

Moxa

Moxa consists of the fine fibers found on the underside of leaves of the mugwort plant (*Artemisia vulgaris*). There are many different kinds and grades of moxa, and it can be utilized in various ways. I reserve the premium grade for direct moxa treatments only, as there is no need to use it for moxa pots or boxes.

Moxa's chemical composition includes volatile oils that lend it a warming nature. These essential oils are categorized as antibacterial and antifungal. Though artemisia is made into a tea in some classic Chinese herbal formulas, by far the most frequent use of moxa is the burning of these fine plant fibers, also known as moxa punk.

The deeply penetrating heat of burning moxa has been used in Asian medicine for thousands of years to boost immunity, build energy, disperse cold, and increase vitality and longevity. One theory is that this specific plant matter is chosen because, when burned, moxa has the same energetic frequency as the qi of the human body. The heat from burning direct moxa leaves a red strawberry-like mark on the skin where it was placed. One hour later, the pink or red color may still be visible, but within a few hours the color will be gone. If the person soaks in a hot tub or takes a shower the following day, the red strawberry marks will reappear, indicating where the moxa pot or punk was burned and illustrating the deep penetrative effects of this plant.

Clinically, I have applied the heat of burning moxa in many different forms. In Dr. Miriam Lee's clinic, I learned to use direct moxa (small, rolled pieces about the size of large grains of rice), moxa balls, moxa rolls/sticks, moxa burners, and moxa pots.

Subsequently, in Dr. Ta Viet Hoang's clinic, I learned to enjoy the use of stick-on moxa (one-centimeter-sized segments of paper-rolled punk applied to a cardboard base with an adhesive bottom, which is placed on specific acupuncture points). Recently I have begun to use smokeless Moxa Heat Packs, which allow for the use of moxa without odor and are easy to incorporate into a clinic or send home with patients.

However, by far my favorite and most frequent use of moxa is in moxa pots, which are similar in function to moxa boxes. Originally, I used aluminum pots that were handmade in China in the 1980s by friends of Dr. Lee. In the early 2000s, my dear friend Dr. Ta redesigned and produced moxa pots in stainless steel.

In some clinics, smokeless moxa is used, but I am not a proponent of this. I have concerns about the chemicals that may be added to the charcoal filler, which minimizes the smoke created when this type of moxa is burned.

I was first introduced to moxa in the clinic of Dr. Lee, who burned a lot of it, and who also received a great deal of flack due to the smoky, cloying smell emanating from her clinic. In the wintertime, because she would have four moxa pots burning on every patient in each of her ten treatment rooms, we all went home smelling like an ashtray at the end of the day. I distinctly remember stripping off my clothes before entering my house and stepping immediately into a shower. The other business owners in her building never understood what she was doing, though I tried to explain it to them. To this day it is amazing to me that she was never evicted.

Moxa Seasons

When I began to receive acupuncture treatments from Dr. Ta, I learned about moxa seasons. These are specific two-week intervals that occur when each of the four seasons is transitioning into the next season; it is said that during these times, the Ming Men or Life Gate of the body is wide open. The Life Gate takes one week to become wide open, stays open for two weeks, and takes another week to close, so we typically think of each moxa season as a total of four weeks in length. Two of the four moxa seasons occur during the warmer times of the year – from spring to summer, and from summer to fall – when patients are less likely to get sick and less desirous of the warmth moxa provides. Therefore, we utilize this fantastic immune-boosting tool primarily during the transition from fall to winter, and from winter to spring.

For those living above the equator, the two-week window when the Life Gate is fully open in the spring begins with the first day of the Lunar New Year. This means that we begin our moxa treatments the week before the Lunar New Year and end four weeks later. The fall moxa season includes the entire month of November, with the two-week middle window usually beginning on November 7th or 8th. (This can vary slightly, so do not fixate on exact dates; rather, plan to begin on November 1st and continue for four weeks.)

It is said that each moxa treatment done during moxa season is the equivalent of ten moxa treatments done outside of this powerful opening period. During moxa season, I often sell my patients a full box of Moxa Heat Packs to last them an entire year, and I give instructions on how to use the packs during both moxa seasons and as otherwise desired.

During moxa season, it is recommended that moxa is used as much as possible or for a minimum of two hours per day, to maximize full tonification of the patient's immune system, including both their Wei qi (protective qi) and their Yuan qi (constitutional qi). Moxa is applied for at least 30-60 minutes over the Ming Men and kidneys, and then for another 30-60 minutes on the REN channel between the navel and pubic bone, thus ensuring good health and longevity. Moxa is unsurpassed for building blood and bone marrow and is particularly useful when a cancer patient is receiving chemotherapy treatment.

Caution: The only people who will not benefit from extensive moxa during moxa season are those who have extreme excess fire in their body.

