“Feeling lighter”: Why the patient’s treatment evaluation matters to the health scientist

Elisabeth Hsu*
Institute of Social and Cultural Anthropology, University of Oxford, Oxford, UK

ABSTRACT

“Feeling lighter” is a cross-culturally found subjective patient experience, but it may well contain a comment on intersubjectively recognisable physical, neuro-chemical and bio-electro-magnetic processes that natural scientific research can identify. The health scientist is advised to take the patient’s experiences seriously, and regard them as a possible source of for future research topics.

Keywords:
connective tissue
objectivity
subjectivity
well-being

1. Introduction

The patient’s treatment evaluation is often undervalued because it is considered too “subjective”, particularly in scientific circles that are interested in so-called “objective” knowledge it is relegated to the realm of “opinion” and “belief”. This is so despite the fact that historians of science have demonstrated how very profession-specific “objectivity” is, and although medical anthropologists have underlined the aspects of “subjectivity” that can be highly intersubjective. This article underlines that the patient’s treatment evaluation is crucial not only for the medical practitioner aiming to improve an individual’s health condition, but also for the scientist researching medical “efficaciousness”, “effectiveness” and “efficiency”, and the effects of medical treatment more generally. This article focuses on a pervasively found comment that – in many different cultural contexts – patients give for indicating improvement in their overall condition: “feeling lighter”.

“Feeling lighter” is not an objective fact. Nor is it a solipsistic idiosyncrasy. This frequently reported patient experience was never the focus of the author’s various ethnographic projects, but patients were found to report on it in fieldwork undertaken in China (in 1985, 1988–1989 and 2009–2010) and Africa (about a month a year between 2001 and 2008), in Europe (unstructured, from 1980 onwards) and also, in passing, here and there, in medical anthropological discussions. Such crosscultural continuity is of interest to anthropologists who aim to overcome extreme relativism and cultural constructivism, and nevertheless try to do justice to other peoples’ ways of thinking and being. Natural scientists, physiologists and other health researchers may also be intrigued that the experience of patients, who typically are deemed to have culturally specific and very subjective views, shows such crosscultural continuity. Importantly, feelings

* Corresponding author. Institute of Social and Cultural Anthropology, University of Oxford, 51/53 Banbury Road, Oxford OX2 6PE, UK
E-mail address: elisabeth.hsu@anthro.ox.ac.uk
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are being communicated here, rather than objective knowledge.

The theme in question emerged from observing diverse forms of acupuncture in New Age and other contexts, where it is delivered on a regular basis as a “preventive medicine”, and is frequently experienced as “relaxing”. Some patients speak of “floating in the air” while being needled, and thereby hint at “feeling lighter” without actually saying so. Likewise, qi guang 氣功 meditation or zero-balancing can be experienced as “relaxing”, and patients in England would occasionally comment that it made them “feel lighter”. In China, not only acupuncture, massage, and qi guang, but also treatment with Chinese herbal decoctions could result in patients saying they felt “a bit lighter” (qìng yìdiǎn 輕一點).

Among the Chinese medical principles that lead to such an outcome of “feeling lighter” belong the standard methods of inducing sweating or an evacuation of the bowels or vomiting (下下吐 han, xia, tu). In recent fieldwork, carried out in the Shexian county of Huizhou (autumn 2009), a ninth-generation traditional medical doctor who was known for his treatment of digestive problems had many patients complaining of “feeling heavy” (zhòng 重). The herbs he prescribed were intended to “move qi” (xíng qì 行氣) and often relieved them of their constipation. This, they said, made them “feel lighter”.

