

Acupressure for Lower Back and Leg Pain



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*Presented by
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Acupressure for Lower Back and Leg Pain

What is Acupressure?

Put simply, Acupressure is the application of pressure to points on the body in order to make an intervention into and to balance the energy system of the body. Usually this is done by applying finger or thumb pressure, but other tools can be used.

It is an ancient method of treatment that is as old as the impulse to touch parts of the body that are hurting. For example, holding the forehead when there is a headache, or pressing the inner corners of the eyes when they are tired.

A frequently asked question is, "What is the difference between acupuncture and acupressure?" The primary difference is that acupuncture uses fine needles that penetrate the body to a depth of between 1 mm and 75 mm, while acupressure does not penetrate the skin. Other differences are that the acupressure practitioner is in constant physical contact with the client. This has the advantage of providing rapport and support, though it also means that the practitioner can only treat one client at a time, while an acupuncturist can treat multiple clients. But acupressure and acupuncture use the same principles and the same points to treat. Acupuncture tends to use more points simultaneously, while the acupressure therapist can only hold two points at a time.

How does Acupressure work?

The application of pressure to specific points known as acupoints has a number of effects:

- Releases endorphins, the body's natural sedatives, thereby reducing pain.
- Increases the flow of blood in the area, bringing oxygen to the tissues and carrying away toxins.
- Balances the energy or Qi in the meridians, having effects throughout the body, not just where the points are located.

Acupoints

There are 361 meridian points and a few dozen “extra” points that are not related to a meridian. The acupoints are the places on the meridians where we can make interventions into the energetic body. They are gateways or portals to the Qi, a connection between the inner and outer environments. The ancient Chinese became aware of these locations by developing the sensitivity to perceive Qi. The Chinese word for acupoint is *xue* which literally means hole. The Japanese word is *tsubo* whose written character gives clues about the nature of acupoints.

This character represents a jar with a narrow neck covered with a lid. The neck represents the *tsubo* connecting with the Qi within the meridian. The meridian is represented by the bulbous section of the jar. The fact that the jar has a lid indicates that the Qi is protected from escaping, but that the lid can be removed in order to influence the Qi.

Western scientific studies have revealed that the acupoints are areas of much lower electrical resistance. An acupoint has only 10% of the resistance of the surrounding area. There is literally less resistance to influence and so by using pressure, needle, heat or other stimulation, the meridian Qi can be reached.

When we apply pressure to an acupoint, we are not simply pressing the skin. We are reaching for the Qi. There is a Chinese term *De Qi* which literally means to find the Qi or reach the Qi. When we hold a point, there is usually a short time before we feel the sensation of the Qi. This can be likened to taking off the lid of the jar and reaching in.

As we contact Qi, the blood, muscles, tendons, ligaments, nerves and other structures in the surrounding area are influenced. In addition, the Qi of the meridian is influenced such that the whole pathway is affected and in turn the whole energetic body. As soon as we connect with the Qi at any point, we are making an intervention into the whole energy system.

The sensation of the Qi is different between different people, but also between different points. Some points produce strong sensations while others do not; some are more generally painful than others; the way the Qi feels depends on the Element of the points and the practitioner may tune in to the inherent qualities of an Element through its points.

Five Element Acupressure Technique

Five Element Acupressure uses a particular technique that is different from other forms of acupressure. While other techniques may use rubbing, percussion, stretching or other vigorous stimulation, the technique you will learn in this seminar is the steady, static holding of pairs of points. This is not to make any judgement about other methods.

Pressure

How much pressure is used? This varies a lot and depends on the preference of both practitioner and client. I use what I call moderate pressure, a level I feel comfortable with. But it also has to suit the client, so my pressure will vary according to the wishes of my client. If the client is not comfortable and feels the pressure is hurting, or if the pressure is too light as to feel irritating, then treatment outcomes will suffer. If there is any resistance to pressure, the client tightens up and treatment will not be optimal. Some clients are used to treatments hurting and will often say, "I can take it!" This in itself is an indication that the pressure is too deep. If there is any resistance, evidenced by holding the breath, wincing, tightening of the jaw etc, then the practitioner should reduce the pressure. Sometimes the client is relaxed but the points are not responding to sustained pressure. It may be that by reducing the pressure, the Qi will be reached, for the Qi can be "squashed" by too much pressure. I suggest you experiment with different levels to find the optimum for you, but always check that your client is comfortable with this.

Points on the posterior aspects of the body will call for more pressure; anterior points will need less pressure. People with athletic bodies will tend to call for more pressure while those with lighter, frailer bodies will need less. For old people, children and the very ill, use a light pressure.

Duration

How long is a point held? The short answer is, until it releases. For those students new to acupressure, this doesn't mean much. What you are waiting for is for the Qi of the point to be present, palpable, and with a feeling of balance and completeness. Over time you will come to learn what this means. Almost always the client notices that any sensitivity in the point goes away. Sometimes the release is accompanied by a digestive gurgle, a long breath, a deeper relaxation, even falling asleep. A rough rule of thumb is to hold the point for 2 to 3 minutes. If you are not able to perceive the Qi at this stage, then hold the point for this duration.

Pairs of points

One aspect of this technique that makes it so powerful is the holding of acupoints in pairs. Each hand holds one point, setting up a conversation between hands and points. When this is done, the points act synergistically to release each other. What you are waiting for here is for the points not only to release individually, but to come into harmony with one another.

