

Multiple Sclerosis, Qi Jing Ba Mai & Shiatsu

An Introduction to an Extra-Ordinary Condition

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- 1) Introduction: Understanding Multiple Sclerosis
- 2) Multiple Sclerosis and Shiatsu: A Bibliography Review
- 3) Multiple Sclerosis and TCM: An Extraordinary View
- 4) From Extraordinary View to Extraordinary Practice: Qi Jing Ba Mai
- 5) Conclusion: In the Clinic

Appendix A. Summary of a Case Study

Appendix B. Extraordinary Connection

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Introduction: Understanding Multiple Sclerosis

Multiple Sclerosis (MS) have many different definitions in medical dictionaries and textbooks while different MS or medical organizations give also various definitions to her*. All of them agree that it is characterized by demyelination of the Central Nervous System (CNS), the brain and the spinal cord. It is widely considered an autoimmune disease and there are many factors that have been considered to be triggers for her onset, including infections, genetic background, deficiency of vitamin D, dietary lifestyle, life experiences and toxic factors. Yet there is no agreement that one of those factors is THE trigger one but probably all – and even more – co-contribute.

In medical terms, MS is a nerve disorder caused by the breakdown of the Blood – Brain Barrier (BBB), the specialized layer of cells and tissues lining the blood vessels, providing a selective barrier between the blood and the CNS. When BBB is not functioning normally, white blood cells can migrate from the blood to the CNS causing inflammation which leads to demyelination, destruction of the myelin insulation covering the neurons in the CNS.¹ Myelin is composed from fatty cells and proteins. Its presence is critical to the normal functioning of the CNS. As an insulator, myelin make possible the rapid conduction of electrical impulses along the axons of the neurons in the brain and spinal cord, transmitting signals to and from muscles, sensory organs and cognitive centers.²

When the myelin is destroyed, conduction of impulses along axons slows or stops altogether, which leads to the various neurological symptoms people with MS experience. But this is only the one side of the demyelination process. Myelin and axons enjoy a really intimate... loving relationship! Being in a symbiotic relationship, in the absence of axons, myelin degenerates, and in the absence of myelin, axons degenerate. So, it's not only that the electrical impulses are not conducted properly in the demyelinated axons, but the axons themselves suffer degeneration due to long-term lack of myelin.

Even if there is a specific recognized process for the failure of myelin to regenerate itself, the common understanding of the formation of scar tissue is enough for someone to get a basic understanding. It seems that in some degree myelin regeneration occur in MS but only for a

* “Her” is referred to Multiple Sclerosis. Many people living with MS give to the disease human appearance and characteristics, other times identified with or consider it as a separate personality or enemy of them.

short period of time. While the condition of inflammation get established and develop wider, regeneration responsible cells get the inhibitory message that the environment is not suitable for growth, the regeneration fail and scar tissue cover the neural axon in the place where before it was covered by myelin. This not only make the electrical conduction much inferior but also leads to secondary degeneration of the axon itself.

Due to this positive feedback of inflammation and the symbiotic relationship of myelin and neural axons, the communication of nerves and other parts of the body get affected, giving rise to the wide variety of MS symptoms. Those can vary and commonly include the disturbed general energy level, fatigue, weakness and insomnia, pains, tingling and numbness, double vision, optic neuritis and nystagmous, paralysis, balance difficulties and dizziness, tremor, muscular atrophy and spasticity, bladder, bowel or sexual problems, cognitive problems (like memory, concentration, speech etc.) and emotional problems (like depression, irritability, mood swings), while usually people with MS suffer from major digestion and sleep disturbances. It worth to make the notice that in most of the cases, high temperature environment worsen all the symptoms and most of the people with MS are under strong medications which contribute also to further symptoms.

