

Title

A different approach to acupuncture based on kinesiology muscle testing and polarities.

Abstract

This paper details an audit of my practice with particular reference to a new system of diagnosis and treatment modality I have been developing over the last eleven years. It is based on information gleaned from my patients' bodies by muscle testing – a kinesiology technique that allows one to gain insights otherwise very difficult to obtain. This then guides the practitioner as to what treatment is needed based on the *polarity* of the body. This is a term I am using to measure the forces acting on the body from side to side, up/down, and front/back. If these are all perfectly balanced, I postulate that our bodies can more easily correct imbalances. In order to test this, the patient was asked how his/her main complaint was after the previous treatment. As at 13/3/09, 41 patients said it was worse, 129 no change, and 809 improved (n= 979).

Key words

Kinesiology, polarity, polarities, new acupuncture, muscle testing.

Introduction

We are held upright by the effect of opposing forces acting on us. If these forces are in equal opposition, we are more likely to be in a state of harmony. If one predominates over the others, we will be forced off-balance, which will put our bodies under stress. These forces actually operate in an infinite number of directions, but to simplify this concept, I have taken the idea of dividing the body using the three main planes – Coronal, Sagittal, and Transverse.

Insert fig 1: body planes

Ideally we should be energetically balanced from side to side, front to back, and top to bottom. If one or more of these energies is unbalanced, not only the musculo-skeletal system may be compromised, but also the organs will be placed under stress, tending to cause a whole range of conditions, affecting us physically, mentally, or emotionally. For example, if our unbalanced energy is pushing us forwards, we might develop not only back pain, but also stomach problems.

This idea of looking at the opposing forces acting on our bodies I have called 'polarities'.

Giovanni Macioca also talks of balancing points in *The Channels of Acupuncture* (Macioca, 2006). He says that combining points in a harmonious way means taking account of Top and Bottom, Left and Right, Front and Back; and adds one more pair – Yin and Yang. He states that:

If the points are selected carefully according to the channel dynamics and the combination of points is harmonious, the channel system, rather than individual points will 'do the work'.

JR Worseley introduced the idea of left-right imbalances in the meridian system to this country with his Akabani testing - passing a lighted akabani stick over the end points of meridians while counting the number of passes. If the stick is kept at an equal distance away from the skin, and moved at an equal rate, deficiencies in each meridian would register as a greater number of passes over one side than the other. Harmonising acupuncture points such as Junction Points would then be chosen to re-dress the imbalance.

Methods

Over the past eleven years I have devised a system of checking these polarities in patients. I use kinesiology (muscle testing) to determine whether or not a person is 'balanced'. Balanced in this context means the differing forces acting from left and right, up and down, and forwards and backwards, are balancing each other out, resulting in stability.

Muscle testing- see appendix 1

By muscle testing I check not only the patient's polarities, but potentially many other things such as:

- Do they have a meridian blockage, and if so which meridian?
- Which is the main organ that is imbalanced?
- Is the treatment I am planning the best one for the patient?
- After the treatment has finished – are they likely to have a treatment reaction?
- When do I need to see them again?

The questions are infinite, and the more knowledge we have, the more meaningful (and accurate) are the answers. It is only through my training as an acupuncturist that questions about pulse qualities, for example, have meaning. So if I feel a particular quality on a pulse, I can ask the body if my interpretation of it is correct – in this way I use muscle testing to reinforce my existing knowledge and open my eyes to new possibilities.

Insert fig 2: Muscle testing a patient when using polarities.



When muscle testing for polarities, I score the patient from minus 10 to plus 10 in each of the cardinal directions. This is done by testing a strong muscle while counting from 0 to 10. If the muscle is strong on 1 and 2, then 3, for example, but goes weak on 4, the person scores 3. Zero indicates balance or neutrality. So in all three planes the ideal balance would score zeros in each direction:

Left	Right	Up	Down	Front	Back
0	0	0	0	0	0

This reading represents what we aim to achieve by the end of a treatment – ideal balance. The energies are all pushing equally (or are at balanced rest) from the sides, top and bottom, and front and back; resulting in harmony.

Left	Right	Up	Down	Front	Back
-10	+10	0	0	0	0

With this reading I know the patient has maximum pressure pushing him/her to the left. -10 on one side to +10 on the other = a combined 'gradient' of 20. To correct this, I would need to needle points only on the left side of the body. The rule is, I have discovered; needle the minus side and never the plus side. Theoretically it may be possible to sedate the Right side, but I have never found it necessary. It is enough to use even technique on the Left, retaining the needles for 20 minutes or so, occasionally longer.

Left	Right	Up	Down	Front	Back
-10	+10	+10	-10	0	0

Now not only do I needle on the left side, but also at the very bottom of the body (e.g. nail points on the left foot). -10 on Down coupled with +10 on Up means maximum pressure pushing me to needle only at the lower extremities.

