

The Use of Entry and Exit Points for the Face and Thorax

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ABSTRACT

The flow of meridians was first described in the *Spiritual Pivot* Chapter 10 giving a specific order in which the meridians follow from one to the other. This order is often also referred to as the Chinese biorhythm or Chinese clock. Its uses are often found in Five Element acupuncture to suggest when is the best time to treat a particular meridian and other styles such as Tung and Balance Method where it is applied to balancing various meridians. It is rarely used in its capacity to treat the symptoms that can appear along the meridians themselves and their connections to other meridians. The aim of this article is to give a different approach to the use of entry and exit points to treat problems of the thorax and the face. This is to be done by looking at the pathways of the meridians, where the meridians begin and end according to classical texts, and using the relationships of the Chinese biorhythm clock to treat the affected areas.

INTRODUCTION

Hand *tai yin* Lung, hand *yang ming* Large Intestine, foot *yang ming* Stomach, foot *tai yin* Spleen, hand *shao yin* Heart, hand *yang* Small Intestine, foot *tai yang* Bladder, foot *shao yin* Kidney, hand *jue yin* Pericardium, hand *shao yang* Triple Heater, foot *shao yang* Gall Bladder, foot *jue yin* Liver.

This is the order that is given to both the flow of meridians on the body and the order according to the fluxes of *qi* in the body. Most acupuncture books start by describing the pathways of the

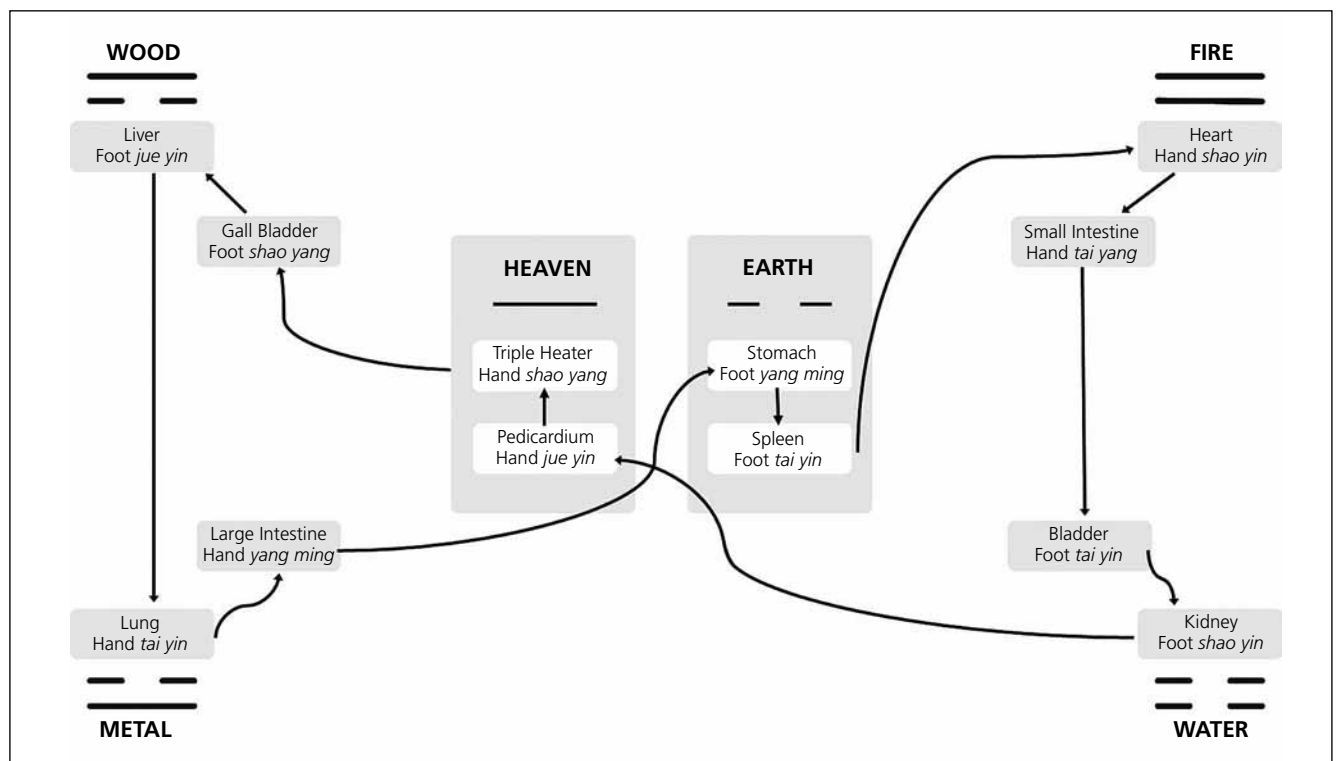
meridians in the forementioned order. Although this order is used to describe the pathways of the meridians in the body, it is rarely explained or given importance in clinical use.

