The Medicine Wheel: Understanding “Problem” Patients in Primary Care

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The Medicine Wheel concept from Native American culture provides a model for whom we are as individuals: We have an intellectual self, a spiritual self, an emotional self, and a physical self. Strength and balance in all quadrants of the Medicine Wheel can produce a strong, positive sense of well-being, whereas imbalance in one or more quadrants can cause symptoms of illness. Addressing issues of imbalance can potentially diminish your patient’s symptoms and enrich their quality of life.

Introduction

I am a full-blooded Mohawk of the Six Nations Iroquois Confederacy. Before joining the medical staff of Iroquois Kaiser Permanente, I lived and practiced medicine in the Native American community where I was born and raised— Kahnawake, Quebec, Canada. The Medicine Wheel—a visual model depicting the interrelation of basic life concepts—has long been a part of my culture but is relatively new to my personal life. Understanding and using the Wheel serves me extremely well in my own journey in life, and I have begun sharing this knowledge with patients as they arrive at my clinical practice here at Kaiser Permanente-Colorado. My approach to incorporating it into my own medical practice is, and has been, continually evolving.

The Medicine Wheel is not unique to Mohawk culture; it is derived from universal principles which are found within all human groups: sharing, caring, kindness, humility, trust, honesty, and respect.1,2

“[The Medicine Wheel] is for understanding life’s mysteries because it is evident throughout nature: we look upon the physical world with our eyes, which are circular; the earth, sun, moon, and planets are round; the rising and setting of the sun follow a circular path; the seasons recur in a repeating (circular) cycle; birds build circular nests; and animals work their territories in circles. From this perspective, the whole of life appears to operate in circular patterns.3,4

By constructing the circle of the Medicine Wheel, a shaman constructs a symbol for a world in which everything is connected in harmonic synchronization. The Medicine Wheel thus symbolizes both the Universe and the working of the Universal Mind as well as the “little universe” of each person’s own individual life and individual mind.3

In Native American language, “medicine” meant power, a vital energy force that was within all forms of nature. It also meant “knowledge” because knowing gave the “knower” power to do, to achieve, and to attain. Because a wheel is accurately thought of as a spiral or vortex of energy in motion, “Medicine Wheel” means a circle or spiral of generated power under the control of Mind. “[The Medicine Wheel] is a visual model depicting the interrelation of basic life concepts—has long been a part of my culture but is relatively new to my personal life. Understanding and using the Wheel serves me extremely well in my own journey in life, and I have begun sharing this knowledge with patients as they arrive at my clinical practice here at Kaiser Permanente-Colorado. My approach to incorporating it into my own medical practice is, and has been, continually evolving.

What is the Medicine Wheel?

A basic Medicine Wheel is a set of symbols. It is a circle containing a cross with arms like the spokes of a wheel. The four spokes make a path to the center, wherein sits the Creator or the Self, depending on the user’s context (Figures 1-6). From the Native American perspective, the circle is the principal symbol for understanding life’s mysteries because it is evident throughout nature: we look upon the physical world with our eyes, which are circular; the earth, sun, moon, and planets are round; the rising and setting of the sun follow a circular path; the seasons recur in a repeating (circular) cycle; birds build circular nests; and animals work their territories in circles. From this perspective, the whole of life appears to operate in circular patterns.3,4

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Figure 1. The Wheel of **The Four Directions**

North

West

East

South

Figure 2. The Wheel of **Colors**

White

Black

Yellow

Red

Figure 3. The Wheel of the **Elements**

Air

Earth

Fire

Water

Figure 4. The Wheel of the **Constitution of the Human**

Intellectual

Physical

Spiritual

Emotional

Figure 5. The **Basic Alchemy Wheel**

Receiving

Holding

Determining

Giving

Figure 6. The **Life Energies**

North

Receive with the Mind

West

Hold with the Body

Soul

South

Give with the Emotions

East

Determine with the Spirit

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a physical, mental, and spiritual device that can enable its users to come into attunement with the cosmic and natural forces in which they are immersed and have their being, and find harmony with their environment and within themselves.\textsuperscript{3,41}