Usually, one point is the focal point, the point you are trying actively to release. The other point is a related point that is a helper to release the focal point. Sometimes the focal point releases but the helping point doesn't. This then becomes the new focal point and another point is chosen as the related point. Treatment often proceeds in a kind of leap-frog pattern as related points become focal points.

Point combinations

There are a number of principles used to choose points that help to release each other. These are:

1. Points on the same meridian
2. Points of the same Element
3. Anterior/posterior points in the same segment of the body
4. Points on the same extraordinary vessel
5. Structurally related points
6. Other known pairs

Qi

Yin and yang are the fundamental forces that create our world. But in order for things to happen, for action to take place, there needs to be a moving force between the two poles of yin and yang. This movement derives from something that inhabits and motivates every single particle of our universe. The Chinese called this motivating force Qi (pronounced chee). It is a bit hard to translate this in one word. To call it energy is limiting and can be confused with something like electricity. It was considered by the Chinese to be a substance, but not the kind you can box up and sell. It's much more subtle, more resilient, more ubiquitous than anything else you can name. It is the fundamental substance of the universe. Since there isn't any word in English that can come close to a translation, we use the word Qi.

Sensation of Qi

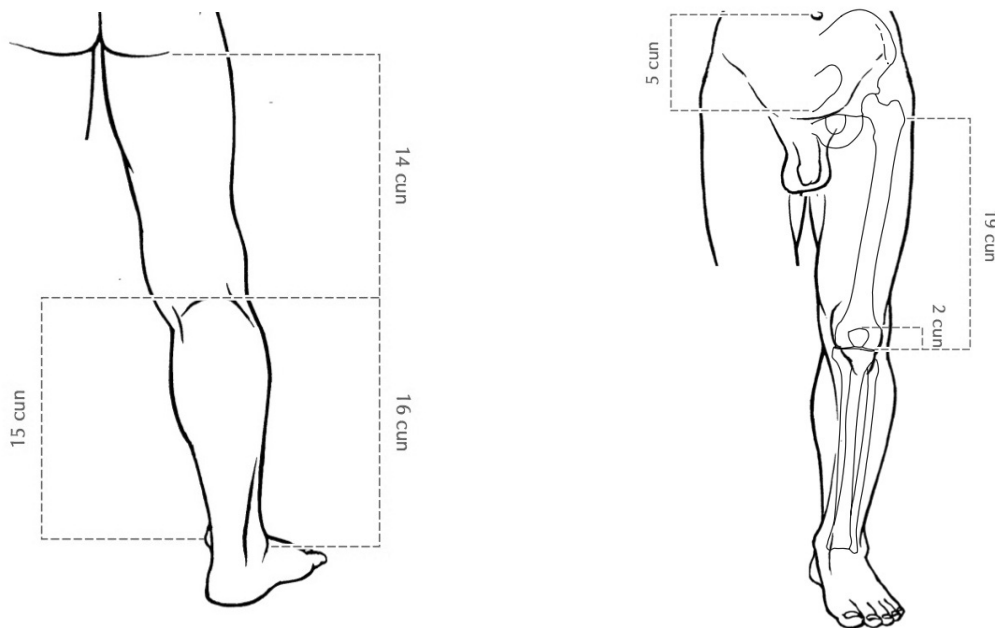
As a practitioner of acupressure, you will be making contact with the Qi of your clients via the acupoints of the meridians. The sensation at these points varies widely according to the point, the Element of the point, between individuals and the health of each individual. Placing a finger at an acupoint for a few minutes, one can sense a subtle movement that is not the blood pulse. It might be a gentle pulsation or a rhythmic opening and closing. It may feel like a butterfly is fluttering under your fingertip or a small animal wriggling. Maybe it feels like you have your finger on a garden hose and someone has turned the water on. Maybe it zings like a microcurrent of electricity or it feels like a magnetic pull. Often a release is accompanied by a sense of a wave moving along the meridian.

Location and Measurement

For every acupoint there is an anatomical description of its location. Acupoints are described as being a certain distance from an anatomical location. The standard measurement of distance is the *cun*, sometimes called the Chinese inch or body inch.

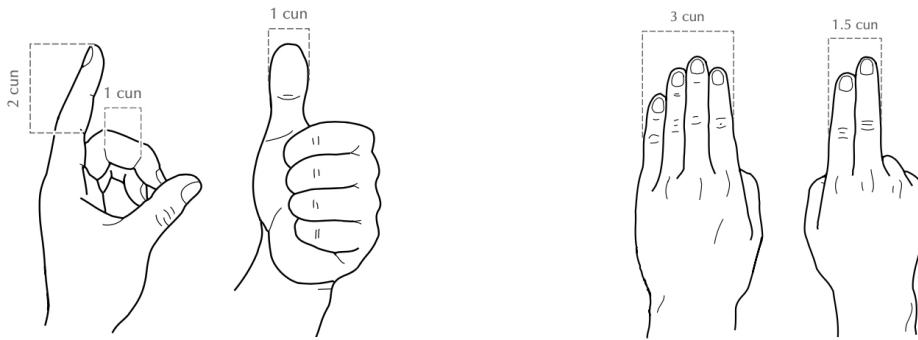
The cun is not a standard distance, rather it is a proportional measurement based on the client's body. In the upper body these measurements apply:

- 5 cun between the navel and the pubis symphysis
- 19 cun between the greater trochanter and the knee crease
- 14 cun between the gluteal fold and the knee crease
- 16 cun between the knee crease and the lateral malleolus
- 15 cun between the knee crease and the medial malleolus



There is a simpler (though less accurate) method of measurement:

- The width of the interphalangeal joint of the thumb is 1 cun.
- The distance between the proximal interphalangeal joint and the tip of the index finger is 2 cun.
- The width of the index and middle fingers at the interphalangeal joints is 1.5 cun.
- The width of the four fingers at the interphalangeal joints is 3 cun.



