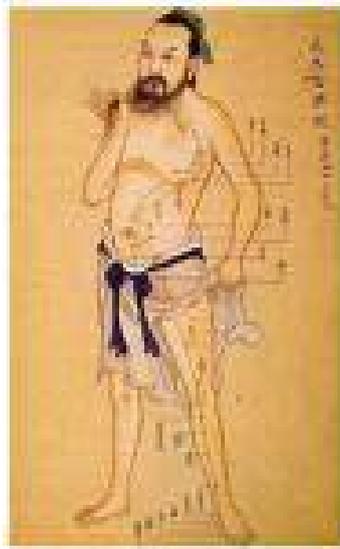


The Extraordinary Channels



A Protocol for a Psycho-Emotional Application of Extraordinary Channel Treatment with Acupuncture

by Damian Carey

CONTENTS

	Page
Acknowledgement	2
Introduction - The Paradox of the Extraordinaries	3
Literature Review	4
The Four Primary Extraordinaries	5
Du Mai	6
Ren Mai	7
Chong Mai	8
Dai Mai	10
Treatment Methodology	11
Discussion	13
Conclusion	14
References	15
Notes	16
Appendix One: Extraordinary Case Studies	17
Appendix Two: Functions, Indications, Pathways and Points of the Eight Extraordinaries	19
Du Mai	19
Ren Mai	21
Chong Mai	22
Dai Mai	23
Yin Chiao Mai	24
Yang Chiao Mai	25
Yin Wei Mai	26
Yang Mei Mai	27

Acknowledgement

This paper has grown from my original training as an apprentice to Graham Townsend in Adelaide (South Australia) from 1988 to 1990. Graham specialises in Extraordinary Channel treatments. He has also developed a systematic approach to pulse diagnosis and has expanded the traditional emotional correspondences of the organs to a sophisticated level of psychotherapy. These latter two areas are fully described in Graham's book *Pulses and Impulses*. (Townsend & Dedonna, 1990) However, apart from a brief workshop manual, Graham has not yet published any of his research or ideas about the Extraordinary Channels.

I will always be indebted to Graham for his generous teaching and initiation into the world of the Extraordinary Channels. Nonetheless, after working regularly and specifically with Extraordinary Channel treatments over fifteen years of clinical practice, and having developed my own ideas and insights, I must take full responsibility for the expression of the concepts presented herein.

The case studies of Appendix One are taken from my own clinical practice. Appendix Two is standard TCM theory, sourced from a variety of the texts listed in the References.

Damian Carey

Introduction - The Paradox of the Extraordinaries

The origins of Chinese Medicine coincided with the development of a philosophical world view. The Taoist observation of the natural world gave rise to an understanding of the human body as being a bridge between Heaven and Earth and therefore reflective of the greater cosmos. This fundamental polarity was demonstrated in the esoteric anatomy of the human body: early scholars arrived at the notion of a central axis in the body around which flowed the Conception and Governor Vessels*. (*Chien-min, 2002*) Therefore the Conception and Governor Vessels are critically important to the health of the human body. This idea lies behind the strong focus on the Governor and Conception Vessels in the study of Qi Gong. The additional Extraordinaries fitted well into early Chinese Cosmology and could similarly be seen as coinciding with the axial planes. (*Maciocia, 1989, pg. 357*)

Some authors believe that "TCM ... owes its very existence to the mystical world view of Oriental philosophy" and that a far greater emphasis should be placed in TCM education on psychology or the nature of conscious or Shen. (*Watson, 2005*) There is also a prevailing attitude that the Extraordinaries are somehow esoterically important, if only we understood them better!

On the other hand our understanding of the Extraordinary Channels as outlined in the classics consists of brief references which can leave the student with the impression they are merely an elaborate system of overflow channels. Modern TCM texts on the whole repeat this limited view. It is rare to find an author willing to discuss the Extraordinaries at the level of cosmo-biology or who are willing to relate the practice of medicine with the evolution of consciousness. Some authors regard the name Extraordinaries as meaning strange and emphasise their lack of symmetry and the non-exclusivity of their functions.

Let me re-emphasise the title of this paper, and thereby declare my bias: I do not regard 'the eight extras' as an appropriate label. Such a term relegates the Extraordinary Channels to a side issue and demonstrates a lack of understanding of their true significance. The Extraordinaries have not been tacked on to the human energetic system as an afterthought. On the contrary, the Extraordinaries play a significant role in regulating the other channels and are therefore, at the very least, crucially important.

The truth is, that in addition to the twelve ordinary channels, there exists a set of eight extra-ordinary channels.** So what is the true nature of the Extraordinary Channels? Do they have an esoteric application? Is there a way to apply them to psycho-emotional healing? The aim of this paper is to answer these questions by suggesting an alternative clinical application of Extraordinary Channel treatments.

This paper offers a broad discussion of the Extraordinary Channels, beginning with a synopsis of the classic and modern literature, and then introduces a conceptual framework for the four primary Extraordinary Channels and discusses its application in clinical practice. This is a working hypothesis, arising from many years of careful observation and testing. It is well grounded in classical theory and emphasises the psychological correspondences of the Extraordinaries. When we view the Extraordinaries in the manner described in this paper, it opens up a treasure house of practical application and can lead to extraordinary clinical results.

* *The words channels, vessels and meridians are used interchangeably in this paper.*

** *More accurately, we can describe a set of four pairs of channels, namely, four primary channels and their 'inverse' partners. In this paper I will refer to the Primary Extraordinaries (Du, Ren, Chong and Dai Mai) and the Secondary Extraordinaries (Yin Chiao, Yang Chiao, Yin Wei and Yang Wei Mai).*

Literature Review

The Extraordinary Channels are mentioned in varying degrees in the classical texts of Chinese Medicine. The Nei Jing (consisting of the Su Wen, or Simple Questions, and the Ling Shu, or Spiritual Pivot) includes brief references to the existence and location of the Extraordinaries. The Su Wen, in Chapter 1, refers to the Ren and Chong channels as being responsible for conception; the pathways of the Du, Ren and Chong channels (but not the Dai) are briefly described in Chapter 59 (Ni, 1995). Chapter 17 of the Ling Shu contains a brief reference to the Ren and Du channels and Chapter 62 refers to the Chong Mai as "... the sea of the twelve major channels" (Jing-Nuan, 1993). The Nan Jing (The Classic of Difficulties) provides some insight into their functions and indications. Chapter 28 of the Nan Jing states: "... when a person's vessels are swollen and exuberant, [the surplus Qi and Blood] enters these eight vessels ..." (Flaws, 2003, pg. 62).

There are other references to the Extraordinary Channels scattered amongst the early classic texts, but on the whole these are brief and fragmentary. They are discussed more fully in two later Ming Dynasty commentaries: the 1578 AD text by Li Shi Zhen, 'Study of the Eight Extraordinary Vessels'; and the 1601 AD text by Yang Ji Zhou, 'Compendium of Acupuncture and Moxibustion'.

