

任脈

The Ren Vessel

任為陰脈之海其脈起于中極之下少腹之內會陰之分（在兩陰之間）上行而外出循曲骨（橫骨上毛際陷中）上毛際至中極（臍下四寸膀胱之募）同足厥陰太陰少陰並行腹裏循關元（臍下三寸小腸之募三陰任脈之會）歷石門（即丹田一名命門在臍下二寸三焦募也）氣海（臍下一寸半宛宛中男子生氣之海）會足少陰衝脈於陰交（臍下一寸當膀胱上口三焦之募）

The *ren* vessel is the sea of the yin vessels. Its vessel arises below Central Pole (CV-3) from within the lower abdomen; it divides [from the *chong* and *du* vessels] at the Meeting of Yin (CV-1) (between the two yin [orifices]).¹ It ascends and emerges, proceeding to the Curved Bone (CV-2) (in a depression above the border of the [pubic] hair on the pubic bone),² ascending from the border of the pubic hair to arrive at Central Pole (CV-3) (four *cun* below the umbilicus; it is the alarm [hole] of the urinary bladder), where it meets with the foot reversing yin, greater yin and lesser yin inside the abdomen. [From here it] travels to Origin Pass (CV-4) (three *cun* below the umbilicus, it is the alarm [hole] of the small intestine and the meeting of the three yin with the *ren* vessel),³ passing Stone Gate (CV-5) (the cinnabar field, also known as gate of vitality, is two *cun* below the umbilicus, and the alarm [hole] of the triple burner), and Sea of Qi (CV-6) (in a circular weakness one-and-a-half *cun* below the umbilicus, the sea of vitality for men), to meet with the foot lesser yin, and the *chong* vessel at Yin Intersection (CV-7) (one *cun* below the umbilicus, it is located at the upper orifice of the bladder).⁴

循神闕（臍中央）水分（臍上一寸當小腸下口）會足太陰於下脘（臍上二寸當胃下口）歷建裏（臍上三寸）會手太陰少陽足陽明於中脘（臍上四寸胃之募也）上上脘（臍上五寸）巨闕（臍上三寸）會手太陰少陽足陽明於中脘（臍上四寸胃之募也）上上脘（臍上五寸）巨闕（鳩尾下一寸心之募也）鳩尾（蔽骨下五分）中庭（臍中下一寸六分陷中）臍中（玉堂下一寸六分直兩乳中間）玉堂（紫宵下一寸六分）紫宮（華蓋下一寸六分）華蓋

(璇璣下一寸) 璇璣 (天突下一寸) 上喉嚨會陰維于天突廉泉
(天突在結喉下四寸宛宛中廉泉在結喉舌下中央)

[The *ren* vessel continues,] proceeding to Spirit Gate Tower (CV-8) (the center of the umbilicus), Water Divide (CV-9) (one *cun* above the umbilicus, the lower aperture of the small intestine) to meet with the foot greater yin at Lower Duct (CV-10)⁵ (two *cun* above the umbilicus, the lower aperture of the stomach), passing Interior Strengthening (CV-11) (three *cun* above the umbilicus), to meet with the hand greater yin, lesser yang and foot yang brightness at Central Duct (CV-12) (four *cun* above the umbilicus, the alarm [hole] of the stomach).⁶ It travels upward to Upper Duct (CV-13) (five *cun* above the umbilicus)⁷ to Great Tower Gate (CV-14) (one *cun* below Turtledove Tail [CV-15], the alarm [hole] of the heart), Turtledove Tail (CV-15)⁸ (five *fen* below the sternum), Center Palace (CV-16) (in a depression one *cun* and six *fen* below Chest Center [CV-17]), Chest Center (CV-17) (one *cun* and six *fen* below Jade Hall [CV-18] and directly between the two nipples),⁹ Jade Hall (CV-18) (one *cun* and six *fen* below Purple Palace [CV-19]), Purple Palace (CV-19) (one *cun* and six *fen* below Florid Canopy [CV-20]), Florid Canopy (CV-20) (one *cun* and six *fen* below Jade Swivel [CV-21]), and Jade Swivel (CV-21) (one *cun* below Celestial Chimney [CV-22]). From here, it ascends to the throat to meet the *yin wei* [vessel] at Celestial Chimney (CV-22) and Ridge Spring (CV-23). (Celestial Chimney [CV-22] is located in a weakness four *cun* below the laryngeal prominence, and Ridge Spring [CV-23] is located above the laryngeal prominence and below the tongue on the centerline.)¹⁰

