Journal Title: American Journal of Acupuncture (ISSN: 0094-3960)

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Article/Chapter Title: The systems, holism, and theory of micro-acupuncture.


Publisher: Acupuncture Research, Pub. Co.

Year: 1999 Vol: 27 Issue: 3-4 Pages: 2074-22

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The Systems, Holograms and Theory of Micro-Acupuncture

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Abstract: Although acupuncture has been practiced for more than 5,000 years, micro-acupuncture is a recent concept. In the mid-1950s, Nogier discovered that the ear may be utilized as a diagnostic and therapeutic system for the entire body. He explored the topology of acupoints on the ear, observing that it is reiterative of the anatomy. Micro-acupuncture extends these principles to other parts of the body, for example, the foot, hand, nose, and even the orbit of the eye. The development, systems, theory, clinical uses and holograms of micro-acupuncture are reviewed. It is suggested that the holographic paradigm may even have implications for the evolution of a new scientific, social and personal consciousness.

I. Definition
Micro-acupuncture refers to the energetics (Qi) of an anatomic region such as the face, philtrum, ear, hand and abdomen. Each part of the body functions as an energetic microcosm with a diagnostic and therapeutic potential relating to the physiology and Qi of the body as a whole. These micro-acupuncture systems are manifested through micro-acupoints and micro-channels (meridians) whose topologies reflex as holographic reiterations of the body’s anatomy and of the Vital Energy (Qi) configurations of traditional Chinese acupuncture.

A hologram is a three-dimensional image of a given object which contains the information of the object in itself and in every part of itself.

II. The Origins and History
The proto-origins of micro-acupuncture lie in the implicit premises of traditional Chinese medicine. These premises assume a unity between every organism and its ecological context, as well as an internal unity of body, mind and energy. Health is viewed
as the expression of this unity, and illness as its violation.³

Micro-acupuncture expresses this integrity in each part of the body as a functional holographic reiteration of the whole organism. Several energetic structures imply micro-acupuncture systems, but were not consciously developed as such. For example, the classical Chinese Front Mu (also known as the Alarm points) and the Back Shu (Associated points) are both 12-point micro-systems of diagnosis and therapy. Each Front Mu and each Back Shu is a reflex to one of the 12 principal visceral-energetic (Zang Fu-Qi) complexes defined by Chinese medicine, for example, the Lung, Heart or Liver.⁴ Note that the locus of each Mu and Shu point, from the most superior to the most inferior, follows approximately the same superior-inferior anatomical order as the organ to which it is related. Observe that the Lung and Heart Mu and Shu points are in the same superior positions just as the organs are in the most superior part of the torso. The Liver, Gallbladder, Spleen and Stomach Mu and Shu points are in the upper abdominal / thoracic region, just as their organ correspondents are also in the middle part of the torso, and the Kidney, Large Intestine, Small Intestine and Bladder Mu and Shu points are in the lower abdominal / lumbo-sacral region, the same relative localization as the organs to which they reflex. See Figures 1 and 2.

There is no evidence that the ancients associated the Front Mu and the Back Shu with a holographic reiterative principle, partly because the Mu and Shu points are more or less cutaneous projections of the viscera to which they refer, and, as such, are the only micro-systems expressing a 1:1 ratio between the topology of the acupoints and that of their organ correspondents. Nor did there seem to be an awareness that the Mu and Shu localizations of a given organ are approximately on the same horizontal anatomical level, and that each of the 12 Mu-Shu levels defines a torso reflex zone. This observation was first made by Kurakishi Hirata in the 1960s.⁵ Hirata extended his concept of 12 correspondent torso zones to five other regions of the body: the face, head, neck, upper extremity and lower extremity. In each region, the 12 zones reflex to the same 12 correspondents with the order of the zones reiterating the relative topology of their respective organs.⁶ See Figures 3 and 4.

The tongue and the radial pulse are also two ancient micro-acupuncture systems; however, these two systems functioned only diagnostically. One specific approach to the use of tongue and pulse diagnosis relies upon the observation of macro-micro correspondences in the classical Chinese division of the torso into "three warming regions" (San Jiao). The Upper Warmer refers to the chest region with principally circulatory and respiratory functions, the Middle Warmer to the upper abdominal region with digestive functions, and the Lower Warmer refers to the lower abdominal region with sexual and excretory functions.

Classical diagnosis specifically defines the distal portion of the tongue as correspondent with the Upper Warmer, the middle portion as correspondent with the Middle Warmer, and the proximal portion with the Lower Warmer.⁷ See Figure 5.

Similarly, one principal classical method of radial pulse diagnosis explicitly associates the tripartite division of the pulse with the three Warmers: the distal pulse (called the Cun or Inch) position relates to the Upper Warmer (Heart on the left wrist, Lung on the right), the middle pulse (Guan or Bar) position corresponds to the Middle Warmer (Liver and Gallbladder on the left side, Spleen and Stomach on the right), and the proximal pulse (Chi or Cubit) position diagnoses the condition of the Lower Warmer (left Kidney on the left radial pulse and right Kidney on the right side).⁸ This tripartite macro-micro relationship was ob-
served in ancient times, and was recorded as a diagnostic method in the Nan Jing, one of the most ancient extant books of Chinese acupuncture. Figure 6 illustrates the holographic relationships implied in the Nan Jing.

It is not only the anatomy that is holographically expressed in radial pulse diagnosis, but also the Sheng and Ke cycle energetic exchanges among the Five Element-Phases. The Sheng cycle is the exchange of Qi from Water (Kidney) to Wood (Liver) to Fire (Heart and Pericardium) to Earth (Spleen-Pancreas) to Metal (Lung) and back to Water (Kidney). The exchange of energy in the Ke cycle is from Fire (Heart) to Metal (Lung) to Wood (Liver) to Earth (Spleen-Pancreas) to Water (Kidney) and back to Fire (Pericardium and Heart). How extraordinary that the three pulse positions in each hand form a geometric hologram of each of these energetic sequences! (See Figures 7 and 8) These relationships are ignored, and even discouraged, by modern "Traditional Chinese Medicine" (TCM), which tends to regard the Five-Elements with skepticism. Specifically, TCM refers to the style of "herbalized" acupuncture developed in the People's Republic of China (PRC) after 1949. In China, it is referred to as "New Acupuncture" (Xin Zhen Jiu).

The original geometric representation of the Five Elements (3rd c. BC) also implies a holographic relationship with the anatomy of the body. See Figure 9 which also suggests that one aspect of the Five Elements may have derived directly from the anatomical topology of their organ (Zang Fu) correspondents.

The first consciously evolved micro-acupuncture system was that of the ear, discovered by Paul Nogier about 45 years ago after researching what traditional Chinese acupuncture knew about acupoints in the region of the ear. At first, Nogier called the system, auriculotherapy, and later, after discovering a diagnostic vascular-autonomic signal (VAS), he called it auriculomedicine. Nogier believed that the ear was unique in expressing the whole body's energetics because of the neural and vascular profusion in this region.

Nogier first showed the distribution of the auricular reflexes as reiterations of the anatomy in the form of a fetus in the womb with the head acupoints in the inferior position, that is, in the lobule. The viscera (Zang-Fu) were localized in the two conchae, and the extremities in the superior portion of the ear. Later he discovered two other holographic distributions of the auricular points, one of them, the reverse of his original hologram with the head correspondences in the superior auricle, and the other one, localizing the head in the concha. See Figure 10. Nogier associated these three different holographic reiterations of the body with three fetal phases and with the development of the three layers of the dermis: the ectoderm, mesoderm and endoderm.

In 1973, I studied Nogier's work and began investigations based upon an alternative premise; namely, that if the ear is a microcosm of the body's energetics, that every other part of the body might also express the same microcosmic relations to the whole. Indeed, I found evidence of more than 30 parts of the body exhibiting these characteristics. The implication is that every human being (and perhaps other species as well) might manifest multiple diagnostic, therapeutic, and prophylactic systems, and that each part of the body might contain the energetic information of the whole organism. I called these systems micro-acupuncture and began to design protocols to verify them.

