CMAC223

Session 9

SP, ST & Intestinal Pathologies

- Abdominal pain (Fu tong, 腹痛)
- Abdominal Distension (Fu Zhang, 腹胀)
- Nausea / vomiting (E Xin/Ou Tu, 恶心/呕吐)

Chinese Medicine Department
Session Content

- **2-hour lecture:**
  - abdominal pain
  - Abdominal distension
  - nausea/vomiting

- **1-hour practical tutorial**
  - Practical hints discussion
  - TCM examination skills practice
  - Case study based practical skills
Session Rationale

- The aim of this session is for students to develop theoretical knowledge, critical analysis and a clinical perspective in the TCM assessment, differentiation and treatment strategies for these three disorders.
- Case studies develop critical analysis skills as well as application of theory to practice, further developing clinical skills in interpreting the diagnostic meaning of signs and symptoms including tongue and pulse, in preparation for student clinic.
Learning outcomes

By the end of this session study, you are expected to be able to:

- Define TCM abdominal pain, abdominal distension and nausea/vomiting and compare to bio-meds perspectives.
- Compare & contrast abdominal pain and abdominal distension.
- Describe TCM etiology and pathogenesis of those 3 conditions, and understand the dietary and lifestyle play an role in these three conditions.
- Make accurate diagnosis and differential diagnosis.
- Prescribe acupuncture treatment accordingly.
- Practical: assessment, reasoning & treatment application skills practice.
Abdominal Pain
(Fu Tong, 腹痛)
TCM terminology of Chest & abdomen regions

1. Xin Xia 心下
2. Wei Wan 胃脘
3. Da Fu 大腹
4. Xiao Fu 小腹
5. Shao Fu 少腹
6. Xie Lei 胁肋
7. Xu Li 虚里
Bio-meds Perspectives

- **Pain**: The International Association for the Study of Pain (IASP) defines pain as “…an unpleasant sensory and emotional experience, associated with actual or potential tissue damage, or described in terms of such damage.”

- **Abdominal pain**: Subjective and unpleasant painful sensation in the abdominal region, the area from beneath the epigastrium to the suprapubic margin.

*Abdominal pain discussed here is intestinal in origin, not abdominal pain from gynecological or other conditions. In women, it’s not easy to distinguish whether abdominal pain is of intestinal or gynecological origin, also because they may well overlap.*
Pain assessment

Features of the pain history-”PQRST”

P--provocative factors, palliative factors
Q--Quality (characteristics)
R--region, pattern of radiation, referral
S--severity, intensity (use pain rating scales)
T--Temporal factors: onset, duration, time to maximum intensity, frequency, daily variation

Abdominal pain is a common symptom only in many digestive system diseases (i.e., Acute & chronic enteritis / Gastro-intestinal spasm / Colic/ Indigestion/ Tumour/ Impacted intestines / Pancreatitis/ Cholecystitis / Appendicitis / IBS/ IBD, etc.)

The management is based on the causes including diet, medicine and surgical treatment.

http://www.rch.org.au/kidsinfo/fact_sheets/Abdominal_pain/
Clinic red flagging:
When to see a medical doctor about abdominal pain

Go straight to your doctor or the emergency department of the nearest hospital if you have any of (related to red-flag s&s for CM clinic):

- **severe pain**
- pain lasting for several hours
- pain and/or vaginal bleeding if you are pregnant
- pain in your scrotum if you are a male
- pain and vomiting or shortness of breath
- pain and vomiting blood
- blood in your bowel motions or urine
- pain that spreads to your chest, neck or shoulder
- fever and sweats
- become pale and clammy
- unable to pass urine
- unable to move your bowels or pass gas
Questions for Discussion

Answer the questions below after reviewing bio-meds knowledge:

- What are the common causes of abdominal pain?
- List the types of abdominal pain
- Outline the abdominal pain assessment strategy and demonstrate the abdominal examination skills.
- What type of abdominal pain should be the red-flagged in Chinese medicine clinic and refer to a medical professional in Australia health system context?
CM Perspective: Abdominal Pain (Fu Tong, 腹痛)

Define:

- **Fu** (abdomen): the area from beneath the epigastrium to the suprapubic margin. It is a merging area for the three hand and the three foot yin mai, some hand and foot yang mai and also the Chong mai, Ren mai and Dai mai.

- **Tong**: pain. Fu Tong signifies various disorders from the internal organs (Zang fu), as well as the channels and vessels (Jing luo)

Zang-Fus / Meridians usually involved in Fu Tong:

- Upper abdominal pain: Spleen & Stomach and their meridians
- Lower abdominal pain: SP, ST, Kidney, Bladder, Large/Small-Intestinal, Uterus
- Side abdominal pain: Liver & Gall-Bladder
CM Aetiology and Pathogenesis

- **Invasion** of seasonal **exterior** pathogens $\rightarrow$ **Pain**
  - Leads to Cold, Summer heat and Damp Heat obstruction
- **Improper diet** $\rightarrow$ **Pain** due to obstruction
  - Food Stagnation
  - Spleen fails to T&T
- **Emotional Stress** $\rightarrow$ **Pain** due to obstruction
  - Qi Stag
  - Blood Stag
  - Organ Dysfunction
- **Constitutional** yang deficiency
  - Yang fails to warm the internal organs $\rightarrow$ **Pain** due to malnourishment
- **Miscellaneous**
CM etiology and pathogenesis (cont.)

