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Traditional Chinese Medical Criteria About the Use of Yongquan as a Life Support Maneuver

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1. Introduction

Although I consider the beginning of my formal Dim Mak education since 1993—when Master Erle Montaigue spread out this theory in the western world (“Dim Mak – Death Point Striking”), my first contact with K-1 Yongquan was in 1976, when I had the opportunity to explore some “almost secret” scripts about this subject. I waited until 1987, during my surgical residency, to apply this knowledge in my first case—a cardiac arrest derived from a pulseless activity with no response of the life support therapy, but with great success using the K-1 maneuver. Since then, my researches are continuous about the acupuncture-point Yongquan manipulation results after both basic and advanced Cardio-Pulmonar Resuscitation (CPR) protocol failure. It surprising results guide me to call this phenomenon the “Lazarus Effect”. It’s necessary to describe briefly the principles that give sense to the K-1 Yongquan maneuver, in order to integrate them to western medical concepts.

2. Jing: Our energetic inheritance

The ancestral original energy represents the value of our energetic inheritance, or Jing. The Innate Jing, received from our parents is hidden in the Kidneys (Yin) and in the Mingmen (Yang) to generate the initial Qi for our vital processes (Jing Yue Quan Shu – Zhang Jie Bin). The Acquired Jing gives the substrate of the anterior one. It is contained into the five zhang and the six fu, nurturing our vital substance. The Yin or Nurture Qi enters in our energy system from the Earth through K-1 Yongquan; and it will be selected in its “pure form” by the Spleen before reaching the Lungs and Heart. In that way, the last organs will be able to elaborate Zheng Qi or Central (thoracic) energy for its vital priority of his active cardio-respiratory function.

3. Kidney and traditional Chinese medicine

In acupuncture, the Kidneys (Shen) represents Water, so that is the Yin organ “par excellence”. Their main function, similar to the allopathic medical knowledge, is “to control the body Water distribution” (Su Wen, chap. 34). In the same way, it will be responsible of filtering wastes, eliminate toxins, the water intake excess and the mineral salts incorporated by diet, in order to regulate the blood Ph.
For the Chinese Medicine, the Kidney develops the following functions:

1. “to store the Jing and dominate reproduction, growth and development”
   This includes the mastering of derived functions as birth, growing, development and reproduction, for Kidneys are our natural ancestral energy depot - the purified and condensed modality of Qi (Jing) - that will aid us to get each of the human development stages (Su Wen, chap.1).

2. “to produce the bone marrow” (Su Wen, chap.5).
   This statement involves the following properties:
   - The control of the bones and their marrow (Su Wen, chap.23).
   - To elaborate the blood -Xue-(were the Chinese intuitive about erythropoietin’s existence?).
   - To nurture the brain (for Chinese people, the brain represents the “Sea of Marrow”).

We can see that the “Medullae concept” in TCM results very much transcendental than their western significance. Not only involves the bone marrow, but the matrix of the fundamental components of the Central Nervous System.

3. “to dominate Water” (Su Wen, chap.34)
   This function has been analyzed before in this chapter. Is obvious to understand this meaning in the regulation of the metabolism of water and corporal fluids (“Jin ye”).

4. “to control the reception of Qi”
   In the sense that Shen is the depot of the Ancestral energy or Yuan Qi (Ling Shu, chap.5), Kidneys are capable to captivate the Qi for recycle it energetically, taking influence over the following zhang:
   - Over the Spleen and its “couple in Earth” Stomach, allowing the correct digestives procedures
   - Over the Heart, getting the equilibrium in the Water. Fire harmony (Kan Li)
   - Over the Lungs, helping to gather and descend the Qi during inspiration
   - Over the Liver, ensuring a soft and harmonious Qi flux all around the body
   - Over the Triple Heater, promoting the “Water transformation” through its energetic metabolism

5. “It manifests in the hair”.
   As indicated in Su Wen (chap.5), hair’s characteristics show the internal sufficiency of the Qi of Shen.

6. “to open the ears” (Ling Shu, chap.17).
   It was written in this chapter “The Qi of the Kidneys go to the ears; when the Kidneys are in harmony, the ears can hear the Five Sounds”... thus referring not only to the five notes from the pentathonic Chinese music, but the effect of the Kidneys (Shen) over the other organs or zhang.

We must remember the hearing disorders as a consequence of treating patients with nephrotoxic drug (ej. antibiotics) to understand how advanced was the Chinese medical wisdom.