Some of these micro-energetic systems were discovered by researchers and physicians. Others originated through ancient or modern intuitive explorations, reshaped by years of empirical usage by many observers. Although very few of these micro-systems were explicitly holographic, my investigations of the loci revealed that every one of
### Table 1-A.

Summary of the Micro-Acupuncture Systems Shown in the Figures 1-21

<table>
<thead>
<tr>
<th>Figure Number</th>
<th>Micro-System or Hologram</th>
<th>Date Discovered or Published</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Front Mu System</td>
<td>3rd century AD</td>
<td>Wang Shu-He.</td>
</tr>
<tr>
<td>2</td>
<td>Back Shu System</td>
<td>3rd century BC</td>
<td><em>Ling Shu</em></td>
</tr>
<tr>
<td>3</td>
<td>Hirata Zones</td>
<td>1972/1976</td>
<td>Hirata/Dale</td>
</tr>
<tr>
<td>4</td>
<td>Hologram of Hirata Zones</td>
<td>1976</td>
<td>Dale</td>
</tr>
<tr>
<td>5</td>
<td>Hologram of Tongue System</td>
<td>Ancient / 1976</td>
<td>Dale</td>
</tr>
<tr>
<td>6</td>
<td>Hologram of Pulse–Triple Warmer</td>
<td>1st century AD</td>
<td><em>Nan Jing</em></td>
</tr>
<tr>
<td>7</td>
<td>Hologram of Pulse–Sheng Cycle</td>
<td>1993</td>
<td>Dale</td>
</tr>
<tr>
<td>8</td>
<td>Hologram of Pulse–Ke Cycle</td>
<td>1993</td>
<td>Dale</td>
</tr>
<tr>
<td>9</td>
<td>Abdominal Hologram of Five Elements</td>
<td>3rd century BC/1993</td>
<td>Zhou Yan / Dale</td>
</tr>
<tr>
<td>10</td>
<td>Holograms of the Ear–Three Phases</td>
<td>1968</td>
<td>Nogier</td>
</tr>
<tr>
<td>11</td>
<td>Chinese Face System</td>
<td>1960s</td>
<td>Chinese research</td>
</tr>
<tr>
<td>12</td>
<td>Chinese Nose System</td>
<td>1960s</td>
<td>Chinese research</td>
</tr>
<tr>
<td>13 A,B</td>
<td>Holograms of Chinese Face System</td>
<td>1976</td>
<td>Dale</td>
</tr>
<tr>
<td>14 A,B</td>
<td>Holograms of Chinese Nose System</td>
<td>1976</td>
<td>Dale</td>
</tr>
<tr>
<td>15 A,B</td>
<td>Vietnamese Face Systems</td>
<td>1984</td>
<td>Chau</td>
</tr>
<tr>
<td>16</td>
<td>U.S. Foot System</td>
<td>1917</td>
<td>Fitzgerald</td>
</tr>
<tr>
<td>18</td>
<td>Hologram of Fitzgerald Hand System</td>
<td>1976</td>
<td>Dale</td>
</tr>
<tr>
<td>19 A,B</td>
<td>Holograms of Yoo Hand System</td>
<td>1990</td>
<td>Dale</td>
</tr>
<tr>
<td>20</td>
<td>Hologram of Chinese Scalp System</td>
<td>1976</td>
<td>Dale</td>
</tr>
<tr>
<td>21</td>
<td>Hologram of Brain Motor Analyzer</td>
<td>20th century</td>
<td>Neuroanatomy text</td>
</tr>
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</table>

them reiterated the macro-anatomy and energetics in the topology of the microacupoints and micro-channels (meridians). A review of a wide range of these holograms reveals our extraordinary macro-micro energetic relationships. See Table 1-A and B.

### III. The Holograms of Micro-Acupuncture

- Figure 11 and 12: *Chinese Face and Nose Systems*. Chinese researchers and clinicians in Shanghai developed the Face and Nose micro systems during the 1960s; their findings were first published in English in 1974. The Shanghai doctors who developed the two systems observed that although acupoints of the Nose system sometimes generated very efficient analgesia for surgical procedures, the use of needles with electrodes on the nose can be uncomfortable. Because Chinese medicine establishes a relation between Lung energetics and the skin, in all surgical procedures that involve cutting of the skin, the Lung point (Yintang) is selected plus one or two other points that are related to the surgical site. Although the systems appeared in a book on acupuncture analgesia, both the Face and Nose micro-systems are also useful in diagnosis and therapy. As in all macro- and micro-acupuncture systems, changes in skin color, tissue, electropermeability or sensitivity at an acupoint locus are signs of pathology in its organ or energetic correspondent. The acupoints which visually, electrically or by palpation indicate pathology are likely to be those which are therapeutically most effective.
<table>
<thead>
<tr>
<th>Figure Number</th>
<th>Micro-System or Hologram</th>
<th>Date Discovered or Published</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Hologram of the U.S. Teeth System</td>
<td>1984</td>
<td>Dale</td>
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<tr>
<td>23</td>
<td>Hologram of German Teeth System</td>
<td>1984</td>
<td>Dale</td>
</tr>
<tr>
<td>24</td>
<td>Hologram of Genital System</td>
<td>Ancient</td>
<td>Taoist / Ramsdale</td>
</tr>
<tr>
<td>25 A,B,C</td>
<td>Wrist-Ankle system</td>
<td>1960s</td>
<td>Zhang Xin-Shu</td>
</tr>
<tr>
<td>26</td>
<td>Hologram of Lips Micro-System</td>
<td>Ancient</td>
<td>Traditional Ayurvedic</td>
</tr>
<tr>
<td>27</td>
<td>Pupil Micro-System</td>
<td>1991</td>
<td>Fu Qiang</td>
</tr>
<tr>
<td>28</td>
<td>Hologram of Eye Orbit Micro-System</td>
<td>1991</td>
<td>Dale</td>
</tr>
<tr>
<td>29</td>
<td>Hologram of Iris Micro-System</td>
<td>1984</td>
<td>Dale</td>
</tr>
<tr>
<td>30</td>
<td>Hologram of the Temporal Sphenoidal Line</td>
<td>1984</td>
<td>Dale</td>
</tr>
<tr>
<td>31</td>
<td>Hologram of the Head Gravity Line</td>
<td>1984</td>
<td>Dale after Rees</td>
</tr>
<tr>
<td>32</td>
<td>Hologram of the AIM Areas</td>
<td>1984</td>
<td>Dale after Rees</td>
</tr>
<tr>
<td>33</td>
<td>Second Metacarpal Micro-System</td>
<td>1980</td>
<td>Zhang</td>
</tr>
<tr>
<td>34</td>
<td>Hologram of the 2nd Metacarpal System</td>
<td>1991</td>
<td>Zhang</td>
</tr>
<tr>
<td>35</td>
<td>Micro-Systems of the Long Bones</td>
<td>1981</td>
<td>Zhang</td>
</tr>
<tr>
<td>36</td>
<td>Traditional Large Intestine Meridian</td>
<td>Ancient</td>
<td>Unknown</td>
</tr>
<tr>
<td>37</td>
<td>Ear Large Intestine Micro-Meridian</td>
<td>1972</td>
<td>Chinese research</td>
</tr>
<tr>
<td>38</td>
<td>Ear Large Intestine Micro-Meridian</td>
<td>1999</td>
<td>Bahr</td>
</tr>
<tr>
<td>39</td>
<td>Foot Large Intestine Micro-Meridian</td>
<td>1975</td>
<td>Dale</td>
</tr>
<tr>
<td>40</td>
<td>Hand Large Intestine Micro-Meridian</td>
<td>1977</td>
<td>Yoo</td>
</tr>
<tr>
<td>41</td>
<td>All Posterior Hand Micro-Meridians</td>
<td>1977</td>
<td>Yoo</td>
</tr>
<tr>
<td>42</td>
<td>All Anterior Hand Micro-Meridians</td>
<td>1977</td>
<td>Yoo</td>
</tr>
</tbody>
</table>

Figures 13 A, B and 14 A, B: The Holograms of the Chinese Face and Nose Micro-Acupuncture Systems. Two holograms are shown for both the Chinese Face and Nose systems since some points are apparent from an anterior view and others from a lateral view.