It is estimated that about 2.5 million people worldwide have MS. Women have almost two times more chances than men to develop MS and people living above the 37th parallel north of the equator also. About 85 percent of people with MS are initially diagnosed with the relapsing-remitting type of MS, of which about half will develop the secondary progressive type of MS during time. Of the rest 15 percent, about 2/3rd are diagnosed with primary progressive MS and 1/3rd with progressive relapsing.³

Multiple Sclerosis and Shiatsu: A Bibliography Review

The treatment of MS with the methods of conventional western medicine is very limited while the number of people with MS is constantly growing. Even if MS is officially considered as not possible to heal, shiatsu is able to offer extremely important benefits, possibly even to support the total remission and recovery for some people. Keeping in mind that “the central aspect of our practice is respect and support for the self-healing Ki which manifests in our receiver as well as in ourselves” and that “natural healers are those who have no expectations of what they do but who truly acknowledge the healthy 'upright Ki' within their receiver, and work with it to the best of their ability. Knowledge, skill and even experience are all secondary to this”⁴ it worth to take a look in different approaches of working with MS from shiatsu practitioners. It's interesting to notice that the approach that every practitioner takes based on her/his experience vary at least as much as the symptomatology of MS, with some practitioners considering shiatsu slightly effective for some of the symptoms and others taking a more holistic approach promoting its healing potential.

Alan Taylor⁵ in his article, consider shiatsu able to offer in the treatment of symptoms and in supporting the people with MS in emotional, physical and spiritual level. He give a general framework of MS symptomatology from the Five Phases theory respective and he found Wood and Water element to predominate, as well as Qi and Blood deficiency, Wind and Damp from TCM respective.

Peter von Blarer⁶ writes about the importance of strengthening the Po and the importance of Lungs for people with MS, a dimension not usually addressed when dealing with MS. He also explore some TCM approaches but most importantly he mention many factors related to the overall life conditions of people with MS.

Chris Jarmey⁷ consider shiatsu to be helpful for people with MS mainly in order to “reduce stress and boost the immune system, thus potentially reducing the risk or severity of symptoms recurring.” He suggest also the usage of Sotai exercises to strengthen the muscles while he consider as important channels those of Spleen and Pericardium as well as the Bladder line next to the spinal cord as a useful channel for temporal increase of the vitality and mobility of the person.

Yuichi Kawada and Stephen Karcher⁸ have the opinion that “Shiatsu cannot cure this disorder, but it can slow the process of deterioration and provide psychological help to the patient.” In their treatment approach they are based on the work with extraordinary vessels, suggesting work on the Du Mai and Yang Ankle Qiao in order to promote and increase the yang circulation. Interestingly they suggest to be careful with some things that in my clinical practice I have found not applicable (not treating someone tired or shaking, maximum session time of 30 minutes etc).

Andrew Kennedy⁹ describe a case study where the first important shift in clients energy came after working the San Jiao, while in the future sessions main work was in the Tai Yin channel (deficient Lungs-Spleen) as well as the second part of the Metal pair (deficient Large Intestine), while he also make a notice of the Kidney and Du Mai.

Michael Rycroft¹⁰ have develop an interesting approach focused on the importance of San Jiao in the treatment of MS. His strategy is to improve mobility and slow down the progress of the condition and he give a great importance in empowering the client with an intense series of 3 sessions, leading to a self-sustained therapeutic exercise program and further treatments once or twice per year.

Finally, in the website of the Shiatsu Society¹¹ there is a short compilation of articles related to MS and Shiatsu, including a case study from Dee Cameron, based in Zen Shiatsu Kyo / Jitsu theoretical approach.

Multiple Sclerosis and TCM: An Extraordinary View

In terms of TCM categorization, MS is considered as a Wei Syndrome¹². Wei in Chinese means flaccidity and Wei Syndrome clinically can begin manifested as weakness of the limbs, eventually leading to muscular flaccidity and atrophy of the limbs. However, many symptoms have also their own disease category¹³.

In real life clinical practice, there are usually many co-existing disease patterns, identified by differential diagnosis. Those that seems to appear most commonly and play major role in the main course of MS are Qi and Yin deficiency, accompanied from Liver stagnation or Liver Yang excess¹⁴, Wind, Dampness and Heat. Speaking of Qi deficiency we mainly refer to Spleen Qi deficiency, while speaking of Yin deficiency we mainly refer to Kidney Yin and Blood deficiency. In general terms, seems that MS deplete the Yuan Qi and the main care that need to be taken is the recovery of the dynamic balance between Yin and Yang in the body, strengthening the Blood in order to tonify Qi and Yin and to calm down Yang¹⁵, which when being over-irritated dry up the liquids in the brain¹⁶.

