

北京中医药大学针灸学科

学术论文集

北京中医药大学针灸学院

二〇〇二年十二月

北京中医药大学针灸学科

学术论文集

(1997—2001 年)

北京中医药大学针灸学院

二〇〇年十一月十八日

谨以此论文集

祝贺北京中医药大学
第四届学术节圆满成功！

郑英良书记赠书

纪念北京中医药大学
针灸学院（原针灸推拿
系）成立 20 周年！

针灸学院

2002 年 12 月 2 日

美国 TCM 有限公司

上海泰成科技发展有限公司

美国 TCM 公司创办十余年来，一直致力于将迅速、有效、无副作用等神奇功效的中国针灸医学推广到世界上更多地区以造福更多国家和人民。

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二、出版与发行

我们在中国针灸学会、中国中医研究院、北京中医药大学针灸学院、上海中医药大学、上海针灸杂志、上海针灸经络研究所等的支持下，创办了英文的中医特色《TCM》双月刊杂志，并已开始发行中、英文双语刊物，并在近期逐步发行西文、德文、法文等文字的 TCM 杂志。同时 TCM 也出版一些别具特色的针灸医学专著，如广受欢迎的由著名运动医学卢鼎厚教授撰写的《肌肉损伤和颈肩腰臀腿痛》，近期我们还会继续出版一些临床上有特效的专著。

三、加盟连锁机构

公司已成功地在泰国等地建立起加盟连锁机构，帮助一些有志于投身于中医事业的投资者最小风险地建立起长久稳定的事业。

1. 加盟培训学校

我们在各语种国家都准备建立起完整的中医教学，包括针灸医学、中药学、气功、推拿等。使诸多中医爱好者可就近用自己熟悉的语言学习到原汁原味的中国传统医学。勿需影响现有的工作和生活、亦节省了远赴中国的高额花费。为了保障教学质量，我们已联络全国十余所中医药大学及中国针灸学会、中国中医研究院共同承担，并委托中华人民共和国中医药管理局国际教育考试中心承担毕业生的水平测试，对合格者颁发证书。对诸多的中医工作者，学校也会经常举办特色治疗讲习会，邀请全球最具盛名及丰富临床经验的学者主讲，帮助广大针灸爱好者提高针灸水准。我们目前和我们的合作伙伴可在以下地区提供教学服务：

2. 加盟诊所

中医学是一门经验医学，非短期学习就能充分掌握，有经验、治疗效果好的中医针灸师至少有余十乃至几十年临床实践，这就使许多有志于采用中医预防治疗疾病的医务工作者，因较难取得更好的疗效而降低了对社会的贡献和应得的尊重和荣誉。

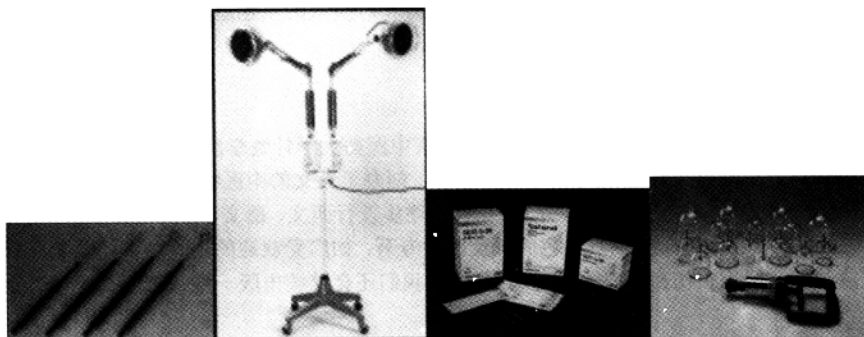
为解决这一情况，TCM 公司在中国针灸学会支持下，联合北京中医药大学针灸学院、上海中医药大学、成都中医药大学、中国中医研究院、上海针灸经络研究所、上海针灸杂志

严谨公正的态度，积十余年的经验，总结出一套补充有效的 TCM 诊所连锁计划。在此计划中，TCM 公司将常年派出多位有经验的专家轮流赴全球的各 TCM 诊所授课和现场指导，帮助每一诊所的每一位医生可以学会行针和切实掌握越来越多的用之有效的绝招，又可勿需为来中国学习、实践而停止工作、耗费不菲。

3. 经销商

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美国 TCM 有限公司

上海泰成科技发展有限公司

TCM SUPPLY CO. (U.S.A.)

