

Integrating Daoist Zangfu Acupressure into Chinese Medicine Clinical Practice

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Abstract

Daoist Zangfu Acupressure is a system of acupressure massage that involves manipulating the qi of the patient's internal organs via the abdomen. The analogy for this system is of 'playing' the patient's body like a stringed instrument, in which one hand presses down above to define the tension of the 'string' while the other hand plucks below. In the same way in Daoist Zangfu Acupressure the practitioner 'locks' points in the middle/upper torso while the lower hand rubs and massages points on and around the abdomen, influencing the qi inside the body. Moving through a strategic sequence of locks and plucks, the qi of the organs under the fingers is stimulated to return to a more healthy flow. By working directly on the organs and the passage of qi through the San Jiao, practitioners can effectively treat gastro-intestinal disorders, under-functioning organs leading to low immunity, or hyper-functioning organs leading to auto-immune disorders. This article describes the history, theoretical framework and basic practice of Daoist Zangfu Acupressure.

Introduction

My study of Daoist Zangfu Acupressure began when I met Professor Wang Jin-Huai in Beijing in 1987. Professor Wang was from a tiny village in the rural mountains of Yuanping County, Shanxi. Despite being an area in which everyone lived in what could either be termed great simplicity or great poverty, his and the other villages around it had sent 23 scholars to the Imperial court since the Ming Dynasty — indicating this area was both an exceptional 'gene pool' of talent as well as a deep source of traditional knowledge. The village was one mountain away from one of China's most important Buddhist centres, Wu Tai Shan 五台山.

great aptitude for learning and at nine years of age was sent to learn calligraphy and classical Chinese from the last retired scholar of the Imperial court who had returned to this area. By 18 he was the first person under the newly established government of the People's Republic of China (PRC) to be sent to University from his village. He graduated from Tianjin University with a degree in classical Chinese and the calligraphic arts and was set to become a traditional scholar in modern China just as the Cultural Revolution (1966-1976) was launched.

Despite being labelled as a traditionalist for his studies of classical Chinese, Professor Wang's background as a poor subsistence farmer from one of the poorest areas of China saved him from the beatings and humiliations suffered by many of his contemporaries. He was sent for 're-education' to a factory outside of Tianjin where he was to work both in the fields (food was scarce following the 'Great Leap Forward' [1958-1961] so that every work unit had to grow as much of its own food as possible) and in the factory itself. Despite the harshness of the environment, Professor Wang found himself surrounded by other practitioners of China's traditional arts and forged strong bonds, as only a situation such as this would do. Among them was a very simple man who practised an extraordinary massage system. Practitioners such as himself were pulled from work duty and sent to work in the factory hospital to treat the large number of sick workers. Lack of food and decent shelter meant both depletion

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Professor Wang's grandfather was a doctor of Chinese medicine. Frustrated by the cultural belief in this rural area that women should not be taught to read, he had required his daughter to listen to him recite then memorise all of the traditional classic texts to ensure she was educated. In this part of China, women did all of the daily farm work, and Wang grew up from infancy strapped to his mother's back listening to her recite each book from dawn to dusk. Following the 'gene pool' of his region, he showed

and gastrointestinal disorders were very common, and a system which could regulate the intestines and rebuild qi was greatly needed.

This simple man was Wang Enlai, and how the art fell into his hands was just as shaped by China's tumultuous history as Professor Wang's reception of it. Amidst the backdrop of the Opium Wars, a wandering Daoist had passed this technique to Wang Wen of Xiong prefecture, Hebei province, after curing him of a very serious disease. Gifted the technique and its associated texts by the Daoist, Wang Wen went on to practise the art, and become renowned in his area. But with wars, warlords and revolutions that frequently displaced entire villages, the books became lost. In an attempt to keep the knowledge from being lost, he passed on what he remembered orally to his son, who carried on the tradition of treatment and oral knowledge, and in turn passed it on to his son. During his father's final years, this son created a small written manual of the technique, publishing it in 1962 under the title *The Method of Acupressure on the Organs with Diagrams* (臟腑圖點穴法). One of the people who learned the art with this family was Wang Enlai. But just a few years later, the Cultural Revolution happened and books such as these were burned. Sent to work at the above-mentioned factory, Wang Enlai kept a copy of the book hidden, sharing it along with the techniques to Professor Wang. Quickly, the two became a treatment team at the factory infirmary. During those years of difficulty, their fingers were the only medicine that could reliably be counted on — herbs were scarce and frequently bug-infested or unavailable, and acupuncture needles were often bent or blunted beyond use.

