

Paediatric Tuina and Acupuncture: the Xiaoxiao Clinic in Milan

Abstract

Chinese medicine is a highly effective treatment for many paediatric diseases. This article presents the theory and principles of the Chinese medical approach to treating children. More specifically, it describes how tuina can be used to treat and prevent paediatric respiratory disease. This theoretical discussion is supported by results and observations from a pilot study held at the Xiaoxiao paediatric clinic in Milan, Italy.

The Xiaoxiao Clinic in Milan, Italy is a paediatric clinic that treats children with tuina and acupuncture. The clinic has been running for two years and has recently completed a pilot study for the treatment and prevention of paediatric respiratory diseases. Rather than a statistical analysis of our research, this article takes a more general look at how tuina and acupuncture can benefit children, and is supported by the results of our study. The article focuses mainly on paediatric tuina because it is a lesser known field than paediatric acupuncture, which has already been discussed thoroughly elsewhere.¹ We hope that our observations will be of help to others who work in this area. The Xiaoxiao Clinic is supported by the Federation of Italian Schools of Tuina and Qigong (FISTQ).²

Paediatrics and TCM

Chinese medicine is a highly effective treatment for many paediatric diseases. It can reduce the amount of conventional drugs children are required to take, as well as being an effective method of preventing illness and reinforcing the constitution of weak and sickly children. According to Chinese medical theory children correspond to spring, the dawn, the rising of yang within yin. A characteristic of their energy is its volatility, which means rapid changes in the state of their health. They get sick very easily, yet respond to treatment just as quickly. When they are ill, it is often possible to balance their energetic systems using small and gentle interventions. Chinese medicine accomplishes this very effectively.

Paediatric tuina

Paediatric tuina is based on the traditional principles of Chinese medicine, and is part of the typical training of a TCM doctor in China. It is widely used in modern Chinese hospitals. Because it is significantly different to tuina as practised on adults, it requires specialist training and knowledge. The main indications for

paediatric tuina are:

- acute abdominal pain, constipation, diarrhoea
- poor appetite, lassitude
- recurrent colds, cough, catarrh, asthma
- poor sleep, night crying, nocturnal enuresis
- restlessness, agitation, hyperactivity
- skin problems
- retarded development

Paediatric tuina techniques can be learnt fairly easily by acupuncturists. They require only a minimal part of the full tuina training and are very effective adjuncts or alternatives to acupuncture treatment. Tuina treatment for children is generally a sequence of 8-10 massage techniques (fa), mainly pushing (tui) and kneading (rou) along specific lines or points. Each fa is done for 1-2 minutes, with the child either lying on the couch or sitting in the lap of the parent. Traditionally the right hand/arm is used in girls, the left in boys, with other points/lines used bilaterally. Parents or carers are taught a simple sequence of tuina techniques, to be applied at home once a day or more often in case of an acute condition (e.g. fever). The order does not matter, but the techniques must be done together, and can even be done while a baby is feeding or sleeping. Parents are advised to refer to their practitioner whenever necessary. It is worth pointing out that in our experience not all children like being touched (especially Italian children – for some reason they seem more restless than Chinese). We have therefore had to find ways to make them receptive to treatment. Babies tend to quieten down after some abdominal massage, whilst we try to involve the older ones in their treatment, asking them to remember the massage strokes so they can remind their mother how to do it when they get home.

Acupuncture treatment

Acupuncture treatment for children is simpler than in adults. Clinical patterns tend to be clearer, since there has been less time to create confusing pathologies of

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the qi, whilst response to treatment is faster since children's qi is more dynamic. The needles are thinner, the number of points less, and the stimulation time is short. If our needle technique is good, the insertion will be painless. The child will recognise the sensation of the arrival of the qi - we feel that it is better for them to live this experience than to be distracted away from it. When we treat older children, we show them the needle, ask permission and say "now let's see if you feel a "zzz" inside - tell me when it happens". If they are smaller we may say "now let's touch two points and we see if they talk to each-other" (in case we have to direct the qi), or "here there is a nice path, let's go into the little house and we will give it a good clean" (in case we have to disperse the qi). If they are very young we simply communicate with them through the sound of our voice, our eyes and our touch. For older children acupuncture becomes a challenging test of courage that strengthens them; for the small ones it is something new in the world to discover; for the babies, who knows? Incidentally, we have never had a child who has refused acupuncture.

