Professor Wang Gang’s Experience in Treating Chronic Glomerulonephritis

Zhou Enchao 周恩超
National Center of Nephroses, Jiangsu Provincial Hospital of Traditional Chinese Medicine, Nanjing 210029

Prof. Wang Gang, director of the National Center of Nephroses of Jiangsu Provincial TCM Hospital, has engaged for more than 20 years in the treatment of nephroses with traditional Chinese medicine (TCM). The following is a report of Prof. Wang’s experience in the TCM differential treatment of chronic glomerulonephritis.

Cautious Use of Warm-tonification in Deficiency of Qi and Yin

In the 1960s, chronic nephritis was mostly reported as a syndrome due to insufficiency of both the spleen- and kidney-yang. However, since the 1980s, reports on chronic nephritis as such pure yang-insufficiency syndrome have been in the decrease, while that as a syndrome of deficiency of both qi and yin are on the rise. In Prof. Wang’s opinion, there are three reasons responsible for the change. The first is the weak body constitution with insufficiency of qi or deficiency of yin; the second is prolonged illness consuming qi and injuring yin; and the third is the drugs used that injure the kidney-yin. The last is the main reason because drugs such as glucocorticoid hormone, indomethacin, Tripterygium Wilfordii, and diuretics have been widely used in the treatment of glomerulopathy, all of which have the effect of consuming qi and injuring yin. As in chronic nephritis, the main zang-fu organs affected are the spleen and kidney, especially the latter. In the initial stage, the symptoms characterized by insufficiency of qi of the spleen and kidney are mostly seen, such as aching pain along the spinal column, lassitude, edema, poor appetite, dizziness, slow-weak pulse, and pale tongue with white-moist coating. Along with the development of the condition, loss and consumption of yin and essence may lead to such symptoms as dry mouth and throat, dizziness and tinnitus, palpitation and insomnia, feverish sensation in the palms and soles, red tongue proper, and thready pulse. This is the general rule in the development of chronic nephritis. The decline of the functional activity of qi of both the spleen and kidney may bring about the physiological dysfunction of the human body in the formation, transformation, metabolism and discharge of essential substances, resulting in disturbance in qi transformation. Besides, prolonged illness with proteinuria and hypoproteinemia or drug injury may make the yin-essence getting injured, and lead to the syndrome of deficiency of both qi and yin. There are also cases with congenital yin-deficiency body constitution, and they may already have injury of yin at the onset of the disease. Further development of the disease may cause deficiency of yang because of deficiency of yin or insufficiency of qi, leading to deficiency of both yin and yang, and in prolonged cases, resulting in a consumptive disease, with the appearance of retention of noxious water.

Deficiency of qi and yin is the basic pathogenesis of chronic nephritis. Therefore, replenishing qi and nourishing yin should be the fundamental principle in the treatment of this disease. The commonly used prescription contains Taizishen (太子参 Radix Pseudostellariae), Sheng Huang Qi (生黄芪 Radix Astragali), Shan Yao (山药 Rhizoma Dioscoreae), Shan Zhu Yu (山茱萸 Fructus Corni), Zi He Che (紫河车 Placenta Hominis), Che Qian Zi (车前子 Semen Plantaginis), Yi Yi Ren (薏苡仁 Semen Coicis), Mu Dan Pi (牡丹皮 Cortex Moutan), and Yi Mu Cao (益
Use of Heat-clearing Method for Acute Attack Due to Pathogenic Wind and Heat Blending in the Throat