This same order is given to the flux of *qi* in the body where certain meridians will be 'full' and others will be 'empty' at different moments of the day. This ebb and flow of *qi* in the meridians can be referred to as the Chinese biorhythm, the Chinese clock or the circadian cycle. The most common current use of this theory is the horary point in the Five Element school of acupuncture. While this use can be beneficial, it is not exploiting this meridian relationship to its fullest.

In the following article the author puts these two theories together by treating the areas between entry and exits points with the midday/midnight associated points to give very effective clinical treatments for thoracic problems as well as facial problems. One of the advantages of this application is that the acupuncture points that are chosen are points distal to the affected area and as a consequence, the patient can give feedback on instant improvement of said affected area permitting verification of the efficacy of the treatment.

The Order of Meridians

According to the theory of Five Elements the meridians where the *qi* transfers from one meridian to the other in the extremities is the same as the interior/exterior relationship of the various elements. These relationships are as follows:



The order of the meridians was first referenced in the *Spiritual Pivot* chapter 10. As with most references to ancient texts they leave much to interpretation and understanding. When the order is observed closely, some correspondences become apparent. When the *qi* flows from a *yin* meridian to a *yang* meridian this happens in the hand/arm area, when *qi* flows from a *yang* to a *yin* meridian this happens in the foot/leg area. When the *qi* flows from a *yin* foot to *yin* hand meridian this happens in the thorax and when the *qi* flows from a *yang* hand to a *yang* foot meridian this happens in the face. One can also see that the changes of polarity, *yin* transferring to *yang* or *yang* transferring to *yin*, happen in the extremities of the body, and when the polarity of *yin* and *yang* stay constant the transfer of *qi* stays in the face or thoracic regions.

The general use of these meridian interactions is executed by using the *luo* connecting points and the *yuan* source points. As these relationships are discussed in most acupuncture manuals and are indicated in the point descriptions they will not be discussed further in this article.

As already stated the *yin* meridians of the foot and hand interact in the thorax and the *yang* meridians of the foot and hand interact in the face. It is these interactions which are little discussed in current meridian teachings. However, they can be very useful clinically both in diagnostics and in treatment. In diagnostics the areas between the two meridians give us the affected area.

For example, the foot *shao yin* Kidney meridian finishes at Ki 27 *shu fu* and connects to the first point of the hand *jue yin* Pericardium meridian, P 1 *tian chi*. When the area between these two points is affected, it can be diagnosed as a communication problem between the two meridians. Symptoms of this area could be pain, breathing problems, skin problems or other affections that are prevalent in this area. Another example is the hand *yang ming* Large Intestine meridian, finishing at LI 20 *ying xiang*, which connects with the foot *yang ming* Stomach meridian at St 1 *cheng qi*. The symptoms that can be associated with a communication problem between these two points could be inferior sinus pain, anosmia, skin rashes, and nasal congestion. See tables 1.1 and 1.2 and figures 1.1 and 1.2.

