Review

A Survey of Treatment of Diabetic Complications with Chinese Drugs

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According to the TCM theory, diabetes is characterized in the initial stage by deficiency and consumption of qi and yin fluid and excessive dryness-heat; in the middle stage by deficiency of both qi and yin, and obstruction of channels and collaterals; while in the late stage, by various complications due to consumption and loss of qi and yin, imbalance of yin and yang and stagnation of both phlegm and blood stasis, which may result in failure of the kidney and serious injury of the channels and collaterals and yang-fu organs. In recent years, there are lots of reports concerning Chinese-drug treatment of diabetes with satisfactory therapeutic results. The following is a survey of treatment of diabetic complications with Chinese drugs.

Diabetic Peripheral Nerve Lesions

Based on the TCM differentiation, Wang Lingxia divided diabetic peripheral lesions cases into 3 types:

1) The type of deficiency of both qi and yin, and stagnation of pathogenic wind-cold (15 cases). Cases of this type were treated for replenishing qi and nourishing yin, and eliminating pathogenic wind and removing stagnation.

The drugs used were:

Huang Qi (黄芪 Radix Astragali) 15g
Tai Zi Shen (太子参 Radix Pseudostellariae) 10g
Sheng Di (生地 Radix Rehmanniae) 15g
Hua Fen (花粉 Radix Trichotheanthis) 20g
Dan Shen (丹参 Radix Salviae Miltiorrhizae) 20g
Niu Xi (牛膝 Radix Achyranthis Bidentatae) 12g
Pian Jiang Huang (片姜黄 Rhizoma Wenyujin Concisum) 10g
Mu Gua (木瓜 Fructus Chaenomelis) 30g
Ji Xue Teng (鸡血藤 Caulis Spatholobi) 30g

Wei Ling Xian (威灵仙 Radix Clematidis) 15g
Qiang Huo (羌活 Rhizoma seu Radix Notopterygii) 30g
Du Huo (独活 Radix Angelicae Pubescents) 30g
Quan Xie (全蝎 Scorpion) 3g.

2) The type of deficiency of both the liver and kidney, and obstruction of collaterals by blood stasis (10 cases). Cases of this type were treated for nourishing the liver and kidney, and promoting blood circulation by removing blood stasis from the collaterals.

The drugs used were:

Gou Ji (狗脊 Rhizoma Cibotii) 15g
Huang Jing (黄精 Rhizoma Polygonati) 15g
Niu Xi (牛膝 Radix Achyranthis Bidentatae) 12g
Su Mu (苏木 Lignum Sappan) 10g
Dan Shen (丹参 Radix Salviae Miltiorrhizae) 30g
Chuan Xiong (川芎 Rhizoma Chuanxiong) 10g
Wu Shao She (蜈蚣 Scolopendra) 2 pieces
Quan Xie (全蝎 Scorpion) 6g
Di Long (地龙 Pheretima) 8g
Wu Gong (蜈蚣 Scolopendra) 2 pieces
Huang Qi (黄芪 Radix Astragali) 20g
and Shou Wu Teng (首乌藤 Caulis Polygoni Multiflori)30g.

3) The type of yang insufficiency of both the spleen and kidney, and stagnation of pathogenic cold in the channels (11 cases). Cases of this type were treated for warming yang to tonify the kidney, and removing obstruction from the channels to stop pain.

The drugs used were:

Huang Qi (黄芪 Radix Astragali) 30g
Zhi Fu Zi (制附子 Radix Aconiti Preparata) 6g
Rou Gui (肉桂 Cortex Cinnamomi) 8g
Niu Xi (牛膝 Radix Achyranthis Bidentatae) 15g
Wu Shao She (蜈蚣 Scolopendra) 6g
Wu Gong (蜈蚣 Scolopendra) 3 pieces
Di Long (地龙 Pheretima) 10g
Li Zhi He (荔枝核 Semen Litchi) 10g
Dang Gui (当归 Radix Angelicae Sinensis) 12g
Dan Shen (丹参 Radix Salviae Miltiorrhizae) 30g
Mu Gua (木瓜 Fructus Chaenomelis) 30g
Chuan Xiong (川芎 Rhizoma Chuanxiong) 10g.