To provide an idea of how these holograms are derived, observe that the Chinese Nose System (Figure 12) indicates that the medial edge of the eyebrow is the micro-point for the ear while just inferior to this locus is the acupoint for the chest. Both the ear and the chest acupoints could not be shown in the same holographic view on the same side of the body because they are widely separated anatomically, but very close in acupoint localizations. Therefore, the chest point is shown in the anterior view, without showing the ear point. The ear point is shown in the lateral view only in the posterior portion, while the chest acupoint may be seen only in the anterior portion of this view.

Also observe that some points are holographically apparent in only one view. For example, the umbilicus point in the Face system, located in the center of each cheek, just below the Kidney point, is apparent only in the lateral view (Figure 13B).

Figure 15A,B: Vietnamese Face Systems. These systems were developed by Bui-Quoc Chau. I first learned of Chau's face micro-systems in 1990 during my first visit to Cuba. He had been teaching in Cuba in 1988, but had already returned to Viet-
nam, so I was never privileged to have met
him. A Cuban physician presented me with
one of Chau's books from which these draw-
ings were taken.25 A translation of the title
suggests that Chau employs electroacu-
puncture as his main or exclusive treatment
modality. However, we may assume, as in
all acupuncture systems, a wide range of
stimulation methods might be used.

Figure 16: U.S. Foot System. This sys-
tem originated with William H. Fitzgerald,
MD. In 1917, he collaborated with his
colleague Edwin F. Bowers, MD in publish-
ing a manual of their findings that they called
Zone Therapy.26 The manual indicates both
foot and hand reflexes. Figure 16 shows the
relationship Fitzgerald postulated between
ten longitudinal zones of the body and their
projections to ten homologous zones of the
feet. Zone Therapy was carried on and
modified by Joe Shelby Riley.27 Eunice In-
gham, a physical therapist in Riley's office,
took a special interest in this work, further
modifying the system as it applied only to
foot reflexes, calling it foot reflexology28 and
popularizing the method through classes for
laypersons. When in her 80s, Ingham pre-
pared her nephew Dwight Byers to carry on
her work. Byers29 has introduced a cer-
tification process through his International
Institute of Reflexology. Many others have
contributed to the popularization of foot and
hand reflexology.30 Studies validating the
method have been reported by Dale31 and by
Oleson and Flocco.32

Fitzgerald's system is one of many foot
micro-systems that have been in popular
use, some of them since ancient times. For
example, there are records of foot reflexology
systems used in ancient India and Egypt.33
Two Japanese foot reflex systems are known
to the author: Sesokubo, "the method of foot
adjustment," and Watoku Shibata's Sok-
shindo, "foot reflexology." His son, Sadao
Shibata extended his father's pioneer work
in a foot reflexology manual.34 In 1976 in
Tokyo, Sadao Shibata and I compared Fitz-
egerald's and Ingham's foot reflexology with
Sokshindo. There were both similarities and
disparities. It was particularly interesting to
observe that the spine in the U.S. system is
localized along the medial aspect of each
foot, while in Sokshindo the spine is located
along the lateral aspect of the foot.35 Note
that Chinese "foot acupuncture therapy"36 is
not a micro-system. It consists for the most
part of principal and extra points in the
macro-acupuncture (traditional) system
whose loci are in the foot.37

Figure 17 A,B,C: Holograms of U.S.
Foot System. Three holograms are shown.
Observe in Figure 17A how the micro-zones
along the medial aspect of the foot reiterate
the natural curvature of the spine38—the
head is reflexed along the distal phalanx
of the great toe, which resembles a miniature
head; the cervicals correspond with the
"neck-like" indentation of the proximal pha-
lanx; the convex tendency of the thoracic
spine is reiterated in the rounded first metat-
arso-phalangeal articulation; the concave
tendency of the lumbar holographically cor-
responds with the indentation between the
middle of the metatarsal bone and the heel;
and the rise in the sacral spine is repeated
in the rise at the anterior portion of the
heel.

Note that this same anatomical reitera-
tive pattern may be observed, though a little
more subtly expressed, along the lateral as-
pect of the foot, the surface utilized in Sok-
shindo for spinal treatment.

Figure 17B shows that the two feet to-
gether in the Fitzgerald-Ingham system
complete the holographic echo of the body.39
That is to say, the organs which are located
only on the right side of the body, for ex-
ample, the liver and gallbladder, have ref-
exes only on the right foot, while the or-
gans located on the left side of the body, for
example, the spleen, have reflexes only on
the left foot.
Figure 17C illustrates the energetic identity between the rib cage and its foot reflex zone—the metatarsal bones.40

- Figure 18: Hologram of U.S. Hand System. Systems of hand diagnosis and healing, and of hand reading (palmystry) have been prevalent since ancient times.41 Fitzgerald’s hand micro-system shows the same holographic relationships as his foot system.42 Note that in both systems the distal portion of all digits are related to the sinuses, the base of all digits are related to the eyes and ears, and the internal organs are localized in the plantar/palmar surfaces.43 Also observe that Yoo’s holographic hand correspondences (Koryo Sooji Chim)44 are similar to Fitzgerald’s in the distal-proximal superior-inferior localizations. However, they diverge in the medial-lateral and left-right relationships, partly because in the Fitzgerald system the two hands together complete the hologram to the body as a whole, while each hand in Koryo Sooji Chim expresses the complete hologram.45

- Figure 19A,B: Holograms of Yoo Hand System. One of the most remarkable and consummate micro-acupuncture systems is Koryo Sooji Chim (Korean Hand Acupuncture), developed by Tae-Woo Yoo in Korea in 1971.46 Yoo’s hand system not only reveals the macro-micro anatomical correspondences as shown in Figures 19A and B, but also provides a detailed and intricate energetic correspondence of meridians and points for each of the 14 principal traditional conduits.47 Moreover, Yoo utilizes a given hand micro-meridian and micro-point to achieve the same energetic transformations that traditional acupuncture prescribes for their macro correspondents.

- Figure 20: Hologram of Chinese Scalp System. The hologram shown is derived from the scalp micro-system developed in the 1950s and 1960s by Chinese researchers and published in two Chinese publications.48 According to Zhu Ming-Qing,49 research and clinical explorations of scalp acupuncture began in the 1950s right after the Chinese Revolution (1949). Jiao Shun-Fa began his work on scalp acupuncture in the 1960s and developed the first published systematization.50 Directly after Jiao’s publication, researchers in Shian51 and in Shanxi52 published their findings. The first publications in English appeared in 197453 and 1975.54 Figure 20 shows a hologram of a portion of this scalp micro-system, specifically, the face, upper extremity, and lower extremity micro-energetic correspondences. This tripartite division applies to four functional lines of the lateral section of the scalp micro-system: those reflexing (1) sensory, (2) motor, (3) chorea-tremor, and (4) vasomotor disturbances. More recent research and clinical findings on scalp acupuncture have been reported by Zhu, Chen and Jiao.55 Chen’s clinical research findings show excellent results especially in the treatment of stroke.

- Figure 21: Hologram of the Brain Motor Analyzer. This hologram in the frontal section of the left cerebral hemisphere, indicates a micro-system that reiterates the body anatomy in the distribution of motor analyzer functions of the gyrus centralis and the lobulus paracentralis.56 Note that this part of the brain governs our voluntary movements. Since the most critical voluntary movements of the body are in the head and fingers, it is not surprising that evolution has expanded the motor analyzer reflex zones of these two parts of the body to occupy the relatively largest loci.

- Figure 22: Hologram of the U.S. Teeth System. M.L. Rees postulated alveolar bone sensors in the ramus of the mandible which are reflexive to particular spinal segments and specific nutritional deficiencies.57 Goodheart extended this work,58 showing a micro-acupuncture system of the teeth and gingivae correlating also with particular muscles, organs and traditional acupuncture channels.59 Note that if the maxillary teeth are graphi-
cally superimposed on the diaphragm, and the mandibular teeth are superimposed on the superior edge of the pubic-iliac ridge, each tooth displays correspondence to the approximate anatomical locus of its organ correspondent. The exception is the Liver, whose reflex is indicated as the lower second bicuspil, but which holographically would be predicted to reflex in the second or third upper molar. Also note that in some charts, the Small Intestine is indicated in the mandibular region as expected, but also is shown to reflex in the second maxillary molar. These discrepancies may issue from errors in localizations, or they may simply be reminding us that micro-systems, like all phenomena, are not mechanistic structures that follow precise mathematical models. Rees and Goodheart’s ondontology micro-system has been further elucidated by Eversaul, Denton, McWilliams, Smith, Walther and Dale.

