



Eseg/Ezek 33:3-6

Sentinel

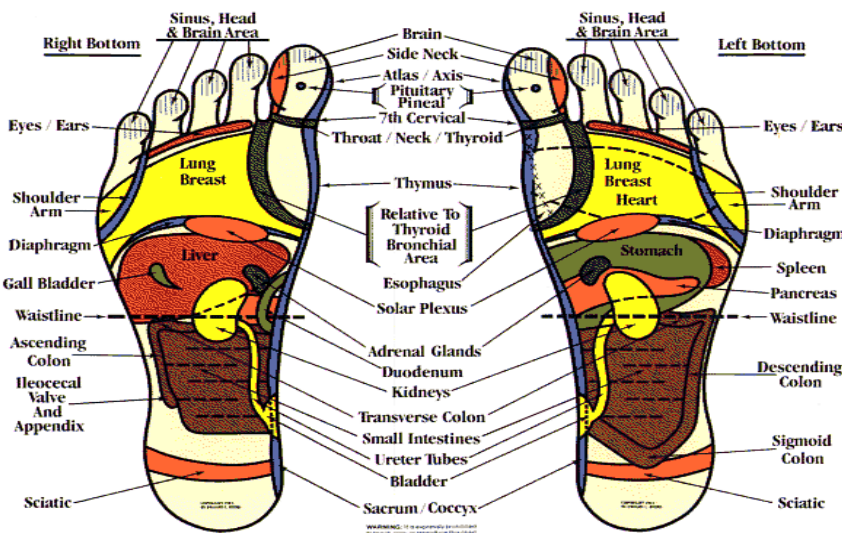
Email:kies_ciec@telkomsa.net

Website: kies_ciec@gksa.org.za/kies

3rd Qtr 2004

CAN REFLEXOLOGY CURE ILLNESS?

Stephen Barrett M.D.



Reflexology, also called zone therapy, is based on the notion that each body part is represented on the hands and feet and that pressing on specific areas on the hands or feet can have therapeutic effects in other parts of the body.

Most proponents claim that (a) the body is divided into 10 zones that begin or end in the hands and feet; (b) each organ or part of the body is represented on the hands and feet; (c) the practitioner can diagnose abnormalities by feeling the hands or feet; and (d) massaging or pressing each area can stimulate the flow of energy, blood, nutrients, and nerve impulses to the corresponding body zone and thereby relieve ailments in that zone. The pathways postulated by reflexologists have not been anatomically demonstrated; and it is safe to assume that they do

not exist.

Most reflexologists claim that their procedures can relieve stress, which is probably correct with respect to everyday stress. However, many reflexologists describe stress in terms that do not correspond to scientific knowledge.

Many proponents claim that foot reflexology can cleanse the body of toxins, increase circulation, assist in weight loss, and improve the health of organs throughout the body. Others have reported success in treating earaches, anemia, bedwetting, bronchitis, convulsions in an infant, hemorrhoids, hiccups, deafness, hair loss, emphysema, prostate trouble, heart disease, overactive thyroid gland, kidney stones, liver trouble, rectal prolapse, undescended testicles, intestinal paralysis, cataracts, and many

other health problems. Some claim to “balance energy and enhance healing elsewhere in the body.” There is no scientific support for any of these assertions.

Some reflexologists who deny that they diagnose or treat disease claim that the majority of health problems are stress-related and that they can help people by relieving the “stress” associated with various diseases or body organs. This type of double-talk is similar to chiropractic claims that “subluxations” lower resistance to disease and that “adjusting” the spine to correct subluxations will improve health. All ten of the books I have inspected mention scores of health problems that reflexology has supposedly helped.

During the 1990s, I observed at least seven foot reflexologists at work during health expositions. In most cases, the process appeared to be an ordinary prolonged foot massage with little communication between practitioner and client.

On one occasion, I underwent a 15-minute session in which the practitioner felt my foot for diagnostic purposes and then massaged it for “therapeutic” purposes. During the previous year, I had had severe shoulder pain caused by an inflamed tendon that was rubbing against a bony surface inside my left shoulder joint. Medical evaluation had determined that the appropriate treatment was arthroscopic surgery in which a drill is used to shave a bony ridge that was impinging on the tendon. The reflexologist claimed to detect the shoulder problem by feeling my left foot and

Continued on page 6



Sentinel is die lyfblad van **KIES** en word kwartaalliks gepubliseer om die gemeenskap in te lig en te waarsku teen misleiding, die ware Evangelie te verkondig en die Kerk bewus te maak van die gevare wat die dwaalleer van die kultes inhou. *Sentinel* is the mouthpiece of **KIES** and is published quarterly to inform and warn the community against deception, to spread the true Gospel and to alert the Church against the heresy of the cults.

'n Interkerklike Evangelisasie en Uitreik-aksie/An Interdenominational Evangelization Outreach

Skryfaanhalings, tensy anders vermeld, is uit die 1983 Afrikaanse Vertaling/Scripture quotations, unless stated otherwise, are from the NASB.

KIES funksioneer as 'n arm van die Ned Geref Gemeente Edleen en is verantwoordelik vir eie finansiering en is dus ten volle afhanklik van die vrywillige donasies van *Sentinel* se lesers en ander ondersteuners

Disclaimer

The opinions or views expressed or implied in this publication are those of the relevant author(s) and, unless clearly stated to the contrary, do not constitute the opinion or view of **KIES/CIEC**, its controlling body, management or contributors.

Redaksioneel/Editorial

NEW AGE, NEW AGE!!!!

This issue almost appear to be a New Age newsletter as it addresses issues like Reflexology, Reiki and Acupuncture. In the previous issue we published articles about Homeopathy and as suggested in the editorial of that issue we continue with some of the other popular and better known New Age holistic health practices. We trust that you will find these informative. The article on page 7 is from a pro-reflexology website. There are numerous sites that promote these and other New Age techniques as well as speak against them on the Internet if you would like to do your own research.

We have posted the last issue to three homeopaths in the Kempton Park area, but so far have not had any response from them, except for one who phoned me on Friday (5 Nov) to briefly discuss the issue. He requested me to obtain a copy of an article by a Dr Tomlinson that addresses this issue from a medical perspective. I will do so and when received will publish it in the first issue.

If anyone wants to reply to the letter of Jean-Pierre Koster you are more than welcome. Your response will gladly be published.

LOOKING AHEAD

We have now dealt some time with all kinds of heresy and deception and will in the next issues publish more positive news, i.e., deal with Biblical theological issues.

I have been requested to again pub-

lish an article on the doctrine of the Trinity of God as this appeared some years ago. Being one of the central doctrines and probably one of the most attacked of the Christian faith, the request is not in vain.

Time is pressing though and I am not certain whether the next issue, and last issue for 2004, will reach you before year end, but we are going to give it all we got. In the meantime we will be going away on holiday for two weeks starting Friday 12 November. This is a much needed time for rest which both my wife and I are in need of.

CURRENT ISSUES

The issue of homosexuality and their preferred word "gay" remains in the news, and will remain so and will become more pressing as time moves on. The national Synod of the NGK recently made some decisions on this issue, which the media appears to have distorted beyond the real decisions that were taken. The various churches are all confronted by this issue and in time will all have to clearly state where they stand on this.

I fear that the Church's slackness in dealing clearly with other sins, like the issue of habitating prior to marriage, poor church attendance and no involvement in the affairs of a congregation by members, alcoholism and even turning a blind eye to Freemasonry, to name but a few, has set the climate for turning a blind eye to this issue as well. The exception the Church has made of this issue is in essence what gays are accusing the Church of.

Editors:

Japie Grobler (*Sentinel*).
Dr Henk Stoker, Rev Johan Botha
& Rev Vernon Bekker (Theological)

Address: P O Box 8009

EDLEEN
South Africa
1625

Tel/Fax: +27-11-394-3080

E-mail: kies_ciec@telkomsa.net

Website: <http://www.gksa.org.za/kies>

Street Add: Ned Geref Kerk-Edleen
cnr. Amarillo & Ilex Rds
EDLEEN

Kempton Park
Donations: **KIES/CIEC**

Standard Bank
Midrand
Code 1155

Ac No: 20-247-350-3

Make cheques out to: KIES

Advies oor Kultes/Advice about Cults:

Algemeen/General

Dr Henk Stoker* Tel: 012-460-7525

E-mail: stoker@mweb.co.za

Japie Grobler* 011-394-3080

E-mail: kies_ciec@telkomsa.net

Israelvisie/Israeldwaling

Louis Kruger Tel: 082-336-2597

Jehova se Getuies/Jehovah's Witnesses

Christine Haarhoff Tel: 012-661-8542

E-mail: ngkrhk@mweb.co.za

Japie Grobler* (Sien bo/See above)

Dr Henk Stoker* (Sien bo/See above)

Nuwe/Ou Apostels/New Old Apostles

Japie Grobler* Dr Henk Stoker*

Kittie Pienaar Tel: 011-679-4898

E-mail: pinekit@mweb.co.za

Psigiese Beheer/Mind Control

Dr Rienie Venter Tel: 012-661-8511

E-mail: ventema@unisa.ac.za

Uitleidingsberading/Exit Counselling

Dr Stephan Pretorius*

Tel: 012-542-4172

E-mail: pretosp@unisa.ac.za

New Age & Onderwys

Sarel vd Merwe Tel: 011-472-6964

E-mail: sarelwtl@telkomsa.net

Satanism/Occultism

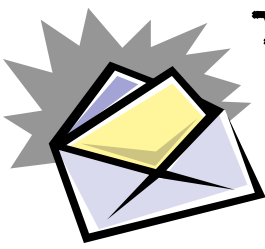
Ado Krige Tel: 083-226-2319

E-mail: ado@intekom.co.za

Vrymesselary/Freemasonry

Japie Grobler*

* Indicates Board Members



Briewe/Letters

Bestaan Sentinel nog?