Since MS deplete Yuan Qi, the pathology get established in deeper level while the time pass, damaging the Essences of the body. Since “each of the extraordinary fu store essences”¹⁷, this brings pathology to the Extraordinary Fu. This becomes very obvious when studying the functions of the Extraordinary Fu with the symptoms of MS in mind. While at the same time, the definition of the Extraordinary Fu by itself^{* 18}, bring in the surface the importance of the relationship between Yin and Yang in MS.

Nao, Gu Sui (Brain, Bones, Marrow)

The Brain, “Sea of Marrow”, have functions related to the mental activities^{** 19} and the sensory perception of the world, but “the function of the brain is not only located in the skull but radiates, particularly though the marrow.”²⁰ If the Brain is insufficient, there is a deficiency of Essences and the Marrow has been injured, with symptoms very familiar to

* “Morphologically they resemble the fu organs in being hollow; but they do not directly receive the essential substances from food or drink. Functionally they resemble the zang organs in storing essential Qi; but they do not have the complex functions that the zang organs do.”

** From Zang - Fu theory we know that mental activities (considered as Shen) are mainly attributed to Heart. But the Heart luo - connecting channel has a direct connection between the middle of the Heart and the Brain (center of eye).

people with MS: the brain turns around (balance problems and dizziness), the legs are weak like paralyzed, the eyes can't see. The Essences can't reach the level of the Brain and so the person is exhausted, have fatigue, is slow and lazy. "...the richness and power of the brain has a feedback effect on all the marrow of the body. So in case of great weakness, it is not only the thought and the sense organs which are affected but the whole body, and there is the need to lie down and rest."²¹ When Marrow is insufficient the person can have also cramps and pain in the joints but also much deeper pain that came from the inability of Marrow to irrigate and lubricate the Bones²², pain that seems to share the same characteristic with the nerve pain of people with MS.

Mai, Dan, Bao

The Mai are strongly connected with Heart and Blood and as we saw earlier, a lot of MS manifestations can be attributed to Blood (Yin) deficiency. At the same time, Mai "are in charge of avoiding the leakage of essences, and of containing the nutritive qi, and the blood and qi inside the body."²³ Since Blood is made from the Spleen liquids and Kidney Essences after passing from Heart, we can see the importance of Mai for the nutrition and digestion as well as the connection with the digestion disturbances on people with MS: when the Mai are filled with Wind, the digestion is not possible. Even more "...essences and qi... follows the mai going up and down..."²⁴. If the normal flow of Mai get disturbed, we can get a condition called Mai Wei. This is manifested with weakness or paralysis in the legs, since Mai have the ability to carry all the necessary elements for rebuilding and maintenance of the muscles, named Jin Mai²⁵. Mai have also effect in the eyes and in the daily rhythm of Yin and Yang in the body, regulating sleep patterns as well as Defensive Qi circulation.

Dan and Bao have special connection with the reproduction mechanism but in the current research, mainly due to space limitation, we are not going to make a connection of reproduction with MS (even if from our clinical practice there are indications of a possible relation, giving food for thought and inspiration for future studies). There is however an interesting aspect in the classical texts (Su wen ch.43): "Bi* of the Bao: if one presses the lower abdomen and bladder area there is pain inside. The region is saturated with fluid and it is difficult to pass water..."²⁶ In this we see a description of a very common problem for people with MS, dysuria and especially anuria, due to lack of circulation.

* Bi, meaning blockage of functions, is usually caused by cold, wind or damp.

