

FIVE DRAGONS  
ACUPUNCTURE COLLEGE  
CORRESPONDENCE COURSE



LESSON 19  
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 KIDNEY MERIDIAN consists of the information given in this section of the Study Guide, all material covered by here-with specified page references to the textbook as supplied, and the enclosed O.I.C.S. Indication sheets for this meridian.

(1) Study Section h, on page 47 of the textbook and the diagram on the following page (Fig. 15). Note the connection to Sp-6 above the inner ankle bone (malleolus) represented by the small triangle there in Fig. 15, and the connection to Du 1 (Governor 1) represented by the small triangle just below the tip of the coccyx in the right hand diagram in Fig. 15. Also note that it meets some Conception Vessel points (Co-3, Co-4) on its way from the bladder back to the lower abdomen area for the continuation of acupuncture points from there upwards (it also meets Co-7 which is not shown). Notice as well that this channel (meridian) starts at the small toe (its first point though is on the bottom of the foot) and that its energy is ascending. As for all meridians be sure you know its relationship to the classical order of ch'i energy flow, to the Energetic Layers, its full terminology (both textbook and O.I.C.S.) as well as what 'Element' it belongs to, etc.

(2) Study the location of all twenty-seven points of this meridian as given in text and diagrams from the bottom of page 154 through to 161 of the textbook. Locate each of these points several times on yourself and then someone else, exactly as you have done for previous Lessons of the program, in conjunction with the hints, suggestions and further information given for many of these points in this Study Guide section. Three points on this channel are of major therapeutic importance, namely #1, 3 and 7, for which information given on O.I.C.S. Indication Sheets should be MEMORIZED. We suggest you notate these three major points in some manner beside the appropriate 'Location' information in your textbook. As well you should delete any 'Indications' and 'Puncture' information given for those three points in the textbook, as that information is covered in the Indication Sheets or within this section of the Study Guide. Three other points, namely #2, 6 and 27, 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 for examination purposes. Again, you should delete any 'Indications' and 'Puncture' information given for those points in the textbook, as that information is covered in the Indication Sheets or within this section of the Study Guide. No points on this meridian are forbidden to moxibustion, and only one point is forbidden to needles (Ki-11). One last reminder before we go on with this meridian --- always be sure to consult the textbook point locations in addition to those extra hints and location suggestions given in this Study Guide. Away we go!

Ki-1: In a depression created when the toes are plantar flexed (toes bent downwards, towards the sole of the foot), which puts this point between the distal ends of the metatarsal bones of the second and third toes (big toe is number one). Another way of stating it is, in between the balls or pads of the big toe and that of the other toes combined, at about the midline of the sole of the foot at the tip of the corner formed by the meeting of the muscles of the big toe and the muscles of the rest of the toes. This is not a very frequently used point but

nevertheless is of major therapeutic importance. A helpful adjunct point in treating asthma, a worthwhile point to massage for paresis (partial or incomplete paralysis), and it has strong psychological implications for such things as indecision and taciturnity. According to a famous French acupuncturist (Chamfrault) this point combined with Co-15 (Chiu-Wei) shortens the epileptic fit, however we have never had the opportunity to try this in practice. Note that for determining the anterior, middle and posterior thirds of the sole of the foot as mentioned in the textbook, the toes are not considered as being a part of the sole of the foot for that proportioning. Needling this point is usually very painful and patients tend to jerk away, sometimes even fainting. If you cannot have your patient lying down on their back (hold the foot when inserting), at the very least have them kneel on a chair (front of body towards the back of the chair) so that the soles of their feet are pointing forwards at front of the chair (with their arms resting on the highest part of it).

The first point of this meridian is on the sole of the foot, however since the meridian actually starts at the little toe, the special Kidney test point shown on Page 12, Lesson Two, is justified, and has been researched by the Japanese as being indicative of the energy in that meridian as reflected at the actual Ki-1 point on the sole.

Ki-2: About one pouce posterior to Sp-4. Some authors describe this point as being just below the prominent tuberosity of the navicular bone [look this up in an anatomy book]. Sometimes useful in cases of excessive sweating, and for psychological purposes when there is an excess tendency towards decision making. Very useful when patients complain of burning, hot feet at night. Don't forget this point for sprained, strained or swollen ankles.

NOTE: There is some discrepancy in the literature (ie. Mann, points three to six) regarding the location and placement of Kidney points three to eight inclusive. Here again the importance and usefulness of the Chinese transliterated names for the acupuncture points is illustrated. We caution our students and graduates to take care when using outside reference materials for obtaining formulas and point combinations, to determine exactly which of these Kidney points is meant, and what that author's location is, before using it. Caveat!

Ki-3: [Note some authors call this Ki-5 or Ki-6.] Please note that references to the medial malleolus itself implies its rounded bony prominence. By "tip of the medial malleolus" in the textbook is meant its highest point or approximate center, and "tendo calcaneus" is also known as the 'Achilles tendon', or 'heel tendon'. This point then is midway between a line joining the highest part (or center) of the medial malleolus and the Achilles tendon, which actually puts it closer to the medial malleolus than most diagrams show because of the large diameter of the medial malleolus itself. This is approximately one half pouce behind the medial malleolus in a depression where one can feel the pulse of the Arteria tibialis posterior. Best found and utilized with patient lying on the side you wish to treat, ie. lying on right side to do right Ki-3. This point along with Ki-7 (Fuliu or Fu-Liu) are good for severe general exhaustion cases and often for degenerative illnesses. It also seems to initiate a "conversion reaction" in the management of rheumatic problems. It is classically of great impor-

tance that the appropriate action of stimulation (ie. tonification or sedation) be carefully chosen and carried out when treating this point.

Ki-4: [Note some authors call this Ki-6 or Ki-5.] Please note the 'Errata' on the word "anterior" in the textbook description for the 'Location' of this point, in that it should read "posterior" instead. This puts it one-half to one full pouce behind the posterior border of the medial malleolus close to the inner edge of the Achilles tendon, and on an approximate level with the lower border of the medial malleolus. Some authors describe it as being between the tendons of the Muscle flexor digitorum longus and the Muscle flexor hallucis longus. A good point to use for anxiety. For women, this point is relatively forbidden to use during pregnancy.