Figure 23: Hologram of the German Teeth System. Voll and Gleditsch developed a teeth micro-acupuncture system showing reflexes to the vertebrea, joints, muscles, endocrine glands, sinuses, tonsils, organs, energetic channels and fields of disturbance. In their system, the maxillary teeth and the mandibular teeth are each separately reflexive to the entire body as shown in Figure 23. The mandibular teeth, as in most other holograms, are correspondent with the anatomy of the body. The maxillary teeth are correspondent with the traditional Chinese Circadian rhythm exchange which defines specific 2-hour shifts in energetic dominance that are linked to each rotation of the earth on its axis.

Figure 24: Hologram of the Genital System. According to the ancient Taoist sexology of the Su Nu Ching, there is a mutual energetic (Qi) exchange during sexual intercourse. The male and female genital organs micro-acupuncture reflexes are supposedly each holographically correspondent with the topological division of the body into three sections (Triple Warmer): the upper (Heart and Lung), the middle (Spleen/Pancreas and Liver) and the lower (Kidney). These specific visceral identifications, as shown in Figure 24, define the five Zang (yin) organs. Note that if the middle organs, Spleen/Pancreas and Liver, were transposed, the sequence Heart—Lung—Liver—Spleen/Pancreas—Kidney would reiterate the Ke cycle energetic exchange, just as the Pulse diagnosis system does. Note that according to this hologram, when coupled, the male and female organs coincide in each energetic segment. One implication is that even in the most casual sex, a heart-to-heart linkage is assured!

Figure 25: Wrist-Ankle Micro-Acupuncture System. Wrist-Ankle acupuncture was developed by Zhang Xin-Shu in the 1960s. However, because of the Cultural Revolution, it was not recognized and used in China until 1975. Apparently, that is why Zhang’s book was not published until 1978, a year after the system appeared in this journal. The division of the body into vertical zones is reminiscent of Fitzgerald’s zone therapy of the feet.

Figure 26: Hologram of the Lips Micro-Acupuncture System. Ayurvedic medicine suggests that the Upper and Middle Warmer regions (neck, chest and upper digestive organs) may be diagnosed in the upper lip, while the intestines may be diagnosed in the lower lip. Japanese lip diagnosis also posits a similar holographic relationship, identifying the upper lip with the upper digestive organs and the lower lip with the intestines.

Figure 27: Philtrum. The micro-system of the philtrum was first proposed by Fu Qiang in 1991. In 1995 it was presented in English. There are nine acupoints on the mid-line from the upper lip to the base of the nose, all situated along the Governing Vessel. Like Nogier’s initial hologram of the ear, the acupoints in the philtrum are in inverse order to their anatomical correspondents.
he body into three:
the upper (Heart
Spleen/Pancreas and
Lung). These specific
are shown in Figure 24,
organs. Note that
Spleen/Pancreas and
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Pancreas—Kidney
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Micro-Acupuncture
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upper digestive or-
the upper lip,
agnosis also poses
ship, identifying
organ (Zang Fu), as well as
with the eight trigrams (Ba Gua).80
Peng's system divides the orbit of the eye into eight
treatment zones—five zones related to the
Five Element-Phases and three zones
related to the Triple Warmer. Analysis of the
eye orbit topology reveals that his Five El-
ment sequence reiterates the Sheng cycle
exchange.81 Note how this Sheng exchange82
shown in Figure 28 forms a clockwise move-
ment in the left (yang) eye and a counter-
clockwise movement in the right (yin) eye,
directionally consistent with classical acu-
puncture theory. Chen points out83 that
Peng has revised the ancient order of the
eight zones so that the topology of the left
and right eyes are symmetrically arranged.84
However, the ancient and the contemporary
topologies are both reiterations of the Sheng
cycle, since the difference between them in-
volves only a shift in the right eye sequence
as a whole.85

Figure 29: Iris. Note that the iris holo-
gram expresses the reflex-organ relationship
in three dimensions: superior-inferior, left-
right and interior-exterior. The first refer-
cence to iris diagnosis was by a seventeenth
century physician, Philippus Meyens, who
clearly presented the reiterative relation-
ship between the topology of the iris reflexes
and the topology of their correspondent
organs.86 However, iris diagnosis was not
well known until the Hungarian physician,
Ignatz von Peczely (1822-1911) recorded ex-
tensive clinical observations on every pa-
ient's iris during his entire medical
career.87 Iris diagnosis was further system-
atized by Bernard Jensen,88 who has in-
spired hundreds of twentieth century prac-
titioners in the U.S. and in other countries
to observe the iris as a part of any patient
evaluation.89

Figures 30, 31, 32: Temporal Sphenoidal (TS) Line. The TS Line is one of the
micro-systems utilized in Applied Kinesiology (AK) to diagnose pathologies and evaluate
therapeutic interventions in clinical practice. AK is a method predominantly
developed by George J. Goodheart Jr., a chiropractor in Detroit who is one of the most
creative physicians of our time.90 The loci of the TS Line are distributed in the temporal
region of the head where 20 points are palpated. Each point correlates with particular
spinal segments, organs, acupuncture channels, muscles and nutritional therapies.
According to Rees,91 the premise of the TS Line was first recorded by William Garner Suther-
land, DO.92 Rees further relates93 that Major B. DeJarnette had begun research as early as
1934 on TS Line correlations,94 and that Rees' own research on what he calls the
total TS Line Family95 began around the same time.96 Rees' investigations of the TS
Line, the Head Gravity Line (Figure 31), and the Anatomy Impression Memory (AIM)
Areas (Fig. 32) began with his discovery that brain waves in the alpha range were more prevalent around skull sutures, and particularly around the temporal and sphenoid sutures. Walther credits DeJarnette with the discovery of the TS Line, Rees with its development, and Goodheart with the correlation of each TS micro-point with its muscle and meridian correspondents.

Note that the hologram in Figure 30 takes a surrealist snake-like form which, in the upper horizontal line, courses posteriorly from the temporal region above the eye to above the ear, this portion is correspondent with the upper thoracic vertebrae (T1-T7). Then, winding around to the lower horizontal line, the next segment also courses posteriorly from directly behind the eye to the tragus of the ear. This portion reflexes to the remaining thoracic segments (T8-T12). The last portion snakes upward, reflecting to the lumbar vertebral segments (L1-L5). Although the TS Line is limited to correspondences with the torso, the hologram in Figure 30 also shows the head, buttocks, legs and feet simply to facilitate visualizing the reiterative pattern.

Figures 33, 34, 35: Long Bone Holograms. Beginning in 1980, a Chinese biologist, Zhang Ying-Qing from Shandong University, People’s Republic of China, published several articles and books proposing a theory he calls ECWI (“Embryo Containing the Information of the Whole Organism”). Zhang first discovered a micro-system of the second metacarpal bone expressed through eleven, and later through twelve micro-points, (see Figures 33 and 34). Subsequently, he proposed that every long bone of the body contains this same twelve-point system (see Figure 35).

IV. Micro-Meridians

Figures 36-42: The Micro-Meridians. The macro-energetics of the body as shown by both traditional (Chinese) and modern (e.g., Voll) topologies are not just composed of disparate points invented by nature to treat particular diseases. Instead, acupuncture is defined by a network of bioenergies. Western literature first translated the Chinese terms, jing or mai as “meridians,” assuming that acupoints may have some real existence, but that the energetic connections between points are only topological fictions, like the meridians on a geographic map. Since various studies of the acupoints and the meridians indicate that they have bioelectrical, biochemical, physiological, histological and energetic realities, one trend in modern nomenclature is to refer to jing as channel and to mai as conduit, accepting the concept of our energetics (Qi) as a network of conduits.

