

Book Reviews

The Business of Healing: A Guide to Practice Establishment and Practice Management for Non-Medical Healthcare Professionals

By Robert Medhurst
Medhurst, 2008 (2nd edition)
ISBN 9780958079815

This is the second edition of *The Business of Healing*, which has been updated and revised with an additional nine new chapters, broadly covering the details of running your own business.

The book's introduction starts off with three excellent questions: What makes a good practitioner? Why do you want to be a therapist? How do you stay in practice? This is followed by chapters on practice options, location consideration, your own clinic space, security, insurance, business structure, and business costs. Other chapters deal with being in associations, client interview forms, operational considerations, policies and procedures, reception techniques, dispensary management, employing staff, marketing, regulation, safety and hygiene, ethics and negligence, financial and business management, getting started, and, finally, an extensive section on resources.

The parts of this book that I liked were the inclusion of 'advantage and disadvantage' comments at the end of some chapters and the useful tips throughout the book. For example, not buying a cheap printer,

which, we all know from experience, usually costs more in ink and wastes more paper. However, I would like to have seen a summary of advantages and disadvantages at the end of each chapter. For example, there are disadvantages to using trade/barter dollars. Trade/barter dollars are credits or points you get in return for consultations or product that you then exchange with other businesses within the barter system. However if your percentage of paying clients in this revenue stream becomes significant, you could face a cash flow issue as you will find that you cannot pay for stock from most suppliers in our industry or for your tax bill as they do not accept this currency. Another disadvantage not mentioned is about practising from home in the practice options section. In some cases, you will incur capital gains tax on the sale of your home if you claim certain expenses. One cannot overstate the importance of having a trained accountant and a good lawyer before signing or doing anything when going into business.

This book is clearly targeted towards naturopaths rather than acupuncturists

and Chinese herbalists. This is reflected in the forms and examples of documents. For example, there is no costing for a herb dispensary when one practises Chinese herbal medicine. Another is that it does not have the details of the Chinese Medicine Registration Board of Victoria in the resources section and, in fact, makes no mention of the importance of this board if you wanted to practise acupuncture or Chinese medicine in Victoria. Finally, details of our profession and association (AACMA) have not been updated. For instance, the fact the profession has HICAPS and the *Australian Journal of Acupuncture and Chinese Medicine* (the only peer-reviewed journal for Chinese medicine in the southern hemisphere) are not mentioned.

In conclusion, it is a sad fact that teaching institutions do not have the time to devolve sufficient skills for new graduates who want to go into business for themselves. This helpful and easy-to-use book should go some of the way to assisting them to get started.

Reviewed by John Deare

Acupuncture Research: Strategies for Establishing an Evidence Base

Edited by Hugh MacPherson, Richard Hammerschlag, George Lewith and Rosa Schnyer
Churchill Livingstone, 2007
ISBN 9780443100291

This book provides a comprehensive synthesis of the state of acupuncture research, and aims to address the fundamental question posed by researchers and practitioners: how and why does acupuncture work? A broad range of research themes are explored in each chapter, and the final chapter proposes thoughts and ideas about the future of acupuncture research.

There is something for every acupuncturist in this book. For practitioners looking to improve their own clinical practice, examples of research are provided that may inspire you to contribute to patient-centred research. For students and educational institutions this book will provide a valuable resource. It will also encourage those interested in initiating a career in research. To the educationalist it offers practical examples and guidelines on how acupuncture schools can make a significant contribution to acupuncture research by undertaking important preliminary studies. To the experienced researcher the book provides a valuable resource, providing an overview of acupuncture research.

A workshop held in York in 2006 was attended by almost all the authors, and the ideas and the methods for each chapter were debated. Each chapter of the book is written by authors who have a long track record of making a contribution to the development of acupuncture research.

The initial chapters provide an important foundation for the book. A review of the

history of acupuncture and acupuncture research highlights the importance of historical, cultural and linguistic issues of east Asian systems, and how the lack of consideration of applying these issues to Western research methods contributes to the methodological challenges faced by acupuncture researchers. The current Western emphasis on levels of evidence does not lend itself well to acupuncture and other complementary therapies. The evidence mosaic proposed by Fonnebo suggests a different prioritisation of research questions and activity, and this model influences the subsequent ordering of the book.

The following chapter examines patient-based research, focusing on patient patterns of use and the treatment experience of the patient. This thoughtful chapter identifies research gaps that need to be filled, an outline of research methods that can answer these questions, and plenty of references to articles providing examples of the qualitative and quantitative research methods that have been used. The chapter continues to explore research activity, focusing on measuring patient-centred outcomes, and an individualised approach to treatment. Plenty of examples of research tools currently available to measure the impact of treatment from the individual's perspective are provided. The chapter highlights the holistic nature of acupuncture treatment and how the appropriate use of research methodologies in this area can help us understand the complexity of the acupuncture consultation.

