

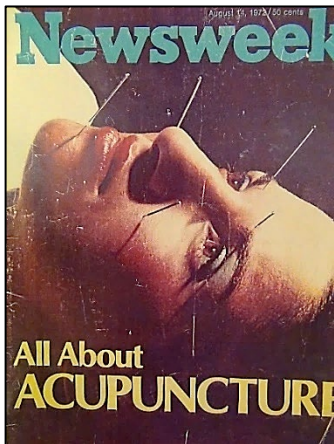
## How Acupuncture was Introduced in Hawaii

In Hawaii, the practice of medicine by Chinese physicians was initially regulated in **1880** when the Minister of Interior under the Hawaiian Monarchy authorized to grant of a license to individuals who produced a diploma or authority to practice medicine in China with good moral character and proved their identity. This licensing law was repealed in **1896** when the Board of Medical Examiners was established. More than 75 years later, the Legislature passed Act 206, Session Laws of Hawaii H.B. No. 2378 "Acupuncture Practitioners" 436D in **1974**, which launched an independent board to regulate the practice of Acupuncture in Hawaii.

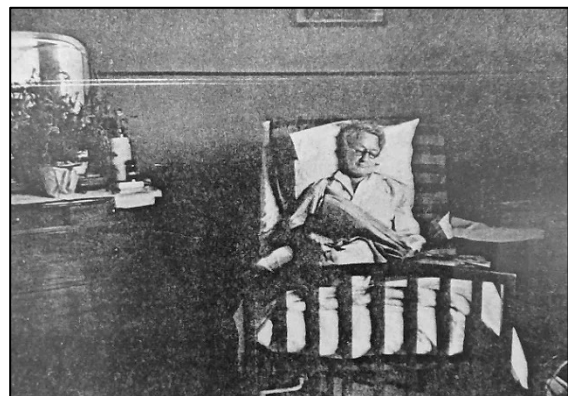
*– By Clinton Tanimura, State Auditor  
Sunset Evaluation Update of Acupuncture 1987*

In **1971**, Mr. James Reston, the New York Times magazine's Vice-President, visited China as a high-level reporter before U.S. President Richard Nixon's formal visit to China in **1972**. Unfortunately, Mr. Reston suffered acute appendicitis while in Beijing. He underwent emergency surgery in the Anti-Imperialist Hospital. After surgery, Mr. Reston received acupuncture to treat post-operative pain and neurological discomfort and enhance quick recovery. He was the first American in China to experience acupuncture for post-operative pain. That was the exciting media topic before the formal visitation of the President.

The news spotlighted the movement to accept and legalize acupuncture in the United States. It proved a robust political incentive to push for acupuncture licensing in various States, and Nevada, Hawaii, and California were the first States to pursue this issue. Practitioners trained in Asia but in the U.S. practiced "un-legal" since no licensure protocol existed. They treated their compatriots and women behind closed doors, with few "outsiders" aware that they existed. Newsweek, People Magazine, This China incident phenomenon, and other popular magazines featured Mr. Reston's experience. The United States finally adopted acupuncture and Traditional Oriental medicine concepts as a developed country.



Newsweek, August 14, 1972



Mr. James Reston was resting in the Hospital in Beijing.  
People, April 15, 1974

[illegible]

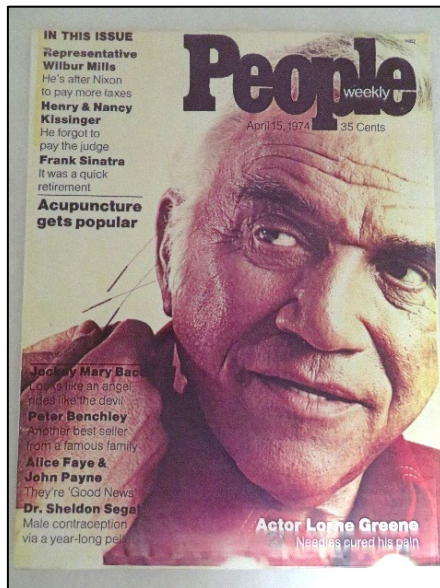
Originally, comedienne Lily Tomlin consulted an acupuncturist for asthma. Now she just goes because it helps her to relax, having needles placed at dif-

While working on the West Coast, actress Anne Bancroft, who is also the wife of funnyman Mel Brooks, consulted an acupuncturist for relief of

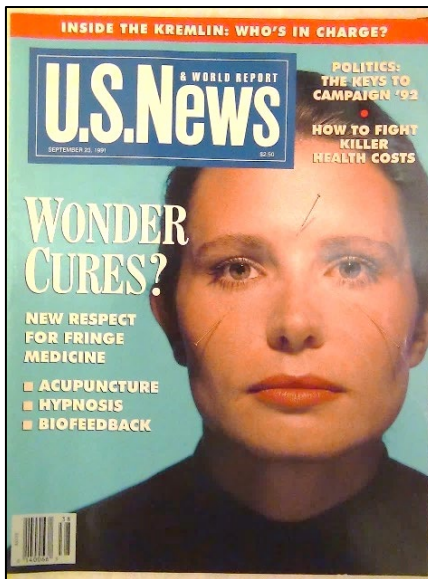
**Zsa Zsa Gabor** fell off her horse and hurt her shoulder so severely she couldn't move it. Trips to several high-priced Beverly Hills hospitals

Somehow, entertainers tend to comment with gags and irony, which is their nature. Mr. Charley Weaver, a comedian who suffered left hemiplegic paralysis after a cerebral infarction, said that the sharp pain diminished with a single acupuncture treatment, and symptoms improved with acupuncture care. A Korean acupuncturist told him that he always prayed before treating patients. Still, Mr. Weaver said with a chuckle that he prayed that he “not be hit by thunder lightning with hundreds of needles placed in his body.”

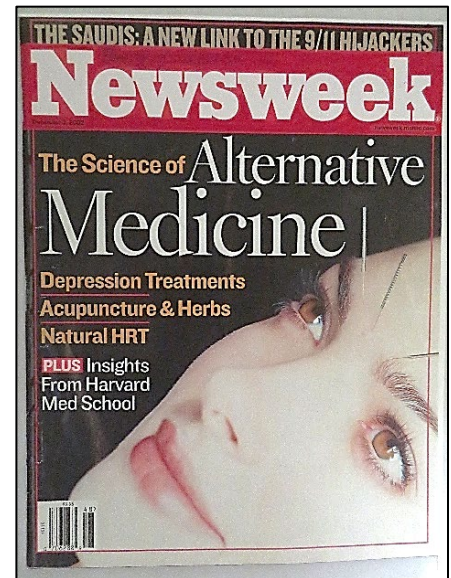
When California had not legalized acupuncture, acupuncturists marked the acupuncture points, and a physician applied acupuncture needles. Ms. Anne Bancroft suffered from arthritis tendinitis and was treated for low back pain with acupuncture. Actress Zsa Gabor experienced shoulder pain after falling off a horse, and Mr. Greene recommended that she try acupuncture, which relieved her pain. She had been under the care of a prominent doctor in Beverly Hills before receiving acupuncture.



April 15, 1974



September 23, 1991



December 2, 2002

**The word "acupuncture" derives from the Latin word "acus," which means needle and, "pungere" as the meaning of puncture or pierce. There are many medical terms are arranged and derived from the Greek and Latin words in the coined words of meaning.**

In April 1971, I left Japan with a one-way ticket with a single suitcase that was twenty-three years old, a reckless challenge. My destination was either San Francisco or Los Angeles to settle down.

There was a stopover in Honolulu, a route to the west coast. Back then, I thought Hawaii was only a single island. When I stepped out of the "Honolulu International Airport" (Daniel K. Inouye International Airport), my immediate impression was, "This place is irreplaceable," the air was so fresh under the blue sky with gentle winds stroking my face, and unobstructed ocean view.

I decided to stay in Honolulu for a few days. However, I knew nothing about the right or the left of Honolulu's city, and I checked into the "Nakamura Hotel" downtown, which I thought was Waikiki.

The next day, I asked the front desk if they knew any Japanese acupuncturists in town, and the clerk told me that there was \*Mr. Ryoichi Watanabe runs his acupuncture clinic on Palolo Avenue in the Kaimuki District. I took a taxi immediately and visited Watanabe Sensei's office; he is a born-again Christian with a sight impairment. Watanabe Sensei was born in Fukushima prefecture, Japan. He was kind-hearted, and the clinic attached to his dwelling.

Watanabe Sensei said many patients were flight attendants (called the "stewardess" in those days) of Japan Airlines. Their working environment is stressful; pushing and pulling heavy service carts in the low-pressure cabin alley, exposure to cosmic radiation, under forced air ventilation, and assisting passengers are overwhelming. Many cabin attendants experienced low-back and shoulder problems, infertility, and cystitis.

I asked him about contacts with other acupuncturists in Honolulu. Watanabe Sensei told me it was challenging to communicate with other nationality acupuncture practitioners because of language barriers, and it was rare to contact Japanese acupuncturists. We further discussed and concurred that if acupuncture is not legalized in Hawaii, anyone could practice acuity without qualification and training; therefore, there is no protection for the patients and acupuncturists that Watanabe Sensei agreed, and we started contacting Japanese acupuncturists in Hawaii.

Other acupuncturists in Hawaii from Japan were \*Hiroshi Ogata Sensei, Sachiko Sakihara Sensei, Noriko Tadokoro Sensei (who lives in Hilo), \*Kenshi Nabeshima Sensei, from Nagasaki, Japan who is also a pharmacist. \*Yosei Shinsato Sensei, \*Masaru Toguchi Sensei from Okinawa prefecture practiced the "Ryodoraku" systems and taught acupuncture to two chiropractors in an office at 1010 South King Street. The young acupuncturists were \*Keiji Inuo Sensei and \*Tsuguo Nakajima Sensei. They had a clinic near Ala Moana, and Masahiro Noguchi Sensei (now lives in Japan). Later, I took over Toguchi Sensei's clinic with Noguchi Sensei when Toguchi Sensei moved to Los Angeles to join his son Leslie Toguchi, L.Ac., a licensed acupuncturist in California. After joining the Japanese acupuncturists, we formed the "**Honolulu Academy of Acupuncture**" (HAA) in **1972** with \*Watanabe Sensei as the president. Our mission was to introduce the initial acupuncture bill in the Hawaii legislature. We realized that the voice must unite with all the qualified practitioners to proceed with acupuncture's legalization in Hawaii.

Then we contacted other nationalities acupuncturists, \*Henry Chang, Kook D. Chun served as a member of the state Acupuncture Board later, and \*J.W. Roh, Ph.D. from South Korea, research on "Four Types of Constitutional medicine". \*John Young, Ph.D., one of the Hawaii Acupuncture Association Founders. Suen Hang Yee, herbalist practicing downtown. Lily Siou, Ph.D., are from Hong Kong, is the Founder of the "Tai Hsuan Foundation". \*Lucy Lee, Ph.D., from Taiwan, is the Founder of the "Oriental Medical Institute" and the "University of Health Science". \*Mabel Chang, who served as Chair of the Acupuncture Board. Winston K.S. Yeh,

an M.D. in Taiwan. Benny Fan served as a member of the state Acupuncture Board. \*Setwin Tang is the Founder of the "Hawaii Acupuncture & Oriental Medicine Council" and was Chair of the state Acupuncture Board. My destination to the U.S. mainland derailed, and I felt a calling to stay in Hawaii suited me. Since acupuncture legalization was still in process, I acquired a Massage therapist license (MAT-599) in 1975.

**Sensei = means Teacher or Instructor with courtesy in Japanese.**

**The name with \* marked person is deceased.**



## **A Marching Forwards to Legalization of Acupuncture in Hawaii**

An attorney \*Mr. Ronald Oldenburg, Esq., and Mr. Richard Ing, Esq., gave us legal advice to prepare and proceed with the acupuncture bill. Senator \*Anson Chong and House of Representatives \*Spark Matsunaga (who later became Senator) introduced a companion bill to the legislature. Rep. Matsunaga said his father was an acupuncturist in Japan, which surprised us. Sen. Matsunaga was pleased to hear about the acupuncture law established in Hawaii. We were fortunate to have help and support to achieve our goal.

**When the acupuncture bill was introduced in the 1974 legislature, a lobbyist representing dentists and physicians came to see us. He told us that dentists and physicians should be exempt from license requirements to practice acupuncture based on their Western medical expertise, or the bill might drain out. Since we had no political skill to grasp the debate, we had to revise the contents of to accept an exemption clause for dentists and physicians. After hardship and massive hearings, the acupuncture bill was finally passed and signed by Governor George R. Ariyoshi and became law as 436D-HRS (Hawaii Revised Statutes), enacted on June 12, 1974.**

**Hawaii was the second state to legalize acupuncture in the U.S. after Nevada passed it in 1973. Then, the State of California legalized Acupuncture with Hawaii's law as a reference and authorized it in 1976. There were many Chinese descendants in the states of Nevada and California.**

## **The Establishment of the State Board of Acupuncture**

After the enacted acupuncture law, the next step was to set up the Board of Acupuncture within the Department of Commerce and Consumer Affairs (DCCA). It must establish Rules for educational standards and the state licensing examination process in the Professional and Vocational Licensing Division. Initially, we struggled to establish an academic standard and define the laws of acupuncture because of the absence of any historical background in acupuncture or traditional Oriental medicine education in Hawaii. We reviewed and studied the existing medical-related laws in Hawaii, acupuncture law in Japan, and other educational criteria. The Governor nominates candidates from applicants for official members to the board, consisting of three professionals and two public members who maintain fair board business.

Dr. Julia Tuei, M.D., the gynecologist, and founder of "The Foundation of East-West Medicine" from Taiwan, and research on "Contraception with acupuncture," was elected as the first Chairperson of the State Board of Acupuncture. Three professional members appointed were Randy Chun (Korea), Lily Siou (Hong Kong), and Setwin Tang (China, elected as Chair after Dr. Tsuei). We recommended \*Kenshi Nabeshima Sensei, review for qualifications and candidate endorsing to the Governor for the initial Board members. The term of a Board member is four years and serves up to two terms with re-appointment.

**The Board member's priority task is to protect the public, assess and improve the educational standard, revise the Rules to affirm professional status, and auspice any violation of the rules.**

Members receive no monetary compensation, but flight expenses will be reimbursed to other island members. Remuneration received from the government might interfere in the decision-making and affect the member's neutral position. The Board meeting is held monthly (later with the bi-monthly meeting) in the conference rooms or meeting rooms at the DCCA. The meeting is open to the public may opine.

Each state establishes its own Board to oversee its licensed professionals in the United States. To become a member of the Board in Hawaii, one must be interested in the law of acupuncture and be concerned for the public's safety. Anyone can submit their application to the Governor's office, and the board member's status is an employee of the state without compensation. In some States, to maintain fairness and avoid conflict of interest, a person affiliated with the acupuncture school, such as faculties and directors or other medical professionals, is excluded from becoming an Acupuncture Board member. Revising the Rules and Regulations to protect the public with a cooperative and constructive stance in Hawaii's acupuncture society is essential.

**DCCA = Department of Commerce and Consumer Affairs**

335 Merchant Street, Honolulu, HI 96813

**PVL = Professional and Vocational License Division**

Mail address : P.O. Box 3469 Honolulu, HI 96801

Executive Officer: Phone: (808) 586-2692

E-Mail: [acupuncture@dcca.hawaii.gov](mailto:acupuncture@dcca.hawaii.gov)

**Rules & Regulation = Hawaii Administrative Rules 16-72 (HAR 16-72)**

### **Advisory Committee for the Acupuncture Board**

A separate function within the State Board is called the "**Advisory Committee**," which serves as an advisor from professional aspects to the State Board of Acupuncture by complimentary service, referred by the Board, and helps the RICO (Regulated Industries Complaints Office). When professional misconduct occurs by licensed acupuncturists and litigation cases, committee members must assess and advise the Board of Acupuncture. The State Board can nominate and adopt any

number of members for the Advisory Committee and terms but prefers more than five years of professional experience. Usually, it is desirable to register three to five people. However, there has been no issue in Hawaii that progressed to litigation in court and trial.

## **The First Educational Requirement in Acupuncture**

*Please refer to Chapter 436D-HRS*

Since the accreditation for the acupuncture education system did not exist in 1978, The Board of Acupuncture set a minimum educational requirement; the Board strived hard to develop an ideal academic standard compared with other countries with different criteria for proper acupuncture education. This original program listed the minimum required hours as 1,056 hours completion in two years. Acupuncture school is regarded as Vocational training and registered and approved by the Hawaii State Department of Education. The first acupuncture educational standard, both academic and clinical, had to be completed in two years by 1976. There were qualified acupuncturists from China, Korea, and Japan with different educational criteria in acupuncture sciences. Creating an academic standard for Hawaii to incorporate all the other countries' education and training was challenging, but it had to go through.

An initial acupuncture license program is required in the law as follows:

Classroom learning Lecture: 576 hours, which is within 18 months.

Practical clinical skill: 480 hours (within six months)

Curriculum requirement: Theory of Oriental Medicine,

Anatomy (east and west),

Theory of Meridian system,

Acupuncture points. Physiology (east and west),

View of Five Elements,

Clinical diagnostics (east and west),

Pathology (east and west),

Clinical acupuncture and moxibustion,

Needling techniques and Forbidden points,

Hygiene and Public Health,

Electric apparatus and procedure.

An applicant who already acquired credits in Anatomy, Physiology, and Hygiene of the above requirements given nine months of study credits in a portion of Western medicine and Clinical training required a total of 2,000 hours., waived 288 hours out of 576 hours. The training apprentice had to complete 4 hours daily and an entire 100-week training course five days a week in a tutorship. A qualified instructor must have at least five years of clinical experience and submit a copy of their original license.

Two Chiropractors \*Ted Watanabe, D.C., and \*Hideo Tanji, D.C., have been in tutorial training under \*Masaru Toguchi, L.Ac., for two years of studying and clinical training in the "Ryodoraku" acupuncture system—consideration to provide the Tutorship training route to reflect China's education systems at that time.

The license examination had three segments: a written, clinical, and oral interview. The Board of Acupuncture's professional members created 120 questions for the written exam, consisting of one hundred acupuncture-related exam questions and twenty jurisprudential questions. The written exams were in English and translated into Japanese, Chinese, and Korean. There was a practical exam and an oral exam.

After an Examination protocol started, the Board received a complaint from one of the applicants who failed the oral interview and claimed racial discrimination. The applicant's objection is based on National origin discrimination. The Board decided to discontinue oral examination to avoid a segregated impression.

The Board had a provision to bring in applicants to provide their interpreter for the practical exam. However, there were scarcely qualified interpreters for acupuncture in those days—still, most brought along their friends or relatives who did not know about acupuncture.

After much deliberation, the Board deleted the clinical and oral examinations requirement. The decision was to offer a written examination only with English and clinical questions to abolish linguistic discrimination. During the first stage of legalization, the number of applicants who took the license exam was small. Applicants must take a Tubercular test (TB) with the school graduation certificate or diploma attached with an academic transcript describing study hours at the school and two-character reference Affidavits. All applicants could apply for examination with a tourist visa, foreigners without working access.



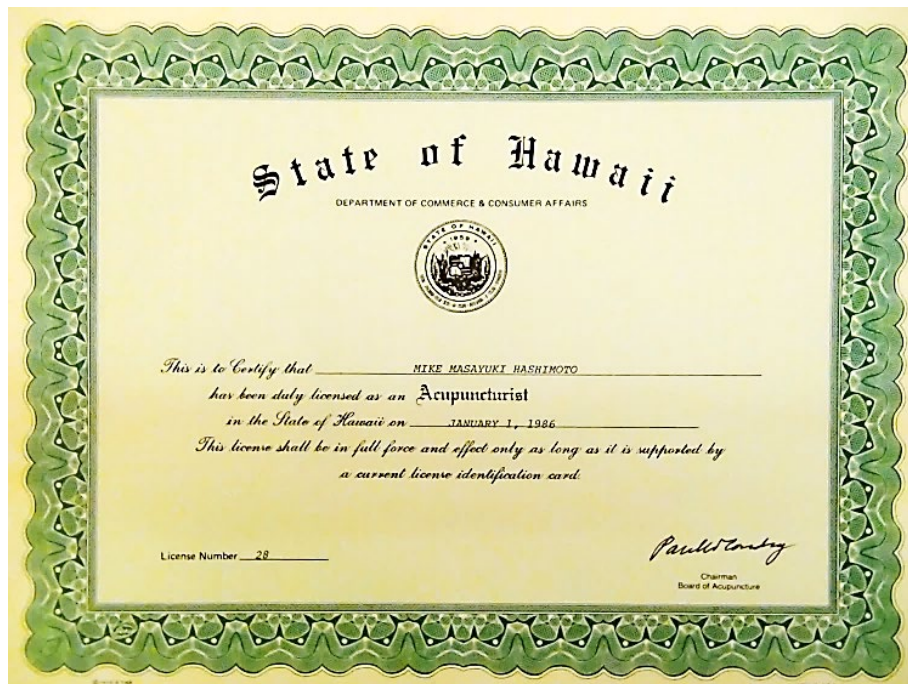
## Certificate to Practice Acupuncture

*The certificate must be conspicuously displayed in the office.*



First Certificate (436-D, 1977)

An initial certificate to practice acupuncture was a unique design with the Yin-Yang and Five Elements symbols.



Re-enacted Certificate (436-E, 1985)

## The Establish the Hawaii Acupuncture Association (HAA)

After the succession of the legalization of acupuncture, the "**Honolulu Academy of Acupuncture**" (HAA) dissolved to step up more large-scale acupuncture organizations for licensure. We established the "**Hawaii Association of Certified Acupuncturists (HACA)**" in 1977. All licensed acupuncturists' mission was to unite a better future for acupuncture and Oriental medicine practices in Hawaii, continue acupuncture education, and stabilize Hawaii's licensees' status. Seven volunteer acupuncturists established the HACA. The founding members were \*Jon Young, Ph.D., as President, \*Tsuguo Nakajima, L.Ac., \*Ted Watanabe, D.C., L.Ac., \*Teruo Tanji, D.C., L.Ac., \*Setwin Tang, L.Ac., \*Randy K.D. Chun, L.Ac., Ph.D., and Mike Hashimoto, L.Ac., Ph.D. Later we reevaluated the association's title and revised the words "Certified" to "Licensed," we decided to re-title it as **Hawaii Acupuncture Association (HAA)**. Once, HAA membership grew to 134 members.



Members of the Hawaii Acupuncture Association in 1978



## The HAAs' President of Emeritus

*-Alphabetical order-*

*Kabba Anand, Marik Cotter, Mike M. Hashimoto, Koji Kajiwarra, Joni Kroll,  
\*Leon Letoto, Wai Hoa Low, \*Setwin Tang, Craig Twentyman (HAOMA),  
Kyong Yi Vani, \*Geraldine Wade, John Welden, \*Jon Young (HACA, HAA)  
Barbara Ota (2019 - Present)*

The association's logo design has proceeded with the following concepts:



**YANG / YIN** – Mugwort leaves represent herbs as the traditional symbol of the dual distribution of energy forces, expressing the counterbalancing of evolution and involution.

**CADUCEUS** – Caduceus served as a symbol of moral equilibrium and good conduct. The wand as a needle represents power, the two snakes' wisdom, and the wings' diligence. The caduceus also signifies the integration of the elements, the rod corresponding to earth, the wings to air and spirit, the serpents to fire and water, and illness and healing, all under the Yang / Yin symbol embraced by mugwort herb leaves.

**RIBBONS** – Ribbons are pleated to form a line symbol of immortality by their shape and to carry a heroic significance, as all crowns fulfill.

Logo designed by Mike M. Hashimoto

*References:*

*A Dictionary of Symbols: by Cirlot, pub. Dorset Co, New York*

## ACKNOWLEDGEMENTS

*The Hawaii Acupuncture Associations of the past associate included the “Maui Acupuncture Association” led by Kabba Anand, D.Ac., and the “Big Island Acupuncture Association” led by Chieko Maekawa, D.Ac., Ph.D. The “Big Island Acupuncture Association” and HAA on Oahu, consolidated in 2018, while the Maui Acupuncture Association has become inactive. In January 1988, the “Acupuncture Association of Hawaii” 1983, “Hawaii Acupuncture and Oriental Medicine Council” 1988, established by Setwin Tang, L.Ac., to liaison legal issues between HAA, acupuncture schools, and state acupuncture licensees. We thank Dr. \*Jon Young, Dr. \*Setwin Tang, Dr. \*Leon Letoto, Dr. \*Geraldine Wade, \*Ted Watanabe, D.C., L.Ac. \*Hideo Tanji, D.C., L.Ac. and \*Cyrus W. Loo, M.D., shared their experiences helping an intermediate in Hawaii's acupuncture society.*



## HAA Activities



HAA Officers installation



Presentation of Honor plaques



Strive for future progress!



Fellowship meeting



Continuing acupuncture study



Acupuncture Day's Exhibition at the Chinese Cultural Center



Annual luncheon meeting



## The Case Studies & Clinical Exchange Continuing Acupuncture Education



"Sorimachi System" introduction  
By Chieko Maekawa, D.Ac., Ph.D.



Stop smoking session.



Chondrocalcinosis



Kinesio-acupuncture by  
Mitsuko Hashimoto, L.Ac.



Treatment of Insomnia



Auricular acupuncture



Moxa/needle to induce hyperemia.



Post herpes neuralgia



L-spine stenosis



Advanced RA in hands



Cosmetic acupuncture



Treatment for ankle sprain



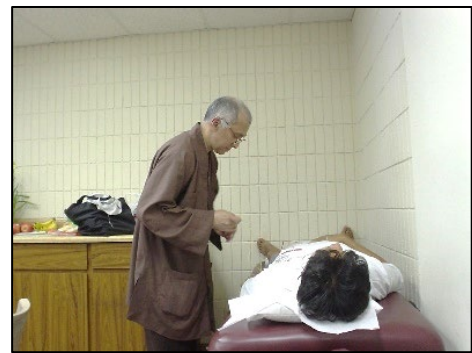
Plantar fasciitis



Acu-Color therapy by Koji Kajiwara, L.Ac.



Loss of lordosis



Irritable bowel syndrome

## **The Transition and Growth of Acupuncture Schools**

Initially, two schools opened under the Hawaii State Department of Education's approval as vocational training schools in **1983** were the Oriental Medical Institute of Hawaii and Tai Hsuan Foundation in Oahu. **NCASC** (National Council of Acupuncture Schools & Colleges) established to administer the "Clean Needle Techniques" certification in **1990**. After that, six schools opened. It increased to nine schools when the most numerous after the Board adopted the **ACAOM** (Accreditation Commission for Acupuncture and Oriental Medicine, former **NACSCAOM 1982**) **NACSCAOM** = National Accreditation Commission for Schools and College of Acupuncture and Oriental Medicine, which the Federal Education Department did not approve yet, and the accreditation standard as ACAOM approved by the Federal Department of Education **1993**.

The state Board of Acupuncture struggled to adjust the specific US accreditation system's transition from the Hawaii State Department of Education. Since stringent requirements by the ACAOM, some schools had to cease operation by difficulty keeping up with qualifications or experiencing financial burdens.

To maintain acupuncture schools' existence, they must train skilled graduates and keep their businesses stable after acquiring the license. It was regrettable that WMI (World Medicine Institute, former Tai Hsuan Foundation) did not obtain ACAOM approval; one of the oldest schools had to close in April 2018. However, the ICAOM (Institute of Clinical Acupuncture and Oriental Medicine) presence may be appropriate with the Hawaii population's ratio.

Since there is no educational subsidy, the average number of school students remains, with 30 to 40 students and about thirty license applicants succeeding yearly. To recruit students, it is essential to provide lecturers and professors with academic and clinical knowledge. However, I had the opportunity to serve as Dean of Academic Affairs at the **Oriental Medical Institute** for eight years ('84-'92). Due to its principal or founder's acupuncture background and cultural differences, it required some adjustments in teaching methods.

## **Current Educational Standards and Requirement Hours**

The U.S. Department of Education assessed and approved a private accreditation agency, the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM), specializing in acupuncture. ACAOM will determine the educational standard and institutional requirements for Acupuncture and Oriental Medicine programs in the U.S. and accredit programs and institutions that meet these requirements. The establishment of ACAOM and its recognition by the U.S. Department of Education has made it possible for Acupuncture and Oriental Medicine students to obtain federal student loans for their education.

Since then, all acupuncture schools in Hawaii have evaluated the standards and rules ACAOM approved. The State of Hawaii Board of Acupuncture adopted the accreditation system as a standard in **1993**.

**NOTE:** The State of California's standards are inconsistent with the present accreditation system, leading to unreliable assessment of educational standards. They have their selective institution for academic criteria instead of the accreditation process.

## **ACAOM's Educational Requirement for Acupuncture School**

1. History of Acupuncture and Oriental Medicine
2. Basic theory
3. Acupuncture point location and Channel (Meridian) theory
4. Diagnostic skills
5. Treatment planning in acupuncture and Oriental medicine
6. Treatment techniques
7. Equipment and safety
8. Counseling and communication skills
9. Ethics and practice management
10. Biomedical, clinical sciences
11. Oriental herbal studies
12. Other Oriental medicine modalities
13. Clinical Practical acupuncture and Herbal medicine

Required hours (as of 2019):

Acupuncture courses : Theory 1,245 hours, Clinical 660 hours

Total of 1,905 hours

**Oriental medicine courses : Theory 1,755hours, Clinical 870 hours**

**Total of: 2,625hours require in Hawaii**

**ACAOM address:** 8941 Aztec Drive, Eden Prairie, MN 55347, USA.

**Some states require only acupuncture courses, but Hawaii affirms completing the Oriental medicine courses due to prescribing and dispensing herbal medicine.** Entering acupuncture courses requires two years of college-level education as a prerequisite. The educational requirements may include two-year Premedical or science studies before entering acupuncture school and require completing a four-year college.

