

Health Insights Today

A SERVICE OF CLEVELAND CHIROPRACTIC COLLEGE

Summer 2009, Volume 2, Issue 3

The Rarest Breed of Pioneer: Richard Yennie and the Rise of Acupuncture in America

By Daniel Redwood, DC

Richard Yennie, DC, Dipl. Ac. (NCCAOM) was one of the first non-Asians in the modern era to bring acupuncture to the United States and the first to combine acupuncture and chiropractic in a healing arts practice. Dr. Yennie has included acupuncture as a central part of his chiropractic practice in Kansas City for more than half a century and has taught it to tens of thousands of chiropractors. When he began, acupuncture in North America was hidden in backrooms in the Asian-American communities of large cities, principally New York, San Francisco and Los Angeles. Now, it is well on the way to becoming an integral part of American culture and mainstream health care.

Pioneers combine deep commitment to a vision with great strength of character. Some catalyze the breakthrough stages of a major change. Others organize, develop and nurture new approaches after the initial breakthrough has occurred. But the rarest of all are those who spearhead the initial breakthrough and then labor for decades so that the seeds of a great change can reach fruition. Richard Yennie is among this rarest breed of pioneer.

His journey began in Japan in 1949, when he served in the U.S. Counterintelligence Corps as a translator and interpreter at the war crimes trials after World War II. His plans to return home and practice law took an abrupt U-turn when a major back injury, unsuccessfully treated for weeks by conventional means at a military hospital, was resolved in one visit to a master Japanese acupuncturist. From that point on, Yennie followed a single-minded path of learning, practice and teaching. He has studied with the great Japanese, Chinese, Korean and European acupuncture practitioners of our time and then unstintingly transmitted their knowledge and wisdom to generations of American health practitioners. His fluency in Japanese and conversational Chinese enabled him to learn directly from Asian practitioners and primary source texts, and his Midwestern roots gave him the tools to convey these concepts and practices across cultural divides once seen as insurmountable.

Dr. Yennie is a 1953 graduate of Cleveland Chiropractic College – Kansas City and has been in private practice since that time. He attended the Tai Chung Medical School in Taipei, Taiwan (leading to an acupuncture diplomate) and a preceptorship at the Kyoto Pain Control Institute, under Kunzo Nagayama, MD.

He has served on the faculty of Waseda Acupuncture College in Tokyo, Japan; as Dean of Academic Affairs at Kansas College of Chinese Medicine in Wichita, Kansas; and as chairman of the consulting group for the Hope Institute of Chinese Medicine in Beijing, China. He was the first non-Chinese to serve on the Board of Directors of the China Medical Association Acupuncture Research Committee (Taipei, Taiwan), serving as its Deputy Director, and was the first president of the American Chiropractic Association's College of Chiropractic Acupuncture.

Dr. Yennie's greatest legacy, aside from the thousands of chiropractors whose lives and practices have been immeasurably enriched by his teaching, and the thousands of patients he has helped, is the Acupuncture Society of America (ASA), which he founded in 1968. The ASA provides post-graduate acupuncture certification courses, taught by Dr. Yennie and an international faculty. He has also been a postgraduate faculty member at various chiropractic colleges, which have co-sponsored his 300-hour certification courses in acupuncture. For many years, Dr. Yennie has also led tours to China and Japan where his students can combine sightseeing with observing acupuncture being practiced in the lands of its origin.

Health Insights Today

A SERVICE OF CLEVELAND CHIROPRACTIC COLLEGE

Summer 2009, Volume 2, Issue 3

Page 2

When did you first become interested in acupuncture?

