

# EPISTEMOLOGICAL EVALUATION OF CHINESE MEDICINE AND ACUPUNCTURE - PART II

Claus C. Schnorrenberger<sup>1,2</sup>

<sup>1</sup>*Honorary Professor of the China Medical University, Taichung, Taiwan*

<sup>2</sup>*Chairman of the Board of Directors, Lifu International College of Chinese Medicine (LICCM), Switzerland*

(Received 17<sup>th</sup> May 2011, accepted 13<sup>th</sup> June 2011)

The article gives an explanation of the paradoxical circumstances connected with the German GERAC study (they are similar in other Western countries) in order to halt further misconception and careless spending. For almost six decades the European acupuncture scene has been dominated by Souliè de Morant's energy and meridian humbug, something that was even praised by such an eminent scholar as Joseph Needham. It is still reflected in conservative academic publications and in teaching seminars world-wide.

Chinese medicine, when it is correctly applied and properly understood, starts from a paradigm different from that used by orthodox Western medicine, whereas orthodox medical researchers and politicians try to force Chinese medicine into a straight-jacket which involves the concept of double-blind studies, average values, mathematical estimates and statistics as employed by Evidence Based Medicine (EBM). Diagnosis and therapy in Chinese medicine commence from the horizon of *Shen* 神 and *Yin-Yang* 陰陽 (Gr. ἡ ἀρχή), they involve the concept of the Whole of the Universe (Gr. τὸ ὅλον) as well as the flow of time, something which allows the induction (Gr. ἐπαγωγή) of further data, diagrams, diagnostics, techniques and therapies. In the classical textbook *Huangdi Neijing Lingshu* the imperial physician Qi Bo explains that *Shen* 神 is the substantial phenomenon to be understood by acupuncture doctors, and from where all further phenomena of Chinese medicine are deduced. This is what makes deductive Chinese medicine, in association with clinical induction, so effective and safe and reduces risks and side-effects to a minimum

Deduction is not only an important procedure in Chinese tradition, but also a keystone of Occidental logic. In his *Lecture on Nature* (ΦΥΣΙΚΗΣ ΑΚΡΟΑΣΕΩΣ) Aristotle maintains that reliable proof can only be attained by deducing this from what he calls 'substance' (ὁποκείμενον). He labels the aspects that are attributed to the substance as 'accident' (συμβεβηκός), and he declares that an accidental attribute has no being at all. In his *Metaphysics* he states that by induction using accident, no valid scientific proof can be attained at all. Orthodox Western medicine and, above all, Evidence Based Medicine (EBM) deal for the most part with accident.

The solution to this apparent dilemma is: Deduction and induction should be applied in combination. This has been carried out in China since ancient times by anatomical studies, by testing the effects of medicinal herbs, by tongue and pulse diagnosis and by specific acupuncture procedures.

---

\* **Correspondence to:** Professor h.c. Dr.med. Claus C. Schnorrenberger M.D., Honorary Professor of the China Medical University, Taichung, Taiwan, Rep. China; Chairman of the Board of Directors, Lifu International College of Chinese Medicine (LICCM), Karl Jaspers-Allee 8, CH 4052 Basel/Switzerland, E-mail: lifu@gmx.ch

All the achievements of modern Western medicine can be integrated and properly applied within Chinese medicine, but not vice versa, since the deductive method will always keep its key role because it grasps *Autiasis* which works as a ‘substance’ (*ὑποκείμενον*) comprehending the main Principle, the Whole, *Yin-Yang* 陰陽, *Dao* 道, *Shen* 神; that is what Aristotle named substance; the deduction and the analysis of parts from there (*ἐπαγωγή*) is the method he called science (*ἐπιστήμη*).

**Key words:** Beginnings of scientific reasoning in Chinese medicine and in the West, Basics of logic: deduction and induction, Evidence Based Medicine (EBM), Fallacies in modern Western medicine, German Acupuncture Trials: the GERAC studies

## Fallacies in Modern Western Medicine

A basic fallacy involved in EBM, it has been said, is that it relies on the Cartesian postulate of separation between *res cogitans* and *res extensa* (mind and matter) and can in so far only take an objective, namely the materialistic view of evidence into account. This fallacy is so deeply rooted in the mind of modern Western people that “it will take a long time for it to be replaced by a really different attitude toward the problem of reality.” (cf. Heisenberg, 24) In terms of Aristotelian logic, this fallacy is called the **Wrong Beginning** (Proton pseudos *πρῶτον ψεῦδος*).<sup>45</sup> The *subjective* element, which concerns the outlook of the physician as well as that of the individual patient as the genuine starting point, is ignored by EBM, although the “care (or management) of individual patients” is explicitly mentioned in its definition. However, true evidence is the complete adjustment of subjective and objective evidence as the German philosopher, Edmund Husserl, points out.<sup>46</sup>

Thus, EBM overlooks the necessary subjective counterpart of objective findings by recommending ‘mathematical estimates’. From there, and this

is primarily deduced from the Cartesian split, originates the hypothetical idea of the Placebo Effect, a contemplation which haunts EBM researches like a monster, while it is a natural ingredient of clinical medicine, and not only of all medical activity, but of almost everything else in human life, something which business people, bankers and politicians also know very well.

