

# Essentials of Chinese Medicine

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# Essentials of Chinese Medicine

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# Foreword

*The Essentials of Chinese Medicine* is a text book intended for international students who wish to gain a basic understanding of Chinese Medicine (CM) at the university level. The idea of writing such a text was originated from the Sino-American Consortium for the Advancement of Chinese Medicine (SACACM), which was founded in February 2000. In 1995, the British Hong Kong Administration set up a Preparatory Committee for the Development of Chinese Medicine to look into ways of bringing Chinese medical practice and herbal trade under proper control and regulation. After the reunification of Hong Kong with mainland China in 1997, the Government of the Hong Kong Special Administrative Region continued the efforts to uplift the practice of CM to a fully professional level through legislation.

To help bring up a new generation of professional CM practitioners, the Hong Kong Baptist University (HKBU) obtained approval from the Government's university funding authority to develop a School of Chinese Medicine to prepare students who will meet the future professional requirements through public examinations. In order to establish itself quickly as a rigorous provider of university level CM education, HKBU sought alliance with eight major CM universities in the Chinese Mainland, and one US university which was interested in developing CM education within its medical college. As a result, the Consortium known as SACACM was formed, with ten founding institutions from Beijing, Shanghai, Nanjing, Shandong, Guangzhou, Chengdu, Heilongjiang, Hong Kong, and the United States. (The University of Macau and the Macao University of Science and Technology joined the Consortium 2 years later.)

One of the first projects the Consortium decided to pursue was the writing of a high quality CM text book in English to be endorsed by the member institutions as the foundation for the study of traditional Chinese medicine. The Beijing University of Traditional Chinese Medicine, being one of the oldest and better developed institutions in the field, was nominated to be the coordinating university for the project, with the active assistance of the State Administration of Traditional Chinese Medicine of China (SATCM). The initial funding for the project was provided by the Hong Kong Baptist University and the Ohio University of the USA. An editorial committee was formed to decide on the general coverage and level of the text, and each of the member universities of CM were requested to nominate their senior professors to write the assigned chapters according to their fields of specialty. These

authors were to prepare their scripts in both Chinese and English with the help of the Editor. After the English version of the text was checked against the Chinese version for accuracy and consistency, it was sent to an expert who is well versed in both Chinese and Western Medicine and at the same time fluent in both the Chinese and English languages at the mother tongue level. The expert was invited to go over the entire text line by line to make sure that both the language style and the terms used are understood by the international students whose native language is English.

The above steps looked innocent enough, but the execution of the entire process was extremely time consuming and tedious. It has also proven to be a very meaningful, if not “ground-breaking,” move which makes the text truly different from publications of similar nature. I am happy that after 9 years of hard work and perseverance this text is finally ready for the press. I do hope that when it comes out, it will prove to be a significant contribution to the education of CM internationally.

Founding Chair, SACACM  
February 2009

Daniel C. W. Tse

# Preface

“Health for all” is still an important task for the World Health Organization (WHO) to accomplish in the twenty-first century. The accomplishment of this task requires mutual cooperation and common efforts of various medical sciences, which includes Chinese medicine. WHO has increasingly emphasized the development of traditional medicine and has made great efforts to promote its development. Because traditional medicine is deeply rooted in history and culture, it is part of the traditions of a country and employs healing practices handed down from generation to generation.

Large portions of the population in a number of developing countries still rely mainly on traditional practitioners, including traditional birth attendants, herbalists, and bone-setters, and local medicinal plants to satisfy their primary health care needs. Although modern medicine is now available in many countries, traditional medicine has maintained its popularity because of its historical and cultural impact. People believe in it, and it is still effective against many common diseases, has few side effects, and is economically preferable to modern medicine.

Nowadays, the modern medical model is changing. It is gradually shifting from its original medical model of biomedicine into a physiological–psychological–sociological–medical model, which emphasizes that the people, the natural environment, ecological conditions and society are all aspects of a united whole. With the transformation into the new medical model, alternative medicine and therapies are developing very rapidly. The study of Chinese Medicine (CM) in the west is both timely and challenging. It is timely because of public demand for traditional medicines to be provided by safe, efficient and competent practitioners. It is challenging because of the greater demand for science-based treatment and evidence-based practice. These perspectives suggest that the integration of orthodox medicine with complementary or alternative medicine is a historical trend in the world medical scene. Therefore, the role of CM in medical treatment and health-care will certainly become even more important in the world medical scene in the twenty-first century.

