Qi as the Ground of Healing

Over the last three decades, myofascial work has become widespread in the field of bodywork. This has happened because it has proved to be a very effective approach to healing the body.

But what is the actual healing mechanism underlying this work?

In this article I propose that even though myofascial work appears to be working simply with the physical tissue structure, it is actually working with the energetic field of the body. I further propose that this energy field is more fundamental than physical structure, and is where the deepest healing occurs. I suggest that it is actually the field of Qi (or energy) that is fundamentally affected by myofascial therapies.

What has led me to this place is my understanding of the profound interrelationships between the fascial network and the meridian and acupuncture point system, which maps the energy field of the body.

The practice of acupuncture is not accessible to most bodyworkers. However, acupressure, which uses the hands, in particular finger pressure on the acupuncture points, provides a vehicle which bridges the structural and the energetic systems. Acupressure provides an interface between soft tissue modalities and energetic medicine.

Thus the knowledge of acupressure makes it possible to significantly expand the healing capacity of myofascial work. It allows us to intelligently track and work with the flows of energy as they are affected by tissue manipulation, and to greatly facilitate, understand and direct the healing flow of Qi.

A number of recent landmark publications and research studies, as well as the writings of an ancient Chinese physician, have noted interrelationships between tissue manipulation and Qi. An overview of these publications follows.

After that I present a case study which shows not just that the two systems are interrelated, but that myofascial work creates profound healing shifts in the client’s energetic field.

Trigger points and acu-points

Mark Seem’s 1993 work provided an exploration of this interface between the meridians of acupuncture and bodywork. He boldly asserted, “Acupuncture from a meridian perspective is primarily a myofascial, musculoskeletal therapy.” (1) While it also produces improvements in internal systems, it does this by treating the body surface of the myofascial body fabric.

Much of Seem’s work looked at the close relationship between the acupuncture meridian system and the trigger point system developed by Dr. Janet Travell in the 1940’s. She defined a trigger point as “a highly irritable localized spot of exquisite tenderness in a nodule in a palpable taut band of muscle tissue.” (2)

Travell had no knowledge of Chinese medicine, yet her trigger point map corresponds closely to the acupuncture points. How can we explain this close correspondence? It appears that Travell had rediscovered an ancient system first espoused by Sun Simiao in the 7th century. That venerable Chinese physician discovered that tender points on the body, what he called a-shi points, were accumulations of congested, stagnant Qi. While modern maps of the meridians can provide precise anatomical locations of acupuncture points, these
locations are merely a guide to the areas where the tender a-shi points may be found.

When the communist government in China resurrected the lost art of acupuncture in the 1950’s, they created a system that could be strictly codified and taught in colleges and which moreover had a western medical slant. Point location became a theoretical exercise and the concept of the a-shi points was overlooked. However, this method of palpating for tender points remains alive and well in Japan where acupuncturists are far more willing to use their palpation skills to find points.

Mark Seem wanted to restore this myofascial perspective to acupuncture. “To me, unblocking the qi through acupuncture is identical to myofascial release ... Classical acupuncture and modern myofascial perspectives have much to offer each other.” (3)

Myofascial chains and trains

The concept of trigger points was taken a step further by BJ Headley who, in treating myofascial pain, identified strings of related trigger points which form myofascial chains (4). The work with patients with low back pain traced myofascial chains down the back and legs in a pattern that bears a remarkable similarity to the pathways of the Bladder and Gall Bladder meridians.

The ground breaking work of Thomas Myers’ Anatomy Trains took this concept of myofascial chains to another level. He identified 9 of these myofascial networks which he called myofascial meridians. “Muscles operate across functionally integrated body-wide continuities within the fascial webbing. These sheets and lines follow the warp and weft of the body’s connective tissue fabric, forming traceable “meridians” of myofascia.”(5)

Myers took time to explain that the myofascial meridians are not acupuncture meridians. Yet to those with a knowledge of acupuncture meridians, the similarity is immediately obvious. Others have taken the trouble to investigate the correspondence. Peter Dorcher’s study of Myers’ nine myofascial meridians revealed that, “In 8 of 9 comparisons, there was substantial overlap in the distributions of the anatomically derived myofascial meridians with those of the acupuncture Principal Meridian distributions.”(6) In addition the ninth could be described as a combination of two acupuncture meridians.

Dorsher concluded that, “The marked degree of correspondence noted in this qualitative study between the distributions of the anatomically derived myofascial meridians to those of acupuncture Principal Meridians is unlikely to be coincidental.”

More generally, scientists and practitioners alike have noted the close correspondence between the meridians and the fascial network. John Barnes, developer of Myofascial Release Therapy asserts that, “The acupuncture meridians lie within the fascial system. Recent research has shown that each acupuncture point is a fascial structure.”(7)

One such piece of research was that by Langevin and Yandow which mapped acupuncture points in serial gross anatomical sections through the human arm. “We found an 80% correspondence between the sites of acupuncture points and the location of intermuscular or intramuscular connective tissue planes in postmortem tissue sections.” (8)

To return to Dorsher, he believes that sufferers of myofascial pain can benefit from either acupuncture or myofascial techniques. “I think it is fair to say that the myofascial pain tradition represents an independent rediscovery of the healing principles of traditional Chinese medicine.” (9)

Under the Bonnet

While these studies undoubtedly point to a correspondence between myofascial structures and meridians, I believe that it is the system of Qi flow that underpins all physical structures including the fascia and organs. With a knowledge of the acupuncture meridians we can work directly with the underlying Qi, thereby not simply achieving myofascial pain relief, but affecting qualitative changes in our clients at the levels of organs, sys-
tems, psyche and emotions.

Let me give an example of a recent case. My client presented with neck and jaw tightness, a feeling of being stuck in her head, worrying excessively, feeling tight and sore in the gut and feeling out of touch with her legs and feet.

I used standard myofascial techniques in her jaw, neck and upper chest. The Stomach meridian flows through all these areas. The myofascial work not only softened the tissue, but released blocked Qi in the upper part of the Stomach meridian, allowing a free flow of Qi through the lower part of the meridian, that is the abdomen, legs and feet. As these changes happened, I supported and enhanced them by holding some Stomach meridian points on her legs.

The client noticed healing that went far beyond the immediate effects of the myofascial work. She felt more balance between the upper and lower body, her stomach relaxed and there was a sense of ease in the abdomen. Such were the physical changes. But in addition there were significant emotional and energetic effects. There was a qualitative shift in how she experienced herself internally. She felt grounded and centered mentally, emotionally became much less worried, and overall had a feeling of equanimity. Her pulses also changed, reflecting a balancing of the Stomach meridian, as well as other meridians. These changes were all in alignment with harmonizing of the Stomach meridian and the field of Qi.

All these healings came about as a result of releasing the fascia, but more fundamentally from a balancing of the Qi flow in the body.

Conclusion

As bodyworkers, we are uniquely placed to bring these two systems, one ancient, the other modern, into an integrated whole. Working with the fascia of an area of the body releases the congested Qi in the acupuncture points in that area, and also in distant parts of the relevant meridian or meridians. Understanding both systems allows us to intelligently facilitate shifts in both the fascial network and the energy body, thus healing not just the tissues, but also the organs, the psyche and the emotions.

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