Further, EBM succumbs to a so-called **vicious circle** (*circulus vitiosus*) and a *petitio principii* in connection with the inverse sequence of logical steps leading to proof<sup>47</sup>. Expressed in Aristotelian terms this means that medicine is the substance (*hypokeimenon ὑποκείμενον*); evidence is an accident (*symbebekos συμβεβηκόσ*).<sup>48,49</sup> This, in Aristotle’s words, is τὸ ἐν ἀρχῇ λαμβάνειν, which means ‘to assume (or to request) that which has been in question above’. Such a thing is not permitted in science. Medicine can, therefore, never be based on evidence alone, when that evidence has been obtained from medicine.

It would be a similar kind of false reasoning as to argue that a tasty salad made from fresh vegetable leaves growing in spring proves that Nature exists and is good and useful. The vegetable leaves can be compared to the mathematical estimates of EBM

that may be helpful for a quick orientation of the practising physician but have no clue to the sick person as an individual let alone to his whole nature.

Evidence Based Medicine should for this reason be correctly renamed as Medicine Based Evidence (MBE): Medicine is the original foundation of medical evidence. According to the time-honoured rules of logic, medicine is the substance, and the substance (medicine) can never be proven by an ‘accident’ (‘evidence’). This is the main fallacy of EBM which can thus be exposed by its very name.

Another fallacy implied in EBM, and somehow connected with the foregoing, is **inversion** (hysteron proteron ὕστερον πρότερον).<sup>50</sup> Things are arranged in the reverse way: It is not evidence that implies medicine, but that medicine implies evidence.

An equally fallacious line of reasoning would be to maintain that playing football is a wonderful sport because clubs can make a lot of money by organizing international football games.

Consequently, the EBM policy is logically wrong.

A **perturbation** (ignoratio elenchi) takes place whenever a physician with limited understanding of his patient’s ailment is unable to analyze the condition properly and assumes that the disorder is mental. Then the doctor refers his patient to a psychiatrist who, frequently enough, does not know what to do either... He merely orders tranquilizers and, by doing so, blocks part of his patient’s brain activities so that the patient is no more aware of his organism’s sickness signals so that he no longer can realize them and assumes that he is cured.<sup>51</sup>

The **wrong beginning** or **false cause** (proton pseudos, πρῶτον ψεῦδος) referred to above is also involved when a patient, who has personally

earned his insurance fees, paid them into his health insurance and has, of course, done this as a ‘whole’ individual, is broken down to single parts when he falls ill.<sup>45</sup> Then he is just considered as

- a sick liver ~ hepatitis;
- an upset stomach ~ gastritis or gastric ulcer;
- an ailing heart ~ coronary infarction;
- a suffering knee ~ osteoarthritis of the knee joint;
- a torn intervertebral disk ~ low back pain;
- a hypertension;
- a hypothyroid,
- an accumulation of gallstones, kidney or bladder stones,.
- a rheumatoid arthritis etc., etc.

**Confusion** (Metabasis eis allo genos μετάβασις εἰς ἄλλο γένος) takes place when a physician fails to differentiate the whole patient from the average values of a randomized double-blinded statistical study and explains to him that: “60% of your illness can be healed by your medication, but the remaining 40% cannot, sorry, but that’s the scientific way!” The doctor, for one thing, assumes that his loose explanation is the logically correct one, and, in the second place, he believes that his client is ready to believe this nonsense.<sup>50</sup>

No wonder the patient is baffled at such an assertion. Is anyone able to understand this? No. Why? Because it is without the necessary deductive logic and lacks common sense. It is an outgrowth of the above-mentioned ‘mathematical estimates’ which are used instead of genuine *Bian-Zheng* evidence as provided by Chinese medicine. Incidentally, it is precisely at this point the many risks and side-effects involved in modern Western medication have their

origin. The medical doctor and the apothecary who are supposed to elucidate these side-effects to their clients are in most cases unable to do so, because they no longer understand the puzzle themselves! But they nevertheless comply with such idiotic conventions because these are supposed to be the ‘state of the art’. This is a **contentious inference** (Gr. *σόφισμα δὲ συλλογισμὸς ἐριστικός*)<sup>52</sup>, a sophism, as it merely appears to reason from an opinion which is generally accepted, but is not supported by solid deduction.<sup>53</sup>

