HARRIET BEINFIELD, LAC, AND EFREM KORNGOLD, LAC, OMD EASTERN MEDICINE FOR WESTERN PEOPLE

Interview by Bonnie Horrigan • Photography by Anne Hamersky

arriet Beinfield, LAc, and Efrem Korngold, LAc, OMD, have practiced Chinese Medicine for more than 25 years. They were among the first Americans to be trained at the College of Traditional Acupuncture in England. Together they have written two books:

Between Heaven and Earth: A Guide to Chinese Medicine (Ballantine Books; 1991) and The Chinese Modular Solutions Handbook for Health Professionals, as well as many articles. They both lecture and teach nationally and maintain a private practice—Chinese Medicine Works—in San Francisco.

After becoming a licensed acupuncturist, Korngold studied herbal medicine at the Kunming Traditional Chinese Medicine Research Institute and the Shanghai College of Traditional Chinese Medicine. He received his doctor of Oriental medicine degree from the San Francisco College of Acupuncture and Oriental Medicine in 1986. Korngold taught at the San Francisco College of Acupuncture and Oriental Medicine, is currently on the faculty of the American College of Traditional Chinese Medicine, and is a diplomate of and served as an examination consultant to the National Certification Commission for Acupuncture and Oriental Medicine.

Beinfield received her licentiate acupuncture degree in 1973. She has served as acupuncture staff at both the University of California—San Francisco Medical Center and the Center for Pain Relief and Addiction Control in San Francisco. She is a diplomate of the National Certification Commission for Acupuncture and Oriental Medicine.

Alternative Therapies interviewed the couple while sharing a cup of tea in their San Francisco home.

Alternative Therapies: You have both been practicing Chinese medicine for 25 years. In your estimation, what does Chinese medicine do?

Efrem Korngold: Its overarching goal is to cultivate people's capacities and to correct whatever underlying disturbances are causing distress. In order to achieve this, it's useful to investigate how a disorder arises so the process can be disassembled and reorganized, not merely masked. This noble goal is not always

attainable, but the medicine compels us to strive for it. In Chinese medicine everything is linked with everything else—not just as an idea, but in actuality. Health and illness coexist and arise out of the same conditions. Disease doesn't come from nowhere—it emerges from a lived life. Simply put: Chinese medicine not only focuses on the content (the disease), but also on the context (the person who has it).

AT: What do you mean by "the context"?

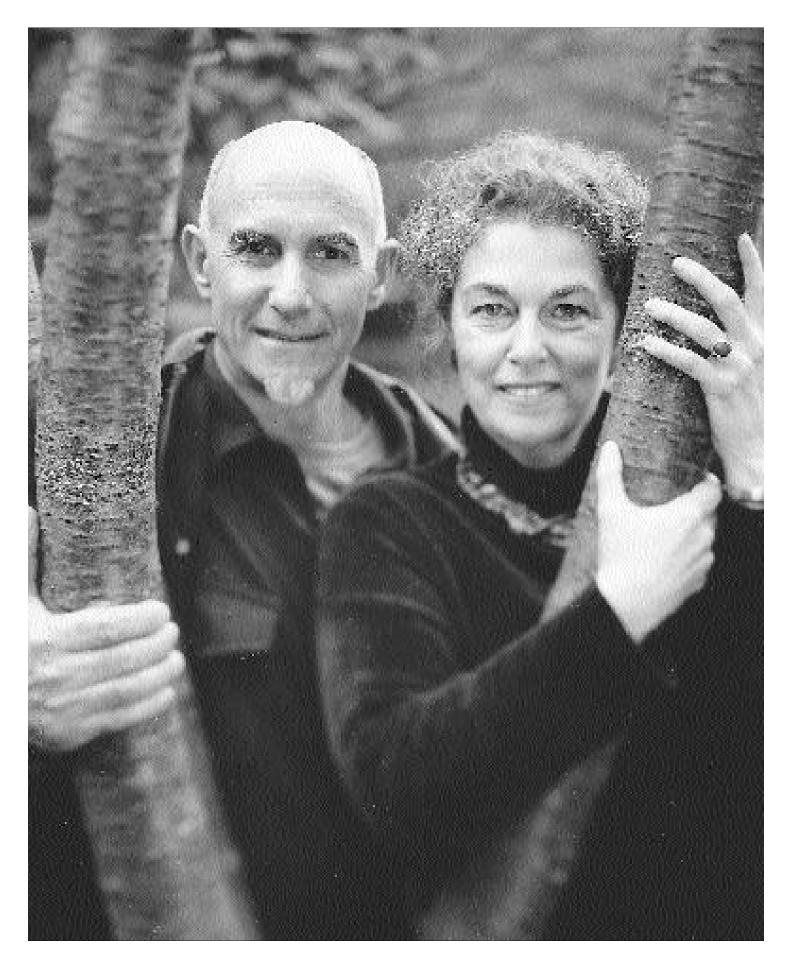
Korngold: Everybody exists within a matrix that includes a family, job, home, neighborhood, geographic area, and psychological and cultural milieus. Chinese medicine considers the impact of all these influences. We attended a workshop recently with Dr John Shen, an admired elder of the Chinese medical community, who is in his 80s. Reflecting on more than 50 years of practice, he said that while the medicine is good—the herbs are potent and the acupuncture is effective—the ultimate success of any treatment depends on how a person accepts and uses it. He talked about what he refers to as "taking care of your life," which is something that medicine can't do for you. In the Taoist-Confucianist tradition, physicians were instructors who helped people learn how to live.

