

VISIT US
ONLINE

www.thelantern.com.au

EditorsSteven Clavey
Bettina Brill
Michael Ellis**Editorial Board**William Campbell, Andrea Kurtz,
Renee Lenti, David McGraw,
Chris Flanagan.**Contact us**

email:
editors@thelantern.com.au

website:
www.thelantern.com.au

snail mail:
The Lantern
160 Elgin St, Carlton
Australia 3053

Subscriptions

Australia: This journal is available by subscription via our website, or email us for a subscription form. In Australia, single issues are for sale through China Books.

International: Visit us online (www.thelantern.com.au) or email us.

Advertising

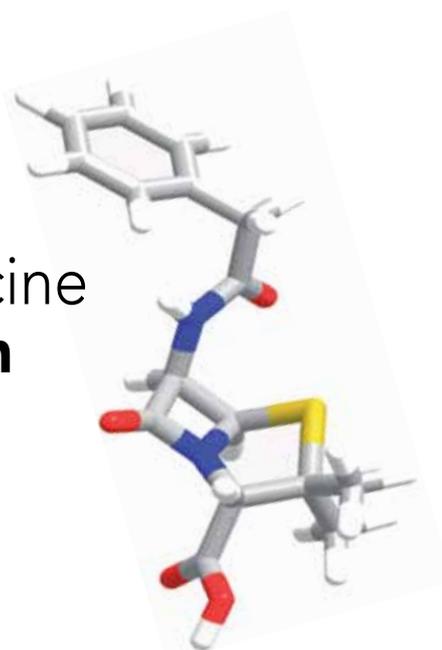
We welcome inquiries regarding advertising. Please contact us at the above address.

Submissions

We welcome submissions of articles or case studies for publication in *The Lantern*. Please contact us beforehand or check our website for technical and style details.

We also welcome letters of feedback, via email or snail mail.

Chinese medicine into the breach



By Steven Clavey

Last month, China's Ministry of Health revealed that each Chinese person consumes on average 138 g of antibiotics a year – 10 times the amount consumed per capita in the U.S. Three times as many Chinese people are prescribed penicillin compared with the international standard. Seventy per cent of inpatients at Chinese hospitals receive antibiotics; the World Health Organisation recommends a maximum of 30 per cent.^a

IT MIGHT READ as shocking to people in countries where Chinese medicine is struggling politically, but here in Australia where national registration for Chinese medicine was established last year, already there are murmurs that Chinese medicine practitioners should be licensed to prescribe antibiotics.

In my opinion this is a bad idea. Don't get me wrong: I love antibiotics. They have changed our world almost as much as the contraceptive pill has – luckily in opposite directions. But this power to change is being squandered on a few generations when it should be conserved for many more. The squandering of power comes

from inconceivably stupid abuse in most countries around the world on the one hand, and on the other, the ever slowing rate of new forms of antibiotics being developed. The end is not hard to see.

And when that end comes, there will be no one else, only us, Chinese medicine, able to fight serious pathogenic invasions. That is, if we remember how to do our job, which is to enhance the body's own sophisticated mechanisms of dealing with an encroaching pathogen. These mechanisms include fever and sweating, vomiting, sneezing, diarrhoea, bleeding^b and passing through the urine. We preserve effective enhancement techniques such as releasing the exterior through

a. *Time Magazine*. www.time.com/time/world/article/0,8599,2103733,00.html, accessed 28/12/12.

b. Remember *Shang Han Lun* line 46 regarding external bleeding, especially nosebleeds, as an ejecting strategy for pathogenic qi.

The Lantern is a journal designed for Oriental medicine professionals, and treatments described herein are not intended for self-medication by those without training in the field. *The Lantern* and its editors are not responsible for any injury or damage that may result from the improper application of the information in this publication.

THE LANTERN is a journal of Chinese medicine and its related fields with an emphasis on the traditional view and its relevance to clinic. Our aim is to encourage access to the vast resources in this tradition of preserving and restoring health, whether via translations of works of past centuries or observations from our own generation working with these techniques. The techniques are many, but the traditional perspective of the human as an integral part, indeed a reflection, of the social, meteorological and cosmic matrix remains one. We wish to foster that view.

diaphoresis, emesis, purging, diuresis and strategic bleeding. The proper use of these techniques is not easy to get right, as they are subtle and take practice. The best of our predecessors, for example, would take note of the ejection route the body was preparing to employ by recognising the signs that indicated each route. They would then use herbs and needles to encourage that process, to help the body's own long-refined mechanisms of defence.

