

We also decided not to intervene directly to treat the bowel movement problem because we considered it to be a consequence of the qi deficiency as well as a weakness of the Lung and defensive qi (*wei qi* 卫气). Our premise was that once the middle *jiao* was capable of transforming food qi (*gu qi* 谷气), then the infant's true qi (*zhen qi* 真气) would be sufficient to perform the various functions of digestion, growth and defense against external pathogens.

Case 5 Qi loses its way

Fulvio was ten months old and suffered from gastro-esophageal reflux with major vomiting after ingestion of even small amounts of milk or any kind of mushy food. He had been treated with an antacid for the last three months.

His mother, a fellow doctor, came to the Xiaoxiao clinic because she knew about Chinese medicine and our work.

Background information

Fulvio was born by pre-planned Cesarean section in the 37th week.

The baby had always been breast-fed and in the first few months was around the 90th percentile, but in the fifth and sixth months he dropped to the 10th percentile, probably as a result of a shortage of breast milk.

Fulvio tended to hyperextend his neck and to suffer from nocturnal rumination (partial regurgitation of food at night), to dribble excessively and to protrude his tongue slightly. He also had enlarged pupils with impaired reactivity to light, slight dilatation of the aortic arch, and Cooley's anemia.

In the first few months, sleep had been very disturbed, but was now good.

Bowel function had always been regular.

Fulvio was very susceptible to infections of the respiratory tract. He caught his first cold when he was only a few days old and subsequently experienced numerous episodes of the common cold, catarrh, otitis, fever, and cough with bronchospasm. Several times treatment had to be given with antibiotics and cortisone preparations.

During bouts of fever, his lateral cervical lymph nodes were firm and enlarged.

His tongue was slightly pale; the initial segment of his venule was visible, but it did not reach the wind gate (*feng guan*).

In the clinic, Fulvio seemed extremely quiet.

Pattern identification

Deficiency of Earlier Heaven and Later Heaven qi with ascending counterflow (*ni*) of Stomach qi.

Conditions such as hyperextension of the neck, nocturnal rumination, dribbling with protrusion of the tongue, the mild abnormality of the pupils, and the slight dilatation of the aortic arch suggested a shortage of Earlier Heaven qi.

Later Heaven also suffered as a result of this, with impairment of the functions of transforming Spleen qi and producing food qi (*gu qi*), leading to symptoms of problems in the digestive system and delayed growth.

Qi had “lost its way,” with Stomach and Lung qi moving upward, causing gastro-esophageal reflux, vomiting and cough.

The general weakness of qi also interfered with the production of defensive qi (*wei qi*) and the Lung’s function of diffusing qi, resulting in recurrent respiratory infections, catarrh and asthma.⁸

Treatment principle

Nourish Kidney-*jing*, supplement the middle *jiao*, regulate Stomach qi and guide it downward, supplement Lung qi and transform phlegm.

Treatment

Tuina

- *Pijing* (Spleen), *Roufu* (Knead the Abdomen), *Jizhu* (Spinal Column), *Zusanli* (ST-36), *Pishu* (BL-20), all stimulated at length:
To fortify the Spleen and Stomach.
- *Banmen* (Thick Gate), *Shouyinyang* (Hand Yin Yang), *Tianzhu* (Celestial Pillar Bone) – from the third session:
To regulate Stomach qi and guide it downward.
- *Shenjing* (Kidney), *Erma* (Two Men Mounting Horses), *Yongquan* (KI-1), together with *Shenshu* (BL-23) rapidly rubbing (*ca*) the lumbar area:
To supplement the Kidney and *jing*.
- *Bagua* (Eight Trigrams), *Xielei* (Rib Side), *Danzhong* (CV-17), *Jianjiagu* (Scapula), *Feishu* (BL-13):
To supplement Lung qi and transform phlegm.
- *Xinmen* (Heart Gate):
To transform phlegm clouding the *shen* and obstructing the clear orifices.

Other methods

Moxibustion at CV-12 Zhongwan, BL-20 Pishu and BL-23 Shenshu (from the third session).

Instructions for treatment at home

Repeat the tuina sequence performed in the clinic.

Perform moxibustion at CV-12 Zhongwan, BL-20 Pishu and BL-23 Shenshu (from the third session onward).

Instruction was also given in the sequences to use when the child fell ill or had a fever (including *guasba*).

⁸ For a comparison, see also case 2 “Bottleneck stops the food going down”, case 4 “A baby who doesn’t eat and doesn’t grow” and case 10 “An engine always running”.

Progress

In the days following the first session, an improvement occurred in the productive cough, which meant that Fulvio no longer had to take antibiotics. At lunch, he ate a bit more, but he had trouble at supper and fits of coughing frequently caused vomiting.

