

Topic: Qigong Enhanced Acupuncture

Hypothesis

Treatment effectiveness and efficacy can be increased when acupuncture techniques are combined with Medical Qigong methods and principles.

Discussion

Most acupuncturists know that one's intention leads qi (yi yi ling qi), and figuratively if not literally keep this important concept in mind when treating patients. Practitioners use different techniques to affect the flow of qi, based on their experience, training, styles of acupuncture they practice, and where they went to school. Many, although not all, acupuncture schools provide an introductory qigong course. While students recognize that qigong is a pillar of Chinese medicine, very few learn how to treat patients using qi emission or how to combine external qigong and acupuncture.

I became intrigued with qi emission when I had clinical training at the Shanghai University of Traditional Chinese Medicine in 2004. I was doing clinical rounds at Long Hua Hospital, but having just arrived in China from the States after a long flight I was jet lagged, had a sore throat, a stuffy nose, and felt feverish. I asked Dr. Chen, a senior doctor I was following to give me an acupuncture treatment so I could get some relief. Dr. Chen inserted a one-and-a-half-inch needle a fraction of an inch into the crease of my right elbow (LI 11). With that single insertion, my sore throat, nasal congestion, and fever disappeared. Some acupuncturists can manipulate the body's qi, and direct it to any area within the patient's body. Whereas ordinary doctors might use a dozen needles, the best use just a few to treat many health problems. Dr. Chen was one of them, accounting for why the shaft of the needle in my arm continued pulsating minutes after he had inserted it. The needle vibrated from the powerful qi that Dr. Chen had transmitted through the needle and into my body.¹

That experience inspired me to deepen my study of qigong and to integrate it into my acupuncture practice. I feel I've gotten faster results using fewer needles when I combine qigong with acupuncture using what I call, for lack of a better term, "Qigong Enhanced Acupuncture." When treating patients, I visualize the needle as a conduit of light energy traveling along the channel to clear blockages and to heal the problem area. There are cursory references in the Chinese medical literature as well as in the current media about acupuncturists emitting qi into inserted needles to enhance or direct qi flow instead of via mechanical or electrical stimulation. However, there are very few detailed explanations on how to do it or why it is effective. As part of my

¹ Hon K. Lee, *Paths Less Travelled of a Scholar Warrior (Spy) Teacher Healer*, CreateSpace, North Carlestown, SC, 2014, Page 252-253

research study, I wish to find out to what extent today's acupuncturists use qigong into their treatment protocols.

Research – Part 1

“Studies that employ multiple practitioners are needed to produce evidence about what might be expected from practitioners in general. However, no studies have yet been published employing multiple practitioners. Thus the existing studies present data on single practitioners, which may not be representative of other practitioners.”²

With the above in mind, I sent out a survey questionnaire to find out: (a) how many of acupuncturists surveyed practice qigong? (b) Of those practicing qigong, how many combine qigong with acupuncture, and (c) What specific qigong techniques do they use and how do they use them? I assumed that each respondent would have a unique approach in treating patients based on their individual experience and training. However, with a large enough sampling, I believed I could find common threads and underlying principles among the varied techniques.

My goal was to come up with a short list of best practices that would not only be therapeutically effective, but also could be efficiently applied in a busy clinical setting. I sent the survey in April 2017 to acupuncturists in Virginia, Maryland, and Washington D.C. I also posted a link on the pages of acupuncture groups on Facebook and to acupuncturists I found through referrals, word of mouth, or on websites (including the Qigong Institute website and the International College of Medical Qigong). Within a month, I received over 100 responses. Below are the summary responses, my analysis and discussion:

Survey summary:

1 * Where did you receive your acupuncture training?

	Number of Responses
	109

2 * How many years have you been in acupuncture practice? ↻

² Natural Medicine Journal, *An Evidence-based Review of Qi Gong by the Natural Standard Research Collaboration*, May 2010 Vol 2 Issue 5

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Answer	0% 100%	Number of Responses	Response Ratio
Less than 5 years.		27	24.7%
Between 5 and 10 years.		24	22.0%
More than ten years		30	27.5%
More than 20 years		28	25.6%
	Totals	109	100%

3 *** Have you studied or practiced Qigong?**

Answer	0% 100%	Number of Responses	Response Ratio
Yes		104	92.8%
No		2	1.7%
Other (View all)		3	2.6%
No Responses		3	2.6%
	Totals	112	100%

4 *** Where did you learn Qigong? Check all that are applicable.**

Answer	0% 100%	Number of Responses	Response Ratio
During acupuncture school		56	54.9%
Through self-study		44	43.1%
From a qigong instructor		76	74.5%
In person from an institution or program		39	38.2%
Online		12	11.7%
Other (View all)		22	21.5%
	Totals	102	100%

5 **Please briefly describe the name of the qigong style your learned or practice, and the general content of your qigong training.**

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	Number of Responses
View Text Answers	89

6 * Do you currently practice Qigong on a regular basis?

Answer	0%100%	Number of Responses	Response Ratio
No		11	9.8%
Yes		74	66.0%
Other (View all)		17	15.1%
No Responses		10	8.9%
Totals		112	100%

7 * Your Qigong practice includes which of the following? Please check all that are applicable.

Answer	0%100%	Number of Responses	Response Ratio
As a form of self cultivation		85	96.5%
I offer Qigong therapy as a stand alone treatment option for patients		36	40.9%
Qigong is integrated into my acupuncture protocols		57	64.7%
I provide self-care and prescriptive qigong exercises		60	68.1%
I teach qigong classes		41	46.5%
Other (View all)		7	7.9%
Totals		88	100%

8 How many years have you practiced qigong?

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Answer	0%100%	Number of Responses	Response Ratio
Less than 5 years.		10	8.9%
Between 5 and 10 years.		23	20.5%
More than 10 years.		26	23.2%
More than 20 years.		26	23.2%
Other (View all)		2	1.7%
No Responses		25	22.3%
Totals		112	100%

- 9 Please list any formal certifications that you may have received as a result of your Qigong training, and the name of the instructor or place that certified you.

	Number of Responses
	54

- 10 Did you learn how to emit or project Qi to treat patients as part of your training? 

Answer	0%100%	Number of Responses	Response Ratio
YES		68	60.7%
NO		17	15.1%
No Responses		25	22.3%
Totals		112	100%

- 11 If you combine qigong and acupuncture in you acupuncture treatment protocols, please explain how you do it and the results you've obtained. Please provide specific examples if possible.

	Number of Responses

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[View Text Answers](#)

54

Text Block:

Please provide your name and email address below if you'd like to receive a copy of the "qigong enhanced acupuncture protocol" that emerges from this survey.

12 My name and email address is:

Individual answers about Qigong styles:

5. Please briefly describe the name of the qigong style your learned or practice, and the general content of your qigong training.

Strongest influence probably ICMQ's Medical Qigong program. The program is really twofold, a] cleaning and building our own Qi (and using these same techniques to help our patients), and b] treating patients using Qi Emission.

