For anyone wanting to know more about the Community Acupuncture Team's greenhouse journey so far, please see our full greenhouse reports.

Joe Jennings runs the Community Acupuncture Team CIC – a collective of five practitioners across five different community clinics mainly in Oxfordshire. He works in the NHS and has set up YourClinic.care to help create a dataset for acupuncture outcomes for the benefit of the profession. He also runs a 12-week free internship programme for newly graduated practitioners to help with confidence around the medical and business side of our work.

Acu.



Casebook: Embracing spring

04 April 2023 | Practice

John Hamwee
Member: Oxfordshire

March is always my busiest month – I think it is for many of us. The reason, I think, is that the change from winter to spring is such a sharp and profound energetic shift. The other changes of season have nothing like this dramatic reversal.

For plants, it is a change from growing downwards, as the roots seek water through the winter, to growing upwards towards the emerging light and warmth. In many animals it signals the time to stop hibernating and start mating.

For us humans, with our 21st century lifestyle, spring is even more challenging because we have not spent the winter resting and going inwards. Too depleted to embrace the uprush of spring, or too unbalanced energetically to cope with the change, we find ourselves struggling in various ways.

Here are three examples.



Peter

I have treated Peter for many years. He tends to come at irregular intervals, but he always comes in March because he reliably falls into a depression then. He started and runs a small charity employing 23 people. January and February are his busiest and most stressful times because it is then that he needs to raise the money to allow the charity to survive another year. Once funding has been secured, usually in early March, he collapses, losing all interest in his work, in his family and in life. Before he had acupuncture the depression would last until early June – the next change of season, of course.

The diagnosis is that his energy in March is out of synch with the energy of nature. He can't respond to what is happening all around him – not least to his children wanting to play outdoors with him in the lighter evenings when he gets home from work – so he feels helpless, inadequate, joyless. As the spirits of those around him lift at the signs of new life, and his do not, he falls into a depression.

The remedy, in principle, is to give strength and sustenance to his wood energy. What I found difficult was choosing between a range of possible treatments.

I didn't get much help from his pulses and tongue. The pulses were, as you would expect, weak and sinking. The tongue was perhaps a little more red than normal, and a little peeled at the sides, but it didn't really show me what to do.

Most obviously, I tried tonifying the source points of wood, LIV 3 tai chong and GB 40 qiu xu; but it didn't make much difference. I think it is because, not just with Peter, I have never had much response from GB 40 – I suspect I don't really understand it. My next idea was to tonify the back-shu points, BL 18 gan shu and 19 dan shu, but there was no real response from him or his pulses.

I thought of tonifying wood with LIV 8 qu quan and GB 43 xia xi, but I was nervous of the idea. For one thing, his water energy was pretty depleted, so could it really nourish wood? And would I just be creating a problem for his bladder and kidneys? With some misgivings I did try it once, but although it didn't make him noticeably worse it didn't help him either.

Next I tried stimulating his wood energy with the wood points on both wood channels, LIV 1 da dun and GB 41 zu lin qi. That was much better.

As is often the case for me, it is only after seeing the effects of points I have needled that I fully understand why I should have chosen them in the first place. For one thing, depression is a kind of stagnation and GB 41 has a powerful effect on spreading liver qi. More specifically, stagnation of liver qi often inhibits the movement of the diaphragm and the expansion of the rib cage. Hence, on a physical level there is not enough oxygen being taken in, and on an emotional level there is not enough inspiration. All this made me reflect that in the west we see depression as a psychological problem, but it is at least as useful to see it as an energetic one.

Many point names are simply descriptive of their anatomical location but there are alternative translations of their names, and some of these translations point to the effect of a point on the spirit. LIV 1 is a good example. 'Big Mound' is indeed the biggest joint at the end of the toes, but I have also read the translation 'Great Esteem'. Certainly, when Peter is depressed he loses all self-esteem, so this point might well help to revive it.

The other combination that has helped him is LIV 3 tai chong and DU 20 bai hui. According to the old saying, human beings stand between heaven and earth, connecting both. Perhaps Peter's depression comes, in part, from losing that interconnection, so needling points at either end of the body at the same time –points which are themselves connected, as DU 20 is at the end of the liver channel – felt right.

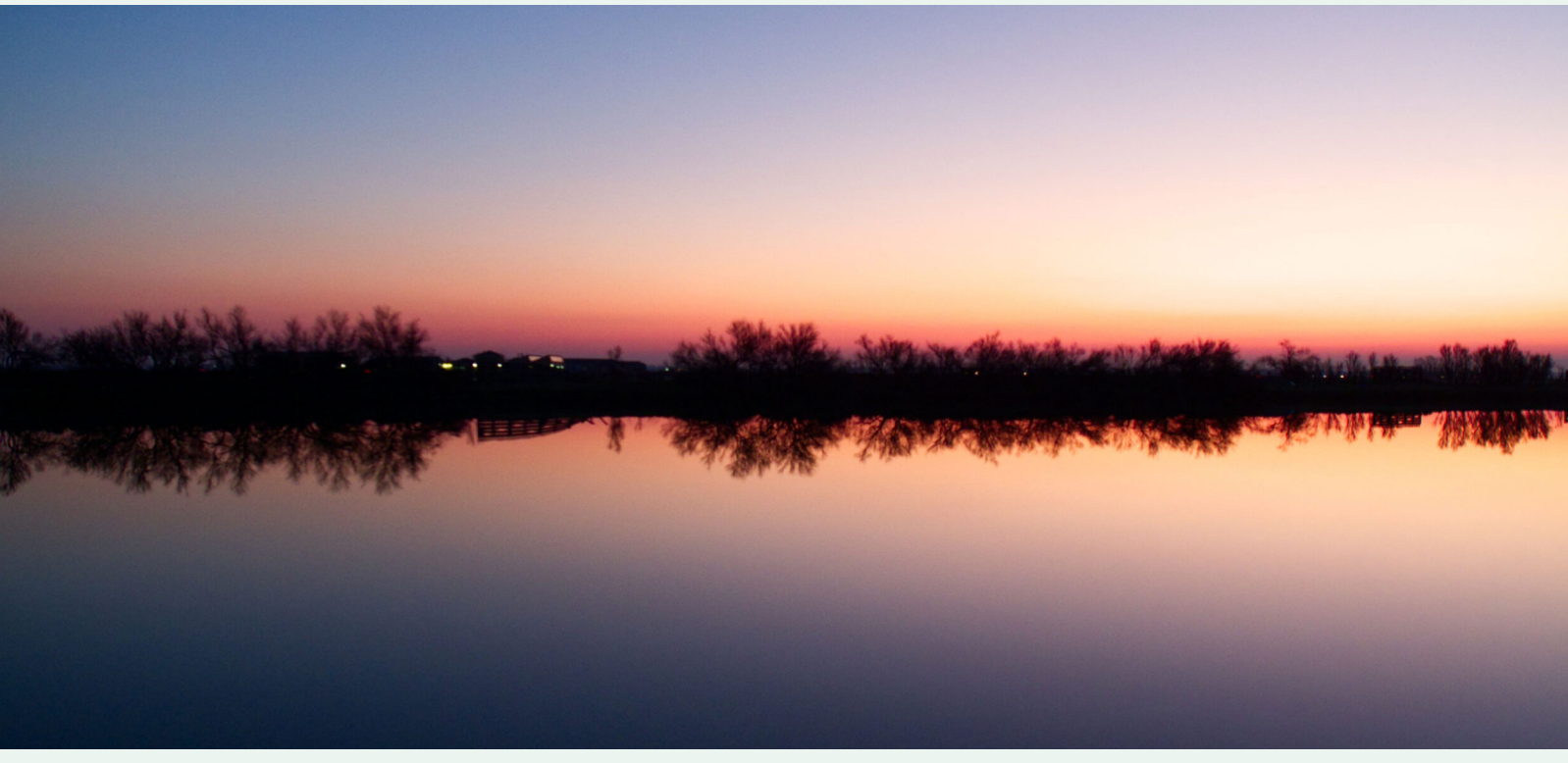


Jenny

Jenny is a delightful woman in her mid-30s, bright, quick, enthusiastic, terrific fun to be with in the treatment room. She has an endless stream of good ideas, plans and projects. She wants to run a disco for disabled people because, as she told me, 'Normals like us don't want to dance with them'. She has a plan to convert a disused barn in mid-Wales into a bunk barn so that refugee families can have really cheap holidays. She decided to start a pop-up café in summer at the local pick-your-own where teenagers who have just finished their A levels, and are at a loose end, could learn some skills and earn some money. There are more plans too. The only trouble with all and any of them is that they are never realised.

Energetically, therefore, the diagnosis is a really powerful vision combined with really weak decision-making. She would do better to have fewer plans and more capacity to implement them. March, therefore, is the ideal time to harmonise liver and gall bladder with both luo points, LIV 5 li gou and GB 37 guang ming. Once I had done that I reflected that it might be a good treatment for Peter too; I often find that I discover what might help one patient from the treatment of another.

Finally, if the patient's issue is some kind of new start in life, then the sort of treatments you might think of in March might be good at other times of the year too.



George

George's wife of more than 40 years died 18 months ago and he isn't doing well. He tells me that when he comes home from work her absence is still unbearable. Somewhat shamefacedly he adds, 'I can't be angry with her anymore, but somehow I am'.

He wants to retire and replant a local wood with native species but he worries that he would miss the companionship of his colleagues at work and might go a bit weird if he is on his own all day and night.

His tongue has the characteristic pallor of blood deficiency and his pulses are thin, so my first idea was to treat liver blood deficiency with LIV 6 zhong du and 8 qu quan. I followed that up with treating blood more generally with ST 36 zu san li, SP 6 san yin jiao and BL 17 ge shu.

He looked better and his posture became more upright, but there was still some barrier he couldn't quite cross. Next, I tried combining hand and foot jue yin with LIV 3 tai chong and P 7 da ling. The pulses came up markedly and his face started to get some pink in it, but again there seemed to be something holding him back.

As so often, it was the obvious I had missed. He had told me he was angry with his wife, a powerful emotion which could find no means of expression. Anger enables us to initiate change and to grow, but his was frustrated. How?

Well the wisdom of the five elements tells us that grief can over-control wood via the ke cycle. So I finally thought of dispersing metal with LU 5 chi ze and LI 2 er jian and at the same time tonifying water with KID 7 fu liu and BL 67 zhi yin. I did no more that day as, according to the pulses, the energy seemed to be flowing on through to wood. The next time I saw him he looked very different, and told me he felt ready to change and make a new start in life.

The energy of spring is so strong that if it is blocked then pathology is not far behind. Fortunately, generations of masters of acupuncture have left us a number of wonderful ways to help it to flow naturally again; our job is to find the right one for an individual patient, yearning to embrace his or her own particular spring.

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Chinese lesson: chun 春

04 April 2023 | Inspiration

Sandra Hill
Acupuncturist & Author: London

Chinese new year is the beginning of spring. It may not yet be apparent, but beneath the surface, life is stirring after the dormancy of the winter months.

The character for spring – chun 春 – shows the sun 日, still hidden below, but giving warmth and light to encourage vegetation into growth 屯. It is similar to the character for the east – dong 東 – with its image of the sun 日 rising above the horizon and seen through the trees 木.