Table 1.1

Foot and hand <i>yin</i> meridian couplings	Foot <i>yin</i> meridian exit point	Hand <i>yang</i> meridian entry point	Affected area	Symptoms
Foot <i>shao yin</i> Kidney <-> Hand <i>jue yin</i> Pericardium	<i>Shu fu</i> Ki 27	<i>Tian chi</i> P 1	From the inferior border of the clavicle to one cun lateral to the nipple in the fourth intercostal space: including the area of the medial pectoral region	Asthma, hunched shoulders, shortness of breath, pain or oppression in the medial aspect of pectoral region, palpitations
Foot <i>jue yin</i> Liver <-> Hand <i>tai yin</i> Lung	<i>Qi men</i> Liv 14	<i>Zhong fu</i> Lu 1	From below the nipple in the sixth intercostal space, four cun lateral to the ventral line, to the first intercostal space six cun lateral to the midline, one cun inferior to the fossa clavicularis: includes the lateral pectoral region	Asthma, shortness of breath, constriction of the chest, pain or oppression in the lateral aspect of pectoral region, reduced movement of the shoulder, lack of breast milk
Foot <i>tai yin</i> Spleen <-> Hand <i>shao yin</i> Heart	<i>Da bao</i> Sp 21	<i>Ji quan</i> Ht 1	From the sixth intercostal space on the mid-axillary line to the tip of the axilla, above the palpable axillary artery: includes the whole axillary region	Excessive sweating from the axilla, reduced lateral movement of the arm, swelling of the lymph nodes in the axillary region

Fig. 1.1 Image of thorax with zones

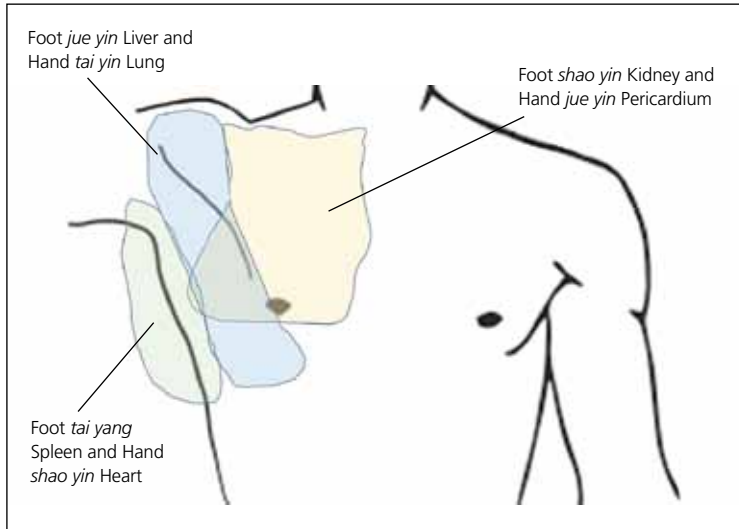


Fig. 1.2 Image of face with zones

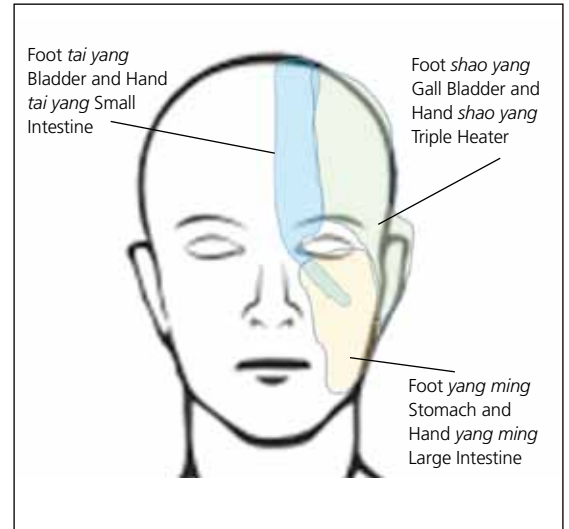


Table 1.2

Foot and hand yang meridian couplings	Foot yang meridian exit point	Hand yang meridian entry point	Affected area	Symptoms
Hand yang ming Large Intestine <-> Foot yang ming Stomach	LI 20 <i>ying xiang</i>	St 1 <i>cheng qi</i>	From the naso-labial groove near the midline of the lateral border of the ala nasi to the area directly below the pupil, between the eyeball and the inferior infra-orbital foramen: includes the whole area lateral to the nose and below the eye	Anosmia, nasal congestion, fluttering of the inferior eyelid, inferior sinus infection and/or pain
Hand tai yang Small Intestine <-> Foot tai yang Bladder	SI 18 <i>quan liao</i>	BL 1 <i>jing ming</i>	From directly below the outer canthus, in the depression below the zygomatic bone, to the depression 0.1 cun medial and superior to the inner canthus of the eye: includes the whole area of the eye and the medial aspect of the forehead	Sinus pain and infection, nasal congestion, tooth pain in the upper jaw, conjunctivitis, eye and vision affections
Hand shao yang Triple Heater <-> Foot shao yang Gall Bladder	TH 23 <i>si zhu kong</i>	GB 1 <i>tong zi liao</i>	From the depression at the lateral end of the eyebrow, near the bony limit of the orbit, to half a cun lateral of the outer canthus of the eye, in the depression at the lateral end of the orbit: includes the temple region and lateral side of the head	Headache at the temple region, tinnitus, auditory affections, involuntary spasms in the lateral area of the eyelid