Abdominal pain arises due to various aetiologies that either:

- Obstruct the qi (full conditions)

- Fail to warm/nourish the organs (empty conditions)
CM Diagnosis of Abdominal Pain

There are some aspects of diagnosis that particularly apply to abdominal pain:

- Nature of pain
- Reaction to pressure
- Reaction to food or drink
- Reaction to bowel movement
- Reaction to activity or rest
- Reaction to heat
- Tongue & pulse signs
- Palpation of the abdomen-location of the pain (umbilical, central abdomen, lateral-lower abdomen, central-lower abdomen)
Key Diagnosis strategy of Abdominal Pain

- **Identification of cold, heat, excess and deficiency:** Based on the aetiology, the affected area, and the characteristics of pain

- **Differential diagnosis of similar disorders:**
  1) Dysentery disorder
  2) Abdominal masses
  3) Intestinal abscess
  4) Hernia disorder
CM Diagnosis of Abdominal Pain

Abdominal pain can be acute and short lasting or chronic and long lasting. It may be distending, vague, stabbing, twisting (colicky) or burning in quality and in different location. key points of analysis

• Acute or Chronic
• Quality of Pain (cold, heat, qi stagnation, blood stasis, Overindulgence or indigestion)
• Location of Pain (hypochondrium, epigastrium, upper or lower abdomen, just below heart…)
CM diagnosis according to abdominal pain nature

- acute (excess);
- chronic/recurrent (excess/deficient);
- stabbing, fixed (blood stasis);
- vague, unfocalized (qi stagnation);
- severe, cramping (cold);
- dull, nagging (qi deficiency);
- worse with pressure (excess);
- worse for eating (excess);
- better with pressure (deficiency);
CM diagnosis according to abdominal pain nature (cont.)

- better with heat (cold);
- better with rest (deficiency);
- better with activity (qi stagnation);
- periodic, accompanied by thirst (heat);
- violent attacks, accompanied by fullness (excess)

- **Digestive or gynaecological**: according to symptoms & signs to differ. Pain due to gynecological problems will be discussed in Chinese medicine gynecology subject.
Identify the aetiology factors of abdominal pain/Fu Tong

(External/internal pathogenic factors, emotional stress and improper diet):

- invasion of external cold;
- internal cold;
- invasion of external heat;
- internal heat, damp heat;
- repressed emotion (frustration, anger, resentment);
- blood stasis (i.e. following abdominal trauma/surgery);
- dietary factors (spoiled food, excess cold, raw food, overeating).
Basic Patterns of Fu Tong

5 patterns (set text P97):

1. Cold invasion
2. Food retention
3. Damp-heat accumulation
4. Qi stagnation & blood stasis
5. Spleen & stomach yang deficiency
<table>
<thead>
<tr>
<th>Condition</th>
<th>Onset</th>
<th>Nature of Pain</th>
<th>Worse with</th>
<th>Better with</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cold invading Stomach</td>
<td>Acute</td>
<td>Severe</td>
<td>Cold</td>
<td>Warmth</td>
</tr>
<tr>
<td>Food retention</td>
<td>Acute</td>
<td>Dull, full feeling which radiates to the epigastrium</td>
<td>Pressure and food</td>
<td>Vomiting</td>
</tr>
<tr>
<td>Damp heat accumulation</td>
<td>Acute</td>
<td>Dull and a feeling of fullness/stuffy sensation in epigastric/hypochondriac area</td>
<td>Pressure and greasy fried foods</td>
<td></td>
</tr>
<tr>
<td>Qi stagnation &amp; blood stasis</td>
<td>Chronic</td>
<td>Distending, migrating or sharp stabbing fixed</td>
<td>At night, with pressure and eating</td>
<td>Slight exercise</td>
</tr>
<tr>
<td>Sp/St yang xu</td>
<td>Chronic</td>
<td>Intermittent, Vague and dull</td>
<td>In the morning and with hunger</td>
<td>Warmth, pressure, meals, rest</td>
</tr>
</tbody>
</table>
CM Treatment of Fu Tong

- **Treatment Principles:**
  - Pain due to obstruction: Regulate the flow of qi, harmonize the blood, dispel the cold, relieve food stagnation, drain accumulation downward to unblock obstruction
  - Pain due to malnourishment: Fortify yang qi to warm internal organs

- **Chinese herbal formula treatment** (optional for students)
  - Acupuncture treatment based on pattern diagnosis (see next slide)
<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
<th>Treatment Principle</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cold invasion</strong></td>
<td>Sudden/urgent onset, severe abdominal pain, alleviated by warmth.</td>
<td>Warm the interior, disperse Cold and stop pain.</td>
<td>CV12, CV8, ST36, SP4, moxa applicable</td>
</tr>
<tr>
<td><strong>Damp Heat</strong></td>
<td>Intermittent/continuous abdominal distension &amp; fullness, aggravated by pressure, stiffing sensation worse in PM &amp; after eating, abdomen feels firm and may look swollen</td>
<td>Clear heat-dampness, relieve stagnation and stop pain.</td>
<td>LI4, LI11, BL25, ST37, ST25</td>
</tr>
<tr>
<td><strong>Food stagnation</strong></td>
<td>Upper abdominal distension &amp; discomfort better for belching/passing wind, aggravated by pressure, worse for overeating</td>
<td>Relieve stagnation, regulate Qi and stop pain.</td>
<td>CV12, ST25, CV6, ST36, ST44</td>
</tr>
<tr>
<td><strong>Qi and Blood Stagnation</strong></td>
<td>Chronic epigastric &amp; abdominal distension worse with stress radiating to the flank (if qi stag dominates) or sharp stabbing and fixed pain if blood stag.</td>
<td>Regulate qi and blood, mobile the blood</td>
<td>CV17, LR3, PC6, CV10, GB34</td>
</tr>
<tr>
<td><strong>Spleen &amp; Stomach Yang deficiency</strong></td>
<td>Intermittent/unrelenting abdominal dull distension that gets progressively worse throughout day, abdomen may look swollen, worse with eating, cold and tiredness, likes pressure and warmth.</td>
<td>Warm the middle-jiao, augment Qi and strengthen the spleen to stop pain.</td>
<td>BL20, BL21, CV12, LR13, CV6, ST36</td>
</tr>
</tbody>
</table>
In-Class Discussion: Practical hints for Fu Tong

- **Outline the rationale** of the selected acu-points in slide 25
- **Practical hints for Fu Tong**
  - Rule out all possible non-medical diagnosis before treatment
  - Red-flags s&s of abdominal pain in CM clinic.
Abdominal Distension
(Fu Zhang/Pi Man)

Distention:-

Definition: unusual stretching of abdominal wall

Abdominal distention can be caused by three factors:

1. Obesity – Abdomen is soft and rounded with a sunken umbilicus.

2. Ascites – Skin is shiny and glistening with an everted umbilicus. Veins are dilated and prominent (more visible in thin, malnourished skin).

