

经络

JING-LUO

CELEBRITY GUEST FEATURE:

**MELISSA
HOYER**

A 'deeply personal'
experience with
acupuncture

**A BACKGROUND
ON GUA SHA FA**

Edith Guba explores the fascinating
origins of the massage technique

**SENSE ABOUT
ANCIENT SCIENCE**

Charles Buck challenges misconceptions
about traditional Chinese medicine

AACMA OFFICIAL MEMBER MAGAZINE
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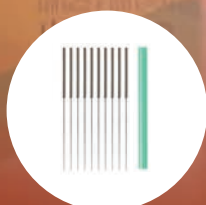
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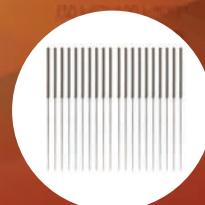
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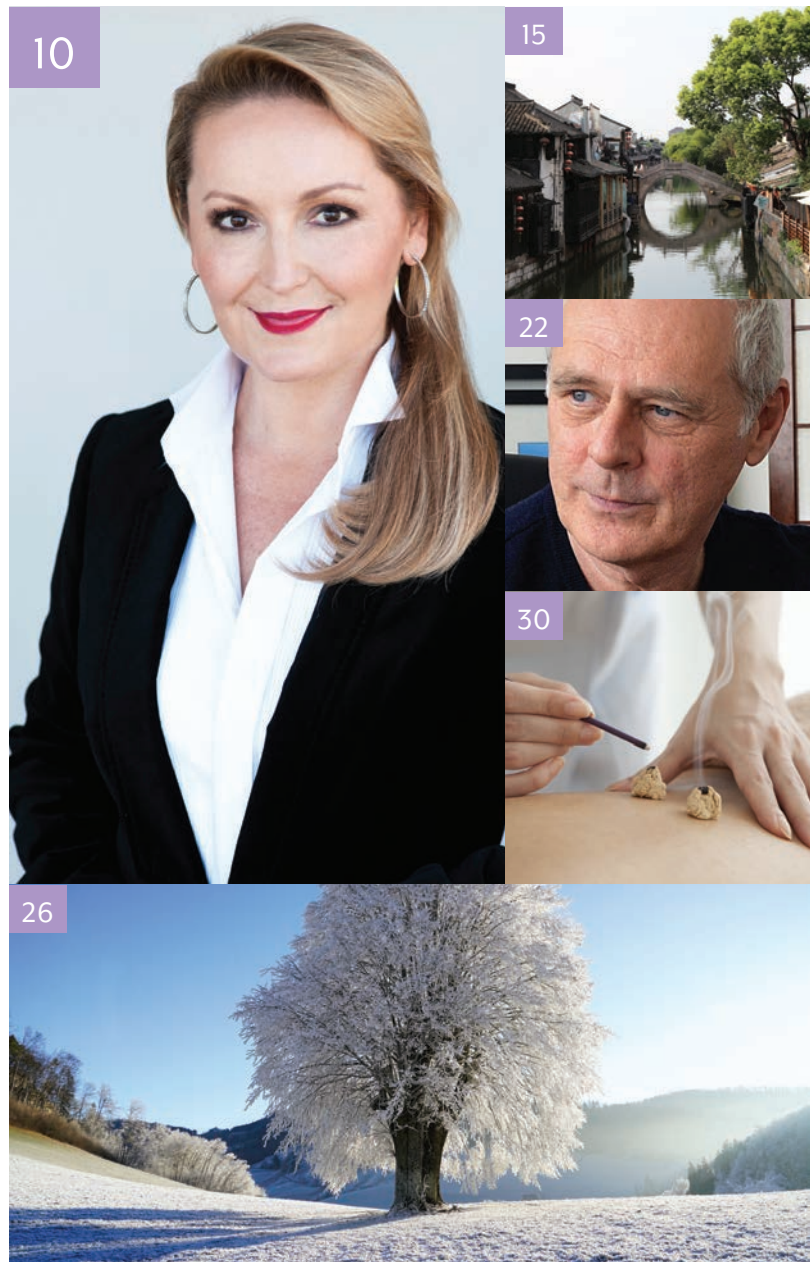
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Australian Acupuncture and Chinese
 Medicine Association Ltd.
 ACN: 010 020 390
 Registered National Office:
 Unit 1, 1990 Logan Road
 Upper Mount Gravatt, QLD 4122

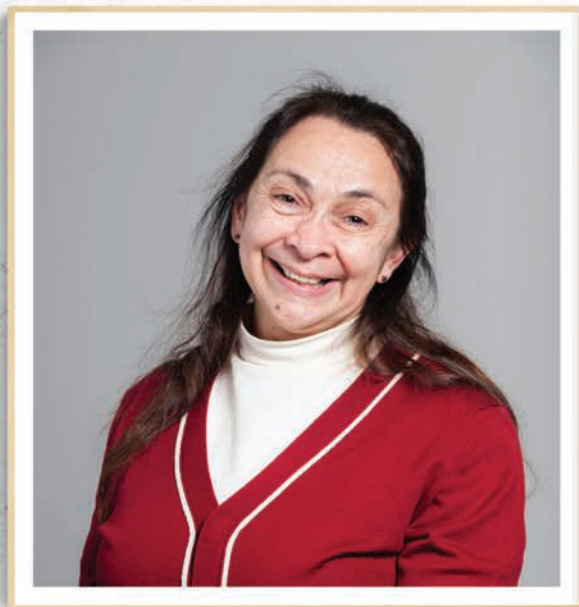
P: 07 3457 1800
 E: aacma@acupuncture.org.au
 W: www.acupuncture.org.au

Find us on:  

Jing-Luo enquiries:
 For all editorial or advertising enquiries,
 please contact Melinda Lyons, AACMA
 Communications Officer at
communications@acupuncture.org.au
 or 07 3457 1816.

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From the president's desk



Hello fellow members, so much has happened and been achieved since the last update.

Membership

AACMA has consolidated its position as the foremost association representing the majority of registered Chinese medicine practitioners, with member numbers increasing.

It seems that because AACMA is proactive in representing our members and the profession, we have had many new members transferring their membership from other professional associations.

I would like to remind members that they will receive a discount on their membership if, on their recommendation, other Chinese medicine practitioners transfer their membership to AACMA.

Annual General Meeting May 2019

The AGM in Melbourne was well attended. Updates to the new constitution adopted in 2018 were put to the membership as special resolutions and all were accepted.

One of the main changes will be to the current structure and operation of the state

committees. These changes will be adopted for the election of state committee members in March next year and implemented from May 2020.

Election of directors for two positions on the board saw Michael Popplewell join the board for the first time, with Rose Pinter re-elected.

There was an approved increase to the ex gratia payments made to the board. This was to enable directors to undertake mandatory governance training in the first six months of their term as directors.

Board attendance at the Associations Forum Conference in Canberra in July not only fulfilled the governance training requirements but also provided useful contacts in a variety of government and non-government bodies for lobbying purposes.

Matt O'Hara did not renominate for a further term. Our grateful thanks go to Matt for all the hard work, time and passion he invested for the advancement of the profession while he served on the AACMA board.

Social Media and PR

With the help of members, AACMA produced a Community Service Announcement (CSA) that was released on 22 April. Designed to raise public awareness of acupuncture and Chinese medicine, the CSA promoted the benefits of Chinese medicine treatments while highlighting the minimum 4 year Bachelor degree to become a registered practitioner.

Prof Charlie Xue, chair of the CMBA congratulated AACMA on this initiative.

A follow up campaign with a different focus is being planned for later this year.

Our social media campaign on Facebook has produced extraordinary results with the organic reach for posts far exceeding the reach of the paid posts.

Lobbying

AACMA continues to lobby the government for the inclusion of acupuncture in the Chronic Disease Management program. At time of writing, AACMA's proposal was being evaluated by the National Health and Medical Research Council.

AACMA has also submitted a paper for the integration of Chinese medicine and acupuncture into the National Strategic Action Plan for Pain Management. This submission has been sent to all the State Ministers for Health. They will deliberate over the adoption of this plan nationally and provide feedback to the federal government.

As Pain Australia was responsible for formulating the National Strategic Action Plan for Pain Management, the submission has also been sent to the CEO of Pain Australia.

Approaches have also been made to the Royal Australian College of General Practitioners. As GPs are the first point of contact for any referrals, by approaching the RACGP to raise their awareness of

the benefits of acupuncture and Chinese medicine and that we are a registered profession, our proposal is that we should be included in their referral pathways.

The Australian Union of Chinese Medicine (AUCM) formed from Chinese medicine professional associations in May 2018 continues to work together to promote Chinese medicine and lobby government with a unified voice for the profession. The dry-needling issue is the ongoing focus and ways to combat this practice by under-trained practitioners and the potential risks they pose to the public is the thrust of the lobbying to government and stakeholders.

Celebration of World Acupuncture Day in November is being planned again to raise public awareness and promote the benefits of our medicine while emphasising the need to go to a four-year trained practitioner for acupuncture.

Combining resources, the AUCM is working on a promotional campaign.

AACMAC Melbourne

The Australian Acupuncture and Chinese Medicine Association Conference Melbourne proved a resounding success with the highest number of attendees ever recorded for a Melbourne event.

Keynote speakers Charles Buck and Mazin Al-Khafaji were well received by conference delegates. They also presented pre- and post-conference workshops that were very well attended.

Many thanks go to all the speakers, delegates, trade exhibitors, our staff and the venue for making AACMAC such a successful event. It truly is the event when the profession and industry come together to enhance the impact of Chinese medicine in Australia.

Next year, 2020, will see AACMAC on the Gold Coast with Lorne Brown, Poney Chiang, Zhang Jianbin and Debra Betts already confirmed as speakers.

With speakers too good to be missed and a great location, I encourage members to take advantage of the early bird rates to be part of the most successful learning and informative event for Chinese medicine in the southern hemisphere.

AACMA Head Office

CEO Paul Stadhams has begun the search for sites to purchase for the AACMA head office.

AACMA has a year left on the lease of the current premises and hopes to find suitable space at the right price around the same area in the coming year.

Thank you to our staff, Paul, Yan, Mia, Elena, Chris, Melinda and Ethan for their continued hard and dedicated work enabling the smooth operation of the AACMA office.

In Closing...

"A bird does not sing because it has an answer, it sings because it has a song"

鸟儿 唱歌 不是 因为他们 心中 有答案 而是 因为它们心中有歌要唱

niǎoér chànggē bú shì yīnwèi tāmen
xīnzhōng yǒu dá'àn ér shì yīnwèi tāmen
xīnzhōng yǒu gē yào chàng

There is no question that dry needling / acupuncture performed by non-Chinese medicine practitioners is an issue for all Chinese medicine practitioners in Australia and around the world.

So, the song for all AACMA members in any public forum should be:

"We are a registered profession and have a mandatory four-year Bachelor's degree in Chinese medicine, which requires at least 1000 hours of clinical practice.

Acupuncture is the original dry needling and trigger-point therapy. Why would you choose the risk of going to a person who has done a weekend course or a maximum 80 hours (at most) in dry needling rather than come to a registered, qualified, professional Chinese medicine practitioner acupuncturist?"

My thanks and appreciation go to the rest of the AACMA board for volunteering their time that should be going to family, themselves and their clinic.

Kindly,

Waveny Holland
PRESIDENT

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Do you know a practitioner looking to become an AACMA member? You can **earn a \$100 credit on your account** if you introduce a new member to AACMA by **30 June 2020**.

To take advantage of this offer, simply direct the applicant to the AACMA website to join. Once they become a member, we will credit \$100 into your AACMA account for you to spend which way you choose. Whether it be on AACMA badged products or off your membership fees. For more information about the process and the application form, visit www.acupuncture.org.au

CEO update



This month I am celebrating my second anniversary as CEO of AACMA. While I am very pleased with the progress that we have made over the past two years, I am also acutely aware that we have a long road ahead.

AACMA has to continue to adapt to meet the needs of modern health care professionals and provide the leadership to ensure that acupuncture and Chinese medicine are an integral part of a fully integrated health care system in this country.

Annual Members Survey

This year, our annual survey received a higher response rate to previous surveys, which we greatly appreciate. The vast

majority of the responses, both positive and negative, were really insightful and will help us to continue to improve our operation and services to members. Some of the key findings from the survey are:

- 61% of respondents work less than 30 hours per week in their business
- 7% of respondents see more than 50 patients per week
- 38% of respondents have been a member less than 10 years
- 9% of respondents have been a member more than 30 years
- 78% of respondents are happy with AACMA communications
- 58% of respondents like to get their CPD at seminars
- 30% of respondents have never attended AACMAC

- Only 4% of respondents do not like our social media
- 83% of respondents want us to continue to create short films, such as our recent Community Service Announcement (CSA)

China Trip

In September 2020, AACMA will be hosting a week-long tour to China. This trip will provide members with the chance to see acupuncture being used as an integral part of the Chinese medical system, visit hospitals and clinics, attend lectures and explore the history and culture of our medicine.

One of the highlights will be a visit to Qujiang, a city in south eastern China's Zhejiang Province, the hometown of Yang Jizhou, the great master of acupuncture and moxibustion. "The Compendium of

Acupuncture and Moxibustion" written by Yang, is regarded as a classic by doctors of all dynasties. In 2014, the classic was included in the National Intangible Cultural Heritage List.

Qujiang has made a plethora of efforts to promote acupuncture, such as building the Quzhou Acupuncture Hospital, setting up the Yang Jizhou Acupuncture and Moxibustion Culture Centre and the Yang Jizhou Culture Park.

At this stage, we are asking members for an expression of interest as places will be strictly limited and we would hate for you to miss out. To register your interest, contact aacma@acupuncture.org.au.

AACMAC 2020

Following the success of AACMAC 2019 in Melbourne earlier this year, which achieved record attendance and received very positive feedback from those that attended, we are very excited to use this platform to tell you what will be in store for AACMAC 2020.

Next year, from 15 – 17 May, the Surfers Paradise Marriot Resort and Spa on the Gold Coast will host AACMAC 2020. Not only will this provide you with the chance to attend the leading acupuncture and Chinese medicine conference in Australia, you will also have the opportunity to enjoy one of Australia's most popular tourist destinations.