From Extraordinary View to Extraordinary Practice: Qi Jing Ba Mai

Successfully “digesting” the above understanding of MS from a TCM perspective and admiring the importance of the Extraordinary Fu, when we move our attention to the practical work we need to focus to the Qi Jing Ba Mai, the Extraordinary Vessels. “The Extraordinary Vessels, circulate the Jing (Essence) as well as being overall regulators of Qi flow and a deep reservoir of Qi.”²⁷ Before take a look in the Extraordinary Vessels one by one and their relationship with MS, let's summarize some important general functions of them related to MS: ²⁸

- a) they circulate the Jing (Essence)
- b) they are tapping in Jing and Yuan Qi
- c) they act as a reservoir for the 12 meridians
- d) they circulate Wei Qi (defensive qi)
- e) they are linked with the Extraordinary Fu
- f) they have a profound effect on the hormonal and nervous system.

Du, Ren, Chong and Dai Mai

One very important function of those Vessels (Du, Ren, Chong and Dai Mai) is “to preserve and ensure the link of all the diverse Yin and Yang functions of the body with the origin.”²⁹ The basic disturbance in the balance of Yin and Yang in people with MS can be successfully addressed through them.

Du Mai's movement is an ascending movement and through feng fu (Du 16) it's influence penetrate the Brain (a Yin mass), bringing to it a Yang stimulation, necessary in order to have good functioning of the upper orifices (eyes, ears, nose), perception, knowledge and adaptation to the environment*.³⁰ Ren Mai, is acting to continuously ensure the nourishing of life through the Essences, Blood and Liquids. It is the master and controller of all the Yin within the body. ³¹ Chong Mai is called “the Sea of Blood” as well as “the Sea of the Meridians”. It regulates both Blood and Qi, especially concerned with the good circulation rhythm of them. It is considered the mother of the Yang circulation but at the same time it provide the Yang with Yin (Essences, Blood, Liquids).³² Du Mai is the master of the Yang,

*Du 16 should be mentioned further, since it's where Wind can penetrate the Brain causing dizziness and balance problems as well as eyes disorders.

Ren Mai is the master of the Yin, Chong Mai is the gathering and interrelation of both and Dai Mai is making the connection of all three in the area of their common origin.

Looking at the symptoms of MS, Du, Ren and Chong have all in their own way a relationship with the digestive process³³. All three of them also “control the lower abdomen and ensure good circulation below the navel and good balance between the ascending and descending movement of the blood and qi and liquids”³⁴, necessary functions in order to have correct function of the lower orifices, urination and bowel movement. Du Mai have also pathology related to the - observed in MS patients - cognitive and emotional problems, disordered thoughts, mood swings and agitation³⁵, difficulty in speaking³⁶ as well as to muscular problems and fatigue, since Du Mai is helping with the mastering of muscles from the Yang of the body which gives the ability of movement to the Yin flesh.³⁷ Chong Mai pathology can arise anywhere in the body, since “is the whole organism, nothing else, able to go into the smallest and largest valleys throughout the body.”³⁸ Its insufficiency give a picture very commonly described from people with MS when speaking about their pains: “If there is insufficiency of the sea of blood one ... is cramped without knowing where the illness is.”³⁹ Chong Mai and especially Dai Mai plays a big role in the leg related Wei pathology of people with MS. Chong Mai “warms the flesh of the foot and the leg”⁴⁰ while when “the dai mai no longer guides... the lower limbs are impotent and can no longer function.”⁴¹

Yin & Yang Qiao Mai, Yin & Yang Wei Mai

Yin and Yang Qiao Mai as well as Yin and Yang Wei Mai, share with the previous four Mai their importance on Yin and Yang balance in the body. Qiao Mai give the rhythm of the Yin and the Yang in each moment of life ⁴² while also ensure the conjunction of them in the form of nutritive and defensive Qi⁴³. Their function brings “...all the vitality... to the upper orifices and to the brain...”⁴⁴ Yang Wei Mai connects the Yang and Yin Wei Mai connects the Yin and in pathology they are unable to connect with one another⁴⁵.

