

Using KAMPO as a tool for approaching traditional medicine systems, comparing the basic concepts in these systems, and looking for similarities with between these systems and modern western medicine.

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### **Abstract**

Central concepts in traditional medicine systems are: life energy (Prana, KI/Chi, vis vitalis), 3 qualities (Rajas-Satva-Tamas / Yin-Chu-Yang) implementing the law of Polarity, and the 5 elements and their fluctuating quantities and changes. Of these, the whole universe - macrocosmos and microcosmos- is built, according to the ancient books dealing with spiritual-, philosophical- and medical matters. When comparing basic books on Ayurveda, Tibetan medicine, TCM, KAMPO (Sino-Japanese- Traditional Herbal Medicine), Persian medicine, and European traditional medicine- technical terms differ according to different languages. However the basic concepts remain the same, as do the approaches to healing.

### **Introduction**

A citation from of the Shokanron/Shang han lun 傷寒論(late Han-age 25-220 AD)<sup>1</sup> may be a helpful starting point to begin the topic and it also highlights the need- not only 2000 years ago, but also at the beginning of the 21st century- for developing the character of those, who are acting as physicians (fig.1).

A possible way to study the theory and practice of traditional medicine systems is to go to countries, where these medical systems are still an integral part of daily therapy. To understand the theoretical background of these complex systems, reading the ancient books in the original language is preferable but not essential as translations offer a more practical approach. To cope with languages like Sanskrit, Chinese, Korean, Japanese, Tibetan, Latin, Greek, Persian or Arabic is at the beginning time consuming, but the advantage to the reader is that it is a direct approach that avoids misunderstandings caused by inadequate translations. Adequate translation not only demands an understanding of philological and medical terms of the material involved, but requires also the personal involvement of the translator in order to read between the lines of the essential concepts and translate the essence of the subject matter into another language. Practicing and comparing the philosophical concepts of these systems will eventually lead to the understanding of the underlying concepts in all the apparently different medical systems.

## Material and Method

To demonstrate that there is one root for these various medical systems, (in the same way that there is one human form though many variations are seen), a form of Socrates method of interrogation is used <sup>4</sup>. Is there a necessity, a demand, a basic purpose for a MEDICAL system? What is the concept for Life energy, the Three Qualities, the 5 Elements, Healing? Introducing the Source-Information- Sender-Transformation (Encoding)-Transportation-Translation-Receiver concept as a tool for investigation.

## Results and Discussion

Kampo, traditional sino-japanese herbal medicine is, along with acupuncture, dietary procedures and massage, widely used in Japan together with modern western medicine<sup>2</sup>. In Japan about 200 prescriptions and their single drugs are included in the medical system and treatment is paid for by personal insurance. Kampo-prescriptions are composed of 2 to 15, sometimes more, single drugs, which are blended according to old classical books. Most of the drugs are of herbal origin, and a small percentage are made of mineral, less are from animal parts. Today in Japan there are about 360 various drugs in common use, but as in China over 5000 single drugs are known. Prescriptions are still prepared as decoction or sold as granulat. During the decades since the end of World War II clinical and pharmaceutical research projects have been performed extensively. In recent years increasing funding and collaboration involving various institutions of different scientific fields led the research by using the latest in research technology <sup>2a,3</sup>. Kampo is based on the ancient books SHOKANRON/SHANG HAN LUN 傷寒論 and Kinkiyoryaku/Jin-gui-yao-lue 金匱要略.

It is still a matter for discussion as to whether these books are compilations of older texts, some of which are lost. It is also not clear if the author of the Shokanron/Shang Han Lun, is Chochukei/Zhang-zhong-jin 張中景. Though the books use the basic concepts of KI/Chi氣, the 5 elements, and the 3 qualities, these are not explained in detail, neither is there any philosophical discussion regarding the cosmic origin of these concepts such as in the Koteinaikei/Huang-di-nei-jing 黃帝內經.