Dr Shen told a story about a 38-year-old woman who, even after two surgeries, had unremitting uterine bleeding. She asked Dr Shen if he could help. He looked at her, felt her pulse, and talked to her a little bit. Then he said, "I think I can help. But first I need to do a test to figure out why you're bleeding. You need to go home and stay in bed for 2 weeks." She panicked and said, "I can't do that. I'm an attorney—I'm too busy." To which he replied, "Then I can't help you." She was incredulous and asked what he meant. He explained: "I can't decide what to do for you until I figure out why you're having the problem. It's possible that you're bleeding because of the surgery. On the other hand, it may simply be due to your body condition. But they require different approaches."

He suspected that she was bleeding because she was debilitated. She was a young woman, but was already exhausted. She finally agreed to the test; after 2 weeks, the bleeding stopped.

Beinfield and Korngold believe that we can eliminate much of today's suffering by helping people find their correct relationship with themselves, each other, and the world. "Chinese medical thought affirms the interconnectedness of all things," they say.

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This is Chinese medicine. An intervention not only gave diagnostic information the doctor needed to confirm his hypothesis, but also treated the patient. She got better. Equally important, it educated her about the nature of her condition. She realized that a major component of her problem was the fact that she was chronically exhausted, even though she didn't think of herself that way. Dr Shen was effective by thinking and acting through the mind of Chinese medicine, even before he used acupuncture or herbs.

Harriet Beinfield: There are several legitimate languages to use in talking about Chinese medicine—the scientific one of measuring electrical skin resistance at acupuncture sites, the release of peptides and hormones stimulated by the needles, the pharmacology of herbal compounds. There's also the qualitative, clinical language of whether people feel they've been helped—outcome studies. On the one hand, Chinese medicine is a method of restoration and recovery; on the other hand, it's a systematic way of knowing, a medical epistemology that includes a method of self-exploration that helps people develop in less tangible ways than taking herbs, receiving acupuncture, or following a new diet.

There's an ancient Chinese medical text that names three levels of healing. The lower level asks us to address a person's complaints to diminish her pain. The middle level directs us to understand someone's nature. And the upper level charges us to assist a person in fulfilling his or her destiny. Most people automatically associate Chinese medicine with the lower level: Can acupuncture relieve back pain or hot flashes? Can Chinese herbs improve immunity? What should I eat to make my acne go away? Complaints are what initially draw people to Chinese medicine, but what seems to keep them enrolled is that they feel they are being seen, heard, and helped within a broad frame of reference, and that everything they are and bring with them is relevant to the process.

