

WORLD HEALTH ORGANIZATION

REGIONAL OFFICE FOR THE WESTERN PACIFIC



REPORT

REGIONAL CONSULTATION MEETING ON THE STANDARDIZATION OF ACUPUNCTURE NOMENCLATURE

**Tokyo, Japan
28-31 May 1984**

**Manila, Philippines
July 1984**

REPORT
REGIONAL CONSULTATION MEETING
ON THE STANDARDIZATION OF ACUPUNCTURE NOMENCLATURE

Convened by the
REGIONAL OFFICE FOR THE WESTERN PACIFIC
OF THE
WORLD HEALTH ORGANIZATION

Tokyo, Japan, 28-31 May 1984

Not for sale

Printed and Distributed

by the

Regional Office for the Western Pacific of the
World Health Organization
Manila, Philippines
July 1984

NOTE

The views expressed in this report are those of the participants in the meeting and do not necessarily reflect the policies of the Organization.

This report has been prepared by the Regional Office for the Western Pacific of the World Health Organization for the governments of Member States in the Region and for the participants in the Regional Consultation Meeting on the Standardization of Acupuncture Nomenclature which was held in Tokyo, Japan, from 28 to 31 May 1984.

CONTENTS

	<u>Page</u>
1. INTRODUCTION	1
2. AIM AND OBJECTIVES OF THE CONSULTATION MEETING	1
2.1 Aim	1
2.2 Objectives	1
3. PROCEEDINGS AND DISCUSSIONS	2
3.1 Opening session	2
3.2 Country/area reports	2
3.3 Standardization of acupuncture nomenclature of extraordinary points (WPR/TRM/84.6)	3
3.4 Standardization of acupuncture nomenclature of the scalp points (WPR/TRM/84.10)	4
3.5 Standardization of acupuncture nomenclature of the auricular points (WPR/TRM/84.11)	4
3.6 Explanation of acupuncture point names and meridians	4
3.7 Basic lines for the location of meridians and acupuncture points (WPR/TRM/84.13)	5
4. GUIDELINES FOR FURTHER WORK	5
5. RECOMMENDATIONS	6
ANNEX 1 - LIST OF MEMBERS, CONSULTANT, TEMPORARY ADVISERS, OBSERVERS AND SECRETARIAT	9
ANNEX 2 - AGENDA	13
ANNEX 3 - OPENING REMARKS BY DR LIU GUO-BIN, DIRECTOR, DRUG POLICY, ENVIRONMENTAL HEALTH AND HEALTH TECHNOLOGY	17
ANNEX 4 - PROGRESS REPORT ON THE STANDARDIZATION OF ACUPUNCTURE NOMENCLATURE	21
ANNEX 5 - STANDARD NOMENCLATURE OF THE 31 EXTRAORDINARY POINTS	23
ANNEX 6 - STANDARD NOMENCLATURE OF SCALP ACUPUNCTURE LINES	27
ANNEX 7 - THE BASIC LINES FOR LOCATING MERIDIAN AND ACUPUNCTURE POINTS	35
ANNEX 8 - BRIEF EXPLANATION OF POINT NAMES OF 14 MERIDIANS	41

1. INTRODUCTION

With a view to establishing a standard acupuncture nomenclature in the Western Pacific Region, which contains the majority of acupuncturists in the world, the World Health Organization Regional Office for the Western Pacific organized a Working Group on the Standardization of Acupuncture Nomenclature, which met in Manila from 14 to 20 December 1982. The Group recommended a standard nomenclature, consisting of an alphameric code, the Chinese phonetic (Pinyin) alphabet name, and the Han characters of the meridians and 361 classical acupuncture points, which has since been accepted by the Regional Office. Ten thousand copies of this nomenclature have been published and are being distributed to Member States in the Region as well as interested parties throughout the world through WHO Headquarters in Geneva and the Regional Offices.

With a view to further developing standardization of acupuncture nomenclature in respect of extraordinary points, new points and points related to the micro-systems, and ensuring a global acceptance of the standard acupuncture nomenclature, a Regional Consultation Meeting on the Standardization of Acupuncture Nomenclature was held at the Sasakawa Memorial Hall, Tokyo, from 28 to 31 May 1984.

2. AIM AND OBJECTIVES OF THE CONSULTATION MEETING

2.1 Aim

The overall aim of the Consultation Meeting was to make practical recommendations on WHO's collaborative role in the development of a standard acupuncture nomenclature. To this end, the Consultation Meeting was to review the progress made on standardization to consider whether further standardization of nomenclature could be achieved and to indicate in the form of recommendations and guidelines how further standardization could be achieved:

2.2 Objectives

The objectives of the Consultation Meeting were:

- (1) to review the progress in the development of the standardized acupuncture nomenclature for the classical 361 acupuncture points;
- (2) to consider whether the nomenclature for any of the new points, extraordinary points and points related to the micro-system (e.g. auricular, scalp, etc.) could be standardized in the manner used for the classical 361 acupuncture points;
- (3) to discuss how the acupuncture points could be described and located scientifically; and
- (4) to plan for future activities aimed at further developing the standardization of acupuncture nomenclature.

3. PROCEEDINGS AND DISCUSSIONS

3.1 Opening session

The Consultation Meeting was opened by Dr Liu Guo-bin, Director, Drug Policy, Environmental Health and Health Technology, on behalf of the Regional Director, Dr H. Nakajima. In welcoming the members, he noted the progress made to date and the need for further standardization, particularly in regard to the extraordinary points, new points and the points related to the micro-systems. He was followed by Mr K. Naito, Director of the International Affairs Division, Ministry of Health and Welfare, Japan, who noted the important role of traditional medicine in general and acupuncture in particular in regard to the delivery of health care.

The following were elected officers: Chairman - Dr Yukio Kurosu (Japan); Vice Chairmen - Dr Wang Xuetai (China) and Dr Gerald Gibb (New Zealand); Rapporteur - Dr C.T. Tsiang (Australia).

In addition to the country/area reports prepared by the members of the Consultation Meeting, working papers were prepared.

The progress report prepared by the WHO Regional Office for the Western Pacific on the standardization of acupuncture nomenclature, was tabled before the meeting.

3.2 Country/area reports

In presenting the Australian country report, Dr Tsiang welcomed the initiative taken by the WHO Regional Office for the Western Pacific for the standardization of acupuncture nomenclature, and looked forward to an early and fruitful conclusion of the task.

Dr Wang Xuetai, in presenting the Chinese report, indicated that the explanations of the Pinyin names of acupuncture points had been drafted and were being presented to the meeting. He also briefly outlined the highlights of some recent meetings in China concerned with the selection of the extraordinary and new points as well as the scalp and auricular points.

Dr M. Yang presented the Hong Kong report and noted that the standard nomenclature was being well accepted.

In presenting the Japanese country report, it was noted that the Han character for B8 Luoque was inappropriate. During the discussion that followed, it was agreed that a small group composed of Dr H. Kinoshita, Dr Wang Xuetai and Dr S.K. Kang should look into this problem and report to the Meeting on the most appropriate Han characters to be used for B8.

Dr Gibb, in presenting the New Zealand report, observed that it was important to obtain international acceptance of any standard nomenclature proposed.

Dr Kang noted that the standard nomenclature developed at the last Working Group was finding acceptance in the Republic of Korea. However, it was important to standardize the nomenclature of the six extra meridians.

Dr Aquino, presenting the Philippine report, noted that acupuncture was relatively new in the Philippines and that an understandable system of acupuncture nomenclature would hasten the propagation of acupuncture in his country.

Professor Nguyen Tai Thu reported that the standard nomenclature was acceptable to Viet Nam and that, as far as extraordinary and new points are concerned, Viet Nam would like to offer its own list of fifteen acupuncture points.

3.3 Standardization of acupuncture nomenclature of extraordinary points (WPR/TRM/84.6)

The working paper on extraordinary points was tabled by Dr Wang Deshen. He noted that out of about 1500 extraordinary and new points, only 42 had been carefully selected for discussion at the meeting. He pointed out that of the 42, 31 were extraordinary points while 11 were new points, all of which had been selected on the basis of efficacy and frequency of appearance in a number of books.

After careful consideration, the Meeting decided:

- (1) to accept the Pinyin and Han character names of all the 31 extraordinary points presented in the working papers;
- (2) that the alphabetic component of the code for extraordinary points should be according to anatomical sites as follows:

Head and neck	ExHN
Chest and abdomen	ExCA
Back of trunk	ExB
Upper extremities	ExUE
Lower extremities	ExLE

- (3) that the numeric component of the code would be deferred to a later date when the majority of the most important extraordinary acupuncture points had been identified;
- (4) that a sub-group, under the chairmanship of China and consisting of experts from China, Japan, Republic of Korea and Viet Nam, should be formed to identify other important extraordinary points and to report within twelve months to the Regional Director with a final list of the most important extraordinary and new points for adoption, the sub-group being guided in its selection by the following criteria:
 - All important books and documents from China, Japan, Republic of Korea, Viet Nam and elsewhere were to be consulted.
 - Each acupuncture point selected should be clinically efficacious and frequently used.

3.4 Standardization of acupuncture nomenclature of the scalp points (WPR/TRM/84.10)

This working paper was presented by Dr Huang Xianming, who noted that it had been prepared by experts who had originally discovered and formulated scalp acupuncture and that the working paper had the support of the All China Acupuncture and Moxibustion Society. He also noted that scalp acupuncture had been widely used and its efficacy verified in recent years, and that the scalp points in the form of lines were often near or connected to the classical meridians.

The Meeting, after careful consideration, decided:

- (1) that the alphabetic code name of scalp acupuncture lines should be MS (this code name being derived from the terms micro-system and scalp points);
- (2) that the Pinyin and Han character names should be accepted, subject to corrections which were to be received from members of the Working Group within the next 12 months;
- (3) that the measure units should be changed from centimeters to "cun";
- (4) that the final corrected version should be published by the WHO Regional Office for the Western Pacific.

3.5 Standardization of acupuncture nomenclature of the auricular points (WPR/TRM/84.11)

This working paper was tabled by Dr Wang Xuetai, who noted that it was a provisional working paper for the consideration of the Meeting. After careful consideration, the Meeting decided that, as auricular acupuncture points were very new and complicated matter, it would not be possible at this stage to select which points should be included or excluded. However, it recommended that:

- (1) the alphabetic code name should be MA (this code name being derived from the terms micro-system and auricular points);
- (2) the selection and nomenclature of the auricular points should be reconsidered by a special sub-group, which should include experts from countries of other WHO regions.

3.6 Explanation of acupuncture point names and meridians

The Meeting noted with satisfaction the contents of the working paper prepared by the All China Acupuncture and Moxibustion Society and decided:

- (1) To adopt the explanations of acupuncture point names and meridians, subject to the following revisions:
 - The All China Acupuncture and Moxibustion Society should be permitted to revise the explanations of those points they would like to verify, and to correct the English explanations as may be required.

- The nomenclature should consist of the alphameric code, Pinyin name, and Han characters as set out in the publication Standard Acupuncture Nomenclature approved by the Working Group in 1982.
- A note should be added to indicate that the English explanations selected were the most acceptable interpretations available.

(2) To recommend that the final revised version of the explanations of acupuncture point names and meridians should be published by the WHO Regional Office for the Western Pacific.

3.7 Basic lines for the location of meridians and acupuncture points (WPR/TRM/84.13)

This working paper was presented by Dr A. Debata. After considerable discussion, it was agreed that the nomenclature of the 12 basic lines set out in the working paper should be as follows:

1. Median Basic Lines	Zhèngzhōngxian
2. Thoracic Lateral Line (L2-Sp17)	Xióngwàixian
3. Thoracic Intermediate Line (S13-S18)	Xióngjiānxian
4. Thoracic Medial Line (K22-K27)	Xióngnèixian
5. Abdominal Lateral Line (Liv14-Sp16)	Fùwàixian
6. Abdominal Intermediate Line (S19-S30)	Fújiānxian
7. Abdominal Medial Line (K11-K21)	Fùnèixian
8. Dorsal Lateral Line (B41-B54)	Bèiwàixian
9. Dorsal Medial Line (B11-B30)	Bèinèixian
10. Cranial Lateral Line	Tóuwàixian
11. Cranial Intermediate Line (G15-G19)	Tóujiānxian
12. Cranial Medial Line (B4-B8)	Tóunèixian

The actual locations of these 12 basic lines as set out were adopted with the rider that the Abdominal Lateral Line needed to be further investigated and studied.

The Meeting noted that the proposed basic lines would facilitate the location of meridians and acupuncture points and agreed that it would be very valuable to:

- (1) include an Introduction clearly indicating how these basic lines were to be used;
- (2) include a full set of illustrations indicating the locations of these basic lines;
- (3) publish the revised document.

4. GUIDELINES FOR FURTHER WORK

The Meeting, noting that a considerable amount of work remained to be carried out in regard to the standardization of acupuncture nomenclature, agreed as follows:

4.1 The sub-group on extraordinary and new points under the chairmanship of China, and consisting of experts from China, Japan, the Republic of Korea and Viet Nam, as well as the sub-group on extra meridians under the co-chairmanship of China and New Zealand, and consisting of experts from Australia, China, Japan, Republic of Korea and New Zealand, would:

- (1) set out a time schedule for their respective tasks to be completed within the time frame of twelve months;
- (2) carry out most of the work through correspondence;
- (3) keep the WHO Regional Office for the Western Pacific informed of their activities and progress.

4.2 The following working papers would be revised as soon as convenient and returned to the WHO Regional Office by the country shown:

- | | |
|--|---------|
| (1) Standard nomenclature of 31 extraordinary points
(WPR/TRM/84.6) | - China |
| (2) Standard nomenclature of the scalp acupuncture
lines (WPR/TRM/84.10) | - China |
| (3) The basic lines for locating meridians and
acupuncture points (WPR/TRM/84.13) | - Japan |
| (4) Explanations of acupuncture point names and
meridians (WPR/TRM/84.9) | - China |

4.3 After taking into consideration the printing errors noted in the publication entitled Standard Acupuncture Nomenclature, Dr Masayuki Yoshikawa would produce a complete list of errata for circulation with copies of the Standard Acupuncture Nomenclature.

5. RECOMMENDATIONS

Bearing in mind the importance of and urgent need for the further development of a standard acupuncture nomenclature to facilitate the teaching, research and practice of acupuncture on an international basis, the WHO Regional Consultation Meeting on the Standardization of Acupuncture Nomenclature recommends to the Regional Director of the WHO Regional Office for the Western Pacific as follows:

5.1 Recommendations 5.4 (regarding a global meeting of acupuncture specialists) and 5.5 (regarding development of further standardization of acupuncture nomenclature) of the Working Group on the Standardization of Acupuncture Nomenclature held in Manila in December 1982, should be further implemented.

5.2.1 The alphameric code of the standard nomenclature of the extraordinary points should be based on anatomical sites as follows:

Head and neck	Ex HN
Chest and abdomen	Ex CA
Back of trunk	Ex B
Upper extremities	Ex UE
Lower extremities	Ex LE

5.2.2 The Pinyin and Han character names of the 31 extraordinary points approved by the Consultation Meeting should be accepted by WHO.

5.2.3 A sub-group under the chairmanship of China and consisting of experts from China, Japan, the Republic of Korea and Viet Nam should be formed to identify other important extraordinary points and report within twelve months to the Regional Director with a final list of the most important extraordinary and new points for adoption, the sub-group being guided in its selection by the following criteria:

- (1) All important books and documents from China, Japan, Republic of Korea, Viet Nam and elsewhere should be consulted.
- (2) Each acupuncture point selected should be clinically efficacious and frequently used.

5.3.1 The standard acupuncture nomenclature of the 14 scalp acupuncture lines approved by the Consultation Meeting should consist of the alphameric code of MS 1 to MS 14, and of the Pinyin name and Han characters as set out.

5.3.2 WHO should publish the standard acupuncture nomenclature of the 14 scalp acupuncture lines as approved by the Consultation Meeting.

5.4.1 The alphabetic code of the standard nomenclature of the auricular points should be MA (this code name being derived from the terms of micro-system and auricular points).