NOTE: For points not covered by the O.I.C.S. Indication Sheets on this meridian, the textbook's words "inch" or "inches" can generally be changed to "pouce" or "cun" in regard to 'Puncture' depth information given. For some of them however it is not clear to us whether the textbook means the Western inch of measurement or the Chinese cun (pouce) and fen measurement system.

Ki-5: [Note some authors call this Ki-4, Ki-3 or Ki-6.] The "tubercle [tuber] or protuberance of the calcaneum" given in the textbook refers to the posterior extremity of the calcaneus (heel bone) which forms the projection of the heel itself, and gives the location from the medial side thereof. Indicated for urinary and menstrual irregularities especially if related to prolapse of the uterus. This point along with Bl-62 (Shen-Mai) and Bl-63 (Chin-Men) have a firm relationship to arthritic problems and rheumatism.

Ki-6: [Note some authorities call this Ki-3 or Ki-4 or Ki-5.] Add the words "up to" so that the textbook's 'Location' description reads: "In the depression up to 1 cun [pouce] directly below the inferior border. . .". Fig. 76b, unnumbered page 156 of textbook shows this point (Ki-6) a bit too high, and Fig. 78 on page 158 shows this point a bit too low. This point supposedly has an action on the entire hormonal occurrences in the body. Good point for women's migraine headaches related to menstruation, painful menstruation, and ophthalmic type migraines. According to De La Fuye (famous French acupuncturist) a good combination for insomnia is this point (Ki-6) tonified, along with Bl-62 sedated. For a general pain relieving effect (similar to Bl-60), tonify both the points mentioned in the previous sentence.

Ki-7: [Note some authorities call this Ki-8.] Sometimes described as being in a depression up to three pouce above the medial malleolus and one-half or more pouce posterior to the medial border of the tibia, just anterior to the Achilles tendon (and over the Arteria tibialis posterior). Useful for disturbances of the body's fluid balance, and psychological asthenias. Possible effects on suprarenal and thyroid glands. This is another one of the really 'Great' points of acupuncture.

Ki-8: [Note some authors call this Ki-7. Others try to equate it to the Liver 5 point and/or Spleen 6]. About one pouce distal and posterior to Spleen Six. On an approximate level with, but anterior to Ki-7. Some describe this point as being up to three pouce above the medial

malleolus at the posterior edge of the tibia, just before the flexor digitorum longus. Maximum needle depth is usually five fen, not one "inch" (=pouce??) as stated in the textbook. Note from the China Cultural Corp. Charts that from this point the meridian pathway contacts Sp-6 on its way to Ki-9.

Ki-9: Sometimes up to two pouce posterior to the medial border of the tibia. It is approximately two pouce above Sp-6 and one-and-a-half pouce behind Sp-6. A good point for cramps and spasms in the calf; for detoxification [classically lead poisoning]; and prevention of miscarriage [when done as soon as possible and even before conception]. In pediatric acupuncture this point is said to assist deficient ossification of the fontanel [Chamfrault] and alleviates unstable temperament, capricious and discontented dispositons in children [Soulie De Morant].

This point is classically significant for eliminating the transmission of bad hereditary or ancestral traits of the parents to the fetus, when used on the mother during her pregnancy. Be that as it may, over three decades of French research on this aspect indicates that this one point when needled (tonified) once or twice during the mother's pregnancy period, first at three months and then if possible at six months as well (although only once is adequate), does engender a healthier than normal infant with bright complexion, sound nighttime sleeping, cheerful during daytime, highly resistant to illness (rapidly recovering from any illnesses it does get), and just generally healthier in mind, body and spirit.

Ki-10: Locate with knee considerably bent. Especially good for male genital disorders and impotence. Also add "urinary dysfunctions and chronic leukorrhoea" to indications given in textbook for this point.

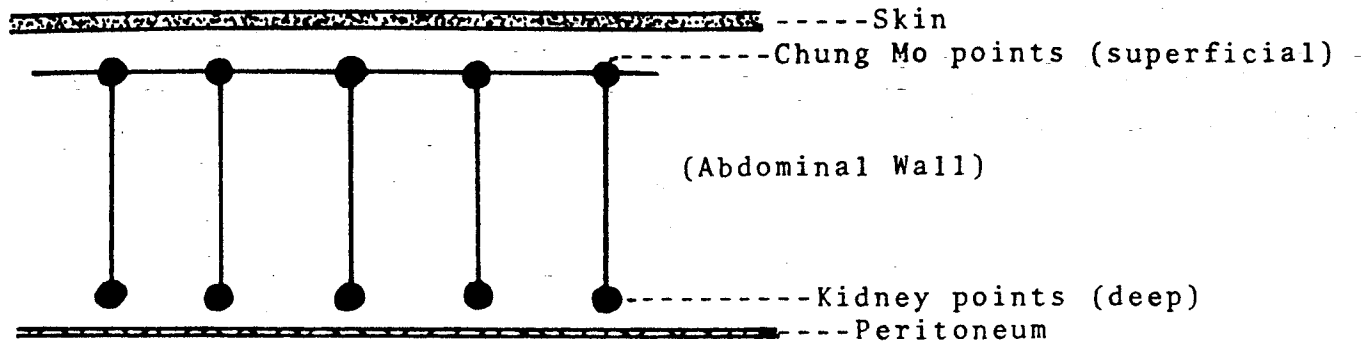
SEE China Cultural Corp. Acupuncture Charts #3 and #1 for the pathway of the Kidney meridian from Ki-10 to Ki-11, which is not shown in text.

