

Four Needles, Five Elements and Six Qi: Treatment using Korean SaAm Acupuncture

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ABSTRACT

SaAm acupuncture is one of the main acupuncture styles of Korean medicine. It encompasses all basic theories of 'standard' Chinese medicine. Additionally, it relies heavily on the theory of the Six Qi (*liu qi*) or Six Climatic Energies. The Six Qi provide a model of balancing climatic meridian energies that can be used either for directly treating disease syndromes or as a framework for treatment of general constitutional and emotional factors of disease. The purpose of this article is to introduce basic SaAm acupuncture theory, and to highlight its specific features and practical approach by discussing some case examples of the author.

INTRODUCTION

SaAm acupuncture evolved about 300 years ago. Its name is attributed to the assumed founder of the system. The term SaAm (舍岩) is a pseudonym. 'Sa' translates to 'dwell' and 'Am' means 'rock' making up a 'person living in a cave'.

According to historical analysis Master SaAm was a Buddhist monk and doctor of Oriental medicine living during the Korean Chosun Dynasty (1392-1910) but there is no further evidence about his true identity or where and when he lived exactly (Kim, 1993). The only remaining manuscript about his original acupuncture concept *SaAm's Essential Rhymes on Acupuncture and Moxibustion* (舍岩道人針灸要訣/SaAm doin chim gu gyeol) was published sometime between 1644 and 1742 (English translation see Lee & Hahn, 2009). Several decades later an individual named Jisan added more extensive comments and case examples to SaAm's own text, which help to understand SaAm's primary descriptions of clinical treatments. Over the centuries, handwritten manuscripts about SaAm acupuncture practice by different individuals were handed down and the system was continually developing.

Today, SaAm acupuncture is widely practised among South Korean traditional medicine doctors. However, it is not well known outside of Korea as lectures and formally published instructional material in non-Korean language have only emerged recently. SaAm acupuncture utilises the *Shu*-Transport

(Five Element) points of the twelve main meridians in 48 basic combinations of four predetermined acupoints to address both the physical and mental-emotional aspects of illness. General introduction to SaAm acupuncture can be found, for example, in Ahn et al. (2010), Jeon (2016), Kim (1994) or Kim (1998).

SaAm acupuncture theory

SaAm acupuncture utilises all basic concepts found in conventional Chinese medicine acupuncture, like the theories of *yin* and *yang*, Five Elements, *zang fu* syndromes, Six Pathogens and Eight Principles. In contrast to TCM it sets special focus on the theory of the Six Climatic Energies or Six Qi (*liu qi*) and offers a special framework to understand emotional factors of disease derived from the concept of the Six Qi. The main objective of this article is to explain these specialties.

The Six Qi

The unique aspect of SaAm acupuncture is to combine the concept of the Six Qi with the energetic qualities of the Five Elements. The Six Qi are mainly described in the *Huang Di Neijing Suwen* chapters 68 to 71. They describe the qualities of climate and weather of the seasons in nature. The Six Qi are *tai yin* (Dampness), *yang ming* (Dryness), *shao yin* (Heat), *tai yang* (Cold), *jue yin* (Wind/inwards movement) and *shao yang* (the light of Ministerial Fire/outwards movement). This climatic understanding is transferred to the human body and the physiological functions of the twelve main meridians.

The combination of the climatic aspects of the Five Element theory with the Six Qi creates a unique understanding of the human body's microcosm and the individual energetic qualities of the twelve meridians as shown in table 1. Note that in SaAm acupuncture, the meridians' climatic nature of the Six Qi is considered dominant to the Five Elements. Therefore, in those pairings where the combination of the two concepts appears to be contradicting, the Six Qi decide for the meridian's main climatic quality. For example, in the Foot *yang ming* Stomach meridian the Five Element characteristic is Earth/Dampness and the *yang ming* quality is Dryness, but the overall climatic characteristic has a drying effect.

The combination of Five Elements with the Six Qi divides the twelve meridians into two main groupings. In six meridians the climatic characteristics of both concepts are identical or congruent, such as the Dampness of Earth and the Dampness of *tai yin* in the Spleen meridian. These meridians carry only one pure climatic quality and therefore have a strong effect

on their respective climatic aspect. Six meridians have a mixed or incongruent quality, such as the Heat of the Fire Element and the inward moving Wind of *jue yin* in the Pericardium meridian. These meridians can influence two climatic aspects simultaneously. But their influence on the main Six Qi climatic aspect is weaker than in the meridians with pure quality.

