

SHAO YANG DISEASE

Half-Exterior-Half-Interior Pattern
Latency & Harmonizing Strategy

ABSTRACT

Shao Yang Disease is one of the less understood patterns in the contemporary TCM curriculum. Originated around 210 AD, it marked a major breakthrough in clinical science and has left great influences in clinical practice since. With an understanding to its revolutionary “harmonizing” treatment strategy and its pathology that involves with latency mechanism, we can gain an insight into treating latent disease and the grey area between Exterior and Interior patterns – an area not covered by the TCM pattern differentiation.

Allen Tsaur

Blaiwas Core Group: Fire Project

Table of Contents

Introduction to Shao Yang Disease	2
Signs and Symptoms for Shao Yang Disease	3
Source Text (Zhang, 210 AD)	3
Contemporary Commentaries	4
Abdominal Diagnosis	5
Summary for Signs and Symptoms of the Shao Yang Disease	6
Pathology for Shao Yang Disease	6
Source Text (Zhang, 210 AD)	6
Summary for Shao Yang Disease Pathology	7
Treatment for Shao Yang Disease	8
Source Text (Zhang, 210 AD)	8
Clinical Reasoning for Shao Yang Disease	9
Shang Han Lun Treatment for Shao Yang Disease	10
Xiao Chai Hu Tang (Minor Bupleurum Decoction)	10
Chai Hu Gui Zhi Gan Jiang Tang (Bupleurum, Cinnamon Twig and Dried Ginger Decoction)	11
ACP Treatment Strategy	12
The Foundation of Chinese Medicine	12
A New Scientific Commentary of Shang Han Lun (Cheng, 1954)	12
Dai Mai Treatment	13
Shu-Stream Points & Source Points	13
More Points to Be Considered	14
Other Clinical Considerations (Extraordinary Connection of Zang-Fu)	15
Conclusion	16
Reference	17
Appendix A: Function of Shu Stream Point according to Classical Texts:	18
Appendix B: 臟腑通治 Mutual Treatments of the Zang-Fu (Tang, 1892)	19

Introduction to Shao Yang Disease

For those who have not studied herbalism or those who have not studied Shang Han Lun, the term “Shao Yang Disease” may be foreign. This is a disease that was first recorded in Lingshu and Suwen around 100 BC. It was later developed into sophisticated clinical conception by Zhang Zhongjing, the author of Shang Han Lun, around 200 AD.

When Zhang expanded the clinical applications of Shao Yang Disease, it was a revolutionary step in clinical science. Before his contribution, practitioners mostly relied on three primary ways of treating illnesses, at both the exterior and the interior level. They are: causing sweat (for exterior disease), causing vomit (interior disease in upper/middle burner), and purging through bowel or urine (interior disease in middle/lower burner).

Zhang recognized that clinically, there are diseases that exist between the exterior and interior levels. He coined it, 半表半裡證 (a pattern that is half exterior and half interior). For this type of disease, it is not suitable to cause sweat, as it is too deep and the body is too weak for sweating to be effective; likewise, it is not suitable to purge, as there is still an exterior pattern and purging would by-pass the body's already weakened defense mechanism and bring the pathogen deeper into the body. To treat it, he proposed an innovative treatment strategy of “harmonizing.” Zhang did not leave behind extensive commentaries for his work. His works only survived in fragments and did not re-emerge until 900 years after his passing in 1065 AD. Much was lost in the 400 years of civil war and barbarian occupations quickly after his passing. What the disease is about, is still under heavy debate and investigation.

Some believe it to be a specific complication of wind-cold invasion. They would see Shao Yang Disease as a stage of wind-cold invasion, where the pathogen has almost reached the interior body – so this pattern is simply a transitioning stage between the Yin and Yang, between exterior and interior patterns.

Some see it more broadly, as a disease that re-occurs at certain time intervals. They further expand the understanding of Shao Yang Disease not only as a transition state during an exterior invasion, but also as a dynamic state of latency, which keeps recurring when the Upright Qi is weakened or when the Evil Qi is enhanced by the environment/climate.

In short, this brings us to the important question about this presentation: Why should I care about this Shao Yang Disease? Well, the study of Shao Yang disease can offer insight into the following areas:

- Diseases that fall in the grey area of “half interior and half exterior”
- Mechanism of latency diseases
- The treatment strategy of “harmonizing”

I hope that by the end of this study, you have a glimpse of the perspective beyond the fundamental scope of TCM, which in Chinese is actually called “Basic Theories of Chinese Medicine” – you are supposed to go beyond it once you finish your institutional training.

The world does not exist in the black-and-white view of the Eight Principles, which is evident as we in clinic often observe mixed conditions of both interior and exterior, hot and cold signs at the same time. In the section regarding signs and symptoms of Shao Yang Disease, we will see what it looks like. Once we grasp the clinical reality that diseases could exist between the poles dictated by Eight Principles, then we can discuss the mechanism that causes this mix-bag of condition. In the pathology section of this

study, we will discuss the classical mechanism of Shao Yang Disease and tie in the topic of latency. Finally, after we are able to identify Shao Yang Disease and understand its underlying mechanism, we are going to discuss the revolutionary strategy of “harmonizing” – which many have taken for granted, or even practiced it without knowing its origin or knowing what “harmonizing” means.

To get you more interested in this, there is a famous saying in herbal medicine:

When giving one Chai Hu Decoction, even if he misses the pattern completely, he is not far off.

Chai Hu (bleurum) is the main medicinal prescribed to treat Shao Yang Disease. The above quote simply says that harmonizing Shao Yang will almost always bring some benefit to the patient, even if the diagnosis is completely off. Today, the most prescribed patent formula in Japan is Shosaikoto (where the chief herb is Chai Hu), which at one point occupied 30% total market share (Zheng & Liang, 2008). In addition to Shosaikoto, three other top ten best-selling patent formulas are also Shao Yang formula (Jia & Sun, 1999). In Taiwan, the most prescribed patent formula is Jia Wei Xiao Yao San, at 7% market share in 2000 (Liao, 2001), which is also a Shao Yang formula.

By the end of this presentation, hopefully you will have some insight into why this is the case.

Signs and Symptoms for Shao Yang Disease

Source Text (Zhang, 210 AD)

SHL Line 263 (Essential Features of Shao Yang Disease)

In Shao Yang Disease, [there is] a bitter taste¹ in the mouth, dry throat, and dizzy vision.

SHL Line 266 (Features of Shao Yang Disease)

When shifted into Shao Yang, [there is] a hardness and fullness under the rib-side, dry retching and inability to eat, and recurrent² cold and heat... the pulse is sunken and tight

SHL Line 96 (Xiao Chai Hu Tang pattern – the main Shao Yang Disease remedy, a yang³ pattern of the half-interior-half-exterior disease)

[There is] recurrent cold and heat; [the person] suffers from fullness in the chest and rib-side, taciturnity with no desire for food or drink, heart vexation and frequent retching... Or possibly [there is] vexation in the chest and no retching, or thirst, or pain in the abdomen, or a hard glomus under the rib-side, or palpitations below the heart with inhibited urination, or absence of thirst with mild generalized heat, or cough.