Ki-11: THIS POINT IS CLASSICALLY FORBIDDEN TO NEEDLES. Delete all 'Puncture' information given in the textbook for this point and substitute the words "Moxa: 5 to 10 minutes". The meridian from this point to Ki-21 parallels the ventral midline (Ren or Conception Vessel) up the abdomen, at a distance of one-half to one pouce (depending on which pouce measurement is used, ie. one-eighth of the distance between the nipples, finger pouce, and on abdominal size, authority being followed, etc.) lateral from the midline on both sides. Best use one quarter of the distance between the midline and the nipple, which equals one pouce, and count on working slightly medial to that for most patients. Some authors erroneously place this meridian portion at up to two or three pouce lateral to the midline, which simply does not apply until above the twenty-first point. Underscore the word "impotence" in the textbook 'Indications' listed for this point and add "eye disorders, keratitis; frigidity; sterility; as well as hypo- and hyper-sexual excitation.

NOTES RE: Ki-11 to Ki-21 (inclusive)

Therapeutically, it is important that you know these eleven abdominal Kidney points are located relatively deep down in the abdomen (up to two pouce in some instances) and that they are NOT connected to each other directly. Their connection is over another identical

set of superficial acupuncture points (mostly around five Fen deep) right above them, which actually belong to the 'Chung Mo Vessel' [one of the Eight Ancestral meridians of which Co and Go are two others]. See diagram below.



The actual Kidney points from Ki-11 to Ki-21 (inclusive) then are very deep and do not connect together like the acupuncture points of other meridians do. Closer to the surface of the abdomen there is a portion of a different meridian which also follows these Kidney points, called the Chung Mo Vessel. This superficial Chung Mo Vessel has its own acupuncture points (at the same location as the Kidney ones) and each of its points is also connected to one of the deeper Kidney points. Because of this superficial-deep acupuncture point relationship the Chung Mo provides the real connection between the abdominal Kidney points, and also a pathway that the Kidney meridian energy can follow to complete its circuit. The Chung Mo Vessel will be discussed further in Lesson 25. In the meantime, if you want to find out more about the Chung Mo Vessel, your textbook refers to this Extra meridian as the 'Chong Mai (or Vital Channel)' on pages 56 and 60, and Fig. 22.

Ki-12: For purposes of locating Ki-12 to Ki-15, divide the distance between the center of umbilicus to the upper border of the pubic symphysis (Ren 2 or Co-2) into five divisions or pousse (cun), and use those divisions for the 'cun' measurements given in the textbook in their point locations. Remember that Ki-11 is on a level with that superior border of the pubic symphysis. See 'Table for Proportional Units' on page 93 of textbook and Fig. 29.

Ki-13: Add to list of 'Indications' given in textbook for this point the following: "Constipation; general weakness; genital disorders". Moxibustion of this point is said to influence the development of the uterus.

Ki-16: Located lateral to the center of the umbilicus. Remember too, that the lateral distance can vary from one-half pousse (cun) up to one-and-a-half pousse or more --- see notes under Ki-11, previous page.

Ki-17: To locate Ki-17 to Ki-21, divide the distance between the center of the umbilicus to the lower end of the body of the sternum (breast bone) at Conception point #16, into eight divisions or pousse (cun), and use those divisions for the 'cun' measurements given in the

textbook for their point locations. Remember that Ki-16 is on a level with the center of the umbilicus. See 'Table for Proportional Units' on page 93 of the textbook, and Fig. 29 thereof.

Ki-21: This point is located up to one pouce (cun or division) below the xiphoid process [near Co-15 or Ren 15], and of course lateral to it. Some authors place this point (and often Ki-20 as well) considerably more lateral than our description of this point, to the extent of locating it very close to the costal cartilage of the ribs at the approximate level of Co-14 (Ren 14). Add to the 'Indications' given in the textbook for this point the following: "Pernicious vomiting in pregnancy; air and sea sickness; and hiccup (the latter especially with Bl-43, Kao-Mang or Gaohuang). Some say this point is forbidden to moxibustion during pregnancy.

Ki-22: In a depression at the horizontal level of Go-16 (Ren 16).

Ki-23: It is best to avoid needling this point on females if possible.

Ki-24: In a depression at the horizontal level of Co-18 (Ren 18). Add the following to the list of 'Indications' given for this point in the textbook: "Nasal congestion; psychical (psychological) disturbances, ie. sadness, discontent (dissatisfaction), irritability". Tenderness on pressure at this point, especially on the left-hand side often indicates a dysfunction of the Gall Bladder. It is in relationship to this, from a traditional standpoint, that the above psychological situations are given.

Ki-25: In a depression at the horizontal level of Co-19 (Ren 19).

Ki-26: In a depression at the horizontal level of Co-20 (Ren 20). Add to the list of 'Indications' given for this point in the textbook the following: "Hoarseness (thus an important point for singers)".

Ki-27: At the horizontal level of Co-21 (Ren 21) in a depression below the clavicle (collar bone) near the sternum. This point sometimes becomes tender in pulmonary tuberculosis and bronchitis. It is one of the most important points for asthma. One of the indications for use of this point is in appropriate conditions that worsen due to cold and dampness. For psychological "weaknesses" and similar situations, use this bilateral point on the patient's left-hand side only.

NOTE: Almost all points of the Kidney meridian have some psychical (psychological) or psycho-physical indications and the guiding theme here seems to be a "lack of energy". In particular one finds such conditions as exhaustion, insomnia, anxiety, depression, agoraphobia (dread of being in or crossing open spaces), lack of resolve, asthma of psychological origin. Coupled along with this we often find 'congestion' in the lower extremities especially in the neighborhood of the ankles. It must also be pointed out that in the area of actual kidney diseases, acupuncture cannot claim many great laurels, for nephropathy offers some of the most difficult treatment problems in acupuncture, and therefore they are generally one of the least amenable types of disorders to acupuncture management.



## 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.

Ki-1 "Yung-Ch'uan" (Pouring Spring)

INDICATIONS: Unconsciousness, shock, sun stroke, etc; epilepsy; hysteria; dizziness and vertigo; cerebral hemorrhage; sore throat; vertex headache and pain; epistaxis; heart palpitations; jaundice; burning sensation on sole of foot & toes; psychological disorders; infantile convulsions.

NEEDLE: 3 to 8 Fen [Do not bleed]

MOXA: 3 to 12 minutes

CAUTION: Patient supine when needling point; fainting sometimes occurs; usually very painful to needling.