5.4.2 A special sub-group, including experts from countries of other WHO regions, should be set up to study and select the most important auricular points for consideration by the Consultation Meeting.

5.5 WHO should publish the "Explanations of acupuncture point names and meridians" as approved by the Consultation Meeting after it has been revised by the All China Acupuncture and Moxibustion Society, taking into consideration the following:

- (1) The nomenclature should consist of the alphameric code, Pinyin name and Han characters as set out in the Standard Acupuncture Nomenclature (WHO Regional Publications, Western Pacific Series No. 1).
- (2) The explanations should be verified and presented in simple and concise English.
- (3) The explanations selected should be among the most acceptable interpretations.

5.6 A sub-group under the co-chairmanship of China and New Zealand and consisting of experts from Australia, China, Japan, Republic of Korea and New Zealand should be set up to define the English equivalent names of the six extra meridians.

5.7 WHO should publish the basic lines for locating meridians and acupuncture points, with the footnote that the abdominal lateral line needs further investigation and study.

LIST OF MEMBERS, CONSULTANT, TEMPORARY ADVISERS,
OBSERVERS AND SECRETARIAT

1. MEMBERS

Australia	Dr C.T. Tsiang Immediate Past President Australian Medical Acupuncture Society 8 Raheen Drive, Kew <u>Victoria</u>
China	Dr Wang Xuetai Vice President Academy of Traditional Chinese Medicine <u>Beijing</u> Dr Huang Xianming Director and Professor Shanghai Institute of Acupuncture and Moxibustion <u>Shanghai</u> Mr Cao Guoliang Translation and Clinical Manipulation Academy of Traditional Chinese Medicine <u>Beijing</u>
Hong Kong	Dr Mabel Yang Department of Physiology Medical Faculty Hong Kong University
Japan	Dr Haruto Kinoshita Past President Japan Acupuncture and Moxibustion Association <u>Tokyo</u> Dr Akio Debata Committee Member Japanese Acupoints Research Committee <u>Tokyo</u> Dr Masayuki Yoshikawa Vice Director International Affairs Division Japan Society of Acupuncture <u>Tokyo</u>

Annex 1

New Zealand

Dr Gerald Gibb
Immediate Past President
Medical Acupuncture Society
of New Zealand
Auckland

Philippines

Dr Benjamin P. Aquino
President
Philippine Acupuncture Society
Singson Building
Plaza Moraga, Binondo
Manila

Republic of Korea

Dr Sung Keel Kang
Assistant Professor
Oriental Medical Hospital
Kyung Hee University
Seoul

Viet Nam

Dr Nguyen Tai Thu
Director
National Institute of Acupuncture
Hanoi

2. CONSULTANT

Professor Paul C.Y. Chen
Social and Preventive Medicine
Faculty of Medicine
University of Malaya
Kuala Lumpur
Malaysia

3. TEMPORARY ADVISERS

Dr Yukio Kurosu
Vice President
Japan Society of Acupuncture
Tokyo

Dr Wang Deshen
Director
Department of Acupuncture Literature
Institute of Acupuncture and Moxibustion
Academy of Traditional Chinese Medicine
Beijing

Annex 1

Dr Rokuro Fujita
Chairman
Japanese Acupoints Research Committee
Tokyo

Dr Koji Sakamoto
Professor
Department of Pharmacology
Showa University
Tokyo

4. OBSERVERS

Dr Takeaki Matsumoto
Committee Member
Japanese Acupoints Research Committee
Tokyo

Dr Tomoyuki Ikari
Committee Member
Japanese Acupoints Research Committee
Tokyo

Dr Takashi Ito
Committee Member
Japanese Acupoints Research Committee
Tokyo

Dr Harumichi Ogawa
President
Japan Acupuncture and
Moxibustion Association
Tokyo

Dr R. Okamoto
WHO Representative and Programme Coordinator
Seoul

5. SECRETARIAT

WHO Regional Office
for the Western Pacific

Dr Liu Guo-bin
Director
Drug Policy, Environmental Health
and Health Technology

WHO Headquarters

Dr C.O. Akerele
Programme Manager
Traditional Medicine

AGENDA

Monday, 28 May

- | | |
|------------|--|
| 9:00 a.m. | Registration |
| 9:30 a.m. | <u>Opening Ceremony</u> |
| | Opening Address |
| | Self-introduction by participants |
| | Election of Officers |
| 10:30 a.m. | Group photograph |
| | Coffee Break |
| 11:00 a.m. | Objectives of the Meeting |
| | Adoption of the Agenda |
| 11:30 a.m. | <u>Plenary Session</u> |
| | "Progress report on the standardization of
acupuncture nomenclature" - WHO Regional Office
for the Western Pacific |
| | Country/area reports: |
| | - Australia |
| | - China |
| | - Hong Kong |
| | Discussion |
| 12:30 p.m. | Lunch |
| 2:30 p.m. | <u>Plenary Session</u> |
| | Country/area reports: |
| | - Japan |
| | - New Zealand |
| | - Republic of Korea |
| | - Philippines |
| | - Viet Nam |
| | Discussion |
| 4:00 p.m. | Coffee Break |

Annex 2

4:15 p.m.

Working Group Discussions

"To consider the standardization of the
nomenclature of the extraordinary points" -
Dr Wang Deshen

Discussion

5:30 p.m.

Adjournment

6:30 p.m.

Reception by Japan Acupoint Committee

Tuesday, 29 May

9:00 a.m.

Executive Committee Meeting

9:30 a.m.

Working Group Discussions

"To consider the standardization of the
nomenclature of the head (scalp) points" -
Dr Huang Xianming

11:00 a.m.

Coffee Break

11:20 a.m.

Working Group Discussions

Discussion (continued)

12:30 p.m.

Lunch

2:30 p.m.

Working Group Discussions

"To consider the standardization of the
nomenclature of the ear acupuncture points"
- Dr Wang Xuetai

4:00 p.m.

Coffee Break

4:15 p.m.

Working Group Discussions

Discussion (continued)

5:30 p.m.

Adjournment

Wednesday, 30 May

9:00 a.m.

Executive Committee Meeting

9:30 a.m.

Working Group Discussions

"To consider the scientific location of
meridians and acupuncture points"
- Dr A. Debata

Annex 2

	Discussion
11:00 a.m.	Coffee Break
11:20 a.m.	<u>Working Group Discussions</u>
	Discussion (continued)
12:30 p.m.	Lunch
2:30 p.m.	<u>Plenary Session</u>
	Working Group Report on Standardization of Acupuncture Nomenclature
4:00 p.m.	Coffee Break
4:15 p.m.	<u>Plenary Session</u>
	"To plan for future activities and to draft recommendations"
5:30 p.m.	Adjournment

Thursday, 31 May

9:00 a.m.	Executive Committee Meeting
9:30 a.m.	<u>Plenary Session</u>
	Discussions (continued)
11:00 a.m.	Coffee Break
11:15 a.m.	Acceptance of recommendations
11:45 a.m.	<u>Closing Session</u>
12:00 a.m.	Finish

OPENING REMARKS BY DR LIU GUO-BIN,
DIRECTOR, DRUG POLICY, ENVIRONMENTAL HEALTH AND HEALTH TECHNOLOGY

Ladies and Gentlemen:

First of all, I would like to extend to all of you the best wishes of Dr Hiroshi Nakajima, Regional Director, of the World Health Organization Regional Office for the Western Pacific. Dr Nakajima is on a mission and unable to attend this meeting. On his behalf, therefore, I have pleasure in welcoming you to this Regional Consultation Meeting on the Standardization of Acupuncture Nomenclature. I wish in particular to welcome my colleague, Dr Akerele, Programme Manager for Traditional Medicine at WHO Headquarters. I also wish to welcome to this opening ceremony the distinguished representatives from the Japanese Ministry of Health and Welfare.

I would like to take this opportunity to extend our gratitude to the Ministry of Health and Welfare for their kind support and to the Sasakawa Memorial Health Foundation for making available all the necessary facilities for holding this meeting in this beautiful hall.

As you are aware, during the last decade, WHO has given, and for good reasons, increasing attention to the potentialities of traditional medicine and to the importance of mobilizing its resources for the attainment of health for all by the year 2000. It was in this context that the WHO Regional Working Group on the Standardization of Acupuncture Nomenclature was convened in Manila in December 1982 with a view to further promoting and developing acupuncture as one of the most effective techniques of traditional medicine.

At the Manila Working Group meeting, a consensus on a standard acupuncture nomenclature of 361 classical acupuncture points was reached and a number of valuable recommendations were made.

The purpose of this Regional Consultation - which is actually a sequel to the Manila Working Group - is to review the progress achieved by the Member States concerned as well as by the Organization in implementing the recommendations of the last Manila meeting. You will also have to consider the standardization of nomenclature in respect of the head (scalp) and ear acupuncture points and to recommend how the acupuncture points can be described and located scientifically. The tasks before you will not be easy and there will doubtless be considerable differences and difficulties as you examine these questions and try to determine how further standardization can be developed. Your task during the coming week will be to examine these differences and to identify common grounds for mutual agreement. With the experience gained at the Manila meeting, I am very confident that you, the experts, have a valuable contribution to make.

I look forward therefore with keen interest to receiving your recommendations on how the standardization of acupuncture nomenclature can be further developed.

Annex 3

I would like to take this opportunity to thank Dr Paul Chen, Consultant, and Dr Kurosu and Dr Wang Deshen, Temporary Advisers, for their important contributions to the preparation of this meeting. I also wish to thank Dr Sakamoto and Dr Fujita for their kind support.

I thank you all for your participation and wish you a stimulating and rewarding meeting and an enjoyable stay in Tokyo.

CLOSING REMARKS BY DR LIU GUO-BIN,
DIRECTOR, DRUG POLICY, ENVIRONMENTAL HEALTH AND HEALTH TECHNOLOGY

Ladies and Gentlemen:

Over the past three and a half days, you have actively participated in your deliberation and discussion, which have covered all aspects in relation to the meeting's terms of reference. You have also made several valuable suggestions and recommendations for further development and action.

I am very pleased to say that the meeting had achieved its planned objectives and proved it a very interesting and successful one. It is really another big step forward towards the ultimate goal to achieve a global standardization of acupuncture nomenclature.

I also note that due to the limited time available, several problems remain unsolved and a lot of work still needs to be done after the meeting, for example, the identification of other important extraordinary points and new points, the study and selection of other important auricular points, etc. We should continue our efforts to complete our work.

I can assure you that WHO will continue to support you in all your endeavours to that end. Regarding the recommendations you made, I will request the Regional Director to give favourable consideration.

Now, before closing this meeting, I should like to express my thanks to the Chairman, Dr Kurosu, the Vice Chairmen, Dr Wang and Dr Gibb and the Rapporteur, Dr Tsiang, for their leadership, guidance and hard work.

I would like also to thank Dr Paul Chen, our consultant, Dr Sakamoto and his two studentts for their assistance. I wish to thank you all for the various roles you have played and the contribution you have made for the success of this meeting.

I would also like to express my gratitude and appreciation once again to the Japanese Ministry of Health and Welfare and the Sasakawa Memorial Health Foundation for their kind support to this meeting.

I wish you all a pleasant journey, to those who are leaving us, a safe journey home, to those who are going to Kyoto, an enjoyable time to Kyoto.

PROGRESS REPORT ON THE STANDARDIZATION OF ACUPUNCTURE NOMENCLATURE

1. INTRODUCTION

With a view towards establishing a standard acupuncture nomenclature in the Western Pacific Region, which contains the majority of acupuncturists in the world, the World Health Organization for the Western Pacific organized a Working Group on the Standardization of Acupuncture Nomenclature which met in Manila from 14 to 20 December 1982. The overall aim of the Working Group was to make practical recommendations on WHO's collaborative role on the development of a standard acupuncture nomenclature. To this end, the Working Group reviewed the level of agreement and the problems that remained, and recommended that:

1. The standard acupuncture nomenclature should consist of three essential elements, namely, an alphameric code, the Chinese phonetic alphabet name, and the Han characters of the merididans and acupuncture points.
2. WHO should publish this standard acupuncture nomenclature of the classical 361 acupuncture points and disseminate it around the world.
3. WHO should collect, collate, verify and publish lists of the equivalent names and code names of the acupuncture points as used in various countries, together with the standard acupuncture nomenclature recommended above, so as to facilitate the further acceptance and use of this standard nomenclature.
4. WHO should arrange a global meeting of acupuncture specialists in 1984 to consider the standard acupuncture nomenclature recommended by the Western Pacific Regional Working Group on the Standardization of Acupuncture Nomenclature, with a view to the development of a standard international acupuncture nomenclature.
5. WHO should look into the possibility of developing further standardization of acupuncture nomenclature in respect of the new points, extraordinary points, and points related to the micro-systems (e.g. auricular, scalp, etc.), and of any other remaining standardization problems.

Annex 4

2. FOLLOW-UP ACTION TAKEN BY THE REGIONAL OFFICE

2.1 Publication of Standard Acupuncture Nomenclature of the classical 361 Acupuncture Points

Ten thousand copies of the standard acupuncture nomenclature of the classical 361 acupuncture points, consisting of the three essential elements of an alphanumeric code, the Chinese phonetic (Pinyin) alphabet name, and the Han characters of the meridians and acupuncture points were published in early 1984 after the draft had been approved by the members of the Working Group. These are being distributed to Member States in the Region as well as to interested parties throughout the world through the WHO Headquarters and Regional Offices.

2.2 Publication of lists of equivalent names and code names of acupuncture points as used in various countries

In pursuit of the above, the Regional Office, assisted by Dr Wang Deshen of the Research Institute of Acupuncture and Moxibustion, Academy of Traditional Chinese medicine, Beijing, China, and several others, has compiled and published 3000 copies of the equivalent names and code names of acupuncture points as used in English, French, German, Japanese, Korea, Russian and Vietnamese, the purpose of the publication being to facilitate the quick comparison of the standard nomenclature with those previously used in older documents.

2.3 Further development of the standardization of acupuncture nomenclature

The WHO Regional Office for the Western Pacific, after consultation with Member States concerned, has organized the Regional Consultation Meeting on the Standardization of Acupuncture Nomenclature in Tokyo, Japan during the period 28 to 31 May 1984 to consider further standardization of acupuncture nomenclature and how acupuncture points can be described and located scientifically. Members of the Working Group will meet and discuss a number of working papers especially prepared to look into the standardization of head (scalp) acupuncture points and ear acupuncture points, as well as the standardization of localities of acupuncture points.

2.4 Global standardization of acupuncture nomenclature

As a first step towards a global meeting, the WHO Regional Office for the Western Pacific has set into motion action to disseminate information and exchange views with other regions on the standard acupuncture nomenclature recommended by the Working Group of the Western Pacific Region. It is planned that a global meeting will be held in 1986, and efforts are being made towards this end.

STANDARD NOMENCLATURE OF THE 31 EXTRAORDINARY POINTS

Introduction

Extraordinary points refer to the points which are not attributed to the 14 meridians, including traditional extraordinary points and new points discovered in recent years.

In December 1982, the WHO Regional Office for the Western Pacific held a meeting on the international standardization of the point names of acupuncture and moxibustion in Manila, Philippines, which laid down the standard point names of 14 meridians. The meeting also suggested that extraordinary points and ear (auricular) acupuncture points should be collected and sorted out for working out an international standardization. There is a great difference in the number of extraordinary points and newly emerged points recorded in acupuncture books published in recent years, the minimum number is 20, 35-50 in general, in some books over 200, even more than 1500 in a book. For the sake of prudence, we selected 31 points used frequently both at home and abroad as the first batch of standardized nomenclature of extraordinary points.

Just like the standard point names of 14 meridians, this plan also consists of three essential elements, namely, English alphameric code, Chinese phonetic alphabet (Pinyin) name and Han character. The extraordinary points are listed according to the parts of the body from up downwards (head, neck, chest, abdomen, upper extremities and lower extremities).