While working with people over the last 25 years, I've noticed that acupuncture can produce desirable side effects. Shifts in people's lives occur; dreams change, and they report elevated states of awareness. Some of this may be due to the release of endorphins, but my intuition is that acupuncture acts in ways for which we don't have a language. It integrates all the layers of our being, our invisible subtle bodies with our wholly palpable physical selves. The outcome is a sense of inner alignment that people deeply crave. The experience of feeling connected pleases them, and Chinese medicine's ability to deepen that feeling keeps them coming back. Acupuncture gives an authentic meaning to the term "integrative medicine."

I saw a woman with a uterine tumor that had metastasized to her bones. Besieged with nausea and vomiting, she couldn't keep water down, let alone food, but wanted to avoid hospitalization and IV feeding. She had extreme pain in her legs and hips, but morphine made her feel groggy and tired. A combination of acupuncture, an herbal fomentation on her abdomen, powdered ginger under her tongue, and rectal injections of herb broth halted the nausea within 1 day. She progressed to sipping herb broth and rice gruel. Acupuncture every 6 hours enabled her to discontinue the morphine. She had complained of feeling that her upper body

was disassociated from her lower body. Minutes after the needles were in place she felt as if her abdomen and lower limbs were rejoining with her upper body, returning the sense of coherence she wanted. The acupuncture altered not only her perception of pain, but seemed to soothe and lighten her consciousness. She felt more charged and a greater sense of calm.

AT: Reading your book, I was struck by the idea that in Chinese society, which highly values the collective good, the medicine cares for the individual. Yet in America, where individuality is so highly regarded, the medicine tends to overlook the unique needs of the individual.

Beinfield: That's right. It's been especially problematic in designing research, because people are focused on determining the best acupuncture points for migraine or rheumatoid arthritis. Typically, the Chinese medicine practitioner will answer, "It depends on the person." If the arthritis is due to an invasion of heat (inflammation), it's different from that caused by cold (reduced circulation) or dampness (accumulation of fluids). In the first case you would administer cooling herbs; in the others you would use warming or diuretic herbs. And sometimes the kidney, liver, or spleen networks require strengthening, so you need to include herbs to correct their deficiencies. Every person is an original ecosystem. You assess the individual terrain to design the most appropriate intervention. But usually Western researchers want standardized treatments for similar complaints.

The vocabulary of Chinese medicine preceded Western medical language by several millennia, so the same words, like "kidney" or "liver," have different meanings. The organs are called "networks" because they are functional physiological and psychological domains, not discrete anatomical structures.

AT: A person could take echinacea to prevent a cold, or a popular Chinese herb like *Astragalus*. Both are biological interventions, but I have a feeling the result wouldn't be the same. Could you talk about that?

Beinfield: Pharmacological research demonstrates that *Astragalus* and echinacea both have immune-modulating properties, so in the sense that they both help to protect the body from the cold or virus, they're similar. But Chinese medicine tends not to use herbs as single bullets: a single treatment for a single cause. Because the body itself is complex, the Chinese approach is multimodal to match that complexity. Herbs are usually used in synergistic combination rather than as specific agents.

If somebody is weak and pale, they lack qi (pronounced *chee*). If they are also restless, have dry skin and trouble sleeping, this suggests depleted blood. In this case it makes sense to give herbs that replenish qi and blood. But often when someone is weak, she doesn't have the capacity to distribute the qi and blood adequately, so it's necessary to include herbs that mobilize and circulate the nourishment that the herbs contribute. That's a simple example of how herbs in combination are more effective.

Korngold: Every medicinal plant has a complicated profile of constituents, properties, and effects. Investigators may be trying to isolate which polysaccharide fractions in echinacea and *Astragalus* confer their immune-modulating effects, but herbs have many influences. And then when you begin to combine two, three, five, a dozen, or more ingredients in a formula, you have a level of complexity that is daunting to the Western medical research model. From the Chinese medicine point of view, echinacea is a cold, dry, detoxifying herb that counters inflammation and swelling, whereas *Astragalus* is a warm, nutritive herb that strengthens resistance by invigorating the body. Echinacea is used in times of illness, whereas *Astragalus*, like ginseng, is an adaptogen that restores the body's

capacity not only to resist illness, but to work, reproduce, and store energy.