15946 Kaplan Ave. City of Industry, CA 91744

Fax: +1-626-968-8180

Tel: +1-626-968-2600

E-mail: TCM-world@nease.com

美国 TCM 公司上海办事处：

Shanghai TCM Technology and Development Co. Ltd. (上海泰成科技发展有限公司)

中国上海天钥桥路 380 弄 27-28 号

邮编：200030

传真：+86-21-64384173

电话：+86-21-54590638; 8008204086

E-mail: tcn@tcn-w.com.cn

<http://www.tcm-w.com.cn>



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十二经筋理论探讨

张 军

北京中医药大学学报 1997 年 1 月第 20 卷第 1 期

十二经筋是经络系统的组成部分,是十二经脉的外在连属部分,具有联缀四肢关节,约束骨骼,维络周身,主司运动的功能。经筋为病,涉及的病种非常广泛,且多数为针灸治疗的适应证。因此,深入探讨经筋理论,对于提高针灸临床疗效,具有十分重要的意义。

1. 十二经筋的循行特点

《灵枢·经筋》对十二经筋的循行走向有详细的记载,与十二经脉的循行相比,有以下几个特点。

1.1 循行分布与十二经脉基本相同

十二经筋的循行分布基本与十二经脉的外行部分一致,即经脉循行径路周围的筋肉,多属本经经筋所辖。但也有循行至经脉未及之处者,如足太阳之筋“其支者,入腋,上出缺盆”;足少阳之筋“上额角,交巅上”;手少阳之筋“走颈,合手太阳,其支者,当曲颊,入系舌本”;足太阴之筋“其内者,著于脊”等等。因此,在某些方面,十二经筋补充和延伸了十二经脉在体表分布循行及功能上的不足。

1.2 循行走向呈向心性

十二经筋皆起于四肢末端,结于关节,终于头身,呈向心性循行。这一特点与十二经脉在循行走向上既有向心性循行又有离心性循行不同。具体来说,手三阳、足三阴六条经筋和同名经脉的循行方向相一致,而手三阴、足三阳六条经筋与同名经脉的循行方向正好相反。

1.3 循行过程中有“结”、“聚”等特点

如足三阳之筋结于“颞”(面颞部),足三阴之筋结于“阴器”,手三阳之筋结于“角”(头角部),手三阴之筋结于“贲”(胸膈部),各经筋之间通过结聚,在结构上相互联系,在功能上相互配合,协调着人体的运动。此外,十二经筋在循行途中,都聚合于四肢关节和肌肉丰盛之处,如腕、肘、腋、臂、肩、颈、踝、腓、膝、股、脾、臀等处。这与《素问·五脏生成》所说的“诸筋者,皆属于节”的理论是相吻合的。

1.4 不络属脏腑

十二经筋主要循行于四肢躯干及头面的体表部位,虽然手足三阴之筋也内行胸腹膈中,但均不直接入络脏腑,这与十二经脉内属络脏腑有明显的区别。正因为如此,十二经筋的命名中皆未贯脏腑之名。

2. 经筋病的病因病机

经筋病的病理过程,主要为经筋受损和经筋失养,其病因病机主要有以下 3 个方面。

2.1 风寒湿热之邪外侵

如汗出当风,露卧受寒,冒雨涉水,或久居寒湿之处,感受风寒湿热之邪,稽留肌肤筋肉之间,致气血凝滞不通,经筋失养,且寒主收引,而发为筋肉酸楚、疼痛、麻木、拘挛、引掣、强直、活动受限等病变。感受风热之邪,或素体阳盛,寒郁化热,热淫经筋,致使经筋弛纵不收、肿胀、疼痛等。若外感湿热之邪,或过食膏粱厚味,久嗜辛辣酒醴,蕴湿积热,侵淫经筋,导致筋脉失其润养而造成经筋的拘挛、伸缩失常、弛纵不收、痿软无力等病变。正如《素问·生气通天论》曰:“湿热不攘,大筋软短,小筋弛长,软短为拘,弛长为痿。”

2.2 跌打闪挫,强力负重

这些外在因素可使肢体关节周围的经筋过度扭曲或牵拉,引起扭伤、肿胀、错位甚或

撕裂等病变,同时络脉也随之受损,瘀血壅滞局部。临床表现为受伤部位肿胀疼痛,关节活动障碍等等。如果迁延日久,瘀血停留,经筋失养,可致受损部位肌肉萎缩,变为慢性劳损病变。

2.3 脾胃虚弱,肝血不足

《素问·痿论》曰:“阳明者,五脏六腑之海也,主润宗筋。”若脾胃虚弱,受纳运化功能失常,气血津液之源不足,则经筋失养,形成宗筋弛纵,四肢不用的病变;如脾虚生湿,湿聚成痰,痰湿流注经筋结于颈项、腋下,可致痰核瘰癧等症。此外由于“肝主身之筋膜”(《素问·痿论》),若肝血不足,筋膜失养,可致手足振颤,肢体麻木,屈伸不利,甚则痿痹。

3. 十二经筋主病

《灵枢·经筋》对十二经筋的病候记载繁多。综观其病候,可分为一般筋病和特殊筋病两因。

一般筋病是各经筋循行所过之处的筋肉、关节的疾患,以疼痛和运动障碍为主。如经筋的牵掣、拘挛、疼痛、转筋、强直、弛纵以及关节活动不利、肢体偏废不用等。如《灵枢·经筋》足太阳之筋病“小指支,跟肿痛,腓挛,脊反折,项筋急,肩不举,腋支,缺盆中纽痛,不可左右摇”;足少阳之筋病“小指次指支转筋,引膝外转筋,膝不可屈伸,腓筋急,前引髀,后引尻,即不乘季胁痛”等等。一般筋病,多见于西医学的骨关节和神经系统疾病。目前临床上常见的四肢软组织损伤、腰肌劳损、棘间韧带损伤、梨状肌综合征、臀上皮神经损伤、腓肠肌痉挛、肩周炎、桡骨外上髁炎、腱鞘囊肿、落枕、肌筋膜炎、肋间神经痛、三叉神经痛、面肌痉挛、面神经麻痹等疾患,均属于一般筋病的范畴。针灸治疗一般筋病效果颇佳。

