



ORIENTAL HEALING ARTS INSTITUTE

Beyond
ACUPUNCTURE

*Chinese Herbs in Chronic Low
Back Pain Management*



Chau-Shin Hsu, Ph.D
Joseph Y. Lin M.D., Ph.D

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Introduction

Pain is the oldest complaint of the human race.

Pain can be a brief sensation of discomfort or a chronic illness that does not go away, no matter what actions are taken. It can lead to anxiety, depression, fear, broken relationships, drug dependency, financial hardship, isolation, poor physical conditioning, and sometimes, even death. A persistent or chronic pain can make a person feel helpless; it is a very difficult and lonely journey that seems to never end.

Despite the medical progress made over the years, pain is still one of our greatest mysteries and is the most misunderstood phenomenon in medicine.

The conventional pain management prescribes its patients to take drugs, attend physical therapy, relax, and finally, learn to live with the pain. The Traditional Chinese Medicine (TCM) practice makes similar prescriptions, but also encompasses herbs, needling, heat, therapeutic massage, and exercise. The fundamental differences between TCM and conventional modern medicine lie in the way of thinking and the *method* of treatment.

Modern medicine often focuses only on the malfunctioning part(s), and views the human body as a machine. It relies heavily on laboratory tests to make a diagnosis. A person with flesh and blood may be treated, (often unintentionally), as a lifeless robot. TCM approaches pain from various external and internal stimuli taking into consideration the effect the pain may have on the flow of Qi, Blood, and the Yin/Yang condition of the body. It concentrates on the movement of vital energy throughout the whole body, treating the body as a whole, and not simply just the area with painful sensation. The goal of TCM treatment is to maintain homeostasis of the whole body.

TCM was used for thousands of years, almost exclusively, to treat all forms of illnesses throughout the Far East until the Opium War (from 1839 to 1842) when it was slowly replaced by modern medicine. Modern science and progress spread rapidly during the eighteen and nineteenth centuries. Advances in diagnostic testing, such as computer assisted equipments and other high tech medical hard wares, have brought medicine into a “space age” technology. Many new fields in science either originated or matured in the past 100 years. The results also marked the formal division between the modern Western medicine and the ancient TCM.

However, over the past fifty years, the interest in natural health care has been dramatically increasing, as people seek to receive more holistic and natural healthcares. Millions of people use acupuncture as part of their health care regime, and there is more pharmacological research and clinical studies done regarding herbs and herbal formulas. As a result, patients now realize that many chronic illnesses can be helped with the use of natural herbs and herbal formulas. For example, in TCM, a woman who suffers from low back pain due to endometriosis is thought to have stagnation of blood circulation. It may be treated by **Gentiana Combination** (Lung-tan-hsieh-kan-tang), **Cinnamon and Hoelen Formula** (Kuei-chih-fu-ling-wan) and several other herbal formulas which don't give her the side effects she would get from taking Progestrogens, Danazol, and Gonadotropin Releasing Hormones Antagonists (abdominal swelling, tenderness in the breasts, increase in appetite, nausea, abnormal vaginal bleeding, depression, weight gain, abnormal liver function, hot flashes, dryness in the vagina and emotional disturbances). These medications are often used in conventional medicine, to suppress the ovarian function and stop the growth of the endometrial tissues. The main purpose for the formulation of an herbal formula is to *enhance* its clinical efficacy and to *minimize* its adverse effects. In clinical practice, an herbal formula is usually modified according to the patient's age, symptoms, signs, and physical condition. In other words, the formula is tailored to the individual in order to achieve the best results.

As our book focuses mainly on low back pain, we've written this book with one goal in mind—to help reduce painful sensation and to improve the pain sufferers' overall functional capacity. The goal can be achieved by joining the best of the conventional scientific medicine with the old but new

TCM practice. Such a synthesis would provide the patient with a more complete and satisfactory health care program.

Please note this book is intended for information only. It is not intended to substitute for the medical expertise and advice of conventional health care professionals. This book deals largely with chronic low back pain that has originated from the low back. We hope another book regarding chronic low back pain that originated from somewhere else other than the low back, especially pain coming from the internal organs, will follow in the near future.

For a general description of the herbal formulas, please refer to *Commonly Used Chinese Herbal Formulas Companion Handbook* (Oriental Healing Arts Institute Publishing) by Dr. Hong-Yen Hsu and Dr. Chau-Shin Hsu. For more detailed descriptions and explanations of the herbal formulas, please refer to the authoritative Chinese herbal text: *Commonly Used Chinese Herb Formulas with Illustrations* (Oriental Healing Arts Institute Publishing) by Dr. Hong-Yen Hsu and Dr. Chau-Shin Hsu. The book was updated by Dr. Chau-Shin Hsu and Dr. Qing-Fu Hu in 2006.

IMPORTANT NOTE TO OUR READER

Ancient Chinese medicine made no mention of the physical components of blood, such as blood-cells and the biochemical constituents. Therefore, TCM regards blood as one of the bodily fluids and its function depends on the flow of Qi. In this book, blood is capitalized as Blood to signify its homogeneous and homologous nature.

The solid organs or Zangs (liver, heart, spleen, lungs, and kidneys) all belong to Yin.

The hollow organs or Fus (gallbladder, small intestine, stomach, large intestine, and urinary bladder) all belong to Yang.

Each of the Zang and Fu organs has its particular function and they are interrelated to perform functions of the whole body. For example, the heart is the leader of all organs and is the center of the life activities of the body. It controls the mental and emotional activities and the blood circulation. According to TCM theory, the kidneys store body essence and control reproduction, growth and development. In TCM, it is customary to

capitalize the word Kidney and use the singular Kidney to address the function of the kidneys.



CHAPTER 1

A Case Of Chronic Low Back Pain

1-1: A DISEASE CALLED PAIN

“We must all die. But that I can save him from days of torture is my great and ever new privilege. Pain is a more terrible lord of mankind than even death itself.”

—Albert Schweitzer



September 2004

It had been nearly sixteen years since I last saw Ethyl. She looked pale and sad; she could not stand straight and was stooped over, holding her hands behind her waist.

“I need help, Doc,” said Ethyl, as she was putting her hands on the arms of a chair and slowly lowering her body into the seat.

“What happened?” I asked; I couldn’t believe what I saw.

“I’m hurting all over! I can’t sleep, can’t work, and I’m depressed. I’m in a bad mood and get angry all the time for no reason. I’m tired, have no energy, no appetite, but get fatter and fatter. . . ”

“What on earth have you done to yourself?”

“I had a car accident!”

“When and where?”

“1991. Atlanta.”

“Why go all the way down there to get into a car accident? You could get into one here easily in Washington.”

“I found a new job there. Two months later my car was hit from behind on my way to work.”

“Oh, your poor car!”

“It wasn’t really that bad, just a big dent in the bumper. But I had to see a doctor two weeks later.”

“Why? Did you get hit by that doctor?”

“No. Because my back hurts! She checked me out pretty thoroughly and took X-rays. She told me nothing was broken but I had some spasms in my back muscles.”

“Sounded like a minor accident!”

“It might be minor to you, but I was hurting.”

“Did the doctor treat you?”

“She prescribed anti-inflammatory drugs and sent me to physical therapy.”

“Were you happy?”

“I felt better after two weeks, except that I still had pain in my low back and I have flare-ups from time to time.”

“What do you mean by flare-ups?”

“I would feel worse when I was doing something. Like one day when I was cleaning my closet, I suddenly felt a severe pain in my low back and tailbone; it felt like someone was stabbing me with a knife. I went to a family medicine doctor and had an MRI. The result showed no broken bones or obvious disc problems, and there were no pinched nerves. The doctor prescribed an anti-inflammatory medication and a few tablets of Vicodin to help my pain. I felt better in a few weeks, but I have never felt 100% since then.”

Sadly Ethyl was involved in another car accident in April of 1996; her car was sideswiped and did a 360-degree turn in the middle of a very busy intersection. She had to be taken by ambulance to the hospital. Nothing seemed to be broken, but she felt a lot of pain. The emergency room doctor told her that she had a severe muscle strain and prescribed anti-inflammatory medications, muscle relaxants, and pain pills. She wore a heavy-duty low back brace for two weeks, but her back pain kept getting worse, and she had difficulty holding her urine. Ethyl went to a neurologist and was sent for a low back myelogram and a CT scan. The results showed a fairly large herniated disc protruding to the left side in-between her 4th and 5th lumbar (L4–L5) spines. The end of her spinal cord appeared to be swollen, and the nerve roots

below didn't look very happy. The doctor told her that was the reason why she had pain and trouble controlling her bladder.

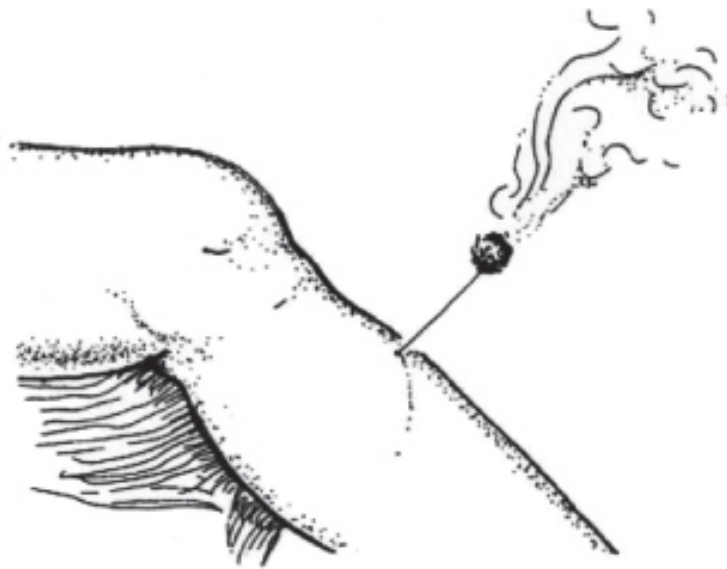
Over the next two years, Ethyl saw six more doctors. She was treated with pills that included NSAIDs, antidepressants, muscle relaxants, steroids, tranquilizers, sleeping pills, narcotics, and various kinds of pills to control the side effects from the other pills. She received physical therapy on and off for several years that included cold, superficial heat, deep heat, short wave diathermy, electrical muscle stimulation, joint manipulation, and massage, and was instructed in home exercises. She had cortisone injections, trigger point injections, and epidural nerve blocks. But her pain persisted. More than one doctor told her that she had severe arthritis in her bones and joints in the low back. One of the doctors told her that she had fibromyalgia, but there was no treatment for it except to keep warm, take pain medications, pace her activities, rest, and do stretching exercises every day. But the doctor did not give her specific instructions about which exercises and how to do them.

Ethyl felt very depressed after the second car accident, but the antidepressants couldn't shake off her lousy mood despite taking maximum dosages. The doctor changed medications from one to another, but none worked. She started to wonder: What was the point of living? But she did not really want to give up, so she kept going back to the doctors. She felt lethargic and was constantly lying down. She could not sleep at night and felt cold all the time. She had restless legs, frequent constipation or diarrhea, and an upset stomach, among other disturbing symptoms. Her pain and overall dysfunction had interfered with her life to such a degree that she just wanted to die. The doctors told her that surgery was her last choice. So Ethyl underwent low back surgery for "disc problems" in December of 1999. But, her low back still hurt a year after the surgery. She had another surgery by the same surgeon in September of 2001, then another surgery in October of 2002. None of the operations helped relieve her pain. Eventually, none of the doctors had anything else to offer.

In early 2003 Ethyl met two coworkers who had received traditional Chinese medicine (TCM) treatment for their chronic problems. One of them had an autoimmune disease that made her constantly tired—she had no energy and had lost all of her hair. Conventional treatments could not help, so that coworker resorted to acupuncture. After a few weeks of treatments, that coworker's energy level was much better and she had even grown some hair back on top of her head. The other coworker fell off a trampoline and injured her low back when she was eighteen years old. Conventional treatment

couldn't stop her pain, so she went for acupuncture for several weeks, and told Ethyl she has not had a problem with her back since. After hearing these stories, Ethyl decided to see an acupuncturist.

The first acupuncturist Ethyl consulted was also a chiropractor. She said the doctor inserted a bunch of needles all over her body to make her look like a porcupine. Sometimes the doctor would put stuff that looked like cow dung on top of the needles and set them on fire. Ethyl didn't know that the exact translation for the Chinese word "acupuncture" (針灸) was actually "needle and moxibustion." The doctor told her that by burning shredded mugwort weeds on top of the needles, it would help with moving her "Qi." No matter how hard the acupuncturist tried to explain, Ethyl had absolutely no clue what this Qi was.



Like most people in the West, Ethyl didn't know the whole package of TCM practice encompasses needling, moxibustion, herbs, therapeutic massage, Tai-chi, and Qi-gong exercises. She started to feel a lot better with just the needle treatment alone. But because the insurance company wouldn't cover the cost of acupuncture, she had to stop the treatment at the end of three months. After stopping the treatment many of her symptoms returned, and she had no other option but to go back to the conventional therapy. She was prescribed steroidal and non-steroidal anti-inflammatory medications, muscle relaxants, and pain medications, along with physical therapy. She did not feel better, so her doctor prescribed stronger pain medications and more therapy.

She had a spinal cord stimulator implanted in her lower back—it was supposed to ease her pain, but it didn't help much either. One day she tripped over an uneven brick stairway and fell in front of a supermarket. She came down so hard that she broke the coils of the stimulator. The implant had to be surgically removed and replaced with a new one. Finally, the doctors suggested that she go to a multidisciplinary pain management center. Before the center accepted her as a patient, she had to sign a contract promising not to take illegal substances and follow the strict schedule of her medications. By the end of the second month at the center, she was taking 40 mg of Oxycontin three times a day; using a 75 mg Duragesic patch every three days; and taking Extra Strength Vicodin four times a day, along with other medications. During her second follow up with the doctor, he told her that her blood test results showed a trace of THC (Tetrahydrocannabinol). THC is the principal constituent of marijuana. The doctor told her that since she had broken the contract that she signed, she had to leave. After being kicked out of the center she started to drink heavily because she felt like she was living in an abyss, and there was no way out; she drank to avoid the reality, and she drank because of the constant pain.

“Will my pain ever go away?” asked Ethyl.

“Gosh, Ethyl, I wish I knew!” I said to her.

“Can you help me? I was doing so well, and I had no pain at all after I saw you many years ago. I even went skiing in Colorado before the end of that year just like you said.”

“Well your pain back then was just a symptom from an injury; now you have a disease called PAIN.”

“What do you mean?”

“This PAIN is a very complex problem; not only does it make your back hurt and you feel crippled, but it also makes you angry; depressed; lose sleep; lose confidence; feel worthless; and gives you many other problems!”

“How come I'm still in so much pain after so many treatments?”

“I wish I had a simple answer for you!”

“Some doctors didn't even believe that I have so much pain. They told me it's all in my head!”

“They were right about that!”

“You think I'm crazy, too?”

“If you were crazy, you wouldn’t have felt the pain! You see, pain is a subjective feeling—only the pain sufferer can feel it. That’s why pain may sometimes go untreated, under-treated, or over-treated. You can’t really blame it on the doctors.”

“Why not?”

“You know the physicians emphasize physical evidence. In other words, your symptoms have to be supported by objective findings, like from physical examinations, X-rays, MRIs, and whatnot, before we can make a diagnosis and render a treatment plan.”

“Didn’t I show enough evidence?”

“Yes, you did. But like Hippocrates said: ‘Life is short, art long, opportunity fleeting, experience treacherous, judgment difficult.’ And for me, the tools to get rid of pain are limited.”

“The pain has affected all aspects of my life. I am broke, and I’m on Social Security Disability now. I have to move back to Maryland to live with my aging parents. I will live free and won’t have to pay utilities. My check from Social Security is \$750.00 a month. Out of that, \$600.00 is taken off the top to pay for my medical insurance. So that leaves me \$150.00 a month to live on. That does not even cover my monthly prescription costs. My mom and dad are both helping me out financially. My dad gives me a check at the beginning of the month for \$300.00, and my mom gives me \$200.00 a month out of her own Social Security. It is still tough to make ends meet. My life now is a living hell, and I sometimes make it that way purposefully for everyone around me as well. I have reached the end of my rope.”

1-2: CHRONIC LOW BACK PAIN

KEYWORDS

1. Acute pain due to trauma (ICD-10 Code **G89.11**)
2. Low back pain (ICD-10 Code **M54.5**)
3. Chronic low back pain due to trauma (ICD-10 Code **CM 338.4**)
4. Chronic low back pain syndrome (ICD-10 Code **G89.29**)

Pain is an unpleasant sensation or feeling. It is the oldest medical complaint and the leading cause of disability in the world. Yet it remains the

greatest mystery of mankind because we can cut the body open and slice it into pieces, but no pain can be found anywhere.

This is how I explain chronic low back pain, “The realm of chronic low back pain can extend far beyond what we saw, what we knew, what we understood, what were shown on the diagnostic tests, and what we can do about it.”

ACUTE PAIN

Pain that comes and goes is called acute pain.

CHRONIC PAIN

Pain that lasts for more than a “reasonable” amount of time (some say three months, some say six months) is called a chronic pain.

CHRONIC LOW BACK PAIN

Low back pain simply means pain is felt in the low back and nothing more; it is neither a disease nor a diagnosis. Nearly everybody in this world, including myself, has experienced or will experience some form of low back pain before leaving this world. Low back pain that lasts for more than three to six months is called a chronic low back pain.

CHRONIC LOW BACK PAIN SYNDROME

A syndrome is a collection of recognizable features, behaviors, signs (usually found out by a doctor), and symptoms (as reported by a patient) to identify a particular illness, genetic disorder, or medical condition. For example, a woman who felt emotional irritability, pelvic congestion, pain or strange sensations in the breasts, abdominal pain, headache, nausea or vomiting, and unexplainable feelings all over her body around her menstruation period time is often said to have Premenstrual Syndrome; a person with constant abdominal cramping, abdominal pain, bloating, gas, and diarrhea or constipation is often diagnosed with Irritable Bowel Syndrome—a disorder of the large intestine.

Some of the syndromes have interesting names. For example, a person suffering from a neurological disorder and who cannot judge the size of objects in the visual field is said to have Alice in Wonderland Syndrome; those who believe that they are dead, do not exist, are rotting, or think that they have lost their internal organs are suffering from Walking Corpse Syndrome.

Chronic Pain Syndrome is a persistent pain plus all of the secondary complaints or symptoms, such as depression or insomnia, that come along with the pain. Most chronic pain sufferers have multiple symptoms like Ethyl. Any chronic pain without other physical or psychological complaints has almost never existed. In other words, most chronic pain sufferers have Chronic Pain Syndrome. Any individual symptom of chronic pain can produce new pains and symptoms and make the original pain even worse and start a vicious cycle of pain.

SOME STATISTICS ABOUT CHRONIC PAIN

1. Based on National Institutes of Health (NIH) reports, about three million adults in the United States suffer from daily pain.
2. It is estimated that nearly one hundred million American adults have some type of chronic pain conditions that do not include any short-term pain conditions. Among those people, about one third have low back pain.
3. About half of the chronic pain sufferers feel they have little or no control over their pain. Nearly 80% of chronic pain sufferers are depressed, have trouble concentrating, are lethargic, and have trouble sleeping well.
4. Most pain sufferers seek the help of their family doctor initially, and nearly 50% see at least one specialist, such as a physical therapy doctor or orthopedist.
5. Chronic pain costs the United States about \$560 to \$635 billion annually and chronic low back pain is the major culprit to be blamed.

CHARACTERISTICS OF PEOPLE WITH CHRONIC PAIN SYNDROME

1. Preoccupation with pain.
2. Strong and ambivalent dependency needs.

3. Meeting other people's needs at one's own expense.
4. Inability to take care of self needs.
5. Pessimistic.
6. Unable to control own feelings and use pain as a symbolic means communication.
7. Tend to have a more rebellious way of expression. Often the higher the intensity or duration of pain, the deeper and more complex the feelings go. Eventually the person suffers not only physical discomfort, but also emotional, and many other crises.

THE CAUSES OF LOW BACK PAIN

1. A sudden onset of acute low back pain often arises from trauma or overuse of the low back.
2. To make a diagnosis of low back pain that has a clear-cut low back injury, say following a car accident, all the doctor needs is the history of onset and a regional physical examination focusing on the low back; what the doctor sees is usually what the doctor will diagnose.
3. A few additional tricks, such as an X-ray, may be necessary if some ambiguous symptoms still exist.

THE CAUSE OF CHRONIC LOW BACK PAIN

1. Nobody knows for sure what causes chronic low back pain.
2. Often the pain felt in the low back is just part of a more serious systemic disease, like rheumatoid arthritis and ovarian and metastatic prostate cancer.

COMMON CAUSES OF CHRONIC LOW BACK PAIN

1. Repetitive low back injury.
2. The source of pain is chronic in nature, such as degenerative arthritis.

3. Poor health, vitamin deficiency, malnutrition, malabsorption, etc.
4. Perpetuating factors such as pelvis asymmetry, leg length difference, soft tissue, or muscular deficiency, etc.
5. Depression or other psychological problems such as preoccupation with pain.
6. Post Traumatic Stress Disorder (PTSD), especially in those who were raised in dysfunctional homes with abuse, alcoholism, or mental illness.
7. Treatment related—under treatment, overtreatment, wrong treatment, careless administration.
8. Drug related—side effects, interactions, or overdose.
9. Financial and/or social hardships.

OVERLOOKED CAUSES OF CHRONIC LOW BACK PAIN

1. Undiagnosed diseases such as Cushing's syndrome, hypothyroidism, borderline anemia, lactic acid and/or prostaglandin abnormalities, efflux of potassium ions, acidic blood, hyper-permeability of cell membrane, etc.
2. A diagnosis is given but no disease exists.
3. Physicians are focusing too much on objective evidence and thus planting an unshakable distrust, and even a neurosis, in patients.



1-3: LIVING WITH CHRONIC PAIN

“What’s your typical day look like?” I asked Ethyl.

“I get up like a zombie and fix coffee as if I were still alive,” she said. “I am flustered and I can’t think clearly. It takes me forever to accomplish anything compared to other people. . .”

“Is there anything that helps ease some of your misery?”

“I’ve been using a new type of electrical stimulator at night when I’m in bed. If I had more time and energy, I would do it in the morning too before I get dressed; it is easier to operate the machine while I don’t have any clothes on.”

“Why be naked?”

“Because I have electrodes all over my body! Besides, the shocks are more effective when I’m not under a lot of stress yet. ”

“What kind of medications are you taking now?”

“Here’s the list,” said Ethyl, handing me a piece of paper fully covered with names from her purse. “Some of them I take on a regular basis and some of them only as needed.”

I wonder how she is able to survive with all those poisons? “I hope you are aware of the side effects from all these pills.”

“I know the anti-inflammatory pills will upset my stomach, and I only take them with food. I also take an antacid one hour later when my stomach is empty.”

“What about the other side effects?” I asked.

“I want to KILL myself sometimes or just want to die! I am so depressed about having chronic pain, disability, the inability to support myself, and the inability to deal with the prejudiced view of some people who think I am faking it. I have frequent nightmares, and they are much more vivid and distorted recently. . . . I grind my teeth at night and have chipped a few back teeth because of this. . . . Sometimes my heart is racing and is trying to come out of my chest. Sometimes I feel that ‘something is stuck in my throat,’ making me feel really jittery and my hands shake and tremble. Also, sometimes I have a daily, mild, migraine-like headache that lasts about a half hour. I have told my psychiatrist about the medications, but he cannot cut back on them because I need these pills to keep me alive. . . . ”

“How do you know those are the side effects from the pills?”

“Well, last year I was on daily doses of two tablets of Prozac, one-half tablet of Risperidone, and occasionally one tablet of Lorazepam twice a day, in addition to the pain pills, anti-inflammatory pills, and a muscle relaxant. Now I’m taking three tablets of Fluoxetine or two tablets of Prozac or three tablets of Trazodone and one tablet of Lorazepam every day. Risperadone made me gain a lot of weight and caused discharge from my nipples. Since not taking the Risperadone, the nipple discharge has stopped except for a day or two before my period. But I’m supposed to be past menopause.”

“What did you take this morning?”

“Just the pain pills, I mean in addition to the antidepressants, allergy pills, multivitamins, Valium, and anti-inflammatory pills.”

“Are you concerned about taking so many pills?”

“I know you doctors are treating me like a drug addict. But I swear I am not a drug seeker, and the problem is not in my head. I have been through tons of over-the-counter pain relievers and none was of any help; six to eight tablets of Ibuprofen at a time would just take a small edge off the pain. I tried Oxycontin, but it scared me so I did not want to keep taking it. It made me feel like my heart was ready to pound out of my chest. I didn’t like it so I stopped taking it.”

“Tell me, what makes your pain worse?”

“Almost anything!”

“What do you mean by that?”

“Even sitting for more than ten minutes aggravates my back and causes radiating pain and numbness to my legs. Bending my back makes my back hurt and makes my legs numb. I don’t feel steady when I stand up from sitting. I feel tightness in between my shoulder blades, and I have constant pain in my shoulders and recently muscle cramps in my right leg. When I try to walk, my muscles on the outside of my right thigh feel as if they might give way. When I sit in a low chair, that is when my knees are higher than the seat, my back will hurt. Also, I often feel dizzy, and recently I lose my train of thought. Sometimes I feel confused and have the cold sweats; I have ringing in my ears and shortness of breath. I shake, tremble, am restless, have a pounding in my chest, am nauseated, and feel like I am going to pass out.”

“What other doctors are you going to see today after leaving here?” I asked.

“I have to see my primary care doctor, my psychiatrist, and a lawyer for disability. Usually, they just listen to me and tell me who else to see. The doctors do not really treat me anymore, only give me shots or pills. Sometimes they tell me which specialist I should go see. My primary care doctor here in Maryland is overseeing the whole shebang now since I came back from Atlanta four months ago. I have to go to see him at four today. The first thing he will do is ask me how I feel.”

“Are you going to tell him the truth?”

“Yeah, and I am going to tell him that I feel no damn better than the last time he saw me. That’s a damn shame, isn’t it?”

“Is there anything else troubling you?”

“I am unable to maintain attention and concentration sufficiently and have trouble remembering things. Sometimes I just draw a blank on things I should know, such as my own phone number. My attention, concentration, and memory are even more affected when my pain level is high. I have difficulty reading and haven’t read an entire book in years, as they are hard to follow. My head almost always feels heavy, and the weirdest thing is my face and neck will get red and hot, and not because I’m shy or embarrassed. You know what I’m saying? I have trouble sleeping at night because of muscle twitches and spasms. The muscle relaxants don’t even help. The numbness in my feet

and ankles varies with my activity. One doctor told me that my right leg is weaker than my left.”

“I guess you don’t need the doctor to tell you that! Is there anything else bothering you?”

“I seem to have developed sensitivity to anti-inflammatory medications, and I am no longer able to take them without developing nosebleeds. I also have developed considerable gastrointestinal upset from them. I underwent months of swallowing Tagamet before my stools started to lighten in color. My stools are no longer looking black, but they still contain black specs occasionally. The GI doctor thought the black specs might be blood, so he did a sigmoidoscopy. The test result was negative, and he said that my stomach and colon upsets were probably because of all the stress I’ve been under. I still have a hiatal hernia and acid reflux, for which I take Maalox. The acid reflux sometimes causes me to throw up, or if I cough it will bring up acid reflux and then I throw up. I have difficulty urinating, and sometimes I have to apply pressure to my lower abdomen to help me pass urine. Sometimes when I cough or sneeze, the urine just leaks out.”

“How about your hemorrhoid mentioned in one of the doctor’s reports?”

“I had them removed some years ago, but the doctor warned me that they might return. They did, and I’ve been eating a high fiber diet with fruits and vegetables. But I cannot really afford it. Occasionally I have a small amount of blood from the new hemorrhoids. I also had a nodule in my right breast show in a mammogram that was done last year. Further testing with a spot compression mammogram showed nothing though. My gynecologist said it might be a fatty density. He told me to keep an eye on it for any new development, like pain or tenderness, and if the nodule becomes hard to see him if anything new develops. With all these problems, I’m trying to do as well as I can, but it has not been easy for me.”

“I bet!”

“You know I had a severe bleeding duodenal ulcer several years ago that lasted for a good six months. I still have a dull but intense pain in my right upper abdomen. Sometimes, I feel a lot of distension in my stomach with a burning pain. The pain seems to radiate to my upper back from time to time. That pain occurs periodically and is often induced by cold and fatigue, and when I’m hungry. I also have acid regurgitation, heartburn, belching, a nauseous feeling, and sometimes vomiting. And I’m getting fatter and fatter, almost fifty pounds since you last treated me! My skin seems always dry. I

also feel cold or even chilly, especially in my hands and feet even when the outside temperature is hot. My bowels are always crazy, and I'm using a laxative now. Also, my pain seems to always escalate whenever I have more emotional distress."

"Psychological factors have a great influence on the stress hormones and the internal organs. Any psychological abnormality can aggravate the existing disease or can create a whole new illness."

"I don't remember if I've told you that I was diagnosed with bipolar disorder when I was sixteen. I was prone to depression, but I believe my depression now has nothing to do with my old one."

"Why is that?"

"Because the pain I have now did not respond to Lamictal—the antidepressant that I used to take. I couldn't shake that feeling despite taking heavier dosages. I truly believe that the pain now is due to the persistent back pain, but the doctors do not agree. They tell me that I am just depressed and prescribe another antidepressant, which sometimes I refuse to take. I told one of the psychiatrists that if he wants to cure my depression, he has to do something about my back pain first. It seems to me that the more depressed I feel, the more antidepressants the doctor will prescribe, instead of removing the source of my pain first."

"Sorry that's how you feel, but sometimes we don't know for sure which occurred first, just like the chicken and the egg."

"My mother was an alcoholic, and I drank with her when I was a kid. Before I went to college at eighteen, I made up my mind that I would never be like my mother. I wasn't planning on drinking to the point where I didn't know how I got there the next day. But with so much pain, I drink whatever alcohol is available these days, except I pass out easily now. Why can't the doctors get rid of my problems?"

"I wish I knew!"

"I think the only option left is to kill myself!"

"Oh, please don't do that! There are always other options!"

"Like what?"

"Like what we are planning to do!"

LIVING WITH CHRONIC PAIN

Living with chronic pain is not only a question of having pain somewhere in the body but also of suffering the accompanying mental reactions, such as changes in the previously more healthy way of life. Pain is a highly personal experience, depending on cultural learning, the meaning of the situation, and other factors that are unique to each individual. If pain persists, much energy is expended in coping with everyday life. Activities that are usually simple and uncomplicated for a healthy person become difficult or impossible; body and mind become exhausted, not only from activities that are scarcely feasible, but also from the mere thought of what is, or is not, possible. In addition, tiredness comes from medicines taken and from inadequate physical and mental activity. At night, when everything is quiet, the pain patient is left with the pain and the added difficulty of falling asleep. It is then a temptation to take more medicines hoping to get some rest. Sadly, the next day arrives only with new pains, tiredness, and a hangover from the medications; it is truly depressing.

1-4: FINDING ETHYL

The fundamental diagnosis is similar in both conventional and TCM; both start off with a history of present illness, past medical history, occupation, review of systems, etc. In low back pain, emphasis is naturally placed on the common causes of low back pain, such as age, body weight, injury, occupation, habit of exercise, location and duration of pain, recent body weight changes, associated symptoms such as numbness and tingling sensations, etc. In chronic low back pain, because it involves the whole body, questions about nutritional status, bowel function, constipation or diarrhea, contraceptives, carcinoma, uterine myoma, prostate health, and the rest of the body need to be explored.

Based on her previous medical records, Ethyl did not have osteomyelitis, Hodgkin's disease, metastatic carcinoma, multiple myeloma, osteomalacia, osteoporosis, lumbar spondylosis, Paget's disease, alkaptonuria, gout, spina bifida, spondylolisthesis, rheumatoid arthritis, spondylitis, recent fracture, osteitis fibrosa cystica, arterial and venous anomaly, epidural abscess, myelitis, or tumors, except she was told she had scoliosis, osteoarthritis, herniated disc, and coccydynia. She had a family history of uterine myoma, ovarian cyst, endometriosis, and terrible dysmenorrhea. There was no sign of cystitis or urethritis, but she had signs and symptoms of stress incontinence.

ETHYL'S PHYSICAL EXAMINATION

Ethyl looked depressed. She had difficulty transferring from the chair to the examination table and vice versa. Her mobility was slow and insecure. She was 5'8" and weighed 212 pounds. Her body temperature recorded from her mouth was normal, but her hands and feet were cold. Her arterial pulse was weak and measured 88 beats per minute, but was symmetrical on both sides. Her respiration rate was 15 per minute, and her blood pressure was 128/64 mmHg in a supine position. She had a mild to moderate orthostatic hypotension and felt a slight dizziness when she sat up from a supine position. Her leg length was about equal on both sides, but her left side pelvis was smaller than the right; the left side pelvic height was lower than the right side when she sat, which I hadn't noticed before. As a result, there was an apparent functional scoliosis with convex to the left in her spine.

There was a decrease in light touch and pinprick sensations in her legs and feet in the areas controlled by the fifth lumbar and the first sacral nerve roots. The deep tendon reflex in the right ankle was absent, which suggested that her first sacral nerve root was in trouble. The range of motion of her trunk and hips in flexion was 50 degrees; extension was 0 degrees; left side bending was 10 degrees; right side bending was 5 degrees; left side turning was 0 degrees; and right side turning was less than 5 degrees. The normal lumbar forward curve was incompletely reversed on the active lower back extension from a flexed position. Her fingers couldn't reach her knees when I asked her to bend with her knees straight, and the motion aggravated her low back pain. There was no apparent joint or ligament instability. She did have many tender spots with tight muscle nodules in her upper back, lower back, and buttock muscles. She was unable to perform sit-ups with her knees straight or bent; hold her feet up in a supine position; raise her head and shoulders up; or raise her heels up in a prone position. Her weight bearing, walking, and hopping ability were subnormal. She was unable to perform squats, and she could not walk on her heels or on her tiptoes.

A TOUCH OF TCM EXAMINATION

1. Although Ethyl is Caucasian, her skin looked a bit yellowish, dark, and f dry. There were no apparent skin lesions, and no signs of herpes zost cysts, bruises, or lacerations on her skin.

2. Her eyelids had a slight violet discoloration after she removed her makeup.
3. Her eyes were not very expressive and actually looked kind of dull.
4. Her nails looked pale, and it took a much longer recovery time for the color to return after being pressed.
5. Her lips and gum were dark red.
6. Her voice and breath were weak.
7. Her tongue looked sticky, with a layer of whitish tongue fur. It was slightly trembling.
8. Her abdomen was tense and was tender to light pressure. She had hyperactive bowel sounds. Her abdominal muscle strength was poor. There was no audible bruit or vascular murmur to suggest an aortic aneurysm.
9. She had external hemorrhoids and anal fissures, but no apparent abscess or fistulas.

ETHYL'S PROBLEM LIST (Based on 2018 ICD-10 Code)

1. Abdominal pain (ICD-10 Code **R10.9**)
2. Acid reflux (ICD-10 Code **K21.9**)
3. Addictive behavior (ICD-10 Code **R46.2**)
4. Addiction to opioids (ICD-10 Code **F11.20**)
5. Anger (ICD-10 Code **R45.4**)
6. Anxiety (ICD-10 Code **F41.9**)
7. Attention and concentration deficits (ICD-10 Code **R41.840**)
8. Belching (ICD-10 Code **R14.2**)
9. Bowel dysfunction (ICD-10 Code **K59.9**)
10. Breast nodules (ICD-10 Code **N63**)
11. Bruxism (ICD-10 Code **G47.63**)
12. Chills without fever (ICD-10 Code **R68.83**)
13. Chronic low back pain (ICD-10 Code **CM 338.4**)
14. Chronic pain syndrome (ICD-10 Code **G89.4**)
15. Cold sweat (ICD-10 Code **R61**)
16. Confusion (ICD-10 Code **R41.0**)

17. Constipation (ICD-10 Code **K59.0**)
18. Depression (ICD-10 Code **F32.9**)
19. Diarrhea not because of illness (ICD-10 code **R19.7**)
20. Disability—physically and emotionally (ICD-10 Code **Z73.6**)
21. Disc degeneration (ICD-10 Code **M51.36**)
22. Disc herniation—lumbar spine (ICD-10 Code **M51.26**)
23. Dizziness (ICD-10 Code **R42**)
24. Degenerative joint disease of the lumbar spine (ICD-10 Code **M19.90**)
25. Duodenal ulcer (ICD-10 Code **K26.0**)
26. Failed back syndrome (ICD-10 Code **M96.1**)
27. Fatigue and low energy level (ICD-10 Code **R53.83**)
28. Fibromyalgia (ICD-10 Code **M79.7**)
29. Flushing up not because of shyness or embarrassment (ICD-10 Co
R23.2)
30. Gastrointestinal bleeding (ICD-10 Code **K92.2**)
31. Gastrointestinal upset or dyspepsia (ICD-10 Code **K30**)
32. Head—heaviness feeling (ICD-10 Code **R68.89**)
33. Headache (ICD-10 Code **R51**)
34. Heartburn (ICD-10 Code **R12**)
35. Hemorrhoids (ICD-10 Code **K64.9**)
36. Hiatal hernia (ICD-10 Code **K44**)
37. Insomnia (ICD-10 Code **G47.0**)
38. Mental stress—excessive (ICD-10 Code **F43.0**)
39. Melena (ICD-10 Code **K92.1**)
40. Memory loss (ICD-10 Code **780.93**)
41. Muscle spasm (ICD-10 Code **M62.83**)
42. Muscle strain (ICD-10 Code **S39.012A**)
43. Myofascial pain (ICD-10 Code **M79.1**)
44. Nausea and vomiting (ICD-10 Code **R11.2**)
45. Nervousness and jittery (ICD-10 Code **R45.0**)
46. Nightmares (ICD-10 Code **F51.5**)
47. Nosebleed (ICD-10 Code **R04.0**)
48. Numbness and tingling sensation in the legs (ICD-10 Code **R20.2**)

49. Palpitations (ICD-10 Code **R00.2**)
50. Polyuria (ICD-10 Code **R35.8**)
51. Post-traumatic stress disorder (PTSD) (ICD-10 Code **F43.12**)
52. Pressure or distention in the chest and abdomen (ICD-10 Code **R14.0**)
53. Lumbar radiculopathy (ICD-10 Code **M54.16**)
54. Restlessness or agitation (ICD-10 Code **R45.1**)
55. Shoulder aches (ICD-10 Code **M75.3**)
56. Side effects from medications (ICD-10 Code **T50.995A**)
57. Shortness of breath (ICD-10 Code **R06.05**)
58. Suicidal ideations (ICD-10 Code **R45.851**)
59. Syncope or fainting spells (ICD-10 Code **R70.2**)
60. Thirst (ICD-10 Code **R63.1**)
61. Tinnitus or ringing in the ear (ICD-10 Code **H93.1**)
62. Tremor (ICD-10 Code **G25.0**)
63. Upper back pain (ICD-10 Code **M54.9**)
64. Urinary incontinence (ICD-10 Code **R39.81**)
65. Weight gain not because of extra calorie intake (ICD-10 Code **R63.5**)
66. Worrying—excessive (ICD-10 Code **Z71.1**)

“So, what do you think? Can you help me?” asked Ethyl.

“Well, you have very complex problems.”

“Can you help me to ease the pain?”

“Yes, but it is probably more important to help you get rid of the opioid addiction, anxiety, and depression. You are also anemic and have liver, kidney, and spleen problems.”

“How? Nobody ever told me that I have liver, kidney, or spleen problems!?”

“Don’t worry about that; it’s not the kind of problems that you are thinking of, but I need to talk to your doctors; we, including you, need to work on these things together!”



1-5: DEALING WITH LOW BACK PAIN

When it comes to low back pain, acute or chronic, most physicians instruct their patients to:

1. Stop doing whatever caused the low back to hurt.
2. Keep calm and not get too anxious or angry.
3. Rest in a comfortable position—such as lying down on a carpeted floor with knees up and supported by a firm cushion or several large pillows.
4. Not sit or lie still; the whole body needs to move around every twenty thirty minutes to maintain mobility.
5. Put some cushions between the back and chair back when sitting in

chair and keep the knees slightly higher than the hips.

6. Keep abdominal and buttock muscles tight, but keep breathing while moving around.
7. Keep the knees slightly apart and slightly bent when standing or walking.
8. Wear a lumbar brace or corset for a short period of time if not feeling secure.
9. Use cold when low back hurts; use heat when low back feels stiff.
10. Be careful with over-the-counter painkillers.
11. Take medications as prescribed.
12. Eat correctly, reduce body fat, and relax.

DRUGS— the quickest way to relieve acute pain

Based on prescriptions, there are two main groups of pain medications used to control pain :

1. Over-the-counter (OTC) Pain Pills—Aspirin, Ibuprofen, and NSAIDs, such as Vioxx and Voltaren, belong to this group. These are mild painkillers, and any adult can buy them without a prescription.
2. Narcotic Analgesics—Narcotics, such as codeine and morphine, work at the brain and spinal cord level by blocking the painful sensation before it reaches the pain center in the brain. These drugs are controlled substances and require prescriptions from physicians.

Based on mechanisms, there are six groups of medications commonly used to ease pain :

1. Opioids
2. Nonsteroidal Anti-Inflammatory Drugs (NSAIDs)
3. Antidepressants
4. Muscle relaxants
5. Anticonvulsants
6. Topical analgesics

CHRONIC PAIN CONTROL

1. May involve many different specialists—family physician; orthopedic

surgeon; neurologist; neurosurgeon; internist; rheumatologist; anesthesiologist; psychologist or psychiatrist; a physical medicine and rehabilitation (PM&R) specialist like me; and more.

2. Just like in acute low back pain, people with chronic pain also need to try to keep calm and not to get mad all the time.
3. Keep the body moving, lose body fat, and maintain good health habits.
4. Take medications as prescribed, whether to ease the pain, to relax the muscles, to help sleep, to calm the nerves, and to counter the side effects from the pills prescribed.
5. The doctors may do something that is actually quite painful to the patient—shots (injection), twists (mobilization), smacks (massage), cracks (manipulation), racks (traction), stabs (acupuncture), and cuts (surgery) just to name a few.
6. Sometimes the doctor will talk and talk, trying to convince or hypnotize the patients to forget about their pain.

MEDICATIONS OFTEN USED IN CHRONIC PAIN CONTROL

1. Drugs to ease the pain (analgesics)
2. Drugs to keep the fire down (NSAIDs)
3. Drugs to get happier (antidepressants)
4. Drugs to get softer (muscle relaxants)
5. Drugs to calm down (tranquilizers)
6. Drugs to reduce craziness (antipsychotic)
7. Drugs to help sleeping (hypnotics)
8. Drugs to control the side effects from drugs (these drugs may have nothing to do with the patient's actual pain problems but are simply to control side effects from other drugs!)

ABOUT OPIOIDS AND CHRONIC PAIN

1. Pain medications alone rarely help chronic pain relief. Therefore, to expect long-term pain relief from pain pills, such as opioids, is simply ridiculous

2. Research evidence has shown that taking opioids for an extended period of time can actually make a person feel more pain, despite increasing the dosage or frequency.
3. Opioids can change the pain threshold or tolerability.
4. Chronic pain can reduce the numbers of opioid receptors in the brain and thus limit the ability of opioids to relieve chronic pain.
5. A very recent study from the NIH's Intramural Research Program and McGill University has shown that pain itself, not treatment or preexisting individual differences, alters the brain's opioid system in the rats, and the changes in the opioid system may also play a role in the depression often associated with chronic pain. (1)

Therefore, to truly relieve chronic pain, all other issues related to the pain, such as stress, nutrition, physical activity, interpersonal relationships, financial status, etc., must be addressed as well.

BEHAVIOR MODIFICATION

1. Psychological factors can change the perception of pain.
2. Certain techniques used in psychology can affect a person's patterns of thought, feeling, and action toward the experience and expression of pain. For example, cognitive behavioral therapy (CBT) can help pain sufferers change their thoughts and behaviors from negative or pessimistic to more active, optimistic, and productive.

BIOFEEDBACK

1. Biofeedback is concerned with externalizing the body's internal physiological events (such as pain) so a person can adjust those internal events.
2. Usually, an internal activity is amplified using a sensor applied to the skin and through a computer, the signals are translated into fancy sound and light displays.
3. Using biofeedback techniques, a person can learn to change perceptions of his or her body and to influence those changes.

MULTIDISCIPLINARY PAIN MANAGEMENT CENTER

Chronic pain, or any chronic diseases generally, cannot be prevented by vaccines or cured by medication, physical therapy, psychotherapy, or surgery, nor do they just disappear. According to Health Statistics, nearly 90% of Americans over sixty-five years of age have at least one chronic health condition, and the numbers rise with age. Many of these health problems lead to pain.

1. A pain management center or pain clinic is usually made up of various medical disciplines, as well as supporting staff, to help a person reduce pain and restore the patient's functionality.
2. The facility can be hospital-based or in an outpatient setting.
3. The physician specializing in pain management will assess the patient's medical history and review blood tests and other diagnostic studies in addition to performing a physical examination and formulating a treatment plan.
4. The treatments may include meditation, cognitive behavioral therapy, psychological counseling, acupuncture, injections, and even surgery to ease the painful sensation.
5. Studies have shown that most people feel significant pain relief after visiting a pain clinic. They learn how to recognize and correct the behaviors often associated with chronic pain, such as a preoccupation with pain; strong and ambivalent dependency needs; meeting other people's needs at one's own expense; inability to take care of self needs; pessimism; inability to control one's own feelings; and using pain as a symbolic means of communication.

GENETIC MANIPULATION

There is research aimed at identifying a gene variant of an enzyme that can reduce the sensitivity to acute pain and decrease the risk of chronic pain. COX-2 (cyclooxygenase-2) is a major contributor to pain associated with inflammation. A study of genes affected by COX-2 led to the discovery of its role in connection to multiple cellular pathways that contribute to pain relief and adverse side effects.

SURGERY

1. Pain alone is NOT an indication to have low back surgery!
2. Surgery usually will not provide pain relief unless there is anatomical correlation with the distribution of pain.
3. Low back surgery is generally the last choice in low back pain treatment.
4. Spinal decompression, nerve root decompression, laminectomy, spinal fusion, disc replacement, and intradiscal electrothermal therapy are the most popular low back surgical procedures.

In Ethyl's case, I decided to use acupuncture to help her drug addiction problem first.

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1-6: ACUPUNCTURE FOR ADDICTION

KEYWORDS

1. Acupuncture (ICD-10 Code **8E0H30Z**)

In the mid-1800s opium addiction reached crisis levels in China. Acupuncture and herbs were used in treating the addicts. For the past two hundred some years, the TCM treatment methods for addiction, or for any other problems, are still pretty much the same as before. In most cases, the treatment for addiction and its related physical and psychological problems is like the treatment of other disorders of the body—according to conformation derived from specific signs and symptoms.

When treating psychological problems such as anxiety, depression, neurosis, and psychosis, which are often seen in narcotic addicts, often show no apparent physiological changes in the body, except from the Theory of Five Elements point of view.

ADDICTION YIN-YANG

1. Chills, abdominal cramping, profuse sweating, runny nose, watery eyes and irritability, which are associated with narcotic withdrawal, are symptoms of severe Yang deficiency or even Yang collapse and “spirit” disturbance.
2. Malnutrition, which is often seen in drug addicts, is a Yin deficiency condition.
3. Therefore, the treatment of narcotic addiction should focus on supporting Yang, nourishing Yin, and at the same time calming the spirit.

In TCM psychological disorders are considered a form of epilepsy or insanity. The term “epilepsy,” as used in *Yellow Emperor’s Internal Medicine* is the same as is inferred by the term in conventional medicine today. The term “insanity” or “madness” is roughly synonymous with the modern term “schizophrenia” and other extreme psychic disorders.

“Living Qi Communicating with Heaven,” a chapter in *Yellow Emperor’s Internal Medicine*, indicates that, “When the heavenly Qi is clear, one’s spirit and mind are well; Yang Qi is consolidated and no evils can harm the body. This is the way the sage conducts himself with heavenly Qi according to seasonal changes, thus enabling himself to communicate with the heavenly spirits.”

In the chapter titled “Disease Potential” of *Yellow Emperor’s Internal Medicine*, it states: “There are people afflicted with wrathful madness. How does it occur? It occurs out of Yang. How can Yang cause that? Because Yang Qi becomes deflected abruptly and cannot be resolved, hence it causes one to become wrathful. The name for this condition is known as ‘Yang adversity.’” Furthermore: “Yin stores seeds and Yang protects to consolidate the exterior. If Yang overpowers Yin, Blood is forced to flow rapidly. Acting jointly, these conditions cause madness.”

According to TCM theory, Yin is the prime mover of life that restores seeds and vitality, while Yang protects the body surface. As Yin is weakened while Yang is strengthened, the Yin-Yang balance is disrupted. As a result, the person would go crazy. *Yellow Emperor’s Internal Medicine* describes epileptic madness as, “The incessant appearance of wild words, panic attacks, hysterical laughter, bursts of wild singing, rejoicing, and other erratic behavior is caused by great horror.” (2)

SCIENTIFIC BASIS OF ACUPUNCTURE

Remarkable progress has been made in recent years on the neurophysiological basis of acupuncture.

1. Low-frequency stimulation leads to the release of enkephalin, where dynorphin is released by high-frequency needling.
2. Enkephalin acts primarily upon the brain stem level, dynorphin on the spinal level. Repeated needling within short time periods leads to tolerance.
3. Needling with different frequencies will release different neurotransmitters; alternating the high and low frequencies may delay the appearance of tolerance.
4. According to their action on acupuncture analgesia, two types of neuropeptides have been distinguished: the promoting and the inhibiting. Cholecystokinin (CCK) is a very potent neuropeptide of the inhibiting group, whereas enkephalin and dynorphin belong to the promoting group. The response to acupuncture depends on the balance of the two sides. (3)

Recently, a group of researchers has shown that Transcutaneous Electric Acupoint Stimulation (TEAS), a form of acupuncture that uses skin electrodes to apply electrical stimulation at different points on the body, might help people addicted to opioids. (4)

1. The study, supported in part by the NIH and published in the *Journal of Substance Abuse Treatment* in 2010, suggests that combining this technique with prescribed drugs that ease withdrawal symptoms might improve other outcomes for people addicted to opioids.
2. There were forty-eight opioid addicted people between the ages of eighteen and fifty-nine participating in the study. They were randomly assigned to receive three thirty-minute treatments of active (actual) or simulated (placebo) TEAS every day for up to four days, along with their prescribed drugs (a combination of buprenorphine and naloxone).
3. Two weeks after discharge from the treatment, only one-third of those who received active TEAS began to take opioid drugs again compared to almost two-thirds of those who received placebo TEAS.
4. Those who received actual TEAS were more than two times less likely to have used any drugs than those who received placebos.
5. The participants in the actual TEAS group reported, “they were less bothered by pain and that they experienced greater improvements in overall health.”

6. Despite the limited number of participants, the results were encouraging
(4)

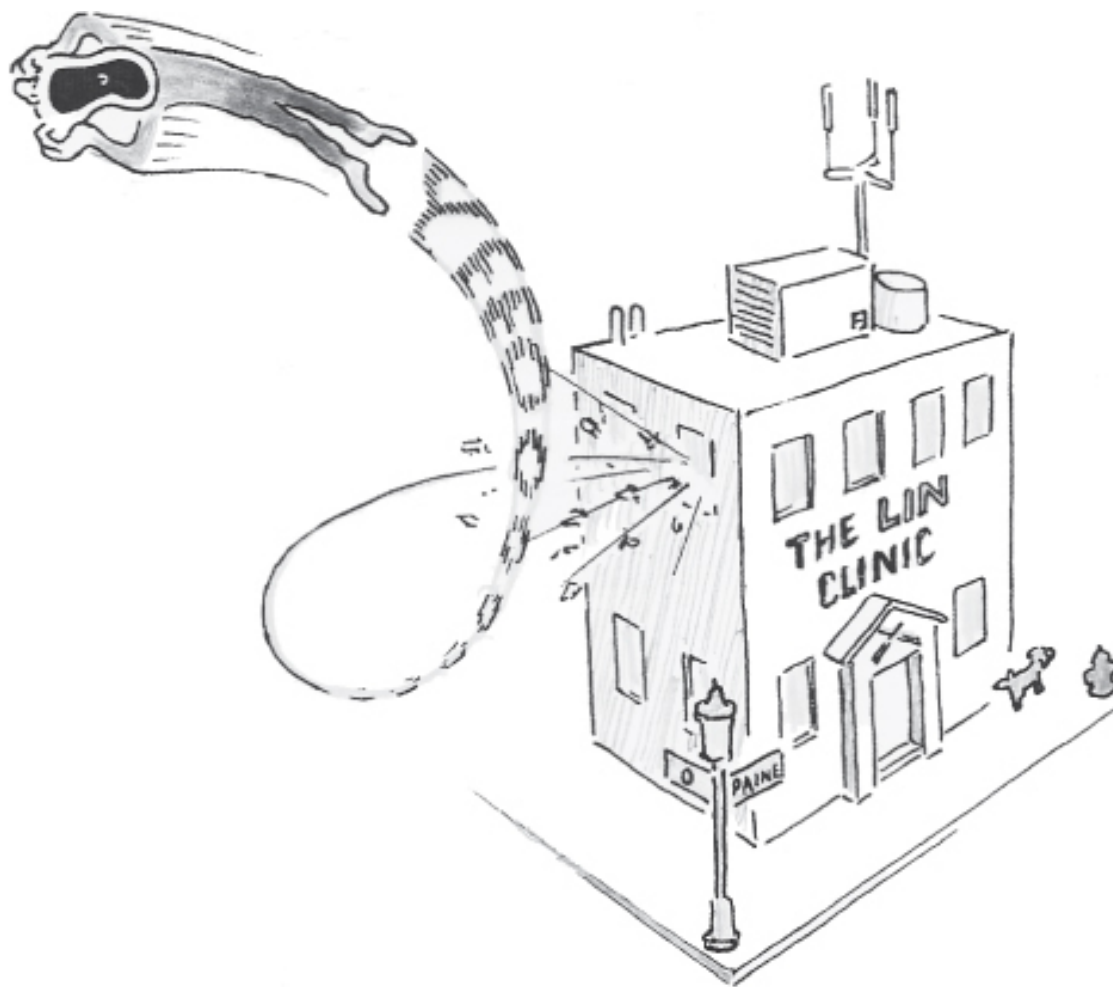
EAR ACUPUNCTURE

TCM doctors have been poking the addict's ear for a long time. In acupuncture theory, the ear is considered a smaller version of the body. Anatomically the ear looks like an upside-down fetus with arms and legs clenched to the middle.

The specific acupuncture points on the ear correspond to the specific parts of the body and can be used to treat illnesses occurring anywhere in the body. Clinically the ear can be needled as an entire treatment in itself, especially in needle-sensitive patients, or used to reinforce the body acupuncture treatment. The acupuncture points on the ear can be located fairly easily with the aid of an acupuncture point-locating device. It works by detecting the area of low electrical resistance or increased conductivity with respect to the surrounding skin.

September 2004

I did ear acupuncture on Ethyl and also went over some gentle stretching exercises with her; I told her to do those exercises at least three a day. I instructed her to keep warm, to eat balanced meals, and to go to bed early with her body supported by pillows and folded blankets. She should avoid alcohol and not do those things that she was told not to do. I told her to come back in one week. She didn't.



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1-7: HERBS AND PAIN CONTROL

KEY HERBAL FORMULA

Licorice and Jujube Combination (Gan Mai Da Zao Tang 甘麥大棗湯)

February 2005

“Where have you been? Why didn’t you come back sooner? There is just no way a few jabbings to your ear could possibly get rid of all your troubles!” I asked when Ethyl finally showed up.

“No, it didn’t, but I had to take a break,” she said.

“Why? Those tiny needles couldn’t possibly hurt you that bad!?”

“No, they weren’t too bad at all, but my back pain was terrible, and I had to go back to the pain pills.”

“How do you manage to convince your doctors to keep prescribing narcotics for you?”

“Sometimes I go to the emergency room, sometimes I call in prescriptions posing as an office nurse, and sometimes I write them myself using the prescription pads I took from the doctors.”

“You do what?”

“You heard me. To tell you the truth, four months ago one of my daughters caught me calling in a prescription. She got on the phone and told the pharmacist that I was a junkie. The pharmacist called and had the police waiting for me by the door. I was really frightened, but I kept my cool and tried to think of a way out of it. Eventually, I just sat on the floor, smiled foolishly and made believe that I was a mental case. I was hoping the officer wouldn’t know what to do with a nut and would just let me go.”

“Did he?”

“Nope! That’s why you haven’t seen me for the past few months. But honestly, prior to this, I had never even considered a criminal act, and have never had so much as a parking ticket. This pain, however, made me a basket case. Then I had to go to a hospital for an in-patient detox program.”

“I’m sorry to hear that.”

“The other day, when I was at a supermarket, I saw Pat C. She was or maybe still is a patient of yours with chronic pain like me. She was seeing an acupuncturist not long ago who gave her some kind of Chinese herbs to take. She said those herbs helped her a lot. Her daughter was also taking herbs for her PMS, and it helped, too. Can Chinese herbs help me? Can you prescribe some for me?”

“They may help ease your pain if they are used correctly. But I don’t prescribe herbs; I only suggest taking them as a dietary supplement when it’s appropriate. In the United States, herbs are considered as complementary and alternative therapies, they are not regulated by the FDA as drugs.”

“Will I get hooked on these pain herbs?”

“There are no such things called pain herbs! The Chinese herbal preparations for pain or any other complaints are based on the individual’s conformation at the time of medical evaluation.”

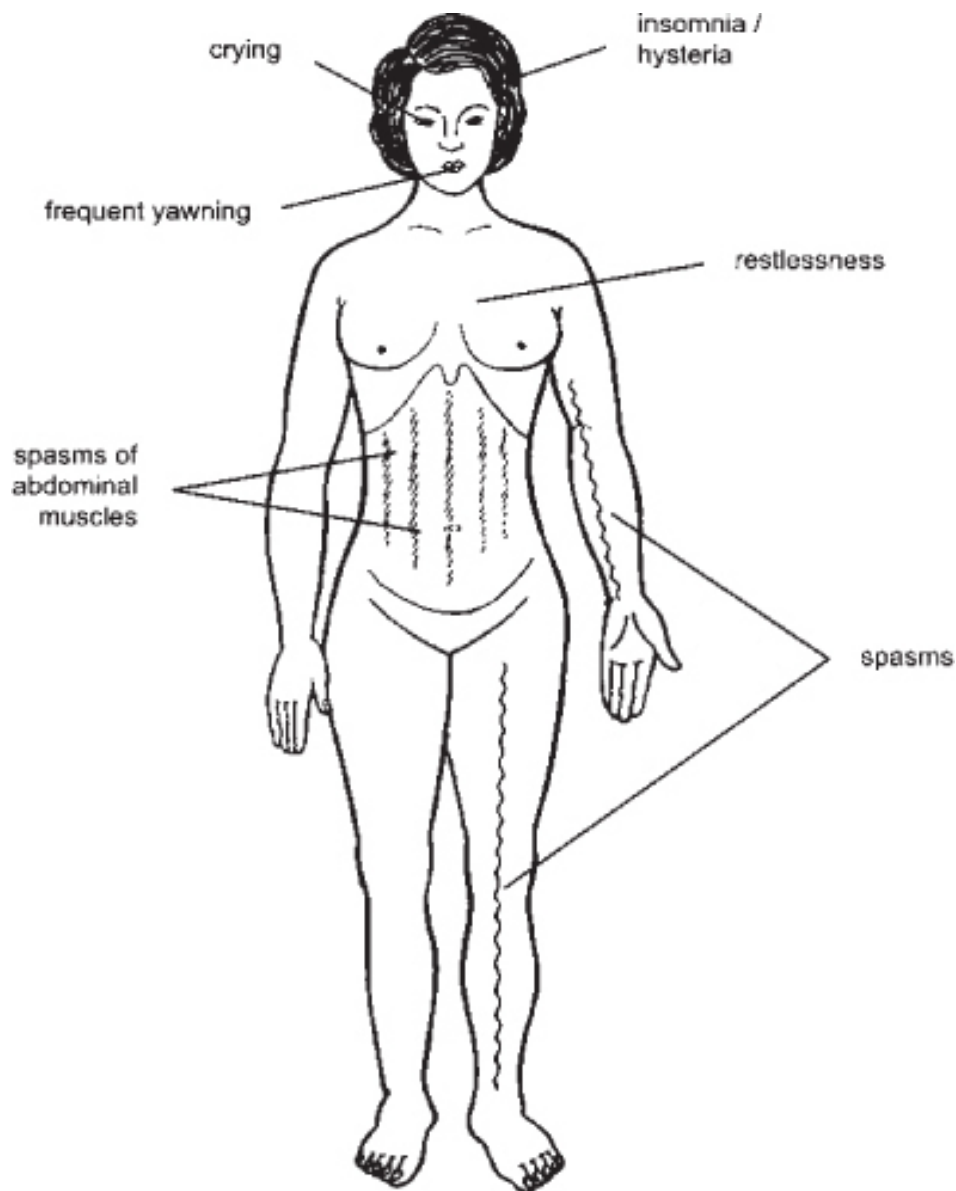
“What is a conformation?”

“It’s the particular body’s response and presentation following an illness or disorder. It is derived based on the yin-yang, eight diagnostic principles, and the specific stage of the illness as it progresses.”

“What are you talking about?”

“Well, it’s going to take some time to explain.”

Among all her problems, I thought that I should let Ethyl try **Licorice and Jujube Combination (Gan Mai Da Zao Tang 甘麥大棗湯)**.



Licorice and Jujube Combination (Gan Mai Da Zao Tang 甘麥大棗湯) is probably the most commonly used formula for depression, especially for those who have trouble sleeping and have emotional unsteadiness. It is an interior-heat conformation formula that nourishes the heart and tranquilizes the mind. In addition, there are only three ingredients in **Licorice and Jujube Combination (Gan Mai Da Zao Tang 甘麥大棗湯)** : licorice, jujube, and wheat, all of which are the ingredients used to sweeten the Chinese soy sauce. The sedative effects of wheat and jujube, both of which are descending in nature (wheat is also cooling), combined with the harmonizing nature of licorice, become strong enough to control symptoms of hysteria and anxiety.

Licorice has analgesic and inhibiting actions on both muscles and nerve endings. The formula is often used to treat depression, hysteria, nervousness, mania, muscle spasms, and insomnia.

1-8: SOMETHING TO HELP RECOVERY

KEYWORDS

Tonic and Supplementation

March 2005

Ethyl had received six sessions of acupuncture along with taking **Licorice and Jujube Combination (Gan Mai Da Zao Tang 甘麥大棗湯)**. She was feeling better; she had more energy, a better mood, lost some weight, slept more, and was definitely not as depressed. However, she still felt a considerable amount of pain. She was taking methadone as part of her narcotic detoxification program, but she had cut down on most of her other prescription medications.

“Do you believe that I still have a lot of pain even though you have no way of knowing it?” she asked.

“I do,” I said to her. “Pain is a subjective personal feeling. Therefore, if you told me that you’re still having a lot of pain, then you’re still having a lot of pain. I’m not going to fight you over how you feel!”

“I wish I had not had the first surgery. But I had no other choice; I was in a lot of pain. I couldn’t walk, and I had tried almost everything the doctors had to offer. I was in the hospital for two weeks after my first surgery. After the second surgery, I was there for ten days. The reason for the first surgery was the herniated disc, and the doctor said it would be like putting a jelly bean into a circle and smashing it. Everything that came out of the circle was how my disc was. I guess the surgeon used a hammer and chisel to get rid of it. But they did not give me anything to help me recover, just told me to eat properly.”

“Are you going to try to get better yourself?” I asked.

“I’d like to think that my back pain is going to get better. I think there are certain things that I can do myself to try to help myself, such as exercise, swimming, and eating a proper diet. I know I need to quit smoking and heavy

drinking; I know those nasty habits have proven to cause problems as far as my back problems are concerned.”

Ethyl was disabled, hadn't been working for years. She was still very weak, both physically and mentally.

“Does weather affect your pain level?” I asked.

“The weather definitely affects my pain. I can almost predict the weather. I know when it's going to rain or snow. The humidity bothers me tremendously, as does the cold. That's a proven fact. It also gives me headaches. I have severe migraine headaches. Of course, a lot of my headaches are aggravated, as my back pain is, by stress.”

“Are you eating well?”

“Well, I live with my retired parents, and I eat what they eat. I cannot survive on my own. It is a big burden for my parents because I just don't have enough coming in, but I need their help; I just have a tough time making ends meet. I don't know how could anyone do it without help from a family? If you are not able to work, and your only means of income is Social Security, it is real tough to get by. You hear people tell you that health care sucks now, but they don't know what really sucks until they have to depend on the state doctors and state facilities. So that would be another book for someone. You have to find some way to survive; you can't let money override everything else. You have to find a way. It's a struggle all the way.”

Ethyl still looked somewhat pale, although her mobility had significantly improved from a year ago. She had little difficulty transferring from the chair to the examination table and vice versa. She weighed 201 pounds. Her body temperature was normal, but her hands and feet still felt cold. Her arterial pulse was weak and measured 80 beats per minute. Her respiration rate was 13 per minute, and her blood pressure was 138/80 mmHg in a supine position. She still had a mild orthostatic hypotension and felt a slight dizziness when she sat up from a supine position. There was more expression in her eyes, and the color of her lips and gums were satisfactory. Her voice and breath were stronger, but her tongue still showed a layer of whitish tongue fur. It was not trembling, however. There was no apparent change in her functional scoliosis, and there were no apparent changes in her sensations and deep tendon reflexes in both lower extremities. Her abdomen felt softer but was tender to deep pressure. She had hyperactive bowel sounds. Her abdominal muscle strength was still poor. There was no audible bruit. Her hemorrhoid was not active. My

impression was that, in addition to her finances, she needed some tonics to help her functional recovery.

“Can Chinese herbs really help my pain?” asked Ethyl.

“Like I said, if we use them properly, they most likely can help your pain!”

I told Ethyl about **Tu-huo and Loranthus Combination (Du Huo Ji Sheng Tang 獨活寄生湯)** for pain relief from an article in *International Journal of Oriental Medicine*. (1) **Tu-huo and Loranthus Combination (Du Huo Ji Sheng Tang 獨活寄生湯)** has been widely used for treating pain associated with arthritis, low back problems, and sciatica. The component herbs of this formula are tu-huo, codonopsis, and tang-kuei, which all have been studied pharmacologically and found to have analgesic and anti-inflammatory effects individually. In that study, the researchers used mice to check their threshold of pain by placing them on a hot plate after taking this herbal combination. They also inflamed the ears of the mice and let them eat this herbal formula to see if it had any anti-inflammatory power. On the analgesic effect test, the durations before these mice started to feel discomfort (presumably pain) were recorded from the time the mice were put on the hot plate until the time these poor fellows started to lick their feet, which was taken as a signal of their pain threshold. The results showed that it took a lot longer for the formula treated mice to start to get antsy and writhe in pain. In the anti-inflammatory effect test, a mixed inflammatory formaldehyde solution was applied in a dose of 0.1 ml for each mouse by rubbing the solution on to the inner and outer sides of the left ear to induce inflammation. Thirty minutes after the application, the formula was administered. The mice died four hours later. The two ears from each mouse were then cut off with scissors. Using a 9mm hole puncher, a disc was punched off from each ear. The two discs were weighed, and the weight difference was taken as the extent of swelling. The formula-treated mice showed a markedly lower extent of foot swelling due to inflammation induced by formaldehyde. The experiment has suggested that the formula can elevate the threshold of pain induced by the hot plate method in mice, can reduce the amount of body twisting caused by acetic-acid stimulation in mice, and can markedly lower the extent of ear swelling in mice and the foot swelling caused by formaldehyde. Those were indications that **Tu-huo and Loranthus Combination (Du Huo Ji Sheng Tang 獨活寄生湯)** possesses pain relieving and anti-inflammatory effects, which provides good evidence for the clinical use of the formula in treating pain.

“Does it work on humans?” asked Ethyl.

“It worked on Chinese people before!”

“Can you prescribe some of this Tu-huo thing for me?”

“I think before putting you on this formula, I will put you on a hot plate and burn your feet! I’d better strengthen you first.”

“Are you taking me to a Chinese restaurant?”

“Actually, something better than that!”

“What?”

“Replenishing tonics!”

I thought **Pinellia and Magnolia Combination (Ban Xia Hou Po Tang 半夏厚朴湯)** might help Ethyl and gave her some samples.

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CHAPTER 2

Traditional Chinese Herbal Medicine on Pain

2-1: TRADITIONAL CHINESE HERBAL MEDICINE

Plants with medicinal properties are called medicinal herbs, which include opoids and digitalis, among many others. Traditional Chinese herbal medicine has a long history; various diseases were recorded on the most ancient form of writing—pictographs on bones or tortoise shells as early as the Shang Dynasty (16th–11th century B.C.). Diseases involving the heart, head, intestines, and stomach, as well as epidemic diseases, for instance, were mentioned in the oracle-bone inscriptions. In fact in the latter period of the Shang Dynasty, herbal combinations prepared by boiling were used in treating internal diseases. The word “medical master” was already mentioned in the Zhou Book of Rites at around 256 B.C. By then Chinese medicine practitioners had already noticed several seasonal diseases, such as excessive dandruff in spring, scabies in summer, malaria in autumn, and coughing in winter.

THE EARLY CHINESE HERBAL PREPARATIONS

In the old days medicinal herbs were prepared by putting them together in water, decocted, and boiled over a weak fire, and then applied with dregs removed. Take **Pueraria Combination (Ge Gen Tang 葛根湯)** as an example. This herbal preparation was a mixture of 8 gm of pueraria, 4 gm of ephedra, 4 gm of zizyphus, 3 gm of cinnamon, 3.0 gm of peonia, 2 gm of glycyrrhizae radix, and 1 gm of zingiberis recens rhizome. Pueraria and ephedra were first cooked in about 400 cc of water over a low fire until about 80 cc of the water had evaporated. The whitish foam on the top layer was removed and the other herbs added. The whole thing was then simmered until the “soup” was reduced to about 120 cc. It was then decanted and administered to the patient. In case you don’t know, some of the raw herbs looked and smelled terrible. The whole process of herbal preparation might take hours to complete. By then the whole house could smell like horse manure. You’d have to be mighty tough to drink that thing.

MODERN CHINESE HERBAL MEDICINE

Modern Chinese herbal medicine was made popular by Dr. Hong-Yen Hsu of Taiwan, generally considered to be the father of modern Chinese herbal medicine, some seventy years ago. Dr. Hsu began the study of Chinese herbal medicine when he was a pharmacognosy student at the University of Tokyo. The term “pharmacognosy” means the study of crude drugs as pharmaceuticals. The discipline embraces the biologic, biochemical, and economic features of natural drugs and their constituents. In spite of its association with alchemy and mysticism, pharmacognosy is a highly developed science. The scientifically processed herbal extracts are quantified then combined into formulas and packaged as teas, capsules, liquid extracts, granules, or powders. The formula can be heavy-duty (major), moderate (minor), slow-acting, fast-acting, or made with a few herbs, or many herbs. Sometimes adding other herbs to the basic formula is necessary. In this case, generally, two-thirds of the original formula will be taken away and is replaced by the same amount of the new herb.

COMPOSITION OF A CHINESE HERBAL FORMULA

Based on its actions, a formula usually has at least four different kinds of herbs in it:

1. Principal herb(s)—the main herb or herbs with the chief therapeutic effect
2. Adjuvant herb(s)—an herb or herbs to strengthen the power of the main herb or herbs.
3. Auxiliary herb—this herb serves to reduce the toxicity of the main and adjuvant herbs.
4. Harmonizer herb—this herb makes the formula less offensive to the taste buds.

Take **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)**, a blood regulating formula, as an example:

1. The main herbs are persica and rhubarb. Both persica and rhubarb have effects on blood circulation; rhubarb reduces internal heat.
2. The assisting herbs are cinnamon twig and mirabilium. Cinnamon warms and opens the meridians. It also balances the cold property of persica and rhubarb. Mirabilium aids rhubarb in purging internal heat and helps blood circulation.
3. The countering herb is licorice, which protects stomach Qi from the cold effect of persica and rhubarb.
4. The formula doesn't taste too bad, as both cinnamon and licorice are not offensive to the taste buds.

CHINESE HERBS FOR PAIN

Chronic pain does not exist alone; anything that produces pain will produce other symptoms as well. For example, degenerative arthritis can cause pain, but it also can lead to inflammation, joint swelling, stiffness, an increase in local heat, tenderness (when pressure is applied to the affected joint), loss of joint mobility and bone spur formation, emotional responses, etc. Conventional medicine can manage these problems but does it separately. Chinese herbal medicine also manages these problems but can do it all at the same time. In addition, conventional medical treatment does not take the individual's constitution into consideration like TCM does.

CONFORMATION SPECIFIC

In conventional medical practice, there are many well-known signs and key clues in making a diagnosis. For example: tachycardia, hand tremors on outstretched arms, bulging eyeballs, and enlarged thyroid gland points to hyperthyroidism; absence of menstruation since childbirth points to Sheehan's syndrome; weakness, pigmentation, and hypotension suggest Addison's disease. Of course, such diagnostic clusters are not infallible. Pattern recognition is simple when a clinician has seen enough such cases before. Sometimes manifestations from the illness are so prominent that the doctor only needs to take a look and has a diagnosis even if he or she is not seeking it. In Chinese herbal medicine, such clusters or key clues also exist and is called "conformation." (証)

Conformation in Chinese herbal medicine is "the subjective symptoms and the objective signs complex" of the patient. Since the conformation derived from the TCM examination always corresponds to specific herbal formulas used for that particular condition, the name of the herbal formula is used as the name of the conformation. For example, **Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸)** is often used to treat the collective problems that include cold hands and feet, lower back pain, pain in the legs and feet, genital itch, difficult urination, frequent urination, and edema. Therefore, those who have these symptoms are called to have a **Rehmannia Eight Conformation (Ba Wei Di Huang Wan 八味地黄丸)**.

DETERMINING A CONFORMATION

In the establishment of conformation, there is a particular diagnostic approach encompassing four methods, just like in conventional medical evaluation:

1. Inspection
2. Listening
3. Questioning
4. Physical examination

TREATMENT ACCORDING TO CONFORMATION

The main difference between the conventional and TCM treatment is that the pathophysiological principles used in TCM are based on the Yin-Yang, exterior-interior, deficient-excess, chill-heat, Qi, blood, and water concepts. As a result, the diagnoses and prescriptions from TCM doctors will naturally be more philosophical and descriptive than their conventional counterparts. Take degenerative arthritis as an example. In conventional medicine, a menopausal, fragile lady who is diagnosed with degenerative arthritis of the lumbar spine, but also complains about chills and thirst all the time, can't sleep at night, and also urinates a lot, will most likely be treated the same way as a hypertensive and heavyset man with the same diagnosis. In Chinese herbal medicine practices, these two persons will be treated very differently.

Take vomiting as another example. In TCM, different types of vomiting will be treated with different herbal formulas.

1. An infant who is vomiting because of an acute gastroenteritis most likely cannot sleep quietly, is restless, and is noisy. If the baby has a strong desire for water yet will vomit after drinking, this is called "reverse water vomiting" or the **Hoelen Five Herbs Formula (Wu Ling San 五苓散)** conformation. One or two dosages of this formula will stop the vomiting and the thirst. It will also increase urine output, calm the restlessness, and induce perspiration.
2. The vomiting of a woman during pregnancy is different from that of the baby described above. She will most likely feel nauseous, have no appetite for food or drink, become upset, and then vomit. This condition is called the **Pinellia and Hoelen Combination (Xiao Ban Xia Jia Fu Ling Tang 小半夏加茯苓湯)** conformation and should not be treated with **Hoelen Five Herbs Formula (Wu Ling San 五苓散)**.
3. Vomiting that accompanies a migraine is called the **Evodia Combination (Wu Zhu Yu Tang 吳茱萸湯)** conformation and shouldn't be treated with the two herbal formulas mentioned above.

Thus, in herbal medicine treatment, a physician must determine the kind of vomiting along with all the other symptoms to which it is linked at the same time.

2-2: Qi, BLOOD, AND WATER DISEASES

Qi, blood, and water theory is the principal concept of TCM. When Qi, blood, or water is malfunctioning, we get sick.

Qi DISEASE

1. Qi diseases may display symptoms of every type of degenerative condition known to human beings because Qi diseases can affect everything: the nervous system, the meridians, the mind, and the spirit.
2. Dr. Gonzan Goto, a Japanese authority on Chinese herbal medicine, goes so far as to contend that the obstruction of Qi causes all disease.
3. Cinnamon is often used to normalize the flow of Qi. That's why we see a lot of herbal formulas with cinnamon in it.

STAGNATED OR OBSTRUCTED Qi

1. The main symptom is a sensation of a foreign object getting stuck in the throat.
2. Other symptoms are chest discomfort, shortness of breath, and palpitation of the heart as if it's going to stop.
3. It can cause arrhythmia with intermittently skipped heartbeats.
4. The most effective herbs for obstructed Qi are magnolia bark (hou-pu 厚朴), perilla leaves (tzu-su-yeh 紫蘇), or perilla fruit (tzu-su-tzu 紫蘇子).
5. The most popular herbal formula for stagnant Qi is **Pinellia and Magnolia Combination (Ban Xia Hou Pu Tang 半夏厚朴湯)**.

BLOOD DISEASE

1. This includes all illnesses of the circulatory system: blood stagnation, anemia, varicose veins, hardening of the arteries, and hemorrhages, etc.
2. Similar to the "extravasated blood" in conventional medicine, i.e., the blood leaks out when a blood vessel ruptures.
3. The older TCM concept treated the stagnated blood as "filthy blood." This was often seen in the abdomen or pelvic area, which caused disturbances

ovarian function and led to a ruddy complexion, blotchy and/or coarse skin, varicose veins, and bluish discoloration around the mouth. It also could lead to anemia, a dark violet color along the edge of the tongue. The term “filthy” was later replaced by “blocked” or “interrupted.” The term first appeared in *Huang Ti Nei ching* (Yellow Emperor’s Classic of Internal Medicine), and later in *Shang Han Lun* (Treatise on Febrile Diseases), and *Chin Kuei Yao Lueh* (Summaries of Household Remedies).

THE CAUSES OF STAGNANT BLOOD

1. Chronic inflammation
2. Fever
3. Circulatory disorders
4. Liver dysfunctions
5. Hormonal imbalance
6. High blood lipids
7. Food poisons
8. Hereditary, from mother
9. During and following menopause and childbirth
10. Gynecological diseases
11. Injuries or lack of exercise

In the 1940s, a series of studies by Dr. M.H. Knisely at the University of Chicago corroborated the theory of stagnated blood. He used the term “sludged blood,” meaning the coagulation of red blood cells in the blood vessels. The blood stagnation theory has enabled Chinese medicine to create many effective therapeutic methods not found in modern medicine for coping with chronic diseases.

SYMPTOMS AND SIGNS OF BLOOD STAGNATION

1. More commonly seen in women.
2. Acute pain in the lower abdomen.
3. Prone to hemorrhage.

4. Slow and weak arterial pulses.
5. During physical examination, the doctor asks the patient to lie down on his or her back with legs outstretched. Using index, middle, and ring fingers the doctor lightly palpates the left lower abdomen. If there is blood stagnation, the patient will feel intense pain when the area is palpated and will respond immediately by bending his or her knees.

WATER DISEASE

Many diseases are caused by disturbances in water metabolism—an imbalance in the circulation of bodily fluids or abnormal distribution of water throughout the body. They include:

1. Bronchitis
2. Pneumonia
3. Pleurisy
4. Nephrosis
5. Cystitis

According to TCM theory, kidney malfunctions cause body fluid retention, resulting in water intoxication, nephritis, kidney atrophy, and uremia. There are different kinds of water retention problems:

1. Sputum Drink—Water stagnation within the stomach is called “tan yi (sputum drink).”
2. Branch Drink—Fluid stagnation in the bronchi is called “chih yin” (branch drink).
3. Overflow Drink—Edema due to kidney diseases is called “yi yi (overflow drink).”
4. Phlegm—Phlegm is considered concentrated water and causes water problems.

SIGNS AND SYMPTOMS OF WATER STAGNATION

1. Puffy face
2. Heart disease

3. Edema of the lower parts of the body, legs, and feet
4. Pleurisy
5. Gurgling sounds in the stomach

SIGNS AND SYMPTOMS OF WATER INTOXICATION

1. Vertigo
2. Ringing in the ears
3. Headache
4. Excessive sweating
5. Diminished sweating or a complete absence of sweating (anhidrosis)
6. Excessive mucus secretion
7. Rheumatism
8. Frequent or insufficient urination
9. Cardiac palpitation
10. Pounding heartbeat
11. Heavy feeling in the head

2-3: Qi REGULATING HERBAL FORMULAS

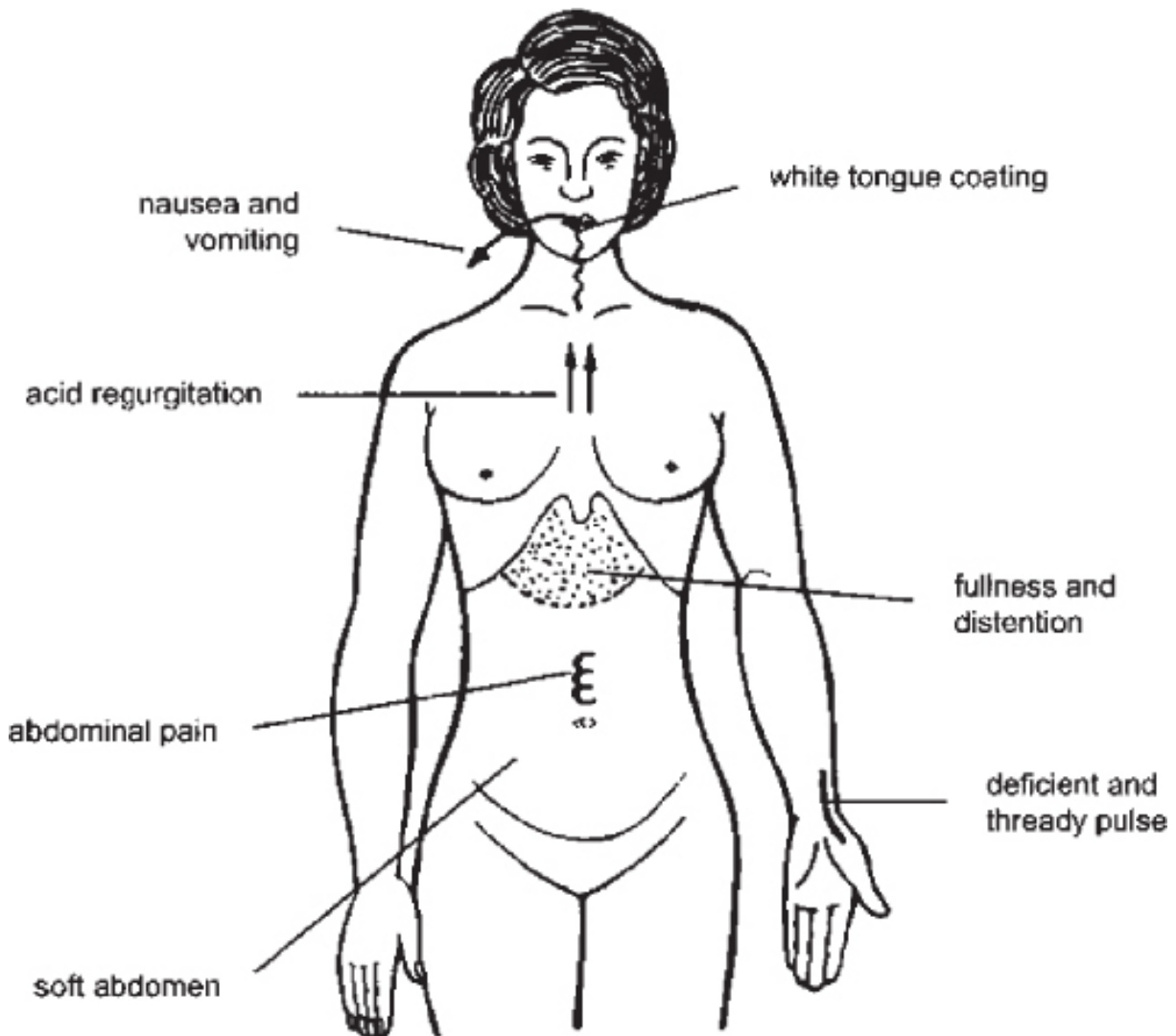
There are quite a few herbal formulas that possess Qi regulating effects. For example:

Cardamom and Fennel Formula (An Zhong San 安中散)

It is an interior-chill conformation formula with cinnamon, licorice, corydalis, galanga, oyster shell, cardamom, and fennel in it.

1. Corydalis is known to relieve pain under the rib cage.
2. Galanga has a similar effect as raw ginger.
3. Oyster shell has a harmonizing effect and can neutralize excess stomach

acid.

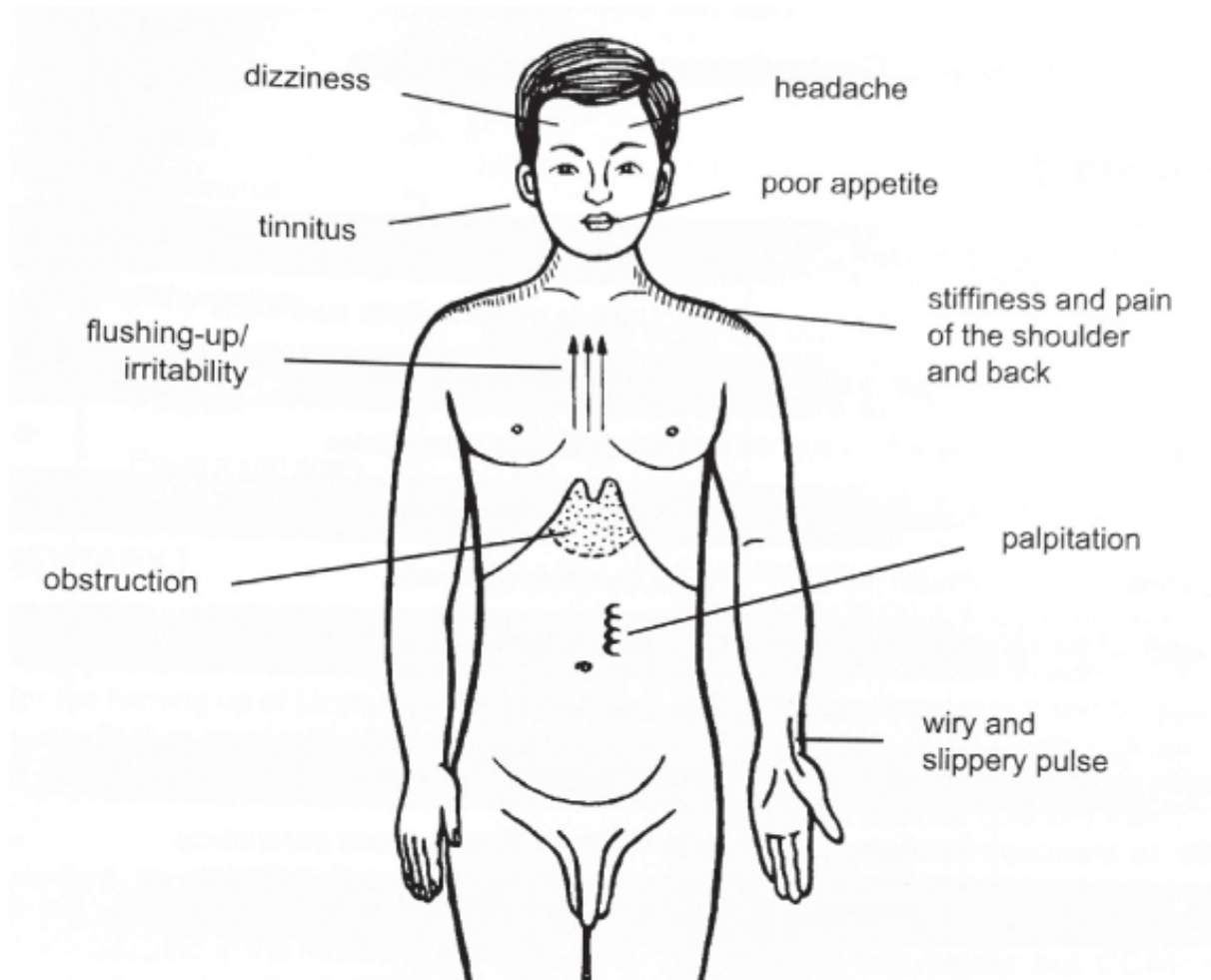


Gambir Formula (Gou Teng San 鉤藤散)

It is an interior-heat conformation formula with licorice, gypsum, ginseng, pinellia, ophiopogon, gambir, chrysanthemum, siler, citrus, hoelen, and raw ginger.

1. Gambir is both a sedative and an antispasmodic agent. It also lowers blood pressure and softens the cerebral arteries.
2. Siler and chrysanthemum ease headaches and nervous tension.
3. Chrysanthemum eases blood congestion in the eyes and brain, as well as lowers blood pressure.

4. Hoelen, in conjunction with pinellia, ginger, and citrus, has the effect expelling stagnant water, considered by Chinese physicians to responsible for dizziness.

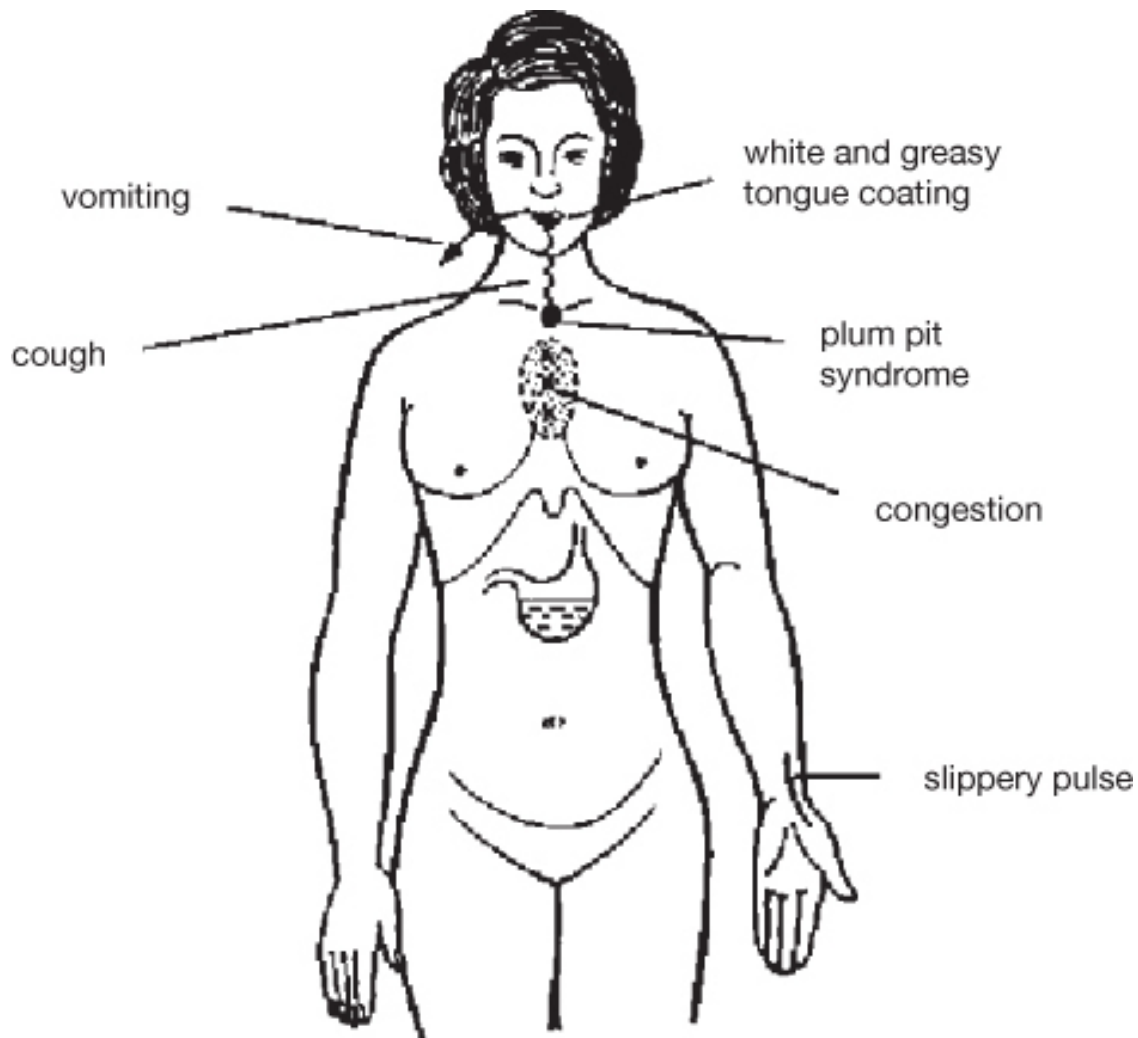


Pinellia and Magnolia Combination (Ban Xia Hou Pu Tang 半夏厚朴湯)

The ingredients of this formula are pinellia, magnolia, hoelen, raw ginger, and perilla.

1. Both pinellia and magnolia have descending effects.
2. Hoelen and perilla are also descending herbs that have a descending sedative effect.
3. All ingredients are drying, all but the neutral hoelen are warming, and but perilla and magnolia are tonics. Therefore the formula is used to treat

dampness, chill, and weak conformations.



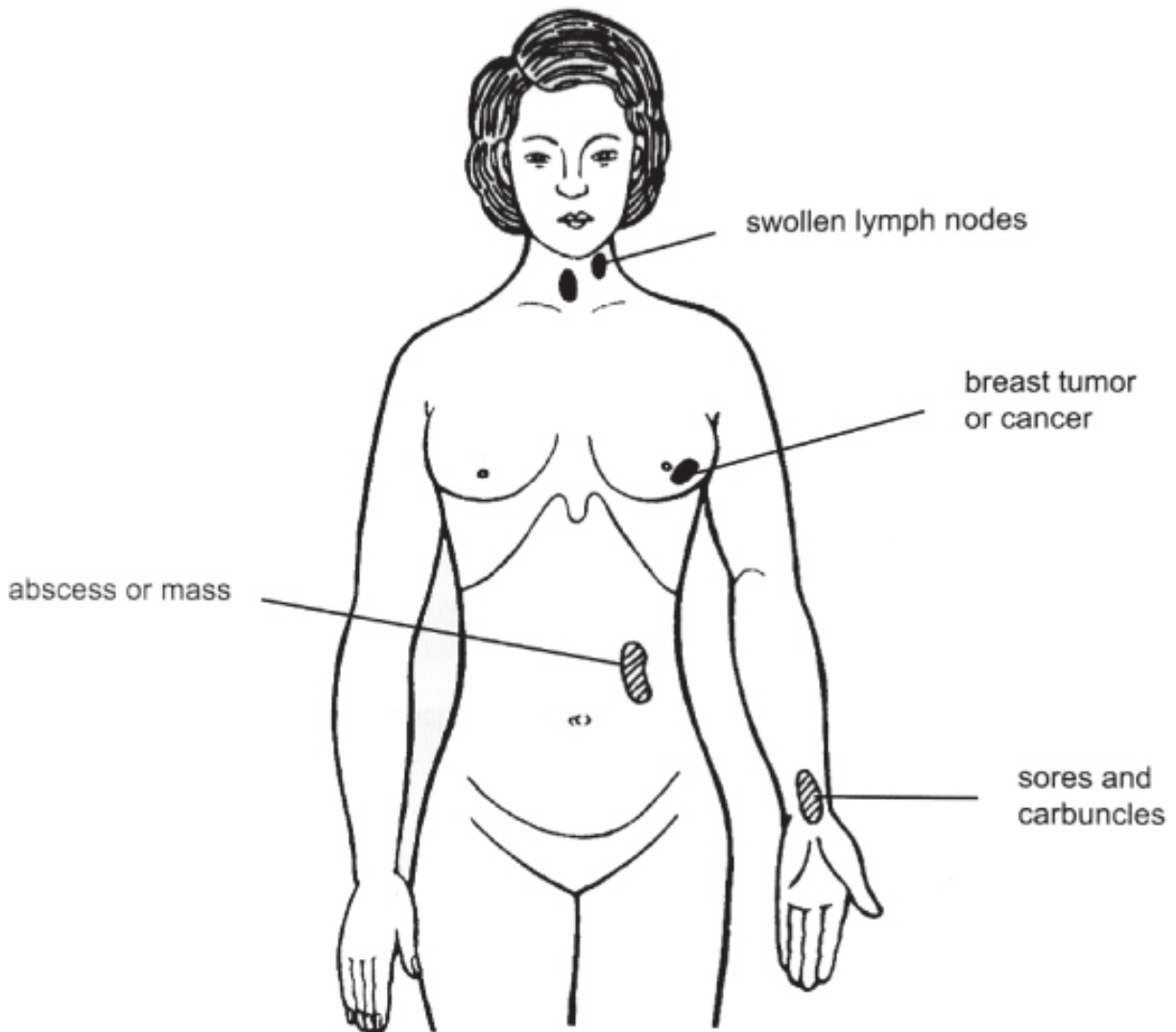
Tang-kuei Sixteen Herb Combination (Shi Liu Wei Liu Qi Yin 十六味流氣飲)

This formula contains tang-kuei, cnidium, paeonia, cinnamon, ginseng, platycodon, angelica, astragalus, saussurea, lindera, licorice, chih-ko, areca seed, perilla, siler, and magnolia bark.

1. Ginseng, astragalus, and licorice supplement Qi.
2. Tang-kuei, paeonia, and cnidium nourish the blood.
3. Saussurea, areca seed, chih-ko, magnolia bark, and perilla regulate Qi.
4. Lindera and siler relieve stagnant Qi.

5. Cinnamon and angelica disperse stagnant blood.

6. Platycodon disperses pus and heightens the effectiveness of the other herb



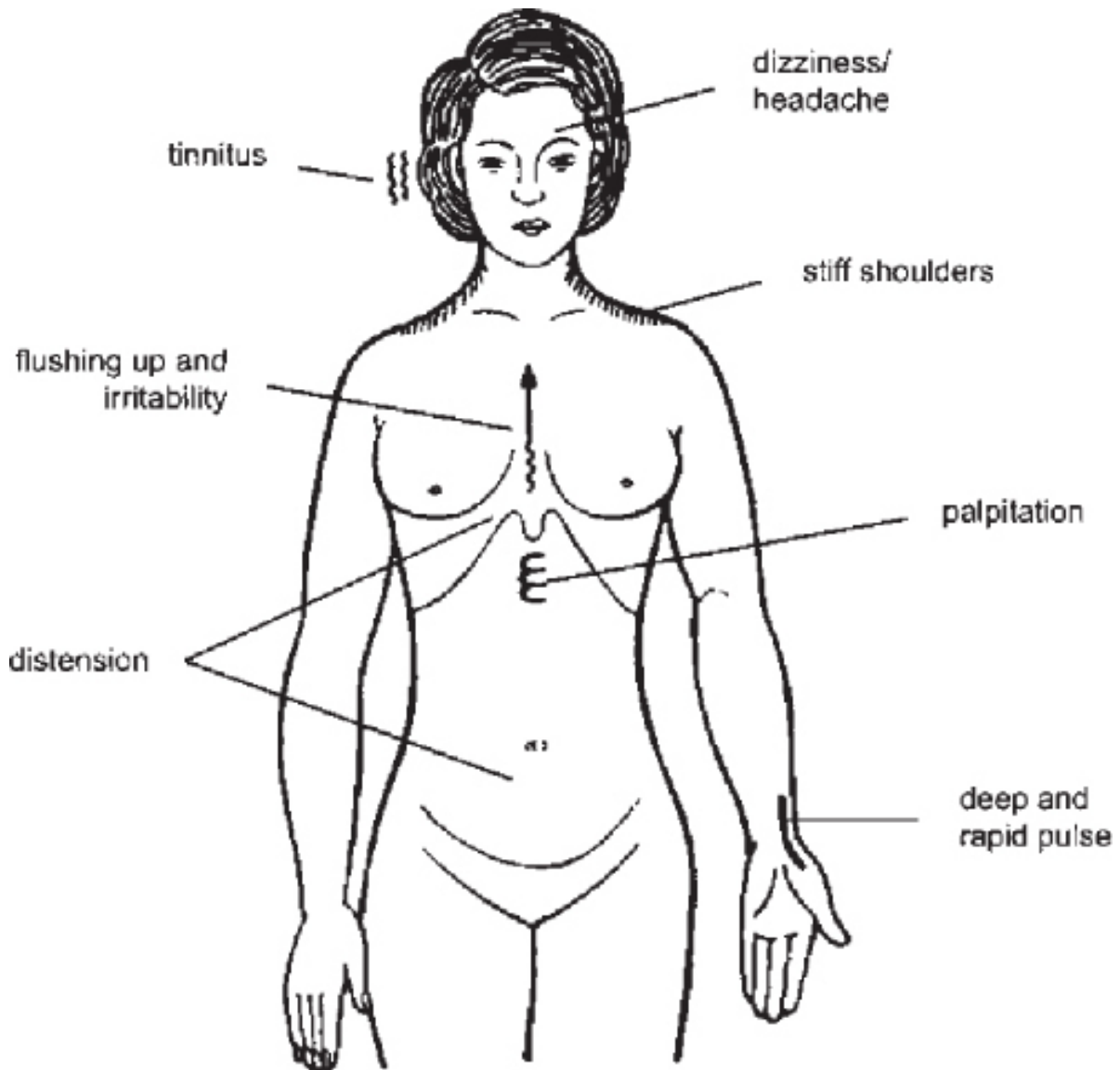
Tang-kuei and Cyperus Formula (Nu Shen San 女神散)

The ingredients of the formula are ginseng, atractylodes, licorice, scute, coptis, tang-kuei, cnidium, cinnamon, cyperus, areca seed, saussurea, clove, and rhubarb.

1. Coptis and scute relieve subcardiac distention.
2. Tang-kuei and cnidium improve blood circulation.

3. Cyperus, saussurea, and clove are fragrant stomachics that improve circulation.
4. Cinnamon is also a fragrant stomachic. But in this formula, it is used to relieve flushing up and stroke-related symptoms.
5. Areca seed also has stomachic properties.
6. Cyperus promotes Qi circulation, regulates menstruation, and assists tang-kuei and cnidium functions.

It is often used for insomnia with menopausal symptoms, such as tidal fever with flushed face, paroxysmal fever with sweating, tension, anxiety, depression, emotional irritability, and bad temper.



2-4: BLOOD REGULATING HERBAL FORMULAS

BLOOD STAGNATION RELATED LOW BACK PAIN

Stagnant blood is usually diagnosed by feeling a palpable mass in the patient's lower abdomen, particularly on the lower left-hand side. It also manifests by sharp pains emanating from that region, or by dysmenorrhea or difficult menstrual periods.

Low back pain due to blood stagnation is characterized by:

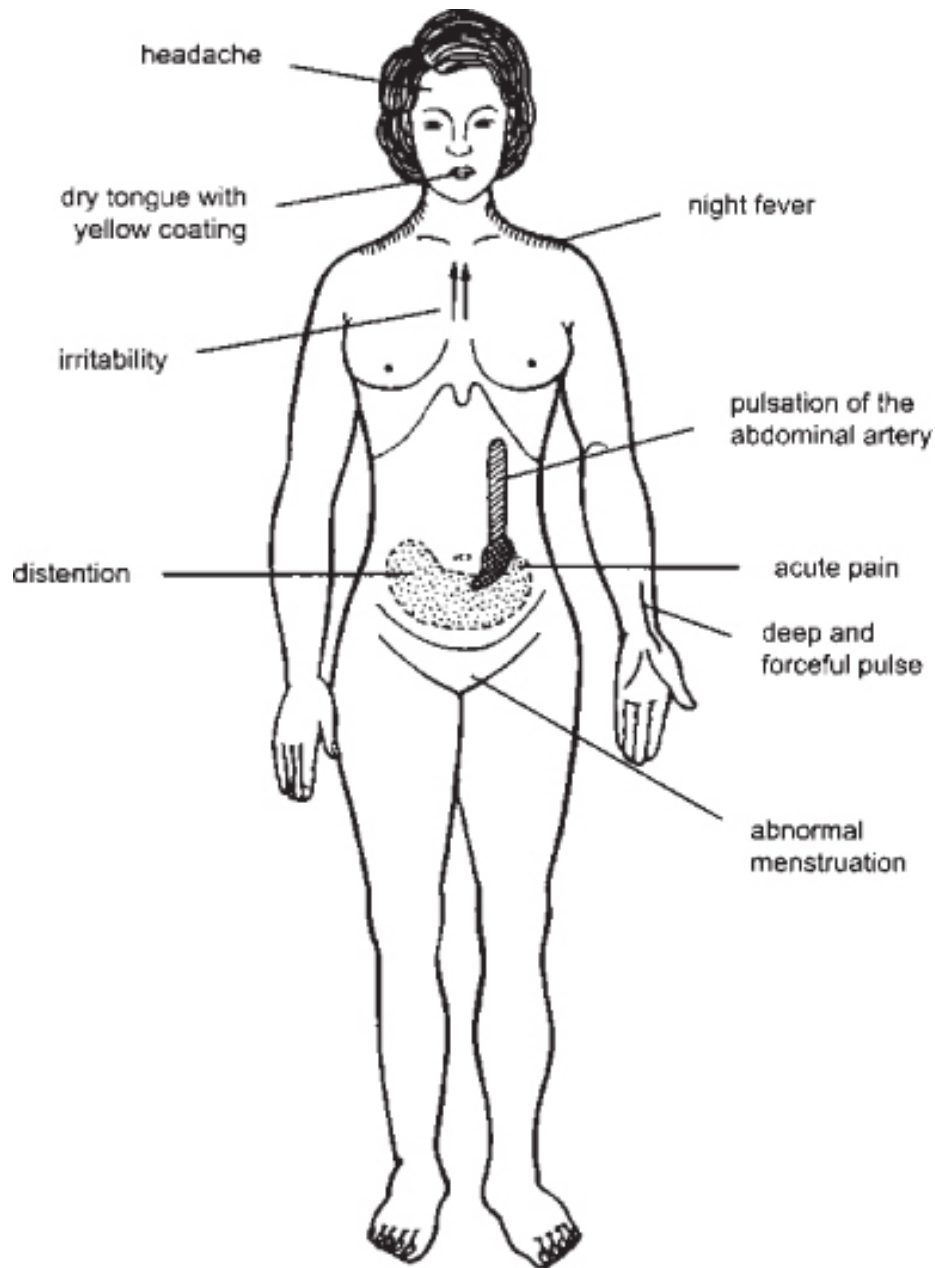
1. A chronic, fixed, stabbing pain in the lower back that is eased after gen activity and is aggravated by pressure and muscle tightness.
2. A purple tongue.
3. String-taut and hesitant arterial pulses.
4. Often treated by tang-kuei and Cnidium, peach seed, peony root, carthamus, or sappan wood containing formulas.

COMMONLY USED BLOOD REGULATING HERBAL FORMULAS

Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)

The ingredients are rhubarb, mirabilium, licorice, persica, and cinnamon. Persica disperses stagnant blood and cinnamon subdues blood pressure, and both are dispersive herbs.

1. It is probably the most popular herbal formula for blood stasis.
2. It is often used in individuals with healthy complexions, abundant vitality but easily constipated.
3. This is used for women with difficult menstruation, especially the accompanied by emotional upheavals during menstrual periods.
4. It is also effective for blood stagnation caused by contusions, sprains, strains, and all other stagnant blood disorders.

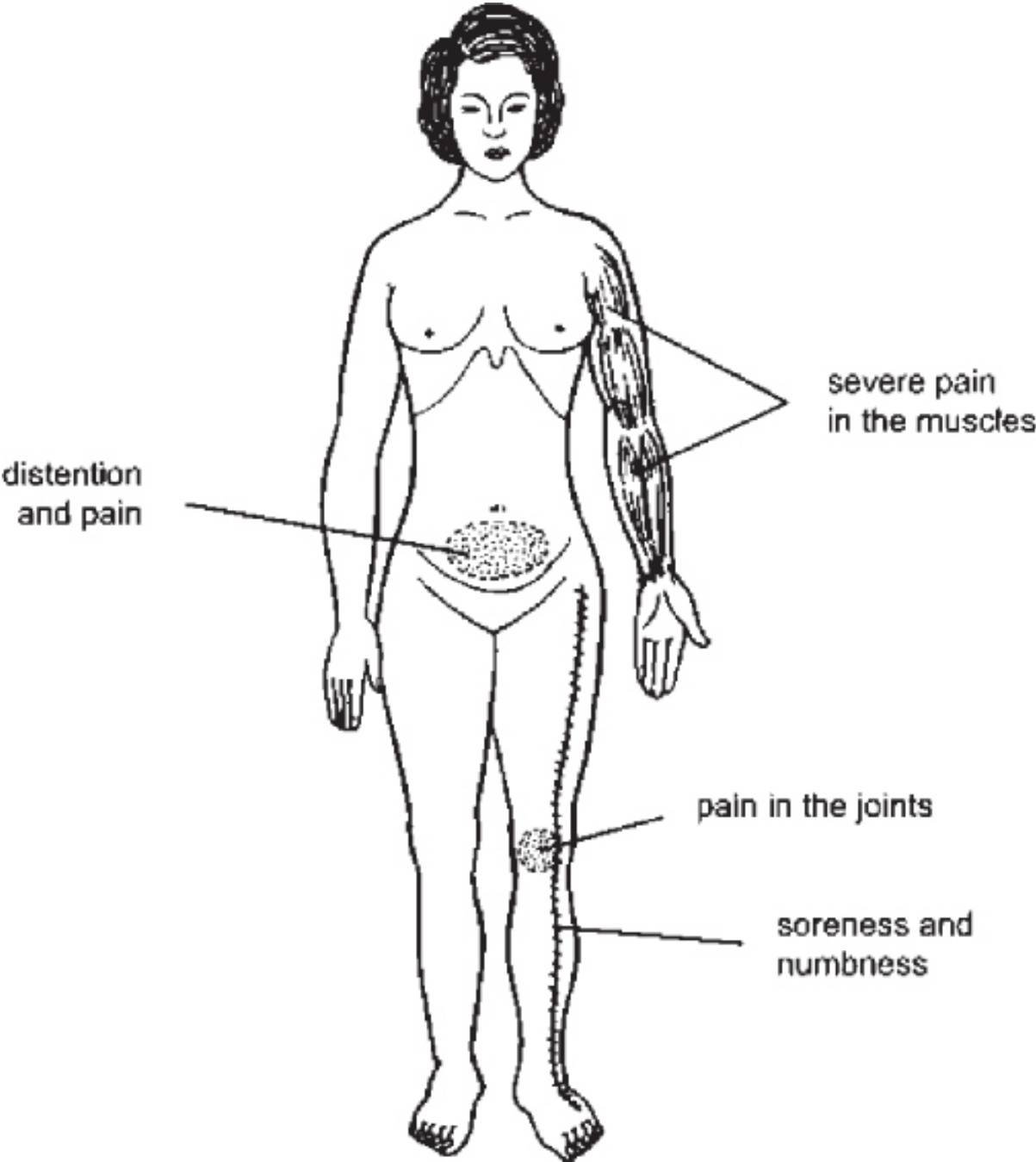


Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經活血湯)

The ingredients of this formula are tang-kuei, Cnidium, peony, rehmannia, atractylodes, hoelen, licorice, siler, chiang-huo, achyranthes, clematis, angelica, Stephania, persica, gentiana, raw ginger, and citrus. Although it is well known that atractylodes and hoelen often appear together in formulas for treating damp conformations, achyranthes, clematis, angelica, Stephania,

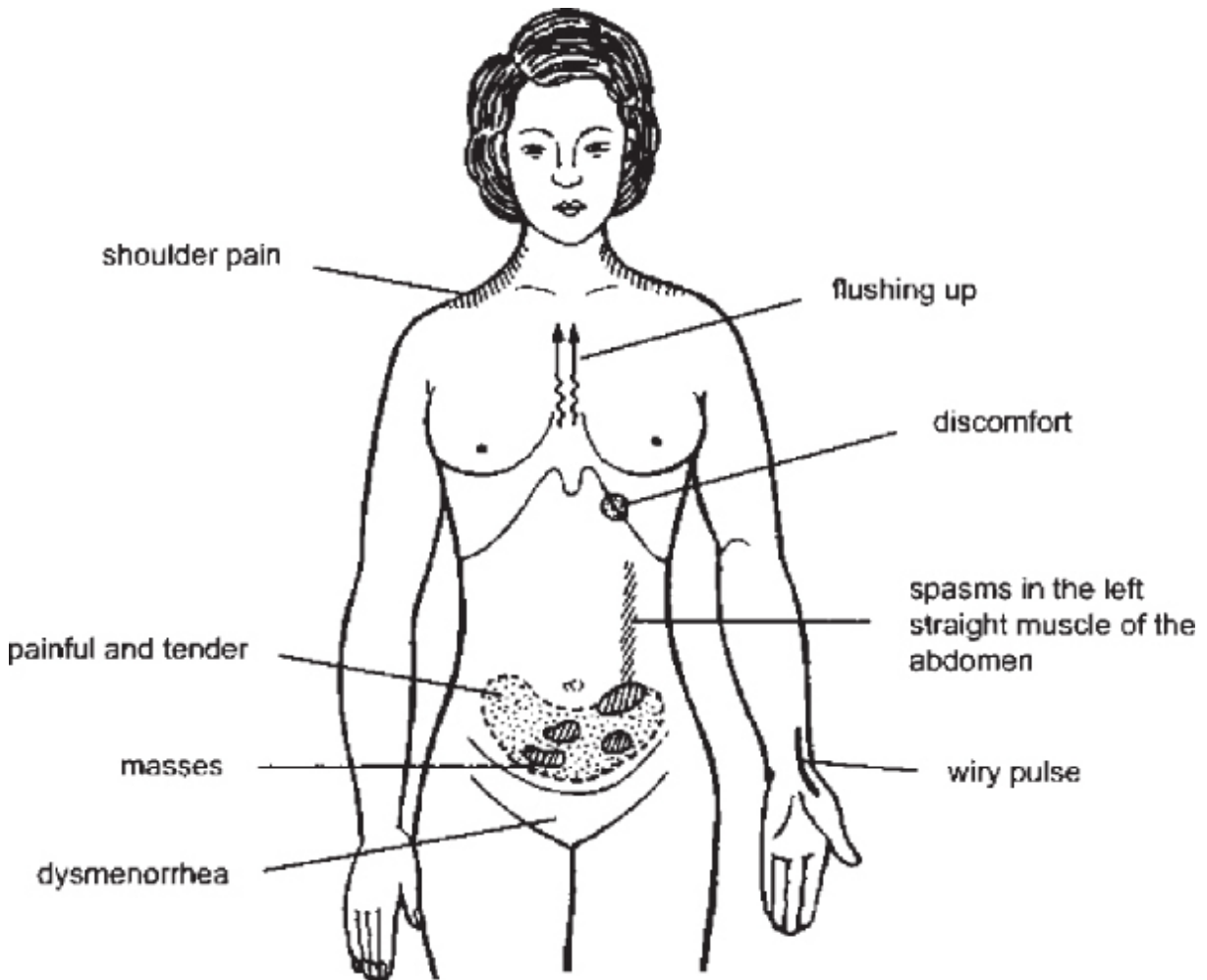
gentiana, raw ginger, and citrus also dispel dampness. The herbs listed from siler to citrus are, with the exception of gentiana, dispersives. Siler, chang-huo, clematis, and angelica, all analgesics, supplement the more famous painkilling effects of peony.

This formula is often used for those with a dark face due to dilation of capillaries and other stagnant blood symptoms.



Cinnamon and Hoelen Formula (Gui Zhi Fu Ling Wan 桂枝茯苓丸)

The ingredients are cinnamon, peony, hoelen, persica, and moutan. Persica and moutan disperse stagnancy, while hoelen is a diuretic and sedative. Cinnamon subdues flushing up, and peony acts as an analgesic. This is an effective treatment for the pain, irritability, and stroke and hypertensive symptoms caused by stagnant blood. It can ease abdominal pain and reduce signs and symptoms of blood stagnation or “flushing up” in the face.

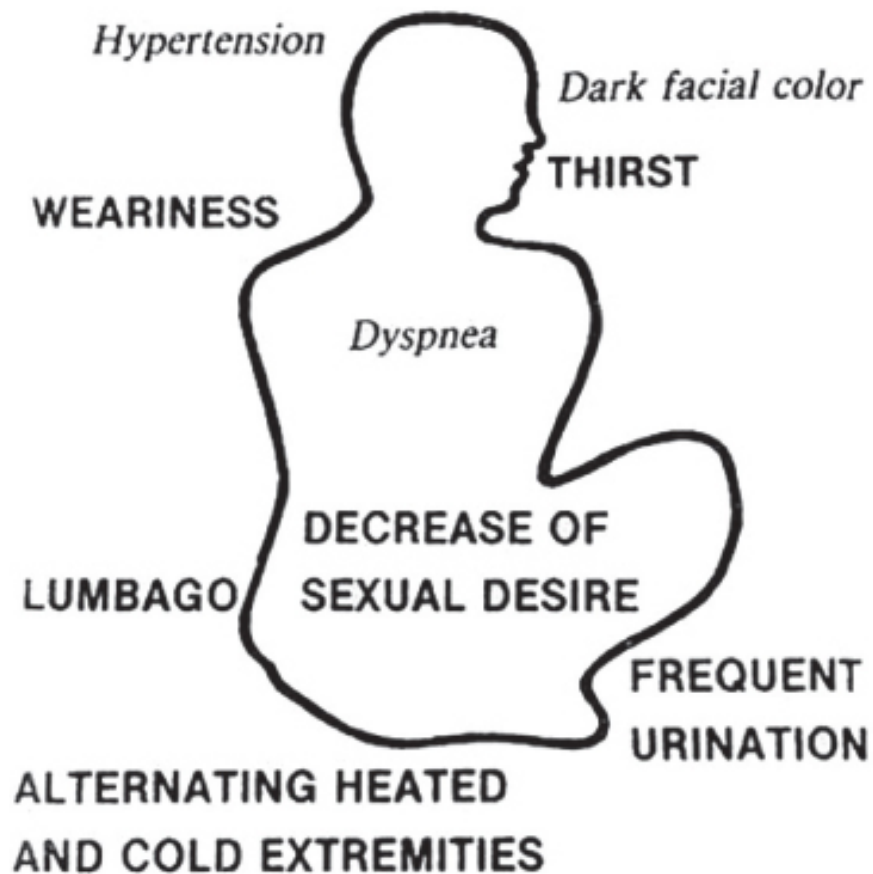


Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸)

The ingredients are steamed rehmannia, dioscorea, cornus, hoelen, alisma, moutan, cinnamon, and aconite.

1. Steamed rehmannia, dioscorea, and cornus are ascending tonics with strong nutritive qualities that are also warming and moistening.
2. Hoelen and alisma are drying herbs that are added to remove local accumulations of stagnant water.
3. Moutan works with the rehmannia to improve blood circulation and remove obstructions.
4. Aconite is one of the most warming herbs, and all formulas containing it are used exclusively for treating chill conformations.

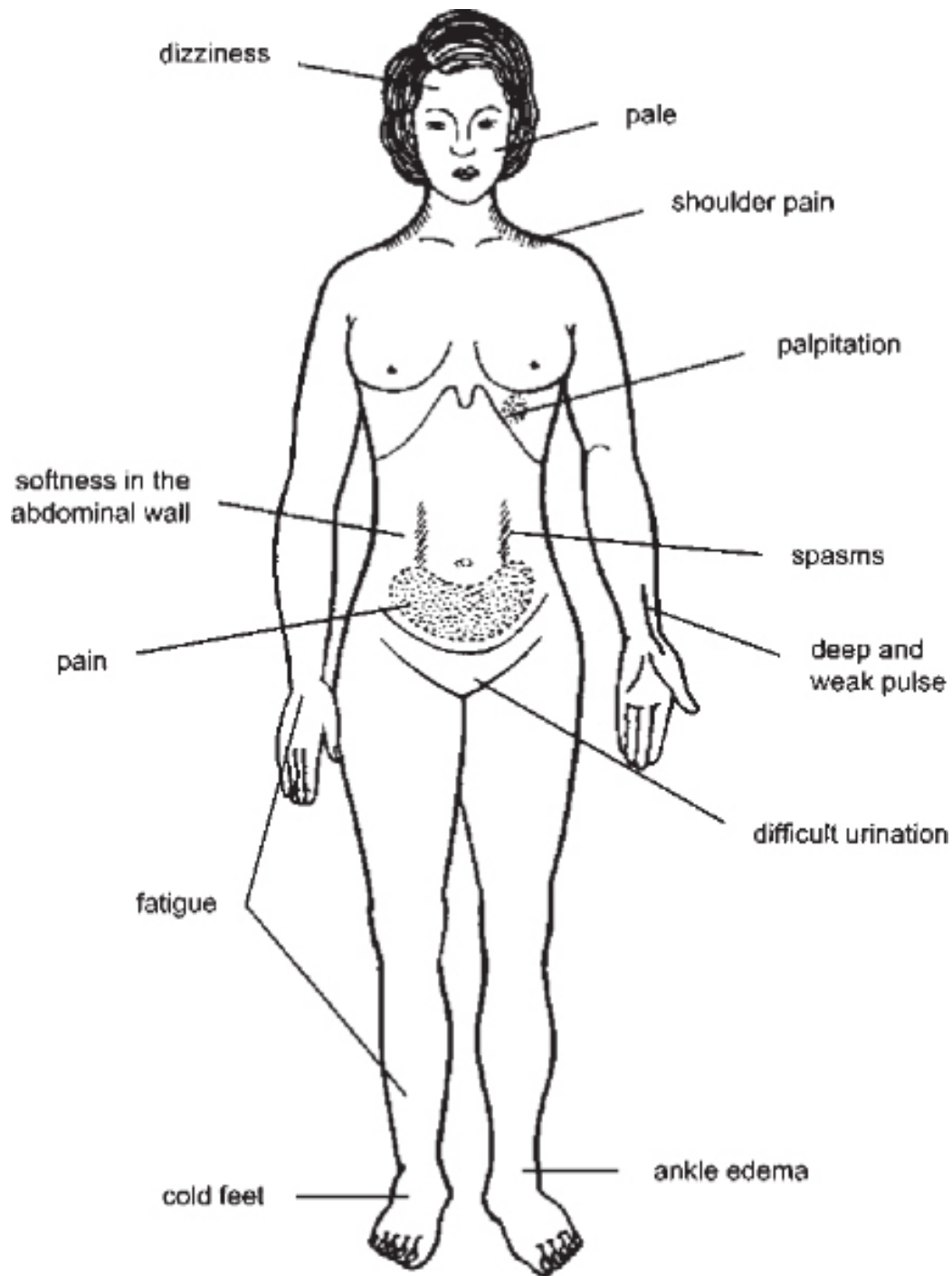
The basic indicator for this formula is that a patient feels some degree of coldness in the hands and feet. As aconite is also an analgesic, it lessens pain in the hands, feet, and lumbar region. It is a very popular formula for symptoms of kidney deficiency, especially in the elderly.



Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散)

The ingredients of this formula are tang-kuei, Cnidium, peony, atractylodes, hoelen, and alisma.

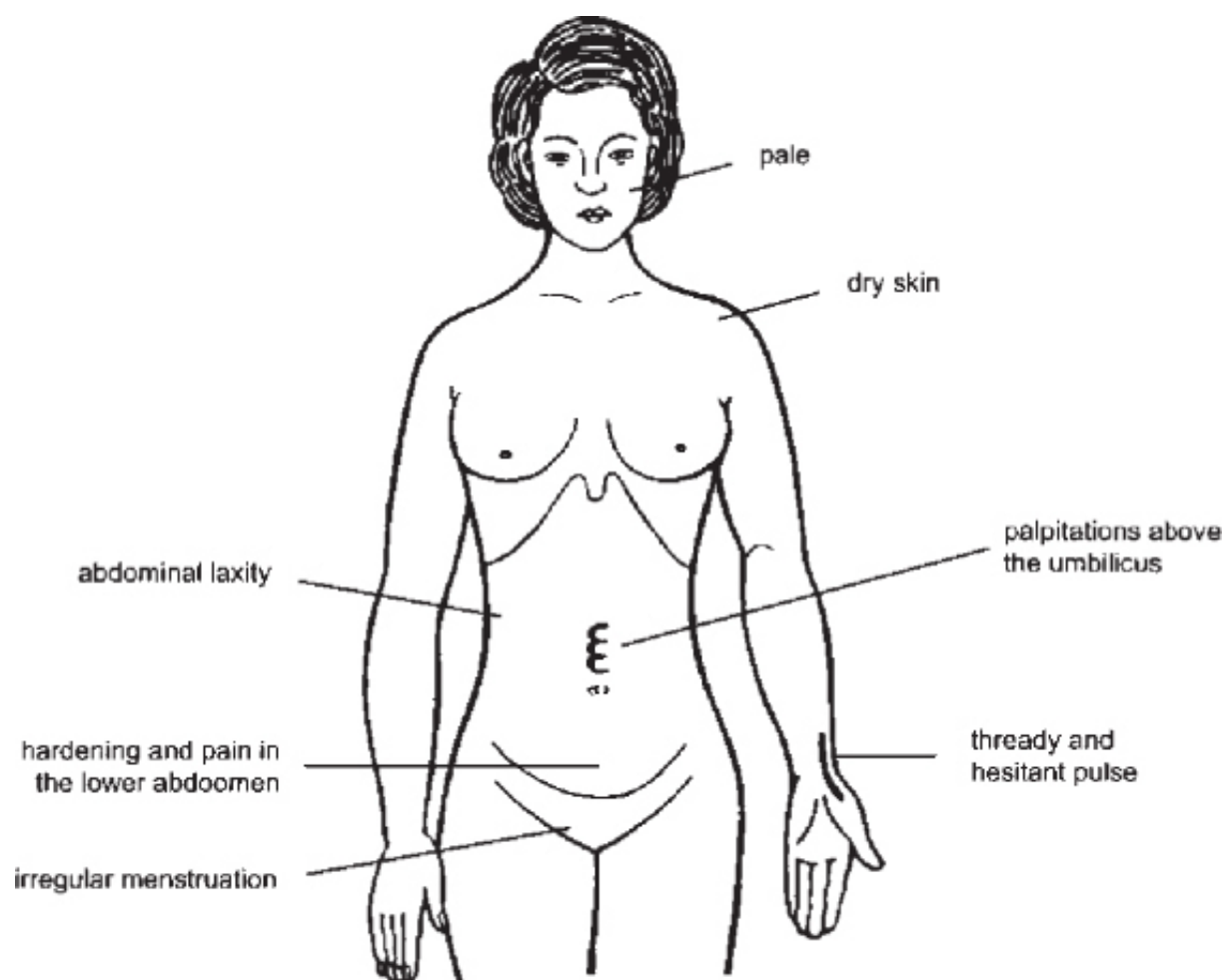
1. Tang-kuei and Cnidium are warming blood-regulators that adjust and control the blood, especially in menstrual conditions.
2. Peony is an analgesic and antispasmodic. It eases menstrual pains.
3. Apart from alisma, the ingredients are warming tonics, which result in a formula that is a blood-regulator for weak-chill-damp conformations.
4. It helps with anemia as well.



Tang-kuei Four Combination (Si Wu Tang 四物湯)

The ingredients are tang-kuei, Cnidium, peony, and rehmannia. All ingredients in **Tang-kuei Four Combination** are tonics, and all except peony are warming herbs. However, it should be kept in mind that the rehmannia

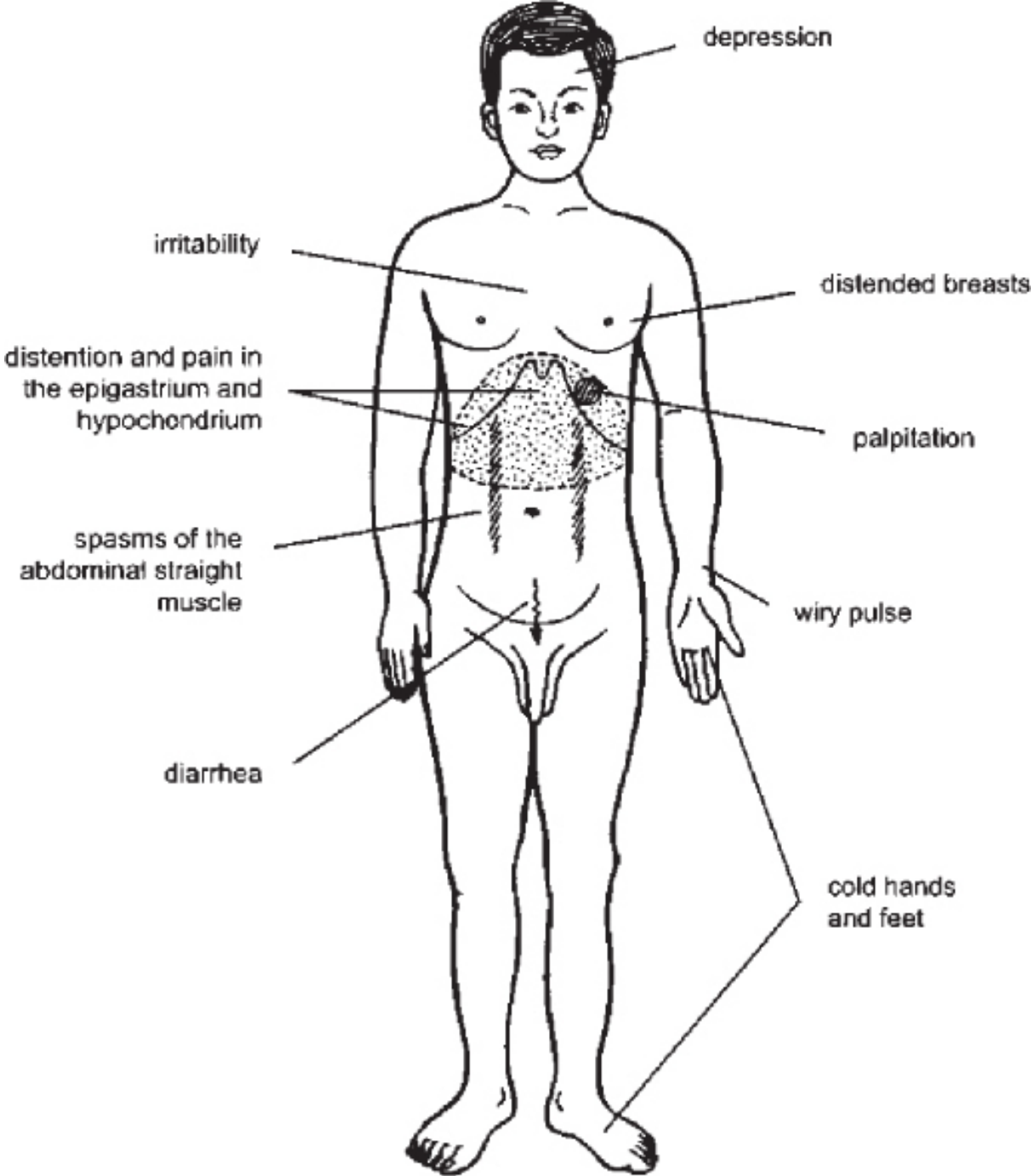
used in **Tang-kuei Four Combination** is steamed (raw rehmannia is cold-natured, steamed rehmannia is warming, and dried rehmannia is slightly cooling). All of the ingredients are moistening, and all except peony are blood-regulating herbs. The **Tang-kuei Four Combination** is a great general blood and whole body tonic, as it removes blood stagnancy and at the same time strengthens the body.



2-5: HERBAL FORMULAS FOR PAIN DUE TO BLOOD STASIS

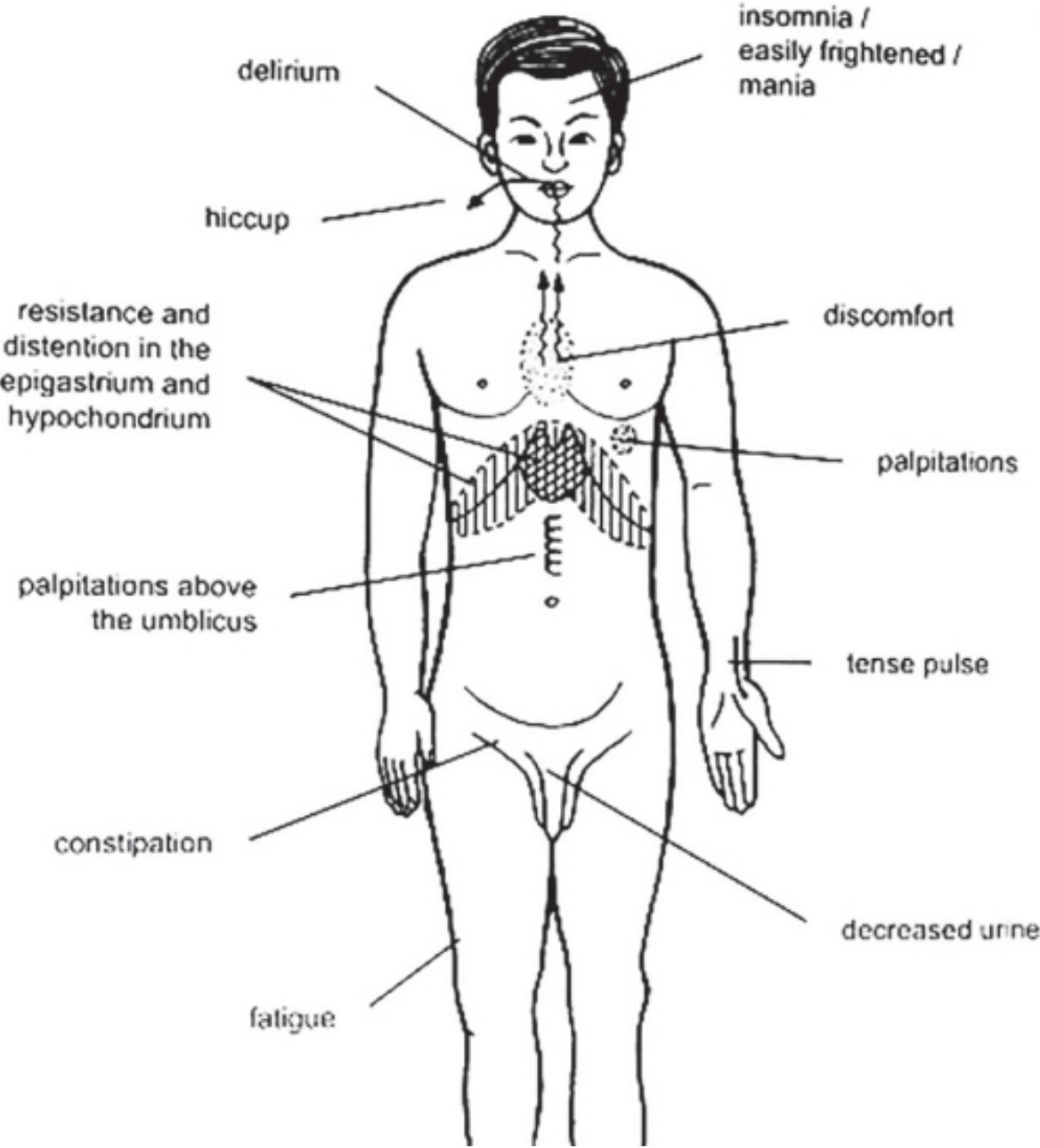
Bupleurum and Chih-shih Formula (Si Ni San 四逆散)

The ingredients are bupleurum, peony, chih-shih, and licorice. This is an extremely valuable formula for the treatment of gallstones and gallbladder inflammations.



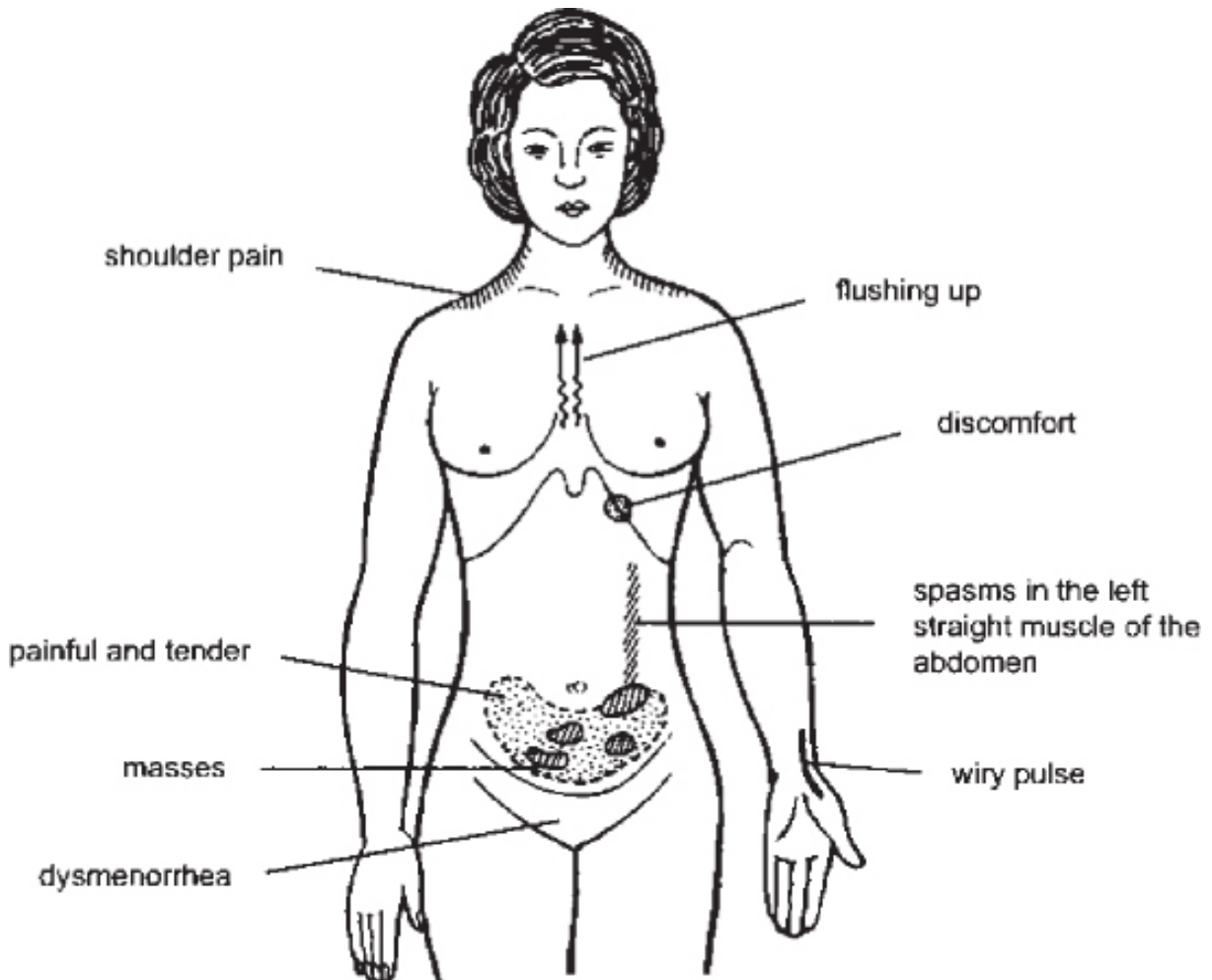
Bupleurum and Dragon Bone Combination (Chai Hu Jia Long Gu Mu Li Tang 柴胡加龍骨牡蠣湯)

The ingredients are bupleurum, scute, pinellia, raw ginger, jujube, ginseng, cinnamon, hoelen, dragon bone, and oyster shell. Dragon bone and oyster shell are strong sedatives; cinnamon and hoelen ease hypertensive symptoms and can relieve palpitations in the umbilical area.

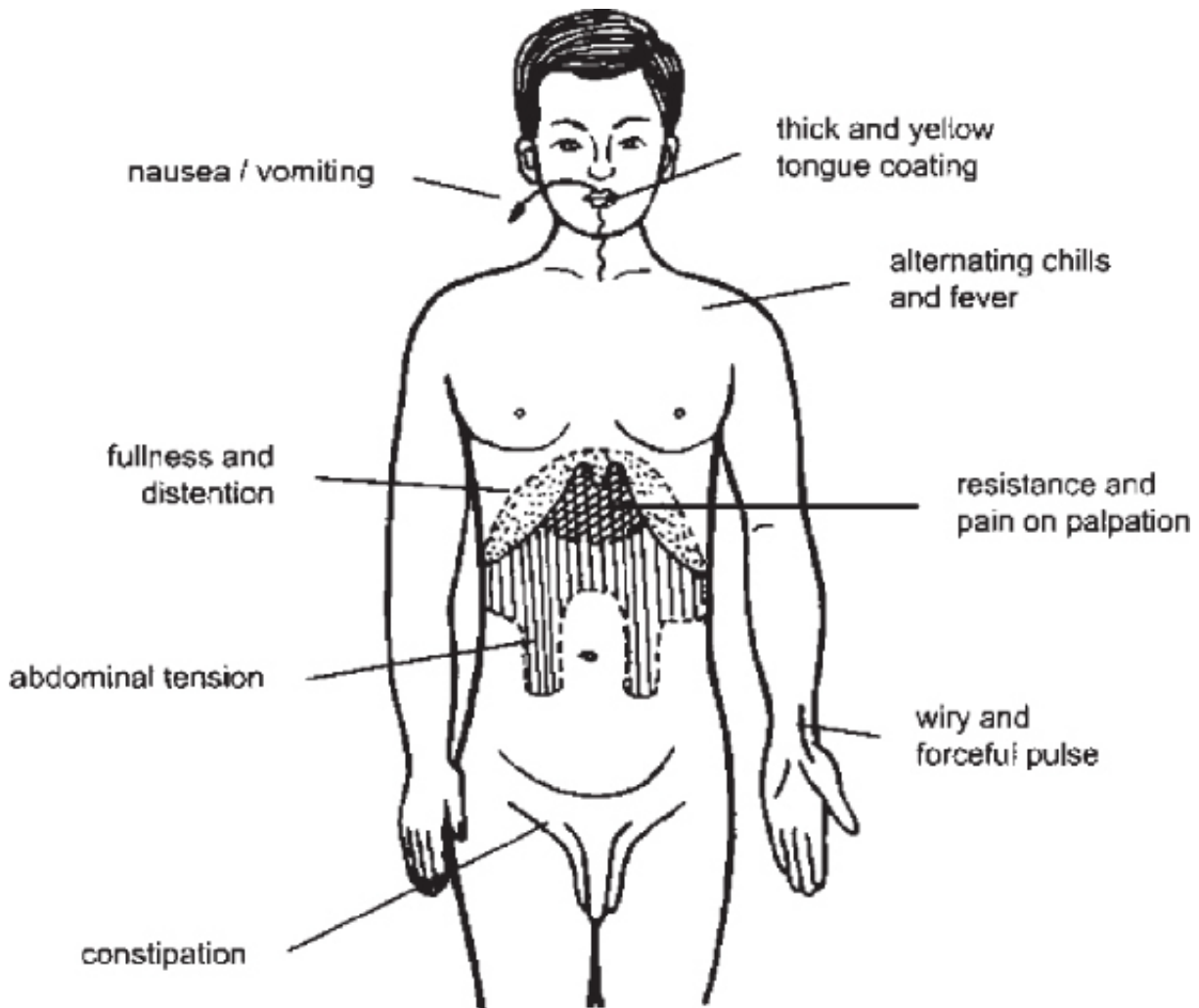


Cinnamon and Hoelen Formula (Gui Zhi Fu Ling Wan 桂枝茯苓丸)

The ingredients are cinnamon, peony, hoelen, persica, and moutan. Cinnamon subdues flushing up, and peony acts as an analgesic. This is an effective treatment for the pain, irritability, and stroke or hypertensive symptoms caused by stagnant blood.