The Shokanron/Shang han lun as well as the Kinkiyoryaku/Jin-gui-yao-lue deal with the dynamics of the changing processes of sickness, the diagnostic procedures and the appropriate prescriptions. Both books are practical guides for the physician. On invading the organism a pathogen, bad KI/Chi acts on the three layers of the body successively or simultaneously and as a reaction the organism produces signs of sickness. This process of action and reaction in the patient leads to the concept of the 6 stages of disease; 3 stages of Yang-disease, 3 stages of Yin-disease and a cross over. As in Ayurveda, TCM., etc. and modern western medicine, the concept of SHO, the DiaGnosis, the knowledge of the picture, the picture of the status of a patient causes the HO, the adequate mode and means, the corresponding therapies. Sickness is a condition of imbalance. Health is a condition of physical, mental, spiritual balance (fig.2).

The necessity of getting information from the patient created diagnostic tools and procedures, using the 5 senses described in the ancient books (fig.3, 3a). The so called sixth sense is not specially described in the ancient medical books, but it is expected to be exercised at the discretion of the physician. This technique was handed down from teacher to

pupil as a form of esoteric wisdom. Basic concepts, diagnostic tools and procedures and therapies like herbs, diet, acupuncture, counselling, massage are common in traditional medicinal systems. Though not so obvious traditional diagnostic procedures are also in use in modern medicine, besides the technical equipment, which only helps to enlarge the natural range of perception of the 5 senses.

Is there a necessity and a demand for a medicinal system?

<b>Traditional Medical Systems</b> <b>different languages &amp; technical terms</b> <b>basically ONE root</b>	
■ India: Ayurveda	■ 5 Elements
■ Tibet	■ 3 Qualities
■ China: TCM	■ 5 Organs of perception
■ Korea	■ 5 Organs of action
■ Japan: Kampo	■ Physical body
■ Persia	■ Emotional body
■ Egypt	■ Mental body
■ Europe:	■ Prana. Ki. Chi. vis vitalis.

During the evolution of mankind, when man formed social communities, the need to help each other in case of sickness or injury created the demand of persons with special skills. Practical and theoretical skills were compiled and handed down from generation to generation of skilled personnel first as an oral tradition and later in the form of writing. This compilation of information when systemized and categorized lead to the development of a medical system, created by human endeavors, put to work through man, for the benefit of man. The primeval source of knowledge is of God (fig4, 4a), which is blended with information by observing action and reaction and the results of trial and error. The basic purpose of a medical system is to provide information on theory, practical skills and possible therapies. In cell systems, organisms, broadcasting systems, and in the universe information is transported from a source to a receiver. For transportation information has to be encoded. The code may be a word, a string of words, digits, colours, pictures, ideas, or a pair of bases and sugars (DNA). When the coded information reaches the receiver it has to be decoded again. Encoding and decoding are a process of translation. Translated information has to be understood by the receiver, to create the correct response as directed by source.

This mode of information transportation is also found in cells, during protein synthesis, when a part of DNA is copied, transcribed to RNA, and then translated in the Mitochondria to process amino acids. In the case of traditional medicine systems information (knowledge, concepts, skills) is coded into words, strings of words, which are then transported by air, or by graphs (a, b, c, complex drawings like Chinese characters, Sanskrit). The code then has to be

translated by the receiver (man, student, physician). The information also has to be understood in order to create a correct specific response as directed by the source.