特殊筋病是经筋受邪后累及经脉及其所属脏腑和五官九窍的疾患。如息贲、伏梁、耳鸣耳痛、目不合、舌卷、癰疽、阴器不用、维筋相交等。十二经脉内属于脏腑,外络于支节,经筋是经脉的外在联属部分,当经筋受邪时,可以影响经脉及其所属的脏腑及五官九窍,而出现以上病症。其中“息贲”、“伏梁”,与西医学的肺气肿、支气管扩张、膈肌痉挛、心包炎、胃癌相似;“维筋相交”与西医学的脑神经损伤后遗症极为相似。目前在临床上,针灸治疗某些特殊筋病疗效较好。

4. 经筋理论的临床应用

4.1 “以痛为输”的取穴原则

《灵枢·经筋》在论述经筋病治疗时,多次指出其取穴原则为“以痛为输”。此即以疼痛部位或压痛之处为腧,而不必拘于经穴所限。这种取穴原则开后世“阿是穴”应用之先河,至今仍是治疗各种经筋病的行之有效的办法。如笔者曾治1例左髋关节急性扭伤患者。当时患者左下肢疼痛剧烈,不能活动。令患者右侧卧位,在患侧臀部及大腿后侧最痛处各刺1针,施提插捻转手法1分钟后,疼痛即刻缓解。针刺3次后痛止,活动如常。

由于经筋的循行人多是与经脉相伴而行的,且受经脉的气血濡养和调节,因此有许多经穴也可治疗经筋的病候。故治疗经筋病除了“以痛为输”取穴外,有时还需根据经络的循行分布,选取适当的经穴进行治疗。

4.2 燔针劫刺的针刺方法

《灵枢·经筋》指出经筋为病“治在燔针劫刺”,此法主要针对寒性筋病而言;若“热则筋纵不收,无用燔针”。燔针亦名火针,即用烧红的针直接刺入经筋。以劫散寒邪,温经止痛。日前燔针在临床上较少使用,而多采用在此基础上发展起来的温针灸法,它具有热力深透而不伤皮肤的优点,治疗各种寒性筋病效佳。例如临床上常见的肩周炎,治疗时可在肩部压痛点及肩髃、肩髃等穴处施温针灸法,常可取得满意的疗效。此外,临床上用火针治疗颈淋巴结结核、膝踝关节的滑囊炎和痤疮疗效显著,有待今后进一步总结提高。

4.3 经筋所至, 主治所及

十二经筋的循行分布虽然与十二经脉基本相一致, 但也有行至经脉未及之处者, 因而弥补了经脉在体表循行的不足, 扩大了经穴的主治范围, 即经筋循行所至处, 经穴主治所能及。如足太阳膀胱经不循胸胁, 但其经穴至阴穴能治胸痛无常处, 这是由于足太阳之筋“入腋下, 上出缺盆”之缘故。又如手少阳三焦经并不循咽喉, 但其经穴中渚穴能治咽肿、颈肿, 三阳络、四渎穴能治暴瘖, 这是因为本筋“走颈, 合手太阳, 其支者, 当曲颊, 入系舌本”之故。笔者曾治 1 例急性腰扭伤患者, 初诊时腰痛不可俯仰, 动则疼痛如折, 令患者取坐位, 取双侧条口透承山穴, 得气后行大幅度捻转手法, 同时稍压腰部, 留针 5 分钟, 起针后疼痛基本消失。按条口穴是胃经的经穴, 虽胃经不循腰脊, 但足阳明经筋“直上结于髀枢, 上循胁, 属脊”, 因此条口穴可治腰痛; 又足太阳经筋“上挟脊上项”, 故取条口透承山刺之, 以调理挟脊之经筋。经筋利, 经气畅, 故腰痛得除。

跷脉理论及其临床应用

刘清国

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阴阳跷脉属奇经系统, 首载于《内经》, 后世医家多有阐发, 至李时珍《奇经八脉考》跷脉理论已趋完善。据古代文献记载, 阴阳跷脉循行分布清晰, 各具生理、病理特点, 属穴虽少但临床应用广泛。盖因经络系统以十四经为中心, 跷脉的临床应用常被忽视。现就跷脉理论及其临床应用, 作一初步探讨。

阴阳跷脉的循行分布特点

《灵枢·脉度》篇曰:“(阴)跷脉者, 少阴之别, 起于然骨之后, 上内踝之前, 直上循阴股入阴, 上循膈里入缺盆, 上出人迎之前, 入頄属目内眦, 合于太阳, 阳跷而上行。”

