

SHIATSU AND COELIAC DISEASE

CASE STUDY 1:

By Connie Vaughan

The Impact of Shiatsu on Coeliac Disease: My Inspiration.

Introduction

I was inspired to research and write my project about coeliac disease due to a personal motivation. I was diagnosed with coeliac disease 7 years ago having been ill for about 2 years leading up to the diagnosis. I was in and out of Doctors surgeries but to no avail. It was Shiatsu that gave me the energy to pursue finding out what was wrong with me, and also really helped to get my life back on track by giving me energy and making me feel much more balanced. Ultimately it was this amazing experience with Shiatsu that inspired me to learn to become a Shiatsu practitioner myself.

What is Coeliac Disease?

“Coeliac Disease is a genetically influenced condition that results from eating gluten. More specifically coeliac disease is an ailment whereby the inside lining of the small intestine is chronically damaged by gluten proteins and their interaction with the immune system.”¹ Coeliac disease is caused by a reaction in the small intestine to gliadin, a gluten protein found in wheat, rye, barley and oats. The gluten intolerance causes an inflammatory response that damages the lining. The lining of the small intestine is covered in thousands of villi – tiny finger like projections, and it is the villi that absorb nutrients from food. When someone has coeliac disease, on exposure to gliadin, the enzyme tissue transglutaminase alters the protein, and the immune system cross reacts with the bowel tissue, causing inflammation. In turn this flattens the villi (villous atrophy) which decreases the surface area of the lining, making it difficult to absorb nutrients. Not only is this factor of coeliac disease the cause of many complications and symptoms, but also the intestinal lining is supposed to act as a protective barrier. However as “Our digestive tract is designed to absorb nutrients through the cells in the intestinal lining, not through gaps between these cells, when absorption occurs between the cells the protective function of the intestinal tract is thwarted.”² This increases your risk of infectious disease and getting toxins going directly into your blood stream (bacterial translocation) as the intestinal lining is unable to carry out its protective function. ‘Clearly a wide range of ailments can develop as the result of a leaky gut.’³

Symptoms.

There are many different symptoms of coeliac disease and each individual can have different symptoms which can be of varying degrees of severity. The classic symptoms tend to include diarrhoea, weight loss, fatigue, anaemia, and depression/anxiety. There are a number of other symptoms that might not be as common, these include: bloating, constipation, nausea, wind, mouth ulcers, headaches, hair loss, skin problems, short stature and joint/bone pain.⁴

Miscellaneous.

¹ P3, Dangerous Grains – Why Gluten Cereal Grains May Be Hazardous to Your Health. James Braley and Ron Hoggan. Published by Penguin Putman Inc, 1992.

² P32, Dangerous Grains - Why Gluten Cereal Grains May Be Hazardous to Your Health. James Braley and Ron Hoggan. Published by Penguin Putman Inc, 1992.

³ P32, Dangerous Grains - Why Gluten Cereal Grains May Be Hazardous to Your Health. James Braley and Ron Hoggan. Published by Penguin Putman Inc, 1992.

⁴ http://www.coeliac.co.uk/coeliac_disease/130.asp

There can also be complications or other ‘conditions’ that can be related to having coeliac disease. (It is however difficult to assess whether the gluten intolerance actually causes these other conditions or whether they share a common predisposition.)

- 1) Increased risk of infections and autoimmune diseases. Due to the damaged lining of the gut, gluten is able to leak into the blood stream through the intestinal wall. This is capable of injuring a wide variety of human tissues. This prolonged damage may certainly encourage autoimmune disorders, and the longer a coeliac consumes gluten the more the risk increases. ‘Gluten is at least a factor in many, perhaps most cases of autoimmune diseases.’⁵ These can include the following; Alopecia, arthritis, autoimmune thyroid disease, crohn’s disease, diabetes mellitus, fibromyalgia, hypoparathyroidism, microscopic colitis, multiple sclerosis, nephropathy, sarcoidosis, and systemic lupus erythematosus.⁶
- 2) Dermatitis Herpetiformis; an itchy skin condition with blistering.
- 3) Neurological associations: epilepsy, ataxia (coordination problems) myelopathy, peripheral neuropathy and schizophrenia.⁷ However the evidence is still debateable.
- 4) Stunted growth and/or pubertal delay.
- 5) Miscarriage and infertility.
- 6) Hyposplenism (small and underactive spleen)