The left part, the phonetic, of the character yang 陽 also has the image of the sun, but here it is above the horizon, and at its full power. Both the east and the spring are associated with the young yang, the stirring and re-energising of life after a time of darkness and rest, and both the east and the spring are associated with the wood element 木.

The wood phase begins at the Chinese new year, a time when all northern hemisphere calendars mark the return of the light after the three months of winter. In the Celtic calendar it is called imbolc, one of the cross-quarter days, and in the church calendar is celebrated as candlemas. Chinese new year fluctuates according to the phase of the moon – it is always at new moon – and is one of the four gates of the year, often called the gate of heaven.

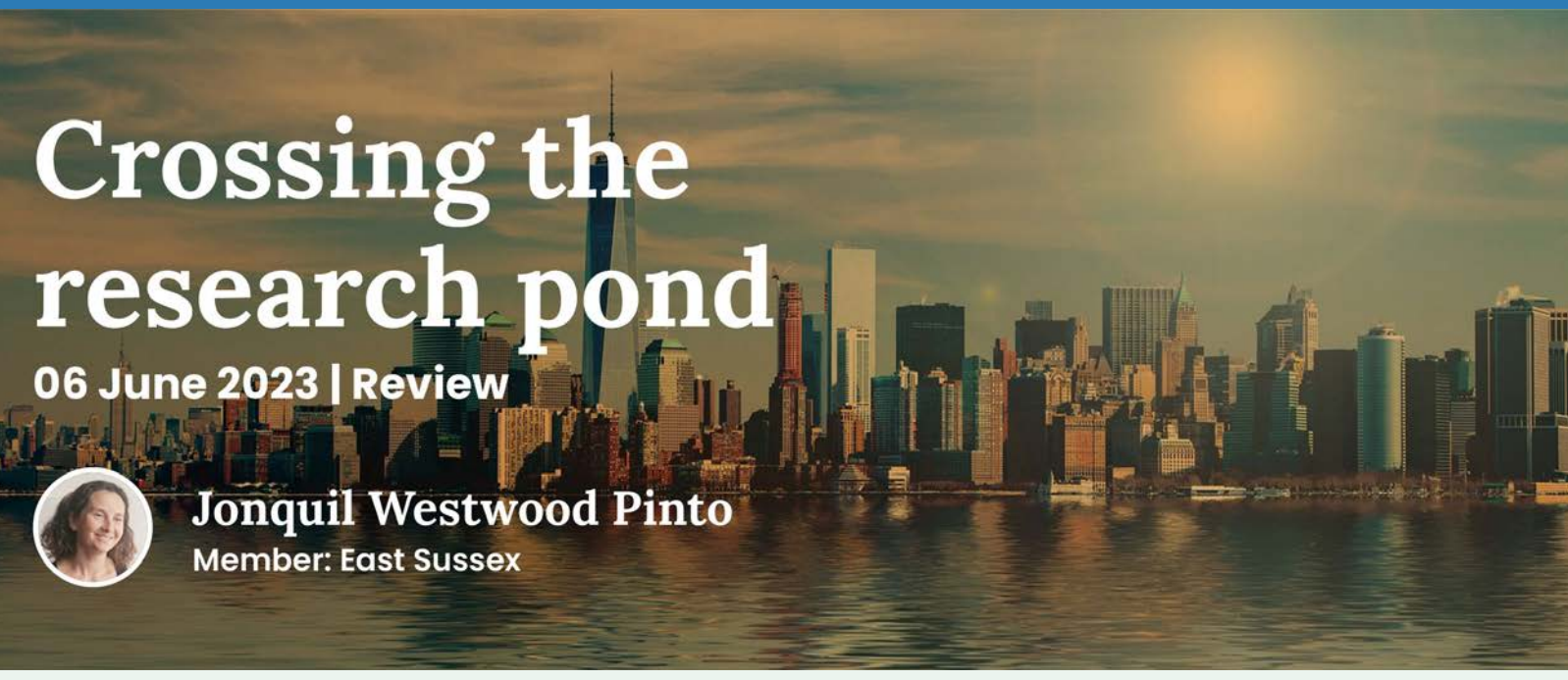
The image of the seed bursting into life and growth – as we see in the characters for both qi 氣 and jing 精 – encouraged by the return of the light of the sun at the beginning of spring, is often used in the Chinese classical texts to illustrate the action of the liver amongst the five zang. It is the strength and vitality of young yang. And as the seed needs the months of winter in order to germinate, so the liver qi needs its rooting in the kidneys in order to flourish.

According to Neijing Suwen chapter 2, the three months of spring are called springing up and unfolding. The qi of heaven and earth intertwines, bringing a renewal of life. The character translated as ‘springing up’ is fa 發, which shows the crust of the earth being broken open by the power arising from within. The lower part of the character contains the image of a bow 弓 which is often used to illustrate the dynamic tension between the qi of the kidneys – which must hold and maintain –and that of the liver – which wants to expand and move forward. The qi of the liver can only spring forward if it is firmly rooted in the kidneys.



Later in Suwen chapter 2, we see that if there is not enough storing in the winter months, there may be impotence, flaccidity wei 痿 in the spring. Winter and the kidneys represent the seeds of fertility – the spring is the ability to bring that towards fruition.

Acu.



Crossing the research pond

06 June 2023 | Review

Jonquil Westwood Pinto
Member: East Sussex

Last month I was fortunate to receive a scholarship to attend the Society for Acupuncture Research (SAR) International Research Conference in New York. The timing couldn't have been more perfect!

Having just submitted my PhD thesis, I was ideally placed to present a poster abstract on my final study into how patients can be supported to make lifestyle changes in acupuncture practice.

Founded in 1993 by Patricia Culliton, Hannah Bradford and Stephen Birch, SAR's aim is to foster scientifically sound inquiries in acupuncture and East Asian medicine. They host biannual conferences in the US to highlight research in the field.



Support from the US National Center for Complementary and Integrative Health (NCCIH) provided 30 scholarships for next-generation acupuncture researchers as travel stipends. Also on offer were reduced registration and membership fees for students and junior practitioners/researchers.

The four-day event centred on the theme 'From Mechanism to Patient-Centered Care' and there were many fascinating presentations looking into the physiological mechanisms of action of acu-point stimulation.



The keynote presentation from Helene Langevin, director of NCCIH, dived into the tricky issue of Acupoints in Acupuncture Research. Following on from her 2018 paper co-authored with Peter Wayne – What is the point? The problem with acupuncture research – she asked, Does the concept of acupuncture points have scientific validity?

Dr Langevin suggests we need a rigorous study of the biological basis for point specificity, in order to explore questions such as, are points distinct anatomical locations? Or a set of anatomical locations with shared attributes? Or both? Speculating that perhaps a combination of a neural and interstitial model of acu-point physiology will emerge.

An incredible new research project was announced to look at this area. The NCCIH are to fund a major five-year project to work towards producing an open access repository for information on anatomical and physiological correlates for acu-points. The Topographical Atlas and Repository for Acupoint Research (TARA) database will be based at Harvard Medical School and Drs Vitaly Napadow, Karl Helmer and Richard Harris are leading the project.

Wikipedia

After the main keynote presentations we broke out into smaller symposia and I had a chance to hear about the work of Christine Guirguis who is working on a project which aims to Bring Evidence in Complementary Medicine to Wikipedia.

Guirguis explained how important Wikipedia is in dissemination of information on research into acupuncture and CM, due to the sheer number of views of pages and how it is used as a source by the public, patients, medical professionals and journalists. The project takes a long view of how to improve Wikipedia – by understanding the editing rules and processes, building relationships with editors, and making structural changes to improve pages such as the low back pain page.

The group are looking for people to assist with this Wikipedia project. They will provide advice and guidelines on how to get involved in editing in order to make sustained changes and improvements. Just get in touch if you're interested or want to know more.

Oncology



A major area of research within the conference was integrative oncology which is huge in the US. Dr Jun J Mao, SAR co-president, chaired a panel on the Cycle of Oncology Clinical Research. He emphasised the importance of involving patient advocates in all stages of the research cycle – although not your own patients! He also explained how contacting patient advocacy groups and listening to their concerns and interests can be a useful starting point for producing research which can have real impact.

Dr Ting Bao presented promising findings from efficacy studies of acupuncture for chemotherapy induced peripheral neuropathy – and Dr Suzie Tick presented new clinical practice guidelines on pain in oncology which make six specific recommendations for use of acupuncture.

Dr Jun J Mao discussed findings from comparative effectiveness trials for insomnia – explaining how comparing acupuncture to cognitive behavioural therapy (CBT) found CBT more effective. But when patients have both pain and insomnia acupuncture is more effective. This highlights the difficulty of selecting best outcomes measures in trials, focusing trials on single outcomes may not reflect reality of clinical practice and reality of patient presentations and experience.

Policy decision making

I was interested to see a symposium called From Acupuncture Evidence to Clinical and Policy Decision Making: Where are we and the ways forward? It was led by the team who published an extensive

acupuncture collection in the British Medical Journal in 2022 which analysed the progress of developing high quality trials on acupuncture and the current status of acupuncture research.

This panel discussion led by Yu-Qing (Madison) Zhang explored the team's findings of the underuse of proven acupuncture treatment in healthcare systems and went on to cover problems of dissemination and implementation.

A specialist in economic evaluations, Patricia Herman, gave an overview of producing economic analyses of new treatments. She explained how costing is always specific to each setting, and that economic evaluations should consider who's costs we are describing – cost to the patient, a health institution or wider society? Typically economic evaluations of acupuncture tend to show improvement in outcomes has a small additional cost – however, it's important to factor in longer term economic savings such as reduced use of further health services.

A wider discussion considered the role of government and insurance companies in policy decisions and some of the structural problems in implementing widespread acupuncture services. For example, the reduced number of enrolments in acupuncture courses, lack of clear career path and financial security for acupuncturists, and need for better links between research findings and training courses.

Reproductive health



We had an opportunity to hear from acupuncture researchers around the world. Six SAR global ambassadors from Brazil, Romania, Norway, Netherlands, France and South Korea outlined the current place of acupuncture research in their countries – demonstrating the great variety in restrictions to practice, availability of acupuncture and involvement with health organisations.

Dr Elisabetta Casaletti from Italy, Dr Olivia Poer from Austria and Sandro Graca from Ireland presented on

the latest research and clinical experience in reproductive health. They explored the risk factors for both males and females and the role of acupuncture and East Asian Medicine within an integrated systemic approach to addressing infertility trends.

One highlighted issue was the importance of dosage when translating the findings from research into a successful evidence-informed acupuncture practice. Their advice: when using acupuncture alongside fertility treatment, the emphasis should be on more acupuncture treatments before the day of embryo transfer – along with using individualised protocols combining aspects of the outdated Paulus protocol with findings from Professor Elisabet Stener-Victorin on uterine and ovarian blood flow.

Similarly, higher acupuncture dosage continues to yield better results for menstrual health, as seen recently from research findings on dysmenorrhea and polycystic ovary syndrome, when treatments were performed two or even three times per week.



