

FIVE DRAGONS
ACUPUNCTURE COLLEGE
CORRESPONDENCE COURSE



LESSON 17
OF
31 LESSONS

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Acupuncture Correspondence Course in 31 Lessons
For Educational and Teaching Purposes.

Recommended books to simplify your research are as follows

Essentials of Chinese Acupuncture
Gray's Anatomy
The Merck Manual
Taber's Cyclopedic Medical Dictionary

The people of the entire English-speaking world owe a debt of gratitude
to the acupuncturists and medical researchers
who have made possible this correspondence course. Thanks go to:

Dr. Nguyen Van Nghi,
Charles H. McWilliams,
Dale E. Brown,
Gregory Delaney

Full acknowledgements are found in Lesson 31

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This Lesson on THE LIVER MERIDIAN consists of all information given in this section of the Study Guide, all material covered by herewith specified page references to the textbook as supplied, and the enclosed O.I.C.S. Indication Sheets for this meridian.

(1) Study Section 1. regarding the Liver Channel on pages 53 to the top of 55 of the textbook, and Fig. 19 on un-numbered page 54 of the text. Underscore "it curves around the external genitalia" in the seventh line from the bottom on page 53. On the last line of page 53, underscore the words "meeting the Du Channel at the vertex" and add: "at Du-20 (Governor Vessel Point #20)" to those words. Underscore also the entire second line on page 55 of text.

From the small triangles along the Liver meridian pathway as shown in Fig. 19 of the textbook, you can see that this meridian meets Spleen Point #6 between Liver Point #4 and 5, which is shown on all good acupuncture charts. Notice that between Liver Points #11 and 12, the meridian pathway actually meets two other points which are Spleen Points #12 and 13. After curving around the genitalia it runs via the Conception Vessel (Points #2, 3 and 4) to Liver Point #13. One further but very important inter-connection of the Liver meridian to the Conception Vessel, not adequately shown by Fig. 19 (no small triangle) is that the internal branch from Liver Point #13 to Point #14 (dashed blue line) actually contacts the tenth point of the Conception Vessel as well. Bear in mind that most of these Liver meridian connections to other meridians or vessels are not generally shown on acupuncture charts, but instead the Liver meridian goes directly from Liver Point #11 to 12 and 13. (You can well imagine how complicated a set of charts would be if it showed each and every little internal branch and meridian connection.) Of such above mentioned connections, the ones of the Liver meridian to the Spleen meridian are of relatively little importance therapeutically compared to those of the Liver meridian to the Conception (and Governor) Vessels. Always keep in mind the direct relationship of the abdominal portion of this meridian to the genital organs and Conception Vessel.

(2) Review the information in section a. on page 55 of the text, which should not be new to you at all, and study thoroughly the information regarding 'The Exterior-Interior Relationship of the Channels' in section b. on page 55 and continued at the top of page 56. Underscore and make sure you understand what is being said in the last four lines on page 55. (In this regard, see also page three of this Liver meridian Study Guide.)

(3) Study the point locations for all fourteen points on this bilateral meridian as given in text and diagram on pages 184 to 191 of the textbook. Ignore Fig. 102a and 102b between pages 190 and 191 until all the remaining meridian lessons have been covered in the Study Guide. Remember that 'Puncture' information given in this Study Guide supersedes (or supplements) that given in the textbook. Following are some location hints, suggestions or further information on some of those fourteen points that you may find helpful.

Liv. 1: Note on the smaller diagram of the foot in Fig. 97b, that the first point of the Liver meridian is shown too far towards the center of the top of the big toe. Fig. 98 shows it more correctly and takes into account the fact that the toe-nail of the big toe is quite large, and thus the Liver Point #1 placement in Fig. 98 and in the textbook location description is correct.

Liv. 3: This point is closely analogous location wise (and in many other ways) to the Large Intestine #4 point (Ho-Ku or Hegu). It also has a very strong 'antispasmodic' action like Liver Point #2 (see O.I.C.S. Indication Sheet for this meridian).

Liv. 4: The second use of the word "medial" under the location information given for this point is an error and should read instead "lateral". Please correct this error. In other words, Zhongfeng is between the tendons of the m. tibialis anticus (= anterior) and m. extensor hallucis longus.

Liv. 5: Change word "posterior" in 'Location' instructions to read "medial". Add irregular menstruation to list of indications given in text for this point. Change words "inch" and "posterior" under 'Puncture' information to read "cun" and "medial" respectively.

Liv. 6: Change word "posterior" in 'Location' instructions to read "medial". This point is beside the tibia midway between the medial malleolus and the medial condyle of the tibia, two pouce or cun above Liver Point #5. Change word "inches" under 'Puncture' information to read either "pouce" or "cun".

Liv. 7: Fig. 99 on page 188 of the textbook shows Yinlingquan (Sp. 9) point too far away from the tibia. If the dot representing Sp. 9 were moved closer to the tibia, the Liv. 7 point would then be a little to the right (posterior to the tibia) of the relocated Sp. 9 point in the diagram. Change word "inches" under 'Puncture' information to read either "pouce" or "cun".

Liv. 9: Approximately 5 cun or pouce superior to the medial end of the transverse crease of the knee joint. Change word "inches" of 'Puncture' information to either "pouce or cun" and add "sometimes up to 3 pouce (cun) in depth".

Liv. 10: Three pouce or cun below Stomach Point #30. Change word "inches" of 'Puncture' information to either "pouce" or "cun".

Liv. 12: This point is classically FORBIDDEN TO NEEDLES, the only point forbidden to anything on this meridian.