Among this, and searching for motives of the spectacular reaction through Yongquan in resuscitation, again in Ling Shu (chap. 10) appears the link between Kidney and Heart(by its internal vessel) and with the Lungs (by a secondary vessel), that justifying this powerful influence.
4. Specific analysis about the K-1 Yongquan acupuncture point

Its name means “Gushing spring” or “Bubbling well”. The ancient book I-Ching instructs us about the Water (“Kan”) trigram: “…its correspondence is to Water; is the Water in movement, the spring that falls into deepness…”

4.1 K1-Resuscitation maneuver: Chinese fundamentals

Located in the sole of the foot, in a depression where the sole makes its plantar flexion. Tracing a line from the base of the second toe up to the heel, and dividing it in three equal parts, the point is found at the junction between the anterior and the middle third. Anatomically speaking, Yongquan’s precise ubication is between the second and third metatarsal bones, at the level of the plantar fascia. Medial to it are the longus and brevis flexor digitorum pedis tendons and the second lumbricalis pedis muscles. In its deepest position, the point lay in the interossei plantaris muscles. It is innervated by the second common plantar digital nerve, and irrigated by the lateral plantar and the anterior tibial arteries anastomose in the plantar arch.

In the major acupuncture classical texts, K-1 Yongquan is considered the first and Jing (Tsing)-well point of the Kidney meridian. But through the Ling Shu analysis (chap.5), K-1 is also hierarched as the “root” point of the Shao Yin. This energetical level, formed by the Kidneys and the Heart, is the most profound among all others, giving us a special reason why K-1 Yongquan can act as an effective cardiac pacemaker. Moreover, Yongquan is the main place for the ascending Yin Qi from the Earth into our body. Therefore, this kind of energy will nurture the zhang, especially those placed in the most Yang part of the torso, in order to interact and compensate the Heavenly energy, essential for organs with a non-interruptable function to maintain our life, like the heart and the lungs. It can be read in Ling Shu, chap 9: “Yin rules the organs, while Yang rules the viscus. Yin absorbs the Heavenly energy, while Yang absorbs the energy from the Five Organs”. Thus, the Celestial Yang Qi provides them with continuous motility in the Upper Jiao of our body, for a perfect vital equilibrium.

4.2 Main applications for K-1 Yongquan in TCM

Traditional Chinese Medicine “officially” recognizes the following as the main applications of K-1 Yongquan:

- Respiratory diseases
- O.R.L diseases
- Digestive diseases
- Urinary conditions
- Genital conditions
- Psychiatric conditions
- Cardiovascular diseases
- Neurological conditions

- Nasal obstruction - Epistaxis (nosebleed).
- Dry tongue - Amigdalitis - Swollen throat – Odynophagia – Vertigo
- Abdominal colics -Vomits – Diarrhea – Difficult defecation
- Difficult urination – Dysuria
- Functional sterility
- Insomnia – Psychosis
- Arterial hypertension – Syncope
- Blurred vision – Vertex headaches – Peripheral neuropathy – Infantile convulsions – Epilepsy – Lower limbs paralysis (Zheng Li)-Stroke – Loss of consciousness (Coma)
Among this indications, in relative recent times (2006), Chinese doctors added a case of subdural hematoma. Since 1987, my specific and new use is as a rescue point against both basic and advanced CPR failure. Currently, a new paper has been sent to the World Journal of Critical Care Medicine in order to present a complete protocollization about K-1 uses during life-support maneuvers.

5. Bioenergetic survival axis

5.1 Valorative comparison between Oriental and Occidental axioms
In “Impending Death situation” patients, both Oriental and Western Medicines explain some biological reactions that make organs and viscus to take a peculiar concatenation that could be followed by a logical sequence. In this manner, we can understand this mutual cooperation as a result of K-1 stimulation in a dynamic way.

5.2 A common embryological origin
It is well known in Occident that both the skin and the Central nervous System recognize a common embryological origin. In the beginning of the 3th week, a trilaminar embrion enhance its cranial extreme, and an axial depression appears in its ectoderm. This fissure is the Neural fold, a structure that few days later will make the Neural tube, and the first draught of raquis. Over this, alternative medicines found arguments that support their action vehicle by the skin. This represents, in current neurological physiology, the visceral-cutaneous reflex.

5.3 Survival axis components
Among the Kidneys, there are another organs to be integrated under the structure of what is presented as the “Survival Axis”.