ICMQ Medical Qi Gong program

Initially, I learned silk reeling and other basic styles with the Daoist priest Luke Jih, and then progressed to five animal frolics and Hun yuan gong (at AIMS with Nate Summers). I have also taken multiple classes in sheng zhen wuji yuan gong with Li Junfeng. I practice many forms of qigong, and use Medical Qigong techniques learned through graduate school and self-study (from Jerry Alan Johnson's text) with clients. I began teaching the general public in 2004, and was named a Master Teacher-Healer in 2012. I now have Acupuncture school students that come to me for general self-care practices and Medical Qigong training.

Medical Qigong

Shibashi; 5 element qigong; Zhan Zhuang

8 strands of brocade (Ba Duan Jin) with more or less regularity for 10 years. The 5 animals.

We learned the Dao Yin exercises and in Qi Gong II we learned medical aspects with the dredging of the channels and the sword fingers as an example.

Emei Qi Gong. This form of Qi Gong is different from the likes of Reiki Qi gong. We do NOT use our body as a vessel to transfer Qi from the patient and to the patient. Emei Qi Gong uses the energy in the space in front of us and the patient's energy.

This is part of the half comment above, i first started training qi gong about 18 years ago, and it seems to be from the family of my first acupuncturist. In addition, I studied 5 animal frolics in school and organized additional qi gong classes from our instructor for eight pieces of brocade and tendon changing. I also studied martial arts in China, and learned qi gong as part of my Pi Gua training.

Medical Qi Gong taught by Dr. Hu, one of our instructors.

Baduanjin, Zhan Zhuang, taijiqigong Shibashi.

Ba Duan Jin, Hi Jin Jing, Yin Yang Qi Gong, Dragon & Tiger - Taught as part of my training in Qi Xing Tang Lang Quan, Chen Taijiquan & part of my acupuncture training.

Morning Qi Gong by Chan Zhang

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Yellow Dragon Elixir Style; Introduced to Spring Forest Qigong

I studied medical Qigong at the University of Traditional Chinese Medicine in Guangzhou, China on 4 separate month-long study visits between 2000 and 2005. My teachers were Prof Xia and Prof Song. Training involved 4 hours of lectures every morning on Qigong theory and the background to Qigong methods used for self-cultivation of Qi and for the treatment of patients. Afternoons involved 4 hours of personal practice and practice in clinic with patients.

Dragon and Tiger with college twice-monthly hour long sessions. Learning the various forms of this style. Shibashi qi gong - learned this from a separated instructor along side Tai Chi. 18 steps system, learned channels each movement affects.

tai chi chih---- western style; 9 phases of qi/training with Roger Janke

Medical Qigong -- Mixed Styles. Suzanne Friedman draw from multiple sources as did Larry Wong. However, Suzanne got the bulk of her training from Jerry Alan Johnson Medical Qigong Institute. Before her death, Suzanne started forming a new "recipe" or style she called Da Bai or Deep Compassion Qigong. A more Yin style of Medical Qigong that the Yang forms she taught in her Certification Programs. The yin style was more akin to acupressure with emphasis on being present while holding the points. I see influence from Jeffrey Yuen in this recipe. I combine one of her bird's peak techniques with another technique, for bringing qi to an acupuncture needle while inserted in a point, which I learned from Mike Morgan at AIMC-Berkeley. Mike would hold his hand above and encircle the point / needle with a kind of flat palm technique then hold above it to "gather qi at the point." I do similar, but hold in a bird's peak instead of flat palm above the point.

Yang Taiji qigong, Daoist Neigong, Taijiqian.

Qigong from Taijiqian, Baguazhang and Wudang Neijia Gongfu - WTBA World Taiji Boxing Association Standing post, 12 meridian qigong. Also (from other schools): 8 silk brocade, Dragon Gate Daoyin, Dayan/Wild Goose qigong, Shibashi.

We studied a serious of qigong exercises but i don't remember there being any reference to a style or name.

wu xing qi gong, wu dao yin, dragon dao yin, ji ben qi gong, hun yuan qi gong, Wu ji standing. Practiced to: open and loosen joints, restructure and align body, purging, activate lower dan tien and circulate qi.

Mainly ba duan jin, but I appeared to have natural talent and was told I could go very far but teachers/master who could see the white light coming from me...so much of what I do is just what works and what I have taught or remembered myself.

DaYan (WildGoose) levels 1,2,4,9, and meditation

TianDi (Heaven and Earth) QiGong complete system of Medical QiGong, Forms, Meditation, Wei Qi Emission, and QiGong Massage. GuiGen (Return to the Root) QiGong, Form, meditation, Qi needling, Qi emission. Intern at XiYuan Hospital QiGong Department. ZhiNeng (Wisdom Healing) QiGong, intensive Teacher training in China. Complete system of Level 1 - 3 and later methods. Hun Yuan Medicine and Qi Healing, Hun Yuan Entirety Theory

Baduanjin, Wu-Tang Shan Chi-kung, Tai-Chi Chuan, Pa-Kua Chuan, Hsing-I Chuan, Taoist Nei-Tan.

I took through Master Level at the International Institute of Medical QiGong, although it is no longer called that. Primary teachers were Bernard Shannon and Lisa Vanostand.

I learned over 20 different Qigong forms from various teachers. My main teachers are in chronological order: Francois Caron from the NICM. Qigong learned were Soaring Crane, spontaneous Qigong and Shaolin Zhan Zhuang. Bernard Shannon; All of the MMQ curriculum and 2/3 of the DMQ. Lin Housheng; Since meeting with Prof. Lin, I only practice and teach his system of Taiji Qigong Shibashi and Shaolin Zhan Zhuang. The Shaolin ZZ is the system he used to develop the Qi necessary to execute the Qigong anesthesia.

Tai Chi Yang style, Chen style. Robert Peng's system. Mike Patterson's system including 36 longevity exercises. Many others