The measurement is based on the client's hand, not the practitioner's. If you are working on a client who is substantially smaller or larger than you, then you have to make corresponding adjustments.

Though not precise, this method is sufficient for our purposes as acupressure practitioners. If we were inserting needles, we would need to be accurate to within a millimetre. But since you are using pressure, you will exert an influence over a wider area and so even if you are not pinpoint accurate, you will still be affecting the point. That said, the more accurate you can be, the greater the effect you will have.

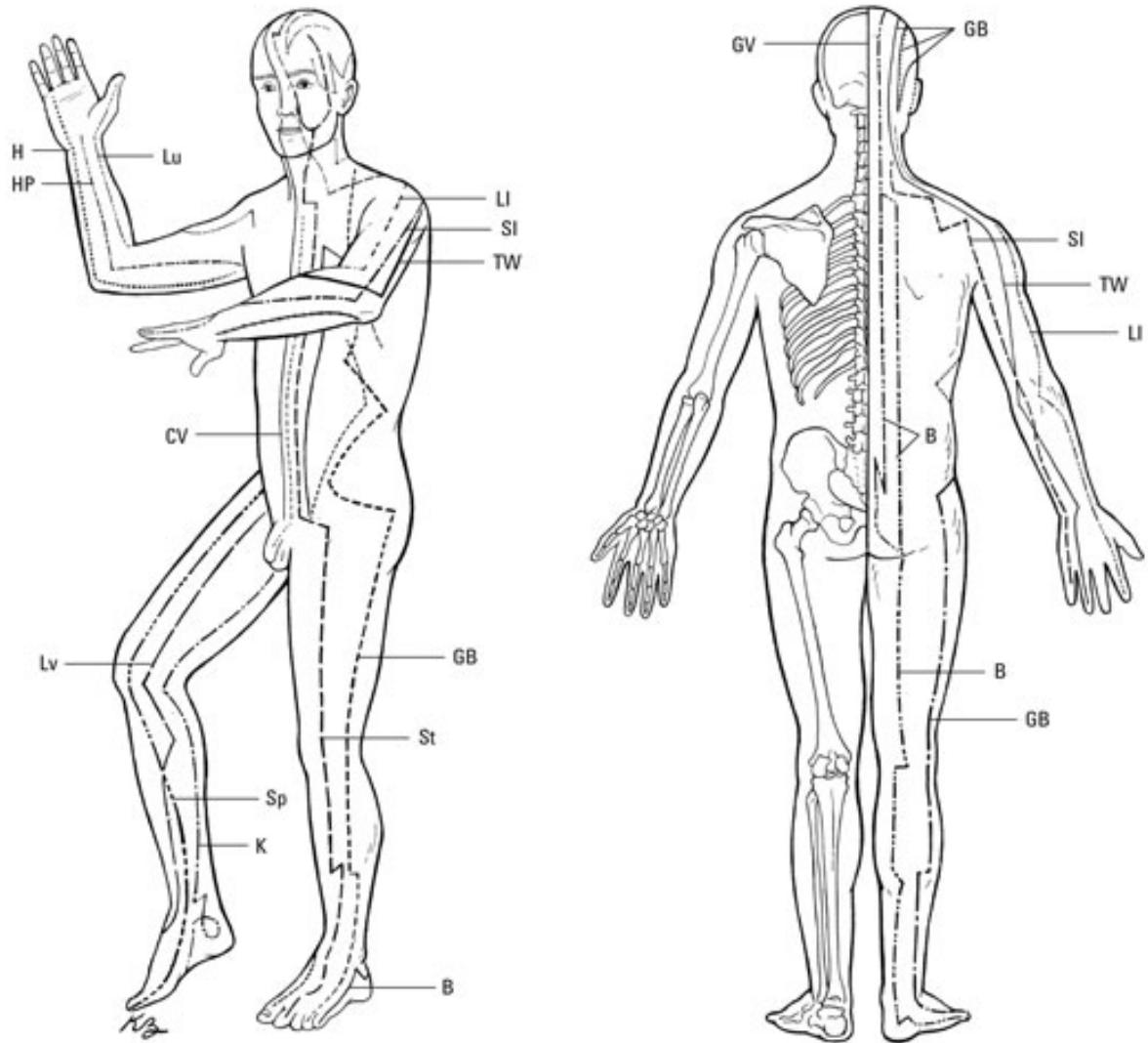
It must be noted that the map is not the territory. Even if you follow the directions exactly, the point may not be quite where the map says it should be. That is because every body is unique and points can be found in slightly different places on different people. Also points can move location slightly over time. Feel for the Qi. The Qi will guide you to the point.

Palpation

Research into the relationship between meridians and fascia has shown that acupoints are not found by using precise mathematical calculations because their locations vary among individuals, and they vary over time in the same individual. The described locations are a guide as to where to find the point, but using this method alone, one could miss the point as much as 50% of the time. Therefore palpation to find and feel the Qi sensation is indispensable.

