

The Shape of Qi

Enhancing the vocabulary of contact in acupuncture

The following paper explores the integration of osteopathic palpatory sensibilities into the practice of acupuncture, particularly with regard to pulse diagnosis and the overall assessment of qi.

I am not suggesting that we can become better acupuncturists by becoming osteopaths. On the contrary, my fundamental premise is that we can adapt some of the conceptual maps and sensibilities of cranial osteopathy to our own modality without ever having to concern ourselves with dural restrictions or sphenobasilar lesions.

For this reason, I have kept the osteopathic jargon to a bare minimum and have focused instead on some of the most general concepts of palpation that are most easily adapted to acupuncture. Those interested in a more detailed discussion of cranial osteopathy are referred to Franklin Sills' *Craniosacral Biodynamics*.¹

This discussion is framed in the context of a specific style of acupuncture known as Toyohari. Developed by blind practitioners in Japan about 50 years ago, Toyohari is a style of meridian therapy characterised by the highly developed palpatory sensitivity of its practitioners and its extensive use of contact needling. Because of its emphasis on subtle palpation and the rudimentary nature of its theoretical framework, Toyohari is particularly well suited to the integration of the palpatory sensibilities described here, making it a useful bridge between modalities. Nevertheless, my fundamental assumption is that these sensibilities are relevant to nearly all styles of acupuncture.

For a more detailed discussion of Toyohari see: www.Toyohari.org/.

By Charles Chace

IN MOST STYLES OF ACUPUNCTURE we tend to describe the goal of treatment in terms of harmonising or regulating the qi. When our patients ask us what acupuncture is supposed to be doing, we generally tell them something to the effect that we're balancing their qi. We may tonify deficiencies or drain excesses in the service of this goal but our primary operating premise is that our patient's ailments will disappear once their qi is balanced. But how do we really know when we have balanced the qi or had any impact at all?

In the classical literature, balanced, harmonised or regulated qi is most often described in terms of how it improves the quality of the blood, the lustre of the skin, the quality of the flesh, or the sparkle in the eyes. This is not surprising in that a defining characteristic of qi is that it is primarily perceived through the things it influences. Indeed, the word qi is sometimes translated as influence.¹ Whether or not we realise we are doing so, we most often talk about the expressions of qi rather than the qi itself. We speak of the sensation of air moving through our lungs, and in the quality of an abdomen, a voice, a pulse. From these signs, we make inferences regarding the state of the qi and the impact that we are having on it.

Pulse diagnosis is among the most important tools in acupuncture practice for assessing health and disease, and in the Toyohari style, the pulse is considered the prime indicator of the state of the qi at any given moment. To be sure, we palpate the abdomen, stroke the channels, listen to the quality

1. Franklin Sills, *Craniosacral Biodynamics*, Volume One, Berkeley California, North Atlantic Books, 2001.

1. See, for instance, Unschuld, Paul, *Medicine in China, A History of Ideas*, Berkeley, University of California Press, 1985.

of the voice, and ask questions throughout the course of diagnosis and treatment. Yet when we are tracking the subtle changes that occur at every stage of needling, we take the pulse. However immediate the experience of pulse diagnosis may seem, it is important to remember that most of what we are feeling is not the qi. The best we can say is that we are feeling the expression of the qi *through* the pulse. In diagnostic assessment, it seems that we are always at least one step away from directly contacting the qi. When we feel a weak wrist pulse in the right middle position we may say to ourselves “this person’s Spleen qi is very weak”, but all we really know for sure is that there is a particularly weak spot on the radial pulse. Everything beyond that is an inference.

Having recognised that the pulse, tongue, abdomen, flesh and skin are secondary expressions of qi, we are left to wonder if there might be some means of assessing the qi on a more fundamental level. What might that look and feel like? We certainly tend to speak about and interpret the sensations that we feel in our hands when needling as a direct experience of qi. We say that we have obtained the qi, or more generally, that we have felt its arrival. We have the sense that we are tracking changes in the qi from moment to moment. The words that we use to describe these experiences belie a tacit assumption that our experience of qi in this way is somehow more immediate.