Let's use another example, such as taking St John's wort for depression. Some people respond immediately, others slowly, and some seem not to respond at all. This doesn't necessarily mean that the herb is not working—it may mean that by itself it's insufficient to achieve the desired result. In Chinese medicine we "listen" to the pulse through our fingers to "view" the ongoing process of the body. When we introduce a new influence like St John's wort, even if the person doesn't feel a change subjectively,

we can often tell whether there's been an impact by the alterations in the pattern of the pulse. Perhaps St John's Wort is having an effect, but not enough for the person to notice, and other herbs must be added to the treatment to potentiate it.

AT: So if a woman came to you with depression, you wouldn't just talk to her. You'd feel her pulse, look at her tongue—any number of diagnostic procedures, right?

Korngold: By asking questions, feeling the pulse, looking at the tongue, and examining the body, we learn the characteristics of the problem and the nature of the person. Depression is just a symptom—a signal that something isn't right. We want to investigate what deeper mechanisms are responsible, like which of the organ networks and body constituents are not functioning well. The same symptom, depression, can have different sources. A disharmony of the lung and liver or of the kidney and heart can produce feelings of hopelessness, irritability, and apathy.

On the other hand, a disharmony between the kidney and

heart could variously be experienced as a panic attack or as a recurring urinary tract inflammation. So people with different symptoms may have the same underlying problem, requiring similar treatments, yet people with the same symptom may need completely different remedies. St John's wort by itself may work better for a kidney-heart disharmony, and not as well for a lung-liver disharmony.

Here's another example. Take a group of people with digestive problems—one person will get migraine headaches, another sinusitis, another irritable bowel syndrome, and another will have bad breath. Diagnosis shows that they all have a spleen disturbance characterized by heat, dampness, and qi stagnation. Despite the

variety of symptoms, these people would basically require the same herb formula, and many of the same acupuncture points.

AT: How would you know this?

Korngold: The pulse and tongue and signs and symptoms supply the clues. Then I evaluate the symptoms according to the person's constitutional type—the self-organizing pattern that forms the milieu within which these symptoms arise. The idea of types is a universal concept in the West and East. In Hippocratic Hellenic times, the four

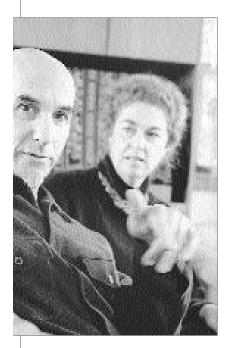
Hellenic times, the four types were phlegmatic, bilious, sanguine, and choleric. We expanded the notion of five types—based on the Chinese theory of five phases—that both describe a person's styles of being and help to predict past, present, and future dispositions toward illness.

AT: Until I read your book, *Between Heaven and Earth*, I did not know that Chinese medicine considered the deep connection between psyche and soma.

Beinfield: The connection is seamless. When I encounter a patient, I receive information globally. Then I use the categories of Chinese medicine to decode it. In our book we describe how five-phase thinking elaborates five broad classifications into which people can be grouped: fire, metal, water, wood, and earth. So I immediately begin figuring out where they fit, according to their most obvious and striking idiosyncrasies.

An earth, fire, or wood type may come more than halfway to meet me, spilling over boundaries, even invading my space.

HERE'S AN ANCIENT
CHINESE MEDICAL TEXT
THAT NAMES THREE
LEVELS OF HEALING[:] ...
ADDRESS A PERSON'S COMPLAINTS TO DIMINISH HER
PAIN, ... UNDERSTAND SOMEONE'S NATURE, ... [AND]
ASSIST A PERSON IN FULFILLING HIS OR HER DESTINY.







But this would be completely out of character for a metal or water type. Metal types live carefully within their bodies, contained, respectful of boundaries, prudent and restrained. They stay in their own space. They are methodical, love-of-logic people who enjoy rituals and are willing to follow rules. So if a patient were a metal type, it wouldn't surprise me if he or she began with questions in the service of clarifying the relationship: "How much is this going to cost? How often will I need to come? What should I wear? Can I read you the list I've made of my complaints?"

If a wood type were to have questions, it would be out of a sense of urgency and impatience. The motivation would be different: "How long will this take?—I need to get back to business. When can I expect results with my asthma? How soon will I get regular periods without cramps?"