6. Suprarenal glands
Not only an anatomical relationship – for there are positioned over- entail them with the Kidneys, but also represent the Yang function of the mentioned channels (remember that Kidneys themselves maintain the Yin part of this balance). In the mid 20th century, german investigator Hans Seyle described the “Stress reaction”, while in North America, Cannon mentioned it as the “Fright, fight or flight” behaviour. Both were clearly coincident about the suprarenal response to an emergency state, producing glucocorticoids (the main one in primates is cortisol), mineralocorticoids (aldosteron) and androgens. The final release of catecholamines (L-dopa, ephynefrine, norephynefrine) will prepare our body to stress. All the last derive from phenylalanine’s molecule; so that it injection can enhance our alarm reaction. This hypothesis is another evidence of the “Mother and son” rule from the Five Element’s theory in TCM.
7. Brain

Above all emotions, FEAR is the natural response against any situation that put life into risk (is the emblematic emotion of the Water element). The sensorial perceptions are interpreted as a menace in the limbic system. From this site of the temporal lobe, signals will run down from the hypothalamus to hypophysis to stimulate suprarenal glands, preparing us to face DANGER.

Among all the cutaneous reflexes, the Babinski one is the best known and of utmost importance, because this plantar stimulation after the age of 2, can diagnose a pyramidal lesion with a patognomonic hallux extension –casualty scratching near the K-1 Yongquan!.

This evidence even more the axiom “Kidney masters the Sea of Marrow”.

Interaction of the Water Element (Tai Yang Level)

8. Heart

Chinese related it with the Kidney by internal passways. Moreover, TCM considered this two organs conform the most profound energetic level in a human being: The Shao Yin.

Heart could be conceived in a Yin and a Yang phase: the “right heart” includes the right auricule and ventricle; same consideration can be made with the left side.

The right side acts as an “admission pump” the blood (Xue) follows a centripetal route towards the heart, so it can be understood with a Yin nature.

The left auricule and ventricle transport oxygenated blood to the body, reaching them in a centrifugal travel impulsed by the systolic ejection. So this “propulsive part” of the Heart behaves as the Yang side.

In the right auricule, Keith & Flack’s sinoauricular node normally functions as our cardiac pacemaker. Because its same Yin polarity line of Kidney –and connected by profound collaterals-, it could be very influenced by it.

9. Kidneys and the Ancestral Energy

For the Chinese, they are the “Ancestral Energy Depot”, and they also considered it as the “Prenatal Emperor” for their activity during pregnancy (perhaps they already knew that Kidneys are directly involved in the amniotic fluid production).

During the 3th week –in the vitelin sack, very near from the alantoid process, a group of haploid cells travel through the inguinal stretch to testicles (or to ovaries) where will rest the chromosomic potential for our species perpetuation.

This essential energy, or Yuan is a kind to be convoked into emergency states, so that stimulating the route of our “Survival Axis”.

In Traditional Chinese Medicine (TCM), it is generally accepted that, if the principal property from the Curious Vessels is to conduct the Yuan or ancestral energy into themselves, the reason is that all of this Particular Meridians have their origin in the Kidneys (Shen).

In chapter 9, Ling Shu tells us: “Curious Vessels as Chong Mai and Ren Mai are connected to the Chao (Shao) Yin level”. So through the Chong Mai –the “Mother of the Twelve Meridians” – it can be understood in what way Kidney influences over the other body channels.

More specifically talking, those Curious Vessels of Yin nature (Yin Wei – Yin Qiao –Chong Mai) recognize their initial point in K-1 Yongquan, while the rest of them endowed with
Yang polarity (Yang Qiao – Yang Wei – Dai Mai) are born in the final point of the Yang descendent (centrifugal) channels in the inferior limbs. If you pay attention to the names of this points – ex.Gb 44: Zu Qiao Yin (“Passage to the Yin”); or B 67: Zhi Yin (“That who meets the Yin”), make us evident how close are they to contact the major Yin source ever known _the terrestrial energy_ and their main entrance: the K-1 acupuncture point.

Yuan Considerations.

10. The Shao Yin level

The Shao Yin commands the vital functions, although the brain’s energy had been impaired. Up to the 60’s, cardiac activity’s suspension was evident by a fail in both breathing and pulse perception. Only this allowed the doctor to declare a clinical death. With the development of the organ –transplantation therapy, death was not more the absence of vital signs, but a non-reactive EEG. So with the brain activity in suspension, we are able to define a legally death patient, turning it into a “living donor”.

In the Shao Yin level resides the last quantum of energy before life abandon us. For its connection with Earth – the most powerful Yin source available, K-1 Yongquan - the “root” point of the Shao Yin that enables the Terrestrial energy to rush up towards the cranial Yang pole – deserves the possibility of rescuing us with a simple maneuver, pressing the most dark and retired place of the body: in the sole of the foot!