Yet the qi does not only arrive at the point beneath the needle. It is readily felt by a pulse taker who knows what to look for beyond the mechanics of vascular fluid dynamics. In the Toyohari system, the arrival of qi is experienced as an energetic wave that is distinct from changes in the pulse itself. Toyohari practitioners are carefully trained to track the arrival of qi in this manner and to provide the person who is needling with feedback on the efficacy of his or her technique. This is an integral component of the so-called Kozato method of needling practice.²

WHEN WE STOP TO THINK ABOUT IT, it is obvious that the qi does not only arrive at an acupuncture point and in the pulse; in practical terms, it arrives everywhere at once. Regardless of what diagnostic parameter we are attuned to, the pulse, abdomen, skin, or flesh, we typically perceive an almost instantaneous change in those parameters when we have needled effectively. We typically explain this phenomenon by saying that we have effected an overall change in the qi. Is there a means of tracking this overall

2. The Kozato method is a cornerstone of the Toyohari style of practice. It is a systematised approach to honing one’s diagnosis and needle technique that requires at least three people. One person needles, one lies on the table and gives feedback on the quality of the needling, one person tracks the changes elicited by the needling through the radial pulse.

change as opposed to its expressions in the particulars of the pulse, abdomen etc.?

This paper is an exploration of the premise that the state of a person’s qi at any given moment is palpable anywhere on the body and the information we receive in this manner is of clinical relevance. It is also an attempt to develop a consensual vocabulary for these perceptions as a means of refining our own skills and communication.

We take it as a matter of principle that qi is pervasive throughout the body. It is therefore rather ironic to consider the lengths to which we go to abstract it into its expressions in the pulse, tongue and abdomen. We spend most of our formal training in acupuncture school learning to work with these abstractions and very little time learning to directly engage the qi. Still, many of us naturally develop some facility for this kind of assessment simply through years of clinical practice. Yet it is precisely because we are left to stumble upon this on our own that we often lack the capacity to communicate our perceptions in a manner that makes sense to others. Students, especially, are left thinking that what their teachers are describing is just another one of those arcane experiences that maybe they too will have after a few decades of practice. Their problem is not so much that they lack the experience or capacity to feel such things; it is that their teachers so often lack the words to clearly communicate what they are experiencing. What we as acupuncturists lack is a consensual vocabulary of qi: a verbal and conceptual map that allows us to more fully engage the terrain that we traverse every time we contact our patients.

A number of years ago, I participated in a large Kozato style practice session at a yearly meeting of Toyohari practitioners in Tokyo. Eight or nine blind acupuncturists were crowded around the table along with me and a senior instructor. The instructor was taking one of the patient’s pulses and another participant was on the other pulse. The rest of the participants simply placed a hand somewhere on the patient. The two people on the pulse gave me feedback on my needling technique in a manner consistent with the Kozato method. They informed me of the changes I had produced in the pulse on a moment to moment basis. What struck me, however, was that all of those who were simply touching the patient gave precisely the same feedback at exactly the same moment as the pulse takers.

Regardless of how they might have described it themselves, it was evident to me that what they were doing was listening to the qi. It is curious that although the Toyohari style has developed a highly refined terminology and conceptual framework for assessing changes in qi as perceived through the pulse, abdomen and skin, it apparently has absolutely no vocabulary



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for this more immediate assessment of qi, at least none that has been communicated to sighted practitioners in the West.³

My interest in qi palpation has not been limited to the realm of Chinese medicine. Osteopathic palpatory sensibilities have been deeply influential in the development of my own palpatory awareness. My experience with clinicians in this field far more skilled than myself has convinced me that these disciplines have a great deal to offer acupuncturists in developing a more fluent vocabulary of qi palpation. For instance, when I refer to the "qi as a whole" I mean the sum total of all different kinds of qi described in Chinese medicine and their expressions in the pulse, tongue, abdomen, channels, spirit in the eyes, etc. From an osteopathic perspective, the qi as a whole also encompasses the state of a person's nervous system, fluids, physiological functioning and the various tidal flows that are perceptible when contacting a patient. The capacity to assess the qi on these levels adds another dimension to our appreciation of the overall state of a patient's being.

An essential premise of the biodynamic approach to cranial osteopathy is that for any meaningful change to occur, a patient's system must reach a point of quiescent self-regulation known as neutral. Cranial osteopaths consider this state of neutral to be quite literally the ground of healing within the body. This perspective on the dynamics of healing has profound ramifications for the practice of acupuncture and I will have more to say about the role of neutral in our appreciation of qi later. For now it is sufficient to say that neutral is a generalised phenomenon perceptible everywhere in the body. As such, it is an excellent benchmark for a system in which qi is balanced. The pathologies themselves may not have resolved, but the proper conditions have been established for their resolution.