The extraordinary points and areas where they are located are abbreviated as follows:

Annex 5

Head and Neck, Ex-HN

Tóujǐngbù

頭(头)頸(颈)部

Ex-H	Sìshéncōng	四神聰(四神聰)
Ex-H	Yìntáng	印堂
Ex-H	Yúyāo	魚腰(鱼腰)
Ex-H	Tàiyáng	太陽(太阳)
Ex-H	Nèiyíngxiāng	內迎香
Ex-H	Jīnjīn	金津
Ex-H	Yùyè	玉液
Ex-H	Jùquán	聚泉
Ex-H	Hǎiquán	海泉
Ex-H	Ērjiān	耳尖

Chest and Abdomen, Ex-GA

Xiōngfùbù

胸腹部

Ex-CA	Zǐgōng	子宮
-------	--------	----

Back, Ex-B

Bèibù

背 部

Ex-BW	Jiáji	夾脊
Ex-BW	Pígēn	痞根
Ex-BW	Yāoyǎn	腰眼
Ex-BW	Shíqīzhūi	十七椎
Ex-BW	Yāoqí	腰奇

Annex 5

Upper Extremities, Ex-UE

Shàngzhī
上肢

Ex-UE	Zhǒujiān	肘尖
Ex-UE	Èrbái	二白
Ex-UE	Zhōngquán	中泉
Ex-UE	Zhōngkuí	中魁
Ex-UE	Dàgǔkōng	大骨空
Ex-UE	Xiǎogǔkōng	小骨空
Ex-UE	Bāxié	八邪
Ex-UE	Sìfèng	四缝
Ex-UE	Shíxuān	十宣

Lower Extremities, Ex-LE

Xiàzhī
下肢

Ex-LE	Hédǐng	鹤顶(鹤顶)
Ex-LE	Xīyǎn	膝眼
Ex-LE	Nèihuáijīān	内踝尖
Ex-LE	Wàihuáijīān	外踝尖
Ex-LE	Bāfēng	八风(八风)
Ex-LE	Dúyīn	独阴(独阴)

Annex 5

經穴	Jīngwàixué	Extraordinary Point	Ex (JW, HM, CL)
頭頸部	Tóujǐngbù	Head and Neck	HN
胸腹部	Xiōngfùbù	Chest and Abdomen	CA
背部	Bèibù	Back	B
上肢	Shàngzhī	Upper Extremities	UE
下肢	Xiàzhī	Lower Extremities	LE

STANDARD NOMENCLATURE OF SCALP ACUPUNCTURE LINES

Introduction

Since 1970, scalp acupuncture therapy has been initiated in China with which diseases are treated by needling on certain areas of the head. This therapy was soon introduced into some foreign countries. At present it is becoming one of the therapeutic methods frequently used by medical doctors. In order to facilitate the academic exchange of head acupuncture internationally and promote its further development, it is high time that a plan for standardization of the point names of head acupuncture be formulated.

Head acupuncture has developed on the basis of traditional Zhen-jiu (acupuncture and moxibustion) medicine. Its points are closely related to Jingluo (meridians and collaterals), points and Zang-fu (internal organs). So its nomenclature should reflect the theory and characteristics of meridians and points.

To answer the suggestion and requirement of WHO Regional Office for the Western Pacific, and after discussion in the meeting, this plan was formulated on the principle of selection of points on the meridians which are chosen according to various regions in combination with ancient point penetration method (one needle penetrating two or three points).

Just like the Standard Point Names of 14 Meridians the plan for nomenclature of head acupuncture consists of three essential elements, namely, English alphameric code, Chinese phonetic alphabet (Pinyin) name and Han character. The corresponding English equivalent is given after the Chinese phonetics, so as to facilitate the study and understanding of those who don't know Chinese characters and their pronunciation.

The point names and English alphabetical code of head acupuncture are described as follows:

Scalp acupuncture points, MS.

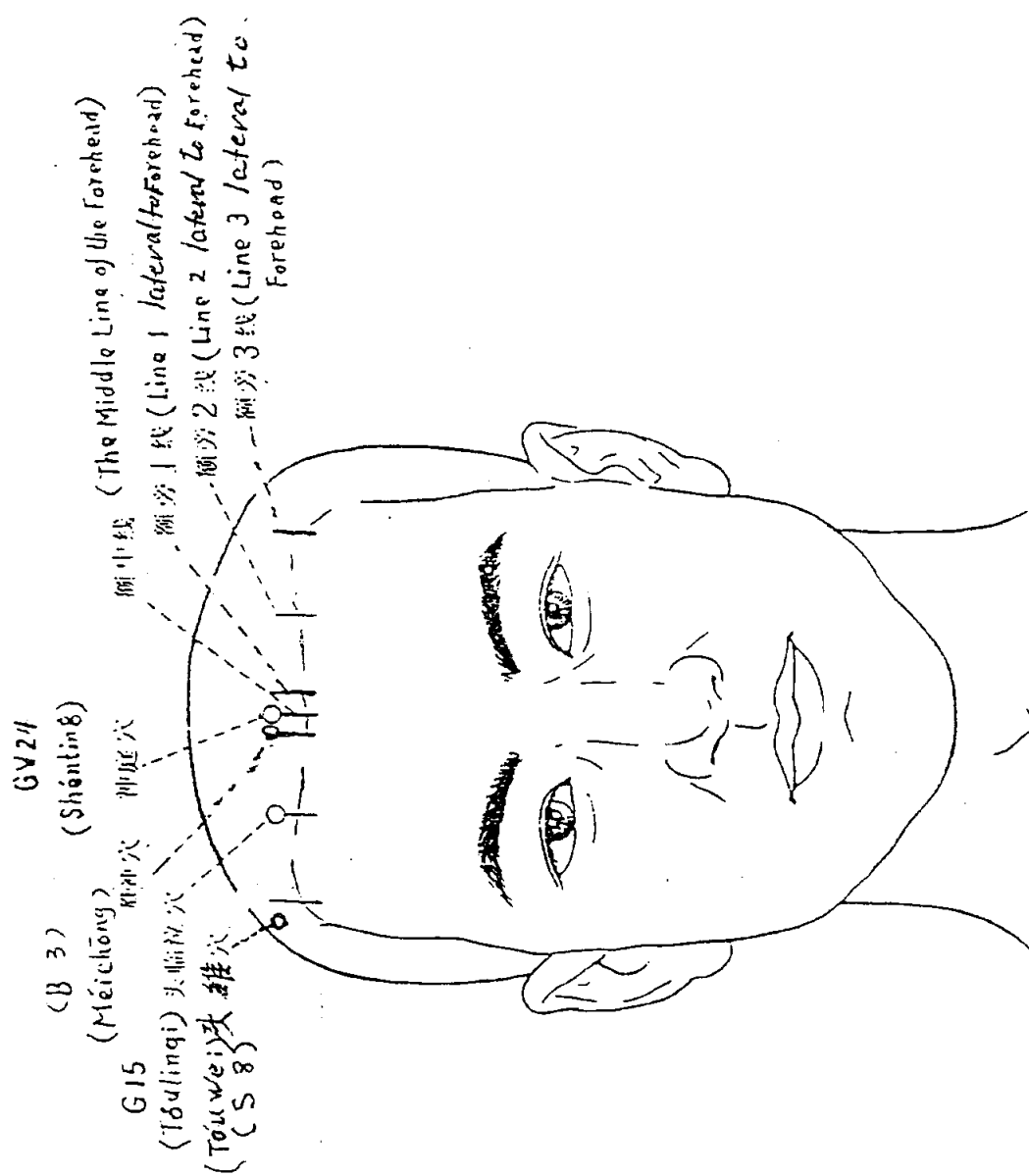
LOCALIZATION OF LINES OF SCALP ACUPUNCTURE

MS

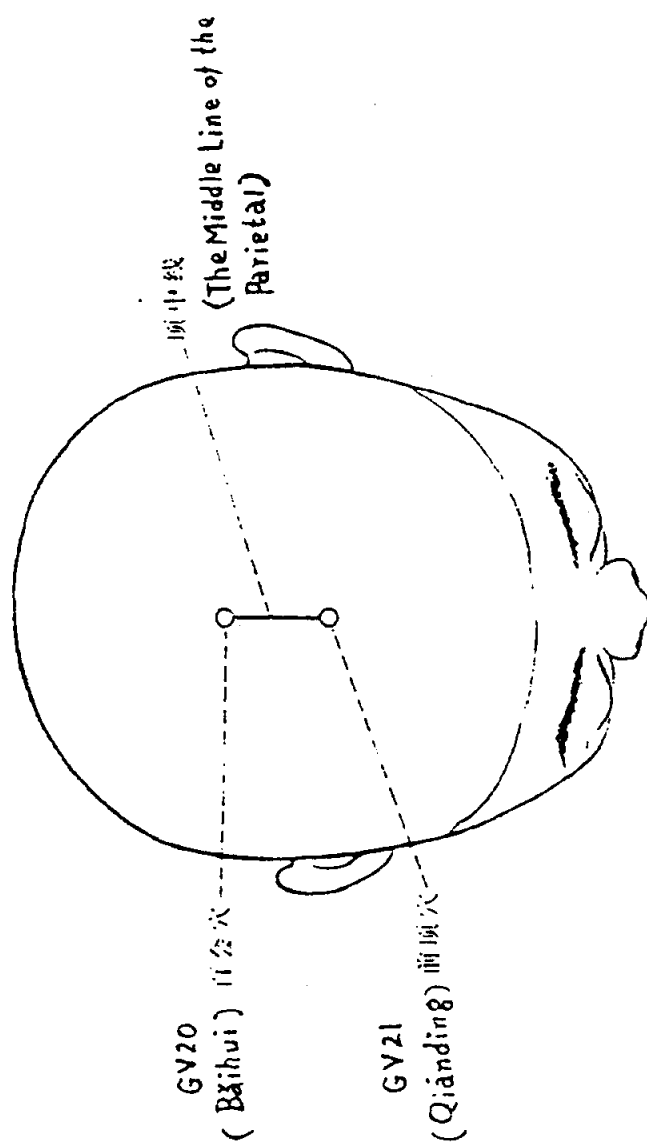
HP1	Ézhōngxiàn	額(額)中線(線)	Middle Line of the Forehead	From Shenting (Gv24), 1 cun anteriorly along the meridian.
HP2	Épángxiàn I	額(額)旁1線(線)	Line 1 lateral to Forehead	From Méichong (B3) 1 cun anteriorly along the meridian.
HP3	Épángxiàn II	額(額)旁2線(線)	Line 2 lateral to Forehead	From Toulinqi (G41) 1 cun anteriorly along the meridian.
HP4	Épángxiàn III	額(額)旁3線(線)	Line 3 lateral to Forehead	Starting 0.5 cun medial to Towei: (S8). 1 cun anteriorly.
HP5	Dǐngzhōngxiàn	頂(頂)中線(線)	Middle Line of the Parietal	At the Central Line on the top of the head. From Faihui (GV20) to Qianding (GV21).
HP6	Dǐngniè Qiánxièxiàn	頂(頂)前斜線(線)	Anterior Oblique Line of the Parieto-Temporal	From 1 cun anterior to Baihui (GV20) to Xuanli (G6).
HP7	Dǐngniè Hòuxièxiàn	頂(頂)後斜線(線)	Posterior Oblique Line of Parieto-Temporal	From Baihui (GV20) to Qubin (G7).
HP 8	Dǐngpángxiàn 1	頂(頂)旁1線(線)	Line 1 beside Parietal	Lateral to Middle Line of the parietal. 3 cm long from Tongtian (B7) backward along the meridian

MS	Dǐngpángxiàn 2	頂(頂)旁2線(線) Line 2 beside the Parietal	Lateral to Line 1 beside the Parietal. 1' cun long from Zhengying (G17) backward along the meridian.
HP10	Nièqiánxiàn	耳前(顳)前線(線) Anterior Temporal Line	From Hanyan (G4) to Xuanli (G6).
HP11	Nièhòuxiàn	耳後(顳)後線(線) Posterior Temporal Line	From Shuaigu (GB) to Qubin (G7).
HP12	Zhěshàng Zhènzōngxiàn	枕上正中線(線) Middle Line of Occiput	From Qiangjian (GV18) to Naohu (GV17).
HP13	Zhěshàng Pángxiàn	枕上旁線(線) Upper-Side Line of Occiput	1 cm lateral and Parallel to the Middle Line of Occiput.
HP14	Zhěxià Pángxiàn	枕下旁線(線) Lower-Side Line of Occiput	4 cm straight downward from Yuzhen (B9)