SHL Line 147 (Chai Hu Gui Zhi Gan Jiang Tang pattern – another main Shao Yang Disease remedy, an yin pattern of the half-interior-half-exterior disease)

After promoting sweat, [there is] fullness in the chest, rib-side has mild binding, inhibited

¹ Clinically, patients often notice it when they wake up in the morning. The character “苦” can also mean “any discomfort,” so this should not only be limited to bitter taste.

² Most translations would translate it as, “alternating chill and fever” – Professor Huang Huang points out that the term 往來寒熱 should be translated as: “any cold or heat illness that comes and goes, often in certain time intervals” as noted in Line 97 – which is cited in the later pathology section

³ It is very important to note that Yang most likely meant something different back in 200 AD. Professor Hu Xishu suggested, the term “Yang” in the ancient time most likely means Jinye-fluid, as many passages in SHL would not make sense if we are viewing it as today’s hot, energizing Yang Qi. I personally see it as Jin-Yang/Wei matrix.

urination, thirst without retching, sweating only from the head, recurrent cold and heat, and heart palpitation.

SHL Line 101 (Determination of the Shao Yang disease)

When there are signs for Chai Hu [pattern], only one sign [means that] this is [the pattern], they do not all have to be present.

SHL Line 143 & 145 (Heat Entering the Blood Chamber)

When a woman with wind strike has heat and cold, and the menstrual flow happens to arrive... after the heat fades, the pulse is slow, and [there is] generalized coolness, fullness under the chest and rib-side, [and] signs like chest bind and delirious speech, this means that the heat has entered the blood chamber.

When a woman [contracts] cold damage and the menstrual flow happens to arrive and she is clear[-headed] during the day and speaks deliriously in the evening, as if seeing ghosts, this means that the heat has entered the blood chamber.

JGYL Line 4.1 (Indications for Cold-type Malaria)

The pulse of malaria is naturally stringlike... when it is stringlike and slow, [this indicates] cold... [treat it by] warming

JGYL Line 21.2 (Postpartum Depression and Veiling)

Postpartum depression⁴ and veiling⁵ [manifested in] a slightly weak pulse, retching and inability to eat, unexpectedly hard stool, and sweating from the head only.

JGYL Chapter 21 Addendum (Exposure to Wind during Childbirth)

Woman's bitter vexing heat in the four limbs from exposure to wind in childbed... with headache

Contemporary Commentaries

There are four hallmark signs for the Shao Yang Disease:

- Chill and/or fever that comes and goes, or anything that recurs in regular intervals
- Distension and fullness under the rib-side and epigastrium regions
- Taciturnity with no desire for food or drink
- Heart vexation and frequent retching

As long there is one of the above manifestation from above, then one must consider the possibility of having a Shao Yang Disease (Feng and Zhang, 2009). Yet of the above clinical signs, two are of the utmost importance:

Distension and fullness under the rib-side and epigastrium regions can show up as swelling, pain, fullness, hardness, sensitivity, or pressure. It also includes breast tenderness and hardness for female, and gallbladder pain.

Chill and/or fever that comes and goes, or anything that recurs in regular intervals can be: both subjective and objective sensation of recurring chill and fever; heat in the upper torso but

⁴ Depression denotes feelings of oppression and discomfort

⁵ Veiling denotes dizzy head and clouded vision, as if the head were covered by something

cold in the lower body; vexation and heat in the chest but cold in limbs; vexation, restlessness, and heat when covered with a blanket, but feeling cold to the bone with shivers when the blanket is removed; very sensitive to temperature change; anything that comes and goes with a regular interval, such as menstrual pain that occurs monthly, seasonal allergies, and latent disease that occurs once every year.

Below are general signs, symptoms, and appearance of the Shao Yang Disease observed by Professor Huang Huang, who was trained in the Kempo constitutional medicine (Huang, 2004):

- Main hallmarks
 - Pain, swelling, distension, soreness, sensitivity, hardness, or nodules along the GB or TE channel, such as the ribcage region, neck, shoulders, temples, hips, lower abdomen and groin.
- Appearance
 - Medium size or slightly underweight body type; slightly dark yellow complexion, or greenish-yellow, or greenish-white, without luster; dry skin, tensed muscles.
 - Tensed and aged tongue texture, could be dusky or with purple dots; the tongue is not pale nor swollen; normal tongue coat or on the dry side
 - Pulse is generally bow-string and/or thin
- General symptoms
 - Mostly subjective conditions: sensitivity to the environment, feeling of chill and fever at times, emotional swings, appetite easily affected by emotions.
 - Stagnant oppression in chest ribcage region, sometimes painful upon palpation; soreness, heaviness, tightness, crampy sensation in neck and shoulders; cold limbs; fullness and pain in the lower abdomen.
 - Irregular menstrual cycle; breast tenderness and/or swelling, chest oppression, vexation, restlessness, abdominal pain during menstrual cycle; dark menstrual blood or with clots.

Abdominal Diagnosis

Below are a few Kempo abdominal patterns for Shao Yang formulas (Katsubunrei, 1809).



Since this is not an herbal course, I am not going to differentiate the differences and the clinical reasoning behind. What is important here is what they share in common: **the epigastrium and rib-cage region**. When palpating the patient under the ribcage and hooking/pressing inward, as shown in the first picture, if there is pain, soreness, hardness, distension, any abnormal objective or subjective sensation other than pressure – then it is Shao Yang disease.

Summary for Signs and Symptoms of the Shao Yang Disease

Before we even talk about Shao Yang Disease, we must talk about what Yang Qi means. The contemporary definition of “Yang Qi” may be quite different from its original meaning in 200 AD. Today’s definition of Yang Qi carries a great influence from the later 17th and 18th century herbal tradition: namely, the Mingmen (or Warming & Tonifying) School and the Wenbing (Warm Disease) School. The original definition of “Yang Qi” is more about the Jin-Wei matrix (Feng and Zhang, 2009), which focuses on the fluid mechanic of the body in the superficial region, which is quite different from today’s hot, warming, invigorating Yang Qi.

Thus, the Yang diseases all have sweats, as the body is still able to utilize fluid in the body to push the pathogens toward the exterior. In Yin disease, sweating is generally absent, as it is no longer available. This will become evident when we look at the Shang Han Lun formulas when we discuss treatment method, which always ensures the availability of the fluid, as Chen Xiuyuan famously stated, “all Shang Han Lun is about can be consolidated into three words: ‘preserve the fluid’” (Chen, 1803/2013).

In this presentation, two variants of Shao Yang Disease will be presented: a Yang variant and a Yin variant. The Yang variant of Shao Yang Disease (Line 96) means that the body can still utilize “Yang Qi” (or Jin-Wei matrix) to keep the pathogens at bay in the half-interior-half-interior portion of the body. The Yin variant of Shao Yang Disease (Line 147) means that the body does not have sufficient “Yang Qi” to keep the pathogens at bay anymore, and now have to utilize Yin substances. In the latter case, the pathogens are on their march toward the interior diseases.

