

Foreword: This is a section of a forthcoming book; it replaces a previous essay, but the essay form has been retained so that it can stand alone.

Synopsis: this essay discusses a pair of terms that can be translated as 'flow' and 'counter-flow', or 'downstream' and 'upstream', and have varied meanings according to context. They are not usually understood to be primary treatment principles. This essay will suggest that as primary treatment principles they can help us understand the broad range of treatment techniques found in modern practice, and reconcile the apparent contradictions between the modern approaches. It will also be shown that the definitions of the terms is different between older and later layers of text, and these different definitions explain apparent inconsistency in the classic texts. It will also be shown that the change of definition also represents a shift in emphasis of treatment from classical to mediaeval and modern times.

8-6 Nì and Cóng: Counter-flow and flow

This is a lengthy discussion because it is putting forward a pair of terms as the basic principles of treatment that do not appear to be generally recognized as such in modern times. There are a number of characters that will be discussed and that could have been the title of this section. However, 逆 [nì] and 從 [cóng] are introduced in the first two chapters of the Sù Wèn as important basic principles. We will see that they form the title of a Chapter 55 of the Líng Shū and they are introduced in Sù Wèn Chapter 65 explicitly as primary principles of treatment.

The characters 逆 [nì] and 從 [cóng] appear quite frequently in the classics in different contexts and defined in relation to several other pairs of terms. In some texts, such as Líng Shū Chapter 29, we find a variation 逆 [nì] and 順 [shùn] - the latter character suggests the literal meaning of the pair of characters as 'upstream' and 'downstream' - I am using 'counter-flow' and 'flow' as the most generic translation option. These characters can refer to the flow of Qì in the channels, the direction of pathologies, favourable and un-favourable conditions, and even compliance and non-compliance of the patient; i.e. with medical advice. We often find that Chinese characters have more than one meaning according to context, but this rather long list of meanings may add another explanation as to why the use of these terms specifically in relation to treatment principles has been somewhat overlooked. Whether it is 逆 [nì] and 從 [cóng] or 逆 [nì] and 順 [shùn] the meaning is very similar.

The Sù Wèn Chapter One and Two introduce these characters with the meaning of contrariness and opposition to, or following and complying with, the natural order particularly of the seasons. For example in Chapter 2:

從陰陽則生，逆之則死；從之則治，逆之則亂。

Comply [從] (with) Yīn (and) Yáng normally life, contrary [逆] (to) them it normally death, comply (with) them normally order (treat, govern), contrary (to) them normally disorder.

逆	nì	to meet / to welcome / to oppose / to go against / beforehand / in advance / inverse / converse / adverse / contrary
從	cóng	from / by / whence / through / to undertake / to manage / to dedicate oneself to / to attend to / to engage in / to follow / to accord with/ yield to / to listen to / to comply with / to obey / a follower / an attendant
順	shùn	downstream / flow / to follow / to submit to / obedient / to cause to surrender / to fall in with / in the same direction as / with / along / agreeable / favorable / comfortable / happy / to arrange / to put in order / convenient / smooth / to take the opportunity to

As far as I am aware these characters are not given in modern books as primary treatment principles. The most commonly mentioned modern treatment principles are 攻 [gōng: attack] and 扶 [fú: support] and needle techniques of 瀉 [xiè: drain] and 補 [bǔ: supplement]. We shall see that the latter pairs of terms are by no means the primary treatment principles and techniques mentioned in the classics. This discussion also addresses the origin of the minimalist, non-directive style of treatment found in Japanese tradition generally, and most commonly in the approach to Five Elements taught by J. R. Worsley.¹ Indeed the significance of these terms may have struck me more strongly because of my background in Five Element acupuncture.

The texts that refer to 逆 [nì] and 從 [cóng] are not all neatly grouped together, and indeed the characters are used in several different contexts, and so these ideas are easily overlooked.² The following passage that seems to introduce these terms was also quoted in the previous discussion of 本 [běn: root, stem] and 標 [biāo: branch, tip] – in the previous discussion we found that the alternate definitions of these characters ‘root and branch’ or ‘stem and tip’, fit their range of meanings. Treatment of the Constitutional Factor in Five Element approach could be said to be the root treatment, compared with treatment of the manifestations (tip). Most commonly in TCM these terms represent the primary and secondary conditions):

黃帝問曰：病有標本，刺有逆從奈何？

Huang Di asked: disease has tip and root, treatment has counter-flow [逆 nì] and flow [從 cóng] can you explain this (these)?

According to Unschuld the terms 逆 [nì] and 從 [cóng] have been explained by Ma Shi as opposing or complying with the principle of root and branch.

Opposition [逆] this is when the disease is at the root and one tries to stop it at the tip, compliance [從], this is when the disease is at the root and one tries to stop it at the root... (2011, 159)

¹ We generally find this coupled with the Nán Jīng approach, but it is of note that these basic principles are found in the Sù Wèn and Líng Shū.

² The main arguments against this is that could be taking quotes out of context, I think that the sheer quantity of material seems to present a convincing argument.

When one views the passage in Chapter 65 in isolation this interpretation of the terms as subordinate to the concept of root and branch seems reasonable, and accepting this explanation of a respected authority could be one explanation for why the importance of these terms is not well recognized.³ However, this interpretation of the characters as general terms is hard to sustain because we will see that the characters often appear without the context of ‘root and branch’.

Another passage in Chapter 65 clarifies the meaning. Later we will find that in Chapter 74 the terms are redefined, and if one is trying to fit the terms in Chapter 65 with the definition in Chapter 74 there is an understandable confusion. Sù Wèn Chapter 65 says:

治反爲逆，治得爲從。

Treat opposing [反] acts as counter-flow [逆], treat concordant [得] acts as flow [從].

The character 反 [fǎn] as opposing seems to clarify the direct method as one that confronts the condition, 得 [děi] has the sense of agreement and harmony and obtaining and is perhaps coming closer to the modern understanding of supplementation, but not quite synonymous. ‘Harmonizing’ is also not as unidirectional a term as is ‘opposing’.