In this context, it is important to keep in mind that there are a variety of verbs and adjectives that relate to bodily processes within the same semantic field. Accordingly, conditions of men 悶, “to be oppressed”, and yù 鬱, “to be depressed”, are also improved by “making qi flow” (xíng qì). The same applies to obstructions (bì 阻), concretions (zhengjia 病氣) and repletions (shì 實) that hinder the flow of qi. However, while the phrase manzu 滿足 expresses satisfaction—the bodily and emotional satisfaction after a meal, for instance—to be full (mǎn 滿), to have a full and expanding abdomen (fù zhòng man 腹中滿), or to be upset and full (fān mǎn 烦滿), which one typically is in the heart (xīn 心) and the chest (xíng man 胸滿), are negatively experienced. Likewise, while a depletion (xū 虛) tends to indicate a pathological state, the void (xū 虛) inside the bamboo rod is cherished as it symbolises an unoccupied mindset, that like a bamboo plant is gently swaying in the wind and going with the flow (see vignette 2). In a similar vein, the words qìng and zhòng in Chinese do not intrinsically have positive and negative attributes, just as light-headedness in English is barely a positive attribute, and light-footedness only so in certain contexts, and just as gravitas can sometimes provide in a positive way the necessary weight and authority. In nonmedical contexts, the word qìng can convey a sense of the facile and superficial, and zhòng is often used in a positive way, such as in zhòngshī qìng qí 重視感情, “to take seriously feelings and emotions”, which is considered a good thing in China. However, in Chinese medical contexts, just as in some Daoist religious ones, a going with the flow and a certain lightheartedness of being is often cherished. An ethnography focusing on such bodily experiences of betterment promises to be rewarding; tentative inroads have already been made.

To be sure, “feeling lighter” expresses patient satisfaction not only with regard to the acupuncture or herbal Chinese medical treatments. Crossculturally, in many different languages, people speak of “feeling lighter” as a sign of betterment. The term “betterment” is here used to refer to a physical, emotional, and socially experienced process. In contrast to the notion of “curing”, which implies the elimination of what biomedicine recognizes as disease, and “healing”, which refers to the psychosocialcultural reinterpretation of the situation, “betterment” is meant to express a more holistically comprehended, multifaceted, and socially negotiated process that often involves different stages. While this process may be not without fall backs, “betterment” does not preclude complete recovery; this is in contrast to the notion of merely providing “relief” (a word semantically close to lightness), which biomedical practitioners tend to use in palliative care.

If one assumes, as phenomenologists do, that people experience the world through their body and that the body is a generative principle, i.e., that the position of the self in space and its bodily projection into the surroundings is crucial for the ways in which a person knows the world, one may not be entirely surprised that people cherish a body that feels lighter; and that they do so crossculturally. For instance, the dance-induced and meditative forms of “feeling lighter” may well relate to a common experience of the body’s physicality, such as its gravity. Apart from alluding to gravity, the lightness patients experience may also refer to other bodily processes. For instance, biochemical processes are known to modulate the nervous system in ways that are experienced as uplifting. While alcohol may be experienced as loosening one’s self-restraint, it can result in a “hangover” the following day and feelings of a sluggish “heaviness”. By contrast, coffee and tea have long been treasured for their relaxing and simultaneously alertness-enhancing effects. Scientists have demonstrated that the chemistry of caffeine affects the psychoneural system, and bioculturalists have pointed out that although in the entire plant world caffeine is produced in very different geographical locations by only seven botanical genera (namely Coffea, Camellia, Theobroma, Cola, Ilex, Paulinia, and Citrus), human beings have identified all the plant species that produce it, and have made the ingestion of their caffeine-containing parts (leaves, beans, nuts, and skin) an integral part of ritualized cultural practices.

The third experience of “feeling lighter”, discussed at length below, still, however, awaits scientific validation. It concerns a crossculturally well-known experience that walking in the moist and cool woods can have a surprisingly revitalizing effect, particularly on an oppressively hot day. Surely, temperature must play a role, as both heating the body up through dance and cooling it down through a walk in the woods can be experienced as revitalizing. Metaphor, invoking the coolness of water or the heat of the fire as a life-giving trope surely plays a role too. However, it would appear that the experience of “feeling lighter” cannot be reduced to either temperature or metaphor.

