

SHIATSU & AIDS / HIV

North Tyneside Health Authority funded a three month pilot project which gave people with HIV and Aids the opportunity to have Shiatsu sessions. The evaluation of the pilot was so positive that the Health Trust went on to fund the work for another three years, evaluating it annually for its benefits.

The Health Authority funded three MRSS practitioners, Dominic Cleary, Sharon Dixon and Helen Frankenberg to work as a team delivering the project. Patients selected for themselves to come for Shiatsu sessions, responding to leaflets about the project placed in the sexually transmitted disease centre at Newcastle General Hospital and local support projects such as the Aids Community Trust and Body Positive North East. The Shiatsu sessions took place in the hospital ward when patients were admitted and in their home or at a drop in centre at other times.

Evaluation of the work was very positive through out. Improvements monitored included:

- Lowering of stress levels
- Development of a more appropriate appetite and much improved digestion
- Better sleep patterns
- Improvement in skin conditions

In the latter part of the project the Health Authority extended the sessions availability to those caring for HIV and Aids patients, recognising the value of support given by these people and the strain they were experiencing.

CASE STUDIES

(1) Sarah Benton Case Study (HIV) – Client: E.C.

Personal History and Life Style

E.C is a forty year old man, originally from Malaysia who has moved and lived in various countries around the world, presently living in Sydney but still feeling unsettled.

He works as a furniture salesman full time, is extremely successful and has a reputation for the biggest sales at his branch. He took on a second job during the time of the treatments imputing data on computers. He gets pretty tired from his work, to the point of exhaustion.

He has no relatives in Australia, and lives alone. He is in a relationship which is full of complexities and is unpredictable. E.C. seems to be on the receiving end of his partner's uneven moods.

He speaks very softly, almost to the point of a whisper. He has a small frame, dresses in dark colours presents as extremely clean and smart. He has puffiness below the eyes (a sign of Kd imbalance). He doesn't cook but pays to have his meals delivered three times a day. He eats meat and vegetables for each meal, cooked in an Asian style. He also eats a lot of sweets and has miso soup before going to bed.

His mood appears to be pretty stable, although he talks quite often of feeling really down. He doesn't purposefully do any exercise, but walks everywhere. He is a

Buddhist and chants daily sometimes for many hours and is convinced that this relates to the success of his high levels of sales at work. He certainly doesn't fulfill cliques of a salesman as he presents as timid. He receives body work regularly and feels it's essential to his well being.

Medical and health history relating to Zen Diagnosis

E.C. describes himself as having a hoarseness in his voice when growing up (his voice still sounds hoarse now and it is the first thing affected by a cold). The feeling of having something stuck in the throat relates to the HT meridian, which also is associated with speech problems. He virtually whispers his words, but speaks very fast appearing to be slightly agitated. If it was just a sore throat this could relate to either TH or the HG meridians, however, I think it is more to do with his ability to express himself which is a Ht association.

He found out he was HIV positive about 10 years ago and because this is a virus affecting the bodies immune system, within Zen it is most closely related to the T.H. He generally, remains mainly fit and well and has been taking antiretroviral medication for this whole period which allows him to live a lifestyle not dissimilar to pre diagnosis. The medication, however, affects him in various ways. He continually has loose stools. The medication could affect many of the meridians-the LV's role to detoxify, the KD's role with the endocrine system. The lymphatic system (associated with the TH) also has a role with toxicity, by protecting cells and removing toxins and other harmful material. His previous cocktail of drugs led to the common side effect of lipodistrophy-which is fat maldistribution throughout the body where he lost weight to his legs, bottom and face. He also became very ill as his liver began to dry out which suggests a massive LV imbalance.. unable to cope with over toxicity. He is more regulated on his present medication and his body has returned to its original state but he believes the hollows below his eyes have now been filled with puffiness. He is not keen on extremes of temperature (which can be a result of an imbalance of the T.H. with the body's inability to adapt to body temperature). He particularly dislikes humidity (affecting the Sp in TCM) which affects his sleeping patterns. He has erratic and scary dreams which are related to the HT meridian and the integration of the emotions. It can also relate to the Shen, or spirit which when disturbed may manifest in excessive dreaming.