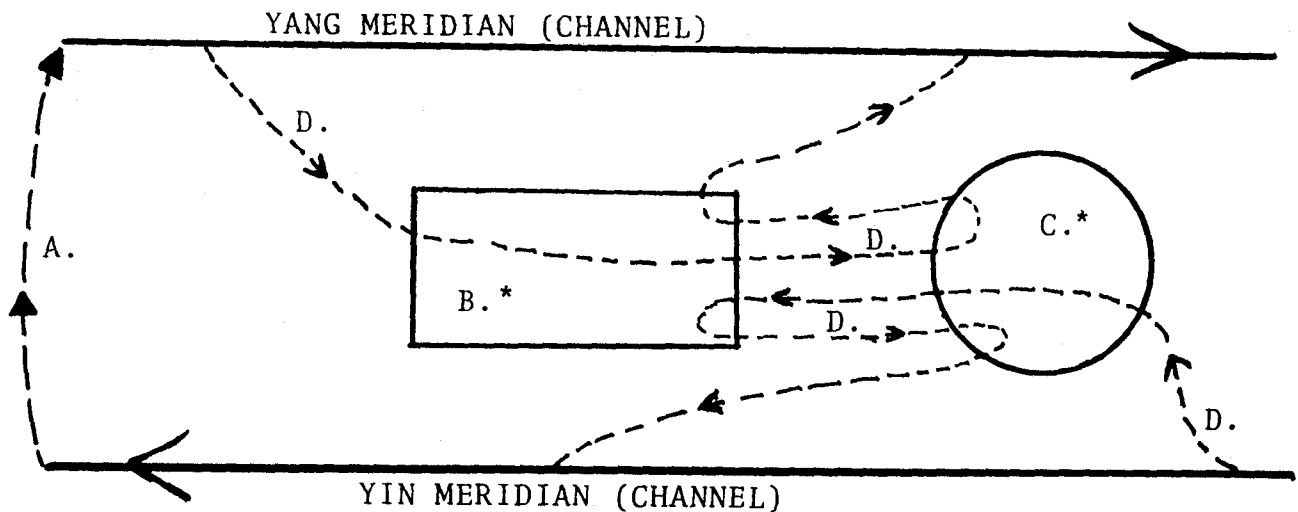
Liv. 14: Students of acupuncture should be aware that there is considerable variation on the placement of this point in classical and European literature --- ranging from between the 5th. and 6th. ribs to between the 7th. and 8th. ribs. Most authorities however place it between the 6th. and 7th. ribs (sixth intercostal space) as does the textbook. The Liver meridian in general seems to have a lot of variation in point placement, more so than most meridians---beware!

(4) General Information

- twelfth meridian in classical order of ch'i energy flow, called,
- [O.I.C.S.] FOOT YIN IN EQUILIBRIUM LIVER MERIDIAN (Li), or
- [Textbook] THE LIVER CHANNEL OF FOOT-JUEYIN (Liv.).
- Belongs to the Wood Element (see O.I.C.S. Lesson Eight), and
- with 'Envelope of the Heart' meridian comprises the CHÜEH YIN Energetic Layer.
- It has a total of 14 bilateral acupuncture points, of which THREE are of major therapeutic importance, namely Liv. 1, 3, 8, and for which information on Indication Sheets should be memorized. We suggest you notate these three major points in the textbook beside the appropriate location information on pages 184 to 189.
- FOUR other points, namely Liv. 2, 4, 13 and 14 are of secondary therapeutic importance, and although information given for them on the O.I.C.S. Indication Sheets does not have to be memorized, their locations must be studied and known.
- POINTS FORBIDDEN TO NEEDLES: Liv. 12 (MEMORIZE!!)
- POINTS FORBIDDEN TO MOXIBUSTION: None

(5) The Exterior-Interior Relationship of the Channels

* Internal organs shown between meridians for diagram purposes only.



- A. Yin Channel coupling with a Yang Channel (internal branch at hand or foot).
- B. Fu organ
- C. Zang organ
- D. Internal communication meridians

NOTE: We prefer the terms 'zang' and 'fu' to words such as 'solid' or 'hollow' as used by other authors.

POINTS OF MAJOR AND SECONDARY THERAPEUTIC IMPORTANCE

NOTE: This is by no means a complete listing of all indications possible for each given point, but represents rather those of prevailing use, in everyday treatment. The points circled below are the most significant or MAJOR ones, and all information given for them should be MEMORIZED in full. Those not circled are the 'Secondary' points, or points of lesser therapeutic importance or value. Memorization of Secondary point information is not required for examination purposes.

Li-1 "Ta-Tun" (Great Mound)

INDICATIONS: Enuresis; menorrhagia; metrorrhagia; hernia; prolapse of uterus; gonorrhoea; pain and diseases of penis; orchitis (inflammation of testicles); fainting, syncope, etc.; tinnitus.

NEEDLE: 1 to 3 Fen [45 or 90]

MOXA: 3 to 5 minutes (best to avoid moxa during pregnancy)

Li-2 "Hsing-Chien" (Between Columns)

INDICATIONS: Irregular menstruation; enuresis; pain in the costal region; epilepsy; insomnia; redness and swelling of eyes; headache; has strong antispasmodic action (also Li-3); muscle cramps and spasms.

NEEDLE: 3 to 7 Fen [45 or 90]

MOXA: 5 to 10 minutes

Li-3 "T'ai-Ch'ung" (Great Flush)

INDICATIONS: Headache; dizziness; hernia; metrorrhagia; uterine bleeding; mastitis; weakness or lameness of tibia region; pains in lower abdomen; enuresis; neuralgia of the chest, ribs, lumbar region; sore throat; likely some regulatory influence on inner organs; muscle cramps and spasms.

NEEDLE: 3 Fen to 1 Pouce [90 or 45 upwards]

MOXA: 3 to 12 minutes

POINTS OF MAJOR & SECONDARY THERAPEUTIC IMPORTANCE, CONTINUED

Li-4 "Chung-Fung" (Middle Seal)

INDICATIONS: Anuria (retention of urine); spermatorrhea; nocturnal emissions; pain in penis; cold feeling in lower extremities; neuralgic pain in lumbar region; jaundice.

NEEDLE: 3 to 5 Fen

MOXA: 5 to 10 minutes

Li-8 "Ch'ü-Ch'üan" (Tortuous Spring)

INDICATIONS: Pains and spasms of lower abdomen; dysuria and disorders of urinary organs; vulvar pruritus (itching); prolapse of uterus; nocturnal emission; impotence; pain in knee region and medial side of femur; tonification effect; anuria.

NEEDLE: 5 Fen to 1 Pouce 7 Fen

MOXA: 3 to 12 minutes

Li-13 "Chang-Men" (Broad Door)

INDICATIONS: Diarrhea; abdominal pain and distention; pain in chest and costal region; dyspepsia; anorexia; vomiting; general spleen and gall bladder disorders (cholecystopathy); anemia; hematuria; good during convalescence; excellent for general fatigue and exhaustion.