Left	Right	Up	Down	Front	Back
-10	+10	+10	-10	-10	+10

Now I can only needle Front points – which in the case of the nail points of the foot, all five are on the front – dorsal – side of the foot. So I choose from Bl 67 *zhiiyin*, GB 44 *zuqiaoyin*, St 45 *lidui*, Liv 1 *dadun*, Sp 1 *yingbai*, St 44 *neiting*, or use all of them. If I am not sure which ones to use, I muscle test. In this example, as Left is -10 and Right +10 (both maximums), I am being pushed to treat at the extremity of Left ie Bl 67 *zhiiyin*, only.

The above examples are simplified for clarity. In practice, there are many variations of possibilities for scoring, with the result that I get the feeling that the scoring system is more a code to help direct me to the correct point choices, rather than an absolute measure of perfect balance.

Example:

Up	Down
0	-10

This does not mean that Up is in perfect balance – a difficult feat if Down is -10, but rather that I should not only use points at the extremity of the body (nail points) but also points rising upwards to the centre of the body- the navel.

Example:

Left	Right
+10	+10

As I may not treat the plus sides, Left or Right, that just leaves the centre of the body: *ren mai* on the front, or *du mai* on the back.

Example of the body showing me I had treated incorrectly, where the main complaint was prostatitis. (Patient code Y02 – prostatitis, and the same patient also labelled L06 – low back pain – see below).

Left	Right	Up	Down	Front	Back
0	0	-8	0	-8	0

This means we may treat Left, Right, Down and Back (all 0), but we MUST treat the Front (a minus score).

As this was one of the early treatments, and I had not yet developed as much confidence in the system, I ignored the body and devised my own treatment pattern, so I needled Ren 2 *qu gu*, Ren 3 *zhong ji*, and bilateral: Kid 11 *heng gu*, St 30 *qi chong*. The reason I chose these was because I

was treating prostatitis, and these points on the lower abdomen seemed more applicable than something superior to the umbilicus. However, on re-testing the polarities I now found:

Left	Right	Up	Down	Front	Back
0	0	-9	0	0	0

So I had at least treated the Front, as that score dropped to a 0, but the Up score had worsened (from -8 to -9)

Suitably chastened, I needed: Du 20 *ba hui*, and Bilateral: *sishencong* extra, Bl 7 *xin shu*, GB 17 *zheng ying*, and GB14 *yang bai*, ie all points at the top of the body. Only after this did the polarities score all drop to 0.

This was the same patient I have given examples of (see below) for low back pain and twisted back (see figs 3,4 and 5). Not only did his prostatitis improve, his back straightened. This really encouraged me to trust my muscle testing more.

Breech presentations

I first formulated the polarity concept whilst attempting to turn breech presentations. We would normally treat Bl 67 *zhiyin* on both sides with moxibustion. This point is located at the most extreme left and right sides of the body. Therefore it seemed to me a good choice to try to correct these opposing forces, but NOT on both sides at the same time. If the polarities of the mother are pushing the baby to the left, we should treat only ONE side. To treat both might counteract the turning effect. My reading of the polarities directed me to the side I should treat.

While discussing the balancing effect of using Left and Right points, Macioca states that:

Far from reducing the effect of the treatment, using points unilaterally makes the treatment more dynamic and powerful: it is like applying a force to the tangents of two opposite poles of a circle, making it spin (Macioca, 2006).

It is this spinning effect that turns the baby.

Also, Bl 67 *zhiyin* is located at the extremity of the body (Down), but its meridian extends over the top of the body (Up). It is situated at the front of the body, while its meridian runs up the back. It is therefore ideally situated to act on the three planes. In my opinion this is why it is such a useful point for correcting breech presentations. I therefore factored in these Up/Down and Forwards/Backwards forces with the Left/Right and treated accordingly. This means that although I often use the point, at other times I might not use it, being directed by the polarity readings.

One example at 36 weeks [patient code W03]: The baby was breech presentation, with the head to the right, back facing forwards, and the mother had sciatica on the right.

Left	Right	Up	Down	Front	Back
-4	+2	-2	-2	-8	+4

Points used: left side only: Lu 7 *lieque*, Ki 6 *zhao hai*, Ki 3 *tai xi*, Bilateral: Ki 27 *shu fu*. This was an early treatment and I would use different points nowadays – points closer to the centre line of the body, and only on the left, Ki 27 *shu fu* bilateral was a mistake (Left -4, Right +2) so it should only have been needled on the left. But the general principle of using points mostly on the left: and both above and below the navel (Up -2, Down -2) and only points on the front of the body (Front -8) still managed to turn the baby (I left the needles in 1 hour), as confirmed later by the midwife, and reduce the sciatica immediately by half.

Using this method, eight breech presentations turned successfully out of eight patients. Although this is far from a clinically significant number, I was sufficiently encouraged to investigate the

technique further. It seems the accepted success rate for turning breech presentations with acupuncture is around 50%.

A recent study found that acupuncture on Bl 67 *zhi yin* (moxibustion on both sides) was 50% more successful than the control group (Van den Berg *et al*, 2008).

