

QUARTERLY NEWSLETTER

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Evidence-based Traditional Chinese Medicine Therapies for Dysmenorrhea

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Dysmenorrhea, painful menstruation, is a common women's disorder. This is also one of the common causes of teenage girls or young women's absence from school or work. According to a survey conducted in Sweden, 72% of 19-year-old girls had dysmenorrhea, which resulted in limitation of daily activities. Dysmenorrhea also causes financial losses. From an early report, dysmenorrhea was associated with annual productivity loss of 600 million work hours, and financial losses of up to \$2 billion dollars. Mostly, those who suffered from dysmenorrhea choose non-steroidal anti-inflammatory drugs (NSAIDs) as their first option of treatment. Besides, oral contraceptives are also commonly used for dysmenorrhea as a conventional therapy. However, the patients who did not have respond to the conventional treatment or who have side effects from the conventional therapy may seek alternative therapy. Traditional Chinese medicine (TCM) therapies, which have been practiced for more than two thousand years in China, are becoming more popular in the West in recent years. How effective is traditional Chinese medicine (TCM) therapies for dysmenorrhea? How does it work? Lately, some clinical studies were conducted to investigate the efficacy and the mechanism of TCM treatment for dysmenorrhea.

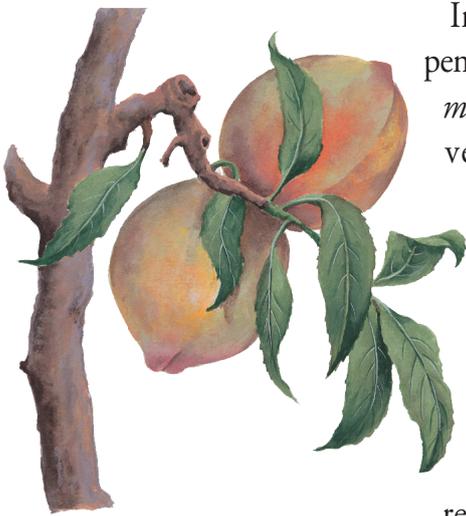
Dysmenorrhea can be classified into primary and secondary dysmenorrhea. Primary dysmenorrhea is defined as painful menstruation associated with normal pelvic anatomy. Whereas, secondary dysmenorrhea is defined as painful menses associated with pelvic pathology, for example, endometriosis (the presence of endometrial tissues outside uterine cavity). Most patients are categorized into primary dysmenorrhea. The typical clinical presentation is characterized by cyclic pelvic pain before or at the onset of periods, frequently associated with blood clots, in a woman in her 20's to 40's.

According to TCM, the pathogenesis of dysmenorrhea may be caused by negative emotions (such as anger, or emotional stress), cold and dampness invasion, over-exertion or chronic illness.

Based on patients' clinical manifestations including menstrual history, symptoms, and tongue and pulse findings, the patterns of dysmenorrheal patients are identified as excess or deficiency, heat or cold, or combined. Most patients are categorized into the one the following patterns or combinations: *qi* stagnation and blood stasis, excess cold congealment, dampness-heat accumulation, *qi* and blood deficiency, *yang* deficiency with cold,



kidney and liver deficiency. Different formulas will be prescribed for different patterns. The commonly used formulas include “*Dang Gui & Bupleurum Formula*” (*Xiao Yao San*); “*Persica, Carthamus & Dang Gui Four Combination*” (*Tao Hong Si Wu Tang*); “*Drive Out Blood Stasis Below the Diaphragm Decoction*” (*Ge Xia Zhu Yu Tang*); “*Drive Out Blood Stasis in the Lower Abdomen Decoction*” (*Shao Fu Zhu Yu Tang*); “*Dang Gui & Evodia Combination*” (*Wen Jing Tang*); “*Regulate Liver Decoction*” (*Tiao Gan Tang*).



In TCM theory, the penetrating vessel (*chong mai*) and directing vessel (*ren mai*) are essential to the regular and smooth menstruation because both vessels originate from the kidney and the kidney are closely related to the uterus.