Sadly, many people become sick during these windows of time when the Life Gate is open. Usually this is because they are not paying attention when the first cold snap appears or because they are over-anxious for the spring after a long winter, and in both cases are under-dressed during a wind chill. I regularly put the fear of God into my

patients, if they fail to notice the need for warm garments (socks, mittens, scarves and hats) and continue to wear shorts and sandals for sentimental or foolish reasons. Unfortunately, when a patient becomes sick during moxa season, unless they are exceedingly strong, the cold wind quickly penetrates the Wei qi and lands in the deepest parts of the body without even a struggle. This potentially creates the kind of trapped wind that is impossible to release until the following moxa season, when the Ming Men opens once again. The most important aspect to remember about moxa seasons is to thoroughly inform your patients about the need to fiercely protect themselves from wind and cold, particularly when the Life Gate is open. For example, instruct them not to keep their hair wet after bathing but to always blow-dry 'a cap' around the head. Please do not let your patients down by failing to educate them.

Humans are subject to failure and influenced by circumstances that are outside of our control. I always advise my patients as follows: if you are caught in a draft or a bone-chilling environment, you must take a nearly scalding shower as soon as possible afterward. Allow the steaming water to beat down on your neck and upper back until a shudder of cold is felt exiting the body. This will cause you to sweat the chill out of your pores. You cannot wait until six hours later to take a hot shower, because when cold penetrates the Wei qi, it quickly slams the door behind it (cold contracts). After the hot shower, you need to put on warm clothes and/or blankets before you leave the bathroom, so a chill does not reoccur while the pores are open. Bundling up allows for a good sweat to occur. After this, be sure to change into dry clothing in a warm room. If it is done soon enough, this hard sweat and expulsion of cold will prevent most external pathogenic invasions. I do not make these statements lightly; any delay during moxa season could compromise a constitutionally weak or terminally ill patient to the point of their demise.

Teaching your patients to eat a warm breakfast and dress appropriately can go a very long way during cold and flu season. To determine if clothing is adequate, place your warm fingers on DU14 Da Zhui, and if this area of the lower neck and upper back is not warm, then wear a jacket. This is a good check for babies, children, teenagers and

adults, especially when they are resisting appropriate clothing. Teach everyone to check this area on themselves. If the feet are cold, warm them in a sink or tub of hot water; cold feet often stay cold indefinitely and suck qi out of the body. The opposite is also true, when the feet are warm, the whole body feels warm. Buy fleece-lined boots for your teenagers and insist that they wear them, especially as their clothing is rarely adequate (especially in the USA).

General Moxa Treatment

Moxa pots, moxa boxes, or Moxa Heat Packs can be used interchangeably for general moxa treatments. For a good general moxabustion treatment during Moxa Season or anytime, have the patient lie face down with their head resting in a face cradle, and put a large thick bath towel over their back. If using moxa pots or boxes, light them outside as they are very smoky, and then place them in a small box with a hand towel placed over the top (to prevent the smoke from filling your office).

Burning moxa pots will stay hot for hours if they are loaded correctly and well lit.¹ They may be used on consecutive patients while retained in their protective cotton towel or sock. (Always use your funky old towels because moxa smoke stains.) Once the pots are too hot to touch, add an additional layer of towel under them and fold it over the top to enclose the heat and slow the burn. A moxa pot should burn slowly, and if you forget to close it down, it will burn up very quickly (within 5 minutes). On the contrary, if you shut it down too soon, it will extinguish, and you will need to relight it outside, so it needs to be really hot before you cover it. Set a timer to recheck your pots within five minutes so you don't miss this window of time. The right amount of cover will result in very small wisps of smoke arising from the covered pots. Practice makes perfect; you

¹ See *"How to Use Moxa Pots or Moxa Boxes"* for detailed instructions.

will come to understand exactly how to load, light, and properly cover your moxa pots or boxes.²

For maximum heat, light six moxa pots. Place one pot on each side of the back at waist level, and place the second pots just above the first. Then place two more on each UB13 area (or just inside the upper medial edge of the scapula). Alternately, place two Moxa Heat Packs on the lower back over the kidneys, and one on each UB13/UB43 area. Retain for 20-40 minutes as time allows. Then have the patient turn over and place two moxa pots or Moxa Heat Packs on the REN channel below the umbilicus, and two on each leg at ST36 Zu San Li and SP6 San Yin Jiao for an additional 30 minutes.

Note: I have been taught not to moxa above the navel as this may cause excessive drying of the digestive system, though I do occasionally slide a Moxa Heat Pack into the pocket of my robe because it feels so good on REN12 Zhong Wan.

When to Use Moxibustion

Moxa is used in any situation of qi and blood deficiency and to restore the kidneys. It is very helpful for post-partum deficiency, post-surgical recovery, anemia, hernia, HIV, and cancer lesions. It has a remarkable ability to increase regulatory T cells and build the bone marrow.

Moxa for Chronic Cold in the Lungs/Lung Weakness

Chronic cold in the lungs may result in asthmatic breathing with or without copious white phlegm and a low immune resistance to cold attacking the respiratory system. To strengthen and warm the Wei qi and qi of the lungs against cold-type asthma and frequent respiratory infection, place a hot moxa pot on the following points or areas: LU1 Zhong Fu-LU2 Yun Men, ST36 Zu San Li, UB 13 Fei Shu, and the area between

² A picture is worth a thousand words, and a video is even better. My Master Tung's Magic Points series includes two videos showing the use and lighting of moxa pots.