A correct diagnosis and appropriate choice of points is, of course, just as important as the way we insert the needle, contact the qi, and what we then do with this qi. We mostly use the "major" points, such as the back-shu points, Zhongwan REN-12, Qihai REN-6, Yintang (M-HN-3), Dazhui DU-14, Mingmen DU-4, Hegu L.I.-4, Quchi L.I.-11, Lieque LU-7, Chize LU-5, Neiguan P-6, Waiguan SJ-5, Yifeng SJ-17, Zusanli ST-36, Fenglong ST-40, Sanyinjiao SP-6, Taichong LIV-3, Taixi KID-3 etc.

Other therapeutic methods

The choice of the therapeutic method depends on the child's age, clinical condition, and what we think will best suit the child and their parents. Generally tuina is our first choice for children up to about 4-6 years of age. As the child gets older, acupuncture becomes more appropriate, as well as moxibustion, cupping, ear-seeds, guasha (skin scraping) and plum-blossom needling. Moxibustion is extremely important for tonifying the middle jiao, reinforcing the Lung and nourishing the Kidney and the essence (jing). Guasha is the key method to eliminate heat from invasions of external pathogenic factors. It is much more effective than when used on adults, and parents are taught how to use it at home to treat fevers. Plum-blossom needling is used mainly for chronic diseases in older children, either on single points or along channels, and can be learnt by parents and young patients alike. Ear-seeds and cupping on the umbilicus³ are often used for dermatological or allergic pathologies.

Prevention and parental cooperation

Prevention is a key issue: "The sage does not treat when illness is already there, but when it is not yet there, he does not treat when disorder is already there, but when it is not yet there. Waiting to treat until after the illness has already

developed or bringing order after disorder has already developed is like digging a well when one is thirsty, or like casting a dagger once that the battle has already been engaged ...".⁴ Prevention is rooted in understanding an individual child's constitutional strength and tendency to specific patterns. If we know the direction towards which a child tends when they get sick, we can change the daily habits that are most harmful and devise specific preventative treatments. In most cases we apply a basic sequence that tonifies and regulates the middle jiao, moves accumulation, eliminates heat, transforms phlegm and reinforces Spleen, Lung or Kidney qi.

Cooperation with parents is extremely important for supporting paediatric treatment, both in the treatment of chronic conditions and in preventing future illness. In Europe we do not usually have the chance to treat three times a week as in China; therefore daily tuina, administered by the parents, is encouraged in order to supplement treatment. It is often necessary to strongly emphasise to parents the importance of their home-treatment, whilst at the same time trying to avoid making them feel guilty if they do not do it. At our clinic they can also attend a two-day course that takes place twice a year, where they get a basic introduction to Chinese medicine and learn more about tuina. If parents are able to administer home treatment they feel much more empowered. We always encourage them to keep on with the tuina at home, especially if the child is under any kind of stress (external pathogenic factors, changes in family or personal life, immunisations etc.), or if the parents notice that the child's energy has become depleted or imbalanced.

Deficiency patterns

Human beings are fragile. Even more so at the beginning of life, when the qi deriving from the meeting of yin and yang of the parents' jing has just begun existence. This is why Chinese texts say that children's qi easily loses its way and that their zangfu are soft. It is therefore necessary to carefully support their qi. Strengthening the Spleen and Stomach qi is particularly important because these zangfu work very hard in the early years of life. Children grow rapidly and a lot of grain (gu) qi has to be made by the middle jiao, so that it is often working close to its limit and easily gets under strain. It is therefore essential that we support the qi of the earth element (as mother's milk, sleep, and cuddling also do). Spleen and Stomach are the 'root of post-heaven qi'; they receive and transform food into qi, which then takes its different forms: as blood, zangfu, body tissues, functions, emotions and so on. If the middle jiao function is weak, these transformations are weakened: the general energy is low, growth is slower, the digestion is impaired and dampness easily transforms into phlegm.

Of course other zangfu can also be involved. If Lung qi is weak it will not perform its function of diffusing and

descending qi and of fostering defensive (wei) qi, and thus a vicious circle builds up: the six external pathogenic qi penetrate easily through the defensive qi to the interior and interfere with the free movement of qi. When the movement of qi is obstructed, fluids tend to clot into phlegm, which causes yet more stagnation. The ability to utilise the qi from the air to produce zhen (true) qi then declines. All these processes manifest with respiratory infections, chest oppression, cough and allergies.