The Extraordinary Channels are included as standard information in most modern comprehensive acupuncture texts; however the discussions are generally brief, reflecting the paucity of information in the classical texts. The most comprehensive discussion of the Extraordinaries can be found in Matsumoto and Birch's *Extraordinary Vessels*. The Japanese master, Yoshio Manaka, made liberal use of Extraordinary Channel treatments, much of which is described in his text, co-authored by Birch, *Chasing the Dragon's Tail*.

Other texts providing useful discussions include Omura's *Acupuncture Medicine*, Royston Low's *The Secondary Vessels of Acupuncture*, *Fundamentals of Chinese Medicine* by Ellis, Wiseman & Boss, Bensky & O'Connor's *Acupuncture - A Comprehensive Text*, *A Manual of Acupuncture* by Deadman & Al-Khafaji and Maciocia's *Foundations of Chinese Medicine*.

Each of these present a different emphasis in their description of the Extraordinaries. Omura states: "Among the 8 Extra Meridians, the Governor Vessel and Conception Vessel play exceptionally important roles, equally as important as each of the 12 main meridians. The remaining 6 Extra Meridians more or less play the role of safety valves." and "... if the regular acupuncture point on the main meridian cannot produce any beneficial effect in chronic disease, then the key point of the extra meridian may produce a dramatic effect." (Omura, 1982, pg 121)

Maciocia states the Extraordinaries "all derive their energy from the Kidney and all contain the Essence (Jing) ... They circulate the Essence around the body, thus contributing to integrating the circulation of Nutritive (Ying) Qi with that of the Essence. For this reason the extraordinary vessels are the link between Pre Heaven Qi and Post Heaven Qi." (Maciocia, 1989, pg. 355)

Bensky and O'Connor describe the Primary [twelve ordinary] channels as being "like the main trunks of the channel system, and the Miscellaneous [extraordinary] channels as branches which diverge from these trunks." They further state: "As a network of conduits criss-crossing the primary channels, the Miscellaneous channels drain and store Qi and Blood from the primary channels when it is excessive and supply Qi and Blood when it is deficient." (Bensky and O'Connor, 1981, pg. 74)

In contrast, Matsumoto and Birch state: "The biorhythmic, cosmologic and prenatal qualities ascribed to these (extraordinary) vessels are a bridge between some of the most intriguing elements of Oriental philosophy and some of the most effective acupuncture practices". (Matsumoto & Birch, 1986, intro. pg v) ⁽¹⁾

The Four Primary Extraordinaries

The general consensus, from the classics as well as modern texts, is that the four Primary Extraordinaries have a significant role in regulating the flow of Qi and Blood in the ordinary channels. This is certainly so with regard to the Governor Vessel (Du Mai) and the Conception Vessel (Ren Mai). The Du Mai has the function of regulating all of the Yang channels of the body and the Ren Mai has the function of receiving and bearing the Qi of all the Yin channels of the body. There is also a strong argument that the other primary Extraordinaries have an equivalent role. The Penetrating Vessel (Chong Mai) is consistently described as the Sea of the Twelve Regular Channels with the function of regulating the Qi and Blood of the twelve ordinary channels. The Girdling Vessel (Dai Mai) does not directly regulate Blood, yet its role is to bind the twelve ordinary channels and to regulate the balance between the upward and downward flow of Qi in the trunk; and Qi moves Blood.

Clearly, all four primary Extraordinary Channels play a pro-active part in governing and harmonising the flow of Qi and Blood throughout the body. I would describe them as prime distributors of Qi and Blood, acting as hierarchical overseers of the ordinary channels and directing their role in the same way that government ministers direct heads of departments and have primary responsibility for their budgets. This is a different emphasis to the normal interpretation of the Extraordinaries as being a network of overflow channels that fill and empty according to current requirements for Qi and Blood in the other channels. One must remember that the human body is not a passive network of pipes and tanks but a highly intelligent system in which mechanical, chemical, electrical and psychological factors operate simultaneously.

Let us re-consider for a moment the Du Mai and the Ren Mai. These two are known respectively as the Master Yang channel and the Master (or should it be 'Mistress') Yin channel. Note the difference between the active, male/yang role of regulating and the passive, female/yin role of receiving or bearing. These descriptions, Male Yang and Female Yin, fit very well with the nature of the Du and Ren Mai. But it also implies the existence of the counter-correspondences: Male Yin and Female Yang. Do such functions exist in the human body?

The answer is, yes. When we combine our understanding of the functions of the Chong and Dai Channels with some elementary psychology, it is easy to conclude that the Chong Mai acts as the Female Yang in the hierarchical network of channels of the body and the Dai Mai corresponds to the Male Yin.

My argument for these correspondences will be developed in the sections on the individual channels which follow. For now, I ask you to consider this hypothesis: the four primary Extraordinary Channels can be regarded as representing four primary states, rather like the first subdivisions of Yin and Yang, namely Male Yang, Male Yin, Female Yang and Female Yin.

These states can be described as four primary archetypes, or energetic potentials, or psycho-emotional states. Remember that Yang is associated with male energy, with action, the intellect and exploration of the external environment; Yin is associated with female energy, with rest, the emotions and with consolidation of the internal environment. When we subdivide these two forces we get the following psychological correspondences:

	Yang	Yin
Male	Assertive action; exploration and regulation of the outer world	Creative action; negotiation with the outer world
Female	Assertive expression of emotion; regulation of the inner world	Restful reception; calm abiding in the inner world

It follows that by using the four primary Extraordinaries in our practice of acupuncture we can recognise, access and modulate the corresponding primary psychological states. Simultaneously we can treat physical disease states at a more fundamental level.

The Du Mai

Functions

The Du Mai is the Master Yang channel. It regulates and governs the Qi of all the Yang channels. It is known as the Sea of the Yang Channels (all six yang channels converge at GV 14).

“The governor vessel homes to the brain and connects to the Kidney. The Kidney engenders marrow and the brain is known as the sea of marrow. Therefore the Governor Vessel reflects the physiology and pathology of the brain and spinal fluid, and their relationship with the reproductive organs.” (Ellis, Wiseman and Boss, 1989)

Commentary

In many ways the spine is the framework of the organisation of the human body. The spine contains the spinal cord from which arise all of the spinal nerves which in turn enervate the vital internal organs. It is little wonder that points of the Du Mai have such potent functions.

The Du Mai regulates the Yang channels of the body, therefore it is associated with Kidney Yang and the Life Gate Fire of the Kidney. Two of the secondary pathways of the Du Mai terminate in the Kidney. Note the spine and the kidneys have a very close connection: the kidneys lie outside the peritoneal cavity close to the spine, unlike the other significant viscera; also, one of the primary tissues of the developing embryo eventually differentiates into skeletal and nervous tissues and part of the kidneys.

One of the Governor Vessel pathways passes through the heart and one of the indications for the Governor Vessel is mental disturbance, therefore we can conclude there is a strong correspondence between the Governor Vessel and the Heart.