《难经·二十八难》曰:“阴跷脉者, 亦起于根中, 循内踝上行, 至咽喉, 交贯冲脉。”《奇经八脉考》禀承经旨, 并补充曰:“阴跷脉……上行属目内眦, 与手足太阳、足阳明, 阳跷会于睛明而上行。”据此分析, 阴跷脉起于足内踝之下, 别离于肾经, 上行到阴部, 经小腹、脐腹、上腹、胸膈, 过缺盆、咽喉、面颊, 达目内眦。

《内经》未载阳跷脉的循行分布, 及至《难经》补充了阳跷脉的循行分布:“阳跷者, 起于跟中, 循外踝上行, 入风池。”述之简约。《奇经八脉考》考辨前人之说, 详述其行曰:“阳跷者, 足太阳之别脉, 其脉起于跟中, 出于外踝下足太阳申脉穴, 当踝后绕跟, 以仆参为本, 上外踝上三寸, 以跗阳为郛, 直上循股外廉, 循胁后髀, 上会于太阳、阳维于臑俞, 上行于肩髃外廉, 会手阳明于巨骨, 会手阳明、少阳于肩髃, 上人迎夹口吻, 会手足阳明、任脉于地仓, 同足阳明上而行巨髃, 复会任脉与承泣, 至目内眦, 与手足太阳、足阳明、阴跷五脉会于睛明穴, 从睛明上行入发际, 下耳后, 入风池而终”, 指出阳跷脉别足太阳于足跟, 循下肢外侧, 经髀、胁, 至肩上, 达人迎, 口吻, 过面部, 至目内眦, 再上额循头侧达风池而终。

阴跷脉下别足少阴肾经, 上交贯冲脉, 会四阳经于目内眦, 虽不直入于脏腑, 但在胸膈所过之处与五脏经气相感应; 阳跷脉下离足太阳膀胱经, 交会于手三阳经、足阳明经, 任脉、阴跷脉于肩、颈、目内眦处。值得注意的是, 阴阳跷脉与脑的直接联系, 如《灵枢·寒热病》曰:“足太阳有通项入于脑者, 正属日本, 名曰目系, ……在项中两筋间, 入脑乃别于阴跷阳跷, 阴阳相交……交于目内眦。”基于以上分析, 可知阴阳跷脉的循行分别有如下特点, 其一, 下出于肾、膀胱二经, 上达于目, 与足太阳经共会于脑中, 其二, 分行于阴

阳，不入于脏腑，其二，多经交会，形成网络。

跷脉的生理功能特点

1. 调脑之阴阳

阴跷脉下出于肾经，上通脑海，阴精循此上达，充盈脑髓。阳跷脉下连足太阳经，上入脑中，主持阳气，与阴跷脉相合，阴升阳降，阴阳各主其时，使脑中阴阳合化，阴平阳秘，清明内持，则脑有所主，神有所依，元神因此而收发自如。因此跷脉是脑保持阴阳平稳，正常发挥生理功能的重要基础。

2. 主一身之动静

“跷者，捷也”。跷脉与人身之动静关系密切，动则为阳，静则为阴，两脉皆起于跟中，行于下肢内外、身体前后，均上达于脑，卫气通行全身又与跷脉密不可分。昼日阳出于外而阳气盛，卫气行于阳则阳跷脉满盛，以司人体正常活动，使行动矫捷，目张而不寐。入夜阳入于阴而阴气盛，阴气盛则阴跷脉满盛，主静而休眠，目闭而欲寐，故阴阳跷脉与人体昼夜节律密切相关，主持机体的动静与寤寐。

3. 分主表里

阴跷脉行于前、行于里，与五脏之气相联通、相感应，蓄积、调节诸阴经经气；阳跷脉行于后、布于表，联系六腑之气，主持诸阳经经气。跷脉的这一功能是与任脉、督脉、阴维、阳维、足少阴、足太阳的功能密不可分的，正如张洁古所言：“阳跷在肌肉之上，阳脉所通，连贯六腑，主持诸表。”“阴跷在肌肉之下，阴脉所行，连贯五脏，主持诸里”，故《标幽赋》概括曰：“阳跷阳维并督带，主肩背腰腿在表之病；阴跷阴维任冲脉，去心腹肋肋在里之疑。”

跷脉的病理特点

1. 脑中阴阳失和

《内经》以脑中阴阳失和来解释失眠的病机，如《灵枢·大惑论》曰：“（卫气）留于阳则阳满，阳气满则阳跷盛，不得入于阴则阴气胜，故目不瞑矣。”张洁古认为癫痫的发病也与脑中阴阳失和有关，并据此提出：“癫痫昼发灸阳跷，夜发灸阴跷。”阴阳跷脉入脑而主持脑中阴阳，阴阳跷脉功能失常则必然导致脑中阴阳失和，阴阳相争或阴阳相失而发为“目不瞑”“癫痫”，健忘，多梦，癫狂等过度抑郁或兴奋性疾病。