**Premedical course** = consists of Biology, organic matter physical science, Chemistry, Botanical Science, Molecular biology, Biochemistry, etc.

### **A Consequences of Physicians and Dentist's Exemption**

In **1974**, we were forced to accept Bill 436D under the threat of their lobbyist, allowing dentists and physicians to practice acupuncture without asking about their qualifications. A few years later, the Hawaii Dental Association and State Dental Examiner Board submitted a revision to withdraw the exemption of dentists from the acupuncture statute due to the failure to set up a clinical standard related to the acupuncture procedure in dentistry.

In **1997**, there were no acupuncture-trained physicians in Hawaii. Some physicians used a hypodermic needle rather than an acupuncture needle, causing extreme pain and bleeding patients. HAA and the Acupuncture Board introduced a bill stating that physicians who desire to perform acupuncture must be equally educated to become licensed in acupuncture. The Senate Committee on Ways & Means, Chairperson Sen. Donna Ikeda, recommended that HAA and HMA (Hawaii Medical Association) seek a compromised solution.

The Hawaii Acupuncture Association (HAA) invited the Hawaii Medical Association (HMA) to conduct a luncheon meeting to find a compromised solution. Attendees were the President of the HMA and HAA, the VP of HAA, the Executive Director from HMSA, the Legislative Committee of HMA, the Integrative Committee of HMA, the Legislative advisor of HAA, and the opinionizer from HAA. Still, HMA firmly declared that according to the law, the Physician's scope of practice describes that "physicians can use their healing tool any way they want" and "physicians trained in using an injection needle, so why not insert acupuncture needles?" One of the attending physicians stated acupuncture's benefits and effectiveness through his personal experience. At the end of the lengthy discussion, HMA suggested that for themselves, a 200-hour video of acupuncture suffice as "acupuncture training." that concluded the meeting. At the legislative hearing regarding this issue, the State Board of Medical Examiners, HMSA, Kaiser Permanente Hospital, Hawaii Psychology Association, and nine physicians lined up for testimonial presentations to endorse videotape training for physicians. Acupuncturists and acupuncture students came out in force to oppose their Bill. The Committee Chair, Sen. Ikeda, expected the physicians to justify their meager training proposal. But the Physicians took on an uncooperative stance. So, Chair Ikeda made an authorized decision that physicians shall have the same educational training as acupuncturists and must obtain an acupuncture license to perform acupuncture.



Our State of Hawaii is the only state where a physician must take the same educational program and acupuncture practice training under the State Board of Acupuncture authority. The California Acupuncture Association contacted us to inquire how Hawaii Acupuncturists overcame physicians' demands and defeated the physician's bill. The legislature clerk opined that insurance companies and physicians' testimonies were always accepted in the Hawaii legislature's history.

### **Initiation of the Doctoral Title for Acupuncture in Hawaii**

In **1988**, a state legislator received a public complaint that the acupuncturist used various doctoral titles. Those titles are such as **OMD** (Oriental Medical Doctor), **DOM** (Doctor of Oriental Medicine), **DCM** (Doctor of Chinese Medicine), and **Ph.D.** (Doctor of Philosophy), without clarification of the standards, which confuses the public. Hawaii State's officially recognized title was only the **L.Ac.** (Licensed Acupuncturist) at that time.

The legislative request that the Board of Acupuncture clarify the doctoral title's educational standard set the criteria. After notice from the state legislature, the State Board set the "Advanced Degree & Approval School" committee to initiate a preliminary study of doctoral program requirements started on **4/12/1990**. The Board added the "Ad-Hoc Doctoral Standard" committee formed on **1/13/1994** for further research. It took nine years for the Board to affirm the postgraduate program and course requirements. The doctoral criterion, suggestive syllabus, and the Council of Acupuncture & Oriental Medicine (CCAOM) required school library collections, acupuncture information resources, and a list of indicative references. The Committee reviewed academic and clinical education reports for hours.

**In 1997, the Hawaii Board of Acupuncture notified the ACAOM about the “Doctor of Acupuncture program” as a reference to consider starting an advanced professional degree “D.Ac.” program for acupuncturists for national acknowledgment. Still, ACAOM was not ready to set up a doctoral standard then. The Board also sent a reference to several acupuncture colleges for feedback. Still, there is no reply from the acupuncture school due to its inconsistency in each state's acupuncture laws and regulations. Therefore, the ACAOM introduced the first “DAOM” (Doctor of Acupuncture and Oriental Medicine) title in 2002, established four years after the Hawaii Board suggested establishing a doctoral program. However, since the State Board is not an accrediting body for an advanced degree, acquiring a “doctoral” is not mandatory for obtaining an acupuncture license. The Board’s consensus was that a degree standard should automatically shift to ACAOM's doctoral program after the standard set by the ACAOM. Therefore, Hawaii was the first state to initiate a doctor of acupuncture program for qualified licensures by the Board of Acupuncture.**

## **The Advanced Degree and Doctoral Standards Review Committee**

Under the auspices of the Hawaii State Board of Acupuncture (12/18/1988 through 4/12/1990)

### **Participants:**

Malik W. Cotter, L.Ac.	: Chairperson, Hawaii State Board of Acupuncture
*Eugene Monasch, L.Ac.:	: President, Hawaii Acupuncture Association
*Henry Chan	: Public member, Hawaii State Board of Acupuncture
Eugene Pong, M.D., MPH	: Chief of Epidemiology Branch, Hawaii State Department of Health
Everett Kleinjans, Ph.D.	: Chief Director, East-West Center for Advanced Studies of the UH
Mike Hashimoto, L.Ac, Ph.D.	: Continuing Education Committee, Hawaii Acupuncture Association
June Kamioka	: Executive Officer, Board of Acupuncture / Department of Commerce & Consumer Affairs, State of Hawaii

## **Doctoral Standards Ad-Hoc Committee**

(7/13/1994 through 1997)

### **Participants:**

Mike Hashimoto, L.Ac., Ph.D.	: Chairperson, Hawaii State Board of Acupuncture
Peggy Oshiro, L.Ac.	: Vice-Chairperson, Hawaii State Board of Acupuncture
Michael Howden, L.Ac.	: Professional member, Hawaii State Board of Acupuncture
Ira D. Zunin, M.D., MPH	: Public member, Hawaii State Board of Acupuncture
Melvin S.H. Fong	: Public member, Hawaii State Board of Acupuncture
Cheryl Nakamura, Esq.	: Public member, Hawaii State Board of Acupuncture
Charlene K. Tamanaha	: Executive Officer, Board of Acupuncture / Department of Commerce & Consumer Affairs, State of Hawaii

## **Reference Materials reviewed by the Committee**

1. Chengdu College of Traditional Chinese Medicine: Sichuan, People's Republic of China
2. International Acupuncture Training Center of Beijing Medical Center: Course Catalog, PRC
3. Standard of Acupuncture Education of Japan: Education Ministry, Tokyo, Japan
4. Kyung Hee University: Doctoral Program in Oriental Medicine, Seoul, Korea
5. Meiji University of Oriental Medicine: Doctoral Course Catalog, Kyoto, Japan
6. Guangzhou College of Traditional Chinese Medicine: Doctoral Program, PRC
7. Nanjing College of Traditional Chinese Medicine: Doctoral Course information, PRC
8. International Institute of Chinese Medicine: School catalog, Santa Fe, New Mexico
9. Acupuncture College of Australia: Course catalog, Sydney, Australia
10. Northern College of Acupuncture: School catalog, York, England
11. Yin-Yang College of Acupuncture: Course catalog
12. Northwest Institute of Acupuncture & OM: Advanced course catalog, Seattle, Washington
13. American College of Traditional Chinese Medicine: Course catalog, San Francisco, California
14. Florida Institute of TCM: Course catalog, St. Petersburg, Florida
15. Mandarin School of Chinese Medicine: Course catalog, Jacksonville, Florida
16. South Baylo University: Course catalog, Garden Grove, California
17. The New England School of Acupuncture: Course catalog, Watertown, Massachusetts
18. State Acupuncture Law: (1994 and 1997 Edition), National Acupuncture Foundation

## **Doctoral Program set by the State of Hawaii Board of Acupuncture**

**Requirements:** completing a master's course at an acupuncture college and obtaining a license to practice in Hawaii. An applicant who earned a doctoral degree in the respective country satisfied the requirement set by the Board of Acupuncture requested by the state legislature. Accordingly, the legislature has notified and acknowledged the Board's doctoral program. **The Hawaii State Board forwarded the program to the ACAOM to adopt and titled "D.Ac." as a recommended national reference in 1997.**

In **2000**, the Doctoral Review Committee approved forty-two applicants to use the "D.Ac." title upon documentation review. The committee approved twenty-three, including five Ph.D. titles and nineteen unqualified applicants, not to use the doctor of acupuncture "D.Ac." designation. An applicant who holds an approved "Ph.D." as a research degree is required to attach "L.Ac." or "D.Ac." to their name and specify the research field.

### **The Hawaii Board's doctoral program in acupuncture (April 6, 1997)**

#### **Category I: Oriental Medical Sciences**

**A. ORIENTAL MEDICAL PHILOSOPHY AND CHRONOLOGICAL STUDIES**

Study traditional philosophical literature and cultural perspectives towards Oriental medicine, including classical history related to acupuncture and Oriental medicine development.

**B. ADVANCED DIAGNOSIS AND SYMPTOMATOLOGY**

Study of diagnosis techniques, including correlation of necessary data and statistical analysis to evaluate outcomes. Further study of organ systems and specific acupuncture procedures to develop accurate diagnostic skills, including comparing classical and Modern techniques.

**C. ADVANCED MERIDIAN (Channels & Collaterals) SYSTEMS**

Study and research how the human body's systems integrate with the acupuncture meridian system's internal and divergent pathways.

**D. ADVANCED POINT LOCATION AND FUNCTION**

Study the scientific analysis of acupuncture points based on morphological responses, including classical and modern acupuncture point determination methods, and a further study the new acupuncture points and scientific review of contraindications.

**E. ADVANCED HERBOLOGY**

Study of composition and pharmacological analysis of traditional oriental herbal formulas. Further research reviews new herbal formulas and pharmacopeia based on traditional oriental medicine.

**F. TRADITIONAL PATHOLOGY AND ETIOLOGY**

Advanced studies of traditional oriental and Western aspects of pathology and etiology. Analysis of the morphological structure of “Zhang-Fu” and the influence of external, internal, and non-external/non-internal factors and patho-etiological relation with the traditional bio-clock mechanism. Study the systemic biological function of the filtration of body fluids by acupuncture application. Review the effects of acupuncture on pathological progress, transformations, and molecular metabolism of the organs.

**Category II: Acupuncture Sciences Applied in General Medicine**

**A. IMMUNOLOGY**

Study the modulation of the body’s immune-biological mechanisms and dynamic physiological substance changes with acupuncture and oriental medicine application on anaphylaxis and auto-immune disorders.

**B. GYNECOLOGY AND UROLOGY**

Study of acupuncture and oriental medicine applied to gynecology, obstetric problems, and female endocrine systems. Study kidney and genitourinary systems to define clinical implications with acupuncture and oriental medicine applications.

**C. NEUROLOGY**

Study of neurological effects on endogenous and vasomotor control with acupuncture application. The neuroanatomy and histological analysis of the central and peripheral nervous system with acupuncture applications.

**D. ORTHOPEDICS**

Study of the origin of acupuncture’s effect on orthopedic conditions. Study of osteology and analysis of x-rays.

**E. GERIATRICS / REHABILITATION / CHRONIC DISEASE**

Study of acupuncture and oriental medical aspect applications to aging-related conditions. A review may extend to rehabilitation, chronic disease, and pain management.

**F. PEDIATRICS**

Review of infant and perinatological care child-related diseases and clinical application of acupuncture and oriental medicine treatment may include pediatric acupuncture therapy.

***The selected subjects combined the above category from I and II; a minimum of five hundred hours of onsite study proof is required.***



### **Category III: Related Advanced Clinical Acupuncture and Oriental Medicine**

Clinical acupuncture and traditional physiotherapy. Clinical credit may include laboratory work and presentation of academic instruction. The submission of a thesis on acupuncture and at least fifteen hundred clinical practice hours must be obtained in acupuncture and herbal medicine.

### **The Problematic Issue of Various Doctoral Titles in Acupuncture**

In **2002**, ACAOM finally enacted its advanced degree program in acupuncture and Oriental medicine. Unfortunately, the current situation becomes confusing to the public and practitioners themselves. Each acupuncture college created its doctoral titles under the umbrella of ACAOM accreditation. Those are **DAOM** (Doctor of Acupuncture and Oriental Medicine), **DACM** (Doctor of Acupuncture and Chinese Medicine), **DAIH** (Doctor of Acupuncture and Integrative Health), **DAC** (Doctor of Acupuncture), **DAC** (Doctor of Acupuncture), **DSOM** (Doctor of Science of Oriental Medicine), **D-TCM** (Doctor of Traditional Chinese Medicine), **DTCM** (Doctor of Traditional Chinese Medicine), **DAIM** (Doctor of Acupuncture and Integrative Medicine).

The ACAOM is considering combining a master/doctoral program as a graduate title for acupuncture College. The priority is to establish consistent acupuncture doctorate titles that are nationally recognized. Nine different doctoral titles are overwhelming and need to be overlooked. Other technical issues include Oriental Medicine, Eastern Medicine, Asian Medicine, East Asian Medicine, Chinese Medicine, etc. **The federal department tends to avoid "ORIENTAL" or "CHINESE" words as discriminatory.**

### **BRIEF OUTLINE OF DEVELOPMENT ON DOCTORAL TITLE MATTER** **THE STATE OF HAWAII BOARD OF ACUPUNCTURE**

**October 7, 2004**

**To: The new members of the State Board of Acupuncture**

**RE: Brief Outline and Development of Doctoral Title  
Standards by the State Board of Acupuncture**

**In 1988, the State of Hawaii Legislature mandated that the Board of Acupuncture set up a standard program for using the doctoral title or other titles. Numerous titles publicized by acupuncture practitioners, such as OMD., DOM., DCM., Ph.D., DA., CA., Dipl.Ac., and Dipl.C.H., confuse the public.**

To avoid the public's confusion, restrict acupuncture practitioners from advertising doctoral titles, and clarify the standards for title usage mandated and requested by the legislature at that time. In response, the Board established a **"Doctoral Standard Task Committee"** to develop academic standards required to approve doctoral titles and set up an advisory council among medical, literary, and legal experts.

The committee began meeting regularly and spent long hours establishing criteria in September 1988 to set standards, requirements, and curricula and reviewed and studied rules nationally and internationally. Specifically, the committee obtained information about the standards for strict doctoral titles in Acupuncture and Herbal Medicine and the procedures for accepting and validating schools, Colleges, and Universities.

The State Board of Acupuncture sent a confirmed doctoral program to the ACAOM in 1997 for consideration as their reference. The Board expected ACAOM to study further to provide an accredited doctoral program and recommend using the title **"D.Ac."** for a doctor of acupuncture to be a universal acknowledgment since Chinese herbal medicine is already under the scope of acupuncture practice in Hawaii. The Board speculates that ACAOM would develop doctoral standards for professional degree titles.

**The Hawaii Board of Acupuncture waited until 2,000, the promised answer by the ACAOM to set up doctoral accreditation standards. The Board learned that ACAOM is still being prepared to proceed with an advanced doctoral program.**

**A priority was necessary to clear the title matter and status to protect the public from title fraud and mispresent by qualified acupuncture practitioners.**

**Until 2002, no accrediting body was recognized by the U.S. Department of Education to accredit schools that award doctoral degrees in acupuncture or Oriental (Herbal) medicine.**

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<sup>1</sup> ACAOM was formerly the National Accreditation Commission for Schools and Colleges of Acupuncture and Oriental Medicine (NASCAOM, 1982).

The acupuncture board standardizes the titles given to qualified acupuncture practitioners to reply to the Hawaii legislature's mandatory request. They have already obtained degrees and titles in other states and countries. In the process, the Board's "Doctoral Standards for Ad Hoc Committee" continuously studied and investigated the further determination of the contents of the doctoral standards, which took nine years.

After the Hawaii State Board finalized the program in 1997, the Board submitted the doctoral standards materials to acupuncture schools throughout the nation, requiring 2,000 hours of didactic and clinical after the masters and L.Ac.; there needs to be feedback, opinion, or reply from schools due to inconsistencies among statutes and rules of each State.

**There could be the worst scenario of being disdained for fatuous reasons; the Hawaii legislature could have repealed the Board of Acupuncture because of dysfunction and noncompliance with the state legislature.** The Board must evaluate to approve the practitioners who claim their doctoral title based on the Board's required credible education and training. Those individuals who claim the doctoral title were assessed by the "Doctoral Title Review Committee" under the auspices of the Board in September 2000.

However, the Hawaii Board's initiation of the Doctor of Acupuncture designation, prefix "**D.Ac.**" program, has been successfully accepted since 2000. There have been no complaints or incompetence by approved D.Ac., titled practitioners, and various titles have cleared out from the eyes of the public in general.

**The ACAOM finally developed doctoral standards in 2002**, thus allowing four schools to offer postgraduate degrees (DAOM), as listed below. Unfortunately, one school, however, discontinued the program.

The ACAOM's initial accredited doctoral program (DAOM) requires 1,200 hours after a master's level.

The year **2002**:

1. Oregon College of Oriental Medicine
2. Bastyr University (Washington)

The year **2004**:

Emperor's College (Santa Monica, California)

## **PROPOSITION**

The Sunset Evaluation by the legislative auditor in 1987 recommended adopting all schools to be accredited and doctoral standards since the Board of Acupuncture shall not act as an educational accrediting body.

Since ACAOM, the accreditation agency, established the standards for the doctoral criteria in 2002, I recommend amending the statute and rules to adopt ACAOM's progress. Therefore, the Board's stance shall be:

1. Ensure that pursuing **the doctoral title is optional to become a licensed acupuncturist.**
2. **The current Board developed that the doctoral program was transitional until set by the ACAOM's doctoral standard. It may be challenging to pursue the Board's required doctoral program in the current school capacity. The Board encouraged acupuncture colleges to adopt this measure; therefore, I strongly recommend choosing an accredited doctoral standard when they are ready.**

**The Board's mission is also to consider and comply with the recommendation of the State legislative auditor.**

Thank you for your cooperation and understanding.

Mike M. Hashimoto, D.Ac., Ph.D.

Chairperson, State of Hawaii Board of Acupuncture



**POSTGRADUATE 9 DOCTORAL TITLES in the USA (as of 2019)**  
**May Create Public Confusion**

**DAOM = Doctor of Acupuncture and Oriental Medicine:**

American College of Traditional Chinese Medicine (San Francisco, California)  
University of East-West Medicine (Sunnyvale, California)  
Emperor's College (Santa Monica, California)  
California Institute of Integral Studies (San Francisco, California)  
Yo San University (Los Angeles, California)  
American College of Traditional Chinese Medicine (San Francisco, California)  
Academy of Chinese Culture & Health Sciences (Oakland, California)  
Five Branches University (San Jose, California)  
Oregon College of Oriental Medicine (Portland, Oregon)  
Texas Health & Science University (Austin, Texas)  
Atlantic Institute of Oriental Medicine (Fort Lauderdale, Florida)  
Bastyr University (Kenmore, Washington / San Diego, California (Seattle, Washington)  
Virginia University of Oriental Medicine/Virginia University of Integrative Medicine  
(Fairfax, Virginia)

**DAC = Doctor of Acupuncture:**

Maryland University of Integrative Health (Laurel, Maryland)

**DAc = Doctor of Acupuncture:**

**State of Hawaii's Board approved doctoral program (1997-2000)**

**Proof of Selective an advanced academic minimum of 500 Hours of study and a minimum of 1,500 hours of Clinical training and practical hours with a final exam and dissertation at an accredited college.**

Pacific College of Oriental Medicine (San Diego / Chicago)

**DACM = Doctor of Acupuncture and Chinese Medicine:**

South California University of Health Sciences (Whittier, California)  
Pacific College of Oriental Medicine (San Diego, California / Chicago, Illinois)

**DSOM = Doctor of Science of Oriental Medicine:**

National University of Nature Medicine (Portland, Oregon)

**DAIH = Doctor of Acupuncture and Integrated Health:**

New England School of Acupuncture (Boston, Massachusetts)

**D-TCM = Doctor of Traditional Chinese Medicine:**

University of Bridgeport Acupuncture Institute (Bridgeport, Connecticut)

**DTCM = Doctor of Traditional Chinese Medicine:**

Pacific RIM College (British Columbia, Canada)

**DAIM = Doctor of Acupuncture and Integrative Medicine:**

Acupuncture & Integrative Medicine College (Berkeley, California)

Forwarded by: M. Hashimoto

## **Overview of the NCCAOM**

The NCCAOM (National Certification Commission for Acupuncture & Oriental Medicine, 1997) started as the NCCA (National Certification of Acupuncture) in 1982. Their first plan was to govern acupuncture practice nationwide instead of state licensing. NCCA failed the aspiration since each state has different laws, clinical definitions, and difficulties endorsed by the Federal Education Department. Then pro and the idea of continuing education requirements to survive technically as a continuing education broker.

**Unfortunately, their "Diplomate" or "Dipl." Status does not mean anything. The idea was to start with "D" to resemble the designation "Doctor," which attracts acupuncturists when the accreditation body did not set the doctoral standard the ACAOM (Accreditation Commission for Acupuncture and Oriental Medicine) until 2002.**

One of my patients visited an acupuncturist who displayed the "NCCAOM" certificate on the wall. The patient asked the meaning of "Diplomate," and then the acupuncturist replied, "It is just like a doctoral." These answers by a practitioner may confuse the public and act of fraud.

Obtaining NCCAOM's diplomate status requires 60 hours of continuing education every four years to keep NCCAOM's business income.

The NCCAOM's educational requirements include an apprenticeship route, which is unacceptable in Hawaii. NCCAOM announced to discontinue by 2023 to avoid scrutiny for legitimacy but remains with a combined "Tutorship/Regular" education route to accommodate other healthcare providers such as Naturopathic, Chiropractor that the Hawaii Board of Acupuncture and DCCA concerned and has denied NCCAOM as an educational standard.

### **UNACCEPTABLE APPRENTICESHIP ROUTE BY NCCAOM**

The NCCAOM defined the Apprenticeship Route as ongoing work with a tutor or preceptor who assumes responsibility for the apprentice's theoretical and practical education and training. A maximum of two apprentices may study under a single preceptor at any time.

Applicants under this route of eligibility must submit evidence demonstrating that the following requirements have been satisfied:

- They are completing an apprenticeship program with at least 4,000 contact hours in no less than three years and no more than six years. "Contact hours" are defined as the clock hours that the apprentice spends under the direct supervision of the preceptor and do not include off-site supervision.
- After the first year, your apprenticeship program includes increasing patient contact responsibilities and the final stage of complete diagnosis and treatment under the preceptor's supervision. Your preceptor's practice was at a minimum level of five hundred acupuncture patient visits by at least one hundred different patients each year of the apprenticeship program. Patient visits were in general health care practice. Specialized limited training, such as smoking withdrawal, alcoholism, etc., may have been included in the course but must be counted as outside the five hundred general health acupuncture patient visits per year.
- Your apprenticeship program was under the direction of a qualified preceptor.  
A preceptor is qualified when at least one of the following documents:
  1. State approval as an instructor or preceptor in acupuncture; or
  2. Practice at a minimum of five hundred acupuncture patient visits by at least one hundred different patients for five consecutive years before becoming your preceptor.

**Tutorials and apprenticeships are not acceptable by Hawaii's standards, and tutorship measures go against the times.**

**The NCCAOM, a profit-seeking private sector and Continuing Education broker should not intervene in Hawaii's education of state-licensed Acupuncture professionals. In 2019-2020, NCCAOM offered a "Limited Time Route for Certification" bargained away examination requested by California acupuncturists.**

**The Hawaii State Board of Acupuncture hired and contracted NCCAOM as a licensing test agent for the acupuncture examination only for a practical reason, nothing above.**

**The ACAOM (Accreditation Commission for Acupuncture and OM) is the only national standard agency for acupuncture education recognized by the US Department of Education, not NCCAOM.**

**I have supported NCCAOM from 1986 through 2007; I discontinued obtaining certification because they do not delete Tutorship measures in their education requirement.**

## The Research and Educational Activities

In 2001, the Hawaii Acupuncture Association requested medical University professors in China to hold the "International Cancer Treatment Symposium." However, the Chinese Government restricted scholars from leaving China at that time. So, we request the State senators to provide an official invitation letter to the Chinese Government to request these doctors' presence at Symposium in Hawaii. Simultaneously, the Academy of Integrated Medicine Hawaii (AIMH) was established as an independent educational league helping HAA prepare to hold the symposium and was founded by Peggy Oshiro, D.Ac., Lyna Morimoto, D.Ac., Pon Sang Chan, M.D., and Mike M. Hashimoto, D.Ac., Ph.D., to assist the Symposium at Ala Moana Hotel. The Hawaii State Department of Business, Economic Development & Tourism (DBET) also funded and co-sponsored it. It took numerous meetings to set up the Symposium with the cooperation of HAA members and acupuncture students. In 2002, the **"International Symposium on Integrated Treatment of Cancer"** symposium successfully launched for two days (June 29, 30) with over three hundred participants from Japan, China, and the US mainland. There were presenters from China, Japan, and the US mainland.



Participants were over three hundred from mainland, China, and Japan



A panel discussion exchanged productive opinions and information of acupuncture, herbal medicine, and a Western medical point of view.



Clinical demonstration by Mike Hashimoto





Senate Proclamation was presented by \*Senator Rod Tam with Dr. Peggy Oshiro, and Dr. & Mrs. Pon-Sang Chan. Jeremy Harris, \*Dr. Seiji Naya, Director of DBEDT, and Senator \*Rod Tam.



Congratulatory address by City Councilmember Ann Kobayashi and Congratulatory letter forwarded by the Governor Ben Cayetano, Honolulu Mayor Jeremy Harris.

### At the Symposium







Information in Chinese and English provided to participants, the guidebook of the “International Symposium on Integrated Treatment of Cancer” 2002.



The symposium Chair Peggy Oshiro and Symposium staff meeting to review outcome and HAA investigate further opportunity to hold the Symposium.

## Honolulu International Seminar for Acupuncture Science Students

Upon requests by acupuncture colleges in Japan, the "**Academy of Integrated Medicine Hawaii**" at **aimh808.com** started an annual seminar for the following acupuncture college students from Japan in **2014**:

1. The Shonan (湘南) Medical Welfare and Acupuncture School (Yokohama, Japan)
2. The Morinomiya (森ノ宮) Medical University & College of Acupuncture (Osaka, Japan)
3. The Tokai (東海) School of Acupuncture Science (Atami-City, Shizuoka, Japan)
4. The Fukuoka (福岡) College of Acupuncture Medicine (Fukuoka-City, Kyusyu, Japan)

These annual clinical seminars by the AIMH academic members are held in Honolulu to give a clinical and lecture program. Hawaii can function as a bridge that connects the U.S. and Japan. We would like to see those acupuncture students from Japan expand global concepts and future acupuncture development.



"Recurrent nerve palsy" by Peggy Oshiro, D.Ac.



Royal Garden at Ala Moana Hotel 2014



"Clinical Acupuncture Diagnosis"  
by Cimon Kamei, D.Ac.



Completion of three days seminar "Shaka!" 2015





"Practical LomiLomi" by Sakiko Kobayashi, L.Ac.,LMT



*Feels like Hawaiian already!*



Clinical session by students.



Completion dinner at Willows! 2016



"Applied Kinesiology" clinical workshop by Wendy Ratigan, D.Ac.



Lecture on infertility & acupuncture by Kaori Bailey, L.Ac., LMT





"Fascia Release Procedure" by  
Mike Hashimoto, D.Ac.



"HARA Diagnosis" by Sakiko Kobayashi, L.Ac., LMT



"Treatment of Sciatica" by Tomiko Rich, L.Ac., LMT



"Acu-Color therapy" by Koji Kajiawara, L.Ac., LMT 2017



"Practical Flash Cupping" by Mike Hashimoto,  
D.Ac.



"Adhesive capsulitis" treatment by  
Mike Hashimoto, D.Ac. 2017





“Scalp Acupressure for Serotonin uptake” by Mike Hashimoto, D.Ac.



“Treatment for C-spine stenosis and myospasm” clinical workshop by Mike Hashimoto, D.Ac.