Meridian Pathways

The 12 organ meridians or channels are the most superficial energy pathways where the Qi can be palpated and influenced. They flow in a continuous circuit around the body in a pattern that can be seen in the table below. Qi is present in all meridians all the time but moves in a sort of high tide around the cycle over a 24 hour period. Points that are held on a meridian can have effects not just locally but along the whole length of the channel.



Chest to hand	Lung	Heart	Heart Protector
Hand to face	Large Intestine	Small Intestine	Triple Heater
Face to feet	Stomach	Bladder	Gall Bladder
Feet to chest	Spleen	Kidney	Liver

In this seminar our focus will be on the yang meridians of the leg. We will make use of points on the Bladder and Gall Bladder and Stomach channels to treat constriction patterns of the lower body.

Lower Back and Pelvis Release

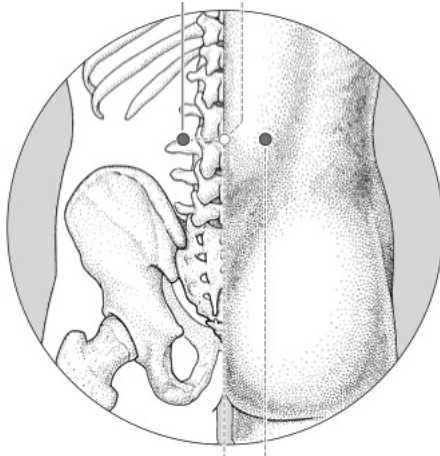
This pattern is designed for the client lying supine (face up), but it can be adapted for prone (face down). In the latter case, do not include Spleen 13.

Bladder 23	In the low back, 1.5 cun lateral to the junction of the 2nd and 3rd lumbar vertebrae, approximately at level of the navel
Bladder 53	In the buttock, 3 cun lateral to the midline at the level of the second sacral foramen.
Bladder 40	In the middle of the posterior knee crease.
Bladder 57	In the calf, at the midline, half way between the knee crease and the ankle. A hollow appears when the ball of the foot is pressed against resistance.
Bladder 60	Posterior to the tip of the external malleolus, in the hollow anterior to the Achilles tendon. CONTRAINDICATED IN PREGNANCY
Kidney 3	Posterior to the tip of the medial malleolus, in the hollow anterior to the Achilles tendon.
Spleen 13	In the lower abdomen, 4 cun lateral to the midline and 0.7 cun superior to the pubic bone.

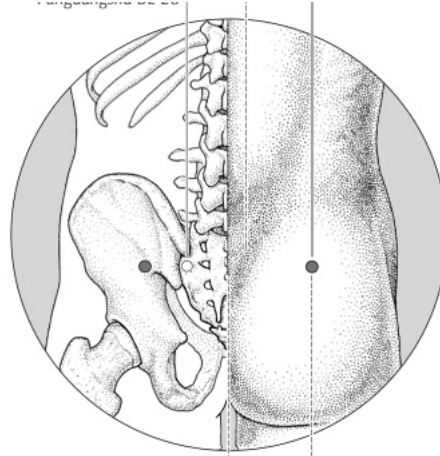
Begin by holding BL 23 + BL 53 together to assess which segment is most in need of release. In both patterns, hold all points on LHS, then repeat on RHS.

Treat the left side first, then the right side.

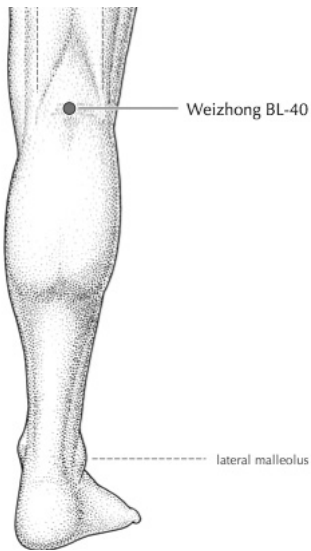
Lumbar Release	Pelvic Release
BL 23 + BL 40	BL 53 + BL 40
BL 23 + BL 57	BL 53 + BL 57
BL 23 + BL 60	BL 53 + BL 60
BL 23 + KI 3	BL 53 + SP 13
BL 62s + KI 6s	