As we continue to evolve, there will be some major changes to what AACMAC has to offer to attendees including a panel discussion on Friday night hosted by a variety of business professionals, an opportunity for the presentation of the latest research within the industry, the

AGM moving to Sunday afternoon and a dinner on Saturday night (including the presentation of our inaugural AACMA Awards for Excellence).

However, the biggest change will be that at AACMAC 2020 there will be four international keynote speakers. These speakers will host extended sessions and cover a diverse range of topics. Some will also conduct pre/post conference workshops. The keynote speakers are:

- Professor Jianbin Zhang (China)
- Lorne Brown (Canada)
- Debra Betts (New Zealand)
- Poney Chiang (Canada)

We are very excited about offering members the opportunity to learn from such highly regarded international speakers, all in one place. In addition to these four, we will have various other speakers on the program. To ensure the high quality and standards that AACMAC represents, please note that if you do wish to present at AACMAC next year, you must submit an abstract so that our panel can choose speakers that they believe will be best suited to members needs and the overall flow and diversity of the conference.

Further information on AACMAC 2020 will be released within the next few weeks, including deals on accommodation and ticket prices. The Call for Abstracts, with all required information is now open and will close on 6 December 2019.

Annual Awards

At AACMAC 2020, we will be celebrating our inaugural AACMA Awards for Excellence. These awards will be the highlight of our Saturday evening

entertainment and will quickly become a very prestigious honour for AACMA members to strive for. While we are still completing the categories, they may include Acupuncturist of the Year, Best Presented Clinic, Best AACMAC Display Booth, AACMA Hall of Fame and Herbalist of the Year.

Nominations for the awards will only be open to AACMA members and judging will be conducted by an external independent panel. We will also be working with our suppliers and advertisers to provide sponsorships for each award, including prizes to the winners. Award nominations will open in early 2020 and we will provide more information over the coming months.

Consumer Service Announcement (CSA) Campaign

Due to the success of our first CSA campaign that ran earlier this year; planning has started for our second campaign launching officially January 2020.

Our campaign will aim to educate consumers of managing pain through acupuncture; which you will notice is also the theme for our feature article within this issue of Jing-Luo. A first person piece written by Australian Media Personality Melissa Hoyer.

Paul Stadhams

AACMA CEO



AACMA prides itself on its continual support and dedication to its members.

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of our terrific
benefits and
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membership
this year.**



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- Discounted prices to AACMAC
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- Access to AACMA's mentoring program
- Discounts to AACMA's member-only Professional Indemnity Insurance (PII)
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- Plus much more!

Renew your membership by contacting the AACMA National Office on 07 3457 1800



Chinese Medicine
Board of Australia

Revised registration standards for Chinese Medicine Practitioners

Registration standards¹ are regularly reviewed and updated. It is also an aim of the National Registration and Accreditation Scheme to have common standards across the registered professions as far as possible.

The Chinese Medicine Board of Australia (the Board), along with five other National Boards, has recently published advance copies of the revised registration standards¹ which will come into effect on 1 December 2019 and will replace the existing standards. Chinese translations will be published on the Board's website soon.

The following registration standards have been revised:

- recency of practice (RoP);
- professional indemnity insurance (PII) arrangements; and
- continuing professional development (CPD) registration standards.

The procedure when reviewing standards is that drafts are first provided to the associations for consideration and then to the profession and community as a whole for comment. Once the feedback is taken into consideration, the standards are submitted to the Health Ministers Council for approval.

The Health Ministers approved the revised standards on 30 June 2019. The revised standards will apply to all applicants for renewal for 2020 and most applicants for initial registration.

Changes to the revised standards

Important changes to the revised standards include:

Recency of practice (RoP)

- introduces a minimum number of hours to qualify for ongoing practice and flexibility in how you meet the minimum hours.
- simplified requirements for practitioners who do not meet the recency of practice requirements to recommence practice.
- clarified requirements for practitioners who wish to change the scope of their practice.

Professional indemnity insurance (PII) arrangements

- The most significant change is that there is no minimum value of insurance specified. This is because each practitioner has a different range of insurance risks and each practitioner must, with their insurer, ensure their insurance is adequate and appropriate to cover the scope and nature of their practice.
 - * Note: Many Chinese Medicine PII policies do not automatically include product liability cover; if you use, sell or dispense therapeutic goods you must ensure that this cover is included in your policy.
- Clearer descriptions of what must be covered by PII insurance such as retroactive cover for prior business and run off cover for after the business ceases.

Continuing professional development (CPD) registration standards

- Clearer description of what is relevant and effective CPD.
- Must include a minimum of five hours in an interactive setting with other health practitioners.

Resources about the revised standards

The following resources about the revised standards will soon be available on the Board's Registration standards page.

- The letter of approval from the Health Ministers
- The feedback provided during the consultation process for each of:
 - * Continuing professional development registration standard
 - * Recency of practice registration standard
 - * Professional indemnity insurance arrangements registration standard
- The option of the standards translated into Chinese
- Answers to Frequently Asked Questions (FAQ).

¹Registration standards define the requirements that applicants and registrants in the regulated professions need to meet to be registered.

²In most cases the Boards' CPD registration standards do not apply to applicants for initial registration.

Acupuncture: experience and qualifications are the point

By MELISSA HOYER

Melissa Hoyer shares her experiences with acupuncture and learns why choosing an AACMA-accredited practitioner is vital

Not long ago, I had the privilege of meeting Waveny Holland, AACMA president and traditional Chinese medicine practitioner and acupuncturist. I was also lucky enough to have two sessions with this master practitioner. The experiences I had are deeply personal and I write from the heart.

Firstly, I was incredibly excited to be trying something so many people know of but may have not tried. I recall my only previous experience with acupuncture during a stay at a health retreat many years ago – it was a quick session and, to be honest, I came out of it none the wiser.

Fast forward to now and the results I felt after just two sessions with Waveny were fantastic.

Before the sessions, I had had a couple of unfortunate health incidents – bruised ribs following a car accident, and knee surgery after I had torn my anterior cruciate ligament (ACL). After both injuries, parts of my body were overcompensating for the ‘bad’ parts, so the needles I had during each acupuncture treatment were positioned in such a way as to give me back some kind of balance within my body.

I came out of both those sessions feeling somewhat lighter, looser and more relaxed, and the profound results left me wanting

to know more about the fundamentals of acupuncture. Of course, Waveny was more than happy to offer her insight, in the end providing me not only treatment and relief from my pain, but also a deeper understanding of a much-misunderstood profession.

Time-honoured treatment

Waveny tells me that most people seeking an acupuncture treatment are suffering from musculoskeletal issues, such as neck and back pain, or knee and shoulder pain (often as a result of osteoarthritis). But as practitioners are well aware, the possibilities when it comes to using traditional Chinese treatment methods – which have been around since 6,000BC – are seemingly endless.

Fertility clinics refer their patients for acupuncture treatments during IVF cycles; people searching for a drug-free pain management option often turn to acupuncture with great results; gut, respiratory, and even mental health issues have all been addressed using acupuncture and Chinese medicine for centuries in China.

It almost feels as though there isn’t an ailment that can’t benefit somehow from this ancient yet still so relevant modality.

“Relieving a patient’s pain is always outstanding because pain, especially chronic pain, is often accompanied by

depression, loss of job, diminished quality of life, isolation, as well as drugs and their side effects, which can include dependency,” explains Waveny. “Acupuncture offers a proven drug-free alternative for many types of pain.

“For me, nothing beats seeing a patient coming in feeling really unwell or suffering from pain and then feeling much better or out of pain after I do a treatment, all within a one hour-long appointment.”

Meanwhile, Western medicine alone doesn’t seem to give patients the type of care that they are looking for.

“Treatment revolves around pharmaceutical drugs or surgery. Doctor’s appointments are dictated by Medicare and rebates are time-based,” Waveny explains. “The short consultation doesn’t give people the time they need to talk, explain and ask questions. They feel hurried by doctors who want them out, or they feel betrayed when they have to pay for a long consultation if they go over the allotted seven minutes.

“I came out of both those sessions feeling somewhat lighter, looser and more relaxed”

"The experiences I had
are deeply personal"





“There is no ‘treatment’ as such [during these consultations], so people don’t feel any better when they leave a doctor’s appointment. In fact, they often have to go for some form of investigation before they even have a diagnosis of their condition,” says Waveny.

It’s important to note, though, that none of this is intended to disparage a Western medical approach. Knowing the power of acupuncture and Chinese medicine and its far-reaching treatment capabilities, as well as the benefits found within Western medicine, Waveny advocates for an integrated model, as is often seen in the current Chinese healthcare system.

“In China, entire hospitals deliver only Chinese medicine care, others are western medical care, while others offer both Chinese and western medicine.”

This way, she says, you get the best of both worlds.

Chinese medicine in Australia

Interestingly, Australia is the only country to nationally register Chinese medicine, Waveny explains. “This means that Chinese medicine as a registered profession comes under the National Health Practitioner Regulation Law Act (2009 The National

Law), along with 15 other registered health professions such as doctors, nurses, physiotherapists, psychologists, etc.”

As Chinese medicine practitioners know, there’s a minimum four-year bachelor’s degree that has to be undertaken in order to be registered to practice, along with strict codes and guidelines that must be adhered to.

“These high standards ensure public safety while also providing a holistic, drug-free treatment that lasts for around an hour,” explains Waveny of the stringent rules in place. “People come into the practice feeling poorly and leave feeling better because they have been treated.”

A new ‘treatment’ that has cropped up in Australia in recent years, however, is causing serious consternation within the Chinese medicine community – and can have very real and serious health implications for the wider public.

Dry needling.

To the uninitiated and ill-informed, dry needling may seem the same as acupuncture, but Chinese medicine practitioners and patients alike will be aware that there are major differences that could potentially mean the difference between life and death for those seeking treatment.

Dry needling was so named by a GP in the United States who, on returning home after studying acupuncture in China, used a hypodermic needle to perform acupuncture, saying she was using it as a ‘dry needle’ rather than injecting anything through it.

This in itself is not the issue at hand. What is incredibly concerning is the lack of education and regulation required to perform dry needling. “Anyone can do a dry needling course over a weekend and then stick needles in people on Monday,” says Waveny. “The longest dry-needling course is 80 hours. But Chinese medicine acupuncturists have to do a four-year bachelor’s degree, which includes 1,000 hours of clinical practice before they can register to practice.”

The National Law fails in its mandate to protect the public because acupuncture and dry needling aren’t restricted practices, Waveny continues. “Under The National Law, only fully qualified practitioners are allowed to perform what are known as ‘restricted practices’. This means anybody can do a weekend dry-needling course and be practicing the next week, claiming to do acupuncture or dry needling.”

It’s a frightening concept. Other registered professionals, such as physiotherapists, chiropractors, podiatrists and osteopaths, as well as non-registered practitioners, like massage therapists, naturopaths and even beauty therapists, can all complete these

short dry-needling courses and then claim to do acupuncture, dry needling or trigger-point therapy. But none of these people have undergone the rigorous, in-depth education or have the extensive experience of an accredited acupuncturist.

“Only Chinese medicine practitioners who have done the four-year bachelor’s degree, with 1,000 hours of clinical practice, can call themselves acupuncturists. That is a protected title – but ‘acupuncture’, which is what acupuncturists do, is not protected.” Effectively, this means anyone can say they ‘do acupuncture’ without being a qualified acupuncturist.

Enter AACMA...

The Australian Acupuncture and Chinese Medicine Association has been representing the majority of Chinese medicine practitioners since 1973. It was also the lead association to negotiate private health fund cover for acupuncture and Chinese herbal medicine, lobby the government to make Chinese medicine GST free, and advocate for standardised education and registration for the profession.

As those registered with AACMA know, membership requires practitioners to hold the requisite four-year bachelor’s degree, meaning that any AACMA-accredited Chinese medicine practitioner is guaranteed to have undergone the complete university

training and have completed, at a minimum, 1,000 hours of clinical practice.

When looking for a practitioner, “patients should look for the Australian Acupuncture and Chinese Medicine Association logo”, says Waveny, and practitioners ought to remind their patients of this message – which needs to become public knowledge.

AACMA has a very easy-to-use practitioner search function on the website, making it very simple for would-be patients to find a properly qualified, registered Chinese medicine practitioner in their area.

Ultimately, Waveny’s advice is this: “Don’t take the risk of seeing a very poorly trained practitioner.”

Where to next?

With the help of Waveny Holland, I not only experienced the impressive results acupuncture can yield, but also got to the heart and soul of the practice.

There is so much information out there – almost too much to take in! – so going to the source was the best thing I could’ve done. Now I can see how acupuncture works as an everyday part of a healthy lifestyle – and I can’t wait for more treatments.



Melissa Hoyer has developed into one of Australia’s leading and most respected and well-read lifestyle commentators, popular culture writers for both print, online and television as well as a host, MC and panel wrangler.

Melissa gained her current reputation when she was the fashion and style director and columnist on News Limited’s Daily and Sunday Telegraph newspapers.

Melissa has been called on as a commentator on broader, pop culture issues for radio – particularly the ABC’s 702, 2WSFM, KiisFM; 2GB – and TV shows like Today, A Current Affair, Sunrise, The Morning Show, The Daily Edition, Weekend Sunrise, 20-to-1, the ABC’s Australian Story and is also a regular on shows on the Seven Network.



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A background on Gua Sha Fa

By EDITH GUBA



The massage technique has an interesting background

Gua Sha Fa is a form of massage that is particularly widespread in rural areas of China and East Asia.

In almost every village there used to be one or two people who used this method, acquired knowledge and experience in it, and passed it on to the next generation.

Thus, over the centuries, a considerable amount of experience developed, which could be used for various illnesses and offered the rural population the opportunity to be treated in cases of illness without having to go to a doctor, which was usually cumbersome and expensive.

The origins of Gua Sha Fa, like those of acupuncture, relied on longish treatment instruments made of stone, which were probably used for acupressure. These were later developed into needles (acupuncture) on the one hand and flat scraping devices (Gua Sha Fa) on the other.

While acupuncture is embedded in the extensive theory of Chinese medicine and has a rather learned, academic background, Gua Sha Fa is popular and experience-orientated.

Treatments with Gua Sha Fa used to use coins, rounded fragments of porcelain vessels or jade scrapers. Today, instruments made of water buffalo horn are preferred; the jade scrapers are mainly used for cosmetic purposes.

“In some cases this 'renewed Gua Sha Fa' is even considered more effective than acupuncture.”