NEEDLE: 5 to 9 Fen

MOXA: 3 to 15 minutes

Li-14 "Ch'i-Men" (Time Door)

INDICATIONS: Pleuritis; hepatitis; chest pain and distention; intercostal neuralgia; dyspepsia; vomiting and vomiting in pregnancy; motion sickness (use prior to travelling); peritonitis; general liver disorders.

NEEDLE: 3 to 7 Fen [45] or 5 Fen to 1 Pouce [15]

MOXA: 3 to 12 minutes

THE TENDINO-MUSCULAR MERIDIAN OF THE LIVER.

- 1) This meridian starts at the big toe at the Ting point,
- 2) climbs toward the front of the internal malleolus,
- 3) follows the tibia and arrives under the medial tuberosity,
- 4) climbs the interior femoral region to the groin,
- 5) converges upon the genitals in order to mingle with the Yin Tendino-muscular meridians and the Tendino-muscular meridian of the Stomach.

Troubles of This Meridian:

- Pain at the big toe up to the internal malleolus.
- Pains at the tuberosity of the tibia and at the medial surface of the knee.
- Contracture and pain of the muscles of the internal surface of the thigh.

If the Yin of the genitals is troubled, it becomes "useless". This is why, in the case of repeated sexual relations, the Yin is injured, the Yang becomes impotent; hence, the penis fails to erect.

When it is a question of troubles caused by the Perverse Cold (see Lesson 18), the Yin is contracted and the penis contracts. When the Perverse Heat is at cause, the Yin is dilated and the penis stretches outward without being able to recover its normal form.

THE TRANSVERSAL LO VESSEL OF THE LIVER.

This vessel starts at the Lo point of the Liver, Li-5 (Li-Kou) and traverses the leg to reach the Iunn point of the Gall Bladder meridian, GB-40 (Ch'iu-Hsü).

THE LONGITUDINAL LO VESSEL OF THE LIVER.

This vessel starts at the Lo point of the Liver, Li-5 (Li-Kou) and passes to the meridian of the Gall Bladder on the leg. Another vessel leaves Li-5, extends along the internal surface of the calf of the leg, arrives at the testicles, and separates into branches at the penis.

Symptomatology and Treatment:

Fullness: The scrotum and penis stretch outwards; stimulate the corresponding Lo point, Li-5 (Li-Kou).

Emptiness: Brutal and sudden itching of the scrotum; stimulate the opposite Lo point GB-37 (Kuang-Ming) and the corresponding Iunn point Li-3 (T'ai-Ch'ung).

THE DISTINCT MERIDIAN OF THE LIVER

- 1) The principal meridian of the Liver reaches the point Li-5,
- 2) a vessel climbs up to the hairs of the pubis in order to be connected to the Distinct meridian of the Gall Bladder at the point Co-2 (Ch'ü-Ku),
- 3) it then joins this Distinct meridian to climb with it to the outer canthus on the face at GB-1.

l. The Liver Channel of Foot-Jueyin

Course: This channel starts from the dorsal region of the great toe (Dadun, Liv. 1), passes the dorsum of the foot and reaches Zhongfeng (Liv. 4) one cun in front of the medial malleolus. From there it ascends 8 cun above the medial malleolus, crosses the Spleen Channel of Foot-Taiyin, further ascending along the medial side of the knee and thigh to the pubic region where it curves around the external genitalia to the lower abdomen. From there the channel runs upward, encircles the stomach and enters its pertaining organ, the liver, to communicate with the gall bladder. Further upward it passes through the diaphragm, the costal and hypochondriac region, ascends along the posterior aspect of the throat to the nasopharynx and connects with the eye, then emerges at the forehead, meeting the Du Channel at the vertex. (See Fig. 19.)