The correctly understood and correct application of Chinese medicine can be of help here, because it starts from a paradigm different from that used by orthodox Western medicine. Diagnosis and therapy in Chinese medicine start from the encompassing horizon of the principle of *Yin-Yang* (arche *ἡ ἀρχή*) involving the Whole (to holon *το ὅλον*) of the universe as well as the flow of time, something which allows the induction (Επαγωγὴ *ἐπαγωγή*) of further facts, data, diagrams, diagnostics and therapies. This makes deductive Chinese medicine in association with clinical induction so effective and safe that it reduces risks and side-effects to a minimum. I am able to corroborate this fact with the case histories included in this paper. Because of its rational, epistemological foundation, correctly interpreted and administered Chinese medicine is, from the logical – and consequently the scientific – point of view, superior to the system of modern orthodox western medicine.

### Case History 3

A small man with an ash-grey face and an odd device fixed to his nose in order to keep his nostrils open sat in my waiting room. Bent forward, gasping and groaning, he held his head in his hands. He kept

coughing and sighing frantically until other people who were waiting complained to the receptionist because of the awful noise he was making. To calm him down I asked him into my consultation room where he started to tell me his problems in a hardly audible voice:

“You’re my last resort, doctor”, he choked, “if you can’t help me, I’ll kill myself. Yes, that’s what I’m going to do. I’ve been a hunter all my life and I have a number of fine rifles at home. Only my wife has prevented me so far from doing it. I’m a complete wreck; to live on doesn’t make sense anymore.” He pulled the air noisily through his artificially widened nostrils. “My agonizing tinnitus is even worse than my shortness of breath; I feel as if I’m suffocating and as though I could drop dead on the spot.”

I asked him how long he had been suffering from noise in his ears.

“It’s not just a noise, doctor, it’s an explosion and it goes on day and night. I’ve had it for some 15 years now. No physician, no professor, no one has been able to cure me yet.”

I looked at his tongue and took his pulse. The tongue looked like a hard, pointed piece of wood, it was narrow, rigid and intensely red. The root of his tongue was furred with a thick yellow coating. His pulse was very thin, too weak for a man of his age (he was 58), and it was hard and tense like a thread of wire. Under my ring finger I detected a deep hollow where his pulse should be felt. His skin was dirty, pale and full of patchy pimples; his eyes were sunken, and they had inflamed edges; dark purple shadows reached down to his cheeks and jaws. His hair was all over the place, his posture was unstable; he seemed to float in his much too wide clothes like a jelly-fish in sea-water. He didn’t like at all as I

examined him cautiously.

“My jacket and my trousers used to fit me until a few years ago”, he said in his hoarse, feeble voice. I asked him whether he had had surgical operations.

“A lot, doctor. My sinus problems were first operated on when I was 8, an appendectomy at 13, the tonsils when I was 25, an intervertebral disk removed when I was 30, but that didn’t improve my terrible backache at all; instead it became much worse.” I asked him whether he was under any stress.

“Of course! It’s because of my job. I sell cars in my own shop, you know, and run a driving school as well and give driving lessons”, he continued. He said he had always feared being poor in his old age. That was why he borrowed money from the bank to build a big apartment house as additional income. As soon as his bankers discovered that he was sick they wanted their capital back. They threatened to take his house away in order to have security for their money.

“Stress? O man! That’s much too mild an expression for my desperate situation!” He fell into a fit of coughing.

He had paid a lot of money to various medical specialists, but they had proved to be completely hopeless. He had given a great deal of money to neurologists, orthopedic surgeons, rheumatologists, lung specialists - pulmologists, ENT-doctors, specialists for internal diseases and finally to psychiatrists and psychotherapists. They had all been in the position to build themselves beautiful homes, not just one house, but quite a number of houses. The banks had given them favorable loans for financing their properties, but as far as he was concerned not a single one of them had been able to restore his health. They had just prescribed a lot of medication, pills and drops. His mouth had become dry on this,

and even drinking water wouldn’t alleviate it, so that he had developed an inflammation of the stomach, a chronic gastritis. Finally, they had sent him to a psychotherapist just because no one had a clue as to what was wrong with him, and this particular person had turned out to be a madman and a crook on top. He had made him initially sign an agreement for ten sessions, 150.00 German marks, for 45 minutes of treatment each, and then this charlatan had sat in front of him with his eyes tightly closed, so that neither he nor the other had said one single word on these occasions except ‘Good morning’ or ‘Good afternoon’ and later ‘Goodbye’, and this went on in the same way for each of these ridiculous sessions. Shortly before the final appointment had finished the patient had summoned enough courage to ask the therapist what the hell the meaning of all his monkey business was. The doctor opened his eyes and replied that he had patiently waited ten whole sessions long for the patient to make what he called a ‘verbal offer’ from where he could start his therapy. Unfortunately, he had waited in vain; but now, thank Heaven! the patient had said something, and this was a breakthrough, so that now it would be necessary to come to a new written agreement for another ten sessions at the same fee in order to finally reach the expected therapeutic result. But the patient had lost his confidence in the meantime; he was fed up with psychotherapy after he had invested 1,500 German marks for nothing.