The treatment instruments are about 74 x 105mm in size and have a wider rounded side and a narrow-tapered side. Using the wider side, you can do this type of massage over clothing; with the tapered side, you

work directly on the skin. In the past, the only lubricant used was water or – if available – sesame oil. Today, there are many different cosmetic oils on the market. The method can be used in the field of wellness as well as for medical purposes.

When 'scraping' (刮 'Gua') on the skin, granulations of about the size of a pinhead can develop in some areas, which are referred to as 痧 'Sha' (sand). These granulations and skin redness, which can sometimes merge, are interpreted as micro-bleedings, and gradually fade and disappear within about two to seven days.

It takes some time to master the correct technique, which allows you to penetrate deep into the tissue – the meridians – of the treated person without causing pain. There are several variants of 'scraping', each of which is used for different indications. Depending on the pressure strength or speed, different results can be achieved. Bleeding on the skin should be avoided, even if it is only slight.



Towards the end of the last century, Prof. Lǚ Jiru, a physician trained in western and Chinese medicine, referred the applications of Gua Sha Fa to the teachings of Chinese medicine, and taught his new method since 1991 in the People's Republic of China. Others soon followed his example.

This method integrates both approaches and has several advantages: it is a massage without direct contact by the hands,

bloodletting without bleeding, acupuncture without injury to the skin and mobilising physiotherapy in one.

In some cases this 'renewed Gua Sha Fa' is even considered more effective than acupuncture (eg. shoulder-arm syndrome).

Although the method has not yet been officially recognised as a form of medical therapy in China, it is used in various

therapeutic settings and also in small private massage studios.

In the west, the Gua Sha Fa has quickly developed from a promising insider tip to a well-known form of application within the field of traditional Chinese medicine in the past 10 to 15 years, and is now taught at various institutions.

The Gua Sha Fa contains a lot of historically grown experience. In China, not the entire rural population had this experience: they were laymen who used it, but they were extensively trained in the method.

The 'new' Gua Sha Fa also includes knowledge of Chinese medicine and acupuncture. This contributes to a great enrichment of its application.



In this photo you can see the course of the Duma and the two bladder meridians very well. In principle, scraping is done from top to bottom. The bladder meridian was not specially treated here, the back as a whole was scraped. The redness and granulation in the area of the bladder meridians have occurred spontaneously; they refer to existing blockades, including those already discharged, in its area.



Edith Guba heads the Dao Yuan School for Qigong, which she founded in Germany together with her teacher, the Chinese Qigong Master Guo Bingsen. The aim of the school was and is the dissemination of traditional Chinese Qigong methods at a level that can maintain their traditional quality. In their close collaboration, Guo Bingsen and Edith Guba have also translated the Dao De Jing, a fundamental work of Chinese philosophy, into French and German. Currently she is working with Guo Bingsen on a book about Gua Sha Fa.



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Specially developed for use within the Hospital system of China, this formula is used for the treatment of menopausal syndrome especially with hot flushes, night sweats and irritability that may be accompanied by a general tendency to be cold with hot flushes and sweating, especially in the early hours of the morning. It was first created to treat blood pressure problems in Menopausal age women.

Indications:

This Traditional Chinese Medicine has been traditionally to support kidneys and invigorates yang,

nourishes the liver and clear heat, regulates the Chong and Ren channels, helping to relieve the symptoms of Menopause.

TCM Indication:

Liver blood, kidney yin and yang deficiency, with deficient heat.

P) Fine-Rapid-Empty pulse (Xi Shu Xu)

T) Possible Light red especially tip, thin to no coating, general tongue have seen light to crimson in clinic.

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TCM Menopause
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(GENG NIAN AN PIAN)

Rehmannia & Curculigo
Combination



Chinese Medicine believes it is important to address the underlying cause of the symptoms rather than just stop the symptoms. Red Moon Menopause support is a popular formula used to support the transition of menopause and is used in hospitals throughout China.

Indications:

This Traditional Chinese Medicine has been traditionally used to nourish the Yin and clear the Heat, helps to relieve menopausal symptoms.

TCM Indication:

Yin deficiency with Heat

P) Deep & Thready or Thready & Rapid.

T) Red or Red tipped tongue with scanty coating.

Symptoms & Signs:

This formula is for the main common pattern, Kidney yin deficiency

Symptoms like as scanty or cessation of periods, hair loss, vaginal dryness, dizziness and or tinnitus. Frequently hot flushes and night sweats with five heart heat (heat sensation in the chest, palms and soles), insomnia; increased dreams; itchy skin or feeling of insects crawling on skin and soreness and weakness of lower back and knees.

Symptoms & Signs:

Changes in menstrual cycle
Hypertension (High Blood Pressure)

Colder than normal with Hot flushes or warm flush feeling and sweating

Problems sleeping including insomnia and Night sweats (Sleep Hyperhidrosis)

Mood changes

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Feeling anxious or irritable

Vaginal dryness

Bladder infections or Urinary

Incontinence

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AACMAC celebrates another year of success

By MIA ZHANG

Highlights from the annual meeting of minds

The 19th Australasian Acupuncture and Chinese Medicine Annual Conference (AACMAC) was successfully held at Pullman Melbourne on the Park from 17-19 May, 2019.

More than 360 local and overseas participants attended to share their expertise, exchange ideas, and engage in presentations on different aspects of traditional Chinese medicine.

Continuous collaboration with TGA, CMBA and new alliances

In recent years, there have been significant changes in acupuncture and the Chinese medicine profession. AACMA uses the conference as a platform to:

- create an environment for intellectual exchange
- improve the quality of clinical practice
- meet the needs of contemporary healthcare
- protect practitioners' legitimate interests for sustainable practice
- bring all parts of the profession together through networking with practitioners, academics, researchers, regulators and suppliers.

This year, AACMA maintained its connections with the Therapeutic Goods Administration and the Chinese Medicine Board of Australia. Delegates were able to receive first-hand information directly from the regulators. Charlie Xue, Chair of the Chinese Medicine Board of Australia, Debra Gillick, Executive Officer, Chinese Medicine Board of Australia and David Graham, Community Member from the Chinese

Medicine Board of Australia, were invited to speak on the heated topic: dry needling – where does regulation fit in?

At AACMAC 2019, we continuously introduced new partnerships within the greater health industry to facilitate the peripheral necessities around our membership.



David Graham, CMBA Community Member, at AACMAC2019



Charles Buck at AACMAC 2019



Mazin Al-Khafaji at AACMAC 2019



Steven Clavey at AACMAC 2019

Highlights of inspiration

A stellar line-up of 36 speakers presented on different aspects of Chinese medicine and acupuncture:

- **Dr Mazin Al-Khafaji**, well-known dermatology authority from the UK, took attendees through the ways to understand and treat skin diseases with Chinese herbal medicine, drawing upon his own clinical practice and experiences of more than 40 years in the field.
- **Mr Charles Buck**, the past president of the British Acupuncture Council, shared his extraordinary knowledge on how the acupuncture and Chinese medicine classics can be used in our daily practice.
- **Mr David Graham and Ms Debra Gillick**, the senior representatives from the Chinese Medicine Board of Australia, provided an insightful session on the regulations around dry needling, the major concerns and available responses from the Chinese medicine profession.
- **Professor Charlie Xue**, the Chair of Chinese Medicine Board of Australia, provided a review of the Chinese medicine profession by analysing the opportunities and challenges the profession is facing and pointing out the priorities in the upcoming years.
- **Ms Jane Lyttleton**, local pioneer practitioner, analysed the impact of stress on fertility and the potential acupuncture treatments to assist patients.

- **Mr Steven Clavey**, renowned speaker on Chinese herbal medicine, introduced the historical importance of Fu Qing-Zhu in the course of the Chinese herbal medicine development and elaborated on the use of several key formulas in clinical practice.

AACMAC 2019 featured 20 exhibitors with a wide range of products and services for the attendees. There were 17 door prizes and eight academic awards up for grabs. With thanks to the sponsors, the entire prize value was more than \$6,000.

AACMA would like to thank all speakers, exhibitors, sponsors and session facilitators, and the national office staff and volunteers who ensured the smooth running of the conference.

Last but not least, AACMA would like to thank all of our delegates who attended the conference this year. We wish you all the best and look forward to meeting you again in May at AACMAC 2020 on the Gold Coast!

AACMAC is set to take place on 15 - 17 May 2020 at Surfers Paradise Marriott Resort & Spa in the centre of the beautiful waterfront city of the Gold Coast. Come join us for AACMAC in the sunshine state next year.

Registration is now open with a payment plan option for AACMA members. Contact the AACMA National Office on 07 3457 1800 or aacma@acupuncture.org.au to book now!



Let the
record
show...



Clinical record keeping is unfortunately one of those dreaded risk management topics. Guild Insurance understands that it isn't the most interesting of topics for health practitioners to spend time thinking and talking about. However, it is incredibly important, and Guild's experience suggests many health practitioners would benefit from learning more about good record keeping.

Clinical records and insurance claims

Clinical records can impact insurance claims in two ways:

1. Poor records can contribute to a poor or unexpected outcome following treatment, leading to the patient complaining and possibly seeking some form of compensation.
2. Poor records may make a complaint, and therefore an insurance claim, difficult to defend due to the lack of evidence.

All health practitioners would want to avoid poor clinical outcomes as the wellbeing of their patients is paramount. However, they would also want to avoid complaints, which can lead to insurance

claims, as these can be very challenging and confronting experiences. Therefore, understanding how to improve the standard of clinical records really should be a focus.

Why keep detailed clinical records?

1. Continuity of patient care

It's not uncommon to hear health practitioners believe they can remember the details of patient consultations. However at Guild, we regularly see examples where practitioners haven't remembered key aspects of prior consultations and treatment, and this has led to a poor outcome for the patient. It's therefore imperative to have this information recorded to ensure certainty as to how and why you've treated a patient in the past.

It's also important to be sure you refer to the information within the patient's record. Patients can suffer harm when information, such as allergy details, is overlooked or forgotten about and therefore the patient isn't treated accordingly.

2. Regulatory requirement

All Australian Health Practitioner Regulation Agency (AHPRA) regulated practitioners need to be well aware of their many regulatory requirements; good record keeping is one of these. All National Boards within AHPRA have produced a Code of Conduct for the relevant profession. Within this code is information about a practitioner's obligations and requirements regarding record keeping. A number of National Boards have also created a separate document on guidelines for clinical records which further explains what is required.

It is the responsibility of every registered health professional to make themselves aware of and comply with the various codes, guidelines and policies relevant to them. Not knowing is not an excuse for not complying.

Better through experience.



3. Defence of a complaint

If there is any allegation of wrong doing made against a practitioner, their records are going to be incredibly important. Those records provide evidence of what took place and why. Without this, the practitioner will be relying on their memory as a defence. Information recorded at the time of the consultation is going to hold greater weight as a reliable defence than a practitioner's memory months after an event. As the saying goes 'Good records = good defence, poor records = poor defence and no records = no defence'.

4. Funding audit

Funding providers, such as private health insurers, regularly review the rebates they pay for healthcare and can conduct audits to be sure health practitioners are billing appropriately. It's not uncommon for a health practitioner to receive a request from a funding provider to produce clinical records to justify their billing practices. This is another example of when a practitioner needs documented evidence of what they've done and why. If the reasons behind treatment, and therefore billing, isn't clear, funding providers can demand repayment.

What to record?

The key question many health practitioners ask when it comes to clinical record keeping is 'how much detail do

I need to record?'. Practitioners should refer to their Board's Code of Conduct, as well as the guidelines on record keeping if one exists, to better understand the detail required in a clinical record.

Exactly what to include can vary according to the type of health profession as well as the specifics of the patient's condition and treatment. However, generally records should include, but aren't limited to:

- > Patient identifying details and contact information as well as health history
- > Name of the consulting practitioner and the date of the consultation
- > Reason for the patient presentation
- > All examinations and investigations conducted and their results, even if there is no abnormal finding
- > Diagnosis and treatment plan
- > Consent to treatment
- > Treatment provided and the patient's response
- > Any items supplied, or instructions given, to the patient
- > Referrals to other health professionals.

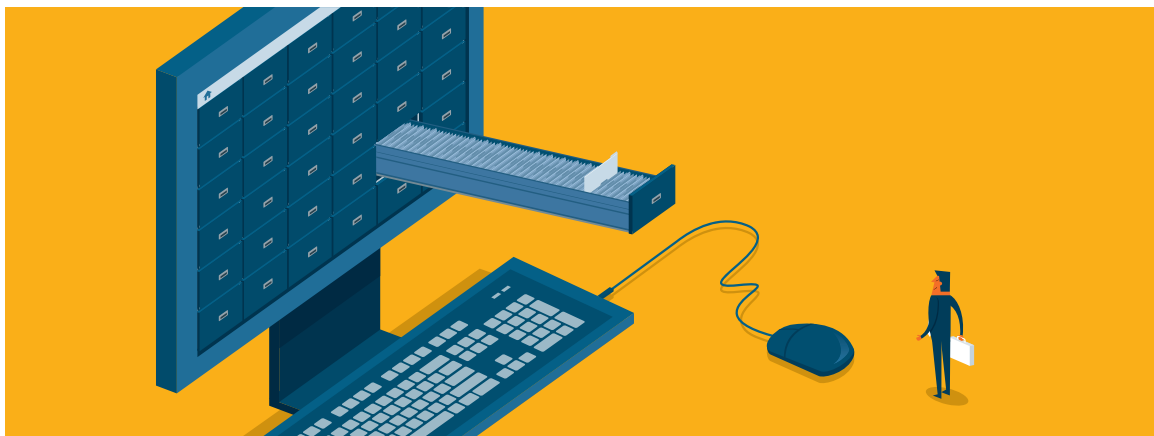
In some cases, it's worth noting what didn't occur as well as what did. For example, if a patient has refused to consent to what would be considered the most ideal or obvious treatment option,

the record should reflect that it was discussed and declined. If it is simply left out of the record, it would appear that it wasn't discussed as a treatment option.

When a practitioner is unsure if they have included enough detail, they should ask them self whether or not another practitioner could read the record and understand the full picture of what took place and why, without the treating practitioner filling in any gaps. If the full story isn't there, there isn't enough detail.