Disharmony between *chong mai* and *ren mai* is thought to be one of the causes of dysmenorrhea. A study in 2004 reported lower electrical conduction volume on *LU7 (lieque)*, the confluent point of *ren mai*, and higher electrical conduction volume on *SP4 (gongsun)*, the confluent point of *chong mai*, was found among dysmenorrheal patients than the non-dysmenorrheal group on their first day of menstruation.

How does the acupuncture work in the treatment of dysmenorrhea? Is it due to the local effect or through a central mechanism? To investigate the mechanism of acupuncture, one study showed that acupuncture at right-sided *SP6 (saninjiao)* activated the pain-related brain areas on the same side, opposite side, or both sides of six dysmenorrheal

patients. These changes were detected by positron emission tomography (PET).

How does the herbal formula work? In western medicine, dysmenorrhea is thought to be caused by an increased release of prostaglandin $F2\alpha$, which is secreted from the uterine endometrium. A variety of formulas have been used for treatment of dysmenorrhea. “*Dang Gui & Evodia Combination*” (*Wen Jing Tang*) one of the most commonly used herbal formula for dysmenorrhea, has been reported to suppress the $PGF\ 2\alpha$ -induced uterine contractions of rats in vitro. Interestingly, this formula had no effect on spontaneous contractions of rats’ uterine myometrium.

Regarding the evidence-based acupuncture studies, a clinical research report of 30 dysmenorrheal patients in 2003 showed acupuncture treatment on *Du20 (baihui)*, *LI4 (hegu)*, *Ren3 (zhongji)*, *Ren4 (guanyuan)*, *Ren6 (qihai)*, *GB34 (yanglingquan)*, *UB23 (shenshu)*, *SP6 (sanyinjiao)*, and *Shenmen* was more effective than the placebo (pseudo-acupuncture) group (by superficial intracutaneous acupuncture without “*de qi*”). One earlier clinical study in 1987 also reported patients receiving real acupuncture on *SP4 (gongsun)*, *K3 (taixi)*, *ST36 (zusanli)*, *ST30 (qichong)*, *Ren2 (qugu)*, *Ren4 (guanyuan)*, and *Ren6 (qihai)* had better improvement rate than the non-acupoint acupuncture group in a one-year follow-up period. Acupressure is a non-invasive technique, which is commonly used in self-care. A clinical study in 2002 reported, among 216 high school adolescents with dysmenorrhea, acupressure was as effective as the ibuprofen (a non-steroidal anti-inflammatory drug) in pain relief.

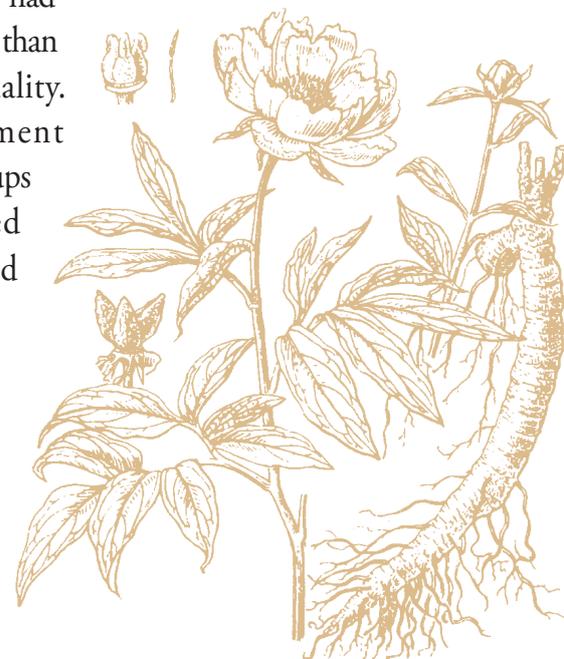
Another question regarding acupuncture may be raised: “Is there any difference in clinical efficacy between different acupuncture prescriptions?” A clinical study involving 60 patients divided primary dysmenorrheal patients into three groups:

1. back-*Shu* & front -*Mu* acupuncture group with acupoints of *UB 18 (ganshu)*, *UB20 (pishu)*, *UB23 (shenshu)*, *Ren3 (zhongji)*, *Ren4 (guanyuan)*, *ST25 (tianshu)* and *Du20 (baihui)*, 2. conventional acupuncture group with acupoints of *Ren4 (guanyuan)*, *Ren6 (qihai)*, *SP6 (sanyinjiao)*, *SP8 (Diji)*, *ST36 (zusanli)*, *LV3 (taichong)*, *LI4 (hegu)*, and 3. Western medicine group with an analgesic. It was found that the “back-*Shu* & front-*Mu*” group was superior to the conventional acupuncture group and western medicine group.