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Originally Wu Chian Chuan Tai-chi chuan and chi gung with an instructor, and more recently through watching Andrew Nugent Head on YouTube. Andrew's qigong is more specific for acupuncturists.
Shaolin qigong style focused on external training and feeling qi outside of the body. Compressing/expanding energy balls, etc. Zheng Zhen style focuses on internal cultivation (alchemy) and flowing, circular movements meant to calm and relax.
Goulin walking qigong, 18 Taiji qigong
Suzanne Friedman taught us a 5 elements protocol. Tre Laughlin taught a form from Jeffrey Primack, and then I self practiced using his DVDs. I also learned some other sequences, not sure what they were. I took a course with Mingtong Gu in person and used his model for a few months.
SFQ
International institute of medical Qigong- from Jerry Alan Johnson-MQP program, swimming dragon, Master Zhongxian Wu, Jeffrey Yuen
Martial arts related
IIMQ with Jerry Alan Johnson but I have also studied extensively with other teachers for over 20 years.
ZHI NENG QI GONG; WU DANG Qi GONG
Over a period of ten years I took several workshops with Master Share K. Lew who taught the Dao An Bai system
Shen Zhen Gong Qi Gong
Yang style Tai Chi
Acht Brokate, Five Animals
Ba Duan Jin; Taoist Qi Gong: 5 Animals; Dao Yin Bao Jian Gong; Yi Jin Jing; ChaoYin FanHuang Qi Gong
The main one I teach & practice is Mantak Chia's Universal Tao. I also studied Medical Qi Gong 1,2,3 at Five Branches University, with Francesca Ferrari and use that style in my clinic when needling patients. I also studied with Stephen Barr L.Ac. who is Worsley trained and teaches a method called Conscious Healing Acupressure. I also use his protocols in my clinic.
I have been taught Medical Qi Gong as well as various Baguazhang and South Mantis qi gong sets for health and combat.
I can't remember that the name of the style but we were laying down and guided though the movements
Korean Dong Han System Qigong, and trained with mix of Kendo and laido to train physical body, mind, emotion and spirit for Acupuncture practice, which I got a lot of benefit for my practice.
From master Chung Jen Chang
I do not recall if the teacher Chan Zang had a name for the style she learned in China. For some time, I took classes with Nian Zu Li. A very long time ago, with Dr. Wu, one of the first acupuncture practitioners in the Metro DC area. Do not know what that was either. It was in the 80's.

Individual answers to combining qigong and acupuncture:

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11: If you combine qigong and acupuncture in your acupuncture treatment protocols, please explain how you do it and the results you've obtained. Please provide specific examples if possible.

In most of my acupuncture treatments, I transfer my intention and healing energy thru one to several of the needles. Also, I close the session for approximately 90% of my patients with SFQG - small universe, sword fingers for blocked areas from scanning and close with small universe. I also talk to all of my patients about the benefits of deep breathing / mediation and the power of positive thinking and emotions to heal and move into the upper levels of spiritual being (from the SFQG seven level model). Finally, I offer my patients counseling in "clean nutrition" and basic supplements from Functional Medicine and a TCM herbal formula.

Just starting to experiment with this.... not enough data yet.

Not consciously

This is very detailed and private. I would share but would take a book to describe. I often work with the dantian at the navel of the patient, but also via the specific acupuncture needles and via kidney 1 and du 20 as well as Ren and du channels, and also the meridians. I don't do it with every patient, only when they are open to it.

Qi Gong practice has allowed me to be more focused and deliberate in my acupuncture treatments. I will teach a client a coordinated move and breathing specific to one of their main deficiencies. I find they are happier and interested to learn additional movements. From my own experience I have felt changes within my own system I can only attribute to my Qi Gong practice. Thank you so much for this opportunity!!

Simply, I practice before seeing patients, and continue a deep-minded breath during sessions.

I use my intention "charge" the needle first. Then I use further intention to "drive" the energy to a specific target. Example: I charge the needles by saying what I want them to do, then use intention to target an organ or other tissue. Sometimes I'll say, "Needles please release all dampness, etc., from the body and help support the spleen function." I have found that when my intentions are very focused, the patient gets better or quicker results. Acupuncture works well alone, but much greater results come when I am focused on specific goals. If it is an inflamed joint issue, I simply tell the needle to cool down the inflammation in that joint. It has dramatically changed my acupuncture practice! Thank you for doing a survey. I think this is a worthy project. Have a great day!

For me qigong is about the exchange of energy, between you and nature, you and the energy around you, and between 2 or a group of people. So everything about the treatment session is important and part of qigong. I spend 1 hour with each patient. The environment and space is balanced, peaceful, and healing. I do some movements myself before I start my day to clear myself and set the intention for healing. Conversation and communication before the treatment is also important part of establishing a rapport and trust. I take time to palpate and I like patient to feel the gentle "Da Qi" at most points. After needles are inserted, I do some sweeping energy flow movements over the needles in the direction of meridian flow. I mostly let my intuition guide me. I also use tuning forks to add vibration and sound healing to most areas.

Use it in such a way for myself being a pathway of the energy so that the purest energy form that patient needs would flow into him as it is meant to be through myself without intervening as much as I can. At the same time, I act as an exit to let any excess or unnecessary energy from patient flow out through me to the ground, so that I don't end up accumulating those forms of energy myself while helping patient balancing his energy.

I use qigong with acupuncture in order to facilitate qi to unblock and circulate. Emitting qi through the needle and guiding it along channels - above body - is effective for activation. I also use a qigong chakra balancing technique that I have developed. Incorporating qigong techniques with tools such as using essential oils on acupuncture points, crystal bowl, and Tibetan bowl opens portals into other dimensional realms or can be grounding for a person. My qigong classes also include the above at times.

I almost always use qi needle stimulation midway through the treatment. Basic clearing (using index finger in counter clockwise motion or scooping with hand), stimulating or tonifying (pecking or clockwise motion)

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individual points or circulating qi through specific channels. I also use yin or yang fingers at Bai Hui moving qi up and down the Taiji pole and spiraling qi within the Taiji pole. At times I have also used the Restore the Sinews for MS or stressed patients, Windows of the Sky or 13 Ghosts. Of course, focused intention is crucial in obtaining any kind of positive results. My patients often can feel my work and have commented on what I was doing even while eyes closed. The patients feel that the qi needle stimulation is more comfortable than traditional manual stimulation and I think I get better results as well.

From interrogation I am already looking at patients energy patterns. During examination i also feel patients energy. By choosing points I feel them, and connect them when needed, also verifying activation of needle when needed. Give them tasks of purging or tonifying or balance. See energy once needles are in. Results: less needles needed; Patients awareness of what is going on. Patients participating in their treatment with prescriptions more actively. Patients more interested in personal growth. More awareness of emotional patterns involved in diseases. Examples: already have more than 100 qigong students all derived from clinical practice.

Qigong in the acupuncture context must be brief. As such I use Qigong diagnostics. 1/ I attune to the illness or imbalance energy. It is important to see into the nature of the illness at a feeling level, at the Qi level, at the mental level and so on. 2/ I often assess each channel with Qigong diagnostic methods. 3/ I often assess the organs with Qigong. 4/ I often assess the elements needed and the elemental qualities with Qigong. In summary i use Qigong for diagnostics primarily. 5/ I use Qigong on the primary needle, or directly on the chief complaint, or when it is clinically called for, but I never perform external Qigong for more than 15 minutes.

I do medical qigong before, during, or after an acupuncture session. The qigong techniques help with diagnosis, and treatment outcome as well. They are not stand alone techniques but are used in combination with everything else. Some patients feel great improvement with just the qigong part alone. One 70 years old woman came to the qigong healing class with chronic lower back pain 7/10. She said she tried many things for a couple months and still suffered. Through energy scanning I had her do some mudra positions to unblock the liver channel at her lower body, then release her heart of some emotional blockages by having her repeating the words: sadness, loneliness, depression, insecurity. Once her liver qi was unstuck and her heart was in harmony her pain went away. She walked around in amazement and when recalled the story she told others: "he just talked to me and the pain went away." A year later she came back for some lung issue. The whole process took only a few minutes.

