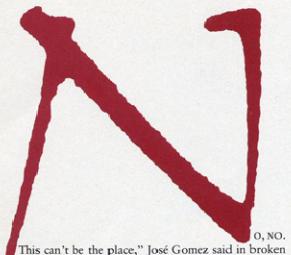
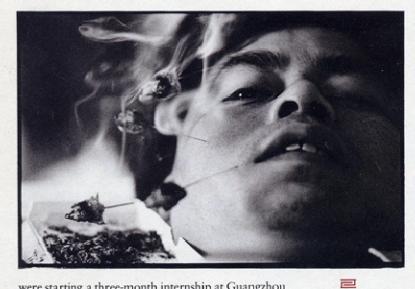
At acupuncture's ancient source, four Americans complete an exotic internship.



This can't be the place," José Gomez said in broken Chinese to the driver who had brought him and Ray Muller from the Guangzhou, China, train station. "We want the Guangzhou Municipal Hospital. The hospital." But the driver, pointing, nodding, and repeating the name, insisted that the dilapidated concrete and tin building was indeed their destination. "The place looked like a war zone," says Muller.

Along with Irit Weir and Ron Bieler, Muller and Gomez were students at the American College of Traditional Chinese Medicine in San Francisco. They



were starting a three-month internship at Guangzhou Municipal Hospital of Chinese Medicine to perfect their skills in acupuncture and herbal medicine. It was the end of 36 months of training, the last requirement for a master's degree in Chinese medicine.

The four Americans soon discovered that the broken-down building belied the skills of its inhabitants. "It wasn't modern, but there was a wonderful level of health care," says Gomez. They struggled to absorb in weeks some of what their Chinese teachers had learned over decades. It took 18-hour days, sixday weeks, filled with demanding senior doctors, endless patients, intense lectures, impenetrable texts.

In fact, it was not unlike the internship of a western medical student. And the similarity is deliberate: Acupuncture has been westernized. The students' pil-

"It had all the right smells, none of the right visuals," José Gomez says of the hospital, right. Left to right: Ray Muller, Gomez, Irit Weir, Lianyi Dai, Ron Bieler. Above: The burning mugwort herb heats needles, stimulating facial nerves.







## JOURNEY TO GUANGZHOU

PHOTOGRAPHS BY KEVIN T. GILBERT

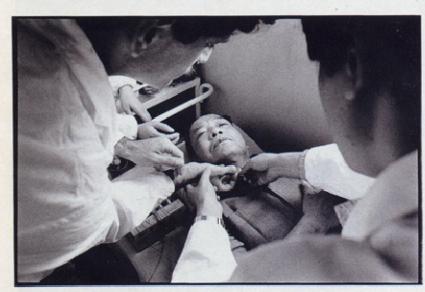


Carrying a recipe for herbs, a patient passes a nurses' station, right.

"The wind blew through and the only heat was a bowl of water over coals," Muller says. "But the doctors were great. I got so much experience."

Each morning, the students diagnosed 20 to 30 patients under the experienced eyes of their supervising doctors, who are also trained in western medicine.

Left, Muller perfects his technique on "stomach meridian 36," a frequently used point on the leg associated with digestive problems.



grimage to Guangzhou is the product of the ancient art's journey into mainstream American medicine.

ACUPUNCTURE entered the American consciousness ingloriously: When New York Times reporter James Reston was in China with President Nixon in 1972, he had to have an emergency appendectomy, and developed a common complication—severe gas pains. "The doctor inserted an acupuncture needle, Reston passed gas, and history was made," says physician George Ulett, president of the American Society of Acupuncture. "The Bamboo Curtain went up." As relations warmed, American doctors brought back miraculous

Above, he treats laryngitis by moving a needle back and forth under the skin of a patient's throat.

Right, a selection of Chinese needles, which are thicker than the hairlike ones used in the United States.





reports—tales of open heart surgery on patients anesthetized only by a few well-placed needles.

Captured by acupuncture's apparent power, doctors and laypeople alike learned its tenets: Pain and ill health are caused by imbalances in the body's life energy. This energy flows through 14 channels called meridians and can become blocked at some 400 points along the way. Inserting and twirling long, slender needles in appropriate points corrects the balance and restores health. Illness is described in such enchanting terms as Insufficient Fire of the Kidneys.

Soon, however, such poetry accelerated acupuncture's fall from grace. American doctors couldn't rec-

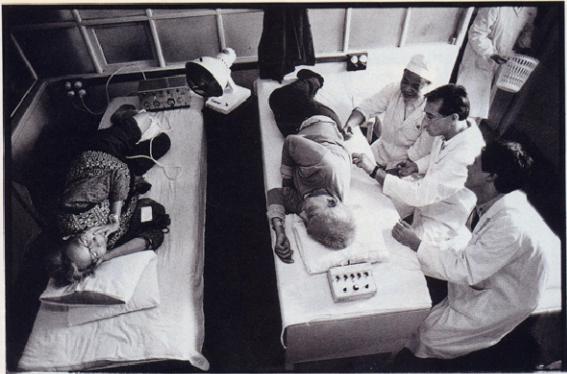




oncile philosophy with physiology. Nor could they duplicate the startling results achieved by the Chinese. Calling it an elaborate placebo, doctors abandoned the practice to alternative healers—almost. There were a few serious practitioners—medical and nonmedical—who quietly decided to help acupuncture assimilate.