A number of my cranial teachers were very adept at conceptually mapping the stages and characteristics of the body's transition to neutral in the context of teaching students. In studying with them I was struck by how much their descriptions had in common with the pulse vocabulary of Chinese medicine. It slowly dawned upon me that at their roots both disciplines were ultimately attending to the same phenomena. This realisation has allowed me to deepen and refine my palpatory skills in both realms.

The ideas that follow are not so much an effort to adopt osteopathic techniques or terminology into the practice of acupuncture as attempts to reflect the overall sensibility or approach to palpation that is characteristic of osteopathy. With a few

3. This statement has been confirmed by Steven Birch and Junko Ida, the two most senior teachers of Toyohari in the West.

notable exceptions, the vocabulary used in this paper is already used in Chinese pulse diagnosis to one extent or another. All I have done is to expand the scope of its application into a realm for which we have little language, despite the fact that this realm is central to the effective practice of acupuncture. Even those concepts that are indeed new for acupuncturists nevertheless describe terrain that should not be entirely foreign.

The qi shapes the pulse

Chinese medical pulse diagnosis contains the some of the most nuanced vocabulary that we have for tracking the qi. The Toyohari style in particular has a highly formalised criterion for the most general attributes of a positive pulse change. By and large, effective needling should produce four fundamental changes in both the pulse and the qi. There should be a palpable settling, slowing, increased suppleness, and integration, both during and after needling. These attributes are not limited to the pulse but are characteristics of positive changes in the overall qi that are perceptible anywhere on the body. Many Toyohari practitioners tend to use a slightly different set of terms but I prefer these because I believe they more accurately reflect what we feel in both the pulse and the qi as a whole.

Settling

I prefer the word settle to sink because deep pulses should ultimately move upward towards the middle depth. Nevertheless, effective needling inevitably elicits some experience of settling or sinking that is perceptible to the person needling and the person taking the pulse, even in patients with deep pulses. I think that the word settling is both a more general and a more inclusive term, evoking a sense of grounding that is often but not invariably characterised by a sinking in the pulse.

Slowing

We expect that effective needling will speed up the pulses of patients with severe bradycardia, but then pulses in our culture are more often rapid than they are slow. The pulse rate will palpably slow by anywhere from two to 10 beats a minute. Sometimes though, the pulse simply feels less rushed after needling without there being an actual change in the rate. The phenomenon of slowing is part of a more generalised sense of relaxation in the qi that occurs with effective needling.

Suppleness

This relaxation does not imply a loss of form or structure. The pulse should simply become more

supple in that hard, wiry or tense pulses should soften, and yet soft and scattered pulses should also become better defined. The radial artery becomes lithe. When experienced in the qi as a whole, this quality of suppleness feels wonderfully fluid while still conveying a sense of structure and integration.

Integration

In terms of pulse diagnosis the quality of integration can be seen as a subcategory of the other. The pulse as a whole becomes more coherent, and better organised. This is undeniably the most subtle of the qualities discussed thus far but it nevertheless has some very tangible expressions. In the Toyohari style, this sense of integration is often referred to as consolidation. It is not enough for a pulse to become stronger; its strength should be contained within well defined boundaries without feeling hard or constrained.

When experienced in the qi, the quality of integration is much more easily distinguished as a distinct characteristic of its own. The qi is often perceived as being segmented or stratified. With effective treatment, we experience a homogenisation and an increased coherence within the qi. Integration is, in essence, our fundamental concern when assessing qi as a whole and the rest of this discussion should be understood in the context of this quality.

It is evident that all of these factors depend upon one another and must present together for an optimal change in the pulse and qi. Our fundamental premise is that any therapeutically effective intervention on the qi will influence the pulse in the manner just described. This is not so much a characteristic of the radial pulse as it is a characteristic of the qi as it is expressed throughout the body. As such, it is indeed perceptible anywhere in the body. Moreover, nearly everything that can be perceived in the pulse can be felt in the qi anywhere in the body.