Every gardener will have noted how, on a dry summer day, a water sprinkler makes the air feel cooler. It also makes dusty air cleaner. Environmentalists proclaim that the water of well-drained meadows and swamps absorbs dust particles, ions, and free radicals, and thereby “cleans” the air. Airports are often surrounded by wetlands; one associates these wetlands with the margins of the cityscape, but perhaps they have a more important health function than is generally known. Heathrow’s Terminal 5 has a fountain by the bus station that revitalizes the jet-lagged traveller by cooling the air; it also
makes it seemingly smell fresher. Urban planners know that the foliage of large trees, which produces oxygen and water, absorbs the dust of “civilization”, particularly when situated by large traffic veins and building sites. Dust is known to be not merely unpleasant, but also pathogenic.

In other words, the air on a hot and dusty road will invariably have a higher electrostatic level than that in a cool and moist forest. This might have a direct effect on certain tissues in the human body, as all cells are bioelectrically sensitive and active; Ashcroft speaks of the “body electric”. However, Malmivuo and Plonsey, on the basis of Maxwell’s equation, demonstrated that the flow of electricity in circuits can produce a magnetic field, have long intimated the importance of going beyond the “body electric”; they differentiate between the triad of bioelectricity, bio-electro-magnetism, and biomagnetism, and discuss how bioelectricity and bio-electromagnetism affect the nerve tissue.

As recent research has demonstrated, however, not only nerve tissue, but also other tissues in the human body are likely to be sensitive to bioelectricity (see Section 4). A good number of empirical studies have shown that weak magnetic fields affect biological systems in both biophysical and biochemical ways. Even though the electronic age of mobile phones and computers is relatively young and even though most experiments still lack replication, it is today, as Neitzke puts it, hard to doubt the existence of such interactions. How the bioelectricity, bio-electro-magnetism, and biomagnetism of the environment affect and thereby modulate a person’s disposition in everyday life remains clearly a contentious issue. The installation of mobile phone stations throughout the globalized world, in particular, but by no means that alone, has given rise to many complaints of so-called “idiopathic pain” in “hypersensitive” people.

To be sure, no one would suggest that the revitalizing experience of “feeling lighter” after a walk in the moist coolness of the woods is primarily due to changes in the “bioelectromagnetic” body. Nevertheless, in a medical anthropological manner that attends to the socioecological dimension, the third section of this article will contemplate the possibility that “feeling lighter” may be a subjective experience that is prompted by the biophysical and biochemical ways in which the patient’s body interacts with external dust particles, ions, and free radicals in the environment.

The following three sections of this article present the subjective experiences of patients in different cultural settings in the hope of inspiring further research into the complexity of the physical, chemical, and bioelectromagnetic processes that may modulate them. “Feeling lighter” may indicate to the health researcher that patients are experiencing (1) a challenge to gravity, as perceived with their kinaesthetic and proprioceptive receptors; (2) a modulation of their psycho-neural disposition through the ingestion or inhalation of molecules; and (3) a relaxation of bio-electro-magnetically sensitive tissue, which appears to become tight when it is exposed to charged dust particles in air currents of the environment. To be sure, the emphasis is here on “feeling lighter” as an unmediated and immediate bodily attentiveness of the “body ecologic”. This is not to deny that the patient may also undergo further transformations in ways that psychology or symbolic anthropology are good at explaining.

### 2. Approaching the divine by contravening gravity: feeling lighter in dance seances

It is well-known that “soul loss” presents in listlessness and heaviness, in Meso- and South America as well as in Asia. The shaman or healer retrieves the soul in many different ways. Sometimes, although not in the cases described by Rubel and Desjarlais, dancing is indicated. Dancing seances are generally not an aspect of the everyday, but take place at special occasions, be this on a Sunday, at a birthday party, or in a ritual organized specifically for treating a patient. When people then comment that they “feel lighter”, they may well refer to a self that has regained its spiritedness. The soul or spirit enlivens and “uplifts” the patient.