Think of a super updated version of your health tracking watch, holographic health coaches, and 'digital twins' – your digital double used for testing potential treatments you might need

Looking ahead

One of the most extraordinary presentations looked into Future Digital Health. Claudia Witt described a Digital Society Initiative at the University of Zurich which is exploring digital transformation across society, including health.

Various future case scenarios are being considered, including the potential role of multi-purpose implants – think of a super updated version of your health tracking watch, holographic health coaches, and 'digital twins' – your digital double used for testing potential treatments you might need.

Slightly more current was a project led by Dr Suzie Zick which has produced an app for patients to self-apply acupressure for cancer fatigue. This has been developed for research but is available in app stores for anyone to use: Apple or Google Play

Extracurricular

A big highlight of the weekend was a gala dinner and old school disco which saw everyone up and strutting on the dance floor, with lots of friendly faces and positive conversations. I even managed to see a little of New York on my final day and came home feeling incredibly lucky to be part of a forward looking profession which has so many possibilities.



Jonquil with Terje Alraek (left) and Sandro Graca (centre)

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Dill, spring onion & broad bean rice

06 June 2023 | Treats



Shadda Draey
BAcC Office Administrator



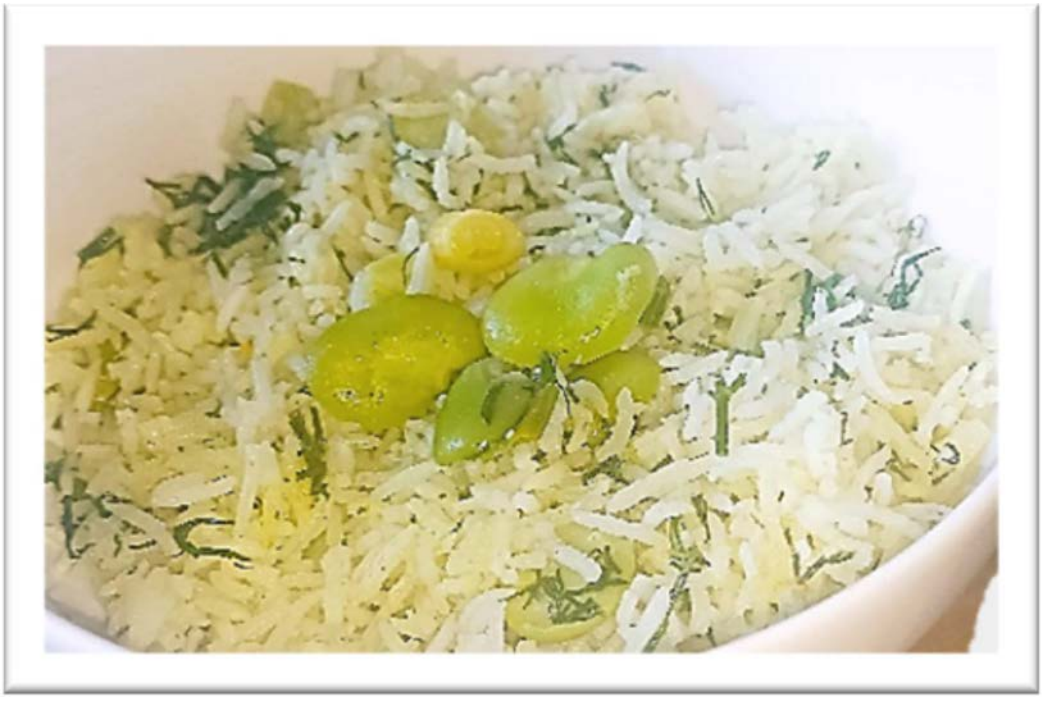
There's still time to enjoy some fresh and cleansing greens this spring!

Broad beans 蚕豆 cándòu are neutral in temperature. With a sweet and slightly pungent flavour they enter the spleen and stomach meridians. They are known for fortifying the spleen and encouraging urination. Broad beans can be used to treat water retention and for detoxification – although best eat 'enough but not too many' as over consumption may lead to bloating.

- 25g of fresh dill
- 2 spring onions
- 300g broad beans
- 1 Tbsp olive oil
- 1 tsp vegetable stock powder
- 1 cup basmati rice
- 1 cup water

Wash one cup of rice three times until the water is clear then put the rice aside.

Roughly chop the fresh dill and spring onions and place in a bowl with the broad beans.



Heat the oil in a medium-sized saucepan. Add the washed rice, vegetable stock powder and a cup of water. Mix well to dissolve the stock.

Add the fresh greens to the rice, stir once, and cook for about 15 minutes.

Once the stock has fully dissolved, place a lid on the saucepan and continue to cook on a low heat for another 15 minutes, stirring every 5 minutes to avoid sticking.

Season and serve with something equally delicious such as a curry or vegetable stew.

Feel free to send us a photo when you're done – we'd love to see how you got on and to hear if your guests were impressed!

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Poem: ‘So how does it work then, this acupuncture?’

06 June 2023 | Treats



Dominic Harbinson
Member: Kent

‘So how does it work then, this acupuncture?’

‘So how does it work then,
this acupuncture?’ people often ask me.
‘God knows!’ I used to say, kind of as a joke
(didn’t go down too well).

But if you wait, keep quiet a bit,
they’ll usually carry on,
answer the question for you:
‘It’s the nerves, isn’t it?’

Some’ve heard it releases ‘endolphins’
– I’ve a soft spot for them, who doesn’t? –
frisking in benevolent on a microscopic flood,
enlightening our pulse with sparkly clicks and giggles;

others’ll name-drop ‘dopamine’
or ‘serotonin levels’, even
‘activation of the cerebral cortex
or something’, etcetera.

Maybe it's all of the above and more but
does it really matter?
How does music work?
How does water quench your thirst?

You listen.
You drink.



Dominic lives at the edge of a village in Kent with his wife, Pippa Sequeira. They graduated from the College of Integrated Chinese Medicine (CICM) back in 2000 and run a thriving clinic in central Canterbury.

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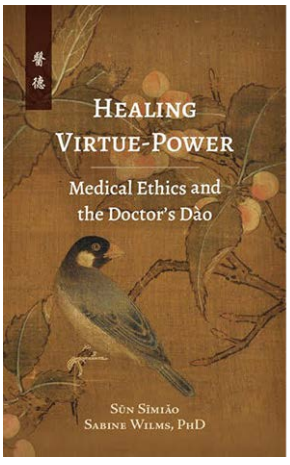
Healing Virtue-Power by Sūn Sīmiǎo & Sabine Wilms PhD

04 April 2023 | Review



Lianne Aquilina
Member: Lincolnshire & Hertfordshire

When I was asked to review Dr Wilms' new book – Healing Virtue-Power: Medical Ethics and the Doctor's Dào – I was reminded of our values as practitioner members of the British Acupuncture Council.





Ethics is a system of moral principles that govern behaviour or how people conduct an activity. Applied ethics can encompass what is right and wrong, the balancing of people's responsibilities, and rights.

Ethical practice supports analysis and problem-solving abilities and can offer guidance on how to live a better, good, and more fulfilling enriching life. Sūn Sīmiǎo a 'medical ethicist' was so motivated to make a change for the care of patients that he created one of the world's most scholarly revolutionary integrational guidelines.

As BAcC members we have an opportunity to advocate oriental medicine's best practitioner ethic that encompasses personal responsibility for mastery in patient care. This value was central to and at the heart of the seminal work by Sūn Sīmiǎo during the Tang Dynasty. So, what wisdom did Sūn share?

We are advised by Sūn Sīmiǎo to study a range of literature to become knowledgeable: To apply and refine our theoretical, clinical and critical thinking skills. Other key advice includes staying composed, exercising humility, being kind and empathetic, treating patients fairly and protecting patients' and colleagues' dignity.

Sūn expresses that wisdom occurs through processes that transcend our physical body, and that Chinese medicine is a spiritual practice. We should be intentionally, actively virtuous and remember that we are rewarded in spiritual ways not solely through money or recognition. Clinically, Sūn Sīmiǎo advises to 'acquaint yourself intimately with each case so there can be no doubt'. He describes that success is 'experienced as the utmost in both skill and beauty'.

Sūn Sīmiǎo addresses professional practice and the sincerity of great doctors, aiming to motivate his colleagues with inspirational and caring advice on best conduct: 'If you can be like this, you can serve as a great doctor to the masses'. He advises doctors to open their hearts deeply to patients' suffering and misery.

One key virtue that stands out to me regarding healthcare and Sūn Sīmiǎo is compassion, which is known to be a result of his eclectic combination of Daoist, Buddhist and Confucian philosophy. Our powers to heal and be healed derive from virtues and stem from developing good habits such as compassion. Also, self and social awareness, self-control, honesty, integrity, reflective practice and action. Professional practice and sublime sincerity of the great doctor are a gateway to a practitioner's superpower.

The overall objective of Sūn was to alleviate suffering and ill-health within the bigger picture of preservation, cultivation and nurturing life to bring about harmonisation and enlightenment.

Wherever you are in your journey of mastery of practice, I highly recommend that you visit Dr Wilms's superlative translation of Sūn Sīmiǎo's two essays 'On the Professional Practice of the Great Doctor' and 'On the Sublime Sincerity of the Great Doctor'.

Dr Wilms takes us on a remarkable journey where we explore medical virtue (醫德 yīdé), the great doctor (大醫 dàyī), virtue power (德 dé) and virtuous actions in alignment with the dao (德行 déxíng), and so much more.

Lianne Aquilina is a practitioner director of the BAcC Governing Board.

Healing Virtue-Power: Medical Ethics and the Doctor's Dào is published by Happy Goat Productions

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Hooked on CPD

04 April 2023 | Practice

Paul Douglas
Member: London & Kent

When it comes to continuing professional development (CPD) I enjoy the fact that every year I get to start with a clean slate and nothing more than a plan. But then I am a self-confessed CPD junkie!

After almost 20 years as an acupuncturist I must confess that my day-to-day practice bears little relation to my college training, impressive though it was. That is largely due to the amount and variety of CPD training I have done and continue to do. Over the years I have taken courses in the UK and throughout Europe, in many forms of acupuncture: Japanese, Korean, western, and various microsystems.

I always put aside a fixed percentage of my annual earnings as a training budget – and on average I do about 200 hours a year. Honestly, the more money I spend on my professional development, the more I earn.