Sometimes I do so Qi treatments while the needles are in. Sometimes I do it at the end of the treatment after the needles are out. I have seen lots of good results with pain, anxiety, women's health issues, etc.

During all treatments and throughout my day I use the password and call on the help of the universal energy. I try to maintain a focus and intent with each needle insertion. I also use sword fingers, opening of the small universe and visualization techniques once the needles are in and the patient is resting. Lastly, I often do active and or meditative exercises in the room with patients. For example once the needles are in and the patient is resting, I do an active exercise that is appropriate to the condition being treated. This often leads to teaching the patient the exercise. I have definitely improved the efficacy of my treatments since incorporating Qigong into my life and my work. Specifically patients who are treated with Qigong techniques in addition to acupuncture report feeling Qi sensations and a stronger positive reaction to treatment. These patients also are more likely to come for regular treatment as they feel a benefit beyond symptomatic.

I direct my personal Qi and the Qi of my ascended helpers into the site of the needle. I then insert the needle and push the Qi through the network of the meridians to the Zang Fu organs in need of attention. I receive Sky Transmissions on new acupoints and information on how to manipulate them with Qi and have had great success using these and other methods.

Mostly I do Jin Shin Do/Acupressure techniques. I also purge toxic qi from the patient and send nourishing qi.

The most common way I use Qigong in my acupuncture practice is as a diagnostic when scanning the abdomen. This I learned in acupuncture school. The second most common use is as exercise Rx. The third most common use would be "Qigong Massage" techniques that cross over into Tuina, which I commonly use as an adjunct to acupuncture, or integrate into massage therapy. I rarely, and only very selectively, use Qi Emission in conjunction with acupuncture, due to negative impressions left on patients. Some people have mentioned "juicing" needles on the sly, but it would seem to me an ethical gray area.

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I stopped practicing acupuncture and only practice Medical Qi Gong now.

I use Qigong in many ways. I use it to diagnose organ difficulty, feel emotions in the pulse, and ask how I can best help the client with their spiritual journey. I use it to feel the channels and make my point selection based primarily on the body's responses (i.e., not from my intellectual ego). I use it to feel deqi before the client does, to help reduce intense sensation and keep the client comfortable. I use it to minimize the number of needles for sensitive patients, using a combination of needles and qi emission techniques for a more complete treatment. I use it after treatment to evaluate the session, and the ability of the Qi Mechanism to work properly throughout the system. And more... There are too many things to list them all! I get great results with my clients. They feel the warm sensations of Qigong, they feel more relaxed, and they notice the difference.

I use it during the pulse taking to modify the patient's pulse, which itself initiates the treatment before inserting a needle.

For decades, I have never used a pin without having awareness of what energetic I'm sending through the pin. I am aware of: sending direction; sending pattern (swirl, direct, clockwise-counterclockwise, etc.); frequently a color (based on wuxing-root, on branch, on something the patient/client has spoken, etc.); pulsation (approximate frequency of channel or chakra); always love during treatments. I will quietly and unannounced amplify the treatment with qigong broadcast; patient/client will not be aware (and may have already expressed disinterest in a formal qigong phase of treatment). Since 2009 I have offered distance treatments of Soul Healing and qigong.

I practice Qi Gong with acupuncture at my practice by teaching my patients qigong for them to practice daily in order to enhance the treatments. Now while in school as an intern I have used sword fingers on one of my patients who had lots of phlegm and gurgling in their breathing and it seemed to help.

I scan the patient's body with my hands for different temperature emitted from the different body part to detect blockages of the meridians, and I palpate the acupuncture points to detect different texture and temperature for excessive and deficient conditions. I also use a Tibetan bronze bowl vibration after the treatment to scan the body. By listening to the variation of the sound vibration in different parts of the body, I can tell where the blockages are, then I hold the Tibetan bowl over the blocked area, hit the bowl and let the qi of the sound wave disperse the stagnation/blockage a few times until the sound of the body scan is even throughout the body. I found if I use my intention with Qi to send energy while inserting needles, the results of the treatments are more effective. The sound waves from the Tibetan bowl provide a more objective way of measuring whether the body is balanced after treatments.

I focus my intention when I'm treating my patients. I also teach them some basic protocols depending on what they need. For example, I've taught many of my patients how to open their joints when they first wake up. Many have learned the practice of closing off PC-8 and stretching the lung channel while they stand in horse stance. They may just hold that or pump their arms to invigorate the channel. I recently taught a patient the stance training for the bladder and gall bladder channels. These are patients I've seen for at least 10 years and they report the benefits when they can finally incorporate the exercises into their daily lives.

Qi gong is an integral part of my practice. I start every treatment by doing a few breathing exercises with my patients. I also teach them healing sounds as needed.

My Cancer patients and patients with debilitating conditions have felt revitalized and energized through the intention of sending the Qi throughout the body and two-pointing for healing. A day that I am fully present with every intention of every needle is a good day. With my Two-Pointing I intend the brainwaves of the patient to go to Theta waves - which in turn facilitates healing and efficacy.

I have combined Qi Gong in every step of my practice in acupuncture and client contact.

I prepare to treat by practicing. I use a combination of qi gong, zero balancing and Reiki when I needle and touch patients. I can move pain out of the body at points.

If the patient is sick I may add stomach 36 but before I do that I rub my hands together to gather Qi and with my left hand I insert the needle and with my right hand I hold it over the needle to input the qi. It is a feeling like warm moxa to the patient and very healing. Sometimes I do not insert the needle and the patient feels as if the needle was inserted.

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I can use acupuncture to balance a disharmony of the pulse and use Qi Liao to treat a pain. Treat root with acupuncture and a complaint of pain with Qi Liao. Very satisfactory results, with reduction of pain to zero.

I rarely teach qigong to my patients. At one time I did, and they said they were practicing regularly, but when I asked them to perform the most simple posture (post for instance), they couldn't do it. There was a middle aged white female who came in with whiplash from an MVA. (Rear ended at a traffic light) I treated her neck pain with local and distal points with no response. When I spoke to her about how she was FEELING about her pain, she was very angry at the person who hit her, and the fact that it "wasn't her fault." At that point, I realized that I had to treat her from a Shen level, and used non-insertion on Liv 3, Liv 14, P 6 and a few others. Her pain was gone in 2 treatments.

I use my breath and mind to emit Qigong when manipulating acupuncture needles to obtain a stronger Deqi sensation. This invariably results in a stronger treatment with better results from my clients. In addition I teach my clients Qigong abdominal breathing and other exercises that they are encouraged to perform when the needles are in place and also at home. The most specific and noticeable effects are that clients are calmer, more relaxed and energized. Also, they feel hopeful and empowered that there is something they can be doing for themselves to improve their state of health. For your information I also teach an online course of Qigong over a period of 50 weeks. See www.spacetorelax.com for more information.

For my very deficient patients I use qigong by acupressure of KI 1 and breath work to ST 36 for increased energy. I also teach patients various exercises from Bu Zheng Qigong.

