Teaching Roundtable

Acupuncture Treatment of Chronic Fatigue Syndrome

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CASE HISTORY

A female patient, 49 years old, a Hong Kong resident, paid her first visit on September 10, 2007. She complained of general lassitude, shortness of breath, heaviness in the head, distending pain in the vertex, and heaviness in both the lower limbs for a period of 6 years. She could not have long-distance walks, and felt short breath, fatigue and severe heaviness in both the lower limbs if walking for over 15 minutes. And if standing for over 10 minutes, she would have lumbago and aching pain in both knee joints.

Since getting married, she has mainly done the housework and looked after her children. When seeing the achievements of the same-aged people, she was depressed for accomplishing nothing. She was diagnosed as having chronic fatigue syndrome, accompanied with osteoporosis, and hyperosteogeny of the cervical vertebrae. After orally taking Chinese and Western medicines, the above symptoms were improved but fatigue remained.

Physical examination showed slight obesity, anxious complexion, quick reaction, blood pressure of 96/48 mmHg, heart rate of 64 beats/min, no abnormalities in the heart and lungs, slight rise of the navel, and remarkable tenderness in the medial of both knee joints.

TCM examination found fatigue, lassitude, sallow complexion, occasional headache and dizziness, normal appetite but with food restrained for fear of becoming obese, normal urination, defecation once a day with slightly dry stool, pale tongue with white and greasy fur, and deep, thready and feeble pulse.

DISCUSSION

Prof. Hu: Please make a syndrome-differentiating analysis according to the patient’s clinical symptoms.

Doctor Zhang: I think, this is a case of deficiency of both qi and blood with its focus in the liver, spleen and stomach. Repeated onsets of the depression-caused illness may affect the function of the spleen and stomach. Abnormal emotion leads to invasion of the spleen and stomach by the liver-qi, Judging from the process and cause of her illness, at the early stage, abnormal emotion influences the liver, making hyperactive liver-qi attack the spleen and stomach to cause their dysfunction, disorders in circulation of qi and blood, general malnutrition, lassitude, dizziness and sallow complexion.

Doctor Wang: I agree with Doctor Zhang. This is a case of hepatopathy affecting the spleen and stomach with its focus in the liver, spleen and stomach, and with cold in nature. Sallow complexion, short breath, lassitude, dry stool, pale tongue, white greasy fur, and deep and thready pulse are the clinical manifestations of deficiency syndrome.

Doctor Li: I agree with the two doctors. In my opinion, heaviness in the head and limbs is related to dampness caused by deficiency of the spleen-qi. Abnormal emotion and excessive deliberation can make the spleen fail to transport and transform the nutrients, and the water retention may cause dizziness and heaviness in the head and limbs. I think, the patient also had the symptoms of kidney deficiency, such as lassitude in loin and legs.

We do not know much about chronic fatigue
syndrome from lectures. Would you please tell us something about the disease with your clinical experience?

Prof. Hu: First, I would like to say, you have made very good syndrome-differentiating analyses. Judging from the clinical manifestations, the patient’s illness mainly affected the spleen, liver and kidney. She suffered from deficiency syndrome, with qi deficiency in particular, but with no typical cold or heat symptoms.

Her illness is induced by emotional fluctuation. Since getting married, she has mainly done the housework. In comparison with the achievements of her former classmates, her inferiority gradually developed into psychological imbalance. Emotional factors may cause dysfunction of the liver and affect the spleen and stomach. As spleen deficiency may result in failure of the spleen to transport and transform the nutrients. The resultant water retention causes heaviness in the head, sallow complexion, lassitude and feeble limbs. The prolonged illness may gradually lead to the appearance of kidney deficiency.

The term Chronic Fatigue Syndrome (CFS) officially named by U.S. Centers for Disease Control (CDC) in 1987 has been acknowledged by medical specialists. The disorder with pathogenesis unknown may be related to physical or mental stress and psychological factors, causing dysfunctions of the nervous, immune, endocrine and other systems, with fatigue as the main clinical symptoms. Presently, there is no specific therapy for CFS. Acupuncture is good at regulating the functions of the whole body, which can be adopted for clinical treatment of CFS. And the patient should undertake proper physical exercise, have a balanced diet, take good rest, reduce psychological pressures, and give up smoking and alcohol drinking.

Doctor Zhang: According to the above analyses, I think, the treatment principle should be to soothe the liver qi, strengthen the spleen, remove dampness, and tonify the kidney.

The point prescription: Zhongwan (CV 12), Zusanli (ST 36), Sanyinjiao (SP 6), Taixi (KI 3), Neiguan (PC 6), Taichong (LR 3) and Hegu (LI 4). Zhongwan (CV 12) is the front-Mu point of the stomach channel, which is used with Zusanli (ST 36) for strengthening the spleen and regulating the stomach. Sanyinjiao (SP 6) can regulate the spleen and stomach to remove dampness. Neiguan (PC 6) can calm the mind and regulate the spleen and stomach. Taixi (KI 3), the source point of the kidneys, can nourish the kidney-qi. Taichong (LR 3) for regulating the liver-qi and Hegu (LI 4) for regulating the circulation of blood and qi can a joint effect of balancing yin and yang. The above-mentioned points used together can regulate qi, strengthen the spleen, remove dampness and nourish the kidneys.

Doctor Wang: I suggest that Fengchi (GB 20), Taiyang (EX-HN5) and Sishencong (EX-HN1) be added because the patient felt heaviness and pain in her head.

Doctor Li: Prof. Hu, I have no clinical experience with the disorder. Would you please give us some advice for the treatment?

Prof. Hu: The treatment principle and the point prescription suggested by doctor Zhang are very good, and the addition of points for treating headache raised by Doctor Wang can enhance the therapeutic effects. I propose to strengthen the psychological treatment.

Baihui (GV 20), Shenting (GV 24), Yintang (EX-HN 3), Shenmen (HT 7), Qihai (CV 6), and Guanyuan (BL 26) can be added. The use of Baihui (GV 20), Shenting (GV 24), Yintang (EX-HN3) and Shenmen (HT 7) can perfectly tranquilize the mind and relieve the mental stress. Qihai (CV 6) can nourish and regulate qi of the whole body, especially the primordial qi for treating the origin. Guanyuan is used for nourishing the kidney qi. The combined use of Guanyuan and Qihai can supplement qi, strengthen the body’s resistance and restore normal function.

Besides, we should help the patient establish
confidence through conversation. And the patient should have proper physical exercise, have a 15 minutes walk daily; eat more fresh vegetables and fruits and drink more water; and have less fried, greasy, high sugar-containing food.

**TREATMENT AND RESULTS**
The above-mentioned acupuncture treatment was given for the patient, with the needles retained for 30 minutes each time. 5 treatments, the symptoms were slightly improved. After 10 treatments, the patient could walk for 15 minutes without fatigue, and had an improved mental state. She was asked to take good rest, not to eat greasy, uncooked and cold foods, and to maintain a good mood. After 2 courses of treatment, dizziness and weakness of the loins and legs were improved. After 10 more treatments, her fatigue and heaviness in the head and lower limbs were further alleviated. During the treatment, cupping was used at Xinshu (BL 15), Geshu (BL 17), Ganshu (BL 18), Pishu (BL 20), Weishu (BL 21) and Shenshu (BL 23), which made the patient feel comfortable throughout the whole body. Then, two more courses of treatment were performed to consolidate the therapeutic effects. Altogether, 50 treatments were given; the patient was in a very good condition after a 3-month follow-up period.

(Translated by DUAN Shu-min 段树民)