Chronic nephritis is often accompanied with infection of the upper respiratory tract, tonsillitis, and pharyngitis, which, in turn, contribute to the inducement of recurrence and aggravation of chronic nephritis. Therefore, timely treatment of infection of the upper respiratory tract is an important means to prevent the condition from further development. Pathogenic wind and heat blending in the throat or accumulated pathogens can go along the foot Shaoyang Channel to attack the kidney. In treating chronic nephritis, Prof. Wang always pays attention to the treatment of the symptoms in the throat area. In clinic, he would observe the throat for each such patient, and usually divides nephritis into two types based on the urgency of the throat symptom, nature of the swelling and pain, and general symptoms, i.e. the wind-heat type and the yin-deficiency type with most cases being the first type. Clinically, the wind-heat type may be characterized by abrupt onset, swelling and pain in the throat, swelling of the tonsils, sometimes accompanied with fever, edema of the face and limbs, proteinuria or hematuria, red tongue proper with thin-white coating, and superficial-rapid pulse. The yin-deficiency type is often characterized by severe swelling and pain and dryness in the throat, which is red or dark-red in color, accompanied with dizziness and vertigo, lassitude of the back and knees, edema, proteinuria or hematuria, red tongue proper with little coating, and thready-rapid pulse. The basic prescription developed by Prof. Wang for nephritis is based on the differential treatment of throat, which contains: Jin Yin Hua (金银花 Flos Lonicerae), Chi Shao ( 赤芍 Radix Paeoniae Rubra), Zhi Jiang Can (制僵蚕 Bombyx Batryticatus Preparata), Chan Tui ( 蝉蜕 Periostracum Cicadae), Quan Xie ( 全蝎 Scorpion), Huang Qin ( 黄芩 Radix Scutellariae), and Bai Hua She She Cao ( 白花蛇舌草 Herba Hedyotis Diffusae). For the wind-heat type, Lian qiao ( 连翘 Fructus Forsythiae), Chong Lou ( 重楼 Rhizoma Paridis), She Gan ( 射干 Rhizoma Belamcandae), Shan Dou Gen ( 山豆根 Radix Sophorae Tonkinensis), and Niu Bang Zi ( 牛蒡子 Fructus Arctii) can be added. For severe toxic heat cases, Li Zhi Cao ( 荔枝草 Herba Salviae Plebeiae), Feng Wei Cao ( 凤尾草 Herba Pteridis Multifidae), and Ban Zhi Lian ( 半枝莲 Herba Scutellariae Barbatae) can be added. For the yin-deficiency type, Xuan Shen ( 玄参 Radix Scrophulariae), Jie Geng ( 杠杆 Radix Platycodi), Mai Dong ( 大戟 Radix Ophiopogonis), Nan Sha Shen ( 南沙参 Radix Adenophorae), and Sheng Gan Cao ( 生甘草 Radix Glycyrrhizae) can be added.

The Methods for Treatment of Obstinate Nephritis by Eliminating Blood Stasis, Phlegm, Wind, and Stagnancy

In treating obstinate nephritis, Prof. Wang often aims at the following aspects.

1. Promoting blood circulation by removing blood stasis (differential treatment of blood stasis): Blood stasis is closely related with nephroses. In clinic, the patient under this condition is usually found to have such symptoms as general edema, scanty urine, slight edema in the face and limbs but persistent enlarged abdomen, dull-dark complexion, thready or thready-hesitant pulse, and dark-red tongue proper sometimes with petechiae. In Prof. Wang’s view, nephritic edema is related to the lung, spleen and kidney, but obstruction of the liver collaterals by blood stasis can never be ignored. Therefore, Prof. Wang would prescribe the treatment aimed at the blood system instead of the qi system, which always works wonderfully. Clinically, the modified Taohong...
Siwu Tang (桃红四物汤 Decoction of Four Ingredients Including Peach Kernel and Safflower) is often used. The ingredients are Tao Ren (桃仁 Semen Persicae), Hong Hua (红花 Flos Carthami), Dang Gui (当归 Radix Angelicae Sinensis), Chi Shao (赤芍 Radix Paeoniae Rubra), Gou Qi Zi (枸杞子 Fructus Lycii), Dan Fu Zi (淡附子 Radix Aconiti Lateralis), Yi Mu Cao (益母草 Herba Leonuri), Jiu Chao Niu Xi (酒炒牛膝 parched Radix Achyranthis Bidentatae steeping in alcohol), San Qi (三七 Radix Notoginseng), Dan Shen (丹参 Radix Salviae Miltiorrhizae), and Ze Lan (泽兰 Herba Lycopii). Besides, Dahuang Zhechong Wan (大黄 虫丸 Bolus of Radix et Rhizoma Rhei and Eupolyphagaseu Steleophaga) or animal drugs for removing blood stasis can be used in combination.