At the end of the Cultural Revolution, Professor Wang was assigned to teach classical Chinese and calligraphy at what is now the Cultural University of Beijing. He quickly gained a reputation for being skilled at Chinese medicine, and for many years quietly treated many of the people at the university. His knowledge of medicine and the classics, and the relationships he had made with other doctors sent to the factory had put him in close contact with Beijing's famous practitioners. Within a few years, his university became the first stop for many foreigners to learn Chinese before attending other teaching institutions in China - including Dr. David Eisenberg (the author of *Encounters with Qi*) in 1979 and myself in 1987, when I was enrolled in the Chinese Medicine Language degree programme required before entering what is now the Chinese Medical University of Beijing.

At the time Professor Wang was very concerned that visiting foreigners would see the outside surface of the PRC and believe they were seeing the real China. He went to great lengths to introduce as many foreigners as possible to the traditional arts and thinking of China, so they could see their beauty despite the gritty reality created by Communism. I arrived from Taiwan as one of

the first Americans to study in the universities (my class was predominantly made up of Eastern Bloc nationalities and North Koreans), and Professor Wang was delighted to teach someone who already read traditional characters and was not from a background informed by communist/socialist propaganda. Using Daoist Zangfu Acupressure as his methodology, Professor Wang drove home that Chinese medicine was neither Western scientific nor Eastern esoteric - it was based on observing, touching and working on the qi of patients, and that qi was something both real and tangible.



Image 1: Supine treatment - note the 'locking' hand above and moving hand below

Despite using the term 'pluck' for the lower hand, the actual motion is a rotation of the finger at each point

Daoist Zangfu Acupressure: basic technique

Daoist Zangfu Acupressure is a system of massage that might most accurately be described as a way of manipulating qi through acupressure. The analogy used to describe the technique is of playing a stringed instrument (for example the Chinese guqin 古琴) that requires one hand to press down on the fingerboard to define the tension of the string, while the other plucks and works the strings. In Daoist Zangfu Acupressure the practitioner must do the same on the patient's body. The upper hand 'locks' points so that as the lower hand rubs and plucks points below, the qi inside the body is put under tension and resounds in the abdominal cavity. Moving through a strategic sequence of locks and plucks, the organs under the fingers are stimulated to return to a healthy flow.

Despite using the term 'pluck' for the lower hand, the actual motion is a rotation of the finger at each point, for several minutes. A heavier, counter-clockwise motion is

used to break apart stagnant qi and disperse blockages that are inhibiting flow; a lighter, clockwise motion encourages qi to return to and gather at the spot being massaged, filling in areas where weakness is inhibiting flow. By choosing the correct balance of tonifying, dispersing or regulating (switching between directions at regular intervals to both tonify and disperse) at each point, the practitioner can re-establish a state of proper flow between the organs, whilst stimulating or slowing motility through the intestines to balance the digestion. One of the core oral teachings of this system is that 'all things come from the earth, and all things return to the earth.' The earth represents the Spleen's functions of transformation and transportation; we are more susceptible to illness when our digestion is impaired, and more likely to recover if our digestion is strong.

