

# AN INTRODUCTION TO CHINESE MEDICINE DERMATOLOGY



LEARNSKIN™

# ITCMDA EDITOR'S PROLOGUE

凡大醫治病，必當安神定志，無欲無求，  
先發大慈惻隱之心。誓願普救含靈之苦。

Whenever eminent physicians treat an illness...they must first develop a heart full of great compassion and empathy. They must pledge to devote themselves completely to relieving the suffering of all sentient beings.<sup>1</sup>

- *Sun Si Miao, 6th Century*

Patients with skin diseases suffer not only from physical discomfort but also emotional and social challenges, and high dependence on medications. We are at a moment of great collaboration within integrative medicine. Our hope is that this cooperation will develop greater improvement in the lives of our patients.

## *Chinese medicine dermatology as a specialty and the creation of the ITCMDA*

In ancient China, during the Confucian times of the late Warring States period (second to third centuries BCE), the practice of medicine was organized into four main specialties - Dietician, Veterinarian, Internal medicine, and Dermatology. Historical records indicate that the system was quite similar to our own modern medical system where a general physician refers patients to the dermatologist when needed, "Whenever those in the state are afflicted with illnesses, with ulcers on the head or with wounds to the body, he [the chief physician] visits them, and then sends them to physicians with an appropriate specialty to cure them."<sup>2</sup> From ancient times until today, Chinese medicine dermatology has been a separate specialty, needing specific training for its successful practice.

As Chinese medicine dermatology has such a long history of specialization, it is especially important that there exist a modern organization to aid in the training of students of dermatology, and in assessing the reliability of those that practice Chinese medicine dermatology. The International Chinese Medicine Dermatology Association (ITCMDA) is an organization of Chinese medicine doctors, licensed acupuncturists, MD's and Naturopathic Doctors with specialized training in Chinese medicine dermatology. Our members are all licensed or registered health care professionals and have received rigorous training in the specialty of Chinese medicine dermatology. Our organization serves to inform the public and healthcare professionals about the benefits of Chinese medicine dermatology and as a resource for those seeking quality Chinese medicine care. To find a Chinese medicine practitioner focused on dermatology, who is a member of ITCMDA and has completed the rigorous training, please go to [www.tcmdermatology.org](http://www.tcmdermatology.org).

The ITCMDA was the vision of the founding president, Mazin Al-Khafaji. Al-Khafaji is a world leader in Chinese medicine dermatology, recognized for his many contributions. Al Khafaji's Chinese Medicine dermatology training program and rigorous examinations have become the gold standard to test competency in the Chinese medicine treatment of common skin disorders.

Through this program, hundreds of students from all over the world have been able to help patients suffering with skin disease.

This e-book on the practice of Chinese medicine dermatology is an extension of the ITCMDA's vision. We hope that, with the help of LearnSkin, it will help to promote Chinese medicine as a safe and effective option for the treatment of many skin disorders. When practiced appropriately, Chinese medicine has the ability to create impressive and long-lasting changes in a whole range of intractable conditions such as Eczema, Acne, Psoriasis, Urticaria, Rosacea, Vitiligo, Alopecia and more. We hope you will enjoy the information provided in this resource.

It has been an honor and pleasure to partner with LearnSkin to share history, insights, and the beauty of Chinese medicine dermatology.

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<sup>1</sup> Sun, Si-Miao & Wilms, Sabine (2007). Essential prescriptions worth a thousand in gold for every emergency, volumes 2-4 on Gynecology = Bei ji Qian Jin Yao Fang. The Chinese Medicine Database, Portland.

<sup>2</sup> Nyilan, M. (2001). The five Confucius classics. Yale University: New Haven, Connecticut

# LEARNSKIN EDITOR'S PROLOGUE

Dear Reader,

On behalf of the editors at LearnSkin, I am excited to present this electronic book on Traditional Chinese Medicine (TCM) in dermatology. This work will provide you with a comprehensive but always clinically relevant overview of a highly refined and very modern TCM approach to diseases of the skin. Each chapter was written by leading experts in the field who actively see patients and are respected teachers in their areas.

It is our hope that practicing clinicians from all backgrounds will find this useful, if not directly as a guide, then as a source of inspiration, ideas, and to help develop a language and approach that crosses traditions. As with any medical work, the intent is not to create a "cook book;" rather, a work that will both enlighten and encourage thoughts and ideas for further study remains the goal.

On behalf of the editors, we welcome you to a great adventure exploring the powerful ideas herein!

**Peter Lio, MD**

Dermatology Advisory Board Member, LearnSkin

## ABOUT LEARNSKIN

Leaders in integrative dermatology medical education, LearnSkin curates and vets the latest in scientific research and evidence-based therapies for both Western and Eastern medicine. LearnSkin's mission is to advance patient care through a complete and comprehensive approach that bridges conventional and complementary medical disciplines.

To learn more about LearnSkin, visit [www.learnskin.com](http://www.learnskin.com).

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# CHAPTER 1

## INTRODUCTION TO TRADITIONAL CHINESE MEDICINE DERMATOLOGY PART 1 OVERVIEW OF TCM

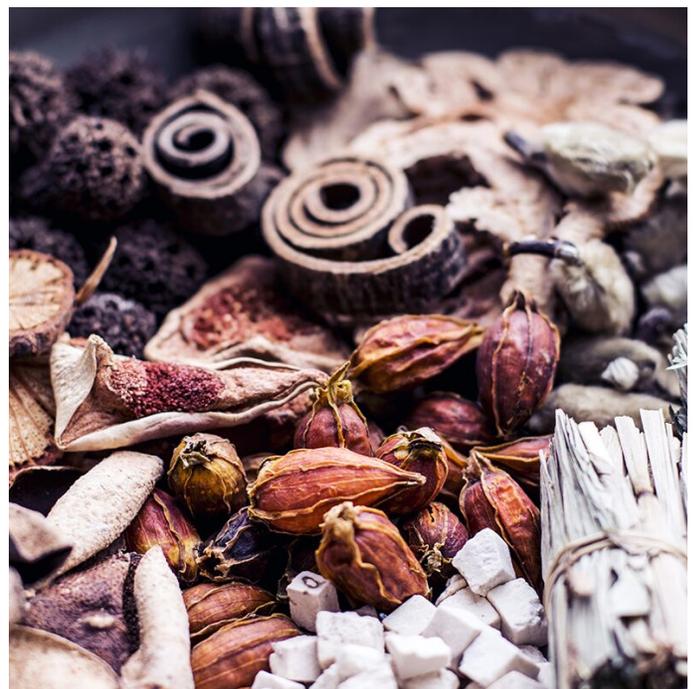
By Mazin Al-Khafaji, Dr. CM (China), LAc, FRCHM, MATCM

The practice of Chinese Medicine dermatology has a long and distinguished history with records indicating it to be a distinct specialty by at least 200 BCE.<sup>3</sup> Some of the duties of the early dermatologist, or 'yang yi' (sores doctor), included "treating swollen sores of the hand, ulcerations, opening incised wounds and broken sores using medical ointments, scraping, and elimination [of necrotic tissue]."<sup>4</sup> Over time, the methods were refined, expanded upon and later synthesized with modern understandings of dermatology to form the very sophisticated system of Chinese medicine currently practiced in clinics and hospitals the world over.

The earliest records of skin disease go back to the very dawn of recorded history, the Shang Dynasty (1100-1700 BCE), when names of skin conditions were carved on animal bones. For example, this character 疔 was used in ancient times to denote sores of the head, and face, whilst this character 疥 was used to denote scabies. Both characters are still in use today. For over 2000 years, scholar-physicians documented their growing understanding of dermatology, from the identification of different skin diseases to their treatment, and even the prognostic determination of what conditions may be treatable as well as which ones are not. Over the centuries, the naming of diseases became ever more elaborate, so that by

the middle of the Qing dynasty (1644 - 1911), at least 360 distinctive skin diseases were recognized. For example, lichen planus was named purple patch wind (紫癩風), scleroderma was named skin rheumatism (皮癩), and atopic dermatitis was referred to as wind of the four crooks (四灣風). These were among some of the diseases defined at that time. Since antiquity, similar looking skin conditions were differentiated, and different treatment protocols were advanced.

One of the enduring hallmarks of Chinese medicine is its long and well-developed scholarly tradition. Between 300 BCE and 200 CE, at least 200 texts entirely dedicated to the practice of dermatology were written.



Al-Khafaji "Raw Herbal Formula"

<sup>3</sup> Nylan, M. (2001). *The Five Confucius Classics*. Yale University: New Haven, Connecticut

<sup>4</sup> Translated piece by Eran Even. Zhou Li (*Rites of Zhou*), (300-200 BC). The Chinese Text Project, online resource (<http://ctext.org/confucianism>)

Over 1500 texts were dedicated to herbal medicines and their formulae (which forms the primary treatment method within the practice of dermatology), and around 700 texts were written specifically for the sharing and discussion of clinical case studies.<sup>5</sup> All of these texts were commented upon and passed down to future generations with the accumulated knowledge being tested and re-tested in real world clinical situations. Over time, this led to the profoundly rational and complete system of healthcare that is Chinese medicine today, which is very much in use on a daily basis in China and around the world.

Through using the diagnostic and treatment methods developed over the past 2000 years, practitioners of Chinese medicine are also able to offer solutions to diseases not described in the traditional Chinese literature. Perioral dermatitis, lupus erythematosus discoides, and topical steroid withdrawal are examples of modern problems for which Chinese medicine practitioners can offer effective treatment. The time-tested system of Chinese medicine is thus proving applicable to many of the health disorders of today.

## Chinese Medicine's Approach to Dermatology

When a patient visits an expert of Chinese medicine for a skin issue, as in the practice of western dermatology, the skin is closely examined to determine what, if any, disease is present. Every skin disorder has key characteristics that help to define and name it. The definition and name are based on skin changes that are visible to the practitioner. This includes such characteristics as the shape, size, color, and distribution of the lesion(s), as well as the presence of scaling, crusting, or erosion. Early practitioners placed extensive emphasis on defining the disease to know not only how to treat it, but also whether the disorder was even treatable. This process is called 'differentiation of diseases' and is essential to good Chinese medicine treatment.

Differentiation of disease allows a clinician to understand if the round, raised, red, and scaly rash on a patient's arms, for example, is psoriasis, a form of eczema, or perhaps a form of cancer. All require

different treatment methods. If there is suspicion of cancer, then a proper referral will be made, as this is not treated with Chinese medicines alone. If it is psoriasis or eczema, which are diseases diagnosed in China since at least 600 AD, then a more detailed analysis of the patient is conducted so that an appropriate treatment strategy can be designed.<sup>6,7</sup>

Once the disease is determined, then the Chinese medicine practitioner needs to understand how this disease is manifesting in the individual patient. What is unique about the disease? What is unique about the person suffering with the disease? There is a saying in Chinese medicine: *yi bing tong zhi, tong bing yi zhi* (different diseases, same treatment; same disease, different treatments).<sup>8</sup> This means that although two people may suffer with the same disease, their treatment may be very different because the way the condition manifests in that individual is different. Understanding how the unique way a disease is manifesting at any given moment in time, in combination with a whole systems examination of the patient, is called pattern differentiation (Bianzheng Lunzhi, or 'pattern identification and treatment determination'). It is from this type of identification that an individualized treatment is determined.

As an example, atopic eczema has a range of manifestations, from forms that are red and diffuse, with lots of dry scaling, to wet forms, which may be swollen and oozing fluid. These two different presentations of atopic eczema represent two very different patterns of the disease, and thus two very different approaches to treatment would be required. In addition, detailed information about a patient's general health, such as digestion, sleeping habits, sensation of thirst, emotions, and energy levels, all

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<sup>5</sup> Episode 2: The Ocean of Chinese Medical Literature. Voices of Our Medical Ancestors. <https://www.facebook.com/cma.Voices/videos/529033737438661/>

<sup>6</sup> Parker, S., Zhang, C. S., Yu, J. J., Lu, C., Zhang, A. L., & Xue, C. C. (2017). Oral Chinese herbal medicine versus placebo for psoriasis vulgaris: A systematic review. *J Dermatolog Treat*, 28(1), 21-31. doi:10.1080/09546634.2016.1178377

<sup>7</sup> Tan, H. Y., Zhang, A. L., Chen, D., Xue, C. C., & Lenon, G. B. (2013). Chinese herbal medicine for atopic dermatitis: a systematic review. *J Am Acad Dermatol*, 69(2), 295-304. doi:10.1016/j.jaad.2013.01.019

<sup>8</sup> Wiseman, N. (1995). *Fundamentals of Chinese medicine* = (Rev. ed.). Brookline, Mass.: Paradigm Publications.

have to be taken into account, before an appropriate strategy can be finally settled on.

The successful treatment of skin disease is most often achieved with a combination of herbal medicines, which are used to counter and correct the underlying patterns. To do this, the disease must first be identified, and then the correct pattern of the disease must be differentiated. This will aid in the construction of the most efficacious customized herbal formula.

## Understanding Disease Patterns in Chinese Medicine

Patterns are determined by a collection of symptoms which are produced by specific causes. Determining a pattern requires the practitioner to “understand how concrete symptoms are linked to each other within particular disease mechanisms.”<sup>9</sup> The development of each disease will have specific trajectories thus producing different symptoms during the evolution of its manifestation. The way a disease begins, versus how it behaves weeks or years later, may be very different. Chinese medicine practitioners take note of these differences when observing a disease’s progression and have attached certain patterns to them. Every disease will thus have certain patterns common to it.

Patterns may be named after specific pathogenic factors (metaphors borrowed from nature with names such as heat, dry, damp, wind, and cold), reflecting the manifestation of that condition. Alternatively, patterns may be named after the overall health of the body, the internal organs, and what are called the ‘vital substances’ (see [Chapter 2: Chinese Medicine Physiology and Pathology](#)).

To use the atopic eczema example from above, a patient who has a rash that is red and diffuse, with dry scales, most likely has eczema due to heat in the blood with wind. Eczema that is red, swollen and oozing fluid

is a damp heat pattern. Over time, the inflammatory aspect of eczema may exhaust itself, leaving the skin mostly dry and cracked, lacking nourishment, and without much erythema or exudate. Such a pattern is considered deficiency of yin and blood.<sup>10</sup>

## Treatment Is Based on the Pattern

The Chinese medicine doctor’s primary goal is to escort a patient from an unstable, unhealthy state to a balanced state of health. This process begins with the defining of the disease and differentiation of the pattern involved in the manifestation of the disease, along with a thorough examination of the patient. With the identification of the disease and pattern, a treatment can then be determined. For most skin diseases, custom designed herbal medicine formulations will be used as the primary method of treatment. (See [Chapter 4 for an explanation of Chinese herbal medicine](#).)



Dreamstime. “Chinese Herbal Decoction.”

<sup>9</sup> Scheid V. (2002). Chinese Medicine in Contemporary China. Duke University Press DOI: <https://doi.org/10.1215/9780822383710>

<sup>10</sup> Xu, Y. (2004). Dermatology in Traditional Chinese Medicine. United Kingdom: Donica Publishing Ltd.

Herbal medicines are categorized according to attributes and actions that they are known to possess, and they are formulated to directly address the disease patterns. For example, to treat eczema due to hot blood with wind, a mixture of herbs would be used that cool the blood and scatter wind. To deal with eczema due to damp heat, herbal medicines that dry dampness and clear heat may be used. Alternatively, chronic eczema due to deficiency of yin and blood would use an herbal formulation to help nourish yin and blood. However, a formula is not simply several of these herbs thrown together, but rather requires careful differentiation and pairing of substances to apply it most correctly to the patient's condition.

Treatment with herbal medicines is always based on the identified patterns and the disease at any given time, and strategies for treatment will change as the presentation changes. The treatment is thus a dynamic process, involving the regular observation and evaluation of the patient and modification of treatment based on the patient's changing state of health with the ultimate aim of restoring equilibrium to the body-mind system, in order that an enduring stability is achieved once the treatment is withdrawn.

## The Stages of Treatment with Chinese Medicine

The treatment of skin disease begins with the initial clearing of acute pathogenic factors (inflammation). This is like putting out the blaze of a house fire. A good fireman will use whatever means they have to safely put the fire out, while also trying to preserve the integrity of the house so that it can be repaired for future use. The method used to put the fire out should not inflict more damage than what is already being imposed by the fire.

In recent years, we have seen the results of over-use of strong medicines, such as antibiotics and topical steroids.<sup>11,12</sup> Chinese practitioners have long warned about the overzealous use of certain herbal medicines, especially those for clearing heat and other pathogenic factors, for fear of damaging the patient.

Once the fire is out, then repairing the damage can begin. This entails rebuilding the structure that was damaged, and requires sending in the carpentry crew, the electrician, and the plumber. Treatment might include nourishing yin and blood, promoting blood circulation, and strengthening digestive function with herbal medicines. The idea is to repair the damage that was done, but also to promote long term stability so that the disease has less opportunity to return.

Similar to not over-using medicines to clear inflammation, the overuse or premature use of strengthening and nourishing medicines may also re-ignite pathogenic factors, and so care must be taken to only use them at the appropriate stage of healing. A properly trained practitioner of Chinese medicine dermatology understands the subtle nuances involved when treating a patient. They understand how to properly define the skin disease, how to differentiate the patterns of the disease, and the treatment needed to heal the patient. They are also informed about safety issues and the need to refer to a Western medical dermatologist when appropriate. With correct Chinese herbal treatment methods, many patients find long lasting benefits and resolution of their skin disease.

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<sup>11</sup> Chon, S. Y., Doan, H. Q., Mays, R. M., Singh, S. M., Gordon, R. A., & Tying, S. K. (2012). Antibiotic overuse and resistance in dermatology. *Dermatol Ther*, 25(1), 55-69. doi:10.1111/j.1529-8019.2012.01520.

<sup>12</sup> Levin, C., & Maibach, H. I. (2002). Topical corticosteroid-induced adrenocortical insufficiency: clinical implications. *Am J Clin Dermatol*, 3(3), 141-147. doi:10.2165/00128071-200203030-00001

## Author



Mazin Al-Khafaji is the founder and director of Avicenna Centre for Chinese Medicine, Avicenna Skin Clinic (<https://www.avicena.co.uk>) and the creator of the functional and therapeutic skin care line Dermatology-M

(<https://dermatology-m.com>). He is recognized as the leading expert in the field of dermatology and Chinese medicine in the West, and over the past three decades has taught thousands of students worldwide.

Mazin started his studies in Chinese medicine and the Chinese language in 1979. He graduated as an acupuncturist in the UK in 1983 and thereafter continued his studies in China for four years as one of the first Western students to do so. He was awarded the first Sino-British scholarship to study alongside Chinese students at a TCM school and graduated from the College of Traditional Chinese Medicine in Shanghai in 1987 as Doctor of Chinese Medicine. Since his return from China in 1987, he has taught Chinese medicine to new generations of herbal practitioners worldwide and is respected as one of the most inspirational teachers and clinicians in the TCM world today.

Mazin is the founder of the International Traditional Chinese Medicine Dermatology Association (ITCMDA).

To learn more about Mazin's work, please visit

<https://mazin-al-khafaji.com>.

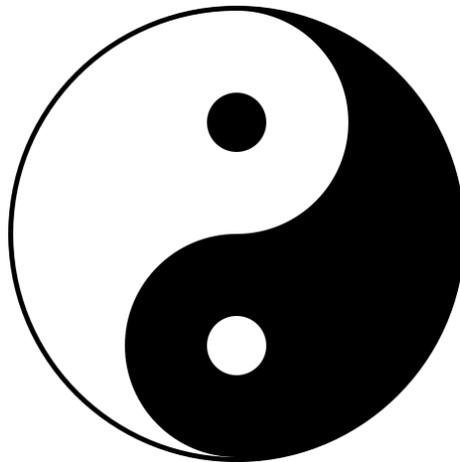
# CHAPTER 2

## INTRODUCTION TO TRADITIONAL CHINESE MEDICINE DERMATOLOGY PART 2 PHYSIOLOGY & PATHOLOGY

By Joseph Alban, MS, LAc and Marnae Ergil, MA, MS, DACM, LAc

### Chinese Medicine View of Health and the Body

In order to understand how Chinese medicine addresses health and disease, some background is necessary. Chinese medicine starts with the premise that a healthy organism is in a balanced state of equilibrium, as in the balance of Yin and Yang, representing a perfect whole, whereas disease represents a disturbance of this equilibrium.<sup>13</sup>



Wikipedia. "Tai Ji Symbol."

One of the key goals of Chinese medicine is to recognize and treat this imbalance, taking into account the complete person and their distinctive circumstances, thus understanding the symptoms and signs of the disease within the context of the whole individual. In this way, Chinese medicine addresses the root cause of the disease, and aims to re-establish a stable, enduring, and well-adjusted state of health.

Chinese medicine has its own physiological understanding of the body systems including the concepts of qi (vital energy), and blood, a unique concept of organ systems and channels that connect the body.<sup>14</sup> At times there are overlaps with biomedical concepts of physiology, but not always. The system is internally consistent in its functions and can be recognized as a complete understanding of health and disease.

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<sup>13</sup> Kaptchuk, T. J. (2000). *The web that has no weaver: understanding Chinese medicine* (Newly expanded and rev. ed.). Lincolnwood, Ill.: Contemporary Books.

<sup>14</sup> Wiseman, N. (1995). *Fundamentals of Chinese medicine* (Rev. ed.). Brookline, Mass.: Paradigm Publications.



## Qi and Blood

As the universal energy existent in all things, qi comprises the building blocks of the universe. While mystical in origins, qi is a very practical idea within medicine. All people and animals require qi to stay healthy. The heart uses qi to pump blood, the liver uses qi to detoxify, digestion uses qi to obtain nutrients from food and get rid of waste, and skin uses qi to protect the body from illness and in order to look beautiful and radiant. The character qi (氣) depicts the vapors rising from the cooking of rice, indicating that what living beings eat and breathe creates their being. We are healthy when qi is abundant and circulating throughout the body. A lack of qi or stagnation in its flow leads to illness.

Healthy qi allows the body to produce sufficient blood which is another building block of health. Together, qi and blood work to nourish and moisten the skin and protect the body from pathogens. Pathologies of blood will frequently manifest as skin diseases. If the blood becomes too hot due to a heat pathogen, the heat will manifest as red macules and may generate wind leading to itching. If there is an insufficiency of blood, this may cause dry skin, fissuring and itching. Blood can also stop moving smoothly causing blood stasis which is often a complicating factor in skin conditions.