3. Obstruction – There may be visible, marked peristalsis; restlessness; lying with knees flexed; grimacing facial expression; and uneven respirations.
CM: Abdominal Distension (Fu Zhang 腹胀 / Pi Man 痞满)

- **Fu Zhang**: refers to a sense of fullness, discomfort, blockage or obstruction affecting the upper abdomen predominantly, or experienced across the abdomen as a whole.

- **Pi Man**: is distention specifically in the epigastric area.

- However, Fu Zhang & Pi Man can be dealt with together as the pathology and treatment strategies are essentially the same.

- Distention is typically described as “bloating”, “fullness” or “discomfort”, referring to a subjective feeling of fullness or pressure within abdomen. It may or may not associated with visible swelling of the abdomen.
CM Mechanism of Abdominal distension

- Abdominal distention may be acute or chronic.
  - Acute-usually due to dietary or external pathogens invasion
  - Chronic-most likely to be present in clinic, there are **4 main mechanisms** that can produce abdominal distension, each of them can occur separately or in combination.

1) Disruption of the qi dynamic, from blockage by a pathogen or weakness of Spleen & stomach qi
2) Fluid retention
3) Constipation
4) Pathogenic accumulation (usually phlegm and/or dampness)
CM Aetiology & Pathologies

Aetiology:
- **Diet-food stagnation**: overeating, irregular eating…
- **Emotions**: Liver Qi stagnation is common & dysfunction of Lungs
- **SP & ST Xu**: the common root cause

Pathogens:
- Both internal and external pathogens contribute

**Constipation**: a common contributing factor in abdominal distension. Constipation and Qi-obstruction can interact as both cause and effect/result.
Key Points of diagnosis

- With constipation/sluggish bowels-excess, blockage to the Qi mechanism
- Worse with pressure-excess
- Worse with/after eating-excess
- Worse when tired or evening-deficiency
- Alleviated by belching/passing gas/ defecation-food stagnation
- Distension with emotional component-Liver Qi stagnation
- Associated with an upper respiratory tract disorder-Lung Qi accumulation
- Associated with puffy eyes, chronic fatigue and loose bowel-Spleen deficiency
CM Differential Diagnosis

Compare and contrast to these TCM diagnosis diseases:

- Abdominal distension (Fu Zang/Pi Man) VS Abdominal pain (Fu Tong)
- Abdominal distension VS Gu Zhang (ascites) /drum-like abdominal distention.
- Abdominal distension (just below the heart-Pi Man/Wan Pi) VS Epigastric Pain (Wei Wang Tong) VS Xiong Bi (chest painful obstruction)
Patterns of abdominal distention

BOX 1.1 PATTERNS

Liver qi constraint
  - qi dynamic disruption
  - with heat
  - with constipation

Food stagnation
  - severe, with damp–heat
  - with insomnia and anxiety
  - with Spleen deficiency

Damp–heat
  - persistent, in the qi level
  - severe distention and discomfort
  - with Spleen deficiency

Phlegm–dampness
  - phlegm–dampness blocking the qi dynamic
  - cold-dampness blocking the qi dynamic
  - phlegm–heat
  - resistant distention with rebellious Stomach qi

Heat and cold mixed

Qi deficiency
  - Spleen and Stomach qi deficiency
  - with deep–lying dampness
  - with damp–heat

Yang deficiency
  - Spleen and Stomach yang deficiency

Yin deficiency
  - Stomach yin deficiency
  - qi and yin deficiency
Abdominal distention due to Liver Qi constraint

- Qi dynamic disruption
- With heat
- With constipation
- Clinical features:
  - abdominal distention: Intermittent or persistent, onset or aggravation has clear relationship to patient’s emotion or stress;
  - Hypochondriac discomfort, ache or tightness
  - Borborygmus, loss of appetite, indigestion, acid reflux, heartburn; Tendency to sluggish stools, or alternating constipation and diarrhoea.
  - Tongue: thin or thick white coat; pulse: wiry
CM treatment for Liver Qi constraint

- **Treatment principles:**
  1) Dredge the Liver and regulate qi,
  2) harmonize the Liver and Spleen/stomach,
  3) restore the qi dynamic and ease distention

- **Chinese herb treatment:** Yu Ju Wan 越鞠丸
- **Acu-treatment:** see slide 37
### Acupuncture for abdominal distention from Liver qi constraint (select from)

<table>
<thead>
<tr>
<th>Point</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CV-12 (zhōng wǎn –)</td>
<td>alarm point of the Stomach, directs Stomach qi downward and harmonizes the Stomach</td>
</tr>
<tr>
<td>LR-13 (zhāng mén)</td>
<td>alarm point of the Spleen, regulates the Liver and Spleen</td>
</tr>
<tr>
<td>ST-25 (tiān shū –)</td>
<td>alarm point of the Large Intestine, regulates Intestinal function</td>
</tr>
<tr>
<td>CV-6 (qì hǎi –)</td>
<td>regulates qi and alleviates distention</td>
</tr>
<tr>
<td>PC-6 (nèi guān –)</td>
<td>connecting point of the Pericardium, regulates the middle burner and relieves constrained Liver qi</td>
</tr>
<tr>
<td>LR-3 (tài chǒng –)</td>
<td>these points regulate Liver qi, calm the Liver and harmonize the Liver and Stomach</td>
</tr>
<tr>
<td>GB-34 (yáng lǐng quán –)</td>
<td>Stomach</td>
</tr>
<tr>
<td>LR-5 (lì gǒu –)</td>
<td></td>
</tr>
</tbody>
</table>