REN4-REN8. Be sure that pots used on LU1 are brightly burning and covered well so that wisps of smoke do not get into your patient's eyes or lungs. If the pot is hot enough it will burn while completely covered so that no wisps are obvious, forcing the pot to breathe entirely through the cotton terrycloth towel. Moxa can be used on the upper back and LU1-LU2 areas when a wind chill has penetrated the body, as long as the patient does not have a fever or bright yellow mucus, implying serious infection.

For the prevention of asthma, I recommend two moxa treatments per week while the patient is healthy, alternating your point selection. Burning moxa from the end of July through August 15th (moxa season) on the area of LU1-LU2 will go a long way toward stopping bronchitis from occurring in the fall. (Remember that alternatively, and conveniently, you may choose to substitute Moxa Heat Packs.)

Moxa for Liver Excess

When there is Liver qi congestion or Liver excess hypertension, our typical moxa tonification protocol may exacerbate the fire or stagnation that is already present. This is easy to remedy by using moxa to strengthen the Lungs so that metal can overcome wood (via the Ko or controlling cycle), thus keeping the Liver excess in check. To do this, we place moxa pots or Moxa Heat Packs on the LU1-LU2 area, the UB11/UB12 area, and the UB13/UB42 area (the medial upper corner of the scapula).

During cold weather, if the wood element is overactive, it may result in irritability, generalized tension, and possibly even a mild persistent cough, all of which may be remedied by applying moxa to tonify metal. Don't forget to also needle Tung's amazing 11.17 Wood (Anger) points.

"Mother Roasting" for Post-Natal Care

Most women are exhausted after childbirth, and their lower jiao is often empty and depleted, which may make it more difficult for the uterus to return to its former state.

“Mother roasting” has a powerful restorative effect at this time. Using moxa over the lower jiao will tonify the blood and assist with postpartum recovery and the production of milk, because it disperses cold that can get trapped in the uterus and become an impediment to the transformation of blood into milk.

If the mother becomes very cold after giving birth, use moxa immediately. Otherwise wait a day or two, and then begin daily roasting for ten days. Her partner can be instructed on how to assist with these treatments if moxa cannot be applied safely by the mother on herself. Moxa Heat Packs are a wonderful option. The treatment of choice is to apply moxa from the pubic bone to the navel, over the kidneys, and on ST36 and SP6. If the Liver is congested, add LU1-LU2 and UB13/UB43 to the above protocol.

Moxa and Cancer

Moxa can be life changing in the treatment of cancer, especially when radiation or chemotherapy are being utilized. In Dr. Lee’s clinic I saw lots of cancer patients treated with moxa, many of whom were in a late stage of the disease and were refusing Western medicine. Some patients had very large lesions that were pressing on underlying nerves, causing a great deal of unrelenting pain. Moxa softens and shrinks firm or lumpy cancer lesions that are not open on the skin, even after one treatment. These patients often reported feeling more comfortable right away and they came daily for moxa treatments, as well as receiving them at home. Dr. Lee loaned her moxa pots to families but soon began to collect a deposit as her priceless pots sometimes weren’t returned. In cases of end stage cancer, keeping the patient comfortable was often the most we could hope for, but even that was hugely appreciated by the patients and their families.

When I was treating Kaposi’s sarcoma lesions with moxa in my HIV clinic, we regularly saw them changing form. First, the plump, purple, raised lesions flattened to the surface of the skin, and then they changed to a brownish color before shrinking, cracking, and entirely disappearing.

Moxa for any kind of tonification is discouraged during cancer treatments, as it may cause the growth of cancer instead of the patient's Yuan qi. Though we extensively apply moxa locally to shrink tumors whenever possible, we do not use it on the kidneys, the REN channel, or ST36. This prohibition is also true for polycystic liver or kidney disease, and in any other situation where it is detrimental to encourage the growth of cells.

Hernias

A moxa pot, box or heat pack can be placed over any abdominal hernia (except for a hiatal hernia), while needling 11.01-11.05 Hernia Points, to soften and shrink the hernia down. This is a wonderful treatment for a patient who has one or two small hernias. However, if there are multiple hernias that easily slip in and out or occasionally get stuck, the patient is better advised to have a surgical repair.

Cautions

Burning and Blistering

Elderly or obese patients, and sometimes patients who have had abdominal surgery, may have numbness on the belly that prevents them from feeling when the moxa pot is getting too hot. Be sure to frequently check the moxa pots on these patients, so that their skin is not burned. Moxa pots can burn and blister; Moxa Heat Packs are far less likely to do so, but check them during treatment anyway.

If you blister a patient, you must immediately compensate them in treatment and herbs, and apologize profusely, because this is malpractice. Ching Wan Hung burn ointment is an excellent emergency remedy that is miraculous in taking the sting out of burns, so you should keep it on hand and send it home with the patient. Instruct them carefully on the proper cleaning and covering of a burn, so infection is avoided.

Acute Infection or Hypertension

Do not use moxa if the patient has an acute pathogenic invasion, as you will simply tonify the “evil.”