反	fǎn	contrary / to return (something) / to turn back / to retreat / to introspect / to retrospect / to rebel / rebellion / to revolt / to infer
得	děi	to get / to obtain / to acquire / to gain / to attain / to effect / to win / complacent / agreement / harmony / can / may / to be able to / All right ! 或

We can summarize these concepts in the following table.

Primary terms		Translation	Secondary terms		Translation
逆	nì	Contrary, upstream, counter-flow, direct	反	fǎn	oppose, confront,
從	cóng	Comply, downstream, flow, indirect	得	děi	accord, comply,

Henry Lu translates 逆 [nì] and 從 [cóng] as found in Chapter 65 of the Sù Wèn as ‘direct’ and ‘indirect’.

It is also of note that in a paragraph on the relative approaches of upper and lower practitioners it concludes:

³ This is not the only example that seems to suggest that we should not necessarily accept all historical commentators uncritically

故曰：上工治未病，不治已病，此之謂也。

Therefore said: upper practitioner treat not diseased, not treat already diseased, this it said {also}.

One would have to say that when it comes to treating what is not (yet) diseased the *Nèi Jīng* is tantalizing us because it does not appear to give much practical help because most of the symptoms and conditions described are pathologies – but that is another discussion. Again I would make the point that I am ‘connecting the dots’ of these various passages because I recognize in them the philosophy of the Five Element approach, most of the existing translators do not make these connections.

We can further understand these principles as putting the *Dàoist* philosophical idea of ‘non-action’ or ‘non-striving’ into a practical application. As it says in Chapter 5 of the *Sù Wèn*:

是以聖人爲無爲之事，

Therefore the Sages’ action [爲] is ‘non-action’ [無爲] yet performs their work,

Even if it is not apparent yet I believe it will be so by the end of this discussion that it is only a very small step to think of direct and indirect as conveying what in modern psychotherapy is described as ‘directive’ and ‘non-directive’ treatment. This is not surprising because there are many ideas of Chinese medicine might seem to find resonance with Western psychotherapy. (In a previous discussion we talked of the transmission or progression of disease, and the idea that ‘cure is a process not an event’ – ideas found in psychotherapy but not so often recognized in modern biomedicine).

There seems little doubt that the directive and non-directive treatment principles are the application of *Dàoist* philosophy. We have discussed in another section that even though many practitioners may espouse *Dàoist* principles, the philosophy of the *Dào Dé Jīng* (*Tao Te Ching*) can seem too idealistic to apply in the actual practice of Chinese medicine, which is often very pragmatic, even formulaic. Indeed the first chapter of the *Dào Dé Jīng* suggests that the world of the ideal and the actual are somewhat at odds:

故常無欲以觀其妙。
常有欲以觀其徼。

Therefore, normally without-desire accordingly observe (the) mystery
Normally possess desire accordingly observe the bounded (manifestations).

A great deal of material in Chinese medicine that is described as *Dàoist* is more like what is represented in religious *Dàoism*.⁴ The religious practice that is called *Dàoist* can seem quite

⁴ It is pointed out that in ancient times there may not have been a specific group of people who identified as or were identified by others as *Daoists*. I use the term to refer to the body of ideas. Similarly the distinction of religious and

contradictory to the principles of more philosophical Daoism, just as the actual practice of Chinese medicine can be very technical and mechanical and seems to pay no more than lip service to the philosophy.⁵ Similarly it is common for people to say that the Sù Wèn in particular is philosophical, and by implication not practical in use. But the ideas we are discussing here seem to bring the philosophy and practice together in a more satisfying way than the figure/ground shift suggested by the Dào Dé Jīng. (In another discussion we also find that some modern authors downplay the Dàoist principles).

We seem to find an introduction to 逆 [nì] and 從 [cóng] specifically as treatment principles in Líng Shū Chapter 29. The Chapter is titled profoundly as 師傳第二十九 #29 Master's Transmission (or Teachings from the Masters).⁶ Huang Di asks about concealed teachings handed down by word of mouth.⁷ Qi Bo explanation makes much use of poetry and word play that of course has to be lost in translation to some extent. The character 治 [zhì] translates as 'treatment' and 'governing', the character appears in the Nèi Jīng Chapter 2 in the former sense:

治未亂 treat (the) not disordered

And in the Dào Dé Jīng; e.g. Chapter 64 with the latter.

治之於未亂 govern it with regard (the) not disordered

It contains the water radical and conveys the idea of harnessing water. Dào Dé Jīng Chapter 3:

是以聖人之治, Correct accordingly sage he govern (rule),

治	zhì	control / to govern / to manage / to rule / to regulate / to harness (a river) / the seat of the local government / to treat (a disease) / to cure / to study / to research / to punish / peaceful and orderly / a Chinese family name
---	-----	--

The characters 逆 [nì] and 順 [shùn] with their literal meaning in relation to water of 'upstream and counter-flow' and 'downstream or flow' fit nicely with the water metaphor for two approaches to treatment. As Henry Lu says "It is impossible to govern smoothly by the reverse tactics, because only smooth tactics will entitle us to govern smoothly..." or Van Nghi "only *favourable* procedure (shun) is to be followed, not *contrary* (Ni) procedure". It is of note that the translations of these terms by Van Nghi and Henry Lu is not consistent between Chapter 65 of Sù Wèn and Chapter 29 of the Líng Shū, and the dual meaning of govern and treat is not

philosophical Daoism is considered to have not existed in practice. I use the terms to describe aspects of Daoist ideas even if there were no actual distinction historically.

⁵ Some of the more elaborate numerological and cosmological based ideas in the classics are arguably the weakest parts of the whole corpus

⁶ These titles and introductions seem to be often treated as window dressing (omitted from the Systematic Classic and some translations, and yet they seem to be important

⁷ The preceding Chapter is titled Oral Questions, but in this case the majority of the chapter seems to be very anti-climactic in relation to the title

apparent, and so a direct relation between these sections of text (and the medical and philosophical) is not brought out, and one suspects that the connection is not being made.⁸

As mentioned at the beginning of this chapter, 逆 [nì] and 從 [cóng] or 順 [shùn] are not the treatment principles given in modern texts. The treatment principles that are commonly used in modern theory and practice are: 攻 [gōng: attack] and 扶 [fú: support]: i.e. ‘attack’ the pathogenic-Qì, and ‘support’ the true Qì.