Of the total 36 cases of three types, 14 cases (38%) were markedly effective, 16 cases (44%) effective, and 6 cases (17%) ineffective, with a total effective rate of 83%.

Liang Zhenhong ² treated 23 cases of diabetic peripheral neuritis with modified Buyang Huanwu Tang (补阳还五汤 Decoction Invigorating Yang for Recuperation) under the principle of replenishing qi and nourishing blood, and promoting blood circulation by removing blood stasis from the collaterals.

The drugs used were:
Huang Qi (黄芪 Radix Astragali) 60g
Dang Gui (当归 Radix Angelicae Sinensis) 8g
Bai Shao (白芍 Radix Paeoniae Rubra) 10g
Di Long (地龙 Pheretima) 10g
Xi Yang Shen (西洋参 Radix Panacis Quinquefolii) 10g
Tao Ren (桃仁 Semen Persicae) 10g
Chuan Xiong (川芎 Rhizoma Chuanxiong) 6g
Hong Hua (红花 Flos Carthami) 6g
Sheng Di (生地 Radix Rehmanniae) 20g
Shu Di Huang (熟地黄 Radix Rehmanniae Preparata) 20g
Dan Shen (丹参 Radix Salviae Miltiorrhizae) 15g
Xuan Shen (玄参 Radix Scrophulariae) 15g.

For those with excessive heat, Shi Gao (石膏 Gypsum Fibrosum), Di Gu Pi (地骨皮 Cortex Lycii), Gui Ban (龟板 Plastrum Testudinis), Mai Dong (麦冬 Radix Ophiopogonis), and Zhi Mu (知母 Rhizoma Anemarrhenae) were added; for those with severe blood stasis due to prolonged illness, San Qi (三七 Radix Notoginseng), Quan Xie (全蝎 Scorpion), and Wu Gong (蜈蚣 Scolopendra) were added; for those with hyperactivity of liver-yang, Huai Niu Xi (怀牛膝 Radix Achyranthis Bidentatae), Shi Jue Ming (石决明 Concha Haliotidis), Bai Shao (白芍 Radix Paeoniae Alba), and Sheng Mu Li (生牡蛎 Concha Ostreae) were added; and for those with kidney-deficiency, Shan Zhu Yu (山茱萸 Fructus Corni), Hua Niu Xi (怀牛膝 Radix Achyranthis Bidentatae), Du Zhong (杜仲 Cortex Eucommiae) and Tu Si Zi (菟丝子 Semen Cuscutae) were added. The above-mentioned drugs were made into decoction, which was taken one dose daily, one month constituting a course. After two therapeutic courses, the total effective rate reached 82.6%.

Huang Yu ³ treated 55 cases of diabetic peripheral nerve lesions with his self-made prescription of Shulu Tu Tang (舒络汤 Decoction for Dredging the Collaterals), which consisted of modified Danggui Sini Tang (当归四逆汤 Chinese Angelica Decoction for Restoring Yang), combined with the various methods for replenishing and nourishing qi and blood, warming the channels and collaterals, nourishing the liver and kidney, and dredging the collaterals.

The drugs used were:
Huang Qi (黄芪 Radix Astragali) 30g
Dang Gui (当归 Radix Angelicae Sinensis) 15g
Bai Shao (白芍 Radix Paeoniae Alba) 15g
Gui Zhi (桂枝 Ramulus Cinnamomi) 15g
Shu Di Huang (熟地黄 Radix Rehmanniae Preparata) 15g
Gou Qi Zi (枸杞子 Fructus Lycii) 15g
Di Long (地龙 Pheretima) 10g
Xi Xin (细辛 Herba Asari) 6g
Tong Cao (通草 Medulla Tetrapanacis) 6g
Gan Cao (甘草 Radix Glycyrrhizae) 6g
Zhi Wu Gong (制蜈蚣 Scolopendra Preparata) 3g.

The drugs were made into decoction and taken one dose daily, twice a day. The results showed 16 cases with marked effectiveness, 27 cases with effectiveness, and 12 cases with no effect, the total effective rate being 78.2%.