Ki-2 "Jen-Ku" (Blazing Valley)

INDICATIONS: Cystitis; diabetes; irregular menstruation; vulvar and vaginal pruritis (itching); spermatorrhea; female sterility; pharyngitis; rheumatism of lower extremities; acne; possible general metabolic influence.

NEEDLE: 5 Fen to 1 Pouce 3 Fen

MOXA 3 to 10 minutes

Ki-3 "T'ai-Hsi" (Great Brook)

INDICATIONS: Nephritis; cystitis; impotence; irregular menstruation; cough; asthma; toothache; paralysis of lower extremities; lumbago and lumbar neuralgia; neurasthenia and nervous "breakdown"; pain in sole of foot and ankle joint; angina pectoris; spasm of diaphragm; dyspnea.

NEEDLE: (1) 5 Fen to 1 Pouce 2 Fen [90] towards B1-60, or  
(2) 3 to 5 Fen [slightly towards inner malleolus]

MOXA: 2 to 10 minutes

## POINTS OF MAJOR &amp; SECONDARY THERAPEUTIC IMPORTANCE, CONTINUED ....

Ki-6 "Chao-Hai" (Shine to Sea)

INDICATIONS: Painful, irregular or disorders of menstruation; prolapse of uterus; psychological tonification point for female where menses involvement; hysteria and mental disturbances; insomnia; tonsillitis and sore throat; constipation; neurasthenia; hernia; epilepsy.

NEEDLE: 3 to 8 Fen

MOXA: 3 to 10 minutes

Ki-7 "Fu-Liu" (Repeating Stagnant)

INDICATIONS: Nephritis & general kidney disorders; edema; orchitis; myelitis; flatulence, tympanites and "rumblings" in stomach; paresis and paralysis of lower extremities; eye weakness; arterial hypertension; intermittent fevers; lum-bago; bleeding hemorrhoids; sweating and night sweating; diarrhea; gonorrhea.

NEEDLE: 3 Fen to 1 Pouce 3 Fen

MOXA: 5 to 15 minutes

Ki-27 "Shu-Fu" (Shu Prefecture)

INDICATIONS: Chest pain; cough; asthma; bronchitis; dyspnea; vomiting; headache; anxiety; psychological disorders.

NEEDLE: 3 to 8 Fen [45]

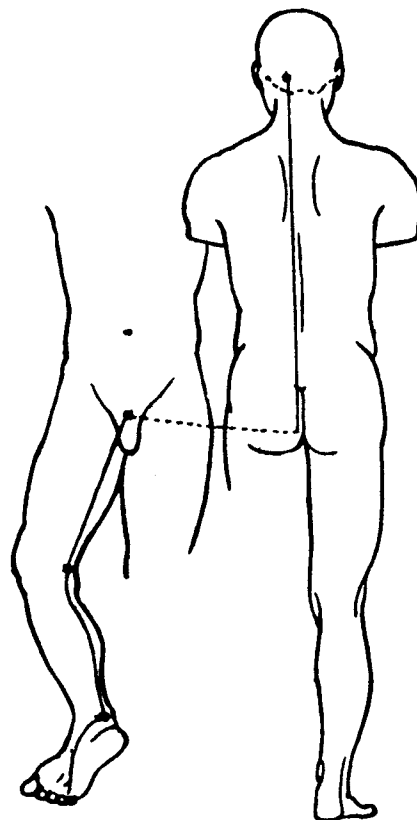
MOXA: 3 to 12 minutes

## THE TENDINO-MUSCULAR MERIDIAN OF THE KIDNEYS

- 1) This meridian starts under the "small" (last) toe, passes to the Ting point, traverses the arch of the foot to join the Tendino-muscular meridian of the Spleen up to the internal malleolus,
- 2) inserts into the heel,
- 3) immediately connects at first to the Tendino-muscular meridian of the Bladder then runs along the medial surface of the leg up to the internal tuberosity of the tibia,
- 4) runs parallel to the Tendino-muscular meridian of the Spleen and reaches the groin,
- 5) converges upon the genitals and penetrates into the abdomen,
- 6) one other vessel leaves from the genitals around the point Co-2 (Ch'ü-Ku), encircles the hips, outlines the lower buttocks and traverses the crease of the buttocks to the opposite side from where it begins to climb closely the length of the spine up to the nape of the neck to around Bl-10 (T'ien-Chu),
- 7) it then inserts into the occiput and unites with the Tendino-muscular meridian of the Bladder. (SEE DIAGRAM BELOW)

Troubles of This Meridian:

- Contracture of the plantar muscles.
- All of its course and the points of insertion are contracted and painful.
- The troubles are essentially characterized by generalized contractures:
  - a) When the troubles are Yin, that is to say at the interior of the abdomen, the patient has a sensation of heaviness at the anterior part of the thorax and abdomen, and they cannot bend backward.
  - b) When the troubles are Yang, that is to say at the exterior part of the body, the patient has a sensation of heaviness at the lumbar region and they cannot bend forward.



## THE TRANSVERSAL LO VESSEL OF THE KIDNEYS

This vessel starts at the Lo point of the Kidney meridian, Ki-4 (Ta-Chung) and traverses the foot to reach the Iunn point of the Bladder meridian, Bl-64 (Ching-Ka).

## THE LONGITUDINAL LO VESSEL OF THE KIDNEYS

This vessel begins at the Lo point of the Kidney meridian, Ki-4 (Ta-Chung), circles the heel to join the meridian of the Bladder. From the point Ki-4, one other vessel leaves which follows the principal meridian of the Kidneys, reaches below the Envelope of the Heart, penetrates into the chest, and passes to the middle of the vertebral column around the point Go-11 (Shen-Tao).

Symptomatology and Treatment:

**Fullness:** Inability to have a bowel movement or pass urine; stimulate the corresponding Lo point, Ki-4.

**Emptiness:** Pain at the renal region; stimulate the opposite Lo point, Bl-58 (Fei-Yang) and the corresponding Inn point, Ki-3 (T'ai-Hsi).