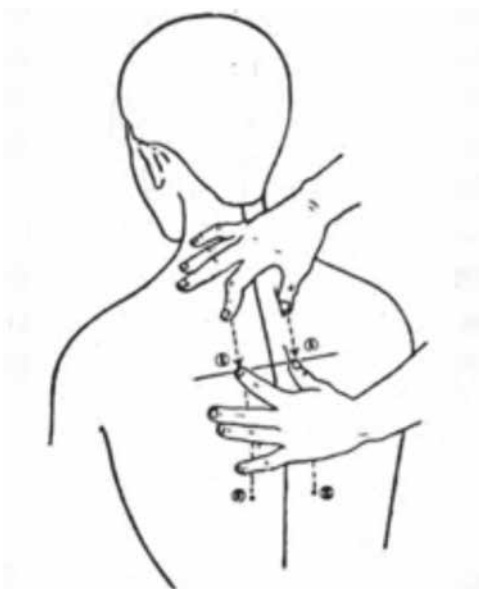


Image 2: Back treatment

On the front of the body, the major lock points used are Jique REN-14 when manipulating points above the navel, and left Liangmen ST-21 with right Shiguan KID-18 when working at or below the navel. While several other lock points are used during the protocol, the majority of time is spent locking these points. Along with 'locking' the points Jique REN-14, Liangmen ST-21 and Shiguan KID-18 with the supporting hand, the major points manipulated with the moving hand are:

- Lanmen (an extra point, 1.5 cun above the navel on the Ren Mai [Conception Vessel])
- Jianli REN-11
- Qihai REN-6
- Guanyuan REN-4
- Zhangmen LIV-13
- Shangwan REN-13
- Zhongwan REN-12
- Tianshu ST-25

The system then follows a sequence on the back of the patient to consolidate the work on the abdomen (unfortunately beyond the scope of this article).

With the appropriate lock point chosen, the practitioner initiates a first touch at each point to decide whether it feels either in excess or empty of qi. This is done by judging the hardness or softness, and whether there is a feeling of protusion or indention instead of the even, smooth feeling associated with health. Skin temperature, turgor and texture are also considered in helping reach a diagnosis of whether there is deficiency systemically as well as locally, or whether there is deficiency systemically but excess locally, or excess systemically as well as locally, or excess systemically but deficiency locally. With this information, the decision is made whether to focus the majority of the treatment on tonifying, dispersing or regulating. Frequently a treatment begins focused on addressing the local area being touched, and once the qi becomes normal at the point, the focus is shifted to address the systemic qi flow overall.

After the first diagnostic touch, the manipulation of the lower points begins. Filling in what is soft and softening what is hard are the first priorities. Once the flaccidity/tension of a point changes, then the practitioner begins to 'listen' (聽 in Chinese) to the qi along the channel being worked. With a return of flow, we can feel the connection to the lock points in the same manner that a guitar string plucked can be felt in the fretting fingers along the neck. As qi flow grows stronger, there is a sensation of movement like a current of water beneath the finger. However, practically speaking, new practitioners simply do not have the finger strength or endurance to 'hear' this final stage of flow under the finger, as the active finger becomes too exhausted and numb from manipulation to be able to pick up any sensation. Professor Wang demanded that his students practise until their fingers developed enough strength to work on several patients successively without tension or fatigue. Only at this point did he feel the practitioner could be relaxed enough to 'hear' what is beneath the fingers. Learning to 'ride' the sensation under the fingers, while softening tension and firming up flaccidity to ensure smooth flow overall are the keys to the clinical success of this system. Even with experienced fingers, qi blockages elsewhere can keep any channel from fully flowing through a point. To account for this, the system begins at one point then moves on to other points in a sequence, before returning to the original points to recheck for systemic flow. Some patients are too depleted to manifest this kind of flow under even the most skilled hands until after a number of treatments. This is especially true when treating cancer patients who are weakened by drugs and other treatment, serious autoimmune conditions, invasive diseases such as Lyme, AIDS and systemic candida, as well as other conditions falling under the Chinese medicine category of depletion/

taxation (虚癆病). For these conditions, tracking the patient's breathing and state of relaxation on the table and post-treatment responses are the only effective way to judge the success or failure of a given treatment.