- **In most cases,** points to calm the shén can be added: select one or two from M-HN-3 (yín táng), GV-19 (hòu dǐng), GV-24 (shèn tíng)
- **Blood or yin deficiency,** add SP-6 (sān yín jiāo +), ST-36 (zù sān lǐ –), BL-18 (gān shū +) and BL-23 (shèn shū +)
- **Phlegm or plum pit qi,** add PC-5 (jiān shī –), ST-40 (fēng lóng –) and SP-3 (tài bái)
- **Fat intolerance,** pale or pasty stools and right side hypochondriac pain or distention, add GB-24 (rì yuè), GB-40 (qì yù xū –) and M-LE-23 (dǎn nǎng xué)
- **Ear points:** liver, spleen, stomach, large intestine, gall bladder, abdomen, sympathetic, shén mén
Food Stagnation

- Severe, with damp-heat
- With insomnia and anxiety
- With Spleen deficiency
- Clinical features:

  - Upper abdominal and epigastric distention and/or discomfort, which is relieved following belching and passing gas, and worsens with eating, or eating certain poorly tolerated foods. Distention and discomfort worsen with pressure.
  - Constipation, difficult or irregular stools, or sporadic diarrhea
  - Foul belching, halitosis; copious foul flatulence
  - Acid reflux and heartburn, worse when recumbent
  - Nausea or vomiting
  - T: thick, greasy, white or yellow coat
  - P: wiry and slippery, or slippery and rapid
CM treatment for Food Stagnation

- **Treatment principles:**
  Relieve food stagnation and harmonize the stomach

- **Chinese herb treatment:** Bao He Wan 保和丸 and its variations

- **Acu-treatment:** see slide 40
Acupuncture for abdominal distention from food stagnation (select from)

<table>
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<tr>
<th>Point</th>
<th>Description</th>
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<tbody>
<tr>
<td>CV-12 (zhōng wăn –)</td>
<td>alarm point of the Stomach, transforms food stagnation, strengthens the Stomach and directs Stomach qi downward</td>
</tr>
<tr>
<td>ST-25 (tiān shū –)</td>
<td>alarm point of the Large Intestine, regulates Intestinal function</td>
</tr>
<tr>
<td>CV-6 (qì hǎi –)</td>
<td>regulates qi and alleviates distention</td>
</tr>
<tr>
<td>ST-36 (zū sān lǐ –)</td>
<td>sea point of the Stomach, regulates and strengthens the Stomach, directs Stomach qi downward</td>
</tr>
<tr>
<td>LI-10 (shǒu sān lǐ –)</td>
<td>benefits digestion and regulates gastrointestinal function</td>
</tr>
<tr>
<td>ST-44 (nèi tīng –)</td>
<td>water point of the Stomach, clears heat from the Stomach and alleviates food stagnation</td>
</tr>
</tbody>
</table>

- Nausea, add PC-6 (nèi guān –)
- Spleen deficiency, add SP-6 (sān yín jiāo)
- Abdominal pain, add SP-8 (dì jī –), ST-34 (liáng qiū –) and SP-4 (gōng sūn –)
- Borborygmus, add SP-5 (shāng qiū –)
- Constipation, add ST-37 (shàng jù xū –) and TB-6 (zhī gōu –)
- Ear points: zero point, spleen, stomach, large intestine, small intestine, liver, abdomen, shén mén
Abdominal distention due to Damp-heat

- Persistent, in the qi level
- Severe distention and discomfort
- With spleen deficiency
- Clinical features:
  - Intermittent or continuous abdominal distention and fullness; distention worse in the afternoon or after eating; abdomen feels firm and resistant to pressure, poor appetite, often feeling nausea;
  - Stifling sensation in the chest; heavy sensation in the head and body; may muscle ache
  - Red complexion, greasy skin, restlessness, possible fever or afternoon fever
CM treatment for Damp-heat

- **Treatment principles:**
  - Clear damp-heat from qi level and Spleen and stomach,
  - disperse accumulation, strengthen the Spleen regulate the qi se

- **Chinese herb treatment:** lian pu yin 连朴饮

- **Acu-treatment:** see next slide
Acupuncture for abdominal distention from damp-heat (select from)

<table>
<thead>
<tr>
<th>Point</th>
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<tbody>
<tr>
<td>CV-12 (zhōng wăn –)</td>
<td>alarm point of the Stomach, clears damp-heat, strengthens the Stomach and directs Stomach qi downward</td>
</tr>
<tr>
<td>ST-25 (tiān shū –)</td>
<td>alarm point of the Large Intestine, regulates Intestinal function</td>
</tr>
<tr>
<td>CV-6 (qì hǎi –)</td>
<td>regulates qi and alleviates distention</td>
</tr>
<tr>
<td>ST-36 (zú sān lì –)</td>
<td>sea point of the Stomach, regulates and strengthens the Stomach, directs Stomach qi downward</td>
</tr>
<tr>
<td>SP-9 (yīn líng quán –)</td>
<td>sea point of the Spleen, clears damp-heat</td>
</tr>
<tr>
<td>SP-6 (sān yīn jiǎo)</td>
<td>clears damp-heat, regulates Spleen, Liver, Kidneys</td>
</tr>
</tbody>
</table>

- Nausea, add PC-6 (nèi guān –)
- Abdominal pain, add SP-8 (dī jī –), ST-34 (liáng qiū –) and SP-4 (gōng sūn –)
- Borborygmus, add SP-5 (shāng qiū –)
- Constipation, add ST-37 (shàng jù xū –) and TB-6 (zhī gōu –)
- Ear points: zero point, spleen, stomach, large intestine, small intestine, liver, abdomen, shēn mén
Abdominal distention due to Phlegm-Dampness

- Phlegm-dampness blocking the qi dynamic
- Cold-dampness blocking the qi dynamic
- Phlegm heat
- Resistant distension with rebellious stomach qi
- Clinical features:
  - Relatively severe and persistent abdomen distention that is apparent upon waking. Distention worse for phlegm generating foods, and increased discomfort is evident with palpation of the upper abdomen—firm and resists pressure; stifling sensation in the chest;
  - Belching, acid reflux, morning nausea, may vomit mucus like material; Tongue: swollen or flabby with thick greasy coat; pulse: slippery or wiry or moderate.
CM treatment for Phlegm-dampness

