New Clinical Application of Chaihu Decoction

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Abstract

The classified prescriptions from Chaihu decoction have been widely used in ancient and modern times. In spite of many previous research studies, the extensiveness and diversity of their applications have not been systematically studied. The author applied Chaihu Wendan decoction to treat phlegm and qi stagnation in the middle energizer, applied Chaihu Guizhi decoction to treat simultaneous disease of Shaoyang and Taiyang, applied Chaihu Xiexin decoction to treat simultaneous disease of the spleen, stomach, liver, and gallbladder, applied Chaihu Ermiao powder to treat simultaneous disease of hand Shaoyang and foot Taiyin, applied Chaihu Erchen decoction to treat simultaneous disease of Shaoyang and Taiyin, applied Chaihu decoction to treat simultaneous disease of hand Shaoyin and foot Taiyang, applied Chaihu Guizhi Ganjiang decoction to treat Shaoyang and Taiyin cold fluid retention and heat stagnation syndrome of Shaoyang complicated with Taiyin, applied Chaihu Xingren decoction to treat simultaneous disease of hand Shaoyang and hand Taiyin, applied Chaihu Sanren decoction to treat the disease caused by damp-heat stagnation in the hand Shaoyang and the foot Taiyin, and applied Chaihu Ganlu Xiaodu pellet to treat the diseases of hand Shaoyang and foot Yangming. The effects were all remarkable.

Keywords
- Classified Prescriptions from Chaihu decoction
- Chaihu Wendan decoction
- Chaihu Guizhi decoction
- Chaihu Xiexin decoction
- Chaihu Ermiao powder
- Chaihu Erchen decoction
- Chaihu decoction
- Chaihu Guizhi Ganjiang decoction
- Chaihu Xingren decoction
- Chaihu Sanren decoction
- Chaihu Ganlu Xiaodu pellet

The classified prescriptions from Chaihu decoction are widely applied in clinical practice. In spite of many previous research studies, the extensiveness and diversity of their applications have not been systematically studied. The application experience of the classified prescriptions from Chaihu decoction is difficult to be inherited from a theoretical height. It is likely to cause the abused clinical application of these prescriptions. In view of this, the author has conducted special summarized research and composed the book Study on the Syndrome Classification of the Classified...
Prescriptions from Xiao Chaihu Decoction. Through learning from the academic thoughts of predecessors, it was found that the key point of the clinical application of Chaihu decoction was the cardinal theory of Shaoyang triple energizer. The author has summarized the experience in the self-created and classified prescriptions from Chaihu decoction in the past decade to guide the application of the classified prescriptions from Chaihu decoction in the clinical treatment of miscellaneous diseases.

Chaihu Wendan Decoction

Chaihu Wendan decoction is a prescription for the simultaneous hand Shaoyang and foot Yangming disease, which can disperse qi movement, resolve phlegm, and clear heat and mainly treats disease due to phlegm and qi stagnation in the middle energizer. The etiology is often related to heat transformation; the disease location involves Yangming, and the pathogenesis is often related to the failure of lucid yang to rise. It is mostly used for dizziness, body pain and numbness, chest obstruction, hyperhidrosis, Sjögren’s syndrome, susceptibility to cough, etc.

Key points of syndrome differentiation of Chaihu Wendan decoction are dizziness, fatigue, poor sleep quality, chest tightness and pain, distending stomach, sweating when moving, aversion to cold when resting, pale tongue with thin whitish tongue coating, and stringy pulse. The patient’s past medical history includes hepatitis B, gallstones, cholecystitis, and gallbladder polyps. Most of the patients have a history of preference for spicy and greasy food or drinking alcohol. Clinical modifications of Chaihu Wendan decoction: add Yujin (Curcumae Radix) and Chuanxiong (Chuanxiong Rhizoma) to enhance the power of disseminating the gallbladder qi and dredging the meridians of Shaoyang; add Huoxiang (Agastachis Herba), Gegen (Puerariae Lobatae Radix), and Chuanxiong (Chuanxiong Rhizoma) to remove the dampness and clearing heat stagnation, and another 14 doses were added. The third postmedication visit: the dizziness was reduced, and there was no chest tightness and shortness of breath, with a little dry mouth after waking up which was relieved after rinsing with water, sometimes distention in the head when the weather was getting hot, relatively normal tongue. Pulse manifestation: pulse was slightly slippery, a little thin on the left hand. Considering that the phlegm-dampness gradually decreased, in the above-mentioned prescription, Gegen (Puerariae Lobatae Radix) was replaced with Yinchen (Artemisiae Scopariae Herba) 15 g for clearing heat to consolidate the treatment.