In this context, it worth noting that often, from a cross-cultural perspective, the soul or spirit is manifest in a bird (in Christianity, for instance, the dove is part of the Holy Trinity). Birds overcome their gravity when they soar high into the sky, whereas gravity keeps human beings on the ground. Perhaps, precisely because their gravity makes human beings so earth-bound, they associate the birds’ ability to overcome their gravity with the divine? Some peoples assume that birds do not die. Perhaps this is why in some cultures they are associated with immortality and eternal life. Margaret Stacey, in the context of discussing the anthropological method that productively engages with the erroneous presumptions that researchers bring into fieldwork, recounts that it was only by chance that, after 2 years in the field, Gilbert Lewis overheard Gnau men in New Guinea discussing whether or not birds would die of their own accord. After all, no one claimed to have seen a bird’s carcass in the forest.

#### Vignette 1: Dancing in a “church” in Mbeya region, Tanzania

Hearsay about a Chinese medical practice had brought me, during fieldwork on Chinese medicine in East Africa, into Mbeya region, through which the Chinese-built TAZARA railway runs, in the Tanzanian highlands approximately 1000 m above sea level. The medical landscape in this region was populated by “churches,” which were headed often by remarkable women of Nyamwesi and other ethnic origin. When in office, these women were dressed in nun’s costume: they wore a long white robe and a white, blue-bordered cotton veil, that showed the cross of Jesus Christ above their front. They ran dancing seances on one day of the week, usually on Saturdays. Each woman had her own church; churches were large rectangular mud block buildings that could be distinguished from the usual dwellings by the small wooden cross on their gable. Passing by, one could hear the ngoma drumming (in all instances I observed, this was done only by men and boys; for a fuller account, see Janzen). Stepping into one of these churches, one would soon be taken by the beat of the drum, and start dancing, like everyone else—women and men, young and old. Clients were typically possessed by shetani (Satan or Satan-like spirits), a church’s head explained to me. By regularly coming on Saturdays to dance, they held those shetani in control.
As the drumming progressed, the dust from the earthen floor, the beat of the drum and the hot sweat of the dancers would mingle. I watched some dancers slowly swaying to the rhythm, others ecstatically throwing their limbs in all directions, while yet others, who had fallen, were rolling on the ground, back and forth, or sometimes just lying or crouching there, seemingly lifeless. Suddenly the church’s head stood in front of me. Her index finger pointed at my left leg; it was hopping up and down, without my having noticed it, in its own rhythm, and without myself making an effort. I could not stop it from moving once she had pointed at it. She then beckoned a helper to sprinkle my face with water, not that I had lost my consciousness, but the sharp pinches of the cold water brought me down from my high. Why had she stopped me from going any further? She did not explain. However, it was evident that she knew about the risks of such dancing. She had diagnosed me as being possessed by shetani. This episode made me acutely aware that the dancers—however grotesque their movements—were being carefully supervised.

“Feeling lighter”, which dancers often say after having collapsed and been brought back to their usual wits, may thus relate a feeling about a body that is more spirited. The patient’s subjective experience of “feeling lighter” after a dancing seance may, inter alia, refer to feelings of how the physics of gravity is challenged by an ensouled and spirited person.

3. Feeling lighter through eased attentiveness to the other: being sociable through the ingestion of caffeine

The ingestion of caffeine-containing plants has been ritualized in many societies. Some of those rituals have been about reaching out to the divine, such as the drinking of coffee among Sufi groups interested in prolonging waking times and stamina in meditation and other devotional activities. However, the drinking of coffee in coffee houses, as became fashionable in 17th and 18th century Europe and its colonies, seems to have celebrated sociability and being social. Perhaps the neuro chemistry of caffeine made people feel more relaxed and engage with more ease in social interaction.

