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# PEDIATRICS Advanced Study

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## CHAPTER 1: FUNDAMENTALS



# DIFFERENCES BETWEEN CHILDREN AND ADULTS

### Introduction

Chinese medicine abounds in sayings or proverbs which sum up an important subject. In the English language, we have lost some of this richness of expression, although it used to be commonplace for people to say such things as “an apple a day keeps the doctor away” or “a stitch in time saves nine.” Chinese medicine, however, has a saying or quotation for almost every situation. In this section we will summarize the medical differences between children and adults with these well-tried sayings, and then expand upon them to show what they mean in clinical practice. Most of the sayings are four or five characters long in Chinese, which is characteristic of the classical language used in traditional Chinese medicine. We have tried to preserve this flavor in translation.

### “CHILDREN’S SPLEEN IS OFTEN INSUFFICIENT.”

The Spleen governs the entire process of digestion, absorption of nutrients, and “postnatal energy” (sometimes translated as “acquired energy”). Before birth, children do not have to digest food because they take all they need from their mothers. After birth, eating and absorbing food in order to grow is their main problem in life. This means that the Spleen has to work very hard. As a result, Spleen-related disorders are extremely common, so much so that one Chinese doctor has said, ‘treatment of children is simple - all they suffer from is indigestion.’ “Children can only catch cold or have bad digestion.” digestive disturbances occurring in babies and toddlers are accumulation

disorder (ji), which is similar to the “retention of food” disorder in adults. (The other most common pattern is Spleen qi deficiency.) This happens because a baby’s digestive system is working so close to maximum capacity that it only needs a small extra stress to become overloaded.

### “CHILDREN’S YIN IS OFTEN INSUFFICIENT.”

Children are extremely yang compared to adults -they are active, vigorous, always moving, and demanding attention. Because their yin is often insufficient, it is easy for them to come down with hot diseases (such as fevers) and convulsions. As a result, in China and other developing countries, yin deficiency is often seen in babies and children. It is rarely encountered among these age groups in the West, however, because febrile diseases are usually treated immediately with antibiotics. While it is true that such treatment may in turn give rise to other problems, it has the great advantage of avoiding the severe condition of yin deficiency, which is difficult to treat, especially with acupuncture. Perhaps for Western children another saying should be added: “Children’s yang is often insufficient.” It seems to us that the hot patterns which were common in the West fifty years ago have now been replaced by cold patterns. Even illnesses such as otitis media are now frequently cold in origin.

### “ORGANS ARE FRAGILE AND SOFT, QI EASILY LEAVES ITS PATH.”

This saying expresses the fact that because children are delicate, it is easy for external factors to disturb their qi. They can quickly become overheated in hot weather or catch a chill in cold weather. They are more susceptible to viruses than adults and are easily affected by changes in diet.

In babies we see another phenomenon during illness when the qi leaves its path: a wholesale breakdown in the production of qi. In Chinese this is described as a failure of the qi mechanism (qi ji). It is seen especially in digestive disorders, which can cause a drastic reduction in a baby’s energy and may give rise to any number of qi-deficient diseases.

### “CHILDREN EASILY BECOME ILL, AND THEIR ILLNESSES QUICKLY BECOME SERIOUS.”

This saying follows from the previous one and expresses the fact that the rate at which illness progresses can be alarming. In febrile diseases the temperature can quickly shoot up; chest complaints can rapidly develop into pneumonia and threaten the child’s life; and diarrhea can swiftly become severe and endanger life.



**“YIN AND YANG ORGANS ARE DEAR AND SPIRITED. THEY EASILY AND QUICKLY REGAIN THEIR HEALTH.**

Although Children’s illnesses can quickly become serious, they can just as readily respond to all forms of treatment. Even when a disease appears to be hopeless, children can easily and rapidly recover.

We have talked so far in terms of physical disease, but this saying emphasizes the close link between health and the spirit. Thus, it is easy for children to be affected by the seven emotions. For example, they can suddenly fly into a rage and make themselves ill, or just as suddenly become overwhelmed by grief. They are, moreover, greatly influenced by the emotions of those around them, especially their parents. Any anxiety or irritation the parents feel is soon reflected in their children.

As we will see in the section on development, children under the age of seven have little awareness of their emotions, and even less control over them. It is this that makes children so susceptible to picking up the emotions of those around them. Many a mother has experienced this phenomenon, where her baby reflects her own emotional state, being happy when she is happy, and irritable when she is irritable.

**“LIVER OFTEN HAS ILLNESS.”**

This saying is usually understood to mean that it is easy for children to have convulsions. The term which we translate as “illness” (yu) means surplus and refers to wind, as the Liver is the organ associated with that pathogenic influence. Even in the United Kingdom, up to five percent of children suffer from febrile convulsions at one time or another, despite the early use of modern medicines to reduce fever. In Chinese medicine convulsions are a manifestation of the stirring of Liver wind. Actually, many of the other Liver diseases that adults suffer from (e.g., stagnation of Liver qi or Liver invading the Stomach or Spleen) are rarely present in children. To read the Chinese books, one would get the impression that the only Liver disease children manifest is Liver wind, and that they never suffer from stagnation of Liver qi due to emotional constraint. This is not completely true in Western practice, where children are brought up differently, but it is generally true that children do not restrain their emotions nearly as much as adults.

By contrast, it is easy in children for food to become stagnant, leading to accumulation disorder or even childhood nutritional impairment. These disorders often have many symptoms similar to those of stagnant Liver qi, but are thought to be due to an entirely different cause, namely, the struggle to digest food.

It cannot be overstated that problems which look like Liver yang (with red face and tantrums, among other symptoms) are only rarely associated with a Liver pattern, but

are usually related to accumulation disorder, which is to say, indigestion. Thus, in adults, stress and restrained emotions lead to anger and indigestion, while in children it is the indigestion that leads to anger and emotional outbursts. This has important implications when it comes to treatment, for accumulation disorder is a factor underlying a wide range of diseases from indigestion to asthma and eczema, to name but a few.

### **‘TREAT THE MOTHER TO TREAT THE CHILD.’**

During the first years of life a child receives energy from its parents (usually the mother) to supply any deficiency in time of illness. It is therefore normal for a mother to feel ill and exhausted when her child is ill. This is clearly seen in clinical practice, where it is not unknown for the mother to feel benefit from the treatment of her child even before her child does.

On the other hand, the energy that a mother supplies to her child will reflect the mother’s imbalances: if the mother is ill, her baby will more easily become ill. When treating young children, one should therefore always consider the mother and child as a single unit, each dependent on the other.

## **CHILDHOOD DEVELOPMENT - COMMON AGES FOR ILLNESSES TO APPEAR**

There are certain common ages for illnesses to occur which are related to the stage of development of the child and to the particular problems the child is facing.

### **SIX MONTH**

Underlying many problems at six month is the accumulation disorder, for it is around six months that the digestive system is under maximum stress. The baby is still growing very rapidly but has additional demands on its energy. More hours are spent awake, and there is more movement, with the child lifting itself up. With the commencement of weaning, the digestive system is adapting to new foods, and the child’s first contact with infectious disease and immunization usually occurs at this time.

All of these stresses can easily overload the digestive system and lead to the development of accumulation disorder or Spleen qi deficiency. This, in turn, often leads to other disorders (e.g., asthma, eczema, diarrhea, or vomiting) and the practitioner will find that such illnesses will not respond to treatment until the digestion is cured.

### **TWO YEARS**

At around two years children start to speak and become aware of their individuality as distinct entities. They begin to have desires of their own, other than the simple ones of

eating and sleeping, and also begin to test their will against those around them. They start to want things for themselves. This phase is often described as the ‘terrible twos.’”

The diseases which accompany this transition are of the febrile type, which are an expression of the relationship between will power and Kidney yang. The more strong-willed and determined a child is, the more heat there is, and thus the more the child is prone to diseases of heat. It is not uncommon at this age for children to get a series of one- or two-day fevers throughout the year. These fevers should not be taken seriously. They can usually be distinguished from recurrent fevers associated with a lingering pathogenic factor by the extroverted character of the child and the absence of swollen glands in the neck.

## SEVEN YEARS

At around seven years children start to become aware of emotions as separate from themselves and begin trying to control these emotions. In fact, the years up to about the age of twelve are concerned with developing a constructive control over the emotions. These years are often the healthiest in a child’s life, for it has left the childhood diseases behind and has not yet confronted those diseases associated with adulthood. The main problems that do occur in this period-like stress due to anxiety or over-work at school-are more characteristic of adults.

## ADOLESCENT

The transition from childhood to adulthood is a difficult one in Western society. This is the best age for separation from the parents to begin, but in modern society this is often very difficult. The diseases that occur at this age are usually due to overwork at school or to emotional problems within or outside the family. It may be helpful for children to receive treatment once a month for about a year to help them through this transition.

# DIFFERENCES BETWEEN WESTERN AND ORIENTAL CHILDREN

One teacher said, “Your children are not taught to endure.” Children are indeed the same the world over, but their upbringing varies in different countries. In the West there is very little in the way of discipline or boundaries. Children are not taught to endure pain, nor to sit still and keep quiet. This makes it much harder for the practitioner, whether acupuncturist or herbalist, for not only have the children not been taught to endure the small amount of pain from an acupuncture needle, but neither have their parents. This means that much time is spent persuading and cajoling the parents into having their children treated. It is very hard for many parents to see that the small

amount of pain associated with a few treatments is in significant compared to a lifetime of disease.

This is just one example of the many differences in the lives of Oriental and Western children. Other differences include a radically different diet, less exposure to television, lack of exercise, and a very different medical system. All of these will influence the development of disease. They explain why many of the disease patterns seen in China are not found in the West and vice versa. In this book we have tried to describe these different patterns and how to treat them.

## CAUSES OF DISEASE IN CHILDREN

### INTRODUCTION

The question “What is the cause of disease?” has many answers, each of them correct and often complementary to the others. A doctor trained in Western biomedicine might look for an external cause such as a virus, while a homeopathic doctor might look for a hereditary miasma, and a Buddhist for a lesson not yet learned. A doctor of Chinese medicine would regard all of these as valid causes of disease and would consider it his or her task to decide which one was most important in a particular case.

In this section we will discuss some common causes of disease as they present in our Children’s clinic. It is thus based primarily on experience rather than on Chinese textbooks. In my experience treating both adults and children I have found that if a cause of a particular disorder can be identified, then the proper treatment can be provided and the prognosis determined with more certainty.

The treatment of asthma will serve as an example. One very common cause of asthma is the accumulated effect of recurrent lung infections, while another cause is the reflection in the child of strained relations between the parents. The treatment, prognosis, and advice to parents would be very different in the two cases. There is an appropriate saying in Chinese medicine, “treat diseases of the Heart with Heart medicine.” “Diseases of the Heart” is usually taken to mean those illnesses associated with emotions such as unhappiness, and “Heart medicine” is taken to mean warmth and love.

### EXTERNAL PATHOGENIC FACTORS

Diseases associated with the six external pathogenic factors include many that would be classified as infectious, which, until the beginning of this century, were among the principal causes of illness and death in both children and adults. This situation has been radically changed in the developed world through better living standards, hygiene, and the invention of antibiotics. Nevertheless, the external pathogenic factors are still a very

common cause of disease, even if they are now less feared. We will discuss them only briefly here because they are the same in adults as in children, the main difference being that children are more susceptible to them than are adults. Children also have more contact with infectious diseases in their play groups.

### Wind

Wind is characterized by sudden onset and rapid progression of symptoms, and is often a primary cause of disease. It attacks the upper and outer parts of the body first and may then quickly penetrate to the interior. Since it attacks the exterior part of the body, it is met by the protective qi, resulting in symptoms which reflect disturbance in the circulation of protective qi, such as chills and fever. Wind disorders which remain at the exterior (or superficial) level are treated by the method of releasing or relieving the exterior, which usually involves causing the person to sweat. Wind readily combines with other pathogenic factors, especially cold, dampness, and heat.

### Cold

Cold is a yin pathogenic factor and is contracting in nature. The contraction often causes severe, tight pain. For example, in influenza of the cold type there are often tight pains in the head, and in diarrhea of the cold type there may be contracting abdominal pains. Cold weather by itself is now a relatively uncommon cause of disease in children, but when it does occur, it may be treated by the method of expelling the cold. (The seven star needle, moxibustion, or cupping may be used for this purpose.) Cold commonly attacks in combination with wind, which drives it into the body. Wind-cold disorders of this type are treated by expelling the wind and warming the cold. One of the most common causes of cold in children is the consumption of ice-cold food and drinks, as well as cold energy foods and medicines.

### Dryness

Dryness is a yang pathogenic factor that consumes yin. It most commonly affects the Lungs and is characterized by dryness of the skin, especially around the mouth, and by hard, dry coughs. It is most common during hot, dry summers and cold, dry winters, and amongst those who live in centrally heated buildings. It is treated by moistening the Lungs.

### Heat

Heat is a yang pathogenic factor characterized by fever and redness, and in children is more serious than cold. In children it is easy for any external pathogenic factor to transform into heat, and since their yin is insufficient, hot diseases can progress rapidly. Among other things, heat (without wind) can arise from exposure to heat in hot climates,

remaining in the sun too long, accumulation disorder, and eating hot foods. When combined with wind as wind-heat, it can take a rapid course in children and requires prompt treatment. Heat disorders are usually treated by clearing the heat for which acupuncture is especially effective.

### Summerheat

Summerheat is a yang pathogenic factor characterized by sudden, extremely high fever with headache and frequently diarrhea. It is relatively uncommon in the temperate climate of Britain, but ironically can occur in winter when children go into overheated buildings. The most common manifestation is sunstroke, which rarely proceeds to the diarrhea stage, but which is dangerous if it does.

### Dampness

Dampness is a yin pathogenic factor characterized by heaviness and by watery or sticky discharges. Children who live in seaside towns and damp houses are particularly susceptible. Dampness is usually treated by draining the dampness and notifying the Spleen.

### Lingering pathogenic factors

When an illness is left untreated, is checked by inappropriate treatment which prevents it from running its natural course, or is only partially treated, it may leave behind some trace of the original disease. For example, acute tonsillitis that is untreated, or treated with antibiotics, can lead to chronic tonsillitis where the tonsils are permanently swollen. These conditions are regarded in Chinese medicine as ones in which the pathogenic factor lingers (yu) or is not completely cleared from the body. In every clinic in which we have worked, this is the most common single cause of chronic disease.

For those trained in Western medicine this is a difficult concept to understand. The original disease has been cured, and yet it leaves behind an imbalance which is like a remnant or echo of the original disease. This stumbling block can be removed, however, if one forgets the idea of “germs” causing disease and thinks instead of pathogenic factors. It is then easy to imagine an attenuated or weakened version of the pathogenic factor still lingering or hiding in the body.

This phenomenon also occurs in adults, and is behind such conditions as post-viral syndrome. When adults describe the sensations they feel, they say things like “I have not completely got rid of the disease,” or “I still feel that there is some of the disease left.”

Adults find it easier to throw out the pathogenic factor completely, as they can remember what it feels like to be healthy and know what measures are required to

return to health. Babies and young children, however, have short memories and often cannot remember what it is like to be healthy; they do not know what they are aiming for.

This pattern is now so common that we have provided a more detailed description of the symptoms and treatments later.

## Immunizations

Like lingering pathogenic factors, immunizations are such a common cause of disease in children that we have provided a fuller discussion of this subject in Chapter 19. The key to understanding their long-term effects resides within the pattern of lingering pathogenic factors.

## EMOTIONAL FACTORS

As mentioned in the previous chapter, there is little discussion of Children's emotions in traditional Chinese medical textbooks. Obviously, this is not because children do not have emotions, but because they usually do not restrain their emotions. This means that it is very rare to see in them the pattern of restraint of Liver qi. Indeed, if a child under seven years does restrain its emotions, it is generally not the child's problem, but a problem of the parents in not listening to the child's demands. However, if a child is living in a highly charged emotional environment, for example, if the marriage is on the point of breaking up, these strong emotions will be reflected in the child. This is commonly seen in children with asthma and tonsillitis. Jealousy toward a sibling is also a common cause of problems. Another factor, which is rarely talked about and very difficult to detect, is sexual relations between one of the parents and the child. (A recent survey in the United Kingdom estimated that one child in five had been subjected to incest.) This can give rise to severe emotional disturbances on the mental level, and insomnia and urogenital disorders on the physical level.

## FOOD

The main problem that children face in coming into the world is eating and digesting enough food to support growth. The primary ways through which food can cause illness are listed below. They almost always lead to accumulation disorder or Spleen qi deficiency, since it requires only a small disturbance to overload a child's delicate digestive system, which is working close to maximum capacity.

## Too little food

It is uncommon in the developed world for a child not to have enough food, but this can be a cause of illness when the mother has insufficient breast milk or where the child

shows little interest in food. It can also be a problem in older children when they are growing rapidly.

### Too much food

One of the most common causes of diarrhea and digestive disturbances is overfeeding. It is a natural instinct for mothers to give their children as much food as they demand, but this instinct must at times be curbed.

### Irregular feeding

There is a saying in Chinese medicine, “Irregular feeding injures the Spleen.” Some babies and children are fed on demand with virtually no interval between feedings. Whenever a child shows the least agitation or discontent, he or she is offered the breast. Many mothers in the West find it very difficult to say no to their children, even if it means damaging their health. As a general rule, there should be an interval of at least two hours between feedings. If a child is constantly snacking (whether solid food or breast milk) this is likely to weaken the qi of the Stomach as well as the Spleen.

### Unsuitable milk

Unsuitable milk means milk that the child has difficulty digesting. It includes cow’s milk, prepared dried milk, and even the mother’s own milk. The mother’s milk can cause abdominal pain if she feeds the baby when she is very anxious or distressed. These emotions can cause the milk to be acidic or bitter. Similarly, if the mother has a history of gallbladder trouble, her milk may be indigestive and bitter. Cow’s milk and prepared dried milk are sometimes too rich for newborn babies, and can cause colic or excessive phlegm. If this is suspected, goat’s milk or soy milk should be tried.