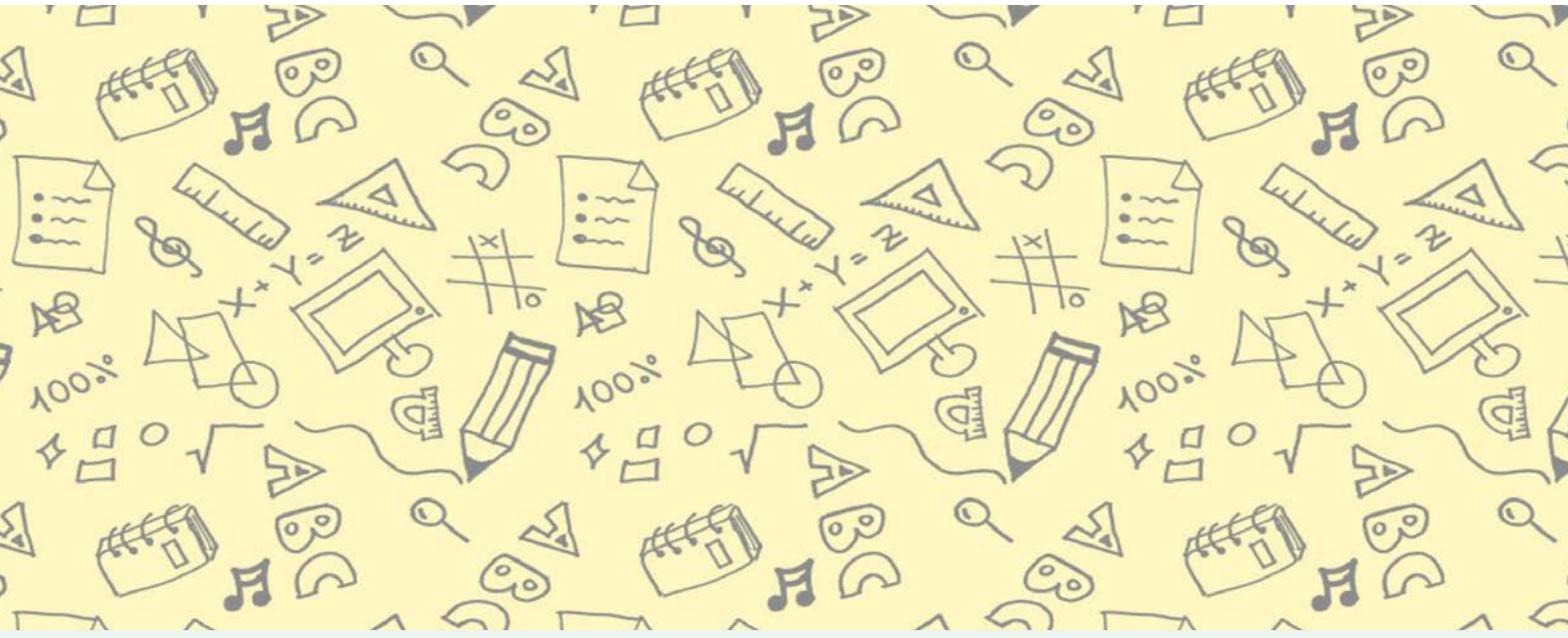
The first week of 2023 found me attending an excellent workshop. Over two very long days we covered a lot of ground: our personal goals and business plans for the coming year; the value of mentoring and coaching; education-based marketing; business relationships and sales. A couple of weeks later I was in another three-day workshop exploring the sales process; marketing; business strategy; cashflow; branding.

Both courses were held in good venues and the trainers – all excellent – were successful business owners well known in the media. All the attendees were also business owners, a few of us were clinicians. Sadly, but not unusually, I was the only acupuncturist there.

Acupuncture was not mentioned once in either course – even so I am busy implementing some of the strategies learned and the courses will pay for themselves within a couple of months.

While the BAcC may stipulate that we must complete 30 hours of CPD every year, any practitioner worthy of the name often does several times this amount. But for me it's not just about attending conferences and courses – and it's never about 'making up my hours'.

Like any addict, I have strategies for satisfying my craving – tried and tested methods that I'm eager to share below with anyone who's interested.



Keep a simple Excel spreadsheet

Add to it every time you look up a point, revise anatomy or a drug, discuss a client with a colleague – do this on a regular basis and those minutes rapidly add up to hours.

Have a plan

Developing an understanding of your CPD needs is part of being a reflective practitioner – be it practice management, anatomy, marketing, new techniques, book-keeping, customer service – you are the sole arbiter.

True learning only ever happens at the edge of your comfort zone, never in the middle of it – please don't waste your time constantly reinforcing what you already know.

For example, unless it's for a specific needle technique, try not to attend courses that 'allow' lots of time for 'needle practice' – often just a filler to keep you occupied when the course content is weak.

Look outside the acupuncture world

As a qualified health professional, you can usually attend CPD courses from other providers: for example my business course was with www.adamstott.com

One of the most beneficial courses I have ever attended was a trigger point course designed for physiotherapists and osteopaths. The content was excellent and I have used that knowledge every day. That one course has paid for itself many times over.

Some of my most beneficial training has taken place in the entrepreneurial and business space – usually of a very high quality and immediately applicable in our clinics. Participants and trainers are always interested, welcoming and far less judgemental than many acupuncture courses, I have found.

Most of us acupuncturists are owners of businesses – and generally speaking we are poorly trained to do that, even though sales and customer service are of critical importance. But you can find some excellent course providers throughout the UK. As a starter, see what your local bank or chamber of commerce has to offer.

I once spent a transformative day in a hair and beauty clinic. Now I have absolutely no interest in either profession, but I was stunned by the efficiency of the clinic management, their appointment system, and the way they managed communications with their clients. It absolutely transformed the way I organise my own business. As an aside, they also became a rich seam of new referrals, and vice versa. I have repeated the exercise with other clinicians, including acupuncturists, and have learned something valuable every time.

Take control

Why not organise your own learning? Rest assured that if you have a particular development need so will other colleagues. I believe we should be much more demanding in stating our needs, instead of letting colleges and training providers dictate our learning and development. Organising a workshop is not difficult and you might be able to persuade a college or the BAcC to help.

Join or form a mastermind group

Mastermind groups meet regularly to provide mutual support and to drive businesses forward by holding each other accountable. They are an invaluable source of education and information, all held in a private and non-attributable setting.

Most people I know that are members of such groups consider them to be one of their most valuable resources. Guidelines for establishing a group are readily available online.

Make an investment

I know there are members of our profession who will say, 'I don't have time' or 'I can't afford it' – but you can! It's about being genuinely interested in our profession and those we serve.

Most CPD can be done at little or no cost and it soon mounts up if you keep a record. Be highly selective. Don't attend two or three mediocre courses when you can spend the same money on one high-quality event. If we choose quality over quantity, the training providers will very soon get the message.

Aim high

Finally, try to hang out with people who are operating at a level you aspire to. If you want thirty clients a week and your CPD colleagues treat only five, their input is very unlikely to help you increase your numbers. So try to do CPD that challenges you and pushes your personal and professional boundaries.

Have some fun

CPD should always be interesting, enjoyable, and never boring. If you invest the time to think about your personal and professional developmental needs and to formulate an annual plan, I guarantee you will never have to think about making up your hours again.

It's now the second week of February and technically my annual CPD is complete. But I have a webinar booked for Tuesday – Naava Carman does some excellent training on www.fertilitysupport.training – and I'm off to Rothenburg in May for the TCM Kongress (again). In fact, I have something in my diary for every month of the year.

Well as I said at the beginning – I am something of a CPD junkie.

Paul Douglas qualified in acupuncture and medical qigong at LCTA and tuina at Middlesex University. He originally trained as a state registered nurse, with specialist qualifications in accident and emergency and intensive care nursing, aeromedicine, and clinical teaching.

The majority of Paul's nursing career was spent in the NHS in Accident and Emergency, Intensive Care and Burns – together with experience in the private sector and the military. He gained considerable experience in clinical, managerial, and teaching roles.

Paul is passionate about helping practitioners to develop their practices after qualification.

Images by Chen

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What colour is ‘green’ 青?

06 June 2023 | Inspiration

Joanne Dyson
Member: West Yorkshire

The colour 青 – pronounced as qing – is the corresponding colour to the season spring. This was first mentioned in the Yellow Emperor’s Inner Cannon Chapter 4, 金匱真言論. In English, the character 青 qing is often translated as ‘green’. But what is the colour ‘green’ 青 in Chinese medicine and art?

Read on for a light-hearted discussion of what colour – or colours – the character really represents through the lens of traditional Chinese artefacts with the colour 青 qing in their names. Believe it or not, even amongst Chinese speaking people there is no clear answer…

The most prominent categories of 青 qing artefacts are 青銅 qing tong – ‘green’ bronze – and 青瓷 qing ci – ‘green’ porcelain.

Bronze ware

In China, the most beautiful bronze artefacts were produced during the Bronze Era 青銅時代, dating back beyond 3000 BCE to around the beginning of the first millennium.

The Bronze Era marked the first three dynasties of China – 夏商周 Xia, Shang, Zhou. They produced the most decorated types of bronze cups, urns, plates and ornaments for all kinds of ceremonies. Some of these bronze artefacts were engraved with characters of early Chinese written language.

Porcelain

青瓷 qing ci – 'green' porcelain – is equivalent to celadon in the west. Celadon is a term used in pottery for wares glazed in the jade green colour. However, in China, the term 青瓷 qing ci specifically referred to the exquisite wares that were produced during the dynasties of 宋 Song, 金 Jin and 元 Yuan, ranging from around 900–1400.

Here you can see one of the most beautiful pieces of 青瓷 'green' porcelain that was produced during that period. This bowl is part of a very large collection held in the National Palace Museum in Taiwan. The Museum has the most extensive and exquisite collection of Chinese artefacts in the world.

In the 1940s the collection was shipped from the Forbidden City to Taiwan by the Nationalists on the brink of losing the civil war against the Communists. Serendipitously, these delicate artefacts were preserved safely, away from possible damage and destruction during the Cultural Revolution and other social movements in China over the decades that followed.

By the way, if you happen to have one of these vessels lying around in the attic, please keep it very safe if you wish to enjoy it yourself. Or take it to an auction house and you will have more than enough abundance for many, many and many generations!

Later style porcelain

So far, 青 qing has been used to describe the blue-grey-green colour of 青銅 qing tong – 'green' bronze – and 青瓷 qing ci – 'green' porcelain. Later in Chinese history, from around 1400 in the Ming and Qing 明、清 Dynasties, a new style of porcelain came into fashion, categorised under the name 青花瓷 qing hua ci, meaning 'green' flower porcelain.

The names 青花瓷 qing hua ci and the older style青瓷 qing ci have only one character different between them. But this new style of porcelain is the blue and white chinaware, often considered by the western world as the 'typical' Chinese style porcelain. In this context of 青花瓷 qing hua ci, the character 青 qing describes blue.

In colloquial Chinese, a clear sky is called 青天 qing tian so using 青 qing for blue is not uncommon.



More fun facts

青 Qing is sometimes used to describe the colour black – like 青絲 qing si, meaning black hair, or 青眼 qing yan, meaning the black of the eyes.

The use of 青 qing to describe hair can be found in a passage from a very famous poem, 將進酒 Jiang Jin Jiu – meaning 'just about to drink the wine'! – written by Li Bo 李白 in the Tang Dynasty 唐, around 600-900.

The poem says:

朝如青絲暮成雪 looking into the mirror, in the morning, it [one's hair] looks like black silk 青絲, in the evening it turns into snow 雪

In fact, the use of 青絲 qing si to describe black hair is very common in everyday language. When a shampoo advertisement uses the word 青絲 qing si, no one would misunderstand that the shampoo is turning the hair green or blue!

When 青 qing is used to describe the eyes 眼 yan, it refers to the iris of eye, which is very dark or black in Chinese people. So when someone is looking at you with their 'black of the eyes' 青眼 qing yan, it means they really appreciate and favour you. You definitely don't want to get the white eyes 白眼 bai yan, which show their distaste by rolling their eyes and you see only the sclera.

