

李定忠 李秀章 编著

中医经络探秘

(上)

经络传导与内病外治机理的研究及应用



解放军出版社

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作者简介

李定忠

73岁，名中医世家第七代传人，载入辽宁省志。1955年毕业于北京大学医学院。中西医结合主任医师，教授。47年来，先后在中国医学科学院皮肤病研究所、北京市第六医院等单位，从事中西医结合临床工作和经络研究工作。“七五”期间任经络研究项目国家攻关课题北京组长；“八五”期间任国家攀登计划课题经穴磁特性研究课题组长。一直按照认识规律进行科研，即从典型到一般；从感性到理性；从现象到本质。并且重视从实践到认识，找出联系和规律，再指导实践，提高疗效，探索本质。在经络研究中取得12项重要发现，其中，循经皮肤病的发现为我国经络研究争得了领先地位。在经络感传研究中，发现许多特征和规律，如经络环的发现、双向调整规律的发现、电磁波循低阻通道有序振荡、脑磁频谱反相关共振及fMRI证实经络皮部的存在及作用等的发现，为经络内病外治机理和经络实质的研究开创一条通路。在理论联系实际中和李秀章一起创建了高效速效治疗方法（经络环皮部挑治法），为人类的医疗、保健、美容事业做出重要贡献。特别是以皮肤病为主的多科疑难病症，取得了显著疗效，甚至对某些先天病、遗传病的治疗也有重要作用。



李秀章

73岁，自幼从师学习中医。1961年毕业于天津医科大学医疗系。1983年毕业于北京联合大学中医药学院西医学习中医大专班。几十年来，一直在北京市第六医院等单位，从事中西医结合临床工作。广泛掌握和应用于内、外、妇、皮各科疾病的治疗。并配合李定忠教授进行科研及学术活动。“七五”为国家攻关课题组成员，协助李定忠教授完成10余项科研成果的总结分析，在循经皮肤病与中医理论的结合方面，特别是对“肾开窍于二阴，恐伤肾，心肾相交及肝肾同源”等理论的证实，通过经络“内属于脏腑、外络于肢节”认识“内病外治”的机理方面，有重要建树。并作为国家“七五”攻关课题验收报告的重要内容、接受国家验收，备案。而且应用经络环皮部挑治法对心脏病（包括心房纤颤）、哮喘、胃肠功能紊乱及妇女更年期症候群等，均有显著疗效，为此疗法的创建提供大量的实践依据。作者与李定忠教授共同完成在日本出版《经络现象I、II》的编写工作和《中医经络探秘》上、下册的编写工作。



INTRODUCTION (1)

The book is the collections of the author in his 47 years experiences in clinic and experimental studies. It summarized the traditional Chinese medicine and modern studies home and abroad. In the book, from geist to experiment and again to logos gradually, the rule was found and the method was created to direct the clinic by which the curative effect was enhanced. The essence of the meridians was discussed based on the qualification experimentally and theoretically time and time. The first part is clinical studies. From the phenomenon of the propagated sensation along channels(meridians)(PSC) The physiological PSC, pathological PSC and automatic PSC were observed. Many rules of the PSC were obtained. The phenomena of one point invoked PSC in several meridians and many points invoked PSC on one meridian were found which showed hologram feature. The author observed the appearance, changing and difference of the physiological meridian circle and the pathological meridian circle and summarized the relation which control each other. Based on these, a special and very effective therapy was created. The second part is experimental studies. Based on PSC, measured results on sound, impedance, heat, magnetic, nuclear and ions along meridians were introduced. Ordered oscillation along meridians was the common characteristics. The main study of the author is observing the changes of magnetic on acupoints and during PSC measured by low temperature SQUID. The author also observed the spectrum of the magnetic signal on acupoints, brain and organs measured by high temperature SQUID and calculated by computer and observed the neural exiting position and processing in brain during PSC invoked by acupuncture using fMRI. The existence of the meridians and skin meridians were then confirmed because of the same functional changes in brain by acupuncturing deeply and by prick. In this part, the experimental base was provided for PSC, meridian circle and the mechanism of external treatment for internal disease which is very effective. The third part: summary and discussion. From the dermatosis along meridians etc. which is called visible meridian phenomenon, particularly the congenital dermatosis along meridians, the objective existence of the meridians was realized. The congenital factors determine the meridians which have relatively stable and located pathway on human body. It is also realized that the fourteen meridians were the main channels of the meridians and the meridian circle is the basic structure of the meridians. The author pointed out that PSC was caused by ordered oscillation of electromagnetic wave along the low resistance channels. The essence of the meridians may be a kind of channel in which chemical and electromagnetic oscillation occur alternatively. Ca^{2+} and other ions are important factors for PSC. The material system such as cells and molecules is the bases of the meridians. The central part of PSC may be the brain. It is well proved that human body is a complicated and huge opening system. In the meridian study, cells and other material structure was involved yet the immaterial structure such as molecules and ions is also important. The signal and energy system which is easy to be ignored may be the main part of the meridians. The skin part of the meridians and acupoints, namely the skin meridian, may control the balance in the internal circumstance and between the internal and external environment(combination between man and nature). Carrying on the past and opening a way for the future, the author developed and created new a thought followed the traditional thought and based on modern scientific studies. In the book theory was studied while new practices were also carried out after holding the rules. There are the studies on theory and rules in this book. In the second book, the application of such theory and rules in clinical medicine, health keeping and hairing. The experiences were also introduced in the book.