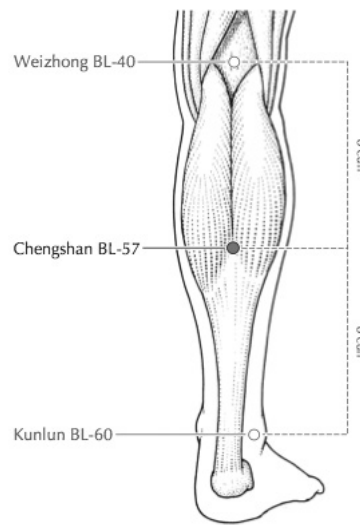
Bladder 23



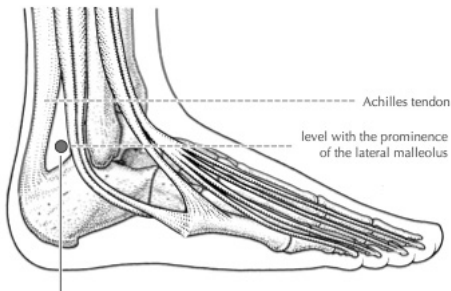
Bladder 53



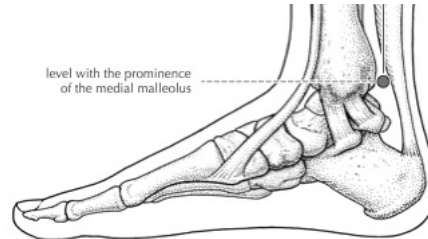
Bladder 40



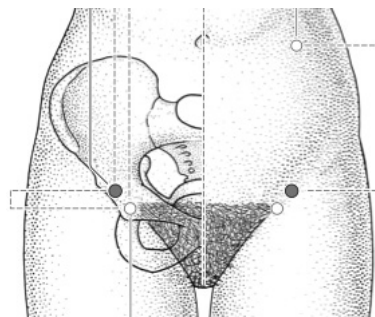
Bladder 57



Bladder 60



Kidney 3



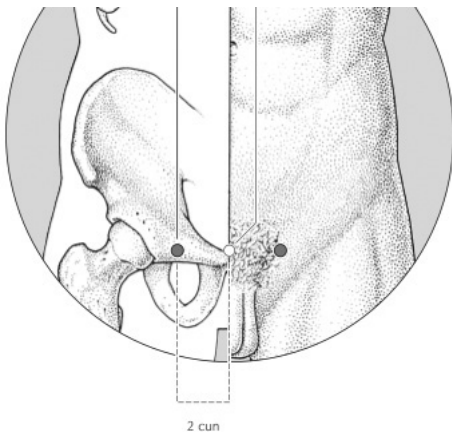
Spleen 13

Advanced Pelvic Release

Earlier you learned a pelvic release based on BL 53. Here we extend the possibilities of treatment by adding some new points (ST 30, SP 9, GB 30) and by releasing both Bladder and Gall Bladder channels. This pattern addresses pelvic constriction generally and is particularly useful for sciatica.

Note that GB 30 is a meeting point with Bladder meridian and so can also be used with the Bladder points of the leg.

Here are the new points:



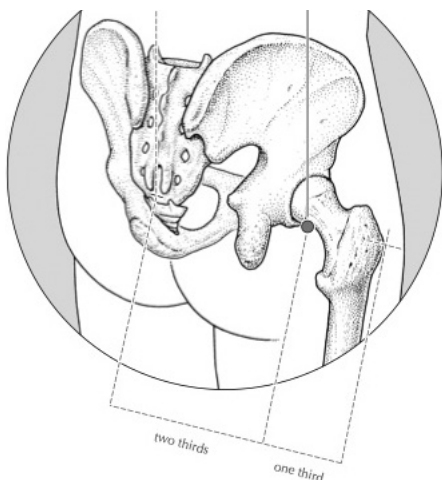
Stomach 30

Level with the pubic symphysis and 2 cun lateral to the midline.



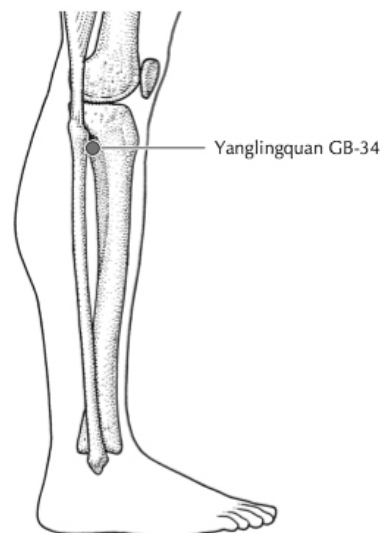
Spleen 9

On the medial aspect of the leg in a hollow between medial condyle and posterior border of tibia.



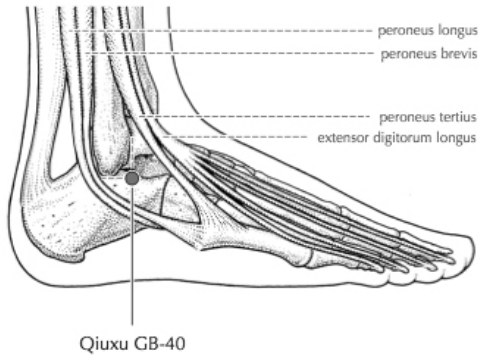
Gall Bladder 30

Level with the sacral hiatus and two-thirds of the distance from midline to greater trochanter.

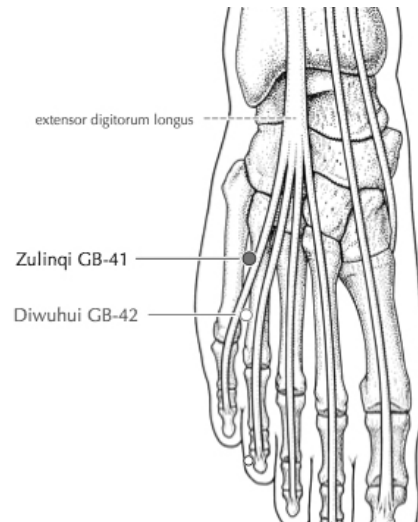


GALL BLADDER 34

Below the lateral aspect of the knee in a depression 1 cun anterior and inferior to head of the fibula.



Gall Bladder 40 In the large hollow anterior and inferior to the lateral malleolus.



Gall Bladder 41 In the depression distal to the junction of 4th and 5th metatarsals.