## THE DISTINCT MERIDIAN OF THE KIDNEYS

- 1) The principal meridian of the Kidneys reaches the knee at the point Ki-10 (Yin-Ku). A vessel is directed towards the point Bl-40 (Wei-Chung) where it joins the meridian of the Bladder,
- 2) from there it climbs up to the kidneys (organ),
- 3) at the level of the second lumbar vertebra, it departs to join the Ancestral meridian Tai Mo (the 'Belt' meridian),
- 4) encircling the waist, it departs to ascend the anterior portion of the abdomen close to the midline going directly up to the base of the tongue (via the point Co-23),
- 5) it comes out again at the nape of the neck in order to be united a second time to the meridian of the Bladder at the point Bl-10 (T'ien-Chu).

(h.) *The Kidney Channel of Foot-Shaoyin (P-47)*

*Course:* This channel starts from the inferior aspect of the small toe, running towards the sole (Yongquan, K. 1). Emerging from the inferior aspect of the tuberosity of the navicular bone and running behind the medial malleolus, it enters the heel. Then it ascends along the medial side of the leg to the medial side of the popliteal fossa, advancing further along the medio-posterior aspect of the thigh towards the vertebral column (Changqiang, Du 1) to enter its pertaining organ, the kidney, to communicate with the urinary bladder. Re-emerging from the kidney, running straight upward and passing through the liver and diaphragm it enters the lung, runs along the throat and terminates at the root of the tongue. (See Fig. 15.)

A branch springs from the lung, joins the heart, and flows into the chest to connect with the Pericardium Channel of Hand-Jueyin.

*Pathological Symptoms:* Hemoptysis, dyspnea, dryness of tongue, sore throat, lumbago, edema, constipation, diarrhea, motor impairment and muscular atrophy of the lower extremities, increase in temperature of the sole of the foot and pain along the course of this channel.

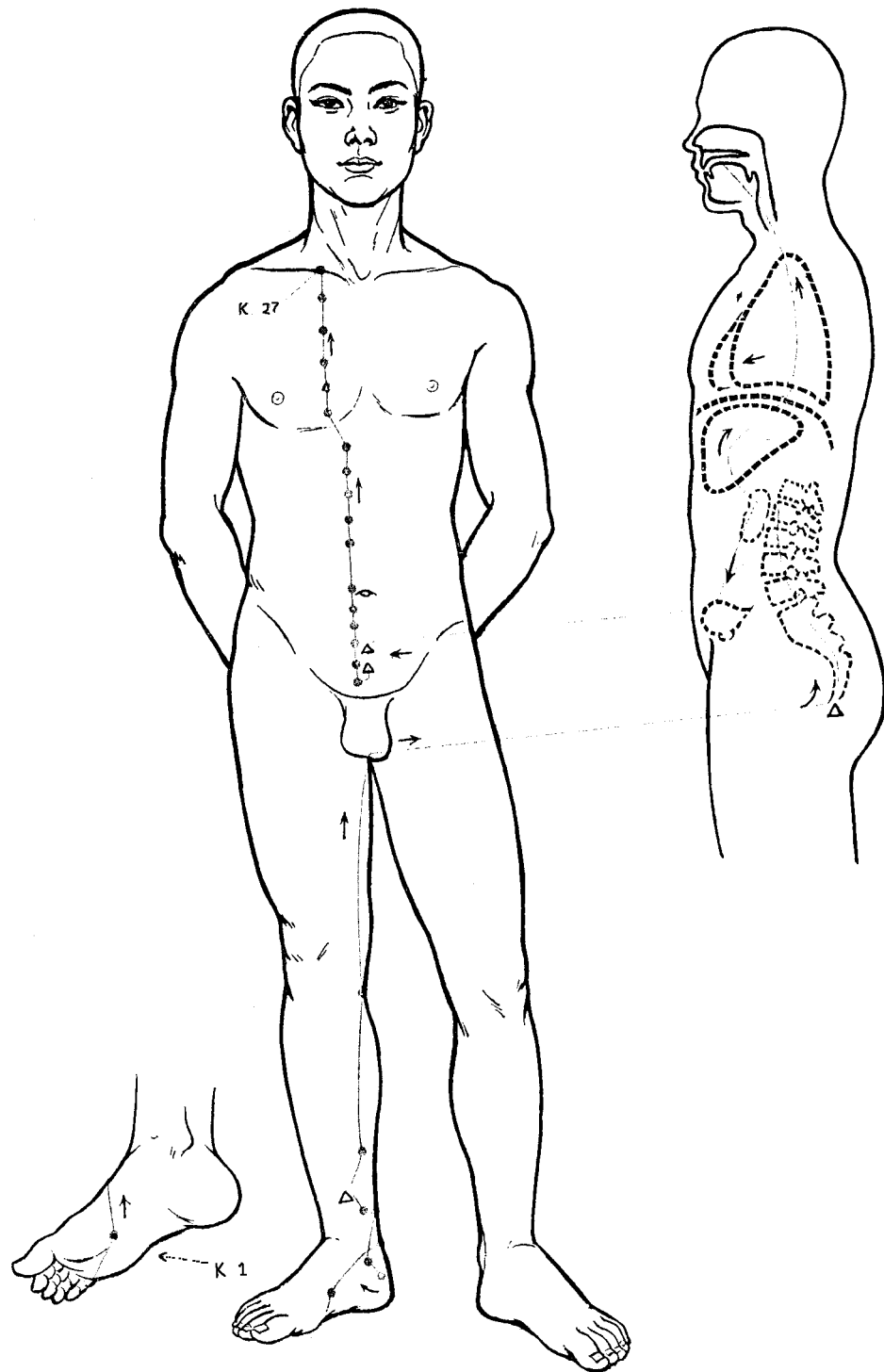


Fig. 15. The Kidney Channel of Foot-Shaoyin

(8) THE KIDNEY CHANNEL OF FOOT-SHAOYIN

— 27 Points —

1. Yongquan (K. 1):

Location: In the depression at the junction of anterior and middle third of the sole in a depression between the 2nd and 3rd metatarso-phalangeal joint when the toes are plantar flexed. (See Fig. 77.)