Major Bupleurum Combination (Da Chai Hu Tang 大柴胡湯)



Major Siler Combination (Da Fang Feng Tang 大防風湯)

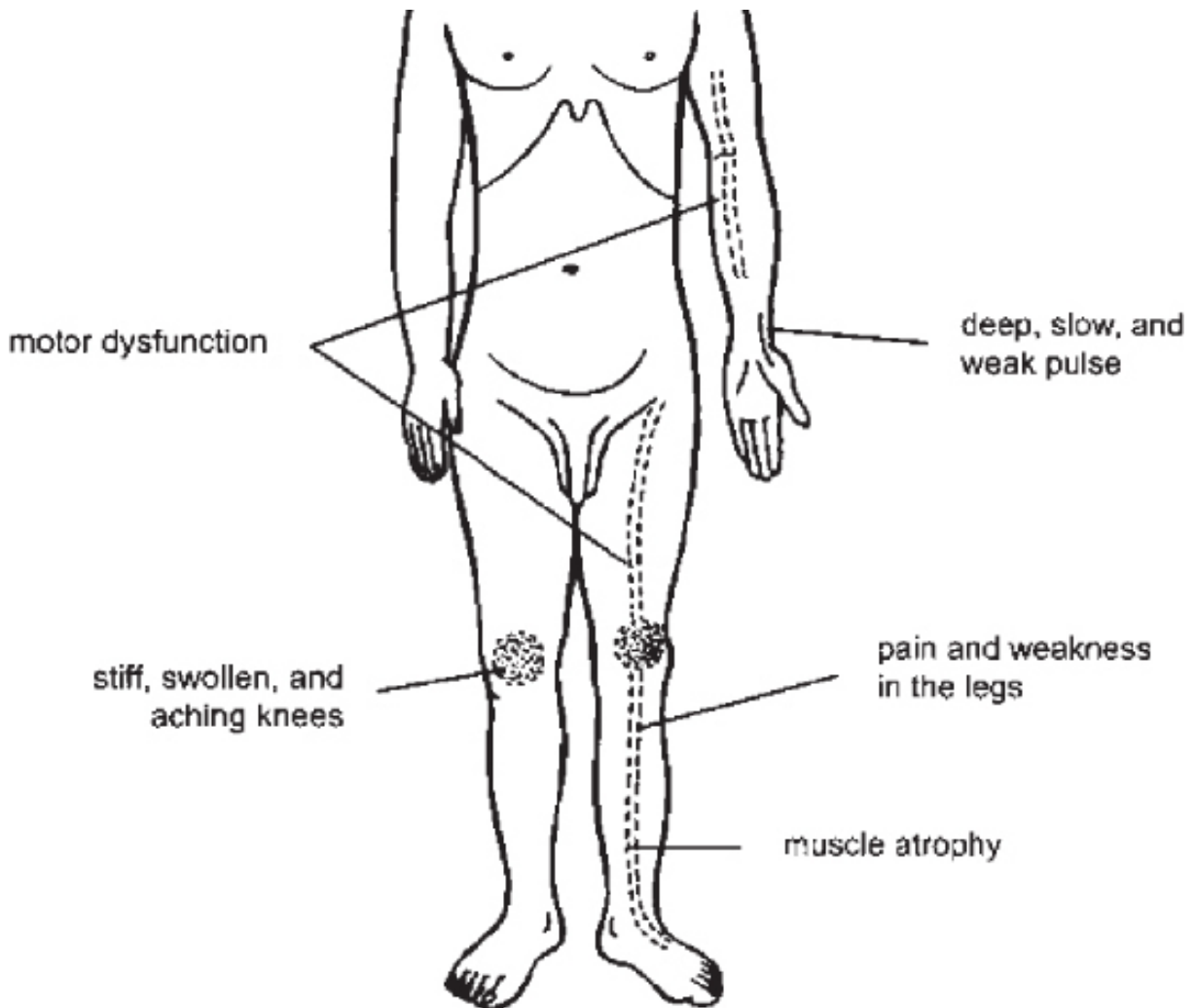
The ingredients are tang-kuei, Cnidium, peony, rehmannia, ginseng, atractylodes, licorice, raw ginger, jujube, astragalus, siler, chiang-huo, achyranthes, eucommia, and aconite.

Major Siler Combination (Da Fang Feng Tang 大防風湯) is a variant of **Ginseng and Tang-kuei Ten Combination (Shi Quan Da Bu Tang 十全大補湯)** from which cinnamon and hoelen have been deleted and siler, chiang-huo, achyranthes, eucommia, and aconite added.

1. Siler and chiang-huo are strong analgesics.
2. Achyranthes is a blood-regulator.

3. Eucommia and aconite have analgesic, as well as dispersive, effects.
4. Peony enhances the analgesic power of siler and chang-huo.

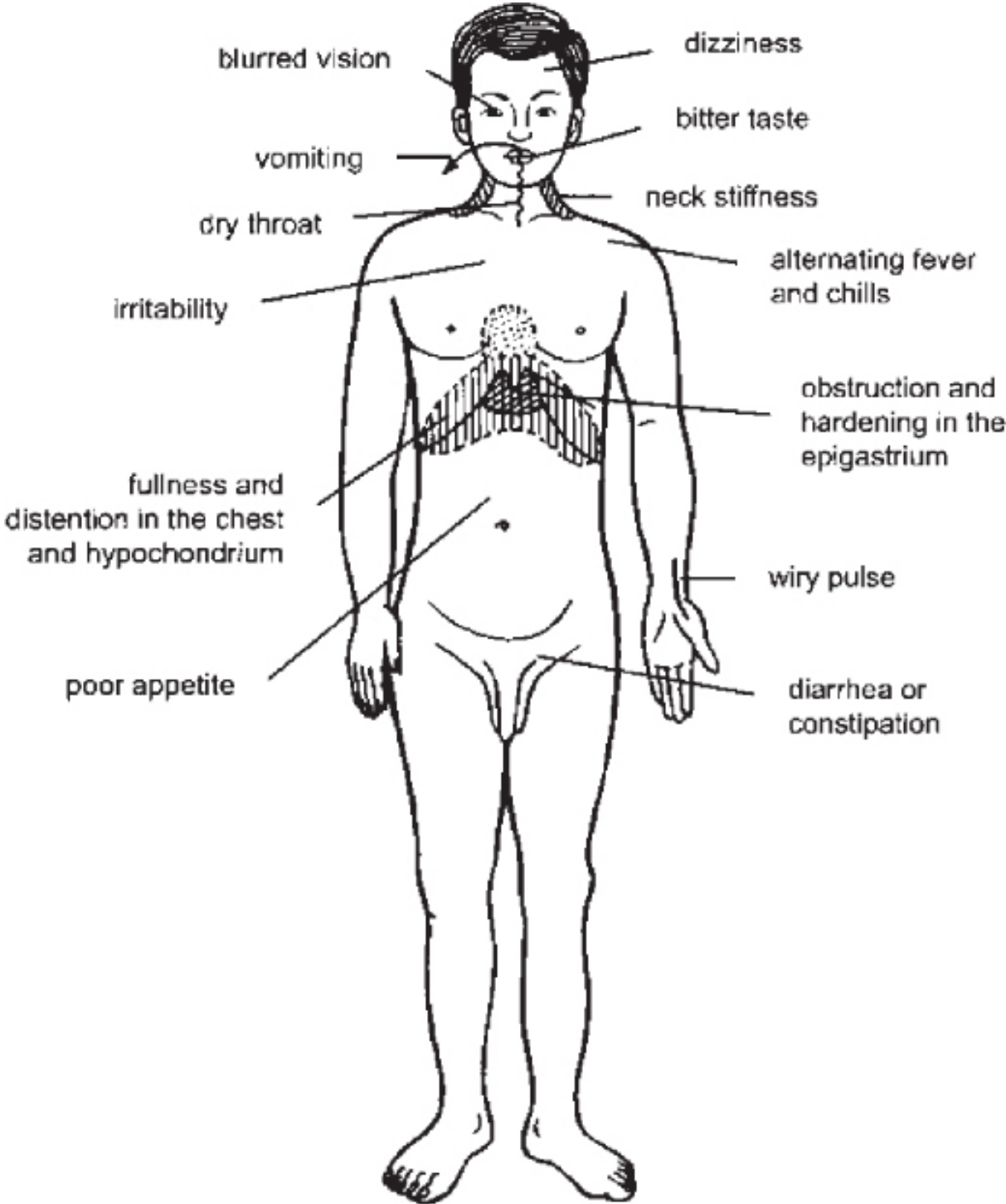
Major Siler Combination has the grand tonic effect of its parent formula, yet deadens pain better and is more dispersive. Because it contains aconite, it is even more suited to chill conformations than **Ginseng and Tang-kuei Ten Combination** .



Minor Bupleurum Combination (Xiao Chai Hu Tang 小柴胡湯)

The ingredients are bupleurum, scute, pinellia, raw ginger, jujube, ginseng, and licorice. This can be considered the basic **Bupleurum Formula (Yi Gan**

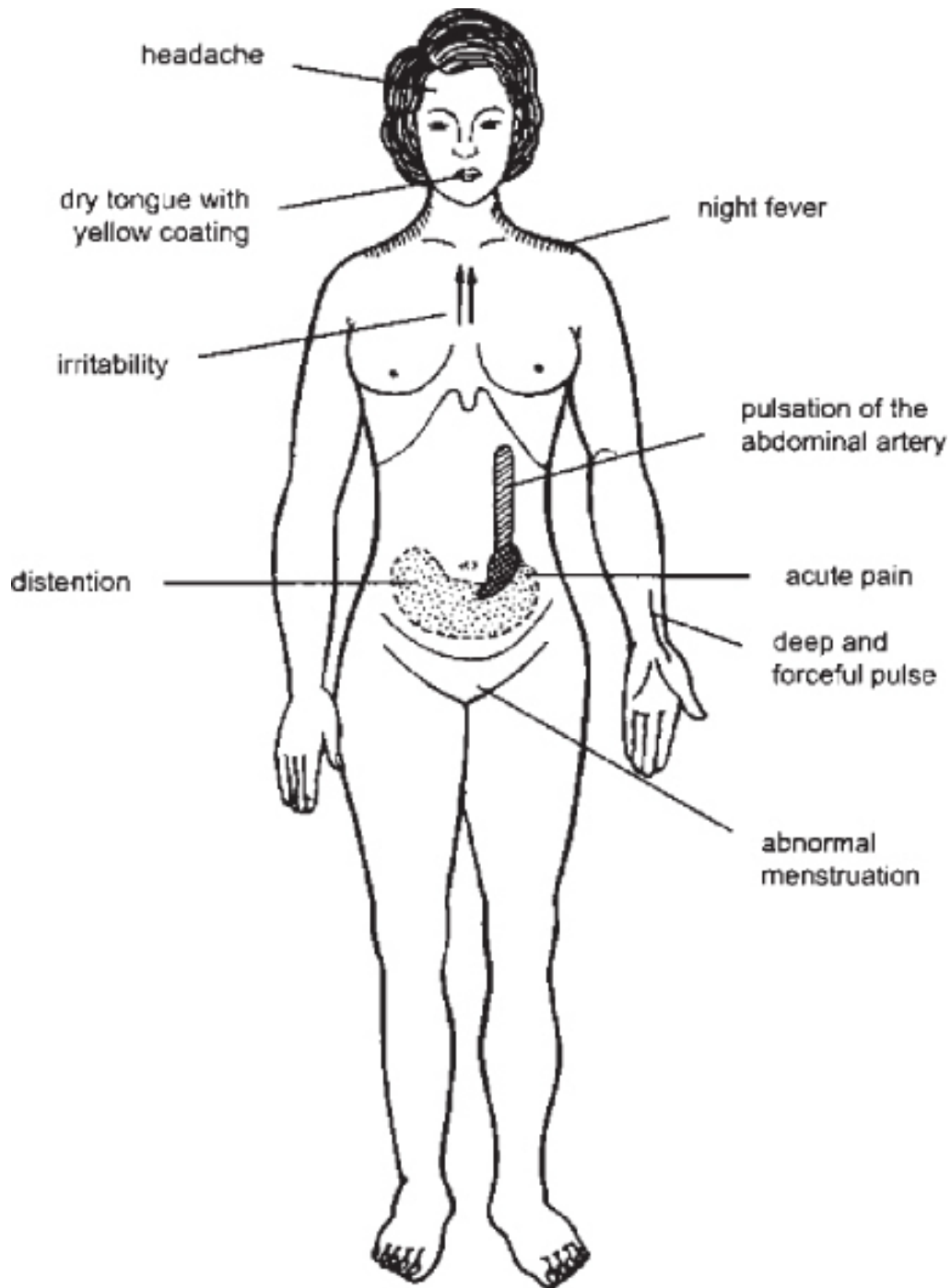
San 抑肝散), and with bupleurum as its main ingredient, its use is indicated by the presence of thoracocostal distress.



Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)

The ingredients are rhubarb, mirabilium, licorice, persica, and cinnamon.

1. Persica is a dispersive herb that disperses stagnant blood.
2. Cinnamon is also a dispersive herb that controls blood pressure.
- 3. Persica and Rhubarb Combination** is probably the most popular herb formula for blood stasis and is often used in individuals with heat complexions, abundant vitality, but easily constipated.
4. It is used for women with difficult menstruation, especially those accompanied by emotional upheavals during menstrual periods.
5. It is also effective for blood stagnation caused by contusions, sprains, strains, and all other stagnant blood disorders.

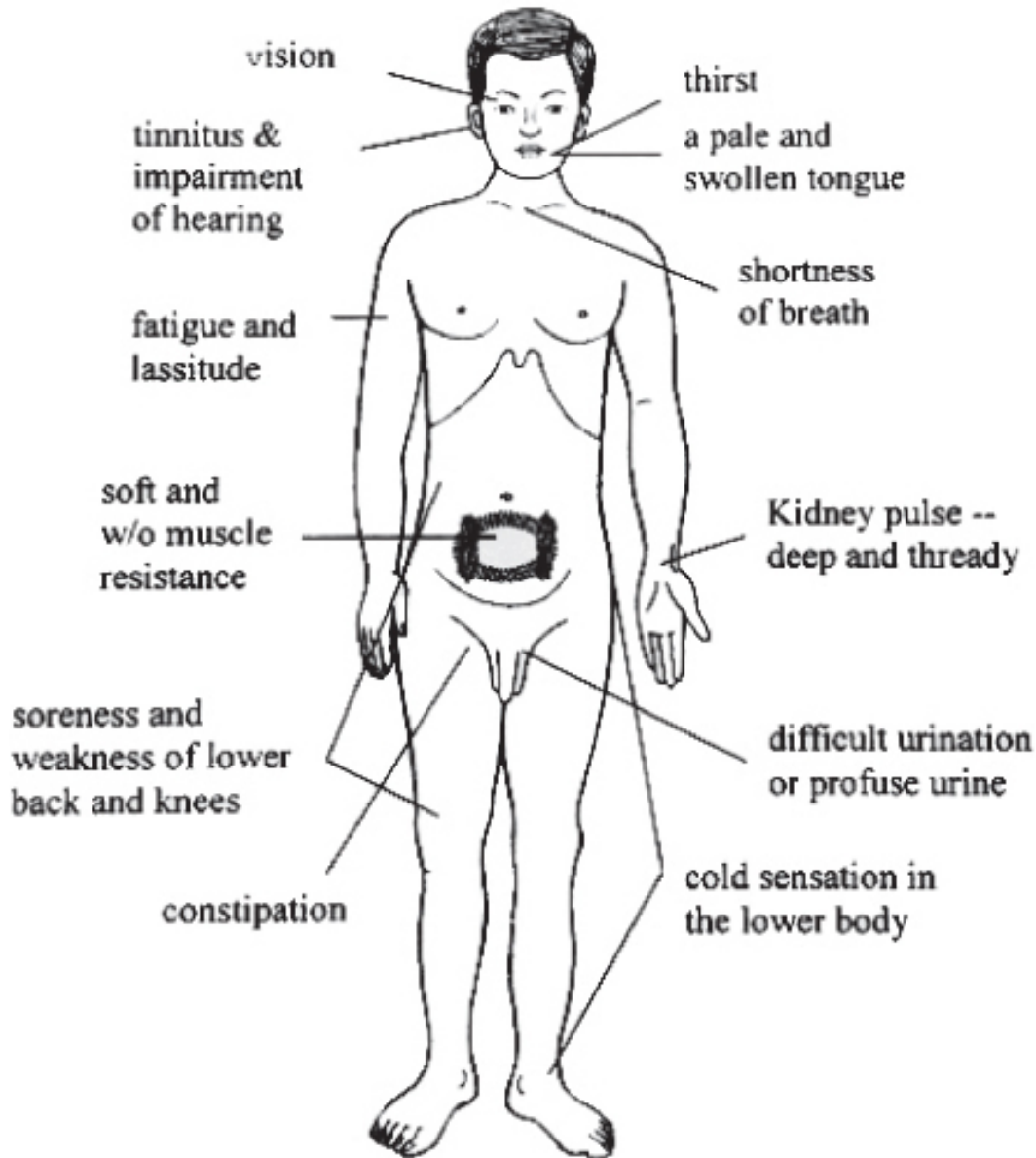


Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸)

The ingredients are steamed rehmannia, dioscorea, comus, hoelen, alisma, moutan, cinnamon, and aconite.

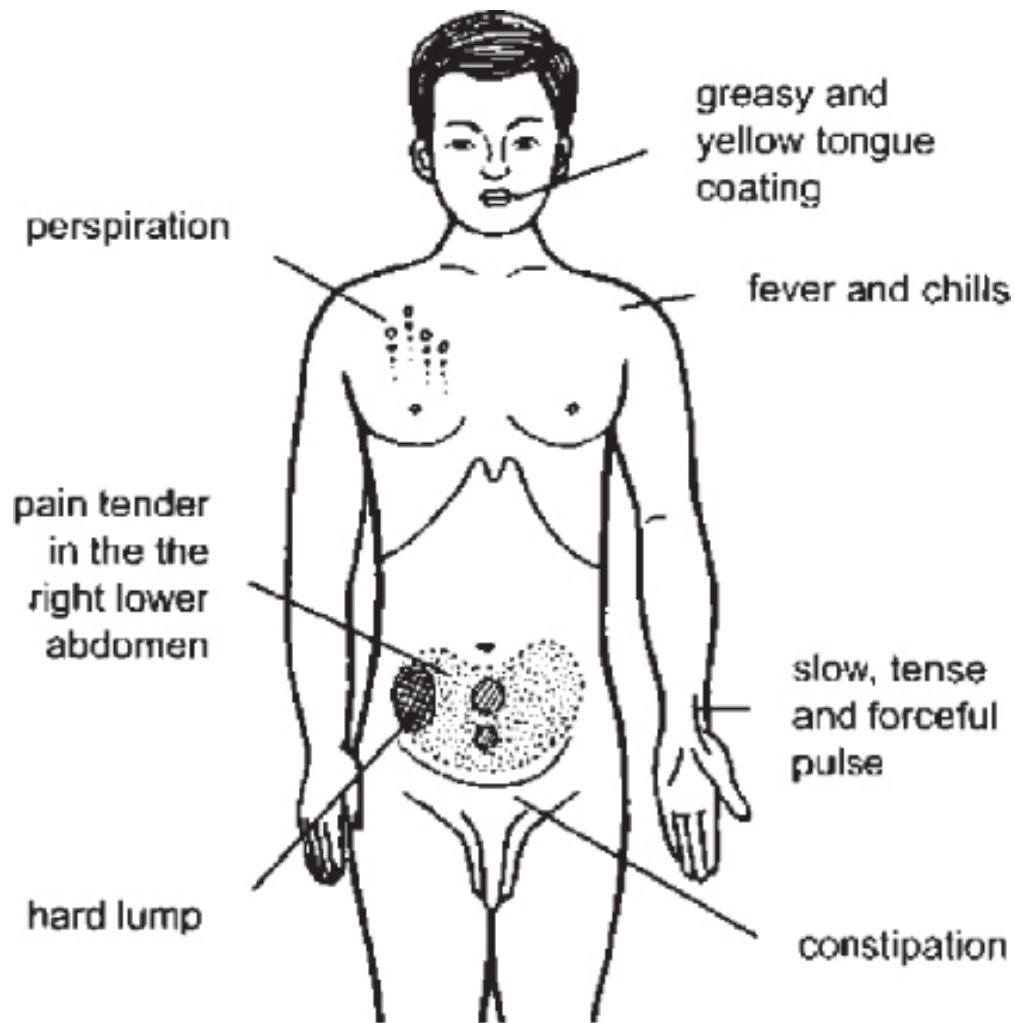
1. Steamed rehmannia, dioscorea, and comus are ascending tonics with strong nutritive qualities that are also warming and moistening.
2. Hoelen and alisma are drying herbs that are added to remove local accumulations of stagnant water.
3. Moutan works with the rehmannia to improve blood circulation and remove obstructions.
4. Aconite is one of the most warming herbs, and all formulas containing it are used exclusively for treating chill conformations.

The basic indicator for this formula is that a patient feels some degree of coldness in the hands and feet. As aconite is also an analgesic, it lessens pain in the hands, feet, and lumbar region. It is a very popular formula for symptoms of kidney deficiency, especially in the elderly.



Rhubarb and Moutan Combination (Da Huang Mu Dan Pi Tang 大黃牡丹皮湯)

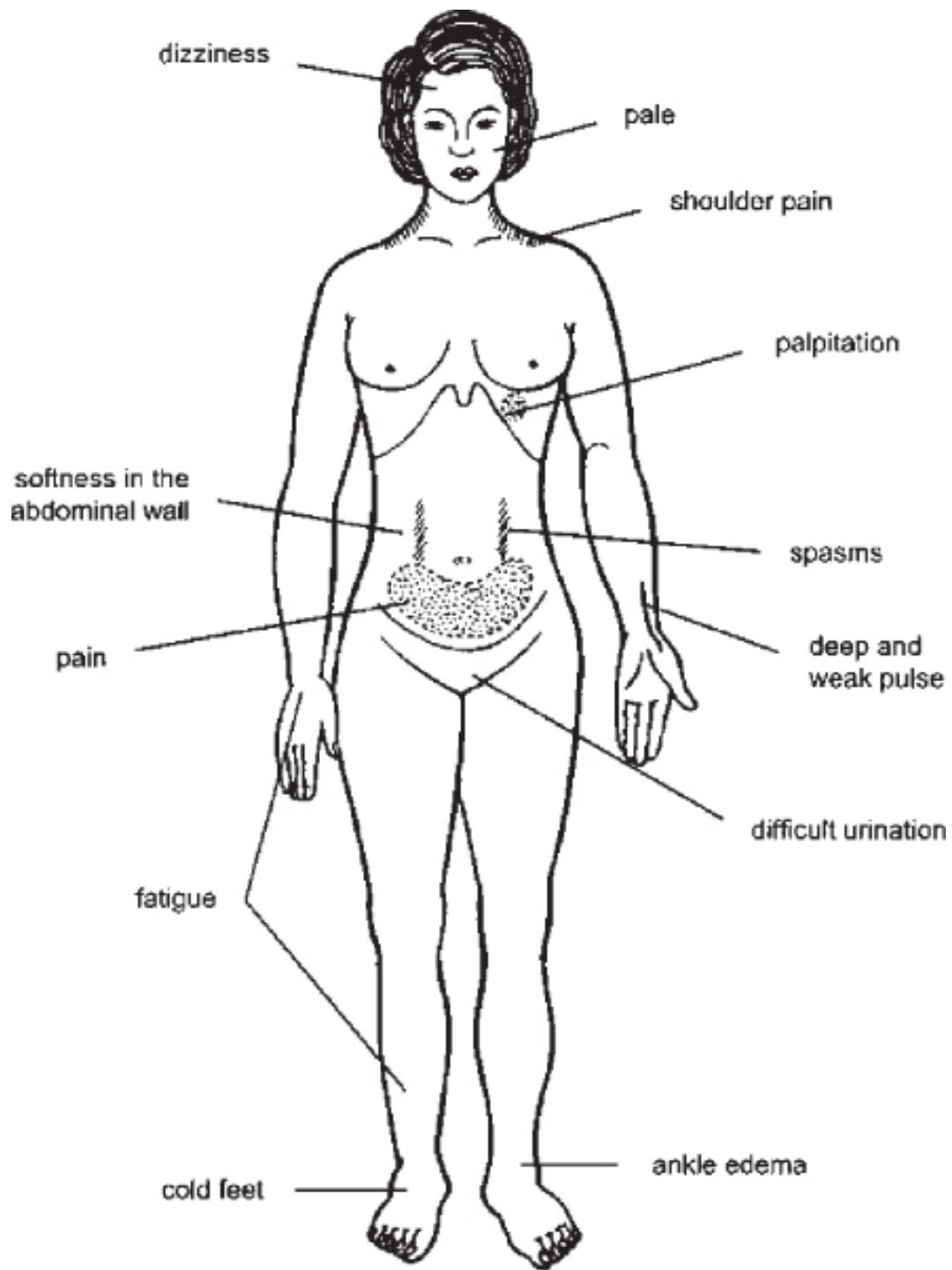
The ingredients are rhubarb, mirabilium, moutan, persica, and benincasa seed. This formula is basically used for those who would be suitable to take **Rhubarb and Mirabilium Combination (Tiao Wei Cheng Qi Tang 調胃承氣湯)**, but with additional signs of stagnant blood, suppuration, and inflammatory conditions, particularly in the lower body.



Tang-kuei and Peony Formula (Dang Gui Shiao Yao San 當歸芍藥散)

The ingredients of this formula are tang-kuei, Cnidium, peony, atractylodes, hoelen, and alisma.

5. Tang-kuei and Cnidium are warming blood-regulators that adjust and control the blood, especially in menstrual conditions.
6. Peony is an analgesic and an antispasmodic. It eases menstrual pains.
7. Apart from alisma, the ingredients are warming tonics, which results in a formula that is a blood-regulator for weak-chill-damp conformations.
8. It helps with anemia as well.



2-6: HERBAL FORMULAS FOR WATER DISEASES

COMMONLY USED HERBS —often used to treat chronic nephritis and/or uremia.

1. Akebia
2. Alisma
3. Atractylodes
4. Ginger (wild)
5. Hoelen
6. Ma-huang
7. Polyporus
8. Stephania

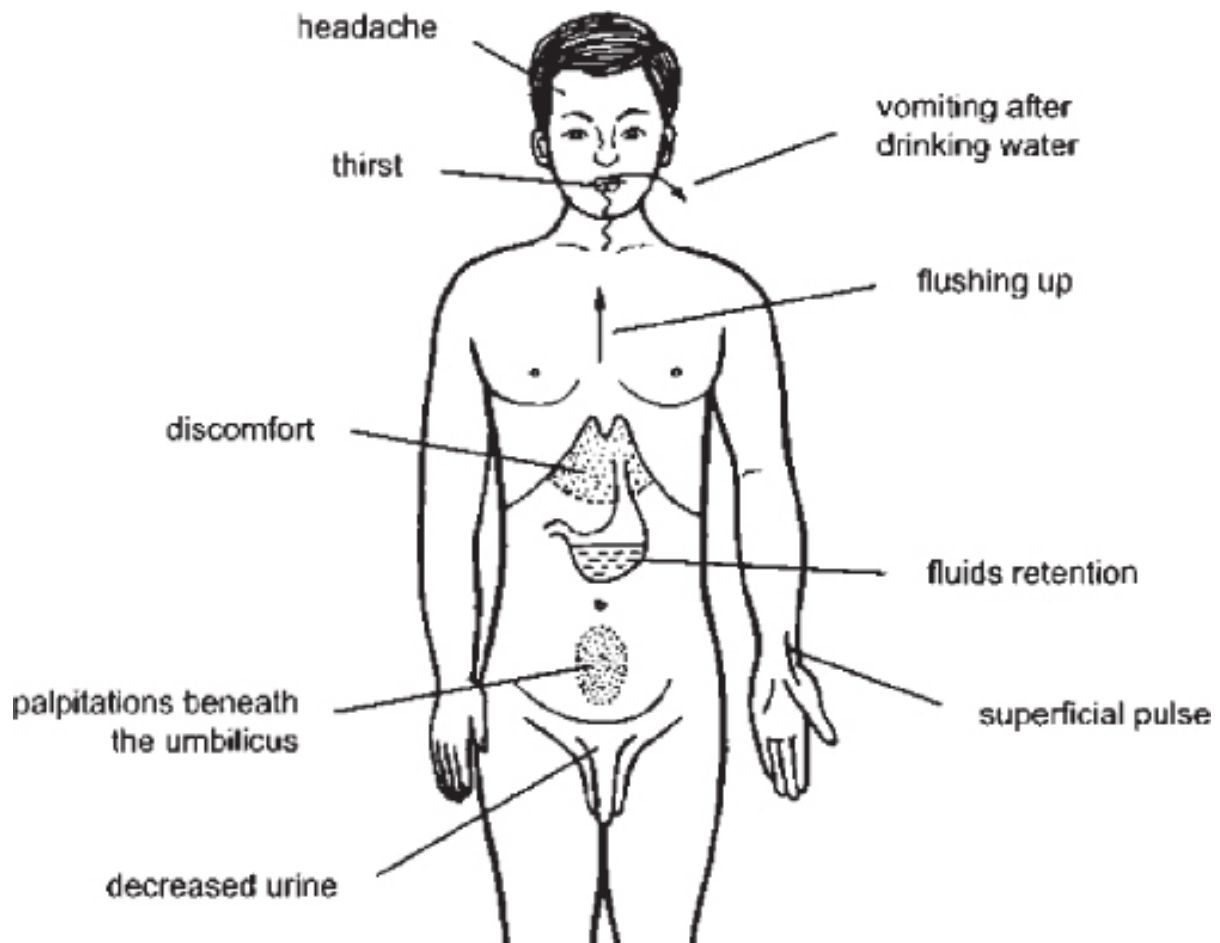
THE 3 POPULAR HERBAL FORMULAS FOR WATER DISEASES

Hoelen Five Herb Formula (Wu Ling San 五苓散)

The ingredients are alisma, hoelen, polyporus, atractylodes, and cinnamon.

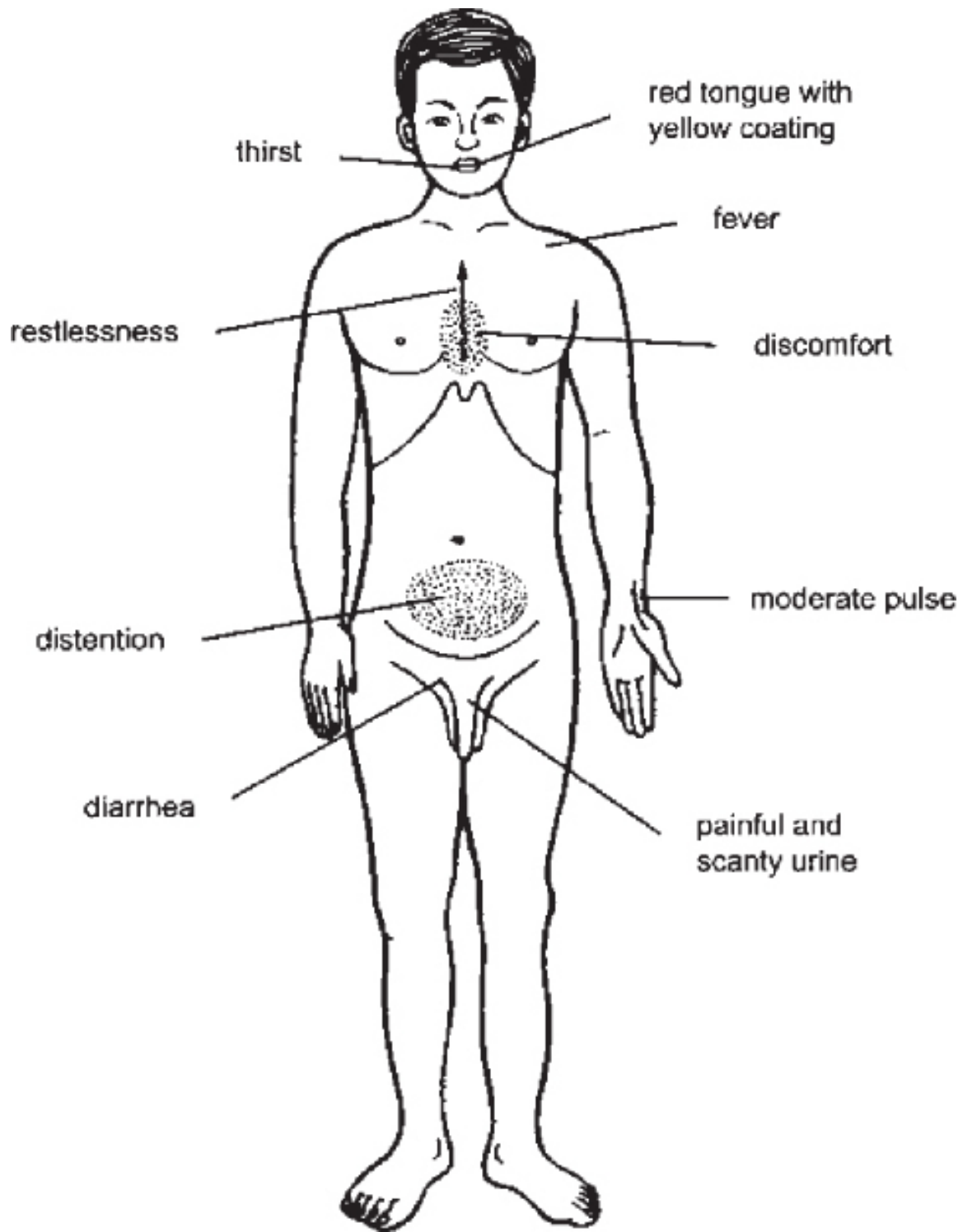
1. Alisma, hoelen, and polyporus are diuretics.
2. Atractylodes and cinnamon are both drying agents.

This formula is a basic weapon against damp conditions. It is often used for damp conformations accompanied by dizziness and headaches. Although thirst is not a symptom of most damp conformations, the most typical diagnostic sign for **Hoelen Five Herb Formula** is oliguria accompanied by extreme thirst. With such a condition, a fever conformation is considered to be responsible for the thirst.



Polyporus Combination (Zhu Ling Tang 豬苓湯)

The ingredients are alisma, hoelen, polyporus, gelatin, and talc. **Polyporus Combination** is a variant of **Hoelen Five Herb Formula (Wu Ling San 五苓散)**, in which atractylodes and cinnamon are replaced by gelatin and talc. Alisma, hoelen, and polyporus form one of the diuretic teams in Chinese herbal medicine. To these are added gelatin, a hemostatic, and the antipyretic and diuretic talc.

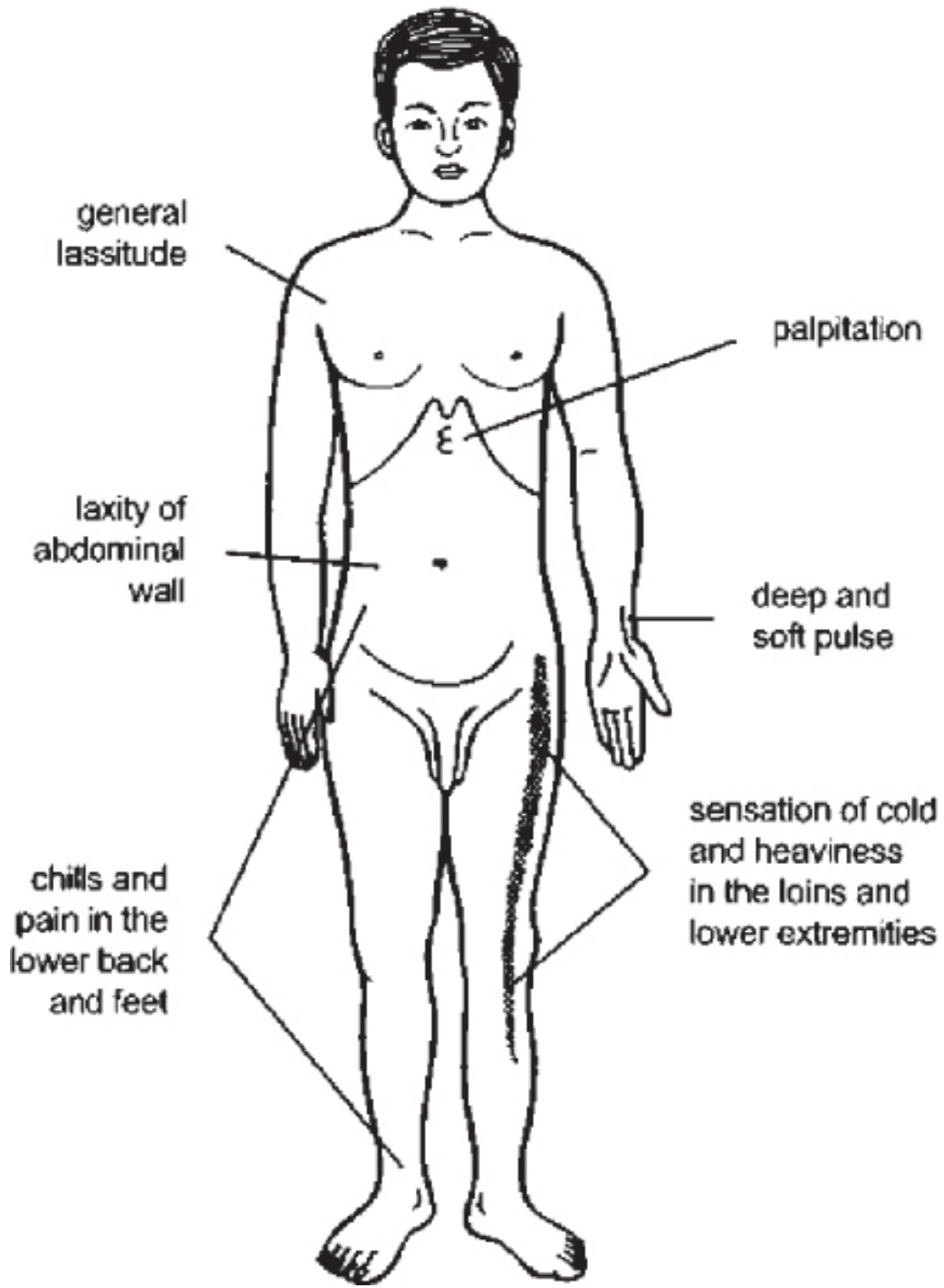


Ginger and Hoelen Combination (Gan Jiang Ling Zhu Tang 甘薑苓朮湯)

The ingredients are hoelen, dried ginger, atractylodes, and licorice.

The formula is identical to **Atractylodes and Hoelen Combination (Ling Gui Zhu Gan Tang 苓桂朮甘湯)** except that dried ginger has been substituted for cinnamon.

1. Cinnamon and ginger are both warming and drying herbs, but ginger's warming and drying properties are much stronger than those of cinnamon.
2. The formula is used to treat extreme chill-damp conformation characterized by painful chills in the hips, loins, and lumbar area.





CHAPTER 3

The Psychological Effects of Chronic Low Back Pain

3-1: THE PSYCHOLOGICAL EFFECTS OF CHRONIC PAIN



KEYWORDS

1. Opioid addiction (ICD-10 Code **F11.20**)
2. Addicted behavior (ICD-10 Code **R46.2**)
3. Drug overdose (ICD-10 Code **T50.901A**)
4. Narcotic withdrawal (ICD-10 Code **F11.23**)
5. Depression (ICD-10 Code **F32.9**)

6. Anxiety (ICD-10 Code **F41.9**)
7. Emotional irritability (ICD-10 Code **R45.4**)
8. Insomnia (ICD-10 Code **G47.0**)
9. Psychosis (ICD-10 Code **F11.93**)
10. Delusion or paranoia (ICD-10 Code **F22**)
11. Hallucination (ICD-10 Code **R44.3**)
12. Nervous breakdown (ICD-10 Code **F48.8**)

The psychological factors can affect the expression of pain, and pain can affect a person's psychological well-being.

NARCOTIC ADDICTION

Among all psychological problems associated with chronic pain, narcotic addiction, (especially from opioids), and depression are the two most urgent troubles that physicians often have to deal with first.

ADDICTED BEHAVIOR

When a person becomes compulsively obsessed or dependent on a particular substance, object, or behavior, he or she is said to have an addictive behavior. In chronic pain sufferers, the object is often narcotics.

NARCOTIC WITHDRAWAL

1. Narcotic addicts in withdrawal are unpleasant and frightening.
2. The untreated addicts often seek solace in the drugs that they are attempting to shun. Depending on the drug, the timeline for withdrawal can last minutes to days and even months if the addiction is severe.
3. The severity, type, and duration of narcotic withdrawal symptoms vary and depend on the type of drug, the dosage, and the duration of use.
4. Generally, the higher dosages will produce more intense symptoms.
5. Withdrawal symptoms may appear as soon as twelve hours after the last dose of a drug.
6. Narcotic withdrawal often causes a combination of physical and emotional

disturbances, from mild anxiety, nausea, seizures, and hallucinations suicidal ideations. It can be life-threatening.

DEPRESSION

1. Even though many people with chronic pain see themselves as depressed *not* suffering from physical ailments, the fact is that chronic pain almost always leads to depression, and depression is often the main contributor to chronic pain.
2. Experts estimate that 80% of the chronic pain sufferers are depressed; they have trouble concentrating, feel lethargic, are not sleeping well, have poor health, need more health care, have more disabilities than healthy people and some of them have simply lost the will to live.
3. Some of my patients with chronic pain feel like they are living in the Twilight Zone—all they can do is just keep hoping and wishing that one day they will wake up from the horrible nightmares.
4. One of my patients says that her pain is like a constant companion, who has fleeting occasional absences she can only enjoy by short-lived celebrations but with a nagging fear that it will soon return, and probably very soon.
5. Many of my patients with chronic pain offer me everything they have and beg me to “just make the pain go away!” The pain has haunted and hurt them, the pain has changed them, has changed their loved ones, and has changed their relationships.

To me, depression is the mother, or at least the aunt, of chronic pain. Among my patients with chronic pain, almost all of them have depressive symptoms, and at least half of them have met the criteria for a major depressive episode.

ANXIETY

1. The American Psychological Association (APA) defines anxiety as “an emotion characterized by feelings of tension, worried thoughts, and physical changes like increased blood pressure.”
2. Anxiety can be a normal alerting response, but it can also be a symptomatic manifestation of physical or psychological disorders.

3. It is frequently accompanied by physical symptoms, but the results of diagnostic tests are almost always negative.
4. Disorders of the body, drug intoxication, and withdrawal from drugs can cause anxiety.

EMOTIONAL IRRITABILITY

1. Irritability is a feeling of agitation.
2. It is an emotional behavior that is the result of having feelings of frustration and/or annoyance.
3. Irritability can be a normal emotional response to conditions, but it may also be a symptom of a wide variety of diseases, disorders, and conditions.
4. There are many causes of irritability. For example, personality disorders with inflexible patterns of thinking, feeling, and behavior often differ from others and thus can lead to irritability.
5. Irritable people believe that their way of thinking and behaving is normal, while the rest of the world is abnormal.
6. Irritable people find it difficult to participate in the usual social, educational, and family activities.

INSOMNIA

1. Insomnia can mean it's hard to fall asleep, hard to stay asleep, you wake up too early and are not able to get back to sleep, or all of the above.
2. The primary causes of insomnia are a feeling of uneasiness, depression, and anxiety.

PSYCHOSIS

Psychosis is characterized by an impaired relationship with reality; the patient may have either hallucinations or delusions.

1. **Hallucination** —perceives something that does not exist, such as hearing a voice that no one else seems to hear.
2. **Illusion** —a misinterpretation of something that does not actually exist.

NERVOUS BREAKDOWN

It is an old term to describe a person who is under so much stress that he or she is unable to perform even the basic day-to-day life activities, such as bathing.

3-2: DEPRESSION

KEYWORDS

1. Depression (ICD-10 Code **F32.9**)
2. Chest wall distress (ICD-10 Code **J80**)
3. Chest tightness (ICD-10 Code **R07.89**)
4. Substernal or precordial discomfort (ICD-10 Code **R07.2**)
5. Abdominal distension (ICD-10 Code **R14.0**)
6. Suicidal ideations (ICD-10 Code **R45.851**)

When it comes to chronic pain, we are compelled to think about depression. Chronic pain almost always leads to depression, and depression is often the main contributor of chronic pain.

SYMPTOMS OF DEPRESSION

The severity of depression ranges from mild to severe. Symptoms may occur for most of the day, nearly every day, or for at least two weeks. According to the National Institute of Mental Health (NIMH), the common symptoms of depression include:

1. Persistent sad, anxious, or “empty” mood
2. Feelings of hopelessness or pessimism
3. Feelings of guilt, worthlessness, or helplessness
4. Loss of interest or pleasure in hobbies and activities
5. Decreased energy or fatigue
6. Moving or talking more slowly
7. Feeling restless or having trouble sitting still
8. Difficulty concentrating, remembering, or making decisions

9. Difficulty sleeping, early-morning awakening, or oversleeping
10. Appetite and/or weight changes
11. Suicidal ideations or suicide attempts
12. Aches or pains, headaches, cramps, or digestive problems without a clear physical cause and/or that do not ease even with treatment

SIGNS OF DEPRESSION

1. Abnormal arterial pulse
2. Fur-coated tongue
3. Chest wall distress
4. Chest tightness—restricted chest wall expansion during deep inhalation
5. Substernal or precordial discomfort
6. Loss of shoulder range of motion
7. Abdominal distension
8. Tenderness in abdominal wall muscles
9. High pitch and loud bowel sound

CAUSES OF DEPRESSION

Nobody really knows exactly what causes depression, despite the intense research throughout the world. Scientists suggest a number of factors that could play a role in a person who develops depression. These factors can be: genetic; biological; hormonal; environmental; situational, such as a drastic change in life; and psychological. The common causes are:

1. Chronic pain
2. Chronic or serious illnesses
3. Constant stress
4. Poor interpersonal relationships
5. Long-term isolation or loneliness
6. Divorce
7. Prolonged work stress or losing employment
8. Family history

9. Personality
10. Drug and alcohol abuse
11. Past physical, sexual, or emotional abuse
12. Side effects from medications
13. Personal conflicts or disputes
14. Death or a loss of a loved one
15. Significant unexpected life events
16. Forced retirement
17. Social isolation
18. Substance abuse, including opioids

SEXUAL ABUSE AND DEPRESSION

Psychological traumas, especially those of childhood, may go unnoticed. But when under closer inquiry, it may reveal underlying anxieties, painful recollections, and emotional withdrawal.

When she was seven-years-old, Ethyl was sexually molested by a gardener who worked for her family. She was traumatized emotionally and physically as a child and as an adult. Her mother took her to several psychologists when she was growing up, but no one really knew how to help her. As an adult, there were still several places she could not go and several things she could not accomplish. She said it was due to her “illness,” but she would not elaborate.

DEPRESSION AND SUICIDE

1. On June 7, 2018, the Centers for Disease Control and Prevention (CDC) announced that suicide rates are up by 30% across the nation since 1999 (1)
2. While many cases of mental illness may have been diagnosed, the CDC also noted that relationship stress, financial troubles, and substance abuse were contributing to the trend. (1)
3. The suicide of fashion designer Kate Spade on June 5, 2018, at age fifty-five—just two days prior to the statement from the CDC, and the suicide death of celebrity chef Anthony Michael Bourdain on June 8, 2018, o

day after the statement, captured headlines and made people wonder certain groups of people were more at risk.

4. Many chronic pain sufferers have profound feelings of hopelessness that lead them to consider suicide.
5. Many depressed people see themselves as disabled, with no hope of improvement, and the only solution is to end their life.
6. It is estimated that almost two-thirds of those who committed suicides have a history of mood disorders. (2)

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3-3: TREATMENT FOR DEPRESSION

Depression is usually treated with medications, psychotherapy, or a combination of the two. If these treatments do not reduce symptoms, electroconvulsive therapy (ECT) and other brain stimulation therapies may be tried.



ANTIDEPRESSANTS

1. Most patients need to try several different antidepressants before finding the most appropriate one that is both effective and has manageable side effects.
2. The U.S. Food and Drug Administration (FDA) warns that patients taking antidepressants should be watched closely because some people experience an increase in suicidal thoughts or behavior when taking antidepressants, especially in the first few weeks after starting or when the dose is changed.
3. Almost all antidepressants have serious side effects.

PSYCHOTHERAPY

Psychotherapy, such as counseling, cognitive behavioral therapy (CBT), interpersonal therapy (IPT), and problem-solving therapy can help people with

depression.

Ethyl was seeing a family therapist and a psychiatrist at the time when she came back to me. Each of them saw her once a week on and off for about eighteen months. Prior to seeing them, because of her alcohol abuse, she attended Alcoholics Anonymous meetings, read all the literature on alcoholism that she could find, and became sober for about two years. But at one point she became very angry with the psychiatrist because of the limits that were set for her, and she threatened to kill herself on several occasions. Eventually, she found that electric shock therapy was a good solution for her and helped her to give up those dangerous thoughts.

ELECTRIC SHOCK THERAPY

1. Electroconvulsive therapy (ECT) may provide relief for people with severe depression who do not respond to medication.
2. When a rapid response is necessary, ECT can be a first-line intervention.
3. Repetitive Transcranial Magnetic Stimulator (RTMS) and Vagus Nerve Stimulator (VNS) can be used in those who fail to respond to medication.
4. Several other types of brain stimulation devices are still under study.



REFERENCES

1. Office of the Commissioner. "Consumer Updates - Depression: FDA-

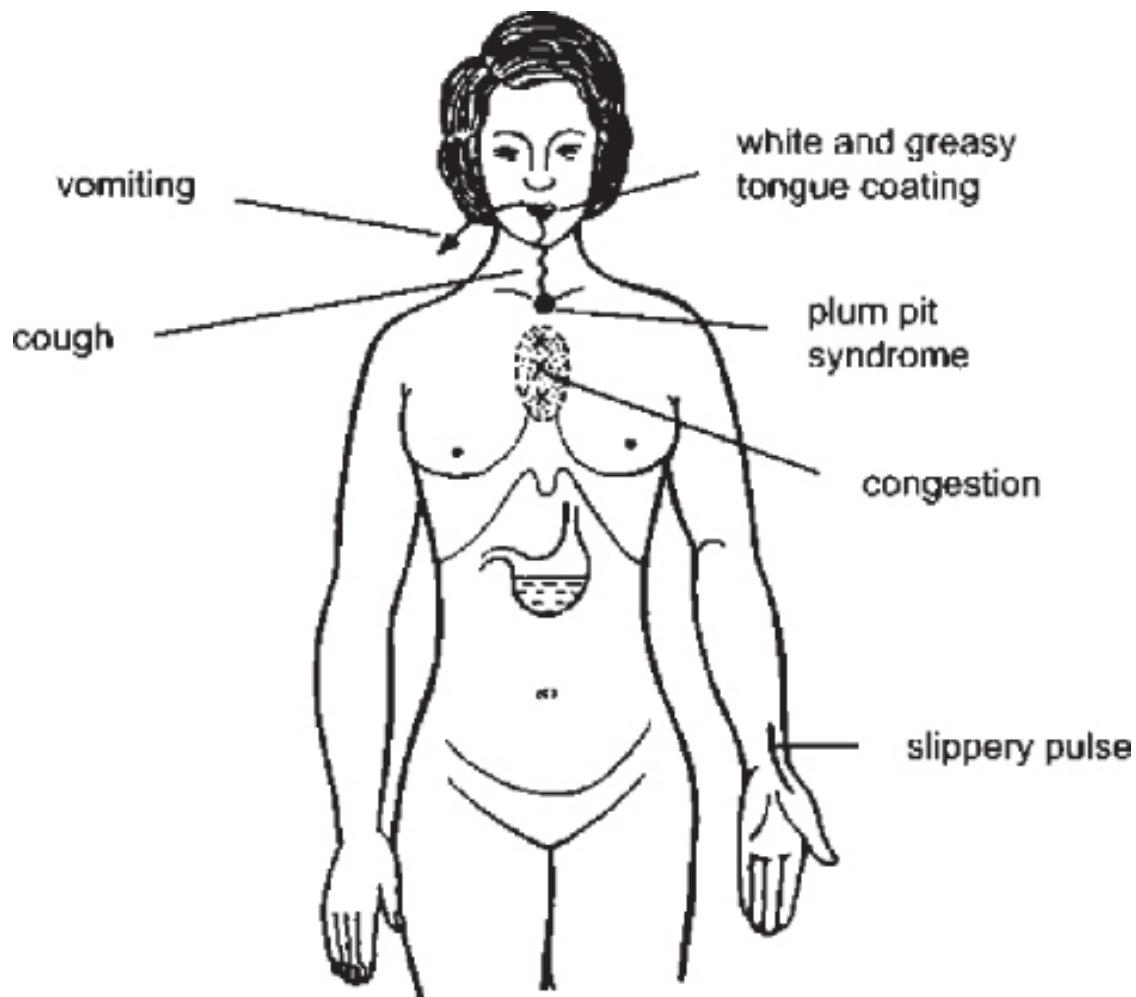
Approved Medications May Help.” U S Food and Drug Administration
Home Page. Accessed November 14, 2018.
<https://www.fda.gov/ForConsumers/ConsumerUpdates/ucm095980.htm> .

3-4: HERBAL FORMULAS FOR DEPRESSION

Pinellia and Magnolia Combination (Ban Xia Hou Pu Tang 半夏厚朴湯)

The ingredients are pinellia, magnolia, hoelen, raw ginger, and perilla.

1. In TCM, this formula is often the first choice for treating depression with nervousness, anxiety, and uneasiness, particularly with the symptom “something got stuck in the throat,” and in those with a sluggish gastrointestinal mobility.
2. If chest wall distress is present, the formula is often used in conjunction with **Bupleurum Formula (Yi Gan San 抑肝散)**.

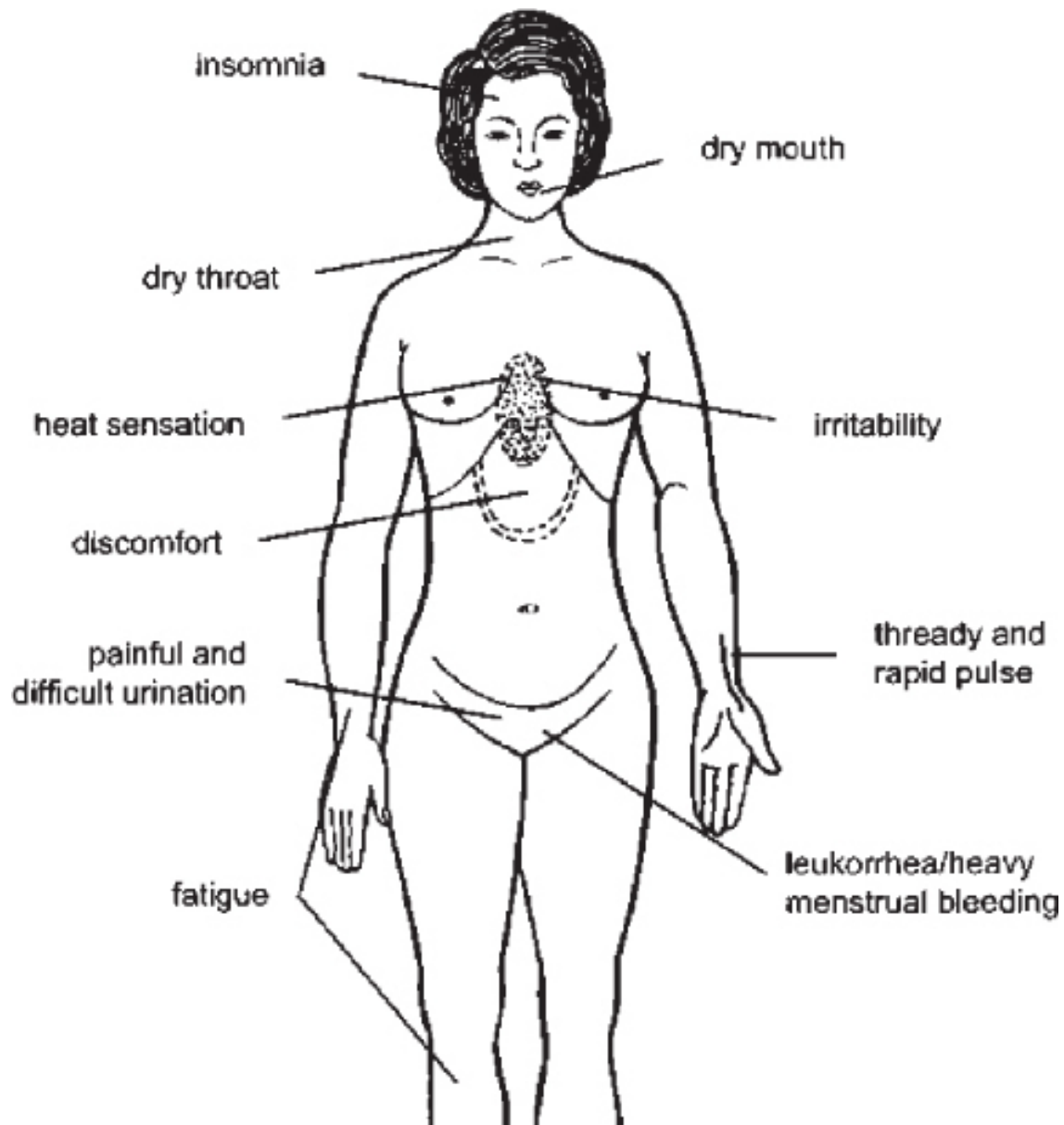


Lotus Seed Combination (Qing Xin Lian Zi Yin 清心蓮子飲)

The ingredients are lotus seed, licorice, ophiopogon, hoelen, ginseng, plantago, scute, astragalus, lycium bark, and licorice.

1. Lotus seed is the nutty kernel of the lotus bud that has a tonic and sedative effect.
2. Scute, ophiopogon, lycium bark, hoelen, and plantago all possess descending or cold or heat-dispersing power, and all have sedative effects.
3. Hoelen and plantago are diuretics.
4. Lotus plays a central role in clearing the heart; this formula is characterized by ingredients useful in chronic bladder infections and urethritis (with urine retention, restrained urine flow, or irritability).

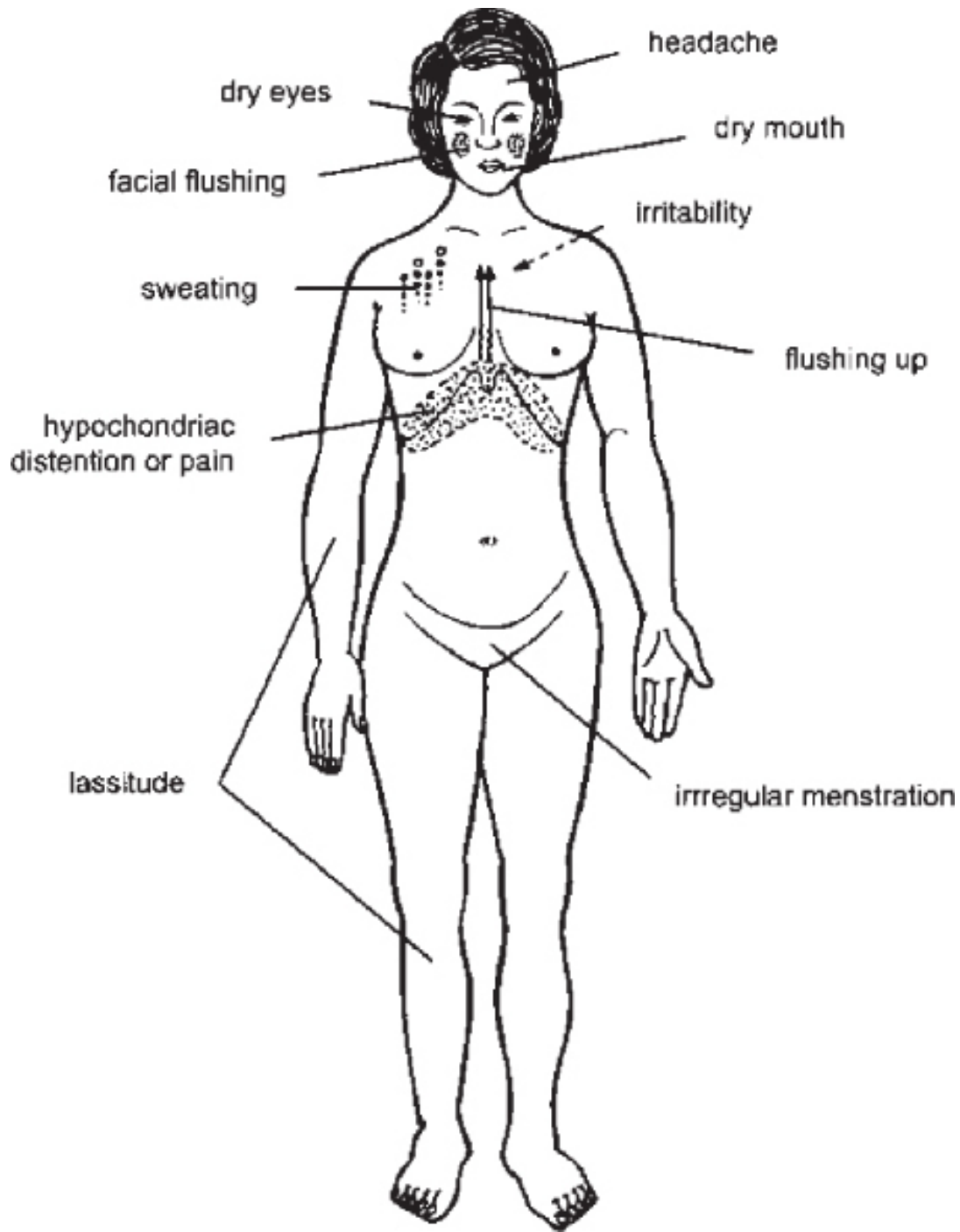
5. In Japan, this formula's literal name is "Heart-Clearing Lotus Seed Drink" meaning clearing or dispersing the heat, inflammation, and irritability for a troubled heart. This is physically experienced as an irritating, burning sensation in the chest.



Bupleurum and Peony Formula (Jia Wei Xiao Yao San
加味道遙散)

The ingredients are bupleurum, peony, licorice, atractylodes, hoelen, tang-kuei, ginger, mentha, moutan, and gardenia.

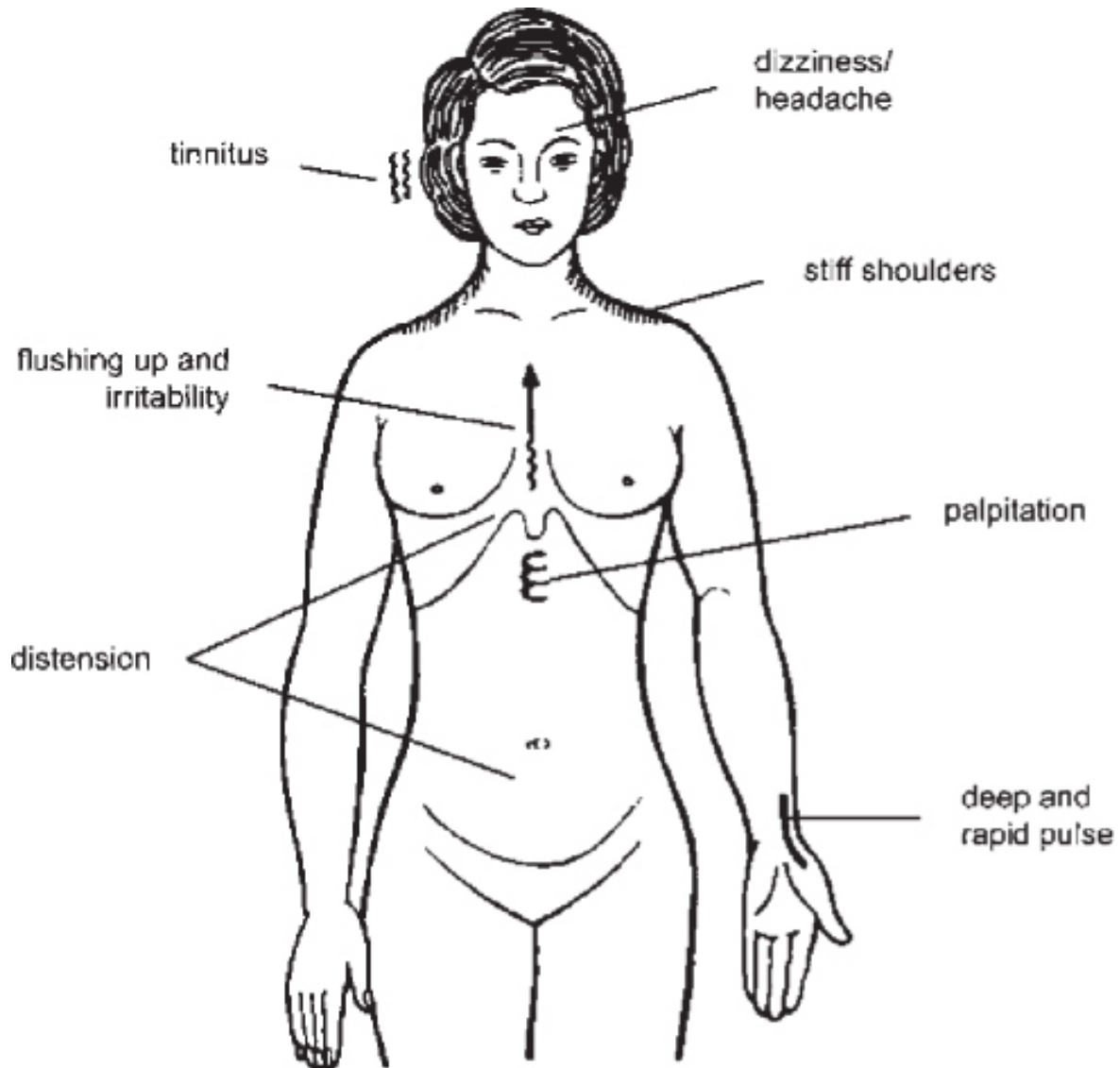
1. This formula is highly prized for treating weak conformations, especially women.
2. Often used to manage dysmenorrheal and menopausal disorders.
3. For problems arising from female hormone imbalances.



Tang-kuei and Cyperus Formula (Nu Shen San 女神散)

The ingredients are ginseng, atractylodes, licorice, scute, coptis, tang-kuei, cnidium, cinnamon, cyperus, areca seed, saussurea, clove, and rhubarb.

1. This formula is often used to treat depression, menopausal disorders, a pre- and postpartum nervous conditions.
2. For dizziness in women of poor health with lax abdomens.
3. Frequently used for depression in menopausal women who failed respond to **Bupleurum and Peony Formula (Jia Wei Xiao Yao San 加逍遥散)**.
4. More effective for flushing-up and vertigo than **Bupleurum and Peony Formula (Jia Wei Xiao Yao San 加味道遥散)**.



3-5: HERBAL FORMULAS FOR ANXIETY

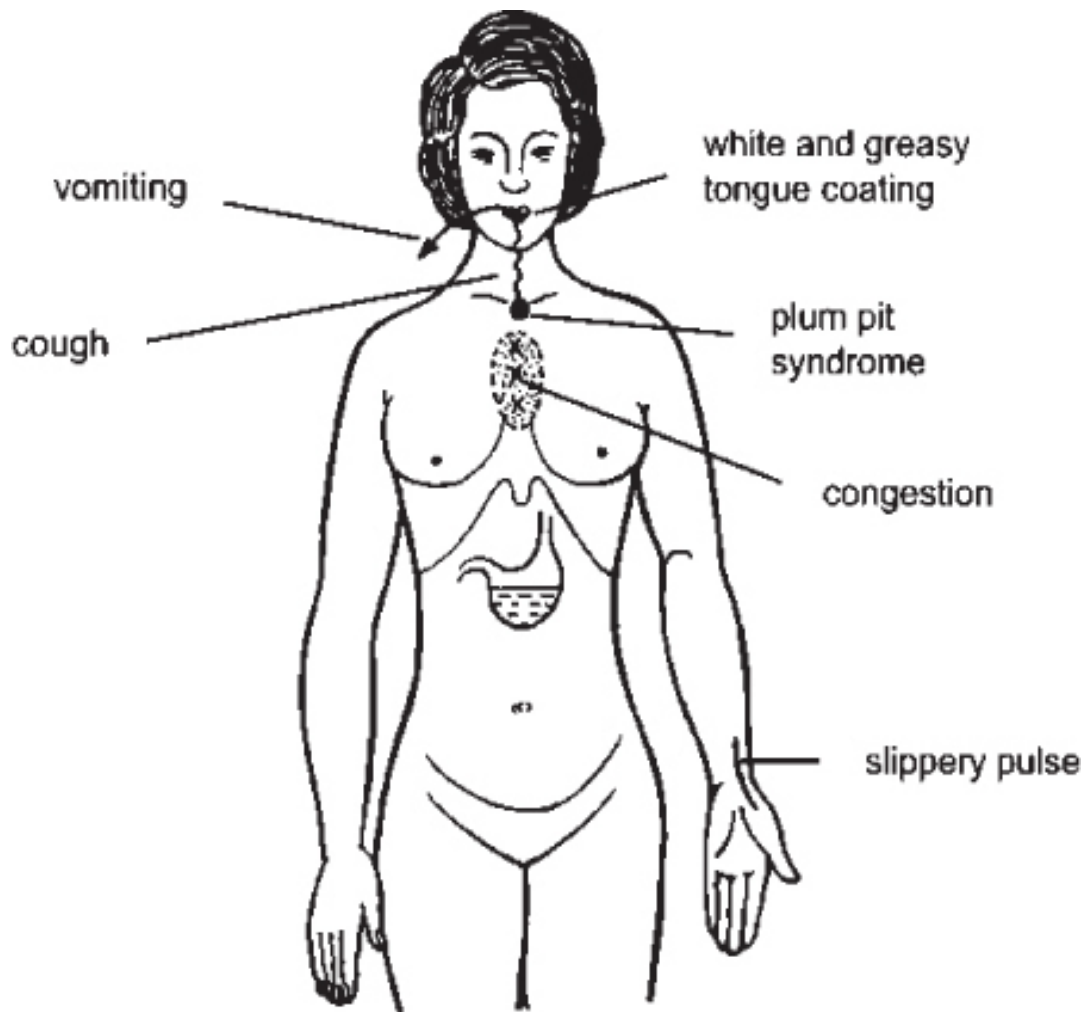
Pinellia and Magnolia Combination (Ban Xia Hou Po Tang 半夏厚朴湯)

The ingredients are pinellia, magnolia, hoelen, raw ginger, and perilla.

1. The chief ingredients, pinellia and magnolia, both have descending effect
2. Hoelen and perilla are also descending herbs, which means the formula descending or sedative in nature.
3. All ingredients are drying, all but the neutral hoelen are warming, and but perilla and magnolia are tonics.

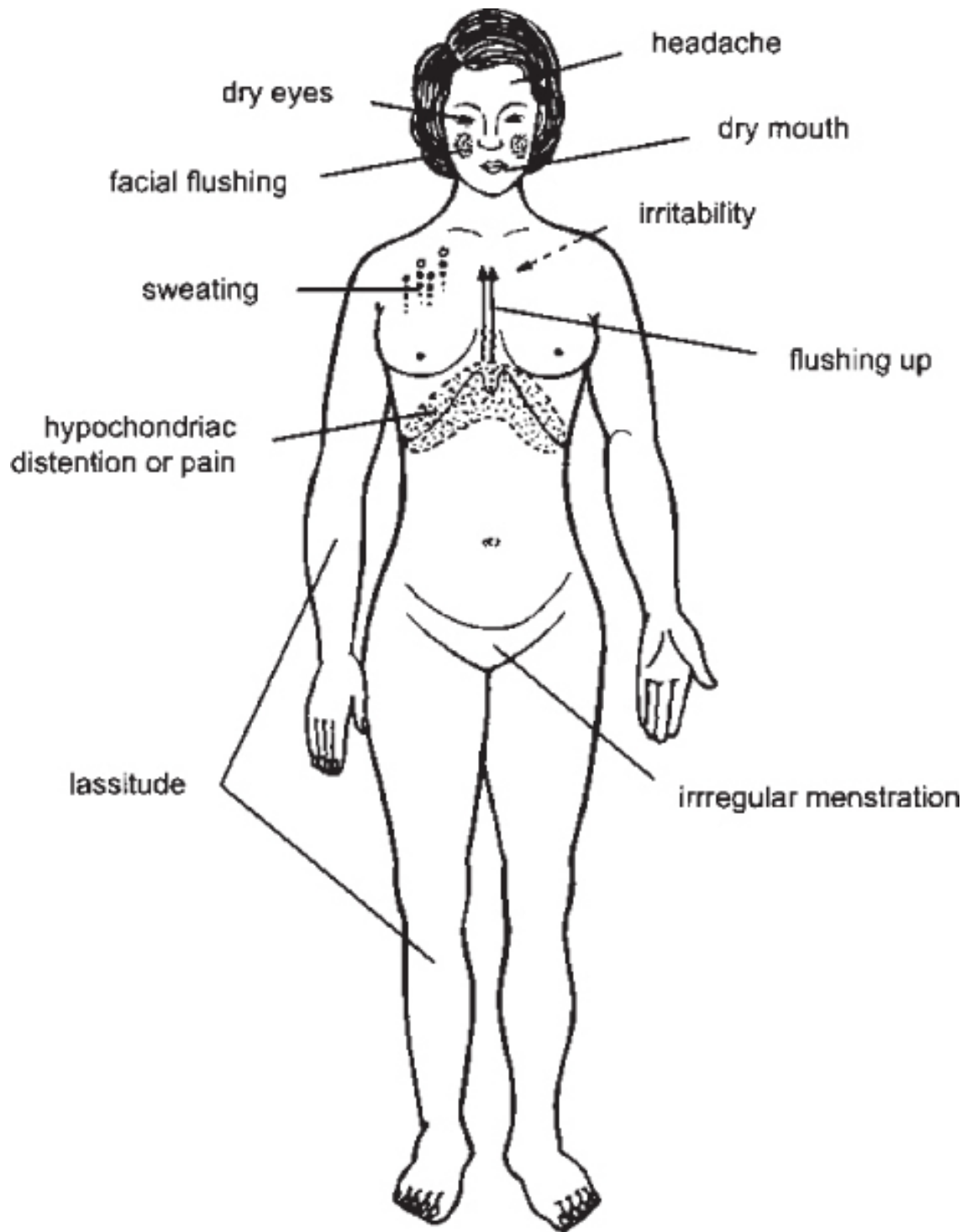
Indications

1. The formula is used to treat dampness, chill, and weak conformations.
2. For nervousness, lack of appetite, and a sensation of a lump in the throat.
3. Often the first choice for treating depression with nervousness, anxie uneasiness, particularly with the symptom of “something being stuck in t throat,” and in those who have a sluggish gastrointestinal mobility.
4. If chest wall distress is present, the formula is often used in conjuncti with **Bupleurum Formula (Yi Gan San 抑肝散)**.



Bupleurum and Peony Formula (Jia Wei Xiao Yao San 加味道遥散)

1. For cold conformation, menstrual irregularities, aching shoulders and shoulder blades, insomnia, and constipation, often accompanied by feverish sensation.
2. Great for weak conformations, especially in women with a variety of symptoms.
3. Particularly suited to menopausal disorders, dysmenorrhea, and other problems arising out of an imbalance in female hormones.

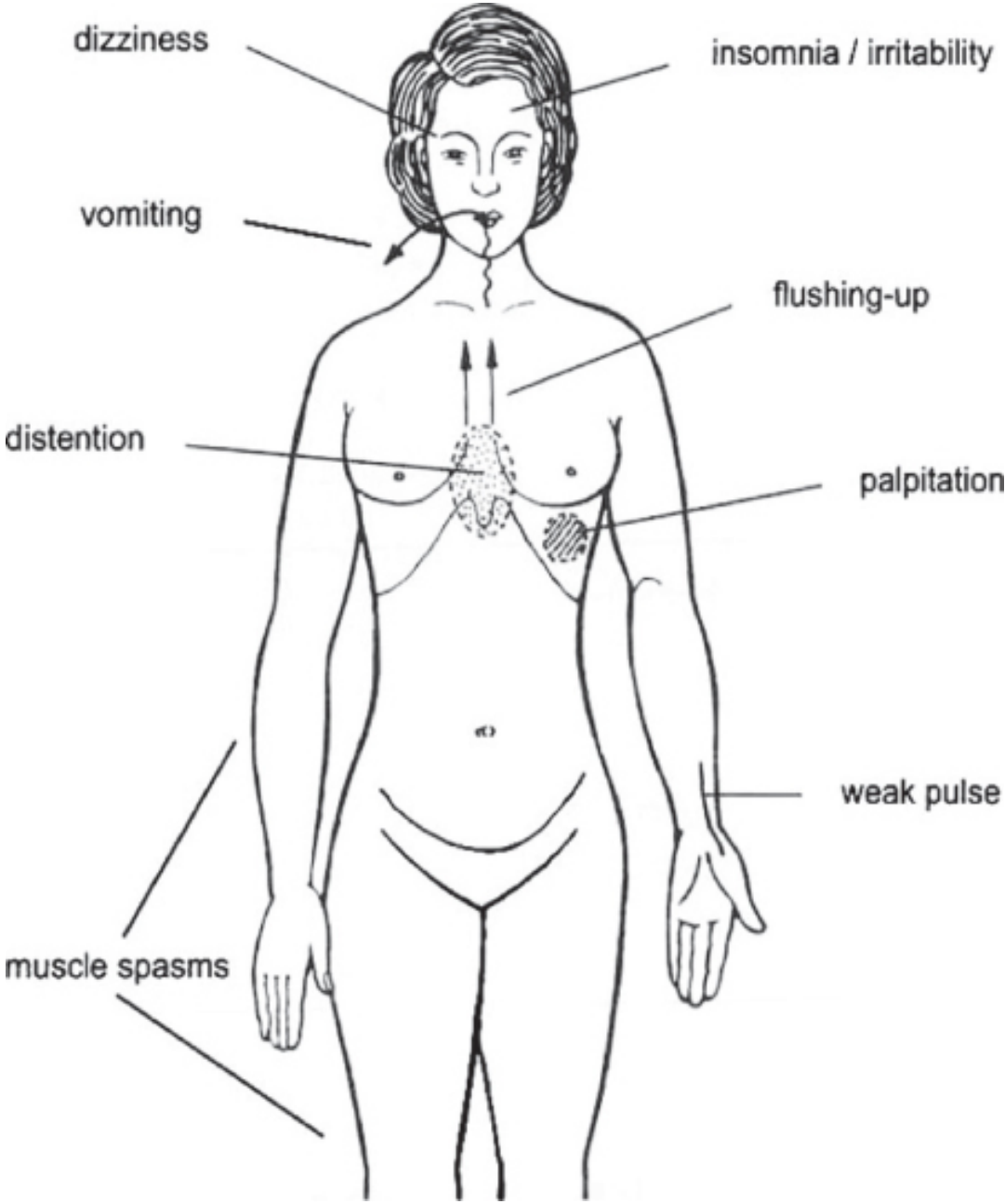


Bupleurum, Citrus, and Pinellia Formula (Yi Gan San
Jia Chen Pi Ban Xia 抑肝散加陳皮半夏湯)

The ingredients are bupleurum, licorice, atractylodes, hoelen, tang-kuei, cnidium, gambit, citrus, and pinellia.

Indications

- 1. Anxiety in people with a weak constitution, nervousness, and insomnia.
- 2. Palpitations in the left side of the abdomen.



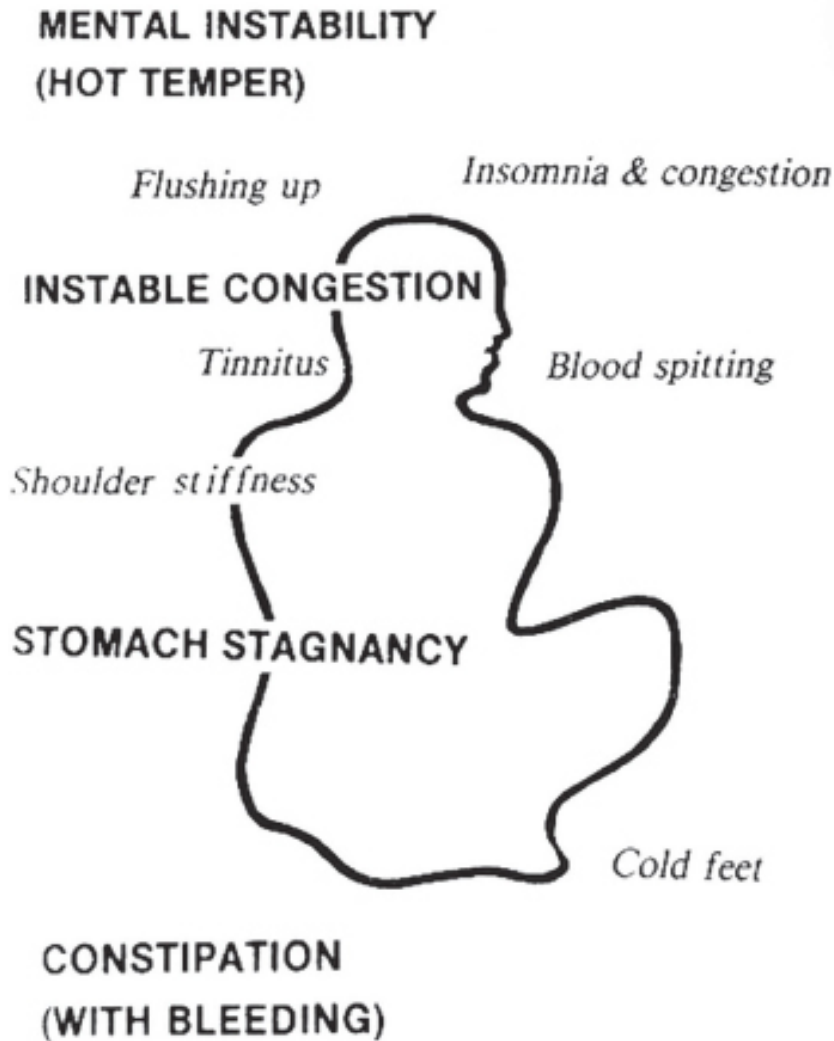
Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯)

The ingredients are scute, coptis, and rhubarb.

All coptis containing or heat-purging formulas are based on the herbs coptis and scute. Since scute, coptis, and rhubarb are all cold-natured herbs, and rhubarb is a strong purgative, this formula is a cooling purgative, which purges congested blood from the upper body.

Indications

1. For facial flushing, flushing up, constipation, a sensation of distention beneath the stomach, and insomnia.
2. May be used to prevent or treat a hangover.
3. Because all the component herbs are purgatives, this formula should not be used on those who are weak constitutions.



Coptis and Scute Formula (Huang Lian Jie Du Tang 黃連解毒湯)

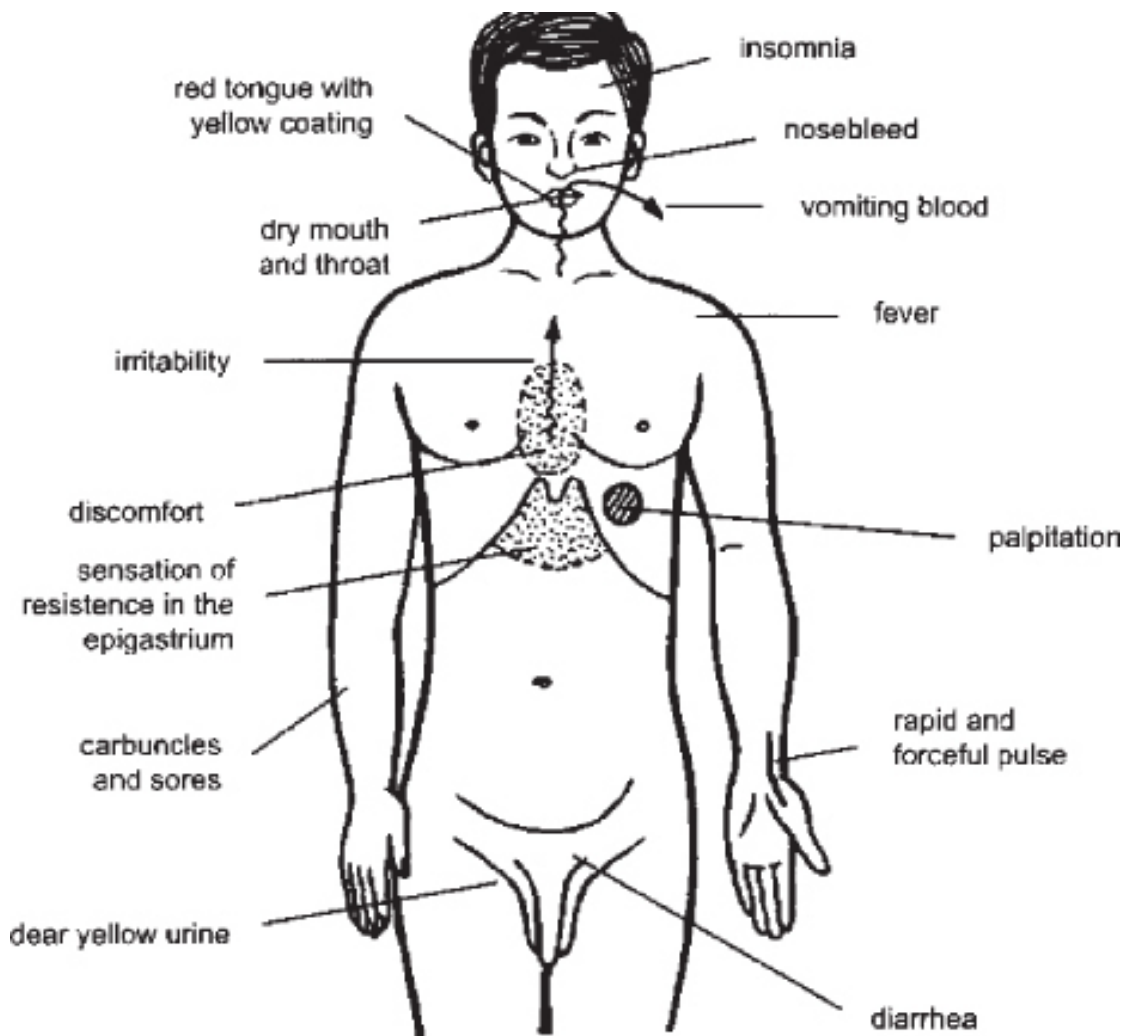
The ingredients are scute, coptis, phellodendron, and gardenia. This formula is produced by deleting rhubarb from **Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯)** and replacing it with phellodendron and gardenia.

Indications

1. For flushing up, insomnia, and constipation with soft stool; oft

accompanied by excessive coating in the mouth.

2. Widely used to subdue internal organ bleeding in red-faced, oft hypertensive, and fever conformation type of person.
3. Very effective in treating jet lag discomforts.
4. Since all of the ingredients are cold and purgative and descending nature, the formula can be used to purge congested blood from the upper body and is a powerful tranquilizer for the nerves.

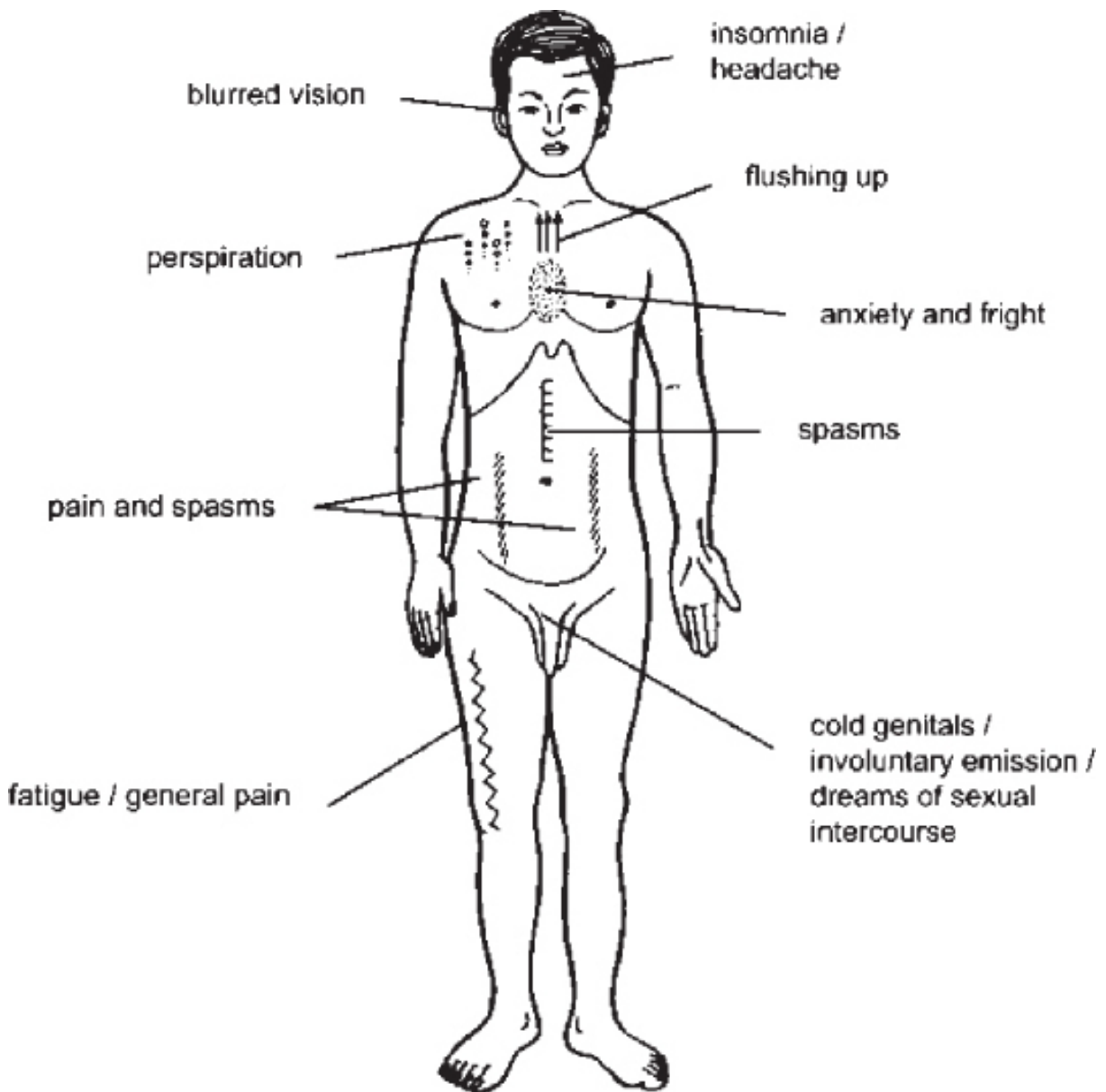


Cinnamon and Dragon Bone Combination (Gui Zhi Jia Long Gu Mu Li Tang 桂枝加龍骨牡蠣湯)

The ingredients are cinnamon, peony, raw ginger, jujube, licorice, dragon bone, and oyster shell.

Indications

1. For headaches, flushing up, insomnia, palpitations, and lack of energy.
2. Mostly used for nervousness in students preparing for exams.
3. The cardinal diagnostic signs are an unhealthy facial complexion and palpitations in the umbilical area.



3-6: INSOMNIA



INSOMNIA

1. Difficulty in falling asleep at night
2. Waking up during the night
3. Waking up too early
4. Not well-rested after a night's sleep
5. Worry about not sleeping
6. Tiredness or sleepiness during the day
7. Difficulty concentrating or keeping focus during the day
8. Irritability
9. Anxious
10. Depressed

HERBAL FORMULAS FOR INSOMNIA

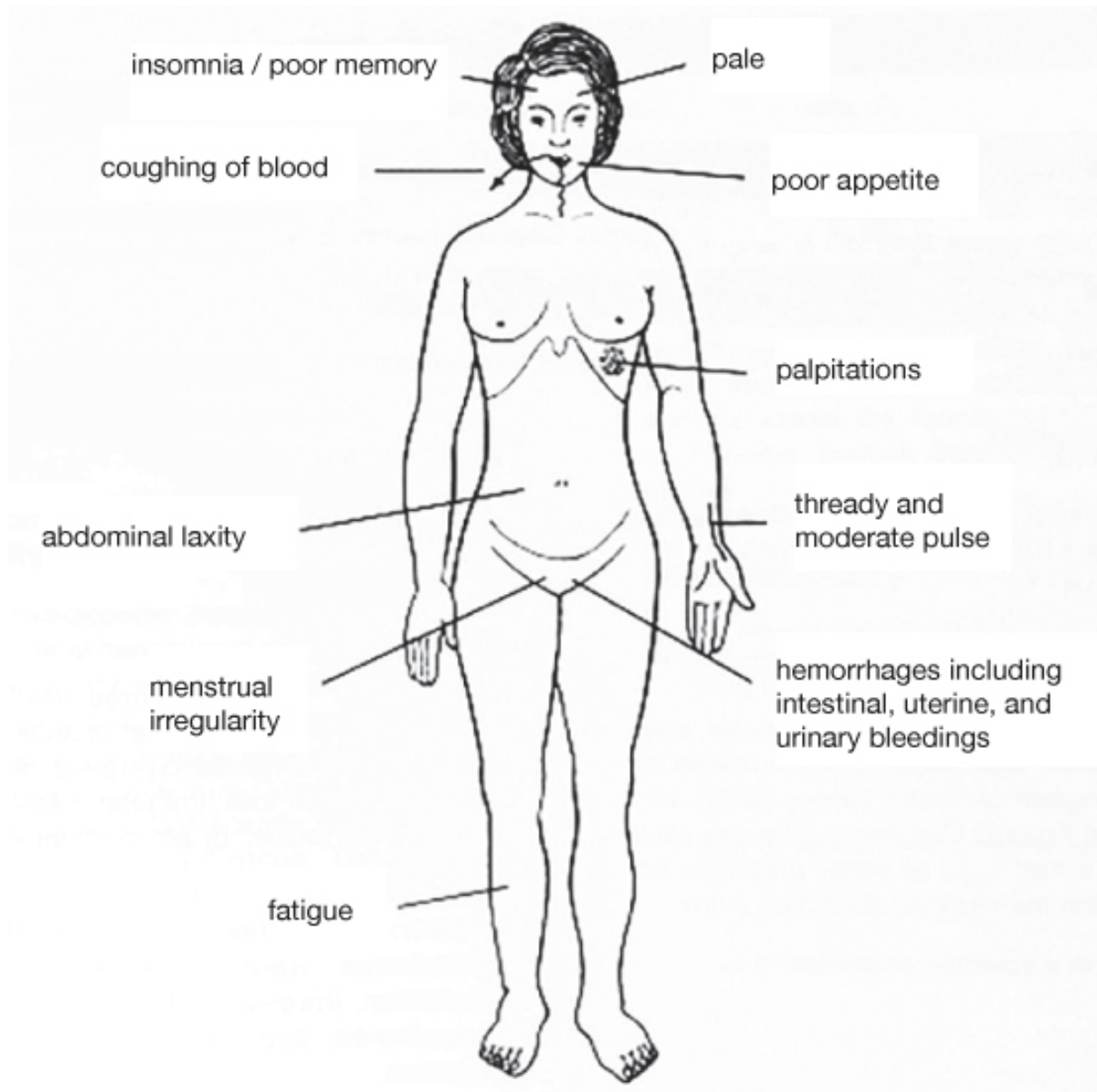
The following antianxiety herbal formulas are also effective in treating insomnia:

1. Pinellia and Magnolia Combination (Ban Xia Hou Po Tang 半夏厚朴湯)
2. Bupleurum and Peony Formula (Jia Wei Xiao Yao San 加味道遙散)
3. Bupleurum, Citrus, and Pinellia Formula (Yi Gan San Jia Chen Pi Ban X
抑肝散加陳皮半夏湯)
4. Bupleurum and Dragon Bone Combination (Chai Hu Jia Long Gu Mu
Tang 柴胡加龍骨牡蠣湯)
5. Cinnamon and Dragon Bone Combination (Gui Zhi Jia Long Gu Mu
Tang 桂枝加龍骨牡蠣湯)
6. Coptis and Scute Combination (Huang Lian Jie Du Tang 黃連解毒湯)
7. Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯)

OTHER HERBAL FORMULAS FOR INSOMNIA

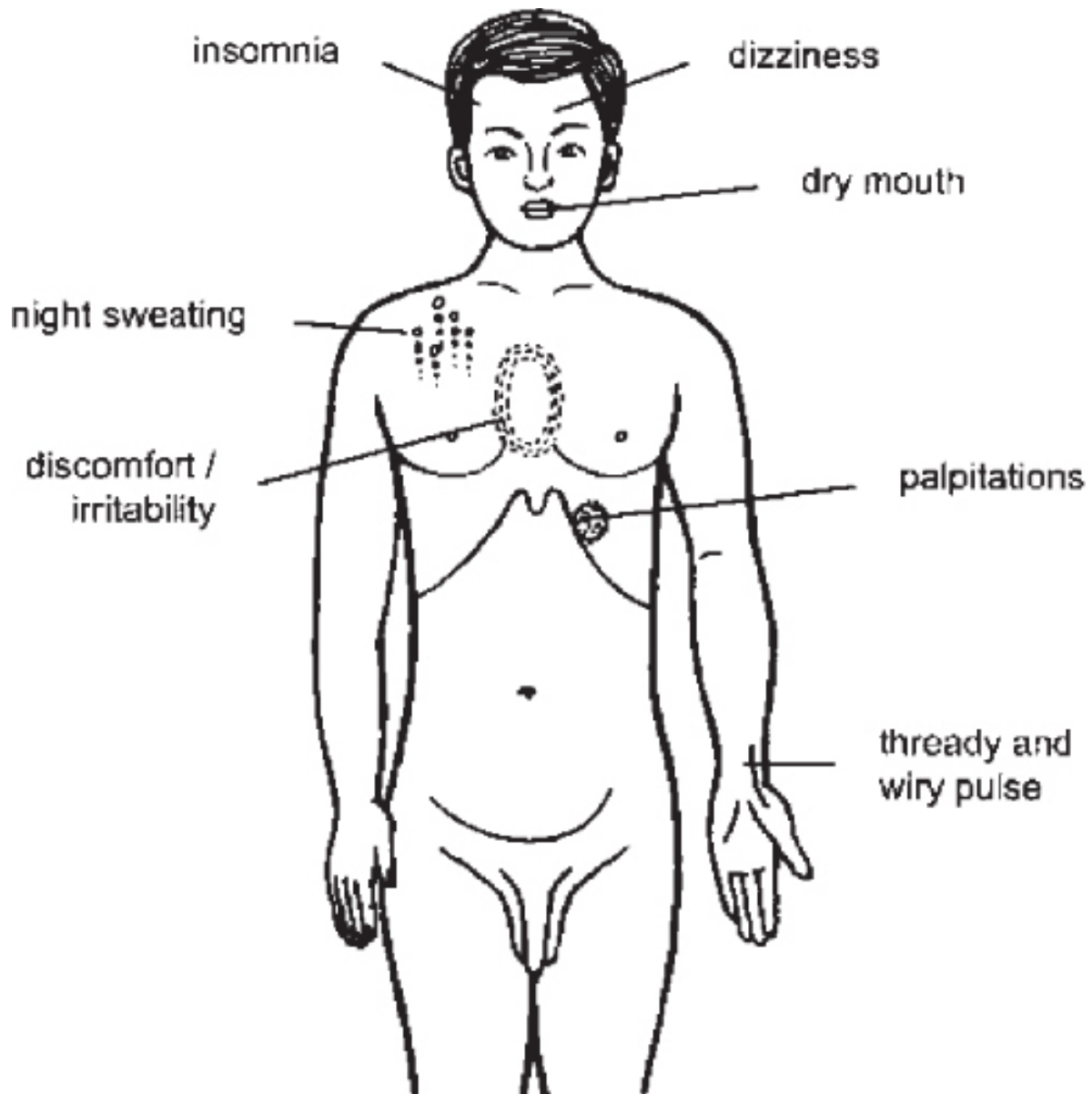
Ginseng and Longan Combination (Gui Pi Tang 歸脾 湯)

1. For deficient conformation, such as anemia, nervousness, fatigue, a palpitations.



Zizyphus Combination (Suan Zao Ren Tang 酸棗仁湯)

1. Zizyphus is Chinese medicine's sleep-inducing herb.
2. Has nerve calming effect and is good for nervousness, weakness with chill, or dampness.

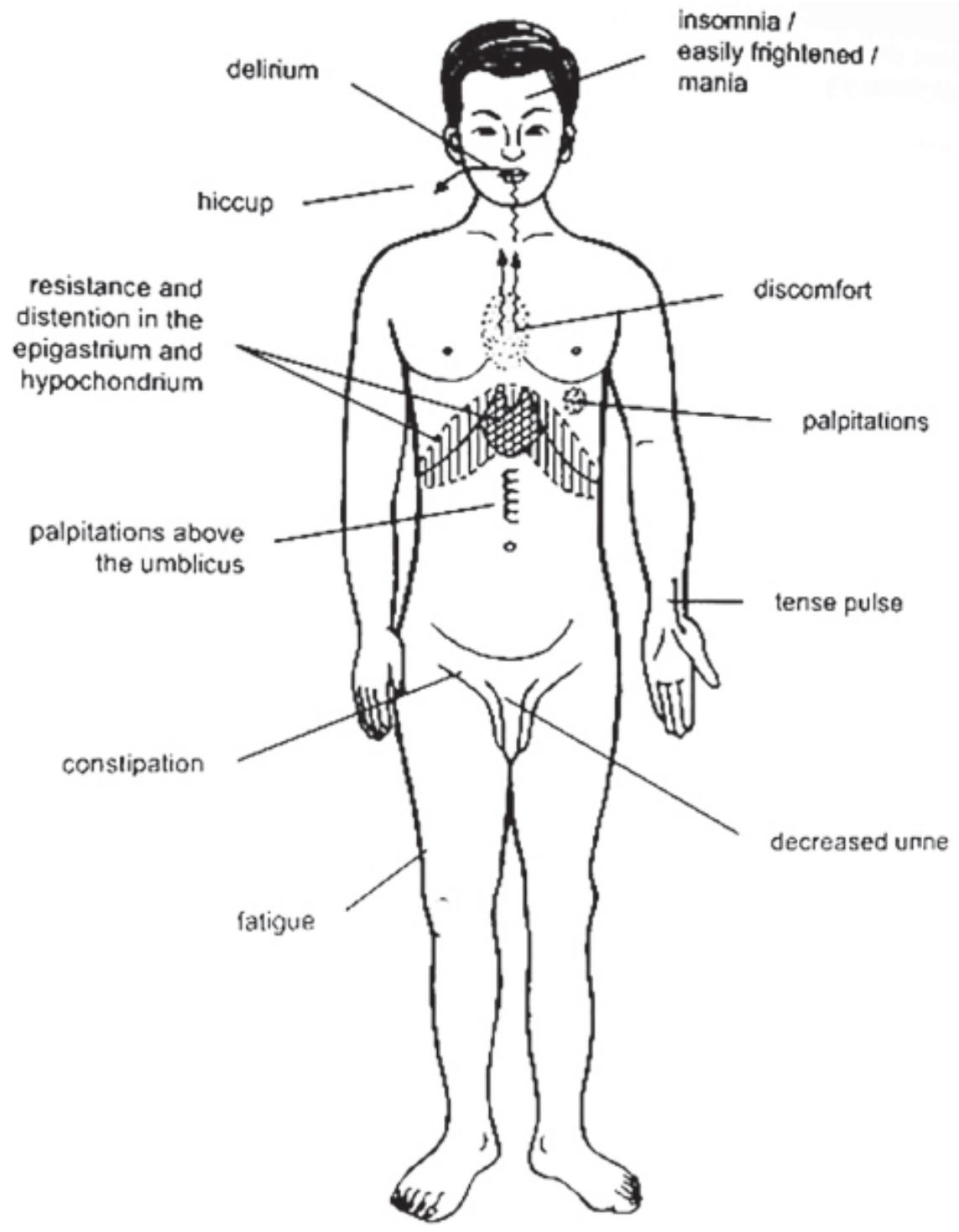


3-7: HERBAL FORMULAS FOR EMOTIONAL IRRITABILITY

Bupleurum and Dragon Bone Combination (Chai Hu Jia Long Gu Mu Li Tang 柴胡加龍骨牡蠣湯)

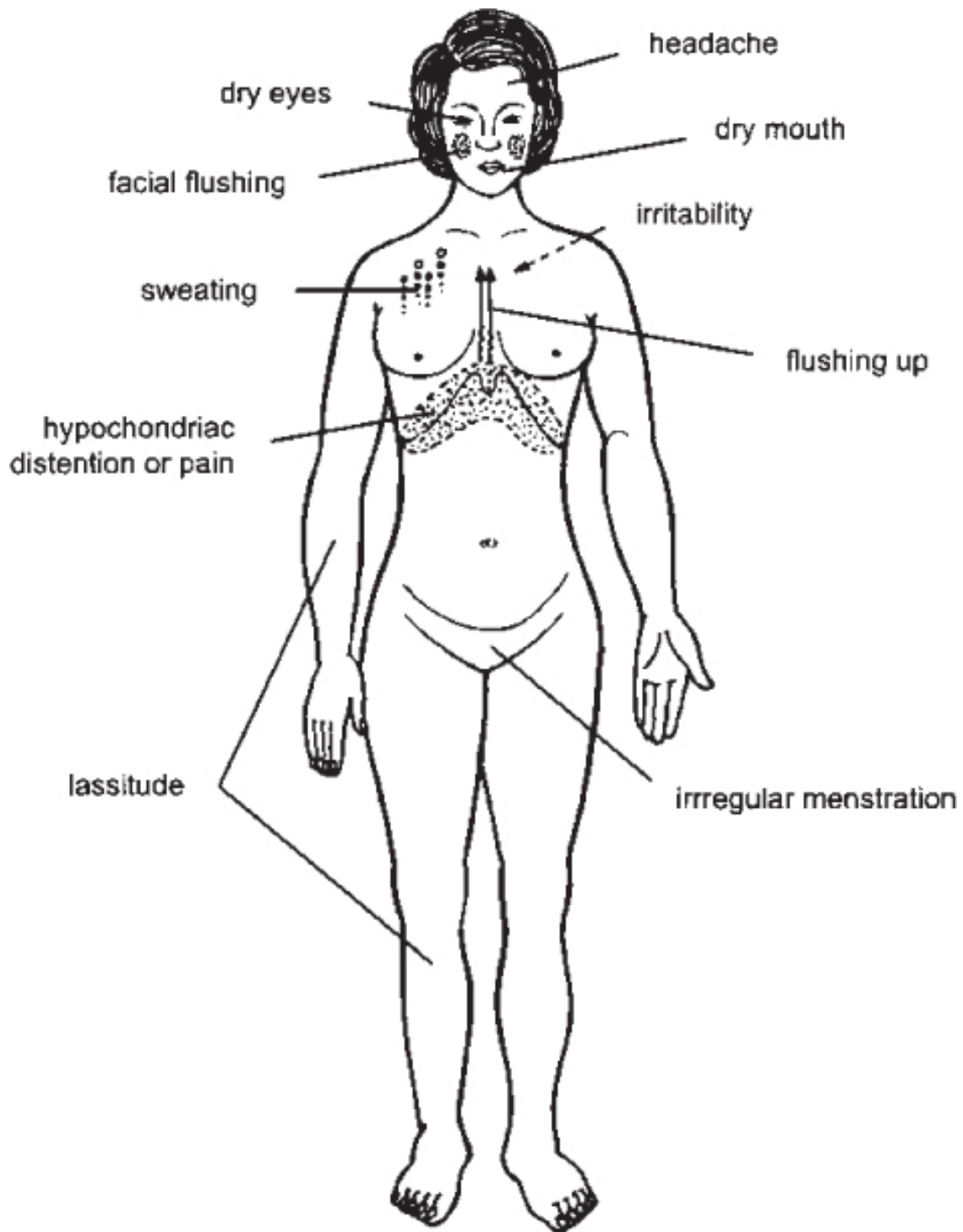
1. Irritability

2. Insomnia
3. Heart palpitations
4. Poor appetite
5. Easily fatigued
6. Chest wall distress



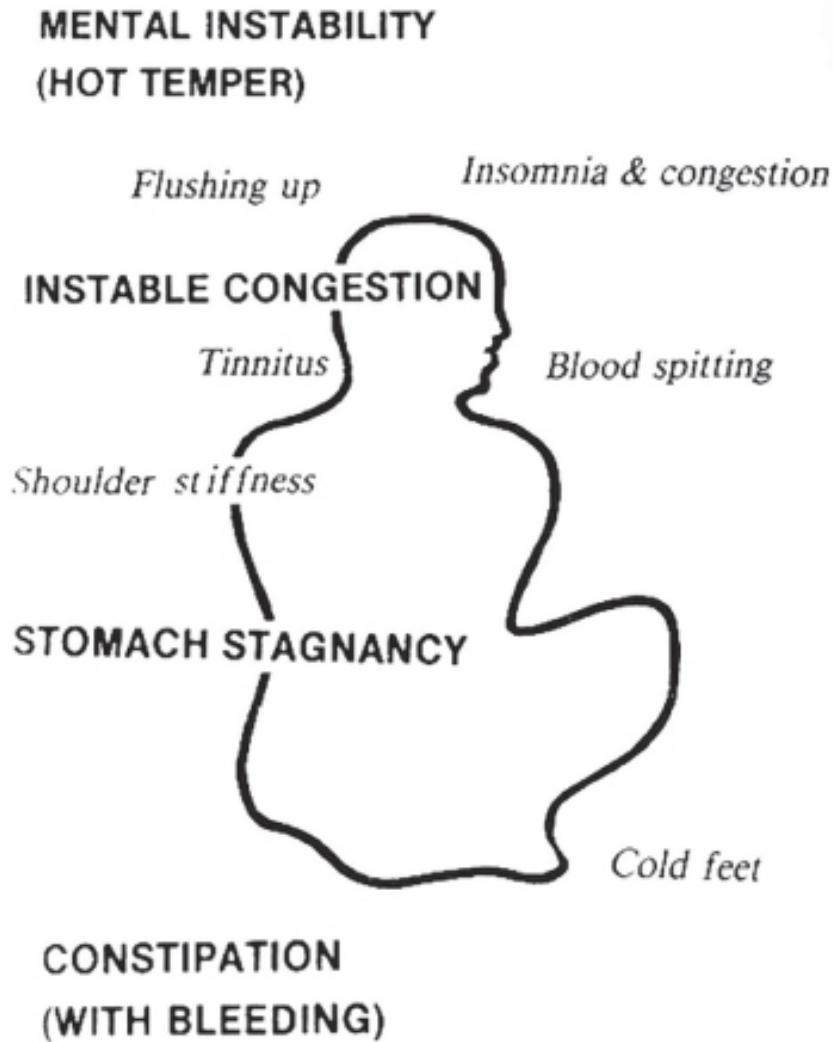
Bupleurum and Peony Formula (Jia Wei Xiao Yao San
 加味道遙散)

1. For cold conformation, menstrual irregularities, aching shoulders and shoulder blades, insomnia, and constipation, often accompanied by feverish sensation.
2. Great for weak conformations, especially in women with a variety of symptoms.
3. Particularly suited to menopausal disorders, dysmenorrhea, and other problems arising out of an imbalance in female hormones.



Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯)

1. For facial flushing, flushing up, constipation, sensation of distention beneath the stomach, and insomnia.
2. May be used to prevent or treat a hangover.

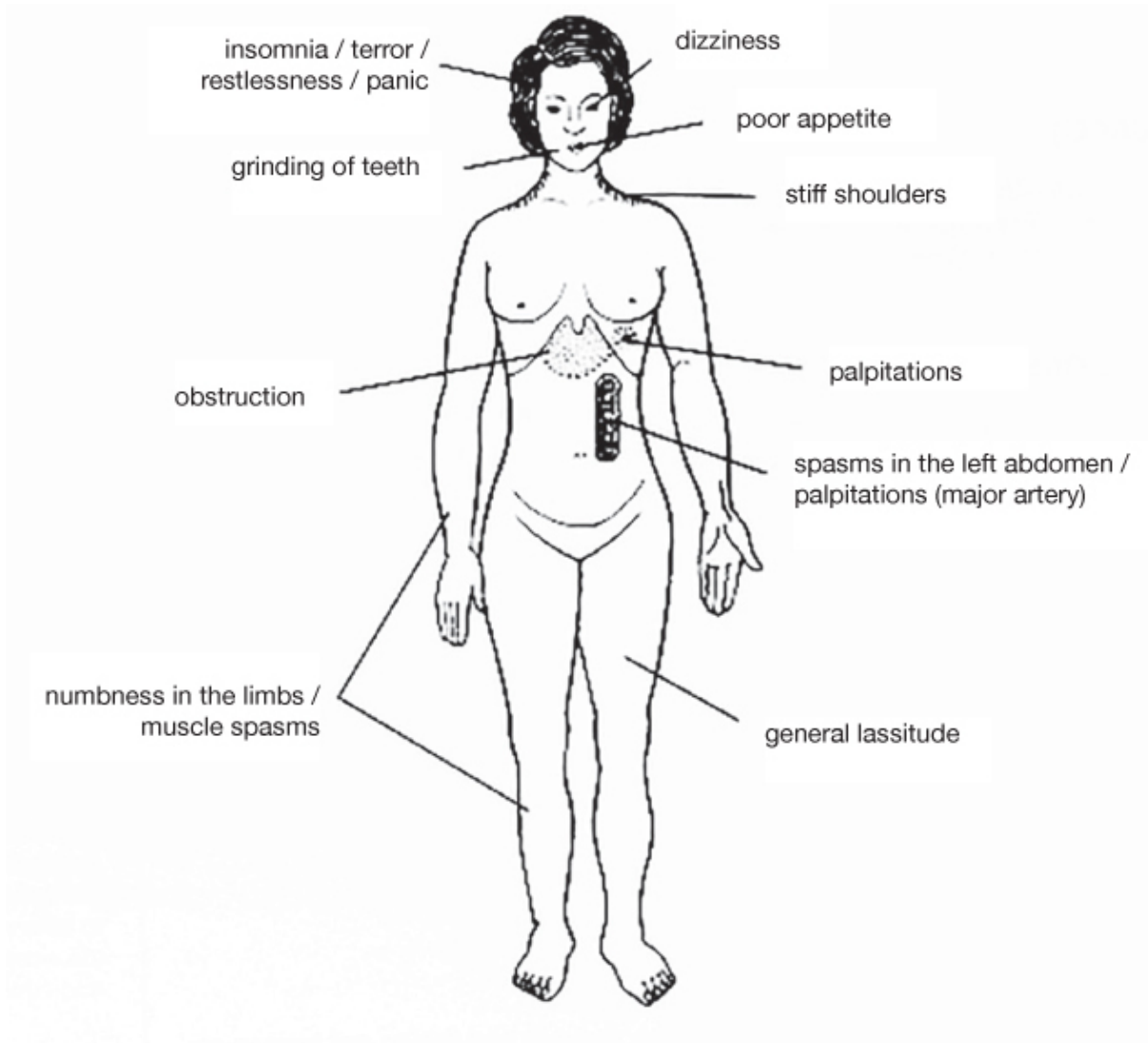


3-8: HERBAL FORMULAS FOR STRESS DISORDER

Bupleurum Formula (Yi Gan San 抑肝散)

The Chinese name “Yi Gan San 抑肝散” means “To Calm the Liver powder.” For stress, it is used for:

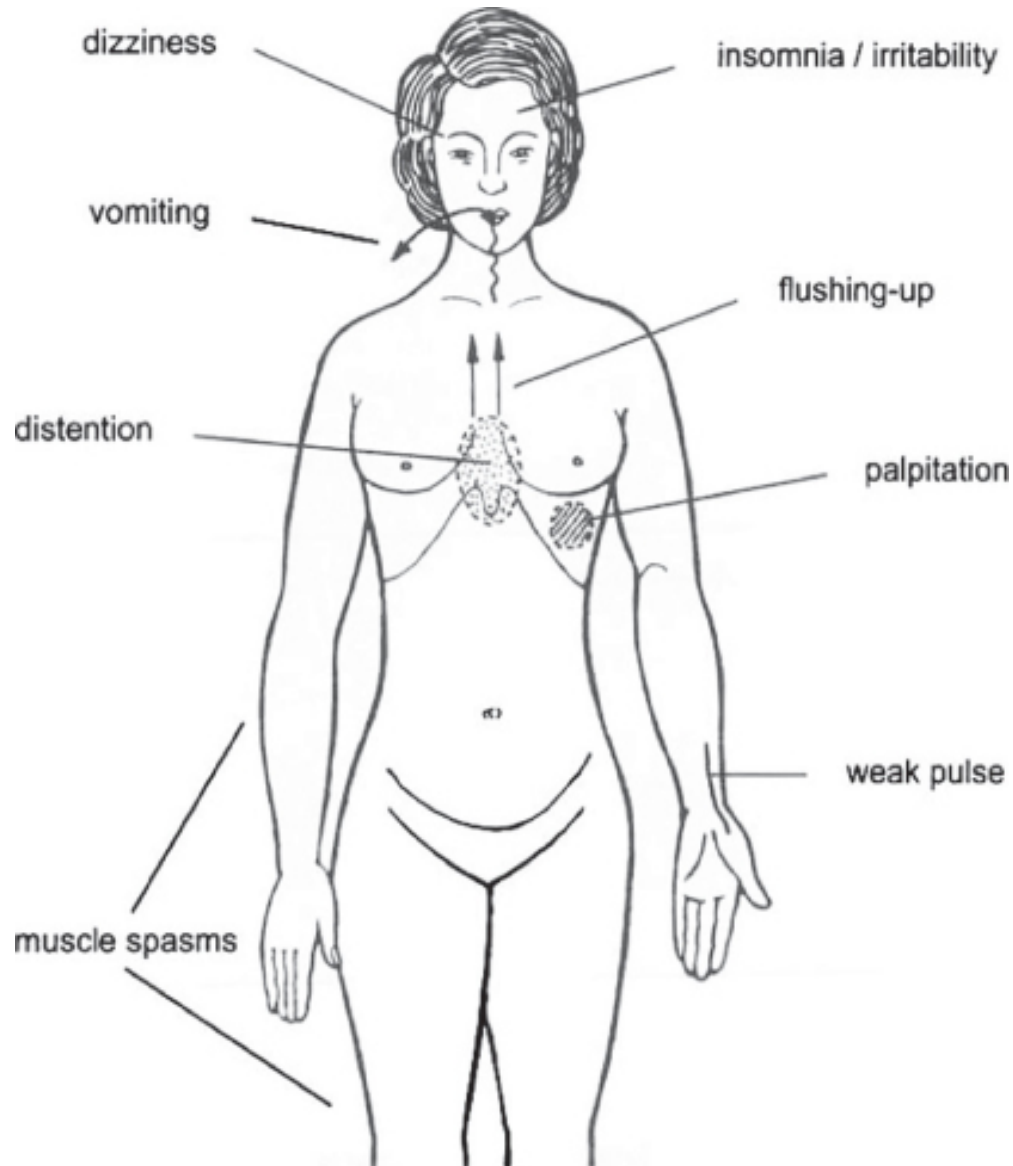
1. Quickness to anger
2. Uneasiness, panic, terror, hysteria
3. Often has a bitter taste in the mouth
4. Tenderness and spasms in abdominal muscle
5. Hyperactivity of abdomen



Bupleurum, Citrus, and Pinellia Formula (Yi Gan San Jia Chen Pi Ban Xia 抑肝散加陳皮半夏湯)

1. Nervousness

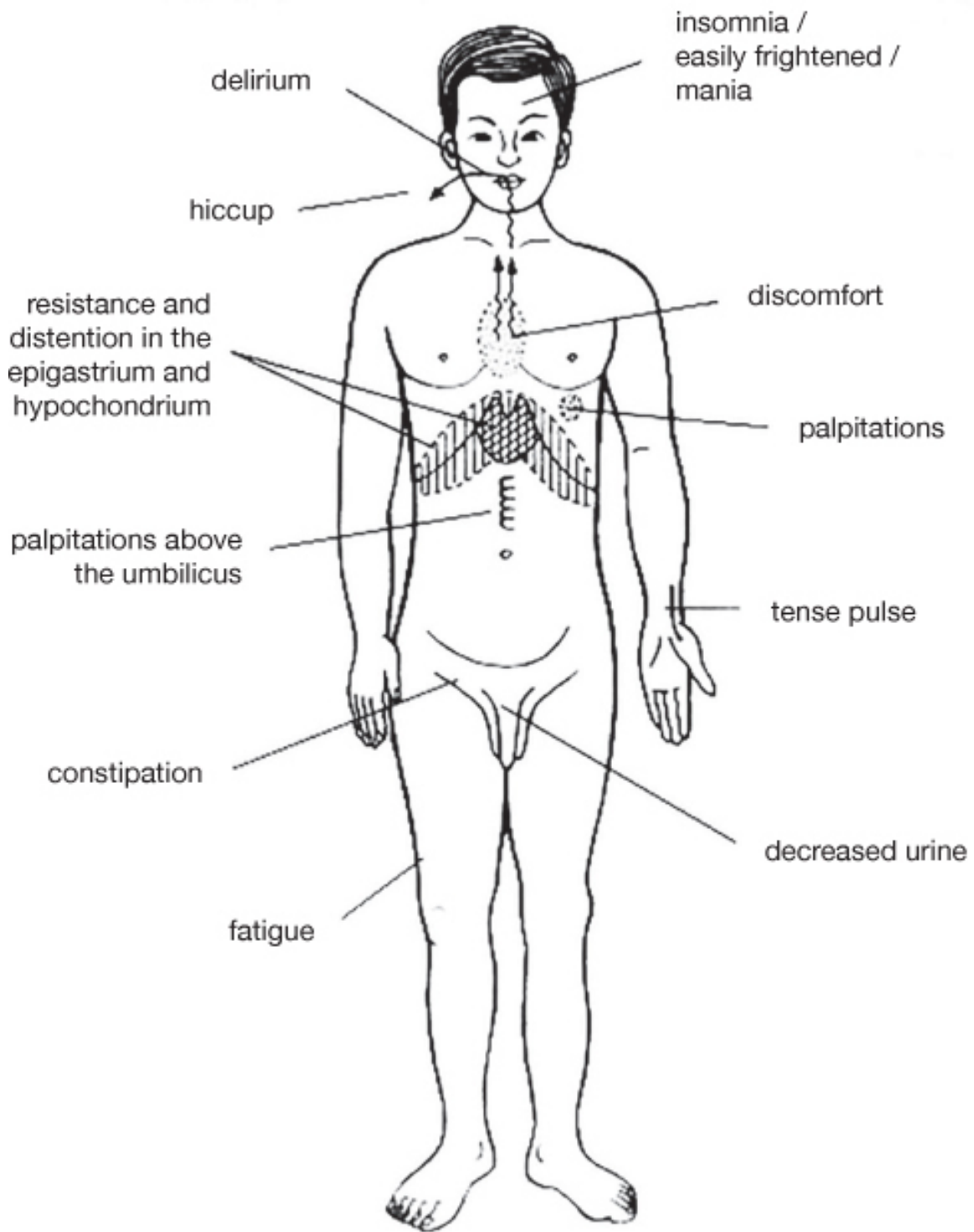
2. Anxiety
3. Quickness to anger
4. Insomnia



Bupleurum and Dragon Bone Combination (Chai Hu Jia Long Gu Mu Li Tang 柴胡加龍骨牡蠣湯)

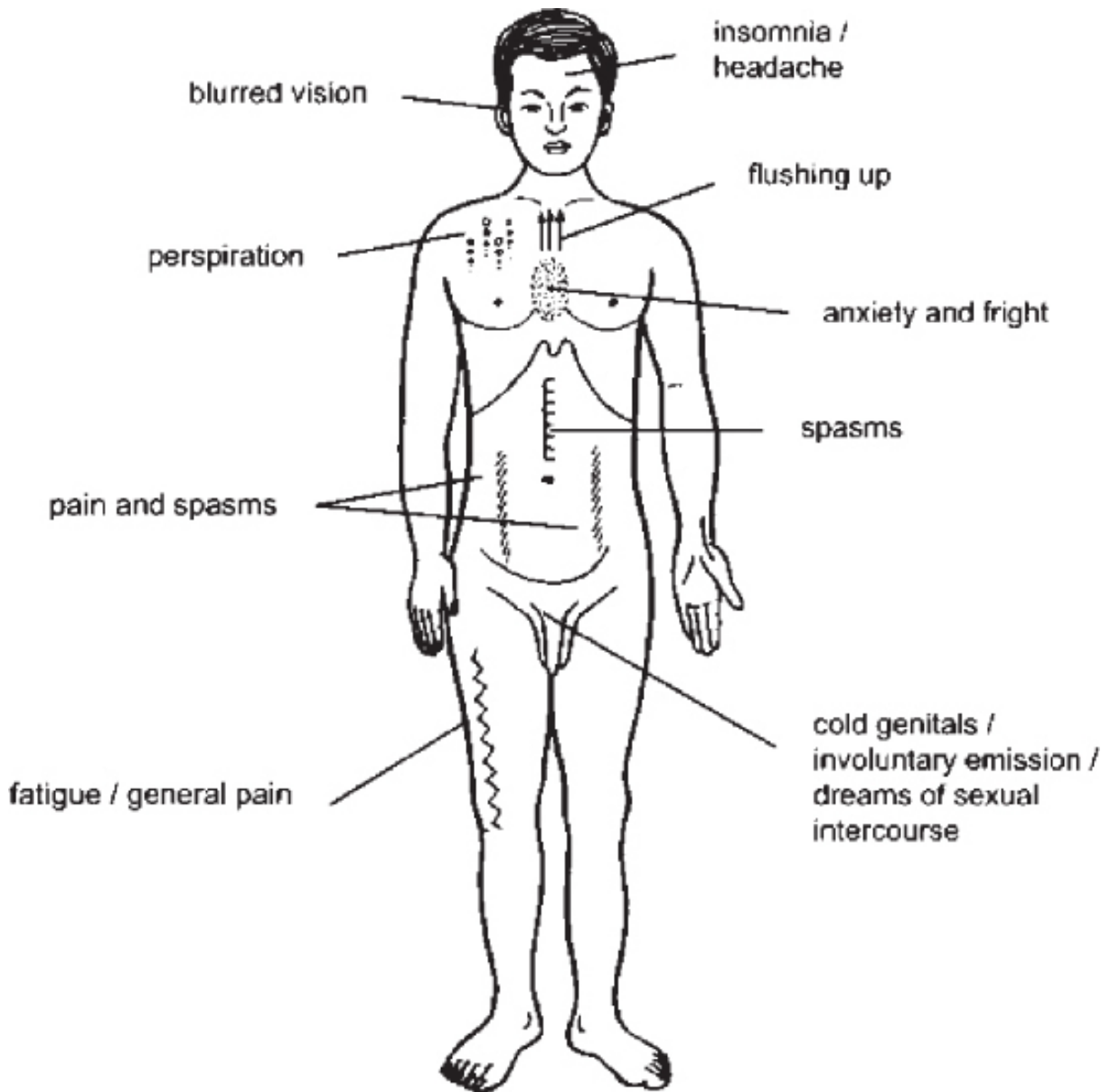
1. Neurosis, hysteria
2. Depression

- 3. Attention deficit
- 4. Palpitations
- 5. Insomnia



Cinnamon and Dragon Bone Combination (Gui Zhi Jia Long Gu Mu Li Tang 桂枝加龍骨牡蠣湯)

1. Nervousness
2. Palpitations
3. Insomnia
4. Enuresis
5. Nocturnal emission
6. Impotence
7. Premature ejaculation

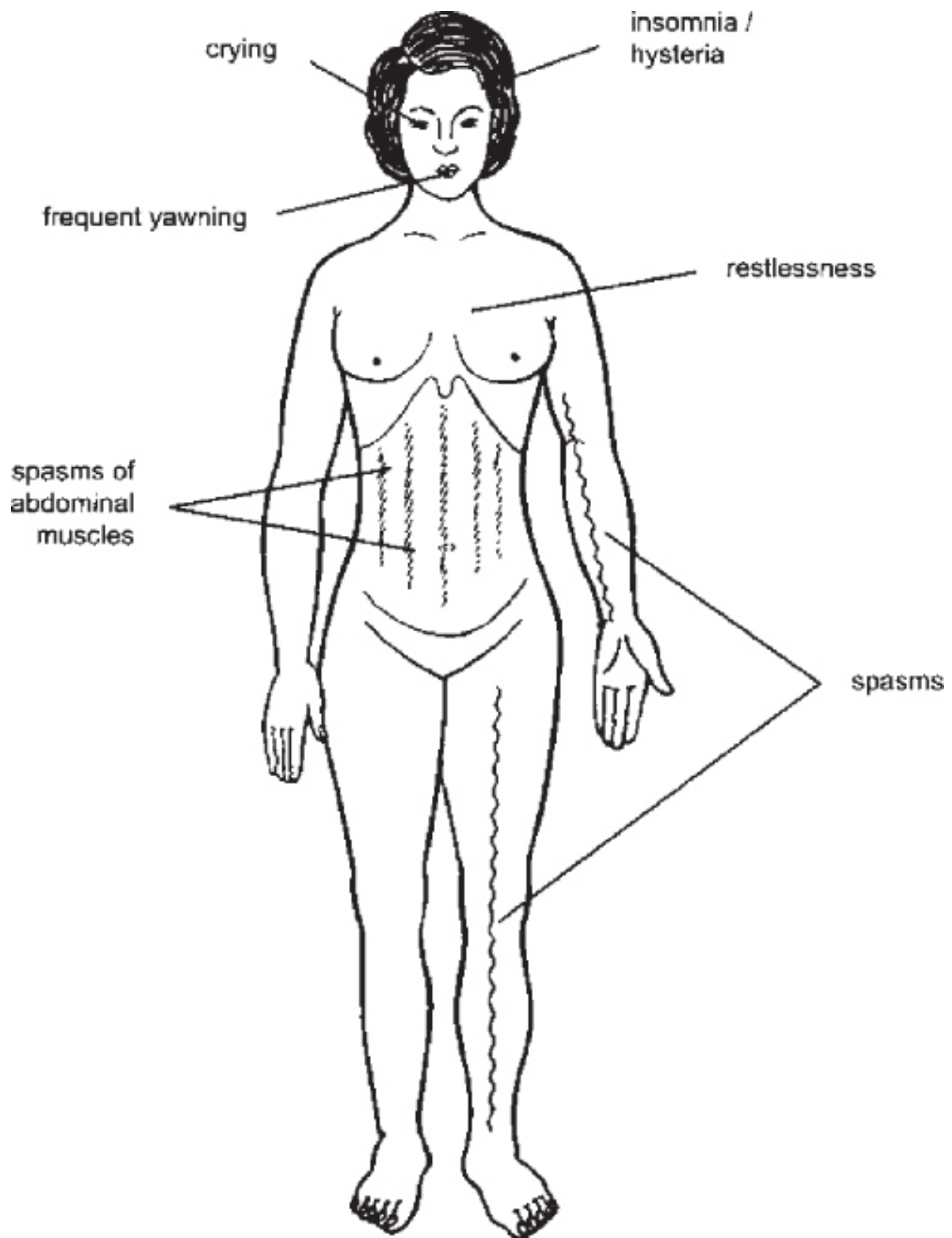


Licorice and Jujube Combination (Gan Mai Da Zao Tang 甘麥大棗湯)

1. Depression
2. Hysteria
3. Nervousness
4. Mania
5. Muscle spasms

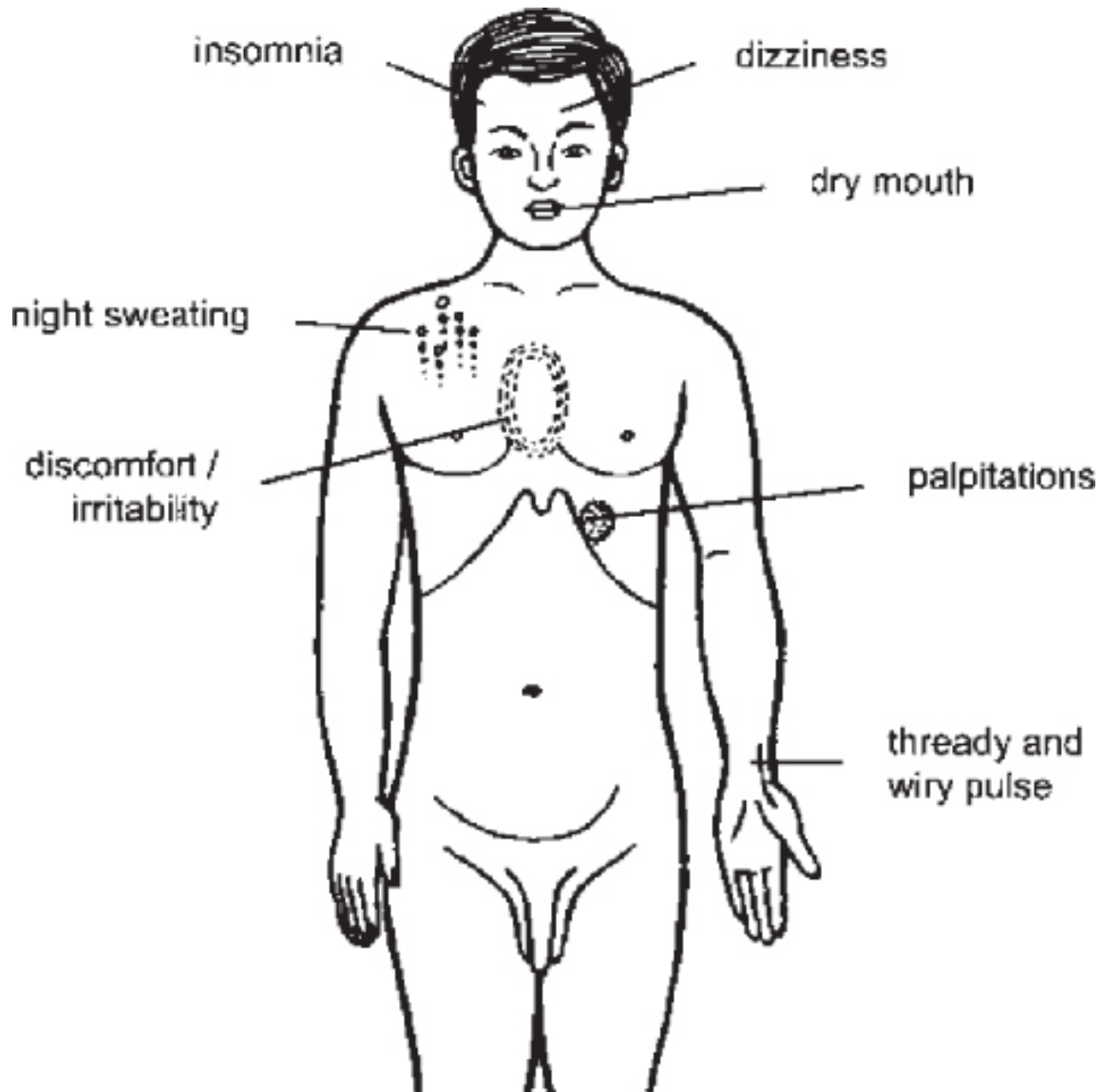
6. Insomnia

7. Tight abdominal muscles



Zizyphus Combination (Suan Zao Ren Tang 酸棗仁湯)

1. Nervousness
2. Insomnia
3. With or without chills





CHAPTER 4

The Physiological Effects of Chronic Low Back Pain

4-1: HERBAL FORMULAS FOR FATIGUE AND LOW ENERGY

Ginseng Nutritive Combination (Ren Shen Yang Rong Tang 人參養榮湯)

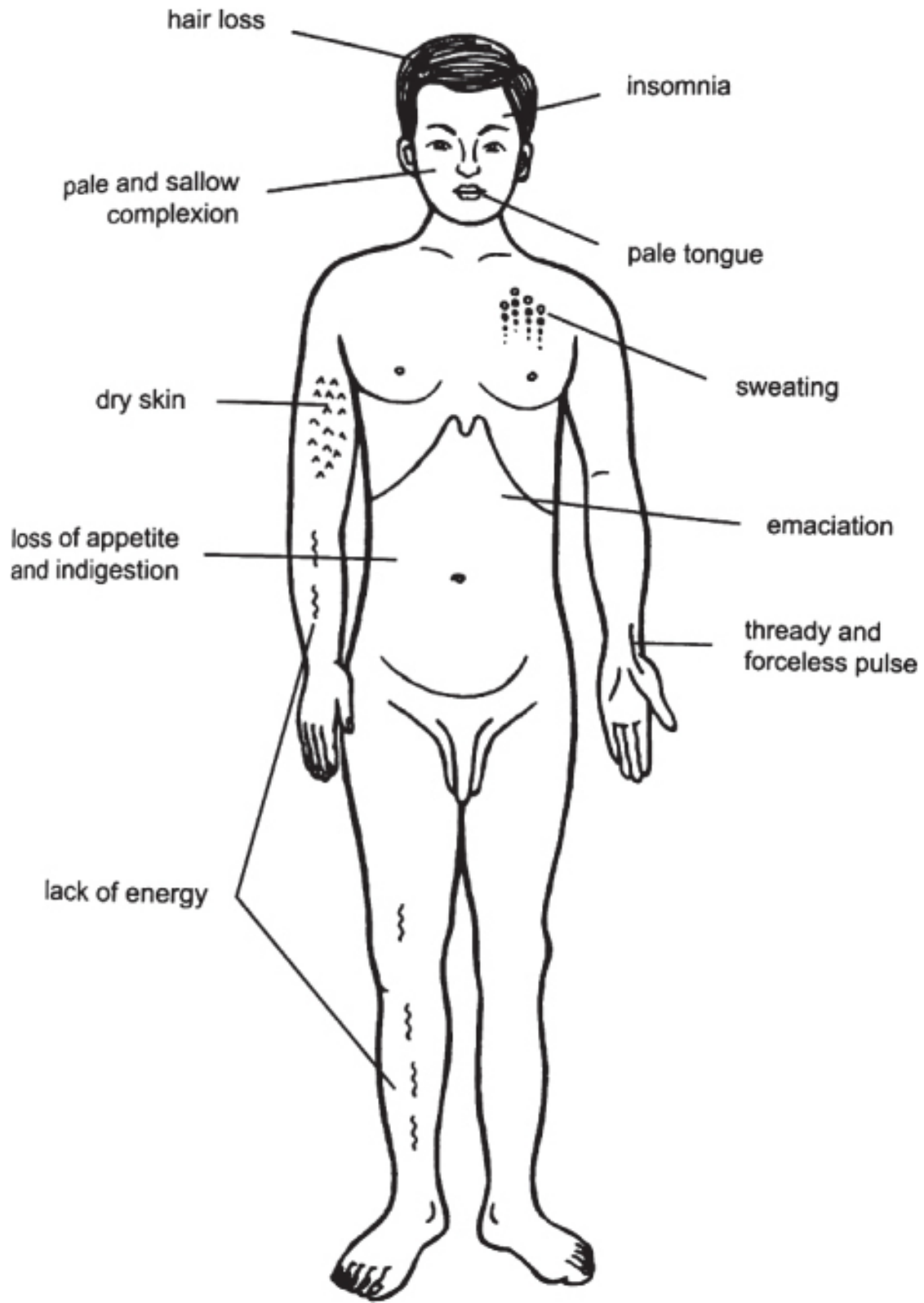
The ingredients are tang-kuei, peony, steamed rehmannia, ginseng, atractylodes, hoelen, licorice, cinnamon, astragalus, citrus, polygala, and schizandra.

1. Schizandra is an antitussive agent.
2. Polygala and citrus are expectorants.
3. Polygala and schizandra have sedative properties and are bodybuilding tonics.
4. Citrus can calm the stomach and is an herb frequently used for digestion.
5. Citrus, polygala, and schizandra all have warming properties and can help with chills.

This formula is a grand tonic that can be used to treat weakness of both Qi and blood with gastrointestinal calming, expectorant, and sedative effects.

Indications

1. Lassitude
2. Anorexia
3. Night sweats
4. Cold hands and feet
5. Weakness
6. Anemia



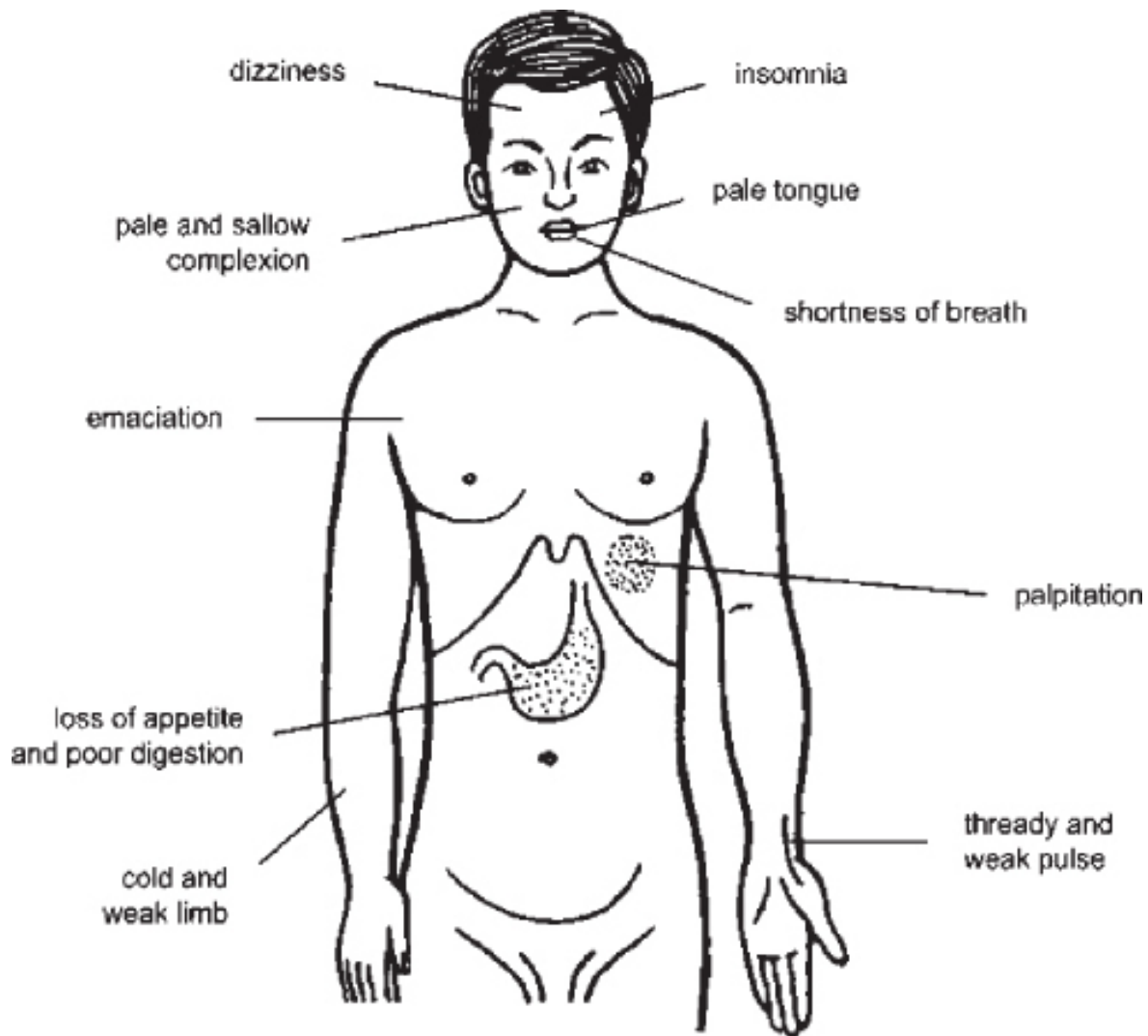
Ginseng and Tang-kuei Ten Combination (Shi Quan Da Bu Tang 十全大補湯)

The ingredients are tang-kuei, cnidium, peony, rehmannia, ginseng, atractylodes, hoelen, licorice, astragalus, and cinnamon.

