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Difficulty Swallowing and Chronic Fatigue

Acupressure Case Study Two

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Background

Herman is a single man in his late forties who works as an accountant. He works primarily at a desk, spending significant periods of time sitting at a computer. Herman also has his own business, buying and selling equipment, which requires him to stand for extended periods of time.

He is the youngest of three children and has always been tasked with being the “responsible one”. His parents had very high expectations of Herman which he has carried on through his adult life. His father passed away three years ago and he has been assisting his mother with her finances, legal and other business decisions ever since. He enjoys helping his mother and has no animosity or stress about the situation.

Herman suffers from chronic fatigue and headaches which, on occasion, will last for a couple of days. He never feels rested when he wakes up in the morning and stated “it always feels like I have not had a good night sleep”. The chronic fatigue started during his early twenties and is getting worse as he ages. He has tried taking vitamins, sleeping pills and having massages but nothing has provided permanent relief. Herman indicated his memory and hearing have decreased but not significantly and it is not a huge concern for him at this time. He gets “foggy brain” which is more prevalent during the week and he attributes this to the stress and pressures of his job. He has overall body stiffness and aches and pains, but feels this is just part of aging.

He suspects he may have asthma and/or allergies given his continual cough, although this has not been confirmed by a physician. He is currently not taking any medication, vitamins or supplements.

During the intake process Herman was calm and laid back but was eager to get going with the session. Based on our initial discussion, he appeared to be a considerate and sympathetic individual with a nurturing nature who is emotionally stable. He is very independent and believes he needs to do things himself if he wants them to get done. It is apparent that he is constantly helping others who come to him with their problems. His cheeks and forehead had a slight redness to them, his eyes were puffy and looked tired and he was a healthy weight.

Instinctively, I would have said his Constitutional Factor (CF) was Wood. Given Herman was my first client as a student, I decided I should incorporate the assessment tools of: colour, sound, odour, and emotion to determine his CF. In choosing to ignore my prior knowledge and based on my assessment, I convinced myself that Herman’s CF was Earth only later to realize my initial assessment was correct and he is a Wood CF.

In my assessment of Herman’s CF, I wasn’t able to discern a colour in his face however I felt he had a fragrant odour, had a soothing tone which was melodious and he appeared to be quite sympathetic. Herman seemed to appreciate that I was sympathetic to his condition but made it very clear I was not to take pity on him.

My initial treatment plan was geared around Herman’s CF being Earth and it wasn’t until I started a revised treatment plan based around a Wood CF that we saw improvements with his chronic fatigue. I have performed several acupressure sessions on Herman with the results summarized below.

Initial Acupressure Session

For the first session, I chose to do the **Great Bridge Release (GBR)** to introduce Herman to acupressure as he had never experienced energy healing before. The **GBR** is beneficial for his fatigue as it influences the distribution and balance of the reserve energy.

Pre-session pulses indicated the Liver (LV), Stomach (ST), and Pericardium(PE) deficient, Heart (HT) and Lung (LU) excessive and Small Intestine (SI), Gall Bladder (GB), Bladder (BL), Kidney (KI), Large Intestine (LI), Spleen (SP), and Triple Heater (TH) balanced. The Stomach Meridian is associated with weakness and lethargy and insomnia can be attributed to an excess in the Heart Meridian.

Herman enjoyed the session, he found it very relaxing although he was feeling cold after the session. I provided him with an additional blanket and held the warming points **PE2** and **LV3** until he was comfortable. I advised Herman to ensure he takes it easy for the next 24 – 48 hours and to keep warm and hydrated. The LV, ST and PE pulses increased after the session, the HT and LU remained excessive and all other pulses were balanced.

Meridian		Pre-Session ¹		Post Session ¹	
SI	HT	2	3	2	3
GB	LV	2	1	2	2
BL	KI	2	2	2	2
LI	LU	2	3	2	3
ST	SP	1	2	2	2
TH	PE	2	1	2	2

I encouraged Herman to not watch TV or use electronics for a minimum of one hour before going to bed and provided him with a handout for the **Pal Dan Gum Exercise (PDGE) “Looking Backwards”**.² I suggested he do the exercise at least twice a week as it helps to relieve fatigue in the five yin organs.

Sessions Focused on Difficulty Swallowing

When Herman returned for his next session he was pleased as he had a slight increase in energy. He informed me he had started taking Magnesium as he had heard it could help with fatigue. This was new for Herman as he was not one to believe in supplements. He was still feeling tired and had overall body aches but what was odd and concerning to Herman was that he started to have difficulty swallowing and he was worried about choking. He had an episode earlier in the week where he couldn't swallow his food, started choking and couldn't breathe. The swallowing issues continued for several weeks so needless to say, the focus of our sessions shifted away from the chronic fatigue and onto the swallowing although the releases chosen would also benefit his fatigue.

