

The Twelve Cutaneous Regions

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Abstract

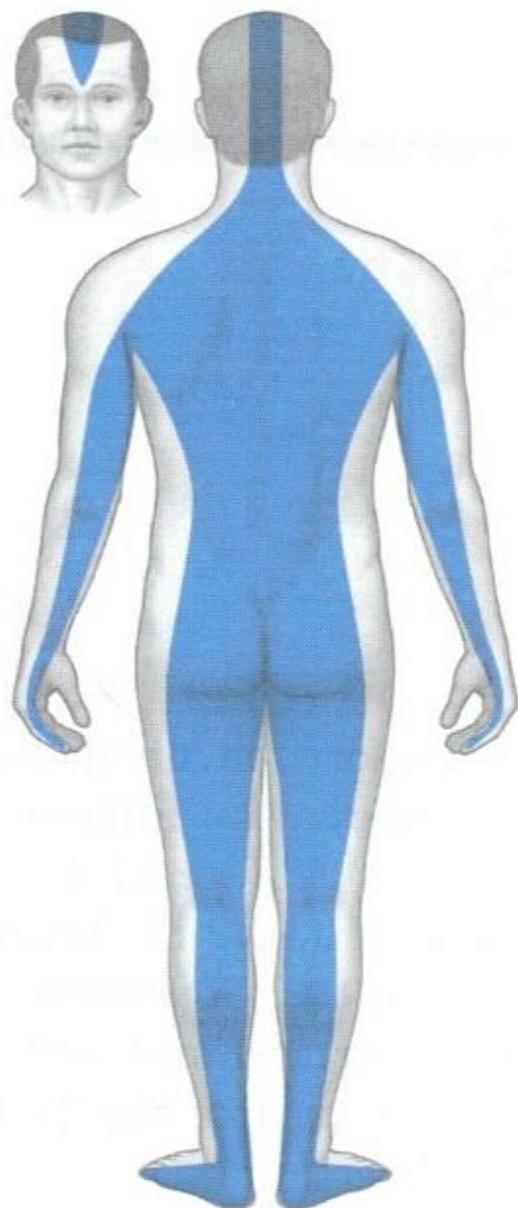
- The cutaneous regions are surface segments on the skin that are projections of the meridians. They function to protect the body and regulate sweating.
- These cutaneous regions are accessed via therapy localization (TL) to the pulse points while the patient is standing. Correction includes adjusting the spine via a specific relationship to the associated point while the patient maintains a cognitive emotional memory.

Introduction

- The cutaneous regions represent the outward manifestations of the primary and superficial connecting channels. They regulate sweating and protect the body from pathogenic factors.
- These superficial energy regions may be accessed via therapy localization to the pulse points while the patient is standing. The associated muscles will manually muscle test (MMT) weak in the clear while the patient is standing only, otherwise in any other postural position they will exhibit dysfunction via the new test and rest procedure (usually a minimum of two to three manual muscle tests).
- The cutaneous region is treated by correcting a subluxation of the spine with utilization of encoded memory technic. This spinal subluxation level is the Lovett brother to the associated point vertebrae, then the Lovett brother to the spondylogenic vertebral association. This vertebrae is manually adjusted while the patient maintains conscious awareness of the attendant emotional memory pattern.

Discussion

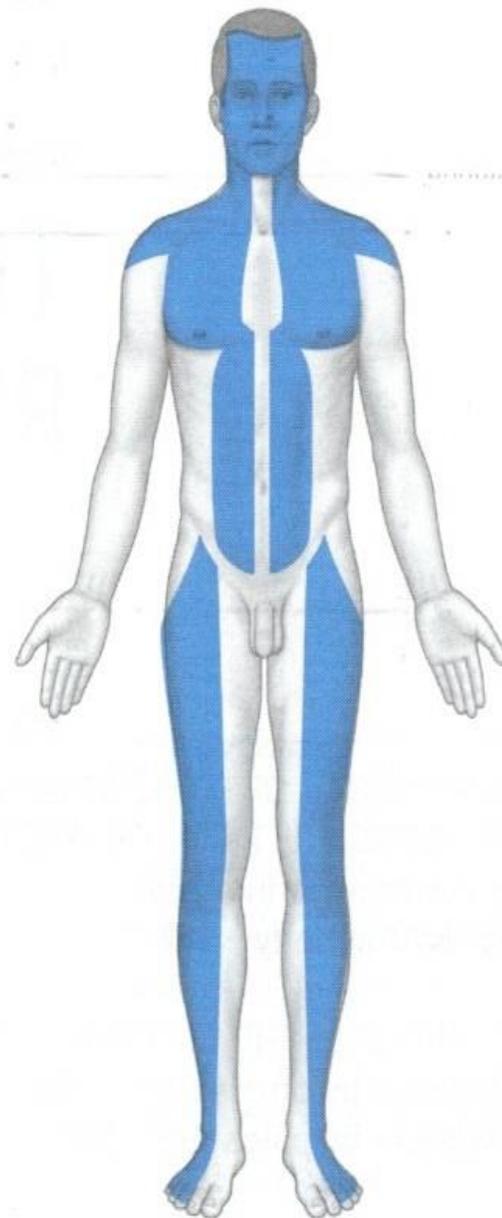
- The meridian system is composed of (from deep to superficial) divergent, extraordinary, deep collateral, primary, muscle, connecting channel proper, superficial connecting channel, and finally the cutaneous channels. The surface of the skin is divided into six longitudinal areas under the influence of the superficial collateral channels and are the outward projection of meridians. These six areas are as follows: greater yang (Figure 1), lesser yang (Figure 2), bright yang (Figure 3), terminal yin (Figure 4), lesser yin (Figure 5), and greater yin (Figure 6).