There are also problems that are directly related to the malabsorption issue of coeliac disease. Due to the change in the surface of the villi, malabsorption occurs as it stops the body’s ability to absorb nutrients, minerals and fat soluble vitamins A, D, E and K. It also can increase the risk of lactose intolerance due to the decreased bowel surface and reduced production of lactase (an enzyme, secreted by the glands of the small intestine, that converts lactose into glucose and galactose during digestion). Before I was diagnosed with coeliac disease, I suffered from many problems that were linked to the malabsorption issue of coeliac disease including Magnesium and zinc deficiency, hair falling out and general weight loss due to malnutrition.

How is Coeliac Disease Caused?

Coeliac disease is polyfactorial – both in that more than one abnormal factor can cause the disease and also more than one factor is essential for the disease to manifest in a patient. Nearly all patients suffering with coeliac disease have an abnormal HLA DQ2 allele.⁸ However, this cannot be the only factor that determines if a person gets coeliac disease because about 20-30% of people without coeliac disease also have this abnormal gene. This suggests that additional factors are needed to help coeliac disease actually develop. (Covered in more detail in the *Risk Factor* section.) In addition, about 5 % of people who do develop coeliac disease do not have the DQ2 gene. The reason for the HLA DQ2 gene producing an increased risk of coeliac disease is due to the receptors formed by these genes binding more tightly to gliadin peptides than other forms of the antigen-presenting receptors. Therefore these forms of the receptor are more likely to activate T Lymphocytes and initiate the auto immune process.⁹

How is Coeliac Disease Diagnosed?

Firstly, it is essential that the patient continues to eat gluten in order for any tests to give a positive result. This is due to the fact that the lining of the small intestine will improve just after a few days of being on a

⁵ P119 Dangerous Grains – Why Gluten Cereal Grains May Be Hazardous to Your Health. James Braley and Ron Hoggan. Published by Penguin Putman Inc, 1992.

⁶ For a full list refer to appendix in Dangerous Grains – Why Gluten Cereal Grains May Be Hazardous to Your Health. James Braley and Ron Hoggan. Published by Penguin Putman Inc, 1992.

⁷ “Coeliac Disease and Schizophrenia: population based control study with linkage of Danish National registers. Eaton W, Mortenson P, Esben A, Byrne M, Mors O, Ewald H, 2002 (<http://www.bmj.com/cgi/content/short/328/7437/438>)”. British Medical Journal, 328: 438-9.

⁸ “Recent advances in Coeliac Disease” van Heel D, West J 2002. <http://gut.bmjournals.com/cgi/content/full/55/7/1037>.

⁹ “Recent advances in Coeliac Disease” van Heel D, West J 2002. <http://gut.bmjournals.com/cgi/content/full/55/7/1037>.

strict gluten free diet and will start healing within weeks, making any test results inaccurate. There are a number of different tests that can be done including blood tests, skin, rectal, intestinal biopsies, genetic testing and saliva testing.

In the UK, and certainly the process I went through when I was diagnosed with coeliac disease, one must have an initial blood test followed by an intestinal biopsy using an endoscopy (any instrument such as an auriscope or a gastroscope, used to obtain a view of the interior of the body.) This is considered the gold standard for diagnosis.¹⁰¹¹ Due to the major implications of a diagnosis of coeliac disease, professional guidelines recommend that a positive blood test is still followed by an endoscopy. If the blood test is negative but there is still good reason to believe that coeliac disease may in fact be present, this will also be followed by endoscopy.

The Marsh Classification is used to categorise the pathology changes of coeliac disease in the small bowel. These are:

- Marsh Stage 0: Normal Mucosa
- Marsh Stage 1: Increased number of intra-epithelial lymphocytes, usually exceeding 20 per 100 enterocytes.
- Marsh Stage 2: Proliferation of the crypts of Lieberkuhn.(simple tubular glands in the mucous membrane of the intestine)
- Partial or complete villous atrophy.(Wasting away of the villi)
- Hypoplasia (underdevelopment) of the small bowel architecture.