Unfiltered perception

To take this idea a step further, although some things are easier to feel in the pulse, many other things are often easier to feel in the qi. Some of these things are immediately relevant to Toyohari practice. For instance, one of the pivotal aspects of an effective *ho* (supplementation) technique in this style of acupuncture is knowing when to remove the needle, which should occur just before the arrival of qi completely peaks. As mentioned above, the perception of this “qi wave” is not something that is fundamentally vascular in nature and this distinction is often difficult for beginning practitioners to distinguish. If the *ho* technique has been applied properly, the pulse

has already softened, slowed, become more supple and integrated prior to the moment one removes the needle.

One’s sense of the ebb and flow of qi in the pulse is a qi phenomenon that is expressed *through* the pulse but is in actuality a generalised effect perceptible anywhere in the body.⁴ Beginning students of Toyohari spend a great deal of time trying to feel this wave of qi *in* the pulse when it is in fact something that is happening *through* the pulse. We must filter it out from all the other gross physiological input that we are feeling from the modulations in the flow of blood through the radial artery. It has been my experience that when properly attuned, students often find it easier to feel this characteristic wave in the qi with a hand placed anywhere on the body rather than looking for it in the radial pulse.

This more generalised palpatory awareness of qi has the potential for greatly enhancing our appreciation of the overall state of an individual’s health. It informs our understanding in ways that go far beyond our assessment of a patient’s pulse, abdomen, tongue, etc.

In pulse diagnosis we tend to compartmentalise our experience of the pulse. For instance, we rarely say that a pulse is both a floating (浮 *fu*) and a prison (牢 *lao*) pulse, yet we routinely describe pulses as wiry and floating on the surface and soft, squishy and empty upon deeper palpation. Because our perception of the pulse is so intimately tied with how firmly we are pressing, we tend to focus on one characteristic or another. When palpating the qi, however, it is much easier to feel a subject’s qi all at once in its entirety. We may indeed experience the qi as light and floating on top, and strong and hard down deep with not much activity in between. Because it is so much easier to appreciate all of these layers at once, we can more clearly assess the qi as a whole. The range of information that becomes available to us is highly nuanced, seemingly endless, and well beyond the scope of this paper. For now, however, we will focus on those phenomena that occur both in the qi and the pulse, and that lend themselves to description in terms more familiar to pulse diagnosticians. Still, even in its most rudimentary expression the global quality of the information gained from qi palpation both informs and complements our other diagnostic tools.

The perfect touch

Before discussing the details of a systemic experience of qi, it is worth defining the manner in which it must be engaged. We spend a lot of time in Toyohari working on our touch. We learn to lo-

4. It is not uncommon for sensitive individuals to be capable of perceiving and tracking just by being present in the room.



Ante Babic’s **Tips for running a successful clinic ...**

Introducing my new product, the ultimate solution for those patients who jump up, needles and all, to answer their mobile phones: Velcro sheets.



If we approach the qi with some preconceived notion of how lightly or firmly we need to touch the body to get the information we are looking for, then we are not really listening. The qi has its own agenda for contact.

cate acupuncture points and to needle in a certain way. In contrast to other styles of acupuncture, our contact becomes almost preternaturally light. In conversing with the qi as a whole it is necessary to attend to more than just the lightness of our touch and we must cultivate a somewhat different set of palpatory skills.

Much of this terrain has been mapped in the field of cranial osteopathy. There are three aspects to effective contact. First, the contact must have the right pressure or firmness. It may be lighter or heavier depending on the patient and the practitioner, but it must feel comfortable to the patient. We cannot be too heavy-handed in our touch, but neither can we be too ethereal. In and of itself, a very light touch often fails to confer enough of a presence for the qi to talk to us very deeply and its furtiveness can leave patients with the sense that the practitioner is not really there. Next, our touch must be soft, water-like and most of all, receptive. Our hands must soften and melt to receive the qi. The final and perhaps most evasive aspect of contact is that we must find the right level of presence that will encourage the qi to speak to us.

Finally, we must *show up* for the qi in a way that is neither intimidating nor aloof. One of the simplest and most difficult things that we can do as humans is to be present. Many master acupuncturists have a very light touch, but what makes their contact remarkable, soothing and therapeutic is the sense of compassionate presence their touch conveys to the patient. We must make contact in the same way that a mother cradles her child, simply holding, letting the qi know that we are present, and appreciative, but without judgment, questing, or inquiry. If we approach the qi with some preconceived notion of how lightly or firmly we need to touch the body to get the information we are looking for, then we are not really listening. The qi has its own agenda for contact.