There are rich studies and discusses about PSC in the book which is very useful in meridian study, teaching and clinics in traditional Chinese medicine. The author hopes the readers enjoy the book and provide constructive comments.

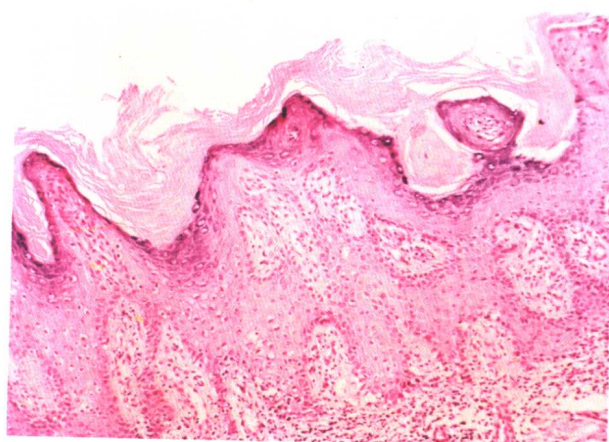
1954 年首次发现可见经络现象



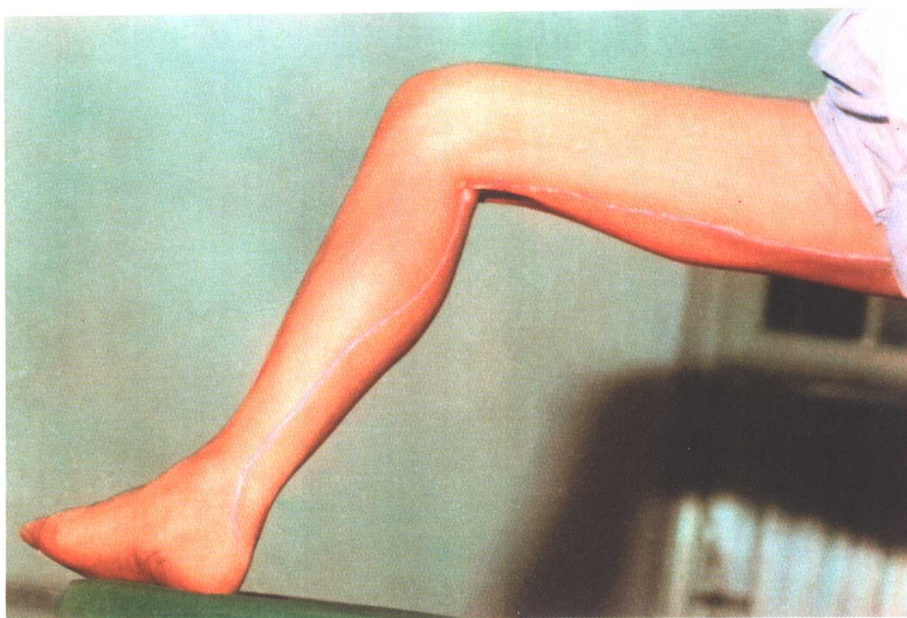
彩图 1-1-1 H.心包经炎性线状表皮痣(先天)
(起于胸中,沿心包经,达中指端)