In early modern Europe, coffee and sugar (or tea and sugar in England) both came from the colonies; they were exotic and powerful—one, with its bitterness, had alerting psychotropic effects, the other, which made the former palatable, provided calories and energy. The coffee houses, populated mainly by men, were commercial establishments, and yet the drinking in them has been described as a ritualized practice. The imagined communities Anderson invokes involved not only the reading of the same printed papers and the sharing of the news of the day, but, as suggested here, over a cup of coffee, also the sharing of substances. Is it possible that caffeine enhances one’s ability to attend to the other with an ease and attentiveness that picks up unspoken subtleties, and in this way facilitates conversation?

Thompson points to a concomitant change of the concept of time. The changed time concept brought with it productivity in a rhythm other than one’s own, for instance that of the machine. Farmers and factory workers both worked long hours. However, where the farmers worked in their own rhythm, which in Europe would have been in tandem with that of their oxen, factory workers were increasingly submitted to another rhythm, that of the machine; and that of the clock.

The celebration of an attentiveness to the other appears also to be intrinsic to other ritualized occasions that involve the ingestion of caffeine. Women practice tea ceremonies in Japan, chadō, in order to enhance their “social interaction skills”. Tea ceremonies can also help patients suffering from depression. The ritualized setting gives them a temporal structure, and the repeated actions instill a habit; their routinization renders them more confident.

Vignette 2: Mental health through bodily discipline in chadō (by Kaeko Chiba; based on Chiba)

Chadō is known as a Japanese traditional art form, and many women practice chadō in Japan. Based on my fieldwork in Akita city, Japan, practitioners appear to believe that they derive mental healing from conducting the chadō ritual. At practitioners’ keiko (daily practice), they practice temae (the tea procedure), and through temae, practitioners acquire bodily and mental discipline. This concept of bodily and mental discipline is derived from Zen Buddhism. Zen Buddhism believes that enlightenment emerges through the status of mu (emptiness or nothingness) and in chadō, practitioners are trained to keep their minds empty. In this mu state, practitioners are not even allowed to think about the order of a tea procedure, and teachers assert that this mental discipline only evolves through bodily discipline. Bodily discipline is obtained by a repetition of keiko, and this keiko also emphasizes sensory experiences: practitioners have to imitate, repeat, and remember temae not through their mind but through their bodily senses. Practitioners memorize the appropriate temperature of hot water through their skin, and listen and memorize the sound of the boiling kettle through their ears.

After acquiring this bodily discipline, practitioners can reach their mental discipline—mu condition—and on this mu status, practitioners become comfortable to control their emotion. By experiencing this bodily and mental control, some practitioners comment that chadō helps to calm them in their mundane life and eventually improves their depressed condition.

When I first met Kakudate-san, I remember that the impression she gave was quite different from that of other practitioners. Kakudate-san was in her late 20s, she was not wearing any make-up, and her hair was tied back roughly. She never smiled, and she never appeared to talk to anyone. When her teacher introduced Kakudate-san to me, she just bowed her head without either eye contact or smile. By the end of my fieldwork, I managed to conduct an interview with her, and after a couple of hours, she started to talk about her health:
“You see, I am actually taking medicine everyday for my mental condition. My doctor says I am mentally depressed, you see. I normally don’t feel like going out or seeing anyone, so I tend to stay at home. But one day, my teacher said to me that I should come for tea practice. You see, my mother was a friend of hers. First, I didn’t fancy it much. I don’t like meeting people, you know. But I somehow continued. I like practicing temae, it just makes me concentrate. It stops me thinking too much, I feel calm, I feel I am OK, I feel stronger spiritually (seishinteki ni tsuyokunaru). I told my doctor about my tea practice; he also thinks it is a good thing for me.”