Bestaan die *Sentinel* nog? Ek sal graag die briewe wil ontvang as dit nog bestaan en laat weet my wat dit alles behels en wat dit kos?

Margereth Botes
Pietersburg

Sentinel word nog steeds gepubliseer en ons het nog nie nodig gehad om 'n inskrywingsfooi te vra nie. Danksy die donasies van ons lesers is dit nog moontlik om dit gratis te publiseer. Jou naam is weer op die poslys geplaas en enkele vorige uitgawes is aan jou gepos.

Dit is van tyd tot tyd nodig om die poslys op te dateer en dan stuur ons hernuwingskoepons saam met 'n uitgawe uit. Indien lesers nalaat om dit te voltooi en terug te pos dan neem ons aan of die adres het verander, of hulle wil dit nie meer ontvang nie. Die naam word dan van die poslys geskrap. Dit het moontlik voorheen met jou gebeur.

Ons vertrou jy geniet *Sentinel* nou weer en vind dit nog steeds insiggewend.

Red

Skande vir God!

Weet jy - ek het nou net jou artikel gelees, <http://www.gksa.co.za/kies/Kulte%20inligting/getuienis.htm>, en ek moet jou sê, jy is 'n skande vir God, jy loop en slegpraat van 'n kerk, maak nie saak wat hulle doen nie, op die ou end dien hulle nog steeds vir God, dink jy jy gaan jou saligheid kry, sekerlik nie, want aan wie is dit gegee om te oordeel ???

Ek lees nêrens in die skrifte dat God het die oordeel aan sy seun "EN Mercia van Rooyen" gegee nie.

Pasop wie en wat jy oordeel, lyk my jy was dom om van kerke te wissel, want ewe skielik kan jy vingers wys en sê wie is reg en wie nie, ek weet vir 'n feit die OAK doen dit nie, as jy dink hulle doen, moet jy jou feite gaan hersien.

Al wie nog vingers wys in die skrif is LUCIFER (die duiwel, SATAN) ??? dit laat my wonder ???

Het jy geweet hulle het vir Christus ook gesê hy is 'n sekte - dat hy verkeerd is !!!

Ek sien ook jy skryf dat die OAK glo dat hulle net deur die priester met God kan praat. Antwoord my gou een ding - in watter

OAK was jy - want ek het nog nooit in my lewe daarvan gehoor nie - ek weet wel van die volgende - "Ken jou priester in als wat jy doen sodat hy jou met 'n ope verstand kan seën, en hou in die oggende en aande gebed in die Drie-eenheid" : ek het nog nooit gesien die priester staan by terwyl ek in die oggend of in die aand bid nie.

Kan ek jou iets persoonlik vra, HOEVEEL KEER HET JY JOU PRIESTER GAAN SIEN EN GEBRUIK VIR WAT HY EINTLIK DAAR IS, HOEVEEL KEER HET JY BY DIE PRIESTER GAAN BID VIR 'N BETER INSIG IN DIE BYBEL, DAT DIE PROFEET IN JOU STERKER WORD ENS.

Seker nooit nie, altyd net vir natuurlike goed. Huweliksberader, prokureur, dokter ens, maar nooit vir 'n priester nie.

En ook, ons glo nie net slegs deur die verseëling en doop kry jy jou saligheid nie, waar leer jy dit ???

Nog net twee goed.

Suster - jy het klaar die merkteken van die Lam ontvang - wat gaan jy doen as jy uit die vleis uit gaan, en jy kom agter dat die OAK altyd reg was, onthou - die skrifte sê "hy wat eens die weg geloop het en dit gelos het, vir hom is daar nie terugkeer nie, daar is nog steeds kans om jou priester te gaan sien, jou vrae te vra ens. EN AS JY DAN OORTUIG IS dat die OAK 'n sekte is, dan wens ek jou sterkte toe.

Suster - ek kan nie verduidelik hoekom jy soos 'n hond hanteer was in die gemeente waar jy was nie, maar ek kan jou een iets vra - as 'n bekommerde (geestelike) familielid, keer terug, en hou op om vir God in sy gesig te vat met sulke artikels, Hy gaan jou aarde vir jou hard skud.

En laastens, ek was in die kerk gebore, en het groot geword in die kerk, ek het toe 'n rebelse tiener geword en begin soek vir iets anders, ek het baie gekry, en een dag toe ek sit en die bybel lees, toe kom ek op iets interessant af, wat my so hard geskud het, en my laat besef het ek is soos 'n dier. Ek gaan jou dieselfde vraag vra as wat ek myself gevra het toe ek dit lees. "Hoe redeneer die geloof waarin ek my nou bevind - natuurlik of geestelik en my antwoord was "natuurlik."

Toe lees ek Judas vers 10 (het nie hoofstukke nie, net verse)

Ou Vertaling: Maar hierdie mense belaster alles wat hulle nie ken nie; en alles wat hulle, soos die redelose diere, op natuurlike wyse verstaan, daardeur gaan hulle te gronde.

King James English Bible
But these speak evil of those things which they know not: but what they know naturally, as brute beasts, in those things they corrupt themselves.

Hoe redeneer jou geloof? Ek kraak geen gelowe of kerke af nie, want almal dien tog

vir God, maar ek kan getuig dat dit wat ek het, geen ander kan vervang nie, en dit is jammer dat geen van dit oor jou pad gekom het nie, anders sou jy nog steeds orrel gespeel het, in jou nuwe gemeente.

Jammer as ek die brief kras begin het, maar ek is 'n baie sterk apostolie, en jy was reg, dit het bitter baie gevat om my opinie te verander, maar dit het verander, tot een dag toe ek die bybel sit en lees, ek hoop en bid dat hierdie brief van my van nut was.

(PS - ek lewe soos Apostel Paulus geskrywe het in Gal 2:20 "Ek is met Christus gekruisig, en ek leef nie meer nie, maar Christus leef in my. En wat ek nou in die vlees lewe, leef ek deur die geloof in die Seun van God wat my liefgehad het en Homself vir my oorgegee het."

So ek gaan getuig nie net twee aande in 'n week nie, maar elke dag van my lewe, ek gaan net kerk toe elke aand omdat God my vra vir 'n tiende van als.

Skryf terug asseblief !!!

Jean-Pierre Koster

(Per E-pos ontvang in reaksie op die inligting oor die OAK wat op *KIES* se webwerf verskyn, met spesifieke verwysing na Mercia van Rooyen, 'n ex-lidmaat van die OAK se getuienis wat op die webwerf geplaas is.)

Jy vra aan wie is dit gegee om te oordeel, maar wat doen jy anders in die openingsparagrafe van jou brief?

Waarom maak jy geen melding van die briewe van my en Kittie wat ook op die webwerf verskyn en baie duidelik antwoorde gee op die verweer en redenasies in hierdie brief van jou? Indien jy dit dalk nie raak gesien het nie, raai ek jou aan om daarna ook te kyk.

Mercia het jou brief aan my ge-epos en versoek dat ek jou moet antwoord, want sê sy, sy het nie krag meer vir julle nie. My reaksie is dus kort en bondig aangesien die inligting op die webwerf wat blykbaar deur jou geïgnoreer was die meeste, in dien nie al die besware en redenasies wat jy aanvoer, aanspreek.

Ek moet egter een punt in jou brief aanspreek. Die deel (vers 10) in Judas waarna jy verwys. Die konteks, wat jy ignoreer, is duidelik, dit gaan oor vals leraars (wat dink en optree soos in vers 10) wat die gemeentes (die Kerk) insluip (vers 4) en die gedagtes van mense besoedel.

Dit is juis waarteen ons waarsku en wanneer mens aan die Skrif meet wat die OAK leer dan is dit duidelik dat hulle die Skrif verdraai tot eie gewin en mense so mislei. (dit is ook duidelik so in jou brief.) Ek verwys jou weer na ons skrywes op die webwerf.

Red

REIKI

ELIZABETH FRY

DEFINITION

Reiki is a holistic alternative therapy based on Eastern concepts of energy flow and the seven chakras (energy centers) in the human body. Reiki was formulated by a Japanese teacher, Mikao Usui, around 1890, but incorporates meditation techniques, beliefs, and symbols that are considerably older. It is distinctive among alternative therapies in its emphasis on self-healing, its five spiritual principles, and its accreditation of healers through a system of initiation.