**Diabetic Retinopathy**

Wang Daqian ⁴ treated 161 cases of diabetic retinal hemorrhage. There were 106 cases in the treatment
group and 55 cases in the control group. The cases in the treatment group were treated with Danqi Dihuang Tang (丹七地黄汤), a decoction of modified Xijiao Dihuang Tang (犀角地黄汤 Decoction of Rhinoceros Horn and Rehmannia).

The prescription was made up of the following drugs:
San Qi Fen (三七粉 powder of Radix Notoginseng) 3g
Sheng Di (生地 Radix Rehmanniae) 20g
Chi Shao (赤芍 Radix Paeoniae Rubra) 12g
Dan Pi (丹皮 Cortex Moutan) 10g
Chao Pu Huang (炒蒲黄 parched Pollen Typhae) 15g
Dan Shen (丹参 Radix Salviae Miltiorrhizae) 30g
Shi Hu (石斛 Herba Dendrobii) 15g
and Sheng Ma (生麻 Rhizoma Cimicifugae) 6g.

The drugs were decocted and taken one dose daily, twice a day, 200 ml for each time. The cases in the control group were treated with the patent Chinese drugs Yunan Baiyao (云南白药 White Drug-Powder Produced in Yunan Province, consisting of pulverized notoginseng root and other ingredients, used for hemorrhage) and Tong Saimai Pian (通塞脉片 Tablets for Dredging the Obstructed Vessels). After the treatment, both groups achieved varying degrees of absorption of fundus hemorrhage, but the cases with administration of Danqi Dihuang Tang (丹七地黄汤) all had a shortened duration of illness and better result in raising eyesight. There were the total effective rate of 82.14%, and markedly effective rate of 39.62% in the treatment group. The therapeutic results showed that the herbal decoction was more effective than the same kinds of patent Chinese drugs in treating fundus hemorrhage.

Ling Bida, by using the integrated method of Chinese and western medicine, treated 27 cases of diabetic retinal fundus hemorrhage, involving 36 affected eyes, of which 27 eyes got complete absorption of the hemorrhage, and 5 eyes partial absorption, with a total effective rate reaching 88.9%. At the same time when the blood sugar was controlled with western medicine, those patients were differentiated and divided into two basic types: 1) the type of yin-deficiency of the liver and kidney, and bleeding due to blood-heat.

For this type, the following drugs were used:
Sheng Di (生地 Radix Rehmanniae) 20g
Ju Hua (菊花 Flos Chrysanthemi) 12g
Gou Qi (枸杞 Fructus Lycii) 15g
Dang Gui (当归 Radix Angelicae Sinensis) 10g
Yuan Shen (元参 Radix Scrophulariae) 15g
Ge Gen (葛根 Radix Puerariae) 12g
Ji Sheng (寄生 Herba Taxilli) 15g
Niu Xi (牛膝 Radix Achyranthis Bidentatae) 15g
Dan Shen (丹参 Radix Salviae Miltiorrhizae) 15g
Chi Shao (赤芍 Radix Paeoniae Rubra) 10g
Jue Ming Zi (决明子 Semen Cassia) 15g
Shi Hu (石斛 Herba Dendrobii) 10g
San Qi Fen (三七粉 powder of Radix Notoginseng) 3g (taken after infusion in boiling water).

2) The type of deficiency of both qi and yin, and vessel bleeding. The following drugs were used for this type:
Tai Zi Shen (太子参 Radix Pseudostellariae) 30g
Huang Qi (黄芪 Radix Astragali) 20g
Sheng Di (生地 Radix Rehmanniae) 15g
Yuan Shen (元参 Radix Scrophulariae) 15g
Zhi Mu (知母 Rhizoma Anemarrhenae) 10g
Shi Hu (石斛 Herba Dendrobii) 10g
Dan Shen (丹参 Radix Salviae Miltiorrhizae) 15g
Dang Gui (当归 Radix Angelicae Sinensis) 10g
Ju Hua (菊花 Flos Chrysanthemi) 12g
Gou Qi (枸杞 Fructus Lycii) 15g
Jue Ming Zi (决明子 Semen Cassia) 15g
San Qi Fen (三七粉 powder of Radix Notoginseng) 3g (taken after infusion in boiling water).