Note that the Master and Couple points of the Du Mai are the Yang partners to Heart and Kidney. It is worth exploring the dynamic relationship between Heart, Kidney, Small Intestine and Bladder as it offers an insight into the human energetics involved in the Du Mai. The Small Intestine, or Yang Fire organ, is associated with discrimination and discursive thinking. This gives rise to the human ability, very obvious in the male of the species, to apply single minded mental concentration, otherwise known as tunnel vision.

The ability of the male to focus exclusively on one thing is the force behind the construction, and destruction, of whole societies and their monuments. For example, the builder who wields the hammer, mixes the concrete and places the stone must apply continuous mental focus and physical control in order to get the job done. If he stops to feel how distressing is the sound of the hammer, how drying is the concrete to his hands, how wearying is the weight of the stone, the house will not get built. However, the house is not built through mental concentration alone. The process requires physical drive and raw will. This is supplied by the Bladder which distributes Kidney Qi (the root of will) throughout the spinal muscles and nerves. When Bladder is overworked (excessive physical labour) Kidney Qi becomes depleted, which will often manifest as low back pain. When Small Intestine is overworked (excessive mental activity) Heart Qi is depleted, with subsequent mental fogginess (deficient Heart Blood) or anxiety (deficient Heart Yin).

A Du Mai treatment is appropriate for anyone with high mental stress or subject to intense physical strain. As it happens it is very common for tradesmen to present with low back pain and a high Small Intestine and/or Bladder pulse. A Du Mai treatment, with appropriate local points on the Du and Bladder channels, will perform wonders for them.

Primary State

Male Yang

Psychological Correspondence

Assertive action; vitality; focused intent; clarity in action.

Associated Organs

Kidney Yang and Heart. Psycho-emotionally the Heart relates to mental integrity, clarity and awareness. Inversely it expresses itself as anxiety, self doubt or mania. The Kidney Yang psycho-emotional correspondence is vitality and will or, in a state of deficiency, exhaustion and fear.

Classical Indications

Stiffness and pain of the spinal column; headache; mental disturbance; essence-spirit disorders

Psychological Indications

Excessive worry or anxiety; excessive mental focus; depletion of the will

Clinical Indications

A pulse that is dominant in either or both of the Small Intestine or Bladder pulse positions; often coinciding with excess or wiry pulses in all the Yang positions.

Contraindications

Deficient Qi; in particular, a lack of Qi at the Small Intestine and Bladder pulse positions.

Characteristics of Treatment

Consolidation. The characteristic of a Du Mai treatment is a deep, dreamless rest that calms the Shen, re-charges the batteries (Kidney Qi) and brings the patient back into their body, ready for action tomorrow.

The Ren Mai

Functions

The Ren Mai is the Sea of the Yin channels and co-ordinates all the Yin channels (the three Yin channels of the foot all join the Conception Vessel at Guanyuan (CV 4). The function of Ren Mai is to receive and bear the Qi of the Yin channels.

Ren means responsibility, therefore the Ren Mai is responsible to the other Yin channels. The Ren Mai regulates menstruation and governs the foetus.

Commentary

The Ren Mai is the Mistress Yin. It regulates the Yin channels of the body, supporting the tissues and precious essences. The Ren Mai holds the power of conception and the regeneration of life. The Ren Mai expresses the qualities and functions of Mother Earth, reconnecting the patient with their essence and providing rest and emotional nourishment.

The image for Ren Mai is any of the archetypal Goddess figures including Kuan Yin, Tara or the Fairy Godmother. The function of the Earth Mother figure is to support and nourish, to provide chicken soup and a comfortable bed, to provide grace and forgiveness.

A Ren Mai treatment is appropriate for anyone feeling frazzled, overwhelmed or grief stricken. It brings the patient back to a state of calm abiding, of simply being, a state of easy, natural relaxation.

Primary State

Female Yin

Psychological Correspondence

Rest; peace; reconnection to the earth; regeneration.

Associated Organs

Kidney Yin and Lung. Psycho-emotionally, the Lung corresponds to feelings of freedom and spaciousness or a sense of social ease; inversely it can manifest as feelings of claustrophobia or oppression. Harmonious Kidney Yin gives rise to feelings of emotional connectedness and a sense of replenishment; inversely, Deficient Kidney Yin corresponds to feelings of emotional and spiritual dryness, depletion and disconnection.

Classical Indications

Menstrual irregularities; miscarriage; leucorrhoea; incontinence; enuresis; hernia; retention of urine; lower abdominal masses or pain; Qi deficiency

Psychological Indications

Grief, oppression and feelings of being overwhelmed

Clinical Indications

A pulse that is dominant in either or both of the Lung and Kidney Yin pulse positions.

Contraindications

Deficient Qi is one of the prime reasons for doing a Ren Mai treatment, however a dominant Lung and/or Kidney pulse is still a pre-requisite; if there is no surplus Qi in the Ren channel, opening the Ren will not serve any purpose and the treatment will be ineffective or detrimental [this principle applies to all Extraordinary treatments].

Excess Heat; rapid pulse or yellow tongue coat (opening the Ren Mai can drive Heat deeper into the body)

Characteristics of Treatment

Consolidation of Qi. The feeling of a Ren Mai treatment is a light soothing, dreamy, rest. Often there is a sense of "not much is happening at all" until the patient gets up and realises how relaxed they are.

The Chong Mai

Functions

The Chong Mai is termed both the Sea of the Twelve Regular Channels and the Sea of Blood. Its function is to regulate menstruation and to regulate or act as a reservoir for the Qi and Blood of the twelve ordinary channels. The Chong Mai links the Stomach and Kidney channels as well as strengthening the link between the Conception and Governing vessels (like both of these vessels it originates in the pelvic cavity and ascends the front of the body as well as the spine).

Commentary

The Female Yang Channel is characterised by the idea of the assertive female or the female warrior. A Chong Mai treatment is purgative; it expels pathogens and moves Stagnant Qi and Blood. In other words, it reclaims the sacred female space (emotional connection and peace) by actively expelling blockages or invading pathogens. This applies not only to physical stagnation but also to stagnation at the psycho-emotional level.

An image I often use in clinic is this: imagine a woman whose home has been invaded by a drunken, disrespectful man. He has raided her pantry, messed up her bathroom and taken up residence on her living room couch. The female warrior will use her will to throw the man out of her house (expel the pathogen) and re-claim her sacred space. This coincides strongly with the functions of the master and coupling points of the Chong Mai, Gongsun and Neiguan, both of which are effective Phlegm dispersers.

A Chong Mai treatment is appropriate for anyone experiencing an intense emotional state which is being denied or unexpressed. It allows the patient to re-orientate to their gut instincts and to re-define their emotional priorities.

Primary Sate

Female Yang

Associated Organ

Spleen. The Spleen governs the movement and transformation of fluids. This relates psychologically to the expression and transformation of emotion. The Spleen also has the job of nourishing the tissues of the body, which relates psychologically to self esteem. This involves the ability to develop effective belief systems through concentration and ideation. In a dis-harmonious state, Spleen expresses low self esteem and an inability to transform.