In another study (Grabowska and Manyande, 2009) 76 women with breech presentations were treated with bilateral moxibustion on Bl67 *zhi yin*. 45% of them successfully turned.

I went on to treat other women throughout the pregnancy and discovered that conditions aggravated by the baby's position – or more accurately, aggravated by the mother's incorrect polarity – could be immensely and easily improved – for example, back pain, symphysis pubis pain, and also threatened miscarriage. One woman at 31 weeks gestation [patient code W08] had backache over 'most of the back'. The baby's back was towards the mother's. My treatment was left side only: moxa lamp on Bl 67 *zhi yin*, TH 4 *yang chi*, Ki 9 *zhu bin*. The baby made big movements during the treatment, and the backache eased.

Other conditions

The next thought was that this system should work equally well on my other patients, including pregnant women. If the polarities could twist a baby, what would they do to the skeletal system, or an organ? Posture seemed an obvious avenue of research – if one side were too 'strong' and the other too 'weak' then the body would twist and could result in pain, for example.

So I started treating musculo-skeletal problems with the system and immediately had very encouraging results.

Example: 55 year old male with low back pain. (Patient code L06)

His polarities were:

L	R	U	D	F	B
+10	-10	0	-10	-10	0

As his L-R scores are the maximum 'out' possible (a difference of 20), and R is -10, we must only treat the right side. Down is also -10 so we must treat here (0 on Up means we might add points above the umbilicus or between the umbilicus and the toes if desired). -10 on Front means we must treat here, with a possible option of treating the Back which scores 0 and in this context could translate as Ki 1 *yongquan*).

Insert fig 3: Before treatment



The treatment I did was right side: Bl 67 *zhiyin*, GB 44 *zuqiaoyin*, St 45 *lidui*, Liv 1 *dadun*, Sp 1 *yinbai*, St 44 *neiting*.

Insert fig 4: After first treatment



After the treatment he was noticeably more posturally balanced, and his backache had gone.

Insert fig 5: After the 5th treatment



Example: 62 year old man with left knee pain (patient code L20)

His polarities were:

L	R	U	D	F	B
+8	-8	+8	-8	-4	-4

The -8 score on the Right means we must only treat his right side – crossing points on the 'good' side are often very effective. In the past I was never sure which to use, so this system is directing me there immediately. I now think one reason crossing points are so effective is that they 'remind' the damaged side how it is to be healthy. The body then has a more perfect blueprint from which to work. Crossing points also seem to be preferable for the elderly or frail.

-8 for Down means I should treat below the umbilicus, but not necessarily at the extremities, (which would be -10). So I can treat his other knee. -4 for both Front and Back means I should treat both, so can use leg points all the way round the knees (as opposed to a 10 score which would mean only treat the extreme front or back, i.e. Stomach or Bladder channels only).

His treatment was: Crossing points x 11, BI 67 *zhiyin*. on the right side only.

After this treatment his knee pain went from 6 out of 6 (max. pain) to 1 out of 6 (nearly all gone).

Example: Leucorrhoea (ICPC group X Genital Female)

A 51 year old woman (Patient code X 03) had had a chronic discharge ever since a hysterectomy four years before. The discharge was white, cheesy, sometimes with a bad odour and itching at times. Her urine was yellow and she was quite hot, day and night. Her pulses were deep and weak.

Her polarities were:

L	R	U	D	F	B
+10	0	+10	0	0	-10

This means do not treat on the left (Left is +10), nor above the umbilicus (Up is +10), but we must treat on the back (-10). My treatment was right side only points: BI 14 *jueyinshu*, BI 23 *shenshu*, BI 32 *ciliao*, BI 33 *zhongliao*, 1 *ashi* in this area, BI 66 *tonggu*. In retrospect BI 14 *jueyinshu* was above the umbilicus line, so should not have been used. However, the system is fairly forgiving, and the lowest point, BI 66 *tonggu* seemed to readdress the situation.

The patient reported the treatment had had an immediate effect on the discharge, and that she was sleeping better. Her discharge she now scored as 2/6 (where 0 is best) from 6/6 (where 6 is worst).

Example of psychological group: stress (patient code P25)

A 14 year old boy, with symptoms of anger and aggression at school and home. His polarities were:

L	R	U	D	F	B
+10	+10	-8	0	-8	+8

Discussion of polarities:

+10 to Left and Right means there is only the centre line left to treat (*ren mai* or *du mai* channels). As Front is a minus figure, and Back plus, we can only treat *ren mai* channel. -8 on Up means we can treat up to the St 9 *renying* level, while a 0 on Down means there is not so much 'push' from below, so we can treat from the umbilicus upwards.

My treatment was Ren 10 *xiawan*, Ren 12 *zhongwan*, Ren 14 *juque*, Ren 16, *zhongting*, Ren 18 *yutang*, Ren 20 *huagai* – a very common polarities treatment of alternating *ren mai* points. The next week he scored this treatment as +3 (maximum) and said he had been much calmer.