Annex 6

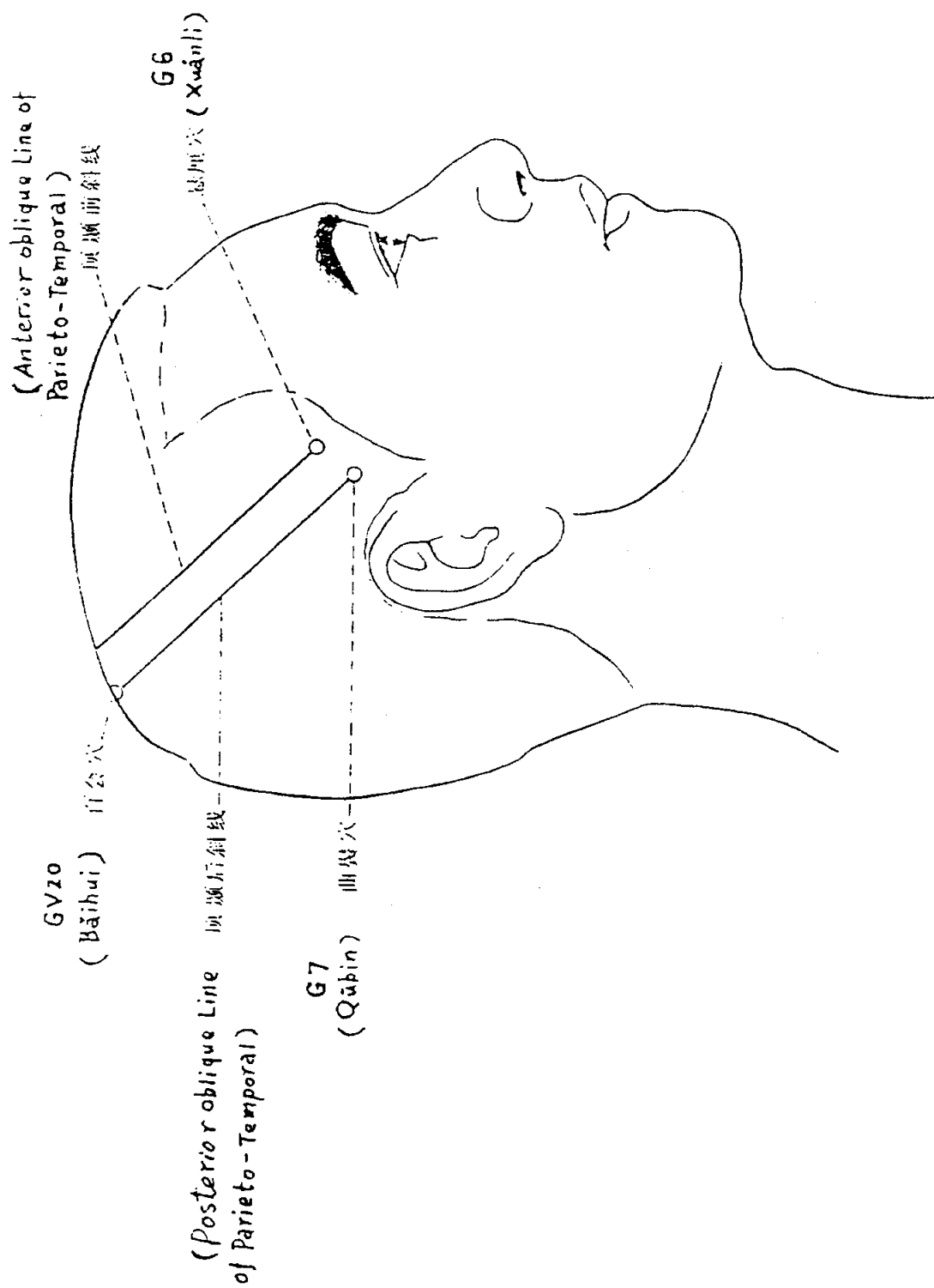


四面

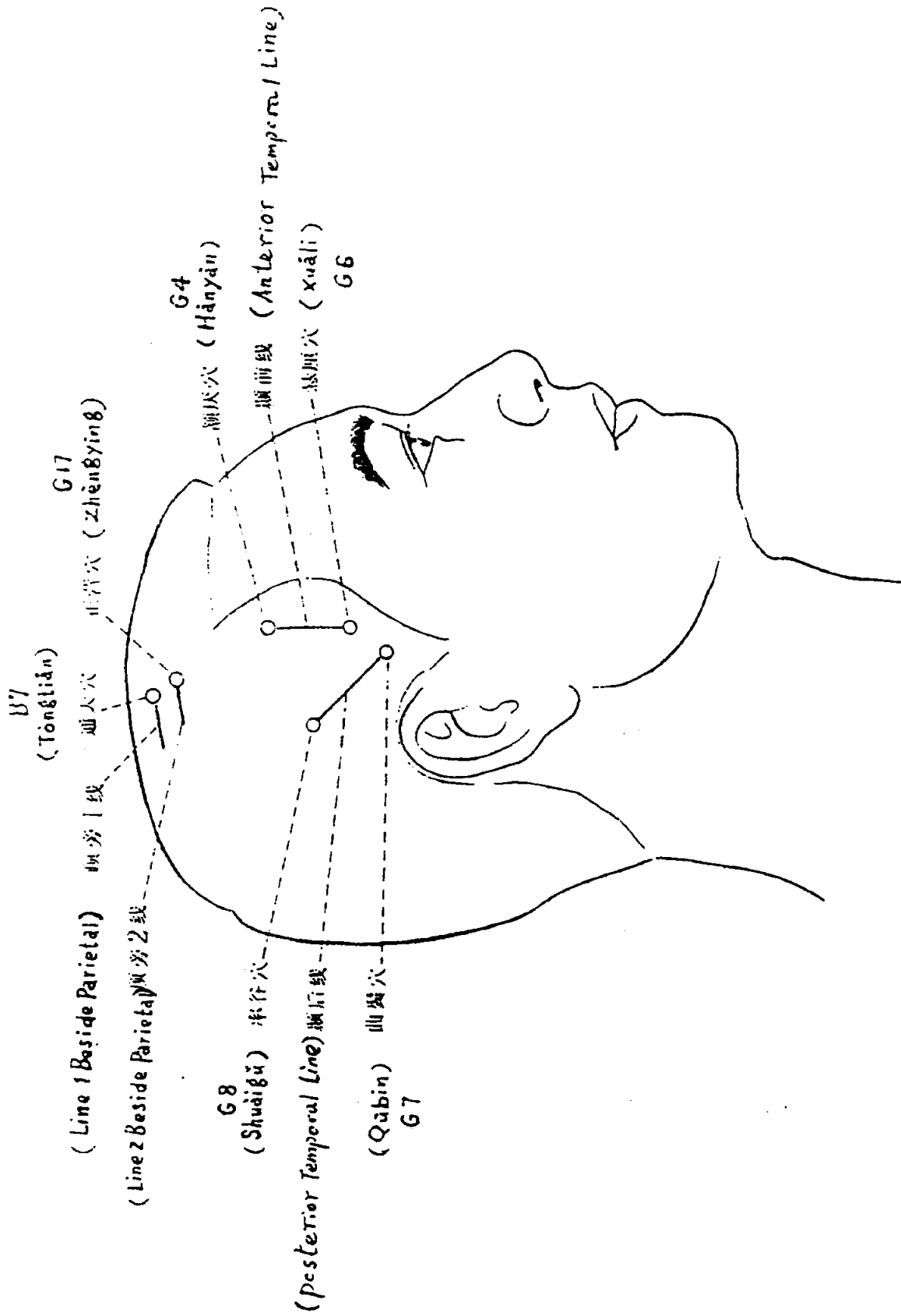


顶面图

Annex 6

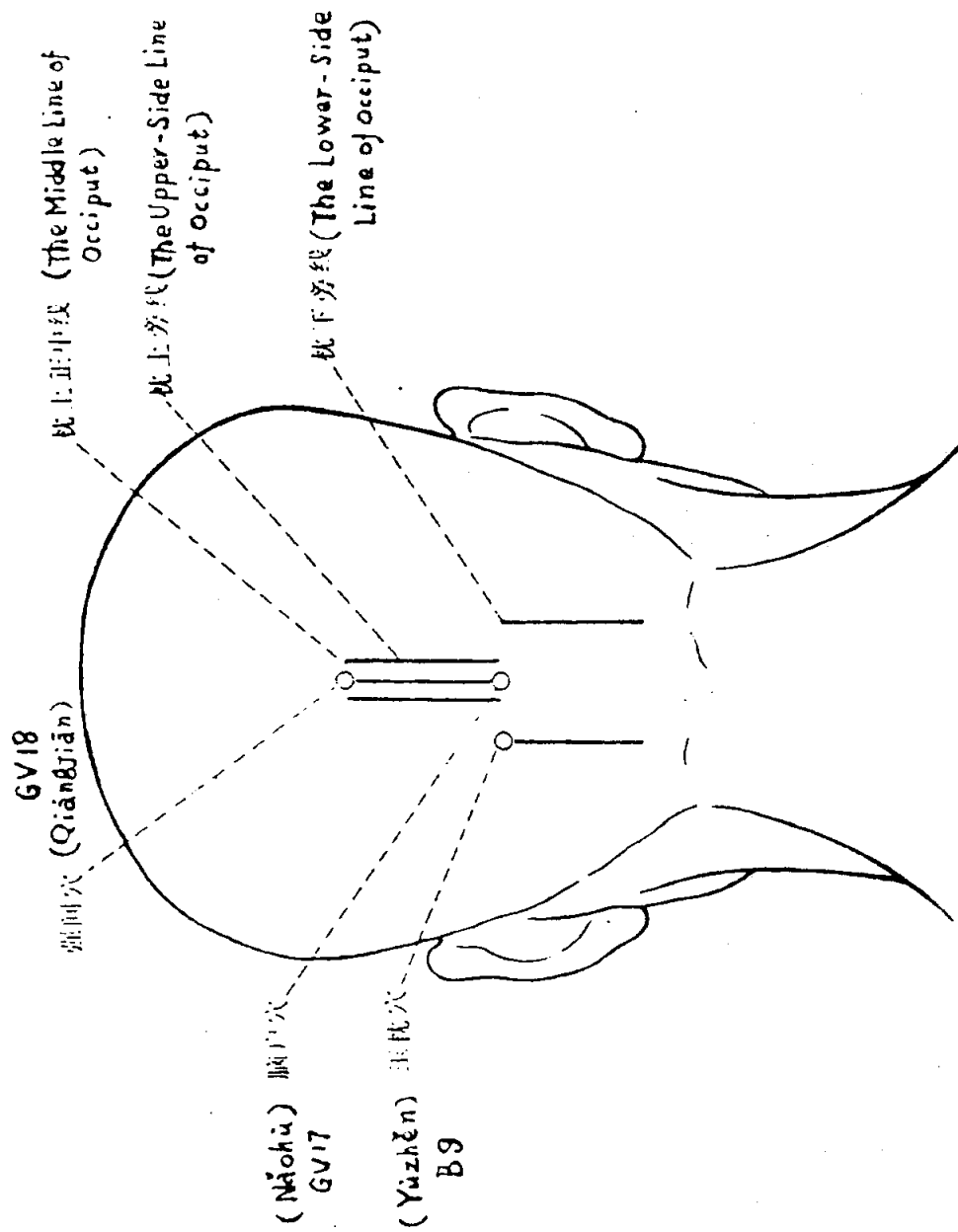


侧面图 (一)



侧面图 (二)

Annex 7



后面图

THE BASIC LINES FOR LOCATING MERIDIAN
AND ACUPUNCTURE POINTS

by Japan Acupoint Committee

In order to clarify locations of acupoints, and to simplify description of the same, it is necessary to settle basic lines in thoracic, abdominal, dorsal and cranial regions. The necessity of which was already agreed at the Conference for International Standardization of Acupuncture Nomenclature held between China and Japan, May 1981. Since then, Japan Acupoint Committee has endeavoured to collect necessary data for the matter, referring to many source books and actual measurements of human bodies. And the resumé of which is stated hereinafter as a Japanese suggestion to be discussed at the Consultation Meeting of the World Health Organization for the Western Pacific Region in Tokyo.

NAMES OF BASIC LINES

1. Median Basic Lines	Zhèngzhongxian
2. Thoracic Lateral Line (L2-Sp17)	Xiongwàixian
3. Thoracic Intermediate Line (S13-S18)	Xiongjianxian
4. Thoracic Medial Line (K22-K27)	Xiongnèixian
5. Abdominal Lateral Line (Liv14-Sp16)	Fùwàixian
6. Abdominal Intermediate Line (S19-S30)	Fùjianxian
7. Abdominal Medial Line (K11-K21)	Fùnèixian
8. Dorsal Lateral Line (B41-B54)	Bèiwàixian
9. Dorsal Medial Line (B11-B30)	Béinèixian
10. Cranial Lateral Line	Touwàixian
11. Cranial Intermediate Line (G15-G19)	Toujianxian
12. Cranial Medial Line (B4-B8)	Touneixian

Basing on the agreement between China and Japan at the said Conference in 1981, localization of acupoints should be made in accordance with the descriptions of authentic source books like (SOMON) (REISUU) (KOUITSUKYOU), and if there is no description or the description found out is not clear enough, then other source books are to be looked up in chronological order.

In this suggestion, locations of the basic lines and acupoints are mentioned using fractional numbers, because one Cun of ancient Chinese measure in the field of acupuncture is of relatively proportional, and thus, a geometrical same length may be expressed sometimes 5 Cun and some other times 6 Cun, which is indeed inconvenient in actual practice.

Annex 7

MEDIAN BASIC LINES

1. Conception Vessel Meridian Line: ventral medial line (CV24-CV1)
2. Governor Vessel Meridian Line: dorsal medial line (GV28-GV1)

THORACIC BASIC LINES

3. Thoracic Lateral Line: Locate L2 point in the adjacent concavity to the medial margin of the coracoid, and the vertical line that passes the L2 point is this one. (L2-Sp17)
4. Thoracic Intermediate Line: the vertical line that passes lateral 1/3 distance between the Conception Vessel and the L2 point. (S13-S17)
5. Thoracic Medial Line: the vertical line that passes medial 1/3 distance between the Conception Vessel and the L2. (K27-K-22)

(Bases of the Localizations)

We measured 115 men localizing L2 point, adopting $\angle 9.5$ Cun between the two mamillae \angle from the source book (REISUU-KOTSUDOHEN) and $\angle 6$ Cun between the Conception Vessel and L2 point \angle from the source book (KOUITSUKYOU), respectively as their reference measurements.

As the result, average location of L2 point is 10mm medial from the medial margin of the coracoid at the sitting position, and 6mm lateral from the same edge, i.e., right in the ventral plane of the coracoid at the supinate position.

Consequently, Japan Acupoint Committee (JAC) concluded that the localization of L2 point is at the \angle adjacent concavity medial to the coracoid, and subclavia \angle .

Now, for the Thoracic Intermediate Line, we adopted $\angle 4$ Cun lateral to the Conception Vessel \angle of the (KOUITSUKYOU), thus JAC concluded \angle lateral 1/3 distance between the Conception Vessel Meridian and L2 point \angle . And for the Thoracic Medial Line $\angle 2$ Cun lateral to the Conception Vessel Meridian \angle of the (KOUITSUKYOU), and the JAC's conclusion was \angle medial 1/3 distance between the Conception Vessel Meridian and L2 point \angle .

Finally, according to the data obtained, average location of the Thoracic Intermediate Line is medial to the mamillary line, in which the mean of 115 men at sitting position is 10 mm. This fact well corresponds to the description of the (REISUU), that is to say, \angle the flow of the Stomach Meridian descends through the medial of the mamilla \angle .

Annex 7

NOTE

Although we have collected the data on 98 women, the difference between one another was so large due to their individual topographical features of the breast that we had to give up adoption of the data, thus resulted to use only men's data here.

Now, if we adopt the description in the (TAISEI), < 8 Cun between both mammillae >, average location of the L2, of male, will be right on the ventral plane of the coracoid itself when sitting, and right on the head of humerus when supinating, and of female, right on the head of humerus in both sitting and supination. Anyway, if we adopt the distance between both mammillae as reference measurement, the location of the L2 will be different between the 2 sexes, and as a consequence of which, so will be the Thoracic Basic lines. Therefore, JAC concluded upon the basis of the said data that the < 6 Cun between the Conception Vessel Meridian and the L2 > is more reliable because it depends on the bone-coracoid.

ABDOMINAL BASIC LINES

1. Abdominal Lateral Line: the vertical line that passes lateral 1/8 of the distance between the medial margin of antero-superior iliac spine and the Conception Vessel Meridian. (Liv14-Spl2)
2. Abdominal Intermediate Line: the vertical line that passes halfway between the medial margin of antero-superior iliac spine and the Conception Vessel Meridian. (S19-S30)
3. Abdominal Medial Line: the vertical line that passes medial 1/8 of the distance between the medial margin of the antero-superior iliac spine and the Conception Vessel Meridian. (K21-K11)

(Bases of the localizations)

We measured 42 male and 59 female in order to know whether the same reference measurement < 6 Cun between the Conception Vessel and the L2 > is applicable or not.

Measured distances are one between the both coracoids, one between the both antero-superior iliac spines, and one between the both Spl2 points. Apropos, the Spl2 was localized at the junction of the inguinal sulcus and the horizontal line that passes superior margin of the symphysis pubis in accordance with the description of (KOUITSUKYOU).

Annex 7

Now, using the thoracic reference measurement of 6 Cun between the Conception and the L2, we localized the abdominal three basic lines spanning from the Conception Vessel Meridian, respectively 0.5 Cun distance the Kidney, basing on the description of (KOUITSUKYOU), 2 Cun distance the Stomach, basing on the description of (SENKIMPOU), and 3.5 Cun distance the Spleen, basing on the description of (KOUITSUKYOU) and (SENKIMPOU), in order to get an average location of each basic line.

As a result, the Spleen Meridian Line of male was averagely 40 mm, of female 45 mm medial from the iliac spine, both of which seemed to us relatively too medial to those of the clinical practice.

Now again, we came to realize that the ratio of the distances between the both iliac spines and the both coracoids, of male 9:10 and of female 9.7:10, owing to which, male and female were to have different abdominal basic lines, in connection with the iliac spine as a referential point.

Next, we tried to localize the abdominal basic lines using the SP12 described in (KOUITSUKYOU) as a referential point. However, the location of the SP12 was so different from one subject to another, especially in cases of female, as many as 9 out of 52 (16.4%) had their Stomach Basic Line passing in the ventral plane of the antero-superior iliac spine.

Now, in view of the average locations of the abdominal basic lines localized basing upon the SP12 as referential point, it was noted that the Abdominal Intermediate Line passes at about half the distance between the Conception Vessel Meridian and the antero-superior iliac spine. More precisely, of male 3mm, and of female 1mm both medial from the middle of the distance.

Hence the conclusion: the location of the Abdominal Intermediate Line is < the vertical line that passes at the midpoint between the Conception Vessel Meridian and the antero-superior iliac spine >. Accordingly, the Spleen (3.5 Cun, KOUITSUKYOU and SENKIMPOU) < lateral 1/8 between the Conception and the iliac spine >, and the Kidney (0.5 Cun) < medial 1/8 between the Conception and the iliac spine >.

DORSAL BASIC LINES

1. Dorsal Lateral Line: the vertical line that passes < the most medial point of the medial margin of the scapula > (we abbreviate this expression hereinafter the SCAPULA), (B41-B54).
2. Dorsal Medial Line: the vertical line that passes the point halfway between the Governor Vessel Meridian and the SCAPULA. (B11-B30)

Annex 7

(Bases of the localizations)

Only description which clearly expresses the locations of these basic lines, though indirectly, is encountered in the (KOUITSUKYOU), which states that the B45 can be located at the medial side of the rim of scapula.

