



# Decision-Making Model Proposed in Use of Extra/A-shi Acupoints with Traditional Acupoints



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Submission: November 12, 2018; Published: November 27, 2018

## Abstract

Pattern identification is derived from the Yin-Yang theory, which plays a key to the successful treatment outcomes. However, it is hard for acupuncturists to make a right choice when it comes to use of extra/A-shi acupoints alone, traditional acupoints only, or the combination of these acupoints in clinic. This model proposed is based on the Yin-Yang and conducted with palpation, which may make patients feel better in diagnosis and treatment.

**Keywords:** Yin-Yang; The five element; Pattern identification

## Introduction

Traditional Chinese Medicine (TCM), which originated in China with the unique philosophy observing the nature and seeing humans and the nature, has been accepted and viewed as the mainstream medicine over past 2000 years. In addition to the Chinese herbs, acupuncture is surely the modality commonly used by Chinese [1].

The efficacy of acupuncture for relieving pain has been verified with scientific studies, which enables acupuncture to gain more and more popularity and acceptance in the past years and evolve into one of the most used forms of the complementary or the integrative medicine interventions in the West [1]. Historical developments of acupoints indicate that an acupoint is discovered accidentally in the daily life with the specific indications and actions [2].

Acupoints are first discovered as A-shi acupoints, accepted gradually with analysis of indications and actions, and finally included into the meridians. Acupoints used clinically and academically at present are generally divided into acupoints on the traditional fourteen meridians, acupoints not located at the traditional fourteen meridians, such as A-shi acupoints, and extra acupoints [3]. How to make a right decision in selecting acupoint protocols for clinical use is the critical issue.

## Glance at acupoint selection options

A pattern is the essence of TCM that refers to the process of identifying the disharmony underline all of the clinical manifestations. In identifying patterns, an acupuncturist needs to follow the typical way which looks for relationships between humans and nature, and the Zang-Fu organs balance.

This three-acupoint-selection protocol in Figure 1 shows that acupuncturist in practice may face the decision-making issue in terms of using the traditional acupoints only, the extra acupoints only, or the combination of both traditional and extra acupoints. It is beyond doubt that an acupuncturist must choose one out of these choices when it comes to TCM theories of Yin-Yang, the Five Elements, and the historical development of acupoints.

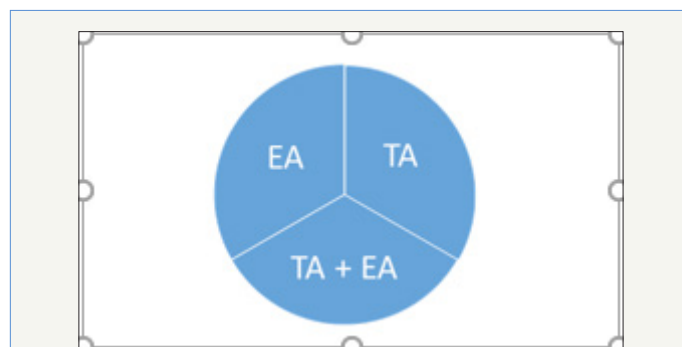
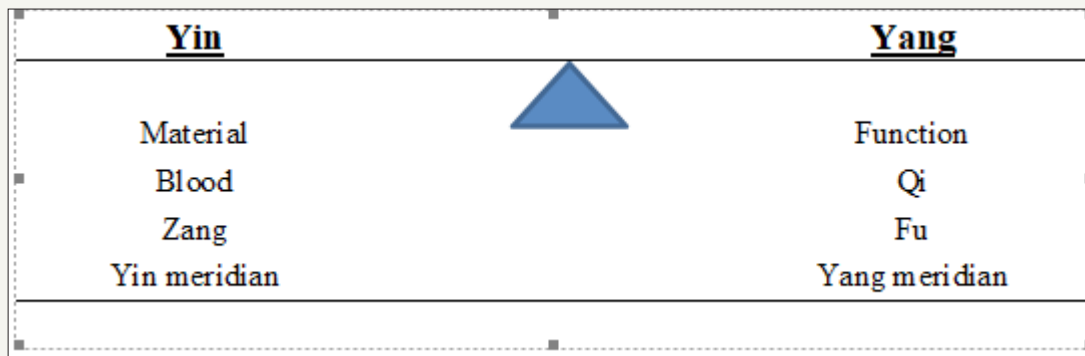


Figure 1: Three-acupoint-selection protocol.