2. 跷脉受邪

《素问·缪刺论》曰：“邪客于足阳跷之脉，令人目痛从内眦始。”《难经·二十九难》则指出：“阴跷为病，阳缓而阴急，阳跷为病，阴缓而阳急。”说明跷脉感邪，则在其循行所过的部位上反映出来。《脉经·卷十》曰：“阴跷脉急，当以内踝以上急，外踝以上缓。阳跷脉急，当以外踝以上急，内踝以上缓。”又曰：“寸口脉前部左右弹者，阳跷也，动苦腰背痛，又为癫痫，僵仆，羊鸣，恶风，偏枯，痿痹，身体强。”“寸口脉后部左右弹者，阴跷也，动苦癫痫，寒热，皮肤淫痹，又为少腹痛，里急，腰及髀下相连，阴中痛，男子阴疝，女子漏下不止。”概括了阴阳跷脉为病的脉象特点及其临床表现。阳跷脉受邪，多为在腰背、在表之疾，阴跷脉受邪，多为在少腹、在里之疾，二脉并主在脑、在下肢之疾。因此在治疗脑病、肢体拘挛、中风偏瘫、足内外翻、风湿痹痛、转筋麻木、肩背腰腿病以及疝气、崩漏、少腹痛等病症中，应考虑阴阳跷脉的作用。

临床应用

跷脉为病，可考虑运用跷脉属穴进行治疗，阴阳跷脉无单独属穴，与之相通联的穴位均寄附于其他经络之中。据《奇经八脉考》记载，阴跷脉有属穴“凡八穴”：照海（足少阴）、交信（足少阴）、人迎（足阳明）、睛明（足太阳）；阳跷脉有属穴左右“凡二十二穴”：申

脉、仆参、跗阳（足太阳）、臑俞（手太阳）、肩髃、巨骨（手阳明）、地仓、巨髃、承泣（足阳明）、睛明（足太阳）、风池（足少阳）。而在这些腧穴中照海、申脉为阴阳跷脉气所发之处，为跷脉之根，最为紧要，临床虽可单用，更常配合应用。

1. 左右阴阳相配

也即照海与申脉同用。照海，足少阴经气所归，阴跷脉脉气所生，具有补肾壮水，通调阴跷之功；申脉，足太阳膀胱经穴，阳跷脉脉气所生，具有镇静安脑，宣畅阳跷之功。二穴四经、奇正并用，内外相合，阴阳相应，主治脑、头面、下肢之疾，补阴泻阳以治阳跷脉盛而阴跷脉虚，如失眠、癫狂、面痒、面瘫、面肌痉挛、腰背拘急、下肢痿痹、足外翻等证；补阳泻阴以治多眠、癡闭、疝气、崩中漏下、下肢痹痿、中风偏瘫、足内翻等症。

2. 上下主客相配

《针灸大成》说：“主客者，……后溪主，申脉客也；列缺主，照海客也。”这是八脉交会穴两两相配应用的一种方法，亦即以主症之穴为主，相合之穴为客的配穴方法。后溪属手太阳小肠经，通于督脉；申脉为足太阳膀胱经穴，阳跷脉气所生，两穴相配，一上一下，主客相应，二穴四经，同气相求，其经气相互交贯，临床应用，或先针后溪为主穴，后刺申脉为客穴，相须为用而主治头面、颈项、腰背之病；或先针申脉为主穴，后针后溪为客穴，相须为用而主治四肢风邪及痲毒之疾。列缺，手太阴肺经络穴，通于任脉；照海，足少阴经气归聚，阴跷脉气所生，两穴相配，一上一下，金水相生。临床应用，或先针列缺为主穴，后刺照海为客穴，主客相应而治心腹胁肋五脏之疾；或先针照海为主穴，后刺列缺为客穴，主客相应而治脏腑之疾。

3. 主应相配

这也是八法八穴的应用之一。即或取申脉，或取照海为主穴，再取病部之穴以应之。正如《针灸大成》所说：“……先刺主症之穴，随病左右上下所在，取诸应穴……使上下相接，快然无所苦，而后出针。”并列出了具体的应用方法，如：“阴跷脉……照海二穴，肾经……主脏腑病，凡刺后症，必先取照海为主，次取它穴应之”。其后列出了以照海为主穴，应以病部或其附近之穴主治五脏在里之疾的三十三症。“阳跷脉……，申脉二穴，膀胱经，……主四肢风邪及痲毒病。……凡治后症，必先取申脉为主，次取各穴应之”。其后列出了以申脉为主穴，应以它穴而主治的中风九症及四肢、痲毒一十三症。在临床应用，照海为主穴，依病部所在，病之表现，选取阴经之穴以应之；申脉为主穴，选取阳经之穴以应之，临时机变，可针可灸，应用灵活。

Analysis of Indication Principle and Clinical Application of the Confluent Acupoints of the Eight Extra Meridians