Birds peak gather qi around needle technique aka "spinning." The Key is being present / waiting for a change (in the patient). 1) Insert needle. 2) Bring favored hand above and near point. 3) In a fluid motion: Make a gathering or encircling motion above needle and hold fingers in bird's peak (or flat palm) above needle handle (don't touch needle). 4). Clear mind and be present. Wait for needle to move or straighten, or muscle of patient to twitch. Sometimes neither will happen. I observe this more in deficient patients. If you have time keep holding, if not move on to another needle. Also on my non-dominant hand, I press my thumb to the corresponding trigram (Bagua / I-Ching Earth circle) by acupoint's element or channel as mapped on hand. This is another technique I learned from Suzanne Friedman from her Bagua Yang Style Medical qigong protocol. It is not necessary, but I spent so many months programming those trigrams in my mind / body, I figured why not use it.

Mindset.

This is very hard to answer but simply I just scan and feel the energy field and then fill up the holes with qi. Results are almost always beneficial and patients come back asking for more TX.

Everything is Qigong, an exchange of energy, with intention and broadcasted information. Starts with words, and language, then Qi emission into needles, sometimes guided Qigong exercises, consciousness healing, and Qigong Massage. Qi emission into herbs for patients.

Acupuncture treatment protocols in a clinic setting and case specific chi-kung exercises taught to patient for practice at home to support treatment protocol and hasten their healing. Generally excellent results when patients are compliant with the treatment plan.

Wow, this is pretty hard to explain. We learned specific Qigong protocols in IIMQ. When I am doing a five element CF treatment I will often do the Wu Dang Qigong exercise on the patient while the CF needles are in. I often do Hun Yuan protocol while needles are in. Every treatment is different. I need to think about this more and send you e-mail.

I do not use needles anymore as Medical Qigong combined with point massage and "bone setting" give me much better result. A combination of contact and non-contact Qi emission seem to be the most efficient. On average it takes 3 sessions to have a strong permanent result. Case study: Female in her 40's with a 20-year-old frozen shoulder with reduced mobility and regular pain. Developed after a ski accident with a broken bone. Contact Qi emission from both palms directly on the shoulder emitting heating Qi to remove the Bi cold syndrome. Also combined with bone setting to stimulate articulation movements and return of synovial fluid. 3 sessions and the mobility range were same as good shoulder with no more pain. Case study: Female mid-30's, insomnia due to Kidney Yin deficiency. Treatment: massage stimulation of RM4, Qi emission from contact palm on RM4 to stimulate Yuan Qi in LD, circulation of Kidney Qi in LD via non contact Qi emission, massage and contact Qi emission of BI23 and DM4.

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TMJ -- I have a specific set of things to do from various Qi Gong protocols especially the 36-longevity set which forms the basis for many of my protocols. I needle TMJ points from testing points on the face from "Chinese Acupuncture & Moxibustion." I demonstrate Qi Gong for the face to relax the face and then walk through the protocol with them. I leave them a copy of the exercises so they can review it.

A 70 year old with lower back pain referring down her right leg. Her back was hot but her buttock and upper thigh were very cold. I placed my right hand on her upper buttock and my left on the back of her upper thigh and focused my energy into my hands. I can make my hands feel hot, which I did. I felt like a fraud, as this was the first time I have done anything like this, but the next week she said it had really made a difference. The area didn't feel cold anymore. She also mentioned it a couple of months later. I also try and supplement or drain qi using needles. It's hard to tell whether or not this is more effective than just needling.

Make patient dantian breathe during acupuncture

I do a regular acupuncture needle treatment and ask if they would like qigong. If they do, I pick a protocol from the book: The Yijing Medical Qigong System: A Daoist Medical I-Ching Approach to Healing, and then follow my intuition for my patient. They report seeing colors, or feeling very relaxed. They sometimes feel heat where I am hovering, or they feel like someone is touching them when I am not.

I do not emit the qi, as much as I go in with my qi to call or bring forth theirs, the patient's qi, and activate a point. Patient notices it more, sensations, not pain, and better results shifting on the pulse.

Qigong provides access to the shen level. It also gives patients self-responsibility after their healing. I mainly teach and really don't even use acupuncture at all. :(!

I have strong intention during insertion of needles. I see better results with calming especially with PTSD and more quick results with Chronic fatigue using qigong.

Sometimes I do vibration on needles, often I do acupressure points and patterns with my hands while patients have needles in them, and I often remove energetic blocks and check patients Auras and Wei qi fields and help them fill them and heal holes. With children I always checks their Auras, and use acupressure points to clear and offer the healings and ask for help from the universe. These protocols work great to help children with anxiety & insomnia and emotional issues and headaches.

I use my inner eye to help me diagnose the issues at hand as well as putting my hands close to the patient and feeling what is happening to them. I then take pulse and examine tongue and then figure out what prescription I am doing and then needle the patient and then add some energy from the universe to their needles, depending on what they need. I always instruct patients in sitting and standing methods of Qi Gong to help them center and calm down as well increase their energy.

I use the fingers, my hands, and the needles as transmitters, of a sort. As well as my intention, of course. I direct the qi of my belly in facing the person too. Another aspect is that I have taught yoga for about 47 years, and have regularly included Qigong --- and identifying it as that-- in my yoga class offering. I am obviously a lot older, so opportunities are diminishing for classes, but it helps, and I love weaving together the different practices.

I do send my intension into the needles kind of along the same line of ancient Taoist practitioners and Masters of the Toyo Hari world. Also I have chanted for the past 30 years and with intension channel that energy into my fingers. That works very well.

Quite simply, I could say that I don't DO or USE QiGong during my treatments but that I AM QI.

I always keep awareness of the soles of my feet on the ground, of the air in the room, of my undivided attention to the unconscious emission of Qi produced by my patient's body. Then I follow the patient's Qi with my hands and let it instruct me on how I can help to liberate its movements. I then use hands on needles or Medical Qigong techniques in a combination mode. I stay with the patient the whole time, may it be one or one and a half hour and let my hands on her/his body gently facilitating the structural and sequential release that heighten the needles work.

Survey Analysis and Discussion:

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The majority of the respondents went to acupuncture school in the U.S., although some trained in China, Italy, Germany, the U.K, and Canada. This was an experienced group of respondents. Over 27% had been in practice for more than 10 years, and over 25% for more than 20 years.