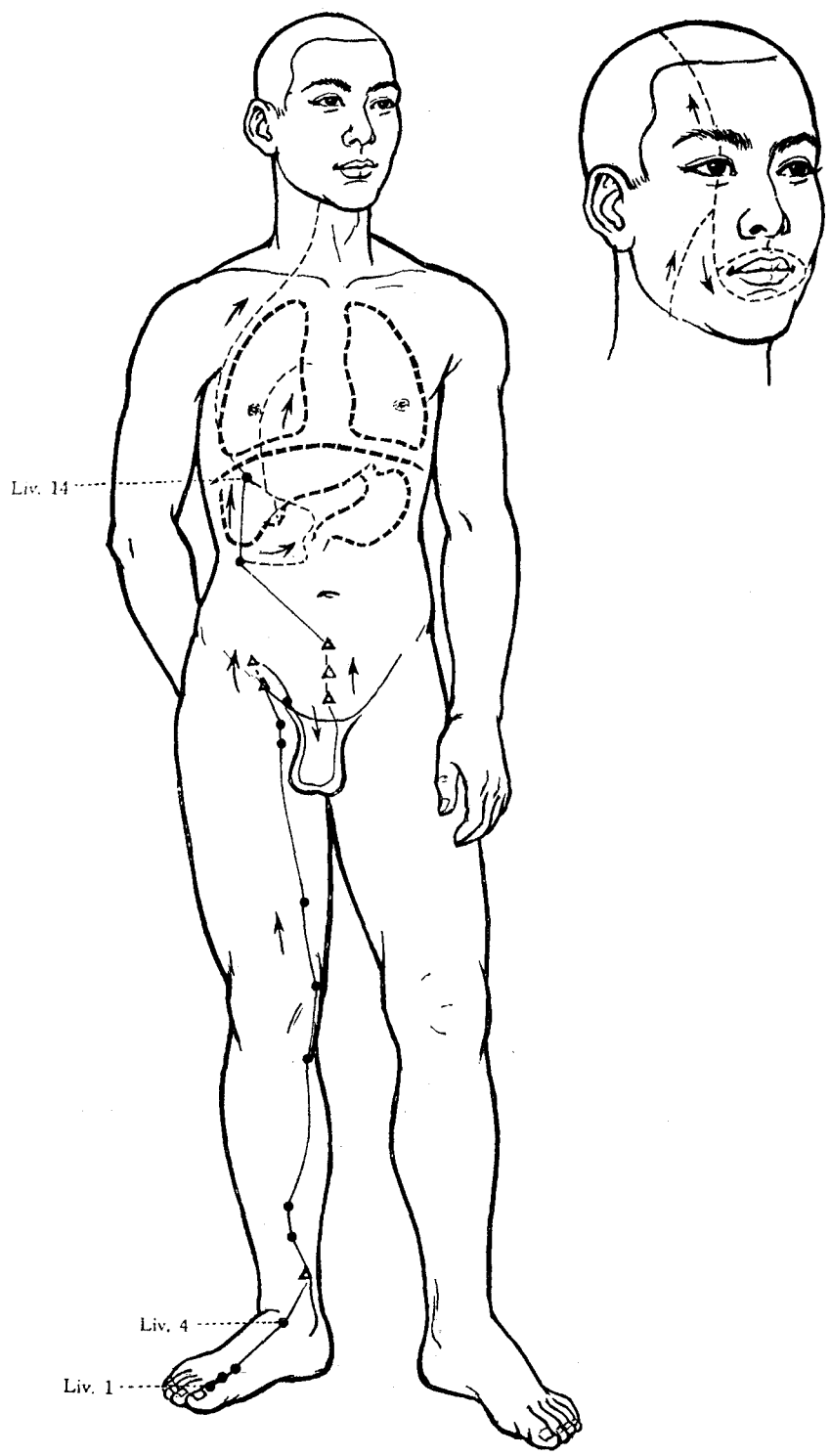


Fig. 19. The Liver Channel of Foot-Jueyin

The Eye Branch originates in the eye, runs downward into the cheek and curves around the inner surface of the lips.

The Liver Branch arises in the liver, passes through the diaphragm to the lung, and connects with the Lung Channel of Hand-Taiyin. (See Fig. 19.)

Pathological Symptoms: Lumbago, fullness of chest, vomiting, enuresis, retention of urine, hernia, pain in the lower abdomen.

From the routes of the channels and their commencing and terminating points as described above, the following rules can be made concerning the circulation of the Channels of Yin or Yang, Hand or Foot.

a. The Direction of Circulation and the Connection Between Channels:

It is considered that the direction of the circulation of the channels and their connection depend on the direction of the qi and blood flowing inside the channels.

The Three Yin Channels of Hand start from the chest and flow to the hand where they meet with the Three Yang Channels of Hand.

The Three Yang Channels of Hand start from the hand, ascend to the head where they meet with the Three Yang Channels of Foot.

The Three Yang Channels of Foot start from the head, run towards the foot and there meet with the Three Yin Channels of Foot.

The Three Yin Channels of Foot start from the foot, ascend to the chest and meet the Three Yin Channels of Hand.

b. The Exterior-Interior Relationship of the Channels:

Each of the Twelve Channels, either yin or yang, hand or foot, interiorly pertains to one of the viscera. Those that pertain to the zang organs (heart, lung, spleen, kidney, liver and pericardium) are called the Yin Channels, and those that pertain to the fu organs (large and small intestines, stomach, gall and urinary bladders, and Sanjiao) are called the Yang Channels. Each of the Yin Channels couples with a Yang Channel. The Yin Channels run along the medial aspect of the extremity, while their respective coupling Yang Channels run along the lateral aspect, being opposite to each other. Such relationship of the channels is known as the exterior-interior relationship. The coupled channels may be connected with one another at the hand or foot. In circulation, the Yin Channels flow into the zang organs and communicate with the fu organs respectively, while the Yang Channels flow into the fu organs and communicate with the zang organs respectively, and so six pairs of interior-exterior related channels are formed. Such inter-relation ex-

(12) THE LIVER CHANNEL OF FOOT-JUEYIN

— 14 Points —

1. Dadun (Liv. 1):

Location: On the lateral aspect of the dorsum of the terminal phalanx of the big toe, midway between the lateral corner of nail and interphalangeal joint. (See Fig. 98.)

Indications: Enuresis, menorrhagia, hernia.

Puncture: Obliquely 0.1-0.3 inch.

Page 184

For greater detail see the textbook,
"Essentials of Chinese Acupuncture"