Energetics of the spring season

Overall, 青 qing as a character generally describes growth, youth and positivity, which complies with the energetics in the season of spring and the element of wood.

The 'green' 青 qing for the wood element is likely to be a darker, bluish green rather than a fresher yellower green. Considering the water element – colour black – is mother element to the wood, it is natural that the colour of the wood element 青 qing inherits some aspects of its mother element.

Just one other thought. If we can agree that the 'green' for the wood element is more bluish, then the five element corresponding colours would consist of black/water and white/metal, along with three primary colours of blue/wood, red/fire and yellow/earth.

Enjoy what's left of the springtime!

Instagram @AcuLeeds

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Just my point: GB 39

04 April 2023 | Practice

Peter Firebrace
BAcC Fellow: Denmark

For me, one of the wonderful treasures in the dynamic collection of gall bladder points is the immensely useful GB 39. It has two names, both of which remain in use: Suspended Bell and Severed Bone.

Suspended Bell, xuan zhong 懸 鐘, refers to this area above the ankle where traditionally children wore a string of jingling little bells. Severed Bone, jue gu 絕 骨, refers to the lower end of the fibula, an area of great importance for the movement of the legs, one of the point's key symptoms. A few points away at the knee, we have the meeting point for the sinews, jin hui 筋 會, GB 34 Yang Mound Spring, yang ling quan 陽 陵 泉, and here at GB 39 we have the meeting point for the marrow, sui hui 髓 會.



In Chinese sui 髓 marrow is deep-seated and precious, both for the nourishment of the bones and also the brain, known as the sea of marrow, sui hai 髓 海. In their own particular ways, these two points on the gall bladder meridian, GB 39 and GB 34, are essential for the body's free and easy movement, without pain or obstruction.

With its deep link to the marrow, I use GB 39 in cases of bone cancer, where it can be helpful in combination with such points as KID 3 Great Stream, tai xi 太 溪. It is strengthening and helpful, even in late stages, to give power to the legs and support the patient's will. My wife has used GB 39 very successfully in combination with SP 10 Sea of Blood, xue hai 血 海, in treating a patient with cancer which prevents the marrow cells from maturing into blood cells. She noticed that when the patient's blood was low, there was a swelling at the

point. Her treatment was so effective that the patient no longer needs blood transfusions. Classically commentators have said that GB 39 eliminates fire damaging the marrow to rebuild liquids and essences. It is heartening to see these points be so helpful in such severe cases.

It is interesting that the Systematic Classic Jiayijing 甲乙經 refers to this point three inches above the lateral malleolus as right on the beating of the artery. We could compare this to LU 9 Great Abyss, tai yuan 太淵, on the radial artery at the wrist, which importantly is the meeting point for the mai 脈, the blood vessels. The text calls GB 39 the Triple Yang Connector of the Foot, zusan yangluo 足三陽絡. Hence all three yang meridians of the leg are considered to meet here, giving even greater emphasis to its key function of supporting the bones in the leg and their correct movement.



Several of the classics emphasise the importance of GB 39 for various problems of the legs

It is interesting to note SP 6 Three Yin Crossing, san yin jiao 三陰交, also three inches above the medial malleolus, mixes the three kinds of yin qi at the same level and acts as one of the major points to treat spleen, liver and kidneys together, hence for example its important use in gynaecological disorders. GB 39 may well have a similar function for the three yang of gall bladder, stomach and bladder, which give force and power to the skeletal and muscular structures from head to toe.

I remember being told when I was studying in Chengdu in China 40 years ago that GB 39 was a point they used to prevent wind-stroke. This ability to regulate the three yang qi of the head that meet at a point on the beating of an artery in the leg – a point which is considered to deeply nourish the marrow, and therefore by implication the blood and the brain – may well be part of the reasoning behind it. Classically wind-stroke was mentioned in the Great Compendium Zhenjiu Dacheng, where it also lists irritability and agitation, oppression, resentment and sadness, so these emotions in combination with a tendency to stroke would certainly point to GB 39 as an excellent point to consider.

Several of the classics emphasise the importance of GB 39 for various problems of the legs. The Suwen says the leg bones are without strength and deeply painful. Sun Simiao says GB 39 masters wind with tiredness and a heavy body, emphasising very painful bi 痺 blockage with dampness and swelling, with all joints intensely painful and shaking of the leg bones. The Great Compendium includes wind-stroke with paralysis and turning of the feet and hands. Another text mentions using it in lateness in walking as a child. Again we see GB 39 used for a variety of severe and debilitating disorders.

As with many of the gall bladder points, GB 39 helps the meridian qi to circulate, particularly when there is abdominal congestion, heat in the stomach and no desire to eat. This may also bring fullness and distension in the heart and chest area. Finally, it is also a distal point to remember in stiff neck with local points, for example GB 39 with GB 20, BL 10 and SI 3. Here its role as the triple connector of the three leg yang make it a suitable point to move stagnant qi from a distance.

So here we have this useful and important point, a must for serious clinical work, expelling wind and damp, marrow, blood and bone builder, reconstructing in severe cases, bringing renewed strength and re-establishing the power to walk. Blood pressure lowerer, negative emotions disperser, GB 39 frees up stagnant qi to bring relief to the intestines, stomach and heart, while guarding against the threat of wind-stroke.

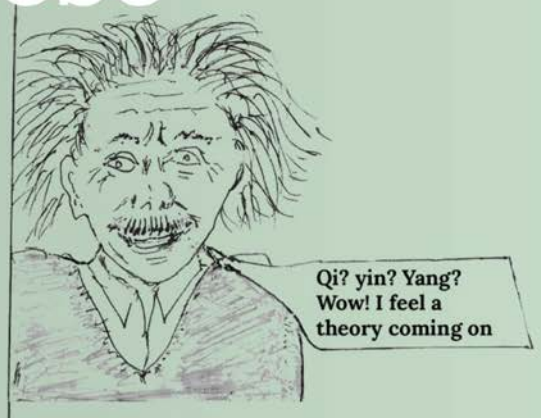
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Reconciling science & Chinese medicine

06 June 2023 | Long read



Kim Wells
Member: London



In this season of transformation and renewal, Kim Wells talks about – and illustrates – his personal quest to jettison the psychological clutter of his past and reinvent the way he looks at science in relation to medicine.

For many years I have been dogged by an unresolved conflict: that between allegiance to the systematic evidence-based, mechanistic approach of 'science' and the more faith-based, energetic (and sometimes 'airy-fairy') one of 'alternative' and Chinese medicines.

This conflict has got me into numerous arguments – including quite a few with myself – and writing articles has helped me to resolve it. This has been a transformative and liberating experience for me. Inner conflicts can be hard work.

Our profession is also in conflict as regards science. It seems to me that a sizeable proportion of practitioners have a sceptical and even hostile attitude towards science – they tend to be resistant to scientific scrutiny. Many more are ambivalent.

There is nonetheless a growing recognition that we, as a profession, need to adopt a more scientific approach in order to defend Chinese medicine against assaults on its legitimacy.

Having myself been highly sceptical about the institution of science, I now strongly believe this is the path we must take. I also believe we need to be much more resolute in pursuing it.

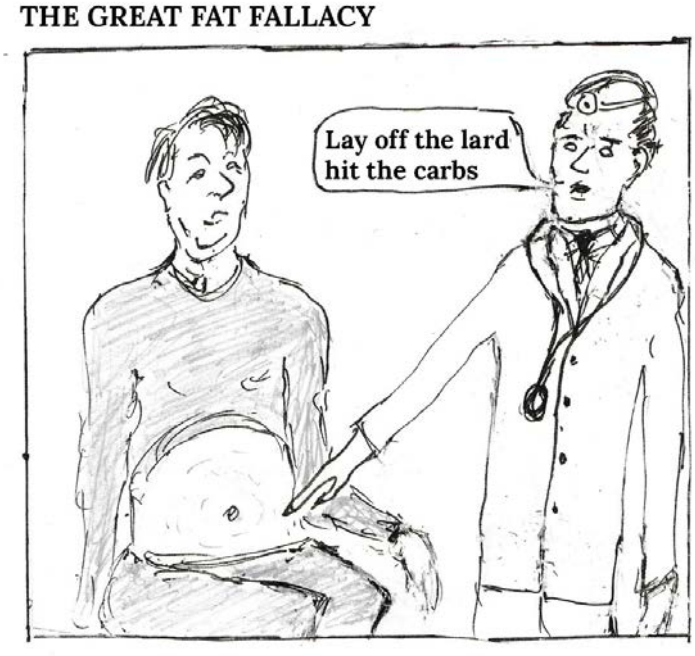
Like it or not, in order to thrive – and maybe even survive – Chinese medicine in the West needs to reconcile itself to the fact that, as the predominant legitimating institution, science holds most if not all of the cards.

Riding the pendulum of belief

I have always felt strongly about science. In the 1960s, I studied science A levels, then sociology and philosophy of science, firmly committed to the scientific perspective. As an educational researcher, I conducted the highly statistical Reading Surveys of England and Wales (1970–72).

However, when I got involved in the New Age Movement in the mid-1970s, I became not just disillusioned with medical science but vehemently anti-science. When I started practising acupuncture in the late 1980s it was easy to maintain this cynical stance. Medical science had invited particular criticism from the 1950s onwards due to the reckless overprescribing of drugs like barbiturates, tranquillisers, steroids and thalidomide.

Along with many 'alternative' therapists, I dismissed medical science and orthodox medicine in general as mechanistic and reductionist, self-aggrandising and unempathetic, in hock to Big Pharma, and gung ho with the prescription pad. I also uncritically parroted alternative medicine's mantra 'treat the cause, not the symptom; the person, not the disease' – a view I questioned in an article in EJOM, 10,1. More recently, I have been radically reassessing this one-sided view.



"Don't confuse me with the facts: my mind's made up!"

Through the last half of the twentieth century, nutritional science (backed by the food industry) clung doggedly to the now discredited scientific orthodoxy that excessive fat – not sugar – was the foremost dietary cause of heart disease. This was despite mounting evidence to the contrary and the burgeoning obesity epidemic. ('The Sugar Conspiracy', The Guardian, 7.4.16)

It is true that medical science has sometimes too readily endorsed suspect treatments and has served interests other than the pursuit of truth. It has also made overblown claims about its proficiency and objectivity. This behaviour has created unrealistically high expectations that have inevitably resulted in a backlash of disillusionment and distrust.

Despite an avowed ethos of open-mindedness and critical self-appraisal, medical science has sometimes been stubbornly closed to new ideas. For example, it has sometimes victimised those it regarded as heretics, such as John Yudkin who, in 1972, challenged the now discredited scientific orthodoxy that ingested fat – as opposed to excessive refined carbohydrate intake – was the foremost dietary cause of heart disease.

Nonetheless, I began to realise that 'alternative' medicine's tendency to overly focus on science's aberrations and shortcomings – sometimes to the point of demonising it – has led to its strengths often being overlooked.