This formula is the union of **Tang-kuei Four Combination (Si Wu Tang 四物湯)** and **Four Major Herb Combination (Si Jun Zi Tang 四君子湯)** plus cinnamon and astragalus. The result is a comprehensive super tonic formula that is effective for both blood and Qi weaknesses.

Indications

1. Poor physical conditioning, weakness, and lassitude
2. Anorexia
3. Cold hands and feet
4. Night sweats
5. Anemia



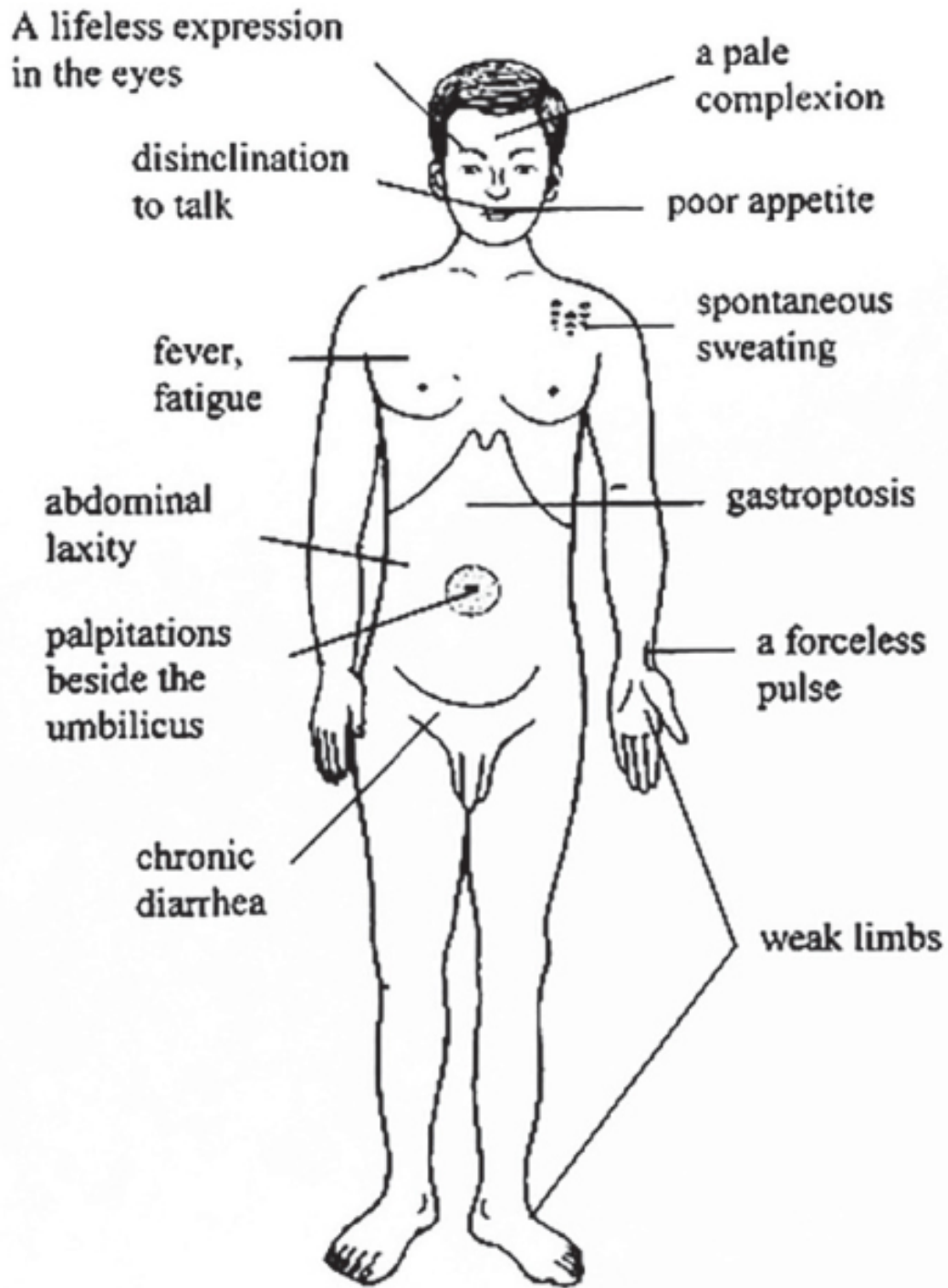
Ginseng and Astragalus Combination (Bu Zhong Yi Qi Tang 補中益氣湯)

The ingredients are ginseng, atractylodes, licorice, raw ginger, jujube, tang-kuei, astragalus, citrus, cimicifuga, and bupleurum.

Indications

1. Weak physical constitution
2. Poor gastrointestinal function
3. Easily fatigued
4. Weakness
5. Anorexia

6. Night sweat



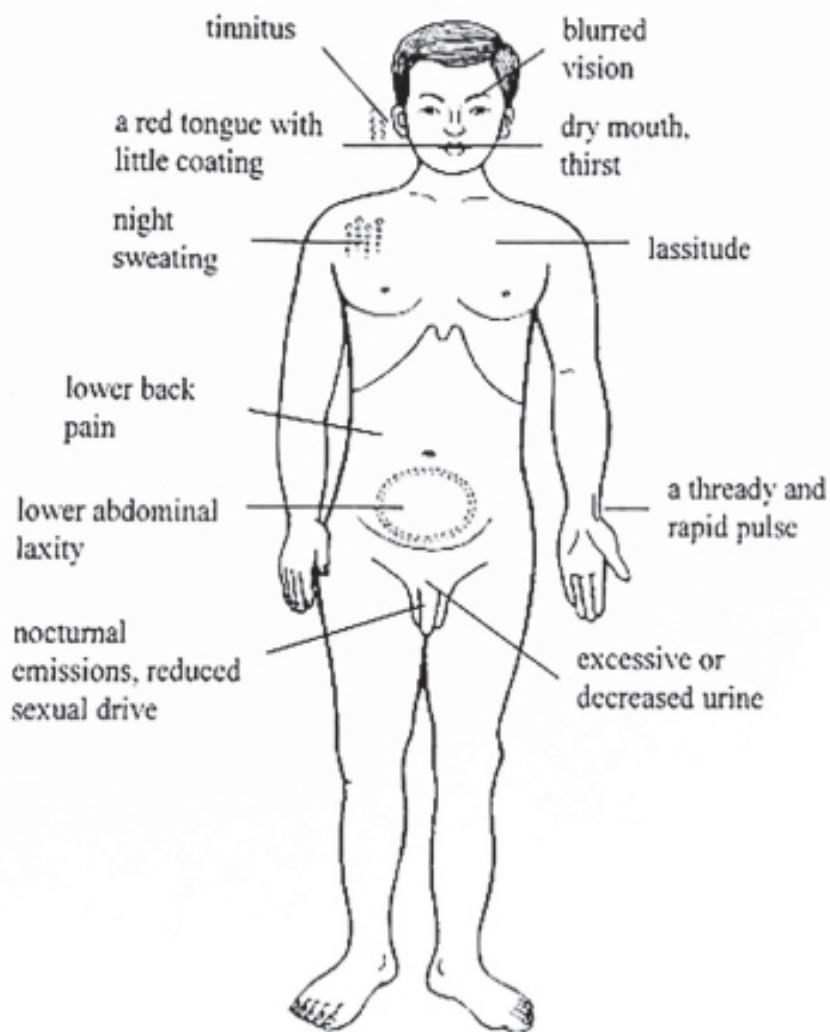
Rehmannia Six Formula (Liu Wei Di Huang Wan 六味地黄丸)

The ingredients are dried rehmannia, dioscorea, cornus, hoelen, alisma, and moutan.

1. Rehmannia, dioscorea, and cornus are tonic, ascending, and moistening herbs and potent bodybuilders.
2. Hoelen and alisma rectify regional fluid imbalances and stagnation and are drying in nature.
3. Moutan removes obstructions in blood circulation.

Indications

1. Easily fatigued
2. Low energy level
3. Thirst
4. Weakness in the lower back and knees
5. Difficult urination, frequent urination, oliguria, or polyuria
6. Edema
7. Itching in the groin



Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸)

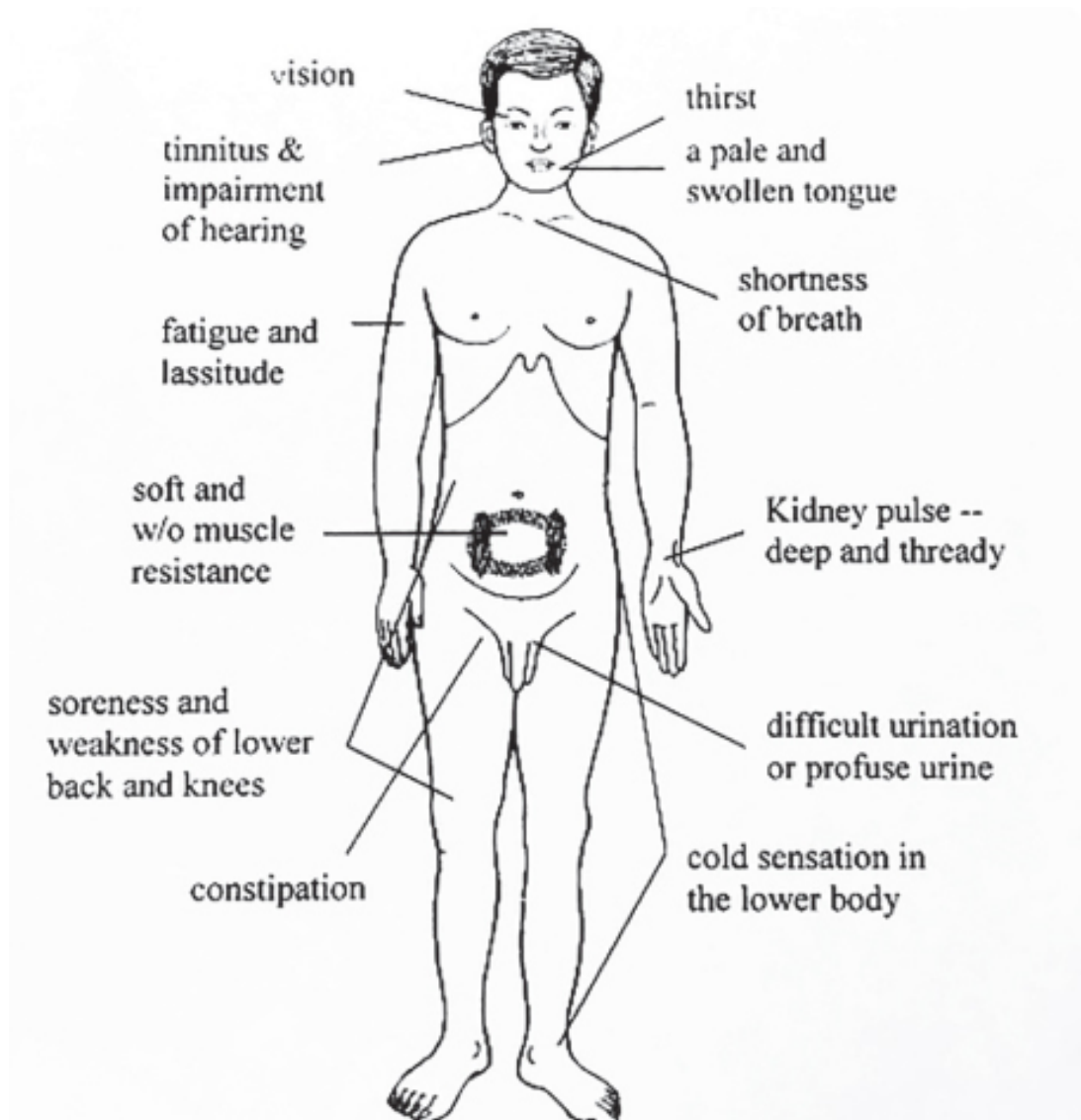
The ingredients are steamed rehmannia, dioscorea, comus, hoelen, alisma, moutan, cinnamon, and aconite.

1. Steamed rehmannia, dioscorea, and comus are ascending tonics with strong nutritive qualities that are also warming and moistening.
2. Hoelen and alisma are drying herbs that are added to remove local accumulations of stagnant water.
3. Moutan works with the rehmannia to improve blood circulation and remove Qi and blood obstructions.

4. Aconite is one of the most warming herbs for treating chill conformations

Indications

1. The basic indicator for this formula is coldness in the hands and feet.
2. It is also good for numbness in the hands and feet.
3. It is suitable for weak-chill-dry conformations with symptoms of chill, general fatigue, lassitude, excessive urination, and dry, chapped skin.
4. It also helps combat stagnant fluids and impaired blood circulation.

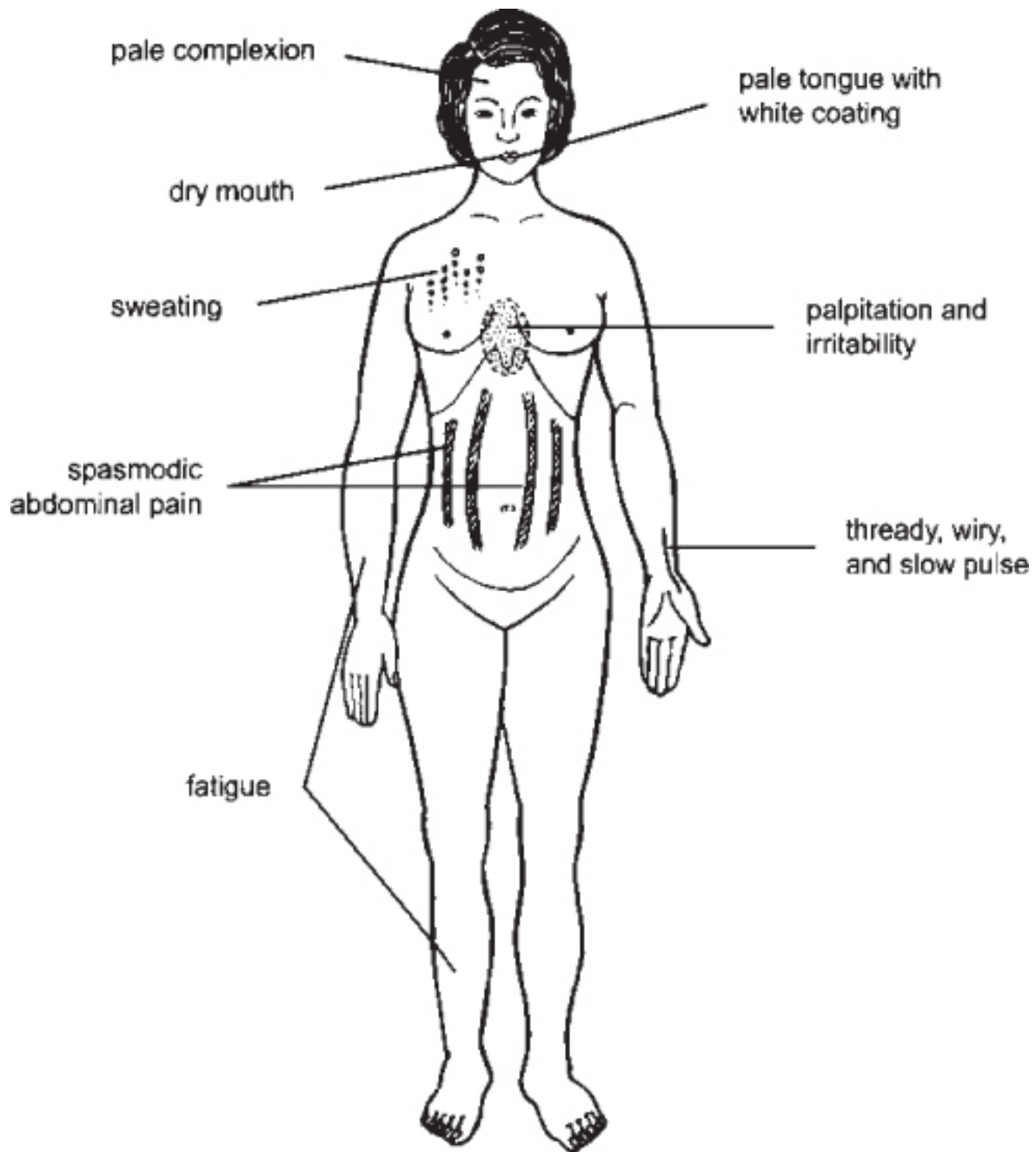


Minor Cinnamon and Peony Combination (Xiao Jian Zhong Tang 小建中湯)

The ingredients are cinnamon, peony, raw ginger, jujube, licorice, and maltose.

Indications

1. Weak physical constitution
2. Easily fatigued
3. Pale facial complexion
4. Cold hands and feet
5. Frequent or copious urination
6. Bed-wetting
7. Anxiety
8. Chronic gastroenteritis

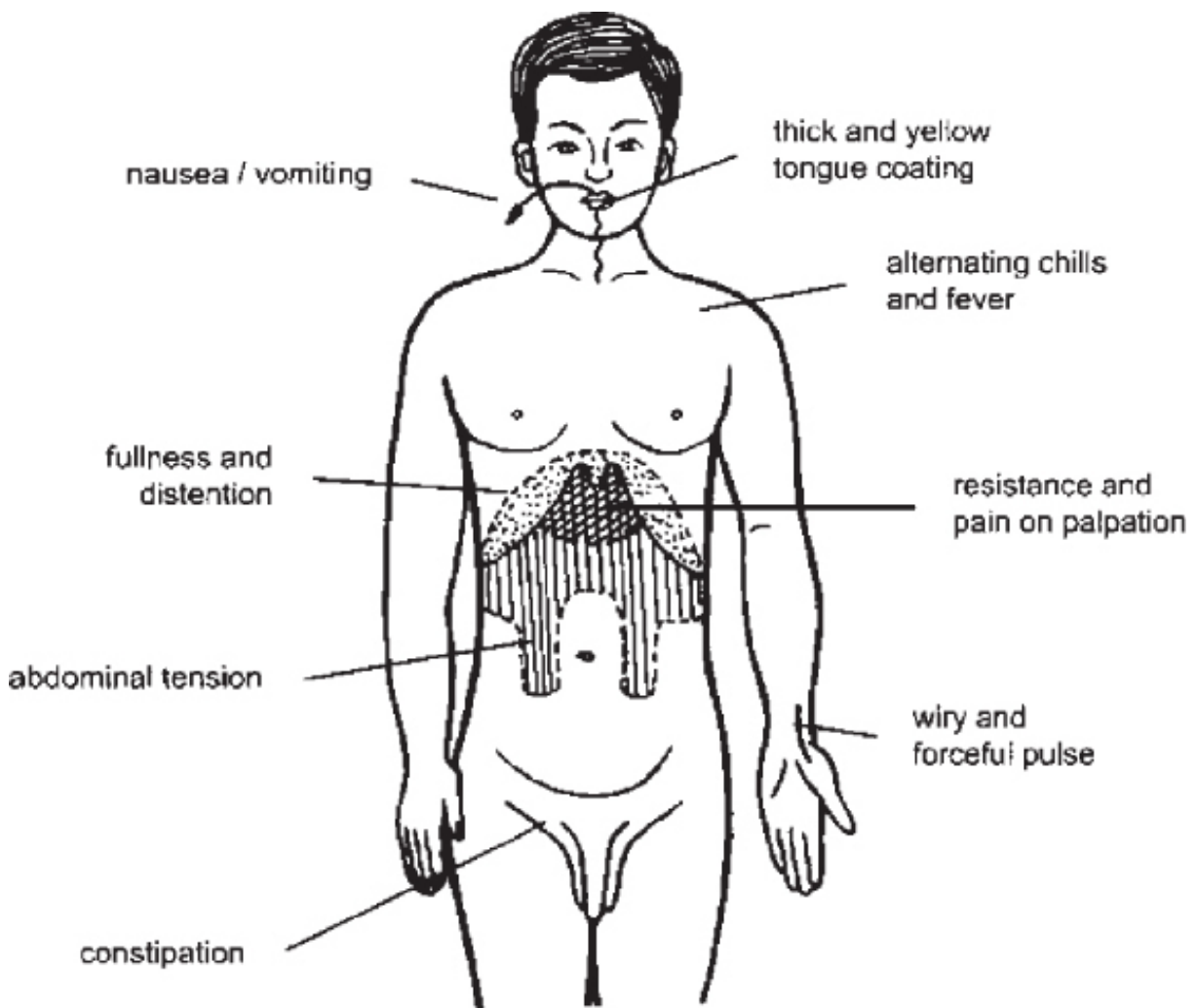


Major Bupleurum Combination (Da Chai Hu Tang 大柴胡湯)

The ingredients of this formula are bupleurum, scute, pinellia, raw ginger, jujube, chih-shih, peony, and rhubarb.

Indications

1. Thin constitution
2. Sensation of resistance and pain beneath the heart
3. Constipation
4. Aching shoulders
5. Yellow tongue fur

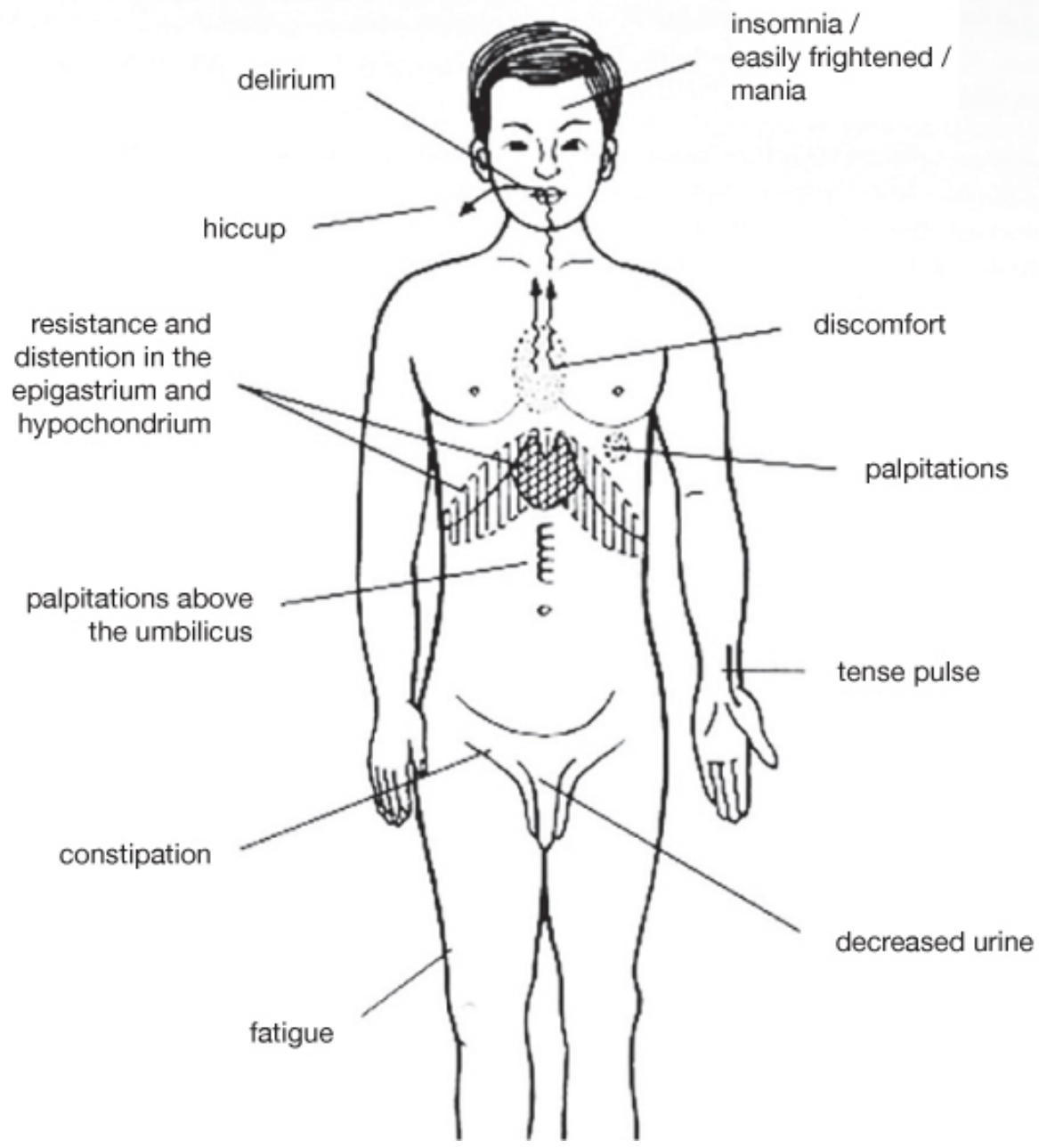


Bupleurum and Dragon Bone Combination (Chai Hu Jia Long Gu Mu Li Tang 柴胡加龍骨牡蠣湯)

The ingredients are bupleurum, scute, pinellia, raw ginger, jujube, ginseng, cinnamon, hoelen, dragon bone, and oyster shell.

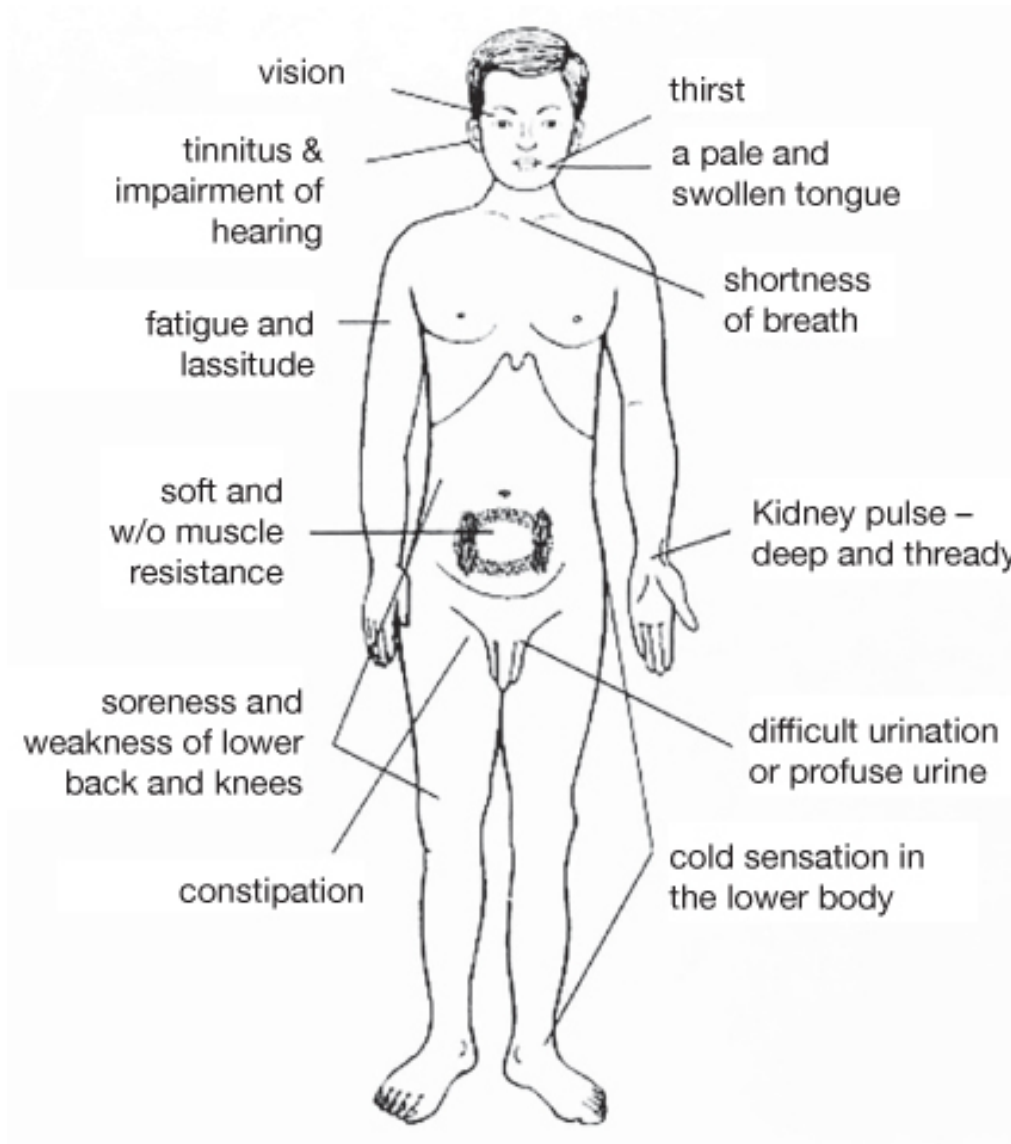
Indications

1. Nervousness, hysteria
2. Depression
3. Insomnia
4. Palpitations
5. Attention deficit



4-2: HERBAL FORMULAS FOR WEAKNESS BELOW THE WAIST

Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸) —for a generalized weakness in the waist and both lower extremities.



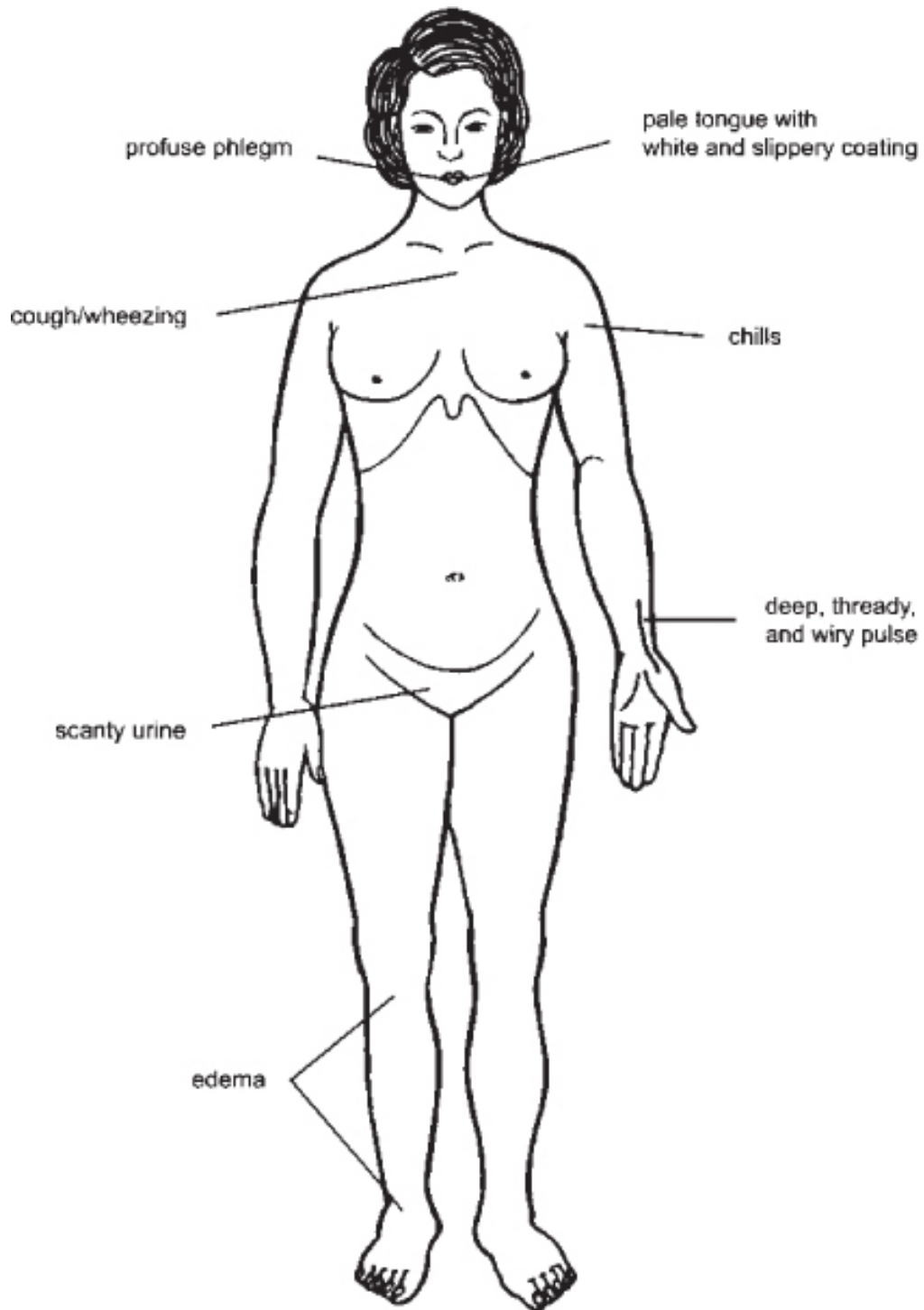
Achyranthes and Plantago Formula (Niu Che Shen Qi Wan 牛車腎氣丸)

The ingredients are steamed rehmannia, dioscorea, comus, hoelen, alisma, moutan, cinnamon, aconite, achyranthes, and plantago.

Indications

1. A generalized weakness in the waist and both lower extremities

2. Chills
3. White tongue coating
4. Profuse phlegm
5. Edema
6. Insufficient urine



4-3: HERBAL FORMULAS FOR TIRED LEGS

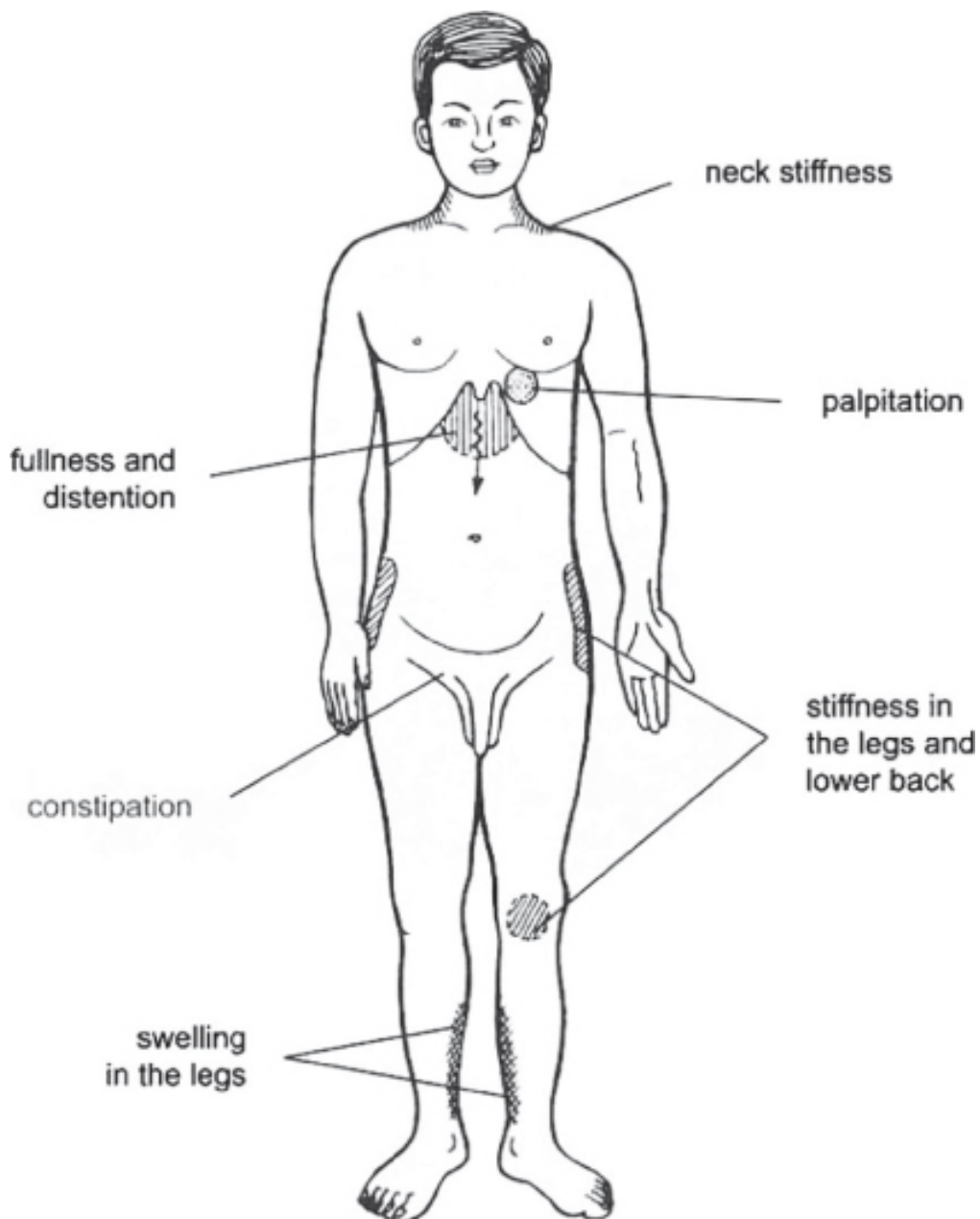
Areca Seed Nine Combination (Jiu Wei Bin Lang Tang 九味檳榔湯)

The ingredients are areca seed, magnolia, cinnamon, perilla, citrus, raw ginger, licorice, Saussurea, and rhubarb.

1. The chief herb of this formula, areca seed, relieves distress in the substernal region.
2. Magnolia amplifies that effect with the assistance of rhubarb.
3. These three herbs (areca seed, magnolia, rhubarb) possess descending actions.

Indications

1. Cold conformation
2. Low energy level
3. Constipation
4. Edema
5. Palpitations
6. Shortness of breath



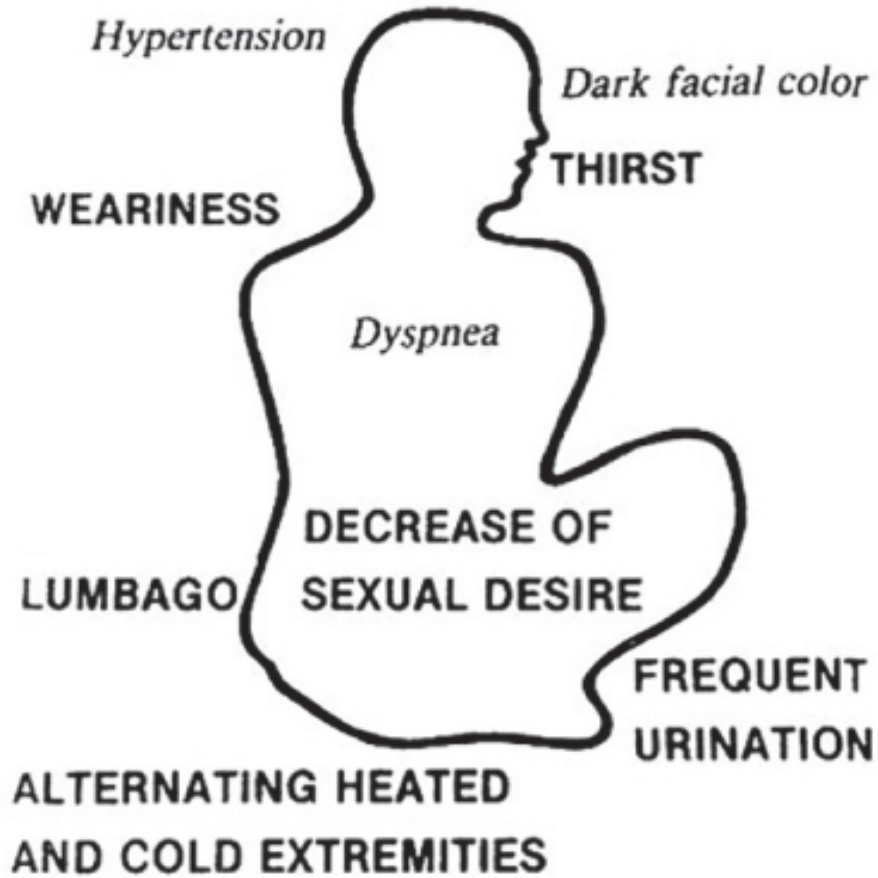
Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸)

The ingredients are steamed rehmannia, dioscorea, comus, hoelen, alisma, moutan, cinnamon, and aconite.

Indications

1. Thirst

2. Nocturnal polyuria
3. Dry skin
4. Low energy level
5. Low back pain
6. Elderly



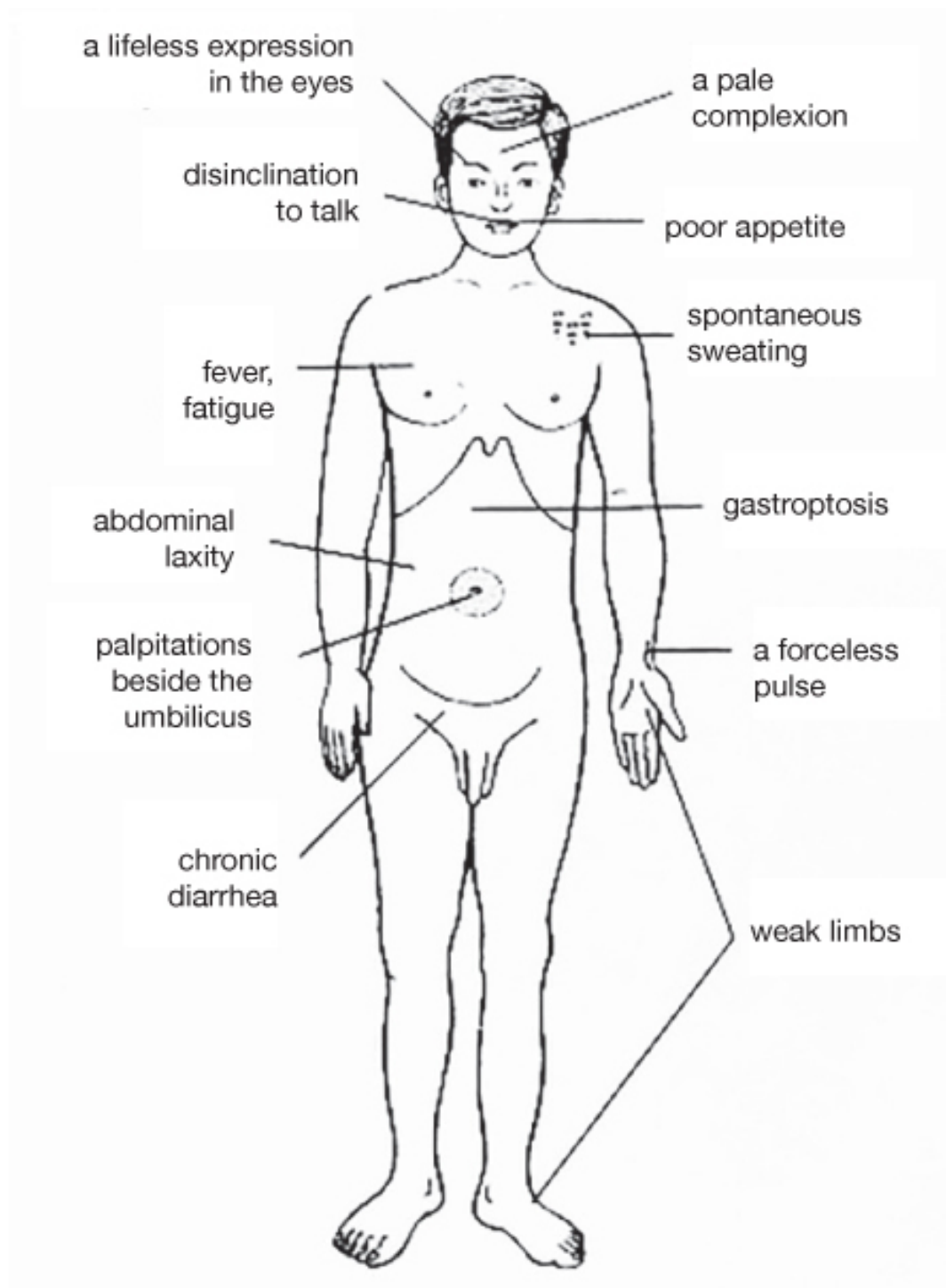
Ginseng and Astragalus Combination (Bu Zhong Yi Qi Tang 補中益氣湯)

The ingredients are ginseng, atractylodes, licorice, raw ginger, jujube, tang-kuei, astragalus, citrus, cimicifuga, and bupleurum.

Indications

1. Anemia
2. Low energy level

- 3. Poor appetite
- 4. Easily fatigued



4-4: HERBAL FORMULAS TO IMPROVE ENERGY AND STRENGTH



HERBAL FORMULAS FOR ENERGY

Ginseng and Astragalus Combination (Bu Zhong Yi Qi Tang 補中益氣湯)

Indications

1. Low energy level
2. Poor appetite
3. Fatigue during the summer

Ginseng and Tang-kuei Ten Combination (Shi Quan Da Bu Tang 十全大補湯)

Indications

1. Anemia
2. Poor physical conditioning
3. A generalized weakness
4. Poor appetite (Anorexia)
5. Cold hands and feet
6. Night sweats
7. Weakness
8. Lassitude

Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黃丸)

Indications

1. Excessive thirst
2. Dry skin
3. Nocturnal polyuria
4. Abdominal pain
5. Poor strength in the lower back, knees, and feet

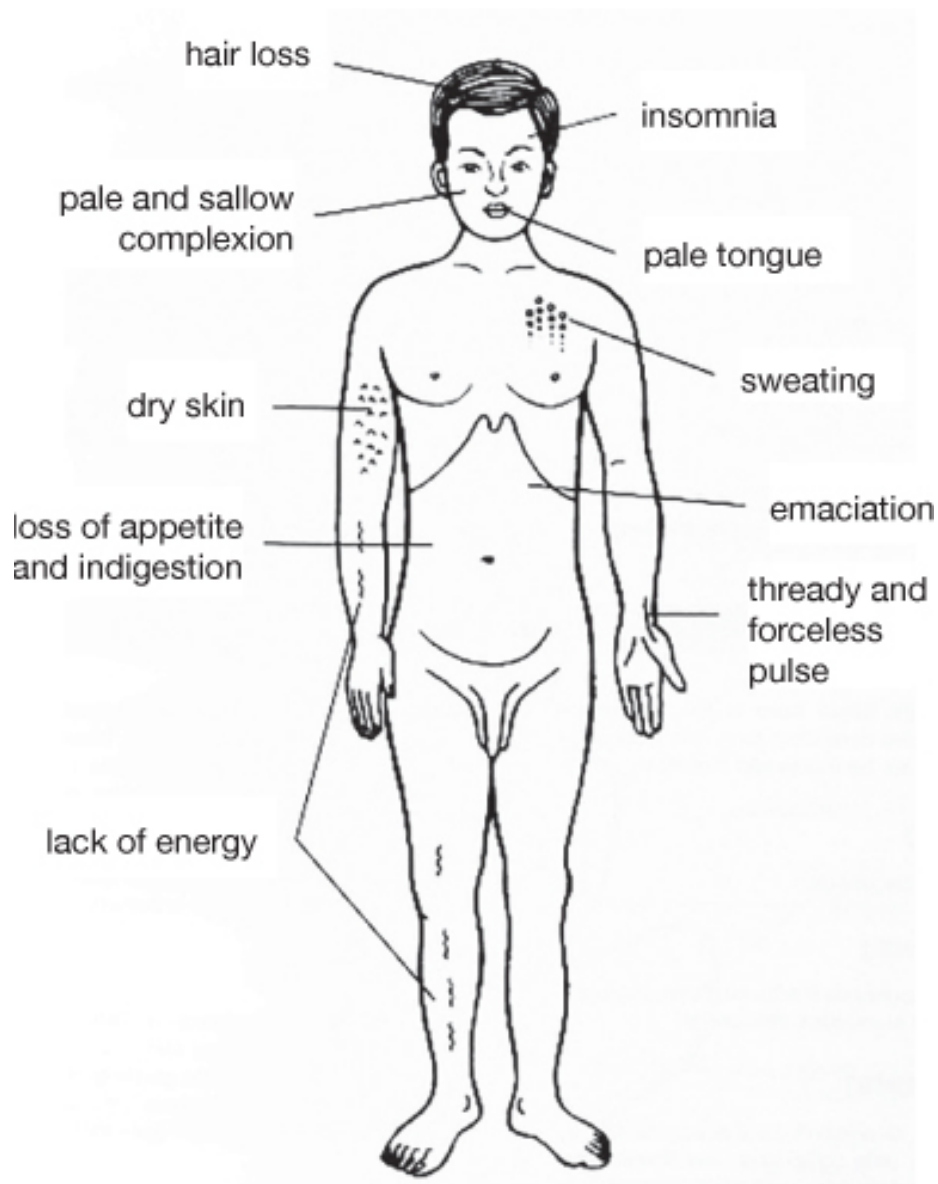
HERBAL FORMULAS TO IMPROVE STRENGTH

Ginseng Nutritive Combination (Ren Shen Yang Rong Tang 人參養榮湯) —the Formula of Choice.

Indications

1. Lassitude

2. Anorexia
3. Night sweats
4. Cold hands and feet
5. Weakness
6. Anemia



Ginseng and Tang-kuei Ten Combination (Shi Quan Da Bu Tang 十全大補湯) —the alternate Formula.

Indications

1. Anemia
2. Poor physical conditioning
3. A generalized weakness
4. Poor appetite (Anorexia)
5. Cold hands and feet
6. Night sweats
7. Weakness
8. Lassitude

Ginseng and Astragalus Combination (Bu Zhong Yi Qi Tang 補中益氣湯)

Indications

1. Weak physical constitution
2. Poor gastrointestinal function
3. Easily fatigued
4. Weakness
5. Anorexia
6. Night sweats

Ginseng and Atractylodes Formula (Shen Ling Bai Zhu San 參苓白朮散)

Indications

1. Emaciation
2. Poor facial complexion
3. Anorexia
4. Chronic diarrhea

5. Weakness
6. Lassitude

Rehmannia Six Formula (Liu Wei Di Huang Wan 六味地黄丸)

Indications

1. Easily fatigued
2. Low energy level
3. Thirst
4. Weakness in the lower back and knees
5. Difficult urination, frequent urination, oliguria, or polyuria
6. Itching in the groin
7. Edema

Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸) Similar to Rehmannia Six Formula but with additional symptoms (listed below)

Indications

1. Cold and pain in the arms and legs
2. Low back pain
3. Numbness in the hands and feet

4-5: HERBAL FORMULAS FOR EXCESSIVE BODY FAT

Obesity may simply mean an excessive accumulation of fat in the body due to inactivity. Obesity may also be due to metabolic abnormalities such as hypothyroidism or occur with extreme steroid use.

OBESITY AND HEALTH

1. The greater the body weight, the greater the burden placed on the heart.
2. The brain of an inactive obese person does not function well; dizziness often the consequence.
3. An increase in blood cholesterol aggravates arteriosclerosis.
4. Overweight people suffer from increases in blood pressure,
5. Obesity may cause shoulder stiffness, heavy headedness, and dizziness.
6. Poor fat metabolism may lead to gout and diabetes.
7. Obesity increases susceptibility to chest pain, heart attack, and stroke.
8. Overweight people may develop gallstones.
9. Constipation and hemorrhoids may result from being overweight.
10. Obesity can induce impotence and sexual dysfunction in males and cessation of menstruation in younger women.
11. Obesity may lead to low immunity against bacteria and susceptibility to skin disease.
12. People who are overweight may develop “flushing up.”
13. Overweight people may die younger than they should.

TCM ON OBESITY

1. TCM perceives obesity-related symptoms to be the manifestations of stagnancy or stasis of phlegm or water in the body.
2. The endeavor to dispel such stagnancy is one basis to treat obesity.
3. Acupuncture and some herbs facilitate fat-burning for a faster metabolism and transportation.

HERBAL FORMULAS FOR OBESITY

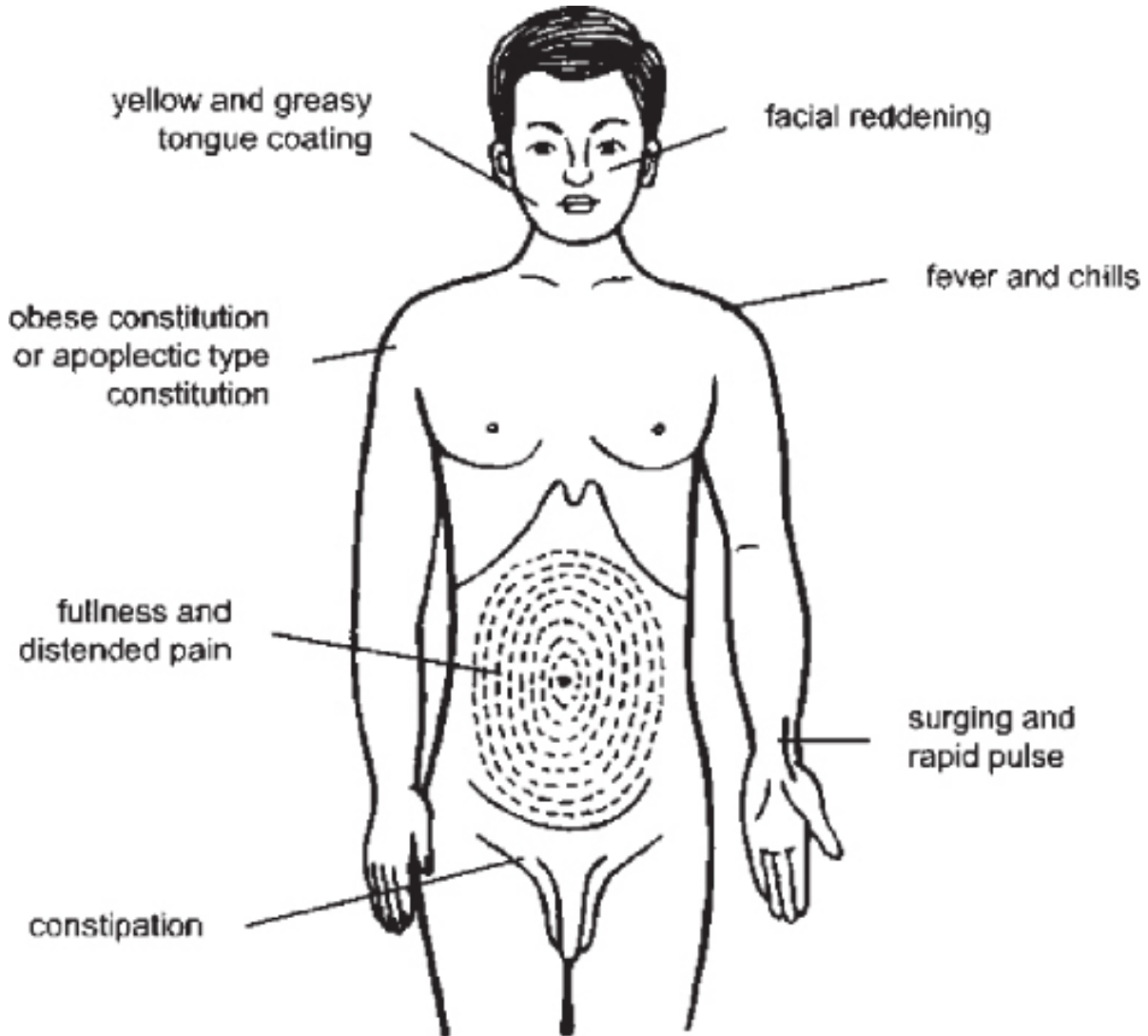
Siler and Platycodon Formula (Fang Feng Tong Sheng San 防風通聖散)

The ingredients are rhubarb, mirabilium, licorice, ma-huang, gypsum, raw ginger, atractylodes, tang-kuei, cnidium, peony, menthe, forsythia,

schizonepeta, slier, scute, gardenia, talc, and platycodon.

Indications

1. Generally is considered the formula of choice.
2. For physically fit but obese persons, constipation, especially for me lovers.
3. Many of them looked like sumo wrestlers, but with a tight feeling around the abdomen, especially around the umbilical area, shortness of breath, shoulder stiffness, and a tendency towards constipation.
4. Rhubarb can be added to stimulate bowel movement.



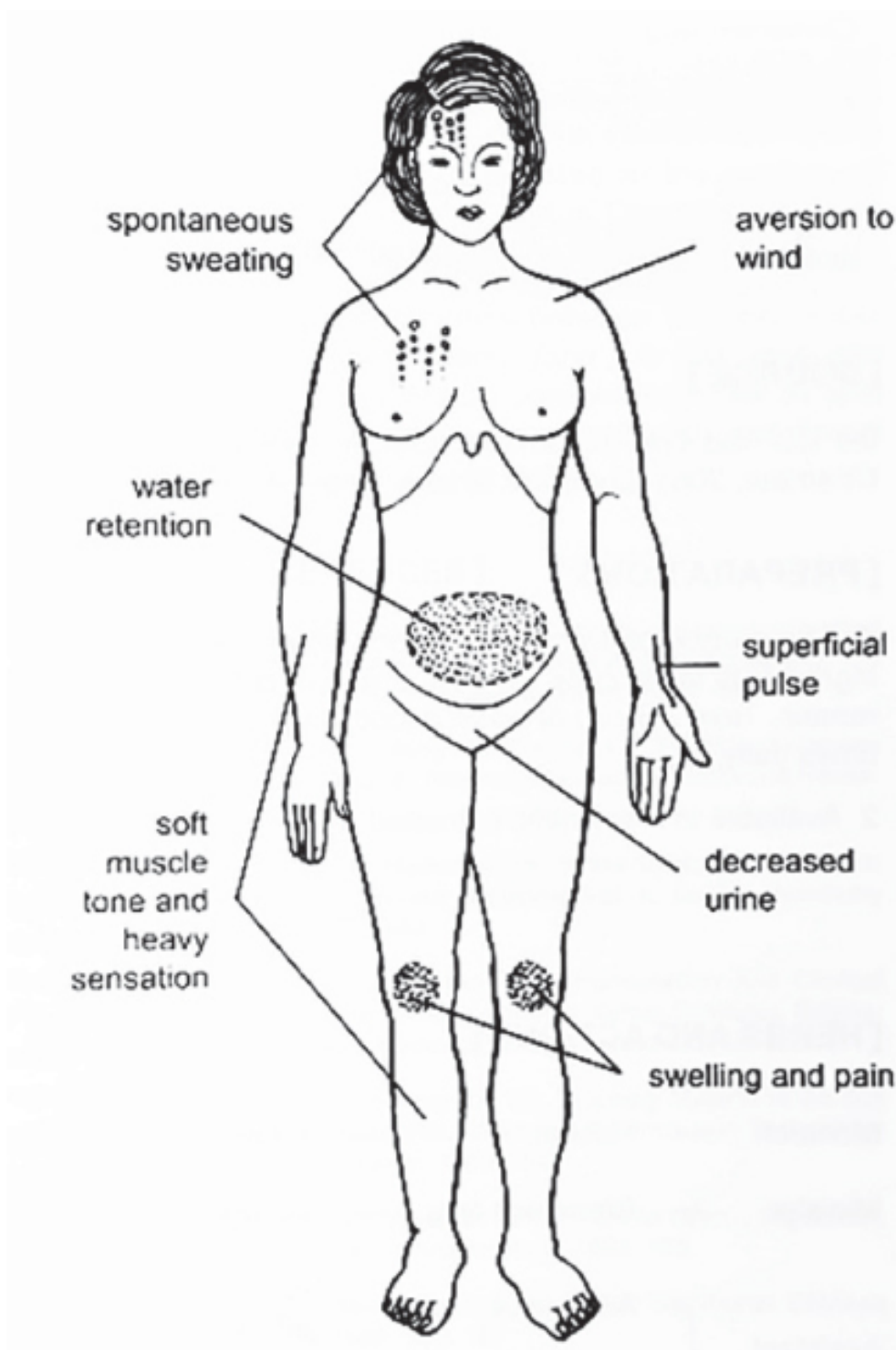
Stephania and Astragalus Combination (Fang Ji Huang Qi Tang 防己黃耆湯)

The ingredients are Stephania, astragalus, atractylodes, licorice, raw ginger, and jujube.

1. Both Stephania and atractylodes remove dampness.
2. Astragalus is a bodybuilding tonic, although it also removes dampness that has accumulated below the skin's surface, and thus may help to prevent night sweats and excessive perspiration.
3. The majority of the herbs are tonics (especially astragalus).
4. Stephania has analgesic properties and will help drain excess fluids from waterlogged joints.

Indications

1. Stephania and Astragalus Combination is for a person with “water obesity and oliguria, even to the point of fluid accumulation at the joints.
2. Since the formula as a whole is slightly warming, it is ideally suited for pale-skinned, easily fatigued patients with water obesity, from whom it expels excess fluid from the body.
3. The condition is more often seen in women.

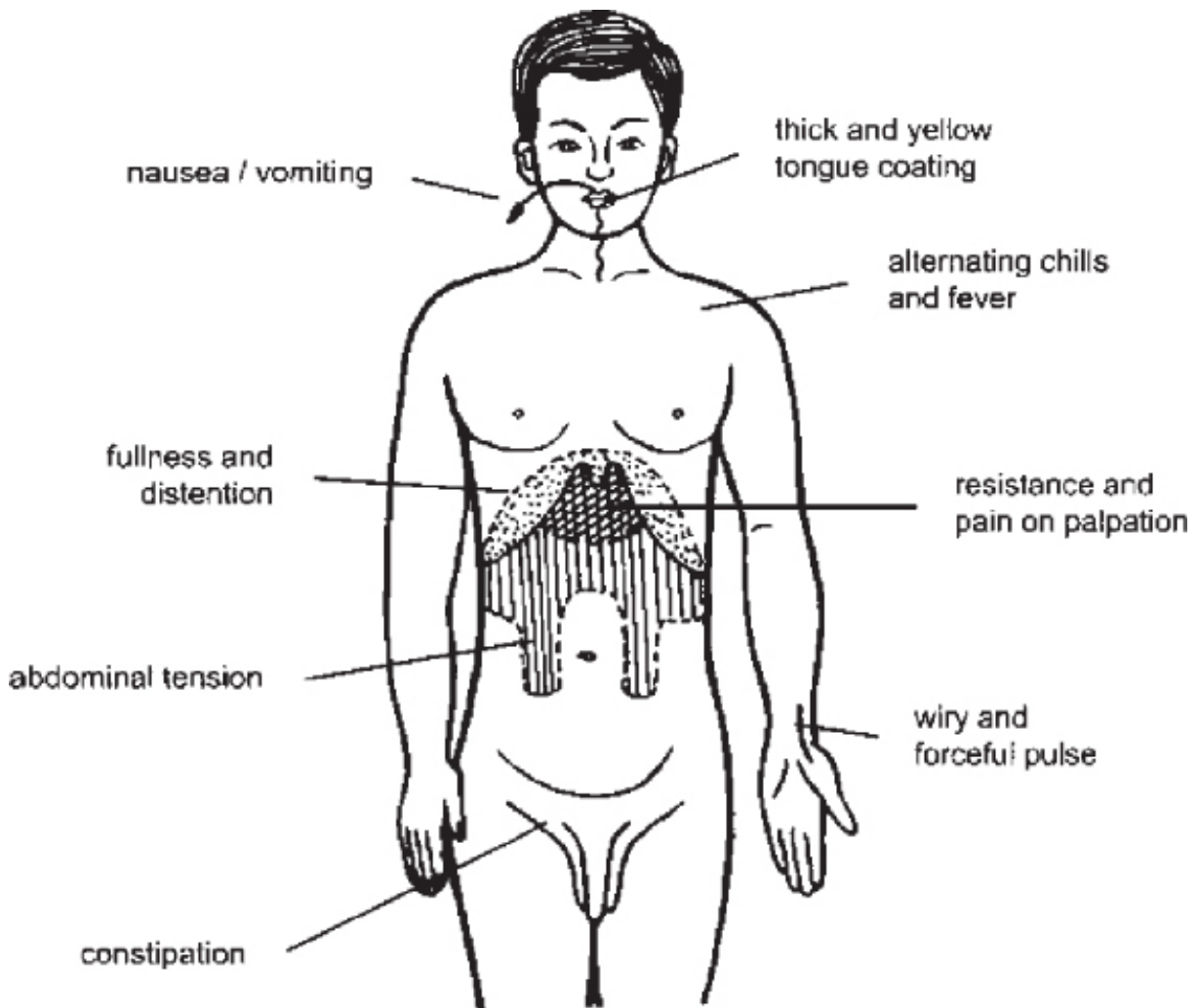


Major Bupleurum combination (Da Chai Hu Tang 大柴胡湯)

The ingredients are bupleurum, scute, pinellia, raw ginger, jujube, chih-shih, peony, and rhubarb.

Indications

1. For obese persons who have chest distress with tenderness upon palpation.
2. Heavy headedness.
3. Shoulder stiffness.
4. Constipation.
5. Shortness of breath.
6. These people usually do not exercise and have thick fatty deposits under the skin.
7. This formula facilitates the body's metabolism and thus decreases the body fat.



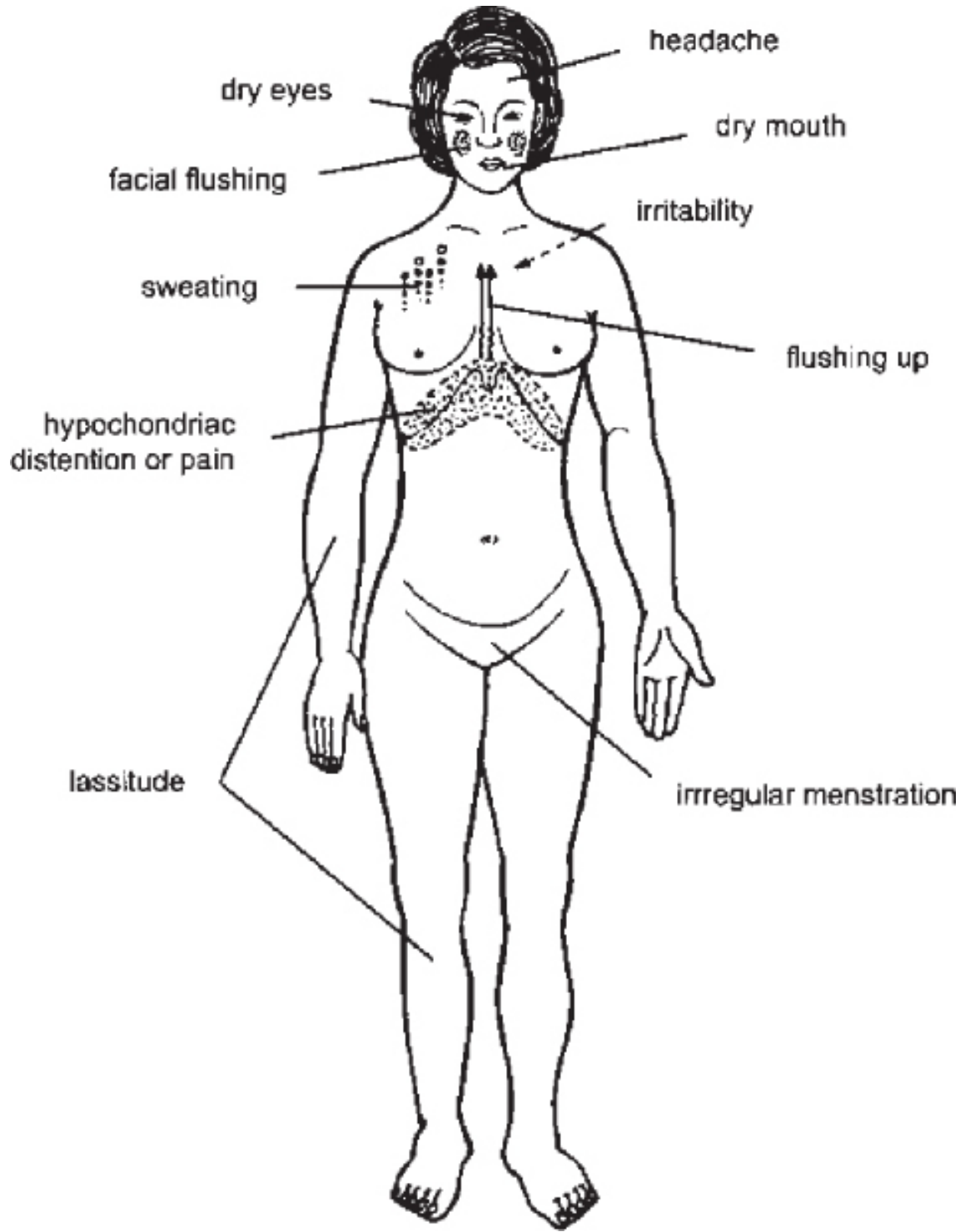
Bupleurum and Peony Formula (Jia Wei Xiao Yao San 加味道遙散)

The ingredients are bupleurum, peony, licorice, atractylodes, hoelen, tang-kuei, ginger, mentha, moutan, and gardenia.

Indications

1. Obesity
2. Anemia
3. Poor facial complexion
4. Headaches

- 5. Stiff shoulders
- 6. Irregular menstruation

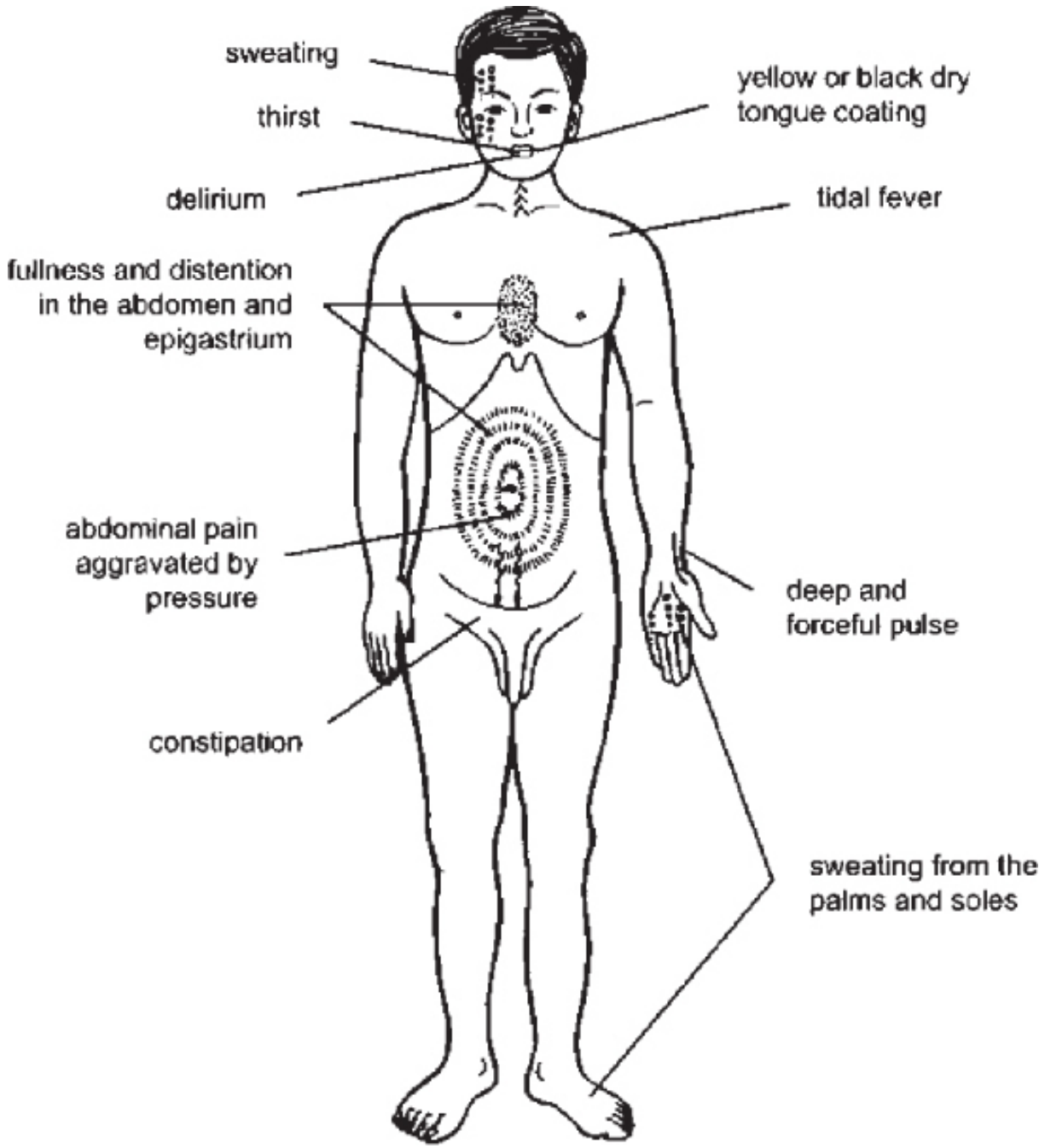


Major Rhubarb Combination (Da Cheng Qi Tang 大承氣湯)

The ingredients are bupleurum, scute, pinellia, raw ginger, jujube, chih-shih, peony, and rhubarb.

Indications

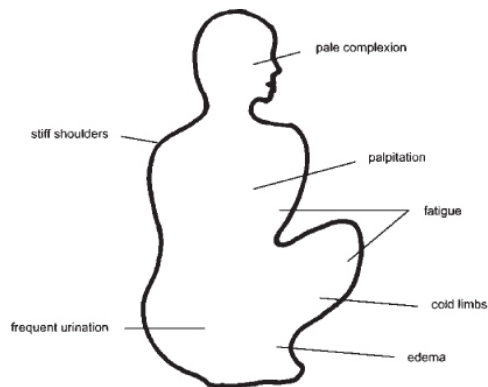
1. Obesity
2. Fullness sensation in the abdomen
3. Severe constipation





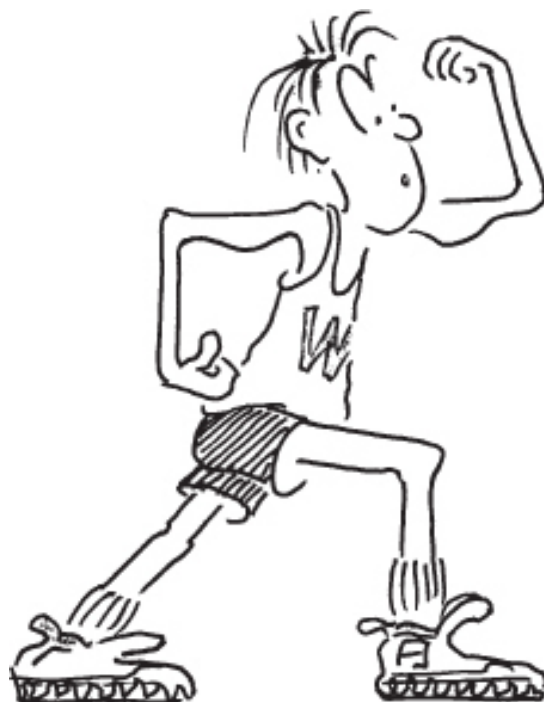
CHAPTER 5

Tonification and Replenishing



5-1: REPLENISHING THE BODY

In Asia, it is common to see a patient taking **Minor Bupleurum Combination (Xiao Chai Hu Tang 小柴胡湯)** or **Vitality Combination (Zhen Wu Tang 真武湯)** before and after chemotherapy in order to prevent the adverse effects from the treatment. **Ginseng and Tang-kuei Ten Combination (Shi Quan Da Bu Tang 十全大補湯)**, **Ginseng Nutritive Combination (Ren Shen Yang Rong Tang 人參養榮湯)**, or **Ginseng and Astragalus Combination (Bu Zhong Yi Qi Tang 補中益氣湯)** is often prescribed to improve the strength of cancer patients.



Chronic pain sufferers are beaten up not only from their illnesses but also from the side effects of treatments. There is really no magic cure for these problems in conventional medicine. But in Chinese herbal medicine, there are such things as Tonic & Replenishing Formulas. Herbal tonics are remedies for treating weakness due to a deficiency in essential substances and a degeneration of functions. In other words, they are used in cases of exhausted physical strength accompanying a congenitally weak physique, chronic diseases, mental tension, stress, and exhaustion of substances resulting from fatigue.

Tonics and astringents are regarded as nourishing and strengthening drugs in TCM; a quick herbal supplementation could offer succor to those who suffer from extreme weakness or near collapse due to injuries or a sudden loss of blood. In conventional medicine, there is no appropriate pharmacologic term for tonics and astringents.

According to TCM theory, Qi-supplementing and Yang-supplementing tonics are especially useful for lassitude. The Yang-supplementing tonics are specifically indicated when a patient experiences a chill sensation in the arms and legs and below the waist. Because these symptoms are very similar to the alarming symptoms which signal stress, we believe that among tonics there must be something that can produce a physiologic defense and strengthen or promote adaptive reaction to stress.

People with physical infirmities and general impairment of different functions need supplementation of nutrition. However, the body cannot absorb them in the case of poor pancreas and/or stomach functions. Tonics and supplementation are useful under such conditions.

INDICATIONS FOR HERBAL TONIC AND SUPPLEMENTATION

1. Weak Qi
2. Weak blood
3. Yin deficiency
4. Yang deficiency

SIGNS AND SYMPTOMS OF WEAK QI

1. Easily fatigued
2. Low energy level
3. Malaise
4. Weak voice
5. Shallow breathing
6. Cold sweats
7. Weak arterial pulses

SIGNS AND SYMPTOMS OF WEAK BLOOD

1. Anemia
2. Fatigue
3. Vertigo
4. Dizziness
5. Tinnitus
6. Excessive gastric acid
7. Palpitations in the chest

8. Thin and/or stagnant blood during menstruation
9. Pallor
10. Dry and harsh skin
11. A yellowish or pale complexion
12. Pale lips and nails

SIGNS AND SYMPTOMS OF YIN DEFICIENCY

1. Thin body frame
2. Fatigue
3. Fever
4. Emotional irritability
5. Anxiety
6. Poor memory
7. Weakness
8. Excessive thirst
9. Coarse skin
10. Tinnitus
11. Dizziness
12. Palpitations
13. Insomnia
14. Night sweats
15. Nocturnal spontaneous ejaculation
16. Dry cough
17. Coughing up blood

SIGNS AND SYMPTOMS OF YANG DEFICIENCY

1. Chills in the lower body
2. Soft voice
3. Vertigo
4. Dizziness

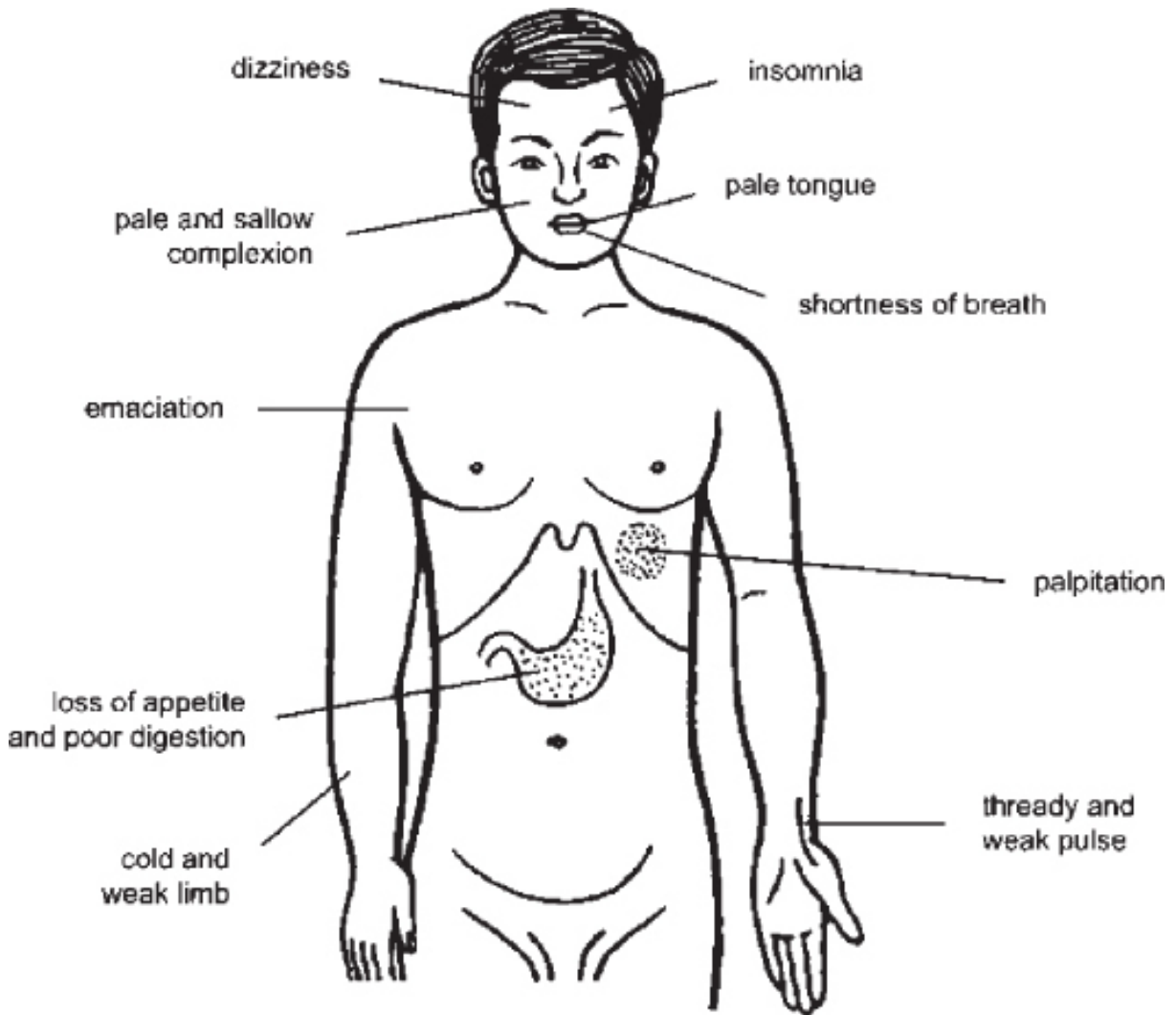
5. Pallor
6. Blurry vision
7. Fatigue
8. Poor appetite
9. Intolerance to cold
10. Frequently having loose bowel movements
11. Weakness and numbness in the feet
12. Difficulty walking
13. Lower abdominal pain
14. Frequent but insufficient urination
15. Impotence
16. Asthma

CHINESE TONIC HERBS

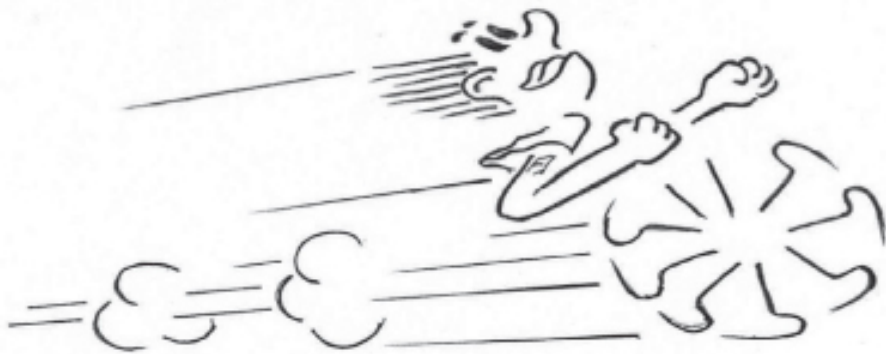
1. Qi tonics—ginseng, codonopsis, astragalus, dioscorea, atractylodes, jujube, licorice, polygonatum
2. Blood tonics—cured rehmannia, ho-shou-wu, tang-kuei, lyceum
3. Yin tonics—American ginseng, asparagus, ophiopogon, ligustrum, lily
4. Yang tonics—velvety deer horn, orobanche, cynomorium, epimedium, bacopa, psoralea, eucommia, dicksonia, dipsacus, cuscuta

For Ethyl, I suggested **Ginseng and Tang-kuei Ten Combination (Shi Quan Da Bu Tang 十全大補湯)**. My rationales were:

1. It is an interior-chill conformation formula mainly used to regulate blood circulation.
2. The majority of the ingredients are warming agents.
3. She had a generalized weakness and anemia which followed a prolonged battle with pain.
4. She had many other illnesses and had had multiple surgeries.
5. She clearly had a loss of strength and vitality.



5-2: HERBAL TONIC AND REPLENISHING FORMULAS



Achyranthes and Plantago Formula (Niu Che Shen Qi Wan or Ji Sheng Shen Qi Wan 牛車腎氣丸或濟生腎氣丸)

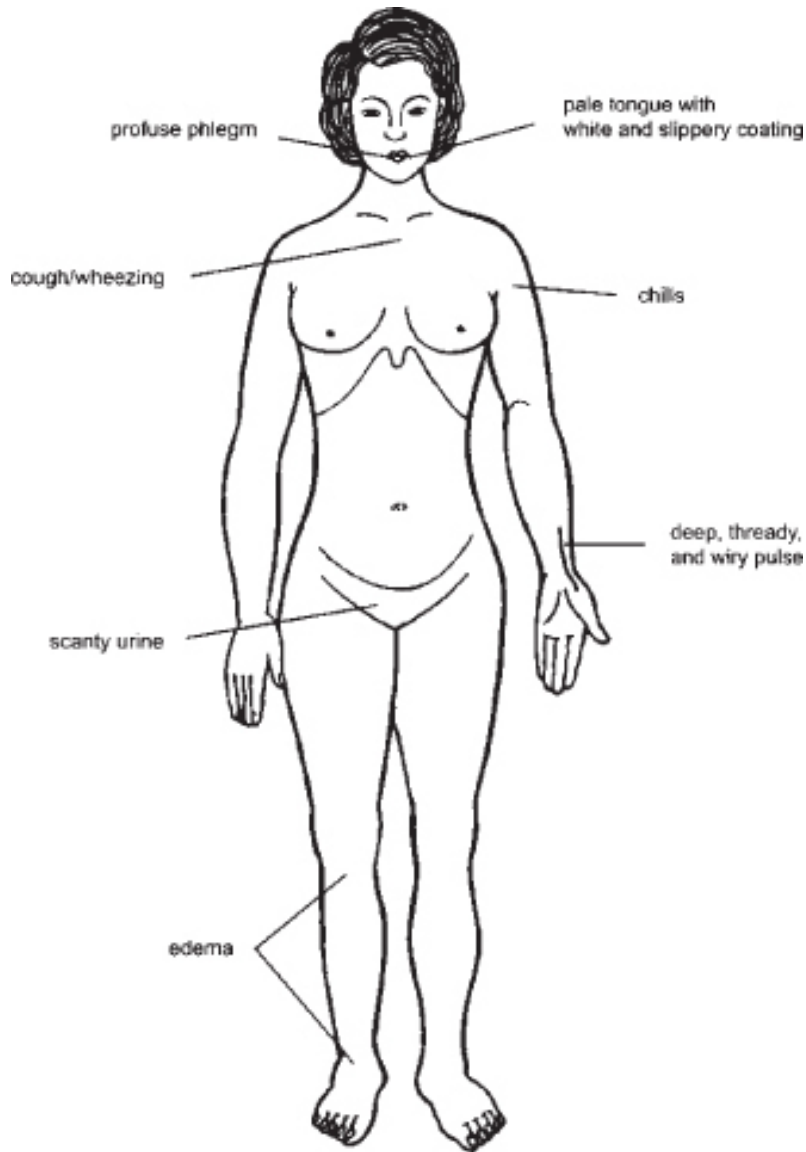
The ingredients are steamed rehmannia, dioscorea, comus, hoelen, alisma, moutan, cinnamon, aconite, achyranthes, and plantago.

1. Both achyranthes and plantago are diuretics.
2. Achyranthes also removes obstructions in blood circulation and serves intensify the effects of peony.

This formula results from adding achyranthes and plantago to **Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黃丸)** . **Rehmannia Eight Formula** , as noted, is moistening and cannot be used on patients with severe damp conformations.

Indications

1. Mainly used to relieve dryness.
2. **Achyranthes and Plantago Formula** is a **Rehmannia Eight Formu** that has been modified to suit damp conformations.
3. It is especially beneficial for low back pain in older adults.



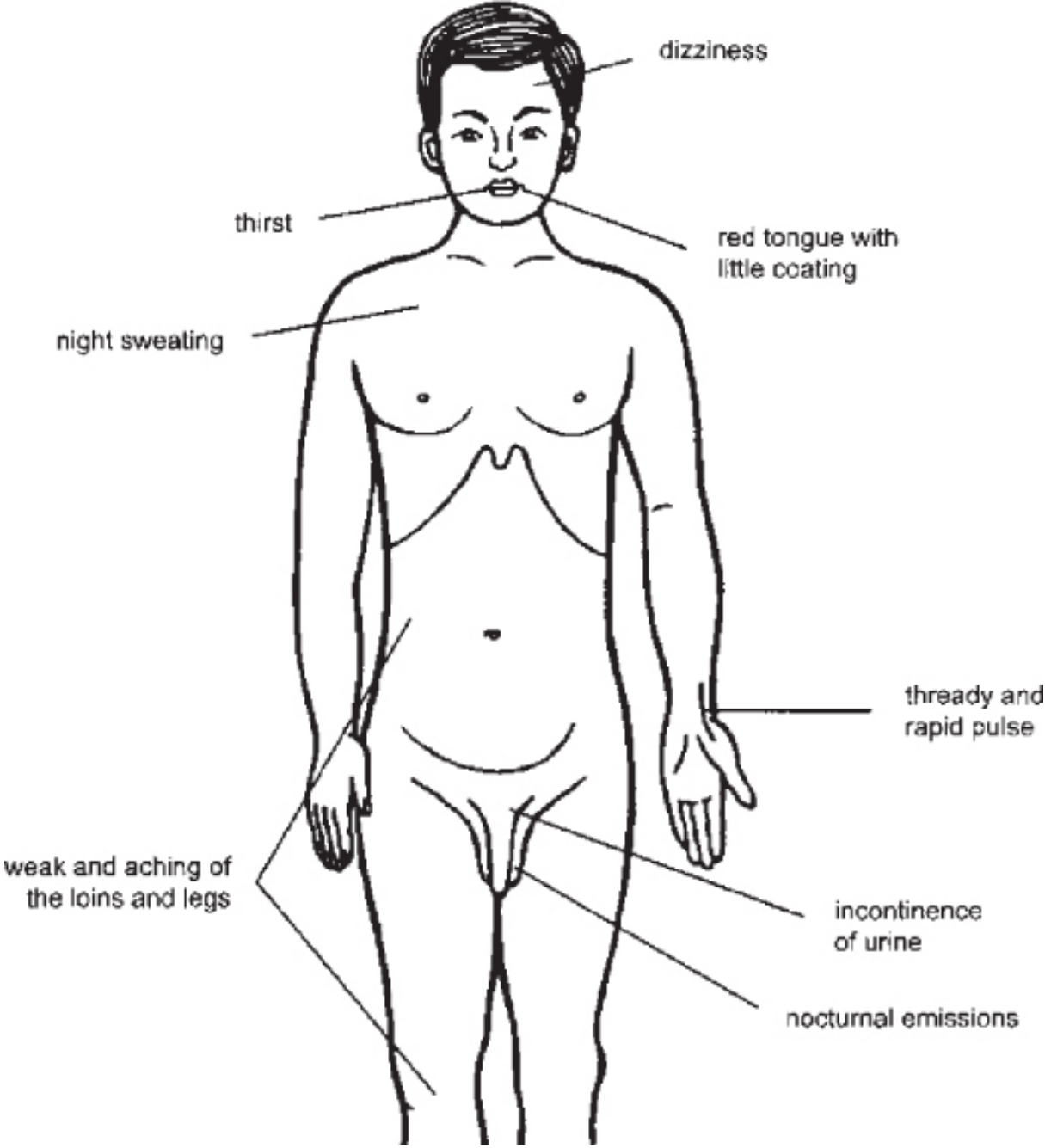
Achyranthes and Rehmannia Formula (Zuo Gui Wan 左歸丸)

The formula contains achyranthes, rehmannia, dioscorea, comus, cuscuta, lycium fruit, tortoise shell gelatin, and antler gelatin. Achyranthes is a diuretic that also removes blood obstructions.

Indications

Traditionally it was often used to treat kidney and liver Yin deficiency that appeared frequently in the elderly. It was also used in those who were suffering from chronic illnesses; recovering from feverish diseases marked by emaciation, low back pain, knee and waste weakness; whole body soreness; fatigue; dizziness; tinnitus; and spontaneous sweating for no apparent reason.

Nowadays the formula is often used to treat low back pain with a generalized weakness.



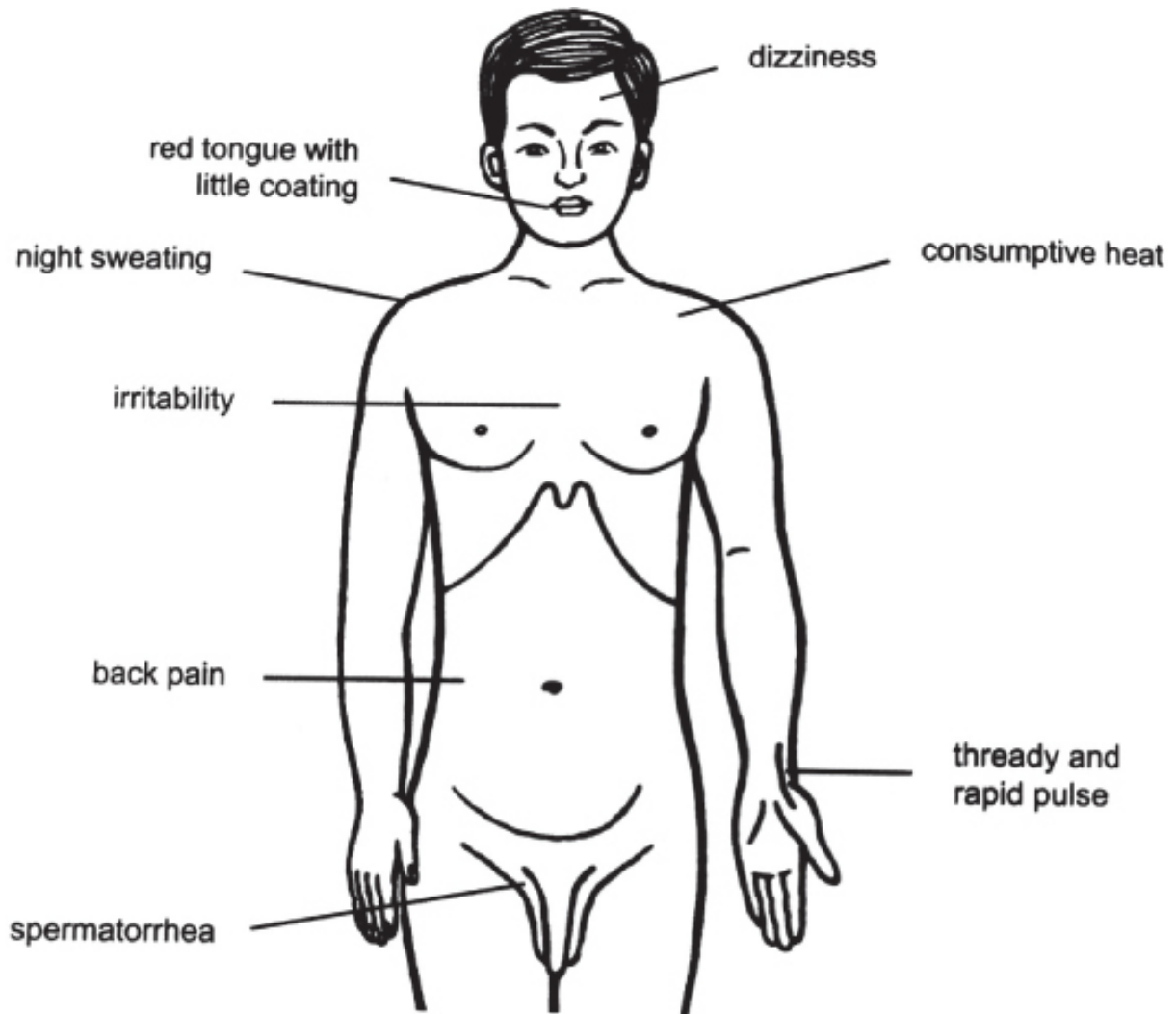
Anemarrhena, Phellodendron, and Rehmannia Formula (Zhi Bo Di Huang Wan 知柏地黄丸)

The formula contains anemarrhena, phellodendron, cooked rehmannia, cornus, dioscorea, hoele, alisma, and moutan. It nourishes Yin and reduces fire.

Indications

Traditionally this formula was used to control hyperactivity of fire due to Yin deficiency. This was characterized by consumptive heat or steaming bone symptoms, night sweats, dizziness, soreness and pain along the spinal column, irritability, spermatorrhea, a red tongue with little coating, and a thready and rapid pulse.

In modern days it is often used to treat diabetes, hypertension, chronic nephritis, infertility, general weakness, nervous breakdown, hyperthyroidism, chronic laryngopharyngitis, and chronic urethritis.



Astragalus and Cinnamon Five Herb Combination (Huang Qi Gui Zhi Wu Wu Tang 黃耆桂枝五物湯)

The ingredients of this formula are astragalus, cinnamon twig, peony, fresh ginger, and jujube.

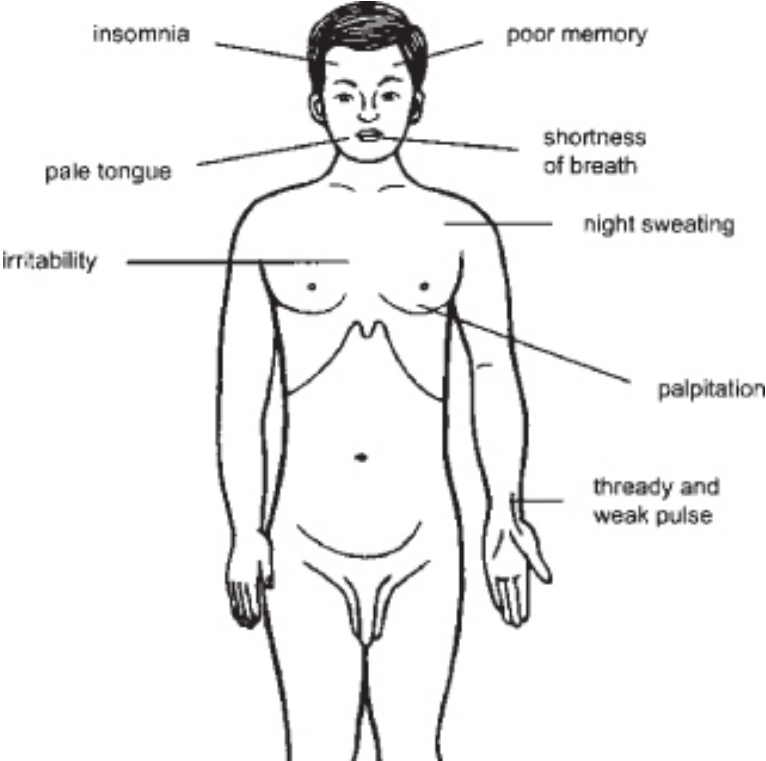
The main functions of this formula are: tones Qi, warms meridians, harmonizes Ying and Wei Qi. It also dispels wind.

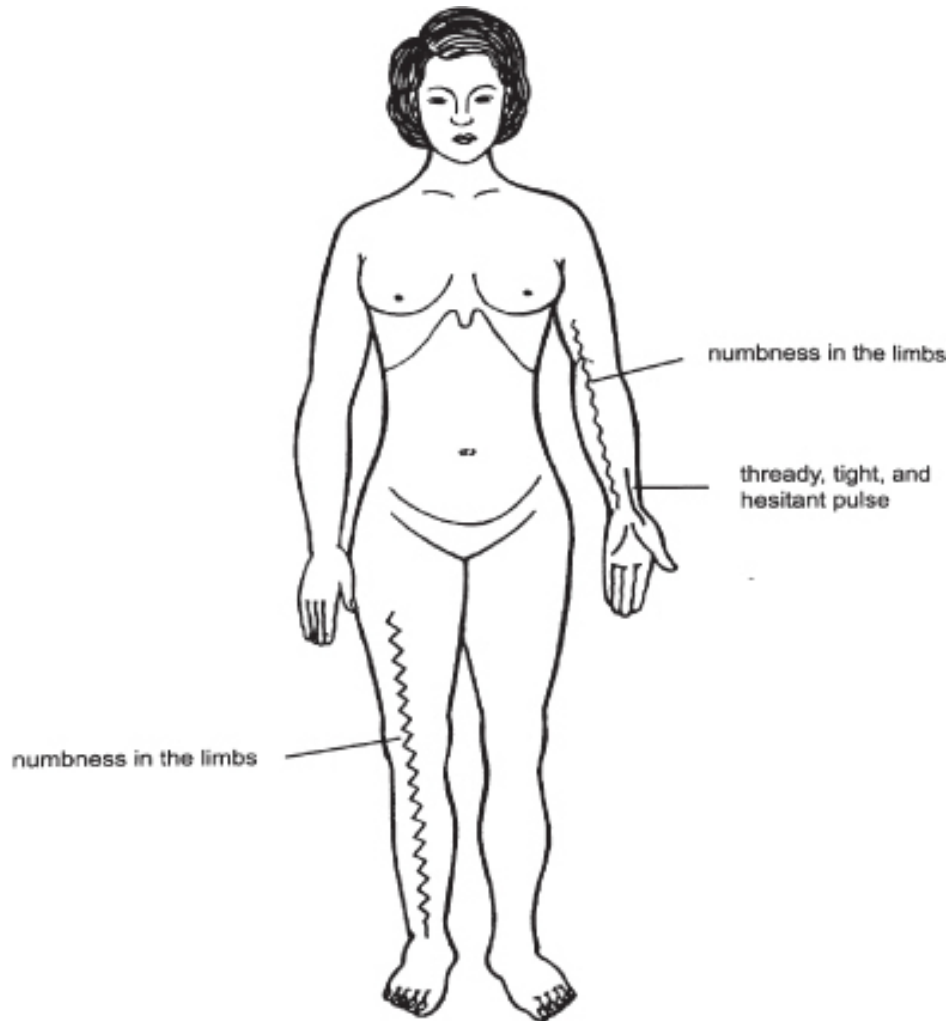
Indications

Traditionally it was used to treat joint pain due to stagnation of the blood. This was characterized by weakness and numbness in the limbs with thready,

tight, and hesitant arterial pulses.

In modern days it is often used to treat weakness, low energy level, limbic paralysis, carpal tunnel syndrome, Bell's palsy, and neurosis.





Dioscorea Combination (Si Shen Tang 四神湯)

The ingredients of this formula are dioscorea, lotus seed, Euryale, coix, and hoelen.

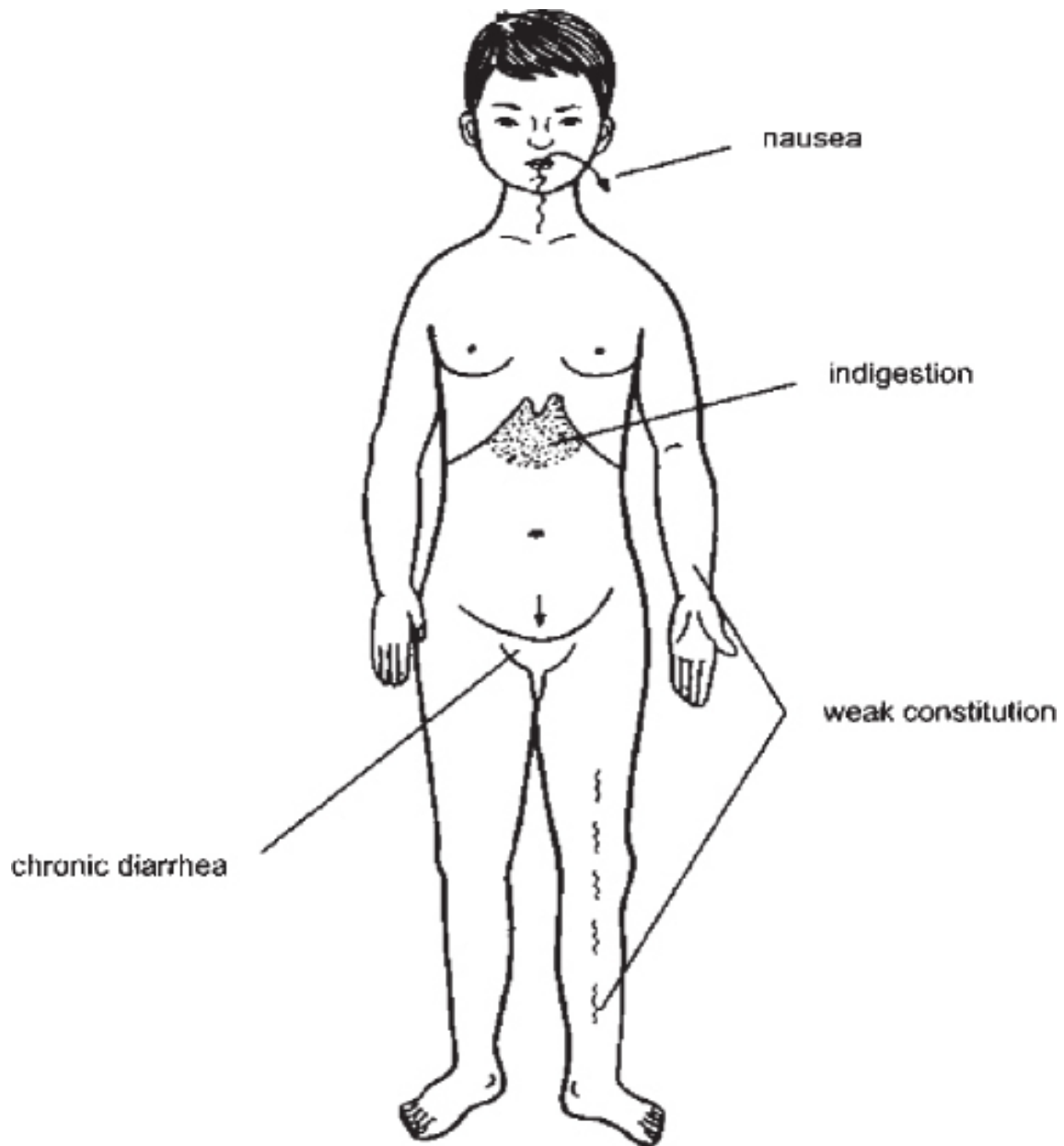
The main functions of this formula are to strengthen the spleen Qi, increase appetite, and to tone the overall Qi and essence.

Indications

Traditionally it was used to strengthen children with a deficient constitution and chronic diarrhea.

In modern days it is often used to improve physical conditioning, indigestion, poor appetite, gastrointestinal dysfunction, malnutrition, and

chronic diarrhea.

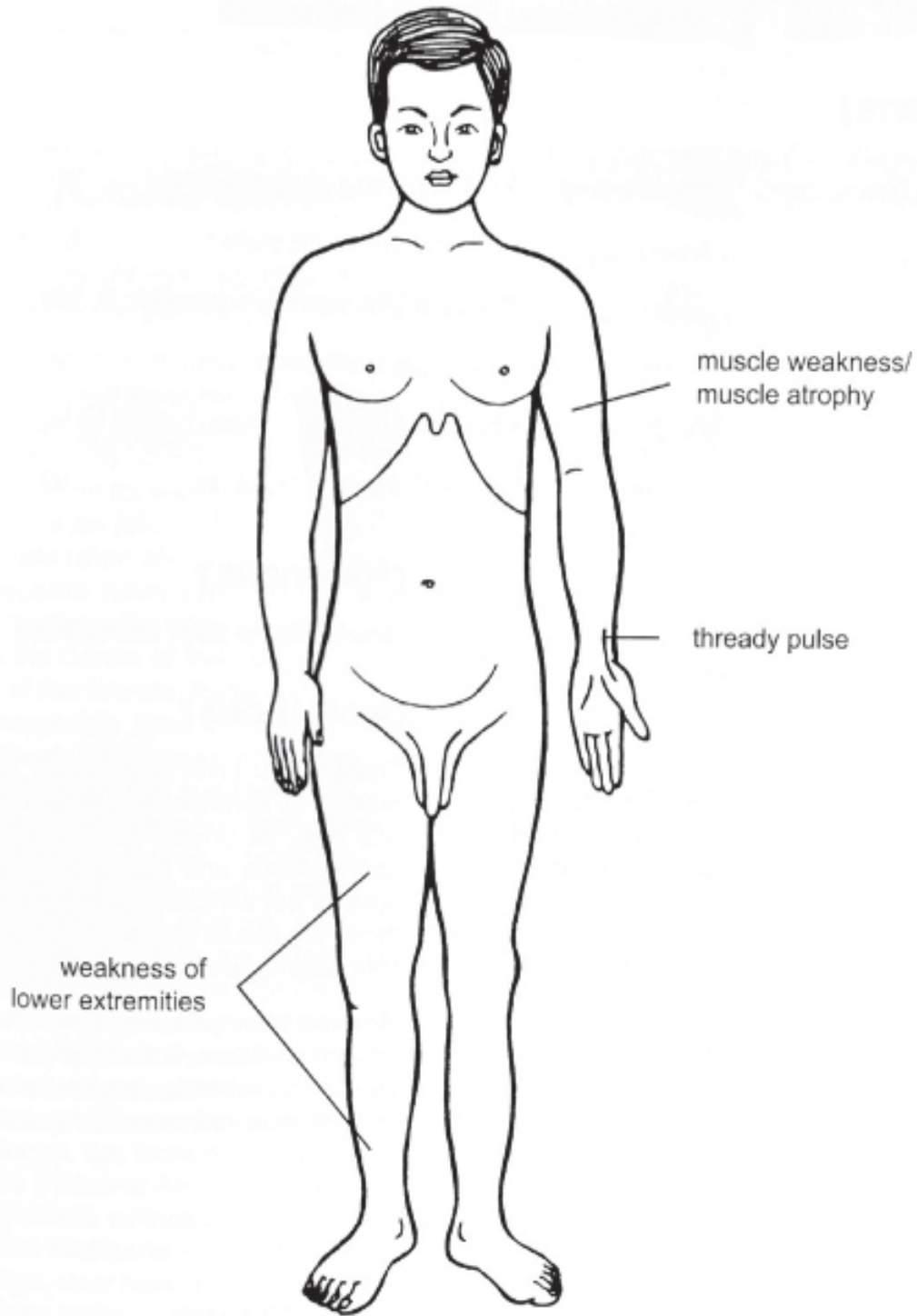


Epimedium and Curculigo Combination (Er Xian Tang 二仙湯)

Traditionally this formula was used to treat kidney Yin and Yang deficiency accompanied by a flaring-up of fire, marked by menstrual disturbance such as amenorrhea, hot flashes, sweating, dizziness, headache,

blurred vision, cold limbs, mood swings, fatigue, lassitude, depression, irritability, insomnia, palpitations, pain and weakness in the loins and legs, frequent urination, impotence, and premature ejaculation.

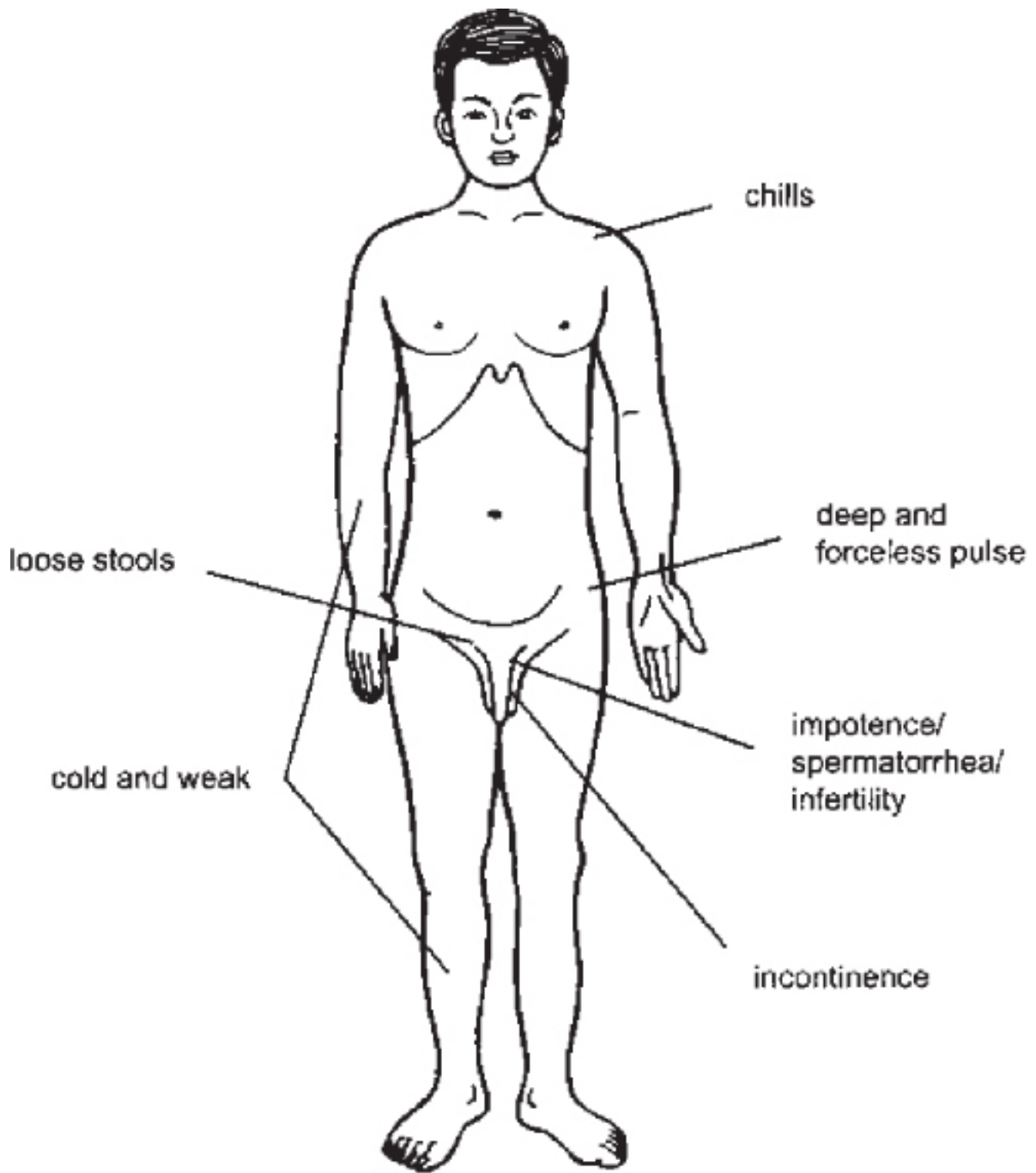
Nowadays this formula is often used to treat menopause, poor physical conditioning, fatigue, hypertension, amenorrhea, infertility, impotence, chronic nephritis, and pyelonephritis.



Eucommia and Rehmannia Formula (You Gui Wan 右歸丸)

Traditionally it was used for kidney Yang deficiency, or decline of the fire from the gate of life, marked by lack of vitality, lassitude, intolerance to cold, cold extremities, impotence, spermatorrhea, infertility, loose stools or diarrhea with undigested food, incontinence, soreness and weakness in the knees and lower back, and edema in the lower body.

In modern days it is often used for nephrotic syndrome, bronchial asthma, sciatica, osteoporosis, degenerative joint disease, low sexual drive, low energy level, and a generalized weakness.



5-3: A NEW ETHYL



KEY HERBAL FORMULA

Cinnamon and Peony Combination (Gui Zhi Jia Shao Yao Tang 桂枝加芍藥湯)

August 2006

Ethyl returned. Her pain level was down to three to four on a scale of zero to ten. She had no new complaints except that she felt some dull, and sometimes “relatively intense,” tenderness, as she put it, in her right upper abdomen. Sometimes she felt her stomach was distended with a burning sensation. This sensation would sometimes radiate to her right upper back. The pain occurred periodically and seemed to occur when she was very tired or when she was hungry. She had less acid regurgitation, heartburn, belching, and nauseous feelings. She had not vomited at all since I saw her last time. She had black stool when she went to the bathroom before, but it had not happened for quite some time.

Her family physician sent her to a physical therapy program in mid-July, hoping that she might be able to return to work. She had not worked since April 1996 following her second car accident. She would be fifty-eight years old shortly before the end of the year. “I struggled with those exercises they wanted me to do!” said Ethyl.

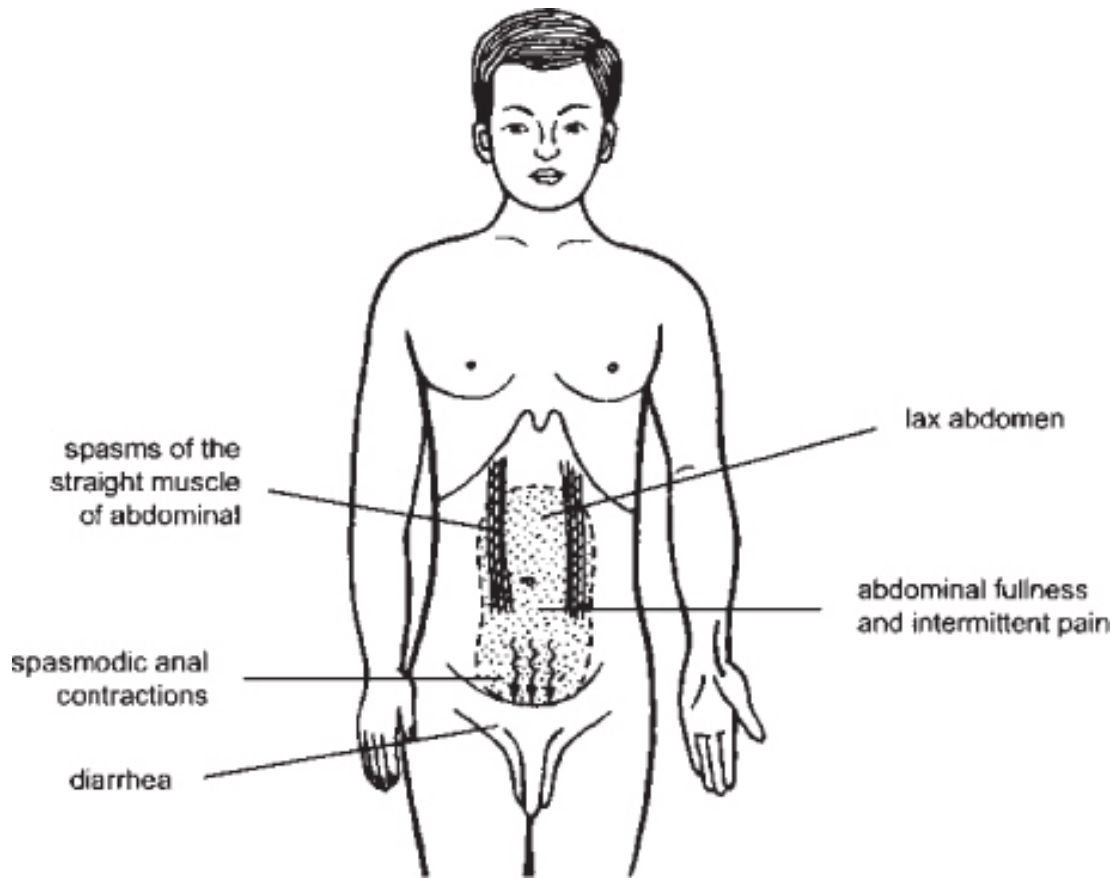
Physical exercise is probably one of the hardest things for anyone with chronic pain to do, even though proper exercise had been proven more

effective than anything else in relieving pain related symptoms and creating a sustainable sense of well being. But it is only natural that a person in pain does not want to move at all. Most people with pain will conserve their limited energy for activities that are necessary for day-to-day living, but the majority of them don't know that inactivity won't provide enough of a stimulus to wake up the endorphins, a natural painkiller, and to tone the weakened muscles.

My advice to Ethyl was to “do something physical every day.” Riding on a stationary bicycle without much resistance, at low speed, for no more than twenty minutes, three to four times a week, was about as much “physical” activity that Ethyl could handle at the time. I instructed her to try to stay in a relatively comfortable zone. For her upper body, there was a zone of comfort in front of her body, pretty much the size of a snare drum. If she clasped her hands and extended her arms forward in a circle, about eighteen inches from her chest, and then raised and lowered the circle comfortably from just above her head to her thighs, she would have defined her comfort zone. Likewise, the comfort zone for her lower body was defined by spreading her legs about a foot apart, keeping her hips and knees slightly bent, and practicing her trunk range of motion exercises. I advised her to stay in those zones and not try to reach or push too far outside the areas. If she did, chances were that she would pay for it later.

In my experience, the most effective way to live with any type of chronic pain is to undertake a complete overhaul of the behaviors that perpetuate the symptoms. Of course, this is easier said than done because it requires an acceptance that chronic pain is not likely to go away completely, otherwise it wouldn't carry the label “chronic.” Like almost all chronic pain sufferers, Ethyl went through a process much like grief; it started from denial all the way to acceptance. In between were all kinds of obstacles with which medical personnel might or might not be able to help. But we should always try and keep our minds open.

For Ethyl's abdominal symptoms, I suggested that she tried three weeks of **Cinnamon and Peony Combination (Gui Zhi Jia Shao Yao Tang 桂枝加芍藥湯)**—a weak-chill conformation formula.



March 2007

Ethyl was seen for a follow-up evaluation. She was doing quite well, with minimum pain. She was no longer taking pain medications and had returned to work on a part-time basis. She retired at the end of 2010 and moved to Arizona.



CHAPTER 6

Rheumatism

6-1: DEGENERATIVE ARTHRITIS OF THE LUMBAR SPINE

KEYWORDS

1. Degenerative joint disease of the lumbar spine (ICD-10 Code **M51.36**)
2. Degenerative arthritis of the lumbar spine (ICD-10 Code **M12.9**)

November 2000

Dienna was referred to me by her daughter. She was eighty years young with a history of low back pain for over forty years. It began in her mid-thirties when regular gasoline was twenty cents a gallon. There was no specific injury that she noticed, but the pain would be so extreme that she could not straighten her back. She went to a rheumatologist first. The doctor told her that she had disintegrating discs in her low back. The treatment was absolute bed rest for a week and a prescription of pain pills. That seemed to work, so whenever she had pain or discomfort in her low back, she would adjust her life to accommodate bed rest and take pain pills. Her doctor seemed well satisfied with the treatment plan, but later she began having pain in her neck. She was told she had disintegrated discs in her neck, just like those in her low back. That doctor said the treatment was to be careful when she turned

her head and to rest a few days in bed whenever her neck hurts. As time went on Dienna continued to rest whenever she experienced a painful episode.

In early 1990s Dienna's low back pain began to get more severe, and she also started having numbness and tingling sensations in her legs. She felt that she would become disabled soon. X-rays of the lumbar spine taken at the time showed degenerative changes in the lumbar spine, especially in the spaces between the L3–L4, L4–L5, and L5–S1 areas. There was also osteoporosis in her spine. A CT scan of the low back showed two large broadsided, degenerated, protruding discs at L4–L5 and L5–S1 levels that appeared to compress on the existing nerve roots. There was a small central disc bulge at the L1–L2 minimally compressing the front portion of the thecal sac as well. Her back pain was continuous, steady, deep, dull, aching, throbbing, sharp, and burning in nature and was sensitive to her trunk movement.

Dienna's low back pain really got bad after she slipped and fell in 1999; she landed on her buttocks very hard. The intensity of the pain was up to nine on a scale of zero to ten. The pain was aggravated by bending, lifting, turning, or tilting her trunk from side to side, repetitive muscle contractions, air-conditioned rooms, cold or damp weather, and during periods of nervous tension. Sometimes she felt that her legs were completely dead, and her hands and feet were icy cold. She had difficulty sitting, standing, walking, and climbing, and had a low energy level and very poor endurance. She used to take a thirty-minute walk every day for years until her fall.

Dienna was allergic to poison ivy, penicillin, codeine, muscle relaxants, and anti-inflammatory medications. She was taking multiple vitamins, occasional iron, and trace element supplements. She was more or less a vegetarian—she only consumed meat and fish occasionally. Her appetite was fair. She did not sleep soundly at night, although she generally took a forty-five minute to one-hour nap after lunch each day. Her bowel movement and bladder functions were stable.

On examination, she was wearing a high-density lumbar corset, looked pale, and her tongue was slightly red with a light-yellowish tongue fur. Her arterial pulse at the right wrist was wiry and weak, but with a regular rhythm. The rest of the examination pointed to the diagnosis of degenerative joint disease of the lumbar spine.

DEGENERATIVE ARTHRITIS

Among all of the chronic ailments, degenerative joint change is the champion that affects nearly everyone over sixty-five years old. When the joint is inflamed it is called arthritis.

1. Degenerative arthritis, or osteoarthritis, is the most common form arthritis, affecting about 90% of men and women over age seventy-five worldwide.
2. Rheumatoid arthritis (RA) is the second most prevalent form of arthritis that occurs in about 2% of adults. It affects women more often than men and has peak incidence between the ages of twenty and fifty.
3. Degenerative spinal disease is probably the most common cause of low back pain in the elderly.

SPINAL ARTHRITIS AND NUMBNESS IN THE LEGS

1. When a bone spur around the intervertebral foramina (the opening through which the nerve root gets passage out from the spinal cord) gets severe, may compress on the nerve roots and produce pain and neurologic symptoms, such as numbness and tingling feelings.
2. These symptoms may be felt in the buttocks, thighs, or calves when walking, sneezing, running, or climbing stairs.

SPINAL ARTHRITIS AND DISABILITY

1. Even though quite a number of people who have arthritis end up in wheelchair or confined to bed, the majority of the people who suffer from disabling condition are not due to the arthritis itself, but rather from another coexisting disease or from lack of physical activity. For example, a visual or hearing impairment, a lack of social support, education level, anxiety depression, and a lack of coping mechanisms also influence the development and severity of the physical and/or mental disability.
2. The extent of joint destruction has no correlation with the intensity of pain. In fact, a painful joint may show no or only very little changes, while a terrible joint may produce no pain at all.
3. A pain felt in the joint may not be coming from the joint itself, but w

referred from somewhere else.

CONVENTIONAL TREATMENT FOR DEGENERATIVE ARTHRITIS

Osteoarthritis is a chronic disease, and there is no known cure. Treatments generally aim at relieving symptoms and preventing joint deformity.

1. Pain and anti-inflammatory medications—over-the-counter and prescription drugs with many side effects.
2. Corticosteroids—taken by mouth or injected into the joint.
3. Hyaluronic acid—a lubricating joint fluid.
4. Physical and occupational therapy—to improve joint mobility and muscle strength.
5. Assistive devices—to ease the stress or pressure on the joints.
6. Natural and alternative therapies—nutritional supplements, massage, relaxation techniques, acupuncture, etc.
7. Joint replacement surgery.

6-2: TCM RHEUMATISM

KEYWORDS

1. Rheumatism—unspecified (ICD-10 Code **M79.0**)
2. Joint disorder—unspecified (ICD-10 Code **M25.9**)
3. Joint pain—(ICD-10 Code **M25.50**)
4. Joint swelling—(ICD-10 Code **M25.4**)
5. Joint stiffness—unclassified (ICD-10 Code **M25.6**)

KEY HERBAL FORMULA

Tangkuei and Magnolia Formula (Wu Ji San 五積散)

In TCM all bone and joint diseases are called rheumatism and are all dumped into the category of “Wind and Moisture” diseases, because the ancient Chinese thought when wind evil and moisture evil fought each other, the bones and joints would suffer and resulted in pain and difficulty of movement. The *Yellow Emperor’s Classic of Internal Medicine* classifies this wind and moisture disease as “Bi (痹) syndrome” or “Numb” conformation.

The symptoms of rheumatism tend to get worse during cold and damp weather. There are four types of such illness:

1. Wind or mobile numbness refers to a sudden attack of rheumatism characterized by a fever with pain and swelling of the joints as in acute rheumatoid arthritis. The treatment for such problem is to expel the wind and to improve blood circulation.
2. Chill or pain numbness refers to chronic rheumatism characterized by normal temperature, sporadic joint pain becoming severe during cold weather, and localized pallor and chills in the affected area, as in chronic rheumatoid arthritis. The treatment is to get rid of the wind and moisture from the body.
3. Moist, fixed numbness occurs at a fixed site, although several joints may be affected simultaneously, as in polyarthralgia. Other symptoms may include numbness, joint swelling in the upper or lower extremities, joint deformities, and muscle atrophy. Moisture is said to adhere to the surface of the muscle. The treatment is to generally focus on expelling the moisture and improving blood circulation.
4. Heat-induced numbness is characterized by fever, mild chills, and swelling with burning pain in the joint during hot weather. Severe cases exhibit symptoms of high fever, thirst, irritability, and emotional instability. The treatment is to dispel the body wind and heat.

THINGS ASSOCIATED WITH DEGENERATIVE LUMBAR SPINE

1. Bone Spur—a characteristic finding in degenerative joint disease. It is overgrowth of bone because of degenerative joint changes. The bone spur itself does not necessarily cause pain, but when it is aggravating the surrounding tissue or when it is inflamed, it can be very painful.
2. Spondylosis—a loss of disc space and spinal mobility due to degenerative

changes. A degenerative change of the spine is frequently associated with degenerative changes of the disc.

3. Facet Joint Osteoarthropathy—pain in the two small joints behind the vertebrae. Facet joint osteoarthropathy is a degenerative change of the facet joints. A degenerative change or arthritis in the facet joints may increase low back pain when the low back is arched.
4. Spinal Stenosis—a narrowing of the spinal canal. The spinal canal is where the spinal cord lives. Spinal stenosis is often caused by degenerative bone changes in the facet joints or ligament hypertrophy. It can also be caused by a slippage in the vertebrae or a hardening of the ligament. As a result of the normal aging process, degenerative changes in the spine can narrow the diameter of the lumbar canal.

PURPOSES OF HERBAL TREATMENTS FOR LOW BACK RHEUMATISM

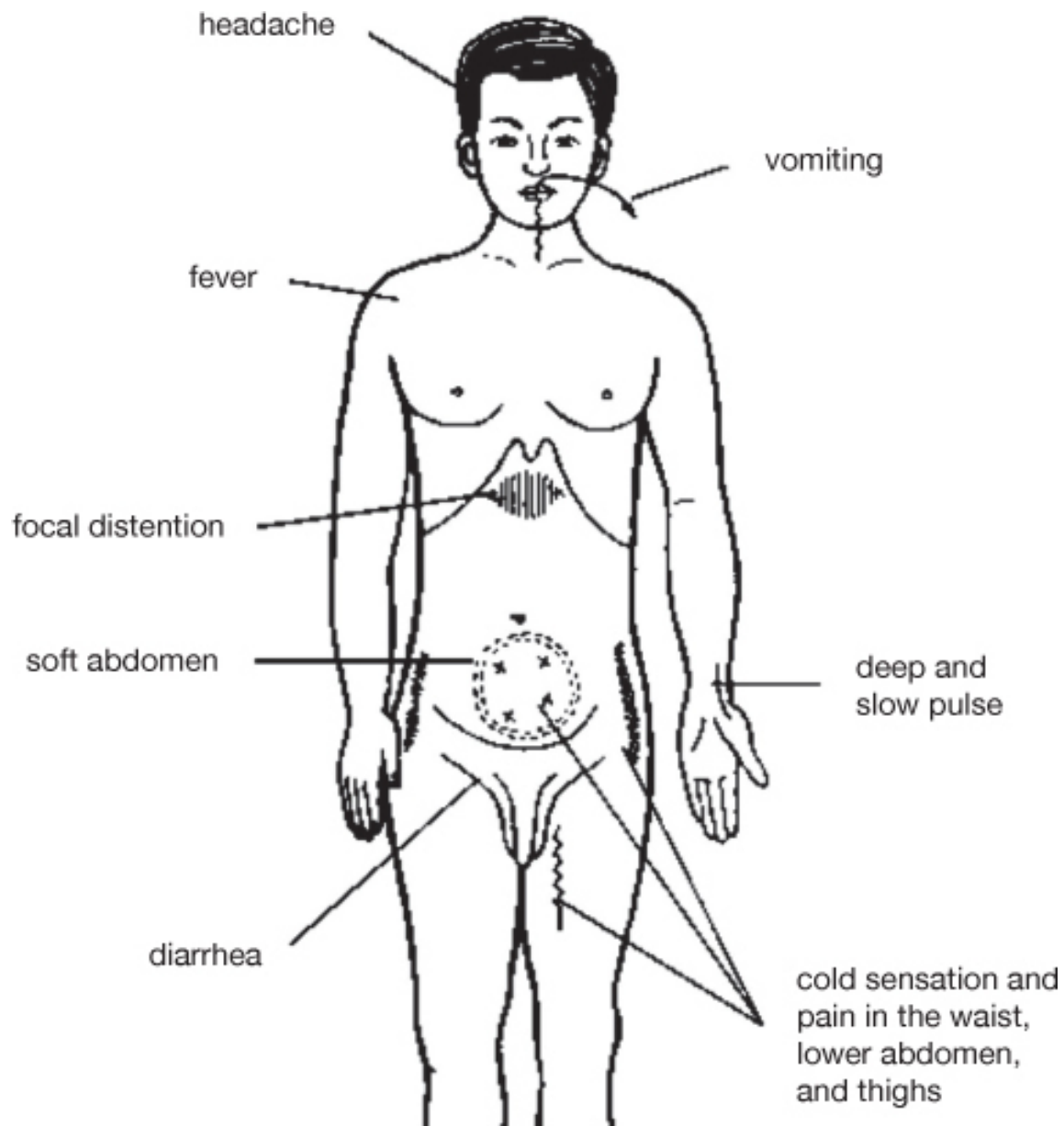
1. To sedate and harmonize—licorice and peony
2. To remove moisture and extra fluid—cinnamon, pueraria, ma-huang, and siler

Tangkuei and Magnolia Formula (Wu Ji San 五積散)

This formula contains licorice, cinnamon, peony, raw ginger, jujube, ma-huang, angelica, tang-kuei, cnidium, platycodon, citrus, pinellia, hoelen, atracylodes elba, atracylodes lancea, dried ginger, magnolia, and chih-shih. Its Chinese name literally means “the five obstructions remover” and is used to free Qi, blood, phlegm, water, and food.

Indications

1. Low back pain
2. Chills
3. Gastrointestinal weakness



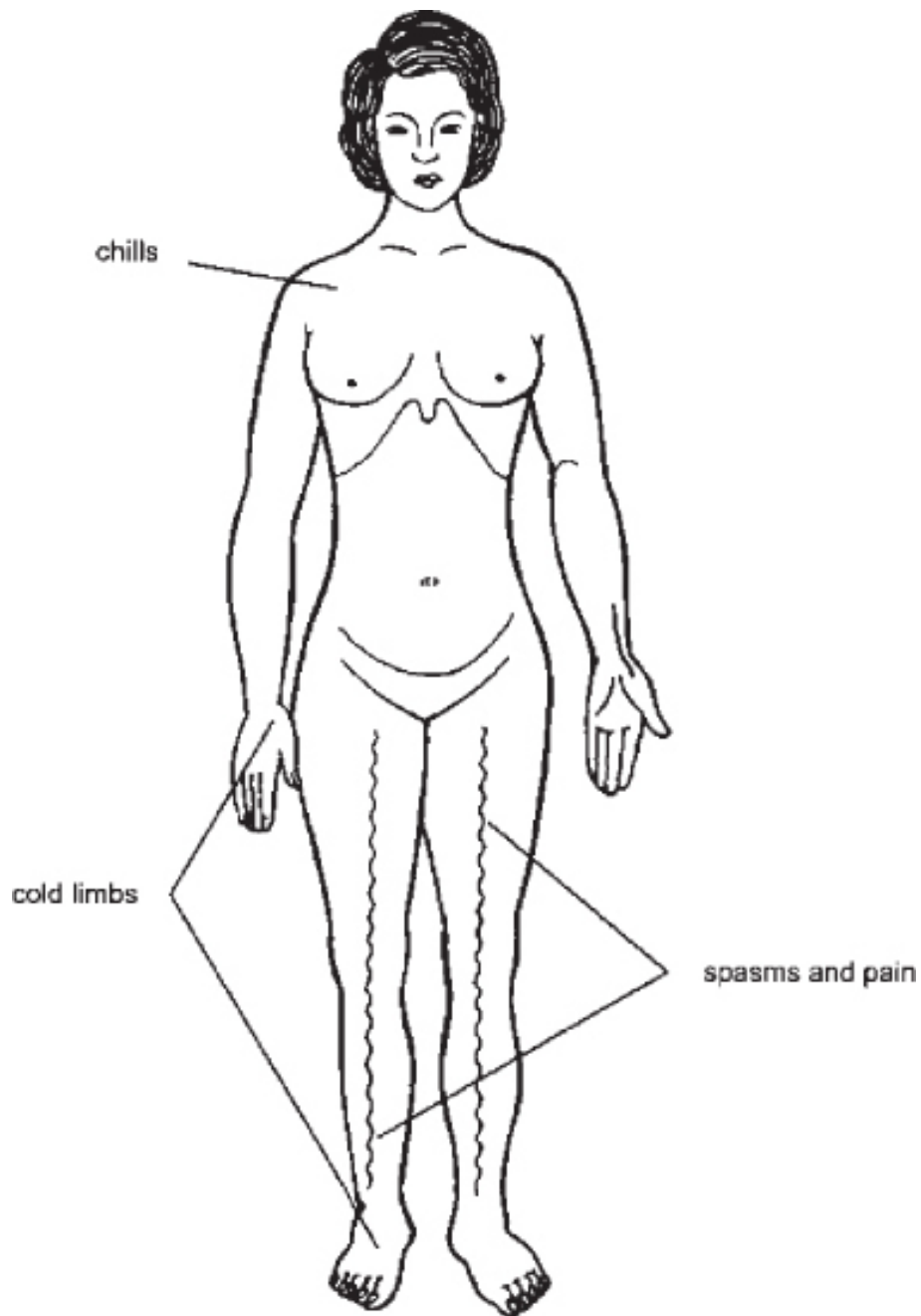
Peony, Licorice, and Aconite Combination (Shao Yao Gan Cao Fu Zi Tang 芍藥甘草附子湯)

This is one of the typical herbal analgesics used for various kinds of pain. It contains peony, licorice, and aconite.

Indications

1. Pain and muscle spasms
2. Chills that cause muscle spasms and aches
3. Often used to relieve pain from the kidneys, gallstones, and intestinal coli
4. No noticeable side effects after continuous usage

The most striking effect of this formula seems to be an improvement of gastrointestinal functions. In this regard, it is clearly superior to the NSAIDs and antacids of conventional medicine.

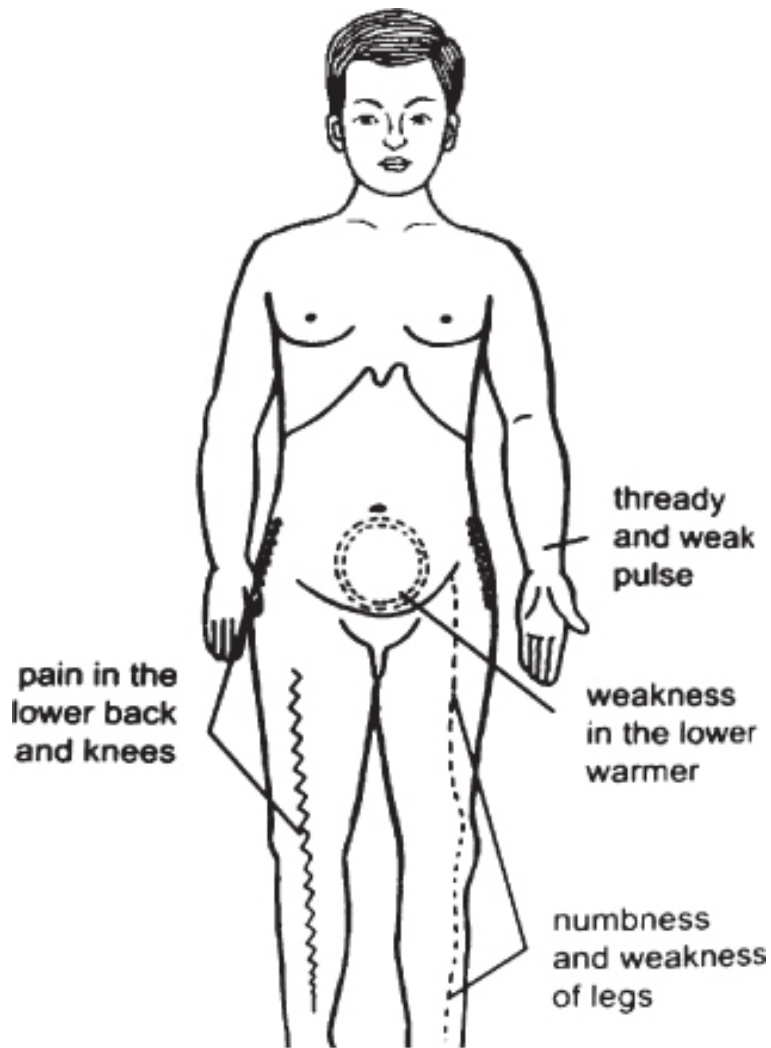


Tu-huo and Loranthus Combination (Du Huo Ji Sheng Tang 獨活寄生湯)

The ingredients of this formula are tu-huo, chin-chiu, siler, asarum, cinnamon bark, loranthus, eucommia, achyranthes, tang-kuei, rehmannia, peony, cnidium, ginseng, hoelen, and licorice.

Indications

1. Chronic rheumatoid arthritis
2. Chronic low back pain
3. Osteoarthritis
4. Sciatica
5. Bulging or herniated intervertebral disc



DIENNA'S HERBAL TREATMENT

Before considering an herbal preparation, we must take Dienna's conformation into consideration. Her tongue was slightly red with a light-yellowish tongue fur that suggested internal organ involvement. Red tongues are often seen in cases of infectious disease, acute dehydration, early post-operative stage, late-stage carcinoma, tuberculosis, and portal cirrhosis with ascites. Yellow tongue fur or tongue coating may be light yellow or dark yellow, but brownish or burnt yellow (the darkest) suggests an excess-heat conformation, chiefly seen in those with a high fever due to an infection or gastrointestinal disturbance with an impairment of body nutrients.