If the macro-energetics of the body is expressed as a network of Qi conduits, not just bioelectrical fragments (dissociated acupoints), and if the body’s energetics is inherently holographic, then it is likely that micro-acupuncture systems also have micro-channel structures. However, to date, there are only three systems whose micro-meridian topologies have been developed: those of the ear, the hand and the foot.

Ear Micro-Meridians: Shanghai researchers at the Zoological Research Institute of the Chinese Academy of Sciences hypothesized the six bilateral yang micro-meridians of the ear as projections of the six traditional yang meridians. They did not propose any yin micro-meridian pathways. (Perhaps they believed that the ear manifests only the yang micro-meridians because it is only the yang macro meridians that terminate in the head region of the body, not the yin meridians.) Figure 36 shows the traditional Large Intestine meridian. Figure 37 is the projection by the Shanghai researchers of this macro-meridian to the ear micro-system.

Frank R. Bahr, MD, president of the German Academy of Auricular Medicine,
published a different charting of the micro-meridians of the ear than that of the Shanghai researchers. The Chinese researchers based their projected routes entirely on Nogier’s Phase 1 hologram. Bahr utilized the holograms derived from all three embryological phases, and made his specific determinations through reactions indicated by Nogier’s VAS. His chart indicates the routes of all 12 principal bilateral meridians (the six yin and the six yang), as well as the two medial micro-Extraordinary vessels. He also shows some of the specific macro-micro acupoint correspondents. Figure 38 shows Bahr’s Large Intestine micro-meridian of the ear.

\[ \text{Foot Micro-Meridians:} \] The 14 micro-meridians of the foot, based upon the holographic implications of zone therapy/reflexology, were developed by the author. They are the only micro-meridians that postulate and delineate the routes of the twelve micro-internal pathways (branches) as holographic projections of the traditional internal pathways (chi jing) of the twelve principal meridians. Figure 39 shows the Large Intestine micro-meridian of the foot.

\[ \text{Hand Micro-Meridians:} \] Tae-Woo Yoo’s Koryo Sooji Chim is certainly the most remarkable, detailed and clinically useful of all the micro-meridian systems. Yoo not only has developed the micro-meridian correspondences of all 14 principal conduits, but has also identified the hand micro-acupuncture equivalents of most of the 361 traditional acupoints on these conduits. Moreover, he has also originated micro-points along these 14 conduits that have no known macro-correspondents. Figure 40 shows Yoo’s Large Intestine micro-meridian and its acupoints. Figure 41 shows all of his posterior hand micro-conduits and points, and Figure 42—all the anterior micro-conduits points.

\[ \text{V. Scientific Validations} \]

Although the precursors of micro-acupuncture have a long history of intuitive and traditional development since ancient times, the first scientific explorations, as already indicated, were those of Paul Nogier in auriculotherapy, beginning in 1951. Almost a half-century of investigations by many researchers has provided a strong preliminary scientific validation of micro-acupuncture.

\[ \text{Nogier Investigations} \]

Nogier began to observe the harmonic responses between auricular points and their anatomical correspondences when specific temperatures or electro-stimuli were applied. Sometimes he stimulated an acupoint and observed which part of the body resonated. Sometimes he stimulated a part of the body and searched for the resonant correspondent in the ear. Years of such meticulous explorations and observations led to the discovery of the first hologram—the inverted fetus—and then to the triple innervation of the ear, each deriving from a particular embryological phase. He summarized this work in *Treatise of Auriculotherapy*.

The second phase of Nogier’s scientific explorations was his discovery of what he first called the RAC (réflexe auriculo-cardiaque) and is now known as the VAS (vascular autonomic signal). Although the VAS is a subjective experience that at first was only verifiable through multiple clinical observations by Nogier and others, more recent investigations have reported that it can be instrumentally reproduced through a pressure sensor, and validated biophysically.

\[ \text{Dale Investigations} \]

To validate the hypothesis that it is not only the ear, but also other parts of the body, that reiterate the macro-energetic structures of Chinese acupuncture, I carried out two experimental studies at the Miami Heart Institute in 1974-75. One study tested the hypothesis that manipulation of appropriate micro-acupoints in the Fitzgerald-
Ingham foot therapy system could normalize pathologies in the 12 principal bilateral organ-channels (Zang Fu-Jing) of traditional Chinese acupuncture as diagnosed by Hiroshi Motoyama's computerized Acupuncture Measuring Instrument (AMI). Diagnostic measurements of the 14 principal conduits were taken before and after manipulation of the foot acupoints. The experimental data supported the premise.

The other study hypothesized that there were micro-meridians of the foot that were holographic projections of the 12 principal traditional bilateral meridians and the two medial vessels. The routes and directionalities of these 14 micro-conduits and their internal branches were drawn as projections of the macro (traditional) 14 conduits following the holograms I had developed as implied by Fitzgerald/Ingham's zone therapy/reflexology topologies. Subjects were connected to an electrocardiogram to record base lines, and to a plethysmograph to record changes in the peripheral circulatory voltage. Random changes in the directionality of manual stimulation of the traditional and hypothesized micro-meridians of the Heart and Pericardium resulted in consistent increasing or decreasing voltage readings depending upon whether the stimulation was made in the direction of, or counter to, the flow of Qi as indicated by classical Chinese acupuncture and by the hypothesized foot micro-meridians. The data thereby supported both the premise of the specific directionality of the traditional Heart and Pericardium meridians, and of the routes and directionality of their holographic expressions in the foot.

Voll Investigations

Like Nogier, Reinhold Voll began in the 1950s to investigate acupuncture scientifically. He explored the electro-physiology of acupuncture, modifying and extending the channel structures and identifying precise topologic positions. In Japan, some physicians had preceded Voll in investigating the scientific bases for meridians, while others explored the electro-parameters of acupoints and meridians in tandem with Voll. Voll identified a micro-acupuncture system of the teeth and gingiva, and showed how their micropoints are energetically related to organs, paranasal sinuses and tissue systems, as well as to specific acupuncture channels, joints, muscles, vertebrae and organs. His work on the odonton micro-system was further researched and developed by Jochen Gleditsch. In 1984, the holographic implications of Voll and Gleditsch were explored and compared with the odonton system developed by Rees and Goodheart. Clinical experience indicates that both systems produce results.

Omura Investigations

Yoshiaki Omura has researched and scientifically validated what he calls the bi-digital O-ring test, which can function as an alternative to Nogier's VAS in diagnosing pathologies and determining the appropriateness of particular therapies. The bi-digital O-ring refers to an opponens pollicis muscle of the fingers which is challenged by having patients place their thumb in opposition to another finger while localizing a particular organ, acupoint or substance to be tested. The clinician tests muscle reactivity by applying pressure to separate the fingers while the patient resists. The idea of utilizing muscle testing to receive relevant feedback directly from physiological processes of the body, rather than relying primarily on the patient's and doctor's cerebral (i.e., language and logic) derived information, was developed by George Goodheart and elaborated by David Walther. Omura's contributions were of a two-fold nature: (1) the exclusive use of finger muscles rather than any muscle of the body for therapy localization, and (2) the scientific validation of muscle testing as a diagnostic method. It may be that Omura's exclusive use of a fin-
investigating the ans, while other parameters of acupuncture with Voll, 129 and the acupuncture system showed how typically related to tissue and lyceutic acupuncture, vertebrae and odonton microchord and developed. 131 In 1984, the s of Voll and 131 compared with by Rees and believe indicates results.