彩图 1-2-1 A.肺经疣状痣(先天)
(从中府至鱼际)

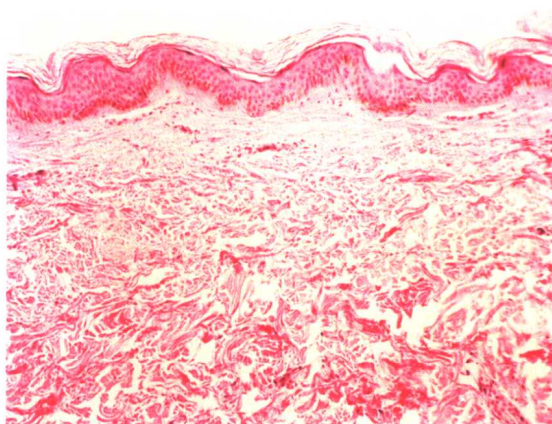


彩图 1-2-2 疣状痣病理组织变化
表皮过度角化,棘层不规则肥厚,皮突呈乳头瘤状增生,基底层色素增加,真皮层伴有炎症细胞浸润。



彩图 1-2-3 P. 肾经贫血痣(先天)
(从永泉至会阴穴)

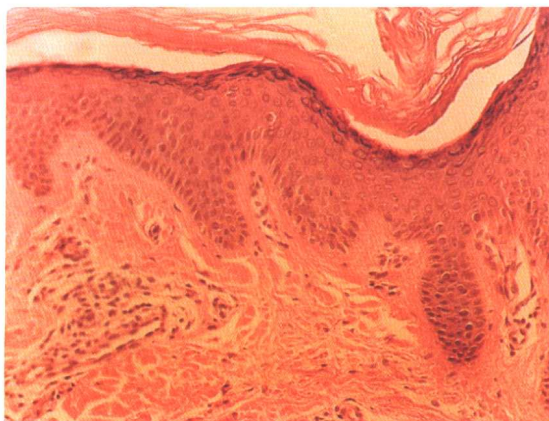
彩图 1-2-5 Y. 右膀胱经神经性皮炎(后天)
(从承扶上 5cm 至昆仑穴)