One day he bought a book about healthy nutrition, and when he read it, he immediately understood that he and his wife had been eating the wrong food for a long time, food containing too much meat and fat, and too much wine which they thought would strengthen their health, but all this had

been described in the book as extremely harmful, even dangerous. Not one of his many doctors had ever mentioned a single word about nutrition. They had just prescribed chemical tablets which had led to the dry mouth and his stomach problems.

As soon as his wife started cooking different dishes, he felt a bit better. Some nights he was able to sleep through, but right now everything had become very bad again, especially his tinnitus and the need to get up at night. He had travelled to a naturopath in Switzerland who had brought him some relief with homeopathy. This had been at much greater help than all that he had received from his orthodox physicians. But his general condition was still appalling. And then he listed all his additional complaints: “Insomnia, frequent urination by day and night, raging tinnitus, shortness of breath with attacks of suffocation, a chronic cough, obstructed nostrils, palpitation, a goitre, high blood pressure, nervousness, a bloated stomach, hemorrhoids, low back pain...”

“Which one is your worst problem?” I asked.

“The tinnitus and my obstructed breathing!”

I entered his *Bian-Zheng* 辨證 diagnosis ‘The Kidney doesn’t take up the Qi’ (*Shen Bu Na Qi* 腎不納氣) into his file, my assistant mixed him the appropriate Chinese herbs, and I gave him acupuncture treatment. When he came back, he felt slightly better after he had taken his herbal prescription for some days. His voice had become stronger, the coughing had subsided, his sleep was better and his tinnitus had become less aggressive. He had only to get up three times at night now instead of ten times before. He received a series of 12 acupuncture treatments during the 3 following weeks and he continued drinking his herbal medicine. After two months he

had gained 5 kilos; his face looked fresh and clean, his hair was well-groomed, he no longer needed the device to keep his nostrils open. His clothes fitted him better. When I checked his pulse and his tongue I discovered that both were markedly improved. I mentioned to him that he probably felt a bit better now.

“I am a different person, doctor”, said he. “My wife keeps telling me that I am. Believe me or not, for the first time in 10 years I could have sex with her. I was convinced that I had become impotent for the rest of my life. The professor of lung diseases whom I consulted said when I complained to him about my loss of sexual desire, that this was completely normal for a man of my age. Women had their menopause at 48, and men naturally lose the sex drive in their late fifties. He had experienced this himself; he was about my age, he said, and it was perfectly normal.”

“Nonsense”, I commented. “Healthy men can still have sex when they are well over 80. It is related to the strength of the kidney. Your kidney is much stronger now than it used to be.”

After two more months, the patient’s health had further improved. He had seen his banker who was amazed to find him in such good health. The banker even offered him a new loan under favourable conditions, and now he was out of debt and general financial trouble. His business took off again and his health has remained stable ever since, and this was more than ten years ago.

## Fallacious Understanding of Chinese Medicine

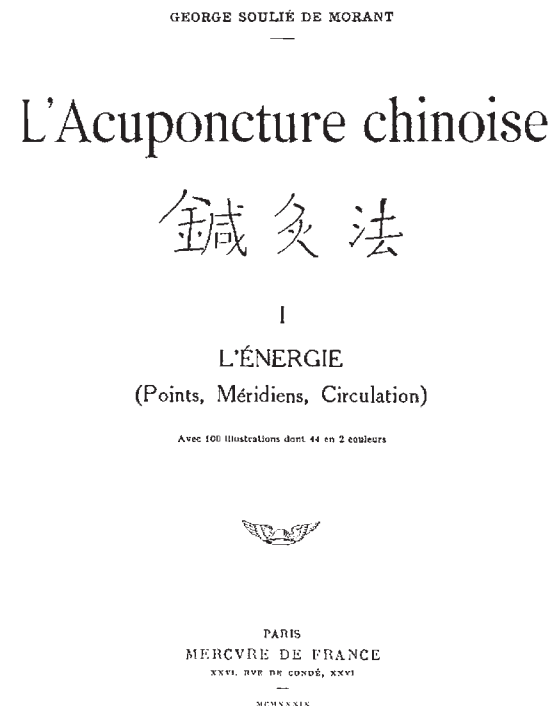
Unfortunately, the correct understanding of Chinese medicine and acupuncture in the West is



limited. This has a number of reasons, some of which have already been mentioned. A further reason is that the majority of medical acupuncture societies have followed a fake interpretation of Chinese medicine initiated by the Frenchman, Soulié de Morant, who in his book, “*L’Acupuncture chinoise*” (Paris 1939, see illustration below) introduced nonsensical terms such as energy, meridians and points for *Xueqi* 血氣, *Jingmai* 經脈 and *Xuwei* 穴位. For almost six decades the European acupuncture scene was dominated by Soulié’s energy and meridian humbug which was praised even by eminent scholars like Joseph Needham and is, up to this day, reflected in conservative academic publications such as the above mentioned *Essential Evidence Based Medicine*.<sup>33</sup>