¹ Pulses: 1=deficient, 2=balanced, 3=excessive

² With the hands crossed over the face or the Heart center inhale while bringing the arms to the sides and back (pals forward) and turning the head to the side, so as to feel a stretch along the side of the neck and in the chest. Exhale while returning the hands to the starting position. *Jin Shin Do*® *Bodymind Acupressure*® Basic Handbook (1) page 32

The following highlights the sessions performed along with the reason why it was selected:

- **Great Central Release (GCR)** as it influences metabolism and equalization of energy
- **Belt and Penetrating Release (BPR)** to work all meridians: the belt to control the meridians by loosening or tightening and penetrating to connect the internal energy centers
- **Stomach Meridian Release (STMR)** as it controls descending chi and is good for nausea, vomiting, weakness and lethargy ([session details below](#))
- **Triple Heater Meridian Release (THMR)** as it works with metabolism and is also beneficial for weakness and lack of energy (three burners include: respiration, digestion and elimination)

During these sessions, Herman’s pulses remained balanced for the most part other than the SP and ST pulses were deficient prior to the **BPR** and the SP pulse deficient prior to the **STMR**. The TH pulse was deficient pre-session for the last two sessions, another reason why the **THMR** was selected. All pulses were balanced post sessions.

Stomach Meridian Release (session details)

Herman indicated he wasn’t having as much difficulty swallowing as he was in the past, however, he was still having issues with it. He continues to have fatigue and general body aches but he wants to work on the swallowing issues before focusing on the fatigue. Herman was open to me working a meridian so I chose to do a **Stomach Meridian Release** as it controls descending chi and is good for nausea, vomiting, weakness and lethargy. Initial pulses showed BL excessive and SP and PE deficient.

Herman fell asleep at the start of the session and was deep breathing through most of the session with snoring during the neck release. I felt strong pulsating in all of the acupoints but it was more predominant in the jaw, **ST30** and the feet. After the session, the BL pulse remained excessive and the SP and TH pulses had increased.

Meridian		Pre-Session		Post-Session	
SI	HT	2	2	2	2
GB	LV	2	2	2	2
BL	KI	3	2	3	2
LI	LU	2	2	2	2
ST	SP	2	1	2	2
TH	PE	1	2	2	2

Herman informed me he is not doing the **PDGE** as he does not have time however he is, for the most part, avoiding using electronics at least one hour before going to bed. He is doing his best to be mindful while eating and ensure he slows down and chews his food.

Throughout the weeks of sessions, I continually encouraged Herman to be mindful when he was eating, to eat slow and ensure he thoroughly chewed his food. Within a relatively short period of time, Herman’s difficulty swallowing diminished.

First Session focused on Chronic Fatigue

Still believing Herman’s CF was Earth, a deficient SP pulse and Herman presenting with chronic fatigue, I decided to do a **Spleen Meridian Release**. The Spleen Meridian is associated with weakness and lethargy. All other pulses presented as balanced.

During the session Herman was quiet and reserved. While working the right side the acupoints were more sensitive than the left side. When holding **SP13** and **SP6** on the left side Herman experienced a shooting pain in his baby finger. **SP9**, **SP10** and **SP21** were sensitive on both sides. On the left side **SP6** was extremely sensitive. Herman started sneezing while I was holding **SP3** on the right side and was congested near the end of the session. During the neck release **GB21** was extremely sensitive on both sides.

Herman felt the session was beneficial and he felt more relaxed and energized. Post session the SP pulse was balanced as were all other pulses.

Meridian		Pre-Session		Post-Session	
SI	HT	2	2	2	2
GB	LV	2	2	2	2
BL	KI	2	2	2	2
LI	LU	2	2	2	2
ST	SP	2	1	2	2
TH	PE	2	2	2	2

Continuing Sessions for Chronic Fatigue

For the next several weeks we worked on Herman’s chronic fatigue unless he presented with a specific problem he wanted to work on. I developed a treatment plan based on his Earth CF which included:

- **Abdominal Segmental Release** – influences digestion and assimilation and is related to the “Hara” and the reserve energy. Herman did some “Hara Breathing”³ during the session. ST and TH pulses were deficient pre-session with all other pulses balanced. The ST pulse remained deficient post session.
- **Stomach Meridian Release** – traditional associations include weakness, lethargy, and restlessness. SP, ST, TH, and BL pulses were deficient pre-session and the SP pulse remained deficient post session. Given both the ST and SP meridians were deficient, I chose to work the yang meridian first.
- **Spleen Meridian Release** – LI, ST and SP pulses were deficient and an indicator of a deficiency of the spleen meridian is fatigue. LI and ST pulses remained deficient post session.
- **Stomach / Spleen Tonification** – ST and SP pulses were deficient pre-session with both pulses balanced post session.