Psychological Correspondence

Assertive expression of emotion; re-connection with sacred space; inner self-regulation

Classical Indications

Gynaecological disorders such as metrorrhagia, miscarriage, menstrual block, irregular menses and deficiency of breast milk; spasm and pain in the abdomen

Psychological Indications

Emotional suppression or conflict

Clinical Indications

A pulse that is dominant in either or both of the Spleen and Pericardium (Kidney Yang) pulse positions. The addition of a dominant Heart pulse confirms the presence of intense mental-emotional preoccupation and indicates a strong argument for a Chong Mai treatment.

Contraindications

Deficient Qi; in particular, a lack of Qi at the Spleen and Pericardium (Kidney Yang) pulse positions. Proceed with caution when the patient is manifesting unstable emotions.

Characteristics of Treatment

The Chong Mai treatment challenges the patient to re-assert themselves and to take affirmative action to re-claim their emotional integrity. The Chong Mai treatment is characterised by a sense of activation of the lower abdomen. Because of its ability to move Stagnant Qi and Blood in the lower abdomen the patient may feel clearer or lighter or more tuned in to their primary instincts / gut emotions. The Chong Mai treatment will often include a distinct sense of emotional release, or perhaps a sense of resolve to acknowledge their emotions and express their gut feelings. This may range from a simple sense of peace and emotional integrity to intense emotional release of the cathartic kind which will commonly occur within 48 hours of the treatment.

The Dai Mai

Functions

The function of the Dai Mai is to bind the twelve ordinary channels and to regulate the balance between the upward and downward flow of Qi in the trunk. The Dai Mai encircles the body at the waist, binding the vertical paths of the twelve primary channels in general and the Penetrating and Conception Vessels and the Kidney, Liver and Spleen channels in particular.

Commentary

Being the Male Yin channel, the Dai Mai is characterised by creative (rather than assertive) action. It emphasises the need for flexibility, negotiation and harmony between male and female and between Yin and Yang. It also negotiates between upper and lower and between left and right. This sense of flexibility and negotiation emphasises the Liver's role of harmonising the Qi of all the organs.

Note the location of Weidao and Wushu (GB 27 & 28) at the anterior hip. These are important reflex points in their own right; they occur at the site of the origin of many of the major leg muscles. This area is pivotal for the balance of the skeletal system in general and the pelvis in particular. The anterior hip is the primary site for the distribution of the weight of the torso transmitted through to the load bearing muscles of the legs. There will always be points of extreme tenderness somewhere around the anterior hip for anyone presenting with a Liver Qi stagnation pattern.

A Dai Mai treatment is appropriate for anyone with obvious Liver Qi stagnation or pelvic imbalance. It helps a patient to find a more creative, flexible approach to their work and/or relationships.

Primary State

Male Yin

Psychological Correspondence

Flexibility, creative action, adaptability, negotiation, balance

Associated Organ

Liver. Psychologically the Liver is associated with the directive assertion of the will as well as with vision and planning. The Liver's role is to harmonise all of the emotions, which implies the ability to negotiate. A person with a psychologically healthy Liver will be active yet gentle, calm and creative. Expressed negatively the Liver manifests anger, frustration and inflexibility.

Traditional Indications

Abdominal pain; weakness and pain in the lumbar region and hips; vaginal discharge; uterine prolapse; fullness and distention in the abdomen; limpness of the lumbar region;

Psychological Indications

Anger and frustration; inflexibility; difficulty relating to the opposite sex

Clinical Indications

An excess pulse that is dominant in either or both of the Gall Bladder and San Jiao pulse positions.

Contraindications

Deficient Qi; in particular, a lack of Qi at the Gall Bladder and San Jiao pulse positions.

Characteristics of Treatment

A Dai Mai treatment is characterised by challenge; it is physically challenging to have an inch or two of stainless steel needle inserted into your anterior hip, particularly if the patient is subject to Stagnant Liver Qi or structural pelvic displacement. A Dai Mai treatment gives the patient the message "Go back; you're going the wrong way". A Dai Mai challenges the patient to find some balance, flexibility or creativity in their lives. A successful Dai Mai treatment will have a softening, unwinding quality. This will happen literally in the pelvic structure as well as in the feeling of "stepping back from struggle" that is the characteristic of the Dai Mai.

Treatment Methodologies

The methodology for initiating Extraordinary Channel treatments consists of four steps:

- pulse diagnosis
- psycho-emotional diagnosis
- treatment decision
- selection and application of points

Pulse Diagnosis

The skill level required for pulse diagnosis in this context is straightforward. The practitioner simply pays attention to the relative force or volume of the pulse in the individual positions (this is, effectively, an observation of the quantity of the pulse as distinct from the quality). The task is to look for any obvious dominance in the pulse at the specific pulse positions that correspond to the Master and/or Coupled points of the Extraordinary Channels. For example, a dominant Small Intestine pulse (left hand, superficial cun position) indicates a Du Mai pulse pattern; if the Bladder pulse (left hand, superficial chi position) is also dominant, this serves to confirm the pattern. [Note that the Small Intestine and Bladder pulses do not have to be the only pulses that are dominant; it is not uncommon for two or three Extraordinary patterns to be present simultaneously.]

Psycho-Emotional Diagnosis

Once the pulse pattern is recognised, reflect on the psycho-emotional state of the patient. This is done in the context of 1) their presenting pattern of disharmony 2) their occupation and 3) their current internal and external challenges.

Treatment Decision

It is by no means automatic that a patient should receive an extraordinary channel treatment just because the pulses say you can. The information you have just gathered has added to the full clinical picture you will have on this patient; you will still need to follow your normal protocols to decide what the very best treatment is on any particular occasion. It is just that you now have an additional choice.

The challenge, as usual, is to treat all needs, root and branch, simultaneously and creatively. You will need to decide whether the potential Extraordinary pattern will 1) effectively deal with the patient's pattern of disharmony and 2) consolidate or support their psychological state, or otherwise challenge them to move on. Differential diagnosis will always guide your choice.

You may have a choice between two or three Extraordinary patterns. This can be decided on the basis of the physiological functions of the channels; it can also be decided purely on the basis of psychological correspondences.

For example, suppose your patient is a corporate type woman, subject to lots of stress, highly active but often very tired, with a tendency to blood stagnation type menstrual disharmonies. Her Lung, Spleen, Heart and Kidney Yin pulses are dominant. Without any other information you have positive indications for both Ren Mai and Chong Mai patterns. The Ren Mai would consolidate and reinforce her Qi at the same time as giving her a soothing rest. The Chong Mai would help to move Stagnant Blood in the lower jiao and release pent up emotional frustration and anxiety. Both patterns make sense. Your job is to decide between consolidation and challenge. Talk to her! Find out whether she has been subject to consistent emotional suppression and needs to re-define her boundaries, or whether she's had one crisis after another and needs a deep, rejuvenating rest.