I suggested Dienna tried three weeks of **Tang-kuei and Magnolia Formula (Wu Ji San 五積散)** followed by four weeks of **Peony, Licorice,**

and Aconite Combination (Shao Yao Gan Cao Fu Zi Tang 芍藥甘草附子湯). She called at the end of the fourth week and said that she was feeling much better so she decided to skip taking **Peony, Licorice, and Aconite Combination (Shao Yao Gan Cao Fu Zi Tang 芍藥甘草附子湯)**. She felt good enough to celebrate, so she took a trip to Florida to do some shopping and enjoy the sunshine!



6-3: HERBAL FORMULAS FOR COLD AND DAMPNESS

SIGNS AND SYMPTOMS OF COLD AND DAMPNESS

1. Heaviness and chilling pain in the lumbar region that is not relieved by rest and is aggravated by cold or humid weather.
2. Numbness and discomfort due to spasms in the lumbar paraspinal muscle

3. Loss of trunk mobility.
4. White and greasy tongue coating.
5. Deep and slow arterial pulses.

HERBAL FORMULAS FOR COLD AND DAMPNESS

Tang-kuei and Magnolia Formula (Wu Ji San 五積散)

Indications

1. Painful chills
2. Low back pain
3. Neuralgia
4. Gastroenteritis
5. Dysmenorrhea

Tu-huo and Loranthus Combination (Du Huo Ji Sheng Tang 獨活寄生湯)

Indications

1. Chronic rheumatoid arthritis
2. Chronic low back pain
3. Osteoarthritis
4. Sciatica
5. Bulging or herniated intervertebral discs

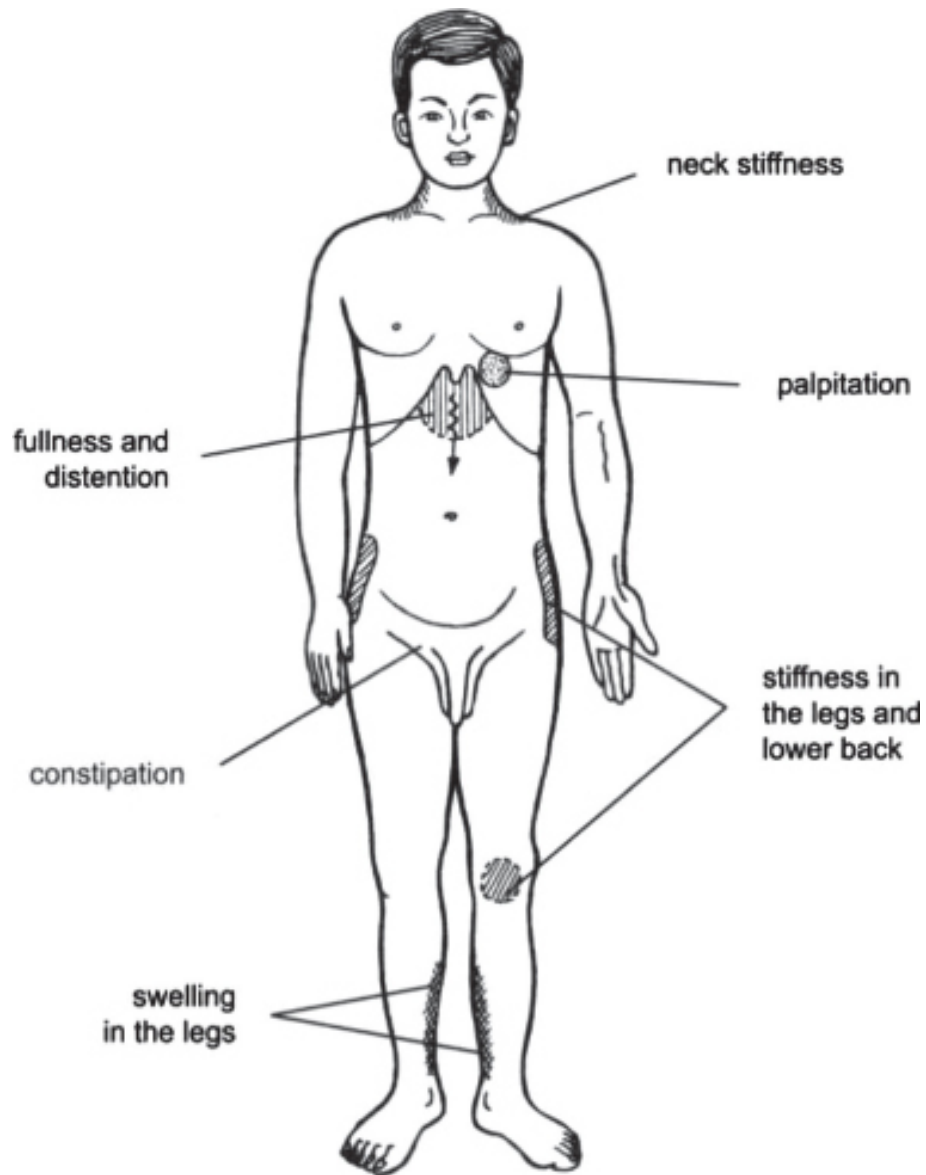
If low back pain is referred from upper back and knees, use the combination of **Tang-kuei and Magnolia Formula (Wu Ji San 五積散)** plus **Tu-huo and Loranthus Combination (Du Huo Ji Sheng Tang 獨活寄生湯)**. The purposes are to dispel wind and cold and to unblock the channels and tone the liver and kidney.

6-4: HERBAL FORMULAS TO DISPEL MOISTURE

Areca Seed Nine Combination (Jiu Wei Bin Lang Tang
九味檳榔湯)

Indications

1. Pale facial complexion
2. Edema
3. Constipation
4. Heart palpitations
5. Disorders of the autonomic nervous system

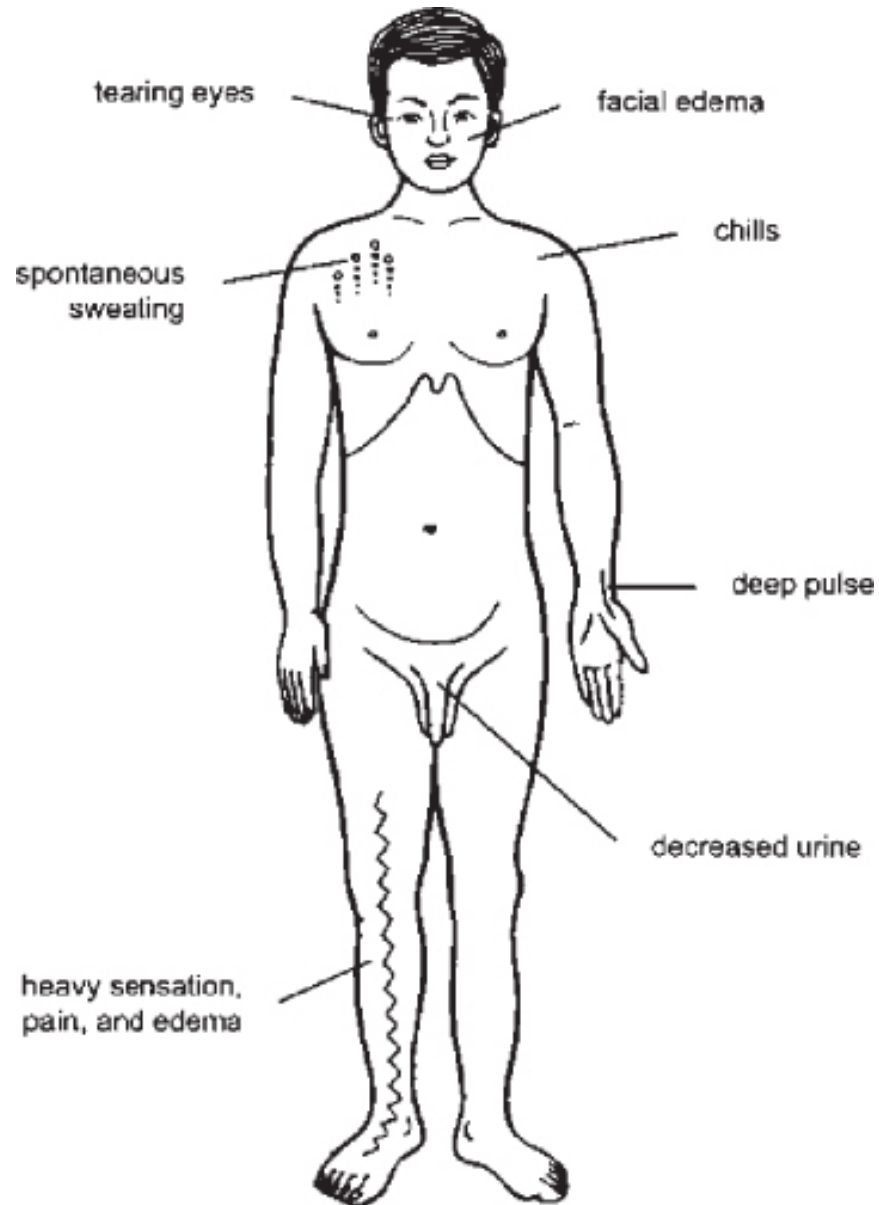


Atractylodes Combination (Yue Bi Jia Zhu Tang 越婢加朮湯)

Indications

1. Sudden and sever edema
2. Diminished urine output
3. Nephrosis

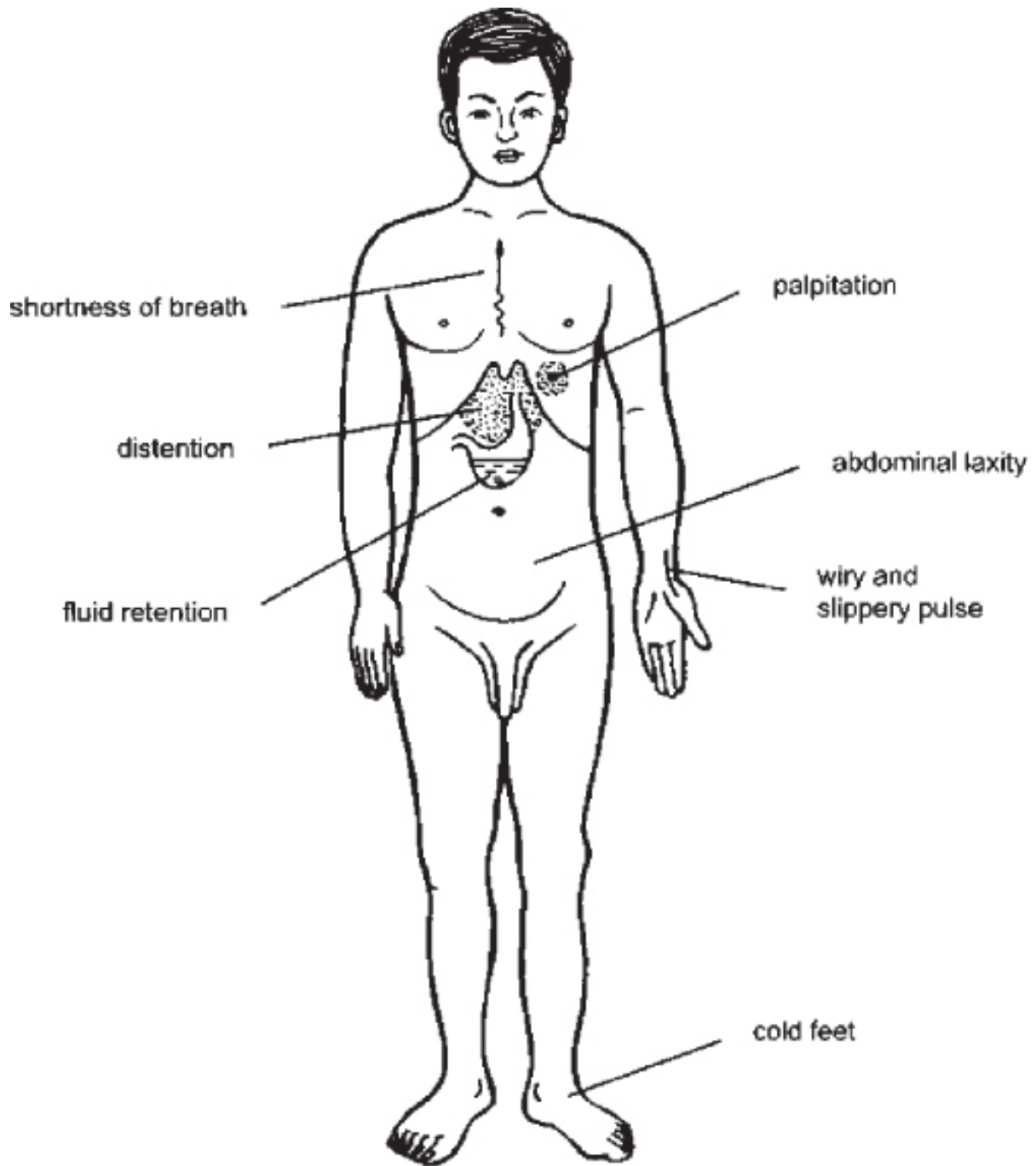
4. Polyarticular rheumatism
5. Urticaria
6. Skin rashes



Atractylodes and Hoelen Combination (Ling Gui Zhu
Gan Tang 苓桂朮甘湯)

Indications

1. Rheumatoid arthritis
2. Chronic gastritis
3. Chronic bronchitis
4. Bronchial asthma
5. Congestive heart failure
6. Chronic nephritis
7. Meniere's disease
8. Neurosis

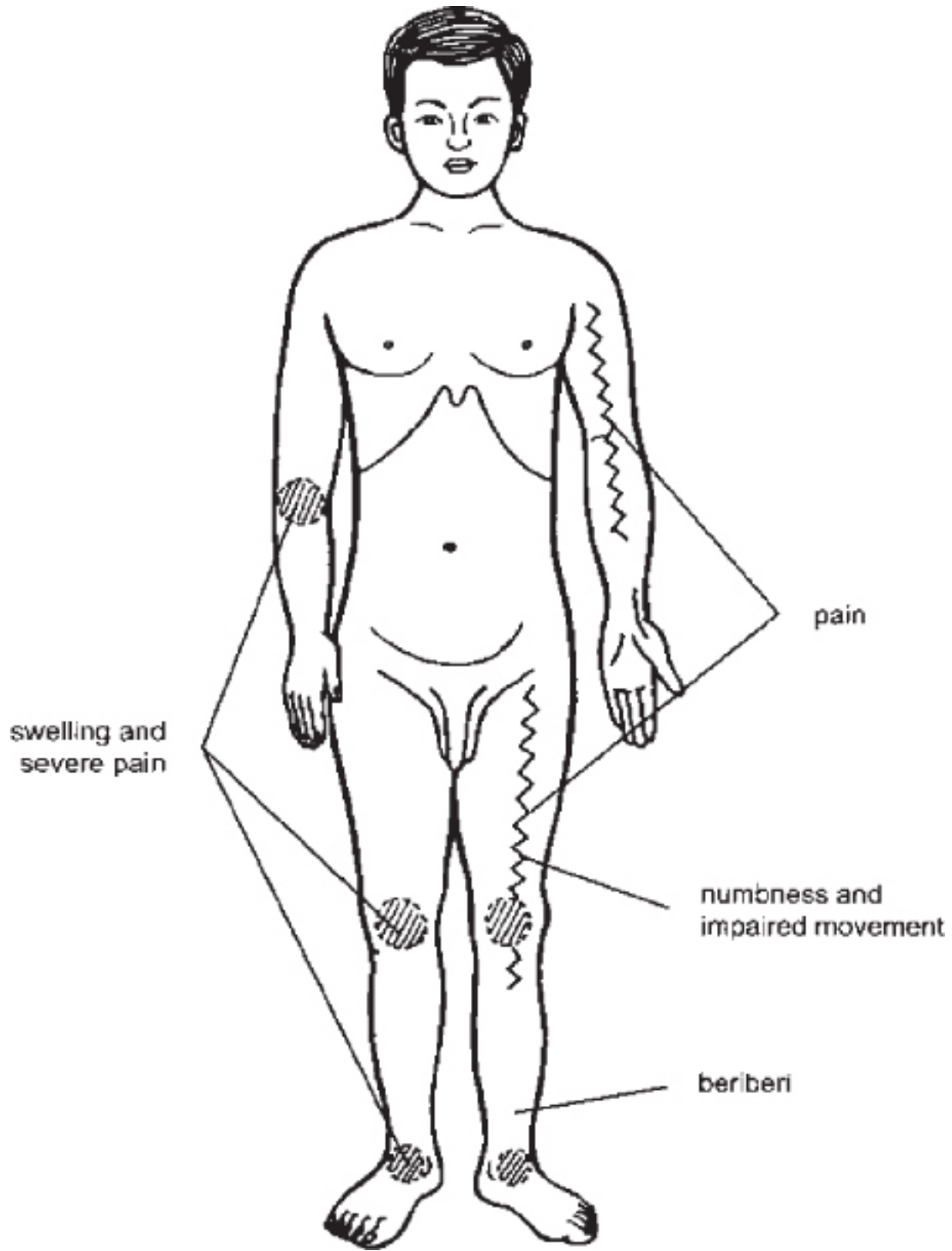


Coix Combination (Yi Yi Ren Tang 薏苡仁湯)

Indications

1. Joint pain with swelling

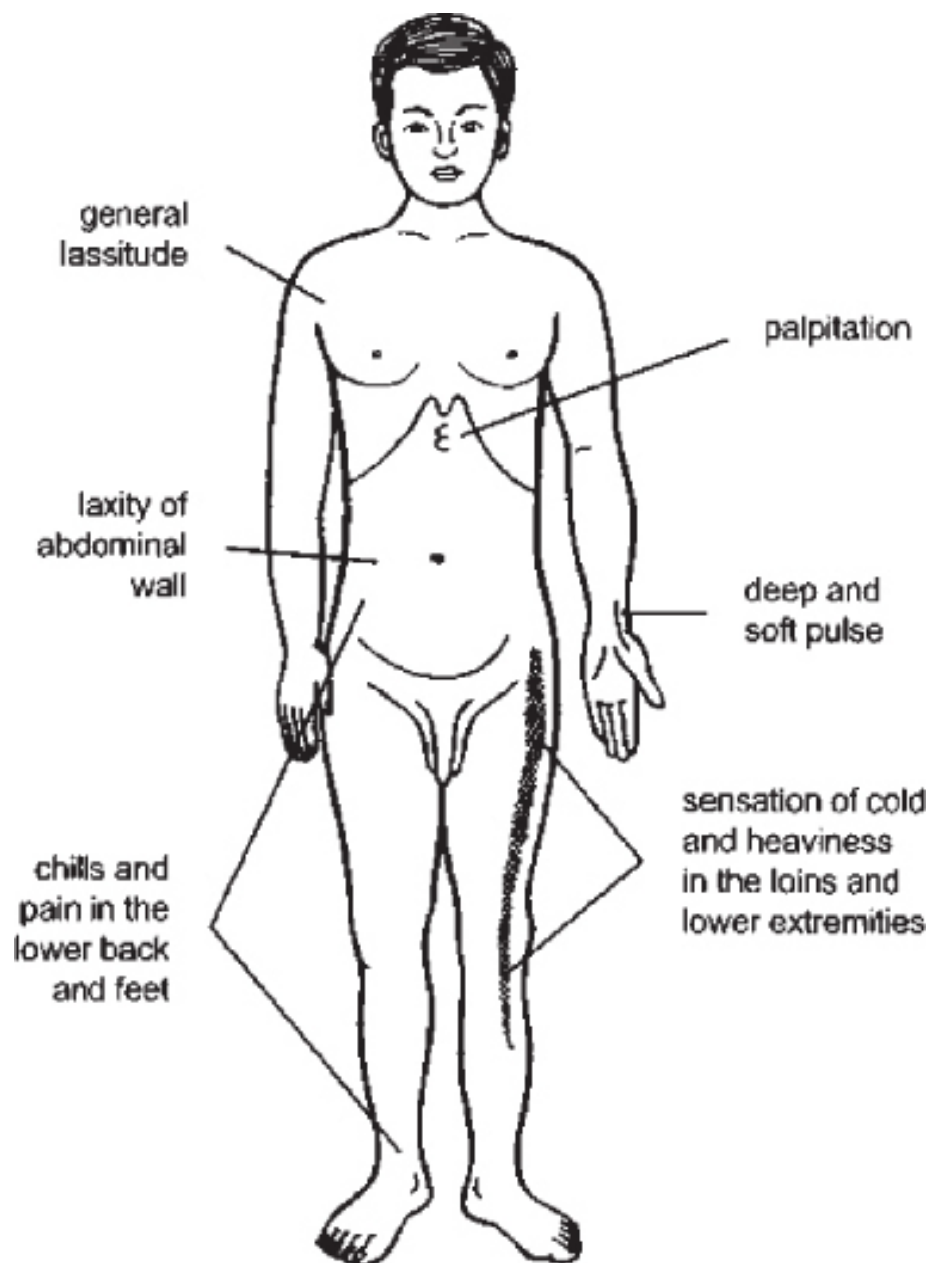
2. A feverish sensation
3. Muscle pain
4. Neuralgia



Ginger and Hoelen Combination (Gan Jiang Ling Zhu Tang 甘薑苓朮湯)

Indications

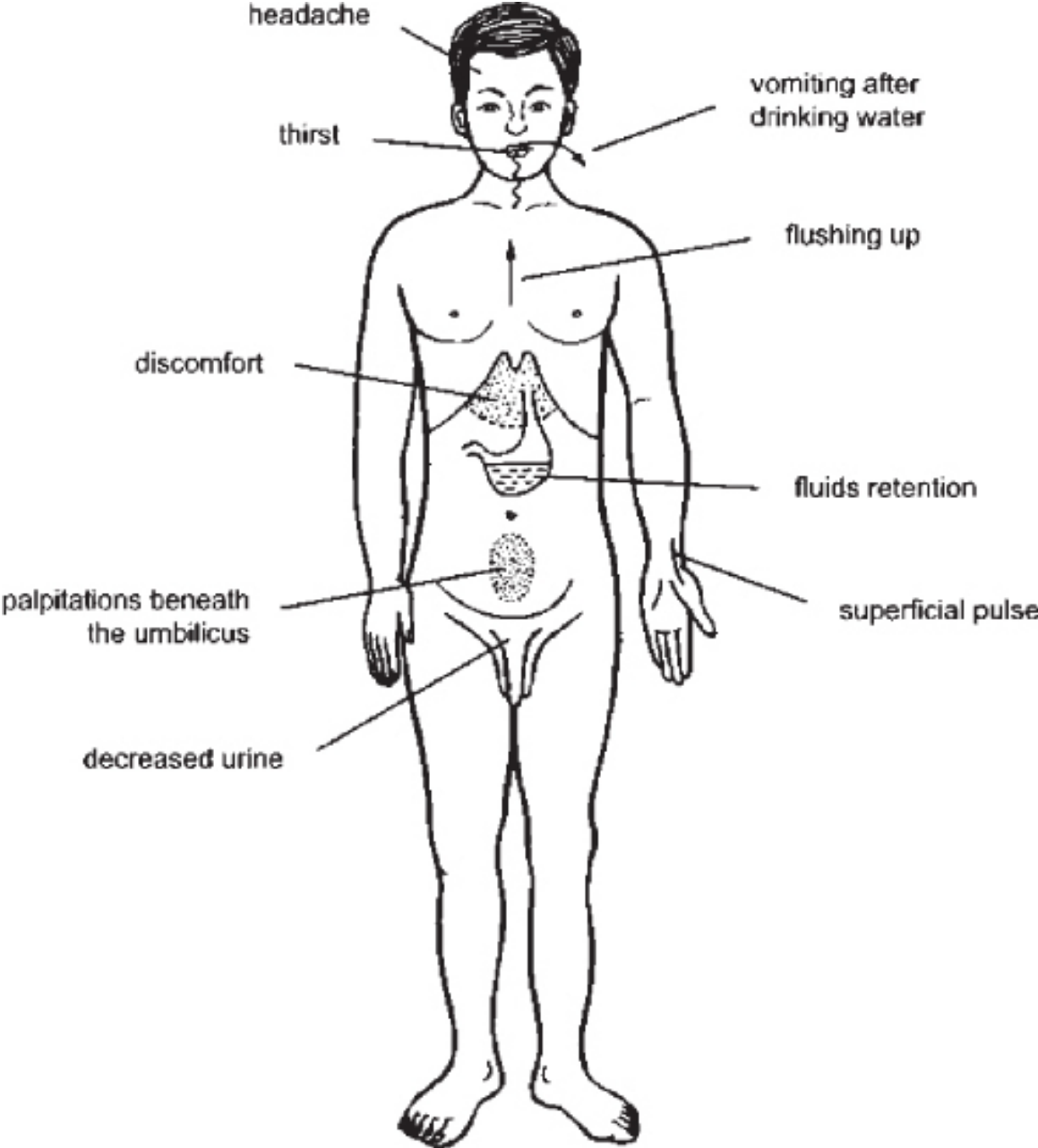
1. Chills in the hips and loins
2. Low back pain



Hoelen Five Herb Formula (Wu Ling San 五苓散)

Indications

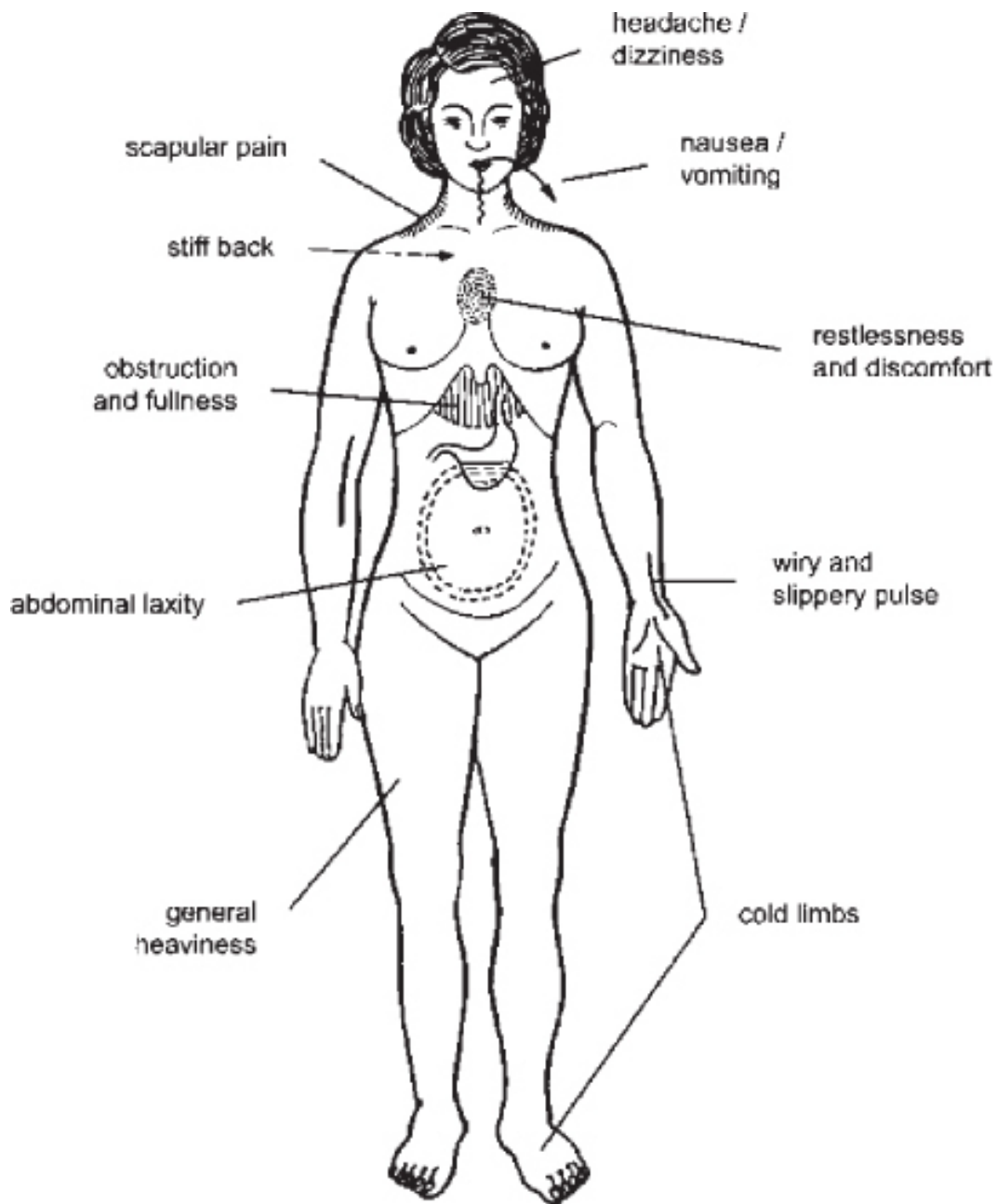
- 1. Damp conformation accompanied by oliguria and extreme thirst
- 2. Dizziness
- 3. Vomiting after drinking water



Pinellia and Gastrodia Combination (Ban Xia Bai Zhu Tian Ma Tang 半夏白朮天麻湯)

Indications

1. Headaches and dizziness with delicate constitutions
2. Pale facial complexion
3. Palpable sloshing sounds in stomach



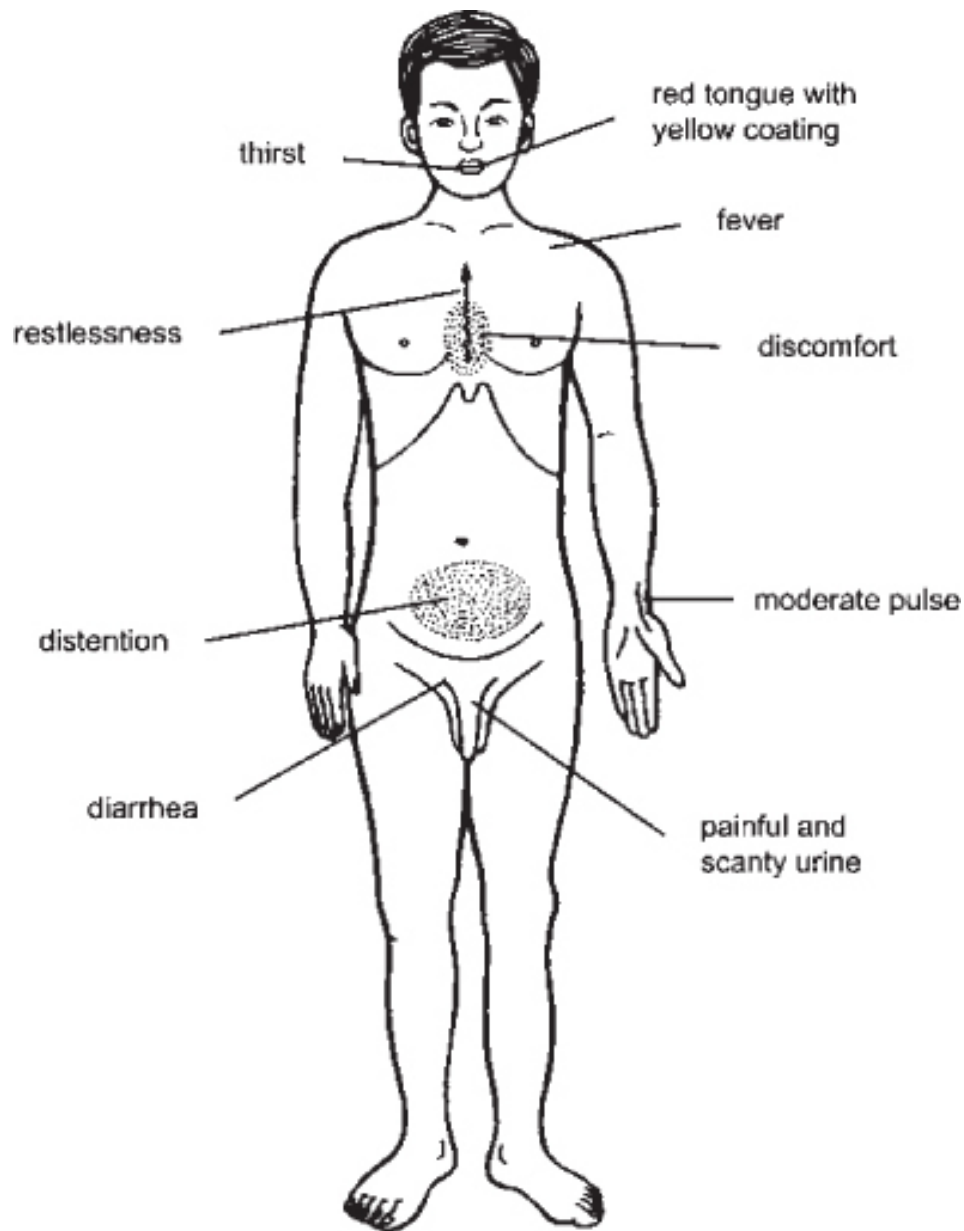
Polyporus Combination (Zhu Ling Tang 豬苓湯)

Indications

1. Bladder infections
2. Urethritis

3. Urinary stones

4. Nephritis accompanied by hematuria in feverish conformation

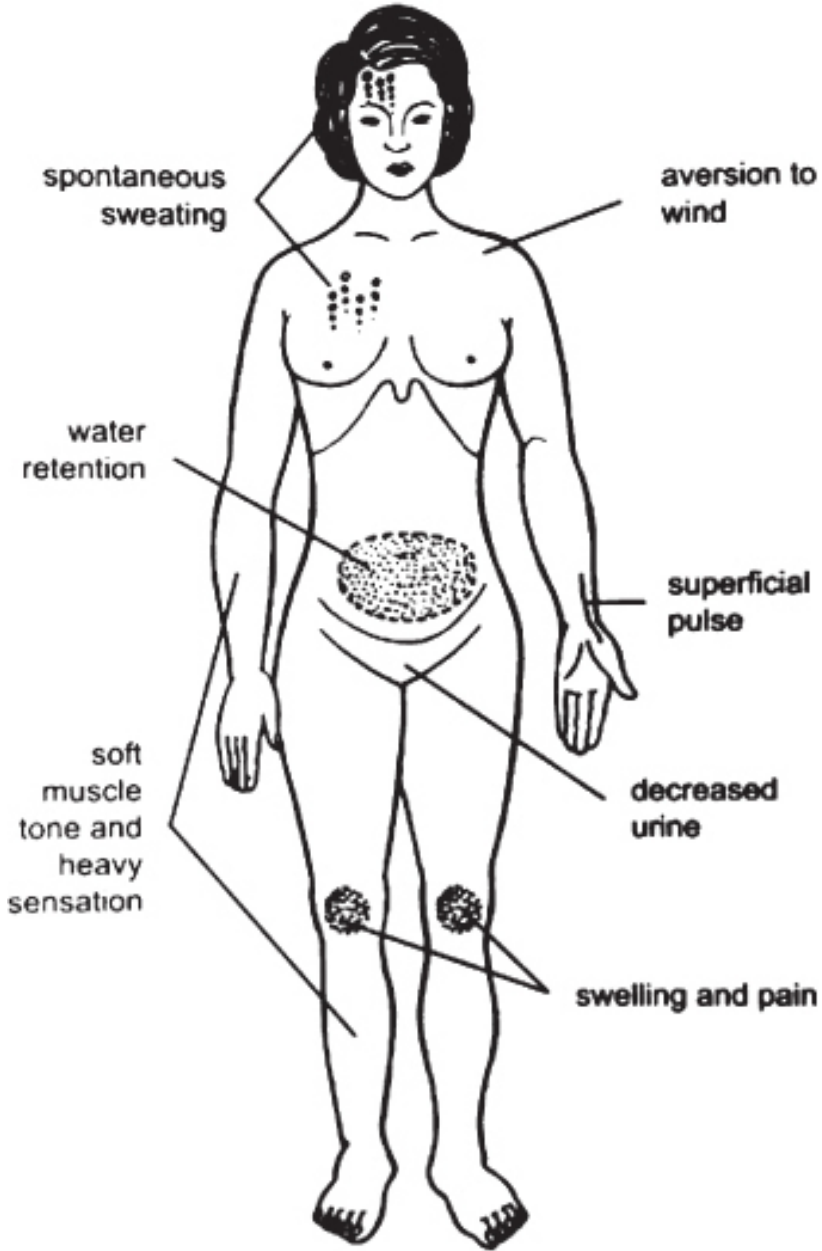


Stephania and Astragalus Combination (Fang Ji Huang Qi Tang 防己黃耆湯)

The cardinal diagnostic indicators for using this formula are pale skin, water obesity, and abundant perspiration.

Indications

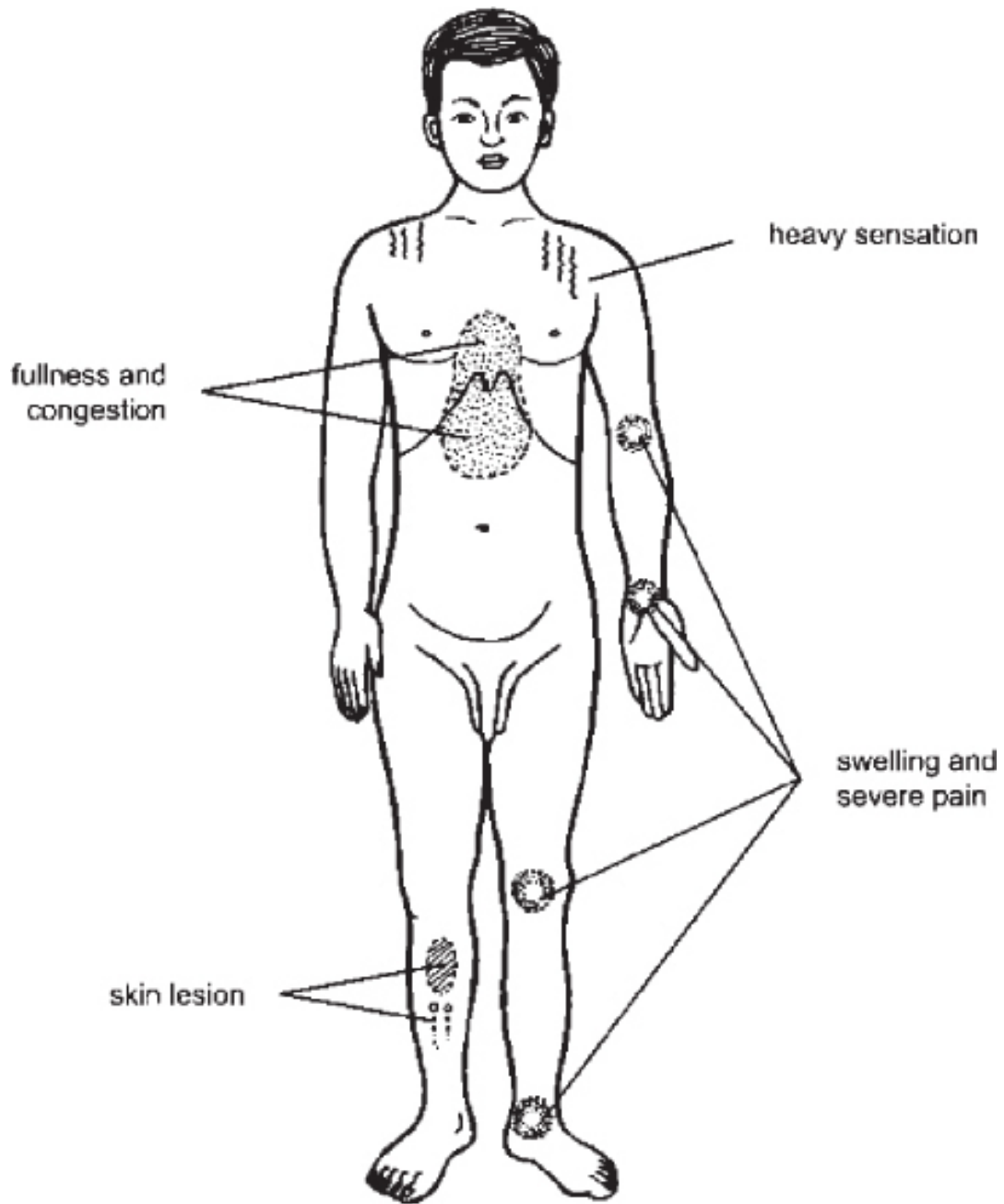
- 1. Excess perspiration
- 2. Swollen knee joints
- 3. Obesity



Tang-kuei and Anemarrhena Combination (Dang Gui Nian Tong Tang 當歸拈痛湯)

Indications

1. Damp-heat syndrome marked by a heavy sensation in the upper back and shoulders
2. Fullness and congestion in the chest and epigastrium
3. A generalized aching
4. Swelling and severe pain in the legs and ankles
5. Itching, burning, and irritation of the lower extremities



6-5: HERBAL FORMULAS TO DISPEL WIND EVIL

Chiang-huo and Curcuma Combination (Juan Bi Tang 頭痒湯)

The major function of this formula is to augment and harmonize Qi in addition to dispelling wind-dampness such as in Bi syndrome. Bi syndrome due to wind-dampness is characterized by body aches, stiffness in the neck and upper back, painful elbow and shoulder, heaviness and numbness sensation in the limbs, and impaired joint movement.

Indications

1. Osteoarthritis
2. Rheumatoid arthritis
3. Scapulohumeral periarthritis
4. Cervical spondylopathy

Cinnamon and Angelica Formula (Shang Zhong Xia Tong Yong Tong Feng Wan 上中下通用痛風丸)

The main function of the formula is to clear damp-heat, dispel wind and phlegm, and to activate blood.

Indications

1. Gouty arthritis
2. Rheumatoid arthritis
3. Degenerative joint diseases
4. A generalized joint pain

Gastrodia and Uncaria Combination (Tian Ma Gou Teng Yin 天麻鉤藤飲)

Traditionally this formula was used for hyperactivity of the liver Yang with internal movement of liver wind, marked by a headache, vertigo, tinnitus, flushing-up, insomnia, a red tongue, and a rapid and wiry pulse. In severe

cases, there may be deviation of the mouth and eyes, numbness, twitching, spasms in the limbs, or hemiplegia.

Indications

1. Above symptoms
2. Hypertension
3. Cerebrovascular disease
4. Transient ischemic attacks
5. Epilepsy
6. Neurosis
7. Vertigo
8. Trigeminal neuralgia
9. Meniere's disease
10. Facial paralysis
11. Hemiplegia
12. Hyperthyroidism

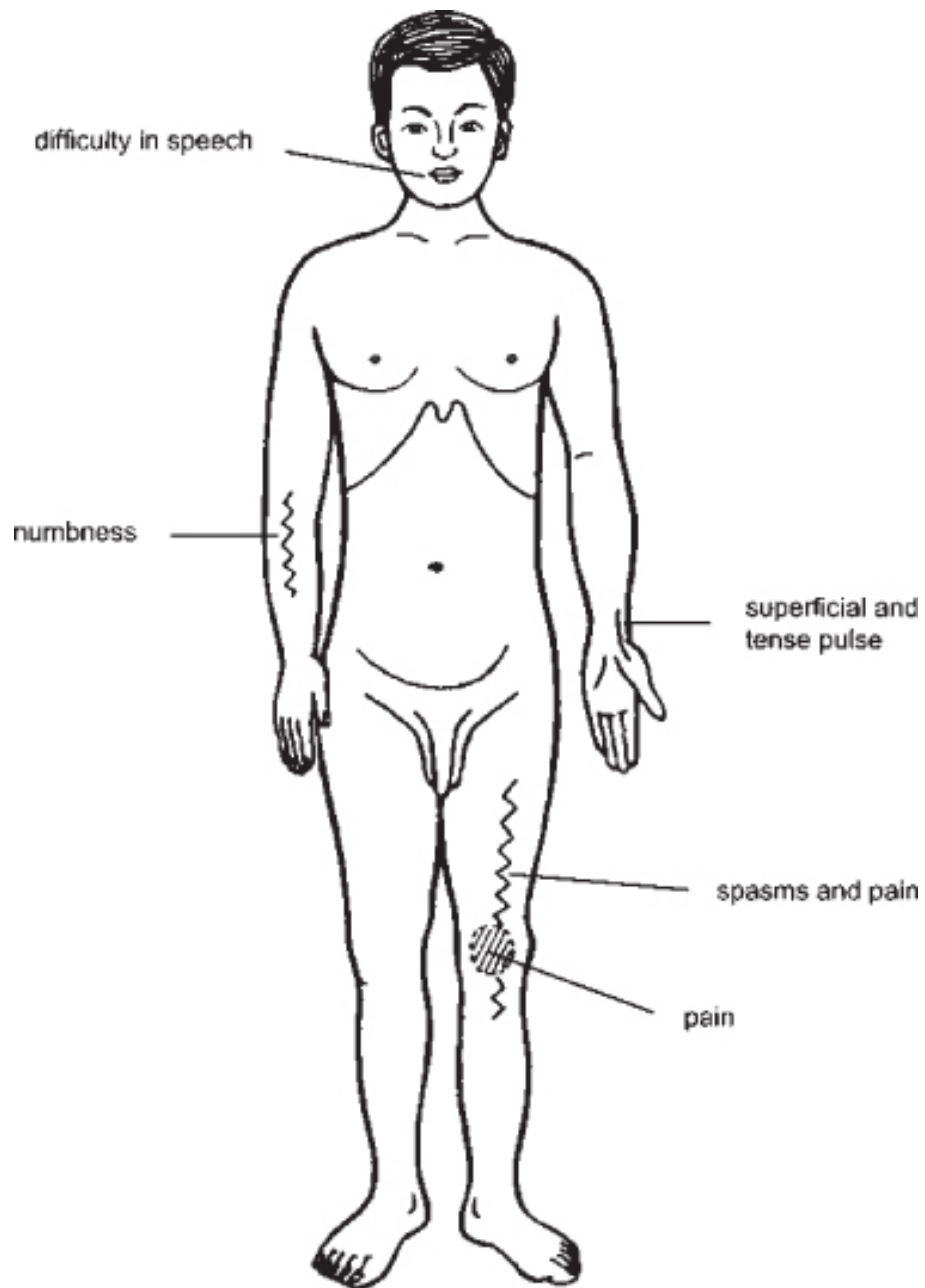
Major Chin-chiu Combination (Da Qin Jiao Tang 大秦 朮湯)

The components of this formula are chin-chiu, chang-huo, tu-huo, siler, asarum, angelica, peony, tang-kuei, cooked rehmannia, raw rehmannia, cnidium, white atractylodes, hoelen, scute, gypsum, and licorice. The main functions of this formula are to dispel wind, clear heat, and nourish and activate the blood.

Indications

1. Early stages of channel disorders due to wind-invading and characterized by muscle spasms, joint pain, and numbness sensation in the limbs
2. Difficulty in ambulation and speech
3. Eye or mouth deviation

4. Thin and white or yellow tongue coatings
5. Superficial and tense arterial pulses or thin and wiry pulses
6. Arthritis
7. Fibromyalgia
8. Paralysis of the limbs

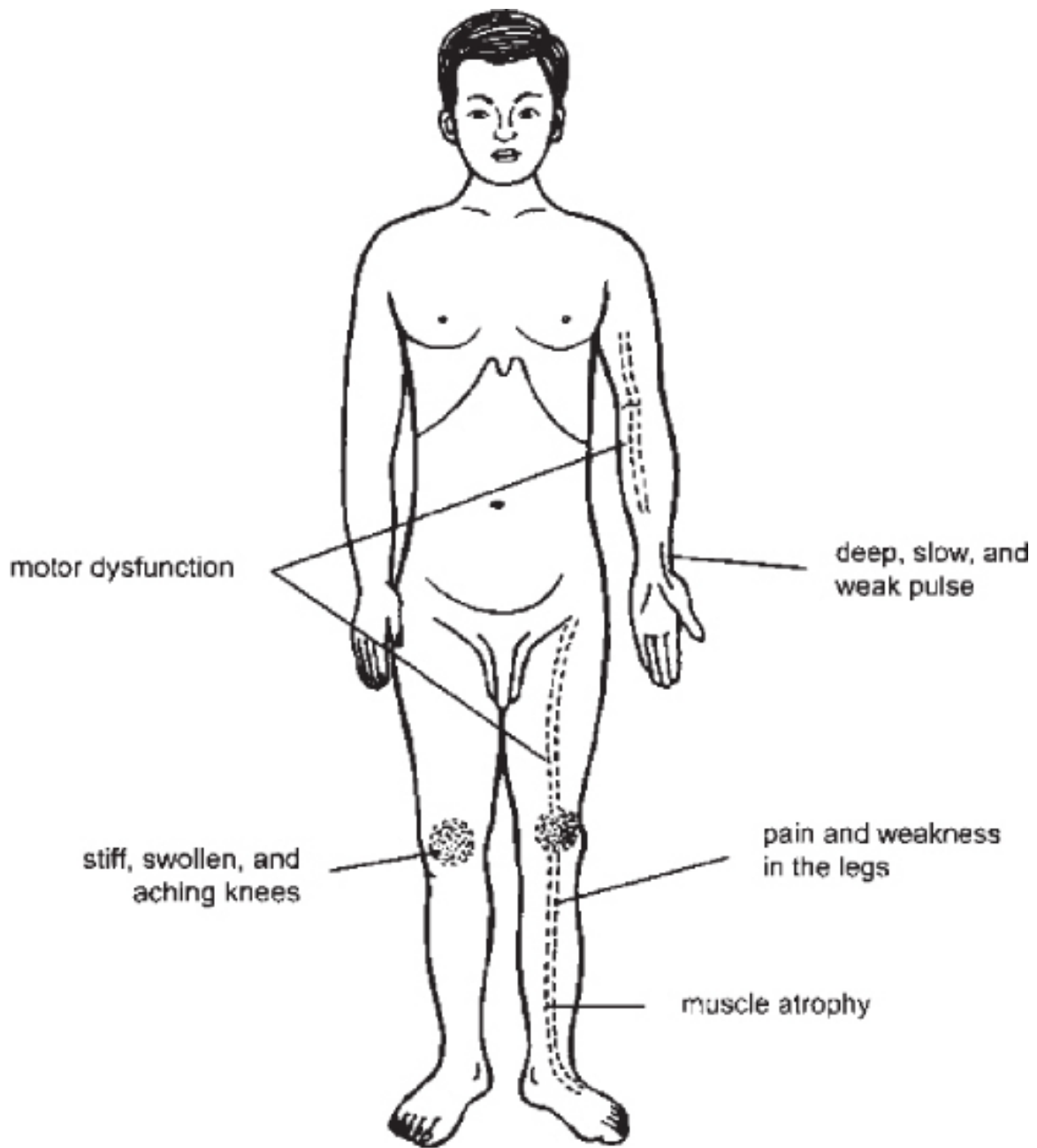


Major Siler Combination (Da Fang Feng Tang 大防風湯)

The ingredients of this formula are tang-kuei, cnidium, peony, rehmannia, ginseng, atractylodes, licorice, raw ginger, jujube, astragalus, siler, chiang-huo, achyranthes, eucommia, and aconite.

Indications

1. Polyarticular rheumatism
2. Weakened patients with weak-chill conformations and dry skin

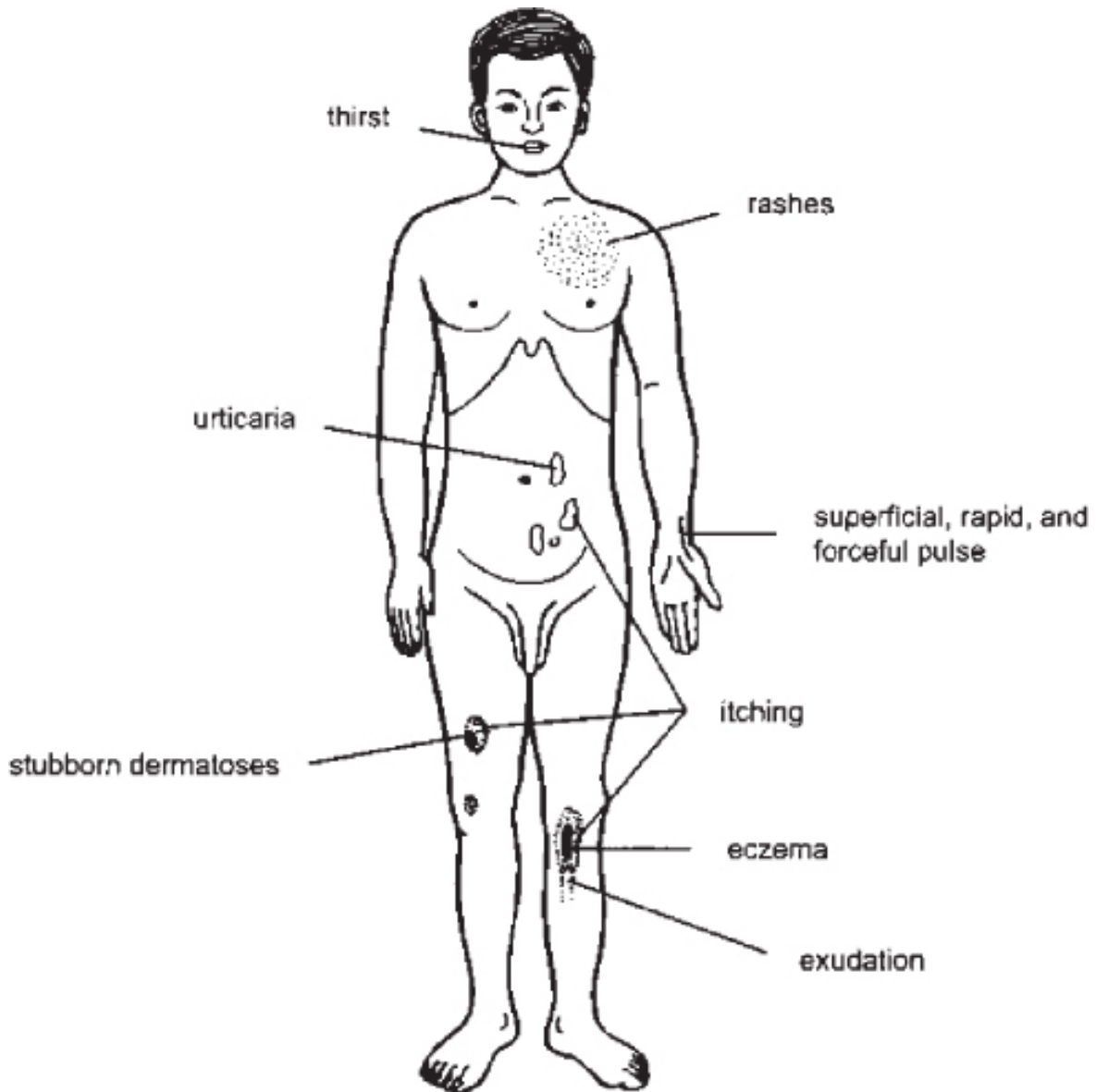


Tang-kuei and Arctium Formula (Xiao Feng San 消風散)

The components of this formula are tang-kuei, arctium, siler, cicada, schizonepeta, gypsum, akebia, red atractylodes, sophora root, anemarrhena, rehmannia, sesame, and licorice.

Indications

1. Skin disorders due to wind-dampness or wind-heat, marked by skin rash or cloudy maculae all over the body with itching and oozing liquid scratched
2. White or yellow tongue coating with superficial, rapid, and forceful arterial pulses
3. Nasty eczema
4. Acute or chronic urticaria
5. Atopic dermatitis
6. Drug-related dermatitis
7. Psoriasis
8. Conjunctivitis
9. Pruritus
10. Prickly heat, acne, scabies, and other skin diseases aggravated by hot weather
11. Acute nephritis

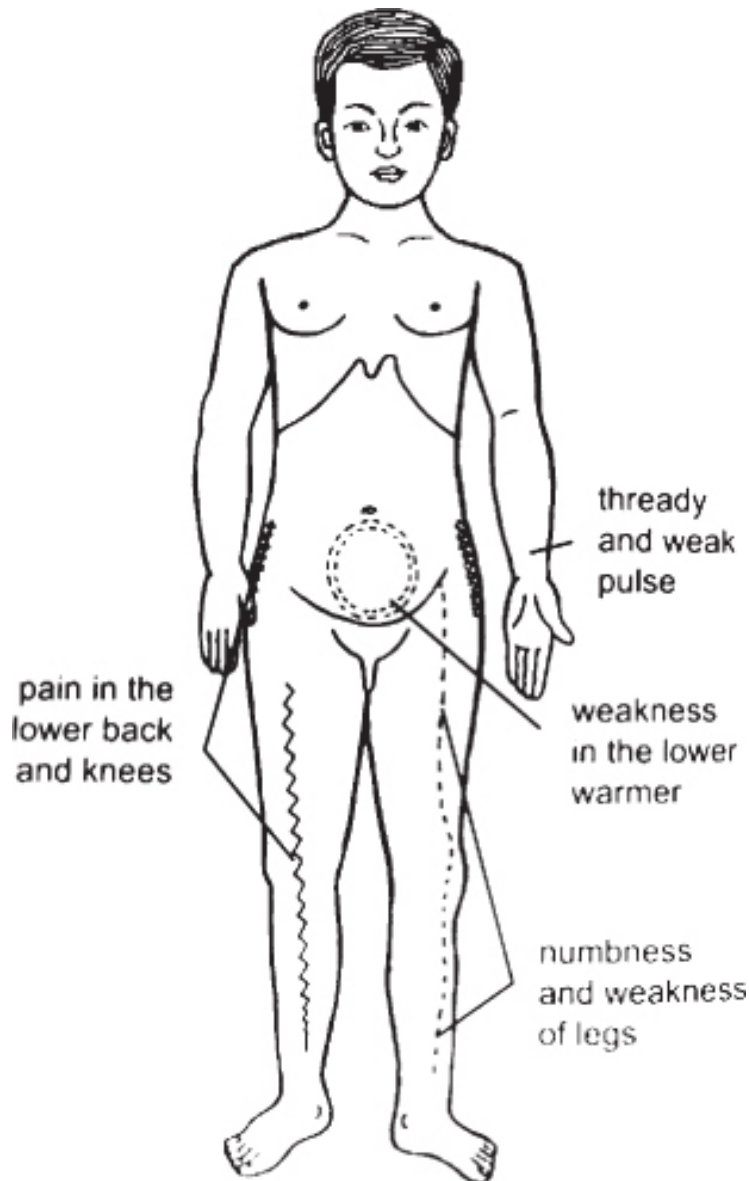


Tu-huo and Loranthus Combination (Tu Huo Chi Sheng Tang 獨活寄生湯)

The ingredients of this formula are tu-huo, chin-chiu, siler, asarum, cinnamon bark, loranthus, eucommia, achyranthes, tang-kuei, rehmannia, peony, cnidium, ginseng, hoelen, and licorice.

Indications

1. Chronic Bi syndrome with liver and kidney deficiency
2. Qi and blood deficiency marked by low back and knee pains, stiffness, weakness, and numbness of the lower extremities
3. An aversion to cold and attraction to warmth
4. Shortness of breath and palpitation
5. A pale tongue with white coating
6. Thready and weak arterial pulses
7. Chronic rheumatoid arthritis
8. Osteoarthritis
9. Chronic low back and leg pain
10. Traumatic injury to the lower extremities
11. Sciatica due to intervertebral disc herniation
12. Poliomyelitis
13. Scapulohumeral periarthritis



6-6: RHEUMATOID ARTHRITIS

KEYWORDS

1. Rheumatoid arthritis—wrists (ICD-10 Code **M05.539**)

February 1999

I called Leslie because it was a day clouded in sadness. A day that she never forgot—her husband was killed on this very day at Iwo Jima during World War II. I recalled what she told me years ago about how she felt when

she saw a Jeep show up at her front door. “I just collapsed as soon as I saw that Jeep with the flag in front . . . I knew exactly what had happened; the Navy always sent a chaplain out to the family when someone was killed at the war.” The chaplain happened to be President Woodrow Wilson’s grandson. Leslie took her husband’s death very hard; she was only nineteen years old at the time, and their first and only daughter was born just six weeks prior to the tragedy.

“I didn’t know you are still around here,” said Leslie, sounding very surprised to hear my voice.

“Shouldn’t I?”

“One of my friends called your office and tried to make an appointment with you last year but no one answered the phone. She thought you had left the area and were not treating patients anymore. That’s why you haven’t heard from me!”

“Sorry to disappoint you. But are you well? How’s your low back?”

“The rheumatologist said that I have rheumatoid arthritis!”

“Are you getting treatment?”

“You know I can’t take the anti-inflammatory drugs.”

“How about other treatments?”

“I took cortisone, and that made me sick, too. The doctor was talking about Methotrexate and that nearly scared me to death. After the rheumatologist took me off the medications, my hands and wrists started to feel terrible, and when I tried to get out of a chair, I was unable to lean on my hands, because my wrists wouldn’t support my body weight. If I didn’t use my hands when getting up, my low back would hurt even more. It seemed like when I needed my hands and wrists the most they would betray me! The pain eventually became intolerable, but I couldn’t take the pills because they had too many side effects.”

RHEUMATOID ARTHRITIS

Rheumatoid arthritis is an autoimmune disorder, a chronic inflammatory disease that involves mainly the lining of the joints. Sometimes it may be accompanied by systemic manifestations, such as heart, lungs, eyes, and blood vessels. Women are two to three times more likely to be affected than men. Those who have long-standing rheumatoid arthritis often develop severe joint

deformities and disabilities. Studies regarding the prognosis of elderly-onset rheumatoid arthritis have been contradictory. Some early studies indicated a rapid decline, whereas more recent reports showed a more benign course.

Rheumatoid arthritis is like other rheumatism in that it is difficult to treat; it involves bones, joints, capsules, and the surrounding tissues and is often affected by climate changes, especially the temperature and moisture. The common symptoms are joint pain, stiffness, swelling, and deformity. What makes matters worse is that it affects not only the joints but also the entire body. Although conventional medicine has made use of NSAIDs, steroids (cortisone), gold, and chemotherapy agents such as methotrexate (MTX) for the pain and other symptoms, the side effects that accompany their use have been troublesome. For example, cortisone may decrease the symptoms temporarily, but the long-term use of cortisone causes such side effects as moon face, body swelling, upset stomach, duodenal ulcer, and hypertension, among others.

Leslie had been suffering from low back pain since she was in her late thirties, but she was tough and didn't let it bother her too much. It was in early 1993 when the pain really got worse, and she also started to feel pain and stiffness in her shoulders. One day when she went with her children and grandchildren to the beach, all of the sudden she could not open her fist. She went to a rheumatologist. After the examination, the doctor told her that she had arthritis and put her on NSAIDs, but the medications made her sick and bleed from her bottom. One of her friends suggested that she try acupuncture. That friend of hers once took a trip to China sometime in the early nineties. One day this friend went to a hospital to observe an operation. She told Leslie that the Chinese doctors were so polite that they turned and bowed to the visitors first before starting the operation. The patient was a man who was having open-heart surgery. The man had no medicine for anesthesia except needles on his body. He was awake during the entire operation and appeared to have no pain at all. Her friend was simply astounded because that man's chest was open and the blood was going in and out of his heart, but he was smiling at the visitors! But the thought of having needles piercing Leslie's body petrified her.

Leslie came to me sometime in the fall of 1994. After the examination, I told her that she might want to give the needles a try since she didn't get along with pills. She agreed, but only if I used the smallest needles on her. I put needles on her hands, arms, back, buttock, and legs. Although she wanted to see what I was doing, she couldn't because I had her lay on her stomach.

Several years ago, when she had her right foot operated on, she asked the doctor to put a mirror up so she could see her right foot. The doctor said no because he had a lot of patients pass out from watching the procedure, so he didn't want to grant that wish anymore. Leslie was very curious about what was happening around her. She thought maybe she was getting more childlike as she grew older. She told me the sensations from the acupuncture needles felt somewhat "numbing" and "achy," but it was hard for her to describe.

"It is not the kind of sensation I would like to experience on a regular basis," she said. "It is not like a needle prick at all, and it isn't sharp either – it actually feels kind of dull and dead. The sensation seems like it is traveling from one place to another. It kinda feels like when your hand falls asleep and you get that funny tingling feeling when it wakes up." I guess that is something you have to experience for yourself. It was hard for Leslie to tell if acupuncture was doing any good for her after four weeks of treatment. However, she did notice that the intensity and duration of her pain had decreased to some extent. I didn't see her again, but I gave her a call on the seventeenth day of February the following year when I remembered.

"Do you treat rheumatoid arthritis?" asked Leslie.

"Not frequently," I said.

"Will acupuncture help?"

"I'm not sure."

"Do you have any other tricks up your sleeve?"

"Maybe traditional Chinese herbs."

6-7: HERBAL FORMULAS FOR RHEUMATOID ARTHRITIS

SOME TCM CONCEPTS ON RHEUMATISM

1. All forms of articular rheumatism manifest surface symptoms such as pain and joint stiffness.
2. Articular rheumatism is a condition in which water accumulates due to inflammation; damp condition herbal formulas reduce pain from articular rheumatism mainly through dispersion.
3. Accordingly, the formulas incorporate drying herbs such as diaphoretic

and diuretics.

4. When articular rheumatism becomes chronic, the body's secretions and internal fluid levels change, and stagnant blood conditions arise.
5. Chronic rheumatism is difficult to treat; the stagnant blood must be dispersed. Interior-treating, stagnant blood-dispelling formulas and surface-treating formulas are often used.

Traditional Chinese herbal therapy uses natural herbs, such as licorice and peony for anti-inflammation, pain relief, sedation, and harmonizing the body. Herbs like cinnamon, pueraria, ma-huang, and siler can remove fluids from the inflamed joints.

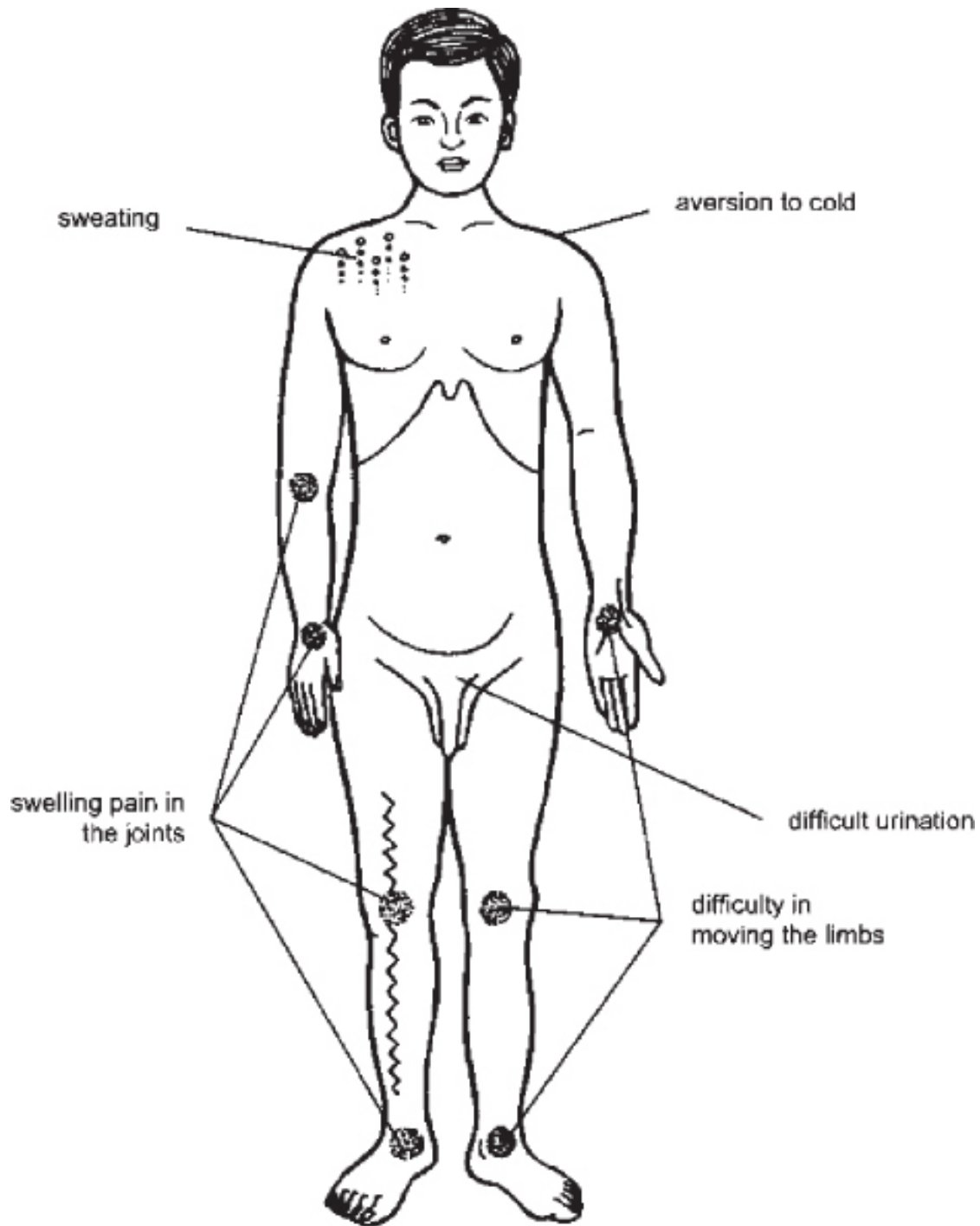
HERBAL FORMULAS FOR JOINT SYMPTOMS

Licorice and Aconite Combination (Gan Cao Fu Zi Tang 甘草附子湯)

The ingredients of the formula are processed aconite, licorice, cinnamon twig, and white atractylodes.

Indications

1. Severe acute joint pain
2. Rheumatoid arthritis
3. Neuralgia
4. Low back pain

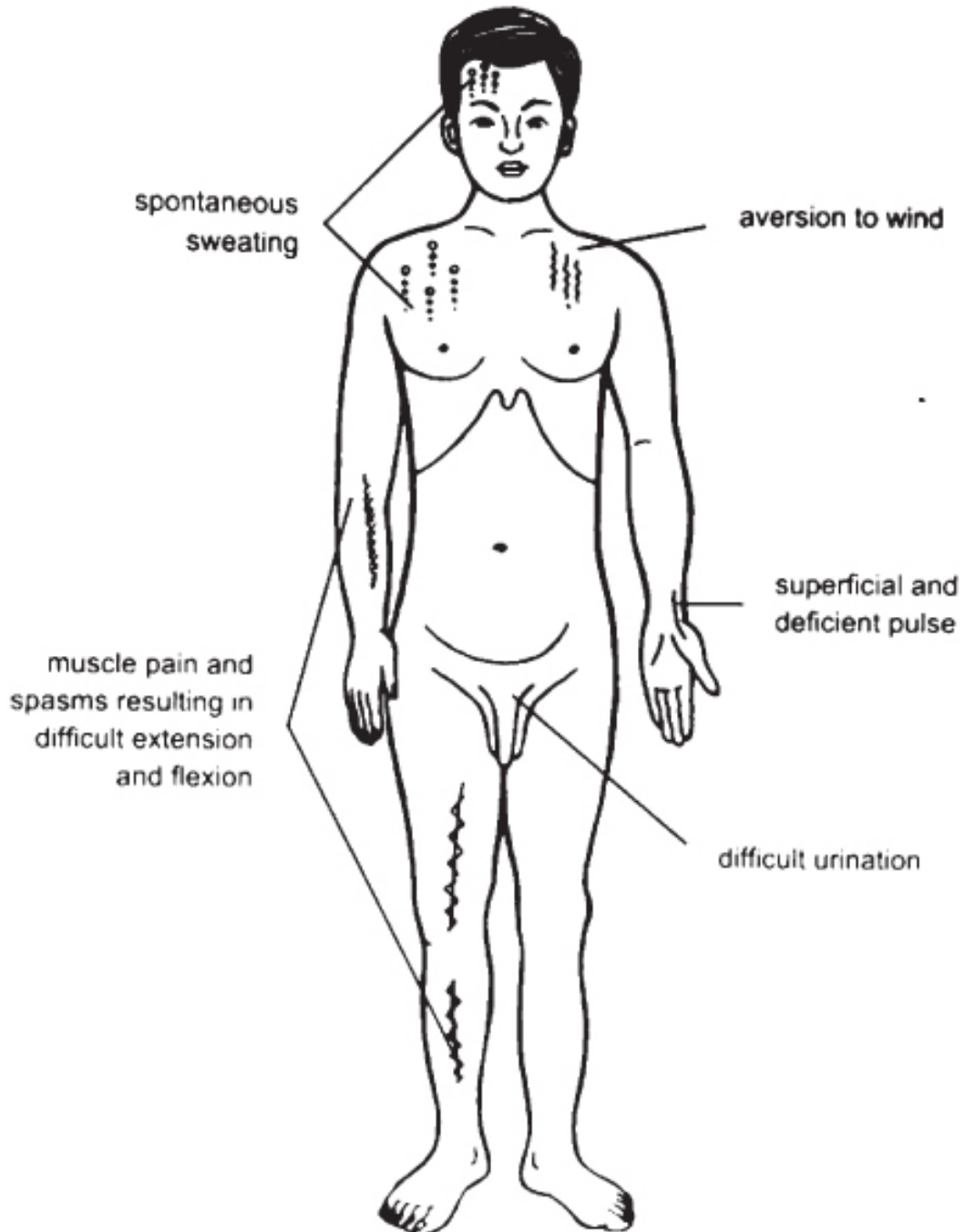


Cinnamon and Aconite Combination (Gui Zhi Jia Fu Zi Tang 桂枝加附子湯)

The ingredients of the formula are cinnamon twig, processed aconite, licorice, peony, jujube, and dried ginger.

Indications

1. Chronic joint pain
2. Joint swelling
3. A generalized weakness
4. Cold arms and legs

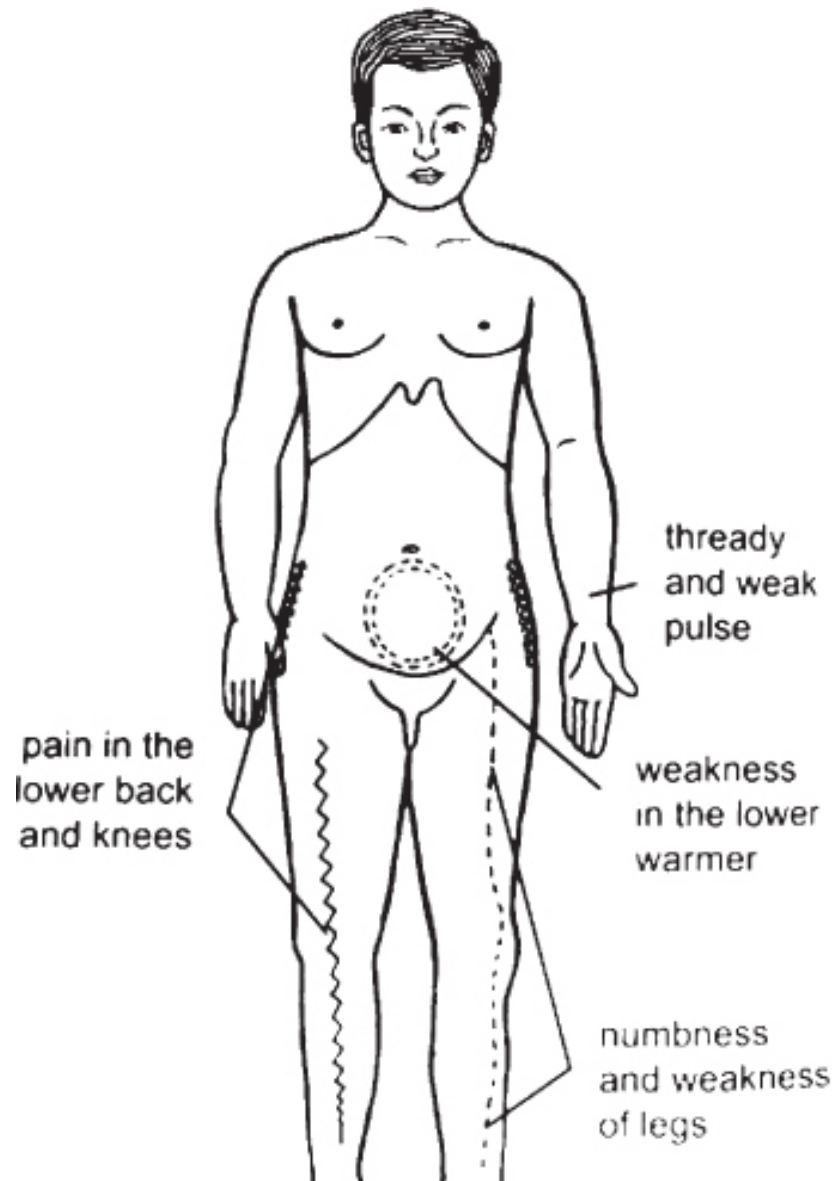


Tu-huo and Loranthus Combination (Du Huo Ji Sheng Tang 獨活寄生湯)

The ingredients of the formula are tu-huo, chin-chiu, siler, asarum, cinnamon bark, loranthus, eucommia, achyranthes, tang-kuei, rehmannia, peony, cnidium, ginseng, hoelen, and licorice.

Indications

1. Low back and knee pain
2. Joint stiffness
3. Weakness
4. Numbness sensation in lower extremities
5. Dislikes cold and prefers warmth
6. Shortness of breath
7. Palpitations

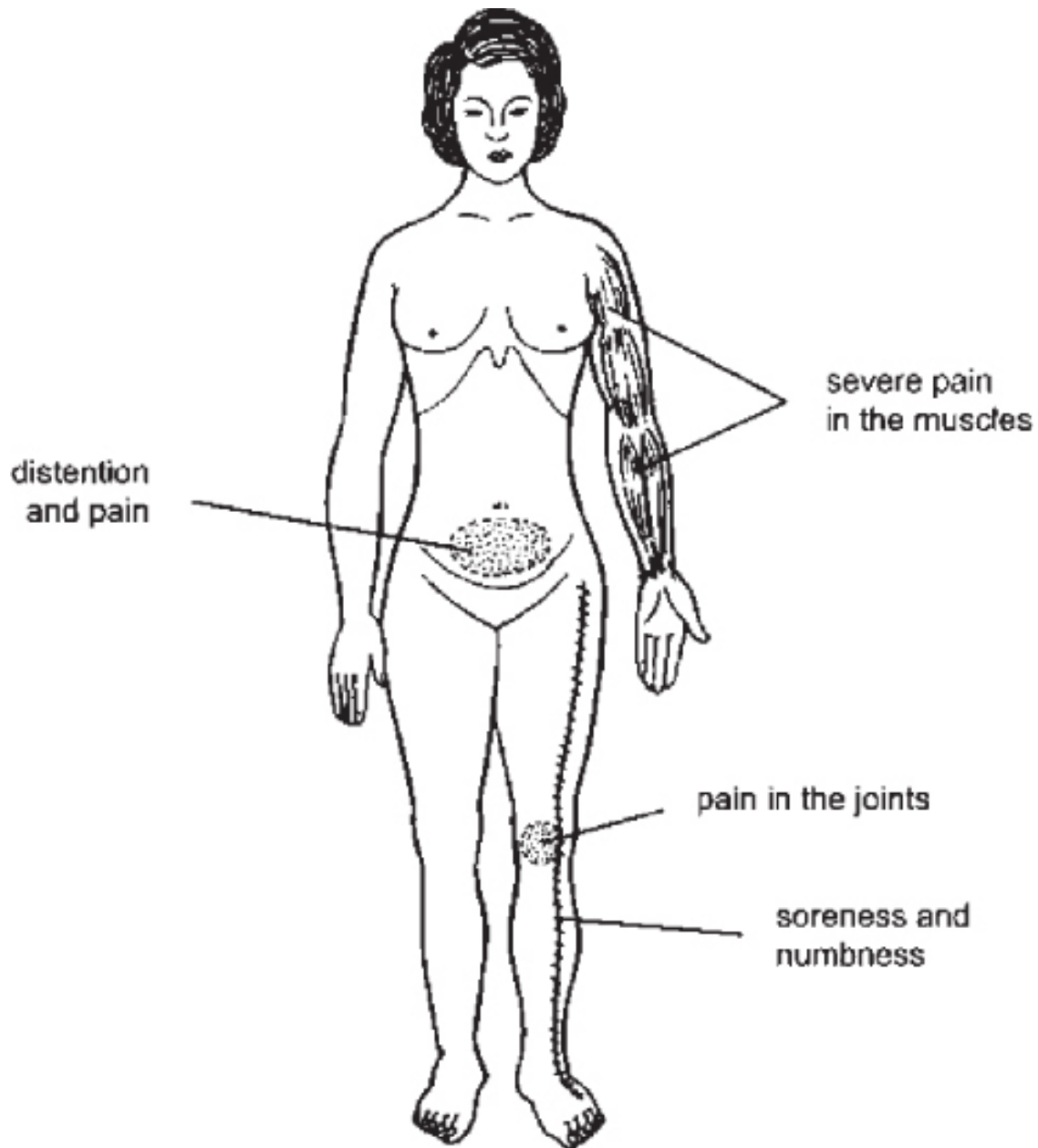


Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經活血湯)

The ingredients are tang-kuei, cnidium, peony, rehmannia, atractylodes, hoelen, licorice, siler, chiang-huo, achyranthes, clematis, angelica, stephania, persica, gentiana, raw ginger, and citrus.

Indications

1. Low back pain due to dampness and blood stagnation
2. Chronic long-standing pains or neuralgia (especially sciatica)
3. If there is a damp conformation with stagnant blood, this formula definitely indicated.



In the book, *30 Years of Kanpō* , Case 352 (Painful Rheumatoid Arthritis), Dr. Otsuka treated an obese, sixty-five-year-old woman with painful rheumatoid arthritis in her arms and legs, although there was no swelling in

the joints. The patient felt practically incapable of movement but could do so, albeit unwillingly. She was also suffering from aching shoulder blades, difficulty in breathing, insomnia, headaches, constipation, and dizziness. Her pulse was submerged and forceful and blood pressure measured 174/60 mmHg. Dr. Otsuka noticed that she had abdominal distention, but no thoracocostal distress. She also had a very tight area in the left side of her lower abdomen that hurt when pressed. She apparently had an acute cramping of the left side of her lower abdomen and an abdominal conformation of occluded blood. Dr. Otsuka treated her with **Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經活血湯)**. The pain subsided two weeks after taking the herbal formula. Her bowel movements occurred smoothly, and she slept well at night. She continued on the formula for another three weeks, and Dr. Otsuka did not hear from her again.

HERBAL FORMULA FOR LESLIE

I suggested Leslie try **Tu-huo and Loranthus Combination (Du Huo Ji Sheng Tang 獨活寄生湯)** for two months. The Chinese name of this formula is “to live alone as a parasite.” Of course, it is my own infamous translation.

In the old days, **Tu-huo and Loranthus Combination (Du Huo Ji Sheng Tang 獨活寄生湯)** was used mainly to treat chronic Bi syndrome with liver, kidney, Qi, and blood insufficiency. It was characterized by aching low back and knees, stiffness, weakness, numbness of the lower extremities, a dislike of cold and a love of warmth, shortness of breath, palpitations, a pale tongue with white coating, and a thready and weak arterial pulse. Nowadays it is widely used to treat chronic rheumatoid arthritis, osteoarthritis, sciatica, prolapse of intervertebral discs, poliomyelitis, scapulohumeral peri-arthritis, chronic pain in the low back and legs, and traumatic injury to the lower extremities.

6-8: GOUTY ARTHRITIS

KEYWORDS

1. Gout—chronic idiopathic (ICD-10 Code **M1A.0**)
2. Gouty arthropathy, unspecified (ICD-10 Code **274.00**)

October 2004

Kelly was a professional dancer who was referred to me by a colleague of hers. She began to dance when she was five years old and progressed very fast. She wasn't actually well physically and got sick a lot, but she had always wanted to dance, and she was determined to do it. She started dancing professionally when she was fifteen and was doing local television when she was seventeen. It was a real passion in her life, and she lived for that. She won a Ford scholarship to attend a school in New York when she was in her twenties, but because of some politics, as she put it, it fell through. But she didn't really want to go to New York and could never have gone by herself. To pay for her lessons, she told me that she worked part-time as a governess. She went back to school in 1981 to get a certificate for teaching. Meanwhile, she worked in her dance studio at home.

One day in 1988 Kelly slipped on a section of wet floor in her studio and landed very hard on her left side buttock. She felt dizzy and was very sore. When the pain did not disappear after a week, she went to an orthopedic doctor. There was no broken bone, but she did have a large bruise on her left buttock. She was treated with medication and physical therapy. But her pain persisted, and she could no longer dance. She felt nauseated for about two years, and the doctors couldn't figure out why. She was also starting to lose weight, and at the time weighed about ninety-five pounds. Her normal weight was around 104 since she turned twenty years old, and she had never had a weight problem before. She went to various orthopedic doctors for the next five years, but nobody knew what was wrong with her. Eventually, one doctor told her that she had capsulitis in her left hip and gave her a cortisone shot followed by physical therapy, but did nothing to her low back. Finally she went to an acupuncturist. She received acupuncture for various things besides the hip and low back for four or five years. She went every week at first, then every two weeks. That, by the grace of God as she put it, helped her start moving around, but her low back still hurts quite a bit.

Other than her ongoing low back problems, she always had sleep disorders and easily got anxious. This condition got worse in 1992. She found a lump in her left breast one day while she was taking a shower. She went to her family doctor, who sent her to a radiologist, and then for a biopsy. It was benign, but the lump was removed anyway. It almost scared her to death, for she was only forty-four at the time. She has had a mammogram every year since then. Somewhere in her early fifties, she had to start taking thyroid medication for an underactive thyroid. She is still taking that medication. Her gallbladder was

removed because she had three large stones in it when she was fifty-one. She went into menopause in early 1994 and things got worse. She had bronchitis in October that year, and it wouldn't go away. She was put on an antibiotic even though she couldn't take antibiotics. A doctor suggested that she try Zithromax, but that was the beginning of the end of everything for her. She thought she was able to take this particular drug, but she got very ill after taking it; she had hallucinations after taking it for a couple of days and would start to scream when she fell asleep. So she went many days straight without sleeping—not even a nap. Then she found out that she had acid reflux; she was so stressed out that she had developed stomach problems. She thought the whole situation was causing her so much anxiety that she didn't do anything for about three years. It took a good five years or so before she was able to function again, but she was still unable to dance and was having difficulty at physical therapy. She had frequent panic attacks, and she blamed it, and all her problems, on the antibiotics.

After carefully reviewing her previous medical records, I found that Kelly had high uric acid level. It was confirmed by the subsequent blood test. I didn't know if her high uric acid level had anything to do with her low back pain.

GOUT

High uric acid level is often associated with gout. I have read that gout had affected many great men throughout history: Alexander the Great, Henry the VIII, Sir Isaac Newton, and Benjamin Franklin, just to name a few. For this reason, it is sometimes called “the king's disease.” It has also gone under the name of “rich man's arthritis” because only the wealthy could afford the rich diet to which it is linked. Gout affects more and more people nowadays, no doubt due to the availability of rich food and diets high in protein. The inability to properly metabolize blood uric acid, wherein the uric acid salts accumulate around the joints, causes gout. The normal amount of uric acid in the body is 4 mg in men and 3 mg in women per 100 cc of blood. A person with gout usually shows 8 mg or more uric acid per 100 cc of blood.

1. Gout is a joint disease that is characterized by acute pain in the joints of the arms and legs but particularly in the big toe.
2. In over 95% of the cases, the excessive serum urate results in hyperuricemia.

3. Although the reasons for this overproduction are not clear, the arthritic pain of gout is due to the deposit of uric acid crystals around the joint.
4. Urate deposits may also appear in other parts of the body as tophi.
5. The deposit of monosodium urate crystals in the kidneys, however, may result in serious kidney damage and low back pain.
6. Excess excretion of uric acid through the kidneys may produce kidney stones (10%–20% of the cases).
7. Gout often affects those who eat and drink excessively.
8. Most people with gout are over forty years old, and about 7% are obese.
9. The ratio of male to female with gout is about 20:1.

RECENT RESEARCH ON GOUT

1. The prevalence of gout may be increasingly fueled by rising rates of gout risk factors.
2. The risk factors of gout include, but are not limited to, obesity, hypertension, kidney disease, and hyperlipidemia.
3. The growing use of diuretics or other medications that increase uric acid levels may also contribute to the formation of gout.
4. There are more hospitalizations for gout, higher healthcare costs, and a substantial public health challenge.
5. The growing population of older adults, who are disproportionately affected by this disease, is expected to increase the need for gout care in the future.
6. Despite all of this, patients often go untreated or undertreated, which can damage joints or worsen their condition.

TREATMENT OF GOUT

1. Foods such as beef, pork, and chicken, and animal organs such as liver and chicken gizzard, should be eliminated, as should cheese, milk products, coffee, tea, beans, bamboo shoots, asparagus, and spinach.
2. In severe cases, or during an acute attack of gout, alcohol should absolutely be prohibited.

3. Other than to take care of your diet, the usual therapy for acute gout is colchicine, a drug that is derived from the Autumn crocus and was discovered in ancient Egypt.
4. Colchicine possesses analgesic properties that no herb or herbal formula can match.
5. The common dosage of colchicine is 0.6 mg taken orally.
6. Although colchicine can reduce pain and inhibit the increase of leukocytes, the reason for its effectiveness in cases of gout is not clearly understood.
7. One of the known side effects of colchicine is acute diarrhea.

6-9: HERBAL FORMULAS FOR GOUT

KEY HERBAL FORMULAS

1. **Tang-kuei and Anemarrhena Combination (Dang Gui Nian Tong Tang 當歸拈痛湯)**
2. **Major Siler Combination (Da Fang Feng Tang 大防風湯)**

THE TCM VIEW OF GOUT

There is no mention of gout in *Shang Han Lun* or *Chin Kuei Yao Lueh*. Since foods were prepared in a simple manner in ancient China, perhaps this disease did not exist. However, during the Yuan Dynasty (1300–1367 A.D.), the term for gout appears in *Ko Chi Yu Lun* (On Disease Identifications), written by Chu Tan-Si. The Chinese word gout means “painful wind.” Other Chinese terms for gout include “evil wind,” “numb disease,” “seasonal disease,” and “white tiger pain.” The symptoms of gout are sharp pains in various joints of the body and weakness of both Qi and blood. If the pain is acute, it is called “white tiger seasonal disease.”

According to TCM principles, gout occurs when the “seven sentiments” are attacked by chills, moisture, and wind. The objectives of therapy are the regulation of the circulation of Qi and blood and to relieve the person’s emotional tension.

HERBAL TREATMENT OF GOUT

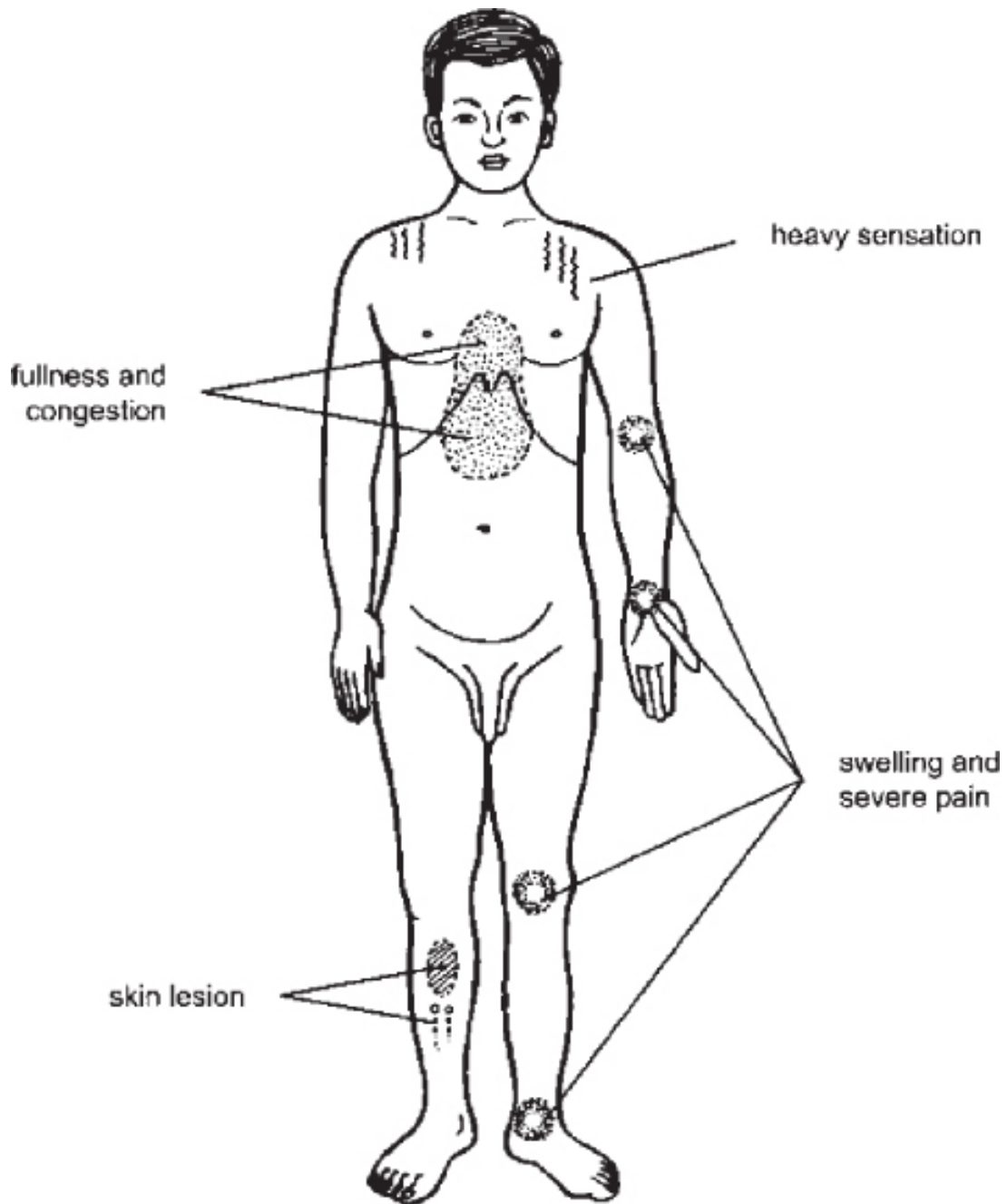
Research conducted by Xia H., et al. on the effectiveness of taking **Tang-kuei and Anemarrhena Combination (Dang Gui Nian Tong Tang 當歸拈痛湯)** to treat gout was tested on forty cases and has shown promising results. The blood uric acid levels in those participants were as high as 76 mg prior to taking the herbal preparation. After treatment, seven of them were reported as “cured,” twenty-nine of them showed improved, while four of them showed no effect. The total effective rate was 90.0%. The blood uric acid returned to the normal range in thirty-three cases. All the participants were told to avoid spicy, hot, and greasy food during the treatment. They were also told to avoid alcohol and food containing purine.

Tang-kuei and Anemarrhena Combination (Dang Gui Nian Tong Tang 當歸拈痛湯)

The ingredients of this formula are tang-kuei, anemarrhena, chiang-huo, capillaris, scute, angelica, polyporus, alisma, atractylodes, siler, pueraria, ginseng, sophora, cimicifuga, and licorice. It is mainly used to clear heat and eliminate dampness, tone Qi and blood, relieve pain, and as a popular herbal formula for eczema in the genital area. It is contraindicated for pregnant women.

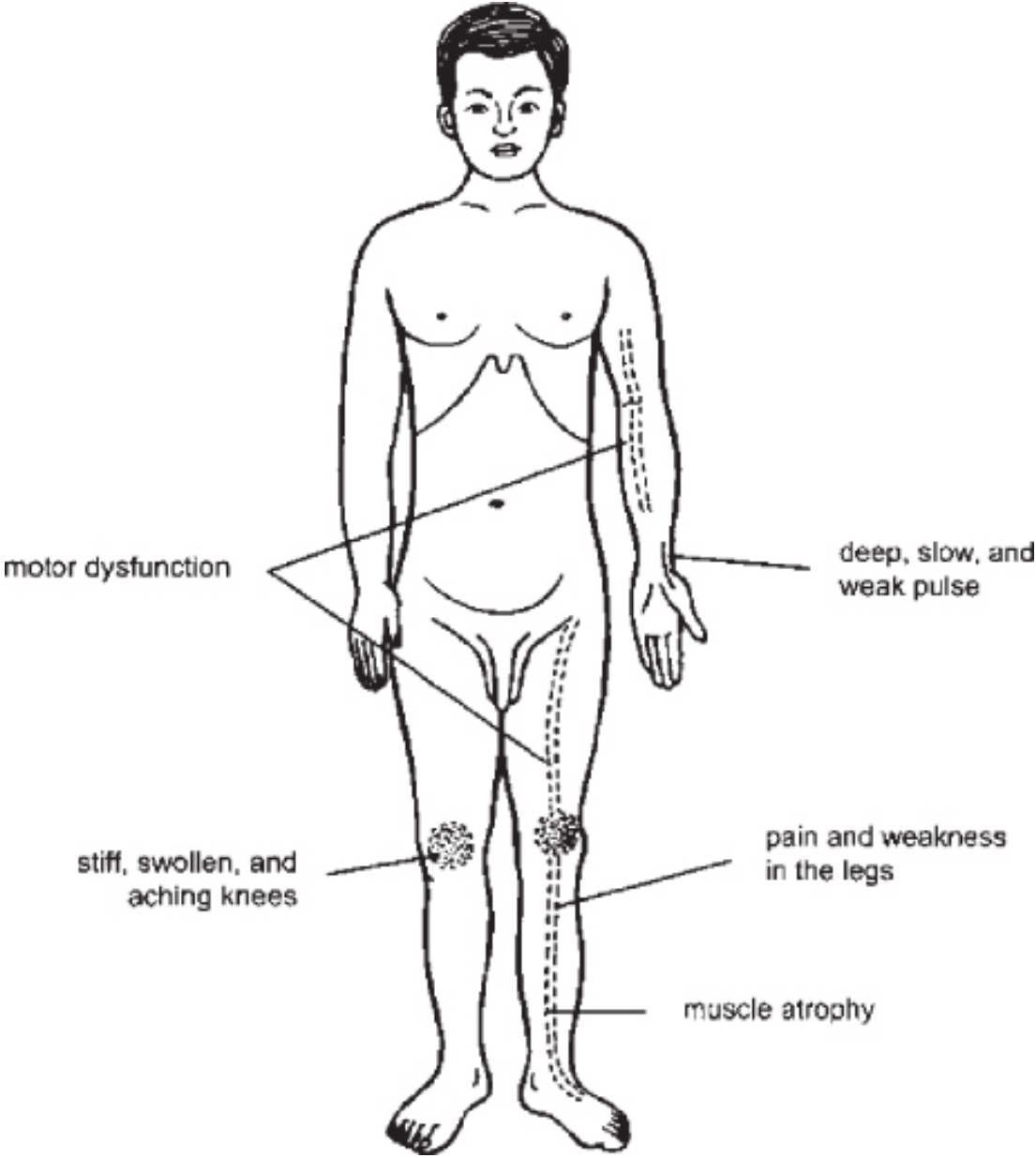
Indications

1. Arthralgia with swelling and pain
2. Gonorrhea
3. Urticaria
4. Allergic purpura
5. Dermatitis



Kelly was 4 foot-8 ¼ inches tall and weighed ninety-eight pounds. I suggested that she try a half strength dose of **Tang-kuei and Anemarrhena Combination (Dang Gui Nian Tong Tang 當歸拈痛湯)** for a month followed by six weeks of **Major Siler Combination (Da Fang Feng Tang 大防風湯)**. **Major Siler Combination** is an interior-chill conformation formula often used to regulate blood deficiency, treat polyarticular rheumatism, relieve night sweats, and treat weak-chill conformation and dry skin.

By the end of four months, Kelly was feeling comfortable enough to resume her physical therapy and exercises. By early spring of 2006, she had enough energy and pain relief to teach dance again.



6-10: HERBAL FORMULAS FOR ACHING JOINTS

Pueraria Combination (Ge Gen Tang 葛根湯)

The ingredients of the formula are:

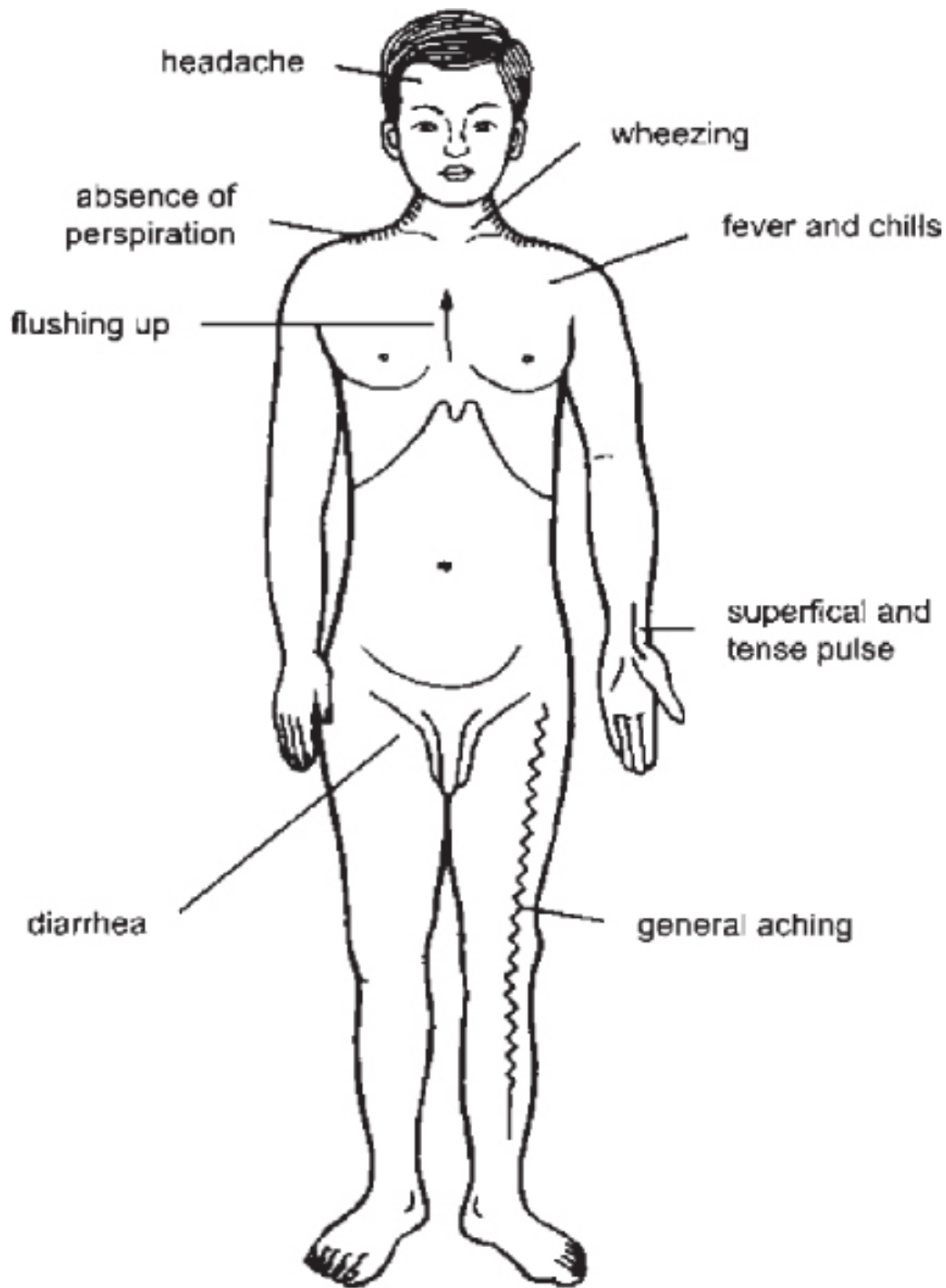
1. Pueraria—regulates blood circulation, gastrointestinal mobility, and bow movement.
2. Ma-huang—relieves tension.
3. Cinnamon—subdues flushing up, dispels chills, calms palpitations, and regulates gastrointestinal functions.
4. Paeonia—regulates gastrointestinal function, is an analgesic, and has an itching properties.
5. Jujube—nourishes the body in general.
6. Licorice—relieves tension, detoxifies the liver, and reduces side effects the formulas. Licorice appears in over half of all Chinese herbal formulas
7. Ginger—one of the major botanicals in Chinese herbal medicine that promotes blood circulation. Ginger and jujube frequently work together Chinese herbal formulas. These herbs smooth and mellow the formula and eliminate side effects.

Indications

Traditionally it was used to alleviate Damp-heat syndrome. This was marked by a heavy sensation in the upper back and shoulders, fullness and congestion in the chest and epigastrium, general aching, and swelling and severe pain in the legs and ankles. It was occasionally accompanied by skin lesions in the lower body manifested by itching, burning, and irritation.

Nowadays, Pueraria Combination (**Ge Gen Tang** 葛根湯) is widely used for:

1. Early stage rheumatic pain
2. Arthralgia with joint swelling
3. Joint stiffness
4. Facial paralysis



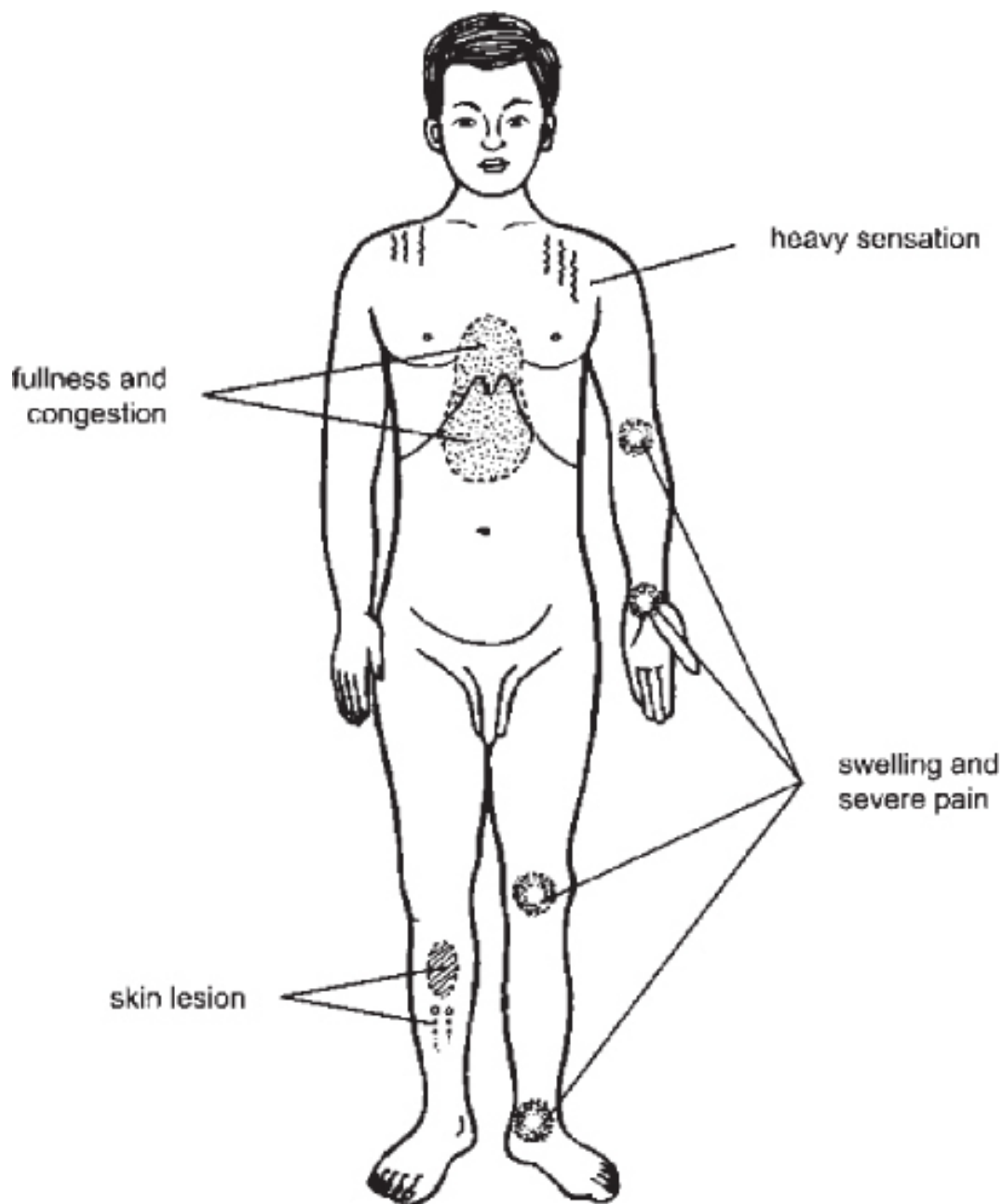
Tang-kuei and Anemarrhena Combination (Dang Gui Nian Tong Tang 當歸拈痛湯)

The ingredients of this formula are tang-kuei, anemarrhena, chiang-huo, capillaris, scute, angelica, polyporus, alisma, Atractylodes, siler, Pueraria,

ginseng, sophora, cimicifuga, and licorice. It is mainly used to clear heat and eliminate dampness, tone Qi and blood, relieve pain, and as a popular herbal formula for eczema in the genital area. It is contraindicated for pregnant women.

Indications

1. Arthralgia with swelling and pain
2. Gonorrhea
3. Urticaria
4. Allergic purpura
5. Dermatitis



Cinnamon, Atractylodes, and Aconite Combination (Gui Zhi Jia Ling Zhu Fu Tang 桂枝加苓朮附湯)

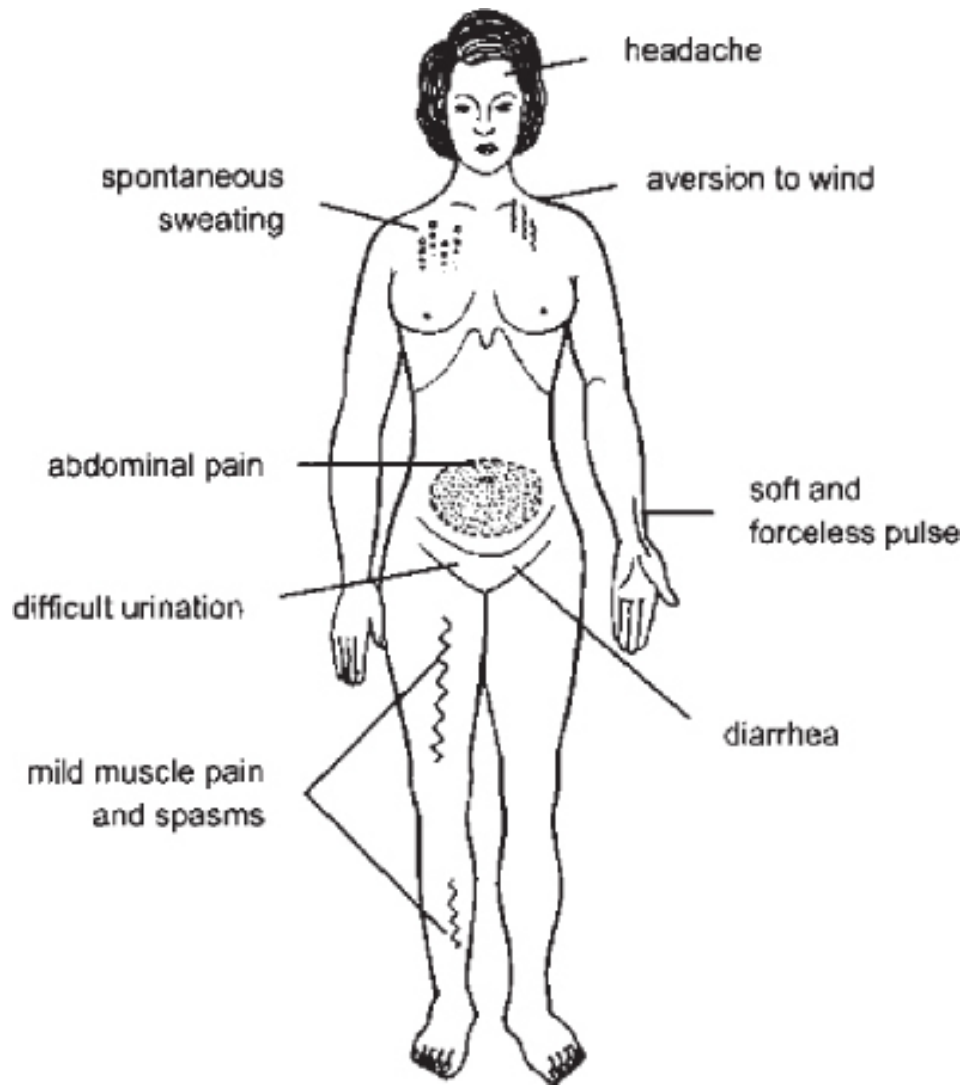
The ingredients of this formula are cinnamon, peony, raw ginger, jujube, licorice, atractylodes, and aconite.

This formula is made by adding atractylodes and aconite to **Cinnamon Combination (Gui Zhi Tang 桂枝湯)**. The drying, dispersing herbs,

atractylodes and aconite, have been added for weak conformation individuals who perspire easily and have a pale and unhealthy facial complexion. In contrast to gypsum, the archetypal cooling herb, aconite is the quintessential warming herb. All formulas that contain it are used to treat chill conformations. Since atractylodes is also a warming herb, this formula is used for severe chill conformations. Another difference between this formula and **Cinnamon Combination (Gui Zhi Tang 桂枝湯)** is that it is suitable for damp conformations. It is for this reason that it may be used for weak-chill conformations in which there is some degree of moisture (dampness), which it disperses by driving it out of the body.

Indications

1. Rheumatism and neuralgia in weak-chill conformation individuals who perspire easily
2. Cold feeling in upper and/or lower extremities
3. Generalized weakness
4. Numbness sensation in the limbs
5. Difficulty flexing and stretching the arms and legs

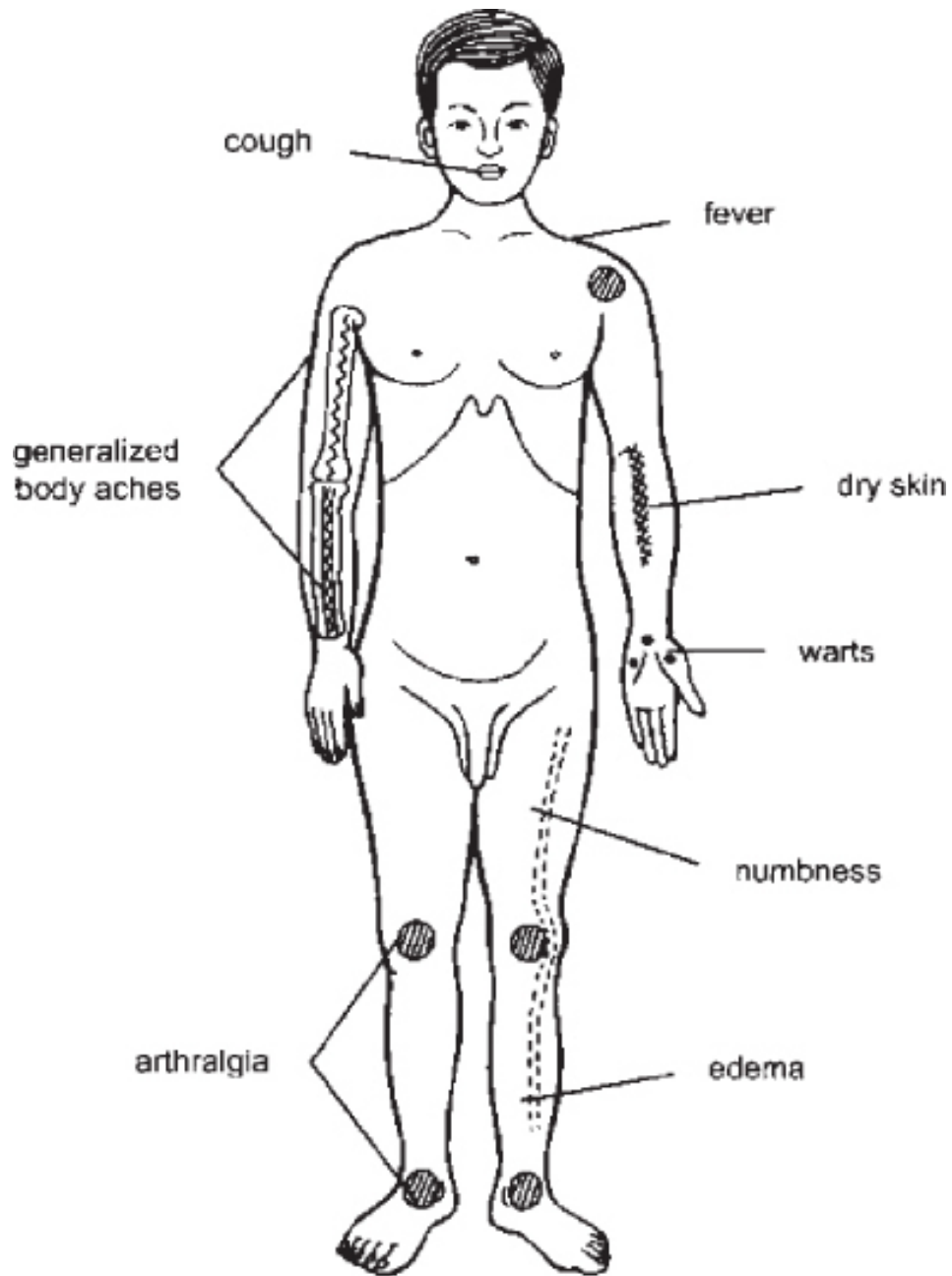


Ma-huang and Coix Combination (Ma Xing Yi Gan Tang 麻杏薏甘湯)

The ingredients of this formula are ma-huang, apricot seed, licorice, and coix.

Indications

1. Intense acute or chronic pain
2. Edema
3. Joint pain, especially during cold weather

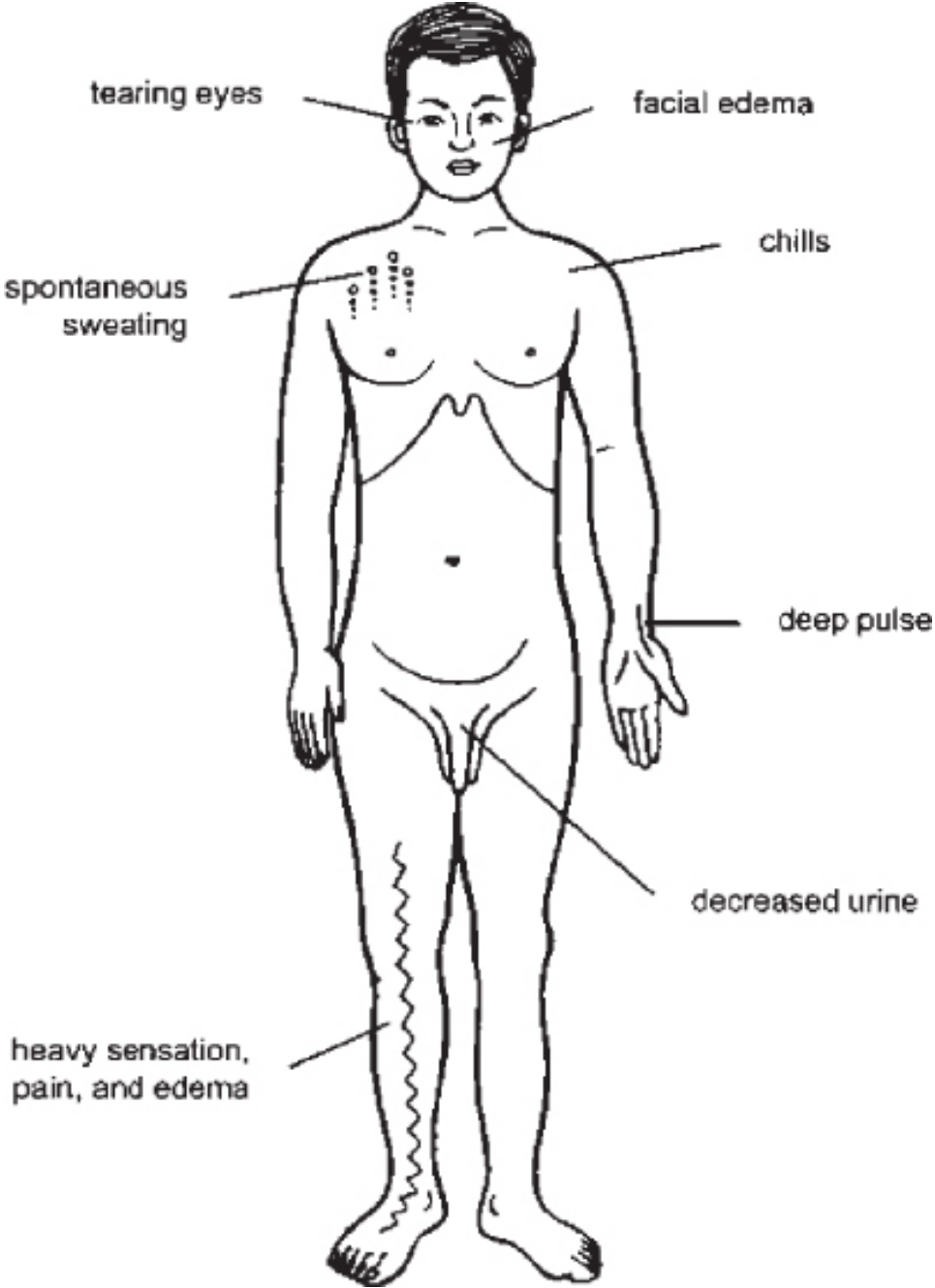


Atractylodes Combination (Yue Bi Jia Zhu Tang 越婢加朮湯)

The ingredients of the formula are ma-huang, licorice, gypsum, ginger, jujube, and atractylodes.

Indications

- 1. Intense aching in the joints
- 2. Edema
- 3. Localized heat sensation

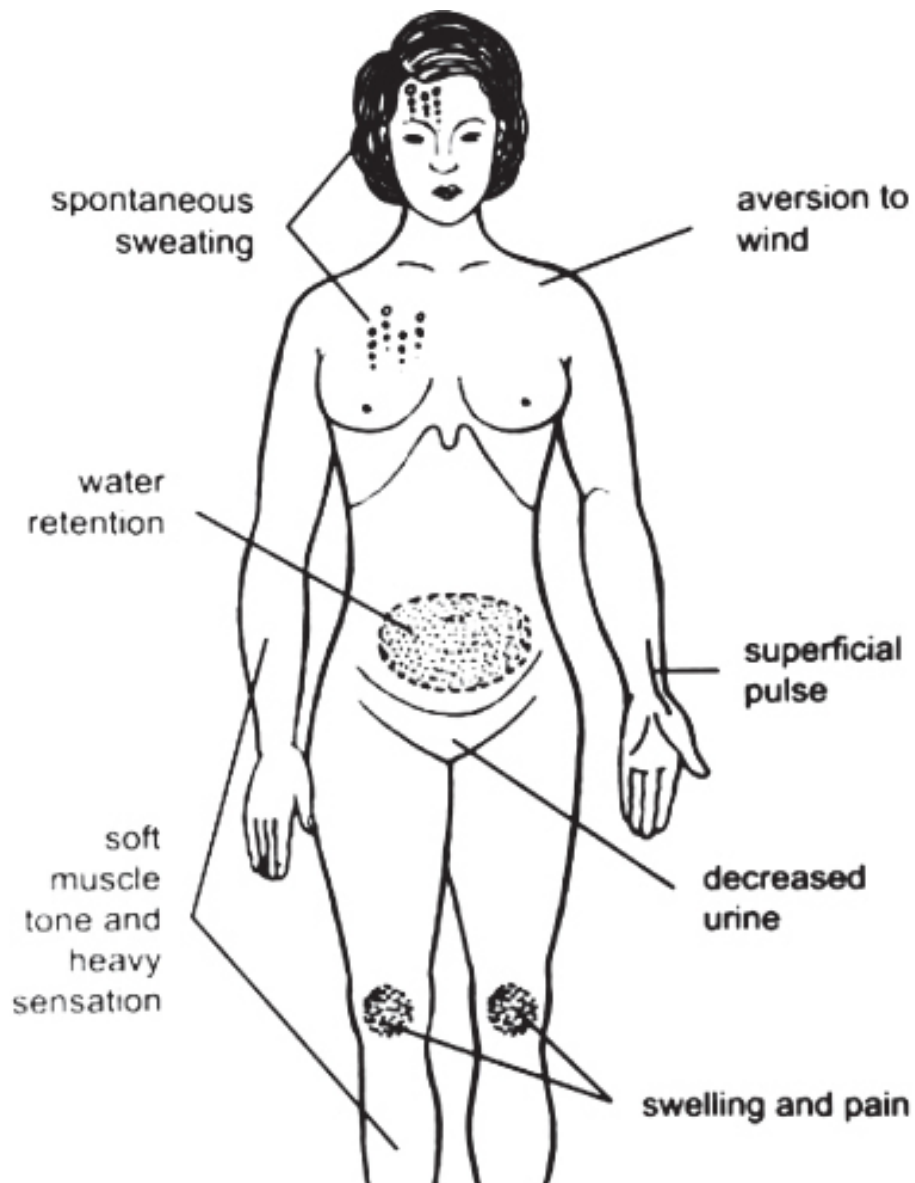


Stephania and Astragalus Combination (Fang Ji Huang Qi Tang 防己黃耆湯)

The ingredients of the formula are stephania, astragalus, atractylodes, licorice, raw ginger, and jujube.

Indications

1. Obese due to water accumulation
2. Pale skin
3. Profuse sweating
4. Joint inflammation



Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸)

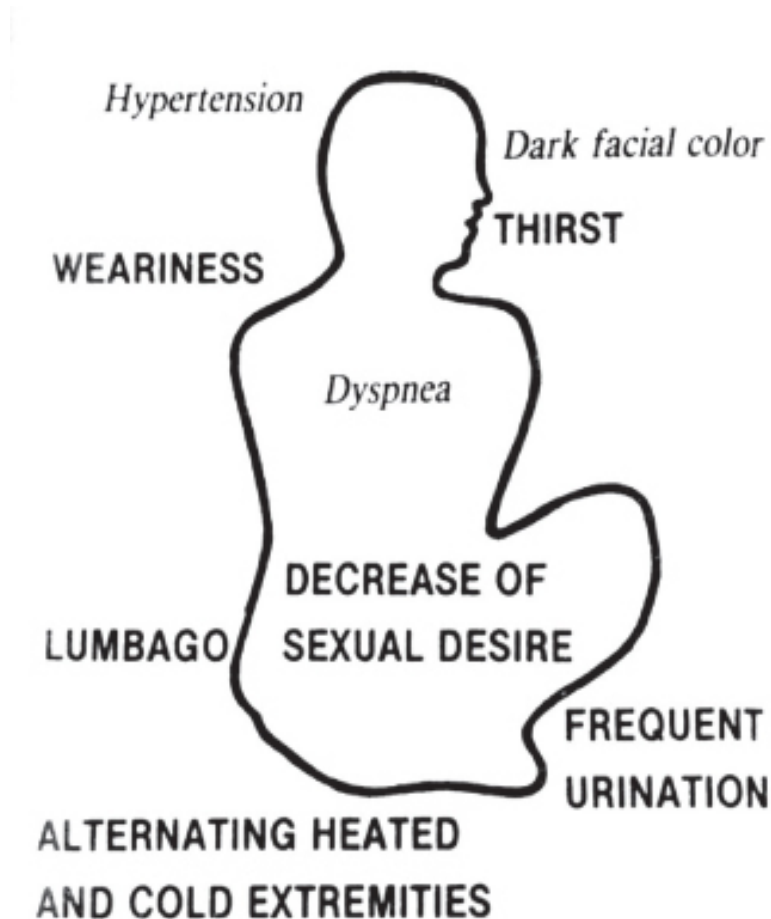
The ingredients of the formula are steamed rehmannia, dioscorea, comus, hoelen, alisma, moutan, cinnamon, and aconite.

Indications

1. The formula is suitable for weak-chill-dry conformations with symptoms

chills, a generalized fatigue, and frequent urination.

2. This is suitable for treating excessive thirst, frequent urination at night, d and chapped skin, low back pain, and lack of energy.
3. It also helps combat stagnant fluids and impaired blood circulation.
4. It may not be suitable for those who have poor gastrointestinal function such as diarrhea and soft stools.

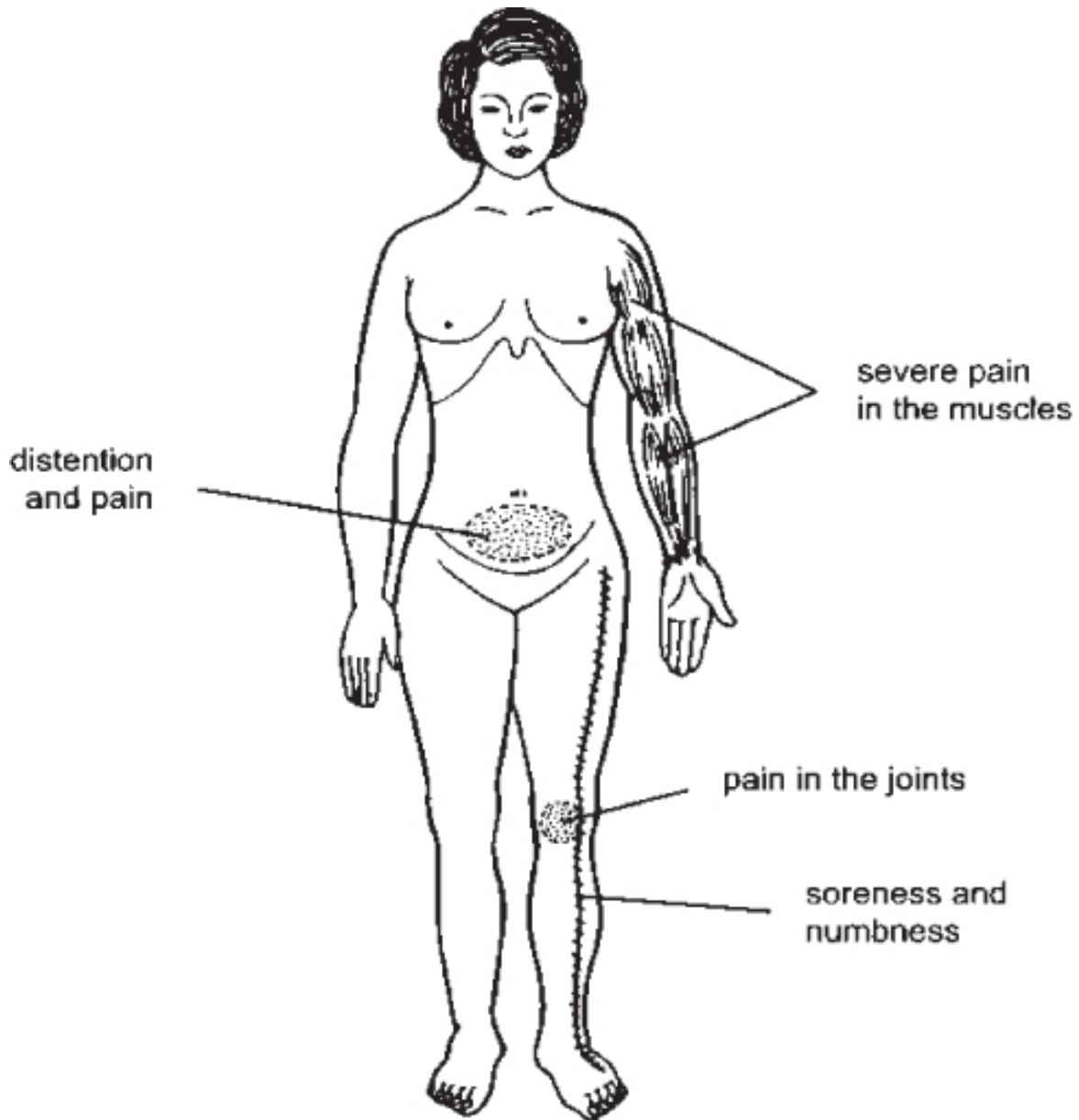


Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經活血湯)

The ingredients are tang-kuei, cnidium, peony, rehmannia, atractylodes, hoelen, licorice, siler, chiang-huo, achyranthes, clematis, angelica, stephania, persica, gentiana, raw ginger, and citrus.

Indications

1. Low back pain due to dampness and blood stagnation.
2. Chronic long-standing pain or neuralgia (especially sciatica).
3. If there is a damp conformation with stagnant blood, this formula definitely indicated.



6-11: HERBAL FORMULAS FOR STIFF JOINTS

KEYWORDS

1. Joint stiffness—unclassified (ICD-10 Code **M25.6**)

Other than Physical Medicine and Rehabilitation specialists, conventional medicine physicians generally give little attention to an isolated joint stiffness. If patients insist on some treatments, the doctors usually will tell them to do exercise, send them for physical therapy, or prescribe a muscle relaxant that often leaves the patient sleepy, fatigued, and lethargic. Many diseases can cause stiffness of the body, and virtually the entire body can be involved. Therefore various specialists, such as infectious disease experts, endocrinologists, bone and joint specialists, nerve specialists, psychologists, gynecologists, and plastic surgeons alike may all be involved.

TCM doctors consider stiffness to be a significant indicator of a person's overall health. Consequently, TCM has a long history of dealing with this important symptom. TCM theory considers any change on the body's surface—the skin, subdermal tissues, and muscles, etc. as important diagnostic features, with “visceral reflections on the surface” given the greatest importance. According to the TCM theory, problems on the body's exterior or superficial layers signal disease inside the body. Therefore complaints of stiffness are seen as signs of internal disharmony.

According to *Shang Han Lun* , the neck and back stiffness, epigastric distention and fullness in the chest and hypochondrium, lower abdominal cramps, and distended subcardiac hardness are the criteria for Greater-Yang (tai yang) diseases or **Pueraria Combination (Ge Gen Tang 葛根湯)** conformation. This so-called abdominal conformation was based on observations by ancient Chinese clinicians from visceral reflections on the body wall.

Although the term “stiffness” is used indiscriminately, testing of the muscle may reveal varying degrees of stiffness, ranging from that associated with deficiency conformation, in which the muscle is weak in tone but gives a firm feeling of stiffness, to the stiffness associated with excess conformation, in which the muscle is as stiff as a board and is accompanied by inflammation. Hence it is necessary to determine deficiency or excess in order to select the appropriate formula.

According to the “exterior-interior” viewpoint of TCM theory, joint stiffness, whether in the shoulder, the hip, or the cervical or lumbar spines,

belongs to the exterior or the half-exterior/half-interior conformation. From the nature of the skin tissue and the subcutaneous and muscle tissue developed from the ectoderm and mesoderm, they also belong to the exterior or half-exterior/half-interior. In practical treatment, the use of exterior-releasing formulas alone or only those bupleurum-containing formulas that are indicated for half-exterior/half-interior conformation will be effective.

Stagnant-blood-dispelling formulas may also be effective in some cases. In others, water-expelling formulas may be used, and for still others tonics are beneficial. Some cases can only be treated with Qi and blood tonics. In short, a wide variety of underlying causes for the stiffness results in a wide range of possible treatments, depending upon the nature and severity of the patient's conformation.

HERBAL FORMULAS FOR STIFF JOINTS

Pueraria Combination (Ge Gen Tang 葛根湯)

Indications

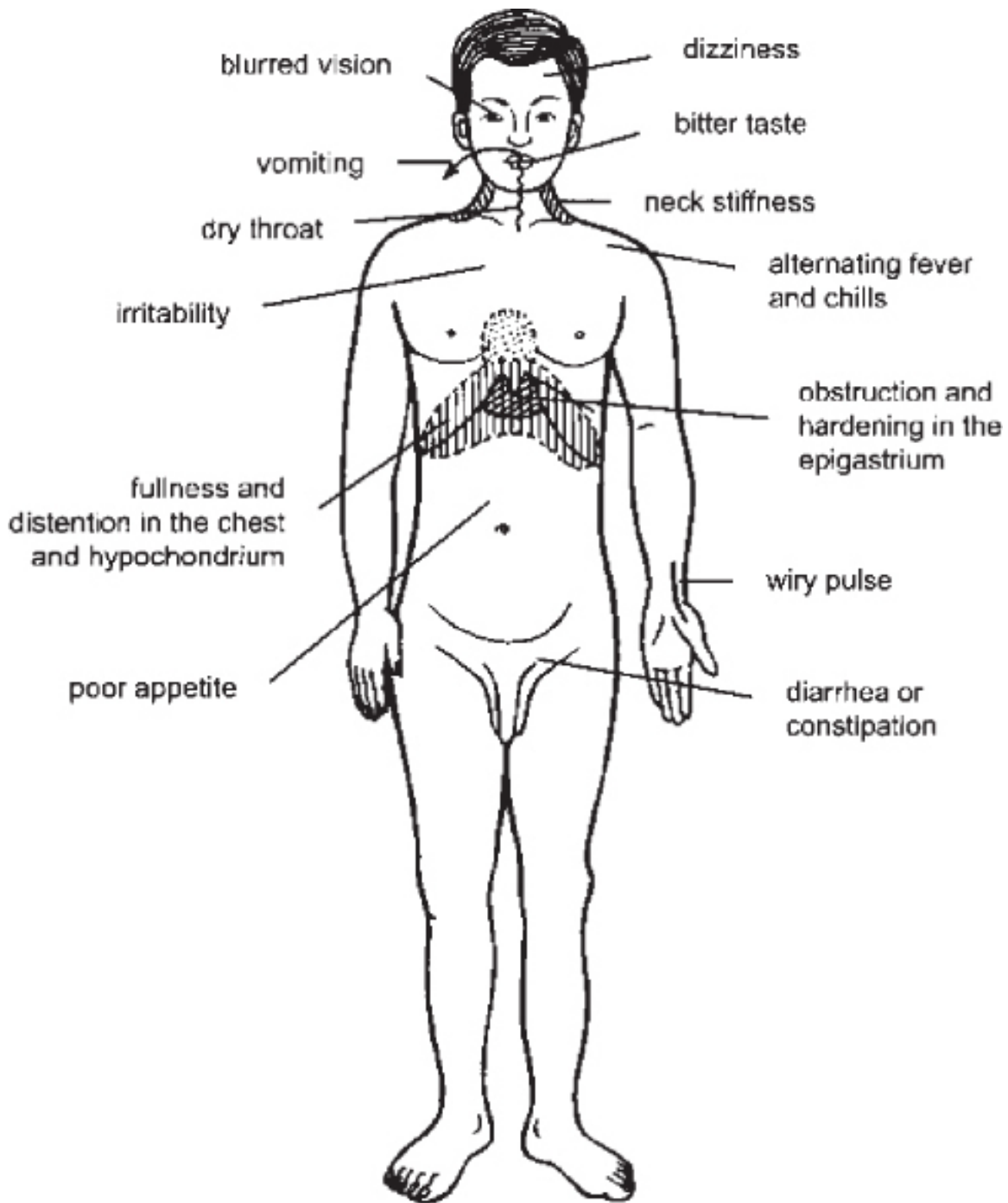
1. For those with relatively good physical strength, tension in the back, floating and tight arterial pulses, and no sweat.
2. Often used during the initial stages of the common cold: headache, mild fever, stuffy nose, diarrhea, and mild cough.
3. It should be administered with care in those with gastrointestinal deficiency, pregnant women, and the aged.