With the symptoms of MS in mind, Qiao Mai give the ability to walk* ⁴⁶ as well as the ability to open and close the eyes⁴⁷, reminding us the problems of fatigue and balance as well as vision disturbances, insomnia and sleepiness. Qiao Mai, like Chong Mai in general, can have

* Walking is considered a way to balance the Yang Qiao Mai. Very interesting from clinical respective, since the encouragement and support of people with MS to walk in daily base (even if they are in wheelchair) is an extremely important aid in their recovery.

pain without a specific location⁴⁸, possibly due to dampness, a condition that very often exist in people with MS, mainly originated in nutritional reasons. In their differentiation, Yin Qiao Mai symptoms include the very common difficulty in urination while Yang Qiao Mai symptoms include numbness, cramps and paralysis of the muscles.⁴⁹ Wei Mai in pathology are more connected with the emotional and cognitive symptoms of people with MS. When Yin Wei Mai and Yang Wei Mai are not connected, “there is annoyance and loss of will”⁵⁰ lack of strength and inability to control own life.

Conclusion: In the Clinic

Working with people suffering from MS have a lot of challenges and opportunities. If the practitioner is based only in the Zang – Fu and the 12 meridians, s/he need to dance between Yin and Yang complexity that often confuse the diagnosis of the patient. The understanding of the role of Extraordinary Fu and Vessels in MS, can help the practitioner to make a personal, individualized treatment plan, founded in the roots of the condition. This, of course, don't mean that there will be no need to re-evaluate and modify the plan according to the condition, before and after each session. But gives to the practitioner a solid background, enabling him/her to understand this extraordinary Windy disease.

In the clinical setting, of course I'm not only working with the Extraordinary Vessels, not even only with Shiatsu. The Extraordinary Vessels can occupy a whole session of mine or might be just a holding of a couple of master points. I have the rare opportunity to work with few clients in long term and intensively. I found the intensive work (even daily some periods!) extremely beneficial, but in usual situations we are not able to provide this kind of care. A treatment plan for people with MS should include the involvement of their close relatives. I have found the Extraordinary Vessels very important not only in my practice with MS but also as an educational aid in enabling the people who take care of MS patients to continue the treatment between the sessions and after the conclusion of a treatment series.

MS is an extraordinary condition and need extraordinary work for her treatment. Shiatsu is an extraordinary way to take care of people with MS and the Extraordinary Vessels give us the extraordinary opportunity to dive deep in her and promote a change in her roots.

Appendix A. Summary of a Case Study

M. is a woman 39 years old. In 2001 she get diagnosed with asthma, while in 2004 get diagnosed with MS. MS symptoms begin with vision problems in 1999. Currently she is not receiving any medication for MS, since nothing help her. She is in cortisone medication for asthma many years and during the last 10 months she also use an extra medication for bronchitis related symptoms. She have spasms in her legs but not pains, feel very cold even if sweat at night and her general condition is very weak, even if she consider that she have a lot of energy. She's very easily fatigued and can't walk more than 100 meters. She sleep 6-8 hours per day but sleep have not good quality. She wake up at night and between 3 to 5 she get up and can't sleep any more. Very often at daytime she feel dizzy. She is going to toilet regularly every day and have gas problems. Urination start with difficulty and it's interrupted, usually without getting the feeling that bladder is empty. She is frequently urinating, almost every hour, but she need 2-4 times per day catheterization to empty the bladder. She also take daily medicine to avoid bladder infection and a stomach anti-acid drug to save the stomach from the drugs. She feel thirsty with desire to drink and mild appetite. She feel calm-relaxed and she claim to exercise regularly. Her body is very thin and loose weight very easy. Her coffee consumption is about 2 cups per day filter coffee. Her eyes are dry and around eyes (but not only) appears from time to time psoriasis. Her menstruation is irregular. First start at age of 13. After her giving birth, she suffer from heavy menstruation and use Mirena contraception hormone system to control it. She have 2 children with last birth in July 2009. The reason she ask for help is an ovarian cyst she has even before use of Mirena, that in a recent test have grow and is now about 4cm.