Research and that he calls the h can function as VAS in diagnosing the appropria-
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formation, was 900 heart 135 and other. 136 Omura’s 90-fold nature: (1) r muscles rather dy for therapy lo-
tific validation of astic method. It is use of a fin-
ger muscle, rather than any other muscle of the body, 137 provides significantly better results because the finger muscles have a much greater profusion of proprioceptors than any arm or leg muscle. 138

Investigations of Popp and Associates

More recently, it has been shown that biophotons are transmitters of intracellular and intercellular biological and biochemical, as well as bioenergetic information. 139 and that the measurements of acupoint biophoton emissions can be clinically useful, particularly when combined with the bi-digital O-ring test. 140

Problems with Many Scientific Studies

One of the primary difficulties in translating the macro and micro-bioenergetics of the body into scientific terms is the basic contradiction between the fragmented character of the scientific method itself and the integral character of bioenergetics (QI). For example, the scientific method requires the separation of the investigator from that which is being investigated. But bioenergetic exchange goes on whether or not the investigator desires to separate his own bioenergetics from the organism he is studying, although approaches to minimizing the effects of these exchanges have been proposed. 141 The scientific method also requires a control group. Many studies have utilized so-called sham acupoints for their control groups. But regardless of the conventional premise that if there are acupoints, there must be non-acupoints, such is not the case. 142

Tiller’s Investigations

One of the most important recent contributions that validates the premises of macro- and micro-bioenergetics by extending the frontiers and premises of science is the new work of William A. Tiller. 143 In his book, Science and Human Transformation: Subtle Energies, Intentionality and Consciousness, Tiller reports experimental data which verify the existence of what he calls “subtle energy fields,” that is, the macro- and micro-bioenergetics of living organisms. His data also verify the assertions of Qi Gong masters that this energy may be transferred through focused intention. 144 These findings have significant implications for transforming both science and health care by integrating the objective and subjective into a more inclusive paradigm. 145 The holographic paradigm of micro-acupuncture provides a model for this transformation.

Validations and Implications of the Hologram Hypotheses of Micro-Acupuncture

A hologram is a three-dimensional image of a given object which contains the information of the object in itself and in every part of itself. In 1947, physicist Dennis Gabor mathematically postulated the theory of holograms while working to improve the resolution of an electron microscope. He coined the word hologram from the Greek words holos, meaning “whole,” and gramma, meaning “message.” In 1971, Gabor received a Nobel Prize for this work after Emmett Leith and Juris Uapnits transfigured Gabor’s theory into an actual hologram in 1965, right after the laser was invented. 146 A hologram was created by splitting a single laser light beam into two separate beams. The first beam was bounced off an object to be holographed. The second beam was designed to collide with the reflected light of the first beam by using mirrored refractograms. The resulting interference pattern was recorded on a holographic plate which reproduces the original object as a three-dimensional image. This reproduction can be cut in half again and again, ad infinitum, each part always containing the entire information of the original object. 147

Neurophysiologist Karl Lashley searched for more than 30 years for evidence of engrams (protoplasmic traces) at particular sites of the brain which store the information of specific learned tasks. Surgery per-
formed on experimental animals indicated to Lashley that removing the portions of the cerebral cortex that were identified as the corresponding brain engram loci for a given learned task did not erase the ability to perform that task. Lashley concluded that memory seems to be distributed throughout the cerebral cortex. Karl Pribram, a neurophysiologist at Stanford University who in his early career worked with Lashley, came to the conclusion, also after 30 years of research, that each part of the cortex seemed to have the information of the entire cortex, and that the brain was holographically structured.

Pribram also presented the theory that perception is holographic. Psychologists postulate that consciousness is holographic. Other researchers conclude that dreams are structured holographically. Dossey has explored the implications of hologram theory to medicine. Nuclear physicists suggest that the hologram defines the very structure of the universe, and that each of us is part of an eternally evolving holoversal reality whose every part also expresses the whole. Corroboration of this thesis has also come from scientists in other disciplines.

However, although a holographic theory of the body's energetics, of consciousness, and of the very nature and structure of the universe is appealing, and in some ways transcends Newtonian premises, there are problems and paradoxes. A holograph is a fixed three-dimensional representation of an image, thereby remaining well within the perceptual framework of the Newtonian-Cartesian paradigm. To overcome this limitation, Pribram and Leonard have suggested an alternative term: holonomic, to refer to the theory. Bohm further points out that the concept of a holoversal implies constant flux, so he introduced the term holomovement. Wilber observes that regardless of the terminology and of the completeness of holonomic theory in understanding the indivisibility and ever-evolving nature of the universe, if separated from experience, the theory violates the very integrity it postulates. Furthermore, holistic paradigms have surfaced since ancient times, but have not altered our alienated experience and its echoes in our fragmented perceptions.

An ancient Hindu sutra, for example, clearly expresses holonomic theory as a metaphor. It states:

“In the heaven of Indra there is said to be a network of pears so arranged that if you look at one you see all the others reflected in it. In the same way, each object in the world is not merely itself but involves every other object, and in fact is in every other object.”

Lao Tse (6th century BC), an older contemporary of Confucius, provided one of the principal philosophical commentaries on the unity and integrity of all reality which he called the Tao. He says that the idea of separating and identifying each thing as though it were a thing in itself developed at a particular time, and that in the future we will transcend this atomized mentality, recovering our understanding and experience of the universe as an indissoluble whole. The beginning of his Tao Te Ching (Dao De Jing) is a poetic harbinger of holonomic theory.

The Tao that can be told
Is not the eternal Tao.
The name that can be named
Is not the eternal name.

The unnamable is the eternally real.
Naming is the origin
of all particular things.

Free from desire,
you realize the mystery.
Caught in desire,
you see only the manifestations.

Yet mystery and manifestations
Arise from the same source.
This source is called darkness.

Darkness within darkness.
The gateway to all understanding.
Micro-acupuncture reminds us of the holonomic integrity of our body’s energetics as an expression of “holoversality.” It is civilization that introduced the naming of fragments as an echo of its alienated relations and perceptions. However, it is also civilization that has produced the very technology and consciousness that might allow us to transcend these relations and perceptions. Until we do, paradoxically, we will likely continue to be the only species that fails to experience the inherent integrity of our reality, and the only species to have evolved a consciousness of that integrity.161

VI. The Postulates

The theory of micro-acupuncture may be summarized in eleven postulated principles:

1. There may be a micro-acupuncture system in every part of the body. Perhaps, when we know more about micro-biology and micro-energetics, we might be able to demonstrate that micro-acupuncture extends even to the cellular level.162

2. The topology of the acupoints in every known micro-acupuncture system is a holographic echo of our anatomy and of our macro-energetic structures. (This reiteration principle has been observed in more than 30 parts of the body.)

3. Micro-acupuncture systems may be utilized to treat pathological conditions of the macro-energetics (Qi), the viscera (Zang Fu) and the various parts of the anatomy.

4. All micro-acupuncture, as well as macro (traditional)-acupoints, are functionally bidirectional; they are both organo-cutaneous and cutaneo-organ reflexes. The former are diagnostic indicators.163 The latter are potential therapeutic stimuli. The implication is that all micro-acupuncture systems have the potentiality to perform therapeutic as well as diagnostic functions.

5. All micro-acupuncture, like their macro cousins, are characterized by relatively high electrical permeability compared with the surrounding tissue. All acupoints may therefore be located by a galvanometer.

6. It is hypothesized that all micro-acupuncture systems function through micro-channels, just as the bioenergetics of the whole body functions through macro-channels (meridians). It is also hypothesized that the entire macro-micro conduit complex constitutes an extensive energetic network, perhaps similar to the way veins, arteries and capillaries define the vascular network.

7. Some micro-acupuncture systems (e.g., those of the hand and foot) may be useful to patients and to the general public, and may even be taught to children as a first aid method, since they are easily learned, safe to use, and may be manipulated with simple finger pressure.164

8. In clinical practice micro-acupuncture systems may be integrated with traditional or modern acupuncture in four ways: simultaneously, successively, alternately and alternatively.

9. In some micro-acupuncture systems, for example, the ear, foot and Hirata Zones, the points extend to the opposite surfaces (e.g., anterior-posterior), and may be stimulated from either surface.

10. Micro-acupuncture has the potential to perform the same variety of functions as traditional acupuncture, i.e., diagnosis, pain relief, bioenergetic balancing, organ therapy, emotional-mental therapy, systemic therapy, addiction treatment, detoxification, immuno-enhancement and analgesia in surgical procedures.