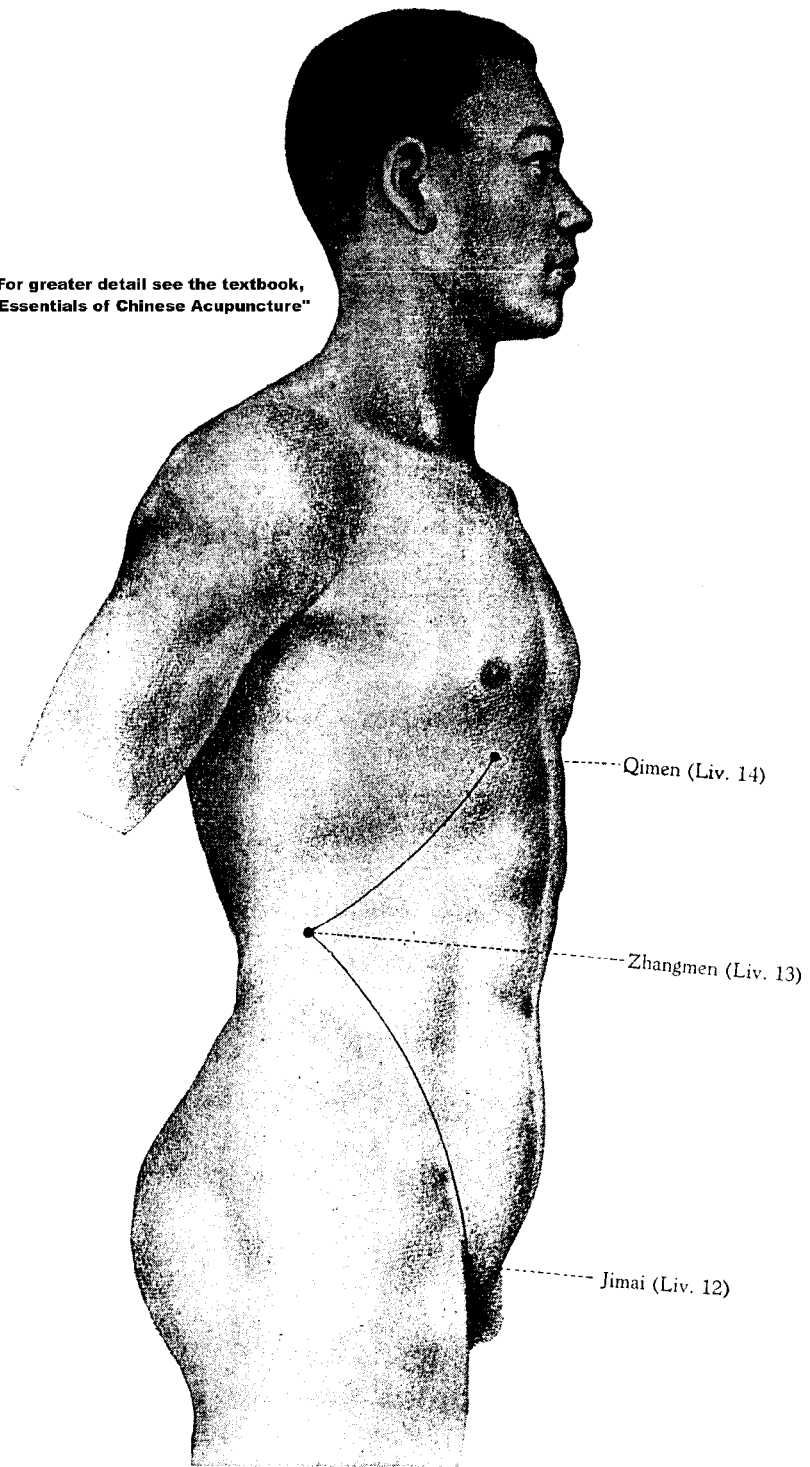


Fig. 97a. The Liver Channel of Foot-Jueyin

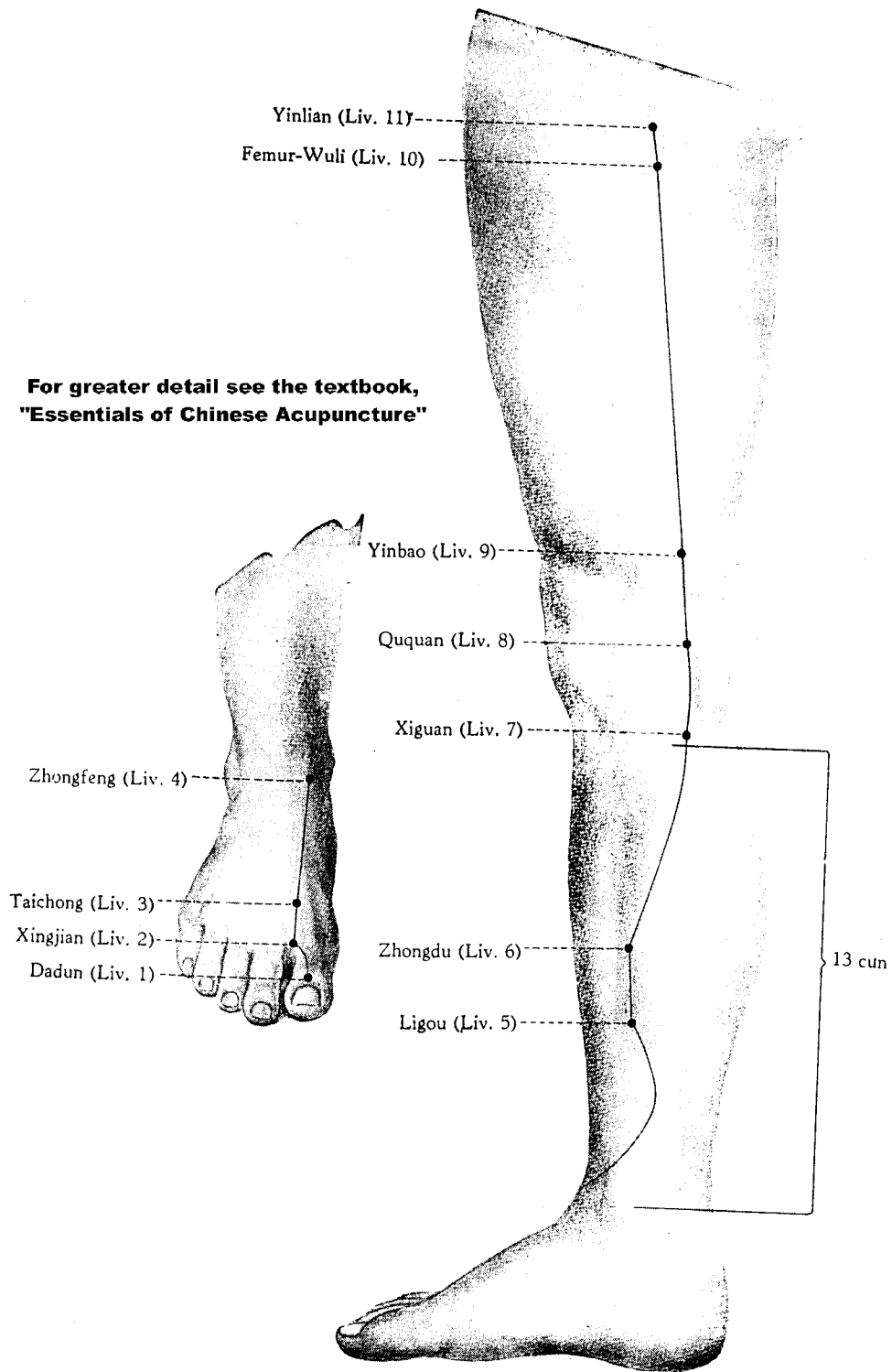


Fig. 97b. The Liver Channel of Foot-Jueyin

2. Xingjian (Liv. 2):

Location: 0.5 cun proximal to the margin of the web between the 1st and 2nd toes. (See Fig. 98.)

Indications: Irregular menstruation, urethritis, enuresis, pain in the costal region, hypertension, epilepsy, insomnia, redness and swelling of eye.

Puncture: Obliquely 0.3-0.5 inch.

3. Taichong (Liv. 3):

Location: Between the 1st and 2nd toe, 2 cun proximal to the margin of the web. (See Fig. 98.)

Indications: Headache, dizziness, epilepsy, convulsions in children and infants, eye diseases, hernia, uterine bleeding, mastitis.

Puncture: 0.5-1.0 inch obliquely upward.

4. Zhongfeng (Liv. 4):

Location: 1 cun anterior to the medial malleolus, in the depression medial to the tendon of m. tibialis anticus. (See Fig. 98.)

Indications: Pain in the lower abdomen, retention of urine, hernia, spermatorrhea, pain in the penis.

Puncture: Perpendicularly 0.3-0.5 inch.