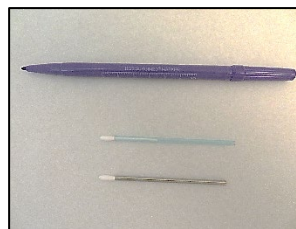


“Scalp acupuncture” by Wai Hoa Low, D.Ac., DAOM 2018

**Another participating presenter was Dr. Yasuko Akiyama-Bevette, L.Ac., Psy.D.**  
**“Correction of autonomic nerve function”**  
**2016,**  
**and**  
**Yasuto Temba, L.Ac.**  
**“Principle of the Oriental Medicine”**  
**2014**

### CLINICAL HINTS

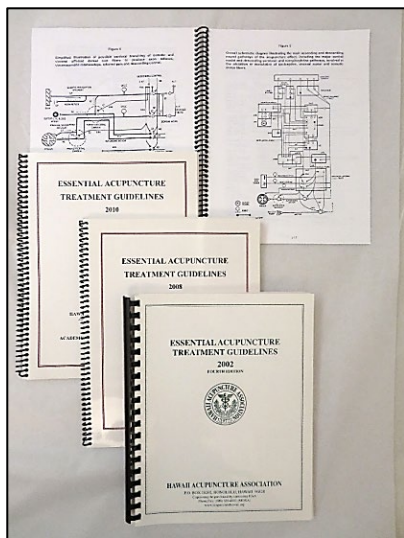
It is essential to use Gentian Violet (hexamethyl pararosaniline, GV) with cotton Q-Tips to mark the acupuncture points which disposable. GV is antiseptic and prevents infection as a surgical pen to mark the incision site, which must be only one-time use. GV marks are easy to clean off with alcohol swabs. If the patient is allergic to alcohol swabs, provide Zephiran (Benzalkonium chloride 0.13%) or another germicidal solution to wipe off GV. It is a much safer practice than marking with regular pens and ink. Refrain from using an oil-based permanent marker or ballpoint pen to mark on the skin.



Comparison of the size of a surgical pen, one-time usage, and disposable cotton Q-Tips marker.

## The Facts of Insurance Coverage

The insurance coverage for the No-Fault and Workers' Compensation fee schedule was set and acted in the 2001 legislature. The Hawaii Acupuncture Association staff assembled and published the "Acupuncture Guidelines" in 2002. The insurance claims and reports are covered in the manual.



### **“Essential Acupuncture Treatment Guidelines”**

First Edition in 2002 by the HAA

The 169 pages contain the indication of acupuncture, Explanation of insurance claim process and guidance, Clinical diagnosis, Calibrate treatment length, Electro treatment, List of insurance companies and others. The revision process in 5 to 7 years periods.

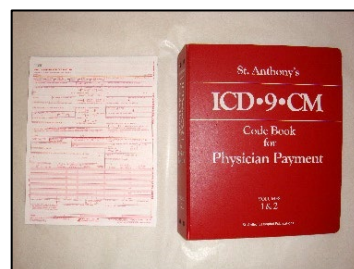
Compiled and edited by Lyna Morimoto, D.Ac. and Joni D. Kroll, D.Ac.

In 2017, AcuPlan Hawaii (Joni Kroll, D.Ac., Co-Founder) and the Hawaii Acupuncture Association succeeded in increasing the current fee schedule and process through the legislature to increase the fee schedule to \$158.00 instead of \$75.00, effective January 1, 2018. Unfortunately, the insurance industry has found ways to freeze the old fees by paying only 30 minutes instead of an hour. The controversy over the fee schedule and visit codes is still under discussion.

Mason's Trust Fund, International Brotherhood of Electrical Workers (IBEW), may cover 70-80% of fees with a co-pay with the labor Union's coverage. Although the diagnosis codes from an ICD-9 and revised a code number in October 2016, the ICD-10 coding revision of ICD-11 is under process.

**ICD**=International Classification of Diseases

**CMS 1500 form**: Center for Medicare Service



However, Universal Insurance Coverage was initiated by Congress in the sixties. Senator. Daniel K. Inoue was brought back to Hawaii for the decision on participation. Still, Hawaii residents rejected this offer because of fear of high-cost premiums; therefore, Hawaii has excluded universal insurance coverage.

## **Immoderate Acupuncture Bill submitted to the State Legislature.**

In **1984**, a bill was introduced to the legislature in which acupuncture practice would shift to be overseen by the Board of Medical Examiners instead of Acupuncture. Unfortunately, we realized such a proposal was in the process and swiftly passed through both Senate and House. A bill was ready to be signed by the Governor. Immediately, four HAA delegates met with Governor Ariyoshi and asked him to veto this bill. **After discussion, the Governor agreed to veto the bill. HAA introduced a new acupuncture bill and succeeded in 1985 as 436E-HRS. Therefore, 436D-HRS was suspended for one year. We must remain vigilant and committed to ensuring our profession's integrity and the sacrifices made by those who came before us and led the acupuncture profession for us.**

In **2003**, physicians introduced a bill containing "**Medical Acupuncture**," which they put under their practice scope. Their goal was to secure acupuncture practice under their jurisdiction. The State Department of Commerce and Consumer Affairs (DCCA) requested a formal opinion from the Attorney General's office. **Attorney General Mark J. Bennett replied on 8/18/2003 that "Medical acupuncture" is not sufficiently distinct from "traditional acupuncture." To fall outside the scope of the practice of acupuncture and those physicians licensed by the Board of Medical Examiner (BME) cannot practice medical acupuncture without a license by the Board of Acupuncture (BOA)".**

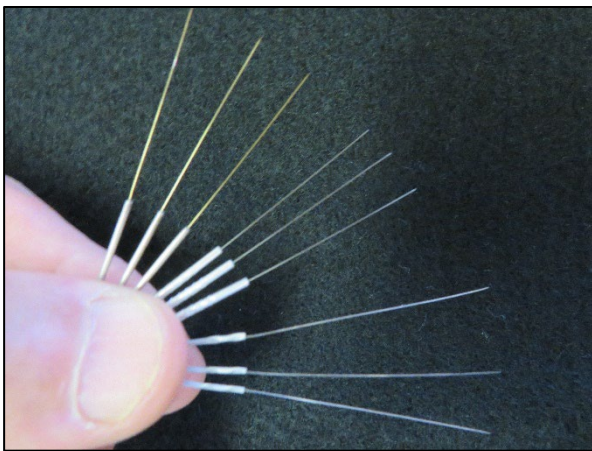
In **2011**, a group called the "National Acupuncture Detoxification Association" (NADA) introduced a bill to the Hawaii legislature to legalize the "NADA protocol detox procedure" using five auricular points (Shen-men, Liver, Lung, Kidney, and Sympathetic) to detoxify the body of drug dependency. Dr. Michel Smith originated the private organization NADA in the State of Wyoming. Initially, it was a sensational pilot program for alcohol and drug-addicted persons in New York for a while, but it was downgraded because of its unproven effectiveness. A NADAs' Bill indicated that physicians, osteopathic physicians, chiropractors, naturopathic physicians, nurses, and acupuncture practitioners should supervise a person. A person who completed seventy hours of certification acupuncture training can practice without a license. **The NADA's protocol bill did not pass Hawaii's Legislature.**

In **2019**, Hawaii Physical Therapist Association submitted a bill to the legislature to include "Dry needling" in their scope of practice despite the consensus of the Board of Physical Therapists of Hawaii that "dry needling" is prohibited since it is an invasion technique. However, fourteen cases of Pneumothorax injury included two instances by a Chiropractor throughout ten States, allowing a dry needling procedure other than a licensed acupuncturist. After massive opposition testimony by the State Board, acupuncture practitioners, acupuncture schools, students, and patients, a committee held a bill. Dry needling again in the 2020 legislature, but due to the COVID-19 situation, the bill died in the committee. We realized acupuncture is an attractive addition to other healthcare professionals' insurance parity. Unless Hawaii's acupuncture professional remains vigilant, dry needling measures may arise again, and acupuncture may remain, but acupuncturists may perish. Dry needling was a mimic name for acupuncture, which claims "Trigger Point Therapy" advocated



by \*Janet Travell, M.D. (1901-1997) and \*David G. Simons, M.D. (1922-2010) cooperate with Lois S. Simons, P.T. They published the "Trigger Point Manual -Fibromyalgia & Chronic Myofascial Pain Syndrome-." Recently, dry-needling advocates claimed that the needle they use is not an acupuncture needle but a "Filament." They did not know a "filament acupuncture needle" used in traditional acupuncture called the "Mist needle" used for facial and ophthalmic treatment.

According to the statement of Dr. Travell's team, "a filament applied to a trigger point eases the pain, which is unrelated to Eastern medicine theory, and it is the logic that it is not acupuncture." Their false claims of "trigger point," "target point," or "motor point" itself are the category of traditional "Ashi-point" of Acupuncture medicine. The so-called "Chiropractic Acupuncture" is in thirty-four states and set up the Council of Chiropractic Acupuncture & American Board of Chiropractic Acupuncture as a political venue and insurance parity.



As shown in the photo, "Mist needle" (0.10mm) on the bottom, are used for facial and pediatric care made by Silver, Stainless, and Cobalt. A "Gold needle" is ten karats coating on silver needles gauge #1, 0.16mm on the top used for facial. The "Mist needle" is so subtle and hardly seen compared to the gauge #1 gold needles. "Mist needles" Other needles are Hair needle in a middle for pediatric and facial treatment (0.12mm).

### **About the American Academy of Medical Acupuncture (AAMA)**

The American Academy of Medical Acupuncture originated on the mainland in **1987**. This group claims to consist of 474 physician members who included acupuncture in their medical practice. They also created the ABMA (American Board of Medical Acupuncture) on 4/26/2000. The AAMA was influential when politically pursuing physicians' right to practice acupuncture. They claim that physicians are more than capable of practicing acupuncture with 220 hours of videotape training. There are currently forty-seven states where acupuncture is legalized nationwide, except Alabama, South Dakota, and Oklahoma.

**I appreciate that physicians took an interest in the practice of acupuncture medicine. Given the integration, we should respect each other's stance and understanding of Traditional medicine's philosophy and the modern science of Western medicine. We should acknowledge the concepts of Western medicine as "To prolongation of the life" and "The medicine of knowledge" and Oriental medicine as "To keep a quality of life" and "The medicine of wisdom." To be valid, our friend Cyrus Loo, M.D., commented that the coin has an engraving pattern on both sides to be valid. We shouldn't be arrogant when talk about medicine.**

## **Distinct Acupuncture Definition and Scope in 25 States**

**There needs to be more clarity in acupuncture-related definitions among each state, including clinical terms and technical words. Hopefully, those unequal concepts do not jeopardize the future development of the US's acupuncture profession.**

**1. Electromagnetic**

1. Washington 2. Oregon 3. Alaska 4. Arizona 5. Utah  
6. Idaho 7. Colorado 8. New Jersey 9. North Carolina

**2. Prophylactic effect**

1. New York 2. Connecticut 3. Louisiana

**3. Thermography**

1. Florida 2. Massachusetts

**4. Induce anesthesia**

1. Oregon 2. Louisiana

**5. Breathing techniques**

1. California 2. Minnesota 3. New Mexico

**Note:** Referring to the Chi-Kun exercise or abdominal breathing.

**6. Energy flow exercise**

1. Texas 2. California: Specified as "Oriental massage." 3. Florida  
4. Minnesota 5. Pennsylvania 6. Tennessee

**7. Therapeutic exercise**

1. Idaho

**Note:** Therapeutic exercise may refer to Tai-Chi Chuan or Qigong movement.

## 8. Homeopathic

1. Arkansas

**Note:** In Hawaii, consider Homeopathic is in the category of Naturopathic medicine.

## 9. Laser acupuncture

1. Massachusetts
2. Washington (described as “Laser puncture”)
3. Arkansas (described as “Laser therapy”)
4. New Jersey (described as “Laser bio-stimulation”)
5. Pennsylvania (described as a “Low-level laser”)

**Note:** In Hawaii, there is no description of "Laser-acupuncture," but the Board of Acupuncture accepts it as a type of electrotherapy. It is recommendable to include it within the scope of acupuncture.



### LASER APPARATUS

The left photo is a laser apparatus (Uni-Laser) made in Denmark with a diode medium. The laser output is 0.5mW to 10mW, with 5 seconds to 40 seconds continuous or pulse application. Operate with four C1.5-volt battery with beam protection eyeglass attached. Indications are joints inflammation include Rheumatoid arthritis and abrasion of stomatitis who are yin deficiency type of constitution.

Further treatment for the musculoskeletal problems may require 50mW or more output. Probe's life is about 200 hours of usage.



January 9, 2003

*Laser Acupuncture Review reported with a study group of the AIMH to research electromagnetic applications on human ailments through acupuncture points.*

Laser therapy has been recognized worldwide as one of the most promising therapy modes. Only a few acupuncturists have taken advantage of this modality. Remarkable results have been reported in treating pain, inflammatory conditions, neurogenic disorders, wound healing, burns, ulcers, tendons, and bones. Consequently, most acupuncturists are reluctant to accept this benefit to the patient modality developed Ruby Laser by Dr. Theodore Maiman in the United States in 1960. "Laser" is an abbreviation of **L**ight **A**mplification by **S**imulated **E**mission of **R**adiation. The instrument converts various light frequencies and the highly intense unified beam of one wavelength electromagnetic radiation. A laser generator emits "photons" of the same wavelength,  $1\mu\text{m}=1/1000\text{mm}$  unit, with a speed of 300,000 Km per second (7.5 times goes around earth per second). The primary characteristics of the light are as follows:

- Stable wavelength and monochromaticity refer to the specific single wavelength of light. Light from any source consists of similar Electromagnetic waves of different lengths. Different wavelengths emit distinct colors, and the oscillations produced will create varied physiological responses.
- Coherence and divergence refer to the beam's high degree of consistency, condensation, and small focal point.

Bio-stimulating laser acupuncture therapy using various frequencies and wavelengths promotes positive physiological changes within cells that support the living organism in healing and reducing or eliminating pain. The physiological effects of laser acupuncture depend upon wavelength, exposure time, power output, and irradiated acupuncture points.

The light on a tissue will cause absorption and dispersion to the light with variability depending upon the composition of that tissue and acupuncture point usage. Thus, the physiological effects will vary along with the longevity of the results. The two most used non-surgical for acupuncture practice are so-called "cold-laser" or "soft-laser," which emit red light (632-650nm) by electric discharge generated by a helium-neon (He-Ne) gas tube. The depth of penetration is 0.8mm to 15mm. Another type of laser emits Infrared light (902nm), which is invisible and generated by a gallium-arsenic diode. The light may not be absorbed by skin pigment cells (chromophores) and therefore penetrates deeper (10mm-5cm) or gallium and arsenic (Ga-As) diode device. The longer the wavelength of light, the deeper the penetration will be.



The laser acupuncture therapy application falls into regeneration and pain control by applying acupuncture points for shingles, rheumatoid arthritis, osteoarthritis, carpal tunnel syndrome, sprains, and tendons and muscles. An accelerates the healing process on open wounds, burns, and ulcerations such as canker sores and simplex herpes.

The advantage of laser application on acupuncture points is that it may save time and sterility, especially in the Deficiency (Xu type) constitution. Although electrical acupuncture effectively treats extremities and muscle atrophy, using the laser relieves chronic pain effectively by applying it to acupuncture points.

It has a postulate that emitted photons excite electrons of the mitochondria, creating cellular micro-oscillations that stimulate biochemical processes through ATP (adenosine triphosphate) formation and enzyme activation, restoring typical properties on the cell-organ-organism levels. It has been observed clinically with acute muscle pain that there is a decrease in inflammation and edema and, almost immediately, pain relief. Understanding the modes of action in laser therapy may require detailed study and research in biophysics, neurochemistry, histology, biochemistry, optics, and neurology.

This phenomenon may depolarize and repolarize constriction of muscle fibers and relieve arteriolar spasms in the affected areas with reactive vasodilation. An electron excitation in the mitochondria membranes with transport and metabolic processes changes.

A summary of observations and findings in laser-related research follows:

1. Increased phagocytosis.
2. It increases tissue granulation.
3. It increases collagen synthesis.
4. Increased vascularization.
5. Increased acetylcholine.
6. It increased the production of T-cells and beta-lymphocytes.
7. Increased synthesis of serotonin.
8. Inhibit prostaglandin effects (vasoconstriction, inflammation, pain) on tissues.
9. Laser stimulation and release of beta-endorphins through acupuncture point stimulation.
10. Laser acupuncture increased the synthesis of keto-steroids and hydrocortisone.

**Soft laser acupuncture therapy may reduce corticosteroid use in managing chronic pain syndromes on the Meridian and acupuncture points, improving the immune system, and maintaining homeostasis.**

## High-capacity Laser indication with various Mediums

**Argon:** Retinal treatment in Ophthalmology, Hemostasis, and vessel adhesion in Dermatology.

**Carbon-dioxide, Co<sup>2</sup>:** Microsurgery in Ophthalmology.

**Excimer:** Vascular prosthesis.

**Krypton:** Hemostasis, Vessel adhesion.

**Potassium titanyl phosphate (KTP):** Incision, Hemostasis.

**YAG (holmium ion yttrium-aluminum-argon:** Incision, Hemostasis.

**Nd YAG (Nd: Y<sub>3</sub> Al<sub>5</sub> O<sub>12</sub> neodymium-yttrium aluminum garnet) is in the same category as the** Ruby medium. Cataract, iris repair, diabetic retinitis, oral surgery, uterus myoma, incision of carcinoma, and prostatectomy.

**Erbium YAG (Er: Y<sub>3</sub> Al<sub>5</sub> O<sub>12</sub>):** High permeability applicable for dermatological repair. Melanoma, warts, and bruise.

**Ruby:** Tatoo removal.

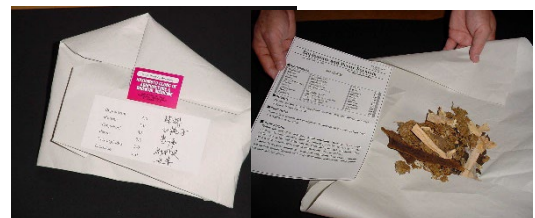
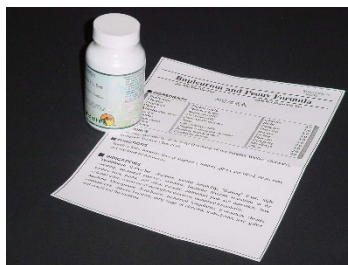
**Organic dye:** Dermatoses, Scar management.

**Copper vapor:** Epulosis and scar.

### 10. Herbs

1. Arkansas 2. Idaho 3. Massachusetts 4. Montana 5. Nevada
6. North Carolina 7. Minnesota 8. New Mexico 9. Oregon
10. Texas 11. Vermont 12. Washington 13. California 14. Colorado
15. Florida 16. Pennsylvania 17. Arizona: Describe as “Herbal poultices.”
18. Maine: Describe as “Pre-made herbal.” 19. **Hawaii: Describe as “Herbal medicine.”**

**Note:** The US adopted the Chinese medical concept from the beginning. Therefore, acupuncture, moxibustion, and herbs are categorized under Oriental medicine. Regarding the new implementation of “Herbal Disclosure” in the Hawaii Rules, it is necessary to inform patients of herbal medicine and formula contents, warning of interaction with other drugs, allergy to certain herbs, and side effects, if possible, any, for safety measures for the patients.



## **Reported Herbal Toxicity Information**

***Keep routine checking the FDA site to ban some herbs and herbal products.***

### **HHS News (US Department of Health & Human Services): 12/15/1980**

Re: Death associated with ingests of “Chifong Toukuwan” tablets (Hong Kong), which contain indomethacin, hydrochlorothiazide, chlorthalidone, phenylbutazone, aminopyrine, that the labels on the products list only herbal contents.

### **RAIDS ON HONOLULU’S FIVE CHINATOWN SHOPS NET ILLEGAL ANIMAL PARTS: 5/31/ 1990 (Refer to Page. 59, #10)**

Imports Bear gallbladders and other wild animal products (including black bear, Himalayan sun bear, rhinoceros, tiger, and seal) make pills and ointments. The investigation is in the hands of the attorney’s office. (The Honolulu Advertiser)

### **COLORADO DEPARTMENT OF HEALTH NEWS RELEASE TO HAWAII DCCA & DOH: 3/18/ 1994**

Re: Reported, “Jin Bu Huan” has caused acute hepatitis in Colorado and California.

### **US FOOD AND DRUG ADMINISTRATION (FDA): April 4, 2001**

Re: Letter to Health Professionals Regarding Safety Concerns Related to the Use of Botanical Products Containing “Aristolochic Acid,” sold as dietary supplements and “traditional herbal medicines.” The nephrotoxicity and carcinogenicity of botanical products containing Aristolochic acid.

Misleading labeling claim on “Bojenmi Chinese Tea” claims: “resolving body fat and reducing weight,” “reduces the cholesterol,” “preventing atherosclerosis and high blood pressure and heart disorders,” “make women feel young and slim and full of youthful beauty,” “rids of bad breath and erosion of the lip and tongue.” Failure to comply resulted in fines of up to \$10,000 per violation.

### **THE IRISH TIMES: 7/11/ 2001**

Re: St. John’s Wort and Ginseng could cause excessive bleeding and other complications that potentially pose the most significant impact on the care of patients undergoing surgery (Journal of the American Medical Association)

**Ephedra:** may induce irregular heartbeat

**Ginseng:** may exacerbate low blood sugar

**Kava and Valerian:** may exaggerate the impact of anesthetic effects.

**St. John’s Work:** could accelerate excess metabolism.

**Echinacea:** may risk poor wound healing and tend to infection.

**“They should inform themselves and make sure their patients are also properly informed, which very few of them are, unfortunately,” Green Party TD Mr. Trevor Sargent.**

### **THE MORNING POST: 3/25/ 2010**

Hong Kong and Singapore Pull out of Po Chai Pills because of Health Risks; they contain mercury and others.

**THE CONSUMER REPORT MAGAZINE: September issue 2010**

Re: The 12 Most Dangerous Supplements

**Aconite:** Toxicity, nausea, vomiting, hypotension, respiratory system paralysis, heart-rhythm disorders, death.

**STATES CALL FOR INQUIRY OF HERBAL SUPPLEMENTS: Fourteen attorney generals asked Congress to investigate herbal supplements. It is essential to continually review and monitor herbal products' content, not chemical or drug additives.**  
*-Honolulu Advertiser 4/ 4/ 2015.*

**11. Aquapuncture**

1. Washington 2. Arkansas: Describe as "Injection therapy."
3. Florida: Describe injectable solutions such as sterilized herbs and homeopathic solutions in March 2003. 4. South Carolina
5. Washington: A not specified acceptable solution to inject.
6. West Virginia: Limited use of the distilled solution.
7. Colorado: Indicates vitamins, minerals, homeopathic, herbal, saline solution, Ringer solution, lidocaine, procaine, analgesic agent, and required to provide epinephrine and O<sub>2</sub> assistance for allergic reaction.
8. New Mexico: Require a prescription for Point injection.

**Note:** The above four states allow injection therapy to the acupuncture point. The Chinese herbal medicine solution, isotonic sodium chloride (physiological salt solution), liquid vitamins, and distilled water can be injected into the acupuncture points with a 60-hour certification course.

The State Acupuncture Board in Indiana and Iowa is under the Board of Medicine.

However, the Arkansas legislature discontinued this measure due to the contradiction between the statute and rules requiring one of the Board members to be a physician without voting privilege. Therefore, the Rules contradicted the law but are still active. The title of Doctor of Oriental Medicine, "DOM," is also repealed. Currently, under the litigation process and dispute with eleven acupuncturists protesting this justification, it is still active.

## 12. Cupping

1. California 2. New Hampshire 3. Tennessee 4. Virginia 5. Washington

6. **Hawaii: The statute describes the scope of practice in the statute as mechanical stimulation.**



Sterilization may be using isopropyl alcohol or dimethyl benzyl ammonium chlorides such as Clorox's "Broad Spectrum" (non-bleach), or BRANSON Ultrasonic cleaner with disinfectant solutions.



## The Caution of Cupping Procedure

Regarding **Cupping** (“**Vacuum blood purgation procedure**”) or **Acu-suction**, applying strong vacuum suction to the skin causes microvascular hematoma. It remains a dark purple circle marked on the surface by excessive aspiration. At the Brazil Olympic Games 2016, gold medalist swimmer Michael Phelps showed dark round purple marks on his shoulder. He made a unique topic to acknowledge "Cupping" treatment in sports medicine.

Cupping methods started from 2,000 BC to 1,900 AD and were used as bloodletting surgical procedures for skin lesions and de-toxicities such as eliminating venom. The cupping procedure improves peripheral circulation and gas exchange in micro varices. Slide or gliding application may affect muscular and fascia linings through friction. Contraindications include pathological tumor formation, sensitive skin, pregnancy, child, fever, malaise, and blood disease for Wet Cupping or Lancet cupping.

In a tabloid photo, the Hollywood actress Gwyneth Paltrow also appeared with cupping marks on her shoulder. Applied Cupping for detoxification of the blood is the wrong approach. Only adequate Cupping induces hyperemia and stimulation of the fascia lining; therefore, blood flow increases to the Cupping area to improve conjugated fibrotic tissues.



Due to an unnecessary force of negative vacuum suction after 3-5 minutes of application, the peculiar dark purple circles lead to microvascular hematoma without therapeutic value. For an extended period, this practice started as a folk medicine to lancet out of venom from poison snakebite or poisonous stings, which is like leech suction treatment. Creating those purple reddish circle markings caused by strained tissue with hydrogen ions and lack of blood supply might convince, but make-believe people that removal of blood detoxify is not an appropriate explanation. Cupping over retained acupuncture needles is not recommendable also. Ecchymosis is larger than 10mm of hematoma.

## **The Concern of Dry Cupping Injury**

There will be harm to the patient by applying Dry Cupping, "traditional Vaso-pneumatic therapy," to induce hyperemia when an unlicensed person applies repetitive Dry cupping on the skin. A procedure used by the manual suction applicator, electrical suction pump, or alcohol flame into the cup and immediately covering on the skin's surface to induce vacuum effects might cause injury, as shown in photos. Also, some individuals have acute dermatological conditions that tend to cause skin damage.

By wet or lancet cupping, shallow incision with a triangle, or the Lancet needle. The uncontrolled dry cupping practice may cause congestive effects by force vacuum suctioning that induces exudate. Microvascular rupture hematoma and dark reddish bruises remain for two to three weeks, causing toxicity. Contraindications: During pregnancy, A person with hemophilia, Diabetes, and Children. A person under anticoagulant medications such as Warfarin, Aspirin, Prednisone, or Prednisolone weakens the blood vessel's lining and lessens the immune system, leading to infection.

**Since venous blood with CO<sub>2</sub> recurs to the heart, the color is naturally dark red and solidified by fibrin and platelet exposure to the air. A practitioner should avoid showing coagulated dark blood to a patient to make an impression and saying, "Remove the poison" or "Detoxified."**



Excessive negative suction induces permeability of capillaries, resulting in fluid exudation, leading to skin break and tissue damage.



Excess Dry cupping application may result in a Hypertrophic scar and causes fibrous nodules under the skin.

Reported injuries include infection from a skin burn, hematoma, spinal injury, sepsis.



**Figure 3.** Burns induced by cupping therapy on the back of a 28-year-old man (see arrows). Dressings were changed every day and the wounds healed in 7 days without scarring.



Photos from the internet source

In China, 63 years old man treated with dry cupping for adhesive capsulitis (frozen shoulder). He has had daily cupping treatment for a month. An oil rubbed on the blistered site developed fever and discoloring by a bacterial infection, leading to a risk of sepsis and may lead to fatal consequence.



In ancient Egypt, suction cuppings like this used for suction of venom out, made of glass. 6cm Ht.

Smithsonian Museum, Washington D.C.



**Bamboo made cups.  
Made in China.**



Push spring type lancet needle and classic Triangle needle for bloodletting procedure.



### 13. Moxa, Moxibustion

1. Florida 2. Georgia 3. Idaho 4. Indiana 5. New Hampshire
6. New Jersey 7. New Mexico 8. Pennsylvania 9. Virginia 10. **Hawaii**

#### Note: The Difficulty of Thermal Application

A member of HAA reported and shared his experience that members to know in the Moxa application. He treated a juvenile female patient; upon examination, he determined that direct Moxibustion application justifies a patient. He explained and applied direct Moxibustion on her shoulder and upper back. The next day, her father appeared at his clinic complaining that treatment caused first-degree burns on his daughters' skin by a direct moxibustion procedure. The patient's father understood the practitioner's safety measures with an apology. A practitioner working on the juvenile patient requires extra caution since frequent opportunities to go to the beach and out expose skin in Hawaii. Therefore, applying direct moxibustion may require skillful techniques and far infrared heat lamps.

**(Refer to moxibustion incident #3 on page 102, and #11 Acu/moxa injury, page 104)**

#### The Curling's Ulcer

It is rare, but occasionally, gastric ulcers may be induced by burn or cauterized skin, which generates a stress response that the Pituitary gland sends messages to the gastric lining to excess cortisol secretion and increases acid in the stomach, causing erosion of the stomach lining. The direct cutaneous moxa burn may cause an allergic reaction to the skin and remain keloid formation by irritant dermatitis.

A 68-year-old male patient shows apparent **allergic keloid scar** formation after direct moxibustion treatment in the past.





## Alternative heat stimulation apparatus

The acupuncturist may directly apply thread or grain size of moxa cone to ignite mild to intense stimulation to regulate autonomic nerve function and extinguishes by either pressing down with fingertips or forceps handle swipe moxa cone away before reaching the skin surface. The application of moxibustion also emits a distinct odor, and some individuals are allergic to smoke and odor. The photo below is a smokeless portable intense heat applicator without skin burn called "BANSHIN," which means "heat acupuncture" (manufactured by Chuo, Co. in Japan) with a DC6vX2 battery to operate available which is two types of preset degrees of 45 Centigrade (113 Fahrenheit), or 60 Centigrade (140 Fahrenheit).