上頤循承將與手足陽明督脈會 (唇下陷中) 環唇上一至下齦交復
出分行循面系兩目下之中央至承泣而終 (目下七分直瞳子陷中一
二穴) 凡二十七穴難經甲乙經并無循面以下之說

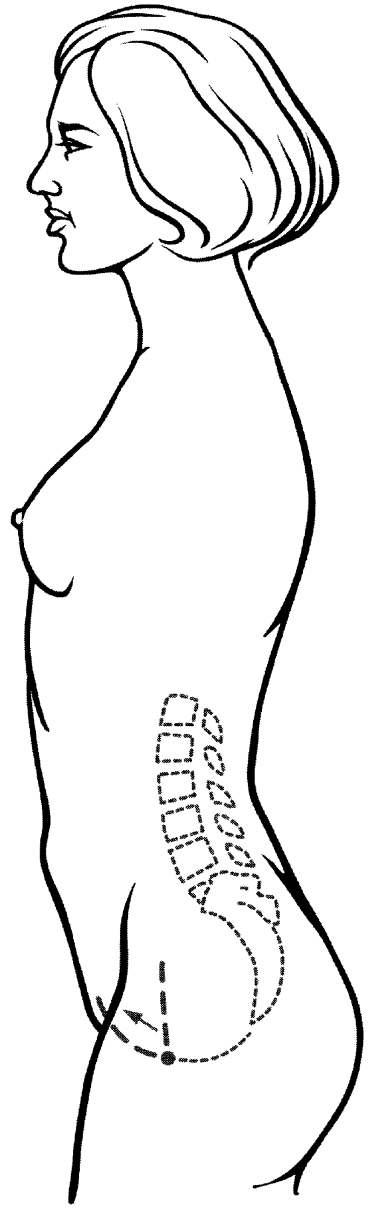
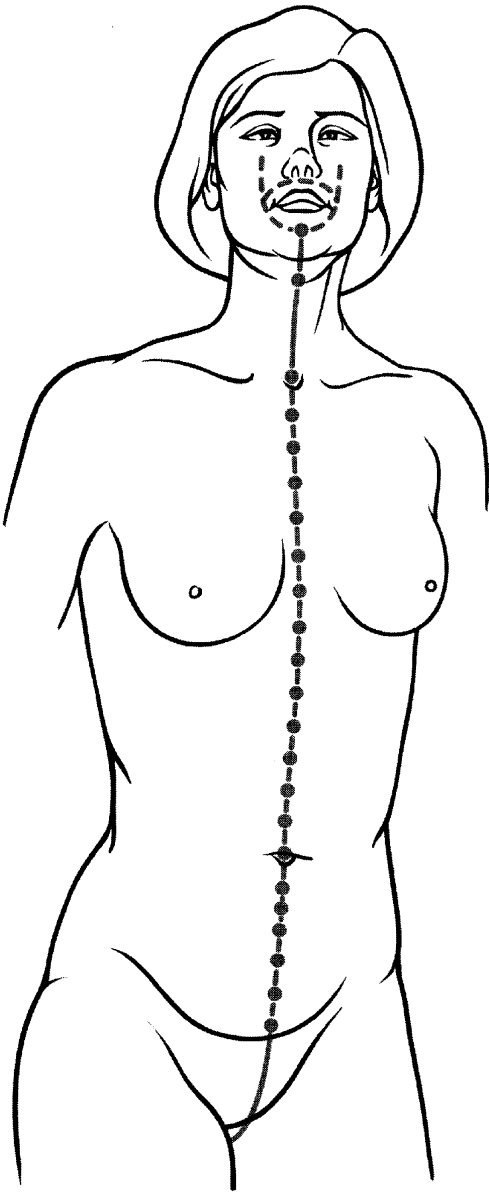
[The *ren* vessel] ascends to the jaw and proceeds to Sauce Receptacle (CV-24) where it meets with the hand and foot yang brightness and the *du* vessel (located in the depression below the lip).¹¹ It encircles the lips and reaches downward to Gum Intersection (GV-26). From here, it emerges and its trajectory splits, traversing the face and linking to the center [line] below both eyes to reach Tear Container (ST-1)¹² and terminates (located seven *fen* below the eye in a depression directly [below] the eyeball, there are two holes). In all, there are 27 holes. Neither the *Classic of Difficulties* nor *The Systematic Classic* asserts that [the *ren* vessel] “traverses the face.”