However, if we define it as < the vertical line that passes B45 > , there is a risk of hiding those superior acupoints like B44 and B43 underneath the scapula depending on the individual difference of its shape. Because it seems like most scapula has its medial margin slanting medially from the B45 upwards.

Now, we radiographed 8 male persons in order to know the relativity between the B45 and the scapula, and found out that 4 out of the 8 have B45 underneath the scapula.

Basing on the above data, JAC concluded to describe the location of Dorsal Lateral Line < the vertical line that passes the scapula > , making use of the description to localize B45 in the (KOUITSUKYOU) < adjacent spot to the medial rim of the scapula > , but not too much concerned with the location of the B45 itself.

Dorsal Medial Line is, in accordance with the (KOUITSUKYOU), < laterally 1.5 Cun from the Governor Vessel Meridian > , which means 1/2 of the 3 Cun where the Dorsal Lateral Line passes. Thus, they inductively add up to be expressed < the Dorsal Medial Line is at the midpoint between the Governor Vessel Meridian and the scapula > .

CRANIAL BASIC LINES

1. Cranial Medial Line: the saggittal line that passes medial 1/3 of the distance between the Governor Vessel Meridian and S8 point. (B4-B8)
2. Cranial Intermediate Line: the saggittal line that passes halfway between the Governor and the S8.

(Bases of the Localizations)

The location of the Cranial Medial Line is described in the (KOUITSUKYOU) < laterally 1.5 Cun from the Governor Vessel Meridian > , and also described in the same book < the distance between the Governor and the S8 is 4.5 Cun > , which means the former is 1/3 of the latter, hence the above conclusion.

Annex 7

The location of the Cranial Intermediate Line is not described clearly neither in (SOMON) (REISUU) (KOUITSUKYOU) nor in any other real old classics, thus we have to resort to a description from (SHINKYUJUEI-1546), in which it is said < right up above the pupilla >. Upon observation of the distance between the two basic lines of 114 male, age from 20 to 59, selected were the persons whose hair least retreated from the forehead, we found out, measuring the distance between the both S8 points and the distance between the both pupillae, that in many cases the distance between the two lines is considerably too close, including 8 cases (out of 114, i.e., 7%) less than 5 mm, and 1 closest case 1.5 mm.

Then we tentatively projected the average Cranial Intermediate Line obtained on the basis < right up above the pupilla >, on the distance between the Governor Vessel Meridian and the S8. We thus found out that the average Cranial Medial Line is approximately at the midpoint between the Conception Vessel Meridian and the S8, more exactly, at 2 mm medial from the midpoint.

In accordance with the data obtained hereabove, hypothetically defying it as < a sagittal line that passes halfway between the Governor Vessel Meridian and the S8 >, we calculated and attained the distance between the Cranial Intermediate Line and the Cranial Medial Line of each individual subject. The results: the closes 8.5 mm, the widest 16 mm, and average 12 mm.

The Cranial Intermediate Line thus projected with above hypothesis was judged far more appropriate in its location from the clinical point of view than the other line of < right up above the pupilla >. Hence the conclusion: < the sagittal line that passes halfway between the Governor Vessel Meridian and the S8 > depending both on the (SHINKYUJUEI), and on our observational data.

BRIEF EXPLANATION OF
POINT NAMES OF 14 MERIDIANS

by Shisijing Xueming Jianshi

The following brief explanations of the meaning of the names of acupuncture points and meridians have been compiled at the request of the Working Group on the Standardization of Acupuncture Nomenclature which was convened in Manila, Philippines in 1982 by the WHO Regional Office for the Western Pacific. The aim of this publication is to contribute to a better understanding of the meaning of the phonetic names of acupuncture points particularly to those who cannot read Chinese.

With a view to enabling more people to understand the meaning of each acupuncture point, explanations have been made on the basis of the theory of traditional Chinese medicine (yin-yang, five elements, channel and collateral, zang-fu, qi blood and anatomy) and the clinical effect of acupuncture and moxibustion. However, as several interpretations are possible, only the most acceptable interpretations have been included in this publication.

The first paragraph under the name of each acupuncture point is the explanation of the meaning of the word, and the second paragraph is a brief account of the most acceptable interpretation of the name of the acupuncture point.

The present explanation was compiled by the Acupoint Research Committee of the All China Society of Acupuncture and Moxibustion. Since some names defy interpretation, further research and study may be needed. We therefore welcome any suggestions and revisions.

Annex 8

Lung Meridian Shǒutáiyīn Fèijīng Xué 手太阴肺经穴

L 1 Zhōngfǔ 中府

Zhong, middle; fu, place.

Zhong refers to the middle jiao. The Lung Channel starts from the middle jiao. The point is in the place where qi of the spleen and stomach in the middle jiao is gathered in the Lung Channel.

L 2 Yúnmén 云门

Yun, cloud; men, door.

Yun refers to the lung qi. The point is above the chest, like a door of the lung qi.

L 3 Tiānfǔ 天府

Tian, heaven; fu, place.

The point is in the upper arm, which is a confluence of the lung qi.

L 4 Xiábái 侠白

Xia, same as "xie"; bai, white.

White colour pertains to the lung. With both arms hanging freely, this point is located on both sides of the lung.

L 5 Chízé 尺泽

Chi, a unit of length, 10 cun constitute one chi; ze, marsh.

Chi refers to the ulnar aspect (from the wrist to the elbow). The point is in the depression at the elbow fossa at the ulnar aspect. The channel qi is infused here, like water flowing into the marsh.

L 6 Kǒngzuì 孔最

Kong, opening; zuì, adverb.

The opening of this point is deepest.

L 7 Lièquē 列缺

Lie, arrangement; que, depression.

The lightning and the heavenly rift in ancient times are

Annex 8

called Lieque. The Channel of Hand-Taiyin deverges from this point to the Channel of Hand-Yangming. The point is in the depression superior to the styloid process of the radius.

L 8 Jīngqú 经渠

Jīng, passing; qu, ditch.

A ditch where the channel qi passes.

L 9 Tàiyuān 太渊

Tai, maximum; yuan, abyss.

Tai means abundance. The channel qi in the local part of the point is abundant as an abyss.

L 10 Yúji 鱼际

Yu, fish; ji, border.

The muscular flexor pollicis in the palm is prominent as fish and the point is just located at its border. Yuji (thenar) is used as an anatomical word at present.

L 11 Shàoshāng 少商

Shao, immaturity; shang, one of the five sounds, pertaining to metal.

Shao means less and the lung pertains to metal at shang sound. This is the end point of the Lung Channel where qi is less.

Large Intestine Meridian Shǒuyángmíng Dàchángjīng Xué
手阳明大肠经穴

LI 1 Shāngyáng 商阳

Shang, one of the five sounds, pertaining to metal; yang, the opposite of yin.

The large intestine pertains to metal at shang sound. Yang refers to the Yang Channels.

LI 2 Èrjiān 二间

Er, second; jian, clearance.

Jian refers to the point. This is the second point of the Large Intestine Channel.

Annex 8

LI 3 Sānjiān 三间

San, third; jian, clearance.

Jian refers to the point. This is the third point of the Large Intestine Channel.

LI 4 Hégu 合谷

He, junction; gu, valley.

This point is in between the 1st and the 2nd metacarpal bones. Local region of the point is depressive as a valley.

LI 5 Yángxī 阳溪

Yang, the opposite of yin; xi, ditch.

Yang refers to the Yang Channels. The local depression is like a ditch in the mountains.

LI 6 Piānlì 偏历

Pian, divergence; li, passway.

The Large Intestine Channel separates a collateral from here and diverges to the Lung Channel.

LI 7 Wēnlǐu 温溜

Wen, warming; liu, circulation.

This point is able to promote the channel circulation by warming and good at treating cold-pain of the elbow and arm.

LI 8 Xiàlián 下廉

Xia, inferior; lian, edge.

The point is inferior to Shanglian at the dorsal side of the forearm, close to the radial aspect.

LI 9 Shànglián 上廉

Shang, superior; lian, edge.

The point is superior to Xialian at the dorsal side of the forearm, close to the radial aspect.

LI 10 Shǒusānlǐ 手三里

Shou, upper limbs; san, numeral; li, used as cun in ancient times.

The point is in the upper limbs. With the arm stretched, the point is 3 cun below Quchi.

- LI 11 Qūchí 曲池
Qu, crooked; chi, pool.
With the arm flexed at the elbow, a depression like a pool is found and the point is just in it.
- LI 12 Zhǒuliáo 肘髎
Zhou, elbow; liao, seam.
The point is at the elbow and close to the seam.
- LI 13 Shǒuwǔlǐ 手五里
Shou, upper limbs; wu, numeral; li, used as cun in ancient times.
The point is in the upper limbs, 5 cun below Tianfu.
- LI 14 Bìnào 臂臑
Bi, upper limbs; nao, muscle prominence of the arm.
The point is on the muscle prominence of the arm.
- LI 15 Jiānyú 肩髃
Jian, shoulder; yu, corner.
The point is at the corner of the shoulder.
- LI 16 Jùgǔ 巨骨
Ju, big; gu, bone.
The clavicle is called Jugu in ancient times. The point is close to the acromial end of the clavicle.
- LI 17 Tiāndǐng 天鼎
Tian, heaven; ding, name of an ancient utensil.
Tian refers to the heaven. The head looks like a utensil.
The point is at the neck below the ear.
- LI 18 Fútū 扶突
Fu, nearby; tu, prominence.
Tu refers to prominentia laryngea. The point is by the side of the prominentia laryngea.
- LI 19 Kǒuhéliáo 口禾髎
Kou, mouth; he, grain; liao, seam.
The grain enters the stomach through the mouth. The point is in the seam beside the mouth.

Annex 8

LI 20 Yingxiāng 迎香

Ying, welcome; xiang, fragrance.

This point is close to the nose and is able to treat nose disorders to improve the sense of smell and welcome the fragrance.

Stomach Meridian Zúyángmíng Wèijīng Xué 足阳明胃经穴

S 1 Chéngqì 承泣

Cheng, receiving; qi, tears.

The point is below the pupil of the eye, like a region to receive tears.

S 2 Sībái 四白

Si, four directions; bai, brightness.

This point is below the eye and able to treat eye disease to improve the vision so that brightness is seen in all the four directions.

S 3 Jùliáo 巨髎

Ju, great; liao, seam.

The point is in the great seam at the junction of the superior maxillary bone and the zygomatic bone.

S 4 Dìcāng 地仓

Di, earth; cang, granary.

The five cereals grow on the earth. The grain enters into the stomach through the mouth, like entering into the granary. The point is at the corner of the mouth.

S 5 Dàiyíng 大迎

Da, the opposite of small; ying, welcome.

The point is by the side of Daying vessel (the extramaxillary artery).

S 6 Jiáchē 颊车

Jia, cheek; che, vehicle.

Che refers to the mandible. The point is at the cheek, close to the mandibular angle.

Annex 8

- S 7 Xiàguān 下关
Xia, lower; guan, pass.
Guan refers to the zygomatic arch, below where the point is located.
- S 8 Tóuwéi 头维
Tou, head; wei, corner.
The point is at the frontle corner of the head.
- S 9 Rényíng 人迎
Ren, mankind; ying, welcome.
The point is by the side of Renying vessel (cephalic artery).
- S 10 Shuǐtū 水突
Shui, water-grain; tu, passing.
Water-grain refers to food. The point is at the neck, close to the esophagus where the food passes.
- S 11 Qìshě 气舍
Qi, air; she, residence.
Qi refers to the lung and stomach qi. The point is by the side of the trachea, like a residence of qi.
- S 12 Quēpén 缺盆
Que, depression; pen, name of a utensil.
Quepen refers to the supraclavicular fossa, in where the point is located.
- S 13 Qìhù 气户
Qi, air; hu, door.
Qi refers to the lung and stomach qi. The point is at the superior part of the chest, that's why the point is likened to a door of qi.
- S 14 Kùfáng 库房
Ku, storehouse; fang, side room.
The respiratory qi stores in the lungs as if in the storehouse and runs from above to below, like entering into the side room from the door.

Annex 8

S 15 Wūyì 屋翳

Wu, room; yi, screening.

The point is at the middle part of the chest, where the respiratory qì looks as if screened in a deep room.

S 16 Yīngchuāng 膺窗

Ying, chest; chuang, window.

The point is in the chest, like a window of the chest.

S 17 Rǔzhōng 乳中

Ru, nipple; zhong, middle.

The point is in the middle of the nipple.

S 18 Rǔgēn 乳根

Ru, nipple; gen, root.

The point is in the root of the nipple.

S 19 Bùróng 不容

Bu, do not; rong, containing.

The point is in the upper abdomen, indicating that no more containing when the water-grain in the stomach reaches to this height.

S 20 Chéngmǎn 承满

Cheng, standing; man, fullness.

The point is in the upper abdomen, indicating that the water-grain in the stomach has been full.

S 21 Liángmén 梁门

Liang, grain; men, door.

The point is in the upper abdomen, indicating a door of the grain into the stomach.

S 22 Guānmén 关门

Guan, pass; men, door.

The point is close to the lower region of the stomach, corresponding to a pass at the junction between the stomach and the intestines, like a door.

S 23 Tàiyi 太乙

Tai, maximum; yi, one of the ten Heavenly Stems.

The middle is considered as Taiyi in ancient times. Taiyi is the Middle Palace of Hetu (the Eight Diagrams). The spleen is in the middle and the middle of the abdomen is likened to Taiyi. The point is in the lower part of the stomach, corresponding to the middle of the abdomen.

S 24 Huáròumén 滑肉门

Hua, fine; rou, muscle; men, door.

Huarou refers to the preliminarily digested fine food. The point is 1 cun above the navel in where the food is distinguished into clarity and turbidity, like a door where the fine food passes through.

S 25 Tiānshū 天枢

Tian, heaven; shu, pivot.

The region above the navel is considered as the heaven, pertaining to yang, while the region below the navel as earth, pertaining to yin. The point is level with the navel, corresponding to the pivot between the Heaven and the Earth.

S 26 Wàilíng 外陵

Wai, the opposite of interior; ling, hill.

The local prominence of the point is like a hill.

S 27 Dàjù 大巨

Da, the opposite of small; ju, great.

The point is at the greatest prominence of the abdominal wall.

S 28 Shuǐdào 水道

Shui, water; dao, passage.

The deep region of the point corresponds to the small intestine and close to the urinary bladder, pertaining to the lower jiao, like a water passage.

Annex 8

S 29 Gūilái 归来

Gui, return; lai, arrival.

This point is able to treat prolapse of uterus and hernia, functioning in recovery.

S 30 Qìchōng 气冲

Qi, channel qi; chong, pass.

The point is in the Qi Street and is a pass where the channel qi is infused.

S 31 Bìguān 髀关

Bi, thigh; guan, joint.

The point is at the femoral joint.

S 32 Fútù 伏兔

Fu, sleeping posture; tu, rabbit.

The prominence of the local muscle of the point looks like a sleeping rabbit.

S 33 Yīnshì 阴市

Yin, the opposite of yang; shi, market.

Yin refers to pathogenic cold, and shi means removal. The point is able to remove the pathogenic cold from the knee.

S 34 Liángqiū 梁丘

Liang, ridge of a hill; qiu, mound.

The prominent muscle above the knee looks like the mound at the ridge of a hill, where the point is located.

S 35 Dúbí 犛鼻

Du, small cow; bi, nose.

The depression on both sides below the kneecap looks like a nostril of the small cow and the point is at the external nostril.

S 36 Zúsānlǐ 足三里

Zu, lower limbs; san, ³ humeral; li, used as cun in ancient times.

The point is in the lower limbs, 3 cun below the knee.

Annex 8

S 37 Shàngjùxū 上巨虚

Shang, upper; ju, great; xu, void.

Great void is formed between the tibia and fibula. The point is above the void.

S 38 Tiáokǒu 条口

Tiao, long strip; kou, clearance.

The point is in the clearance of the long strip between the fibula and tibia.

S 39 Xiàjùxū 下巨虚

Xia, lower; ju, great; xu, void.

Great void is formed between the tibia and the fibula. The point is below the void.

S 40 Fēnglóng 丰隆

Feng, plentiful; long, abundance.

The grain qi of the Stomach Channel is plentiful and overflows into the major Luo at this point.