Excess patterns

Accumulation (shiji) is the most frequent pattern seen in children. We say that it corresponds more or less to Liver qi constraint (yu) or stagnation (zhi) in adults. In babies and toddlers stagnation of qi does not come from emotions but rather from food, since in the first years of life emotions tend to have free expression. Chinese texts call it 'indigestion', but it is not the acute condition we mean in English; rather it means 'poor digestion', that is, Spleen and Stomach qi are unable to properly perform their function of transforming and transporting because they are overwhelmed by an excessive amount of food. The cause is due to daily eating habits: too much ('the more, the better' is a dangerous attitude), too often (the fu organs must fill and empty; if they are kept full they cannot work properly), or poor quality (too rich, hot, damp, cold, sweet, toxic). All these excesses require extra work from the middle jiao and will compromise its transforming capability.

When anything is too full, movement becomes difficult and blockages develop (of qi, stools, emotions etc.) which then need to be released.

When we treat them for their abdominal pain. To their parents, we gently point out that the frequency of the feeding on demand can be reduced, and that the crying might be a request for something other than milk. Accumulation shows in a swollen and hard abdomen, red spots on the cheeks, a thick yellow nasal discharge, greenish stools, restlessness (day or night), and foul smelling stools, skin, breath, vomit and urine. On the emotional side, accumulation interferes with the spreading function of the Liver and this shows in a foul temper. Tuina works quickly in these cases: the terrible crying calms down and peaceful sleep returns, the stools return to normal and the hard belly softens. The anxious parents then start to relax.

Accumulation easily transforms into heat, causing constipation, poor sleep, agitation and rashes. Heat facilitates the clotting up of phlegm, manifesting as catarrh, cough and asthma. Heat can penetrate deep inside as 'hidden heat' (fu re), and causes problems later on: it is a primary cause of hyperactivity and attention deficit disorder. Any external pathogenic qi which

For human beings the world can be so delightful that overindulgence is a great temptation. We often whisper to babies "relax, do not worry, there is plenty more food when you need it..."

enters through the superficial level of defensive qi also easily transforms into heat due to the forceful, yang quality of children's qi. This heat may reach the deeper levels of xue (blood) and ying (nutritive) qi, causing damage to the yin fluids and possibly transforming into internal wind, with high fever, loss of consciousness, convulsions and dehydration; at this stage the illness becomes life-threatening. Heat can also already be there at birth, having accumulated during the pregnancy as taidu, foetus poison. Tuina works very well to eliminate heat, draining it through the stools to harmonise the balance between fire and water.

If earth qi is deficient and unable to transform properly, phlegm will be formed. Phlegm is heavy, sticky, thick, hard to eliminate, and can localise "in the hundred places". In children it easily clots at the upper orifices, with nasal obstruction, otitis, swollen tonsils and enlarged cervical glands. It often gathers at the couli (orifices of the skin), impairing the circulation of qi and blood and causing rough skin and eczema. It may hide as 'hard' phlegm deep in the Lung, obstructing the free diffusion of qi and manifesting as asthma later on. It may also take a non-substantial form and hinder the heart orifices (xinqiao), misting the shen and affecting the mind and mood. The prolonged presence of phlegm may be the origin of more severe disorders later on in life.

The pilot-study

The aim of our pilot-study was to evaluate the effectiveness of tuina and other TCM methods in the treatment and prevention of recurrent respiratory infections in children up to 12 years old. The children were given a course of eight free sessions. The first seven sessions were given every 10 days and the last one around two months after this initial course of treatment. Treatments were based on a Chinese medical diagnosis (without following rigid protocols) and used tuina as the main treatment, supported where appropriate with acupuncture, moxibustion, cupping, ear-seeds, guasha, and plum-blossom needling. In addition, the parents were taught a basic tuina sequence to be applied daily, along with some "emergency" sequences (in case of common cold, cough, fever or constipation).

- From November 2005 to June 2006 the clinic opened 42 times and treated 29 children (two months to 12 years old) for a total of 218 sessions.

- 20 children came with respiratory diseases; of these 17 completed seven sessions of the course, with 14 completing all eight sessions (including the final follow-up session two months after the seventh treatment).
- Thirteen practitioners were trained through a basic or advanced paediatric course - the Xiaoxiao clinic also acts as a clinical training centre for tuina practitioners and acupuncturists who already have a good knowledge of Chinese medicine and wish to focus on paediatrics (in Italy acupuncturists must be MDs).
- Data was recorded with Microsoft Access in a specifically designed clinical chart (this chart has been made available to other centres that treat children with Chinese medicine, with the intention of building a network for gathering and exchanging information).