Professional and objective

Clinical records need to always be professional and objective. Criticisms of the patient can be included, however this must be professional and only when this is relevant to the treatment being provided. This may occur in situations where the patient isn't complying with instructions and this is detrimental to their health. However, it's important to remember that clinical records can be accessed and read by a number of people, including the patient and your regulator, so always be mindful of the language used. The language used should match the professional language a health practitioner would use when speaking to the patient during a consultation.



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Sense about ancient science

By CHARLES BUCK

It's time to do away with misconceptions about traditional Chinese medicine

There seems to be more and more discontent and bigotry in the media regarding Chinese medicine through our profession as a whole.

Like many other Chinese medicine professionals, I have asked myself: "Isn't there something I can do?" The usual response is to hope that others be proactive in fighting bigotry, when the responsibility to communicate the value of what we do should be shared through our profession as whole.

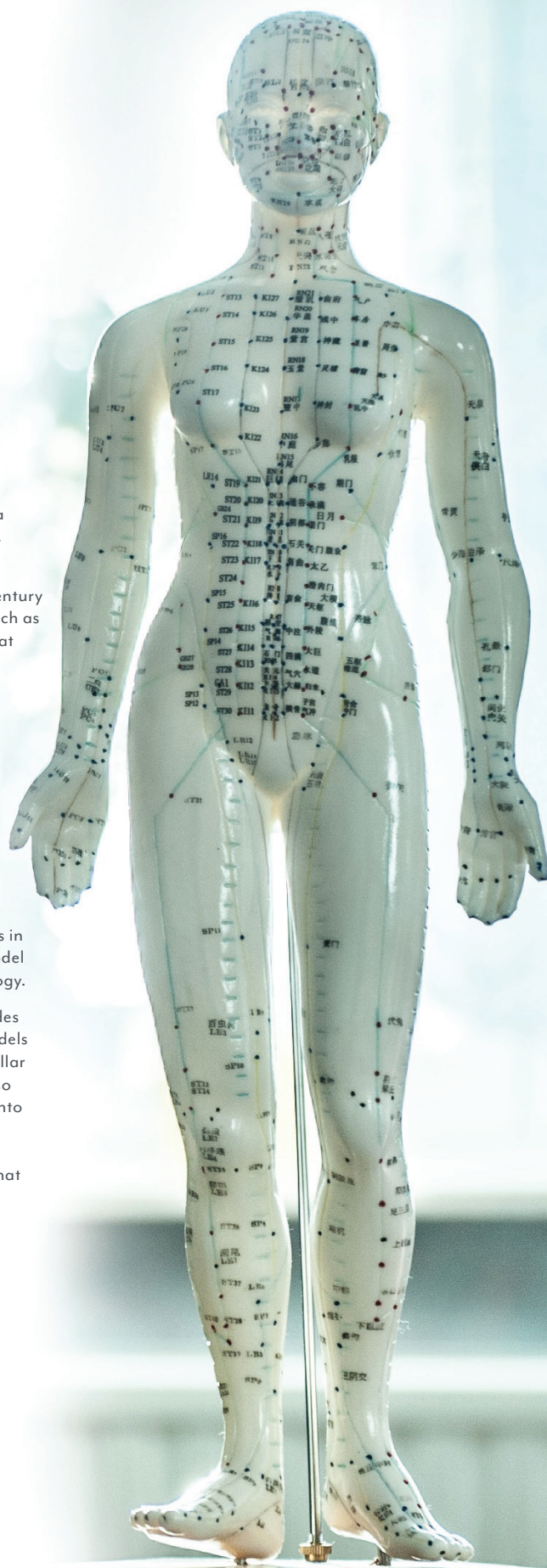
This article will share some personal thoughts on the ways that we might all do our bit to counter the prejudices we face. This way, we can learn to present a more accurate picture of our profession, its history, doctrines, efficacy and practices.

Critics claim that Chinese medicine is based on oriental metaphysical theories and that it offers us no rational concept of disease, its causes and its pathology. In this view, modern biomedicine is much more 'real' because it offers detailed descriptions of disease. Our responses to this statement

rarely appear robust or connected to a proper understanding of the tradition.

We also suffer from the problem that holistic doctrines derived from 20th century naturopathic ideals from the west – such as the naturopaths' slogan "we don't treat diseases..." – are often grafted onto acupuncture. This misrepresents the oriental medical tradition: Chinese medicine has always treated diseases. The fact is that the study of symptoms, pathology and disease has been an integral part of Chinese medicine for most of its history. This means firmly held beliefs about what we do are not always congruent with the actual oriental tradition. What we do, besides maintain health, is treat illness in the context of what the traditional model considers to be the underlying pathology.

We have always treated disease. Besides devising the qi-based explanatory models of health and disease that form one pillar of our practice, Chinese physicians also conducted meticulous investigations into the material nature of disease. Many of these stand up very well to modern biomedical scrutiny, despite the fact that





some were written 1,500-plus years ago. If we are unaware of these achievements, we are under-informed. Here, I offer a few examples of the study of diseases taken from my textbook *Acupuncture and Chinese Medicine: Roots of Modern Practice*.

Ge Hong's *Zhou Hou Beiji Fang* (written in 326AD) discusses many diseases including smallpox, about which he says:

"The lesions look like burns covered with a white starchy material and whose surface reforms as soon as it is broken. If not treated immediately most of those affected will die, those who do survive will be left with residual purple-black scars."

“We should take every opportunity to challenge the assertion that Chinese medicine lacks any basis in medical fact”

Later, Qian Yi (circa 1032-1113)¹ published a more detailed account that meticulously differentiated the symptoms, diagnosis and treatment of chickenpox, measles, scarlet fever and smallpox. Ancient and accurate descriptions of pathology can be traced for most common illnesses.

In the 7th century, Chao Yuanfang was responsible for compiling a detailed textbook on disease pathology. His monumental 52-volume *Zhubing Yuanhou*

Lun (on the causes and symptoms of illness) gave detailed and generally accurate descriptions of 1,732 diseases. On diabetes, he writes:

"The disease called xiao ke involves unremitting thirst with polyuria... those suffering this disease tend to develop carbuncles and gangrene... This is a disease with sweet urine that often begins to develop in those who become obese having overindulged in sweet and rich food."

Written some 1,400 years ago, this description – like so many others in this work, could safely be copied and pasted into a modern biomedical textbook. At around the same time, the renowned physician Sun Si-Miao was advocating the use of goat or rabbit liver for the treatment of night blindness, as well as the use of seaweed for iodine deficiency goitre.

A few centuries after its publication, Chao Yuanfang's pathology book was translated into Arabic and was incorporated into Avicenna's medical works, which then spread to the west in medieval times, contributing to the founding of the European study of pathology. So, to some extent, modern pathology is rooted in the work of China's ancient physicians.

We should take every opportunity to challenge the assertion that Chinese medicine lacks any basis in medical fact and the rational study of pathology. China has a long tradition of careful and scholarly study of disease and pathology that partners our theoretical explanations.



Charles Buck is a veteran UK TCM clinician, educator and author known for his insightful understanding of this medicine and his engaging style. Charlie's diverse interests include classical Chinese medicine, medical sciences, communication and the advocacy of our profession. With a background in physiology he graduated in acupuncture 1984 and pioneered CHM teaching and practice in the UK. Charlie has published extensively and presented at TCM conferences and colleges across the world. As past chair of the British Acupuncture Council Charlie has worked for TCM advocacy, PR and branding. His textbook *Acupuncture and Chinese Medicine – Roots of Modern Practice* is required reading.

¹Fu Wei-kang (ed.) *Zhongguo Yixue Shi* (History of Chinese Medicine) Publishing House of Shanghai College of Chinese Medicine 1989 p281

²Journal of Traditional Chinese Medicine 2 (4) pp317-320 1982

Case study: Shen disturbance

By **EDDIE (EDUARDO) TEIJEIRO**

Is shen disturbance a western psychosis - or something completely different?

In January/February 2001, I spent four weeks working as a volunteer acupuncturist for the Madurai Charitable Trust, in Madurai, Tamil Nadu, India.

The Madurai Charitable Trust had organised an event as an opportunity for the less fortunate parts of the community to receive free healthcare treatments. In an effort to promote their individual clinics, a group of local acupuncturists met with 'western'-trained acupuncturists and exchanged treatment standards and protocols.

I was based in an old primary school room in the poorer part of the city. During my second week of service at the trust, there was suddenly a great commotion from the schoolroom entrance. A comatose patient was carried on a stretcher into my

treatment area. The patient was a 16-year-old male who was constantly transitioning from a catatonic state – with eyes open and fixed, staring into space, clenched fists, clenched teeth, body immobility and stupor – to yelling irrationally and in a voice that didn't seem to be his.

At this point, after observing two rounds of this transitioning, I stopped the discussion between his family members who had carried him in and my translator. I became desperate to know what was happening with his yelling voice that sounded like that of a middle-aged woman.

With a little bit of trepidation, my translator began to relate to me his story. Ten days prior, his aunty had suddenly died. She had been his adult guardian and primary caregiver. A week after that, on the evening of her funeral, my translator reported that the patient had been possessed by the spirit of his dead aunty.

Needless to say, my mind went into overdrive! Nothing in my school training or internship in China had prepared me for a case like this. The hairs on the back of my neck were up and my heart was racing.

Quickly, I hit upon a course of treatment. I could almost visualise his Hun (魂), or ethereal soul (that part of his spiritual self that leaves the body on death) looking down from above, not quite willing to leave yet. The main thing to do was reunite his Hun (魂) with his Po (魄), or his corporeal soul. The other treatment principle was simply to bring him back to Earth or to re-centre him. To this end, the great lessons on "emergency acupuncture" given by my good friend and mentor John McDonald came to mind.

I inserted Du 26 (人中) with mild effect. He stopped screeching and his whole body became more relaxed. Then I inserted Ki 1 (涌泉). Suddenly, an unexpected force





pushed me back two to three metres, as he sat bolt-upright and yelled "What are you doing to me?" This, of course, was translated to me. He was back to his old self. After conversing with his family members, I received permission to continue with the treatment.

I then inserted the other Ki 1, Liv 3 and Co 4 in order to open the four gates and allow the free-flow of Qi and blood, and help change to occur on a psychic/spiritual level; Du 20, Du 24 and Yin Tang to calm his shen, or spirit; and St 36 and Sp 6 to strengthen his earth/centre.

The next day, he came back. This time he walked in without assistance. He had not had a catatonic/unconscious episode since the treatment. The shrieking had stopped. He had a mild fit at around sunset the night before.

His only new complaint was an abdominal sensation/mild pain making him curl up in a ball. He felt like someone was tying him up with a rope.

His family had invited their local acupuncturist/homoeopath to come and observe the treatment I would give. I applied a similar treatment to the day before: Liv 3 and Co 4 to open the four gates and initiate change on a deeper spirit level; Du 20, Du 24, Pe 6 and Yin Tang for calming the shen/spirit; and Ren 12, Ren 6 and St 36 for the reported abdominal pain.

Before leaving India I received feedback on his condition. He had made great improvement. He slept well and was no longer afraid of the night, only occasionally going into fits or psychic trances.

A curious outcome of this young man's experience was the reported development of clairvoyant abilities. He had started working as a psychic, giving readings to his neighbours, and thus providing a small source of income for his family.



Eduardo (Eddie) Teijeiro

In 1998, Eddie graduated with a Bachelor of Health Science (Acupuncture). He was part of the first graduating class of the Bachelor degree of the Australian College of Natural Medicine (Brisbane), now the Endeavour Colleges of Natural Health.

In 2015, he completed a Master of Medicine (Acupuncture & Tuina) at the Guangxi University of TCM, Nanning, China. As part of his Masters, he completed a Pilot Study into Acupuncture's Effect into Lowering HbA1c Levels in Type 2 Diabetes Mellitus.

He is now working at Wholistic Healing Acupuncture, Geelong, and as a sessional lecturer at Endeavour College, Melbourne.

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There's always room for growth

When you embrace what you don't know, true learning begins

By JEFF SHEARER

Even after being a practitioner for just shy of 25 years, there is a belief I hold that is actually stronger now than when I first started my journey in the healthcare industry.

I remember my first day at college where I did my training. I was excited, but equally terrified. You see, I have never been a natural student. Learning has always been hard for me and the thought of going back to a learning environment for 12 months (my first of many courses) had me daunted for months prior to my first day. I felt like I wasn't going to be good enough, smart enough or capable enough to finish my course.

The first day at college was filled with new experiences and a lot of information. So much information that I didn't think I would ever get to the point of remembering it, let alone learning how to apply it. But fortunately, I'm stubborn, and if I was going to spend the money on the course, I was going to do my utmost to get everything I could from it. After five years, I completed my Bachelor of Health Science in Acupuncture.

About 10 years ago, I realised that this hidden belief was one held by a large portion of all of the practitioners and

mentors I looked up to: the belief that I am just a minnow with regards to my skills and knowledge in my profession. Every time I went to conferences, I felt somehow out of place because the shallowness of my knowledge was shown up time and time again. It was only when I consulted other practitioners that I found I wasn't alone. No matter how much a person knew about a particular aspect of their modality – even the presenters – they all felt their depth of understanding was still limited.

This became the point at which I felt true learning began. It allowed me the luxury of knowing I had limitations but also gave me the fire to push me forward to seek more knowledge.

After practising for 19 years, I considered throwing in the towel and leaving practice, as I still spent much of my time scratching my head wondering what I was achieving. Fortunately, I attended a seminar that changed the entire way I practiced overnight. My results skyrocketed and I found a re-invigorated focus for my practice. Even after so many years in practice, such a mammoth shift in my knowledge definitely brought things into perspective.

After studying his art for more than six decades, a famous martial arts master in China, Li Zi Ming, noted in his biography at 80 years old: "[I] realise now that I have only just scratched the surface."

This has become my constant reminder that there is still much to learn and there are better ways I can help people with their pain and suffering.

These days, I spend more time learning than I felt I did while I was training – not because I have to but because I have learnt to embrace learning, whether it be formally, via seminars or getting together with colleagues at conferences and events.