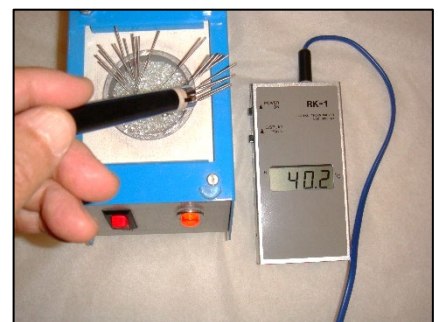
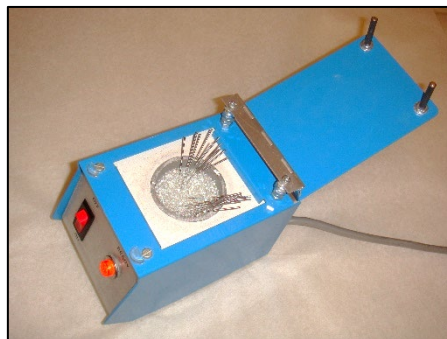
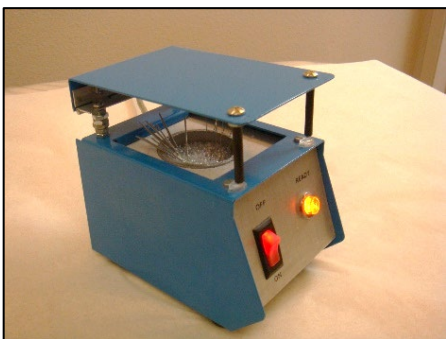
BANSHIN Model: BS-12, set with 60 Celsius.

### **BANSHIN**

A smart tool for applying intense heat stimulation to regulate autonomic nerve system and gives counter irritants to masking a superficial pain.

Ideal tool for a patient who has allergic to smoke or sensitive to distinct moxa odor.

## **Thermo-needle Care**



In China, there used **Heated Needle** by alcohol flame technique to eliminate cold and dampness at treatment's point for piercing moderately heated acupuncture needles, occasionally create burned mark or scar by uncontrolled heat temperature. Bead-bed heat sterilizer for dental practice may use with controlled temperature of the needle, needles temperature goes up to 40.2 Celsius (104.3 F) maximum for thermal needling.

#### 14. Gwa-Sha

1. Maine: Revised in April / 2004.
2. Massachusetts
3. New Jersey
4. New Hampshire: Indicate as “scraping techniques.”
5. Florida



Gwa-Sha therapy: as counter irritant methods instruments made of the Water Buffalo's horn, Plastic and Metal plate.  
**Excessive scraping is not recommendable which causes the skin bruise and abrasion scar as seen in photos.**

#### 15. Sotai, Shiatsu, Qi gong, Reflexology

1. Maine: Revised to add on April / 2004.
2. Florida

**In Hawaii, “Shiatsu” (finger pressure therapy) is categorized under Massage therapy.**

#### 16. Sound, light, and vibrational therapy

1. Maine: Revised to add the scope in April / 2004.

#### 17. Nutritional and Diet

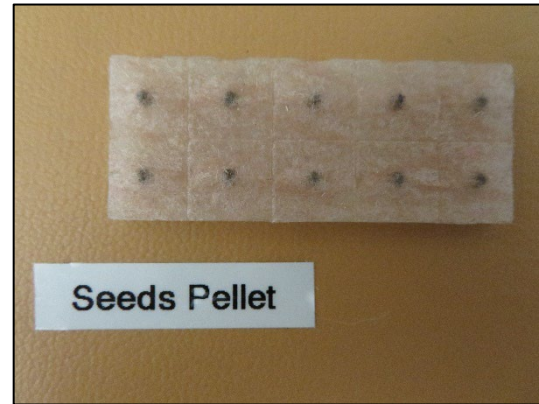
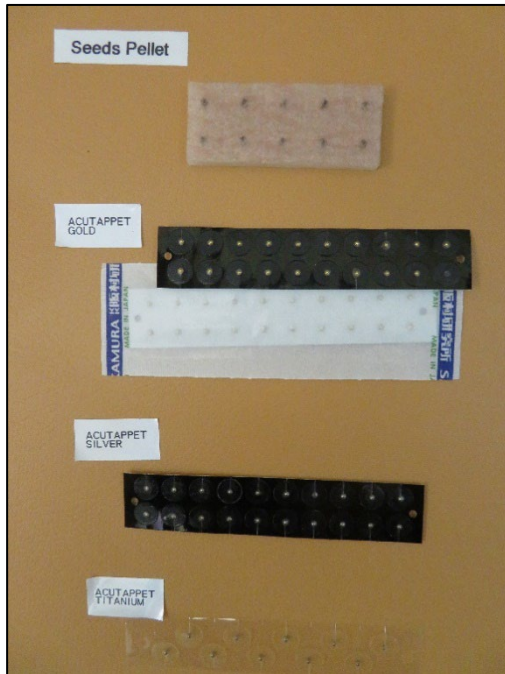
1. Arkansas
2. Idaho
3. New Mexico
4. North Carolina
5. Tennessee
6. Vermont
7. Maine: Revised to add on April / 2004.
8. Montana: Described as “oriental food remedies.”
9. Nebraska: Described “not as Medical, nutritional therapy.”

**Note:** The Hawaii Board of Acupuncture considers adding "Traditional Nutrition and Diet" in the Rules definition. The Hawaii Dietitian Association commented that they acknowledged and respected the Traditional Oriental Diet and had no contest for the Board's measure in the Rules.

## 18. Acupatches, Acuform, Pressure needles, Acutotement

1. New Jersey
2. Florida

**Note:** “Acupatches”: Refers to a single millimeter-sized round metal ball or piece of seed with adhesive tape attached to the points.



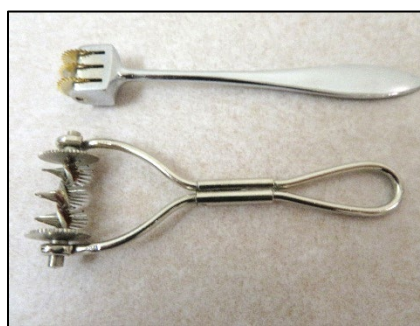
Seeds Pellet (mustard seeds), Acutappet or Acupatches in Gold plated, Silver (nickels) and Titanium pellet which is least allergy to the skin. Usually use after auricular acupuncture to retain stimulation.

“Acuform”: Plaster type of paste on the points.

“Pressure needles”: Applying pressure on a point with a non-invasive brunt point instrument.



Auricular probe and Spring type. Pressure needle (called “Teishin”) at the bottom.



Roller needles for pediatric treatment. Various type of Pediatric needles.



“Acutotement”: Term for the agents or apparatus that do not penetrate the skin.



Spring needle or Dermapen, which has 7 or 12 blunt tip needles to tap on the skin for a counter stimulant, usually apply for pediatric treatment.



Applied “**Piezo**” stimulant direct to the acupuncture point. Piezo’s piezo-electric by the quartz element impact leads the frequency of one million/second. Uses as counter stimulants.

The word "piezo" means "press" from the Greek word piezein. The piezo application’s contra-indication shall be a person with a pacemaker near the cervical sinus node, eyeball, or combustible materials.



**POINTER EXCEL II** (Dist. By Lhasa OMS):

Features acupuncture point indicator, which registers irritation of the sympathetic nerves through electro-conductivity resistance to define muscle spasm where circulation is jeopardised and direct current low-frequency pulse stimulation (1-16 Hz).



## 19. Zero Balancing

1. Maine: Revised to add on April / 2004.

**Note:** Zero balancing is a natural medical treatment in which the whole body's structure and energy are balanced. It is clinically like the REIKI treatment, identical to the massage and the breathing method.

## 20. Ryodoraku

1. Massachusetts

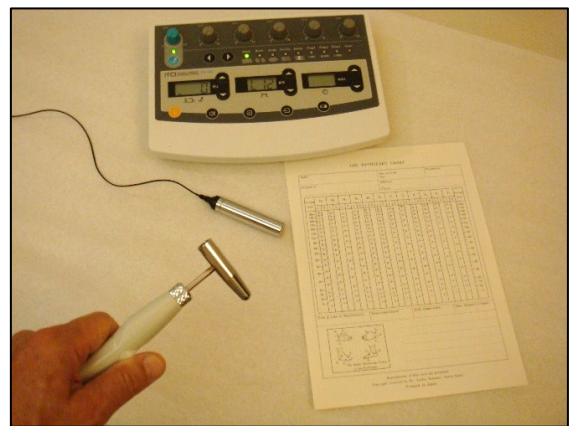
The RYODORAKU (Good Meridian Conduction) system specified in the definition of acupuncture in Massachusetts is outstanding and pursued by the practitioner familiar with such a diagnostic method. The RYODORAKU system measures dermal electrical resistance change to calculate the sympathetic nerve's excitement site circulation hampers by muscular constriction. It measures 12v, 200 microcurrent amplifiers in 1950 by Yoshio Nakatani, M.D., Japan (1923-1978). Recently, in Taiwan, a MEAD device (Meridian Energy Analysis Device, or System) acquired a production patent from the Ryodoraku Research Institute in Japan.

**Note:** Another breakthrough was the DERMOMETER system through changes in the electric circuit on a skin discovered by Tachio Ishikawa, M.D., Japan (1908-1973). Those diagnostic methods explore modern acupuncture and moxibustion development.



Dr. Yoshio Nakatani's Ryodoraku system acupuncture needle applicators.

The bottom is the applicator for the Korean Hands acupuncture.



**ES-160 Electroacupuncture Unit:** 6V DC (Ito, Japan) has Yoshio, a combination feature of the Ryodoraku system, Point search, Low-frequency wave stimulation (4 output ports), and Direct current stimulation.

## 21. Ion cord device, Ion Pumping Cord

1. Arizona
2. Massachusetts
3. Arkansas

**Note:** The Ion code pumping system to which the germanium diode is applied as a medium is a theory that gives a circuit stimulus of feeble current ions on the skin connected with different needle material. Dr. Yoshio Manaka, M.D., Japan (1911-1989) developed the Meridian and Extra-ordinary acupuncture point diagnostic system. Massachusetts defines the “Ryodoraku system,” but a remarkable “Ion Pumping system” defined the scope both of Arizona and Arkansas.

*References:*

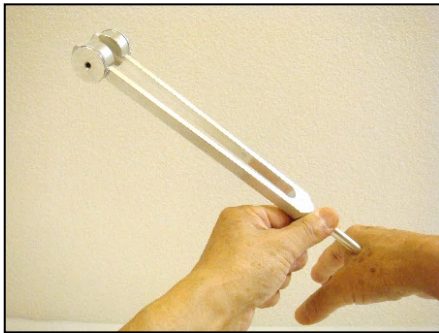
*CHASING THE DRAGON TAIL “The theory & practice of acupuncture” by Yoshio Manaka, M.D.*

## 22. Sonopuncture, Ultrasound

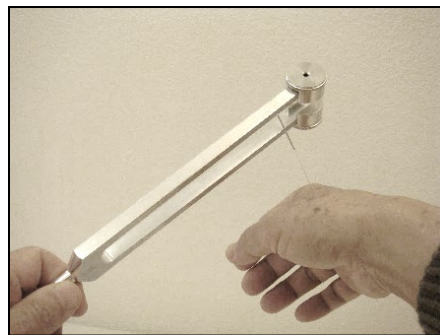
1. Washington
2. Iowa
3. New Jersey: Described as “ultrasonic.”

**Note:** Although Sono-puncture started by the vibration of a tuning fork, it touched an acupuncture needle or directly applied a tuning fork’s handle to a skin surface. The efficacy of oscillating frequency stimulus and the minimal effect as a counter-stimulant is not apparent.

The Hawaii Board of Acupuncture consensus allowed an ultrasonic apparatus to apply on the Meridian and points (The Board of Acupuncture Minutes on 6/5/2014).



Applied Tuning folk (Miltex 64C) directly attached to an acupuncture point.



Applied vibration of Tuning folk directly applies to an acupuncture needle.

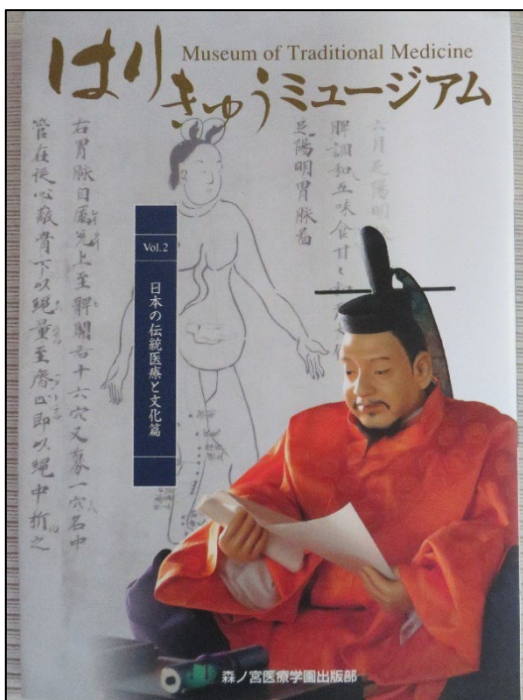
**Note:** There is no influence on a cardiac patient with tuning fork stimulation. The guidance category of the counter-stimulus, which brings about vibration near the ultrasonic wave, gives a stimulus on superficial pain, which is not the purpose of the cure.

## 23. Animal acupuncture

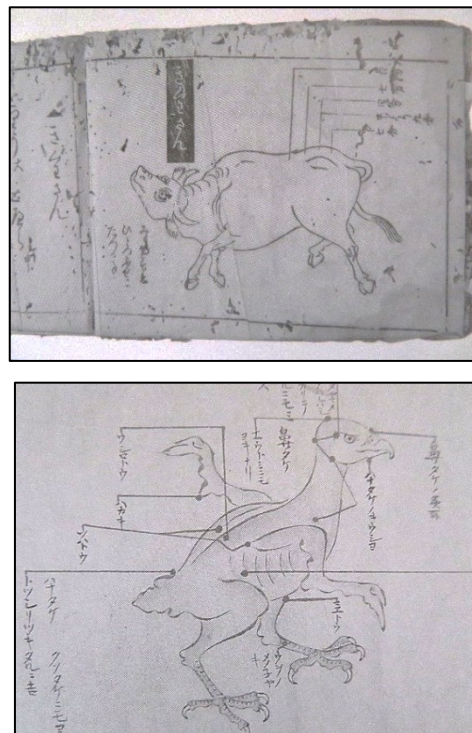
1. Maryland: Require 135 hours of the veterinarian acupuncture course.

A certification course: on Veterinary Acupuncture is available at the “International Veterinary Acupuncture Society” in Colorado or the “Chi Institute” in Florida.

**Note:** I received a claim from one veterinarian that an acupuncturist treated a dog for a fee. I explained to a veterinarian and let the Hawaii Veterinarian Board acknowledge that Animal acupuncture had been practiced in Japan by acupuncturists in 1554 but not performed by modern veterinary medicine. The acupuncture treatment for domestic livestock includes Horses, Cows, Samurai Shogun's hunting Falcon, and others. These photos indicate the Pictorial book "Acupuncture and Moxibustion Museum," published by the University of Morinomiya, Osaka, Japan, in 2003. The Board of Acupuncture in Hawaii may not adopt animal acupuncture measures in the Rules because the acupuncturist requires veterinary physiology and anatomy complexity study. The Hawaii Veterinary Association acknowledged that animal acupuncture is within traditional acupuncture, although the American Veterinary Association on the mainland claimed to develop animal acupuncture independently. When acupuncture works on an animal, there also convinces the public that acupuncture is not hypnotic.

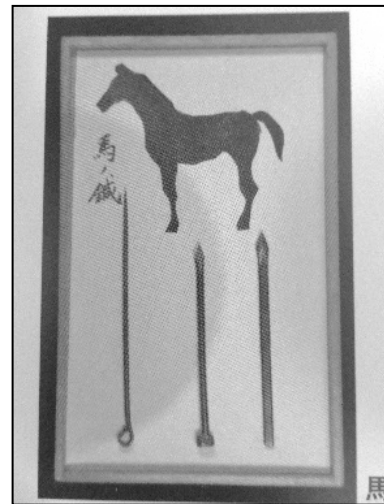
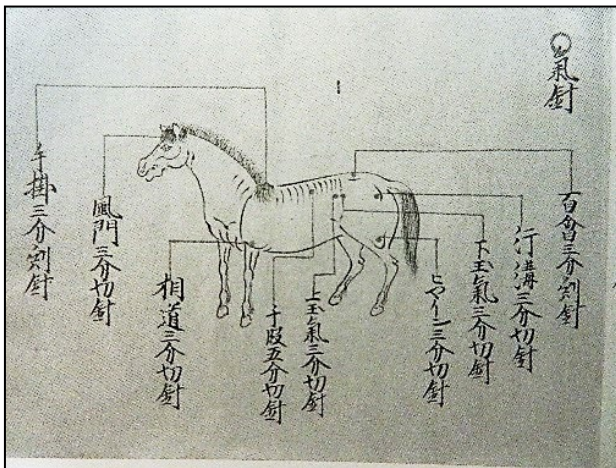
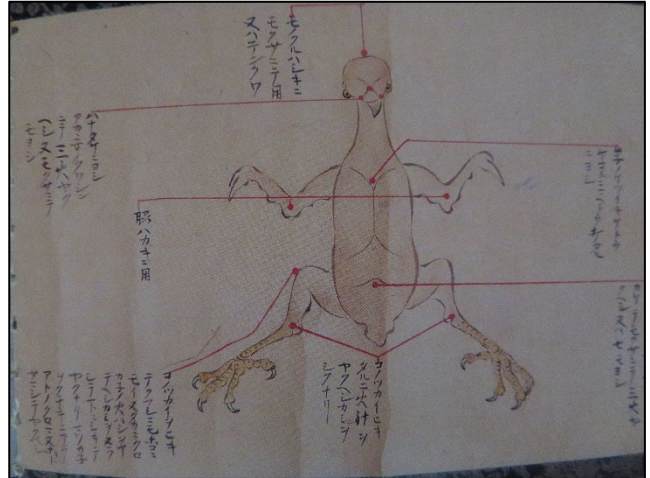


The cover of Acupuncture & Moxibustion Museum photo book.



An Ox and Bird's acupuncture point 1600





Above photos in the “Acupuncture & Moxibustion Museum” photo book published by the University of Morinomiya, Osaka, Japan 2001. An animal illustration was drawn in 1554.



Dog's acupuncture point model





Sometimes Wu leaves the needle in for a few minutes, but with a very sick fish it is left in place for as long as two days.

## IN THE AGE OF AQUARIUMS, WU LI-HSIA FINDS ACUPUNCTURE IS NOT A TANKLESS JOB

OUCH!

People Magz.

**Y**ou say your goldfish are looking a little green around the gills? Your kissing gouramis won't even speak to each other? And your piranha is off its feed? Quit carping. If you're a fish fancier in Alhambra, Calif., help is at hand. Acupuncturist Wu Li-Hsia (Lily) makes house calls (or tank calls, if you prefer).

Wu, a partner in the Garfield Acupuncture Clinic, has been using her healing skills on people since 1976. She went to Pisces when some of her goldfish came down with red gillflashes, loss of appetite and loss of scales. "I told my friends I was going to try acupuncture," she says.

"They told me I was crazy, but it was better than letting them die."

The tough part was figuring out where to stick the fish. One of the crucial points on the human body is three inches below the kneecap. Wu picked a comparable spot near the fish's tail. She netted the



Needles in place to stimulate her blood and increase her energy level. Wu sticks a to one of her ailing goldfish.

sickest of her goldfish, inserted a two-inch stainless-steel needle and released the living fish back into the tank. When her goldfish got better, Wu tried the treatment on other denizens of the deep. Before long, Wu had a new school of patients, which she treats for free.

One happy customer is Ann Boomhower, owner of a 12-inch koi. The fish had been sitting at the bottom of the pool before Wu's treatments. "There was a definite improvement," says Boomhower. "The fish started swimming near the top of the water. Its tail was not so severely bent, and it started eating."

It seems doubtful, however, that fish acupuncture will become all the rage. "To tell you the truth, fish are not very important," Wu's partner, Cho Sheng-Gung, told a reporter. "If they die, they die, and you buy a new one." Some people just don't get the point. □

Photographs by Curt Quander



Appearances notwithstanding, this screech owl undergoing electroacupuncture is not wide-eyed from anxiety.

## FOR THE FEATHERED PATIENTS OF ACUPUNCTURIST SIMM GOTTESMAN, NEEDLES ARE THE WAY TO HEALTH

**F**irst a one-inch needle is tapped gently between the patient's eyes. Then, at other pressure points, more needles are inserted, each penetrating about an eighth of an inch. Some are wired to a machine whose mild vibration causes the patient to fibrillate. The patient in this instance is an emaciated screech owl, but it could have been any of hundreds of birds or occasional small beasts that wind up at the Wild Bird Care Center in Fort Lauderdale. Acupuncturist Simm Gottesman, 31, is the first to apply the arcane Chinese healing art to these creatures. "Animals are brought in polluted, starved, with no sense of bal-

ance," she says. "With acupuncture you can see a change week to week. The more I treat a bird, the more it fights as it gets its energy back."

Michigan-born, Gottesman has always loved animals, starting with her childhood pets—a lizard that lived in the family piano and a turtle that dined on hot dogs. But when her cat developed an abscessed foot, Gottesman discovered that she would never become a doctor. "I fainted when I saw blood," she says.

Instead, she earned her B.A. at the University of Michigan as an education major. While teaching at a Florida women's prison, she developed a pain-

ful ear problem. When acupuncturist Ralph Alan Dale cured her after a few treatments, Gottesman decided to study with him and also with a Chinese master acupuncturist. Three years later, in 1982, she received a state license to practice. Her fee is \$35 per treatment for human patients; she works on animals gratis.

Gottesman got into the animal kingdom two years ago when the Wild Bird Care Center wound up with a pair of raccoons afflicted with distemper. One died; the other got Gottesman's acupuncture, recovered, and was released back into the Everglades. Working with animals, who can have no expectations of a cure, has "proved to me that acupuncture has physiological effects on the body," she insists. "Then the body can heal itself." Whether the patient is man or beast is, so to speak, beside the point. □

The People magazine in the US introduces animal acupuncture on gold fishes used pins and acupuncture treatment with electro low-frequency wave for the owl.

**Adopting animal acupuncture into practice means there is a risk of inevitable disease contamination carried by the animal. I advised the veterinarian to report to the HAA's adjudication committee or to the state board if an acupuncturist compensates for treating animals with acupuncture.**

## **Common Diseases Infect from Pets and Animals to Humans.**

### **1. Ringworm:**

Tinea (Fungal infection not caused by insects or worms). Cats and dogs.

**Infected Symptoms:** Dermatophytosis caused by a dermatophyte, Red, circular patches on the skin infection, blister-like lesions, and scalp itchiness.

### **2. Roundworm:**

Common parasite (ascariasis) in cats' and dogs' intestines.

**Infected Symptoms:** Cough, Shortness of breath, abdominal pain, and bloody stool.

### **3. Hookworm:**

Hookworm sucks on the intestinal lining of dogs.

**Infected Symptoms:** Cough, Itchy rash, Wheezing, Stomachache, Anemia, Loss of appetite.

### **4. Giardia:**

Common in dogs than cats, waterborne organism lives in streams.

**Infected Symptoms:** Diarrhea.

5. **Campylobacter:**

Most common diarrhea-inducing diseases in the US. If left untreated, an animal infected with campylobacter will continue to shed germs for up to seven weeks.

**Infected Symptoms:** Diarrhea.

6. **Salmonella:**

70-90% of reptiles harbor salmonella. Baby chicken also carries germs.

**Infected Symptoms:** Abdominal pain, Fever, Vomiting, Headache, and Nausea.

7. **Tapeworms:**

Unwashed hands to mouth tend to come into contact with tapeworm.

**Infected Symptoms:** A rice-like tapeworm pieces in feces.

8. **Cat Scratch Disease (CSD):**

The Bartonella bacteria could be present in a cat's nail and pass through a scratch or bite through an infected flea, mostly in fall and winter. About 40% of cats carry the disease at some point.

**Infected Symptoms:** Small, red bump near bite or scratch site; swollen, painful lymph nodes; fever, headache, fatigue, joint ache, skin disorders, and weight loss.

9. **Bubonic Plague:**

The Yersinia pestis infection occurs through a flea bite. CDC reports an average of seven human cases per year.

**Infected Symptoms:** Sudden fever, headache, chills, weakness, swollen and painful lymph nodes.

10. **Toxoplasmosis:**

Common diseases are transferred from cats to humans.

**Infected Symptoms:** Flu-like symptoms, swollen lymph nodes.

11. **Rabies:**

Rabies is fatal once symptoms appear in both pets and animals.

**Infected Symptoms:** Flu-like symptoms, General weakness, headache, confusion, hallucinations.

24. **Kirlian photography**

1. Massachusetts 2. Florida

**Note:** In **1938**, "Kirlian photography" was discovered accidentally by an electrical engineer couple, Semyon and Valentina Kirlian, in Russia. The methods use a high-frequency charge of (3 kHz x 30 kV) to induce corona discharge of any matter through the plasma luminescence of a body surface through an electromagnetic wave. Unfortunately, since the verification result is unstable,

photos by Kirlian imaging increase have traced the rise of hypodermic fatty acid in older people. The probability of natural phenomena as diagnostic technology may be difficult to endorse.

## 25. Laboratory and Diagnostic test

1. Arkansas 2. Iowa 3. Indiana 4. New Hampshire

**Note:** In Hawaii, the western lab exam referred to the patient's physician to order further pathological examination and a definite diagnosis. If acupuncturists order laboratory tests and the result is out of scope, it will burden the patient. A functional disorder is frequently associated with organic and pathological diseases beyond the scope of practice.

**I ordered seventy-one cases of X-ray examination to rule out bony or ligamental pathology between 1980 - 1990. A pathological abnormality rate found in the X-ray examination was 72%.**

CERVICAL SPINE: 46 cases revealed 30 osteoarthritides, and 16 resulted in normal.

LUMBAR SPINE: 20 cases revealed 17 osteoarthritides, and three resulted in normal.

ELBOW (Right): 1 case revealed progressive epichondritis.

SHOULDER (Left): 2 cases revealed calcified tendonitis, and another resulted in normal.

THORACIC SPINE: 2 cases revealed one kyphotic compression fracture, and the other was normal.

BONE SPUR (Left) 1 case revealed plantar fasciitis with the present form of a spur.

HIP JOINT (Left) 1 case revealed no abnormality in the structure.

Most cases require the pursuit of a preservative measure. If acupuncturists order a blood profile that results in any pathological internal medicine problem, the practitioner must explain and suggest appropriate treatment to the patient. Further definite diagnosis may require a blood profile for organic problems or radiographic examination, CT-scan, or MRI for a bony or ligamental pathology complication despite consecutive acupuncture treatment finding no signified improvement. It is better to refer to the patient's attending physician or specialist for a definite diagnosis when difficulties arise or advanced organic and pathological cases.

It is essential to let patients know the cause of dysfunction, assessed beyond acupuncture scope. Preservative and preventative treatments often recommend finding advanced spinal problems such as compression fractures or progressive osteoarthritic changes with stenosis. If a restoration view is possible through a surgical procedure or other professional measurements, it is excellent for a patient to consider within the selection limits. Physicians have also referred patients to acupuncture practitioners who think acupuncture modalities suit the patient.

## Study on the Integrative View of Acupuncture

We recognize that medicine is a process of life and a knowledgeable preventive treatment process. When we experience pain and discomfort in the body, we automatically put our hand on the pain site for comfort, an auto-defense and protective reaction. Occasionally, applying pressure on specific areas or spots to relieve pain or discomfort may be explained by discovering acupuncture treatment methods.

Since the Chinese medicine theory is a traditional medical system for Asian people, it is also challenging to apply to the classic diagnostic medical treatment concept corresponding to the Five Element theory and Meridian theory. It is crucial to study east-and-west medicine with a comprehensive medical examination viewpoint and pursue the relation of both treatment sides because the range of indications for acupuncture is wide.

Although medicine originated from natural philosophy, the medical system progressed and divided into the East and Western ways. Though regrettable, the traditional medicine world seems to sleep through because of the credit of a thousand years of history and the need for further development of theory and technology.

**Our mission is to find a crossing point of integration with Western and Oriental medical concepts, such as stop-smoking by acupuncture. Fundamentally, a person must determine to quit a bad habit, or deep nicotine dependence is difficult to correct. It is essential to explain to the patient scientific reasons for stopping smoking. There are five or six acupuncture needles on the Neuro-gate (gate of the saint), sympathetic, stomach, kidney, liver, and lung points where the antihelix, triangular fossa, or concha are used. The auricular nerve is a branch of the Vagus nerve system that affects parasympathetic nerves to increase saliva secretion that causes distaste in the mouth by smoking cigarettes. Therefore, determined people can stay away from smoking.**

There are increases in respiratory-related death, and the fact that we all have a CEA (Carcinoembryonic Antigen), 0 to 2.5ng/ml in a body in healthy nonsmokers discovered about sixty years ago under the electron microscopic view. AMA (American Medical Association) must legally proceed and encourage stop-smoking campaigns and coercion to avoid public accusations and litigation against the Government.

A physician friend told me, "Acupuncture is also good, but it is hard to expect a dramatic effect." The Harvard graduate Orthopedist told me, "I can see that neither methodology nor theory of acupuncture has established a standardized understanding of the system as the scientific view is unclear." A Pediatrician who experienced acupuncture treatment for his shoulder problems said, "I understand that acupuncture seems to affect a Vaso-motor system well."