Soulié had never studied acupuncture in China, his book about acupuncture was more or less speculative<sup>54,55</sup>. Academies in Mainland China giving instruction in acupuncture to Western doctors during the seventies and eighties had no idea how to translate their classical medical terms into modern Western idioms. Therefore, they simply adopted a multitude of erroneous renderings into their foreign languages acupuncture textbooks.<sup>56</sup> I remember being asked by Chinese interpreters on occasion at an acupuncture course presented in French at the College of Chinese Medicine Shanghai in 1977 what the meaning of ‘*l’énergie essentielle*’, ‘*l’énergie nutritive*’ or ‘*le méridien de la rate*’ in Chinese was and, above all, what it stood for in reality. No one at the Academy had a grasp of it.

I was amazed that even such a renowned scholar of Chinese culture as Joseph Needham at a conference in Oxford 1979, which I had helped to organize and which I chaired, declared that Soulié de Morant’s books on acupuncture were by far the



**Fig. 5. Title page of Soulié de Morant’s main book on acupuncture (1939)**

best in a Western language and had not yet been superseded by anyone.<sup>57</sup> My opinion is that Needham here just relied on hearsay and that he had never actually studied Soulié de Morant’s work. During the conference it turned out that the venerable scholar had quite a limited understanding of Chinese medicine. Nevertheless, he is still enthusiastically cited as an unsurpassed authority not only on *Science and Civilisation in China*, which he really is, but also on Chinese medicine, which he certainly is not.<sup>30,31</sup>

The leaders and the members of the European acupuncture societies were disinclined to change their erroneous adoptions for decades, and the deplorable outcome of this is mirrored in the confusing results of the German GERAC studies. The fact that the ‘real’ and the ‘sham’ acupuncture groups did not show marked differences is due to the false, theoretical assumptions (energy, meridians,

points etc.) of the needle-mongers involved in that study. Their theories concerning acupuncture did not satisfy the necessary condition of **consistency** (cf. Popper [19], p. 92), and that is why the two groups failed to differentiate between the two sets of acupuncture factions, the real and the sham.

## Shen, Nature, Autiasis and the Way Out

As a Western physician and acupuncturist licensed to practice on several continents and in various European countries, I can say that all good acupuncturists around the world with whom I am acquainted and whom I have known have always adhered to the concept of *Shen* 神 and to a respective understanding of the Whole whenever they practised and took care of their patients, even if only from intuition. Acupuncturists who are not aware of *Shen* or the Whole in the Aristotelian sense can never be good acupuncturists. They may be merely needle stickers, and indeed many of them are.

This awareness of *Shen* 神 is opposed to the mind-set of busybodies who have never practised Chinese medicine and, therefore, have never understood acupuncture and Chinese medicine properly. These demand that acupuncture be statistically confirmed, ‘scientifically’ verified, fully scrutinized and documented before it can be applied, although it is quite sufficiently confirmed by the *Bian-Zheng* 辨證, at least as far as a Chinese diagnosis is concerned. Of course, everything possible should be scientifically tested and substantiated in our modern civilization, provided that the right methods for obtaining proof and genuine evidence are applied. But there are certain things in life which just don’t

need to be scientifically tested because they stem from Nature; they are naturally given. They issue from *Shen* 神 and *Dao* 道, out of the principle of *Yin-Yang* (Gr. ἀρχή) which involves the Whole (Gr. το ὅλον), and in Chinese medical diagnosis they are guaranteed by *Zheng* 證 which is evidence. I have tried to show that *Shen* 神 is more or less identical with what Aristotle had in mind when he wrote his lecture on Physics (Physis φύσις), the principle (ἡ ἀρχή), the Whole (το ὅλον), Substance (ὑποκείμενον) and Accident (συμβεβηκός).