攻	gōng	to attack / to raid / to assault / to accuse / to charge / to assail / to criticize / to rebuke / to work at / to apply oneself to / to study
扶	fú	to support / to prop up / to aid / to help / to shield / to shelter / to harbor / to protect / to defend / to lean upon

From these treatment principles the treatment techniques of Supplement [補 bǔ] and Drain [瀉 xiè] naturally follow.⁹

瀉	xiè	to drain / water flowing down / diarrhea / to have loose bowels
補	bǔ	to repair / to patch / to mend / to fill / to add to / to supplement / to supply / addenda / supplements / replenishments / complements / nutritious / nutrient / rich foods / tonics / to nourish / to make up / to help (finance, etc.) / to subsidize / to appoint to or fill a post / to be of help / benefit / use

Joseph Needham addresses these important principles:

It is good to begin with an interesting paradox. In Section (b), we drew attention to a basic dichotomy in the history of medical thought: aid to the healing and resisting power of the body, as opposed to direct attacks on invading influences. Traditional-Chinese and modern-Western medicine differ fundamentally in the relative value given to these conceptions. In Europe, especially since the time of Louis Pasteur and the beginnings of bacteriology, the notion of the direct attack on the pathogen has tended to dominate, culminating in the sulpha drugs and the antibiotics. Reliance on the *vis medicatrix naturae*, the natural healing power of the body, was the mainstay of occidental therapy before modern times. It could act not only against invasive micro-organisms or other parasites entering by infection or contagion, but also against malfunctions of the body's own organic machinery. This spontaneous resistance became less focal in medicine as time has passed. Chinese medicine shared both therapeutic strategies, which it called *kung*, ‘attack’, and *pu*, ‘replenishment’. A physician might choose to repulse malign or sinister *chhi* (*hsieh chhi*) from the environment, infective or meteorological.² Some of

⁸ This section of Chapter 29 is incorporated into Chapter 70 of the Systematic Classic in relation to the discussion of root and branch – which put it in the context of diagnosis. But curiously it displaces the section of direct and indirect treatment from SW Chapter 65 which is understandably moved to the volume pertaining to treatment, which does indirectly suggest the relation of the two passages.

⁹ The terms sedate and disperse although simply variant translations do have differing implications

these were the essential pneumata (*ching chhi*) of harmful and venomous animals left behind on food afterwards eaten by man.³ Therapeutic measures which counteracted these invaders were termed ‘expelling the bane’ (*chhiu hsieh*) or ‘dispersing the poison’ (*chieh tu*). On the other hand, the Taoist conception of *yang shêng* or ‘nourishing the vitality’ amounted to strengthening the natural healing power of the body. Just as care of the patient, adequate nursing through the crisis, and administration of drugs in innumerable combinations attacked the pathogenic *chhi*, acupuncture and moxa gave the body more defensive strength to resist and throw off pathological agents.

(Needham 114-115)

Although Needham discussed this in relation to the more common terms attack [攻 *gōng*] and support [扶 *fú*] I think we can see that 逆 [*nì*] and 從 [*cóng*] seem to convey the basic philosophy more clearly. Unschuld touches upon this same idea and makes the military metaphor explicit:

To attack and enemy is a military metaphor explicitly associated in the *Sù Wèn* not with piercing but with drug therapy...

(Unschuld 2003, 284)

We will return to this passage in a later discussion on pharmaceuticals. It is not uncommon for Chinese medicine practitioners to be somewhat vague on the concept of *vis medicatrix naturae*, or to assume that acupuncture is intrinsically *vitalistic* – because it is natural.¹⁰ In relation to the mainstream of modern medicine this may be relatively true, but I don’t think we can doubt that the Chinese also recognized a polarity of approaches within the practice of acupuncture and Chinese medicine. In a previous discussion on root and branch we saw that Van Nghi remarks that the terms *Běn* and *Biāo* (root and branch) can be understood with different levels of meaning, more philosophical (idealistic) and more pragmatic. In the case of treatment principles we seem to find the same two tier understanding, but in this case we have different terms that can represent the more pragmatic and idealistic. 逆 [*nì*: oppose] and 從 [*cóng*: comply], suggest strongly the more philosophical and idealistic treatment principles where 攻 [*gōng*: attack] and support 扶 [*fú*: support] are the more pragmatic.

Explaining *Nì* and *Cóng* seems to give translators some difficulty. Lu’s translation of the previously quoted passage from Chapter 65 has comments in parenthesis that appear to be somewhat contradictory. We also note that in trying to explain these terms that were explicitly applied to acupuncture he gives examples from herbal medicine:

The indirect method means the counter-acting method, (namely to treat cold disease with hot herbs, or hot disease with cold herbs etc.); The direct method means the head-on method, (namely to confront the disease as in a collision, such as taking hot herbs with cold water or treating hot disease with hot herbs). (403)

¹⁰ Strictly speaking vitalism would imply the belief in *Qì* as an actual ‘substance’ and not just an emergent property. The traditional view of *Qì* would thus be intrinsically vitalism but this does not mean that every practitioner understands the concept and implementation of vitalism

We shall see shortly that these comments and examples may be based upon a different definition that appears in a Chapter 74. As mentioned above we can actually trace this change of definitions (and date it) in the texts because some substantial parts of the Sù Wèn can be dated to a particular later period.

According to Unschuld the extant version of the Sù Wèn is based upon the edition of Wáng Bīng from the 762AD. Chapters 66-71 and 74 were added at this time. We thus know that these chapters at least represent ideas of a particular time period, somewhat later than most of the text. It is of note that the placement of this material after Chapter 65 gives the impression of an intended segue between the material of Chapter 65 and these later additions. In the Wáng Bīng Chapters of the Sù Wèn Chapter 74 the counter-flow [逆 nì] and flow [從 cóng] methods are now defined, as they are in modern texts, (such as Nigel Wiseman's dictionary):

帝曰：何謂逆從？

The Emperor said: What is meant by counter-flow [逆 nì] and flow [從 cóng]?