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

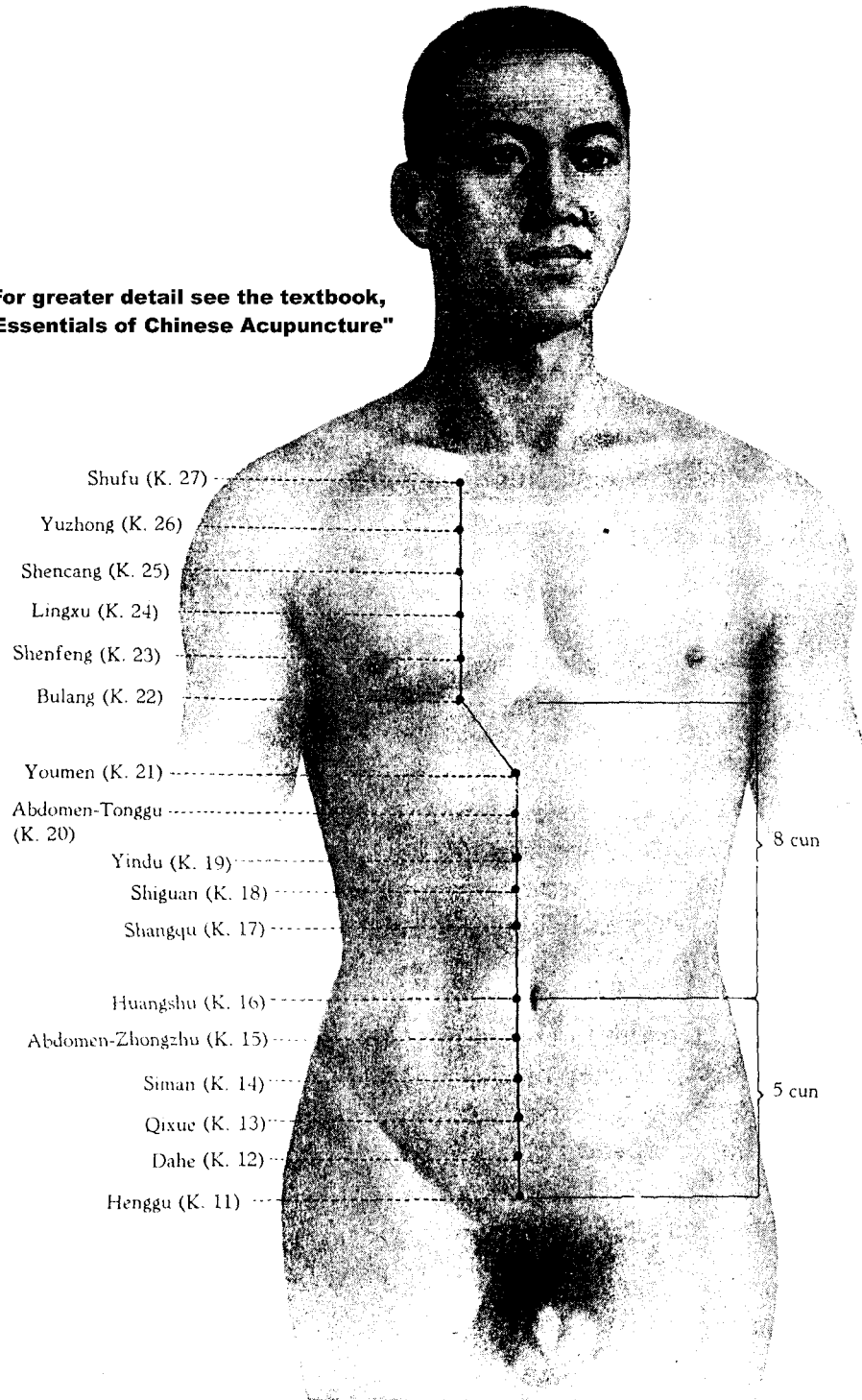


Fig. 76a. The Kidney Channel of Foot-Shaoyin

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

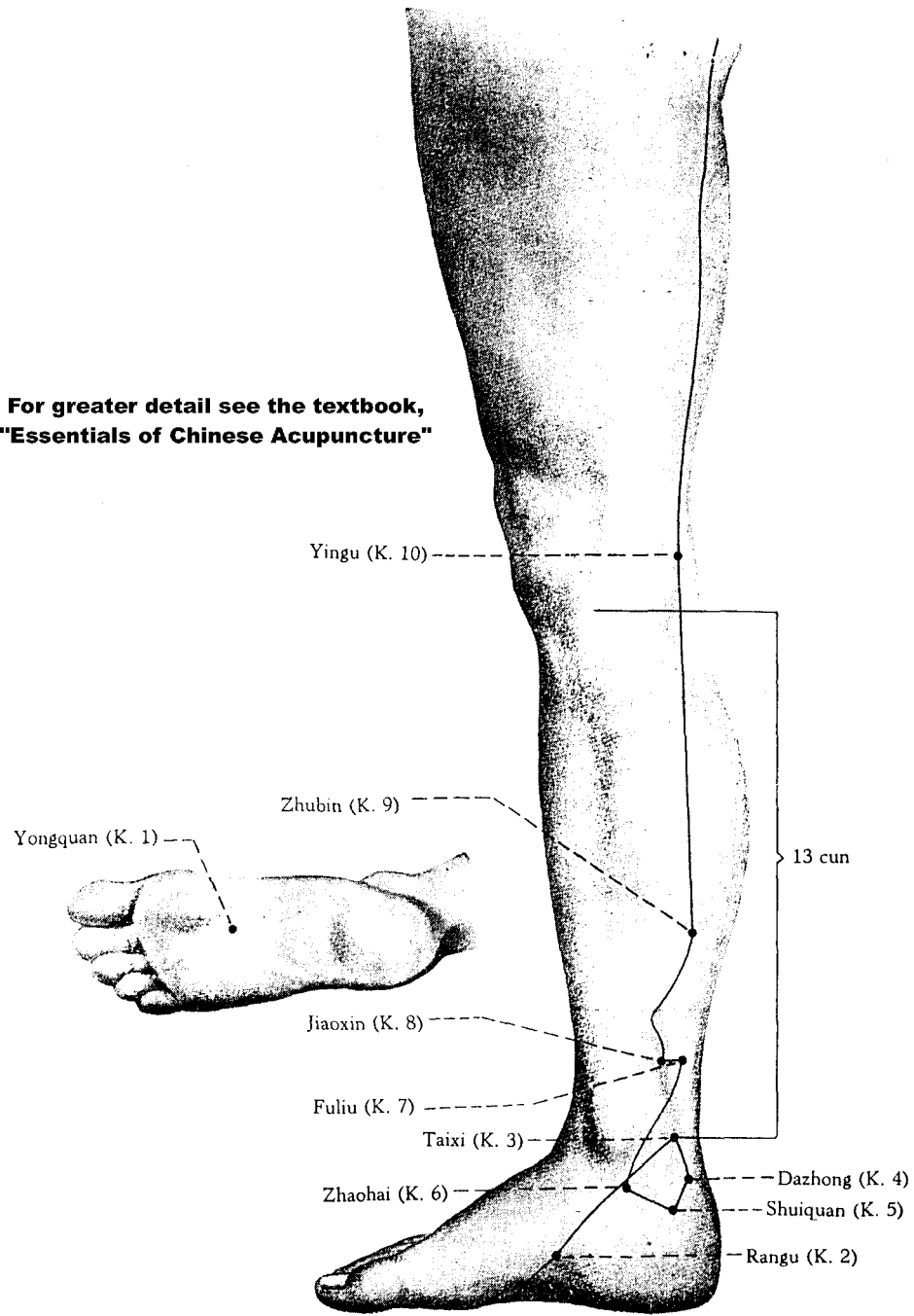


Fig. 76b. The Kidney Channel of Foot-Shaoyin

Indications: Coma, shock, mania, hysteria, epilepsy, infantile convulsion, unchecked nausea and vomiting, sore throat, dysuresis, also vertical headache.

Puncture: Perpendicularly 0.3 - 0.5 inch.

## 2. Rangu (K. 2):

Location: Anterior and inferior to the medial malleolus, in a depression at the anterior and inferior border of the navicular bone.

Indications: Cystitis, irregular menstruation, diabetes, sore throat.

Puncture: Perpendicularly 0.5 - 1.0 inch.

## 3. Taixi (K. 3):

Location: Midway between the tip of medial malleolus and tendo calcaneus. (See Fig. 78.)

Indications: Nephritis, cystitis, enuresis, irregular menstruation, sore throat, toothache, nocturnal emission, impotence, paralysis of lower extremities.

Puncture: (a) Perpendicularly 0.5-1.0 inch towards Kunlun (U.B. 60). (b) 0.3-0.5 inch slightly towards medial malleolus.

## 4. Dazhong (K. 4):

Location: Inferior and anterior to medial malleolus, in the depression medial to the attachment to the tendo calcaneus, 0.5 cun slightly posteriorly below Taixi (K. 3).

Indications: Neurasthenia, hysteria, hemoptysis, asthma, dysuresis, constipation, painful heel.