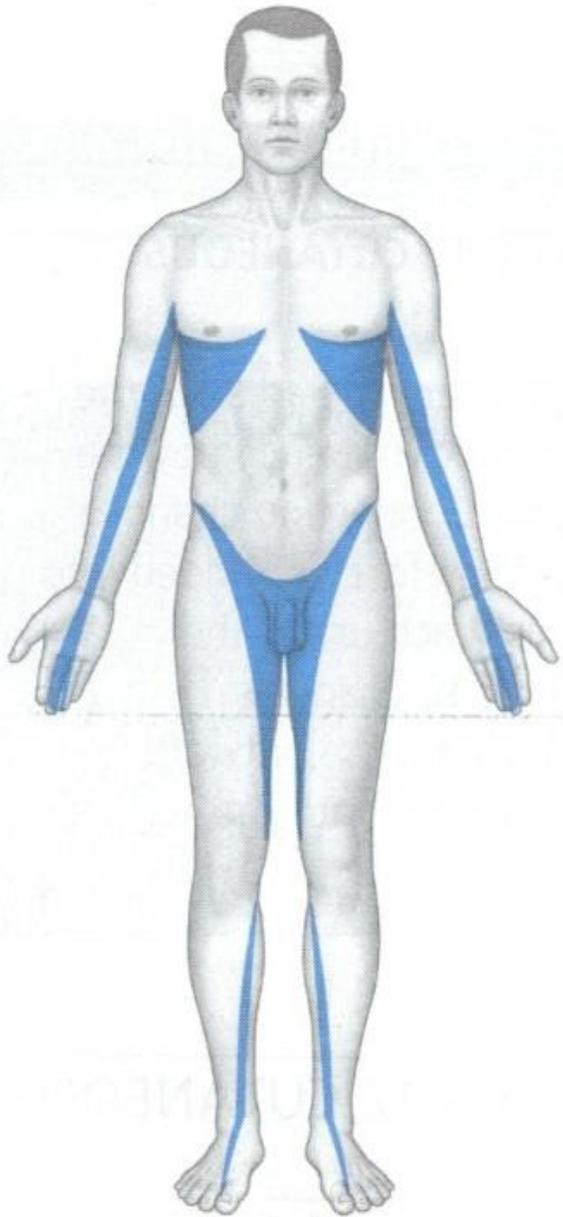
Greater Yang



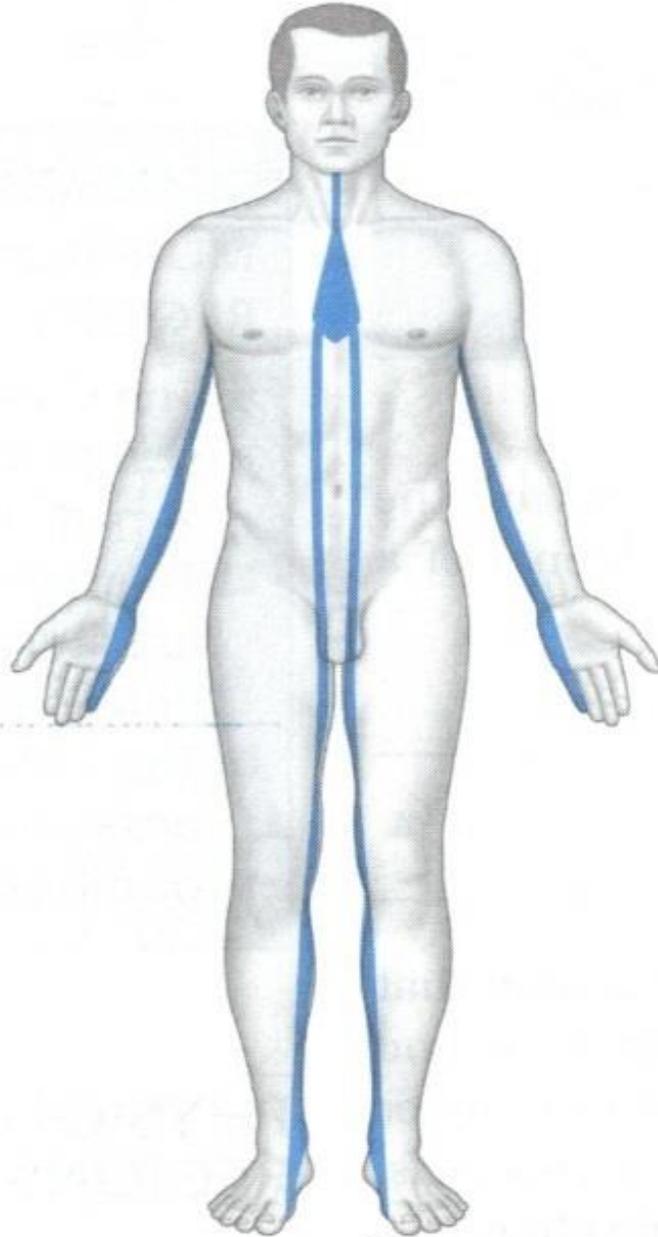
Lesser Yang



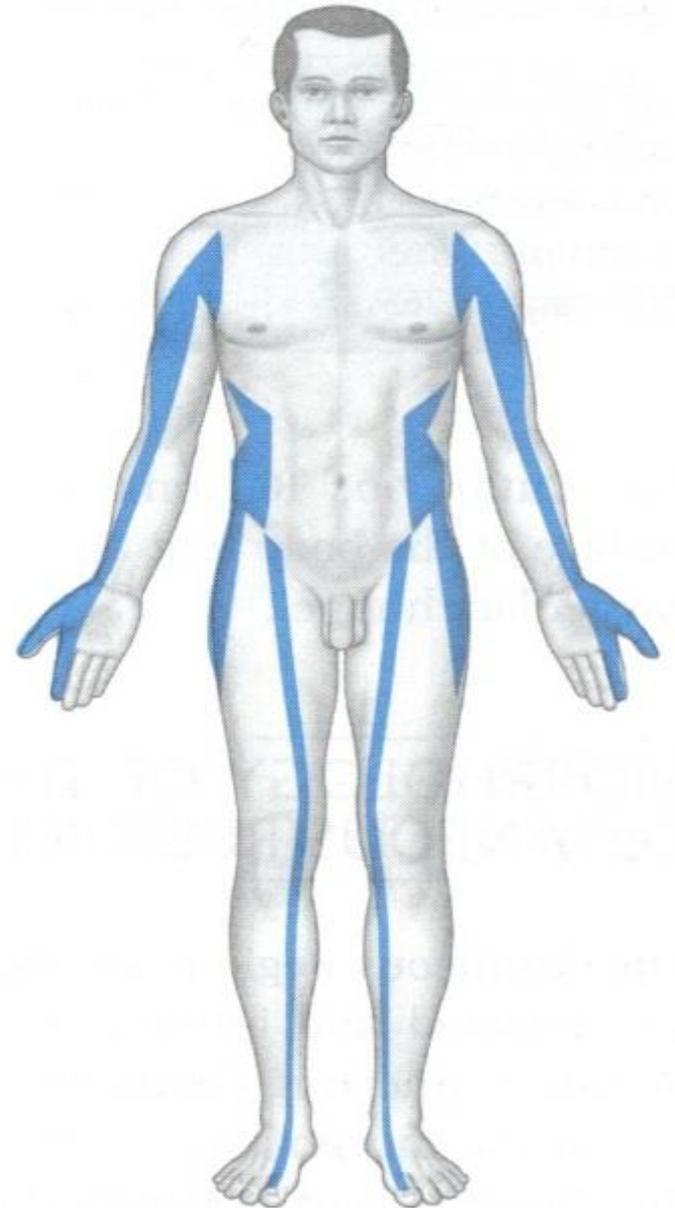
Bright Yang



Terminal Yin



Lesser Yin



Greater Yin

These cutaneous regions protect the body from external pathogenic factors and therefore carry defensive qi; it is the lungs that are responsible for this diffusion of energy. Other areas of penetration may include the nose, throat, stomach, intestines, and uterus. Therefore it is the lungs which control the opening and closing of pores in the skin regulating both sweating and temperature. However regional sweating may be influenced by a specific channel (forehead sweating is controlled by the stomach meridian for example).

Traditional acupuncture diagnosis includes observation and palpation of the skin. The cutaneous regions represent the areas where qi is manifested from the internal organs to the primary meridians onto the collateral channels and to the superficial minute collaterals and finally represented outwardly via the skin. Skin qualities include lustre, moisture, body hair, edema, scales, dryness, texture, color and lesions.

According to Maciocia, “It is due to the relationship between each cutaneous region and its corresponding channel and organ that we can affect and regulate the internal organs.” The cutaneous regions may reflect an inner dysharmony which is treated centrifugally (from the cutaneous to the main to the deep connecting and finally to the internal organs). Treatment in traditional Chinese medicine may include acupuncture, moxibustion, cupping, and massage.