Once a patient goes onto a strict gluten free diet their classification should return to Marsh Stage 0. Whilst positive serology and typical biopsy are highly suggestive of coeliac disease, if there is no response to diet then alternative diagnosis may have to be considered.

Risk Factors.

So, what determines who goes on to get coeliac disease and who doesn't?

There are a number of theories as to what determines whether someone carrying the aforementioned gene will actually go on to develop coeliac disease. The 2 main theories include infection by rotavirus; a virus that causes diarrhoea, or infection by human intestinal adenovirus; a DNA containing virus that causes infection of the upper respiratory tract. Bizarrely, some research suggests that smoking can actually help prevent the onset of coeliac disease!¹²

A study undertaken in 2005 suggested that the timing of the exposure to gluten in childhood was an important risk modifier. If someone is exposed to gluten before the gut barrier has fully developed (3 months old) then they would have 5 times the risk of developing coeliac disease. However a 2006 study actually showed the opposite, and that early exposure to gluten was protective.¹³ Interestingly, breastfeeding has been shown to potentially reduce the risk or at least delay the onset.¹⁴ I was symptomless until I was 19, and I had been breast fed until I was 2 and a half. I firmly believe that the prolonged breastfeeding I had as a child was beneficial and helped to delay the onset of me developing coeliac disease.

Treatment.

¹⁰ Interim Guidelines for the management of patients with coeliac disease. (<http://www.bsg.org.uk/bsgdisp1.php?id>) British Society of Gastroenterology. Ciclitira, 2002

¹¹ "American Gastroenterological Association Medical Position statement. (<http://www.gastrojournal.org/article>) 2001.

¹² "Is the risk of adult coeliac disease causally related to cigarette exposure?" S. Suman, E, Williams, P Thomas, S Surgenor, J Snook. 2003. Eur j Gastroenterol Hepotol 15 (<http://www.ncbi.nlm.nih.gov/entrez/query.fcgi>)

¹³ "Timing of initial exposure to cereal grains and the risk of wheat allergy" Peadarics. J Poole et al. (<http://www.ncbi.nlm.nih.gov/entrez/query.fcgi>)

¹⁴ "Dietary Guidelines and implementation for Coeliac Disease" Gastroenterology. (<http://www.ncbi.nlm.nih.gov/entrez/query.fcgi>)

Currently the only successful treatment for coeliac disease is to go onto a gluten free diet. Unfortunately for coeliacs, myself included, this is a life long diet. If someone with coeliac disease goes on a strict gluten free diet then the intestine is able to heal, so within time the coeliac should resume a completely normal, symptom free lifestyle. However, from my own experience I know this is not true for everyone. I am lucky enough that the majority of my symptoms have gone. However, when I was very ill with coeliac disease I suffered from quite bad hair loss amongst many other symptoms previously mentioned. Although everything else seems to have returned to normal my hair still remains quite thin and doesn't grow very quickly. I was also diagnosed with osteopenia several years after I was diagnosed with coeliac disease. Although I have finally managed to overcome this, I did suffer a fracture as a result. So although going on a gluten free diet massively improves ones lifestyle, unfortunately there are often still problems. For some people it is much worse as they suffer from refractory disease which means that they do not improve on a gluten free diet at all. In these cases the patient may be given steroids or immunosuppressants.¹⁵ However, before I was diagnosed with coeliac disease, I had shiatsu for about a year. At this point I was completely unaware that I needed to go on a gluten free diet and theoretically this would be the only thing that would make me better. Nonetheless, Shiatsu massively improved my health. I realised that after a month or so of having shiatsu, I no longer needed to sleep in the afternoons and I had a lot more energy. My skin (which was very dry and had bad rashes on my face) started to improve and I felt much more emotionally balanced too. (I often had quite severe mood swings) So, although a gluten free diet is essential, Shiatsu can have a massive impact on the mental, physical and emotional well-being of a coeliac. Combining shiatsu with a gluten free diet would be the best possible treatment for coeliac disease from my experience, and perhaps for those who suffer from refractory disease it could offer an alternative to steroids, as a gluten free diet has no impact on their health.

Shiatsu & Coeliac Disease.