An example of a similar treatment for a very different condition – head cold (patient code R19)

A 43 year old woman had a severe head cold that was stopping her from working. As she was a very busy consultant ophthalmic surgeon, it was important to get her back to work as quickly as possible. Her pulses were floating strongly on the right side and I diagnosed her as having an external pathogenic attack of wind cold. I gave her two treatments, on two consecutive days.

Her polarities were:

	L	R	U	D	F	B
1 st treatment	+10	+10	-8	+8	-6	+6
2 nd treatment	+10	+10	-8	+4	-9	+9

1st treatment: Ren 22 *tiantu*, Ren 21 *xuanji*, Ren 20 *huagai*

2nd treatment: Ren 22 *tiantu*, Ren 20 *huagai*, Ren 18 *yutang*, Ren 16, *zhongting*

After the first treatment she scored how she felt as +2 (medium better). After the second, she said the cold had completely gone (+3).

Discussion of points:

In each treatment I am constrained to *ren mai* points (+10 on Left and Right, so I cannot treat to the left or right sides of the midline, and a minus score on Front keeps me to the front of the body only). -8 on Up means treat up to St 9 *renying* level, while the +8 on Down in the first treatment is pushing me up more towards the throat than the +4 in the second treatment. Accordingly I can 'relax' the points and come down the body more to Ren 16 *zhongting*. One reason I have included this case is because of the Front and Back scores changing as the pathogen comes towards the surface. -10 for Front and +10 for Back would mean exactly *on* the surface – maximum push from the back to the front. Here -6 for Front means the pathogen is fairly deep (0 being the deepest). At the second treatment it changed to -9, i.e. nearer the surface, so giving me an indication of progress.

Example: gout

Patient code T02, female, aged 60, with an acute attack of gout in the left big toe. I had treated her many times before (165), mostly for post stroke symptoms and hypertension.

1st Treatment

Left	Right	Up	Down	Front	Back
+10	-10	0	-10	-10	0

Treatment: Right side only: Sp 9 *yin ling quan*, Sp 6 *san yin jiao*, Sp 4 *gong sun*, Sp 3 *tai bai*, Sp 2 *da du*, Sp 1 *yin bai*. Liv 1 *da dun*, St 45 *li dui*, GB 44 *zu qiao yin*. These points were used because they are at the front of the leg and because Back scores 0, I can spread the points from the extreme Front (St channel) to the sides of the leg: Liv and GB. Bl could also have been used.

Redness and swelling went during the treatment – almost as soon as I had inserted the needles.

2nd treatment

The gout was much better, but she also had an invasion of wind-heat this week (common cold).

Left	Right	Up	Down	Front	Back
-10	0	-10	+10	0	0

Notice the polarities had switched to Left, and Up. Front and Back are neutral so I can treat both.

Treatment. Left side only: LI 4 *he gu*, TH 5 *wai gwan*, GB 17 *zheng ying* GB 8 *shuai gu*, sishencong, Bl 7 *xin shu*, GB13 *ben shen*, GB 14 *yang bai*, GB15 *tou lingqi*

LI 4 *he gu*, TH 5 *wai gwan*, are standard points for wind-heat, and are at the top of the body (arms outstretched above the head, as in the Chinese Anatomical Position), Bl 7 *xin shu* is used for nasal diseases, and is also at the top of the body. I added the GB points as I had found these to be useful in the past with her post-stroke symptoms, and they answer the -10 for UP.

After this treatment she said her head was much clearer and she could breathe again. The gout also improved: reporting it as 3/3 (much better).

After three treatments the gout was completely resolved.

