The Normal Pulse (The Healthy Person’s Pulse) P247

Stomach Ki Pulse

The presence of a Stomach ki pulse is considered a normal pulse. A Stomach ki pulse refers to a (1) pulse that is supple and soft. A floating pulse, for instance, should have a softness that is peculiar to a floating pulse.

Moreover, (2) a soft pulse that does not incline toward either floating or sinking, slow or rapid, or deficient or excess is considered to have Stomach ki. Stomach ki is judged to be bountiful if there (3) is a large depth to the pulse between the superficial level and the deep level.

These are the three methods for evaluating the Stomach ki pulse. If by any of these methods Stomach ki is found to be lacking, that person is judged as having weak life energy and little natural healing ability. The prognosis of a patient with a serious illness is judged by the amount of Stomach ki. Moreover, a treatment should be considered successful if, after the treatment the pulse shows an improvement in Stomach ki.

Seasonal Pulses

A spring pulse is soggy-weak and long, and is also called wiry-like. A summer pulse is said to arise with a sudden surge and then slowly taper off. Such a pulse is called a flooding, hook pulse. It is best to have a slow-moderate pulse during midsummer. An autumn pulse is lightly deficient and floating, and so is likened to a hair. A winter pulse is sinking, soggy, and slippery, and is likened to a stone.

The Normal Pulses of the Five Zang Organs P249

According to chapter four of the Nan Jing,

the Lung shows a floating, choppy, and short pulse,
the Heart shows a floating, large, and scattered pulse,
the Spleen shows a moderate and large pulse, or thin, sinking, choppy
the Liver shows a wiry and long pulse or a sinking, firm, and long pulse, and
the Kidney shows a sinking, soggy, and excess pulse or a sinking, soggy, and slippery pulse.

Normal Pulses of the Individual

Child and Adult

Pulse of the corpulent and Slender
(1) **Pulse Comparison Method (Introductory)** P241

<table>
<thead>
<tr>
<th>Liver Deficiency Pattern</th>
<th>Spleen Deficiency Pattern</th>
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</thead>
<tbody>
<tr>
<td><strong>Left</strong></td>
<td><strong>Right</strong></td>
</tr>
<tr>
<td>Distal</td>
<td></td>
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<tr>
<td>○ Middle</td>
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<td>○ Proximal</td>
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<th>Lung Deficiency Pattern</th>
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<tr>
<td>Proximal ○</td>
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</tbody>
</table>

(2) **Eight Basic Pulses Diagnosis (Intermediate)** P243

| Pulses in the Floating Category | floating, hollow, large |
| Pulses in the Sinking Category | sinking, hidden, thin |
| Pulses in the Slow Category | slow, moderate |
| Pulses in the Rapid Category | rapid, moving |
| Pulses in the Deficient Category | deficient, hollow, minute, thin, soft, weak |
| Pulses in the Excess Category | excess, flooding; and slippery, wiry, and tight pulses that are powerful |
| Pulses in the Choppy Category | Not smooth, and seems to stumble along. Thin and slow, scatter, interrupted |
| Pulses in the Slippery Category | smooth and seems to roll along nicely rapid |

It must be stressed that the terms floating and sinking, slow and rapid, and deficient and excess, choppy and slippery have slightly different meanings when they are used to refer to the basic pulses and when describing the pulse qualities.
For instance, a deficient pulse in the sense of a basic pulse includes all the pulse qualities that fall in the deficient pulse category. A weak pulse in the pulse-strength comparison diagnosis should be thought of as the same as a deficient pulse in terms of the six basic pulses. However, a deficient pulse in the sense of pulse qualities is a narrower concept related to specific pathology.

Accordingly, it is necessary to master the pulse qualities in order to have a detailed understanding of pathology. But it is still important to classify pulses according to the six or eight basic pulses, as this will help you decide which techniques are appropriate to use to treat the pattern of imbalance that you diagnosed by finding the weakest pulse using the pulse-strength comparison technique.

Following is a list of the general pathology that can be gathered from the basic pulses, and the associated tonification and dispersion techniques. Note, however, that since all diagnoses and their corresponding treatment methods are based first of all on deficiency and excess, the other four basic pulses should be understood in combination with deficiency and excess. Therefore, even though deficiency and excess are listed individually as two of the six-basic pulses, they are given below in conjunction with the other basic pulses.

①The Floating Basic Pulse
Pathology:
The floating basic pulse appears when a lot of ki gathers in the yang meridians. The pathology can vary, but a floating and excess pulse is caused by external pathogenic influences and a floating and deficient pulse is caused by yin deficiency (i.e. blood or fluid deficiency).
Tonification & Dispersion:
Principally tonify with shallow insertion. If the pulse is floating and excess, the yang channels could be dispersed after tonifying the yin channels. If the pulse is floating and deficient, either only tonify the yin channels, or sometimes tonify the yang channels as well.

②Sinking Basic Pulse
Pathology:
The sinking basic pulse appears when there is a lot of ki in the yin channels or organs. The pathology can vary, but a sinking and excess pulse indicates blood and heat stagnation. A sinking and deficient pulse indicates an excess of water, or a lack of yang ki with an abundance of cold.
Tonification & Dispersion:
Principally use slightly deep insertion. However, if the pulse is sinking and deficient, both the yin and yang channels must be tonified with shallow insertion. The yin channels can be dispersed if the pulse is sinking and excess.
③ Slow Basic Pulse
Pathology:
The slow basic pulse appears when there is chronic chilling that has extended to the blood. A slow and excess pulse indicates blood stagnation. A slow and deficient pulse indicates chilling and water stagnation.
Tonification & Dispersion:
Principally use retaining needles with slow insertion. However, if the pulse is slow and excess, retain the needle a little deeper. When the pulse is slow and deficient it is necessary to tonify for a long time or tonify with moxibustion.