Due to the nature of coeliac disease; varying severity/symptoms, it is difficult to simply say how shiatsu may help/impact on a person with coeliac disease as it can affect different people in so many different ways. The presentation of the disease is highly variable and as previously discussed there are classic symptoms such as diarrhoea, weight loss and general malaise, but these classic symptoms are not always present. Some patients may present with obvious gastro-intestinal symptoms whilst others may suffer more from depression, infertility and breathlessness – none of which are obvious indicators of coeliac disease. As a result I will look at a case study of my own experiences of coeliac disease and shiatsu, and investigate how Shiatsu in TCM and Masunaga theory may relate to these signs and symptoms and therefore how Shiatsu may help.

Case Study Connie Vaughan

Growing up I had always been a healthy child, of an average weight, exercising regularly and eating well. However when I started university I was 19 and my health began to deteriorate. I would become tired very easily and would need to have a sleep in the afternoons (approx between 3 and 5pm). I found it hard to sleep properly at night which exacerbated my fatigue during the day. I began to lose weight. Although I had always been slim I had always been a healthy weight for my age. Over the next year I lost approximately 1 and a half stone in weight (weight approx 7 ¾-8 stone, 5ft 9in tall). As time progressed my symptoms became worse. My hair became thin and started to fall out. I had dry, itchy skin rashes on my face and between my thighs. I also suffered from a number of gynaecological problems such as constantly getting thrush and swollen labia. Although I regularly went to the Doctors to complain of my various problems, no-one seemed to know what was wrong with me and no-one seemed to look at the bigger picture, linking up all the different problems I was having. It was suggested by Doctors that I might be anorexic due to being so underweight. I however explained that I was constantly hungry and always eating a lot. I recall friends saying that I was lucky because I was able to eat so much and yet never put on weight (of course I realise now that this was due to mal-absorption because my villi were unable to absorb

¹⁵ “American gastroenterological Association medical position statement: Coeliac Sprue.
(<http://www.ncbi.nlm.nih.gov/entrez/query.fcgi>)

any nutrients/minerals from my food). I had bad mood swings often feeling angry, moody and depressed. I occasionally had a bloated stomach and sometimes suffered from constipation and flatulence. I also suffered from back problems. I was tested and diagnosed with anaemia and later found I was also deficient in magnesium and zinc. I had a very pale complexion and my face looked gaunt. I had irregular periods and weak/brittle nails. This still did not prompt Doctors to test me for coeliac disease and I was left feeling helpless. As a result I started to have Shiatsu. After about 1 month (having shiatsu weekly) I began to notice some significant changes. I had significantly more energy and was finding it easier to sleep well during the night. I began to feel less moody and much more balanced. My skin certainly improved and Shiatsu gave me the strength to pursue my problems and insist with the Doctors that tests were done to find out exactly what was wrong. My Shiatsu practitioner identified that there was a potential digestive disorder (even though I had very few digestive problems; the beauty of shiatsu looking at the bigger picture, where as the limitations of western medicine seeming to only look at the signs and symptoms individually, rather than perhaps looking at a pattern.) As a result I went to a nutritionist who came up with 3 theories (including coeliac disease) according to my signs and symptoms and as a result I insisted that I was tested for coeliac disease. Within a month I was successfully diagnosed with coeliac disease after having a positive blood test and endoscopy. I went onto a strict gluten free diet straight away and within weeks felt significantly better. It took about 1 year for my weight to return to normal and all the other signs and symptoms to go away. However I was later diagnosed with osteopenia, due to the malabsorption of calcium. I have managed to turn this around and no longer have osteopenia, though this took about 5 years.

I recall my Shiatsu practitioner often commenting on my kidneys and stomach coming up in diagnoses. She would often recommend that I ate earthy grounding foods for example. Of course at the time I wasn't really sure of the relevance of this but now it is really interesting to have an understanding behind this.

TCM Theory.