Diagnosis

Of the 29 children treated, we take here into account the 17 that came for the treatment and prevention of winter respiratory diseases and attended at least seven sessions. They presented with repeated colds, coughs, catarrh, otitis and fever. The diagnosis was deficiency of defensive qi, with phlegm in the Lung or localised at the ears.

The aetiology for 15 of the children was accumulation of food with heat, manifesting with excessive appetite, a swollen and hard belly, thick and yellow nasal discharge, constipation or difficult evacuation, smelly greenish stools, poor sleep, agitation, minor rashes or eczema, red tongue or red tip, thin yellow tongue coating.

An empty (xu) pattern was diagnosed in only two cases: a two year old girl with congenital hydrocephalus and a 10 month old boy with gastro-oesophageal reflux. At our clinic we have found that although there are often some manifestations that might be interpreted as signs of deficiency (e.g. tiredness, easily catching colds etc.), patterns of real deficiency are rare.

Treatment

For the excess patterns, our treatment principles and techniques were as follows [specific tuina techniques are given in square brackets]:

- Strengthen the Spleen and regulate the zangfu [bu pijing (tonify Spleen), roufu (knead abdomen), rou Zusanli (knead Zusanli ST-36), nieji (pinch the spine)].
- Tonify the Lung and transform phlegm [bu feijing (tonify Lung), fentui shanzhong and jianjiagu (open Shanzhong REN-17 and scapula), qing xielei (clear costal region), yuntui bagua (round-push Eight Trigrams)].
- Remove accumulation of food [qing banmen (clear Thick Gate), fenfu yinyang (open Abdomen Yin-Yang)]
- If the accumulation of food is excessive: [qiatui sifeng (squeeze and push the four extra points Sifeng EX-UE-10 or prick with a thick needle); in case of abdominal pain add nie dujiao (pinch Abdominal Corner)].
- Eliminate heat [tui tianheshui (push Heaven Peaceful Water), dou xiaotianxin (tap Small Heaven Heart)].
- If the intestines are involved: [qing dachang xiaochang (clear Large and Small Intestine), qing qijuegu (clear Seven Bones), rou guiwei (knead Tortoise Tail)].
- If the heat is strong: [tui liufu (push Six Hollow Viscera), qing feijing ganjing xinjing (clear Lung and/or Liver and/or Heart using clearing method on the tips of the fingers), rou neilaogong (knead Laogong P-8)].
- Balance yin and yang to pacify shen [tui tianmen (push Heaven Gate), fentui kangong (open Water Palace), fenshou yinyang (open Hand Yin-Yang)].
- Strengthen defensive qi [tui tianmen (push Heaven Gate), fentui kangong (open Water Palace), yun taiyang (round-rub Taiyang EX-HN-5), rou erhougaogu (knead Big Bone Behind the Ear), rou ershanmen (knead Two Panels Gate), rou huangfeng rudong (knead Bee enters the Cave), qia hegu (squeeze Hegu LI-4)].
- In case of cold: [rou wailaogong (knead Exterior Palace of Toil), tui sanguan (push Three Passes), rou yiwofeng (knead Wind Nest); if there is cold in the intestines, bu qijiegu (tonify Seven Bones) and rou guiwei (knead Tortoise Tail)].
- In case of fever: [guasha on upper back (vertically, along five lines), qing wujing (clear Five Channels), tui shuidi laoyue (push Fishing the Moon in the Water with some water); in case of high fever add nie wuzhi (pinch Five Joints)].

For the two cases of xu-emptiness our basic treatment was:

- Strengthen the Spleen and regulate the zangfu [bu pijing (tonify Spleen), roufu (knead Abdomen), rou zusanli (knead Zusanli ST-36), nieji (pinch the Spine)].
- If there is frequent diarrhoea or soft stools: [bu qijuegu (tonify Seven Bones), rou guiwei (knead Tortoise Tail), rou dachangshu (knead Dachangshu BL-25)].
- Tonify Kidney to nourish jing [bu shenjing (tonify Kidney), rou erma (knead Two Men Mounting Horses), rou yongchuan (knead Yongchuan KI-1)].
- Moxibustion was used to tonify deficiency, mainly at Pishu BL-20, Weishu BL-21, Shenshu BL-23, Mingmen DU-4, Zhongwan REN-12, and Qihai REN-6.