Puncture: Perpendicularly 0.3-0.5 inch.

## 5. Shuiquan (K. 5):

1 cun inferior to Taixi (K. 3), in the depression anterior and superior to the medial side of the tubercle of the calcaneum. (See Fig. 78.)

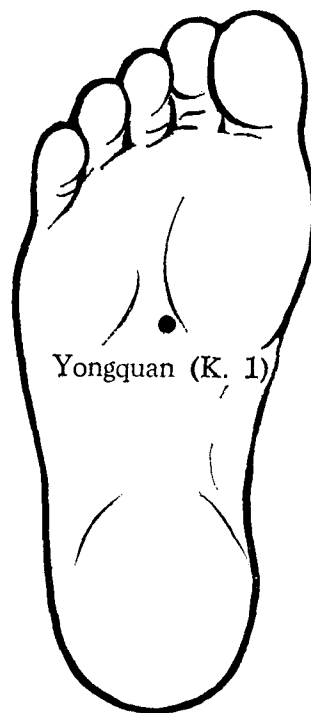


Fig. 77



Indications: Irregular menstruation, prolapse of the uterus, dysuresis, myopia.

Puncture: Perpendicularly 0.3-0.5 inch.

**6. Zhaohai (K. 6):**

Location: In the depression 1 cun directly below the inferior border of the medial malleolus. (See Fig. 78.)

Indications: Irregular menstruation, prolapse of uterus, tonsillitis, neurasthenia, epilepsy.

Puncture: Perpendicularly 0.3-0.5 inch.

**7. Fuliu (K. 7):**

Location: 2 cun above Taixi (K. 3), on the anterior border of the tendo calcaneus. (See Fig. 78.)

Indications: Nephritis, orchitis, night sweating, diarrhea, lumbago, paralysis of lower extremities.

Puncture: Perpendicularly 0.5-1.0 inch.

**8. Jiaoxin (K. 8):**

Location: 2 cun above Taixi (K. 3), 0.5 cun anterior to Fuliu (K. 7), posterior to the medial border of the tibia.

Indications: Irregular menstruation, functional uterine bleeding, diarrhea, constipation, pain and swelling of the testis.

Puncture: Perpendicularly 0.5-1.0 inch.

**9. Zhubin (K. 9):**

Location: 5 cun above Taixi (K. 3), about 1 cun posterior to the medial border of the tibia.