Professor Wang Jin-Huai insisted I begin my Chinese medical training with this system and understand its core oral teachings before beginning the study of acupuncture and more complex theory. He felt that if one began any other way, it would be easy to misunderstand the nature of qi in the body and that it is supposed to be tangibly manipulated at each point. In this system we have a clear definition of what we are looking for under the fingers with regard to qi sensation (hard/soft, smooth or stuck). In addition, patients may experience nausea and burping, and/or flatulence during the treatment. In the case of burping and nausea, it is considered the practitioner's locks were ineffective and thus the treatment created qi going in the wrong direction (氣逆); in the case of flatulence, blockages were released and stuck qi was able to descend and exit (排氣). Given that burping and flatulence are called qi in Chinese, and are happening during treatment, it is very hard to lose the tangibility of correct versus incorrect manipulation.

While every condition is different, the general rule of a correct treatment is that the patient:

- notes discomfort at the beginning of the treatment
- descends into a very deep trance-like state or falls asleep during treatment
- passes gas while in this deep state
- ends the treatment feeling very relaxed (although they should be encouraged to take a walk or engage in gentle activity to encourage continued qi flow through movement)
- have an exceptionally complete bowel movement within a few hours
- have a surprisingly deep and refreshing sleep that night.

With these markers during and after the treatment, the manipulation of a patient's qi through this system is kept very tangible and the success of each treatment is easily measurable.

Core oral teachings

Aside from the focus on tangible sensation under the practitioner's fingers during treatment, and the distinct patient responses post-treatment, there are a core set of oral teachings a practitioner should keep in mind when using this system. Below are just a few of the most important concepts to contemplate, translated from the original Chinese:

- All things come from the earth, all things return to the earth. If the functions of the Spleen channel are normal, and the Stomach's digestive abilities are strong, (then) all organs receive their nourishment. If the Stomach

and Spleen are weak or impaired, then all organs lose the needed nourishment. Death comes with the loss of the Spleen (and Stomach). Thus it is said that all things are born of the earth and all things dissolve back into the earth.

If the finger pressure is incorrect, patients may experience nausea and burping during the treatment ...

- Clear qi belongs to yang, turbid qi belongs to yin. Alone, yin qi is not created. Alone, yang qi cannot grow. The qi inside the body is divided into two qis: clear and turbid. Light, clear qi rises and belongs to yang. Heavy, turbid qi sinks and belongs to yin. Thus there are the two qis of yin and yang, and (as they are interdependent) they cannot be separated. Thus it is said that yin cannot be created alone, yang cannot grow alone.
- The pure yang of the human is insufficient, (thus) yang is often deficient, yin is often in surplus. Yang qi is clear qi, yin qi is turbid qi. A newborn infant is a body of pure yang, without the seven emotions, and maintains pure yang. With the passing of the years, the emotions also grow, and the clear qi dwindles as the turbid qi grows. Thus yang is often deficient, yin is often in surplus and is often the cause of illness.
- People do not see qi, fish do not see water. When a person sees (is aware of) qi, then there is illness; when a fish sees (is aware of) water, then it is floating on the surface. The relationship between a human and qi is the same as the relationship between fish and water. When the body is healthy, the outside qi flows with vigour and the inside qi is smooth and reaches all places. Then the human is comfortable, but does not see (i.e. is aware of) qi. This is just as a fish relies on water and yet does not see water. But with the changes in weather and the blockages of qi in the body, then there are sensations outside of the normal spectrum. This is like a fish, which if it is not swimming in the water, then is floating on the surface.
- Qi is chaotic, then there is illness; qi is regulated, then there is a cure. This is the very essence and basis of this form of treatment.
- Reverse, re-reverse, reverse, reverse, re-reverse, reverse. Serious illness, difficult symptoms and conditions, all illnesses coming from the internal organs, (they) reverse and re-reverse, thus one must follow and treat (the illness's) changes.