Applied Kinesiology application of diagnosis as developed by this author involves therapy localizing the pulse points in a standing position (they will not TL in other postural positions), then therapy localize the associated alarm point. The affiliated muscle will manually muscle test weak in the clear while the patient is in the standing posture only. If the patient sits for example, then the muscle will display weakness via manual muscle testing by the new test and rest procedure. Test the muscle, then have the patient rest for approximately three to four seconds, and then retest the muscle. It may or may not display weakness until this is repeated several times. Treatment is directed at the appropriate vertebral subluxation. This is the Lovett brother to the associated point vertebrae (not to be adjusted), then the Lovett brother to the spondylogenic vertebral relationship of this vertebrae. For example: suppose the heart-small intestine pulse point therapy localizes only in the standing posture, then TL the alarm points to determine which meridian is involved. In this instance let's assume it is the heart channel alarm point that therapy localizes; the subscapularis will MMT weak in the clear with the patient standing. However if the patient sits or reclines then the subscapularis will only display weakness via the new test and rest protocol. The associated vertebral level for the heart channel is dorsal six, its Lovett brother is dorsal five, dorsal five's spondylogenic vertebral relationship is cervical five, and the Lovett brother to this vertebrae is lumbar one. Manually correct a lumbar one subluxation utilizing encoded memory technic. This will negate the subscapularis dysfunction as well as positive therapy localization to the pulse point and alarm point of the heart channel in the standing posture.

Conclusion

The cutaneous regions are the outward manifestations of the meridians that can be divided into six regions (Figures one to six). These six regions can be influenced by the channels which regulate sweating and protect the body from pathologic factors. These regions are of utmost importance in acupuncture as they are the portal of entry for treatment affecting the main channels and internal organs.

Therapy localizing the pulse points in a standing posture allows access into these six cutaneous regions. Muscle dysfunction will display weakness in the clear only while in the standing posture. The new test and rest procedure will be required to display dysfunction upon MMT in any other posture. Correction of the appropriate vertebral subluxation with encoded memory technic will restore balance and harmony in the affiliated cutaneous region and muscle dysfunction.

Proper utilization of this protocol will correct many visceral, mental-emotional, chemical, and structural faults bringing the patient into a more complete and harmonious balance.

THE MERIDIAN SYSTEMS

A REVIEW

TAIJI



The Great Polarity

FOUR TYPES OF QI

1. Primary

- congenital
- root in kidneys
- functional activities

2. Pectoral

- inhalation and food
- heart and lung

3. Nutrient

- food
- stomach and spleen
- blood and nourishment

4. Defensive

- food
- circulates outside blood vessels

QI QUALITIES

- According to Manaka, “Qi does work, is the result of work done, and is the medium of regulation.” Qi therefore equals information!
- . Information refers to both energy and matter and yet it is neither. It is any pattern of events in time and space that is a measure of order in a system.
- Order is a degree of structure in a system
- An open system is a system which exchanges information with its environment.

The basic function of acupuncture is to balance Qi.

Qi of the body is either :

1. Yang – Moving and warming
2. Yin – Nourishing and moistening

. If the balance between Yin/Yang is not maintained resulting in excess or deficiency then disease is produced.

. According to the Miraculous Pivot, “so important are the meridians and collaterals which determine life and death in the treatment of all diseases and the regulation of deficiency and excess conditions that one must gain a thorough understanding of them.”

“Nutrient Qi flows inside the meridians and defensive Qi flows outside the meridians, making the interior/exterior, upper/lower, right/left sides of the body in harmony and equilibrium.

Therefore the entire meridian system serves as a series of barriers to prevent penetration of pathogenic factors.

“The key point in acupuncture treatment is to know how to regulate Yin and Yang “and “acupuncture treatment must aim at regulating the flow of Qi,”
Miraculous Pivot

THE FIFTEEN COLLATERALS

Balance: Yin/Yang in Limbs

Yin/Yang for Right/Left sides of body

Yin/Yang to the Interior/Exterior of body

Yin/Yang to and from the head

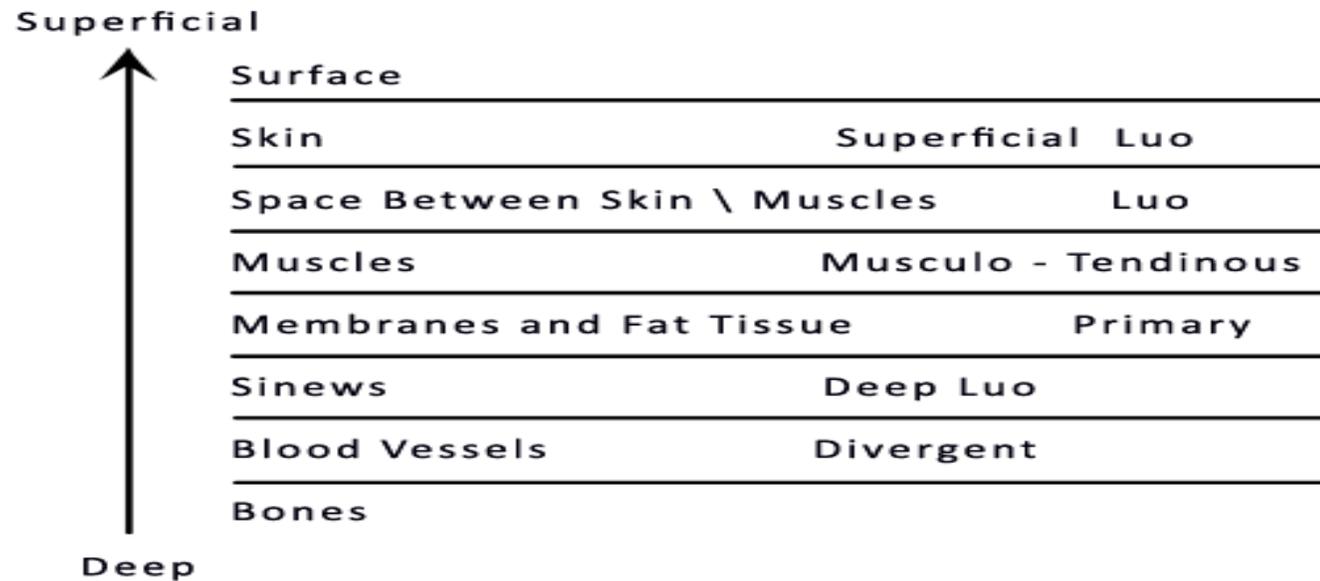
Change polarity below elbows/knees

The fifteen collaterals are like a net covering the entire surface of the body

They cannot penetrate the large joints

ENERGETIC LAYERS

Figure 16



COLLATERAL PROCEDURE

Applied Kinesiology protocol utilizes therapy localization to the pulse points while wearing the associated color lens via the five element correlations. The associated muscle(s) will manually muscle test (mmt) weak in the clear only while wearing the appropriate lens. Without the lens the muscle dysfunction displays weakness via pincer palpation procedure. Correction of the appropriate elbow, knee, or atlas subluxation will negate the muscle dysfunction and positive therapy localization to the pulse points with the color lens being worn.

The Fifteen Collateral Meridians may be accessed via therapy localization to the four pulse points while the patient is wearing the affiliated color lenses according to five element correlations (with the exception of the metal element and meridians associated to the fourth distal pulse point; those color correlations are violet and indigo respectively). The muscles correlated to the collateral meridians will manually muscle test weak while the patient is wearing the specific five element color lens; otherwise with the lenses removed the muscles display muscle testing weakness via pincer palpation protocol.