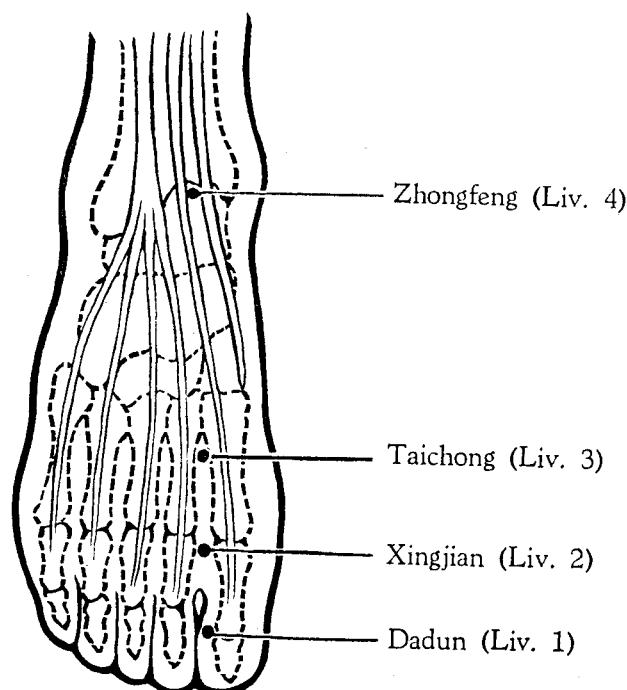


Fig. 98

5. Ligou (Liv. 5):

Location: 5 cun superior to the medial malleolus, on the posterior border of the tibia. (See Fig. 99.)

Indications: Inflammation of the pelvic organs, retention of urine, spermatorrhea, impotence.

Puncture: Perpendicularly 0.5-1.0 inch along posterior border of the tibia.

6. Zhongdu (Liv. 6):

Location: 7 cun superior to the tip of the medial malleolus, on the posterior border of the tibia. (See Fig. 99.)

Indications: Irregular menstruation, hernia, pain in the joints of lower extremities.

Puncture: Perpendicularly or obliquely 0.5-1.5 inches.

7. Xiguan (Liv. 7):

Location: In the posterior and inferior aspect of the medial condyle of the tibia, 1 cun posterior to Yinlingquan (Sp. 9).

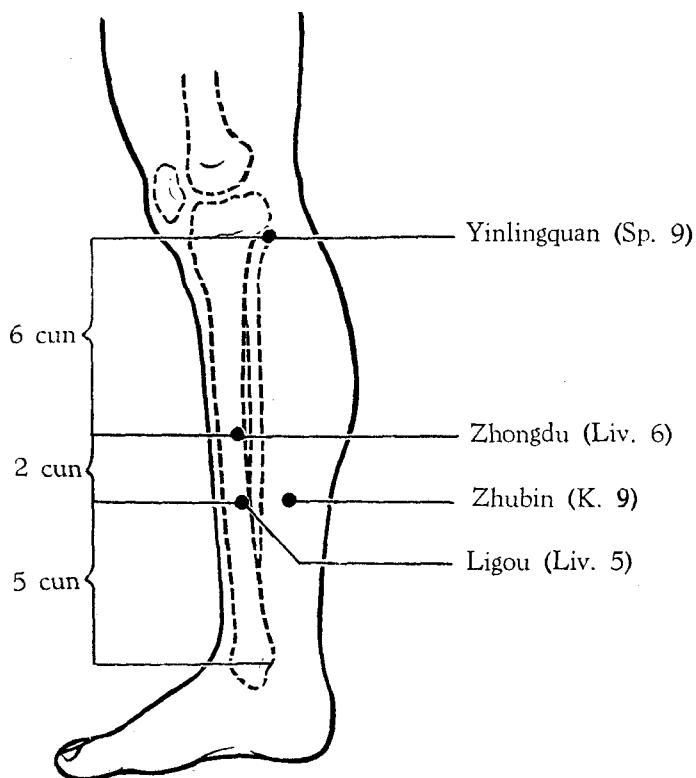


Fig. 99

Indications: Pain in the knee joint.

Puncture: Perpendicularly 1.0-1.5 inches.

8. Ququan (Liv. 8):

Location: At the medial end of the transverse crease of the knee joint, in a depression at the anterior border of m. semimembranosus and m. semitendinosus. (See Fig. 100.)

Indications: Infection of urogenital system, spermatorrhea, impotence, hernia, disorders of the knee joint and its surrounding soft tissue.

Puncture: Perpendicularly 1.0-1.5 inches.

9. Yinbao (Liv. 9):

Location: 4 cun superior to the medial epicondyle of the femur, between m. vastus medialis and m. sartorius. (See Fig. 101.)

Indications: Lumbago, pain in the lower abdomen, enuresis, irregular menstruation.

Puncture: Perpendicularly 1.0-2.0 inches.

10. Femur-Wuli (Liv. 10):

Location: 1 cun below Yinlian (Liv. 11) in the medial aspect of thigh. (See Fig. 101.)

Indications: Distention in lower abdomen, retention of urine, enuresis, eczema of the scrotum.

Puncture: Perpendicularly 1.0-2.0 inches.