Minor Bupleurum Combination (Xiao Chai Hu Tang 小柴胡湯)

Indications

1. Stiff neck
2. Chest distress

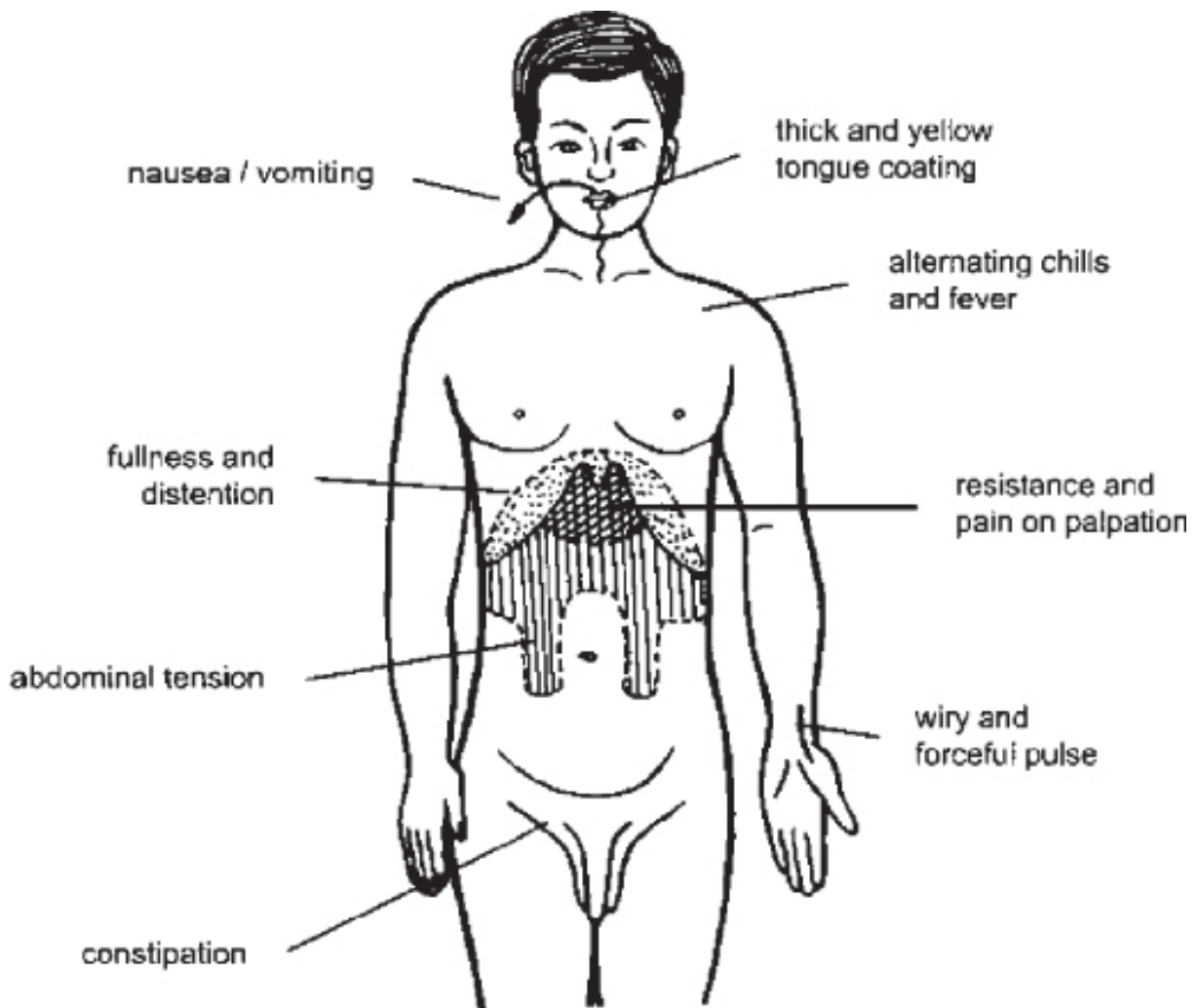
3. Poor appetite
4. A bitter taste and stickiness in the mouth
5. Dry tongue
6. White tongue coating
7. Gastric stagnancy



Major Bupleurum Combination (Da Chai Hu Tang 大柴胡湯)

Indications

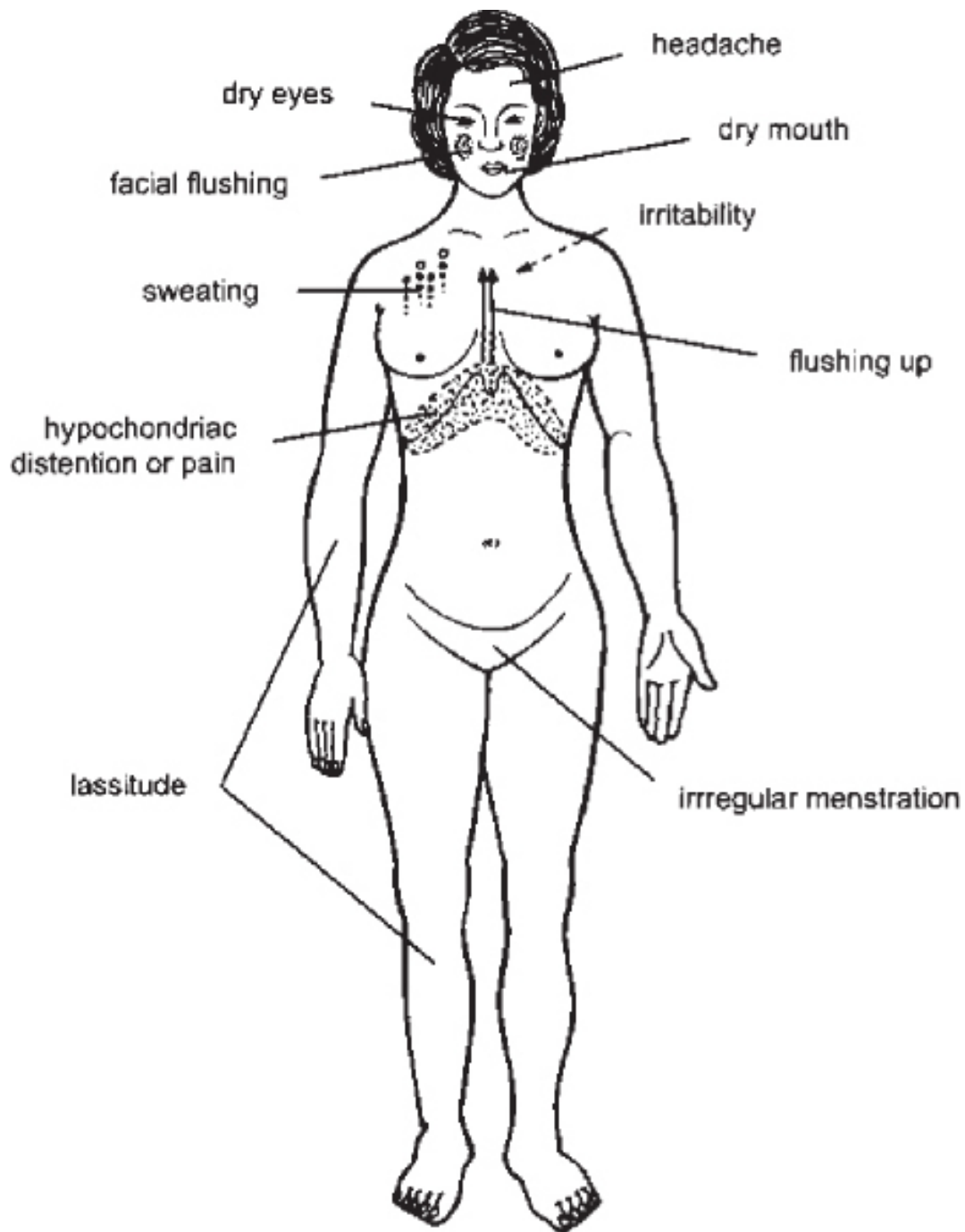
1. For those with a strong physique, full physical strength, chest distention, constipation, dry tongue, white or yellow tongue coating, and shoulder and neck stiffness, which cannot be relieved by massage or digital pressure.
2. Often accompanied by heavy-headedness, insomnia, tinnitus, vertigo, and hypertension.



Bupleurum and Peony Formula (Jia Wei Xiao Yao San 加味道遥散)

Indications

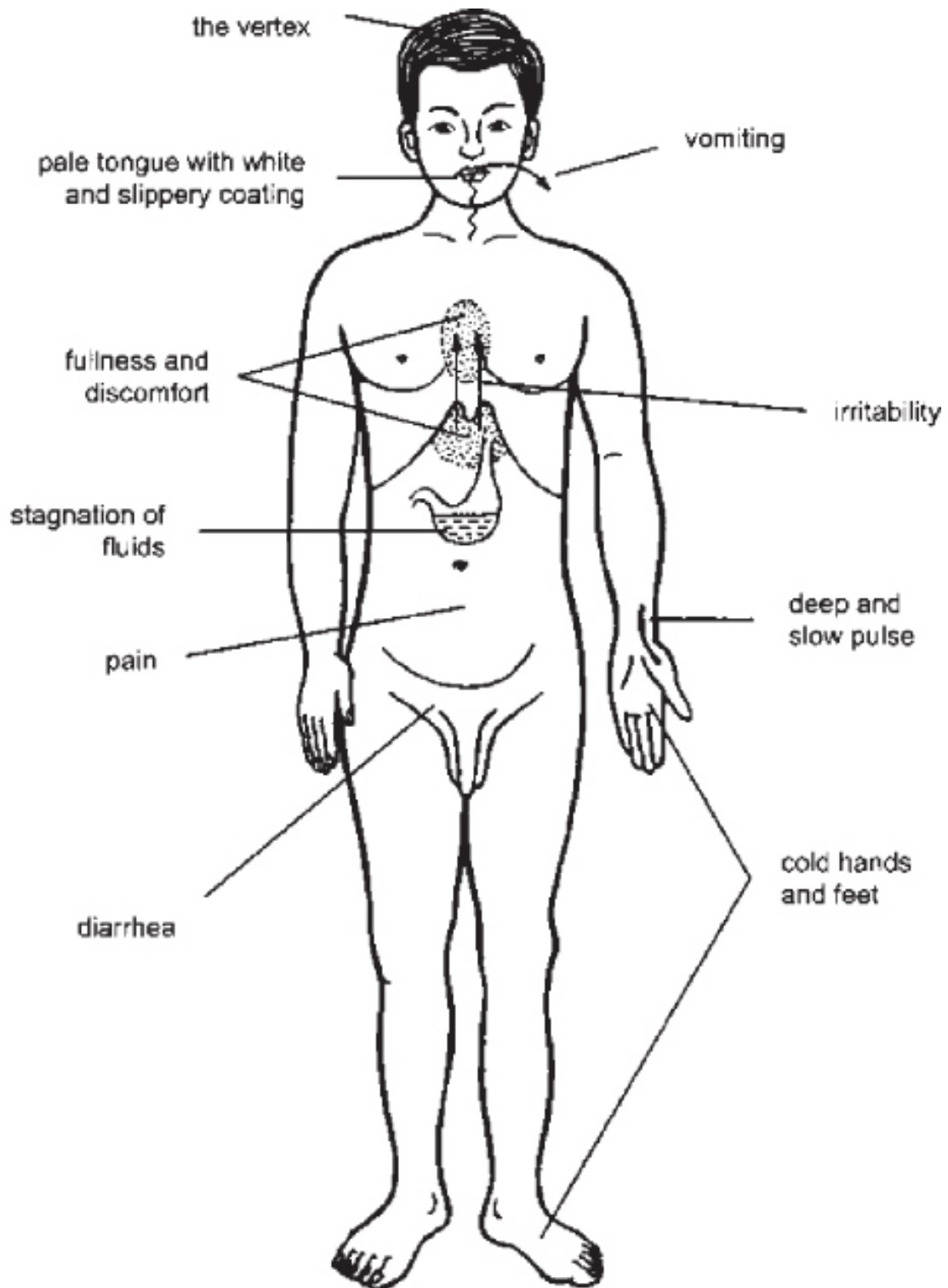
1. Deficiency conformation
2. Easily fatigued
3. Nervousness
4. Anemia
5. Shoulder stiffness
6. Headache
7. Vertigo
8. Flushing-up
9. Paroxysmal scorching sensation in the upper body
10. Weakness in the arms and legs



Evodia Combination (Wu Zhu Yu Tang 吳茱萸湯)

Indications

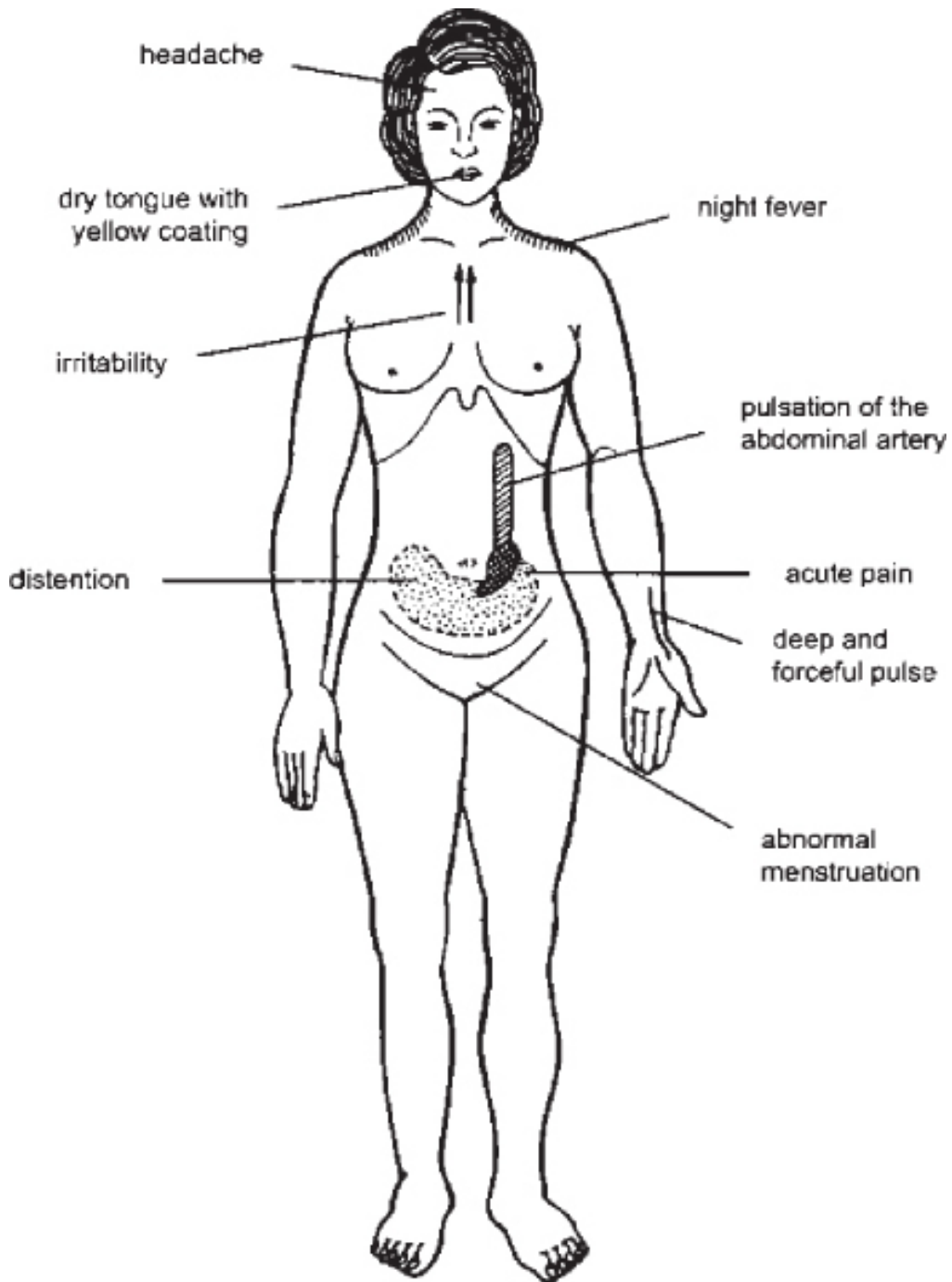
1. Poor gastrointestinal function
2. Cold sensation and water stagnancy in stomach
3. Nausea or vomiting
4. Headache
5. Submerged pulses
6. Headaches that extend from the back of the ears to the temples



Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)

Indications

1. Strong physique
2. A palpable mass in the lower abdomen (chiefly on the left side) due to blood stagnancy constipation
3. Flushing-up with heat in the upper torso
4. Cold sensation in the lower torso
5. Shoulder stiffness
6. Heavy-headedness
7. Vertigo
8. Tinnitus
9. Insomnia
10. Menstrual irregularity
11. Dysmenorrhea



6-12: HERBAL FORMULAS FOR SWOLLEN JOINTS

KEYWORDS

1. Joint swelling (ICD-10 Code **M25.4**)

All forms of articular rheumatism manifest surface symptoms such as pain and joint stiffness. Chinese herbal formulas for articular rheumatism attempt to expel pain from the body through dispersion. Since articular rheumatism is a condition in which water easily accumulates if inflammation is present, it is usually considered to be a damp condition. Accordingly, the formulas incorporate drying herbs such as diaphoretics and diuretics. Since, by definition, all forms of articular rheumatism affect only joints of the arms and legs, this type of rheumatism belongs to a definite surface conformation. This is why dispersive herbs are used.

MOISTURE AND WATER REMOVERS

1. Atractylodes
2. Hoelen
3. Stephania
4. Astragalus

If rheumatism has reached the more chronic stage in which the joints are swollen and deformed, **Cinnamon and Anemarrhena Combination (Gui Zhi Shao Yao Zhi Mu Tang 桂枝芍藥知母湯)** and **Major Siler Combination (Da Fang Feng Tang 大防風湯)** may both may be tried.

HERBAL FORMULAS FOR SWOLLEN JOINTS

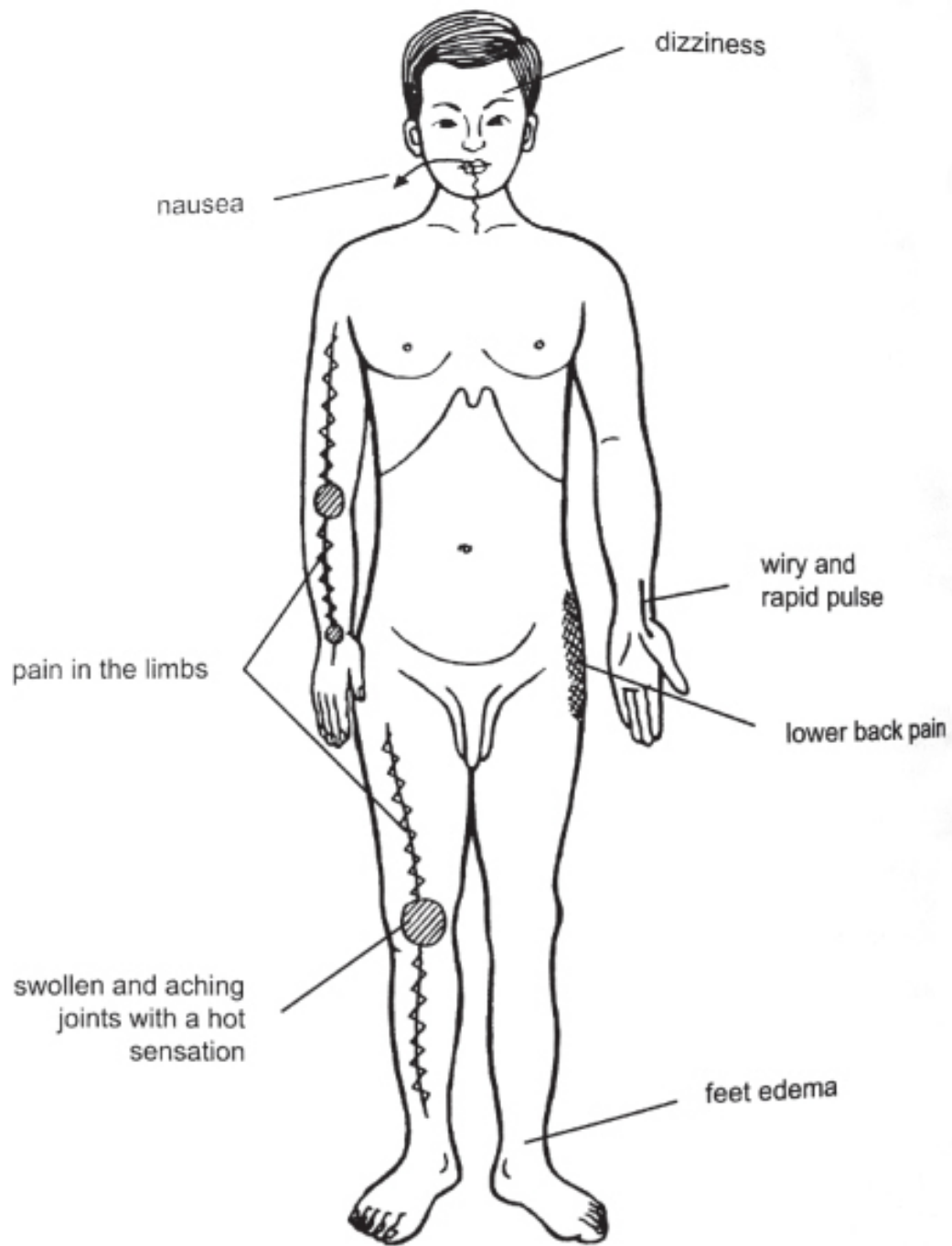
Cinnamon and Anemarrhena Combination (Gui Zhi Shao Yao Zhi Mu Tang 桂枝芍藥知母湯)

The ingredients of this formula are aconite, peony, atractylodes lancea, raw ginger, ma-huang, licorice, cinnamon, siler, and anemarrhena.

This formula is used to treat dampness and chills and is suitable for rheumatism while it is still of a condition proper for treatment by dispersive agents. However, this formula contains aconite. Therefore, it is not appropriate for people with a fever conformation.

Indications

1. Chronic articular rheumatism
2. Damp-weak-chill conformations
3. Severe chills
4. Contraindicated if there is excessive perspiration



Major Siler Combination (Da Fang Feng Tang 大防風湯)

The ingredients of this formula are tang-kuei, cnidium, peony, rehmannia, ginseng, atractylodes, licorice, raw ginger, jujube, astragalus, siler, chiang-huo, achyranthes, eucommia, and aconite. It is a variant of **Ginseng and Tang-kuei Ten Combination (Shi Quan Da Bu Tang 十全大補湯)** from which cinnamon and hoelen have been removed and siler, chiang-huo, achyranthes, eucommia, and aconite added.

1. Siler and chiang-huo are strong analgesics.
2. Achyranthes is a blood-regulator.
3. Eucommia and aconite have analgesic as well as dispersive effects.
4. Peony enhances the analgesic quality.

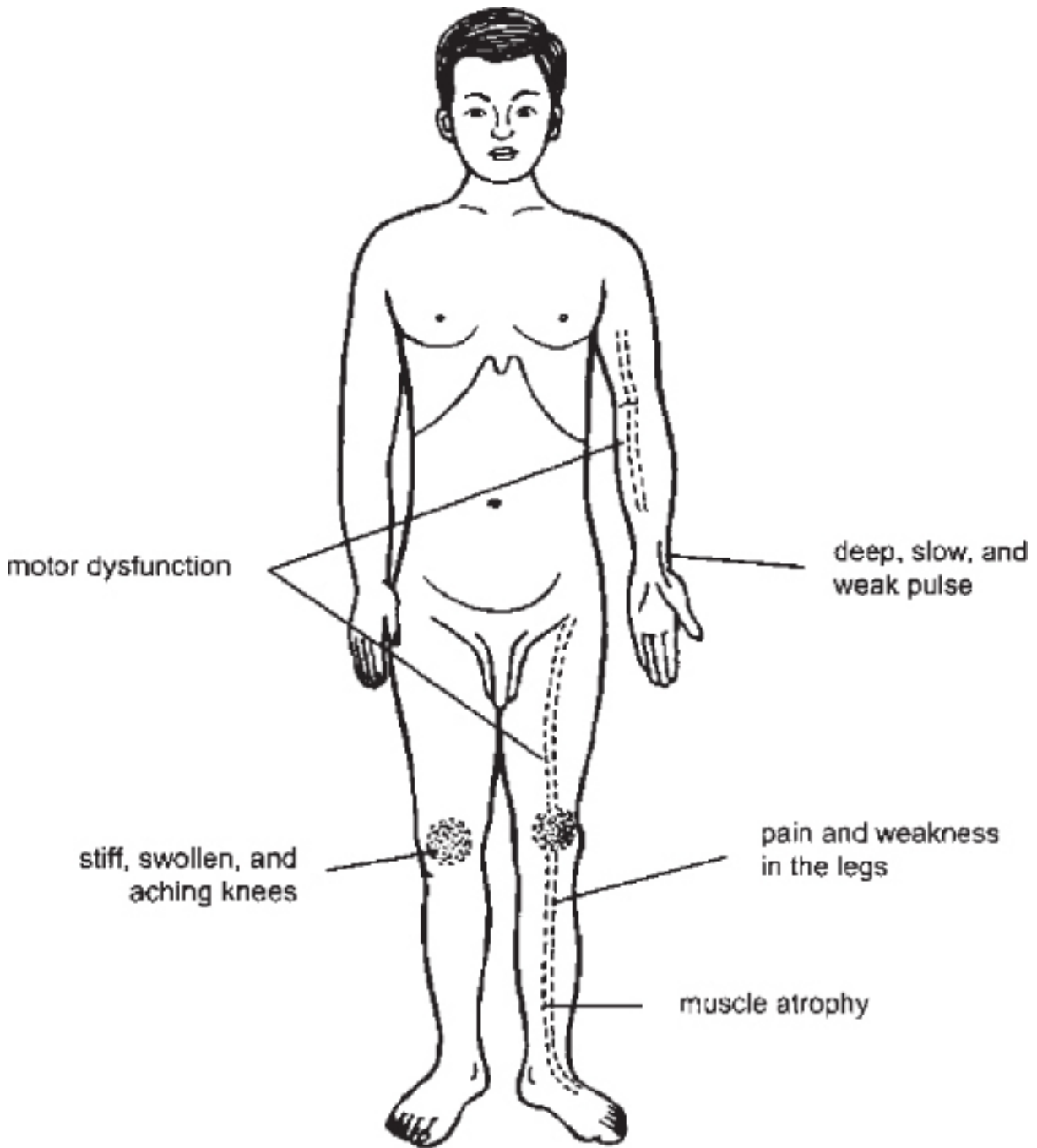
This formula thus has the grand tonic effect of its parent formula, yet deadens pain better and is more dispersive. Because it contains aconite, it is even more suited to chill conformations than **Ginseng and Tang-kuei Ten Combination (Shi Quan Da Bu Tang 十全大補湯)**.

If compared to **Cinnamon and Anemarrhena Combination (Gui Zhi Shao Yao Zhi Mu Tang 桂枝芍藥知母湯)**, **Major Siler Combination (Da Fang Feng Tang 大防風湯)** lacks the strong diaphoretics ma-huang and cinnamon, and the antipyretic anemarrhena. Instead, it contains the blood-regulating herbs of achyranthes and **Tang-kuei Four Combination (Si Wu Tang 四物湯)** and two strong Qi regulators (ginseng and astragalus). Therefore it is suitable for cases which have grown considerably chronic and in which the patient has fallen into a chronic state of weakened blood and Qi.

Indications

1. Polyarticular rheumatism
2. Both Qi and blood deficiency
3. Weak-chill conformations

This formula contains aconite. Therefore it is *not* suitable for fever conformation, and only suitable for those with weak-chill conformations.



6-13: CHRONIC ARTICULAR RHEUMATISM

When articular rheumatism becomes chronic, the body's secretions and internal fluid levels change, and stagnant blood conditions may worsen. Such chronic cases are often difficult to treat, but the stagnant blood must be

dispersed, and interior-treating, stagnant blood-dispelling formulas are the choices, especially during acute joint flare-ups.

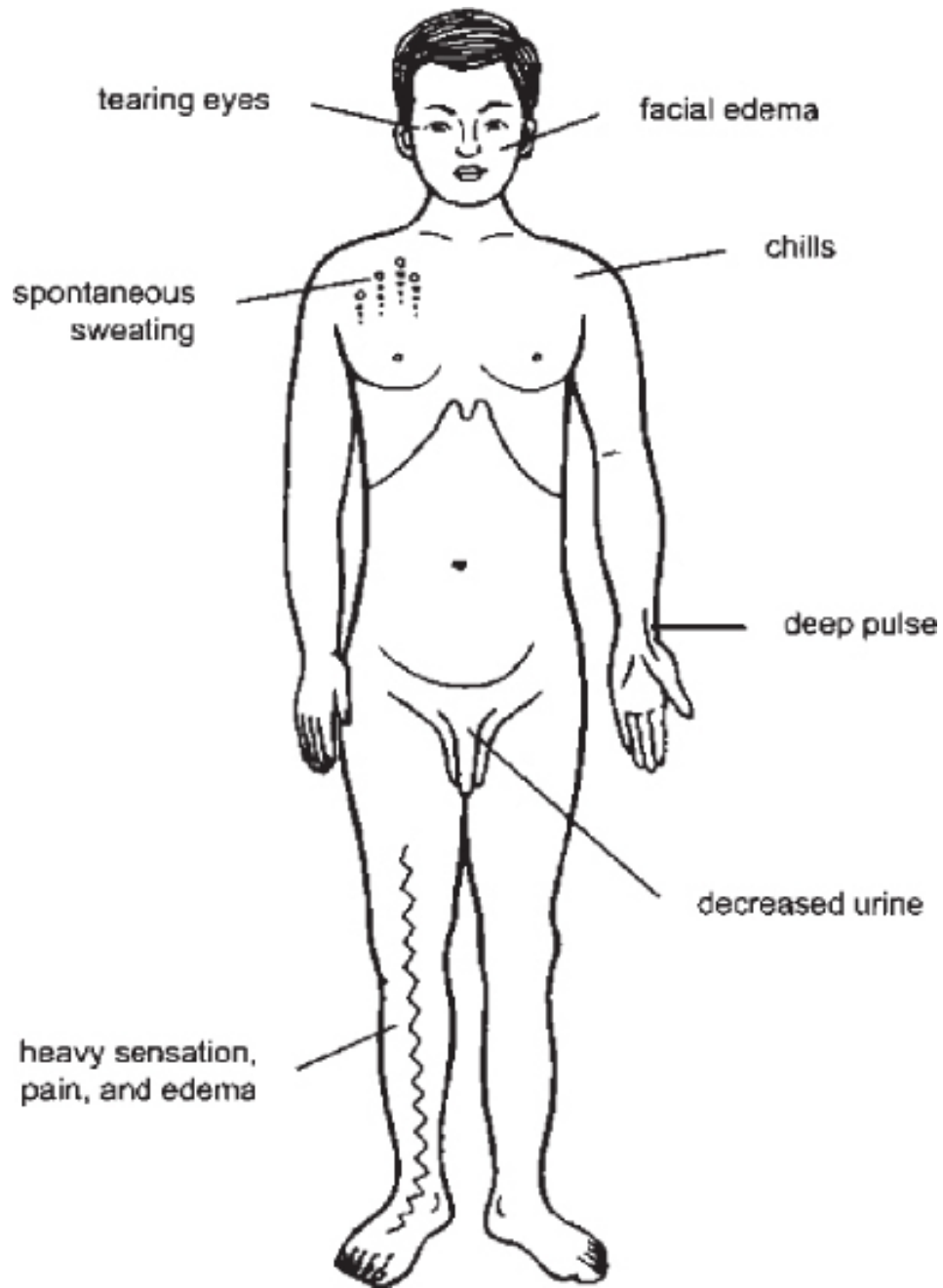
HERBAL FORMULAS FOR CHRONIC ARTICULAR RHEUMATISM

Atractylodes Combination (Yue Bi Jia Zhu Tang 越婢加朮湯)

The ingredients are ma-huang, licorice, gypsum, ginger, jujube, and atractylodes.

Indications

1. A fever conformation with healthy facial complexion and not of extremely weak conformation
2. Heat sensation in affected joints
3. Acute joint swelling
4. A sudden, severe edema and diminishing urinary output
5. Polyarticular rheumatism
6. It is also used for insufficient urine output, nephrosis, urticaria, and skin rashes



Stephania and Astragalus Combination (Fang Ji Huang Qi Tang 防己黃耆湯)

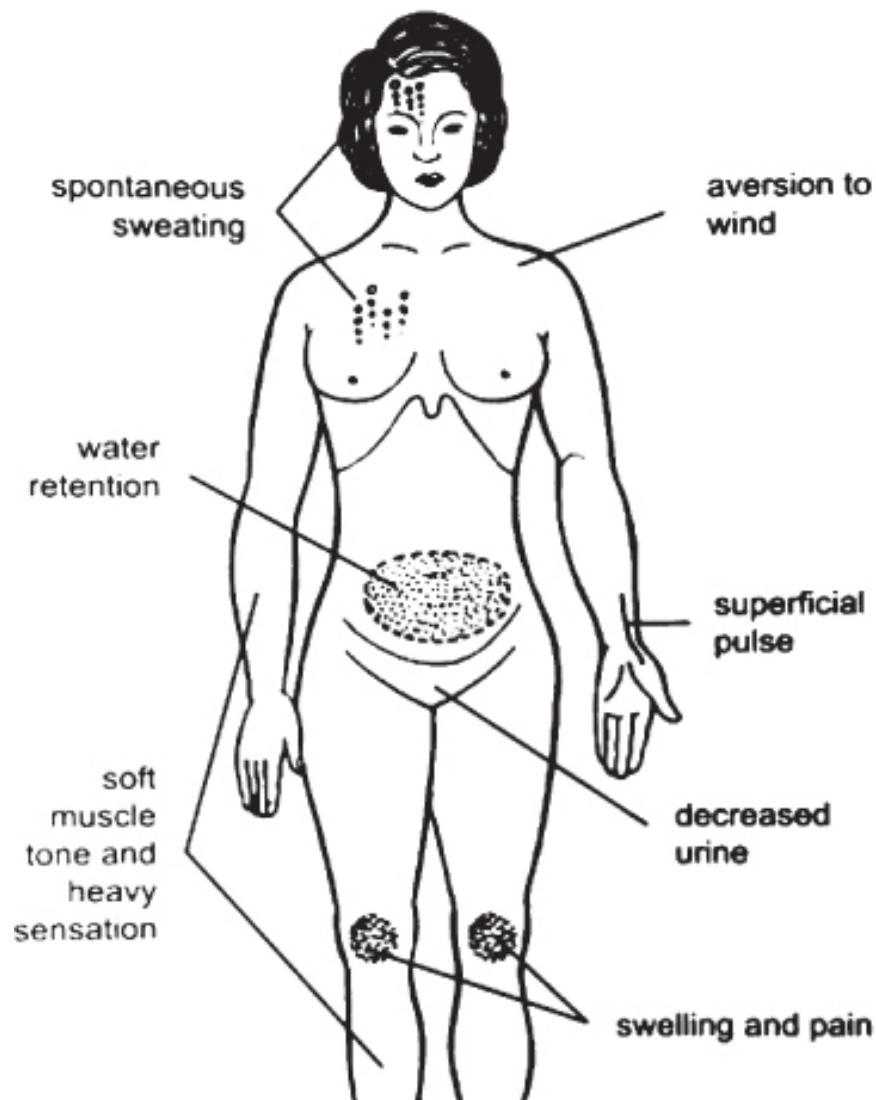
The ingredients of this formula are stephania, astragalus, atractylodes, licorice, raw ginger, and jujube.

1. Both stephania and atractylodes remove dampness.

2. Astragalus is a bodybuilding tonic. Although it can also remove dampness that has accumulated below the skin's surface, and thus may help prevent night sweats and excessive perspiration.

Indications

1. Increased body weight due to water accumulation
2. Pale complexion
3. Excessive sweating

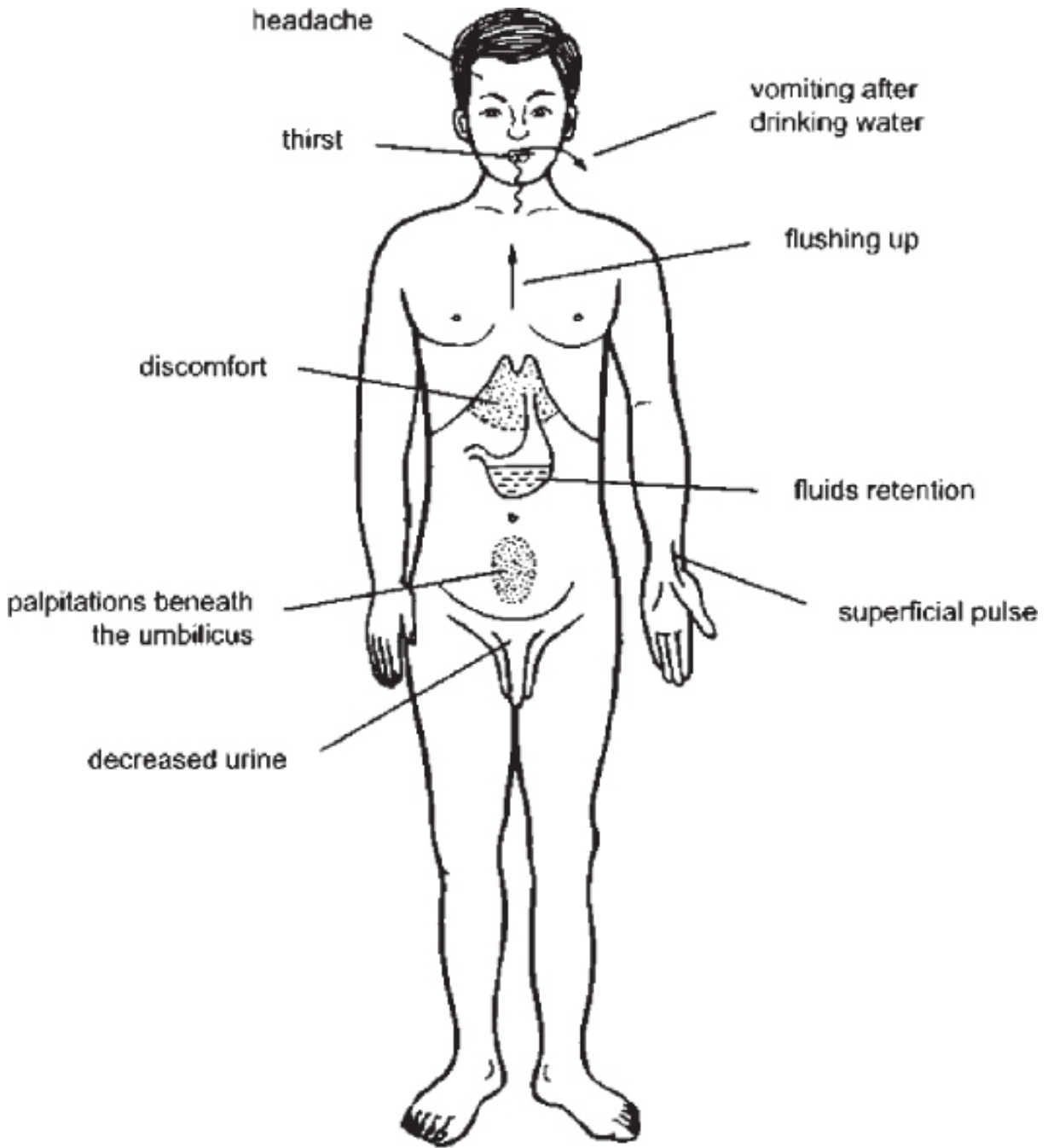


Hoelen Five Herb Formula (Wu Ling San 五苓散)

The ingredients of the formula are alisma, hoelen, polyporus, atractylodes, and cinnamon.

Indications

1. Joint swelling
2. Thirst
3. Decreased urine output



ADDITIONAL HERBAL FORMULAS FOR
CHRONIC RHEUMATISM

Pinellia and Gastrodia Combination (Ban Xia Bai Zhu Tian Ma Tang 半夏白朮天麻湯)

Indications

1. Headaches and dizziness in those with delicate constitutions
2. Pallid facial complexions
3. Palpable sloshing sounds in the stomach

Cinnamon, Atractylodes and Aconite Combination (Gui Zhi Jia Ling Zhu Fu Tang 桂枝加苓朮附湯)

Indications

1. Rheumatism and neuralgia
2. Weak-chill conformation individuals who perspire easily

Cinnamon, Aconite, and Ginger Combination (Gui Zhi Fu Zi Tang 桂枝附子湯) plus Licorice and Aconite Combination (Gan Cao Fu Zi Tang 甘草附子湯)

Indications

1. Severe pain
2. Rheumatoid Arthritis
3. Joint swelling
4. Neuralgia
5. General weakness
6. Cold arms and legs

Peony, Licorice, and Aconite Combination (Shao Yao Gan Cao Fu Zi Tang 芍藥甘草附子湯)

The most striking effect of this formula seems to be an improvement of gastrointestinal functions, and often times, the patient does not experience any noticeable side effects after continuous usage. In this regard, it is clearly superior to the analgesics and antacids of conventional medicine.

Indications

1. Cold arms and legs
2. Pain and muscle spasms in legs
3. Especially suitable for chills that cause muscle spasms and aches
4. Often used to relieve pain from kidney stones, gallstones, and/or intestinal colic

Coix Combination (Yi Yi Ren Tang 薏苡仁湯)

Indications

1. To eliminate “wind” and “dampness” deep in the body
2. Joint pain with swelling and a feverish sensation
3. Muscle pain
4. Neuralgia

Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經活血湯)

Indications

1. Chronic pain or neuralgia (especially sciatica)
2. Especially good for damp conformation with stagnant blood

Peony and Licorice Combination (Shao Yao Gan Cao Tang 芍藥甘草湯)

This formula can be broadly used as an analgesic or muscle relaxant in patients of heat, chill, strong, or weak conformations.

Indications

1. Acute muscle spasms, aches, and pains of various kinds such as from a urinary tract stones, gallstones, or overwork
2. Pain following excessive exercise, dysmenorrhea, kidney stones, or biliary calculi
3. Post-herpes neuralgia, headache, and trigeminal neuralgia

Licorice and Aconite Combination (Gan Cao Fu Zi Tang 甘草附子湯)

Indications

1. Rheumatoid arthritis
2. Neuralgia
3. Low back pain



CHAPTER 7

Strains and Sprains



7-1: LOW BACK MUSCLE STRAINS AND LIGAMENT SPRAINS

KEYWORDS

1. Low back strain (ICD-10 Code **S39.012A**)
2. Low back sprain (ICD-10 Code **S33.5XXA**)

Jacqueline was a thirty-one-year-old woman with a nine-month history of low back pain. The pain started when she was lifting and moving several boxes of toys out of her basement. It got worse, and she started to have

difficulty with turning and bending her trunk. She was also unable to stand up straight by the end of the day. She took a warm bath and some Motrin and went to bed earlier than usual. She slept poorly that night. She went to a local hospital emergency room the next morning, and she was told that she had a muscle strain in her low back. She received an injection to her buttocks and was given some pills for the pain, as well as a prescription for a muscle relaxant. She was instructed to rest at home and to do no more lifting for three days. The treatments did not seem to help a whole lot as she still had the same pain and discomfort when she came to see me. Her back pain was achy and constant. She graded the intensity of the pain at a six to seven on a scale of zero to ten. She also felt weak in her left leg. She was a clerk at a department store, but she had not been able to work since the onset of her low back pain. She had never experienced any low back pain prior to that, and she was in excellent health, with no other medical problems and none of her family had any muscle, bone, joint, or nerve diseases.

I saw another young woman, Diane, shortly after seeing Jacqueline. An orthopedic surgeon referred Diane to me. She was a thirty-year-old woman from Korea with a fourteen-month history of lower back pain, which occurred after she fell from a chair. She told me that she was sitting on a high stool when one of the legs of the stool collapsed and caused her to fall to the ground. She landed on her buttock. She went to the orthopedic surgeon initially and was diagnosed with lumbar muscle strain. She received conservative treatments with medications, physical therapy, and exercise. She also had two epidural nerve blocks. The nerve blocks actually made her feel worse, so she did not go back to have the third injection as scheduled. She said the pain was constant, and the only mild relief she had was by lying down or doing gentle stretching exercises. She described the pain as dull, aching, burning, and persistent all the time. She was taking Parafon Forte when she came to see me. She had difficulty sleeping and had lots of weird dreams. She specifically denied any history of mental, nerve, bone, or joint diseases.

LOW BACK MUSCLE STRAIN

The symptoms of muscle strain are often aching, localized pain, and tenderness associated with muscle spasms. Most people with low back muscle strain tend to flex the hips and bend the knees when lying down on their side to help ease the pain. Flexion of the spine tends to intensify the pain, whereas rest helps relieve it.

LOW BACK LIGAMENT SPRAIN

1. A ligament is a tissue that connects bone to bone.
2. Injury to the ligament often presents with the same symptoms as muscle strain.
3. The pain is aggravated by weight bearing on the affected area.
4. Sprain of the sacroiliac joint tends to produce a localized pain and tenderness at the site of the injury. Sacroiliac joint sprains may produce “radiating” pain to the side of the buttocks into the hip and groin area that is mimicking the lumbosacral radiculopathy from, say, a herniated disc.

PATHOPHYSIOLOGY OF LOW BACK STRAIN AND SPRAIN

1. Both low back muscle strains and ligament sprains usually have a sudden onset following a direct injury to the low back, or following twisting, falling, lifting, pushing, carrying, or pulling something in an unusual awkward position.
2. There may be or may not be visible muscle spasms, bruises, or skin openings.
3. The pain is usually aggravated by moving around and is relieved by rest.
4. Examination of the low back often shows a decrease in the lumbar lordotic curve with tight muscle bands and points of tenderness in the lumbosacral paraspinals and quadratus lumborum.
5. The straight-leg-raising test is generally negative.
6. The sacrum and coccyx may be tender to light pressure.

TREATMENT OF LOW BACK STRAINS AND SPRAINS



1. Strict bed rest is not recommended after low back strains or sprains because prolonged bed rest leads to physical deconditioning and prolonged recovery time.
2. It's reasonable to take it easy, but don't just lie in bed for a day or two following a low back strain or sprain.
3. The general rule of thumb is not to stand, sit, or lie in one position for extended period of time, say for over an hour, without stretching or moving around.
4. According to TCM theory, sitting too long injures the muscle, standing too long injures the bone, walking too long injures the tendon and ligaments and lying too long injures the Qi and soul.

LOW BACK STRAINS/SPRAINS AND EXERCISE

1. Proper exercises are not only important in dealing with aches and pains but also important for the overall health of the body.
2. Muscle is the second heart of the body; even though the heart is doing the pumping, it is the muscles that help the blood return.
3. One may look at the heart as a pump for an irrigation system: the muscles serve as a water tower that allows continuous irrigation even when the pump is not functioning at its optimal level.

7-2: HERBAL FORMULAS FOR LOW BACK MUSCLE STRAINS AND LIGAMENT SPRAINS

Pueraria Combination (Ge Gen Tang 葛根湯)

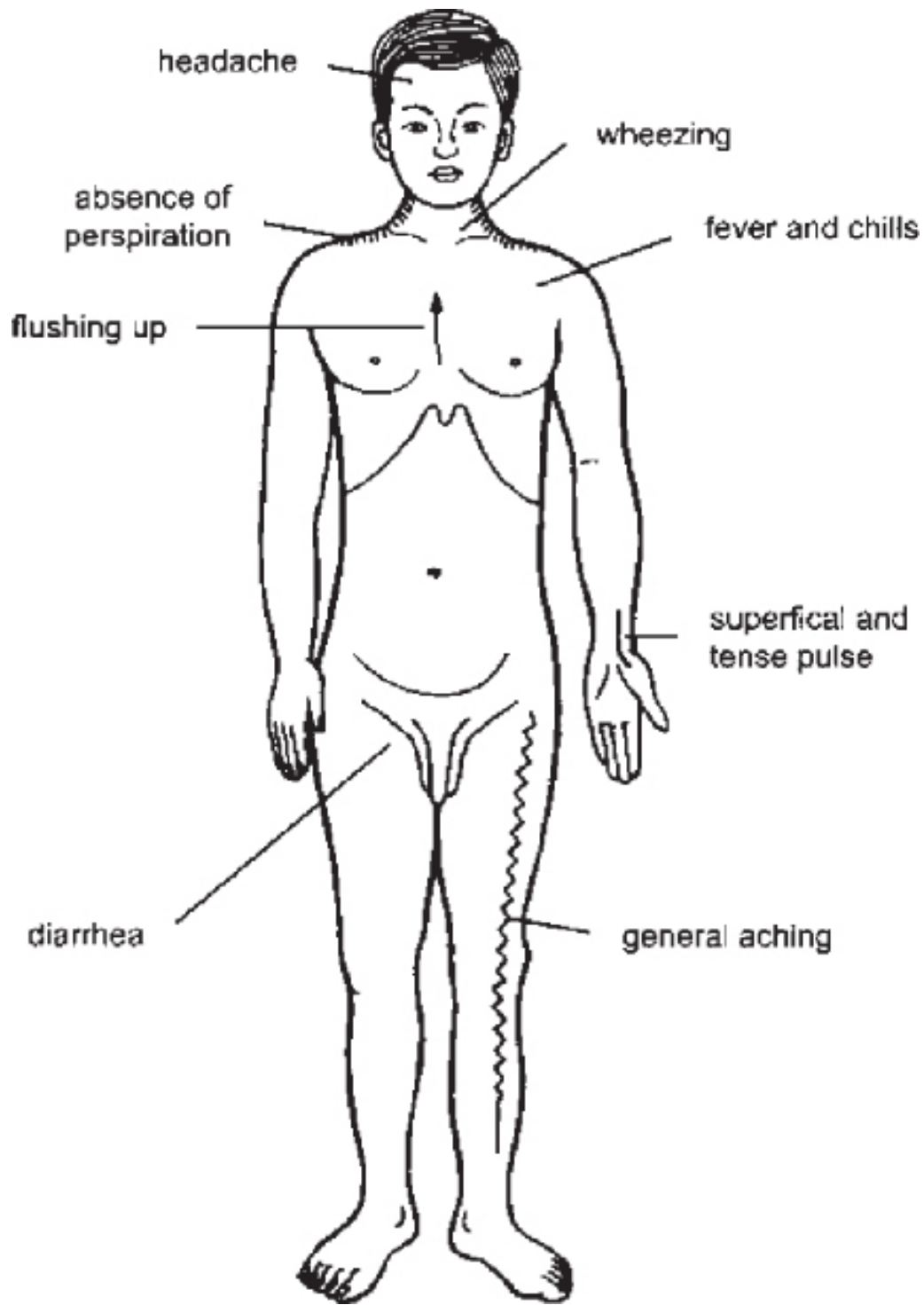
For the average person with a chill constitution, **Pueraria Combination (Ge Gen Tang 葛根湯)** is quite effective in relieving inflammation, stiffness, and muscle spasms in the low back following an acute low back strain and

sprain. For those who are suffering from chronic rheumatic pain, this formula is also very beneficial.

The ingredients of this formula are pueraria, ma-huang, cinnamon, peony, jujube, licorice, and raw ginger.

1. Pueraria—regulates blood circulation, gastrointestinal mobility, and bow movement.
2. Ma-huang—relieves muscle tension.
3. Cinnamon—subdues flushing up, dispels chills, calms palpitation, and regulates gastrointestinal functions.
4. Peony—regulates gastrointestinal function, acts as an analgesic, and has anti-itching properties.
5. Jujube—nourishes the body in general.
6. Licorice—relieves tension, detoxifies the liver, and reduces side effects of the formula. Licorice appears in over half of all Chinese herbal formulas.
7. Ginger—one of the major botanicals in Chinese herbal medicine that promotes blood circulation.

You've probably noticed that ginger and jujube frequently appear together in Chinese herbal formulas. That is because these herbs smooth and mellow the formula and eliminate side effects when used together.

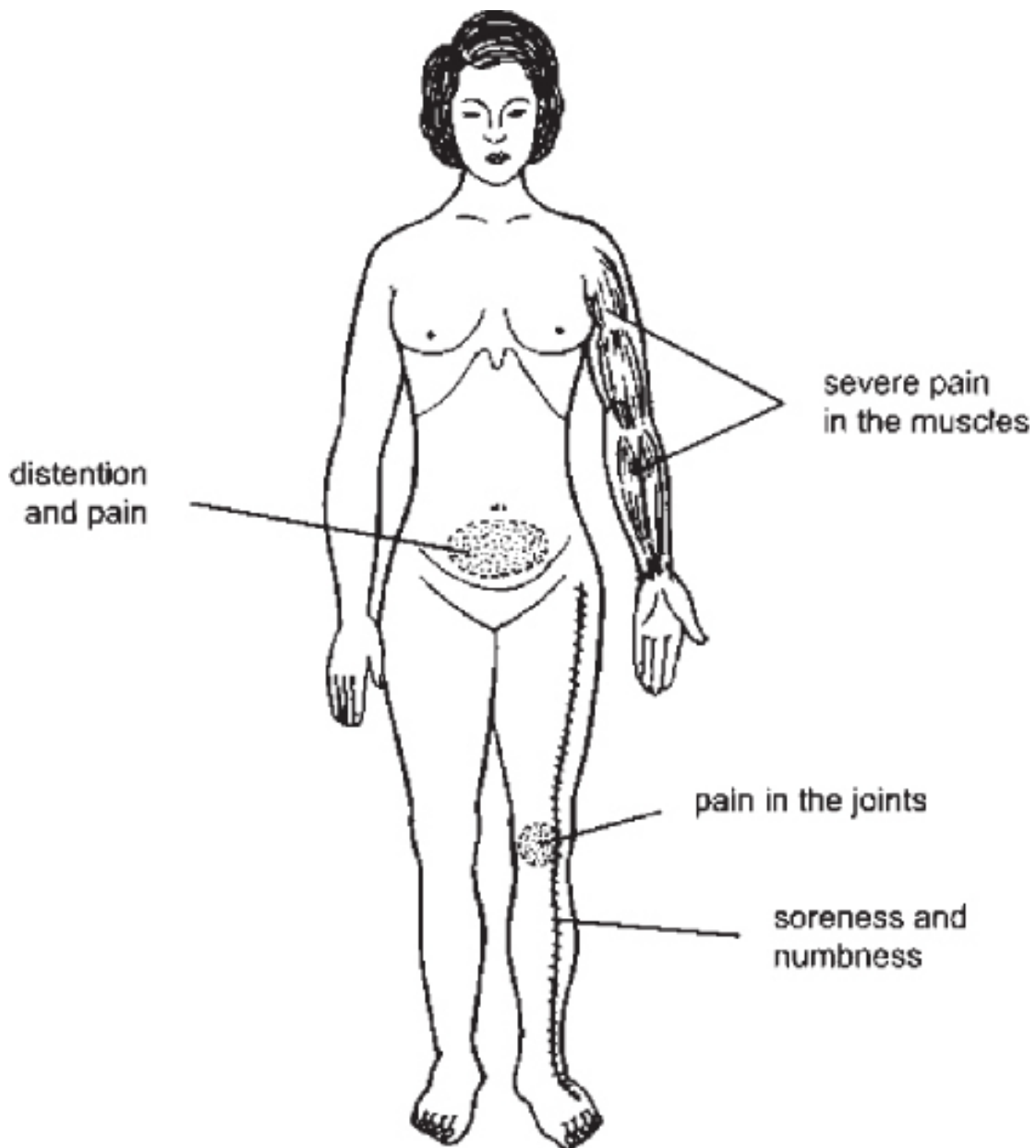


Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經活血湯)

This formula is generally used for those with subnormal physical fitness and who are prone to cold conformation. It is an interior-chill conformation formula mainly used to regulate blood.

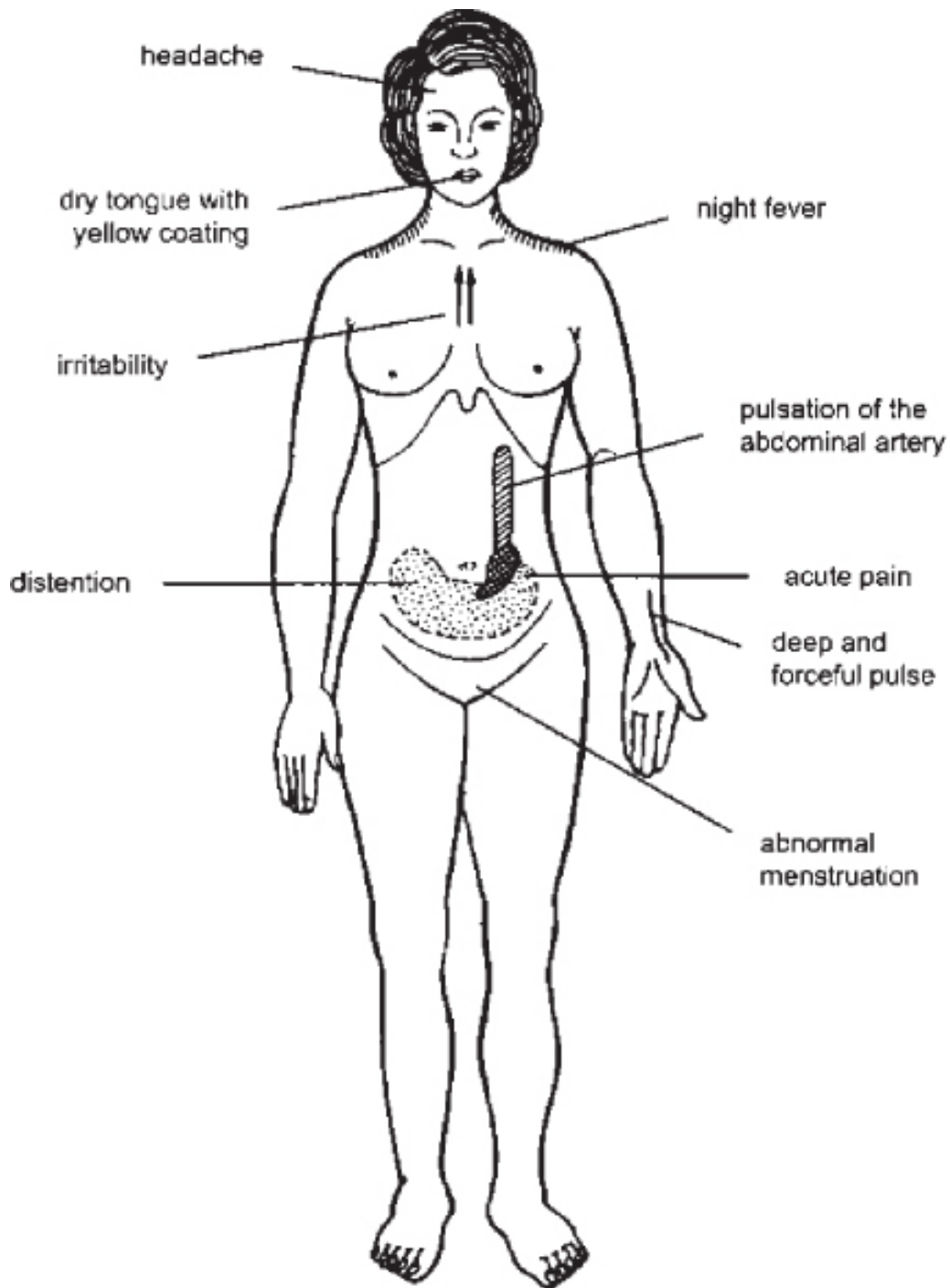
The ingredients of the formula are tang-kuei, cnidium, peony, rehmannia, atractylodes, hoelen, licorice, siler, chang-huo, achyranthes, clematis, angelica, stephania, persica, gentiana, raw ginger, and citrus.

It is often used to treat chronic and long-standing pain or neuralgia (especially sciatica) as well. If the person has a damp conformation with stagnant blood, this formula is definitely indicated.



Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)

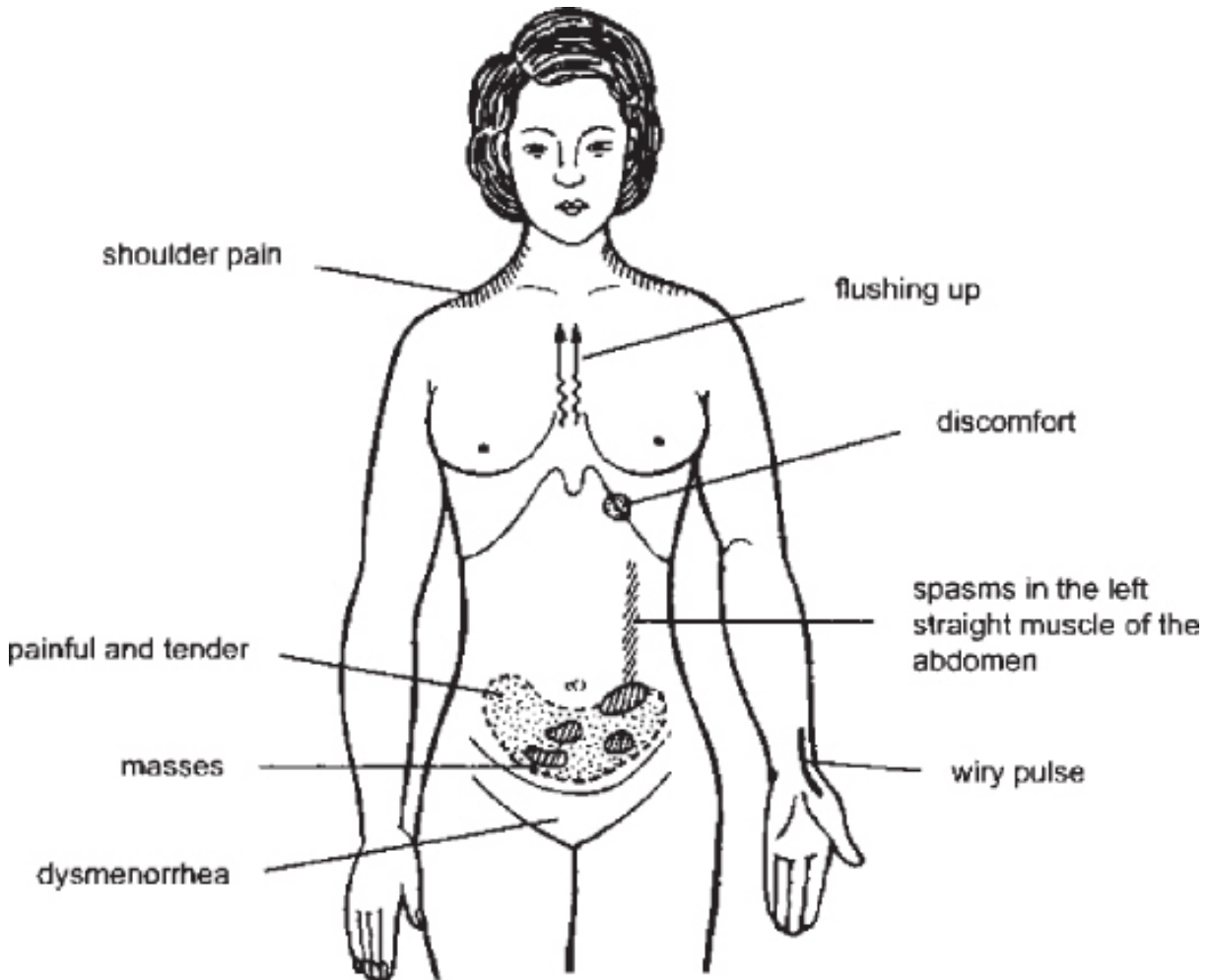
For acute low back strain with signs and symptoms of stress, depression, constipation, and abdominal distention, this formula is indicated. It is often used in individuals with healthy complexions and abundant vitality, but who are easily constipated. It is also an appropriate formula for women with difficult menstruation, especially those accompanied by emotional upheavals during menstrual periods.



Cinnamon and Hoelen Formula (Gui Zhi Fu Ling Wan 桂枝茯苓丸)

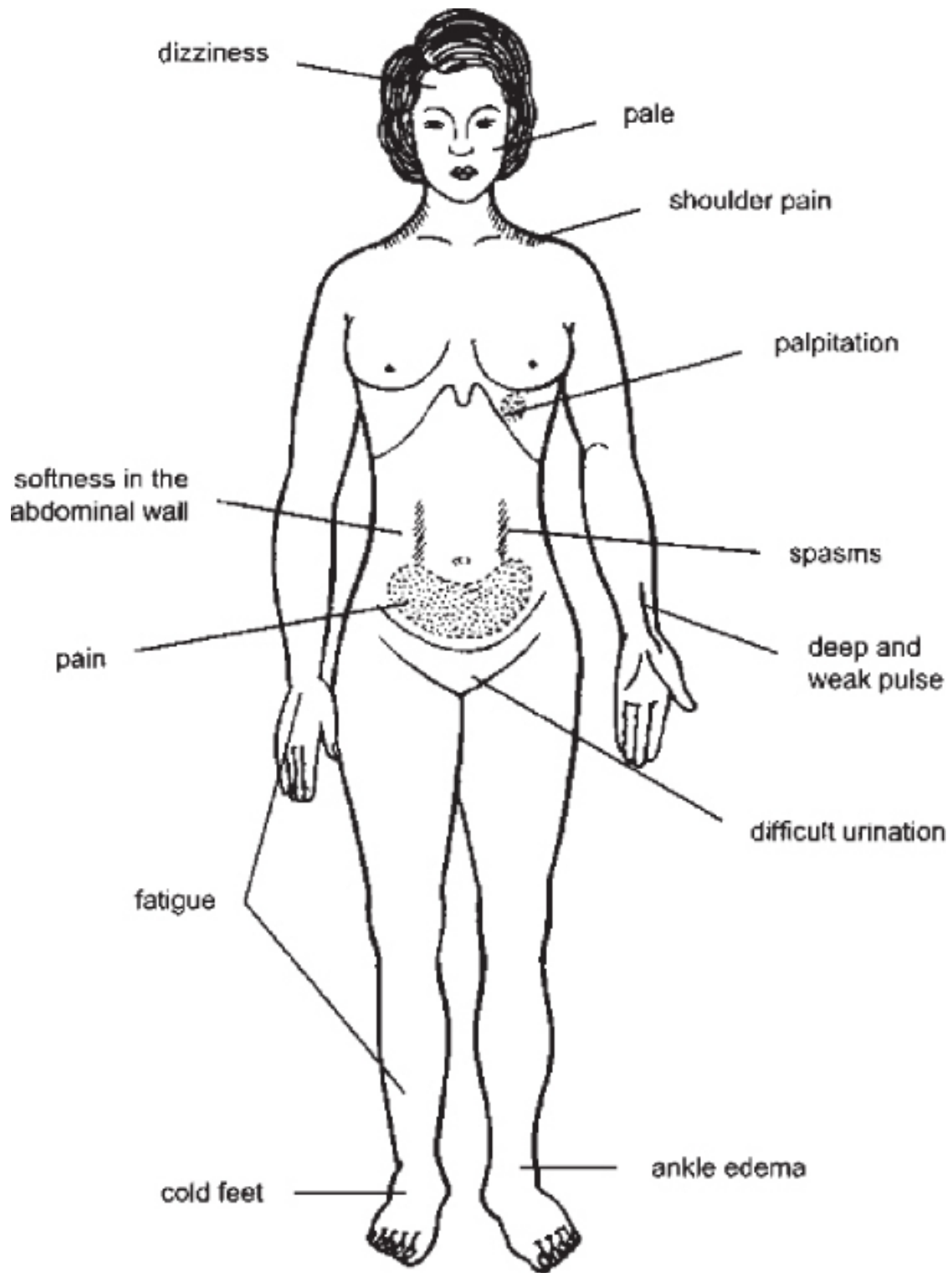
This formula is a good choice for people with cold-damp conformations. As its tonic properties are strong, it is not recommended for severely weak

conformations. Because it has drying abilities, it is geared for moderately damp conformations and can be used as a formula to disperse stagnant blood on a wide variety of patients without regard to weak-strong or fever-chill conformation status.



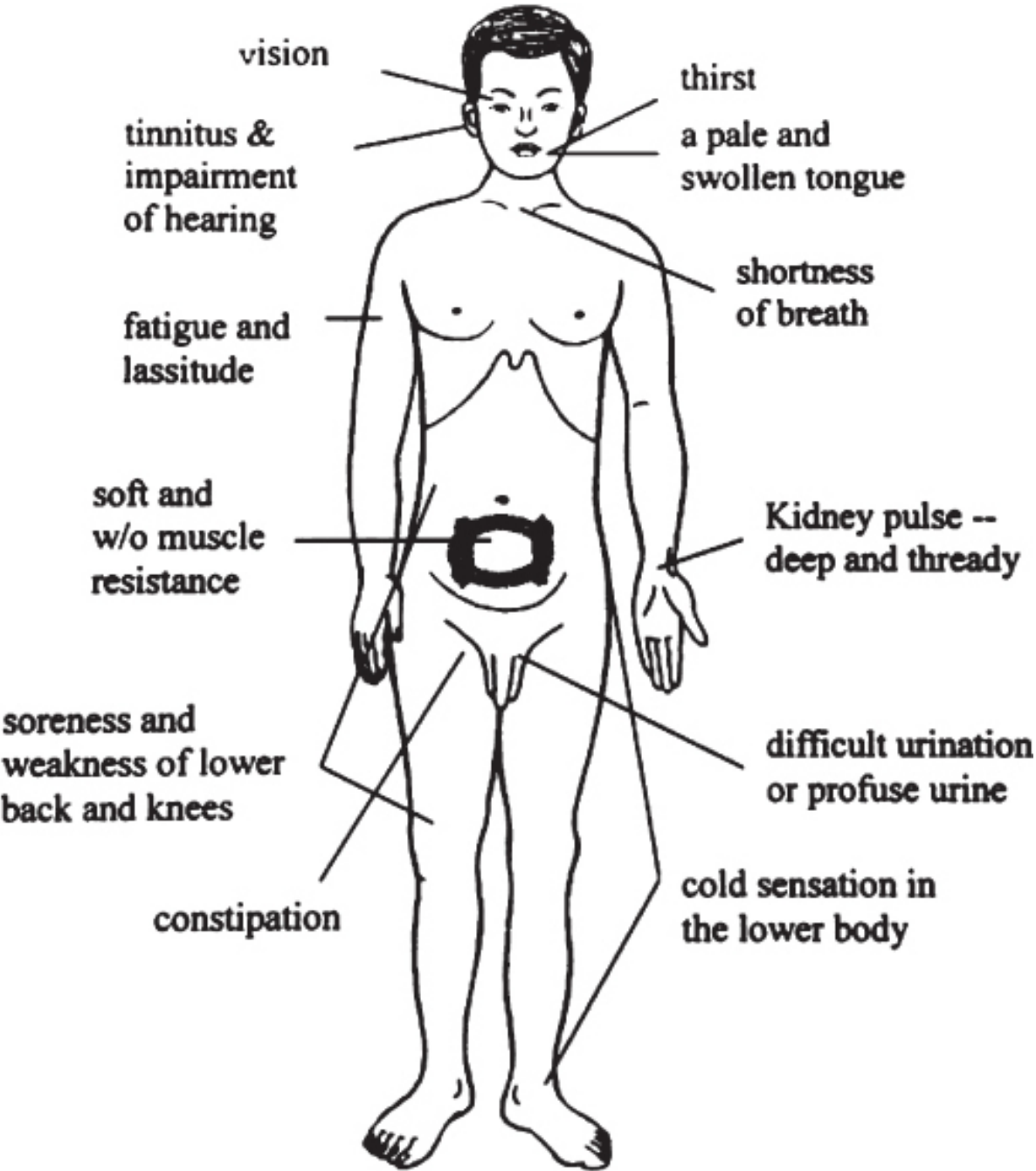
Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散)

Typically, it is used for chill and edema, especially for dysmenorrhea, menstrual pains, and kidney disorders. It is also effective in reducing low back pain in women after low back strains/sprains.



Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸)

An interior-chill conformation formula mainly used to relieve dryness. It is especially useful for low back pain in the elderly. It also helps to improve declining sexual ability, prostate hypertrophy, senile genital itching, cataracts, and kidney and bladder disorders in seniors.





CHAPTER 8

Contusion

8-1: LOW BACK CONTUSION

KEYWORDS

1. Low back contusion (ICD-10 Code **S30.0**)
2. Hematoma (ICD-10 Code **S30.0**)

December 1997

Gary was a thirty-seven-year-old man who was referred to me by an orthopedic surgeon regarding a seven-month history of low back pain. He attributed his low back problem to an assault in May of 1997. At that time he was a technician for a cable tv company; he was assaulted and battered by a violent customer over some dispute about his work. He was thrown over a chair and through a wall. He felt a sharp pain in his lower back and right buttock initially. Then, the pain radiated down to both buttocks a few minutes later. He was taken by ambulance to a local hospital shortly after the incident. He had X-rays and was told he had a blunt injury to the lumbar and buttock muscles with sciatica. He was given prescriptions of Flexeril, Oruvail, and Tylenol. He was told to use a cold pack and then moist heat several times a day for a week.

Gary went to an orthopedic surgeon a week later because he had persistent pain. He was told he had multiple contusions with large bruises on his low back and buttocks. He was prescribed Tylenol #3 to assist in pain control. He went back to the surgeon a week later with pain and difficulty in low back extension. At that time he still had a large bruise on his lower back. He started to receive physical therapy. By mid-June 1997 he still had low back and buttock pain, especially when he was doing trunk bending, lifting, sitting, and twisting. His pain seemed to be worse in the morning. He had difficulty sleeping. He went to a chiropractor in early July 1997. He was told he had a low back contusion, facet syndrome, intervertebral disc syndrome, lumbar neuritis, and lumbar myalgia. He was treated with spinal manipulation, manual trigger point therapy, adjunctive therapy, electrical stimulation, interferential therapy, and pelvic traction. He was also treated with flexion distraction therapy, rehabilitation of the lumbar spine extensor muscles using a Swiss gym ball, and relaxation/stretching for the hamstring muscles.

Due to persistent pain and dysfunction, Gary went to another orthopedic surgeon in August 1997. He had constant pain and difficulty in sitting, among other complaints. He had pain from the low back that radiated to the right buttock. He was sent for an MRI, given Ultram, and continued on physical therapy. The MRI of the lumbar spine appeared normal. He was then sent to see a psychologist to receive treatment for reactive depression, anxiety, and persistent pain. He was treated for pain management with counseling and hypnosis.

I saw Gary almost eight months after his low back injury. He was complaining about persistent lower back pain, weakness, stiffness, and difficulty in trunk bending and lifting. He was depressed, couldn't sleep, was anxious, and had diarrhea for no reason. Prior to his injury in May 1997 he had experienced an injury to his right hand at work in 1995 after he fell off a thirty-foot ladder and landed on the ground. He smoked two to three packs a day.

On my examination, he was alert, oriented to time, person, and place. His vital signs were normal. His cranial nerves were intact. His head, face, neck, upper back, and both upper extremities showed no apparent functional deficit, except he had some mobility deficits in the right wrist, hand, and middle finger. He had a normal lumbar lordotic curve, but with some muscle spasms and points of tenderness in the thoracic and lumbosacral paraspinals, quadratus lumborum, right gluteus maximus, and piriformis. All these muscles were very tender to even the lightest touch. The straight-leg-raising test was

negative on both sides, except he complained of increased pain in the lumbosacral junction and the right lumbosacral paraspinals. The iliotibial bands, hamstrings, and heel cords were tight. The range of motion of the lower back in forward flexion was 65 degrees, backward extension 10 degrees, left side bending 20 degrees, right side bending 15 degrees, left side turning 10 degrees, and right side turning 15 degrees. The normal lumbar lordotic curve was incompletely reversed on active lower back extension from a flexed position. He had difficulty in performing a sit up with his knees straight or bent. He also had difficulty holding his feet up in a supine position; he had great difficulty in raising his head and shoulders up or raising his heels up in the prone position and complained of pain. His abdomen was soft and was not tender to deep palpation, with no noticeable internal organ enlargement through palpation. He did have tender trigger points in the abdominal obliques and rectus abdominus muscles. Deep tendon reflexes were symmetrical in both lower extremities. I evaluated his trunk function by a Biodex isokinetic ergometer, and the results showed poor trunk strength, endurance, muscle power, and work production in both trunk flexors and extensors. There was no apparent functional deficit in either lower extremity.

My impressions were low back and buttock contusions with hematomas and ligament sprain and muscle strain following an injury in May 1997. He received a lengthy conservative treatment but still had a considerable pain and dysfunction. I believe that he had signs and symptoms of chronic low back pain with muscle deficiency, myofascial trigger point formation, and reactive depression. From a conventional medicine point of view, he had reached a maximum functional improvement at that point. From a TCM point of view, the issues on hematomas had yet to be addressed.

CONTUSION WITH HEMATOMAS

1. A hematoma is a collection of blood outside of a blood vessel.
2. Based on the location, there are different types of hematomas: subdural, pelvic, intramuscular, etc.
3. Blunt trauma is probably the most common cause of hematoma.
4. Some minor twists or turns, such as following a violent cough or sneeze can produce a hematoma.
5. As long as a blood vessel is damaged, blood can leak outside the vessel and can accumulate to form a clot.

6. The greater the amount of bleeding, the larger the hematoma will form.

RESULTS OF CONTUSION AND HEMATOMA

1. Superficial hematomas usually will resolve by themselves over time.
2. If there are visible discolorations (bruise), the color normally will change from a purplish-blue bruise to a brown area as the blood clot is resolving.
3. Depending upon its location, the discolorations may travel through different tissue planes by gravity. For example, a low back hematoma may travel down the buttock, and the buttock bruise may go to the posterior thigh.

CONVENTIONAL TREATMENT OF CONTUSION AND HEMATOMA

1. Rest
2. Ice pack
3. Compression
4. Elevation
5. Anti-inflammatory medications and/or analgesics

8-2: HERBAL FORMULAS FOR CONTUSION AND HEMATOMA

KEY HERBAL FORMULAS

1. **Cinnamon and Hoelen Formula (Gui Zhi Fu Ling Wan 桂枝茯苓丸)**
2. **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承湯)**
3. **Peony and Licorice Combination (Shao Yao Gan Cao Tang 芍藥甘湯)**

4. Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經血湯)

5. Coptis and Rhubarb Formula (San Huang Xie Xin Tang 三黃瀉心湯)

In TCM a hematoma is considered a type of stagnant blood disorder characterized by initial subcutaneous bleeding followed by blood stasis, which can lead to Qi or blood circulation blockage or both. If the blockage doesn't clear up, it can lead to chronic pain and dysfunction. Chinese medicine divides hematomas into two types: "acute heat" and "chronic cold".

1. The acute heat type of hematoma is caused by acute injuries, inflammatory or infection. In acute heat-type hematomas, the inflammation or infection of the tissues causes swelling, increases in local heat, and leads to blood congestion, which turns the skin to a reddish or dark-reddish color. Under such conditions, intense or acute pain is almost always the major symptom. These signs can also be seen in some systemic illnesses, such as acute arthritis, connective tissue disorders, systemic lupus erythematosus, arterial thrombosis, etc.
2. Chronic cold-type hematomas are due to adhesions, scar tissue, or chronic connective tissue disease such as fibromyalgia. In chronic cold-type hematomas that often result from repetitive minor or micro injuries, the repairing process occurs constantly, which in turn change hematomas into fibrous adhesions. The adhesions may compress on the nerves or soft tissues causing myofascial trigger points, muscle spasms, and consequently limiting the affected joint's range of motion. Therefore one should not be surprised that the low back pain resulting from a fall or a twist may last long as the obstructed Qi or blood is still present.

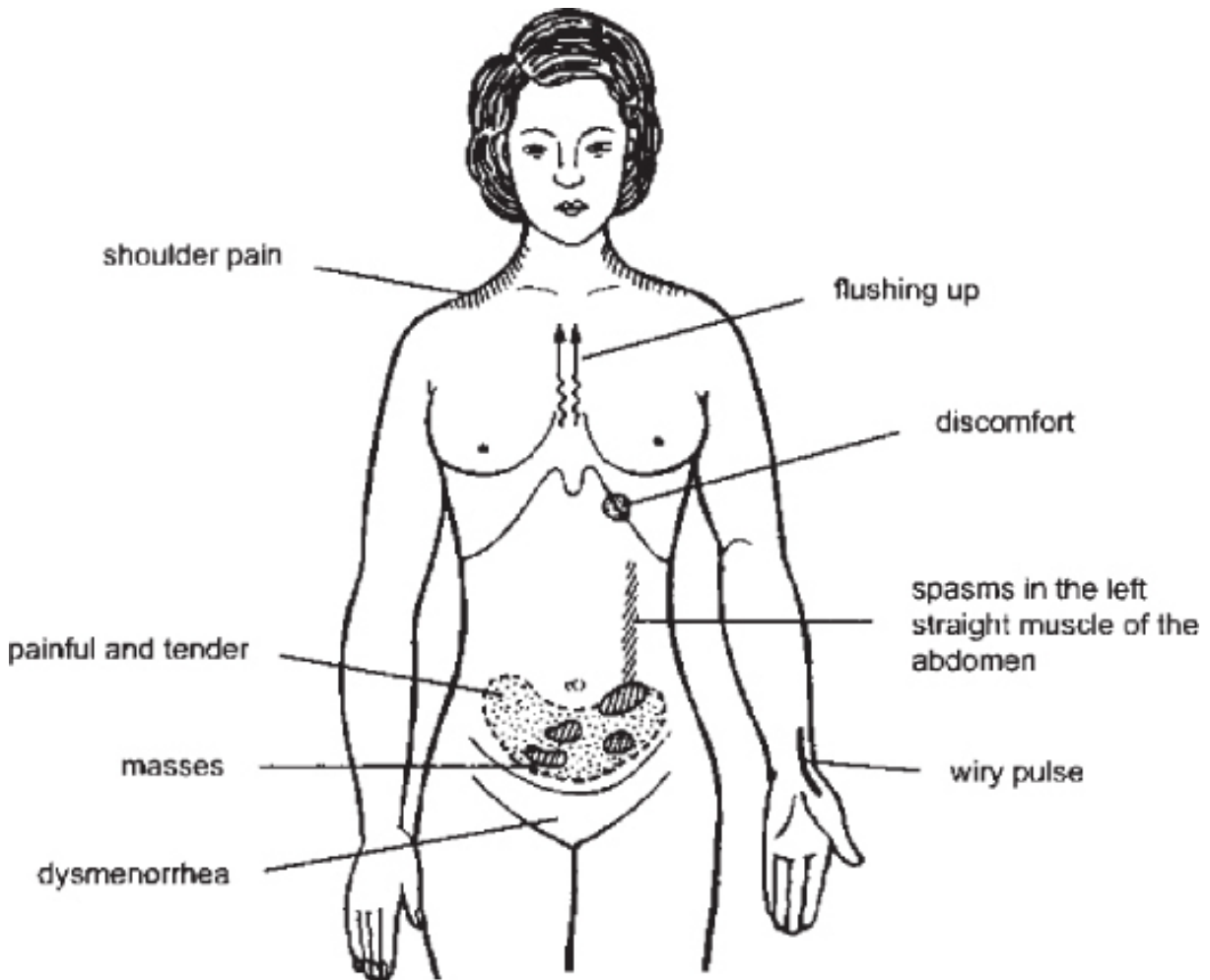
THE TOP 5 HERBAL FORMULAS FOR CONTUSION AND HEMATOMA

Cinnamon and Hoelen Formula (Gui Zhi Fu Ling Wan 桂枝茯苓丸)

The ingredients of this formula are cinnamon, peony, hoelen, persica, and moutan.

Indications

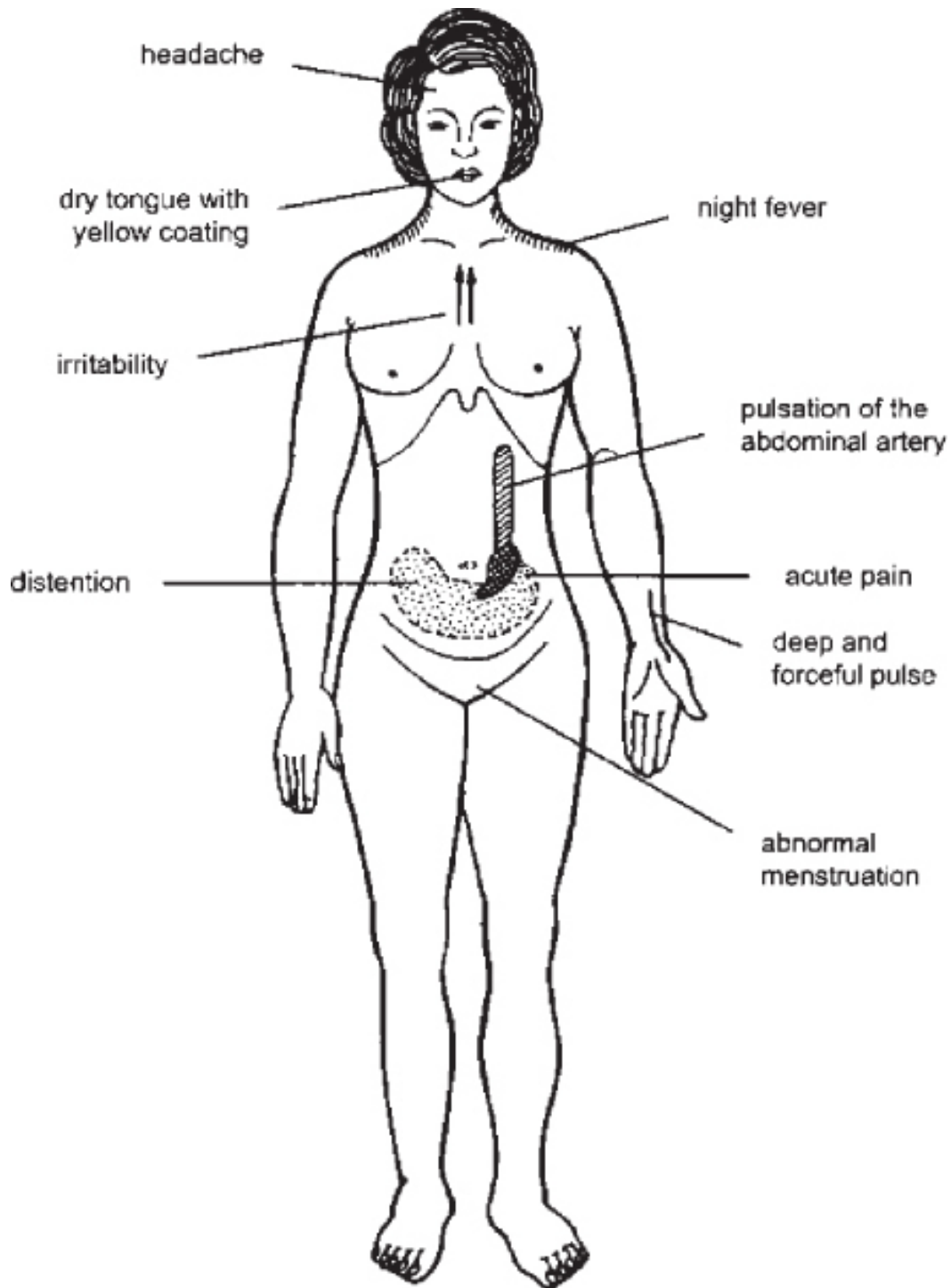
1. Stagnant blood and poor blood circulation
2. Lower abdominal pains in patients of a slightly weak conformation
3. Acute or chronic bruises, internal hemorrhage, or persistent bleeding
4. Facial flushing up



Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)

Indications

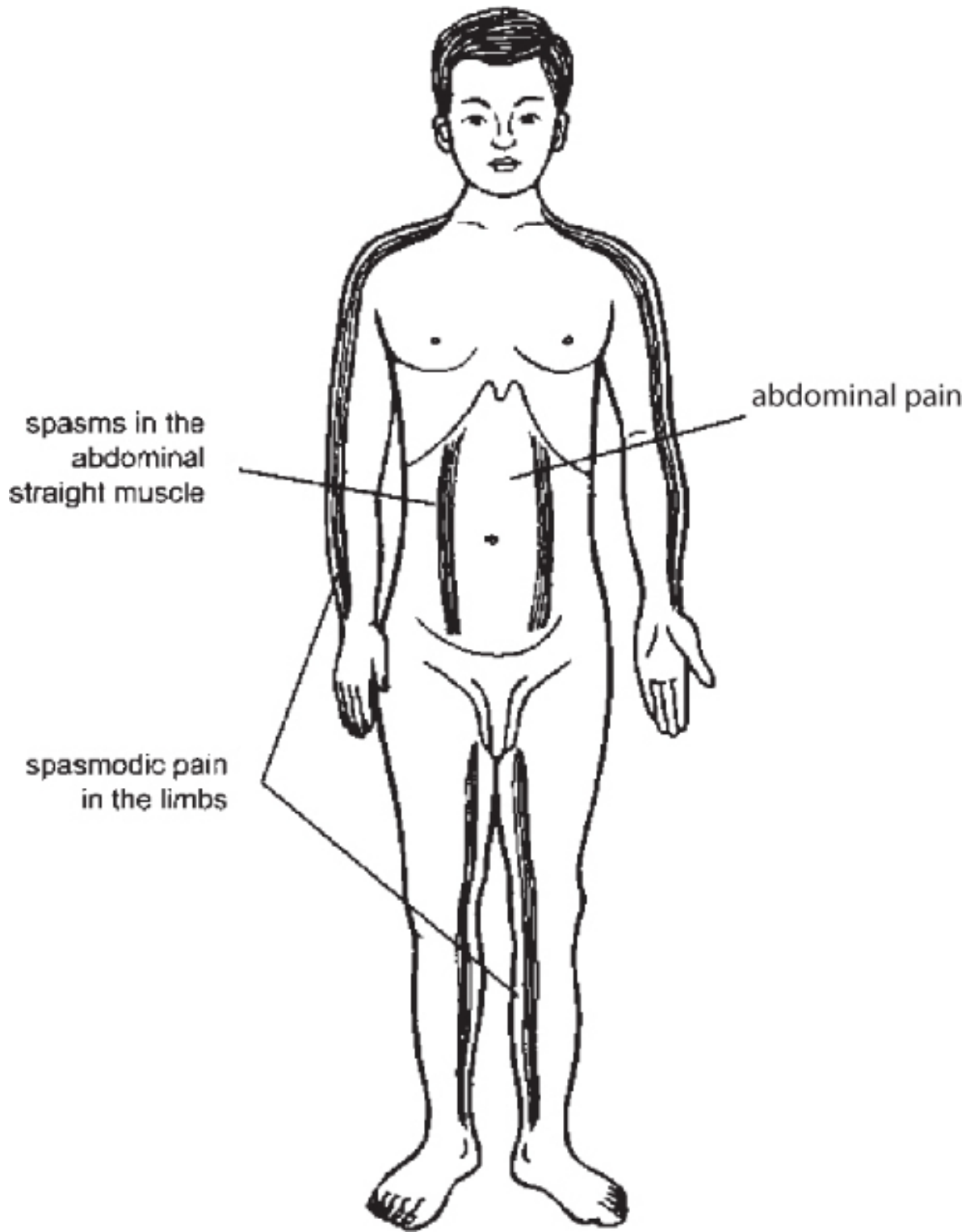
1. Subcutaneous swelling due to hemorrhage after contusion
2. Stagnant blood–related low back pain
3. Cold waist and cold feet
4. Facial flushing up
5. Heavy menstrual flow



Peony and Licorice Combination (Shao Yao Gan Cao Tang 芍藥甘草湯)

Indications

1. Neuralgia in intercostal area and limbs
2. Generalized pain
3. Any pain regardless of the area affected or the fever-chill conformation



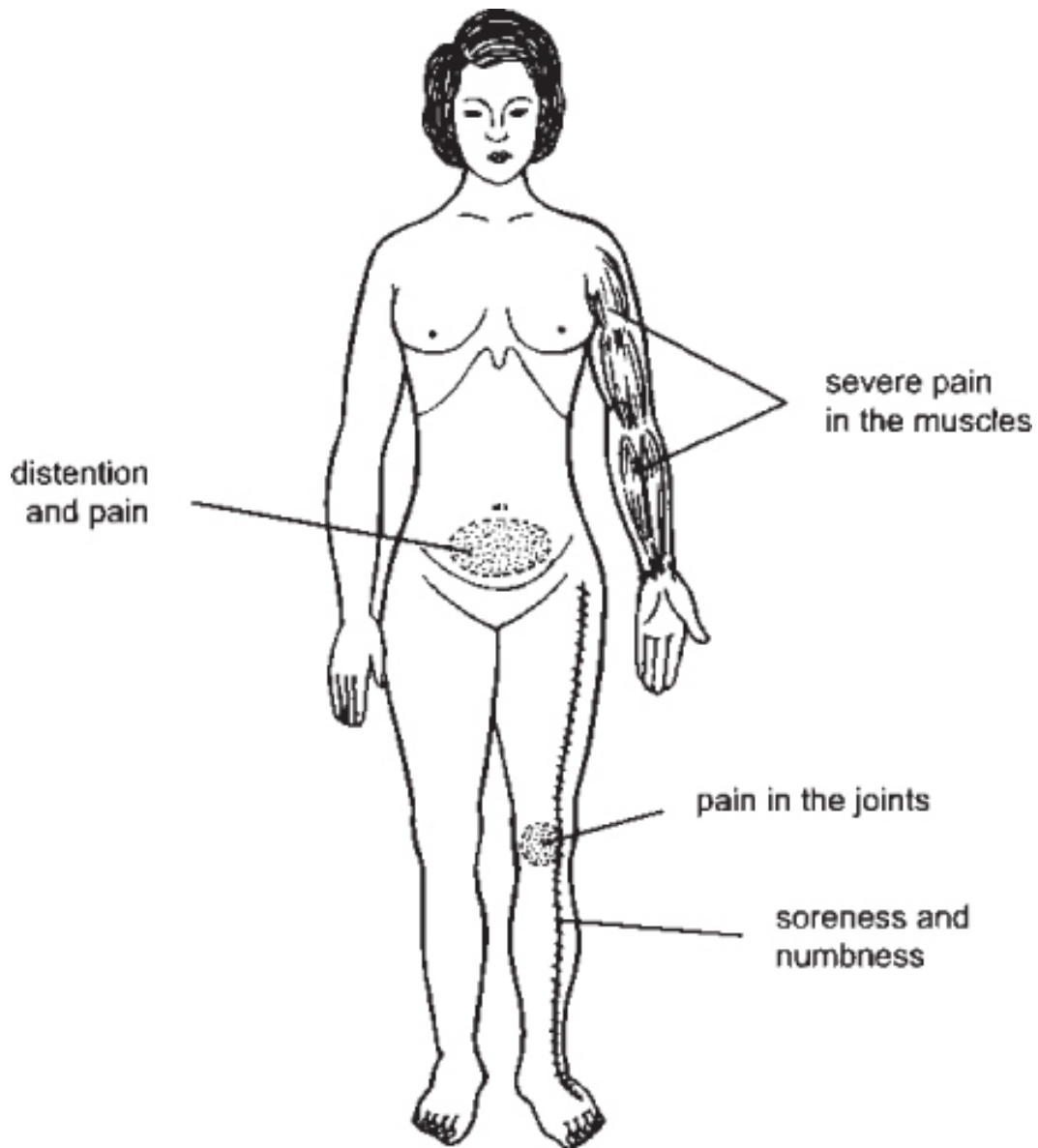
Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經活血湯)

The ingredients of this formula are tang-kuei, cnidium, peony, rehmannia, atractylodes, hoelen, licorice, siler, chiang-huo, achyranthes, clematis, angelica, stephania, persica, gentiana, raw ginger, and citrus.

Clematis and Stephania Combination is very effective in removing long-standing pain accompanied by blood stagnation. Although its parent formula, **Tang-kuei Four Combination (Si Wu Tang 四物湯)**, is a warming tonic that helps patients with a chill conformation. But **Clematis and Stephania Combination** also contains several purging agents that make it unsuitable for those with extremely weak conformations.

Indications

1. Chronic pain, neuralgia, and especially sciatica.
2. As mentioned earlier, if there is damp conformation with stagnant blood this formula is definitely indicated.
3. A great choice for damp and stagnant blood conformations.



Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯) —our good old friend, the “Three Yellow Heart-Purging soup.”

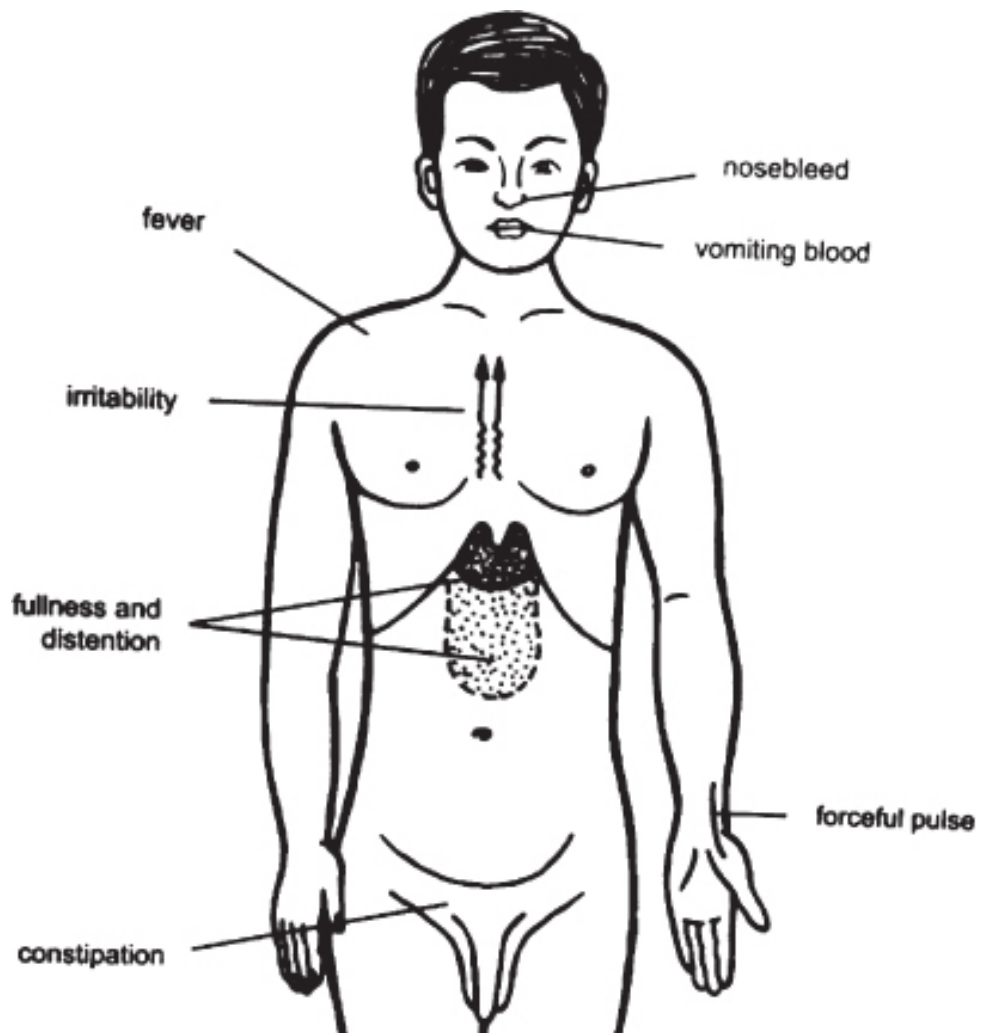
The ingredients of this formula are scute, coptis, and rhubarb. All of the coptis-containing or heat-purging formulas are based on the herbs coptis and scute.

1. Scute, coptis, and rhubarb are all cold-natured herbs.
2. Rhubarb is a strong purgative.

This formula is a cooling purgative that purges congested blood from the upper body. Because these herbs are all purgatives, they should not be used on those who have weak conformations.

Indications

1. Excess conformation with flushing-up, mental instability, uneasiness, and insomnia.
2. Blood congestion in the brain following cerebral hemorrhages.
3. Pleural hemorrhages.
4. Vomiting of blood.
5. A red face from hypertension.
6. Nosebleeds.
7. Bleeding from the eye sockets.
8. It is also used for insomnia, constipation in hypertensive individuals, and hyper-excitability following extensive burn injuries.
9. It may be used to prevent or treat hangovers as well.





CHAPTER 9

Myalgia

9-1: A PAIN IN THE BUTT

KEYWORDS

1. Myofascial pain syndrome (ICD-10 Code **M79.1**)
2. Piriformis syndrome (ICD-10 Code **G57.01**)

February 2005

Dana was a nuclear physicist who had developed pain in her low back and buttock three years prior to coming to see me. She had never had buttock or back pain before and believed that it would work itself out and disappear. Unfortunately it didn't. Dana was flying a lot, sometimes cross-country and cross-continent, ten to twelve times per year. By November 2003 she really felt terrible; she was experiencing dreadful sharp and deep pains in her lower back, buttock, and down her left leg. She went to her family physician on several occasions. The doctor would usually give her a muscle relaxant or a painkiller and told her that there was not much to do about it. She had neither broken bones nor herniated discs.

For many years Dana's husband had been seeing a chiropractor, so she went to see him. The chiropractor began a series of manual treatments – three times each week for eight weeks. Meanwhile, she continued to see her family

doctor. The doctor increased the number and kind of drugs. None of the treatments really helped. Many of the drugs she was taking made it impossible for her to focus on her work, to drive a car, or just to simply live her life. After a while, the chiropractor felt sorry for her and suggested she should see an internist and perhaps a gynecologist. Dana saw both. The internist ordered an intravenous pyelogram to check her kidneys; the gynecologist ordered a pelvic sonogram to check her female organs. Everything appeared to be in good working order. Her family doctor, internist, and gynecologist suggested different drugs, but she became more and more reluctant to take them.

By late June 2004, Dana was in bad shape, with constant pain in her lower back and buttock. The drive to work was about forty minutes, but she could not take the drugs and drive. Since driving was unbearable, she would go for about fifteen minutes, pull over, walk around a while, get back into the car, go for another fifteen minutes, and so on. Every nerve in her body was tense all the time, trying to cope with the pain. In late September of that year, Dana's husband was planning to take her to Switzerland for their first trip there. They had been looking forward to it for months. But with the pain, she knew she could not go and urged her husband to cancel in time to get at least some of their money refunded. For several months her friend Marty suggested that she should come to see me because I had helped Marty and Marty's mother with back and neck pain. Dana declined politely because it seemed such a crazy idea to have needles stuck all over her body.

With Switzerland slipping through her fingers, and some gentle persuasion from Marty, Dana came. After listening to what she had to say, I examined her. I told her that she had piriformis syndrome.

"What?" she asked.

"You have a tight muscle in your left butt cheek that causes pain and compresses on your sciatic nerve to give you the numbness in your left leg."

"Can you explain that to me?"

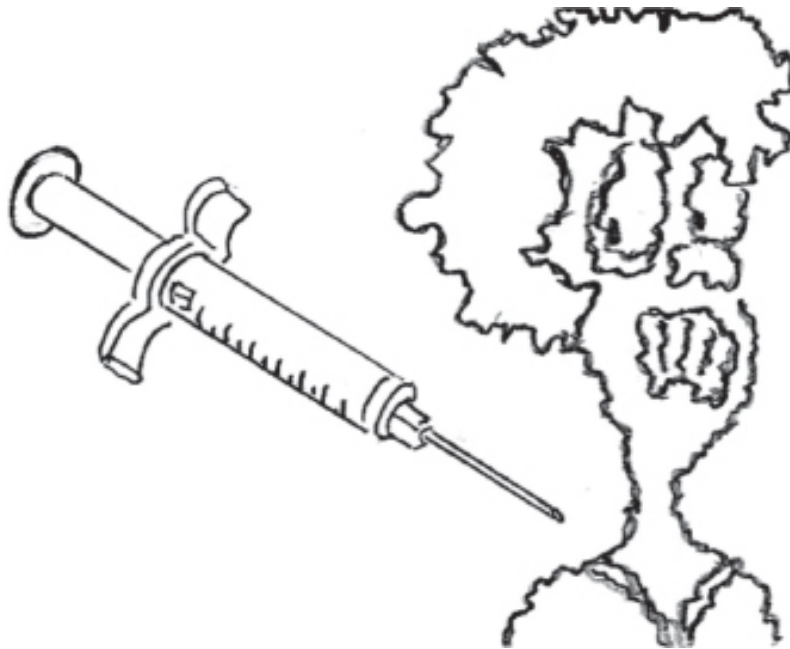
"Piriformis is a piece of muscle around the buttock area that sits on top of the sciatic nerve."

"Why is it painful?"

"Sometimes, for whatever reason, there are trigger points that develop in this muscle and cause pain. Sometimes there are fibrous bands within the muscle that are too tight and compress on the sciatic nerve. It produces not only pain from the muscle itself, but also neurological symptoms—numbness and/or tingling sensations in the area controlled by the sciatic nerve."

“Can you get rid of it without surgery?”

“Well,” I said to her, “sometimes poking the muscle with acupuncture needles may make the pain disappear. In more severe cases injection with a local anesthetic, such as Xylocaine mixed with steroid, into the muscle may be necessary to alleviate the pain and muscle tightness. I may be able to help you by injecting you with 1% Xylocaine alone.”



I explained to her how it worked and treated her. I guess by that time Dana hardly cared what anyone did to her, just as long as she got well. After the first visit, she made an appointment to come back. Two weeks later, she called and canceled it because she was fine when she walked out of the house, though she could hardly believe it at the time. Dana returned about three months later. She felt no pain in her buttock, but she had some pain in her lower back. I showed her how to stretch her back muscles, and she never needed me again.

Dana's piriformis muscle had something called myofascial trigger points, a cardinal finding in myofascial pain syndrome. Myofascial pain was a diagnosis made famous by my mentor, the late Dr. Janet Travell. Dr. Travell was the White House physician under President John F. Kennedy; she was the first woman to hold that post. The president called her a “medical genius” and said that her treatment had changed his life. She first treated the president in 1955 shortly after his second low back surgery. He was then the junior senator of Massachusetts. Dr. Travell treated the president by trigger point injections

to his low back with procaine—a local anesthetic agent used to relax the tight and painful lower back muscles. She also found that President Kennedy’s left leg was three-quarters of an inch shorter than his right, which, she thought, would perpetuate the trigger point formation in his back muscles. Dr. Travell recommended that he put an insert inside his left shoe to offset the length difference. She also suggested the president sit in a rocking chair to relieve the tension in the low back by keeping the muscles moving. The president’s oak rocker sparked a national revival of the old-fashioned rocking chair. She is the co-author of *Myofascial Pain and Dysfunction—The Trigger Point Manual*. Dr. Travell passed away on August 1, 1997 at the age of ninety-five.

9-2: HERBAL FORMULAS FOR MYOFASCIAL PAIN

TCM sees all kinds of muscle pain as myalgia. There are many causes of myalgia, and there are several herbal formulas used for treating myalgia.

Cinnamon and Hoelen Formula (Gui Zhi Fu Ling Wan 桂枝茯苓丸) is often used for myalgia from external injury

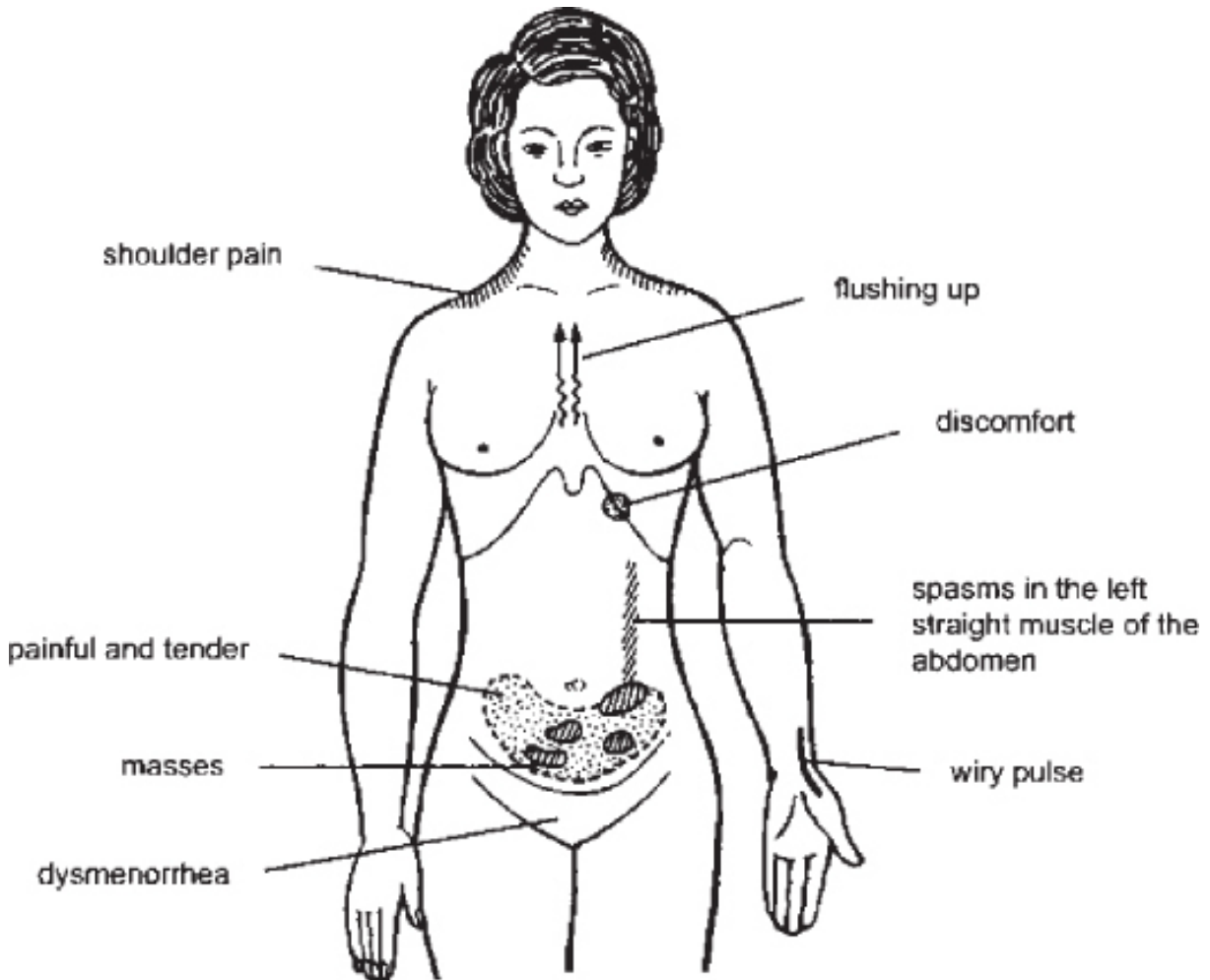
The ingredients of this formula are cinnamon, peony, hoelen, persica, and moutan.

Cinnamon and Hoelen Formula can be classified as a **Cinnamon and Peony Combination (Gui Zhi Jia Shao Yao Tang 桂枝加芍藥湯)** derivative. Jujube, ginger, and licorice are replaced by persica, moutan (which disperses stagnancy), and hoelen (a diuretic and sedative). Cinnamon subdues flushing up, and peony acts as an analgesic. This is an effective treatment for the pain and irritability caused by stagnant blood.

Indications

1. Stagnant blood.
2. Lower abdominal pains in patients of a slightly weak conformation.

3. Even without abdominal pain, this formula may be used when a patient's facial appearance indicates the presence of blood stagnation.
4. Facial flushing up.



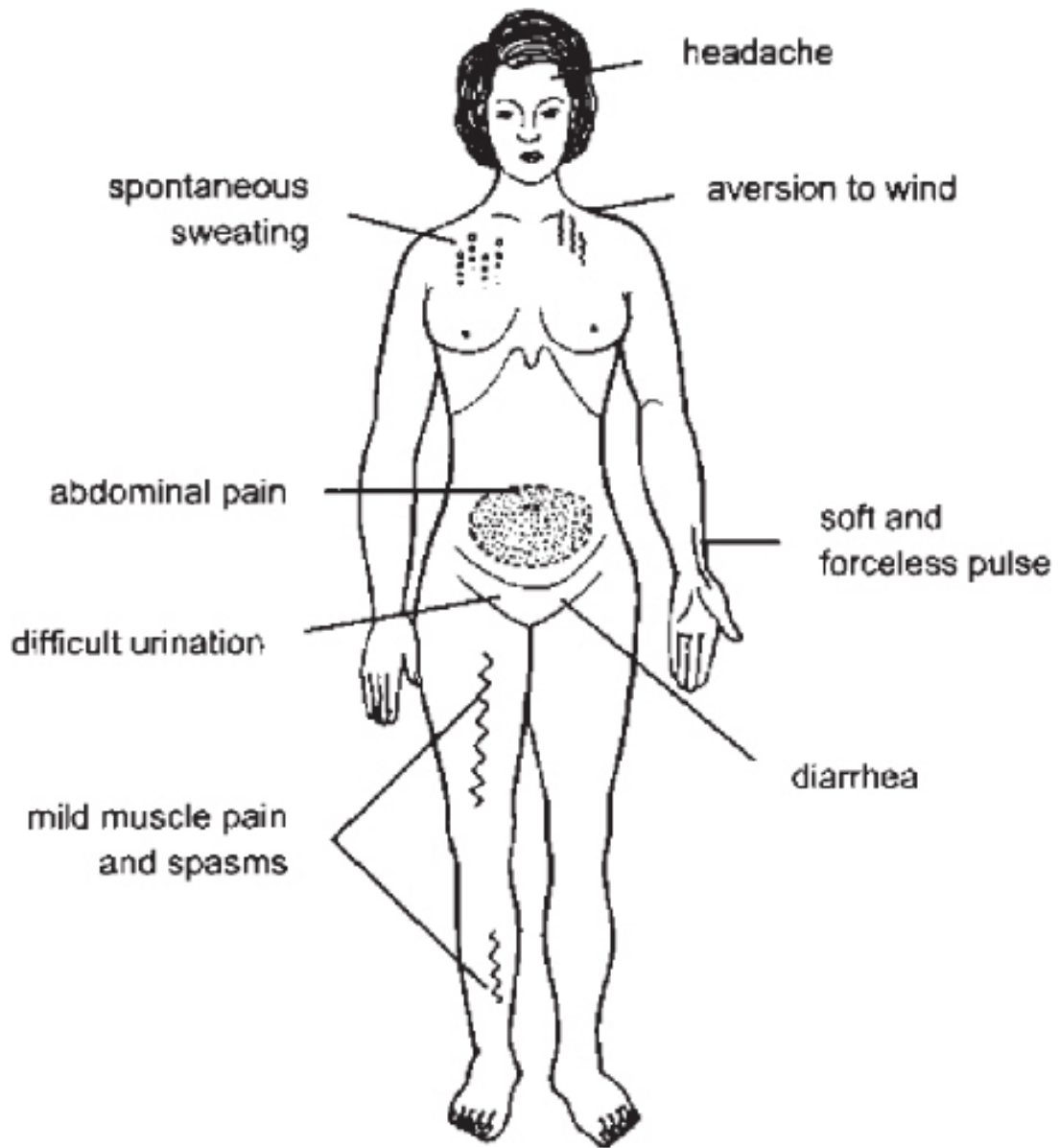
Cinnamon, Atractylodes, and Aconite Combination (Gui Zhi Jia Ling Zhu Fu Tang 桂枝加苓朮附湯)

The ingredients of this formula are cinnamon, peony, raw ginger, jujube, licorice, atractylodes, and aconite.

Indications

1. Chills

2. Weak and deficient constitution
3. Cold sweats
4. Moist tongue
5. Weak arterial pulse
6. Sensation of numbness
7. Difficulty flexing and stretching limbs
8. Rectus abdominis muscle spasms

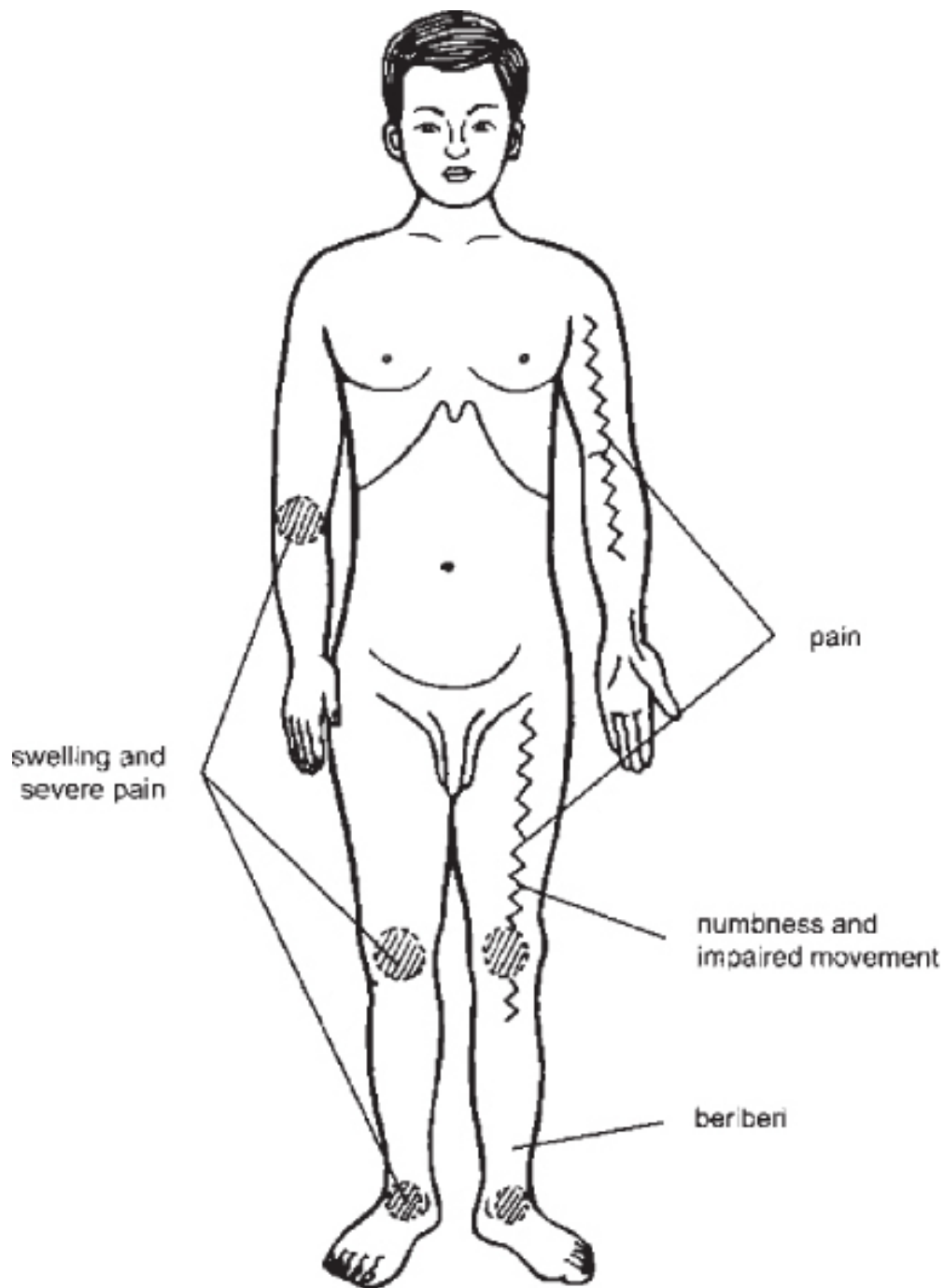


Coix Combination (Yi Yi Ren Tang 薏苡仁湯)

The components of this formula are coix, cinnamon, peony, tang-kuei, licorice, ma-huang, and atractylodes.

Indications

1. Joint pain with swelling and feverish sensation
2. Muscle pain
3. Arthritis
4. Neuralgia
5. Myalgia from arthritis and rheumatism
6. Bruised muscles with inflammation and joint stiffness



Ma-huang and Coix Combination (Ma Xing Yi Gan Tang 麻杏薏甘湯)

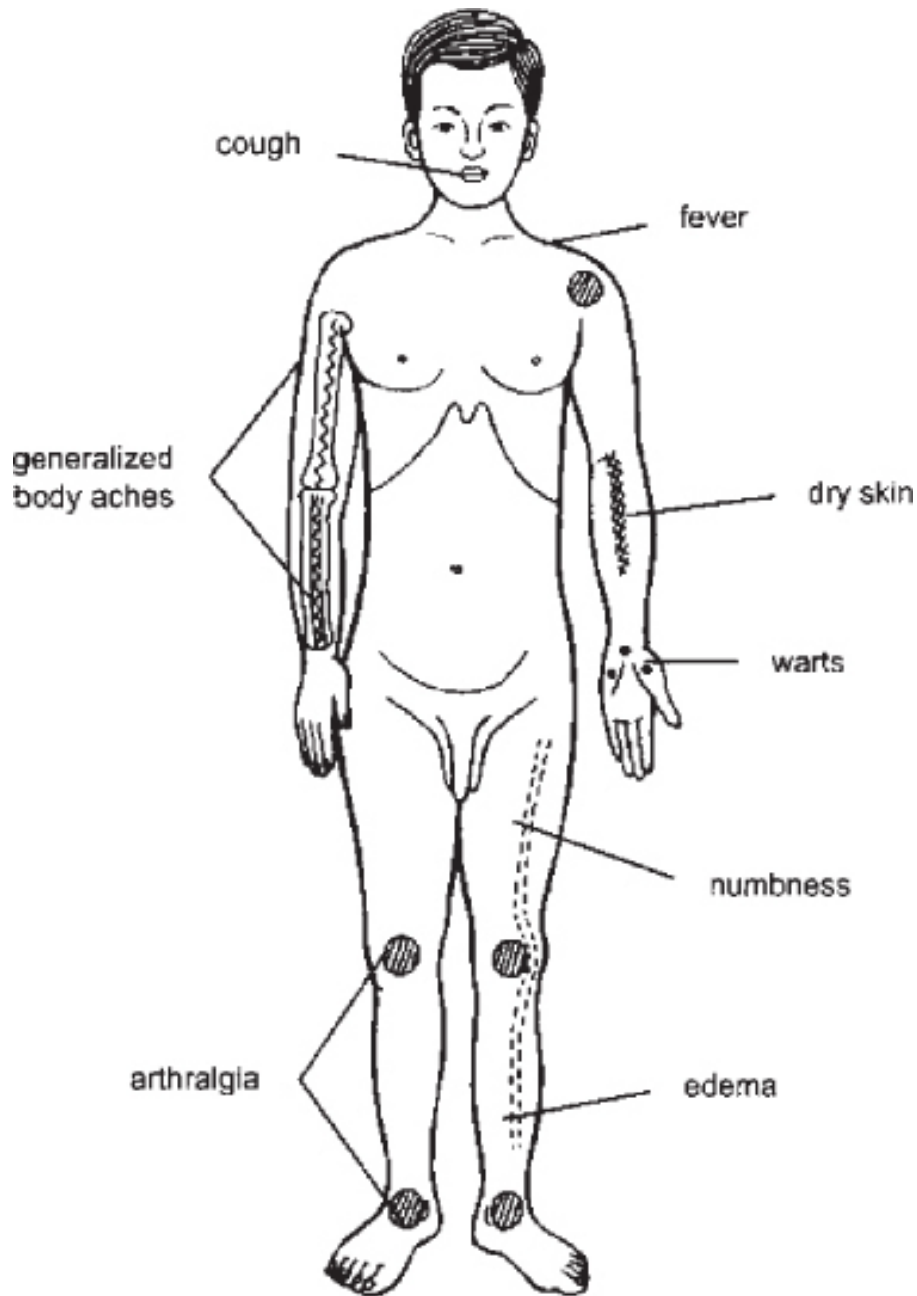
The ingredients of this formula are ma-huang, apricot seed, licorice, and coix. It is a derivative of **Ma-huang Combination (Ma Huang Tang 麻黃湯)**

) in which coix is substituted for cinnamon. It could also be considered a derivative of **Ma-huang and Apricot Seed Combination (Ma Xing Gan Shi Tang 麻杏甘石湯)** in which coix substitutes for gypsum.

Coix works with ma-huang and apricot seed to exert a dispersive action and to remove dampness and warts. Since it contains ma-huang, this formula is a dampness-removing agent and is unsuitable for those who perspire easily. One need not be too particular about a fever-chill diagnosis when administering this formula as it lacks peony, and its analgesic effects are not very strong.

Indications

1. Muscle and articular rheumatism when they are accompanied by shooting but mild pains all over the body.
2. Intense, acute, or chronic pain in muscles and joints, often accompanied by edema.
3. More pain when outside temperature is low.



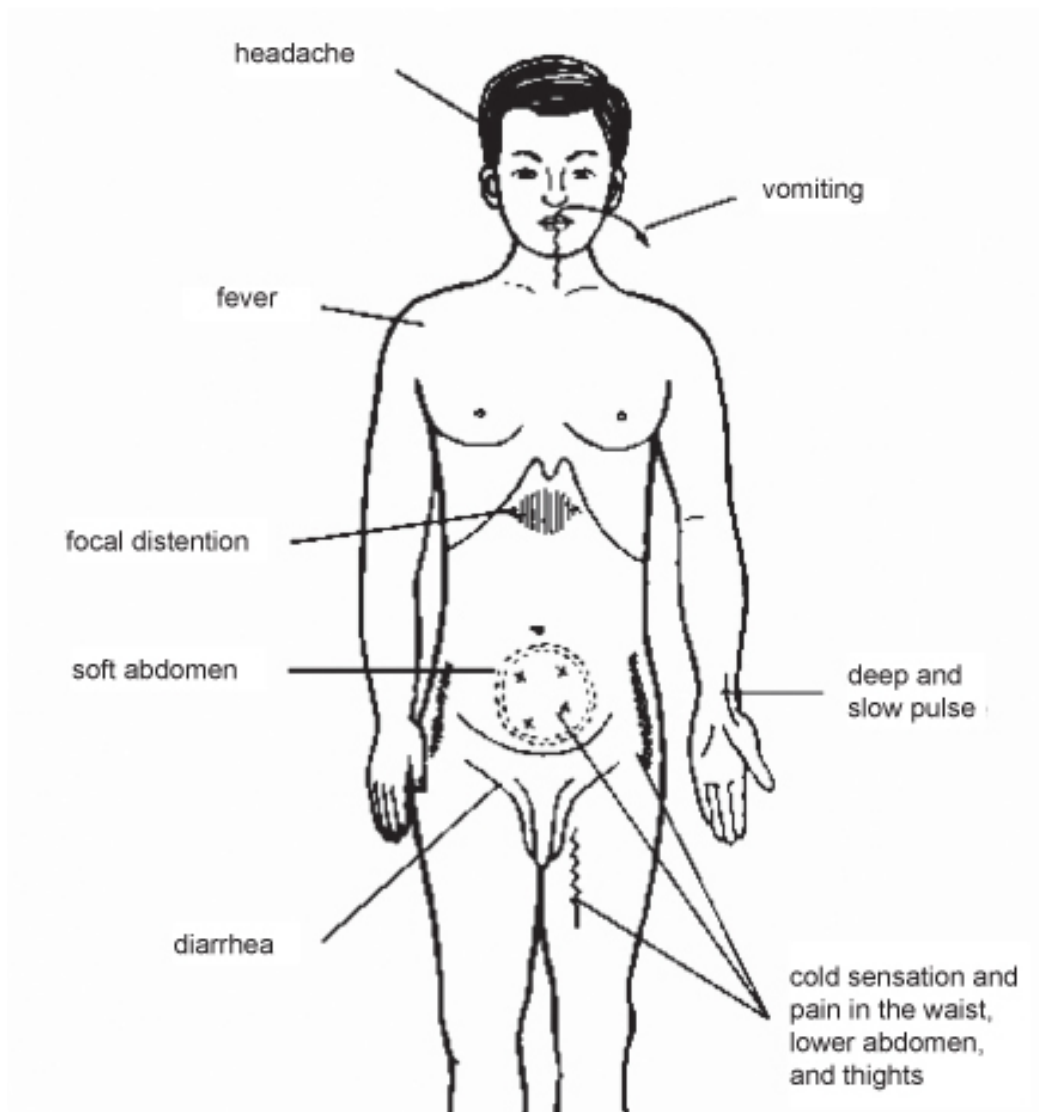
Tang-kuei and Magnolia Formula (Wu Ji San 五積散)

This formula contains cinnamon, peony, raw ginger, jujube, licorice, ma-huang, angelica, tang-kuei, cnidium, platycodon, citrus, pinellia, hoelen, atractylodes elba, atractylodes lancea, dry ginger, magnolia, and chih-shih. As a whole, this is a warming tonic and drying formula. It is effective in people with problems of excess dampness, chills, poor Qi, and blood and fluid

circulation. Peony and angelica also give it analgesic and pain-removing qualities.

Indications

1. Lower back pain and neuralgia
2. Abdominal aches and palpitations
3. Cold feet
4. Substernal swelling accompanied by an aversion to chills, vomiting, headache, fever, and increased urine
5. Myalgia due to chills in the lower body and fever in the upper body
6. Qi, blood, water, food, and phlegm all get stuck
7. Submerged and slow arterial pulse
8. Painful chills are the primary diagnostic sign
9. Gastroenteritis
10. Menstrual difficulties with chills



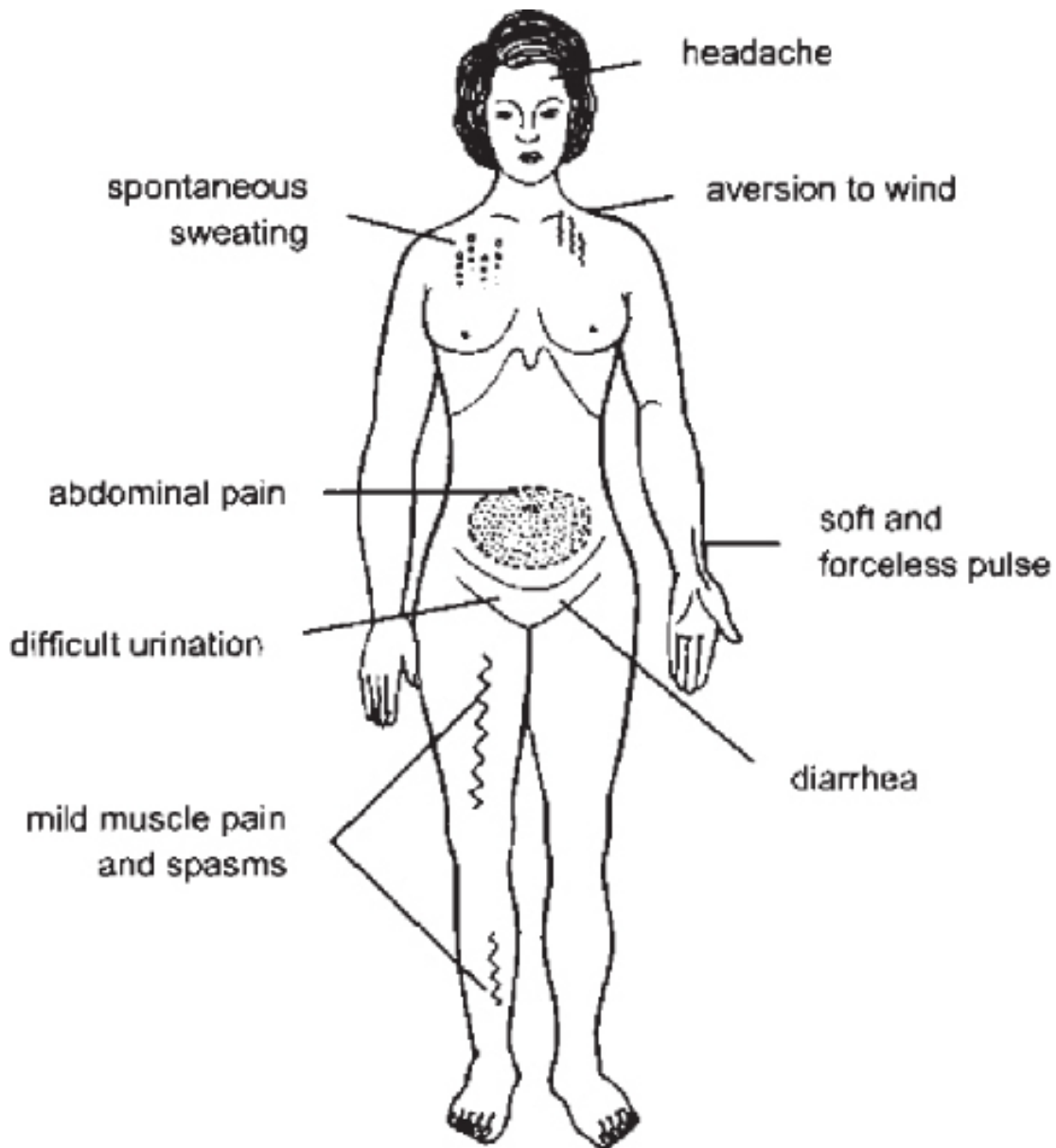
Cinnamon, Atractylodes, and Aconite Combination (Gui Zhi Jia Ling Zhu Fu Tang 桂枝加苓朮附湯)

The ingredients of the formula are cinnamon, peony, raw ginger, jujube, licorice, atractylodes, and aconite.

Indications

1. Muscle pain, palpitations, and oliguria occur at the same time
2. Rheumatism and neuralgia in weak-chill conformation individuals with

perspire easily



Peony and Licorice Combination (Shao Yao Gan Cao Tang 芍藥甘草湯)

The ingredients of this formula are peony and licorice. Peony functions to relieve muscle cramping, and in combination with licorice's mollifying action brings about analgesic and spasmolytic effects. Both herbs are tonic and moistening in nature, and are used in weak conformation patients with a

tendency toward symptoms of dryness. This formula can be broadly used as an analgesic or spasmolytic in patients of heat, chill, strong, or weak conformations.

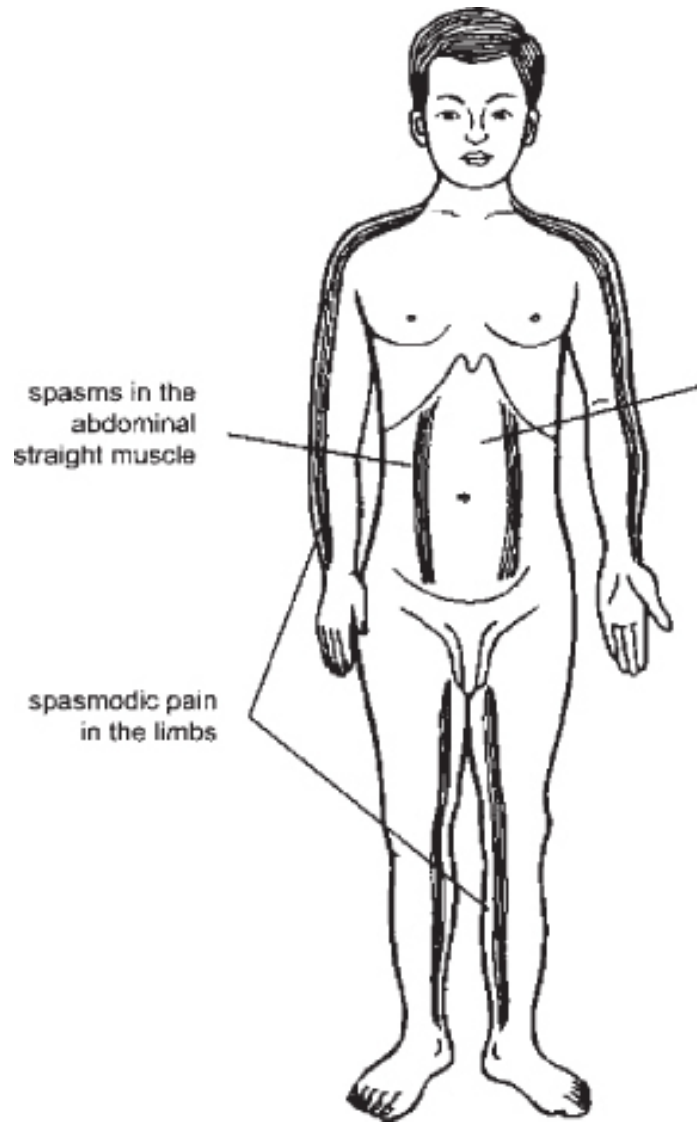
Indications

1. Aches of various kinds: abdominal, in the limbs, from urinary tract stones or aching due to overwork
2. Onset of gastric spasms, cholelithiasis, and intercostal neuralgia

Adding aconite to this formula produces **Peony, Licorice, and Aconite Combination (Shao Yao Gan Cao Fu Zi Tang 芍藥甘草附子湯)**. Aconite is a hot herb that is also an analgesic. This formula is used in patients with **Peony and Licorice Combination** conformations who have chills. It is especially suitable for chills that cause muscle spasms and aches.

Indications

1. Acute muscle spasms, aches and pains of various kinds, such as from a fall, a twist, urinary tract stones, gallstones, or overwork
2. Pain following excessive exercise, dysmenorrhea, kidney stones, or biliary calculi
3. Post-herpes neuralgia, headaches, and trigeminal neuralgia
4. Can be broadly used as an analgesic or muscle relaxant in patients of heat, chill, strong, or weak conformations





CHAPTER 10

Intervertebral Disc Herniation



10-1: LUMBAR DISC HERNIATION

KEYWORDS

1. Disc degeneration (ICD-10 Code **M51.36**)
2. Lumbar disc herniation (ICD-10 Code **M51.26**)

October 1997

Bobby slipped and fell on the kitchen floor in 1983. He was sixty-one years young at the time. He was taken to a local hospital emergency room by an ambulance shortly after it happened. X-rays taken at the hospital showed no broken bones, but his low back and right hip were painful and could barely be touched. The doctor told him that he had a bad bruise on his right hip, and he had pulled muscles in his lower back. He was given prescriptions for pain

and was instructed to rest at home. He did not feel much better. Two weeks later he went to a bone doctor and had an MRI. The result showed a disc bulged in between the fourth and the fifth lumbar vertebrae. It was not a big deal, but he decided to go to a back specialist. By then his back pain was persistent and radiated down to his right buttock, leg, and big toe. In addition, his right knee would buckle from time to time when he was walking. He had difficulty moving around and felt weak in his right ankle. His right buttock always seemed tender to the touch, but at the same time, it felt numb.

The back specialist thought he had a pinched nerve and recommended epidural steroid injections to calm down the nerve and inflammation. He had a total of three shots in a four-week span. He had significant pain relief from the shots, but the good days lasted for only about two months. He was sent for a lumbar myelogram and a CT scan to have a better look at the spine. He also had an NCS/EMG to check his nerve and muscle function. The result of the lumbar myelogram showed a slight lack of filling to the nerve root coming out in between his fourth and fifth lumbar vertebrae. The CT scan showed a slight bulging of the disc between the fourth and the fifth spine toward the right side. There was no apparent disc rupture. The NCS/EMG suggested a pinched nerve root on the right side at the level between the fourth and the fifth vertebrae. He was diagnosed with L5 radiculopathy on the right side. His doctor suggested Bobby have a lumbar discectomy to have the disc between the fourth and fifth vertebrae partially removed. He went to another spine specialist who concurred with the findings and the plans. He was depressed, so the doctor prescribed an antidepressant. Unfortunately, the medication made his heart go wild and made him disoriented.

In December of 1984 Bobby underwent not only a lumbar discectomy but also a laminectomy with medial facetectomy and foraminotomy at the right L4–L5 level; his problems were much worse than the tests had shown. After the surgery he felt much less pain in his lower back and right leg. The feelings in his right leg had also improved. He started to exercise. He was doing very well for about five months then his condition worsened. By the time he saw the surgeon, he had decreased sensations in his entire right leg and buttock. He also had decreased sensations in the right foot and toes. After the examination, the doctor found no objective evidence to suggest why he should have such complaints. The doctor recommended that he become involved in a more intensive exercise program for his back. The doctor felt that Bobby was fully capable of returning to his usual functions, but Bobby also had heart disease. So the doctor suggested that he should see a cardiologist. Bobby did not like

the outcome of his treatment, so he went to another back specialist for another opinion. This doctor took a different approach and suggested less aggressive exercises, starting physiotherapy, and beginning to see a therapist. Bobby still had the same problems three months after such treatments, so he went back to the original doctor. At that time, in addition to the pain, he was also experiencing more and more numbness and tingly sensations in the right foot and toes. He had muscle spasms in the right leg, and he had difficulty bending at the waist. By then his exercise was limited to some simple stretching and walking. He took Tylenol #3 intermittently to assist in pain control.

Bobby had another MRI study of the lumbar spine in November of 1995 because he did not feel well. The results did not show any evidence of new disc herniation, spinal stenosis, or significant pinched nerve root; they only showed the postoperative changes with some epidural fibrosis around the thecal sac, the right L5 nerve root, and the vertebra at the lumbosacral junction. The doctor who operated on him in 1984 felt that a spinal fusion at the L4–L5 level would be helpful in relieving his pain. The doctor also suggested that Bobby might want to see another back specialist. He did. The new doctor told him that his lumbar vertebrae were not stable, but recommended no further surgery except an aggressive physical therapy regimen. The doctor told him that if he did not have significant symptomatic improvement over three to four weeks, he would recommend a spinal injection guided by a fluoroscope, for both diagnostic and therapeutic purposes. If there were still no improvement, he would then recommend lumbar spinal fusion.

Bobby had the injection and received aggressive physical therapy for three months. During that time he had intermittent low back and leg pain, tenderness at the right hip, with muscle spasms in his buttock. He didn't feel too bad, but there was not much gained from the treatments either; he was unable to walk without pain, unable to tolerate much physical activity, even simple positional changes when he was sitting in a chair would create a lot of pain. He went back to his first doctor because it was the easiest place for him to get an appointment. The doctor felt that Bobby had reached the maximum medical improvement and told Bobby that he was not a candidate for another surgery because he had a bad heart. So he went to another back surgeon. That doctor suggested a discogram to see what was going on with the discs in his lumbar spine. It was done in December 1996. The results were positive, and his pain was reproduced at the L5–S1 level during the procedure. The doctor then suggested a trial of spinal cast to identify if he was a candidate for lumbar fusion. He had some pain relief with the cast and was able to stand and sit

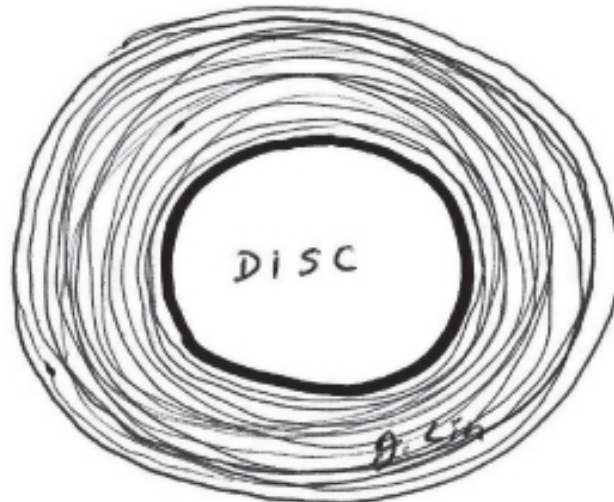
considerably longer. He was also able to move around easier after getting into the cast. The doctor concluded that spinal instability was responsible for a significant portion of his back and leg pain. The doctor felt that a solid lumbar spinal fusion was likely to help. The suggestion was later concurred by the first surgeon who operated on him, except that first surgeon was worried about Bobby's heart—Bobby had hypertension and had had heart surgery before he turned fifty. After an approval from the cardiologist, Bobby had the lumbar spinal fusion surgery in early 1997.

Bobby felt well for about eight months then all hell broke loose. By then, in addition to pain in the back, he also had trouble sleeping and was so depressed that he went to a clinical psychologist who specialized in pain management. The psychologist told him that he had a reactive depression and a generalized anxiety problem due to the chronic low back pain and physical restrictions. He received psychotherapy, biofeedback, and pain management training for a good eight months with minimal improvement, so the psychologist suggested he see a pain specialist in Gaithersburg.

10-2: DISC, RADICULOPATHY, AND NEURALGIA

ABOUT INTERVERTEBRAL DISC

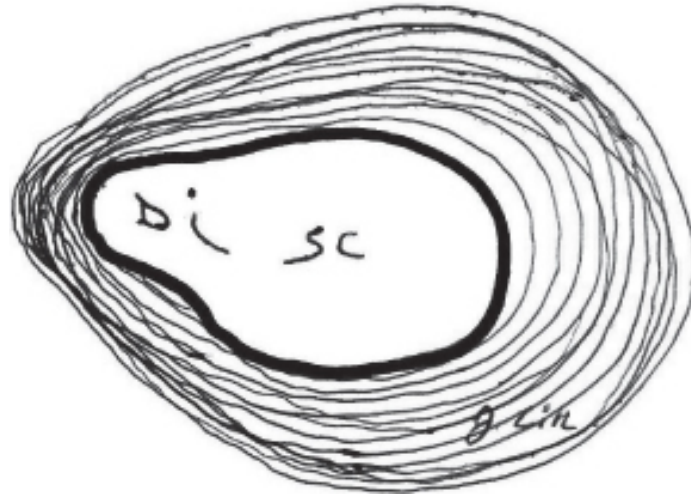
1. A disc is a disk that looks like a discus.
2. An intervertebral disc is like a cushion that sits in between two adjacent vertebrae throughout the entire spinal column, from neck to tail. It looks like a miniature silicone breast implant sitting in a bird's nest.



3. A normal intervertebral disc has two components: the outer fibrous ring that looks like a bird's nest is called the annulus fibrosus, the inner gel-like material that looks like a silicone breast implant is called the nucleus pulposus.
4. The fibrous ring is pain sensitive because it has pain nerve fibers in it while the nucleus pulposus is not because there are no pain nerves in the center. When we are born, the discs are soft, elastic, and are round like balls. As we grow more mature and start walking on our feet, the discs get squashed by our body weight and become flattened like overcooked pancakes—flattened, hard, dry, and ugly.
5. The intervertebral discs in the sacrum and tailbone areas are calcified and are fused with the vertebrae.

