Chapter

- 12 -

Hara

Shiatsu

Naoichi Kuzome, a shiatsu therapist living in Kotohira, Japan, has practiced for over sixty of his eighty-five years. His case reports include two hundred eighty thousand patients. The author was honored and fortunate to have gained the opportunity to study with him. The information herein presented is a summary and compilation of his many years of experience and represents most of his written work on hara diagnosis and treatment.'

Kuzome's diagnostics and treatments are straightforward and extremely effective. They may be used in a clinical setting or as home treatments. His diagnosis is almost exclusively abdominal with attention to hardness, tightness, tension, lumps, looseness, weakness, and reactions or sensations that move with pressure. The latter are particularly noteworthy in Kuzome's system. Almost exclusively his treatments are simple shiatsu techniques performed on the reactive areas found, thus providing a range of home treatment techniques that complement clinical practice. The results obtained by these treatments are well known; the acupuncturist should not fall victim to the prejudice that only needle treatments are "professional." Over the course of clinical practice, there will certainly be cases where these treatments alone are all that is required.

The information in this chapter differs from the usual acupuncture literature as there is no separation of the diagnostic and therapeutic phases. The procedures are actually very simple to use and require no further diagnostic confirmation. The treatments themselves are almost entirely oriented to patient self-involvement in the healing process. Practitioners of this therapy act as teachers, using their skills to show patients how to treat themselves. Coupled with breathing exercises, exercise, and the use of moxa at home, many problems are relieved without further clinical visits. Other problems respond best to home treatments in conjunction with clinical procedures. This style of treatment helps relieve the financial burden associated with many chronic conditions. The psychological and spiritual benefits of a patient becoming more "in-touch" with themselves through active involvement in their healing process are now becoming more generally recognized. Kuzome's work is a practical step toward this ideal.

Many people tend to limit the application of shiatsu to use as a method of relaxation, rather than as a method of treating disease. Kuzome comments that he treats everything from the abdomen, even knee pain or toothache. He stresses the importance of home treatments and patient involvement in their healing process:

Explain to the patients that even if their symptoms go away, they should not stop treating themselves until the lump or tightness on the hara has completely passed away as well. The symptoms can easily return from this lack of self-attention.

He also notes that many patients are lazy, not following through with their treatments. These people don't get as good results as those who are diligent. Whether the patient is diligent or not, the self-treatment techniques reinforce clinical treatments, providing a firm base of consistent improvement. This becomes clearer, not just in practice, but also in the analysis of these techniques. Many of the abdominal patterns relate to the diagnosis of internal medicine and acupuncture. In large part, much of the material is rooted in classical medical ideas.

Kuzome offers specific indications that help determine the effectiveness of hara shiatsu for particular patients. If, when the patient lies down, the rectus abdominus muscles appear raised, tight, or clearly defined, this shiatsu therapy will be effective. With the patient lying down, palpate along the upper edge of the abdomen below the rib cage. If there is swelling or tightness, particularly if the fingers are not able to slide up and under the ribs, these techniques would be of use. If an examination of the umbilicus reveals raised muscle or skin around the edges of the umbilicus, this too may indicate problems that can be ameliorated with his treatments. Pulsing or palpitation that is visible on the abdomen, or vascular spiders and other visible circulatory problems on the legs, are indications for this therapy. Kuzome notes that these problems can be treated quite effectively. If the areas around CV-21 or CV-20 are painful or reactive in any way, use these treatments. Kuzome reports that pain in these areas is due to tension of the rectus abdominus muscles which strains the rib cage.

Another manifestation of strain on the rib cage is the physical displacement of the ribs themselves. Generally, the wider the spread of the ribs the more likely that the person is healthy. Ribs that are more closely spaced may be the result of a natural predisposition, but are often due to excessive tension of the rectus abdominus muscles. Kuzome has noticed that people with closely spaced ribs often develop problems of the stomach or fluid stagnation. These problems can result from such contraction of the rib cage. Shiatsu therapy would be a useful treatment methodology for contracted ribs.² If the rib shape is not a natural predisposition, it will respond to treatment by becoming more opened and raised. This change is most often seen in children; their response is quick and obvious. Also, in such cases of contraction of the ribs, if there is tension or pain anywhere on the rectus abdominus muscles, especially near the pubic symphysis, these areas should be treated as well. Since it is very hard to tell if the rib shape is a natural predisposition or a clinical indication resulting from excessive tension of the rectus abdominus muscles, it is important to try treating the condition.