Who would challenge a surgeon for instance (or the art of surgery in general) beforehand to prove that incisions into the human body heal by themselves, that is *before* the doctor was legally permitted to cut open a human being and sew the wound together again? Who would have the imprudence to call surgery non-scientific before surgeons had proved the self-healing effect of their incisions in a randomized double-blind study? No one, of course, as this is assumed to happen ‘automatically’, namely by Nature. Such a demand would be considered insane, as many patients would have to die without receiving proper surgery before the proof of self-repairing had been ‘scientifically’ confirmed. Could such a proof be supplied by double-blind studies and randomized trials nowadays considered to be the major tools of scientific proof in medicine? No. Nevertheless, western critics of Chinese medicine and acupuncture call for such foolish procedure for naturally established and, as such, useful medical methods like Chinese medicine and acupuncture!

Why is this so? Because the natural healing of cuts and incisions is not governed by accidental techniques or theoretical procedures, but by **Nature** itself, something modern Western medicine calls



Homeostasis after the famous French Physiologist, Claude Bernard<sup>58</sup>, using another ancient Greek term. We may name it as well *homeodynamics* in which the natural self-healing effect, something I call ‘Autiasis’\*) is incorporated. Without being perceptible, *Autiasis* is always involved as long as a person is alive. That is why ‘hard-core’ medical scientists think that *Autoiasis* doesn’t exist. The reason for this is that modern orthodox medicine has narrowed itself down to a limited grade of logic consisting mainly of accidental calculation. It is, therefore, necessary to call to mind an encompassing and (at the same time scientific) medicine which I would like to name *Iatoria* (Gr. ἡ ἰατοριᾶ). This applies to traditional Chinese medicine in combination with modern Western medicine.

Why do we still need ancient Greek terms for the description of simple and unquestionably basic facts and functions? Why do we refer to ‘*epistemology*’ when we talk about the foundation of science? Because their understanding stems from Greek researchers who once created them, and because there are no suitable words in our barren modern Western languages. They could perhaps be expressed even more suitably by ancient Chinese characters. Modern Western languages have become subject to what may be called ‘modern reasoning’, which is mainly based on technically influenced terminology and, consequently, on an impoverished range of understanding and verbal expression of the Whole. Without Claude Bernard’s natural *Homeostasis* and without *Autiasis*,

\*) *Autiasis* ἀὐτῖασις is a Greek neologism, composed from *autos* (αὐτός), self, and *iasis* (ἡ ἰασις), the healing. It means the self-repairing of the human organism, something which happens involuntarily all the time as long as we live.

not one single living individual in the world would be able to sleep, wake, eat and drink, excrete, rest, be active and to survive.

Our entire life is governed by it, so amazingly that few of us are aware of it. That is why some medical people assume that *Homeostasis* and *Autiasis* do not exist. Both, however, are inseparable assets of human nature and a reflection of the Order of the Cosmos. This looks similar to as the widespread lack of awareness of the Whole (cf. section PART I, EBM, p. 13). It is still the same as it was in ancient times when Heraclitus (544-485 B.C.), the pre-Socratic philosopher, stated:

“φύσις κρυπτεσθαι φιλεῖ, Nature likes to hide itself”. (2)

*Homeostasis* and *Autoiasis* are involved and active whenever we as patients or as doctors employ not only natural healing methods but also in all kinds of therapy and in life. The concept of Chinese medicine is mainly based on *Shen* 神 as the encompassing source, and on *Autiasis* as its intrinsic counterpart. Acupuncture and Chinese herbal prescriptions, whenever properly administered, are effective, because *Autiasis* works in the human organism. \*) The reason why these therapies are not fully understood and adequately honored nowadays by the medical and political authorities in the West is expressed in Heraclitus’ saying.

Because Western physicians and health authorities have become unable to understand Nature and rely only on accidents that, according to Aristotle, have no being, they demand scientific proof for everything including acupuncture and Chinese

\*) Homeopathy is based on a similar medical principle, by the way.



Fig. 6. Aristotle (384-322 B.C.), Louvre Paris.<sup>59</sup>

prescriptions before Western patients can have access to them for their personal benefit and at lower costs than what they pay for pharmaceutical drugs. We may add that this is possible with considerably fewer side-effects and adverse phenomena. This has to do with the scientific method of Chinese medicine, which is hardly understood by anyone in the West and – as far as basic scientific Western terms are involved – sometimes not in the East either.

### Aristotle says:

‘It shows lack of education not to know of what we should require proof, and of what we should not. For it is quite impossible that everything should have a proof; the process would go on to infinity, so that even so there would be no proof.’<sup>60</sup>

People who demand proof for Chinese medicine

and acupuncture – who are themselves both from Nature, from the Whole and from *Shen* 神–, such people obviously have no proper education. In ancient Greek Platonic and Aristotelian terms they are called sophists, which means that they do not know the rules and foundations of logic and of scientific reasoning. They allot avoidable effort to trials which lead to nothing, and they squander money by doing so. An example is the absurd German GERAC study which had at least the one striking result that acupuncture, even when unprofessionally applied, is still doubly as effective as modern Western orthodox medicine in cases of low back pain and osteoarthritis of the knee.

