Editorial

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<ATTENTION MR MAXWELL. YOUR ROBOPUNCTURIST™ WILL SEE YOU NOW. PROCEED DOWN THE HALLWAY AND ENTER THE STER-O-POD ON YOUR LEFT.>

I jest, but let's face it – it won't be long... Because while some humanoids are going all-in with the Information Age by falling in love with, and even marrying, their ChatBots, others are busy making acu-bots to do our job for us (although at this stage it seems that rats rather than humans are being used for for the necessary target practice). What could go wrong? Let's hope these prototype robo-puncturists do not hallucinate too freely on the job...

AI ... Clever isn't it? I suspect I am not the only one whose synaptic connections are withering due to reliance on jaunty conversations with Large Language Models about tricky patients. Since reading the article on AI and acupuncture in issue 137 of the *JCM,* I have become reluctantly impressed by its skills. It is an extraordinary educational, clinical and organisational tool, that can help practitioners check biases, recall textual passages and generate hypotheses. It can function like a particularly well-read but slightly overconfident junior colleague – useful, stimulating, but occasionally highly inappropriate and in need of firm supervision.

However, the virtuosity of AI seems more useful on the herbal side than the acupuncture side. There is a lot more to acupuncture than looking up a point prescription for a disease, cook-book style. This is exactly, of course, where AI will shine for the 'shyster-puncturists' who, armed with a weekend of dry-needling, now have a digital oracle to give them the family secrets to clinical success. Unfortunately for those who have looked a bit deeper into *zhēnjiǔ*, acupuncture is nothing if not forgiving; we know from researching 'sham' controls that needling almost anywhere on the body in any way tends to produce *something* beneficial. The body responds. Qi moves. Symptoms shift. From this perspective, AI-generated point prescriptions may work often enough to encourage misplaced confidence. But this is not where the true depths of acupuncture lie.

In clinic the body is read visually – complexion, posture, movement, expression, all inform diagnosis. There are already online AI platforms that can assess a photo of your tongue and come to a competent diagnosis in the context of your symptoms. Arguably more important for acupuncture practice is palpation (ask any Edo-period Japanese person what makes the best acupuncturists). How many of us have experienced a sharp intake of breath when the abdomen we expected to be flaccid reveals itself as dense and resistant? Or when the pulse does not conform to the pattern we had confidently imagined? Moreover, touch in Chinese medicine is not merely about the passive acquisition of data. The practitioner's hands are alive with communication, expression shaped by experience.

A computer has never experienced the thrill and relief of the return of life in spring, nor can it experience this yang qi through the liquid warmth of blood flow and a beating heart. It cannot feel loss, nor its seasonal resonance in autumn. It will not age or fall ill, and is unable to witness human suffering with compassion. Yin and yang, the five phases, qi, blood and shen are not merely conceptual frameworks to be digitally crunched; they are experiential maps, learned not only through study but through living in a physical body. The clinical response of a practitioner depends less on computational power than on ephemerally alive presence – to texture, temperature, tension, rhythm and resonance. To date, such things remain stubbornly human territory. This not only means our jobs are safe, but also that what we do will increasingly become an essential antidote to the overwhelming indifference of Tech.

So when the *Skynet* RoboPuncturist™ eventually calls me down the hallway, I will leave my Luddite-brand hammer at home, but pass on the opportunity and go instead to the eccentric old human being around the corner with the shiny eyes, warm hands and unexpected ways.