岐伯曰：逆者正治，從者反治，

Qi Bo said: counter-flow [逆 nì] is straightforward [正 zhēng] treatment, flow [從 cóng] is opposing [反 fǎn] treatment,

In the work of Sun Tzu that we will look at in our discussion of pharmaceuticals, 正 [zhēng: straightforward] is translated by Giles as the 'direct' method of warfare. We saw previously that in Sù Wèn Chapter 65 反 [fǎn: opposing] was paired with counter-flow [逆 nì] method and meant something contrary or in opposition (to the pathology), but is now paired with 從 [cóng] and defined as contrary to the 正 [zhēng: straightforward] method. The 從 [cóng] method of treatment is now defined as it is in modern usage as 'paradoxical' [反 fǎn]

fǎn ... **paradoxical adj.** 反治 fǎn zhì, paradoxical treatment (1998, xiv)

Also see Wiseman page 428. Also the straightforward method of treatment implies a priority that is opposite to the priority that was explained previously in quotes from Needham and Unschuld.

正	zhēng contaminated / straightforward and unbending / correct / just / loyal / not awry / principal / orthodox / honest and virtuous / the person in charge / the person in command / the principal (as against the secondary) / to mete out punishment for a criminal / original (texts, etc.) / exactly / at the same time/ just / right / positively / main / principal / sharp / punctually / just / unbiased / a Chinese family name zhèng: the first in the lunar calendar
反	fǎn contrary / to return (something) / to turn back / to retreat / to introspect / to retrospect / to rebel / rebellion / to revolt / to infer

It was previously noted that the quoted passages certainly seem to leave no doubt that we are discussing primary principles of treatment. We can also now explain the reason for contradictory explanations of the terms in Lu's explanatory comments on the first passage of Chapter 65 – he is using the definitions given by Wáng Bīng in Chapter 74. Here for comparison are the pairs of terms from Chapter 65 that we considered earlier, and then the pairs from Chapter 74 for comparison. It seems very clear the terms are being given different definitions.

Sù Wèn Chapter 65

Primary terms		Translation	Secondary terms		Translation
逆	nì	counter-flow, upstream, direct	反	fǎn	oppose, confront,
從	cóng	flow, downstream, indirect	得	déi	accord, comply,

Sù Wèn Chapter 74

Primary terms		Translation	Secondary terms		Translation
逆	nì	counter-flow, upstream, direct	正	zhēng	straight-forward
從	cóng	flow, downstream, indirect	反	fǎn	oppose, confront, paradoxical

The straightforward method of treatment is made clear in Chapter 74 (i.e. circa 762AD) to be the application of treatments that are opposite in character to the condition.

寒者熱之，	(If) cold - heat it,
熱者寒之，	hot - cool it,
微者逆之，	subtle (profound) - counter-flow it,
甚者從之，	extreme - flow it,
堅者削之，	hard - peel it,
客者除之，	guest - remove it,
…	…
適事爲故。	appropriate method act therefore.

Examples of what are now called ‘paradoxical’ treatment are given in what Fang Yaazhong says is reversed text (Unschuld 2011, 635). The use of heat and cold in the first two lines of the passage below is inconsistent with the rest of the passage and fails to contrast with the previous passage. This is explained as a scribal error, but also could suggest confusion about these principles.¹¹ To be consistent with the remainder of the passage the amended terms in { } are inserted.

熱因寒用， Hot therefore cold {sic heat} employed,

¹¹ Again we note that translators see the error but do not see me to see its full implications.

寒因熱用， cold therefore heat {sic cold} employed,
塞因塞用， stoppage therefore stoppage employed,
通因通用， free-flow therefore coursing (free-flow)
employed...

It may be too obvious to need mentioning that so called ‘paradoxical’ treatment’ is the basis of modern homœopathy. However, this principle was probably not the overriding principle of non-directive treatment’ – although it is an aspect of it. This comparison does serve to make another point. When Hahnemann was developing homeopathy and applying ‘paradoxical’ treatment, he found that he had to ameliorate the dose considerably. One can argue that perhaps he took this too far in the concept of potencies, but the essential idea is important in understanding that there may be treatments within one system of acupuncture that may be opposite to what is recommended in another.¹² We need to keep in mind when mixing approaches that these different intents and techniques need to be applied as appropriate within the principles of each system. In supervising a non Five Element treatment I saw the effect of ‘paradoxical’ treatment done in a ‘directive’ approach and as with Hahneman the effect was often aggravation – but not necessarily in the positive sense.

In trying to understand the range of modern treatment techniques across styles we can see that directive and non-directive methods are the philosophical basis of treatment principles, but do not appear to be completely synonymous with the modern treatment principles of attack and support, and the techniques of supplement and drain. The modern Chinese application of ‘support’ could still be said to be directive in its relatively more precise intent and forceful needle technique. Japanese, Korean and Taiwanese approaches with an emphasis on constitutionally based treatment, that are balancing and supportive in nature, and do not attack a specific disease, and use a minimalist needle technique seem to apply the non-directive method more fully. When a Five Element practitioner does sedation technique it seems to be useful to think of this as relatively a more directive technique, and secondarily an emphasis on sedation (drain). The combining of these terms would thus give us a two tier way of viewing needle technique that would include the two main techniques of modern TCM and Five Element (Chinese/Japanese) in one schema (I use the alternate terms favored within each style as a way of distinguishing them):

Principle Technique	Directive (counter-flow)	Non-directive (flow)
Tonify (Supplement)	Supplementation	Tonification
Sedate (Drain)	Drain	Sedation

It seems that the modern diagnostic principles of full and empty that are the deciders between drain and supplement are not quite complete. We can take this discussion a stage further by considering the principles of full and empty and how these may have been given undue prominence in modern practice and a different understanding in different approaches. Full is

¹² The other principle in homeopathy is the ameliorated dose, originally this was just a weaker dose, but later became the extreme dilutions known as potencies – which is the most controversial aspect of this modality

defined in mainstream modern texts as an excessive state where there is the presence of pathogenic Qì and relatively robust true Qì. It should also be mentioned that these are not the only terms used. Sometimes one finds the term 盛 [shèng chéng: flourishing]. Describing a channel of organ as flourishing has rather different connotations to ‘full’. For example in Líng Shū Chapter 3:

其來不可逢者，氣盛不可補也。
其往不可追者，氣虛不可瀉也。

(When it is said) it arriving not approve meeting (confronting) – Qi flourishing not approve supplement {also}.