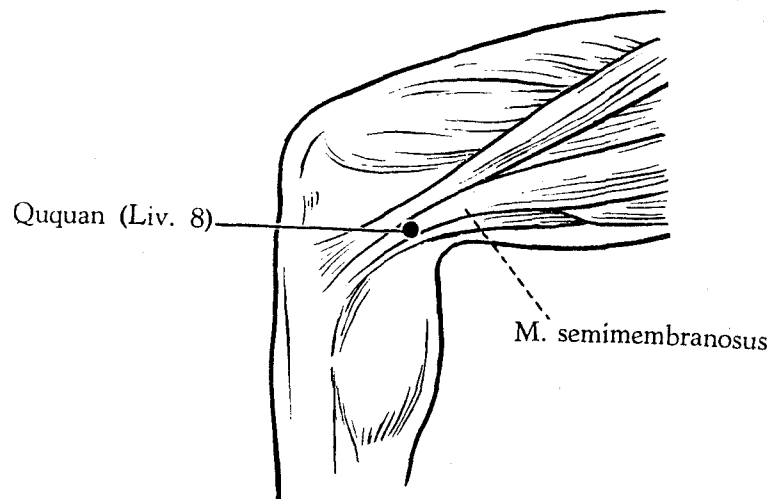


Fig. 100

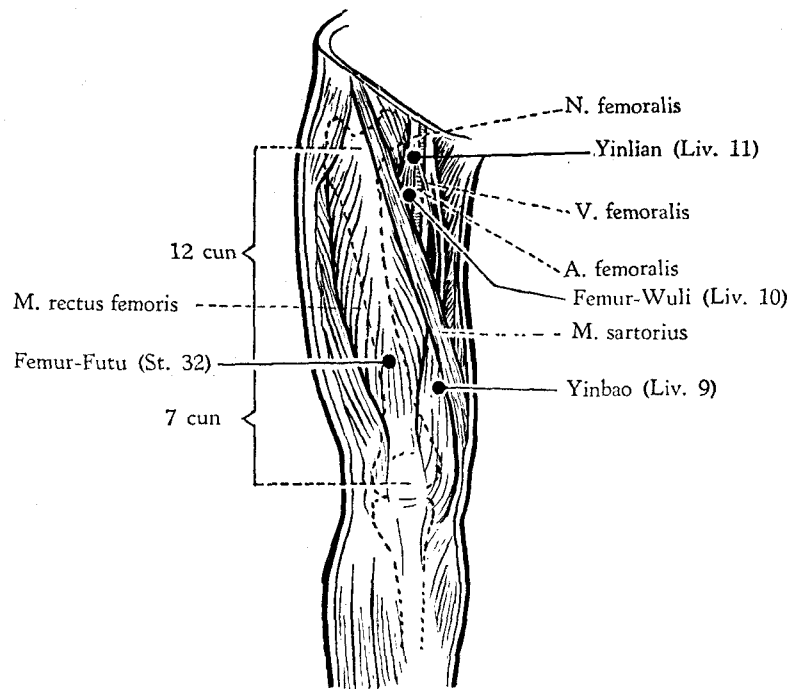


Fig. 101

11. Yinlian (Liv. 11):

Location: 1 cun inferior to the lateral aspect of the femoral artery in the inguinal groove. (See Fig. 101.) Locate the point with patient in supine position.

Indications: Femoral neuralgia, lumbago, pain in leg, paralysis of lower extremities, irregular menstruation.

Puncture: Perpendicularly 1.0-1.5 inches slightly laterally.

12. Jimai (Liv. 12):

Location: 2.5 cun lateral to and 1 cun inferior to the superior border of the pubic symphysis, at the lower portion of the inguinal groove.

Indications: Pain in the penis, prolapse of the uterus, pain in the lower abdomen, pain in the medial aspect of thigh.

Puncture: Perpendicularly 0.5-1.0 inch, avoiding artery.

13. Zhangmen (Liv. 13):

Location: On the free end of the 11th rib. (See Fig. 103.)

Indications: Splenomegalia, diarrhea, abdominal distention, pain in the costal region.

Puncture: Perpendicularly 0.5-0.8 inch.

For greater detail see the textbook,
"Essentials of Chinese Acupuncture"