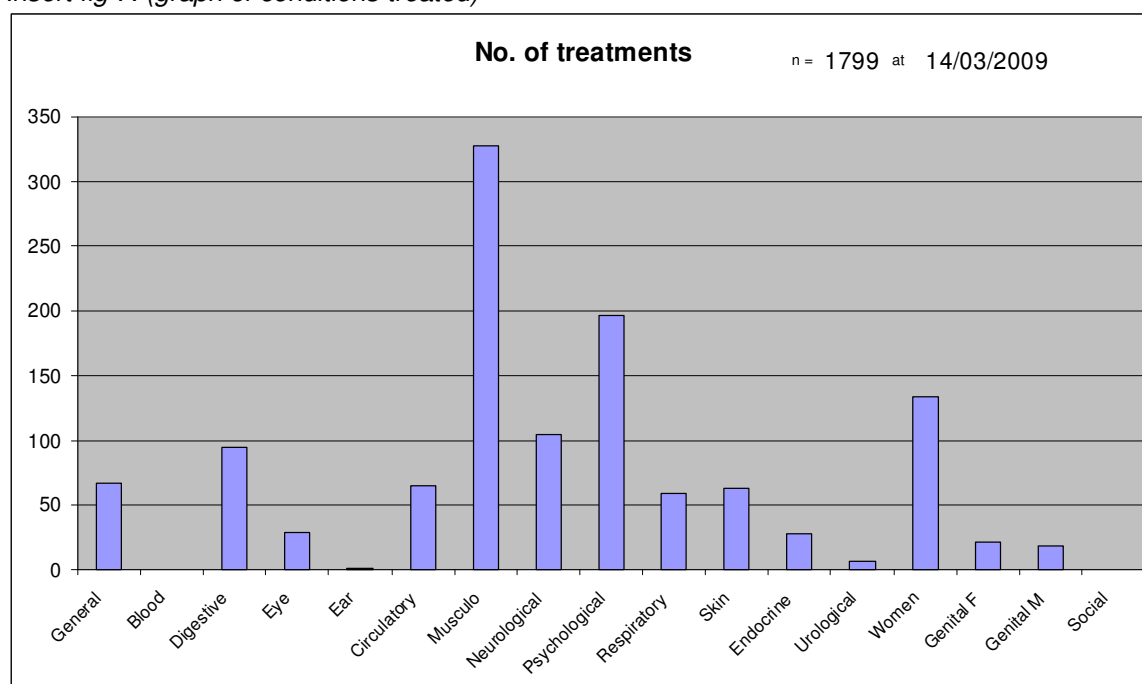
Range of conditions treated

I now use the method for nearly all my patients and a wide range of conditions. As at 14th March 2009 I have recorded 1,799 treatments for 263 patients using this method. The range of conditions treated is illustrated in the bar graph, and include psychological, digestive, circulatory, skin and neurological, as defined by the International Classification of Primary Care (ICPC) (1999).

Insert fig 6 (Table conditions treated)

Condition	No. of treatments	Description with some examples
General	67	And unspecified: tiredness, viral disease, malaise, ME
Blood	0	Blood, blood forming organs and immune mechanism
Digestive	95	IBS, vomiting, constipation, abdominal distension
Eye	29	Vision, eye infections, eye pain
Ear	1	Hearing, ear infection, vertigo (Menieres)
Circulatory	65	Heart pain, palpitations, hypertension, stroke
Musculo	328	Musculoskeletal: arthritis, sprained muscle, back pain
Neurological	104	Headache, epilepsy, speech disorder, head injury
Psychological	196	Anxiety, depression, enuresis, insomnia
Respiratory	59	Cough, asthma, URTI, allergic rhinitis, sinusitis
Skin	63	Rashes, psoriasis, alopecia, bruise, herpes
Endocrine	28	Endocrine, metabolic and nutritional: weight loss/gain
Urological	7	Incontinence, renal colic, painful urination
Women	133	Pregnancy, child-bearing, family planning (women)
Genital F	21	Female genital: menstrual problems, breast pain
Genital M	18	Male genital: prostate, impotence, pain in penis
Social	0	Social problems: relationships, bereavement
Total	1799	

Insert fig 7: (graph of conditions treated)



The main complaint grouping most often treated (328 treatments) was musculo-skeletal, with psychological the next largest group (196) n=1799.

Outcomes

I also looked at outcomes, asking my patients how they were after the last treatment: worse, better, or no change with the following scores:

A lot better	+3
Medium better	+2

Slightly better	+1
No change	0
Slightly worse	-1
Medium worse	-2
A lot worse	-3

ICPC group	No.	-3	-2	-1	0	1	2	3	Totals	
General	67	4	1	0	2	13	14	15	49	Note: as no change could mean either the condition has made no improvement since the first treatment, or has improved, but not worsened – i.e. maintained the improvement, I now define the +1 category as 'slightly better or maintained the improvement'
Blood	0	0	0	0	0	0	0	0	0	
Digestive	95	1	1	0	13	15	26	22	78	
Eye	29	0	0	0	9	5	7	3	24	
Ear	1	0	0	0	0	0	1	0	1	
Circulatory	65	0	0	2	6	13	4	33	58	
Musculo	328	0	4	2	33	81	59	108	287	
Neurological	104	2	1	3	24	13	14	37	94	
Psychological	196	4	2	3	18	38	52	51	168	
Respiratory	59	1	0	1	5	10	9	24	50	
Skin	63	2	1	3	7	21	8	8	50	
Endocrine	28	0	0	1	1	2	3	13	20	
Urological	7	0	0	0	0	0	2	0	2	
Women	133	0	0	0	6	18	23	19	66	
Genital F	21	1	0	1	2	5	6	3	18	
Genital M	18	0	0	0	3	2	8	1	14	
Social	0	0	0	0	0	0	0	0	0	
		15	10	16	129	236	236	337	979	

Insert fig 8:(Table of records for outcomes of all groups)

These are the outcomes for all conditions treated, totalled together in the ICPC grouping. The 3 minus (worse) total 41, no change 129, and positive (improved) total 809 (n=979).

Insert fig 9 (graph Outcomes of all groups)

Results to date for musculo skeletal treatments: $n = 287$ which is the total number of sessions for different patients.