In the case of patient physician relation, the sources of information for the physician are two fold. One is the medical system, a complex of various concepts, physical, mental, spiritual, which he or she learned during years of training, the other is composed of the patients status, a compound of various physical, mental, spiritual symptoms. This complex of symptoms is coded for transportation, perceived using diagnostic tools (five senses) and decoded in the observer, the physician. In the mind the translated information of the patients status is compared with the concepts that have been learned during training and associated with matching therapeutics. Therapeutics is coded information which is decoded in the receiver, the patient, and put into action. This action of the therapeutic will lead to a reaction in the receiver, the patient. The effect of this reaction is the altered status of the patient, information, which will be again transformed in the process of coding and decoding, creating an action in the physician, which is a reaction to the reaction of the patient. The strain of action and reaction is seen as effects. In case of medical science, the effects are the changing symptoms as described by an observer. By describing the changing symptoms the observer tries to define the force which is the cause. Changes in DNA can be a source for cell alteration and cancer. But why do alterations in DNA occur? A lot of causes are named. DNA is composed of molecules which are composed of atoms. The concept of atoms is expressed already in Ayurveda by Charaka (300 BC?), Kanada (600 BC?) in the philosophy of Vaisheshika (who explained the theory of Parmanu which is the concept of atoms and atomic structure), as well as by the greek philosopher Demokrit (460 BC- about 370 BC) respectively <sup>4a</sup>. An atom, according to modern scientific understanding, is composed basically of 3 major particles, proton, neutron, and electron. Effects of electric and magnetic force can be observed and described, but what they are, we do not understand. Cancer as a product of effects is not only the result of changes in DNA but also of changes on an atomic level and in the electromagnetic fields. What looks like a cause to an observer, is again only an effect. Though all scientific explanations aim to grasp the creative force they more often end up as mere descriptions of a sequence of effects. As this universe is due to change in time, different observers get different perspectives of one and the same object at a certain time of observation. Mistakes in the Source-Information- Sender- Transformation (Code)- Transportation-Translation-Receiver complex often happen during the transitions when transformation takes place. The problem of translation from source language to receptor language in the context of differing cultures and periods in time is summed up accurately by Jürgen Kovacs in his linguistic reflections on the translation of Chinese medical texts <sup>5</sup>. In all traditional medicine systems there is the concept of life energy. In Ayurveda it is coded as Prana, in TCM / Kampo as Chi/Ki 氣, in traditional western medicine (such as Greek, Roman, Hildegard and Paracelsus to name but a few), it is called vis vitalis, Archeus. All these different codes transport the same one concept. In the case of medical systems code variation and limitation of decoder capacity- according to different geographical locations even when the same code is used in the same area- are a major obstacle and the cause of many mistakes in translation resulting in misunderstandings and dogma.

### **What is the concept of life energy**

Some of the terminology used in traditional medicinal systems for this elemental force- resembling different encoding- are summed up in fig.5.

Subjective descriptions given by patients during acupuncture are: ascending cold or warmth, goose pimples. Is that life energy?

Popp<sup>6</sup> describes the phenomena of biophotones of cells or organisms. In modern science the term energy embodies understanding of various concepts in chemistry and physics, on an atomic level or in cells such as ATP (AdenosinTriPhosphate). ATP is handled as an equivalent of the life energy of the cell. However a closer glance reveals that this is also only a description of an effect of this elemental force. Life energy seems to be a force, her various and numerous effects as well as her absence can be studied and one can experience these effects subjectively, but its nature and essence one is not able to perceive. In Philosophy the description of this force leads to concepts regarding the creation of the universe, the source from which all originates, the dynamic interactions of macrocosm and microcosm, and eventually to theosophy. When reading the preface of the Shokanron/Shang han lun one finds these concept summed up in one short passage (fig.6), the words translated into pictures may help to elucidate the differentiation of life energy as described in fig.6a.

In the traditional medical systems of both the Orient and the Occident the understanding of life energy is one of a basic, all-penetrating and maintaining force. This elemental force is the source of all forms of energy encountered on this earth and universe and elsewhere, whether known or yet unknown to humans. In Ayurveda the same basic concepts of how the cosmos came in to being, of life energy and its subdivisions are described <sup>7</sup>. According to the Upanishads, the hermetic teaching comprehending the gist of the Veda, a period of creation and a period of dissolution succeed each other, a cycle which ends in Brahman, the self existing self revealing ultimate reality, and emerges again at the beginning of the next cycle. A similar concept is that of the Platonic year. One Upanishad says, that all is based on spirit. Spirit is the foundation of the universe. Spirit is Brahman. This leads to the concept of Advaita, the One in all, the non dualistic.