Western scientists without proper education blindly presume that the application of Chinese medicine, herbal prescriptions and acupuncture is identical with the application of synthetic chemical remedies. Whenever a new product which has the chance of becoming a registered drug has been manufactured in the pharmaceutical laboratory, e.g. *Triamcinolone* (Fig. 7), it is necessary that many laboratory tests, animal trials, and tests on human volunteers are performed in order to accidentally try out the effect of the new formula on the human organism.

Such tests, however, can never supply sufficient

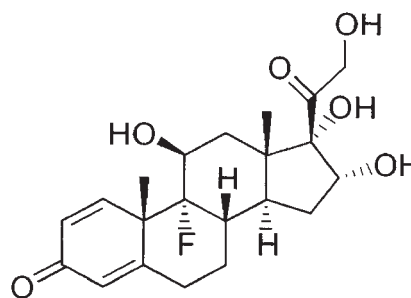


Fig. 7. Structural formula for Triamcinolone

proof for an absolutely safe administration of the new remedy on patients. That is precisely why most of the risks and side-effects of modern Western pharmaceuticals occur. An international work on the side-effects of pharmaceutical products begins in the following remarkable way: “The substance taken in, the drug or medication, and/or its metabolites ‘react’ somehow with the functional substrates of the body. As a result the functions in question are modified. This is the primary pharmaceutical effect.”<sup>61</sup> This work, prepared by sixty European specialists, is apparently incapable of demonstrating exactly how the chain of effect is brought about when it describes the pharmacodynamics involved as a ‘reaction somehow’. Risks and side-effects of modern Western pharmaceuticals show that such synthetic agents do not comply completely with the Whole of the living human being. That is different in Chinese medicine where Evidence is obtained from the Analysis of the deductively supported *Bian-Zheng* 辨證 and where the respective therapies are a result of the Order of Nature issuing from *Yin-Yang*, from the inner organs, the blood vessels, the external climatic disturbances and, above all, from *Homeostasis* and *Autiasis* inside the individual human being which is on the whole a safe medical procedure. Orthodox Western physicians who deny the reality of the Whole have no access to such a paradigm. They should try to rethink the fundamentals of their profession as the way out of the quandary is easy:

Deduction and induction have to be applied in combination. This has been done in China since ancient times by anatomical studies of the human body’s morphology<sup>43</sup>, by testing the effects of medicinal herbs<sup>62-64</sup>, by tongue and pulse diagnosis and by specific acupuncture techniques. All achievements of modern Western medicine can be easily

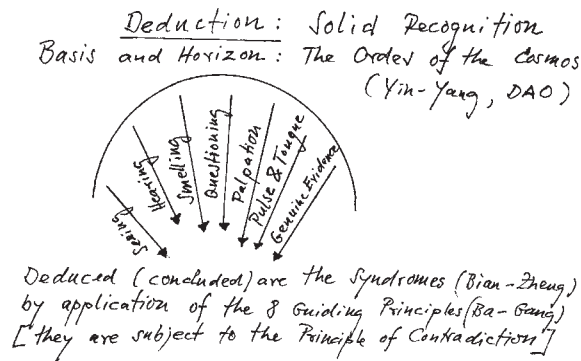
integrated into properly understood and properly applied Chinese medicine, but not vice versa as the deductive method will always keep its key role since it grasps the Principle (archè ἡ ἀρχή), the Whole (to holon το ὅλον), *Yin-Yang* 陰陽, *Dao* 道, *Shen* 神, and that is what Aristotle named ‘substance’ (hypokeimenon ὑποκείμενον); the deduction (syllogismos συλλογισμός) of parts (symbebekos συμβεβηκός) and from there their logical analysis by means of induction (epagogē ἐπαγωγή), the method he called science (epistēmē ἐπιστήμη).

\*

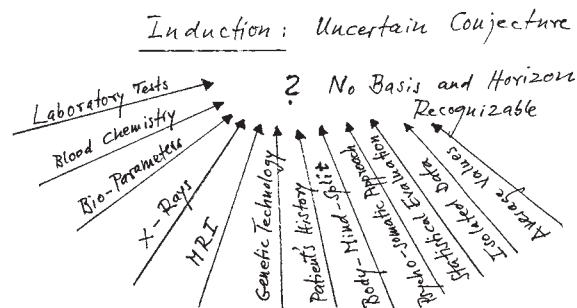
The achievements of modern Western medicine have opened up new frontiers to the advantage of millions of patients around the world, especially as far as surgical and diagnostic methods are concerned. But there is an additional, and so far usually secret therapeutic wealth available in Chinese medicine that could, because of its logical and genuine scientific approach, help improve the current quality and clinical possibilities of western orthodox medicine for the benefit of our patients. This wealth should be worldwide incorporated into the regular teaching plan of all medical university faculties, mainly and simply because it is governed by the identical sensible principle as modern western scientific logic.