任脈之別絡名曰尾翳下鳩尾散於腹實則腹皮痛虛則痒搔

“The branching network of the *ren* vessel is named Tail Screen. It descends from the xiphoid process and disperses throughout the abdomen. When it is excessive, the skin of the abdomen is painful, and when it is deficient, there is itching and scratching.”¹³

靈樞經曰缺盆之中任脈也名曰天突其側動脈人迎足陽明也

[Ch. 2 of] *Divine Pivot* classic states: “Between the supraclavicular fossae is the *ren* vessel. [Its hole here] is called Celestial Chimney (CV-22).” “It [moves to] the pulsing vessel on the sides [of the throat] at Man’s Prognosis (ST-9) on the foot yang brightness.”¹⁴



The *Ren* Vessel

任脈為病

Diseases of the *Ren* Vessel

素問曰任脈為病男子內結七疝女子帶下瘕聚

[Ch. 60 of *Basic Questions* states: “When the *ren* vessel is diseased, men develop internal clumping and the seven kinds of bulging, while women develop vaginal discharge and mobile abdominal masses and gatherings.”

又曰女子二七而天癸至任脈通太衝脈盛月事以時下七七任脈虛太衝脈衰天癸竭地道不通故形壞而無子

[Ch. 1 of *Basic Questions*] also states that: “Women at the age of two times seven [years] attain their heavenly dew; [during this time,] the *ren* vessel flows freely and the great thoroughfare vessel fills, the menses come according to their time. At the age of seven times seven [years,] the *ren* vessel is empty and the great thoroughfare vessel weakens and heavenly dew is exhausted. The passages of earth are obstructed, the body deteriorates, and [a woman] can no longer bear children.”¹

又曰上氣有音者治其缺盆中（謂天突穴也陰維任脈之會刺一寸灸三壯）

[Ch. 60 of *Basic Questions*] also states: “When there is an audible ascent [of counter-flowing] qi, then treat it between the supraclavicular fossae.” (This is referring to the Celestial Chimney [CV-22], which is the meeting hole of the *yin wei* and *ren* vessels. It is pricked to a depth of one *cun*, and moxa is applied three times.)

脈經曰寸口脈來緊細實長至關者任脈也動苦少腹繞臍引橫骨陰中切痛取關元治之

The *Pulse Classic* states: When the wrist pulse is “tight, fine, and excessive, and [also] long arriving at the middle position, this is a *ren* pulse. [When the pulse] is perturbed in this way, [the patient] suffers from pain in the lower abdomen and around the umbilicus that radiates to the pubic bone and a stabbing pain in the genitals. Select Origin Pass (CV-4) to treat it.”

又曰橫寸口邊脈丸丸者住脈也苦腹中有氣如指上搶心不得俯仰拘急

It also states: “Forcefully striking across the qi opening pulse with a pill-like hardness to the vessel is the *ren* pulse. [When the pulse] is perturbed in this way, [the patient] suffers from a finger-shaped mass of qi in the abdomen that may surge into the heart such that there may be an inability to bend either forward or backward, and gripping urgency [in the chest].”

On Diseases of the Ren Vessel

Bulging Disorders

Imbalances in the *ren* are characterized by internal clumping. *Basic Questions* and the *Classic of Difficulties* are in fundamental agreement on this point, although they differ slightly in their emphasis. Li Shi-Zhen begins his chapter on diseases of the *ren* with a passage from Ch. 60 of *Basic Questions* presenting this idea.¹

[Ch. 60 of] *Basic Questions* states: “When the *ren* vessel is diseased, men develop internal clumping and the seven types of bulging, while women develop vaginal discharge and mobile abdominal masses and gatherings.”