Table 1: Climatic characteristics of the meridians

Meridian	Five Element characteristic	Six Qi climatic quality	Combined climatic meridian characteristic
Climatic factor: Humidity			
Hand <i>tai yin</i> Lung	Metal (Dry/Cool)	Moisture	Mixed Damp and Cool
Foot <i>tai yin</i> Spleen	Earth (Warm/Moist)	Moisture	Pure Dampness (Warm)
Hand <i>yang ming</i> Large Intestine	Metal (Dry/Cool)	Dryness	Pure Dryness (Cool)
Foot <i>yang ming</i> Stomach	Earth (Warm/Moist)	Dryness	Mixed Dry and Warm
Climatic factor: Temperature			
Hand <i>shao yin</i> Heart	Fire (Hot)	Monarch Fire (Heat/Warm light)	Pure Heat
Foot <i>shao yin</i> Kidney	Water (Cold)	Monarch Fire (Heat/Warm light)	Cold and Heat (at the same time)
Hand <i>tai yang</i> Small Intestine	Fire (Hot)	Cold	Mixed Hot and Cold (= slightly Warm)
Foot <i>tai yang</i> Urinary Bladder	Water (Cold)	Cold	Pure Cold
Climatic factor: Movement of air (Wind = inward) and light (Ministerial Fire = outward))			
Hand <i>jue yin</i> Pericardium	Fire (Heat)	Wind	Mixed Wind-Heat (moving inwards)
Foot <i>jue yin</i> Liver	Wood (Wind)	Wind	Pure Wind (moving inwards)
Hand <i>shao yang</i> Triple Heater	Fire (Heat)	Ministerial Fire (movement of light radiating outward)	Pure Fire (moving outwards)
Foot <i>shao yang</i> Gall Bladder	Wood (Wind moving inward)	Ministerial Fire (movement of light radiating outward)	Mixed Fire and Wood (complex inwards/outwards movement)

The twelve main meridians can be grouped into the three main climatic categories of humidity (Damp vs. Dry), temperature (Cold vs. Hot) and (direction of) movement of light and air (inwards vs. outwards movement) (see table 2). The basic strategy of treating health conditions is to harmonise unbalanced internal climatic conditions with the energy of a meridian that has the opposite climatic quality, by tonification

of a certain quality that is missing. This can be understood as the classical idea of balancing *yin*-problems with a *yang*-factor and vice versa. For example, if we find a very Dry and Cold condition, we can balance this by increasing Moist and Warm aspects. Thus, the tonification of Spleen (Warm and Moist) might be chosen as a treatment. The secondary possibility is to sedate an excess climatic factor directly.

Table 2: Overview of climatic balancing meridians

<i>Yin</i>			<i>Yang</i>	
Dampness				
Dampness			Dryness	
Hand <i>tai yin</i> Lung	Mixed Damp and Cool	↔	Mixed Dry and Warm	Foot <i>yang ming</i> Stomach
Foot <i>tai yin</i> Spleen	Pure Dampness (Warm)	↔	Pure Dryness (Cool)	Hand <i>yang ming</i> Large Intestine
Temperature				
Heat			Cold	
Hand <i>shao yin</i> Heart	Pure Heat	↔	Pure Cold	Foot <i>tai yang</i> Urinary Bladder
Foot <i>shao yin</i> Kidney	Mixed Hot and Cold	↔	Mixed Cold and Hot	Hand <i>shao yin</i> Small Intestine
Movement				
Inward movement			Outward movement	
Hand <i>jue yin</i> Pericardium	Mixed inward – Warm (Warm Wind)	↔	Complex inward-outward movement (light and Wind)	Foot <i>shao yang</i> Gall Bladder
Foot <i>jue yin</i> Liver	Pure Wind (cooling Wind)	↔	Pure outward movement (Warm light of Fire)	Hand <i>shao yang</i> Triple Heater

Mental-emotional treatment

In the 1980s, the concept of meridian energy in SaAm acupuncture was further developed by Hong-Gyeong Kim, a doctor of traditional Korean medicine. He added a model of categories of mental-emotional characteristics found as a distinct feature in each meridian. The treatment principle is identical to physical diseases: Emotional conditions are mostly balanced by increasing the energies of opposite emotional quality or sedating the excess condition directly (Kim, 1991, 1994).

Each mental-emotional category is represented by two opposing emotional qualities that balance each other. The classification

of these qualities is the same scheme as the climatic categories of the Six *Qi*. The meridians associated with these emotional states are responsible for creating specific emotional states. The *Yin* meridians reflect the satisfaction or positive feelings of each mental aspect. The *yang* meridians are associated with dissatisfaction or negative feelings. Thus, the presence of an unhealthy abundance of either satisfaction or dissatisfaction of an emotional quality can be balanced by tonification of the opposing meridian. (Jung, 2019). See table 3 for descriptions of the mental-emotional categories.