At this point Herman started having some swallowing issues again, was getting headaches behind his eyes, had poor circulation, was still lacking energy and not feeling rested. Herman was frustrated and didn’t want to continue with his treatments as he was not seeing a significant improvement with his chronic fatigue. He was also discouraged that he was having difficulty swallowing again. I suggested we do a **Great Bridge Release** for our current session as it influences the distribution and balance of the reserve energy and I would consult with the Canadian Acupressure College (CAC) for guidance. Herman agreed. After consulting the CAC, we decided we would change our treatment plan based on now realizing it is possible Herman is actually a Wood CF. The new plan included meridian releases, sedation, tonification and control transfers. Based on presenting conditions, pulses and other assessments, our sessions included a:

³ Hara – the center of gravity and center of reserve energy, about two fingers’ width below the navel and deep inside the lower abdomen. *Jin Shin Do® Bodymind Acupressure® Basic Handbook (1) page 31*

- **Liver Meridian Release (LMR)** – traditional associations include: eye problems, allergies (which Herman suspects he has), neck tension and muscular spasms or cramps. ([session details below](#))
- **Tonification of Wood Element** – it was several weeks before Herman was able to get back in for a session and his GB and LV pulses were deficient, hence the tonification of the wood element. All other pulses were balanced pre-session and all pulses were balanced afterwards.
- **Control Transfer from Lung to Liver with the Windows to the Sky Point GV16** – Herman’s GB and LV pulses were slightly deficient pre-session with the LI, LU and SP pulses excessive. Post session the LI pulse was slightly excessive, the SP pulse remained excessive and all other pulses were balanced. **Note:** I included **GV16** as Herman informed me he will be unemployed in the next few months due to a reorganization at work. He was not upset or concerned about the situation rather he seemed very content and relieved. **GV16** was selected as it clears the head, allowing the individual to see and hear more clearly into their options for the future.

Liver Meridian Release (session details)

Herman was eager to try the new treatment plan with hopes of finding relief from his chronic fatigue. He mentioned he was experiencing an increase in restlessness, had been moody and was losing his patience with people at work and his mother. He was getting headaches behind his eyes which he wondered if they were connected to sinus issues or allergies. Pre-session, Herman’s LV pulse was excessive which supports several of the symptoms he was presenting with. With the exception of his BL and ST pulses being deficient pre-session, all other pulses were balanced. His LV pulse remained slightly excessive post session with all other pulses balanced.

Herman was swallowing throughout the session and his stomach was a little queasy about ¾ of the way through the session, however, Herman wanted to continue. On both sides, while holding **LV9** and **LV12** the points were pulsating and **SP6** and **LV5** were extremely sensitive. **GB34** and **LV9** were sensitive on the right side only. Herman said he felt there were lots of releases and energy was moving throughout his body for the entire session. I asked Herman to remain on the table until he felt grounded and encouraged him to stay there for at least five to ten minutes after that. I held **K11** to help ground Herman before he got off the table.

Meridian		Pre-Session		Post-Session	
SI	HT	2	2	2	2
GB	LV	2	3	2	2.5
BL	KI	1	2	2	2
LI	LU	2	2	2	2
ST	SP	1	2	2	2
TH	PE	2	2	2	2

I asked Herman to take it easy and not do anything strenuous for the next 24 – 48 hours and to make sure he stays hydrated, he agreed. He continues to be mindful while eating and he is doing his best to avoid electronics and television before bed.

I provided Herman with a handout related to acupoint **LI4** and suggested he use that point for his headaches. We made sure he was comfortable locating the point before he left.

Summary

In the end we were able to assist Herman with his conditions however it was a long and grueling process. In hindsight, if I had stayed with my initial indication that Herman was a Wood CF then perhaps he would have found relief sooner. All is not lost though, as Herman is seeing results and I gained knowledge, experience and had an abundance of personal growth.

Herman is pleased with the results to date although, on occasion, he does experience fatigue and doesn't always feel rested. He has never made such a commitment to focusing on his health like he has in the past several months. Herman continues to utilize the acupoints I have shown him, eats mindfully, is taking vitamins and supplements, has seen a naturopathic doctor and continues with acupressure and massage sessions. He truly is dedicated to improving his health and it has been a pleasure working with him.

Our plan going forward is to do bi-weekly sessions focusing on his fatigue, bi-monthly facial acupressure sessions and seasonal tune-up sessions. Our ultimate goal is to get Herman on a maintenance plan where he will have monthly sessions unless he has a specific issue he wants to focus on.

Lessons Learned

My personal growth from working with Herman has been incredible, too much to summarize here, but I have highlighted a couple of key learnings.

I discovered that I am a perfectionist and I don't like to be wrong and I am extremely hard on myself if I make a mistake. What this case study taught me is that it is ok to make mistakes, in actuality it is beneficial, as this is what provides us learnings to grow. For example: I beat myself up when I realized I was incorrect about Herman's CF and should have gone with my original thoughts. In the end, I was gifted with so many learnings that I otherwise wouldn't have had. This is something I used to do in all facets of my life and now I am working towards a new process of: assessing, deciding, accepting, observing and adjusting – what a novel idea and less stress for sure.

Trusting and utilizing my intuition is another learning. I have always been told my intuition is incredible, however, it is too easy to analyze it, ignore it and rationalize why I shouldn't trust it. Being an accountant who specializes in auditing I am trained to obtain “audit evidence” for everything – intuition doesn't work that way. I am learning to accept and trust that you don't need explanations or evidence for everything, sometimes it just is and that is ok.

In addition, I have developed what I feel is a solid opening and closing to my sessions which includes utilizing **LI4** and **LV3** to start and **KI1** to close.

I would like to thank Herman for allowing me to practice my techniques and for providing me the opportunity to learn and grow both personally and professionally.