So how people are, the way they carry themselves or walk, their "body language," and their level of animation are all diagnostically relevant, not just their medical records.

AT: Can you give me an example of how knowing a person's type can influence treatment?

Korngold: One of my patients, a physician, is a water type. He is a deep thinker, skeptical, empirical, and reluctant to put himself in someone else's hands. A water type is organized at his core by the kidney network, which governs the ear. He wanted to see whether Chinese medicine could reverse his progressive hearing loss, or at least retard its progress. Meanwhile, he also complained of chronic irritable bowel syndrome and prostatitis. We made little impact on his hearing, but his prostatitis, digestion, and overall health improved considerably.

By identifying him as a water type, I knew my approach

could not be aggressive, and that it would take him time to become comfortable. When he felt better following acupuncture or after taking an herbal prescription, he'd say, "I think that helped me, but how do I know? I could have gotten better by doing nothing." Yet he continues to come back after several years, suggesting that he feels as though he is deriving benefit.

Beinfield: Once I recognize someone as a metal type, I know a lot about them. Their internal climate predisposes them to dryness and heat and their nasal and respiratory lining is sensitive to irritation, so herbs that are moisturizing and cooling can compensate for their vulnerability. They are also likely to need loosening up or relaxing. This will show up in their relationship with other people, their job, how they inhabit their physical space, and how they feel within themselves.

AT: But this is not about changing all metal types into wood people, is it? One type is not preferable over another?

Beinfield: It's not about changing someone, it's about helping her be better at being who she is. Usually our strengths are linked to our weaknesses. Sometimes metal types are so good at adhering to familiar patterns of behavior that they have difficulty initiating exploratory adventures. Yet sometimes that's exactly what's going to be helpful to them. A metal type will also be predisposed to problems related to tension in the neck, shoulders, chest, or abdomen. Metal is expressed in the body through the functions of the lungs and large intestine. The polar dynamic between the lungs (metal) and the liver (wood) creates the possibility of conflict: the lungs are responsible for dispersing qi and blood down and inward, and the liver is responsible for pushing qi and blood up and outward. If there is undue friction in this

relationship, a rhythmic flow is disrupted. Sometimes the liver thrusts more blood and qi up than the lung can send down. When circulation is blocked above the chest, this causes tension in the shoulders and neck. If these forces collide in the chest, it causes a feeling of tightness in the chest or wheezing.

One clue leads to bigger clues, and these clues are multivalent.Our job is to generate a complete picture, using pathology, ontology, and personality as the palette with which to paint a meaningful portrait.

Korngold: The idea that your strengths are your weaknesses means that there's always a duality at work—there's always yin and yang. You can't definitively say, "Oh, men are yang and women are yin, or that anger is hot and fear is cold," because all things exist in relation to each other. In other words, these types are not shallow, rigid, or simplistic. They're not static pigeon holes; they're characteristic strategies, more like verbs than nouns. We're equally endowed with our basic parts—lungs, heart, kidneys, liver, and so on. But our way of coordinating all of this is individualized, becoming even more complex as we grow and mature. The essence of how we put ourselves together moment to moment is quite unique and characteristically us.

You catch a cold differently than your partner. There are many circumstantial factors that come into play, depending on your age, the status of your immune system, but still, there is a characteristic way that you get sick which is different from your partner's. So we can't treat you both exactly the same and expect you both to get well in the same way or at the same rate.

AT: I'm beginning to understand that I see "things," and you have trained yourself to see the relationships *between* things. How is Chinese medicine captured in the language?

Korngold: The conceptual language—as is true for other medical paradigms—is simultaneously descriptive and heuristic. There are distinct and complementary categories for the underlying processes such as the body constituents (qi, moisture, blood), the organ networks (liver, heart, spleen, lung, kidney), eight parameters (yin-yang, cold-hot, depletion-congestion, interior-exterior), five phases (wood, fire, earth, metal, water), three burners (chest, diaphragm, abdomen), three treasures (mind, qi, essence), developmental cycles (7 years for women, 8 for men), five seasons, and more. What this represents is something like "all roads lead to Rome." Each of these means of describing and interpreting the data leads to a deeper insight into the nature of the organism and its unique modus operandi, its tao.