CM is an integral part of Chinese culture. Over the centuries, various activities and aspects of the practice of CM have made tremendous contributions to the prosperity of the Chinese nation. Its good reputation resulted from its great vitality. It

demonstrated by the fact that when compared with other traditional medicine its clinical application has never declined over the past several thousand years.

CM appears to have a bright future in the world. There appears to be a growing reliance on it by people everywhere. This seems to be an irresistible historical trend. Working together to develop CM will not only be in line with the developing trend in the world, but also will fundamentally solve existing problems and increase competitive advantages. Collaboration among universities will benefit cultural exchange, the blending of the East and the West, and the global development of CM. However, much work needs to be done in order to meet the health requirements of human beings and to promote the course of internationalization of CM, especially the compilation of textbooks suitable for medical students in western countries in addition to international readers.

With the encouragement of the State Administration of Traditional Chinese Medicine of China, the compilation of this textbook series was initiated by the Sino-American Consortium for the Advancement of Chinese Medicine which was made up of the Ohio University in Athens, Ohio, Beijing University of CM, Chengdu University of TCM, China Academy of Chinese Medical Sciences, Guangzhou University of TCM, Heilongjiang University of TCM, Hong Kong Baptist University, Nanjing University of TCM, Shandong University of TCM, and Shanghai University of TCM. The Beijing University of CM was the lead institution of this project. It gathered experts from the member institutions to compile the series and translate it into English which is now known as *Essentials of Chinese Medicine*. This textbook series contains three volumes: Volume 1 ***Foundations of Chinese Medicine***; Volume 2, ***Clinical Fundamentals in Chinese Medicine***; and Volume 3 ***Essentials of the Clinical Specialties in Chinese Medicine***. These volumes systematically introduce the basic theories, the diagnostic methods, the therapeutic methods based on symptom differentiation, and the knowledge of principles of health preservation and rehabilitation. They explain the basic methods and theories of acupuncture and moxibustion, as well as expounding upon 154 kinds of Chinese herbs; each Chinese medicinal herb is illustrated. The textbooks also introduce 84 Chinese herbal formulas and 11 associated formulas commonly used in clinical practice. Furthermore, it elucidates treatments of commonly and frequently encountered diseases in internal medicine, surgery, gynecology, pediatrics, ophthalmology and otorhinolaryngology.

In the arrangement of contents and compilation, the following features characterize this textbook series:

### 1. Emphasis on the basic knowledge of CM

Medical students who want to learn CM, especially students in western countries, need to adapt CM to Western medical terms and conditions, but this adaptation can only take place on the solid foundation of the theories of CM. There can be no mastery of CM without a true understanding of the theories and practice of CM. The first volume introduces the terminology and methodology of Chinese medicine in order to improve the critical thinking of medical students

and practitioners. It also contains a detailed explanation of the basic theories. The second volume covers the fundamentals of clinical practice. The more solid the foundation is, the easier it will be to have a better understanding and mastery of CM

## 2. Concise and systematic content

On the basis of developments of CM in education and research in the past, great efforts have been made to highlight the essence of CM through accurate exposition and to introduce them to the world. These textbooks systematically introduce the basic theories, diagnostic methods, acupuncture skills, knowledge of Chinese herbs, knowledge of formulas, as well as clinical application. Mastery of these textbooks will lay a foundation for the further study of CM.

## 3. Suitability for teaching and self-study

In this textbook series, at the end of most chapters guidance is provided on the aims of study, the objectives of study and exercises for review. The structure combines the features of textbooks and modular handbooks. Therefore, it is highly suitable for self-study by medical students.