PURPOSE

The purpose of treatment is the healing of emotional and spiritual, as well as physical, pain through the transmission of universal life energy, called *ki* in Japanese. It is believed that *ki* flows throughout the universe, but that Reiki connects humans in a more direct way to the universal source. Reiki is used for the healing of animals as well as people.

DESCRIPTION

Basic treatment

Although Reiki involves human touch, it is not massage therapy. The patient lies on a table fully clothed except for shoes while the practitioner places her or his hands over the parts of the body and the chakras in sequence. The hands are held palms downward with the fingers and thumbs extended. If the person is in pain or cannot turn over, the practitioner may touch only the affected part(s). Silence or music appropriate for meditation is considered essential to the treatment.

SELF-HEALING

Reiki healers practice daily self-healing, in which they place their hands in traditional positions on their own bodies.

GROUP AND DISTANCE HEALING

In group healing, two or more practitioners place their hands simultaneously on the patient's body. Distance or absentee healing involves visualizing the patient, his or her illness, and the Reiki symbols.

PREPARATION

Reiki healers are initiated into three levels of practice through attunements, which are ceremonies in which teachers transmit the hand positions and sacred symbols. Reiki I healers learn the basic hand positions and can practice direct healing on others. Reiki II healers are taught the symbols that empower them to do distance or absentee healing. In Reiki III the healer makes a commitment to become a master teacher.

Although Reiki is not a religion, healers affirm five spiritual principles attributed to Mikao Usui:

- Just for today do not worry.
- Just for today do not be angry.
- Honor your parents, teachers, and elders.
- Earn your living honestly.
- Be kind to your neighbors and every living thing.

RISKS

Reiki is considered a positive force that works only for good without violating the human will. Patients can choose to block the energy flow, but cannot be harmed in any way. Reiki is used in conjunction with Western medicine or homeopathy; patients are not asked to change their religious or scientific convictions.

NORMAL RESULTS

Because Reiki healers regard themselves as energy channels, they may experience warm or tingling sensations in their hands during a treatment. Patients' experiences vary, since it is believed that Reiki energy will flow to wherever it is needed in the patient's body or psyche. Healers do not promise to cure a specific disease.

Patients have, however, reported relief from pain, general relaxation, faster healing of injuries, emotional calming or release, lowered blood pressure, and easier childbirth.

KEY TERMS

Attunement

The ceremony of initiation in which Reiki students are admitted to the three levels and receive the hand positions and sacred symbols.

Chakra

One of the seven energy centers of the body in traditional Indian yoga.

Holistic

Describes an approach to treatment in which the "whole" person is taken into account rather than just the specific symptoms.

Homeopathy

A practice, founded by German physician Samuel Hahnemann in the 1790s, that is based on the idea that substances that cause certain symptoms in a healthy person can also cure those same symptoms in someone who is sick.

Massage therapy

An assortment of manual therapies that manipulate the soft tissues of the body in order to reduce tension and stress, increase circulation, aid the healing of muscle and other soft tissue, control pain, and promote overall well-being.

Further Reading

For Your Information

Books

Mitchell, Karyn. *Reiki: A Torch in Daylight*. St. Charles, IL: Mind Rivers Publications, 1994.

Stein, Diane. *Essential Reiki: A Complete Guide to an Ancient Healing Art*. Freedom, CA: The Crossing Press Inc., 1995.

Gale Encyclopedia of Medicine. Gale Research, 1999.

http://www.findarticles.com/cf_dls/g2601/0011/2601001171/p2/article.jhtml?term=

REIKI

WILLIAM T. JARVIS PH.D.

The word, Reiki, is of Japanese origin. Rei means "universal spirit, unlimited," and ki refers to the "life force" or "energy." Proponents credit a Dr. Mikao Usui with "rediscovering" Reiki some time around 1846 as part of his search of "sacred texts."

It is clear from proponents' descriptions that Reiki is but a variation of other healing superstitions such as "pranic healing" (ritual of ancient fertility religion, Wicca [ie, witchcraft]), qigong (based upon traditional Chinese medicine), Therapeutic Touch (a pseudo-medical practice done by 20th Century American nurses), and unnamed shamanic healing practices that involve hand-waving, or laying-on-of-hands, healing rituals. Such rituals are magical practices that purport to manipulate unseen "spiritual" forces.

First degree Reiki practitioners learn to treat through a series of 12 specific hand positions placed gently on the body. This allegedly facilitates the flow of Reiki energy through the practitioner, said to be manifested by a heightened feeling of warmth in the hands. The practitioner is said to merely serve as a conduit for the Reiki energy. A second degree Reiki practitioner allegedly "learns to send Reiki over distance through the use of special symbols which involve the opening up to the experience of the energy and listening to one's inner voice." The third level is Reiki Master, a process lasting a year or more while working as an apprentice with another Reiki Master. During this time the apprentice learns to embody the energy and is then able to teach Reiki to others."

There is no evidence that clinical Reiki's effects are due to anything other than suggestion, or that they are superior to massage or any other healing ritual. Reiki's metaphysical beliefs may be in conflict with an individual

patient's religious beliefs. Full disclosure of the belief system should precede its use in any setting. An investigation of proponent literature casts serious doubt as to whether Reiki practitioners can be trusted with such full disclosure. Reiki literature presents misinformation as fact, and instructs practitioners on how to skirt the law in order to protect themselves from regulation and accountability.

Reference

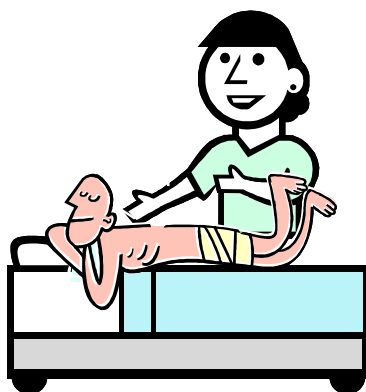
Bullock M. Reiki: a comprehensive therapy for life. *American Journal of Hospice and Palliative Care* 14:31-3, 1997.

Copyright Notice © 1999 National Council Against Health Fraud. With proper citation, this article may be reproduced for noncommercial purposes.

REIKI A UNIVERSAL ENERGY TECHNIQUE TO HEAL

Reiki is known as spiritual energy, like its counterparts it is based on a pantheistic worldview.

Ray Yungen reports that in 1970 there were ½ million Reiki channellers now there are 1 million Reiki channellers in Germany and there are 2.6 million web pages on Reiki. So in the 90's it grew significantly.



Reiki is the Japanese word for Universal Life Form Energy. The definition for Reiki is universal, transcendental spirit, power, and essence. The Rei and ki are broken down into their two component parts, (Kanji Japanese alphabet) it is described as the vital life form energy similar to the Chi of Chinese acupuncture. In the Encyclopedia of Alternative Health Care, author Kristin Olsen says Reiki is “an energy healing system based on ancient Tibetan knowledge discovered by a Japanese theologian.” Many people have commented on the ecumenical aspect of Reiki. Supposedly it was founded by Dr. Mikao Usui, a Japanese Christian minister in Kyoto, Japan, in the mid-1800s. When one of his students challenged his belief that Jesus Christ healed people with His hands, Dr. Usui began a quest for proof that this type of healing actually did exist.

Dr. Usui began a journey of many years looking for a way to heal through the ‘light of God’ which is the way Jesus had healed. Studying first at Christian schools in the US, he had no results. He studied Buddhist writings at a monastery in the Orient he still could find no answers. Usui learned the ancient language of Sanskrit and began to read the sutras, the ancient books of esoteric Hindu religious teaching.

The story goes that after discovering this healing in the sutras, Usui told the monks of this monastery he intended to fast and meditate for 21 days on a nearby mountain in Japan. If he did not come back they should come and get his body.

He went to the mountain and gathered 21 stones with which to count the days. Each day he would throw away a stone and in this way count the time. On the 20th day no revelation had come and he threw away the last stone saying “Well, this is it, either I get the answer tonight or I do not.”

On the final day of his meditative quest, at night on the horizon he could see a ball of light coming towards him. The first instinct was to get out of the way, but he realized this might just be what he was waiting for, so he allowed it to hit him right in the fore-

head. As it struck him he was taken on a journey and shown bubbles of all the colors of the rainbow in which were the symbols of Reiki, these were the very same symbols in the Tibetan writings he was studying but was unable to understand. Now, there was total understanding.

After this experience he began back down the mountain and from this moment on was able to heal. This first day this new power proved itself to Usui when he stubbed his toe and was able to heal it, his own starvation, an ailing tooth and the Abbot's sickness which was keeping him bedridden. These are known as the first four miracles.

Thus was discovered was the healing knowledge he termed “Reiki.” The name comes from the Japanese words rei, meaning “boundless and universal,” and ki, meaning “vital life energy force that flows through all living beings.”

Wanting to use these abilities to help others, he spent the next seven years in the beggar section of Tokyo healing the poor and sick.