The 29th Difficult Issue of the *Classic of Difficulties* contains a very similar passage that identifies all the *ren* symptoms as a species of internal binding: “When the *ren* becomes diseased, one will experience internal binding. Men will develop the seven types of bulging, and women will develop mobile abdominal masses and gatherings.”²

According to Xu Da-Chun, “binding (*jie* 結) means ‘taut and tense’ (*jin jie* 緊結), or ‘congealed’ (*ning jie* 凝接). The *ren* vessel originates from the cervix and proceeds along the abdomen. Hence, [in the case of illness], internal knots will result.”³ In the *Classic of Difficulties*, bulging, leukorrhea, and masses and gatherings are simply the gender-specific expressions of internal binding. Women are not commonly diagnosed with bulging diseases, and men do not tend to suffer from masses and gatherings.

The medical literature invariably refers to seven types of bulging but the constituents of this list are not fixed. According to Yu Shu, there are seven types of bulging: “The seven bulging are called reversal bulging, plate bulging, cold bulging, amassment bulging, receptacle bulging, wolf bulging, and qi bulging” (七疝者謂厥疝盤疝寒疝癥疝附疝狼疝氣疝).⁴

Ch. 64 of *Basic Questions* identifies wind bulging (*feng shan* 風疝) and fox-like bulging (*hu shan* 狐疝) with the five viscera.⁵ Ch. 49 of *Basic Questions* also mentions a protuberant bulging (*tui shan* 癰疝).⁶ All of the above-mentioned diseases are characterized by pain or swelling in the abdomen or scrotum. They are typically attributed to a deficiency of qi and blood, dietary irregularity and exposure to cold, or a congealing of cold qi. (For a more comprehensive discussion of the role of bulging disorders in extraordinary vessel pathodynamics, see Part IV, Ch. 35 below.)

Mobile abdominal masses and gatherings (*jia ju* 瘕聚) are masses of indefinite

form that gather and dissipate at irregular intervals and are attended by pain without a fixed location. They are attributed to disease in the qi aspect of the yang receptacles. Gatherings are commonly understood as occurring primarily in the middle burner while mobile abdominal masses occur mainly in the lower burner and are associated with gynecological diseases. Given its context here, the term ‘mobile abdominal masses and gatherings’ seems to be used more in a general sense to refer to masses and gatherings of any sort that are specifically gynecological in nature.

Reproduction

Abruptly changing tacks, the *Exposition* continues with a statement from Ch. 1 of *Basic Questions* regarding the role of the *ren* vessel in reproductive maturation and decline.⁷ This passage could have easily appeared in the preceding chapter. By placing this material here, Li reframes the *ren* vessel’s normal physiological decline in a pathological light.

[Ch. 1 of *Basic Questions*] also states that: “Women at the age of two times seven [years] attain their heavenly dew; [during this time,] the *ren* vessel flows freely and the great thoroughfare vessel fills, the menses come according to their time. At the age of seven times seven [years,] the *ren* vessel is empty and the great thoroughfare vessel weakens and heavenly dew is exhausted. The passages of earth are obstructed, the body deteriorates, and [a woman] can no longer bear children.”

In women, the development of the human body, sexual function, and the ability to produce offspring all depend on the heavenly dew. The arrival of the heavenly dew corresponds to the point at which reproductive maturation is reached, and its exhaustion corresponds to the point at which reproductive function disappears. Yang Shang-Shan observes that the “The heavenly dew is essence qi.” In his view, the two terms are synonymous.⁸

Counterflow

So far, accumulations of one type or another have characterized the pathology of the *ren*. Li now introduces ascending counterflow into the mix, a pathodynamic more characteristic of the *chong* than of the *ren*.

[Ch. 60 of *Basic Questions*] also states: “When there is an audible ascent [of counterflowing] qi, then treat it between the supraclavicular fossae.” (This is referring to the Celestial Chimney [CV-22], which is the meeting hole of the *yin wei* and *ren* vessels. It is pricked to a depth of one *cun*, and moxa is applied three times).

An audible ascent of counterflowing qi refers to labored breathing that can be heard by others. The term includes, but is not limited to, asthma. Admittedly, this sounds much like a *chong* vessel presentation. Since they have so many physiological characteristics in common, the *chong* and *ren* naturally share many symptoms, yet they are distinguished by one important feature. Both vessels may be afflicted by counterflow, accumulations, and masses, yet counterflow in the *ren* channel presents exclusively in the upper burner. Counterflow in the *chong* may occur in any burner, and it tends to occur in the middle and upper burners simultaneously.

