Introduction of Japanese Acupuncture

Considering the Therapist's Hand (2)

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4. Palpation in Japanese Acupuncture and Moxibustion Treatment

One of the characteristics of Japanese acupuncture and moxibustion treatment is palpation, which forms part of the four diagnostic methods and is of enormous significance among these methods. For Japanese acupuncture and moxibustion treatment, palpation is not just a diagnostic method, but also an important means for gathering information. The practitioner can then determine the depth of the therapeutic target area, stimulus quantity, as well as basic aspects of the acupuncture and moxibustion treatment.

Acupuncture and moxibustion treatment centers essentially on stimulation of the body surface, so palpation of the physical body naturally has to play an outstanding role. Further, as therapists spend a long time with their patients, another characteristic of the Japanese acupuncture and moxibustion treatment may well be described as their ability also to "touch the heart" of their patients.

A certain amount of research into palpation has already been published. This research focuses in particular on abdominal diagnosis. Yet, considering the importance of palpation as a diagnostic method for acupuncture practitioners, the amount of conducted research is not sufficient. Here I would like to explore why more sufficient research has not yet been performed.

5. Placing too much emphasis on visual and auditory information

Japanese acupuncture and moxibustion treatment is a traditional form of medicine that was transmitted to Japan from China (currently called Chinese medicine), modified during the Edo period in a characteristically Japanese manner, and is still used in this form today. The development of the delicate and highly refined senses of the hand developed in the Edo culture may definitely be described as an important therapeutic tool. Yet, the emergence of the modern 'machine culture', and the changes it induced following

the Edo culture, may have unavoidably put an end to this unique aspect of our culture.

One of the reasons for this development has been the progression of the extremely high technical specialization that is associated with the basis of modern science and our mechanically oriented civilization. It has become very difficult to get a perspective on the entire field of technology, which in turn may render comprehension of the current state of society very difficult. We have created a society relying not only on a high degree of specialization, but also a reliance on other people and services for all our basic needs (food, clothing and shelter, etc). This trend has resulted in an estrangement in self-recognition. The emotional status of individuals rooted in their feelings as well as physical phenomena based on essential life events like birth, aging, disease and death, awareness of fatigue and one's own mental state, have slipped out of view.

Generally, in Japan, medical care is established so that patients entrust themselves both physically and mentally to the therapist (therapist - patient relationship) and it is a matter of general understanding that the function of hospitals, medical care or drugs and physicians is to cure patients. In this society the "power to heal oneself" is underestimated and the significance of "healing oneself" has been lost. The result is that efforts made by patients are not properly appreciated and, comparatively, even the original role of the therapist, namely healing powers, are not sufficiently evaluated and recognized. This may eventually lead to the misconception that physicians merely have the function of providing a bridge between the patients and pharmaceutical companies.

It also needs to be pointed out that in this modern era, vision and hearing are assigned much more importance than touch. In this kind of society and within the framework of medical care, it can be difficult to identify the significance of body contact.

6. Insufficient research of and training in palpation

There is a tendency to place too much emphasis on vision and hearing among the five senses, while touch receives too little attention and any research into the latter proves to be difficult. In the field of oriental medicine only pulse and abdominal diagnoses rely on touch and little research has been conducted. The subject of palpation in its entirety has not been investigated. Within the field of traditional acupuncture and moxibustion in Japan following World War II, in particular, pulse diagnosis has become a primary diagnostic method. Since the significance of pulse diagnosis has tended to be overemphasized, developments in research related to other areas of palpation, in general, have received little or no attention.

Accordingly, unenthusiastic and poorly planned research into palpation leave many standards still to be established. The result is that the education pertaining to acupuncture and moxibustion places too little importance on palpation skills. Thus, one of the characteristics of Japanese acupuncture and moxibustion treatment, namely the determination of stimulation sites through palpation, can hardly be said to be accurately taught.

Moreover, the state examinations for acupuncture, moxibustion and Anma (massage) do not include practical examinations, so that the practical training is entrusted to the individual teaching institutions (that is schools authorized by the state). In practice, this means a trend towards a certain degree of neglect of practical skill in favor of emphasis on lectures.

- 7. Significance of palpation for acupuncture and moxibustion from the perspective of palpation –
- 1) Information gathering through palpation (From the perspective of the therapist)

First, considering the question from the perspective of the therapist, the patient's account of their own symptoms can not be accurately assessed by inquiry alone. Instead, the practitioner must directly (demonstratively) verify the condition based on the information obtained through the hands. In this way even regions and subtleties of symptoms that lie outside the patient's scope of self-recognition can be identified, brought to the patient's attention and highlight an overall picture of the patient's physical condition.

(2) From the patient's perspective

If the therapist is capable of directly perceiving the patient's subjective discomfort and pain, the patient may sense the practitioner's skill and knowledge. If the patient can feel confidence in the therapist's skills they may become able to share his or her pain to assist in the healing. Perhaps more importantly, is the practitioner's ability to detect conditions that are completely asymptomatic for the patient. These unconscious processes necessarily influence the patient's physical condition and healing path. I believe this is one important role of the therapist, to alert the patient to their own unrecognized potential, disease and resistance to their own condition. Springing from modern customs and habits of convenience and specialization, many people have been deprived of their innate capability to recognize their own physical condition and thus their awareness of their place in society and the natural environment.

8. Information required for the treatment is gathered through palpation

Naturally, the information obtained through palpation is very important for the determination of the treatment target areas, the type of stimulation and quantity of the stimulus etc. The palpation performed in Japan does not only serve to determine the medical examination and treatment principles, but also allows us to comprehend and monitor the constantly changing physical condition in response to the acupuncture and moxibustion therapy and thus finally determine the quantity of the required stimulus. Palpation is an extremely important means to decide when the treatment should be adjusted or discontinued.

Therapists thus use palpation-derived information and are guided by experience to decide the stimulus strength and method. To make palpation a common examination method in the future, these individual pieces of palpation information should be organized into a system. Therapists could then share and contribute to a dynamic common body of knowledge.

For this purpose the establishment of quantifications of palpation and unification of palpation techniques, as well as methods suited for the acquisition of palpation skills, should become a task for future efforts.