

SHIATSU & ASTHMA



What is Asthma?

Asthma (from the Greek ἄσθμα, *ásthma*, "panting") is a common chronic inflammatory disease of the airways characterized by variable and recurring symptoms, reversible airflow obstruction, and bronchospasm. Common symptoms include wheezing, coughing, chest tightness, and shortness of breath.

Source: Wikipedia, April 2013

RESEARCH

Effect of acupuncture or acupressure (Shiatsu incorporates acupressure) on quality of life of patients with chronic obstructive asthma: a pilot study.

[Maa SH](#), [Sun MF](#), [Hsu KH](#), [Hung TJ](#), [Chen HC](#), [Yu CT](#), [Wang CH](#), [Lin HC](#).

School of Nursing, Chang Gung University, Tao-Yuan, Taiwan. [J Altern Complement Med.](#) 2003 Oct;9(5):659-70.

OBJECTIVES: Acupuncture and acupressure are known to relieve symptoms associated with asthma, but the benefits to patients with chronic obstructive asthma have not been fully evaluated. In this pilot clinical study, acupuncture or acupressure was incorporated into the standard care for adult patients with chronic obstructive asthma to determine their contribution to the improvement of their quality of life and relief of symptoms. **DESIGN:** A prospective, randomized study that involved 8 weeks of treatment at Chang Gung Memorial Hospital (Tao-Yuan, Taiwan) was conducted between March 1997 and September 1998. Forty-one (n = 41) patients with chronic obstructive asthma were enrolled. Patients were randomly assigned to receive acupuncture in addition to standard care (n = 11), acupressure and standard care (n = 17), or standard care alone (n = 13). Twenty (20) acupuncture treatments were administered, and self-administered acupressure was performed daily for 8 weeks. Six-minute walking, the Dyspnea Visual Analogue Scale, the modified Borg scale, St. George's Respiratory Questionnaire (SGRQ), and the Bronchitis Emphysema Symptom Checklist (BESC) were used at the beginning and end of the 8 weeks of treatment. **RESULTS:** The total SGRQ score of acupuncture subjects showed an average 18.5-fold improvement (95% confidence interval [CI] 1.54-211.48, p = 0.02); the improvement for the acupressure subjects was 6.57-fold (95% C.I. 0.98-44.00, p = 0.05). Additionally, for patients who received acupressure, the irritability domain score determined by the BESC exhibited an 11.8-fold improvement (95% C.I. 0.88-158.64, p = 0.06) after adjustment for covariables. The other variables did not differ from those of the controls. **CONCLUSIONS:** Patients with clinically stable, chronic obstructive asthma experienced clinically significant improvements in quality of life when their standard care was supplemented with acupuncture or acupressure.

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What do Shiatsu Practitioners Treat?

Nicola Pooley, MRSS(T) and Philip Harris, MRSS.

Conclusion: It is clearly evident from both the pilot study (published at the first stage) and the main survey that musculoskeletal and psychological problems were the most common conditions presenting for Shiatsu treatment. The most frequent musculoskeletal problems were neck/shoulder problems and arthritis. Depression was the main psychological problem followed by stress and anxiety. Other conditions commonly reported in the main survey included Myalgic encephalomyelitis, irritable bowel syndrome, hypertension and asthma.

CASE STUDIES

The Joy of Breathing

Shiatsu practitioner Linda Sonntag, MRSS says it's never too late to treat chronic asthma

As she approached her eighty-fifth birthday last Christmas, Doreen Thompson was finding her chronic asthma increasingly frustrating and depressing. It had restricted her lifestyle to the point where even taking a shower in the morning wore her out. A talk I gave on Radio Suffolk about my own experience in recovering from asthma made her decide to try shiatsu because, 'I have an open mind and I like to try new treatments – I've never been very keen on drugs.'

A retired tax officer, Doreen had worked for years in an office so smoky that people often passed out for lack of air – 'I can remember fainting several times.' Lung problems had started with a bout of pneumonia at the age of ten, but the real trauma came during the Blitz in an air-raid shelter in London when a bomb fell nearby with devastating results. 'There was a lot of dust and everyone was panicking, except me. I kept calm even though I was separated from my baby and my husband.' She had to practically stop breathing to control her fear and dread and to keep from being choked to death, and from that time on any stress or difficult emotion brought on an asthma attack.

After sixty years of chronic lung problems Doreen, who lives in the Suffolk village of Chelmondiston, marvelled at her own longevity. 'They say a creaking gate lasts longest and it's true, because I've outlived all my family.' A tremendously positive approach was keeping her going. Her second husband died eight years ago and as a long-term carer she continued to want to look after people, so she joined the team of voluntary workers at a local home for the elderly. There at the age of 78 she met fellow-volunteer Stan, who has now been her partner for seven years. Weekends spent with Stan and singing in a choir to exercise her lungs and her love of music were the highlights of her life, but the asthma was gradually draining away her sparkle. She was reduced to spending most of her days in a chair and a lot of time worrying about how to get everything done. 'Even preparing food was exhausting, which meant I lost interest and my appetite was poor.'