Initial Plan

The plan for therapy is to tonify everything! First priority is the Lungs so that can nourish her organism and have a base to continue. I hope to invigorate her Blood, so that nourish her deficiency and help with psoriasis, dry eyes and sleep, as well as the suppressed by medication heavy menstruation. Will try to dry Dampness and Phlegm in upper and lower Jiao, so that help her Lungs but also try to eliminate the ovarian cyst and relief from the strong urination problem. Her cold feeling indicate Yang deficiency but I believe the long term disease and medication have deplete her Yin and she is in extreme deficiency and unbalanced Yin and Yang, while her birth giving experience haven't totally heal yet but suppressed using the hormonal device.

Treatments Summary

The treatment period last about 3 months with 1-2 sessions per week.

1st session (24/10/13)

We start working in semi-reclined supine position with support in her knees and fully covered with blankets body, since she feel extremely cold. After a general palming, start working very slow, yin tonifying in lungs. Lu1 and Lu5 was totally empty points and stay for long but in general the lungs tonification in hands meridians take more than 1 hour, followed by a fast spleen pass and then points work in feet, opening Chong Mai with Sp4 and Dai Mai with GB41, tonifying yin and blood with Sp6, working K1,3,6. The whole session takes about 2 hours. While working in lungs she start feeling the need to remove phlegm from her mouth many times and she felt very relieved from this. She also report much better breathing after the session. In next day call, she report much better breath without the need of her night bronchitis medication and a much better sleep, without interruptions and early wake up.

2nd – 3rd session

In those sessions she have a strong tendency to speak and was sweating even if palms and feet was cold. The treatments involve work in Heart, Lungs, Stomach, Ren and Chong Mai. Her breath was still improved and suggest her to use eucalyptus steam instead of the extra medication if need help. Nutritional suggestions was given to help invigorate Blood. After the 3rd session acne appear in her face.

4th – 5th session

She was suffering much from back pain and after palpation I suggest a cupping session. Moxibustion also used to warm Lungs and Kidneys. Pain was relieved and breathing was still improving. After the 5th session she didn't need anymore the extra asthma medication and catheterization get limited to once per day.

6th session

She has experience a strong emotional stress so I decide to offer the Extraordinary Connection treatment. During the treatment she was very relaxed until some point and then an emotional release occur. Next days was feeling really thankful for this session and it was obvious in her overall condition that have bring a shift in her whole mood.

7th – 20th session

Those was sessions lasting about 1 hour each. With few exceptions was regular work in Chong, Dai, Ren Mai as well as Lungs and Kidneys. After the conclusion of the 2 first months, I suggest a monthly nutritional supplements program targeting the Dampness and Stasis in the lower Jiao.

Results

Concluding the 3 months program, her condition was obviously improved very much. Her asthma was better than ever and a doctor examination suggest that the considered to be permanent condition in her lungs have been “unexplainable” relieved. Her urination have been improved very much with maximum of one catheterization per day. Her ovarian cyst have shrink in about half size. The dry eyes condition have improve in a stage of not even referring to this and her sleep pattern have normalized. Cramping legs occur more rear and she is able to walk about 400 meters.

During the 3rd month, I teach to her husband some ways to work with the Extraordinary Vessels, Kidneys and Lungs. He offer her an improvised treatment with the points once per week since than. 4 months later, her condition continue improving without more treatments from me but the help her husband offer her. The recent examination for the ovarian cysts have saw no cysts at all. Her urination have been improved in a condition that she catheterizate once per week. She use minimum medication for her asthma. In a recent trip in another city, she was able to walk about a kilometer by herself and cold feeling is not so bad anymore.

In general the quality of her life have seriously improved and her overall health condition is unexpectedly improved, benefited in many ways she didn't expect to ever address.