Jeff Shearer is a Chinese medicine practitioner who has had multiple successful practices and now practices in Newcastle. Jeff also runs Ethical Practice – an information based service to assist practitioners become all they can be. Visit www.ethicalpractice.net

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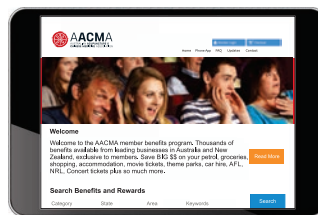


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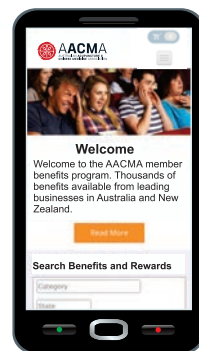
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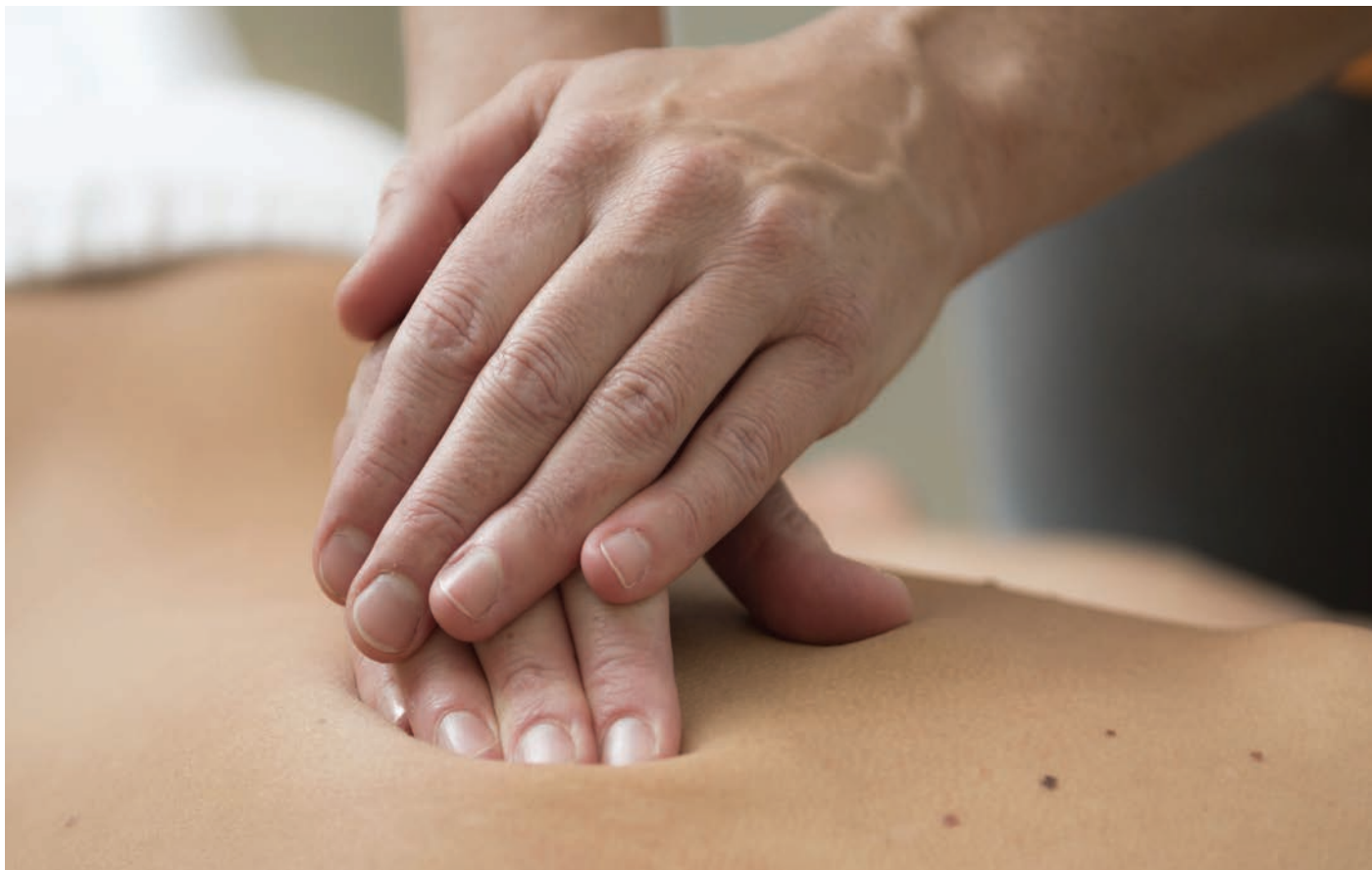
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Man is in Qi and Qi is in man

By EDITH GUBA



Insights into the circulation of Qi between people and methods of shielding your own Qi

Everything consists of Qi. The circulation of Qi connects not only the organs in the human body, but also the human microcosm with the macrocosm of nature.

And just as man is energetically connected to the macrocosm through the pores and acupuncture points, so all beings have the ability to communicate with each other on an energetic level.

If we meet with others, exchange ourselves, then there is always also Qi exchange with it. This exchange, this sending and receiving, takes place via the sensory organs and, above all, via the hands. In the middle of the palm there is an acupuncture point, Lao Gong, which is particularly suitable for emitting large

amounts of Qi. In close relationships, such as with family, this is desired and welcomed.

This exchange of Qi between people not only takes place within the family, but also in circles of friends and between strangers who are in a common situation. People with naturally strong Qi sometimes tend to feel tired in large crowds: there is an exchange between their Qi and that of the people around them.

The communicating vessels are a good example of this process. If, for example, two filled cups are connected with a tube, the liquid in these cups will reach the same level. With this model, it is possible to understand how you can feel refreshed after some conversations, but in need of rest after others. Of course, the feelings that arise in conversations also depend on the content. But if you feel exhausted after

a very good conversation, then you were on the giver's side.

In the therapeutic treatment situation, this exchange of Qi also takes place – regardless of the chosen treatment method. However, there are treatment methods that require more Qi from the therapist than others. There are also certain strategies you can use to protect yourself.

All types of massage demand a lot of Qi from the therapist. During massage, physical contact is inevitable. In particular, if you see a lot of patients, you give a lot of Qi. In this situation, you can also absorb a lot of used Qi from the person being treated; you can send out a lot of Qi through Lao Gong, but you can also absorb a lot of it, including sick or used Qi. This sick Qi, which is regularly ingested from patients in small amounts,

“All types of massage demand a lot of Qi from the therapist”

can gradually accumulate in the body of the practitioner and lead to symptoms of unclear origin. With older, sick therapists who give a sports or wellness massage to younger people, however, giving and taking can be reversed: the person with the stronger Qi gives to the person with the weaker Qi. But it does not correspond to the therapeutic ideal to be supplied with energy by patients, or to deliver one's own sick Qi to them.

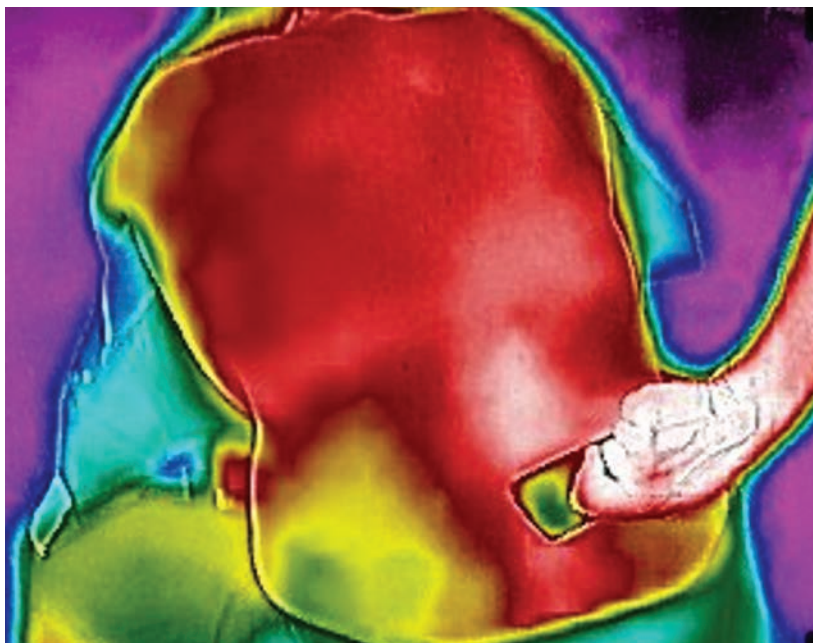
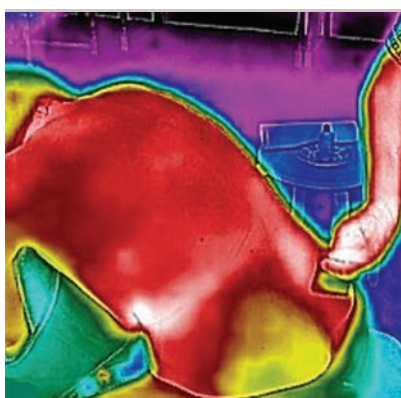
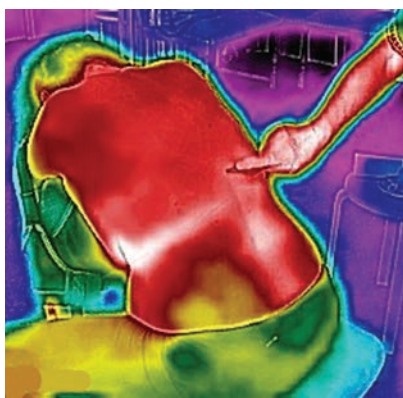
Acupuncture consumes less Qi in this respect. But one should take care that the Lao Gong doesn't remain unprotected. This is achieved by an energetically meaningful posture of the needle: between thumb and index fingers, but in such a way that the other three fingers

are placed on the palm of the hand and thus close the Lao Gong points.

Very good protection is also provided by the scraper of the Gua Sha Fa: it is held in such a way that the Lao Gong are always closed.

The least exchange of Qi might occur when only prescribing medication. However, there are many intermediate stages between the first treatment method mentioned and the last example, and the energetic communication also depends on the openness of the therapist towards the patient.

Therapists can get the best possible protection and support for their energy through Qigong exercises to drain used and ill Qi, to absorb pure Qi, and to develop and modify the abilities of emitting Qi. You can look for exercises that can strengthen the inner Qi in such a way that it can ward off attacks of ill Qi and can also be effectively emitted without leading to Qi losses in the sender.



Here you can see three consecutive thermographic images of a relatively short Gua Sha Fa treatment. It is easy to recognise that the scraper gradually becomes cooler – the drained, cool, sick Qi seems to be absorbed. On the other hand, the hand of the practitioner – an advanced Qigong practitioner – is getting warmer and warmer, possibly due to the Qi being emitted. We hope to continue this kind of documentation on the mechanisms of Qi.

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It's time to step up in order to shape up

By **BRIGITTE LINDER**

We must take sharing the message of acupuncture and Chinese medicine into our own hands

It is a complex situation for more than 4500 registered Chinese medicine practitioners in Australia.

Currently, registered Chinese medicine practitioners are legally required to complete a four-year university course and a certain number of hours in clinical practice. However, there are many allied professions that claim they are acupuncturists when, in fact, they can simply complete a course over the span of a weekend. AACMA has informed members of their progress to lobby on behalf of the profession; however, it is important that we, as practitioners, do our bit to help educate the public and promote the profession.

During my career as a Chinese medicine practitioner, I've noticed that patients have become more informed, make more

requests, and need to know that the treatment used can help them feel better before they book a consultation or treatment.

Our role as professionals is to ensure patients know how broadly acupuncture and Chinese medicine can be applied, and that it can create outstanding results for many patients regardless of age, gender or ethnicity.

We need to start promoting the benefits of acupuncture and Chinese medicine, which are:

- It addresses all parts of the human being: the body, mind and spirit. It's a truly holistic approach to healthcare.
- It provides a different perspective on how patients are functioning and how the different parts and layers of the body are connected.

- Acupuncture can provide immediate relief from pain, swelling, nausea, headaches, agitation or stress, and gives the recipient a sense of calm and wellbeing.
- It gives patients the opportunity to talk about their problems and emotions, which allows practitioners to tailor the treatment and make it very specific to each patient's needs.
- It's gentle and minimally invasive.
- The use of Chinese herbal medicine complements the acupuncture treatment, so the therapy is 'enforced' until the next treatment.
- It integrates well with many other therapies.
- It aims to treat the source of the imbalance, which is essential for the long-term wellbeing of patients.



We have to continuously educate and inform patients about their options with Chinese medicine. In my opinion, there is no need to try to compete with the Western medicine approach. We have thousands of years of empirical evidence up our sleeves. It's a rock-solid model and is as worthy of mention as the evidence-based medicine model.

As much as we would like our industry to receive better acceptance and acknowledgement, it does come back to us and how we perform with patients. We need to ensure they consistently receive optimal care and are informed about the treatment methods being used.

Instead of being put off by 'dry-needling' and complaining about the injustice of it, we need to see the opportunities that are available and empower ourselves to get the message out into the community.

As much as I would love someone else to do it for us, we make the bed that we lie on.

Therefore, it is integral that we embrace every opportunity to break the ice and inform everyone about what we do in our treatment rooms and how good we make people feel. Every day is a new opportunity for our workforce of more than 4,000 practitioners to engage in a conversation around Chinese medicine and talk about the outstanding way we can diagnose, treat and restore health and wellbeing in our patients. The onus is on us as acupuncturists to ensure we educate the public and promote the profession.



Brigitte Linder is a Chinese medicine practitioner and runs Safflower, an expert Chinese medicine dispensary service for practitioners and an acupuncture clinic for everyday patients. Visit safflower.com.au

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Xing Lin Quan 10 form part 1

By DR JIMMY LE

Xing Lin Quan (杏林拳) is a style of martial arts that I have developed after training in the martial arts for over twenty years.

It is a self defence system, however, it also contains elements of internal training to assist in balancing the body and ensuring homeostasis is a constant.

The form contains 10 movements/ techniques and is unique as it can be performed as a traditional neigong form (slow and meditative) or can be done with elements of hard-style striking – an expression of yin and yang.

1. Opening 起勢

i) Starting with your feet together, move the left foot outwards into a horse stance, knees slightly bent, backside sitting on an imaginary stool, and shoulders relaxed. (Fig 20.1-20.2)

ii) Breathe into the abdomen through the nose and slowly raise both hands up towards your chest as you feel the air entering the body. Palms should still be facing down and carry no weight; they lift as though the wrists are being pulled up by strings. (Fig 20.3)

iii) Once your lungs are full, slowly breathe out of your nose and lower your hands at the same speed as the oxygen leaves the lungs, your hands should be resting at your side when you complete the out breath. (Fig 20.4-20.5)

iv) Pull your left foot into a cat stance and hold the ball, left hand underneath and right hand on top. (Fig 20.6)

Therapeutic benefit: This technique is excellent to help settle the mind. It is the basis of basically all forms of neigong and can be performed or taught to a patient in order to assist with the psychoemotional symptoms associated with stress, anxiety and depression.