- The tendons and sinews nourish qi, qi nourishes blood, blood nourishes the tendons and sinews. Qi, blood and tendons mutually create each other in this cycle, and this cannot be ignored.

Other treatment considerations

Clinically, this massage system can be used as a stand alone treatment or integrated into a broader treatment strategy. When practising the front and back sequence of the massage system as a stand alone treatment, the usual length of treatment is 40 to 60 minutes. This gives the practitioner ample time to assess and manipulate the patient's qi without unduly exhausting it. Normally the patient lies supine while the practitioner manipulates the anterior of the body, and sits up while the back is being treated (which facilitates the downward flow of the turbid so the clear qi can rise with the least obstruction). The practitioner traditionally stands on the right side of the patient so the left hand is the locking hand and the right hand is the moving hand. However, in certain illnesses and some patients it is not possible to have the patient adhere to these positions. The practitioner must never lose sight of the fact that they are attempting to manipulate qi, rather than following a strict protocol. Thus, flexibility and the ability to add or remove steps from the sequence based on the needs of the patient and situation are critical to success. For example, a late-stage cancer hospice patient may be in a reclining chair and oblivious to the presence of the practitioner; a trauma patient who is suffering both from internal damage as well as motility issues due to opioid use also requires great flexibility on the part of the practitioner.

Irrespective of whether it is used as a stand alone method or as part of treatment strategy alongside acupuncture, this treatment method is very effective at reversing serious health conditions.

In terms of integrating Daoist Zangfu Acupressure into a broader treatment plan, in our clinic we frequently combine key techniques with acupuncture. For a person with a digestive condition compounded by an imbalance in the seven emotions, we use a 'Four Gates' variation (i.e. a needle in the upper extremity with a needle also in the lower extremity - we most commonly use bilateral Tongli HE-5 with Sanyinjiao SP-6 for deficiency or Ligou LIV-5 for excess) with the needles retained while doing the anterior Daoist Zangfu Acupressure sequence; this provides a treatment in which the result is much more effective than its parts. This pattern can also be reversed, needling and retaining the core points of the Daoist Zangfu Acupressure in their traditional sequence, then doing physical massage or qi work with the hands along the yin channels of the

lower legs, Yongquan KID-1 and/or Baihui DU-20; this releases constraint in the middle while rebalancing the flow of clear and turbid qi in the body.

Irrespective of whether it is used as a stand-alone method or as part of treatment strategy alongside acupuncture, this treatment method is very effective at reversing serious health conditions. Since learning it in 1987 and helping Professor Wang teach it to practitioners for many years, we have seen in our own clinic and from the reports of those using it how important this can be as an integral part of helping patients recover from illness. In San Francisco in the early '90s practitioners set about using it during the HIV epidemic to reverse the depleting nature of AIDS. Patients quickly experienced resolution of the night sweats and petechiae associated with the condition, as well as improved tolerance of the early drug regimens being used. Working with Crohn's patients can greatly lessen pain as well as bowel frequency. Taxation patients with later stage auto-immune conditions or cancer can show an almost immediate shift in energy and this treatment can be the pivotal part of shifting a seemingly hopeless condition to the slow path of recovery.



Images 3-5: A Daoist Zangfu Acupressure treatment at the author's clinic showing different hand positions and techniques.