### Early weaning

The age when solid foods should be introduced into the diet varies enormously and may be as early as two months in a rapidly growing child, or as late as six months in a child with poor digestion. Unfortunately, there is commercial pressure from baby food manufacturers to give a varied diet from as early as two weeks. A child with a strong digestion can cope with this, but a weaker child may have difficulty.

### Weaned on unsuitable foods

It is wrongly assumed by the mother that food which is good for her will also be good for the baby. This is not always the case. Common pitfalls include:

- ♦ **Whole food** - A baby’s digestion is very delicate, and it is often difficult for it to digest rough whole foods such as brown rice or whole wheat bread. This can lead to the pattern of accumulation disorder. If possible, babies



should be weaned first on more digestible foods, and only later given rougher foods. For parents determined to give their baby whole foods, millet is the best grain to start with.

- ◆ **Hot or cold energy foods** - Some foods, such as bananas or yogurt, are regarded as having cold “energy”, while others, such as red meat and spices, are regarded as being hot (see Appendix A2). If the child is naturally of a cold disposition, cold foods may cause digestive distress; conversely, if the child is naturally hot, foods that are heating may cause further heat.
- ◆ **Physically cold foods** - Many parents do not realize the damaging effect of eating food straight from the refrigerator, or continuously drinking ice-cold water. As a consequence, many children develop a cold and deficient Spleen from an early age.
- ◆ **Fruit juice** - There is a growing trend to give children fruit juice rather than water when they are thirsty. There is no doubt that children love this (and it does keep them quiet), but it can lead to symptoms such as a sore mouth, poor digestion, poor appetite, diarrhea, and insomnia.
- ◆ **Food allergies** - If a child is allergic to a food, even a small amount will cause some trouble. Common food allergies and their associated symptoms include the following:
  - cow’s milk: catarrh, abdominal pain, insomnia, eczema, violent behavior
  - bananas: catarrh, abdominal pain
  - gluten: in mild cases catarrh, irritability depression; in severe cases diarrhea, malnutrition
  - food additives: hyperactivity irritability; restlessness
  - citric acid: hyperactivity
  - refined sugar: catarrh, lack of energy, listlessness
  - peanuts and peanut butter: skin rash, sudden swelling of the tongue, anaphylactic shock
  - tomatoes: asthma
  - shellfish(crabs,mussels,etc.):irritability,insomnia,hyperactivity, vomiting, skin rash

Food allergies are sometimes difficult to detect. Among the uncommon allergies we have seen are the following:

- chicken: eczema

- honey: asthma, diarrhea

Allergies seem to be on the rise. There are many possible reasons for this. One is the general degradation in the quality of food, with entirely new strains being genetically engineered for their high yield, with little thought to their digestibility. Another reason is the general weakening of the digestive system from the irregular and unsuitable foods listed above, and from the overuse of antibiotics.

## OTHER FACTORS

### Overstrain

This is not an easy cause to discover, because it is *usually* due to the parents' expectations of the child. Common situations where this occurs are the following:

- ♦ children who want to be top of the class. This is more common among girls than boys, whose ambitions are more likely to be leader of the pack on the playground, and may appear after about the age of seven.
- ♦ children of successful parents who want them to have many opportunities and take them from one activity to another in their spare time
- ♦ going to bed too late, often with excessive reading
- ♦ too much television, leading to an overstimulated mind and underexercised body
- ♦ the eldest child of a large family who has to take on much of the housekeeping work

### Poor Upbringing

The task of a parent is complicated, more so now than at any previous time. Families are scattered and have difficulty passing on the traditional ways of upbringing, while educationalists offer conflicting advice. Common ways in which poor upbringing can cause illness include the following:

- ♦ not enough fresh air and physical exercise, leading to tiredness and lack of stamina. As the urban environment becomes more dangerous, parents are often unwilling to let their children walk to school or play outdoors. As a consequence, their bodies and muscles may become weak and soft.
- ♦ not enough sleep, leading to agitation and problems of yin deficiency

- ♦ overstimulation (especially television), leading to problems of yin deficiency. Television is especially pernicious because the stimulation of the programs is aggravated by the electromagnetic stress of being exposed to a rapidly changing, high-voltage electric field.
- ♦ insufficient discipline, leading to insecurity and restraint of Liver qi. Under the age of about seven, most children are happiest in environments where the boundaries and rules are clearly drawn. It was explained to me by one doctor that if a child is restricted or disciplined too much, it may readily suffer from uprising of Liver qi or even Liver yang. On the other hand, if the child is not given clear boundaries, as is often the case in the West, then the child has to make its own boundaries at an early age, and this can lead to restraint of Liver qi.
- ♦ overprotection, leading to asthma and problems of yang deficiency

## TOXINS

In Chinese medicine the term “toxin” (*du*) encompasses two causes of disease that we would regard as being rather separate, namely, toxins from poisonous plants and metals, and diseases such as measles, hepatitis, and encephalitis. Some toxins, such as lead and pesticides, should never have been introduced into the body in the first place and will inevitably cause serious damage. However, there is another class of toxin which naturally accumulates in the body during pregnancy. These toxins, although potentially harmful to the child, can be expelled during childhood rashes, such as measles and chicken pox. Although these diseases are potentially dangerous, for most children they are ven’ beneficial. It is true that the external nature of childhood infectious diseases has been recognized in Chinese medicine in recent times, and prescriptions frequently include herbs that “expel pathogenic wind”, but one of the most important parts of the medicine has always been to expel or release toxins.

Other common toxins and their effects include the following:

- ♦ contaminated foods: food poisoning
- ♦ food additives: hyperactivity, lethargy
- ♦ tobacco smoke: tonsillitis
- ♦ cavity wall insulation: asthma, catarrhal conditions, tonsillitis
- ♦ paint and gasoline fumes: headaches, sore throat

## HEREDITY AND BIRTH

Many diseases run in families and can be passed on from generation to generation. The most common ones we have seen are asthma and eczema. While these are easy to recognize, there are others which are less acute and harder to discern. For example, many children have symptoms of chronic damp-heat with intermittent green discharge for which there is no apparent cause in their lives. This can often be traced to some similar problem in one of the parents. Similarly, a hereditary disposition to pulmonary tuberculosis is often found in children, with the characteristic white face, red lips, and temper tantrums. When a problem is traced to hereditary disposition or a disorder that occurred in pregnancy, it can still be treated with acupuncture, but the treatment will be more difficult and may take longer.

Problems associated with gestation and birth are listed below.

- ♦ **Womb diseases** - If the mother contracts any disease during or shortly before pregnancy, some part of the disease may be passed on to the child in the form of a lingering pathogenic factor.
- ♦ **Womb heat** - If the mother consumes too much hot or spicy foods, if the weather is uncomfortably hot, or if the mother herself has a hot disposition, this can be passed on to the child in the form of womb heat. Common symptoms include tantrums, insomnia, and vomiting (hot type).
- ♦ **Womb toxin** - If the mother consumes unsuitable foods or stimulants, this too may affect the child. For example, overconsumption of oranges or shellfish can lead to hyperactivity.
- ♦ **Shock in utero** - If the mother receives a shock (emotional or physical) during pregnancy; especially in the last few months, this can be passed on to the child.
- ♦ **Premature birth** - Neither the Lungs nor the digestive tract of a premature baby are fully formed. As a result, it is very common for these babies to suffer from deficient qi.
- ♦ **Birth trauma** - Especially violent or difficult births can give rise to shock, although this is not always the case. The most common effect of a difficult birth is qi deficiency in the child. This seems to be aggravated by the use of analgesics by the mother, which gives rise to qi deficiency and internal cold. Many cases of insomnia due to qi deficiency or cold can be traced to the use of analgesics. In severe cases, there may even be brain damage and epilepsy.

There are also problems associated with the period just after birth.

- ♦ **Overanxiety** - If the mother is overanxious or highly strung, this can be passed on to the child. For example, if a shock occurs to the mother

during or shortly after birth, the child can also show the symptoms of shock. In this case it is the mother who needs treatment.

- ♦ **Lock of love from parents** - Some children are unwanted, and their parents are unable to show them any love. Apart from behavioral disorders, this may show as lack of qi or retarded growth.
- ♦ **Planned babies** - With the practice of contraception it is possible to plan a family. Some parents take advantage of this, to the extent of planning even the month when the baby is to be born. Children who are conceived in this way are sometimes born with a weak constitution. It seems as though the babies are not really ready to be born, but are dragged into the world prematurely by the will power of their parents.

In addition to these functional diseases, there is a wide range of congenital abnormalities. In the past, such children frequently did not survive, but thanks to improved obstetrics and prenatal care, many now live. There is relatively little written about these children in the Chinese literature, but very often, what appear to be “miracle” cures can be achieved with acupuncture. Thus, for example, holes in the heart can be repaired, pancreatic deficiency can be made good, or hydrocephalic children can be made normal, all by means of acupuncture. While it is too early to suggest a prognosis for all the many congenital abnormalities, it is always worth trying acupuncture before more invasive therapies are undertaken.

## USING ACUPUNCTURE IN THE TREATMENT OF CHILDREN

### INTRODUCTION

For a variety of reasons that are often ill-founded, acupuncture is not widely used in the Western world in the treatment of children. Some believe that it is too much of an intrusion into the baby's body or that it is too painful or traumatic. In fact, acupuncture is a gentle method of treating babies and children; and can be used from the moment they are born. It is not, perhaps, as gentle as homeopathy; but compared to Western medicine, which, even before treatment is considered, may involve the insertion of large needles for diagnostic blood tests, the near-painless insertion of very fine needles in acupuncture is indeed a gentle technique.

Even in China, acupuncture is used only rarely on children. There are two reasons for this: first, there is the choice of Chinese herbs, which the long-suffering children are trained to drink from an early age. Second, the needles available in China are much coarser than the ultrafine Japanese needles available in the west. With thick needles it is easy to cause pain and difficult to tonify; but with thin ones, it is much easier to tonify and pain-free needling is possible.

It is true that acupuncture must be used with caution on babies and children, for the needles have a relatively stronger effect than on adults. However, anyone who has seen acupuncture in practice knows that the alarm that a minority” of children experience is worth the speed of cure.

It is also important to bear in mind that although children cry when they experience pain, they do not fear it as many adults do. A child’s life is full of pain, for in the very early years all unpleasant sensations are experienced as pain-whether it be hunger, wet diapers, indigestion, falling over, or loneliness. Thus, much as younger children may dislike acupuncture, for many the trauma is no worse than having their face roughly washed.

Acupuncture can be used at any age for a wide range of diseases. The youngest patient seen in our Brighton clinic was less than one week old. The discussion of disorders in this book represents only an introduction to the most commonly seen pediatric diseases; just because a problem is not mentioned here does not mean that it is one for which acupuncture is ineffective. For example, we have treated a number of rare congenital disorders, some of them with great success.

The basis of this book is traditional Chinese medicine as it has evolved over centuries of time. Chinese medicine was not born from the brain of one person, nor did it come into the world fully formed. It has developed over thousands of years during which new ideas were constantly raised and tested in clinical practice. Ideas found to be worthless were rejected, and those that were useful were absorbed. Thus, many different ideas are incorporated in the body of traditional Chinese medicine, some of which appear to be mutually incompatible. Although this poses a stumbling block for the Western-trained mind, it can be avoided if one remembers that each idea is only a rule of thumb that is useful in a particular situation.

One of the constant features of traditional Chinese medicine has been the immediate interaction between diagnosis and treatment. Indeed, the Chinese phrase which is loosely translated, as diagnosis is more accurately rendered as “differentiation of patterns and determination of treatment”, since the two are regarded as one and the same act. The conclusion to be drawn from this is obvious: when using acupuncture (or any of the other Chinese medical techniques), always use the traditional method of diagnosis. For those trained in Western medicine there is a temptation to use Western diagnosis as the basis for prescribing acupuncture treatment, but this will not bring

particularly good or reliable results. This is not to say that Western diagnostic techniques are useless to the practitioner of acupuncture-quite the contrary. These tests serve to enrich one's understanding of Chinese medicine. But in the practice of acupuncture, they should never be allowed to replace the differentiation of patterns.

## PREPARATION FOR TREATMENT

When treating children it is worth spending a little more time in preparing oneself than one would in treating adults. Indeed, if you are treating children and adults in the same day, it is a good idea to pause for a few minutes before treating the child. Preparation should consist of exercises to clear away bad thoughts and emotions, and to bring about a sense of calm (e.g., qi gong, meditation, taking a cup of tea and the like). If this is done, you will find that the children cry much less and are easier to handle during treatment. Babies and children are very sensitive to emotional states. If the practitioner is anxious or pressed for time, they will feel this and become restless and uncertain themselves.

Those of you who want to treat children but have none of your own would benefit from some special preparation. It is important to learn how to relate to children and how they think and perceive the world. For this reason it is useful to spend some time observing and playing with children at kindergarten or in play groups.

## PRACTICAL CONSIDERATIONS

It can be a great joy to treat children, for they are so spontaneous and full of enthusiasm for life. In our experience, it is helpful to treat children and adults at different times. This is helpful both to the practitioner, who needs to approach children with a lighter manner and more spontaneity than adults, as well as to those patients who are old and infirm and need to be protected from hyperactive children.

## TECHNICAL CONSIDERATIONS

Acupuncture can be nearly painless, but for this to be so it is essential that one develop a good needle technique that many people fear acupuncture because of the pain it causes, but that this fear is unnecessary. However, it is essential that one practice needle insertion to reduce pain. We encourage practitioners to needle themselves regularly to understand how much pain they are causing their patients.

### How to avoid pain

It is an axiom of Chinese medicine that pain is caused by obstruction of qi. The key to reducing pain is to ensure that your own qi is *flowing* well, especially in your arms and fingers. In the accompanying illustrations we show some pictures of hands with the qi

flowing reasonably well. You will notice that the fingers are very flexible, and that the joints of the fingers and wrist are never straight or bent back. They are always curved, in the same way that the joints are kept curved when practicing tai ji. This point cannot be emphasized too much: if the fingers are bent back, it means either a deficiency or lack of qi. In both cases, the child will feel much more pain.

### **Quick insertion**

The skin is full of nerve endings that experience pain. A slow insertion through the surface layer is much more painful than a rapid insertion.

### **Choice of needles**

From birth to about five years of age, use 0.5-1 inch long 32 gauge (0.30mm diameter) Chinese needles with a very short handle. If finely-tapered Japanese needles are available, 34 gauge may be used instead. The short handle is preferred for babies, because although it is more difficult to manipulate and direct the qi, there is less risk of the needle catching on clothing.

For children five to twelve years of age, use 1-inch long 32 gauge needles. These needles may seem rather thick, but a baby's skin is often quite tough and some force is needed to pierce the outer layer quickly. Thinner needles can easily bend and cause more pain.

### **Insertion**

Insertion should be done quickly and forcefully. This is the most difficult part, for the needle should penetrate 0.5-1mm below the superficial layer of skin very rapidly. If the needle penetrates too slowly through the layer rich in nerves, or too deeply at high speed, a lot of pain will be experienced by the patient.

Babies' skin has a different texture from that of adults. It is more fine-grained; and there is a thicker and less firm subcutaneous layer of fat. This can make it very difficult to insert the needle, for the fine grain resists penetration, while the subcutaneous layer provides less support. It is helpful to grasp the skin firmly so that it does not move on insertion, and to use very finely-tapered and well-shaped needles.

When treating adults, the different stages of needling merge together into one fluid movement. When treating babies, each stage should be more discrete and separated. It is often helpful to pause briefly between stages. For example, in babies, especially when treating points on the legs, the practitioner should let go of the needle immediately after insertion. This will allow the baby time to kick and thrash its legs for a short while to relieve any discomfort it experiences from needle insertion. This is a situation where a short handled needle is most necessary. Babies and children often cry at this stage of the treatment. This crying is more often due to anger than to pain.



### **Further penetration**

After penetrating the skin, the needle should be inserted to the required depth. These depths are the same (i.e., the same number of proportional units) as for adults.

### **Obtaining needle sensation (de qi)**

When the needle has reached the required depth, the qi should be summoned in the normal way. It can be difficult to ascertain whether the qi has arrived. With experience, it can be felt as a heavy sensation in the hand used to manipulate the needle, and as a tingling feeling in the hands which is holding the baby's limb. It can also be ascertained by listening to the cry of the baby, which will change its note when the qi arrives. It must be explained to the mother that this cry is not one of pain, but of surprise at the unfamiliar sensation.

### **Tonification and dispersion**

The most important differentiation to make when treating children is between deficiency and excess. The principles of treatment are simple: tonify in cases of deficiency, and disperse in cases of excess. It can be said that when treating children the choice of points is less important than whether to tonify or disperse. In clinical practice, it is sometimes difficult to maintain the objectivity required to make this very basic distinction, especially after hearing of the sufferings of a mother and child. One way to over-come this is to take a clear look at the child and ask yourself if there is enough qi available for the treatment you are about to give. Thus, in the case of accumulation disorder, you would ask whether there is enough strength to expel the accumulated food; or, in the case of asthma, whether there is enough strength .to disperse the accumulated phlegm. If the answer is yes, then disperse; if the answer is no, then tonify.

To summarize, the choice of tonification or dispersion is relatively more important when treating children than adults. This is because the qi of a child is very strong in proportion to its small physical body, so that small manipulations of qi -will have a relatively large effect on the body.

### **Retaining needles**

After needle manipulation (if any), the needles are immediately withdrawn. There is generally no needle retention. As children get older, some retention may be considered for deficiency, but it is usually unnecessary under the age of ten.

