

Dong Xia Bing Zhi: The Treatment of Winter Diseases in Summer

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After recently graduating from an American acupuncture and Oriental medicine school in New York, I came to China for postgraduate study at the Hunan University of Traditional Chinese Medicine. Hunan is a very green province in the central part of southern China - "the heartland," as they say. Hunan doctors, as well as patients, are still dedicated to using classical theories and treatments. It's fitting that Changsha, the capital of the province, is the city where Zhang Zhong Jing wrote the seminal work the *Shang Han Lun (Treaties on Cold Diseases)* while serving as the governor of Hunan.

Today, more than 2,000 years later, watching doctors treat 30 patients or more each day (and that is only the morning) in the hospital in Changsha is well worth the experience. In addition to the sheer number of patients I am able to see, it also provides a chance to observe Chinese medicine techniques and traditions that tend not to be performed outside of China.

Every day, the hospital is filled with patients seeking relief from many types of diseases with the use of acupuncture, *tuina* and Chinese herbal medicine. Being in a hospital provides an interesting perspective on the country, unlike traveling or even coming to study Chinese. The acupuncture clinic is a social institution. People chat all day about their health, home remedies, life stories, their family, and just about everything under the sun. A strong sense of family fidelity and community still remains. Patients almost always are accompanied by their family or friends. Grandparents sometimes bring in their grandchildren every day for years, and by the same token, grandchildren come with their ailing grandparents. Sometimes, families travel from distant places to be treated by a reputable doctor or even move to Changsha for treatment of their children's diseases. Teachers and students always are eager to share and teach, but also eager to test the knowledge and skill of an American-trained acupuncturist and Chinese medicine practitioner.

As an acupuncture student in New York, many of my teachers told me of the ancient tradition of *dong xia bing zhi* - the treatment of winter diseases in the summer. Recently, I was lucky enough to see this tradition in action.

Dong xia bing zhi utilizes an external plaster, consisting of heating herbs, applied to specific acupuncture points during the *san fu* - the three summer days of the most intense heat - in order to treat diseases of a chronic and cold nature, often occurring in the winter. This tradition of preventative medicine is most often used for diseases that are worse in the winter, such as those of the respiratory system, childhood diseases and those that tend to affect individuals with weak constitutions; as well as for chronic pain, such as arthritis. After three summers of treatment during the three hottest days, the disease should be cured or significantly better.

During each of the *san fu*, the front lobby was filled to capacity with hundreds of (perhaps even a thousand) people of all ages waiting for treatment. They left the hospital, receiving the herbal plaster patch on points such as Lu 1, Ren 22, and UB 13 for asthma; and Ren 4, Du 4, and UB 23

for kidney deficiency, back pain or frequent colds. Many people suffering from arthritis received application on local *ashi* points on the neck, arms or back in addition to nourishing the kidneys with UB 23. Those with digestive complaints used St 36 and Ren 12. Interestingly, these people were not all small and frail; a number of healthy looking men and women also received treatment, mostly for chronic pain.

Every day, patients proud of the local doctors and the culture's medical tradition enjoy telling me the history of their disease and how Chinese medicine has helped. This particularly was true during the *dong xia bing zhi*. One woman in her 60s told me this was her second year coming for treatment and that her bronchitis was much better. And her husband said it had helped his back pain. A mother of a 10-year-old girl informed me this was the third year of bringing her daughter in for treatment. Not only is the child's digestion much better than before, but her frequent winter colds and cough have been reduced to about one episode per year. Another woman in her 60s told me that with intermittent acupuncture treatment, her neck pain is now under control.

In the study of Chinese medicine, we often are taught to avoid excess heating during the summer. However, this is an exception. The treatment is based on the principle "in the summer, nourish yang, in the winter nourish yin." Warm and pungent herbs are used to disperse cold and transform phlegm, warm the lungs, boost the kidney, and secure the root of *qi*. The tradition says the use of warming herbs of these special times allow, us to treat the root of the disease rather than the branch, thereby eliminating the disease or preventing the symptoms before the winter arrives.

Chronic diseases will take a long time to treat. Therefore, patients should come on each of the *san fu* for three consecutive years. This treatment is good for all diseases cold in nature - respiratory diseases such as chronic bronchitis, asthma, chronic cough, emphysema, those easily chilled or catching frequent colds, chronic rhinitis, sinusitis and pharyngitis, in addition to patients with a generally weak constitution. This particularly is true for the elderly and children under the age of 14 who suffer from respiratory diseases. Other diseases include chronic diarrhea and enteritis, arthritis caused by cold dampness (particularly in the elderly), dribbling or frequent urination, numbness, facial paralysis and subsequent to stroke.