Correction of an elbow subluxation for the yin/yang upper extremity collateral meridians, or correction of a knee subluxation for the yin/yang lower extremity connecting channels, or correction of an atlas subluxation for the two midline/great spleen collateral channels while the patient wears the affiliated color lenses will restore yin/yang balance in the collateral channel system as well as eliminating the myofascial gelosis patterns. This helps to restore harmony and equilibrium to the body and mind of the patient.

THE MUSCLE CHANNELS

Function to protect from trauma

Maintain position of bones

Body movement

Movement of qi – (internal < > external)

Do not connect with the internal organs –
however the internal organs affect the muscle
channels

The muscle channels may be accessed via therapy localization to the pulse points in a gait position. The muscles related to the muscle channel will not manual muscle test weak in the clear, but will weaken upon repeated muscle testing. Therapy localization to the spondylogenic vertebrae of the Lovett brother to the associated point vertebrae along with cross T.L. to the emotional neurovasculars for application of the encoded memory technic and correction of the subluxation in this manner will re-establish homeostasis in the muscle channel system.

PRIMARY CHANNELS

IN THE BODY

Yin

Body Interior

Chest

Abdomen

Female

Dirty Fluid

Cloudy Fluid

Solid

Inner

Soft

Plain

Parasympathetic

Right

Yang

Body Surface

Spine

Back

Male

Clean Fluid

Clear Fluid

Hollow

Outer

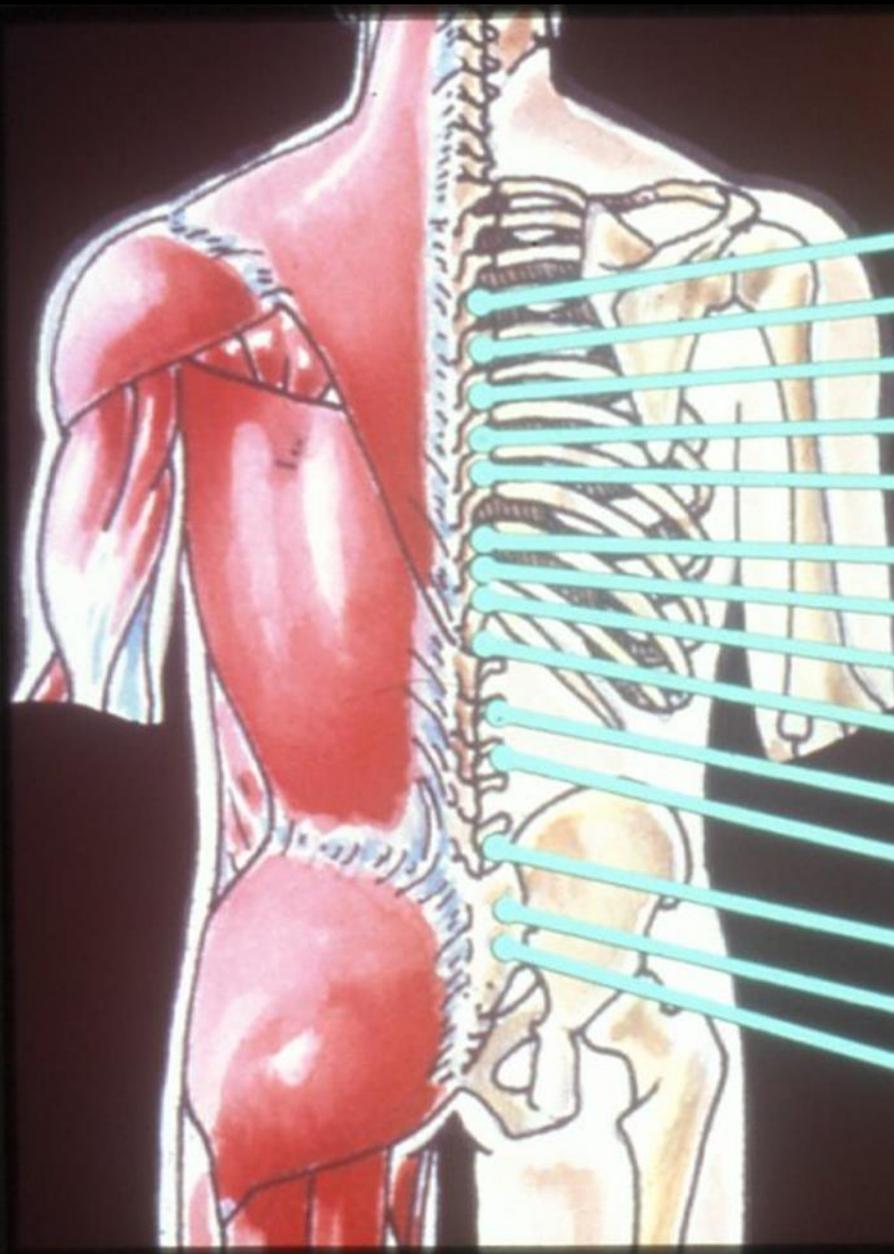
Hard

Splendorous

Sympathetic