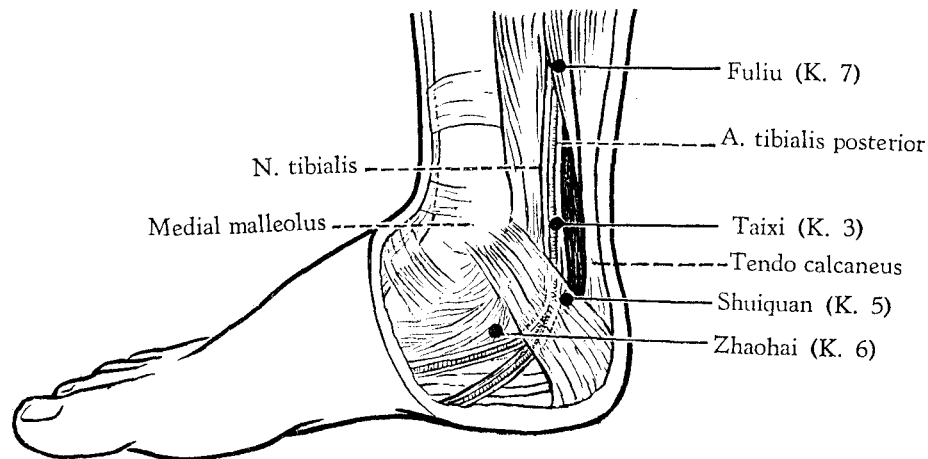


Fig. 78

Indications: Spasm of m. gastrocnemius, epilepsy, mental disorder.  
Puncture: Perpendicularly 1.0-1.5 inches.

**10. Yingu (K. 10):**

Location: At the medial end of the popliteal transverse crease, between the tendons of m. semitendinosus and m. semimembranosus.

Indications: Knee pain, lower abdominal pain, disorders of the genital system.

Puncture: Perpendicularly 0.8-1.0 inch.

**11. Henggu (K. 11):**

Location: In the lower abdomen, on the superior border of the pubic symphysis, 0.5 cun lateral to Qugu (Ren 2).

Indications: Dysuresis, enuresis, hernia, spermatorrhea, impotence.

Puncture: Perpendicularly 0.5-1.0 inch.

**12. Dahe (K. 12):**

Location: 1 cun above Henggu (K.11), 0.5 cun lateral to Zhongji (Ren 3).

Indications: Pain in the external genitalia, spermatorrhea, excessive leukorrhea.

Puncture: Perpendicularly 0.5-1.0 inch.

**13. Qixue (K. 13):**

Location: 2 cun above Henggu (K.11), 0.5 cun lateral to Guanyuan (Ren 4).

Indications: Irregular menstruation, diarrhea.

Puncture: Perpendicularly 0.5-1.0 inch.

**14. Siman (K. 14):**

Location: 3 cun above Henggu (K.11), 0.5 cun lateral to Shimen (Ren 5).

Indications: Uterine bleeding, postpartum abdominal pain, diarrhea.

Puncture: Perpendicularly 0.5-1.0 inch.

**15. Abdomen-Zhongzhu (K. 15):**

Location: 1 cun below the umbilicus, 0.5 cun lateral to Abdomen-Yinjiao (Ren 7).

Indications: Irregular menstruation, lower abdominal pain, constipation.

Puncture: Perpendicularly 0.5-1.0 inch.

**16. Huangshu (K. 16):**

Location: 0.5 cun lateral to umbilicus.

Indications: Jaundice, gastralgia, hernia, constipation, menorrhagia.  
Puncture: Perpendicularly 0.5-1.0 inch.

**17. Shangqu (K. 17):**

Location: 2 cun above Huangshu (K. 16), 0.5 cun lateral to Xiawan (Ren 10).

Indications: Gastralgia, abdominal pain, anorexia, hernia.

Puncture: Perpendicularly 0.5-1.0 inch.

**18. Shiguan (K. 18):**

Location: 3 cun above Huangshu (K. 16), 0.5 cun lateral to Jianli (Ren 11).

Indications: Gastralgia, hiccough, constipation, postpartum abdominal pain.

Puncture: Perpendicularly 0.5-1.0 inch.

**19. Yindu (K. 19):**

Location: 4 cun above Huangshu (K. 16), 0.5 cun lateral to Zhongwan (Ren 12).

Indications: Borborygmus, abdominal distention, abdominal pain.

Puncture: Perpendicularly 0.5-1.0 inch.

**20. Abdomen-Tonggu (K. 20):**

Location: 5 cun above Huangshu (K. 16), 0.5 cun lateral to Shangwan (Ren 13).

Indications: Vomiting, diarrhea, abdominal distention, abdominal pain.

Puncture: Perpendicularly 0.5-1.0 inch.

**21. Youmen (K. 21):**

Location: 6 cun above Huangshu (K. 16), 0.5 cun lateral to Jujue (Ren 14).

Indications: Thoracalgia, belching, vomiting, diarrhea.

Puncture: Perpendicularly 0.5-1.0 inch.

**22. Bulang (K. 22):**

Location: In the 5th intercostal space, 2 cun lateral to the Ren Channel.

Indications: Intercostal neuralgia, pleuritis, bronchitis.

Puncture: Obliquely 0.3-0.8 inch.

**23. Shenfeng (K. 23):**

Location: In the 4th intercostal space, 2 cun lateral to Shanzhong (Ren 17).

Indications: Intercostal neuralgia, pleuritis, bronchitis, mastitis.  
Puncture: Obliquely 0.3-0.8 inch.

**24. Lingxu (K. 24):**

Location: In the 3rd intercostal space, 2 cun lateral to the Ren Channel midway between the sternal and mammillary lines.

Indications: Pain in chest and costal region, cough, vomiting, mastitis.

Puncture: Obliquely 0.3-0.8 inch.

**25. Shencang (K. 25):**

Location: In the 2nd intercostal space, 2 cun lateral to the Ren Channel, midway between the sternal and mammillary lines.

Indications: Cough, vomiting, intercostal neuralgia.

Puncture: Obliquely 0.3-0.8 inch.

**26. Yuzhong (K. 26):**

Location: In the 1st intercostal space, 2 cun lateral to the Ren Channel, midway between the sternal and mammillary lines.

Indications: Cough, chest pain, vomiting.

Puncture: Obliquely 0.3-0.8 inch.

**27. Shufu (K. 27):**

Location: In the depression between the 1st rib and the lower border of the clavicle, 2 cun lateral to the Ren Channel.

Indications: Chest pain, cough, asthma, vomiting.

Puncture: Obliquely 0.3-0.8 inch.