By the time of the fourth session one month later, Fulvio had suffered from an episode of conjunctivitis, which had been treated with local antibiotics. He was eating more and vomiting less often. The antacid had been withdrawn and, in terms of weight, he had moved up to the 75th percentile.

Two months later at the seventh session, hyperextension of the neck, dribbling and nocturnal rumination seemed to have considerably diminished and he no longer had catarrh in the ears, eyes or nose. He was still very slow in feeding, but no longer vomited except “when he decides he doesn’t want to eat any more.”

Treatment at home was always carried out regularly.

Follow-up

By the time of the eighth session two months later, Fulvio no longer had the habit of hyperextending the cervical portion of the spine and it was extremely rare that his tongue protruded, but he still ruminated when asleep. Recent tests indicated an improvement in gastro-esophageal reflux. Fulvio had been administered a cortisone spray for a short period in view of the connection between coughing and reflux.

After three years, his mother wrote to us: “Fulvio improved when he was given tuina, but it is a pity that we didn’t have the perseverance to continue. Now and then we treat KI-1, but I think that the pace of life in Milan and a mother who works full-time are factors that should be taken into consideration, in your study as well.”

Discussion

In this case, it was essential to fortify, supplement and support the Spleen, Kidney and Lung, but it was also important to avoid wasting qi unnecessarily. What was required therefore was to clear away obstruction from the pathways of qi by transforming food accumulation and phlegm, to guide qi so that it moved in the correct direction by bearing Stomach and Lung qi downward, and to eliminate external pathogens whenever they attacked, which required consolidation of *wei qi*.⁹

Zusanli (ST-36) is not only effective for supplementing, but also for regulating the movement of Stomach qi.

⁹ The role of the Kidney and *jing* is mentioned in various passages in the *Nei Jing*: “The Kidney receives the *jing* of the five *zang* and six *fu* organs and stores it” (*Su Wen*, chapter 1); “*Jing* is the root of life” (*Su Wen*, chapter 4); and “At the beginning of human life, the *jing* is formed first and once the *jing* is formed, the brain and marrow are produced” (*Ling Shu*, chapter 10). However, the *Nei Jing* also points out the importance of qi flowing and not becoming blocked: “Fright, fear, anger, fatigue, activity, and rest can all result in changes. In a robust person, the qi will flow and one will not fall ill; in a weak person, the qi stagnates and illness results” (*Su Wen*, chapter 21).

Banmen (Thick Gate) and *Shouyinyang* (Hand Yin Yang) are generally used to free food accumulation in excess (*shi*) patterns, but they also have the function of “opening up the passageway” in cases of weakness of Stomach qi.

Rapidly rubbing (*ca*) the lumbar area warms and supplements the Kidney.

Moxibustion has a major role in supplementing Earlier and Later Heaven.

It is also important that parents learn the sequences to apply when external pathogens (*xie qi* 邪气) attack so that they can be prevented from penetrating further into the body and subsequently damaging right qi (*zheng qi* 正气). This will also reduce the need for antibiotic or corticosteroid therapy.

Case 6 Too much heat to find repose

Tania, who was almost two years old, had her sleep disturbed by constant awakenings.

After she was born, she used to go to sleep by herself in her own cot/crib and only woke up for normal feeding. However, at the age of six or seven months, which was the time weaning started, she began to demand a lot of attention before she would go to sleep. “Then she sleeps a few hours” according to her mother “and after that, when things are going well, she wakes up two or three times, but when things are going badly, it is every hour. Sometimes a caress or a little milk is enough to send her back to sleep, but at other times she cries bitterly and has to be hugged. No matter what, she wakes up for good in the morning between 6 and 7.” Later in the morning she would have a couple of 30-minute naps and after lunch she would sleep for two hours.¹⁰

Tania’s parents described her as “active but not restless”, but they also said that she had “a difficult character” and was a “child who is not easy to guide.”

Her parents found out about “Project Calm” when searching for information on the Internet.

Background information

Tania was born by Cesarean section (because of head dystocia – difficult labor due to the position of the baby’s head).

Since mother’s milk was in short supply, feeding in the first two months was mixed and then integrated.

Weaning did not present any particular problems. Tania had always had a good appetite and even now was happy to eat everything.

¹⁰ “Evaluation of sleep by parents” is one of the items on the standard patient file designed for “Project Calm” and is included within the description of this case. Parents are asked for information on the following:

- Has difficulty in falling asleep (specify manner and times).
- Wakes up during the night (specify frequency).
- Wakes up (specify if crying with pain, screaming with fright, needs cuddling, wants to play).
- Has difficulty in sleeping during the day (specify).
- Sleeps in the parents’ bed or moves there during the night.