- **Treatment principles:**
  - Dry and transform phlegm-dampness,
  - Restore the qi dynamic and harmonize the stomach

- **Chinese herb treatment:** Er chen tang 二陈汤 or ping chen tang 平陈汤 and their variations

- **Acu-treatment:** see next slide
### Acupuncture for abdominal distention from phlegm-dampness (select from)

<table>
<thead>
<tr>
<th>Acupuncture Point</th>
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</thead>
<tbody>
<tr>
<td>CV-12 (zhōng wǎn -)</td>
<td>alarm point of the Stomach, directs Stomach qi downward and harmonizes the Stomach</td>
</tr>
<tr>
<td>ST-25 (tiān shū -)</td>
<td>alarm point of the Large Intestine, regulates Intestinal function</td>
</tr>
<tr>
<td>SP-15 (dà héng)</td>
<td>strengthens the Spleen and resolves dampness</td>
</tr>
<tr>
<td>LR-13 (zhāng mén)</td>
<td>alarm point of the Spleen, regulates the Liver and Spleen</td>
</tr>
<tr>
<td>ST-40 (fēng lóng -)</td>
<td>connecting and source points of the Stomach and Spleen, these points transform phlegm-dampness and strengthen the middle burner</td>
</tr>
<tr>
<td>SP-3 (tài bái)</td>
<td></td>
</tr>
<tr>
<td>SP-5 (shāng qīū -)</td>
<td>river point of the Spleen, transforms dampness</td>
</tr>
</tbody>
</table>

- Spleen deficiency, add ST-36 (zú sān lǐ -)
- Edema, add ST-28 (shuǐ dào -), SP-9 (yīn líng quán -) and SP-6 (sān yīn jiǎo)
- Sluggish stools or constipation, add TB-6 (zhī gōu -), ST-37 (shàng jù xū -) and ST-41 (jiē xī -)
- Liver qi constraint, add LR-3 (tài chōng) and PC-6 (nèi guān)
- Foggy head, add GB-20 (fēng chǐ) and BL-62 (shēn mài)
- Cold dampness, apply moxa cones to BL-20 (pí shū ▲) and BL-21 (wèi shū ▲)
- Muscle aches and heaviness, add SP-21 (dà bāo)
- Somnolence, add KI-6 (zhào hǎi) and BL-62 (shēn mài)
- Ear points: zero point, spleen, stomach, large intestine, shén mén
Abdominal distention due to Heat and cold mixed

- Is common in clinic presenting; reflects complex mixture of excess, deficiency, heat and cold with consequent disruption to the middle Jiao qi dynamic. The pathology typically involves varying degree of SP yang qi Xu and damp-heat.

- Clinical features:
  - Sensation of blockage, distention, fullness and discomfort in the upper abdomen and, in particular the epigastrium, which, when palpated, fees soft and non-tender; acid reflux, heartburn, belching
  - Poor appetite with indefinable epigastric discomfort
  - Borborygmus with diarrhoea; may mouth ulcers;
  - Tongue: thin with greasy white or yellow coat;
  - pulse: soft, slippery, slightly wiry and possible rapid.
CM treatment for Heat and Cold mixed

- **Treatment principles:**
  - Harmonize the stomach and intestines and direct qi downward; clear damp-heat and strengthen the SP;
  - Restore the qi dynamic and alleviate focal distention

- **Chinese herb treatment:** Ban Xia Xie Xin Tang 半夏泻心汤
- **Acu-treatment:** see next slide
**Acupuncture for abdominal distention from heat and cold mixed (select from)**

<table>
<thead>
<tr>
<th>Point</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CV-12 (zhōng wăn)</td>
<td>these points clear pathogens, direct Stomach qi downward, support the Spleen and harmonize the Stomach</td>
</tr>
<tr>
<td>CV-10 (xià wăn)</td>
<td>alarm point of the Large Intestine, regulates Intestinal function and alleviates distention</td>
</tr>
<tr>
<td>ST-21 (liáng mén)</td>
<td>transport points of the Spleen and Stomach respectively, moderate cupping on these points can help clear damp-heat from the middle burner</td>
</tr>
<tr>
<td>ST-25 (tiān shū)</td>
<td>these points strengthen the Spleen and Stomach, tonify qi and restore the qi dynamic</td>
</tr>
<tr>
<td>BL-20 (pí shū)</td>
<td>these points clear pathogens, direct Stomach qi downward, support the Spleen and harmonize the Stomach</td>
</tr>
<tr>
<td>BL-21 (wèi shū)</td>
<td>alarm point of the Large Intestine, regulates Intestinal function and alleviates distention</td>
</tr>
<tr>
<td>LI-10 (shǒu sān lǐ)</td>
<td>transport points of the Spleen and Stomach respectively, moderate cupping on these points can help clear damp-heat from the middle burner</td>
</tr>
<tr>
<td>LI-4 (hé gǔ)</td>
<td>these points strengthen the Spleen and Stomach, tonify qi and restore the qi dynamic</td>
</tr>
<tr>
<td>ST-36 (zhù sān lǐ + ▲)</td>
<td>these points clear pathogens, direct Stomach qi downward, support the Spleen and harmonize the Stomach</td>
</tr>
</tbody>
</table>

- Marked heat in the upper body, add ST-41 (jiē xī)
- Nausea and dry retching, add PC-6 (nèi guān)
- Marked acid reflux, add ST-44 (nèi tìng)
- Diarrhea, add CV-4 (guān yuán ▲) and BL-25 (dà cháng shū ▲)
- Insomnia and irritability, add PC-7 (dà lìng)
- Ear points: zero point, spleen, stomach, large intestine, abdomen, subcortex, adrenal, shén mén
Abdominal distention due to (SP & ST) Qi Deficiency