ADVANCED PELVIC RELEASE PATTERN

Hold BL 53 with	Hold GB 30 with
BL 40	GB 34
BL 57	GB 40
BL 60	GB 41
SP 13	BL 40
ST 30	BL 57
SP 9	BL 60
	ST 30

In deciding which pattern is most appropriate, palpate both BL 53 and GB 30 and begin with the most blocked or tender point. If the leg pain or constriction is more lateral, treat Gall Bladder. If more in the hamstrings, treat Bladder.

As before, treat left side first, then right. If doing both patterns, treat left and right of the first pattern, then left and right of the second pattern

Further Lower Body Release Patterns

Next we will continue with Gall Bladder release patterns of the lateral leg, then Stomach patterns of the anterior leg, and Bladder patterns of the posterior leg.

This section gives us the chance to look at the whole lengths of these three meridians and to see how upper body and lower body constriction patterns can be linked via these meridians. We also examine some conditions of the related organs which can be associated with blocks in the pathways. This knowledge is important as it can give a more holistic picture of the origins of dysfunctions in the body.

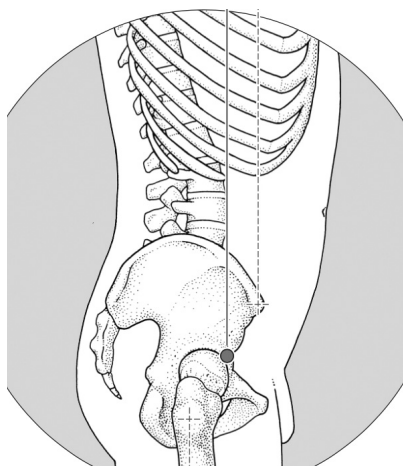
Gall Bladder Meridian

Direction of flow: superior to inferior

44 points

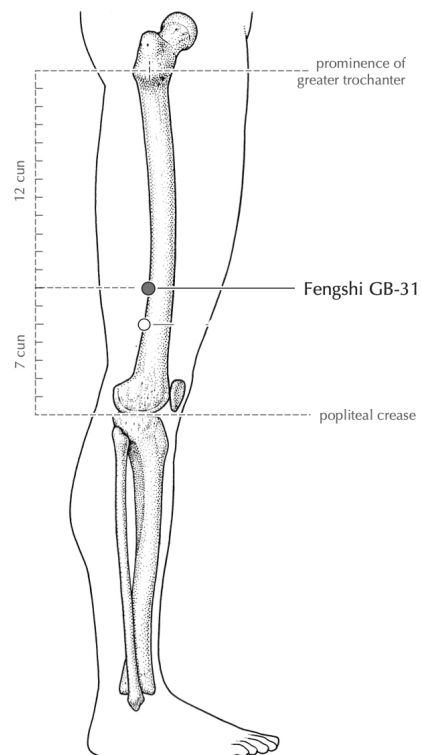


PATHWAY	ORGAN
Headaches, migraines	Nausea
Occipital or temple pain	Vomiting
Neck, shoulder pain	Upper right abdomen
Eye or ear pain	Gall stones
Lateral rib pain/tightness	
Joint stiffness	
Hip pain	
Sciatica	
Lateral leg pain/tightness	
Lateral ankle pain	
4th toe/metacarpal	
Tendons/ligaments	



GALL BLADDER 29

On the lateral aspect of the hip, at the midpoint of a line between the ASIS and the greater trochanter



GALL BLADDER 31

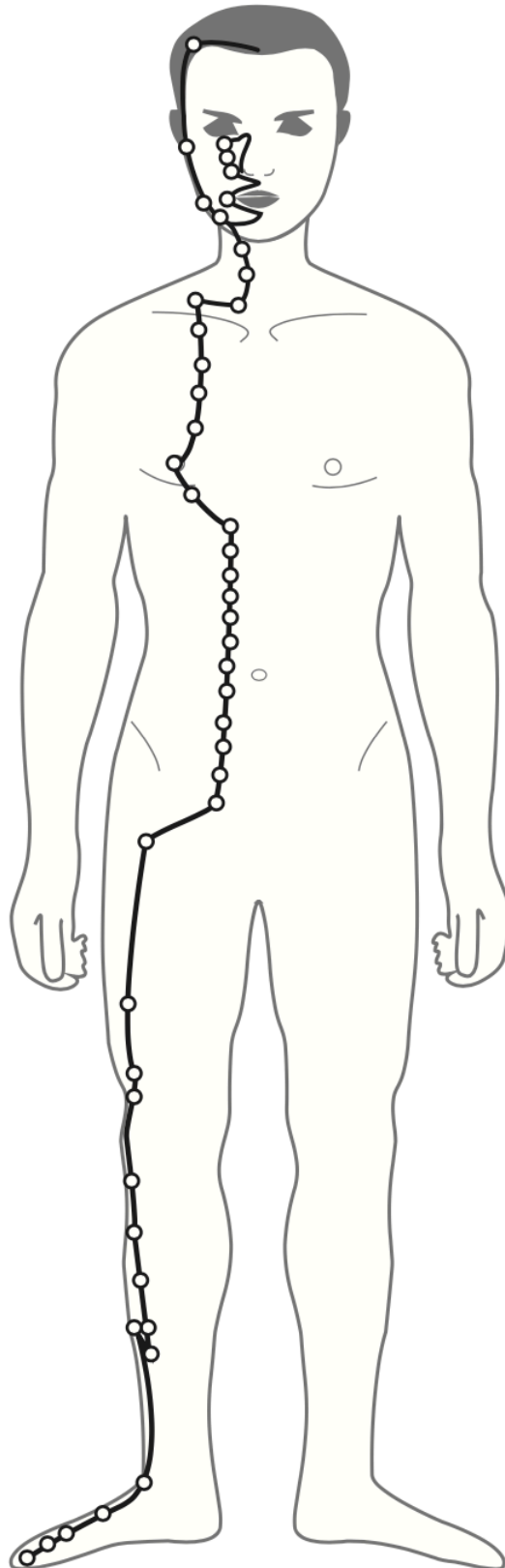
On the lateral aspect of the thigh directly below the greater trochanter, 7 cun superior to the popliteal crease. Typically the middle finger touches this point when the arm is by the side.