Left

Associated Points



B13 LU

B14 CX

B15 H

B16 GV

B17 CV

B18 LV

B19 GB

B20 SP

B21 ST

B22 TH

B23 K

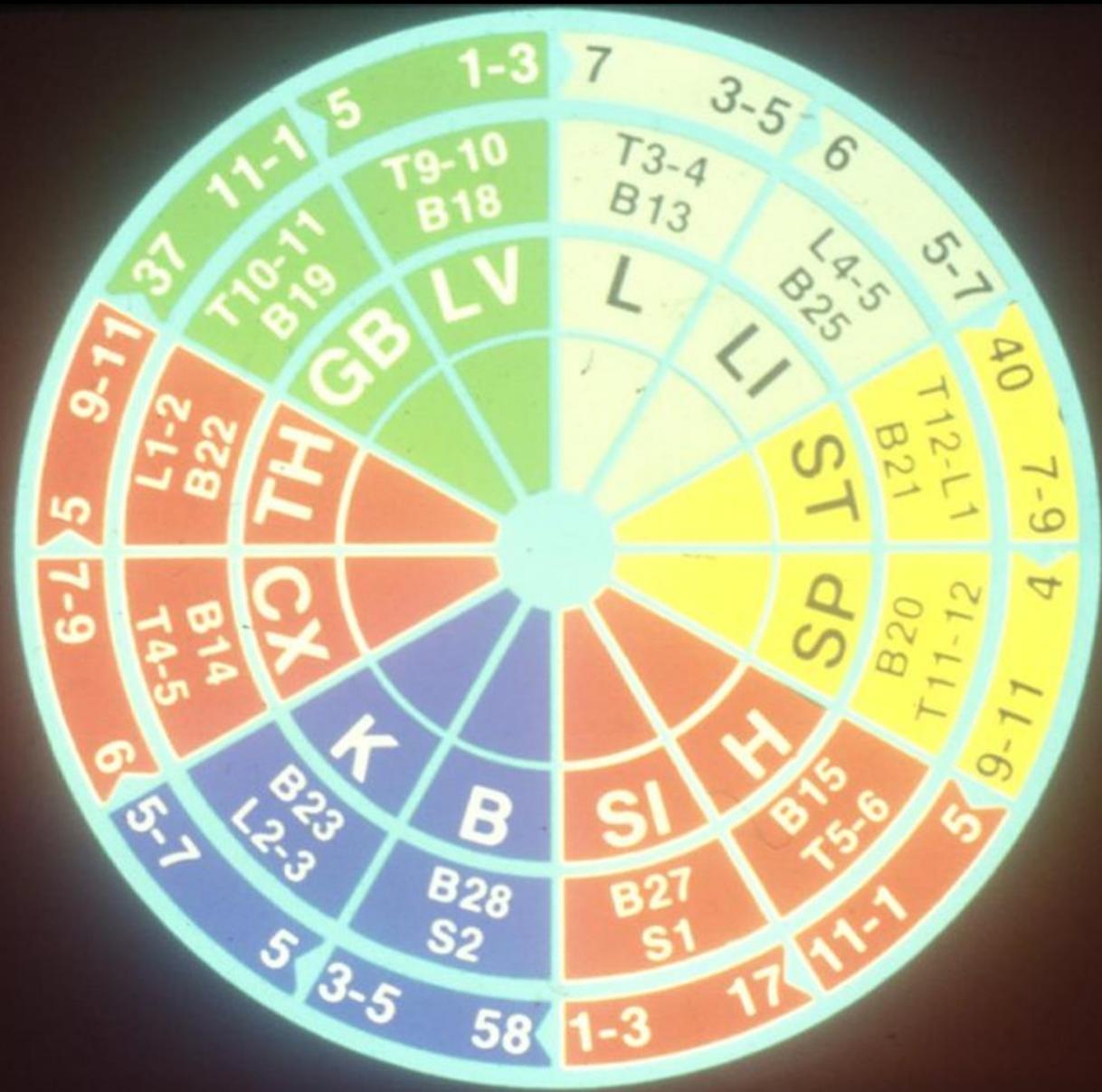
B25 LI

B27 SI

B28 B

**Manipulation and
other treatments
accompanied ancient
Chinese treatment.**





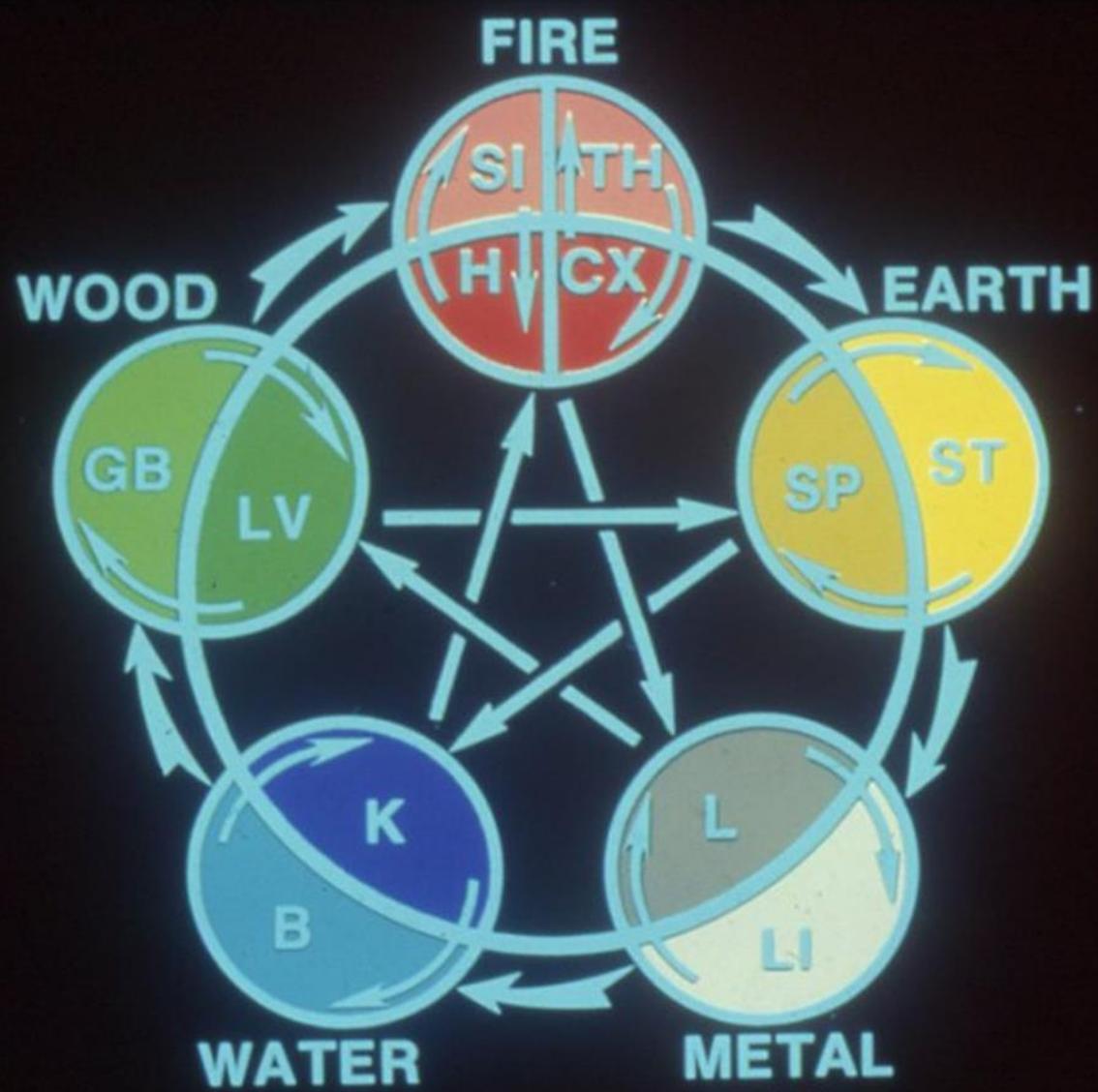


CHART OF COMMAND POINTS¹

Meridian	Wood Point	Fire Point	Earth Point	Metal Point	Water Point	Luo Point	Source Point
Lung	11	10	9	8	5	7	9
Large Intestine	3	5	11	1	2	6	4
Stomach	43	41	36	45	44	40	42
Spleen	1	2	3	5	9	4	3
Heart	9	8	7	4	3	5	7
Small Intestine	3	5	8	1	2	7	4
Bladder	65	60	54	67	66	58	64
Kidney	1	2	3	7	10	4	3
Circulation Sex	9	8	7	5	3	6	7
Triple Heater	3	6	10	1	2	5	4
Gall Bladder	41	38	34	44	43	37	40
Liver	1	2	3	4	8	5	3

EXTRAORDINARY CHANNELS

- The term extraordinary implies something wonderful, exceptional, rare, and unusual. It is considered in acupuncture that the extraordinary vessels are more primary than the twelve regular meridians. They are responsible for controlling, joining, storing, and regulating the Qi of the meridians.
- Access to the eight extraordinary vessels is obtained by therapy localizing the pulse points with lateral flexion or rotation of the spine. The muscles related to the eight pulse points will display weakness via manual muscle testing only after they are stretched; that is a need for fascial flush. The structural corrections relate primarily to the spinal dural attachment areas and pelvic categories one and three.

The du mai is the source of yang, ren mai is the source of yin, the chong mai is the source of the twelve regular meridians according to Li Shi Zhen.