A BULGING DISC

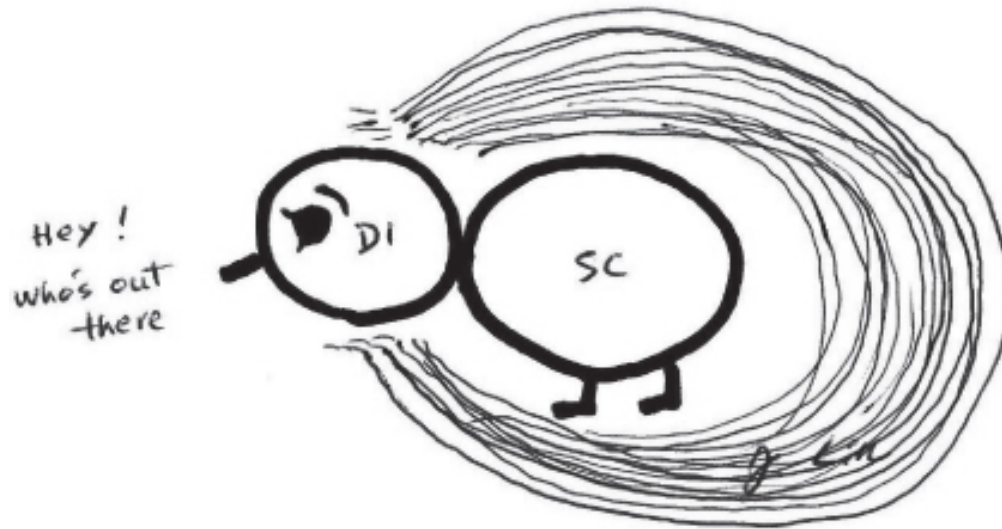
1. When excessive pressure is applied to the spine, such as when lifting heavy weight, the disc is compressed, and the inner nucleus is forced outward and bulges against the outer annulus fibrosus. A bulging intervertebral disc is a disc that got pushed or squeezed out of shape.
2. A bulging intervertebral disc, even if it were in the low back, is in general not a big deal, because the inner nucleus may not produce enough pressure on the outer annulus to cause any tear or pain (sort of like engaged but not yet married).



3. For that reason a bulging intervertebral disc in the low back may or may not cause low back pain.
4. The treatment for a bulging intervertebra disc is usually nothing or simple posture exercises, symptomatic medications, or to apply heat or cold.

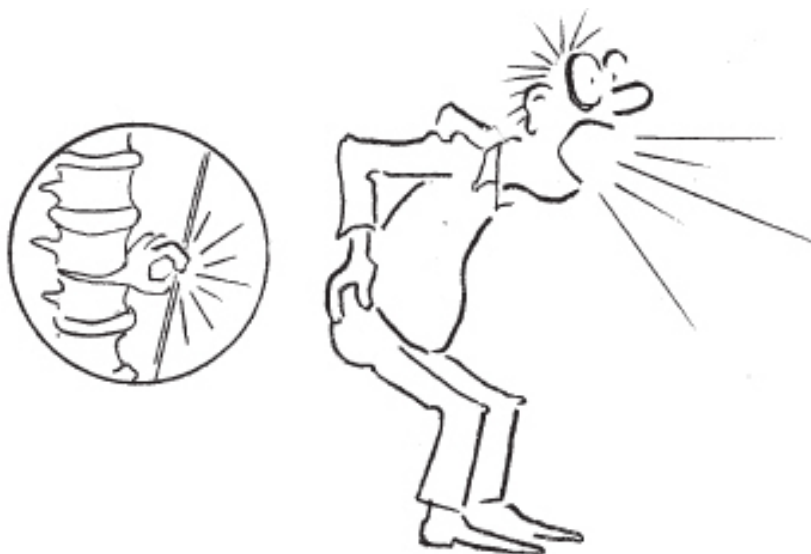
HERNIATED DISC

1. When the pressure on the inside of the intervertebral disc is beyond what the surrounding outer layer can handle, such as lifting a heavy weight, the centrally located nucleus pulposus may move forward, backward, sideways and bust the outer annulus fibrosis open, becoming a herniated disc.
2. When that happens, the pain receptors (like an antenna or a radar) sense the signal; that signal is then transmitted by the nerves to the brain, causing the person to feel pain and other symptoms in the low back.



NERVE ROOTS

1. Behind each intervertebral disc is a pair of spinal nerve roots—one on each side, extending out of the spinal cord and exiting through the bony hole (neuroforamen) of the two vertebrae.
2. Each nerve root has two components: a motor nerve to control our muscles for movement, and a sensory nerve for us to feel.
3. When a nerve root is compressed or irritated, by a herniated disc, for example, it is called a pinched nerve or radiculopathy.



SYMPTOMS OF A HERNIATED DISC IN THE LOW BACK

1. May have no symptom at all.
2. Low back pain with or without an electric shock feeling in one or both sides of the buttocks, thigh, leg, or foot.
3. The symptoms generally occur after a bowel movement, sneezing, coughing, bending, picking up something from the floor, or simply changing a body position, such as standing up from sitting.
4. The symptoms may get more intense when weight is put on one leg.

SYMPTOMS OF A PINCHED L5 NERVE ROOT

1. Often as a result of a herniated disc in between the fourth and the fifth lumbar vertebrae.
2. May or may not have pain.
3. Often feel numbness and/or tingling sensations in outer part of the leg and big toe.
4. May have foot drop and difficulty walking on the heel.

SYMPTOMS OF A PINCHED S1 NERVE ROOT

1. Often as a result of a herniated disc in between the fifth lumbar and the first sacral vertebrae.
2. May or may not have pain.
3. Often feel numbness and/or tingling sensations in the inner part of the heel and outer edge of the foot.
4. May lose ankle jerk reflex.
5. May have weakness in the calf muscle with difficulty in pushing-off during walking.
6. May have difficulty in walking on tippy-toes.

SCIATICA

1. Sciatica simply means low back pain that radiates down the buttock(thigh(s), leg(s), or foot/feet.
2. Often it is due to a herniated disc in the low back or a sciatic nerve that compressed or irritated in the buttocks.
3. When the diameter of the spinal canal in the low back is narrowed, say by arthritis or spondylolisthesis, it may also cause sciatica.

INTERMITTENT CLAUDICATION

1. Leg pain due to blood circulation problems.
2. May produce muscle cramp and pain that is similar to sciatica.
3. The main difference between intermittent claudication and sciatica is that sciatica has neurological deficits but with a normal arterial pulse in the leg and feet; intermittent claudication is opposite. In addition, rest almost always relieves the symptoms of intermittent claudication, but may not help sciatica at all.

CAUDA EQUINA

1. Cauda equina is a bunch of nerve roots coming out of the lowest portion of the spinal cord. Because it looks like a horsetail, it is called cauda equina.



2. The nerve roots of cauda equina control the bowel and bladder functions.
3. Sometimes a herniated disc, spinal degeneration, or spinal canal narrowing can compress the cauda equina.

can compress these nerve roots, causing urinary retention or bowel urinary incontinence that requires emergency low back surgery.

10-3: MA AND MU

KEYWORDS

1. Ma-Mu of the leg—lumbar radiculopathy (ICD-10 Code **M54.16**)
2. Ma-Mu of the limbs—peripheral neuropathy (ICD-10 Code **G90.09**)

October 1997

I reviewed Bobby's extensive medical records before I saw him.

"My wife made it very clear that if I had another back surgery, she would surely leave me!" said Bobby, before I had a chance to say anything. He had swayed back and had two visible surgical scars. The scars measured about 3" and 4" long, respectively, with keloid formations that were sensitive to touch.

"Can the scars cause my back pain?" he asked.

"You bet your sweet boots!" I said.

Bobby had tender muscle spasms in the lower thoracic and lumbar muscles. The side muscles around his waist, buttock, and hamstrings were all tender to touch, and I didn't have to push hard to make him scream. All his trunk muscles were very tight and felt like strands of hemp ropes inside. The straight-leg-raising test to check if he had sciatica was positive on both sides. His low back mobility was about 50% of normal. The lordotic curve, usually seen on a normal lumbar spine, was incompletely reversed on active lower back extension from a flexed position, which suggested that Bobby had a tight and/or painful low back along with tight hamstrings.

Bobby had difficulty doing sit-ups with either his knees straight or bent. He also had difficulty holding his feet up when he was lying on his back, raising his head and shoulders up, or raising his heels up when he was lying on stomach, which suggested that he had weak and/or painful trunk muscles. His abdomen was tight and tender to the touch, especially on the left side at around the belly button; he was guarded when I was gently pushing his abdomen. It was most surprising to me that he had that many trigger points in his abdominal muscles. These trigger points sent the referred pain from his belly to his low back when I got a hold of them and squeezed. Other than

some weakness in his right ankle/foot muscles, Bobby seemed to have good overall motor functions. The circumference of his right calf, measured at 12 cm below the kneecap, was 37.5 cm, and that of the left calf was 38.0 cm, not that significant of a difference between the two sides. Deep tendon reflexes and peripheral pulses were full and symmetrical in both of his legs. He had good nutrition and facial complexion. There was nothing special about his tongue for me to pick up on, except his blood pressure was a little high: 154/90 mmHg with blood pressure medication.

My initial impression was that Bobby had sustained a lower back and right hip injury from a fall. He had a herniated disc (and later had another one at a lower level), a pinched nerve (and later had another one at a lower level), muscle strain, hematomas, and lots of pain. He had developed reactive depression that was most likely a result of the chronic low back pain. He had two spinal surgeries, and his lumbar spine had been fused. His spine seemed to be stable, at least from his X-rays and according to the surgeon. He had no more discs between his L4–L5 and L5–S1 spine to be herniated because they were thrown away. There were no more pinched nerves shown from the diagnostic tests, but he felt he did and I believed him. His muscles were tight, tender, and were useless. The odd thing was that the muscles in his abdomen actually created pain in his low back—a referred pain!

“Why won’t my pain go away?” asked Bobby, as many of my patients did.

“I wish I knew,” I said to him, just like I often said to my patients.

“What about my numbness and the tingling feeling in my legs?”

“They are all yours!”

“Are they going to go away?”

“Sorry, I wish I knew!”

NUMBNESS AND TINGLING

1. In conventional medicine, numbness or loss of feeling is a nervous system phenomenon; the nerve impulse is interrupted somewhere between the brain and the sensory receptors.
2. In TCM, numbness actually has two separate components: “Ma” (麻) and “Mu” (木). “Ma” is equivalent to a pins and needles sensation, sort of like insects crawling on the skin. “Mu,” or “woodenness,” could mean complete or partial loss of sensation; the skin feels thick and insensitive.

3. Numbness, according to TCM theory, is most likely due to Qi and/or blood deficiency.

I did acupuncture and trigger point injections on Bobby once a week for a good six weeks, focusing on his abdominals, lumbar paraspinals, and glutei, mainly for pain relief. During that time, other than his muscle, disc, nerve, bone and joint problems, I found a 5 cm by 4 cm abdominal aortic aneurysm with its epicenter at the level of the L3–L4 disc space in his belly.

AORTIC ANEURYSM

1. An aortic aneurysm is a localized dilation, like a balloon, of the large and powerful artery coming out of the heart called the aorta.
2. About 70–75% of aortic aneurysms are located in the abdominal area.
3. If an aneurysm is big enough, or if the person is skinny enough, the arterial pulse can be felt jumping up and down around on the belly following the heartbeats when the person lies down.
4. The most common cause of an aortic aneurysm is arteriosclerosis.
5. Trauma or inflammation to the artery, syphilis, or congenital connective tissue disorders, such as Marfan's syndrome, can also cause aortic aneurysms.
6. Hypertension and smoking often make the problem worse.
7. A small aortic aneurysm may not do anything bad, except perhaps some referred low back pain, usually a mild but steady, deep, and dull ache.
8. If the aneurysm becomes so big and ruptures, or “dissects,” the wall of the aorta, the pain will be gone because the person will be in shock and in medical emergency.

Bobby also had a probable arachnoiditis—inflammation of the membranes that surround the spinal cord.

10-4: HERBAL FORMULAS FOR LUMBAR RADICULOPATHY

KEY FORMULAS

1. **Cinnamon and Hoelen Formula (Gui Zhi Fu Ling Wan 桂枝茯苓丸)**
2. **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承湯)**
3. **Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經血湯)**

The terms radiculopathy, neuralgia, and neuropathy are not found in TCM textbooks. In *Huang Di Nei Jing* (Yellow Emperor's Internal Classic), the discussion of paralysis in "Simple Questions" divides it into moving paralysis, aching paralysis, and stationary paralysis, according to its proportions of wind, cold, and dampness pathogens.

NERVE PROBLEMS ACCORDING TO TCM

1. When wind dominates, pain moves about in the body, resulting in moving (wind) paralysis.
2. When cold dominates, blood circulation is impeded, causing local chill and fixed pains, resulting in pain (cold) paralysis.
3. When dampness dominates, extreme fatigue, aches, and numbness result in stationary (dampness) paralysis.
4. When pain becomes chronic, blood stagnancy or toxemia is often the probable cause.

Integrating these concepts, TCM treats radiculopathy, neuralgia, and neuropathy by eliminating wind, dispersing cold, discharging dampness, enlivening blood, and resolving stagnancy. This approach is different from the etiological and therapeutic approaches of conventional medicine, and, therefore, it may serve as a complementary therapy.

Combining the approaches of conventional medicine with TCM may very well provide a road toward a superior strategy for nerve problems.

HERBAL TREATMENT FOR LUMBAR RADICULOPATHY

1. Circulation disturbances—due to edema around the nerves, as in contusio

induced neuralgia, use stagnant-blood dispersing formulas.

2. Generally healthy people with strong muscle tone, up-flush predispositions, and resistance to pain upon pressing in the lower abdomen—use **Cinnamon and Hoelen Formula (Gui Zhi Fu Ling Wan 桂枝茯苓丸)**.
3. Severe symptoms with frequent constipation—use **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)**.
4. Chronic pain, lumbar radiculopathy, neuralgia, or sciatica—use **Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經活血湯)**.

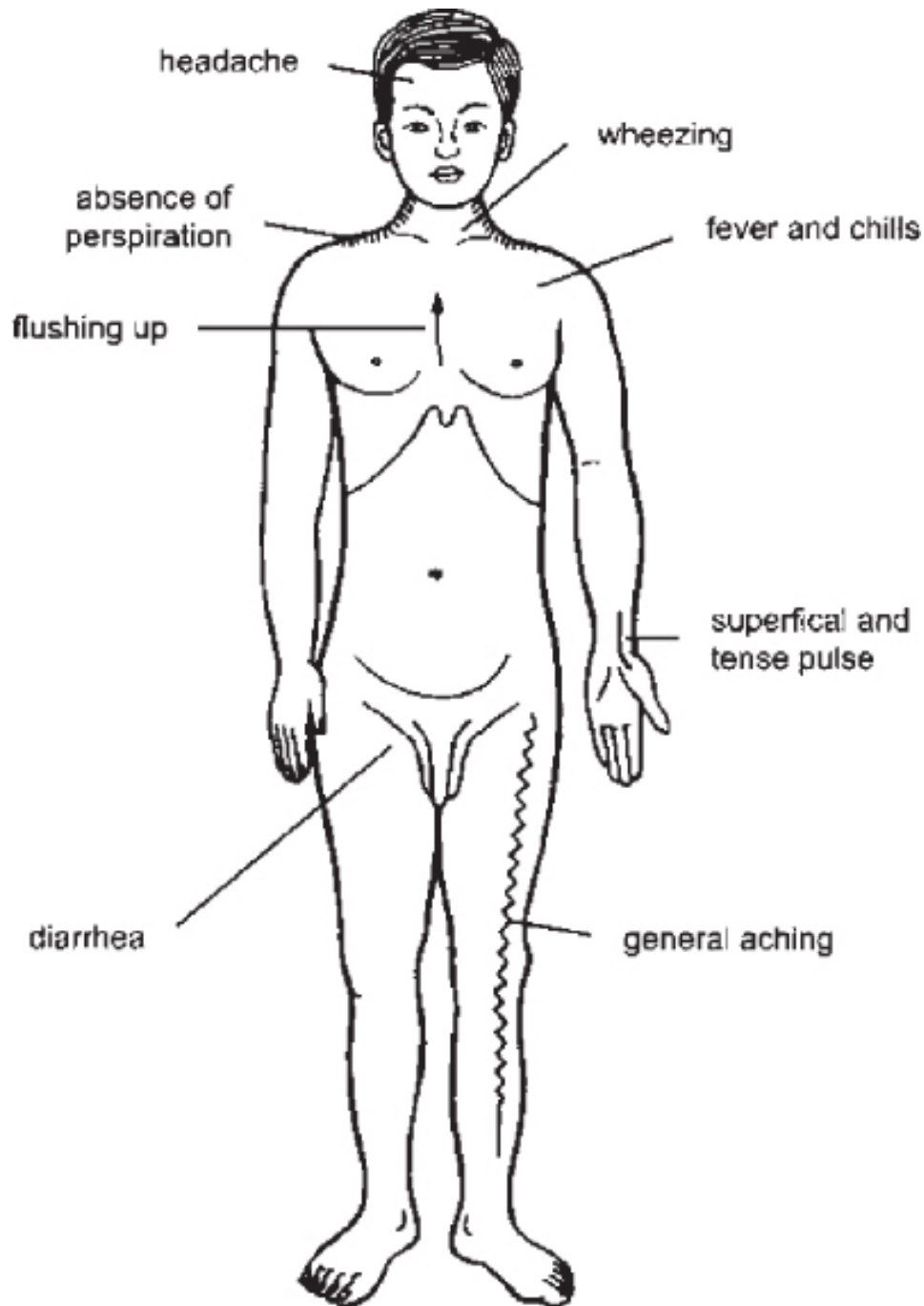
COMMONLY USED HERBAL FORMULAS FOR LUMBAR RADICULOPATHY

Pueraria Combination (Ge Gen Tang 葛根湯)

The ingredients of this formula are ma-huang, pueraria, cinnamon, peony, licorice, jujube, and raw ginger.

Indications

1. For the initial stages of neuralgia
2. Reduces chronic rheumatic pain with or without paralysis

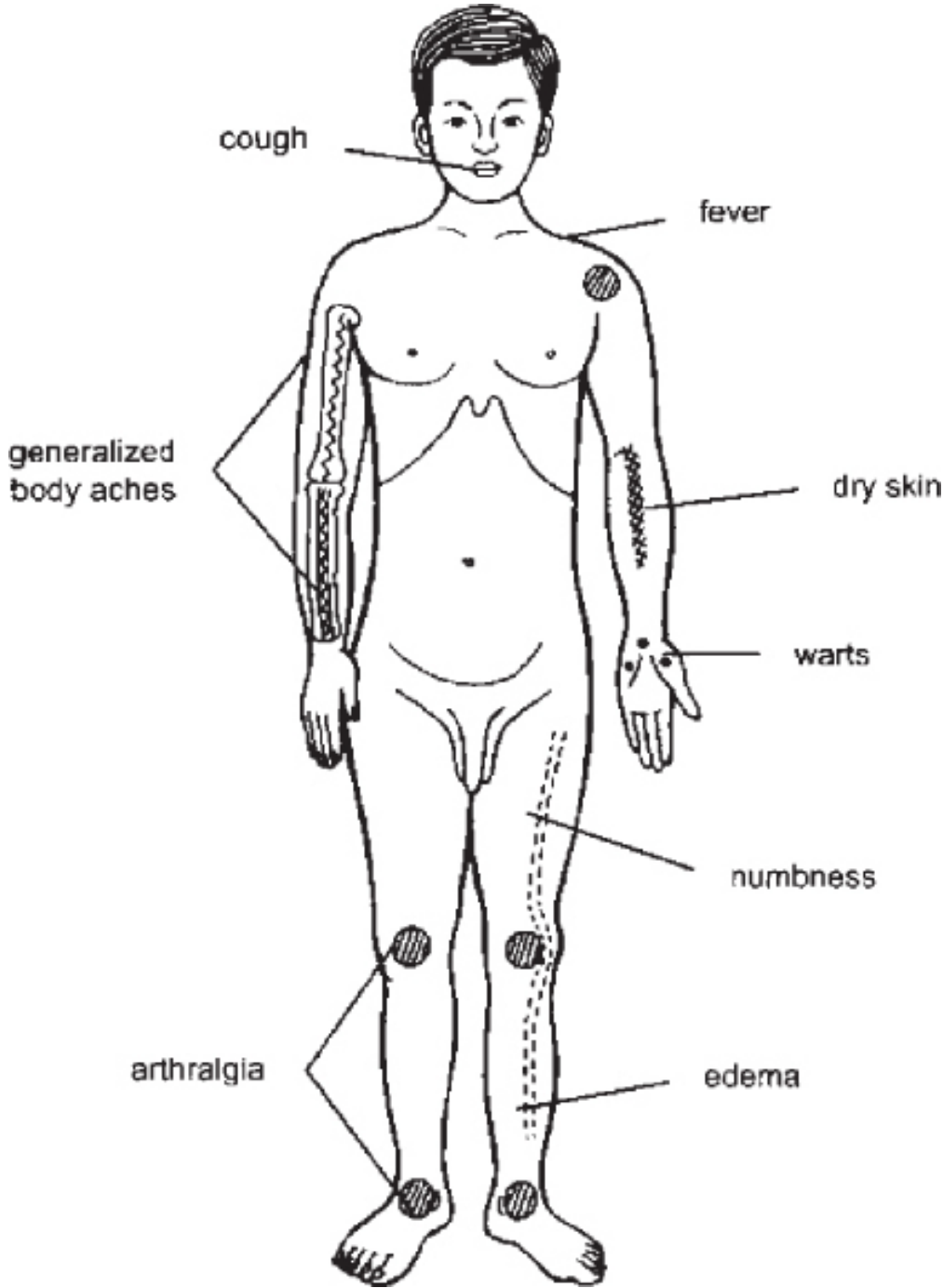


Ma-huang and Coix Combination (Ma Xing Yi Gan Tang 麻杏薏甘湯)

The ingredients of this formula are ma-huang, apricot seed, licorice, and coix.

Indications

- 1. Chronic rheumatic pain
- 2. Neuralgia
- 3. Muscle pain

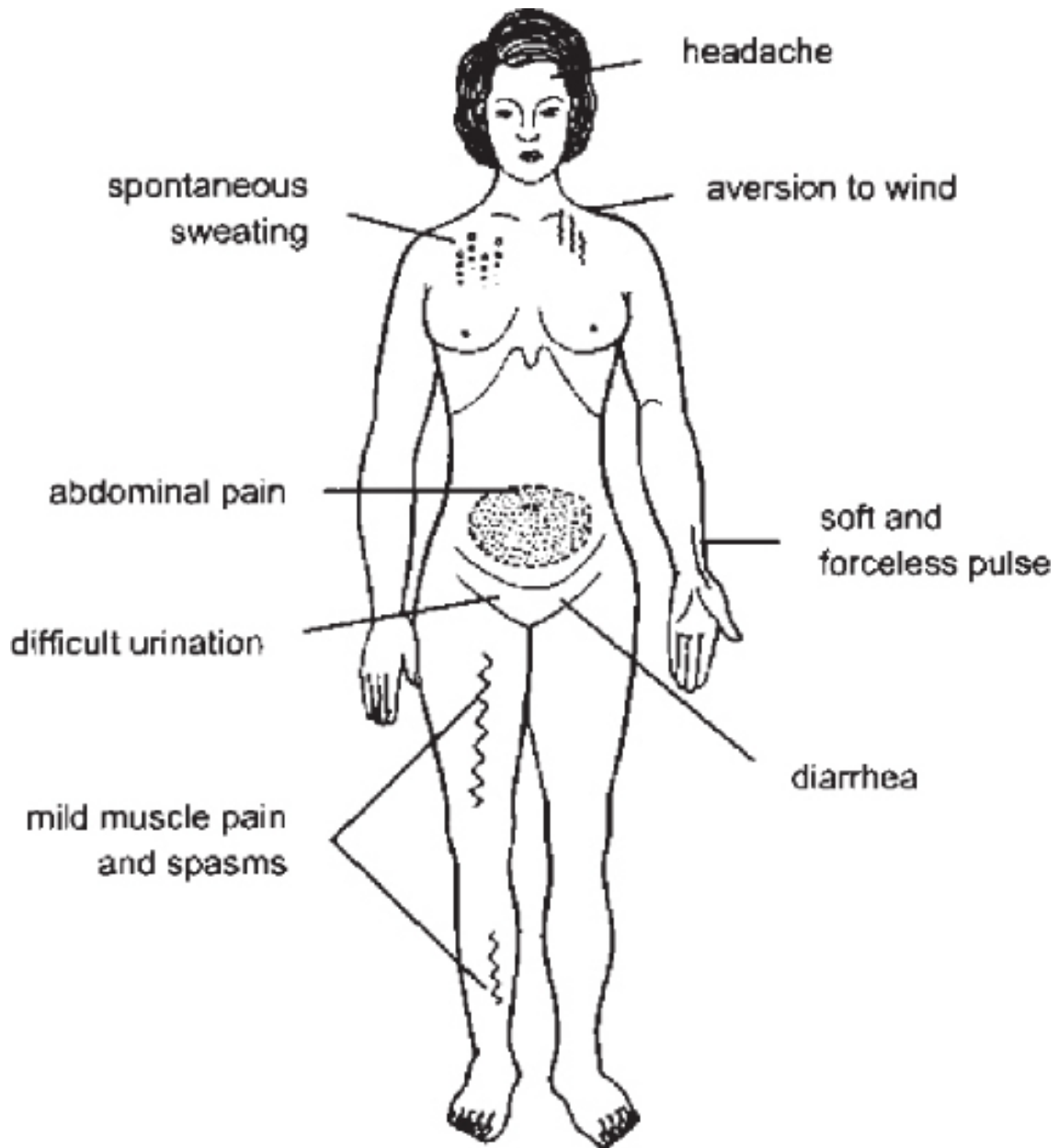


Cinnamon and Atractylodes Combination (Gui Zhi Jia Ling Zhu Fu Tang 桂枝加苓朮附湯)

The ingredients of this formula are cinnamon, peony, raw ginger, jujube, licorice, atractylodes, and aconite.

Indications

1. Weakness
2. Chills
3. Easily perspires
4. Oliguria or frequent urination
5. Painful swelling of joints
6. Neuralgia
7. Poor mobility

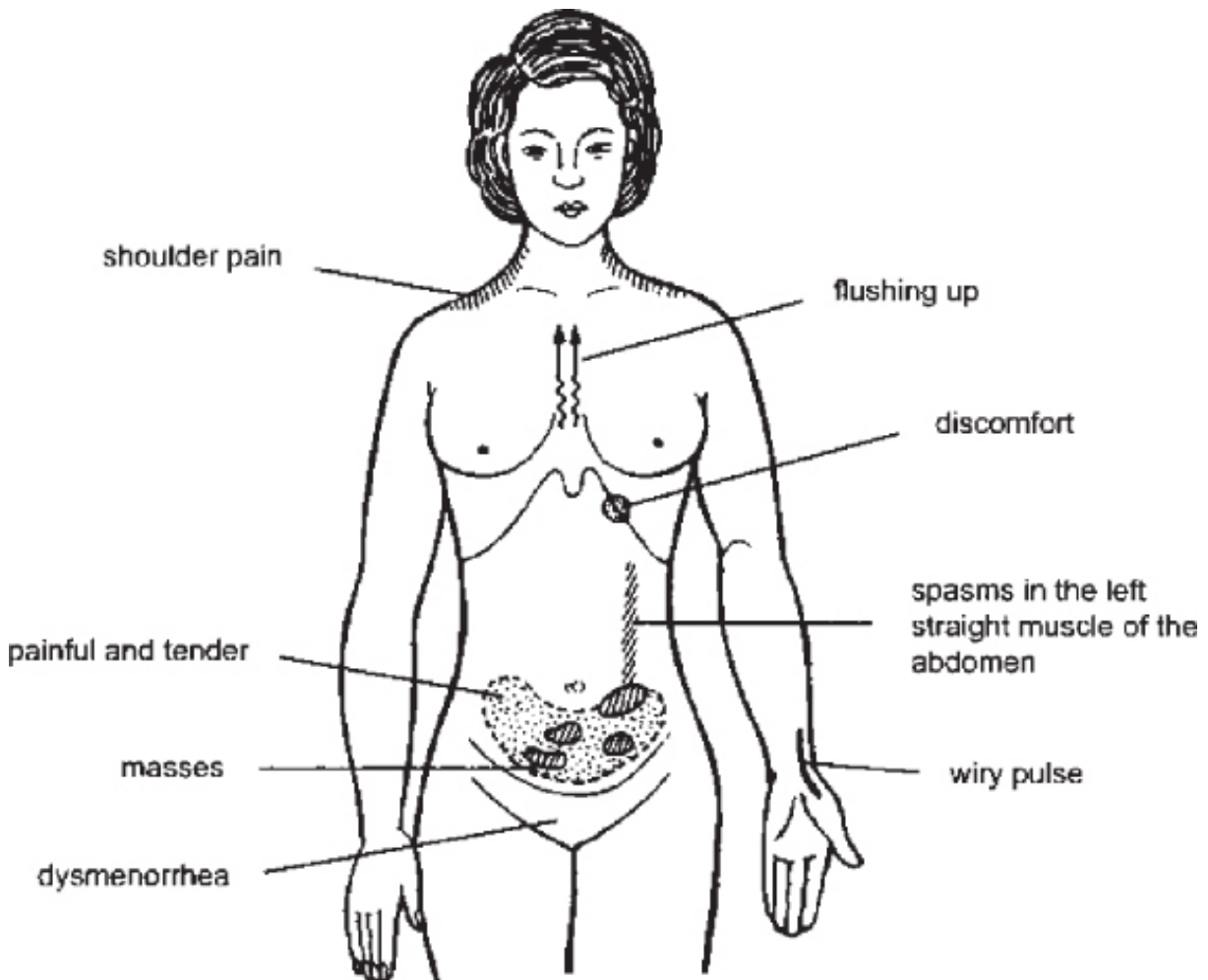


Cinnamon and Hoelen Formula (Gui Zhi Fu Ling Wan 桂枝茯苓丸)

The ingredients of this formula are cinnamon, peony, hoelen, persica, and moutan.

Indications

1. Stagnant blood
2. Flushing up (headache, stiff shoulders, dizziness, tinnitus)
3. Tenderness in the lower abdomen upon palpation
4. Tense or spasms of abdominal muscles
5. Cold feet
6. Abnormal menstruation

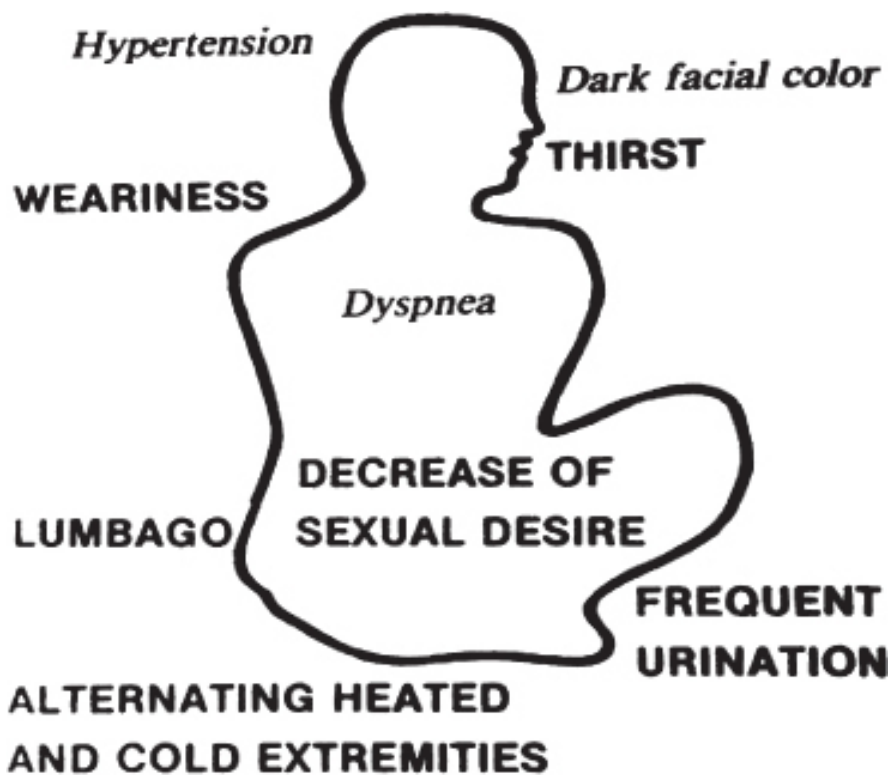


Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸)

The ingredients of this formula are steamed rehmannia, dioscorea, comus, hoelen, alisma, moutan, cinnamon, and aconite.

Indications

1. Chills, especially in the elderly
2. Excessive fatigue
3. Oliguria or polyuria
4. Excessive thirst
5. Paralysis
6. Edema
7. Pain in the low back and lower extremities

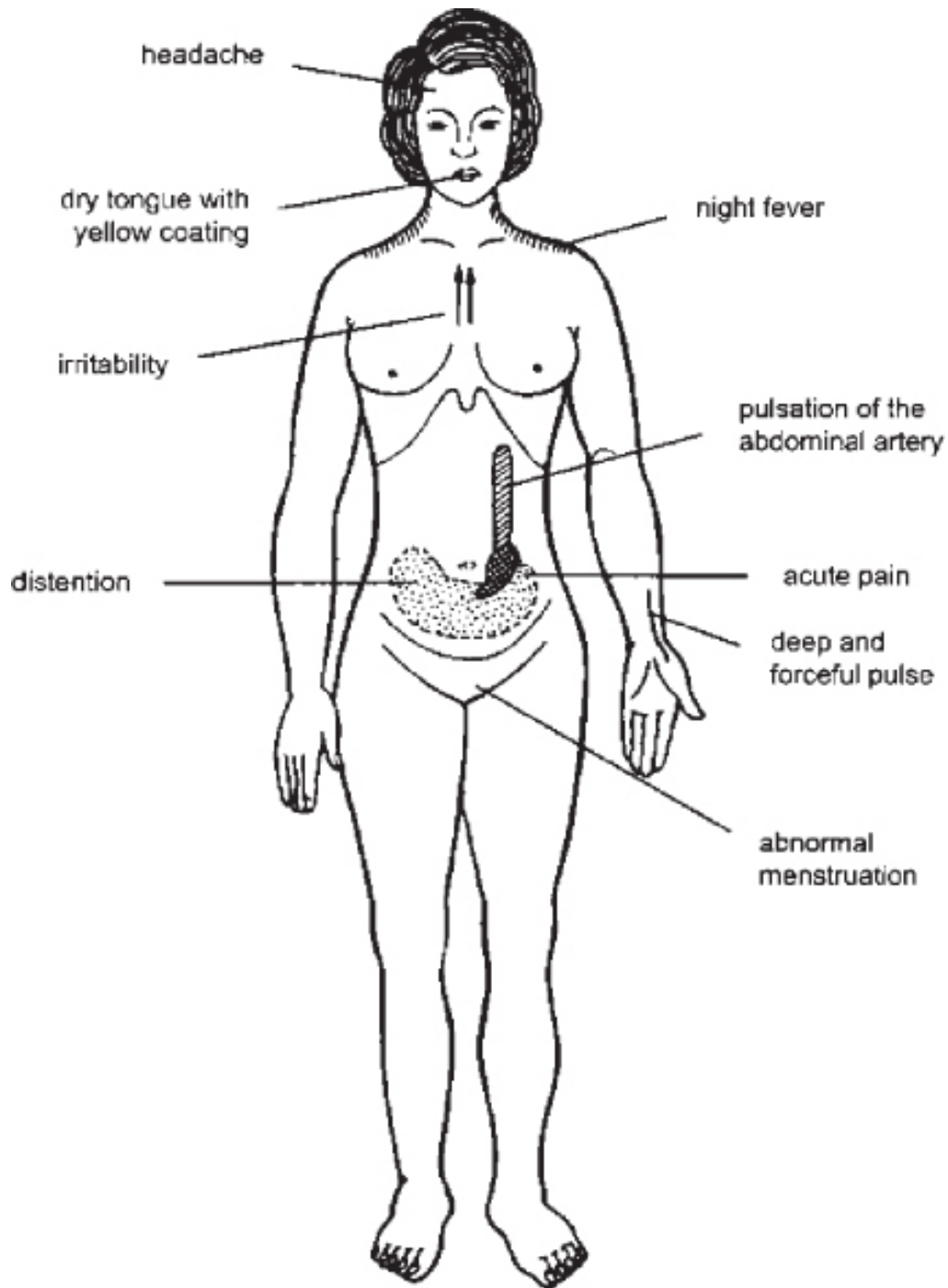


Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)

The ingredients of this formula are rhubarb, mirabilium, licorice, persica, and cinnamon.

Indications

1. Dark and reddish facial complexion
2. Headaches
3. Constipation
4. Menstrual disorders
5. Sciatica



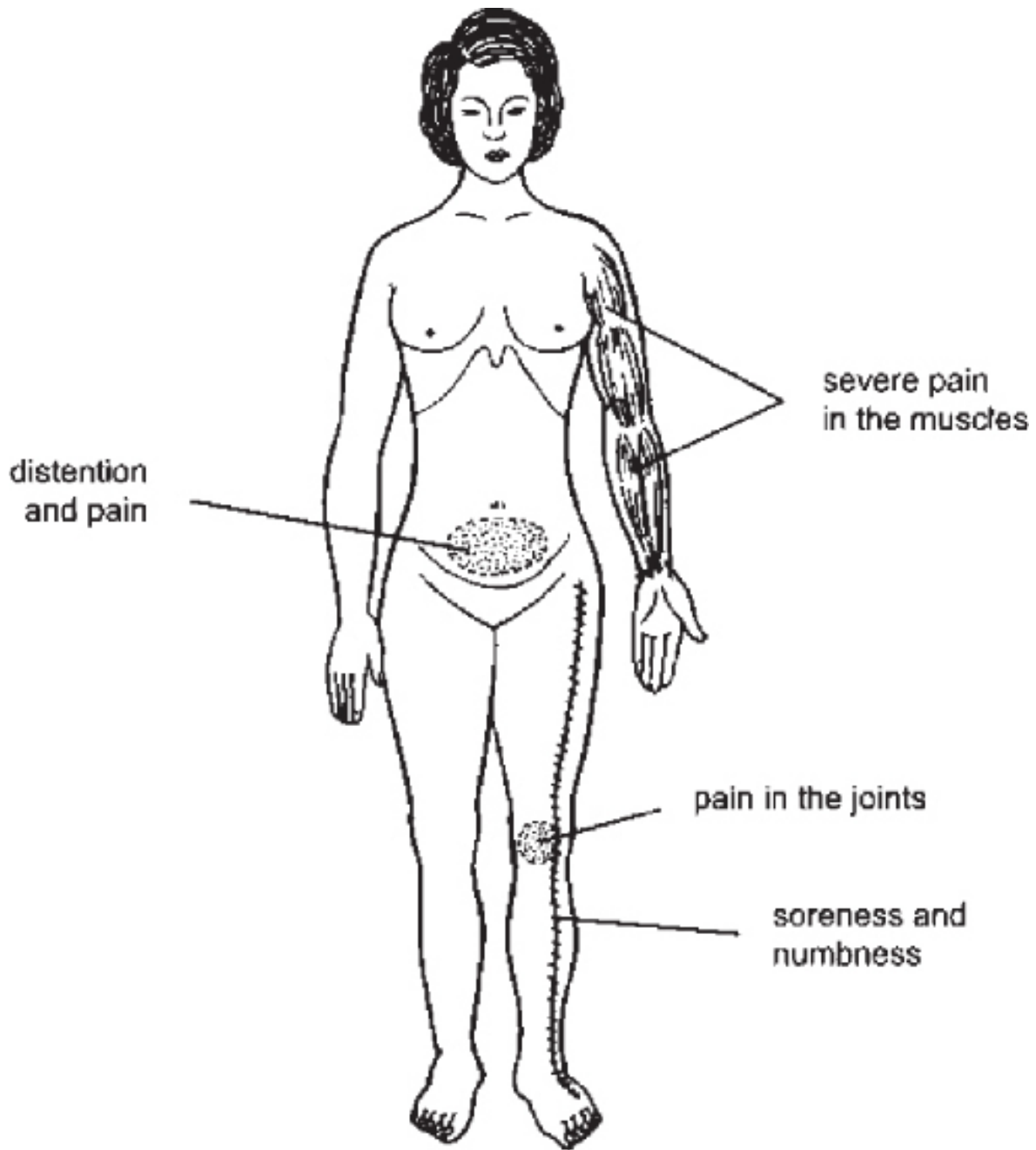
Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經活血湯)

The ingredients of this formula are tang-kuei, cnidium, peony, rehmannia, atractylodes, hoelen, licorice, siler, chiang-huo, achyranthes, clematis,

angelica, stephania, persica, gentiana, raw ginger, and citrus.

Indications

1. Pain caused by dampness
2. Stagnant blood
3. Chronic pain, neuralgia, lumbar radiculopathy, sciatica



10-5: HERBAL FORMULAS FOR SCIATICA

KEY HERBAL FORMULAS

1. Tang-kuei, Evodia, and Ginger Combination (Dang Gui Si Ni Jia W
Zhu Yu Sheng Jiang Tang 當歸四逆加吳茱萸生薑湯)

2. Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經血湯)

3. Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黃丸)

Sciatica means pain that radiates down the path of the sciatic nerve. The sciatic nerve is formed from the nerve roots coming out of the L4 through S3 nerve roots. Therefore any problem of nerve root (from L4 through S3), or the sciatic nerve itself, can lead to sciatica. Sciatica most commonly occurs when a herniated disk, bone spur on the spine, or narrowing of the spine (spinal stenosis) compresses on the nerve root or nerve involved. This causes inflammation, pain, and numbness and tingling sensations in the affected leg.

TREATMENT FOR SCIATICA

1. Medications for pain, inflammation, anxiety, muscle spasms, etc.
2. Physical therapy
3. Relaxation techniques
4. Alternative therapy such as acupuncture

HERBAL FORMULAS FOR SCIATICA

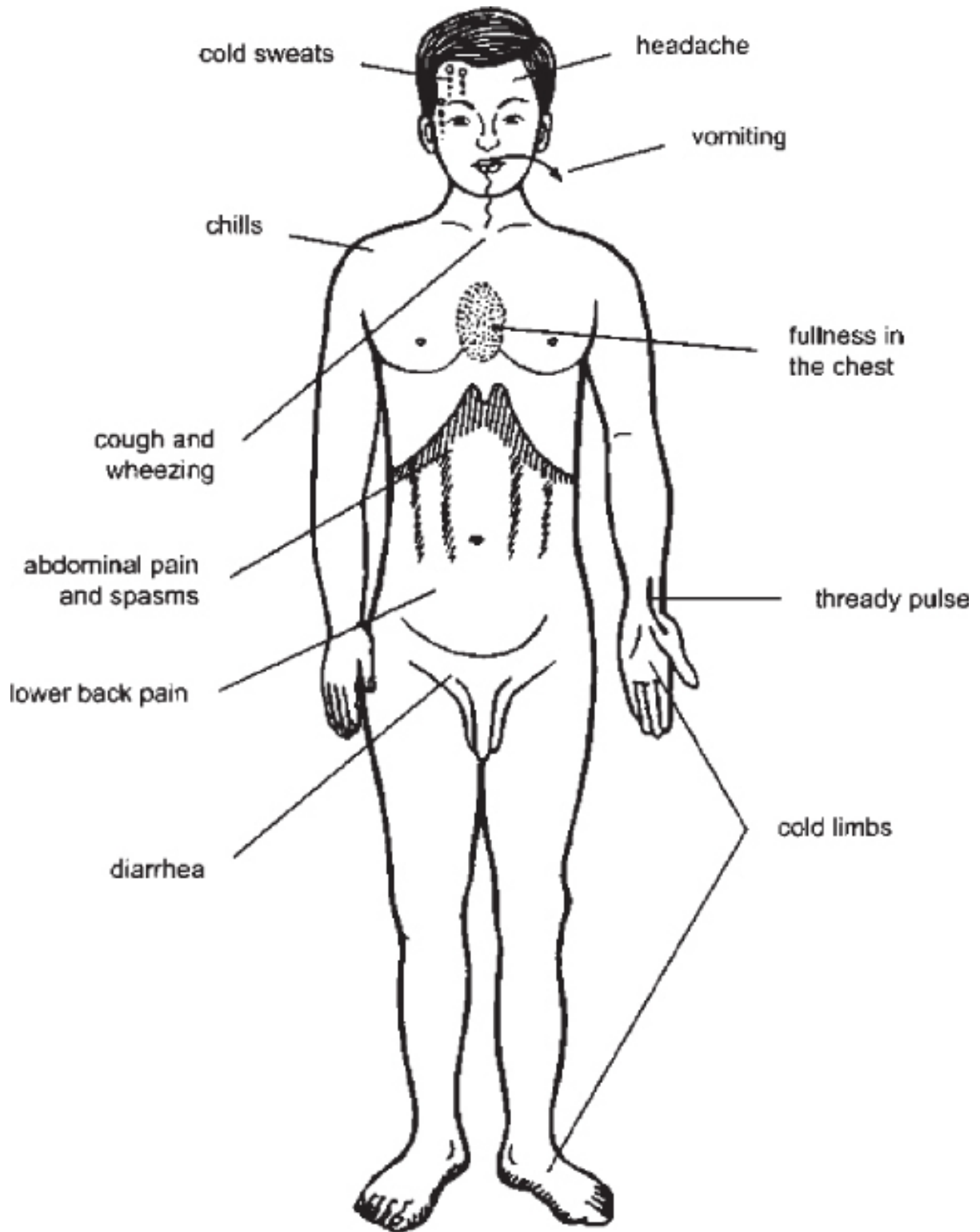
Herbal formulas are not as effective as conventional analgesics, muscle relaxants, or anti-inflammatory medications in the immediate alleviation of acute pain and discomfort. But conventional treatments generally do not take chills, body constitution, and physical conditioning into consideration. This is not the case in herbal medicine practice.

Tang-kuei, Evodia, and Ginger Combination (Dang Gui Si Ni Jia Wu Zhu Yu Sheng Jiang Tang 當歸四逆加吳茱萸生薑湯)

The ingredients of this formula are tang-kuei, evodia, raw ginger, cinnamon, peony, jujube, licorice, asarum, and akebia.

Indications

1. Sciatica with a chill conformation (cold hands and feet all the time).
2. It may also be used for pain in the lower abdomen if accompanied by chi in the hands and feet.

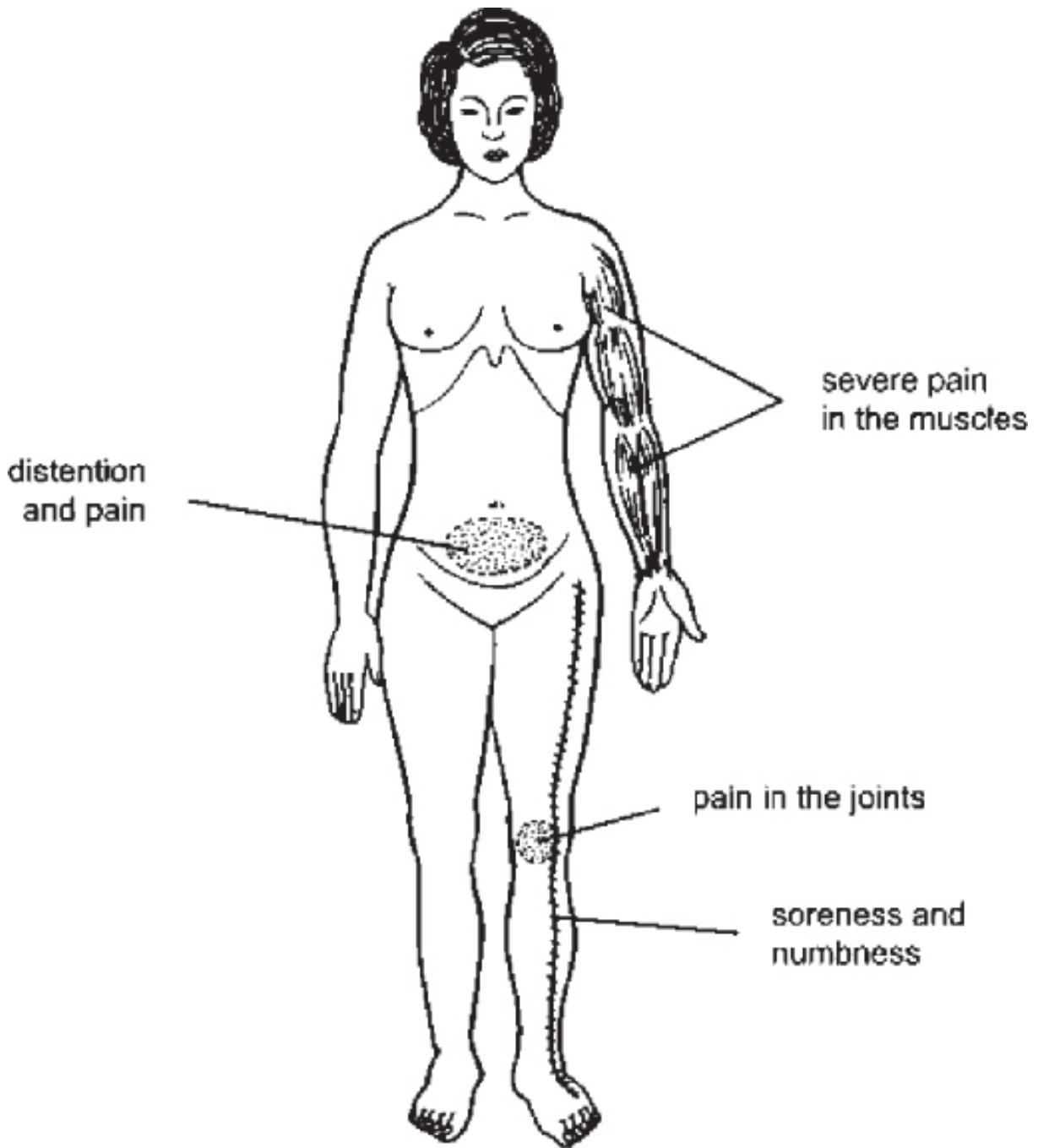


Clematis and Stephania Combination (Shu Jing Huo Xue Tang 疏經活血湯)

The ingredients of this formula are tang-kuei, cnidium, peony, rehmannia, atractylodes, hoelen, licorice, siler, chiang-huo, achyranthes, clematis, angelica, stephania, persica, gentiana, raw ginger, and citrus.

Indications

1. Dark skin due to dilation of capillaries and other stagnant blood symptom
2. Chronic pain or neuralgia (especially sciatica).
3. If there is damp conformation with signs and symptoms of stagnant blood this formula is definitely indicated.

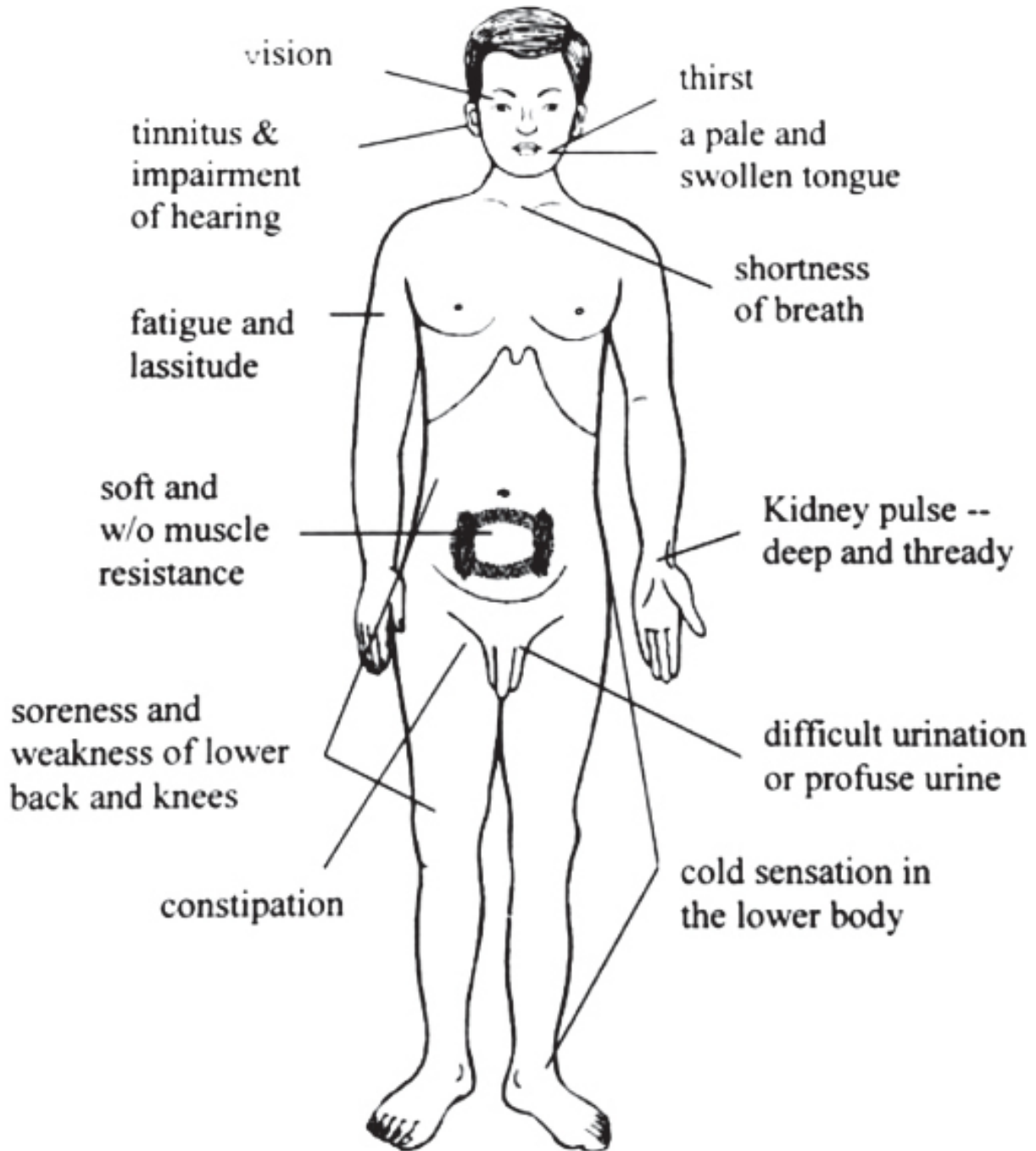


Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸)

The ingredients of this formula are steamed rehmannia, dioscorea, comus, hoelen, alisma, moutan, cinnamon, and aconite.

Indications

1. It is most suitable for sciatica or other neuralgia of the elderly.
2. Declined sexual ability, prostate hypertrophy, senile genital itching, cataracts, kidney, and bladder disorders (especially renal atrophy).
3. Nocturia in children.



SCIATICA DUE TO BLOOD STAGNATION

Sometimes the causes of sciatica have nothing to do with trauma, bone, joint, or nerve problems, but are due to stagnant blood. There is no treatment for it from a conventional medicine point of view, perhaps just psychological support. In TCM, the blood regulating formulas as described in Chapters 2–4 can often provide remarkable relief.

1. Both **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)** and **Cinnamon and Hoelen Formula (Gui Zhi Fu Ling Wan 桂枝茯苓丸)** are good herbal formulas for blood stagnation.
2. **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)** is frequently used to relieve lower abdominal resistance and pain.
3. **Cinnamon and Hoelen Formula (Gui Zhi Fu Ling Wan 桂枝茯苓丸)** used in individuals with both strong and poor health conditions and can be used without harm on all except when there is a fever.
4. The stagnant blood-dispersing formulas are not solely limited to use for sciatica or low back pain; they can be used in other forms of neuralgia, such as trigeminal or intercostal neuralgia. As long as there are signs and symptoms of blood stagnation (most likely due to a chronic condition), these formulas can be used without noticeable harmful effects, either alone or in conjunction with other herbal formulas.
5. Traditionally both **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)** and **Cinnamon and Hoelen Formula (Gui Zhi Fu Ling Wan 桂枝茯苓丸)** are often used to treat menstrual irregularity and acute pain in the left side lower abdomen caused by stagnant blood.

10-6: DISC HERNIATION WITH A TROUBLED HEART

KEY HERBAL FORMULA

Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯)

December 1997

It was nearly Christmas. Bobby had returned for a follow-up visit. He felt about 30–40% better. The intensity of his low back pain had reduced quite a bit after acupuncture and several sessions of physical therapy, but there seemed to be no change in his sleeping. Sometimes he felt physically and mentally disabled, as he was no longer able to walk as much as before. His blood pressure at home was measured 162/94 mmHg two days before. His family doctor prescribed sleeping pills, but it upset his stomach and had pretty much wiped out his appetite. As a result, he had lost five pounds of body weight. On examination his skin was pale and his hands and feet felt cold. His abdomen was tense; it felt as hard as a board and was tender to touch.

“Penny for your thoughts,” he said.

“They’re worth a lot more than that!”

“It would be a nice Christmas present if you could help me get some sleep!”

“We shall try, we shall try!”

I thought about herbal therapy. There are all kinds of herbal formulas that can help low back pain with abdominal symptoms and insomnia. But Bobby had a heart condition that he did not like to touch upon until I insisted.

A HEART CONDITION

Bobby had been very active starting at a young age. Before Bobby became the president of a University, he even played professional soccer in Europe. He continued to play recreational soccer competitively until he was in his mid-fifties. At that time his wife told him to stop because he kept having twisted ankles and various other things. He then started running, and he used to run, not jog, between two and five miles almost every day until he was forty-eight. At that time his doctor told him to stop because he was having chest pains when he was running; he felt shortness of breath and had to stop running from time to time. (Actually, he started to feel chest pain and shortness of breath when he was still playing professional soccer.) The doctors got worried about it and gave him a test with dye injected into his veins—an angiogram—because he was even having trouble going up stairs. They found out that he had a severe heart disease and recommended heart surgery. He was not very happy about it, but he did accept it. He had a quadruple bypass surgery with a vein graft taken from his right leg. He did not have high cholesterol or

triglycerides or blood sugar problems that could be blamed for his heart disease. If he did, the doctors and he did not know about. He thought the operation was not a complete success because he still had chest pain when he was running.

Back then therapeutic exercise after a heart procedure was not popular. All Bobby remembers is that he was in the hospital six or seven days after the surgery. He then stayed out of work for about three weeks for convalescence and recuperation. That was it. They did not give him any exercise to do. It was a high-powered operation with a group of famous doctors in Boston. He started running again maybe six weeks after the operation.

“I was happy initially, but I was not happy later because I could not pee normally after the catheter was removed. Each time I tried to empty my bladder, only a dribble of urine came out. I felt like I needed to release the pressure from my bladder every fifteen minutes. I didn’t sleep a full night for nearly a week. My feet were so swollen I could barely get into my shoes with the laces loose. My whole body was bloated. I thought I would die.”

“What happened?” I asked.

“My prostate was so swollen that my plumbing system shut down. A urologist placed a catheter back into my bladder and it sounded like someone turned on a water faucet. The urine streaming out of my bladder equaled one and a half liters. What a relief! For the next two weeks, I lived with the catheter. So two weeks after my heart surgery, I needed a prostate operation.”

“What about your heart now?”

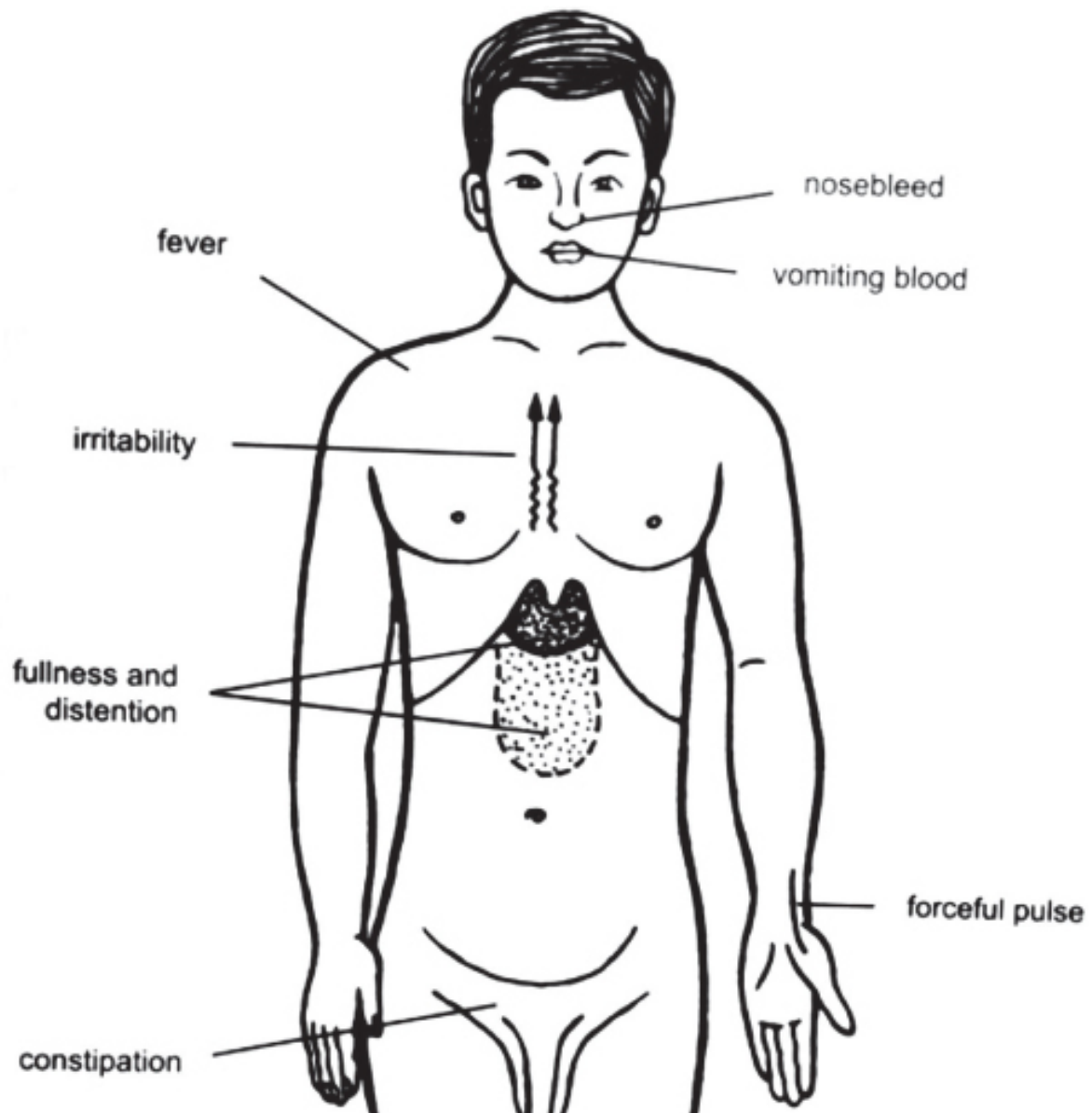
“I should be in cardiac rehab now. But for some reason, Medicare did not want to pay for it. The only heart trouble I have now is an irregular heartbeat. I did not have it right after the surgery. It started later, but it never bothers me particularly. I did very vigorous exercise: twenty minutes on an elliptical trainer, thirty minutes on a recumbent bike, and ten minutes on a treadmill, then about thirty minutes of weights three to four times a week. The machines showed my heart rate while I was exercising. Since I started having irregular heartbeats, it was not very accurate. It went up to about 145 or 150 beats per minute and then returned to my resting heart rate very quickly once I stopped exercising. The doctors felt that I still had a good heart for a seventy-year-old man. I felt fine until the doctor told me that I had anemia—not enough red blood cells. I did not think it was too serious. The hematologist gave me iron and testosterone and I did feel tired easily when I was exercising. But then I had this stupid skin cancer that meant I couldn’t exercise until the thing

healed. The fact that I also had lower back pains made me think that I must have a serious case of osteoporosis.”

“What makes you say that?”

“Because I’ve noticed that my pants are hanging over my shoes and getting lower and lower. You don’t measure yourself after reaching a certain age. I found that I have lost about three inches or more over the past few years. I have certain skin and fat rolls here that I never had before because I have lost three inches. The skin just hangs over. They say the upper body gets squashed. I think it is all in the back somehow. I never noticed it, and I am sure that is where I got the aneurysm and all that good stuff.”

I suggested **Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯)** or “the three YELLOWS,” the same herbal preparation commonly used to treat bruises, hematomas, and blood clots.



All three ingredients in **Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯)**—coptis, scute, and rhubarb—are bitter, anti-inflammatory agents. In addition, coptis contains berberine, worenine, and coptisine. When combined they facilitate bile secretions and moving the bowels; it often produces remarkable effects. TCM doctors frequently prescribe this formula to prevent and to recuperate from hypertension, arteriosclerosis, habitual constipation, insomnia, neurosis, and mental instability. The Japanese government has approved it for the treatment of stroke, hypertension, insomnia, habitual constipation, spitting of blood, and

uterine bleeding. Despite all of these goodies, I wanted Bobby to check with his cardiologist first before he started taking it.

“How does acupuncture get rid of heart diseases?” asked Bobby, before he left the office.

“Who told you that?”

“I heard it from some commercials.”

“If it does, I’d like to learn about it!”

“My wife watches my diet like a hawk, and I watch my stress level and do my exercises faithfully every day when my back feels better. But it’s not been easy! I used to walk for about an hour a day, but have not walked so much lately; instead of taking the dogs out for a walk, I just put them on the collar and let them out to run on their own.”

“I think the results might be better if you put the collar on your neck and let your dogs watch you run!” I joked.

10-7: LOW BACK PAIN, HEART DISEASE, AND EXERCISE

Cardiovascular diseases, especially hypertension, may be of no known cause or may be secondary to other problems such as kidney or endocrine malfunctions. The medical classics on which TCM is based do not recognize hypertension as a disease, but symptoms from its manifestations, such as headache, dizziness, vertigo, tinnitus, facial flushing, palpitations, and constipation, are well represented in classical Chinese medicine literature. TCM does not treat these symptoms directly with herbs or by needles. Instead, it seeks to regulate the coordination of the entire system so that blood pressure can be stabilized by balancing the entire body, thereby relieving the complications responsible for the symptoms. Most people with high blood pressure are of the “excess Yang conformation.” The treatments depend upon the type of hypertension and the manifestations of characteristic symptoms. To be effective, the therapy must be accompanied by the adoption of a sensible lifestyle, such as limiting salt intake, maintaining body weight within an ideal range, undertaking reasonable amounts of physical exercise, and making the opportunity for relaxation, just like a cardiologist would tell you.

February 1998

Bobby looked very happy and said that his condition had changed dramatically. He said that after two weeks of **Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯)**, his insomnia had pretty much disappeared. As mentioned earlier, **Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯)** is an interior-heat conformation formula, with scute, coptis, and rhubarb in it. Traditionally it is used to treat blood congestion in the brain following cerebral hemorrhages, pleural hemorrhages, vomiting blood, hypertension, nosebleeds, and bleeding from the eye sockets. It is also used for insomnia and constipation in hypertensive individuals, and hyper-excitability following severe injuries. It may also be used to prevent or treat hangovers. It should not be used for people with diarrhea because of its inclusion of rhubarb.

“How about my exercises?”

“What about them?”

“How can I balance between the heart exercises and the back exercises? I mean should I do weights or not?”

“I think you’d better check with your heart doctors!”

Because of his low back problems, Bobby needed to do strengthening exercises, such as weight training, to build up his muscle strength, but exercise with weights would put extra stress on his heart. Because of his heart problems, Bobby needed to do endurance exercises, such as aerobics, walking on a treadmill, or riding a bicycle for a lengthy period of time to improve the functional capacity of his cardiovascular system. But in order to benefit the heart, the exercises would have to involve the large muscles to bring the heart rate to a certain target level, and that would put extra stress on his low back. Before we argue madly about that, we have to watch for our posture first.

“Maintaining a good body posture is essential in preventing and treating low back or any kind of problems,” I told Bobby.

“But I don’t know how to maintain a good body posture. Over the years I was always told that the most important exercises in controlling my back pain are the back and hamstring stretches. But I did not get any benefit from them.”

“How come?”

“Pulling my knees toward my head seemed to have very little positive effect on my back. Actually, I felt stupid doing those exercises.”

“Show me how you did it.”

“Like this and this.”

I knew then why stretching exercises didn't do Bobby much good and why his low back was that tight and painful.



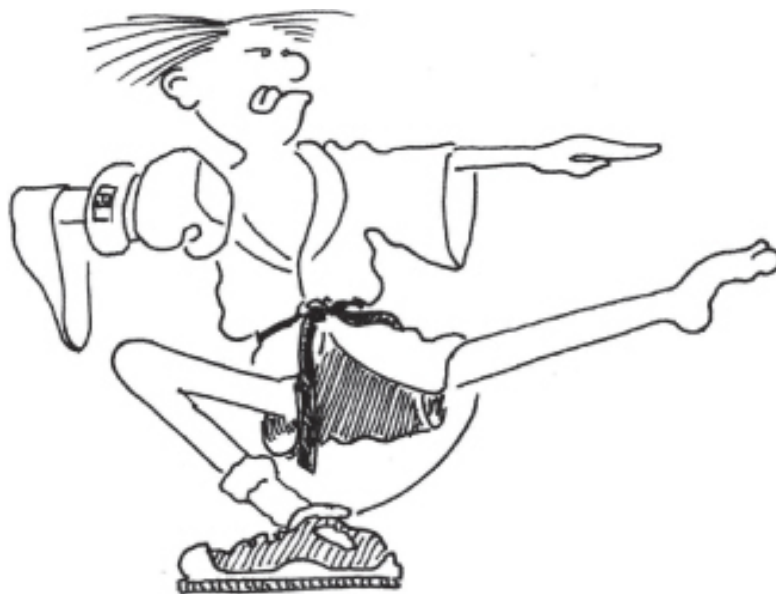
“Come, I’ll show you,” I said to him. “Stand against the wall with your heels and buttocks pressed against the wall. Bring your shoulders back against the wall, tuck your chin down but keep your head on the wall straight back against the wall. Do these maneuvers several times a day and pretend that you have a nice looking posture, just like Mikhail Baryshnikov. Imagine there is a string coming out of the top of your head that is pulling you upward while you are dangling by a string. By the way, this is one of the ways yoga teaches correct posture; it works either standing or sitting.”

“Anything else?”

“I am going to show you how to stretch your hamstrings and hip adductors, but it requires you to put one of your heels on a tabletop with toes pointed upward and toward your nose. Then lean forward trying to touch your head to your knee and keep your leg straight.”

“You must be joking!” Bobby attempted but quickly withdrew. He had a tough time putting a leg even on a one-foot high chair.

“Try it on a short stool for thirty seconds with each leg, five times a day,” I told him.



“What kind of stretching is this?” Bobby was wondering. “I’ve never seen it done this way before.”

“You may call that the kung-fu style,” I said to him, quickly doing a 180-degree roundhouse kick.

“How long did it take you to be able to do that?” he was obviously amazed.

“Not long, only about three years.”

May 1998

Bobby was feeling better, except that he had some hypertensive episodes. He was getting along well with five weeks of **Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯)**. He did have some anxious moments of dizziness, stiff shoulders, tinnitus, tightness in his chest, and constipation.

On examination, his supine blood pressure was 142/90 mmHg. He had made some improvement in his trunk mobility and abdominal muscle strength. He had some tenderness in his belly upon deep palpation and had loud bowel sounds.

Under such conditions, he might still benefit from **Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯)**. However, **Major Bupleurum Combination (Da Chai Hu Tang 大柴胡湯)** might also be helpful. The formula is generally used for a physically fit and muscularly built

person, but with a sensation of pressure or tightness in the chest, stiff shoulders, and episodic constipation. **Bupleurum and Dragon Bone Combination (Chai Hu Jia Long Gu Mu Li Tang 柴胡加龍骨牡蠣湯)** might be used if he had palpitations along with vertigo, insomnia, anxiety, and mental instability. I would also consider **Tang-kuei and Gambir Combination (Qi Wu Jiang Xia Tang 七物降下湯)** due to his prolonged illness, heavy headedness, loss of physical strength and endurance, shoulder stiffness, and tinnitus. But the lack of kidney dysfunctions had dissuaded me from using it.

Bobby had a few sessions of trigger point injection with me in 1999. He stopped coming to see me before the new millennium.

10-8: A JUMPY OLD MAN

September 2002

After our treatments, four years later I once, unexpectedly, saw Bobby at a supermarket.

“This is the man!” said Bobby to a much younger looking lady standing next to him. He told her how nice I was to him and how I tortured him.

“How have you been? How are your back and your heart?” I asked.



“Oh, like you suggested: I watched what I ate and I did my exercises every day. I put one or two large pillows between my knees when I sleep on my sides . . . I really have no complaints, except I do like to sleep on my back.”

“Do you have a problem doing that?”

“No,” he said, “but I snore.”

“Is that against the law?”

“No, but it offended her; she would kick me to turn me over!” said Bobby, turning his face toward the lady.

“I didn’t know you had a new companion! But I never suggested you should fool around with a young lady at your age!”

“No, this is the same one with me for forty-six years!”

“The same one that threatened to leave you if you had another low back surgery?”

“Yup! And the threat is still very much in effect!” said Mrs. Bobby.

“It is a good thing because she is still working and I am not. I think that is one thing that allowed me to retire when I wanted to retire. If you have a bad back, my advice for you would be to find a younger spouse that makes enough money so that you don’t have to work for the rest of your life.”

“I’ll keep that recommendation in mind, Dr. Bobby.”

“You know something, doc, life is good without pain. I am careful with what I do, like bending my knees when I pick something up and not bending over too much. Remember, I used to need powerful pain medications like Vicodin or Tylenol with codeine or something equivalent, now I just take a tablet of Aleve or Tylenol when the pain gets to me. Guess what I am doing now?”

“I haven’t got a clue . . . carrying groceries for your young wife, I guess,” I said.

“Nope, I am learning ballroom line dancing.”

“Does it have anything to do with your prostate?” I said, but I was just kidding.

“Nope,” he said. “Do you even know the difference between ballroom line dancing and country-western line dancing?”

“Nope, haven’t got a clue!”

“I bet you don’t! Ballroom line dancing uses standard patterns adapted from ballroom dances like the waltz, the foxtrot, the rumba, the cha-cha, swing, and others. In ballroom line dancing, dances are choreographed to music that fits the particular type of ballroom dance, which adds to the fun, feel, and the ‘look’ of your move!” said Bobby, twisting and turning with a big smile, grinning from ear to ear.

I’ve never seen a man that old that was still that jumpy.



CHAPTER 11

Fractures

11-1: SPINAL FRACTURE

KEYWORDS

1. Spinal fracture due to osteoporosis (ICD-10 Code **M80.08XA**)
2. Spondylolisthesis (ICD-10 Code **M43.16**)

June 2005

Marlene was a seventy-nine-year-old retired nurse who was a colleague of mine when I was a medical officer at the National Institutes of Health.

Her life had been filled with care for others. She had been married for fifty-two years, raised two daughters, and retired after forty years of nursing. She was not taking particularly good care of herself but enjoyed relatively good health over the years. She and her husband especially enjoyed traveling, dancing, gardening, and volunteering.

In 2001 Marlene's life was suddenly taken over by doctors' office visit waits, blood work, X-rays, MRIs, bone density studies, scopes, pokes, shots, etc. There were conflicting opinions and diagnoses about her. Complicating her medical problems was a participation in a volunteer study for a non-hormonal replacement therapy, which affected her esophagus and made it difficult for her to swallow. She had two separate hospitalizations with

pneumonia, an unexplained fullness in her abdomen, and a general malaise. Gone were her carefree days of independent living, playing bridge with friends, and volunteering at the local hospital.

In May 2002, Marlene developed bronchitis that gave her a cough so violent that she suffered compression fractures of three vertebrae in her lumbar spine. The pain was excruciating; because of a misread bone density report in 1999 she now also learned that she had osteoporosis. Several doctors who saw the report noted that her bones had been compromised for years—despite regular exercise, sound nutrition, and supplemental calcium. She was shocked and in denial that her bones were failing. She wasn't able to make her daily trips to the gym that she'd enjoyed for the past nine years.

Marlene was in so much pain—taking over-the-counter analgesics—that even short walks were difficult. Her husband took her to the dining room every day in a wheelchair. Five months later she underwent a boric cement procedure to strengthen her three compressed vertebrae. She had to do something for the pain that the medicine wasn't treating. After a short recuperation, she began exercising again by walking in water in her community pool. After twenty minutes in the pool, she would sit in a hot tub. Both water therapies felt good, but they didn't help with her persistent agonizing back pain, which, by the time she came to see me, had spread to both sides of her low back.

OSTEOPOROSIS

1. Osteoporosis (thinning of the bone) is defined by a fragility fracture or a BMD T-score of -2.5 or lower.
2. It is a major health problem that affects 200 million people worldwide and 54 million older adults in the United States.
3. Bone loss rises sharply in women after menopause, but it affects men well.
4. Half of all postmenopausal women have an osteoporosis-related fracture during their lifetime.
5. A quarter of osteoporosis-related fractures result in vertebral deformity.
6. Exactly how or why osteoporosis develops is not completely understood. It appears to be linked to decreasing female hormone levels, lack of calcium in the diet or poor absorption from the gut, inadequate exposure to sunlight,

and inactivity. Other possible risk factors for osteoporosis include short stature, being underweight, alcoholism, and smoking.

Marlene worried that she had to take so much medication, and it was a big job for her to remember to take everything as directed. She went to her family physician sometime in 2004. The doctor reviewed her entire medical chart, prescribed revised pain medications, and did additional tests (X-rays, scopes, and an allergy evaluation). He found that Marlene had spondylolisthesis in her upper lumbar spine. After several more visits and reviewing the test results, her daughter asked the doctor if acupuncture might help her low back pain. The doctor agreed that, because of her bone loss, OTC medicines might not relieve the pain enough to make her comfortable. He told her that acupuncture might be helpful, but he specifically wanted it done by an MD in Gaithersburg. Marlene told him that she knew someone who fitted the criteria and the doctor told her: “That’s the man!”

OSTEOPOROSIS AND LOW BACK PAIN

1. Osteoporosis is not painful when the bone is not fractured.
2. Pain generally takes a person to bed hoping the pain will disappear.
3. Unfortunately the more rest a person gets the weaker the bones are because the bones need some “physical stress,” such as weight-bearing exercises keep calcium in the bones.
4. In the absence of such stress, the bones will lose calcium faster and further decrease in density. Further fractures may occur.
5. Of interest, when a vertebral body collapses completely, it is painful first, but the pain almost always subsides once the fracture is complete.
6. Weight-bearing exercise improves bone density and can prevent fractures

TREATMENT OF SPINAL FRACTURES DUE TO OSTEOPOROSIS

1. Rule out other causes of low back pain first.
2. Diagnostic tests, such as serum protein electrophoresis, sedimentation rate, alkaline phosphatase, phosphorus, serum calcium, and X-rays should be evaluated to rule out other causes.

3. Pain relief from medications and other available methods.
4. Boric cement procedure.
5. Prevention—One of the medications used to prevent osteoporosis is Alendronate (Fosamax), a bone resorption inhibitor. But there are side effects from it that include, but are not limited to, abdominal pain, difficulty in swallowing, heartburn, irritation or pain of the esophagus, muscle pain, constipation, diarrhea, full or bloated feeling, gas, headache, nausea, and rarely, it may also cause a skin rash. Estrogen therapy may need to be continued for many years for the best protection against bone loss, but side effects may include endometrial cancer.
6. Diet—sufficient calcium, sunlight, and vitamin D.
7. Exercise regularly with weights.
8. Abstain from smoking and excessive use of alcohol.

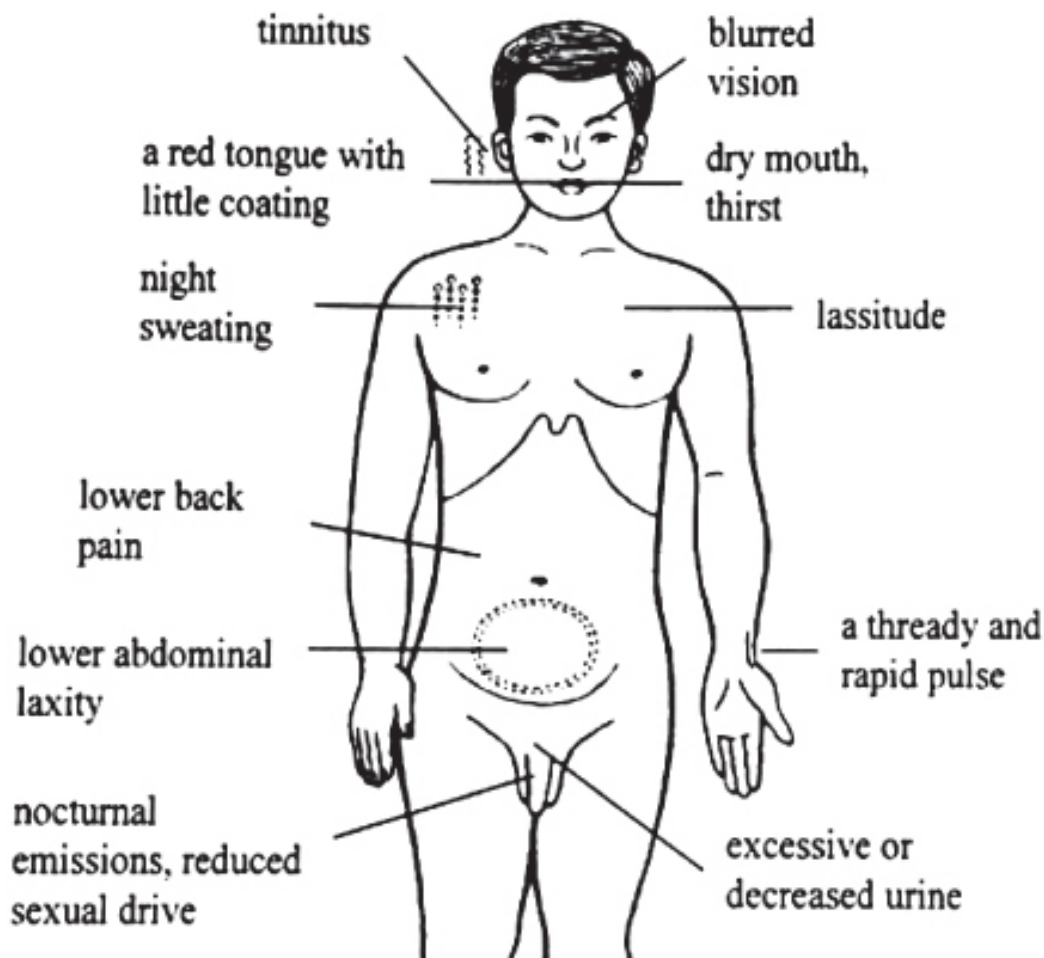
11-2: HERBAL FORMULAS FOR OSTEOPOROSIS

KEY FORMULA

Rehmannia Six Formula (Liu Wei Di Huang Wan 六味地黄丸)

According to TCM theory, kidney-toning herbs possess “bone-nourishing” effects by increasing the demand for calcium by the bones and/or making the cofactor more effective. The herbs work as well in men as in women. Several herbal preparations have been identified to show positive effects on the hypothalamus, the adrenal glands, and the pineal glands to regulate the production of sex hormones. For example, taking **Rehmannia Six Formula (Liu Wei Di Huang Wan 六味地黄丸)** may decrease blood FSH and LH levels in menopausal women who usually have very high blood FSH and LH hormones after menopause. In addition, **Rehmannia Six Formula (Liu Wei Di Huang Wan 六味地黄丸)** increases blood estradiol levels, which are typically very low after menopause. It is generally used for people with a healthy facial complexion, feverish conformations, and a lack of chill symptoms. It is often used to treat diabetes mellitus, lower back pain in the elderly,

declined sexual ability due to genital atrophy, prostate hypertrophy, weakness, poor stamina, or nocturia.



RESEARCH FINDINGS ON OSTEOPOROSIS HERBAL PREPARATIONS

In a study published in the 1992 issue of *Journal of Traditional Chinese Medicine*, fifty-eight patients (twenty-one males, thirty-seven females) who were diagnosed with osteoporosis were treated with an herbal preparation containing dipsacus, tortoise shell, loranthus, cornus, placenta, drynaria, rehmannia, morinda, and schizandra. These herbs all tone the kidney. It was reported that the herbal preparation markedly reduced the symptoms of kidney deficiency while increasing the bone density as measured by X-rays and rated by line density. In a study published in the 1992 issue of *Chinese Journal of Orthopedics and Traumatology*, **Qiang Gu San**, comprised of tang-kuei,

salvia, frankincense, myrrh, deer antler gelatin, anteater scale, and carthamus, was used to treat hip fractures due to osteoporosis. Following the treatment with this formula, of the 254 cases, 55.5% of them showed no pain or swelling at the fracture site. They were able to walk independently with normal joint mobility; 32.3% showed no swelling or pain, except they still had some limited function and slight limping after taking the herbal formula.

Hua Xie and coworkers found that astragalus can prevent glucocorticoid-induced osteoporosis. In their research, three-month-old male Sprague-Dawley rats were given hydrocortisone 3.6mg/kg/day, six times per week for thirty days, then two times per week for the next three days, so as to cause glucocorticoid-induced osteoporosis. To study the ability of astragalus (huang qi) to counteract glucocorticoid-induced osteoporosis, the rats were treated with astragalus 5g/kg/day, six times per week for two months. After sixty days all rats were sacrificed, and the proximal tibiae of the rats were removed, processed, and decalcified for histomorphometric analysis. In comparison with the control rats, the bone resorption was enhanced (+261%) with decreased bone formation (-63%), and the trabecular bone area was characterized by a significant reduction (-23%) in the rats that received hydrocortisone. Trabecular bone formation of the rats treated with astragalus significantly increased (+100%), the bone resorption was reduced (-69%), and the trabecular bone was increased (+27%), compared with the rats that received hydrocortisone.

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11-3: HERBAL FORMULAS FOR SPONDYLOLISTHESIS

KEYWORDS

1. Lumbar spondylolisthesis (ICD-10 Code **M43.16**)

KEY HERBAL FORMULA

Peony and Licorice Combination (Shao Yao Gan Cao Tang 芍藥甘草湯)

December 1999

Raymond was referred to me by his wife, whom I'd seen for the first time just a month earlier. Ray was a forty-three-year old correctional officer at a county detention center. On September 23, 1995, while he was preventing an altercation between two inmates, he heard a pop then felt a sharp pain in his low back. He was taken to a local emergency room shortly after the incident. X-rays showed a bone mass at the L5 and S1 level with an opened L4–L5 facet joint. He was diagnosed with lower back sprain/strain, lumbar spondylolisthesis, and a preexisting L5–S1 fusion. He was instructed to rest and was prescribed Feldene. He had intermittent pain in his low back and left leg. He also had right lateral thigh pain. He was later diagnosed with pseudoarthrosis at L5/S1. A CT scan taken a week later showed spondylolisthesis at L5–S1 and impingement upon exiting neural structures. He was sent for an epidural cortisone injection with trial casting. Raymond had hypertension and an L4–L5 spinal fusion from 1993 due to a failed disc surgery.

“He has a lot of muscle spasms. He can't sleep at night and has to ask me to rub his back, his sides, and his legs. He seems to have a lot of pain, but he wouldn't say it. The doctors had no solution for him, and I'm worried about him!” said Mrs. Raymond.

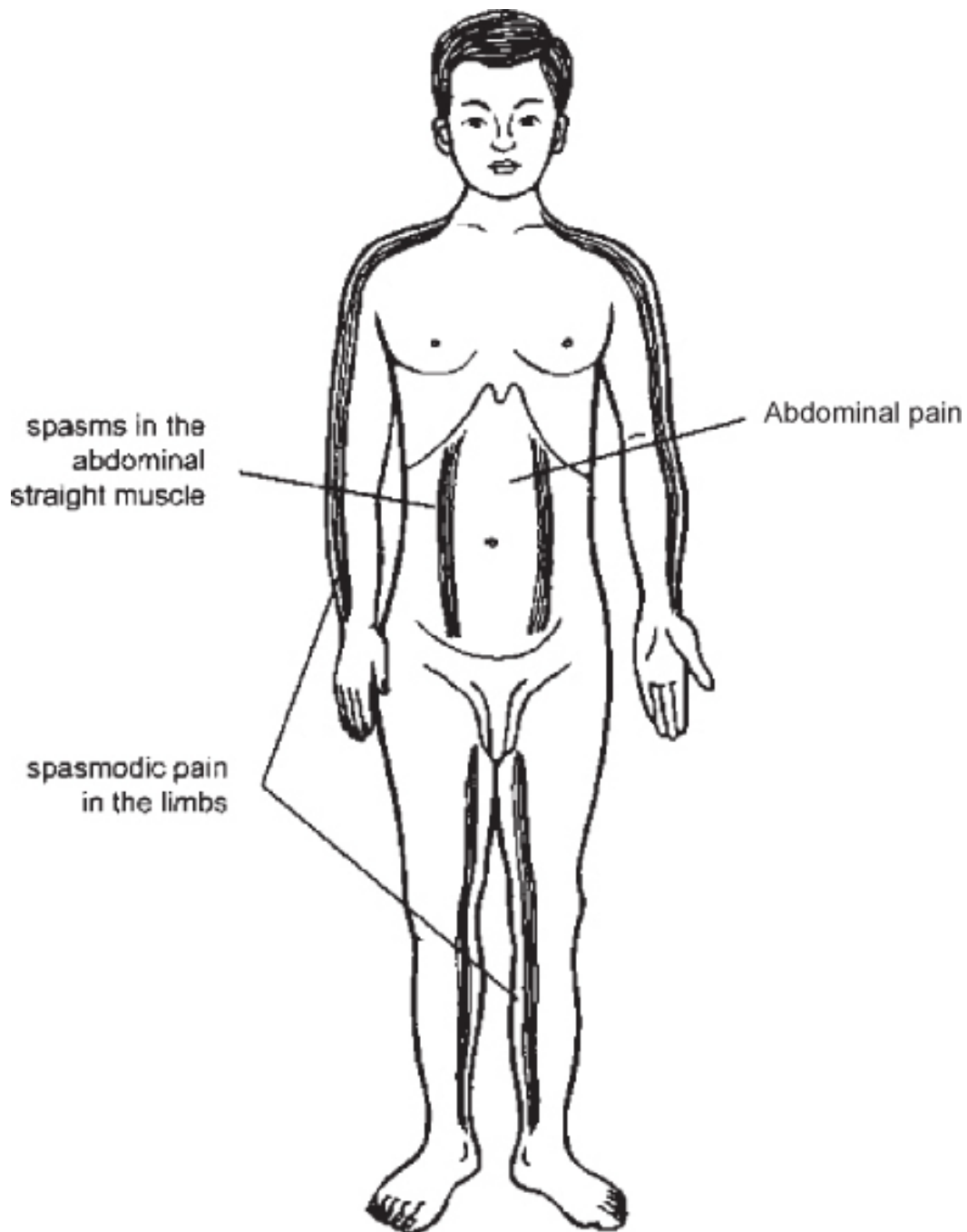
SPONDYLOLISTHESIS

1. Spondylolisthesis is slippage of one vertebra on top of another one.
2. It is commonly seen in “fractures” of the spine in the elderly caused by weakened bones from osteoporosis, aging, or injury.
3. It usually produces no symptoms at rest, but it may produce intense pain when the person moves.

4. It may cause sciatica-like symptoms, with numbness or tingling sensation down the leg(s). If the slippage is significant enough to irritate the nerve roots.
5. A person with spondylolisthesis may have difficulty bending their trunk.
6. For some reason, walking up hills is usually less painful than walking down.

EXAMINATION

Ray was 5'10" tall and weighed 235 pounds. Examination of the lower back and buttocks showed a decreased lumbar lordotic curve. There was no apparent ataxia or dysmetria. He had no difficulty in transferring from the chair to the examination table. His mobility was satisfactory. His sitting, standing, balance, and gait were normal. Weight-bearing, walking, and hopping abilities were subnormal on the left side. He was able to walk on his left heel and toes, but with some difficulty. He also had a hard time squatting down and rising up. Sensations to light touch and a pinprick were diminished in the left buttock, posterior thigh, and lateral aspect of the right leg. There was also a decrease in sensations in the anterolateral aspect of the right thigh. Muscle tightness was noted in bilateral lumbosacral paraspinals, abdominals, and all four extremities. Tenderness to palpation was noted in the abdomen and low back in general. The straight-leg raising test was positive on both sides. Deep tendon reflex was hypoactive in the left ankle. He had several tender trigger points in the thoracolumbar paraspinals and quadratus lumborum. His range of motion of the low back in flexion was 65 degrees, extension 5 degrees, left side bending 5 degrees, and right side bending 10 degrees.



IMPRESSION

Raymond had low back strain/sprain, spondylolisthesis, and lumbar nerve root impingement following a work-related injury over four years ago. He also had a preexisting lumbar spinal fusion. His symptoms were stable, and I

believed that he had reached a maximum medical improvement at the time of my evaluation.

PLANS

Raymond's remaining functional complaints were low back and leg pain with neuralgia of the lower extremities. For his condition, I thought **Peony and Licorice Combination (Shao Yao Gan Cao Tang 芍藥甘草湯)** might be useful to reduce his pain from muscle spasms. It is an interior-chill regulator with an analgesic effect and it also helps to regulate blood circulation. Other uses of this formula are:

1. Acute pain in the neck, shoulders, upper trunk, low back, post-herp neuralgia, headache, and trigeminal neuralgia.
2. The main component of peony is paeoniflorin, which has a strong analgesic action and can prolong sleep, reduce body temperature, decrease inflammation, lessen stress, and ease gastric acid.
3. Peony has an analgesic effect on the central nervous system and can relieve muscle cramping.
4. It can be broadly used as an analgesic or muscle relaxant in patients with heat, chill, strong, or weak constitutions.
5. Other uses are the relief of aches and pains of various kinds, such as from a fall, a twist, urinary tract stones, gallstones, or overwork.

Raymond tried the formula for six weeks. His wife said that she did not have to rub his back as usual after only three weeks of taking the herbs. I suggested that he should have another course of physical therapy and increase his exercises. He also needed to lose some fat.



CHAPTER 12

Drug Side Effects



12-1: LOW BACK PAIN WITH GASTROINTESTINAL PROBLEMS

KEY HERBAL FORMULA

Ginseng and Ginger Combination (Li Zhong Tang 理中湯)

Louise was a forty-one-year-old female with a long history of low back pain. It started following a boat accident when she was twenty-six. She sustained injuries to her low back, right hip, and both knees as a result. She was treated conservatively, but the pain had never gone away completely. She

was then diagnosed with rheumatoid arthritis and Lyme disease when she was thirty-four years old. She had a positive Lyme titer, a positive rheumatoid factor, and was anemic. Since then she felt stiff, had headaches, and had red eyes in the morning. She also had chronic sinusitis, abdominal pain, and aches and swelling in her shoulder joints. She was told she had collagen vascular disease and sarcoidosis of the eyes. When she thirty-six she was diagnosed with polyarthralgia and possibly lymphoma. She was later told she had sarcoidosis of the lung and joints through biopsy studies and helicobacter-related gastritis. She was treated with numerous medications. Her sarcoidosis had improved, but she had terrible joint pain from time to time. She was diagnosed with fibromyalgia, osteoarthritis, and nerve root irritation of the lumbar spine, among others, when she was thirty-eight years old. Her chest X-rays at the time showed the sarcoidosis was in remission. Blood tests showed a high cholesterol level, along with a high rheumatoid factor. A lumbar MRI showed degenerative disk disease at L5–S1 with a small central disk protrusion. She had a family history of degenerative arthritis, tuberculosis, high blood cholesterol level, and cancers.

“What can I do for you?” I asked.

“Get rid of my problems!” she said.

“Sorry, but I’m afraid that’s beyond my ability.”

“How about my digestion problems?”

“Can you be more specific?”

“I’ve no appetite; I feel tired and fatigued all the time. Also, I go to the bathroom a lot for my bladder and bowels.”

“What kind of bladder and bowel problems?”

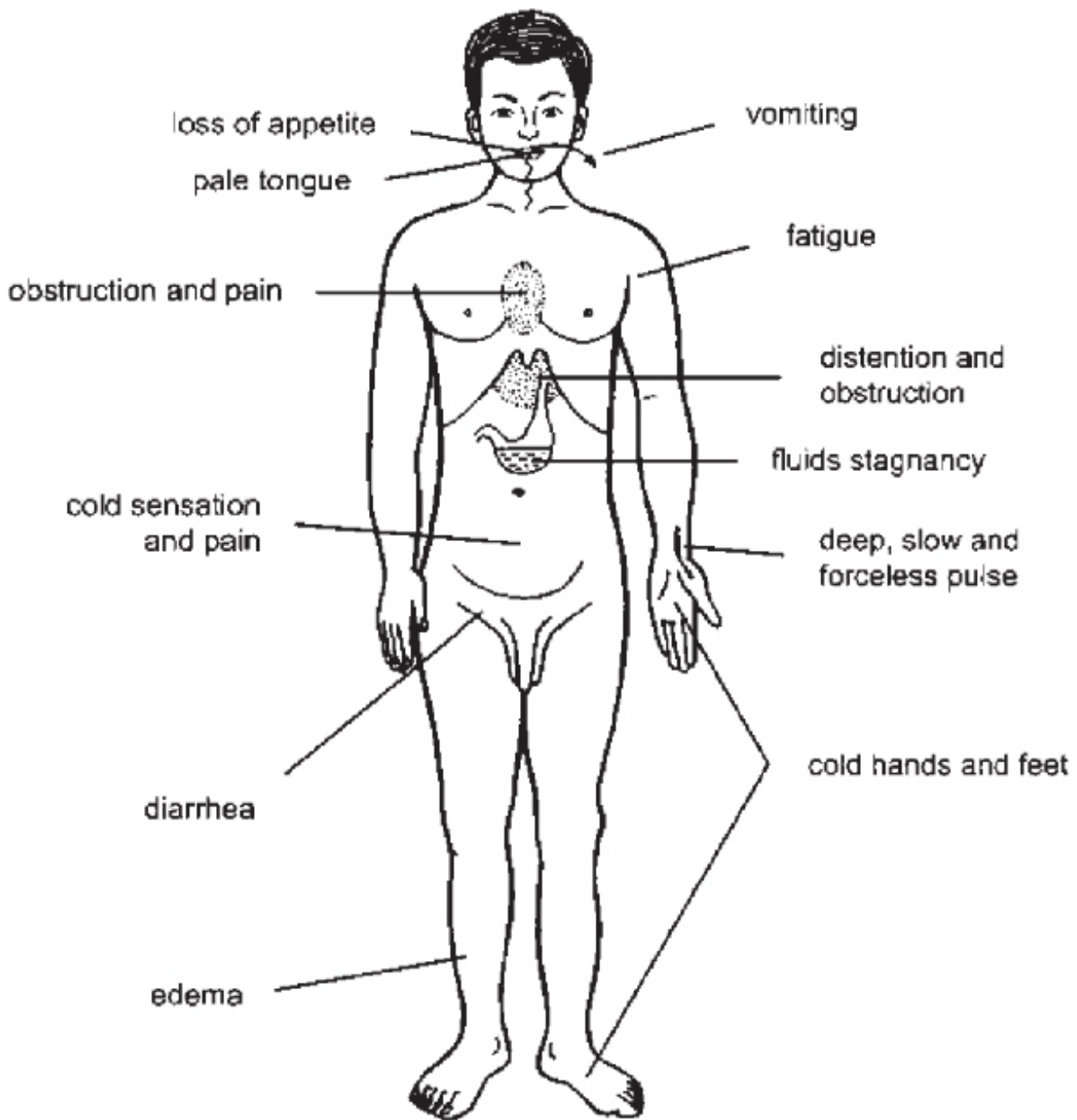
“I pee a lot and have diarrhea, sometimes three or four times a day.”

Louise was taking 500 mg of prednisone each day for many years, along with many other medications. Surprisingly, she wasn’t taking any pain pills despite her low back and joint pains. She was 5’3” tall and weighed 196 pounds. She had a moon face, looked distressed and depressed, and had pitting edema on both legs.

My impression was that Louise had multiple medical problems with chronic pain throughout her neck, upper and lower back, and upper and lower extremities. She had apparent mobility deficit; loss of strength, endurance, quickness of action, skill, stability, sense of security, and confidence. She clearly needed a more comprehensive medical follow-up. But I thought her gastrointestinal functions could be helped by an herbal preparation such as

Ginseng and Ginger Combination (Li Zhong Tang 理中湯)—an interior-chill conformation formula mainly used to relieve dampness inside the body.

The ingredients of **Ginseng and Ginger Combination** are ginseng, atractylodes, dried ginger, and licorice. The Chinese name for the formula means “middle section manager.” Ginseng has a strong effect on relieving the fullness sensation of the stomach and the obstruction in the subcardiac region. Atractylodes is an excellent herb for alleviating chill conditions in the digestive tract. Dried ginger is a stomach stabilizer and can relieve the cold-weakness conformations. Licorice, of course, is an excellent harmonizer. Together the formula is capable of removing the stagnant water from the stomach.



I wanted Louise to check with her primary care physician prior to taking **Ginseng and Ginger Combination** . It is an interior-chill conformation formula, mainly used to relieve dampness. It was thoroughly described in *Shang Han Lun* and *Chin Kuei Yao Lueh* . It is an important herbal medicine in TCM practice to treat digestive disorders, especially in relieving sensations of fullness, hardness, or obstruction in the substernal region. Since all ingredients except the neutral licorice are warming, this formula is used for interior-weak-chill conformations. It is quite useful in treating lax abdomen and gastritis in pale-complexioned individuals with weak-chill conformation. But if there are

annoying borborygmus, diarrhea, and vomiting, use of other formulas, such as **Four Major Herb Combination (Si Jun Zi Tang 四君子湯)** or **Six Major Herb Combination (Liu Jun Zi Tang 六君子湯)**, may be more appropriate.

For some reason, Louise did not return to see me. But I truly believed the formula would help her.

12-2: COMMONLY USED HERBAL FORMULAS THAT HELP THE DIGESTIVE SYSTEM

Ginseng and Ginger Combination (Li Zhong Tang 理中湯)

The ingredients are ginseng, atractylodes, ginger, and licorice.

Indications

1. Gastritis
2. Pale complexion or weak-chill conformation
3. Borborygmus
4. Flaccid abdominal wall

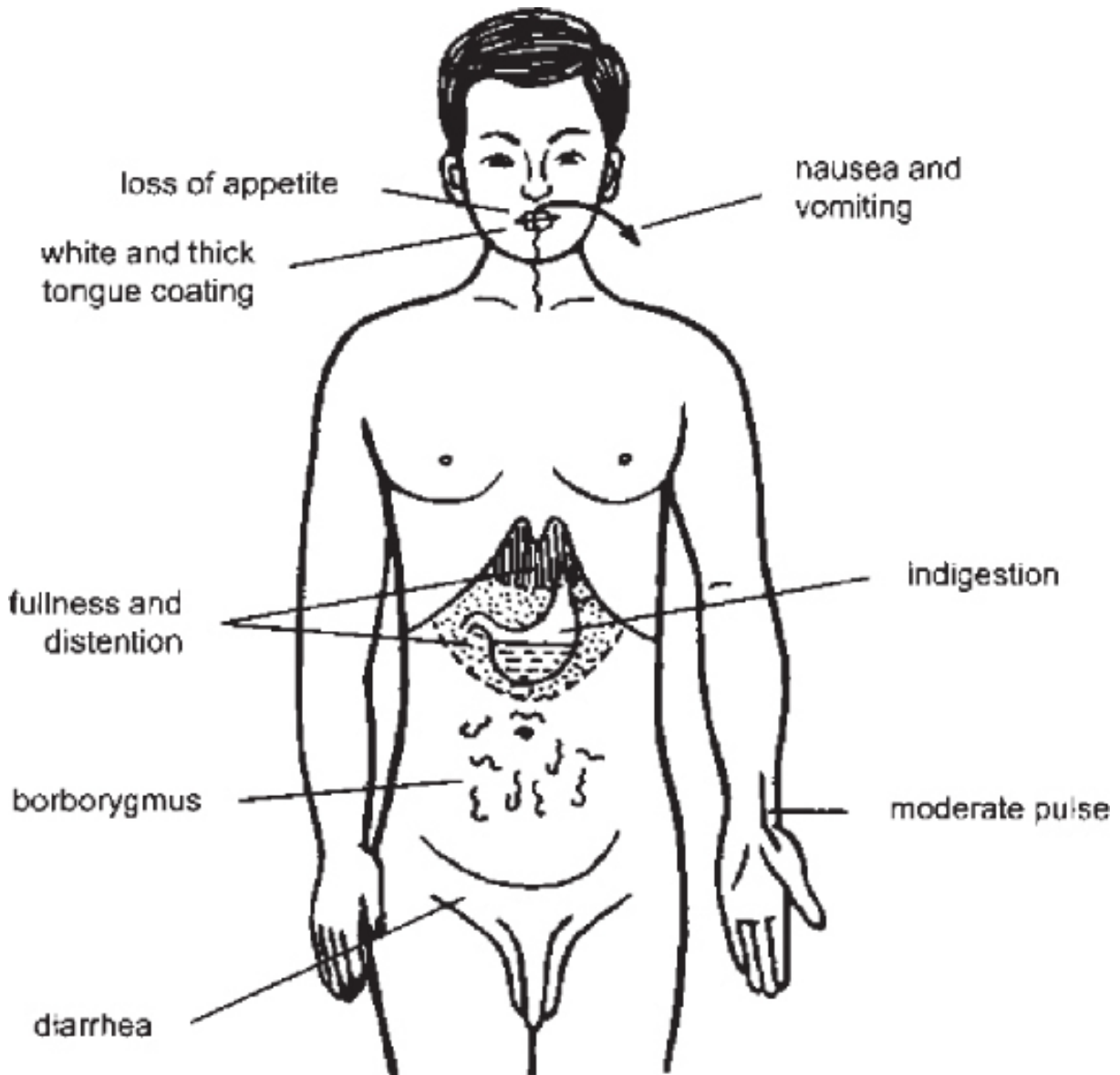
Magnolia and Ginger Formula (Ping Wei San 平胃散)

The ingredients are magnolia, raw ginger, jujube, licorice, atractylodes, and citrus. Magnolia, atractylodes, and citrus are very drying and dispersive and very effective in removing stagnant water from the stomach. But the conformation must not be very weak, and the condition must be due to inflammation for maximum effectiveness.

Indications

1. Weak-chill conformations with stagnant water in the stomach.
2. Acute and chronic gastritis and indigestion.

3. Although it can be used for stagnant water in the stomach a borborygmus, it is less effective if a patient has either a strong-fev conformation or an extremely weak conformation.



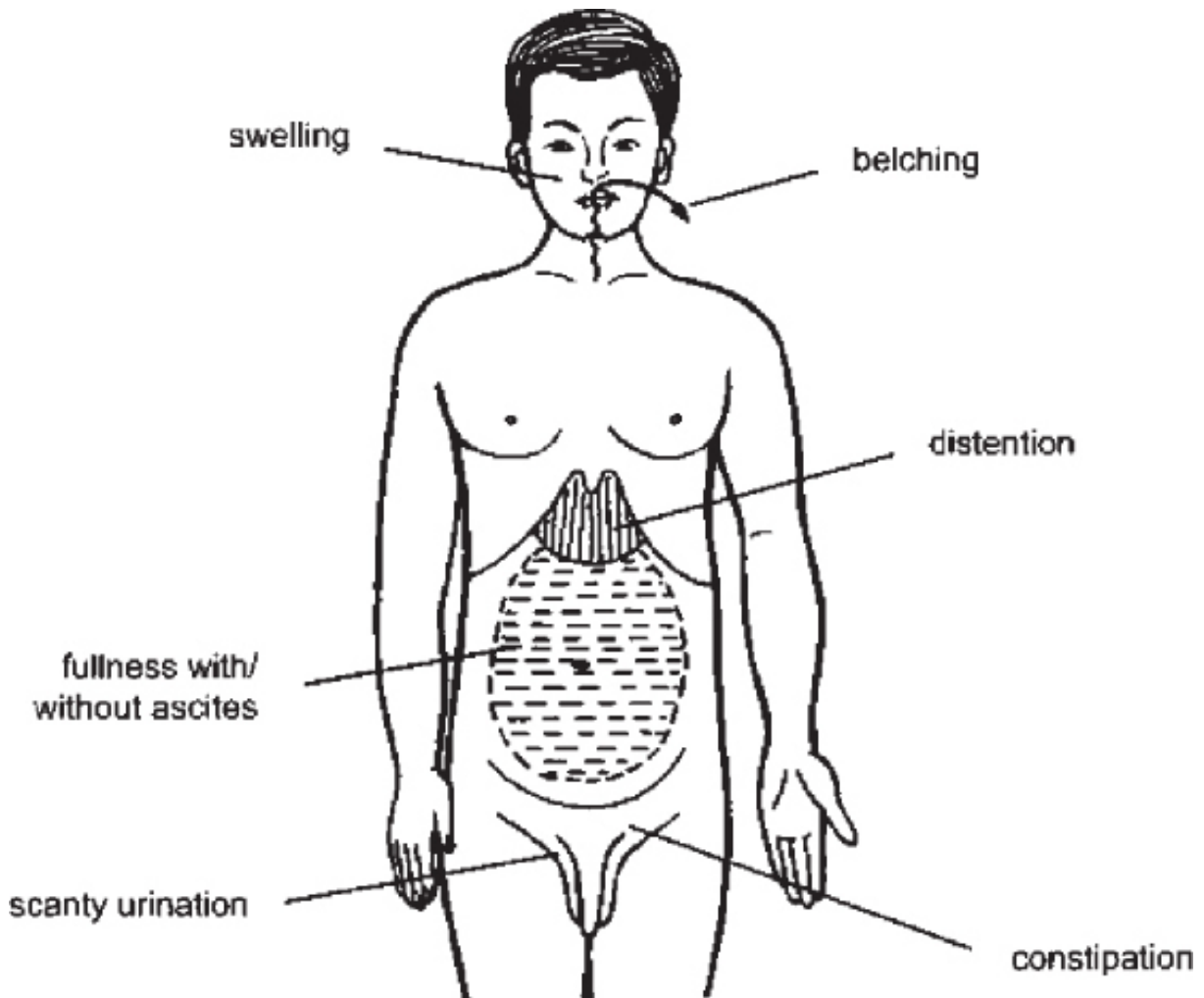
Hoelen and Alisma Combination (Fen Xiao Tang 分消湯)

The ingredients of this formula are atractylodes, polyporus, inula, hoelen, alisma, ginger, citrus, areca, juncus, cardamom, chih-shih, cyperus, and

magnolia bark. This formula's main functions are to promote the flow of Qi, remove stagnation, and disperse dampness.

Indications

1. Stagnation in the middle warmer
2. Focal distention in the epigastrium
3. Abdominal fullness and discomfort
4. Poor appetite
5. Indigestion
6. Gastritis
7. Belching
8. Nausea
9. Edema
10. Insufficient urine
11. Easily constipated
12. Peritonitis
13. Nephritis
14. Early stage of liver cirrhosis
15. Ascites



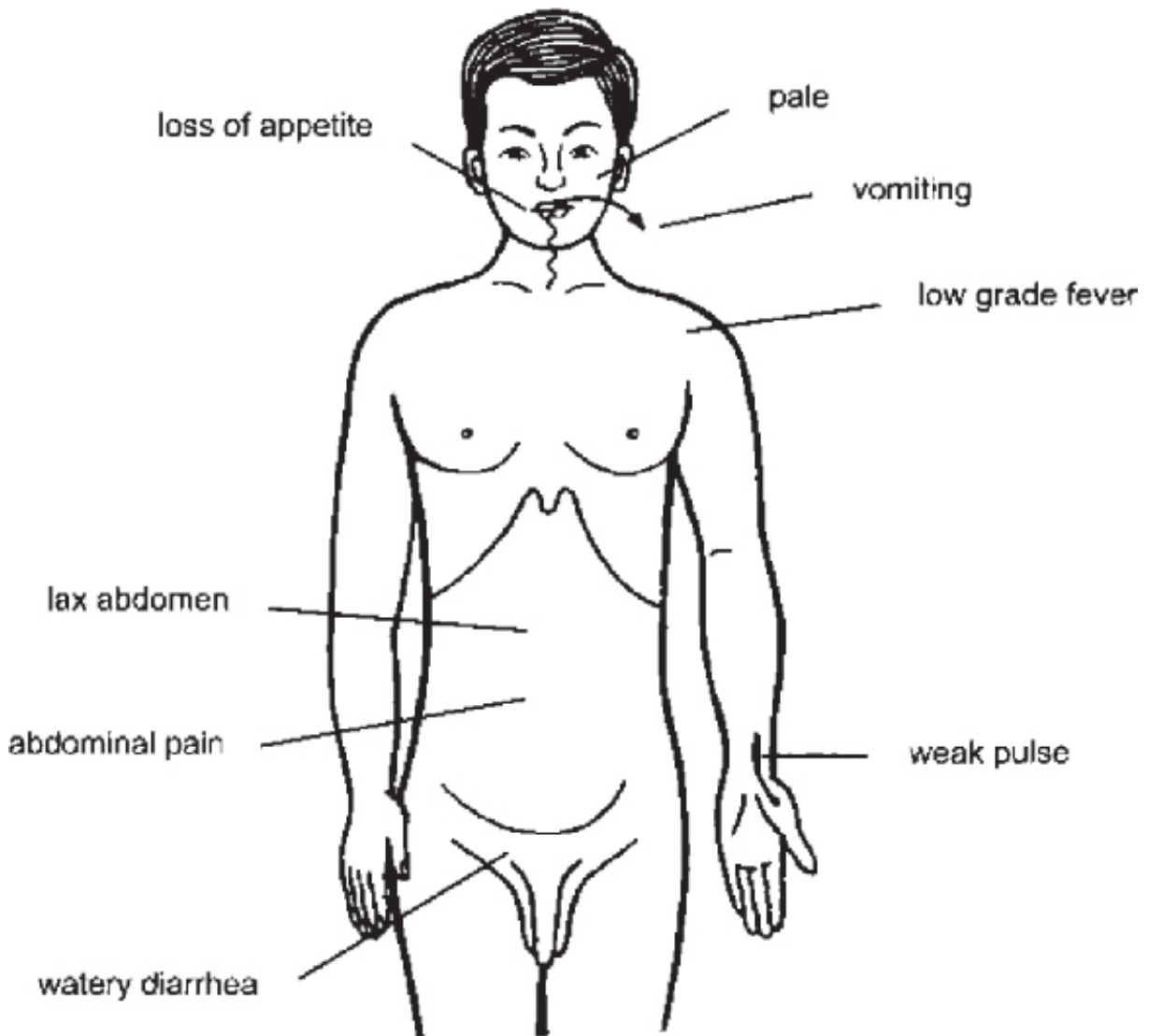
Lotus and Citrus Combination (Qi Pi Tang 啟脾湯)

The ingredients of this formula are ginseng, atractylodes, hoelen, licorice, raw ginger, jujube, citrus, alisma, Crataegus, lotus, and dioscorea. The main functions of the formula are to strengthen the spleen, promote digestion, and stop diarrhea.

Indications

1. Spleen and stomach deficiency
2. Indigestion
3. Poor appetite
4. Emaciation with poor skin complexion

5. Lassitude
6. Low-grade fever
7. Diarrhea
8. Abdominal distention or pain
9. Vomiting
10. Weak arterial pulses
11. Chronic gastroenteritis
12. Poor appetite following illnesses



Pueraria Flower Combination (Ge Hua Jie Cheng Tang 葛花解酲湯)

The ingredients of this formula are pueraria flower, hoelen, polyporus, alisma, cardamom, cluster, shen-chu, saussurea, dried ginger, citrus, blue citrus peel, ginseng, and atractylodes. The main functions of this formula are to strengthen the spleen, eliminate dampness, warm the middle warmer, and relieve discomfort due to overindulgence in alcohol.

Indications

1. A thick and greasy tongue coating
2. Slippery arterial pulses
3. Dizziness
4. Vomiting
5. Irritability
6. Chest fullness or epigastrium distention
7. Loss of appetite
8. Involuntary movement of the limbs
9. Difficult urination
10. Hangover

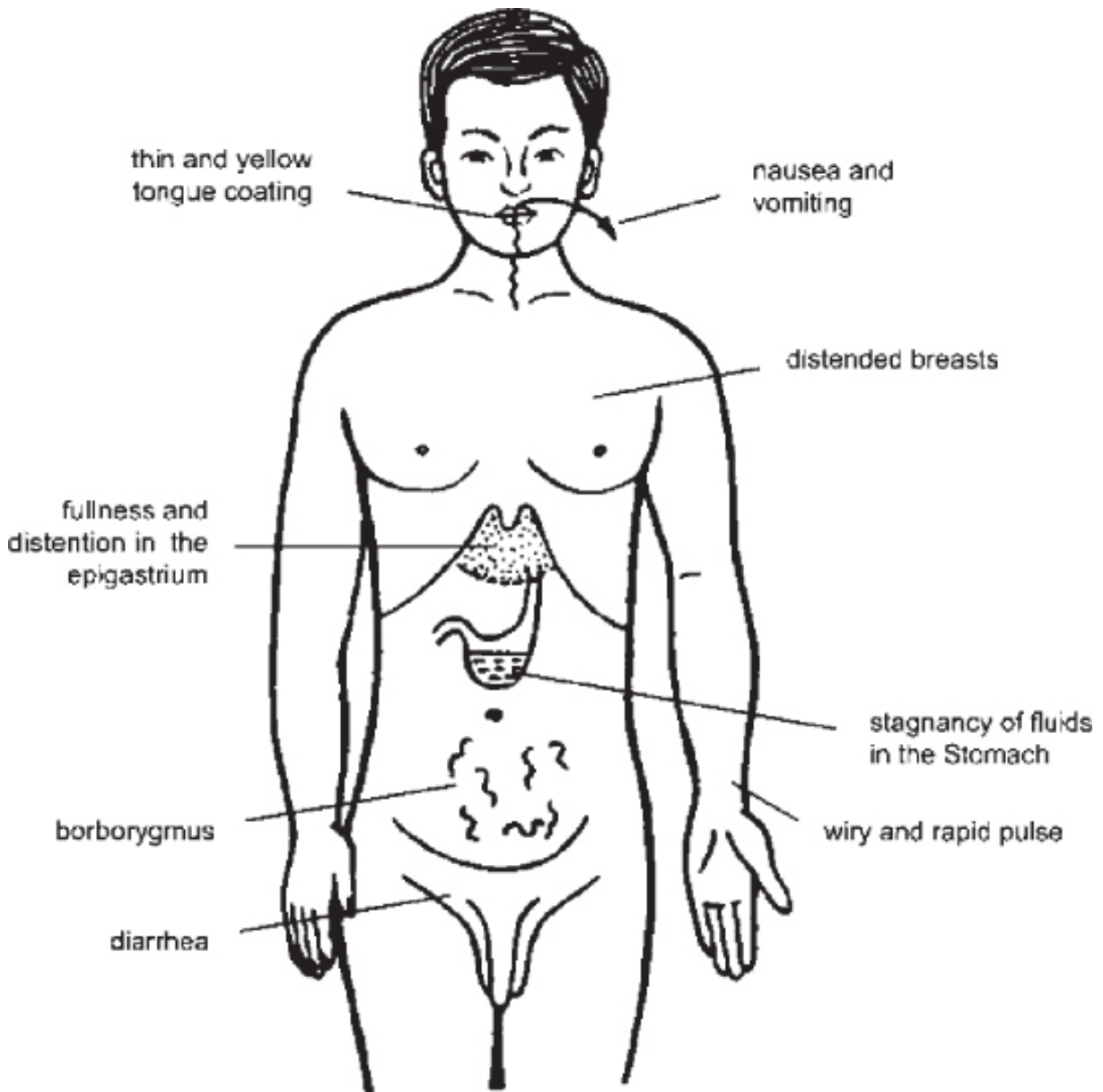
12-3: HERBAL FORMULAS FOR ANOREXIA

Pinellia Combination (Ban Xia Xie Xin Tang 半夏瀉心湯)

The ingredients of this formula are coptis, scute, dry ginger, ginseng, pinellia, jujube, and licorice.

Indications

1. Anorexia
2. Stomach distention and stagnation
3. Nausea
4. Vomiting
5. Diarrhea
6. Gastric atony
7. Distention and fullness sensation under the left side chest wall

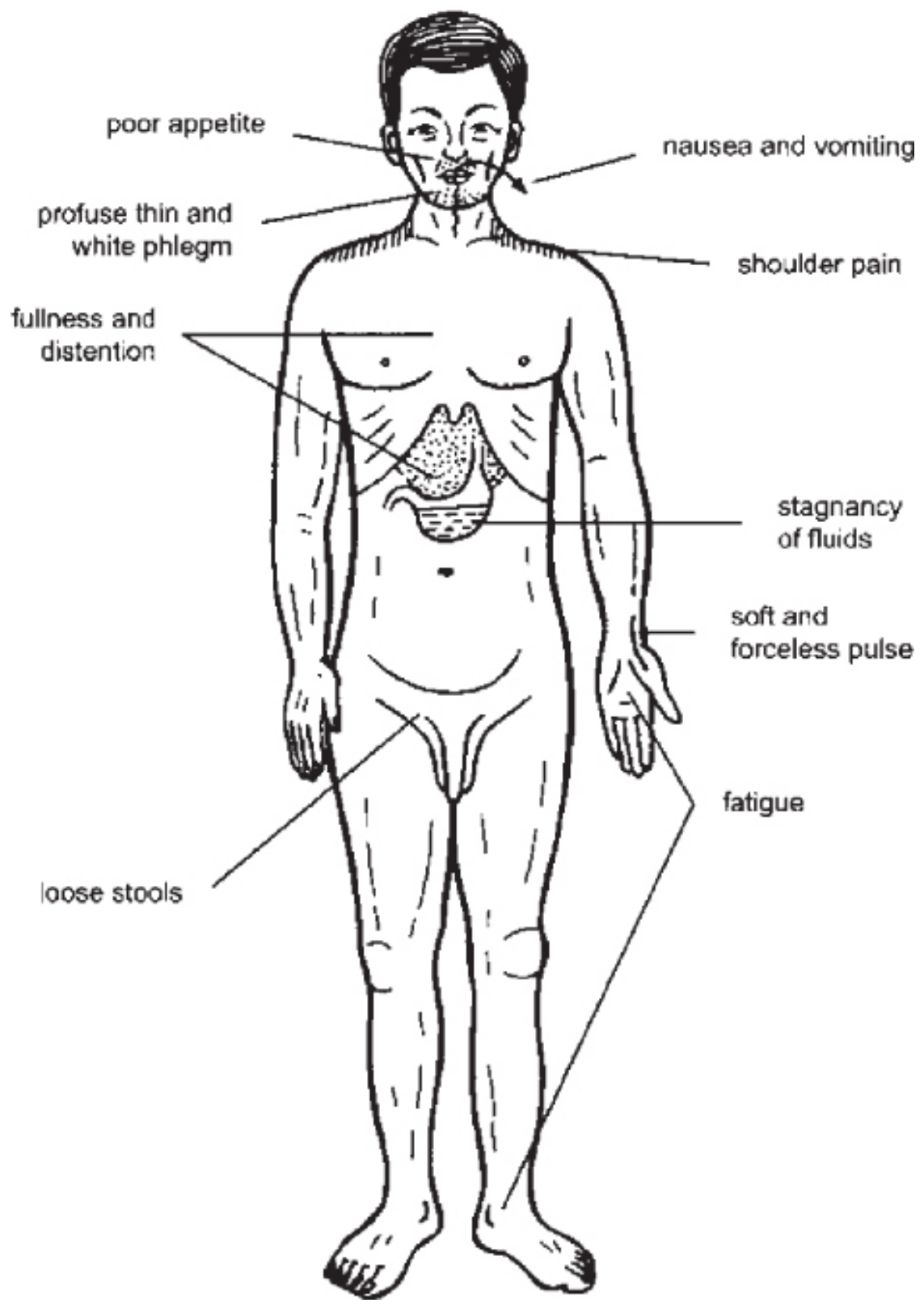


Six Major Herb Combination (Liu Jun Zi Tang 六君子湯)

The ingredients of this formula are ginseng, atractylodes, hoelen, licorice, pinellia, citrus, raw ginger, and jujube.

Indications

1. Anorexia
2. Indigestion
3. Water stasis in the stomach

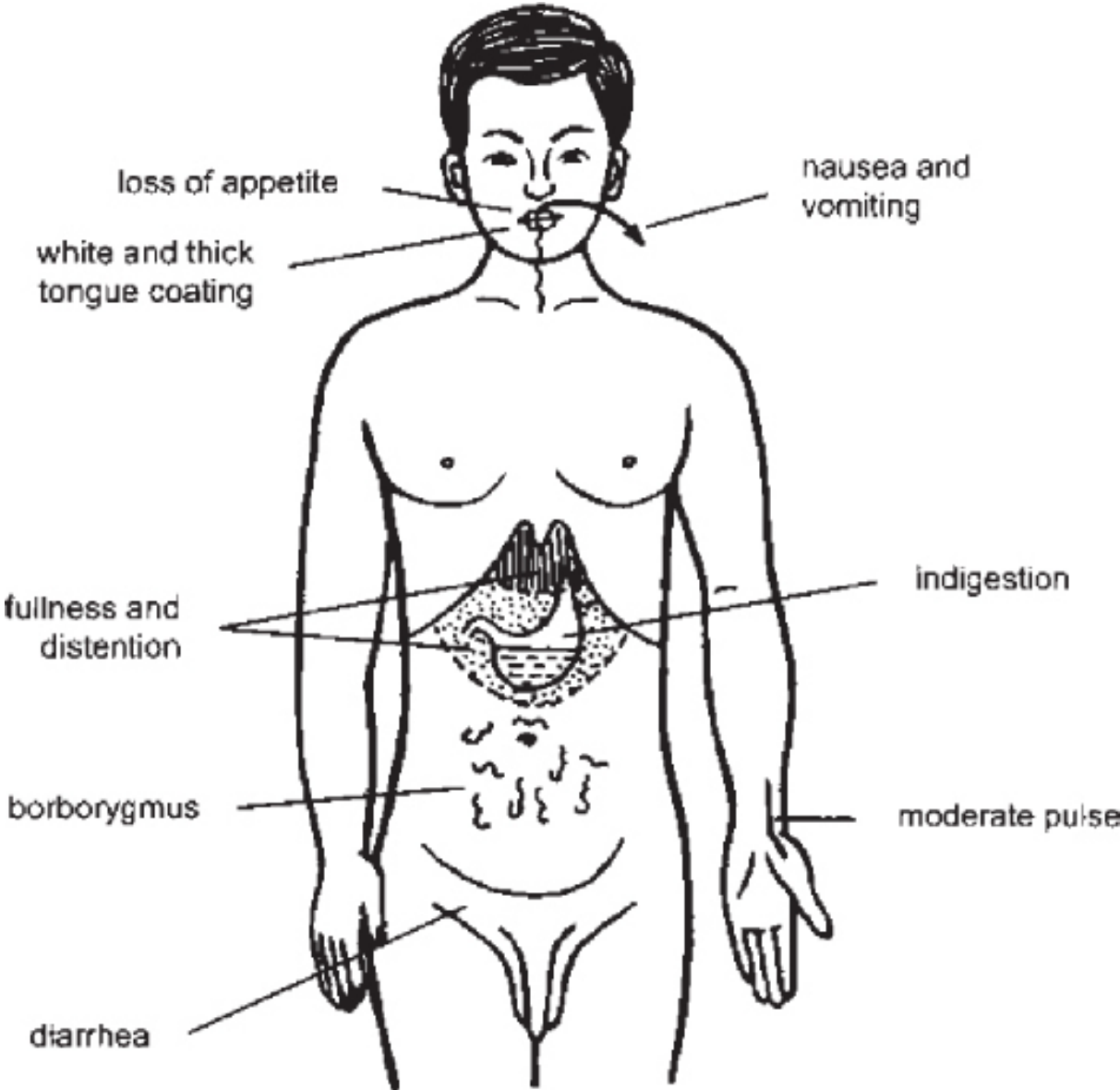


Magnolia and Ginger Formula (Ping Wei San 平胃散)

The ingredients of this formula are raw ginger, jujube, licorice, magnolia, atractylodes, and citrus.

Indications

- 1. Anorexia
- 2. Indigestion

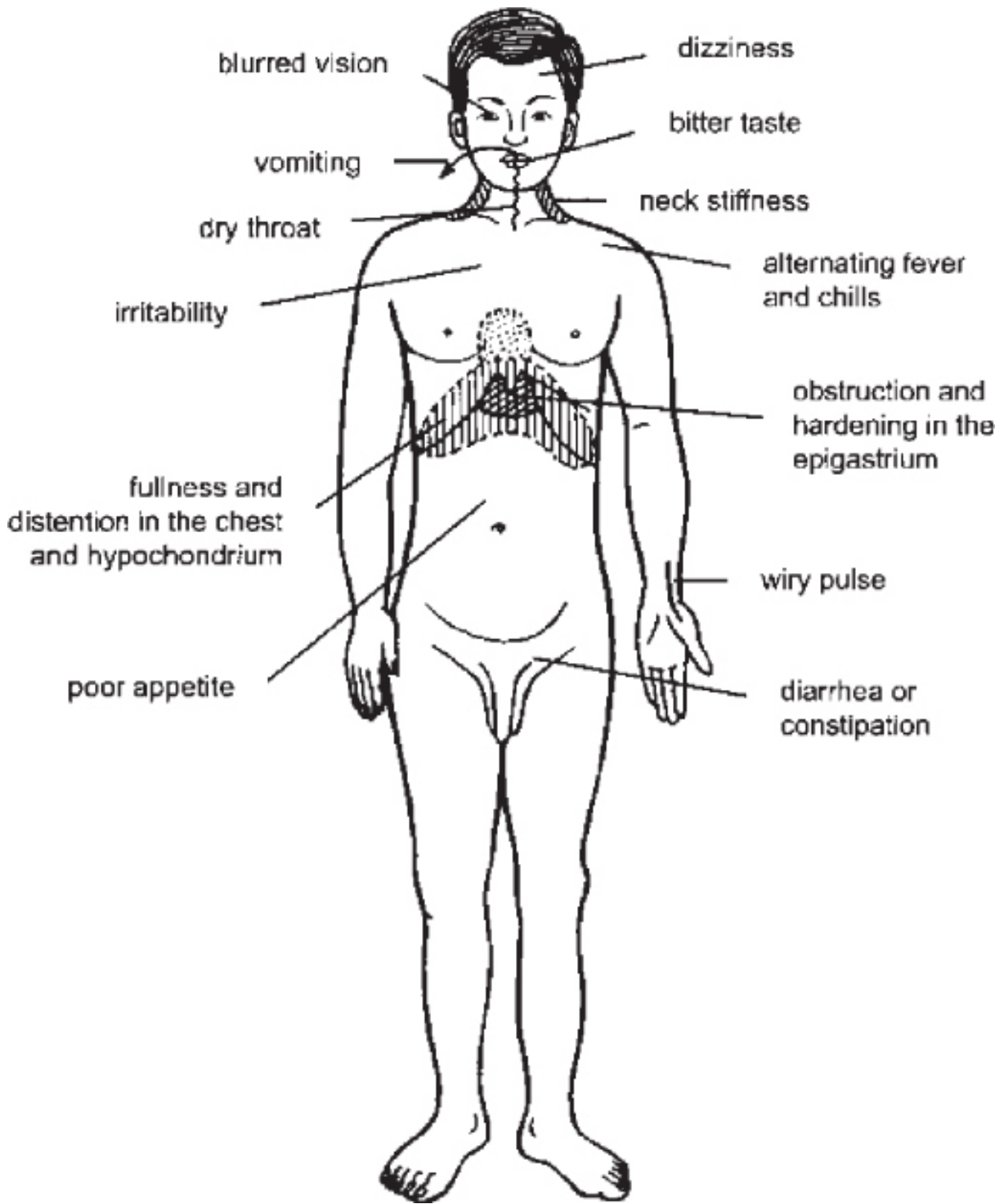


Minor Bupleurum Combination (小柴胡湯)

The ingredients of this formula are bupleurum, scute, pinellia, raw ginger, jujube, ginseng, and licorice.

Indications

1. Anorexia especially caused by liver disorders
2. Nausea
3. Easily fatigued
4. A bitter taste in the mouth
5. White tongue fur
6. Gastritis

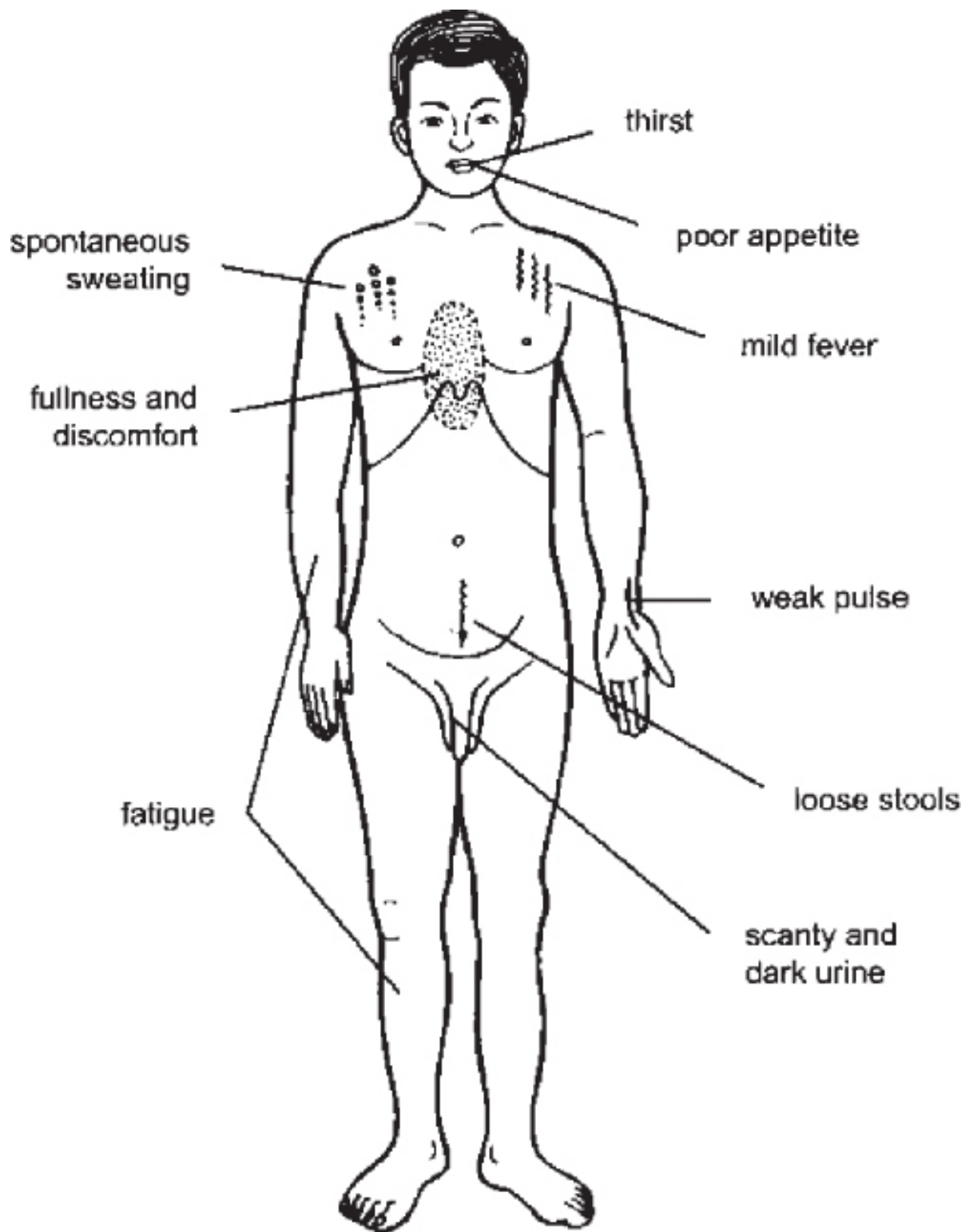


Astragalus and Atractylodes Combination (Qing Shu Yi Qi Tang 清暑益氣湯)

The ingredients of this formula are ginseng, atractylodes, licorice, tang-kuei, astragalus, citrus, ophiopogon, schizandra, and phellodendron.

Indications

1. Anorexia, especially due to heat exhaustion
2. Diarrhea
3. Generalized lassitude

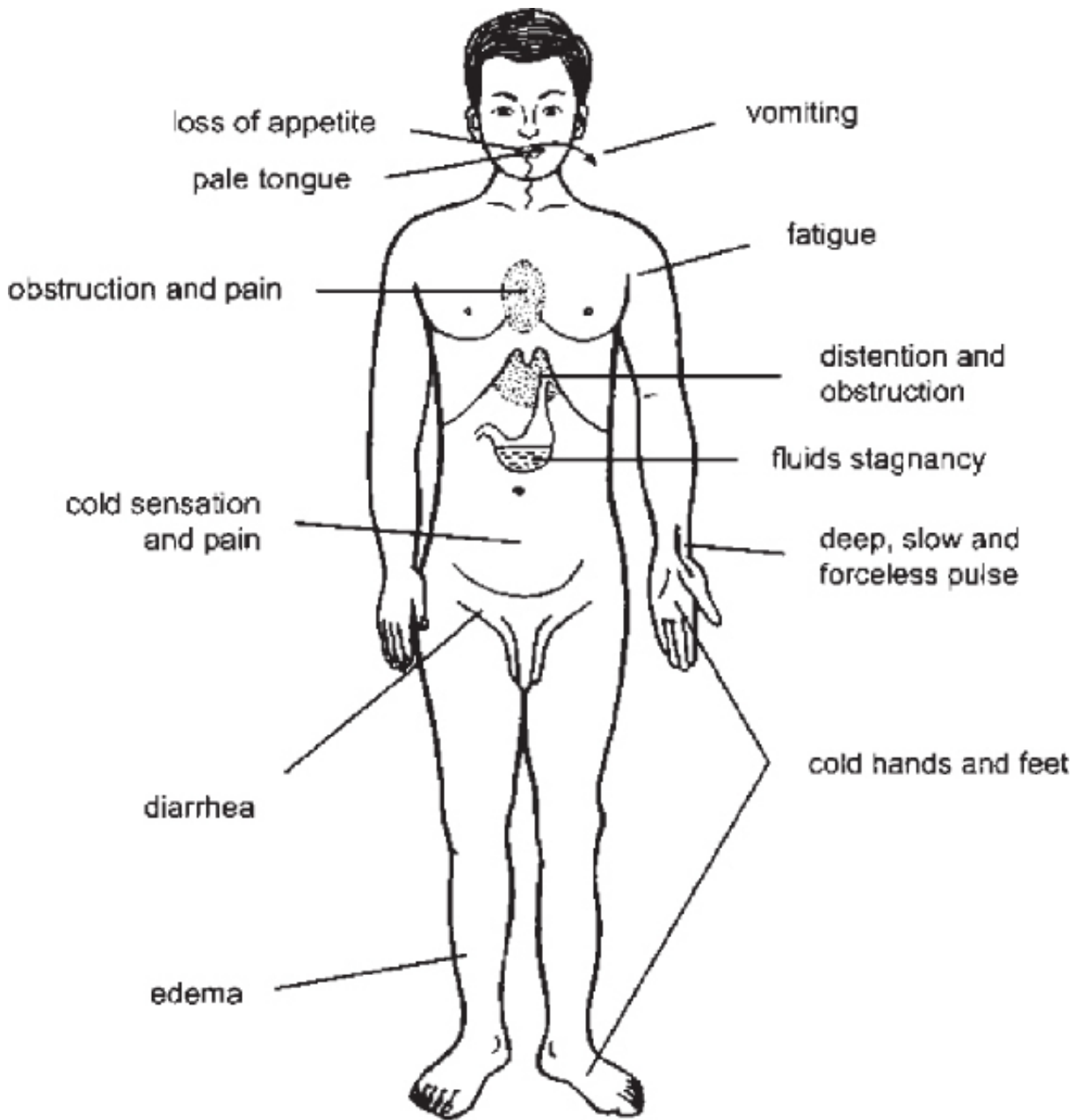


Ginseng and Ginger Combination (Li Zhong Tang 理中湯)

The ingredients of this formula are ginseng, dried ginger, atractylodes, and licorice.

Indications

1. Anorexia
2. Cold hands and feet
3. Polyuria
4. Diarrhea
5. Gastrointestinal weakness
6. Stomachache
7. Nausea
8. Vomiting
9. Weakness
10. Exhaustion



Ginseng and Astragalus Combination (Bu Zhong Yi Qi Tang 補中益氣湯)

The ingredients of this formula are ginseng, atractylodes, licorice, raw ginger, jujube, tang-kuei, astragalus, citrus, cimicifuga, and bupleurum.

Indications

1. Anorexia due to fatigue
2. Lack of vitality
3. A physically weak constitution
4. Lassitude
5. Night sweats
6. Regression of gastrointestinal function



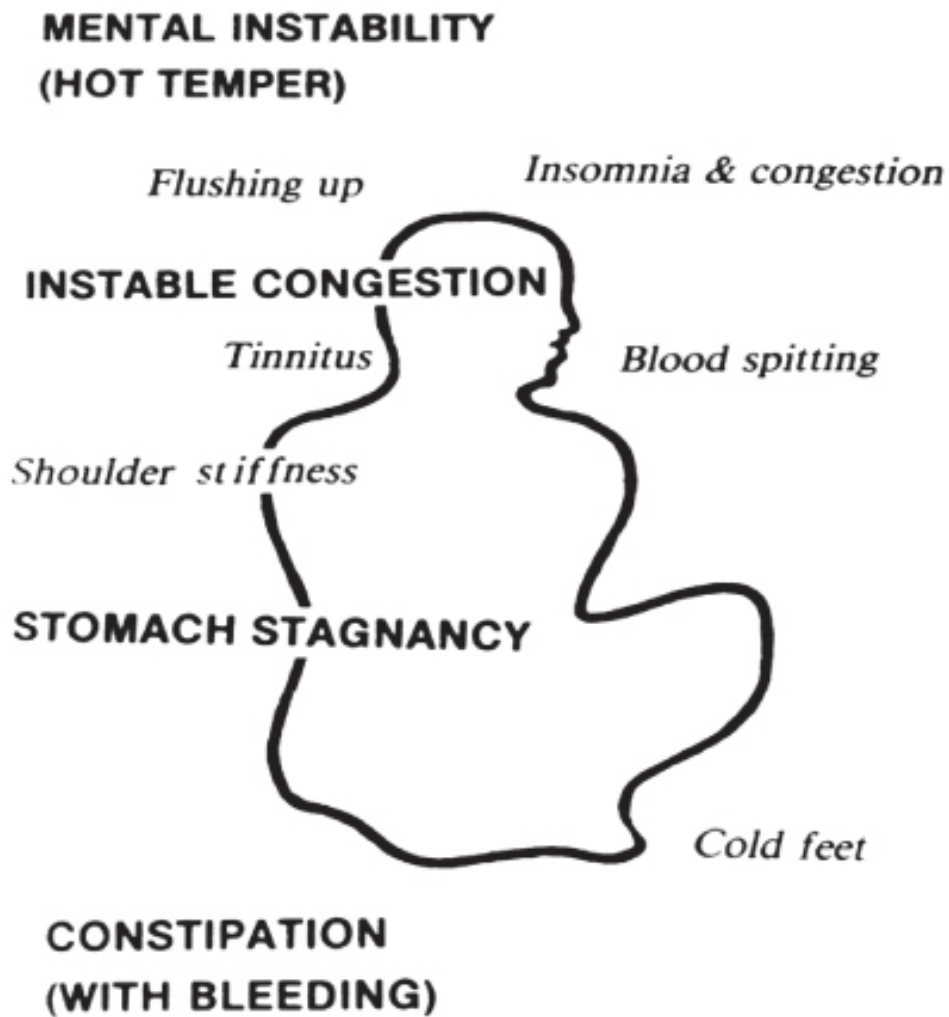
12-4: HERBAL FORMULAS FOR CONSTIPATION

Coptis and Rhubarb Combination (San Huang Xie Xin Tang 三黃瀉心湯)

The ingredients of this formula are coptis, rhubarb, and scute.

