



Abdominal issues

41 y.o. Female

Keywords: abdomen, pain, bloating, distension, PCOS

The Person & Complaint

The client came to see me with a series of symptoms:

- Pain and twinge near the ileocecal valve;
- Bloating and abdominal distension;
- Borderline polycystic ovaries and small fibroid.

In 2011 she had an operation to remove a portion of her large intestine which was volvulus, in this case, on the descending large intestine. Volvulus occurs when a loop of the bowel is twisted about a focal point along the mesentery attached to the intestinal tract. The operation removed this portion of the large intestine and sewed it back together.

She had visited her GP about the pain/twinges near the ileocecal valve who advised her to have a CT scan. The twinges were occurring on average every few weeks. In June 2014 she had an ultrasound which did not show up any significant organ issues. She also referred to having skin rashes that would flare up (at no apparent trigger) and then subside of their own accord.

The Story & Emotions

The client was very outgoing and talkative. She worries about her physical health and the choices she has made.

The symptoms suggest there may not be sufficient energy in the lower tan tien (affecting the descending colon). Bloating and abdominal distension are associated with blocks in the small intestine. When the energy is congested, the partially digested food that fills the internal hollows of the intestine moves too slowly through the intestinal tract.

The close relationship between the heart and the small intestine explains a baseline level of inflammation in the body, which possibly when aggravated by an external stress, have given rise to these skin rashes.

This PCO may be associated with the pericardium divergent channel in particular. Issues with hormone production (one aspect of PCOS) reflect an imbalance in the lower tan tien. The ovaries are part of the kidney system in TCM. In PCOS, the ovaries do not make all the hormones for any of the eggs to become mature enough to be released. They collect fluid around them and grown but do not get big enough to be released so remain as cysts. This condition can affect menstrual cycles and fertility (i.e. it is not possible to conceive without full ovulation).

The client has a lot of self-blame about not being at a better place in her life and feels bad for her mother who was widowed 16 years ago and relies on the client for emotional support.

Treatment – first session

The client was feeling distressed and in emotional pain about a relationship break up the night before. It was not a significant relationship but someone she had a range of feelings for and he had treated her harshly in the break up. She had not slept well.

I treated K1s for 5 minutes to ground her. I then treated the back of her heart (Shen Tao) to PC9 for 30 minutes. Shen Tao initially felt hard (like a rock) and there was no pulse in PC9. After 20 minutes Shen Tao felt very painful and spikey and a weak pulse could be felt through the pericardium channel to PC9. I stayed on Shen Tao for an additional 10 minutes and moved to PC6. PC6 initially felt spikey and light and after 10 minutes I could feel greater depth and fullness in the channel from this point. The client talked through the experience the night before and seemed to come to a new understanding for engaging with this man in the future.

I finished the session with the client laying on her side and doing resonance to Shen Tao and the Kidney Gates. The client fell asleep. The Kidney Gates felt cold and flat. I stayed at these centres for 20 minutes after which time the coldness in the kidney gate changed and felt warm with a steady pulse. I could feel a connection between the Kidney gate and Shen Tao. Throughout this part of the session Shen Tao was alternating between feeling a steady pulse/warm and feeling sharp and prickly. I then did Shen Tao (by itself) for 10 minutes while the client was waking up.

I finished the session with K1s to ensure that the client's energetic field was grounded given the strong energetic release through the heart centre.

(Note: In the first session, the client shared some details about her medical history – as outlined above – but most of this detail was provided in Session 2. Her priority in Session 1 was to support her emotionally around the break up the night before).

Treatment – second session

The client provided further detail on her medical history and came to me to address the abdominal distension and twinges around the ileocecal valve.

I commenced the session with a lesson about belly breathing (as a tool to still the mind and feel the energetic tension in the belly area, which I explained would improve the responsiveness to treatment). I asked her to talk at the same time as feeling the breath in her belly and notice how the belly awareness changed what she needed to say (in the session as well as generally).

I treated the Stomach 12 to Stomach 25 - Large intestine internal trajectory. I could feel a hollow vacuum at St 12, like it was pulling my energy into it. Stomach 25 felt thick and heavy. I stayed on these points until they balanced to each other and I could feel energy moving down the length of the channel through the torso.

The client talked about not knowing what she should do next with her career and felt embarrassed about her job situation. The job was convenient and allowed her flexibility and contact with people – the worry was more about not fulfilling her potential and discomfort around the corporate practices she had to work within.

The area of the twinge was below the ileocecal valve on the right hand side of the body. This area ('the twinge area') felt extremely tight. I did resonance to this area for a few minutes and then did resonance to LI1. LI1 felt numb and after 10 minutes I could feel a steady (but weak) pulse. I kept my hand on the twinge area and moved to LI4 (source point of the large intestine). This point felt heavy and thick. I stayed here for 15 minutes and the energy felt distinctly lighter with more movement going through it. While on LI4, the tightness in the twinge area let go and while still tight, I could feel movement through this part of the organ. This makes sense as the source point facilitate the flow of vital energy through the triple heater function from the kidneys.