The types of qigong that respondents learned or practice is wide-ranging, from martial arts qigong to medical qigong. A few definitions are in order. First, what is qigong? According to Tianjun Liu, the editor of “Chinese Medical Qigong,”³ the term qigong first appeared in a book by a Daoist priest during the Jin dynasty (265-420). The term qigong literally translates as energy (Qi) skill (Gong) and didn’t come into common usage until the 1950’s. Liu defines qigong as “the skill of body-mind exercise that integrates body, breath, and mind adjustments into one.”⁴ Before the 1950’s, qigong was called many other names, including Neidan, Neigong, Daoyin, etc.⁵

Chinese medicine, Confucianism, Daoism, Buddhism, and martial arts influenced the development of qigong. Five distinct schools were formed with their own theories and characteristics, with each drawing on and influencing the theories and practices of other schools.⁶

1. Medical Qigong: The application of guiding qi to heal the sick was recorded in the *Yellow Emperor’s Internal Classic* over 2500 years ago. The philosophy and theories of traditional Chinese medicine develop the selection of forms, techniques, clinical applications, research, etc. Medical qigong was influenced by other qigong traditions and incorporates a multitude of qigong styles, e.g., Five-Animal Play, the Six Syllable Formula, and the Eight Pieces of Brocade.⁷
2. Daoist Qigong: This tradition emphasizes the cultivation of human life (Ming) and spirituality (Xing), and the development of internal elixir (Nei Dan) techniques and the cultivation of the body’s three treasures, i.e., essence (Jing), Qi, and spirit (Shen).
3. Buddhist Qigong: This style focuses on the cultivation of spirituality by adjusting the mind and the breath, typically involving prolonged contemplation and meditation.⁸
4. Confucian Qigong: Confucius and his students regarded practicing qigong and cultivating the mind as prerequisites to governing the state

³ Liu Tianjun 2010 *Chinese Medical Qigong*, English Language edition, Singing Dragon, London and Philadelphia. Page 14. This is “the first English translation of the only official textbook of medical Qigong, now in its third edition, used in colleges and universities of traditional Chinese Medicine in China.”

⁴ Ibid, page 15

⁵ <https://en.wikipedia.org/wiki/Qigong>

⁶ Ibid, page 64

⁷ Ibid, page 66

⁸ Ibid, page 68

well and maintaining peace. The Confucian tradition declined after the Song and Ming dynasties, and little remains of Confucian Qigong.⁹

5. Martial Arts Qigong: This tradition attaches importance to body structure and movement to train the tendons, bones, muscles, and skin; it involves physical exercises and conditioning, requiring an integration of Yi (intent), Qi (energy), and Li (force). The Muscle/Tendon Changing Classic (Yi Jin Jing) and Shaolin Internal Qigong (Shao Lin Nei Gong) are examples of martial arts qigong forms.¹⁰

Since this paper deals with the use of qigong in Chinese medicine, I am focusing on Medical Qigong (MQ) that I define as the application of qigong in the prevention and treatment of disease, and the preservation and restoration of health (physical, mental, emotional, and spiritual) based on the theories, principles, and practices of traditional Chinese medicine (TCM). Because I wish to avoid differences of opinion over what constitutes “authentic” Chinese medicine, I chose to define TCM as encompassing traditional, classical, and modern Chinese and East Asian medicine that are based on theories that include, among others, Yin-Yang, Five Element, Zang Fu, Meridian, Eight Principles, and Qi-Blood, etc.

Qigong, sharing the same theoretical roots as TCM, is considered one of the five main pillars of traditional Chinese medical therapy. The other pillars are: acupuncture, massage, herbs, and nutrition. Some practitioners consider it to be the most important pillar. Jeff Nagel offers a more comprehensive list based on his study of the eight branches Daoist Chinese medicine. In descending order of importance they are: (1) meditation/qigong quiescent practice, (2) qigong dynamic movement/internal cultivation, (3) nutrition, (4) body work, e.g., massage, tuina, (5) Cosmology, (6) Feng Shui, (7) Herbs, and (8) acupuncture. Nagel said that the first two branches give you “cognition” to use the others effectively.¹¹

Given qigong’s preeminence in the hierarchy of Chinese medicine, it is puzzling that less than 55% of survey respondents learned qigong in acupuncture school. The vast majority learned from a private instructor. Jerry Alan Johnson observed that: “most schools in America have been relatively unaware of the extent to which Medical Qigong therapy has developed in China, and have been lacking in presenting Medical Qigong as a significant part of their training programs for students of Oriental medicine.”¹² However, the good news is that 65% of respondents said qigong is integrated into their acupuncture

⁹ Ibid, page 70-71

¹⁰ Ibid, page 71

¹¹ Jeff Nagel, April 30, 2011 seminar on Daoist Medicine in Alexandria, Virginia. Nagel is an acupuncturist, teacher, and senior student of the late Daoist master Share K. Lew.

¹² Johnson, Jerry Alan, *Chinese Medical Qigong Therapy: A Comprehensive Clinical Text*, The International Institute of Medical Qigong, 2000, Pacific Grove, CA, Preface

treatment protocols. This is testimony that a majority of acupuncturists clearly see the value of using qigong in their clinical practice. How they are doing this can be found in the individual text answers above. Although they use seemingly different methods on the surface, certain underlying principles and techniques can be gleaned from their collective responses before, during, or after acupuncture treatments.

1. Before treatments, they often use various qigong breathing, mind calming, and body centering techniques to prepare themselves and sometimes their patients as well.
2. During treatments, they use qigong to (a) detect and clear energy blockages, (b) purge excesses and tonify deficiencies, and (c) direct, enhance, or emit qi with focused intention before, during, or after inserting needles.
3. After treatments, they prescribe qigong exercises as a form of patient self-care and to optimize the effects of their acupuncture treatments.
4. A few acupuncturists have found medical qigong so clinically effective that they no longer use needles in threatening patients, but use qigong exclusively as a stand-alone therapy.

In *Chinese Medical Qigong*, Liu says that medical or therapeutic qigong has two distinct modes of delivery. The therapist can teach the patient self-cultivation methods, or administer Qi-enhancing treatment by transmitting healing Qi and purging pathological Qi.¹³ Self-cultivation methods, which include prescriptive exercises and meditation, can be listed under the category of “internal qigong.” Qi emission or transmission methods are categorized as “external qigong.”

Self-Cultivation

Self-cultivation, which includes dynamic and quiescent qigong methods, is important for the practitioner. Although 93% of survey respondents reported having learned or practiced qigong, only 66% percent said they do it regularly. Dave Coon writes in an *Acupuncture Today* article: “In order to be a profound practitioner of acupuncture, *qigong* or medical *qigong*, one has to be highly skilled in training the *qi*... It happens only after devout practice for most practitioners. When one becomes very proficient in some form of *qigong* practice, be it *tai chi*, static *qigong*, *qigong* meditation or through martial *qigong*, one becomes a conduit for high levels of energy. Devout practitioners of the above-mentioned disciplines have different means to the same end. Healers who use the abundant energy generated during their chosen practice can assist others in their temporary lack of energy. In order to do this, one must practice *qigong* to the point of having energy overflow.”¹⁴ Bernard Shannon, founder of the

¹³ Liu Tianjun 2010 *Chinese Medical Qigong*, English Language edition, Singing Dragon, London and Philadelphia. Page 329

¹⁴ *Acupuncture Today*. May, 2007, Vol. 08, Issue 05

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International College of Medical Qigong, has said that to be an effective qigong therapist requires a combination of focus and what he calls “juice” that can be acquired with discipline and consistent practice.¹⁵