If the patient is hypertensive or has Liver qi stagnation, you can always tonify the Lung Shu points (UB13, UB42-44, UB 12-11) to boost metal and control wood.

Safety Requirement

Be sure to give the patient a bell to ring in case they need attention during the treatment, or make sure they have a hand free so they can move the moxa pot themselves. If they ring the bell, do not hesitate; finish your phone call or even stop in mid-sentence to go immediately and move the pot or add necessary layer(s) of cotton insulation underneath it. This is essential to prevent the patient’s skin from burning.

Moxa and Children

Moxa pots are not recommended for young children because they often are not able to leave the pots alone and can burn themselves. Instead, I recommend that you use a warm salt-filled flannel bag (briefly heated in a microwave, making sure that it is not too hot). This type of bag is easy to sew with a sewing machine, and the last side can be closed with hand-stitching. You can sew a matching pouch with a Velcro belt that can be fastened behind the back, so that it is not easily removed by the child. This pouch can be placed over the navel or the kidneys. It is the treatment of choice for “failure to thrive,” enuresis, projectile vomiting, or general weakness.

Moxa Tools

Unfortunately, our beautiful stainless steel moxa pots are no longer available, as my dear friend who was the creator of them, the late Dr. Ta Viet Hoang, passed away on

March 15, 2021. Anyone who was fortunate enough to acquire these moxa pots should hold on to them or sell them back to me.

Moxa boxes are having a comeback. They can be purchased from TCM supply companies in the form of bamboo boxes, round metal or plastic units that are three to four inches by one and a half inches, or small brass moxa burners with a long black plastic handle. This latter version is smaller and won't burn very long, even when the moxa is well packed, but it is convenient to use for shorter moxa treatments. Any of these can be substituted for moxa pots, applying the following guidelines.

How to Use Moxa Pots and Moxa Boxes

To use moxa pots or boxes, fill the internal basket with cheap, loose moxa, breaking up little clods as you very gently pack it. A tight pack has a greater likelihood of self-extinguishing. It is not necessary to remove the inner basket; however, be careful not to drop any moxa between the inner basket and the outside pot. Packed well but not too tightly, it will burn for more than two hours. If you only need it to last for a one-hour treatment, fill it halfway.

Suggest that your patients wear old clothing because after using moxa pots or boxes, they will smell like moxa and need to wash their clothing several times to remove the smell. Most of my patients designate clothes for this purpose and leave them in a bag in their garage.

Moxa is very smoky to ignite, so lighting it outside is a good idea. First, touch the top of the moxa in five or six areas with a flame from a butane lighter (some people use a stick of incense, but this adds extra steps as you have to deal with the lit incense.) Very, very gently blow on the top of the burning moxa until it is glowing. It is best to blow at an angle so the ash and smoke do not blow back into your face. Dr. Ta gave me a nifty little hand-held battery operated fan that I use and highly recommend for this purpose.

Once the moxa is fully lit and glowing, put the top of the pot on tightly and then wrap your device in a cotton hand towel. Alternately, you can use a cotton sock, as the moxa pot will slide easily in and out of it, and the sock can be draped over points such as ST36 and SP6. Enclosing the moxa in a towel or sock keeps it from burning up too quickly and allows you to safely handle the device and transport it from outdoors into your treatment room.

Place a large bath towel across the patient's abdomen or low back where you will apply the moxa device. Place your moxa device, wrapped in a hand towel or sock, on top of the large bath towel. Then, place another towel on top of the box or pot, draping enough to cover it without allowing leaks. Small wisps of visible smoke are fine, but if the moxa pot is well lit it can be fully covered and will not extinguish, because the oxygen drawn through the layers of towels is enough to keep it burning.

If the pot gets too hot for the patient, pick it up and fold the top towel under it so there are additional layers between it and the patient's body. Fold the towel over itself again to keep the smoke in and force the pot to breathe through the towel.

Moxa Heat Packs

In the last ten years, I have taken to using Moxa Heat Packs, which can be purchased online. These marvelous self-warming moxa pouches can get very hot and are ideal in situations where the smoke of burning moxa is not appreciated. They are filled with a combination of iron powder, moxa (mugwort) and filler material (cellulose from wood and charcoal powder). The iron powder heats up when exposed to oxygen, while the moxa in the pack strengthens energy and warms the body. This is great preparation for boosting natural immunity, and if you like being warm and cozy, it feels awesome!

Because Moxa Heat Packs are smoke free and easy to use, there is no excuse for practitioners to not avail themselves of this warm and incredibly strengthening modality. Your patients will LOVE it. In my clinic during moxa season, I can be found

with Moxa Heat Packs covering my own REN and Ming Men areas all day long while I work. I frequently give patients an entire box to take home, and provide instructions on how and where to use them.