2. Tiger Plays with Cub (Left) 母虎戲虎子 (左)

i) Step outward with your left foot into a bow stance and turn to face left while you push your left hand downwards just at waist level (palm facing the ground). (Fig 21.1-21.2)

ii) Push the right hand toward the left while keeping a slight bend in the elbow. Ensure the right leg is fully extended to

feel a light stretch, but do not lift the heel off the ground. (Fig 21.3)

iii) Pull your left foot back into a cat stance and bring your hands back to hold the ball, left hand underneath and right hand on top. (Fig 21.4)

3. Tiger Protects Cub (Left) 母虎護虎子 (左)

i) From the cat stance, step out towards the left once more forming a bow stance. (Fig 22.1-22.2)

ii) Rotate the hips so that the body faces the left and then create a claw motion with both hands. Swipe across to the left – left hand above (at face level) and right hand below (waist level). (Fig 22.3)

iii) Shift weight onto the right foot as you bring your hands (still in claw position) across the centreline of the body and to the right then shift the weight onto your left foot as you go into a cat stance and hold the ball with right hand underneath and left hand on top. (Fig 22.4)



Fig 20.1



Fig 20.2



Fig 20.3



Fig 20.4



Fig 20.5



Fig 20.6



Fig 21.1



4. Tiger Plays with Cub (Right) 母虎戲虎子 (右)

Repeat the same technique on the opposite side to ensure a balanced use and stretch of the body.

Therapeutic benefit: Performing this technique may be beneficial for muscle tightness and cramping in the leg, especially around the urinary bladder channel. It can also assist in mobilising the shoulder to improve range of movement from any previously sustained trauma. This technique is only done as a slow yin movement.

5. Tiger Protects Cub (Right) 母虎護虎子 (右)

This technique is also repeated on the right side to ensure that both sides have been stretched.

Therapeutic benefit: This technique can benefit the hip range of motion as well as stretching the lower back. The claw motion can assist with numbness, pain or lack of mobility in the fingers. This technique can either be done slowly (yin) or with strength and force (yang) when the tiger claw strikes to the side.

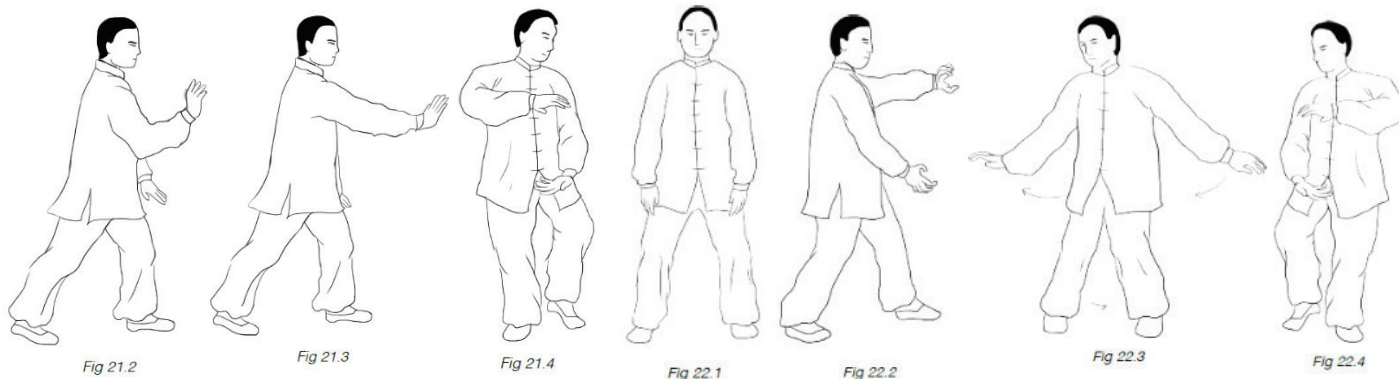


Dr Jimmy Le (TCM) is a Chinese Medicine Practitioner and Martial Artist with a decade of clinical experience as the former and over two decades experience with the latter. He is currently the owner and head practitioner of the Chinese Health Institute (Xing Lin Ju) located in Sydney where he treats patients and teaches students always adhering to his personal philosophy:

Balance the Body, Educate the Mind, Nourish the Spirit.

平衡身心，淨化心靈，昇華精神。

For the remaining form, ensure you read the next edition of the **Jing-Luo**.



Wormwood

How a traditional prescription influenced modern anti-malarial medicines

In 340AD, the Chinese philosopher and physician Ge Hong (葛洪) made this note:

A handful of sweet wormwood in two litres of water, wring out the juice and serve.¹

青蒿一握, 以水二升渍, 绞取汁, 尽服之

More than one and a half thousand years later, this observation by a practitioner of what we now consider Traditional Chinese Medicine (TCM) would play an important role in the elimination of malaria in China, saving millions of lives.

China in the 1940s saw an estimated 30 million cases of malaria each year with 300,000 malaria deaths.²

Malaria is an infection caused by a blood parasite, usually passed on by a mosquito bite. The disease is characterised by fever and can be fatal.³ Mosquito eggs hatch in warm water, so the rainy and warm southern provinces of China are particularly vulnerable to malaria.

In 1967, the Chinese Government set up a group office for malaria control tasked with coordinating nationwide anti-malarial research. One of the researchers appointed to this project was young scientist Tu Youyou (屠呦呦) of the Institute of Chinese Materia Medica.⁴

Professor Tu Youyou and her team reviewed anti-malaria preparations recorded in traditional Chinese medical literature such as the *Zhou Li* (周礼) and *Inner Canon of the Yellow Emperor* (黄帝内经). They identified more than two thousand traditional anti-malarial prescriptions, and began to test them on rodents with rodent malaria.

An extract of the plant *Artemisia annua* or sweet wormwood (青蒿) showed promising results, but the results were inconsistent. In an initial test it showed 68% inhibition of malaria parasites, but in follow-up experiments only showed 12% to 40% inhibition.⁵

This was when Tu Youyou took inspiration from Ge Hong's note, recorded in his treatise *A Handbook of Prescriptions for Emergencies* (肘后备急方).

By traditional method, plant material is often boiled to extract and concentrate the medicinal ingredient. Ge Hong's instruction to "wring out the juice" led Tu Youyou to consider that high temperature extraction might damage the anti-malarial properties of sweet wormwood. Her team then began to test lower temperature extraction methods.

On 4 October 1971, one of these new extracts showed 100% effectiveness in inhibiting rodent malaria parasites.⁶

In late 1972, this extract was tested in a clinical trial of 21 patients with malaria. All patients in this trial recovered, with no malaria parasites detectable in their blood after the treatment.

The extract was refined further and the medicinal ingredient was named artemisinin. Artemisinin and medicines derived from it would drastically reduce deaths from malaria. One study estimated that in Africa alone artemisinin-based combination therapies averted the equivalent of 139 million cases of malaria between 2000 and 2015.⁷

In 2015, Tu Youyou was awarded the Nobel Prize in Physiology or Medicine for her discoveries concerning artemisinin. As of 2017, China has seen no indigenous cases of malaria.⁸ This is due to a national program of identification and containment of outbreaks, in which artemisinin-based medicines have an important role.

By coincidence, Tu Youyou was named after this verse in the Book of Songs (诗经):

*Deer bleat "youyou" while they
eat the wild wormwood.⁹*

呦呦鹿鸣，食野之蒿

When Tu Youyou first read Ge Hong, did she remember that verse linked to her name? Is that why she thought of Ge Hong's words when testing sweet wormwood?

A poem written three thousand years ago.

An instruction made one and a half thousand years later. A scientific discovery not yet fifty years old.

From 30 million cases of malaria in China each year, to almost zero.

Tradition is a record of the steps other people have made, and sometimes those footprints point towards a better future for us all.

TCM regulation in Australia

In Australia, most Traditional Chinese Medicines (TCM) are regulated as complementary medicines by the Therapeutic Goods Administration and must be included in the Australian Register of Therapeutic Goods (ARTG) before they can be supplied in Australia.

To be included in the ARTG, these medicines must be supported by a well-established tradition of use, may only contain low risk, pre-approved ingredients and can only use low risk pre-approved health claims. TCM should be based on an accumulated tradition of practice and accord with well-established procedures of preparation, application and dosage.

For more information visit <https://www.tga.gov.au/complementary-medicine-regulation-basics>

1. <https://www.nobelprize.org/prizes/medicine/2015/tu/biographical/>
2. <https://www.who.int/malaria/news/2019/china-from-30-million-to-zero/en/>
3. <https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/malaria>
4. <https://www.nobelprize.org/prizes/medicine/2015/tu/biographical/>
5. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3414217/>
6. <https://www.nobelprize.org/prizes/medicine/2015/tu/biographical/>
7. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4820050/>
8. <https://malariajournal.biomedcentral.com/articles/10.1186/s12936-018-2444-9>
9. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3195493/>

The author, John Lombard, is a current employee of the Therapeutic Goods Administration



Tang Zonghai 唐宗海 discusses statement “The heart stores the shen” 心藏神

By MICHAEL BROWN



Tang Zonghai was a famous Qing dynasty physician who synthesised Western biomedical anatomy and Classical Chinese Medicine.

人所以有知覺，神主之也。神是何物？渾言之，則兩精相搏，謂之神，空言之，則變化不測謂之神；此皆放言高論，未能實指之也。

The reason why people have senses and consciousness is due to the governance of shén. What is this thing that is the shén? The classics state that, “when there is the union of the two jing-essences¹, it is said to be shén”. The classics also state “the unpredictable and immeasurable transmutation and transformation is that which is called shén”.² These statements are impractical and [use] lofty words, which fail to realistically address the meaning of shén.

吾且為之實指曰，神乃生於腎中之精氣，而上歸於心，合為離卦，中含坎水之象，惟其陰精內含陽精外護心臟之火，所以光明朗潤，而能燭物。

I will thus realistically address it: the shén is engendered by the essence Qì within the kidneys, and it ascends to return to the heart, uniting into an image of the lí trigram (☲), which contains the image of kǎn-water (☵) in its centre. Due to the fire of the heart being held within by the yīn essence and being safeguarded from the outside by the yang essence, [the shén] is bright and clear, and is able to illuminate objects.

蓋神即心火，得腎陰濟之，而心中湛然，神明出焉，故曰心藏神。心血不足，則神煩，心火不足，則神怯，風痰入心，則神昏也。

The shén is just heart-fire. As it obtains the assistance of the kidney yīn, it is clear and transparent within the heart, and the radiance of shén emanates from it, thus it is said the heart stores the shén. When heart blood is insufficient, then there is vexation in shén; when the heart fire is insufficient, the shén will be timid; when phlegm-wind enters the heart, the shén will be clouded.

西醫知心為生血回血之臟，而謂心不主知覺者，主知覺者，是腦髓筋。又言腦後筋只主運動，腦前筋主知覺。

Western medicine knows the heart is the zang-viscus that generates and circulates blood; yet, it says the heart does not govern senses and consciousness. Regarding the governance of senses and consciousness, it is the brain-marrow sinew [marrow sinew/spinal cord]. Western medicine also says the sinew in the posterior brain only governs movement, while the sinew in the anterior brain governs senses and consciousness.

又言腦筋有通於心者，彼不知髓實心之所用，而非髓能知覺也。蓋髓為水之精，得心火照之而光見，故生知覺矣。

It also says the brain-sinew³ has a connection to the heart. Yet, they do not know that the marrow is in fact the applied function of the heart, as the marrow [itself] cannot have senses nor consciousness. Because, the marrow is the essence of water, once it obtains the illumination of the heart-fire, the light can be seen, thus this is the engenderment of senses and consciousness.

古文思字從囟，從心，即以心火照腦髓之義。髓如月魄，心如日光，相照為明，此神之所以為用也。

In ancient Chinese, the character for thought⁴ is derived from frontal region [of the head], and from the heart, that is exactly the meaning of the heart fire illuminating the brain-marrow. The marrow is like the rising moon, the heart is like the light of the sun; together they illuminate and this is brightness⁵. This is the function of the shén.

The author would like to express his gratitude to Allen Tsaur for proofreading and editing this document. Michael will be releasing a translation of a book called *Explanations of Channels and Points*⁶ 經穴解 (c. 1692) towards the end of the year. It will feature in-depth discussion of points and channels, and explanations of names and diseases they can treat.

Michael Brown has practised acupuncture and herbal medicine for the last 10 years. In that time he has also learned Chinese formally at the University of Queensland, as well as completing an honours in Classical Chinese. He is currently translating a Qing commentary of the *Mingtang Jing* titled *Explanations of Channels and Points* that will be released in the second half of 2019.

¹ This is statement is from Lingshu Chapter 8

² This is statement is from Suwen Chapter 66

³ This compound term may also be understood as the cranial nerves

⁴ The emotion associated with the spleen

⁵ This brightness is the míng from compound shénmíng (bright spirit)

⁶ Due for release late 2019, available online

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5 minutes with AACMA board director Michael Popplewell



We sit down with AACMA's newest board director to find out why he chose the path of acupuncture and Chinese medicine.

What made you want to become an acupuncture and Chinese medicine practitioner?

I used to be a racing cyclist both in Australia and overseas in my teens and twenties, and had lots of treatment, especially massage. I ended up doing a massage course and then encountered Chinese medicine through a Chinese massage course. Once I got the gist of the five-element approach to health that underlies TCM, I was hooked! That was around 1990.

Since becoming an AACMA member in 1997, what changes have you seen within the profession in Australia?

Our profession has a higher profile and has greater acceptance in the public domain.

Good-quality research has also been published – it's all very satisfying to see.

As an AACMA board director, what do you see for the future of AACMA?

I see AACMA growing further in a leadership role for our profession, both in marketing for our members and supporting and distributing research.

What is one piece of advice you would give to new practitioners or students in our field?

Never stop learning. I believe this is the key difference between failing and succeeding as a practitioner.

What are your short- and long-term goals as director of the AACMA board?