E's tiredness and exhaustion is probably related to the KD meridian as he has a tendency to overwork, and may also be from the effects of medication that leads to fatigue. He worries a lot, the preserve of the Sp, although, I'm not sure whether this is about fear of the future in which case it would relate to the KD. He has no motivation for exercise which could be related to KD or Sp. His body is naturally pretty flexible; although he often feels stiff in his muscles, and feels achy... this reveals a LV or GB imbalance.

His desire for sweets relates to the SP and earth element. He drinks a fair amount of coffee to keep himself going which again, ultimately depletes the KD meridian.

Treatments

Altogether I gave E.C a series of 8 treatments, which were generally weekly or fortnightly and sometimes he received other therapies during this time.

| No | Date | Presentation | Jitsu | Kyo |
|----|----------|--------------------------------------|-------|-----|
| 1 | 26.07.05 | Tension in shoulders. Uneven energy. | LV | KD |

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|----|----------|--|----|----|
| 2 | 02.08.05 | Busy mind and feeling tired. | LV | KD |
| 3. | 09.08.05 | Tireder than ever, worrying stiffness in shoulders and feeling down. | LV | SP |
| 4. | 16.08.05 | Been in bed with cold last 4 days- sore throat, neck and fever. Hara softer-less inflated. | HT | KD |
| 5. | 30.08.05 | Stiffness in shoulders and ankles. Feeling tired and down. | LV | KD |
| 6. | 14.09.05 | Had a headache. Tired. Down because of relationship issues. | GB | HG |
| 7. | 19.09.05 | Tired. Rushing. Emotional ups and downs. | LV | SP |
| 8. | 11.10.05 | More relaxed demeanor. | ST | LU |

I aimed at sedating the LV as well as nourishing the KD. The overall Kyo/Jitsu interaction appears to be that Kidney is Kyo and LV is jitsu suggesting that his work holism leads to fatigue which presents as uneven energy and emotions in persuing his life's plans. But I also feel that the work shadows a deep seated fear of being sick and that this is the underling Kyo.

In the initial treatments his hara was very resistant, and it was sometimes difficult to contact the ki (an Ht imbalance can lead to tension in the abdominal muscles) so I used hara massage to try and soften this area. His torso tends towards a Jitsu state and his legs are depleted. Thus, I concentrated on trying to shift some of this stagnation down into his legs.

I gave him specific dietary recommendations, advising him to cut down on his coffee in take. I also gave him some strengthening Kd exercises.

Results of the Treatments

His drive and work seem to lead to a state of exhaustion and uneven emotions. The effects of the medication puts pressure on the LV to work over hard resulting in the predominantly Jitsu diagnosis. However, by treatment 4 there was a real change, the hara becoming softer and more open. (Although the months break before the 8th treatment also led to a hard hara). He embraced the exercises and food recommendations I gave him, although didn't cut things out. The HG diagnostic area on his back was often more raised suggesting a possible longer term H.G. issue. It was possible to dissolve his upper tension downwards with treatment. In treatment 5 there was a strong shift of energy down from his shoulders into his legs.

Despite presenting as tired he found that he had more energy during the week after a treatment. By treatment 5 he seemed more in present and relaxed despite taking on more work. His initial quietness also changed where he wanted to talk about his frustrations around his emotional issues indicating a more balanced expressive HT.

Conclusion

He was always at various levels of tiredness... but his busy work style, medications and use of coffee and sugar probably maintained this. Because of the strength of the medications it somehow over shadows the Ht meridian as that most affected by his nature whereby the Hts role is to integrate the input from the five senses. I wonder if his busyness avoids the difficulty of integration and reflection of his emotions. Obviously the chanting helps to keep him calm, although I wondered whether the focus it brings him also retains his energy in his head and upper organs; he uses it

very much as a projection. The posture and stillness again relates to HT which he uses to allow his innate quietness to enable him to project outward in his work. I tried supporting him feel a resource of energy in his hara through exercises and diet to draw on when feeling depleted.

In any long term change it would be important to build his KD strength through lower back exercises, and food adjustments. More importantly allowing space for integration of his emotions and the ability to express these.

Practitioners Specialising in this area or have extensive experience

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