These little pouches maintain approximately 20 consecutive hours of heat after being exposed to the air. With shaking and rotating after opening, a new Moxa Heat Pack takes 20-30 minutes to heat up. I usually take the shortcut of putting it in a microwave for 10-15 seconds to significantly shorten this process. I place the hot pack inside a cotton bath mitt or potholder, although a rolled-up hand towel suffices for placement on the body. Additional layers of cotton can be added if the heat becomes intolerable and removed as the pack begins to cool down. The goal is to get a pink flushing of the skin in the area being heated, but to avoid burning! Fortunately, the pack can be extinguished in a glass jar when no longer needed, and then relit repeatedly, even after it no longer heats on its own.

It is best to wrap Moxa Heat Packs in 100% cotton, even though they come with a plastic belt. The belt can be used to hold a cotton-covered pack in place, but do not put the plastic directly against the skin. Often, I place Moxa Heat Packs in cotton socks or leggings to sling them over my shoulders (while walking around) or over a patient's legs (while they are lying on the treatment table), to land precisely on the points being heated.

After Moxa Heat Packs stop generating heat on their own, they may be reused another 20 times by carefully heating them in a microwave. (Caution: my sister once started a fire in a microwave by putting a heat pack in for three minutes; 10-15 seconds is plenty.) Dispose of the packs in your regular trash once they become dried out, compacted or hard.

Moxa Heat Packs can be placed in all of the same areas described under General Moxa Treatment. The greatest advantage of these nifty heat packs is that they can be worn under one's clothing throughout the day. Do not take them to bed, however, because

they inevitably wind up heating the mattress, which is a waste of the pack. One to two hours on any given point is plenty of heat for one moxa session. Usually, I use six heat packs per person, all warming simultaneously.

Moxa Heat Packs can be placed under the upper medial corner of the scapula while the patient is lying on their back (Lung Shu and Heart Shu points), with another two packs on the LU1-LU2 areas, and optional placement of two packs on REN4-REN8 or over ST36 and SP6. This is another advantage of Moxa Heat Packs over moxa pots: they can be used to treat both the front and the back of the body simultaneously.

If you cannot locate Moxa Heat Packs, you can find *ThermaCare* heat wraps in most pharmacies. These provide a nice source of long-lasting heat and can also be worn on the body, but they do not contain therapeutic moxa.

How to Use Moxa Rolls (Moxa Sticks)

Not to be confused with stick-on moxa, moxa rolls look like large, perfectly rolled cigars. They are lit on one end and held close to the skin (without touching) to heat up specific acupuncture points or areas. They are a wonderful tool when used by a skillful practitioner, but they have a dangerous risk of burning the skin when employed by inattentive users.

When using a moxa roll, peel down the outside paper of the stick about two inches, because this paper creates ash that falls away as the stick burns down. Ash forms quickly on the burning end of the moxa roll, so have a ceramic cup or small container easily available in which you can gently smooth the rounding edges of the burning coal as the ash accumulates. Initially, the flat end of the stick will need to be rounded, so you can apply heat to a point precisely and from an angle. In other words, a moxa stick or roll is held at a 45-degree angle to the body, rather than perfectly perpendicular, so that you can clearly visualize what you are doing, and also keep the smoke out of your eyes. Be sure to knock the ash off the burning head frequently enough that it does not drop

onto your patient's body (the ash will not burn because it is not coal, but it will make a mess). Every time you knock the ash off the head, the tip of the stick will burn much, much hotter. You must always adjust the distance between the tip of the stick and the patient's body based upon the amount of ash forming on the burning head.

A good practitioner always learns to accurately assess the degree of heat being applied to a given point and the sensitivity of the point. As you apply the heat of a moxa stick, the point itself begins to heat up until the patient can no longer tolerate any heat at all. This is discussed at length in the LV1/SP1 example below.

Extinguishing moxa sticks must be done with your full attention because they tend to reignite if they are not completely put out. Special moxa stick extinguishers are sold by all TCM supply companies; they are small, short, metal and heavy, and perfectly fit the width of a typical moxa stick. I don't like them because they effectively break off the burning tip of the stick in the process of snuffing it, or they cause the burnt moxa loose but compacted, leading it to fall easily when the stick is reused.

To extinguish moxa sticks, I far prefer using a small ceramic cup that has a sloping side and a mouth of approximately two inches, filled 2/3 to the top with sand. When you gently put out a moxa stick in sand, the tip will be fully intact the next time you wish to use it. If you grind the stick into the sand, you will break the tip. Instead, hold the cup at an angle and gently tap it so the sand slips to one side. Then right your cup while holding the stick in the center of it, so that the sand covers the bottom 1.5 inches of the burning end. If it is not buried at least 1.5 inches, the coal in the middle of the stick may continue to burn. Do not use a bowl or wider cup, as it could allow the stick to fall over and continue burning.

Lazy practitioners may choose to extinguish their moxa stick in a small pool of water; however, I would only consider doing this while using the last inch of a moxa stick. A moxa stick dipped in water will need to be cut at least two inches, and a new tip will need to be established before the stick can be used again.

When I get down to the end of a moxa stick, I hold the last two inches with a pair of forceps, inserting one end into the stick and holding the other end against the outside of the stick. Forceps are easier to hold than a moxa stick, and they allow me to avoid wasting the last bit of moxa.