Within the Medicine Wheel are several different layers of meaning. In Native American wisdom, the entire manifested world was vitalized by four primary forces: the Vibratory Force, a power with oscillatory elliptical movement like that of a planet; an intermolecular Binding Force, a power with centripetal movement like gravity; an electromagnetic Light Force, a power with wave movement; and a Life Force, whose presence can be experienced but can never be seen or measured. The Life Force is the power that makes a great oak tree from a tiny acorn or a gigantic grizzly bear from a single egg and sperm. It is the power that makes each of us aware of our own uniqueness that gives us our consciousness and awareness.\textsuperscript{3}

Crucial to the understanding of the Medicine Wheel is the knowledge that Native American cosmology is a science not of materialism but of mind and spirit. All that exists is seen as a manifestation of thought. “Every part of the physical universe and every living thing on the Earth was seen as having its origins not in the material but in the spiritual and mental.”\textsuperscript{3,36} The physical world is the manifestation of the mind of Shonkwaia’tison—the Creator—imbued with differing amounts of the four primary forces. Even while in manifestation, minerals, plants, animals and humans are in a state of continuous change. “The whole of Nature and of existence was thus regarded as a ‘coming into being’ and a ‘going out of manifestation,’ and its essence was not material but spiritual and mental.”\textsuperscript{3,36}

\textbf{Origins of the Medicine Wheel}

The Medicine Wheel has been handed down from generation to generation in oral form. Its message was made available to the general public with publication of \textit{The Sacred Tree} in 1985.\textsuperscript{4} Its story tells of the Great Paradox: Everything comes out of No-thing and to No-thing Everything returns. Out of No-thing (the Great Spirit) came the Great Everything (Shonkwaia’tison), whose name means “He who creates or makes all things, beings, bodies possible.” Another translation of Shonkwaia’tison is “He who made possible our bodies with perfection.”

From all this, the shamans knew “a universal and unvarying cosmic law that no Force or Matter is ever destroyed or lost or comes to an end—it merely changes its form and the way it manifests. Nothing ends, but only follows a cycle of change. Everything that manifests comes into physical being and goes out of manifestation only to return to manifest once more in accordance with the Circle of Change.”\textsuperscript{3,41}

This is the teaching of the Medicine Wheel—that everything comes from the same source of all existence, Shonkwaia’tison, the Creator. From the Creator all things come into existence; and to the Creator all things return.

\section*{Structure Theme: Sets of Four}

Fundamentally, the Medicine Wheel’s four quadrants represent the Four Primary Forces or the Four Great Powers. Recall that “these Four Great Powers were intelligences created by the Great Spirit in order to bring the universe into manifestation and to keep it in being.”\textsuperscript{3,41} These Four Great Powers were seen as “Spirit ‘beings,’ who expressed not so much the force themselves but the intelligence of directing Mind that exercised those forces.”\textsuperscript{3,45} The Medicine Wheel shows these Spirit “beings” in their chief capacity as literally the caretakers of the universe. They are shown on the Medicine Wheel as the four spokes denoting the four cardinal directions of the universe: East, South, West, and North. These directions are known also as the Four Winds (Figure 1).

“The power of the Spirit of the East is the power of illumination that opens the spiritual eye and brings enlightenment and discernment. It is the power of new beginnings”\textsuperscript{3,47} and of fresh new life. The color of “the Spirit of the East is yellow—the color of the rising sun and of illumination and enlightenment.”\textsuperscript{3,47}

The power of the Spirit of the South is the spirit of rapid growth, exploration, experience, and investigation; it is the power that guides and grows. It is the power of trust in feelings and intuition—the natural trust of the child. “The color of the Spirit of the South is red—the color of vital energy and of the lifeblood.”\textsuperscript{3,48}

The power of the Spirit of the West is the power of “strength and introspection.”\textsuperscript{3,49} It is the power of growth, which enables realization to develop. It is the power of growth to full maturity. It is the power of self-examination. “The color of the Spirit of the West is black—the color of the formlessness from which all form comes.”\textsuperscript{3,49}

The power of the Spirit of the North is the power of renewal and of the quickening of the spirit. It is the power of Winter, when nothing appears to be growing\textsuperscript{3,50} but when Mother Earth is gathering her energies for springtime to come. It is the power of
concentration and clarity of intent. The color of the Spirit of the North is white, regarded as the color of perfection because it is the sum of all the colors.