The Chinese Biorhythm Clock

The origins of the circadian rhythm in regards to Chinese medicine can be found in chapter 66 of the *Inner Classic - Basic Questions*. 'The twelve earthly branches in numerical terms are also divided into six pairs of *yin*/even and *yang*/odd classification. They are

directly associated with the five elemental phases as well as with the six atmospheric influences and the three *yin* and three *yang* steps' (Maoshing Ni, 1995). The text then goes on to assign a branch and meridian to a period of two hours where the *qi* flow is strongest in the meridian.

Fig. 2 Clock with times and meridians

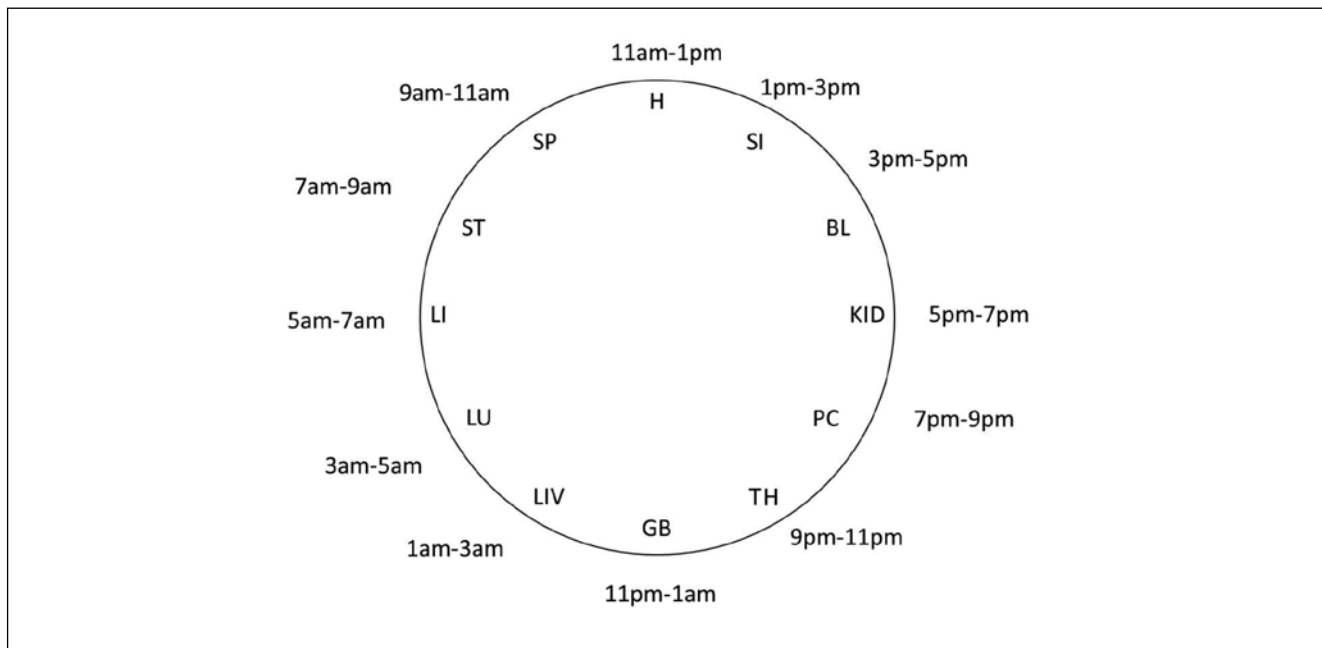
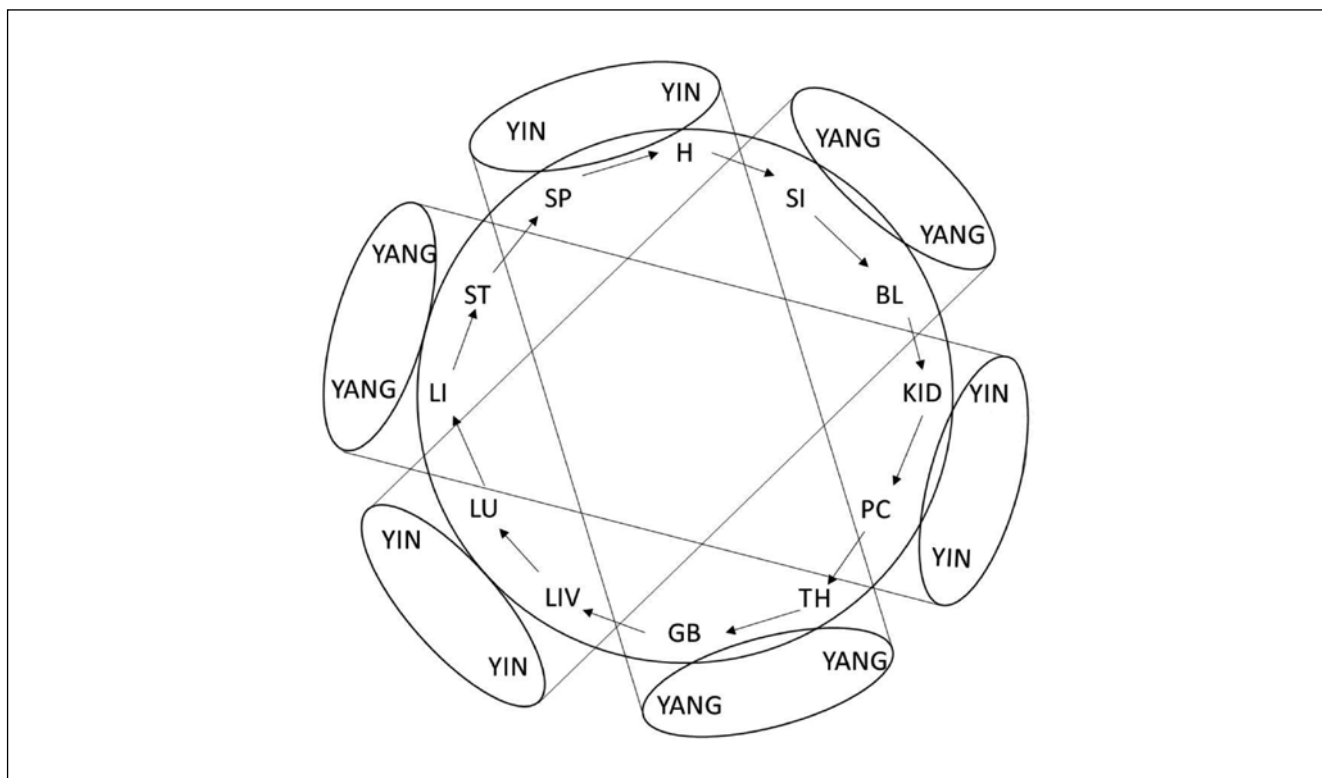