ANTIBIOTICS, OF COURSE, do not work through these mechanisms. Their use is more of a "scorched earth" policy of indiscriminate destruction, done *for* the body rather than *by* the body – and it has been tremendously successful. Yet there is always a price. We do not quite know the total price yet, although there are indications,^c and common sense can predict others. We all know that when something is done for us, we tend to lose the ability to do it ourselves. Having a powerful friend who constantly defends us bodes ill for the time when that friend is no longer around: we will then be unable to defend ourselves.

Excessive use of antibiotics means our bodies lose the ability to adapt to the pathogens that they will have to deal with in the future; and this will be a future in which the pathogens themselves have been honed to a high level of battle efficiency by struggle with a powerful foe over many decades. *They* will be strongest just when *we* are weakest.

Again, the result of this scenario is not hard to predict, and since the suffering to come will likely be borne by my children or grandchildren, I have

c. Eg, are antibiotics contributing to degenerative diseases? Some studies suggest so:

Velicer CM, Heckbert SR, Lampe JW, Potter JD, Robertson CA, Taplin SH: Antibiotic Use in Relation to the Risk of Breast Cancer. *Journal of the American Medical Association*, February 18, 2004; 291(7): pp. 827-835.

Lone Graff Stensballe, Jacob Simonsen, Signe M. Jensen, Klaus Bonnelykke, Hans Bisgaard: Use of Antibiotics during Pregnancy Increases the Risk of Asthma in Early Childhood. *The Journal of Pediatrics*, November 2012.

an emotional investment in trying to change the outcome.

It is insane to limit ourselves to a single mode of defence, yet that is what we are doing, and calling it "scientific". It is not, of course, science, but rather "scientism", a dogmatic religion.

In just the same way as our bodies are losing the ability to defend themselves, if we as Chinese doctors succumb to the lure of power and fail to practise our own techniques we will lose the ability to do so.

Already many students have attempted "sweating" or "purging" and failed through lack of proper instruction or practice, and concluded that the techniques do not work. One is tempted to recall the African witch-doctor who had heard of brain surgery but dismissed it as superstition, because each time *he* tried it the patient died.

Well, there are certain fundamental requirements for any technique to succeed. One indispensable requirement is to possess sufficient trust in the possibility of efficacy that one will attempt to learn and use the technique, and to use it in the proper situation. If we are impatient or do not try because we believe it will not work, well then it fails before it is even attempted.

We who live and practise Chinese medicine in the West are taught every day not to trust our own medicine. Only Western science is true, only the Western way of handling things is right: try to assume control, take over, ram through a solution. Didn't work? Hit it harder.

These widespread attitudes are unconscious assumptions, rarely examined or verified. And that included me, until one day...

FOR THE FIRST 10 years of my practice I tried to use herbs as if they were antibiotics: attack the pathogen, kill it off, use herbs shown by Western research to have anti-viral activity, and use them in big doses. If it did not seem to be working, use more!

After one such battle, in this case on myself as patient, I had used just about

every "anti-viral" I could think of, and my poor stomach could not take the ever-increasing doses of bitter-cold herbs. My appetite was gone, I was nauseous and had epigastric soreness ... and still I was feverish, chilled, aching and sore. So finally I turned to an old standby reference text: the *Shi Bing Lun* (Discussion of Seasonal Disorders) by Lei Feng, and found a formula that suited the season and nature of my disorder. I could tell, though, by looking at the formula, that it would not work. The doses were just too small, there were not enough herbs, and not only that, I could see no anti-virals. But, and this was why I tried it, at least it was not going to hurt my digestion. This was the formula, called by Lei Feng his *xin wen jie biao fa* (acrid warm exterior releasing method):

<i>Dàn Dòu Chǐ</i>	9g Sojæ Semen Prep.
<i>Xīng Rén</i>	4.5g Armeniacæ Semen Amarum
<i>Fáng Fēng</i>	4.5g Saposhnikoviae Radix
<i>Chén Pí</i>	3g Citri Reticulatae Pericarpium
<i>Jié Gěng</i>	4.5g Platycodi Radix

Add three spring onions (or "scallions") while cooking.

In the event, not only did it not hurt my digestion, it cleared up my cold symptoms overnight. This was a big revelation for me, and the beginning of a new view on how we should be engaging the body's extremely subtle mechanisms of dealing with attack.

IF CHINESE DOCTORS were allowed to prescribe antibiotics, how many students would take the more difficult route of learning and using our own traditional methods? How long before our patent medicines also contain antibiotics and later, who knows, perhaps other chemical drugs to "strengthen" them?

It will be up to us. If we have lost our ability to perform our job by taking what seems like the easy way out, then we will not have lived up to our potential destiny.