Table 3: Overview of mental-emotional categories in SaAm acupuncture

	Satisfaction – <i>yin</i> meridians	Dissatisfaction – <i>yang</i> meridians
1st level: Need for food, nutrition and material resources Satisfaction and dissatisfaction in relation to: <ul style="list-style-type: none"> • food and nutrition • money, financial resources • material possessions • housing/shelter 	Hand tai <i>yin</i> Lung: Satisfaction when having (enough) money, shelter, material resources. Includes feelings of: <ul style="list-style-type: none"> • richness, generosity • relaxation, comfort 	Foot yang <i>ming</i> Stomach: Feelings of <ul style="list-style-type: none"> • not having enough money or material resources • ‘noble poverty’ • absence of greed
	Foot tai <i>yin</i> Spleen: Feelings in relation to having enough food/drink/nutrition: <ul style="list-style-type: none"> • content and satiated like after a satisfying meal • dull, lazy and without motivation to be active like when overeating, indecisiveness 	Hand yang <i>ming</i> Large Intestine: Feelings in regards of not having enough food and drink: <ul style="list-style-type: none"> • anxiety • clear, headed, sharp, alert like in a hungry state • straightforward, decisive motivation and drive
2nd level: Need for emotional fulfilment Satisfaction and dissatisfaction in relationship to: <ul style="list-style-type: none"> • romantic feelings and love • sexual pleasure • aesthetic/artistic enjoyment 	Hand shao <i>yin</i> Heart: Satisfaction with feelings of losing oneself in pleasure: <ul style="list-style-type: none"> • romantic, aesthetic, or emotional joy and happiness • sense of humour • passion for what you strive for • motivation to make a sacrifice 	Foot tai yang Urinary Bladder: Negative emotions with ‘cold’ feelings such as: <ul style="list-style-type: none"> • alertness • anxiety, fear, phobia • fear of death
	Foot shao <i>yin</i> Kidney: Satisfaction from losing oneself in: <ul style="list-style-type: none"> • erotic or sexual joy and happiness • sexual drive • ‘flow’-experience 	Hand tai yang Small Intestine: Fear in combination with happiness (Fire and Water) creating attention, protective feelings and caretaking.
3rd level: Intellectual and power needs Satisfaction and dissatisfaction in relation to: <ul style="list-style-type: none"> • status • ego, power • knowledge, skills, intellect • academic/professional achievement • assertiveness, self-esteem 	Hand jue <i>yin</i> Pericardium: Satisfaction obtained from acquisition of: <ul style="list-style-type: none"> • knowledge, technical/academic skills • More related to intellectual performance than assertiveness and power • Includes the mental function of acquiring and storing knowledge and memories 	Foot shao yang Gall Bladder: Dissatisfaction with feelings of: <ul style="list-style-type: none"> • anger, shame, inferiority, humiliation • criticism, explosive, revolutionary spirit, bravery • desire to give guidance, advice or to patronise
	Foot jue <i>yin</i> Liver: Satisfaction due to having or obtaining: <ul style="list-style-type: none"> • high self-esteem/self-consciousness • power, influence or status • more related to power, status and assertiveness than knowledge 	Hand shao yang Triple Heater: Feelings of: <ul style="list-style-type: none"> • inferiority, sarcasm, knowing too little • Includes the function of forgetting or ‘deleting’ memories and emotional trauma

Please note that an excess of positive emotions can also result in unhealthy mental states. For example, the second level is related to the satisfaction of 'needs for emotional fulfilment'. Compulsion of too much losing oneself in positive pleasure may result in negative consequences. In the extreme, this can end up in thrill-seeking or escapism from the responsibilities of everyday life and can lead to psychopathological syndromes like deviant sexual behaviour or drug addiction. The dissatisfaction side of the mental-emotional dimensions does not mean it is completely negative and undesirable although it contains negative emotions. To a reasonable degree the emotions associated with the *yang*-meridians have important functions for a healthy mental state because they balance an excess of the positive *yin*-side and can establish motivational factors in certain situations. For example, the emotions of inferiority, frustration and anger associated with *shao yang* Gall Bladder can give a person the drive to change an unacceptable or unsatisfying situation.

The mental-emotional aspect of SaAm theory has many clinical applications that cannot be discussed in this short text but unfold once the model is understood. For instance, the meaning of the Triple Heater, in contrast to traditional Chinese medicine theory, is to be the 'mental waste disposal' of the organism. Specifically, this means Triple Heater energy helps to get rid of mental-emotional 'waste'. Thus, Triple Heater tonification is applied to drain a person's mind from traumatic or psychologically negative memories due to post-traumatic stress disease or childhood trauma.

SaAm point combinations and needling method

Each of the 12 meridians can be addressed with a tonification and sedation strategy, resulting in 24 basic acupuncture point prescriptions.¹ Each of these prescriptions uses four predefined

acupoints from the *shu*-transport-points (Five Element Antique points 五俞穴, Korean: 오수혈). The selection of points as well as their tonification or sedation is decided upon based on the promoting and controlling cycle of Five Element theory. The first two needles follow the principle of using the promoting cycle as described in *Huang Di Neijing Suwen*, chapter 69: 'In cases of deficiency tonify the mother; and in cases of excess sedate the son'. Master SaAm's genius was to expand the point prescriptions by adding two more points utilising also the controlling cycle and in that way exerting increased influence on the manipulated meridian's energy. The tonification strategy is named by the Korean term *jeong gyeok*. Sedation is named *seung gyeok*.

1. Tonification method: *jeong gyeok* (정격)

- **Promoting cycle:** 1st point: tonify the mother point of the own meridian; 2nd point: tonify the element point of the mother meridian
- **Controlling cycle:** 3rd point: sedate the grandmother point of the own meridian; 4th point: sedate the element point of the grandmother point

2. Sedation method: *seung gyeok* (승격)

- **Promoting cycle:** 1st point: sedate the son point of the own meridian; 2nd point: sedate the element point of the son meridian
- **Controlling cycle:** 3rd point: tonify the grandmother point of the own meridian; 4th point: tonify the element point of the grandmother meridian

Table 4 shows the point combinations for tonification and sedation for all 12 meridians according to the principles described above. In clinical practice the tonification strategy (*jeong gyeok*/JG) is used for most cases (about 85 per cent).

