

# Images of China

China. The name evokes a host of potent images: exoticism, an ancient civilisation, vast crowds of people, and latterly some less savoury activities. In the early spring of 1991 I had the opportunity to spend several weeks visiting the People's Republic of China with a group of lay acupuncturists from Britain. I went for several reasons. I had been using acupuncture for a number of years and wanted to learn more about this aspect of traditional Chinese medicine (TCM), and I was interested to see something of the Chinese health-care system. However, I also wanted to compare the theory and practice of what I hoped might be a representative group of British lay acupuncturists with that of Chinese doctors. Finally, I am keen to initiate further research into acupuncture in the UK, and the obvious starting point is China.

Our destination was the International Acupuncture Training Centre in Nanjing. Everywhere in China there are crowds. Bicycles constitute a major hazard for pedestrians. Cigarettes are very cheap, on sale everywhere, and heavy smoking is widespread among all ages: possibly one explanation for the common habit of hawking and spitting which persists despite government attempts to stop it. In Nanjing, Westerners, particularly if fair-haired and tall, are still the subject of intense curiosity and concentrated attention from the local Chinese. There can also be some peculiar dislocations in one's sense of reality. I was staying next to a high school where the first daily activity was highly regimented and strictly compulsory calisthenics. While orders were being shouted, through the loudspeakers came the theme tune of Monty Python's Flying Circus!

Medicine in China can be a popular spectator sport. People carry their own medical records and wait in a group in the doctor's room. There are no appointments, and doctors work until all the patients have been seen. Each patient in turn comes forward to discuss his or her complaints in front of the assembled throng, while others may contribute questions and comments along the way. Acupuncture is finally given in the same room in which six or eight patients may all have treatment at the same time. It is a curious sensation to be jostled by waiting patients who come to supervise while one is trying to insert needles into appropriate parts of another patient's anatomy.

The Chinese are evidently a hardy lot. They were quite uncomplaining about the climatic rigours which nearly floored some of the Westerners. One of their solutions is to wrap themselves in ever more layers of

clothing. The record was held by one ancient woman who had to have ten substrata carefully peeled off before finally some flesh was revealed. In the West, many patients seeking treatment with acupuncture have non-serious—although sometimes incapacitating—illnesses, while some experience feelings of ill health without an identifiable organic cause, and others have failed to respond to conventional medicine. In the East a far greater variety of conditions may be treated in this way, since for many there is no alternative. Most patients are seen daily, and often over a period of many months. Even if necessary, the multiple treatments would be difficult to justify in the reformed British health service.

Many of the senior Chinese doctors were impressive individuals. I was most taken by one distinguished septuagenarian with a mischievous sense of humour who regularly worked for 12 or more hours a day. He was most insistent upon 'good finger force'—a combination of strength and sensitivity in the fingers. He demonstrated this by holding and flicking bricks between his thumb and index finger. I saw him perform some apparently miraculous cures, particularly of painful conditions. It is extraordinary to see the pain of an acute attack of biliary colic terminated in seconds by finger pressure just below the head of the fibula, or severe, incapacitating sciatica respond in seconds to a needle inserted elsewhere on the lower leg.

## A pilgrimage

As a group, the British lay acupuncturists were all clearly committed to the care of patients, and for most this was a pilgrimage. Although they told me repeatedly that they were the sensible ones—those with more outrageous ideas had not come on this trip—there were some whose statements would strain anyone's credulity. Most of them professed a frightening cast-iron certainty about everything: the theory and philosophy of TCM, the sterility of Western science, the value of unconventional and occasionally bizarre ideas about health and illness, and much more besides. If one did not understand or agree, there were various responses. They can be summarised as Petty's paralogia of three cardinal fallacies:

1. the inappropriate use of metaphor;
2. moving the goalposts;
3. the 'emperor's new clothes' phenomenon.

There is considerable tension in the West between lay acupuncturists who study TCM, often for many years, and doctors who practise 'scientific acupuncture', which is usually restricted to trigger-point needling. Some lay acupuncturists consider that doctors are inadequately trained in acupuncture and

---

**RICHARD PETTY, MD, MRCP**  
*Bethlem Royal Hospital, London*



should call themselves by a different name, while doctors often feel that lay practitioners should not be allowed to do something as invasive as acupuncture: a difficult matter to resolve.

### Relationships

Chinese medicine is based upon relationships between events. All the talk here was of five elements, of circulating 'Qi'—a fundamental state of the universe—and of 'balancing the forces of the body'. Much of this would have sounded familiar to any pre-Galenic physician. One often has the impression of a system stuck in amber, although most Chinese theorists and practitioners of TCM have now left behind its more mystical and colourful elements, and serious attempts are being made to integrate TCM into the Western system of medicine. In many Chinese hospitals joint consultations take place between Western and TCM doctors, and all doctors of TCM spend two years studying Western medicine. This appeared to outrage some of the British lay acupuncturists, who felt that the Chinese might be losing part of their heritage and so denying it to the rest of the world. This attempted fusion of the two systems may be a tragedy for romanticism, but perhaps a triumph for rationalism. I would not, though, presume to think that Western science has somehow cornered the market on what is 'acceptable' or 'true'. That is a matter for professional philosophers. Suffice it to say that our finest philosophers of science and epistemologists have failed to agree among themselves about what constitutes 'scientific truth', and that is only within our culture. Others look at these problems very differently.