Reactions such as pain, tension, tightness, or lumps that are observed in the areas palpated are good indications for the use of hara shiatsu. Reactions found on the abdomen may be categorized as follows:

Anatomical locations
Most significant reactions
General comments
Common associated symptoms

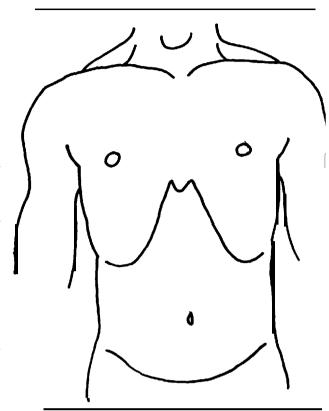


Figure 12.1 A healthy spread of the rib cage

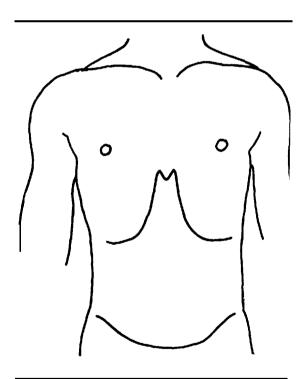


Figure 12.2 A narrow costal arch • unhealthy spread of the rib cage.

Though primarily a practitioner, and only secondarily a theorist, Kuzome nonetheless offers notes and comments that provide an understanding of prognosis and of the diagnostic process. Since he is not afraid to treat people whom he diagnoses as soon to die, nor to admit his occasional mistakes, close attention to his cases is valuable. For example, in his experience people who have had a particular abdominal surgery (especially of the lower abdomen) tend to have some certain pulsings on the abdomen, usually the upper abdomen. He also notes those indications where, before jumping to diagnostic conclusions, we should wait to see if the reaction decreases with passing of gas or the initial application of shiatsu. He adds that in certain cases, the patient might pass very strange stools after regular massage.

Stressing the importance of a very thorough and complete diagnosis, Kuzome suggests that too close attention to areas of the abdomen most easily and commonly found to be reactive need be avoided; When applying his techniques, follow these guidelines:

Use the tips of the fingers.

Apply pressure with the fingers perpendicular to the abdomen.

First touch the skin level, then press to deeper levels.

Keep the patient relaxed, the patient's legs stretched.

The patient should have an empty bladder.

Keep at the same level as the patient.

Use no pillows, or only a head pillow.

Have the patient lie face up, arms at the sides, legs extended.

It is easy to miss diagnostic signs if the patient's legs are bent, as the rectus abdominus muscles become less tense and thus less reflective. When treating, keeping at the same level and height as the patient ideally centers your movements for both diagnosis and treatment, and facilitates the use of your own energies from the hara. When Kuzome treats patients who are bedridden in hospitals he hops onto the bed and works kneeling next to the patient.

Kuzome comments concerning important things to remember. For example, when palpating a fist-sized area around CV-12, should the fingers sink in with no resistance, this is a sign of no stomach qi, a relatively serious condition. This situation may be found in patients just before they die. Great care should be taken in treating a person with such a condition. In another instance, when palpating below the sternum, should the area prove hard like a board with only light pressure, this too may be a sign of impending death, and of particular concern if the rest of the hara were very weak and vacant. Again, great care should be taken in treatment. Kuzome has noticed that patients who have chronic problems may go through what we would call a minor healing crisis. In these instances, symptoms that occurred through the years during the development of the problem can recur. The recurrence is usually mild. He describes the development of the problem as similar to climbing a mountain. The healing process is like coming down the mountain. At certain heights, when either climbing or descending, the same experiences can occur.

At height 1, the symptom might be excessive tension or aching;

- at height 2, mild low back pain;
- at height 3, mild digestive problems;
- at height 4, more severe digestive and low back problems;
- at height 5, severe low back and digestive problems.