In Chinese philosophy of Laozi / Lao Tsu 老子 (600 / 400 BC?)<sup>7a</sup> Brahman is resembled by the DAO. Examples of the principal universal cycle of creation, prosperity, mantainance, decline and dissolution are found in all variations but over a different time span. The cycle of an erythrocyte is about 120 days, that of a one day fly 24 hours, of a tree about 500 years, the life cycle of a sun millions of years.

### **What is the concept of the three qualities?**

Some of the words used in traditional medicine systems for these phenomena- resembling different encoding- are summed up in fig.7. The words Rajas-Sattva-Tamas, Yin-Zhong-Yang, In-Chu-Yo, envelope not only the idea of polarity, where Sattva / Chu describes the quality when Rajas-Tamas / Yin-Yang are in a status of equilibrium, but also stand as synonyms for opposing patterns found in this universe (fig.8). Mixture and changing quantities of the 3 qualities and the 5 elements evolve in a time dependent manner, creating the 3 dimensions of the universe and are prevailing components in the many.

### What are the 5 elements?

Some of the words used in traditional medicine systems for this phenomena- resembling different encoding- are summed up as follows:

Ayurveda	States of matter	Principle	Roman Tradit.Europe <sup>(8)</sup>	TCM / Kampo	Modern medicine
Akasha	etheric	Space	Qinta essentia	Wood	
Vayu	gaseous	Movement	Air	Metal	
Tejas	radiant	Light	Fire	Fire	
Apa	fluid	Cohesion	Water	Water	
Prithivi	solid	Density	Earth	Earth	

Linking together the basic concepts of KI/Chi, blood, body fluids with the 5 elements and the 5 organs respectively as well as their interaction as understood according to the ancient books of Koteinaikei/Huang-di-nei-jing 黄帝内经 and Shokanron/Shang han lun is demonstrated in the drawings of fig.9.

### Having a look on modern pathophysiology:

In modern pathology a local inflammation is described as a reaction on a pathogen which has entered a living organism. Clinical symptoms are, in their order of appearance: rubor, calor, tumor, dolor, functio lesa. Translation of the Latin encoding into English is redness, warmth, swelling, pain, mal function. The same process is described in TCM / Kampo by a different string of codes: Local yang status with local KI/Chi excess, stagnation of KI/Chi, stagnation of body fluids and blood producing symptoms of redness, warmth, swelling and pain, which may lead to partial or total impairment. Enlarging visual perception of the observer by using a microscope, the above described symptoms are effects caused by accumulation of fluid, lymphocytes, granulocytes, macrophages. Summing up the findings of the action-reaction-action processes at macroscopic and microscopic level will produce a concept of description: At the arterial venous capillary area the damage performed by a pathogen causes degradation of tissue, which is composed at a chemical level of carbon, hydrogen and oxygen molecules (earth, water, fire), forming a complex network of proteoglycans. Released vasoactive peptides, in general composed of carbon, hydrogen and oxygen, cause vasoconstriction of small venous capillary vessels. Impairment of microcirculation leads to stasis of blood, lack of oxygen and accumulation of metabolites causing a pH shift to acidity. Radicals will form and scavenger electrons of fatty acids of endothelial cell membranes. This will result in further damage with leakage of fluid, lymphocytes, granulocytes. The dynamic of enhancement and suppression, losing and gaining equilibrium, at cellular, molecular and atomic level are energy dependent processes, described in modern molecular pathology using different technical terms. However where the basic principle of changing poles, the concept of Yin-Yang, Rajas- Tamas is always at work.

### **What is the Healing Concept?**

Health is regarded as a condition of balanced mental, psychical and physical aspects of a human being. Sickness is therefore a condition of imbalance. To maintain a status of equilibrium a constant energy consuming process is necessary (fig.10). In the system of Ayurveda, TCM, Kampo, like in other traditional medical systems of the world, the human being is regarded as a microcosm reflecting the macrocosm. Therefore treatment aims not only at improving or regaining physical health but also takes a patient's psychic and mental imbalance into account. Basically every procedure aims to replenish some deficiency, to subdue an excess of overall life energy, or to eliminate local deficiency or excess of subdivisions of life energy. Further to balance the 3 qualities in their 3 aspects (physical, mental, spiritual), bringing the mixture of the 5 elements into harmony (fig.11).