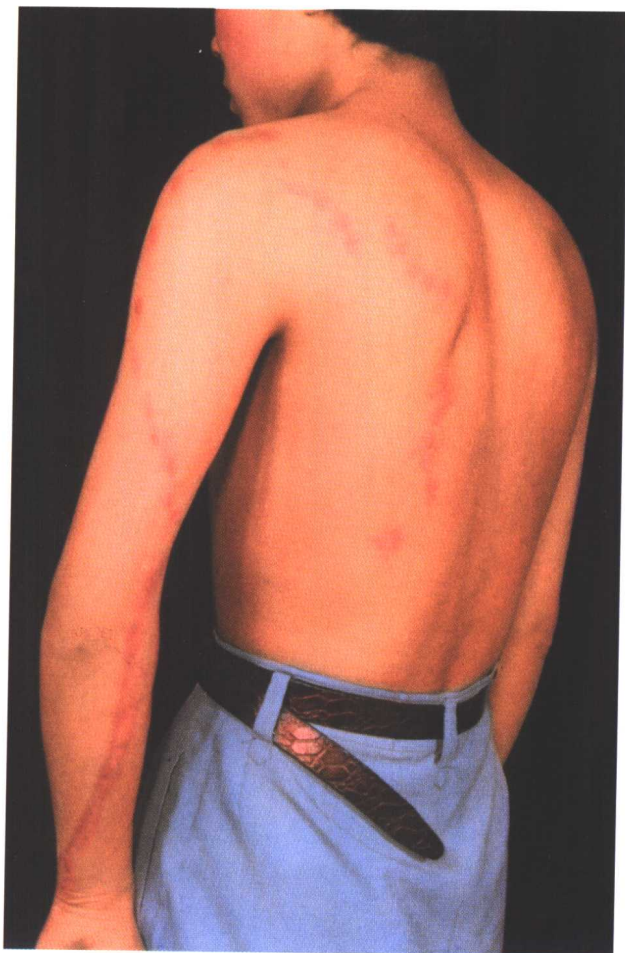


彩图 1-2-4 贫血痣病理变化
表皮变薄，皮突平坦，真皮微血管减少。

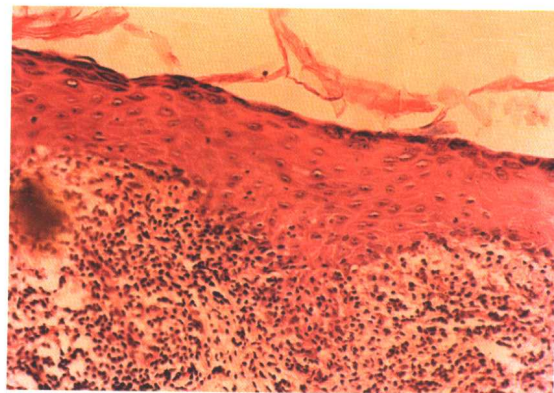
彩图 1-2-6 神经性皮炎病理组织变化

角化过度，棘层肥厚，皮突延长，真皮乳头延伸增宽，浅层毛细血管扩张，有炎性细胞浸润。



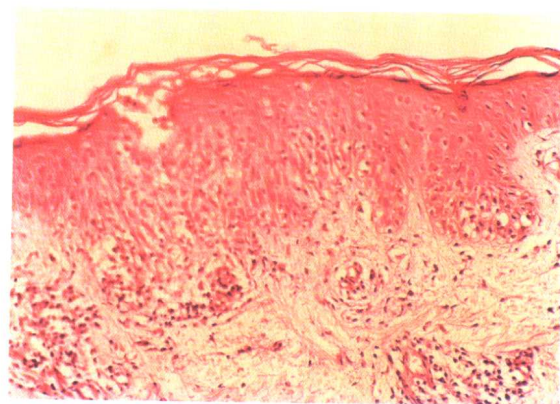


彩图 1-2-7 J. 小肠经扁平苔癣(后天)
(从神门, 经小海, 至肩髃)



彩图 1-2-8 扁平苔癣病理组织变化

表皮角化过度, 颗粒层楔形增厚, 颗粒粗大, 基底细胞液化变性, 真皮浅层有密集的淋巴细胞呈带状浸润, 真皮与表皮界限模糊。



彩图 1-2-10 线状苔癣病理组织变化

表皮角化过度及角化不全, 棘层不规则肥厚, 细胞内及细胞间水肿, 形成小疱, 真皮乳头上部及小血管周围有淋巴细胞、组织细胞浸润。基底层被浸润细胞所破坏。



彩图 1-2-9 L. 肾经线状苔癣(后天)
(起于太溪穴, 上腹达四满穴)

十四经循经皮肤病与古图对比



彩图1-3-1 手太阴肺经, 仿元代古图。



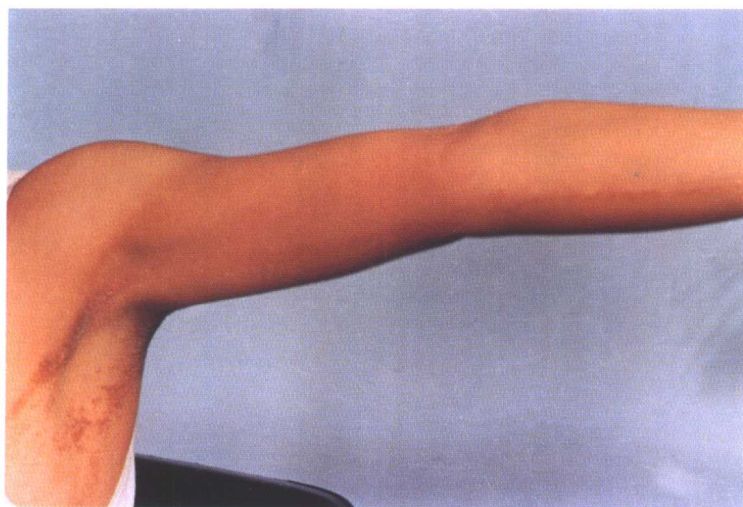
彩图1-3-2 G. 右肺经神经性皮炎(后天)。



彩图1-3-3 L. 右心包经疣状痣(先天)