Point Selection

A protocol for the precise application of needles for Extraordinary treatments has been described by Professor Van Buren ⁽²⁾: a single needle is inserted into the Master point of the selected channel. This needle is placed in the right side of the body for females, or in the left side of the body for males. A needle is then inserted into the Couple point on the opposite side of the body. For example, a Ren Mai applied to a female will start with Lieque (Lu 7) at the right wrist, followed by Zhiaohai (Ki 6) at the left ankle. This "opens" the Ren Mai, giving the body a clear message that a Ren Mai treatment is being activated. After a brief interval to consolidate this "message to the body", additional points can be selected. Ideally these points will be consistent with the corresponding channel; if they are not classical points of the selected channel, they should be points on the related channels which support and complement the focus of Extraordinary Channel treatment. The idea is to give the body a clear message that an Extraordinary Channel is being activated, rather than diluting the treatment by throwing everything into the pot (which is Maciocia's approach). (*Maciocia, 1994, pgs. 239, 271, 444, 774, etc.*)

This combination of needles can be retained for 30 - 50 minutes. Long retention Extraordinary Channel treatments are often very effective. The Master point needle is then withdrawn, followed by withdrawal of the Couple point needle which is now inserted into the opposite Master point; the needle used to puncture the Master point is then used on the opposite Couple point. After another interval (perhaps 5 - 15 minutes) the body point needles are withdrawn, followed by the Couple point and, finally the Master point.

Discussion

This paper begs for further discussion and research into both classical and modern texts. In particular I believe the Japanese would have amassed much clinical research data which would be invaluable to examine ⁽⁴⁾. So too would be the experience of any practitioners who have studied and utilised the Extraordinaries.

In particular there is one subject which has been inadequately dealt with here and requires further exploration: Chinese cosmology. Twicken states: "The theoretical basis supporting the classic Eight Extraordinary Channel pairs begins with Taoist cosmology." A more thorough exploration of this subject would undoubtedly prove invaluable for our understanding of the Extraordinaries and may well provide some surprising insights.

This paper has barely touched on the Secondary Extraordinaries. These are traditionally seen as partners to the Primary Extraordinaries via their inverse Master and Couple point relationship, yet overall they are poorly understood and rarely utilised. Deadman and Al-Khafaji state: "The Yin Qiao is said to dominate quietness. The Yang Qiao is said to dominate activity. The Yin Wei dominates the interior of the whole body. The Yang Wei dominates the exterior of the whole body." (*Deadman and Al-Khafaji, 2000*) This description complements the nature of the Primary Extraordinaries very well and confirms the overall primary psychological framework presented in this paper.

The nature of Oriental Medicine allows for a variety of Extraordinary Channel practices and many ways of theorising about what one has done. Manaka has emphasised the structural resonances of the Extraordinary Vessels, which adds an additional intriguing flavour to their character. (*Matsumoto & Birch, 1986, pg. 13*) This paper has presented but one particular style of Extraordinary Channel practice. If this paper has a weakness, it is this: its ideas and their particular expression are based on the clinical observation of a small group of practitioners [albeit with many years of collective experience] ⁽⁵⁾ and have not been peer reviewed by the wider professional community, let alone incorporated into the mainstream dissemination of TCM theory. To quote John McDonald, "... Well that's all very well in practice, but will it work in theory?" (*McDonald, 2005*) So my challenges as a student, and the broader aims of this paper, have been 1) to provide a theoretical framework for these ideas which is well grounded in classical theory, is articulately expressed and which makes implicit sense; 2) to suggest a treatment protocol which is easy to learn and teach; 3) to subject all of this to rigorous peer review by inviting discussion and testing by as many interested professionals as possible; 4) to thereby build up anecdotal evidence in support of its efficacy; and 5) to incorporate it into mainstream TCM education, preferably sooner rather than later.

The strength of this paper is its success in addressing these first two points. The concept of the four subdivisions of Yin and Yang (Male Yang/Male Yin, Female Yang/Female Yin) is straightforward and can be readily recognised as making sense. The extrapolation of these into four primary psychological states is also implicitly logical, though it may require some reflection for it to become second nature to other TCM practitioners. Furthermore, the treatment methodology presented in this paper is easily applied. Anyone with a rudimentary familiarity with pulse diagnosis can easily recognise the pulse patterns that indicate the potential for Extraordinary Channel treatments.

The final three points raised, starting with the challenge of encouraging a widespread practice of this theory within the acupuncture profession, are nothing less than the on-going development of TCM theory and practice, of which this paper is a tiny, though hopefully worthy, portion. Chinese Medicine has developed syncretically, by incorporating new theories which demonstrate their efficacy through popular use and via their espousal by trusted practitioners and authors (*Cochrane, 2005*). Time, and peer review, will tell if this particular understanding of the Extraordinaries will flourish, or be relegated to the dustbin of history.

The strength of TCM is its ability to deal with the infinite variations of clinical practice and its capacity to operate in a state of uncertainty (*Clavey, S. 2004*), whilst still yielding successful results. Yet these very characteristics virtually preclude the possibility of definitively testing the effects of Extraordinary Channel treatments through scientific research methodology. My recommendation for further research is the traditional approach: anecdotal evidence derived from clinical exploration and tempered by rigorous discussion.

Conclusion

The Eight Extraordinary Channels are firmly embedded in the classical theory of TCM and will remain an enigma until a rational and practical application for their use becomes commonplace. This paper has offered such an approach, with a theory that is widely suited to the psychotherapeutic needs of western society.

The primary psychological states of the four pairs of Extraordinary Channels describe fundamental polarities of human life: the mode of being versus the mode of doing; the modes of rest versus activity, of thinking versus feeling; the need for self-regulation and the defining of personal boundaries, contrasted with the need for yielding and negotiating with others. Above all, there is the contrast between the needs of the outer/physical world and the inner/spiritual world.

A well balanced understanding of these contrasting human realities is sadly lacking in modern society in general and in TCM education in particular. This paper offers a framework for re-dressing that imbalance. A careful reflection on the nature of the Extraordinary Channels, as described herein, provides a way of re-introducing a philosophical and psychological basis to our understanding of human health in the language of Traditional Chinese Medicine. Furthermore, this understanding can be immediately applied to practical medicine and is therefore worthy of further study and application.

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Notes

(1) To the knowledge of this author no research studies of the Western scientific kind have been done on the Extraordinaries. However I would be very surprised if the Japanese did not have masses of documented clinical research.

(2) Professor Van Buren travelled to China in the 1960's and came back with a complete system for Extraordinary Channel treatments, yet no historical reference to this system is known to this author. Although Van Buren never published anything, his system was documented in an article on the subject by Leon Hammer as well as in a text titled *Advanced Acupuncture* by Henry Woolerton and Jane McLean. This text is evidently a transcription of Van Buren's lectures. Whatever the source for this system, it happens to work exceptionally well and is the system described (in part) by Maciocia. (*Maciocia, 1989, pg 356*) Matsumoto and Birch relate a lack of clear description in the classics for needle technique applied to the Extraordinaries and confirm the common practice of needling the Master point first, followed by the Couple point and any other body points. They go on to state "... it seems to have been the experience of the Da Cheng [*Compendium of Acupuncture and Moxibustion*] author that the Master point in combination with the other body points was sufficient, the coupled points were not necessary." (*Matsumoto & Birch, 1986, page 71*) Yoshio Manaka utilises bi-lateral needling.