Appropriate methods implement not only medicines (plants, minerals, animal products, chemicals,) surgery, massage, meditation, food (edible, visible, audible) but also aim to induce in the patient's mind a process of thinking, which will result in a change of life style. Care for the environment (air, water, earth). Reduction of egoism and an increased awareness that this physical body, though wonderfully complex and functional, is designed to last for 120 years at best (according to the Veda) and will inevitably decline, will help to achieve to lead a balanced life. A passage from the preface of the ancient Shokanron/Shang han lun - in keeping with the basic aim of the Ayurveda - demonstrates that it is essential to preserve this body in as good a condition for as long as possible, in order to achieve the ultimate goal in life: to become a human being (fig.12, 13).

### **Conclusion**

By using Kampo an attempt was made to illustrate that there exists a common root for all the apparently different traditional medical systems. A further attempt was made to connect the basic concepts of the traditional medical systems with modern western medicine in order to demonstrate similarities.

To investigate the fundamentals, or the meaning and purpose of a medical system, an approach was chosen using Socrates technique of interrogation (as demonstrated in Plato's Politeia) and it was combined with modern computer telecommunication terminology to elucidate the strings of information common to all medical systems.

The main purpose of a medical system is to transport information. Though technical terms used differ according to different codes, fundamental concepts are common to all traditional as well as modern medical systems.

In this complex material one easily tends to get lost in details. According to the Upanishads details and complexity are characteristics of MAYA, the grand coat of the Supreme. Forms are subject to change over the course of time in the same way as illusions. Therefore in the search for the truth one has to frequently remind oneself not to get distracted by the details and the diversity of the subject. In the course of studying the theory one should not forget that the unbalanced being, the patient, inspired the creation of a complex MEDICAL SYSTEM.

It is the patient who as an indicator demonstrates to the physician the efficacy of this system and provokes in the best instance an interrelated but independent interaction between the patient and the physician which contributes to the individual's development of personal

character.

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**Notes:**

This text contains Chinese characters.

As for cited illustrations: 3. Terasawa Katsutoshi, Japanese-Oriental Medicine, Insights from Clinical Cases, translated by Dr.med.univ.Dr. med.vet. Bacowsky Helmut, K.K.Standard Mc Intyre Tokyo, 1993, ISBN 915719-05-7C3047, I am the copyright holder of the English translation.

I am also the copyright holder of the German translation: 1. Bacowsky Helmut (Hsg.): Shokanron/Shang han lun: Die klassische Grundlage von Kampo (Fernöstliche traditionelle Phytotherapie). Mit einem Kommentar zur klinischen Anwendung sowie ein Textvergleich von Dr. med. Keisetsu Otsuka, aus dem, Japanischen übersetzt von: Dr. med. Dr. med. vet. Bacowsky Helmut, ISBN-13: 978-3-200-00779-6

**Fig.1**

**Original text:**

觀今之医, 不念思求經旨以演其所知, 名承家技, 終始順, 舊, 省疾門病, 務在口給. 相對斯須, 便處陽藥, 按寸不及尺, 握手不及足, 人迎跌陽三部不參, 動数澼息, 不滿五十. 短期未知決診, 九候即無髣髴, 明堂欠庭, 尽不見察, 所謂窺管而已.

**Explanation:**

This passage deals with the difference in character of past and living physicians at the time when this preface was written. Criticism draws attention to the lack of ethical behaviour, working on a superficial level, selfishness, egocentric behaviour, lack of open-mindedness towards new or different diagnostic and therapeutic approaches, and not taking the time to conduct a thorough investigation of a patients symptoms and needs.

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