If I start by evaluating qi and blood, that will lead me into an exploration of how the organs are interacting, which will uncover emotional and existential issues, which will illuminate behavioral habits and interpersonal styles. When these separate stories are woven together into a unified moving picture, I will be led to an understanding of how, where, and when to intervene; and even though it may be small or discreet, it will reverberate throughout the organism and provoke a shift in an individual's physiology, awareness, and behavior. Through that, his or her innate mechanisms for repair, recovery, and maturation are mobilized.

The life of the body continually reveals itself to our gaze, and Chinese medicine teaches us how to see it, how to seek it out, how to expose it, how to remove obstacles from its path, and how to nudge it back into the current of its own destiny.

Beinfield: Sometimes it's challenging to know where to begin explaining Chinese medicine—in a sense it's arbitrary because Chinese medicine informs us about how organs, body constituents, behaviors, eating patterns, and emotions are interrelated. So it doesn't matter whether we're talking about a sore throat, irritability, fibroids, or cystitis, because what we're always looking at is a multidimensional dynamic at play within the body and between the key team members responsible for a given manifestation. It's not linear, nor is it confined to one layer.

There can be a kind of tug-of-war, or processes moving in opposite directions. A person could have chronic diarrhea due to cold in the abdomen and acute bronchitis due to heat in the chest. Dampness and dryness can coexist—the mucous membranes can be dry in someone with edema. This person will feel lethargic, chilly, and heavy all over—all signs of dampness and cold—and at the same time feel thirsty, itching, and burning in the nose, throat, and chest—all signs of dryness and heat. A deep, chronic (yin) problem like diabetes can be the backdrop for an acute (yang) problem like healing a wound. People try to oversimplify with either-or thinking—is it yin or yang? Am I hot or cold? Wood types can be well organized, sharing characteristics with metal types. Extroverted fire types also need the solitude that water types hunger for much more of the time.

AT: How do you keep yourself from becoming entangled? Because you're also a type.

Beinfield: Chinese medicine trains you to develop yourself as an instrument. You don't keep your subjectivity outside the door. You use your senses and emotional responses to read the patient.

AT: Which is completely different from Western medicine, which stresses objectivity and noninvolvement. What are some of the other differences?

Beinfield: In Western medicine, the doctor is the servant of the technology, the emphasis being on the replicable effects, independent of the agency of the doctor. In traditional medicine, techniques are an extension of the doctor's intentions, his or her qi. So state of mind and relationship with the patient count.

Western medicine focuses on defects, how to repair a torn ligament, how to excise a malignancy, how to reduce cholesterol or annihilate bacteria. It concentrates single-mindedly on pathology. Chinese medicine is also concerned with relieving pain and reversing disease, but not solely. It also has the capacity to reinforce optimum function by coaxing the kidneys to perform better,

by activating the circulation of blood, by encouraging tranquility. Chinese medicine enhances the good in order to constrain the bad. It seeks to recreate a harmonious internal milieu.

Korngold: There's a famous paragraph in the *Nei Jing*, an ancient text that's quoted over and over again: "The superior physician doesn't allow the patient to become sick." The quote goes on to ask: "What's the point of digging a well when you're already thirsty, or of forging weapons when the war has already begun?" Then it's too late. The good doctor maintains the reservoir so it doesn't dry up. That's prevention. The idea of prevention in the West is a kind of adversarial one—a preemptive strike. We'll prevent breast cancer by cutting off both breasts. But then again, there is no absolute dogma. I have been personally grateful to Western medicine. My father just had successful coronary bypass surgery, and when my son was an infant, he had holes in his heart surgically repaired. Aggressive intervention is sometimes called for, but deliberation should be generous.

Beinfield: There are several meta-questions: Who are people and what is their purpose? What is the mission of medicine? If you understand life as a material phenomenon, you look at humans as physical, biological, chemical entities, and you define medicine as the attempt to correct pathologies within those physical, biological, chemical domains. But if you define the purpose of life as being able to experience happiness, to overcome ignorance through the development of the mind, and you see the mind as developing in a long-term sense, perhaps not even confined to one biological lifespan, then the goal of medicine is to help somebody fulfill that purpose.