Often referred to as cold moxa because of the warming effect of the herbs, although there is no actual heat added; the general formula always consists of warming and pungent herbs. As such, there are many possible formulas for this treatment. The formula used at the Hunan University Hospital was designed by doctors from the internal medicine and acupuncture departments, and includes *rou gui*, *zhi fu zi*, *xi xin*, *chen xiang*, and *zhi cao wu*, in addition to other herbs.

Grind the herbs and add water to make a plaster. On each of the *san fu*, apply a small amount on relevant acupuncture points, which the practitioner can individualize for each patient. If your patient cannot come in on the *san fu*, the plaster can be applied on the day directly before or after the *fu*. Commonly used points are back *shu* points and front *mu* points to tonify specific organs. The use of the Du 4, Ren 4, Ren 6, and UB 23 are especially good for nourishing the kidney, while St 36 and Ren 12 focus on the spleen stomach. Lu 1, Ub 13, Lu 7, and Ren 22 can focus the treatment on the lung diseases. St 36 can be added to tonify *qi*, while *ding chuan* and Du 14 can help in the treatment of asthma and wheezing. GB 34 can be added for diseases of the joints and tendons. The command points, which frequently are used to focus the acupuncture treatment, also should be utilized. For example, St 36 treats digestive diseases, LI 4 diseases of the face, Lu 7 diseases of the lungs and throat, and UB 40 the lower back. Local *ashi* points should be added for pain syndromes.

The procedure is simple, but caution should be shown in the preparation of the plaster and education of patients in self-care. Before applying the plaster, clean the skin. Use gauze or a small bandage to apply an amount slightly smaller than a quarter. Do not overfill, as all the herbal

plaster will fall out. Before applying, the practitioner must inform the patient that these hot herbs may irritate the skin and may cause a burn or a blister. Obviously, the plaster is only for external use, and patients should be instructed never to ingest these herbs, as well as to be careful about washing their hands before eating. The plaster should be left on for four to six hours. The appropriate feeling is a warming and tingling sensation. When the plaster is dry, it can be removed. However, if the patient feels a burning or painful sensation, the application should be removed to avoid irritation.

Any patient with decreased sensation, such as those with diabetes and some elderly individuals, should avoid the treatment, as they might not detect if their skin is being irritated or burnt. If the patient has a skin disease, allergies to the herbs, recent vomiting or significant bleeding, or has other heat conditions, the treatment should be avoided.

After applying the herbal moxa, patients should be instructed not to eat cold, fatty, sweet or greasy food, or spicy pungent foods. If a blister or burn occurs, the patient should keep the area dry and clean, and should not pop the blister. If necessary, they should consult their acupuncturist or physician.

In closing, I would like to acknowledge my teachers for their contributions to this article, including Dr. Chan Jun Jun for providing the formula and Mrs. Fang Yuan for help with translation of the *dong xia bing zhi* guidelines. The following abstract regarding chronic renal failure was conducted during my six months of study at the Hunan teaching hospital.

The influence of Treating Failing Kidney Granule on lipid metabolism of chronic renal failure patients.

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Objective: To investigate the influence of Treating Failing Kidney Granule on total cholesterol blood levels (CHO), triglyceride levels (TRI), low-density lipoprotein cholesterol (LDL-C), blood urea nitrogen (BUN) and serum creatinine (Scr) of the chronic renal failure patients.

Methods: Chronic renal insufficiency patients were divided into the treatment group and control group at random, instructed to take a high quality, low protein and low phosphorus diet. The treatment group took 9 grams of a dehydrated Chinese herbal formula created by the Hunan University Hospital of Traditional Chinese Medicine, called Treating Failing Kidney Granule. The preparation was taken orally three times a day after meals and once at night. The formula includes the herbs of *shu di huang* (20%), *su ye* (20%), *ban zhi lian* (15%) *fu ling* from Yunnan province of China (10%), *huang qi* (10%), *da huang* (10%), *san qi* (2%), *fo shou* (7%), and *fu zi* (4%). The control group took a placebo.

Result: After treatment, BUN and Scr in both groups have reduced dramatically ($P < 0.01$) and Ccr was elevated ($P < 0.01$). Compared to the control group, CHO, TG, LDL-C levels in the treatment group also were reduced ($P < 0.05$).

Conclusion: Treatment with Treating Failing Kidney Granule orally may improve the CRF patient's lipid metabolism disorder and the renal function.

Keywords: Chinese medicine, chronic renal failure, lipid metabolism disorder.