Doreen's doctors told her she had permanent damage to her lungs and it was a case of coping as best she could with a nebuliser four times a day, inhalers, and steroid tablets to calm the worst attacks. When tablets for high blood pressure were added to the list of drugs she was taking, she developed lichen planus, an unsightly red rash on her legs, back and arms, which caused itching in the night until her skin bled.

Doreen's treatment diary

1

When I first worked on Doreen her lungs rattled and her upper chest heaved and shuddered as she gasped for air, but even the initial treatment brought a measure of lasting calm and she was surprised that she could lie still and relax for a whole hour. 'I usually find it so hard to slow down,' she said delightedly.

2

After the second treatment a month later she noticed a marked improvement. 'I feel more like a normal person and less like an invalid. Before, when I was out shopping, I had to avoid getting into conversation with people, because it was impossible for me to walk and talk to them at the same time.' Asthma was making her feel isolated and unfriendly. But now she suddenly found herself seeking people out and when they asked her how she was, she discovered that she was answering: 'I feel really good!' – it was the first time she'd given a positive response in years.

The transformation was dramatic. 'Before I had shiatsu, I used to sit in my chair in the sitting room, getting thirstier and thirstier, dreading having to go into the kitchen to make a drink, because I knew it would completely exhaust me. Now I find I'm in the kitchen before I know where I am!'

3

After the third treatment she was receiving compliments, such as 'You're looking so well! What's happened?' and was able to cope with the drama of attending two parties with a broken front tooth, something that would have given her dreadful anxiety before. When the new false tooth went missing at the dentist's, she sorted it out without a fuss. 'I am so much calmer now in a crisis.'

4

After the fourth treatment she was feeling very active and energetic, had enjoyed a couple of short walks without her trolley and described herself as 'skipping about the house'. She had also spring-cleaned all her cupboards. The skin complaint had completely cleared up. She had cut right down on her inhalers and was down to only once a day with the nebuliser.

5

By the sixth treatment she was able to walk all the way round town twice a week without her trolley. After a lunch out in Felixstowe she surprised Stan by climbing 24 steep steps up the cliffside to the car park. And they have been on holiday to Devon using public transport and changing amid the hubub of Victoria coach station, something her fear of crowds would not have allowed her to contemplate before.

Doreen is an inspiring person to work with. As with all holistic therapies, the practitioner delivers the treatment, but it is the client's attitude of openness, responsiveness and positive commitment that allows its power to work.

CASE STUDY 2

Shiatsu Practitioner Sara Browne, MRSS

Name: T.R. (male). Age: 35. Occupation: Driving Instructor

M.C.

Asthma (mild-moderate) – onset approx 18 months ago.

Induced by exposure to dust, worse on exertion. (Uses inhaler).

Coughing and wheezing disturb sleep and are bad in mornings.

S.S.

Prone to bad colds, leading to sinus infections.

Tends to have lower backache in mornings, which wears off during the day.

Frequently feels tired.

Feet often feel cold.

Prone to bouts of flatulence and diarrhoea.

M.H.

Hay fever – adult onset.

Long standing history of lower back ache.

Adenoids removed as a child.

Observations

T.R. is of average height, slim build and has a healthy facial colour and complexion. He talks a lot and likes to catalogue his complaints in great detail. During treatments (despite saying he feels relaxed), he rarely shuts his eyes and tends to pre-empt and assist movements. In supine feet splay outwards. He has a noticeable excess of saliva when talking. Skin on palms of hands appears dry white and flaky.

T.R. finds difficulty relaxing and says he is 'always on the go', although he does no specific exercise. He is married and spends his spare time looking after his 3 year old son and 'DIY' in his new house. He enjoys his work as a driving instructor and although this would seek a potentially stressful occupation, says he feels more stressed at home. He describes himself as a 'worrier' and a 'perfectionist' – he cannot relax if he has not finished all he has set himself to do. He also confesses to being a 'bit of a hypochondriac'.

He eats a balanced, healthy diet (though has a 'sweet tooth') and does not smoke.

Treatments

1. TH jitsu L U kyo

Cough keeping him awake at night. Shoulders tight, with tense muscular 'knots'.

Chest extremely tight, upper body held rigidly upright in side position. Hips tight. Arm muscles tight, while leg muscles lack tone. Eyes open throughout treatment, despite which T.R. tells me this is the 'most relaxed' he has felt 'for ages'.