Three chapters focus on research methods to measure the effectiveness of acupuncture. The authors cover a range of research studies that facilitate measurement of the effect of acupuncture treatment in the clinical setting, through to pragmatic, exploratory and randomised controlled trials. An explanation of each method is clearly described. The place of efficacy trials is described. Potential sources of bias are explored, as is the role of appropriate controls. The authors raise the question of whether it is possible to fully control for placebo effects with the methods currently available. Final chapters are devoted to the role and place of systematic review and meta-analyses, and an overview of the research methods used to examine the physiological mechanisms and biological correlates of acupuncture. The challenges of acupuncture research are fully explored and the authors respond with suggestions for future directions.

The book led me to reflect on my own research strategies and how I can contribute to this body of knowledge; it enthused me to generate research ideas for students, practitioner research, student clinic, and my own research areas. This book offers the reader a comprehensive overview of acupuncture research, and will be a valuable resource for acupuncture researchers and inspired acupuncturists wanting to become involved in research.

Reviewed by Caroline Smith

WHO Standard Acupuncture Point Locations in the Western Pacific Region

World Health Organization, 2008
ISBN 9789290613831

In Sydney, during the month of May 2008, just prior to the commencement of the 5th Australasian Acupuncture and Chinese Medicine Annual Conference (AACMAC), there was the Australian launch of the World Health Organization document *WHO Standard Acupuncture Point Locations in the Western Pacific Region*. This book represents the consensus on the locations of the 360 acupoints that are located on the 14 main meridians. Over the period of five years, commencing in October 2003, experts from China, Japan and the Republic of Korea (and on occasions other countries, such as Australia, United Kingdom and United States of America) met on 11 serial occasions to present their ideas, debate and then finally agree on the location of most of the acupoints. Nevertheless six acupoint locations (LI19, LI20, PC8, PC9, GB30 and GV26) remained contentious and their alternative locations are given. The rationale for the project is highlighted in the foreword where 'the demand for standardization of acupuncture point locations for education, research and

clinical practice' was seen as driving the process.

The 249-page hardcover text has three sections. The first section outlines the general guidelines for acupoint location. The measuring units and their application are discussed and tabled for different regions of the body. The anatomical landmark method, the proportional bone (skeletal) measurement system and the finger-cun measurement method are explained. The accompanying 24 line drawings support the text and allow the reader to visualise the concepts of measurement.

The second section, by far the largest, locates two acupoints per page. The acupoints are arranged by channel. Each point is given its acupoint number (e.g. LU4, the fourth point on the Lung meridian) according to the WHO document *Standard Acupuncture Nomenclature* (2nd ed),¹ as well as the Pinyin and then the traditional and simplified Chinese characters. Anatomical terminology is

used to describe the location and the type of measurement system used, e.g. proportional bone or finger cun notes are often annotated, facilitating the location process. Every acupoint is also given its own three-tone line drawing to visually orientate the reader to its location.

The final section (the annex) records the consultation meetings that took place. The temporary advisers from each country, observers and the deliberations that occurred are documented for each meeting. This text represents the first time that a transparent process of consensus was achieved by leading international experts in defining the location of the acupoints associated with the main channels.

REFERENCE

1. World Health Organization. Standard acupuncture nomenclature: a brief explanation of 361 classical acupuncture point names and their multilingual comparative list. 2nd ed. Manila: World Health Organization, Regional Office for the Western Pacific; 1993.

Reviewed by Chris Zaslowski

Applied Channel Theory in Chinese Medicine

By Wang Ju-Yi and Jason Robertson
Eastland Press, 2008
ISBN 9780939616626

As an academic, I read most newly published texts on Chinese medicine. Some books re-format known material in a predictable manner and contribute very little to existing Chinese medicine knowledge in English. Some texts, on the other hand, endeavour to present new material in innovative and creative ways. *Applied Channel Theory in Chinese Medicine* is one such book. Highly readable, with a wealth of clinical knowledge borne out by decades of clinical experience from Dr Wang, this book is definitely worth reading. The book, which has been co-written by Jason Robertson, is based on his experiences in Beijing as an apprentice to Dr Wang Ju-Yi at his clinic, the Ping Xin Tang. While most of the ideas and discussion originate from Dr Wang, Robertson has done a superb job in translating and interpreting these ideas in a very scholarly and accurate manner. Robertson acts as a sounding board, asking for clarification and explanation of many concepts which required Dr Wang to make explicit his conceptual thinking. This was possible only because Robertson had Chinese language fluency and his own clinical experience from which to extend the discussion.

It is an advanced text that assumes the reader has an intimate understanding of the basic theory of Chinese medicine and acupuncture. The book has twenty chapters and five appendices and can be divided into three main sections. The first section (chapters 1–11) outlines the significance of the organ pairing in each

of the six channels (*liu jing*). Here each channel level is interpreted in terms of organ function and its relationship to classical Chinese physiology. In order to elucidate some of these relationships, the authors have used analogies such as the ‘boiling pot and steaming dumplings’ metaphor to explain the concept. Interspersed are quotes from the *Su Wen, Ling Shu* and *Nanjing* to support their ideas. This section concludes with a chapter on the extraordinary vessels that again draws on classical medical concepts but also highlights their clinical relevance.