### **Choices of points**

It is said by some acupuncturists that the channels are not fully formed in children. To a certain extent this is true, and it is also true that differences in function among the points have not developed. The significance of this for the practitioner is that the choice of points is not so critical.

### Number of points

Great care should be exercised with respect to the number of points chosen. For young babies, two points treated bilaterally (i.e., four insertions) is usually enough. Even for older children, there is rarely any need for more than six insertions per treatment. (The exception to this rule is in the treatment of paralysis following polio or hemiplegia.)

### Frequency of treatment

In China, treatment is given every day or every other day, and there is no doubt that this brings the quickest results. However, this is not always practical for Western patients. Many of the treatments described in this book will be satisfactory for chronic diseases if given as infrequently as once a week-although the cure will certainly take longer. For acute disorders, treatment must be given frequently, maybe every two hours for problems like acute convulsions and febrile diseases.

### Moxibustion

Direct moxibustion can be used on children as soon as they are old enough to tell you that they feel a burning -sensation, provided they can hold still (usually about seven years). Under this age, indirect moxibustion should be used, with the right hand holding the moxibustion stick and the fingers of the left hand around the point to ascertain the degree of heating (Moxibustion with ginger or garlic partitioning can also be used on babies, for there is less danger of burning the skin.

### “Without heat” moxibustion

This technique is an extension of acupuncture, but might better be called point irritation therapy. The principle is to place a medicinal herb which is slightly irritating to the skin on a point associated with the disease under treatment. The method is not widely used, but is convenient for treating children and babies when needling is inappropriate. For example, it can be used for tonsillitis, where a paste of crushed garlic is applied at LI-4 (*he gu*) for one to two hours. It can also be used effectively for teething problems, where a powder of Fructus Evodiae Rutaecarpae (*wu zhu yu*) moistened with vinegar is applied at the same point and left on overnight. The herbs should be covered with a waterproof plaster.

### MASSAGE OF POINTS

It is often asked whether one can massage the points instead of doing acupuncture, and the answer is certainly yes. For mild conditions, massage of the points is extremely effective. For most of the conditions described in this book, however, massage is actually more painful than acupuncture. Frequently, the points are spontaneously tender, and for massage to be effective, at least two minutes should be spent on each point, for a total of ten to fifteen minutes per treatment. For many Western children, holding still for this length of time is more of a penance than an acupuncture treatment.

## AN IMPORTANT MISCELLANEOUS POINT FOR CHILDREN

The same miscellaneous or extra points (those outside the channels) that are used for adults may be used for treating children. There are a few miscellaneous points, however, which are especially indicated for children. The location and usage of these points are described in the appropriate chapters. The exception is *si feng* (M-UE-9), which is so commonly used that we will describe it here.

## PROBLEMS IN TREATING CHILDREN

### The parents

Most children, although they do not relish acupuncture treatment, do not fear it either since they don't fear pain. Instead, it is usually the parents who are often very nervous and fearful for their children. As we have said before, it is important that the practitioner needle him- or herself to know the amount of pain that is being inflicted on the patient. For the same reason, in some cases it may be helpful to needle the parent.

### The Child

A minority of children have a great fear of needles. For these children the practitioner must decide if the treatment is worse than the illness or the alternative therapy, such as surgery. As a general rule, at least one needle should be inserted so that there is a basis for making a decision. Often, after one treatment, many children find that the needles are not so terrible after all.

### The wriggling baby

Some babies, especially boys, are loath to be held or constrained in any way whatever. For such babies, being held still for needle insertion is far more trying than the needles themselves. These babies respond especially well to acupuncture, but some skill is needed to get the needle inserted.

Ask the parent to hold the child's arms, so that it does not push your hands away and cannot take the needle out once inserted. Locate the point quickly, keep your eye on the point, and wait until the baby is still for a fraction of a second, then quickly insert the needle and let go. The baby will resume its wriggling and writhing with the needle still in place, and you should wait until this settles before manipulating the qi, usually a dispersing technique if the baby has enough energy to wriggle that violently!

## OUTLINE OF COMMON PATTERNS IN CHILDREN

	Pattern	Distinctive Symptoms
<b>Digestive System</b>		
<i>Constipation</i>	Excess Cold	Active, pain is strong Pale face, not especially weak
	Deficient	Weak, shy
<i>Diarrhea (acute)</i>	External pathogenic factor	Sudden onset, often infectious
	Spleen and Stomach qi deficiency	Also pathogenic factor, frequent stools, bad odor
	Spleen and Kidney yang deficiency	Very weak, looks drained, serious illness
<i>Diarrhea (chronic)</i>	Injury from food	Possibly chronic, green stools
	Spleen and Stomach qi deficiency	Intermittent, chronic, undigested food in stools
<i>Abdominal pain</i>	Attack of cold	Sudden, often infectious, sensitive to food
	Blockage	Green stools or constipation
	Organ deficiency	Looks weak
	Worms	Patch on cheek, possibly cough
	Blood stasis	After injury or surgery
	Lingering pathogenic factor	Recurrent, dull pain, often exhausted for one to two hours
<i>Vomiting</i>	Obstruction of food	Often recurrent

	Cold from excess or deficiency	With abdominal pain; maybe an epidemic
	Stomach water	Vomits a little after each feeding
	Stomach phlegm Heat	Signs of phlegm Red face
	Yin deficiency	Usually exhausted, glittering eyes
	Nervous	When excited
<b>Respiratory System</b>		
<i>Influenza</i>	Wind-cold	Cold signs
	Wind-heat • with phlegm • with accumulation • with fright	Heat signs • cough, nasal discharge • digestion disturbed • clingy
<i>Cough (acute)</i>	Wind-cold	Tickle in the throat
	Wind-heat Wind-dampness	Sore, painful throat Copious nasal discharge
	Phlegm-heat	Acute bronchitis with painful chest
<i>Cough (chronic)</i>	Phlegm-dampness	Thick-sounding cough
	Lingering pathogenic factor	Hard cough
	Lung and Spleen qi deficiency	Weak, watery cough
<i>Asthma (acute)</i>	Spasm	Straightforward attack, whole chest seizes up, muscles in spasm
	Phlegm	Lots of phlegm, gurgling sounds

ACUPUNCTUE CONTINUING EDUCAITON

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	Hot	Red face, feverish
<i>Asthma (chronic below age three)</i>	Phlegm <ul style="list-style-type: none"> <li>• Lungs only</li> <li>• accumulation disorder</li> </ul>	Lots of phlegm apparent <ul style="list-style-type: none"> <li>• stools and digestion normal</li> <li>• stools irregular</li> </ul>
	Lung and Spleen qi deficiency <ul style="list-style-type: none"> <li>• plain</li> <li>• hyperactive</li> </ul>	<ul style="list-style-type: none"> <li>• poor appetite and lethargy</li> <li>• poor appetite with hyperactivity</li> </ul>
	Lingering pathogenic factor <ul style="list-style-type: none"> <li>• cold</li> <li>• hot</li> </ul>	Swollen glands with no visible phlegm <ul style="list-style-type: none"> <li>• cold signs</li> <li>• heat signs</li> </ul>
<i>Asthma (chronic above age five)</i>	Lung qi deficiency	White face, frequent infections
	Spleen qi deficiency	Poor appetite
	Lingering pathogenic factor	Hard glands, no other major symptoms
	Kidney yang deficiency	Hunched shoulders
	Liver qi retarded	Worse with irritation
<i>Tonsillitis (acute)</i>	Wind-heat	Mild fever
	Lung and Stomach heat	Yang ming fever
<i>Tonsillitis (chronic)</i>	Lingering pathogenic factor	Swollen glands, recurrent infections
	Spleen qi deficiency	Exhaustion, recurrent infections
	Yin deficiency	Exhausted, overstimulated

<i>Conjunctivitis</i>	Wind-heat	Headache, fever
	Liver and Gallbladder fire	Red face, wiry pulse
<i>Otitis media (acute)</i>	External pathogenic factor	Sudden onset, floating pulse
	Liver and Gallbladder	Sudden onset, wiry heat
<i>Otitis media (chronic)</i>	Lingering pathogenic factor (excess)	Recurrent, glands swollen
	Spleen qi deficiency	Lethargic, phlegmatic
	Liver and Kidney yin deficiency	Excitable, hyperactive
<i>Hay fever</i>	Liver yang rising	Frequently flies into a rage
	Lingering pathogenic factor	Swollen glands, gray face
	Lung and Spleen qi deficiency	Droopy, probably has poor appetite
<b>Miscellaneous Disorders</b>		
<i>Insomnia</i>	Cold	Indigestion, so wakes up screaming
	Heat	Restless, afraid of the dark
	Fright	Bad dreams, blue between the eyes
	Deficiency	Wakes every two hours
<i>Eczema</i>	Phlegm-dampness	Rash moist and oozing, signs of phlegm

## ACUPUNCTUE CONTINUING EDUCAITON

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	Heat	Red face, hot child, rash is bright red
	Qi and blood deficiency	Pale weak child, rash is less red
	Lingering pathogenic Factor	Swollen glands, skin dry, powdery
	Accumulation disorder	Digestion impaired
	Accumulation with stomach heat	Big appetite greedy
<i>Failure to thrive</i>	Spleen qi deficiency	Poor appetite
	Lingering pathogenic factor	Swollen glands
	Unwanted child	Appears lost
<i>Mental retardation</i>	Spleen and Kidney deficiency	Low ears, poor bone structure
	Qi and blood deficiency	Weak, exhausted, poor appetite
	Phlegm-dampness	Signs of phlegm, slippery pulse
	Heat affecting the heart	Restless, cannot sit still
<i>Hyperactivity</i>	Heat	Strong, but no signs of Phlegm
	Mania	Obscene behavior
	Overstimulation	Weak, thin
	Heat in the Intestines	Always drinking
<i>Crossed eyes</i>	Congenital	
	Lingering pathogenic factor	Swollen glands, appears after a fever



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	Overstimulation	Variable, excitable, and attractive
	Paralysis	Squints when looking in one direction only
<i>Convulsions (acute)</i>	Wind	With a fever
	Phlegm-heat	Signs of blockage and phlegm
	Damp-heat	Acute diarrhea
	Fright	Blue-green color somewhere on the face
<i>Convulsions (chronic and petit mal)</i>	Spleen yang deficiency	Pale face, dribbling
	Spleen and Kidney yang deficiency	Pale face cold, floppy, weak constitution
	Liver and Kidney yin deficiency	Heat signs
<i>Epilepsy</i>	Fright	Blue-green color somewhere
	Phlegm	Much phlegm
	Blood stasis	Brain damage
	Spleen and Kidney yang deficiency	Pale face, cold, floppy, weak constitution
	Liver and Kidney yin deficiency	Heat signs
<i>Euresis</i>	Lower gate cold from deficiency	Dreamy, not “with it”
	Spleen and Lung qi deficiency	Easily upset, obviously ill
	Damp-heat	Red face, sore urinary tract
	Lingering pathogenic factor	Swollen glands

## ACUPUNCTUE CONTINUING EDUCAITON

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	Emotional	Family disturbance, better away from home
<i>Acute urinary tract infection</i>	Damp-heat in Bladder	Acute, urgent cystitis
	Damp-heat in Liver channel	Irritation, soreness
	Damp-heat in Stomach and intestines	Irritation, soreness, fever
<i>Chronic urinary tract Infection</i>	Spleen and Kidney deficiency	Flabby child, pale face, poor appetite, lethargic (or occasionally hyperactive)
	Kidney yin deficiency	Thin child, irritable, red tongue, restless
<i>Glandular disturbance</i>	Lingering pathogenic infection	History of infection (child)
	Liver qi stagnation	History of frustration (teenager)
	Yin deficiency	History of frustration and overwork (adult)

## CHAPTER 2: COMMON DISEASES

### CONSTIPATION

Many babies and children become constipated. Hence, it is commonly seen in the clinic, either as the presenting complaint or as an additional symptom in another illness. Often just regulating the digestive system and causing the bowels to open regularly can be enough to clear the presenting condition in such disorders as abdominal pain, insomnia, eczema, asthma, and many others. It is also fairly simple to diagnose.

#### WHAT IS CONSTIPATION?

There is not complete agreement among practitioners as to what constipation is. Babies should pass a stool twice or even three times a day. So if a baby misses a day, we consider it constipated. If it misses a day just occasionally, as a symptom it may not be worth treating, but we would still classify the condition as constipation. This applies up to about the age of seven, after which the occasional missed day counts for nothing.

One of the reasons that constipation is seen so often is that it is one of the manifestations of accumulation disorder or of Spleen qi deficiency, depending on whether the child suffers from excess or deficiency, respectively. There is also a third pattern, Intestinal cold from deficiency.

#### EXCESS PATTERN

##### **Etiology & Pathogenesis**

There are many causes of excess-type constipation: etiology and pathogenesis. The qi of the child has been weakened, so there is simply not enough qi to move the food through the intestines, leading to constipation. In other words, the transportive function of the Spleen is too weak. Weak Spleen energy will also lead to a poor appetite and give rise to the formation of dampness and phlegm in the body. This, coupled with the fact that there is not enough qi to fight off external pathogenic factors, lays the child open to recurrent illnesses, such as coughs and colds, which will further weaken the qi.

## SYMPTOMS

- ◆ may be constipated for days at a time
- ◆ passes stools with difficulty
- ◆ stools may be loose or hard when passed, but usually not smelly
- ◆ lethargic
- ◆ floppy
- ◆ pale
- ◆ prone to coughs and colds
- ◆ Pulse: weak
- ◆ Tongue: pale

## NOTE

Commonly, children suffering from deficiency-type constipation go much longer without passing stools than is the case with excess-type constipation. Five to seven days is quite common, and one baby we saw did not pass a stool more often than once every two weeks!

## TREATMENT

**Treatment prindple:** tonify the digestive system and the Spleen. Typical points include:

S-36 (*zu san li*)  
CV-12 (*zhong wan*)  
Sp-6 (*son yin jioo*)

Tonifies Spleen qi

B-20 (*pi shu*)}

Back associated (shu) point  
of the Spleen

**Method:** all the points may be needled, but it is common to Just use indirect moxibustion at CV-12 (*zhong wan*). Avoid using B-20 (*pi shu*) in the first few treatments, and only use it if the child is extremely exhausted, since children hate points on the back.

# DIARRHEA

## INTRODUCTION

Diarrhea is potentially a very dangerous disease in babies. In serious cases, diarrhea can develop into chronic convulsions and can even lead to death. In developing countries, diarrhea (usually as dysentery) is the major cause of infant mortality.

Set against this gloomy picture are the positive effects of acupuncture in curing diarrhea of all kinds. The use of acupuncture in the treatment of bacterial dysentery was one of the turning points in the acceptance of acupuncture, both inside China during its civil war, and outside China by the World Health Organization. Many studies have shown that acupuncture is at least as effective as Western medicine or Chinese herbs in the treatment of this disorder.

We depart from the traditional method of discussing diarrhea by dividing the subject into acute and chronic varieties. In the acute form, a child who does not normally get diarrhea suddenly suffers an attack. The stools are generally watery and frequent, possibly many times a day. Acute diarrhea is divided into three stages, the last of which being the most serious. In its chronic form, the problem has been going on for several weeks or months. There is not such a feeling of urgency associated with this type of diarrhea, and the symptoms may come and go.

## ACUTE DIARRHEA

Acute diarrhea occurs suddenly. It is often the result of an epidemic, that is, a “bug” going around or a serious disease such as typhoid or dysentery. It may be accompanied by severe pains and fever. There is a great feeling of urgency.

## TREATMENT

### Main Points

#### Stage one

The main points for treating all diarrhea are the following:

S-2S (*tian shu*)  
S-36 (*zu san li*)

Alarm (*mu*) point of Large Intestine  
Harmonizes the Intestines and tonifies the Spleen

Other commonly used points include the following:

CV-12 ( <i>zhong wan</i> )	Benefits the Spleen and stops diarrhea
LI-11 ( <i>qu chi</i> )	Regulates the Intestines
B-20 ( <i>pi shu</i> )	Both points benefit the Spleen and resolve dampness
B-21 ( <i>wei shu</i> )	
B-25 ( <i>do chang shu</i> )	Associated ( <i>shu</i> ) point of the Intestines
GV-1 ( <i>chang qiang</i> )	Sends qi upward and stops diarrhea

*Method:* use even technique for stage one diarrhea, and tonifying technique for stage two diarrhea.

## COLD-DAMPNESS

Treatment principle: disperse the cold, transform dampness, and expel the pathogenic factor

This pattern usually passes anyway, unless it is unusually violent, in which case it must be treated quickly. Use the main points listed above, plus:

⇒ CV-6 (*qi hai*)

*Method:* use both moxibustion and needles on the points.

A combination of CV-6 (*qi hai*) and S-25 (*tian shu*) with both moxibustion and needles is effective in this case. It is often helpful to use both abdominal and distal points with a combination of moxibustion and needles. For example, consider using acupuncture at S-36 (*zu san li*) plus two to three minutes per point of indirect moxibustion at S-25 (*tian shu*) and CV-12 (*zhong wan*). Even technique is typically used, unless the pain is very intense.

**Prognosis:** this condition will often pass quickly without treatment. If it is unusually violent, however, it must be treated quickly. In a reasonably healthy child, a change should be seen within three treatments.

- ◆ no appetite
- ◆ spirit is weak, and the child may appear exhausted
- ◆ only a slight thirst, and then for warm drinks
- ◆ can range from niild to serious: the child may have bad attacks of diarrhea many

- ♦ times a day, or it may present as a child who does not strictly speaking have diarrhea,
- ♦ but may never have had formed stools either

*Tongue: pale*

*Tongue coating: thin, white*

*Pulse: deep, forceless*

*Finger vein: faint or nonexistent*

### Hyperactive Spleen qi deficiency

- ♦ In this pattern, although the child presents with many of the signs of Spleen qi deficiency, it appears to have a lot of energy. Symptoms include:
- ♦ loose stools that do not smell
- ♦ pale facial color
- ♦ poor appetite, picky about foods
- ♦ appears to have a lot of energy, runs around a lot, does not complain of the cold, and does not seem to need to sleep that much
- ♦ parents are often exhausted
- ♦ often drinks lots of juice
- ♦ can be very manipulative

## TREATMENT

### Injury from food

Treatment principle: reduce the food stagnation, transform the blockage, harmonize the middle burner, and stop the diarrhea. The main points are the same as for acute diarrhea.