My goals are around TCM and research that supports better practice. My short-term goal is to build upon the Acupuncture Evidence Project that was already commissioned by AACMA and to put high-quality TCM clinical research into an AHPRA-compliant format that can be used for marketing by our members.

My long-term goals are in the cloud-based patient treatment record space – possibly a joint venture between AACMA and other TCM associations (both in Australia and overseas), together with academic institutions, that will identify and share the best treatment options for TCM practitioners and their patients.

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IQ3-3-R

5 minutes with AACMA member David Hartmann

One of our long-standing members discusses his past, present and future with the association

What made you pursue a career in acupuncture and Chinese medicine?

I was originally going to be a physiotherapist or nurse, but life has a funny way of making sure you go in the direction you are supposed to. Three events ensured I became an acupuncturist instead. 1) In year 11 at school, I had acupuncture to treat migraines and have not had a migraine since. 2) In year 12, I got great relief from stress with acupuncture. 3) In 1993, Mum was driving her car near Coffs Harbour and her windscreen smashed. During the repairs, she stumbled upon a brochure for the Australian College of Natural Medicine (now Endeavour College of Natural Health) at a coffee shop. We went for an interview and fell in love with the college. During my first semester as a student, I went to the outpatient clinic for weekly treatment for severe depression. Acupuncture brought me out of the black pit and the rest is history.

What has been your greatest achievement as a practitioner within the field?

As a practitioner, my greatest achievement has been my ability to help patients with emotional turmoil. Acupuncture has saved me twice from severe depression and I am repaying the favour a thousand-fold; not just for depression, but for any emotional imbalance.

As a lecturer and author, my greatest achievement is helping students and practitioners become the best therapists they can be, for the betterment of their patients. We are all out there making a big difference to healing others, which makes us a vital cog in the medical/health community.

I love inspiring others by teaching workshops and presenting at conferences internationally, and throughout Australia. I now have two Chinese medicine textbooks available, *The Principles and Practical Application of Acupuncture Point Combinations* with publisher Singing Dragon, and the *Acupoint Dictionary* with Elsevier. I also have a webinar series available through Healthy Seminars.

You have been a member with AACMA since 1997. What changes have you seen over this time?

The most obvious would be the registration of the profession. Aside from that, there has been the gradual acceptance of our profession within Western medicine so we are now more likely to be referred to as allied or complementary health, rather than 'alternative medicine'. Last, but not least, are the patients now coming for a much wider range of conditions than just musculoskeletal disorders and sports injuries.

You have an internationally published textbook being released shortly. Tell us a little about that...

The simplest explanation is that it is a textbook designed to get the reader to think more about the acupuncture point combinations/treatments they employ in clinic. For me, this is one of the most important, but typically least taught, elements of acupuncture treatment. We give students a list of points to use for different zang fu patterns, but we don't take the time to explain how each of those points works in the treatment. As Aristotle once said, "The whole is greater than the sum of its parts", and in Chinese medicine we apply that principle to herbal formulas, but not acupuncture treatments. Therefore, I felt it was important to write a book to teach us how to combine acupuncture points. What I hope to achieve is for us all to become better versions of our acupuncture selves. The book does this by guiding the reader rather than telling the reader what to do, hopefully making it a big asset for the development of acupuncturists worldwide.

With more than 23 years in clinical practice, as well as your experience as a lecturer and speaker at many international conferences and AACMA, what do you see for the future of Chinese medicine in Australia?

I see a bright future where we are integrated into hospitals and Western medical clinics. I see us being acknowledged for our treatment role in a much broader range of diseases/disorders. This is definitely already the case for fertility treatment, and if we follow the USA, we will soon be recognised as a legitimate therapy for opiate addiction.

In the end, I see us using our skills to help people who are suffering in life. This is the single most important part about what we do; helping others to feel better! And if that's the limit of where our future takes us then that's fine with me.



David Hartmann is an acupuncturist that lives in Brisbane, Australia. He graduated in 1996 and upgraded his qualifications with a Masters of Acupuncture in 2009. He is also a Chinese medicine lecturer at Endeavour College of Natural Health.

He has two textbooks: 'The Principles and Practical Application of Acupuncture Point Combinations' released in August 2019 with Singing Dragon; and the 'Acupoint Dictionary 2e' published by Elsevier in 2009.

State Committee Reports

Queensland

The Queensland State Committee has hosted 4 out of the 5 scheduled events for the year.

Workshops and seminars have covered herbal medicine from the Shang Han Lun, trigger point acupuncture, acupuncture point selection according to the classics and deep needling techniques using the huatojiaji points.

The final seminar for the year will be on 13 October and the presentation will cover social media, marketing and promotion to fulfil the requirements for professional issues CPD. There will also be a second handbook sale and swap on the day.

The state committee is already planning the first seminar for next year on 2 Feb which, as, in previous years, will also be combined with a celebration for Chinese New Year.

Thank you to San Acupuncture Supplies and Acuneeds for supporting Qld State Committee events during the year especially providing needles, swabs and sharps containers for acupuncture workshops.

The Qld State Committee looks forward to seeing more members at events in 2020.



Victoria

The Victoria State Committee held its first two seminars in March and July this year.

These were well attended and we wish to thank the presenters - Sarah Fogarty, Heidi Yuen and Serg Mezhov for their engaging presentations.

In June, the Victoria State Committee held a meeting and elected the following roles:

Elisabeth Staunton (Chair), Luzviminda Agosta (Vice Chair), Daisy Chai (Finance Secretary), Christina Yong (Catering Officer), Michael Warren (Minutes Secretary) David Lovatt and Edwin Miao (Members), Denise Hung (Student Representative).

As this goes to print, we are currently preparing for our September seminar with

Joe Azuolos: 'Useful distal treatments for neck, back and sciatic pain.'

A seminar focused on enabling participants to learn treatment strategies and protocols for neck, back and sciatic pain found effective in clinical practice.

Following on from this, the Victoria State Committee has two more seminars scheduled for the second half of the year.

October 20th Khoi Luong 'Bone Deficiency in Musculo-skeletal conditions - TCM treatment and approaches'

This workshop aims to improve participant's knowledge of how to diagnose and treat musculo-skeletal pain due to bone deficiency. It will be a combination of lecture, practical demonstrations and case study discussion.

November 17th: Steven Booth 'Antahkarana Meditation - A foundational self-development practice from Esoteric Acupuncture.'

This workshop will offer practitioners the opportunity to expand their toolbox of self-care and personal development practices, especially those with spiritual inclinations.

The Victoria State Committee wishes to thank AACMA members for their ongoing support of our activities and to our suppliers Acuneeds, Chinabooks, Helio and San Acupuncture for their generosity.

We are in the process of planning our seminar schedule for next year. If you are interested in presenting - please contact us via: events@acupuncture.org.au

New South Wales



The New South Wales Committee is grateful for the continuing education events we have presented thus far and excited with the new ideas which are in the pipeline.

We would like to thank Dr Yifan Yang, Dr Jian Jiang, Dr Henry Liang and Max Ma for sharing their experiences, knowledge and valuable time.

One of the main goals of the State Committee moving forward, is for a more unified and progressive profession. We are looking at bringing our New South Wales members together with a series of innovative discussion panel events. We shall bring together experts and leaders from different fields which will include acupuncture, herbal, law / ethics, marketing and advertising.

We have been listening to our members and some innovative ideas are already being investigated including organising events to assist members to improve report writing skills and conducting comprehensive physical clinical examinations. These are aimed at improving the playing field in comparisons with other allied health professionals. These classes will be practical, interactive and fun, building on the knowledge you already have.

South Australia



It has been yet another wonderful year for the South Australia state committee with a total of five events been held throughout the year.

The majority of each event saw almost ¼ of the South Australian registered practitioners attend and we look forward to even more practitioners attending next year. We started off the year with our annual social event and celebrated Chinese New Year and the lantern festival.

Shortly after, on 24 February, we held another event. Divided into two sections, part A focused on the most familiar strangers – hidden beauty of acupoints and was presented by Kevin Cao. Part B was on how to manage medical complaints and was presented by Gengchen Bai.

On 5 May, the event explored the hidden culprit and was presented by Greg DePamphilis and also on hegu (LI4) clinic indication which was presented by Zhiqi Yue.

After a three-month break, we came back on 4 August to discuss acupuncture for emergencies presented by Zhaoxia Xu and the diagnosis and differentiation presented by Wanli Zhu.

The South Australia state committee will reconvene for the last time in 2019 on 13 October to delve into recognising 'the sticking point' mental and emotional health in the clinic which will be presented by Lori-Ellen Grant. We look forward to seeing all our South Australian practitioners next year!

Western Australia



The WA State Committee started the year 2019, the year of the Pig, by celebrating the Chinese New Year with a social get-together in Northbridge.

Various members walked in to have a drink, a chat and exchange ideas with their fellow practitioners in the nice surrounding of the Henry Summer Garden Bar.

Endeavour Vitality Days were held at the Endeavour College, Perth. Two State Committee members took time out of their busy practice to represent AACMA on the 1st of May. They exchanged ideas and discussed the benefits of our Association with the students.

On the 24th of April we organised a workshop with Daniel Spigelman on the topic of: Tangible Qigong in the clinic: The Daoyin of Needling. It was well visited and worth every point from the 6 CPD points.

The 23rd and 24th of June we held a two-day seminar given by David Hartman about Acupuncture point Combination which was worth 12 CPD points all together. We went home with many more alternative acupuncture point combinations.

Our last seminar for this year was on the 18th of August given by Marie Hopkins about: Marketing with MailChimp automations for the TCM Practice. It was valued at 4 professional CPD points. We learned how to save time

with multiple marketing strategies, how to use Automations and how to set up MailChimp from scratch.

We were very fortunate this year to offer our members access to these high quality speakers. And we feel grateful that with the help of AACMA we could invite interstate speakers. We hope to offer another interesting program to our members next year.

Finally I would like to thank my WA Committee members for their help, enthusiasm and last minute improvisations. I look forward to another successful year with them.

If you are interested in being involved in the NT, TAS or ACT state committees, please contact statecommittees@acupuncture.org.au with an expression of interest.

Save the Date!

AACMA

15-17 May 2020

Surfers Paradise Marriott Resort & Spa

158 Ferny Ave, Surfers Paradise QLD 4217

www.aacmac.org.au



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澳大利亚针灸中医学学会

INTERNATIONAL KEYNOTE SPEAKERS:



Lorne Brown (Canada),



Zhang Jianbin (China),



Debra Betts (New Zealand)



Poney Chiang (Canada)

- Panel discussion focusing on business development
- Award dinner to recognise individuals & celebrate the advancement of the profession
- Abundant networking & exchange opportunities for businesses & practitioners.

AACMA Upcoming Events

AACMA state committee events

October

13th BRISBANE, QLD

Marketing as a small business

Amanda Kuhn, Wade Kuhn and
Rebecca White

9:00am – 1:30pm

4 CPD points (professional issues)

The Ministry Centre, St Columb's Anglican
Church Hall, 23 Victoria Street
Clayfield 4011

Live stream available

13th ADELAIDE, SA

Recognising the 'sticking point'. Mental and emotion health in the clinic

Lori-Ellen Grant

2:00pm – 6:00pm

4 CPD points

The Box Factory, 59 Regent St South,
Adelaide, SA, 5000

20th MELBOURNE, VIC

Bone Deficiency in musculo-skeletal conditions – TCM diagnosis and treatment approaches

Khoi Luong

12:30pm – 4:45pm

4 CPD points

Phyllis Hore Room, Kew Library, Civic
Drive off Cotham Road, Kew 3101

November

3RD - SYDNEY, NSW

Safe practice of Chinese herbal medicine in Australia

Henry Liang

2:30pm – 6:15pm

4 CPD points (professional issues)

Sydney Institute of Traditional Chinese
Medicine, Level 5, 25 Dixon Street,
Haymarket, NSW, 2000

17TH - MELBOURNE, VIC

Antahkarana meditation

– a foundational self-development
practice from Esoteric acupuncture

Steven Booth

4 CPD points

Phyllis Hore Room, Kew Library, Civic
Drive off Cotham Road, Kew, 3101

External events

October

19-20th SYDNEY, NSW

Korean hand acupuncture beginners course

6 CPD points

More info: http://www.handacupuncture-courses.co.nz/?page_id=41

20th BRISBANE, QLD

New perspectives on the channels and Qi: A neurophysiological explanation of acupuncture

5 CPD points

More info: <https://fimia.com.au/>

20th SYDNEY, NSW

The five unspoken secrets of practice success

6.5 CPD points

More info:

info@chinabookssydney.com.au

22nd SYDNEY, NSW

Introduction to Nei Jing pulse diagnostics and rapid diagnosis using observation of spirit (Shen)/ Facial colour

3 CPD points

More info:

<https://www.qiology.com.au/seminars>

26-27th SYDNEY, NSW

Jing | Qi | Shen: Classical acupuncture pulse diagnostics and treatment of the 3 treasures in clinical practice

15 CPD points for 2 days

More info:

<https://www.qiology.com.au/seminars>

27th MELBOURNE, VIC

The five unspoken secrets of practice success

6.5 CPD points

More info: info@chinabooks.com.au

November

8-10th SYDNEY, NSW

The confluence of nature and nurture in classical Chinese medicine – the extraordinary vessels

19.5 CPD points

More info: info@chinabooks.com.au

9-11th BRISBANE, QLD

Introduction to Japanese acupuncture – 3 day immersive workshop

18 CPD points (6 CPD per day)

More info: <http://www.westendacupuncture.com.au/>

<http://www.westendacupuncture.com.au/>

9-11th PERTH, WA

Neoclassical pulse diagnosis: Extraordinary vessels and the six channels

6.5 CPD per day

More info: <https://www.radiantchi.com.au/events>



9th MELBOURNE, VIC

Paediatric acupuncture: Childhood development, related pathologies, diagnostics and treatment
7.5 CPD points
More info: <https://www.qiology.com.au/seminars>

10-12th MELBOURNE, VIC

Acupuncture according to the philosophy of heavenly stems and earthly branches 2019: The 12 earthly branches (Di Zhi) and the deep Qi/Energy – the foundations and philosophy applied in clinic
22.5 CPD points for 3 days
More Info: <https://www.qiology.com.au/product-category/seminars/>

16-17th MELBOURNE, VIC

Bowen techniques for TCM and Shiatsu practitioners
13 CPD points
More info: info@chinabooks.com.au