Table 4: Point combinations for tonification and sedation of the twelve meridians

Meridian	<i>Jeong gyeok</i> (JG): Tonification strategy				<i>Seung gyeok</i> (SG): Sedation strategy			
	Tonify		Sedate		Tonify		Sedate	
Lung (Lu)	Lu 9+	Sp 3+	Lu 10-	Ht 8-	Lu 10+	Ht 8+	Lu 5-	Ki 10-
Large Intestine (LI)	LI 11+	St 36-	LI 5-	SI 5-	LI 5+	SI 5+	LI 2-	Bl 66-
Stomach (St)	St 41+	SI 5+	St 43-	GB 41-	St 43+	GB 41+	St 45-	SI 1-
Spleen (Sp)	Sp 2+	Ht 8+	Sp 1-	Liv 1-	Sp 1+	Liv 1+	Sp 5-	Lu 8-
Heart (Ht)	Ht 9+	Liv 1+	Ht 3-	Ki 10-	Ht 3+	Ki 10+	Ht 7-	Sp 3-
Small Intestine (SI)	SI 3+	GB 41+	SI 2-	Bl 66-	SI 2-	Bl 66-	SI 8+	St 36+
Urinary Bladder (Bl)	Bl 67+	LI 1+	Bl 40-	St 36-	Bl 40+	St 36+	Bl 65-	GB 41-
Kidney (Ki)	Ki 7+	Lu 8+	Ki 3-	Sp 3-	Ki 3+	Sp 3+	Ki 1-	Liv 1-
Pericardium (P)	P 9+	Liv 1+	P 3-	Ki 10-	P 3+	Ki 3+	P 7-	Sp 3-
Sanjiao /Triple Heater (TH)	TH 3+	GB 41+	TH 2-	Bl 66-	TH 2+	Bl 66+	TH 10-	St 36-
Gallbladder (GB)	GB 43+	Bl 66+	GB 44-	LI 1+	GB 44+	LI 1+	GB 38-	SI 5-
Liver (Liv)	Liv 8+	Ki 10+	Liv 4-	Lu 8-	Liv 4+	Lu 8+	Liv 2-	Ht 8-

¹ SaAm acupuncture has also a warming and cooling strategy consisting also of 24 four-point combinations. Clinically these are only seldom used and not in the scope of this article. This makes up for 48 standard point prescriptions.

For tonification and sedation of acupuncture points Korean acupuncturists largely use the same methods also established in classical Chinese medicine, namely inserting the needle in or against the meridian flow, inserting while inhaling or exhaling, removing the needle while exhaling or inhaling, and closing or leaving the point open when removing needles.

Additionally, many SaAm practitioners apply a complex yet effective principle of clockwise or counter-clockwise needle rotation, taking into account the *yin* and *yang* factors of the particular meridian, side of the body, upper or lower limbs, time of day and the patient's gender (Ahn et al., 2010). This method was described by Lee Chan (李滄) in the classic *Yi Xu Ru Men* (醫學入門/Introduction to Medicine) in 1575, but is beyond the scope of this article (Lee, 2018). Clinically every SaAm four-point prescription is applied only unilaterally on the right or left extremities. Following traditional rules, the four points are used on the right for women and on the left for men except for one-sided conditions where the SaAm pattern is administered contralateral to the diseased side.

Combining the SaAm four needle strategy with supplemental treatment

The central SaAm treatment strategy can be supplemented usually on the opposite side of the body by needling additional acupuncture points or using moxibustion, *gua sha* and other treatment methods.

The task of this procedure is to have an extended treatment for disease aspects not covered by the selected main SaAm approach such as addressing the disease from other Oriental medicine perspective, treating secondary conditions or symptomatic and reactive points. SaAm acupuncture is an open system and it is no problem to select points from a broad theoretical or methodological background. This could be for example *zang fu* theory, Eight Extraordinary Vessels, Master Tong acupuncture, ear acupuncture, Korean hand acupuncture and so forth (Choo, Brüch, Janowitz, 2017). In more advanced SaAm acupuncture there is also the possibility to use several four-point combinations in one treatment or to apply only selected points from a four-needle strategy.

Modalities of treatment in SaAm acupuncture

As already explained, the four-point combinations not only function to treat climatic imbalances and mental emotional conditions but to also address all major conventional disease categories of standard Chinese acupuncture. This makes SaAm acupuncture a comparatively fast and easy to use acupuncture style. In summary, the treatment with the SaAm tonification and sedation strategies can be classified in the following four main categories (Choo, Brüch, Janowitz, 2017):

1. Local channel treatment: In case a condition is allocated to the pathway or area covered by a particular meridian, for example, pain from trauma or *bi* syndrome, the meridian's Upright Qi (*zhen qi*) usually is strengthened with the tonification strategy *jeong gyeok*.

