


# Editorial

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 I have seen a lot written recently about how to market acupuncture effectively. One popular strategy dispenses with traditional Chinese medical terminology to communicate in the language of the masses. This means out with *qi*, *yinyang* and *wuxing* and in with modern terms that Joe/Josephine Public can - quite literally - buy. Some acupuncturists go the whole hog, presuming that our poor primitive Chinese forebears made up *qi* and the channels to describe something they did not - and could not - identify or understand: oxygen and nerves. Talk about throwing the invisible baby out with the materialistic bath water. Some practitioners choose to avoid all such shop-talk in clinic, presuming that the outlandishness of such 'trad' language might alienate patients. Of course, dumbing things down for public consumption is *de rigueur* today. A huge proportion of our potential patients - particularly those under 30 - engage with the world exclusively through *Tik-Tok*, *Instagram* or *Twitter/X* which, let's face it, are not known for their nuance and depth.

But are we not essentially doctors of the subtle body? Is our job not to deal with the invisible aspects of, and influences on, human health? Should we not treasure the precise terminology we have inherited that allows us to identify and work with these invisible aspects that govern the physical in both health and illness? At the same time, are our patients' subtle bodies not more disturbed and incoherent than ever? Our paleolithic ancestors may have been dead by 35 years old, but their bodies were not being air-fried from the inside out by the hot, agitated pace of modern life.

To counter the obvious objection to this point: such an argument does not necessarily come from a feeble Chinese medical ego clinging to some supposed specialness and superiority over the

unrefined earth-bound brutishness of biomedicine. It is more pragmatic than this: without the perspective of *qi* and the channels, *yinyang* and *wuxing*, it becomes impossible to perceive, diagnose and intervene in certain specific ways. It would mean that some people would not get better - would continue to suffer. Call me a Luddite traditionalist but it seems important to temper our commercial interests and eagerness to serve in orthodox healthcare with sensitive acknowledgement of the true depth and breadth of our medical paradigm. Granted, circumstance may require that at times we modify our communication so that patients or decision makers can understand us - this is skilful means. That said, every such communication provides an opportunity for us to educate others on our (pretty useful it has to be said) take on health and life. 