Fig. 3 Law of midday-midnight



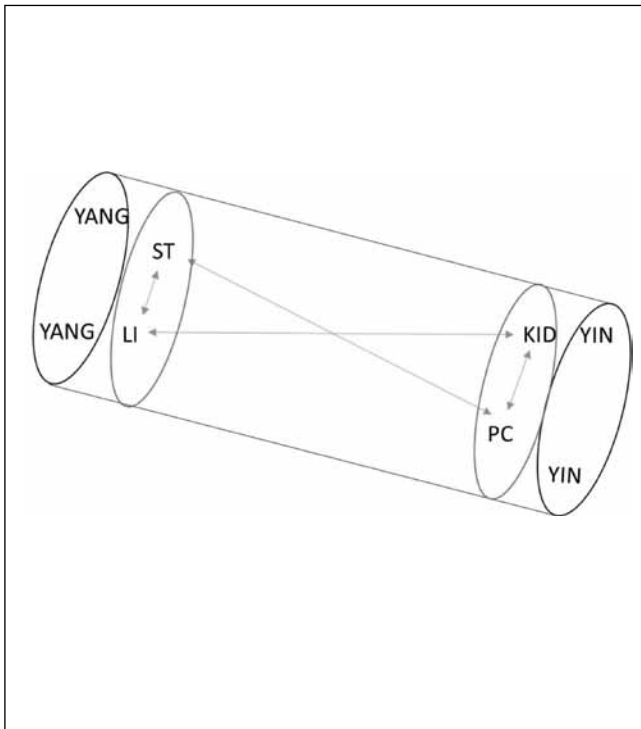
This ebb and flow of *qi* through the meridians has many uses. Taking the logic of the previous quote and stipulating that each meridian has its own zenith of energy; as a consequence of each meridian having a two-hour zenith period in a twenty-four-hour cycle it then follows that each meridian will also have a two-hour nadir period exactly twelve hours later. At the same time an opposite meridian will have its nadir at the same time that the first meridian has its zenith. In other words, when two meridians have exact opposite times of zenith and nadir their *qi* flow will be in perfect contrast. This relationship of perfect contrast based on the flow of *qi* is called the 'law of midday midnight'.

'... the Chinese concept of biorhythm. This theory states that during every twenty-four-hour period each channel has a two-hour period when its *qi* flow is strongest, and an opposite two-hour period when its *qi* flow is weakest. By pairing a channel that has the most *qi* with a channel that has the least *qi*, we get the law of midday midnight.' (Shubs, 2012)

Clinical Application

The never-ending flow of *qi* through the meridians, taking into account the entry and exit points that are found on the thorax and face, and the relationships of midday midnight between meridians, presents symmetry between the entry and exit points found on the thorax and the entry and exit points found on the face.

Fig 4.1 Foot and hand yang ming with foot shao yin and hand jue yin



The *yin* pairings of the foot and the hand meridians are in direct relationship with the *yang* pairings of the hand and foot meridians through the relationship of the law of midday midnight.

Fig. 4.2 Foot and hand tai yang with foot jue yin hand and tai yin

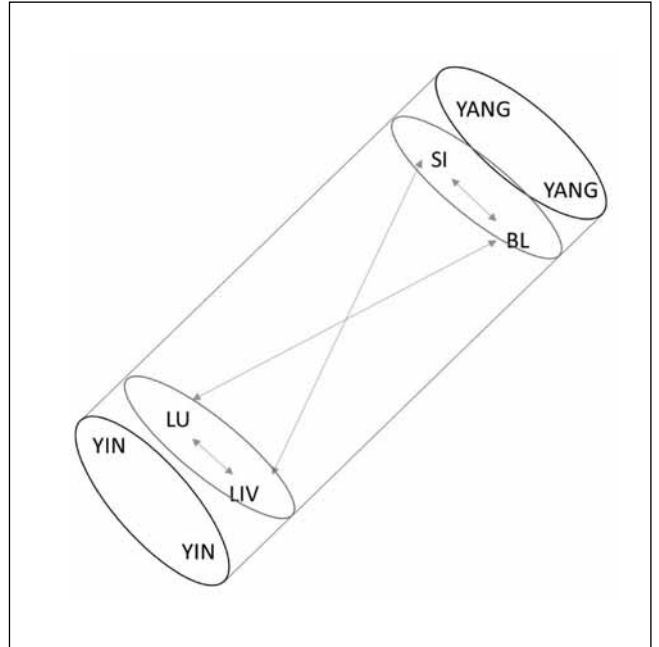
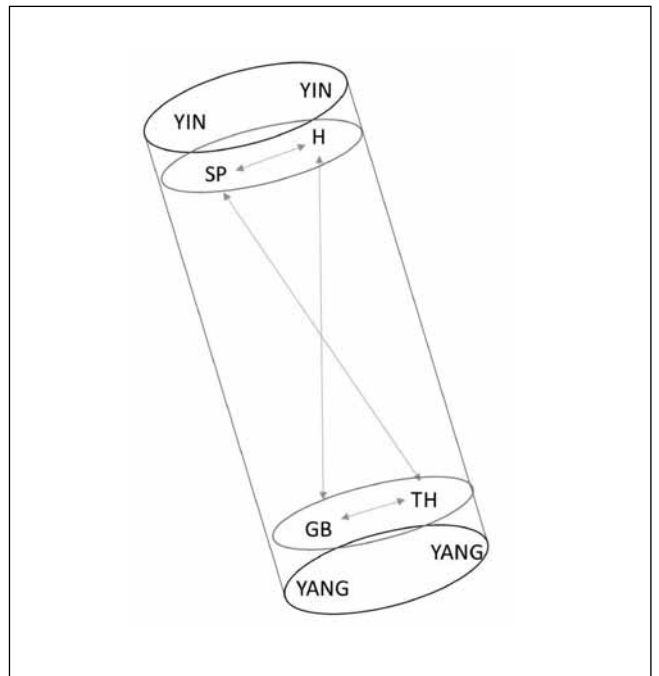