**Acupuncture may not sterilize or suppress bacteria or viruses and has difficulty treating pathological causes, but it has minimal undesirable side effects and physiological obstacles.**

It is difficult for Western and Oriental medicine to treat complicated human diseases and ailments. There are many easy cases for both sides of the approach. Even though acupuncture pulse diagnosis is corrected and subjectively adjusted, correcting the pulse through acupuncture treatment only solves some of the problems. A handful of Western doctors attempt to earn the privilege of acupuncture practice by looking for points of the dramatic effect. Still, most doctors are very humble about their clinical practice because of the complexity of the human body. When Western doctors judge that acupuncture and traditional treatment modalities are adequate for treating symptoms, they refer patients to acupuncturists. The physician refers their patient to an acupuncturist who knows Western medicine. The acupuncture practitioner refers the patient to Western doctors who require close pathological examination, diagnosis, internal medicine, and surgical cases where Western medicine excels. However, some cases on both sides of therapy do not respond to treatment. Sometimes a switch in systems brings better results. In any case, the welfare of the patient is paramount. We share that common belief. It is essential to deepen mutual intention and understand mutual recognition.

With the integrative view, western medicine also has a concept of pulse observation and their viewpoint as a "condition of the pulse," not as "evidence of the pulse" in the oriental medical aspects. In Western medicine, the pulse condition means a pulse by cardiac output pressure showing in the radius artery. Such as "Large pulse," which is strong; "Small pulse," which is weak; and "Extraordinary pulse." The weak pulse is considered to be caused by arteriosclerosis. When a pulse shows tachycardia or bradycardia, and alternately intense and weakness, it may suspect heart failure, which leads Kussmaul to breathe with jugular venous dilatation with inhaling Tamponade, Constrictive pericarditis due to failure of the right ventricular valve. Also, fibrous thickening or calcification of pericardia may be considered for diagnosis. Given the Western medicines' aspect of pulse condition, pulse observation remains a consideration of cardiovascular and circulatory problems.

Humans could encounter more than 8,000 illnesses and diseases, and advanced analysis exceeds 20,000 diseases and conditions exist. To grasp the complicated human body's physiology, neither traditional Western medicine is a tremendous challenge and requires understanding intensive pathology and biochemistry. An old proverb says, "Preserve traditional concepts and develop new lessons and challenges," A study effort always strives to make it challenging to progress the modern theory kept with ancient traditions and integrative viewpoints.

Hawaii's warm climate and encouragement of non-smoking to the public contribute to Hawaii's higher health rank; on the other hand, lack of health maintenance that cannot receive federal medical coverage, the inconsistency of vaccination, and a low-income social economy have been problematic issues in Hawaii. Significantly, the cancer rate is increasing among Hawaiian native and Pacific Islands residents. Neither Japanese descent nor the Philippines are overweight, but diabetic-

related cases are growing. The adult rate of overweight has also doubled since 1990. Moreover, shortness of life is noticeable with homeless people (about 6,000 people on all Hawaii islands), increasing in recent years. The Hawaii state legislature's 3.8-million-dollar budget tends to add up to tackle mental disease and alcohol and drug dependence. The U.S. Department of Health,

"A healthy newborn and a healthy home were advocated as a campaign in 2017. However, the State of Hawaii faced a 715-physician shortage in 2018. Since President George W. Bush cut back the federal subsidy, a medical internship, many students gave up becoming a doctor, which was disastrous. Medical specialists increased rapidly due to the burden of treatment fee coverage and an estimated shortage of 24,000 doctors in the United States by 2025.

There is a plan to put more weight on comprehensive diagnosticians such as General Practitioners and Family medicine practitioners. A doctor has taken online diagnostic reports to the insurance companies often in the state. Therefore, depending on more diagnostic examination through an MRI or CT scan. Still, since it costs examination fees, it's up to insurance companies to approve the necessity of costly exam procedures.

Occasionally, patients ask acupuncturists for a second opinion before the surgical procedure. Physicians tend to tie up with online medical reports and spend less time consulting with the patient. It takes less time to consult for a patient's health maintenance, and acupuncturists must know general medicine to advise the patient and refer to their family physician with a clinical note. And the necessity for referring to a specialist, an acupuncturist, requires the knowledge of a comprehensive diagnosis.

Since patients are exposed to one hundred to a thousand times more irradiation than usual X-rays of the patient's body, cancerous cases have risen by 2% by doing the CT scan in recent years. MRI examination, which results from the U.S. Navy's physiological experimentation during the Second World War, placed soldiers between powerful magnetic fields to determine the influence of magnetic force on the human body.

We are still unknown what side effects will come out from now on. With the technical innovation of the modern age, medical study will be entirely beyond the imagination as the high-tech diagnostic method which made full use of research on genetic medicine through **Super-Computer**, **3D diagnostic imaging**, and **AI's diagnostic** development and research on **iPS cell** implant.

**However, if Artificial Intelligence (AI) research and Intelligence Amplification (IA) in human study are not done simultaneously, we will be commanded and subjugated by AI someday. And when such a time comes, how far can acupuncture accomplish the development?**

**CT Scan = Computed Tomography**

**MRI = Magnetic Resonance Imaging**

**iPS = Induced Pluripotent Stem Cell**

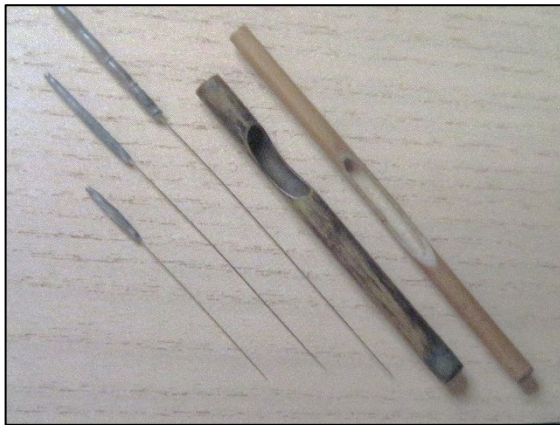
**AI= Artificial Intelligence knowledge**

**IA= Intelligence Amplification in Human wisdom**

**Supercomputer = The “Fugaku” in Japan’s computation ability is 41 Peta (415,530 Petaflops per/second). 1 Peta = 10,000,000,000,000,000**

**Its exclusive purpose is to tackle the world’s biggest challenges of the Supercomputer, such as climate change, medical development, cancer research, pharmacology, disaster prediction and prevention, environmental sustainability, and energy. Over the past year, the supercomputer has already used experimental trials related to Coronavirus COVID-19 and global weather simulations.**

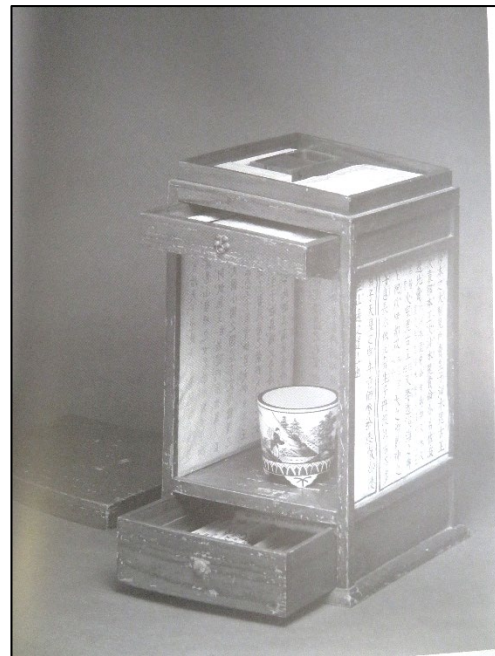
## Memorabilia of Acupuncture, Moxa, and Herb medicine



Acupuncture needles and needle guide tubes. Lacquered carrying case for house call. Needle guide tubes invented by Dr. Waichi Sugiyama in Japan made of bamboo and brass in 1812



Bloodletting lancet needle carrycase in 1868



Moxibustion procedure stand. Pine soot ink on top for point marking, Incense stick and Moxa in a bottom drawer in 1603





Herbs preparation instruments and balance scale in 1760



Herb medicine's cabinet used at the Shogun's Castle in 1800



Portable acupuncture set for house call. Stand guide tube and cotton balls with alcohol to up in the right.



Open view



Combined Moxa and acupuncture carrycase.



Portable carry case for house call on the left and closed cover on the right in 1965

## Integrated View on Bio-Energies and “Ki (Chi)”

*Concept of the Meridian, Acupuncture Points and  
The five Elements theory links with environmental astrology.*

### Analyzing the MERIDIAN

In the conceptual **Meridian theory** (經絡理論), the idiom **Kei 經** means a **neurological passway** (神經), which means governing and ruling over a body's physiological functions. **Raku 絡** means a **vascular network** (脈絡), which circulates the body's whole elements to nourish and oxygen supply. The Yin and Yang symbol means entwining or coiling around each other, as seen in the nervous system network, which helps blood flow to the tissues. All acupuncture points on the meridian have the exact longitude to maintain the body's essential function.

**The network of nerves and Blood vessels which constitute the word:**

**Meridian** = 經絡

神經 = **Nerves**, and 脈絡 = **Vessels**

Overview of Meridian or Channel: The old context explains that the Meridian is an energy passage where ancient people found energy in nature. They know through natural phenomena such as Wind, Ocean waves, Thunder-Lightning, Earthquakes, Rain, and other environmental forces, including their own mental and physical energies. When people experience physical pain and discomfort, we spontaneously apply our hands or let someone's hand on the affected area to comfort a problem as self-guarding action. People use pressure or stroke to stimulate a particular part or surface of the body with a hand to ease pain, even on a distal point or region. They found sudden or spontaneous relief of pain or discomfort. The Twelve Meridians concept refers to 12 months as a phenomenal passage, and 360 days indicate ease of pain points. The Meridian theory may derive from cosmology and astrology that we consider part of nature; humans should harmonize with the natural environment.

### The Concept of Air and Blood energy (Ki or Chi)

Ancient people witnessed boiling water push up the pot's lid with invisible steam air. They must feel the wonder that some energy or force can exist in such a phenomenon.

Invisible energy such as an aerial (oxygen) and mood, feeling, spirits, and nerves are invisible forces of life described as the Positive, Yang, and Acute stages. Organic functions by visible energy forces such as blood supply (nutrition) with substances, solids, foods, nutrients, and masses as visible forces are described as Negative, Yin, and Chronic stages.



## Chinese Biological clocks

The biological clock or biological rhythm called "circadian" around the body relates to various bodily functions with rhythmical changes such as body temperature, sleep cycle, menstrual cycle, cardiac rhythms, hunger cycle, and hormonal cycle, and this instinctual behavior and emotion may have a relationship with the biological clock and symptomatology.

**Since emotional energy is one of the leading human strengths, and linkage with the hypothalamus (sleep, endocrine: CRH, GHRH, GnRH, PRF, TRH, vasopressin, autonomic nerves) and limbic system (emotional acts, motivation, memory) may hold the key to understand the Chinese bio-clock system.**

CRH = Corticotropin-releasing hormone

GHRH = Growth hormone-releasing hormone

GnRH = Gonadotropin-releasing hormone

PRF = Platelet-rich Fibrin

TRH = Thyrotropin-releasing hormone

Related Meridian	Affects period	Related Meridian	Affects period
Lung - Yin	3 - 5 A.M.	Large Intestine - Yang	5 - 7 A.M.
Stomach - Yang	7 - 9 A.M.	Spleen - Yin	9 - 11 A.M.
Heart - Yin	11 A.M. - 1 P.M.	Small Intestine - Yang	1 - 3 P.M.
Bladder - Yang	3 - 5 P.M.	Kidney - Yin	5 - 7 P.M.
Pericardium - Yin	7 - 9 P.M.	Triple Warmer - Yang	9 - 11 P.M.
Gall Bladder - Yang	11 P.M. - 1 A.M.	Liver - Yin	1 - 3 A.M.

## The Concept of Yin and Yang symbol

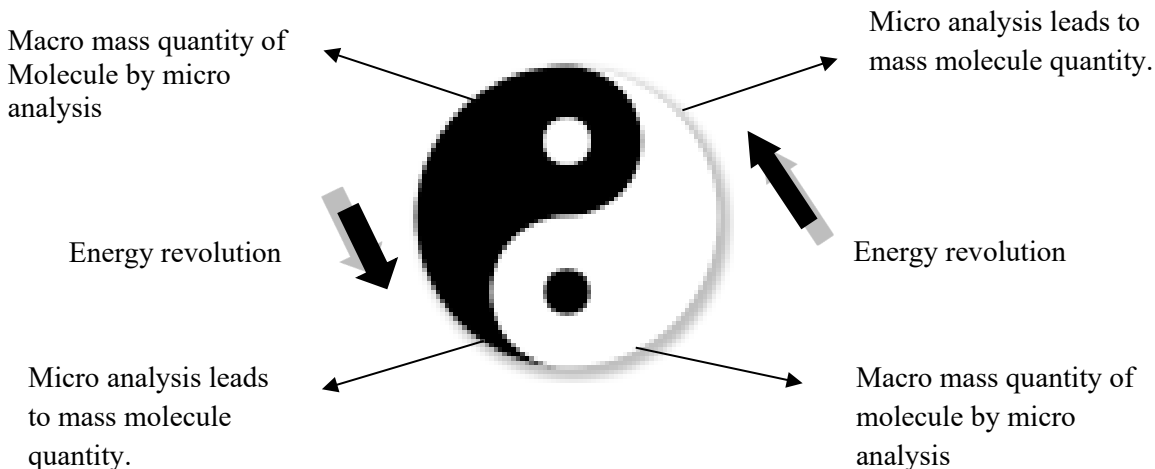
1. **Congenital energy** includes biological and defense power, which is inherited and constitutional. Under the microscopic view, the body's chemistry analysis appeared with huge macrocosmic numbers. The human body is a single biological unit but comprises sixty trillion molecules. Blood vessels in the human body could extend to more than seventy thousand miles of the entire body to carry nutrition and oxygen, called the flow of the Chi or Ki.

2. **Acquired energy**, which is cellular function maintained after birth, and ingest nutrients with a natural lifestyle to uptake defense mechanisms to fulfill the individual's life span. However, the choice of an individual's lifestyle may hamper acquired energy.



## The source of two segmental energy

As symbol marks of Yin / Yang originated in China in 1070, by Cheng-Zhu Confucianism, the concept later adopted by Korea indicates that the Comma or Paisley shape approach to a micro then connects to the macro to another end. When minimal analysis, the human body leads to a macro arithmetic number of molecules. Therefore, the ancient medical context explains that the human body is a small universe. The Earth's rotation revolves on its axis, and the Sun's orbital motion is **counterclockwise**, indicating **productive movement** according to the Classical context.



In the book "Composition of Yellow Emperor," Chapter 13, Change of Sprit & Chi, in 605 A.D., China, describes an interview between Dr. Chi-Po and the Yellow Emperor. The Yellow Emperor asked Dr. Chi-Po, "I would like to know why illness used to be cured or improved by chant and prayers. Dr. Chi-Po answers the emperor, "The reasons for less response to treatments are the people used to get along and harmonize with nature and spend a calm life in the old days. Recently, even doing surgery, massive medications, and acupuncture.

Evil-Chi goes more deeply into the body." to remove Evil-Chi from the body, still having difficulty improving people's condition. Probable reasons may be a change in lifestyle, such as overworking, much emotional burden, duty call stress, and feeling of rushing are common and increasing.

That was written in the Six Dynasties (A.D. 605). We should realize that if it compares to the current modern digital days that change our lifestyle, how much we accumulate daily stress is immeasurable. It is difficult to resolve an illness or disease based only on the classical Yin-Yang, and the five internal organ theories of monotheism alone should shift to dualism. The general understanding of STRESS is "Things you don't want to do, but you have to do."

# **The Four Essential Biological Energies in the human body**

*Four types of congenital biological natural energies exist in the human body, a study on the interpretation of linkage with acupuncture and modern medical concepts.*

## **1. BIOELECTROMAGNETIC WAVE**

A bioelectromagnetic wave is a periodic disturbance propagating electromagnetic waves between cells. **The Biological electrical neuro passage is current (positive, Yan/negative, Ying) is -70 micro voltage electricity. The body is electroconductive matter with sixty metal molecules and sodium ions in the extracellular fluid. Applying an acupuncture needle (made of nickel and chromium) induces iontophoresis, which leads to electrophoretic action and passes a sensation to the sympathetic nerve.** However, we are constantly surrounded by massive electromagnetic waves from the universe, electrical devices, and ions in our daily environment.

## **2. BIO-PLASMA**

Bio-plasma is a high-temperature ionized gas that is electrically neutral to living matter. However, condensing all the flow of electric currents in the human body may produce 2 to 3 wattages of electrical energy. **Therefore, since the human body conducts electricity, piercing metal objects (acupuncture needles) into the body induces neuroelectron pumping.**

## **3. FAR-INFRARED**

It designates those invisible 25,000nm heat rays beyond the visible spectrum's red and a bio-electro wave. **The human body produces and emits far infrared waves, and hands-on body contact induces a sense of warmth. Feel of warmth Ki (Chi) with hands palpation to the body naturally soothe the sympathetic tension.**

## **4. BIO-PHOTON**

Bio-photon means a quantum of electromagnetic energy of living things (bioluminescence). It is a deoxidization process of the cell. The light catalyst of the tympanum reacts to the photon to expand the tympanic drum. **Our sense organ is sensitive to environmental light and controls one's moods.**

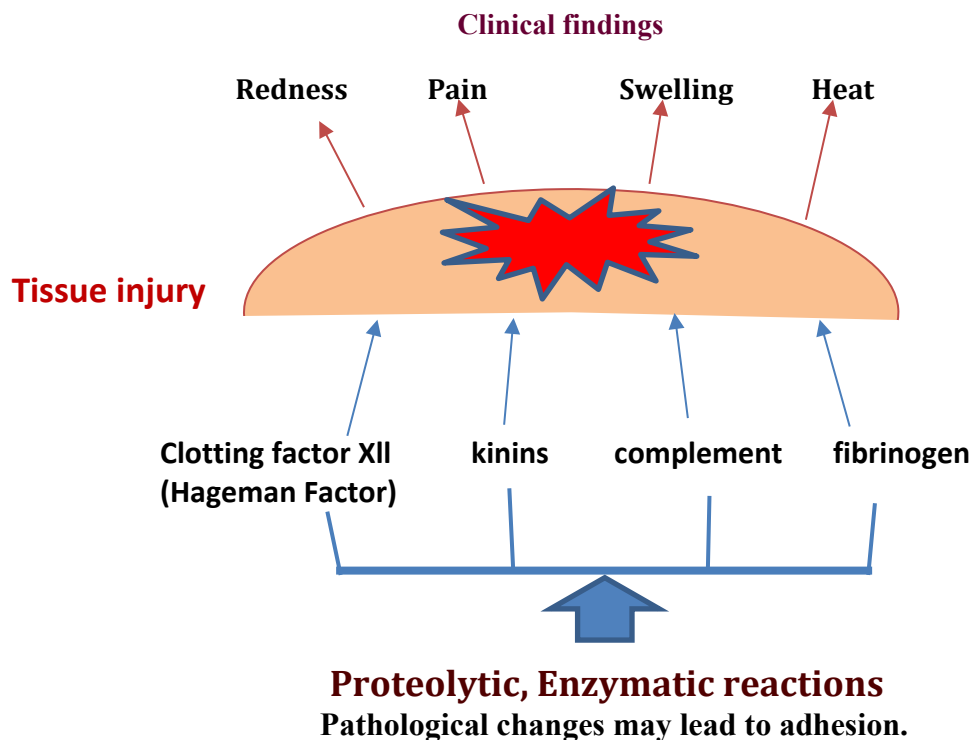
By applying acupuncture, the body automatically utilizes bioenergy to keep functional balances to retain homeostasis; acupuncture helps those processes by finding precise points and appropriate dosages that create the utmost effectiveness of the treatment.

Hashimoto /84

## Inflammatory Process

The inflammatory process, tissue injury, involves interlocking complements, clotting, fibrinolysis, kinin system, and adhesion. All of them are dependent upon proteolytic and enzymatic reactions. It is initiated in response to injury and is essential to the host's survival, leading to immunologic responses. This process comprises biochemical and microanatomical changes of the terminal vascular bed and connective tissues, eliminating the harmful agents and repairing the damaged tissues. Chronic micro-inflammation for years may lead to fibrosis, micro necrosis, and tissue destruction contributing to the loss of function and accelerating the aging process by lack of circulation. The presence of non-pathogens, autoimmune reactions, and viral infection may be the causative agent.

## Inflammation Response



Kinin is a highly bioactive polypeptide group derived from plasma precursors known as kininogen ( $\alpha_2$ -globulin). Kinin produces the most acute inflammation signs and acts as a vasodilator in the peripheral arterioles, increasing capillary permeability like Histamine.

## The tissue injury and the inflammation process

- i. Tissue injury results in increased permeability and dilation of blood vessels (erythema) in the injured region. Initiation of fibrin deposition via the clotting system occurs with the activation of Hageman factor (HF, clotting, or coagulation factor XII)
- ii. The deposited fibrin aids in trapping the harmful agents and platelets within the coagulum. It also increases phagocytosis by neutrophils and macrophages.
- iii. HF subunits formed by plasmin on activated HF activate pre-kallikrein by converting it to kallikrein (chemotaxis factor). The process stimulates blood leucocytes and plasma cells' emigration, and these cells contribute to phagocytosis and localized antibody synthesis.
- iv. Increases in blood plasma and accumulation of tissue fluids at the injured site occur (as seen in swelling edema) to elevate the local levels of the bactericidal serum factors (specific antibody, complement factors, kinin, opsonin). At the same time, the increase in fluids contributes to the dilution of the toxins formed.
- v. The appearance of non-specific acute phase proteins such as C-reactive protein (CRP) may occur, stimulating localized phagocytosis and activating or suppressing lymphocytes.
- vi. The physiological and biochemical alterations (e.g., an increase in CO<sub>2</sub>, decrease in O<sub>2</sub>, increase in body temperature, and accumulation of organic acids) that occur at the injury site may be harmful by invading bacteria.
- vii. Finally, tissue repair occurs following macrophage action with fibroblasts' appearance and collagen deposition.

Kallikrein = A proteolytic enzyme for the conversion of kininogen to kinin.

Opsonin = Substance in the blood serum that acts upon microorganisms and other cells, facilitating phagocytosis.

Chemotaxis = Attraction and repulsion of living protoplasm to a chemical stimulus.

PMN = Polymorphonuclear leukocytes, a type of immune cell. A white blood cell with a nucleus composed of two or more lobes or parts; granulocytes such as neutrophil, eosinophil, or basophil.

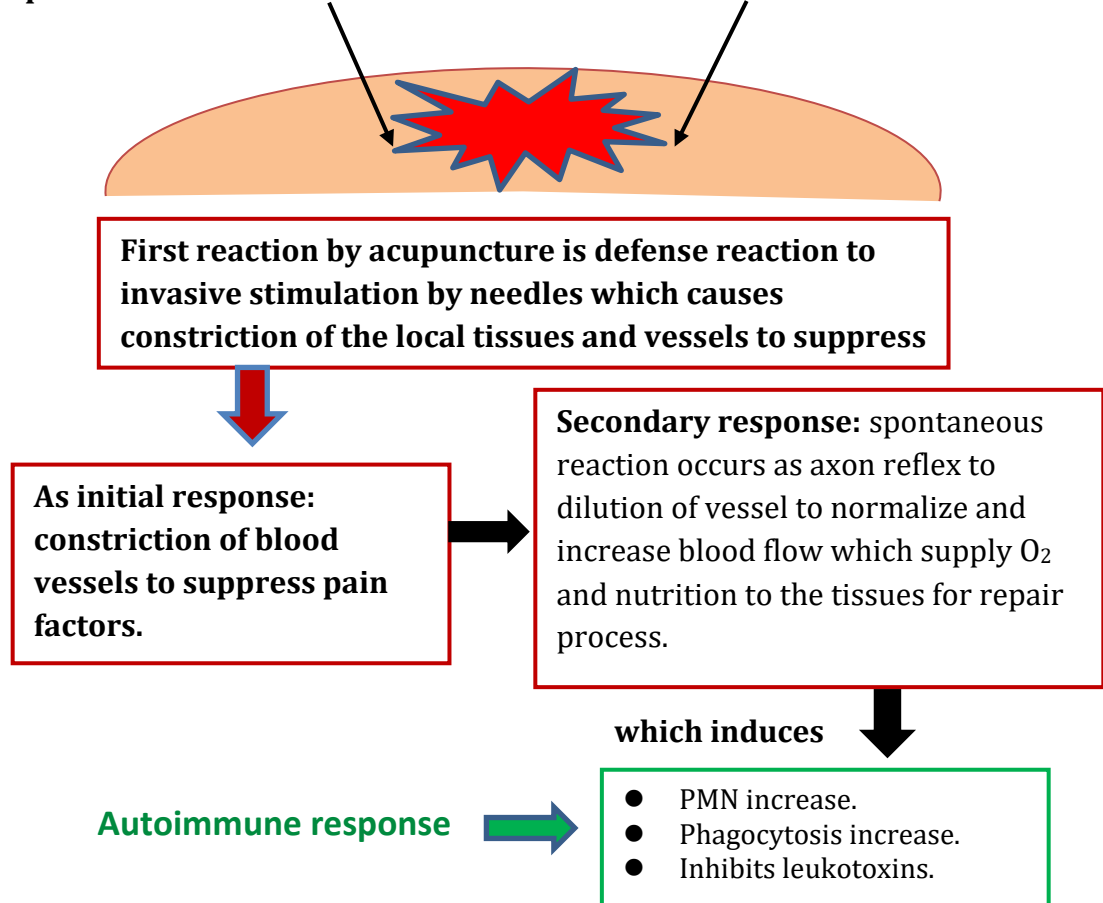
Serotonin = A vasoactive mediator similar to histamine found in mast cells and platelets in the GI tract and CNS.

*References:* Biochemistry, Bhagavan, Lippincott  
Bailey's Textbook of Microscopic Anatomy, Williams & Wilkins



## Acupuncture Mechanism on Inflammation

Acupuncture stimulation to the inflammation site where kinins activated.



## Acupuncture mechanism

- I. Invasive stimulation leads to defense reactions automatically. Stimulation by acupuncture induces constriction of tissues and capillaries by the initial defense reaction of the needle's invasive procedure to eliminate the pain factor called "kinin."
- II. Continuous acupuncture stimulation causes the secondary axon reflex to widen (normalize) the blood vessel to increase blood flow, oxygen, and nutrition.
- III. Increased blood flow also increases leukocytes (PMN) and phagocytosis and dilutes leukotoxins.
- IV. Acupuncture stimulation leads to muscle tone and nourishes tissues to promote collagen formations through hyperemia to supply O<sub>2</sub> and the tissue repair process nutrition.

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Hashimoto /86

# Integrative View on Physiological Effects of Acupuncture

## 1. REGULATORY FUNCTION

- Anti-spastic and analgesic function and sedate nervous system affect smooth and skeletal muscles.
- Stimulate vasomotor functions to constrict and dilate-dilation blood vessels by axon reflex and uptake neuro-electro nerve conduction -70mv.

## 2. REFLEX AND INDUCER FUNCTION

The piercing of an acupuncture needle, which is made of non-magnetic stainless steel (nickel, chromium) with or without manipulation to the neuromuscular region, induces an electro-neurological sensation called “Ki” (in Japanese) or “Chi” (in Chinese) response that reduces with correct points findings and adequate stimulation that reduces muscular constriction by electrolyte conduction.

- Induce Viscera-Cutaneous somatic reflex.
- Increased blood flow leads to hyperemia by secondary neuro axon-reflex and blood flow alteration of venous reflux uptake.
- Acupuncture increases the vasovagal action potential of blood flow.

*The decades ago, acupuncture needles are mainly made of of a silver alloy and or ten carats gold plated alloy.*

## 3. ANTI-INFLAMMATORY FUNCTION

Anti-phlogogenic effects are “cortisol” through vasomotor action without undesirable side effects like hydrocortisone.

## 4. MAINTAIN HOMEOSTASIS AND DYNAMIC EQUILIBRIUM

Anti-shock and anti-paralytic effects influence blood flow, leading to increased cardiac output, decreased blood pressure, increased white blood cells,  $\text{Ca}^{++}$ , and  $\text{Mg}^{+}$ , and may induce glycogen synthesis.

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## COMPOSITION OF MOXA (Mugwort)

**Botanical term:** *Artemisia Vulgaris*

**Mugwort harvested and used in China:** *Artemisia Argyl*, *Artemisia Princeps pamp*, *Artemisia lavandulaefolia*.

**Mugwort harvested and used in Japan:** *Artemisia Princeps pan panini*, *Artemisia Montana Panpanini*.

### COMPOSITION

**Essential oil:** 1,4- Cineol (Eucalyptol),  $\alpha$ -thujone  $C_{10}H_{16}O$ , Isoprene  $C_5H_8$ , Lupenone, Lupenyl acetate, Glutione, Fernenone,  $\alpha$ -amyrin acetate,  $\beta$ -amyrin acetate, 24-methyl-cyclopentanone, Simiarenol, Corrin (heterocyclic compound)

$\alpha$ -thujone:  $C_{10}H_{16}O$ , Molecular weight is 152.2, contains turpentine, ketone, a methyl group. It may induce sedative effects to break down in the liver, but excessive accumulation in the body (100mg/kg) may cause emetic and hallucination as a neurotoxin.