HOW DOES IT WORK?

Reiki is a “laying on of hands” healing. Reiki today is an energy technique that is passed along from Reiki masters to initiates. According to Olsen, these Reiki masters themselves don't understand how it works. They can only describe it as a linking with the cosmic radiant energy, an opening of chakras, or an attunement with universal life energy. Proponents say, these can be applied to the practitioner himself, to plants, or to animals and can even heal long distance!

Reiki is drawn through the channel, not sent. By laying hands on the person you supposedly draw appropriate amounts of energy to whatever areas of your body need it. The energy centers, also known as chakras (found in Hinduism), are opened to enable the person to channel higher amounts of universal Life Form Energy. Their claim is that “recipient” does not take on an any of negative energy or blocks from the practitioner it is claimed Reiki passes through a purified channel in their body and by this process, each has a treatment. Proponents say the technique can be applied to the practitioner himself, to other people, to plants, or to animals.

“Once the chakra is opened the universal energy is channelled to flow freely and in

higher amounts. Reiki is never sent but drawn through the channel. The energy enters through the crown chakra of the healer and it passes through the upper energy centers, the heart and solar plexus then passes throughout the arms and hands to the recipient. So the practitioner and the patient both are treated. They teach that we all have the reiki energy and that anyone can learn to lay their hands on another to help accelerate the healing process by transferring magnetic energy.” (Paula Horan Empowerment through Reiki May, 1990 Calendar of Events, Hawaii newspaper.)

Reiki treatments consist of a series of three or four sessions lasting about an hour each. The practitioners do not claim to diagnose. The ‘words’ spoken mentally or verbally during the healing session is of great importance to them. The symbols drawn with the healer's palms over the patient should be correct as the light energy is brought through the healer. During a Reiki session, the practitioner supposedly draws energy and focuses it through his hands, thus providing a link between himself and the patient. Some Reiki teachers have described this connection as “lighting up.” The practitioner's hands are held at twelve basic positions, for five minutes each. A practitioner allows his or her own intuition to guide the placing. Over problem areas, the hand is held twice as long. Some Reiki practitioners claim to heal at long distances.

We are told that we all have Reiki energy (Universal Life Form Energy) and anyone can lay the hands on another person and help accelerate their healing process by transferring this energy (many claim that this is how Jesus healed using these various techniques). One needs to go through the attunement (the initiation) process which the student experiences in the various Levels of Reiki classes. With practice, they say they can detect energy responses from the body that often give clues to the site of an organic problem and its seriousness.

Most believe they are helping people with this undiscovered but ancient energy balancing new age techniques. So they believe they have discovered tools for reawakening, higher levels of of conscious, creating better health.

Again like other new age practices this energy is manipulated by techniques learned by the initiate. This is no different than many of the other prana, chi, Ki techniques. It has nothing to do with a Christian worldview and actually opposes it.

that it was caused by stress. His “treatment” consisted of massaging the foot and, from time to time, pressing hard on the ball of my foot, a procedure that was quite painful. The “treatment,” of course, did absolutely nothing to help my shoulder. A few months later, I had the surgery, which cured the problem immediately and permanently.

Although the claims of reflexology are so far removed from scientific reality that testing them might seem a waste of time, a few studies have been published in medical journals.

· In one study, a reflexologist who attempted to identify the affected body areas of 70 people with known health problems scored no better than chance.

· In another study, three experienced reflexologists examined 18 adults with one or more specified conditions identified from their medical records. There was no significant relationship between the patient’s medical diagnoses and the reflexologists’ findings.

· A study of 40 patients found no evidence that reflexology has a specific effect on asthma beyond placebo influence.

· In another study, women with premenstrual syndrome (PMS) who underwent ear, hand, or foot reflexology reported fewer symptoms than women who had placebo therapy done on sham reflex points. However, the placebo treatment was described as “either overly light or very rough,” which means that the quality of the massage was not uniform. Differences in the quality of the massage being administered. The study suggests that massage may relieve PMS symptoms, but it did not validate the alleged connection between reflex points and body organs.

Reflexology is based on an absurd theory and has not been demonstrated to influence the course of any illness. Done gently, it is a form of foot massage that may help people relax temporarily. Whether that is worth the charge per session or is more effective than ordi-

nary (noncommercial) foot massage is a matter of individual choice. Claims that reflexology is effective for diagnosing or treating disease should be ignored. Such claims could lead to delay of necessary medical care or to unnecessary medical testing of people who are worried about reflexology findings.

(Stephen Barrett, M.D. is Board Chairman, Quackwatch, Inc., and Vice President of the National Council Against Health Fraud. He edits a free weekly electronic newsletter and operates seven consumer-protection Web sites):

- <http://www.quackwatch.com>
- <http://www.chirobase.org>
- <http://www.homeowatch.org>
- <http://www.ihealthpilot.org>
- <http://www.mlmwatch.org>
- <http://www.nutriwatch.org>
- <http://www.ncahf.org>

Reflexology

Stephen Barrett M/D.

The massaging of feet to diagnose and cure disease. In the 1930s, Eunice Ingham (1889-1974) applied Occam’s razor to Dr. William Fitzgerald’s teachings in Zone Therapy (1917) and dubbed the result reflexology. She eliminated all of Fitzgerald’s energy zones—he said there are ten such zones in the body—except for the feet. Reflexology is based on the unsubstantiated belief that each part of each foot is a mirror site for a part of the body. The big toe, for example, is considered a reflex area for the head. As iridology maps the body with irises, reflexology maps the body with the feet, the right foot corresponding to the right side of the body and the left foot corresponding to the left side of the body. Because the whole body is represented in the feet, reflexologists consider themselves to be holistic health practitioners, not foot doctors. Allegedly, the ancient Chinese and Egyptians practiced reflexology, and it is still very popular in Europe.

Practitioners of reflexology claim that they can cure a variety of aches and pains by massaging the correct reflex points on the foot. It is said by those who practice it that reflexology can cure migraine headaches and relieve sinus problems. It can restore harmony

to hormonal imbalances and cure breathing disorders and digestive problems. If you have a back problem, a massage on the right spot on the right foot (which might be the left foot in some cases) can alleviate your suffering. If you suffer from circulatory problems or have a lot of tension and stress, reflexology promises relief.

There are many variations of reflexology and many names for these variations, including Zone Therapy, Vacuflex, and Vita Flex. Some chiropractors are also reflexologists, although there is no necessary connection between the two. Some reflexologists deny that they diagnose or treat diseases, but claim they can restore “balance” to one’s “energy.”

Reflexology is often combined with other therapies and practices, such as acupressure, shiatsu, yoga, and tai chi, and it often involves the hands and other body parts or zones, not just the feet. Reflexology seems to be a variation of acupressure, with its notion that there are correspondences between special pressure points and the flow of chi to bodily organs. Polarity therapy, a variant of reflexology, replaces the yin and yang opposition with the positive/negative energy charges of the sides of the body (the right side is positively charged); massage allegedly restores the proper balance of energy. In

polarity therapy, the foot is the site of just one of many key massage points.

One reason foot massage may be so pleasurable and is associated with significant improvement in mood is that the area of the brain that connects to the foot is adjacent to the area that connects to the genitals. There may be some neuronal overlapping. Neuroscientist V.S. Ramachandran writes of a person whose leg was amputated and who experienced orgasms in his phantom foot (1998: 36-37). “The genitals are right next to the foot in the body’s brain maps,” he notes, and speculates that this fact may account for foot fetishes.

FURTHER READING

- [Quack Watch](#) - Dr. Stephen Barrett
- [Reflexology](#) William T. Jarvis, Ph.D.
- [The “Reflexology Steering Wheel Cover”](#) by Stephen Barrett, M.D.

THE FEET HAVE IT

(From a New Age site)

Surely we cannot find all these body parts on the feet? No! The actual 'part' is not on the soles of the feet. However according to the reflexology science, the condition of every organ and/or gland is reflected into the foot area.

WHAT IS FOOT REFLEXOLOGY?

Foot reflexology is the practice of stimulating areas of the feet that correspond to parts of the body with specific hand, thumb and finger techniques. This stimulation is believed to have a positive effect on a person's health and well-being. It is not massage. We know that foot reflexology is very relaxing, and periods of relaxation are important in our lives. Foot reflexology is not a substitute for medical care. While foot reflexology will help enhance over-all health and well-being, a sick person should seek medical attention.

WHAT CAN FOOT REFLEXOLOGY DO FOR ME?

Foot reflexology is relaxing. When you relax, your breathing and thinking slows, which helps to improve circulation, and allows your body to use more oxygen. When you are relaxed, endorphins (the body's painkillers) get to where they're needed. Although many people swear by foot reflexology and can tell you their success stories, there has been very little scientific research into the possible health effects of foot reflexology.

This is not a 'new' science as iridology is not 'new'. It has been reported that 'foot' charts and 'eye' charts have been found on the walls of the pyramids in Egypt. Unfortunately, quoting one reporter, "like the directions for how to build the pyramids was not left to posterity, neither was the information of how to use the 'eye' and 'foot' charts left to us."