Note: TA for traditional acupoints on the meridians; EA for extra and A-shi acupoints.

TCM focuses on Ying-Yang, Qi, and Blood, which are the four pillars for the explanations of the etiology. A disease is believed to be result of the Yin-Yang imbalance shown in Figure 2, which highlights the importance of the Yin-Yang theory acupuncturists need to consider. Unfortunately, the Yin-Yang and the Five Element theories cannot apply to extra acupoints only because they are included in the traditional fourteen meridians [2].



**Figure 2:** Characteristics of Yin-Yang.

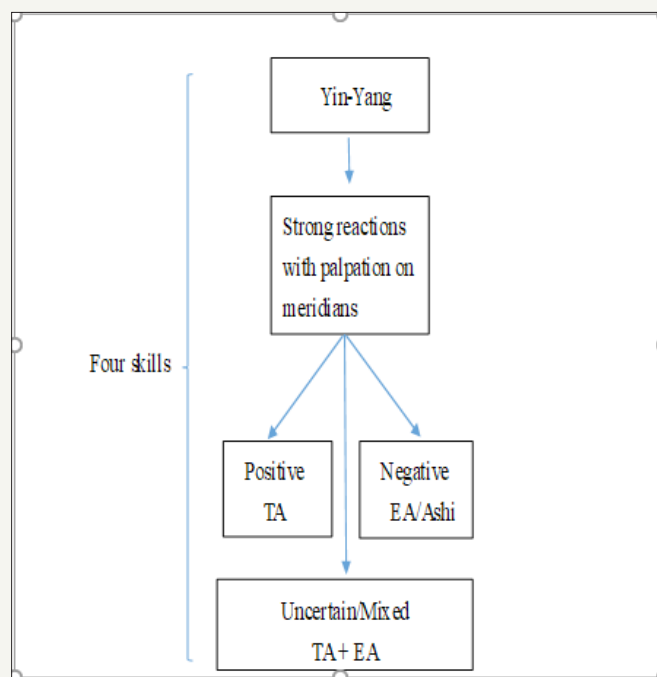
In other words, the possible and feasible model seems to be required for clinical use of either traditional acupoints or extra and A-shi acupoints.

**Model proposed**

Acupuncturists in practice need to follow the patten identification that plays a key to the successful and expected outcomes [4]. Identifying patterns requires the four diagnosis skills, Looking, Smelling, Asking, and Feeling. The historical developments of A-shi acupoints defined as responding acupoints suggest that we

need to consider this feature into the model, even though the Yin-Yang theory cannot apply to Ashi and extra acupoints [3].

It is suggested that an acupuncturist need to bear the golden rule Less needing for best outcomes in mind for patients to feel uncomfortable [3]. The model in Figure 3 is proposed based on Yin-Yang identification with the application of palpation. Palpation is part of the Feeling skill included for the noninvasive feature to provide mobile information with patients’ immediate reactions for the verification of diagnosis and can serve as the feedback for acupuncturists to reconsider and recheck the diagnosis [5,6].



**Figure 3:** Decision-making model in use of Extra/A-shi acupoints with traditional acupoints.

**Conclusion**

In order not to make patients nervous and decrease the pain, the decision-making seems to be a concern for acupuncturists. In this model, four mobile skills are conducted throughout the

diagnosis and treatment for the verification of diagnosis. Palpation is not invasive that can play an essential role to gather the enough information for the clinical practice. However, revision of this model is needed in the future with the clinical experience, though it is effective to some extent up to now.

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