Back to the signs and symptoms of the Shao Yang Disease. Based on the source text and later commentaries, it has a great variety of signs and symptoms. It could be a complication from wind-cold invasion; it could be a latent disease that occurs recurrently; it could be malaria, menstrual disorder, Shen disturbance, postpartum depression, childbirth complication... etc. The list simply goes on.

To make it plain and simple, I would highly recommend starting with **palpating the epigastrium region and ribcage region**, as suggested by Professor Huang Huang (Huang, 2010) – in my personal experience, I have found it to be very reliable and efficient. After which, identify other signs and symptoms to justify the diagnosis.

Pathology for Shao Yang Disease

Source Text (Zhang, 210 AD)

SHL Line 97 (Pathology for Shao Yang Disease)

When the blood is weak and the qi is exhausted, the interstices are open, and because evil qi enters [the body] and contends with upright qi, [there is] binding under the rib-side. The upright and evil qi struggle, [so there is] recurrent cold and heat that stops and starts periodically, and taciturnity with no desire for food or drink

SHL Line 148 (Zhang's discovery of half interior and half exterior disease**)**

[There is] sweating from the head, mild aversion to cold, cold extremities, fullness below the heart, absence of desire to eat, hard stool, and a pulse that is fine, this means binding due to diminished yang⁶; there must be exterior [signs] as well as interior [signs].

A pulse that is sunken [means] an interior disease. Sweating [only from the head] means the diminishing [state] of yang, [thus it cannot be a Yang Ming Disease (interior heat)].

If [there is] purely yin bind⁷, there can no longer be any exterior signs [since] everything has entered the interior. Here it is half in the interior and half in the exterior, [thus it cannot be a yin bind either].

Although the pulse is sunken and tight, it does not indicate Shao Yin Disease. Why [this is] so is because with Yin [disease] there will be no sweating and now, in the present case, sweat issues from the head; therefore, one knows [this] is not Shao Yin [disease].

SHL Line 144 (Pathology for Heat Entering Blood Chamber)

The heat has entered the blood chamber and the blood will bind, causing a malaria-like condition that occurs at [set] times.

JGYL Line 21.2 (Pathology for Postpartum Depression)

Postpartum depression and veiling... The reason for this is that blood is vacuous, and this causes reversal, which inevitably results in veiling... Blood vacuity and reversal in the lower body cause solitary yang to exit from the upper body; hence sweat exits [only] from the head. The reason why a woman after childbirth has a tendency to sweat is that yin has collapsed and blood is vacuous and thus yang qi⁸ alone is exuberant.

Summary for Shao Yang Disease Pathology

In the Foundations of Chinese Medicine, the pathology of Shao Yang Disease is described as:

In this pattern, the pathogenic factor 'oscillates' between the Greater-Yang and the Bright-Yang stages⁹: when it goes toward the Greater Yang, the patient has aversion to cold, when it goes towards the Bright Yang, the patient feels hot or has a fever. For this reason, the Lesser-Yang pattern is described as being 'half interior and half exterior'. This does not mean that it is half interior and half exterior in character but that the pathogenic factor oscillates between the Exterior and the Interior.

⁶ Mitchell et al translated 陽微結 "mild yang bind." Here I am re-translating it as "binding due to diminished Yang" – where binding indicates constipation, which corresponds to the rest of the passage; also now we know Yang means fluid, which is further supported by the thin pulse. So this is really the case of constipation due to the lack of Jinye fluid.

⁷ This "Yin bind" refers to the "Zang binding" in Line 128, which has signs of floating Cun pulse, small, fine, sunken, and tight Guan pulse, pain with palpation in epigastrium, unaffected eating and drinking, but frequent diarrhea.

⁸ Again, Yang Qi mentioned here is not what we typically think it is. In this case, the pulse indication mentioned in the previous section is a weak pulse, so this is certainly not an excess Yang pattern by the contemporary definition, which would have a forceful or rapid pulse. In this case, it is the case of excess Jinye fluid. One must cause sweat to restore the fluid balance in the body.

⁹ From a SHL perspective, this almost never happens. Both Tai Yang and Yang Ming states are states of repletion with plenty of Qi and fluid. Shao Yang state is a state of vacuity. It simply cannot oscillate between the two states.

Based on the modern scholarship and a simple reading of Line 148 above, the description above may not offer the complete picture of Shao Yang Disease. Once one reads through Shang Han Lun¹⁰, he will recognize that it is not only talking about the exterior diseases. Likewise, Shao Yang Disease does not only arise from the exterior invasion. The source of the pathology is always relevant, yet, it may not be crucial in clinical practices. What is more important is the underlying mechanism that produce this Shao Yang Disease:

Shao Yang Diseases occurs **when the blood is weak and the qi is exhausted, when the Evil Qi and Upright Qi are struggling to gain dominance**. With this, there is the hallmark of recurrent symptoms and the signs of both interior and exterior diseases, which Zhang recognized in Line 148.

Another argument against the view presented in the Foundation of Chinese Medicine is that no one is ever completely healthy. Any living beings are constantly interacting, struggling, and adapting with pathogens. This is not a process that begins when a person starts to get sick. He has this process ever since he was first conceived in his mother's womb. Whenever a person's Wei Qi fails to expel the pathogens completely, *which is often*, then the pathogens must be stored somewhere safely and securely in the body – Luo vessels, visceral membranes, lymph nodes... etc., you name it. This is how latency begins.

Sometimes, when the Upright Qi is strong, there is a chance of completely expelling the pathogens. But more often, the Upright Qi cannot do so, though they can usually keep the pathogens contained and there will be little or no symptom. If one day – *though realistically, it is not a question of "if," but "when"* – the Upright Qi is weakened, then it cannot contain the pathogens anymore and symptoms appear. Consequently, if the Upright Qi recovers, then symptoms disappear since they are contained again. This is the working mechanism of latency and why some symptoms re-occur. Shao Yang Disease is one manifestation of the latency disease.

Treatment for Shao Yang Disease

Source Text (Zhang, 210 AD)

SHL Line 264-265 (Contraindications for Shao Yang Disease)

When in Shao Yang... [there is] no hearing in either ear, the eyes are red, [and there is] fullness in the chest and vexation, one cannot [use] vomiting or purging, as vomiting and purging will [lead to] palpitation and fright.

[In] Shao Yang [pattern] one cannot promote sweating, as promoting sweating will [lead to] delirious speech, which belongs to the stomach¹¹. [If] the stomach is harmonized [there will be] recovery, [and if] the stomach is not harmonized, [there will be] vexation and palpitation.