(When it is said) it departing (going in direction of) not approve chasing – Qi empty not approve drain {also}.

Empty is defined as a deficient state where the vital energy is depleted.¹³ In modern TCM practice this differentiation is predominantly based upon analysis of signs and symptoms and the pulse is considered to be confirmatory. This is an important emphasis to understand. The Nán Jīng Difficulty 48 says:

然：有脈之虛實，有病之虛實，有診之虛實也。

Answer: possess pulse it empty (or) full, possess disease it empty (or) full, possess form (substance) it empty (or) full {also}.

The implication is that the empty and full characteristics of the pulse, the disease, and the physical form may not always be in agreement. It is thus understandable that a diagnosis based primarily upon the analysis of the condition may lead to a diagnosis of full, where the pulses tend to show a more empty condition. Those trained in modern TCM who have learned the Five Element approach to pulse examination seem to confirm this change of perspective, and this explains further why modern TCM practice uses draining technique much more, than would appear to be indicated by a greater reliance on the pulses.¹⁴ It is also my experience of working with both the quantitative and qualitative approach to pulses with patients that tend to have chronic conditions that many of the ‘full’ qualities often show in mixed quality with aspects of empty and full.¹⁵

We can also find the linkage of the directive and non-directive principles, and supplement and drain techniques in Chapter 1 and 3 of the Líng Shū. Chapter 3 is almost a line by line commentary on Chapter 1.¹⁶ Chapter 1 seems to be in agreement with Chapter 65 of the Sù Wèn:

往者爲逆，來者爲順，明知逆順，

¹³ In practice of course mixed conditions are more the norm than the exception.

¹⁴ It is often said that in modern TCM pulses are confirmatory in diagnosis not primary.

¹⁵ I have never had the opportunity to work with a population that may be more robust and healthy but with acute conditions.

¹⁶ I believe that Chapter 3 was probably added later and often seems to reduce the meaning somewhat.

Go towards (in opposition) act as counter-flow (directive) [逆], arrival it act as flow (non-directive) [順], (the) brilliant know counter-flow and flow,

We then find further pairs of terms that are used with some variation:

迎之隨之，以意和之，針道畢矣。¹⁷

Meet it follow it, accordingly intent gentle, needle Dào (method) accomplished {stop}.

In Chapter 3 we find the connection of the various terms explained and the connection made to the techniques of drain and supplement:

往者爲逆者，言氣之虛而小，小者逆也。

Go towards – act as counter-flow, say Qi it empty and lacking, lacking – counter-flow {also}.

來者爲順者，言形氣之平，平者順也。

Arrival - act as flow - means form (physiological) Qi it level, balance – flow {also}.

明知逆順正行無問者，言知所取之處也。

Brilliant knowledge counter-flow (and) flow straightforward movement not inquire - means know place choose its department {also}.

Finally we find the train of ideas leads us to drain and supplement:

迎而奪者，瀉也；追而濟之者，補也。

Meet (confront) and wrest it - drain {also}; Chase (follow) and benefit it - supplement {also}.

迎	yíng	to receive / to greet / to meet / to welcome / move towards / face
奪	dúo	seize / snatch / wrest / to take by force / to rob / to snatch / to grasp / to carry away (the first prize, etc.) / to settle / to decide

隨	suí	to follow / to trace / to come after / to listen to / to submit to / to comply with / to let (it go, it be, etc.) / to accompany / to resemble / to look like / a Chinese family name
---	-----	---

¹⁷ 矣 'stop' is a grammatical character that serves as punctuation in the original text.

濟	jì	to relieve / to aid / to cross a stream / to succeed / to be up to standard / to benefit / benefits / a ford
---	----	--

The techniques of supplement [補 bǔ] and Drain [瀉 xiè] seem to have come at the end of a sequence of ideas that started out with the principles that we have called directive (counter-flow) and non-directive (flow). And yet the former terms have become the main principles in modern practice. We certainly have quite a number of characters to clarify our understanding – it puzzles me that: A) these have not been recognized as primary principles of treatment, B) that anyone suggests that Worsley’s approach is not found in the classics.

I have generally used the terms ‘supplement’ and ‘drain’, Five Element practitioners are more familiar with the terms ‘tonify’ and ‘sedate’. Although less common in the classics than drain and supplement we do find characters that would fit these translations directly. In Líng Shū Chapter 1 we find the terms solid [實] and empty [虛] used as verbs:

大要曰：徐而疾則實，疾而徐則虛。

‘Great Inquiry’ says: slow (insertion) and quick (removal) normally solidify (tonify), fast (insertion) and slow (removal) normally empty (sedate).

Finally the original philosophical idea that we started with of counter-flow and flow, finally become the basis of treatment techniques in a very practical way - the direction of needling. The Nán Jīng Seventy Second difficulty says:

然：所謂迎隨者，知榮衛之流行，經脈之往來也，隨其逆順而取之，故曰迎隨。

Answer: what is called confront and comply – know Rong (and) Wei their flow (and) movement (circulation), Jing-channels (and) Mai-vessels their coming (and) going (intercourse) {also}; comply with it directive (counter-flow) (and) non-directive (flow) and choose it, therefore called confront and comply.

We have examined the implications of the treatment principles from Líng Shū Chapter 29 and Sù Wèn Chapter 65, and the presence of later text from the 700s that demonstrate a change in definition of the original terms. Another way to approach this is to examine the historical and cultural record that appears to also show the development of these differing approaches and particularly a change of emphasis to the priorities of pharmaceutical medicine.

The Shāng Hán Lùn (circa 198AD) is a text that is often included among the classics; it is an elaboration of Chapter 31 of the Sù Wèn on heat (febrile) conditions.¹⁸ These are predominantly caused by cold injury, which originally encompassed a range of epidemic type diseases. Typhoid is the more circumscribed modern translation of this term Shāng Hán. The Shāng Hán Lùn is primarily an herbal medicine text. Another thing to note about the Sù Wèn Chapters 66-74

¹⁸ The heat here can clearly be understood in light of Líu Wán-sù ‘law of similar transformation’.