Qi and blood are a yin-yang pair with qi as the active, functional aspect and blood as the formative, material aspect. They circulate in the body's channels and are accessible at acupuncture points (see [Chapter 9](#)). When qi and blood are in harmony, the body is healthy. When they do not function well together, when one is insufficient, or when they do not move smoothly, then disease can occur.

**Table 1. Vital Substances**

Vital Substance	Function/Description	Role in Skin Disease
Yin	Yin describes actions that are slow, calm, and restful and objects that are heavy, dark, thick, and cool.	Disease occurs when yin is out of balance with yang. Less yin leads to symptoms such as skin dryness and heat. Too much yin leads to sensations of cold and poor blood circulation.
Yang	Yang describes actions that are fast, moving, and energetic and substances that are light and warm. Yang is energy to yin which is matter.	Excess yang leads to dry, hot, and red symptoms. Too little yang causes sensations of cold skin, chronic/non-healing wounds, and poor circulation.
Qi	The vital energy throughout the universe and individual. In the body qi nourishes, warms, moves, protects, and contains.	Qi provides nourishment and brings nourishing blood to the skin. Too little qi the skin is thin, dull, weak and prone to disease. Without qi, cell turnover and cell repair do not occur, and wounds do not heal.
Blood	Blood and qi are in a yin-yang relationship. The blood nourishes qi, and qi moves blood to nourish and hydrate.	Without sufficient blood, the skin is dry, rough, cracked, lusterless, and low in elasticity. Lack of flow of blood (stagnation) leads to thickened, dry, scaling, purple skin and masses.

# Skin Pathology from the Chinese Medicine Dermatology Perspective

Chinese medicine practitioners have used characteristics from nature as concepts to describe disease. Factors such as heat, dry, damp, wind, and cold are metaphors used to describe the nature and cause of a disease.<sup>15</sup> This nature is reflected in the skin lesions as well as whole body symptoms (See **Chapter 3**). Herbal medicines are chosen specifically to counter the disease based upon its nature. Cold herbal medicine will counteract heat, drying herbal medicine will counteract damp, etc.

To give a better understanding of these concepts in dermatology, this chapter will briefly discuss each of the main pathogenic factors.

## Heat

Heat manifests on the skin as erythema. It is very similar to inflammation (the word inflammation incidentally comes from the Latin word *inflammare* – on fire). Herbal medicines that clear heat have been shown to have anti-inflammatory and anti-microbial properties.<sup>16</sup>

Heat may manifest in many ways depending on the level of the heat, from superficial to deep. For example, papular erythema will show more superficial wei (defense) level heat, while macular erythema reveals a deeper blood level heat. This is very important to differentiate as the different manifestations will be treated with different medicinals. Another sign of heat is if the lesion blanches with pressure. When this occurs, it may be heat in the qi and blood levels, but if it does not, it signals more stasis of heat. Heat toxicity may also be a factor.

## Damp

Damp corresponds to edematous lesions, weeping, erosion, crusting, vesicular eruptions.

## Wind

Wind manifests as diseases in the epidermis, scaling, sudden onset or disappearance of lesions, and itching.

Just as the wind in nature is constantly moving and creating change, the wind in the body may cause sudden changes.

## Toxins

Heat toxins present as pustules, folliculitis, erythroderma, widespread heat throughout the body, Koebner phenomenon.

Each of these pathogens can be understood as manifestations of inflammation lying on a continuum from surface to deep, acute to chronic, mild to severe. Examining the patient to understand the different pathogenic factors helps the Chinese medicine practitioner know how to create an herbal formula. Different manifestations of these factors will require different herbal formula.<sup>17</sup>

The above is necessarily a brief and simplified understanding of a complex and sophisticated medical system. These aspects of heat, damp, toxic heat etc. may manifest differently at various layers within the body, which would require a different combination and application of herbs to resolve.

Over a long period of time, pathogens left untreated in the body will create a deficiency. The heat burns up yin, blood, and fluids and damages the qi. These signs and symptoms can affect many systems in the body including digestion. Deficiency patterns and stasis conditions arise when there is not enough qi and blood to create healthy skin. This is differentiated both by the appearance of the lesion as well as the evolution of the disease.

## Deficiency Patterns

Insufficiency of yin, blood or fluids may cause scaly, dry, non-inflamed skin, and malnourishment of tissue.

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<sup>15</sup> Xu, Y. (2004). *Dermatology in Traditional Chinese Medicine*. United Kingdom: Donica Publishing Ltd.

<sup>16</sup> Muluye, R. A., Bian, Y., & Alemu, P. N. (2014). Anti-inflammatory and Antimicrobial Effects of Heat-Clearing Chinese Herbs: A Current Review. *J Tradit Complement Med*, 4(2), 93-98. doi:10.4103/2225-4110.126635

<sup>17</sup> Zhou, X., Li, Y., Peng, Y., Hu, J., Zhang, R., He, L., . . . Liu, B. (2014). Clinical phenotype network: the underlying mechanism for personalized diagnosis and treatment of traditional Chinese medicine. *Front Med*, 8(3), 337-346. doi:10.1007/s11684-014-0349-8

## Stasis of Blood

When blood fails to move smoothly, either because of a blockage or because of an insufficiency of qi to give it its motive force, signs such as purple lesions, hypertrophic lesions, lichenified skin, vasculitis, ulcerations etc. may appear.

## The Branch and Root

Branch and root treatment of a disease is another important concept in Chinese medicine treatment. If both the branch and the root are treated, then the possibility of longer-term resolution of a condition increases. A disease that begins as an external condition may, if left untreated over a period of time, damage the qi and blood of an individual. The damage to the upright qi then leads to a deeper, root issue.

Clinically, first we clear the branch (the manifestation) with cold and bitter medicine. Once the branch is cleared, we use tonic medicine to help the body return to normal function. If stasis is present, we use medicine to move the blood and dispel blood stasis. By correcting damage to the body's qi and blood, we can help to solidify the improvements which have been achieved.

As the reader progresses through this text, these fundamental ideas will be important to understanding the Chinese medicine treatment of dermatological diseases. In addition to addressing the disease and the pattern, the Chinese medicine practitioner must understand how to identify the pathogens that are present, to what extent, and at what depth each pathogen is manifesting. They must also be able to differentiate the root and branch of the disease. It is through all of these concepts, as well as a solid foundation in Chinese herbal medicine, that the Chinese medicine clinician can come to a diagnosis, develop a treatment plan, and execute on that plan with an effective herbal formula.

## Authors



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# CHAPTER 3

## UNDERSTANDING SKIN LESIONS IN CHINESE MEDICINE

By Antonia Balfour, MA, LAc and Marnae Ergil, MA, MS, DACM, LAc

### Lesions: How Chinese Medicine Looks at the Skin

In Chinese medicine dermatology, to fully understand a condition, a specialist will analyze the overall presentation of the skin as well as the color, nature, and morphology of individual skin lesions.

A discussion of skin lesions in the context of Chinese medicine begins with understanding Chinese medicine's patterns of disharmony.

### Patterns of Disharmony

As was discussed in **Chapters 1 & 2**, a hallmark of Chinese medicine is its individualized approach of customizing herbal formulas to address the unique presentation of each patient. The goal of the Chinese medicine practitioner is to formulate an individualized blend of ingredients, generally consisting of 10 to 15 herbs, which will be modified and evolve over time as the patient's condition responds. Because a formula needs to be frequently modified, it is important that a patient return to see their practitioner on a regular basis.

In dermatology, the Chinese medicine practitioner first identifies the disease, or condition (i.e. eczema, rosacea, psoriasis, acne etc.). Each of these conditions is then further analyzed in terms of "pattern identification."

Some aspects of patterns are elicited by questioning the patient (often about seemingly unrelated symptoms having to do with digestion, sleep,

menstrual health, energy, or other symptoms, both physical and emotional). In dermatology, patterns are largely identified by analyzing skin lesions, thus an examination of the entire body is an important component of diagnosis.

As an example, by examining lesions, a Chinese medicine practitioner may identify patterns such as dampness and dryness. In a damp pattern of eczema, there may be oozing lesions, or fluid filled vesicles, whereas dry eczema appears dry. Red lesions indicate heat, whereas pale, white lesions indicate cold, and purplish lesions may indicate a stasis of blood. Wind, as a pattern, is characterized by scaling, itching and movement. Fire Toxins cause inflammation that is severe or widespread, or cause pustules or purulent discharge.<sup>18,19</sup>



iStock. "Left Hand of Woman with Eczema."

<sup>18</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 1 (2012). Pg 1-4.

<sup>19</sup> Xu, Y. (2004). Dermatology in Traditional Chinese Medicine. United Kingdom: Donica Publishing Ltd.

## Lesions

Once the disease is correctly identified, to effectively identify patterns of disharmony within the framework of Chinese medicine, a practitioner will closely analyze individual skin lesions as well as the overall look of the skin.

Examination of lesions occurs in the context of specific theories of disease causation. An important text from the Qing Dynasty (1644-1911) is Ye Tian Shi's 1746 *Wen Re Lun* (温热论) or *On Warm Disease*. In this text, Dr. Shi wrote that heat exists in four different layers or aspects of the body: heat can move from the superficial aspect of the body where we defend ourselves from invasion, to deeper within the body, where we see more organic signs and symptoms. As heat moves deeper into the body, it affects different aspects of body physiology, from the defense all the way down the deepest level of heat, which affects the blood aspect. Close inspection of specific lesions gives information about the nature of heat and inflammation, how it behaves, how deep it is and which of these aspects is affected.

The traditional theories of Chinese medicine have clinical relevance in the modern practice of choosing which herbs to include in a formula. Certain herbs resolve heat at a superficial level by promoting sweat or fighting the invading pathogen, whereas others will cool at a deeper layer or expel the pathogen through the bowels or urine. Groups of herbs are used synergistically to address patterns of disharmony.

Below are some examples of herbs and herb pairings, and their application to skin lesions. The representative herbs shown here are broadly used and would be appropriate in many conditions and for various circumstances. These examples highlight the way in which a selection of herbs would be used to treat skin lesions according to some of their specific attributes. These herb pairs are not formulae in and of themselves but representatives of substances that are frequently used together within a formula to address specific areas of disharmony. These substances would never be prescribed by themselves or even in stand-alone pairs. They would be included in a formula with other substances to treat each person's individual presentation.



iStock. "Female Showing Her Acne."

## Macules

Macules are flat lesions, differentiated according to color, pattern of disharmony, and the conditions in which they are seen.<sup>20</sup>



Day, Rachel; Yin Yang Dermatology: Shi Gao



Day, Rachel; Yin Yang Dermatology: Sheng Di Huang & Mu Dan Pi

To treat macules, the mineral Shi Gao (Gypsum Fibrosum) is an appropriate choice for background redness in a case of acne, for example, when the skin appears pinkish red. The patient may feel thirsty, and the heat resides in a middle level (the Qi aspect).<sup>21</sup>

For macules with a deep red color, in a case of severe rosacea or eczema, for example, herbs are chosen that clear a deeper level of heat or fire. The herbs shown here, Sheng Di Huang (Rehmanniae Radix) and Mu Dan Pi (Moutan Cortex), clear heat at the blood aspect (the deepest heat) and cool the blood.<sup>22</sup>



Day, Rachel; Yin Yang Dermatology: Ba Yue Zha



Day, Rachel; Yin Yang Dermatology: Chai Hu & Xiang Fu

White macules, as seen in vitiligo for example, are caused by qi stagnation. The herb shown here, Ba Yue Zha (Akebiae Fructus), circulates the qi and is frequently included in formulas that treat vitiligo.<sup>23,24</sup>

Brown macules, such as those seen in melasma, are also caused by qi stagnation. In this case, typical herbs to circulate the qi would be Chai Hu (Bupleuri Radix) and Xiang Fu (Cyperi Rhizome).<sup>25</sup>

## Papules

Papules are raised lesions, also differentiated according to color, pattern, and the conditions in which they are seen.<sup>26</sup>



Day, Rachel; Yin Yang Dermatology: Ling Xiao Hua & Ji Guan Hua



Day, Rachel; Yin Yang Dermatology: Jin Yin Hua & Lian Qiao

Red papules seen in rosacea indicate the Chinese medicine pattern of heat in the blood. Appropriate herbs include those that clear heat and cool the blood such as Ling Xiao Hua (Campsis Flos) and Ji Guan Hua (Flos Celosiae Cristatate).<sup>27</sup>

For red papules and pustules seen in superficial acne, the Chinese medicine pattern of wind heat is indicated. Here, the better choice of herbs would be Jin Yin Hua (Lonicerae Flos) and Lian Qiao (Forsythiae Fructus), both of which clear heat and disperse wind.<sup>28</sup>



Day, Rachel; Yin Yang Dermatology: Hong Hua & Tao Ren



Day, Rachel; Yin Yang Dermatology: Gui Jian Yu & Shi Jian Chuan

For purple papules seen in acne, the Chinese medicine patterns are stagnant heat in the blood or blood stasis, treated by blood-quickening herbs such as Hong Hua (Carthami Flos) and Tao Ren (Persicae Semen).<sup>29</sup>

For purple papules and plaques seen in psoriasis, where the lesions are hard and infiltrated, the Chinese medicine pattern of blood stasis is also indicated. But here, blood-moving herbs such as Gui Jian Yu (Euonymi Ramulus) and Shi Jian Chuan (Salvia Chinensis Radix) are more appropriate.<sup>30</sup>

## Pustules

Pustules indicate the pattern of fire toxins. Chinese medicine further differentiates fire toxins according to the level where they are located (deep versus superficial), the pattern, and the condition they are associated with.<sup>32</sup>



Day, Rachel; Yin Yang Dermatology: Jin Yin Hua



Day, Rachel; Yin Yang Dermatology: Ba Yue Zha

Superficial pustules, like those seen in folliculitis, are best treated with an herb like Jin Yin Hua (Lonicerae Flos), that transforms fire toxins and affects the superficial layer, or defense aspect of the body.<sup>32</sup>

Deeper pustules, such as the yellow-brown pustules seen in pustular psoriasis, are treated with heavier toxin resolving herbs such as Pu Gong Ying (Taraxaci Herba) and Zi Hua Di Ding (Viola Herba).<sup>33</sup>



Day, Rachel; Yin Yang Dermatology: Bai Hua She She Cao



Day, Rachel; Yin Yang Dermatology: Bai Zhi & Ju Hua

Fire toxins in acne cause pustules and comedones that can be found at a superficial, mid-layer or deep layer of the skin. This herb, Bai Hua She She Cao (Hedyotis diffusae Herba), resolves toxins in all layers of the skin, making it an especially important substance in the treatment of acne with fire-toxins.<sup>34</sup>

The pustules seen in rosacea are well treated with herbs such as Bai Zhi (Angelicae dahuricae Radix) and Ye Ju Hua (Chrysanthemi indicis Flos), which open the pores to push out toxins.<sup>35</sup>

## Scales

Scales are generally associated with wind. They are also differentiated according to their color and nature. Scales can be dry or greasy, with varied morphology. Substances that treat the wind will almost always be used but will vary based on the specific disease and the presentation of the scales.<sup>36</sup>



Day, Rachel; Yin Yang Dermatology: Gou Teng



Day, Rachel; Yin Yang Dermatology: Jing Jie & Fang Feng

White scales overlaying pale skin occur in a pattern of wind with underlying blood deficiency. Gou Teng (Uncariae Ramulus cum Uncis) is an appropriate wind-clearing herb that is moist in nature. This herb would be used in combination with herbs that nourish the blood.<sup>37</sup>

White scales with a red background, a common pattern seen in atopic eczema, are associated with the pattern of wind stemming from blood heat. Jing Jie (Schizonepetae Herba) and Fang Feng (Saposhnikovia Radix) are a common pair of wind clearing herbs used together in herbal formulas with herbs that clear heat from the blood, such as Sheng Di Huang (Rehmanniae Radix) and Mu Dan Pi (Moutan Cortex) shown above.<sup>38</sup>



Day, Rachel; Yin Yang Dermatology: Wei Ling Xian & Niu Bang Zi



Day, Rachel; Yin Yang Dermatology: Ku Shen

The herbs shown here, Wei Ling Xian (Clematidis Radix) and Niu Bang Zi (Arctii Fructus), also treat wind with blood heat. This pair would be more commonly used in the treatment of seborrheic dermatitis.<sup>41</sup>

This herb, Ku Shen (Sophorae Flavescenits Radix), is widely used in the treatment of seborrheic dermatitis. Here, though, the scales would be of a damp heat nature with a yellowish or greasy looking appearance and a musty odor.<sup>42</sup>

## Crust

Crust comes from dried exudate and is differentiated in Chinese medicine according to color, pattern, and associated condition.<sup>43</sup>



Day, Rachel; Yin Yang Dermatology: Huang Qin & Huang Bai & Huang Lian



Day, Rachel; Yin Yang Dermatology: Ma Chi Xian

Yellow crusts, such as those seen in impetigo, are the result of damp heat with fire toxins. Appropriate herbs include a famous combination of the “Three Yellows,” Huang Lian (*Coptidis Rhizoma*), Huang Qin (*Scutellariae Radix*), and Huang Bai (*Phellodendri Cortex*), all of which clear heat and dry damp.<sup>44</sup>

Bloody crusts, such as those seen in herpes zoster, are due to heat toxins at the blood level. Ma Chi Xian (*Portulacae Herba*) is one herb that resolves these deep lying heat toxins.<sup>45</sup>

## Conclusion

From this discussion, it is especially important to recognize that, when simply reading a text, several substances may seem to have quite similar actions. However, with a deeper understanding of both materia medica and the theory of Chinese medicine, one can see that fine distinctions exist and that the incorrect use of substances will either create little to no change or could even make the condition worse.

The hallmark of Chinese medicine is to look at the whole person, both internal symptoms and external symptoms that reflect the state of the interior to effectively combine herbs into formulas. These multi-ingredient formulas address the varied patterns seen in most patients. Patterns are identified by taking into account the wide variety of physical and emotional symptoms, as well as the skin lesions themselves and their associated conditions. In the real world of clinical practice, patients present with complex combinations of patterns that evolve and change over time. In dermatology, herbal medicine provides a unique and effective method to address the varied aspects of each individual's unique presentation.

<sup>20</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 1 (2012). Pg 1-4

<sup>21</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 4 (2012). Pg 3

<sup>22</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 2 (2012). Pg 3-5

<sup>23</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 2 (2012). Pg 3-5

<sup>24</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 3 (2017). Pg 86

<sup>25</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 1 (2012). Pg 1-4

<sup>26</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 1 (2012). Pg 1-4

<sup>27</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 2 (2012). Pg 3-5

<sup>28</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 4 (2012). Pg 3

<sup>29</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 4 (2012). Pg 3

<sup>30</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 1 (2012). Pg 5-10

<sup>31</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Trainig module 1 (2016). Pg 12-21

<sup>32</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module (2014). Pg 1

<sup>33</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 1 (2012). Pg 5-10

<sup>34</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 4 (2012). Pg 3

<sup>35</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 2 (2012). Pg 3-5

<sup>36</sup> Xu, Y. (2004). Dermatology in Traditional Chinese Medicine. United Kingdom: Donica Publishing Ltd.

<sup>37</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 1 (2012). Pg 1-4

<sup>38</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 3 (2012). Pg 1, 6

<sup>39</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 3 (2012). Pg 1, 6

<sup>40</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 1 (2012). Pg 5-10

<sup>41</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 4 (2017). Pg 63-70

<sup>42</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 4 (2017). Pg 63-70

<sup>43</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 1 (2012). Pg 1-4

<sup>44</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 1 (2012). Pg 3-6

<sup>45</sup> Al-Khafaji, Mazin. Chinese Medicine Dermatology. Training module 2 (2017). Pg 88-90

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# CHAPTER 4

## CHINESE HERBAL MEDICINE TREATMENT METHODS IN DERMATOLOGY

By Trevor Erikson, Dr. TCM; Joseph Alban, MS, LAc; and Marnae Ergil, MA, MS, DACM, LAc

Chinese medicine has a long history of treating dermatological conditions. Dermatology has been recognized as a specialty in Chinese medicine since the 2nd century BCE.<sup>46</sup> Chinese herbal medicine is used both internally (oral administration) and topically for all types of skin issues including the most common conditions, such as acne, atopic dermatitis, other eczemas, psoriasis, as well as less common ones such as perioral dermatitis, lichen planus, tinea, and others.

According to Chinese medicine theory, while skin lesions are superficially displayed over the body surface, the lesions reveal specific internal pathologies, most important of which is what internal pathogenic factors are causing the skin disease.<sup>47</sup> Modern understanding of human physiology and pathology is similar in that many skin diseases are understood as due to systemic imbalances, including pathology of the immune, hormonal, and neurological systems, or even the intestinal microbiota. Skin disease is often the outward manifestation of an internal problem.

In addition to internal therapies, there is a long tradition of using herbal medicines directly on the skin to help heal the local area.<sup>48</sup>



Yin Yang Dermatology. "Herbal Decoction - Raw Herbs in Tea - Cooked Pouches."

External therapies are beneficial in speeding the healing process and bringing relief to symptoms such as reducing itch in eczema, flattening the plaque of psoriasis, or stimulating dormant melanocytes to produce melanin in vitiligo. (See [Chapter 5](#)) Thus, the combination of both internal and external therapy will often form the primary method of treatment for most skin diseases. Research on skin conditions from East Asian countries often reflects this combination of oral and topical medications.<sup>49</sup> Some Chinese medicine practitioners may also use acupuncture, moxibustion, and manual therapies such as cupping as useful supplementary therapies for the treatment of skin disease (see [Chapter 9](#)).

Chinese medicine therapies are based upon a sophisticated and detailed theory of disease development and manifestation. The treatments are customized to each patient's pattern of disease in order to address the underlying imbalance, what is called pattern differentiation. (See [Chapters 1 - 3](#) for detail on Chinese medicine theory).

<sup>46</sup> Li, L. (1995). *Practical Traditional Chinese Dermatology*. Hong Kong: Hai feng Publishing Co.

<sup>47</sup> Ibid.

<sup>48</sup> Xu, Y. (2004). *Dermatology in Traditional Chinese Medicine*. United Kingdom: Donica Publishing Ltd.