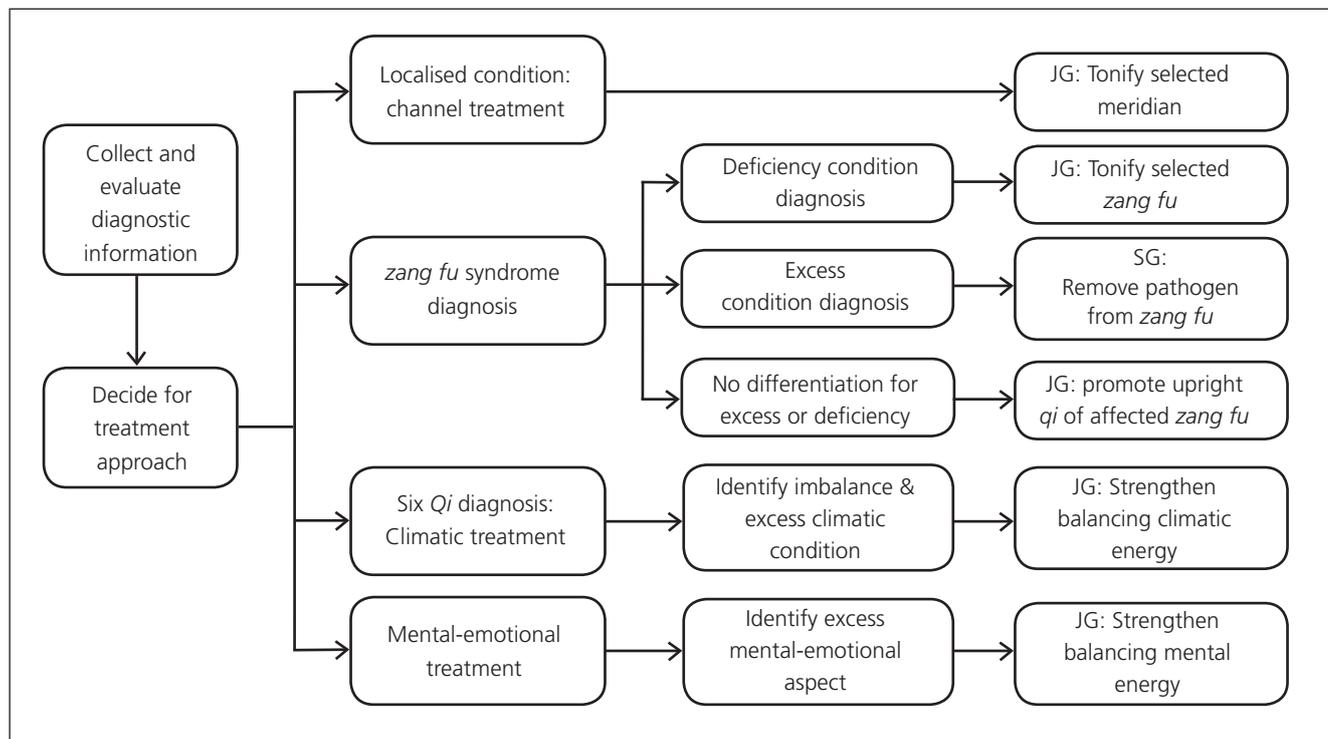
2. Treatment according to *zang fu* syndrome diagnosis: Conditions explained by *zang fu* theory can be directly treated with the point combination related to the affected organ. In SaAm acupuncture all *zang fu* diagnoses are classified according to deficiency or excess conditions. In case of deficiency the upright *qi* is considered weak and in excess there is an overabundance of pathogenic *qi* (Cha et al., 2014). This means all syndrome patterns of a particular *zang fu* usually classified as deficiency can be addressed by the *jeong gyeok* combination (JG). Diagnoses in the excess category can be treated with *seung gyeok* (SG). For example, Liver JG addresses Liver blood deficiency, Liver *yin* deficiency or Liver Wind due to Blood deficiency. Liver sedation (SG) is used for Liver *yang* rising, Liver Wind, Liver Heat, Liver Fire, etc. A more general approach is to address a *zang fu's* imbalance by not even making a differentiation between excess and deficiency, but instead following in every case the idea of always boosting the upright *qi* of the diseased organ with the point combination of *jeong gyeok* in order to correct the problem. For instance, simple Liver *qi* stagnation can be addressed following this principle (Choo, Brüch, Janowitz, 2017). The detailed theoretical rationale for these approaches goes beyond this article. However, this makes SaAm acupuncture an easy to use method in case of *zang fu* syndromes because the practitioner does not need to memorise and apply so many point combinations as in conventional Chinese medicine, instead it follows a universal principle for point selection.

3. Six Qi climatic treatment: This modality follows the above described model of climatic conditions. The diagnosed climatic disharmony is usually balanced by tonification of the opposing climatic factor. For example, signs and symptoms that indicate a general tendency to let too much energy or bodily fluids go to the outside, combined with Heat signs like acne, sweating, inflamed skin conditions or hot flushes can be balanced by promoting the Liver's astringent, inwardly directed, moving and cooling Wind characteristic according to Six Qi theory. This can be due to pathogenic influences or long-time constitutional factors.

4. Mental-emotional treatment: This category covers problems that can be understood and treated by Dr Hong-Gyeong Kim's model of mental-emotional conditions that has been described above. For example, Foot *jue yin* Liver meridian's tonification promotes self-esteem and assertiveness. This balances Hand *shao yang* Triple Heater's characteristic feelings of inferiority, sarcasm or low self-confidence.

An overview of these four treatment categories is shown in chart 1. In clinical practice it often happens that several of these modalities may overlap. Thus, considering multiple analytical perspectives is helpful to understand the patient's disease and select the best meridian for treatment.

Chart 1: Treatment modalities and steps to selecting a meridian for treatment



Case examples

For the following case descriptions, it should be pointed out that treatment interventions chosen additionally to the main SaAm strategy are the author's personal approach: Combining SaAm acupuncture with points selected according to conventional Chinese medicine principles plus moxibustion Korean and Japanese style. The supplemental treatment can greatly vary according to the practitioner's individual style and preferences. The particular cases were selected to highlight the different modalities of localised channel treatment, *zang fu* syndrome pattern treatment, treatment according to Six Qi climatic energies and mental-emotional treatment or the overlap of these modalities. This all can be covered using the 24 basic point prescriptions.

Case 1: Female, 29 years, chronic migraine headache.

