

# The Acupuncture Spectrum

## Transactional Medicine

1. Acts on the body with procedures to oppose the overt expression of disease, and hence control it
2. Projects intention to control the expression of disease, and thereby seeks to restore balance
3. Health care seeks to diminish suffering by managing the expression of disease to reduce the severity of symptoms
4. Practitioners frequently use insertion tubes to penetrate the skin quickly, because needling the surface hurts, especially if one has not cultivated good training
5. *Déqì* is performed by stimulating the needle to entice *qì* to come; this procedure is apt to degrade into seizing or forcing the *qì* (*duóqì*)
6. Applies therapies to oppose the manifest expression of distress, as categorized into symptom-sign complexes
7. Focus on outcomes, which are measured in symptomatic relief; based in controlling expression rather than liberating it
8. Teachers transfer clinical doctrine that classifies the symptomatic expression of distress into syndromes of the *zàngfǔ* (mostly *zàng*)
9. Organizes, refines, and extends information to yield ‘standards of care’ (protocols); seeks (modern) scientific proof of therapeutic efficacy
10. Guided by analytical thinking, which (re)constructs a conceptual model of the world (‘scientific’ theory), which uses mathematics to simulate perception of movement
11. Conspiracy between the practitioner and patient to dominate the patient’s condition
12. Characterized as ‘coarse’ in *Língshū* 1, lines 2 & 3 (my translation); attends to the form and gates (*guān*), which may refer to ‘crux points;’ this leads naturally to interest in, and reliance upon, fixed protocols documented in historical texts, which presumably have reproducible effects

## Transformational Healing

Elicits responsiveness from the embodied spirit to facilitate and enhance its vital functions

Focuses attention to facilitate the embodied spirit to release, expel, or transform its blocks

Expressive healing facilitates release or other resolution of factors causing blocks, and thereby softens suffering by supporting intrinsic flow

Practitioners recognize that needling frequently hurts at the skin surface, because there is a lot of *qì* there; they wouldn’t consider skipping this *qì*, but instead learn to play with it until it opens

*Déqì* is elicited by being clear and tranquil (*qīngjìng*) in holding the needle to allow *qì* to arrive: opening then closing ‘resets’ the *qì*

Identifies the nature and location of blocks (pathogenic factors), and elicits responsiveness to restore intrinsic and vital movements of life

Focus on supporting intrinsic healing process, which often includes expelling previously tolerated and somatized pathogenic factors

Teachers transmit clinical strategies that rely on one using symbolic images and ‘theories’ (*shù*) to discern the dynamics of process and exchange

Seeks to perceive the flux of individual life, and interact with it to facilitate release of stagnating factors to resolve the distress they cause

Guided by analogical (symbolic) thinking, which notices patterns, then simplifies the field of view (*shù* as theory) to differentiate the dynamics of movement and process

Willingness to release vital process and simply trust the intrinsic wisdom of life

Characterized as ‘superior’ in *Língshū* 1, lines 2 & 3 (my translation); attends to the *shén* and crucial dynamic (*jī*):

the moving power (*dòng*) of the crucial dynamic (*jī*) cannot be separated from its empty space (*kōng*) [line 3.3]

the crucial dynamic (*jī*) at the center of this empty space is clear (*qīng*) and tranquil (*jìng*), and it is thereby subtle (*wēi*) [line 3.4]