No agenda

In Chinese medicine in general and Toyohari in particular, we are perpetually asking and analysing. In the Toyohari system we have only four diagnostic possibilities for the primary *sho* or pattern, and the secondary pattern is typically even more limited than that. We are forced to cram our perceptual reality in an almost absurdly narrow set of boxes. This requires a fair amount of diagnostic analysis. Part of the beauty of this system, however, is that within this almost ludicrously simple model we then have a remarkable degree of freedom to work with directly with the qi. But we cannot let ourselves become hamstrung by the model, and when we draw our attention to the qi as a whole we must at least initially leave our diagnostic agenda at the door and just listen to what it has to say. Only after we have fully appre-

ciated the situation can we then place the information we have gained in the context of whatever treatment style we are working with.

Varieties of palpatory experience

Much of the highly nuanced language of pulse diagnosis can be readily adapted to the palpation of qi. For instance, one of the easiest pulses for a beginner to feel is a floating pulse. Floating or buoyant pulses are very common in people who are stressed out. It comes as no surprise then that the qi of people who are stressed also tends to float. By this I mean that we experience their qi as being closer to the surface of their body.⁵ In such individuals, it may also be difficult to feel their qi down “close to the bone”; it is somehow unrooted in the same way that their pulses and their very being can be.

Regardless of whether we are supplementing or draining, pulses generally become slower and suppler when we have needled effectively, and this is accompanied by an overall sense of settling that is palpable even in very deep pulses. The same is true of the qi. The settling I am referring to here does not mean that the qi is collapsing and no longer able to hold itself up. This is the settling of qi back to a state of stillness and clarity like the clearing of sediment in a stream. It is the ground in which all of the other positive changes occur and its full expression is described in cranial osteopathy as “neutral” or “holistic shift” wherein all the tissues and physiological functions of the body both settle and homogenise. The tissues reach a state of harmonic resonance such that distinctions between them become meaningless. The salient characteristic of neutral is an ever-deepening dynamic stillness. Everything becomes very integrated, undifferentiated, absolutely quiet, and yet vibrantly alive. It is from this place that the inherent intelligence of the self regulating mechanisms of the body take over and do whatever needs to be done.

This is as good a definition of an effective root treatment as one could ask for and acupuncture can be a powerful tool in facilitating such a holistic shift. From a Toyohari perspective, every needle, every touch, should improve the pulse; from my perspective it should also nudge the patient further into neutral. The settling is felt on all levels, and it is not surprising that the patients themselves typically feel as if they are melting into the treatment table.

When needling, if we do not perceive this settling and homogenisation in the qi, we almost certainly will not feel it in the pulse. But when all of the body’s tissues, fluids, flows and functions begin

5. Of course, seasonal factors must also be taken into account. For instance, we expect the qi to be more superficial in the summer and deeper in the winter.

to speak to us in a single coherent voice, it will tell us what it needs if we know how to listen. The sense of systemic integration that is perceptible in the qi when simply touching the body informs and enriches the relatively mechanical experience of a supple, relaxed, pulse that we define as perfectly balanced.

You say tomato...

The pulse and the qi can tell us similar things in different ways. For instance, when locating points in practice sessions, even relatively experienced practitioners do occasionally run right over them before the evaluator on the pulse can tell them they have found the best point. The pulse responds to proper point location in an almost binary manner. The location is either right or it isn't. By contrast, the sense of sinking and settling that expresses through the qi tends to come on a little more gradually, letting us know when the optimal point is coming up, so that we don't just roll on past. The phenomenon is true for both the pulse locator and the evaluator.

A good measure of how well one understands what one is feeling is how clearly one can articulate it. This can be harder than one might expect, even when one's perceptions are apparently unambiguous. Although it is essential to remain open to whatever information is coming through with as little conceptual bias as possible, it is often useful to begin by describing that information in ways that are both familiar and easy for us to digest. This is at least one reason why the first thing we do in pulse diagnosis is to identify whether a pulse is floating or sinking, fast or slow, strong or weak etc. We can use a very similar criterion for beginning to talk about the qi. It has four major qualities; we can assess its overall degree of buoyancy; we can assess the depth where it feels the strongest or densest; we can assess its overall strength; and we can assess its grain.