If many areas of the abdomen elicit shooting reactions, particularly reactions over all the body, an infirm hara is indicated. This strongly suggests a psychological component. Often patients with this conformation seem emotionally upset or disturbed, or have poor concentration. Treating these reactive areas can have profound effects on such patients.

Kuzome found that certain patients who practice intensive meditation and breathing techniques can manifest exaggerated abdominal reactions. This might occur when adverse abdominal conditions are extant prior to undertaking such a discipline. Meditative techniques or breathing practices have a catalytic effect. He has often recommended that individuals commencing such disciplined activity first take cleansing or preventive treatment to address any hidden conditions.

Children, having greater sensitivity and more fluent energy, he has found to be very responsive to therapy. They are often able to change more quickly and more perrnanently than adults. As well, Kuzome has found this system to be quite applicable to treatment of animals. It works well with smaller animals, such as dogs, cats, chickens, ducks. On larger animals, especially on cows and horses, he has found the abdominal muscles too strong for him to have any success. He reported that during the initial diagnosis and treatment the animals would be restive and need restraining. After the initial treatment, the animal would lie on its back as soon as it espied the doctor.

While working with Kuzome the author asked what he understood by the moving qi between the kidneys. Kuzome replied that when one presses with a deeper pressure around or below the umbilicus on the ren mai line, usually above qihai dantian, one can feel a slight pulsing. He then told this story:

One day a neighbor came running into my office, exclaiming that her baby had just died. I ran over to her house to find the doctor standing over the baby declaring that she was dead, she had no radial pulse, no carotid pulse, and no pupil response. Having obtained permission from the presiding doctor, I felt the baby's abdomen. When I pressed around the umbilicus, I felt a slight pulsing. I reasoned that this was the moving qi between the kidneys and that the baby might not be dead, even though the pulses were indistinct. I applied shiatsu to this area for about thirty minutes. The baby suddenly started crying, and revived.

This story is of interest not only because of the apparent miraculousness of a simple treatment, but because a seemingly obscure classical Chinese concept, the moving qi between the kidneys, is something we can touch.

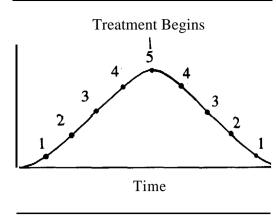


Figure 12.3 Disease process.

Kuzome's diagnosis is supported by the works of other therapists. Denmei Shudo says that to feel a very slight pulsing around or just below the umbilicus is a positive sign, as this is the moving qi between the kidneys, the non-material heart. It is this energy that makes Kuzome's shiatsu therapy so powerful and effective. His work, as follows, shows practically that the abdomen is reflective of both energetic and physical levels of disease and disorder. Treatment based on abdominal indications is indeed root treatment.³

General Treatment Procedure

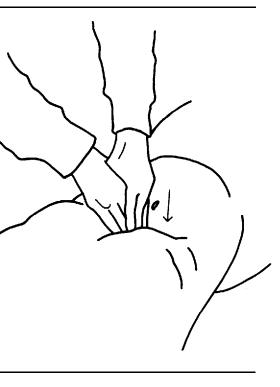
Treatment procedure is similar to diagnosis. Work initially and primarily on the areas that elicit sharp pain or traveling or reflective sensations. Also work on other reactive areas of the abdomen. The most important areas to treat are those that induce sensations that radiate to the areas of the body where the patient's problems manifest. Kuzome calls these places "the origin of the problem." If there are no reactive areas on the abdomen, then the treatment target should become any area of sharp pain sensation.

To treat the reactive areas, use a count of six to apply pressure perpendicularly to the reactive area with the finger tips. The following procedure should be applied continuously for a few minutes.

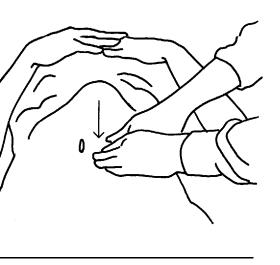
Step	Breath	Practitioner Action
1.	Patient inhales	Poise the fingers over the abdomen
2.	Begin exhale	Begin to apply finger pressure at the count of one.
3.	Exhale continues	Continue pressure, deeper at the count of two.
4.	Exhale continues	The fingers touch at the depth of pressure where reaction is elicited at the count of three.
6.	Exhale continues	The pressure is decreased at the same rate as applied, through counts four and five.
7.	Exhale ends	The pressure is completely lifted by the count of six.