Science and 'scientism'

I had fallen into the trap ensnaring many a lofty idealist: totally rejecting something because it is flawed. More precisely, I had been confusing science with 'scientism': a term applied when 'science' – or what purports to be science – overreaches itself and expands beyond its proper boundaries. This occurs when science's capabilities are overstated, its kudos is appropriated, its modes of understanding are universalised, or its methodology is inappropriately applied.

Science's idealised image has allowed it to function as a marketing brand conferring value on any idea, technique or product to which it can credibly be attached. More ardent advocates and starry-eyed admirers have at times endowed science with an all-seeing, godlike potential to divine the truth and fix all ills. Scientists have been accorded magical powers once attributed to sorcerers and soothsayers.

However, strip away the excesses and there is a very positive side to science: a spirit of inquiry and critical appraisal backed by institutional safeguards like peer review and stringent methodological guidelines. The latter are designed to counter bias and ensure evidence is gathered in a systematic, transparent, replicable way. And when individuals inevitably err, this institutional framework limits the leeway for this. Of course, there is also a need to adapt scientific methodology to fit the subject matter in question - and to recognise that there are severe limits to what can be measured.

This approach of separating the purer, humbler essence of science from its overblown alter ego 'scientism' seems far preferable to throwing the baby out with the bathwater.

Filtering fact from fancy

Medical science may well be biased against 'alternative' therapies but its methodology has also been applied against unscrupulous pharmaceutical companies – albeit sometimes somewhat tardily – to expose their spurious claims. Paradoxically, it might even ultimately serve the cause of alternative medicine by reining in irresponsible and deluded therapists who make extravagant, unsubstantiated claims.

Despite its limitations, scientific methodology, when appropriately applied, generally provides a more transparent, less fallible means of filtering fact from fancy than the alternatives. Most of these rely largely on anecdotal, non-systematically gathered evidence, faith, intuition and conjecture, with no formal controls for bias.

Chinese medicine is largely legitimated by tradition, having been tried and tested over centuries. But although probably largely effective, this validation method is non-systematic and as we know, carries much less weight in the West.

Scientific methodological procedures may not ensure consistent reliability and validity but they do represent concerted, regulated and replicable attempts to achieve these. For instance, repeating studies or testing the same hypothesis using different research designs enables the retrospective identification of outliers, whose findings are liable to be suspect.

The downside is that medical science in practice tends to be in a rush to extensively market newly patented medications. Often insufficient time is allowed for adequate testing – and retesting – and strict safety monitoring.

Fairness on both sides

'Alternative' medicine has tended to focus on the dangers of orthodox medical techniques – sometimes overlooking the dangers that might stem from failing to use them or resorting to them too slowly. Antibiotics, for instance, have been vilified despite their sometimes crucial life-saving properties.

Underlying this standpoint is the utopian assumption that medicine can be risk-free, yet still effective; that it can have benefits without costs, effects without side effects. While this may be true to a limited extent – especially in fundamentally healthy individuals – for serious, entrenched diseases like cancer, as yet, there seems to be no uncompromised elixir. Treatments without side effects are unlikely to have much or sufficient positive effect either. Where thought necessary, TCM clinicians in China prescribe western medications alongside traditional treatments.

HYDRO-CRANIAL MACRO-ACROBATIC THERAPY



"The great thing about hydro-cranial macro-acrobatic therapy is it doesn't have any side effects. It doesn't have any effects either but at least it's safe."

Western medicine has learned from some of its mistakes – now recognising, for instance, that antibiotics undermine immunity. And Chinese and 'alternative' medicines have played important roles in pointing to the shortcomings of medical science: the hegemony of orthodox medicine has been challenged with some success.

But proponents of alternatives – myself included – have sometimes been markedly reluctant to acknowledge their limitations or the benefits of medical science. Is it reasonable – and realistic – for us to expect open-mindedness and even-handedness from medical science if we stay in our tribe, remaining closed to it and dismissive of its benefits? A sense of fairness cuts both ways.

If you can't beat them...

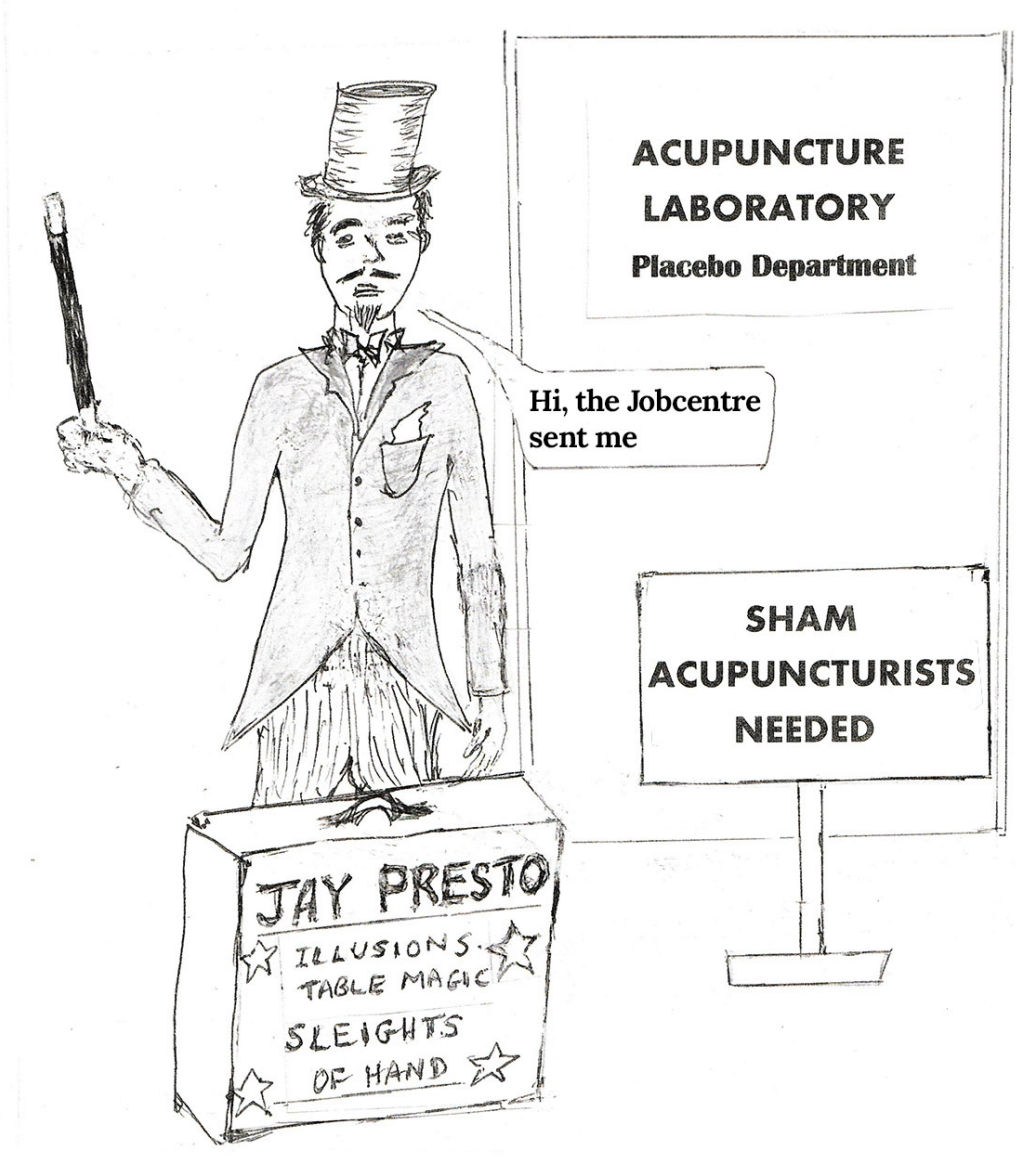
In the contest for legitimacy, medical science ultimately holds the trump card. As the predominant legitimating institution, it largely determines the way in which medical resources are allocated. It also affects the willingness of the medical profession and media to endorse any form of treatment, including non-orthodox.

No matter how sceptical, wary or mystified we Chinese medicine practitioners are as regards medical science, the scientific establishment is becoming increasingly difficult to ignore or sidestep, not least because of the tightening regulatory framework.

One relatively recent restriction in Britain is that practitioners are not allowed to publicly claim they can treat or even address a condition unless they can refer to consistent, scientifically validated evidence. This requirement surely provides us with an added incentive to accelerate the adoption of a more systematic evidence-based approach; and to engage constructively with the medical and scientific establishments to persuade them to adopt more appropriate and even-handed ways of evaluating Chinese medicine.

RCTs and the placebo fixation

A major sticking point is that advisory agencies like the National Institute for Health and Care Excellence (NICE) insist on the use of the random, placebo controlled, double-blinded trial (RCT) with 'sham' acupuncture as placebo. They have made the questionable assumption that the reason 'sham' acupuncture significantly outperforms more mundane placebos like sugar pills is due solely to it creating greater positive expectations.



Lobbyists representing the acupuncture profession have claimed instead that far from being inert, so-called sham acupuncture has effects similar to those of real acupuncture. This is liable to result in the underestimation of the effect size of the 'real' form when compared to the 'sham'.

Another problem is that RCTs do not readily accommodate Chinese medicine's bespoke approach of tailoring treatments to fit individual patients. This is because the RCT format is designed to test one-size-fits-all standardised therapeutic interventions. This means that much of the expertise and ingenuity underpinning the practice of Chinese medicine – often crucial to its success – is factored out by the research design.

It has been extensively argued that a more appropriate way of assessing the effectiveness of multi-component, skills-based therapies such as acupuncture, psychotherapy and surgery is to use 'pragmatic trials'. In these trials, outcomes are compared with those of other therapies or 'usual care' in real-world settings, rather than with artificial experimental ones. This allows therapists to use their clinical judgement to tailor their treatments to meet patients' individual needs. The contribution to healing outcomes from the 'therapeutic relationship' and related factors like lifestyle advice are also acknowledged as valid. Pragmatic trials also avoid the ethical concerns and methodological problems associated with using placebos.

That said, despite their limitations – and alleged incongruence with acupuncture – RCTs have one major advantage over pragmatic trials. Although limiting the ability to generalise their results to real-world settings, their strictly controlled nature allows control for confounding variables – in addition to the placebo effect – which might lead to biases and spurious associations.

Whereas pragmatic trials are suited to ascertaining whether therapies are effective overall, RCTs can within limits determine which particular aspects of treatment are effective and to what extent. These benefits – and the likelihood RCTs will persist as a political fact of life – provide compelling reasons for seeking to reconcile them with acupuncture, an approach advocated by the Society for Acupuncture Research.

This will not be easy, given the seemingly intractable problem of finding a mutually acceptable acupuncture placebo or, alternatively, convincing medical science that placebos may potentially introduce more sources of error than they counteract. Another approach is to challenge the whole, rather nebulous notion of the placebo effect, seen by some scientists as highly problematic.

Unfortunately, in recent years NICE has been remarkably unreceptive to the profession's entreaties for a fair hearing on these issues. The validation criteria it has applied to acupuncture especially since 2016 can be seen as not just inappropriate but inconsistent, discriminatory and arbitrary.

This is not so true of some other advisory agencies like the National Institutes of Health (NIH), the US government's medical research agency. NIH has acknowledged the unresolved inadequacies of RCTs – it now prioritises pragmatic trials for acupuncture and 'strongly discourages' research submissions comparing verum and sham forms. Perhaps there may be an element of open-mindedness in the scientific community that can be appealed to.