This passage originates in Ch. 60 of *Basic Questions*. Li's version alters its meaning slightly but significantly. Where Li's interest is limited exclusively to Celestial Chimney (CV-22), the original is typically interpreted as a reference to two separate treatment holes: "If there is audible qi ascent, then treat it in the center of the throat and at [the hole] in the supraclavicular fossae."⁹

The *Yellow Emperor's Inner Classic: Grand Essentials* concurs with this interpretation. The center of the throat refers to Ridge Spring (CV-23), and the center of the supraclavicular fossae refers to Celestial Chimney (CV-22).¹⁰ Li's rationale for omitting Empty Basin (ST-12) from this sentence is consistent with his citation of *Divine Pivot* at the close of the previous chapter, where the text states, "Between the supraclavicular fossae is the *ren* vessel. [Its hole here] is called Celestial Chimney (CV-22)."

Pulse

Li Shi-Zhen concludes his brief discussion of the *ren* with two passages from the *Pulse Classic* describing the pulse-symptom complexes associated with *ren* pathology. These pulse images vividly echo the two essential pathodynamics of the *ren* vessel.

The *Pulse Classic* states: When the wrist pulse is "tight, fine, and excessive, and [also] long arriving at the middle position, this is a *ren* pulse."¹¹ [When the pulse] is perturbed in this way, [the patient] suffers from pain in the lower abdomen and around the umbilicus that radiates to the pubic bone and a stabbing pain in the genitals. Select Origin Pass (CV-4) to treat it."

The first of the *ren* pulses originally appears in the *Pulse Classic's* chapter titled "On Balancing Diseases of the Eight Extraordinary Vessels." In this text, however, the location of the treatment hole is less specific than Li's version. It simply states, "Select [the hole] three *cun* below the umbilicus."¹²

Like the *chong* pulse, the text provides no information regarding the quality of the distal position. The pulse image is focused on the tense, fine, excessive, and long qualities in the middle and proximal positions. It extends only to the middle position, and it is specifically associated with pain in the lower burner. By contrast, the other *ren* pulse mentioned by Li is associated with abdominal masses and counterflow causing chest "urgency" accompanied by impaired range of motion in the torso. This pulse appears in the same chapter of the *Pulse Classic*.


	OUTSIDE (RADIAL)	MIDDLE	INSIDE (ULNAR)
DISTAL			
MIDDLE			
PROXIMAL			
	DISTAL	MIDDLE	PROXIMAL
SUPERFICIAL			
MIDDLE			
DEEP			

Fig. 27-1 A tight, excessive, and long *ren* pulse

It also states: “Forcefully striking across the qi opening pulse with a pill-like hardness to the vessel is the *ren* pulse. [When the pulse] is perturbed in this way, [the patient] suffers from a finger-shaped mass of qi in the abdomen that may surge into the heart such that there may be an inability to bend either forward or backward, and gripping urgency [in the chest].”

This second *ren* pulse is illustrated in Fig. 32-1 (p. 298). Where the first *ren* pulse is only palpable in the proximal and middle positions, the latter *ren* pulse is felt only in the distal position. The pill-like hardness in the distal position reflects the qi counterflow congesting in the chest. Both passages describe abdominal masses accompanying counterflow, however the influence of masses are not limited to this. The inability to bend forward or backward, a symptom more typically associated with the *du*, belies the close relationship between the *ren* and the *du* vessels: symptoms reminiscent of the *ren* and *chong* vessels may actually be caused by imbalances in the *du*. In the subsequent chapter on “Diseases of the *Du* Vessel,” Li makes a point of correcting this misconception. Here, the opposite is true, further illustrating how inextricably tied these three channels really are.

Summary

For Li Shi-Zhen, *ren* vessel pathology is synonymous with bulging disorders of all sorts, and, to a much lesser extent, counterflow patterns into the chest. Clearly short of things to say in this chapter, Li also includes a description of the role of the *ren* in normal maturation, reproduction, and aging. Curiously though, Li makes no mention of how to address this, one of the most pivotal vessels in the entire channel system, with herbal medicine.