Repeat the procedure for succeeding breath cycles. If the area is too painful to apply direct perpendicular pressure, apply the pressure less directly by angling the fingers; however, the pressure is still perpendicular to the body.

When treating., as when diagnosing, sudden movement should be avoided. Thumbs as well as fingers may be used, depending on what is most comfortable for the patient. Pressure should not be applied mechanically, as this can be less comfortable; instead, put weight behind the pressure, using the energy from one's hara. When done correctly, this is more comfortable for the patient.



ure **12.4** Using one hand to support the er, apply pressure perpendicular to the



grees over the area to be treated with presgrees applied straight down.

These treatment techniques can be applied to virtually all reactive areas 1 the abdomen. Tense, tight, or painful focii should decrease as the treatent continues; this is a favorable sign. If not, the reactions should crease as the patient effects home treatment. In most cases the reactions ill change in the first few days or weeks of treatment.

This type of treatment can catalyze movement in the body. Should a atient experience nausea or dizziness, the treatment may be broadened to ssen these reactions. Because of such cases, regardless of what areas on the abdomen are reactive, first apply pressure up and under the ribs, along the length of the ribs on both sides. Then treat the reactive areas on the abdomen. Finally, treat the areas beneath the ribs again. This is essential, it acts to prevent counterflow qi or to treat its occurrence. It also helps the rectus abdominus muscles loose during and after treatment. uzome talks of this as "emptying the area" below the rib cage. Pressure to the area below the ribs is not applied perpendicularly, but rather at an angle.

The patient should follow this order of treatment at home. Self-eatment should be carried out in a comfortable, supine position, to assure hat the abdominal muscles will relax. Such self treatment should last for it least fifteen to twenty minutes a day, more for serious cases. Kuzome gives the example of a seriously ill and hospitalized patient for whom the doctors had given up all hope, She, on the other hand, was determined to real herself. She would work so intensely on herself while confined to bed hat he would have to come to treat her hands and arms, which would get very tired. Of course, this woman improved and was able to leave the hospital.



Figure 12.6 Treatment and diagnosis of the subcostal regions should be at about a 45 degrees an &e directed up and under the costal border.

Special Treatment Techniques

Kuzome sometimes extends his treatment of the reactive areas on the abdomen to cover other points or areas on the body. For example, he has noticed that if there is excessive pain and tightness or tension on the abdomen, such that pressure causes great discomfort, the practitioner should find and treat one or more of the following reactions:

Pressure pain around SP-10, Pressure pain along lines on the upper thigh that are continuations of the meridian lines on the abdomen, Tension or pain between the third and fourth toes (sometimes the second and third toes). Pressure pain between ST-36 and ST-38.

Usually these reactions are found on the same side of the body as the most severe reactions on the abdomen. Thus, if you find pressure pain around SP-10, or between ST-36 and ST-38 on one or both sides, treat these painful focil with shiatsu until the tenderness decreases substantially or passes away. You should then find the abdomen less tense and reactive.

Similarly, pressure applied to the lines on the upper thigh will help decrease the tension etc. on the abdomen.