I then moved to LI11 (with the other hand on the twinge area). LI11 is the earth point on the large intestine channel. In five element theory terms, the earth point is the mother to the large intestine (shen cycle, metal element) and therefore tonifies (i.e. strengthen) the energy flow through the large intestine.

The client said she felt much lighter in the abdominal area.

Treatment – third session

I did the Spleen/Stomach (point 6) on the wind gates balance to continue addressing energetic blockages in the abdominal area. On doing radiance into point 6, I felt the 'wind' in this area to be damp and hot. I continued radiating into the point and did (radiance/resonance) into the groin (the designated 'marsh' points to tonify the Spleen/Stomach). It took about 25 minutes during which I repeated this process twice (i.e. radiance to the marshes) and then the energy at the wind gates for this point felt warm and strong.

I talked to the client about how worried affects the energetic functions of the spleen and stomach organs. The client talked about her relationship with her mother. She worried about her mother who was widowed over 15 years ago and did not find seem to find much enjoyment in life.

I treated Stomach 36 (the sea point, and the earth point in five element theory) to the stomach organ. Stomach 36 felt hot and thick and the stomach organ felt numb. After 20 minutes the energy at Stomach 36 felt much lighter with a great deal more movement. After 5 minutes I could feel the tightness in the organ. I continued doing resonance to the organ and moved my hand to Stomach 41. I did this because the stomach organ still felt weak and stomach 41 is the fire point (using five element theory) is used to nourish the stomach channel.

I finished the session doing resonance to the heart centre and navel centre (the path of Temperance). During the session the client was recalling the death of her uncle on the same day that she had the surgery. The feelings she had about this were becoming more conscious and she wanted to talk them through. I suspect that this would have helped the body release any stored emotions around the surgery so that the flow of her shen could be restored through these organs and systems.

Treatment – fourth session

The client said that since the last session she had felt more energy through the abdominal area. She said that the twinges around the ileocecal valve had occurred a couple of times in the last month (since I saw her). The abdomen area was bloated and distended though was not presenting any discomfort to the client.

I put my hand over the area of the twinge and pitched into the body. I felt the area to be like a tight muscle. I stayed here for 10 minutes until the area of the ileocecal valve

started to relax. I then did resonance to the navel and kidney gate until I could feel a flow of energy through the body between the belly button and kidney gate (about 15 minutes).

I did the Small Intestine points (point 5 and 8) on the wind gates balance to continue addressing energetic blockages in the abdominal area. On doing radiance into point 5, I felt the 'wind' in this area to be sluggish and cold. I continued radiating into the point and did (radiance/resonance) into the elbows. It took just over 20 minutes during which I repeated this process one more time and then the energy at the wind gates for this point felt warm with more movement.

I then did resonance to the Small Intestine internal trajectory, i.e. at points St 12 and CV 10. The energy at St 12 felt very light and electric. CV10 felt heavy and hot. After 20 minutes both points felt connected and CV12 felt like it was pulsing strongly. At the end of the session, the client said that she felt much lighter and grounded.

Treatment – fifth session

The client had not experienced any ileocecal valve twinges since the prior session three weeks before.

She came to this session concerned that her periods were a few days late (these concerns were not pregnancy related). She said that this was unusual (her periods were usually very regular). I explained that sometimes delayed menstruation can be set off by stressful events (e.g. stress at work, family or heavy exercise). This did not resonate with the client as a contributing factor.

Menstruation is governed by the liver, pericardium, stomach and conception vessels. The client had also been diagnosed (via ultrasound) as having borderline polycystic ovaries and this also correlates with possible energetic blockages in these channels. She did not have symptoms of polycystic ovarian syndrome (as would be indicated by problems in hormone and insulin production).

I did strong resonance to the sex centre with the pulsing movement. It initially felt very tight and painful. After 20 minutes the energy in this centre started to slowly release and it took another 15 minutes before I felt that the centre was in a strong opening cycle.

I did resonance from CV3 to the left ovary (both off the body). The left ovary felt weak and tight. CV3 also felt weak. After 10 minutes I could feel a pulse between the two

areas and I moved one hand over the right ovary. This felt electric and took 5 minutes to balance to the CV3 point.

I then did resonance to Stomach 30 bilaterally and CV3. Stomach 30 was painful and tender to touch. CV3 was initially hot but calmed down quickly and I could feel a line connecting through these points.

With the remaining time, I did resonance to Sp6 bilaterally (the meeting point of the kidney, spleen and liver channels). I could feel a strong pulse through both these points, with the left side feeling heavier than the right side. After 10 minutes both points started to pulse together and the energy through the whole channel felt lighter.

The client later informed me that her periods had come the day after the session. I suggested to the client that an additional two sessions would be needed (as a general indication) to more effectively treat additional points related to PCO. It was not a concern to her at this point.

Result/ How it was resolved

- Reduced tension in the abdominal area;
- Reduced pain and incident of twinges in the lower right segment (near ileocecal valve);
- Physical support to adapt to changes associated with surgical removal of part of the colon; and,
- Suggestions for additional sessions for PCOS if later needed.