## **Book Review**

*"Japanese Acupuncture: A Clinical Study"* written by Stephen Birch and Junko Ida

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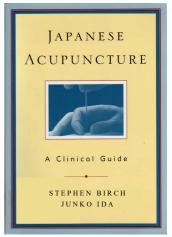
Japanese Acupuncture: A Clinical Guide is the "foundation volume" in a series on the Japanese clinical practice of acupuncture. This exciting text brings many highly relevant, yet heretofore largely unknown, 'materials and methods' to life for the Western practitioner. The purpose of this volume is clearly stated: to set the stage for the next level of development in the field of (English language) acupuncture. Skills and techniques common to the Japanese acupuncturist have been translated and presented in a very practical and informative style. Just as the West begins to accept acupuncture to a larger degree, Japanese approaches will enjoy an overdue boom.

The process of assimilation, integration and development of Oriental medicine in Japan is very important to understanding where Chinese medicine has been altered to fit Japan's unique culture. The unique subtlety and delicacy of Japanese acupuncture, the "less is more" style, common to so many Japanese traditions, receives special attention

The initial chapters present a historical overview and an assimilation of Oriental medical theory familiar to most Western trained practitioners. An overview of Japanese acupuncture systems concludes this section. Systems representative of Japanese practice are defined and explained. The work of Dr. Yoshi Manaka, Kodo Fukushima and Denmai Shudo are briefly discussed under the topic of Keiraku Chiryo (meridian treatment).

The main body of the text covers palpation, needles and needling, moxibustion (kyu), intradermal needles needles, (Hinashin), press-tack (empishin), press-spheres (ryu), cupping (kyukaku), bloodletting (shiraku), Manaka's wooden hammer, and needle and case studies from the Japanese literature, including the authors' experience. This extensive collection, complete with illustrative photos, provides a very comprehensive overview of Japanese techniques and the discipline required to administer them. Where appropriate, information about actual Japanese clinical situations makes this volume verv comprehensive.

Acupuncture education and practice in Japan are the subjects of Appendix 1. This information will be very useful for educators those practitioners and organizing study groups and professional organizations. The presence of Appendix 2 is somewhat dubious as there  $\mathbf{is}$ no obvious connection to Japanese clinical practice. Chinese studies using seeds taped to auricular points presents



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interesting information but adds nothing to the discussion of elucidating Japanese practice.

In conclusion, this text is worthy of attention and will undoubtedly find a place in the libraries of many a Western practitioner. That said, one wonders why, given the optimal timing for bringing this information to Western practitioners, there is not a single Japanese Kanji or Chinese Character. The authors' clearly relied on their hard earned skills in reading and speaking Japanese, yet make absolutely no effort to extend this knowledge to practitioners in the West. As practitioners of a traditionally Oriental body of medical wisdom, is there no imperative for the Western practitioner to make even the most rudimentary efforts to read or recognize the original kanji? Lists of acupuncture points identified only by number, Romanized transliteration of Japanese terms like sotai exercises and oshide for moxibistion reveal nothing of the wisdom hidden in the terms and instead reinforce the Westerners belief that Kanji are too complicated and numerous to bother considering. Until Western practitioners begin to master the language of the medicine we will be mere technicians, exquisitely skilled perhaps, but in the long term, limited by the translation on which we depend.

Birch and Ida have done us a great service, providing a necessary window into an elite world of dynamic practitioners. But at the same time they are keeping our perspective limited. Surely their practices involve reading and speaking Japanese. Open dialogue with Japanese practitioners will be the real key to transforming the Westernized approaches to acupuncture from largely symptomatic point recipes to well organized reproducible root treatments. To that end, Japanese Kanji, as well as romanization of terms and point names must appear hand in hand.