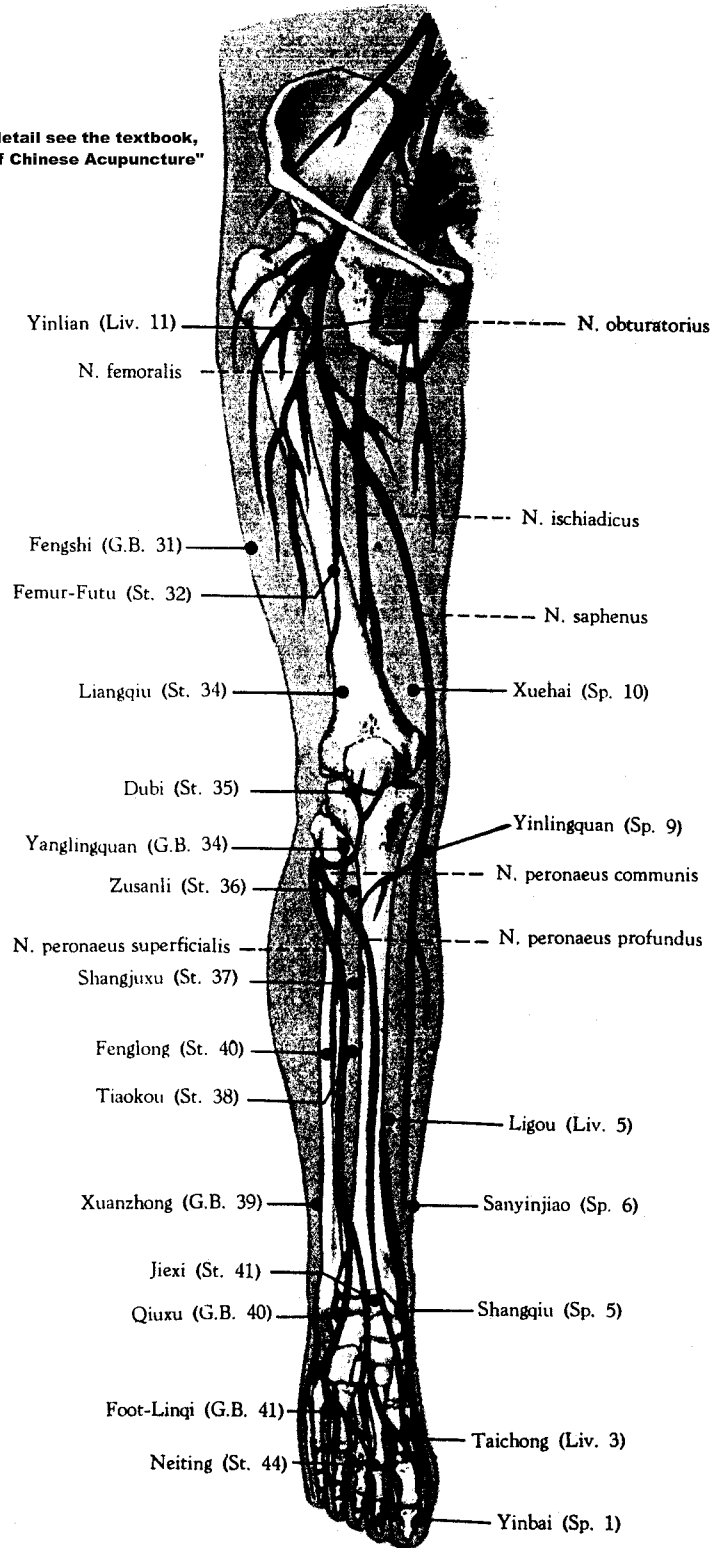
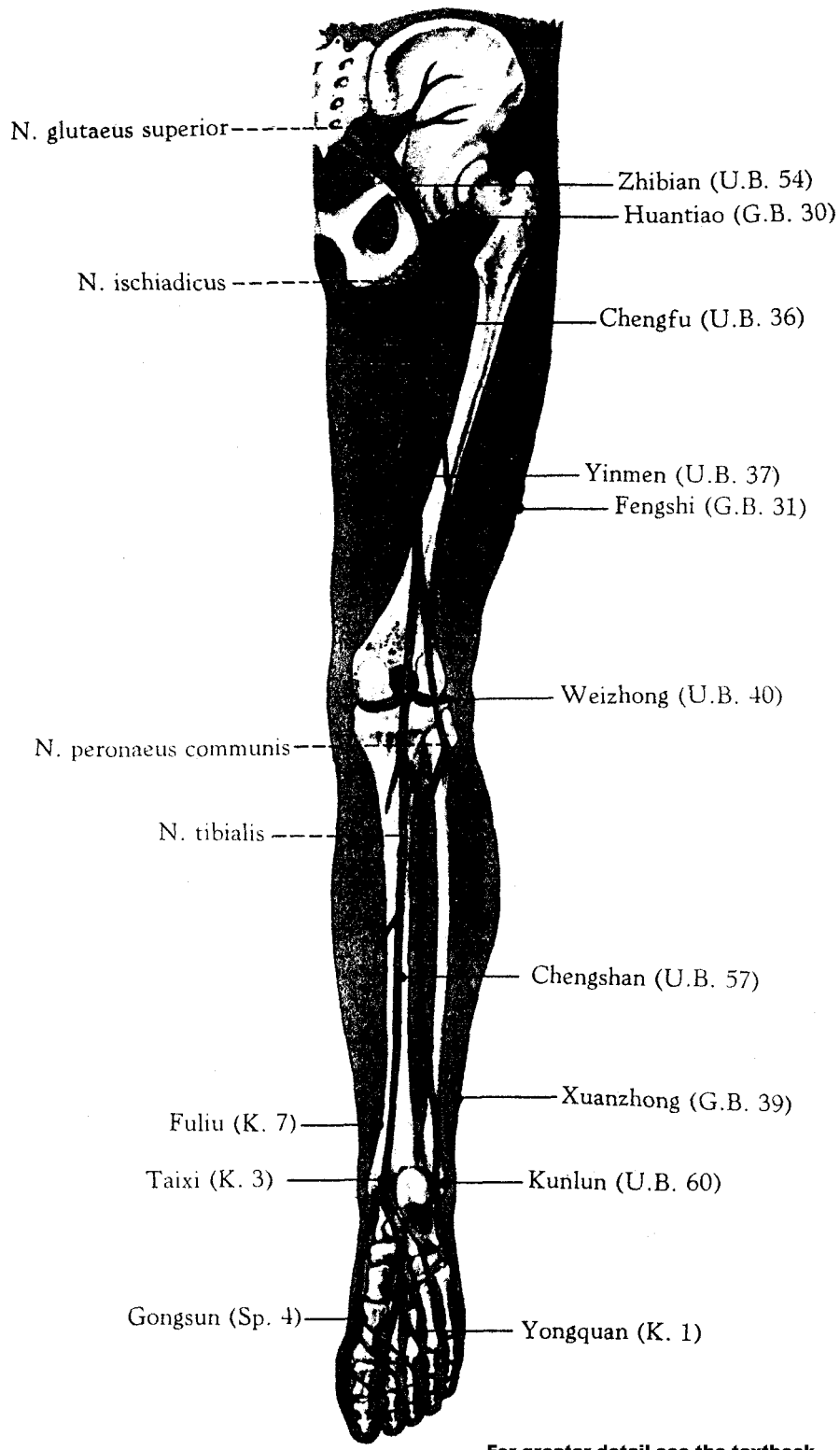


Fig. 102a. The Relationship Between the Main Points of the Anterior Aspect of the Lower Extremities and the Nerves



For greater detail see the textbook, "Essentials of Chinese Acupuncture"

Fig. 102b. The Relationship Between the Main Points of the Posterior Aspect of the Lower Extremities and the Nerves

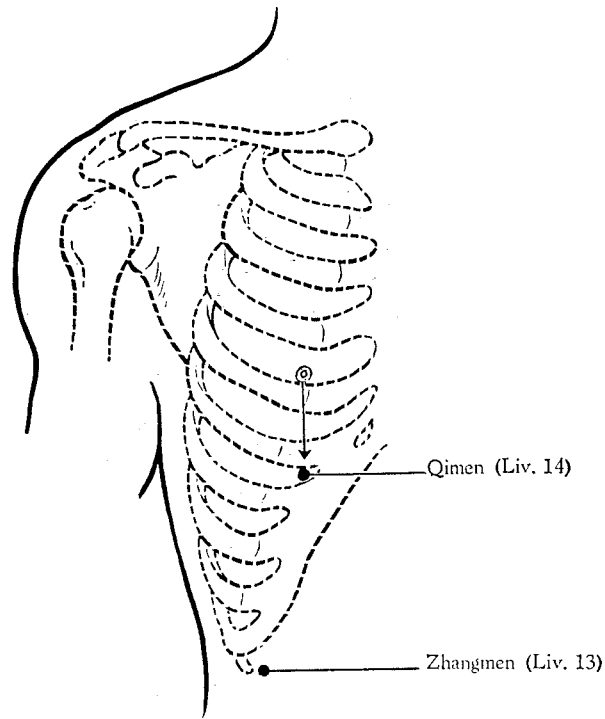


Fig. 103

14. Qimen (Liv. 14):

Location: On the mammillary line, directly below the nipple, in the intercostal space of the 6th and 7th ribs. (See Fig. 103.)

Indications: Pleuritis, hepatitis, chest pain, pain in the hypochondriac region.

Puncture: 0.3-0.5 inch obliquely, or 0.5-1.0 inch horizontally along the skin.