SHL Line 98 (Contraindications for Shao Yang Disease)

When the pulse is slow, floating, and weak, and [there is] aversion to wind and cold, and warm extremities, and the physician purged two or three times, [there is] inability to eat, pain and fullness under the rib-side, yellow of the eyes, face and body. Stiffness of the neck and nape,

¹⁰ Recent scholarship suggests that Shang Han Lun was not the original title of the work. It was originally Tang Ye Jing Guang Yi (Comprehensive Commentaries of the Classic of Decoction). Wang Shuhe, the chief editor and preserver of Shang Han Lun, was most likely the person who was responsible for the name change in the title.

¹¹ This indicates the Yang Ming disease.

and difficult urination. After Chai Hu is given, there will be rectal heaviness. When originally there was thirst with retching following water intake, Chai Hu should not be given, and when food is taken [there will be] hiccup.

SHL Line 99 (Signs and treatment for combined Tai Yang, Yang Ming, and Shao Yang Diseases)

[There is] generalized heat [effusion] and aversion to wind, stiffness of the neck and nape, fullness under the rib-side, warm extremities and thirst, [then] Xiao Chai Hu Tang governs.

SHL Line 268 (Signs for combined Tai Yang, Yang Ming, and Shao Yang Diseases)

In combination of the three yang, the pulse is floating, large and rises above the upper bar¹². [There is] desire only to sleep and sweating after the eyes close.

SHL Line 143 & 145 (Treatment for Heat Entering Blood Chamber)

The heat has entered the blood chamber... one should needle Qi Men (LR-14), choosing this point in view of the repletion... do not assail the stomach Qi and the two upper burners, [because] recovery will be spontaneous

JGYL Chapter 4: Addendum from Wai Tai Mi Yao [Arcane Essentials of the Imperial Library] (Treatment of cold-type malaria)

A treatment for malaria with predominant cold and slight heat, or with only cold and no heat... [give] Chai Hu Gui Zhi Gan Jiang Tang

JGYL Line 21.2 (Postpartum Depression)

Postpartum depression and veiling... If you want to resolve [disease] in a patient with veiling, you must induce great sweating... Yin has collapsed and blood is vacuous and thus yang qi alone is exuberant. Therefore, you should induce sweating so as to restore yin and yang [to balance]. For hard stool and retching with inability to eat, Xiao Chai Hu Tang governs.

Clinical Reasoning for Shao Yang Disease

There are a few clinical reasoning noted by Zhang that are worth contemplated about:

First off, **the traditional treatment strategies of causing sweat, causing vomit, and purging through bowel and urine do not work for Shao Yang Disease**, as Zhang explained in Line 264-265. This is something we should always consider as clinicians. To treat Shao Yang, Zhang proposes the (later coined) “harmonizing” strategy in his crafted formulas, which I will explain in the later section.

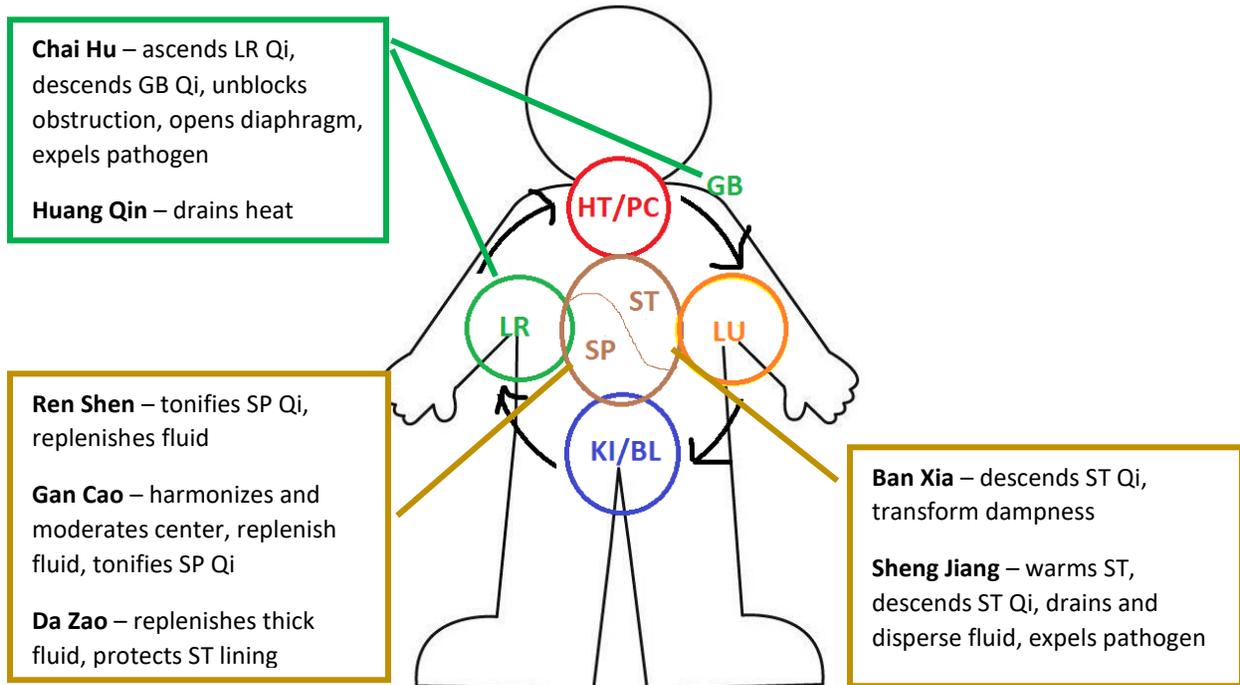
Second, **when there is a combined disease of the three Yang** – In TCM terms, they are: exterior cold, interior heat, and half-interior-half-exterior – when you have all the mixed signs and symptoms, you should treat the Shao Yang. First thing, we see combined disease more often than most people realized. A most frequently seen disease is where a person is hot above and cold below. In this case, Shao Yang (or Shao Yin) should be considered. Furthermore, since most of you are acupuncturists, think about this implication. Think about the channel location of the GB and TE channels – where are they in relationship to the Yang Ming and Taiyang channel?

¹² You feel this pulse in a position that may be slightly medial and/or distal to the Cun position, sometimes extending to the wrist

Shang Han Lun Treatment for Shao Yang Disease

Xiao Chai Hu Tang (Minor Bupleurum Decoction)

Historically, Xiao Chai Hu Tang is the main Shao Yang formula. In the two formulas presented in this project, it treats the Yang pattern of Shao Yang Disease. It has seven ingredients, and here are their general functions:



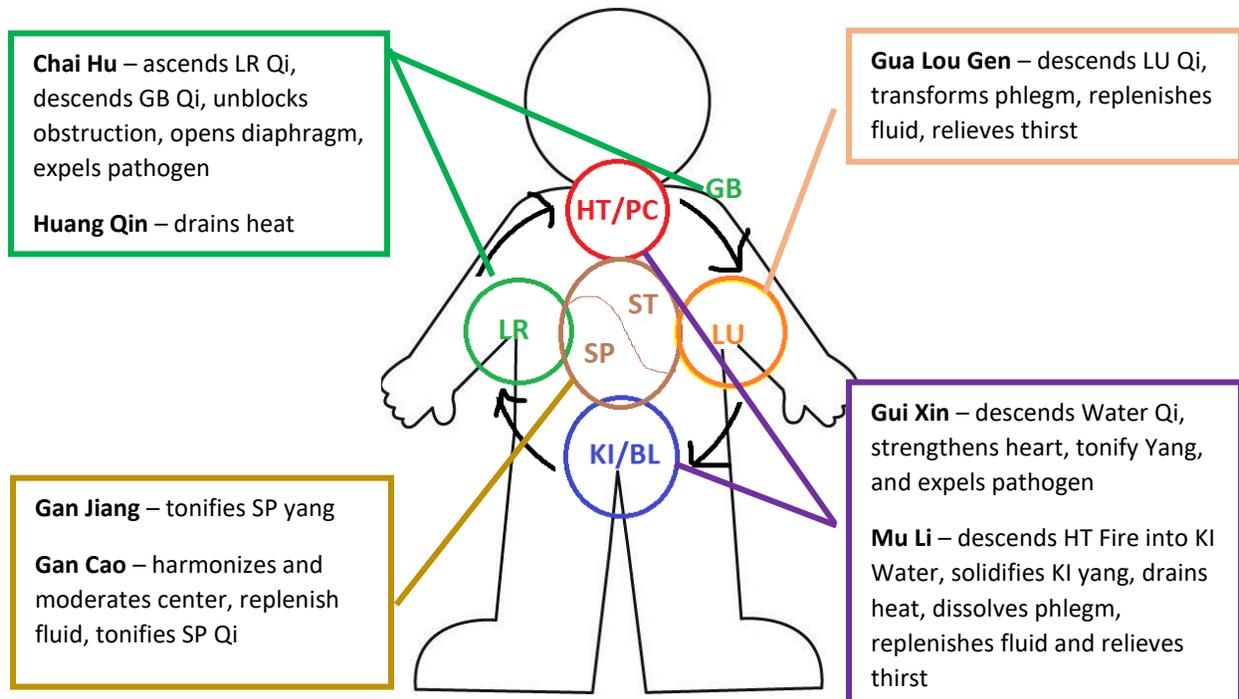
Notice that even though this is the main formula that treats the Shao Yang Disease, surprisingly, it only has two herbs addressing Shao Yang (GB/TE). The majority of the formula address the SP/ST instead. When putting them together, here is a short summary and break down of what they are doing:

- **Huang Qin** relieves the heat symptom in Shao Yang pattern. This is a branch treatment that gets rid of pathogenic heat.
- **Ren Shen, Gan Cao, Sheng Jiang, and Da Zao** nourishes fluid and strengthen SP Qi. This is a root treatment that strengthens the Upright Qi.
- **Chai Hu and Ban Xia** are the dynamic pivots and the hearts of this formula. They created Qi movement. Chai Hu ascends LR Qi and also rises toward the exterior level, then descends GB Qi and also retreats back to the interior level. Ban Xia descends ST Qi forcefully. With these two in play, all obstruction interior and exterior, ascending and descending, are cleared.

So this is what the harmonizing strategy mean: You do not fight the pathogen head-on. Instead, you first clear the red flares of critical concerns (heat symptoms). Then you build up the Upright Qi by strengthening ST/SP and replenishing fluid. At the same time, you unblock passage of Qi at both interior and exterior (and in between) levels, which also lays down a path for the Evil Qi to be eventually pushed out by the Upright Qi later. This is a strategy of minimal intervention, and letting the body do most of the work! Does this sound familiar? I will come back to this later

Chai Hu Gui Zhi Gan Jiang Tang (Bupleurum, Cinnamon Twig and Dried Ginger Decoction)

In comparison to the previous formula, this formula treats the Yin pattern of Shao Yang Disease. It also has seven ingredients, and here are their general functions:



Comparing to the previous one, this formula seems to be all over the place. But have no fear, let me break it down to you Barney style:

- **Chai Hu** clears obstruction interior and exterior, ascending and descending.
- **Huang Qin** relieves the heat symptom in Shao Yang pattern.
- **Gan Jiang, Gan Cao, and Gua Lou Gen** strengthens SP/ST and replenishes fluid (in different ways). It is worth noting that Gua Lou Gen is basically an IV-injection in Chinese herbal medicine. It is for quick replenishment of fluid, which this state calls for.
- **Gui Xin and Mu Li** are the dynamic pivots of this formula. They both descend Water Qi, tonify Yang, and guides HT Fire down to KI Water.

In summary, the treatment strategy is to first clear obstruction in both interior and exterior level, then drains heat. At the same time quickly replenished the fluid, settles ascending Water Qi, and warms the middle and lower burners. What is the Water Qi and why is its treatment necessary in this case? Because due to the lack of thin-fluid in this situation, the body started to utilize thick-fluid from the lower burner to alleviate the fluid imbalance. This ascending movement of the thick fluid creates the “ascending Water Qi” (similar to running piglet). Further, as a side-effect when the thick-fluid is utilized, it creates blockage due to its more turbid nature. The body is also in a weaker state, thus SP/KI need to be fortified more forcefully to ensure the production of Gu Qi and fluid.

This is markedly different from before, where one simply clears blocks, drains heat, and builds Upright Qi. Besides these basic Shao Yang treatment strategy, due to the complication of fluid imbalance, more thin fluid is needed and the side-effect of utilizing the thick-fluid needs to be addressed.

In this pattern, there are far more signs for interior disease along with the hallmark signs of Shao Yang Disease (see Line 147 on page 3-4). On a side note, if you have studied Shang Han Lun before, then you may recognize that some of these symptoms are very similar to that of the Jueyin pattern. You are correct. Professor Hu Xishu noted that this formula is for the Yin pattern of half-interior-half-exterior disease, which is moving toward the Jueyin Disease.

ACP Treatment Strategy

The Foundation of Chinese Medicine

- **Treatment Principle:** harmonize the Lesser Yang
- **Acupuncture:** TE-5, TE-6, GB-41, GV-13
- **Herbal Formula:** Xiao Chai Hu Tang (Minor Bupleurum Decoction)

The point selection is pretty rudimentary. It is evident that its author sees Shao Yang disease only as a transition state of wind cold invasion. This prescription of points only aim to achieve two things: **Un-obstruct the Shao Yang channels and fortify Wei Qi.**

Personally, I do not think it is doing much to create the dynamic pivot mentioned from the previous formulas, nor does it do enough to fortify the Upright Qi or replenish fluid.

A New Scientific Commentary of Shang Han Lun (Cheng, 1954)

The following is translated from the work by Cheng Dan-an (1899-1957), who authored the monumental work of Chinese Acupuncture & Moxibustion (1954).