<sup>49</sup> Liu, J., Mo, X., Wu, D., Ou, A., Xue, S., Liu, C., . . . Chen, D. (2015). Efficacy of a Chinese herbal medicine for the treatment of atopic dermatitis: a randomised controlled study. *Complement Ther Med*, 23(5), 644-651. doi:10.1016/j.ctim.2015.07.006

## Chinese Herbal Medicine

The current Chinese medicine pharmacopeia contains over 5000 substances. Most dispensaries carry 500 of the most commonly used substances, which are typically plant based (roots, leaves, seeds, fruits, bark or branches) but may also include certain minerals, such as Shi Gao (Gypsum Fibrosum), and even some animal products such as mu li (Concha Ostreae).<sup>50</sup> While the traditional pharmacopeia includes some endangered species, both plant and animal, use of these products is illegal and unethical. As such, they should not find their way into modern clinical practices. Their presence in materia medica textbooks is for educational purposes only.

The harvesting and processing of herbs is a specific study in the field of Chinese medicine. Many herbs must be harvested at specific times or in specific ways to have the strongest medicinal impact. This training is not something that most practitioners of Chinese medicine will have, either in the west or in Asia.



Ergil, M. "Chinese Dispensary."

In Asia, training as a Chinese medicine pharmacist will include harvesting and preparation techniques. After herbs are harvested, they are dried, cut, and processed in very specific ways. A well-trained pharmacist or herbalist can judge the quality of an herb through its appearance and taste. The specific way each herb is processed, called pao zhi, is very important as it can change the functions of medicinals. (See **Chapter 6 on Herbal Preparation**).

Therapy with herbal medicines can be grouped into 2 main categories: internal (orally administered) and external (topically applied). This chapter will focus on internal therapy and the following chapter (**Chapter 5**) will discuss the use of external herbal therapies.

## Internal Herbal Therapy

“ Smith (pound into powder) Bai Lian (Radix Ampelopsis), Huang Qi (Radix Astragali), Shao Yao (Radix Paeoniae Lactiflorae), Gui (Ramulus Cinnamomi Cassiae), Jiang (Rhizoma Zingiberis), Jiao (Pericarpium Zanthoxyli), and Zhu Yu (Fructus Evodiae Rutecarpae) - altogether seven substances ... For... abscess of the flesh, double the Huang Qi ... Use one portion of each of the others. Combine and put one large three-fingered pinch into a cup of liquor. Drink it five or six times a day. Wait for it to desist.”

- Wushier Bing Fang (Recipes for 52 ailments), written around 300 BC<sup>51</sup>

The above quote comes from a third century BC text found within the contents of the Mawang tomb in Hunan province, China, which was excavated during the 1970's. It represents one of the earliest recorded formulations of herbal medicines in the world, and, interestingly, was for the treatment of skin disease. The majority of the seven herbs used in the formula are still commonly used today, thus showing the several thousand-year-old history of using herbal medicines for dermatological conditions.

In modern practice, Chinese herbal medicine is typically given in a formula composed of 8-15 ingredients.

<sup>50</sup> Bensky, D., Clavey, S., & Stöger, E. (2004). Chinese herbal medicine : materia medica (3rd ed.). Seattle, WA: Eastland Press.

<sup>51</sup> Harper, D. (1998). Early Chinese Medical Literature: The Mawangdui Medical Manuscripts. London: Kegan Paul International.



Yin Yang Dermatology. "Herbal Pharmacy."

The formula is cooked into a strong tea which is drunk twice a day. The combination of different ingredients, rather than a single substance, has a stronger action than any individual substance within the formula. Heat, water, and time are used to extract medicinal compounds found within the herbal medicines, which then go on to create many newly formed compounds with each other. This medicinal soup (herbal tea in Chinese is called tang, or soup) will then work on multiple systems in the body, offering a whole systems approach to the treatment of disease.

“ Traditional Chinese Medicine (TCM) offers an extensive source of examples of this concept in which several active ingredients in one prescription are aimed at numerous targets and work together to provide therapeutic benefit.”<sup>52</sup>

Using dui yao (herb pairing) is a traditional method of combining herbs to improve or enhance the therapeutic effect.<sup>53</sup> There are several reasons discussed in Chinese medicine theory why substances might be combined. These include: combining two herbs to support the action of each other (such as

two herbs, each promoting a bowel movement); combining two herbs with complementary actions (such as one herb promoting a bowel movement and the other soothing abdominal cramping); combining two herbs with opposing actions (for example one herb may have a downward bowel moving action and another an upward action to prevent excessive bowel movements);<sup>54</sup> combining two herbs to balance each other (using a warm herb to diminish the extremely cold nature of another); or combining to harmonize the overall effect and improve the taste of a formula (using a sweet herb, such as dried dates or licorice root). As with the many materia medica texts available, there are also many Chinese texts that discuss commonly used herb pairs and explain how they work together.

When treating skin disease, herbal formulas are designed to target the root cause of the disease as well as to address the specific symptoms of the disease (the branch manifestations). Common treatment methods include: alleviate itching, drain damp, clear heat, relieve toxicity, cool the blood, quicken the blood, soften hardness, supplement qi, nourish yin and blood. The ability for the formula to have these therapeutic effects is based on the functions, tastes (acrid, sweet, astringent, bitter, salty, or bland) and thermal nature (hot, warm, neutral, cool, or cold) of the individual herbs (See [Tables 1 and 2 below](#)). This classification of herbal medicine has evolved over thousands of years from close and meticulous clinical observations. It has been handed down from generation to generation through clinical training as well as written medical treatises. The result is a sophisticated system based upon practical and detailed clinical realities.

For example, a patient with rosacea may be diagnosed with the common pattern of Hot Blood with Stasis.<sup>55</sup> The focus of the formula is to cool the blood, as well as quicken the blood. One herb combination that is highly effective to cool the blood is Chi Shao (Radix Paeoniae Rubra) with Mu Dan Pi (Cortex Moutan).<sup>56</sup> Zhi Zi (Fructus Gardeniae) may be added to help clear heat.<sup>57</sup> To quicken the flow of blood, Hong Hua (Flos Carthami) and Tao Ren (Semen Persicae), which are warmer in nature and thus help balance the overly cooling effect of the other herbs, are an important, and very famous herb pair.<sup>58,59</sup> If there are pustules present, then Chinese

medicine theory would suggest the use of medicines like Bai Zhi (*Radix Angelicae Dahuricae*), with an acrid flavor and the function of expelling pus.<sup>60</sup> If this patient was constipated then substances to help promote a bowel movement might be needed, such as Da Huang (*Radix et Rhizoma Rhei*), which is bitter and has a descending nature, and cold to help clear excessive heat.<sup>61</sup> Lastly, a sweet herb such as Gan Cao (*Radix Glycyrrhizae*) would be used to harmonize all of the differing ingredients.<sup>62</sup>



Dreamstime. "Chinese Herbal Pharmacist Weighing Herbs."

The above example, a simple composition of 8 herbs for rosacea, hopefully shines some light on the methodology behind creating Chinese herbal formulas. As the patient improves the ingredients will be changed. For example, the use of Da Huang (*Radix et Rhizoma Rhei*) to purge the bowels might be limited to a week or so, as it is extremely cold and very strong in its action. Once the bowels have begun to regulate, other herbs might be substituted that will help to moisten the stool and strengthen, rather than purge, the digestion.

When prescribed appropriately, herbal medicines can be a very effective and safe treatment option for many different skin disorders. By focusing on the root cause, both short and long term healing may be expected. To aid your patients in a successful treatment with herbal medicine, look for Chinese medicine practitioners who have received

adequate training in the practice of prescribing herbal medicines for skin disease. The International Traditional Chinese medicine Dermatology Association ([www.tcmdermatology.org](http://www.tcmdermatology.org)) provides a list of our members, who have completed rigorous study of Chinese Medicine Dermatology and passed a qualifying examination.

## Table 1. Medicinal Tastes

Tastes	Function	Use in Dermatology
Bitter	Clear heat and toxicity	Widely used to clear heat in skin diseases: psoriasis, eczema, acne
Salty	Dissolve masses, soften hardness	Cystic acne, diseases with nodules
Sweet	Supplement	Melasma, types of acne, perioral dermatitis, consolidate treatment
Sour	Astringe	Hold in fluids, restrain qi to counteract draining medicine
Acrid	Disperse	Stop itch. Disperse heat and wind collected on the skin in certain eczemas

**Table 2. Temperature of Medicinals**

Temperature	Taste/Temp Combination	Examples of Substances Used in Dermatology
Hot	Hot and acrid	Chuan Jiao: warms cold, stops itching (externally)
Warm	Warm and sour	Wu Mei: restrains qi and balances cold herbs
Neutral	Sweet and neutral	Huo Ma Ren: moistens skin and intestines, constipation and/or dry skin
Cool	Cool and acrid	Mu Dan Pi: Disperses and cools congested heat
Cold	Bitter and cold	Huang Lian: Drains damp heat, inflammation

<sup>52</sup> Chen X, Zhou H, Liu YB, Wang JF, et al. (2006) Database of traditional Chinese medicine and its application o studies of mechanism and to prescription validation. *British Journal of Pharmacology*. 149\*8) 1092-103. PMID: 17088869.

<sup>53</sup> Zhou, X., Seto, S. W., Chang, D., Kiat, H., Razmovski-Naumovski, V., Chan, K., & Bensoussan, A. (2016). Synergistic Effects of Chinese Herbal Medicine: A Comprehensive Review of Methodology and Current Research. *Front Pharmacol*, 7, 201. doi:10.3389/fphar.2016.00201

<sup>54</sup> Wang J, vanderHeijden R, Spruit S, Hankermeier T, et al. (2009). Quality and safety of Chinese herbal medicines guided by a systems biology perspective. *Journal of Ethnopharmacology*.126(1); 31-41. PMID: 19683045.

<sup>55</sup>Al-Khafaji, Mazin. *Chinese medicine dermatology. Training module 2* (2017). Pg 57-58

<sup>56</sup> Bensky, et al. (2004). *Chinese Herbal Medicine Materia Medica*. 3d edition. Eastland Press. 127

<sup>57</sup>Bensky, et al. (2004). *Chinese Herbal Medicine Materia Medica*. 3d edition. Eastland Press. 95-98

<sup>58</sup>Al-Khafaji, Mazin. *Chinese medicine dermatology. Training module 2* (2017). Pg 57-58.

<sup>59</sup> Liu, L., Duan, J. A., Tang, Y., Guo, J., Yang, N., Ma, H., & Shi, X. (2012). Taoren-Honghua herb pair and its main components promoting blood circulation through influencing on hemorheology, plasma coagulation and platelet aggregation. *J Ethnopharmacol*, 139(2), 381-387. doi:10.1016/j.jep.2011.11.016

<sup>60</sup>Al-Khafaji, Mazin. *Chinese medicine dermatology. Training module 2* (2017). Pg 57-58.

<sup>61</sup> Bensky, et al. (2004). *Chinese Herbal Medicine Materia Medica*. 3d edition. Eastland Press.

<sup>62</sup> Ibid.

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# CHAPTER 5

## TOPICAL APPLICATION OF CHINESE HERBAL MEDICINE (EXTERNAL HERBAL MEDICINE)

By Trevor Erikson, Dr. TCM

### External Herbal Medicine (Topically Applied)

“ For wet spreading sores (impetigo), Huang Lian Fen (Rhizoma Coptidis Chinensis Powder) is indicated.”<sup>63</sup>

As with the internal use of herbal medicine, the topical use of Chinese herbal medicine also has a long history, as evidenced by the quote above from an important herbal text written around 200 AD. In fact, the powdered Huang Lian (Rhizoma Coptidis) mentioned above, is still very much used for topical treatment with research showing it to possess anti-microbial and anti-inflammatory properties.<sup>64</sup>



Erikson, Trevor: "Huang Lian."

Externally applied herbal medicines can be the primary treatment for skin disease, especially in young infants when it may be hard to administer internal medicines or with certain conditions related to infective agents like fungus and yeast. The majority of the time, however, external herbal treatment is combined with internal herbal treatment for the strongest and longest lasting results.

Over the course of thousands of years, practitioners developed various methods for preparing herbal medicines for topical application. Application methods vary depending on the type and nature of disease. Typical uses for topical medicines would be to stop itching, clear heat, dry dampness (swelling, blistering, erosion and exudate), kill worms (this would include fungus, yeast, and even parasites such as scabies), stimulate activity (dormant melanocytes in vitiligo or hair follicles in alopecia areata), and moisten dryness. Common forms of external medication include water-based washes and lotions, herbal powders applied directly to the skin, oil infusions or oil-based balms, alcohol tinctures, or vinegar extractions.

<sup>63</sup> Sung, Y., (2008). Understanding the Jin Gui Yao Lue. Peoples Medical Publishing House: Beijing, China.

<sup>64</sup> Wang J, Wang L, Jou GH, Hu J, et al. (2019) Coptidis Rhizoma: a comprehensive review of its traditional uses, botany, phytochemistry, pharmacology and toxicology, *Pharm Biol.* 57(1): 193–225. PMID: 30963783

The choice of medicine, as well as its preparation and application, will change as the patient's condition changes.



Al-Khafaji / Dermatology-M: "Creams & Ointments."

For example, during the acute stages of an eczematous flare, if the skin is eroded and oozing fluid, then a poultice or wash made from herbal medicines cooked in water, followed by sprinkling powdered herbs on top of the lesions, is the best method for clearing heat and drying dampness. As the exudation diminishes and crusts form, indicating the lesion is more subacute, then mixing a small amount of oil (usually an unrefined sesame oil) with the same powdered herbal formula will increase the powder's ability to clear heat and dry dampness. As the condition continues to improve, ointments and salves, containing mixes of herbal infused oils, and powdered herbal medicines may form the main external treatment. Finally, when the majority of the inflammation has been extinguished, ointments to help moisten and repair dry, cracked, and damaged skin are used to consolidate the treatment and speed up the diminishing of hyper or hypo-pigmentation.

Herbal infused alcohol tinctures can be good to stimulate dormant areas into action. For example, tinctures containing Buguzhi (Fructus Psoraleae) may be rubbed on depigmented areas to help stimulate melanocytes to begin to produce melanin again. Studies have shown this herb can help the migration of melanocytes from hair follicles into depigmented areas of skin, important for the treatment of vitiligo.<sup>65</sup>

Buguzhi (Fructus Psoraleae) can make the skin more photosensitive, so care must be used to avoid sun burn. An alcohol infused tincture containing Ce Bai Ye (Cacumen Platycladi) has been shown to promote the growth of hair in alopecia sufferers.

Herbal infused vinegars are useful for Tinea Pedis (athlete's foot) infections.<sup>66</sup>



Erikson, Trevor: "Powdered Herbs for Soaking."

Vinegar helps the herbal medicines to penetrate deeper into the skin and allows the liquid to be re-used for multiple soaks. Most importantly however, the vinegar itself is a part of the herbal formula as it is anti-fungal in its own right.

For itchy blistering diseases, such as pompholyx eczema, steams using herbs dissolved in boiling water can be useful.<sup>67</sup>



Erikson, Trevor: "Herbs Used for Pompholyx Eczema."

Here the affected areas would be placed over the cooked formula while it is still hot and steaming. For chronic, dry and inflamed lesions, like psoriatic plaques, oil-based ointments applied with plastic wrap as occlusion can be an effective method to hold the medicine in place (it is often messy), as well as help it to penetrate deeper into the skin.

As with all Chinese medicine methodologies, topical Chinese herbal medicine is tailored to the patient and to the nature of the disease. When a condition is hot, cooling medicines are used. When a condition is dry, or there are cracks, topical medicines to nourish yin and generate flesh are applied. When a condition is damp, then substances to dry damp must be used.<sup>68</sup>

For young infants, topical medicines may be all that is needed. In these cases, cooked herbal formulas can be added to a child's bath water or a clean cloth can be used to apply the liquid to lesions. For children and adults, topical medicine is used to help calm symptoms such as itching and pain, and aid in faster and longer lasting results. In some cases, such as psoriasis, the topical medicine can be used to manage small flare ups.<sup>69</sup> Due to the fact that medicine is being applied directly onto the site of illness, using herbal medicines externally can often bring about healing and symptom relief much quicker than relying on internal medicines alone. Therefore, the combination of both external and internal medicines is the most powerful way to treat many dermatological complaints. It is important that a patient consult an appropriately trained herbalist before treating with the topical application of herbal medicine.

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<sup>65</sup> Zhang , Feng J, Mu K, Ma H, et al. (205)Effects of Single Herbal Drugs on Adhesion and Migration of Melanocytes. *Journal of Traditional Chinese Medicine*. 25(3): 219-211. PMID: 16334729.

<sup>66</sup> Zhang Y, Chen S, Qu F, Su G, Zhao Y. (2019).In vivo and in vitro evaluation of hair growth potential of *Cacumen Platycladi*, and GC-MS analysis of the active constituents of volatile oil, *J Ethnopharmacoll*. 28;238:111835. PMID: 30917929

<sup>67</sup> Al-Khafaji, M. (2001). Treatment By Chinese Herbal Medicine: Pompholyx Eczema. *Journal of Chinese Medicine*., 66(June).

<sup>68</sup> Xu, Y. (2004). *Dermatology in Traditional Chinese Medicine*. United Kingdom: Donica Publishing Ltd.

<sup>69</sup> Lin, Y. K., Chang, C. J., Chang, Y. C., Wong, W. R., Chang, S. C., & Pang, J. H. (2008). Clinical assessment of patients with recalcitrant psoriasis in a randomized, observer-blind, vehicle-controlled trial using indigo naturalis. *Arch Dermatol*, 144(11), 1457-1464. doi:10.1001/archderm.144.11.1457

# CHAPTER 6

## HERB PREPARATION, PROCESSING, AND EXTRACTION METHODS

By Chava Quist, DACM, LAc and Thomas Leung, MSTOM, DACM, LAc

In this chapter, we will cover traditional processing practices for Chinese herbs along with extraction methods and the different forms of herbal products available on the market. Post harvest processing methods are often aimed at accentuating or diminishing a particular action or property of an herb for a specialized clinical application.<sup>70</sup> Herb extraction, whether decoctions made on the stove top by the patient, or modern manufacturing methods, all aim to capture the volatile oils and other active constituents of the herbs for the best clinical activity.

Rarely are herbs used alone, but rather prescribed in a synergistic formula consisting of 2-10 or more substances. These herb formulas are constructed following a complex hierarchy of actions and functions, addressing the patient's chief complaint, satellite symptoms, and amending the actions of partner ingredients for a balanced medicine that lessens potential side effects. How herbs are processed and extracted weighs as much on clinical function and efficacy as do the ingredients themselves.

### Cooking of Raw Herbs

When we speak about herbal medicine, the most common association is with the use of crude, raw herbs. Raw herbs refer mostly to a variety of dried plant materials - bark, twigs, leaves, roots, flowers, and fruits. Herb also refers to the medicinal use of some non-botanical organic substances, such as shells, minerals, gemstones, and in some instances animal derivative materials like insect chitin.<sup>71</sup>



Kamwo. "Pharmacists Mixing Raw Herbs."

The time-honored process of cooking raw herb formulas is dependent on patient involvement. The patient is prescribed many small bags of their formula as bulk, dried materials. Everyday, one bag of the formula is placed into a pot and soaked in water. After the materials have soaked, the pot is covered and the mixture is brought to a boil, then let to simmer for 20-40 minutes. The mixture is then strained, the bulk plant materials discarded, and the resulting liquid divided into 2-3 doses which are taken orally on the prescribed schedule.<sup>73</sup> This method is also appropriate for making topical washes.

Due to the nature of their structure, some herbs are prepared by the pharmacy to maximize their extraction as a standard decoction. High oil content seeds and nuts are often broken with a mortar and pestle to maximize their expression.<sup>73</sup> Herbs that have very fine, irritating hairs may be packaged in a tea bag to avoid the work of separating these materials through straining the decoction. Many herbs are separated out from the base formula by virtue of needing different decoction times.<sup>74</sup>

How long herbs are decocted depends both on the nature of the herb materials as well as the function of the formula. Formulas applied for the treatment of acute conditions affecting the surface tissues of the body may best be cooked less than 20 minutes, for instance.<sup>75</sup> Those formulas focused on internal disease and the need for supplementation may be decocted longer times. Individual herbs themselves may have different cooking time needs apart from the formula application by virtue of their structure.

## Short Cook

Lightweight, aromatic herbs may require shorter cooking times to avoid loss of volatile oils. Herbs of an aromatic nature are often considered “moving” in nature, stimulating circulation. Overcooking these more fragile plant materials can diminish their effects. Herbs categorized as short cook are added to the main decoction during the last 5-10 minutes of cooking.

## Long Cook

Heavy substances, such as minerals and shells, often require longer cooking times to obtain a useable, active extract. They may be broken down with a mortar and pestle or powdered with an industrial grinder as well to create finer particles with more surface area exposed for extraction. A minority of herbs may be decocted longer to minimize some of their active constituents that may be associated with unwanted side effects when used in larger amounts. Herbs categorized as long cook are decocted 45-60 minutes prior to the rest of the formula being added.

## No Cook

The term “no cook” refers to herbs that are dissolved into the strained decoction. These are comprised of various gelatins, salts, and powdered substances that do not require any cooking time. These substances are added into the decoction as a last step before consumption. As with short cook herbs, the actions of these substances can be diminished if cooked too long, and their structure often allows them to be water soluble needing no further extraction time.

The practices of cooking raw herb decoctions result in a potent medicinal extract, but often at the cost of patient convenience. Patients must be open and engaged in putting the time into decocting herbs at home, sometimes for months at a time. The patient must also be able to follow instructions on specific handling methods regarding herb cooking times to obtain the best results from their formula. For the clinician, it provides a way to deliver a robust dosage of the formula to the patient. The use of raw herbs affords the practitioner tens of thousands of ingredient and post-harvest processing choices to create a formula that fits the individual patient needs.

## Vacuum Packing



Kamwo. “Herb Pressure Cooking Machines.”

<sup>73</sup> Bensky, D., Gamble, A., Clavey, S., & Stöger Erich. (2015). *Chinese herbal medicine: Materia Medica* (3rd ed.). Seattle, WA, USA: Eastland Press.

<sup>74</sup> Dharmananda, S. (1997, May). *The Methods of Preparation of Herb Formulas: Decoctions, Dried Decoctions, Powders, Pills, Tablets, and Tinctures*. Retrieved September 2019, from <http://www.itmonline.org/arts/methprep.htm>

<sup>75</sup> Scheid, V., & Bensky, D. (2015). *Chinese herbal medicine: Formulas & Strategies* (2nd ed.). Seattle, WA, USA: Eastland Press

Vacuum packing is an herb extraction technology originating from South Korea approximately 50 years ago. Today it is a primary choice for most Chinese hospitals and commonly used by private practitioners in Europe and the US. The benefit of vacuum packed extracts is that it retains the potency of the home cooking method and the choices afforded using raw herbs, while eliminating the need for the patient to be involved in the extraction process itself.