After my interview, I had a chance to talk to her teacher: “Well, she is much better now. She used to look so worried, but then I began to see that she likes temae, so I just let her do that; I don’t let her do other tea-gathering or seminar things. Now, she is much calmer, I can see the difference from last year. Thanks to tea practice, she has become spiritually stronger. Can you see, this is just another perspective of chadō? It’s amazing, isn’t it (sugoi?)”

From Kakudate-san’s interview and her teacher’s comment, it was clear that Kakudate-san was mentally depressed, yet they both believed that temae practice had given her a sense of spiritual strength. Taking the insider’s point of view, including my own experience, I argue that there is a sense of spiritual improvement to be gained from taking part in chadō ritual.

Although it is not explicitly mentioned in the vignette above, the tea ceremony evidently trains one how to be attentive to the other, regardless of whether the other is boiling water in a kettle or a person partaking in the ceremony. Daily practice instills inner strength. “Feeling lighter” appears here to be associated with a momentarily acquired ease to be social in a nuanced way. Socio-ecologically sensitive research may additionally set out to explore to what extent the ingestion of the stimulant caffeine may in fact ease one’s efforts of cultivating one’s attentiveness for the other. To which extent does caffeine allow its consumers to practice a form of sociality that cultivates such attentiveness to the other? (And, if one were to take this thought further, to what extent has it helped to streamline entire populations to submit to a rhythm other than their own, namely that of clockwork?)

4. “Feeling lighter” through a sense of increased suppleness and autonomy

The experience of “feeling lighter” after a walk in the woods is based largely on autoethnographic observations between March 2011 and March 2012. I had been suffering from reduced mobility in the hips and shoulders, and spent several 3-weeks-long spells in a spa in order to soften, stretch, and nourish the hardened connective tissue in my joints. While waiting for my treatment in the corridor, I acquainted myself with Monica.

Vignette 3: “Feeling lighter” after walking in the woods

Monica told me about her experiences of “feeling lighter” while we were sitting in the waiting room of an alpine spa, which did not primarily cater to the wellness and beauty market but treated mostly chronic pain patients whose health insurance covered Naturheilkunde, i.e., T/CAM (traditional and/or complementary and alternative medicine). Monica was, like myself, in therapy for treating stiffness of the connective tissues. This involved a combination of moor and mineral baths, and different types of massage and physiotherapy. The treatment was typically delivered every other day for 3 weeks, for a total of nine times. It was believed to soften the bodily tissues and give them unusual stimulation. This entailed compulsory days of rest in between. Betterment was expected to occur not so much during but after the treatment cycle, when the patient had returned home.

Monica had complaints of a stiff neck, a very rapid decline in her vision, and what she called a “tight head.” She maintained that connective tissue not only structures and compartmentalizes the nervous tissue in the brain, but also nourishes it, and that its hardening was therefore responsible for many a decline in cognitive and perceptual functions. She undertook long walks on the days between treatment, and, as encouraged by her therapists, tried rolling her neck whenever possible, even when walking. Sometimes, her neck was completely immobilized and rolling it was impossible. Sometimes, however, her movement was loosened. This happened regularly in moist and particularly shady spots of the large forest next to the spa. With only a few footsteps, one could walk into and out of such an area of bliss, Monica noted.

This “feeling lighter” could also happen by the side of a stream, but only when a slight breeze of air arose from the stream and gently stroked her neck and ears; if Monica passed by the same stream in glistening sunlight or when the wind blew in another direction, this would not happen. And sometimes, when she climbed the mountain ravines and a cool breeze of air came down the snowy mountain tops, the connective tissue in her neck would loosen too. Likewise, there were waterfalls by which she would spend long moments, rolling her neck and rejoicing from the release she then felt. If she urinated in the shade of a tree in such an area, she would at times feel her head instantly starting to feel even lighter.