In 1949. As a result of a low back injury that I incurred in a judo tournament in Tokyo. At the time, I was a Japanese language interpreter at the war crimes trials. I had a lot of free time on my hands, so in addition to traveling around Japan, I got involved with judo and karate. After I was injured in a tournament, I couldn't walk and my right leg was partially paralyzed. I was in the Yokosuka Naval Hospital, which had been taken over by the Allied Powers. After a couple of weeks there, with no results, my judo instructor came down to visit me and said, "Why don't you try my own Oriental physician?" Well, at that point I'd try anything. So he came down, a short fellow in a silk robe. He reached into his pocket and pulled out what looked like a little pack of cigarettes. He pulled out some thin needles, looked at my tongue, palpated my wrist (not like Westerners do, but feeling for 27 different qualities), and said, "Chiryō shimasho." "Let's treat."

The first thing he did was to put a needle in the back of my knee at the Bladder 40 point. I said, in Japanese, "My trouble isn't in my knee, my trouble's in my low back." He laughed, and said to wait and watch. So he put the needle in the back of my knee on both sides, and of all places, put another one in my ear. And I said, "My back's killing me and you are putting a needle in my ear? What kind of hocus-pocus is this?" But I went along with it. Soon, I had a feeling of warm water going down my legs. I thought, this is unusual. He says to me, "That's the life force, *qi*. And we're controlling it through the acupuncture points." I asked him how many points there are, and he said, "Four hundred, 361 major points plus another 40." I asked how many conditions acupuncture could treat, and he said, "Around 2000." I thought, that's interesting.

So he treated me and I started to feel very sleepy. When I woke up, all the trouble had gone. I had feeling back in my leg, the pain in my back was gone. So I warily climbed out of the bed, took a few steps, and there was no problem. Healed me up. And I'm thinking to myself, here we have this magnificent American hospital, with the best doctors available to me as a U.S. civilian, and they couldn't help at all. And now the pain was gone. It's like most chiropractors I've asked when I've had the honor of addressing a chiropractic group. When I ask, "How many of you are now chiropractors because you were first a patient?" most of the hands go up. They know from direct experience.

So this was a life-changing experience for you.

I had planned on returning to the United States after the end of the International Military Tribunal for the Far East. I had planned to go to law school. But this event changed my mind. I now wanted to get into natural healing, the Oriental way, which I learned has four parts. The first is acupuncture, which deals with the electricity of the body. Next, there's tui-na, which is manipulation. A lot of our techniques were ones that the Chinese were using at the time of Christ. The Palmers [who founded chiropractic] were Sinophiles, as you know. Third, herbs and nutrition. Fourth, *qigong*, mind-body, meditation for healing, also known in China as acupuncture without needles. I really got fascinated with it, so I returned to the United States looking for an acupuncture college. *There wasn't one.* That was in 1950. Today, by the way, there are 80 acupuncture colleges in the United States and there are 25,000 or more licensed acupuncturists.

You trained in acupuncture before you trained in chiropractic. If we're talking about the 1950s, to the best of your knowledge were you the first practitioner in the United States to combine chiropractic and acupuncture?

Yes.

And were you the first practitioner in the U.S. outside the Asian communities to practice acupuncture?

Health Insights Today

A SERVICE OF CLEVELAND CHIROPRACTIC COLLEGE

Summer 2009, Volume 2, Issue 3

Page 3

I was certainly one of the first. Back then, you could find acupuncture in upstairs backroom clinics in the Oriental communities of San Francisco, Los Angeles, and New York. I knew a lot of those practitioners because I searched around and developed friendships with them. When I attended Cleveland Chiropractic College, someone would say, "Now we're going to adjust the low back," and I would say, "Well, you'd better also get Small Intestine 3 and Bladder 54 at the same time." And they'd say, "Yennie, what are you? Chinese or Japanese?" And I'd say, "No, I'm Scotch-Irish." But I was just fascinated with the Orient and I still am.

Here on the wall you can see one of the first brochures I sent out when I started teaching classes. I began holding classes and I haven't stopped. The number that have taken my classes is tens of thousands. Those who are now teaching, like Drs. Amaro, Beem, Meyerowitz, Sunderlage and others were all my students. They're now doing a good job of teaching and spreading the art.