11. The macro-micro integrity of our bioenergetics, expressed by multilevel hologrammatic correspondences, suggests a new paradigm for understanding the nature and structure of our universe as a holoversal.
Figure 1.
Front Mu System
Wang Shu-He (3rd century AD)

Figure 2.
Back Shu System
Ling Shu (3rd century BC)

Figure 3.
The Hirata Zones
After Hirata 1972; Dale 1976


Figure 4.
Hologram of Hirata Zones
© Ralph Alan Dale 1976

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Figure 5.
Hologram of Tongue System
Ancient / Ralph Alan Dale 1976

Figure 6.
Hologram of Pulse—Triple Warmer
Nan Jing (1st century AD)
© Ralph Alan Dale 1975

Figure 7.
Hologram of Pulse—Sheng Cycle
© Ralph Alan Dale 1993

Figure 8.
Hologram of Pulse—Ke Cycle
© Ralph Alan Dale 1993
Figure 9.
Abdominal Hologram of the Five Elements
After Zhou Yan (3rd century BC)
© Ralph Alan Dale 1993

Figure 10.
Holograms of the Ear—Three Phases
Paul F.M. Nogier 1968

Figure 11.
Chinese Face System
Chinese researchers 1960s

Figure 12.
Chinese Nose System
Chinese researchers 1960s
Figure 16.
U.S. Foot System
William H. Fitzgerald 1917

Figure 17A.
Hologram of U.S. Foot System
© Ralph Alan Dale 1976

Figure 17B.
Hologram of U.S. Foot System
© Ralph Alan Dale 1976

Figure 17C.
Hologram of U.S. Foot System
© Ralph Alan Dale 1984
Figure 18.
Hologram of Fitzgerald Hand System
© Ralph Alan Dale 1976

Figure 19A.
Hologram of Yoo Hand System
© Ralph Alan Dale 1990

Figure 19B.
Hologram of Yoo Hand System
© Ralph Alan Dale 1990
Figure 20.
Hologram of Chinese Scalp System
© Ralph Alan Dale 1976

Figure 21.
Hologram of Brain Motor Analyzer
Neuroanatomy text (20th century)
Figure 24.
Hologram of Genital System
Ancient Taoist / D & E Ramsdale

Figure 25A.
Wrist-Ankle System
Zhang Xin-Shu (1960s)

Figure 25B.
Wrist-Ankle System
Zhang Xin-Shu (1960s)

Figure 25C.
Wrist-Ankle System
Zhang Xin-Shu (1960s)

Note: This diagram is used to look at one's own lips in a mirror. It is a mirror image.

Figure 26.
Hologram of Lips Micro-System
Traditional Ayurvedic

Figure 27.
Philtrum Micro-System
Fu Qiang 1991

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Figure 28.
Hologram of Eye Orbit Micro-System
after Peng/Tu
© Ralph Alan Dale 1991

Figure 29.
Hologram of Iris Micro-System
© Ralph Alan Dale 1984

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Figure 30.
Hologram of the TS Line
after DeFarnette/Rees/Goodheart
© Ralph Alan Dale 1984

Figure 31.
Hologram of the Head Gravity Line
after Rees
© Ralph Alan Dale 1984

Figure 32.
Hologram of the AIM Areas
after Rees. © Ralph Alan Dale 1984

Figure 33.
Second Metacarpal Micro-System
Zhang Yin-Qing 1980

Figure 34.
Hologram of the 2nd Metacarpal System
Zhang Yin-Qing 1991

American Journal of Acupuncture, Vol. 27, No. 3/4, 1999
Figure 35.
Micro-Systems of the Long Bones
Zhang Yin-Qing 1991

Figure 36.
Traditional Large Intestine Meridian

Figure 37.
Ear Large Intestine Micro-Meridian
Chinese researchers 1972

Figure 38.
Ear Large Intestine Micro-Meridian
Bahr 1999

Figure 39.
Foot Large Intestine Micro-Meridian
© Ralph Alan Dale 1975
Figure 40.
Hand Large Intestine Micro-Meridian
Tae-Woo Yoo 1977

Figure 41.
All Posterior Hand Micro-Meridians
Tae-Woo Yoo 1977

Figure 42.
All Anterior Hand Micro-Meridians
Tae-Woo Yoo 1977
Endnotes


2. Holographic reiterations are echoes of a particular entity which have the capability of being divided endlessly, with each division reflecting the original whole. For a discussion of the scientific bases and implications of the holographic paradigm, see the section in the main text entitled "Validations and Implications of the Hologram Hypotheses of Micro-Acupuncture."

3. See the Huang Di Nei Jing Su Wen (The Essential Questions of the Yellow Emperor's Classic of Chinese Medicine), Chapter 1.

4. See Dale 1996 [3], pp 106-118. The term, Front Mu was first mentioned in the Huang Di Nei Jing Su Wen, Chapter 47. However, the only particular Front Mu mentioned by the Su Wen is that of the Gallbladder, and even then, no specific point is identified. Wang Shu-I (210-285 AD) in his Mai Jing (The Classic of the Pulse) identified ten of the twelve Front Mu. One of the two remaining points: CV 5 for the Triple Warmer (San Jian) was added by Huang Fu Mi (215-282) in his Zheng Jia Jia Yi Jing (Systematized Canon of Acupuncture and Moxibustion). There is no record as to who added CV 17 for the Pericardium (Circulation Sex).


6. These twelve-point correspondence systems were called the Hirata Zones whose specific sequence is: (1) Trachea-Bronchi, (2) Lung, (3) Heart, (4) Liver, (5) Gallbladder, (6) Spleen and Pancreas, (7) Stomach, (8) Kidney, (9) Large Intestine, (10) Small Intestine, (11) Urinary Bladder and (12) Genital Organs. It is interesting that in the very same year (1917) that Hirata in Japan published his discovery of twelve energetic zones of the body, William Fitzgerald, in the United States, who knew nothing of Hirata's work, "coincidentally" published his discoveries of foot and hand reflex correspondences with body regions that he too called, Zone Therapy! At this very time, Carl Jung in Germany proposed that there are no coincidences, only synchronicities.


9. Huang Di Ba Shi Yi Nan Jing (The Yellow Emperor's Classic of Eighty-One Difficult Problems), ch 15. (Warring States Period-475-221 BC)


11. Dale 1996 [3], pp 29-36. Even when the concept of the Five Element-Phases was introduced by Zhou Yan in the Warring States Period (3rd c. BC), it was not received very enthusiastically by those who were associated with the Zhou Dynasty hegemony because the theory challenged the Confucian idea of social immutability, introducing instead the principle that all entities are part of processes or phases. In fact, it seems that Zhou Yan's ideas did contribute to the fall of this 800 year-old dynasty, the longest in Chinese history. The Han Dynasty finally took power in 206 BC, 34 years after Zhou Yan died. (See Ronan - Needham 1978; and Lu - Needham 1980.)


13. Chinese researchers during the past half-century have continued to explore ear micro-acupuncture, and although accepting Vogier's holographic principle, they have sometimes shown ear acupoints in different localizations from that of Nogier. See, for example, Liu 1996. Attempts to integrate these divergent loci (Olesen and Kroening 1983, Olesen 1989/90; and 1995) have been very useful to clinicians.


20. The Lung, and all other points on the medial line that bisects the nasal bone (from the Head/Face point to the Spleen point) have loci common to both the Face and Nose micro-systems.

21. See Postulate 4 below.


23. The elongated head in the lateral view of the Nose system that makes the lady look like an outer-space creature, had to take this shape to accommodate the loci of the head, neck, lung and ear micro-points within the narrow boundaries of the forehead and the medial corner of the eyebrows.

24. Figures 15A&B are two of eleven holograms of the face published by Dr. Chau (1984).


26. Fitzgerald and Bowers, 1917. This book was republished in 1952 which edition also included the Zone Therapy section of George Starr White's extensive Lecture Course to Physicians (1923).

27. Riley-Duglsh 1924/42/61.

28. Ingham 1938/51/63/84; and 1963/84.


32. Olesen and Flocco 1993.


34. Shibata 1975

35. See Postulate 9 below.

36. See Zhao 1997 [1].

37. However, there is an implication in Zhao's book of a micro-acupuncture system only on the line which bi-sects the plantar surface. The micro-
points on this line begin in the middle of the heel and end in the space between the 2nd and 3rd toes. The points localized in the heel correspond to the head region while the more distal points are related to the more inferior parts of the body (see p 331).