Musculo totals (n)	287
worse	6
no change	33
improved	248

Out of 287 treatments where outcomes were recorded, 248 improved the situation, whereas only 6 worsened, and there was no change in 33.

Areas of polarity

Polarities can be regarded as a gradient: +10 being the maximum 'push' and -10 the minimum, or maximum 'pull', with 0 as neutral. Below is a pictorial representation of the L-R gradients, with yellow being nearest to neutral (0) and dark purple nearest to maximum (+ or -10). It can be seen that the neutral area is along the centre line, with the maximum gradient being at the extreme sides of the trunk, legs, and little finger sides of the arm. So - (or+) 10 mostly means gall bladder on the legs, but bladder on the foot, and small intestine on the arm.

Insert fig 10 (L-R gradients)

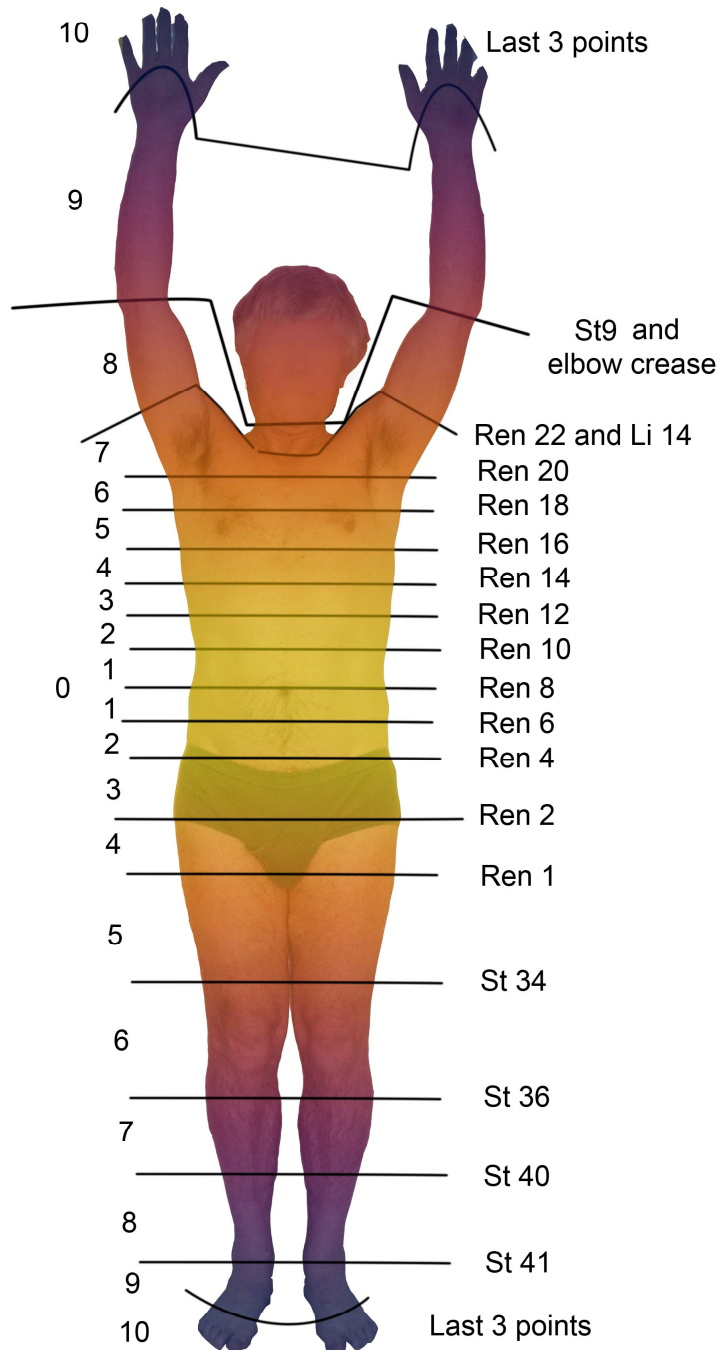
With Front – Back gradient, the posterior and anterior surfaces are at the extremes. So for example -or+10 on the arm would mean the triple heater on the forearm, but the large intestine on the upper arm, bladder on the legs, and *du mai* on the back.

Insert fig 11 (front-back gradients)



Over time I have been refining the locations of each polarity score – dividing the body into more accurately defined areas. Below is an example of Up/Down. 0 is at the umbilicus, Down at the feet, but maximum Up is at the fingers – using the Chinese Anatomical Position.

Insert fig 12 (Up/Down divisions)



Books

Macioca, G. (2006). *The Channels of Acupuncture*. Spain: Churchill Livingstone.

The World Organisation of Family Doctors (1999). *International Classification of Primary Care* (Second edition). Oxford: Oxford University Press.

Articles

Grabowska, C. and Manyande, A. (2009). Management of breech presentation with the use of moxibustion in women in the UK: a preliminary study. *The European Journal of Oriental Medicine*, Volume 6 (1), 38-42.