- Spleen & stomach qi deficiency
- With deep-lying dampness; aggravation with the primary prescription
- With damp-heat
- Clinical features:
  - Intermittent abdomen distention alleviated by warmth and pressure, worse when eating raw or cold, greasy foods; on palpation abdomen soft and lacking tone; dull abdomen pain relieved by warmth and pressure; patient pale, weak & tired, low voice, clammy and easily breathless; loose stool or sluggish bowel movements, stool are not dry; frequent colds attack;
  - Tongue: pale, or swollen and scalloped with thin white coat
  - Pulse: weak, fine or deficient, or big and weak (esp in right Guan position)
CM treatment for Qi deficiency

- **Treatment principles:**
  - Strengthen the Spleen, tonify and elevate qi
  - Restore the qi dynamic

- **Chinese herb treatment:** Li zhong wan 理中丸 or Bu Zhong Yi Wan 补中益气丸

- **Acu-treatment:** see next slide
Acupuncture for abdominal distention from qi deficiency (select from)

<table>
<thead>
<tr>
<th>Point</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CV-12 (zhōng wăn + ▲)</td>
<td>these points strengthen the Spleen and Stomach, direct</td>
</tr>
<tr>
<td>CV-10 (xià wăn)</td>
<td>Stomach qi downward and alleviate distention</td>
</tr>
<tr>
<td>ST-21 (liăng mén)</td>
<td></td>
</tr>
<tr>
<td>ST-25 (tiān shū)</td>
<td>alarm point of the Large Intestine, regulates Intestinal function</td>
</tr>
<tr>
<td>CV-6 (qì hǎi)</td>
<td>regulates qi and alleviates distention</td>
</tr>
<tr>
<td>ST-36 (zū săn lǐ + ▲)</td>
<td>these points strengthen the Spleen and Stomach, tonify qi and restore the qi dynamic</td>
</tr>
<tr>
<td>LI-10 (shǒu săn lǐ)</td>
<td></td>
</tr>
<tr>
<td>LI-4 (hé gǔ)</td>
<td></td>
</tr>
<tr>
<td>SP-3 (tàì bái)</td>
<td>source point of the Spleen, tonifies the Spleen and transforms dampness</td>
</tr>
<tr>
<td>SP-6 (săn yīn jiāo)</td>
<td>strengthens the Spleen, regulates Liver qi, benefits the Kidneys</td>
</tr>
<tr>
<td>BL-20 (pǐ shū +)</td>
<td>transport points of the Spleen and Stomach respectively, these points strengthen Spleen qi and restore the qi dynamic</td>
</tr>
<tr>
<td>BL-21 (wèi shū +)</td>
<td></td>
</tr>
</tbody>
</table>

- Severe distention, add SP-1 (yīn bái)
- Fluid retention and edema, add ST-28 (shuǐ dào −) and SP-9 (yīn líng quán −)
- Liver qi constraint, add LR-3 (tài chōng) and PC-6 (nèi guān)
- Ear points: zero point, spleen, stomach, large intestine, endocrine, subcortex, adrenai, shén mén
Abdominal distention due to (SP) Yang Deficiency

- Spleen & stomach Yang deficiency
- Clinical features:
  - Intermittent or unrelenting abdomen distention, progressively worse as the day goes on until it may be difficult to bear in the evening, worse when eating raw or cold, greasy foods; May be alleviated by warmth and pressure; distention affects the entire abdomen; abdomen may appear swollen, yet feels soft and cool to the touch;
  - Cold intolerance, cold extremities; fatigue, tiredness & exhaustion;
  - Diarrhea with undigested foods, loss of appetite, anorexia, early satiety; possible scanty urination and edema;
  - Tongue: pale/purple, or swollen and scalloped with thin/thick white coat
  - Pulse: deep, weak & slow
CM treatment for Yang Deficiency

- **Treatment principles:**
  - Warm and tonify the Spleen Yang
  - Restore the qi dynamic

- **Chinese herb treatment:** Fu Zi Li zhong wan 附子理中丸 or Zhi Shi Li zhong wan 枳实理中丸

- **Acu-treatment:** see next slide
Acupuncture for abdominal distention from yang deficiency (select from)

<table>
<thead>
<tr>
<th>Acupuncture Point</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CV-12 (zhōng wǎn +▲)</td>
<td>alarm point of the Stomach, warms and strengthens the Spleen and Stomach, directs Stomach qi downward and harmonizes the Stomach</td>
</tr>
<tr>
<td>ST-25 (tiān shū +▲)</td>
<td>alarm point of the Large Intestine, regulates Intestinal function and directs qi downward</td>
</tr>
<tr>
<td>CV-6 (qì hǎi +▲)</td>
<td>tonifies yang qi and alleviates distention</td>
</tr>
<tr>
<td>CV-4 (guān yuán +▲)</td>
<td>alarm point of the Small Intestine, tonifies source qi, warms yang and regulates qi in the abdomen</td>
</tr>
<tr>
<td>ST-36 (zú sān lǐ +▲)</td>
<td>sea point of the Stomach, warms and strengthens the Spleen and Stomach, tonifies qi and restores the qi dynamic</td>
</tr>
<tr>
<td>SP-6 (sān yīn jiāo +▲)</td>
<td>strengthens the Spleen, regulates Liver qi, benefits the Kidneys</td>
</tr>
<tr>
<td>BL-20 (pì shū +▲)</td>
<td>transport points of the Spleen and Stomach respectively, these points strengthen Spleen qi and restore the qi dynamic</td>
</tr>
<tr>
<td>BL-21 (wèi shū +▲)</td>
<td></td>
</tr>
<tr>
<td>GV-4 (mìng mén +▲)</td>
<td>warms and supports Kidney yang</td>
</tr>
</tbody>
</table>

- A moxa box placed over the abdomen is helpful.
- Edema, add CV-9 (shuǐ fēn ▲) and SP-9 (yīn líng quán ▲)
- Ear points: zero point, spleen, stomach, large intestine, small intestine, abdomen, endocrine, subcortex, adrenal, shén mén
Abdominal distention due to (ST) Yin Deficiency