(762AD) is their greater emphasis on pharmaceuticals (herbal medicine).¹⁹ We can thus also see in these texts a movement toward pharmaceuticals as the main treatment rather than acupuncture.

This emphasis on confronting epidemic type diseases seems to have continued into the Jin-Yuan period – the era of four schools (12th-13th centuries). This period is particularly interesting for its contribution to the development of several important ideas, but also in terms of the shift away from the Classical emphasis on non-directive treatment. In particular one of the notable physicians of this period Zháng Zì-hè aka Zhang Cong-zhen (1156-1228) founded the attacking school – the name of the school hardly seems to need any further comment. This school was dominated by the theme that we are sick because of toxins. This school advocated that tonics were overused.²⁰ Therapies promoted sweat to cool and expel toxins, induced vomiting to expel poison and promoted bowel movements to expel toxins. Another notable physician Lǐ Wán-sù was associated with the cold or cooling school. His main interest was in heat and fire pathology and its counteraction with cold and cooling medicine.

Another idea related to this discussion is found in the school of Zhu Zhen-heng (a.k.a. Dan Xi) 1281-1358 he is associated with the ‘Nourishing the Yīn school. He believed that the majority of problems were caused by overindulgence, depleting the Yīn and recommended tonics that nourished the Yīn especially of the Kidneys and Liver. This is of interest because on one hand this supports the more non-directive approach in herbal medicine - that is the use of tonics. However, it also presents another aspect of the shift of emphasis. Nourishing the Yīn suggests the importance of medicine and food. We can say that acupuncture is a treatment that addresses the Yáng (i.e. the Qì and/or spirit) where substance medicine, including pharmaceuticals, food, and drink more directly affect (nourish) the Yīn. Similarly Li Tung-yun [Lǐ Dōng-yúan /Li Gao; 1180-1252 A.D.] is associated with the Stomach and Spleen school. He emphasized these functions as being central to the production of blood (a Yīn substance). And so another theme we can identify is a shift to emphasis on nourishing the Yīn. Even if this emphasizes the supportive approach it also represents a shift to substance based therapy over acupuncture. Líng Shū Chapter 40 ‘Yīn Yáng Clear and Turbid’ has a passage.

故刺陰者，深而留之；刺陽者，淺而疾之；清濁相干者，以數調之也。

Therefore: needle Yīn – deep and retain it; needle Yáng – shallow and quick it; clear (&) turbid mutually involved - accordingly repeatedly-frequently shift-adjust it {also}.

To be clear the meaning of Yīn and Yáng in this chapter is generally taken to be primary Yīn and Yáng channels.²¹ But it seems to have a more general meaning that could be said to underlie the two main approaches to Chinese medicine that have come down to the modern era – and specifically the depth of needling which we hadn’t mentioned as yet. In the modern TCM the emphasis on nourishing the Yīn implies a greater emphasis on substance therapy; acupuncture is by implication adjunctive to this. When treating the Yīn by acupuncture it is by implication only

¹⁹ The Wáng Bīng chapters give many of the basic principles of Chinese pharmaceuticals

²⁰ Tonics would be the herbal equivalent of non-directive treatment approach

²¹ It is not uncommon for quotes from the classics to be taken out of context by authors trying to prove a point, and so I want to be very clear about this and let the reader judge the appropriateness.

possible to do this indirectly (but with a strong directive approach). In the Japanese tradition the emphasis is on the Yáng, the spirit or energetics. It is also commonly said that Yáng is easy to treat and thus to over-treat and Yīn is harder to treat. The customary treatment of combining front-Mu and back-Shū points could be explained as maintaining a balance of the Yīn and Yáng aspects. In Five Element practice there is a relatively greater emphasis on the use of Back-Shū points, but as the classic says the needle technique is ‘shallow and quick’ (non-directive). The two needle techniques we are discussing thus make sense in regard to this difference in emphasis.

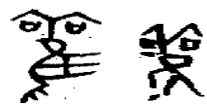
Attacking treatments implies something relatively forceful – in herbal medicine the greater use of poison remedies (pharmaceutics) over tonics and in acupuncture a more forceful (wresting) directive approach to treatment. They suppose an acute disease in a robust person who can tolerate these strong treatments. In contrast Japan and Korea and Taiwan notably appear to have emphasized the principles of the Nán Jīng, predominantly focusing on the Five Element as a balancing approach to treatment, and needle techniques that are indirect, non-directive, and supportive. This seems to lead us inexorably to another idea the concept of balance, and treatment that restores balance.

It has been suggested that the type of treatment used in modern Five Element practice that emphasizes the balancing of Qì (or especially the actual ‘transfer’ of Qì) is also a modern innovation.²² However, in a previous discussion we saw that this idea of balancing is the main approach promoted in the Nán Jīng. In the previous quote we did see the character 調 which has the meaning to transfer, but the primary idea seems to be ‘adjust’. The idea of an actual ‘transfer’ may be weakly supported, perhaps best thought of as a metaphor. But again this idea is not unique to the Nán Jīng several times in the Sù Wèn such as Chapter 14 the idea of balancing is described quite unequivocally:

平治于權衡，去宛陳莖，微動四極，
溫衣繆刺其處，以復其形。

Level [平] treat with regard to power [權] and balance [衡], remove as if old fine animal straw (densely compacted); subtle movements four extremes (extremities); warm clothing misleading needling its place; in order to recover the physical form.

We shall discuss the meaning of misleading needling later. But the characters of the first line should be enough to demonstrate that the idea of balance and harmony is not a new age invention, but a principle of Chinese medicine. Earlier in the discussion we mentioned the characters 反 [fǎn: opposing] and 得 [děi: complying] and noted that the latter has the meaning of harmonize. 權 [quán] is etymologically said to be the influence of tree spirits. The radical is tree. The other component is given as a heron in modern dictionaries, but it seems likely that it was an owl in its original pictograph that emphasized the eyes. Presumably the bird is seen as symbolizing the spirit and as with western tradition the owl is a potent symbol of wisdom.