S 41 Jiěxī 解溪

Jie, separation; xi, stream.

Xi refers to the minor depression on the body surface. The point is in the depression of the separated bone joints in the front of the articulation talocruralis.

S 42 Chōngyáng 冲阳

Chong, pass; yang, the opposite of yin.

The point is in the place where the Chongyang Channel is located (arteria dorsalis pedis).

S 43 Xiàngǔ 陷谷

Xian, depression; gu, valley.

Gu refers to the depression on the body surface. The point is in the depression of the second metatarsal bone.

S 44 Nèitíng 内庭

Nei, interior; ting, court.

This point is in the interior of Lidui, like an indoor court.

Annex 8

S 45 Lìduì 厉兑

Li, stomach; duì, door.

This point is at the end of the toe, like a door of the Stomach Channel.

Spleen Meridian Zútàiyīn Píjīng Xué 足太阴脾经穴

Sp 1 Yīnbái 隐白

Yin, hidden; bai, white.

The point is in a hidden region, where the flesh is white.

Sp 2 Dàdū 大都

Da, the opposite of small; du, gathering.

The point is at the big toe, where the channel qi is infused.

Sp 3 Tàibái 太白

Tai, maximum; bai, white.

The point is at the white flesh of the big toe, where the white flesh is wider.

Sp 4 Gōngsūn 公孙

Gong, connection; sun, reticular collateral.

Sun refers to collaterals, from where the Spleen Channel connects with the Stomach Channel.

Sp 5 Shāngqiū 商丘

Shang, one of the five sounds, pertaining to metal; qiu, mound.

This is a point of the Spleen Channel and pertains to metal. The point is below the mound-like medial malleolus.

Sp 6 Sānyīnjiāo 三阴交

Sanyin, three yin channels; jiao, crossing.

This is a crossing point of the Spleen Channel, the Liver Channel and the Kidney Channel.

Sp 7 Lòugǔ 漏谷

Lou, point opening; gu, valley.

Annex 8

The point is in the valley-like depression at the posterior margin of the tibia.

Sp 8 Dìjī 地机

Di, earth; ji, importance.

Di refers to the lower limbs where the point is located. The local muscle is very thick and is an important region of the leg movement.

Sp 9 Yīnlíngquán 阴陵泉

Yin, the opposite of yang; ling, hill; quan, spring.

The interior is yin. The point is in the depression at the inferior margin of the epicondyle of the tibia as a spring at the bottom of the hills.

Sp 10 Xuèhǎi 血海

Xue, blood; hai, sea.

This point is good at treating blood diseases, like the gathered blood returning to the sea.

Sp 11 Jīmén 箕门

Ji, dustpan; men, door.

Sitting with both legs stretched is like a dustpan. The point is at the medial aspect of the thigh and symmetrical bilaterally, just like a door of the dustpan.

Sp 12 Chōngmén 冲门

Chong, pass; men, door.

The point is in the Qi Street and is an important door where channel qi passes.

Sp 13 Fǔshè 府舍

Fu, zang-fu; she, dwelling.

The deep region of the point is the abdominal cavity, which is a dwelling of zang-fu organs.

Sp 14 Fùjié 腹结

Fu, abdomen; jie, stagnation.

This point is good at treating abdominal stagnation.

Annex 8

Sp 15 Dàhéng 大横

Da, the opposite of small; heng, the opposite of vertical.
The point is internally horizontal to the large intestine.

Sp 16 Fù'āi 腹哀

Fu, abdomen; ai, pain.

This point is good at treating all kinds of abdominal pain.

Sp 17 Shídòu 食窦

Shi, food; dou, hole.

The point is infero-lateral to the nipple and is provided with a hole for storing milk in the deep region. This point is able to promote absorption of food nutrient and used for tonification.

Sp 18 Tiānxī 天溪

Tian, heaven; xi, stream.

Tian refers to the heaven. The point is in the intercostal space, like a stream.

Sp 18 Xiōngxiāng 胸乡

Xiong, chest; xiang, region.

This point is in the chest and able to treat chest diseases.

Sp 20 Zhōuróng 周荣

Zhou, general; rong, nourishment.

This point is able to harmonize nutrient qi and to nourish the general body.

Sp 21 Dàbāo 大包

Da, the opposite of small; bao, containing.

The point pertains to the Major Luo of the Spleen Channel. The spleen earth is in the middle and widely related to zang-fu organs.

Heart Meridian Shǒushàoyīn Xīnjīng Xué 手少阴心经穴

H 1 Jíquán 极泉

Ji, summit; quan, spring.

The point is below the armpit, and the local depression is like a spring.

H 2 Qīnglíng 青灵

Qing, origination; ling, deity.

The heart is the officer of the monarch and functions in resustation and housing the mind, and originating the channel qi.

H 3 Shàohǎi 少海

Shao, immaturity; hai, sea.

Shao refers to Hand-Shaoyin Channel. This is the He-Sea Point of the Herat Channel. The channel qi, when arriving here, looks as if the water flowing into the sea.

H 4 Língdào 灵道

Ling, mind; dao, pathway.

The heart dominates mind. The point is in the depression of the ulnar flexor muscle, like a pathway toward the God.

H 5 Tōnglǐ 通里

Tong, relation; li, interior.

From this point the collateral of this channel is diverged and related to the Small Intestine Channel.

H 6 Yīnxi 阴郄

Yin, the opposite of yang; xi, cleft.

This is the Xi-Cleft Point of the Heart Channel.

H 7 Shénmén 神门

Shen, mind; men, door.

The heart houses the mind. This point is a door of the heart mind.

H 8 Shàofǔ 少府

Shao, youthful; fu, place.

The point pertains to the Heart Channel, where the channel qi is infused.

H 9 Shàochōng 少冲

Shao, youthful; chong, impulse.

The point is at the impulsing place of the Heart Channel, where the channel qi is originated.

Annex 8

Small Intestine Meridian

Shǒutàiyáng Xiǎochángjīng Xué

手太阳小肠经穴

SI 1 Shàozé 少泽

Shao, youthful; ze, marsh.

The point pertains to the Small Intestine Channel, where the channel qi is originated, like a small marsh.

SI 2 Qiángǔ 前谷

Qian, the opposite of back; gu, valley.

The depression of the 5th metacarpophalangeal joint on the front is deep as a valley, where the point is located.

SI 3 Hòuxī 后溪

Hou, the opposite of front; xi, ditch.

The depression of the 5th metacarpophalangeal joint on the back is deep as a ditch, where the point is located.

SI 4 Wàngǔ 腕骨

Wan, wrist; gu, bone.

The point is in between the bones of the wrist.

SI 5 Yángǔ 阳谷

Yang, the opposite of yin; gu, valley.

The exterior is yang. The seam at the wrist is like a valley, where the point is located.

SI 6 Yǎnglǎo 养老

Yang, nourishing; lao, old.

This point is good at treating senile frequently encountered diseases such as blurring of vision, deafness, lambago and shoulder pain.

SI 7 Zhīzhèng 支正

Zhi, divergence; zheng, regular channel.

The collateral of the Small Intestine Channel is diverged from this point to the Heart Channel.

SI 8 Xiǎohǎi 小海

Xiao, small; hai, sea.

Xiao refers to the Small Intestine Channel. This is a He-Sea Point of the Small Intestine Channel and like water flowing into the sea when qi and blood arrive at this point.

SI 9 Jiǎnzhēn 肩贞

Jian, shoulder; zhen, first.

This is the first point where the Small Intestine Channel enters the shoulder.

SI 10 Nàoshū 臑俞

Nao, muscle prominence of the upper arm; shu, point.

The point is in the upper arm, where the channel qi is infused.

SI 11 Tiānzōng 天宗

Tian, the upper part; zong, respect.

This is an important point in the upper part of the body.

SI 12 Bīngfēng 秉风

Bing, receiving; feng, pathogenic wind.

The point is in the place where is easily attacked by the pathogenic wind.

SI 13 Qūyuán 曲垣

Qu, crooked; yuan, wall.

The spine of the scapula is as crooked as wall, where the point is located.

SI 14 Jiānwàishū 肩外俞

Jian, shoulder; wai, lateral aspect; shu, point.

The point is at the shoulder, corresponding to the lateral aspect at the medial margin of the scapula.

SI 15 Jiǎnzhōngshū 肩中俞

Jian, shoulder; zhong, interior; shu, point.

The point is at the shoulder, corresponding to the medial margin of the scapula.

SI 16 Tiānchuāng 天窗

Tian, upper part; chuang, window.

The point is at the neck and indicates ear disease and opens into the ear as the "heavenly window".

Annex 8

SI 17 Tiānróng 天容

Tian, upper part; rong, abundance.

The point is at the head, where the channel qi is abundant.

SI 18 Quánliáo 颧髎

Quan, cheek; liao, seam.

The point is in the seam of the zygomatic bone.

SI 19 Tīnggōng 听官

Ting, hearing; gong, palace.

Tinggong refers to the ear. The point is at the ear and indicates ear disease.

Bladder Meridian Zútàiyáng Pángguāngjīng Xué 足太阳膀胱经穴

B 1 Jīngmíng 睛明

Jing, eye; ming, brightness.

The point is at the eye region and able to clear the eyes.

B 2 Cuánzhú (Zǎnzhú) 攒竹

Zan, gathered; zhu, bamboo.

The point is at the eyebrow, which grows thickly as the gathered bamboo leaves.

B 3 Méichōng 眉冲

Mei, eyebrow; chong, upward.

The point is at the anterior hairline directly above the eyebrow.

B 4 Qūchā (Qūchāi) 曲差

Qu, crooked; chai, unevenness.

This channel gets crooked and lateral from this point and then runs posteriorly and manifested in unevenness.

B 5 Wǔchù 五处

Wu, fifth; chu, place.

This is the fifth place where the Urinary Bladder Channel is located.

B 6 Chéngguāng 承光

Cheng, receiving; guang, brightness.

The point is at the vertex where is easy to receive brightness.

B 7 Tōngtiān 通天

Tong, reaching; tian, heaven.

The upper part is considered as the heaven. The point is at head and connects upward with the vertex.

B 8 Luòquè 络却

Luo, relation; que, return.

The channel qi enters into interior from this point to relate to the brain and then returns.

B 9 Yùzhēn 玉枕

Yu, jade; zhen, pillow.

The ancient name of the occipital bone is "Yuzhengu" and the point is above it.

B 10 Tiānzhu 天柱

Tian, heaven; zhu, pillar.

The upper part is considered as heaven. The cervical vertebra is called "Zhugu" in ancient times and the point is lateral to it.

B 11 Dàzhù 大杼

Da, the opposite of small; zhu, reed.

The first thoracic vertebra is bigger, and the spinous process is like a reed, and the point is lateral to it.

B 12 Fēngmén 风门

Feng, pathogenic wind; men, door.

The point is in the place where is easily attacked by the pathogenic wind and the point is good at treating the diseases caused by the pathogenic wind, therefore, the point is considered as the door of the pathogenic wind.

B 13 Fèishū 肺俞

Fei, lung; shu, infusion.

This point is the place where the lung qi is infused on the back.

Annex 8

B 14 Juéyīnshū 厥阴俞

Jueyin, the end of the two yin channels, referring to the pericardium; shu, infusion.

This point is the place where the pericardium qi is infused on the body surface of the back.

B 15 Xīnshū 心俞

Xin, heart; shu, infusion.

This point is the place where the heart qi is infused on the body surface of the back.

B 16 Dūshū 督俞

Du, Du Channel; shu, infusion.

This point is the place where the Du Channel qi is infused.

B 17 Gēshū 膈俞

Ge, diaphragm; shu, infusion.

This point is the place where the diaphragm qi is infused on the body surface of the back.

B 18 Gānshū 肝俞

Gan, liver; shu, infusion.

This point is the place where the liver qi is infused on the body surface of the back.

B 19 Dǎnshū 胆俞

Dan, gall bladder; shu, infusion.

This point is the place where the gall bladder qi is infused on the body surface of the back.

B 20 Píshū 脾俞

Pi, spleen; shu, infusion.

This point is the place where the spleen qi is infused on the body surface of the back.

B 21 Wèishū 胃俞

Wei, stomach; shu, infusion.

This is the place where the stomach qi is infused on the body surface of the back.

B 22 Sānjiāoshū 三焦俞

Sanjiao, sanjiao; shu, infusion.

This point is the place where the sanjiao qi is infused on the body surface of the back.

B 23 Shènsū 肾俞

Shen, kidney; shu, infusion.

This point is the place where the kidney qi is infused on the body surface of the back.

B 24 Qìhǎishū 气海俞

Qihai, sea of the primary qi; shu, infusion.

This point should be called Qihai, where the primary qi is infused on the body surface of the back.

B 25 Dàchángshū 大肠俞

Dachang, large intestine; shu, infusion.

This point is the place where the large intestine qi is infused on the body surface of the back.

B 26 Guānyuánshū 关元俞

Guan, storage; yuan, primary qi; shu, infusion.

This point should be called Guanyuan, where the primary yin and primary yang qi are stored and infused on the body surface of the back.

B 27 Xiǎochángshū 小肠俞

Xiaochang, small intestine; shu, infusion.

This is the place where the small intestine qi is infused on the body surface of the back.

B 28 Pánguāngshū 膀胱俞

Panguan, urinary bladder; shu, infusion.

This point is the place where the urinary bladder qi is infused on the body surface of the back.

B 29 Zhōnglǔshū 中膂俞

Zhong, middle; lu, spinal muscle; shu, infusion.

This point is in the middle part of the body, where the spinal muscle qi is infused on the body surface of the back.

Annex 8

B 30 Báihuánshū 白环俞

Bai, white; huan, ring; shu, point.

This point may treat female leukorrhagia.

B 31 Shàngliáo 上髎

Shang, the opposite of lower; liao, seam.

This point is at the highest posterior sacral foramen.

B 32 Ciliáo 次髎

Ci, second; liao, seam.

The point is at the second posterior sacral foramen.

B 33 Zhōngliáo 中髎

Zhong, middle; liao, seam.

The point is at the third posterior sacral foramen, corresponding to the middle part.

B 34 Xiàliáo 下髎

Xia, the opposite of upper; liao, seam.

The point is at the lowest posterior sacral foramen.

B 35 Huíyáng 会阳

Hui, crossing; yang, the opposite of yin.

This point pertains to yang channel and is crossed with the Du Channel which is considered as the sea of the yang channels.

B 36 Chéngfú 承扶

Cheng, receiving; fu, support.

This point is on the upper section of the femur at the midpoint of the buttock crease, functioning in receiving and supporting the body weight.

B 37 Yīnmén 殷门

Yin, thickness; men, door.

The local muscle of the point is thick, and the point is a door where the Urinary Bladder Channel passes.

B 38 Fúxi 浮郄

Fu, downstream; xi, hole.

The channel qi flows downward from the posterior aspect of the femur and enters into the hole.

B 39 Wēiyáng 委阳

Wei, crooked; yang, the opposite of yin.

The exterior pertains to yang. The point is lateral to Weizhong on the transverse crease of the popliteal fossa.

B 40 Wēizhōng 委中

Wei, crooked; zhong, middle.

The point is at the midpoint on the transverse crease of the popliteal fossa.

B 41 Fùfēn 附分

Fu, appended; fen, separation.

The Urinary Bladder Channel runs downward bilaterally from the neck. This point is at the head of the second line appending to the side of the first line.

B 42 Pòhù 魄户

Po, soul; hu, door.

The lung stores the soul. The point is parallel with Feishu, like a door of the lung qi.

B 43 Gāohuáng 膏肓

Gao, fat; huang, membrane.

Gaohuang refers to the fat and membrane below the heart, but above the diaphragm. Since this part is close to the pericardium, it is taken as the component of the pericardium. The point is parallel with Jueyinshu.

B 44 Shéntáng 神堂

Shen, mind; tang, hall.

The heart houses the mind. The point is parallel with Xinshu, like a hall where the mind is housed.

B 45 Yìxī 噫嘻

Yixi, the sighing sound.

Ask the patient to sigh during location of the point, and the local region of the point responds to the fingers.