Indications

1. Constipation
2. Physically fit, but a tendency to “flush up”
3. Mental instability
4. Anxiety

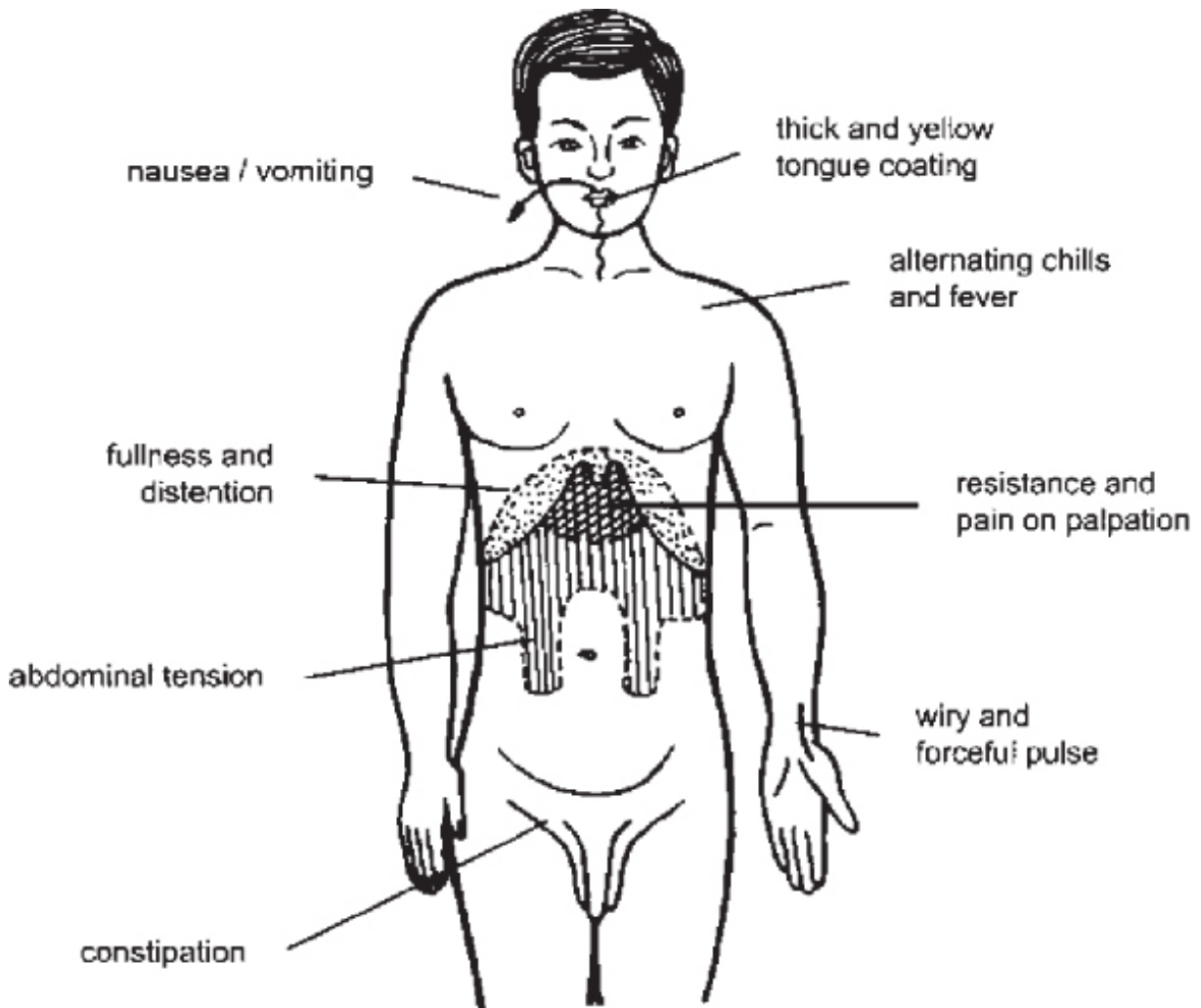


Major Bupleurum Combination (Da Chai Hu Tang 大柴胡湯)

The ingredients of this formula are bupleurum, scute, pinellia, raw ginger, jujube, chih-shih, peony, and rhubarb.

Indications

1. Frequent constipation
2. Headaches due to hypertension
3. Stiff shoulders
4. Thoraco-costal distress
5. Abdominal distention
6. Gastritis

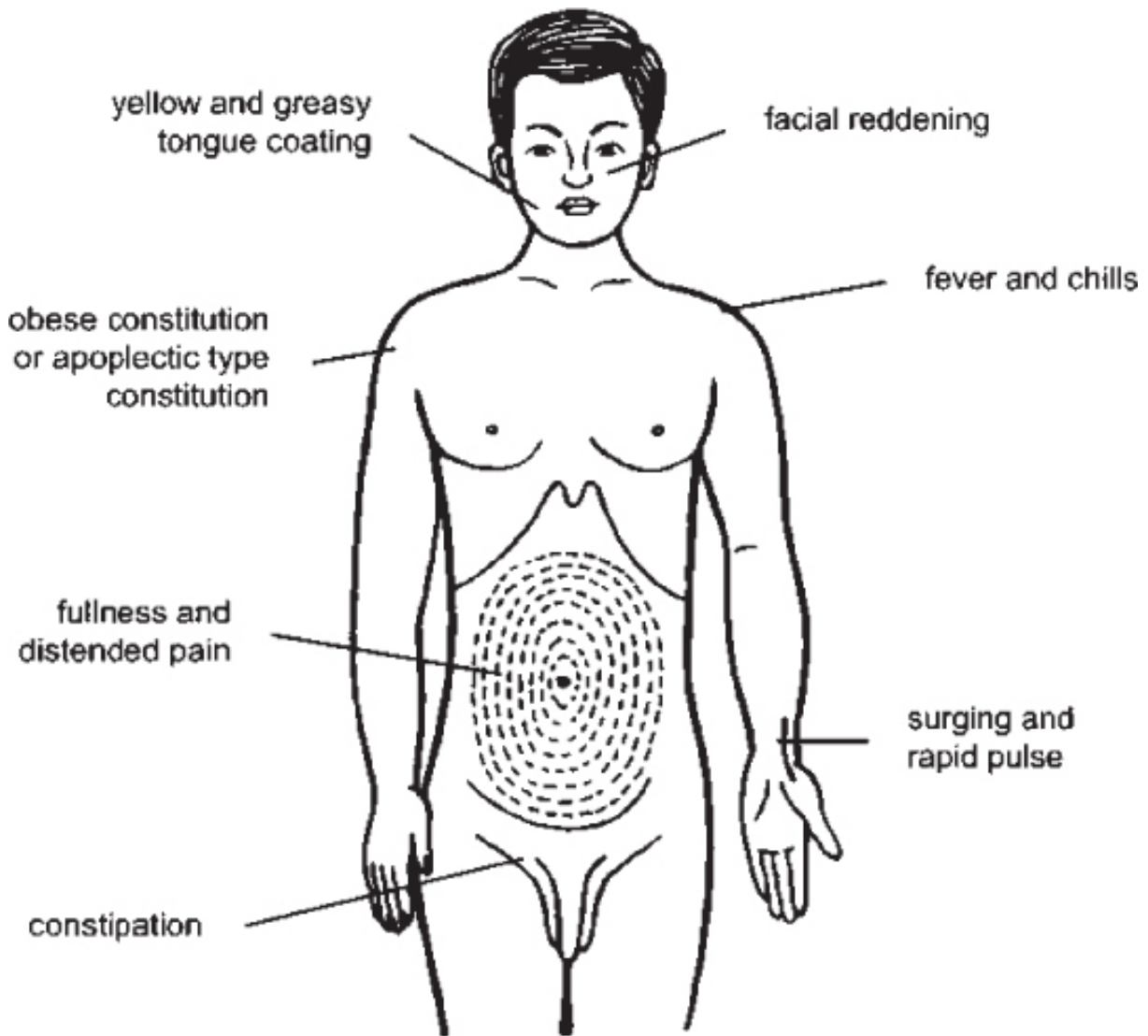


Siler and Platycodon Formula (Fang Feng Tong Sheng San 防風通聖散)

The ingredients of this formula are rhubarb, mirabilitum, licorice, ma-huang, gypsum, raw ginger, atractylodes, tang-kuei, cnidium, peony, menthe, forsythia, schizonepeta, slier, scute, gardenia, talc, and platycodon.

Indications

1. Obese, with habitual constipation
2. With thoraco-costal distress

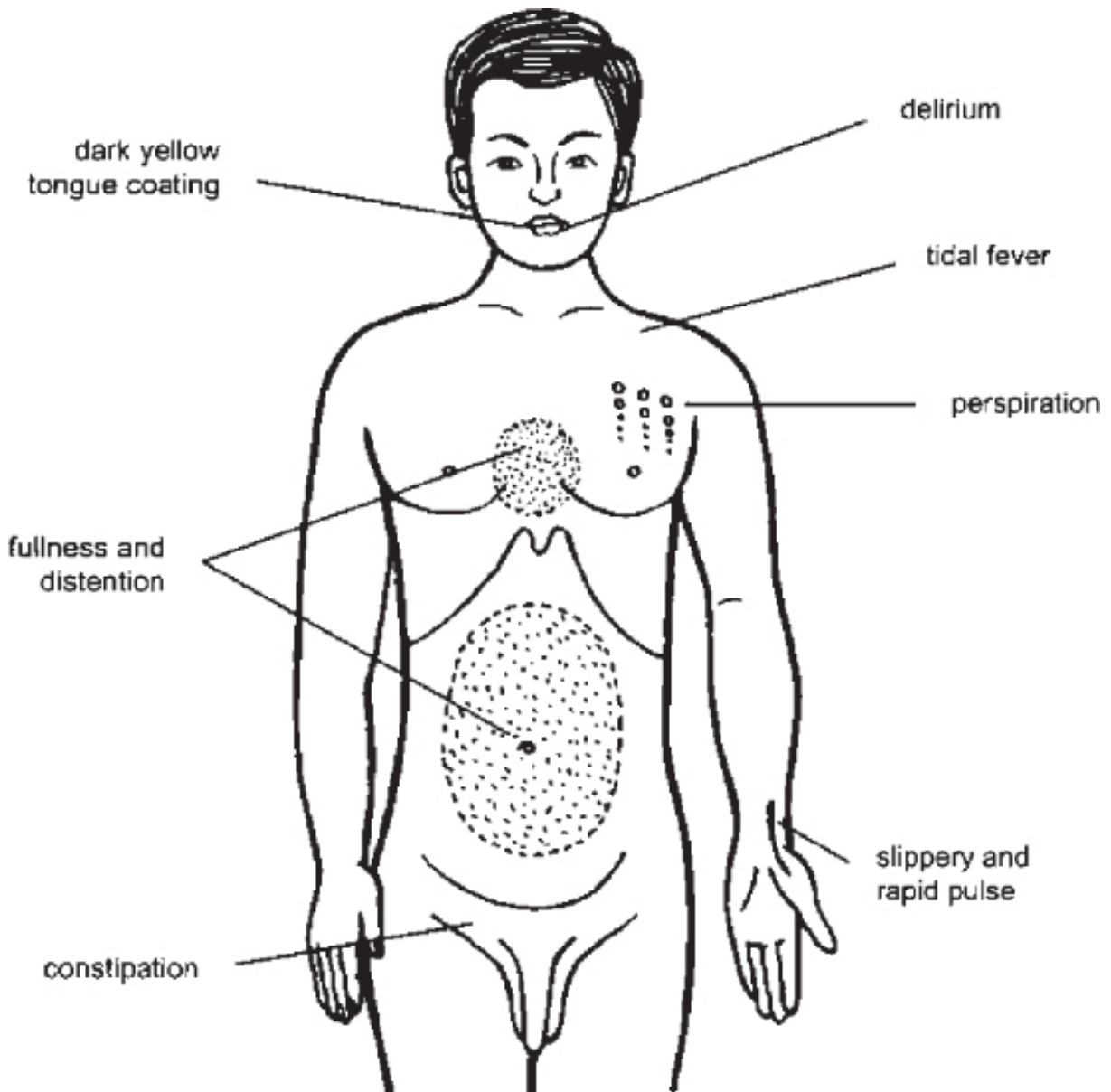


Minor Rhubarb Combination (Xiao Cheng Qi Tang 小承氣湯)

The ingredients of this formula are rhubarb, chih-shih, and magnolia bark.

Indications

1. Constipation with abdominal distention
2. Pressure sensation around the umbilicus

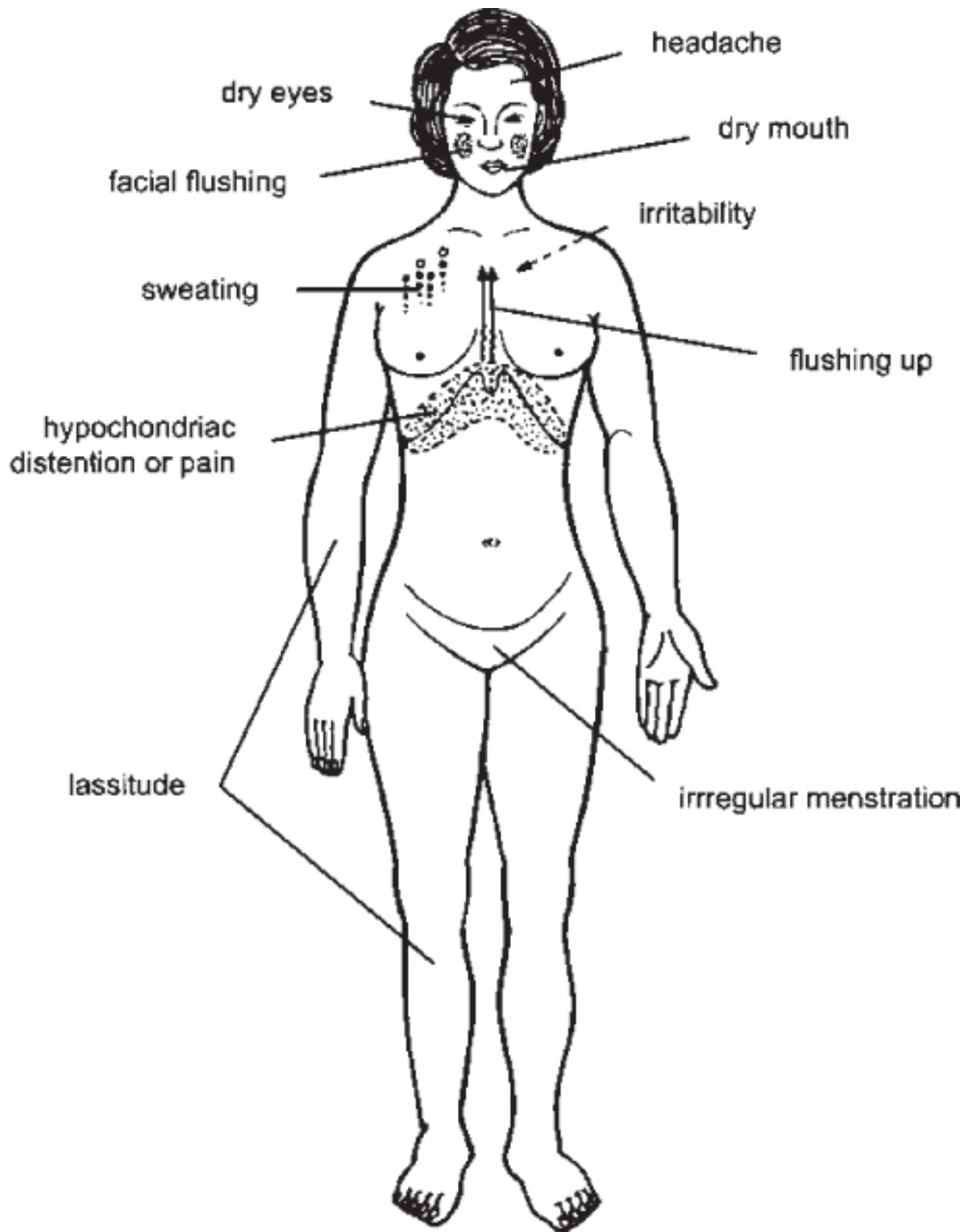


Bupleurum and Peony Formula (Jia Wei Xiao Yao San 加味道遙散)

The ingredients of this formula are bupleurum, peony, licorice, atractylodes, hoelen, tang-kuei, ginger, mentha, moutan, and gardenia.

Indications

1. For women with constipation during menopause
2. Constipation with autonomic nervous system disorders



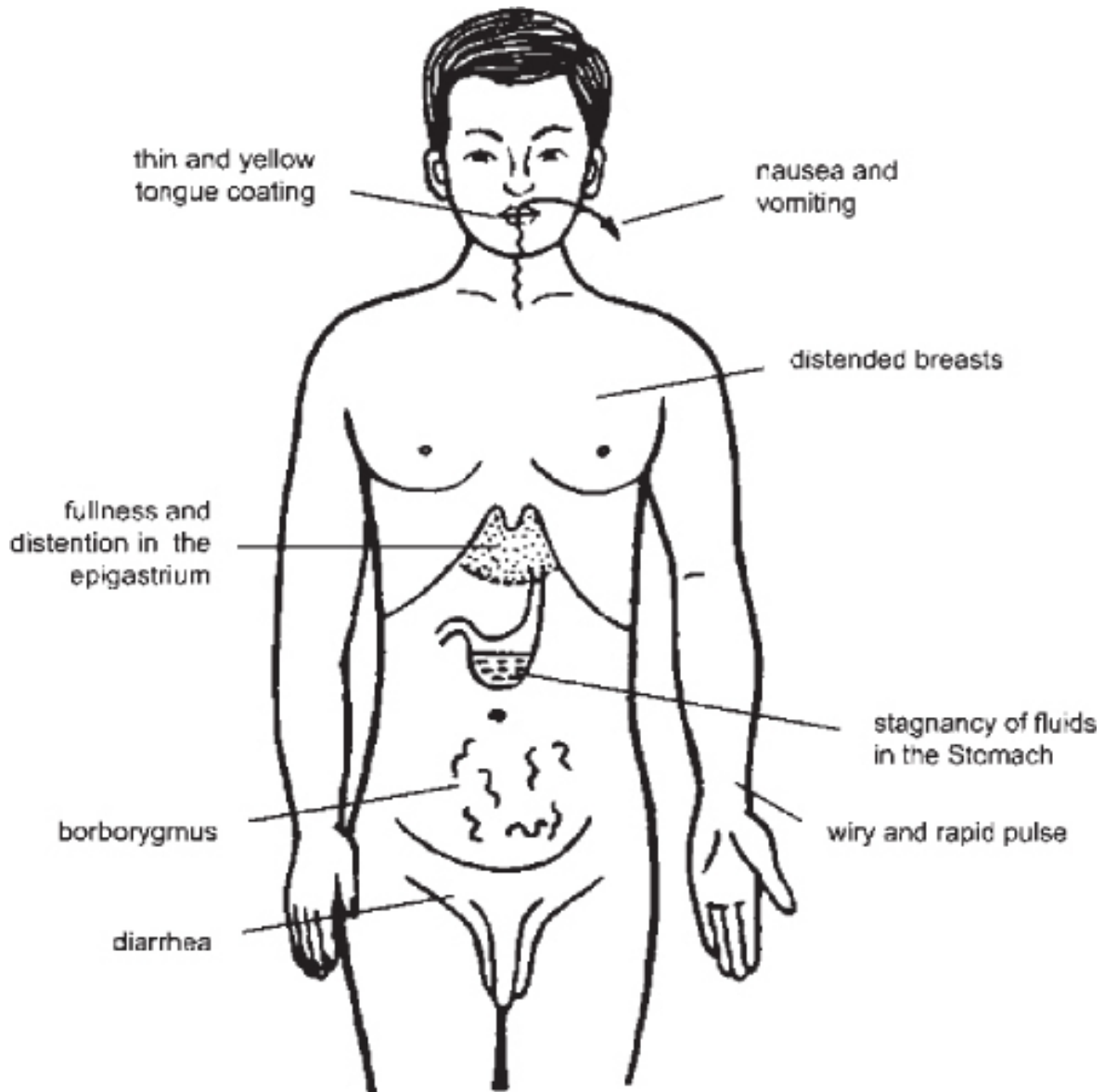
12-5: HERBAL FORMULAS FOR DIARRHEA

Pinellia Combination (Ban Xia Xie Xin Tang 半夏瀉心湯)

This is probably the formula of choice for diarrhea in general. The ingredients of this formula are pinellia, coptis, scute, dry ginger, ginseng, jujube, and licorice.

Indications

1. Diarrhea
2. Nausea
3. Vomiting
4. Anorexia
5. Abdominal gas
6. Indigestion
7. Gastritis
8. Poor gastrointestinal function



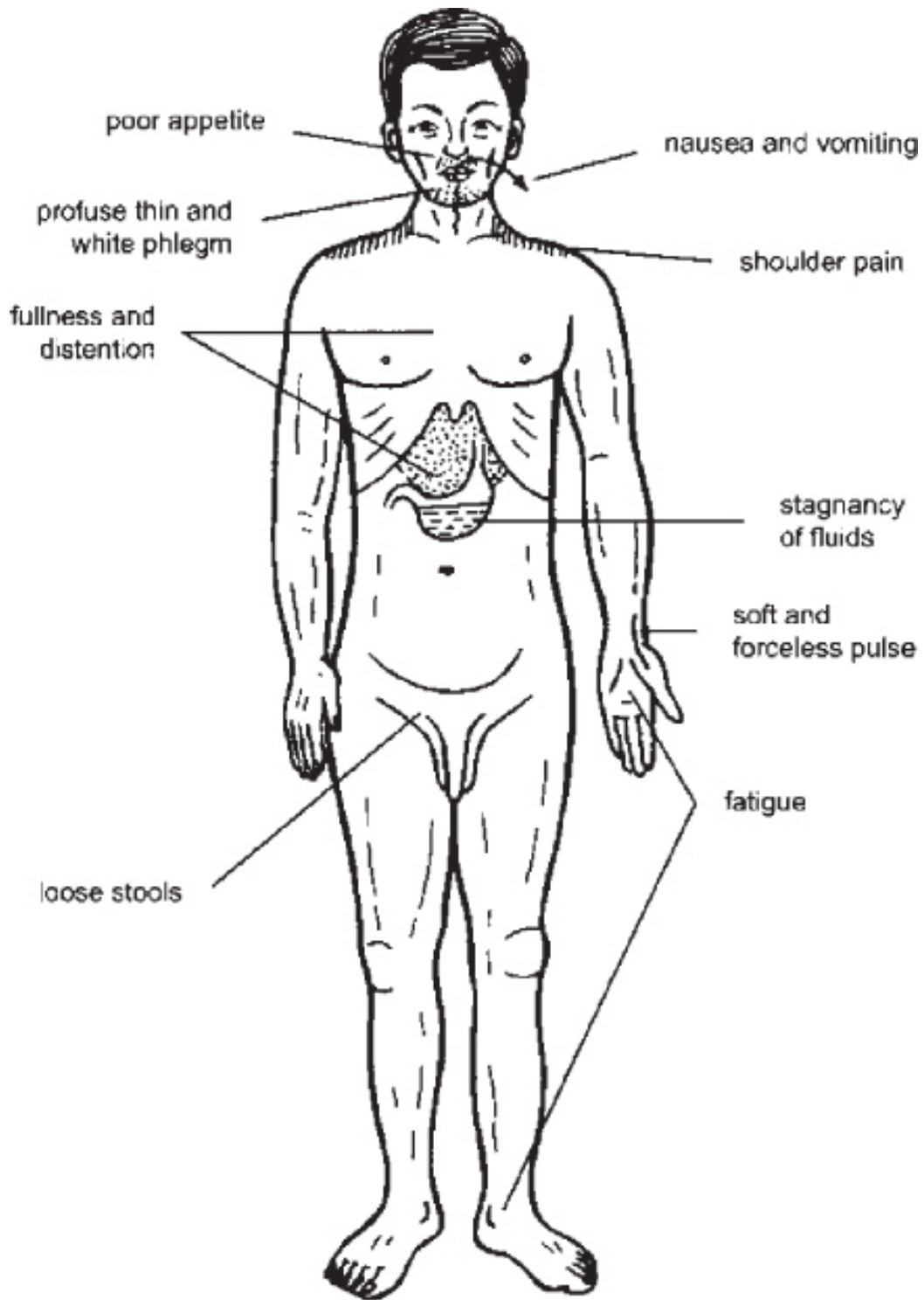
Six Major Herb Combination (Liu Jun Zi Tang 六君子湯)

The ingredients of this formula are ginseng, Atractylodes, hoelen, licorice, pinellia, citrus, raw ginger, and jujube.

Indications

1. Diarrhea

2. Gastric weakness
3. Gastritis
4. Stomachache
5. Anorexia
6. A feeling of distention and stagnation in the stomach
7. Indigestion
8. Vomiting
9. Easily fatigued
10. Low energy level

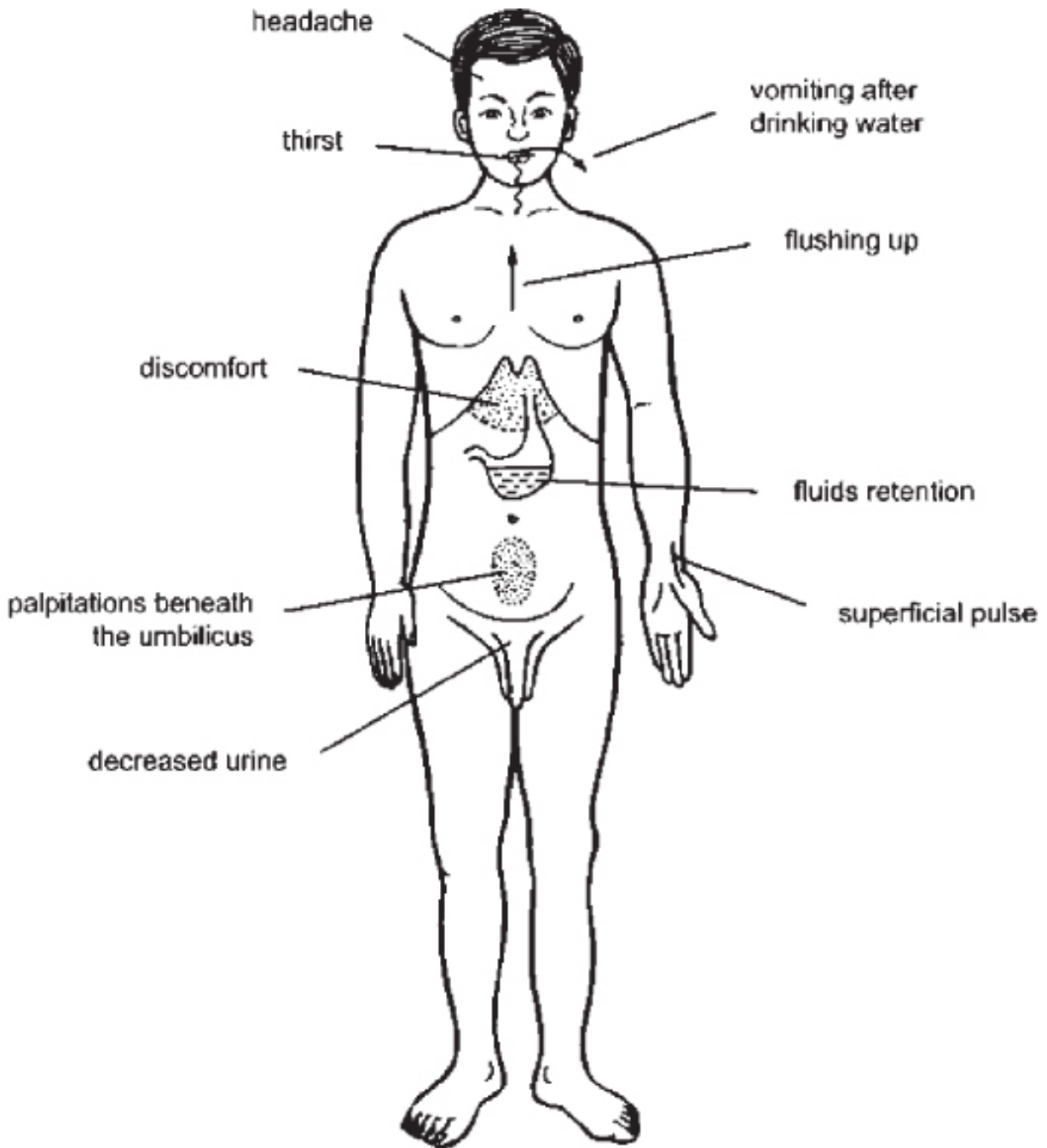


Hoelen Five Herb Formula (Wu Ling San 五苓散)

The ingredients of this formula are hoelen, alisma, polyporus, atractylodes, and cinnamon.

Indications

1. Diarrhea
2. Thirst with abdominal pain
3. Nausea, vomiting
4. Headaches
5. Edema
6. Heat stroke

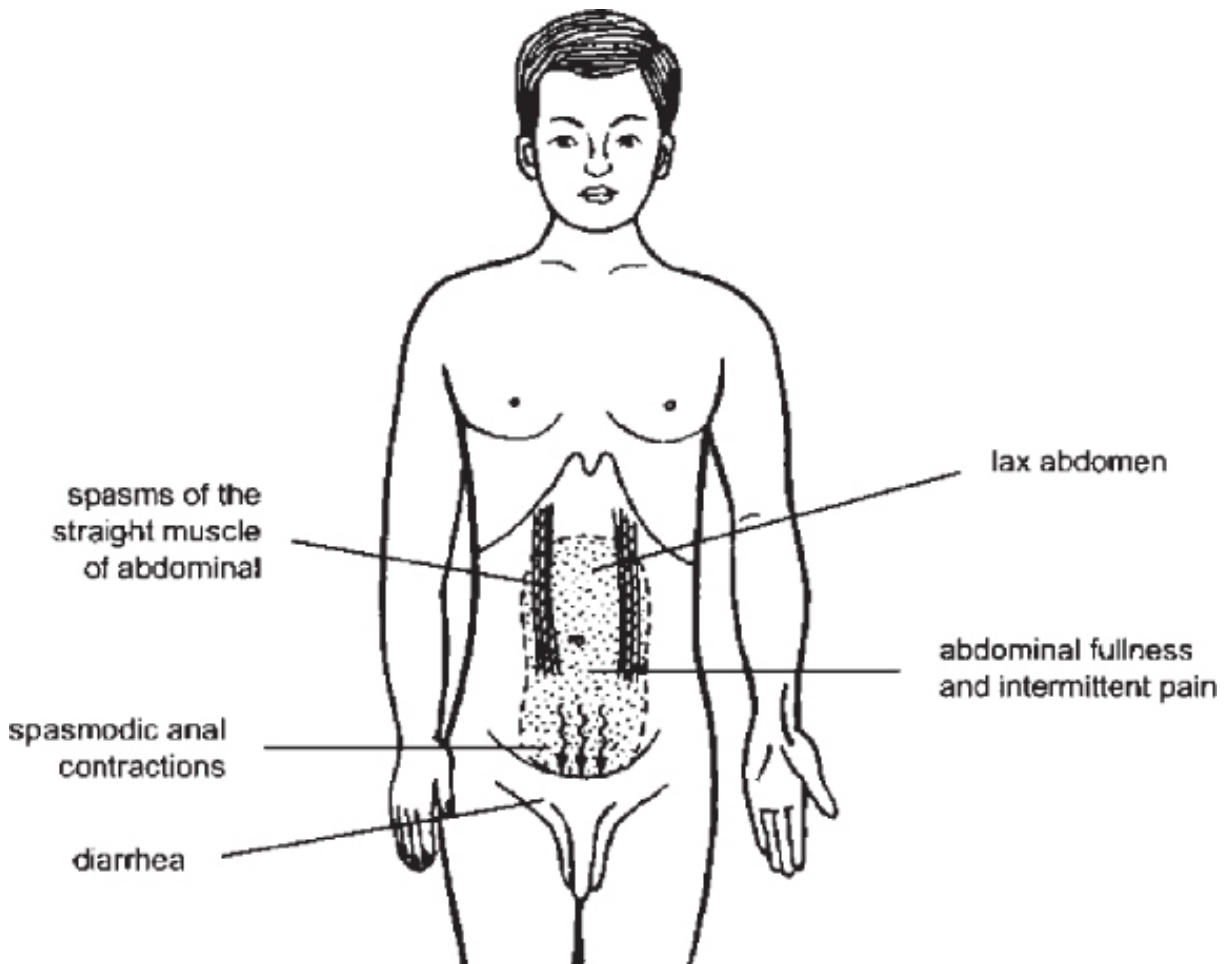


Cinnamon and Peony Combination (Gui Zhi Jia Shao Yao Tang 桂枝加芍藥湯)

The ingredients of this formula are cinnamon, peony, raw ginger, jujube, and licorice.

Indications

1. Diarrhea with abdominal pain
2. Abdominal distention

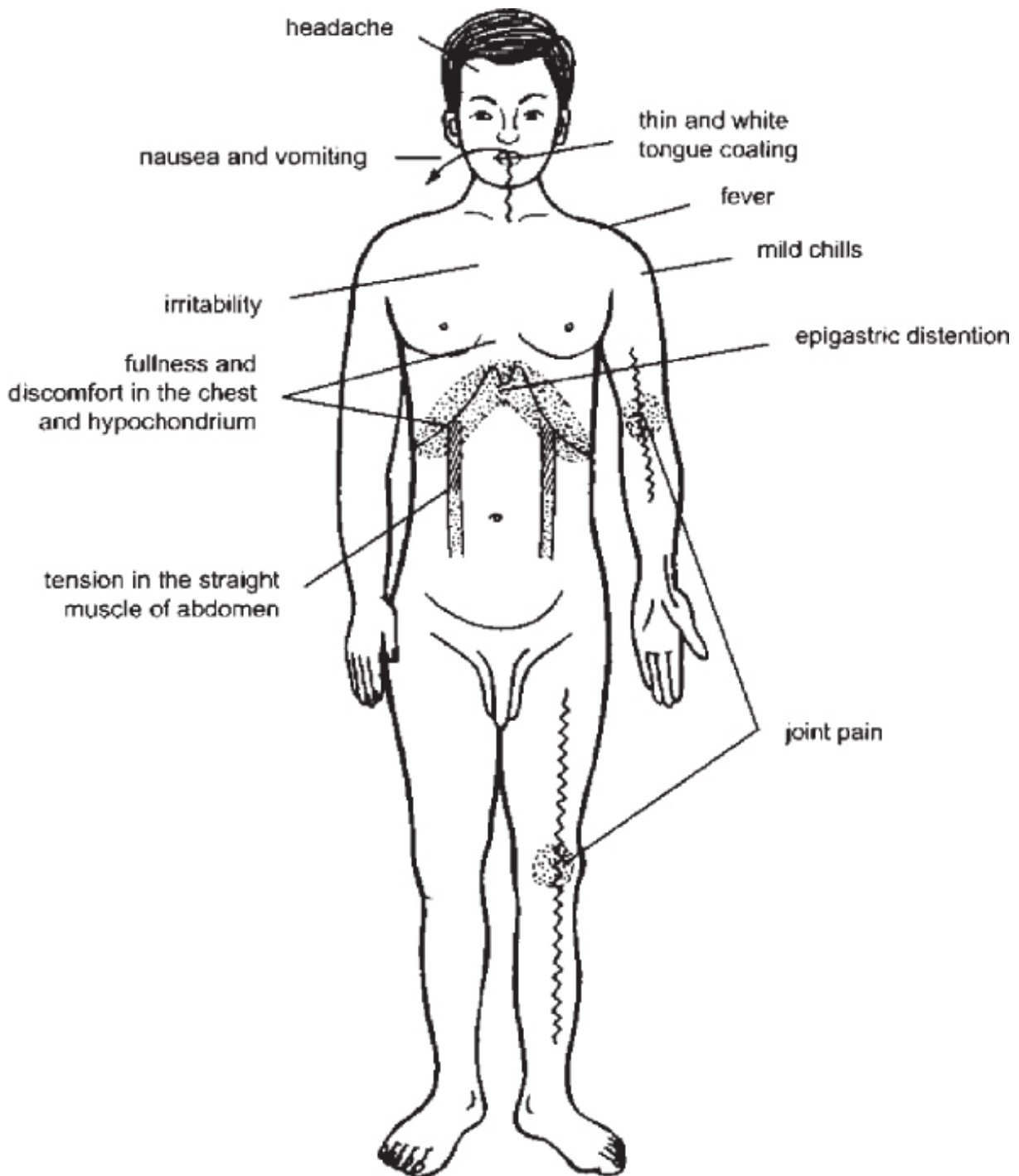


Bupleurum and Cinnamon Combination (Chai Hu Gui Zhi Tang 柴胡桂枝湯)

The ingredients of this formula are bupleurum, cinnamon, scute, pinellia, raw ginger, jujube, ginseng, licorice, and peony.

Indications

1. Psychogenic diarrhea
2. Abdominal pain

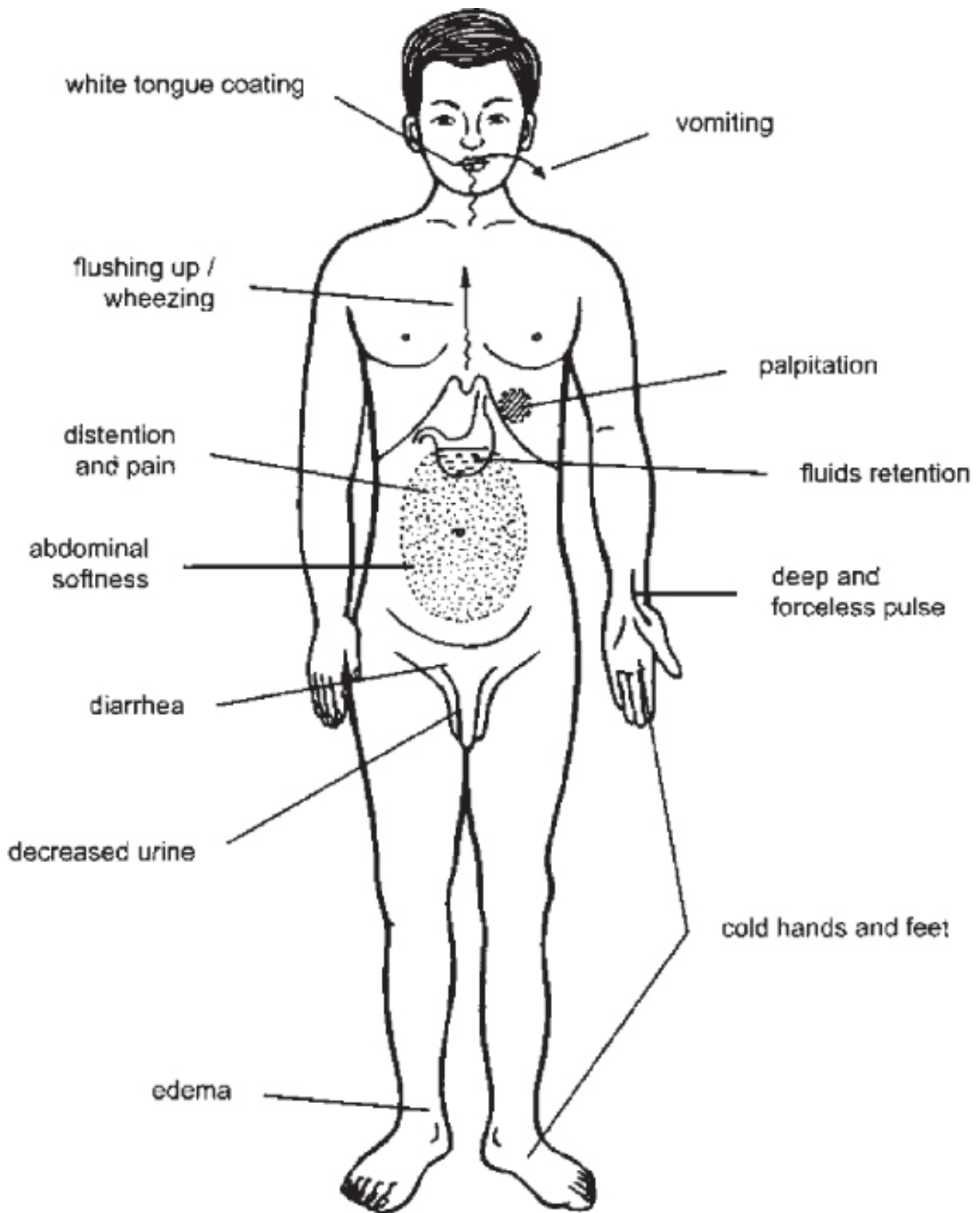


Vitality Combination (Zhen Wu Tang 真武湯)

The ingredients of this formula are aconite, peony, atractylodes, hoelen, and raw ginger.

Indications

1. Elderly people
2. Poor physical conditioning
3. Chronic diarrhea
4. Abdominal pain



12-6: HERBAL FORMULAS AND GLUCOCORTICOIDS

KEY FORMULAS

1. **Bupleurum and Cinnamon Combination (Chai Hu Gui Zhi Tang 柴桂枝湯)**
2. **Bupleurum and Hoelen Combination (Chai Ling Tang 柴苓湯)**
3. **Minor Bupleurum Combination (小柴胡湯)**

Glucocorticoid hormones, steroids, or cortisones are commonly used for chronic diseases such as rheumatoid arthritis and collagen disease. Unfortunately, as is well known, steroids cause many side effects, such as moon face, buffalo hump, subcutaneous hemorrhage, hypertension, edema, diabetes, gastric ulcers, mental tension neurosis, osteoporosis, infections, and thrombosis. One of the side effects of steroids is the flushed complexion. This is what the TCM physicians called *yu-hsieh*. It is associated with deoxygenated blood, increased in viscosity, blood vessel dysfunction, cellulitis, dark-red coloration on the edge of the tongue and lips, vascular spider, and lower abdominal pain when pressed—all are symptoms of stagnant blood.

SIDE EFFECTS OF GLUCOCORTICOID

1. Acne
2. Increased blood sugar
3. Increased blood cholesterol and triglycerides
4. Suppression of calcium absorption which can lead to osteoporosis
5. Cushing's syndrome (buffalo hump in the back of the neck, moon face, weight gain, weak bones, etc.)
6. Depression
7. Easily fatigued
8. Flushed face
9. Suppressed immune functions
10. Decreased libido
11. Irregular menstrual cycles
12. Increased risk of peptic ulcers and gastritis

13. Psychoneurosis
14. Vascular spider
15. Delay in wound healing
16. And more

HERBAL FORMULAS TO COUNTER THE SIDE EFFECTS FROM GLUCOCORTICOID

Certain Chinese herbal formulas are effective in relieving the other side effects of steroids. Among them are bupleurum-containing preparations.

1. The active ingredients of bupleurum and its pharmacological action have been researched in detail over the years. In addition to its antiphlogistic and antiallergic actions, it has also been found to be effective in treating liver illnesses.
2. Research suggests that natural, herbal drugs with anti-inflammatory action can minimize the side effects of steroids and therefore may be used in conjunction with steroids.

In the early 1980s Toda Shizuo and his coworkers in Japan studied fifty-two patients (nineteen males and thirty-three females) who were on steroid treatment. (1) Among them, seventeen had chronic active hepatitis; fifteen had rheumatoid arthritis; and twenty had cirrhotic kidney problems. Their ages ranged from five to sixty-five (three under ten; three over ten; five over twenty; nineteen over thirty; twelve over forty; six over fifty; and four over sixty years old). Of the fifty-two participants, fifteen had taken steroids for up to one year; thirteen had taken them for one to two years; seven had taken them for two to three years; two had taken them for three to five years; six had taken them for five to ten years; and nine had taken them for over ten years.

The daily steroid dosages at first visit during the experiment were:

- (1) Prednisolone, five of them at 2.5-5.0 mg/day
- (2) Prednisolone, nine of them at 5.0-10.0 mg/day
- (3) Prednisolone, twenty of them at 10.0-15.0 mg/day
- (4) Prednisolone, six of them at 15.0 mg/day
- (5) Betamethasone, three of them at 0.5-1.0 mg/day
- (6) Betamethasone, nine of them at 1.0-1.5 mg/day

The side effects from the steroids were:

(1) Flushed complexion, head congestion, and vascular spider in 15 of them

(2) Moon face in twenty-three of them

(3) Buffalo hump in the back of the neck in eleven of them

(4) Psychoneurotic symptoms in nine of them

The Chinese formulas administered were bupleurum-containing preparations:

1. Bupleurum and Cinnamon Combination (Chai Hu Gui Zhi Tang 柴胡桂枝湯)

2. Bupleurum, Cinnamon, and Ginger Combination (Chai Hu Gui Z Gan Jiang Tang 柴胡桂枝干薑湯)

3. Bupleurum and Dragon Bone Combination (Chai Hu Jia Long Gu M Li Tang 柴胡加龍骨牡蠣湯)

4. Bupleurum and Hoelen Combination (Chai Ling Tang 柴苓湯)

5. Bupleurum and Paeonia Formula (Jia Wei Xiao Yao San 加味道遙散)

6. Major Bupleurum Combination (Da Chai Hu Tang 大柴胡湯)

7. Minor Bupleurum Combination (小柴胡湯)

During the research period, **Cinnamon and Hoelen Formula (Chai Ling Tang 柴苓湯)**, **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)**, and **Tang-kuei and Paeonia Formula (Dang Gui Shao Yao San 當歸芍藥散)** were also prescribed to disperse stagnant blood. Empirical evidence has shown that **Cinnamon and Hoelen Formula (Chai Ling Tang 柴苓湯)** alone was also very effective in relieving this condition.

(2)

THE TIME REQUIRED TO ALLEVIATE STEROIDS SIDE EFFECTS

The steroids were tapered gradually in conjunction with herbal formulas. It took six to seven months for most of them to be completely off the steroids. A few of them required more than eight months before they were completely off the medication. The time required to eliminate the side effects from the steroids after the administration of herbal formulas varied:

- (1) Seventeen took less than three months
- (2) Twenty-three took four to six months
- (3) Ten took seven to twelve months
- (4) Two took over a year

In addition to the antiphlogistic and antiallergic actions in bupleurum, the bupleurum saponins can act on the adrenal gland and cause an increase in its weight and an enlargement of the diameter of its cortex. It is possible that these saponins affect the adrenal gland so positively that the dose of steroids can be decreased. The researchers believed that the effects of the steroids and the pharmacological actions of bupleurum, persica, and moutan (the components in the formulas) were mutually additive and prohibitive, thus together they eliminated the side effects of the steroids while maintaining the anti-inflammatory actions.

The research had shown that by administering Chinese herbal formulas concurrently with steroids, the side effects of the steroids were markedly alleviated. For 80% of the participants, the side effects subsided within six months. These formulas also appeared to have facilitated withdrawal from the steroids, as within three months, approximately 30% of the participants were able to stop the steroids, and within seven months, approximately 70% of them had successfully done so.

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1. Toda Shizuo, Shikaki Seiko, Arichi Yeko, and Arichi Shigeru, "The Effect of Chinese Herbal Formulas on the side effects of Glucocorticoid Hormones," *Bulletin of the Oriental Healing Arts Institute of USA* , 1988(3): 1.
2. Todato Tani, et al "The Effect of Cinnamon and Hoelen Formula on Steroid-Induced Blood Pathologies," *Oriental Healing Arts International Bulletin* , 1988; 13(3): 171.

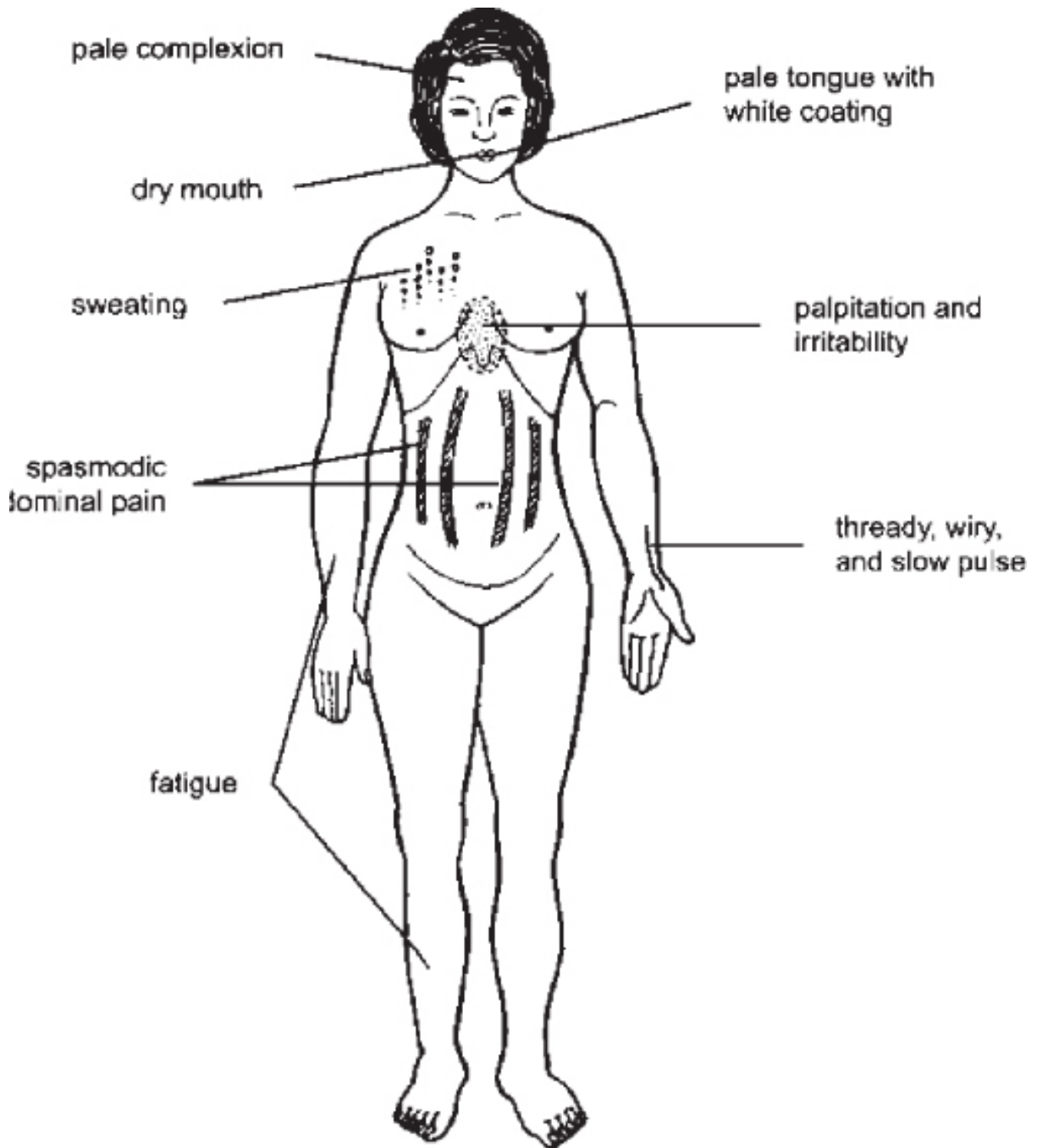
12-7: HERBAL FORMULAS FOR THIRST AND DRY MOUTH

Minor Cinnamon and Peony Combination (Xiao Jian Zhong Tang 小健中湯)

The ingredients of this formula are cinnamon, peony, raw ginger, jujube, licorice, and maltose.

Indications

1. Thirst, with a desire to moisten the mouth but no desire to swallow
2. Poor facial complexion
3. Nosebleed
4. Fatigue
5. Abdominal pain
6. Abdominal muscle tightness

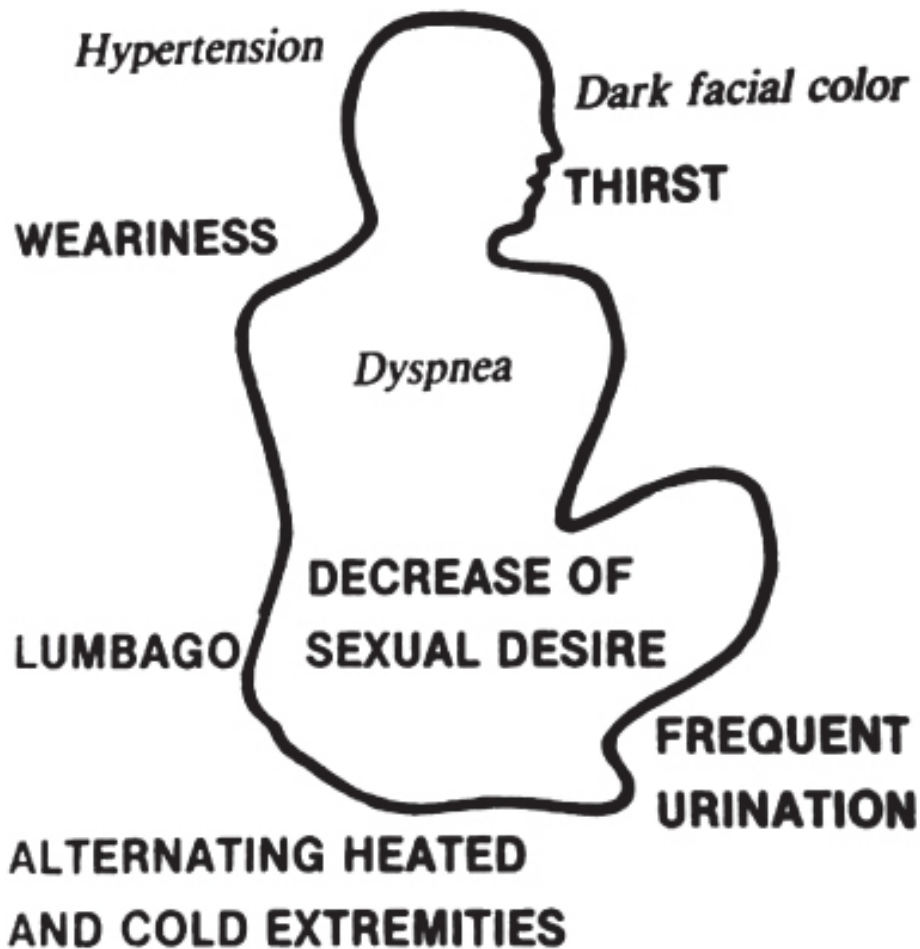


Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸)

The ingredients of this formula are steamed rehmannia, dioscorea, comus, hoelen, alisma, moutan, cinnamon, and aconite.

Indications

1. Intense thirst
2. Profuse urination



12-8: HERBAL FORMULAS FOR VERTIGO

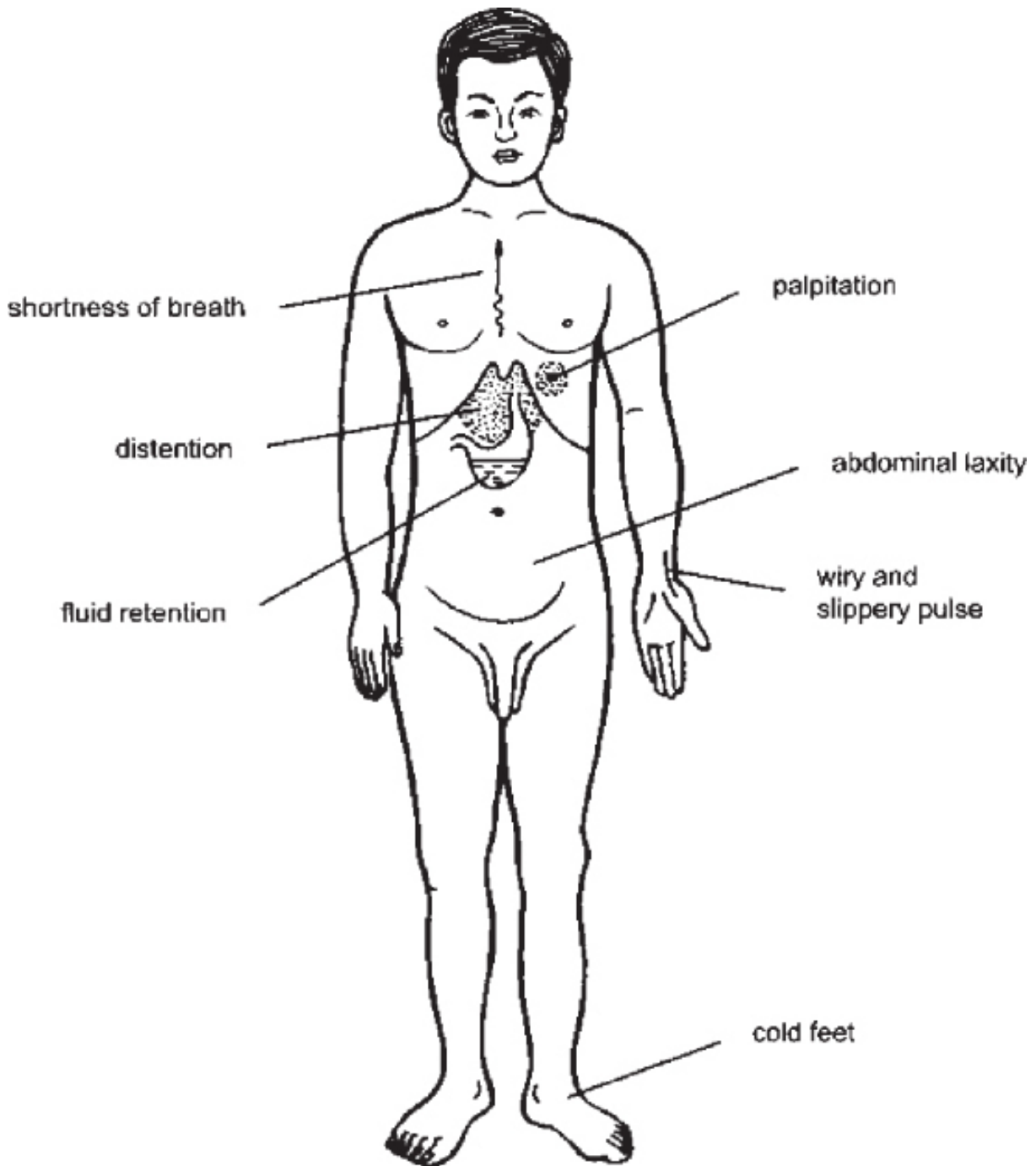
Vertigo is the sensation that the body is moving when it isn't.

Atractylodes and Hoelen Combination (Ling Gui Zhu Gan Tang 苓桂朮甘湯)

The ingredients of this formula are atractylodes, hoelen, cinnamon, and licorice.

Indications

1. Sensation of a heavy head
2. Dizziness upon standing
3. Palpitations
4. Gasping



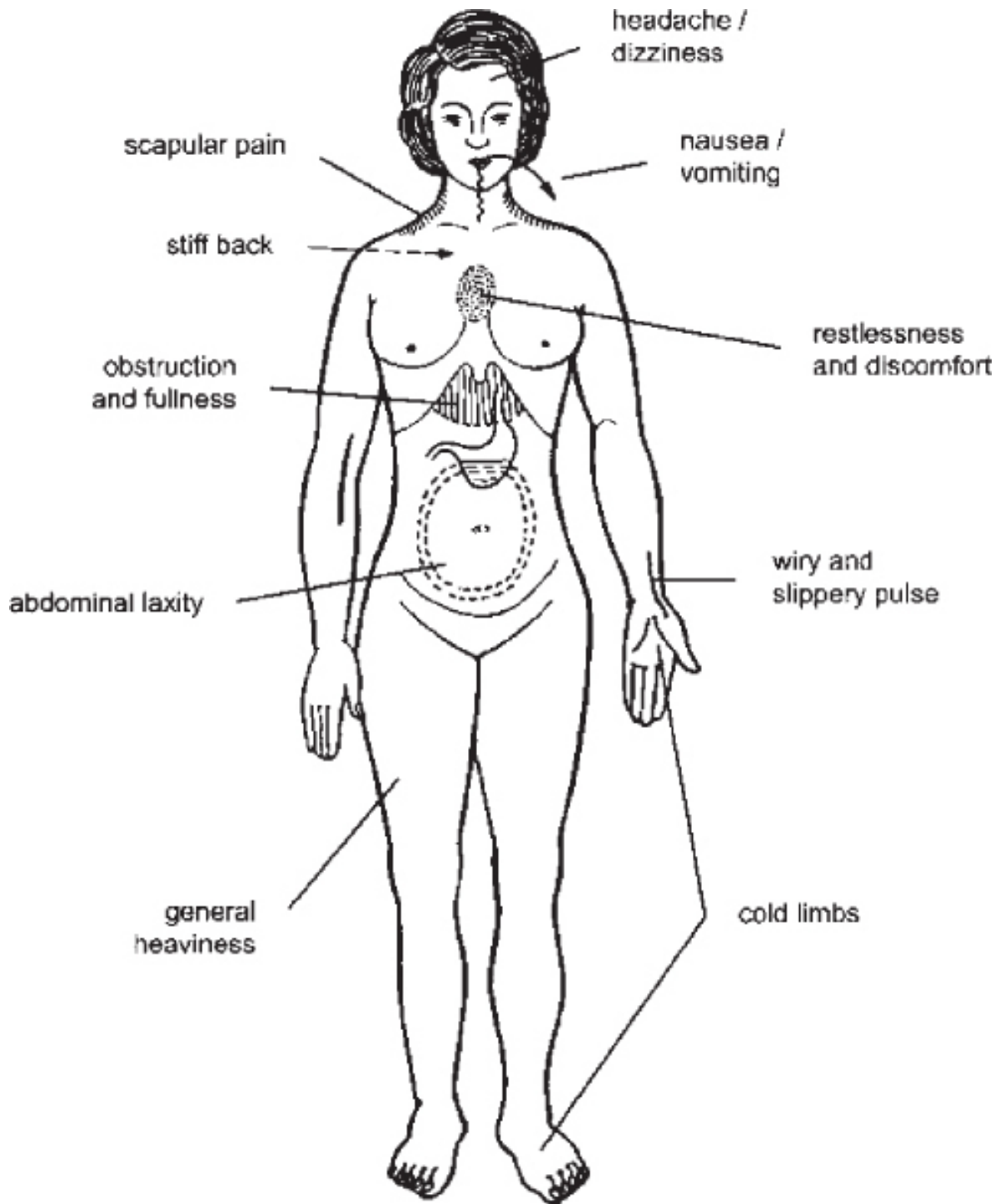
Pinellia and Gastrodia Combination (Ban Xia Bai Zhu Tian Ma Tang 半夏白朮天麻湯)

The ingredients of this formula are pinellia, gastrodia, atractylodes, hoelen, ginseng, citrus, raw ginger, malt, shen-chu, astragalus, phellodendron, alisma,

and ginger.

Indications

1. Cold conformation
2. Headache
3. Dizziness
4. Vomiting
5. Loss of appetite
6. Anemia

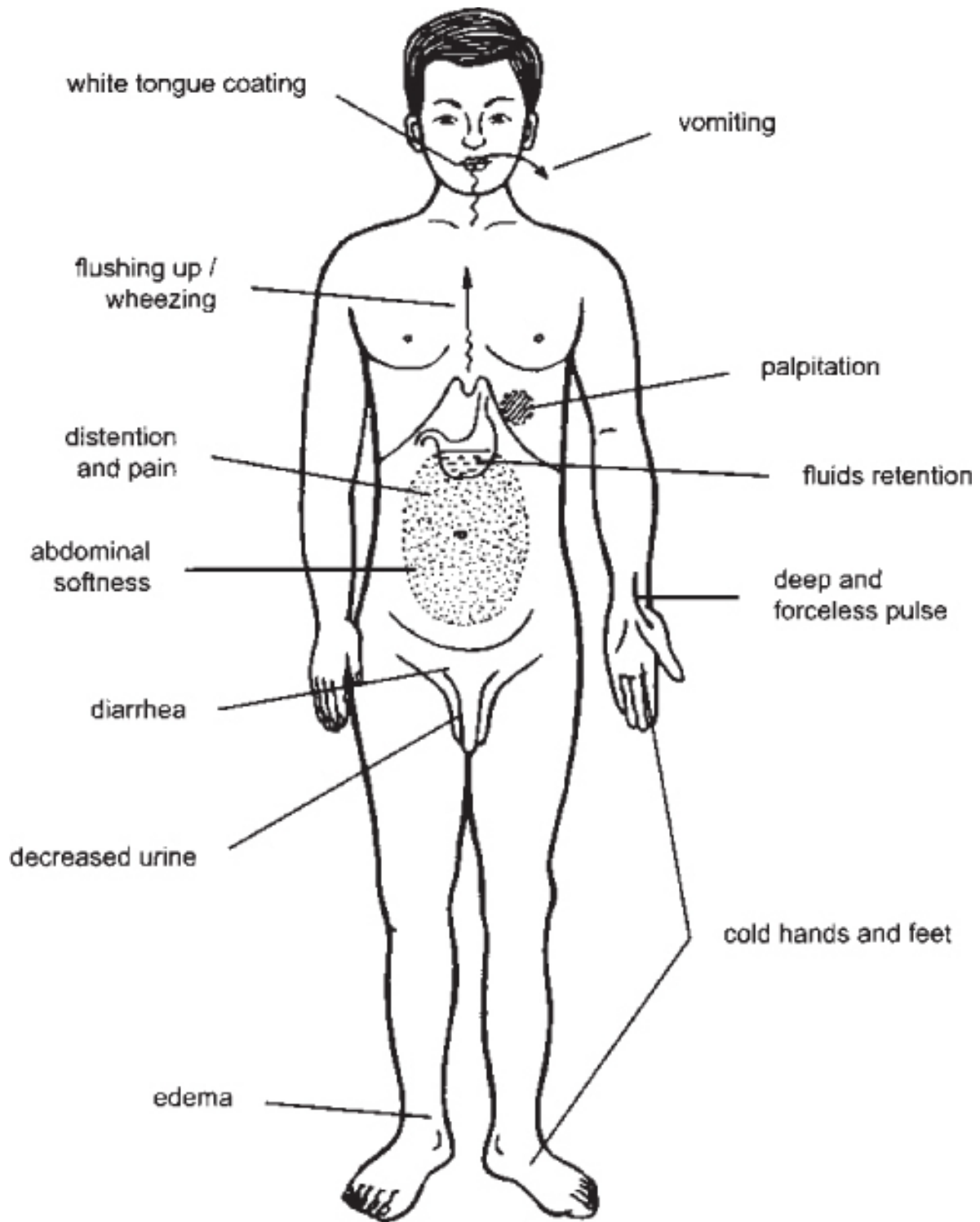


Vitality Combination (Zhen Wu Tang 真武湯)

The ingredients of this formula are aconite, peony, atractylodes, hoelen, and raw ginger.

Indications

1. Cold hands and feet
2. A generalized lack of energy and strength
3. Dizziness
4. Palpitations
5. Often accompanied by diarrhea



12-9: HERBAL FORMULAS FOR ANEMIA

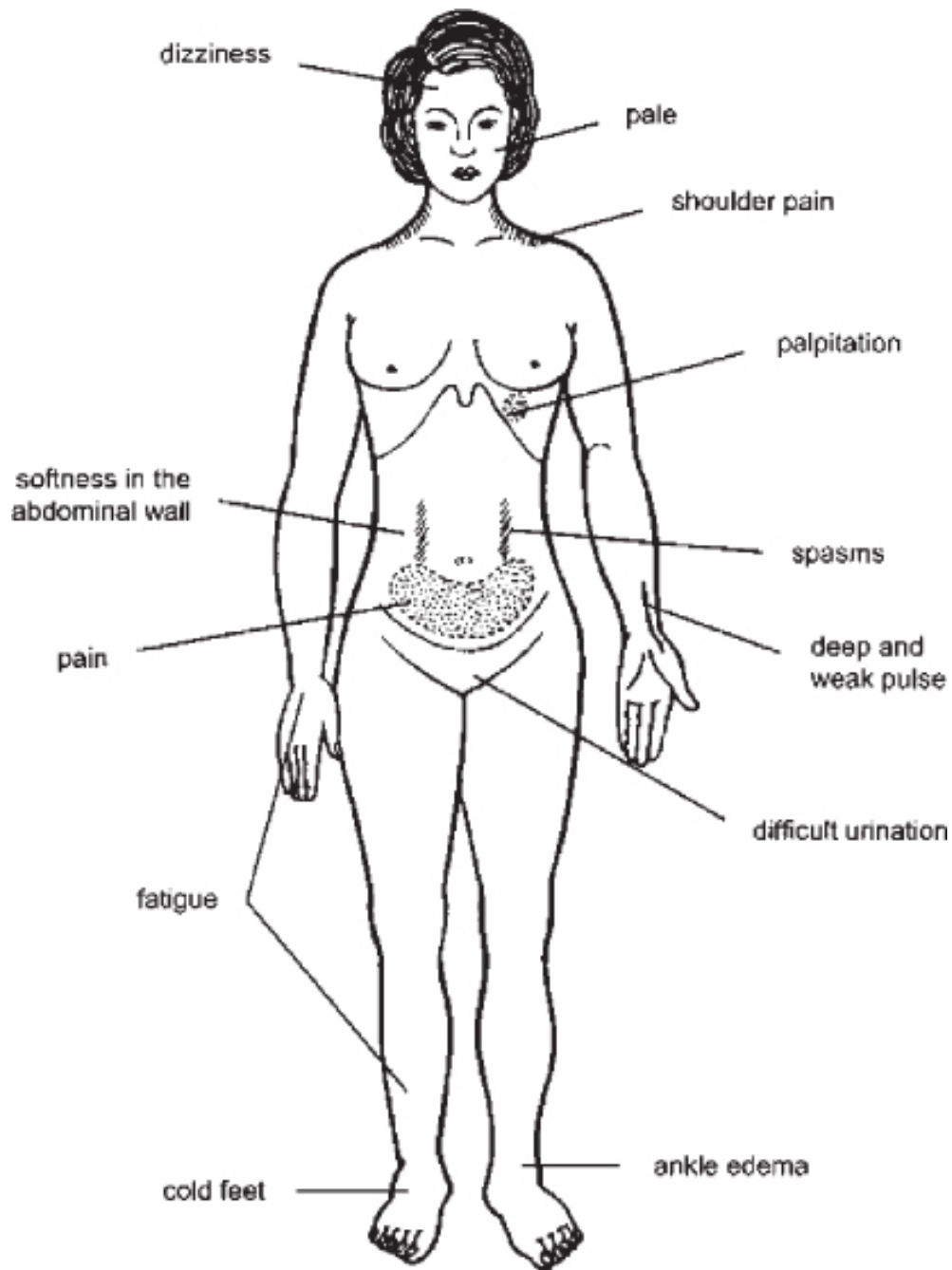
Chronic low back pain from rheumatoid arthritis, medications such as NSAIDs, and cortisone can be the cause of two different types of anemia: anemia of chronic inflammation and iron deficiency anemia. Several Chinese herbal formulas have positive effects on anemia.

Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散)

The ingredients of this formula are tang-kuei, peony, cnidium, atractylodes, hoelen, and alisma.

Indications

1. Cold conformation
2. Heavy head, dizziness
3. Aching shoulders
4. Menstrual irregularities

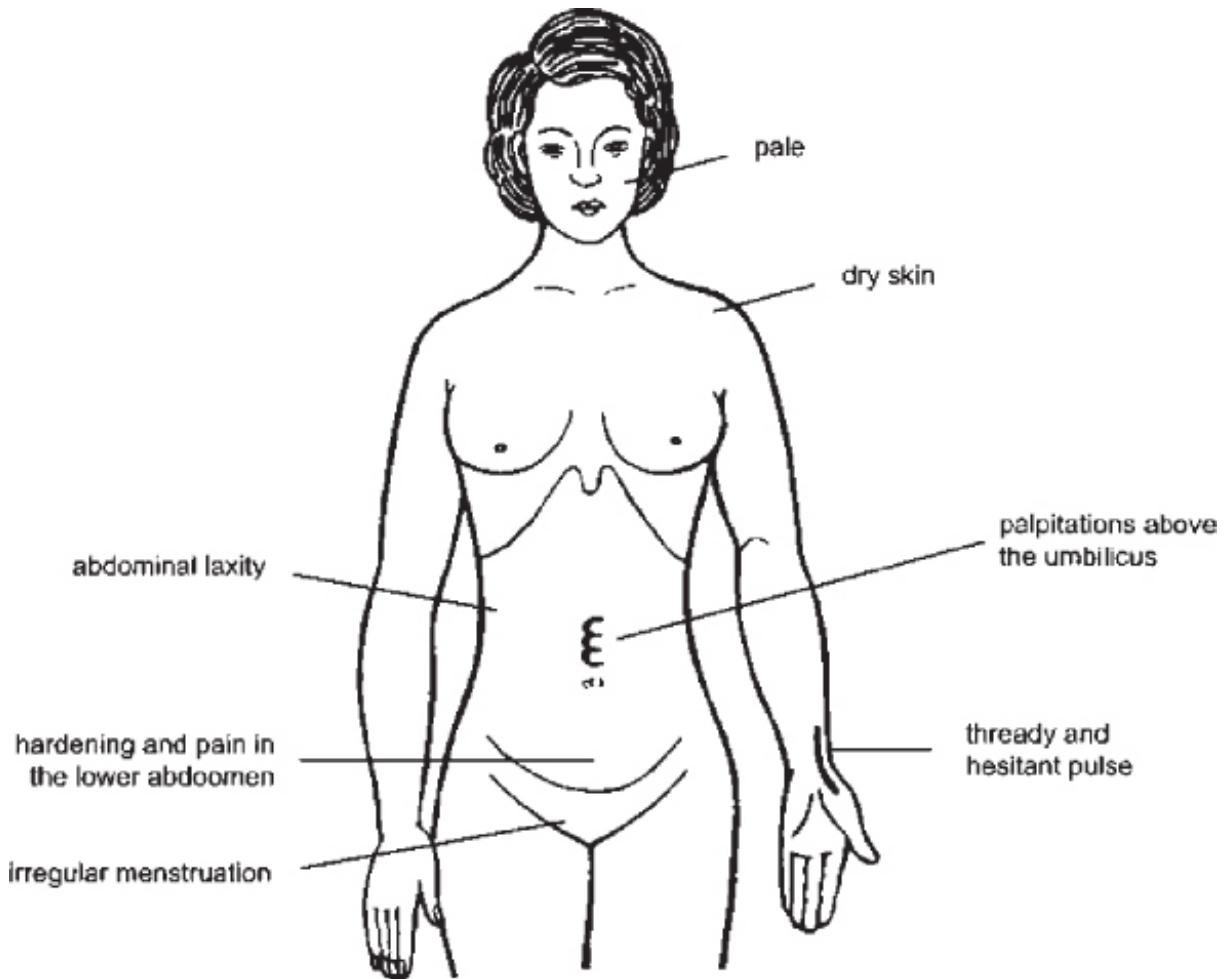


Tang-kuei Four Combination (Si Wu Tang 四物湯)

The ingredients of this formula are tang-kuei, cnidium, peony, and rehmannia.

Indications

1. Cold conformation
2. Dry skin
3. Persistent fever of the hands and feet
4. Poor gastrointestinal function

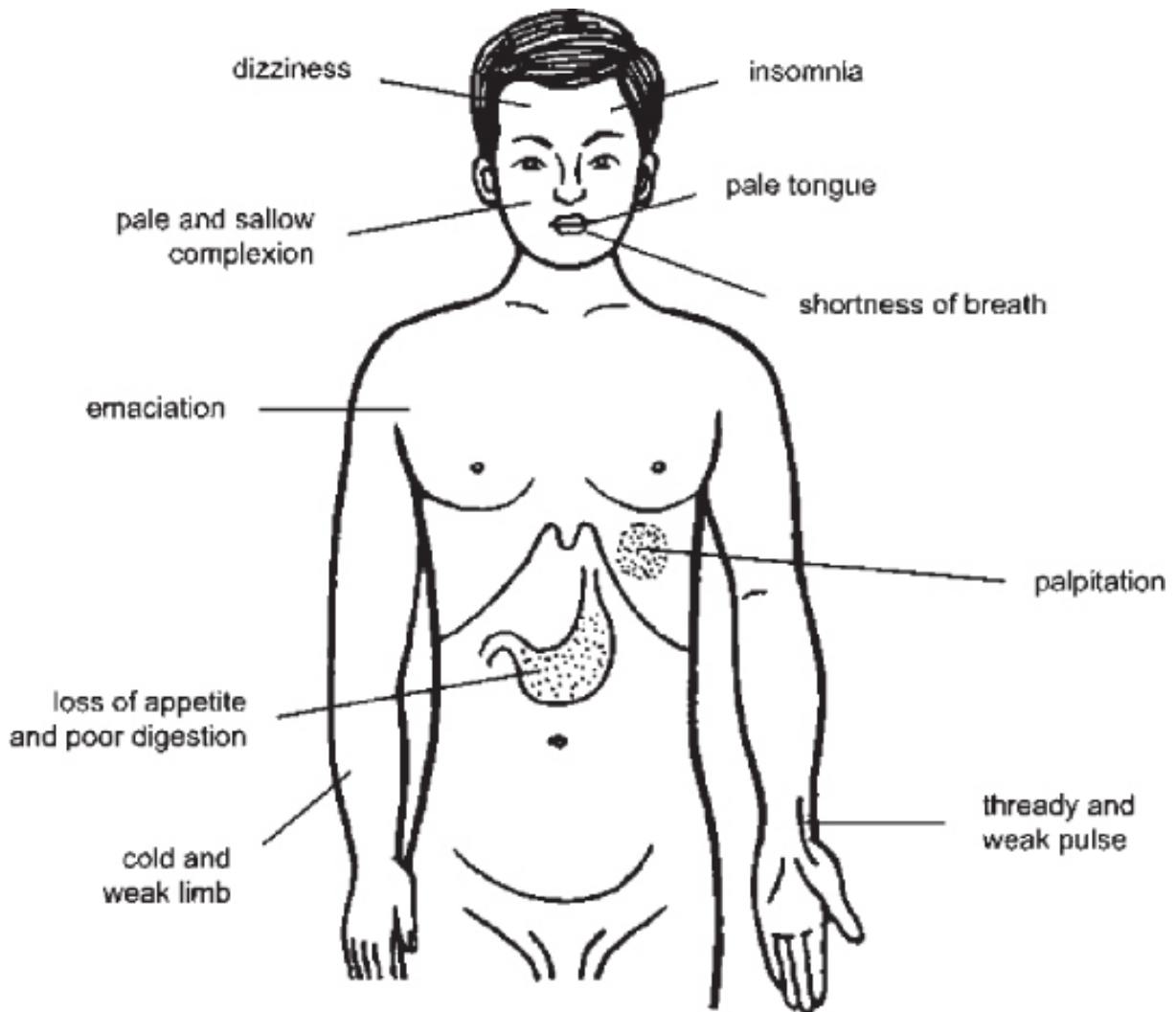


Ginseng and Tang-kuei Ten Combination (Shi Quan Da Bu Tang 十全大補湯)

The ingredients of this formula are ginseng, tang-kuei, cnidium, peony, rehmannia, atractylodes, hoelen, licorice, astragalus, and cinnamon.

Indications

1. Generalized weakness
2. Low energy
3. Loss of appetite
4. Dry skin

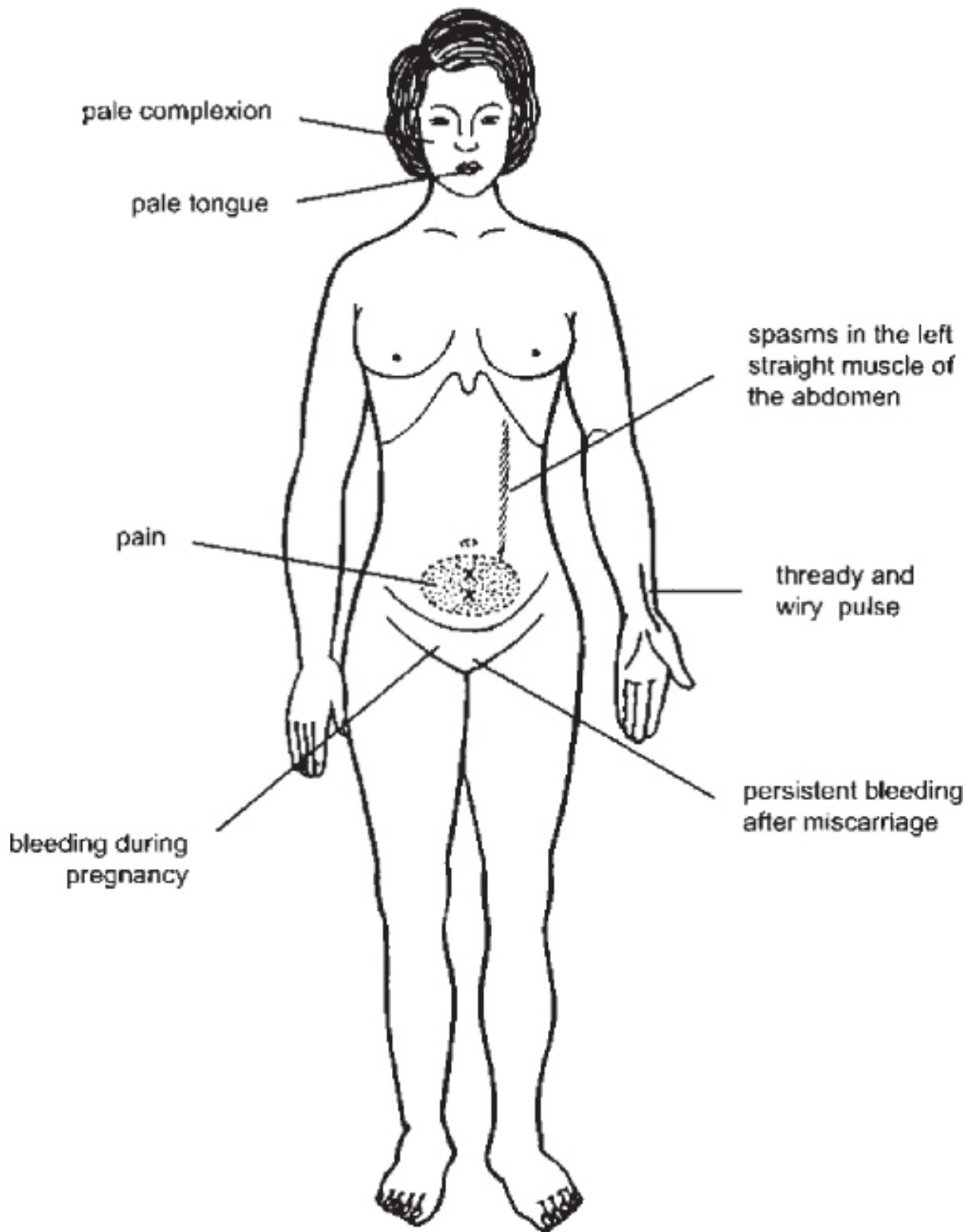


Tang-kuei and Gelatin Combination (Dang Gui Jiao Ai Tang 當歸膠艾湯)

The ingredients of this formula are tang-kuei, gelatin, cnidium, peony, rehmannia, artemisia, and licorice.

Indications

1. Anemia
2. Generalized weakness
3. Low energy

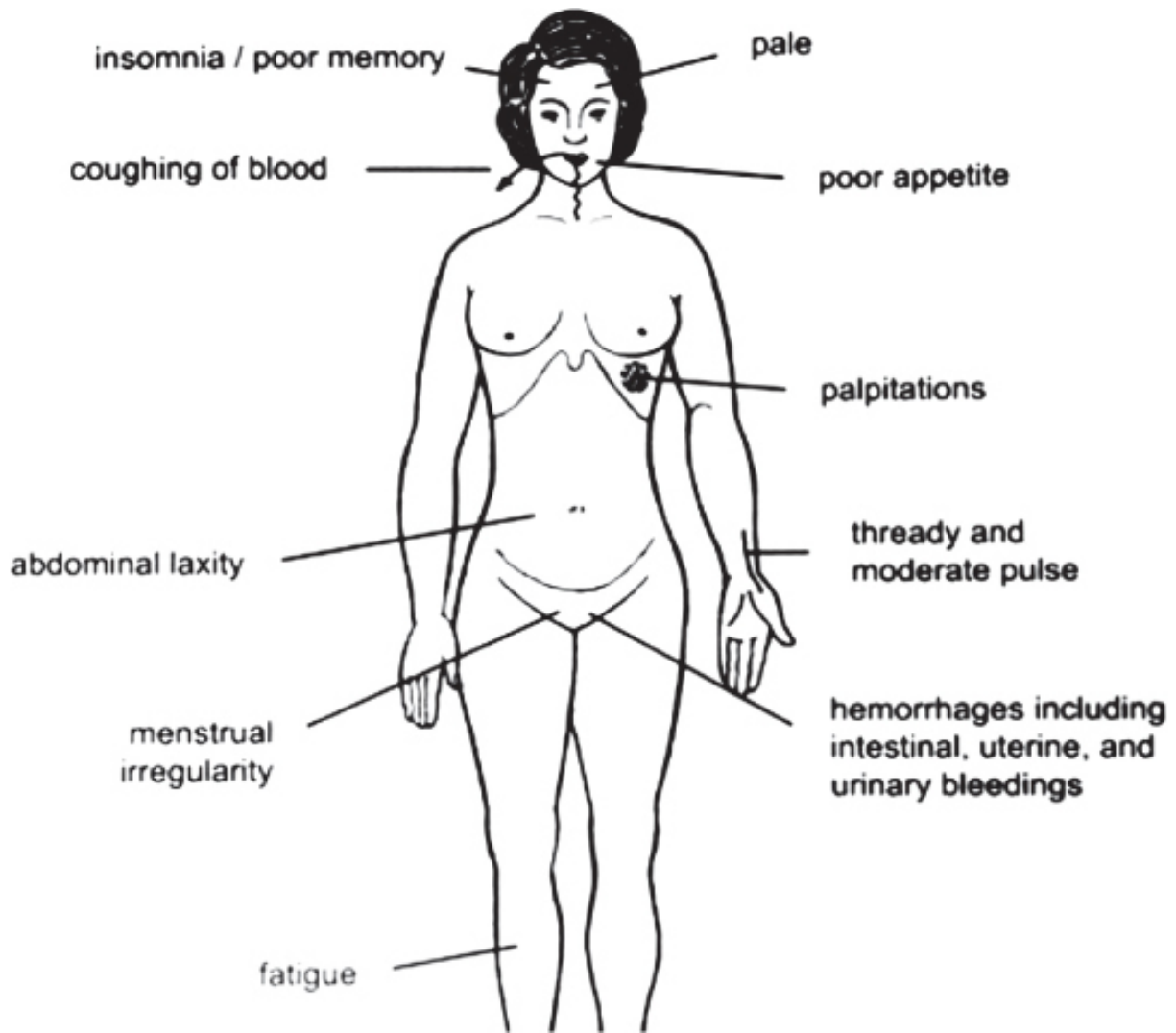


Ginseng and Longan Combination (Gui Pi Tang 歸脾湯)

The ingredients of this formula are ginseng, longan, atractylodes, hoelen, licorice, raw ginger, jujube, zizyphus, polygala, tang-kuei, astragalus, and saussurea.

Indications

1. Nervousness
2. Loss of appetite
3. Insomnia

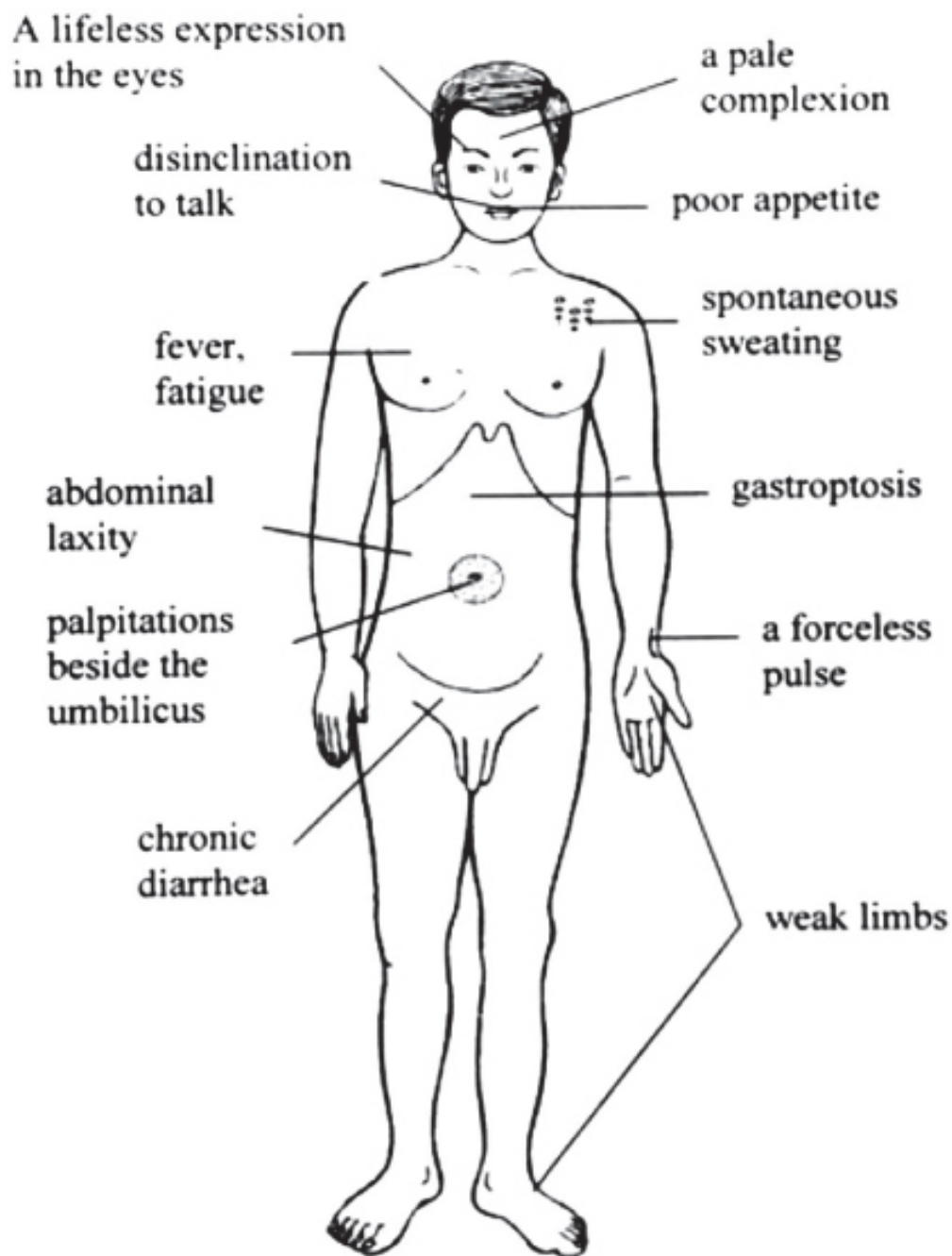


Ginseng and Astragalus Combination (Bu Zhong Yi Qi Tang 補中益氣湯)

The ingredients of this formula are ginseng, astragalus, atractylodes, licorice, raw ginger, jujube, tang-kuei, citrus, cimicifuga, and bupleurum.

Indications

1. Loss of energy
2. Loss of appetite

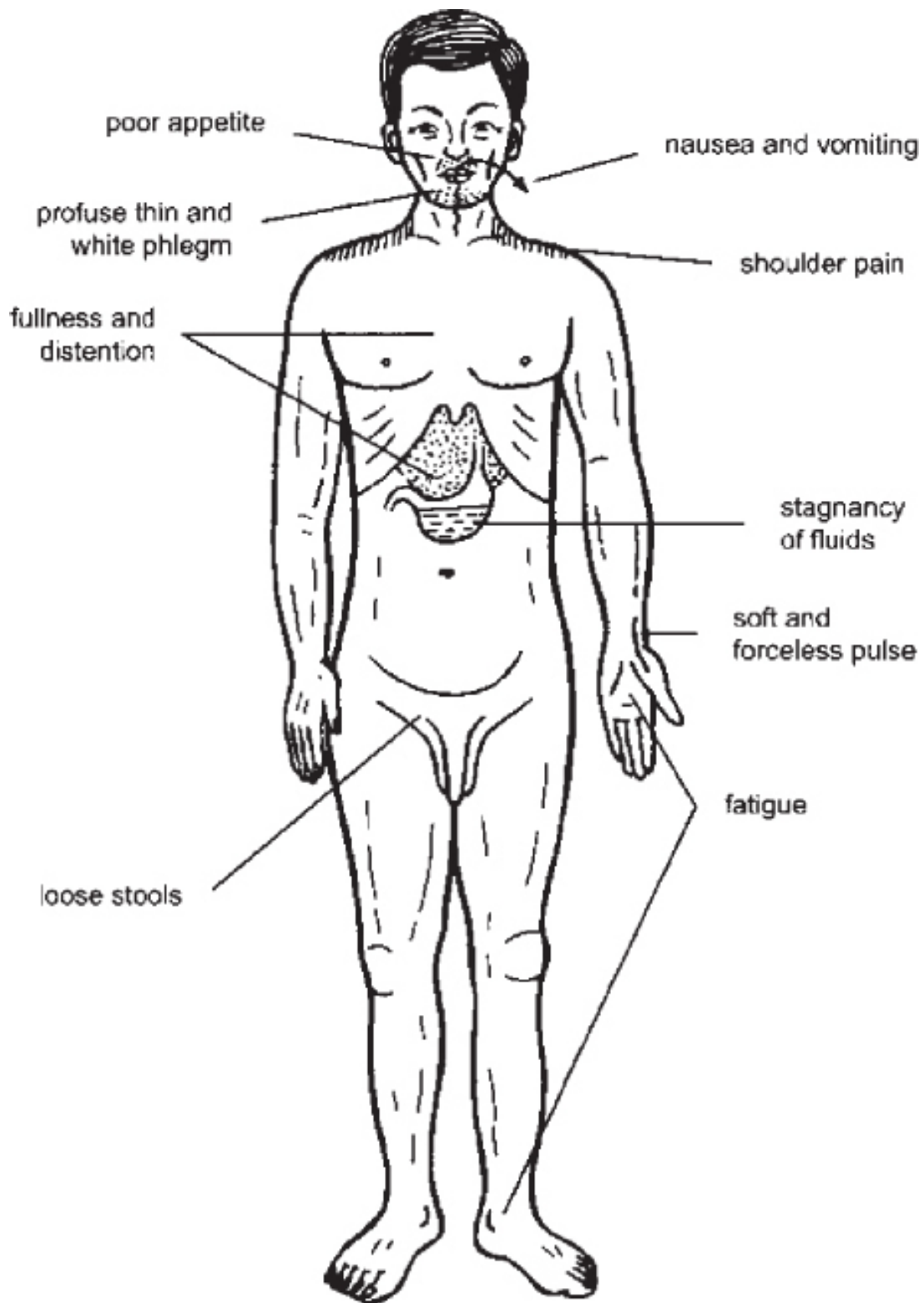


Six Major Herb Combination (Liu Jun Zi Tang 六君子湯)

The ingredients of this formula are ginseng, atractylodes, hoelen, licorice, pinellia, citrus, raw ginger, and jujube.

Indications

1. Loss of energy
2. Loss of appetite
3. Diarrhea
4. Cold conformation





CHAPTER 13

Symptoms With No Conventional Explanations

13-1: CHILLS IN THE BACK

CHIEF COMPLAINTS

1. Chills without fever (ICD-10 Code **R68.83**)
2. Abdominal discomfort (ICD-10 Code **R10.84**)
3. Insomnia (ICD-10 Code **G47.0**)
4. Easily fatigued (ICD-10 Code **R53.83**)
5. Anemia (ICD-10 Code **D64.9**)

KEY HERBAL FORMULA

Eucommia and Rehmannia Formula (You Gui Wan 右歸丸)

November 2009

Maria was a fifty-six-year-old woman from Costa Rica who was referred to me by an orthopedic surgeon. She attributed her problems to a work-related injury in August 2007. At that time she was working as a

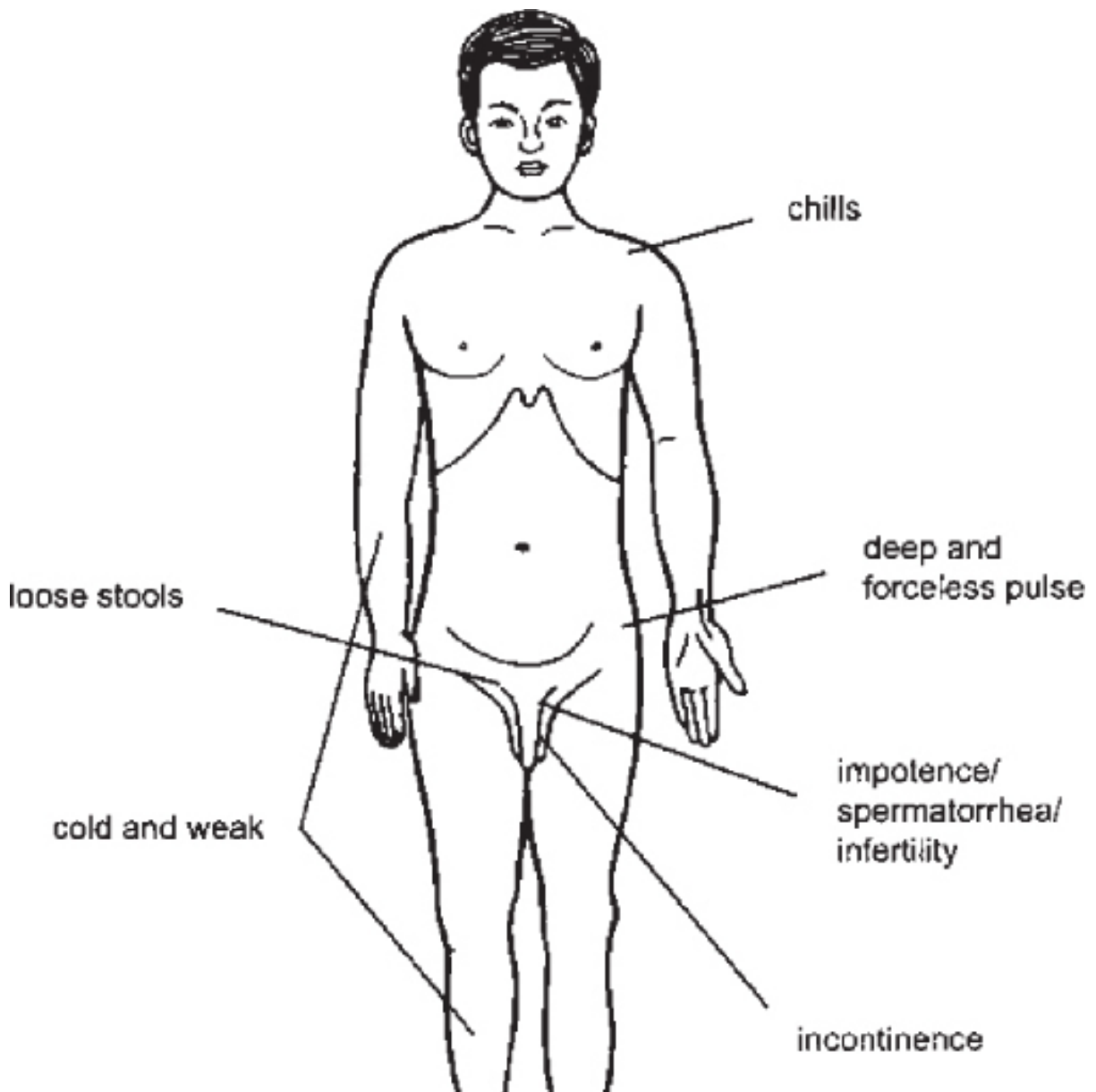
housekeeper at a local inn when she was struck by a towel cart. She suffered lower back and hip injuries with a herniated disc in between her L5 and S1 vertebrae. As a result, she had persistent pain in her low back, hips, and thighs, with numbness and tingling sensations in her lower extremities. Initially, she was treated with medication and physical therapy. However, her symptoms persisted. She underwent a lumbar spine surgery in late 2008 to remove the disc. Shortly after the surgery, her back pain reduced, but she started to feel a constant numbness sensation in her lower back and anterior tibia area and had difficulty bending her trunk. She felt cold and weak, was easily fatigued, had no appetite and abdominal discomfort; she had trouble sleeping and suffered from a low energy level. Three months later the pain in her low back returned. It was continuous, steady, deep, dull, aching, throbbing, sharp, burning in nature, and was sensitive to pressure. The intensity of the pain ranged from four to six on a scale of zero to ten. She could not find a comfortable position to sit or stand. Heating pads and hot showers would usually decrease the pain and discomfort to some extent, but not completely. Air-conditioned rooms, cold and damp weather, prolonged and strenuous use of muscles, bending, looking up, driving, lifting, pushing or pulling heavy objects, pressure on the tight muscles, and periods of nervous tension tended to aggravate the pain. Rest on a couch and lying down eased some of the pain. She was unable to work. Other than a low blood count that she needed to take iron supplements for, she had no other medical problems that she needed treatment for and had no known family history of bone, joint, or nerve diseases.

On my examination her vital signs were normal. Her face and nails looked a bit pale. Peripheral pulses were full and equal in both upper and lower extremities; they were weak but regular. She had no fever and both systolic and diastolic blood pressures were within normal ranges. There was no sign of orthostatic hypotension. Her lungs were clear to percussion and auscultation. Her trachea was in midline, and the thyroid did not feel enlarged from palpation. Her coordination was satisfactory, with no evident ataxia or dysmetria. Her posture was satisfactory. Deep tendon reflexes were trace in both ankles. The Valsalva maneuver produced a positive effect on her low back and lower extremity symptoms. Her abdomen was tight and was tender to deep pressure. There was no apparent mass or organomegaly. Examination of the lower back showed no shift of the spine. The normal lumbar lordotic curve was maintained. There were points of tenderness along the lumbosacral paraspinals, glutei, multifidus, and piriformis with pain extended into the buttocks and upper anterior thighs. There was no apparent antalgic gait.

Manual muscle testing revealed weak trunk muscles in both flexors and extensors. The Trendelenburg test was negative bilaterally. There was no crepitation or pain upon movement of either hip joint. There was no redness, tenderness, or increase in local heat in the joints of the lower extremities.

IMPRESSION

Maria had chronic low back pain, lumbar radiculopathy, myofascial pain, anemia, chills, and kidney Yang deficiency. She had received extensive conventional treatment with medication, physical therapy, and surgery. Her response to the treatments had reached a plateau. According to TCM theory, kidney Yang deficiency, or “the decline of the fire from gate of life,” is characterized by cold limbs, chilling pain in the lower back, pale facial complexion, muscle cramps in the lower abdomen, fatigue, a pale tongue, and thready or weak arterial pulses, from all of which Maria was suffering. Many people with this condition also experience loss of vitality, lassitude, intolerance of cold, cold extremities, impotence, infertility, loose stools or diarrhea, incontinence, and soreness and weakness in the low back, knees, the lower extremities. In traditional Chinese medical practice, it is often treated with **Eucommia and Rehmannia Formula (You Gui Wan 右歸丸)**.



This formula is also used to treat sciatica, osteoporosis, degenerative joint disease, low sexual drive, nephrotic syndrome, bronchial asthma, and generalized weakness.

I discussed my impression with the surgeon and Maria's primary care physician. Both of them had no idea what I was talking about. They suggested that I should try trigger point injection/acupuncture along with physical modality and exercises.

December 2009

Maria felt better, with less pain, following the trigger point injections. However, there was no effect on her sensations of chills. On examination, her facial complexion and tongue did not seem changed from my last evaluation, and there were still active trigger points in lumbosacral paraspinals, left glutei, and piriformis, with pain extended into the buttocks and upper anterior thighs. Trigger points were also noted in bilateral hip adductors and abductors, sartorius, and hamstrings. She still had weak trunk flexors and extensors. Range of motion of her lower back was about 85% of normal. Straight-leg raise test was mildly positive on both sides. Her gait was within normal limits.

She had made some functional improvements, but no apparent neurological change. She still had a lot of active trigger points. Lumbar radiculopathy certainly can perpetuate the formation of myofascial trigger points along the myotomes. I injected trigger points in bilateral lumbosacral paraspinals, left glutei, left piriformis, sartorius, bilateral gastrosoleus, and peroneus using a total of 3.0 cc of 1% Xylocaine, followed by moist heat and ultrasound at 1.2 W/cm² to the lower back and buttocks for eight minutes.

13-2: CHILLS

Chills are a feeling of cold even when the surrounding temperature is high. Some may feel cold in the hands or feet; some may feel it in the low back, stomach, and elsewhere. Some feel cold in one area and heat in another place. The cause of chills in otherwise healthy people remains obscure, but below are some of the identified causes.

CAUSES OF CHILLS

1. Anemia
2. Imbalance in body fluids
3. Metabolic disorders
4. Autonomic nervous system disorders
5. Gastrointestinal illnesses
6. A general lack of vitality
7. Cardiovascular diseases
8. Stagnant blood

TYPES OF CHILLS

Chills are classified according to the area of the body affected and the severity of the sensation. Possible causes would then be assigned according to these factors.

1. Chills at the waist and legs in menopausal disorders, difficult menstruation, endometritis (inflammation of the endometrium), or uterine myoma.
2. Chills with anemia, hypotension, heart disease, or an autonomic nervous system disorder.
3. Chills with nervousness, hysteria, or other emotional factors.

If a specific problem or disease is present, it should be treated first. Otherwise, sedatives may stabilize blood circulation and relax nerves. Vitamin B complex helps the nerves and vitamin E aids dilation of the blood vessels. The most important step is to keep the body warm.

WOMEN WITH CHILLS

1. Gynecological illnesses often start after a sudden change in internal organs that leads to functional disturbances. If the “alteration” remains uncorrected, physical lesions may occur.
2. Of course, congenital structural anomalies are important issues to consider.
3. TCM categorizes gynecological disorders as fatigue, shoulder stiffness, headache, insomnia, neurosis, chill disease, Qi and blood stagnation, dizziness, tinnitus, lower abdominal pain, pain in the waist, gastric dilatation, and hysteria.
4. Many gynecological disorders are caused by Qi dysfunctions.

COMMON SYMPTOMS OF Qi DISEASES IN WOMEN

1. Exhaustion, easily fatigued, loss of sexual desire
2. Insomnia: difficulty in falling asleep, light sleeper, frequent dreaming
3. Blood stagnation: red face, headache, heavy head, blurred vision, ringing in the ears

4. Throat discomfort with an obstruction feeling, excessive thirst
5. Chest discomfort: shortness of breath, palpitations, pounding heart, feeling that the heart is going to stop
6. Pulse disorder: very slow or fast pulse, or irregular pulses that stop from time to time
7. Profuse sweating over the entire body or part of the body
8. Stiff neck and shoulders
9. Sore waist and lower back
10. Muscle pain in whole or a part of the body
11. Discomfort in the stomach and intestines: loss of appetite, strange taste, nausea, vomiting
12. Warm or chill sensations over the entire body or part of the body, cold hands and/or cold feet
13. Painful itches
14. Hyperirritability
15. Urinary frequency, painful urination, or urination during the night
16. Constipation, diarrhea
17. Irregular menstruation or painful menstruation

NERVOUS DISORDERS IN WOMEN DUE TO QI DEFICIENCY

1. Not feeling well upon awakening in the morning
2. Pessimism
3. Depression
4. Inability to concentrate
5. Attention deficit
6. Lassitude
7. Dizziness
8. Easily fatigued
9. Diminished ability to think and poor memory
10. Indecision
11. Anxiety

12. Irritability
13. Insecurity
14. Self-reproach
15. Despair
16. Overly reflective
17. Self-isolation
18. Highly critical rather than complimentary to others
19. Obsessive
20. Compulsive
21. Self-destructive urges: suicidal, urge to kill others
22. Emotionless, expressionless, taciturn

13-3: HERBAL FORMULAS FOR CHILL DISEASES

Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散)

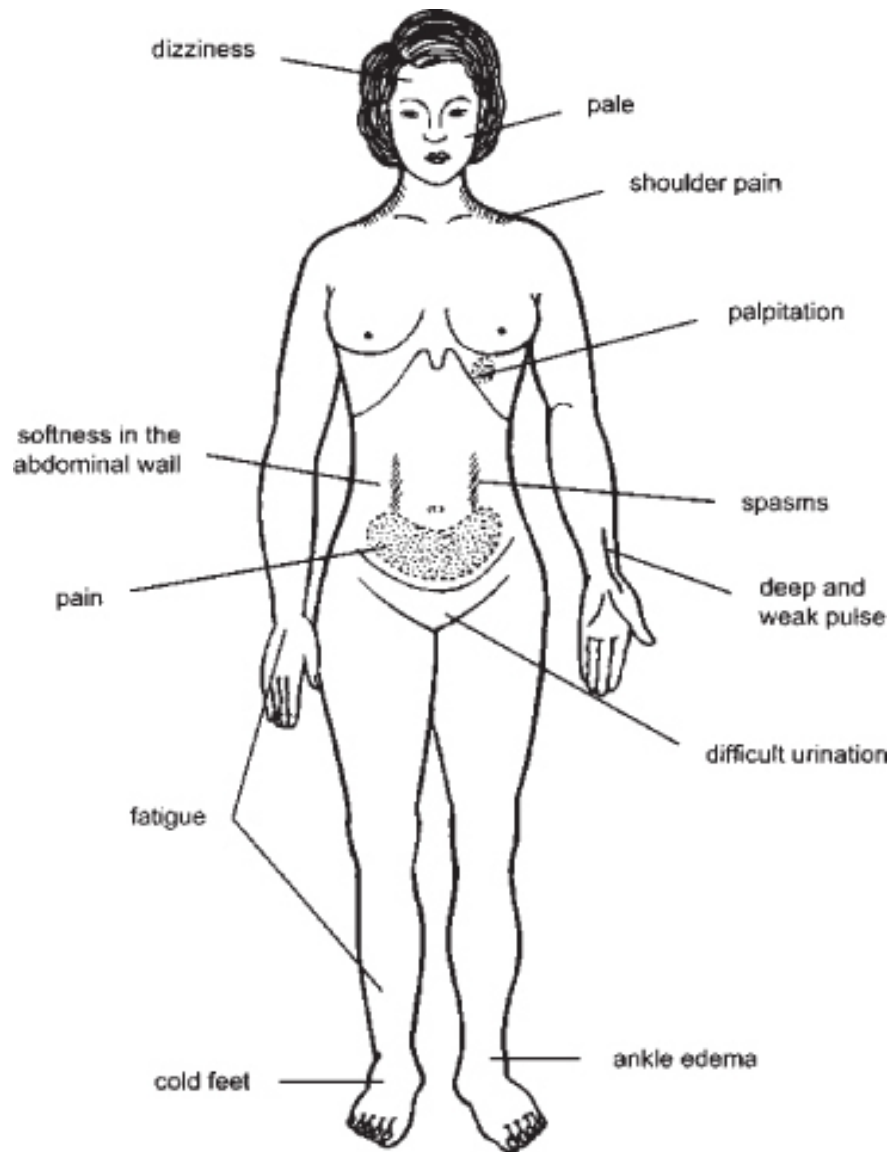
This is an interior-chill conformation formula, mainly used to regulate blood circulation. It was first described in *Chin Kuei Yao Lueh* . The ingredients of this formula are tang-kuei, peony, cnidium, atracylodes, hoelen, and alisma. It is a variant of **Tang-kuei Four Combination (Si Wu Tang 四物湯)**, in which rehmannia is replaced with atracylodes, hoelen, and alisma. Since these three are all drying herbs, one may say that this formula has been modified for damp conformations. In this respect, it is the opposite of **Tang-kuei Four Combination (Si Wu Tang 四物湯)**, which is used to treat dry conformations.

1. Tang-kuei and cnidium are warming blood-regulators that adjust and control the blood, especially in menstrual conditions, and peony is analgesic and antispasmodic, which is good for menstrual pains as well.
2. Apart from alisma, the ingredients are warming tonics, which result in a formula that is a blood-regulator for weak-chill-damp conformations.

This formula is considered the “Master Tonic for Women.” Most gastrointestinal weakness in women with pallid complexions can benefit from its use as a daily herbal supplement.

Indications

1. Chills
2. Anemia
3. Sensation of a heavy head
4. Aching shoulders
5. Generalized weakness and low energy level
6. Menstrual discomfort
7. Menstrual irregularities
8. Premenstrual syndrome
9. Postmenopausal symptoms
10. Pelvic inflammation
11. Chronic miscarriages or infertility
12. Chronic nephritis with anemia and oliguria (used occasionally for m with this condition as well)
13. Acne in those who are emaciated and are suffering from chills
14. Benign prostate hypertrophy



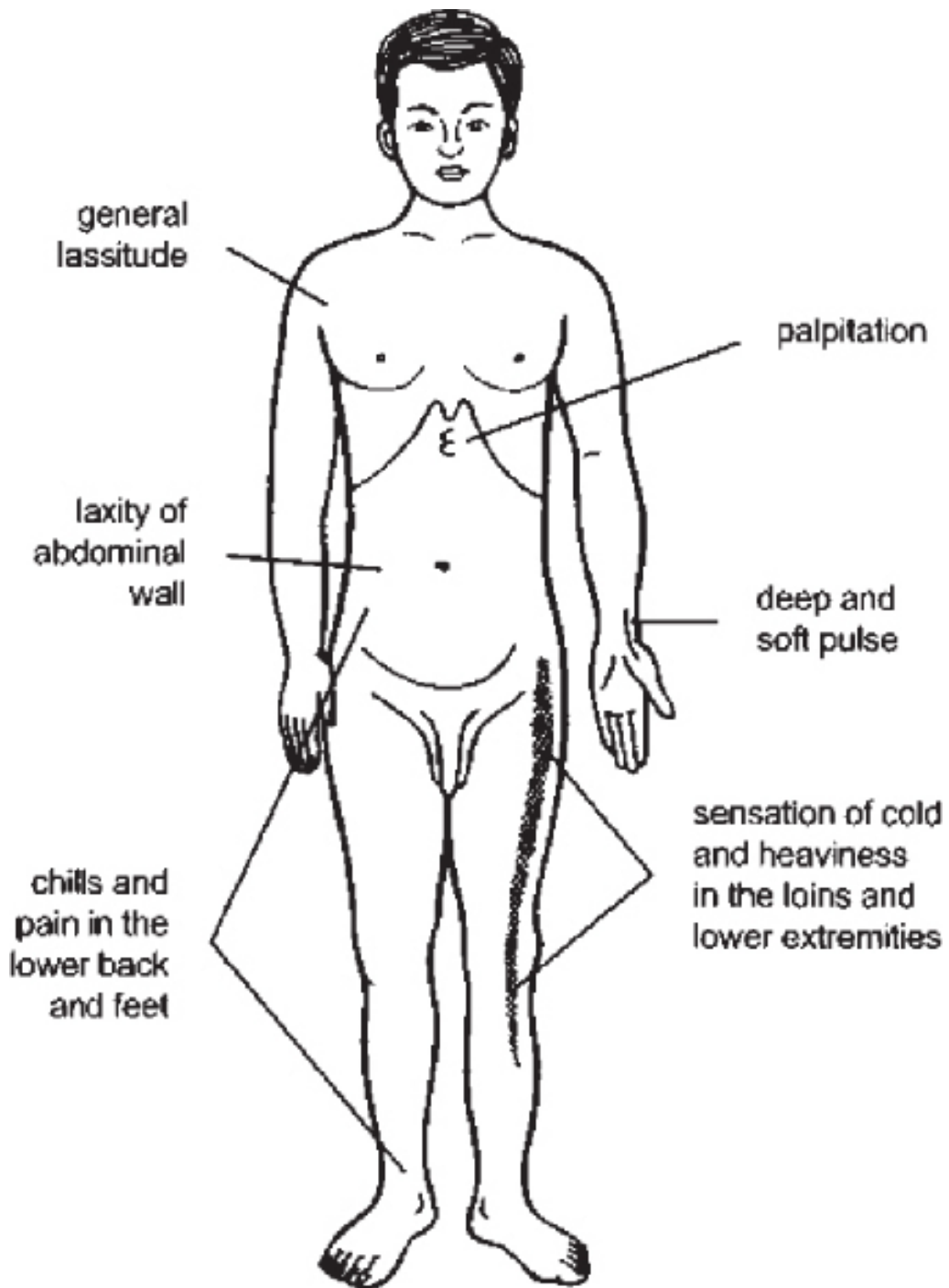
Ginger and Hoelen Combination (Gan Jiang Ling Zhu Tang 甘薑苓朮湯)

The ingredients of this formula are dried ginger, hoelen, atractylodes, and licorice.

Indications

1. Sensation of heaviness in the low back

- 2. Low back pain
- 3. Polyuria, but not thirsty

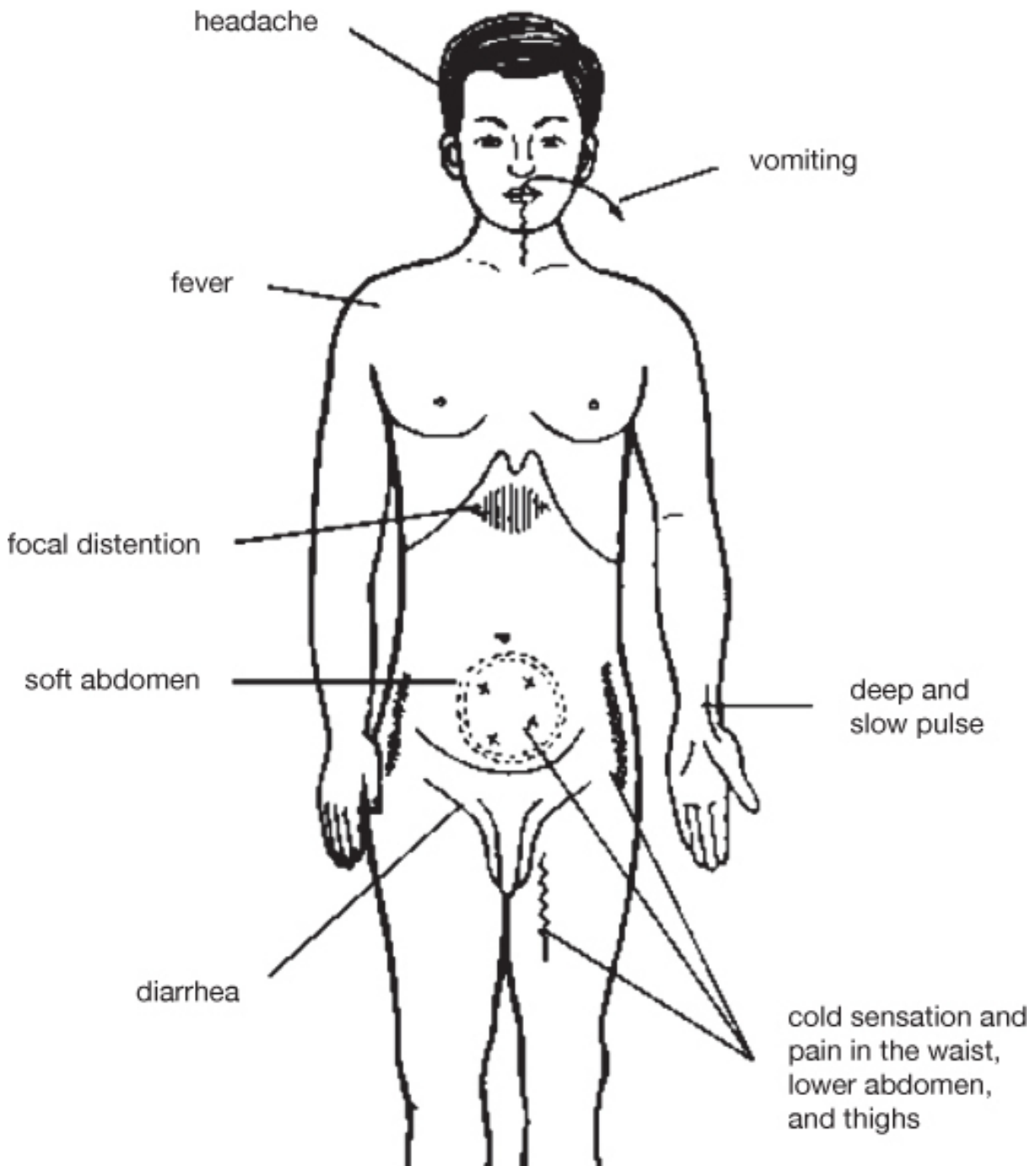


Tang-kuei and Magnolia Formula (Wu Ji San 五積散)

The ingredients of this formula are tang-kuei, magnolia, cinnamon, peony, raw ginger, jujube, licorice, ma-huang, angelica, cnidium, platycodon, citrus, pinellia, hoelen, atractylodes elba, atractylodes lancea, dry ginger, and chih-shih. The Chinese name “Wu Ji” means “Five Obstructions”: the obstructions of Qi, blood, phlegm, water, and digestion.

Indications

1. Cold conformations
2. Cold skin
3. Low back pain from moist air
4. Weak stomach and intestines



February 2010

Maria returned with more pain in her low back, buttocks, and thighs. The intensity of the pain was up to eight on a scale of zero to ten. She was doing quite well after her last treatment with trigger point injections in December. She thought the cold weather had made her feel more pain and the joints stiffen up. She found that trunk bending or lifting still bothered her a lot. She

still had numbness and tingling sensations in both legs. She still felt cold in her hands and feet and had low energy, in addition to irregular menstruation and urine frequency. Her hemoglobin and blood counts were below normal levels. Her blood and urine sugar were normal.

On examination she had normal vital signs. There was no shift of the spine. She pointed to painful areas in the lumbosacral junction, lower abdomen, upper buttocks, and thighs. Tenderness to palpation was noted in the abdomen, lower back, and the buttocks in general. The normal lumbar lordosis was incompletely reversed on active lower back extension from flexion. The trunk muscle strength was graded four on a scale of zero to five. She was unable to do sit-ups with knees extended, sit-ups with knees flexed, or hold her legs up for ten seconds in a supine position. Active tender trigger points were noted in her lumbar multifidus, glutei, and piriformis. Range of motion of the lower back was about 75% normal. The straight-leg raising test was mildly positive on both sides. Her gait was satisfactory, except she walked slower than before.

I injected the trigger points in rectus abdominus, lumbar paraspinals, glutei, and piriformis using a total of 2.5 cc of 1% Xylocaine, followed by moist heat and ultrasound at 1.4 W/cm² to the lower back and buttocks for ten minutes to assist in muscle relaxation and pain control. I thought **Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散)** might be useful in this situation.

13-4: LOW BACK PAIN, CHILLS, ABDOMINAL DISCOMFORT, AND DEPRESSION

CHIEF DIAGNOSES

1. Abdominal pain/discomfort (ICD-10 Code **R10.9**)
2. Insomnia (ICD-10 Code **G47.0**)
3. Low back strains/sprains (ICD-10 Code **S39.012A**)
4. Reactive depression (ICD-10 Code **F32.3**)
5. Active myofascial trigger points (ICD-10 Code **M79.1**)
6. Lumbar nerve root irritation (ICD-10 Code **M54.16**)

August 2010

Maria returned at the request of her orthopedic surgeon. She was still having low back pain and was wearing a high-density lumbosacral corset. She had slipped on a wet floor in May of 2010. She didn't break anything, but she twisted her left elbow during the accident. The pain in her low back was continuous, steady, deep, dull, aching, throbbing, sharp, and burning in nature and was sensitive to pressure. The intensity of the pain might go up to eight on a scale of zero to ten, but it occurred only intermittently. It was aggravated by bending, lifting, turning, or tilting her trunk from side to side, repetitive muscle contractions, air-conditioned rooms, cold or damp weather, prolonged and strenuous use of her back muscles, or during periods of nervous tension. Her pain was eased by resting and the use of a heating pad.

Her low back pain still radiated down her legs and feet with numbness and tingling sensations as before. Sometimes she felt that her legs were completely dead. She seemed to feel cold all the time, particularly in her hands and feet, but at the same time, she might feel a burning sensation in her hands and feet. She had difficulty sitting, standing, walking, and climbing. She had a very low energy level and had poor endurance. She had lost her appetite. Her chest wall felt tight, and she had a suffocating feeling from time to time. She found out that she was allergic to codeine, muscle relaxants, and several non-steroidal anti-inflammatory medications. Her family doctor put her on multivitamins, occasional iron, and trace element supplements. She was more or less a vegetarian but did consume meat and fish occasionally. She had poor teeth, but her appetite was better than last year. She was still not sleeping well at night, and she generally had to take a thirty-minute to one-hour nap after lunch each day. Her bowel movements were irregular, but her bladder function was normal. Her appetite was better than a year ago, but was still not normal and she was depressed. X-rays of her lumbar spine taken in May of 2010 showed some more degenerative changes with bone spurs in her lumbar spines.

During my examination she looked somewhat pale, and her tongue had slightly yellow tongue fur. She had several active myofascial trigger points in her low back, buttocks, and bilateral lower extremities as before. Her arterial pulse at the right wrist was wiry and weak, but with regular rhythm. Her abdomen was tender to deep palpation, but there was no bruit. It was distended. The rest of the examination pointed to the diagnosis of lumbar radiculopathy, degenerative joint disease of the lumbar spine, and kidney Yang deficiency. She also aggravated the preexisting myofascial pain syndrome. I instructed her to keep active and avoid long rest. She was again treated with

trigger point injections/acupuncture along with physical modality and exercises to assist in pain control.

September 2010

Maria returned. She didn't feel any better. In addition to aches and pains, she had more trouble sleeping and had lost some body weight because she had a loss of appetite. She was fired from her job, and she was depressed.

From a TCM point of view, she had deficiencies of Qi and blood, and a mixture of Yang deficiency and Yin excessive patterns that might have also caused her poor appetite, low energy levels, and overall functional capacity levels. Her numbness and tingling sensations in the lower extremities were consistent with lumbar radiculopathy, as well as Qi and blood deficiency. Her pain and neurological deficits seemed to point to Foot Greater Yang Bladder and the Foot Lesser Yang Gallbladder channels.

PLANS

From an herbal medicine point of view, she might benefit from:

- 1. Licorice and Jujube Combination (Gan Mai Da Zao Tang 甘麥大棗)**, because it is one of the most commonly used formulas for depression especially in combination with trouble sleeping; feelings of withdrawal; sadness; fearfulness; and emotionally unstable conditions.
- 2. Tang-kuei, Evodia, and Ginger Combination (Dang Gui Si Ni Jia Wu Zhu Yu Sheng Jiang Tang 當歸四逆加吳茱萸生薑湯)**, because of the cold conformation with cold hands and feet.
- 3. Cinnamon, Atractylodes, and Aconite Combination (Gui Zhi Jia Li Zhu Fu Tang 桂枝加苓朮附湯)**, because of the cold conformation, weak and deficient body constitution, cold and painful low back and lower extremities, numbness and tingling sensations, difficulty flexing and stretching limbs.
- 4. Ginseng and Tang-kuei Ten Combination (Shi Quan Da Bu Tang 十全大補湯)**, because of excessive fatigue, loss of appetite, and cold extremities.
- 5. Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散)** because of the cold conformation, anemia, sensation of heaviness in the

head, aching shoulders, and menstrual irregularities.

6. **Tang-kuei and Magnolia Formula (Wu Ji San 五積散)**, because of cold conformations with cold skin, lower back pain from moist air, and persistent weakness of the stomach and intestines.
7. **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承湯)**, because of lower abdominal pain, dizziness, dark (“reddish-black facial coloring, irregular menstruation, and constipation.
8. **Cinnamon, Atractylodes, and Licorice Combination (Gui Zhi Jia Li Zhu Fu Tang 桂枝加苓朮附湯)**, because of cold conformation, weak and deficient constitution, body pain, and difficulty in flexing and stretching arms and legs.
9. **Major Bupleurum Combination (Da Chai Hu Tang 大柴胡湯)**, because of her chest discomfort and pain, palpitations, and shoulder stiffness.

But because of some family issues, Maria had to leave the country, so she did not have a chance to try any of the herbal formulas.

May 2012

Maria returned. Her case was closed. Although she was sleeping better, her low back pain persisted, as well as chill sensations, lumbar radicular symptoms, and abdominal discomfort. She said that she would like to try **Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散)**. It is a combination of tang-kuei, paeonia, atractylodes, cnidium, hoelen, and alisma.

1. Tang-kuei has a painkilling effect.
2. Atractylodes is a diuretic.
3. Cnidium increases vitality and nourishes blood.
4. Hoelen dispels inner fluid accumulation and is compatible with atractylodes and alisma.

This formula is often used in women with chill sensations, low energy, excessive fatigue, anemia, headache, dizziness, and generalized aches and pains.

In his book *Special Uses of Chinese Herbal Preparations* Dr. Yamada Terutane drew from his extensive personal clinical experience and suggested

Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散) be used in the following conditions:

1. Pale facial complexion and thin physique
2. Poor appetite
3. Gets sick easily
4. The abdominal wall muscles are thin, soft, and tender to palpation
5. Yin deficiency
6. Coldness in the lower abdomen
7. Water stagnation in the stomach
8. Edema of unknown causes with normal heart and kidney

Other indications to use **Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散)**

1. Water toxin with a heavy feeling of the head, headache, and dizziness
2. Pain and stiffness in shoulders and low back
3. Irregular menstruation and difficult menstruation caused by blood stasis

Sometimes the appetite will be lost after taking this formula. Under such condition, change to **Bupleurum and Peony Formula (Jia Wei Xiao Yao San 加味道遙散)** may be necessary.

Maria tried six weeks of **Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散)** followed by three weeks of **Tang-kuei and Magnolia Formula (Wu Ji San 五積散)**. She felt 60–70% functional improvement before the end of summer that year.

13-5: ANOTHER CASE OF LOW BACK PAIN WITH CHILLS

CHIEF DIAGNOSES

1. Chronic low back pain (ICD-10 Code **CM 338.4**)
2. Cold hands and cold feet (ICD-10 Code **R20.9**)
3. Constipation (ICD-10 Code **K59.0**)
4. Loss of appetite (ICD-10 Code **F50.8**)

5. Abdominal fullness sensation (ICD-10 Code **R14.0**)
6. Abdominal pain (ICD-10 Code **R10.9**)

June 1999

Heidi was a thirty-three-year-old X-ray technician working for a colleague of mine. She injured her low back about a year ago when she was lifting a heavy X-ray processor and heard a pop in her low back. She soon felt a sharp pain radiating from her low back down into her left buttock and knee. She was evaluated by a neurologist shortly after the incident. She was diagnosed with an acute annulus injury. She was treated with anti-inflammatory medication, a lumbar corset, and physical therapy and was instructed to stay out of work for two weeks. She was seen for a follow-up evaluation ten days later. At that time she had “severe” low back pain that radiated down the left lower extremity and to the calf. She was told she had lumbar disc herniations at the L4–5 and L5–S1 levels. She was treated with epidural steroid injections and McKenzie lumbar extension exercises. She was also advised to continue physical therapy. She was prescribed Percocet, cortisone injections, and acupuncture. She was seen for follow-up evaluations on four different occasions before the end of 1998. During one of those visits, she was sent for an MRI. The results showed mild disc bulges at the L4–L5 and L5–S1 levels. She was evaluated by an orthopedic surgeon in February 1999 because of a persistent low back, left buttock, and calf pain. She also had occasional numbness and tingling sensations in both lower extremities. The doctor felt that her treatments had reached a plateau.

Heidi had a past history of gallbladder stones and had undergone cholecystectomy. She also had two endometriosis surgeries. Other than low back pain, she constantly felt cold hands and cold feet, frequent episodes of constipation, poor appetite, fullness sensation inside her abdomen, and abdominal pain. She was allergic to ibuprofen. She had no known family history of bone or joint diseases.

On examination she was 5’7” tall and weighed 210 pounds. She was alert, oriented to time, person, and place. Examination of the low back showed an increase in the lumbar lordotic curve. Some muscle spasms with points of tenderness were noticed in the thoracic and lumbosacral paraspinals, quadratus lumborum, gluteus maximus, piriformis, and hamstrings. All these muscles were tender to even light touch. Straight-leg raising test was positive on the left side at about 45 degrees and was mildly positive on the right side at about

60 degrees. The iliotibial bands, hamstrings, and heel cords were tight, particularly on the left side. Range of motion of the lower back in flexion was 50 degrees, extension 5 degrees, left side bending 15 degrees, right side bending 10 degrees, left side turning 10 degrees, and right side turning 15 degrees. The normal lumbar lordotic curve was incompletely reversed on active lower back extension from a flexed position. She was unable to perform sit-ups with her knees straight or bent. She was also unable to hold her feet up in a supine position, raise her head and shoulders up, or raise her heels up in the prone position. Her abdomen was tight and tender to palpation, but there was no sign of internal organ enlargement. Tender trigger points were noticed in the abdominal obliques, with referred pain shooting from the front to the lumbosacral region. Examination of the hips and lower extremities showed no apparent functional deficit.

IMPRESSIONS

1. Low back strain (ICD-10 Code **S39.012A**)
2. Low back sprain (ICD-10 Code **S33.5XXA**)
3. Bulging discs at L4-L5 and L5-S1 levels (ICD-10 Code **M51.26**)
4. Lumbosacral radiculopathy involving the left L5 and S1 nerve roots (ICD-10 Code **M54.16**)

TREATMENT PLANS

Heidi stated that she did not want to take any more pills or go to physical therapy, because the drugs upset her GI tract, gave her constipation, and a loss of appetite. Physical therapy was helping her back, but it couldn't help her cold hands and feet, but she was willing to try something different. In addition to low back pain and lumbar radicular signs, the combination of cold hands and cold feet, constipation, lack of appetite, abdominal fullness, and abdominal pain pointed to **Minor Cinnamon and Peony Combination (Xiao Jian Zhong Tang 小健中湯)** conformation.

Minor Cinnamon and Peony Combination is an interior-chill conformation formula from *Shang Han Lun* and *Chin Kuei Yao Lueh* . It contains cinnamon, peony, raw ginger, jujube, licorice, and maltose. It is derived from **Cinnamon and Peony Combination (Gui Zhi Jia Shao Yao**

Tang 桂枝加芍藥湯), with the addition maltose, the sweet distillate of malted wheat. It would be a mistake to hold the view that maltose is just candy, as it is also a moistening, ascending, coagulative tonic that strengthens the body and cures nocturia, a descending and dispersive condition.

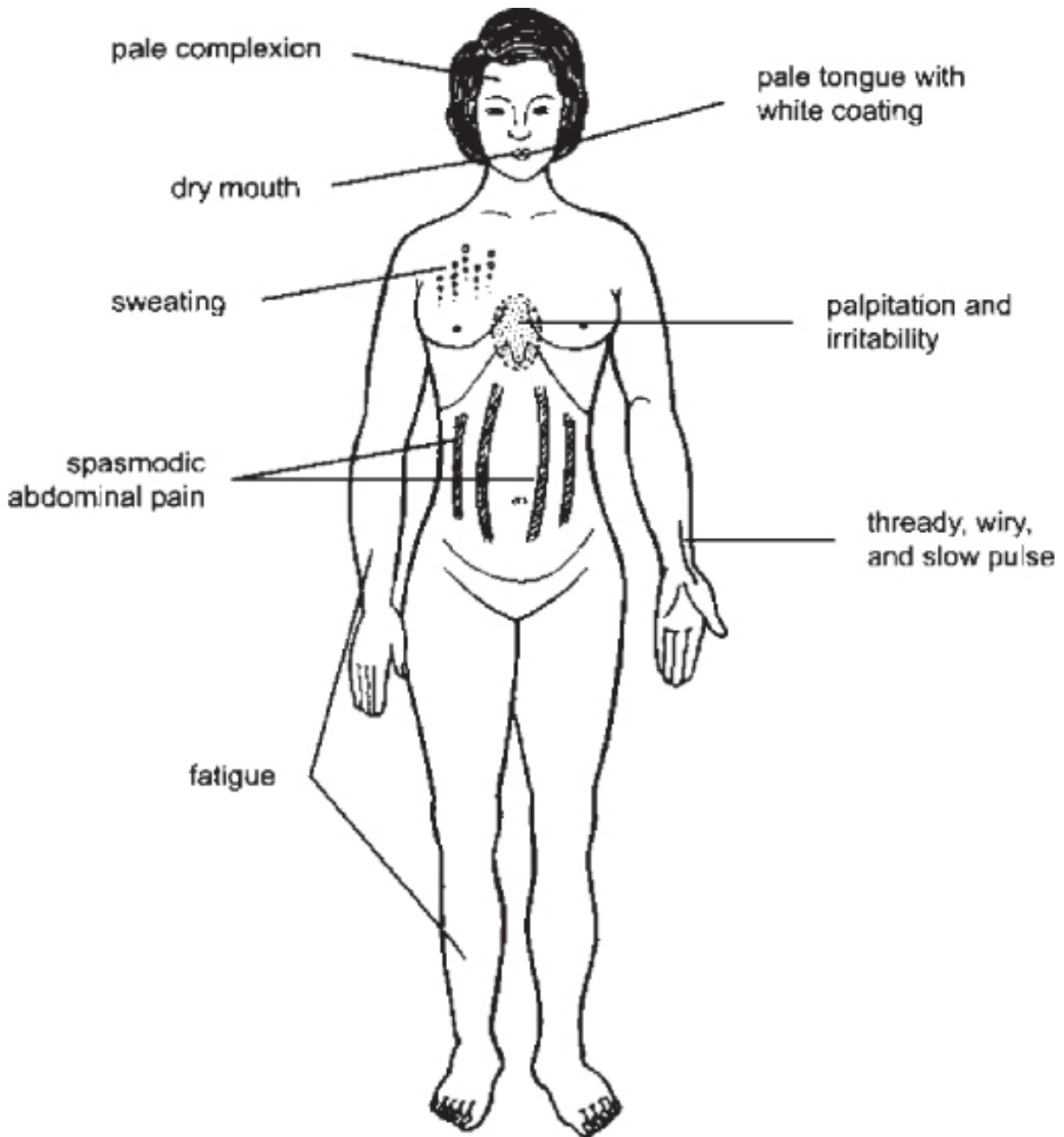
Cinnamon and Peony Combination (Gui Zhi Jia Shao Yao Tang 桂枝加芍藥湯)

The ingredients of this formula are cinnamon, peony, raw ginger, jujube, and licorice.

Indications

1. Abdominal fullness and pain in people with delicate constitutions and poor facial complexions
2. The addition of maltose heightens the formula's tonic qualities and gives the capacity to treat nocturia and bedwetting in children

Heidi's boss called to thank me about three weeks later.



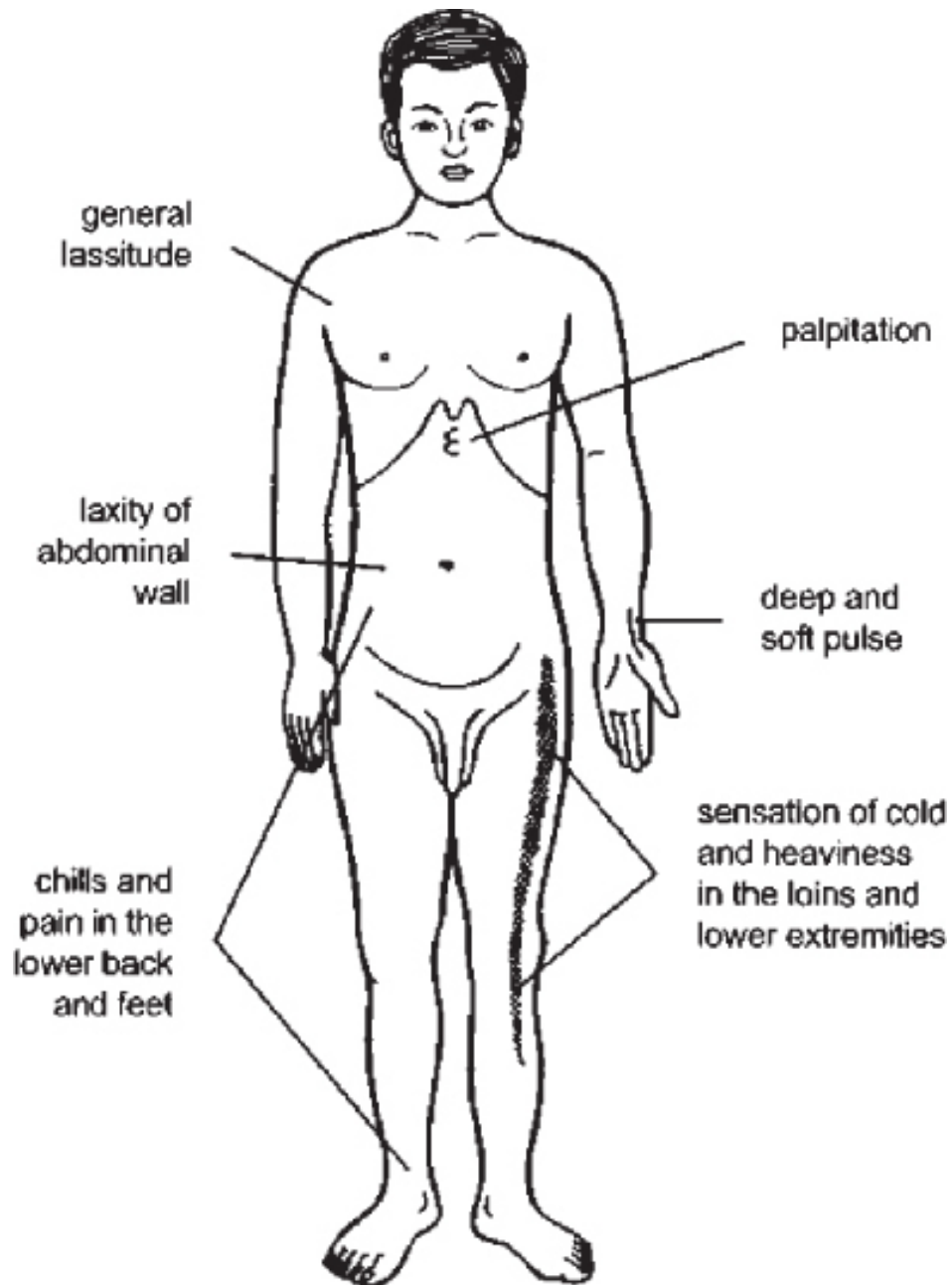
13-6: HERBAL FORMULAS FOR CHILLS IN THE LOWER EXTREMITIES

Ginger and Hoelen Combination (Gan Jiang Ling Zhu Tang 甘薑苓朮湯)

The ingredients of this formula are dried ginger, hoelen, atractylodes, and licorice.