Xiao Chai Hu Tang

- **LR-14** penetrates and un-obstructs LR and SP channel, which can stimulates the returning flow of veins and regulate the obstruction in the lymphatic system. Thus, this is the main point for Shao Yang disease treatment.
- **GV-14 & PC-5** treat fever and chill that comes and goes
- **GB-41** guides the water Qi downward, which alleviate the Pi-obstruction in stomach and fullness along ribcage/epigastrium region.
- Additional points:
 - For heart vexation: add **PC-6** to open the chest and resolve stagnant heat.
 - For vomit: add **CV-13** and **ST-36** to descend the rebellious ST Qi.
 - For vexation in chest but without vomit: add **PC-6** and **PC-8** to open the chest and relieve vexation.
 - For thirst: add **CV-23** and **KI-7** to ascend the fluids.
 - For fullness in the abdomen: add **ST-25** and **CV-6** to regulate the Qi in the abdomen.
 - For heart palpitation: add **CV-14** to open the chest and descend the rebellious Water Qi.
 - For slight fever: add **TE-5**, **LI-11**, and **LI-4** to clear exterior heat.
 - For coughing: add **LU-5** and **LU-9** to open and disperse LU Qi and assist its movement of descending.

Chai Hu Gan Jiang Gui Zhi Tang

- **GV-14 & PC-5** treat fever and chill that comes and goes
- **CV-12 & LR-13** treat fullness and obstruction in the ribcage/epigastrium region.
- **CV-3** regulate BL.

- **GB-24 & SP-9** guide the water Qi downward, and relieve it through urine

Comparing to the point selection from [the Foundation of Chinese Medicine](#), this author offers something much more interesting and substantive. I especially like the fact that he provided additional points to address secondary symptoms.

One critique would be his selection of **GV-14** and **PC-5**; they are undoubtedly effect to treat chill (GV-14) and fever (PC-5). But they may not be the best points if we are talking about “recurrent latency” instead of “alternating chill and fever,” which many may have interpreted in a more narrowed perspective. The rest of his point selections are spot-on! He was doubtless a great master of his time!

Dai Mai Treatment

In case this is truly a discussion of latency, we definitely have to consider about treating the Dai Mai.

Dai Mai treatment can be done by using only **GB-41** and **TE-5**; perhaps, then a few local point such as **LR-13**, **GB-26**, **GB-27**, **GB-28** can be added to enhance it. To gain a better understanding about Dai Mai treatment, however, I would strongly recommend reading the methodology from the work of Ann Cecil-Sterman. Below I am simply listing a few possibilities:

Draining Dai Mai (for Yang pattern of Shao Yang Disease)

- **GB-41, LR-13, Gb-26, GB-27, GB-28, TE-5**
- This drains damp-cold/damp-heat in the lower burner (depending on point selection).

Consolidating Dai Mai (for Yin pattern of Shao Yang Disease)

- **GB-41, LR-13, GV-4, BL-23, BL-52, GB-26, SP-15, ST-25, KI-16, CV-8**
- This astringe fluids in the lower burner to stop loss. This also maintains the integration of the Chong Mai, Ren Mai, and Du Mai.

Shu-Stream Points & Source Points

From the arrangement of Five Transport Points: Jing-well and Ying-stream points are the exterior. Jing-river and He-sea points are the interior. Shu-stream and Yuan-source points are the half-interior-half-exterior region. Now let’s take a closer look at these points.

For Yang channels: their Shu-stream points are more exterior and their source points are more interior. Thus, for half-interior-half-exterior diseases, if it is a Yang pattern of half-interior-half-exterior disease, then Shu-stream points should be considered. If it is an Yin-pattern, then source points should be considered.

For all Yin channels: their Shu-stream and source points are the same points, located right at the half-interior-half-exterior level.

Five Element Attributes of the Shu-Stream & Source Points

- **Shu-stream points in Yang channels are Wood points:** Shu-stream points and Wood points are often utilized to clear obstruction in the channel, which is in line with the strategy of harmonizing Shao Yang.
- **Source points in Yang channels are between Wood and Fire points:** they are between Wood and Fire points, thus it takes elemental contribution of both energetic – so it is not only invigorating, but warming, which is aligned with the treatment strategy for Yin pattern of Shao

Yang Disease. Coincidentally, these two also match completely with the elemental affinity of Shao Yang (Wood and Fire).

- **Shu-Stream and Source points of Yin channels are Earth points:** they are all Earth points. Recall the strategy from the first formula? Build up SP/ST and build Upright Qi!

When combining these points together, we get an acupuncture version of Shao Yang formula in front of us. It is not a coincident that these points are utilized so much that pretty treat everything; it is neither a coincident that the Shu-stream (Wood) point of Leg Shao Yang Ministerial Fire Gallbladder Channel¹³ is utilized as an opening point for the Dai Mai. Now, ask yourself, why do source points usually work so well in CF treatments with so many positive unspecified effects, while other points sometimes fail to move anything? Because by using sources, you are doing harmonizing treatments – basically, Shao Yang treatments.

Further Considerations:

You may add a couple/pairing point along source points or Shu-stream points to enhance its effect – forming Master Tung’s famous “Reverse Horse Technique.”

If the point location allows (e.g. LI-4 and LR-3), you can shift the point more distally or more proximally to specify its effect. More distal means it’s more exterior, more proximal means it’s more interior.

Needle depth and adjacent structure needled also indicate where you may direct the treatment. E.g., for LI-4, you can needle it in the skin, in the flesh, next to tendon (if angled right and deep enough), or next to the bone – each one would bring out a slightly different effect. Moreover, shallow needling tends to treat the local region and the local tissues; whereas deeper needling would treat distanced portion of the body and deeper channel/organ systems.

More Points to Be Considered

Below are a few Master Tung points that I personally love to utilize to treat Shao Yang Disease.

San Cha San (Three Jam, Three, Tung A.04)

This point is located on TE-2 or the Ba-Xie location between the ring finger and pinky. When needled this point deeply, up to 2 inches, you achieve something quite extraordinary. By this one needle, you touch the following points: TE-2, TE-3, Xia Bai, SI-3, SI-4, and HT-8. By one needling you touch the Shu-stream point of three Fire channels, as well as the opening point for the GV-channel. So this point is very Yang in nature and treats a great variety of diseases in TE, KI, HT, and SI.

Zhong Jiu Li (Center Nine Miles, Tung 88.25)

This point is located on GB-31 location on the lateral thigh. The name of GB-31 is Wind Market, thus this point treats wind conditions, anything condition that moves, or anything condition that comes and goes. This is especially effective in treating pain, insomnia (due to HT connection with GB). According to Dr. Wei-Chieh Young, this point is also effective to treat bone spur (as Lingshu 10 stated, “[GB] governs diseases generated by bone”), if needled deeply next to the bone. When doing so, it also treats the KI (by touching the bone) and LR (which is on the opposite side of the thigh, deep needling will naturally touch it).

¹³ This is the full name of the GB channel, you need to know it as the foundation of “5 phases and 6 Qi”

Yi Chong, Er Chong, San Chong (First Weight, Second Weight, Third Weight, Tung 77.05-77.07)

The three points are located 1 ACI anterior to the GB line (between Shao Yang and Yang Ming channels), at 3, 5, and 7 ACI superior to the lateral malleolus. When using these points, they can treat LR/SP disorders, Shao Yang diseases, thyroid enlargement, wind diseases, and brain diseases (Note: GB is one of the extraordinary Fu's, which accesses the brain). It is commonly utilized to treat nodule formation, concussion, cranial tumor, and cerebral palsy.