Recently, a variety of herbal formulas have been used to evaluate the clinical efficacy in the treatment of dysmenorrhea. In a clinical trial, primary dysmenorrheal patients with the patterns of “cold, deficiency, *yin* and blood stasis” were treated with either “*Dang Gui & Peony Formula*” (*Dang Gui Shao Yao San*) or placebo pills. During the 2-menstrual-cycle treatment period, improvement of the dysmenorrheal pain was observed in both groups, but it was better in the herbal group. The herbal group even had a significant reduction in the consumption of analgesics in the 2-menstrual-cycle follow-up period. Additionally, a single herb, rose, is thought to have the anxiolytic effect by “regulating the liver *qi*”. One study of 130 female adolescents with primary dysmenorrhea showed that the patients who drank rose tea had less menstrual pain and anxiety as compared with the controlled group. Some other clinical studies were conducted to compare the clinical efficacy of Chinese herbal medicine to western medicine. In two studies, the herbal group was given the basic herbal formula with modifications according to the patient’s patterns. In the other two, the treatment group was treated with a fixed herbal formula. In all these studies, the improvement rate is more than 90% and superior to western medicine (analgesics) group.

Other therapies including moxibustion, auricular point pressing and *tui-na* massage were also studied. Moxibustion is a special TCM therapy that applies heat by burning specific herbs on certain acupuncture points to warm up meridians, and expel the cold. In a study involving 40 dysmenorrheal patients with deficiency pattern, moxibustion was randomly given on either *LU7 (lieque)* or *Ren 4 (guanyuan)*. The pain improved in both groups, but there was no difference in the improvement rate in both groups. In auricular point pressing, a clinical study reported that improvement was observed in both auricular pint pressing group and acupuncture group. No difference in improvement rate was found in both groups. For *Tui-na* massage, in a clinical study, *tui-na* massage was applied to 62 patients with primary dysmenorrhea on back-*shu* points, lower back, “Penetrating vessel” (*ren mai*), lower abdominal points and *ST 36 (zusanli)*, *SP 6 (sanyinjiao)*, and *SP 10 (xuehai)*. The controlled group was treated with “*qu tong pian*” (an analgesics). The result showed that the *tui-na* massage group experienced more pain relief and was superior to the western medicine group.

Combined treatment with two or three different modalities is common in the clinical setting of TCM clinic. In four studies identified, the combined treatment group had a better response than the single modality. The improvement rates of the groups with combined therapies ranged from 95.38% to 98.5%. The studies included the



herbal medicine combined with acupuncture versus indomethacin, herbal formula plus acupuncture versus herbal formula only, acupuncture plus moxibustion versus herbal medicine, and acupuncture with moxibustion versus herbal medicine.

Conclusively, most clinical studies of TCM therapies for dysmenorrhea showed promising results. These studies showed that acupuncture,

herbal therapy or other modality is more effective than or as effective as the controlled or placebo group. Combined therapies showed better result than single modality. Hence, TCM is a valuable alternative treatment for dysmenorrhea. However, many studies were not well designed. Hence, comprehensive and well-designed clinical trials in TCM therapies for dysmenorrhea are needed to establish a firm ground for their clinical efficacy. ⚠

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Publications

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- "L-asparaginase-induced Cerebral Infarction-A Case Report", J-T. Li, H-Y. Chu, S-G. Hsu, the 131st Scientific Meeting of Taiwan Association of Pediatrics, also in ACTA Paediatrica Sinica, Vol. 33C, pp53, 1992 (English)

Depression

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As we know, in the recent years, more and more people are suffering from depression despite the difference in age, sex, race, and occupation. It is an emotional disorder that affects millions of people worldwide. Depression is a chronic emotional disease that should be evaluated and addressed cautiously before it leads to other major health problems.