These extraordinary vessels are family to the formative energies of the body and are consequently at a deeper energetic level than the twelve regular meridians.

Problems of the energetic center (ming men) are root problems, problems that arise in the meridians are symptomatic.

The foundation of tradition in acupuncture is that great physicians treat root problems before symptomatic problems.

The root of all the body's energetic systems focus at ming men.

PRIMORDIAL DYNAMICS

Figure 1

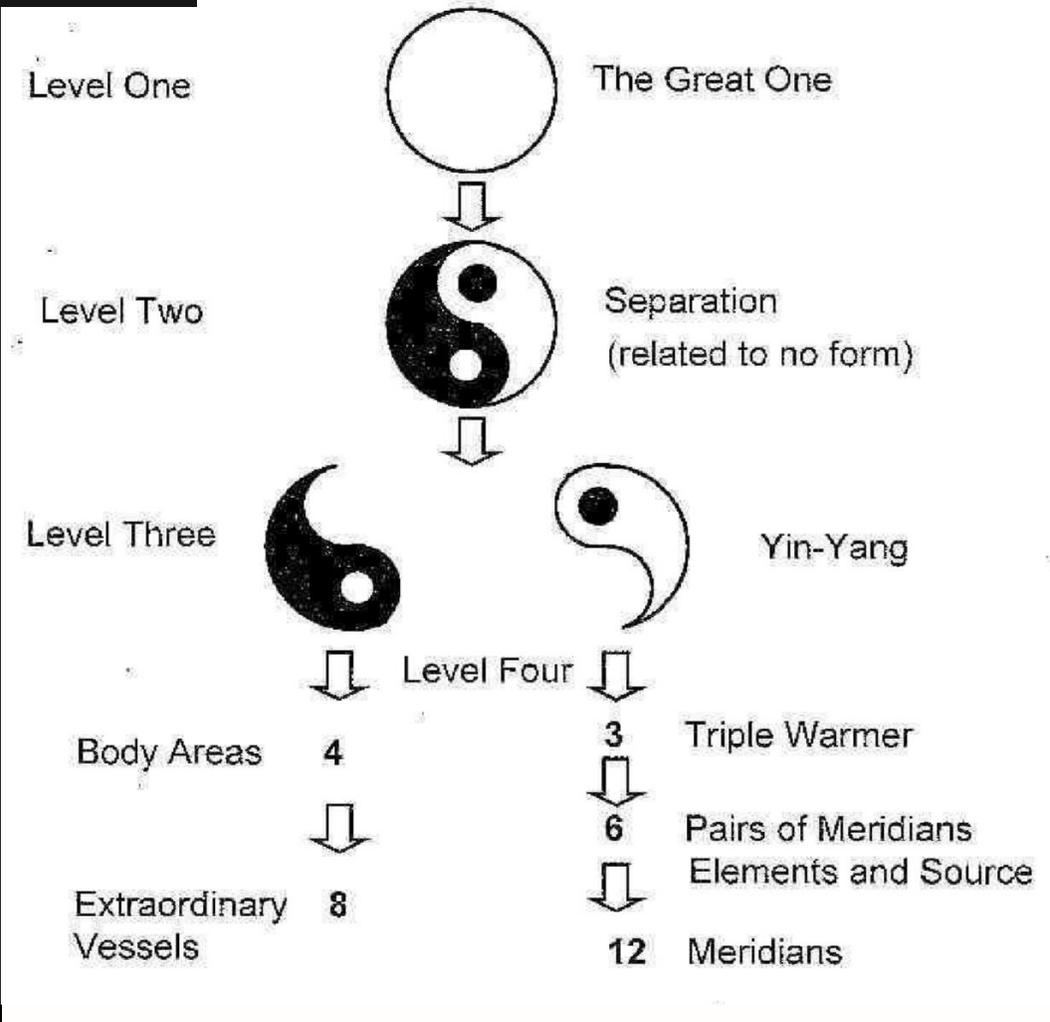
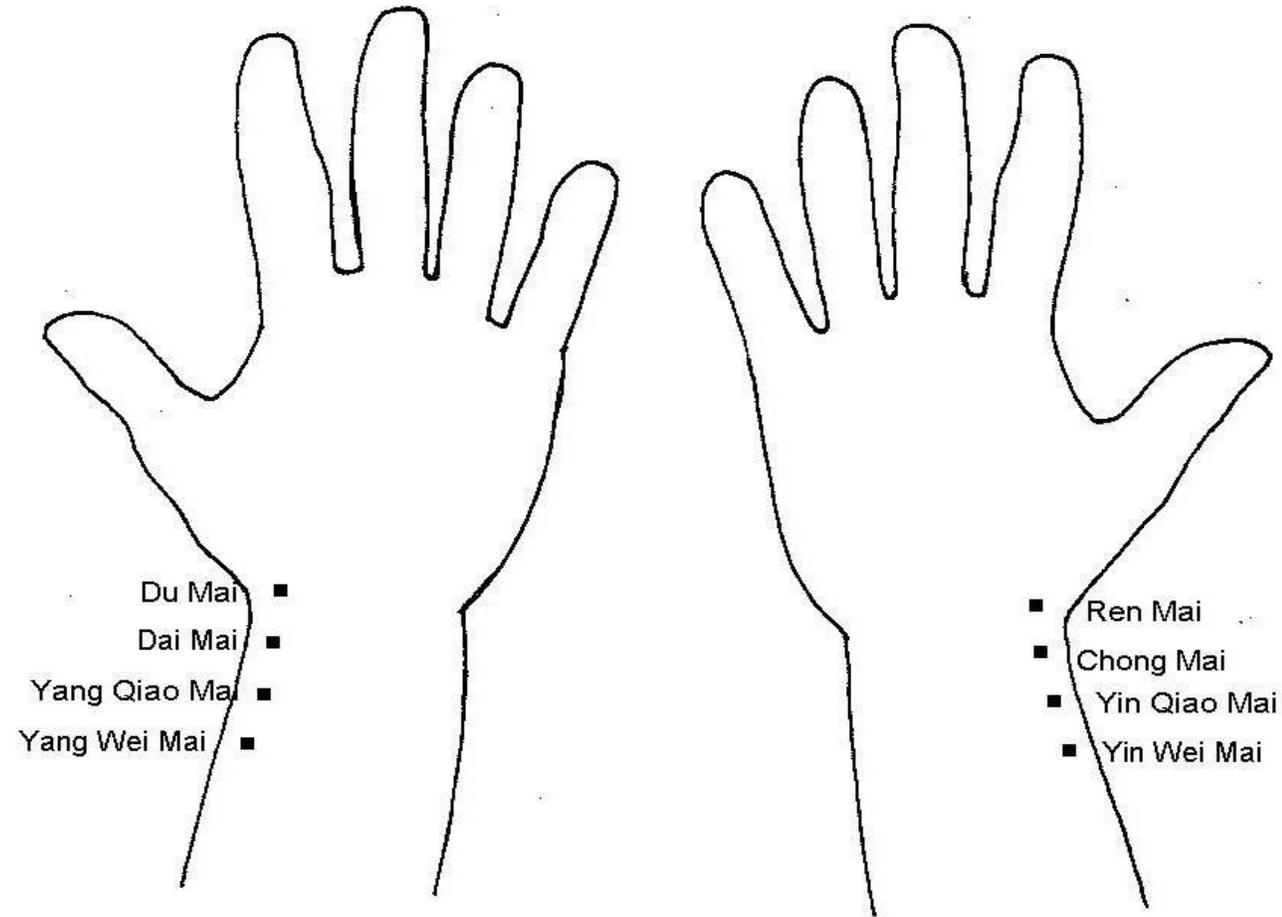


Figure 13

Extraordinary Meridian Pulse Points



“Extraordinary meridians are fields within fields that are capable of changing both the distribution and quality of energy used in the body and changing the signals that control the use of that energy.” (Matsumoto and Birch)

The energy transfer is of a qualitative and informational nature known as sayoshi. This is based on the knowledge that all energy begins in the center at ming men (the moving Qi between the kidneys), and it is not possible to distinguish the energetic structure from the material structure of the body.