The Acupuncture Wars

The Chinese medicine community in the West is deeply divided in its attitudes towards science, a situation documented by Linda Barnes in her Massachusetts-based study, The Acupuncture Wars (2003).

Barnes observes a polarisation between a substantial proportion of practitioners who take a resolutely oppositional stance towards science and those who seek to come to an accommodation with it with a view to gaining greater legitimacy in the eyes of scientific and medical establishments. She quotes Bob Flaws who caricatures the former (perhaps unfairly) as those who 'practise Oriental Medicine as part of a larger "spiritual journey to the East"' as distinct from 'secular professional medicine'.

A study by Jackson and Scrambler (2007) suggests resistance (and ambivalence) to scientifically endorsed, evidence-based validation may also be common among British practitioners.

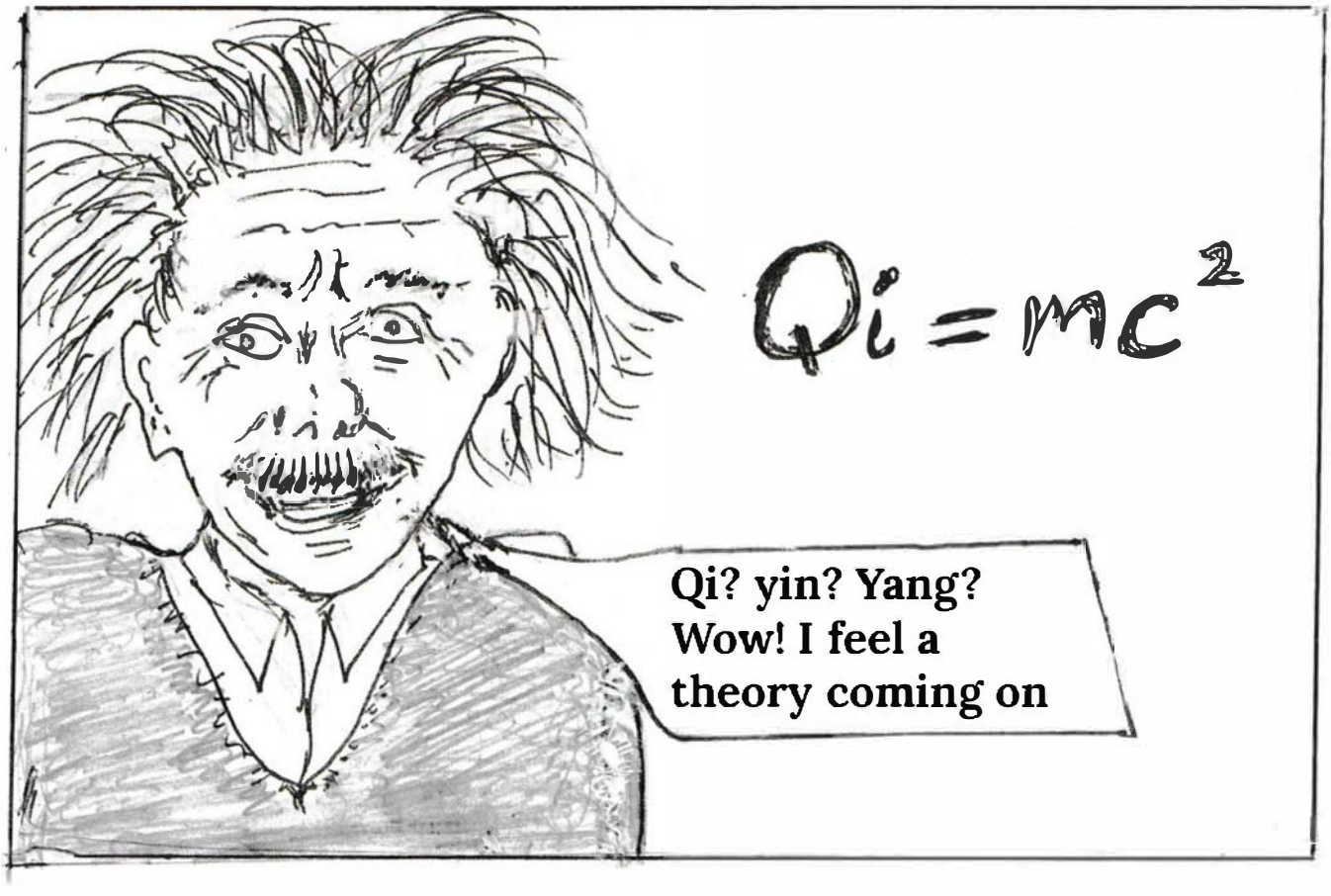
Those practitioners taking a hard-line stance against scientific encroachment believe Chinese medicine can not be reconciled with its culturally imperialistic rival. They fear attempts to find common ground is liable to result in Chinese medicine's 'subordination to (biomedical) paradigms with which it has little in common' (Barnes). They continue to meet the challenge of unwelcome scientific scrutiny by withdrawing into a defensive enclave. To secure limited legitimacy, they piggyback on the more faith-based belief system of 'alternative' medicine.

This strategy has become less viable as scientific scrutiny has been growing. In response, there has been an increasing tendency among practitioners – spearheaded by their more politically conscious professional organisations – to meet this mounting challenge to their legitimacy by engaging in scientifically validated research themselves.

Playing science at its own game

The main thrust of this scientific research has been directed towards evaluating the therapeutic effectiveness of the techniques and treatment protocols of Chinese medicine. However, there has been relatively little, if any, energy put into mounting a scientifically grounded defence of the conceptual framework which originally spawned these techniques and protocols – the very framework that continues to inform the way they are most effectively employed.

EINSTEIN'S SPECIAL THEORY OF LONGEVITY
A puzzle a day keeps Alzheimer's away



There is a need to speak to scientists in a language they understand and to take on science at its own game. The logic of science – that has led to qi, the climatic analogy and other building blocks of Chinese medicine's theoretical framework being dismissed as 'pseudo-science' or mysticism – can equally be harnessed in their support.

The failure to mount an effective scientifically literate defence of Chinese medicine's conceptual foundation leaves it more vulnerable to exactly what those practitioners hostile to and wary of science fear: that it will be subsumed under biomedicine's own paradigms. This could mean acupuncture becoming a bog standard technique in biomedicine's therapeutic armoury – earmarked predominantly for pain relief – and Chinese medicine in general reduced to a dubious adjunct wheeled out when conventional approaches fail.

The war within: resolving inner conflict

I have come to see my evolving relationship with science as an inner, personal journey: a quest to reconcile East and West, Chinese medicine and science, within myself as well as on an institutional level.

The splits and conflicts within my psyche have mirrored those occurring between science and Chinese medicine and within the profession itself. It is a journey that many of my fellow acupuncturists have also been undertaking.

My views have ranged from idealisation to demonisation, from blanket rejection to conflicted ambivalence. You name it, I have the banner and T-shirt!

Hopefully, I have now achieved a more nuanced, balanced and open-minded view. I believe, perhaps naively, that science is not the intrinsically doctrinaire and absolutist monolith I once considered it to be. Instead, I see it as a broad church, sufficiently flexible and open – if persuaded – to accommodate Chinese medicine within its overarching philosophical and methodological frameworks.

I may well be being wildly optimistic but I can envisage concepts like qi and the climatic analogy one day featuring in scientifically validated theories. Coming up in EJOM 10,2, I will attempt to give some credence to this prospect by making a case for qi to be considered as a potential scientific concept.

Mind you, I may not have remained so optimistic if I had been one of those valiant BAcC negotiators combatting the uninformed and stubbornly blinkered stance of NICE.

This article is mainly based on a longer one originally written for the European Journal of Oriental Medicine: 'The Battle for Legitimacy: Science, Medicine and the Politics of Validation' (EJOM 9:6, 2022). My special thanks to Charlie Buck and Ian Appleyard for providing valuable background information, particularly on their frustrating negotiations with NICE.

All artwork for this article is created by the author.

Acu.

Official thinking

04 April 2023 | News & views



Pia Huber
Member & BAcC & GB Chair

From quickening shoots to Acupuncture Awareness Week, Pia Huber shares her latest thoughts on BAcC business and governance.

This March marked two years since I was properly elected chair of the Governing Board. I had already served half a year as interim chair when Sarah Attwell decided not to return from maternity leave. And so my tenure continued.

Being chair has been a learning curve for me and I am grateful to all Board members who have allowed and helped me to grow. But of course, my growth is no use unless the BAcC is also developing and growing.

I believe that we are on the right track, despite being fully aware that many members feel the pace of growth is slow – maybe too slow – and I often share their sentiment and frustration. It is helpful then to hear our Board's experienced lay members remind us all that development and growth take time and should not be rushed.

In front of me now I see my amaryllis. A friend gave me a bulb to grow and I planted it at the end of last year. For a long time nothing happened. Then suddenly very tentatively the top of the bulb seemed to change and very slowly what looked like a leaf pushed through. It turned out to be the flower bud, now about two feet tall with a second bud appearing just a week ago. A month after the first sign I am still waiting for the flower to open – I just have to trust that I have watered and kept it correctly for it to bloom.

The BAcC went through a couple of rough patches, the last being of course the pandemic which affected us all. But we have worked through this time and I feel renewed energy is now slowly beginning to show some green shoots.

Caroline Hedges, our communications manager, presented her proposed programme for 2023 at our December GB meeting. It is our job to evaluate whether what she has planned supports the BAcC's overall strategy. We need to place our funds carefully and look for the highest possible impact with the limitations we have. I have learnt that my own clinic promotion is a piece of cake compared with the promotion of a professional body.

As much as we would love to go out and tell everyone the miracle acupuncture can be, we have to be mindful of many factors, including the reputations of our nearly 3,000 members. Still, I hope that many of you joined us in promoting traditional acupuncture during the big Acupuncture Awareness Week initiative, organised by Caroline and staff team in the last week in March. Hopefully awareness will indeed grow as a result of the re-emergence of this event.

I was greatly encouraged recently when one of my community acupuncture patients told me she had mentioned she was receiving acupuncture to her GP – only to hear them saying, 'Wonderful, this is a great and helpful therapy. I need to make a note of this happening here'. This was followed by another patient who, when I asked her why she was seeking out acupuncture for fertility, told me that all the fertility consultants she had seen suggested she get acupuncture to support her wish to conceive.

Of course, I am well aware that many of our older colleagues have worked tirelessly in their acupuncture clinics to get us to where we are today. To all of them I say a big THANK YOU! – and yes, there is lots more to do.

A few final words about Acu. moving online. I confess to being one of those who love having a book in their hands and reading printed material. At the same time I have gradually moved to reading my daily newspaper online – via my mobile or computer – as well as lots of other information.

Lately, whenever I look for an article in JCM or some other journal, I quite happily use the handy search function to find what I'm looking for. I have also found myself reaching for my laptop to read something in Acu. whenever I have some spare moments in my clinic – without having to carry an issue back and forth or missing it when the moment arises.