Vacuum packing utilizes raw herbs, processed with filtered water in a closed decoction unit. While a minority of private practitioners own vacuum packing machinery and extract their own formulas, most submit their prescriptions to a third party herb dispensary for processing patient orders. Because the process is sealed, there is no loss of volatile oils. The end result is packaged into single serve pouches made of FDA approved, food safe materials, including no BPA or BPS.



Kamwo. "Cooked Packets of Herbs."

The introduction of the final decoction into the pouch is done without the inclusion of air. This helps the final product remain shelf stable and without the need for refrigeration.

The average volume of vacuum packed extract can vary, but is commonly around 4 oz of liquid yield per serving. Newer generation machines can condense this into a concentrated syrup, thus requiring a much smaller volume of dose. The extracts from vacuum packing can be used to create topical washes. The process is also beneficial for pediatric and veterinary

dosing. The gains it affords for convenience increases patient compliance tremendously.

## Other Herb Extraction Methods

There are many forms of herbal supplements on the market today, available to practitioners and some over the counter to the general public. Modern manufacturing methods help make herbal medicine more accessible and convenient to patients and can decrease cost as well. These types of herb products are of a reduced potency as compared with the use of raw herbs or vacuum extracts and are often selected for convenience and pricing. The clinician is also bound by selecting from a vendor's product line, and thus selection is reduced. While there are a wide variety of such products accessible, we will look at two common options used by clinicians.

## Granules

Granules are dispensed in a powdered form that the patient then reconstitutes.



Kamwo. "Pharmacist in Granule Room."

These are not ground raw herbs but extracts that are married to a water soluble substrate. The volatile oils captured during the extraction process are added to the final product to retain the activity. The exact substrate used can vary somewhat based on manufacturer, but generally inert starches are used as universal binders in pharmaceutical manufacture.<sup>76</sup>

<sup>76</sup> Dharmananda, S., & Dorr, C. (2012, September). Dosage and Form of Herbs: Decoctions, Dried Decoctions, Powders, Pills, Etc. Retrieved August 2019, from <http://www.itmonline.org/arts/dosage.htm>.

While extract strength can vary with manufacturer, many granule products used in the West are produced at a 5:1 ratio, meaning 5 grams of raw material were used to create one gram of granule powder. Granules tend to have a wide dosage range as they are less potent than raw or vacuum packed herbs. There is disagreement on the quality of extract gained from herbs that are minerals or shells, where their substance holds no moisture or appreciable oils.

Clinicians are bound by vendor offerings when looking at granule choices, and there are several hundred classic formulas and single herb extracts products available through major manufacturers. There are very few pao zhi (traditionally processed) single herbs available in granule form on the market. Classic formulas can be modified for individual needs by adding single herb extracts to the mix, but nothing can be removed from the premade product. Practitioners thus are somewhat limited in their specificity in regards to clinical application of granule herbs. Due to the hygroscopic nature of the substrate materials used in granule manufacturing, they are not a good base from which to make topical washes.

Compared to raw or vacuum packed options, granules cost less and are more convenient for the patient to administer, requiring no cooking time. For these reasons they are a popular choice in the West.

## Teapills

Teapills are small tablets of classically used traditional herb formulas. They have no option for modification for the needs of an individual patient and are only available as a ready made item. There are several hundred premade formulas available as teapills.

Teapills are produced by extracting the raw herbs into a concentrated syrup, applying that to a talc pill body and sealing with sugar or botanical wax.<sup>77</sup> These products eliminate most of the taste associated with herbal medicines, require no cooking efforts, and are inexpensive. Their ease of use makes them very popular with patients.

Comparatively however, they are the least potent option. With a standard raw herb formula, it is common to use 90-150 grams of raw materials to extract a single days dose. An entire bottle of teapills, a 7-10 days dose for a standard adult, utilizes only 42-45 grams of raw material on average. In some instances, their dosing may their dosing may need to be substantially increased to obtain clinical efficacy.

Still, teapills have a place in modern practice due to their convenience and cost.

## Traditional Processing Methods

Pao Zhi, or traditional processing methods, are techniques applied to raw herbs to enhance or diminish specific functions of a substance. These post harvest practices are performed by the distributor prior to import or by the herb dispensary themselves. Pao Zhi affords the practitioner a substantial increase in specificity with regards to clinical application.<sup>78</sup> While certain Pao Zhi methods may be applied when creating standard formulas to be extracted into granule or teapill products, most options are only available when using raw or vacuum packed herbs.

A variety of options exist to process herbs to accentuate their affinity with a particular body system, a certain function, or to exclude possible side effects. Here we will outline the most common Pao Zhi methods and their clinical usage.

In the context of Chinese medicine theory, the name of the organs (kidney, liver, heart, etc.) is the term given to the properties associated with the organs. This may not align with or be exclusive to the biomedical understanding of the organ. This is an intricate categorization and outside of the scope of this chapter. The terms organ system (e.g. kidney system) will be used to highlight the definition of the Chinese medicine understanding of the organ rather than the biomedical one.

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<sup>77</sup> Ibid.

<sup>78</sup> Sionneau, P., & Flaws, B. (1995). Pao zhi: an introduction to the use of processed Chinese medicinals. Boulder, CO: Blue Poppy Press. P5-7.

## Dry Frying (Chao)

Dry frying refers to toasting of raw herb materials in a dry wok. Similar methods may include combining grains in the mixture (Fu Chao). This Pao Zhi method accentuates the herbs affinity to support the function of the spleen and stomach systems and the action of digestion.<sup>79</sup> Symptoms of dysfunction in this system may include abdominal bloating, tendency towards loose stools, flatulence, belching or reflux, and general fatigue.

## Wine Frying (Jiu Chao)

This method employs the use of grain based wine rather than grape wine. Several Pao Zhi methods utilize wine for steaming, frying, or washing herbs. The warming and moving nature of the alcohol enhances the function of increasing circulation. Fixed, sharp, localized pain is often associated with a pattern of blood stasis. Wine processed herbs are often applied where there is blood stasis.

## Vinegar Frying (Cu Chao)

The sour taste of vinegar is thought to focus the actions of an herb to the liver system. The properties associated with vinegar are both softening and astringing. Dysfunction of the liver system can be evident in patients with dysmenorrhea, irritability, a subjective feeling of tension or pain on the lateral ribside.

## Salt Frying (Yan Chao)

Salt frying is often used with herbs that have action on the kidney system. Salt is warming and supplementing in nature and is often used to increase the tonic nature of an herb. Salt also has the property to reduce nodules and accumulations such as benign growths or certain patterns of constipation. Patients with need for supplementation of the kidney system often report lumbar and lower body pain and weakness, issues with fertility or sexual function, delays in growth and development, or premature aging.

## Honey Frying (Mi Zhi)

Honey is moistening. Herbs that treat cough may be honey fried when applied for dry cough. Honey frying is also used to support digestion of a harsh substance or reduce potential side effects.

## Ginger Processed (Jiang Zhi)

Ginger is warm and moving like wine and soothing to digestion like honey. Ginger frying Pao Zhi methods are usually applied to ease digestion of a substance or to reduce the irritating nature of the herb. It also can relieve gas, nausea, and bloating that are provoked by cold natured herbs.

## Charred (Tan)

Charring is dry frying an herb until blackened. Charring increases the astringing nature of an herb to enhance its function to stop bleeding. Herbs for resolving diarrhea or coughing may be charred when the clinical expression has resulted in rectal bleeding or blood streaked sputum. Charred herbs may also be used when addressing traumatic injury with bruising.

## Calcined (Duan)

Calcining is the application of high heat to an herb. This method is only applied to substances such as minerals or bone that can withstand the process. Calcining makes the herb extremely dry and increases its porousness and astringent nature. Herbs are calcined when we want to astringe pathological sweating or for treatment of weeping skin lesions.

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<sup>79</sup> Ibid. P10-11.

## Defatted (Shuang)

We often speak of proper extraction methods to harness the active oils of an herb. With defatting, we are reducing these oils by use of a convection oven. Herbs that are defatted usually have high oil content. These oils are of benefit clinically but can lead to loose stools in some individuals. By reducing the oil we can retain some of the main function of the herb without provoking diarrhea. The other application for defatting is with herbs that are shown to have some toxicity. Reducing oil content can be used to modify the harshness of some substances that may cause unwanted effects if used unprocessed.

## Authors



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# CHAPTER 7

## TOXICITY, SAFETY, AND DRUG-HERB INTERACTION IN TRADITIONAL CHINESE MEDICINE

By Kevin Ergil, MA, MS, DACM, LAc; Joseph Alban, MS, LAc; Trevor Erikson, Dr. TCM; and Mazin Al-Khafaji, Dr. CM (China), LAc, FRCHM, MATCM

Traditional Chinese herbal medicines have been culturally and medically understood as drugs in China for well over two millennia. In China the substances within the traditional Chinese materia medica are yào or medicine (药) and Traditional Chinese medicinals are referred to as Zhōng yào or Traditional Chinese medicines (TCMs) (中药). The clinical effects, safe use, as well as possible toxicity have been, and continue to be, carefully observed and documented.

Before the turn of the 19th century, there were already upwards of 1500 published texts solely dedicated to the study of herbal medicine and the formulations made with them. It has been historically accepted that herbal medicines are safe to consume as long as they are prescribed appropriately. Information, pertaining to the safe use and to potential toxicities of herbal medicines is commonly found in modern textbooks.<sup>80</sup>

Chinese medicine clinicians should follow guidelines to maintain safety.<sup>81</sup>

- Correct medicines for the patient's disease, pattern, and constitution are used.
- The correct species and part of the medicines are used, the medicine is of good quality, and proper manufacturing processes (cGMP) have been followed.
- The Chinese medicines are prepared and processed properly, including special cooking techniques to reduce or eliminate toxicity.<sup>82</sup>

- The appropriate daily dosage and recommended duration of use is not exceeded.
- Proper training of the clinician prescribing herbal medicines is conducted.

### Correct Medicine for Each Patient

A condition treated with the wrong herb, or the proper herb used for too long, may cause unnecessary side effects. Some of the earliest Chinese medicine texts, such as the Shang Han Lun (written around circa 150-219 C.E. ), contain warnings about the inappropriate use of herbal medicines.<sup>83</sup> For example, the overuse of cold bitter herbal medicines may damage digestion, causing nausea and diarrhea when used for too long. Many adverse effects may be avoided when the clinician prescribing herbal medicines is adequately trained and experienced.

### The Toxicity of Plants

Over thousands of years, practitioners of Chinese medicine figured out which species of herbal medicines are safe to use, which need to be processed a certain way to eliminate toxicity, and which are best used only in

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<sup>80</sup> Bensky, D., Clavey, S., & Stöger, E. (2004). *Chinese herbal medicine: materia medica* (3rd ed.). Seattle, WA:Eastland Press.

<sup>81</sup> Ergil, Kevin n.d. Toxicity, Safety and HDI in TCM: A Brief Narrative Review

<sup>82</sup> Ergil, K. V., Kramer, E. J., & Ng, A. T. (2002). Chinese herbal medicines. *The Western Journal of Medicine*, 176(4), 275-279.

<sup>83</sup> Mitchell, C., Chung-Ching, C., & Ye, F. (1998). *Shang Han Lun: On Cold Damage, Translation & Commentaries*.

small amounts for shorter periods of time. Substances with potential for toxicity are clearly identified in therapeutic manuals and precautions in preparation and use are taken accordingly. Some medicines, such as realgar (arsenic) or cinnabar (mercury sulfide), once used in the past are no longer viewed as suitable for clinical use due to their toxicity.<sup>84</sup>

## Reliance on Good Sources

Sourcing TCMs from reliable, third party verified supply chains, as well as manufacturers who observe current good manufacturing practice (cGMP) is fundamental to patient safety. Proper sourcing ensures that the proper species is used and avoids the issues of adulterants and contaminants in Chinese herbal medicine. Reliable sourcing helps ensure herbal medicines are free from molds and mildew, heavy metals, high levels of pesticide residues and even the addition of pharmaceutical medicines like antibiotics and corticosteroids.

## Selecting the Correct Species

When using herbal medicines, it is important that the correct herb is used. Cases of herb toxicity often involve the use of an improper species.<sup>85</sup>

In a tragic misuse of Chinese medicine by a team of medical doctors conducting a weight loss clinic, seventy women who were patients at the clinic were exposed to a cocktail of various herbs and pharmaceuticals which included two Chinese herbs, *Stephania tetrandra* and *Magnolia officinalis*. These are species which produce various forms of aristolochic acid (AA), which has a history both as an anti-inflammatory pharmaceutical and as a well-established nephrotoxin. From 1991 to 1992, these

women presented with interstitial renal fibrosis and end-stage renal failure.<sup>86,87</sup> Despite the lack of direct evidence, the Chinese plant *Aristolochia fangchi* which contains AA was thought to have been substituted for *Stephania tetrandra*, leading to this unfortunate outcome.<sup>88</sup>

## Proper Processing and Cooking Methods

Some herbal medicines contain toxic compounds which are for the most part destroyed with proper processing and thorough cooking. The best example of this would be the Chinese herb *Fu Zi* (*Aconiti Radix lateralis praeparata*) derived from *Aconitum carmichaeli* Debx. The root to be used is treated with heat, water, and vinegar (and in some cases sulfur) to degrade the toxic alkaloid aconitine and convert it to the non-toxic aconine alkaloid and to eliminate any significant risk of toxicity. Additional cooking procedures further reduce the risk.<sup>89</sup>

*He Shou Wu* (*Polygonum multiflorum* Thunb.), which is widely used to treat fatty liver disease, hyperlipidemia, cirrhosis, and hepatitis B, as well as alopecia and greying hair, has also been associated with reports of hepatotoxicity and liver damage.<sup>90</sup> This contradictory effect is often attributed to certain toxic compounds found in raw *He Shou Wu*. The traditional processing method of 'nine times soaking and steaming' has been shown to greatly reduce compounds which are toxic to the liver.<sup>91,92</sup> These reports also have an association with daily dosage and length administration. Wei et.al. suggest based upon the Chinese pharmacopeia, processed *He Shou Wu* should be used only for short periods of time at the recommended dosage of 6-12g/

<sup>84</sup> Bensky, D., Clavey, S., & Stöger, E. (2004). *Chinese herbal medicine: materia medica* (3rd ed.). Seattle, WA:Eastland Press.

<sup>85</sup> Ergil, K. V., Kramer, E. J., & Ng, A. T. (2002). Chinese herbal medicines. *The Western Journal of Medicine*, 176(4), 275–279.

<sup>86</sup> Depierreux M, Van-Damme B, Vanden-Houte K, Vanherweghem JL. (1994) Pathologic aspects of a newly described nephropathy related to the prolonged use of Chinese herbs. *Am J Kidney Dis* 1994;24:172-180.

<sup>87</sup> Vanherweghem JL, Depierreux M, Tielemans C, et al. (1993) Rapidly progressive interstitial fibrosis in young women: association with slimming regimen including Chinese herbs. *Lancet* 1993;341:387-391.

<sup>88</sup> Pokhrel, P. K., & Ergil, K. V. (2000). Aristolochic acid: a toxicological review. *Clinical Acupuncture and Oriental Medicine*, 1(3), 161–166.

<sup>89</sup> Ergil, K. V., Kramer, E. J., & Ng, A. T. (2002). Chinese herbal medicines. *The Western Journal of Medicine*, 176(4), 275–279.

<sup>90</sup> Dong H., Slain D., Cheng J., Ma W., Liang W. Eighteen cases of liver injury following ingestion of *Polygonum multiflorum*. *Complementary Therapies in Medicine*. 2014;22(1):70–74.

<sup>91</sup> Liang L., Xu J., Zhou W. W., Brand E., Chen H. B., Zhao Z. Z. Integrating targeted and untargeted metabolomics to investigate the processing chemistry of *Polygoni Multiflori Radix*. *Frontiers in Pharmacology*. 2018;9:p. 934

<sup>92</sup> Wei, Y., Liu, M., Liu, J., & Li, H. (2019). Influence Factors on the Hepatotoxicity of *Polygoni Multiflori Radix*. *Evid Based Complement Alternat Med*, 2019, 5482896. doi:10.1155/2019/5482896

day for four week periods.<sup>93,94</sup> Additionally, prepared pills and prepared medicine with He Shou Wu should be avoided.

Overall, Chinese herbal medicines are safe for the liver.<sup>95,96</sup> Clinical observations reported by Al-Khafaji showed a slight elevation in transaminase levels in some patients during their initial exposure to TCM which were then followed by a subsequent reduction to normal levels.<sup>97</sup> In this report, out of a population of 1,265 patients, less than 1.5% exhibited persistently elevated ALT levels leading to discontinuation of treatment. Melchart et al. and Yun et al. also found that when patients taking TCM were directly observed that the incidence of hepatotoxicity from Chinese herbs was less than 1%.<sup>98,99</sup> There are a few specific herbs, such as Huang Yao Zi (*Rhizoma Dioscoreae Bulbiferae*) and Shan Dou Gen (*Radix Sophorae Tonkinensis*), which have potential for hepatotoxicity and should only be used with active monitoring of liver function.<sup>100</sup>

## Licorice

Licorice or Gan Cao (*Glycyrrhiza* sp.) has been implicated, in large doses, in hypokalemia, hypertensive episode, and palpitations due to its corticosteroid like effects.<sup>101</sup> Most reported cases involve over-consumption of true licorice candy, and in the US, wthe FDA has issued a warning. However, licorice is an extremely widely used herb, almost always used in combination with other medicines (approximately 80% of TCM formulas contain licorice), and the licorice doses typically used

in TCM formulations do not produce these effects.<sup>102</sup>

## Drug and Herb Interactions

The potential for interaction between drugs and herbal medicines is well understood. The risk of interactions between the diverse range of phytochemicals contained in TCMs and pharmaceuticals is always present and is a source of ongoing research.<sup>103</sup> Pharmaceuticals, such as the anti-coagulant warfarin or the monoamine oxidase inhibitors (MAOIs), are sources of significant concern with regard to interactions. This is why a complete list of pharmaceuticals is recorded prior to the use of TCMs.

## Clinician Training in TCM

A properly trained practitioner of Chinese medicine will understand how to prescribe herbal medicines safely and will have the skills necessary to monitor his/her patient when signs of intolerance start to occur. Training standards can vary from jurisdiction to jurisdiction. China, Taiwan, Canada, and the United States are distinct in having independently administered examinations to assess competency for entry into the practice of TCM. The ITCMDA members have gone through rigorous training and testing in skin related applications of traditional Chinese medicine and safe use of herbal medicine.

<sup>93</sup> Ibid.

<sup>94</sup> Hu X. Q., Fang H. L., Quan Z. B., Geng Z. Y. Experimental study of *Radix Polygoni Multiflori preparata* on liver's biochemical matters. *Journal of Shanxi College of Traditional Chinese Medicine*. 2007;30:63–64.

<sup>95</sup> Melchart, D., Linde, K., Hager, S., Kaesmayr, J., Shaw, D., Bauer, R., & Weidenhammer, W. (1999). Monitoring of liver enzymes in patients treated with traditional Chinese drugs. *Complementary Therapies in Medicine*, 7(4), 208–216.

<sup>96</sup> Yun YJ, Nah SS, Park JH, et al. (2008) Assessment of prescribed herbal medicine on liver function in Korea: a prospective observational study. *J Altern Complement Med* 2008; 14:1131–6.

<sup>97</sup> Al-Khafaji, M. (2000) Monitoring of Liver Enzymes in Patients on Chinese Medicines. In *Journal of Chinese Medicine* 62:6-10.

<sup>98</sup> Melchart, D., Linde, K., Hager, S., Kaesmayr, J., Shaw, D., Bauer, R., & Weidenhammer, W. (1999). Monitoring of liver enzymes in patients treated with traditional Chinese drugs. *Complementary Therapies in Medicine*, 7(4), 208–216.

<sup>99</sup> Yun YJ, Nah SS, Park JH, et al. (2008) Assessment of prescribed herbal medicine on liver function in Korea: a prospective observational study. *J Altern Complement Med* 2008; 14:1131–6.

<sup>100</sup> Al-Khafaji, Mazin. *Chinese Medicine Dermatology*. Training module 1 (2017).

<sup>101</sup> Penninkilampi, R., Eslick, E. M., & Eslick, G. D. (2017). The association between consistent licorice ingestion, hypertension and hypokalaemia: a systematic review and meta-analysis. *J Hum Hypertens*, 31(11), 699-707. doi:10.1038/jhh.2017.45

<sup>102</sup> Wang, X., Zhang, H., Chen, L., Shan, L., Fan, G., & Gao, X. (2013). Licorice, a unique “guide drug” of traditional Chinese medicine: a review of its role in drug interactions. *J Ethnopharmacol*, 150(3), 781-790. doi:10.1016/j.jep.2013.09.055

<sup>103</sup> Dharmananda S. (2003). Checking for Possible Herb-Drug Interactions. Retrieved September 14, 2019, from <http://www.itconline.org/arts/herbdrug2.htm>

## Additional Steps to Reduce Risk of Chinese Herbal Medicines<sup>104</sup>

- Complete patient medical history and medications are collected and updated so as to help avoid potential drug-herb interactions.
- Herb Drug Interaction risk assessment is conducted if necessary.
- Clinician has established effective communication with patient so as to ensure the patient is tolerating the medicine well.
- Separating the oral administration of TCMs from pharmaceuticals by 1 to 1.5 hours is recommended.
- Discontinuing the use of TCMs two weeks before surgery is advised.
- Additional caution in the case of oncology patients and transplant patients is observed.
- Exceptional caution in cases where patients are using drugs such as Digoxin, Warfarin, anti-rejection drugs (immuno-suppressants), anti-retrovirals, Phenytoin, Lithium and Phenobarbital is observed.

## Conclusion

A 2,500 year history of clinical use in human populations, combined with extensive biochemical and clinical investigation for the last 150 years, and the recent application of surveillance and reporting systems suggests that safety, toxicity, and herb-drug interaction risks presented by TCMs are minimal when the practitioner is properly qualified and adheres to considerations pertaining to proper sourcing, dosage, and processing.