Fig 4.3 Foot and hand shao yang with foot shao yin and Hand tai yin



The meridians that are connected to each other through this relationship of zenith and nadir have the ability to treat each other. The entry and exit points on the thorax can treat the areas associated with entry and exit points on the face, and the entry and exit points on the face can treat the areas associated with the entry and exit points on the thorax. See tables 3.1 and 3.2 and figures 1.1 and 1.2.

Table 3.1

Yin hand and foot meridian pairings on the thorax	Affected areas that can be treated	Symptoms of affected areas
Ki 27 <i>shu fu</i> and P 1 <i>tian chi</i>	From the naso-labial groove near the midline of the lateral border of the ala nasi to the area directly below the pupil, between the eyeball and the inferior infra-orbital foramen: includes the whole area lateral to the nose and lower than the eye	Anosmia, nasal congestion, fluttering of the inferior eyelid, inferior sinus infection and/or pain
LI 14 <i>qi men</i> and Lu 1 <i>zhong fu</i>	From directly below the outer canthus in the depression below the zygomatic bone to the depression 0.1 cun medial and superior to the inner canthus of the eye: includes the whole area of the eye and the medial aspect of the forehead	Sinus pain and infection, nasal congestion, tooth pain in the upper jaw, conjunctivitis, eye and vision affections
Sp 21 <i>da bao</i> and Ht 1 <i>ji quan</i>	From the depression at the lateral end of the eyebrow, near the bony limit of the orbit, to 0.5 cun lateral to the outer canthus of the eye, in the depression at the lateral end of the orbit: includes the temple region and lateral side of the head	Headache at the temple region, tinnitus, auditory affections, involuntary spasms in the lateral area of the eyelid

Table 3.2

Yang hand and foot meridian pairings on the facex	Affected areas that can be treated	Symptoms of affected areas
LI 20 <i>ying xiang</i> and St 1 <i>cheng qi</i>	From the inferior border of the clavicle to one cun lateral to the nipple in the fourth intercostal space: includes the area of the medial pectoral region	Asthma, hunched shoulders, shortness of breath, pain or oppression in the medial aspect of pectoral region, palpitations
SI 18 <i>quan liao</i> and Bl 1 <i>jing ming</i>	From below the nipple in the sixth intercostal space, four cun lateral to the ventral line, to the first intercostal space six cun lateral to the midline, one cun inferior to the fossa clavicularis: includes the lateral pectoral region	Asthma, shortness of breath, constriction of the chest, pain or oppression in the lateral aspect of pectoral region, reduced movement of the shoulder, lack of breast milk
TH 23 <i>si zhu kong</i> and GB 1 <i>tong zi liao</i>	From the sixth intercostal space on the mid axillary line to the tip of the axilla above the palpable axillary artery: includes the whole axillary region	Excessive sweating from the axilla, reduced lateral movement of the arm, swelling of the lymph nodes in the axillary region

CASE HISTORIES

Case History 1

Twenty-five-year-old woman presented with a sensation of blocked sinus, nose and ears. Also early stage anosmia. The problem had been present for at least ten years during which time she had not had any relief. The diagnosed areas were those belonging to the foot and hand *yang ming* meridians, the foot and hand *shao yang* meridians and the hand and foot *tai yang* meridians. In fact all of the meridians were affected.