Note: the disease in this case originates from the internal injury of the seven emotions, which is due to the live qi depression for a long time, which leads to unfavorable Shaoyang qi movement, stagnant water, and fire, and then water accumulating to form phlegm, and stagnant fire transforming into heat. Internal obstruction of phlegm dampness can affect lucid yang and will lead to dizziness and drowsiness; failure of dispersion of the upper energizer will lead to chest tightness and shortness of breath; failure of external dispersion of defensive qi will lead to intolerance of cold; stagnant heat of the ministerial fire will disturb stomach and cause the burning sensation of the stomach and dry throat, and if the pericardium is disturbed, it will lead to stagnation of liver qi and be easy to be irritable. The external climatic heat and internal stagnant heat interact with each other, leading to up-flaming fire and distending heat. The pulse is slippery and stringy, which is a sign of phlegm pathogens and qi disease of Shaoyang; the thin pulse is related to dampness obstruction outside the pulse; the sunken pulse of Cun region indicates failed dispersion of the upper energizer; the tongue is slightly dark, which indicates qi disease and dampness obstruction affecting the blood flow. Therefore, supplemented Chaihu Wendan decoction is used for the treatment, which integrates qi dispersing, phlegm resolving,
and heat clearing, assisted by Gegen (Puerariae Lobatae Radix) to lift lucid qi of Yangming and Chuanxiong (Rhizoma Chuanxiong) to dredge the meridians of Shaoyang. The effects of the prescription is performed according to the primary and secondary pathogenesis. During the second visit, the heat potential of the patient subsided, so the amount of Huangqin (Scutellariae Radix) was reduced, and the amount of Chaihu (Bupleuri Radix) and Heye (Nelumbinis Folium) was increased to strengthen the power of promoting qi flow, resolving dampness and lifting the lucid.

During the third visit of the patient, the symptoms of phlegm stagnation and dampness was reduced but the symptoms of heat remained, so Gegen (Puerariae Lobatae Radix) was removed and Yinchen (Artemisiae Scopariae Herba) was used to avoid excessive ascending but use the clearing and descending effects of the herbs with fragrant and bitter flavors. In the process of diagnosis and treatment, the prescription was modified in an orderly manner, which reflects the idea of evidence-based differentiation and flexible formation of the prescription.

**Chaihu Guizhi Decoction**

Chaihu Guizhi decoction is a prescription for the simultaneous diseases of the meridians of hand Shaoyang and Taiyang. It is also a mixture of Xiaochaihu decoction and Guizhi decoction, mainly for the combination of Shaoyang, Taiyang, and Taiyin diseases, complicated with external wind-damp obstruction and internal qi stagnation and depressed heat. The chief complaints include shoulder, neck and body pain, and arthralgia. The key points of syndrome differentiation are pain in the limbs or shoulders and back, aversion to cold, possible coexistence of chest discomfort, nausea and vomiting, fullness of the stomach, discomfort in the flank, slightly bitter mouth or fever, etc.几点需要注意。

Common clinical modifications of Chaihu Guizhi decoction: for those with severe dampness obstruction, add Qinyiao (Gentianae Macrophyllae Radix), Qianhuo (Notopterygii Rhizoma et Radix), and Weilingxian (Clematidis Radix et Radix) for those with apparent obstruction of the Shaoyang meridian, add Xixiancao (Siegesbeckiae Herba) and Manjingzi (Viticis Fructus) for those with severe pain, add Jianghuang (Gentianae Macrophyllae Radix) and Sumu (Sappan Lignum) for those with severe dampness obstruction, add Erchen decoction for those with blood deficiency, add Danggui (Angelicae Sinensis Radix) and Baishao (Paeoniae Alba Radix).