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<sup>104</sup> Ergil, Kevin n.d. Toxicity, Safety and HDI in TCM: A Brief Narrative Review

## Authors



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grant in alternative medicine research from the National Institutes of Health which he completed in the Pediatric Immunology Department of Mount Sinai School of Medicine. Joseph is a founding board member of the International Traditional Chinese Medicine Dermatology Association (ITCMDA) and sits on the LearnSkin Medical Review Team. Joseph has a thriving acupuncture and Chinese medicine practice in New York City focused on treating skin conditions and improving health holistically. He is passionate about making acupuncture and Traditional Chinese Medicine accessible to his patients and the public. You can find more about his practice at [AlbanAcupuncture.com](http://AlbanAcupuncture.com).



Trevor Erikson is a Registered Doctor of Traditional Chinese Medicine in the province of British Columbia, Canada, where he has been practicing for the past 14 years (2005). He has focused the majority of his post-graduate training

on dermatology, allergy and inflammatory disease, which included observing in the busy dermatology department in Hunan's #1 TCM Hospital in Chengsha, China (2005), as well as completing Mazin Al-Khafaji's prestigious Chinese medicine dermatology diploma program in London, England (2007). He is a founding member of the International Traditional Chinese Medicine Dermatology Association (ITCMDA) and is a respected teacher in the field of Chinese medicine dermatology. For more than a decade, Trevor has been using herbal medicines to help patients overcome a wide range of complicated diseases, allergic rhinitis and asthma, as well as other inflammatory disorders such as colitis. Trevor currently practices out of his own private clinic in South Surrey, BC. For more about Trevor, please see <http://drerikson.com>.



Mazin Al-Khafaji is the founder and director of Avicenna Centre for Chinese Medicine, Avicenna Skin Clinic and Dispensary (<https://www.avicenna.co.uk>) and the creator of functional therapeutics skin care line Dermatology-M (<https://dermatology-m.com>). He is recognized as the leading expert in the field of dermatology and Chinese medicine in the West, and over the past three decades has taught thousands of students worldwide.

Mazin started his studies in Chinese medicine and the Chinese language in 1979. He graduated as an acupuncturist in the UK in 1983 and thereafter continued his studies in China for four years as one of the first Western students to do so. He was awarded the first Sino-British scholarship to study alongside Chinese students at a TCM school and graduated from the College of Traditional Chinese Medicine in Shanghai in 1987 as Doctor of Chinese Medicine. Since his return from China in 1987, he has taught Chinese medicine to new generations of herbal practitioners worldwide and is respected as one of the most inspirational teachers and clinicians in the TCM world today. Mazin is the founder of the International Traditional Chinese Medicine Dermatology Association (ITCMDA). To learn more about Mazin's work, please visit <https://mazin-al-khafaji.com>.

# CHAPTER 8

## HISTORY AND CURRENT SOURCING OF CHINESE HERBS

By Pia Al-Khafaji

Like the theory and practice of the medicine itself, sourcing and collecting of herbs and the systematic classification of herbal materials has a history dating back several thousand years. The sourcing, collecting, and classification of herbal substances has always been a part of the medical tradition of China.



Al-Khafaji: "Wildcraft Zhongluo."

Many thousands of herbs have been listed in detail, with clear descriptions as to cultivation requirements, part of plant used, type of processing, indication of use and application, as well as required quality.

The earliest extant Chinese medical texts to include herbal medicines are the Ma Wang tomb documents, excavated in 1973 and dated to 168 BCE. The earliest known text to be devoted entirely to the herbal pharmacopeia is the Shennong bencaojing (神農本草

The Divine Farmer's Classic of Materia Medica) which dates to sometime between 100 and 200 CE.<sup>105</sup> This text contains 365 substances classified as upper, middle, and lower, and states "Whether they are dried in the shade or in the sun, the time and month when they are gathered and prepared, whether they are used raw or cooked, **the locale where they come from, whether they are genuine or false, or old or fresh, these [aspects] also each have their precedents**"<sup>106</sup> (emphasis added). From the time of the earliest materia medica to the present, rules about growing, and fears about substitutions and the use of authentic medicinals have existed.

One of the most influential of the pharmacy monographs is the Bencao gangmu (本草綱目 Compendium of Materia Medica, AD1368-AD1644) compiled by Li Shizhen. This source text and many other influential monographs written over the centuries have become the referral resources for the TCM section of the China Pharmacopeia, revised every five years, last published in October 2015 in its tenth edition.<sup>107</sup> The Chinese Pharmacopeia describes thousands of ingredients, with clear and in-depth outlines of their actions, indications, traditional and modern uses as well as extensive lists of how these ingredients interact with each other when combined.

<sup>105</sup> Wilms S. (2016). Shennong bencaojing. Happy Goat Productions: Whidbey, WA 2016

<sup>106</sup> Ibid, pg. 6

<sup>107</sup> Chinese Pharmacopeia, 10th Edition. 2015. <http://wp.chp.org.cn/front/chpint/en/>



Al-Khafaji: "Wildcraft Huangbai."

Astonishingly, Chinese herbal resources contain over 11 thousand medicinal ingredients, belonging to 383 different families. They also include nearly one thousand materials of animal origin and over 100 minerals.

The modern traditional herbal pharmacy will stock between 300 to 700 single dried ingredients. Modern pharmacies do not support the use of CITES listed materials or protected or endangered species as this is an unethical and unsustainable practice.<sup>108</sup>

An herb can be any dried and sliced part of the plant, depending on its intended use: flower, stem, vine, leaf, root, and seed are all used. For some plants, only one part is used, while with other plants, all parts are medicinal. Different parts of the same plant have different functions and applications, and with different preparations the same part can have different properties and indications. (See **Chapter 6 on Herb Processing and Pao Zhi**).

Due to the growing popularity and increasing

international use of herbs in cosmetics, teas and traditional medicines, natural resources have become increasingly threatened and sustainability has become a major issue when sourcing herbal material.

In TCM, an estimated 80% of raw herbal materials originally come from wild collection, often an activity of the poorest in society. However, natural supplies cannot meet the rapidly increasing worldwide



Al-Khafaji: "Wild Shi Hu."

demand. Wild herbal resources are decreasing, so whilst farming and cultivating of herbal materials has opened opportunities for growers, it has also brought new challenges. These challenges include land mass, overuse of pesticides and herbicides, cultivation

<sup>108</sup> Convention on International Trade in Endangered Species of Wild Fauna and Flora. <https://www.cites.org/eng/disc/parties/index.php>

requirements, adulteration, and substitution.

The cultivation of Chinese herbs requires large areas of land to produce the quantity of substances needed for the wholesale market. While there is a desire to support community use of land and the ethical employment of farm workers, land is always at a premium and the potential for shortages looms.

Many herbs have challenging cultivation requirements with growth cycles lasting several years. Some substances require beginning the growth cycle in one environment, for example at altitude, or specific soil type, and then replanting into a different climate and soil at lower altitude. This is an extremely difficult and labor intensive endeavor.

Highly sought-after and limited crops demand high prices. Unfortunately, this may also lead to adulteration, substitution, or other short-cuts in the hope of quick economic gains.<sup>109</sup>

To address these and other issues, new ways of cultivation are being explored. These range from developing laboratory methods to cultivate plants known to be difficult to propagate, to special farms



Al-Khafaji: "Modern Shihu."

that use a modern approach, to "traditional" forms of cultivation. It is to be hoped that these new methods will help the community to produce on a larger and more sustainable scale. Additionally, companies developing direct links to growers and being able to economically support them through decades of crop cycles has been essential in the establishment of long-term sustainability.



Al-Khafaji: "Cultivated Zhonglou."

## The Importance of Dao Di Medicinal Material (Native Species Origin)

In the traditional literature, the same plant species grown in different regions are attributed different indications, or one is considered to have lesser efficacy. To this day, there is ongoing research and discussion on the differences between plants grown in different locations. This field of study is known as Dao Di Medicinal Material or "original, true, genuine" herbs.<sup>110</sup>

The term Dao Di Medicinal Material describes the authenticated variety grown in a specific region that is

<sup>109</sup> Brand E. (2018) Herbal Identification: The Clinical Implications of an Ancient Art. downloaded 9/9/2019. <https://legendaryherbs.com/herbal-identification-the-clinical-implications-of-an-ancient-art/?v=7516fd43adaa>

<sup>110</sup> Zhao Z, Ping G, Brand E. (2012) The formation of daodi medicinal materials. *Journal of Ethnopharmacology*. 140:3. 476-481. Downloaded 9/9/2019. <https://www.sciencedirect.com/science/article/pii/S037887411200061X>

traditionally recognized as having produced the best quality and distinctive standard.



Al-Khafaji: "Rou Gui - Cinnamon Bark."

This concept has evolved since ancient times and resulted from the needs of clinicians for standardized quality of herbs. This has been measured and born out in treatment outcomes over thousands of years, and therefore contains significant scientific content relevant to this day.<sup>111</sup>

What originated as a conventional concept for the standardization of ancient drugs, remains an effective way to identify good quality and control the standard of herbal medicines. Out of the 365 substances mentioned in the Shennong bencaojing many are Dao Di herbs. Today out of 600 or so commonly used herbs, about 200 have Dao Di specifications.

Dao Di Medicinal Material are associated with specific growing regions and conditions accompanied by long-standing reputations for high quality and excellent treatment effects. There are specific requirements for cultivation techniques and harvesting processes. The names of herbs that are Dao Di herbs will always be preceded by a place name, usually the traditional name of the region from which they originate.

Regional characteristics of herbs result in differences in indication, chemical composition, efficacy, etc. For example: Chuan Xin Lian (穿心莲, *Andrographis Herba*) from Guangzhou has a better effect as an antibacterial

than the same plant material from Fujian or Anhui; the appearance and taste of Gou Ji (狗脊, *Cibotii Rhizoma*) from Ningxia is better than that from other regions; and the phenolic content of Hou Po (厚朴, *Magnoliae officinalis Cortex*) from Sichuan is up to six times higher than that from Jiangxi. There are many more examples of this type of difference in substances where the same plant is grown in different regions.



Al-Khafaji: "Traditional Herb Market."

The cultivation, maintenance, harvesting, processing and paozhi of Chinese herbs affect the formation of qualities in Dao Di herbs. Famous regions have always had their own processes and histories. The longer those traditions are, the more mature and elaborate the techniques to achieve the desired effect.

## Wild Sourcing of Herbs

Wild sourcing and collecting has become increasingly controlled, and the various Dao Di regions now have government-imposed rules in place to protect certain zones from over collection. An area might be harvested in year one but be completely closed for wild collection over the next few years, when area two, three, four, and so forth are made accessible in rotation.

<sup>111</sup> Brand, Eric, Zhongzhen Zhao and Ping Guo What is Daodi Medicinal Material? <https://www.pacificcollege.edu/news/blog/2016/03/15/what-daodi-medicinal-material> downloaded 9/9/2019

Strict controls are being enforced, and the results are promising. Thanks to the vast land resources in Western China, where many wild herbs originate, stocks can replenish as rest cycles are implemented, thus averting overuse and extinction.

A new emphasis in China is on natural fostering and wild crafting.



Al-Khafaji: "Wildcraft Zhonglou."

This is a successful method which aims to recover viable populations of wild species in their original natural environment through projects that allow plant life and biodiversity to recover plant populations. Many of these projects are supported by private investors and benefactors. This method involves herbs being seeded and planted in their original wild areas. These areas are then closed off and left alone, so that the plants can regrow "naturally" as if in the wild, re-establishing natural reproduction cycles.

In some instances, these methods have already produced excellent results, however, for herbs with long term growth cycles and poor output this process

requires patience and time to establish a successful pattern.

Faced with all of these obstacles, sustainably sourcing high quality Chinese herbal materials is a very challenging proposition for herb companies, and it is of vital importance to support sustainable farming, "Fair Wild," and organic schemes. This is particularly important as local, traditional farming communities depend on long-term and reliable routes to market.

## Identifying Quality and Authentic Herbs

To source top quality herbs is a specialized and difficult field, and it takes years of experience to establish the expertise and knowledge to identify and authenticate herbs and grade quality.

The large herb companies in China have their own scouts and local agents, who regularly visit markets and growing regions to maintain continuous supplies.



Al-Khafaji: "Wildcraft Huangbai."

Most of these large companies now also cultivate their own areas to guarantee supplies of the correct quality.

One of the most concerning issues is that of substitution of authentic herbs with either a poorer quality of the same substance or with a different substance altogether.

Traditionally, the ability to distinguish quality was based on visual inspection, taste, and smell. These remain important markers of quality. However, variations in cutting techniques, the ability to dye substances, and, in some instances, less than ideal training on the part of the identifier, can result in fraud. Important aspects that should be looked at include the color of the substance which can inform one about the quality and the storage of the medicinal material. Color can change based on the age of the medicinal (some medicinals are meant to be aged and so will darken, while others should be fresh and vivid). Processing can also change the color of a specimen.



Al-Khafaji: "Negotiating with buyers: Traditional Herb Market"

A well-trained pharmacist can identify the growing region, age or wild vs. cultivated nature of substances as the varieties produced in different areas will differ in their appearance and in their taste.<sup>112</sup> Changes in aroma and taste can also point to differences in quality. The taste and smell of fresh healthy substances should be vibrant and alive. If the taste or smell is not correct, this can point to either poor quality or substitution.<sup>113</sup>

In China, the training of a clinician is different from the training of a pharmacist. Thus, clinicians can rely upon the training of the pharmacist to ensure quality and authenticity. Outside of Asia, few people are trained to the level of the Chinese medicine pharmacist and so we rely on ourselves to identify poor quality or substitutions. Some substitutions occur because of similar names or similar appearances, or there may be common regional substitutions made that the western clinician may not be aware of. Thus, some adulteration or confusion is unintentional. Intentional adulteration tends to occur mostly where the product is rare or especially expensive. As western clinicians become more aware of the substitution and adulteration issues, greater care is taken. In many instances, herb importers or individual clinicians who import their own herbs will develop relationships with specific farms or distributors to guarantee the quality.

While the majority of the herbs that leave China or Taiwan for export to the west are of generally high quality and the correct substances, it is

<sup>112</sup> Brand E. Herbal Identification: The Clinical Implications of an Ancient Art. Downloaded 9/9/2019. <https://legendaryherbs.com/herbal-identification-the-clinical-implications-of-an-ancient-art/?v=7516fd43adaa>

<sup>113</sup> Ibid

important to continue to be vigilant regarding quality and substitutions. We must also be aware of the sustainability of supply lines. The support of sustainability schemes and the implementation of the “Fair Wild Standard” will serve us all in the future.

The team at Avicenna Centre for Chinese Medicine takes annual buying and auditing trips to China and travel far and wide through deserts and mountains to visit the various regions where different herbs are originally grown. This way they can establish and maintain lasting links to producers, growers, and buyers of wild collected materials and Dao Di herbs to quality standard. Avicenna strives to offer a “field to patient” service, something that has shown impressive results for their patients over the years.

Checking up on and supporting the integrity of GAP and sustainable cultivation methods is an integral part of this, and enables them to support specific farming communities, build up trust-based relationships, and help growers and local producers and wildcraft projects, to maintain a regular supply chain for high quality materials. It also enables them to encourage sustainable production methods and support wild collection operations to implement the “Fair Wild Standard.” Recognizing and authenticating the materials and protecting their integrity along every step of this supply chain is as important as the way the herbs are initially grown and processed, and the challenge to do this in a sustainable and ethical way grows daily.

This is not an easy task, and it is not always practical for largescale suppliers who may have different priorities and working criteria.

To learn more about Avicenna Centre for Chinese Medicine, visit [www.avicenna.co.uk](http://www.avicenna.co.uk).

## Recommended Reading

Zhao Z, Chen H. (2014). Chinese Medicinal Identification: An Illustrated Approach. Ping Gui and Eric Brand eds. Taos, NM: Paradigm Publications.

## Author



Pia Al-Khafaji was born and raised in Switzerland, where she studied Sinology at Zurich University. In 1983, she moved to China and continued her studies in Modern and Classical Chinese at Nanjing

University and then at Shifan University in Taipei (1983 – 1985). Subsequent to that, she studied Acupuncture and graduated from Shanghai College for Chinese Medicine (1985-1987). Whilst not actively practicing Acupuncture, she has been involved in Chinese Medicine since then, and is a director of Avicenna Clinic of Chinese Medicine in Hove, and of [www.dermatology-m.com](http://www.dermatology-m.com).

Pia still regularly travels to all corners of China, covering thousands of miles often in difficult conditions. She personally audits farms, growers, and herb processing factories according to GAP and Fair Wild principles. She has witnessed first-hand the complex developments and changes in the field over the last 35 years. She is fluent in 6 languages, has three children, and two grandchildren.

Pia has written this piece on behalf of Avicenna Centre for Chinese Medicine in the UK, where Avicenna Dispensary is run as a traditional pharmacy with a modern twist. Avicenna has cultivated long-standing trade relationships with trusted farms and suppliers over the years. All base herbal ingredients used at Avicenna and for Dermatology-M products are individually sourced and imported directly from China, and then processed from scratch on Avicenna UK premises in order to control authenticity and quality.

# CHAPTER 9

## ACUPUNCTURE AND CUPPING IN DERMATOLOGY

By Joseph Alban, MS, LAc and Marnae Ergil, MA, MS, DACM, LAc

Acupuncture is one of the better-known therapies within the group of therapies that fall under the rubric of Chinese medicine. As with all Chinese medicine therapies, treatment is designed to correct the root imbalance causing the disease. In dermatology, acupuncture is used to reduce itching and pain, as well as reduce allergic response and inflammation. Patients may seek acupuncture for help with the symptoms of acne, eczema, psoriasis, psoriatic arthritis, melasma, post herpetic neuralgia, etc. There is also Acupuncture Cosmetology (Facial Rejuvenation), which is used primarily for beautification and aging, not the treatment of specific dermatological conditions.

Acupuncture therapy involves more than just needles.



Yin Yang Dermatology. "Acupuncture."

The Chinese term for Acupuncture is Zhen Jiu (针灸) which translates to Needles and Moxibustion. While acupuncture is the modality which is most well-known, an acupuncture practitioner is also well-versed in

the use of moxibustion. Moxibustion is a therapy that warms points on the body by burning mugwort (*Artemisiae argyi Folium* or Ai Ye 艾叶). This is done by placing moxa floss on the handle of a needle to warm the needle, by using a cigar like stick to warm acupuncture points, or warming through a buffer such as a box or on burn cream. From a dermatological perspective, many skin conditions are hot, so moxibustion might be contra-indicated; however, there are times when it is appropriate. For example, one pattern of urticaria is injury by wind-cold. When cold is a part of the root pattern, it is completely appropriate to use moxibustion. Additionally, for some lesions, for example a common wart, moxibustion may be burned directly on the lesion. Regular application of this treatment can cause the wart to resolve.



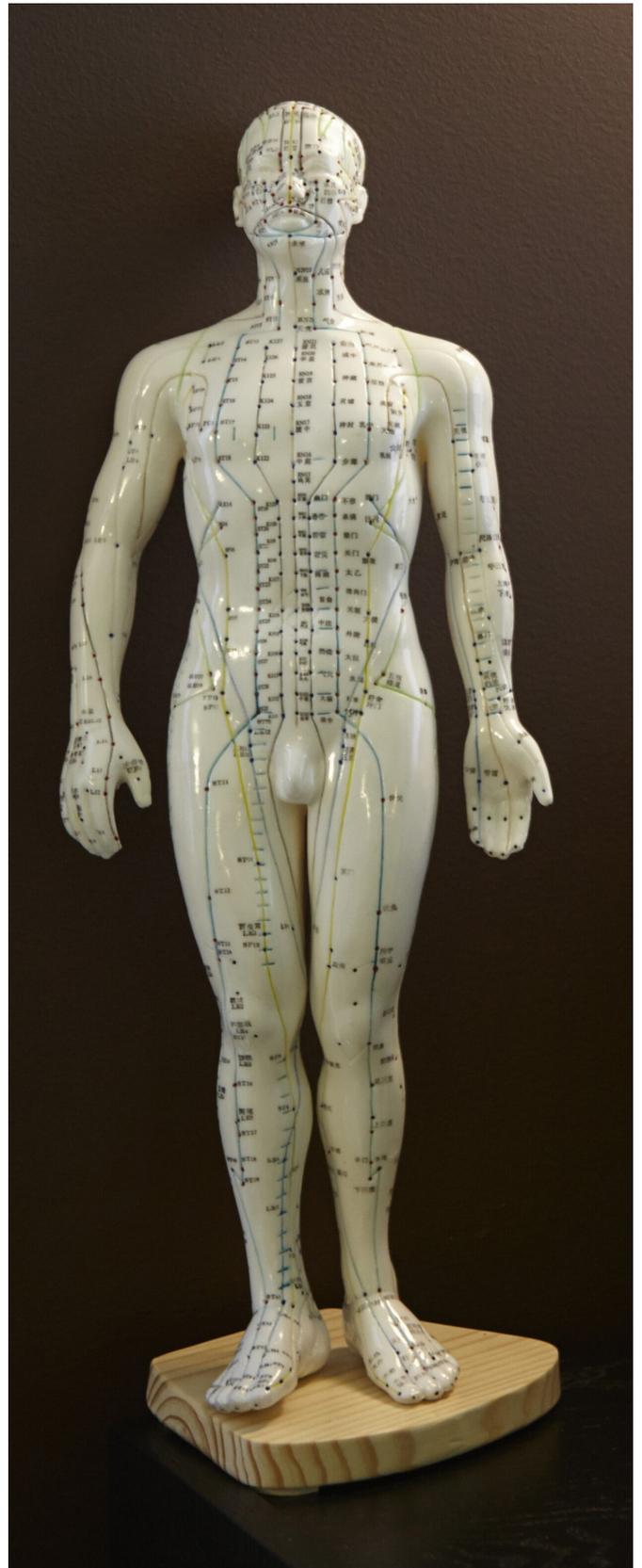
Ergil, Kevin. "Moxa"



Ergil, Kevin. "Moxa on Needle."



Ergil, Kevin. "Moxa Pole."



Alban, Joseph. "Model of Acupuncture Channels."