④ Rapid Basic Pulse
Pathology:
The rapid basic pulse appears when there is heat. When the pulse is rapid and excess the heat is stagnated somewhere in the body. Blood and fluids are deficient if the pulse is rapid and deficient.
Tonification & Dispersion:
Principally use the rapid insertion and removal needling technique in order to reduce the heat. However, focus on tonification if the pulse is rapid and deficient.

Slippery Pulse
Quality:
A slippery pulse is smooth and seems to roll along nicely. It resembles a rapid pulse. The name slippery was used to invoke the image of traffic flowing along smoothly, in the sense of gliding. It does not incline toward floating or sinking, slow or fast, nor deficient or excess. However, it is more likely than not to appear along with a rapid pulse or an excess pulse.
Pathology:
A slippery pulse appears when the influence of heat reaches all the way to the blood, the heat being produced when yang ki becomes bottled up due to mucus and food trapped in the stomach. Or, it is also common in people who naturally have a lot of blood.
These days it is frequently seen among people with hypertension. If the patient does not have high blood pressure, it should be considered that heat is trapped somewhere in the body.
Needling:
After tonifying yin, apply a slightly long dispersion in the area that has the heat.

Choppy Pulse
Quality:
A choppy pulse is thin and slow. The pulsation is not smooth, and seems to stumble
It can also feel scattered, or sometimes interrupted. The choppy pulse is opposit the slippery pulse. Here as well, the word choppy was used to invoke the image of difficulty in the flow of traffic.

**Pathology:**

A choppy pulse appears when there is a deficiency and stagnation of ki, or when there is blood stasis due to ki deficiency.

Ki deficiency is common when there is a choppy pulse in the right distal position, and Liver excess is common when there is a choppy pulse in the left middle position.

**Needling:**

- Tonify ki, and give dispersion if there is any blood stagnation.

### (3) Pulse-Quality Diagnosis (Advanced)  P245

By using the six or eight basic pulses it is possible to make rough classifications of the pulses. But each of the six basic or eight pulses has a variety of different pulses that fall within its range of description. Therefore, the pulse-quality diagnosis is used to make further classifications within each of the six or eight basic pulse categories. Detailed explanations about each pulse quality will be given later, so here we will just mention the significance of differentiating pulse qualities.

1. Knowing the pulse qualities presented by a patient enables you to understand in greater detail the location of disease, etiology, pathology, and the pattern of imbalance, and makes it easier to comprehend the clinical conditions of the disease.
2. When you understand the location of disease, etiology, pathology, and the pattern of imbalance, you will be able to appropriately employ various kinds of techniques, lessen mistreatments, and speed healing time.
3. Misdiagnoses of patterns of imbalance that were undeterminable by the pulse-strength because of multiple deficiencies can be avoided by considering the pathology in terms of the pulse qualities.

### (4) Pulse-Position/Pulse-Quality Diagnosis (Most Advanced)  P246

In his book *The Essence of Acupuncture Treatment*, Okabe Sodō made the following statement after his discussion of material up until what is referred to in this book as the six basic pulses diagnosis.

Even if the six-position pulse diagnosis is not to be found in the *Su Wen, Ling Shu, or Nan*
Jing in its present form, I think it is a good thing that it was developed and perfected. I do not know whether or not there is a more advanced form [of pulse diagnosis], but I feel that [the six-position pulse diagnosis] has served our generation well as it is now. Yet, if it is possible to develop an even greater [pulse diagnosis method], then I think it should be done.

We believe that the pulse diagnosis method that advanced beyond the six-position pulse diagnosis of the six basic pulses is the so-called pulse-quality diagnosis, or the pulse-position/pulse quality diagnosis. Although, as was mentioned in chapter 1, it is true that Okabe Sodō wrote about the pulse position/pulse quality diagnosis very early on.

The pulse position/pulse quality diagnosis is meaningful for the following reasons:
① It is uncommon to see only one kind of pulse quality appearing by itself in the overall pulse. Rather, it is usual for a combination of two or three kinds of pulse qualities to appear. By categorizing these pulse qualities by position as well, it is possible to gain a more detailed understanding of the pathology and to form a prognosis.
② Later in the text we will go into a description of the pulse pictures for each pattern of imbalance. That information is based on the pulse position/pulse quality diagnosis. Your understanding of etiology, pathology, and symptomology, which we have already introduced, will deepen as you practice the pulse position/pulse quality diagnosis.
③ You will come to know which among ki, blood and fluids is deficient through having a greater understanding of the significance of the weak pulse positions. It will also become easier to distinguish between cold and heat.
④ By understanding the pulse quality of the weak positions you will be able to know what (i.e. ki, blood, or fluids) is excess and where (i.e. which meridian or organ) that excess is located.
⑤ Determining the pattern of imbalance and accurately selecting the appropriate techniques will become easier with the detailed understanding of pathology gained from utilizing the pulse position/pulse quality diagnosis.