Simply stated, REFLEXOLOGY is an ancient therapy designed to bring the body back from 'unwellness' to 'wellness' or 'imbalance' to 'balance' due to the stress of modern living, ill health and pain, improper diet, environmental allergies or anything else that makes one feel 'un-well'.

Some persons may 'think' (it's usually in the mind) that their feet are too ticklish to have anyone touch them. However the technique of handling the foot, removes that fear. It must be grasped firmly and the massaging is done FIRMLY as well. However, according to one of my teachers, one does not have to HURT to help. After a tender reflex is found, the area may either have pressure applied TO IT OR OVER IT in order affect the reflex in that area.

- Ø Try it for:
- Ø ear aches
- Ø sore neck
- Ø head ache
- Ø back problems
- Ø sinus problems
- Ø sore knees and hips
- Ø body aches and pains
- Ø stomach aches and upset stomach
- Ø Sore Feet (this could be a structural problem!)
- Ø Improve circulation
- Ø Assist the removal of heavy metals from the tissues
- Ø Chronic conditions like fatigue, bad lungs, painful tissues, etc.
- Ø Inflammation ANYWHERE e.g. shoulder, bursitis, colitis, laryngitis, arthritis, tendonitis (tendonitis seems to respond better to massage therapy according to my personal experience), or any other 'itis' type of problem. Stressful lifestyle symptoms. THE LIST GOES ON

Are there any warnings that should be noted along with the many good things that REFLEXOLOGY can do for us? Yes!

- (i) If one has a tendency toward kidney stones, caution should be used when working over the kidney area. A kidney stone attack could be triggered and they are not funny!!
- (ii) Have you had a gall bladder attack or even if there is a weakness in your family history of gall bladder problems, go easy when working over the



gall bladder reflex. A Gall bladder attack could be triggered and they are definitely NOT funny!!

(iii) If it is possible that a woman is pregnant, be aware that a miscarriage could be triggered by over stimulation in the uterus area.

(iv) When a person is very toxic i.e. has consumed many drugs, lives in an extremely polluted atmosphere, has been over-indulging in salt, sugar, alcohol, nicotine, has too many amalgam fillings in their teeth causing mercury toxicity, works in an exhaust-filled atmosphere, has sustained toxic mineral damage from some unknown source, etc., these problems may show up by the client breaking out in a cold sweat on feet and hands (long before their body shows the problem) and they could begin experiencing FLU-LIKE symptoms e.g. head-ache, upset stomach. This reaction just tells you that they really need help and the therapist should go slower, more gently and for shorter periods of time.

It has been said that "too much of a good thing can make you ill e.g. water, spinach, herbs, medications " just as "too much of a 'bad thing' e.g. antibiotics, nicotine, table salt, sugar, etc. can also make you ill.

However this in no way suggests that a treatment is not in order. I have had excellent results in helping people clean up their polluted bodies with the use of this modality along with chelating supplements and a change of lifestyle.

ACUPUNCTURE, THE FACTS

DR STEPHEN BASSER

The practice of acupuncture is fairly widespread in Australia, and is used by both medically and non-medically trained persons. The technique is based on the belief that the human body is subject to disease when there are imbalances in the level of invisible life forces. Balance can be restored by using fine needles, or other means, to stimulate various points located over the body. The needles are usually inserted and twirled and may be left in for short periods. The points chosen for stimulation depend upon the patient's symptoms, the season, the weather, and the result of taking the pulse at the wrist.

Acupuncture is a therapy based on ancient Chinese philosophy and was described for the first time in 90 BC in the Shih-chi text. No known Chinese source prior to this time refers to the technique.¹

Modern authors (eg, Needham²) have expressed views on acupuncture that are not consistent with the descriptions in the ancient Chinese medical texts. This is clearly inappropriate. Any assessment of acupuncture should involve accessing these texts as the historical documents they are, and not merely reinterpreting them to suit some other purpose. When this is done it is clear that there is often little connection between the modern western form and understanding of acupuncture and the past.

Only by accurate reference to source material can those who are interested in acupuncture determine whether its concepts are applicable in a meaningful way to modern times. Objectivity is an important scientific principle and provides protection from the influence of pre-existing beliefs or ideas.³

HISTORY OF ACUPUNCTURE

The earliest Chinese medical texts are those discovered at the Ma-wang-tui graves in 1973, dating from 168 BC.^{4,6} These provide a picture of Chinese medicine as it existed during the 3rd to 2nd century BC. Acupuncture is not mentioned in these texts, which record all modes of treatment in use at the time.¹

The Ma-wang-tui texts do describe eleven mo or vessels, which were believed to contain in addition to blood a life force known as ch'i or pneuma.⁶ There was no distinction made between vessels on the ba-

sis of content and no information was provided on how the blood and ch'i circulated in the vessels, which did not make up a connected system.¹ By the end of the first century BC it was believed that there were twelve vessels, and that these were connected in a network. In addition a picture had developed of the ch'i flowing through vessels separate from blood.^{1,4,6}

The most important text of this time - the Huang-ti nei-ching - mentions twelve connected vessels with different courses to the eleven described earlier.⁷ These were called "conduits" (ching) or "conduit vessels" (ching-mo). It also records a large number of holes which are located over the body on these vessels. Most modern writers refer to these vessels as meridians.^{8,9}

CH'I

Disease was closely related to the vascular system and was, in earlier times, treated by causing bleeding from a vessel with sharp stones or needles.⁶ Later the concept of a disease causing agent—the hsieh—was developed. It was believed that this could lodge in the vessels and interfere with the flow in them. The concept of ch'i came from the term hsieh-chi, or evil influences which in turn developed from an earlier time in Chinese history when the agents of illness were thought to be demons (hsieh-kuei).¹

The wind was originally regarded as a demon and therefore an agent of illness. Later it was regarded merely as a natural phenomenon, though it was still considered a warning of future events. As a spirit or demon the wind resided, it was believed, in caves or tunnels. The term for 'caves' is used in acupuncture literature to designate the holes in the skin through which the ch'i is able to flow into and out of the body - hsueh. It was believed that through the insertion of different kinds of needles into these holes the flow of ch'i could be increased or decreased to achieve a more normal state of health.

Ch'i was considered to float through the air, and flow with blood. The Chinese character used to represent ch'i is literally read as vapours rising from food.¹

Supporters of acupuncture like to use the word 'energy' in association with the term ch'i, but it is clear that:

"the core concept of ch'i bears no resemblance to the western concept of energy (regardless of whether the latter is bor-



rowed from the physical sciences or from colloquial use)."^{4(p5)}

CELESTIAL INFLUENCE

Over time the connection between needling and ch'i, which formed the basis of acupuncture, was described in the context of an emerging cosmological view of the world, not evident in the earlier descriptions of medical bleeding. Organic medicine was subsumed under this emerging system of cosmological correspondences.^{1,6}

For example, the types of needles used were grouped together as nine because of the cosmological significance of the number. When the system of openings or holes along the vessels was first described there were 365, not because this number had been anatomically identified, but because this corresponded to the days in one year. Early texts make no reference to the openings - they are just suddenly described, and there are 365 of them. The absence of any objective basis for the openings is shown by the fact that many texts describe a different total number of them.¹⁰

CONTRADICTIONARY ELEMENTS

The vessels, and not the openings, were the central feature of 'ancient' acupuncture, whereas in modern practice the points appear to be of prime importance. The vessels have, over time, lost their association with the vascular system.⁶ and in the west are now viewed primarily as functional pathways linking the openings. The use of the term 'meridian' rather than 'vessel' merely serves to aid in clouding the issue.

A further problem is an apparent contradiction in that the modern practice of acupuncture seems to be based on the pre and post-circulation concepts. That is, the vessels are needled as if they constitute separate units, whilst at the same time most practitioners of Traditional Chinese Medicine also rely on wrist pulse palpation, which

makes sense only if the flow through the vessels is continuous.

If the flow was not continuous (ie, the vessels not connected) then each vessel would need to be palpated for its own pulse. This is, in fact, what was originally described, and it seems that this basic contradiction has arisen from a partial acceptance and a partial rejection of history.⁴ It is unclear why this occurred and how it was decided what to retain and what to discard.

YIN, YANG AND THE FIVE ELEMENTS

Most people have heard of the terms yin and yang which describe concepts that form an important part of the history of Chinese medicine and acupuncture. An ill person was considered to be out of balance with nature and these two opposing forces. Originally the terms meant shady (yin) and sunny (yang) side of a hill.¹

The belief in these forces was based on the view that most of the natural world consisted of events that were cyclical, and therefore caused by the rise and fall of opposite, but complementary, forces. There was also an element of the ancient belief in a particular form of magic - that like corresponds to like. In other words, it was believed that hurting a picture of a person would result in real harm to the person, or eating food that looked like a particular body organ would be beneficial to that organ.