The patient has been suffering from migraine headache since age 21 with the last three years becoming considerably worse. She has temporal burning pain on the right side with a feeling of her 'head melting from heat'. The pain is accompanied by nausea and dizziness. Her head feels like wrapped in cotton and dull. The headache gets worse with change of weather especially when the conditions turn wet. When there is not an acute attack of migraine, she suffers from headaches every day continuously. She has little thirst and likes cold drinks. She has hypothyroidism and

is extremely adipose. After eating greasy food, she gets diarrhoea. Her facial skin is blemished and oily. Pulse: fast, superficial, thin and slippery with little force in the deep position, thready-full at the Liver/Gall Bladder and Spleen/Stomach position. Tongue: normal coloured body with red spots, very wet (lots of saliva) with a greasy, yellow coating in a stripe along a decent stomach crack, her under-tongue veins are extended.

Diagnosis: Climatic excess of Dampness and Heat according to Six Qi theory.

Treatment: SaAm strategy: Large Intestine *jeong gyeok* (LI tonification: LI 11 *qu chi*+, St 35 *du bi*+, LI 5 *yang xi*-, SI 5 *yang gu*-) on the right side. Supplemental points: needling of Sp 9 *ying quan*, LI 4 *he gu*; EXP *tai yang*, Liv 3 *tai chong*, GB 38 *yang fu*-, hardened muscles of the shoulder-neck area treated with needles and rice corn moxa (e.g. GB 20 *feng chi*, Bl 10 *tian zhu*, GB 12 *wang gu*, trapezius muscle, levator scapulae).

Discussion: This case is an example of the main treatment strategy derived exclusively from Six Qi climatic considerations with other pathophysiological aspects (like *zang fu* syndrome or channel reference of the pain) left out completely. The patient very clearly has a Damp-Heat constitution according to

Six Qi theory with Dampness predominating. She shows this in many signs and symptoms as well as in her tongue and pulse information. However, according to SaAm constitutional ideas the extreme obese physical build alone would be enough to decide on an excess of *tai yin* (Dampness). Since *yang ming* Large Intestine energy is the most drying energy of all meridians and additionally has a cooling effect, tonification of Large Intestine is balancing this condition. The supplemental points are chosen to directly address Dampness in her digestive system (Sp 9 *yin ling quan*), enable the upward and downward movement of clear and turbid fluids and remove internal Wind (LI 4 *he gu*), move qi stagnation (Liv 3 *tai chong*), and reduce Heat in the Gall Bladder meridian as concluded from the pulse and location of pain (GB 38 *yang fu*).

Case 2: Male, 44 years, allergic rhinitis and allergic asthma.

The condition is persistent since early puberty. The patient is allergic to the hair of cats and dogs. His symptoms after contact with animal hair are dyspnoea, cough and sneezing with little or no sputum. He contracts trivial cold and rhinitis easily and too often which then shows unusual persistent progression. His physical build is moderately overweight, he has always felt warm since early childhood and is seldom freezing in cold weather conditions. Tongue: normal colour but red and thin at the lung area with teeth-marks, also teeth-marks on the sides of the tongue, very little coating. Pulse: fast and thin, weak at Spleen and Lung position. Kidney *yin* and *yang* position also deficient.

Diagnosis: *Zang fu*: Lung *yin* deficiency with Heat, Spleen *qi* deficiency, some Kidney deficiency; Six *Qi*: excess of Heat and Dampness.

Treatment: *SaAm strategy*: Lung *jeong gyeok* (Lu tonification: Lu 9 *tai yuan+*, Sp 3 *tai bai+*, Lu 10 *yu ji-*, Ht 8 *shao fu-*) and Large Intestine *jeong gyeok* (LI tonification: LI 11 *qu chi+*, St 36 *zu san li+*, LI 5 *yang xi-*, SI 5 *yang gu-*) on the left body side in interchange of treatment sessions, with Lung JG preferably at times when more respiratory discomfort is present. Supplemental points: Right side and on the back. Needling: Ki 7 *fu liu*, Sp 5 *shang qiu*, St 36 *zu san li*, Ren 12 *zhong wan*, EXP *ding chuan*. Rice corn moxa: LI 4 *he gu*, LI 11 *qu chi*, Lu 5 *chi ze*, Du 12 *shen zhu*.

Discussion: This case highlights a combination treatment after *zang fu* syndrome diagnosis and Six Qi climatic aspects. First, the point combination of Lung JG addresses mainly the Lung *zang fu* deficiency syndrome by tonification and boosting the upright *qi* of the respiratory system. The alternating tonification of the Large Intestine meridian here has a twofold aspect. The physical build and general feeling of always being warm shows a moderate constitutional excess of Dampness (= overweight) and Heat. *Yang ming* Large Intestine climatic energy is cooling and drying and thus balancing these factors. Additionally, in SaAm theory *yang ming* Large Intestine energy is corresponding to the immune

system and therefore is often tonified in conditions of weak immune function. *Supplemental points*: Ki 7 *fu li* and Sp 5 *shang qiu* (metal points) are selected to tonify Kidney and Spleen energy with the supposed connection to also influencing the immune system function corresponding to the Metal element. St 36 *zu san li* and Ren 12 *zhong wan* strengthen Spleen *qi*, *ding chuan* calms dyspnoea and wheezing. LI 4 *he gu*, LI 11 *qu chi* and Du 12 *shen zhu* reduce Wind, regulate the defensive *qi* and are used in Korean and Japanese moxibustion to boost immune function. Lu 5 *chi ze* is used as a reactive moxa point for respiratory conditions.