Depression, also known as Melancholia in medical terminology, is identified as a mental disorder or depressed in mind and spirit. This disorder consists of various symptoms, including insomnia, unstable emotion, depressed mood, feeling of weakness, lack of appetite, low energy, hyper-somnia, etc. These various symptoms could be caused by emotional stress, working pressure, pressure from study, postpartum stress, etc. In TCM principle, depression is a disease caused by prolonged stagnant of *qi*, blood, phlegm, and dampness. And the three major organs associated with depression are liver, heart, and spleen.

There are some other causes of depression:

- Genetics or family history of depression.
- Life changes such as death of a loved one, unemployed, or even a happy event.
- A chemical imbalance in the brain.
- Certain illnesses or medications
- Using drugs or too much alcohol.

Most emotional stresses can cause injures to these organs: liver, heart, and spleen. For example, anger injures the liver, which causing *Liver-Qi* stagnation and blazing *liver fire* that disturbs the mind. Pensiveness injures the spleen, which leads to deficient *Qi* and blood. When *Qi* and blood are deficient, they fail to nurture the heart. Moreover, overexertion and excessive thinking exhaust heart

blood, which can fail to nourish the spirit.

According to the cause of depression, liver problems are very common in the clinical manifestations such as stagnation of *Liver-Qi*, *Liver-Blood* deficiency, and *Liver-Ying* deficiency. Based on the concept of Chinese internal medicine, our livers cause all emotional problems, and every emotional problem will injure the liver.

Depression can affect anyone. But with treatment, most people can start feeling better. Through traditional Chinese medicine (TCM) therapy, the herbs can help restore the brain's chemical imbalance and return to normal functioning. They also can help relieve symptoms of depression. These medications are not considered as habit-forming, but their use needs to be closely monitored as part of a supervised treatment plan.

THERE ARE SEVERAL TYPES OF DEPRESSION AND TREATMENTS

Postpartum Depression:

There are 15 percent of women after child birth who will experience Postpartum Depression, and 85 percent of women will experience the Baby Blues which is a milder and shorter depression after giving birth. The symptoms of postpartum depression are unstable emotion, yawning frequently, sadness and desire to cry, absentmindedness, etc. These symptoms are caused by heart blood deficiency and *liver qi* stagnation. In most Acupuncturists' experiences, the popular formula is "*Licorice and Jujube Combination*" (*Gan Mai Da Zao Tang*). There are some herbs such as "*Curcumae*" (*Yu Jin*), "*Albiziae Cortex*" (*He Huan Pi*), "*Zizyphi Spinosi Semen*" (*Suan Zao Ren*), which can be added to

“Licorice and Jujube Combination” (*Gan Mai Da Zao Tang*). “*Curcumae*” (*Yu Jin*) enters the Liver Channel to invigorate the blood and promote the circulation of *qi*. “*Curcumae*” (*Yu Jin*) also enters the Liver and Gallbladder to drain dampness. “*Albizziae Cortex*” (*He Huan Pi*) is commonly used for depression because it can relieve Liver constraint and calm the spirit. “*Zizyphi Spinosi Semen*” (*Suan Zao Ren*) treatment function for depression is to nourish the Heart *yin*. It also calm the mind and relieve liver and heart blood deficiency.

Blood Stagnation Depression:

Blood Stagnation Depression is defined by the experience of mild and long term depressed mood. It is identified as being depressed for 2 years or more. In clinical experiences, the symptoms of blood stagnation depression are headache, piercing pain, lack of appetite, irritability, and lack of self-confidence. These symptoms are caused by heart and liver blood stagnation. In most Acupuncturists’ experiences, the popular formula is “*Persica & Achyranthes Combination*” (*Xue Fu Zhu Yu Tang*) used in conjunction with “*Curcumae*” (*Yu Jin*), “*Albizziae Cortex*” (*He Huan Pi*), “*Zizyphi Spinosi Semen*” (*Suan Zao Ren*). The formula for this blood stagnation depression is designed to move blood, dispel blood stasis, and relieve pain. “*Curcumae*” (*Yu Jin*), “*Albizziae Cortex*” (*He Huan Pi*), “*Zizyphi Spinosi Semen*” (*Suan Zao Ren*) serve the same function as the formula in postpartum depression.