LV1/SP1 moxa to stop bleeding

Because the Liver stores the blood and the Spleen controls the blood, moxa on LV1 and SP1 can be used for both avalanche bleeding (heat excess) and spotting (deficiency). A moxa roll or stick-on moxa may be chosen for the job. In my clinic, I usually use a moxa roll. Whether a roll or stick-on moxa is being used, it is essential that these two acupuncture points are thoroughly heated without causing a burn or blister, as this would be very painful and would make it difficult to wear shoes. Never touch the tip of a moxa stick to a patient's skin because this would certainly cause a blister, as could stick-on moxa that is not carefully applied.

With the patient laying on their back, firmly hold the patient's toe with one of your hands, covering the ball of their foot with the palm of your hand and wrapping your thumb and index fingers around the toe with your pads on LV1 and SP1, thus preventing them from flinching or jerking into the hot coal. Positioning your fingers in this way enables you to press the heat into the point after holding the moxa stick (with your opposite hand) a quarter inch away from each point until it becomes too hot. Each time you heat a point, count the seconds ("one, one thousand, two, one thousand," etc.); it may initially take up to ten seconds for the patient to feel the heat, but after five rounds of heating and pushing, one round may take only two seconds. Once both points have been heated completely (to the count of "one, one thousand") on one foot, switch to the other foot.

A good practitioner will learn to perfectly anticipate when a point is about to become "too hot" for the patient to tolerate, by counting the passing seconds quietly to themselves while also assessing the amount of ash forming on the moxa roll tip and

accommodating accordingly for the distance between the tip of the roll and the patient's skin. When a burning hot tip is held no closer than ¼ inch away from the point, it may take up to ten seconds to heat up a cold point. However, as the heat begins to penetrate, it will take fewer and fewer seconds each time, until the point cannot receive any more heat at all.

You must learn to pay extreme attention, because by the time the patient says, "Hot," they will feel as if you have burned them, and this is not good! The patient should feel strong heat but not the stinging sensation associated with a burn. You must carefully anticipate the moment of burning so that you are pushing the heat into the point at the very moment they are saying "hot," already perceiving their need, and thus building their trust that you will not hurt them. The sensation of heat being pushed into the point is not only therapeutic but also reassuring. It tells the patient that you are responsible, respectful, and totally attentive. If you hesitate even one moment longer than you should, they are likely to try to jerk their foot away from the heat to avoid being burned – and because the tip of the coal is ¼ inch from their toe, this jerking action could cause a burning accident. For this reason, you must firmly hold their toe until you have perfected your skills with stick moxa. Do not worry; as long as you hold their toe firmly and are careful not to touch their skin with the tip of the stick, they will not be burned even if they feel a burning sensation. Also, while developing your moxa skills, always have a small cup of water available in case you need to extinguish a stick immediately.

In my opinion, burning and blistering are malpractice, though I know it happens to the best of us. Burning a patient with moxa is like blistering someone with flame cupping; it may happen if you practice long enough, but it should never happen more than once in your career. If you burn someone, please always ask for their forgiveness with your most sincere apology, and compensate them in a significant manner, providing free treatments until no sign of the scab or scar remains and sending them home with a free tube of Ching Wan Hung burn cream. Never pretend that it is okay or normal.

Ching Wan Hung is outstandingly effective in immediately removing the sting of a burn. I always keep a tub in my clinic and small tubes to send home with patients, especially those who love to bake (oven burns are common).

When applying moxa to LV1 and SP1, it doesn't matter which point you heat first. Choose one of the points to begin, and then move between the two without heating the area of skin in between the points. Heat the first point, push the heat in, and then apply heat to the other point, push that heat in and continue to alternate between the two.

My favorite use for moxa rolls is in the treatment of avalanche or breakthrough bleeding, which is especially common with menopausal patients, although I have treated a few cases in younger women as well³. Patients who avalanche bleed are likely to require daily moxa treatments; however, it is extremely difficult if not impossible to apply moxa to these points on oneself and applying moxa to LV1/SP1 can be time consuming and smoky in a clinic. For these reasons, I usually teach a family member of the patient how to use stick moxa. Sometimes I give the patient a bag of little stick-on moxa plugs that they or their family member can use instead, but only after explicit instruction and demonstration.

As an important aside, I never use "smokeless" moxa sticks or "smokeless" stick-on moxa plugs, because the chemicals required to keep them burning should not be inhaled or confined to a treatment room.

How to Use Stick-on Moxa Plugs

I first learned about stick-on moxa plugs in the clinic of Dr. Ta, who was a master of Koryo Hand Therapy (KHT). KHT uses pathways on the front and back of both hands representing the twelve meridians of the body, plus the DU and REN. I have learned a lot about this system and I believe it to be highly effective, especially for treating oneself or when it is inconvenient to use points on a patient's extremities. Usually, KHT uses

³ The use of moxa for avalanche bleeding is found in the commentary of 88.04-88.06 Three Sisters in *Volume One*.

needle patches or gold and silver pellets with round adhesive patches over them. However, one of the most common uses of stick-on moxa is with KHT points, especially on the palmar midline, which represents the DU Mai. I also use stick-on moxa plugs for patients with excessive bleeding or breakthrough bleeding, so they can treat LV1/SP1 on themselves at home. These are the two reasons I most love stick-on moxa.