Annex 8

B 46 Géguān 膈关

Ge, diaphragm; guan, pass.

The point is parallel with Geshu and therefore is likened to the pass for treating diaphragm disorders.

B 47 Húnmén 魂门

Hun, soul; men, door.

The liver stores the soul. The point is parallel with Ganshu, like a door of the liver qi.

B 48 Yánggāng 阳纲

Yang, the opposite of yin; gang, importance.

The gall bladder pertains to yang. The point is parallel with Dansh and is important to treat gall bladder diseases.

B 49 Yìshè 意舍

Yi, emotion; she, residence.

The spleen stores emotion. The point is parallel with Pishu, like a residence of the spleen qi.

B 50 Wèicāng 胃仓

Wei, stomach; cang, storehouse.

The point is parallel with Weishu. The stomach dominates receiving of food, like a storehouse.

B 51 Huāngmén 育门

Huang, membrane; men, door.

The point is parallel with Sanjiaoshu, like a door of the membrane qi.

B 52 Zhìshì 志室

Zhi, mind; shi, dwelling.

The kidney stores the mind. The point is parallel with Shenshu, like a dwelling of the kidney qi.

B 53 Bāohuāng 胞育

Bao, bag; huang, membrane.

Bao refers to the urinary bladder. The point is parallel with Pangguangshu.

B 54 Zhibiān 秩边

Zhi, order; bian, edge.

The Back-Shu points of the Urinary Bladder Channel are arranged in order. This point is at the lowest position.

B 55 Héyáng 合阳

He, confluence; yang, the opposite of yin.

The channel runs downward from the neck, from where it is separated into two lines, after meeting at Weizhong with the channel, it travels gradually down and up. The upper is considered as yang.

B 56 Chéngjīn 承筋

Cheng, support; jin, muscle.

The point is in the gastrocnemius muscle, which is an important muscle below the leg to support the upper muscles.

B 57 Chéngshān 承山

Cheng, support, shan, mountain.

The two bellies of the gastrocnemius muscle are prominent as the mountain and the point is below them for supporting purpose.

B 58 Fēiyáng 飞扬

Fei, flying; yang, the opposite of yin.

The exterior is yang. The point is at the lateral aspect of the leg and the channel flies out from this point to the Kidney Channel.

B 59 Fūyáng 附阳

Fu, tarsus; yang, the opposite of yin.

The exterior and superior are yang. The point is at the superior aspect of the tarsus at the lateral aspect of the leg.

B 60 Kūnlún 昆仑

Kunlun, name of the mountain.

The lateral malleolus is high and likened to a mountain, behind where the point is located.

Annex 8

B 61 Púcān (Púshēn) 仆参

Pu, servant; can, paying respects.

The point is at the lateral aspect of the heel, and is easy to be exposed when the servant pays respects.

B 62 Shēnmài 申脉

Shen, extending; mai, channel.

The point pertains to the Urinary Bladder Channel. From this point the channel extends to the Yangqiao Channel.

B 63 Jīnmén 金门

Jin, name of yang; men, door.

The point pertains to Urinary Bladder Channel and is a start point of Yangwei Channel, as if entered into the door of the Yangwei Channel.

B 64 Jīnggǔ 京骨

Jinggu is an ancient name of the tuberosity of the 5th metatarsus.

The point is at the lateral aspect of the tuberosity of the 5th metatarsus.

B 65 Shùgǔ 束骨

Shugu is an ancient name of the head of the 5th metatarsus.

The point is at the lateral and inferior aspect of the head of the 5th metatarsus.

B 66 Zútōnggǔ 足通谷

Zu, foot; tong, passing; gu, valley.

The point is in the depression of the foot, which is depressive as a valley, through where the channel qi passes.

B 67 Zhīyīn 至阴

Zhi, reaching; yin, the opposite of yang.

Yin refers to the Foot-Shaoyin Channel. This is the end point of the Urinary Bladder Channel of Foot-Taiyang and from here reaching to the Foot-Shaoyin Channel.

Annex 8

Kidney Meridian Zúshàoyīn Shènjīng Xué 足少阴肾经穴

K 1 Yǒngquán 涌泉

Yong, gushing; quan, spring.

The welled up water is called gushing spring. The point is on the sole and the channel qi flows below to above as a gushing spring.

K 2 Rángǔ 然谷

Ran, rangü; gu, valley.

The point is in the depression below the tubercle of the navicular bone, as staying in a valley.

K 3 Tàixī 太溪

Tai, great; xi, creek.

The point is in the depression between the medial malleolus and the Achille's tendon, as staying in a big creek.

K 4 Dàzhōng 大钟

Da, the opposite of small; zhong, heel.

The point is on the heel and is named Dazhong because the calcaneous bone is big.

K 5 Shuǐquán 水泉

Shui, water; quan, spring.

The water spring means water source. The kidney dominates water metabolism. This point is a Xi-Cleft Point of the Kidney Channel and able to treat dripping of urine.

K 6 Zhàohǎi 照海

Zhao, shining; hai, sea.

The point pertains to the Kidney Channel and qi is abundant as sea, indicating that the real yang of the kidney may shine the whole body.

K 7 Fùliú 复溜

Fu, deep; liu, flowing.

Annex 8

The point is above Zhaohai, referring to the channel qi flowing into the "sea" and then coming out and continuing the flowing.

K 8 Jiāoxìn 交信

Jiao, crossing; xin, belief.

Xin is one of the five elements (benevolence, loyalty, intelligence and belief), pertaining to earth and referring to the spleen. The channel qi is crossed with the Spleen Channel at this point.

K 9 Zhùbīn 筑宾

Zhu, strong; bin, knee and leg.

The point is on the medial aspect of the leg and able to strengthen the knee and leg.

K 10 Yīngǔ 阴谷

Yin, the opposite of yang; gu, valley.

The interior is yin. The point is at the medial aspect of the knee joint and the local depression is like a valley.

K 11 Hénggǔ 横骨

Hengu is the ancient name of the pubis.

The point is on the superior margin of the Hengu.

K 12 Dàhè 大赫

Da, the opposite of small; he, illustrious.

Illustrious and great. This point is the confluence of the Chong Channel of Foot-Shaoyin and is a place where the primary qi in the lower jiao is plentiful.

K 13 Qìxué 气穴

Qi, vital energy; xue, room.

Qi refers to the kidney qi. The point is by the side of Guanyuan, like a room where the kidney qi is stored.

K 14 Sìmn 四满

Si, fourth; man, fullness.

This is the 4th point of the Kidney Channel entering into the abdomen, and able to treat abdominal distension.

Annex 8

- K 15 Zhōngzhù 中注
Zhong, middle; zhu, pouring.
The Kidney Channel qi from this point pours into the middle jiao.
- K 16 Huángshū 肓俞
Huang, membrane; shu, infusion.
The kidney qi infuses from this point into the Huang membrane.
- K 17 Shāngqū 商曲
Shang, one of the five sounds, pertaining to metal; qu, bend.
Shang is metal sound and the large intestine pertains to metal. This point is internally opposite to the intestinal bend.
- K 18 Shíguān 石关
Shi, stone; guan, importance.
Stone means hard. This is an important point to treat abdominal hard diseases.
- K 19 Yīndū 阴都
Yin, the opposite of yang; du, gathering.
Yin refers to the abdomen and the yin channel. The point is in the abdomen where the water-grain is gathered.
- K 20 Fùtōnggǔ 腹通谷
Fu, abdomen; tong, passing; gu, water-grain.
The point is in the abdomen, through where the water-grain passes.
- K 21 Yōumén 幽门
You, deep; men, door.
The lower orifice of the stomach is called Youmen. The deep region of the point is close to Youmen.
- K 22 Bùláng 步廊
Bu, step; lang, corridor.
The point is by the side of Zhongting. The channel qi, when arriving here, looks like stepping in the corridor on both sides of the court.

Annex 8

K 23 Shénfēng 神封

Shen, heart; feng, pertaining.

The region where the point is located is the pertaining of the heart.

K 24 Língxū 灵墟

Ling, heart; xu, mound.

The point relates internally to the heart and locates externally on the muscle prominence, which looks like a mound.

K 25 Shéncáng 神藏

Shen, heart; cang, housing.

The point is the place where the mind is housed.

K 26 Yùzhōng 臄中

Yu, luxuriance; zhong, middle.

Yu means luxuriant. The point is at the place where the kidney qi is luxuriant when running in the chest.

K 27 Shǔfǔ 俞府

Shu, infusion; fu, fu organ.

The kidney qi infuses from this point into the the fu organs.

Pericardium Meridian Shǒujuéyīn Xīnbāojīng Xué

手厥阴心包经穴

P 1 Tiānchí 天池

Tian, heaven; chi, pool.

The point is lateral to the nipple and the milk of the nipple flows out as if from the heavenly pool.

P 2 Tiānquán 天泉

Tian, heaven; quan, spring.

The channel qi originated from Tianchi flows downward as the spring water coming down from the heaven.

P 3 Qūzé 曲泽

Qu, crooked; ze, marsh.

The channel qi infuses into the shallow depression of the elbow as the water running into the marsh.

P 4 Ximén 郄门

Xi, hole; men, door.

This is a Xi-Cleft Point of the Pericardium Channel, and is a door of the present channel qi coming in and going out.

P 5 Jiānshǐ 间使

Jian, space; shi, official.

The point pertains to the Pericardium Channel and is between the spaces of the two tendons. Since the pericardium is the officer of the envoys, it is named Jianshi.

P 6 Nèiguān 内关

Nei, the opposite of outer; guan, pass.

The point is in the important place at the medial aspect of the forearm like a pass.

P 7 Dàlíng 大陵

Da, the opposite of small, ling, mound.

The protrusion of the palmar root is high as a big mound and the point is in the depression at the medial aspect of the wrist.

P 8 Láogōng 劳宫

Lao, labour; gong, centre.

The hand is in charge of labour. Lao refers to the hand. The point is in the centre of the palm.

P 9 Zhōngchōng 中冲

Zhong, middle; chong, important place.

The point is in the important place of the middle fingernail.

Triple Energizer Meridian Shǒushàoyáng Sānjiāojīng Xué

手少阳三焦经穴

TE 1 Guānchōng 关冲

Guan, same as bend; chong, important place.

The ring finger can not be stretched alone. Guan refers to the ring finger and the point is in the important place of the ring fingernail.

Annex 8

TE 2 Yèmén 液门

Ye, water; men, door.

This is a Rong-Spring Point of the present channel, pertaining to water, and able to regulate water passages, like a door where the water comes in and goes out.

TE 3 Zhōngzhǔ 中渚

Zhong, middle; du, water margin.

The point is in the middle of the Five-Shu Points and the channel qi runs like water flowing along the water margin.

TE 4 Yángchí 阳池

Yang, the opposite of yin; chí, pool.

The point is in the depression on the back of the wrist and the channel qi runs like water flowing into a pool.

TE 5 Wàiguān 外关

Wai, the opposite of inner; guan, pass.

The point is in the important place on the lateral aspect of the forearm like a pass.

TE 6 Zhīgōu 支沟

Zhi, limbs; gou, ditch.

Zhi refers to the upper limbs. The point is between the radius and ulna on the upper limbs.

TE 7 Huìzōng 会宗

Hui, meeting; zong, gathering.

This is a Xi-Cleft Point of the present channel and is a place where the channel qi is gathered.

TE 8 Sānyángluò 三阳络

Sanyang, three yang channels of Hand; luò, connection.

This point connects the three yang channels.

TE 9 Sídú 四渎

Si, four; du, river.

The Yangze River, the Yellow River, the Huaihe River and the Jishui River are called Sidu in ancient times. The channel qi is able to irrigate more regions when it reaches to this point.

TE 10 Tiānjīng 天井

Tian, heaven; jing, well.

The superior refers to the heaven. The point is in the olecranon of the upper limbs and is depressed as a well.

TE 11 Qīnglěngyuān 清冷渊

Qing, cool; leng, cold; yuan, deep water.

This point is able to reduce the heat from Sanjiao as if the patient entered into a cooling deep water.

TE 12 Xiāoluò 消泺

Xiao, eliminating; luo, soreness, pain and weakness.

This point is good at treating soreness, pain and weakness of the limbs.

TE 13 Nàohuì 膕会

Nao, muscle prominence of the arm; huì, confluence.

The point is at the muscle prominence of the arm and is a confluence of the present channel with Yangwei Channel.

TE 14 Jiǎnlíao 肩髃

Jian, shoulder; liao, seam.

The point is in a seam on the shoulder.

TE 15 Tiānlíao 天髃

Tian, heaven; liao, seam.

The superior refers to the heaven. The point is in a seam above the shoulder blade.

TE 16 Tiānyǒu 天窗

Tian, heaven; you, window.

The superior refers to the heaven. Tianyou means heavenly window. The point is superior to the neck and good at opening the upper aperture, so it is likened to the heavenly window.

TE 17 Yǐfēng 翳风

Yi, shielding; feng, pathogenic wind.

The point is behind the earlobe where is for shielding the pathogenic wind.

Annex 8

TE 18 Chīmài (Qīmài) 瘕脉

Qi, convulsion; mai, collateral.

The point is behind the ear where the collaterals are distributed and is good at treating convulsion.

TE 19 Lúxī 颅息

Lu, skull; xi, relieving the mind.

The point is on the skull and able to relieve the mind.

TE 20 Jiǎosūn 角孙

Jiao, corner; sun, reticular collateral.

The point is in the temple, corresponding to the upper corner above the ear where the reticular channels are distributed.

TE 21 Ěrmén 耳门

Er, ear; men, door.

The point is in the front of ear like a door of the ear.

TE 22 Ěrhéliáo 耳和髎

Er, ear; he, harmony; liao, seam.

The point is in the depression in the front of tragus and able to harmonize the sound.

TE 23 Sīzhúkōng 丝竹空

Sizhu, thready bamboo; kong, space.

The point is at the lateral end of the eyebrow and shaped in a thready bamboo. The local region of the point is in the shallow depression.

Gall Bladder Meridian Zúshàoyáng Dǎnjīng Xué 足少阳胆经穴

G 1 Tóngziliáo 瞳子髎

Tongzi, pupil; liao, seam.

The point is in a seam on the outer canthus of the eye and horizontal to the pupil.

G 2 Tīnghuì 听会

Ting, hearing; hui, gathering.

The point is in front of the ear and is in charge of hearing, and is a place where the channel qi at the ear is gathered.

G 3 Shàngguān 上关

Shang, upper; guan, border.

Guan refers to the zygomatic arch. The point is at the upper margin of the zygomatic arch.

G 4 Hànyàn 颌厌

Han, mandible; yan, obedience.

The point is at the temple and obeys the mandible during chewing.

G 5 Xuánlú 悬颅

Xuan, suspended; lu, skull.

The point is at the temple as if suspended on both sides of the skull.

G 6 Xuánlí 悬厘

Xuan, suspended; lí, long hair.

The point is at the temple among the suspended long hair.

G 7 Qūbìn 曲鬓

Qu, crooked; bin, hair at the temple.

The point is at the crooked hairline at the temple above the ear.

G 8 Shuàigǔ 率谷

Shuai, command; gu, valley.

The point is above the ear and is the chief commander of all the points with the name of gu (valley).

G 9 Tiānchōng 天冲

Tian, heaven; chong, important place.

Tian refers to the head. The point is on the both sides of the head and is an important place where the present channel runs.

G 10 Fúbái 浮白

Fu, superficial; bai, white.

The point is on the superficial portion of the body and functions in clearing the mind and brightening the eyes.

Annex 8

G 11 Tóuqiàoyīn 头窍阴

Tou, head; qiao, opening; yin, the opposite of yang.

The kidney and the liver pertain to yin and open into the ear and eye. The point is at the head and able to treat ear and eye diseases.

G 12 Wángǔ 完骨

Wangu, mastoid process of the temporal bone.

The point is at the lower margin of the mastoid process of the temporal bone behind the ear.

G 13 Běnnshén 本神

Ben, essential; shen, mind.

The point is lateral to Shenting by the side of the anterior hairline. The interior is the region where the brain is located and is considered as the residence of the mind. The brain dominates the mind and is the essential of the human body.

G 14 Yángbái 阳白

Yang, the opposite of yin; bai, brightness.