Due to the many different signs and symptoms of coeliac disease in general, and those to which I was displaying, it is difficult (like many conditions) to fit it into just one syndrome. Often there is an overlap between a number of different syndromes. I was certainly showing signs of a general Kidney Deficiency Syndrome, but more specifically a Kidney Yin Deficiency, the classic signs and symptoms being; Vertigo, Dizziness, Tinnitus, deafness, poor memory, night sweats, sore back, aching bones, nocturnal emissions, constipation and dark scanty urine. I suffered with constipation and back problems. I often had a lot of flatulence and had (still have to some extent) a poor memory. When my signs and symptoms became more severe, which was quite often, I would suffer from Empty Fire Blazing; Malar flush, irritability, afternoon fever, (or heat and tiredness) insomnia, mental restlessness, possible blood in urine, excessive sexual desire and nocturnal emissions. In particular I would become irritable, get very tired in the afternoons, yet restless all the time and therefore difficult to sleep. Looking back (although I didn't consider this as an 'issue' at the time) I did also have an excessively high sex drive which links in with Empty Fire Blazing. It isn't surprising that I showed signs and symptoms relating to a Kidney Yin Deficient pattern considering coeliac disease is largely a genetic/hereditary disposition. My ancestral Ki/Essence¹⁶ was clearly compromised to some extent and would certainly have been further depleted as time went on. Kidney Deficient problems are often associated with chronic illness and it is interesting that Kidney regularly came up in my diagnosis.

It was also more than likely that I was suffering from Spleen Yang Deficiency; Poor appetite, abdominal distension, tiredness, sallow or bright white complexion, 4 limbs weak and cold, feeling chilled, loose stools, oedema. Although it is often stated that the first sign of a weak spleen is a lack of appetite 'since the Spleen confers the ability to taste and enjoy food,'¹⁷ I however suffered from a very overactive appetite. It

¹⁶ The second of the Vital Substances is Essence. Essence is the yin or substantial form of the Source Ki which we inherit from our parents. In the same way that Source Ki, being yang is the motive force for all our body processes and actions for our life time, Essence being Yin, is the basis for our body substance, the seed of our physical form. Essence is the inheritance living form handed down as generation succeeds generation, where as Source Ki is dynamic. P65 Shiatsu Theory and Practice. A comprehensive text for the student and professional. Carola Bereford Cooke, 2nd edition. Published by Elsevier Limited, 2003.

¹⁷ P186 Shiatsu Theory and Practice. A comprehensive text for the student and professional. Carola Bereford Cooke, 2nd edition. Published by Elsevier Limited, 2003.

is common for a deficient Spleen to coexist with a hyperactive Stomach which is constantly trying to compensate for the spleen's inability to nourish the body. (Suggestive of Stomach Fire Syndrome; Burning discomfort, pain in epigastric region, thirst, desire for cold drinks, hunger, sour risings, nausea, vomiting, constipation. I was constantly hungry and suffered with sour risings and constipation.) Paradoxically this can further weaken the spleen because it is being over loaded with food. I certainly used to over indulge and this could then explain symptoms such as constipation, as stagnation of food in the stomach causes heat. The dysfunctioning of the Spleen can also explain the fatigue I suffered from, as the spleen was unable to transform the food I ate into qi. I remember feeling so tired in the afternoons that it was sometimes a struggle just to walk short distances – this links in well with the 'weakness of the four limbs, desires to lie down.' I would feel incredibly weak and lethargic and found it hard to partake in any physical activities. Long term Kidney imbalance weakens the Spleen and vice versa, so no doubt the Kidney Deficiency would have had an impact on my spleen. Chronic illness can affect the Spleen and cause Spleen Yang Deficiency.

I believe I also suffered from Liver Blood Deficiency; Dizziness, numbness of limbs, insomnia, wakes early, blurred vision, scanty menses or amenorrhoea, dull pale complexion, pale lips, muscular weakness or cramps and spasms, nails pale, dry and deficient. I suffered with insomnia, scanty menses, dull, pale complexion, pale lips, muscular weakness and dry brittle nails, all of which fit with this syndrome. When I was particularly bad and my emotional state was affected I would become very irritable and angry which can be associated with Liver Yang Rising; Headache, tinnitus, red, itchy eyes, dry mouth/throat, insomnia, agitation, irritability. Just before I was diagnosed with coeliac disease I became extremely ill. At this point my symptoms were acute and severe. I constantly felt sick, completely exhausted, my moods were terrible and my periods would become even more irregular. It was as if at these times I went from a Deficient Liver pattern to an Excess Liver pattern, with Liver Ki Stagnation; Distension of chest, hiccup, sighing, sadness, depression, fluctuating moods, nausea, vomiting, epigastric pain, poor appetite, churning/belching, sour risings, diarrhoea, unhappiness, wound up, lump in throat, difficulty swallowing, irregular periods, period pain, distension of breast and abdomen, PMT. I remember being constipated for a week which also caused hallucinations. I think it had become impossible for the smooth flow of Ki to occur, hence Liver Ki Stagnation. My moods were terrible and I would get easily angry and frustrated. My PMT also worsened.