I am especially looking forward to the new audio and video possibilities that Acu. online has to offer. But whatever the format, I always love reading our members' magazine for the amazing stories and knowledge that our community of colleagues are so willing to share. I hope you do too!

Acu.



Poem: Equinox

04 April 2023 | Treats

Peter Deadman

BAcC Fellow: East Sussex

I wrote this poem on the day of the spring equinox last year, when the war in Ukraine was already raging, and the news was full of global heating and environmental breakdown.

Equinox

All things being equal,
We might get through this –
The sun getting hotter
Dark thunder rolling in the East
Yesterday I walked with a friend and told him
the end days have begun.
They're coming in a slow wave that cannot be stopped
It's not that I'm a pessimist, I said,
Nor an optimist.
Just a realist.
He replied... Look at the violets in the grass
See the birds wheeling in the sky
Soon there'll be the ripe fruits of summer.
Humans are also good
And nature has great powers
Of restoration.
This very night
light and darkness
Are held in perfect harmony
All things being equal
We might just get through this



Peter has worked in the field of health education and practice for over five decades. Nowadays he considers himself a writer and a teacher, and practitioner of qigong.

Acu.

Study in green

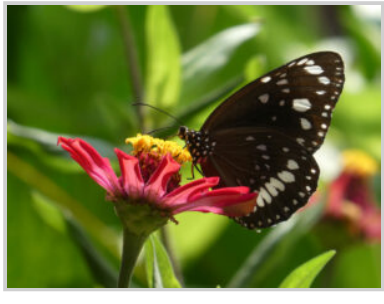
04 April 2023 | Inspiration



Rev Deb Connor
Member: Merseyside

Love it or hate it, what makes the colour green so provocative? Rev Deb Connor explores some of the reasons that may be behind our reactions.

The vibrant jungle greens offset with bright flowers, butterflies and birds lit up my creative imagination. Dancing in the heat of a tropical downpour with workshop participants, then photographing the glowing wet greenery while breathing in that sweet post-rain smell took my artwork down a green and interesting path.



Butterfly on Flower soft focus



After the rain Ubud Bali



Serendipity

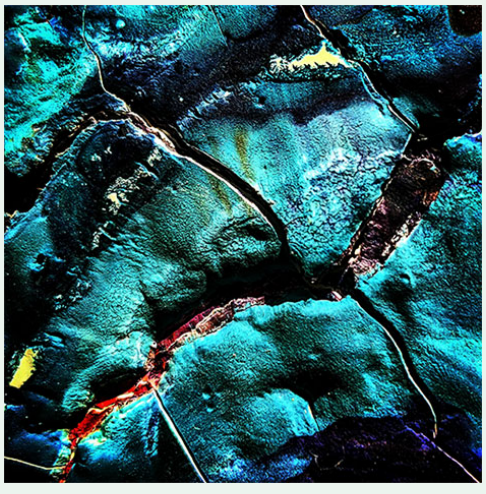


Stones Sacred Monkey Forest Ubud Bali

There is a Buddhist allegory about the colour green. In a dream a young boy sees a deity instructing him that everything he desires will be his, all he must do is close his eyes and not picture sea-green. There are two possible endings. The boy eventually succeeds thus achieving enlightenment. Or he becomes consumed by his unrelenting failure and his life and sanity slip away.

In Feng shui practice green represents the family area and brings calm, balance, restoration and growth, prosperity and abundance. And in the West green is associated with the rituals of spring.

Traditionally court members were required to wear green on the first day of May. Known as ‘wearing the May’, a leafy crown, garland or other prominent green clothing was worn. Anyone showing themselves without this colour was loudly mocked. A bit like showing up to school in uniform on mufti day – oh, the humiliation!





The phrase ‘to be green’ meaning inexperienced has been in use since the Middle Ages. But despite positive associations with healing, fertility and youth, green has had somewhat of an image problem in western culture. Perhaps an ancient taboo against mixing blue and yellow to create green dyes and pigments is what laid the way for green’s rocky PR campaign.

It’s difficult to understand from our modern-day perspective that mixing two substances was once both frowned upon and mistrusted. In some countries anyone caught dyeing cloth by dipping first in woad (blue) then in weld (yellow) could face large fines or even exile. It has been suggested a distrust of alchemists and their mixing of elements had influence on these harsh repercussions for the textile artists of old.

Painters were also challenged by the lack of quality green pigments. The 17th century Dutch artist Samuel van Hoogstraten lamented, ‘I wish that we had a green pigment as good as a red or yellow. Green earth is too weak, Spanish green [verdigris] too crude and ashes [verditer] not sufficiently durable.’

The taboo around colour mixing began to disappear around the time of the early Renaissance and artists blended their own green paints – at least until the discovery in 1775 of copper arsenite by Swedish chemist Carl Wilhelm Scheele. Scheele’s green became the new fashionable shade.

And here comes another nod to the green image problem – this very association with copper arsenite sees green becoming 'the colour of poison'. Scheele's green together with its close cousin emerald/ Brunswick green were responsible for numerous deaths – as homes were decorated, clothes made and even food wrapped in the attractive new shade that unfortunately contained lethal doses of arsenic!

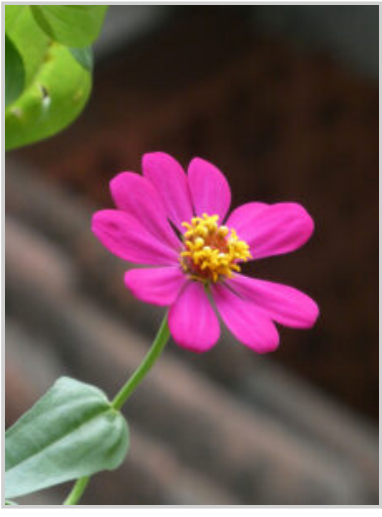
Wassily Kandinsky had a, perhaps irrational, dislike of green. He wrote: 'Absolute green is the most anaesthetising colour possible... Similar to a fat cow, full of good health, lying down, rooted, capable only of ruminating and contemplating the world through its stupid, inexpressive eyes.'

Even so, Kandinsky's words won't see me rushing to repaint the walls of my clinic – I love the cool calming shade of green called simply 'Zen' that adorns them.

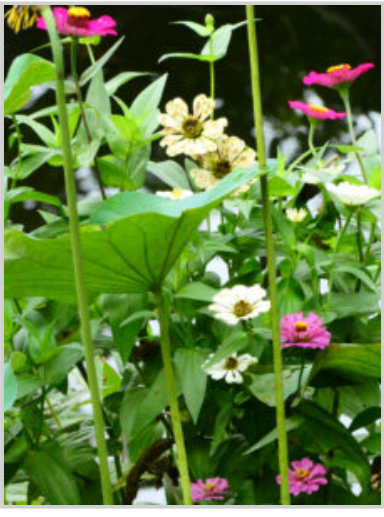
Image 1 above: Cracks in Green
Image 2 above: The creative process holds me

My own artistic explorations with green are ongoing. For me creating with green has come to represent growth, healing, a recovery of balance and grounding to the earth which can be dramatically contrasted or overlaid with traditional associations of jealousy, envy, inexperience and poison.

But enough of words – I will let the art speak for itself.



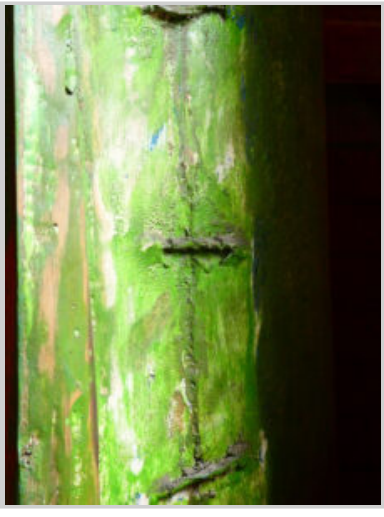
Spring Flower



Flowers in Ubud Bali



Sitting with the healing energy of green



The unused door

Acu.



Who where what when witch wu spring

04 April 2023 | Inspiration

Sandra Bird
Member: Lincolnshire

My first thoughts? I am knowingly writing this for Acu. online – even when I have so far found it challenging to accept the move away from print. Surely there must be some growing and flowing of spring energy going on here!

Spring is sprung
the grass is ris
I wonder where the birdies is

They say the bird is on the wing
But that's absurd
the wing is on the bird.

I cannot begin to think of spring without reciting, sometimes in my head and other times out loud, this childhood favourite poem. I have always believed it to be penned by Spike Milligan.

But in writing my own homage to spring I have discovered that – although often attributed to Ogden Nash and made famous by Spike Milligan – its origins possibly go back much further, with several variations, and the author was most likely that most famous and prolific of all 'Anonymous'.

This discrepancy is to me quite indicative of the whole question of and various answers to 'when does spring begin?' Of course, we all know that the Chinese New Year begins with the Spring Festival on varying dates according to the lunar and solar calendars.

And this Year of the Yin Water Rabbit is going to be a good one – I have decided and proclaimed that. Because I turn 60 this year and 60 is special, right? Even, one might say, auspicious.



It's just a natural tendency for me to investigate a question by exploring no end of rabbit holes

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Anyway, back to my question of when does spring start. According to my go-to source of all things UK time and space related, the Royal Observatory Greenwich, there are three main starts to spring.

There's the meteorological start on 1 March, the astrological start at the vernal/spring equinox around 20 March, and the phenological, starting on varying dates depending on when the first daffodils bloom and animals come out of hibernation. Hmm, a bit tricky to pin that last one down…

But of course, there are other traditional beginnings to spring too. Imbolc falls on the midpoint between the winter solstice and spring equinox – although this now seems to be celebrated on 1 or 2 February along with St Brigid's Day, Candlemass, and Groundhog Day, regardless of when the midpoint actually falls.

Incidentally, the midpoint fell this year on 4 February, which I am reliably informed by my 2023 Chinese Astrology Calendar is the day that the Rabbit energy fully arrived with us. But please don't ask me to elaborate on that last little snippet of information. I'm only just beginning (make that scratching the surface of) my learning journey into stems and branches.



Just going back to St Brigid for a moment, if I may. There appears to be some disagreement as to who is actually celebrated on her day. Is it the Christian St Brigid of Kildare, matron saint of Ireland? Or is it the Celtic goddess of fertility, spring and life, Brigid/Brigit/Bride/Bridget? There's good reason to believe that it's actually both, as you can explore in this little gentle detour of discovery.

Bouncing forward to spring again. In my experience – taking into account that spring is the season when we emerge from our sleepy wintering, start gently moving and growing, putting our dreams and visions into action, making changes, feeling motivated once again – it just seems to occur energetically speaking sometime around the end of February/beginning of March. Or to put it another way, it all starts happening in the two- to three-week lead up to the spring equinox.

Another final mention here for the rabbit, an animal often associated with all things spring. As I write this in the rabbit month, let me put into the equation that I am also a rabbit – and as you'll have noticed, it's just a natural tendency for me to investigate a question by exploring no end of rabbit holes, thus finding many interconnected answers.

Drawing all this back in to make sense in terms of acupuncture – and with the improved clarity of vision that comes with spring – one thing at least is becoming clear to me. Getting to know the stems and branches will be The Way to connect all the dots and dates in order to keep in flow with the constantly moving seasons.