In babies under three years old add the following points:

Sp-4 (*gong sun*)

Si *feng* (M-UE-9)

Regulates the Spleen

Clears the retention of food

Method: if all the food has been evacuated with the diarrhea, then it is probably best to use Sp4 (*gong sun*) alone, with even technique. But if you feel that the child is still full of

food, then Si feng (M-UE-9) may also be appropriate.

In older children, add the following points:

S-25 ( <i>tian shu</i> )	Alarm ( <i>mu</i> ) point of Large Intestine
CV-12 ( <i>zhong wan</i> )	Tonifies Spleen qi
Sp-4 ( <i>gong sun</i> )	Regulates the Spleen

**Method:** even technique (i.e., obtain qi)

**Prognosis:** if treated promptly, three to five treatments are sufficient. If the diarrhea has persisted for a month or more, it can take a surprisingly long time to treat, which is to say, ten or more treatments.

#### NOTE

To effect a cure it is essential, in appropriate cases, to change the diet or otherwise reduce the quantity of food that is eaten. If the child is breast feeding, then question the mother carefully about *her* diet.

### Spleen qi deficiency

**Treatment principle:** nourish the Spleen and stop the diarrhea. The main points to use are:

S-25 ( <i>tian shu</i> )	Alarm ( <i>mu</i> ) point of Large Intestine
S-36 ( <i>zu san li</i> )	Tonifies the Spleen

**Method:** both points should be tonified

Other points which tonify the Spleen can also be used:

Sp-6 (*san yin jiao*)  
CV-12 (*zhong wan*)  
B-20 (*pi shu*)

**Method:** use moxibustion, or moxibustion with ginger

**Prognosis:** usually it will take from ten to twenty treatments, but more may be needed if the child is severely depleted. In cases of deficiency like this, it just takes time for the qi to be replenished, so a long course of treatment is necessary; over a longer period of time.

The child must be encouraged to rest and to eat warming and nourishing foods. All cold foods—could both in temperature and in energy—as well as difficult to digest foods, should be avoided.



### **Hyperactive Spleen qi deficiency**

From the point of view of acupuncture, the treatment is the same as for Spleen qi deficiency. The advice given, however, is different. You need to advise the parents to set up clear boundaries for the child-such as going to bed on time- and to stick to them.

The prognosis is also different. These children are very hard to treat because they rather enjoy not having to make their own qi! As you try to change this situation, they put up a fight-with wailing, howling, and many tears. As the parents are often exhausted, battling with their child each time they come for treatment may prove to be more than they can cope with, and so they give up.

## ABDORNINAL PAIN

### Introduction

Abdominal pain of one sort or another is extremely common in children, so much so that one Chinese doctor told me, “Children only have digestive probleenis.” Below we will outline eight causes of abdominal pain, the last three of which, being less common, will not be discussed further in this chapter.

### External cold (excessive exterior cold).

The most common cause of this pattern is the consumption of cold energy foods. However, there are two additional etiologies: catching a chill and food poisoning or enteritis. The clinical manifestations and prognosis of these three disorders vary slightly, but the broad picture is the same, as is the treatment, whether with acupuncture or herbs.

### Milk and food causing accumulation disorder (interior excess with or without heat).

This is the common pattern of accumulation disorder. The Intestines and Stomach become blocked with food, which causes pain. The blockage may begin as a cold pattern, but the obstructed food may subsequently transform into heat.

### Organs cold from deficiency (interior cold from deficiency)

This pattern usually arises over a period of time, often after a long or serious disease when the child’s qi has been weakened. In practice, however, it is rare to find a purely excessive or deficient pattern upon the first presentation. You may, therefore, see this deficient pattern during the course of treating another disease after the excessive aspect has been deared.

### Qi obstruction and blood stasis (interior excess).

This pattern is more commonly seen *in* hospitals than in outpatient practice.

### Roundworms (interior excess).

Roundworms are commonly seen, but *in* the West it is rare for them to develop to the stage where they cause abdominal pain.

### Retention of phlegm (interior cold from excess).

If the digestion is weakened for a long time (the third pattern above) and the child consumes many phlegm-producing foods, or is treated frequently with antibiotics, it is possible for phlegm-dampness to accumulate in the middle burner. This can give rise to

mild abdominal pain. Further discussion of this pattern is provided in the chapter on vomiting, which is usually a more pronounced symptom than abdominal pain.

### **Lingering pathogenic factor (interior excess)**

A lingering pathogenic factor can cause swelling of the lymph glands in the abdomen, which results in pain. The pain is dull and has no specific pattern.

### **Intestinal prolapse**

This usually occurs after another illness, especially diarrhea. True intestinal prolapse (as opposed to anal prolapse) is an acute disorder which may require surgery.

The first five patterns above cover most situations where abdominal pain is the main presenting symptom. They include the following biomedical diseases, all of which can be effectively treated with acupuncture:

- ◆ appendicitis (usually associated with either the first or second pattern)
- ◆ colic (usually associated with either the first or second pattern)
- ◆ dysentery, diarrhea, enteritis
- ◆ colitis

It is our opinion that cases of uncomplicated, acute appendicitis should be treated with acupuncture first, where this is possible. If acupuncture is unavailable or unhelpful, such patients will require emergency surgery.

## **ETIOLOGY & PATHOGENESIS**

### **Attack of External Cold**

#### **Etiology**

- ◆ periumbilical area is exposed to cold wind or left uncovered in cold weather
- ◆ contaminated food or drink introduce a pathogenic factor
- ◆ overconsumption of fruit or cold foods and beverages. (This refers both to food whose temperature is cold and to food of a cold nature, such as bananas.)

## TREATMENT

### Main points

CV-12 ( <i>zhong won</i> )	Alarm ( <i>mu</i> ) point of the Stomach
S25 ( <i>tian shu</i> )	Alarm ( <i>mu</i> ) point of the Large Intestine
S36 ( <i>zu san li</i> )	Tonifies the Spleen and Stomach and clears the excess
Sp4 ( <i>gong Sun</i> )	Master point of the penetrating vessel, clear the excess, and regulates the middle burner

### Additional points

LI4 ( <i>he gu</i> )	Although more often used for disorders of excess, this point can also tonify with appropriate needle technique
Sp6 ( <i>son yin jiao</i> )	Meeting point of three leg yin, and regulates abdominal area, specifically for abdominal pain
B20 ( <i>pi shu</i> )	Tonifies and regulates the Spleen

## ACCORDING TO SYMPTOM

P6 ( <i>nei guan</i> )	Vomiting
Liv-3 ( <i>toi chong</i> )	Violent pain

## ACCORDING TO PATTERN

### Attack of external cold

The main points listed above are sufficient and are used with the reducing technique. The abdominal points may be warmed with moxibustion.

- ♦ **Weather chill:** one to three treatments  
Food *poisoning*: one treatment in mild cases; in severe cases treatment should be given every two hours until patient recovers
- ♦ **Enteritis:** one to three treatments
- ♦ **Cold food:** this disorder has usually been present for a long time before the patient comes for treatment; consequently, it has often developed into a pattern of excess complicated by deficiency. Requires one to three treatments to clear the excess, but longer to tonify the deficiency.

- ◆ Anesthetics in childbirth: possibly five to ten treatments

### Milk and food causing accumulation disorder-

In babies under the age of four, the main point might be:

Si feng(M -UE-9), which clears the blockage. An additional point is:

LI4 ( <i>he gu</i> )	Clears the blockage from the Stomach and Intestines
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Some sources add:

S43 ( <i>xian gu</i> )	Clears the blockage in the Stomach area (point's name can be translated as "descend food")
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- ◆ **Method:** all the points are treated with a reducing technique
- ◆ **Prognosis:** in genuine cases of excess, one treatment is usually enough. In patterns of excess complicated by deficiency, first treat the excess, and when it has cleared, then treat the deficiency. May require three to six treatments to provide sufficient tonification. Following treatment the child may be irritable for one or two nights and discharge foul smelling stools.

### Organs cold from deficiency

S-36 ( <i>zu san li</i> ) CV 12 ( <i>zhong wan</i> ) CV-8 ( <i>shen que</i> )	Tonifies the Spleen and Stomach
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- ◆ **Method:** in patients who are still reasonably strong, both acupuncture (tonifying method) and moxibustion may be used. In really weak patients, only use indirect moxibustion or moxibustion on ginge. Pay attention to the needle technique: accidental reducing can further weaken the qi and cause more diarrhea.

- ◆ **Prognosis:** five to ten treatments are common. Even if treatments are given every day, it may still take two to three weeks to cure in very deficient cases. With older children in whom the condition has been present for a long time, it may take six months to a year before the child is really healthy.

*Note:* it is important to pay attention to the diet. Make sure the child does not become overtired and that it gets enough sleep.

### Qi obstruction, blood stasis

The main points listed above are not used. Instead, use *ashi* point, points which lie on the same channel as the area of pain, and the following points:

Liv-2 ( <i>xing jian</i> )	Transforms blood stasis
Liv-3 ( <i>tai chong</i> )	
B-17 ( <i>ge shu</i> )	

- ◆ **Method:** all the points are treated with a *reduang* technique
- ◆ **Prognosis:** one to three treatments to clear the excess; in very severe cases, treat every two hours.

### Roundworms

Roundworms are better treated with herbs or herbal derivatives than with acupuncture. If herbs are not available, or if for any reason the child cannot take them, then acupuncture may be substituted. The following treatment is described in *Collection of Clinical Experiences with Acupuncture (Zhen flu un zheng fi yan)*, but I have no experience with its use. Always remember that unit measurements are relative to the size of the patient's body. Deep needling in the treatment of worms should be performed only with great *caution*.

Sp15 ( <i>da heng</i> )	After insertion, the needle is directed toward the umbilicus to a depth of 2 to 2.5 units; apply strong manipulation with lifting and thrusting
CV12 ( <i>zhong wan</i> )	Needle to a depth of 1.5 to 2.5 units; lift and thrusting
CV-6 ( <i>qi hai</i> )	Needle to a depth of 1 to 1.5 units
<i>ashi</i> points	
Sp-4 ( <i>gong sun</i> )	

Continue lifting and thrusting the needles at the above points until the abdominal pain is reduced, then treat the following points with the dispersing method:

S36 ( <i>zu san li</i> )	1 to 2 units deep
LI4 ( <i>he gu</i> )	0.5 to 1 unit deep

- ♦ **Prognosis:** treat once a day. Most of the roundworms should be eliminated in three to five days.

If there are roundworms in the bile duct, use the following points:

G-34 (*yang ling quan*)

CV-15 (*jiu wei*)

ashi points

## FEVERS AND INFLUENZA

### INTRODUCTION

In this chapter we outline the treatment of fevers in children. The fundamentals are the same as fevers in adults, but there are some additional complicating factors special to babies and children.

The Chinese word for influenza (*gan mao*) encompasses a range of conditions from a cold in the head to a bad cough to influenza with high fever. It is often translated as common cold, but this is misleading, especially when one considers the meanings of the two characters. The word *gan* here can be understood as an effect or influence, in this case of the weather. The word *mao* shows a picture of a man unable to see because his hat is pulled down over his eyes; it means moving about wildly or reckless behavior, causing susceptibility- to influence by the weather. The two words together may thus be said to mean the “influence of reckless behavior”.

This can be compared with our own word “influenza”, which derives from Renaissance Italy, when it was regarded as being caused by the “influence” of the elements (used here in its broader sense to mean both the elements of weather and the constituent elements of the universe). Returning to the differentiation of patterns, we can see that the Chinese also included a weather aspect to the cause of influenza, and thus we see

how very close the traditional Western view of influenza is to that of the Chinese.

For the etiology, pathogenesis, and pattern differentiation, I (JPS) have translated the pertinent section from the 1979 edition of Traditional Chinese Pediatrics (Zhong yi er ke xue) without any alteration, for I feel it clearly expresses how influenza affects basically healthy children. But there is another factor at work in Western children, who are not nearly as robust and healthy as Chinese children, and who are treated wltH antibiotics at the first sign of fever. This factor is the beneficial effect of fevers in expelling accumulated heat. We have, therefore, included a section on the beneficial aspects of fevers, and how they strengthen the immune system. Thus, the section on internal factors and on lingering pathogenic factors is based on our clinical experience.

## ETIOLOGY & PATHOGENESIS

### EXTERNAL FACTORS

#### Ettoiology

An attack lty pathogenic wind-cold or wind-heat, especially at times of change in the weather, can lead to influenza. Rapid temperature changes are particularly common in winter and spring, and the disease accordingly attacks most frequently during these seasons. internally, the child's body is weak, allowing the pathogenic factor to readily enter. As noted in an 18<sup>th</sup>-century work entitled *Etpiaintng the Puzzles of Pediatracs* (You ke Shi mi), "the origin of influenza is weakness of protective qi."

### INTERNAL FACTORS

Accumulated heat can lead to fever, which can be beneficial to a child. Heat can accumiate for a variety of reasons, for example, the heat may be from a lingering pathogenic factor. In this case, the heat may have been there for quite a long tim-months or even year-and the fever may be the manifestation of the body finally expelling the pathogenic factor.

A second internal factor is termed "latent heat of spring". We use the term "latent" to translate a traditional Chinese medical term (yu), which also means hidden.

Latent is a slightly better term because it conveys the sense of potential to do something, to wreak havoc!

In traditional Chinese medicine it means heat in the system which is hidden, so you do not know it is there The penon mayrot feel, look or act hot, but heat is nonetheless present. There may or may not be heat signs on the tongue. So what is it?



Latent heat can be a problem at any time of year, but it is especially a problem in springtime, because it is the Liver which “is the official in charge of making things go smoothly.”

## TREATMENT

The primary aim of treatment should be to clear the wind and secondarily to relieve the dominant symptoms. If the wind is not cleared, the other symptoms will remain, but if no attention is paid to relieving the symptoms, then the cure will take longer.

## ACCORDING TO PATTERN

### Wind-cold

GV-14 (*DA ZHUI*)  
LI-4 (*HE GU*)  
G-20 (*FENG CHI*)                      Clears wind-cold and nasal obstruction  
L-7 (*lie que*).  
TB-5 (*woi guon*)

- ♦ *Method:* these points are needled with a dispersing method.
- ♦ If the child is shivering or shows very few signs of heat, add the following points:

S36 (*zu san li*)                      For both point, use the tonifying method, then moxa  
CV-12 (*zhong won*)

- ♦ **Method:** tonify, then moxa. Alternatively, cupping may be applied to the back. According to the textbooks, B-12 (*feng men*) and B-13 (*fei shu*) should be cupped, but it is often more effective to search for tender points on the upper back and cup these instead. Tenderness in the upper thoracic area is a strong indication that cupping will be helpful. Apply up to three cups on either side.

It is our experience that a new generation of children is growing up which is more fearful: they are even afraid of cupping. For such children, needling is also frightening but has the advantage that it is over much more quickly.

- ♦ **Management:** the child should be kept warm and encouraged to sweat. (This is contrary to the conventional wisdom of Western medicine.)

- ◆ Prognosis: acupuncture is usually extremely effective for this disorder; the stronger the symptoms, the easier it is to cure. One treatment is often enough, and it is rare that more than three treatments are needed unless the patient is very depleted.

### Wind-heat

G-20 (*feng chi*)  
GV-14 (*da zhui*)    Clears wind  
LI-11 (*qu chi*)  
LI-4 (*he gu*)

- ◆ **Method:** these points are needled with the dispersing method. Together, the last three points are very effective in clearing heat from the body. As in the case of wind-cold, cupping may be used, but acupuncture is generally more effective with hot disorders.
- ◆ **Prognosis:** one to three treatments are required to clear wind-heat from the body. Further treatments may be necessary to assist in the child's recuperation.

### FREQUENCY OF TREATMENT

It is rather hard to say how often to treat, because it depends very much on the severity of the condition and the child's response. Treatments can be given as often as once every two hours if the fever is very high and you are worried that convulsions are likely to occur. In slightly less severe cases, two or three treatments may be given over twenty-four hours, depending on how the child reacts. If the perspiration changes and comes pouring out, you may not need to do any more treatments.

### LIKELY RESULTS OF TREATMENT

Very frequently, one treatment is enough to transform the situation, so that the fever breaks and the natural healing process may occur. Further treatments may be needed to tonify qi in the recuperation stage.

### PROBLEMS IN TREATMENT

Feverish children are very distressed and often fearful. The last thing that they want at this time is for a huge monster of an acupuncturist sticking great big nails in them! Not surprisingly, you will find a strong resistance to treatment. However, do not be put off. The actual pain to the child is much less than the child fears, and the benefits far outweigh the discomfort that you may cause.

## CLINICAL OBSERVATIONS

### **Use of S-36 (zu san li)**

There is a school of thought, which says that the effect of S-36 (*zu san li*) is too tonifying to be used in treating fevers. We think this is quite mistaken. Perhaps this point of view arises because in some situations S-36 (*zu san li*) works in much the same way as ginseng, and ginseng is certainly contraindicated in fevers.

Our experience is that it is, usually beneficial to use this point in treating wind-cold disorders because the child is usually deficient as well as cold.