It's critical to help someone understand who she is and where her blindspots are. In our ignorance lies our suffering. By helping someone become a careful self-observer, cultivate her mind, reflect upon and adjust her actions and habits, you're helping her. And this is the sphere of healing that may or may not relate to the realm of cure.

AT: I have to ask this: Why does acupuncture work, according to the Chinese? I know what Western medicine says, but what does Chinese medicine say?

Korngold: Many Western scientists, such as Bruce Pomeranz, have studied acupuncture in relation to pain. And they have made an enormous contribution. For instance, Pomeranz has refined—through his experimentation and research—what is already part of the tradition of Chinese medicine, because he investigated the phenomenon called De Qi, which is a particular kind of subjective event that happens when the needles are inserted and manipulated to produce the analgesic effect. He has been able to replicate this electronically without needles, and has identified that there are certain deep muscle fibers that are part of the endorphin mechanism—both locally and globally in the body—that mediate this response.

But this type of phenomenon in Chinese medicine is only

one of the recognized and very well-defined aspects of qi. There's another acupuncture technique called Dao Qi, which means that by using the needle in a particular way, you can produce in the individual a sensation of something traveling from one place to another pretty much along the pathways of the meridians. So an adept practitioner can make the qi run wherever he or she wants it to go. This is particularly useful in treating pain and conditions that are associated with pain, such as bursitis or back pain. The basic principle is that pain is the result of blockage, a lack of circulation of important constituents that not only nourish the tissue, but also provide a medium for the elimination of metabolic wastes. So when this circulatory system isn't functioning, two things happen: there isn't nourishment and there isn't elimination. The outcome is discomfort.

Essentially, what you are treating is circulation—pain is usually the consequence of disturbed flow. So the technique called Dao Qi is a very precise method of inducing circulation in a particular part of the body. That's how acupuncture works, by influencing the circulation of qi.

AT: In what universe do the meridians exist? I'm not being sarcastic. I ask that question seriously.

Korngold: That's a good question. What are the meridians and where are they? Nobody has dissected them. The medical scientist Robert Becker mapped the channels electrically. He showed that there are electrophysiological loci on the skin and within the muscle layers that correspond exactly to the points on acupuncture charts. He concluded that the meridians are an alternate regulatory system in the body that has to do with electromagnetic currents and electromagnetic organization of tissue growth and repair, and that this has a lot to do with how the body heals when there's an injury. So now we talk about a "current of injury." When tissue is traumatized, there's actually a depolarization that occurs. In the process of restoring the electromagnetic field and current to normal, the tissue heals. And it appears that you can manipulate this electrically, as well as with acupuncture needles.

Clearly there is an aspect of our functioning that is intangible, but still demonstrable. We now have the technology to identify these very subtle fields and currents. They are very, very small, but we can measure them and see how they fluctuate. Acupuncture influences these events. It also influences hormonal secretions. You can measure hormonal changes in the blood as a result of acupuncture. You can measure circulatory changes. Acupuncture seems particularly to affect microcirculation. The vascular beds that surround every organ and tissue are impacted almost immediately by acupuncture. It changes the pulsatory activity of the capillaries, so that one of the most common effects of acupuncture is the appearance of an erythema around the needle, indicating an increased vascularity at the locus of the point. But that increased vascularization is also taking place in the deeper tissues and organs of the body.

Beinfield: In Chinese medicine this phenomenon relates to the saying, "Where qi goes, blood flows."

Korngold: Qi and the sensation of qi are different from nervous impulses, because the sensations of qi travel more slowly. A certain percentage of the population—12% to 15%—are called "acupuncture sensitives." These people will tell you precisely where the sensation is going, corresponding exactly with the recognized meridian pathways. The meridians traverse the surface of the body and penetrate its interior. They organize and regulate all other systems including the circulatory, lymphatic, and neural networks, linking them so they function in a coordinated way.

AT: Is qi different from consciousness?