The second section moves away from the theoretical concepts to clinical practice whereby the ‘applied’ aspect of channel theory is addressed. Readers are guided through a series of chapters which document how to palpate channels, what changes might be felt and how this leads to treatment strategies. Chapters 15–17 explore the concept of an acupoint, and specific acupoint functions such as the five transport points (*wu shu xue*), source, cleft and collateral points. This is supported by chapters on classical needling techniques, their modern clinical interpretation and a very informative final chapter on acupoint pairing.

The third section is comprised of the five appendices. These focus on the physical pathways of the channels, an analysis of the sensory organs from a Chinese medical perspective, a further six selected case studies and their analysis,

a summary of Dr Wang’s experiences with observation of the body surface and palpation of alternative pulses, while the final appendix is a short discussion on the concepts concerning Attention Deficit Hyperactivity Disorder (ADHD).

There are ample line drawings used to effectively support the text and ideas developed during the course of reading. Judicious use has been made of Chinese characters and the corresponding Pinyin for specific technical terms, for those readers interested in terminological accuracy. In addition, there are the narrative sections, coloured pink, whereby numerous stories are related concerning Dr Wang’s life as a clinician. These sections give a very personalised account of the development of many of Dr Wang’s clinical theories. Also interspersed in the text are case studies that demonstrate the application of many of the theories espoused throughout the text. Finally, there are the question and answer sections in which Robertson asks for clarification of an interesting medical concept or idea. These sections I found most interesting and they emphasised Robertson’s inquisitive and questioning nature. There is a ‘notes’ section related to each chapter and a point index as well as an extensive general index. Jason Robertson has done Western acupuncturists a great favour by working with and documenting his experiences in Beijing with Dr Wang.

Reviewed by Chris Zaslowski

Anatomical Illustration of Acupuncture Points

By Guo Chang-Qing, Hu Bo and Liu Nai-Gang
People's Medical Publishing House, 2008
ISBN 9787117089906

The two most important skills that students need to develop after learning acupuncture points (acupoints) are the ability to locate and needle acupoints accurately and safely; and to select acupoints according to their indications. A good textbook should at least cover these two items.

The earliest book in English that addressed these two areas was by Cheng,¹ published in China in 1987. The book was the main textbook for teaching acupuncture in China and in English-speaking countries for more than 10 years. It covered every aspect of acupuncture but did not provide detailed information for either of the two areas.

The current colour-printed, high-resolution book by Guo et al. (2008) is also published in China. Modern technology in imaging and printing has ensured that this book is a great improvement from Cheng. The book successfully addresses the first ability, which is often neither sufficiently discussed nor illustrated by other commonly referenced books.^{2,3}

Guo and colleagues adopted a few strategies to ensure their success. The location of each acupoint is marked on colourful pictures of human models with clear surface anatomy. Furthermore, diagrams of regional anatomy are provided to illustrate the underlying structures. In order to show the depth of needling and its relevance to other

structures, diagrams of the cross-sectional anatomy of most acupoints are also provided.

For example, the section of ST 36 *Zusanli* has two pictures and two diagrams. One picture shows its location in relation to ST 35 *Dubi* and ST 41 *Jiexi*, and the other how to locate the acupoint on the body. One diagram indicates that ST 36 is on m. tibialis anterior, and is anterior to m. peroneus longus. The other is a cross-sectional diagram showing that needling this point stimulates m. tibialis anterior and at a deeper level m. tibialis posterior. The peroneus profundus nerve is nearby. More importantly, the correct *deqi* sensation is described. For ST 36, it is 'a sensation radiating to the ankle and dorsum of the foot and toes'.

These strategies provide readers with a clear mental picture of the location and needling sensation of each acupoint. Similar strategies have been used by one early book;⁴ however, Chen (1995) has no pictures and the diagrams are only in red and black.

Other strengths of the book are that all acupoints are written not only in Chinese characters, but also in Pinyin with tones marked so that one can correctly pronounce the names. It also has detailed descriptions of the dosage of moxibustion for each acupoint, regional anatomy, actions and indications. Indications are arranged in the form

of systems as well as conditions. This addresses the second purpose that I mentioned at the start of this review.

The weakness of the book is a lack of the section 'Point Combinations' and relevant explanations that have been included in one other book.² Perhaps this is not the focus of the book. Readers also need to be aware that the code system does not always conform to WHO nomenclature. I hope, however, that the editors will address these weaknesses in future editions.

In summary, I highly recommend this book for all acupuncture students, practitioners and educators. There is no other book that has covered the location, anatomy and *deqi* sensation of each acupoint in such a detailed and illustrative manner.

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3. Qiu ML. Chinese acupuncture and moxibustion. Edinburgh: Churchill Livingstone; 1993.
4. Chen E. Cross-sectional anatomy of acupoints. Edinburgh: Churchill Livingstone; 1995.

Reviewed by Zhen Zheng