A key concept in acupuncture is that of the acupuncture channels (sometimes referred to as meridians). The channels travel throughout the body, both on the surface and internally as a conduit for the flow of qi. Internally, channels connect with specific organ systems. On the surface of body, acupuncture channels follow arterial and venous pathways as well as muscular chains. Acupuncture points lie on the more superficial portions of the channels. Acupuncture points are areas where the qi accumulates and is readily accessible. The insertion and stimulation of a needle into these spots can influence the movement of the qi as well as send messages to the internal organs. In dermatology, one will occasionally see skin diseases manifesting on channel trajectories.

Acupuncture needles are small, solid filiform needles. Unlike a hypodermic needle, they do not have a lumen and so nothing is injected into the acupuncture

<sup>114</sup> Son BK, Yun Y, Choi IH. (2010). Efficacy of ah shi point acupuncture on acne vulgaris. *Acupunct Med.*28(3):126-129. PMID: 20813813.

point. Instead, they are pine-needle shaped. Without a cutting edge, there is significantly less pain and bleeding with the insertion of an acupuncture needle than with a hypodermic needle. Appropriately situated, acupuncture needles stimulate the body's healing processes through different types of physical stimulation, such as twirling the needles. Acupuncture needles can also be stimulated with small amounts of electricity in what is called electro-acupuncture.

Acupuncture needles may be placed close to the site of disease or distally along the affected channels. The combination of needles is important to achieve a clinical effect. For example, insertion of needles close to acne lesions or surrounding lesions at what are called "ashi" points or "ouch" points is effective to reduce break-outs and aid in helping the skin clear more quickly.<sup>114</sup> To treat the root of the problem, additional needles would be inserted distally on appropriate channels. Acupuncture points used to clear heat may also be used. These points often lie on the stomach, large intestine and liver channels. So, for example, points such as LI 11 and ST 44 might be used in combination with acupuncture points for reducing dampness, such as SP 9 and St 36.

Electroacupuncture has been shown to be effective in reducing itching in eczema.<sup>115</sup> Clinical experience has shown that electroacupuncture connected to LI 10 and LI 11 on the arms and St 36 along with GB 34 on the legs can quickly help reduce an allergic response causing eczema. Electroacupuncture can also help to balance hormones in PCOS which is frequently associated with acne breakouts.<sup>116</sup> Electroacupuncture is also helpful for pain and inflammation in psoriatic arthritis.

In Chinese medicine it is said that itching disturbs the spirit, and to treat itching, one must calm the spirit. Acupuncture is especially effective at calming the spirit using points along the heart channel or points located in the ears (auricular acupuncture). While acupuncture may not act as quickly as a formula to resolve a disease, similarly to topical application of herbs, it can make important changes in symptomology that allow the formula to work more effectively.

Acupuncture is helpful for many symptoms in

dermatology. It is usually combined with herbal medicine, which is more powerful for long lasting effects.

## Cupping

Cupping is a therapy which exists in medical traditions around the world, including Asia, Russia, Europe, and the Middle East. Chinese cupping therapy was originally known as horning, as the horns of water buffalo were used.

Cupping is performed by depressurizing the inside of a cup with a flame or vacuum, so it lifts the skin below it. Today cups are usually made of glass or plastic, although bamboo cups that have been soaked in an herbal formula are frequently used in Asia. There is also a newer form of cup made of silicone. These cups are very flexible and are frequently used in cosmetic acupuncture to bring blood to the face.

Cupping may be used in dermatology for a few



Ergil, Kevin. "Glass Cups."

conditions.

Different cupping techniques are used depending on the therapeutic goal. Bleed cupping, also called wet cupping, is the technique used most often in dermatology. The skin is pricked with a lancet and the cup is placed over

the area. The suction

draws a small amount of blood through the incision. The bleeding removes heat and stagnation from the body. In dermatology, wet cupping can be used for acne and urticaria in particular.<sup>117</sup> It should be avoided in psoriasis and those with severe eczema.

Cups are placed on different parts of the body for different conditions. When treating inflammatory conditions such as acne, the goal is to remove heat and toxins. This is generally done through cupping on the back, even if the acne is on the face or chest. Wet cupping has been shown to have an antioxidant effect.

Wet cupping may also have an anti-inflammatory effect.<sup>118</sup> However, patients should be aware that cupping will leave bruises on the areas around the cups.

From a Chinese medicine perspective, treatment in its many forms must always match the nature of the disease. A healthy diet (See **Chapter 9**) is always a central factor in improving health. Chinese medicine practitioners will often combine different forms of treatment. Acupuncture and Moxibustion can be used to address many symptoms within dermatology, such as itching, inflammation, and pain. While rooted in similar theory, the practice of Chinese herbal medicine is essential for the treatment of most dermatological conditions. However, a Chinese medicine practitioner will often use many therapies. Acupuncture, Moxibustion, and Cupping can be extremely helpful to support herbal medicine and provide extra relief from itching, pain, and inflammation.

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<sup>115</sup> Pfab F, Kirchner MT, Huss-Marp J, et al. (2012). Acupuncture compared with oral antihistamine for type I hypersensitivity itch and skin response in adults with atopic dermatitis: a patient- and examiner-blinded, randomized, placebo-controlled, crossover trial. *Allergy*.2012;67(4):566-573. PMID: 22313287.

<sup>116</sup> Jedel E, Labrie F, Oden A, et al. (2011). Impact of electro-acupuncture and physical exercise on hyperandrogenism and oligo/amenorrhea in women with polycystic ovary syndrome: a randomized controlled trial. *Am J Physiol Endocrinol Metab*.2011;300(1):E37-45. PMID: 20943753.

<sup>117</sup> El-Domyati M, Saleh F, Barakat M, et al. (2013). M, Saleh F, Barakat M, et al. Evaluation of Cupping Therapy in Some Dermatoses. *Egyptian Dermatology Online Journal*, 9(1), 2.

<sup>118</sup> Tagil SM, Celik HT, Ciftci S, et al. Wet-cupping removes oxidants and decreases oxidative stress. *Complement Ther Med*.2014;22(6):1032-1036. PMID: 25453524.

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# THE CLINICAL CHAPTERS:

## *Acne, Atopic Eczema, and Psoriasis*

With over 2000 years of clinical and scholarly history, the list of skin diseases diagnosed and treated within the practice of Traditional Chinese Medicine (TCM) is extensive. Rosacea, perioral dermatitis, melasma, vitiligo, fungal infections, lichen planus, and a variety of eczemas (atopic, pompholyx, stasis, nummular, seborrheic, etc) are among some of the conditions seen in the modern skin related clinical practice of TCM.

Due to the size limitations for this book, we have chosen to focus the following three chapters on the three most commonly seen conditions: acne, atopic eczema, and psoriasis.

Please go to <http://www.tcmdermatology.org> to find a qualified skin-focused practitioner of Chinese Medicine.

# CHAPTER 10

## CHINESE HERBAL MEDICINE FOR ACNE

By Antonia Balfour, MA, LAc and Marnae Ergil, MA, MS, DACM, LAc

### What Is Acne?

Nearly everyone is familiar with acne, as it is one of the most common dermatological conditions, and during puberty almost everyone suffers from it to a greater or lesser extent. Chinese medicine doctors identified the condition thousands of years ago, calling it Fen Ci (粉刺) or pink/white thorns. It is also sometimes called Fei Feng Fen Ci (肺风粉刺), lung wind thorns or Jiu Ci (酒刺), wine/alcohol thorns. Each of these names speaks to the description of the condition and to the cause. For most people acne dissipates after puberty, but for some it continues, or reemerges in one's 20-30's as post-adolescent female acne.

For many, adolescent acne is mild, although still has the potential to cause psychological distress.<sup>119</sup> Others will develop pustules or cysts and even have acne scars. When women experience post-adolescent acne, it can be indicative of a hormonal disturbance that may also cause difficult or painful menses or may be related to conditions such as polycystic ovarian syndrome causing decreased fertility. Treatment of the acne will often encompass these issues.

### How Does a Chinese Medicine Practitioner Approach Acne?

A Chinese medicine practitioner approaches the treatment of acne by identifying the patterns of disharmony associated with each person's individual presentation. The first step to pattern differentiation is to analyze the lesions themselves.<sup>120</sup>

The color of the lesions is the first differential. Comedones, papules, pustules, nodules, and cysts can be light red, indicating heat, or deeply red, showing a stronger degree of heat.<sup>121</sup> Lesions can also have a purplish hue, showing the presence of blood stasis. Fire toxins are diagnosed when there are inflamed papules and pustules or widespread inflammation.

The location of lesions also gives information about Chinese medicine patterns. Lesions on the back and chest, for example, indicate a stronger degree of fire toxins than lesions found only on the face. Lesions that congregate around the chin or nose, lateral to the nose, and on the forehead are more associated with a pattern of lung heat while lesions that are more pronounced and edematous and are more widespread on the face are more associated with heat in the organs of digestion (stomach and large intestine). Lesions that are centered around the chin and jawline are seen in post-adolescent female acne and indicate that there is blood heat with stasis in the uterus. If the skin appears oily with pronounced pustules, or if there is swelling or edema, this indicates the presence of damp and heat. Damp heat can congeal and turn

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<sup>119</sup> Benham, B., Taheri, R., Ghorbani, R., Allameh, P. (2013). Psychological Impairments in the Patients with Acne, *Indian J Dermatol.* 2013 Jan-Feb; 58(1): 26–29. doi: 10.4103/0019-5154.105281

<sup>120</sup> Chen, H. Y., Lin, Y. H., & Chen, Y. C. (2016). Identifying Chinese herbal medicine network for treating acne: Implications from a nationwide database. *J Ethnopharmacol*, 179, 1-8. doi:10.1016/j.jep.2015.12.032

<sup>120</sup> Xu, Y. (2004). *Dermatology in Traditional Chinese Medicine*. United Kingdom: Donica Publishing Ltd.

<sup>121</sup> Ibid.

into phlegm heat which results in deep, hard cysts and nodules that may be painful.

In post-inflammatory hyperpigmentation and scarring, there may be macular lesions with a brown or purplish hue. In this case, the associated patterns are qi stagnation and blood stasis.

In analyzing the skin, these patterns will be seen in combination and will exist to varying degrees. The herbalist evaluates the spectrum of these patterns and prescribes blends of herbs which emphasize the degree to which each pattern exists and changes over time.

## Common Acne Patterns and Their Treatment

To more fully understand the presenting patterns, it is necessary to look past the skin and evaluate other presenting signs and symptoms that might or might not seem to be related to the acne. There are 4 common patterns of acne and each present with slightly different skin conditions as well as different accompanying symptomology.

The most common pattern, experienced by most adolescents, is **lung heat with toxins**. This pattern presents with red papules, pustules that form rapidly and disperse rapidly, and typically there are many small comedones. Lesions are mostly located on the chin, nose and forehead. Often there are not many systemic signs (other than those associated with puberty) that accompany this pattern.

Treatment for this pattern focuses on clearing heat from the lung and dispelling superficial toxic heat. Two substances that are considered essential for the treatment of acne are Bai Hua She She Cao (*Hedyotis diffusae* Herba) and Huang Qin (*Scutellaria Radix*).<sup>122</sup> These two substances will almost certainly appear in a formula for lung heat with toxins. Additional modifications to a base formula may be made for itching, for acne that is worse premenstrually, for pronounced seborrhea etc. While treatment can be very helpful for adolescents, it will usually not fully eliminate the acne. The changes in hormones are simply a fact of life and only passing through puberty

will fully resolve the acne.

If the lung heat with toxins pattern continues to develop and becomes more pronounced, we move toward treating a pattern of heat in the digestive organs with toxins. In this case, there are more pronounced pustules, edematous papules and more conspicuous closed comedones. At this point, digestive symptoms also begin to emerge. Frequently there is either constipation or loose, foul-smelling stools, a large appetite, bad breath, and bleeding gums. In this instance discussing diet is essential and eliminating foods that engender heat, especially greasy, spicy food and alcohol can be very helpful.

Now treatment shifts to a deeper level of clearing heat and draining damp with bitter, cold and drying medicinals. The Bai Hua She She Cao (*Hedyotis diffusae* Herba) and Huang Qin (*Scutellaria Radix*) are again added and substances to resolve toxins and treat the comedones are also used. Modifications based on the state of bowels and the location of the lesions may also be made. In this pattern, there is frequently pronounced seborrhea for which substances such as Shan Zha (*Crataegi Fructus*) and Yi Yi Ren (*Coicis Semen*) may be added. If there is a tendency to develop nodules or cysts, this must also be addressed.

While toxins present in both of the above patterns, the depth and strength of the heat and toxins is different. For example, a teen may have superficial acne on the forehead and cheeks with small, superficial inflamed pustules, indicating fire toxins. On the other hand, an adult male who has widespread deep papules and pustules on the face and back also has fire toxins. The specific herbs that resolve the toxins in each of these cases will be very different because of the depth and presentation of the fire toxins.

In women, menstrual health gives a lot of information about the flow of qi and blood. Painful periods, menstrual clots, heavy periods, and irregular or

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<sup>122</sup> Kim, B., Kim, K. I., Lee, J., & Kim, K. (2019). Inhibitory effects of Cheongsangbangpoong-tang on both inflammatory acne lesion and facial heat in patients with acne vulgaris: A double-blinded randomized controlled trial. *Complement Ther Med*, 44, 110-115. doi:10.1016/j.ctim.2019.03.018

skipped cycles indicate either a deficiency or a stagnation (or stasis) of qi and blood. Frequently when there are menstrual irregularities, post-adolescent female acne will develop. These lesions are primarily papular or nodular and most often appear on the jawline or chin. The chin is the area of the face that is associated with the uterus, and these lesions are indicative of heat or blood stasis in the uterus.

Treatment of female acne requires regulation of the menstrual cycle. Substances such as Dan Shen (*Salviae miltiorrhizae radix*) and Chai Hu (*Bupleuri Radix*) are essential. Additionally, substances to move the blood such as Dang Gui Wei (*Angelicae Sinensis Extrenitas Radicis*), Hong Hua (*Carthami Flos*) and Tao Ren (*Persicae Semen*) are used. Again, Bai Hua She She Cao (*Hedyotis diffusae Herba*) will be used. Modifications are often focused on regulating the menstrual cycle and treating associated symptoms such as distention of the breasts, premenstrual aggravation of acne, or abnormal uterine bleeding.

Blood stasis type acne may present in a menopausal woman who has jawline acne and a tendency toward heat as well as a woman with polycystic ovarian syndrome (PCOS) whose acne is more concentrated on the cheeks with more seborrhea and amenorrhea.

Herbs that disperse blood stasis would be prescribed for both women as part of their formula. However, the menopausal woman's formula will include herbs to gently move the blood and to clear heat, while the woman with PCOS will receive herbs that are more strongly blood invigorating together with herbs that clear heat and fire toxins. Here, the same treatment principle of moving and invigorating the blood is used, but the herbs vary based on age and constitution.

The final pattern is a relatively severe presentation of **toxic heat with phlegm and blood stasis**. While phlegm and blood stasis can complicate any of the previous patterns, when severe it must be treated as its own pattern. The presentation may include active deep pustules, nodules, cysts, and fistulated comedones. In addition to clearing toxic heat, it is necessary to strongly move the blood and soften the hardness of nodular lesions. Seaweeds such as Kun Bu (*Eckloniae Thallus*) and Hai Zao (*Sargassi Herbs*) or

minerals such as Mu Li (*Ostrae Concha*) are especially useful for softening hardness.

Regulating the diet is important in all acne patterns (especially the adolescent patterns), and external treatment is also very relevant for acne patients. Good skin hygiene is essential and soft, non-soap and/or non-alcohol-based cleansers are best. One substance that is traditionally used in cleansers for acne is Jin Yin Hua (*Lonicera Flos*), which clears toxic heat from the surface.<sup>123</sup> Patients should also be advised to avoid popping pustules or comedones, as this can cause scarring. Additional topicals can be used for post-inflammatory hyper-pigmentation and to reduce oily skin. As with internal formulas, topicals must be appropriate to the presenting pattern.

As we can see, the art of writing a formula for an acne patient lies in evaluating which patterns are present and to what degree. The substances used to treat the patterns will vary based on presentation, accompanying signs and symptoms, age, gender and constitution. All of these must be taken into consideration when developing a formula. This speaks to the importance not only of differentiating the various patterns with which each patient presents, but also of evaluating the degree to which they are seen throughout the various phases of treatment.

Generally speaking, the initial phases of treatment emphasize clearing heat and draining. The middle phase is harmonizing, and at the end stage nourishing herbs are incorporated to treat acne scars and stabilize the skin to prevent recurrence. The treatment of acne can be challenging for both patient and practitioner as there are so many variables: environment, diet, emotions, and the menstrual cycle may all impact progress. However, Chinese herbal medicine has a long and vast clinical history of helping patients with acne to improve not only their skin but overall quality of life.<sup>124</sup>

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<sup>122</sup> Muluye, R. A., Bian, Y., & Alemu, P. N. (2014). Anti-inflammatory and Antimicrobial Effects of Heat-Clearing Chinese Herbs: A Current Review. *J Tradit Complement Med*, 4(2), 93-98. doi:10.4103/2225-4110.126635

<sup>124</sup> Chen, H. Y., Lin, Y. H., & Chen, Y. C. (2016). Identifying Chinese herbal medicine network for treating acne: Implications from a nationwide database. *J Ethnopharmacol*, 179, 1-8. doi:10.1016/j.jep.2015.12.032

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# CHAPTER 11

## CHINESE HERBAL MEDICINE FOR ATOPIC ECZEMA

By Mazin Al-Khafaji, Dr. CM (China), LAc, FRCHM, MATCM; and Marnae Ergil, MA, MS, DACM, LAc; Joseph Alban, MS, LAc

Atopic eczema has been recognized in Chinese medicine since antiquity, and different names have been used through the ages to describe it, based primarily on the way it manifests. During the Qing Dynasty (1644 – 1911), the name “Wind of the Four Crooks” (四委风) was coined to describe its most typical presentation, where the crooks or joints of the limbs are the primary affected areas.<sup>125</sup>

Chinese medicine, when properly applied, offers a powerful method for treating eczema by rapidly reducing inflammation, easing itch, and alleviating general discomfort.<sup>126,127,128,129,130</sup> As discussed in **Chapter I: Introduction to Chinese Medicine Dermatology**, to be effective, treatment must be based upon correct identification of the underlying nature of the condition and the creation of the corresponding herbal formulae to fit each individual presentation. Because there are several different types of eczema (atopic eczema, dyshidrotic eczema, nummular eczema, etc.) it is especially important to understand the specific disease as well as how it is presenting in the individual patient. Chinese herbal medicine can be effective in the treatment of all types of eczema. However, this chapter will focus on atopic eczema.

Atopy refers to a predisposition to a heightened immune response to allergens with development of allergic diseases, including atopic eczema, allergic rhinitis, allergic asthma, and urticaria. Atopic eczema

is the most chronic, relapsing inflammatory disease of the skin, and it may occur at any age. From a Chinese medicine perspective, early onset eczema has a better prognosis than later onset.

### How a Chinese Medicine Practitioner Approaches Atopic Eczema

The cardinal symptom of eczema is itching. Eczematous lesions, including red macular, edematous, vesicular, crusting, excoriation marks, erosion, fissuring, and scaling all give information about the root pattern. In addition to skin signs, it is important to identify the source of the allergen if possible. Additional symptoms, such as digestive, bowels, urine, respiratory, emotions, and others related to the overall wellbeing of the patient must also be explored.

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<sup>125</sup> Al-Khafaji M. (2005). Atopic Eczema: Wind of the four crooks. *Journal of Chinese Medicine*.(77):5-8;

<sup>126</sup> Xu XJ, Banerjee P, Rustin MH, et al. (1997). Modulation by Chinese herbal therapy of immune mechanisms in the skin of patients with atopic eczema. *British Journal of Dermatology*.136(1):54-59; PMID: 9039295.

<sup>127</sup> Chen HY, Lin YH, Wu JC, et al. (2015). Use of traditional Chinese medicine reduces exposure to corticosteroid among atopic dermatitis children: a 1-year follow-up cohort study. *J Ethnopharmacol*.159:189-196; PMID: 25449448.

<sup>128</sup> Cheng HM, Chiang LC, Jan YM, et al. (2011). The efficacy and safety of a Chinese herbal product (Xiao-Feng-San) for the treatment of refractory atopic dermatitis: a randomized, double-blind, placebo-controlled trial. *Int Arch Allergy Immunol*.155(2):141-148; PMID: 21196758.

<sup>129</sup> Sheehan MP, Atherton DJ, et al. (1992). A controlled trial of traditional Chinese medicinal plants in widespread non-exudative atopic eczema. *British Journal of Dermatology*. 126. 179-184.

<sup>130</sup> Sheehan MP, Rustin MH, Atherton DJ. (1992). Efficacy of traditional Chinese herbal therapy in adult atopic dermatitis. *The Lancet*.340. 13-17.)



Erikson, Trevor. "Examination of Lesions."

During a patient visit, the Chinese medicine practitioner closely observes the skin for its general appearance as well as the morphology of lesions. Ancient healers borrowed metaphors from nature to describe clinical presentations. For example, red inflamed skin signals heat; vesicles and crust signal dampness; whilst wind presents as dryness, itching, scales, and so forth (See [Chapter 4: Understanding Lesions](#)).

## Pattern Types of Eczema

Remember, each patient will present differently! Important factors, such as age of onset, age at time of consultation, gender, diet, and emotions must be considered when developing a pattern diagnosis. Additionally, it is essential that the disease diagnosis is correct. Skin conditions can appear similar. However, it is very important that we know exactly what the disease is, as this will inform herb choices. The Chinese medicine practitioner must differentiate specific skin conditions, and then, from the patient's symptoms, determine the presenting pattern, which leads to correct individualized treatment.

The most common factors in the development of atopic eczema are heat, wind, damp, and fire toxins. These metaphorical terms describe real clinical events in a nuanced and coherent way. Chinese medicine uses descriptive terms taken from what is seen in nature to describe presentations on the body. Specific medicinals are then used to focus treatment on one or several of the presenting pathogens.

Common to most patterns of eczema is **heat**. Heat is reflected in red, inflamed macules. The more widespread the macules and the darker the macules, the more heat is present. More superficial heat is expressed in maculo-papular lesions on the surface of the skin. Reading the skin requires that a practitioner closely examine the entire body, looking for the depth of the heat and strength of the heat.