Appendix One

Extraordinary Case Studies

The following clinical examples demonstrate how Extraordinary Channel treatments operate in practice. The names have been changed to de-identify the patients. It is important to note that, even though these cases align with the Male/Female relationships of the treatments, this is not a gender based protocol. All of the four primary extraordinary treatments can be readily applied to either male and female.

Du Mai

Mark ran a small business with a couple of dozen employees and was going through a highly demanding phase. He'd had a back operation fifteen years prior and was familiar with periodic episodes of extreme back pain which could leave him bed ridden for several days, but he'd had a good run for many years. He presented with another acute episode: extreme tenderness and weakness in the low back with a strong grabbing pain when bending forward or attempting to lift. In the face up position needles were inserted to Guanyuan (CV 4), Weidao and Wushu (GB 27, 28); these needles were used bilaterally in order to generate some immediate release of the pelvic structure. After fifteen minutes of retention these needles were removed and Martin rolled over (with extreme difficulty). Needles were inserted to SI 3 on the left hand and BI 62 in the right ankle. A selection of four low back Shu points were used with Yaoyangguan (Du 3) and Mingmen (Du 4); needle head moxibustion was applied to all of these points. This pattern of needles was retained for 30 minutes and then the master and couple points were removed and re-inserted to their opposite sides.

Martin returned for a follow up treatment three days later. He could hardly believe the improvement in his back pain. It was 80% improved immediately after the first treatment and almost completely gone after three days. What's more, he found himself able to take charge of his business with greater clarity and ease.

Ren Mai

Sharon was a 35 year old single mother of two children, subject to intense emotional pressure from her "ex". Her normal presentation was Liver Qi stagnation with symptoms such as headaches, grinding of teeth and severe menstrual pain with irregularity and mood swings. A series of previous treatments, included acupuncture and guasha, had made progress in reducing the backlog of Liver Fire, but it was an uphill battle dealing with the relentless stress.

One day Sharon presented with a obvious Ren Mai pattern (dominant Kidney Yin and Lung pulses). She was feeling ratty and pre-menstrual and very angry. She also reported a pain deep in her pelvic floor. Needles were inserted to Lieque (Lu 7) on the right wrist and Zhaohai (Kid 6) at the left ankle followed by Huiyin, Guanyuan, Yinjiao, Zhongguan and Shanzhong (CV 1, 4, 7, 12 & 17). A final needle was added to Zusanli (St 36) on the right leg. These needles were retained for 50 minutes, when the master and couple needles and Zusanli were swapped over to their opposite sides for a further ten minutes.

At the end of this treatment Sharon looked and felt like a different woman. Her pain was gone and she felt soft and peaceful in a way she hadn't experienced for years. Three weeks later she reported the effect had lasted distinctly for at least two weeks, despite on-going stresses in her life.

Chong Mai

Denise had received irregular bursts of acupuncture over three or four years. Her normal presentation was Kidney Yin Deficiency with Deficient Spleen Qi. She was subject to bloating, fatigue and anxiety. Her role of mothering a dysfunctional family left her feeling exhausted and impotent. She would turn up after a few months in a miserable state, get three or four treatments, feel recharged and then disappear again. Recently she came back and persisted with the Kidney Yin treatments a little longer until one day she presented with a Chong Mai pulse. After that treatment, and a second one a fortnight later, Denise started asserting herself, both at home and at work. She was amazed at her ability to set her personal boundaries in a way she had never thought possible.

Dai Mai

Les was a fifty nine year old ex-footballer and was relentlessly active in owning and running two small businesses. He had a history of pain and tension throughout his body, particularly lower back, shoulders and neck. He also reported jaw tension in the left side with tinnitus and blurred vision.

A previous series of four treatments had focused on responding to the immediate sites of stress with good reduction in neck and shoulder pain, but with no improvement in the tinnitus and little change in jaw tension. His low back was also still sore. On his fourth treatment Les presented with a dominant Gall Bladder and San Jiao pulse. Needles were inserted to the master and couple points, Zulinqi (GB 41) and Weiguan (SJ 5), followed by Tinghui (GB 2), Tinggong (SI 19) and Ermen (SJ 21). These needles were retained for thirty minutes and then withdrawn to allow the patient to turn over. The master and couple needles were re-inserted on their opposite sites and then needles were inserted to Fengchi, Juliao and Huantiao (GB 20, 29 & 30) and retained for a further thirty minutes.

Les returned in a fortnight reporting dramatic improvement in his neck tension and distinct reduction of the tinnitus. This case is a good example of an Extraordinary Channel being used in a straightforward, physiological manner. Nonetheless, every case like this has a psychological aspect, even if it is not readily forthcoming. This patient was clearly pushing too hard in his life. His challenge was to take life a lot easier in order to enjoy his financial success.

APPENDIX TWO

Functions, Indications, Pathways and Points of the Eight Extraordinaries

What follows is a synopsis of the pathways, points, functions and indications of each of the Extraordinary Channels drawn from a variety of modern texts. It is worth noting that there are inconsistencies in the way these channels are structured. The Du and Ren Channels each have a connecting point and a connecting vessel, but none of the others do. Conversely the four secondary channels each have a defined Xi Cleft point, but the primary channels do not. Three of the primary extraordinaries have secondary pathways, yet the others consist of a single pathway only. While each of the channels are regarded as having a set of defined body points, the Chinese Academy of Sciences text "Chinese Acupuncture and Moxibustion" introduces another point category, the coalescent points, without further explanation; where these differ from the defined points I have added the category 'body points'. All of these have been added to the collective list of pathways and points in the interest of maximising our knowledge of the interconnections and uses of the Extraordinaries.

General Functions of the Extraordinaries

- they act as reservoirs which fill and empty in response to the varying conditions of the ordinary channels
- they regulate the flow of Qi and Blood in the twelve regular channels
- they provide additional interconnections among the twelve regular channels
- they are closely related to the Kidney and therefore to Jing
- they act as a pathway for the distribution of Yuan Qi, Ying Qi and Jing
- they provide additional defence against external pathogens by circulating Wei Qi
- they are directly related to the womb and the brain.

Du Mai (Governor Vessel)

Functions

The Du Mai is the Master Yang channel. It regulates and governs the Qi of all the Yang channels. It is known as the sea of the yang channels.

Indications

Stiffness and pain of the spinal column; headache; mental disturbance; essence-spirit disorders.