Having said this I would like to come back to one of my opening mottos:

It is probably true quite generally that in the history of human thinking the most fruitful developments frequently take place at those points where two different lines of thought meet. These lines may have their roots in quite different parts of human culture, in different times or different cultural environments or different religious traditions; hence



**Fig. 8. Graphic illustration of Deduction**



**Fig. 9. Graphic illustration of Induction**

if they actually meet, that is, if they are at least so much related to each other that a real interaction can take place, then one may hope that new and interesting developments will follow. (Werner Heisenberg) (1)

## References

45. Wörterbuch philosophischer Grundbegriffe (Dictionary of Basic Philosophical Terms), München 1973, p. 231.
46. Edmund Husserl, Cartesianische Meditationen (Cartesian Meditations), Meiner, Hamburg 1977, p. 58 ff.
47. Aristotle, On Sophistical Refutations (ΣΟΦΙΣΤΙΚΩΝ ΕΛΕΓΧΩΝ), Harvard University Press, Cambridge Mass. and London, 1955, Book V, 166b 8, p. 24ff.

**Table 1. Correspondence of Deduction and Induction (both should be applied in conjunction).**

Deduction	Induction
<p>Shen 神, Yin-Yang 陰陽, Bian-Zheng 辨證 (diagnostic evidence), Analysis of Chinese characters; Occidental term: Physis (Nature).</p> <p><u>Purpose:</u> Grasping the Whole in order to deduce accidents.</p> <p><u>Difficulty:</u> Uncertainty of the technical approach.</p> <p><u>Benefit:</u> Comprehend the essence of Chinese medicine by understanding the patient as a person, his/her entire disposition and individual disease, including cognition of his/her individual nature.</p> <p><u>Objective:</u> Scientific application of <i>Homöostasis</i>, <i>Homeodynamics</i> and <i>Autiasis</i>.</p>	<p>Techniques of treatment; knowledge of herbs, anatomy and physiology. Analysis of case histories; randomized double-blind trials, statistical documentation.</p> <p><u>Purpose:</u> Evaluating efficacy, expediency and cost-effectiveness.</p> <p><u>Difficulty:</u> Accumulation of a multitude of meaningless data.</p> <p><u>Benefit:</u> Recognize isolated mechanisms and correlations; acquire reliable techniques of acupuncture, moxibustion and herbal prescriptions. Objective assessment of the results.</p> <p><u>Objective:</u> Taking only parts (<i>accidents</i>) of the human organism into account.</p>

48. Aristotle, op. cit., Book V, p. 29.
49. Aristotle, Metaphysics, Book VI, chapter ii, 1027a, 27-29, p. 305.
50. Wörterbuch philosophischer Grundbegriffe, op. cit., p. 231.
51. Aristotle, On Sophistical Refutations, op. cit., chapter V, p.29ff.
52. Aristotle, Topics (*TOPIKON*), Harvard University Press, Vol. II, 162a 17, pp. 724/725.
53. C. L. Hamblin, Fallacies, Methuen, London 1970, p. 55.
54. H. Lehmann, Am Anfang war ein Scharlatan, Deutsches Ärzteblatt, Dtsch Ärzteblatt 2010, op. cit.
55. Donald E. Kendall, DAO of Chinese Medicine, Oxford University Press, Oxford-Hong Kong, 2002.
56. Précis d'Acupuncture Chinoise. Teaching Materials of the *Shanghai Zhongyi Xueyuen*, 1977 (in French).
57. Lu Gwei Djen & J. Needham, Celestial Lancets, Cambridge University Press, 1980, p. 11.
58. Wolf D. Keidel, Kurzgefasstes Lehrbuch der Physiologie (Short Textbook of Physiology), Thieme, Stuttgart 1975, p. 1-1.
59. Illustration from: Martin Heidegger, rororo Bildmonographien, vol. 980, p. 34
60. Aristotle, Metaphysics, op. cit., Book IV, 1006a 8-11, p. 162f.
61. H. P. Kümmerle und N. Goosens (Hrsg.), Klinik und Therapie der Nebenwirkungen (Clinic and Therapy of Side Effects), Thieme, Stuttgart 1973, p. 3.
62. *Shen Nung Ben-Cao-Jing* 神農本草經, several classical editions.
63. 王雲五, *Ben-Cao Gang- Mu* 本草綱目, 20 vol., *Wan You Wen Ku* 萬有文庫, Commercial Press Publishers 商務印書館發行。
64. *Shang Han Lun* 傷寒論, On Cold Damage, transl. Craig Mitchell, Feng Ye, Nigel Wiseman, Paradigm Publications, Brookline, Mass., 1999.