Case 2: patient Li, 34-year-old male, first visited on October 8, 2013. Chief complaints: back pain for more than 6 months was the chief complaint. History of present illness: the patient started to have back pain with the change of weather in April. The pain was wandering, accompanied by fatigue, heavy sensation of the body, and even chest tightness. After drinking alcohol, skin rash without itching appeared on the neck and abdomen. The appetite, urination, and defecation were normal, and the sleep quality was slightly poor. He was a vegetarian with a preference for pungent food and a sturdy body shape. No abnormality was found on the chest X-ray and CT. Tongue manifestation: the tongue was pale red with thin yellow and slightly thick coating. Pulse manifestation: pulse was slightly stringy and thin pulse, slightly floating above two Cun regions. Syndrome differentiation: internal damp heat and external attack of pathogenic wind, wind and dampness fighting on the exterior surface Taiyang, and damp heat stagnating in the interior Shaoyang and Yangming were observed. Treatment: the treatment included dispersing wind and resolving dampness, regulating qi, and ventilating heat. Prescription: prescription included modified Chaihu Guizhi decoction, in which Qinquiao (Gentianae Macrophyllae Radix) and Qianhuo (Notopterygii Rhizoma et Radix) were replaced by Guizhi (Cinnamomi Ramulus). Medications: medication included Chaihu (Bupleuri Radix) 10 g, Huangqin (Scutellariae Radix) 10 g, Fabanxia (Pinelliae Rhizoma Praeparatum) 10 g, Qinquiao (Gentianae Macrophyllae Radix) 15 g, Qianhuo (Notopterygii Rhizoma et Radix) 6 g, Chishao (Paeoniae Radix Rubra) 10 g, Zhiqiancao (Glycyrrhizae Radix et Rhizoma Praeparata cum Melle) 5 g, Qinghao (Artemisiae Annuae Herba) 10 g ( decocted later), Yuyin (Curcumae Radix) 15 g, Yinchen (Artemisiae Scopariae Herba) 15 g, Lianqiao (Forsythiae Fructus) 10 g, and Chixiaoudou (Vignae Semen) 20 g, with 10 doses decocted in water for oral application.

The follow-up visit on October 25, 2013: the frequency and severity of back pain reduced, the fatigue and chest tightness disappeared, the range of rashes after drinking decreased, and his sleep quality improved. Tongue manifestation: tongue was slightly red with thin yellowish coating. Pulse manifestation: the stringy pulse was relieved, but it was still slightly slow and thin. The floating pulse at Cun and Guan regions was relieved. The prescription in use did not get changed because of its efficacy, and the disease was cured after 2 weeks.

Note: in this case, the disease was caused by wind, dampness, and stagnant heat in the Taiyang and Shaoyang phases. Wandering pain of the back and heavy sensation of the body were caused by wind and dampness obstructing on the surface of Taiyang. Chest tightness and fatigue were due to trapped Shaoyang. The rashes after drinking resulted from damp heat in Yangming, which was triggered by external wind and occurred in the skin and muscles. Therefore, the treatment should adhere to the methods of dispelling wind and dampness, dispersing qi, and heat, and Chaihu Guizhi decoction can be used, with the pungent and warm Guizhi (Cinnamomi Ramulus) replaced by Qinquiao (Gentianae Macrophyllae Radix) and Qianhuo (Notopterygii Rhizoma et Radix), supplemented by Yinchen (Artemisiae Scopariae Herba), Lianqiao (Forsythiae Fructus), and Chixiaoudou (Vignae Semen) which are fragrant and slightly bitter to clear the damp heat of Yangming without fear of coldness blocking the exterior, so they can be added to the prescription to exert good effects.

**Chaihu Xiexin Decoction**

Chaihu Xiexin decoction is a prescription for the simultaneous disease of the spleen, stomach, liver, and gallbladder. This prescription is formed by the combination of Xiaochaihu
decocion and Banxia Xiexin decoction, which is mainly used for complicated exterior, interior, cold, and heat syndrome or damp-heat qi stagnation intermingling with deficiency belonging to concurrent Shaoyang and Taiyin disease or concurrent Jueyin and Yangming disease. The disease is mostly characterized by recurrent stomachache and diarrhea.⁶

Key points of syndrome differentiation: key points are pain or distension in the stomach, aversion to cold or heartburn, or dry mouth with bitter taste and preference for hot drinks, often unformed stools, painful diarrhea often occurring after exposing to cold and pain relieved after diarrhea. If the appetite is poor and the abdominal pain is obvious before defecation, Tongxie Yaofang can be combined to support the spleen; if the diarrhea is caused by external exposure to wind and cold (liability to headache and dizziness), add Gegen (Puerariae Radix) and Fangfeng (Saposhnikoviae Radix) can be added to lift the lucid and stop diarrhea.