In my last clinic, I had a nice outdoor patio where I could sit with the patient for moxa treatments, enjoying the creekside setting. I taught my office manager to follow proper stick-on moxa protocols so she could also provide this service. It is not hard to learn, so patients and their family members can be taught, as well.

Every form of moxa has its strengths and weaknesses. The strength of stick-on moxa is its very direct and pointed application to specific point protocols. Though I highly recommend that practitioners study KHT, and I highly value its efficacy, patients do not need to understand the hows and whys of using it. Dr. Ta drew moxa protocols on hand diagrams for patients to follow at home with daily treatment. First, he gave them several stick-on moxa treatments in his office until they felt confident in doing it themselves. Then, also in his office, he had them study the point locations on their own hands and practice applying stick-on moxa to the points. Once he had corrected their point locations, he had them light the plugs on one hand using a lighter held in the opposite hand.

The edge of a plug only needs to be touched by a flame in one small area to start the coal burning slowly. As the stick-on moxa begins to burn down, the patient starts to feel the heat coming down the plug. Once the plug is too hot to tolerate, it is lifted off the body with a pair of tweezers and dropped into a small bowl of water to extinguish it. As the points heat up, they begin to get hot very quickly before each moxa plug finishes burning, and so a small round adhesive shield is placed on the skin before the next moxa plug is applied. Shields come in every box of stick-on moxa plugs, and multiple shields may be necessary toward the end of a moxa session. Each plug comes with a thick layer of cardboard at its base beneath the moxa, but additional shielding can be

added as needed. For my own use, I usually buy the lovely stick-on moxa plugs that come with a ceramic base, but for my patients I purchase large containers of several thousand stick-on moxa plugs and bag them into individual Ziploc sandwich bags for transport home. Most patients prefer to do their moxa treatments outside so that their houses won't reek of smoke, so be sure to advise them to bundle up if the weather is cool.

Patients should only attempt to apply moxa to one hand at a time until they are proficient. Instruct them to apply all of the plugs on one hand before lighting any of them, so they burn simultaneously. When the moxa starts to heat up it can get very intense, very quickly (within ten minutes). The opposite hand is then used to remove the burning moxa plugs, knock them into the bowl of water, and then reapply the next round. The base of stick-on moxa has a weak adhesive so that it is easy to remove, but this also means that the plugs can easily fall off if not applied properly or if inadvertently knocked, which is also a good reason to do this outside or in a space with a cement floor.

For myself, I light a candle to ignite the moxa, and apply the stick-on plugs to both hands so that they all burn at the same time, which is tricky when they start to get really hot. Like with a moxa roll, the skin does not burn unless the moxa coal itself touches it, though it may feel like it is burning. For this reason I do not recommend that patients attempt to burn stick-on moxa on both hands simultaneously until they are very skillful. It is best to have another person tending the one being treated, as it is a blessing and a generous gift to be able to relax and enjoy this lovely kind of moxa treatment.

When applying moxa on the feet or certain toes, it may be essential to also shield adjacent toes from the extreme heat. Fingers can be comfortably spread, but toes generally cannot, so when applying stick-on moxa to LV1 and SP1, I advise the patient to be sure to use a shield between the large toe and second toe; a thin business card is perfect for this purpose. Be sure that the moxa does not touch the card.

Using Direct Moxa

Caution: One must be fully able to be present and concentrate to safely apply direct moxa, without burning the patient.

Direct moxa is used on specific acupuncture points, small joints, and some points found on the spine. In Dr. Lee's clinic, we used direct moxa in the form of small balls of moxa the size of a long grain of brown rice. We most frequently burned these grains of moxa on the small joints of the hands and feet, on DU20, and occasionally on body points.

Direct moxa can be tricky to apply without burning the patient's skin, and frequently the skin is intentionally burned, which leaves an obvious, permanent scar. You will sometimes see these therapeutic scars on patients who have been treated by traditional Chinese practitioners. Though this is very common and is not considered to be malpractice or traumatic to the patient, in Dr. Lee's clinic we were instructed not to allow burning or blistering, with one exception that will be discussed later.

To apply direct moxa on cold arthritic joints without burning the patient, both of your hands must be simultaneously and deftly engaged in the work. Prepare a small pile of moxa in the form of long rice grains and place it in a convenient location next to the patient, along with a pair of fine tweezers. Apply the first grain of moxa to the point being treated and light it with a match. When the patient begins to feel intense heat from the burning ember, use the tweezers in your dominant hand to gently pick up the coal without hesitating, breaking it or dropping it. With your opposite hand, place the next grain of moxa on the same point (if your hands are moist, pick up the grains with a second pair of tweezers), and place the burning coal from the first grain on top of this fresh moxa. Repeat this process until you have exhausted your small pile of moxa grains.