Results

We evaluated 17 children during the two and a half months of the initial seven sessions, and saw 15 of them two months later for an eighth session of follow-up and consolidation. In all but one case we also had a follow-up telephone interview with the parents. We focused our evaluation not only on the main complaint, but also looked more generally at sleep, appetite, stools, skin, mood and behaviour. We also asked the parents about their experience of the clinic, and whether they continued to apply tuina after the end of the eight sessions.

We found that although the children still became sick from time to time, they became much less sick: the frequency of the pathological episodes decreased, the duration and severity of the symptoms lowered, prescriptions of antibiotics were less, and the number of missed school days and calls to the paediatrician were reduced. When the children got sick, most of the fevers were resolved just using guasha and cooling tuina techniques. Sometimes there was still a need for an antipyretic, which then worked more rapidly alongside the tuina. The necessity for antibiotics became rare.

Treatment was effective in the severe deficiency cases as well. The very weak boy with gastro-oesophageal reflux improved significantly: his cough, asthma, neck hyperextension and slow growth rate improved, and he stopped taking medication for his acid reflux. The little girl with severe neurological problems became more robust than her playmates at nursery and did not succumb to the flu that kept most of them at home. On the other hand, we found that the treatment only once helped her to eat by herself, so that she kept being fed by tube.

Sleep improved significantly through treatment and was the first symptom to get better. 14 of the 17 children initially presented with poor sleep. For some of the children, sleep was being disturbed by specific symptoms such as nasal obstruction, itching or colic pain; their sleep improved concurrently with the clearing up of the main symptoms. For most, however, poor sleep was simply part of the accumulation and heat pattern. In my own private practice I have found that sleep responds very well to this kind of treatment, whether or not it is the main complaint.

Changes to appetite were slower. Since it is a habit, it takes time to change. A poor appetite often relates to weak qi of the middle jiao, and will also take time to improve. Once it does, the child tends to get generally stronger, especially in terms of their immunity. In my own practice I used to stop treatment once the main symptoms had disappeared. From Julian Scott I learnt the importance of continuing with treatment until the appetite is really strong as an investment for the future. Good Stomach and Spleen qi is the basis for good health.

I have observed the effectiveness of tuina in the treatment of constipation since I first started in practice. Even if it is not a main complaint, the improvement of intestinal function is an important sign of the elimination of heat; in some conditions (e.g. retarded development) it may be the only sign that the treatment is working. Out of the 17 cases in the pilot study, nine had constipation. Again and again we found that the constipation, foul-greenish stools, and painful evacuation responded very quickly to treatment.

A voracious appetite is both a sign of accumulation-heat, and also its cause.

Skin disorders also improved or disappeared. On the basis of my previous experience, however, eczema does not always respond well to just tuina - acupuncture is generally also required, supported by ear-seeds or cupping of the umbilicus.

The children also changed in themselves. At the beginning some were very clingy and hid behind their mothers. After two or three sessions they surprised us by sitting or lying on the couch by themselves and looking around them whilst enjoying their massage. Something extraordinary also happened at home: they started to sleep in their own beds. The parents reported that their children became more confident, assertive and secure. Other children, initially very agitated and demanding, became more relaxed, with better behaviour and improved sleep. The effect of tuina on the shen of a child is particularly evident in clinical practice: one can clearly witness how an improved circulation of qi positively influences the mental and emotional aspects of a child's development.

We asked parents what they thought of the Xiaoxiao clinic, and of the medicine we used and taught. All of the parents interviewed approved of the clinic, especially the active learning of therapeutic methods as well as the general atmosphere of the place. All affirmed that they would recommend the Xiaoxiao Clinic to other parents based on our good results, the non-invasive and safe treatment, and the quality of the attention they received from their practitioner. All but one parent continued to use tuina at home.