Van den Berg, I., Bosch, J.L., Jacobs, B., Bouman, I., Duvekot, J.J., Hunink, M.G. (2008). Effectiveness of acupuncture-type interventions versus expectant management to correct breech presentation: a systematic review, *Complement Ther Med*. Volume 16 (2), 92-100.

About David Smyth

David Smyth trained in Leamington Spa, London, and China in 5 Elements, TCM and KHT. He was a Touch For Health Instructor. He has been practising acupuncture and kinesiology since 1987. He has founded a new energetic healing technique called Reharmonising, which he developed through muscle testing and clinical practice.

Fig 1 Body Planes

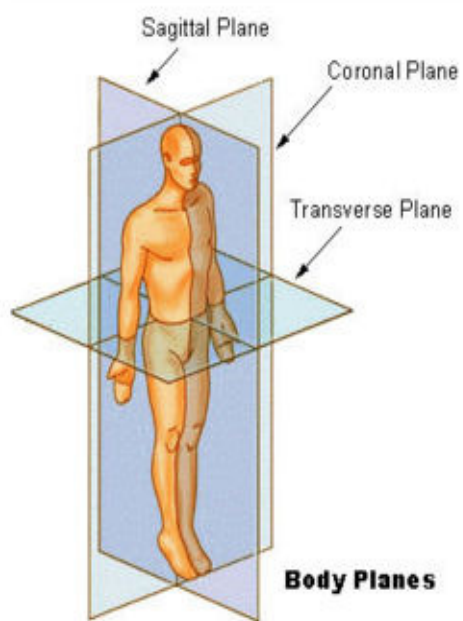


Fig 2: Muscle testing a patient when using polarities.