**Fatty acid:** Capric acid, Palmitic acid, Stearic acid, Ethyl palmitate, Ethyl oleate, Ethyl linoleate

**Organic acid and compound:** Trans-phenylitaconic acid, Adenine (6-amino-9H-purine)

**Wax substances:** Hentria-contane, Arachidonic acid

**Tannic acid:** Cattetannin

**Vitamins:** A, B<sub>1</sub>, B<sub>2</sub>, C, D

**Enzyme:** Amylase, Invertase, Catalase, Peroxidase



**Aroma essence:** Within *Artemisia Princeps*, 192 kinds of aromatic components were found by use of a Gas-chromatic Analyzer (GC-MS)

**Others:** Tar (carbonic), Fiber (67%), Protein (11%), Fat (4-5%), Mineral (4-6%)

**THERE ARE NO CARCINOGENICITY AND HARMFUL FUMES PRODUCED BY THE MOXIBUSTION PROCEDURE, BUT CAUTION THAT A PERSON ALLERGIC TO SMOKE AND HUMES MAY REQUIRE PROPER VENTILATION.**

#### *References:*

Research on Moxa, Yoshio Manaka 1976

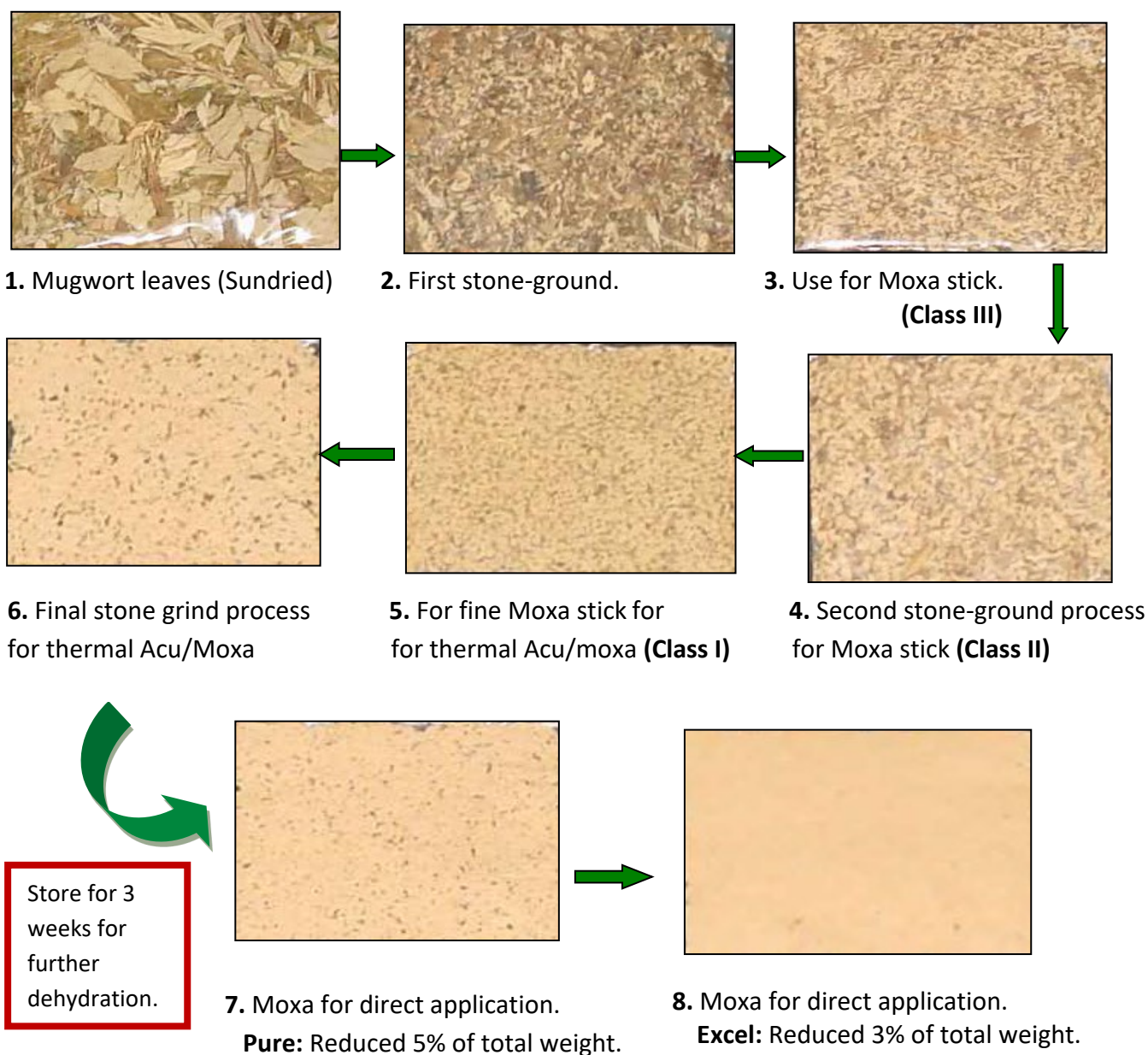
Clinical Application of Acupuncture, Kazushi Nishijou 2005

“Study of Polypeptide in *Artemisia argyi*” by Yamada-Journal of Medicine International, 1987

“A principal species of *Artemisia Montana*” by Okuda, Hatano, and Tani - Japan Pharmaceutical Journal, 1987

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## Refining Process of The Mugwort (moxa) Leaves



Harvest from June to August. It uses only sun-dried leaves, which reduce to 20% of the original weight, stored under 80-120C dry heat for eight hours, and ground with three types of stone-ground during winter to separate the moxa from the chaff grinding process. The usual yield of moxa production is only 30-50% and reduces moisture to 1-2% to produce moxa for stick and Acu/moxa.

- Sample of Moxa by Uchida Herbs Co. Japan 1964

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### Various Moxa Types for Different Applications





Pure moxa rapid heat application from the left photos is a positive stressor. In the middle, fine moxa for the “half-grain” cone presses down the application (inducing mild heat sensation) to regulate the autonomic nerve. At right, regular moxa for the “Thermal needle” procedure and moxa cone attached on top of an acupuncture needle is about 0.01oz or 0.34gm (these applications induce hyperemia and disperse chill disposition a body. The temperature of moxa heat is six hundred Centigrade, and the cigarette-burning temperature is around eight hundred Centigrade.

### **Implication and Production of Moxa**

The Chinese word “moxibustion 灸,” which is pronounced as “kyu” (Japanese) or “Chiu” (Chinese) and consists of two parts, namely, phonetics “久,” which pronounce as “jiu” (Chinese) and “Ku” (Japanese) “火” which pronounce as “Hou” (Chinese) and “Hi” (Japanese) has the meaning of fire. “久” means “long,” and “火” is the pictorial representation of flame and smoke from two burning pieces of wood. “灸” word indicates moxa's burning process that takes a long time to burn or as the treatment method. Moxibustion treatment initiated as a “cauterization” procedure but with a low dosage and rapid heat application may regulate autonomic nervous function. Therefore, moxibustion may require repeated treatment for allergic conditions, paralysis, and other chronic problems.

**Mugwort leaves (a family of Chrysanthemum) and Moxa are sun-dried for one week to reduce moisture to 10-15%, further reducing moisture to 4%. To eliminate bulky residue, repeat the stone grind process. Usually, the stone grinding for the refining process will be three to four times to select various classes and types of Moxa. Moxa is a store for 12 months until the color turns golden gray and is ready to use. Residual moxa particles are used for an incense stick, and vermilion ink and Chicken firm are used in the diet for anti-diarrhea. The superior quality moxa produced only 5-10% of the harvest. Mugwort is an Antipyretic, Vermicide effect, Diuretic, and Hemostatic internal herbal remedy.**

### **Moxibustion Affects the Inhibition in the Central Sensory Pathway**

The moxa stimulation on the skin subsides, underlining inflammation and anodyne mild referred pain. Minimal cauterization may induce the production of histotoxine, which may increase lymphatic cells in the tissue. Moxa's incoming cutaneous stimulation as a counterirritant lowers the spinothalamic neurons' threshold to receive afferent messages from somatic regions.

#### *References:*

- “Materia Medica” Compile Committee of the People of the Republic of China 1998
- “Study of Volatile Component of the Moxa” by Lee, Kokusei, China, 1990
- “Studies on the Constituents of Artemisia Argyl Levi et Vant” by Lao, Fujimoto, Tatsuno, 1983
- “On the Composition of some oils from Artemisia vulgaris” by Plant Medical Journal, Nano, Bicci, Frattini, 1976

### **PHYSIOLOGICAL EFFECTS OF MOXIBUSTION**

1. Increase serum WBC counts.
2. Increase the activity of macrophages.
3. Induce hyperemia.
4. Increase  $\text{Ca}^{++}$  in serum.
5. Enhance immune function as a positive stressor.
6. Regulate the endocrine system through stimulation of the autonomic nervous system.
7. Enhance prothrombin (blood coagulation) action.
8. Works as a counter-irritant and masks superficial pain.

### **DOSAGE OF DIRECT OR INDIRECT MOXA APPLICATIONS**

**Determine the moxa cone size and the number of the application.**

1. Consider the patient's chronological aspects and medical histories, such as DM and HBP.
2. Consider the patient's body's constitution (Excess or Deficiency).
3. Patient's experience with moxibustion treatment.
4. Evaluate the patient's occupation and related stress (labor work or more mental tasks involved).
5. Dosage according to present symptomatology.
6. Determine acute stages or chronic conditions.

### **APPLICABLE POINTS**

1. Regular acupuncture points.
2. Extraordinary somatic point or relate to the regular Meridians.
3. Ashi points (Trigger points) where pain is detected by digital palpation.
4. Applicable for deep pain with digital palpation (Deficiency type).
5. Point (s) or area the patient experiences paresthesia (abnormal sensations) or chillness.

### **CAUTION BEFORE APPLICATION OF MOXIBUSTION**

1. Low dosage application for patients with an empty stomach.
2. Avoid application immediately after a meal (recommend at least 2-3 hours after a meal)
3. Refrain from alcohol consumption on treatment day.
4. Early pregnancy period (applicable after four months).

**To moist control, use a microwave oven for a few minutes, store it in a tin can, or leave it for a few hours under direct Sun.**

#### *References:*

"6-methoxy-7,8-methylenedioxycoumarin from *Artemisia dracunculoides* & *Artemisia vulgaris*" by Murrar, Stefanovic-Journal of Natural Products, 1986

"Eudesmanolides & other constituents from *Artemisia argyi*" by Renxiang, Zhongjian-Medical Plants Journal, 1992

## Study of Press down Application or Direct Moxibustion

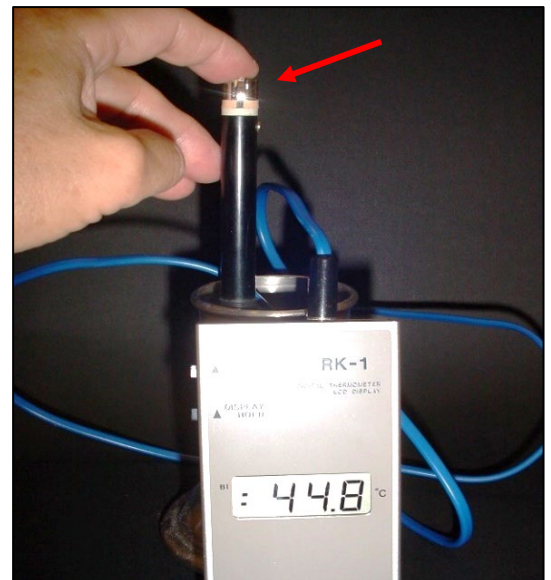
High techniques require applying the moxa cone to a half grain with an adequate fine thread size. Half-grain size Moxa cone's complete burning temperature is up to 115C (239F) - 120C (248F) degrees. This cauterization procedure uses scarring to induce the production of Histotoxine to a conjugate of white blood cells in the local bloodstream.

The direct cauterization procedure is not recommendable, especially for diabetic children with thinner skin or allergies to burning skin.



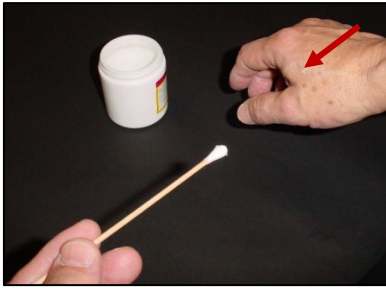
Alternative modernized battery-operated Moxibustion applicator BANSHEIN used DC6V/2W with heat set 60Celsius. (Chuo, Co. Japan)

When fingertip pressure has been applied on top of the moxa cone to extinguish 80% of the burn, a fingertip feels temperature on the skin surface at 44C (112F) - 45C (113F) degrees, which induces a mild heat sensation to the patient's skin and not causes burning damage to the skin. A temperature up to 60C (140F) is a good heat sensation to stimulate the autonomic nervous system; applying a moxa cone as the grain is necessary. Repeating direct moxibustion three to five times at the acupuncture point may be recommended for a patient without deep nerve response or paresthesia to regulate autonomic nerve function.

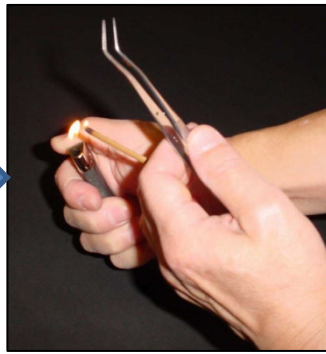


(Temperatures measured by Digital LED thermometer)

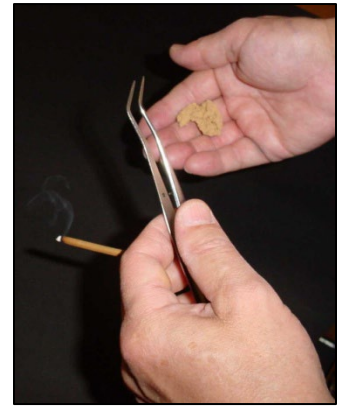
## Order of Direct Moxibustion by Hashimoto



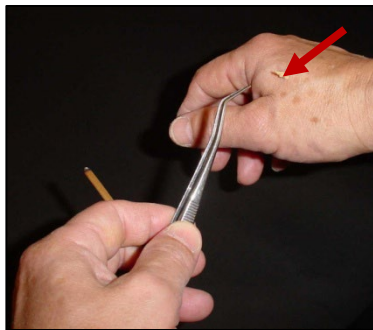
- 1.** Apply antibacterial ointment thinly on top of acupuncture point with cotton applicator.



- 2.** Hold forceps in dominant hand with thumb and index finger. Hold incense stick between index and middle fingers to lit.



- 3.** Hold a lump of fine moxa.



- 6.** Place moxa cone on the acupuncture point.



- 5.** Pick up moxa cone with forceps.



- 4.** Hold small piece of moxa in opposite hand and slide in between index and middle fingers to rolling.



- 7.** Ignite Moxa cone with incense. Prevent to avoid Moxa cone to stick with incense, rolling motion can be applying.



- 8.** When Moxa cone burn to two-thirds, before reach to the skin, apply fingertips or end shaft of forceps to extinguish. This procedure causes instant heat without burn or scarring.

- 9.** Then remove residue of burnt moxa cone with forceps and wipe with antiseptic or alcohol swab.





## **Review of Asthma (airways obstructive bronchial asthma)**

The recurrent acute or chronic attacks are accompanied by dyspnea, cough, and mucoid sputum, usually associated with wheezing.

### **Pathophysiology:**

Continuous perfusion of the under-ventilated lung leads to ventilation and perfusion imbalance, resulting in hypoxemia with a slight change in arterial pH or PaCO<sub>2</sub>. It narrows the large and small airways due to bronchial smooth muscle spasm, edema and inflammation in the bronchial mucosal wall, and tenacious mucus production resulting in decreased alveolar ventilation. Further progression of the attack increases airway narrowing and muscular fatigue. Arterial hypoxemia worsens, and PaCO<sub>2</sub> rises, leading to respiratory acidosis and causing respiratory failure.

1. **Inherited** (Non-atopic intrinsic asthma and non-immunological stimuli involved)  
30-50% of patients with non-allergic factors (e.g., Viral respiratory infection, irritants, such as exercise, emotional upset, inhalation of chilly air, gasoline fumes, cigarette smoke, paint or other noxious odor, changes in barometric pressure or temperature “wind-cold,” or “dump-heat.”)
2. **Allergic** (Atopic extrinsic asthma and immunological stimuli)  
10-20% of the patients are triggered by allergenic exposure, commonly airborne pollens, molds, house dust, barometric pressure changes, and animal skin dandruff.

## **Integrative review**

### **Shi Type constitution: (“Jitsu” Excess, Wind-cold)**

Chronic sinusitis, bronchiectasis, hypertrophied tonsils, and adenoid in a child induce acute bronchitis. The prognosis is good, but the critical complication is pneumonia.

### **Xu Type constitution: (“Kyo” Deficiency, Lung & Kidney)**

Chronic bronchitis (COPD; chronic obstructive pulmonary disease) is prolonged exposure to nonspecific bronchial irritants accompanied by mucus hypersecretion. Pulmonary emphysema is defined as the enlargement of the air spaces to bronchioles with destructive alveolar walls and destructive changes. However, not all emphysema patients have adequate airway obstructive problems to be considered COPD.

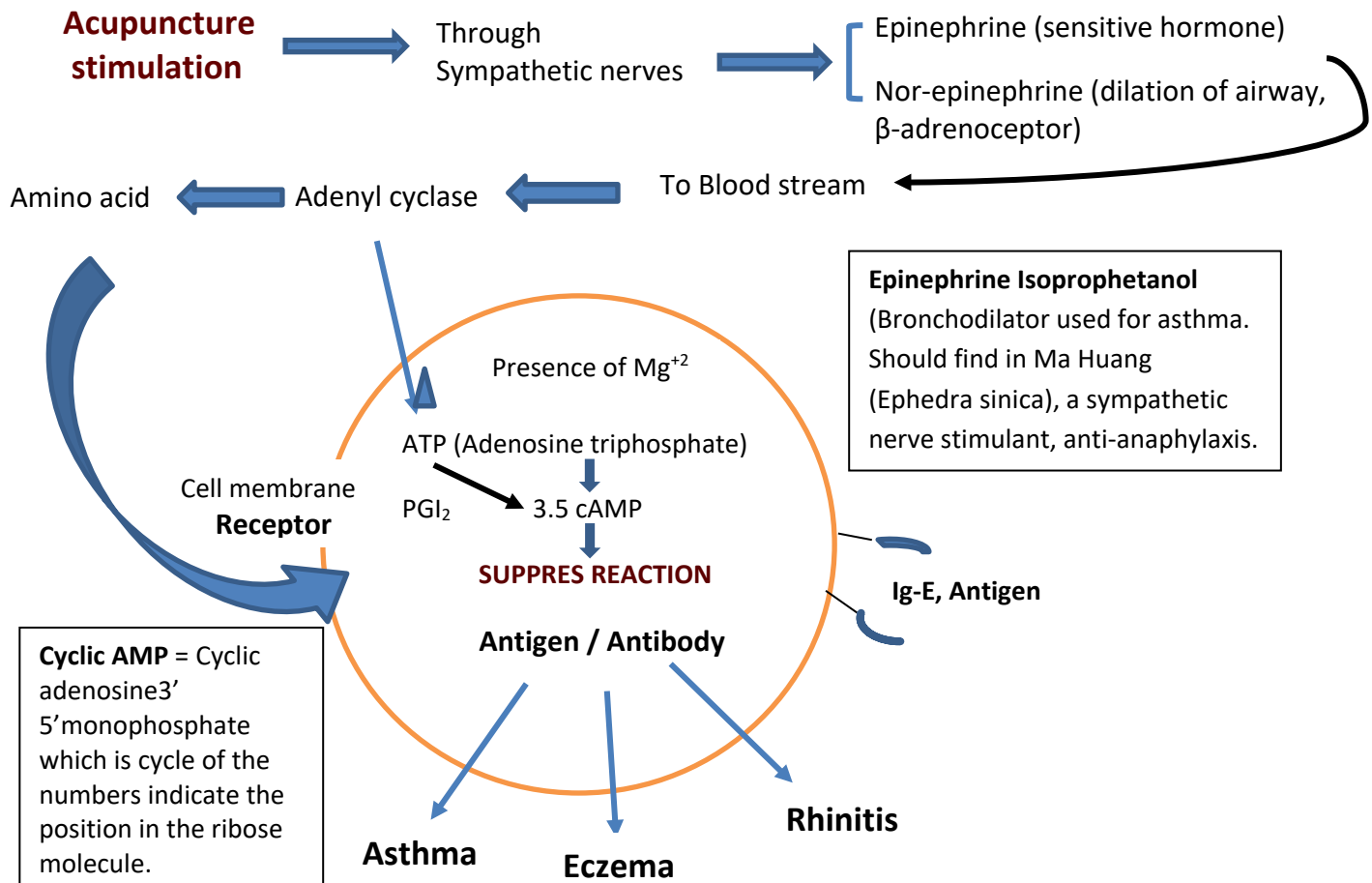
There is a complicated relationship between COPD with an emphysematous disease, bronchial disease, mixed-type disease, and COPD patients with neither bronchitis nor emphysema.

**Shi (Chinese), Jitsu (Japanese) = Excess type of body’s constitutions**

**Xu (Chinese), Kyo (Japanese) = Deficiency type of body’s constitutions**

## Acupuncture Effects on Asthma and Allergy

Our body has a self-defense mechanism (immune system) from external exogenous stress. It produces antibodies against the invasion of bacteria, viruses, fungus, and balances antigen-antibody inter-reactions. Most allergies are caused by type-1 hypersensitivity, other allergies type-2 or 3, mast cells to allergens, inflammation mediated by complex imbalance reaction of antigen (Ag) and antibody (Ab) induce leucocytes harm to membranous tissues.



The oriental medical context explains that allergic reactions result from a lack of self-protect energy flow maintained by the nervous and circulatory systems (Meridian). Acupuncture stimulation affects the autonomic nervous system, increasing neurotransmitters and enzymes to suppress the endo-exogenous factor that induces allergic reactions such as asthma, eczema, and rhinitis.

Ig-E = Immunoglobulin (gamma E) is an antibody for respiratory problems.

$\text{PGI}_2$  = Prostaglandin, which derives from arachidonic acid, vasodilatory & inflammatory response.

## Review of Immunoreaction

### **ANTIGEN (Ag)-ANTIBODY (Ab, Immunoglobulin):**

Antibodies produced by plasma cells in lymphoid tissue may be present in the previous infection, vaccination, transfer from mother to fetus in utero, and other unknown antigenic stimuli.

An antigen is a substance that induces antibodies such as bacteria, toxins, foreign blood cells, and tissues.

### **COMPLEMENT (Complement system):**

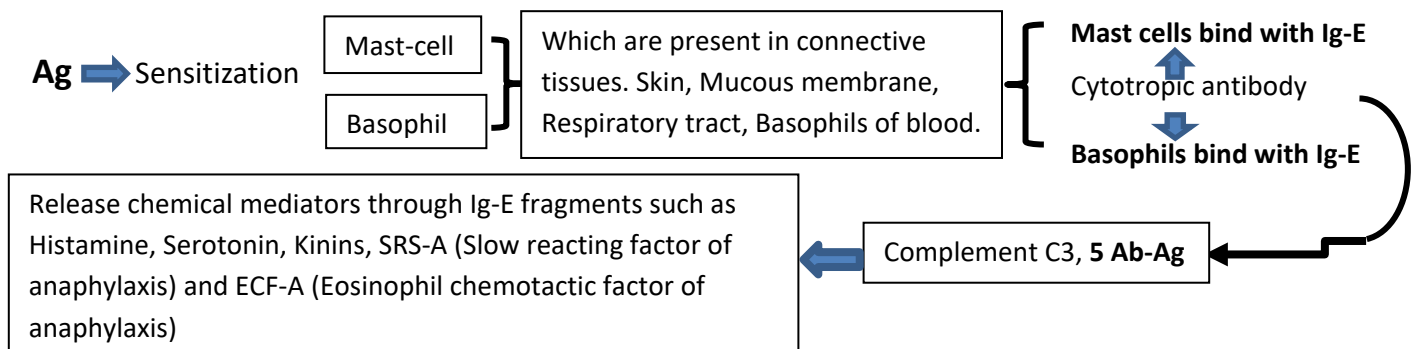
When antigens combine with circulating antibodies, cells lyse, bacteria opsonized, leukocytes attract the antigen, and histamine releases the blood elements. A system of plasma enzymes mediates these effects called the **complement system**.

The number C1 identifies the enzymes to C9. C1 comprises three subunits, C1q, C1r, and C1s, so the system has eleven proteins. C3 and C5 fragments release histamine from granulocytes, mast cells, and platelets. Histamine dilates blood vessels and increases capillary permeability, inducing allergy reactions.

### **TYPE OF ANTIBODY (Immunoglobulin):**

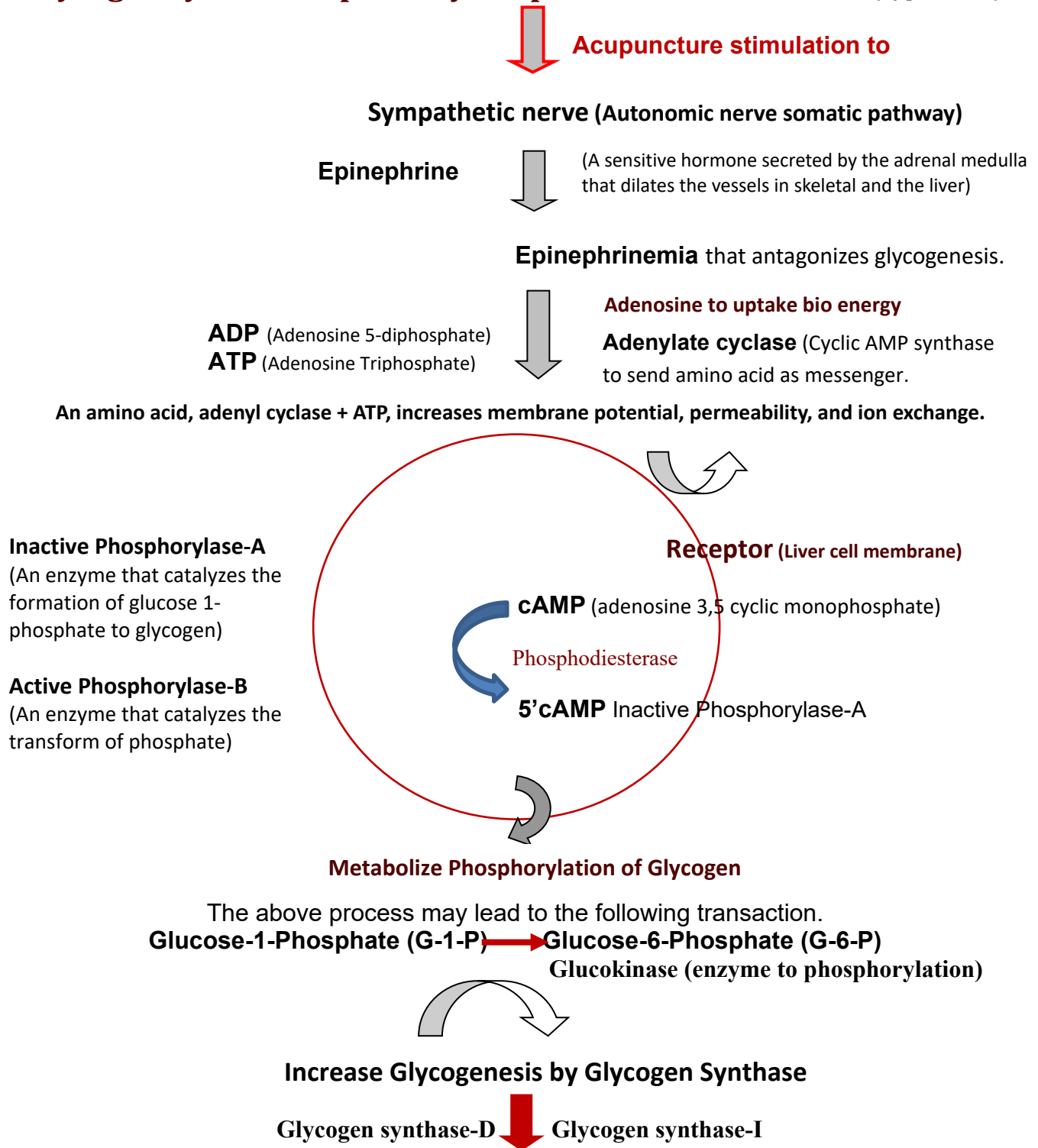
1. **Ig-G (1-4):** Rheumatoid factor (antibody) may be associated with Ag-G. The principal immunoglobulin in human serum is 80 – 85% of the placenta circulating in the blood.
2. **Ig-A (1-2):** The principal immunoglobulin in exocrine secretions (mucosa cells).
3. **Ig-M:** A globulin formed in every immune response during an early reaction. The most significant molecules are immunoglobulin and rheumatoid factors roles.
4. **Ig-E:** A gamma globulin produced by the respiratory and intestinal tract cells. The lowest level and shortest survival time in serum. Allergic variety.
5. **Ig-D:** A rare myeloma protein present at 0.25% in normal human serum. No significant biological or clinical function has been attributed yet.

### **IMMEDIATE HYPERSENSITIVITY**



**An allergic response occurs within minutes of Antigen-Antibody, a serum transfer to induce anaphylatoxin (complement peptide).**

## Glycogen Synthesis Uptake by Acupuncture Stimulations (hypothesis)



**Therefore, acupuncture stimulations that cause elevated glucose catabolism in the serum may induce energy uptake.**

*Reference :* Biochemistry: Bhagavan, Lippincott Pub.

Review of Medical Physiology: W.F. Ganong, Lange Pub.

Correlative neuroanatomy & functional neurology: J.G. Chusid, Lange Pub.

Microscopic anatomy: Kelly, Wood, Enders, Williams & Wilkins Pub.