The head is yang. The point is at the head and able to brighten the eye.

G 15 Tóulínqì 头临泣

Tou, head; lin, regulation; qi, tears.

The point is at the head and able to treat lacrimation.

G 16 Mùchuāng 目窗

Mu, eye; chuang, window.

The point is above the eye at the head and good at treating eye disorders, like a window of the eye.

G 17 Zhèngyíng 正营

Zhengying, fright and fear.

This point is good at treating mental disorders such as fright and fear.

Annex 8

G 18 Chénglíng 承灵

Cheng, support; ling, mind.

The brain dominates the mind, so the parietal bone is also called crown bone and the point is just lateral and inferior to it.

G 19 Nǎokōng 脑空

Nao, brain; kong, cavity.

The point is lateral to the occipital bone and internally relates to the brain and is good at treating cerebropathy.

G 20 Fēngchí 风池

Feng, pathogenic wind; chí, pool.

The point is below the occipital bone and the local depression is deep as a pool, and is an important point to eliminate the pathogenic wind.

G 21 Jiǎnjǐng 肩井

Jian, shoulder; jing, well.

The point is on the shoulder and the local depression is deep as a well.

G 22 Yuǎnyè 渊腋

Yuan, gulf; ye, armpit.

The armpit is deep as gulf. The point is below the axilla.

G 23 Zhéjīn 辄筋

Zhe, ear of cart; jin, muscle.

The ear of the cart is the wheel protection plate of the cart. The muscles on both sides of the flanks are prominent as the cart ear, where the point is located.

G 24 Rìyuè 日月

Ri, sun; yue, moon.

Ri is yang, indicating the gall bladder, while yue is yin, indicating the liver. This is an important point to treat liver and gall bladder diseases.

Annex 8

G 25 Jīngmén 京门

Jing, same as "yuan"; men, door.

This is a Mu-Front Point of the Kidney Channel, which dominates the primary qi of the general body. The point is located at the door where the kidney qi comes in and goes out.

G 26 Dàimài 带脉

Dai, waist belt; mai, channel.

The point pertains to the Gall Bladder Channel and meets at the Dai Channel.

G 27 Wǔshū 五枢

Wu, five; shu, pivot.

The numeral 5 is a middle number and shaoyang governs the pivot. The point is in the important place at the middle part of the body.

G 28 Wéidào 维道

Wei, maintain; dao, passage.

This point is the meeting point of the Gall Bladder Channel and the Dai Channel, which maintains all the channels.

G 29 Jūliáo 居髎

Ju, reside; liao, hipbone.

The point is in the depression above the hipbone.

G 30 Huántiào 环跳

Huan, circumflexus; tiao, leap.

The point is in the upper part of the buttock, which is the leaping pivot of the circumflexus.

G 31 Fēngshì 风市

Feng, pathogenic wind; shi, market.

Market means gathering and dispersing. This is an important point to remove the pathogenic wind.

G 32 Zhōngdú 中渎

Zhong, middle; du, small ditch.

The point is in between the tendons at the lateral aspect of the thigh, as if in a ditch.

Annex 8

G 33 Xiyángguān 膝阳关

Xi, knee; yang, the opposite of yin; guan, joint.

The point is at the lateral aspect of the knee joint.

G 34 Yánglíngquán 阳陵泉

Yang, the opposite of yin; ling, mound; quan, spring.

The exterior is yang. The head of the fibula at the lateral aspect of the knee is prominent as a mound, below where in the depression the point is located, like a spring.

G 35 Yángjiāo 阳交

Yang, the opposite of yin; jiao, crossing.

The exterior is yang. The point is at the lateral aspect of the leg, where crosses with the Urinary Bladder Channel.

G 36 Wàiqiū 外丘

Wai, the opposite of inner; qiu, mound.

The point is above the the lateral malleolus and the local muscle is prominent as a mound.

G 37 Guāngmíng 光明

Guangming, brightness.

This is a Luo-Connecting Point of the Gall Bladder Channel and is good at treating eye disease to see the brightness.

G 38 Yángfǔ 阳辅

Yang, the opposite of yin; fu, auxilliary.

The exterior is yang and fu refers to the fibula. The point is at the lateral aspect of the leg at the anterior margin of the fibula.

G 39 Xuánzhōng 悬钟

Xuan, hanging; zhong, bell.

The point is above the lateral malleolus, where the children in ancient times used to hand a bell.

G 40 Qiūxū 丘墟

Qiu, mound; xu, big mound.

The point is between the lateral malleolus and the calcis bone.

Annex 8

G 41 Zúlínqì 足临泣

Zu, foot; lin, regulation; qi, tears.

The point is at the foot and is able to treat lacrimation.

G 42 Dìwǔhuì 地五会

Di, ground; wu, five; hui, confluence.

The ground is inferior, indicating the foot. There are five points of the Gall Bladder Channel on the foot. This point is among them and is a confluence of the channel qi in the upper and in the lower.

G 43 Xiáxī 侠溪

Xia, same as "jia"; xi, ditch.

The point is in the space between the 4th and the 5th toes.

The local region is like a ditch.

G 44 Zúqiǎoyīn 足窍阴

Zu, foot; qiao, opening; yin, the opposite of yang.

The kidney and the liver pertain to yin and open into the ear and the eye. The point is on the foot and able to treat ear and eye disorders.

Liver Meridian Zújuéyīn Gānjīng Xué 足厥阴肝经穴

Liv 1 Dàdūn 大敦

Da, the opposite of small; dun, thickness.

Da refers to the big toe. The point is at the medial aspect of the big toe and the muscle is thick.

Liv 2 Xíngjiān 行间

Xing, walking; jian, middle.

The point is in the web between the 1st and the 2nd metatarsophalangeal joints. The channel qi runs between them.

Liv 3 Tài chōng 太冲

Tai, same as "da"; chong, important place.

The point is on the foot. The channel qi is abundant and this is an important place of the present channel.

Annex 8

Liv 4 Zhōngfēng 中封

Zhong, middle; feng, earth gathered into a mound.

The point is between the two malleolus as if in the mound.

Liv 5 Lígōu 蠡沟

Li, shell; gou, ditch.

The external shape of the gastrocnemius muscle looks like a shell and the point is in the ditch at the anterior aspect of it.

Liv 6 Zhōngdū 中都

Zhong, middle; du, confluence.

The point is in the middle on the medial aspect of the leg and is a confluence of the Liver Channel qi.

Liv 7 Xīgūān 膝关

Xi, knee; guan, joint.

The point is in vicinity of the knee joint.

Liv 8 Qūquán 曲泉

Qu, crooked; quan, spring.

The point is at the medial end of the transverse crease of the popliteal fossa. With the knee flexed, the local depression is like a spring.

Liv 9 Yīnbāo 阴包

Yin, the opposite of yang; bao, same as "bao".

The interior is yin. Bao refers to the uterus. The point is at the medial aspect of the thigh and indicates the uterus disease.

Liv 10 Zúwǔlǐ 足五里

Zu, lower limbs; wu, numeral; li, used as cun in ancient times.

The point is in the lower limbs, 5 cun above Qimen.

Liv 11 Yīnlián 阴廉

Yin, the opposite of yang; lian, edge.

The interior is yin. The point is at the edge of the genitalia on the medial aspect of the thigh.

Annex 8

Liv 12 Jímài 急脉

Ji, urgent; mai, artery.

The point is at the medial aspect of the thigh. The local artery respond to the hand.

Liv 13 Zhāngmén 章门

Zhang, screen; men, door.

The point is below the hypochondrium, like a door screening the internal organs.

Liv 14 Qimén 期门

Qi, period; men, door.

The flanks on both sides are like the open door. The point is in the intercostal space. When the channel qi reaches here, it is considered as one period. Therefore, the point is named Qimen.

Governor Vessel Meridian Dūmài Xué 督脉穴

GV 1 Chángqiáng 长强

Chang, the opposite of short; qiang, the opposite of weakness.

The spinal column is long and strong. The point is at the lower end of the spinal column.

GV 2 Yāoshū 腰俞

Yao, low back; shu, infusion.

The point is in the low back, where the channel qi is infused.

GV 3 Yāoyángguān 腰阳关

Yao, low back; yang, the opposite of yin; guan, joint.

The Du Channel is yang. The point pertains to the Du Channel and locates at the turning region of the low back, like the lumbar joint.

GV 4 Mìngmén 命门

Ming, life; men, door.

The kidney is the source of the life. The point is in between Shenshu, corresponding to the door of the kidney qi.

Annex 8

GV 5 Xuánshū 悬枢

Xuan, suspended; shu, pivot.

The point is in the low back. When lying supine, the local region is suspended as a pivot for lumbar movement.

GV 6 Jìzhōng 脊中

Ji, spine; zhong, middle.

The spine consists of 21 vertebrae. The point is below the 11th vertebra and just in the middle.

GV 7 Zhōngshū 中枢

Zhong, middle; shu, pivot.

The point is below the 10th vertebra, corresponding to the pivot in the middle part of the spine.

GV 8 Jīnsuō 筋缩

Jin, muscle; suo, spasm.

This point is able to treat all kinds of muscle spasms.

GV 9 Zhīyáng 至阳

Zhi, reaching; yang, the opposite of yin.

The point is level with the diaphragm, when the channel qi arrives, "yin within yang" below the diaphragm reaches to "yang within yang" above the diaphragm.

GV 10 Língtái 灵台

Ling, spirit; tai, platform.

The point is below Shendao and Xinshu, that's why this point is likened to the spirit's platform of the heart.

GV 11 Shéndào 神道

Shen, mind; dao, pathway.

The heart houses the mind and the point is lateral to Xinshu, like a pathway of the mind.

GV 12 Shēnzhù 身柱

Shen, body; zhu, pillar.

The point is below the 3rd thoracic vertebra and connects upward with the head and the neck and downward with the back and the lumbus, like a pillar of the general body.

Annex 8

GV 13 Táodào 陶道

Tao, moulding; dao, way.

Qi of zang-fu organs is gathered at the Du Channel and goes upward from this way.

GV 14 Dàzhū 大椎

Da, big; zhui, vertebra.

The prominence of the 7th cervical vertebra is clear and the point is below it.

GV 15 Yǎmén 哑门

Ya, muteness; men, door.

This point may either cause or treat muteness, and so is likened to a door of muteness.

GV 16 Fēngfǔ 风府

Feng, pathogenic wind; fu, place.

This point is able to eliminate the pathogenic wind.

GV 17 Nǎohù 脑户

Nao, brain; hu, door.

The Du Channel runs upward along the spine and enters into the brain. The point is below the occipital protuberance, corresponding to a door where the channel qi enters the brain.

GV 18 Qiángjiān 强间

Qiang, stiffness; jian, middle.

The point is between the parietal bone and the occipital bone and able to treat stiff neck and headache.

GV 19 Hòudǐng 后顶

Hou, back; ding, vertex.

The point is at the back of the vertex.

GV 20 Bǎihuì 百会

Bai, numeral; hui, meeting.

The point is at the vertex and is a meeting place of the three Foot-Yang Channels, the liver Channel and the Du Channel.

Annex 8

- GV 21 Qiánding 前顶
Qian, front; ding, vertex.
The point is in front of the vertex.
- GV 22 Xínhuì 囟会
Xin, fontanel; hui, closing.
The point is in the closing place of the major fontanel.
- GV 23 Shàngxīng 上星
Shang, upper; xin, star.
The head is like the heaven. The point is at the head like a star in the sky.
- GV 24 Shéntíng 神庭
Shen, mind; ting, vestibule.
"The brain is the house of the mind", which refers to the brain. The point is on the forehead like the ventricular vestibule.
- GV 25 Sùliáo 素髎
Su, nasal cartilage; liao, seam.
The point is in a seam at the lower end of the nasal cartilage.
- GV 26 Shuǐgōu 水沟
Shui, water; gou, groove.
The point is in the philtrum, which looks like a water groove.
- GV 27 Duìduǎn 兑端
Dui, mouth; duan, tip.
The point is at the tip of the upper lip.
- GV 28 Yínjiāo 龈交
Yin, gum; jiao, junction.
The point is above the incisive suture of the upper gum and is a junction between the Du Channel and the Ren Channel.

Annex 8

CV 1 Huiyīn 会阴

Hui, crossing; yin, genital orifice.

The space between the orifice of genitalia and the orifice of the anus is called Huiyin, in where the point is located.

CV 2 Qūgǔ 曲骨

Qu, crooked; gu, bone.

Qugu refers to the pubic bone, and the point is at the superior margin of the pubic symphysis.

CV 3 Zhōngjí 中极

Zhong, middle; ji, just right.

The point is just in the middle of the general body.

CV 4 Guānyuán 关元

Guan, storage; yuan, primary qi.

The point is 3 cun directly below the navel and is a region where the primary qi of the body is stored.

CV 5 Shímén 石门

Shi, stone; men, door.

Shi means solid. The point is able to treat the stone disease in the lower abdomen.

CV 6 Qihǎi 气海

Qi, primary qi; hai, sea.

The point is below the navel and is the sea of the primary qi in the general body.

CV 7 Yīnjiāo 阴交

Yin, the opposite of yang; jiao, crossing.

The point is 1 cun below the navel and is the crossing place of the Ren Channel, the Chong Channel and the Kidney Channel.

CV 8 Shénquè 神阙

Shen, spirit; que, palace door.

The point is in the middle of the navel, which is an important way for circulating qi and blood of the fetus, like a palace door of the spirit.

Annex 8

CV 9 Shuifēn 水分

Shui, water-grain; fen, separation.

The point is 1 cun above the navel and related internally to the small intestine, at where the water-grain is separated into turbidity and clarity.

CV 10 Xiàwǎn 下脘

Xia, inferior; wan, stomach.

The point is at the inferior aspect of the stomach.

CV 11 Jiànli 建里

Jian, establishing; li, the opposite of exterior.

The point is in the epigastric region and helpful to establish the interior qi of the middle jiao.

CV 12 Zhōngwǎn 中脘

Zhong, middle; wan, stomach.

The point is in the middle of the stomach.

CV 13 Shàngwǎn 上脘

Shang, superior; wan, stomach.

The point is at the superior aspect of the stomach.

CV 14 Jùquè 巨阙

Ju, great; que, palace door.

This is a Mu-Front Point of the Heart Channel, like a palace door of the heart qi.

CV 15 Jiūwěi 鸠尾

Jiu, wild pigeon; wei, tail.

The xiphoid process of the sternum looks like a wild pigeon's tail, and the point is below it.

CV 16 Zhōngtíng 中庭

Zhong, middle; ting, court.

The point is below the heart, as if in the court in front of the palace.

Annex 8

CV 17 Tānzhōng 腹中

Tan, exposure; zhong, middle.

The exposed middle part of the chest is called Tanzhong in ancient times. The point is located there.

CV 18 Yùtáng 玉堂

Yu, jade; tang, palace.

Yu means expensive. The location of the point corresponds to the place of the heart. Since it is important, it is likened to Yutang.

CV 19 Zīgōng 紫宮

Zi, purple; gong, palace.

Zigong is the name of a star and refers to the emperor's residence. The point corresponds to the heart, which is the officer of monarch, so it is called Zigong.

CV 20 Huágài 华盖

Hua, magnificent; gai, umbrella.

Huagai refers to the emperor's umbrella. The location of the point corresponds to the place of the lung, which is above the heart, like an umbrella of the heart.

CV 21 Xuánjī 璇玑

Xuan, rotation; ji, axis.

Xuanji is the name of the 1st to the 4th stars of the Big Dipper, opposite to Zigong.

CV 22 Tiāntū 天突

Tian, heaven; tu, chimney.

The location of the point corresponds to the upper end of the trachea, like the chimney toward the heaven.

CV 23 Liánquán 廉泉

Lian, clear; quan, water spring.

The two channels below the tongue are called Lianquan in ancient times. The point is at the superior margin of the pharyngeal prominence, close to Lianquan channel.

Annex 8

CV 24 Chéngjiāng 承漿

Cheng, receiving; jiang, water fluid.

The point is in the depression at the middle of the sulcus mentolabialis and is a place to receive the outflowing water fluid from the mouth.