Chapter 3

The Technique of Tongue Diagnosis

The patient's face is turned to the light and the tongue is examined in a flat, stretched out position, not, however, to the extent that its natural color changes (Fig. 17). It is best to examine the tongue by daylight. If, under certain conditions, the examination has to be done by artificial light, the wrong results may be obtained. If the tongue has to be examined initially by artificial light, it is advisable to examine it again later on by daylight. It is important to distinguish between the true color of the tongue and a discoloration caused by certain foods, medication, or mechanical influences. Milk. for instance, leaves a white coating on the surface of the tongue, coffee a brown surface. Bilberries (blueberries)

and beet tinge the tongue bluish-red, whereas colored sweets make the tongue look green, yellow, or blue. Chocolate leaves a brown smear: toothpaste can leave a white laver. etc. The coating on the tongue can also be changed by brushing it with a toothbrush or after eating certain kinds of food. Food can be responsible for rubbing off a thick coating and thus make the coating look thinner or even normal. Hot, pungent, and spicy food can change the color of the tongue. leaving it either bright red or dark purple. For these reasons, the physician should never examine the tongue immediately after the patient has eaten, drunk, or brushed his or her teeth and tongue.



Fig. 17

Chapter 4

Systematic Procedure of Tongue Diagnosis

The basic method of any medical examination is the differentiation between opposed phenomena. In Chinese medicine this procedure is called bian zheng, which is the differentiation between contradictory findings. It is the Chinese version of the famous Principle of Contradiction, which for occidental science was formulated by the Greek philosophers Heraclitus, Parmenides, Plato, and Aristotle.

In examining the tongue the physician must be able to differentiate between the body of the tongue and the coating. In addition, the structure or consistency of the tongue is important. The body of the tongue is made up of the tongue muscles, arteries and veins, lymphatic vessels, salivary glands, and fine blood vessels (capillaries). The coating is the uppermost layer of the tongue. Usually, the human tongue looks soft and tender and moves freely and easily. It is light red, slightly wet, and covered with a fine white laver. Chinese medicine refers to this normal appearance of the tongue as a "light red tongue with a thin white coating" (Fig. 18).

This normal condition of the tongue changes with the seasons and climate. In summer the coating is usually somewhat thicker or it turns yellow as the result of summer heat. In autumn the coating is thin, white, and slightly dry. The physician must be aware of these natural seasonal



Fig. 18

changes so as not to confuse them with pathological ones.

In the case of illness, changes in the body of the tongue must be differentiated from changes in the coating of the tongue. The body of the tongue can undergo changes in consistency, color, and form. It primarily reflects either strength or weakness of the arterial or venous blood flow (xue qi), increased or decreased capillary pressure and lymph drainage, decreased concentration of plasma proteins, etc. In Chinese medicine this is referred to as a deficiency or a fullness of the vessels of storage and hollow organs, the jing mai, running deep inside the organism. The coating of the tongue can change in form, color, and in consistency as well. This will indicate whether the