Appendix B. Extraordinary Connection

The following Kata is one that I use sometimes in order to restore a balance in the flow of the Extraordinary Vessels and connect them. It's a very gentle but effective technique, consisted from different connections. I don't use it very often with the same client since it have very strong effect and need time in order to be totally integrated. In practice, it should be noted that it can bring strong emotional reactions and can stimulate body memories from traumatic experiences. The practitioner should be ready anytime to interrupt it if the receiver ask to (as in every shiatsu treatment, I make clear to the receiver before the beginning of the treatment that s/he can always ask me to stop without any need to explain me why and I will immediately respect it and stop). The inspiration for this Kata came from a technique called Gentle Bio-Energetics Balance, taught to me by Richard Overly of the Eva's Reich Gentle Bio-Energetics Institute. Its root lay in Randolph Stone Polarity Therapy and I have done some modifications to fit it in my understanding of the Extraordinary Vessels. The original technique can be found in *R. C. Overly (2005): Gentle Bio-Energetics, Theory and Tools for Everyone*. For the points locations I use the books of *C. Jarmey & I. Bouratinos (2011): A practical guide to Acupoints (2nd ed.)*, *C. H. Hempen & V.W Chow (2005): Pocket Atlas of Acupuncture*, while for the Extraordinary Vessels *S. Yates (2010): Pregnancy and Childbirth*.

All the connections are passive, without any intention to send Qi or release congestion. The level of touch is really gentle and the points mentioned indicate point area but it's not necessary to find the exact point. The practitioner make the connection and just listen until feel the points connected.

The Kata begins with the receiver lying in her/his back and the practitioner over her/his head. Begin with both hands.

- 1) Thumb in GB16 (around fontanels area) / Fingers hairline - Brain (GB13, GB15, Du24...)
- 2) Thumb in GB16 (around fontanels area) / Middle finger BL1-2
- 3) Middle fingers GB1
- 4) Hold back of head – Brain with palms / fingers in GB16, 20 and occipital line

In the connections to follow, the first point is on the right hand and the second on the left.

- 5) Hold back of head – Brain with palm / Palm in forehead – Brain
- 6) Palm in Ren – Chong in chest / Palm in forehead – Brain

The practitioner moves to the right side of the receiver:

- 7) Ren2 / Ren15
- 8) Ren2 / Ren17
- 9) Ren2 / Ren22
- 10) Ren2 / SI10
- 11) Ren15 / SI10
- 12) Ren17 / SI10
- 13) Ren22 / SI10
- 14) St12 / SI10
- 15) SJ5-HP6 / SI10
- 16) Sp13 / Liv13
- 17) Sp13 / Bl23
- 18) K3-Bl60 / Bl23
- 19) K6-Bl62 / Bl23

The practitioner moves to the left side of the receiver and repeats connections 7-19

Then, starting from the area of the Dai Mai, the practitioner connects front and back (Ren / Du) in different organ areas (ie. Bao front / sacral back, Bao front / diaphragm back, diaphragm front and back, diaphragm and Heart etc. until Brain) moving one hand each time. The connections can be in the Chakras for those practitioners who prefer to work with them.

Completing this sequence in the Brain, we can make a connection with the receiver on the side, between the sacral area and the Brain and close the session with a connection between Ren8 / Du20.

It's always good when working with the Extraordinary Vessels to encourage the receiver to get some resting time after completing the treatment, since we want to promote the slow movement of the Jing and in my practice I tend to make this suggestion in the beginning of the session.