## **Fibromyositis or Fibromyalgia**

### **Tendency to the syndrome:**

Characteristically, a sensitive person is psychologically discouraged by scolding or being reprimanded in their childhood.

With digital palpation, a muscle kink or hard nodules are apparent in the nape region around the splenius capitis muscle and a group of rhomboid major and minor muscles. Involved nerves are Lesser occipital and Spinal roots of accessory nerves supply under Sternocleidomastoid muscles, which may trigger temporomandibular joint pain (TMJ) with headache. **Usually finding muscle kinks or bulges is associated with pain by digital pressure on the surface of BL-10, or GB-20 region.**

**A surge of Neutrophils likely causes mild or complex bulging tissue inflammation to increase myeloblasts by aging, stress and accumulated tension, and Eosinophil uptake in a person with a chronic allergy condition.**

In the acupuncture finding, bilateral points on BL-10 and GB-20 are related.

### **Direct Acupuncture Points:**

#### **BL-10: (天柱 Pole of the Heaven)**

In the posterior region of the neck, at the same level as the superior border of the spinous process of the second cervical vertebra in the depression lateral to the trapezius muscle.

The occipital artery and vein. The great occipital nerve.

#### **GB-20: (風池 Pond of the Wind)**

In the anterior region of the neck, inferior to the occipital bone, is a depression between the origins of the sternocleidomastoid and the trapezius muscles.

The branch of the occipital artery and vein. The branch of the lesser occipital nerve. Aim palpable node or kink with perpendicular acupuncture depth of 0.5 to 10mm to induce Vaso-motor reflex to hyperemia.

An additional measure to locate irritation of the sympathetic nerve is NEPP, Nakatani Electro permeable points of the sympathetic nerve supply area with 12 micro voltage probes on a surface of the skin to measure.

Advanced treatment can be applied with direct electrical stimulation to increase myoelectric potential or low-frequency wave nerve stimulator apparatus.

Mike M. Hashimoto, D.Ac.

# Acupuncture Effects on Hemodynamic Status Based on Forty Cardiovascular Cases with ICG Measurement

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## **ABSTRACT**

Heart disease has been the leading cause of death over the past decade (Miller & Missov, 2001). 550,000 (Ho, 1993) new heart failure cases are diagnosed in the United States each year. The 5-year survival for all patients with heart failure was 50 %. Among the subcategories of heart disease, the prevalence, morbidity, and mortality from Congestive heart failure (CHF) are still increasing. Thirty percent of CHF patients were re-admitted to the hospital three months after being discharged for CHF (Polanczy et al., 2001). Coronary artery disease is also strongly associated with end-stage renal disease. Heart failure was present in 38 – 40% of patients with end-stage renal disease (Al-Ahmad et al., 2001; Stack & Bloembergen, 2001). Heart failure compromises a patient's functional capacity and composes a significant burden on society (Diller & Smucker, 2000). CHF's estimated cost ranges from \$ twenty-one to \$ 50 billion annually (AHA, 2001). The estimated annual cost of laboratory, medications, and professional fees is \$4,000 per patient. Acupuncture treatment has been used for Hypertension related symptomatology such as single or complex "headache," "dizziness," "nervousness," "epistaxis," and "excitements" before the discovery of "High Blood Pressure" by Harvey (1628) and Malpighi (1657).

## **SPECIFIC AIMS**

1. To examine the immediate effects of acupuncture on cardiac output, in New York Heart Associations' (NYHA) Classification II or III patients with heart disease.
2. To examine the immediate effects of acupuncture on peripheral vascular resistance.
  - a. Acupuncture refers to the points of PC-6 and LR-3. One-time acupuncture retains for 15 minutes will apply.
  - b. Cardiac output (CO) [1/min]: The heart's total blood volume is pumped in one minute. The normal range for adults is 4.5 – 8.5 liters per minute. The formula estimates cardiac output:  $CO = SV * HR$ , measured with an **Impedance Cardiograph (ICG)** device.
  - c. Cardiac Index (CI) [ $1 \text{ min}^{-1} \text{m}^{-2}$ ]: The value of Cardiac output indexed by the Body surface area. The usual range of resting adults is 2.5 – 4.7  $\text{min}^{-1} \text{m}^{-2}$ ; the mean value is 3.61  $\text{min}^{-1} \text{m}^{-2}$ . The Cardiac Index is estimated by the  $CI = CO/BSA$  formula.

- d. Body surface area (BSA) [ $\text{m}^2$ ]: BSA is estimated by the Du Bois & Du Bois formula to be:  
$$\text{BSA} = W^{0.425} \times H^{0.725} \times 0.007184$$
, where H is the patient's height in cm, and W is their weight in kg.

This noninvasive ICG provides hemodynamic parameters based on the measurement of thoracic electrical bio-impedance. These hemodynamic parameters include left ventricular ejection time, mean arterial pressure, pulmonary artery occluded pressure, pre-ejection period, stroke volume, systemic vascular resistance, systemic vascular resistance index, systolic time ratio, and velocity index.

### **To examine the immediate effects of acupuncture on peripheral vascular resistance.**

- a) Acupuncture refers to the same technique and procedure in the SPECIFIC AIMS.
- b) Peripheral vascular resistance refers to the ratio of mean arteriole pressure to Cardiac output. ( $R = P/F$ ) which will be measured with an Impedance Cardiograph (ICG) device.

### **The study hypothesis is:**

**H1:** One-time acupuncture at acupoints (PC-6, LR-3) for 15 minutes may increase cardiac output.

**H2:** One-time acupuncture at acupoints (PC-6, LR-3) for 15 minutes may decrease peripheral vascular resistance.

### **Selective acupuncture points by WHO Standard Acupuncture Point Locations 2008**

#### **The significance of this study: A literature review**

To the literature review, acupuncture's therapeutic effects on some types of coronary heart disease indicated clinical evidence (Longhurst, 1998). Bilateral PC-6 point significantly improved regional myocardial function by inhibiting the pressor response evoked by bradykinin (Chao et al., 1999). The bradykinin mechanism in the cardiovascular system elicits a cardiovascular reflex response that significantly increases arterial blood pressure and heart rate and normalized systolic wall thickening of the left ventricle. Laboratory records, including electrolytes, EKG, and chest X-ray, will be evaluated within one month. Echo cardiograms and treadmill findings are optional. Patients diagnosed with New York Heart Class II or III are eligible for participation. The following individuals will exclude malignant hypertension, primary pulmonary hypertension, nephroangiosclerosis, pregnant women, patients with stroke, angina at rest, Class NY IV, pulmonary edema, more than the second degree of heart block, severe hypertension (systolic pressure  $\geq 200\text{mm Hg}$ , or diastolic pressure  $> 120\text{mm Hg}$ ).

**Selective in Gender, Minority, and Child:** People of any ethnic background who meet the eligibility criteria will be recruited to participate in this study. Children or individuals under 20 are excluded because CHF's prevalence (Congestive heart failure) in this age group is extremely low (Miller, 2001).

**Equipment Setup:** The Impedance Cardiograph device is used to measure cardiac output. Peripheral vascular resistance is a noninvasive device with the trade name “BioZtect” (Cardio Dynamics International Corp.), which measures physiological changes in impedance by injecting a high frequency (60 kHz Minimum), low amplitude (4.0 mA RMS Maximum), alternating electrical current through the thorax between a pair of sensors placed on the neck and another team put on the mid-axillary line at the xiphoid process level. There are no thermal effects to tissue, thus no sensation to the patient—the acquired analog impedance signal and diagram of eight electrode placements.

### **ACUPUNCTURE IS A SAFE MODALITY PROCEDURE**

Acupuncture is a therapy that involves techniques of piercing the skin, typically by solid stainless steel, EOG sterilized disposal acupuncture needles with an application of manual or electrical stimulation on specific points. Participants will still take routine medicine such as ACE, diuretics, and digitalis. The occurrence of adverse in acupuncture is shallow (NIH, 1998). Auto infection and contaminations are rare. The basic idea underlying acupuncture is to control, regulate, and maintain the flow of vital energy and physiological function based on Oriental medical and biomedical concepts.

Acupuncture can decrease blood pressure in hypertensive patients by partially decreasing renin secretion (Chiu, 1997). Acupuncture points, Pericardium 6, and Liver 3 direct stimulation with five seconds Miltex tuning fork touched and placed needles for twenty minutes lead physiological effects on the cardiovascular function by influencing arterial pressure, end-diastolic volume, heart rate, stroke volume, cardiac output, and end-systolic pressure (Syuu et al., 2001). Pericardium-6 (PC-6) and Liver-3 (LR-3) are the source point and coupled point for the Heart Meridian (Dale, 1996). PC-6 is located between the flexor carpi radialis tendon and the palmaris longus muscle in the flexor digitorum superficialis manus muscle and its deep position in the flexor digitorum sublimis muscle.

LR-3 is located between the first and second metatarsal bones, in the depression distal to the junction of the two bones' bases, over the dorsal pedis-artery, supplied by the median artery vein and the anterior interosseous artery and vein of the forearm, provided by the medial and lateral cutaneous nerves of the forearm. Below the point is the median nerve and its deep position, the forearm's anterior interosseous nerve.

Repeat ICG every 5 minutes with continuous measurements for the immediate response and apply six of ICG. Participants will check to return to the clinic in two weeks to measure two ICGs.' These ICGs' results will be used to evaluate the intermittent response to acupuncture.

There are no laboratory procedures in this study and self-report interview measures.



**Anticipated problems and their solution:** Acupuncture may induce bradycardia managed with CPR at the clinic site. Acupuncture may cause hypotension, which is resolved with IV. The clinic is well-equipped for cardiac emergencies, including AED. Some participants may develop paradoxical hypertension, and the clinic is ready for emergency medicines in the crash cart. The case study will be conducted under observation by the cardiologist.

### Acupuncture Cardio Research Crew

Pon-Sang Chan, M.D., Cardiology,  
Cardio staff RN, and Master Nursing course student of UH.  
In cooperation with: Prof. Chen-Yin Wang, R.N., Ph.D.  
at UH Manoa



Impedance Cardio Graph (ICG)



Review and recording data.



Processing the data.



Application of acupuncture needles #0.18x40 (Sharp), less than 0.5-0.8 cm depth with 40–45-degree angle on PC-6, (P-6) and LR-3, (Liv-3) retain for 20 min, three seconds stimulation with 64C tuning fork (Miltex) with Taylor 2.0 hammer (MDF)

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## **CASE STUDIES on seven Postmastectomy** **Clinical Review on Post-surgery Pain of Breast Cancer**

*(from 1985 – 2001 records)*

*Acu/moxa as positive stressors that improve post-surgical problems of ductal carcinoma in situ and post-mastectomy patient's care for the quality of life.*

60,000 American women are diagnosed with early-stage breast cancer every year, killing 46,000 and 1.7 million new cancer patients annually, and the fatality rate is 18-19% annually. In Hawaii, 5,000 residents are diagnosed with cancer every year. One-third of the people we are looking at will get cancer in their lifetime. One in every four will die from it, and cancer will increase by 1 % yearly due to our aging population. Native Hawaiian women have the highest death rate from breast cancer of any ethnic group.

*-The Honolulu Advertiser, 2010*

However, about 1% of men are diagnosed with breast cancer, but treatment delay is usual due to discovering that breast cancer is only for women's diseases.

Myalgia in breast cancer causes radiative pain in the axilla, shoulder, and neck region. Occasionally, a patient's symptoms resemble cervical-brachial syndrome. As written, patients who experience fibrocystic disease in the breast are three times more likely to develop breast cancer and slightly elevated with mastitis in later life. Acu/moxa care is effective for nociceptive pain, such as dull ache, pressure, throbbing, and metastatic cancer-related pain, in the case of arthralgia or arthritic pain induced by an elevation of calcitonin (a polypeptide hormone involved in calcium homeostasis) by carcinoid tumor, which hampers hydroxyproline (hydrolytic collagen) into the matrix and inhibits bone resorption. Acupuncture stimulates sensory neurons within a sympathetic nerve to activate  $\alpha$ -receptor of the smooth muscle; this causes the capillaries and tissues to constrict and suppress the activity of bradykinins, Substance P., which are derived from the sensory nerve, and inflammatory cells such as macrophages, eosinophils, lymphocytes, and dendritic cells act binding to the neurokinin-1 (NK-1) receptor.

**Acupuncture and moxibustion effect as positive stressors to improve the balance of the autonomic nerves ductal carcinoma's post-surgical problem, including post-mastectomy patients' chemotaxis phenomenon to relieve pain since acupuncture suppresses nociceptive responses.**

Breast cancer elevates the levels of calcitonin (a polypeptide hormone involved in calcium homeostasis) in plasma and suppresses hydroxyproline (hydrolytic collagen) into a matrix and decreases  $\text{Ca}^{++}$  in the bone; this could lead to osteoporosis and osteopenia, which results in the deficiency of kidney yin and may induce arthritis. Combining general acupuncture and moxibustion application on selective points may improve the symptoms of loss of appetite and nausea by chemotherapy and integument problems by irradiation therapy and improve the patient's psychological status by increasing 5-HTP activity. Applying superficial moxibustion to induce LPF (leukocyte promoting factor) antagonizes irradiation and chemotherapy action of WBC depreciation. The toxification method of acupuncture and moxa application to regulate the autonomic nervous system increases hyperemia and pain control and maintains homeostasis.

There were seven postoperative breast cancers, except for the case of #2680, patients in the past two and a half years. Treatment with combined acupuncture-moxibustion procedure increases a cancer patient's Chi (motivational movement through blood circulations) through convergence and facilitation and tonification effects, uses 17 Acupuncture, moxa combination points at GB-21, GB-22, CV-13, CV-17, BL-13, BL-17, BL-20, BL-43, ST-16, ST-18, ST-36, SP-21, SI-11, LR-14, SP-21, GV-12, GV-13, and herbal prescription to improve patient quality of life.

**General:** There were seven cases of post-mastectomy care.

**Treatment Standards:** Standard acupuncture and moxibustion office procedure.

**Therapeutic Methods:** All the points were selected bilaterally, and the patient treated was in a supine, recumbent, and prone position. The Acu/moxa procedures used the EOG sterilized "SHARP" brand, filiform acupuncture needles of 0.35mm x 40mm and 0.25 x 50mm with stainless needle guide tubes. Moxa (Excel class by Uchida, Japan) for the application of "thread shape" and "half a grain" size moxa cones.

**Prognosis:** An axon reflex is a secondary reaction of acupuncture stimulation to normalize constricted vessels' diameter by initial acupuncture application, induces hyperemia, and repair damaged tissue. Chemotherapy agents or CINV toxins cause emesis to affect CTZ (chemoreceptor trigger zone) of the fourth ventricle's lateral walls near the obex central canal permeable to many substances the underlying medulla acupuncture effects ant emetic. Seventy percent of patients fall relaxed in fifteen to twenty minutes of acupuncture and moxibustion procedure by elevating serotonin (5-Hydroxytryptophan) as positive stress induction of tranquilizing effects in similar animal sleep mechanisms. However, acupuncture's role in prostaglandin's dynamic level ratio remains determined.

CINV = Chemotherapy-induced nausea & vomiting

Regarding Myo-spasm, acupuncture stimulation may cause inhibition and facilitation at synapses by depolarization of the postsynaptic cell membrane through a sodium-potassium pump, passing afferent fibers from the muscle spindle (stretch receptor) to induce EPSPS (excitatory postsynaptic potential) in motor neurons for the protagonist muscle action then leads to IPSPS (inhibitory postsynaptic potential) for the antagonize muscle action to reduce muscle spasm and stimulate Pituitary gland, the gray matter of midbrain which induce endorphins output as pain suppressor.

Cancer patients experience psychological stress and other combinations. Stress is considered one of the causes of cancer diseases. However, there is a maximum permissible dose of tension; it is challenging to assess the stress scale due to differences in individual adaptations. Acupuncture application may increase the serum glycogen level, increasing the body's energy source. A case of metastasis reported in #4546 is doing better overall with acupuncture, moxibustion, and herbal care.



Psychological and emotional states are significant factors in weakening the immune system, as described in the classical Five Elements theory. Physical disorders aggravate emotional distress, sometimes leading to depression stages. When patients start to experience improvement in other physiological conditions, coupled with their practitioner’s positive counseling that encourages their healing strength, it is possible that daily stress accumulates as a negative stress force to the living body and may cause abnormal physiological feedback. On the contrary, acupuncture is a positive stressor to autonomic nervous systems that invigorate mental-physical activities, promotes faster recovery, and stabilizes a living body. The patient’s self-control of living body protection will become possible by appropriate prescription of acupuncture, moxibustion, and herbal medicine.

### Case #4145 Irradiation burn

An 80-year-old Japanese female patient had tissue damage from post-mastectomy external irradiation therapy associated with excruciating pain. She complained of persistent pain, paresthesia, and swelling in the Rt. Chest wall for four months. She takes Rx Oxycodone for pain management. She also has degenerative joint disease in the cervical spine (C5, 6) and radiculopathy in the right arm. She received a radical mastectomy with axillary lymph node dissection in the right breast in November 2001. She was treated with acupuncture needles for fluid aspiration and selective low electro-impedance points with direct moxibustion to stimulate the peripheral nerve and enhance tissue repair. Radiculopathy also improved after acupuncture in the tissues supported by the C-spine. Radiation therapy was a total of twenty-two times in six weeks.



1.



Locating low impedance points where irritates sympathetic nerve by Ishikawa Dermo-meter and Tokei's PULSIN acupoint locator (3Kphm – 300ohm)

2.



Application of acupuncture on located points.

3.



Letting permeated fluid out.

4.



Applied direct moxibustion three times each point till respond dermatological sensations.

5.



Patient was asymptomatic after four sessions in thirteen days and discontinued. The patient discontinued Oxycodone (Opioid, Class A) for pain.

**#4145** Age 80 / Female, Japanese

Family History: Mother/Cervix cancer, Father/Gastric cancer

**Chief Complaints: Pain on Rt. Post-mastectomy region by irradiation burn.**

**Cancer Status: Radical mastectomy in 2001.**

Traditional Dx: Deficiency of Kidney, Spleen. Tongue: Smooth. Pulse: Smooth.

Treatments: Acu/moxa, aspirations for tissue diffusion.

**HRx:** “温清飲” (Tang-kuei & Gardenia) tid x 4 tablets (4gm).

**Clinical Progress:** The patient responded well to Acu/moxa care; pain, swelling, and discomfort have diminished with four sessions in thirteen days, and skin discoloration improved but remained mild. The patient was able to discontinue Oxycodone. The patient passed away from the complication of pneumonia seven years after.

**#2680** Age: 49/ Female, Japanese

Family History: Father/ Pneumonia, Mother/Unknown cause of death

**Chief Complaints: Left breast cancer.**

**SCC: Adventitious bursitis in the left ankle and constipation.**

**Cancer Status: Malignant ulcerations appeared on the surface of the left breast 2” x 2” in size. The patient has refused to seek medical attention for religious reasons.**

Traditional Dx: Cold dump, Circulatory problem, Tongue: Stagnant in tongue tips.

Pulse: Strong and smooth.

**Treatments:** Ointment “紫雲膏” (Lithospermi Radix, Alkannin, Sesame oil) on ulcerated tissues is applied, direct Moxibustion on **CV20, ST36**.

**HRx:** “柴胡清肝湯” (Bupleurum and Rehmannia) raw herbs dispensed for two weeks, 90cc /day.

**Clinical Progress:** Pain and swelling of left ankle bursitis diminished in two local Acu/moxa procedures on K-7, and I have seen the patient for five sessions in three weeks. There was no improvement in the ulcerous lesion, and tumor size remained unchanged. The patient died of complications from pneumonia four months later.

**#3081** Age: 46/ Female, Chinese

Family History: Father/Gastric cancer

**Chief Complaints:** Fibrotic nodes in right scapula border at 7 to 8 on the 0-10 pain scale, lumbosacral strain, General fatigue.

**Cancer Status:** Ductal carcinoma in situ in the left breast, Stage I, had a mastectomy in 2000 and was diagnosed by biopsy two years ago.

Traditional Dx: Blood insufficiency, Weak muscle tissues. Tongue: Dark reddish Pulse: Strong

**Treatments:** Acu/moxa

**HRx:** “桂枝加朮附湯” (Cinnamon and Aconite) tablets tid x 3 tablets (3gm).

**Clinical Progress:** In five four-week sessions, low back pain was asymptomatic. Scapula pain has reduced to two on a 0-10 pain scale. The patient experienced occasional spasmodic mild scapula pain in stressful situations.

**#3496** Age 65/ Female, Japanese American

Family History: Brother/Pancreas cancer, Parents/Unknown due to adoption.

**Chief Complaints:** de Quer vain’s tendonitis in the left hand. Radicular pain in the left leg suffered for three months after arthroscopic surgery in the right knee.

**Cancer Status:** Radical mastectomy in 1985.

Traditional Dx: Kidney deficiency, Yang with emptiness. Tongue: Pale Pulse: Deep and shallow

**Treatments:** Acu/moxa with the other lumbar spinal syndrome and local knee treatments.

**HRx:** “疎經活血湯” (Clematis and Stephanian) tid x 4 tablets (4gm).

**Clinical Progress:** Radicular symptoms and knee pain have improved. Due to extensive hand usage, DeQuervain’s pain remains with motions, such as wringing the towels.

**#4461** Age: 48/ Female, Hawaiian

Family History: Father/Minor stroke

**Chief Complaints:** Left neck strain, occasional headache, and insomnia.

**Cancer Status:** Had left mastectomy in 1998.

Traditional Dx: Liver active. Tongue: Smooth. Pulse: Smooth.

**Treatments:** Acu/moxa and direct moxibustion on insomnia points.

**HRx:** “柴胡加竜骨牡蠣湯” (Bupleurum and Fossil bone) tid x 3 tablets (3gm)

**Clinical Progress:** Neck problem and headache have improved. The difficulty of the patient’s insomnia was due to the rebound from the tranquilizer withdrawal.

**#2507** Age 63 / Female, Hawaiian

Family History: Mother/Stroke, Father/Unknown cause

**Chief Complaints:** Rt. acromion tendonitis, Rt. Stiff neck, neurological bladder.

**Cancer Status:** Has had two times left axilla lymphadenectomy mastectomies in 2001.

Traditional Dx: Weak kidney pulse. Muscle weakness. Tongue: Smooth dump. Pulse: Shallow.

Treatments: Acu/moxa on local points.

**HRx:** “五淋散” (Gardenia and Hoelen Formula), “独活葛根湯” (Tuhuo and Pueraria) tablets tid x 3 of each (total 6gm/day).

**Clinical Progress:** The patient’s neurological bladder and neck problems diminished with four sessions. The radiograph on Rt. The shoulder revealed mild calcification observed.

**#4546** Age 50 / Female, Japanese American

Family History: Father/Cardiac arrest

**Chief Complaints:** Hot flushes, fibromyalgia in the base of the right neck.

**Cancer Status:** Has had a mastectomy in 1999; metastasis extended to the Rt—Femur without pain.

Traditional Dx : Kidney pulse weak but bold. Tongue: Pale and thin.

Treatments: Acu/moxa and direct moxa on Insomnia points.

**HRx:** “当歸芍藥散” (Tang-Kuei & Peony Formula) and “加味逍遙散” (Bupleurum & Peony Formula) tid x 3 tablets (3gm) for three weeks.

**Clinical Progress:** After two sessions in one week, the patient stated much-improved neck pain and rigidity in the neck, an impression of DJD in the C-spine. Hot flushes lifted but concessionary bothersome on humid days.



# Acu / Moxa Tx. For Post-Mastectomy

乳癌摘出後の鍼灸治療穴

## SUPINE POSITION

K-6: Zhaohai (Gm) 照海

(Eight Confluent point & connect w/Yinqiao Ch.)

CV-17: Shanzhong (Ac) 膻中

(Eight Influential point dominating Qi)

P-6: Neiguan (Gm) 内関

(Luo connecting point)

ST-36: Zusanli (Ac) 足三里

(He-Sea point)

ST-16: Yingchuan (Ac) 膺窓

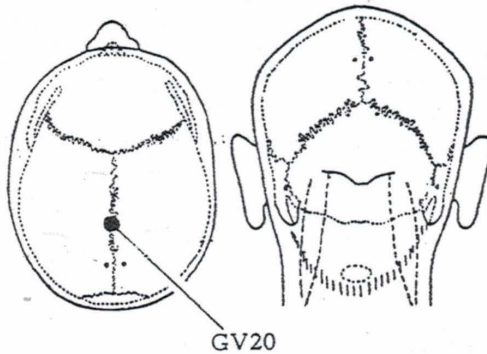
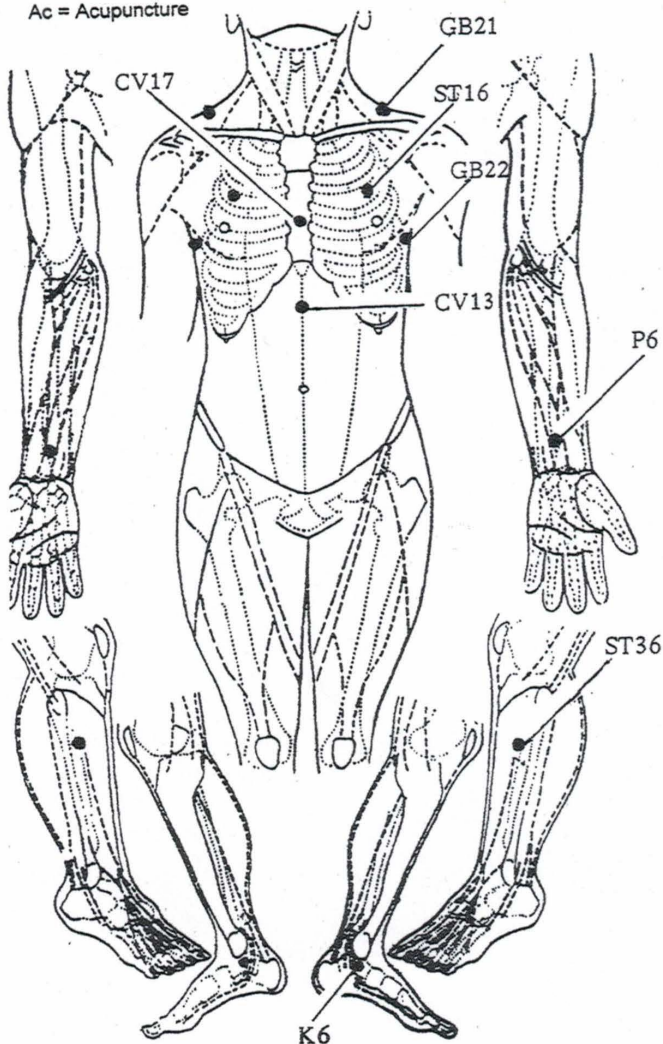
CV-13: Shangwan (Ac) 上腕

GV-20: Baihui (Gm) 百会

Tm = Thread Moxa

Gm = Grain Moxa

Ac = Acupuncture



## PRONE POSITION

GV-13: Taodao (Tm) 陶道

GV-12: Shenzhu (Tm) 身柱

GV-10: Lingtai (Tm) 靈台

GV-4: Mingmen (Tm) 命門

BL-13: Feishu (Ac) 肺俞

BL-17: Geshu (Ac) 膈俞

(Eight Influential point)

BL-20: Pishu (Ac) 脾俞

BL-43: Gao Huangshu (Ac) 膏肓俞

SI-11: Tianzong (Ac) 天宗

Insomnia point: (Gm) (Ex) 不眠穴

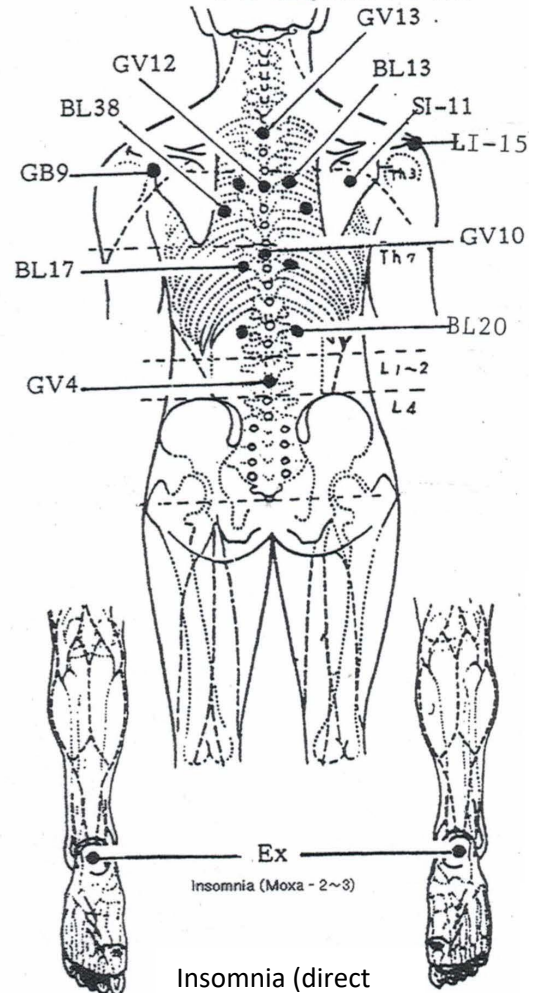
## RECUMBENT POSITION

GB-21: Jianjing (Ac) 肩井

GB-22: Yuanye (Ac) 淵腋

SI-9: Jianzhen (Ac) (Ex) 肩貞

LI-15: Jianyu (Ac) (Ex) 肩髃



Insomnia (direct  
moxa 2, 3 times till  
heat sensations.)