There is little doubt that Monica had developed a “body ecological” awareness of some sort. A waterlogged, cool, and moist environment allowed her to roll her neck with more ease. I wondered why. I knew that waterlogged environments absorb dust and free radicals, and I imagined the electrons on her head and neck literally dropping off her, being absorbed by the moisture of the meadows or carried away by the water drops in the air flows coming from the stream. Indeed, Monica told me how one day, while waiting for the bus on a road by a small stream, she held her metal Nordic walking sticks into it and within minutes her head felt lighter.
As I learnt during this year in long-term treatment, one can train one's sensitivity to become attentive to whether one's connective tissue becomes tighter or not in certain micro-environments. For instance, I started attending to the recurrent experience that upon entering certain rooms or outdoor spaces I would suddenly be overcome by an urge to urinate. Not that I was incontinent, as my general practitioner assured me, but, as one of the T/CAM therapists with whom I was in treatment during that year explained, the connective tissue in my pelvic area was very tight and appeared to exert a pressure on my bladder in those circumstances. Entering certain rooms, such as my office, would cause in me an urge to urinate, sometimes so urgently that the only way not to have to do so instantly was to step quickly into another room, in which I would not feel the urge as intensely. Stepping from the bus into some bus stations, I experienced similar sudden urges of which I had not been aware while in the carriage. I also remembered that 5 or 10 years ago, coming off the train from London and walking home along the waterlogged towpath of the River Thames would reduce these urges, but since it has been tarred, this no longer grants such a relief.

My therapists commented that connective tissue can become tightened even if the sufferer is curiously unaware of it, although it eventually can have a far-reaching systemic effect on the digestive and hormonal system, and also on perceptual and cognitive faculties. Someone suffering from irritable bowel syndrome, from rhinitis or asthma, from menopausal problems, from other hormone-related and/or emotional problems, quite apart from having all kinds of musculoskeletal problems, may in fact suffer from a tightening of the connective tissue (Table 1). It also seemed to me that concentration problems and/or an at times a very rapid reduction of one's perceptual faculties, such as some forms of short sightedness or a certain deafness, could be temporarily reversed by massage. Likewise, some sorts of tooth aches, slight ear inflammations, enlarged tonsils, sore throats and the like could be eased by a massage of the connective tissue.

Interestingly, the tightening of the connective tissue can be accompanied by a change in complexion, although the sufferer will generally not present with a complaint of a specific bodily dysfunction. One of my therapists had noted a change in her own complexion, it was “turning cheesy” as she said. She said that she felt no different in her body but I had noticed that her connective tissue in her neck had become tighter (field experience, March 2012). In this context, it is worth noting that East Asian medical doctors are well trained in detecting this sort of change in complexion, having been taught to treat what their doctrine calls wēi bìng 未病—a disorder that has not yet become manifest. I was interested to note that one day, after my Korean acupuncturist had released a tightness in my shoulder very noticeably, he noted the following day that it was less yellow (huáng 黃); I had not noted it myself but a glance into a mirror confirmed his observation. It was as though changes in the tightness of the connective tissue presented themselves in the complexion (se 面), which in East Asian medicines provides diagnostic information.

Research undertaken to legitimize acupuncture as a scientifically based therapy has highlighted how acupuncture loci are positioned at the interface of different layers of connective tissue, suggesting that acupuncture needling affects the connective tissue through mechanotransduction. Connective tissue, which is known to every biomedical scientist for its structuring functions and its responsiveness to mechanical impact, is also a body-wide signaling network: it has been found to be a communicative tissue that communicates with electrical (J. Schroen, 2011, personal communication), photochemical (R. van Wijk 2011, personal communication), cellular, and tissue remodeling signals.

It appears that all kinds of T/CAM practitioners attend to signs and symptoms that result from a tightening, stiffening, and misalignment of the connective tissue. When Low discusses how traditional Xhosa healers in Namibia massage the abdomen and the organs in it, it appears likely that the connective tissue holding the organs in place is the main target of their massage. In the CAM treatment I experienced in the alpine spa, this sort of abdominal massage was offered by so-called “visceral osteomyologists”, some of whom claimed that, through their correct positioning of the organs, they could treat anything from infertility (through the correct alignment of the uterus) to reflux or constipation (through the appropriate positioning of the stomach or large intestine).