Masunaga Theory.

The Small Intestine is the key organ in western pathology affected by coeliac disease. Stage 3 of the life cycle of the amoeba is linked with the Ht and SI entitled 'Assimilating and Integrating: Central Control and Conversion.' Interestingly anaemia (one of my symptoms and a key indicator to coeliac disease) is commonly associated with the Small Intestine and poor assimilation; a classic Small Intestine association. Naturally having Coeliac disease meant that my small intestine was largely affected. 'The Small Intestine takes food and environmental stimuli, both emotional and sensory in to the territory of the individual bodymind to be integrated into the blood, flesh and individual internal responses.'¹⁸ To assimilate means to convert another substance into ourselves - hence the small intestines link with the heart, the core of our identity. I think it's very interesting that the main organ affected by coeliac disease is the Small intestine and the common signs and symptoms associated with poor assimilation are indigestion, low energy, anaemia, constipation and diarrhoea, all of which I suffered from at some point. I also remember being very mentally restless and unable to sleep. This links well with the Small Intestines function of assimilation not working well, and therefore my mind was always overactive and over-thinking, unable to assimilate information. (I was studying at university so always had new information to try and absorb and digest).

In Masunaga theory the Stomach and Spleen play a key role in digestion, the general function being 'obtaining food and digestion'. The physical associations with the Stomach and Spleen which relate to the

¹⁸ P155 Shiatsu Theory and Practice. A comprehensive text for the student and professional. Carola Bereford Cooke, 2nd edition. Published by Elsevier Limited, 2003.

symptoms I had are problems with the digestive system, mouth ulcers, and female reproductive system. Also psychologically there is a tendency to over nurture with a St/Sp imbalance which is something I did (and still do!) as well as worrying and feeling anxious. As I was unable to absorb properly from my food it is not surprising that I would often get a St/Sp imbalance.

I often had Kidney arising in my diagnoses, which in Masunaga theory relates to the general function of Purification and Impetus, and specifically Impetus. The Kidney and Bladder meridians are responsible for the Purification of Ki and its use in providing impetus. This fits well with my symptoms on a physical level; lethargy, and sometimes even exhaustion, lower abdomen pain and back problems, lack of energy and reproductive problems. On a psychological level, the symptoms that I had that relate to a Kidney diagnosis are anxiety, fear and being accident prone. During the stages when I was symptomatic, leading up to the diagnosis of coeliac disease, I often felt very anxious. As a child I was often having accidents; falling off a bridge, paralysing myself after falling from some monkey bars etc. I can now see that being accident prone may not have just been 'coincidence' but actually part of a bigger picture, due to having a Kidney Imbalance. It is also interesting that in Zen shiatsu as well as TCM theory the Kidneys help us to adapt to stress. "It is the yang aspect of the Kidneys which reacts to stress via the 'fight or flight' response of the sympathetic nervous system. Masunaga calls this 'controlling spirit and energy to the body.' The ability to recover from stress and relax is the Yin capacity of the kidneys."¹⁹ My body was under constant strain and stress due to being unable to absorb anything from my food, so my body was in a constant state of trying to recover from this stress and strain put onto my body. This links in with the previously mentioned TCM theory that I was suffering from Kidney Yin Deficiency and a general Kidney imbalance in Masunaga terms.

Useful Shiatsu Points.

Due to there being so many different signs and symptoms that I experienced before being diagnosed with coeliac disease there are a number of points that could be useful for treating someone with coeliac disease, depending on their signs and symptoms. In general I showed signs of Deficiency with depleted Essence and Ki. Therefore any tonifying points both for Ki and Essence would be very useful. I also had a number of syndromes including and most significantly; Kidney Yin Deficiency, Spleen Yang Deficiency, Liver Blood Deficiency and Liver Ki Stagnation so I will include points that would be particularly useful for these syndromes.