38. Dale 1976 [1].

39. Ibid.


42. Cf Figures 17B and 18.


44. See Figure 19A & B.

45. Cf Figures 18 and 19A.


47. See Figures 40, 41 and 42.


54. Lu 1975.


56. From Yau 1975.

57. Rees, n.d.


59. For a summary of these relationships, see Dale 1984.

60. Ibid.

61. Ibid.


64. For summary data see McWilliams 1980; and Dale 1984.

65. The circadian rhythm is a Five Element-Phase exchange specifically defined by the sequence: Urinary Bladder—Kidney—Pericardium—Triple Warmer—Gallbladder—Liver—Lung—Large Intestine—Stomach—Spleen—Pancreas—Heart—Small Intestine. (See Dale 1986 [3], pp 97-101.) If we eliminate the Pericardium and Triple Warmer, which have no viscera or teeth correspondents, the order of the reflexes in the maxillary teeth is a reiteration of the circadian exchange. This is not how Dr. Voll determined the maxillary correspondents, and in fact was surprised by the relationship when I shared it with him. Note that two other micro-acupuncture systems are holo-graphically correspondent in relation to energetic cycles rather than anatomic loci: the Radial Pulse (Figures 7 and 9) and the Eye Orbit (Figure 24).
95. The TS Line Family includes the TS Line (Figure 30), the Head Gravity Line (Figure 31) and the Anatomy Impression Memory (AIM) Areas (Figure 32).

96. Rees was always more interested in clinical practice than in recording his clinical findings. Although he began his investigations and clinical usages of these systems in 1935, it was not until 1967 that he published his first book. His second book consisted of a collection of his clinical notes with no date of publication indicated.

97. See Rees 1967; and nd.


100. The later version shows the lower extremity acupoints as two different points: leg and foot.

101. Cf. the 12-point Front Mu, 12-point Back Shu and 12-point Hrata Zones (Figures 1, 2 and 3).

102. Once conventional physicians accept the premise that acupuncture works at all, they are often predisposed to integrate it in their practices as a drug therapy analog. When studying acupuncture, they tend to be impotent with the "theory," and would just like to get on with the "real" clinical requisites of memorizing which points are specific to treat what diseases.

103. For a summary of these investigations, see Dale 1997.


105. Auricular Acupuncture Therapy 1972/74. (In Chinese). The six principal bilateral yang meridians are: Large Intestine, Triple Warmer (Sanjiao), Small Intestine, Stomach, Gallbladder and Urinary Bladder.

106. The six principal bilateral yin meridians are: Lung, Pericardium, Heart, Spleen, Liver and Kidney.

107. The yin meridians of the upper extremity begin in the chest and terminate in the fingers. The yin meridians of the lower extremity begin in the toes and terminate in the chest.


111. Conception Vessel (Ren Mai) and Governing Vessel (Du Mai).

112. Fitzgerald-Bowers; White; Riley; Ingham; and Byers.


115. Yoo 1977/88. Also see Dale 1990.

116. The anterior and posterior anatomical holograms are shown in Figures 1A&B.


118. Frank Bahr proposed at the August 1999 International Consensus Conference that the VAS be renamed the Nogier Pulse.

119. M. Marignan a colleague of Nogier from Lyon, France reported these results in his presentation: Dynamic and Digital Thermography of the Ear at the International Consensus Conference on Acupuncture, Auriculotherapy & Auricular Medicine, August 12-16, 1999, Las Vegas, Nevada.


122. Fitzgerald 1917; Ingham 1938.

123. Motoyama 1975. Dr. Hiroshi Motoyama, Ph.D. developed this instrument in August 1972. It became available for experimental and clinical use in April 1973 when it began to be utilized mainly in Japan. In 1974, through the pioneering initiative of Edwin Boyle Jr., MD, Director of Research, the Miami Heart Institute became the first medical institution in the U.S. to acquire one. In the early 1970s, the AMI was the most advanced computerized instrument available for evaluating the energetics of the body as defined by classical Chinese and Japanese acupuncture.


128. For example, Nagahama 1950.

129. See Nakatani 1972; and Motoyama 1975 [1] and [2].


134. Localizing, or what Goodheart calls therapy localization, is a two-part process: (1) focusing on a particular acupoint or part of the body-by-touching it (Goodheart's method), by placing a color filter on or very near it (Nogier's method), or as Tiller (1997) suggests, simply by concentrating on it-while at the same time, (2) testing a muscle to determine whether this focusing alters the muscle's reactivity. Diminished reactivity of the muscle tested indicates pathology.


137. Goodheart most often uses an arm muscle such as the deltoid, or a leg muscle such as the tensor fascia lata for therapy localization testing.

138. Note that although Goodheart utilizes any muscle for therapy localization, he has also proposed that particular muscles are specific correspondents to each of the twenty bilateral organ-channel (Zang Fu-Jing) systems to the two medial extraordinary vessels. For example, he identifies the tensor fascia lata, hamstring, and quadratus lumborum muscles as providing explicit proprioception for testing the large intestine organ or energetic function.


141. For example, see Van Benschoten 1989.
142. Both macro- and micro-acupoints can be identified by galvanometers as points of relatively higher electropenetrability than the surrounding tissue. However, the selection of so-called shunt points has usually not employed electromeasurements. They have generally been selected simply as loci that avoid the 361 principal points found on the 14 main conduits, implying the ignorance of the research designers that hundreds of extraordinary acupoints and hundreds of micro-acupoints have also been identified and shown to be electropenetrable relative to the surrounding tissue. Moreover, all cutaneous tissue is electro-permeable to some degree. Even ancient acupuncture practitioners noted that the entire skin functions as a conduit of Qi. The ancients specifically noted the conductability of this superficial layer of the body’s Qi by referring to it as Skin Zones (Pi Bu). See Dale with Cheng 1983, p. 24.

143. Tiller 1997.

144. Ibid, chapter 5, pp 189-230.

145. Tiller’s earlier work identified the scientific validity and importance of controlled energy fields (1977) and of electrodermal diagnostic acupuncture testing (1982 and 1987). He already noted in his experimental validation of electrodermal testing that even the data from instrumentation was not exclusively measuring the energetics of the subject or patient alone, but in part also included the energetics of the experimenter or physician (1987, p 19).


151. For example, Anderson 1977.

152. For example, Ullman 1987.


155. For example, see Lye 1983; Sahtouris 1988; Copra, Steindl 1981; Sheldrake 1993; and Tiller 1997.


159. Quoted in Ferguson, 1980.


161. See Dale 1982; and 1995 [1].

162. Terrence and Dennis McKenna expanded holo-graphic brain theory to the possibility that DNA and even subatomic particles operate on holo-graphic principles (McKenna 1975). David Bohm, the well-known physicist is much less tentative on this matter. When asked by Renee Weber whether he believes that every cell is a holonomic echo, Bohm replied: “Well, not necessarily only one cell but any part of one cell has information about the whole.” (Bohm and Weber 1978/85.) We seem to be returning on a higher level to a 16th-17th century medical theory, that has been discredited for the past three hundred years: the theory of preformation and the homunculus that the total information for fetal development is contained in the fertilized egg. (Stedman 1972, p 685) It may be that in some respects we may have been more scientifically accurate five hundred years ago than today with our more simplistic scientific belief that epigenesis (the mere union of the ovum and sperm) accounts for the unfolding of the human individual.

163. The six principal current clinical methods of diagnosing an acupoint indicating pathology are: (1) tenderness in response to palpation (traditional), (2) observation of changes in skin color or texture (traditional), (3) a significant change in the electro-permeability of the acupoint (Voll, Nakatani, Motoyama), (4) a sudden increase in vascular response at the radial artery when the acupoint is aroused (Nogier’s Vascular-Autonomic Signal), (5) a significant alteration of muscular responsiveness when an acupoint is therapy-localized, that is, touched (Goodheart’s applied kinesiology), and (6) the Bi-Digital O-Ring Test, a scientifically validated variation of Goodheart’s muscle test, specifically employing an opponent pollicis muscle (Omura).

164. In 1997, I taught the basic holographic hand correspondences of Dr. Yoo’s hand micro-system to a class of 5th and 8th graders and their teachers in Cuba. They were so enthusiastic that they and their teachers were planning to teach the system to all the other children and teachers in the school, and then have their school teach it to other schools.

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