11. Results

Since 1987, of a current statistic of 44 cases, 39 patients were admitted in hospital, while 5 external cases in “impending death situation” received life-support attention with failure of both basic and advanced CPR protocol.

The next table summarizes the demography and outcome of this people assisted with the “Lazarus Effect”.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Cases</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stroke</td>
<td>7</td>
<td>1 death</td>
</tr>
<tr>
<td>Severe hypertension</td>
<td>8</td>
<td>no death</td>
</tr>
<tr>
<td>Electrocution</td>
<td>1</td>
<td>1 death</td>
</tr>
<tr>
<td>Chest crush</td>
<td>3</td>
<td>1 death</td>
</tr>
<tr>
<td>Chest trauma with skull and bilateral femur</td>
<td>1</td>
<td>1 death</td>
</tr>
<tr>
<td>fractures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Post-operative shock</td>
<td>4</td>
<td>1 death</td>
</tr>
<tr>
<td>Intraoperative heart stoppage</td>
<td>6</td>
<td>1 death</td>
</tr>
<tr>
<td>Pulseless activity</td>
<td>3</td>
<td>1 death</td>
</tr>
<tr>
<td>Ventricular fibrillation</td>
<td>5</td>
<td>1 death</td>
</tr>
<tr>
<td>Gas embolism</td>
<td>1</td>
<td>no death</td>
</tr>
<tr>
<td>Renal failure post-sepsis</td>
<td>2</td>
<td>1 death</td>
</tr>
<tr>
<td>Anaphylactic shock (post oncology drugs)</td>
<td>3</td>
<td>no death</td>
</tr>
</tbody>
</table>
12. Conclusions

Comparison between my first 30 patients against the best results of Emergency Services and Rescue Teams (around 19% survival in CPR), justified its publication in the Resuscitation Journal (j.resus. 4183. JAN-2010; DOI information: 10.1016).

In October, 2010 I was invited to participate as speaker in the 8th International Congress of Drug Development, Science and Technology in the Convention Center of Beijing. There I exposed about the theoretical effect of phenylalanine injection over K-1 Yongquan, based in its conversion into catecholamines and its action over the glomic micro-structure of the acupuncture point (Dr. Sergio Gutierrez Morales, Canarias). Hypothetically speaking, this allows the cardiac arrest victims to “respond” more effectively to the Yongquan maneuver, thus improving to higher survival rates.

Actuarial statistics show a mortality percentage in heart stoppage in aprox. 1.5/1000 healthy individuals. Translating this proportion to the current world population, nearly 8,000,000 deaths occur per year for this cause, a very much lethal situation that any epidemic or pandemic danger actually known. From them, only a limited 19% -it means, 1,520,000 persons – can be rescued.

The K-1 Yongquan resuscitation maneuver could raise up this rate to, at least, 38%. This signifies that more than 3,500,000 people could be potentially saved each year -as was informed in FILASMA Congress in Sevilla, in November 2010, where Dr. Enrique Ruffa summed another new 3 cases to the Yongquan resuscitation statistics. This number is comparable with the actual population of our neighbour country, Uruguay -aprox. 4,000,000 people.

Once the World Resuscitation Committee accepts this therapeutic maneuver, this whole theory will open the possibility of converting cardiac arrests victims into responders, allowing the K-1 Yongquan maneuver inclusion in the life-support protocols, upgrading the survival rates even much more.

13. References


Inchauspe, A.: "Phenylalanine injection over K-1 Yongquan: a theoretical way of upgrading survival rates in CPR". Speaker of the 8th IDDST Congress. Beijing, China. October 23-26th, 2010


During the recent years, traditional Chinese medicine (TCM) has attracted the attention of researchers all over the world. It is looked upon not only as a bright pearl, but also a treasure house of ancient Chinese culture. Nowadays, TCM has become a subject area with high potential and the possibility for original innovation. This book titled Recent Advances in Theories and Practice of Chinese Medicine provides an authoritative and cutting-edge insight into TCM research, including its basic theories, diagnostic approach, current clinical applications, latest advances, and more. It discusses many often neglected important issues, such as the theory of TCM property, and how to carry out TCM research in the direction of TCM property theory using modern scientific technology. The authors of this book comprise an international group of recognized researchers who possess abundant clinical knowledge and research background due to their years of practicing TCM. Hopefully, this book will help our readers gain a deeper understanding of the unique characteristics of Chinese medicine.

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