Case 3: Male, 52 years, calcaneal spur. This patient is standing and walking a lot in his profession. For several months stabbing and burning pain is present in the right heel with a focus spot close to Ki 2 *ran gu*. Repeated shock wave therapy, heel cushioning and medical insoles showed no effect. In his former profession as an artisan he was working for several years while sitting on his knees a lot in a cold environment, he had kidney stones seven years ago and often has cold hands and feet.

Diagnosis: Weakness of upright *qi* in the Kidney meridian, from Six Qi perspective the climatic factor of *tai yin* (cold) is in excess.

Treatment: *SaAm strategy*: Left side Kidney *jeong gyeok* (Ki tonification: Ki 7 *fu liu+*, Lu 8 *jing qu+*, Ki 3 *tai xi-*, Sp 3 *tai bai-*). Supplemental points at the side of pain (right): First needling *ah shi* points at the heel, in a second step extensive rice corn moxa covering the whole area of pain.

Discussion: This case shows the possibility of a relatively phenomenological approach in SaAm acupuncture disregarding any information from pulse or tongue diagnosis when treating conditions that can be allocated to the local distribution of a meridian. Kidney JG is chosen to strengthen the upright *qi* of the Kidney channel here solely because of the problem's location. Such a simple and fast approach of identifying the location of a musculoskeletal problem and then tonifying the related channel (JG) is very often applied in SaAm acupuncture. From a *zang fu* perspective it might be argued that this patient shows signs of Kidney *yang* deficiency as well. As already explained, the tonification strategy of *jeong gyeok* covers all different diagnoses of deficiency. Hence, it is not needed to choose special points for Kidney *yin* or *yang* deficiency. From Six Qi perspective his constitution is diagnosed as *tai yin* (= Cold) excess that can be balanced by using the *shao yin* Heat of Kidney energy.

Case 4: Male, 57 years, chronic gastritis. He was sent by his gastroenterologist, because biomedical therapy had no further effect. Three years ago, he was diagnosed with gastritis including massive petechial bleeding in the stomach and oesophagus. His symptoms are bloating, heartburn, abdominal tension, acid regurgitation, stomach pain, loss of appetite and frequent ravenousness.

Proton pump inhibitors and later antiemetic medication were raised over time to the maximum permissible dosage but showed only temporary improvement. The patient often wakes up at night due to stomach pain. With vocational stress his symptoms get worse. His build is skinny-emaciated and he has lost an additional 4 kgs in the past few months. He is easily freezing with cold hands and feet. He is also suffering from allergic rhinitis and frequent muscular cramps. Tongue: teeth-marks, many transversal and longitudinal cracks, little coating, red and completely peeled in the Stomach area with a large longitudinal Stomach crack. Pulse: full, fast and superficial, weak at the Spleen position, full-wiry pressure at the Stomach and Small Intestine position.

Diagnosis: *Zang fu*: Spleen *qi* deficiency, Stomach *qi* stagnation, Heat and *yin* deficiency with counterflow of *qi*, secondary Blood deficiency. *Six Qi*: Emaciated physical build and lack of tongue coating means an excess of yang ming Dryness, his general tendency to freeze can be understood either as an excess of *tai yang* Cold or as a stagnation of *shao yin* Heat stuck in the middle burner not moving to the extremities.

Treatment plan over a course of six months: *SaAm strategy*: Predominantly Spleen *jeong gyeok* (Sp tonification: Sp 2 *da du+*, Ht 8 *shao fu+*, Sp 1 *yin bai-*, Liv 1 *da dun-*), in some sessions Stomach *jeong gyeok* (St tonification: St 41 *jie xi+*, SI 5 *yang gu+*, St 43 *xian gu-*, GB 41 *di wu hui-*), in sessions when the patient reported increased stress Pericardium *jeong gyeok* (PC tonification: P 9 *zhong chong+*, Liv 1 *da dun+*, P 3 *qu ze-*, Ki 10 *yin gu-*). Supplemental treatment: Needling Sp 4 *gong sun*, P 6 *nei guan*, Sp 6 *san yin jiao*, Liv 3 *tai chong*; cone moxa on Liv 13 *zhang men*, Ren 12 *zhong wan*, Ren 9 *shui fen*; rice corn moxa on painful, reactive spots of all acupoints in the upper abdomen with palpation of the *ren*, Kidney, Stomach, Liver and Spleen meridian. This makes up to 10-15 reactive moxa points on the abdomen depending on the present state.

Discussion: This case shows a combined approach of *Six Qi* constitutional perspective and *zang fu* syndrome. The use of tonification of Spleen (JG) here has a twofold purpose. First, it addresses problems of Spleen deficiency. Second, according to *Six Qi* theory increasing *tai yin* Spleen energy means strengthening the climatic factors of Dampness and Warmth therefore balancing the Dry and somewhat Cold constitution of this patient. The rationale of using the tonification of Stomach JG not so often here is to not increase the Stomach's *yang ming* drying climatic energy because of the predominating Dryness. However, as both Spleen and Stomach are Earth element, tonification of their (slight) climatic warmth can cool down the intensive stagnated Heat in the intestines by putting out Fire with Earth and moving stagnation in the middle burner to guide out the general cold (freezing extremities). According to *SaAm* mental-emotional theory *jue yin* Pericardium improves feelings of self-assertiveness

and competence in relation to issues of skills and knowledge and can be used to reduce symptoms due to professional stress. Also, the Pericardium channel has an inner branch reaching into the stomach to move stagnation in the digestive system with the Pericardium's climatic moving aspect of Wind. The supplemental acupoints are used to direct counterflow *qi* downwards (Sp 4 *gong sun*, P 6 *nei guan*), tonify Spleen *qi* and *yin* (Sp 6 *san yin jiao*), move Liver *qi* stagnation (Liv 3 *tai chong*), furthermore improve Spleen *qi* and the digestive system (Liv 13 *zhang men*, Ren 9 *shui fen*, Ren 12 *zhong wan*), and remove *qi* stagnation in the abdominal area with rice corn moxa.