The results suggested that the integrated way in the treatment of diabetic fundus hemorrhage for balancing yin and yang and regulating qi and blood could not only improve the symptoms but also control effectively the fundus bleeding.

**Diabetic Nephroses (DN)**

Based on the TCM differential treatment for controlling the blood sugar, You Dejiang differentiated and divided the diabetes cases into
three types, namely diabetes involving the upper-\textit{jiao}, diabetes involving the middle-\textit{jiao}, and diabetes involving the lower-\textit{jiao}. For cases with diabetes involving the upper-\textit{jiao}, the modified Xiaoke Fang (消渴方 The Formula for Diabetes) was used; for cases with diabetes involving the middle-\textit{jiao}, the modified Yunu Jian (玉女煎 Jade Maid Decoction) was used; and for cases with diabetes involving the lower-\textit{jiao} due to \textit{yin}-deficiency, the modified Liuwei Dihuang Tang (六味地黄汤 Decoction of Six Drugs Including Rehmanniae) was used; and for those due to \textit{yang}-insufficiency, the modified Jinkui Shenqi Wan (金匮肾气丸 Bolus for Strengthening Kidney-\textit{qi}) was used. In addition to the above drugs, Sheng Da Huang Fen (生大黄粉 Powder of Radix et Rhizoma Rhei) 1g was orally taken after infusion in boiling water, three time a day before meals and intravenous injection of 20ml of Huangqi Zhushanye (黄芪注射液 Injection of Astragali) and 250ml of normal saline was added, once daily. All the patients were treated accordingly for three weeks. After the treatment, all the 30 cases treated had their symptoms alleviated with obviously reduced edema and 24-hour microprotein in urine, showing quite good therapeutic effects.

By using the Chinese medicine Tangshen Tongbao Yin (糖肾通宝饮), Gong Weixing and Xu Guoan treated cases of diabetic nephroses. The prescription consisted of the following ingredients:

Ren Shen (人参 Radix Ginseng) 10g  
Da Huang (大黄 Radix et Rhizoma Rhei) 10g  
Ge Gen (葛根 Radix Puerariae) 15g  
Dan Shen (丹参 Radix Salviae Miltiorrhizae) 15g  
Yi Mu Cao (益母草 Herba Leonuri) 15g  
Chan Tui (蝉蜕 Periostracum Cicadae) 15g  
Qian Shi (芡实 Semen Euryales) 15g  
Chuan Xiong (川芎 Rhizoma Chuanxiong) 12g  
Shan Zhu Yu (山茱萸 Fructus Corni) 12g  
Wu Wei Zi (五味子 Fructus Schisandraceae) 12g  
Ze Xie (泽泻 Rhizoma Alismatis) 12g.

Gong and Xu divided patients into a treatment group (32 cases) and a control group (32 cases). The 32 cases in the treatment group were treated with above Chinese medicine and the 32 cases in the control group were administered with western medicine. The cases in the treatment group had never used any western medicine for lowering down the blood sugar and pressure before receiving Chinese medicine. Tangshen Tongbao Yin (糖肾通宝饮) decoction was taken twice daily, with 150ml each time. It showed that Tangshen Tongbao Yin (糖肾通宝饮) could produce a better effect for early-stage diabetic nephrosis especially in improving the blood rheology as compared to simple western medical treatment, which further proved that the Chinese drugs did have quite good therapeutic effects for diabetic nephroses. The modern pharmacological research demonstrated that Ren Shen (人参 Radix Ginseng), Shan Zhu Yu (山茱萸 Fructus Corni), and Ze Xie (泽泻 Rhizoma Alismatis) had the effect of lowering down the blood sugar; Dan Shen (丹参 Radix Salviae Miltiorrhizae), Chuan Xiong (川芎 Rhizoma Chuanxiong), and Yi Mu Cao (益母草 Herba Leonuri) had the effects of improving the blood rheology, inhibiting the platelet aggregation, and regulating tissue renovation and regeneration; \cite{8} while Da Huang (大黄 Radix et Rhizoma Rhei) could control nephromegaly of experimental DN, directly inhibit cellular growth of mesangium and syntheses of DNA and protein in rats, and suppress the raise of serum somatomedin of rats with partial nephrectomy. All the above effects are of benefit to the delaying of renal failure. \cite{9}