In TCM there is a constant attempt to synthesise bodily events into patterns. So, for instance, a rash on the leg would receive different treatment from an identical rash on the arm. Sometimes the desire to create patterns may overwhelm the facts about a case. To ignore inconvenient data which 'do not fit in' would, in the West, be regarded as the hallmark of the uncritical mind. I was therefore surprised to see a specialist simply ignore a new fact which did not fit into his perceived pattern of the illness. A formal system of anatomy never developed in China, so Chinese medicine is based upon the functional activity of organs. For instance, for the Chinese the liver is defined by the functions associated with it. Lesions become localised as a result of strain or damage of an area, or what is loosely referred to as 'faulty construction'. Diseases result from imbalances or physical or emotional disharmonies which open the body to attack by 'pathogenic factors', such as cold and wind.

Although the underlying philosophy of TCM is heavily rooted in Chinese classicism, the theory of TCM is essentially an empirical system based upon millennia of observation. Matters of dispute are resolved by appeal to the classic works of TCM although, interestingly, most of the Chinese TCM doctors whom I met

would frequently use treatments which did not conform to the classical principles. This is in stark contrast to the practices of many Western lay practitioners who slavishly follow the classical formulations of TCM. The power of sustained observation can at times appear amazing. For instance, the activity of the kidney is said to contribute to the formation of bone and bone marrow: observations which were made millennia before we knew of erythropoietin and  $1,25(\text{OH})_2\text{D}_3$ .

### Paying for health care

Patients pay a small fee for their acupuncture treatments. There are different health-care systems for urban and rural dwellers. Those in the cities have their health-care expenses reimbursed by their employers; the system is more haphazard in the rural areas, where a commune may pay the bills if its current circumstances permit. The lack of money is difficult for a Westerner to accept, and will make me all the more grateful for even the limited resources which we have in Britain. One particular case brought this home to me. A 15-year-old boy appeared to be having some form of drop attacks. A CT scan had been performed, which had cost the family several months wages. It was said to show some intracerebral lesion. Another scan was necessary, but no one could really afford it, and if anything had been found, then what? Neither family nor commune could afford the necessary loans, so the boy came every day for acupuncture. My concern grew when he started to develop headaches. All that I could do was to check that he did not have papilloedema. His attacks did perhaps become less severe, but what of his future? I shall probably never know. China is a poor country, and it is a major achievement that the government has been successful in providing some form of health care—even if some is not validated by Western standards—for a population that is currently over 1 billion. But this is third-world medicine. Drugs and equipment as basic necessities are scarce. A visit to the ancient, unshielded equipment in the radiology department of one hospital left me fearing that I might end up glowing in the dark! Patients and hospitals often need to get quick results. Seeing the pain induced by some traditional therapeutic massage—usually performed by blind therapists—gave me little wish to try this form of treatment, although most patients claimed benefit.

### Research

It is undeniable that many people who have acupuncture treatment do get better, although good-quality trials are rather thin on the ground. The Chinese often have different ideas about research from us. They may feel that it is unethical to withhold treatment from a group of patients. So, many studies are published, often with hundreds of patients, but few have control groups. This can be frustrating and does little to help



the cause of acupuncture in the West. Apart from the need for pragmatic trials, there is a great need for explanatory trials: is any improvement a function of the acupuncture itself, of the natural history of the condition being treated, or perhaps of some interaction between the doctor and the patient? These may appear to be obvious questions but many lay acupuncturists, and indeed many patients, regard these questions as irrelevant: only the end-result is important. Nevertheless, I was greatly encouraged by the British practitioners who went to China. Most, even those with apparently bizarre ideas, expressed willingness to participate in properly designed research projects. It is also clear that the steady pressure from the Research Council for Complementary Medicine has now resulted in most of the major British associations of lay acupuncturists thinking seriously about becoming involved in research, and of including research in training programmes.

Do I now believe TCM to be a panacea? Definitely not. Do I believe that there is some sort of 'energy' circulating in the body? Well, probably not. Although I have had the privilege of feeling the sensations which are alleged to denote Qi, for instance associated with appropriate needle insertions, I am still unconvinced that there is anything here which cannot be explained within our current model. However, I remain open-minded about this, and I shall certainly support rigor-

ous research in the area. It may all just be a matter of endorphins, neural reflexes and placebo effects, but it is already clear to me that TCM, when properly applied, does not produce a counter-irritant stimulus, although the practice of Western trigger-point needling does. Some other explanation is needed.

#### **A unique country**

Despite the tragedy of June 1989, China remains a fascinating country, and one of which most of us still know very little, even though it contains nearly a quarter of the world's population. To experience the everyday life of the country, even for just a few weeks, is to be constantly astonished. Although I had already travelled extensively in Asia, I found China to be unique. We must all hope that the next stage of Chinese history will be more peaceful than its recent past.

#### *Acknowledgements*

I am grateful to Drs Cui Xue Liang, Wang Tianjun, and Chen Zide, and also You Benlin and Li Yaoping, for teaching me, and for facilitating my work in China.

---

Address for correspondence: Dr R. Petty, Bethlem Royal and Maudsley Hospital, Denmark Hill, London SE5 8AZ.