This basic configuration—a circle divided into equal quadrants—can then be used to depict many other relationships, always in sets of four.

The four colors of the Color Wheel (Figure 2) also teach us that the four symbolic races—Red, Yellow, Black, and White—are all part of the same human family. We are all brothers and sisters living on the same Mother Earth.

The Medicine Wheel teaches us of the four elements (Figure 3) and their relationship to the primary forces. The element associated with the intermolecular Binding Force is the Earth. The element associated with the electromagnetic Light Force is Water. The element associated with the oscillatory elliptical movement Vibratory Force is Fire. The element associated with the Life Force is Air.

Of particular use to myself and some of my patients is the Medicine Wheel’s conceptualization of the individual as having four parts (Figure 4): a spiritual self, which can be likened to elemental Fire in the East; a physical self, which can be likened to elemental Earth in the West (ie, inertia, stability, solidity); an emotional self, which can be likened to elemental Water in the South, emotions being our energies in a fluid state; and an intellectual self, which can be likened to elemental Air in the North, air energy being similar in nature to mental energy, a quick coming and going, vanishing without being seen, thought and air being equally elusive.3

Balance and Health

The Medicine Wheel constitutes who we are as individuals. People who are at ease with themselves, content, happy, and maximally productive; who can share, care, and trust; and who are respectful have strength and balance in all quadrants of the Medicine Wheel and in all segments of life: the spiritual, the emotional, the physical, and the intellectual.3

Spirituality is that part of self which believes in the Great Spirit and lives that belief in every aspect of one’s life; connects one to the sacred, to source, to the ultimate. The related direction, East, is the direction for learning about sharing and love.

Emotionality is that part of self which can touch all other things through feeling. In our emotional self, on the South of the circle, we “touch all other things through feeling” with trust and innocence, finding excitement in discovery and joy in the awareness that new knowledge brings. South is the direction for learning about honesty and trusting. Through personal and clinical experience, the greatest imbalance in most people’s lives is most commonly found in this quadrant of emotion.

Physicality is that part of self which recognizes and nurtures the body and the environment in relation to the cycle of life and death of all other things. Our physical self is located on the West side of the circle. The West is the place for looking within; the realm of the adult; and the direction for learning about respect, kindness, and activity that nurtures the self and all others.

Intellectuality is that part of self which seeks knowledge, understanding, and wisdom. The intellectual self also requires that knowledge be put into action. Our intellectual self is located at the North of the circle. North is also the place of the elders and is the direction for learning about caring.

Balance thus equals wellness equals health and requires alignment.

Imbalance and Symptoms

Imbalance within the Wheel causes disorder and unsettles a person’s life; causes unwellness and ill health; and causes symptoms. Thus, in my experience, the Medicine Wheel achieves its greatest clinical utility with patients who present with chronic complaints without objective historical, physical, or laboratory evidence of pathology. Patients who have vague complaints, symptoms related to multiple organ systems, frequent visits, thick medical charts, numerous consultations, and numerous tests alert me to the possibility of imbalance in the patient’s life.

In my own life experience and in my clinical experience with patients, the most common source of imbalance for most people lies in the emotional quadrant. This quadrant encompasses important lessons: learning to talk, to trust, and to feel. These capacities are damaged if a person is raised in an environment where a loved one is abusing alcohol, if a person has suffered emotional, physical or sexual abuse, or if a person has experienced other major traumatic events. Within the emotional quadrant, South is the direction of giving; its opposite, North, is the direction of receiving. West is the direction of holding; its opposite, East, is the direction of determining (Figure 5).
Superimposing the Wheels shows that our energy system was designed to be expressed in the most balanced way, i.e., to "Determine with the Spirit," to "Receive with the Mind," to "Give with the Emotions," and to "Hold with the Body." (Figure 6).