Xu Yan and Xu Jingyu \cite{10} divided randomly 61 cases of diabetic nephrosis into two groups: the treatment group (33 cases treated with combined Chinese and western medicine), and the control group (28 cases treated with simple western medicine). Both groups were treated with the same western medicine. But cases in the treatment group were further differentiated into three types and Chinese drugs were added accordingly. 1) The type of deficiency of both \textit{qi} and \textit{yin} of the liver and kidney was treated for nourishing the liver and kidney, and replenishing \textit{qi} and nourishing \textit{yin}, supplemented by promoting blood circulation.
The drugs used were:
Sheng Di (生地 Radix Rehmanniae) 15g
Gou Qi Zi (枸杞子 Fructus Lycii) 15g
Tai Zi Shen (太子参 Radix Pseudostellariae) 15g
Shan Yu Rou (山萸肉 Fructus Corni) 10g
Dan Shen (丹参 Radix Salviae Miltiorrhizae) 20g
Yuan Shen (元参 Radix Scrophulariae) 20g
Huang Qi (黄芪 Radix Astragali) 20g
Tian Hua Fen (天花粉 Radix Trichosanthis)30g.

2) The type of insufficiency of both *qi* and *yang* of the spleen and kidney was treated for strengthening and tonifying the spleen and kidney, and inducing diuresis to alleviate edema, supplemented by promoting blood circulation.

The drugs used were:
Dang Shen (党参 Radix Codonopsis) 20g
Huang Qi (黄芪 Radix Astragali) 20g
Xian Ling Pi (仙灵脾 Herba Epimedi) 20g
Dan Shen (丹参 Radix Salviae Miltiorrhizae) 20g
Zhu Ling (猪苓 Polyporus) 30g
Shan Yao (山药 Rhizoma Dioscoreae) 30g
Fu Ling (茯苓 Poria) 30g
Chi Xiao Dou (赤小豆 Semen Phaseoli) 30g
Zhi Fu Pian (制附片 Radix Aconiti Preparata) 10g
Ze Xie (泽泻 Rhizoma Alismatis) 15g
Shui Zhi (水蛭 Hirudo)1g.

3) The type of insufficiency of *qi* and *yang* of the heart and kidney was treated for replenishing *qi* and nourishing the heart, and activating *yang* and inducing diuresis, supplemented by promoting circulation of blood.

The drugs used were:
Xi Yang Shen (西洋参 Radix Panacis Quinquefolii) 10g
Wu Wei Zi (五味子 Fructus Schisandraceae) 10g
Gui Zhi (桂枝 Ramulus Cinnamomi) 10g
Zhu Ling (猪苓 Polyporus) 50g
Mai Dong (麦冬 Radix Ophiopogonis) 11g
Ze Xie (泽泻 Rhizoma Alismatis) 11g
Ting Li Zi (葶苈子 Semen Lepidii seu Descurainiae) 30g
Huang Qi (黄芪 Radix Astragali) 30g
Fu Ling (茯苓 Poria) 30g
Yu Xing Cao (鱼腥草 Herba Houttuyniae) 30g
Dan Shen (丹参 Radix Salviae Miltiorrhizae) 20g.

A four-week treatment formed a course. And the therapeutic effects were evaluated after two courses of treatment. The results showed that in the treatment group, 6 cases were markedly effective, 13 cases effective, and 14 cases ineffective, the total effective rate being 57.4% while the control group had a total effective rate of 14.3%.

Zhang Zesheng, Yuan Zunyu, Yang Xinquan, and Liu Lianshun treated 64 cases of diabetic nephrosis with the TCM method for nourishing the kidney, strengthening the spleen, resolving blood stasis, and lowering turbid pathogen. The self-made prescription of Yishen Huayu Tang (益肾化瘀汤 Decoction for Nourishing the Kidney and Resolving Blood Stasis) was used.