Buoyancy

The buoyancy of the qi is clearly analogous to the buoyancy of the pulse. Both pulses and qi may be buoyant, sinking, or somewhere in between. Both may seem to float while still feeling rooted to the bone. Conversely, both feel buoyant yet unrooted.

Depth

Aside from this, we should also assess the

depth at which the qi is the strongest, just as we assess the depth of a pulse's "stomach qi". After all, is it not the overall state of qi in the body that makes a pulse float or sink in the first place? Why shouldn't this quality be palpable in a generalised manner? Another way of describing this is to define at what level the qi feels the most dense.

Stratification

Direct palpation of the qi can often give us a clearer sense of the overall stratification and integration of the qi. Sometimes a pulse that appears to be very buoyant will actually be the strongest with deep pressure. These distinctions come into sharp relief when directly palpating the qi. We look to the strength of the pulse to tell us something about the vitality of the qi, and this information is also readily expressed in the qi as a whole. I don't generally experience the qi as being fast or slow although I do typically get a sense of its overall activity as distinct from its strength.

Grain

The quality of activity also conveys a sense of coarseness or refinement, a grain. It helps me to think of the qi as having a quality of effervescence, like the bubbles in soda water or champagne. These bubbles might be large and turbulent or fine little pinpricks. They may feel agitated or languid. I think that the image of bubbles is also apt because bubbles are essentially little packets of empty space moving through fluid. This image puts us in touch with both the fluid qualities of qi and its essential stillness. So it can be helpful to define the grain of the qi's effervescence.

Of course, we may feel other things as well. We may feel the coursing of fluids and tides, and many other things that we cannot even name, but the four criteria just described are our gateway to our appreciation of the qi. It is essential to remember, though, we are not diagnosing, merely describing.

The next step after gaining an impression of the qi in this way is to compare it with our pulse findings. Are they entirely same? If not, what aspects differ? In most cases, you will find a substantial congruity between the pulse and the qi, but if they were invariably the same then it would be redundant to listen to them both. Sometimes one quality will be more apparent in the pulse and another in the qi. For instance, we may experience a layer of turbulence, density, or hardness on one level in the qi and on another in the pulse. Just as the tongue, abdomen, and

pulse may each tell us something different about a patient's condition, so too may the qi. These differences will typically become more congruent over the course of treatment, ultimately resolving as the system becomes more fully integrated.

Lag time

The utility of listening to the qi lies in how it enriches information gained by other diagnostic methods. The presentation of the pulse and the qi when people have been sick with a cold for a few days is a simple and vivid example of this principle. The patient's pulse may still be floating and his symptoms may suggest that the pathogen is still in the exterior. By contrast, one may experience the qi in the interior, or one may feel it on the surface but accompanied by an odd sensation of collapse, like the first flakes of fish food slowly beginning to sink to the bottom of the tank. In these cases, the sinking of the qi presages the movement of the pathogen into the qi aspect, deeper into the system. It just has not yet appeared in the pulse. This is useful information for both acupuncturists and herbalists. Particularly in the absence of other unambiguous diagnostic indicators, it can be a pivotal factor in deciding on what level to focus one's therapy.

We have posited that the qi shapes the pulse and we therefore expect changes to appear in the qi first. Sometimes the opposite is true and we perceive change first in the pulse. Once we do feel something in the qi, however, it may contain some other bit of information that is not yet being communicated through the pulse. It is as if that at any given moment, some kinds of information are transmitted through the qi and at others through the pulse. A dance of information takes place between them.

Then again, some details are just easier to feel in the pulse. The qi may enhance our appreciation of the big picture, but the pulse may still be the means by which we decide precisely where to put the needle. The pulse can tell us that the hardness that we feel in the surface of the qi is focused in the Small Intestine. We can see how the problem in the Small Intestine channel creates a resonance that is palpable throughout the body. The two tools complement each other.⁶

6. It is worth noting that skilled osteopaths routinely identify visceral restrictions simply by touching the body, so in this example the qi could in principle be every bit as informative as the pulse in identifying a Small Intestine problem. That level of palpatory sensitivity is well beyond the scope of this paper.



Some sense of irritation or agitation often appears in the qi before it appears in the pulse and it typically begins to float. By the time such changes appear in the pulse it may be too late. Attending to this can save us from our impulse to do that one last needle that confounds all the masterful work we have done up until that point ...