To change the way these forces are used is to create disharmony and discord both within and without. The most common way these energies are changed is to interchange the South and the West, thereby "holding with our emotions and giving with the body ... By holding onto our emotions, we lock up our heart."5,60

Three rules of survival govern families in which trauma is occurring: "don't talk, don't trust, don't feel."5 Although these rules help a young person to survive the chaos of trauma in the family, the rules become detrimental as the young person ages. Our emotions are alive: they have an energy, a force, and a strength. If our emotions are not allowed expression through the heart, through the voice, and through the mind, this energy can—and will—go elsewhere.

Patients who have lived with the legacy of "don't talk, don't trust, don't feel" and with a history of having been traumatized are emotionally cut off from conscious, daily life. These patients hold on to what should have been given away: their emotions. This tremendous emotional energy (and pain) roiling within the unconscious without a safe outlet must be expressed elsewhere. For some people, this energy is directed into somatic symptoms—headache, neck pain, low back pain, body ache, abdominal pain, pelvic pain, fatigue, forgetfulness, depression, or anxiety (to name but a few). In my opinion, this redirection of energy is the major root of addictive behavior, an unconscious effort to "medicate" oneself against psychic pain. I do not mean to imply that these symptoms are always explained by imbalance in a patient's life: Each symptom has its own differential diagnosis that must be considered by the astute clinician. In my experience, however, the Medicine Wheel approach can be useful when other possibilities have been exhausted and the patient remains distressed.

**Sharing the Medicine Wheel with Patients: The Road to Wellness**

Imbalance in a patient's life should be considered in the differential diagnosis of vague or refractory symptoms. The Medicine Wheel approach is not for every patient every time but is a useful approach for some patients some of the time. I have often found the ability to share my understanding of the Medicine Wheel with patients to be very rewarding, both for my patients and for myself.

When I suspect that a patient's symptoms may be related to imbalance, an empathetic approach is crucial if the patient is to accept the process. When I lack a thorough background on a patient's extended family, I drop pen and chart, make myself comfortable, and say, "I do not know you very well. Can you tell me about yourself and your family?" I then proceed with additional specific questions designed to inform me about the patient's background:

- "Married?"
- "Children?"
- "Parents alive? (If they are not, I ask the year they died, their ages at death, and the cause of death.)"
- "How many brothers and sisters? Their health problems?" (Addiction histories will often surface here.)
- "What number sibling are you?"
- "Any history of alcohol use in your family when you were growing up?"

If the patient acknowledges a family history of alcohol use or trauma, I ask the following: "Do you know the rules of survival in a family where trauma or abuse is occurring ('don't talk, don't trust, don't feel')?"

- "Have you ever experienced physical, emotional, or sexual abuse?"

At this point, I explain that the consequences of abuse and the legacy of "don't talk, don't trust, don't feel" are a storehouse of unresolved inner pain that has nowhere to go. I explain that this emotional energy requires release and that if it is not allowed expression through the heart, through the voice, and through the conscious self, it will come out elsewhere.

I then ask patients where they think these energies might go and what they might cause. Often, patients name the same symptom that caused them to seek medical consultation in the first place! I then try to frame the patient's symptoms in the context of their past. "People who have experienced trauma and abuse can often suffer from these kinds of symptoms. They're real, they're there, they're interfering with your quality of life and they need to be dealt with." This is often a good time to actually show the Medicine Wheel to the patient and to discuss it briefly.

- "But Doctor, I feel so horrible. My [head, neck, back, stomach, pelvis, etc] is killing me!"
- "Yes, it is very difficult," I answer. "The worse you feel, the more your body is sending you a message..."
that something is not right. This is a complaint and a cry for help, a cry for you to help yourself. I can suggest treatments and prescribe medications to help you with your symptoms, but they will not ever go away unless and until you can address their cause. The answer is not in tests or pills or specialists. The answer is in finding and dealing with inner pain, in learning how to talk, to trust, and to feel. The answer is in finding yourself and in seeking for yourself the balance of the Medicine Wheel. The answer is in counseling.”