Another important natural philosophy in the history of Chinese medicine was the doctrine of the Five Phases or Elements (wuxing), which involved the categorising of natural phenomena, in particular water, fire, metal, wood, and soil into five separate lines of correspondence.¹¹ A sixth component, grain, is also described.

The initial application of these philosophies to medicine was characterised by a number of different schools with different theories, many of them contradicting each other (eg supporters of the Five Phases doctrine rejected the yin/yang concept).⁷ Even in the one book, virtually side by side, there could be guidelines based on mutually exclusive patterns of knowledge. With the passage of time a kind of reconciliation took place, but no formal standardisation of these conflicting views was attempted.

For example, do the terms hsin (heart), kan (liver) and p'i (spleen) refer to anatomical structures or abstract functional systems? In the Chinese medical literature there is reference to both and so neither is 'correct'.

These problems arose because there was primarily a reliance on subjective perceptions and no system for acquiring and recording information objectively.

THE POWER OF ANECDOTE

The early understanding of health and illness in China was derived almost entirely from analogical conclusions and not anatomical evidence 1,4,6. It was not until the eighteenth century that it began to be acknowledged that a conception of function is of no use without an understanding of actual structure. Surgery was prohibited for a long time in China, since it was regarded as unacceptable to open the body in this way.¹

It is important to realise that acupuncture arose at a time when there was no understanding of modern physiology, biochemistry, or healing mechanisms. If a person was sick, and treated with acupuncture, and they improved, it was assumed that the treatment had caused the improvement. There was no formal study of diseases and their natural history and no attempt was made to determine whether the person would have improved without the treatment.

Without having a scientific basis for determining the success or failure of treatment the two events - giving a treatment and symptom improvement - were causally related, and these specific treatments have been passed on untested to this day.

THE EARLY 1900S

By the early twentieth century Traditional Chinese Medicine (TCM) was regarded as an historical oddity and its use was mainly in rural areas.¹²⁻¹⁴ The early Chinese Communist Party expressed considerable antipathy towards TCM, ridiculing it as superstitious, irrational and backward, and claiming that it conflicted with the Party's dedication to science as the way of progress.¹³ Acupuncture was included in this criticism. The person who would become the first secretary-general of the Communist Party stated in 1919:

"Our men of learning do not understand science; thus they make use of yin-yang signs and beliefs in the five elements to confuse the world...Our doctors do not understand science: they not only know nothing of human anatomy, but also know nothing of the analysis of medicines; as for bacterial poisoning and infections they have not even heard of them...We will never comprehend the ch'i even if we were to search everywhere in the universe. All of these fanciful notions and irrational beliefs can be corrected at their roots by science."^{15(p135)}

MAO TSE-TUNG AND THE CULTURAL REVOLUTION

It was left to Mao Tse-tung to save TCM, including acupuncture, by casting it into the political arena.^{12,14,16,17} The era of Mao Tse-tung saw a resurgence of interest in TCM as

a result of:

- (1) Mao's personal involvement,
- (2) The need to utilise all available resources to deliver health care to rural areas. When the People's Republic of China was formed in 1949, China was an unhealthy place and the rural areas were particularly poorly serviced. One of Mao's primary aims was to improve this situation.
- (3) The Party's desire for increased power and control. By 1968 the Ministry of Public Health had become largely irrelevant and most of the pre-Cultural Revolution leaders had been removed and replaced with army representatives. Decision-making power resided almost entirely with Party leaders.

Acupuncture and other traditional therapies such as herbal medicine were powerful political tools and were used to judge support for the Cultural Revolution.^{11,14} At one stage the head of the North-East Public Health Board was publicly denounced for expressing opposition to TCM and the First Vice Minister who had been the Health Care leader since the 1930s 'confessed' in the People's Daily to having also opposed it. The reason for his opposition was because he was "divorced from Party leadership".^{14(p47)} Doctors and patients also came under considerable political pressure to use traditional techniques, and critics were harshly treated.

In October 1966 the Chinese Medical Journal was replaced by a frankly political journal - China's Medicine - whose banner included the words 'official organ of the Chinese Medical Association'.¹⁷ The editorial of the first edition proclaimed:

"We will hold still higher the great red banner of Mao Tse-tung's thought, creatively study and apply Chairman Mao's works and continuously advance the revolutionization of our ideology and work so that we may better serve the Chinese people and the revolutionary people of the world."^{17(p112)}

After the Chinese Medical Journal was recommenced in 1973 this policy of publishing material of a political nature continued.^{18,19} It was only after the demise of the 'Gang of Four' in 1976 that this emphasis was discarded and there appeared for the first time revelations about the impact the political climate in China had had on medical practice.

In 1987, in a paper on the history of the Chinese Medical Journal, this period was reviewed:

"It is sad to recollect the gloomy days of the 'Cultural Revolution', which lasted.¹⁰

years starting in 1966. What happened to the Journal? CMJ was replaced by China's Medicine, which appeared from 1966 to 1968, filled with political documents, but very few medical papers...Although our Journal resumed publication in 1975, many authors still started their scientific articles with superfluous political sloganeering... Low quality papers were also accepted. Fortunately, normalcy was gradually restored in the Journal after 1979".^{20(p438-39)}

THE MODERN ERA

In China today medicine has adopted a more scientific approach and whilst certain elements of traditional Chinese medicine are retained, there is a growing call for objective scientific evaluation of past claims.^{12,21} Western medicine and bio-medical science dominates, and it is generally agreed that if TCM is to secure a place it will only be through scientific research. This is consistent with Mao's teaching, as he called for the modernisation of Traditional Chinese Medicine¹² and urged the Chinese to "uncover the treasurehouse and raise its standards".^{1(p252)}

Of the approximately 46 major medical journals published by the Chinese Medical Association not one is devoted to acupuncture or its variants. In other parts of Asia such as Japan acupuncture has been all but rejected.²²

In Japan western medicine was first presented as an alternative to TCM in the 18th century²³ and by the late 19th century had assumed the dominant position.²⁴ Proclamations of 1875 and 1883 restricted the practice of Chinese style medicine and doctors were urged to discard TCM and switch to western medicine.²⁴

FACT FROM FICTION

We have a more detailed knowledge of the human body than when acupuncture was first being described, and since that time many of its beliefs have been examined closely. We can now confidently state that:

(a) The concept of ch'i has no basis in human physiology.

(b) The vessels, or meridians, along which the needling points are supposedly located, have not been shown to exist and do not relate to knowledge of human anatomy.

(c) Specific acupuncture points have also not been shown to exist - as noted earlier, different acupuncture charts give different numbers and locations of points.

Evidence supporting acupuncture must support the view that it is a separate and distinct entity. That is, it must support the claim that acupuncture has an effect as a result of needling specific points on the body

that correspond to the vessels as described historically.

Before this claim can be tested, though, we must know which historical description is being used as the 'true' one. Which description of the vessels is being used - eleven or twelve, connected or not connected - and how many points are to be used? Why is this particular model being used in preference to the alternatives? The scientific assessment of acupuncture can proceed only when this information is provided, and its source is declared. No scientific paper on acupuncture should be published which does not provide this vital information.

ASSESSING ACUPUNCTURE: THE CRUCIAL QUESTIONS

Many of acupuncture's apparent benefits are anecdotal and in assessing this technique it is important to quantify the objective value conferred. That is, it is important to exclude natural history and the placebo effect so that one can confidently ascribe any benefit seen to the therapy.²⁵

There must be clear evidence of a distinction between general sensory counter-irritant techniques shown to have a mild analgesic effect - such as trans-electrical nerve stimulation (TENS) - and acupuncture. The analgesic effect of counter-irritant stimulation is regarded as a physiological phenomenon in which the transmission of pain signals from one site or area is inhibited by the application of another noxious stimulus at a separate site, which may be remotely situated.²⁶⁻³⁰

In addition there must be evidence that insertion of needles at random points on the body does not exert the same effect as specific needling. This matter is crucial. Proponents of traditional Chinese acupuncture claim that it takes many years of specialised training to be able to identify the specific acupuncture needling sites. If an equivalent effect is seen when a needle is inserted in the same way anywhere away from the specific site that the theory requires, then this refutes the theory.

Those who continue to claim that traditional Chinese acupuncture is a specific modality must address the existing scientific studies that refute this belief and not merely quote supportive studies or anecdotes.

ACUPUNCTURE AND HEARING LOSS: A LESSON LEARNED

The importance of objective testing is very well illustrated in a published review of the use of acupuncture in sensorineural hearing loss.³¹ This paper describes well how easily an unproven remedy may be unquestioningly promoted, and how scientific as-

essment usually occurs pretty much as an afterthought. It describes the following process:

(a) A visit to China by a well-known, and respected, ear nose and throat specialist.

(b) Demonstrations for this person of apparent cures effected by acupuncture. No inquiry made as to whether the patients 'cured' had had pre- and post-treatment audiometric testing.

(c) Return to the USA, whereupon reports of cures began to reach the public via the media, particularly popular newspapers and magazines.

(d) Public demand for the treatment to be made available as a result of the media reports of these cures, and the apparently high success rates being achieved by trained local practitioners.