Do contemporary health experts take seriously patients who suffer from a tightened connective tissue and have developed a body ecological awareness of how this tissue reacts to sudden changes caused by different micro-environments? Biomedicine knows about individuals claiming to be adversely affected by electrosmog, and classifies them as sufferers of “idiopathic pain”. Monica and I were in a therapeutic medical centre in a traditional alpine “Kurort”, which was staffed by physiotherapists, masseurs, and other biomedical professionals, who also had some training in specific CAM techniques and were open to entertaining the possibility that we were speaking about the “real” material world out there. They guarded a polite distance (e.g., in addressing patients by their surname) and generally would not disagree with the patient’s opinions; they usually met objectionable statements with silence. They appeared to have received training that it was important to strengthen the patient’s viewpoint vocally whenever they agreed with it. This did not appear to be so merely for commercial reasons (although they were members of a private enterprise and economically dependent on having clientele, the clients usually being covered by health insurance). Rather, they seemed to adhere to a certain medical ethics. They understood their role as therapist in terms of a “facilitator” who assisted patients to regain their health by strengthening their

| Table 1 – Advert in an alpine spa indicating the benefits of massaging connective tissue. |
| Effects: |
| – regulates the function of the internal organs |
| – influences the hormonal system |
| – enhances the circulation of blood in arms and legs |
| – strengthens the vegetative nervous system |
| Indicated in the case of: |
| – headaches, migraine |
| – hormonal distress |
| – respiratory and digestive problems |
| – chronic tendinitis |
| – scars |
| – problems with the blood supply through the arteries |
sense of self and by pointing out to them those regenerative dispositions that were still intact. Their motto was “Selbstheilung” (the self heals itself). The connective tissue masseur, in this role of a facilitator, also provided health advice extending to diet, exercise, sleeping habits, and social life.

5. Discussion

The patients’ evaluation of treatment is often considered too subjective or too vague and imprecise to be worthy of consideration by scientists. Nevertheless, health scientists would be led astray if the patient’s voice were no longer heard. “Feeling lighter” is a crossculturally observed way in which patients subjectively express their betterment. The three vignettes above explored three modalities of “feeling lighter” that patients might communicate after a dancing seance, after a cup of tea, or after a walk in the woods. “Feeling lighter” appears to allude to different dimensions of the patient’s wellbeing, for instance feeling more spirited, more sociable, or more supple. A tentative suggestion was made that natural scientists may find that these subjective ways of expressing betterment contain indications that physical, neurochemical or perhaps also bioelectromagnetic processes in the environment have affected the patient’s body.

To be earth-bound by gravity appears to define the human condition in so far as activities for overcoming this feeling, such as dancing often result in a more spirited and “ensouled” self. The neurochemistry of caffeine seems to ease one’s attentiveness to the other, be this a machine or a person. Finally, a body ecological awareness of different levels of bioelectromagnetics in the environment allows people to position themselves in places where the ensuing feelings of bodily suppleness and agility may result in the individual’s increased sense of autonomy and confidence.

Ample natural scientific research has been undertaken to demonstrate the psychoneurological effects of caffeine (much valued by a protestant work ethic). Which natural scientific community, however, will want to undertake research that systemically explores the other two modalities of “feeling lighter”, namely those of being spirited and supple? In this context it should be mentioned that research into how the bioelectromagnetics of the environment interact with the electrical, chemical and physical processes of the human body has barely any internet presence. It is as though the postcolonial nation-states have instituted bureaucracies that guide their citizenry a life, if they do not lull them into one, of a globalized communication system that is secular and secure.

Conflict of interest

None.

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