Indications

1. Chills in the lower extremities
2. A heavy sensation in the lower extremities

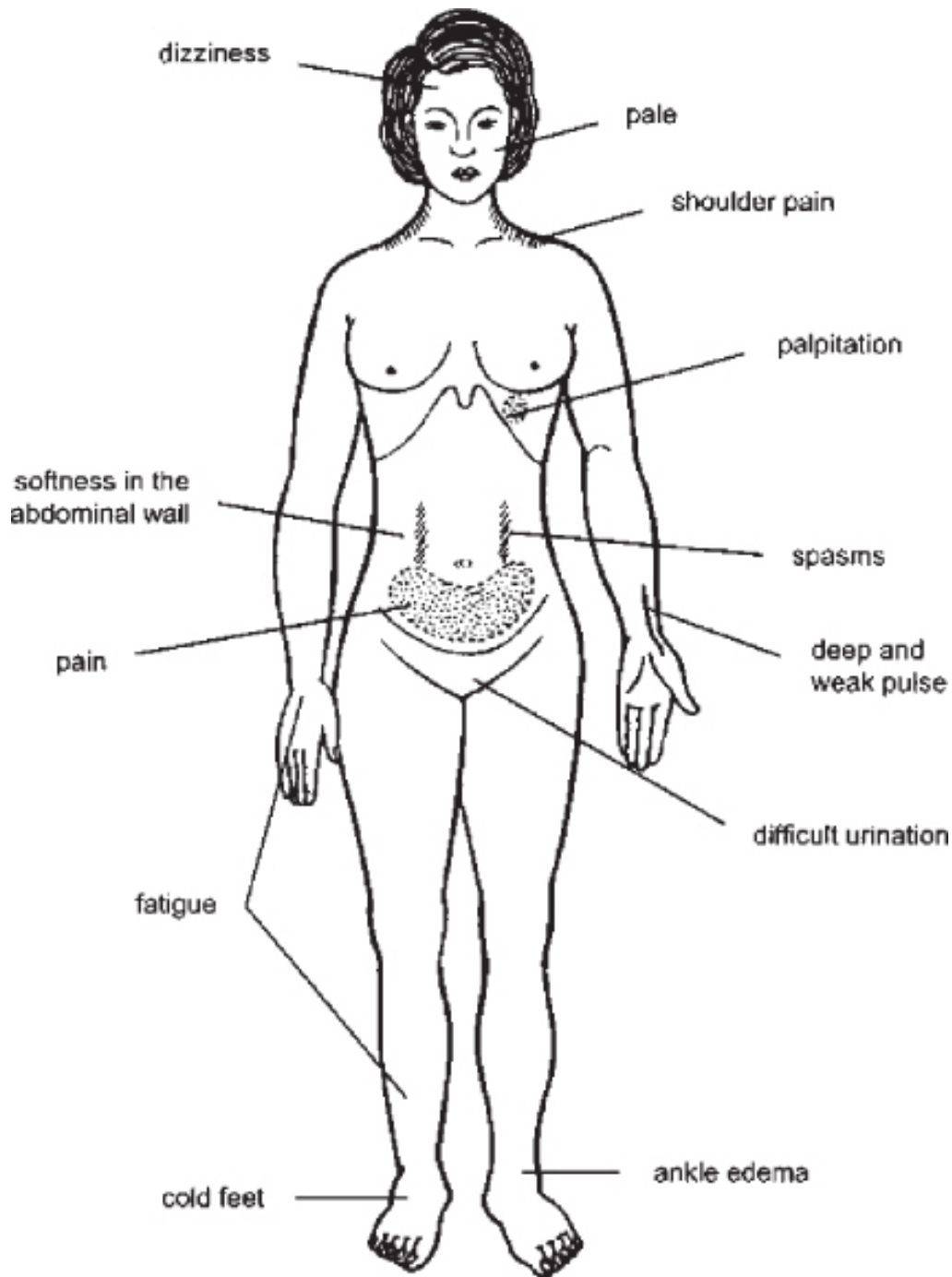


Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散)

The ingredients of this formula are tang-kuei, peony, cnidium, atractylodes, hoelen, and alisma. Tang-kuei and cnidium are warming blood-regulators that adjust and control the blood, especially in menstrual conditions. Peony is an analgesic and antispasmodic; it is good for menstrual pains as well. Apart from alisma, the ingredients are warming tonics that result in a formula that is a blood-regulator for weak-chill-damp conformations.

Indications

1. Chills in the knees
2. Generalized weakness
3. Low energy level

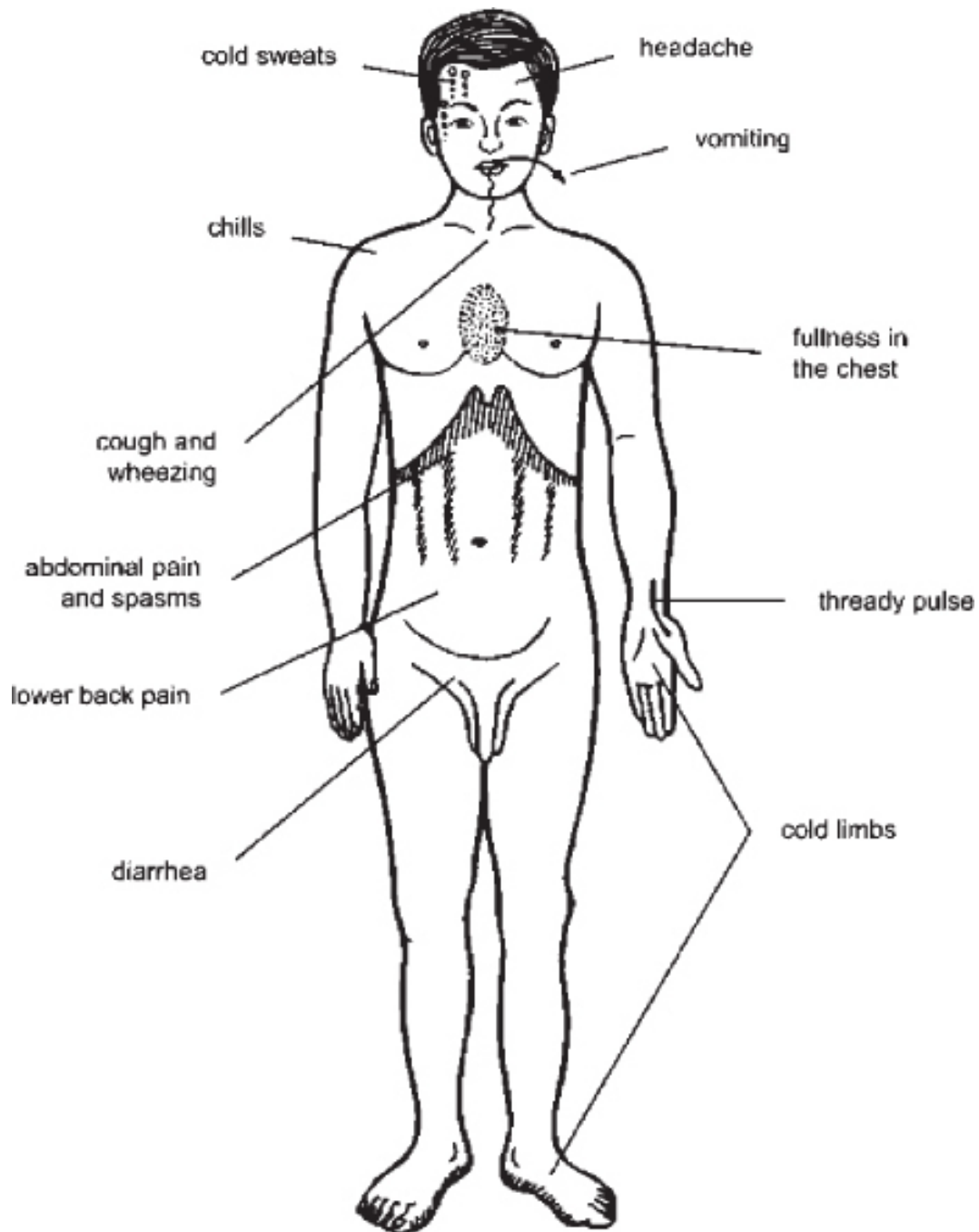


Tang-kuei, Evodia, and Ginger Combination (Dang Gui Si Ni Jia Wu Zhu Yu Sheng Jiang Tang 當歸四逆加吳茱萸生薑湯)

The ingredients of this formula are tang-kuei, evodia, raw ginger, cinnamon, peony, jujube, licorice, asarum, and akebia. Tang-kuei, asarum, and evodia are strongly warming herbs, and asarum also acts as an anesthetic. Together with peony's antispasmodic and analgesic actions, asarum and peony are excellent for fighting painful chills. Asarum, akebia, and evodia are drying herbs, and according to Chinese medicine, the painful chills that are a symptom of stagnant water can be treated with these herbs through movement and dispersion.

Indications

1. Chills in the lower extremities
2. Pains in the lower abdomen if accompanied by chills in the hands and feet

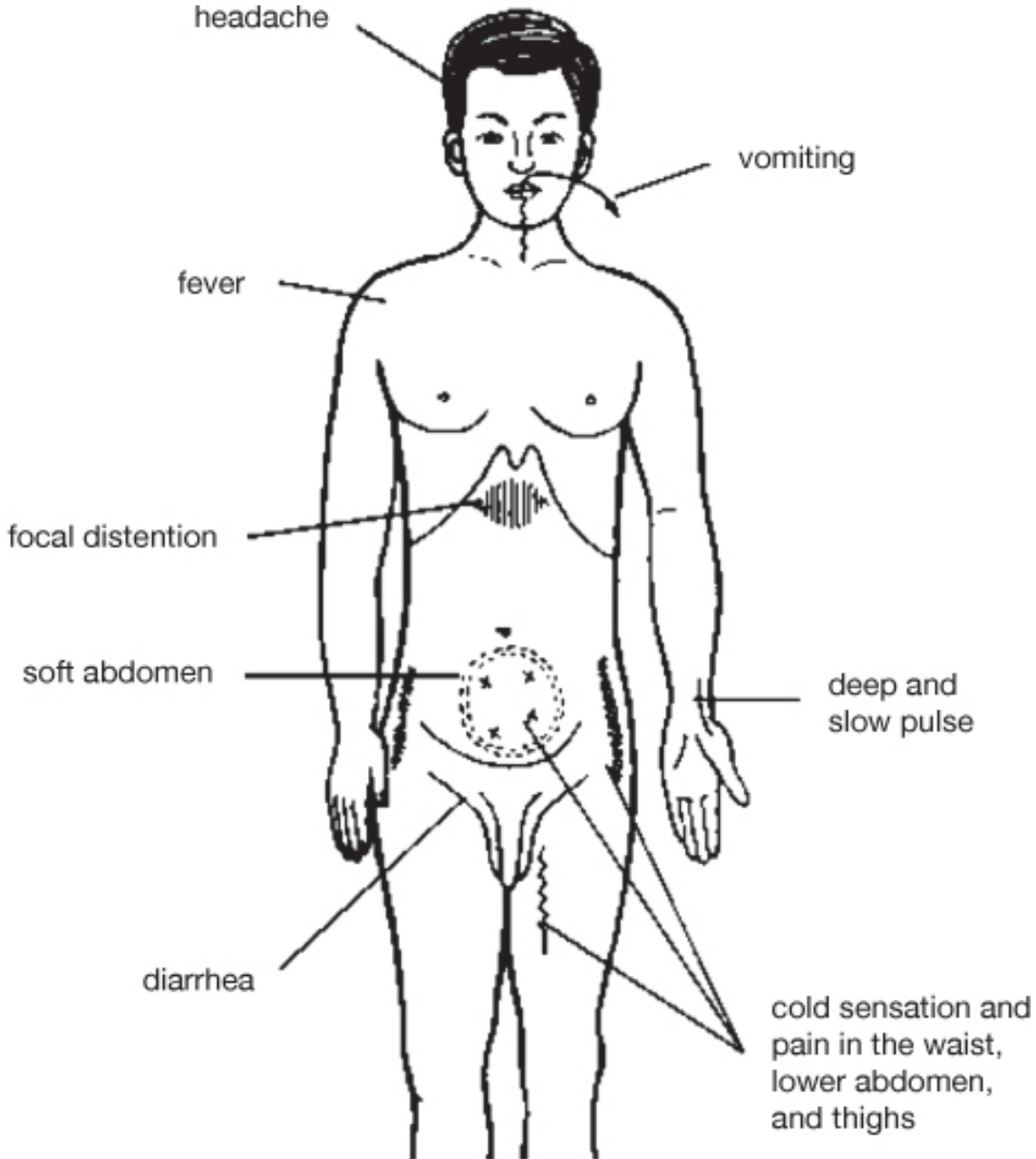


Tang-kuei and Magnolia Formula (Wu Ji San 五積散)

The ingredients of this formula are cinnamon, peony, raw ginger, jujube, licorice, ma-huang, angelica, tang-kuei, cnidium, platycodon, citrus, pinellia, hoelen, atractylodes elba, atractylodes lancea, dry ginger, magnolia, and chih-shih.

Indications

- 1. Chills in the lower torso, especially in the feet and at the belly
- 2. Fever in the upper torso
- 3. Muscle tension from the waist to the thighs



13-7: HERBAL FORMULAS FOR CHILLS AROUND THE WAIST

Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)

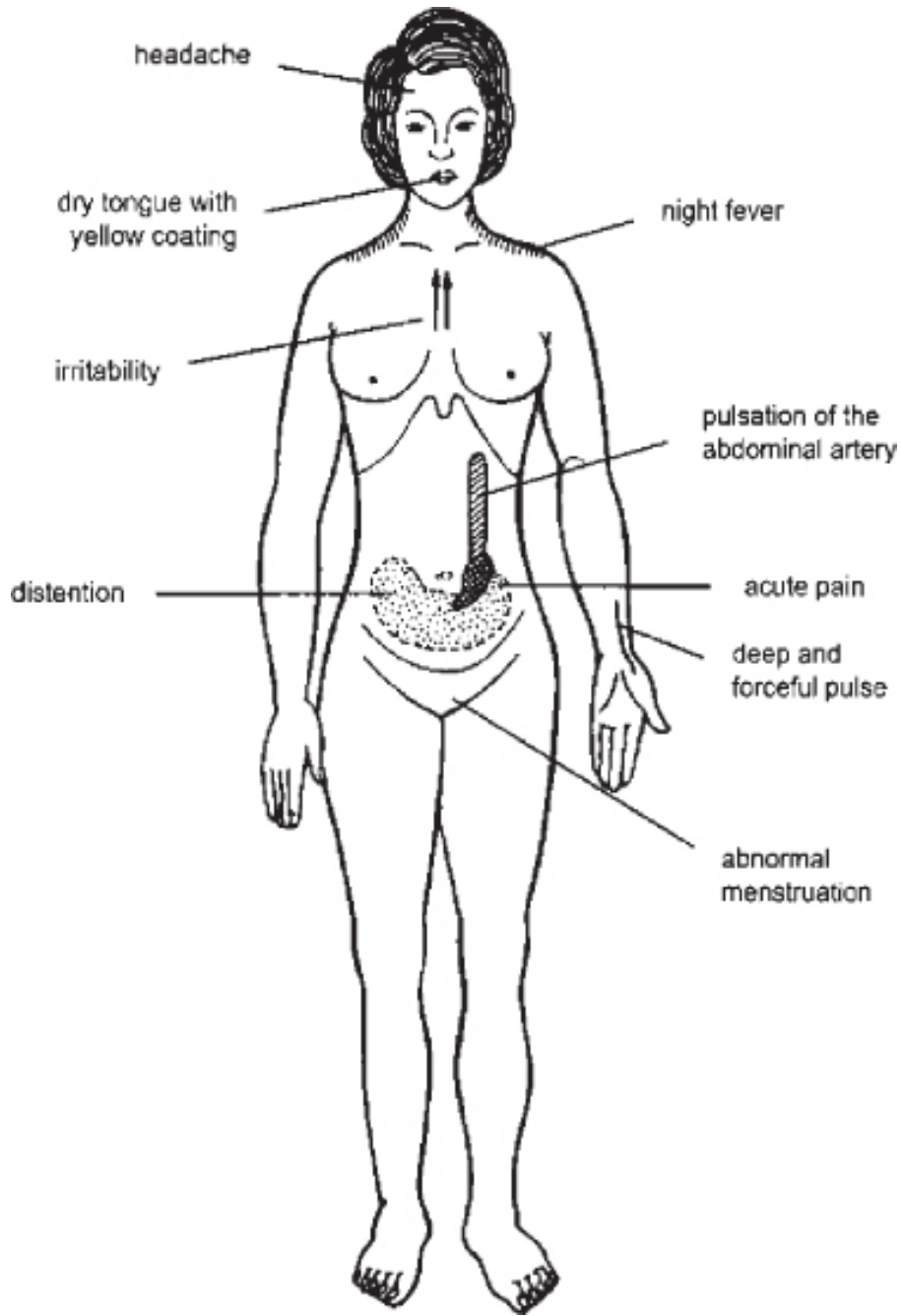
The ingredients of this formula are persica, rhubarb, mirabilium, licorice, and cinnamon.

It is effective in treating constipation accompanied by stagnant blood and organ bleeding in those with healthy complexions and abundant vitality.

Stagnant blood is usually diagnosed by feeling a palpable mass in the patient's lower abdomen, particularly on the lower left-hand side. It is also indicated by sharp pains emanating from that region, or by difficult or painful menstrual periods.

Indications

1. Chills around the waist
2. Constipation accompanied by stagnant blood
3. Blood stagnation caused by contusions, sprains or strains, and all other stagnant blood disorders

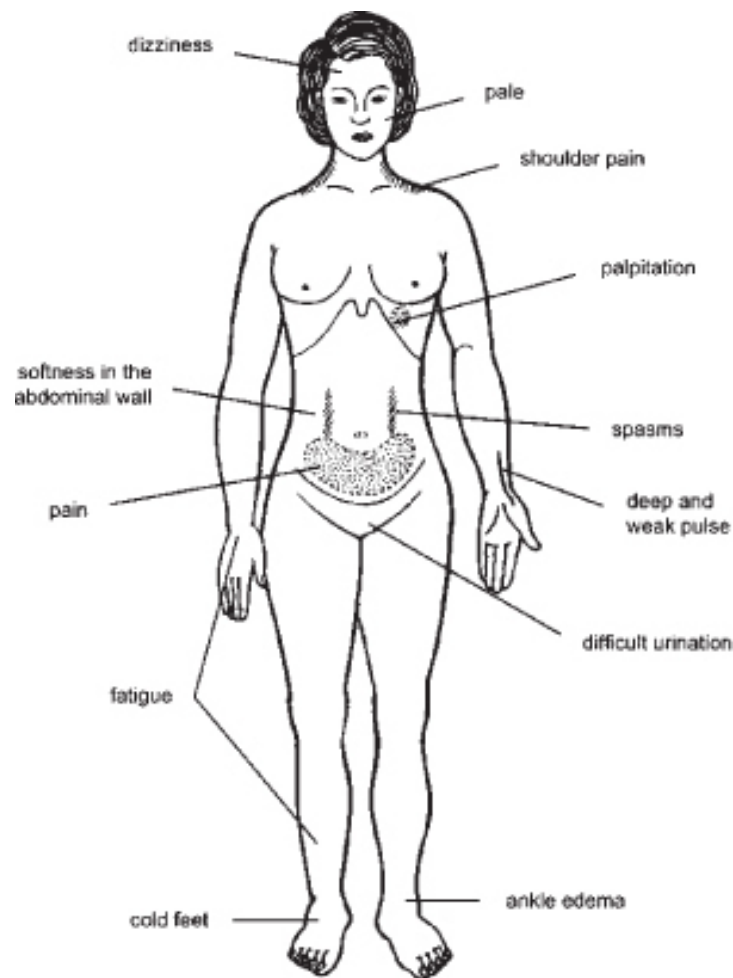


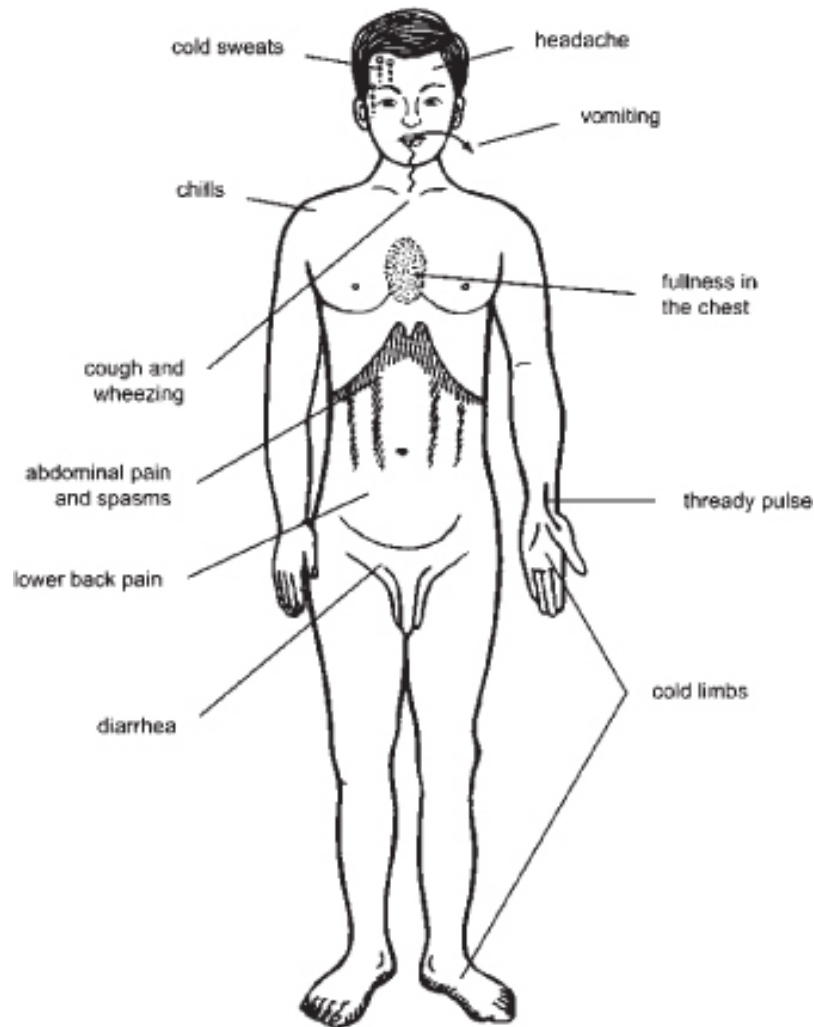
Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散) plus Tang-kuei, Evodia, and Ginger Combination (Dang Gui Si Ni Jia Wu Zhu Yu Sheng Jiang Tang 當歸四逆加吳茱萸生薑湯)

The ingredients of this formula are tang-kuei, peony, cnidium, atractylodes, hoelen, and alisma from **Tang-kuei and Peony Formula** and tang-kuei, evodia, raw ginger, cinnamon, peony, jujube, licorice, asarum, and akebia from **Tang-kuei, Evodia, and Ginger Combination** .

Indications

1. Deficiency conformation
2. Generalized weakness
3. Low energy level
4. Chills around the waist
5. Chills in the lower extremities, especially around the knees
6. Pains in the lower abdomen if accompanied by chills in the hands and feet





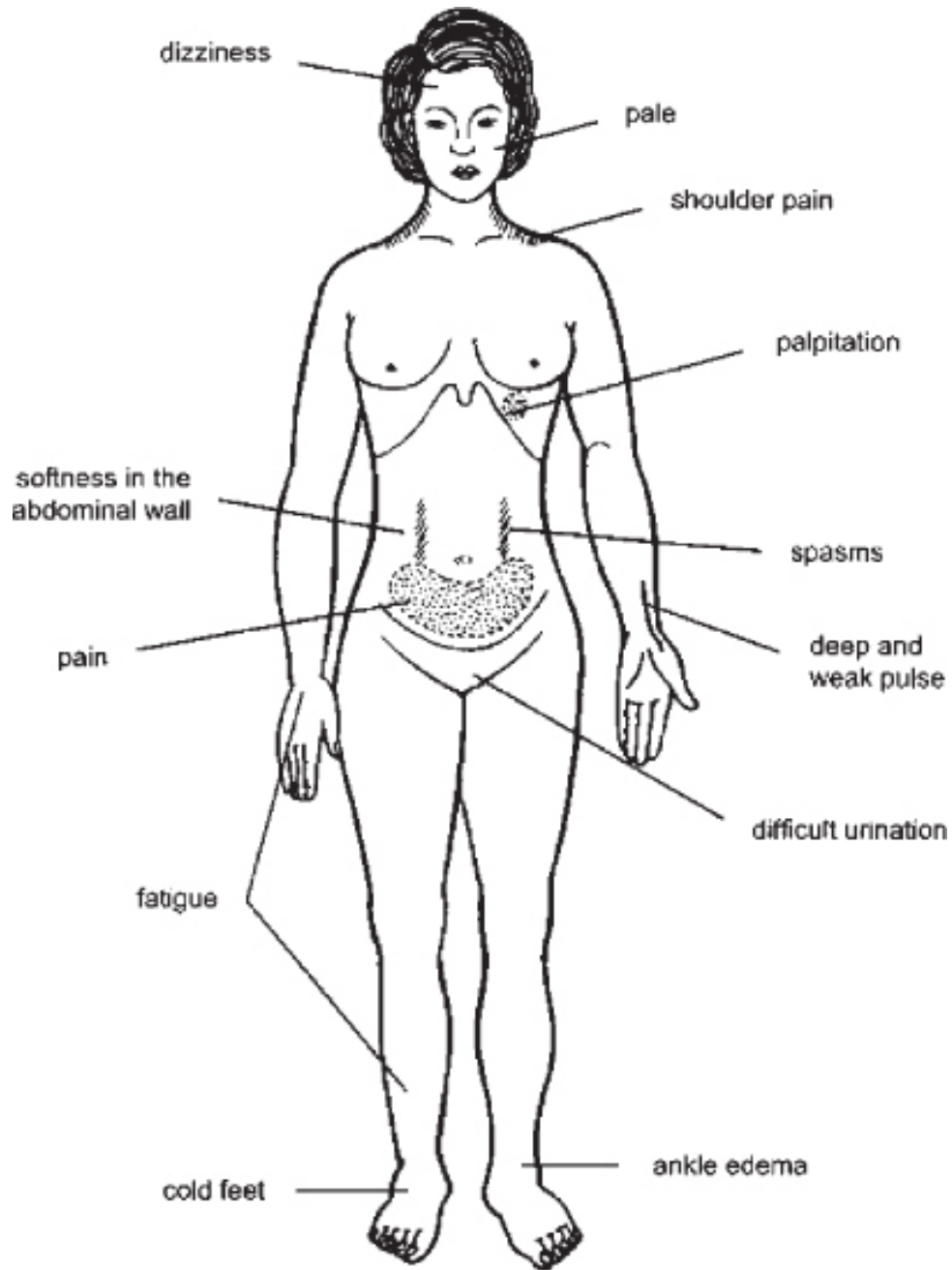
13-8: HERBAL FORMULAS FOR COLD ARMS AND LEGS

Tang-kuei and Peony Formula (Dang Gui Shao Yao San 當歸芍藥散)

The ingredients of this formula are tang-kuei, peony, cnidium, atractylodes, hoelen, and alisma. Tang-kuei and cnidium are warming blood-regulators that adjust and control the blood, especially in menstrual conditions, and as peony is an analgesic and antispasmodic, it is good for menstrual pains as well. Apart from alisma, the ingredients are warming tonics that result in a formula that is a blood-regulator for weak-chill-damp conformations.

Indications

1. Cold and weak conformations
2. Chills in the knees and lower extremities
3. Generalized weakness
4. Low energy level
5. Anemia
6. Heavy head
7. Dizziness
8. Aching shoulders
9. Menstrual irregularities
10. Frequent urination



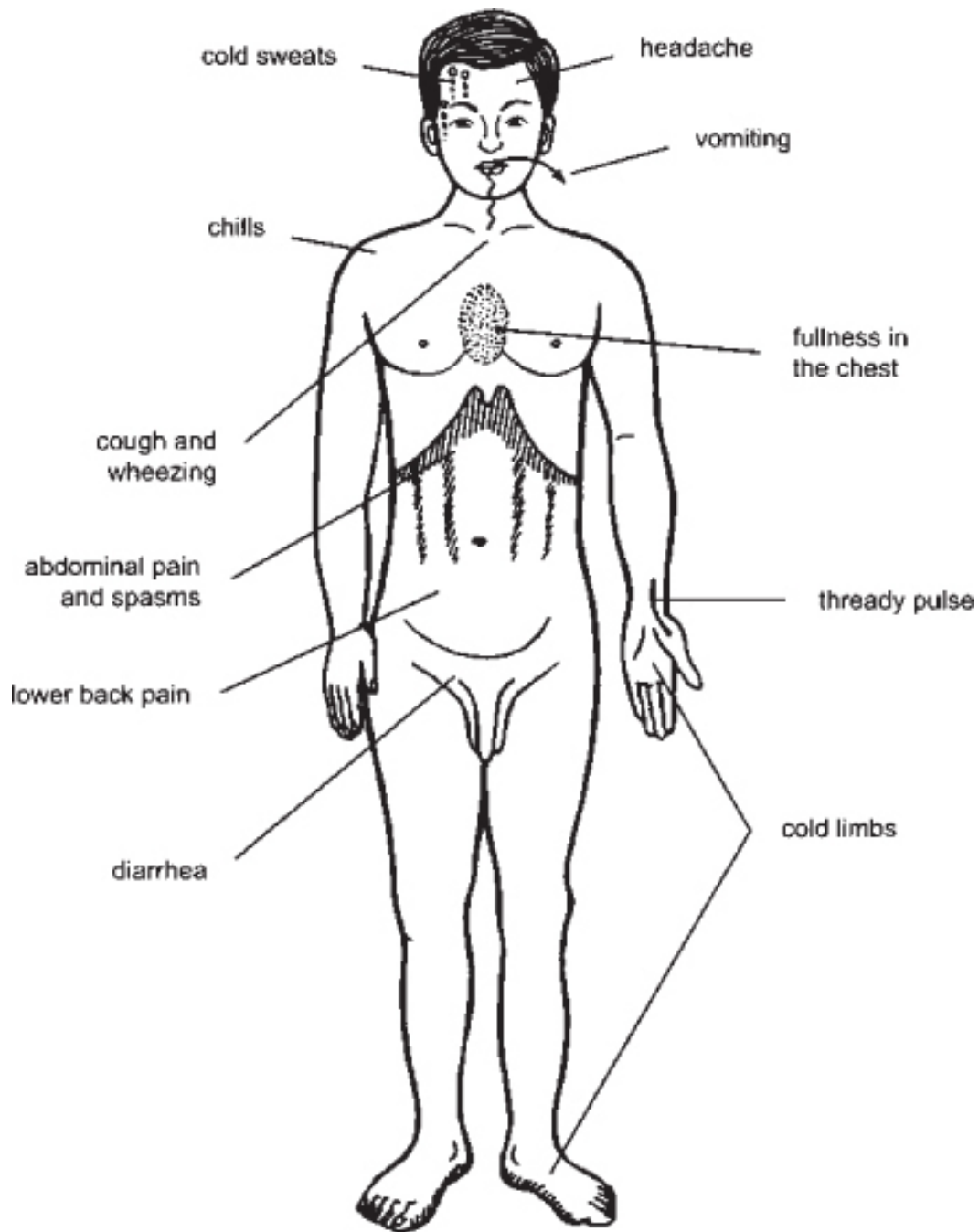
Tang-kuei, Evodia, and Ginger Combination (Dang Gui Si Ni Jia Wu Zhu Yu Sheng Jiang Tang 當歸四逆加吳茱萸生薑湯)

The ingredients of this formula are tang-kuei, evodia, raw ginger, cinnamon, peony, jujube, licorice, asarum, and akebia. Tang-kuei, asarum, and

evodia are strongly warming herbs, and asarum also acts as an anesthetic. Together with peony's antispasmodic and analgesic actions, asarum and peony are excellent for fighting painful chills. Asarum, akebia, and evodia are drying herbs, and according to Chinese medicine, the painful chills that are a symptom of stagnant water can be treated with these herbs through movement and dispersion.

Indications

1. Cold conformation
2. Markedly chilly hands and feet
3. Generalized weakness
4. Low energy level



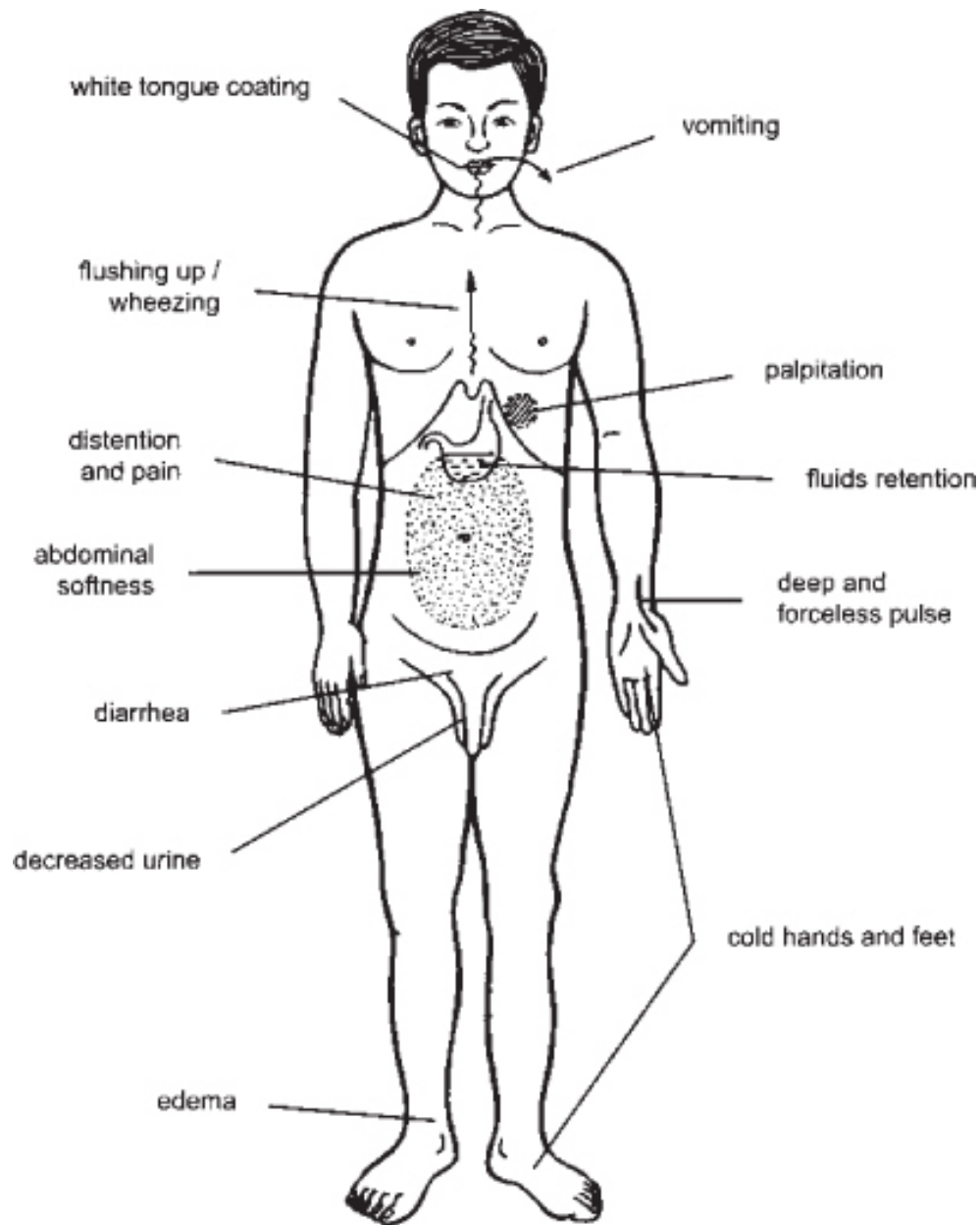
Vitality Combination (Zhen Wu Tang 真武湯)

The ingredients of this formula are aconite, peony, atractylodes, hoelen, and raw ginger. Atractylodes and hoelen remove dampness, and aconite and ginger have similar drying effects. Consequently, the formula as a whole has rather strong drying properties. Although peony is slightly cooling and hoelen

is neutral, the other ingredients are either warming or hot herbs. Many are also tonics; which makes this formula suitable for rather severe weak-chill conformations, especially if they are caused by dampness. Because of the analgesic peony, it works very well in eliminating the abdominal pains that accompany diarrhea.

Indications

1. Weak conformation
2. Poor facial complexion
3. Generalized lack of energy and strength
4. Dizziness
5. Palpitations
6. Chronic diarrhea (especially watery diarrhea)

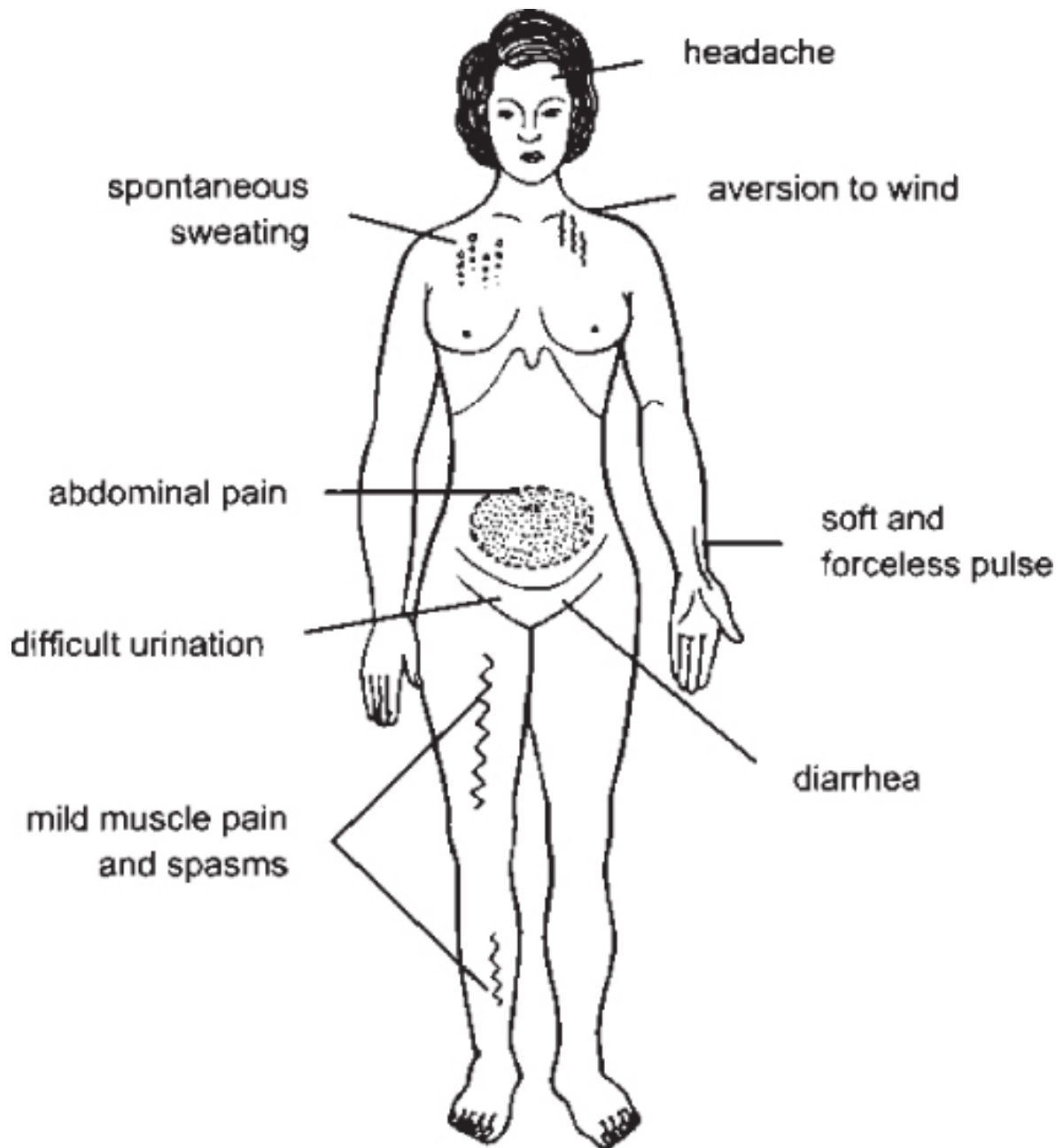


Cinnamon, Atractylodes, and Aconite Combination (Gui Zhi Jia Ling Zhu Fu Tang 桂枝加苓朮附湯)

The ingredients of this formula are cinnamon, atractylodes, aconite, peony, raw ginger, jujube, and licorice.

Indications

1. Cold conformation
2. Weak and deficient body constitution
3. Cold and painful limbs
4. Numbness in arms and legs
5. Difficulty flexing and stretching limbs

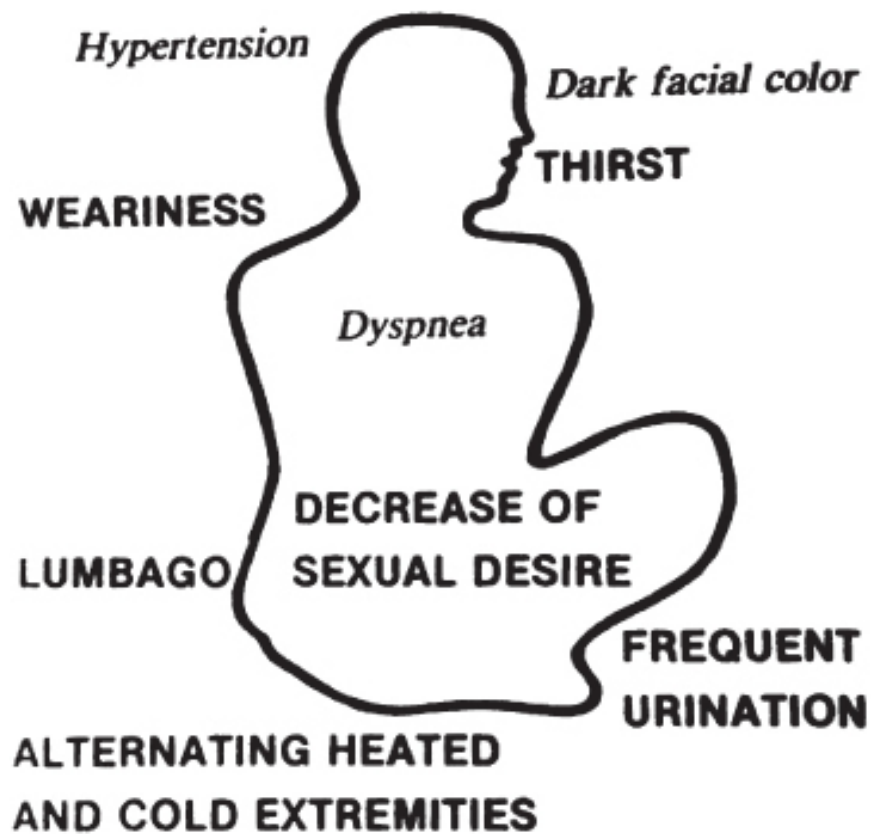


Rehmannia Eight Formula (Ba Wei Di Huang Wan 八味地黄丸)

The ingredients of this formula are steamed rehmannia, dioscorea, comus, hoelen, alisma, moutan, cinnamon, and aconite.

Indications

1. Elderly people
2. Excessive thirst
3. Nocturnal polyuria
4. Dry skin
5. Lack of energy
6. Low back pain



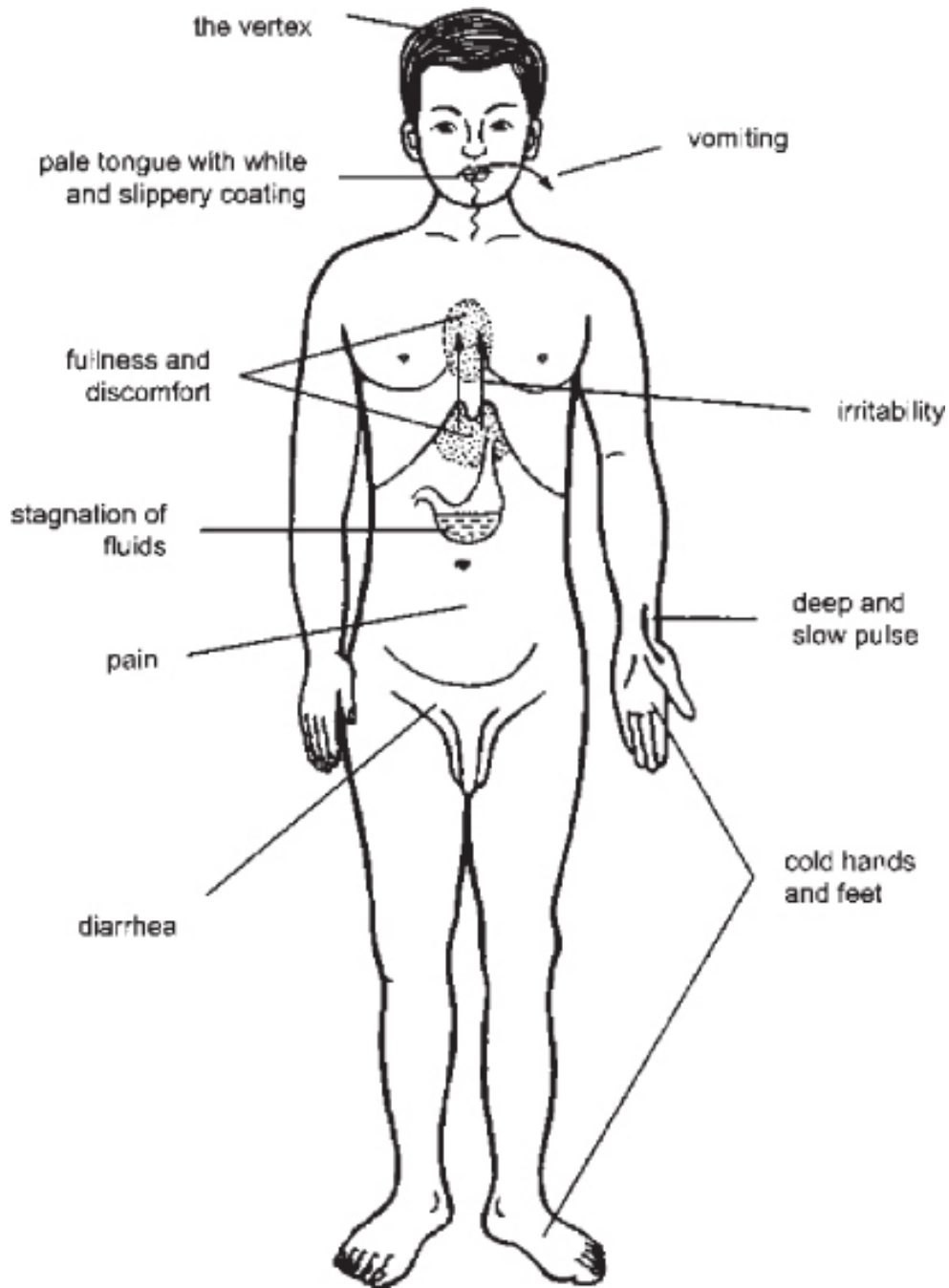
Evodia Combination (Wu Zhu Yu Tang 吳茱萸湯)

The ingredients of this formula are evodia, ginseng, raw ginger, and jujube.

1. Evodia is very bitter with strong warming, drying, and descending properties.
2. Ginseng, jujube, and ginger harmonize the formula.

Indications

1. The formula is used to treat weak-chill-damp-ascending conformation with cold feet, stagnant water in the stomach, headaches, stiff neck and vomiting.
2. The cardinal symptoms are recurring headaches or nausea.
3. The headaches are severe at onset and are often accompanied by vomiting.
4. If vomiting is the chief complaint, it must be accompanied by either headaches or chest congestion.
5. Loss of appetite.
6. The patient's feet must also be chilly and cold for appropriate use.
7. The formula is also used to treat hiccups accompanied by cold feet.

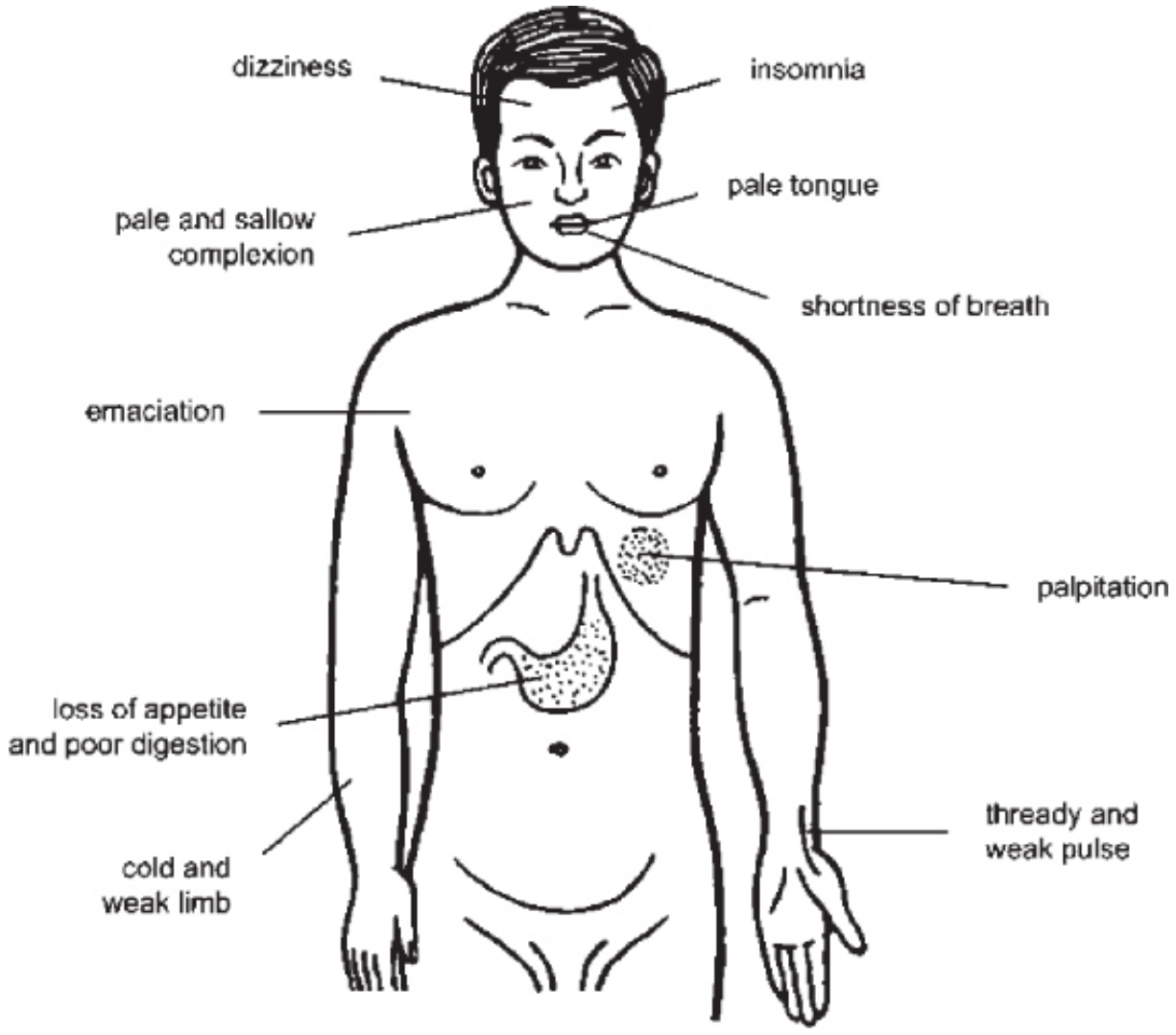


Ginseng and Tang-kuei Ten Combination (Shi Quan Da Bu Tang 十全大補湯)

The ingredients of this formula are ginseng, tang-kuei, cnidium, peony, rehmannia, atractylodes, hoelen, licorice, astragalus, and cinnamon.

Indications

- 1. Easily fatigued
- 2. Loss of appetite
- 3. Night sweating
- 4. Cold extremities

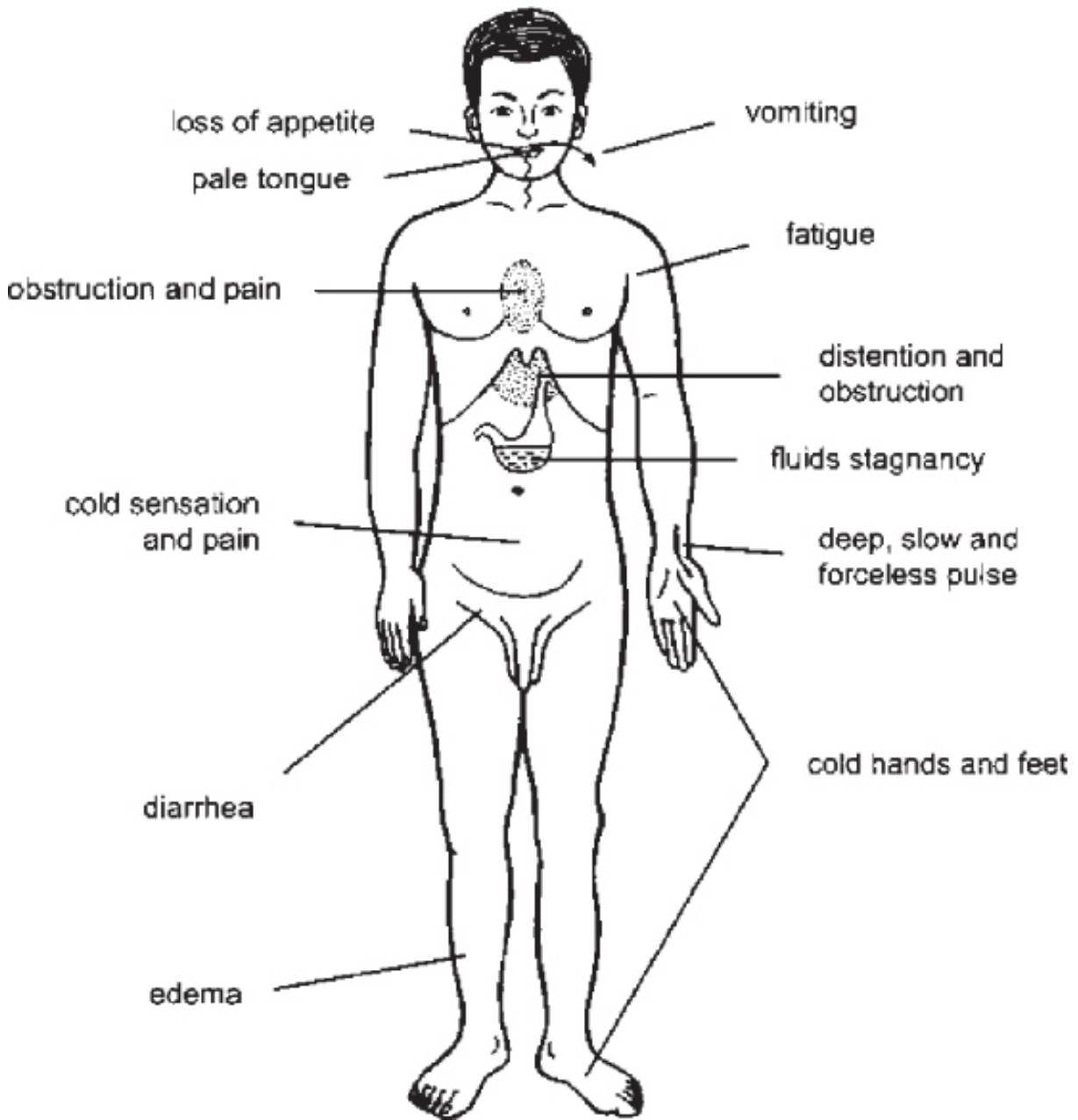


Ginseng and Ginger Combination (Li Zhong Tang 理中湯)

The ingredients of this formula are ginseng, dried ginger, atractylodes, and licorice. The Chinese name for the formula means “middle section manager.” Ginseng relieves fullness sensations in the stomach, as well as the obstruction in the substernal area. Atractylodes is an excellent herb for alleviating chill conditions in the digestive tract. Dried ginger is a stomach stabilizer and can relieve the cold-weakness conformations. Licorice, of course, is an excellent harmonizer. Together the formula is capable of removing stagnant water from the stomach.

Indications

1. Poor digestion
2. Frequent urination
3. Frequent diarrhea
4. Excessive fatigue
5. Cold extremities

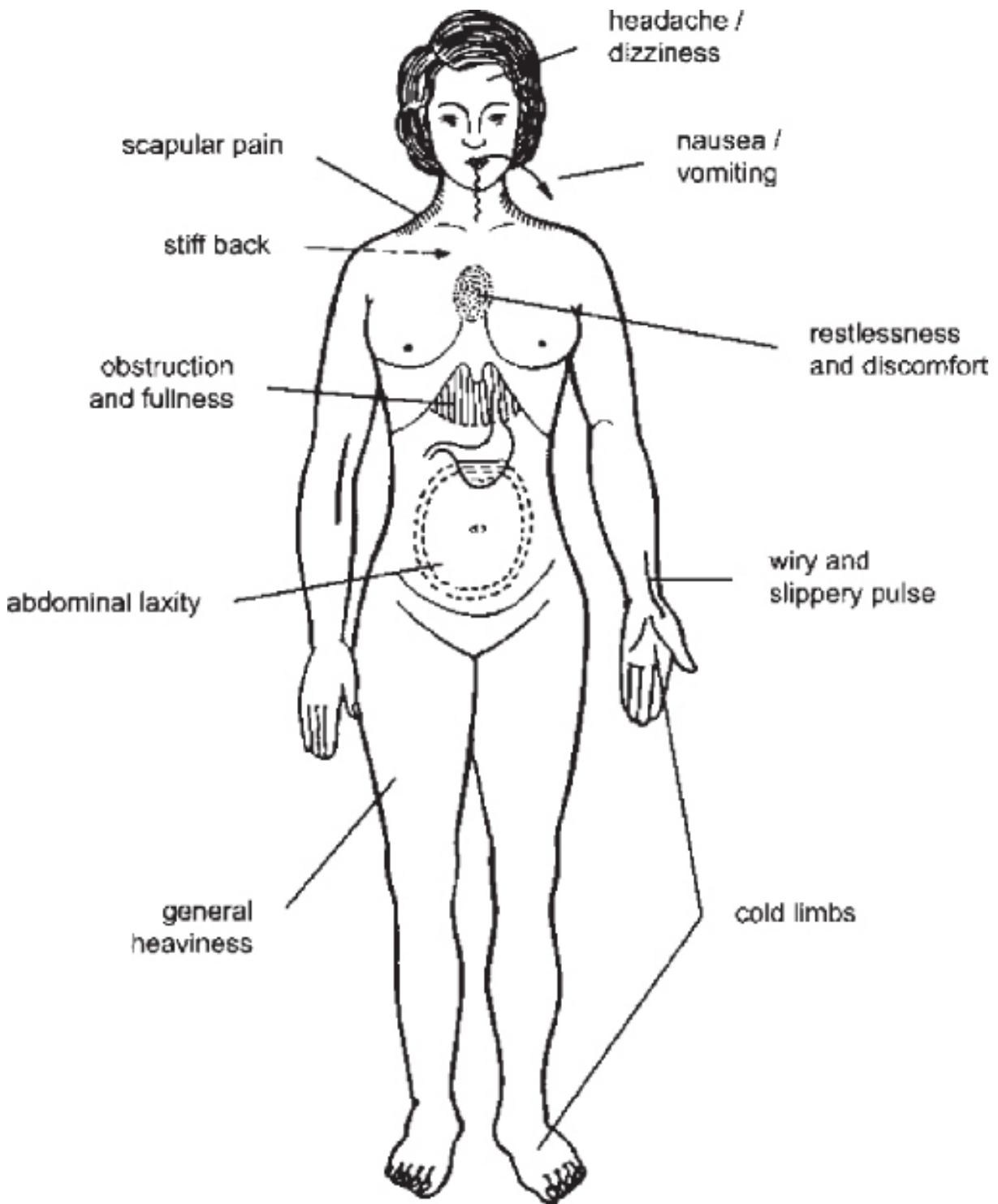


Pinellia and Gastrodia Combination (Ban Xia Bai Zhu Tian Ma Tang 半夏白朮天麻湯)

The ingredients of this formula are pinellia, gastrodia, atractylodes, hoelen, ginseng, citrus, raw ginger, malt, shen-chu, astragalus, phellodendron, alisma, and ginger.

Indications

1. Cold conformation
2. Anemia
3. Headache
4. Dizziness
5. Nausea
6. Vomiting
7. Poor gastrointestinal functions



13-9: HERBAL FORMULAS FOR PAIN AND EXCESSIVE SWEATING

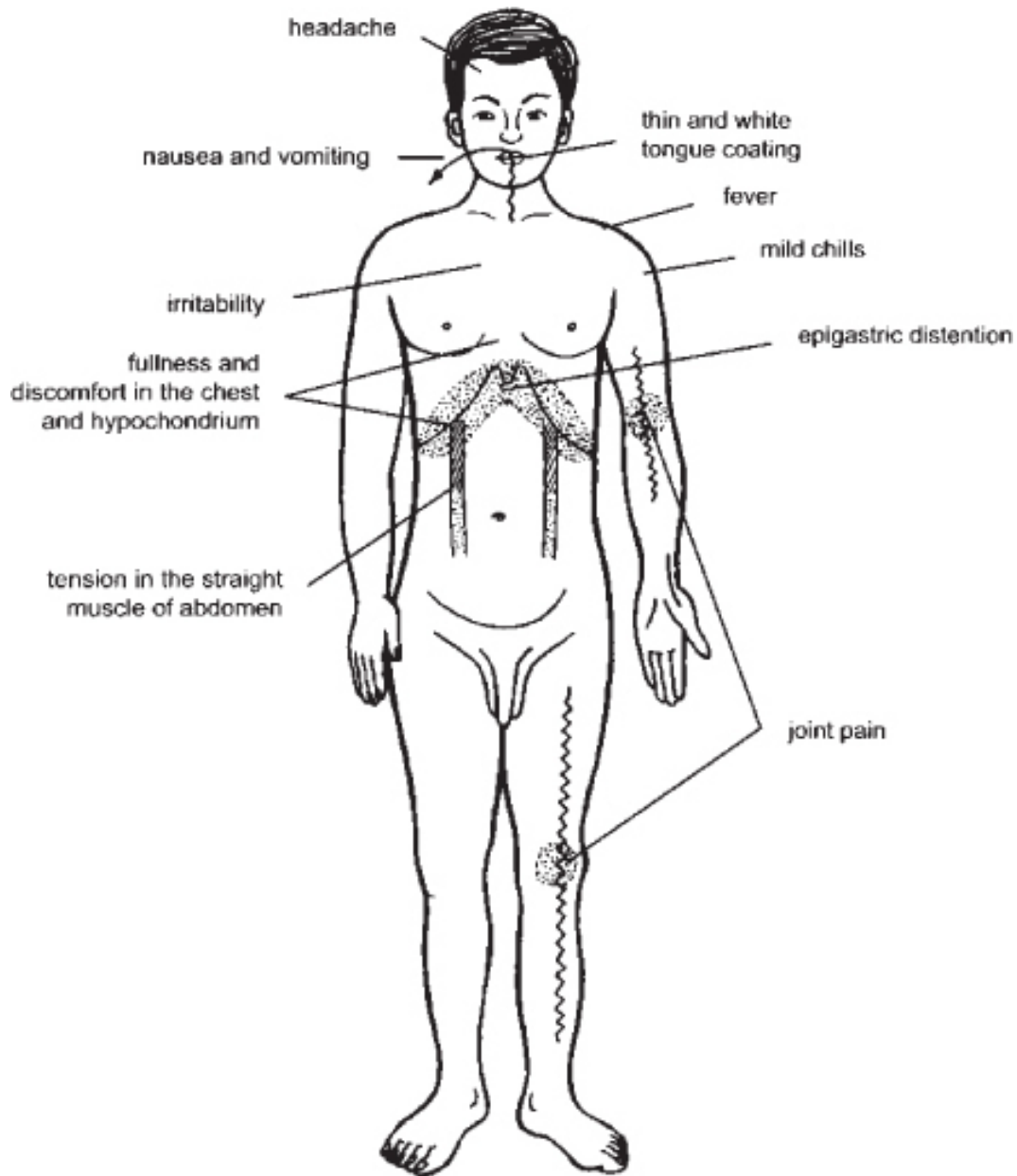
HERBAL FORMULAS FOR PAIN WITH SPONTANEOUS PERSPIRATION

Bupleurum and Cinnamon Combination (Chai Hu Gui Zhi Tang 柴胡桂枝湯)

The ingredients of this formula are bupleurum, cinnamon, scute, pinellia, raw ginger, jujube, ginseng, licorice, and peony.

Indications

1. Primarily to treat pain from gastric and duodenal ulcers.
2. It is also used for the pain of gallstones, gallbladder inflammation, a pancreatitis in origin lingering cold symptoms.
3. Lack of appetite, low-grade fever, headache, and aching neck as a result infectious disorders.



Cinnamon Combination (Gui Zhi Tang 桂枝湯)

The ingredients of this formula are cinnamon, peony, raw ginger, jujube, and licorice.

1. Cinnamon is a mild diaphoretic; it warms the body and disperses pernicious chills and headaches. Cinnamon subdues flushing up and sedates nervous palpitations of the heart; and lastly, it is a stomachic.
2. Peony treats “pernicious wind influences.” A pernicious wind influence invades the body by penetrating the skin and causing abnormal sensation

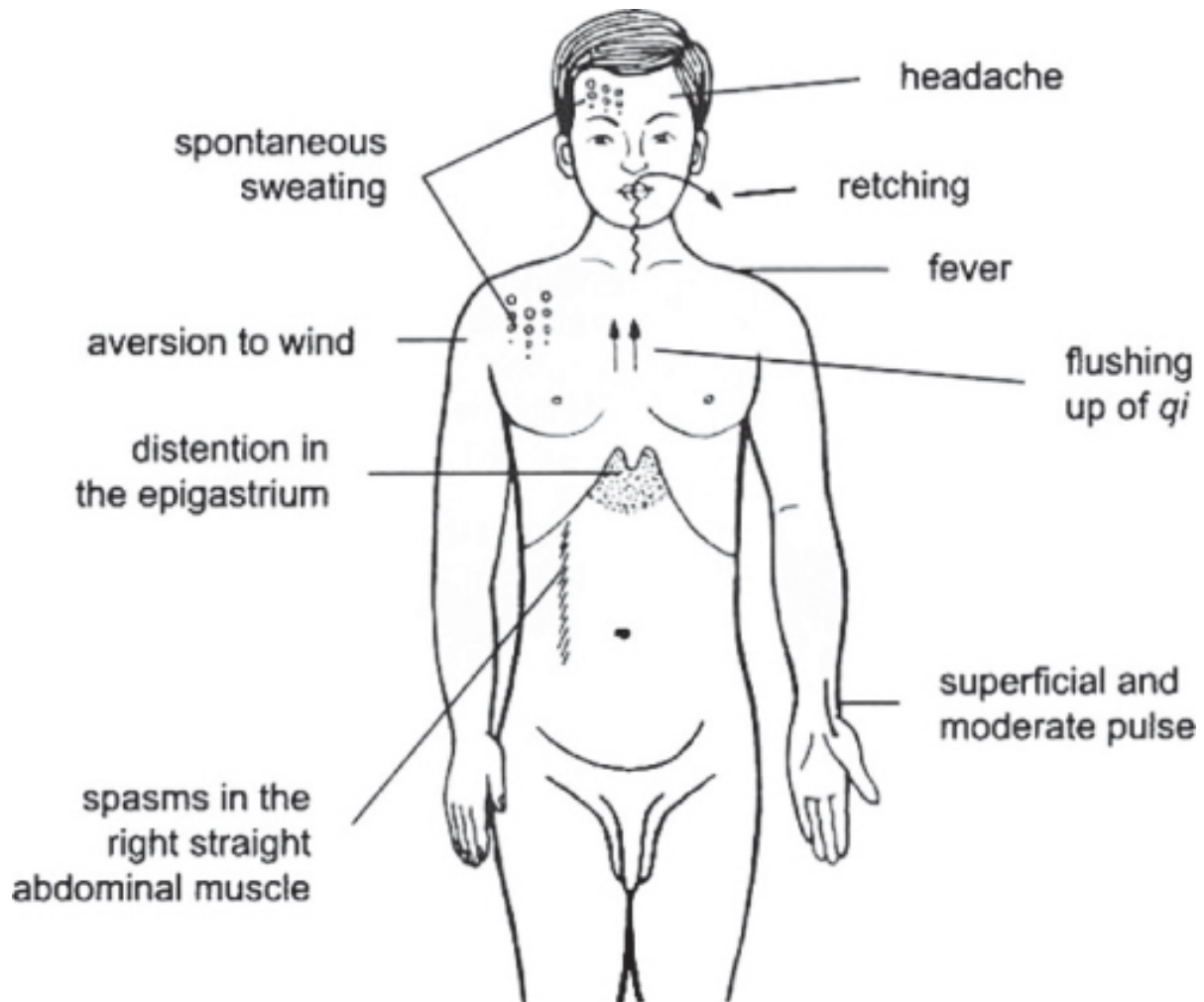
of pain and itching. Peony is said to be able to rid the body of the pernicious influence. Peony also has analgesic and anti-itching effects.

3. Raw ginger and jujube frequently appear together in Chinese herb formulas. These herbs smooth and mellow the formula and eliminate side effects.
4. Licorice appears in over half of all Chinese herbal formulas and also modifies a formula's action and eliminates side effects.

Cinnamon Combination (Gui Zhi Tang 桂枝湯) warms the body and disperses pernicious chills and headaches through a mildly diaphoretic action.

Indications

1. Since all ingredients are tonic herbs, this formula is mainly used to treat weak individuals with delicate constitutions.
2. The initial stages of a cold and other febrile diseases in those who tend to perspire easily (including night sweats and spontaneous perspiration).
3. Chills and headaches.
4. Chills must be present for this formula to be used even if there is a fever.

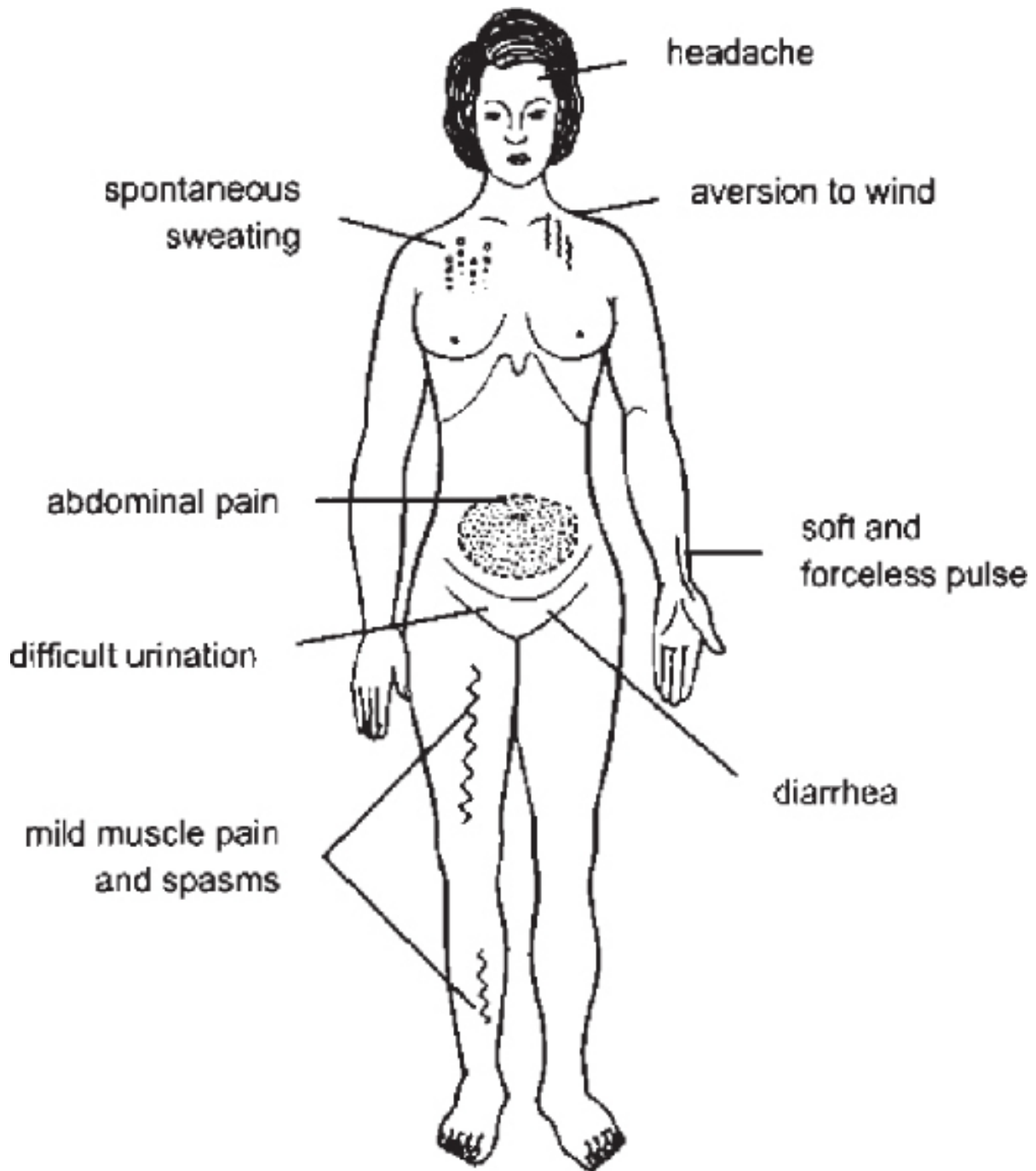


Cinnamon and Atractylodes Combination (Gui Zhi Jia Ling Zhu Fu Tang 桂枝加苓朮附湯)

The ingredients of this formula are cinnamon, atractylodes, raw ginger, jujube, licorice, peony, and aconite. Both peony and aconite are potent analgesics.

Indications

1. This formula treats rheumatism and neuralgia in weak-chill conformati individuals who perspire easily.
2. The analgesic effect of this formula is quite strong and reliable because the analgesic herbs peony and aconite.



Hoelen Five Herb Formula (Wu Ling San 五苓散)

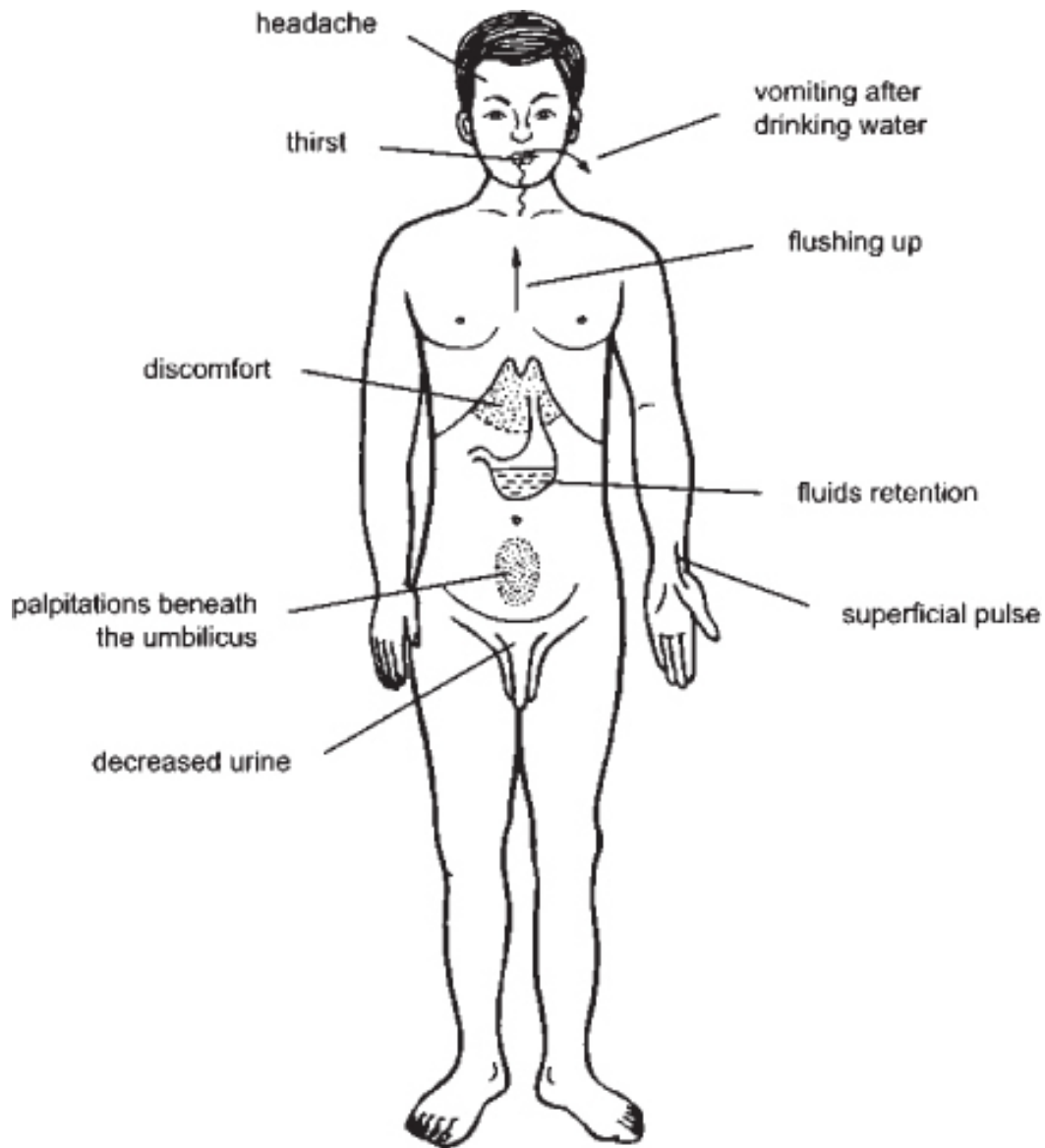
The ingredients of this formula are alisma, hoelen, polyporus, atractylodes, and cinnamon. Because it contains the surface-treating herb cinnamon, this

formula is used primarily for damp conformations accompanied by dizziness and headaches.

Although excessive thirst is not a symptom of most damp conformations, the most typical diagnostic sign for **Hoelen Five Herb Formula (Wu Ling San 五苓散)** is oliguria accompanied by extreme thirst. Another diagnostic indication for the formula is vomiting shortly after drinking water (due to the damp conformation). With such a condition, a fever conformation is considered to be responsible for the thirst. Taking the fever conformation into consideration, one may understand this condition, since vomiting is delayed if a chill conformation is present.

Indications

1. A damp conformation accompanied by oliguria and extreme thirst
2. Dizziness and vomiting after drinking water
3. Nephritis and nephrosis
4. Vomiting in infants due to influenza or acute gastroenteritis
5. Migraine headache
6. Trigeminal neuralgia
7. Red rashes in children
8. Epilepsy
9. If a patient has a chill conformation, this formula is contraindicated



13-10: HERBAL FORMULAS FOR SWELLING OR EDEMA IN THE LOWER EXTREMITIES

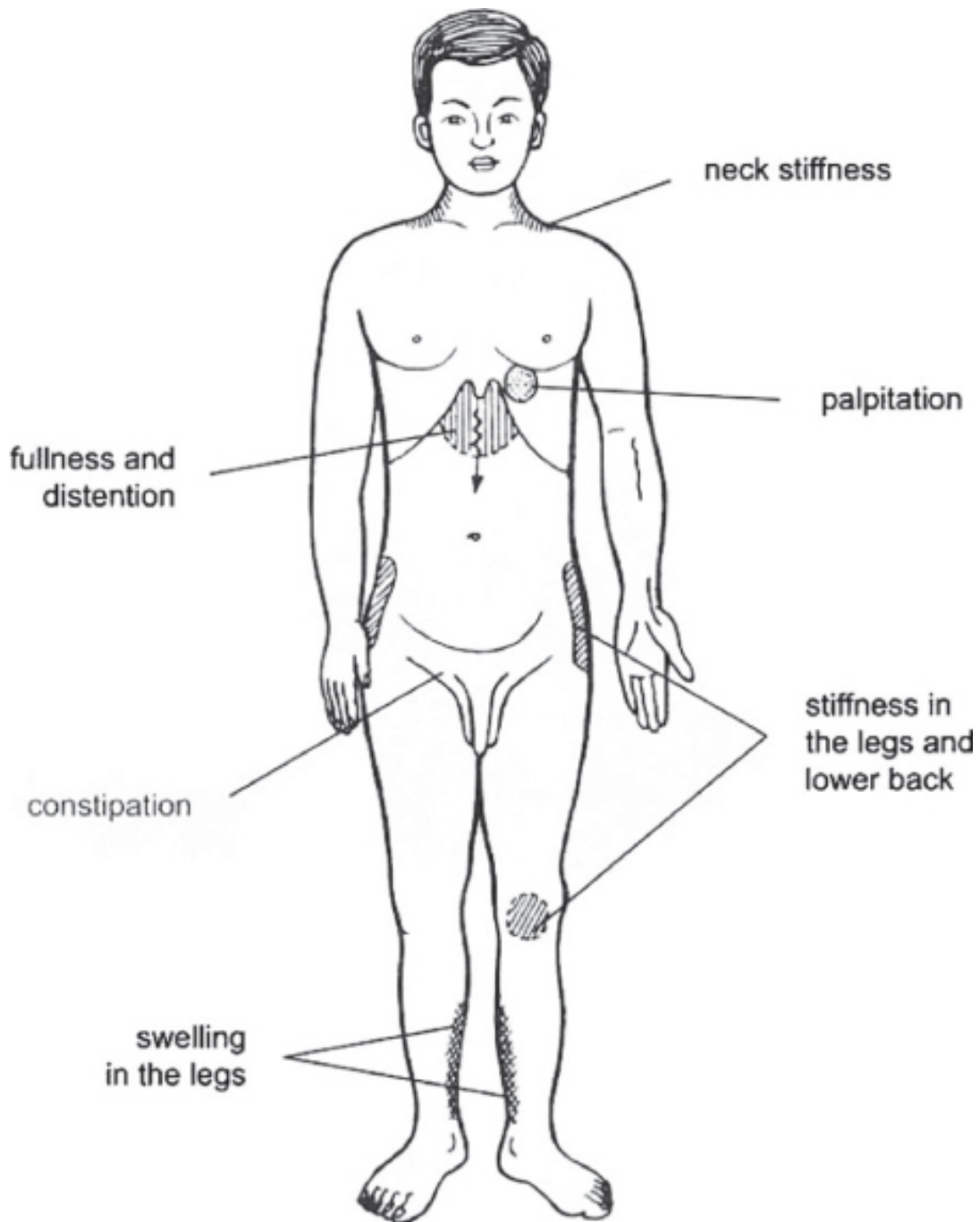
Areca Seed Nine Combination (Jiu Wei Bin Lang Tang 九味檳榔湯)

The ingredients of this formula are areca seed, magnolia, cinnamon, perilla, citrus, raw ginger, licorice, saussurea, and rhubarb.

1. Areca seed relieves distress in the substernal region.
2. Magnolia amplifies this effect with the assistance of rhubarb.
3. Areca seed, magnolia, and rhubarb all possess descending actions.

Indications

1. Swelling in the lower extremities
2. Cold conformation
3. Tired legs
4. Stiffness in the low back and legs
5. Constipation
6. Palpitations
7. Shortness of breath



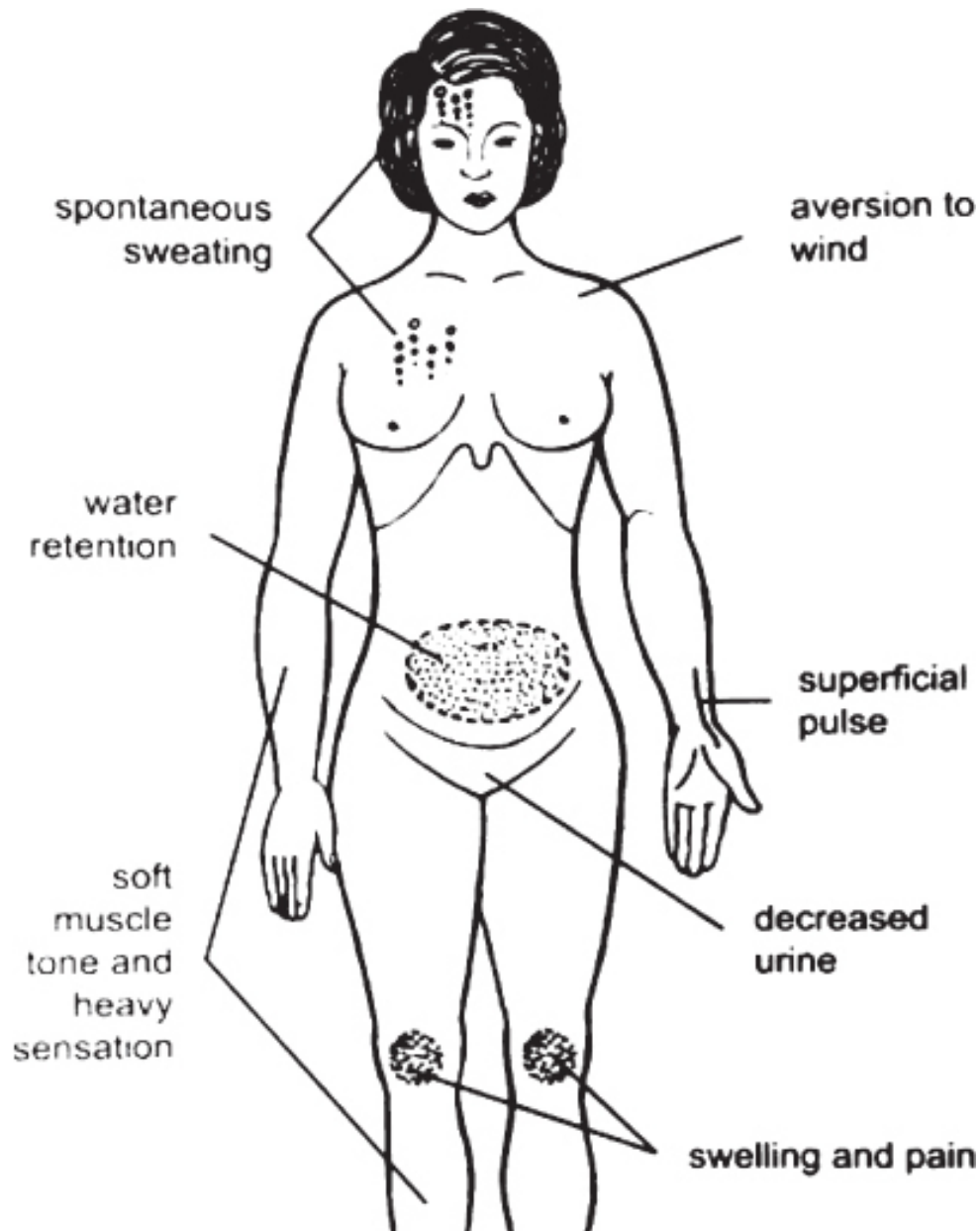
Stephania and Astragalus Combination (Fang Ji Huang Qi Tang 防己黃耆湯)

The ingredients of this formula are stephania, astragalus, atractylodes, licorice, raw ginger, and jujube.

1. Both stephania and atractylodes remove dampness.
2. Astragalus can remove dampness under the skin as well, and thus prevent night sweats and excessive perspiration.

Indications

1. Swelling in the lower extremities
2. Weight gained due to water accumulation
3. Pale skin
4. Excessive sweat
5. Often accompanied by bone and joint pain and stiffness (rheumatic symptoms) in the lower extremities



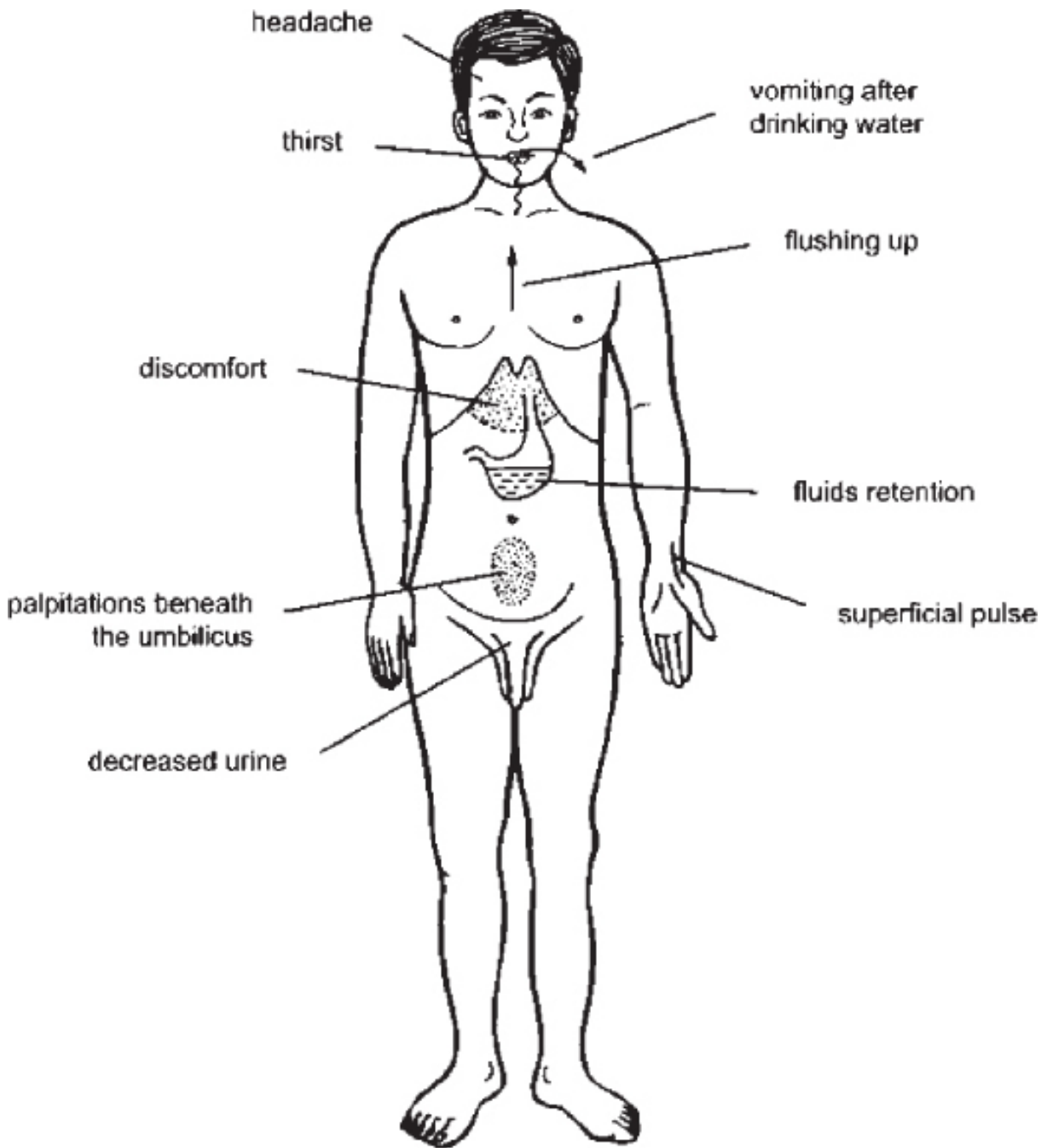
Hoelen Five Herb Formula (Wu Ling San 五苓散)

The ingredients of the formula are hoelen, alisma, polyporus, atractylodes, and cinnamon.

Indications

1. Edema

2. Gastric distension
3. Thirst but vomits after drinking water
4. Palpitation beneath the belly button
5. Decreased urine



13-11: HERBAL FORMULAS FOR STAGNANT WATER IN STOMACH

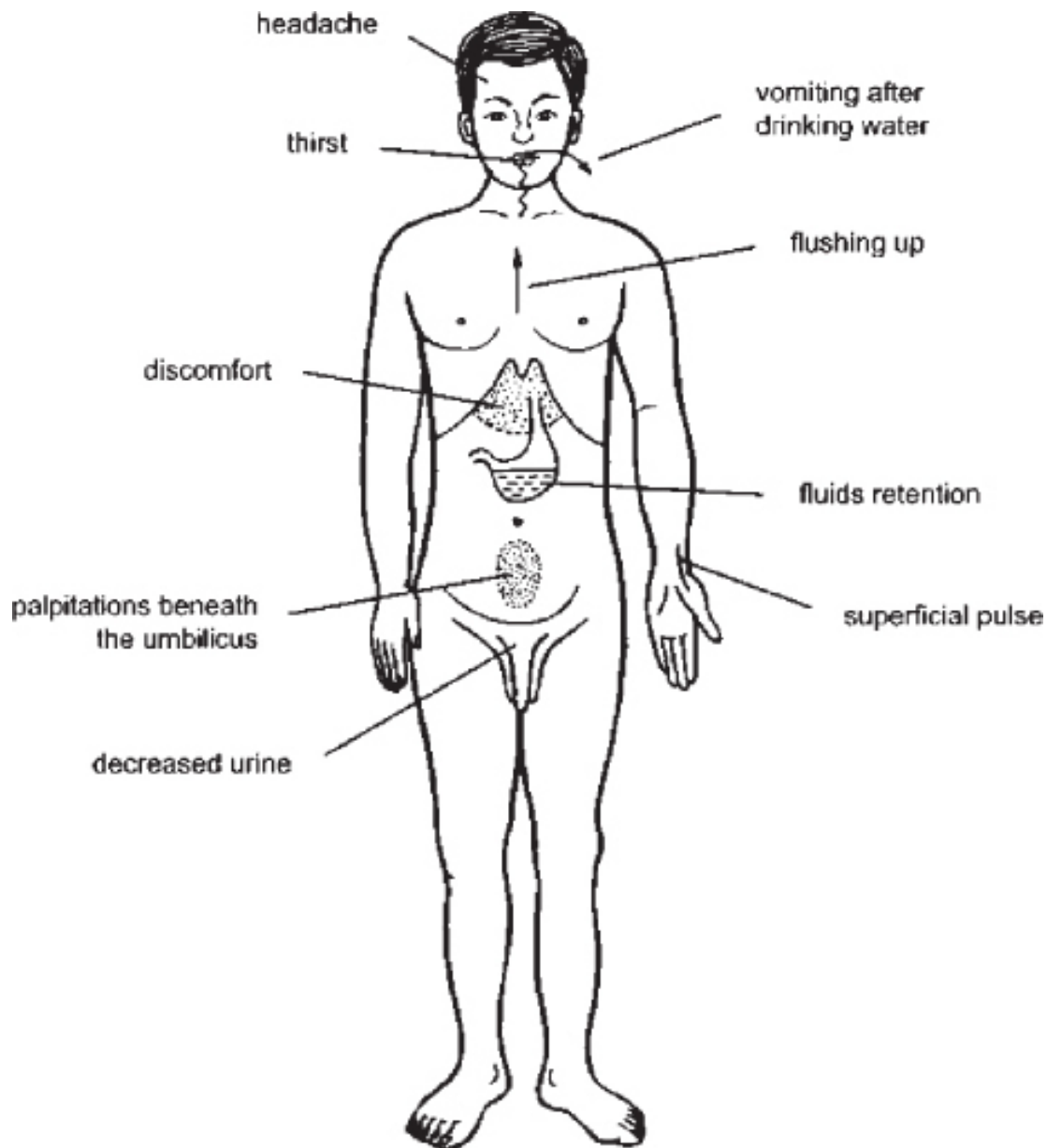
Hoelen Five Herb Formula (Wu Ling San 五苓散)

The ingredients of this formula are hoelen, alisma, polyporus, atractylodes, and cinnamon.

Because this formula contains the surface-treating herb cinnamon, it is used primarily for damp conformations accompanied by dizziness and headaches. Although excessive thirst is not a symptom of most damp conformations, the most typical diagnostic sign for **Hoelen Five Herb Formula** is oliguria accompanied by extreme thirst. With such a condition, a fever conformation is considered to be responsible for the thirst.

Indications

1. Edema
2. Gastric distension
3. Thirst but vomits after drinking water
4. Palpitation beneath the belly button
5. Decreased urine



Hoelen Combination (Fu Ling Yin 茯苓飲)

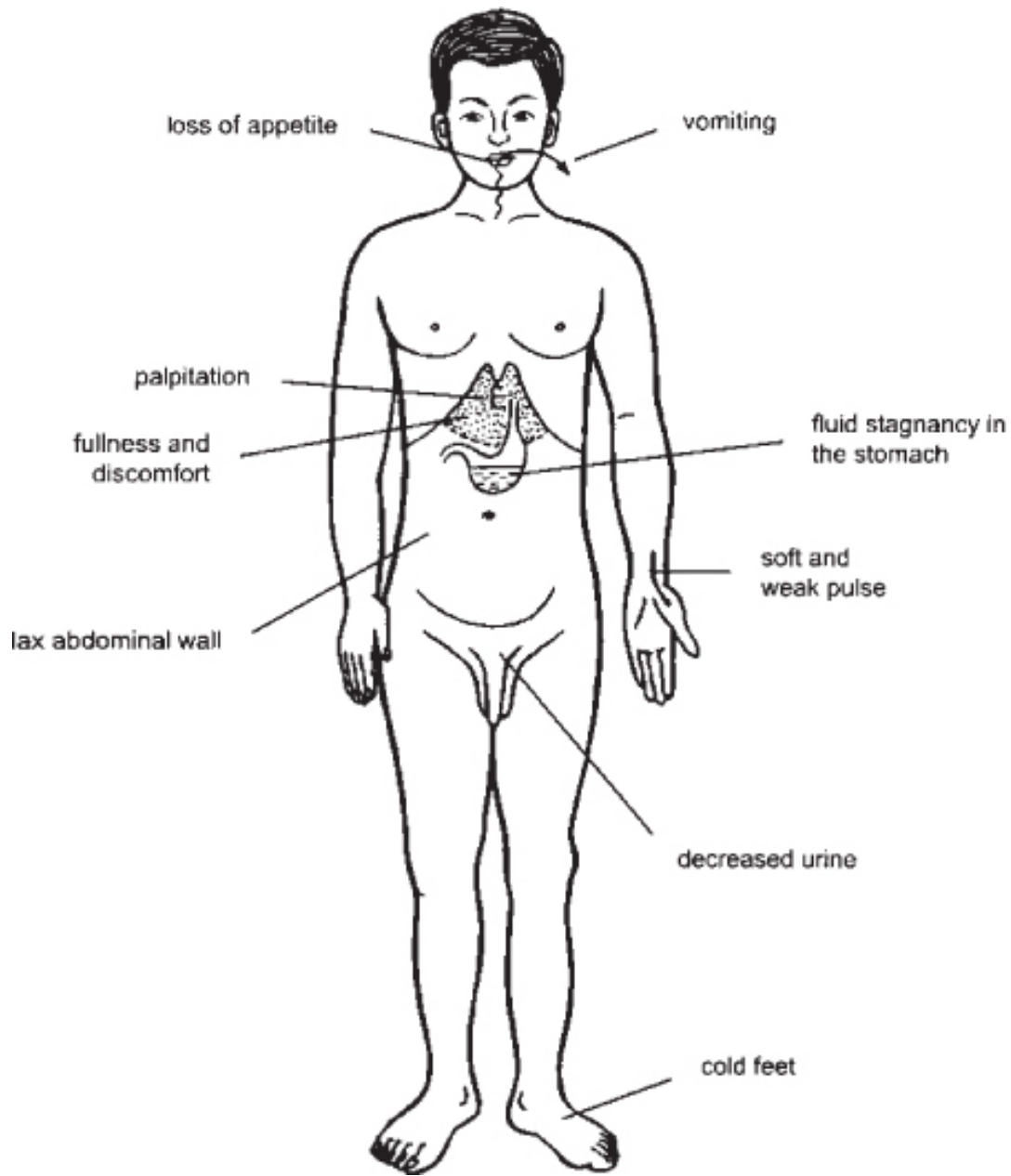
The ingredients of this formula are hoelen, ginseng, atractylodes, raw ginger, citrus, and chih-shih.

This combination is derived from **Ginseng and Ginger Combination (Li Zhong Tang 理中湯)**, which contains ginseng, dried ginger, atractylodes, and licorice, and **Four Major Herb Combination (Si Jun Zi Tang 四君子湯)**, which contains ginseng, atractylodes, hoelen, licorice, raw ginger, and jujube. *Atractylodes alba* (white, coagulative) is replaced with the more dispersive

atractylodes lancea (blue); instead of dried ginger, the more dispersive raw ginger is used; and moistening licorice is replaced with hoelen, citrus, and chih-shih (all of which remove dampness). Citrus and chih-shih are dispersive, and like ginger, exert stomachic and digestive actions, thus treating heartburn. In other words, **Hoelen Combination** is more dispersive than either of its parent formulas and quickly, effectively expels dampness from the gastric region of the body.

Indications

1. Sensation of fullness in stomach
2. Loss of appetite
3. Hiccups
4. Nausea and vomiting
5. Decreased urine output
6. Cold feet



Ginseng and Ginger Combination (Li Zhong Tang 理中湯)

The ingredients of this formula are ginseng, dried ginger, atractylodes, and licorice.

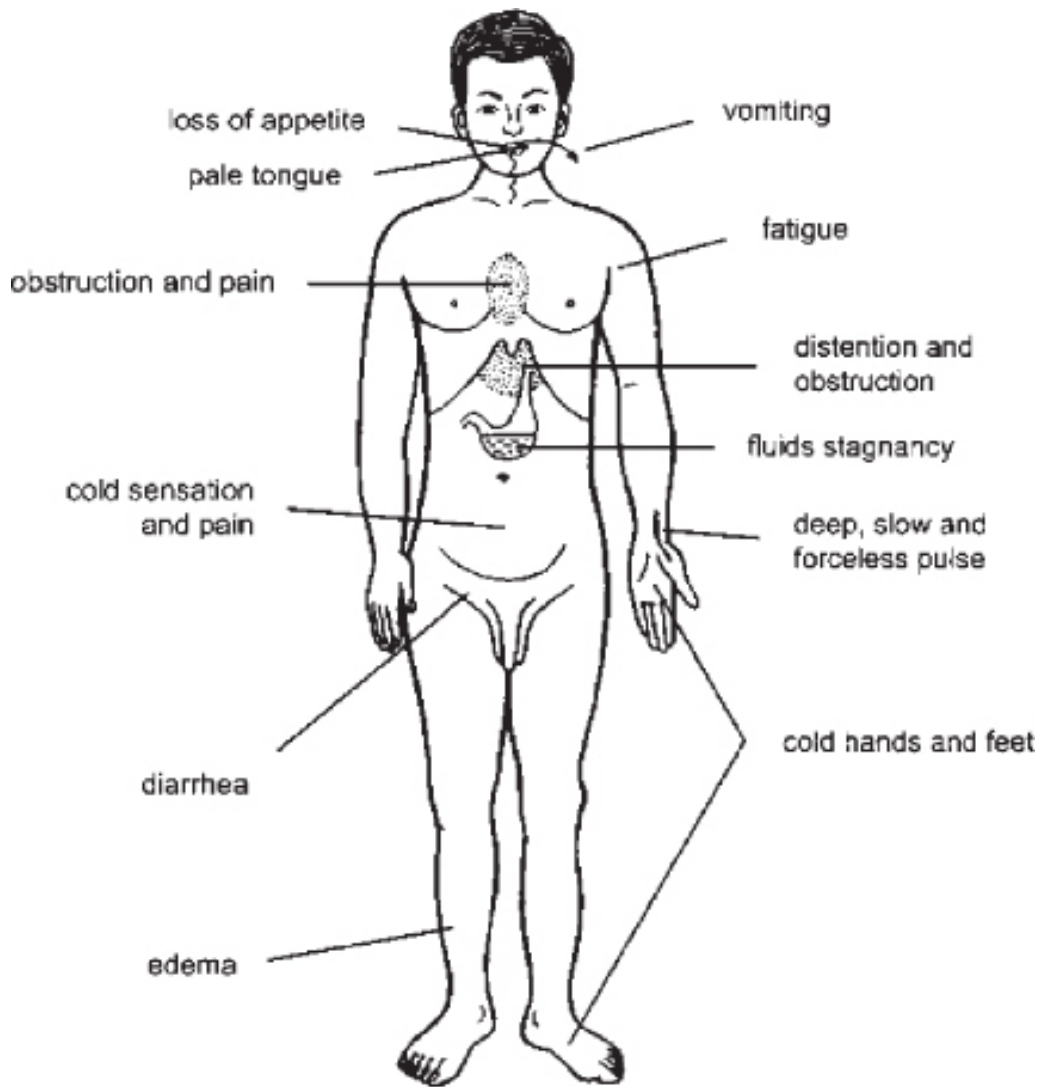
1. Ginseng has a strong effect on relieving the fullness sensation of the stomach and the obstruction in the substernal area.

2. Dried ginger is a stomach stabilizer and can relieve the cold-weakne conformations.
3. Atractylodes is an excellent herb for alleviating chill conditions in t digestive tract.
4. Licorice is an excellent harmonizer.

The combination of these four herbs forms a powerful formula that is capable of removing the stagnant water from the stomach.

Indications

1. Excessive salivation
2. Vomiting
3. Anemia
4. Easily fatigued
5. Sensation of cold and fullness in the stomach
6. Cold hands and cold feet
7. Edema in lower extremities
8. Sensation of obstruction beneath the heart
9. Diarrhea



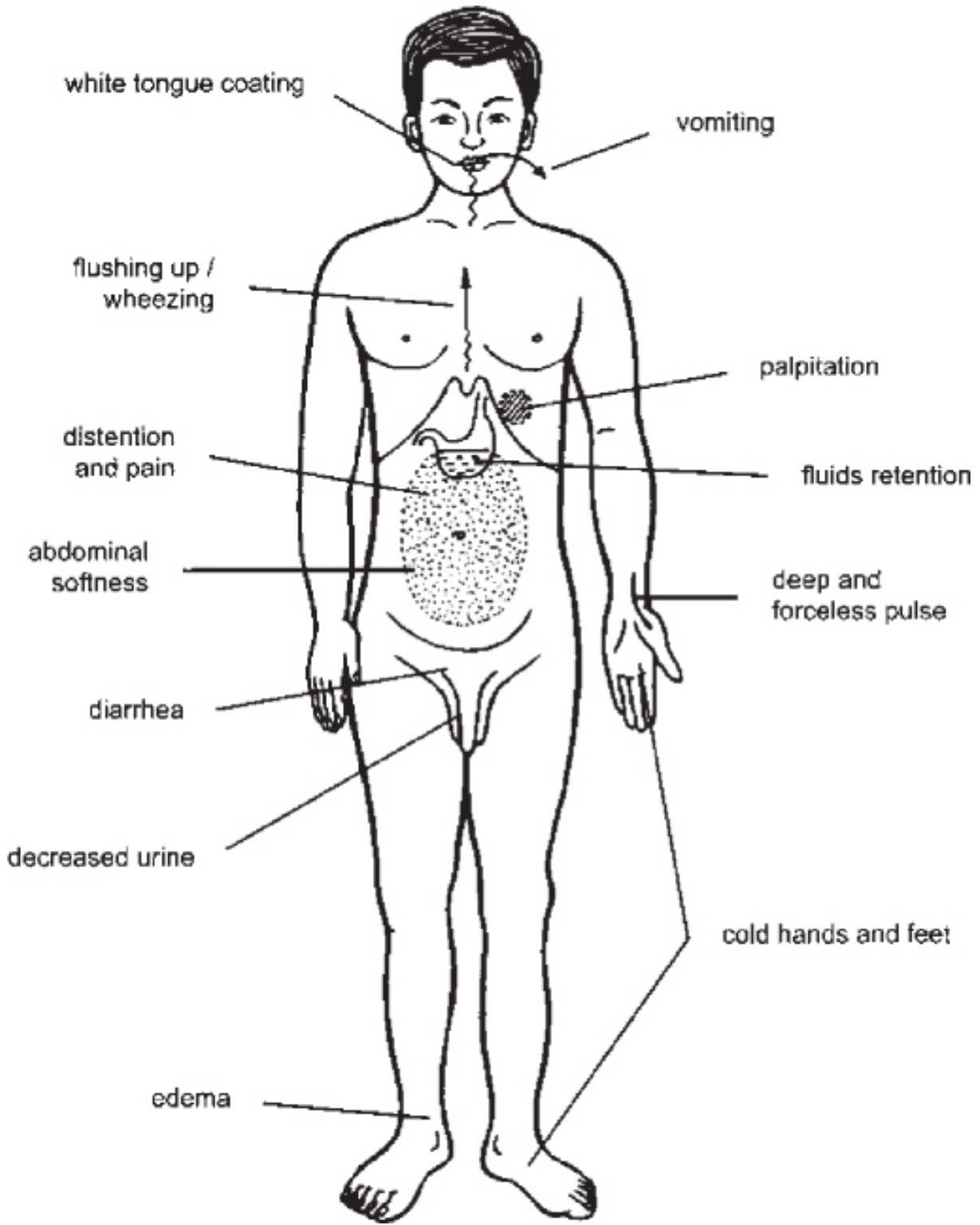
Vitality Combination (Zhen Wu Tang 真武湯)

The ingredients of this formula are aconite, peony, atractylodes, hoelen, and raw ginger.

Indications

1. Vomiting
2. Cold extremities
3. Palpitations
4. Anemia

5. Abdominal distension
6. Poor abdominal strength
7. Generalized lack of energy and strength
8. Chronic diarrhea



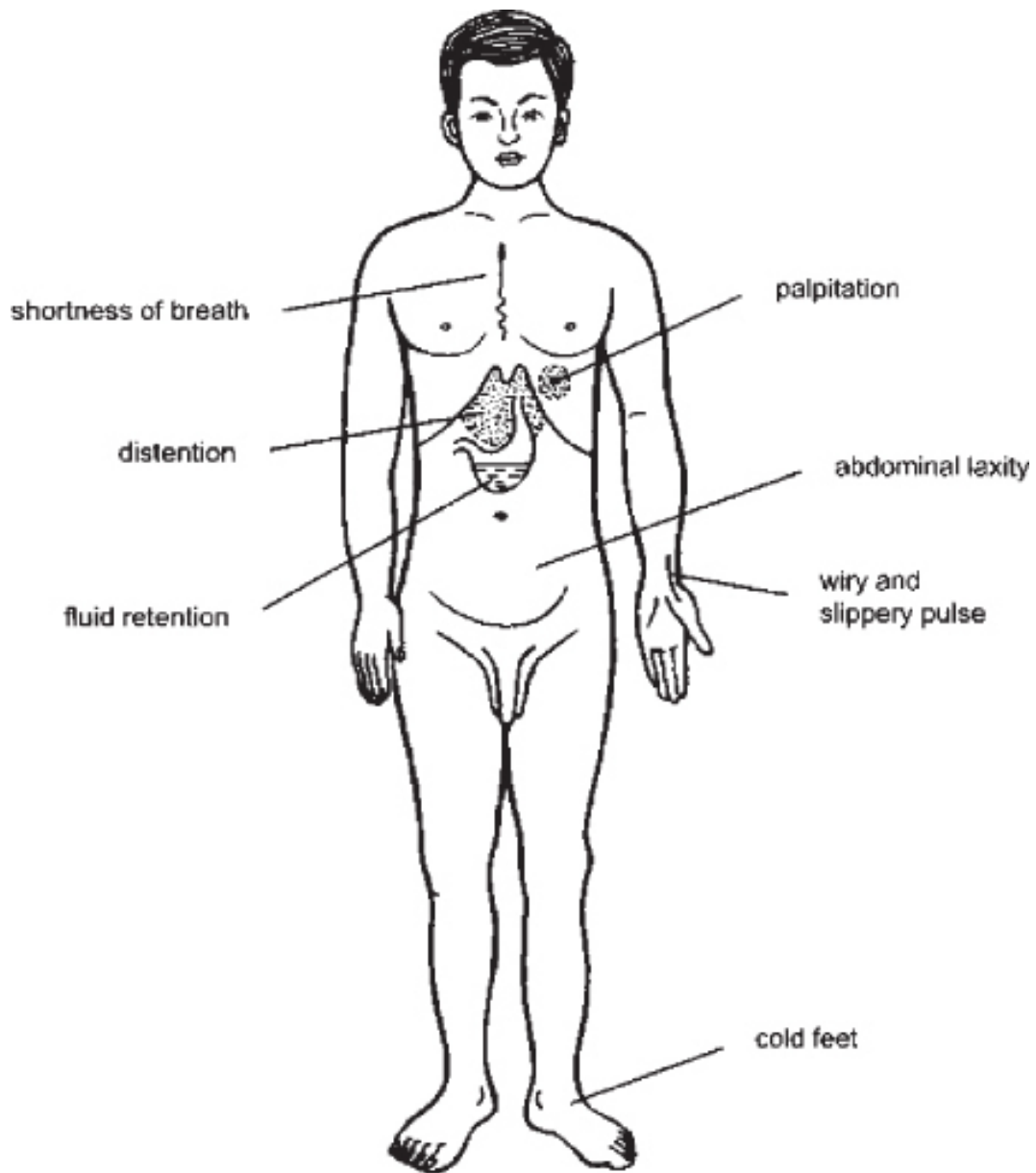
Atractylodes and Hoelen Combination (Ling Gui Zhu Gan Tang 苓桂朮甘湯)

The ingredients of this formula are atractylodes, hoelen, cinnamon, and licorice. Hoelen and atractylodes are both drying herbs that adjust and harmonize regional imbalances in body fluid distributions. Hoelen also functions to quiet palpitations.

Since hoelen and licorice are both neutral, while atractylodes and cinnamon are warming herbs and all are tonics, this formula is used to treat weak-chill conformations and to remove dampness. It is appropriate for patients with lax abdomens and relatively slight urinary volume and who are subject to vertigo and palpitations.

Indications

1. Headache
2. Dizziness upon standing
3. Vertigo
4. Palpitations
5. Shortness of breath

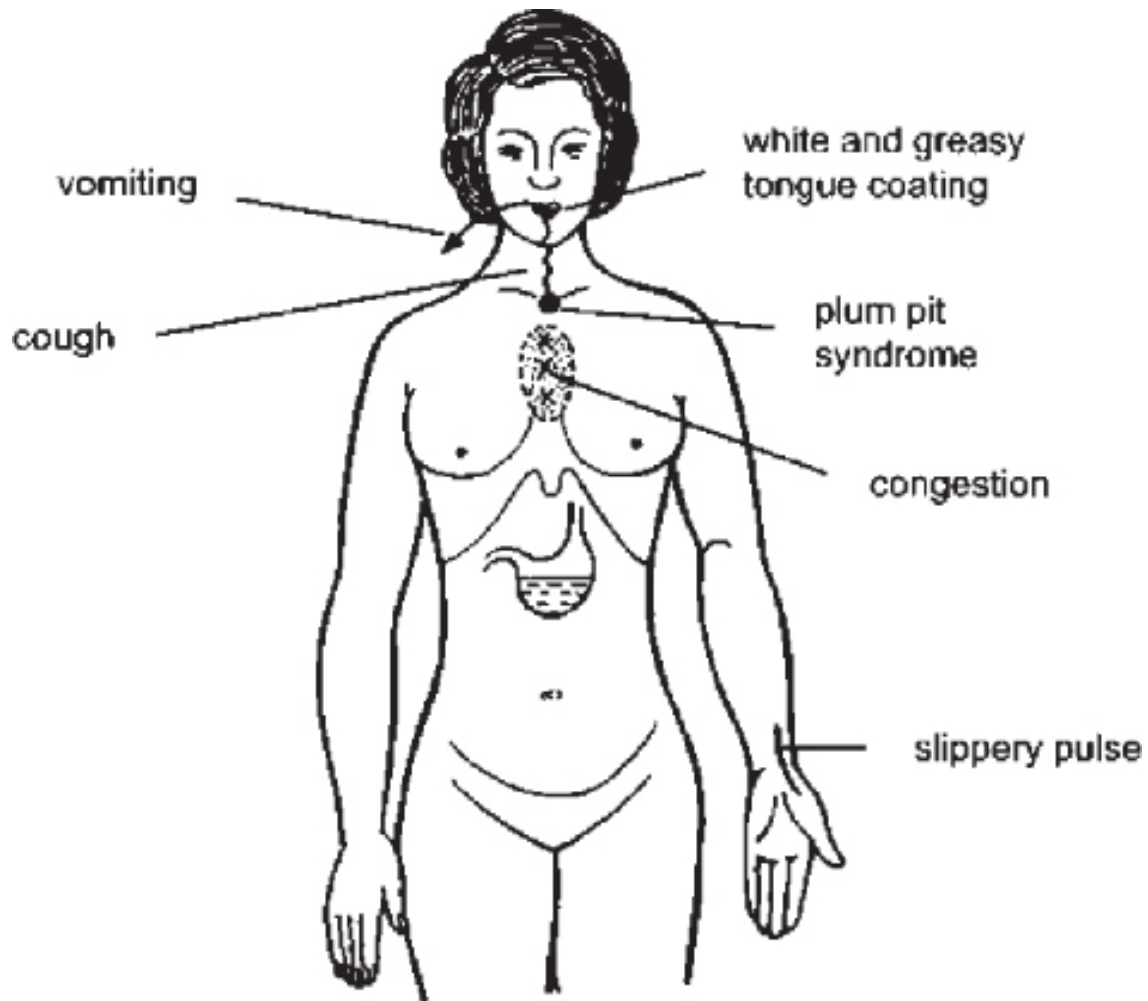


Pinellia and Magnolia Combination (Ban Xia Hou Po Tang 半夏厚朴湯)

The ingredients of this formula are pinellia, magnolia, hoelen, raw ginger, and perilla.

Indications

1. Nervousness
2. Anxiety
3. Poor appetite
4. Feeling of a lump in the throat



13-12: LOW BACK PAIN, FATIGUE, POOR DIGESTION, AND COLD FEET

CHIEF DIAGNOSES

1. Chronic low back pain syndrome (ICD-10 Code **G89.4**)
2. Low energy level (ICD-10 Code **R53.83**)

3. Easily fatigued (ICD-10 Code **R53.83**)
4. Poor digestion (ICD-10 Code **K30**)
5. Constipation (ICD-10 Code **K59.0**)
6. Cold feet (ICD-10 Code **R20.9**)

September 1994

Edna was a fifty-seven-year-old woman who was referred by a physical therapist. Edna had a persistent low back pain for more than fifteen years. She attributed her pain to no specific cause as it occurred randomly over a period of time. She was initially evaluated by her primary care physician. Blood tests and X-rays showed no apparent abnormalities. In June 1993 her symptoms started to change, and she began to notice numbness and tingling sensations in her right leg and sometimes on the left leg along with muscle spasms in the legs. She had stiffness in the low back; difficulty in getting in and out of the car; bending and doing her activities of daily living (ADL). She received several sessions of physical therapy but without significant functional improvement. A CT scan of the pelvis in April 1992 showed a large cul-de-sac mass, probably compressing the sciatic nerve. An MRI of the lumbar spine in March 1993 showed a moderate degree of discogenic degenerative changes of the L1–L2 and L5–S1 discs. A repeated MRI study in July 1993 showed a disc herniation between L5 and S1 spines. She later had a myelogram that showed a herniated disc with a pinched nerve at that level. She had three sessions of epidural nerve blocks that seemed to help, but the effects lasted for only a few weeks. After that, she had a shooting pain in her low back and thighs with stinging sensations. Her low back seemed to hurt more when the weather was hot and was humid. Over the years she had multiple trigger point injections by an anesthesiologist that relieved some pain. She was wearing a pair of orthotics in her shoes that seemed to help the back pain, but nothing else. She was referred to me by a physical therapist from whom had been receiving myotherapy on a regular basis for the past five years.

Most of her pain was dull in nature, but was continuous, steady, deep, and was sensitive to pressure. The intensity of the pain graded five to nine on a scale of zero to ten. It was aggravated by air-conditioned rooms, cold or damp weather, prolonged and strenuous use of her muscles, bending, driving, lifting, pushing or pulling heavy objects, pressure on tight muscles, and during periods of nervous tension. The pain was eased to some extent by resting, heat, pain medication, and physical therapy. Sometimes the pain radiated

upward to the arms and hands. The pain also radiated down to the lower extremities, including her feet and toes. Her other complaints included difficulty in sitting, standing, walking, and climbing. She had pain in her neck and tingling sensations in her hands, feet, and toes. Her face would turn red and felt warm from time to time, which was absurd as she had a hysterectomy years ago. Her feet seemed always cold. She was depressed because of her back pain and dysfunction. She had a very low energy level with poor endurance. She had not been able to work since she was forty-two years old.

Her medications included 50 mcg of Synthroid daily, acidophilus, an herbal laxative, acetaminophen, Zantac, and Benadryl when I saw her. She was also taking iron, vitamin C, calcium, magnesium, phosphorus, zinc, vitamin D, folic acid, vitamins B1, B2, B6, and B12, niacin, biotin, iodine, copper, vitamin E, vitamin A, and garlic. She said that she was eating red meat, instant protein, and other over-the-counter supplements regularly.

EDNA'S PAST MEDICAL HISTORY

1. Irregular menstruation with abdominal cramps until hysterectomy when she turned forty due to uterine myomas
2. On estrogen for a while after her hysterectomy
3. Degenerative joint disease with joint pain and swelling from time to time
4. Kidney cyst problems
5. She had a gallbladder sonogram and a pelvic CT scan. Both were report negative.
6. Hay fever
7. Allergic to penicillin, certain muscle relaxants, and anti-inflammatory medications
8. Occasional headaches and indigestion
9. Constipation frequently

PHYSICAL AND FUNCTIONAL EXAMINATION

Edna looked depressed, and her face was dark red. Her vital signs were normal. She was alert, oriented to time, person, and place. Her chest was clear to auscultation and percussion. Her cranial nerves were intact. Examination of

the neck and upper back showed no skin lesions, scar, or increase in local heat or swelling. Her neck was supple and without adenopathy. There was a decrease in the normal cervical lordotic curve. Sensations to light touch and pinprick were somewhat diminished in the upper trapezii, right deltoid, and both hands. Deep tendon reflexes were symmetrical in both upper extremities. Spurling's maneuver was negative on both sides, except there was an increased pain in the lower cervical and upper thoracic spine. Tenderness to palpation was noted in the base of the skull, front and back of the neck, and upper back muscles in general. Muscle spasms were noted in the trapezii, levator scapulae, splenius cervicis, splenius capitis, and upper back muscles. Range of motion of the cervical spine was 85–90% normal.

Examination of the arms, wrists, and hands showed normal skin color, with no apparent joint dislocation or instability. Range of motion was full and was symmetrical on both sides. Her fingertips could approximate the palms in flexion, and her thumbs opposed the volar pads of the lateral forefingers normally. Grip strength was subnormal on both sides. There was no apparent muscle atrophy in either hand.

Examination of the lower back and buttocks showed no shift of the spine. Leg length was about equal on both sides. Peripheral pulses were full and symmetrical in both lower extremities. Straight leg raising test was negative on both sides, except there was an increase in lower back pain. She had a generalized tenderness and muscle tightness with segmental muscle spasms in the thoracolumbar paraspinals, quadratus lumborum, and glutei. Range of motion of the low back in flexion was limited to 50 degrees, extension 5 degrees, with side-to-side rotation and lateral tilt at about 5 degrees. She expressed pain and discomfort in the lower back and buttocks. Strength in the lower back flexors and extensors was less than normal. She was unable to perform sit-ups in a supine position with either knee flexed or extended. She was also unable to arch her back in a prone position. Her abdomen was soft and felt loose and was tender to palpation in the lower quadrants on both sides. There was no apparent organ enlargement found through palpation. Examination of the lower extremities including ankles and feet showed no skin lesions, increase in local heat, or swelling. Some tenderness was noted at the medial and lateral joint compartments of the ankle. Range of motion was satisfactory in both lower extremities. There was no apparent muscle atrophy.

IMPRESSION

Edna was suffering from chronic low back pain syndrome with pain, depression, weakness, muscle deficiency, and multiple functional deficits. She also had signs and symptoms of cervical and lumbar radiculopathy.

TREATMENT PLANS

I asked the physical therapist to include intermittent pelvic traction along with manual therapy. I really didn't know how else to help her.

13-13: WU JI SAN

KEY HERBAL FORMULAS

1. **Tang-kuei and Magnolia Formula (Wu Ji San 五積散)**
2. **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承湯)**

March 1995

Edna returned. She had felt neither significant pain relief nor functional improvement since my last evaluation. The intermittent pelvic traction actually increased her low back pain. She said that sometimes she felt stiff following the tractions. She continued to feel numbness and tingling sensations in her left lower extremity. In addition, she still felt cold in her feet even if it was a hot summer day. Her low back pain seemed to get worse when the humidity was high. She did not have good digestion and was easily fatigued.

Her examination showed normal vital signs. Sensations and deep tendon reflexes in both upper extremities were symmetrical on both sides. Peripheral pulses were full and symmetrical in both upper and lower extremities. Examination of the low back showed no shift in the spine. She had tender lumbosacral paraspinals and glutei, particularly on the left side. Straight-leg raising test was positive on the left side at about 45 to 50 degrees. She had apparent weakness in the left big toe extensors, ankle dorsi flexors, and plantar flexors. She had difficulty walking on her tiptoes and her heel on the left side.

She had weak trunk flexors and extensors. Deep tendon reflexes and sensations had not changed in either lower extremity.

IMPRESSION

She was still quite symptomatic in the low back region with chronic low back pain syndrome. I wasn't sure I should refer her to a pain clinic because that wouldn't help her dark red complexion, sensation of heaviness of the head, flushing up, chill sensation of the lower extremities, digestive problems, or constipation.

PLANS

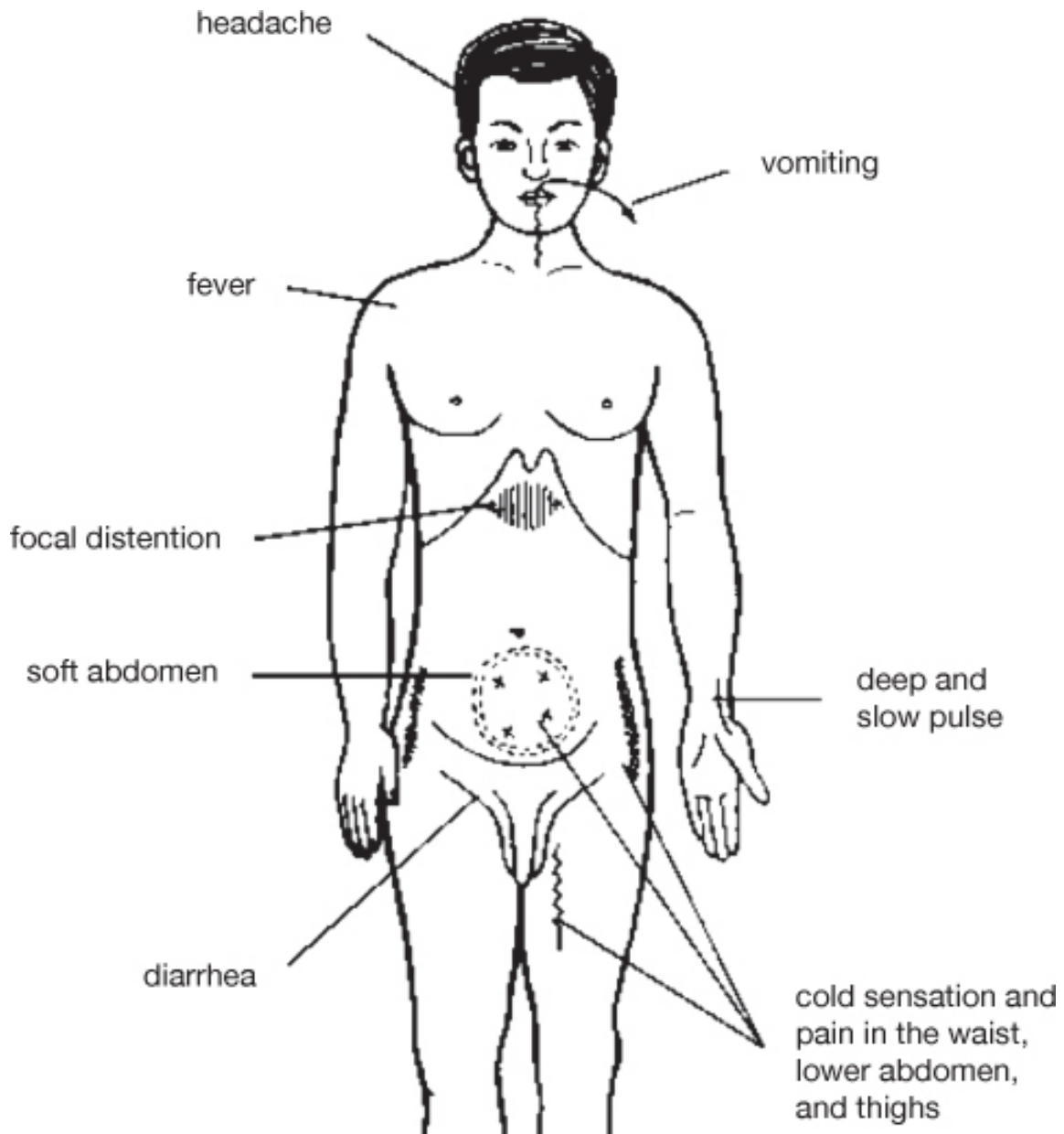
I treated Edna with acupuncture intended to calm her nerves and strengthening her Qi. I didn't have high hopes.

UNEXPECTED HELP

I called my father who was a surgeon but had studied acupuncture and traditional Chinese herbal medicine for nearly forty years. He used herbal preparations almost exclusively on his nonsurgical patients for over twenty years. After some questioning, he said, "that sounds like 'Go-cheh-san Cheng.' Let her try for a week and you'll be surprised." Go-cheh-san Cheng in Taiwanese means "Wu Ji San conformation" or **Tang-kuei and Magnolia Formula (Wu Ji San 五積散)** conformation. As a whole, the formula is a warming, tonic, and drying medication. It is effective in people with problems of excess dampness, chills, poor Qi, and blood and body fluid circulation. It also has an analgesic effect. The **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)** main ingredients are rhubarb, mirabilium, licorice, persica, and cinnamon.

He also suggested **Minor Cinnamon and Peony Combination (Xiao Jian Zhong Tang 小健中湯)**. The Chinese name of this formula is "The Five Stagnancies," because it is used to remove impediments and to free circulation of Qi, Blood, phlegm, Water and food. The ingredients of this formula are: cinnamon, peony, raw ginger, jujube, licorice, ma-huang, angelica, tang-kuei, cnidium, platycodon, citrus, pinellia, hoelen, Atractylodes

elba, *Atractylodes lancea*, dry ginger, magnolia and chih-shih. As a whole, the formula is a warming,



May 1995

Edna returned. The intensity of the pain in her low back had decreased by 50%. She graded the intensity of the pain at about three–five on a scale of zero to ten. Her mental state had also improved; she wasn't as depressed. Examination showed normal vital signs. The lumbar lordotic curve was maintained. She still had a decrease in pinprick sensations in the left L5–S1

dermatomes. Range of motion of the low back was 85% normal. Sensations and deep tendon reflexes had not changed since my last evaluation. She had less difficulty in performing sit-ups with either her knees flexed or extended.

Her low back condition was improving. I withheld the physical therapy but let her continue on the **Tang-kuei and Magnolia Formula (Wu Ji San 五積散)**. I suggested that she maintain the intensity but increase the duration of her exercises. She might use heat application to assist in muscle relaxation and pain control. I planned to see her again for a follow-up evaluation in a month.

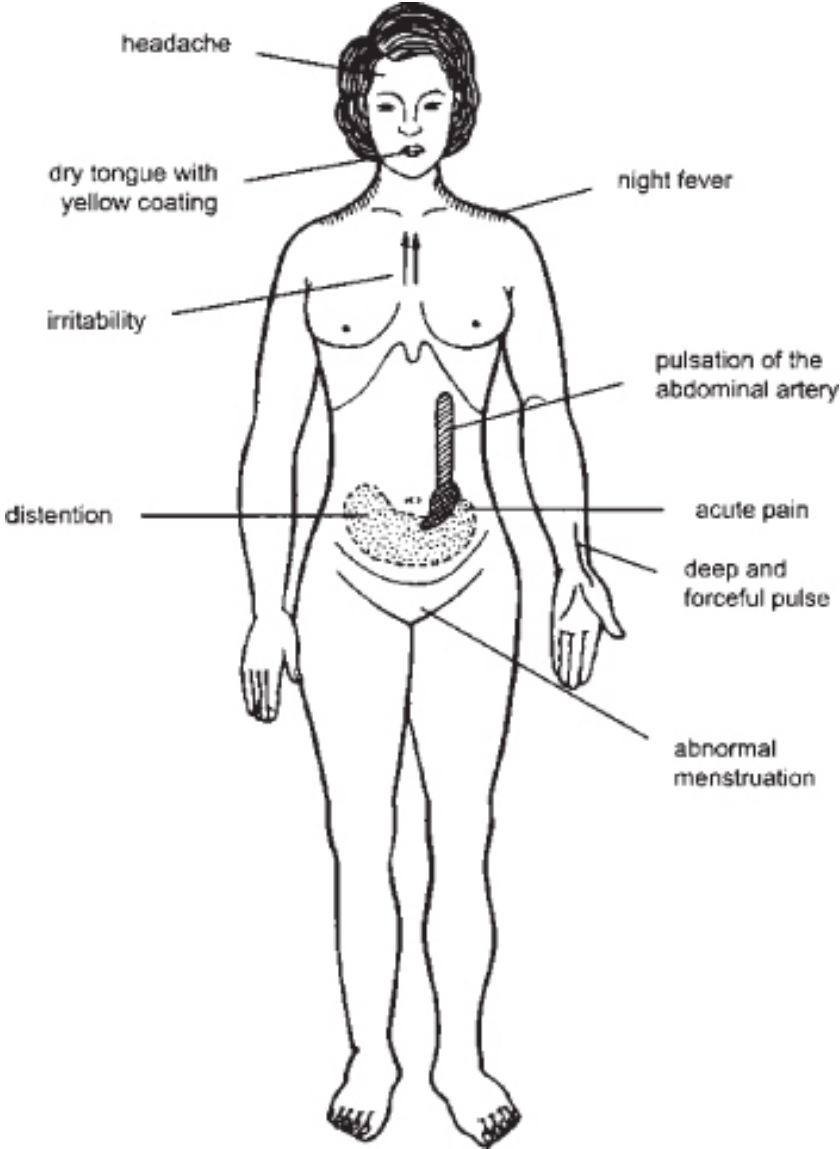
July 1995

Edna returned. Her low back pain was mild. She had a higher energy level and her feet weren't as cold as before. She still had episodes of constipation and abdominal discomfort. Overall she felt a lot better. I consulted my father again and he suggested **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)**.

It is an interior-heat conformation formula often is the formula of choice for depressed people with constipation and abdominal distention. Edna was glad to give it a try. She called three weeks later and wished to thank my father. I did too. A few years later I saw another patient, Martha, with similar complaints. By then, my dear father had already passed. I kept my promise to learn more about herbal medicine even though I had many years of training under the great Dr. Hong-Yen Hsu way back when I was still in college. I put Martha on **Persica and Rhubarb Combination (Tao He Cheng Qi Tang 桃核承氣湯)** for twenty days. When I saw Martha again about three weeks later she said:

“I am happy, making jokes, and I am jovial. . . . I would wake up in the morning thinking: Oh, this is a wonderful day, instead of waking up worrying about what would happen today? Am I going to live? Is this cancer? Is it AIDS? Will I feel good today? When is the left shoe going to drop? I've realized that was pretty much how I lived my life and how my outlook had been. I feel better than I have felt in so many years. I feel like what I felt like when I was a teenager, and I have no pain right now. I wake up in the morning and look out the window and am happy about the sunshine. I have energy and realize that life is good. My husband likes the way I am. It got to the point that he was even looking at me and asking ‘who are you?’ and ‘what have you done with my wife?’ I was doing so well I couldn't believe it myself! Every

once in a while when I am not in a good mood, he'll ask, 'when are you going to see Dr. Lin?' The main thing I noticed after your treatment was that I had less pain in my muscles and a lot less anxiety. I felt that I wasn't nervous and felt better. I'm upbeat and positive. I don't know why, because my impression was that the treatments were to help my pain. I was not even aware, but the pain must have gone down. What I noticed was that no matter what happened, I had a better attitude about my life. I felt better."



I hope both the senior Dr. Lin and Dr. Hsu would approve.



CHAPTER 14

A Few Words On Herbal Therapies

14-1: PRINCIPLES OF HERBAL TREATMENT

Chinese medicine traditionally both supplements and purges according to the following guidelines.

1. Always supplement weakness if present, before purging. For example, if a slightly weak constitution mixes with a strong constitution, the weakness should be supplemented first. An inside strong constitution—constipation, abdominal swelling, excessive thirst, bloody urine, outside chills, and weak symptoms—calls for supplementation until the outside chills disappear. Likewise, treatment of the outside strong constitution must follow treatment of the inside weak constitution, characterized by frequent diarrhea, a weak pulse, cold arms and legs, and a headache.
2. Treat an outside constitution before treating extravasated blood.
3. With greater yang or sunlight yang disease, treat the outside constitution first unless the inside constitution is serious and worsening. In such case, the order of treatment is reversed.
4. Some formulas, such as **Cinnamon and Ginseng Combination (Gui Zhen Ren Sheng Tang 桂枝人參湯)**, treat both outside and inside constitution at the same time. If the physician cannot tell from the symptoms whether

the conformation is weak or strong, he should behave as if it were weak as not to aggravate the illness; the illness will worsen if a weak conformation is mistakenly treated as a strong one. If a patient under treatment for a chronic problem suddenly develops an acute illness, the physician should suspend therapy for the former and immediately treat the latter. For example, a patient with gallstones who develops an upper respiratory infection should stop the treatment for gallstones and start treating the new respiratory problem.

5. Sometimes medication takes two to three days to produce noticeable improvement. If improvement occurs, the patient should obviously continue taking that formula. Not so obvious, however, is the necessity to continue the formula if no changes or negative changes occur. Sometimes after a turn for the worse, the sickness becomes more amenable to treatment. For example, some people taking **Pinellia and Ginger Combination (Sheng Jiang Xie Xin Tang 生薑瀉下心湯)** for vagal gastrointestinal distension will often vomit a large quantity of water, but soon the gastrointestinal symptoms subside. The same change for the better may follow uterine bleeding in an asthma patient taking **Minor Blue Dragon Combination (Xiao Qing Long Tang 小青龍湯)**. Despite evident negative side effects, the medicine has done its job.

14-2: A COMMON SENSE APPROACH

Medical practice is an art and not a pure science; it is scientific yet it is philosophical. One of my mentors Dr. Yu Tang Lin taught me that an educated person should, above all, be a reasonable being who is always characterized by his or her common sense, his or her love of moderation and restraint, and his or her hatred of abstract theories and logical extremes. All people possess common sense. The academic scholar is in constant danger of losing this common sense. He or she is apt to indulge in an excess of theory; the reasonable person should avoid all excesses of theory and conduct. You have, for instance, the historian Froude saying that the marriage of Henry VIII with Catherine of Aragon was for purely political reasons, and you have Bishop Creighton claiming, on the other hand, that it was entirely dictated by animal lust, whereas the common sense attitude should be that both considerations were effective, which is probably closer to the truth. In the West one scientist is infatuated by the idea of heredity and another is obsessed with the notion of

environment, and each one goes about doggedly to prove his or her theory with great learning and often times, with disregard for one another's notions; whereas the Asian, without much of a second thought about it, would allow something for both. A typical Chinese judgment is: "A is right, and B is not wrong either."



Managing chronic low back pain, or any chronic pain, with Chinese herbs, is in many ways like preparing a course of a Chinese banquet: based upon an individual's taste, the traditions, customs, and climate, and the vast diverse produce. For example, the northern Chinese, acclimatized to simple thinking and hard living, hearty and humorous, onion-eating, garlic chewing, and fun-loving, are true children of Mother Nature. In the old days, they were in every way more Mongolic and more conservative than the conglomeration of peoples near Shanghai and who suggested nothing of their loss of racial vigor. They were the Honan boxers, the Shantung bandits, and the imperial brigands who furnished China with all the native imperial dynasties, the raw material from which the characters of Chinese novels of wars and adventure were drawn. Down the southeast coast, south of the Yangtze River, one met a different type; inured to ease and culture and sophistication, mentally developed but physically retrograde, loving their poetry and their comforts,

sleek undergrown men and slim neurasthenic women, fed on birds-nest soup and lotus seeds, shrewd in business, gifted in belles-lettres, and cowardly in war, ready to roll on the ground and cry for mama before the first fist threw any punches. This is not to say that I treat my patients as if they were bean sprouts, pig's feet, zucchini, sea conches, or sea cucumbers, but as individualized, specific, careful, artistic, flexible, and creative at the same time, when we are dealing with complex things such as chronic low back pain.

14-3: HERBAL SAFETY



In the United States, Chinese herbs are sold as tablets, capsules, powders, teas, extracts, and fresh or dried plants. They are usually found in Chinatown areas as dietary supplements and not as drugs. For that reason, they are not regulated by the U.S. Food and Drug Administration (FDA). To a layman, herbal formulas may be a dietary supplement, but to a clinician, they should not be treated as such, but as medicine. Herbal formulas require prescriptions

from a clinician following a thorough history taking, physical examination, assessment, and diagnosis because of its potential toxicity and side effects. Herbs are a natural product, but nature does not mean safe. Therefore, it is hugely important for those who are thinking about taking herbal medicine, and the physicians who prescribe or suggest herbal medicine, are made thoroughly aware of the reputation of the manufacturing companies before taking or prescribing them.

CONTRAINDICATIONS

Apart from rules guiding the combination of drugs, there are contraindications while taking Chinese drugs. Different kinds of food should be abstained from while taking certain medicines.

1. Avoid greasy food while taking herbs with cold properties.
2. Avoid raw and cold food while taking herbs to warm up the lungs and expel phlegm.
3. Avoid red meat while taking coptis, platycodon, and plum.
4. Avoid vinegar while taking poria.
5. In general, avoid cold, raw, sticky, and greasy food while taking Chinese herbs. Pregnant women should be especially cautious.



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Additional Publications of Dr. Chau-Shin Hsu

1. *COMMONLY USED CHINESE HERB FORMULAS WITH ILLUSTRATIONS* . (Co-author with Dr. Hong-Yen Hsu and Dr. Qing-Hu) Oriental Healing Arts Institute Press. Irvine, California 2006.
2. *COMMONLY USED CHINESE HERB FORMULAS WITH ILLUSTRATIONS Companion Handbook*. (Co-author with Dr. Hong-Y Hsu) Oriental Healing Arts Institute Press. Long Beach, California 1992-2006.

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Additional Publications of Dr. Joseph Y. Lin

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