For the patient, self-cultivation is equally if not more important. Jeff Nagel said, “The most powerful medicine is that which you can do for yourself.” Patients, taught how to practice qigong exercises and meditation, become active participants in getting and staying healthy instead of passively asking their healthcare practitioner to “fix me.” With the U.S. healthcare cost spiraling out of control, we might learn something from a health department in Xiang Tang, a city in China, that surveyed health care spending between 1992 and 1995 of 500 mostly retirees between 50 and 70 years old who practiced qigong regularly. Instead of the increased spending typical in this age group, their annual medical costs decreased by 83% on average, and 46% reported no medical costs at all.¹⁶

Before Treatment – Preparing yourself and your patient

Survey respondents said they prepared themselves as well as their patients in various ways. Some respondents did deep breathing or qigong exercises, while others did meditation. One of the major benefits of qigong practice may be induction of the relaxation response.¹⁷ Sun Simiao, a famous Chinese physician of the Sui and Tang dynasty, purportedly asked his patients to meditate for at least 30 minutes before he would treat them with acupuncture.¹⁸

It seems intuitively obvious that channels open and qi and blood flow freely when the body and mind are relaxed. “Circulation of energy throughout the channel system is paramount for health, the loss of which leads to disease and pain... all pain results from obstruction in the channels. As the old saying goes: *Tong ze bu tong; bu tong ze tong.* (If there is free flow, there is no pain; if there is no free flow, there is pain.)¹⁹

When more than a few of my new patients said the reason they came for acupuncture was because of their positive initial experience getting treatments while on an ocean cruise, I interviewed a seasoned practitioner who had been an acupuncturist on a cruise ship for over 15 years. She said she got far better results compared with when she had a regular practice because her clients were more relaxed, had enough time to let the treatment take effect, and were able to let go of the stress may have caused or exacerbated their problems.

¹⁵ Bernard Shannon, Lecture on Medical Qigong, December 5, 2016, Palm Desert, CA.

¹⁶ Liu Tianjun 2010 *Chinese Medical Qigong*, English Language edition, Singing Dragon, London and Philadelphia. Page 6

¹⁷ Natural Medicine Journal, *An Evidence-based Review of Qi Gong by the Natural Standard Research Collaboration*, May 2010 Vol 2 Issue 5

¹⁸ Chunyi Lin, in an interview with this author, May 8, 2017, Minneapolis, MN.

¹⁹ Marcus, Alon *Musculoskeletal Disorders: Healing Methods from Chinese Medicine*, North Atlantic Books, 1998, page 228

During Treatment

Several survey respondents said that qigong is an exchange of energy between practitioner, patient, or the “source.” This exchange requires the practitioner to be centered, fully present, and not become distracted so as to maintain a clear connection with the patient and the source (the Universe, the Divine, God, etc.). There are many ways practitioners do this, including using meditation to achieve the state of *mushin no shin*, a Japanese [Zen](#) expression meaning *the mind without mind*, i.e., a mind not fixed or occupied by thought or emotion and thus open to everything. Mushin is achieved when a person's mind is free from thoughts of anger, fear, or ego during combat or everyday life.²⁰

Jeff Nagel refers to this state of mind as “thought without content.” Jeffrey Yuan, well-known Classical Chinese medicine teacher, said this is the space between thoughts. Chunyi Lin describes this as getting into the “emptiness,” which “is the feeling and recognition of the oneness within.”²¹ Bernard Shannon recommends qigong practitioners stay connected to the Taiji Pole. “The Pole can be observed as a vertical column of brilliant white light ... flows from the Baihui point at the top of the head, through the center cord of the body, and connected to the Three Dantian... A great stillness is experienced when a Qigong practitioner gathers Qi into the Taiji Pole.”²²

Acupuncturists who practice the Shen-Hammer style of pulse examination, while they may not claim to be qigong practitioners, nonetheless must be centered, fully present, and in a state of *Mushin* to obtain an accurate pulse diagnosis. An initial exam can take up to 45 minutes. Ross Rosen, a student of John Hammer, said that taking a pulse is a form of healing; his patients report feeling much better even before lying on the treatment table.

Many respondents use qigong to detect blockages or imbalances in a patient's body, in addition to using traditional TCM diagnostic tools such as tongue and pulse examination. One common qigong diagnostic method is the flat palm technique in which the practitioner uses his or her palm as a scanner, trying to feel subtle changes in the patient's energy field, e.g., changes in temperature, tingling sensations, or the hand being pulled in or repelled out.

²⁰ [https://en.wikipedia.org/wiki/Mushin_\(mental_state\)](https://en.wikipedia.org/wiki/Mushin_(mental_state))

²¹ July 5, 2017 email from Spring Forest Qigong: Master Chunyi Lin has extensively researched many fields of study to formulate his understanding of these three key concepts – oneness, emptiness, void. Here are condensed versions of his definitions: **Oneness** is limitlessness. It has no form, but can create any form. **Emptiness** is the feeling and recognition of the oneness within. **Void** is an energetic field between oneness and form.

²² Johnson, Jerry Alan, *Chinese Medical Qigong Therapy: A Comprehensive Clinical Text*, The International Institute of Medical Qigong, 2000, Pacific Grove, CA, Pages 105-106

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External Qigong & Qi Emission: In external qigong, the practitioner consciously releases qi and directs it into the patient to harmonize qi and treat illness. It “is the delivery of Qi stimulation by a healer or practitioner to a recipient, to influence circulation of Qi and the wellbeing in the recipient. This is usually done from several inches away from the recipient, with the practitioner sending Qi via the palms of the hands or the fingers pointed at the recipient.”²³

“Emitting Qi requires specific training. Generally speaking, the Qi is mobilized through mind intention, with respiration as its power and the meridians and collaterals as its path.”²⁴ “It is common for proponents of Qi emission to teach that the release of Qi does not come from the practitioner but is instead transmitted from nature and the universe through the intention of the practitioner. Given that the mechanics for Qi emission therapy is not yet clear, it is possible that those who teach that it entails the release of internal Qi and those who teach that the practitioner is channeling universal Qi are both correct.”²⁵

Chunyi Lin, creator of Spring Forest Qigong, teaches his students to emit qi from universe or what he calls the “Divine.” Well versed in all the pillars of Chinese medicine, he studied with many famous healers and qigong masters. He often tells the story about one of his teachers, a Shaolin Monk who used his own internal qi to treat patients. One day his teacher faced a large crowd of people who all wanted to be healed. At the end of the day his teacher came back looking exhausted. When Chunyi Lin asked what happened, the Shaolin Monk said he had depleted his qi and he would have to stop treating patients for a month so that he could recover his internal power. From then on, Chunyi Lin practiced drawing on and channeling universal or what he calls Divine energy in healing others. He tells students they can accrue more energy than they emit, and thereby strengthen rather than deplete themselves.²⁶

Although Master Lin has practiced acupuncture, he no longer sees the need to use real needles. Instead he likes to use “invisible needles,” a qigong technique to project qi into a patient’s body. He visualizes not just one needle, however, but uses several and throws them into the patient simultaneously. It’s like inserting a shower of needles. In doing so, he hits several acupoint at the same time. When asked how a practitioner would project qi into an actual needle, he recommended visualizing light going through the needle and lighting up not just the point of insertion, but several points along the channel.²⁷

²³ Natural Medicine Journal, *An Evidence-based Review of Qi Gong by the Natural Standard Research Collaboration*, May 2010 Vol 2 Issue 5

²⁴ Liu Tianjun 2010 *Chinese Medical Qigong*, English Language edition, Singing Dragon, London and Philadelphia, pages 359-360

²⁵ Ibid, page 361 footnote

²⁶ Chunyi Lin, Spring Forest Qigong Retreat, November 21-23, 2008, Minneapolis, MN.