Case 5: Female, 54 years, tinnitus, dizziness, neck pain and hot flushes. For the last nine months she has suffered from a feeling of pressure wandering up the neck to the temples and top of the head, dizziness, neck pain, occipital headaches, the feeling of pressure behind the eyes, hot flushes and repeated nausea during a situation with a lot of emotional stress. About five weeks ago she started to have tinnitus with a high pitch and a pulsating feeling in her right ear. Consulting with her GP and ENT specialist resulted in no findings. Her orthopaedist thought her condition might be due to some problem in her cervical spine but physiotherapy and osteopathic treatment had no lasting effect. Since about four weeks she also has some sleeping disorders. Abdominal diagnosis shows sensitive, hardened spots at the Korean-style localisation of Liver and Gall Bladder *mu*-alarm points. Tongue: red on the Heart and Liver area; pulse: fast, thin, weak with both distant pulse positions representing the upper burner comparatively fuller and the pulse position for Kidney *yin* empty.

Diagnosis: *Six Qi*: Flaming up of *shao yang* Ministerial Fire. *Zang fu*: Liver Yang rising with Liver and Kidney *yin* deficiency.

Treatment: *SaAm strategy*: Gall Bladder *seung gyeok* (GB sedation: GB 38 *yang fu-*, SI 5 *yang gu-*, GB 44 *zu qiao yin+*, LI 1 *shang yang-*) left side, supplemental points: LI 4 *he gu*, Sp 6 *san yin jiao*, Ki 3 *tai xi*, TH 17 *yi feng*, SI 19 *ting gong*, GB 20 *feng chi* on the right, needling and rice corn moxa on muscular trigger points in the shoulder-neck area.

Discussion: According to Hong-Gyeong Kim's mental emotional theory excess negative emotions like anger, aggression, frustration, or feeling of lack of power and self-confidence are associated with *shao yang* Gall Bladder. In *Six Qi* theory Ministerial Fire is related to the climatic characteristics of *shao yang*. Emotional disturbance can create an upward flaming of Ministerial Fire which shows in typical signs of alleviated stress like hot flushes, headache, tinnitus, etc. Therefore, many physical symptoms which are understood as Liver *yang* rising in standard TCM can be interpreted as excess of *shao yang* Gall Bladder energy from a *Six Qi* perspective (Gary, 2012). To reduce this

excess, Gall Bladder *seung gyeok* (sedation) is applied here. In SaAm acupuncture this approach is clinically the most often and very effectively applied sedation strategy because of our modern life's stress and daily hassles. Supplemental treatment is used to improve movement of clear and turbid fluids and remove internal Wind (LI 4 *he gu*), tonify *yin* (KI 3 *tai xi*, Sp 6 *san yin jiao*), improve local circulation of the ear (SI 19 *ting gong*, TH 17 *yi feng*) and relax the muscles of shoulder and neck.

CONCLUSION

Fruehauf (1999) argues that in modernised TCM aspects of 'old school' classical Chinese medicine have been omitted for practical or political reasons, either to adapt it to westernised medical thinking or to cut out some of its many branches in order to make Chinese medicine less complex and fit into the political setting of Mao's China. It is the author's opinion the Six Qi might be one of the concepts that has suffered this development, but it has been further developed and has flourished in Korean SaAm acupuncture.

The Six Qi create a more complete understanding of the 12 main meridians and their true meaning. The meridians' full naming such as Hand *yang ming* Large Intestine or Foot *shao yin* Kidney clearly carries the correspondence to their Six Qi climatic characteristics. SaAm acupuncture fully incorporates this often disregarded aspect

of meridian energy. The theory of Six Qi is combined with the Five Elements to create a climatic understanding of human physiology. Based on the Six Qi, Hong-Gyeong Kim's mental-emotional theory offers a framework for the psychological aspects of meridian energy. These approaches add two more layers to the standard modalities of Chinese medicine.

Additionally, the three climatic dimensions of humidity (overweight vs. skinny), temperature (hot vs. cold general sensations) and movement of Wind are utilised for a concise constitutional model. A general excess of any of these qualities can be interpreted as constitutional imbalance. By balancing this excess with the energy of a meridian having opposite climatic quality the body can be supported to heal itself from the present condition. This feature of SaAm acupuncture reflects the main distinguishing character of Korean medicine in comparison to Chinese medicine: To rely more on constitutional factors and focus less on treating specific disease patterns.

Overall, these differences from Chinese medicine at first make it somewhat confusing for the practitioner to consider all possible perspectives for diagnosis and treatment. However, after some clinical practice the systematic approach, the use of only four needles for the main treatment strategy and the constitutional approach provide a useful and fast toolbox to fight our patients' diseases.

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