In this way, physicians can assist patients to embark on their own journey to wellness, a journey whose importance lies not in a final destination (for there is none) but in living day-to-day and moment-to-moment, focused on the present, cognizant of the past, and with enough awareness to struggle continually to separate past from present. The challenge for the patient is to actually begin this journey. Some are not yet ready to hear or act. The challenge for the physician is to continue pointing the way to wellness according to the patient’s state of readiness to change. This new dialogue may require repetition before patient action occurs. After suggesting this diagnosis and counseling a patient, at subsequent visits the physician can explore where the patient is in their state of readiness to change. This new dialogue may require repetition before patient action occurs. After suggesting this diagnosis and counseling a patient, at subsequent visits the physician can explore where the patient is in the process and thus avoid unnecessary reinvestigation, retreatment, or rereferral. In addition, by encouraging counseling, we honor the first dictation, retreatment, or rereferral. In addition, by encouraging counseling, the physician can explore where the patient is in their state of readiness to change. This new dialogue may require repetition before patient action occurs. After suggesting this diagnosis and counseling a patient, at subsequent visits the physician can explore where the patient is in the process and thus avoid unnecessary reinvestigation, retreatment, or rereferral. In addition, by encouraging counseling, we honor the first dictation, retreatment, or rereferral.

Compassionate, caring, respectful use of the Medicine Wheel approach achieves three objectives simultaneously:

- It can make life as a physician easier, more fun and more effective by providing rational explanations and treatment plans for “functional” problems;
- It provides patients a framework to identify and deal with the causes for their symptoms;
- It can improve quality and cost-effectiveness of treatment by expanding from the biomedical model to the biopsychosocial model—ie, by encouraging patients to undertake their own journey to wellness instead of seeking unnecessary expensive, unproductive, and potentially harmful testing.

Conclusion

Understanding and using the Medicine Wheel has enormously benefited both my personal and professional life. No longer do I groan inwardly when I prepare to enter the examination room and see vague complaints of “back pain,” “headache,” or “fatigue” on the medical chart as the patient’s chief complaint.

Equipped with knowledge of the Medicine Wheel and armed with courage, physicians can begin to accumulate the experience and skill required to venture into this delicate but rewarding area of patient care. They will no longer feel helpless in the face of symptoms that yield no objective findings. They will be confident—even before stepping into the examination room—that they have something to offer to any given patient.

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References
A key element of primary health care is its referral system in which patients are able to access care at community-based health posts or health centers before accessing higher-levels of care such as secondary and tertiary hospitals. Some communities may depend on and prefer indigenous healers, customs, and knowledgeable family members; however, effective linkages between health posts and health centers and between health centers and hospitals may nonetheless enhance access to services not attained through alternative means.  

4. Akande TM. Referral system in Nigeria: study of a tertiary health facility. Annals of African Medicine. 2004;3:130–133. View Article. Google Scholar. (p. 1) Assessing patients with musculoskeletal problems in primary care. Chapter: (p. 1) Assessing patients with musculoskeletal problems in primary care. Author(s) Access to the complete content on Oxford Medicine Online requires a subscription or purchase. Public users are able to search the site and view the abstracts for each book and chapter without a subscription. Please subscribe or login to access full text content. We mapped out the medicines management system in primary care in the UK. We conducted a systematic literature review in order to refine our map of the system and to establish the quality of the research and reliability of the system. Results. We included episodes of secondary care which patients in primary care may have experienced (as outpatients or inpatients), treating them as a 'black box' rather than studying all types of errors that could occur in these settings. They include: lack of awareness that problems exist; poor understanding of systems thinking; a traditional medical culture of individual responsibility; legal issues encouraging the concealment of error; poor information technology provision; poor data; and resource issues.