Some of us will undoubtedly be able to palpate currents of qi far deeper and more subtle than I have described here but the concepts I have presented comprise the fundamentals of all levels of palpatory awareness. Regardless of how deeply one may be able to plumb the depths of the qi, any therapeutic change will be characterised by an overall settling, slowing, suppleness, and integration on all levels. Whatever qualities of buoyancy, stratification, or agitation we may have begun with will have homogenised into a sense of coherence that ultimately facilitates a dynamic stillness within the patient. Whichever style of acupuncture we may use, this is the definition of a root treatment.

There are many ways to conceptualise root treatments. I like to think of them as establishing the optimal conditions for whatever will happen next. Root treatments are our attempt to make use of an existing situation, a propensity or momentum (勢 shi), and to subtly give it a nudge in the right direction. The more skillful we are at this, the less it seems that we have actually intervened at all. Things follow a spontaneous course. The branch treatment is effortless, or we simply allow the innate intelligence of the body to sort itself out. Toyohari is a masterful expression of this minimalist approach to ordering the qi.

Getting out of the way

Once we indeed have the qi heading in the right direction, the most effective thing that we can do may be to just get out of the way. In the end, the patient's body is infinitely smarter than we are and at this point our challenge is not so much to lead the qi as to follow it. The Toyohari style can be paradoxical in that with every touch or stroke, every contact, we can shepherd a system toward this neutral. Yet, if we persist in attending to minutiae in the pulse, we can actually impede the qi's progress toward its complete expression of coherence and dynamic stillness.

Listening to the qi can be a helpful tool in avoiding this pitfall, particularly in sensitive individuals. It is not uncommon to find that although subtle, and sometimes not so subtle, imperfections remain in the pulse, the qi itself has become well integrated, coherent and still. This completeness may not yet have expressed in the pulse and indeed in some patients it may never. In such cases, I trust the qi. I would rather close with a good, if flawed, pulse change and a sense of coherent stillness in the qi, than with a perfect pulse and the nagging suspicion that I may have overworked the qi. Some sense of irritation or agitation often appears in the qi before it appears in the pulse and it typically begins to float. By the time such changes appear in the pulse it may be too late. Attending to this can save us from our

impulse to do that one last needle that confounds all the masterful work we have done up until that point.

Menage a trois

The Kozato method of needling practice requires a minimum of three participants. There is a subject lying on a table who is being needled, the person doing the needling, and someone who is taking the pulse and giving feedback on point location and needle technique. The settling, slowing, becoming supple and integrating that I have described above is unquestionably perceptible in all participants who have been trained to attend to it regardless of which position one occupies in the group. The interrelationships between one's experience of palpation, needling and being needled were made vividly apparent to me at a recent Toyohari training (London, September, 2007). One of the senior instructors there offered a helpful piece of advice for honing one's point location. He suggested that we spend some time each day locating *Tai Bai* (SP-3), attending not just to the sensation in our fingers but to our internal experience, the overall internal sense of wellbeing that occurs when we'd found precisely the correct point on ourselves. In effect, he encouraged us each to become our own self-contained Kozato group; subject, point locator and evaluator. We can use the sensations that we experience in ourselves as subjects to amplify and inform the sensation in our hands as point locators and needlers.

This instructor may have been intentionally vague in describing what we should be feeling because he well understood just how subjective the palpatory experience can be. On the other hand, it has been my experience that when we carefully examine the palpatory phenomena that occur when we precisely locate a point, we discover many of the same qualities that we find in the pulse. Of course, we will probably also experience other sensations that are unique to each of us, just as each of us almost certainly observes changes in the pulse that are beyond the bounds of our consensual vocabulary. Every nervous system is a unique palpatory apparatus and each practitioner must learn to work with the tools he or she quite literally has at hand. Nevertheless, our nervous systems are more alike than not. If this were not so, then humans would never agree on anything they experience. It only makes sense, then, to look for the commonalities that we share in experiencing qi to begin to define them. The sense of wellbeing described by this instructor can be at least roughly framed as an experience of settling, slowing, relaxation and integration. After training acupuncturists of all stripes and skill levels in these sensibilities, I am confident that these qualities constitute a basic

working vocabulary for our experience of qi on all levels, as practitioners, patients and teachers.