2. Resolving phlegm and removing dampness (differential treatment of phlegm): “Strange disease is often related to phlegm”. In clinic, such cases may have sallow complexion, dull-dark eyelid, edema, slippery pulse, obesity, headache, frequent dizziness, nausea, insomnia, palpitation, and cold pain and numbness in the waist and lower limbs. Such cases usually have a long duration of illness, and persistent proteinuria or edema, or vitreous degeneration, fibroid degeneration, stromal proliferation and sclerosis shown by the pathological examination of the kidney. In these case, phlegm can be considered responsible for all the above symptoms and pathological changes. The treating principle should be resolving phlegm and softening hard masses, and removing dampness and blood stasis to promote blood circulation. Prof. Wang usually uses the modified Er Chen Tang (二陈汤 Two Old Drugs Decoction), and drugs such as Ban Xia (半夏 Rhizoma Pinelliae), Chen Pi (陈皮 Pericarpium Citri Reticulatae), Fu Ling (茯苓 Poria), Zhi Shi (枳实 Fructus Aurantii Immaturus), Ju Luo (橘络 Retinervus Citri Reticulatae Fructus), Kun Bu (昆布 Thallus Eckloniae), Mu Li (牡蛎 Concha Ostreae), Hai Zao (海藻 Sargassum), and drugs for promoting blood circulation. Clinically, there may often be blockage by both phlegm and blood stasis, therefore, treatment should be given for removing both phlegm and blood stasis to promote blood circulation.

3. Eliminating pathogenic wind to remove obstruction in the channels (differential treatment of wind): Pathogenic wind is a very important causative factor for various diseases. It is flowing and changeable, and tends to mix with other pathogenic factors to attack the body. In clinic, it is not difficult to give differential treatment for chronic nephritis with edema due to invasion of pathogenic wind. But treatment based on differentiation of wind is often ignored in treating obstinate chronic nephritis. Prof. Wang holds that those cases seen in clinic with repeated attacks of obstinate nephritis usually have general edema affecting the head, face, chest, waist and back; cases with proteinuria have large amount of foam seen in the urine; and cases with hypertensive chronic nephritis have dizziness and vertigo, convulsion of the fingers (the sign of stirring of the liver-wind), all this can be considered as the result of the pathogenic wind. For these cases, if the routine treatment is ineffective, Prof. Wang would use Chinese drugs such as Fang Feng (防风 Radix Saposhnikoviae), Chuan Xiong (川芎 Rhizoma Chuanxiong), Tian Ma (天麻 Rhizoma Gastrodiae), Gou Teng (钩藤 Ramulus Uncariae cum Uncis), Qing Feng Teng (青风藤 Caulis Sinomenii), Quan Xie (全蝎 Scorpion), Zhi Jiang Can (制僵蚕 Bombyx Batryticatus Preparata), and Di Long (地龙 Pheretima), and often obtains satisfactory therapeutic results.

4. Removing stagnation of pathogenic dampness and phlegm (differential treatment of stagnancy): Patients with chronic nephritis, who have dropped the hormone treatment because of the retention of protein in the urine, or because of its ineffectiveness and obvious side effects, often have such symptoms as general weakness and lassitude, decreased food intake, drug-induced Cushing’s syndrome, amenorrhea in women, thready pulse, and white-sticky tongue coating. In Prof. Wang’s view, long-term administration of “pure-yang” drugs would surely disturb the ascending-descending, and absorbing-discharging functions of the human body.
In the initial stage, the qi system may be injured, leading to stagnation of qi, and later the blood system may be effected, turning qi, blood, and essence into stagnated damp-phlegm blocking the channels and collaterals. Therefore, the TCM treating principle for such cases should be removing retention of dampness and phlegm. The basic prescription includes Xiang Fu (香附 Rhizoma Cypéri), Cang Zhu (苍术 Rhizoma Atractylodis), Yi Yi Ren (薏苡仁 Semen Coicis), Jiang Ban Xia (姜半夏 Rhizoma Pinelliae prepared with ginger decoction), Chen Pi (陳皮 Pericarpium Citri Reticulatae), Chao Zhi Zi (炒梔子 parched Fructus Gardeniae), Tao Ren (桃仁 Semen Persicae), Hong Hua (紅花 Flos Carthami), Chuan Xiong (川芎 Rhizoma Chuanxiong), Shen Qu (神曲 Massa Fermentata Medicinalis), Fu Ling Pi (茯苓皮 Cortex Poria), He Huan Pi (茯苓皮 Cortex Albiziae), Lu Gen (芦根 Rhizoma Phragmites), and Bai Hua She Cao (白花蛇舌草 Herba Hedyotis Diffusae).