Primary Pathway

The Du Mai arises in the pelvic cavity, emerges in the perineum at Huiyin (CV 1) then passes on to the tip of the coccyx at Changqiang (GV 1). From there it passes upwards along the spine to Fengfu (GV 16) at the junction of the spinal cord and the skull. There it passes into the brain and re-emerges at Baihui (GV 20) and continues forward along the midline through the forehead and along the nose. Finally it terminates at Yinjiao (GV 28) in the central point of the upper gum.

Connecting Pathway

The connecting vessel of the Du Mai leaves the primary channel at Chiangqiang (GV 1) and forms two branches which ascend along either side of the spine to the nape of the neck where they disperse over the head.

Secondary Pathways

Three other pathways of the Du Mai are defined. The second arises in the lower abdomen and runs down through the genitals into the perineal region. It passes from there through Changqiang (GV 1) and then diverts into the gluteal region where it intersects both the Kidney and the Bladder channels before returning to the spine. Finally it passes into the Kidney.

A third pathway arises at Jingming (Bladder 1), passes up over the forehead and merges into Baihui (Du 20) where it enters the brain. The channel then splits into two channels which descend along either side of the spine to the waist and terminate in the Kidney.

The fourth pathway arises in the lower abdomen, travels up past the navel, continues upward to join with the Heart, then enters the throat, crosses the cheek, splitting into two to go round the lips, then continues up the cheek to the region of Chengqi (Stomach 1) in the infraorbital notch.

Confluent (Master) Point

Houxi (Small Intestine 3); Shu Stream (Wood) point

Couple Point

Shenmai (Bladder 62)

Connecting Point

Changqiang (GV 1)

Body Points

All points on the Governor Vessel from Changqiang (GV 1) to Yinjiao (GV 28)

Coalescent Points

Fengmen (Bladder 12); Huiyin (Ren 1)

Associated Sea

Sea of Yang; Sea of Marrow

Additional (Creative) Points

In addition to the defined Du Mai points, the following can be creatively combined in a Du Mai treatment: all of the Bladder channel points of the back, including inner and outer channels and the Huato points; Small Intestine points at the shoulder and neck (SI 9-17); extra points such as Dingchuan, Shiqizhui and Yaoyan. The Du Mai can also be used in the face up position allowing the use of points such as Guanyuan (CV 4), Jiuwei (CV 15), Yintang and the Bladder and Small Intestine points of the head and face.

Ren Mai (Conception Vessel)

Functions

The Ren Mai is the sea of the Yin channels and co-ordinates all the Yin channels. The function of Ren Mai is to receive and bear the Qi of the Yin channels. The Ren Mai regulates menstruation and governs the foetus.

Indications

Menstrual irregularities; miscarriage; leucorrhoea; incontinence; enuresis; hernia; retention of urine; lower abdominal masses or pain.

Primary Pathway

The Ren Mai arises in the pelvic cavity, connects with the internal genital and urinary organs and emerges at Huiyin (CV 1) in the perineum. Thence it ascends through the pubic bone and up the midline of the abdomen, chest and throat to the groove beneath the lower lip. From there it splits into two and ascends to the region of Chenqi (Stomach 1) below the orbit.

Connecting Pathway

The connecting vessel of the Ren Mai separates from the primary channel at Jiuwei (CV 15) and disperses downwards over the abdomen.

Secondary Pathways

A second pathway of the Ren Mai arises in the pelvic cavity, enters the spine and ascends up the back.

Confluent (Master) Point

Lieque (Lung 7); Luo-Connecting point

Couple Point

Jiaohai (Kidney 6)

Connecting Point

Jiuwei (CV 15)

Body Points

All points on the Conception Vessel from Huiyin (CV 1) through to Chengjiang (CV 24)

Coalescent Points

Chengqi (Stomach 1); Yinjiao (Du 28)

Associated Sea

Sea of Yin; Sea of Qi

Additional (Creative) Points

In addition to the defined Ren Mai points, the following can be creatively combined in a Ren Mai treatment: Kidney channel points of the abdomen and chest; Zhongfu (Lu 1), Yunmen (Lu 2), Renying (St 9), Zusanli (St 36), Chanqiang (GV 1)

Chong Mai (Penetrating Vessel)

Functions

The Chong Mai is termed both the Sea of the Twelve Regular Channels and the Sea of Blood. Its function is to regulate menstruation and to regulate or act as a reservoir for the Qi and Blood of the twelve ordinary channels. The Chong Mai links the Stomach and Kidney channels as well as strengthening the link between the Conception and Governing vessels (like both of these vessels it originates in the pelvic cavity and ascends the front of the body as well as the spine).

Indications

Gynaecological disorders such as metrorrhagia, miscarriage, menstrual block, irregular menses and deficiency of breast milk; spasm and pain in the abdomen.

Primary Pathway

The primary pathway of the Chong Mai arises in the lower abdomen and emerges at Huiyin (CV 1) in the region of the perineum. From there it moves upwards, running inside the spinal column. Its superficial branch passes through the region of Qichong (Stomach 30) and thence connects with the Kidney channel. Running up both sides of the abdomen, it disperses into the intercostal spaces of the chest.

Secondary Pathways

Continuing from where the primary channel terminates in the chest, the second pathway moves up to the throat, curves around the lips and terminates at the nasal cavity.

The third path emerges at Henggu (Kidney 11) then descends along the medial aspect of the thigh, through the popliteal fossa, and thence down through the medial aspect of the tibia, passing behind the medial malleolus before dispersing into the sole of the foot.

A fourth path diverges from Qichong (Stomach 30) and descends obliquely down the lower extremity to the medial malleolus where it enters the heel, crosses the tarsal bones of the foot and finally reaches the big toe.

Master (Confluent) Point

Gongsun (Spleen 4); Luo-Connecting point

Couple Point

Neiguan (Pericardium 6)

Coalescent Points

Huiyin (CV 1); Qichong (St 30); all points on the Kidney channel from K 11 to K 21

Associated Sea

Sea of the Twelve Channels; Sea of Blood

Additional (Creative) Points

In addition to the defined Chong Mai points, the following points can all be creatively combined in a Chong Mai treatment: Chongmen (Sp 12), Zhangmen (Liv 13), Qimen (Liv 14), Shanzhong (CV 17), Zusanli (St 36), Shangjuxu (St 37), Xiajuxu (St 39), Geshu (Bl 17)

Dai Mai (Girdling Vessel)

Functions

The function of the Dai Mai is to bind the twelve ordinary channels and to regulate the balance between the upward and downward flow of Qi in the trunk. The Dai Mai encircles the body at the waist, binding the vertical paths of the twelve primary channels in general and the Penetrating and Conception vessels and the Kidney, Liver and Spleen channels in particular.

Indications

Abdominal pain; weakness and pain in the lumbar region and hips; vaginal discharge; uterine prolapse; fullness and distention in the abdomen; limpness of the lumbar region.

Primary Pathway

The Dai Mai encircles the torso like a belt and is sometimes referred to as the belt channel. It arises below the lateral tip of the tenth rib, passing down anteriorly into the lower abdominal region and intersecting with Daimai (GB 26), Weidao (GB 27) and Wushu (GB 28). Posteriorly it is said to pass across the lumbar region, though without intersecting any defined body points. In this manner it encircles all of the fourteen major meridians.