Liu Qing-guo Yang Qiao-ling

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In the Preface of (Zhenjingzhinan) Han-qing said: "The confluent acupoints of eight extra-meridians (CAEEM) is the key to acupuncture therapy." Because he highly praised the use of CAEEM and the eight methods, so the later physicians called CAEEM as DOU's Eight Acupoints. They were further elaborated in SIX COLLECTIONS OF ACUPUNCTURE AND MOXIBUSTION (Zhenfangliuji) written by WU Kun, A COMPLETE WORK OF ACUPUNCTURE AND MOXIBUSTION (Zhenjiudaquan) written by XU Feng and GREAT COMPENDIUM OF ACUPUNCTURE AND MOXIBUSTION (Zhenjiuda-cheng) written by YANG Ji-zhou, from which the eight methods of intelligent turtle and the eight methods of flying

were derived. CAEEM refers to eight acupoints, ie Lieque (L 7) , Zhaohai (K 6) , Gongsun (Sp 4), Neiguan (P 6), Shenmai (B 62), Houxi (SI 3) , Zulinqi (G 41), Waiguan (TE 5), through which the eight extra-meridians connect with twelve regular meridians. The indications of CAEEM are very extensive and have a good regularity, and are frequently used in clinical practice. In this article, the author tries to make a preliminary analysis on their action principle and clinical application.

1. The properties of CAEEM

CAEEM pertain to connecting-Luo acupoints, communicating with 18 meridians of the extra and regular ones in all. They converge at both upper and lower parts in head, chest, abdomen in the complicated course of the extra-meridians intersecting with regular meridians. Just owing to the property of extensive communication of CAEEM, it lays a good foundation for their indications and clinical application. With respect to the reason why the heart and liver meridians are not related to CAEEM, in Explanation of the Eight Methods (Bafawaixun) in SIX COLLECTIONS OF ACUPUNCTURE AND MOXIBUSTION, it is recorded: "According to the theory of CAEEM, CAEEM are connected with the eight extra-meridians. But, they do not intersect with large intestine meridian of hand-yangming and heart meridian of hand-Shaoyin in hand and liver meridian of foot-Jueyin in foot. As a matter of fact, they do have some correlation-Lieque is the connecting-Luo acupoint of lung meridian and diverges into large intestine meridian of hand-yangming; the symptoms of pericardium and heart meridian are very similar; the diseases of liver and kidney are treated by same methods, so CAEEM are also connected with all of the twelve regular meridians."

2. The Indication Principle of CAEEM

As for the indications of CAEEM, they were initially recorded in GUIDE TO CLASSICS OF ACUPUNCTURE and then adapted in A COMPLETE WORK OF ACUPUNCTURE AND MOXIBUSTION and GREAT COMPENDIUM OF ACUPUNCTURE AND MOXIBUSTION. According to the records in GUIDE TO CLASSICS OF ACUPUNCTURE, it is analyzed below.

Among the 27 symptoms treated by acupoint Gongsun, 15 symptoms are related to stomach meridian, 7 symptoms to heart meridian, 6 symptoms to spleen meridian, 5 symptoms to large and little intestine meridians respectively, 4 symptoms to pericardium and triple energizer meridians respectively, 2 symptoms to lung meridian and 1 symptom to liver meridian. All of the symptoms are located in anterior parts of the body, such as chest, abdomen, hypochondrium, etc, and most of the symptoms result from disorder of qi, such as pain, distention, etc.

Among the 25 symptoms treated by acupoint Neiguan, 12 symptoms are related to stomach meridian, 6 symptoms are related to stomach meridian, 6 symptoms to liver meridian, 5 symptoms to spleen and pericardium meridians respectively, 4 symptoms to large intestine meridian, 3 symptoms to heart and lung meridians respectively, 2 symptoms to gall bladder meridian and 1 symptom to little intestine meridian. All the symptoms are caused by disorder of qi, and located in the front parts of the body. It is very similar when the symptoms to be treated by the two acupoints were compared. In respect of the involved meridians, Point Gongsun is principally related to stomach, heart, spleen, large and little intestine meridians, whereas Point Neiguan is primarily related to stomach, liver, spleen, and pericardium meridians. Therefore, in SIX COLLECTIONS OF ACUPUNCTURE AND MOXIBUSTION, WU Kun concluded: "Disease of these five meridians, regardless of which is caused by six kinds of natural factor or seven emotions, points Neiguan and Gongsun should be needled on the basis of the eight methods. Bilateral Gongsun are

the regions where the spleen meridian of foot-taiying originates, and converge with Thoroughfare vessel and connect with the stomach meridian of foot-yangming; bilateral Neiguan are the regions from which the pericardium meridian of hand-Jueying starts, and converges with Yinwei vessel. Combined use of these four acupoints, once the qi arrives, the patients will feel very comfortable, and all the diseases due to these five meridians would be eliminated."

Of the 25 symptoms treated by acupoint Zulinqi, 6 symptoms are related to stomach and liver meridians respectively, 5 symptoms to bladder and gall bladder meridians respectively, 4 symptoms to kidney meridian, 2 symptoms to large intestine, pericardium and triple energizer meridians respectively, 1 symptoms to lung, heart, spleen and little intestine meridians respectively. These symptoms are mostly located in head and face, and manifest as pain, swelling, itch and numbness.