2. 20/01/05 LU jitsu SP kyo

Cough improved and slept better for two nights after last treatment, though now again waking early ('mind churning') and coughing badly again. Hips, shoulders and chest tight.

3. 01/02/05 LU jitsu SP kyo

Dry cough has persisted, particularly at night, however wheezing has stopped and he has needed inhaler less than usual. Sleeping better. Hips and shoulders still extremely tight, but noticeably looser by end of treatment. Chest beginning to 'open'.

4. 17/02/05 LI jitsu KD kyo

Coughing and wheezing improved dramatically after last treatment, feels breathing is easier and deeper. Lower back ache for past few days. Chest and shoulders feel less tense, increased range of movement.

5. 03/03/05 LU jitsu SP kyo

Asthmatic symptoms remained absent after last treatment, until T.R. swept up dust yesterday, leading to a 'wheezy night'. Back pain resolved. Shoulders and chest less tight.

6. 17/03/05 TH jitsu LU kyo

No asthmatic symptoms since last seen, but he feels chest is 'tightening up' again. Has sore throat. No back pain, feels less stiff in mornings and feels he has more energy. Usual tension in shoulders and hips, but looser than previously. Chest very tight again.

7. 31/03/05 SP jitsu KD kyo

Sore throat better. No asthmatic symptoms, even after playing football. No back ache. Hips and shoulders feel looser. Chest still tight, but releases more readily. Eyes closed throughout treatment and deeply relaxed afterwards.

Diagnosis

T.R.'s symptoms relate to a Lung imbalance, with associated Kidney Yang deficiency and an underlying Damp and weakened Spleen.

The primary aim of treatment was to relieve asthmatic symptoms by encouraging Lung Ki to descend and disperse, and by strengthening the Kidneys to 'grasp' Ki from the Lungs.

Analysis

Lung imbalance is responsible for T.R.'s asthmatic symptoms and also secondary symptoms of proneness to colds and sinus infections, hayfever, tendency to fatigue, cold feet and dry skin on hands.

If Wind, Cold or other outside pathogens (eg. dust) invade the Lungs, they become obstructed with Phlegm and Dampness, thus preventing Ki from descending and giving rise to wheezing and coughing. This impairment of Lung's descending function has led to Ki and body Fluids becoming stuck in the thorax, causing tightness in the chest and proneness to sinus congestion. Lung weakness, and therefore weak Defensive Ki, has also resulted in lowered resistance to infections and colds and his sore throat. Lung deficiency has also led to dry skin on hands, because Lung Ki is insufficient to disperse Fluids to body extremities. Psychologically, T.R. displays traits which relate to weak Lung Ki. He appears rather nervous and 'ungrounded' and worries excessively about his health; he can be overly perfectionist and has difficulty relaxing and knowing 'when to call it a day'.

T.R.'s symptoms of lower back ache, fatigue, cold feet and loose stools could relate to Kidney Yang Deficiency.

His secondary symptoms of flatulence and diarrhoea, excessive saliva, his tendency to 'mind churning' and over-thinking, as well as his sweet tooth, all relate to an underlying Spleen imbalance, which will need to be addressed later.

Treatment focussed initially on releasing tightness in the shoulder and chest area, to allow chest to open and clear. I use LU 1, LU 5, LU 9, BL 13 and GV 14 to help support Lung function and KD 1 and ST 36 were used in all treatments to encourage the downward movement of energy and the 'rooting' of Kidney Ki. ST 40 was used for Phlegm.

To strengthen Kidney Yang, BL23, CV 4 & 6 and KD 3 & 7 were used. I also held LU 7 and KD 6 simultaneously, to open up the CV, which will help communication between Lung and Kidney. In treatment 4 I also use BL 23, 52 and 40 for lower back ache, which went after this session.

Once T.R.'s chest started to relax and open, there was a very significant change in the severity of his symptoms – wheezing and then coughing reduced dramatically and only returned when he exposed himself to dust. By the end of the course of treatments he had been free of asthmatic symptoms for many weeks and had not needed to use his inhaler. Because wheezing coughing had ceased, he was sleeping better. He said he felt he was more aware of upper body tension and particularly the need to 'open up' his chest.

By the final session, T.R. was closing his eyes and allowing himself to 'let go' during Shiatsu, an ability to relax which will hopefully start to extend to other areas of his life. At the same time he feels he has more energy and an increased desire to exercise.

Future treatments will concentrate more on the nourishing and grounding aspects of the Spleen, to help avoid worry and over thinking, which prevent the free-flow of Ki to the Lungs.

Conclusions

T.R. is delighted with the improvement in his asthma and also feels there have been benefits to his general flexibility and a decrease in lower back ache. He is keen to continue with once monthly Shiatsu treatments to maintain these changes.