**Focus on Differentiation of Urine to Distinguish the Pathogens**

Abnormal change of urine may often provide clues to a disease, which is significant for diagnosis. In the clinical practice, Prof. Wang would differentiate the cold from the heat type of nephritis according to the color and transparency of urine. He often refers to what is described in *Classic of Inspection* (望诊遵经) that “yellow urine indicates heat in the lower abdomen; white urine indicates cold in the lower abdomen; turbid brown and scantly urine indicates heat of the excess type in the lower jiao; and clear, white and profuse urine indicates cold of the insufficiency type in the lower jiao”. He holds that cases of nephritis having turbid urine with sediments belong to the category of insufficiency of qi with dampness. He also differentiates deficiency from excess type of nephritis according to the quantity of urine. He thinks that decreased quantity of urine often indicates invasion of exopathogens and disturbance of qi transformation of the lung, spleen, and kidney, leading to interior retention of water dampness; dysuria accompanied with frequent, urgent and painful urine may be the result of “kidney-deficiency with heat in the bladder” or “damp-heat in the Liver Channel”; scanty urine or decreased specific gravity of urine due to renal insufficiency seen in patients with chronic nephritis in the late stage may often be caused by failure of the kidney-qi and kidney-primordial-qi, and injury of both yin and yang. Proteinuria may be caused by many factors such as injury of the kidney by pathogenic factors (namely pathogenic wind, water-dampness, damp-heat, and blood stasis); deficiency of both the spleen and kidney; and disturbance of qi transformation of the lung, spleen, and kidney. Patients with hematuria of a short duration and with persistent bright-red urine are often due to the burn of the kidney collaterals by heat of the excess type; those with slow development of hematuria, scantly in quantity, dull-red in color, and with intermittent attacks accompanied with symptoms of yin-deficiency, belong to the type of the consumption of the kidney-yin and interior heat due to yin-deficiency; while those patients with obstinate hematuria of unfixed quantity, pink-red color, and severe upon exertion, are often due to qi-insufficiency of the spleen and kidney, with qi failing to control the blood. As to cylindruria, Prof. Wang considers it to be caused by injury of the kidney-qi, and downward flow of assembled yin essence. Generally, transparent granular cylindruria often belongs to the type of deficiency and consumption of the kidney-qi, interior retention of turbid dampness or damp-heat; erythrocytic cylindruria is often due to blockage of blood stasis in the kidney; leukocytic cylindruria often due to injury of the kidney by toxic heat; while waxy wide cylindruria often due to failure of the kidney-qi. Leukocytic urine often indicates invasion of exogenous pathogenic factors (wind-cold, wind-heat, skin diseases such as carbuncles and furuncles, and tonsillitis), or downward flow of damp-heat.

For those with simple proteinuria and with no attacks by pathogenic factors of the excess type, or without any symptoms, the treatment can be given mainly for strengthening the body resistance by means of invigorating the spleen and nourishing the kidney, and reinforcing qi and inducing astringency. For
cylindruria, the TCM treatment is given mainly for strengthening the body resistance and eliminating pathogenic factors. In the treatment, attention should be paid to reinforcing the primordial qi of the kidney. To eliminate pathogenic factors, drugs such as Mao Zhua Cao (猫爪草 Radix Ranunculi Ternali), Jin Qian Cao (金钱草 Herba Lysimachiae), and Lu Lu Tong (路路通 Fructus Liquidambaris) are often used.

Cao (白花蛇舌草 Herba Hedyotis Diffusae), Ya Zhi Cao (鸭跖草 Herba Commelinae), Long Kui (龙葵 Herba Solani Nigri), and Gui Jian Yu (鬼箭羽 Ramulus Euonymi Alatae). If in the urine there are simultaneously protein, erythrocytes, leukocytes, and casts, the treatment based on differentiation is usually given to eliminate the pathogenic factors and leukocytes, followed by strengthening the body resistance and eliminating pathogens, and clearing away casts and checking erythrocytes, and finally to treat proteinuria by strengthening the body resistance. Prof. Wang points out that differentiation for glomerulonephritis should be based first on the entire disease condition and then on analysis of urine and the substantial components in it.