22-24th MELBOURNE, VIC

Acupuncture Business Success Bootcamp
19.5 CPD points
More info: www.sustainhealthacademy.com.au

22-24th MELBOURNE, VIC

The confluence of nature and nurture in classical Chinese medicine – Luo vessels: blood and spirit
19.5 CPD points
More info: info@chinabooks.com.au

23th GOLD COAST, QLD

Qigong teacher training: Qigong in integrative medicine & special populations/considerations
6 CPD points
More info: <https://www.facebook.com/qifit>

25th MELBOURNE, VIC

Korean hand acupuncture Beginners' Course
6 CPD points
More info: http://www.handacupuncturecourses.co.nz/?page_id=41

27-30th SYDNEY, NSW

Si Yuan Balance Method AcuAdvance
28 CPD points for 4 days
More info: www.siyuanbalance.com

29-2nd BRISBANE, QLD

Jing Fang Herbal Training
28 CPD (7 CPD per day)
More info: <https://www.paddingtonclinic.com.au/>

December

6-9th MELBOURNE, VIC

Advanced scalp acupuncture
28 CPD points (four days)
More info: <http://www.paddingtonclinic.com.au/seminars/>

7-8th BRISBANE, QLD

Acupuncture point combination series: the master-key to great clinical results – Part 2 of 2
13 CPD for 2 days (6.5 per day)
More info: dahartmann8@gmail.com

14th GOLD COAST, QLD

Qigong teach training: integration and assessment
4 CPD
More info: <https://www.facebook.com/qifit>

International Conferences

October

23-24th PRAGUE

3rd International Congress on Traditional & Natural Medicine
Prague, Czech Republic

25-26th VANCOUVER

International Conference on Complementary & Alternative Medicine
Vancouver, Canada

November

14-17th BELEK

WFAS International Symposium on Acupuncture – Moxibustion
Belek, Turkey

18-19th DUBAI

International conference on Herbal Therapy and Acupuncture
Dubai, UAE

**As a service to readers, AACMA publishes information on seminars based on information provided by the seminar organiser(s). AACMA is not responsible for changes to seminar dates/times of non-AACMA seminars. As dates/times may change, readers should verify venue and date/time with the seminar organiser(s) in all instances before attending.*



Classifieds



Equipment

QLD Macgregor

Double head TDP whole set on Sale, great condition. Pick-up in Brisbane Southside \$130. Call Jack on 0466 585 940 or email jack_luan00@yahoo.com.au

AACMA members only - Introduction Offer – to all practicing members.

Free 3 months trial access to Modern TCM Clinic Software. Software using Latest Technology, doing everything you need and saving time and cost. Free demonstration, no obligation and risk free. Secure & Reliable. Conditions apply. SMS or call 0413397630 Michael

For sale / wanted

VIC Prahan

Evergreen herbs (singles) from the US for sale. Selling at 25% below the purchase price. Herbs all completely as new in packaging. Just arrived from the US, so expiry dates around mid-late 2021. 92 different herbs, 99 bottles in total. Email Matt on matthewb3@hotmail.com for the list of herbs and cost.

QLD Sunshine Coast

Reputable, established clinic for sale in the Noosa Hinterland, Sunshine Coast, Queensland. Its main street frontage and plenty of parking in the busy central district. With three large air-conditioned treatment rooms, reception and retail area, staff amenities and ramp access. Locally renowned for acupuncture and Chinese medicine (with a strong focus on women's health, musculoskeletal, fertility support), Osteopathy, cranial & massage. Over \$300k at 60% capacity. For further information email: amy@amy-rhodes.com

QLD Fortitude Valley

Acupuncture clinic for sale on Ann Street, Fortitude Valley. Perfect location, many walk-ins, massive client data, car park in the rear. 4 rooms, 1 consultation room. Fully equipped with treatment tables, desks, chairs all go with the sale. Great potential if subleased. Make an offer to Wayne on 0433 845 143

VIC Ivanhoe

Established 19-year-old clinic business for sale. 4 patient rooms, class space, 5 established TCM/ Massage Associates, 2 ongoing subtenants. 2 experienced support staff. Excellent reputation & Google ranking. A solid business but needs continued innovation & leadership. Which I can no longer provide. POA. Contact Elaine at management@freedomchinesemedicine.com.

QLD Chermside

KPC Chinese herbs for sale. Full dispensary of KPC single Chinese herbs. Selling for 25% below wholesale price. 93 herbs in total of varying quantities with long expiry dates. Please contact Emma on 07 3861 5881 or emma@brisbanelivewellclinic.com.au for the full list of herbs, quantities and total costing.

NSW Sydney

Successful TCM & Massage Clinic For Sale. Extensive loyal customer base. 4 treatment rooms & waiting room + own toilet. Large herbal dispensary. CBD location in Penrith. Carpark at the rear. 3-year lease remaining with a 5-year option. Clinic operating in Penrith for over 22 years. Contact Ray by email: rayzar007.rr@gmail.com

VIC Wantirna

Acupuncture/Natural Therapy/ Remedial Massage clinic for sale. Established for 40+ years. Practitioner retiring. Ready to establish further your own business. Long lease available. Share with Naturopath. Low rent + outgoings. Situated in a very busy local shopping centre. Further details contact Leo Groenewegen on 0418 580 960

Clinic Rooms

ACT O'Connor

Two consulting rooms are available at the O'Connor Health Hub, in the O'Connor Professional Centre. O'Connor Health Hub is a friendly shared space for allied health professionals. Close to shops, parking is good. Rooms are around 11 metres squared. Included are shared waiting room, internet, electricity, heating/cooling, access to bathroom and kitchenette. Call Ben on 0402 474 171.

NSW Sydney

Clinic rooms are available for rent in Sydney CBD. Wellshare is perfectly located in the heart of Sydney's CBD in the beautiful Dymocks building. Rooms available for an hour, day, week, month, year or more. To arrange a viewing call Dr Anthony Bloomfield on 0448 092 221

VIC Armadale

One beautifully appointed room in prime Armadale location. A tranquil space located with Boutique Wellness Clinic. WiFi available, Kitchen and bathroom facilities and courtyard. Access across 7 days – room rate negotiable. Please give details of your business and services in your enquiry application via email to info@houseoflife.com.au. Please come and be part of our healing practice.

NSW Maroubra

We are looking for practitioners to join our acupuncturist team. The clinic is located in Eastern Sydney. Acupuncturists should be available to work on Saturdays, Monday afternoons or Thursday afternoons. Rent is \$60+GST/day. Please contact 0451 262 035 or email tudaifu@gmail.com for further enquiries

VIC Melbourne

Workshop or training space or meditation room available for rent in a newly renovated clinic. Quiet, upstairs large room (5.65 x 2.65 mtrs) furnished with chairs and tables if needed is available on weekdays, evenings and weekends. Brand

new kitchen and lunchroom facilities included for workshop use. Contact Kim on 03 8407 3370 for more information.

ACT Hawker

Clinic room to rent at reasonable rates in Canberra Complementary Health Practice. Rent includes NBN WiFi, utilities and Eftpos. There is a waiting area, kitchen, easy access to toilets and free parking nearby. We'd love an acupuncturist to complement our team of independently working professionals. The room can be rented by the half or whole day. Please contact Julie at Julie_A_Kidd@bigpond.com.au or 0425300233.

NSW Lismore

Sale of Clinic: Acupuncture and Chinese Medicine clinic with four treatment rooms including large storage facility. Located in Lismore CBD. Established 1993 in Lismore NSW. Large stock of herbal medicines included in sale. Please call Markus Goeldi 0447 627 587

QLD, Toowong

Rooms for rent. Looking for established practitioners in Japanese acupuncture or remedial massage. Minimum of five years' experience. AHPRA/association registration required. Must be listed for private health funds. Please email application to info@ondol.com.au with your CV and cover page outlining your values and future goals.
www.ondol.com.au

NSW Miranda

Beautiful room to rent in a prestigious medical complex in Miranda. The location is close to Miranda train station (1 min walk) and Westfield Miranda (3 min walk). There are 1 or 2 rooms available 2-3 days per week. The practitioner must have own clientele. Internal secure basement parking available on certain days and ample street parking for patients. It has been recently renovated – top floor, light and bright leafy outlook. Lovely shared reception area with osteo patients, kids play area and lift access. Price is negotiable dependent on days/rooms required. Contact Madeline Hogan 0414 417 736 or email madeline@mirandaosteo.com.au

QLD New Farm

QLD NEW FARM Shop/clinic available. Two treatment rooms with upmarket fittings and reception area. New Farm, Brisbane location, below the Powerhouse apartments in Lamington St. This is a premium area and ideal space for an acupuncture clinic. Very fair rent. Contact Raf for details on 0417 626 723.

Locums / Positions Vacant

QLD Morningside

Are you passionate about helping people and dedicated to achieving results for your patients? We have an acupuncturist contractor position available in our Morningside branch, full-time or part-time hours. Experience preferred, please email your CV to tracey@tlcacupuncture.com.au

QLD Holland Park

Acupuncture position available. We at Morkare Natural Clinic at Holland Park, Brisbane are seeking an experienced acupuncturist for our active client base of mothers, women and children. Applicants must be qualified, registered and insured professionals. Stipend or commission basis. CV to info@morkare.com.au or call 07 31725035.

QLD Brisbane

Acupuncturist Grange – Brisbane. Exciting opportunity for an experienced and motivated acupuncturist to join our multidisciplinary team of allied-health practitioners. Existing 60 client/month TCM practice with big potential to build quickly through our Persistent Pain and Fertility networks. We provide everything you need so you can focus on client care. To apply or for more info, please contact glen@vibenaturalhealth.com.au

NSW Newport

Northern Beaches Practitioner wanted. We are looking for an experienced practitioner to join our team in Newport, Sydney. Would suit remedial massage therapist or other health practitioners. We have 1/2 day and full day rental rates available. Rent includes reception staff 6 days p/week and amenities such as towels etc. Please email info@therapyworks.com.au for more information and room rates.

VIC Frankston

Exciting business opportunity. Are you looking at joining a team of passionate health professionals at a brand new clinic in Frankston working alongside Clinical Myotherapist, Osteopath, and Naturopath. Providing natural health solutions for people on the Peninsula. Flexible options for room rental. Clinico system Contact Glenn on 0414 453 550

NSW Charmhaven

LakeSpa Wellness Centre, Northern Central Coast, NSW (lakespa.com.au) is looking for a TCM practitioner to join our wellness team. The centre is in a high growth area in an excellent location and has been established for over 30 years. Days and times are optional. Email resume to admin@massageschool.com.au

QLD Buddina

Honour Health is looking for a dedicated, passionate, client focused practitioner. Client base over 4000, established 16 years, in the fast growing town of Kawana on the Sunshine coast. New graduates considered. If you are a reliable and committed practitioner, please email honourhealth@gmail.com

NSW Sydney

Registered acupuncturist wanted to join physiotherapy practice in Kogarah, Sydney. Looking to build Allied Health Service. Casual role, 2 days/week with an opportunity to increase days/hours. Full reception and facilities. The successful candidate must be AHPRA registered and have professional indemnity insurance. Send CV or enquiries to info@eqphysio.com.au

QLD Eumundi

Seeking acupuncturist in Eumundi, QLD. Must have a gentle, yet confident treatment style, preferable with Japanese acupuncture experience, a high level of professionalism, the ability to be flexible, reliable, good time-management, must have individual practitioner insurance and AHPRA accreditation. Please contact Nadja or Kali on 0418 457 076 or hello@nadjasfamilyacupuncture.com

QLD Chermide

QLD / Chermide / Brisbane North: start ASAP, seeking acupuncturist contractor in an established 2 room clinic. 3-5 days/week. Included – paid marketing, Cliniko patient management system, convenient online bookings, automated SMS, EFTPOS / HICAPS, Wifi, Air conditioning/heating. Must have own insurance and memberships. Newly qualified graduates welcome. Forward applications acu.adele@gmail.com

NSW Surry Hills

Maternity locum wanted in Surry Hills, Sydney, Australia from 14th August 2019 for 6-10 months. Minimum of five year's experience with acupuncture and herbs to see clients for fertility/IVF, women's health, pregnancy, and pediatrics. Must be registered with AHPRA. Wednesday and Friday and every second Saturday morning. Please send a letter and resume to rebecca@redtent.com.au. More info here > <https://redtent.com.au/about-us/locum/>

ADVERTISE WITH US

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Welcome to our new AACMA members

FULL MEMBERS

Richard Best
Julie Bridson
Michael Budd
Amanda Campbell
David Chandraratnam
Andrea Cheetham
Zhong Chen
Olivia Cheng
Aaron Chesterton
Violeta Davis
Rachel Fitzpatrick
Kylie Freemantle
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Yue Ma
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Rosemary Shuter
Samantha Sizeland
Anastasia Sterjova

Katherine Stranger
Lih Yan Teh
Jasmine Vogel
Stephen Wilson
Min Won
Siyu Xie
Zhe Yang
Yihan Yang
Reece Yeo
Yuantian Yin
Jessica Yung

STUDENT MEMBERS

Minna-Liisa Aenkoe
Ziv Arbiv
Shai Arnup
Emely Begovic
Alison Bisset
Anita Bowen
Glenn Bowman
Daniel Bullock
Lauren Burston
Kailey Chapman
Wei Cheng
Julie Clarke
Rebecca Crisp
Georgia Cusbert
Christian de Caux
Sara Do
Kirsty Dollisson

Philippa Dunstan
Melinda Dyson
Nora Elsabaa
Rebecca Emmerton
Dale Essendrup
Karen Gay
Alicia Grinter
Stone Gye
Lucia Hains
Cassie Hancock
Lisa Hart
Nicole Hills
Denise Hung
Jacqueline Hyslop
Angela Jillard
Shayan Yanji Kashani
Calan Khong
Jack Kong
Andriana Kursar
Nina Lake
Priscilla Lee
Katherine Leitch
Silvana Lemme
Lan Li
Jing Zhan Lim
Leh Yieng Ling
Deslyn Maher
Dilnor Mahmodi
Ivanka Narai

Ka Fai Ng
Quoc Binh Nguyen
Yong Pan
Kathryn Puffett
Melissa Renshaw
Caterina Riccio
Diane Richardson
Alice Riddle
Kelly Saunders
Lei Shan
Deanne Smart
Kathryn Solomou
Siew Ping Soo
Sydney Tang
Kristy Te
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