Chronic Depression:

Chronic depression is when patient suffers from depression for more than 3 years, and are undergoing psychotherapy. In chronic depression, the symptoms are insomnia, lack of appetite, lack of self-confidence, weakness and fatigue, poor digestion, feeling of helplessness, and restlessness. These symptoms are caused by heart blood and spleen *qi* deficiency. In most Acupuncturists’ experiences, the popular formula is

“*Ginseng & Longan Combination*” (*Gui Pi Tang*) with “*Curcumae*” (*Yu Jin*), “*Albizziae Cortex*” (*He Huan Pi*). The formula function in chronic depression is nourishing heart blood and spleen *qi*. It also calms the spirit. “*Curcumae*” (*Yu Jin*) also enters the Liver and Gallbladder to drain dampness. “*Albizziae Cortex*” (*He Huan Pi*) is commonly used for depression because it can relieve Liver constraint and calm the spirit.

Constrained Liver and Stomach Depression:

This classical depression is caused by *Liver Qi* stagnation and stomach heat. The symptoms of constrained liver and stomach depression are irregular, and poor appetite, headache, dizziness, dry mouth and eyes, and constipation. The formula for this depression is “*Bupleurum & Peony Formula*” (*Jia Wei Xiao Yao San*) plus “*Curcumae*” (*Yu Jin*), “*Albizziae Cortex*” (*He Huan Pi*). “*White Peony*” (*Bai Shao*) and “*Angelicae Sinensis Radix*” (*Dang Gui*) in this formula are nourishing liver blood and *yin*. “*Bupleuri Radix*” (*Chai Hu*) spreads Liver *qi*. “*Attractylodis Macrocephalalae Rhizome*” (*Bai Zhu*) and “*Poriae Cocos*” (*Fu Ling*) strengthen the spleen *qi*.

There are other important ways to relieve depression:

- Talk with a trusted family member, friend, or co-worker.
- Do something to relax and lift spirits such as visiting a favorite place, reading, taking a walk with a friend, etc.
- Getting some exercise, at least 30 minutes on most days of the week. But be sure to consult a health-care provider before starting an exercise program.
- Avoid any negative thoughts and feelings because they are part of depression.

Conclusion:

Depression is an emotional disorder that should be valued and addressed cautiously. Chinese herbs are effective and definitely much safer than other drug therapy. ☸



Green Tea Extract *A New Link to Weight Loss?*



Any natural and safe herbal ingredients that have thousands years of clinical history with wide variety of therapeutic effects should worth some attention. Green Tea, one of the world's most popular daily drinks, thus falls into that group. The Japanese have been enjoying and experiencing the benefits of Green Tea for more than 4,000 years.

Nowadays, Green Tea has been scientifically proven to exhibit anti-oxidative effect and to prevent free radicals from damaging our cells that could lead to aging and cancer. There is also research indicating that drinking Green Tea helps promote healthy cardiovascular system by lowering total cholesterol levels, as well as increasing the ratio of the good cholesterol to the bad cholesterol, HDL and LDL.

In addition, a latest clinical study has shown that consuming Green Tea extract may help control body weight, body mass index (BMI), and waist circumference. While some may argue that the effect may be contributed by the caffeine content in Green Tea, the researchers have ruled out the impact of caffeine by administered the two test groups with Green Tea extract of same caffeine content, whereas the group that took the Green Tea extract with higher catechins, such as EGCG, ECG, EC etc, exhibited significantly greater weight reduction effect. This led the scientists to link the positive correlation between the catechins of Green Tea extract with metabolism and weight control.