The ingredients of prescription included:
Huang Qi (黄芪 Radix Astragali) 30g
Tai Zi Shen (太子参 Radix Pseudostellariae) 30g
Shan Yao (山药 Rhizoma Dioscoreae) 30g
Chao Yi Yi Ren (炒薏苡仁 parched Semen Coicis) 30g
Zhi Fu Pian (制附片 Radix Aconiti Preparata) 10g
Ze Xie (泽泻 Rhizoma Alismatis) 15g
Shui Zhi (水蛭 Hirudo)1g.

The differential modifications: for those with *yang*-insufficiency of the spleen and kidney, Fu Zi (附子 Radix Aconiti Preparata), Bu Gu Zhi (补骨脂 Fructus Psoraleae), and Tu Si Zi (菟丝子 Semen Cuscutae) were added; for those with hyperactivity of *yang* due to *yin* deficiency, Sheng Di Huang ( 生地 黄 Radix Rehmanniae), Zhi Mu ( 知母 Rhizoma Anemarrhenae), Bie Jia ( 贝甲 Carapax Trionycis),
and Gui Ban (龟板 Plastrum Testudinis) were added; for those with dryness-heat in the lung and stomach, Sheng Shi Gao (生石膏 Gypsum Fibrosum), Tian Hua Fen (天花粉 Radix Trichosanthidis), Di Gu Pi (地骨皮 Cortex Lycii), and Pi Pa Ye (枇杷叶 Folium Eriobotryae) were added; for those with obvious edema, Ze Xie (泽泻 Rhizoma Alismatis), and Che Qian Zi (车前子 Semen Plantaginis) were added; for those with stagnation of liver-qi, Fo Shou (佛手 Fructus Citri Sarcodactylis), and Zhi Qiao (枳壳 Fructus Aurantii) were added; for those with obstruction of collaterals by blood stasis, Hong Hua (红花 Flos Carthami), Chuan Xiong (川芎 Rhizoma Chuanxiong), and Liu Ji Nu ( 刘寄奴 Herba Artemisiae Anomalae) were added; and for those with accumulation in the intestines, increased dosage of Da Huang (大黄 Radix et Rhiza Rhei) was used. For those with severe proteinuria, the dose of Huang Qi (黄芪 Radix Astragali) was increased to 60g, and Bai Hua She She Cao (白花蛇舌草 Herba Hedyotis Diffusae) 15g was added. For those with hypertension, Chuan Niu Xi (川牛膝 Radix Cyathulae), Xia Ku Cao (夏枯草 Spica Prunellae), and Shi Jue Ming (石决明 Concha Haliotidis) were added; for those complicated with retinal lesion, San Qi (三七 Radix Notoginseng), Ju Hua (菊花 Flos Chrysanthemi), and Ji Li (蒺藜 Fructus Tribuli) were added; for those with vomiting and anorexia due to upward flow of turbid pathogen, as a result of raise of blood creatinine and urea nitrogen, Tai Zi Shen (太子参 Radix Pseudostellariae), Huang Qi (黄芪 Radix Astragali), Gou Qi Zi (枸杞子 Fructus Lycii) and Shan Zhu Yu (山茱萸 Fructus Corni) were left out for the moment, with Pei Lan (佩兰 Herba Eupatori), Chang Pu (菖蒲 Rhizoma Acori Tatarinowii), Zhu Ru (竹茹 Caulis Bambusae in Taeniam), and Zhe Shi (赭石 Haematitum) added. When the vomiting stopped and the appetite turned better, Tai Zi Shen (太子参 Radix Pseudostellariae), Sheng Huang Qi (生黄芪 Radix Astragali), Gou Qi Zi (枸杞子 Fructus Lycii) and Shan Zhu Yu (山茱萸 Fructus Corni) were added again. The results showed a total effective rate of 95.3%, indicating that this TCM treatment method could play an important role in reducing proteinuria, improving lipid metabolism and renal function, and delay the development of illness of diabetic DN patients.