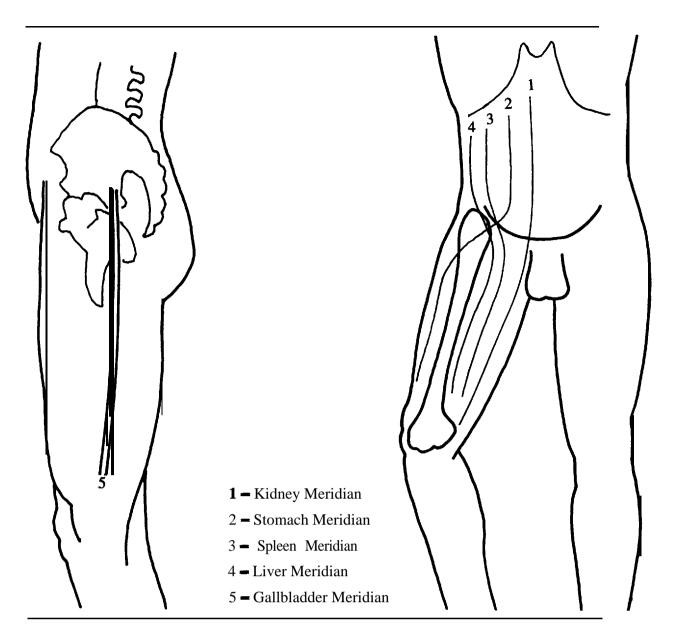


Figure 12.7

Treating the toes is accomplished in a slightly different fashion. It involves placing the thumbs on the toes, just on the toe side of the metatarsal joint of the third and fourth toes, and below the web of the toes. (See Figure **12.8**)

Press the toes apart, comparing left and right sides. Usually there will be more tension or greater pain on the side that was more reactive on the abdomen. As the patient exhales, press the toes apart so as to separate them. After a while, the reactions on the abdomen will lessen, and the toes will become more flexible. As these points and areas can be easily treated throughout the day, with no need to lie down to treat them, they can be included in the patient's self-treatment program.

If a pulsing or palpitation is found on the abdomen, it will usually be accompanied by some tension or tightness. Rather than treat the pulsing directly, which can be quite uncomfortable for the patient, apply pressure to the tense spots next to the pulsing. Try to angle the fingers towards and below the pulsing, as if reaching or pushing below it. Of course, no actual pressure is being applied below the blood vessel. Sometimes, the aorta will be felt; it is situated just in front of and 'slightly to the left of the spine.

If a lump is found, regardless of its kind and consistency, no direct pressure should be applied. Rather, feel around the edge of the lump. If some spot on the edge elicits a strange reaction with pressure, this is the area to treat. Treat only this area. Kuzome follows this protocol when he treats terminally ill cancer patients. He treats to provide relief from pain and discomfort, journeying to the hospitals near his home to treat these

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patients. He finds that he can provide relief of pain and discomfort sufficient to eliminate the need for strong medications like morphine. These treatments are wholly directed at reactive areas on the edge of the tumors. In the case histories that follow there are examples where he has helped patients with cancer; however, he cautions that he does not treat or cure cancer.

If a reactive area around the lump cannot be located, one should work around the entire edge. As we have mentioned, if a lump is found that won't pass with stools or gas, and there is even marginal concern, it is advisable to have a qualified medical doctor examine the patient.

If one finds a noticeably vacant hara, where the fingers easily sink in, look for a tight or tense spot and focus on this area. As one works on it, and as the patient works on it at home, it should become looser. When this occurs, the rest of the abdomen will become firmer and stronger. Such a condition usually takes time to cure. Often, the use of breathing exercises and moxa may help to hasten the healing process.

Infant children who exhibit a vacant (kidney type) hara often inherit it from the mother's identical pre-par-turn conformation. In treating infants, the prenatal energies residing in the lower hara must be checked. It is also a good idea to have on hand a supply of cloths or diapers, as infants easily and involuntarily pass urine or stool during shiatsu treatment.

Careful reading of the material that follows, before applying it to practice, is strongly recommended. Close attention to the case histories is also advisable. If the diagnostic information seems sparse, remember that the abdominal indications are the only recessary element of the diagnosis. It should be noted that Kuzome's descriptions of his case histories distinguish at what degree of pressure (of the five levels detailed previously) the reactiveness was found. This description provides an indication of the level of pressure at which to be attentive for the reaction discussed.

Subs ternal Region

Most significant reactions

Board-like with the first degree of pressure.

Swollen with the feeling of a ball inside at second degree of pressure.

A board-like or "corregated board" area with third degree of pressure.

Too soft at the third degree of pressure (like a slug). This is like pressing an octopus, it feels soft on the surface, harder and tighter on the inside.

With less pressure a soft band of muscle, like a thin tongue.

General Comments

Some patients evincing this conformation will feel pain that may travel anywhere, to the head, downward, inward. Usually, if there is pressure pain here, the patient Will describe it as "uncomfortable." After pressing this area for a long time the patient may become dizzy, particularly when standing up. In this case, press the patients back at any area found to be tight near the thoracic sixth and seventh vertebrae, on either the hwa to points, shu points, or outer bladder meridians.