Other Clinical Considerations (Extraordinary Connection of Zang-Fu)

The following comes from the hypothesis of "Extraordinary Connection of Zang-Fu" published by Dr. Wei-Chieh Young (Young, 1975). This is mostly based on the "Opening, Pivoting, and Closing"¹⁴ functionality of the six-division channels mentioned in Lingshu 5:

*Taiyang is the opening, Shaoyang is the pivot, Yangming is the closing
Taiyin is the opening, Shaoyin is the pivot, Jueyin is the closing*

Due to their similarity in functionality, there could be a connection between them: Taiyang with Taiyin, Shaoyang with Shaoyin, and Yangming with Jueyin.

Gallbladder Connection with Heart

- Suwen 8 stated, "The Heart holds the office of Lord and Sovereign, the radiance of Shen stems from it... The Gall Bladder is the Official responsible for being "impartial and just," determination and decision stem from it." From this we know that gallbladder is related to initiating activities, and plays a role in spirit, consciousness, and cognitive function.
- HT governs the Sovereign Fire and GB governs the Ministerial Fire. HT governs blood and vessels; GB excretes bile, governs the ascending and descending in the Tripler Energizer, thus it is closely related to the formation of phlegm and damp.
- Clinically, dysfunction in GB often leads to hyperlipidemia and cardiovascular diseases. Thus when treating HT disease, we must take GB into consideration.

Triple Energizer Connection with Kidneys

- Lingshu 47 stated, "The kidney controls the triple energizer and the urinary bladder."
- There are two systems of Triple Energizer, both of which relies on the Kidneys
 - The first one is the Qi mechanism of the Three Energizers governed by Lung, Spleen, and Kidneys. LU governs the upper energizer to disperse and distribute the body fluid and essential substance. SP governs the middle energizer to transform the Ying Qi, Wei Qi, Jing-essence, and Blood. KI governs the lower energizer to control the two Yin orifices and the waste discharges. KI is the original motive power of the Qi mechanism in the whole triple energizer Qi mechanism system.
 - The second one is the ministerial and sovereign fire system of the triple energizer governed by Heart, Liver, and Kidneys. HT is the sovereign fire in the upper energizer. LR is the ministerial fire (or dragon-thundering fire) in the middle energizer. KI and Mingmen are the ministerial fire in the lower energizer. KI is the organ that contains both water and fire, and therefore both of the two systems originate from KI.

¹⁴ Personally, I interpret the "opening" as the utilization (e.g., BL utilizes Yang Qi/Jinye fluid toward the exterior level), "closing" as the storage (e.g., ST is in charge of the Qi production and is rich in Qi and Blood), and "pivot" as the regulation (e.g., TE regulates Yang Qi/Jinye fluid all around the body).

- All five transport points on the TE channel relate to Water/KI (*TE-1 Gate of Chong [Mai], TE-2 Fluid Door, TE-3 Middle Islet, TE-6 Branch Ditch, TE-10 Celestial Well*). TE-3 and TE-3.5 (Xia Bai) are often utilized to treat nephritis, edema, and lowerback pain – all of which are related to KI.
- One of the most famous Master Tung points, Huan Chao (Return to the Nest), for infertility – this point is located on the lateral surface of the ring finger, on the TE channel as well (between TE-1 Metal and TE-2 Water points – thus it carries attribute from the two elements and greatly enhance its ability to strengthen Water).
- Chronic illnesses or latent diseases eventually affect KI. Clinically, TE should be considered for the treatment of KI diseases.

From the school curriculum, we know that each channel has a working relationship with its sister channel. E.g., GB works along with LR channel. Then, if you are really into channel theory, it may not be hard to figure out that channels sharing the same six-division name work with each other as well. E.g., GB works with TE channel. Then here is the above hypothesis by Dr. Young that links channels together based on their energetic functions. E.g., GB works with HT channel.

So what are the differences? Let's list out their attribute and see:

- GB/LR pairing: Both are in the leg region. One is Yin and one is Yang.
- GB/TE pairing: One is in the arm and one is in the leg. Both are Yang.
- GB/HT pairing: One is in the arm and one is in the leg. One is yin and one is yang.

When there is a pairing of Yin/Yang channels – there is a harmonizing effect. When there is a pairing of channels in different regions of the body (arm and leg), there is an invigorating effect of the channels (Young, 2008). So in our example above, GB harmonizes with LR, GB invigorates TE channel, and GB both harmonizes and invigorates the HT channel. The same goes in reverse.

Conclusion

In this presentation, I wished to present the “half interior and half exterior” pattern that is not discussed in the TCM curriculum. In the future, perhaps, you may consider the possibility of Shao Yang or Jue Yin disease when seeing mixed conditions in clinic. Then I touched on the topic of latency disease from the view point of the Shao Yang Disease. Lastly, I discussed the various treatment approaches of the Shao Yang Disease and the little-known but commonly-utilized strategy of “harmonizing.” Now, as you needle source points, I hope you are now backed with rational thoughts, rather than blind faith.

In addition, I hope you had a taste of what a Chinese medical lineage has to offer, and what you may find in the unexplored territories beyond the beginning steps of TCM and Worsley Five Element.

The inspiration of this project came from my fellow classmate Seth Shamon's fire project last year (where Hannah Dwertman made substantial contributions), which investigated the topic of the triple energizers. Without his presentation, I might've ended up doing something less interesting.

I wish you all the best with a life time of learning in this medicine. If there is any question or any request to clarify the above study, please don't hesitate to contact me at a.t.tsauro@gmail.com.

Thank you again for bearing through this tedious topic with me.