See Pages 12-13 for locations of Gall Bladder 30, 34, 40, 41

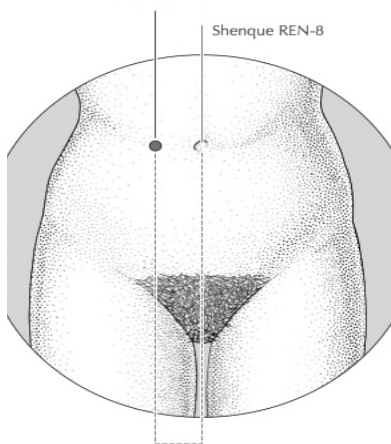
Stomach Meridian

Direction of flow: superior to inferior

45 points

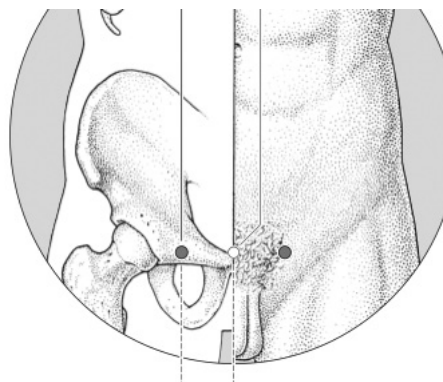


PATHWAY	ORGAN
Sinus infection	Abdominal distension
Lip or mouth sores	Abdominal pain
Jaw tension/pain	Appetite imbalance
Throat/swallowing issues	Overeating
Chest/breast issues	Indigestion
Abdomen pain/discomfrt	Reflux
Quadriceps/ITB issues	Nausea
Knee pain/swelling	Vomiting
Shin soreness	
Pain in dorsum of foot	



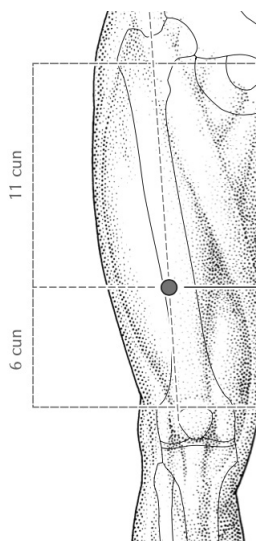
STOMACH 25

2 cun lateral to the centre of the navel



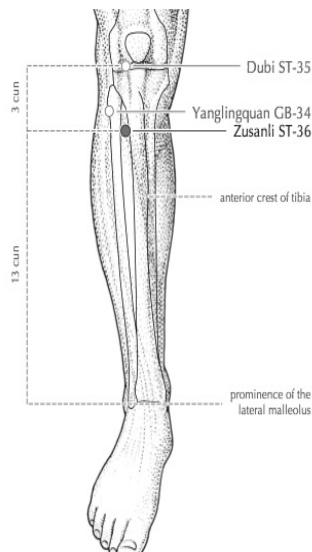
STOMACH 30

2 cun lateral to the midline at the pubic bone



STOMACH 32

On a line between the ASIS and the lateral border of the patella, 6 cun superior to the superior border of the patella



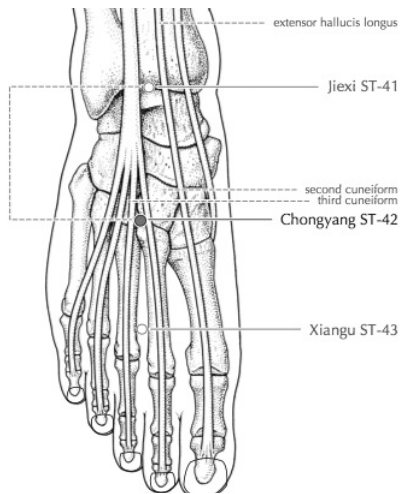
STOMACH 36

3 cun below base of the patella and 1 finger width lateral to the crest of the tibia



STOMACH 40

Half way (8 cun) between tip of external malleolus and base of patella, 1.5 cun lateral to crest of tibia.