Case 3: patient Hu, 56-year-old female, first visited on December 6, 2013. Chief complaints: repeated diarrhea for 3 years was the chief complaint. History of present illness: abdominal distention (about twice a week) was observed in the past 3 years, accompanied by a change of breath and slight abdominal pain and then immediate diarrhea, approximately three times a day. The stools were mushy and difficult to pass, complicated with jelly and water, no burning sensation of the anus, normal appetite, occasional belching, preference for greasy food, and liability to diarrhea. Tongue manifestation: the tongue was pale red with thin white coating. Pulse manifestation: the pulse was stringy and slippery pulse, sunken pulse in the left Guan region. Syndrome differentiation: intermingling dampness and heat and unsmooth qi movement of the middle energizer, affecting the liver and spleen were observed. Treatment: the treatment included removing dampness and clearing heat, strengthening the spleen and regulating qi. Prescription: prescription included modified Chaihu Xiexin decoction. Medications: medication included Chaihu (Bupleuri Radix) 10 g, Huangqin (Scutellariae Radix) 6 g, Fabanxia (Pinelliae Rhizoma Praeparata) 10 g, Danshen (Codonopsis Radix) 10 g, Zhigancao (Glycyrrhizae Radix et Rhizoma Praeparata cum Melle) 6 g, Huanglian (Coptidis Rhizoma) 5 g, Guangmuxiang (Aucklandiae Radix) 10 g, Ganjiang (Zingiberis Rhizoma) 10 g, Chaobaishao (Paoniae Radix Alba) 10 g, Fangfeng (Saposhnikoviae Radix) 10 g, Zhiqiao (Aurantii Fructus) 10 g, 14 doses, decocted in water for oral application.

The follow-up visit on January 10, 2014: The modified Chaihu Xiexin decoction was effective. The abdominal distention and diarrhea had reduced by 80%, and the pain had also been relieved. Tongue manifestation: the tongue was pale red with thin white coating. Pulse manifestation: the pulse was stringy, sunken in the left Guan region. The effect was excellent, so it was better to adhere to the treatment, only Zhiqiao (Aurantii Fructus) was removed, Baizhu (Atractylodis Macrocephalae Rhizoma) 10 g and Chenpi (Citri Reticulatae Pericarpium) 10 g was added, which accorded with the principle of Tongxie Yaofang to strengthen the power of supporting the earth and suppressing the wood. After taking 14 doses, the patient got cured.

Note: Although the disease location in this case involved the spleen, stomach, and liver, the key disease location was the middle energizer. The patient had spleen deficiency and liver stagnation in daily life, which gradually generated dampness and accumulated heat. The intermingling of dampness and heat obstructed and descended. The pivot of ascending and descending was the middle energizer, and the power of the pivot depended on the spleen, stomach, liver, and gallbladder. Therefore, the disease of Shaoyang triple energizer mostly involved the spleen, stomach, liver, and gallbladder. It occurred in patients with internal injuries and miscellaneous diseases. Unlike exogenous cold progressing from yang to yin, it progressed from yin to yang and was embodied in this case. Therefore, Chaihu Xiexin decoction was used to dredge the ascending and descending pivot of the middle energizer, and then Tongxie Yaofang was combined to take into account the source of the liver and the spleen.

Chaihu Ermiao Powder

Chaihu Ermiao powder is a prescription for the concurrent disease of hand Shaoyin and foot Taiyin hand. It has remarkable effect of dispersing qi and drying dampness, clearing, and dispersing latent heat. It is mainly used to treat qi stagnation of Shaoyang complicated with damp heat of the spleen meridian with descending disease tendency. It can be used to treat lower back and leg pain in adults, impotence in men, leucorrhea in women, etc.

Key points of syndrome differentiation: soreness and soft pain in the waist, weakness and distention of the lower limbs or beriberi, impotence and nocturnal emission in men, yellowish leucorrhrea or with peculiar smell, fatigue and aversion to cold, sweaty upper body or hands and feet, or accompanied by chest tightness, bitter taste or dry and sticky mouth, loose stools that are difficult to pass, frequent and scanty urination with urgent and distending or burning sensation are the key points. Tongue manifestation: the tongue is pale red or dark red and slightly bluish tongue with thick tongue coating. The pulse is mostly stringy, slow and thin. Clinical modifications of Chaihu Ermiao powder: For those with severe dampness, add Zexie (Alismatis Rhizoma) and Yinchen (Artemisiae Scopariae Herba); for those with prominent aching of the lower limbs, add Suamugua (sour Chaenomelis Fructus) and Sangjiasheng (Taxilli Herba); for those with pathogen invading Xuefen, add Chixiaodou (Vignae Semen); and for those triggered by wind and dampness, add Qianghuo (Notopterygii Rhizoma et Radix) and Fangfeng (Saposhnikoviae Radix).