Tonifying Ki:

LI 4 – Particularly in combination with St 36. Also good for constipation.

LI 10.- Tonifies Ki and Blood. Principally used for fatigue and depletion.

St 36. Also tonifies spleen and brilliant for any digestive problems.

Bl 17. Also tonifies, nourishes and moves blood, and subdues rebellious st ki.

Bl 43. Nourishes essence and strengthens deficiency.

CV 6. Tonifies source Ki and regulates ki. Good for exhaustion, depression, abdominal pain and loose stools.

CV 17. Tonifies and regulates ki.

Tonifying Essence.

Bl 23 – Also Kid Yu Point. Stimulates all functions of the kidneys.

Bl 43- Nourishes Essence. Tonifies Ki and strengthens deficiency.

GV 4 – *Ming-Men, Gate of Vitality*. Tonifies source Ki, benefits essence, kidney yang and gate of vitality.

Kid 3 – Source Point, tonifies source ki and essence, tonifies both yin and yang of the whole body via kidney yin and kidney yang, tonifies kidneys. Principally used for long term chronic weakness or exhaustion, infertility or menstrual problems, lower back ache.

¹⁹ P100 Shiatsu Theory and Practice. A comprehensive text for the student and professional. Carola Bereford Cooke, 2nd edition. Published by Elsevier Limited, 2003.

Blood Deficiency.

Sp 6 – Moves, cools and nourishes blood, benefits sp, liv and kidneys. Principally used for menstrual pain and all gynaecological conditions, insomnia, lower abdominal pain, cystitis, irritability and anxiety.

Sp 10 – Cools, moves and nourishes the blood.

St 36 – See Above

Bl 17 – See Above

CV 4 – (Small Intestine Bo Point) Front collecting point for the Small Intestines, also tonifies kidneys and original ki. Good for irregular menstruation and can be used as a tonic.

GB 30 – Tonifies Ki and Blood. Good for genital problems.

Liv 8 – Nourishes the blood. Is good for genital problems such as burning, itching or discharge.

Other Useful Points. (Not already covered)

Kidney Yin Deficiency.

Kid 1 – Tonifies Yin. Good for agitation, insomnia and anxiety.

Kid 6 – Nourishes Yin and fluids, Cools the Blood, Calms the mind and promotes sleep.

Spleen Yang Deficiency.

GV20 – Stengthens the ascending function of the Spleen. Clears the mind.

BL20 – Spleen Yu Point. To support all functions of the Spleen.

Liver Blood Deficiency.

Bl 18 – Liver Yu Point.

Liver Ki Stagnation.

Liv 3 – Source Point. Promotes the smooth flow of Liv Ki. Subdues Liv Yang, calms the mind.

Liv 13 – Bo point of the Spleen. Benefits the Stomach and Spleen. Eliminates stagnation, harmonises Liver and Spleen.

HP 6 – Opens the chest and releases stagnation. Calms the mind and promotes sleep.

Other Useful Points.

St 25 – Front collecting point for the large intestines. Promotes the function of the large intestines, clears heat from the stomach and relieves retention of food.

So how did Shiatsu help me?

As previously suggested, Shiatsu had (and still has) a huge impact on my health. Shiatsu hugely improved my energy levels and helped me to feel more balanced; less irritable and moody. It helped me to stop worrying so much – making me feel like I wasn't making my illness up, and as a result from having shiatsu I felt significantly more grounded. Shiatsu enabled me to begin to lead a fairly normal life again. In time I no longer had to sleep in the afternoons, I felt calmer and more relaxed, yet at the same time more vibrant and invigorated. Shiatsu really helped to aid my digestion, and also encouraged me to eat healthier. Although I now know that in most cases (other than refractory disease) the only way to control Coeliac disease properly and effectively is to go onto a gluten free diet, I was amazed at how much of an impact Shiatsu had on my health, even though it couldn't actually help my villi return to normal. Shiatsu had such an impact on my life that I became fascinated to know more about it. I am now excited and happy to have completed (almost!) my third year of Shiatsu, and look forward to continuing my training and development as a Shiatsu Practitioner.

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