These eight extraordinary meridians are related to the pulse points as yin on the right wrist and yang on the left wrist which only therapy localize while maintaining lateral flexion or rotation of the spine.

The observed phenomena (muscle stretch reaction) will only display for approximately three minutes after therapy localization.

The combination of structural correction (at the dural attachments of the spine) with emotional (encoded memory technique with associated mineral insalivation) and biochemical supplementation provide an effective holographic approach.

THE DIVERGENT MERIDIANS

Therapy localization (T.L.) to the pulse points while turning the head will allow communication with the divergent meridians since they all emerge at the cervical spine where they join their associated main channel

They balance yin/yang in the interior and internal organs as well as strengthening the connection between yin and yang. The classical twelve divergent channels are paired to form what is known as the six confluences.

The divergent meridians run deeper than the primary channels and govern the inside of the body. The Yang divergent meridians depart from their respective primary channel, enter the Yang organ (and sometimes the associated Yin organ) after which they emerge at the neck joining their related primary channel. The Yin divergent meridians separate from their respective Yin primary channel with half connecting to their associated Zang organ, and then joining the related Yang primary channel at the neck. Therefore all divergent meridians connect with the Yang primary channels and emerge at the neck.

The muscle/meridian associations are identical to the original descriptions by Dr. Goodheart except that most of the time the muscles will not test weak in the clear but will exhibit repeated muscle activation patient induced (RMAPI) weakness, that is, they will test weak after the patient contracts the muscle ten times. In addition, all the muscles related to both the Yin/Yang meridians will display this weakness pattern based on the particular pulse point therapy localization.

“ The miasm is defined as a taint or stigmata, either inherited or acquired, which permeates every cell in the body and is then passed on genetically to each succeeding generation” and further “Thus, these chronic diseases lie dormant in the body – are susceptible – and can be activated according to our sensitivity. Miasms may be treated homeopathically with high or very high potencies to act upon the genetic code.” Dr. Trevor Cook

It is also now understood that miasms may be acquired via allopathic medication, blood transfusions, and vaccinations.

Chronic miasmatic diseases originally included three; sycotic (gonorrhoea), syphilitic, and psoric. A fourth miasm credited to both A. Nebel and H.C. Allen is known as tuberculinic. New miasms include both oncotic (carcinosis and/or schirrhinum) and vaccininum.

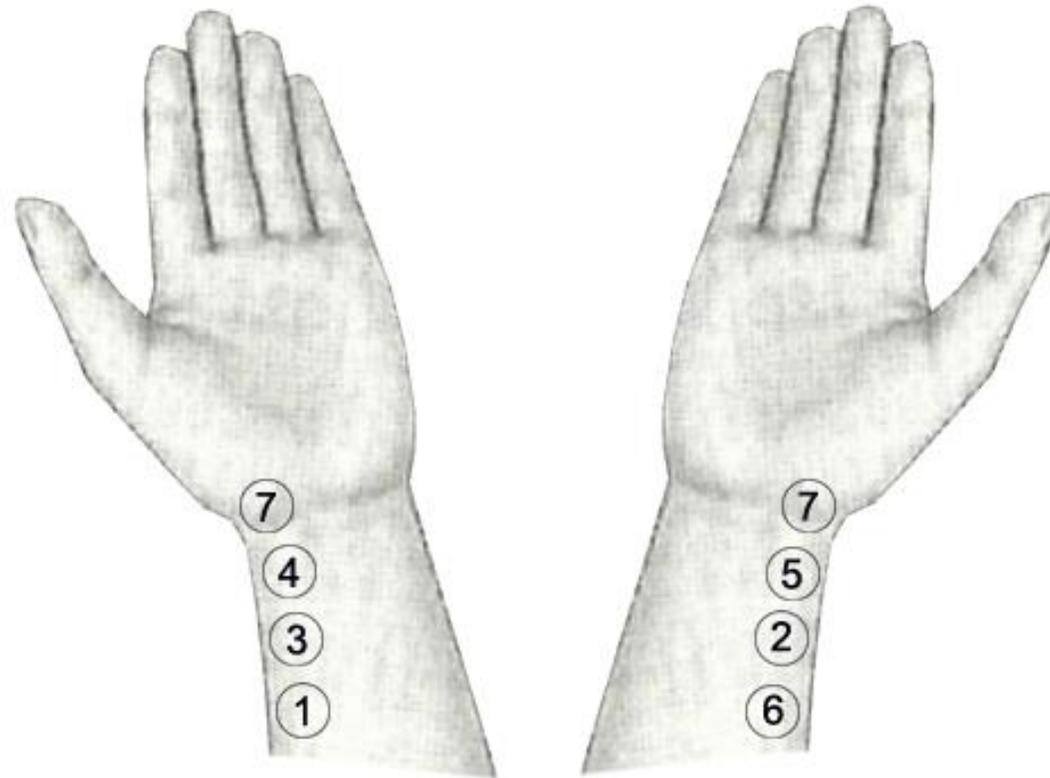
Nosodes are homeopathically prepared remedies from diseased products. The pulse point therapy localization with head turn will be negated by the appropriate miasmatic-nosode remedy.

Nosode as defined by Yasgur's Homeopathic Dictionary is "The potentized homeopathic remedy prepared from diseased tissue or the product of disease. It can be used to prevent or treat a miasm, as well as for many other uses." Nosodes are the most important category according to Dr. Trevor Cook.

Constantine Herring was the architect of homeopathy in North America and founded The American Institute of Homeopathy in 1835 which is the oldest medical professional association in America. He was the first to suggest the use of nosodes. He also laid down Herring's Laws of Cure which states that healing occurs from above downwards, from within outwards, and from the most important organs to lesser important and in the reverse order of their appearance.