## **Acupuncture effects are yet to be determined.**

**Some research has been done and still needs to clarify the progression of acupuncture treatment and stimulation in the biological body.**

- Acupuncture's role on a beta-2-adrenergic receptor found on blood vessels (respond to nor-epinephrine), expansion of arteries in the liver and musculoskeletal, a suppression of histamine, and bronchial widening.
- Acupuncture's role in Hyaluronate sodium (C<sub>14</sub>H<sub>21</sub>NO<sub>11</sub>) in the production polymer of soft tissues.
- Acupuncture's role in collagen II protein synthesis, in which 50% of type II collagen consists of ligaments and 85-90% of the cartilage.
- Acupuncture's role in the serotonin 5-hydroxy-tryptamine(5-HT) level uptake in serum.
- Induce glycogenesis : Refer to Hashimoto's hypothesis. (Page 85)

## **License Renewal and Continuing Education**

Hawaii's acupuncture license renews every odd number of years with a fee of \$270 (in 2019). The license renewal system among professionals in the United States is standard, and professional training requirements differ in each state.

Hawaii has no provisions for obtaining CAE requirements regarding the Continuing Acupuncture Education (CAE) matter. The Hawaii Oriental Medicine and Acupuncture Association (HOMAA, renamed from HAA in 1998 and named back to HAA in 2018) requested the State Board to provide mandatory Continuing Education requirements on February 6, 2014, in the Board minutes. The DCCA presented a copy of the Guidelines and Checklist "Review on Continuing Education by PVL requested by the legislative Ways & Means Committee (Senator Donna Ikeda, Chair) in 1994 to the Board and the HOMAA for further study and answer. **PVL** = Professional Vocational License Division

**To address the "Continuing Acupuncture Education" requirement, it must go through a legislative process since it involves all licensees.** Fourteen states require continuing education requirements to renew an acupuncture license for an average of thirty-one (31) hours. Eight (8) States do not require continuing acupuncture education, including Hawaii. Fourteen (14) States require the private sector of NCCAOM's 60 hours of continuing education to be attached to the so-called "Diplomate" every four years. However, there are reasons to consider adopting mandatory CAE requirements and finding a clear answer to **the Guidelines and Checklist by the PVL.**

1. Continuing education cannot improve the licensee's practical knowledge and clinical skills.
2. Is it worth acquiring if the CAE program topics are not helpful to the practitioner but fulfill the required hours?
3. Could the seminar expenses affect the business less line's licensee if they do not work full-time practitioners and the current decimated economy?
4. What is the adequate number of hours for the CAE program?
5. An exemption of licensee under military services or deployment or a person cannot fulfill the required hours due to illness or other considerable reasons.

It may be a good intention to adopt Continuing Acupuncture Education requirement. Still, it must be a decision made by the state licensee to calculate proper hours and sources to educate themselves. An important issue is each practitioner's intrinsic motivation to study and pursue their specialties. The licensees should not drive by the NCCAOM, a private sector and seminar broker, since Hawaii has no report of incompetency. The NCCAOM's given title of "Diplomate" doesn't seem of any value for obtaining. Advanced information and studies are available through the Webinar and internet venue free of charge.

## **The Facts of background for an Initiation of the Continuing Education**

There were incidents with the medical incompetency case as far back as **1877**. A physician at a Washington hospital was summoned on two occasions to provide emergency care for an older woman with temperatures over 106 degrees. In neither case, he adequately examines the patients or ordered laboratory tests, and he treated one with enemas and the other with vitamins plus enemas. The second woman died 8 hours later of a surgically treatable abdominal condition made worse by the enemas.

Because of similar complaints against physicians dating back at least ten years, the hospital's credentials committee reviewed his professional ability and told him that he could no longer practice in the hospital except under direct supervision. Many medical misdiagnosis cases, unethical behaviors, insurance fraud, unnecessary surgery, sexual exploitation of patients, mental illness, drug dependency, alcoholism, clinical malpractice, and incompetency are more severe than the medical profession acknowledges.

In **1975**, a New York Hospital nurse reported that an obstetrician with shaky hands and unsteady balance tried to do a surgical procedure without putting a blade to the surgical knife. Problems continued unsolved, so from 1971, continuing created medical education requirements ensured that the medical profession kept up with changes and advances in their practice fields. At the Medical Practice Task Force set up by the New York State Assembly in **1977**, fifteen to twenty-five percent of 410,000 physicians were deemed mentally unfit for their work by overwhelming stress or else. There was no "continuing education" for correction and further training opportunities.

According to the American Medical Association, in 1978, five to seven percent of physicians were dependent on alcohol drugs or were psychologically unfit. After many more medical conferences, they realized that the percentage of inappropriate medical professionals had increasingly complicated situations. Continuing Medical Education as a façade: The most recent medical professional response to disability physicians and incompetence requires continuing medical education courses for license renewals. Mandatory reporting by physicians, nurses, and other medical personnel to report to the state medical board cases of unethical, impaired, or grossly incompetent physicians who come to their attention. Four states that have passed such laws, Arizona, Alabama, Idaho, and New York, have lost licensure for physicians who do not report or cover up for their colleagues.

**- *The Star-Bulletin & Advertiser*, 7/16/1978**

A physician told me that the American Medical Association breaks down into several categories to earn the biennial credit of fifty-hour continuing education, including category II self-review of medical journals and essays for credit hours. He also said that, ironically, malpractice cases are increasing, not declining, despite increasing continuing education hours.



According to the Deputy Attorney General's opinion for the state Board of Acupuncture, complaints related to the acupuncture practice are the least number of cases. No competency claims were received among other healthcare practitioners reported by the RICO. The statistics revealed that acupuncturists' ethics level is exceptionally high, the Executive Officer of the Board stated, and hopefully, such a record to keep obtaining.

**RICO** = Regulated Industry Complaints Office (State Department of Commerce and Consumer)

## Regulated Industry Complaints Office – RICO (DCCA)

	NUMBER OF COMPLAINTS				UNLICENSED PRACTICE			
YEAR	ACUPUNCTURE	PHYSICIAN	CHIROPRACTOR	MASSAGE	L.Ac	M.D.	D.C.	LMT
2002	6	90	6	115	0	0	0	0
2001	1	74	6	71	0	0	1	0
2000	5	89	4	122	0	0	0	0
1999	6	71	6	110	1	3	0	8
1998	1	79	6	92	0	5	2	72
1997	8	82	17	64	2	6	1	7
1996	1	116	17	130	0	6	1	101
1995	7	105	14	38	5	9	10	14
1994	2	105	45	35	1	8	5	15
1993	1	100	18	46	0	7	1	10
1992	8	104	18	35	2	3	9	13
1991	1	89	11	21	1	9	3	11
1990	8	100	15	45	7	12	2	20
1989	12	100	16	15	8	18	2	5
1988	12	82	17	28	2	7	3	14
1987	8	84	5	16	2	2	1	7
1986	2	104	6	11	1	6	0	9
1985	1	69	7	21	1	9	3	11
1984	2	55	13	14	0	6	1	6
1983	2	72	13	3	0	0	0	0
TOTAL	94	1,770	260	1,032	33	116	45	323

**Complaints to Dentists: 2011 (16 cases), 2012 (30 cases), 2013 (20 cases)**

## AAAOM (American Association of Acupuncture and Oriental Medicine)

### Sexual Ethics Guidelines Issue

All acupuncture schools cover these topics, and some Continuing Education courses require mandatory hours on sensitive issues. The NCCAOM (National Certification Commission for Acupuncture and Oriental Medicine) provides three hours of discipline course reviewing ethics and malpractice matters based on Physician's Ethics Guidelines.

The RICO (Regulated Industries Complained Office) attorney told me that there is no provision for a practitioner's protection but a claimer, even though frotteurism acts or stalking toward a practitioner by a patient, or patient who has persecution mania, mentally unstable or paranoia. There are also ill-trained experts and investigators of all stripes and biased investigators. Without consequences, the false accusation will ruin innocent practitioners' lives and lead to hostility or distrust of the patient's relationship. I never expected to happen to myself with stalking acts and false allegations by a female patient towards me. Still, it happens, and we cannot segregate or choose a patient with a possibility of personality disorder, psychological disorders, a delusion of persecution, intentional ill accusation, or just a pathological liar.

For example, when I operated an ample office in the eighties, I sub-leased one of the treatment rooms to the massage therapist, who was very honest with professionals. Occasionally, I recommend a patient who wants a massage or Shiatsu therapy. One day, I had a complaint received by a female patient that she claimed inappropriate massage procedure. He massaged in pectoral muscles to ease the muscle spasm because she excessively used her arms and shoulder by making pottery as a hobby. I advised him that some patients have highly nervous personalities and should explain before working on a sensitive area.

One male patient called me for an appointment referred to me by his friend to change to another acupuncture practitioner. The patient told me he encountered a personal advance by a female acupuncturist with an intimate mood. He experienced uneasiness; I was reluctant to ask further one-sided personal questions and report to the RICO. If practitioners tend to be attracted by opposite-sex patients, it is unfit to be hands-on treatment practitioner. If a professional relationship with a patient deteriorates by personal conflict to a certain point, the practitioner must act quickly to protect him or herself; it might be best to refer the patient to another practitioner or other health care specialist.

**The wrongful allegations are based on lies and untruths constructed by false accusers. The best way is to keep preventative measures, such as refraining from consulting private topics and avoiding miscommunications. When credibly accused of sexual misconduct, the default should be to believe the accuser because of the costly toll of "believing women or men" instead of "believing evidence" seen in the hundreds of cases recorded by the University of Michigan Law School's National Registry of "Exonerations involving innocent men accused falsely."**

*-By Michelle Malkin, Star-Advertiser Midweek, 2018*

## **The FDA Categorized Acupuncture Needles**

The FDA (Food and Drug Administration) revised the Category that an acupuncture needle (filiform needles) is a Classified III to Classified II medical device for professional use as safe and effective medical instruments by the acupuncture practitioner on March 29, 1996, and confirmed on **December 6, 1996.**

The quality control of the "acupuncture needle" product and a package of needles sealed with sterilization of EOS (ethylene oxide gas) as a "disposable needle." Therefore, license verification is required to acquire acupuncture needles and selective acupuncture needle manufacturing companies registered with the FDA, including China, South Korea, and Japan.

Although 47 states have legalized "acupuncture practice," the following States are not legalizing acupuncture yet: Alabama, South Dakota, and Oklahoma. When acupuncture becomes accepted in the entire nation, it gains citizenship, but acupuncture is still an uphill process.

Moreover, since acupuncture laws differ from State to State, those inconsistencies hampered universal legal agreement. Once there was a movement to set up the Federation of Acupuncture and Oriental Medicine Regulatory Agencies (FAOMRA), delegates of each State's Board members gathered with fourteen states in 2003, discussing typical opinion and topics exchange formalize consistency of Rules and Regulations of acupuncture nationwide. Unfortunately, some States, including Hawaii, cannot construct a budget for the department, and it has difficulty in a setback. Therefore, the legal view's consistency is unlikely to realize that it is the US's demerit.

## **Maintaining the Office**

Maintaining a clean atmosphere gives a patient's sense of security and purity, an essential element for the acupuncture office. The cleaning and preservation of the clinic inside out require practitioners to have a patient's view. The practitioner occasionally lies on a treatment table and observes the patient's perspective to find dust or noticeable soil in the treatment room. Especially dust and fallen hair tend to drive away to the room floor's corner by the traffic motions' movement.



## Procedure Review

Keeping a welcome attitude is essential to a new and regular patient. A practitioner may provide examination table paper and disposable drapes, capes, gowns, shorts, or flex-fits skirts to accommodate patients. Some patients are hypersensitive to digital palpation when a practitioner applies digital pressure to search and define acupuncture points or fibrotic tissues on the skin and may show nervousness, especially during the initial visit.

### **Autoclave Sterilizer:**

Chemiclave 5000 by MDT  
Harvey, Co.

Temperature: 121C  
Centigrade (250F)

Pressure: 15 psi - 30 psi  
Sterilization time: 20  
minutes to kill viruses'  
Spores & bacteria of  
instruments.

Agents: Formaldehyde  
solution

Heavy poly blue gown,  
White paper gown,  
Poly blue capes,  
White paper capes,  
Disposal shorts,  
Flex fits skirts,  
Over size ponchos,  
Exam table paper roll  
Paper and drape  
sheets.

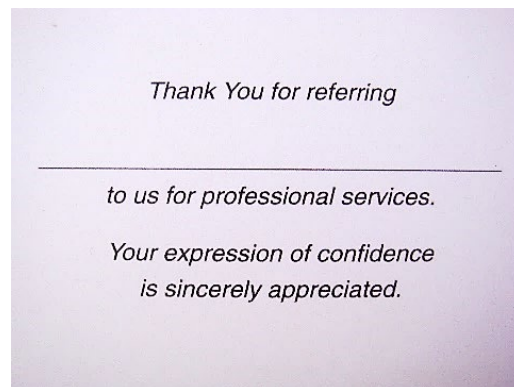


The practitioner should minimize private subjects or topics without helping with treatment and procedure. In solo practice, the door must be a keyless entry or leave the door open when the assistant is absent during an examination in the treatment room. If the treatment room is separate from curtains, keep curtains or partitions close to maintain privacy. Installing a "call bell" for a patient to inform the practitioner when the clothing change is over and knock on the door before entering the treatment room is advisable. Refrain from comments on patients' appearance. When explaining medical terms to a patient, try to minimize professional words and phrases for better understanding. All described above apply to both male and female patients. In the case of necessity for a procedure to unhook or shift undergarments, ask the patient to help themselves, and if a patient is unable to use their hands to leach, explain to the patient the reason for the need to expose the specific area and may proceed to unhook or shift the undergarment with permission. Although any medical procedure is difficult to maintain perfect privacy, avoid miscommunication, and keep a professional attitude. If there is a noticeable bruise or scar on a patient's body surface before acupuncture, inform the patient before starting the procedure to avoid unreasonable claims.

## Practical Communication hints

### Thank you card

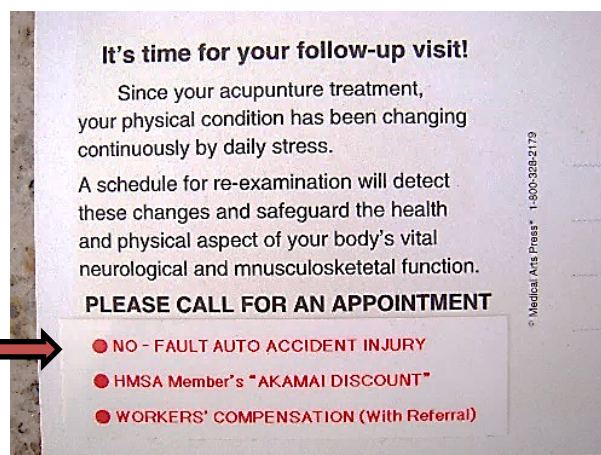
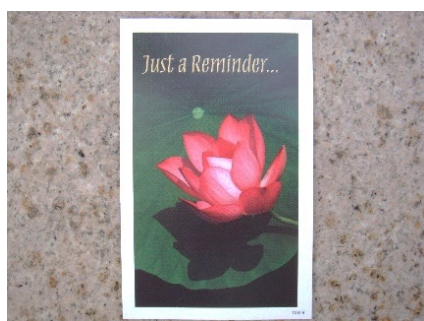
It is a preferred gesture to send a Thank you card to a patient or friends who refer to your practice and show confidence enough to guide a new patient to your acupuncture practice.



You maybe create your own words or there is a readymade card to express sincerity to patients. You may be adding small words with signature on a card.

### The follow-up reminder

Create a Follow-up Visit reminder postcard for regular or current patients.



An additional note for selective services may be attached.

## **Strive for Progression of Acupuncture in Hawaii**

The future development of the acupuncture society in Hawaii may depend on how the three branches of arrows collaborate, enhance study, and encourage colleagues to learn from each other among the following cooperation of three critical elements.

### **1. The State Board of Acupuncture:**

**Improvement through defining the law, scope, and educational standards.  
Upgrade the status of acupuncturists through the Rules and Regulations.**

### **2. The Hawaii Acupuncture Association:**

**A fellowship between practitioners will exchange valuable practical clinical information to promote acupuncture by educating the public in general and expanding health insurance coverage. Active in the state legislature and share information.**

### **3. The Academy of Integrated Medicine Hawaii:**

**To educate and share practical information and group studies. Exchange research with global aspects and provide a forum, symposium, and seminars.**

**Therefore, three arrows are tied together to bring us a healthier future!**

Mike M. Hashimoto, D.Ac., Ph.D.

**3020 Kaimuki Avenue, Honolulu, HI 96816**

**Phone: (808) 927-3262**

**E-mail: [kanpo@hawaiiantel.net](mailto:kanpo@hawaiiantel.net)**

Vice-President, Academy of Integrated Medicine Hawaii

Former President, Hawaii Acupuncture Association

Former Chair, Hawaii State Board of Acupuncture

Member, Hawaii State Board of Acupuncture (1983-2018)

Member, Hawaii State Board of Massage (1979-1981)

Graduated from Eastern College of Acupuncture in Tokyo, Japan (1965).

Doctor of Chinese Medicine (DCM, #82446), the Research Center of Chinese Medicine in Osaka, Japan, and Hong Kong (1982).

Doctor of Philosophy in Acupuncture (Ph.D.), University of Oriental Studies in Los Angeles, CA (9/11/1984).

The Dean of Academic Affairs at the "Oriental Medical Institute of Hawaii" Honolulu (1984-1992).

China International Acupuncture and Moxibustion Training Center, Shanghai, 1987 #87109, 10/19-24, PROC.

[NCCA: Dipl. Ac. #2857, 5/14/1986, #2872, 6/2/1993. Dipl. CH. #093-0125-21, 10/25/1993]

[NCCAOM: Dipl. Ac. #001593, 7/15/1999. Dipl.CH. #001593, 10/19/1999]

**All above NCCA and NCCAOM certifications of Diplomates 1986 through 2007 were discontinued because of the provision of a tutorship educational route, which is against compliance with the Hawaii state's Regulations.**

## **APPENDIX**

### **Hawaii ranked the healthiest state in the U.S. for five years.**

#### ***“Hawaii Again Tops in Health”***

**(From The Star-Advertiser 12/15/2016)**

***As reported by the United Health Foundation***

#### **Rate of the un-insured number**

Hawaii: 4.7%                      US average: 10.6%

#### **Rate of adult smokers’ rate**

Hawaii: 14.1%                      US average: 17.5%

#### **Rate of obesity number**

Hawaii: 22.7%                      US average: 29.8%

#### **The death rate of cardiac disease (per 100,000)**

Hawaii: 206.6                      US: 251.7

#### **Death rate related to prescription drugs (per 100,000)**

Hawaii: 11.2%                      US average: 14.0%

#### **Ten High health maintenance States**

1. Hawaii   2. Massachusetts   3. Connecticut   4. Minnesota   5. Vermont  
6. New Hampshire   7. Washington   8. Utah   9. New Jersey  
10. Colorado

#### **Ten Low Low-Health Maintenance States**

41. Georgia   42. South Carolina   43. West Virginia   44. Tennessee  
45. Kentucky   46. Oklahoma   47. Alabama   48. Arkansas   49. Louisiana  
50. Mississippi

#### **Hawaii tops the U.S. for clean air**

*Reported by the American Lung Association ranked Honolulu first and the Kahului, Wailuku, and Lahaina areas second in the country for year-round particle pollution.*

***- “State of the Air” Star-Advertiser 2021, which covers periods of 2017-2019***



## Statistics of Acupuncture Licensees in Hawaii

<p style="text-align: center;"><b>Total licensees as of 7/28/2006</b></p> <p>Oahu: 245</p> <p>Big Island: 83</p> <p>Maui: 66</p> <p>Kauai: 18</p> <p>Molokai: 1</p> <p>Lanai: 0</p> <p>Other State: 147</p> <p>Foreign Country: 11</p> <p><b><u>Total: 571</u></b></p>	<p style="text-align: center;"><b>Total licensees as of 8/15/2016</b></p> <p>Oahu: 305</p> <p>Big Island: 115</p> <p>Maui: 83</p> <p>Kauai: 37</p> <p>Molokai: 1</p> <p>Lanai: 0</p> <p>Other State: 180</p> <p>Foreign Country: 4</p> <p><b><u>Total: 725</u></b></p>
<p style="text-align: center;"><b>Total licensees as of 7/27/2011</b></p> <p>Oahu: 295</p> <p>Big Island: 93</p> <p>Maui: 78</p> <p>Kauai: 3</p> <p>Molokai: 1</p> <p>Lanai: 0</p> <p>Other State: 179</p> <p>Foreign Country: 8</p> <p><b><u>Total: 687</u></b></p>	<p style="text-align: center;"><b>Total licensees as of 2/3/2020</b></p> <p>Oahu: 312</p> <p>Big Island: 121</p> <p>Maui: 85</p> <p>Kauai: 38</p> <p>Molokai: 1</p> <p>Lanai: 0</p> <p>Other State: 148</p> <p>Foreign Country: 5</p> <p><b><u>Total: 740</u></b></p>

State of Hawaii: DCCA/PVL

## Information on Biohazard Waste Disposal Service

### **Hawaii Department of Health**

Title 11 Chapter 104

#### **MANAGEMENT AND DISPOSAL OF INFECTIOUS WASTE**

11-104 1.2 Definitions

- (2) **“Authorized disposal site”** means the location, other than the site of generation, where final treatment, processing, or the deposit of solid waste occurs as permitted in accordance with Chapter 11-58.1 Solid Waste Management Control regulations.

**“Autoclaving”** means rendering sterile by exposing it to steam at prescribed temperatures under prescribed pressure for appropriate periods using *Bacillus* spp. Spore kill time as a guide by current Clinical Laboratory Standards Institute waste management guidelines.

**“Blood, blood products, and other body fluids”** means all waste blood and blood products such as serum, plasma, other blood components, and all body fluids.

**“Body fluids”** means semen, vaginal secretions, cerebrospinal, synovial, pleural, peritoneal, and amniotic fluids. It does not mean nasal secretions, sputum, tears, urine, and vomitus unless they contain visible blood.

**“CDC”** means Centers for Disease Control and Prevention, United States Department of Health and Human Services.

**“CLSI”** means Clinical Laboratory Standards Institute.

**“Contaminated Sharps”** means all sharp items, including but not limited to hypodermic needles, syringes, Pasteur pipettes, scalpel blades, lancets, capillary tubes, slides, and broken glass which have been used in the diagnosis, treatment, or immunization of human beings or animals in research pertaining to it, or in the production, use or testing of biologicals.

**“Incineration”** means a process by which waste undergoes complete combustion and becomes carbonized or mineralized sterile ash under a permit issued under chapters 11- 60. 1, Air Pollution Control, and 11-58.1 Solid Waste Management Control.

**“Infectious isolation waste”** means biological waste and discarded material contaminated with blood, body fluids, excretions, exudates, or secretions from a patient or patients with diseases considered communicable and requiring isolation as defined by the current CDC’s guidelines for environmental infection controlling healthcare facilities, Morbidity and Mortality Weekly Report at [www.cdc.gov/](http://www.cdc.gov/).

**“OSHA”** means Occupational Safety and Health Administration, United States Department of Labor.

**“Storage”** means holding infectious or treated infectious waste awaiting treatment, transport, or disposal, not to constitute waste disposal as required under section 11-104.1-32. “Treatment byproducts” means the substance or remains of infectious waste incinerated, sterilized or chemically disinfected by methods delineated in section 11-104.1-21.

## **SHARPS DISPOSAL IN HAWAII**

### **1. Hawaii Bio-Waste Systems, Inc.**

1084 Puuwai Street, Hon, HI 96819

Tel: (808) 841-1240 Fax: (808) 845-3035

General Manager: Edwin Arellano

**earellano@hawaiibiowaste.com**

**www.hawaiibiowaste.com**

**Disposable Sharps Containers:** Treatment, Disposal, Waste Tracking, and Administration Fee

1-quart sharps container \$10.00 each

2-gallon sharps container \$28.00 each

6-gallon sharps container \$48.00 each

**Reusable Sharps Containers:** Treatment, Disposal, Waste Tracking, Administration, Replacement Fee (Deposit required for initial start/extra container)

2-gallon containers \$28.00 each (Deposit \$35 each)

10-gallon containers \$75.00 each (Deposit \$65 each)

**Service Fee:** Waste handling, Packing, and Transportation Fee

**Zone 1:** \$50.00 (Hawaii Kai, Honolulu, Aiea, and Pearl City)

**Zone 2:** \$60.00 (Windward area, Leeward area, and Wahiawa)

**Zone 3:** \$70.00 (North Shore area)

### **2. Hawaii Medical Vitrification, Inc.**

1088 Bishop Street, #1130, Hon, HI 96813

Tel: (808) 532-0512 Fax: (808) 532-6191

Supplies replacement sharps containers.

### **3. NCNS Environmental Inc.**

1644 Kahai Street, Hon, HI 96819

Call for details: Nick & Nate Wong

Tel: (808) 847-7875

Supplies replacement sharps containers.

## **Mail-Back System for islands clinics**

For East Hawaii: **Call Corrina at Hilo Medical Center at 808-932-3114**

Reasonable fee. There is a minimum weight/fee. You must sign a contract agreement on Wednesday drop-off before dropping disposed of needles.

<https://health.hawaii.gov/shwb/files/2013/06/medwaste1.pdf>- copy, paste.

**Lhasaoms:** SHARPS containers that already include the shipping/handling (check & make sure). Lhasa, Stericycle, 5 - 1.4qt, mailed in, \$88.

**Helio Med:** Stericycle 5 gallon

**Golden Needle:** No longer shipping Sharps boxes to Hawaii.

**NCNS Environmental, Inc:** Hawaii's first medical waste sterilization facility since 1990.

2989 Ualena St, Honolulu, HI 96819

They sell Sharps containers & solid waste bags.

Call to find out prices per size, transport fee & if they replace what they take away.

Tel: (808) 847-7875, (808) 847-5438 FAX on OAHU

[Info@ncnshawaii.com](mailto:Info@ncnshawaii.com)

**AcuMarket.com:** 2x 2-gallon SCS Mail-Back Sharps containers for a total, including shipping, \$109.69 as of Oct. 1, 2019

Revised Oct. 4, 2019, shipping cost is \$50.

[Preview attachment Bio-Waste System contact info.docx.](#)

[Bio-Waste System contact info.docx 236 KB.](#)

Some companies have changed owners and prices, so call to check before assuming the information below applies to your needs.



1. **IES Medical Mail Service**  
**Integrated Environmental System**  
Low-cost Mail-Away System  
Toll-Free: 1+888-4-sharps
  
2. **XMED Medical Waste Disposal, Inc.**  
2126 Metro Circle, Huntsville, Alabama 35801  
Toll-Free: (866) 735-9709  
[support@xmeddisposal.com](mailto:support@xmeddisposal.com)

**For Mail-Back Sharps from Hawaii**

Call for continental prices.

1-quart	\$34.95
1-gallon	\$39.95
2-gallon	\$49.86

Information by: Dr. Lyna Morimoto, D.Ac.  
October 2019

**Acupuncture Supplies**

Helio USA, Inc.	816 Charcot Avenue, San Jose, CA 95131
1-800-672-2726	<a href="mailto:Sales@heliousa.com">Sales@heliousa.com</a>

K.S. Choi	179W. 39 <sup>th</sup> Street, Los Angeles, CA 90037
1-323-1600	<a href="mailto:goacuzone@gmail.com">goacuzone@gmail.com</a>

Lhasa OMS	230 Libby Parkway, Weymouth, MA 02189
1-800-722-8775	<a href="mailto:info@lhasaoms.com">info@lhasaoms.com</a>
Fax: 781-335-5779	

TCM Supply Co.      15410 Stafford Street, City of Industry, CA 91744  
1-626-968-2600

KM Supplies      1132 Crenshaw Blvd, Los Angeles, CA 90019  
1-323-954-0901      [info@kmsupplies.com](mailto:info@kmsupplies.com)

### **Medical Supplies**

**McKesson Medical-Surgical, Inc.**  
9954 Mayland Drive, Richmond, VA 23233  
Telephone: 1-800-300-4350  
Fax: 1-800-356-8950      [www.mckesson.com](http://www.mckesson.com)

### **Herbal medicine & Products Distributor**

Golden Needle Acupuncture & Herbal Supply  
2 Rutledge Cir. Fletcher, NC 28732

People's Herbs, Inc. (Blue Poppy Herbs)  
1815 W. 205<sup>th</sup> Street, #304 Torrance, CA 90501  
1-800-293-6697      Fax: 1-424-488-2024      [amanda@bluepoppy.com](mailto:amanda@bluepoppy.com)

Bio-Essence  
1-800-538-1333      [info@bioessence.com](mailto:info@bioessence.com)

### Evergreen Herbs

17431 East Gale Avenue, City of Industry, CA 91748

1-866-473-3697 or 1-626-810-5530    [sales@evherbs.com](mailto:sales@evherbs.com)

### Nu-herbs Co.

14772 Wicks Blvd, San Leandro, CA 94577

1-800-233-4307    [questions@nuherbs.com](mailto:questions@nuherbs.com)

### MAYWAY

1338 Mandela Parkway, Oakland, CA 94607

1-510-208-3113    [sales@mayway.com](mailto:sales@mayway.com)

### Golden Flower Chinese Herbs

2724 Vassar Place, NE Albuquerque, NM 87107

1-800-729-8509    Fax: 1-866-298-7541    [www. gfcherbs.com](http://www.gfcherbs.com)