- 1 Understanding MS short video, <http://www.msactivesource.com/> (last accessed 24/6/2014)
- 2 MCB80.1x: Fundamentals of Neuroscience, Part I (a course of study offered by HarvardX, an online learning initiative of Harvard University through edX), <http://www.mcb80x.org/> (last accessed 24/6/2014)
- 3 <http://www.healthline.com/health/multiple-sclerosis> (last accessed 24/6/2014)
- 4 C. Beresford-Cooke, (2011), *Shiatsu Theory & Practice*, 3d edition, p.47
- 5 A. Taylor, (2007), *Multiple Sclerosis & Shiatsu*, European Shiatsu Congress Kiental, p.183-189
- 6 P. von Blarer, (2007), *Multiple Sclerosis, Strengthening the Po through Shiatsu*, European Shiatsu Congress Kiental, p.190-197
- 7 C. Jarney, (1996), *Principles of Shiatsu*, p.137-138
- 8 Y. Kawada & S. Karcher, (2002), *Essential Shiatsu*, p.175-176
- 9 A. Kennedy, (2014), *Shiatsu, what it is , what it does, why it matters*, p.159-161
- 10 M. Rycroft, *Use of Triple Heater in the treatment of Multiple Sclerosis & Shiatsu and nerve damage*, <http://www.shiatsu4disability.co.uk> (last accessed 24/6/2014)
- 11 <http://www.shiatusociety.org/sites/default/files/Shiatsu-and-Multiple-Sclerosis.pdf> (last accessed 24/6/2014)
- 12 E. Zhang, (2008), *Wei Syndrome*, Lecture in Middlesex University, <http://www.tcm-treatment.com/tcm-teaching/Wei-syndrome.htm> (last accessed 24/6/2014)
- 13 B. Flaws & P. Sionneau, (2005) *The treatment of modern western medical diseases with Chinese medicine*, 2nd edition, p.373-379
- 14 T. Cibik, (2007), *Multiple Sclerosis and Medical QiGong*, *Chinese Medicine Times*, Vol 2, Issue 2, http://www.chinesemedicinetimes.com/section.php/206/1/multiple_sclerosis_and_medical_qigong (last accessed 24/6/2014)
- 15 C. M. Cormack, (2008), *Chinese Medicine mitigates the pain, swelling and weakness of multiple sclerosis*, http://acupuncture.com/newsletters/m_oct08/multiple%20sclerosis.htm (last accessed 24/6/2014)
- 16 C. Larre & E. R. De La Vallee, (1997), *The eight extraordinary meridians*, p.51
- 17 C. Larre & E. R. De La Vallee, (2010), *The extraordinary fu*, p.206-208
- 18 Z.W. Liu & L. Liu (eds.), (2009), *Essentials of Chinese Medicine: Volume 1*, p.87
- 19 P. Deadman & M. Al-Khafaji, (2000), *A Manual of Acupuncture*, CD-Rom edition
- 20 C. Larre & E. R. De La Vallee, (2010), p.56
- 21 C. Larre & E. R. De La Vallee, (2010), p.89
- 22 C. Larre & E. R. De La Vallee, (2010), p.101
- 23 C. Larre & E. R. De La Vallee, (2010), p.109
- 24 C. Larre & E. R. De La Vallee, (2010), p.118
- 25 C. Larre & E. R. De La Vallee, (2010), p.131
- 26 C. Larre & E. R. De La Vallee, (2010), p.162
- 27 S. Yates, (2011), *Pregnance, maternity care and the ex vessels*, European Shiatsu Congress Kiental, p.13-18
- 28 S. Yates, (2010), *Pregnancy and Childbirth*, p.121-129
- 29 C. Larre & E. R. De La Vallee, (1997), p.94
- 30 C. Larre & E. R. De La Vallee, (1997), p.30-31, 37, 80-81
- 31 C. Larre & E. R. De La Vallee, (1997), p.86-87
- 32 C. Larre & E. R. De La Vallee, (1997), p.109-113
- 33 C. Larre & E. R. De La Vallee, (1997), p.45, 93, 115
- 34 C. Larre & E. R. De La Vallee, (1997), p.50
- 35 C. Larre & E. R. De La Vallee, (1997), p.54
- 36 C. Larre & E. R. De La Vallee, (1997), p.78-80
- 37 C. Larre & E. R. De La Vallee, (1997), p.65-66
- 38 C. Larre & E. R. De La Vallee, (1997), p.120
- 39 C. Larre & E. R. De La Vallee, (1997), p.123
- 40 C. Larre & E. R. De La Vallee, (1997), p.112-114
- 41 C. Larre & E. R. De La Vallee, (1997), p.147
- 42 C. Larre & E. R. De La Vallee, (1997), p.173-174
- 43 C. Larre & E. R. De La Vallee, (1997), p.181
- 44 C. Larre & E. R. De La Vallee, (1997), p.173
- 45 C. Larre & E. R. De La Vallee, (1997), p.225
- 46 C. Larre & E. R. De La Vallee, (1997), p.161
- 47 C. Larre & E. R. De La Vallee, (1997), p.182
- 48 C. Larre & E. R. De La Vallee, (1997), p.196
- 49 C. Larre & E. R. De La Vallee, (1997), p.202
- 50 C. Larre & E. R. De La Vallee, (1997), p.225