In 1982, for example, medical and nonmedical acupuncturists created a commission to accredit acupuncture schools. The process takes five years and requires that the school be a residential college, not a correspondence school, and that its program be at least three years long. Three schools have earned accreditation and seven are in the midst of the process. Roughly 20 states now license acupuncturists; in 14, applicants must take the exam of the National Commission for the Certification of Acupuncturists, which includes a test on needle sterilization. About half the 5,000 nonmedical practitioners in the United States have been certified by the commission. Many insurance companies now cover treatments. Respected journals publish research reports on acupuncture.

And research, after all, is a true mark of acupuncture's westernization. After evaluating scores of studies, British scientists Charles A. Vincent and Phillip H. Richardson have concluded that acupuncture is not just a placebo. Their review shows that 50 to 80



percent of patients with chronic or acute pain-such as back pain and dental pain-are helped at least temporarily. (Placebos work on about 35 percent of people; morphine helps about 70 percent.) Acute asthma, high blood pressure, and smoking withdrawal also yield to the needles, but not obesity or deafness.

Acupuncture works, apparently, by stimulating the release of neurochemicals. Physiologist Bruce Pomeranz of the University of Toronto has shown that when needles are inserted at the site of pain they cause the spinal cord to produce substances that block pain locally. Needles placed at points far away from the pain-at the joint of the thumb to relieve a headache, for example-stimulate chemicals in the brain that block the perception of pain. Similarly, acupuncture prompts the production of cortisone, which reduces inflammation and may ease arthritis. And needling a point in the earlobe stimulates the vagus nerve, which releases substances that affect the autonomic nervous system, slowing heart rate and lowering blood pressure. "We know less about how many drugs work than we do about acupuncture," says Pomeranz. "It's a victory for acupuncture if it only measures up to drugs. If it's as effective as drugs and safer than drugs, then it should be the treatment of choice."

Such findings have turned some doctors into pragmatic acupuncturists. About 1,000 U.S. doctors are well-trained in acupuncture; another 1,000 have taken a course in the technique. George Ulett calls acupuncture's philosophical origins "5,000-year-old mumbo jumbo," but teaches needling at St. Louis University School of Medicine as an efficient, direct means of switching on the body's anti-pain mechanism. Ulett uses only "motor points"-where a nerve enters a muscle; there is about a 70 percent overlap between such points and traditional acupuncture points. A wide gulf still lies between doctors such as Ulett

and acupuncturists such as the students in Guangzhou. Doctors say only medical training can keep someone from puncturing a vital organ or overlooking the symptoms of cancer. Acupuncturists say the standards of education and licensing prevent such tragedies. And, say the four Americans, doctors would do well to learn the most valuable lesson of Guangzhou: Neither western medicine nor Chinese



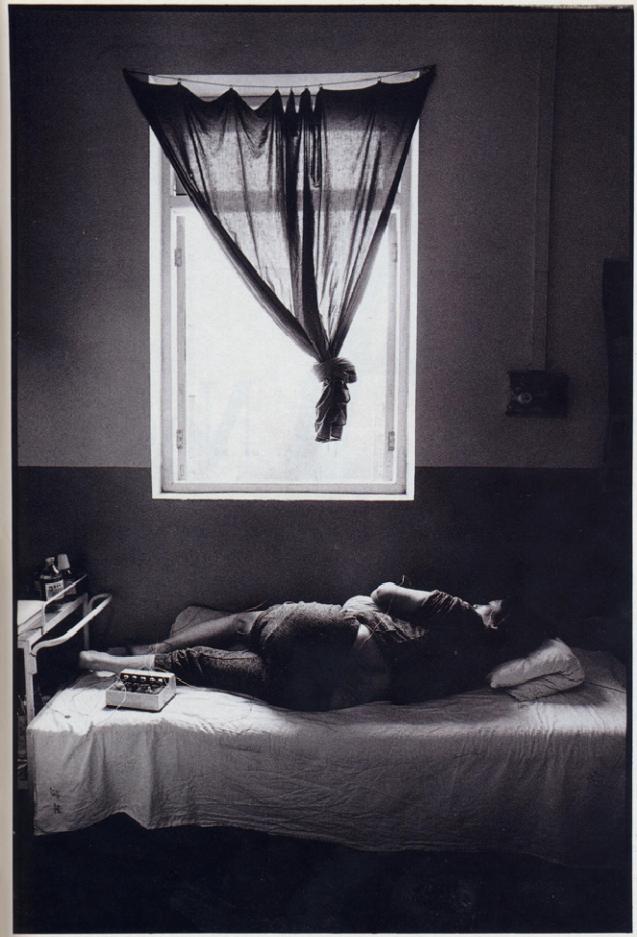
medicine can stand alone. -Susan West

"In China, acupuncture is an everyday thing, very social," says Irit Weir. "They come in for their daily twenty minutes [right] and gossip with each other or read." At left, Gomez, center, treats back pain. Instead of twirling needles to stimulate nerves, now acupuncturists send a weak current through the needles. The small box near each patient adjusts the current.

The students say they don't treat certain conditions-heart attacks, acute infections. "People should see Chinese medicine for what it is, and not put it on a pedestal. Of course, that's true for western medicine too," says Weir, pictured at left with Muller and Gomez. "We got to work in an environment of both western and Chinese medicine—it was very holistic."

As Muller says, "It felt like world medicine."





Kevin Gilbert, who is based in Washington, D.C., took these pictures during a three-week trip to China. He used Nikon cameras and lenses, with Kodak Tri-X film shot at 400 ASA. His last assignment for HIPPOCRATES was "An Ordinary Miracle" in the July/August 1988 issue.

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