From this description, it should be clear that this technique is extraordinary tedious and arduous. A grain of moxa turns into a burning coal that must be lifted within

approximately ten seconds, so the process goes very rapidly. You must move quickly, precisely and confidently, without distraction or mishap, because if you drop a coal you may burn the patient or the carpet. However, the therapeutic outcome is well worth the effort, as in most cases the joint pain is immediately relieved.

Rheumatoid arthritis can be hot or cold. If you are not sure whether it is a cold or hot type, try one or two grains on one arthritic joint, and check with the patient to determine the effect before continuing.

Direct moxa may also be applied to DU20 Bai Hui to treat all kinds of prolapse, including pain in the ball of the foot (a dropping down of the qi). This treatment can also be done with stick moxa. In either case, be sure to flatten the patient's hair with your thumb and index fingers, because any hair in the vicinity will burn. Keep in mind that losing some hair at DU20 is a minor inconvenience when compared to a uterine or urinary bladder prolapse. The hair will grow back except for any area beneath a scar. I suggest that practitioners opt to use a moxa stick unless they are very proficient with direct moxa, because a patient who jerks or ducks their head quickly may cause the burning coal to fall into the surrounding hair or hit the ground.

The one exception to Dr. Lee's prohibition against scarring moxa was in the treatment of a brain tumor with the obvious symptom of a protruding eyeball. In this case she used direct moxa on opposite-side 1010.04 State High Mountain (UB6), telling us that the moxa must burn. She said that only the first two moxa would hurt, after which there would be no pain, though there would be a scar, and that the eyeball should recede 8 to 12 hours after this direct moxa treatment.

Warm Needle Technique or Burning Moxa Balls

In Dr. Lee's clinic, especially before we had moxa pots, we often applied a warm needling technique using moxa balls approximately the size of large marbles on ST36 and SP6. We made these moxa balls by firmly pressing balls of moxa together with our

fingers and with qi. Because my hands tended to be moist, it was more difficult for me to make them, so Dr. Lee made me practice continually and required me to keep a gallon jar full of these moxa balls for our use. These must be made in advance for efficiency, as it would be inconvenient to form them during a moxa treatment.

To use moxa balls for a treatment, split a ball in half, place the two halves around the handle of an acupuncture needle, and firmly press them together again with your qi, so that they will not fall off. Holding tweezers in your dominant hand, retain the last of the burning ember and place the coal in a ceramic dish, to be used to ignite the next moxa ball. With both hands, apply the next moxa ball to the needle and light it with the burning coal. Because moxa balls are larger, this technique is much smokier than direct moxa and it moves a little more slowly. Concentration is still essential; I once accidentally dropped a coal and burned a hole in Dr. Lee's vinyl tabletop. She frequently referenced this as an example of carelessness with her other students, even though I had fully repaired the hole at lunch time that very same day.

We frequently practiced a Longevity Protocol using 33.07 Fire Bowels Sea (Tung's LI10) with LI11 Qu Chi. First, to bring qi to the point, we started by needling Fire Bowels Sea superficially in four directions from one point of insertion (needle toward one direction, pull the needle toward the surface but not completely out, then insert the needle toward the next direction, etc.). Finally, we left the needle in a perpendicular position for the application of moxa. Then, we bilaterally applied a moxa ball and burned it on the needle handle; we did this three times for a weak patient, and five times for a strong patient, every other day for three months. For every fifth, tenth and fifteenth treatment, we bilaterally burned seven to nine moxa balls.

In modern clinics, moxa balls have been replaced by stick-on moxa, which cannot easily be applied to a needle. You can substitute two stick-on moxa plugs per moxa ball, and then apply them directly to the point using a small cardboard shield. (Even better, heavily puncture a slice of ginger with a fork and place it over the point, then apply either moxa balls or stick-on moxa on top of the ginger.)

These days you can purchase lightweight metal needle caps that sit on top of a needle, in which moxa can be burned. I have never used these but am quite skillful at burning moxa balls directly on needles, so that is my treatment of choice for warm needle technique.

Moxa Oil and TDP Heat Lamps

A number of years ago, my dear friend Dr. Ta decided to grow his own chilis and create what he called a “moxa oil.” This oil had a deeply penetrating heat, which he would apply to areas of general moxa treatment and then cover with TDP lamps. In a smokeless clinic, this is a great way to go, though with the advent of Moxa Heat Packs we use it less frequently now. The chili oil caused some skin irritation on patients with more sensitive skin. A moxa oil is available through TCM supply companies; however, I find it relatively weak. Dr. Ta’s moxa oil was applied with a small paintbrush, and though highly effective, it was uncomfortable if it accidentally spread to the eyes, nose or mouth. He would leave it on his patients, but I always wiped the bulk of it off with a warm, wet paper towel before sending my patients home.

Far too few practitioners make use of this wonderful and powerful medicine. In China, TCM is still referred to as “*the needle and moxa technique*” because for thousands of years, moxa has been just as popular as acupuncture, and the two have been interwoven. Along with the modernization and dumbing down of TCM, the ancient art of moxa is tragically overlooked. However, practitioners now have access to the highest quality tools and training to treat their patients with moxa. I encourage you to integrate this potent herb into your practice, as the benefits will be immeasurable.