Fig 3: Before treatment

Fig 4: After first treatment

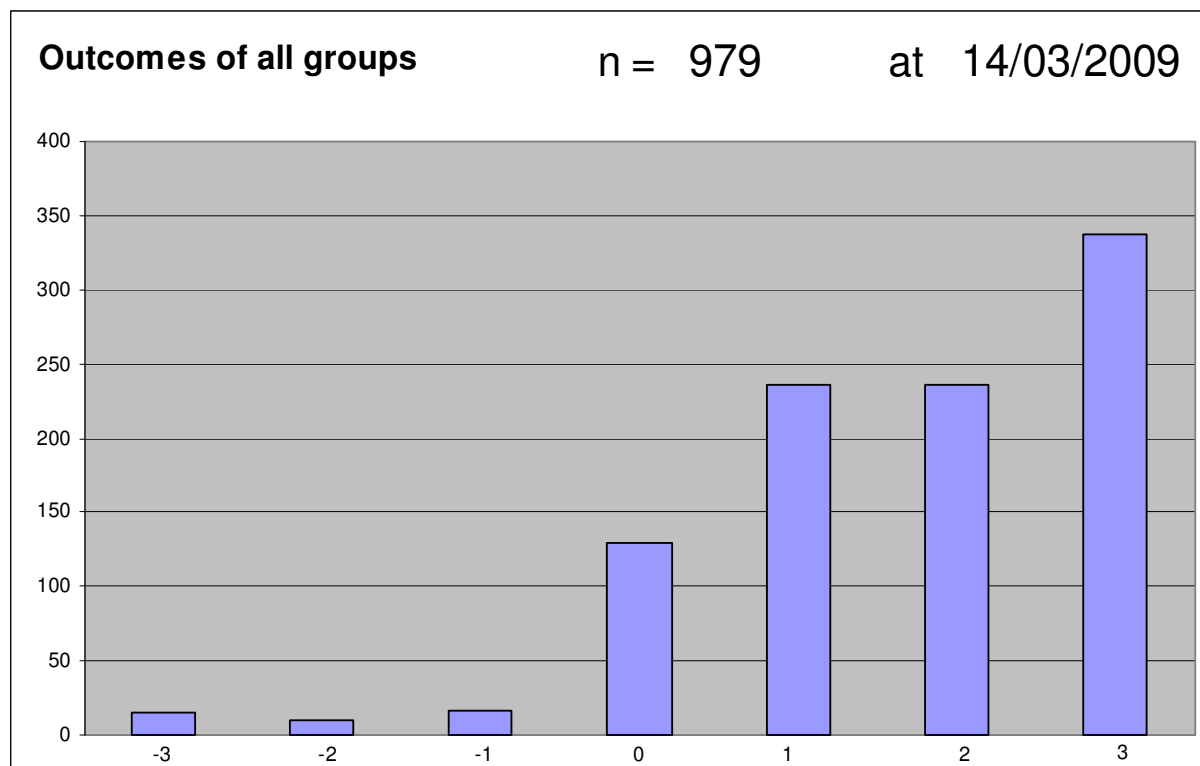
fig 5: After fifth treatment

Fig 6: Table conditions treated

Fig 7: graph of conditions treated

Fig 8: Table of records for outcomes of all groups

Figure 9: Graph of Outcomes of all groups



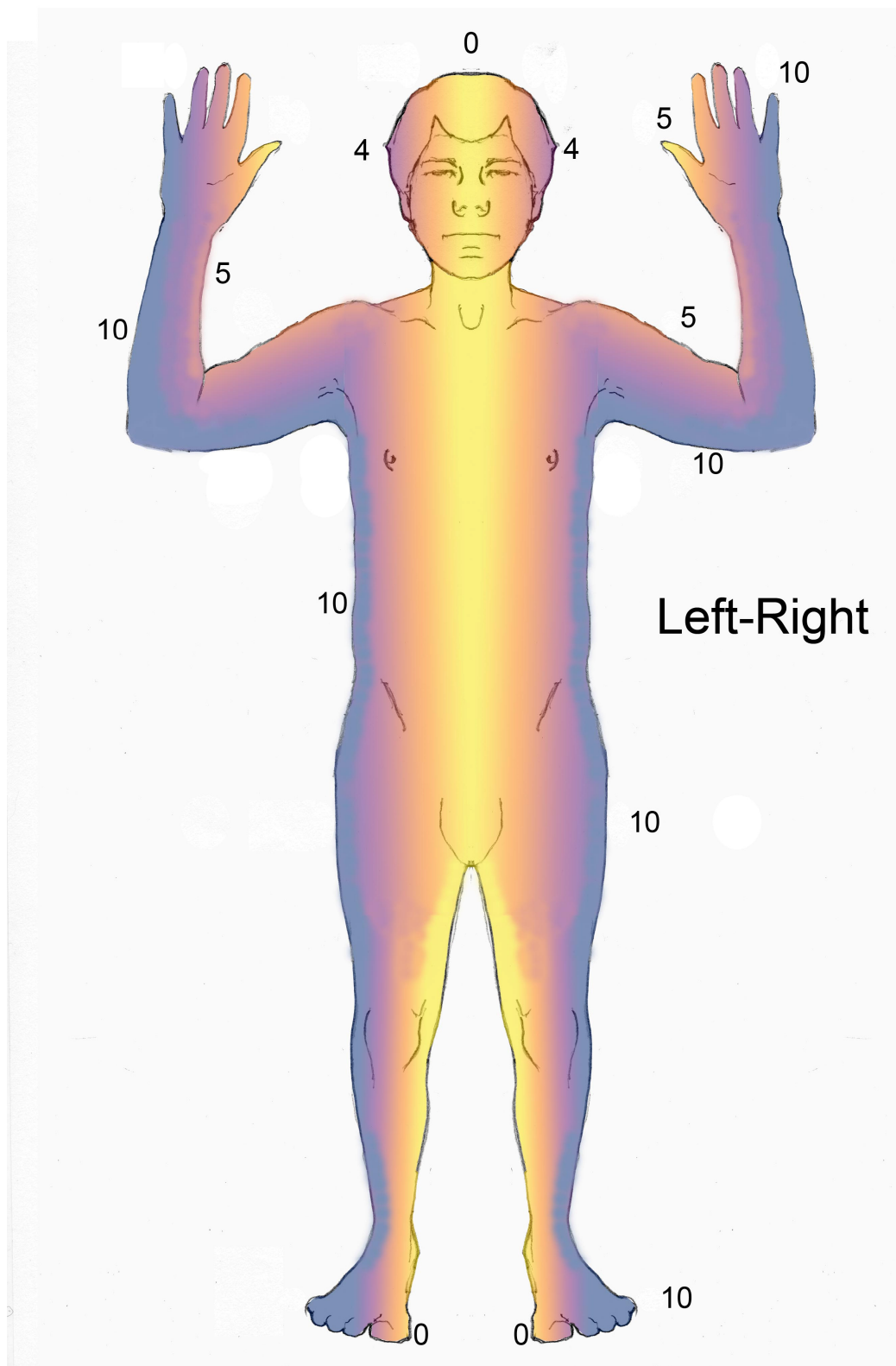


fig 10 – L-R gradients

fig 11 – front/back gradients

fig 12 – Up/Down divisions

Appendix 1

Muscle testing

This is a kinesiology technique where the practitioner feels the changing, innate tension in a muscle as it is tested. In the same way as we would prepare ourselves mentally to lift a heavy weight – our muscles seeming to strengthen as we do so – the practitioner can feel the change in muscle tone (stronger). We say the muscle goes ‘strong’ in the presence of positive thought. Conversely, if we think of ourselves as weak, or have a negative mindset, our muscles will respond and feel weaker to the trained tester. Muscle testing is a technique that was introduced by Dr George Goodheart in the 1960s. It has gone through many stages, and is still rapidly developing. In my system it enables us to ‘talk’ to the patient’s body, and to receive directions to help the therapeutic process. Historically, it has been associated with the channel system and is a natural partner for acupuncture.

For further information on Kinesiology see La Tourelle, M (1997). Principles of Kinesiology: New Edition. Thorsons