The initial treatment was Ki 27 *shu fu*, P 1 *tian chi*, Liv 14 *qi men*, Lu 1 *zhong fu*, Sp 21 *da bao*, Ht 1 *ji quan*, all bilaterally as the problem was bilateral. The treatment was administered at a frequency of one session per week for eleven weeks. As the treatment advanced only Ki 27 *shu fu* and P 1 *tian chi* were needled as the *yang ming* area was the only area still affected.

Ki 27 *shu fu* is the exit point of the foot *shao yin* (Kidney) meridian and relates to the hand *yang ming* (Large Intestine) entry point LI 20 *ying xiang* via the midday/midnight relationship. P 1 *tian chi* is the entry point of the hand *jue yin* (Pericardium) meridian and relates to the foot *yang ming* (Stomach) entry point St 1 *cheng qi* via the midday/midnight relationship (see fig. 4.1). Ki 27 *shu fu* and P 1 *tian chi* together treat the facial area that is associated with hand *yang ming* (Large Intestine) and foot *yang ming* (Stomach).

Liv 14 *qi men* is the exit point of the foot *jue yin* (Liver) meridian and relates to the hand *tai yang* (Small Intestine) exit point SI 18 *quan liao* via the midday/midnight relationship. Lu 1 *zhong fu* is the entry point of the hand *tai yin* (Lung) and relates to the foot *tai yang* (Bladder) entry point Bl 1 *jing ming* via the midday/midnight relationship (see fig. 4.2). Liv 14 *qi men* and Lu 1 *zhong fu* together treat the facial area that is associated with hand *tai yang* (Small Intestine) and foot *tai yang* (Bladder).

Sp 21 *da bao* is the exit point of the foot *tai yin* (Spleen) meridian and relates to the hand *shao yang* (Triple Heater) exit point TH 23 *si zhu kong* via the midday/midnight relationship (see fig. 4.3). Ht 1 *ji quan* is the entry point of the hand *shao yin* (Heart) meridian and relates to the foot *shao yang* (Gall Bladder) entry point GB 1 *tong zi liao* via the midday/midnight relationship (see fig. 4.3). Sp 21 *da bao* and Ht 1 *ji quan* together treat the facial

area that is associated with hand *shao yang* (Triple Heater) and foot *shao yang* (Gall Bladder).

After the first treatment there was a slight augmentation of the symptoms for a period of twenty-four hours and then a clear improvement for three days after. The subsequent treatments followed the same pattern with the slight augmentation of the symptoms becoming less prevalent and the improvement staying for a longer period. By the fourth treatment the patient explained that she felt like she was relearning to breathe properly through her nose. The patient continued to improve and by the end of the treatments the symptoms had practically gone. The only time she experienced symptoms was when she was under severe emotional stress. The symptoms went away as soon as the stressful situation was resolved.

Case history 2

Thirty-seven-year-old male patient presented with chronic asthma and shortness of breath. The asthma had been present for at least two years. The diagnosed areas were those belonging to the foot *shao yin* (Kidney) and the hand *jue yin* (Pericardium) area, as well as the foot *jue yin* (Liver) and hand *tai yin* (Lung) area. The treatment was St 1 *cheng qi*, LI 20 *ying xiang*, SI 18 *quan liao* and Bl 1 *jing ming*.

Treatment continued at a rate of one treatment per week for five weeks and then one treatment every two weeks for ten weeks. The patient had immediate relief during the first treatment. After the first five treatments he no longer suffered with breathing difficulties in his day-to-day life. By the end of the whole treatment the patient was able to play sports again without any incidents.

CONCLUSION

Entry and exit points have been taught for years in the acupuncture colleges without any clinical use attached to them. This simple but powerful technique of imaging the thoracic and facial regions and using the associated entry-exit points according to the law of midday-midnight provides a clinical use to this often forgotten part of acupuncture theory. A safe and effective technique that permits instant verification by the patient and gives long-term benefits is the goal of any treatment and this system fulfils all these requirements.

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