When people locate acupuncture points on me in Kozato practice, I will often feel that some points are particularly buzzy or active. I used to identify these as the most “alive” or available points, the ones that we should pick for needling, but pulse takers would often find that some other point produced a superior change in the pulse. It took me a long time to realise that I was focusing on a sensory perception that reflected only part of the picture. I now find that that my experience of settling and slowing is a far more reliable indicator of positive changes as expressed through the pulse than the more superficial sense of qi activation alone.

The same principle holds true when actually needling. The sense of a surge of qi building, and peaking as we needle is really just a partial description, a yang expression that has a yin counterpart in this sense of settling. It is not that we need only focus on the sense of settling, we must attend to both.

Into the abyss

There are many ways in which this principle of attending to both the yin and yang aspects of qi expression plays out when needling. For instance, when needling in the Toyohari style, one’s *oshide* may be too heavy, making the pulse hard, or diffuse.⁷ Of course, our ultimate concern is not with the pulse at all. The pulse is merely the vascular expression of a much more generalised resonance in the qi. A heavy *oshide* expresses itself in the body as a whole by compromising the qi’s natural tendency to ground and settle and generally makes it float back up. Sometimes the qi seems to somehow congeal, becoming sluggish or more viscous. These qualities are not represented in the qi *wave*; they are experienced in the level of perception that is deeper than that.

Just as we look for the pulse to settle, slow and become suppler in a particular way, the qi too, must settle in a very specific manner. In Toyohari, if one’s *oshide* is too loose or otherwise imperfect, we say that this makes the qi “leak”. This expresses itself in a pulse that lacks borders or structure even though it may have slowed and settled. A sloppy *oshide* also tends to produce a unique sensation within the qi. Although it still sinks, the qi can feel as if it is plummeting into an abyss. Our experience of the qi as a whole gives us a clear sense that it lacks a container. Like an infant that is more at ease when swaddled, the qi requires some structure that helps it to most fully define itself. Once we are able to clearly identify the presence or absence of structure and integration

7. The *oshide* is the ring made by the thumb and index fingers that holds the needle against the skin.

that occurs in the qi beneath our fingers, we are no longer so dependent on feedback from the pulse. We know from moment to moment how well we are maintaining a container for the qi and we can adjust our technique accordingly.

The addition of a specific qi *listening* position to the Kozato trio utilises thus far untapped resource in our use of the Kozato method in refining our engagement of the qi. This is presumably how large group Kozato practice has worked in Japan for decades prior to the advent of the now popular “pulse chain.”⁸ All I have really added here is a means that allows every participant to communicate more articulately with one another and to bring these qi *listeners* into the conversation in a manner that benefits all involved.

The Kozato method is in my opinion among the most effective techniques for developing one’s acupuncture skills that we have available to us today. I have referred to it repeatedly in this paper because it is a methodology that I am intimately familiar with. But it is just one of many ways that we as a community go about communicating with one another. I believe that the vocabulary presented here is potentially useful for a much wider range of acupuncture styles. Regardless of how it might be employed, it is just a beginning, not yet a language, but a rudimentary syntax that allows us to begin voicing more clearly how many of us may already engage the qi. The terms themselves are less important than the consensual experience that they point to. Once we are able to speak to one another in ways that we can all make sense of, we can begin to both broaden our vocabulary of qi and to further refine our palpatory sensibilities. ■

8. Although I saw Dr Yoshio Manaka demonstrate a similar technique during a training I attended in Boston in the late 1980s, In Toyohari circles the “pulse chain” apparently originated in a large scale training practice in the United States. With a large group of people standing around a treatment table waiting for something to do, one participant grabbed the pulse of the designated pulse taker, and another took his pulse in turn, allowing all the participants to feel pulse changes during needling. This technique has now become a standard procedure in large Kozato groups. While I concede that this is a convenient means of allowing many people to participate in Kozato practice, and may be helpful at some stage of practice, I believe that it ultimately creates more problems than it solves. It is often difficult to distinguish the perturbations in the pulse of one’s neighbor from those of the intended subject. Advocates of the pulse chain technique make the valid point that the “old style” qi listening technique described in this paper can be very disruptive for the Kozato subject who must cope with the influence of so many hands touching them. In either case, the problem is one of observer neutrality. Regardless of which technique we may prefer, it is essential that we keep our own stuff out of the picture to whatever degree possible. The problem with the pulse chain method in this regard is that it is difficult for most of us to present our fellow pulse takers with a truly neutral pulse.

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