Just as fire in nature engenders **wind**, heat in the body also engenders wind. Skin that is scaly and itchy indicates the presence of wind. As itching is always present in atopic eczema, to some degree, wind is also always present. The strength of the wind is judged by the severity of the itch. In an infant, the severity of the itching is determined by excoriation marks and by the state of sleep. Presentations with more wind will manifest more in the upper body and appear as diffuse erythema of the face, neck, chest, back, and arms with dry scaling. Lesions tend to be poorly defined.

In addition to heat and wind, dampness is often seen to some extent in atopic eczema. While eczema appears as dry skin and emollients or lotions are often recommended as treatment, in fact, elements of damp are seen in all types of eczema. This is because in the imagery of Chinese medicine, pathogenic fluid or damp, inhibits the circulation of healthy body fluids. Skin that is swollen, blistering, crusty, or oozing liquid is highly indicative of damp. Damp eczema manifests as well-circumscribed, edematous lesions with a clear demarcation between normal and eczematous skin. Damp eczema often manifests on the ears, the nipples, the intertriginous region, or the inner thighs and genitals, areas that are conducive to the development of damp conditions. Because damp is a heavy substance, it presents more in the lower body. Not all eczema will show clear signs of damp. However, the dry appearance of eczema indicates that fluid distribution in the body is disrupted and this must be addressed. Because emollients can clog pores and prevent the absorption of moisture, most readily available lotions would not be recommended by a practitioner of Chinese medicine.

When heat becomes excessively aggressive, is left untreated, or is exacerbated by certain pharmaceuticals or emotional states, it can become toxic heat. Skin that is infected with pustules or purulent discharge denotes the presence of toxins. Fire toxins will typically present as sudden and rapid development of the condition. Itching becomes severe and sometimes there is pain or vesicular eruptions. Fire toxins must be considered when there is widespread eczema or exfoliative erythroderma.

Heat, damp, and wind will present to different extents in every patient. The job of the Chinese medicine dermatologist is to read the lesions on the skin and to understand the other presenting signs, such as constipation, urticaria etc., to determine the relative presence of each pathogen. Then, a formula can be written to alleviate the condition. For example, three patients with the diagnosis of atopic eczema may each be diagnosed with a different pattern based upon the manifestation. Each would receive a different formula despite all of them suffering from atopic eczema.

## Chinese Herbal Medicine Treatment of Atopic Eczema

From the chapter on **Herbal Therapies (Chapter 6)**, we know that herbal ingredients are classified according to taste (acrid, bitter, sweet, salty, bland, and sour) and temperature (hot, warm, neutral, cool, and cold), as well as actions and indications. Heat conditions are treated with cold substances, damp conditions are treated with bitter substances that drain and dry, and wind conditions are treated with acrid substances that scatter.

The treatment of eczema requires both topical and internal herbs. In infants, topicals may be sufficient to resolve the condition, but by 1.5 – 2 years, internal herbs will be needed. For babies, a formula may be added to the bath water or a warm compress used. Topical formulas are differentiated by the amount of damp present. In damp conditions, substances to dry and stop itching are used; whereas in dryer conditions, substances to clear heat and stop itching are used.

While not as dramatic as in infants, topicals are still extremely important for children and adults.

The combination of herbs into a formula is a crucial component of treatment. A typical herbal formula is composed of 10-15 separate ingredients each of which is carefully chosen to act synergistically with the other substances. For example, the base formula for eczema due to blood heat with wind might contain 3 substances commonly used together to clear heat, 3 substances to address itch, 1 substance to treat the damp, which is present but not strong, 1 substance to treat or prevent toxic heat, and 2 substances to drain heat and damp through the urine. It is important to be sure that urine and bowels are moving smoothly so that heat and damp have a pathway to exit the body. In many patients, urinary difficulty or constipation is present and fixing this is key to resolving the condition.

Once the base formula is determined, modifications are made depending upon individual circumstances. If there is constipation, this must be addressed. If sleep is disturbed, herbs may be added accordingly. Sometimes itching is so severe that additional 'stop itch' herbs are required. If there is greater damp, then more drying and draining substances may be added. After 10 days or so, the patient should be re-assessed and the skin re-examined. Initial changes may be small, but ideally there is a reduction in itching and less redness. Based upon changes, modifications to the formula are made. In the initial phases of treatment, focus is on strong medicine to counteract the pathogens, reduce itch and inflammation. As treatment progresses, ingredients are changed to address each phase of the healing process. As inflammation reduces, gentler medicine is used to fortify qi and blood, restoring normal function and a healthy equilibrium. This enables stability which leads to a better long-term prognosis.

## Research Studies

One hypothesis of action is that herbs, which in Chinese medicine resolve toxic heat, help control the colonization of *Staphylococcus aureus*, a bacterium closely involved with Eczema flares.<sup>131,132</sup> Additionally, Chinese herbal formulas may help encourage a healthy microbiome which may contribute to long-term improvement.<sup>133</sup> Furthermore, clinical studies have demonstrated that Chinese herbs reduce the allergic mechanisms involved in eczema.<sup>134,135</sup> Chinese herbs have also been shown to desensitize individuals to allergies and sensitivities, which may be involved in stimulating the eczema flare.<sup>136</sup>

One of the earliest clinical trials on atopic eczema in the West was performed at the Great Ormond Street Hospital for Sick Children and The Royal Free Hospital in London, UK. These double-blind, cross over trials showed unambiguous and exceptional responses in severe cases of atopic eczema using Chinese herbs.<sup>137,138</sup> A follow-up showed that a significant number still benefitted with more stable skin one year later. In the adult trial 12 of 17 patients showed 90% reduction, and the remaining five had greater than 60% reduction in clinical scores compared with baseline values; in the children's trial 18 had at least 90% reductions in eczema activity scores, whilst five showed lesser degrees of improvement.<sup>139,140</sup>

Other clinical trials have explored possible mechanisms of action on atopy and allergic disease,<sup>141,142,143</sup> as well as the efficacy of Chinese herbs.<sup>144,145</sup> In a randomized, double blind, placebo-controlled study, 85 children with atopic eczema underwent treatment with Chinese herbs. The authors concluded that the "Traditional Chinese herbal medicine concoction is efficacious in improving quality of life and reducing topical corticosteroid use in children with moderate-to-severe Atopic Dermatitis. The formulation was palatable and well tolerated."<sup>146</sup>

There is no question that this ancient system of medicine has a significant and substantial part to play in managing this increasingly common and debilitating

disease. By not only aiding in control of acute episodes of inflammation that may decrease or even avoid steroid use, TCM can also help restore normal function to eczematous skin so that long term stability and health is achieved and maintained.

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<sup>131</sup> Al-Khafaji M. (2005). Atopic Eczema: Wind of the four crooks. *Journal of Chinese Medicine*.(77):5-8;

<sup>132</sup> Kobayashi T, Glatz M, Horiuchi K, et al. (2015). Dysbiosis and *Staphylococcus aureus* Colonization Drives Inflammation in Atopic Dermatitis. *Immunity*.42(4):756-766; PMID: 25902485.

<sup>133</sup> Sheehan MP, Atherton DJ, et al. (1994). One-year follow up of children treated with Chinese medicinal herbs for atopic eczema. *British Journal of Dermatology*.130. 488-493.

<sup>134</sup> Yang N, Patil S, Zhuge J, et al. (2013). Glycyrrhiza uralensis flavonoids present in anti-asthma formula, ASHMI, inhibit memory Th2 responses in vitro and in vivo. *Phytother Res*.27(9):1381-1391; PMID: 23165939.

<sup>135</sup> Chen Y, Xian Y, Lai Z, et al. (2016). Anti-inflammatory and anti-allergic effects and underlying mechanisms of Huang-Lian-Jie-Du extract: Implication for atopic dermatitis treatment. *J Ethnopharmacol*.185:41-52; PMID: 26976763.

<sup>136</sup> Hon KL, Lau CB, Hui PC, et al. (2013). Anti-allergic drug discovery in China for eczema: current methods and future strategies. *Expert Opin Drug Discov*.8(7):753-767; PMID: 23642103.

<sup>137</sup> Sheehan MP, Atherton DJ, et al. (1992). A controlled trial of traditional Chinese medicinal plants in widespread non-exudative atopic eczema. *British Journal of Dermatology*. 126. 179-184.

<sup>138</sup> Sheehan MP, Rustin MH, Atherton DJ. (1992). Efficacy of traditional Chinese herbal therapy in adult atopic dermatitis. *The Lancet*.340. 13-17.)

<sup>139</sup> Sheehan MP, Atherton DJ, et al. (1994). One-year follow up of children treated with Chinese medicinal herbs for atopic eczema. *British Journal of Dermatology*.130. 488-493.

<sup>140</sup> Sheehan MP, Stevens H, Atherton DJ, Stlere LS, et al. (1995). One-year follow up of adults treated with Chinese medicinal herbs for atopic eczema. *Clinical & Experimental Dermatology* (1995) 20(2). 136-40.

<sup>141</sup> Xu XJ, Banerjee P, Rustin MH, et al. (1997). Modulation by Chinese herbal therapy of immune mechanisms in the skin of patients with atopic eczema. *British Journal of Dermatology*.136(1):54-59; PMID: 9039295.

<sup>142</sup> Chen Y, Xian Y, Lai Z, et al. (2016). Anti-inflammatory and anti-allergic effects and underlying mechanisms of Huang-Lian-Jie-Du extract: Implication for atopic dermatitis treatment. *J Ethnopharmacol*.185:41-52; PMID: 26976763.

<sup>143</sup> Hon KL, Lau CB, Hui PC, et al. (2013). Anti-allergic drug discovery in China for eczema: current methods and future strategies. *Expert Opin Drug Discov*.8(7):753-767; PMID: 23642103.

<sup>144</sup> Ibid

<sup>145</sup> Luo W, Wu C. (2001). Fifty-six cases of stubborn eczema treated by oral administration and topical application of herbal medicine. *Journal of Traditional Chinese Medicine*.21(4) 259-60 20(2).

<sup>146</sup> Hon KL, Leung TF, Ng PC, Lam, MC, Kam WY, Wong Ky, et al. (2007) Efficacy & tolerability of a Chinese herbal medicine concoction for treatment of atopic dermatitis; A randomized, double-blind, placebo-controlled study. *British Journal of Dermatology*.157(2). 357-63.

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Mazin started his studies in Chinese medicine and the Chinese language in 1979. He graduated as an acupuncturist in the UK in 1983 and thereafter continued his studies in China for four years as one of the first Western students to do so. He was awarded the first Sino-British scholarship to study alongside Chinese students at a TCM school and graduated from the College of Traditional Chinese Medicine in Shanghai in 1987 as Doctor of Chinese Medicine. Since his return from China in 1987, he has taught Chinese medicine to new generations of herbal practitioners worldwide and is respected as one of the most inspirational teachers and clinicians in the TCM world today. Mazin is the founder of the International Traditional Chinese Medicine Dermatology Association. To learn more about Mazin's work, please see <https://mazin-al-khafaji.com>.

# CHAPTER 12

## CHINESE HERBAL MEDICINE FOR PSORIASIS

By Trevor Erikson, Dr. TCM

“ Dry lichen (a traditional name for psoriasis) is itchy with dry skin and a discernible border. When scratched white scales are formed.”<sup>147</sup>

- Zhu Bing Yuan Hou Lun (Treatise Regarding the Origin and Symptoms of all Diseases) 610 CE

Psoriasis is a common, chronic, inflammatory skin disorder affecting millions of people world-wide. Major symptoms include scaling, itching, redness, fatigue, burning, and bleeding. Associated systemic diseases are commonly seen and include arthritis, cardiovascular disease, metabolic syndrome, Crohn's disease, and depression. The World Health Organization has declared psoriasis a “serious global problem” and has recommended universal access to an integrative care system that would aim to help lessen the health burden experienced by so many people suffering.<sup>148</sup>

Chinese medicine practitioners have identified and treated psoriasis since at least 610 CE, calling it by various names including: Gan Xian (Dry Lichen), Song Pi Xian (Pine Skin Lichen) and Bai Bi (White Crust). Modern research is confirming the treatments, which are mostly based on herbal medicine, to be safe, effective, and long lasting.<sup>149,150,151,152</sup> As such, Chinese medicine, when properly administered, should be considered an integral option for patients suffering with psoriasis.

### How a Chinese Medicine Practitioner Approaches Psoriasis

The treatment of psoriasis in Chinese medicine is always individualized and based on the whole person, not just the disease, corresponding to the traditional saying, “yi bing tong zhi, tong bing yi zhi” (different diseases, same treatment; same disease, different treatments). The first step is to gather as much information as possible about the psoriasis itself: what the individual lesions look like, age at onset, changes over time, strength of activity, distribution, and patient sensations (itch, pain, burning, etc.). Then, details about general health, such as digestion, urination, thirst, sleep, energy level, and emotional state, are gathered to refine the individualized treatment plan. As discussed in **Chapter 2: Introduction to Traditional Chinese Medicine Dermatology Part 2: Physiology & Pathology**, this is pattern identification, and, as the name implies, it is the process of figuring out the unique pattern, or patterns, contributing to disease.

<sup>147</sup> Translation from the Zhu Bing Yuan Hou Lun (610CE) provided by Mazin Al-Khafaji.

<sup>148</sup> World Health Organization. (2016). Global report on psoriasis. World Health Organization. <https://apps.who.int/iris/handle/10665/204417>

<sup>149</sup> Lin YK, Chang CJ, Chang YC, Wong WR, et al. (2008). Clinical assessment of patients with recalcitrant psoriasis in a randomized, observer-blind, vehicle-controlled trial using indigo naturalis. *Arch Dermatol.*144(11):1457-1464. PMID: 19015420

<sup>150</sup> Zhao WP. (1989). Clinical observation of 206 cases of psoriasis treated with Bian Zheng Shi Zhi of traditional Chinese medicine. *J Tradit Chin Med.* 30: 31-32.

<sup>151</sup> 中医杂志 The Journal of Chinese Medicine (Beijing) 1981 Volume 4 page 22-24

<sup>152</sup> Koo J, Desai R. (2003). Traditional Chinese medicine in dermatology, *Dermatologic Therapy.* 16:98 -105

## Common Pattern Types of Psoriasis

### Hot Blood

In Chinese medicine, the primary pattern contributing to psoriasis is hot blood, especially during the active stages of the disease. This presents as psoriasis that is bright red in color and bleeds easily when scratched. In this pattern, there will be the appearance of new lesions on a regular basis. Systemic signs could include a strong sense of thirst, constipation with a dry stool, restlessness, anxiety, and a darker colored urine.

### Fire Toxins

The stronger the heat, the more aggressive the psoriasis may be. Larger, more deeply tethered plaques, which may be darker red and continue to spread over large portions of the body are synonymous with heat that has risen to the next level to become fire. Think of the element of your oven being set from warming to broil. Such ferocity of heat will cause more damage to the skin and is thought to be a toxin. Fire toxins are the evolution of heat that has become more intense.

### Wind

As heat and fire flame, wind is created. Think of a fireplace, where the heat of the wood burning creates a draft which causes the smoke to rise out of the chimney. In Chinese medicine theory, wind is associated with disease traits that tend to move and change quickly, like profuse scaling and itching. The more easily scales are formed and shed, or the more itching there is, the more wind may be involved.

### Damp Heat

Most psoriasis is found on the extensor aspects of the body, like the elbows, knees, shins, lower back, etc., and is quite dry in nature. But it can also be found in the intertriginous regions, or areas where skin touches skin, like the groin, naval, armpits, and under the breasts. Psoriasis found in these areas tends to be moister and without much scale. There may even be a strong odor. Such psoriasis is due to damp heat, and

it is common for patients with this type of psoriasis to be overweight (have more fluids building up in their body), sweat more easily (especially during sleep), and have looser bowel movements.

### Yin Deficiency and Blood Dryness

When heat and fire burn for a long time, possibly for many years, then a variety of changes may occur. The skin may dry up, becoming cracked and malnourished. Essentially, the yin fluids and the blood becomes depleted. Much like a fire that rages through a house, leaving only ashes in its place, yin and blood deficiency can be caused by too much fire, consuming fluids and resulting in damage to the skin.

### Blood Stasis

Fire and heat may desiccate the fluid nature of the blood, causing it to thicken and not flow well. Psoriasis lesions that are purple in color, have harder to scrape off scales, are hard, leathery, and infiltrated, would fall into this pattern, aptly called blood stasis. We know from modern studies of psoriasis, that the blood vessels found beneath psoriasis lesions tend to be elongated and tortuous, most likely due to inflammation increasing and de-regulating angiogenesis.<sup>153</sup> Psoriasis patients also have an increased tendency to have stiffened arteries, which increases their risk of cardiovascular issues.<sup>154</sup>

It is interesting to note that researchers have been observing links between the above patterns with changes to the blood chemistry. For example, patients with a blood heat pattern of psoriasis often have higher levels of TNF $\alpha$  than patients manifesting with a blood deficiency pattern.<sup>155</sup> Blood stasis patterns are often associated with lower erythrocyte deformability markers, confirming micro-circulation issues.<sup>156</sup>

Often patients will present with a combination of patterns, such that hot blood, wind, and fire toxins are all present. Understanding this and being able to observe it will directly influence treatment, particularly with the design of internally administered herbal medicines.

## Internal (Oral) Treatment for Psoriasis

The most effective treatment for psoriasis in Chinese medicine is with individually tailored herbal medicines. Formulas, or mixtures of herbal ingredients, are prepared in accordance with the patterns manifesting. Formulas work from the inside-out to correct the underlining imbalances causing the psoriasis to manifest. Medicines are classified in relationship to the patterns that they treat, such that there is a category of herbal medicines to 'cool the blood,' 'drain damp heat,' 'scatter wind,' 'quicken the blood,' 'nourish yin fluids,' and so on. The formulation, which may have upwards of 18 ingredients, will be dynamic, changing as the patient changes, following the progression of healing until the skin is stable and clear. (See [Chapter 4: Chinese Herbal Medicine Treatment Methods in Dermatology](#) for more information).

## Topical Treatments for Psoriasis

Using herbal medicines directly on diseased skin is also an important treatment strategy in Chinese medicine. For psoriasis, several herbal medicines, which may be infused in oil, ground into fine powders, or even cooked as water-based washes, are quite beneficial.

Of special note is the extract of the indigo plant, which has been found to be both safe and effective for the topical treatment of psoriasis. Over a five-year clinical observation period, researchers found that 74% of patients experienced a greater than 75% clearing of their psoriasis when using only indigo naturalis topically. The indigo worked regardless of the severity, or amount of body area covered, and no adverse or toxic effects were observed.<sup>157</sup>

While topical medicines can be quite effective in clearing psoriasis, due to the systemic nature of the disease they are not as effective for preventing and stopping the formation of new psoriasis lesions. This is why the combination of both internal, and external herbal medicines are considered the best option for the treatment of psoriasis in Chinese medicine.

## How Long Will Chinese Medicine Treatment Take and What Changes Should Be Expected?

A patient suffering with psoriasis may see positive results within the first 2 to 6 weeks. Some patients even report seeing change within the first day of using topical ointments. A lessening of scale and itching, as well as a flattening of the psoriatic plaque, are often the earliest signs of change. Over time, the emergence of new spots should cease, and healthy skin will emerge where the psoriasis presented. Hyper, or hypo-pigmentation, are a common result of cleared psoriasis and will eventually fade to normal skin pigment, either on their own or assisted by herbal medicines.

In the early eighties, the well-respected practitioner, Zhu Ren Kang, conducted a trial looking at 108 patients treated with oral herbal medicines for psoriasis. He found that 65.7% cleared completely (or had no more than 1 or 2 small lesions remaining), 13.9% cleared by at least 80%, 14.8% of patients saw between 30 to 80% clearing, and only 5.6% saw no change. Upon a 1 to 3 year follow up, after treatment ceased, 63.6% of patients remained above 90% clear.<sup>158</sup> This trial compared only two patterns common to psoriasis, blood heat and blood dryness, and did not consider other patterns, like damp heat. Thus, it may be speculated that the actual rate of clearing, when proper pattern differentiation is performed, may be even higher.

While a cure for psoriasis may not yet be possible, long term remission seems very possible with Chinese medicine and should be seen as good option for the management of this stubborn disease.

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<sup>154</sup> Gisondi P, Fantin F, Giglio M, Valbusa F, Zamboni M, Girolomoni G. (2009). Chronic plaque psoriasis is associated with increased arterial stiffness. *Dermatology.* 218(2):110-3. PMID: 19060461

<sup>155</sup> Bin-zhu C. (1999). Initial research of relation between blood serum TNF $\alpha$  level and syndrome of psoriasis patients. *Chinese journal of basic medicine in TCM.* 5(9): 42.

<sup>156</sup> Chao-ming Z, Yan-fei Z. (1999). Research on hemorheology of psoriatic patients. *Sichuan journal of TCM.* 17(8): 9.

<sup>157</sup> Lin YK, Chang CJ, Chang YC, Wong WR, et al. (2008). Clinical Assessment of Patients with Recalcitrant Psoriasis in a Randomized, Observer-Blind, Vehicle-Controlled Trial Using Indigo Naturalis, Arch Dermatol.144(11):1457-1464. PMID: 19015420.

<sup>158</sup> 中医杂志 The Journal of Chinese Medicine (Beijing) 1981; 4:22-24.

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# CHAPTER 13

## CHINESE MEDICINE NUTRITION IN DERMATOLOGY

By Marnae Ergil, MA, MS, DACM, LAc and Joseph Alban, MS, LAc

“ The people of high antiquity, those who knew the Way, they modeled their behavior on yin and yang, and they complied with the arts and the calculations. ***Their eating and drinking was moderate.*** Their rising and resting had regularity. They did not tax themselves with meaningless work.”<sup>159</sup>

- Huang Di Nei Jing — 100 CE

“ People who practice medicine must first thoroughly understand the source of the disorder and know what has been violated. Then, use food to treat it, and if food will not cure it, afterwards apply drugs.”<sup>160</sup>

- Sun Si Miao — 625 CE

From the earliest writings on Chinese medicine theory found in the Huang Di Nei Jing (100 CE) to the writing of Sun Si Miao (652 CE), all the way to the present, Chinese medicine scholars have recognized that the food we eat, how we eat, and when we eat are all factors in our health and longevity. This is true not just when assessing diseases of the digestive system but also for all other types of diseases, including those diseases that manifest on the skin as dermatological conditions. Even the earliest pharmacopeia, the Shennong bencao jing (Divine Farmers Classic of Materia Medica) contains many items which are essentially food, including shanyao (dioscorea opposite / yam), yiyiren (Coix lachrymae-jobi / Job's Tears), and many more.<sup>161</sup> It is impossible to approach the treatment of disease from a Chinese medicine perspective without also addressing a patient's diet, and Chinese nutritional therapy is a part of every Chinese medicine practitioner's training.