**Diabetes Complicated with Summer Diarrhea**

Cai Xiaoping observed 40 diabetes cases complicated with summer diarrhea and treated them with Lishi Qingshu Yiqi Tang (李氏清暑益气汤 Physician Li’s Decoction for Relieving Summer Heat and Benefiting Qi). The ingredients of the prescription included:

- Xi Yang Shen (西洋参 Radix Panacis Quinquefolii) 9g
- Bai Zhu (白术 Rhizoma Atractylodis Macrocephalae) 9g
- Chao Dang Gui (炒当归 Parched Radix Angelicae Sinensis) 9g
- Mai Dong (麦冬 Radix Ophiopogonis) 12g
- Ge Gen (葛根 Radix Puerariae) 12g
- Wu Wei Zi (五味子 Fructus Schisandraceae) 10g
- Huang Qi (黄芪 Radix Astragali) 10g
- Cang Zhu (苍术 Rhizoma Atractylodis) 6g
- Huang Bai (黄柏 Cortex Phellodendri) 6g
- Sheng Ma (升麻 Rhizoma Cimicifugae) 6g
- Ze Xie (泽泻 Rhizoma Alismatis) 6g
- Chen Pi (陈皮 Pericarpium Citri Reticulatae) 6g
- Qing Pi (青皮 Pericarpium Citri Reticulatae Viride) 6g
- Shan Yao (山药 Rhizoma Dioscoreae)15g.

The modifications: for dry mouth and dizziness, Xuan Shen (玄参 Radix Scrophulariae) 15g, and Gou Qi Zi (枸杞子 Fructus Lycii) 15g were added; for abdominal pain and distention, Mu Xiang (木香 Radix Aucklandiae) 6g, and Huo Xiang (藿香 Herba Agastachis) 6g were added; and for lumbar pain and frequent urination, Bu Gu Zhi (补骨脂 Fructus Psoraleae) 9g, and Shan Zhu Yu (山茱萸 Fructus Corni) 9g were added. The results showed a total effective rate of 95%. The control group treated with Gegen Qin Lian Tang (葛根芩连汤 Decoction of Pueraria, Scutellaria and Coptis) had a total effective rate of 70%.

**Diabetic Gastroparesis**

Zou Shichang treated cases of diabetic gastroparesis with Wumei Tang (乌梅汤 Black Plum
Decoction).
The ingredients of prescription included:
Dang Shen (党参 Radix Codonopsis) 18g
Dang Gu (当归 Radix Angelicae Sinensis) 10g
Guan Zhi (桂枝 Ramulus Cinnamomi) 10g
Wu Mei (乌梅 Fructus Mume) 10g
Huang Bai (黄柏 Cortex Phellodendri) 10g
Hua Jiao (花椒 Pericarpium Zanthoxyli) 4g
Huang Lian (黄连 Rhizaoma Coptidis) 4g
Gan Jiang (干姜 Rhizoma Zingiberis) 6g
Xi Xin (细辛 Herba Asari) 6g
Fu Zi (附子 Radix Aconiti Lateralis Preparata) 12g
(decocted first).

The total effective rate was 81.0%. Characteristics of this prescription included little side effects, prolonged therapeutic effects and few recurrences.

Based on the routine treatment of diabetes for both the treatment group and the control group, Li Hong and Hou Fengying added Chinese drugs for the treatment group.

The Chinese drugs used were:
Zhi Ban Xia (知半夏 Rhizoma Pinelliae Preparata) 10g
Qing Pi (青皮 Pericarpium Citri Reticulatae Viride) 10g
Chen Pi (陈皮 Pericarpium Citri Reticulatae) 10g
Mu Xiang (木香 Radix Aucklandiae) 10g
Bai Zhu (白术 Rhizaoma Atractylodis Macrocephalae) 10g
Zhi Shi (知皮 Fructus Aurantii Immaturus) 10g
Fu Ling (茯苓 Poria) 10g
Bing Lang (冰凉 Semen Arecae) 10g
Bai Shao (白芍 Radix Paeoniae Alba) 12g
Jiao Shan Zha (焦山楂 charred Fructus Crataegi) 15g
Shen Qu (神曲 Massa Fermentata Medicinalis) 15g
Ji Nei Jin (鸡内金 Endothelium Corneum Gigeriae Galli) 15g.

The total effective rate of the treatment group was 90.3%, while that of the control group was 70%.

To sum up, Chinese-drug treatment has already obtained certain therapeutic effects in treating diabetic complications, which is worthy of being popularized. The further effort should be aimed at selecting effective drugs and proper prescriptions, and making patent drugs easy for administration.

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