Master (Confluent) Point

Zulinqi (Gall Bladder 41); Shu Stream (Wood) point

Couple Point

Weiguan (San Jiao 5)

Coalescent Points

Dai Mai (GB 26); Wushu (GB 27); Weidao (GB 28)

Associated Sea

Sea of Ming Men

Additional (Creative) Points - Dai Mai

In addition to the defined Dai Mai points, the following points can all be creatively combined in a Dai Mai treatment: Chongmen (Sp 12); Zhangmen (Liv 13); Qimen (Liv 14); Jingmen (GB 25); Riyue (GB 24); Qichong (Stomach 30); Tituo; ashi points of the anterior hip.

Yin Qiao Mai (Yin Motility or Yin Heel Vessel)

Functions

Motor regulation of the lower limbs; regulation of the opening and closing of the eyes; control of the ascent of fluids and the descent of Qi; regulation of muscular activity in general. The Yin Qiao is said to dominate quietness.

Indications

Hypersomnia; night-time epilepsy, eye diseases, chills and fever, painful obstruction of the skin due to damp-heat, hypogastric pain, internal urgency, pain of the genitals, contracted sinews, shan disorder, uterine bleeding, leucorrhoea, flaccidity of the muscles of the lateral leg and tightness of the muscles of the medial leg.

Primary Pathway

The Yin Qiao Mai originates at Jiaohai (Kidney 6) in the region of the medial malleolus. Running up the medial aspect of the leg, it penetrates the genital region then continues internally up the abdomen and chest to emerge in the supraclavicular fossa at Quepen (Stomach 12). Thence it moves up the throat through Renying (Stomach 9), continuing up the medial aspect of the cheek to the inner canthus of the eye at Jingming (Bladder 1). Thence it joins the Bladder and Yangqiao Channels, ascends over the head and enters the brain.

Master (Confluent) Point

Jiaohai (K 6); Yin heel point

Couple Point

Lieque (Lung 7); Luo-Connecting point

Coalescent Points

Jiaohai (K 6); Jiaoxin (Kidney 8); Jingming (Bladder 1)

Xi Cleft Point

Jiaoxin (Kidney 8)

Associated Channels

Kidney, Bladder, Lung

Yang Qiao Mai (Yang Motility or Yang Heel Vessel)

Functions

Motor regulation of the lower limbs; regulation of the opening and closing of the eyes; control of the ascent of fluids and the descent of Qi; regulation of muscular activity in general. The Yang Qiao is said to dominate activity.

Indications

Daytime epilepsy; insomnia, eye diseases, loss of consciousness, aversion to wind, hemiplegia, chronic painful obstruction, rigidity of the body, lumbar pain, contracted sinews, flaccidity of the muscles of the medial leg and tightness of the muscles of the lateral leg.

Primary Pathway

The Yang Qiao Mai arises at Shenmai (Bladder 62) below the lateral malleolus and runs up the lateral aspect of the leg and torso to the scapula. It passes over the shoulder to the neck, jaw and corner of the mouth before moving up to Jingming (Bladder 1) at the inner canthus of the eye. Thence it joins the Bladder and Yinqiao Channels, ascends over the head and enters the brain.

Master (Confluent) Point

Shenmai (Bladder 62); Yang heel point

Couple Point

Houxi (Small Intestine 3); Shu Stream (Wood) point

Coalescent Points

Shenmai (Bladder 62); Pushen (Bladder 61); Fuyang (Bladder 59); Femur-Juliao (Gall Bladder 29); Naoshu (Small Intestine 10); Jiaoyu (Large Intestine 15); Jugu (Large Intestine 16); Dicang (Stomach 4); Nose-Juliao (Stomach 3); Chengqi (Stomach 1); Jingming (Bladder 1); Fengchi (Gall Bladder 20)

Xi Cleft Point

Fuyang (Bladder 59)

Associated Channels

Du Mai, Bladder, Small Intestine, Large Intestine, Gall Bladder, Stomach

Yin Wei Mai (Yin Linking Vessel)

Functions

The Yin Wei Mai connects with all the Yin channels and reinforces and balances their respective flows. The Yin Wei dominates the interior of the whole body.

Indications

Cardialgia; Heart pain, pain of the chest, fullness and pain of the lateral costal region, lumbar pain.

Primary Pathway

The Yin Wei Mai arises at Zhubin (Kidney 9) then runs up the medial aspect of the leg, up the abdomen and across the chest to the throat where it joins with the Ren Mai.

Master (Confluent) Point

Neiguan (Pericardium 6)

Couple Point

Gongsun (Spleen 4); Luo-Connecting point

Coalescent Points

Zhubin (Kidney 9); Fushe (Spleen 13); Daheng (Spleen 15); Fuai (Spleen 16); Qimen (Liver 14); Tiantu (CV 22); Lianquan (CV 23)

Xi Cleft Point

Zhubin (Kidney 9)

Associated Channels

Chong Mai, Ren Mai, Pericardium, Spleen, Kidney, Liver

Yang Wei Mai (Yang Linking Vessel)

Functions

The Yin Wei Mai connects with all the Yang channels and strengthens their respective flows; it compensates for excesses and/or deficiencies in the circulation of the Yang channels. The Yang Wei dominates the exterior of the whole body.

Indications

Chills and fever; Visual dizziness, dyspnoea, acute and sudden pain and swelling of the lumbar region, chills and fever, dyspnoea with raised shoulders, fever and chills.

Primary Pathway

The Yang Wei Mai arises below the lateral malleolus at Jinmen (Bladder 63) and runs up the leg along the path of the Gall Bladder channel. It passes through the hip and on through the posterior lateral aspect of the trunk, past the axilla to the shoulder and then up behind the ear to the forehead. It then connects to the Gall Bladder channel and passes back along the head, intersecting with the Stomach and San Jiao Channels before terminating at Fengfu (GV 16) and Yamen (GV 15).

Master (Confluent) Point

Waiguan (San Jiao 5); Luo-Connecting point

Couple Point

Zulinqi (Gall Bladder 41); Shu Stream (Wood) point

Coalescent Points

Jinmen (Bladder 63); Yangjiao (Gall Bladder 35); Naoshu (Small Intestine 10); Tianliao (San Jiao 15); Jianjing (Gall Bladder 21); Touwei (Stomach 8); Benshen (Gall Bladder 13); Yangbai (Gall Bladder 14); Toulinqi (Gall Bladder 15); Muchuang (Gall Bladder 16); Zhengying (Gall Bladder 17); Chengling (Gall Bladder 18); Naokong (Gall Bladder 19); Fengchi (Gall Bladder 20); Fengfu (GV 16); Yamen (GV 15)

Xi Cleft Point

Yangjiao (Gall Bladder 35)

Associated Channels

Dai Mai, Du Mai, San Jiao, Gall Bladder, Bladder, Small Intestine