Reference

- Cecil-Sterman, A. (2012). *Advanced acupuncture: A clinical manual*. New York, NY: Classical Wellness Press.
- Chen, X. Y. (2013). *長沙方歌括* [Assembled Odes for the Chang Sha Formulas]. Shanxi, China: Shanxi People Publishing House. (Original work published 1803) [In Chinese].
- Cheng, D. A. (1954). *傷寒論科學化新註* [A New Scientific Commentary of Shang Han Lun]. [In Chinese]
- Feng, S. L., & Zhang, C. A. (2009). *中國湯液經方：傷寒論傳真* [Formulas of the Chinese Classic of Decoctions: The authentic transmission of Shang Han Lun]. Beijing, China: People's Military Medical Press. [In Chinese]
- Feng, S. L., & Zhang, C. A. (2010). *中國湯液經方：金匱要略傳真* [Formulas of the Chinese Classic of Decoctions: The authentic transmission of Jin Gui Yao Lue]. Beijing, China: People's Military Medical Press. [In Chinese]
- Huang, H. (2004). *中醫十大類方* [Ten Key Formula Families in Chinese Medicine]. Taipei City, Taiwan: Jyin Publishing Company. [In Chinese]
- Jia, Q., & Sun, X. X. (1999). 日韓中藥傳統市場 [Traditional market of Chinese medicine in Japan and Korea]. *Modernization of Traditional Chinese Medicine and Materia Medica- World Science and Technology*, 1, p55-57. [In Chinese] doi: 10.11842/wst.1999.1.018
- Katsubunre, I. (2012). *腹證奇覽* [A Marvelous Inspection of Abdominal Signs]. (Q. Chen Trans.). Taipei City, Taiwan: Lide Press. (Original work published 1809) [In Chinese].
- Liao, M. Z. (2001). 台灣中藥產業現況 [The current state of Taiwan's herbal product manufacturers]. *Quarterly Journal of Main National Industrial and Economic Policies*, 4, p25-29. [In Chinese]
- Maciocia, G. (2005). *The foundation of Chinese medicine: A comprehensive text for acupuncturists and herbalists* (2nd Ed.). London, UK: Churchill Livingstone.
- Mitchell, C., Ye, F., & Wiseman, N. (1999). *Shang Han Lun: On cold damage – translation and commentaries*. Brookline, MA: Paradigm Publications.
- Wiseman, N., & Wilms, S. (2013). *Jin Gui Yao Lue: Essential prescriptions of the golden cabinet – translation and commentaries*. Brookline, MA: Paradigm Publications
- Young, W. C. (2004). *針灸經緯* [The longitude and latitude of acupuncture and moxibustion] (18th Ed.). Taipei, Taiwan: Zhiyuan Press. (Original work published 1975) [In Chinese].
- Young, W. C. (2008). *Lectures on Tung's acupuncture: Points study* (J. W. Tao Trans.). Rowland Heights, CA: American Chinese Medical Culture Center.
- Young, W. C. (2008). *Lectures on Tung's acupuncture: Therapeutic system* (J. W. Tao Trans.). Rowland Heights, CA: American Chinese Medical Culture Center.
- Young, W. C. (2013). *The 5 transport points* (M. Helme Trans.). Rowland Heights, CA: American Chinese Medical Culture Center.
- Zheng, X. Y., & Liang, R. (2008). 日本漢方製劑小柴胡湯的應用調查 [An investigation of the application of the Japanese Kempo patent formula, Xiao Chai Hu Tang]. *Acta Chinese Medicine and Pharmacology*, 36(2). [In Chinese]

Appendix A: Function of Shu Stream Point according to Classical Texts:

Lingshu 4

The Ying-spring opening and the Shu-stream opening serve to treat the external conduits/channels.
The He-sea opening serves to treat the internal Fu-repositories.

Lingshu 44

When a disease is in the Zang-depots, it is to be removed through the Jing-well opening. When a disease is associated with a change of [the patient's] complexion, it is to be removed through the Ying-spring opening. **When a disease at times becomes milder, and then increases in severity again, it is to be removed through the Shu-stream opening.** When a disease is associated with a change of the [patient's] voice, it is to be removed through the Jing-river opening. When the disease is located in the stomach, and if the disease resulted from immoderate drinking and eating, it is to be removed through the He-sea opening.

Nanjing Question 68

The five Zang-depots and six Fu-repositories each has Jing-well, Ying-spring, Shu-stream, Jing-river, He-sea openings, what does each one govern?

The Classic stated, that which emerges is the Jing-well, that which flows is the Ying-spring, that which irrigates is the Shu-stream, that which travels is the Jing-river, and that which enters is the He-sea.

Jing-well governs fullness below the heart. Ying-spring governs heat in the body. **Shu-stream governs heaviness and joint pain.** Jing-river governs coughing, wheezing, chill, and fever. He-sea governs rebellious Qi and discharges. These are the main diseases that Jing-well, Ying-spring, Shu-stream, Jing-river, He-sea openings of the five Zang-depots and six Fu-repositories governs.

Appendix B: 臟腑通治 Mutual Treatments of the Zang-Fu (Tang, 1892)

According to Dr. Wei-Chieh Young, the below text is one of the main source of references that contribute to his hypothesis of “Extraordinary Connection of Zang Fu” (Young, 2008), which we touched in the main study. The below is merely section headers of much extensive commentaries that examine the Qi mechanism, channel connections, clinical manifestation, and considerations of western anatomy – which are not translated... since I want to have a life... If you would like to see the whole text, buy me a beer and convince me.

Allen, 12/3/16

心與膽通，心病怔忡，宜溫膽為主，膽病戰栗癡狂，宜補心為主。

The Heart communicates with the Gallbladder. When there is the Heart disease of fright and palpitation, one should focus on warming the Gallbladder. When there is the Gallbladder disease of trembling, shivering, maniac, or madness, one should focus on supplementing the Heart.

肝與大腸通，肝病宜疏通大腸，大腸病宜平肝經為主。

The Liver communicates with the Large Intestine. For Liver diseases, it is suitable to dredge and unobstruct the Large Intestine. For Large Intestine diseases, one should focus on balancing/moderating the Liver channel.

脾與小腸通，脾病宜泄小腸火，小腸病宜潤脾為主。

The Spleen communicates with the Small Intestine. For Spleen diseases, it is suitable to drain the fire of Small Intestine. For Small Intestine disease, one should focus on moistening/lubricating the Spleen.

肺與膀胱通，肺病宜清利膀胱水，膀胱病宜清肺氣為主。

The Lungs communicate with the Bladder. For Lung diseases, it is suitable to clear and dis-inhibit the water of Bladder. For Bladder diseases, one should focus on clearing/purifying the Lung Qi.

腎與三焦通，腎病宜調和三焦，三焦病宜補腎為主。

The Kidneys communicate with the Triple Energizers. For Kidney diseases, it is suitable to regulate and harmonize the Triple Energizers. For Triple Energizers diseases, one should focus on supplementing the Kidneys.

Reference

- Ling, Y. X. (Eds.). (2013). *Nan Jing Xiao Zhu* [Collation and Commentaries on the Classic of Difficulties]. Beijing, China: People's Medical Publishing House. (Original work published 1982) [in Chinese]
- Tang, R. C. (2012). *Tang Rongchun Zhong Xi Hui Tong Yi Xue Wen Ji: Yi Jing Jing Yi* [Tang Rongchun Chinese-Western integrative medical essay collection: The essential significance of medical classics]. Beijing, China: Xueyuan Press. (Original work published 1892) [in Chinese]
- Unschuld, P. U. (2016). *Huang Di Nei Jing Ling Shu: The ancient classic on needle therapy – the complete Chinese text with an annotated English translation*. Oakland, CA: University of California Press.
- Young, W. C. (2008). *Lectures on Tung's acupuncture: Therapeutic system* (J. W. Tao Trans.). Rowland Heights, CA: American Chinese Medical Culture Center.
- Young, W. C. (2013). *The 5 transport points* (M. Helme Trans.). Rowland Heights, CA: American Chinese Medical Culture Center.