彩图1-3-4 手厥阴心包经, 仿元代古图。



彩图 1-3-5 S. 左心经疣状痣(先天)



彩图 1-3-6 手少阴心经, 仿元代古图。



彩图 1-3-7 D. 左大肠经汗孔角化症(先天)



彩图 1-3-8 手阳明大肠经, 仿元代古图。



彩图 1-3-9 M. 右三焦经银屑病(后天)



手少陽三焦經

仿元版古圖

彩图 1-3-10 手少阳三焦经，仿元代古图。



彩图 1-3-11 Y. 右小肠经湿疹(后天)



手太陽小腸經

仿元版古圖

彩图 1-3-12 手太阳小肠经，仿元代古图。



彩图 1-3-13 C. 右脾经神经性皮炎(后天)



彩图 1-3-14 足太阴脾经，仿元代古图。



彩图 1-3-15 D. 左肝经扁平苔癣(后天)



彩图 1-3-16 足厥阴肝经，仿元代古图。



彩图 1-3-17 S. 左肾经硬皮病(后天)



彩图 1-3-18 足少阴肾经, 仿元代古图。



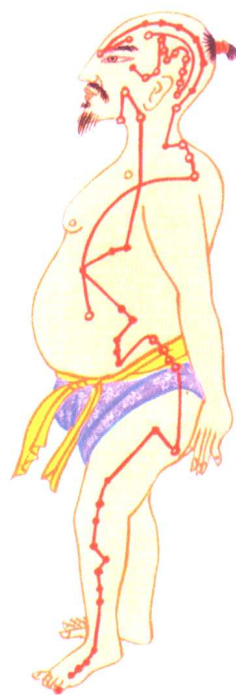
彩图 1-3-19 G. 右胃经湿疹(后天)



彩图 1-3-20 足阳明胃经, 仿元代古图。



彩图 1-3-21 L. 右胆经皮下脂肪萎缩(后天)



足少阳胆经

仿元代古图

彩图 1-3-22 足少阳胆经，仿元代古图。



彩图 1-3-23 Z. 右膀胱经神经性皮炎(后天)



足太阳膀胱经

仿元代古图

彩图 1-3-24 足太阳膀胱经，仿元代古图。



彩图 1-3-25 F. 任脉色素痣(先天)



彩图 1-3-26 奇经八脉之任脉, 仿元代古图。



彩图 1-3-27 L. 督脉疣状痣(先天)



彩图 1-3-28 奇经八脉之督脉, 仿元代古图。

可见经络现象与中医理论的联系

一、肾开窍于二阴

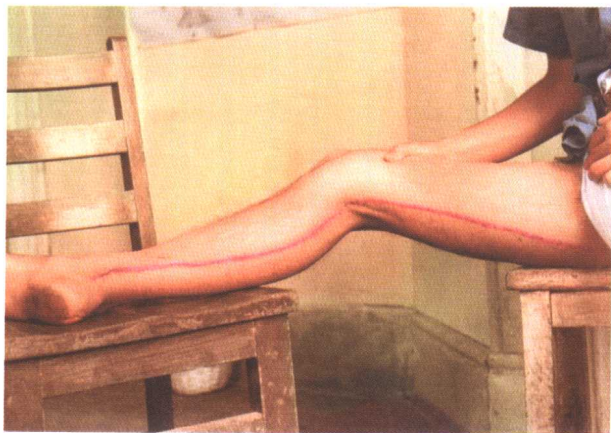


彩图 1-4-1 A. 男，肾经症状
通过肛周及阴茎、包皮(先天)。



彩图 1-4-2 F. 女，左肾经软痣，通过大阴唇，上腹(先天)。

二、恐伤肾



彩图 1-4-3 W. 强烈精神刺激，诱发
肾经神经性皮炎(后天)。

三、表里经的联系



彩图 1-4-4 C. 肾经、膀胱经并发症状(先天)。

(一)表里经的联系



彩图1-4-5、6 H. 大肠经、肺经皮脂腺痣（先天）。



彩图1-4-7 H.右心经皮脂腺痣(先天)

(二)同名经交叉对应联系

彩图1-4-8 H.左肾经皮脂腺痣
(先天)