²² What has been called ‘robin hood’ treatment may be the weakest link in the Five Element model

調	diào	transfer / shift / allocate / accent / melody / tone; tiáo to mix / blend / to adjust / suit well / mediate; / to regulate / balance / regular / to make fun of / to tease / to mediate
平	píng	even / level / flat / peaceful / pacify / control / to regulate / (said of prices) to go back to normal after sharp rises / (sports) to make the same score / to tie / to draw / a draw / to pacify / to bring peace to / short for Peiping / a Chinese family name - Etymology: level object on an altar
權衡	quán héng	weigh / balance
權	quán	power / right / authority - Etymology: the influence of tree spirits (Spears)
衡	héng	to weigh / to measure / to assess / to consider / horizontal / railings / a beam / the beam of a steelyard / a Chinese family name - Etymology: a flat and parallel road

The non-directive treatment approach emphasizes the health maintenance and prophylactic aspects of acupuncture which are intimately connected to the idea of balancing. Indeed they seem to provide the only way of actually putting these ideas into practice. We mentioned previously that the Sù Wèn says that the higher practitioner treats what is not yet diseased but does not seem to give us much practical advice on how to do this. In regard to the two basic needle techniques of tonification (supplementation) and sedation (drain) the former is generally understood to be the gentler. If there is still any uncertainty in trying to decide if the very gentle approach to needle technique that is characteristic of some Japanese approaches and specifically the modern Five Element approach, is a later development, or not, we only need to look at almost identical passages in Chapter 65 of the Sù Wèn and Chapter 1 of the Líng Shū.

補曰，隨之隨之，意若妄之。

Supplement [補] called, comply with it submit to it, intent seem as if absurd [妄].

若行若按，如蚊虻止，如留如還，去如弦絕，令左屬右，其氣故止，外門已閉，中氣乃實，必無留血，急取誅之。

Seem as if move seem as if press, like mosquito-gadfly lands, like stay (remain) like still (return), remove like bowstring severed (released), make left combine right, their Qi therefore stop, external gateway stop shut, within Qi then solid, necessarily without detaining Blood, urgent execute.

Certainly the analogy to a gadfly would particularly resonate with Five Element approach to needling. ‘Compliant and submissive’ would seem to emphasize that this is the implementation of the non-directive principle. Indeed it does seem absurd that something so gentle as like a gadfly landing could be expected to be effective. The Zhén Jiǔ (Systematic Classic) says in an almost identical passage that 妄 means forgetful or absent minded [忘]. ‘As if absent minded’ would also fit with the different treatment intent of ‘non-directive’ treatment which is less

precise in a technical sense; i.e. ‘draining damp’ has more precise expectations than ‘balancing’. Absurd would also seem to be similar to the idea of ‘misleading’ treatment as found in the Sù Wèn Chapter 63.

黃帝問曰：余聞繆刺，未得其意，何謂繆刺？

Huang Di said:

I have heard of misleading [繆] needling, do not have its meaning, what is meant by misleading needling?

According to Unschuld as acupuncture was applied according to the developing medical theories rather than just the pragmatic excise of boils, and such like local conditions; the needling not being applied at the most obvious and immediate site of injury or disease would appear to be in error (Unschuld 2003, 274).²³ Following on from a previous quote the text continues:

持針之道，堅者爲寶。

Holding needle its way, firmness it act as precious.

For comparison we have two translations.

It is important to hold needle firmly and with force. (Henry Lu 654)

Concerning technique, firmness is precious. (Van Nghi 11)

Ma Shi explains: ...the basis of this method is to firmly hold the needle, this is why firmness is called precious (a treasure). (Van Nghi)

Is forcefulness here in conflict with the gentleness of the mosquito landing? The commentary of Ma Shi seems to confirm the intent here would seem to be closer in Van Nghi’s translation it is the firmness in the sense of steadfastness, calm and steadiness of the practitioner, not physical forcefulness per se that is intended meaning.

妄	wàng	absurd / untrue / false / ignorant / stupid / reckless / rash / wild / frantic / frenetic
忘	wàng	to forget / to omit / to miss (a line, etc.) / to neglect / to overlook
繆	mù	erroneous / preposterous / absurd / false / an error / a mistake
蚊	wén	mosquito or gnat
虻	méng	gadfly

²³ Misleading needling as described in Sù Wèn Chapter 63 seems to be somewhat more specific in relating to one sided conditions or symptoms which are associated with the Luò vessels. A very interesting topic in relation to the Akabane technique.

堅 jián strong and durable / solid / firm / to dedicate to / to devote to / calm / steady / stable / determined / close / intimate / armor, etc. / the strongest position or point of enemy troops / firmly / steadfastly / resolutely / a Chinese family name

We have suggested the example of these two approaches to treatment in context of herbal medicine would be the distinction between tonics and pharmaceuticals (poison remedies).²⁴ We have seen that translators find it especially hard to explain directive and non-directive in relation to acupuncture even though they occur in texts that have acupuncture as their primary focus. We could see these terms as relating rather well to the fundamental difference that is understood between homœopathy and allopathy.²⁵ A comparison of ‘directive’ and ‘non-directive’ treatment principles and techniques are presented in table form below

Non-Directive e.g. Five Element	Directive – e.g. TCM
Physiology and Pathology Vitalistic approach to understanding physiology and pathology. Organism is seen as self maintaining and self-repairing	Mechanistic approach to understanding physiology and pathology. Body as machine and disease as malfunction of machine
Point Functions Defined in general terms as supporting of normal function	Defined in precise technical terms in relation as counter-acting a pathological state
Treatment Aim Treatment aims to restore balance (Five Element or Korean Constitutional). A less technically precise statement of aim	A precise statement of the aim of treatment which is to correct the perceived deficient function or broken mechanism
Treatment Principle Predominantly Supportive, specific malfunction may not be defined in precise terms	Attack or Support, but in either case the object of treatment is to correct a well defined malfunction.
Treatment Technique Minimalist approach to needling. Emphasis on Tonification within the range of results	More forceful technique: including more needles, more forcefully manipulated and needles usually retained. Emphasis on Dispersion
Medical Approaches <i>vis medicatrix naturae</i> Naturopathy Homeopathy	Allopathy
Herbal Medicine	

²⁴ In the *Líng Shū* the Yellow Emperor calls for the end of the use of poison remedies. The Attacking School led by Zhang Zhe (1156 - 1228) was dominated by the theme that we are sick because of toxins. This school advocated that tonics were overused. We could surmise that the same school of thought may have contributed to the shift in the emphasis in acupuncture towards more ‘directive-attacking’ treatment.