A case history

David, two and a half years old, attended the Xiaoxiao clinic in October 2006. He presented with constant thick, yellow nasal discharge and caught every cold that went around, which was followed by cough and fever. During the previous winter he had taken antibiotics five times for bronchitis, otitis and conjunctivitis. His appetite was good, with a good diet, and he slept fairly well (taking a while to get to sleep, waking once or twice to drink, and sweating on his head at the beginning of the night). His skin was dry with two dry, non-itching spots on the legs. His abdomen was hard and his tongue was slightly red. David was quite shy, speaking quietly, but was interested and aware. Two days previously he had developed cold with fever and was taking antibiotics. He had no appetite, was thirsty, and his cervical glands were slightly swollen. He had also been diagnosed with a minor form of cryptorchidism:

his right testicle descended to the usual position in the scrotum only during a bath.

Diagnosis: Deficiency of defensive qi, phlegm, some heat, qi disorder in the right Liver channel.

Treatment principles: strengthen the middle jiao and the Lung; support the defensive qi and transform phlegm; cool the remaining heat; activate the right Liver channel.

Tuina Treatment: bu pijing feijing (tonify Spleen and Lung), yuntui bagua (round-push Eight Trigrams), fenshou yinyang (open Hand Yin-Yang), tui tianheshui (push Heaven Peaceful Water), fentui shanzhong (open Shanzhong REN-17), roufu (knead Abdomen), qing xielei (clear Costal Region), tui tianmen (push Heaven Gate), fentui kangong (open Water Palace), rou zusanli (knead Zusanli ST-36), rou yongchuan (knead Yongchuan KID-1), fentui jianjiagu (open Scapula), rou feishu pishu (knead Feishu BL-13 and Pishu BL-20), nieji (pinch the Spine).

Acupuncture Treatment: Sometimes Feishu BL-13 (moxa or needle), Fenglong ST-40 (needle), always Taichong LIV-3 (needle right-hand side for the testicle – this has given good results in two other children also). As usual, we taught a basic tuina sequence to the parents with techniques tailored to treat David's pathology.

During the course of the treatment David's mucus became thinner and lighter, and then disappeared. David caught a few other bad colds, but overcame them using just tuina (without recourse to antibiotics). By the fifth treatment, he was sleeping easily, waking just once to drink, with no need of cuddling. By the seventh visit, he had not had fever for two months, his appetite, stools and sleep were fine, and the surgeon reported that the testicle was now in the right place. After three more months, at the eighth visit, his stools, sleep, skin and testicle were fine, but he had developed chicken pox and otitis, and took antibiotics twice. This deterioration was after the birth of the sister, which had diverted the attention of his mother. One year later, the mother said that during the following winter David took antibiotics just once for otitis and that although he still sometimes caught colds, they were much lighter and shorter in duration.

Conclusions

After two years work at the Xiaoxiao clinic, we have made the following observations:

- Chinese medicine is very effective in treating children's respiratory diseases, as well as working to improve health more generally and prevent subsequent health problems.
- Treating children with tuina and acupuncture is not difficult.

- Working as a group as we do at the Xiaoxiao clinic seems to be good not only for therapeutic results, but also for the well-being of the practitioners.
- Parents appreciate the Chinese methods of treatment and feel empowered by learning how to support treatment at home.
- Childhood illnesses can often be treated without anything foreign being introduced into a child's body (Western or Eastern, chemical or natural), and it is probably good for children to experience that their own internal resources are enough to keep them well. ■

Elisa Rossi MD, Ph.D is an acupuncturist and psychotherapist. In 2002 she published *Shen*, translated in 2007 into English as *Shen – Psycho-Emotional Aspects of Chinese Medicine*. Elisa's first contact with TCM treatment of children was in 1983, during a course at the Academy of Acupuncture in Beijing. Later she studied paediatric tuina in more depth at Nanjing and Jinan Provincial Hospitals. She is deeply grateful to all the teachers, children, parents, colleagues and students with whom she has worked and studied, and especially to Julian Scott, Yin Ming and Zhang Sufang. Elisa can be contacted on mail@elisarossi.info or see her website at www.elisarossi.info

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- 2 With the essential contribution of Rossella Cignetti, Letizia Frailich, Ruggero Scaccabarozzi, M. Grazia Terzi, Maurizio Zanghi
- 3 Cupping the umbilicus is usually used for children over 3 years old (not in babies). The cup is applied for 1 minute each time, repeating 3 times (exercising particular care when cupping young children). The activation of the umbilical area affects the
- 4 Suwen, chapter 2 (trans. Laura Caretto) in Rossi, E., (2007). "Shen – Psycho-Emotional Aspects of Chinese Medicine" Churchill Livingstone

yuan qi, which is generally involved in dermatological and allergic pathologies.