As his asthma has improved, he also feels more inclined to take exercise again, which is a positive change. In view of his job as a driving instructor, which involves prolonged periods of sitting, I would recommend he takes as much gentle exercise as he can (particularly something like Yoga or Tai Chi, which would help him relax and clear his mind too).

His increased awareness of upper body tension and ability to relax more readily are encouraging, because they will help support a steady flow of breath and therefore better Lung function.

T.R. needs to continue to develop the Lung virtue of Reverence and respect for his body – through relaxation, taking sufficient exercise, attention to diet (avoiding sugary and dairy foods, which are Damp-producing), always wearing a mask for dusty DIY jobs and learning an acceptance of when to stop, even if things are not quite 'perfect'. With these changes and occasional Shiatsu treatments, I would be optimistic that his asthma will remain under control.

Questionnaire:

Name: Tim Rowson

What were your main reasons for receiving Shiatsu treatments?
Suffer from asthma.

Do you feel Shiatsu has helped?
Yes

If yes, in what way/s?

I find it relaxes me and opens up my chest as sitting in a car all day makes it quite tight. Although I feel fairly tired after the session I feel stimulated a few hours later with more energy.

Having started the treatment and been doing it for over a year I certainly do not have to use my inhaler as much.

CASE STUDY 3

A CASE OF ASTHMA

Michael Webster

'I have a wide range of medical problem', Paul said, when he booked his first appointment with me, can shiatsu do anything about clearing them up?.

Our continuing discussion revealed that Paul suffered with chronic asthma, perennial rhinitis, hay fever, eczema, and almost constant head-aches and had allergies to dyes and chlorinated chemicals, and these were just the major symptoms!

My answer to his question was, that I had successfully treated most of these conditions before with shiatsu, and if Paul was willing we could commence treatment on the understanding that if there were no significant and positive results within three treatments, then we would accept that shiatsu was not for him.

A detailed case history revealed that Paul felt that the medication he took daily was having an adverse effect on his life, leaving him open to infections. He also had periods of low energy and ongoing skin problems.

Paul also claimed that his relationship with his wife, who proactively supported him in every way, was also being affected, through the actions of the steroids which he took daily.

Paul wanted to be in a position where he was healthy enough to reduce his medication, if not actually stopping it altogether and added, 'There is nothing that I am not prepared to do, or give up if it will help my condition to improve'. My experience was that when the chips were down this was not always the case, however time would tell.

Paul brought to his first appointment, his daily peak flow chart (see, what is a Peak flow meter/) which was carefully labelled showing that his present peak flow state was in the region of 370 litres per minute (depicting a very severe condition). Paul's aim was to improve this to above 450 Lpm, and without the ventolin, which helped him to breathe more easily and was part of his daily medication.

Progress over the first three treatments was steady.

Paul had recovered quickly from an infection, which had been suspected by shiatsu diagnosis. The shiatsu treatment had also loosened up the mucus, which, with some polyps, had blocked his airways and his breathing, and his energy levels had also improved.

The headaches, which had plagued Paul on an almost daily basis, had gone, improving his temper and quality of life.

The treatments supported by dietary changes, which Paul had strictly kept to, were taking effect.

Six days after the first treatment, Paul's peak flow touched 400, without Ventolin. After the second treatment peak flow dipped for seven days and then climbed to 380. After the third treatment Paul's peak flow moved to 400, and then continued for another 27 days over 380, followed by 15 days between 400 and 450 after which it was constantly between 400 and 450.

It was after 5 treatments Paul announced the wonderful news that he had reached the magic figure of 450 on his peak flow; and without the use of ventolin.

He was, he claimed, 'A very happy man'. After the 5th treatment his peak flow moved between 430 and 480Lpm.

As shiatsu is an holistic therapy and treats the whole person, other changes in Paul's health had taken place over this same period. Sinus congestion and pain had disappeared, and there had been a reduction in the amount of mucus being expelled.

Paul had recorded that he was now able to breathe through his nose for the first time in years, and his skin conditions had improved.

There was an odd phenomenon, which remained for some time unexplained and that was, why there was a dip in Paul's peak flow immediately after shiatsu treatment? Paul's wife supplied the answer when she unwittingly told me that they always went for a curry after travelling to the clinic for Peter's treatment.

The spices in Curry throw heat off of the body instead of conserving it internally, and this was the opposite of the nutritional recommendation, which had been given to Paul. As a result of this Paul's condition worsened temporarily.

'I cannot thank you and shiatsu enough for the huge improvement in my health. I can breathe again, and I can now get on with my life'. PR

What is a Peak Flow Meter?

A Peak flow meter, is a device that measures air flow, or peak expiratory flow rate (PEFR). Asthma sufferers blow into the device quickly and forcefully, and the resulting peak flow reading indicates how open the airways are, or how difficult it is to breathe.