Over the years, I've invited many great acupuncturists, the best of China, Japan and Korea, and Taiwan, to teach as guest lecturers in my classes. Here's a photo of one of them, right next to me. He's an MD, Nagayama is his name, from Kyoto, Japan. He was a recipient of the Max Planck Institute's scholarship to study neurology in Germany. He contested with over 300 other MDs in Japan, and he received the top score. I brought him over here dozens of times to be a guest instructor. Others taught Korean hand acupuncture, and now Dr. Larry Beem [who teaches postgraduate courses in acupuncture at Cleveland Chiropractic College – Kansas City] has become a master of hand acupuncture. These guest faculty would put classes together, and combined with what I had learned at the Wasada College in Tokyo, we have taught this to tens of thousands of chiropractors, as well as medical doctors, osteopaths and dentists.

If a chiropractic student today asked you how and why it would be helpful to them to study acupuncture and incorporate it into their work with patients, what would you tell them?

It greatly expands their range of treatable conditions to over 2000 and it is excellent for immediate pain relief. As a result, their incomes will increase, which in turn brings more money into chiropractic institutions. Also, many patients come to us for acupuncture and are then introduced to chiropractic. I always inform patients that part of acupuncture is, and always has included, adjusting the spine. At the time when I do the report of findings, I show them the x-rays and also the graph that we use for acupuncture treatment, showing the need for both.

How much do the underlying worldviews or philosophies of chiropractic and acupuncture overlap?

When chiropractors speak of *innate intelligence*, we're really talking about *qi*. When we say universal intelligence, we're saying *taiji*. The philosophy of both is based on natural principles, that there is a healing power of the body that now and again needs a little assistance, to relieve pain and promote healing. There is a two-way flow between the skin and the internal organs, a flow of intelligence and healing, a flow that goes from an organ such as the heart, to the skin. If there's pain anywhere along the heart channel, it's diagnostic, indicating that something is wrong. At the same time, there is also a flow that goes from the nine points on the skin [the heart meridian consists of nine points on the arm] back to the organ itself. Those points are therapeutic.

When you stimulate the right acupuncture points, you not only relieve pain but you arrest the progression of disease and even reverse it so the patient comes back to normal functioning. In China, this is the definition of health – all parts of the body functioning normally. That's the same objective we have in chiropractic, relieving the pressure on the nerve. A chiropractic problem sooner or later will lead to an acupuncture problem, a meridian imbalance. And conversely, a meridian imbalance will create a reflex subluxation. Not all subluxations are primary, many are reflexes. Right there is the nexus between the two in terms of healing objectives.

Health Insights Today

A SERVICE OF CLEVELAND CHIROPRACTIC COLLEGE

Summer 2009, Volume 2, Issue 3

Page 4

In acupuncture practice, some practitioners use formulas for named diagnosed conditions and some use various methods of diagnosis to evaluate the individual energetic balance or imbalance of the patient. What's your sense of the value of the formulas and the individualized approaches?

We teach that acupuncture is practiced on three levels. The first is pain control; it's so simple a 12-year-old can do it. The second level is "cookbook" recipes, by formula. The Chinese oftentimes are critical of that, saying that when you go by a formula, you'll get results in maybe six out of ten cases. But they say that two or three more that could have been helped won't be, because you were stuck with the formula. Now, probably most acupuncture is done by formula, in Europe especially.

So there's a value to both approaches.

Yes. Now, the third level is the classical level. You palpate the pulse (or analyze by machine, which we use) and find which meridians are too high and which are too low. Then, you proceed to sedate the high ones and tonify the low ones to balance the energy flow. A lot of us, including myself, will use a combination of all three approaches.

What else would you like to share with our readers?

As healers, as long as it's within our scope (meaning no drugs, no surgery), anything that enhances the practitioner who wants to help people and make a living at the same time, is good. I believe that the core of a chiropractor's practice should be the subluxation and the adjustment. Adjust the vertebra and then follow up with treating the symptoms and the underlying cause with acupuncture because the two are so closely related.

Thank you, Dr. Yennie.

Daniel Redwood, DC, the interviewer, is Editor-in-Chief of *Health Insights Today*.