Compatible Application of the Insect Drugs and Lei Gong Teng (雷公藤 Tripterygium wilfordii) for Treatment of Obstinate Proteinuria

The decrease or increase of protein in the urine are often the indications of alleviation or aggravation of chronic nephritis. Clinically, there is often the case that protein may persistently remain in the urine after all the symptoms have disappeared; this may be due to deficiency of the lung, spleen, and kidney, and unsuccessful elimination of damp-heat, turbid phlegm, and stagnancy. To solve this problem, Prof. Wang would use routine methods combined with insect drugs and Lei Gong Teng (雷公藤 Tripterygium wilfordii) preparation. The following insect drugs are often chosen: Xi Shuai (蟋蟀 cricket, Scapipedus) and Lou Gu (蝼蛄 mole cricket, Gryllotalpa), both having the effects of inducing diuresis and removing damp-heat, and good for obstinate proteinuria accompanied with edema; Chan Tui (蝉蜕 Periostracum Cicadae) and Jiang Can (僵蚕 Bombyx Batryticatus), both having the effects of dispelling wind to arrest convolution, removing obstruction in channels and resolving mass, and good for proteinuria or hematuria accompanied with acute or chronic pharyngitis and tonsillitis; Di Long (地龙 Pheretima) and Wu Shao She (乌梢蛇 Zaoys), both having the effects of dispelling pathogenic wind and removing obstruction in channels, often added by...
Prof. Wang to the prescription for treating obstinate proteinuria; Quan Xie (全蝎 Scorpio) and Wu Gong (蜈蚣 Scolopendra), both having the effects of dispelling wind to relieve spasm, and removing obstruction in channels, and detoxicating, which are remarkable in removing blood stasis because they are quickly distributed on the body, and often used in clinic to treat chronic nephritis due to blood stasis, or obstinate nephritis. When combined with qì-reinforcing drugs, they can enhance the blood flow; and when combined with yín-nourishing drugs, they can reduce the damage of yìn caused by drugs pungent and dry in nature. Shui Zhi (水蛭 Hirudo) and Di Bie Chong (地鳖虫 Eupolyphaga seu Steleophaga), both having the effects of removing blood stasis and clearing and activating channels and collaterals, or Dahuang Zhe Chong Wan (大黄鳖丸 Bolus of Rhei and Eupolyphaga), are often compatibly used by Prof. Wang in the treatment of prolonged edema for which there is no other effective treatment, and obstinate proteinuria. Since the above-mentioned insect drugs contain a high quantity of protein, and decocting or baking them may easily damage the effective components, they are often ground into powder and put into capsules for use. When treatment with hormone does not give obvious therapeutic effect, Lei Gong Teng (雷公藤 Tripterygium wilfordii) preparation is often compatibly used. Due to this drug’s severe toxic side effect, Prof. Wang often uses Compound Lei Gong Teng Preparation, containing Lei Gong Teng (雷公藤 Tripterygium wilfordii), Sheng Huang Qi (生黄芪 Radix Astragali), Shan Zhu Yu (山茱萸 Fructus Corni), and Gan Cao (甘草 Radix Glycyrrhizae), called Shenyanying Keliji (肾炎灵颗粒 Miraculous Granules for Nephritis), effective for strengthening the spleen and kidney, nourishing both qì and yín, detoxicating, and promoting circulation in channels. It has been proved by both the clinical practice and experiment that Shenyanying Keliji has the similar therapeutic effects as Lei Gong Teng Preparation, but it is slow in effect at the beginning; however the effect would be greatly higher when taken continuously, especially good for various chronic glomerulonephritis, and cases insensitive to hormones. This compound preparation has a better effect than simple Lei Gong Teng preparation in improving general symptoms, raising plasma albumin, improving disturbance of lipid, and reducing the toxic side effects of Lei Gong Teng; on the whole it has the effect of strengthening the body resistance to eliminate pathogenic factors.

(Translated by Wang Xinzhong 王新中)