## 4. Reinforcing effects of illustrations

To facilitate the understanding of CM, the textbook series contains many illustrations. There are black and white photographs, line graphs, tables in the text with necessary indexes, color photographs of the tongue, and color photographs of 151 Chinese herbs. These illustrations provide a better appreciation of CM and promote its learning.

## 5. Case studies

In Volume 3 and Part III of Volume 2 each section contains a successful case study. These case studies enhance the understanding of CM.

## 6. Standardization

This textbook series is reasonable in structure and distinct in categorization. Most of the technical terms of CM have been standardized in translation with an index glossary. Simultaneously, habitual terms used in countries using English as the mother tongue have been considered in the translation and compilation.



In order to ensure academic standards and an accurate English translation of this textbook series, we invited international experts of the CM profession and the English language to review and revise the English translation.

Professor Zheng Souzeng, the former President of Beijing University of Chinese Medicine, was the Director of the Compilation Board. Dr. Warner Fan of the United States is the English Consultant who has gone through the whole text to ensure the language consistency throughout the text.

International advisors invited include Ryan Thompson from Canada, Ioannis Solos from Greece and Georgia Ross from the United States of America. They and others have given much help in the compilation of this series of books. We are grateful to them for very useful suggestions and revisions.

## Note on Conventions Used in the Text

Several conventions of usage have been adopted in the English version of this textbook, and are intended to make the students' task easier.

A number of concepts in traditional Chinese medicine cannot be adequately translated. The terms representing them are therefore presented in transliteration, using the *Pinyin* system. Where the term is already in common usage but in this text are used as technical terms, they are capitalized. Examples include Qi, Yin, Yang, the Five Elements (Metal, Wood, Water, Fire, Earth), the six exogenous pathogenic evil (Wind, Heat or Summer Heat, Cold, Phlegm, Dampness, Fire) and their endogenous counterparts, all the acupoints, the four Levels (Defensive, Qi, Nutritive, and Blood), etc. Where there is no risk of confusion between ordinary and technical usage, they are not capitalized. Examples include the zang and fu organs, the sanjiao, etc.

In the discussion of CM *materia medica*, all materials are referred to as "herbs," even though many are derived from animal or mineral sources. This is the time-honored approach, as comparable medieval European books are often entitled "Herbals." In traditional CM, herbs are seldom prescribed alone. A prescription is referred to here as a "formula."

In addition, the name of each formula is given as one word, in *pinyin* transliteration of the Chinese name. In Chapter 7 of volume 2, which contains the main descriptions of the herbs, each entry is headed by the name of the herb in *pinyin* with its botanical name in brackets. The first line then gives the actual Chinese name in characters and the herb's pharmaceutical name (in Latin). When an herb is mentioned in the text elsewhere, at its first appearance it is followed in brackets by its genus name if it is described in Chapter 7 of volume 2 or by its botanical name, both genus and species, if it is not. It is hoped that doing so will make it easier for the student who chooses to look it up in the Appendix III: Herbs or in Chapter 7 of volume 2. When the herb is mentioned again in the same passage, only the name in *pinyin* is given.

Strictly speaking, the clinical manifestations of an illness include both symptoms and signs. The symptoms are supposed to be what the patient feels and perceives subjectively, whereas the signs are what the physician finds objectively. Take fever, for example. The symptom is the hot sensation, especially in the face and head, that the patient feels, whereas the sign is the higher than normal temperature as measured with a thermometer. In accordance with the recent trend towards simplification, however, in this text the word “symptoms” encompasses both symptoms and signs.

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## Note on Organization of Volume 2

This volume is composed of three parts.

Part I, in five chapters, introduces the meridians, the acupoints, and the principles of acupuncture and moxibustion.

Part II, in two chapters, introduces the properties and general clinical application of Chinese *materia medica* and provides a detailed description of 154 herbs that are most commonly used in treatment of patients and their illnesses.

Part III, in two chapters, introduces the principles of constructing composition of herbal formulas from herbs and provides a detailed description and analysis of 84 of the most useful formulas, in 17 categories. It also presents a large number of case studies.

We hope that armed with the knowledge gained from Volume 2 the learners and practitioners will be ready to learn about the clinical illnesses presented by patients.

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