Among the 27 symptoms treated by acupoint Waiguan, 7 symptoms are related to stomach meridian, 6 symptoms to kidney meridian, 5 symptoms to liver meridian, 4 symptoms to bladder and triple energizer meridians respectively, 2 symptoms to bladder gall, heart, lung meridians respectively, 1 symptom to heart, large intestine and little intestine meridians respectively. Most of the symptoms are associated with head, face and limbs, and present with pain, numbness and paralysis. In SIX COLLECTIONS OF ACUPUNCTURE AND MOXIBUSTION, WU Kun summarized as: "Disease of these four meridians, regardless of which are caused by six kinds of natural factor or other pathogens, acupoints Waiguan and Linqi should be needled based on the eight methods. Bilateral Linqi are located in the regions where the gall bladder of foot-taiyang originates, and converges with Belt vessel. Bilateral Waiguan are the regions where the pericardium hand-jueyin starts, and meets with Yinwei vessel. Combined use of these four acupoints can harmonize yin and yang, and all the diseases related to these five meridians would be thoroughly got rid of."

Of the 24 symptoms treated by acupoint Houxi, 8 symptoms are related to stomach and liver meridians respectively, 5 symptoms to lung meridian, 4 symptoms to bladder meridian, 3 symptoms to kidney meridian, 2 symptoms to heart, large intestine, and triple energizer meridians respectively, 1 symptom to gall bladder and little intestine meridians respectively. Most symptoms are associated with head, lumber and limbs, and belong to pain, wind-syndromes, and so on.

Among the 26 symptoms treated with acupoints Shenmai, 6 symptoms are involved in stomach and kidney meridian respectively, 5 symptoms in liver and bladder meridians, 4 symptoms in bladder gall meridian and 1 symptoms in lung, large intestine and triple energizer meridians respectively. These symptoms are mainly located in head, face and limbs, and principally manifest as pain, paralysis and spontaneous sweating. In SIX COLLECTIONS OF ACUPUNCTURE AND MOXIBUSTION, WU Kun said: "Disease of these four meridians, regardless of which are caused by wind, cold, summer-heat, dampness, dryness, fire or other pathogenic factors, acupoints Houxi and Shenmai should be needled in accordance with the eight methods. Bilateral Houxi are the spots from which the lung meridian of hand-taiyin originates, and contacts with Governor vessel. Bilateral Shenmai are the regions where the bladder meridian of foot-taiyang starts, and connects with Yangqiao vessel. Combined use of these four acupoints can communicate the upper and lower, and all the diseases due to these four meridians would be removed a way."

Among the 31 symptoms treated by acupoints Lieque, 9 symptoms are related to stomach meridian, 6 symptoms to liver and spleen meridians respectively, 5 symptoms to large intestine

meridian, 3 symptoms to heart, lung, and kidney meridians respectively, 2 symptoms to little intestine meridian, 1 symptom to pericardium, gall bladder and bladder meridians respectively. Most of them are pertaining to abdominal diseases.

Among the 29 symptoms treated with acupoint Zhaohai, 9 symptoms are involved in stomach meridian, 7 symptoms in liver meridian, 6 symptoms in kidney meridian, 4 symptoms in large intestine meridian, 3 symptoms in lung and pericardium meridians respectively, 2 symptoms in bladder meridian, 1 symptom in little intestine meridian. They are chiefly related to throat, stomach, etc. In SIX COLLECTIONS OF ACUPUNCTURE AND MOXIBUSTION, it is recorded: "Disease of these four meridians, regardless of which are caused by exterior pathogenic factors or seven emotions, acupoints Lieque and Zhaohai should be needled in line with the eight methods. Bilateral Lieque are located in the regions where the lung meridian of hand-taiying originates, and converges with Conception vessel. Bilateral Zhaohai are located in the regions from which the kidney meridian of foot-shaoyin starts, and connects with Yinqiao vessel. These four acupoints are used altogether, after the qi arrives, all the diseases of these four meridians could be cured, and qi and blood of the patients may become harmonious."

In his QUESTIONS AND ANSWERS ON ACUPUNCTURE AND MOXIBUSTION (Zhenjiuwendui), WANG Ji summarized the indication principle of CAEEM as: "CAEEM are very effective in treating the disorder of qi" and in the SIX COLLECTIONS OF ACUPUNCTURE AND MOXIBUSTION, WU Kun said: "CAEEM, stimulated by reducing technique, have a significant effect in dealing with the diseases of recent onset, and diseases which are caused by yang pathogens or excess pathogens." It has a similarity between the WANG's opinion and WU's, indicating CAEEM have obvious effect in treating acute pain and functional diseases. From the above-mentioned indications of CAEEM, most of the symptoms are related to stomach and liver meridians, which also show that CAEEM have close relation to qi's activities. The symptoms treated with Linqi, Waiguan, Houxi, Shenmai, mostly belong to superficial syndromes, exterior meridional syndromes, and appear in head, five sense organs, waist, back and limbs, and pain is the most common symptom, while the symptoms treated with Gongsun, Neiguan, Zhaohai, Lieque, are mostly pertaining to visceral syndromes and interior syndromes, and mainly appear in throat, chest, viscera. It is just as ODE TO EXPLANATION OF MYSTERIES (Biaoyoufu) concluded: "Yangqiao Yangwei, Governor and Belt vessels can be selected to treat the superficial disease over the shoulder, waist; whereas Yinqiao, Yinwei; Conception and Thoroughfare vessels can be selected to treat disorders of heart and hypochondrium."