²⁵ This is the principle of ‘like cures like’. I am not referring specifically to the miniscule doses that are the subject of most controversy. But it is worth mentioning that the initial impetus to these was the observation that treatment according to this principle required an ameliorated dosage.

Predominant use of tonics	Predominant use of ‘poison remedies’. Equivalent of Greek Pharmakon
Outcome Less immediate, but long lasting results. Patient’s perception that it happened naturally	Immediate or relatively immediate relief of symptoms or condition
Main Risk Under-treatment – especially when disease may be immediately life-threatening	Over-treatment, temporary palliation without long term cure

The concepts of Evolutionary Medicine and Systems Theory have reintroduced this emphasis. Modern biomedicine would still dispute the actual existence of a ‘Life Force’ per se, but the principle of self-regulation and self-repair are increasingly recognized.

I thus suggest that the modern treatment principles of 攻 [gōng: attack] and 扶 [fú: support] and techniques of supplement (tonification) and drain (sedation), are more properly thought of as a second tier of treatment principles, and techniques. 逆 [nì: counter-flow, directive] and 從 [cóng: flow, non-directive] method are the primary principles that distinguish the mainstream approach and Five Element.

The Japanese approach to treatment principles and techniques (including Five Element) with an emphasis on balancing of the functions with a minimalist approach to treatment would seem to be a fuller expression of the 從 [cóng: flow, non-directive] method. Modern TCM appears to have a greater emphasis on 逆 [nì: counter-flow, directive] method. Although supplement-tonify and drain-sedate figure in both approaches there is a great deal of difference in the practical techniques. Five Element practitioners tend to perceive all TCM treatment as ‘sedation’ because the retention of needles is understood to be intrinsically a sedation technique. However, separating the directive/non-directive, and tonification/sedation principles to some degree seems to provide a model for understanding these differences. More elaborate and forceful treatment approaches with a more exactly defined intent (including needle retention) being more directive.

The ideas described here do not replace the idea of supplement-tonification and drain-sedation; but seems to suggest that these principles are not able to explain the range of techniques found in different approaches to acupuncture. Indeed

Or as Unschuld has it:

The piercing in the final age of today [is such that] depletions are replenished and what is full is drained. All practitioners knows {sic} this [and nothing else]. (2011, 428)

And Henry Lu:

But physicians at present know nothing more than toning up the deficiency and sedating the excess which is common knowledge among physicians of the lower class. (1978, 171)

I have included these two translations because it is interesting that these translators have brought out this meaning, even though they do not seem to fully recognize its full implications.

This has been a wide ranging discussion that has touched on a number of other topics. But these ideas are interlinked. We have seen that there may be a spectrum of treatment principles and techniques within traditional East Asian medicine represented in various modern approaches. It has also been suggested that modern TCM with its greater emphasis on pharmaceuticals is more strongly a Yīn supporting modality, and Japanese based traditions with their emphasis on Qì and/or spirit have greater emphasis on a Yáng modality. Also that the non-directive approach to treatment is more aligned with the latter, and the directive approach the former. We have seen that although tonification and sedation, and supplement and drain are often thought to be more or less synonymous the two approaches seem to follow very different intents and techniques that appear to be an actual contradiction. We have seen that there are pairs of terms that may more accurately describe the difference between the main approaches to acupuncture. We have also seen that the non-directive approach to treatment is strongly aligned with the idea of balance, what in modern books is called ‘the creation of harmony’. This balancing approach to treatment is said to have found its fullest expression in the Nán Jīng.

Lastly it should be said that it is important to recognize the differences and their relative priority, when integrating approaches, and not mix and match these differing intentions and techniques.²⁶ We have suggested that the principle of non-directive treatment seems to bring us closer to Dàoist principles in practice, we will also discuss in another section how this also places a particular challenge in terms of skills of the practitioner. We have also touched on the idea that the directive (attacking) approach to treatment is the most usual approach in pharmaceuticals, and that the incorporation of pharmaceuticals into the medical theory changed the orientation of the acupuncture towards a more directive approach. We mentioned that the use of tonic herbs would be closer to the philosophical approach of classical acupuncture, but does not appear to figure in modern TCM, however it is found in the work of Ron Teeguarden.²⁷ The next section will discuss pharmaceuticals in more detail and continues the same themes.

Bibliography

- Lu, Henry; A Complete Translation of the Nei Ching and Nan Ching; Volumes 1-V; The Academy of Oriental Heritage, Vancouver, 1978
- Maoshing Ni; The Yellow Emperors Classic of Medicine; Shambhala, Boston and London, 1995
- Needham, Joseph & Lu Gwei-Djen; Science and Civilization in China Volume 6 Part 6; Cambridge University Press; 2004
- Nigh, Van Nguyen; Huangdi neijing Lingshu; Volumes I-III, Jung Tao Productions; Sugar Grove NC, 2005
- Prescott, Andrew A., Cloud Gate: A Comprehensive Compendium of Acupuncture Point Names. www. Lulu.com, 2012
- Prescott, Andrew; ‘The Great Masters of the Jin-Yuan’.
- Unschuld, Paul U., Huang Di Nei Jing Su Wen: Nature Knowledge and Imagery in an ancient Chinese Medical Text. University of California Press, 2003
- Unschuld, Paul U. & Tessenow, Hermann. Huang Di nei jing su wen: An Annotated Translation of Huang Di’s Inner Classic – Basic Questions Volume 2. University of California; 2011.

²⁶ Those that are trying to practice with a more comprehensive understanding of these principles commonly describe this as integrated Chinese medicine.

²⁷ Teeguarden, Ron; Replenishing and Restoring Jing; Acupuncture Today Vol. 15 Nu. 7 July 2004

© Andrew Prescott 2014 (Replaces an earlier version 2012) Updated 1/22/2019

Wiseman, Nigel, & Feng Ye; A Practical Dictionary of Chinese Medicine (2nd edition);
Paradigm Publications; Brookline, Massachusetts; 1998