### Digestion is Central to Health

Exciting research into the microbiome shows that diet plays an essential role in the prevention of disease.<sup>162</sup> Additionally, poor diet and dysbiosis has been linked to a host of diseases.<sup>163,164,165</sup>

Since the dawn of the Chinese medical tradition, it has placed an emphasis on the importance of food choices for maintaining health as well as preventing and treating disease. Chinese medicine was ahead of its time in recognizing that the root of many diseases lies in the digestion.

<sup>159</sup> Unschuld P, Tessenow H. (2011). (trans). Huang Di Nei Jing Su Wen: An Annotated Translation of Huang Di's Inner Classic. UC Press, Berkeley, LA, pg. 31

<sup>160</sup> Wilms, S. Nurturing Life in Classical Chinese Medicine: Sun Si Miao on Healing Without Drugs, Transforming Bodies and Cultivating Life. Journal of Chinese Medicine Archive <https://www.journalofchinesemedicine.com/nurturing-life-in-classical-chinese-medicine-sun-simiao-on-healing-without-drugs-transforming-bodies-and-cultivating-life.html> downloaded 9/8/2019

<sup>161</sup> Wilms, S. (2016). (trans.) Shennong bencao jing. Happy Goat Productions, Santa Fe, NM.

## Standard American Diet vs. Spleen and Stomach

In Chinese medicine, the spleen and stomach are the main organs of digestion. They work together to receive and digest food and then to spread the essence of that food (qi) to the rest of the body and organs. The Standard American Diet includes large amounts of protein, unhealthy fats, simple carbohydrates, and sugar. Basically, processed foods such as cheeseburgers, french fries, chicken fingers, chips, and ice cream are heavy, difficult to digest, lack substantial nutrition, and injure the spleen and stomach digestive functions. This type of diet leads to the development of damp, heat, and toxins, all of which contribute to skin diseases. Lack of moderation in portion sizes, overeating, and eating at irregular times additionally contribute to the taxing of the spleen and leads to the development of dampness and stomach heat.

When the function of the spleen is impaired, symptoms tend to include loose stools, flatulence, abdominal bloating, and fatigue. When the function of the stomach is impaired, it is often because there is excessive heat, causing increased hunger, bad breath, a hot body, and constipation. In effect, there is a vicious cycle, eating unhealthy foods causes an increase in heat that leads to increased hunger. Thus, excessive ingestion of these foods will damage both the spleen and stomach and disrupt the balance of yin and yang.

Helping your patient to think about eating from a perspective of balance of temperature, balance of taste, balance of carbohydrate, protein, vegetables, and fruit can go a long way toward improving digestive health, and ultimately, skin health.

## Healthy Diet Is Based in Moderation

As the traditional sources stated, a healthy diet is based in moderation. Overall, food choices should be well rounded and focused on leafy green vegetables, lean proteins, and a moderate amount of healthy carbohydrates. For skin conditions specifically, seafood, such as shrimp and lobster, are traditionally avoided because they are aromatic and heavy. This may cause heat and dampness to accumulate and be pushed out to the skin. Additionally, eating too many citrus fruits can lead to internal heat, as these are warming. Other warming and aromatic foods must be eaten in moderation as they can be too stimulating of heat, pushing it outward to the skin.

One unique aspect to Chinese medicine nutrition is the avoidance of cold and raw foods. In Chinese medicine physiology, warming the food is part of the digestive process. Eating cold and raw food, such as too many salads, makes additional work for the spleen and stomach and over time can damage the digestive system. Avoidance of raw food is particularly important for those with qi deficiency or a lack of qi.



<sup>162</sup> Sonnenburg, E. D., Smits, S. A., Tikhonov, M., Higginbottom, S. K., Wingreen, N. S., & Sonnenburg, J. L. (2016). Diet-induced extinctions in the gut microbiota compound over generations. *Nature*, 529(7585), 212-215. doi:10.1038/nature16504

<sup>163</sup> Lee, Y. B., Byun, E. J., & Kim, A. H. S. (2019). Potential Role of the Microbiome in Acne: A Comprehensive Review. *J Clin Med*, 8(7). doi:10.3390/jcm807098

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<sup>165</sup> Balato, A., Cacciapuoti, S., Di Caprio, R., Marasca, C., Masara, A., Raimondo, A., & Fabbrocini, G. (2019). Human Microbiome: Composition and Role in Inflammatory Skin Diseases. *Arch Immunol Ther Exp (Warsz)*, 67(1), 1-18. doi:10.1007/s00005-018-0528-4

**Table 1. Foods Traditionally Avoided in Skin Conditions**

Type of Foods	Characteristics	Effect on Skin Health
Seafoods: Lobster, shrimp, lamb	Aromatic, hot, and damp	Foods which push the heat outwards towards skin and may cause flare
Citrus fruits	Warm and aromatic	Eat in moderation, as warm fruits can cause too much heat in body
Spicy foods such as chilis, mustards, pepper, garlic	Hot or warm and aromatic	May lead to development of excessive heat and damage function of spleen and stomach
Cream, butter, deep fried foods	Damp	Heavy dairy and fried foods lead to development of damp

**Table 2. Healthy Foods for Skin Conditions**

Type of Foods	Characteristics	Effect on Skin Health
Lean proteins: fish, chicken, turkey	Neutral	Healthy proteins can help provide nutrition for the body. Omega 3 from fish helps many skin conditions
Green leafy vegetables: broccoli, kale, spinach, celery	Cooling and bitter	Leafy green vegetables are very nutritious and help to cool heat. It is important to eat most of the vegetables cooked
Root vegetables: daikon, radish, beets	Cooling and slightly aromatic	Roots vegetables are often slightly aromatic and cooling, helping to reduce heat in the body
Healthy carbohydrates: rice, whole grains	Bland, neutral	Whole grain carbohydrates are a healthy part of a balanced diet
Healthy fats: olive oil, sunflower oil, non-trans fats, Omega 3, Omega 6	Neutral bland	Skin uses healthy fats to build itself and create healthy skin barrier

## Understanding the Food Groups

There are 3 primary food groups that Chinese medicine concerns itself with: carbohydrates, proteins, and fruits/vegetables. Carbohydrates are generally sweet and warm. These two tastes function to boost the spleen and build qi; thus, while an excess of carbohydrates can damage the spleen as they are hard to digest, the elimination of carbohydrates is not optimal. Proteins nourish qi, blood, and essence, but they tend to be quite warm, and in heat conditions, should be limited. Fruits and vegetables are generally cooling, heat-clearing, and moving. Eating whole meals will help balance the foods and aid in digestion.

## Chinese Medicine Nutrition Based Upon Pattern Imbalances

To dive deeper into Chinese medicine nutrition, we will briefly discuss foods that induce and address the imbalances that are most common in skin diseases: heat, damp, and wind.

Just as in Chinese herbal medicine, diets can be customized to address specific pattern imbalances. To properly adjust the diet, a practitioner must understand the patient's individual constitution as well as the patterns that are presenting and causing the condition. The foods suggested to a patient must be appropriate to their presentation, there must be an appropriate balance of tastes and temperatures, and the foods that they need to avoid must be made clear.

Like herbal medicine, foods can be classified by their nature (temperature) and their taste (See [Chapter 4, Tables 1 & 2](#)). Temperature classifications of food are cold, cool, hot, warm and neutral and the five tastes are acrid, sour, bitter, sweet and salty.

### Heat

Heat manifests as red, hot, inflamed lesions. It may also cause constipation, red eyes, a large appetite, rapid metabolism, and bad breath. To treat heat conditions, it might be thought that cold foods would be best. While foods that clear heat are likely to be

cool or cold in nature, as a general rule, raw foods or food ingested while cold, are not considered good for the organs of digestion (the spleen and stomach), as they are more difficult to digest and thus cause more taxation of these organs. Instead of raw foods, cooling foods may be ingested, and methods of cooking utilized to increase the cooling nature of foods. Cooking methods that can increase the cooling nature of foods include blanching, steaming, and pickling. Also, preparing foods with cooling fruits or the use of sprouts can help to increase the cooling nature. The tastes that are specifically associated with cooling foods are salty, sour, and bitter; hence, using these tastes can also be beneficial.

Some foods that might be considered for a heat condition include asparagus, banana, orange, rhubarb, seaweed, leafy green vegetables, watermelon, yogurt, soymilk, and bean sprouts. Salt, soy sauce, and parsley are all cooling condiments. Cooling beverages might include green tea or chrysanthemum and goji tea.

### Toxicity

When heat transforms into toxicity or when there is toxicity due to the ingestion of inappropriate foods or due to the invasion of toxins, then the toxicity must be identified and addressed. Foods such as cucumber, mung bean, tomato, and watermelon are all good general foods to address toxicity. Garlic is also very effective in reducing toxicity. Finally, honey can be used both internally and topically to relieve all kinds of toxicity.

### Damp (especially damp-heat)

Damp is one of the most difficult of the pathogenic factors to treat. Damp is heavy and turbid and tends to linger. Even with strong herbal medicines, if a patient with damp does not make dietary changes, lasting change to their condition will be hard to achieve. Avoiding the Standard American Diet is particularly important as these generally are all damp generating foods.

A patient with damp should eat foods that are drying and damp-transforming. They should consume less

food and focus on light, simple foods with lightly cooked leafy greens. Once the damp is addressed, they will also need to supplement their spleen in order to prevent the development of more damp. In general, warm-bitter, warm-sweet, and warm-acrid flavors are used to address damp.

Especially important foods include millet and rice, especially prepared as congee with damp-dispelling substances such as yiyiren (*Semen Coicis Lachryma-jobi*) and chenpi (*Pericarpium Citri Reticulatae*). Also, adzuki beans, celery, carrots, lemon, arugula, and green or red tea.

## Wind

From a dermatological perspective, the two most important indicators of wind are itching and scaling. Because the nature of wind is to be active and moving, foods that move the qi are generally to be avoided. These would include dispersing foods, such as spices, onions, basil, or mint. Also, foods like lamb, shrimp, and lobster are not especially good in wind conditions. Foods that might be helpful include eggplant, celery, sunflower seeds, and banana.

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## Authors



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she did an internship with Hen Sen Chin in Seattle and continued at the Tianjin College of Traditional Chinese Medicine in Tianjin, China. Since then, she has returned to China numerous times to continue her study. In 2005 she began her study of Chinese Medicine dermatology and in 2017 she was awarded a diploma of Chinese Medicine Dermatology. Marnae is a founding board member of the International Traditional Chinese Medicine Association (ITCMDA). Dr. Ergil is the co-author of the Pocket Atlas of Chinese Medicine, the translator of Practical Diagnosis in Traditional Chinese Medicine and co-translator of Jiao Shu-De's Ten Lectures on the Use of Chinese Medicinals. She has also written and translated numerous articles on Chinese medicine. To learn more about Marnae, please see <http://www.ergilacupuncture.com> and <http://www.longevityccc.com>.

# CHAPTER 14

## THE ROLE OF QIGONG AND TAIJI IN TCM AND TCM DERMATOLOGY

By Ute Engelhardt, PhD and Antje Pohmer, PhD, MSc, MD

### Movement as a Part of Nourishing Life (*Yangsheng* 養生)

The Chinese have been experts at maintaining health and longevity for more than 2,000 years. Their methods, documented in ancient manuscripts, medical textbooks, and self-cultivation manuals, form a multi-layered yet integrated system of personalized health care. Around 300 B.C.E., the practices of “nourishing life” (*yangsheng*) became an important part of medical knowledge in China.<sup>166,167</sup> To maintain and to replenish the vital forces was the major goal.

The Chinese developed techniques to absorb and to guide the qi, including breathing exercises, dietetics, herbal therapies, visualization and contemplation, therapeutic exercise, massage, and sexual behavior. Early medical literature describes these techniques, which also include advice for everyday life including regulations for activities and sleep and for the best way to live according to different seasons and based upon one’s age. These practices served to harmonize the natural functions of the body and to avoid harmful excesses. They created a way to keep the body healthy and vigorous for as long as possible. To prevent illness was an important task for practitioners at all times.

### Qigong and Taiji in TCM

Qigong and Taiji are the two physical therapies known and practiced in Traditional Chinese Medicine today. Since 1950 *qigong* has become a generic term for methods which comprise traditional *yǎngshēng* techniques and the martial arts, including *Taijiquan*.

The word *Qìgōng* 氣功, means to cultivate qi (see **Chapter 1** for a discussion of qi) through exercise and is also known as *Qìgōng liáofǎ* 氣功療法 (Therapeutic Qi Exercise Methods). *Taijiquan* 太極拳, often shortened to *Taiji* (sometimes spelled *Tai Chi*), means literally “fist fighting according to the philosophical principle of *tàijǐ*” or “boxing of the Great Ultimate.”

The intention of both methods is to guide the flow of internal qi and blood and to balance Yin and Yang. To do this, three types of regulation are necessary:

1. Regulation of body posture and movement;
2. Regulation of the breath, and
3. Regulation of meditative concentration or “imaginative force” (*yi* 意).

Initially, for every *Qigong* or *Taiji* exercise, it is essential to develop a firmness and stability in the lower part of the body. This is an important energy center, called the lower *Dantian* (“cinnabar field” or “elixir field”) and is located in the middle of the belly, 2-3 finger widths below the navel. This region is the root from where movement can unfold. Postures or rhythmic and circular movements create shifts, which can dissolve qi stagnation, especially tension, rigidity, and stiffness. Different methods of breathing can either drain excess or supplement deficiency of qi. In a state of mindfulness, the practitioner maintains their focus on

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<sup>166</sup> Hildenbrand, G., *Das Qi kultivieren – die Lebenskraft nähren, west-östliche Perspektiven zu Theorie und Praxis des Qigong und Yangsheng*, 1998, Medizinisch Literarische Verlagsgesellschaft, Klumbach, S. 263-301.

<sup>167</sup> Engelhardt, Ute; Hildenbrand, Gisela; Zumfelde-Hüneburg, Christa (Hrsg.) (2007). *Leitfaden Qigong – Gesundheitsfördernde und therapeutische Übungen der chinesischen Medizin*, Urban & Fischer, Elsevier, München, Jena, 2012.

internal awareness while using cognitive tools such as images. These images can be natural phenomena like trees, mountains, water or clouds. These images have calming effects and can connect the practitioner with the natural forces.

The practice of Qigong and Taiji can be complemented by daily self-massage of acupoints. Both methods have been used successfully in health maintenance and in the treatment of chronic diseases.

## Qigong and Taiji in Dermatology

Functionally, the skin is the most versatile organ of the human body. In its different layers, the skin contains blood vessels and sweat glands to regulate the heat balance of the body. It influences the metabolism and the immune response. Numerous nerves are responsible for sensing pressure, temperature, or pain and through these connections via the nervous system, the skin is connected to and communicates with the brain. In addition, at the very surface of the skin, a water-oil film prevents dehydration and damage from harmful environmental impacts. All in all, the skin is highly effective at adaption and for defense.

Dry and tense skin, skin redness, skin scales, blisters, or vesicles are typical symptoms of skin irritation. As described in earlier chapters, these may occur as a result of disturbance from the exterior by wind and heat or internally emotional disturbance can cause disharmony. Wind and heat condense the body fluids. Over time they may transform into dampness, phlegm, or toxic heat. Chinese medicine describes skin diseases by the presence of general appearance and specific lesions,<sup>168</sup> the duration of the skin diseases, as well as their locations (see **Chapter 2**). Evaluation regarding the severity and the progression of the disease is also performed based on observation and description.

With the therapeutic principles of TCM in mind, the following examples illuminate how the practice of Qigong or Taiji can support the treatment of skin diseases.

In Chinese medicine, the term qi mechanism describes the internal distribution of clear and turbid liquids, as they are regulated by the movement of the qi of the spleen and stomach. The other organs that play a role in the distribution of fluids through the body are the lung, liver, kidney, and heart. In order to function effectively, the qi of the organs has to expand and to contract, to rise and to fall. The third form of a qi gong exercise called the “Eight-Brocade-Exercises” (Baduan jin) addresses the spleen-stomach system and can be very helpful to eliminate dampness and “phlegm” from the body and ultimately from the skin (Illustration 1). Another qi gong exercise called “Six Healing Sounds” (Liuzijue 六子诀) uses sounds and breath to move the qi. Thus, each exhalation is combined with a specific sound which is directly associated with a specific organ



Illustration 1

system. For example, the sound xie of the fourth form is the sound connected with the lungs. This exercise can moisten the lung system and eliminate wind and

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<sup>168</sup> Al-Khafaji, Mazin, Manual “Dermatology,” presented at the TCM-v, Technical University of Munich, 2017.

heat. Depending on the intensity and tone of the voice, excesses and pathogens can be eliminated, or deficiencies can be nourished. As the lung system has a direct relationship to the skin, maintaining the moisture of the lungs also helps to maintain the correct moisture balance of the skin.

According to the theory of Chinese Medicine, the kidney (shen) system is closely connected with the pelvis, lumbar region, knees, and feet. A decline of the qi in this system can lead to weakness and/or instability of these areas of the body, causing pain, discomfort, and difficulty moving. Because the lower dantian has a close connection to the spleen-stomach and to the kidneys, simply placing the hands on the belly (basic Qigong posture) to warm and nurture the dantian can, in and of itself, make a difference.

A deficiency of the kidney yang can be treated by self-massage of the acupuncture points Shènshū (UB-23,



Illustration 2

Kidney Shu 腎輸) and Yǒngquán (KD-1, Gushing spring 涌泉). (Illustration 2).

Deficiency of the spleen-stomach can be addressed with self-massage at Zúsānlǐ (ST 36, Leg Three Miles 足三里). The ability to modify the different qigong and taiji exercises and to adjust them to different levels of training allows one to practice Qigong for almost every health condition.

## Qigong and Taiji as Preventive Methods

Traditionally Qigong and Taiji were practiced as methods for nourishing life. Bearing the traits of Chinese culture, they offered a chance for self-cultivation. The last six decades have shown that there were amazingly few problems regarding the acceptance of these exercises in the West. And nowadays, with new neuroscience research developing a stronger understanding of the interaction between our body and our mind the exercises of qi gong and tai ji are becoming even more widely accepted.<sup>169,170,171</sup>

Qigong and Taiji show significant results in stress-reduction in numerous clinical studies.<sup>172,173</sup>

Participants report pain reduction, increase in mobility and a positive influence on their digestion.<sup>174,175</sup> They also describe enhancement of mood, sleep, and self-confidence. These effects lead to a better quality of life, and in our modern fast-moving time are important for skin patients.

In many countries Qigong and Taiji are part of Mind/ Body Medicine. Both methods integrate physical, psychological, social, and spiritual aspects of human existence. Mindfulness and self-awareness lead to a dialog with the own vital force. With a regular practice Qigong and Taiji facilitate processes of personal growing and healing.

<sup>169</sup> Lingyu, W., "Review of the State of Meditation of Ba Duan Jin influencing the Central Nervous System", 2013, Wushu Science.

<sup>170</sup> Chen, T., Yue, G. H., Y. Tian, C. Jiang, "Baduanjin Mind-Body Intervention Improves the Executive Control Function", 2016, *Frontiers in Psychology*, 7: 2015.

<sup>171</sup> Pohmer, Antje. The Effect of the Eight Brocade Standing Exercises – traditional knowledge and modern science, Master thesis, TUM Munich, 2017.

## Illustrations

1. The third form of the “Eight-Brokat-Exercises” (Baduan jin) is very similar to one of the illustrations of the daoyintu (“Illustration of Guiding and Pulling”), which was excavated in the Mawangdui tomb Nr. 3, in Changsha, Hunan (dated 168 B.C.).
2. Self massage on the acupoint Yǒngquán 涌泉 (KID-1, Gushing spring) historical illustration from the Qing-Dynasty.

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<sup>172</sup> Zou, L., J. E. SasaKi, H. Wang, Z. Xiao, Q. Fang, M. Zhang, “A Systematic Review and Meta-Analysis Baduanjin Qigong for Health Benefits: Randomized Controlled Trials”, *Evidence-Based Complementary and Alternative Medicine*, 2017: p. 4548706.

<sup>173</sup> Huston, P. and B. McFarlane, “Health benefits of tai chi, clinical review”, 2016, *Canadian Family Physician*.

<sup>174</sup> An, B.-C., Y. Wang, X. Jiang et al, “Effects of baduanjin exercise on knee osteoarthritis: a one-year study”, 2013, *Chinese Journal of Integrative Medicine*, vol. 19, no. 2, pp.143-148.

<sup>175</sup> Liu, X.Y., J. Gao, Q. Zhang et al., “Influence of Ba Duan Jin exercise on quality of life of elderly in community”, *Journal of Nursing Care*, 2014, vol. 12, no. 7, pp. 577-579.

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# ADDITIONAL RESOURCES

## Find a Qualified Practitioner in Chinese Medicine

International Traditional Chinese Medicine Dermatology Association

<https://tcndermatology.org>

## Chinese Medicine Organizations

International Traditional Chinese Medicine Dermatology Association

[www.tcndermatology.com](http://www.tcndermatology.com)

World Federation of Chinese Medicine (China)

<http://www.wfcms.org>

International Society for Chinese Medicine (Europe)

[www.tcm.edu](http://www.tcm.edu)

Shen Nong Society (North America)

<https://www.shennongsociety.org>

## Books on Chinese Medicine Fundamental Theory

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Kaptchuk, Ted (2000) The Web That Has no Weaver. Chicago, IL: Contemporary Books

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## Journals

Journal of Chinese Medicine

<https://www.journalofchinesemedicine.com>

Journal of Traditional Chinese Medicine

<http://www.journaltcm.com/>

TCM Quarterly

[https://www.tcmquarterly.com/?fbclid=IwAR33LJVuzUF\\_sZsvqz8w-XI3fGPdyCTfbhdPRKSGtDIA93SHbCLH-eqjnVU](https://www.tcmquarterly.com/?fbclid=IwAR33LJVuzUF_sZsvqz8w-XI3fGPdyCTfbhdPRKSGtDIA93SHbCLH-eqjnVU)

The Lantern

<https://www.thelantern.com.au>

## Podcasts

Learn Skin - <https://www.learnskin.com/podcast>

Purple Cloud - <https://purplecloud.libsyn.com>

Qiological - <https://qiological.com>

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