Korngold: Qi includes consciousness. Qi is everything that has dynamism—anything that moves or changes is a manifestation of qi. Qi is said to have been born from the division of tao, of the undifferentiated whole becoming yin and yang. Qi is the motivating force, and anything that has to do with actualization, movement, and change is qi. So the mind, a process of the organism in continuous dialogue with itself—sensations, images, and thoughts in constant flux—is an expression of qi. It is qi.

That's why you can use your mind to regulate your body. That's the basis of qigong, which is a system of self-regulation for developing our mental and physical capacities. Qi is the fundamental reality. It exists along a continuum, just like visible and invisible light. We say things are subtle—mind—at one end, and solid—body—at the other. But they are all part of the same continuum. Mind is simply one end of that spectrum. You could use the analogy of water. At one end of the spectrum water is frigid, hard, and dense; at the other end it's a sublime vapor. But it's still H₂O.

The Chinese use water repeatedly as a metaphor for qi, because it's so mutable. It can assume any shape, constantly transforming from one state into another. So the body—we shouldn't just say "the body," we should say, "the life of the person"—is manifold. If we're paying attention to what's most deeply inside us, we call that "the mind." If we're paying attention to what's most at the surface, we call that "skin." But qi, as scholar Nathan Sivin says, is simultaneously what makes things happen in stuff, stuff that makes things happen, and the stuff in which things happen. Qi is what gives me my shape. It gives everything a form and a quality, and it's the thing that you and I share that's exactly the same.

AT: What about the concept of self-awareness? The "I" that is aware of "I," the watcher—what is the Chinese conceptualization of that? Or is there such a thing?

Korngold: There are three primary philosophical ideologies that inform Chinese medicine: Taoism, Confucianism, and Buddhism. They share a fundamental proposition that there is not an isolatable, immutable self that is wholly separate from the world. For practical purposes, there's what the Buddhists would call a "relative self," the sense of identity or continuity that we associate with our ongoing experience.

There is no absolute self, there is just Tao. And each of us embodies that Tao, just as we live within it. To the degree that we recognize ourselves as unique, we have a sense of a separate self. But clearly it's a transient, constantly spontaneous arising. Qi, which is universal, follows its own nature, its own laws, and is completely unpredictable. It could be anything at any time, in any place, and is, in fact, all things at all times in all places. But that's not really how we experience our day-to-day selves as Efrem or Harriet or Bonnie. The Taoist view is that the true essence of life is unknowable.

AT: That's the key that opens the door, isn't it? If you try to know it as "self," you can't know it.

Korngold: Lao Tzu wrote in the *Tao Te Ching*: "The Tao that can be named is not the eternal Tao. It is the unnameable that is eternally real." A name is a confinement, but Tao has no limits, no boundaries. So that which I name "Tao" is not the real Tao, but it's as close as I can get.

Beinfield: For me, it was the poetry, the cosmology of Chinese medicine that appealed to me 25 years ago, and it still appeals to me today. I feel that so many of the delusions and ignorances, so much of the suffering that we encounter today, are a result of our false perception of ourselves, the ideology of me-ism, and our false perception of what our purpose is as a culture and a society. Chinese medical thought, like Buddhist thought, affirms the interconnectedness of all things—that our relationship with all the parts of ourselves and each other is what's significant. The absolute division between self and other is a false division, just like the division between mind and body is false.

Pediatricians at the Centers for Disease Control have declared gun violence an epidemic. It's a social disease that is treatable and preventable by eliminating the underlying cause, the unbridled proliferation of weapons for profit. These physicians unwittingly voice the integrated thinking of Chinese medicine: health is not attainable without changing the underlying conditions that produce disease.

The reason we became engaged in Chinese medicine was that we were dedicated to social justice and change. We saw Chinese medicine as a model that could be helpful—not only in alleviating suffering, but in helping to reorient us, to provide another way of imagining ourselves and improve our world. One of its messages is that without healing each other, we can't truly, deeply, heal ourselves. We can't be well.

I came from a medical family and knew what conventional medicine could and couldn't do. I was curious about medical ideas that embodied a contending view, another set of values. Then I became curious about whether it worked. That's the main focus in our culture: whether something works. After 25 years of practicing Chinese medicine, I see that it *does* work, and I see *when* and a glimmer of *how*. But it's the values that are so important to me—the knowledge and wisdom embedded within it.