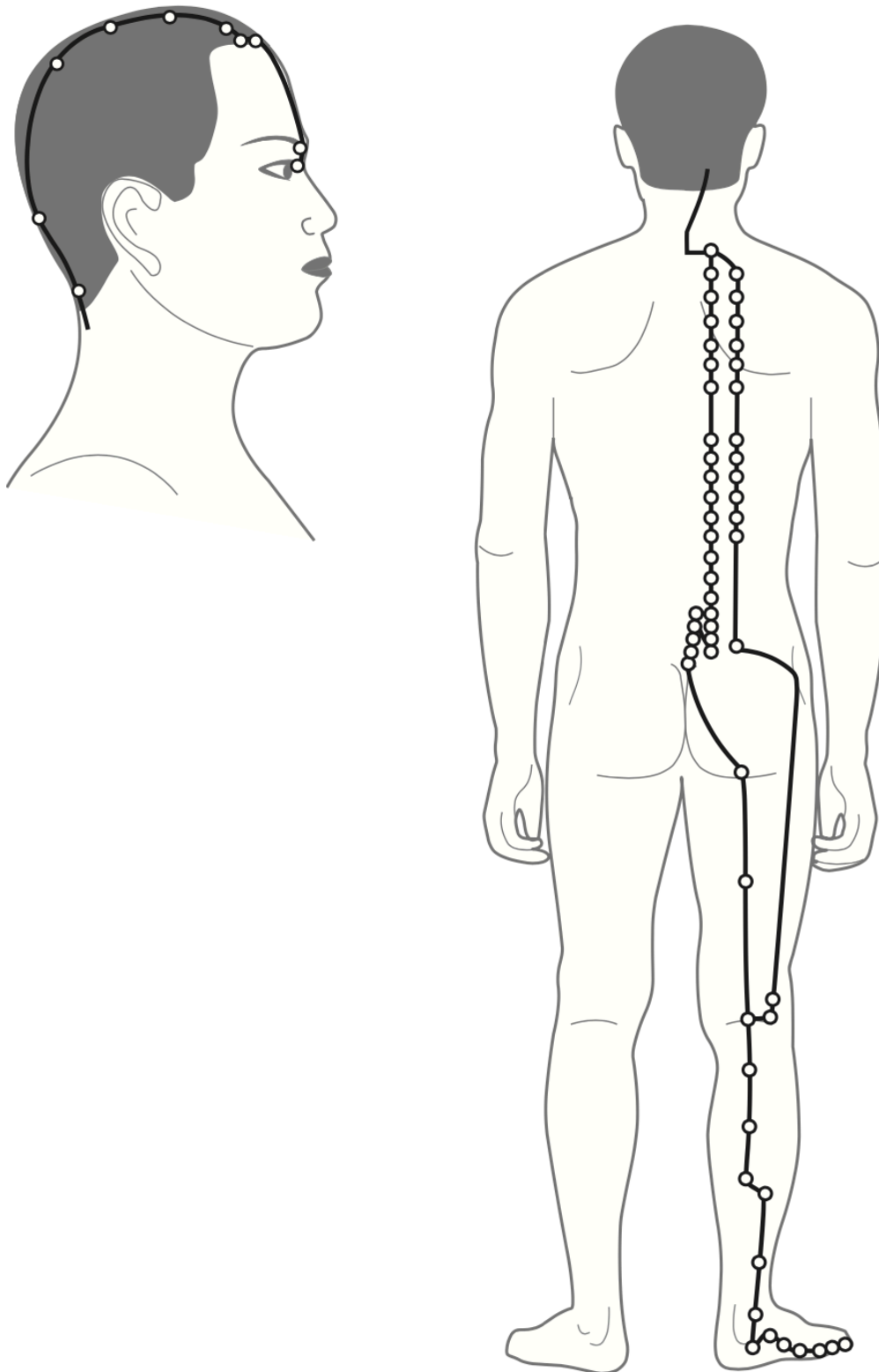


STOMACH 42

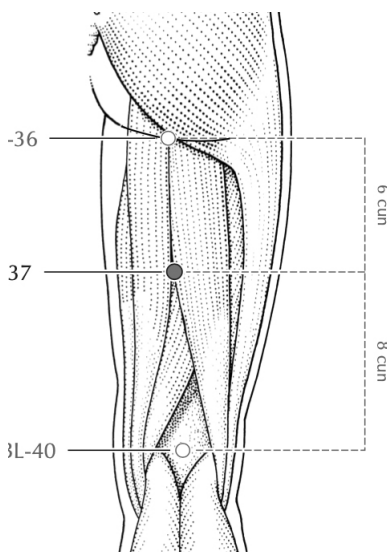
On the highest point of the dorsum of foot, 1.5 cun below ankle crease

Bladder Meridian

Direction of flow: superior to inferior
67 points



PATHWAY	ORGAN
Eye pain	Incontinence
Headaches	Urinary tract infections
Neck pain & stiffness	Cystitis
Back problems	Frequent urination
Hip/sacrum issues	Burning urination
Sciatica	Oedema
Calf/Achilles tendon pain	Prostate problems
Ankle problems	
Plantar fasciitis	



BLADDER 36

In the centre of the gluteal fold between biceps femoris and semitendinosus.

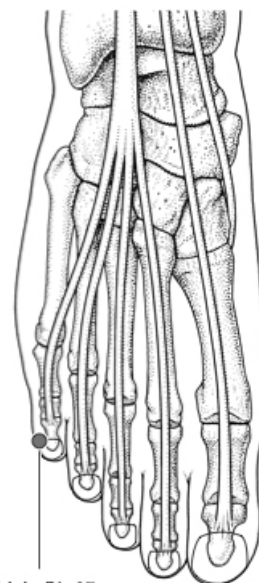
BLADDER 37

6 cun inferior to BL 36 and 8 cun superior to BL 40, between biceps femoris and semitendinosus.

BLADDER 40

In the centre of the popliteal crease between the tendons of biceps femoris and semitendinosus.

See Page 11 for locations of Bladder 23, 53, 57, 60



Zhiyin BL-67

BLADDER 67

0.1 cun from the lateral corner of the little toe nail. CONTRAINDICATED IN PREGNANCY