Green Tea extract leads to a reduction in body fat

Indicator	Group	Week 0	Week 12	Change at 12 Wk
Weight ¹ (Kg)	Control	73.8 ± 1.3	72.5 ± 1.4	-1.3 ± 0.3
	Green tea extract	73.9 ± 1.8	71.5 ± 1.7	-2.4 ± 0.5
BMI ¹ (Kg/m ²)	Control	25.0 ± 0.4	24.6 ± 0.4	-0.4 ± 0.1
	Green tea extract	24.9 ± 0.4	24.1 ± 0.4	-0.8 ± 0.2
Waist ^{1,2} (cm)	Control	87.8 ± 1.1	86.2 ± 1.2	-1.6 ± 0.4
	Green tea extract	87.9 ± 1.4	84.5 ± 1.3	-3.4 ± 0.5
Body fat mass ^{1,2} (Kg)	Control	19.5 ± 1.0	18.8 ± 1.1	-0.7 ± 0.3
	Green tea extract	19.7 ± 0.8	18.3 ± 0.9	-1.4 ± 0.3

Twenty-five healthy men with similar BMI were divided into 2 groups, those who took green tea extract with high catechins content and the control for 12 week. After 12 weeks, body weight, BMI, waist circumference and body fat mass of those in green tea extract group were significantly lower than themselves before¹ (P<0.01) and the control² (P<0.01)

Am J Clin Nutr, 2005, v81, p122

Red Yeast Rice *Protector of Cardiovascular System*

#1 Killer of the World

According to the WHO, cardiovascular disease (CVD) ranks first in world's leading cause of death. An estimated 17.5 million people died from cardiovascular disease in 2005, representing 30 % of all global deaths. It is well established that CVD is mainly caused by accumulation of cholesterol in blood vessel that prevents blood from flowing to the heart or the brain. Unhealthy diet is the primary cause for fatty build-up. Fortunately, we can control it by taking healthy natural food with established efficacy in helping lowering blood cholesterol.



Benefits of Monascus Purpureus

Red Yeast Rice is a reddish purple fermented rice, which acquires its colour from being cultivated with the Monascus Purpureus, and is served as food in many Asian countries. It contains several compounds collectively known as Monacolins, substances known to inhibit cholesterol synthesis.

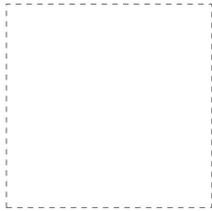
Tremendous historical reference and human studies have reported that Red Yeast Rice helps improve circulation. In Traditional Chinese Medicines, Red Yeast Rice or *Hong Qu* belongs to sweet flavor and warm essence. It strengthens spleen and stomach, promotes digestion and invigorates blood circulation. A recent clinical study conducted at University of California show that daily intake of Red Yeast Rice for 8 weeks lower blood levels of total cholesterol, low-density lipoprotein/LDL (so called the bad cholesterol) and triglyceride content. On the other hand, those who took placebo have no such effect, suggesting the significant effect of Red Yeast Rice to help maintain healthy blood cholesterol level.

Monacolin K Reduces Patients Blood Parameter

Biomarker	Group (N=83)	Week 0	Week 8	Week 12
Triglycerides	Control	1.61 ± 0.52	1.60 ± 0.59	1.65 ± 0.53
	Monacolin K	1.50 ± 0.54	1.33 ± 0.46*	1.40 ± 0.50*
LDL Cholesterol	Control	4.65 ± 0.78	4.63 ± 0.83	4.53 ± 0.85
	Monacolin K	4.47 ± 0.70	3.47 ± 0.70*	3.49 ± 0.70*
Total Cholesterol	Control	6.59 ± 0.75	6.57 ± 0.93	6.47 ± 0.93
	Monacolin K	6.47 ± 0.78	5.38 ± 0.80*	5.43 ± 0.80*

83 Patients with High Blood Lipid Consumed 2.4 g of Red Yeast Rice for 8 straight weeks. Blood Triglycerides, LDL, and total Cholesterol were compared between those who consumed Monacolin or placebo control. Reduction were statistical significant *p<0.01.

Am J Clin Nutr, 1999, v69, p231



- ✓ Mood swing
- ✓ Fatigue and trouble sleeping
- ✓ Hot flushes or night sweat
- ✓ Anxiety
- ✓ Stress



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