(e) The lack of objective scientific evidence for the reported cures is noted with concern, and research is conducted.

(f) Formal studies show that acupuncture has no effect upon hearing levels of individuals with sensorineural hearing loss.

The specialist who originally travelled to China, and wrote of the remarkable demonstrations he saw there, wrote the following just three years later:

"...it is a tragic mistake to take a child - or an adult for that matter - for acupuncture treatment for neurosensory deafness to any of the so-called acupuncture centers. There has not been one case of improvement demonstrated audiometrically, when a child or any deaf patient was tested before undergoing treatment and then afterwards by any reputable otologist. There have only been unreliable and perhaps planted testimonials."^{31(p433)}

FROM EAST TO WEST

The early 1970s were a period during which visits to China were popular and these usually involved demonstrations of the almost miraculous effectiveness of acupuncture. These visits were then written up in western medical journals more as journalistic pieces than as critical scientific reviews.³²⁻³⁴

The rapid increase in popularity of acupuncture in the West followed on from the reports of these visits, and it had captured the public's imagination long before scientific studies began to question the validity of the anecdotes.

ACUPUNCTURE RESEARCH

Carefully designed and conducted scientific studies have shown that traditional Chinese acupuncture is no more effective in providing pain relief than placebo or counter-irritant stimulation such as TENS. 35-58

Many of these trials have compared 'real' acupuncture (needles inserted according to traditional theory) and 'sham' acupuncture (needles inserted at other sites which, in some cases, were sites that the traditional theory said were least likely to reduce pain) - with no difference in effectiveness found.^{36,39,40-42,44} Since many of the studies were conducted with the cooperation and participation of professionals trained in traditional acupuncture, it is insufficient to dismiss them as a part of some imaginary anti-alternative conspiracy.

It is accepted that there are modern theories that go part of the way to explaining the analgesic action of the counter-irritant techniques such as TENS^{27-29,59-65}, though it must be noted that not all studies confirm that these have an effect over and above placebo.⁶⁶⁻⁶⁸ There is currently no evidence to support the view that acupuncture has an action or effect that is separate to that seen with these techniques.

Some modern practitioners, in view of such evidence, have abandoned the ancient theories, including the vessels/meridians and even the acupuncture points. The British practitioner Felix Mann has been noted to observe wryly that if the modern texts are to be believed there is "no skin left which is not an acupuncture point".⁶⁹

Pain is a subjective symptom and the perception of it is affected by other factors, including psychological state.⁷⁰ There is evidence of a considerable placebo effect in trials of many pain conditions⁷¹ and any scientific evaluation of acupuncture must include an attempt to see whether it can relieve pain or other symptoms better than placebo. As noted in the 1989 National Health and Medical Research Council (NHMRC) report:

"...it might well be that the clinical effectiveness of acupuncture in the reduction of pain is due more to psychological than to physical factors".^{65(p46)}

There is certainly no evidence to support the view that acupuncture is of use in various systemic disorders (eg asthma^{49,58}, arthritis^{38,40,55}) and it is bordering on the fraudulent to suggest so.

SIDE EFFECTS

Acupuncture is not without its risks⁷²⁻⁷⁶ and if equally effective techniques are available that do not involve puncturing the skin then it is hard to justify using this invasive procedure.

"Viewed in this way acupuncture is an elaborate but unnecessarily complicated means of achieving analgesia when a clinically

safer and easier method is available."^{65(p15)}

ANIMAL ACUPUNCTURE

Supporters of acupuncture sometimes refer to studies in animals claiming that these clearly demonstrate an analgesic effect and since animals are not suggestible the placebo effect is excluded.

Animals must be restrained to have acupuncture and it is well described that when animals are restrained that they can develop anaesthesia due to fear and catalepsy - the so-called 'still reaction'.^{5,77} In addition the studies do not compare 'real' and 'sham' acupuncture and provide no details as to the source of the acupuncture points used. Where is the description of acupuncture in animals in the historical Chinese literature?

A DESIRE FOR DIALOGUE?

Concern must be expressed at the views of some supporters of acupuncture regarding whether there is a need for closer cooperation with scientific medicine. For example, advice given to acupuncturists by one prominent author included a recommendation to undermine the public's faith in modern medicine and science and educate them as to their need for alternative medicine.⁷⁸

Attempts to obtain comments from a number of acupuncture organisations on a draft of this ACSH paper were met by either silence or mocking sarcasm. None of the organisations approached chose to provide even a single specific comment on any part of the paper. This is particularly intriguing given that the 1989 NHMRC report was condemned by acupuncturists on the basis of:

"...failing to invite traditional acupuncturists into an open debate in which they had the opportunity to hear and to endeavour to meet points advanced against them."^{79 (p51)}

CONCLUSION

The Australian Council on Science and Health asserts that:

(1) The public must be made aware of acupuncture's current scientific status. There is a marked difference between the claims of acupuncturists and the findings of the clinical trials research.

(2) The onus is on those who are claiming that traditional acupuncture is effective, and a distinct entity, to establish this by conducting well-controlled trials and submitting the results for peer review.

(3) There is a need for scientifically rigorous studies of the effectiveness of acupuncture in a range of conditions.

(4) Until such time as such supporting evidence is available acupuncture should not be offered without full informed con-

sent - patients must be advised of acupuncture's unproven status and its possible adverse effects.

(5) The public should not be made to pay for this unproven therapy via Medicare rebates.

The need for more research, and research of a higher standard, has been stressed by authors of previous reviews of acupuncture.^{54-58,80-82}

References

1. Unschuld PU. *Medicine in China. A history of ideas.* University of California Press. Berkeley. 1985
2. Lu DG, Needham J. *Celestial lancets. A history and rationale of acupuncture and moxibustion.* Cambridge University Press. Cambridge. 1980
3. West R. Assessment of evidence versus consensus or prejudice. *Journal of Epidemiology and Community Health.* 1992; 46: 321-2
4. Unschuld PU. *Nan-ching - the Classic of Difficult Issues.* University of California Press. Berkeley. 1986
5. MacDonald A. *Acupuncture: From ancient art to modern medicine.* Allen and Unwin. London. 1982
6. Epler Jr DC. Bloodletting in early Chinese Medicine and its relation to the origin of acupuncture. *Bull Hist Med.* 1980; 54: 357-67
7. Keiji Y. The formation of the Huang-ti Nei-ching. *Asia Asiatica.* 1979; 36: 67-89
8. Worsley JR. *Traditional Chinese Acupuncture. Vol.1. Meridians and Points.* Element Books. Salisbury. 1982
9. Weisner D. *Alternative medicine. A guide for parents and health professionals in Australia.* Kangaroo Press. New South Wales. 1989
10. Lun L. Acupuncture develops in the struggle between the Confucian thinking and the legalist thinking. *Scientia Sinica.* 1975; 18(5): 581-90
11. Porkert M. *The theoretical formulations of Chinese medicine: systems of correspondence.* MIT Press. Cambridge. 1978
12. Rosenthal MM. *Health care in the People's Republic of China. Moving toward Modernisation.* Westview Press. Colorado. 1987
13. Crozier RC. *Traditional medicine in modern China.* Harvard University Press. Cambridge. 1968
14. Lampton D. *The politics of medicine in China.* Westview Press. Colorado. 1977
15. Kwok DW. *Scientism in Chinese thought.* New Haven. 1965
16. Huard P, Wong M. *Chinese Medicine.* Weidenfeld and Nicolson. London. 1968
17. Sidel VW. Health services in the People's Republic of China. In: Bowers JZ, Purcell EF, eds. *Medicine and society in China.* Josia Macey Jr Foundation. New York. 1974
18. Editorial. Advance along the widening road pointed out by Chairman Mao. A report on the barefoot doctors of Chiangchen Commune, Ch'uansha County, Shanghai. *Chinese Medical Journal.* 1975; 1(3): 159-166
19. Huang Sungyu People's Commune Party Committee. Consolidate the dictatorship of the proletariat and run cooperative medical service well. *Chinese Medical Journal.* 1975; 1(4): 233-36
20. Bao-xing C. A centennial review of the history of the Chinese Medical Journal. *Chinese Medical Journal.* 1987; 100(6): 434-42
21. Petty R. Images of China. *Journal of The Royal College of Physicians of London.* 1991; 25(4): 344-46