## CHRONIC COUGH

### INTRODUCTION

Cough in a child is very distressing to witness. It disturbs the whole family's peace by day and their sleep by night. Although most coughs are not dangerous, in a weak child, a mild cough can progress to pneumonia. Thus, if there is any sign of heat as well, the child is usually treated with antibiotics. In many children, taking antibiotics results in the generation of dampness, which then leads to a chronic cough. With repeated treatment by antibiotics, the Lungs and Spleen are further weakened, which may give rise to asthma. This vicious circle of chronic coughs with acute flare-ups being treated with antibiotics can be avoided with acupuncture treatment, for acupuncture (with cupping) is extremely effective in treating both acute and chronic coughs. Even if the point selection and needle technique is not quite correct, acupuncture still has a pronounced effect in treating this condition in children.

The “external attack of pathogenic wind” in Chinese medicine corresponds broadly to attack by viral or bacterial agents in Western medicine. It is uncommon among breast-fed infants who receive immunity from their mothers, but becomes much more common when children go to their first play group or kindergarten. The causes of “internal injury” coughs are more varied and include poor diet, damp living conditions, inadequate treatment, pertussis, and immunizations. Poor diet and damp living conditions give rise to phlegm-damp coughs, as does repeated treatment with antibiotics. Pertussis and immunizations for diphtheria, polio, tuberculosis, and pertussis can all give rises to coughs of the phlegm-damp variety. In practice, there seems to be a range of conditions caused by immunizations, including:

- ◆ mild, chronic coughs
- ◆ tight, chronic coughs with rather thick, ropy phlegm
- ◆ glandular congestion of the lingering pathogenic factor type

Measles immunization may also produce a chronic cough or susceptibility to cough, but this is usually of a hot nature and presents in a way similar to the phlegm-heat pattern, although less acute. This type of cough can also be caused by “womb heat”, that is, heat passed on from the mother, either due to her constitution or some other heating factor such as a febrile disease or a hot climate during pregnancy.

### ACUTE VERSUS CHRONIC

In Chinese textbooks there is little distinction between acute and chronic coughs. The big distinction that is made is between a cough at the external level and one which has caused internal injury. We feel that this approach is often misunderstood by Western practitioners, so we have adopted a different approach in this chapter. We have decided to discuss chronic cough first and then acute cough (what we might call viral or

bacterial) in the following chapter. We have changed the order because we think that it is easier to understand acute cough if you understand the long-term underlying condition. Moreover, most of the coughs that an acupuncturist will see are chronic. It is rare to see an uncomplicated case of acute cough.

We have also departed from the Chinese texts in other ways: the patterns here are somewhat different from those set out in Chinese books, and also from those provided in earlier editions of this book. This is because over the years we have found that children coming to the clinic really do have different patterns. Thus, what is given here is based on what we actually see in our clinic. We hope our observations are helpful. It is possible that you, who may be living in a different culture and different climate, have children who exhibit yet different patterns! At least what we give here will be a start. For the sake of completeness, we have also set out the yin deficiency pattern which appears in every Chinese textbook, even though we have never seen it in clinic in the form described.

### TREATMENT OF PHLEGM

When there is a lot of phlegm, certain precautions must be taken when treating this pattern. For example, the child could have serious difficulty breathing when there is too much phlegm in its throat; there is thus a danger of suffocating on its own phlegm. For this reason, we recommend starting with the following treatment if there is the slightest doubt in your mind about the safety of aggravating the condition:

CV-22 (*tian tu*)      Clears the bronchi

Just use this one point, which has the effect of opening the bronchi. If you feel that is not quite enough, add:

CV-17 (*shon zhong*)    Opens the chest

Do not use any more points in the first treatment. Explain what you are trying to do to the parents, and tell them that there may only be a slight improvement from this treatment, but that you would rather it were like this than to get a dramatic worsening of the condition. Once you have explained this, parents will be reassured. There is an old saying in traditional Chinese medicine that addresses this situation, “Better too little medicine than too much medicine.”

For the next treatment, you may branch out to points on the Lung channel, such as:

L5 (*chi ze*)                      Drains water from the Lungs  
L7 (*lie que*)                      Clears phlegm from the Lungs

These points do have some effect in stirring up phlegm. So again, if there is any doubt about the stability of the child's condition, add:

CV22 (*tian tu*)                      Clears the bronchi

Once you are sure that there is no danger of aggravating the condition, you are much freer in your choice of points. In particular, you may now proceed to use:

S40 (*feng long*)                      Resolves phlegm

This point is left until last, for although it is the supreme point for transforming phlegm over the long term, in the short term it has the effect of stirring up phlegm, and increasing the amount that needs to be coughed up.

- ♦ Method for needling CV-22 (*tian tu*): in adults this point is needled obliquely, threading the needle about one unit under the sternum. In babies and children up to (at least) seven years of age, the point is needled perpendicularly, to a depth of about 5mm. You must not needle under the sternum because the thymus gland is still quite large; moreover, it is unnecessary. It is quite enough to just obtain the qi and direct it downward into the chest with your needle technique.

## ACCORDING TO PATTERN

### Phlegm in Lungs only

A typical prescription includes:

B13 ( <i>feishu</i> )	Benefits the Lungs
L5 ( <i>chi ze</i> )	Clears fluid from the Lungs
L7 ( <i>lie que</i> ) or	Clears phlegm from the Lungs
L9 ( <i>tai yuan</i> )	Clears phlegm from the Lungs

These points are generally enough. Occasionally, you may feel that the following point is also indicated:

S40 (*feng long*)                      Transforms phlegm and encourages the Spleen's transportive and transformative functions.

- ◆ **Number of treatments:** this depends on the thickness of the phlegm and the strength of the child; typically, ten to twenty treatments are given
- ☞ **Sometimes, once the phlegm has been cleared, this pattern evolves into the lingering pathogenic factor pattern.**
- ◆ **Advice to parents:** avoid cow's products (milk and cheese), peanut butter, and bananas.

### Phlegm with accumulation disorder

- ◆ Although the root cause is the digestive disturbance, there has to be some weakness in the Lungs for the cough to occur. Therefore, always use a point which benefits the Lungs such as L-7 (*lie que*) or L-9 (*tol yuan*). In addition, treat the accumulation using *Si feng* (M-UE-9).

**Results of treatment:** there may be a huge explosion of stool, and the child is likely to have one or two very bad night's sleep. Also, it is quite likely that the cough will get much worse. Only after three or four days will an improvement be noticed. Once again, warn the parents about the likely results of treatment. If you do not warn the parents, they may lose confidence in you.

- ◆ **Number of treatments:** about five or six is usually enough in a straightforward case. Occasionally the treatment reveals something else underneath, and sometimes the straight forward phlegm pattern evolves into the lingering pathogenic factor pattern.

**Advice to parents:** impress on the parents the need to regulate their child's eating habits. Encourage them to offer less food, simpler foods, and easier-to-digest foods. Also encourage them to sit the child down for regular meals and to avoid giving snacks in between.

### SUMMARY OF TREATMENTS

If the child is drowning in phlegm, in the first treatment use CV-22 (*tian tu*) and CV-17 (*shan zhong*). For the next treatments use L-5 (*chi ze*) and L-7 (*lie que*). Add CV-22 (*tian tu*) and CV-17 (*shan zhong*) if there is any doubt about the stability of the child's

condition.

For later treatments, and for the first treatment when there is less phlegm, use:

- ♦ B-13 (*fei shu*), L-5 (*chi ze*), and L-7 (*lie que*) for the pattern of phlegm in the Lungs only
- ♦ L-7 (*chi ze*) or L-9 (*tai yuan*) plus *Si feng* (M-UE-9) for the pattern of phlegm with accumulation disorder.



## ACUTE COUGH

### Introduction

In traditional Chinese medicine, the *cause of acute cough* is said to be the invasion of pathogenic wind. In most cases, wind attacks the superficial layer and is generally not a real threat to life. In this way, coughs are very similar to fevers, which are also due to attack of wind at the superficial layer. There is not much difference between a cough with a fever and a fever with a cough! Or at least so it would appear from the textbooks, and so it is for healthy people.

However, in your clinical practice, the children who are likely to come to you with a cough are those who already have some respiratory illness, such as chronic cough or even asthma. For these children, an acute cough may pose quite a severe threat to life. Because of this danger, we feel it is important that you be able to treat acute cough attacks because this will enable the child to overcome the pathogenic factor. For a child with a history of chronic cough, this may mean saving it from yet another course of antibiotics. For a child with asthma, you may be able to ward off an asthma attack and so avoid a visit to hospital, with all the attendant trauma. For a child with a multiple drug resistant strain of bacteria, it may mean saving the child's life.

Moreover, a treatment given at this time is worth several treatments given after the time of an acute attack. As the saying goes, "A time of change is a time of opportunity," and if you grasp the opportunity of treating during an acute attack, it can sometimes be a turning point in a long series of treatments.

### TREATMENT

Again, following the traditional Chinese medical texts, we will describe the treatment for each of these patterns.

### Purpose of treatment

It is not quite the conventional order of things, but let us start first by asking why we are treating, or rather, what is the precise purpose of giving a treatment at this time? In most illnesses, the answer is obvious: to relieve suffering. But in this case there is a more pressing aim. As mentioned before, it is unlikely that a child will be brought to you merely for a cough which it could overcome on its own. This means that the child will not be able to get over the cough by itself and needs intervention. What are the possible outcomes of acute cough? As we saw, an attack of wind is the first stage. If it goes deeper it will transform into an interior disease, phlegm-heat in the Lungs. If, in turn, this is allowed to progress, it will develop into pneumonia or asthma, which is life

threatening. These pathways are usually well worn. Usually, past a certain stage, the child is subjected to conventional medication, maybe in the form of antibiotics. Our aim, therefore, is to prevent a wind pattern from progressing to phlegm-heat, and a phlegm-heat pattern from developing into pneumonia or asthma.

### Basic prescription

The treatment of acute cough is really very simple. A prescription such as the following will have quite a strong effect on most coughs:

L-5 (*chi ze*)  
L-7 (*lie que*)  
B-13 (*feishu*)

An accurate diagnosis is preferable, but not really necessary, in order to give a good treatment for cough. We mention this because the general anxiety surrounding a child with an acute cough affects you, the practitioner, making it hard to think clearly. If there is the time and mental clarity to do a good diagnosis, the following prescriptions will be found to be even more effective.

### Wind

L-7 (*lie que*)  
LI-4 (*he gu*)  
B-13 (*fei shu*) or  
B-12 (*feng men*)

- ♦ **Method:** strong dispersing technique is needed in order to get any results. Another method is to use cupping at tender areas in the vicinity of B-13 (*fei shu*).

Needle technique is all *important*. Recently we spoke to an acupuncture student who was convinced that acupuncture did not work for acute cough. On questioning it turned out that the student had visited a student clinic, and had been treated for a cough herself. The treatment she received was based on very gentle needling with very fine needles. It was so gentle that she did not actually feel any qi at all. In these circumstances, you cannot expect to do much to disturb a well-established pathogenic factor which has just found a nice new home.

- ♦ **Prognosis:** if you are treating a child who is basically healthy and is not normally prone to coughs, then the results of the treatment are very good. One to three treatments given once a day is usually enough to make a big difference. However, it is unlikely you will be seeing much of this sort of condition unless you are working in the Third World or with very

impoverish ed pailents for whom the state of the weather is really important. For patients who have housing with heating or air conditioning, there is a large measure of protection from the weather, and healthy children need little assistance in getting over a cough beyond staying indoors.

What is much more likely is that you will be treating children who already have a chronic cough or even asthma, and the acute attack is an overlay. In these cases, the results of treatment are quite variable and unpredictable. Sometimes wind at the superficial level can be very hard to clear.

The treatment of cough is really quite simple because there are only a few things that you can do. But actually the symptom of cough is very complex with many components. One is the actual pathogenic factor, which may be an epidemic going round the community. Another is the energy level of the child. Others include the amount of phlegm that has accumulated in the child; how the child feels about the weather, family, school, or television programs; and yet another is pollution. If you have been treating a child for a long time, you do eventually start to notice the really important factors in that child's life.

### Wind-cold

Use the basic prescription to liberate the exterior. Then add moxa at the points to warm up the child:

B-13 (*fei shu*)  
CV-17 (*shan zhong*)  
CV-12 (*zhong wan*)

- ◆ **Method:** in very young children, use only indirect moxibustion; in older children, you can use direct moxibustion or, better still, moxibustion on ginger. Cupping is also effective. But even these methods may not be enough to warm up the child. Other methods include:
  - warm drinks
  - hot bath, especially with warming and dispersing essential oils
  - ginger and lemon drink
  - homoeopathy especially Aconite or Arsen'cum album
  - warming herbs

You do not have to use only Chinese herbs. Warming herbs, such as yarrow (*Achilleo millefojium*) are also effective.

- ◆ **Prognosis:** the results are quite variable. This is because wind-cold is rarely a purely excessive disorder. There is often overall qi and yang deficiency at the same time. That is one of the reasons why it can be so difficult to warm up children.

### Wind-heat

The basic prescription is often helpful:

L-7 (*lie que*)

LI-4 (*he gu*)

B-13 (*fei shu*)

L-10 (*yu i*)

Clears heat & stops pain in throat; can be substituted for LI-4 (*he gu*)

- ◆ **Method:** the reducing technique should be used, with or without cupping. If heat is the significant factor, it may be appropriate to use the prescription for wind-heat type influenza:

GV-14 (*da zhui*)

LI-11 (*qu chi*)

LI-4 (*he gu*)

- ◆ **Prognosis:** the results in treating wind-heat are generally very good. If a child has this sort of cough, it usually means that its energy is quite good anyway, and the child only needs a push in the right direction to get the body fighting the pathogenic factor.

### Wind-dampness

It is more difficult to give a blanket prescription for wind-dampness because the symptoms vary quite a lot. The following points can be used in most situations:

Sp-9 (*yin ling quan*)

K-7 (*fu liu*)

B-13 (*fei shu*)

Drains dampness

Drains dampness

Tonifies the Lungs

S-36(*zu san li*)

Tonifies qi and benefits the Spleen

If the child is drowning in water, be careful. Be even more careful if the child is drowning in phlegm! You must take care not to aggravate the condition. In such cases, use points like:

CV-22 (*tian tu*)

CV-17 (*shan zhong*)

The main difference here is the need to drain dampness. In some patients this is more important even than treating the Lungs. When I(JPS) was training with Dr. van Buren, I saw a bad cough successfully treated using the following prescription:

K-7 (*fu liu*)

K-9 (*zhu bin*)

K-10 (*yin gu*)

- ◆ Prognosis: the results are quite variable. This is because wind-dampness is rarely a purely excessive disorder. There is often overall qi deficiency at the same time.

### Wind-dryness

The basic prescription is helpful. Other points which moisten the Lungs are:

L-5 (*chi ze*)

K-6 (*zhao hai*)

- ◆ Prognosis: living as we do in a damp climate, we have never seen this pattern, so we cannot comment on it. We welcome any information from other practitioners.

### Phlegm-heat

The following prescription is very helpful:

L10 (*yu ji*)

L5 (*chi ze*)

CV17 (*shonzhon9*)

Clears heat in the Lungs

Moistens and cools the Lungs

Opens the chest

Other points which are of use include:

CV	22 ( <i>tion tu</i> )	Opens the chest
P	6 ( <i>nei guan</i> )	Opens the chest
L	2 ( <i>yun men</i> )	Clears heat in the Lungs
B	13 ( <i>fei shu</i> )	Clears heat in the Lungs

If there is wheezing or difficulty in breathing, add:

*ding chuon* (M-BW-1) Clears heat in the Lungs

If there is high fever, add:

GV-14 (*do zhui*)  
LI-11 (*qu chi*)

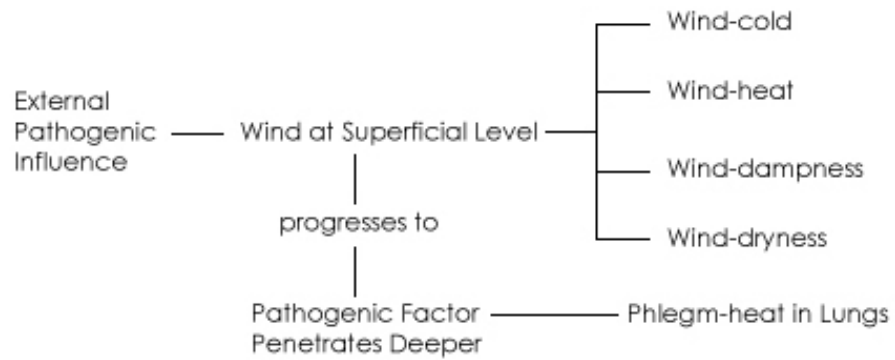
**Method:** strong reducing method is used at the channel points on the arms. Use a mild reducing method at the chest and back points, since there is real danger of causing pneumothorax if you disperse too strongly.

Once again, this prescription is by way of a suggestion. You must adapt the prescription to your particular situation. CV-17 (*shan zhong*) is helpful if there is pain in the middle of the chest. L-2 (*yun men*) is wonderful if the whole of the chest is sore and inflamed.

**Prognosis:** strange to relate, the results for this more serious disease are much better than for the less serious condition of wind. Very often just one treatment is enough. Even during the treatment, some of the pain and fever may subside, and with it some of the fear. Antibiotics are usually prescribed in this situation, but they are very rarely needed if you can give two treatments within twenty-four hours.

**Figure 2-1 Acute Cough**

### Acute Cough



## ASTHMA

### INTRODUCTION

Asthma is a very serious, life-threatening disease; many adults and children die of it every year. To live with asthma is both physically and emotionally debilitating, especially for a child. The child cannot run and play with friends, which is frustrating, and is often left out of things, which can be really upsetting.

The use of drugs in the control of asthma is of a palliative nature only. Drugs do not cure the condition. From our point of view, the commonly used drugs-bronchodilators and steroids-actually make the problem worse in the long run. Research is being done into the effect of bronchodilators since their long-term use may have increased the mortality rate from this disease over the last few years.