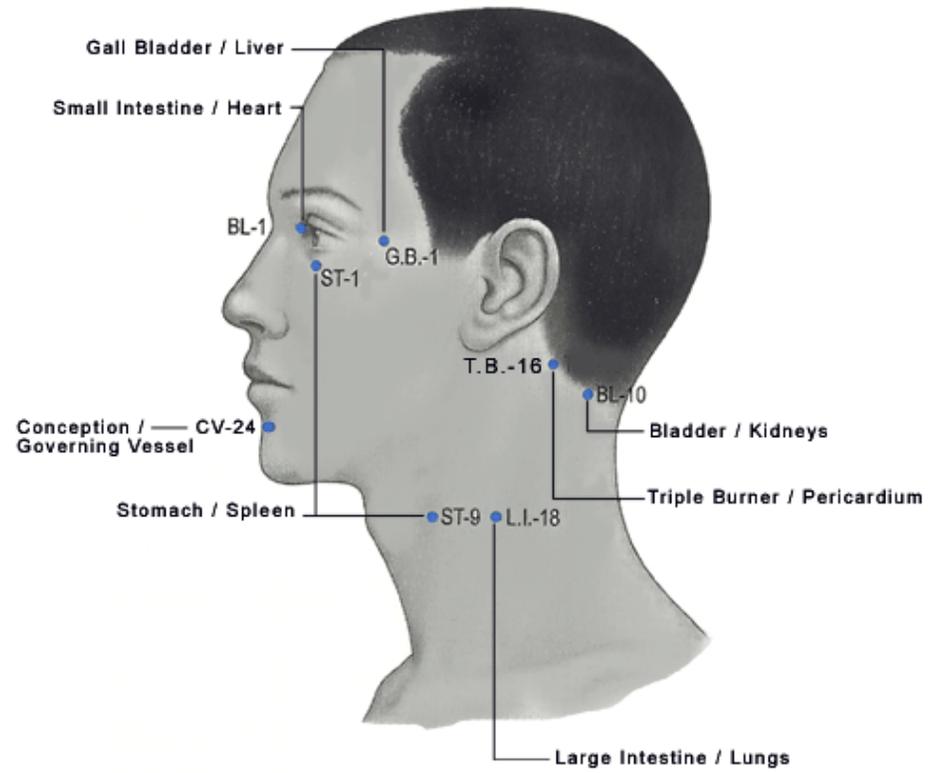
. According to Trevor Cook, “Putting it very simply this may be viewed as the induced similar symptoms of the artificial disease being superimposed momentarily over the symptoms of the natural disease before mutual elimination-the law of similars in action.”

Figure 15



1. Tuberculinum (Kidney \ Bladder)
2. Medorrhinum (Spleen \ Stomach)
3. Carcinosis (Liver \ Gall Bladder)
4. Psorinum (Heart \ Small Intestine)
5. Syphilinum (Lung \ Large Intestine)
6. Vaccinum (Pericardium \ Triple Burner)
7. Scirrhinum (Conception \ Governing Vessel)

Figure 2



THE CRANIAL CHANNELS?

- THERAPY LOCALIZE PULSE POINTS – NEGATIVE
- THERAPY LOCALIZE ADENOID REFLEX – NEGATIVE
- THERAPY LOCALIZE PULSE POINTS AND ADENOID REFLEX – POSITIVE
- THERAPY LOCALIZE ALARM POINT AND ADENOID REFLEX – POSITIVE
- AFFILIATED MUSCLES WILL DISPLAY WEAKNESS VIA STRAIN/COUNTER STRAIN
- CORRECT EITHER A GLABELLA OR A UNIVERSAL CRANIAL FAULT
- REMOVES MOST DURAL TORQUE PATTERNS

Glabella Breathing Pattern

**Associated indicator muscle
weakens on deep nasal or
oral inspiration held.**

**No weakening on opposite
phase of respiration.**

Glabella — 1st Step



**Press Together Or As
Indicated By Challenge**

Universal Fault Breathing Pattern

**Associated strong indicator muscle
weakens with deep inspiration
through one nostril.**

**Muscle weak from the fault will
strengthen when breath through
same nostril is held.**



Universal Cranial Fault

**With Normal
Respiration
Opposite
Challenge
Weakening IM**

The Fitness of Human Nature

Human nature is the epigenetic rules that bias cultural evolution in any one given direction. It is the summation of individual's most basic beliefs that determine our attitude towards each other.

If our basic belief systems (thoughts) are in essence reversed, then our response to environmental stimuli will also be switched.

Umbilical reversal (UR) was first introduced by John Diamond, M.D. If the individual tested positive for UR then all his/her basic belief systems were switched. That is, love is reversed to hate, good for bad, etc. This is very profound since a mother's perceptions directly impact the selection of gene programs, which have been established to effect subsequent generations altering the phenotype. The future for human civilization may be viewed as the archaeology of these fractal patterns

THE UMBILICUS TEST

- The umbilicus test (John Diamond, M.D.) is performed by testing a subject's strong indicator muscle, placing his/her right fingers into his/her umbilicus, which should test negative. The doctor's left hand's fingers when placed into the subject's umbilicus should also test negative. The subject's right palm is placed on the doctor's left palm which should also test negative. A positive umbilicus test is with the test subject's right palm on the doctor's left palm up with his/her fingers inserted into the umbilicus of the test individual and a strong indicator muscle weakens.

EPIGENETIC RULES

- This is very profound since culture is created by the communal mind. The mind grows by absorbing parts of the culture from birth to death with selections guided by the epigenetic rules. These rules then display in the species via prepared learning, meaning they are predisposed to learn certain behaviors while prepared to avoid others. This bias forms a subclass of the epigenetic rules.
- So what happens if our most basic reference points are reversed? In what direction will the ship of humanity sail? Primary epigenetic rules are automatic processes that extend from the filtering of stimuli to perception of same. Secondary epigenetic rule are the integration of this information. Culture arises from human action, and human action arises from culture. Construction of the environment is what culture does by the summation of individual behavior. Moral concepts are defined from innate feeling. Insanity is the inability to choose among false alternatives

BASIC POINTS OF REFERENCE

- Brains that choose wisely display superior fitness and a high biological imperative. This fundamental drive for survival will depend on the function of dynamical systems that are adaptive to environmental stimuli and capable of choosing wisely to accommodate to change in one's own arena of life.
- However, if our most basic points of reference are reversed involving money, love, prejudice, and addictions; the ability to choose wisely is not possible. This analog response is what occurs when an individual has umbilical reversal. Umbilical reversal involves all emotional beliefs and includes the two ways humans learn: reason and revelation

HOMEOPATHIC MEDICINES

- Three muscles will always test weak in these individuals; pectoralis major clavicular, supraspinatus, and the abdominals tested as a group.
- Four homeopathic medicines in a potency of 1M each, not to be administered at the same time, but usually waiting a six month period between doses seems to treat deeply enough to effect a cure. These four remedies are (not in order necessarily of prescription) Anthemis Nobilis, Spiraea Ulmaria, X-Ray, and Zincum Muriaticum.

GOVERNING VESSEL/CONCEPTION VESSEL

- Many times a patient is highly suspect to have umbilical reversal and yet upon testing this is not found.
- Additional research revealed that if the subject therapy localized (TL) the governing vessel/conception vessel pulse point, with flexion (females) or extension (males) then a positive TL would occur. This could be negated by the wearing of violet colored glasses indicating the involvement of the negative feelings of guilt and/or shame. After positive TL to the fourth pulse point in flexion or extension, then a positive umbilicus test would display in the clear. The feelings of guilt and/or shame appears to cause a covert umbilical reversal which is brought to the surface with this additional procedure.

CONCLUSION

- The fitness of human nature which in essence is instinct that is evoked by environmental cues and is controlled by prepared learning creates human action which directs culture either into growth (love) or repulsion (hate) is dependent upon reference points (basic beliefs). If these basic beliefs are reversed, then bias free learning and hence appropriate life enhancing responses are not possible. Emotion driven epigenetic rules involving all categories of behavior under the combined influence of heredity and environment operate innately from the summation of individual intention which if umbilically reversed works against the best interests of society.