22. Skrabanek P. Acupuncture and the age of unreason. *The Lancet*. 1984; 1: 1169-71
23. Akihito. Early cultivators of science in Japan. *Science*. 1992; 258: 578-80
24. Long SO. Health Care Providers: Technology, Policy and Professional Dominance. In: Norbeck E, Lock M, eds. *Health, Illness and Medical Care in Japan. Cultural and Social Dimensions*. University of Hawaii Press. Honolulu. 1987
25. Charlton BG. Philosophy of medicine: alternative or scientific. *Journal of the Royal Society of Medicine*. 1992; 85: 436-38
26. Gammon GD, Starr I. Studies on the relief of pain by counterirritation. *Journal of Clinical Investigation*. 1941; 20: 13-20
27. Bing Z, Villanueva L, LeBars D. Acupuncture and Diffuse Noxious Inhibitory Controls: Naloxone reversible depression of activities of trigeminal convergent neurons. *Neuroscience*. 1990; 37(3): 809-18
28. Bing Z, et al. Acupuncture-like stimulation induces a heterosegmental release of Met-enkephalin-like material in the rat spinal cord. *Pain*. 1991; 47: 71-77
29. LeBars D, Dickenson AH, Besson J. Diffuse Noxious Inhibitory Controls (DNIC) 1. Effects on dorsal horn convergent neurons in the rat. *Pain*. 1979; 6: 283-304
30. Levine JD, Gormley J, Fields HL. Observations on the analgesic effects of needle puncture (acupuncture). *Pain*. 1976; 2(2): 149-59
31. Taub HA. Acupuncture and sensorineural hearing loss: a review. *Journal of Speech and Hearing Disorders*. 1975; 40: 427-33
32. Modell JH. Observations of "acupuncture anaesthesia" in the People's Republic of China. *Archives of Surgery*. 1974; 109: 731-33
33. Dimond EG. Acupuncture anaesthesia: Western medicine and Chinese Traditional Medicine. *Journal of the American Medical Association*. 1971; 218: 1558-63
34. Bonica JJ. Therapeutic acupuncture in the People's Republic of China. Implications for American medicine. *Journal of the American Medical Association*. 1974; 228(12): 1544-51
35. Thomas M, Eriksson SV, Lundeberg T. A comparative study of diazepam and acupuncture in patients with osteoarthritis pain: a placebo controlled study. *American Journal of Chinese Medicine*. 1991; 19(2): 95-100
36. Godfrey CM, Morgan P. A controlled trial of the theory of acupuncture in musculoskeletal pain. *The Journal of Rheumatology*. 1978; 5(2): 121-24
37. Fox EJ, Melzack R. Transcutaneous electrical stimulation and acupuncture: comparison of treatment for low back pain. *Pain*. 1976; 2(2): 141-48
38. Helms JM. Acupuncture for the management of primary dysmenorrhea. *Obstetrics and Gynaecology*. 1987; 69: 51-6
39. Ghia JN, et al. Acupuncture and chronic pain mechanisms. *Pain*. 1976; 2(3): 285-99
40. Gaw AC, Chang LW, Shaw LC. Efficacy of acupuncture on osteoarthritic pain. *New England Journal of Medicine*. 1975; 293: 375-78
41. Edelist G, Gross AE, Langer F. Treatment of low back pain with acupuncture. *Canadian Anaesthetic Society Journal*. 1976; 23(3): 303-6
42. Lee PK, et al. Treatment of chronic pain with acupuncture. *Journal of the American Medical Association*. 1975; 232: 1133-35
43. Lewith GT, Field J, Machin D. Acupuncture compared with placebo in post-herpetic pain. *Pain*. 1983; 17: 361-68
44. Tavola T, et al. Traditional Chinese acupuncture in tension type headache: a controlled study. *Pain*. 1992; 48(3): 325-29
45. Moore ME, Berk SN. Acupuncture for chronic shoulder pain: an experimental study with attention to the role of placebo and hypnotic suggestibility. *Annals of Internal Medicine*. 1976; 84(4): 381-84
46. Laitinen J. Treatment of cervical syndrome by acupuncture. *Scandinavian Journal of Rehabilitation Medicine*. 1975; 7(3): 114-17
47. Mendelson G, et al. Acupuncture treatment of chronic back pain: a double-blind placebo-controlled trial. *American Journal of Medicine*. 1983; 74(1): 49-55
48. Cheng RSS, Pomeranz B. Electrotherapy of chronic musculoskeletal pain: comparison of electroacupuncture and acupuncture-like transcutaneous electrical nerve stimulation. *Clinical Journal of Pain*. 1987; 2: 143-49
49. Tandon MK, Soh PFT, Wood AT. Acupuncture for bronchial asthma? A double-blind crossover study. *Medical Journal of Australia*. 1991; 154: 409-12
50. Day RL, et al. Evaluation of acupuncture anaesthesia: A psychophysical study. *Anaesthesiology*. 1975; 43: 507-17
51. Ekblom A, et al. Increased postoperative pain and consumption of analgesics following acupuncture. *Pain*. 1991; 44: 241-47
52. Haker E, Lundeberg T. Acupuncture treatment in epicondylagia: a comparative study of two acupuncture techniques. *The Clinical Journal of Pain*. 1990; 6(3): 221-26
53. Gemmill HA, Jacobsen BH. Time-series study of auriculotherapy in the treatment of shoulder pain. *Journal of the Australian Chiropractors' Association*. 1990; 20(3): 82-84
54. Richardson PH, Vincent CA. Acupuncture for the treatment of pain: a review of evaluative research. *Pain*. 1986; 24(1): 15-40
55. Bhatt-Sanders D. Acupuncture and rheumatoid arthritis: an analysis of the literature. *Seminars in Arthritis and Rheumatism*. 1985; 14(4): 225-31
56. Ter Riet G, Kleijnen J, Knipschild P. Acupuncture and chronic pain: A criteria based meta-analysis. *Journal of Clinical Epidemiology*. 1990; 43(11): 1191-996
57. Patel M, et al. A meta-analysis of acupuncture for chronic pain. *International Journal of Epidemiology*. 1989; 18(4): 900-06
58. Aldridge D, Pietroni PC. Clinical assessment of acupuncture in asthma therapy: discussion paper. *Journal of The Royal Society of Medicine*. 1987; 80(4): 222-24
59. Hsiang-Tung C. Neurophysiological basis of acupuncture analgesia. *Scientia Sinica*. 1978; 21(6): 829-43
60. Eadie MJ. Acupuncture and the relief of pain. *Medical Journal of Australia*. 1990; 153: 180-81
61. Gracely RH, et al. Placebo and naloxone can alter post surgical pain by separate mechanisms. *Nature*. 1983; 306: 264-5
62. Mendelson G. Acupuncture analgesia II. Review of current theories. *Australian and New Zealand Journal of Medicine*. 1978; 8(1): 100-05
63. Basbaum AI, Levine JD. Opiate analgesia: how central is a peripheral target? *New England Medical Journal*. 1991; 325(16): 1168-69
64. Stux G, Pomeranz B. *Acupuncture textbook and atlas*. Springer-Verlag. Berlin. 1987
65. National Health and Medical Research Council. Report of Working Party on acupuncture. Canberra. 1989
66. Deyo RA, et al. A controlled trial of transcutaneous electrical nerve stimulation (TENS) and exercise for chronic low back pain. *New England Journal of Medicine*. 1990; 322(23): 1627-34
67. Langley GB, et al. The analgesic effects of transcutaneous electrical nerve stimulation and placebo in chronic pain patients. *Rheumatol. Int.* 1984; 2: 1-5
68. Thornsteinsson G, et al. The placebo effect of transcutaneous electrical stimulation. *Pain*. 1978; 5: 31-41
69. Botek ST. One doctor's acupuncture odyssey. *Medical Tribune*. May 2 1984.
70. Wilson PR. Pain research - The science and the art. (Editorial) *The Clinical Journal of Pain*. 1990; 6(3): 171-72
71. Evans FJ. The placebo response in pain reduction. *Advances in Neurology*. 1974; 4: 289-96
72. Carron H, Epstein BS, Grand B. Complications of acupuncture. *Journal of the American Medical Association*. 1974; 228(12): 1552-54
73. Blanchard BM (letter). Deep vein thrombophlebitis after acupuncture. *Annals of Internal Medicine*. 1991; 115(9): 748
74. Goldberg I. Pneumothorax associated with acupuncture. *Medical Journal of Australia*. 1973; 1: 941-42
75. Ritter HG, Tarala R. Pneumothorax after acupuncture. *British Medical Journal*. 1978; 2(6137): 602-03
76. Scheel O, et al (letter). Endocarditis after acupuncture and injection treatment by a natural healer. *Journal of the American Medical Association*. 1992; 267(1): 56
77. Simonov PV, Paikin D. The role of emotional stress in the hypnotisation of animals and man. In: Chertok L, ed. *Psychophysiological mechanisms of hypnosis*. Springer-Verlag. New York. 1969
78. Dale RA. The origins and future of acupuncture. *American Journal of Acupuncture*. 1982; 10: 101-20
79. O'Neill A. Sharpening the front end: investigating acupuncture. *Australian Journal of Acupuncture*. 1990; 14: 38-54
80. Baumann R. (Chairman), on behalf of the Council of Medicine of the Academy of Sciences of the GDR. Statement regarding acupuncture by the Medical Council of the Academy of Sciences of the German Democratic Republic. 1981
81. Mendelson G. Acupuncture analgesia I. Review of clinical studies. *Australian and New Zealand Journal of Medicine*. 1977; 7(6): 642-48
82. Prance SE, et al. Research on traditional Chinese acupuncture - science or myth: A review. *Journal of The Royal Society of Medicine*. 1988; 81(10): 588-90