Concluding remarks

When I first learned and began practising this art in 1987, it seemed like something out of a movie: A wandering Daoist

passes on an almost-lost art along with secret instructional books. The original books were lost, but the art was saved by oral tradition. A new manual was made, only to be banned and burned in the Cultural Revolution. A hidden book was secretly copied, and the art was taught to a foreigner in the hopes it would reach beyond China's borders and survive, even if almost extinct inside the country. Greatly moved, I not only learned it but set up teaching engagements all over the United States for Professor Wang to share this art. In 1994, we presented Daoist Zangfu Acupressure to over 100 people at the American Organisation of Bodywork Therapies of Asia (AOBTA) conference. By 1997, there were large numbers of Westerners practising the art as massage therapists and Chinese medicine practitioners. This sparked a cross-pollination with practitioners of Mantak Chia's Chi Nei Tsang and the art flourished, while back in China it seemed to have vanished in the face of a medical system that no longer emphasised one-on-one treatments between practitioner and patient. But China should never be discounted. Its size and the resourcefulness of its people has meant that at each turn when it seemed the traditional arts were about to die, there was a resurgence. Recently I was invited to teach Daoist Zangfu Acupressure in Beijing,

where just for fun someone typed the name of the book into Taobao (China's Amazon). Suddenly, there was the book - not just the copy I had inherited, but other expanded versions coming from Taiwan as well as China. This can only mean that the art has been rediscovered there just as it has been welcomed by practitioners in the West because of its tangibility of patient response and excellent treatment results.

An abridged English translation of the original text as well as an online training course in Daoist Zangfu Acupressure is available at <<https://association-for-traditional-studies.teachable.com>>.

Born in 1967, Andrew Nugent-Head lived in China from 1986 to 2014 studying Chinese medicine, martial arts and daoyin. He studied with some of the last generation of traditional practitioners born and educated prior to 1949, preserving their knowledge before the arts were socialised in the 1950s and restructured into what is practised today. Dedicated to saving the skills and perspectives of these practitioners, his work has generated thousands of hours of footage and hundreds of seminars. With the passing of his teachers, Andrew returned to the USA. Along with his wife and fellow practitioner Julie Ann Nugent-Head, he runs a teaching clinic highlighting the efficacy of classical Chinese medicine.

Newsbites

Tai chi prevents falls

The largest study (670 adults, 70+ years old) to date has confirmed that tai chi is the most effective exercise for preventing falls in older people – in fact nearly 60% more effective than stretching exercises and almost a third more effective than a 'multimodal exercise intervention'. Falling can be a personal disaster if bones are broken (often signalling a descent into dependency) as well as a major economic challenge for health services. The costs of falling in the United States in the year 2000, for example, were estimated at 19.2 billion dollars. Tai chi seems to be so effective because it increases leg strength, balance (through slow weight shifting) and proprioception (knowing where the different bits of our body are in space – especially the feet). In Chinese medicine terms it helps rebalance 'upper body fullness, lower body deficiency' that often follows the decline of yin

associated with ageing. (Effectiveness of a Therapeutic Tai Ji Quan Intervention vs a Multimodal Exercise Intervention to Prevent Falls Among Older Adults at High Risk of Falling: A Randomized Clinical Trial. *JAMA Internal Medicine*).

Fertility crisis

If we are getting tired of the same old worries ... climate change, economic collapse, plastic pollution, contaminated water etc., here's a new one to keep us awake at night. Recent research has confirmed the (probable) decline of human male sperm counts by 52% in the last 40 years. The new study was designed to avoid some of the potential weaknesses of previous studies by analysing only studies that used the same sperm count method, were of a reasonable size and involved men not known to have infertility problems or disease, among other measures. While there is no consensus

on the possible causes, which are likely to be multifactorial, we can make an educated guess. We have been involved in a massive experiment in the last several decades, abandoning behaviours that had proven their safety over many hundreds of years. We have industrialised our food production, introducing countless new artificial ingredients, and in the same way have exposed ourselves to known anti-androgenic and oestrogenic substances in the form of previously unknown chemicals in cosmetics, plastic packaging, cleaning materials and so on. Charles Darwin famously didn't write of the 'survival of the fittest' but the 'survivability of the most adaptable'. It's unlikely that we will adapt biologically in time to neutralise these assaults on our health, so the question is whether we can adapt our behaviour in time. (Temporal trends in sperm count: a systematic review and meta-regression analysis. *Human Reproduction Update*).