²⁷ Chunyi Lin, in an interview with this author, May 8, 2017, Minneapolis, MN.

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Jerry Johnson, in his book *Chinese Medical Qigong Therapy*, said that the invisible needle technique requires first connecting with the divine by drawing energy from the Heavens in the form of light via Du 20 (Baihui), filling the body with an inexhaustible stream of energy and extending it through the PC 8 (Laogong) point into the hands. Some qigong doctors visualize needles of light emerging from the Heavens above the head, plucking one of needles and inserting it into the patient's body.²⁸

Suzanne Friedman, who was a licensed acupuncturist and medical qigong doctor, developed a "Shi Zhen non-insertion needle qigong treatment."²⁹ According to Friedman, the shi zhen (also called teishin in Japanese) is a rounded and blunt tipped acupuncture needle that is not inserted through the skin, but is traditionally pressed on an acupuncture point to stimulate qi. The following is a modified version of her shi zhen treatment protocol:

1. Select acupuncture point to be stimulated.
2. Position yourself over the point. Make an OK sign with your non-dominant hand by gently pressing the index finger and thumb together, i.e., if you're right-handed, use your left hand to make the OK sign.
3. Place the thumb and index finger gently on the acupuncture point to be stimulated.
4. Energetically "dip in" to the acupuncture point by sinking your intention through your hand that's resting on the patient's skin.
5. Emit qi through your fingers on the point as if using a qi needle to stimulate the point and to summon qi there.
6. Place the rounded end of the shi zhen needle between the thumb and index finger that's resting on the acupuncture point on the patient's skin.
7. Use your intention to guide qi through the needle to the target area either to drain or tonify the target area.

The Qigong Enhanced Daoyin (QED) Acupuncture Method

Drawing on the collective wisdom of the 100 + survey respondents and from the sources quoted above, I have compiled what I call the "Qigong Enhanced Daoyin Acupuncture Method" that consists of three parts: Preparation, Treatment, and Self-Care.

I. Preparation

²⁸ Johnson, Jerry Alan, *Chinese Medical Qigong Therapy: A Comprehensive Clinical Text*, The International Institute of Medical Qigong, 2000, Pacific Grove, CA, Page 619

²⁹ Friedman, Suzanne, *The Yijing Medical Qigong System: A Daoist Medical I-Ching Approach to Healing*, Xlibris Corporation, 2006, Pages 100-103

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“In all cases, when you treat disease as an eminent physician, you must quiet your shen and fix your intention, you must be free of wants and desires, and you must first develop a heart full of great compassion and empathy.” *Sun Simiao (translated from Qian Jin Yao Fang by Sabine Wilms)*

To quiet your shen, increase your focused intention, and to serve as a conduit of qi, over the next 30 days practice some combination of dynamic and quiescent qigong. Ideally, you should do at least 30 minutes of dynamic movement and 30 minutes of quiescent or meditative qigong. Examples of dynamic movements would include Eight Pieces of Brocade, Yi Jin Jing, Soaring Crane Qigong, Tai Chi Chuan (taiji quan), Bagua Zhang, etc. Examples of quiescent or meditative qigong would include the microcosmic orbit, guided meditation, Zhan Zhuang, Yi Quan, etc. If you don't have a regular practice, now is the time to start. I personally like Spring Forest Qigong and practice it daily. (See Self-Help Part III below)

Prepare your patient so that he or she is relaxed and receptive to your treatment. Connect with your patient in a way that feels comfortable for you. I do it at the first hello, during the intake, and especially when taking pulses. After your patient lies down on your treatment table, ask them to relax, close their eyes, and take three long deep and gentle breaths.

II. Treatment

1. Position yourself over the point you wish to activate based on your diagnosis and treatment plan. Standing with good posture, a calm mind, and focused intention. Visualize yourself drawing healing energy from the divine into a transparent column that runs from the top of your head to the bottom of your torso.
2. Locate and lightly press on the acupuncture point you have selected using either the index, middle or thumb of your non-dominant hand. Visualize the healing energy flowing through your finger to the point, stimulating and gathering qi into the point.
3. Place a regular filiform acupuncture needle (or a guide tube with needle) on the point, as you lift the finger that's been resting on the acupuncture point.
4. As you exhale, insert the needle into the patient at the superficial level; this is the shen level. Then very lightly stroke down the handle of the needle with your thumb and index finger to guide the needle deeper into the qi level as you exhale and visualize qi flowing from your fingers, through the needle, and into the patient's body. Repeat this stroking action until you obtain a “de qi” sensation or until the desired depth of insertion is reached at the

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jing level. This light stroking action should be almost imperceptible to the patient. I seldom use any traditional acupuncture manipulation techniques and prefer to allow my intention and the flow of qi through the needle to do the work.

5. At the same time you insert the needle, visualize the qi flowing through and simultaneously lighting up two or more points on the channel and/or into the target area.
6. Withdraw needles according to your own style of acupuncture. I usually retain needles for about 30 minutes.

III. Self-Care

Teach patients a self-care qigong exercise that they should do at home. I send them a link to www.springforestqigong.com that has video demonstrations of Chunyi Lin performing three simple to learn exercises: The Moving of Yin and Yang, Breathing of the Universe, and Joining of Yin & Yang. These videos are free and easily accessible on YouTube. This is especially important for patient compliance.

Research – Part 2

Your help is needed! I wish to invite you and all acupuncturists interested in assisting my research to use the QED Acupuncture Method to treat their patients for a minimum of 30 days. At the end of this period, I would like you to provide feedback back on whether or not using this method improved treatment outcomes by filling out a short online survey questionnaire. Please copy and paste this URL to your web browser to access the questionnaire:

<http://survey.constantcontact.com/survey/a07eep0ulsbj8hosqrn/start>

About the Author

Hon K. Lee is a Licensed Acupuncturist, an NCCAOM Diplomate in Oriental Medicine, and a Master of Medical Qigong. He graduated from the Maryland Institute of Traditional Chinese Medicine, had clinical training at the Shanghai University of Traditional Chinese Medicine, completed postgraduate studies in Chinese herbal medicine at the TAI Sophia Institute, and studied Medical Qigong at the International College of Medical Qigong. He is owner of Sports Edge Acupuncture (www.sportsedgeacupuncture.com) in Herndon, Virginia, and is on the adjunct faculty at the Virginia University of Oriental Medicine.