The incidence of asthma is increasing at an alarming rate in the developed world. For example, a pediatrician in Brighton, England told me that asthma is approximately ten times more common today than it was when he started practicing thirty years ago. At that time, he said, the asthma ward in the local hospital (with about forty beds) never had more than a handful of children. By contrast, the diarrhea ward was always full and often overflowed. Now, however, the situation has reversed. There is no doubt that this shift is due at least in part to changes in family and school life, which will be discussed in more detail in the section on etiology.

### WHAT IS ASTHMA?

The Chinese term for asthma, *xiao chuan*, literally means “wheezing and gurgling.” As such, they refer to dyspnea, or difficulty in breathing, which is not quite the same as asthma. Asthma is generally taken to mean that the child has difficulty in breathing due to an increased responsiveness of the airways. However, many children are labeled as “asthmatic” even when they may not have that much problem in breathing, but may just get recurrent coughs or have a lot of phlegm on the chest. This makes them a bit rattly in the chest or a bit wheezy, but hardly asthmatic.

Luckily for us, the actual Western diagnosis is not that important: we can make our own diagnosis by pattern differentiation. However, if you read the acupuncture text-books about asthma you will find differing ideas. There also seem to be many new theories about the disease. What we present here is the treatment of children who have received the Western diagnosis of asthma, and is based on our experience in the Children’s clinics in London, Brighton, and Seattle. It is different from the descriptions set forth in Chinese textbooks.



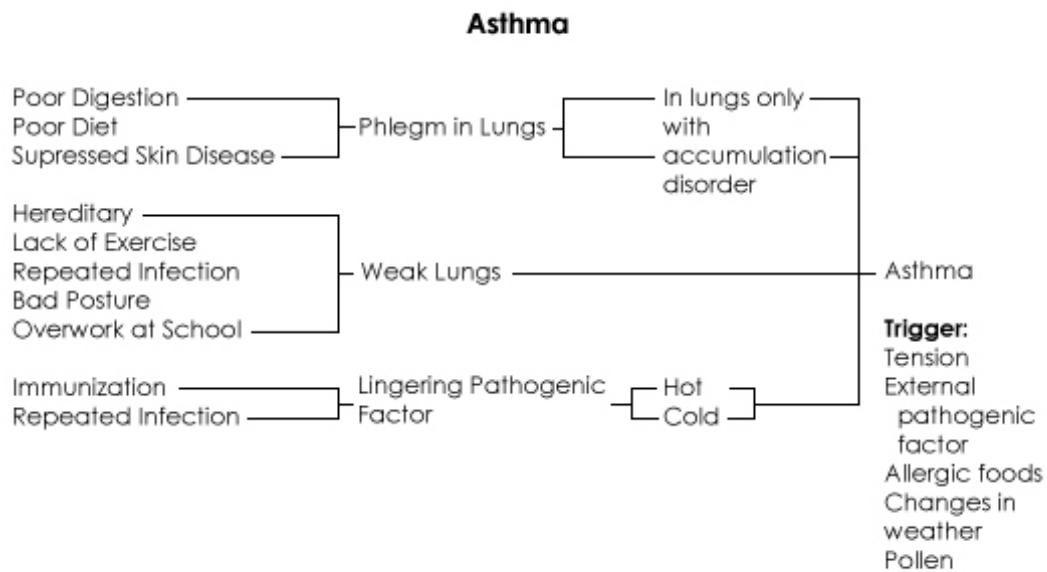
## EFFECTIVENESS OF ACUPUNCTURE

Acupuncture is very effective in the treatment of asthma and is, in our view, the treatment of choice for this disease. However, treatment is not always easy, and many problems are encountered along the way. On a basic level, all you do is tonify the Lungs, resolve phlegm, and strengthen the Spleen: “if only life were this easy.” Most of the children that we see have been taking various drugs for years. This has two repercussions. First, the organs or *zang fu* are further weakened by the drugs, and second-more serious in some ways-the children are addicted to the drugs. If you watch a child who has just taken some ventolin or becotide, you will see that they get a real kick out of it.

The result of all of this is that treatment takes a long time, many months in some cases. Moreover, the child will still be at risk of attacks during your treatment. This will, of course, happen occasionally, with the result that the parents may become demoralized and stop coming. The child can also find it very hard to come off the drugs, and many reasons can be dreamed up to persuade parents to stop treatment.

However, if you can get through all of this and win the child’s and the parents cooperation-both of which are needed-then you are sure to help that child enormously. It takes patience and care. But perhaps as much as any other disease, if you can treat asthma successfully, you will have saved that child from growing up with a frightening, lifelong disease.

### *Figure 2-2 Asthma*



## TREATMENT

As noted in the introduction to this chapter, it is our belief that acupuncture is the best therapy for an asthma attack because of the simplicity of treatment. All three patterns above likely involve spasms, and there is an excehent point for relieving them:

⇒ *ding chuan (M-BW-1)*

Method: use two needles-one for each side-as you will probably want to retain them in place. Use 5mm needles for toddlers, but for five- or six-year-olds, you may need to use a longer and thicker needle, perhaps 15mm, 30 gauge needles. The needling method is to obtain qi and then give quite strong (but gentle) and continuous stimulation to the point. Do half a minute on one side, then half a minute on the other side. Return again to the first side. Continue for three to five minutes. (This is a very long time. Use a watch, for in an acute situation, half a minute seems like an eternity.) After three to five minutes there should be significant improvement in the breathing. It is then appropriate to use additional points based on the particular pattern.

## Spasm-wheezing

P6 ( <i>neiguon</i> )	Opens the chest, calms the spirit
Liv3 ( <i>tai chong</i> )	Relaxes spasms
B13 ( <i>feishu</i> )	Tonifies the Lungs

- ◆ **Method:** strong dispersing method is used for all three patterns

## WHAT TO EXPECT FROM TREATMENT

When you start treating a child with asthma the results will probably not be very dramatic. Gradually, the phlegm will diminish, the accumulation disorder will resolve, and the qi will strengthen. Once you have achieved this much, you may proceed to treat the lingering pathogenic factor. After a few treatments the phlegm will start to loosen up and the child will begin to show such symptoms as cough, runny nose, or runny stools as the phlegm comes out. When the phlegm is loose, treat as if it were a phlegm condition.

Once the obvious phlegm has been resolved, then go back to treating the lingering pathogenic factor.

Once more, step-by-step:

1. Treat the phlegm or the Lung qi deficiency.
2. Treat the lingering pathogenic factor.
3. When the phlegm has loosened up, return to treating the phlegm.
4. When the visible phlegm is no longer present, return to treating the lingering pathogenic factor.
5. Continue in this way until the child has recovered.

## SUMMARY

Using acupuncture to treat asthma in children under five is very rewarding. It is also comparatively quick, taking only weeks instead of months or years, as is often the case with adults. The reasons for this are that the child is still comparatively strong, the disease will not have weakened the *zang fu* organs too much, and the use of anti-asthmatic drugs will (hopefully) have been very limited. It therefore takes less time to strengthen the Lungs and cure the asthma. Even if there is a lingering pathogenic factor, acupuncture can still effect a cure in a matter of months, if the treatments are regular and the advice is followed.

It is awful to watch anyone gasping for breath, but somehow, to see a young baby or child under five wheezing and terrified as he or she fights for air is heart-rending. To prevent this from happening is one of the marvels of acupuncture.

### Liver qi retarded (spasm type)

- ♦ attacks brought on or aggravated by external stress or highemotion
- ♦ often the stress is between the parents, or in the family - environment
- ♦ face is usually rather pale, with a greenish tinge
- ♦ possibly green around the mouth
- ♦ lips possibly red
- ♦ often has dark pools around the eyes
  
- ♦ *Tongue:* often red, especially at the tip; purple body  
*Pulse:* wiry

Note: if the child has had asthma for a long time, the tongue may have a granular coating

### TREATMENT

#### Main points

As with the treatment of asthma in children under the age of five, certain points can be used regardless of the particular pattern. These include:

L-5 (chize)  
L-7 (lie que)  
L-9 (tai yuan)  
B-13 (fei shu)

#### Lung deficiency and weakness

Use the main points with a tonifying technique.

- ♦ *Prognosis:* usually good, with the number of treatments depending on the extent of the child's deficiency. The child should gradually improve over a period of fifteen to fifty treatments.

#### Lung and Spleen qi deficiency

Use the main points, plus:

S-36 (*zu san li*)  
Sp-6 (*son yin jioo*)  
B-20 (*pi shu*)  
CV-12 (*zhong wan*)

- ♦ *Method:* you can do moxibustion at CV-12 (*zhong wan*). You may also wish to add S-40 (*feng long*) or P-6 (*nei guan*). Use tonifying technique at all the points. However, S-40 (*feng long*) may cause phlegm to rise, aggravating the situation. Therefore, use it together with CV-22 (*tian tu*).
- ♦ *Prognosis:* depending on how long the condition has persisted, it may take from ten to fifty treatments. In the hyperactive pattern the treatment is the same, but the prognosis is more variable. The child may well manipulate itself out of treatment.

### Lingering pathogenic factor

Use the main points, plus:

B-18 (*gon shu*)  
B-20 (*pi shu*)

- ♦ *Method:* moving technique. Add bai lao (M-HN-30) when you feel that there is enough energy to moye the phlegm in the channels.
- ♦ *Prognosis:* expect slow progress, that is, thirty to fifty treatments. The results may be quicker if you use herbs as well as acupuncture.

☞ **Only attempt to clear a lingering pathogenic factor after the other deficiencies or excesses have been resolved.**

### Lung and Kidney deficiency and weakness

Acupuncture is not always the treatment of choice for this pattern. You may have to start with moxibustion at B-23 (*shen shu*). If it is simply a question of weakness, then this will be enough. It is very rare to see this condition by itself without the added presence of Lung or Spleen deficiency. You will, therefore, usually need to treat the Spleen as well. Accordingly, use the main points plus:

S-36 (*zu san li*)  
Sp-6 (*san yin jiao*)

B-20 (*pi shu*)  
B-23 (*shen shu*)

- ◆ Prognosis: this pattern responds well to acupuncture but will return if there is deep-seated weakness. The hyperactive pattern has a similar prognosis to that of the hyperactive Lung and Spleen qi deficiency pattern.

### Liver qi retarded (spasm type)

Use the main points, plus:

Liv-3 (*tal chong*)  
Liv-13 (*zhang men*)  
P-6 (*nei guan*)

- ◆ Prognosis: the response varies. If the stress continues or if the child becomes very introverted, treatment may serve only to maintain the status quo. If the stress passes, then ten to twenty treatments may restore the child's health.

# TONSILLITIS

## INTRODUCTION

Tonsillitis is one of the most common of chronic childhood complaints, so much so that in the recent past it was standard procedure to remove children's tonsils regardless of whether they had problems. This surgery is rarely, if ever, necessary for patients who are prepared to undergo acupuncture treatment, for acupuncture is dramatically successful in treating acute tonsillitis and can effect a cure in most chronic cases as well.

From a Western medical point of view, tonsillitis is caused by either a bacterial or viral infection. From the traditional Chinese medical point of view, it can be caused by external factors, but it is recognized that internal factors also play an important role. Among the common causes of both acute and chronic tonsillitis are those discussed below.

## Epidemic

These are most common at the beginning of spring and autumn, when the weather changes suddenly and there is often wind as well. Under these conditions, an external pathogenic factor can invade the throat, giving rise to acute tonsillitis.

## Dysfunction of the Lungs and Stomach

The throat is known as the "gateway" of both the Lungs and the Stomach. Therefore, problems associated with the Lungs, such as inflammation of the chest, ears, and nose, can give rise to acute or chronic tonsillitis. Similarly, if there is much heat and phlegm in the Stomach, this too can rise up to the throat and cause acute or chronic tonsillitis.

## Environment

The tonsils filter airborne poisons: tobacco fumes and chemical fumes (e.g., paint and cavity wall insulation). These poisons can predispose a child to tonsillitis as they cause dampness and heat to accumulate in the body and obstruct the channels of the throat.

## Repeated infections

If a child suffers repeated acute attacks of tonsillitis, this will gradually weaken the qi in the throat and may lead to chronic tonsillitis. This is especially so if these acute attacks are not treated well, which is to say, if antibiotics are routinely prescribed.

## Immunizations

Certain immunizations-pertussis being the most common-have the effect of giving rise to chronic tonsillitis.

## Emotion

Problems of the throat are often linked to the emotions, most commonly, bottled-up anger.

## While treating otitis media

It is not uncommon for tonsillitis to appear when you are treating chronic otitis media. The lingering pathogenic factor which was in the ears moves downward. This is not a bad reaction, but it may need to be treated. It certainly needs to be explained to the parents!

## TONSILLITIS AND THE EMOTIONS

Perhaps one of the most glaring differences between conventional Western medicine and traditional Chinese medicine is that, according to the former, virtually all acute diseases are caused by *external* factors, for example, a bacteria or virus. Obviously, this is true in some cases, but what the Chinese noticed a long time ago is that this need not be the case: acute illness may come from an internal problem. Tonsillitis is a good example. The Western medical diagnosis is that it must be a bacterial or viral infection. The Chinese say that this can happen (an external pathogenic factor), but it may also be due to internal heat from diet or emotional hustration.

This is borne out by looking at the common pattern that tonsillitis follows. It is rarely seen in children under the age of two, and becomes common in two- to three-year olds. At this time, the most important factors that have changed in the child's life are trying to communicate effectively and properly, and wanting to do things but not quite accomplishing them. There is another peak around the age of six to seven years when children become more self-conscious and self-reflective about their emotions.

## TREATMENT

### Acute Tonsillitis

#### Main points

LI-4 (he gu)	Clears the wind-heat and benefits the throat
S44 (nei bng)	Benefits the throat and clears the Stomach heat

These points are usually enough to stop the pain and start the healing process. The



pain should start to subside during the treatment. If it does not, or if the tonsillitis is very severe, the following points will be helpful.

L11(shaoshang)	Clears the pain and swelling in the throat
CV22 (tian tu)	Benefits the throat
SI17 (tion rang)	Local point for tonsils
Th17 (yi feng)	Local point for tonsils

- ◆ **Method:** strong dispersing method; if the pain and swelling in the throat is very severe, bleed L-11 (shao shang) with a triangular needle

## According to symptoms

Headache and other wind symptoms:

G-20 (*feng chi*)  
Fever: LI-11 (*qu chi*)

Delirium: P-9 (*zhang chong*)  
In severe cases which do not respond to treatment, or where there is danger of the throat becoming blocked, prick the tonsils themselves with a triangular needle.

## Special treatments

1. Prick the engorged vein on the back of the ear.
2. “Without heat” moxibustion: apply a paste of crushed garlic at LI-4 (he gu) for one to two hours to cause irritation of the skin. The paste must not be left in place too long, as severe blistering can occur.

## According to pattern

### WIND-HEAT

The main points listed above are adequate.

**Prognosis:** one treatment is usually enough to relieve the pain, but more may be required to reduce the swelling. In young children, LI-4 (he gu) alone is sufficient, while in older children it may be combined with L-7 (lie que).

## YANG MING FEVER

GV-14 ( <i>da zhui</i> )	Clears heat and releases the exterior
LI-11 ( <i>qu chi</i> )	
LI-4 ( <i>he gu</i> )	

The main points listed above may also be used. In severe cases a purgative such as a preparation of Senna (*Cassia angustifolia*) should be administered.

- ◆ Prognosis: one treatment is usually sufficient to stop the pain; further treatments may be required to clear the yang brightness fever

## Heat In The Stomach

USE THE MAIN POINTS, BUT ESPECIALLY S-44 (*NEI TING*) AND LI-4 (*HE GU*)

## Chronic Tonsillitis

### Main points

LI4 ( <i>he gu</i> )	Benefits the throat
S44 ( <i>nei ting</i> )	Benefits the throat and dears the Stomach heat

In chronic tonsillitis there have often been so many attacks that the qi in the throat is very weak. We often find that it is necessary to add some local points to the prescription for the first few treatments-even though children hate points on the throat. Consider such points as:

CV22 ( <i>tian tu</i> )	Benefits the throat
SI17 ( <i>tian rong</i> )	Local point for tonsils
TB17 ( <i>yi feng</i> )	Local point for tonsils

## Lingering pathogenic factor

### In Strong Child

In addition to the main points, the points below are helpful. In expelling lingering pathogenic factors that block the channels.

*bai lao (M-HN-30)* Clears lingering pathogenic factors from the channels; used for all glandular congestion problems.

B13 (fei shu)	Tonifies Lung qi; resolves knotted phlegm.
B18 (gan shu)	Benefits the Liver function of maintaining the free flow of qi, tonifies the Spleen.
B20 (pi shu)	Tonifies the Spleen, transforms the phlegm.

- ♦ **Method:** use a dispersing technique. If the lingering pathogenic factor is cold in nature, you may use moxibustion; if it is hot in nature, you may add such points as:

LI-4 (*he gu*)

S-44 (*nei ting*)

Liv-2 (*xing jian*)

- ♦ **Prognosis:** in cases of recent origin, three to five treatments may be enough; in long-standing cases, twenty to forty treatments may be required. The patient may have a discharge of catarrh and develop a cough after the treatments as the thick phlegm is resolved. If phlegm begins to appear, use S-40 (*feng Jong*).

### With Spleen Qi Deficiency

Use the following points to tonify the qi, plus one or two local points to bring qi to the throat:

S-36 (zu san li)  
Sp-6 (san yin jiao)  
L-9 (tai yuan)  
CV-12 (zhong wan)

- ◆ **Method:** use a tonifying technique as well as moxibustion
- ◆ **Prognosis:** depending on the extent of the deficiency, thirty to forty treatments may be needed. As the child becomes stronger, you must alter your point prescription and needle technique accordingly to expel the lingering pathogenic factor, as described in Chapter 3.