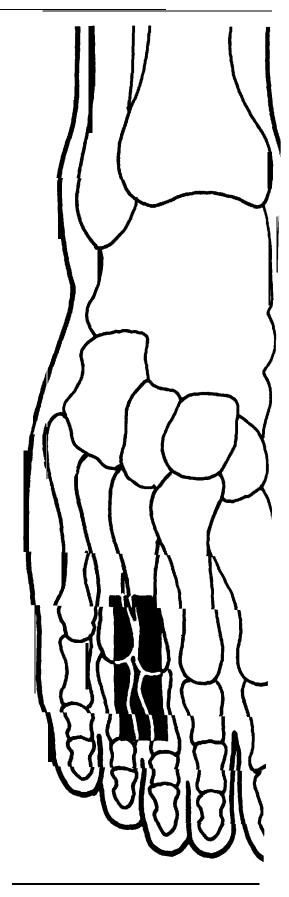


Figure 12.8

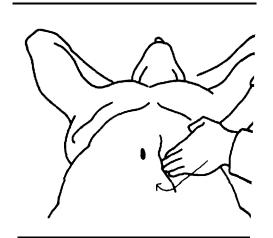


Figure 12.9



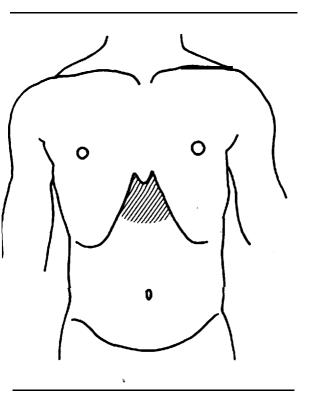


Figure 12.10 Substemal region.

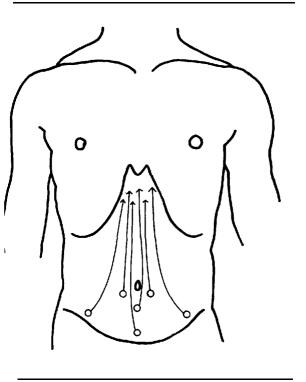


Figure 12.11 Typical areas that commonly accompany substemal reactions.

Associated Symptoms

Headache (usually frontal)

Dizziness

Palpitations

Epilepsy

Feels some suffering inside the chest

Speaking problems

Coughing

Phlegm

Irregular pulse

Neck pain

Insomnia

Overwork of jing and shen (spirit-emotion problems)

No appetite

Epistaxis

Back pain

Easily tired; vacant root qi (basic or source)

If a reaction is found on this area of the abdomen, it is important to palpate the areas shown in Figure 12-11.

Most significant reactions

Positions 1 and 2 are reflex areas for the ovaries and can correspond to emotional problems that are stress-related. If something shows in the substernal region and both of these positions, then the problem reflected at the substernal region is probably emotional, possibly a classical hysteria. Treat areas **1** and 2 with shiatsu.

If one finds the same reaction in areas 3 and 4, which are located halfway between the anterior ridge of the iliac crest and the center of the symphysis pubis, and if there is a lump or knot at the second or third degrees of pressure, treat areas 3 and 4 to correct the problems reflecting at the substernal region and 3 and 4. If the patient has acute stomach pain, gallstone pain, and reaction at position 3 or 4 (particularly on the right side), press here and the pain will decrease.

Position 5 is level with fifth lumbar vertebra; position 6 is just off the pubic symphysis. If, with fifth degree of pressure, a lump or knot is found at areas 5 and 6, and the reaction goes upward to area 4 or towards the lumbar vertebrae, and there is a reaction at the substernal region, then treat areas 5 and 6. The problems reflecting in the substernal region, areas 5 and 6, will be corrected.

Case Histories

Case One: A seventy year old woman suffered from curvature of the spine to the extent that she bowed forward almost 90 degrees. Her body was thin. For the last two months, she had felt stagnation or pressure in the throat with difficulty breathing and bouts of hiccoughs. Following the hiccoughs, she suffered terrible headaches with a pain in the chest that restricted her ability to walk. Subsequently, she became nauseous and vomited frequently. At first, the vomit was clear and watery; then it became