- Stomach Yin deficiency
- Qi and Yin deficiency
- Clinical features:
  - Chronic, nagging epigastric and upper abdomen distention with a sense of indefinable epigastric discomfort. Distention worse on an empty stomach, at end of the day, at night and when tired.
  - Patient patients tend to run hot and dry, with malar or facial flushing. Sporadic night sweats, sensation of heat in the palms and soles, dry skin, mucous membranes and constipation with dry, pellet-like stools; Poor appetite, indefinable epigastric discomfort, desire for cold and bland foods.
  - Tongue: slightly red and peeled in the center, or red and dry with little or no coat; Pulse: fine and rapid
CM treatment for Yin Deficiency

- **Treatment principles:**
  - Tonify Stomach Yin and moisten dryness

- **Chinese herb treatment:** Yi Wei Tang 益胃汤

- **Acu-treatment:** see next slide
Acupuncture for abdominal distention from Stomach yin deficiency (select from)

<table>
<thead>
<tr>
<th>Point</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CV-12</td>
<td>(zhōng wǎn +) alarm point of the Stomach, nourishes Stomach yin, regulates Stomach qi</td>
</tr>
<tr>
<td>ST-25</td>
<td>(tiān shū) alarm point of the Large Intestine, regulates Intestinal function, alleviates abdominal distention</td>
</tr>
<tr>
<td>CV-4</td>
<td>(guān yuán +) together these points tonify yin systemically, strengthen the Kidneys and regulate qi</td>
</tr>
<tr>
<td>SP-6</td>
<td>(sān yīn jiāo +) regulate qi</td>
</tr>
<tr>
<td>ST-36</td>
<td>(zù sān lǐ +) sea point of the Stomach, strengthens the Spleen and Stomach, and tonifies qi and yin</td>
</tr>
<tr>
<td>BL-21</td>
<td>(wèi shù +) transport point of the Stomach, tonifies Stomach qi and yin</td>
</tr>
<tr>
<td>BL-20</td>
<td>(pí shū +) transport point of the Spleen, tonifies Spleen qi and yin</td>
</tr>
</tbody>
</table>

- Heat, add ST-44 (nèi tǐng −) and KI-2 (rán gǔ −)
- Kidney yin deficiency, add KI-6 (zhào hǎi +) and KI-3 (tài xī +)
- Ear points: zero point, spleen, stomach, large intestine, small intestine, liver, abdomen, shēn mén

+ tonifying
- reducing
▲ moxa
Ω cupping
↓ bleeding
Nausea/ Vomiting

E xin恶心 / Ou Tu呕吐
Bio-meds perspective to Nausea / Vomiting:

- Characteristics
- Possible causes
- Types and diagnosis
- Differentiating diagnosis
- Management
- Useful links:
CM Perspective to: Nausea/Vomiting (Ou Tu)

- Define: it’s called Ou Tu in TCM.

- **Vomiting** is the ejection of the stomach’s contents via the mouth due to a disharmony of the stomach and rebellion of the stomach Qi.

- Vomiting with the ejection of emesis accompanied by sound is called **Ou 吐**; the vomiting without any sound is called **Tu 吐**; Gan Ou (retching) refers to the involuntary effort to vomit accompanied by the sound of vomiting without actual emesis.

- **Ou Tu** is viewed and treated as one disorder as the sound and emesis are usually present simultaneously.
CM Aetiology and Pathogenesis

- Exterior Pathogens
  - Wind, cold, dampness and epidemic pathogens have a direct influence on the Stomach. By hindering the descending function of the St qi, those factors provoke rebellious qi and cause vomiting.

- Improper Diet
  - Raw, cold, greasy or contaminated food injure St and SP= food stagnation.

- Emotional Stress
  - Anger and frustration = Wood attacks the Earth
  - Pensiveness and worry = Spleen Deficiency

- ST and SP deficiency
CM Viewpoints: Nausea/vomiting

**Nausea (e xin, 恶心):** from stomach qi ascending counter-flow (stomach deficiency and cold, heat, dampness, phlegm, food stagnation in stomach).

- Damp or phlegm
- SP/ST involvement

**Vomiting (ou tu, 呕吐):**

- Stomach qi rebelling or other disorders affecting the stomach and can be a sign of hepatic, renal, eurological, biliary and other diseases...
- SP, ST & LR involvement
CM Diagnosis & Differential Diagnosis

A. Identification of excess and deficiency
   ✓ Excess patterns are usually acute onset and severe
   ✓ Deficient patterns chronic and prolonged course

B. Differential Diagnosis of similar disorders
   ✓ Vomiting, gastric reflux and hiccough are disorders of rebellious Stomach Qi
   ✓ See set text p84
Diagnosis based on the contents of emesis

- **clear water** (spleen/stomach empty cold, phlegm, food stagnation, worms);
- **with copious clear phlegm** (cold phlegm patterns, e.g. malaria);
- **vomiting long after eating** or on exposure to cold (stomach full or empty cold, excessive cold, raw food, external pathogen);
- **immediate vomiting of food** or at the sight of food (spleen/stomach heat or heat invading stomach);
- **periodic nausea and vomiting of clear phlegm** (phlegm ascending counter-flow);
Diagnosis based on the character of vomiting

- with fullness and oppression in stomach duct (food accumulation, dietary irregularities, emotions or external pathogen);

- with distension and fullness in the chest and diaphragm (qi deficiency, vomiting from emotional disturbance);

- bitter vomitus (liver/gallbladder fire obstructing or being obstructed by damp heat);

- sour vomitus (food stagnation, phlegm fire, liver qi invading stomach, spleen/stomach qi deficiency); immediate vomiting of water (deep-lying phlegm).
<table>
<thead>
<tr>
<th>Vomit</th>
<th>Differentiation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slight nausea</td>
<td>Deficiency</td>
</tr>
<tr>
<td>With loud sound</td>
<td>Excess</td>
</tr>
<tr>
<td>With low sound</td>
<td>Deficiency</td>
</tr>
<tr>
<td>Soon after eating</td>
<td>Excess</td>
</tr>
<tr>
<td>Some time after eating</td>
<td>Deficiency</td>
</tr>
<tr>
<td>Food</td>
<td>Excess</td>
</tr>
<tr>
<td>Thin fluids</td>
<td>Deficiency</td>
</tr>
<tr>
<td>Sour vomiting</td>
<td>Liv invading St</td>
</tr>
<tr>
<td>Vomiting blood</td>
<td>Heat</td>
</tr>
</tbody>
</table>
Basic patterns:

1) **Excess patterns:**
- Exterior pathogens attacking the stomach
- Food retention
- Accumulation of congested fluids
- Stagnant Liver qi overacting on the stomach

2) **Deficiency patterns:**
- Deficient cold in the spleen & stomach
- Stomach Yin deficiency
<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exterior pathogens attacking the Stomach</td>
<td>Sudden urgent episodes of vomiting &amp; external pathogenic attack S/S with white greasy tongue coat &amp; soft slow pulse</td>
</tr>
<tr>
<td>Food Stagnation</td>
<td>Vomiting with sour and foul smelling vomitus, worse for eating, relieved by vomiting with thick greasy tongue coat &amp; slippery forceful pulse</td>
</tr>
<tr>
<td>Accumulation of congested fluids</td>
<td>Nausea and vomiting of clear fluids, coughing up white or yellow sputum with white greasy tongue coat &amp; slippery pulse</td>
</tr>
<tr>
<td>Stagnant Liver Qi overacting on Stomach</td>
<td>Vomiting of sour and bitter tasting vomitus, relieved by belching with red tongue &amp; thin greasy coat &amp; wiry slippery pulse</td>
</tr>
<tr>
<td>Deficient cold Spleen &amp; Stomach</td>
<td>Recurrent vomiting with clear vomitus brought on by improper diet or tiredness with pale tongue with thin white coat &amp; deep, thready and weak pulse</td>
</tr>
<tr>
<td>Stomach Yin deficiency</td>
<td>Recurrent vomiting with dry heaves with dry red tongue with scanty coat &amp; rapid thready pulse</td>
</tr>
</tbody>
</table>
Acu-Treatment of Nausea / Vomiting

CV12, ST36, PC6, SP4

Plus
the following points according to pattern differentiation
<table>
<thead>
<tr>
<th>Condition</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exterior pathogens attacking the Stomach</td>
<td>+ GB20, LI4 reduce</td>
</tr>
<tr>
<td>Food Stagnation</td>
<td>+ CV12, CV21 reduce</td>
</tr>
<tr>
<td>Accumulation of congested fluids</td>
<td>+ CV17, ST40 reduce</td>
</tr>
<tr>
<td>Stagnant Liver Qi overacting on Stomach</td>
<td>+ LR3, GB34 reduce or even method</td>
</tr>
<tr>
<td>Deficient cold Spleen &amp; Stomach</td>
<td>+ BL20, LR13 reinforce &amp; moxa</td>
</tr>
<tr>
<td>Stomach Yin deficiency</td>
<td>+ SP6, BL 20, BL21 reinforce</td>
</tr>
</tbody>
</table>
In-Class Student Discussion:

- What other acu-prescription for different patterns of Nausea and vomiting have you found in Maciocia, G. (2008) and Maclean, W., Lyttleton, J. & Bayley M. (2018)? In a table format list them out and may compare them to your prescribed text acu-prescription.
Practical Hints

In-class group discussion:

- Outline the rationale of the selected acu-points in slide 47
- Practical hints on set text p88:
  - Vomiting as a physiological defence mechanism
  - Dividing the daily dose of an herbal decoction into multiple doses of smaller quantity is advisable.
  - Referrals should be made as indicated.
Nausea / vomiting
Acupuncture research

- Numerous reports support the use of PC6 (neiguan) for nausea/vomiting. Do some literature research and find a relevant literature review regarding PC6 effectiveness in acupuncture treatment.

- May share your research information with your peer students in practical tutorial or via the LMS forum.
Updated research articles
Evidence-based practice

- A preliminary discussion on rules of clinical acupoint selection of acupuncture for the treatment of chemotherapy-induced nausea and vomiting

https://doi.org/10.1016/S1003-5257(15)30048-9
Break
Practical Tutorial
Practical

- Compare and contrast epigastric pain and abdominal pain.
- Review pain assessment strategy and pain scale.
- Practise TCM abdominal palpation and meridian identification.
Case study

Case 1:
76 years old female presented with intermittent dull pain in the abdomen for many years. The pain used to be dull with preference for warmth and pressure, getting worse by hunger, exertion and stress. She has a few foods intolerance, easily gets bloated and exhausted, and feels fullness or distention in the whole abdomen area especially after meal. Usually loose stool. Pale tongue with white thick coating, deep and slow pulse.
Case study

Case 2:
The patient was a 66 years old male, who came to the clinic due to a sudden onset of periumbilical pain. The pain was aggravated by food and pressure. No nausea or vomiting. Defecation and urination were normal. The tongue coating was thin and greasy, and the pulse deep and taut. Stool examination did not show any parasitic ova.
Case study questions

- What is the **TCM diagnosis** (Disease and Pattern)? Explain your answer.
- What are the TCM treatment principles?
- What TCM treatment methods will you choose to **combine** in the management for the patient’s condition?
- Choose at least five acu-points for your **acupuncture prescription** to treat this condition based on your diagnosis.
- Give the **rationale** for the above acupuncture points & demonstrate your appropriate **needling techniques** and WH&S knowledge and skills.
- Recommend suitable **lifestyle/dietary advice** for this condition based on Chinese Medicine theory.
- What could be the acu-treatment **frequency** for this specific case?
- How might be the **progress** of the patient’s condition after a course of appropriate treatment has been applied?
Practical

- Demonstration and practice of the assessment, diagnosis and treatment for the patient in case study

- Let’s “treat” each other according to the diagnosis and treatment.

* Campus lecturers can provide more case studies for your students’ learning in the practical section.
Main References


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