### Yin deficiency

Using needles on a genuinely yin-deficient child is difficult, as the child is truly frightened by them. Start by using moxibustion at the points, and then progress to using needles. Use the following points:

L7 (lie que)	Both points act on the throat and
K6 (zhao hai)	Tonify the yin of the body
B13 (fei shu)	Tonifies the yin of the Lungs
B38 (gao huang shu )	Tonifies the yin of the entire body)
B23(shen shu)	Tonifies the yin of the Kidneys
K3 (tai xi)	Tonifies the yin of the Kidneys
B18 (gan shu)	Tonifies the yin of the liver

- ◆ **Prognosis:** in mild cases, five to ten treatments are needed; in severe cases, ten to twenty treatments

### NOTES

In chronic tonsillitis, pay attention to the diet, avoiding phlegm-producing and warming foods such as milk, cheese, lamb, spicy foods, and greasy foods.

- ◆ In yin deficiency disorders, it is important for the patient to rest. If there is insomnia, this should also be treated.
- ◆ The lingering pathogenic factor variety of tonsillitis is cured much more quickly if herbs are combined with acupuncture. One Western herb that should be considered is Poke root (*Phytolacca decondro*).
- ◆ Tonsillitis is sometimes seen during the treatment of chronic otitis media. The otitis media should be treated as described in Chapter 25, and the parents should be reassured that this is a normal progression during treatment.

## OTITIS MEDIA

### INTRODUCTION

Otitis media is very common in babies and children, although it does vary in both its severity and frequency. In some children it is just a mild discomfort, while in others it is very painful. It may happen only occasionally in an otherwise healthy child, or the attacks may be recurrent and frequent. In some children the pain in the ear may even be continuous with acute flare-ups.

Otitis media is regarded with fear by many people, as it is said that there are risks of serious complications, including, occasionally, the risk of deafness. However, there is a certain amount of paranoia here, for if the condition is left alone by both orthodox and alternative healthcare practitioners, ninety percent of ear infections will resolve themselves, leaving no damage behind. This is not to say you should not treat it. No one wants to see a child suffer if help can be given, and acupuncture is very successful at treating otitis media. In fact, in the acute stage, the effects of using acupuncture are just short of miraculous. In young babies and in simple cases it is possible to relieve the pain in one treatment and effect a cure in two or three treatments. In more complex cases (where there have been repeated attacks) it takes longer, but success is almost certain, provided your diagnosis is correct and the parents are prepared to follow your advice. Even in those cases where there is risk of complications - and, of course, there are some-giving acupuncture regularly and frequently reduces the risk. This is in contrast to Western medicine, which has little to offer in the way of a cure, especially if the cause is a viral infection.

In Western medicine, acute otitis media is always attributed to external attack by a virus or bacteria, while in Chinese medicine the internal and external factors are given equal weight. Internal factors are heat or cold, (The differentiation of patterns in this chapter is for Western children. Previously, it was thought that an ear infection had to be a hot disease. We are now seeing many children with cold symptoms.) possibly accompanied by dampness, which come from a variety of causes. The heat is most commonly attributable to accumulation disorder in younger children, and to emotional factors causing Liver qi constraint in older children. The cold usually comes from the diet, overuse of antibiotics, or a cold lingering pathogenic factor.

External factors are external wind, cold, or heat invading the ear. This is common after swimming, or accompanying another illness such as tonsillitis or an upper respiratory tract infection. (Wind-cold and wind-heat can pass down the Eustachian tube.)

Chronic otitis media is usually caused by a lingering pathogenic factor, which is easily established when frequent attacks of otitis are treated with antibiotics. Alternatively, the lingering pathogenic factor can be traced to an immunization, commonly the pertussis vaccine. Rarely, chronic otitis media is caused by yin deficiency.

### PATTERN DIFFERENTIATION

The treatment of otitis media is, from the acupuncturist's point of view, quite straightforward, especially in the acute condition. This is because otitis media is regarded as a channel problem. Heat, cold, and/or dampness enter the channels of the ear-Triple Burner and Gallbladder-and obstruct the flow of qi in the ear. These pathogenic factors may stem from a *zang* fu (organ) disharmony, and this will obviously need to be cleared eventually. However, to stop the pain, one need simply regulate the qi in the channels. Therefore, the choice of points is straightforward.

The diagnosis, however, is complicated by the fact that it is often hard to differentiate the patterns, since they can blend into each other. This is especially true in acute cases. For example, a young angry child is much more likely to suffer an external invasion of a pathogenic factor. Similarly, a child who is unwell is much more likely to be irritable.

### TREATMENT

#### Main points

The main points for the treatment of acute otitis media are on the *shao yang* channels of the hands and feet. The ear is encircled by the hand *shao yang* (Triple Burner) channel, and secondary channels pass through the ear from TB-17 (*yi feng*) and G-20 (*feng chi*). You can, therefore, use:

TB5 ( <i>wai guan</i> )	Expels wind and regulates the channel
TB17 ( <i>yi feng</i> )	Expels wind and benefits the ear
G41 ( <i>zu lin qi</i> )	Regulates the Liver and Gallbladder
G20 ( <i>feng chi</i> )	Expels wind and regulates the Liver and Gallbladder
G2 ( <i>ting hui</i> )	Local point for otitis media

- ♦ **Method:** TB-5 (*wai guan*) and G-41 (*zu lin qi*) are needled to a depth of 0.5 to 1 unit, and the sensation should travel upward along the limb and toward the head. For children under the age of three, these distal points usually suffice. They also cause less distress than the local points. The angle of insertion at G-20 (*feng chi*) is slightly lateral in order to direct the sensation to the ear. TB-17 (*yi feng*) is needled to a depth of 1 unit. G-2 (*ting hui*) may be needled to a depth of 1.5 units, but for conditions of excess it is usually sufficient to needle to a depth of 0.5 units. The sensation should radiate to the inner ear and is usually rather painful. This is because the qi of the ear is stuck, owing to the presence of the pathogenic factor. As you remove this obstruction, it causes temporary, but sharp, pain. We have found that, for most cases, needling the points on the infected side only is sufficient.

### External attack of wind-heat or wind-cold

The following combination will bring quick relief:

TB-17 (*yi feng*)

LI-4 (*he gu*)

Use a moxibustion stick at TB-17 (*yi feng*) if there are no signs of heat.

If there are signs of heat, use:

GV-14 (*da zhui*)

LI-4 (*he gu*)

LI-11 (*qu chi*)

If there are signs of cold, use moxibustion around the ear if you can. We suggest you try:

CV-12 (*zhong wan*) with moxa

- ♦ **Prognosis:** it is not uncommon for the pain to subside within minutes. In young children and babies, one treatment using distal points will usually be enough. The child will break into a sweat, fall asleep, and be cured. In older children, a series of three treatments during the same day may be necessary to reduce the pain.

### External wind-heat or wind-cold invasion plus dampness

Use the same points as you would for the previous pattern, plus:

G34 (*yang ling quan*) Transforms dampness in the *shao yang* channel

If the dampness is chronic in nature, add:

S40 (*feng long*) Resolves dampness and phlegm  
Sp6 (*san yin jiao*) Tonifies the Spleen, resolves dampness

- ◆ Prognosis: one or two treatments are usually enough, although it may take more in stubborn cases

### Liver and Gallbladder heat

The main points listed above are usually sufficient. Some sources substitute TB-3 (*zhong shu*) for TB-5 (*wai guan*) and G-40 (*qiu xu*) for G-41 (*zu lin qi*). Other sources recommend using all four points.

- ◆ Prognosis: this pattern is common among older children and may take three to five treatments to cure. If the pain is very strong, first treat two to three times a day, and then daily. If a deficient-type child comes to you with this pattern and the pulse is wiry-that is to say, a deficient child with an excess pulse-the prognosis is less favorable.

### Liver and Gallbladder damp-heat

Use the main points until the pain subsides, and then add:

G-34 (*yang ling quan*) Clears Liver and Gallbladder damp-heat, resolves dampness and phlegm  
Liv-13 (*zhang men*) Transforms dampness  
Sp-9 (*yin ling quan*) Resolves dampness

If there is accumulation disorder, add:

*si feng* (M-UE-9) Clears accumulation disorder

- ◆ Prognosis: while any pain that accompanies this problem is reduced quickly (usually after the first treatment), the main problem (pus) is usually



rather slow to change. If the child is treated daily, there may be no appreciable reduction in the pus until after the third or fourth treatment. Eight to ten treatments are generally sufficient. For the first two or three treatments, combine a local point with a distal point.

Another child may have a tendency toward heat in the system, perhaps due to a history of accumulation disorder. In this case, the immunization will produce a tendency toward the hot type of otitis media.

These children are not especially deficient in energy; it's just that the whole system is clogged up with thick phlegm. It is possible for these children to throw off the lingering pathogenic factor themselves through one of the childhood illnesses. For example, during an attack of whooping cough the thick phlegm associated with the lingering pathogenic factor may be expelled from the body. However, most children are immunized against this disease, and they need the help of acupuncture, herbs, or homeopathy to expel any lingering pathogenic factor.

### **Spleen qi deficiency plus lingering pathogenic factor**

The Spleen qi becomes depleted for the reason here there is a lingering pathogenic factor. This is commonly caused by immunizations or the frequent use of antibiotics. The symptoms are worse when the child is:

- ◆ Exhausted
- ◆ pushed too hard at school
- ◆ under emotional stress

As with the previously described pattern of lingering pathogenic factor, this disorder can present as either hot or cold, depending on the child, the diet, and the nature of the lingering pathogenic factor. The pathological process is the same as described above, except that there is the added problem of the qi being weak. This means that these children do not have sufficient qi to throw off the lingering pathogenic factor. In them, the phlegm is less a problem than the qi deficiency. Since the whole qi system is weak, the child is much more prone to invasion from external pathogenic factors<sup>7</sup> which usually attack the ear. In addition, recurrent coughs and colds are a feature of this type of otitis media.

### Liver and Kidney yin deficiency

- ◆ high fever depleting the yin

The liver and Kidney yin are deficient, which deprives the ear of the nourishment from the essence. With the introduction of antibiotics this is rarely seen nowadays, but it is becoming more common in older children who:

- ◆ work on computers
- ◆ watch video games and television all day

These activities seem to deplete the Kidney yin. Such children also tend to be slightly hyperactive.

If it is hot, you will see:

- ◆ irritability and restlessness
- ◆ red face, or red cheeks

*Pulse:* rapid

### Liver and Kidney yin defidency

- ◆ dizziness
- ◆ sticky fluid on the eardrum
- ◆ possibly a sore back
- ◆ tends to be hyperactive in the evening
- ◆ may have history of febrile disease
- ◆ possibly watches a lot of television and/or video games
- ◆ possibly red cheeks

Tongue body: red

*Pulse:* fine, rapid

***Treatment prindple:*** tonify Liver and Kidney yin

## TREATMENT

The treatment of chronic otitis media is aimed at regulating the qi of the channels around the ear. In order to do so successfully, you must resolve the lingering pathogenic factor. So, although some of the points may be the same as those used in treating acute otitis media, you must add others to treat the underlying condition.

Distal points are more commonly used than local points, except when the qi in the ear has been severely depleted. You must then use local points for one or two treatments to draw qi to the area.

## Main points

TB 5 ( <i>wai guan</i> )	Expels wind and regulates the channel
TB 17 ( <i>yi feng</i> )	Expels wind and benefits the ear
G41 ( <i>zu lin qi</i> )	Regulates the Liver and Gallbladder
G20 ( <i>feng chi</i> )	Expels wind and regulates the Liver and Gallbladder
G2 ( <i>ting hui</i> )	Local point for otitis media

## Lingering pathogenic factor

Use the main points, plus:

<i>bai lao</i> (M-HN-30)	Clears the lingering pathogenic factor (point located 2 units superior to GV-14 ( <i>da zhui</i> ) and 1 unit lateral to the spine)
B-18 ( <i>gan shu</i> )	Regulates the Liver and Gallbladder, and moves the blood and qi
B-20 ( <i>pi shu</i> )	Regulates the Spleen, moves the blood and qi, and transforms the dampness

- ♦ **Method:** either needling or moxibustion may be used at these points. Local points are important if the qi in the ear is very weak, which occurs with a long-standing lingering pathogenic factor.
- ♦ **Prognosis:** clearing the body completely of the pathogenic factor may take ten to twenty treatments. After the first few treatments there are often signs of catarrh, such as cough and nasal discharge, as the thick, clogged phlegm that has accumulated in the channels begins to soften. This process can be considerably accelerated by the use of herbs such as poke root (*Phytolacca decandra*) and blue flag (*Iris versicolor*), but there is no substitute for acupuncture in bringing the qi to the ears. To effect a

complete cure, two or three months of weekly treatment are usually required, even if herbs and acupuncture are combined. More frequent treatment will not significantly hasten the cure, for it simply takes time for this kind of change to take place.

### Spleen qi deficiency plus lingering pathogenic factor

Local points are often needed here in the beginning stages of treatment to bring the qi to the ears. Points to use include:

TB17 ( <i>yi feng</i> )	Regulates qi in the ears
G2 ( <i>ting hui</i> )	Regulates qi in the ears

In addition, add the following governing (*shu*) points on the back to tonify the qi so that the lingering pathogenic factor can be expelled:

B18 ( <i>gan shu</i> )	Tonifies Liver and Spleen
B20 ( <i>pi shu</i> )	Tonifies Liver and Spleen

Additional points that tonify the qi and resolve dampness include:

S36 ( <i>zu san li</i> )	Tonifies qi
Sp6 ( <i>san yin jiao</i> )	Tonifies qi and resolves dampness
CV12 ( <i>zhong wan</i> )	Tonifies the Spleen

- ◆ **Method:** moxibustion is useful at the governing (*shu*) points and at CV-12 (*zhong wan*)
- ◆ **Prognosis:** treat two to three times a week, if possible; if you cannot, then once a week will still produce good results, but obviously takes longer. Fifteen-plus treatments are usually required, depending on the strength of the child. As you treat, the child will get stronger and start to expel the phlegm associated with the lingering pathogenic factor. This is a good sign!

### Liver and Kidney yin deficiency

Acupuncture is not really the treatment of choice here. You can do moxibustion at B-23 (*shen shu*) as well as massage along the Triple Burner channel in the direction of the ear.

Once the Kidney energy is stronger, you will be able to use needles. Use the main

points, plus:

B-18 (*gan shu*)

B-23 (*shen shu*)      Tonifies the Liver and Kidney yin

Liv-3 (*tai chong*)

K-3 (*tai xi*)

- ♦ **Prognosis:** this condition is uncommon in children except after febrile diseases, when a few treatments will suffice provided that the child is eating normally. If the condition occurs without a history of febrile disease, it is essential to ascertain the cause of the deficient yin. If the child is addicted to computer games or some other forin of stimulation, it may be difficult to cure.

## NOTES

Acute attacks of otitis media are often treated with antibiotics. If such treatments are given repeatedly, they can lead to a buildup of dampness. After an acute attack of otitis media has been treated successfully (with either acupuncture or antibiotics), it is a good idea to give further treatments to resolve the remaining dampness.

- ♦ In all cases of otitis media, the patient should avoid red meat and spicy, fried, or other warming foods. If dampness is present, the patient should also avoid eggs, cheese, milk, peanuts, and sugar.
- ♦ During the treatment of chronic otitis media, tonsillitis sometimes develops, as the toxins drain away from the ear into the throat. This is usually short-lived and is an indication that the treatment is working.
- ♦ If attacks of acute otitis seem to recur every month, one may suspect a lingering pathogenic factor from a pertussis immunization.

## HAY FEVER

### INTRODUCTION

The material in this chapter is based on our experience and observations. It therefore reflects what we have seen in the clinic and the way that we view hay fever. It is by no means a definitive account!

### WHAT DO WE MEAN BY HAY FEVER?

In the long-distant past, hay fever was a real fever that people got when they were making hay or were near others who were doing so. Over the years the meaning has changed, so that now it has come to mean allergic rhinitis that occurs in late spring and early summer. At least, that is the way we understand it, and that is the problem we will be discussing. Typical symptoms include:

- ◆ nasal congestion and irritation, with discharge
- ◆ sneezing
- ◆ red and watery eyes

Often there is also:

- ◆ difficulty in concentrating
- ◆ discharge of thick mucus
- ◆ headache
- ◆ photophobia

The onset is seasonal and is usually identified with pollen of various sorts, some people being more upset by grass pollens and others more by flowers and trees. For some people the sheer joy of seeing an old fashioned meadow full of flowers is replaced by the sheer misery of hay fever. For some the effect is so violent that they have to stay indoors for a few week. Others have adopted drastic solutions like wearing a sort of space suit when they are outside, with a perspex pollen-free dome around their head!

### CONVENTIONAL APPROACH

In conventional Western medicine, hay fever is seen as an allergic histamine response to foreign bodies which attack the lining of the nasal cavity. The emphasis in this theory is on the external attacking agent, identifying the pollen as an outside invading force.

There are two types by treatments: desensitization treatments and antihistamines. They both have draw-backs. The desensitizing treatment quite variable in its results and can lead to anaphylactic shock; antihistamines make patients feel drowsy (see case history below). This, however, is all that is available, and many people would rather put up with the drowsiness than the intense irritation of hay fever.

## TRADITIONAL CHINESE MEDICAL APPROACH

The emphasis in traditional Chinese medicine is on internal factors. Although the hay fever appears at a certain time of year, it is related more to the time of the year than to the pollen which happens to be around at that time. In fact, the time of onset-both the time of year and the age of the children who most likely develop hay fever-provide the key to its etiology and pathogenesis.