3. Clinical Application of CAEEM

From the indications of CAEEM, the border of their related meridians is not very clear. CAEEM are connected with eight extra-meridians through the meridians in which they are located, thus the indication properties of CAEEM can be explained by physiologic and pathologic function of the eight extra-meridians, consequently the indications of CAEEM are extended very much. In clinical application, CAEEM can be selected on the basis of their own indications, or combination of left and right, or co-operation of upper and lower, but in clinic, paired use of CAEEM is more dominant.

(1) Combination of the Upper and the Lower

According to the principle of acupoints communicating with the meridians with a same crossing point, which is formed in A COMPLETE WORK OF ACUPUNCTURE AND MOXIBUSTION and GREAT COMPENDIUM OF ACUPUNCTURE AND MOXIBUSTION

based on the indication of CAEM described by DOU Han-qing. The principle is that Gongsun pairs with Neiguan, Linqi with Waiguan, Shenmai with Houxi, Lieque with Zhaohai. The acupoint for main symptoms is selected as principal, and the paired one is selected as secondary.

Combination of Gongsun and Neiguan: Acupoint Gongsun has the functions of regulating stomach and spleen, freeing the circulation of the qi, calming the ascending flow of qi and lowering the adverse flow of qi. In addition, pericardium is the guard of the heart, and is the mother of the blood, and its connecting-Luo acupoint diverges into triple energizer. Triple energizer is the confluent place of qi, and for the disorder of qi. Both Thoroughfare vessel and Yinwei have branches in chest. So, co-operated use of the two acupoints is characterized by correspondence of upper and lower, mutual generation of fire and earth, simultaneous use of extra and regular meridians treatment of both of yin and yang, and regulation of qi and blood as well as co-operation of interior and exterior. They have the functions to free the flow of the qi. To promote the circulation of blood, and to balance the whole body. In the treatment of heart diseases, Gongsun is needled first as the principal acupoint and then Neiguan is needled as the secondary one. In the treatment of diseases of spleen, stomach and other visceral diseases, Neiguan is first needled as the principal acupoints and then Gongsun is needled as the secondary one.

Combination of Lieque and Zhaohai: Acupoint Zhaohai has the functions of nourishing kidney and regulating the qi's function of Yinjiao vessel. Lieque is connecting-Luo acupoint of lung meridian of hand-taiyin, and diverges into large intestine meridian of hand-yangming and converges with conception vessel. Lung meridian, Conception and Yinjiao vessel are all met at throat, pulmonary system and chest. Co-operated use of these two acupoints is characterized by mutual generation of mental and water, combination of extra and regular meridians, and has the functions to tonify kidney to benefit qi. In clinical practice, in the treatment of visceral diseases, Zhaohai is needled first as the principal acupoint and Lieque is needled secondly as the secondary one. For the treatment of disease of five-zang (ie heart, liver, lung, spleen, kidney) and diseases of stomach, etc, Lieque is first needled as the principal acupoint and Zhaohai is needled secondly as the secondary one.

Combination of Houxi and Shenmai: Acupoint Houxi, communicating with governor vessel, has the functions of promoting the flow of qi of taiyang meridians, freeing the governor vessel to antispasm. Shenmai is located in the regions where the qi of Yangqiao meridian starts, and has the functions to activate the flow of qi of taiyang meridians, and to regulate the flow of qi of Yangqiao vessel. Combination of the two acupoints and four meridians is characterized by correspondence of upper and lower, communication of the qi of the same name meridian of hands and feet and coherence of the channel-qi. In clinical application, for the treatment of diseases in head, face, and nuchal regions, Houxi is needled first as the principal acupoint and then Lieque is needled as the secondary one. Shenmai is needled first as principal acupoint, and Linqi is needled as secondary one in treating the diseases in limbs due to pathogenic wind, toxic heat, moreover, Stream-Shu acupoints are used for heaviness and pain in joints, so they are very effective in stopping pain.

Combination of Waiguan and Linqi: Waiguan, connecting with Yangwei vessel serves to maintain and communicate all the yang meridians of the whole body. Has the functions of clearing away the heat to relieve exterior syndrome. Linqi, connecting with belt vessel, has the functions of calming the endopathogenic wind to free the collaterals, resolving phlegm and relieving flatulence. Combination of the two acupoints, characterized by correspondence of the channel-qi of the same