### Time of year

The time of year when people develop hay fever, late spring to early summer, is characterized by a change in temperature from cold to hot. The hottest days have not yet been reached, and the average temperature is still increasing. In this book, we have encountered seasonal problems before in discussing spring fevers, which are often a manifestation of latent heat. Latent heat is more of a problem when there is a Liver imbalance, leading to difficulty in adapting to changes in the weather. The onset of hay fever is also a manifestation of some kind of latent heat, either simple seasonal latent heat or heat from a long-standing lingering pathogenic factor.

### Time of life

Hay fever is rarely seen in children under seven years of age, and this is an important clue, for this is the age when the emotions develop and become controllable. This is therefore the age when the stagnation of Liver qi first appears. Before this age there is little in the way of restraint of emotions, and so the incidence of hay fever is very small. In our clinic we have seen hay fever only once in a child under seven years of age, and that was a five-year-old child who already had nasal discharge. The discharge was made slightly worse when the pollen count was extremely high.

This relationship between hay fever and the Liver is confirmed by the Chinese medical texts, which mention damp-heat in the Liver and Gallbladder as one of the patterns. It is also confirmed by observing people with hay fever. Above all, one gets from them a feeling of irritation and frustration. Something, or someone (other than simply pollen), is obviously “getting up their nose”!

## PATTERNS & SYMPTQMS

It must be understood that there is *a/ways* some heat accumulating in the nose and that there is *a/ways* some stagnation of Liver qi from repressed emotions. With that in mind, one can distinguish the following patterns:

- ◆ Liver yang rising
- ◆ lingering pathogenic factor
- ◆ Lung and Spleen qi deficiency (also hyperactive Spleen qi deficiency)

Each of these patterns may or may not be accompanied by phlegm-dampness (in this respect, it is similar to otitis media). Some adults also have the pattern of Lung and Kidney yin deficiency. This may also be a pattern for children, but we have not seen it in the clinic.

Apart from the general symptom of hay fever, one can distinguish the symptoms according to the patterns.

### Liver yang rising

There are only two key symptoms here:

- ◆ frequently flies into a rage
- ◆ facial color may be red or white, but becomes purple when in a rage

*Pulse: wiry*

In an adult you would expect to see a purple tongue with a yellow coating, but you are unlikely to see this in a child. This pattern is often seen in redheads.

### Lingering pathogenic factor

Again, there are really not many distinguishing features. The foflowing will (nearly) always be seen:

- ◆ gray face
- ◆ swollen glands
- ◆ vacant look in eyes
- ◆ greasy skin
- ◆ may be rather aggressive



- ♦ sudden collapse of energy

*Pulse:* possibly slippery

## Lung and Spleen qi deficiency

This is the familiar pattern of:

- ♦ white face
- ♦ droopy, cannot stand up straight
- ♦ probably poor appetite

*Pulse:* weak

## TREATMENT

### Main points

The following prescription is good for all types of hay fever. You may want to modify it for each patient, but it is a good starting point.

L7 ( <i>lie que</i> )	Tonifies the Lungs, clears phlegm, and opens the nose
LI4 ( <i>he gu</i> )	Benefits the nose and face
LI20 ( <i>ying xiang</i> )	Local point for nose and tonifies the Lungs

On the whole, children dislike being needled at LI-20 (*ying xiang*). Some may put up with it, as being better than suffering from hay fever, but others will simply freak out. An alternative point (near the nose, rather than local) is:

GV-23 (*shang xing*) Opens the nose

### Additional points

There are two other points of special use:

G39 ( <i>xuon zhong</i> )	Benefits the nose and brings down Liver yang
Liv3 ( <i>tai chong</i> )	Regulates the Liver

These points are likely to be the main ones you will use during the hay fever season, when the main thrust of treatment is to relieve the symptoms. If you are treating before the season, then you will probably want to give more emphasis to the underlying patterns.

### WHEN TO TREAT

You can, of course, wait until the season starts and the child is streaming from the nose. Some families prefer to do it this way, especially if they are suspicious of alternative medicine in general and acupuncture in particular. Why treat for something that might not happen? they ask.

## MYOPIA

### INTRODUCTION

Many children who are now wearing glasses can be cured of their myopia (shortsightedness). Research conducted at the Guang An Men Hospital in Beijing has recently led to the development of methods which are seventy percent effective in curing myopia, provided that treatment is started before the age of fourteen, and that good reading and writing habits are adopted.

The most common cause of myopia is that the lens which focuses the light on the retina is too strong. In normal eyes the strength of the lens is adjusted by the muscles surrounding the eye, and during the early years of life (up to about five years) the child learns how to focus automatically. Recent research has shown that this really is a learned response, and that a large number of children who have difficulty focusing at the age of three have resolved the problem by the age of five. This means that if a child has mild shortsightedness at the age of three, the best treatment is eye exercises of one sort or another.

Eye exercises are useful in correcting mild shortsightedness. If there is a hereditary component of more than two or three dioptres,\* there is little chance that exercises will help.

\*A dioptre is a unit used in optics to measure the strength of a lens. In ophthalmology it has a slightly different meaning: it measures the amount of the imperfection of the lens of the eye. For example, +1 dioptre would be slightly shortsighted, +2 a bit more shortsighted. To correct short sight of +2 dioptres, a concave lens would be prescribed of -2 dioptres. The mathematical definition of a dioptre is  $1 \text{ dioptre} = 1/\text{focal length}$ , where the focal length is in metres. To give you practical idea of strong these lenses are, a magnifying glass of 1 dioptre will focus at 1 metre (about a yard), while a lens of 4 dioptres will focus at 25cms (about 10 inches).

### LATER ONSET

The treatments set forth below are effective for later onset of shortsightedness. They are particularly helpful in children whose eyesight was good, but has become poor. This can happen at any time between the ages of about three and fourteen. There are a number of reasons for this, which can be conveniently divided between the physical and the emotional.

### Physical reasons for myopia

From the perspective of traditional Chinese medicine, the basic reason for onset of myopia is that something occurs which reduces the normal flow of qi to the eyes. This can be:

- ◆ any illness that weakens the qi
- ◆ lingering pathogenic factor (from illness or immunization)
- ◆ exhaustion from overwork
- ◆ exhaustion from rapid growth

### Emotional reasons for myopia

- ◆ changing schools
- ◆ unsuitable school
- ◆ bullying
- ◆ dislike of teacher
- ◆ victimization

Any of these factors can cause the child to withdraw into itself. Shortsightedness is a convenient way to do this. If you cannot see what is going on, then you are to a certain measure protected from emotional hurt.

☞ ***The onset of shortsightedness is a symptom that should be taken seriously. It is always a sign that something is upsetting the child quite badly.***

### TREATMENT

Before starting treatment, the child should be examined by an optometrist or ophthalmologist to confirm that nothing is seriously wrong, such as glaucoma. Also, treatment must be started before the age of fourteen. After this age it is less successful.

### TREAT THE BODY

The first thing is to treat the overall body qi. If there is general qi deficiency, then the child simply does not have the energy to do the necessary exercises well. Likewise, if there is great heat, the child will be much too restless to do the exercises.

## TREAT THE SYMPTOM

The principle of treatment is to bring qi to the eyes to help them function better. Once the child can see well, it starts to use its eyes more, and this in itself stimulates the flow of energy to the eyes.

There are four basic treatment methods: massage, improvement of posture, eye exercises, and electric plum blossom needle therapy.

## TRADITIONAL CHINESE MASSAGE

A simple eye massage routine is used throughout China for the relief of myopia in school children, and has the effect of directing qi to the eyes. Although the massage is gentle, it is often sufficient to resolve the problem by itself, without any other therapy. In severe cases, however, massage should be supplemented with plum blossom needling (see below). The following techniques should be performed by the child three times a day.

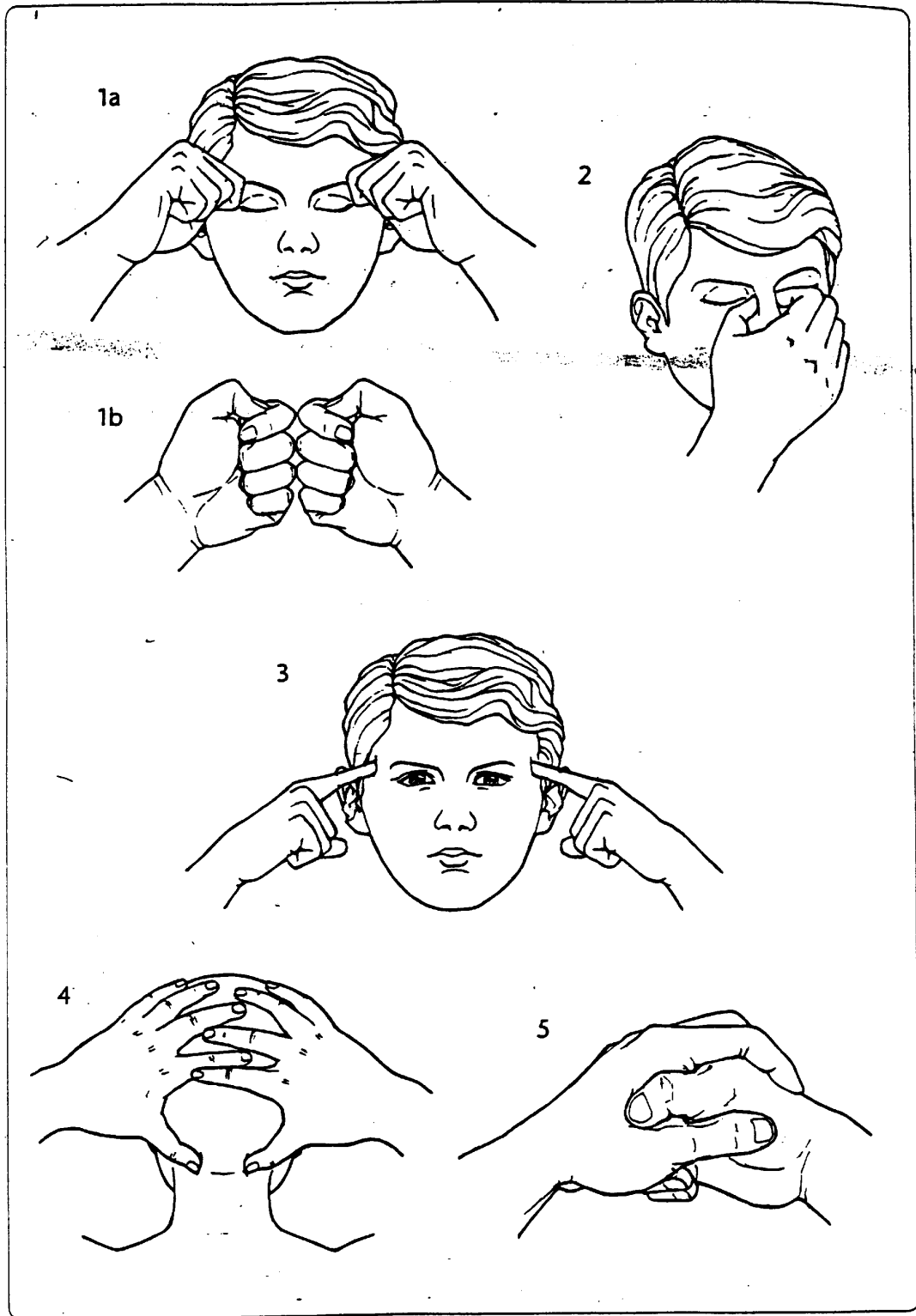
- ◆ Make a fist above the eyes, with the thumb bent at its middle joint. Use this joint to massage around the top of the orbit (just below the eyebrows) thirty to fifty times.
- ◆ Pinch, press, and vibrate R-1 (*jing ming*) with the index finger and thumb about two-hundred times.
- ◆ Massage *tai yang* (M-HN-9). The index fingers should be pressed firmly into these points, and rotated gently about fifty times.
- ◆ Massage G-20 (*feng chi*). The thumbs should be pressed in firmly on both sides, and rotated about fifty times. This point is often sore, but should be massaged until the soreness goes away.
- ◆ Massage LI-4 (*he gu*). The thumb of the opposite hand is pressed in and vibrated or rotated about fifty times. Repeat on the other hand.

The exercises should be performed three times a day, and each session should last between five to ten minutes. They should be done by the children, with the parents giving encouragement, although in younger children the massage may be performed by the parents. There is usually no problem in doing the exercises for the first week, but after that the children often complain and resist doing the exercises. At this stage, parents must be encouraged to persist in finding ways of persuading their children to continue. It may help the child if the parents do the exercises along with the child. All this can sometimes seem like too much work to overpressed parents, but if it saves the child from needing glasses, it is certainly

worth it.

Immediately before starting the exercises, test the child's eye, and then test them again immediately afterwards. There should be some significant improvement right away. This is likely to fade over the next few hours, but if the exercises are done three times a day, there should be some lasting improvement after two weeks. It is usually necessary to continue the exercises for six to eight weeks. This may seem like a long time, but it is a worthwhile investment in the future. It may be helpful to play music during the exercises.

*Figure 2-3 Myopia*





### Improvement of posture

Poor eyesight may be caused by unnecessary tension and sitting badly when reading and writing. Make sure that:

- ♦ the child sits up straight when reading and writing
- ♦ books are held at the correct distance.
- ♦ the child is not strained when reading and writing

If the child has acquired bad habits in reading and writing, these can often be helped by the Alexander technique.

### Eye exercises

Eye exercises are used to encourage the restoration of normal function to the eyes. The exercises used in China are very similar to those devised by W. H. Bates, which are described in his book *Better Eyesight without Glasses*.

### Electric plum blossom needle therapy

This treatment was developed at the Guang An Men Hospital in Beijing. In the treatment of myopia, the plum blossom needle is energized by a small electric current, instead of by manual tapping. This makes the stimulation more controllable, and reduces the pain. Basically, the stimulator is set up in a manner similar to that for point detection, with the child holding the ground lead in his or her hand. For plum blossom needles with bone or plastic handles, a wire is wound around the needles and then connected to the stimulator. If the handle is made of metal, the handle itself can be connected to the stimulator, with the part held by the practitioner insulated. (For obvious reasons, it is important that the practitioner not touch any part of the device that is electrically active.)

The needle is rested on the point and the electrical intensity gradually turned up from zero until the child feels the characteristic deqi sensation (soreness, numbness, distension). It is then held for approximately twenty seconds. The intensity is turned down all the way between points. This is especially important when a point near the eye is stimulated subsequent to a point on the limbs, as the periorbital points are much more sensitive. The amount of stimulation required to obtain qi on the limbs will cause pain if used around the eye.

### Points

B-2 (zan zhu)  
yu yao (M-HN-6)

TB-23 (si zhu kong)  
G-20 (feng chi)  
LI-4 (he gu)

In China, treatment is generally given in courses. Each course consists of treatment once daily for ten days, with a rest of five days before beginning the next course. One to three courses are usually sufficient in mild cases. As with the massage exercises, doing a simple eye test before and after treatment will be a source of encouragement to the child and his parents.

### WHEN TO USE PLUM BLOSSOM

Some children take very well to doing the eye exercises. Even quite young children take pride in doing them, and will not let anything get in the way. Others are monstrously lazy, and need cajoling and persuading to do anything that will help their eyesight. For these children, regular treatment, and the status gained by regular visits to a practitioner, can be helpful in giving them the impetus to do at least *some* exercises.

### ADVICE

- ◆ Always have good light when reading or doing close work. Using the eyes a lot in poor light causes eye strain.
- ◆ Don't watch television or do computer games. Both are disastrous for weak eyes, not only due to the flickering, blurred images, but also to the level of tension that results.  
Sit in a good position when doing close work. Reading or writing in a cramped position inhibits the flow of qi to the eyes, and is likely to lead to eyestrain.
- ◆ If the child is wearing glasses all the time, spend some time each day without them.
- ◆ Also, gradually *reduce* the strength of the lenses, rather than increasing it.

## APPENDIX A - TABLE OF HOT AND COLD FOODS

This table shows the heating and cooling effects of some common foods. Patients who suffer from a cold condition should eat predominantly warm foods and vice versa. The heating and cooling effects of foods can be balanced within one meal, to a certain extent. For example, melon (cold) can be combined with ginger (hot) to provide a neutral effect. Milk (cool) can be simmered (warmed) with onion (warm) to provide a neutral drink that reduces the amount of phlegm produced. The table is provided only as a guide, and some people will react differently. For example, Chinese people find that lamb is extremely hot and brings out rashes in many, while for most Western people, lamb is between warm and hot.

### COLD

Apple	Banana	Celery	Cottage cheese
Cucumber	Grapefruit	Lettuce	Marrow
Melon	Mussels	Pear	Yoghurt

### COOL

Aubergine	Barley	Calf's liver	Cow's milk
Crab	Cress	Green lentils	Lamb's liver
Lemon	Mung beans	Pork	Soft cheeses
Soused herring	Spinach	Steamed foods	Tea (green)
Tofu (bean curd)	Tomatoes (raw)	White wine	

### NEUTRAL

Broad beans	Brown rice	Coconut	Corn on the cob
Dates	Eggs	Grapes	Herring
Mushrooms	Peas	Potatoes	Oats
Plums	Runner beans	Orange	Strawberries
Veal	Wheat	White cabbage	

### WARM

Blackberry (cooked)	Carrots	Chocolate	Chicken
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## ACUPUNCTUE CONTINUING EDUCAITON

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Cocoa	Coffee	Figs	Goat's milk
Greens (brassica)	Mint tea	Onion	Parsnips
Peanuts	Pig's liver	Pumpkin	Radish
Red beans	Red wine	Roasted food	Sesame seeds
Smoked food	Tea (Indian)	Tomatoes (cooked)	Turnips
Venison			

### HOT

Almonds	Beets	Brown lentils	Brussel sprouts
Cayenne pepper	Cinnamon	Cloves	Eels
Garlic	Ginger	Goat's meat	Lamb
Peach	Pepper		

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