Case 4: patient Gong, 29-year-old male, first visited on June 1, 2015. Chief complaints: eczema on buttocks and thighs for more than 3 years was the chief complaint. History of present illness: eczema appeared on the buttocks 3 years ago, and then gradually developed on the thighs. It was not itchy at first, with furfuration and local dark redness, and then itching aggravated at night and fluid seepage after scratching and the condition aggravated day by day. Daktarin and Pevison were used but the effect was...
not satisfactory. The eczema was black, accompanied by feverish sensation in the palms, chills, bursting pain in the forehead after cooling of sweat due to exercise, normal urination and defecation, occasional constipation, and sturdy body shape. Life history: it included preference for spicy food, no drinking of alcohol. Tongue manifestation: the tongue was red and slightly bluish covered with white coating. Pulse manifestation: the pulse was stringy and slow, sunken in the Cun region. Syndrome differentiation: internal accumulation of damp heat shifting from Qifen to Yingfen was observed; the disease was in Taiyin and involved Shaoyang. Treatment: the treatment included clearing damp heat, dispersing qi, and promoting nutritive qi flow. Prescription: the prescription included modified Chaihu Ermiao powder. Medications: medications included Chaihu (Bupleuri Radix) 15 g, Huangqin (Scutellariae Radix) 10 g, Fabanxia (Pinelliae Rhizoma Praeparatum) 10 g, Gmghu (Atractylodis Rhizoma) 15 g, Kushen (Sophorae Flavescentis Radix) 15 g for replacing Huangbai (Phellodendri Chinensis Cortex), Zexie (Alismatis Rhiza) 10 g, Lianqiao (Forsythiae Fructus) 10 g, Chixiaodou (Vignae Semen) 20 g, Danggui (Angelicae Sinensis Radix) 10 g, with 14 doses decocted in water for oral application.

The second visit on June 15, 2015: After taking the above prescription, the eczema area stopped spreading, the color became lighter than before (the previous color was black), the itching sensation was relieved, but it was still itchy but not painful after sweating, and there was fluid effusion and no burning sensation when scratched, no dry mouth and bitter taste, and liability to headache when exposing to coldness. Tongue manifestation: the tongue was pale red and slightly bluish, with thin yellow coating. Pulse manifestation: the pulse was soft and slow pulse, stringy pulse on the left hand. The upper prescription had excellent effects. The heat was easy to abate but dampness was difficult to remove, so 2 g of Tufuling (Smilacis Glabrae Rhizoma) was added to increase the dampness-removing power, 10 doses for oral application. The follow-up showed that the eczema had basically disappeared.

Note: in this case, the eczema was caused by dampness and heat. However, the disease location was in Taiyin and Shaoyang. The eczema occurred in the lower part of the body with lingering disease tendency, so it could be seen that serious dampness in Taiyin was the main factor, and the patient’s headache after exposure to cold and difficult defecation and full turbid tongue coating were actually related to the weakness of qi movement in Shaoyang and the difficulty of dampness dissemination. Therefore, Ermiao powder was used to remove dampness and clear heat, combined with Xiaochaihui decoction to dredge the pivot. Both meridians were taken into account, and the treatment was more comprehensive. When the disease enters the Yingfen where medicine with the function of regulating qi cannot reach, Kushen (Sophorae Flavescentis Radix) and Lianqiao (Forsythiae Fructus) are used to replace Huangbai (Phellodendri Chinensis Cortex). Combining with Danggui Chixiaodou powder, the herbs enter the Yingfen and Xuefen to cool blood and penetrate through Yingfen, making no room for damp heat in the Qifen and Xuefen, and thus, the disease gets healed itself.

**Chaihu Erchen Decoction**

Chaihu Erchen decoction is a prescription for the concurrent disease of hand meridians of Shaoyang and Taiyin. It has excellent effects of regulating qi movement and dissipating phlegm-dampness, which is mainly used for phlegm-dampness in the upper energizer of Shaoyang overflowing and blocking in the lungs and failure of qi dispersion. It is mainly applied to chronic cough or postcold cough and other obstructive lung diseases.

Key points of syndrome differentiation: the key points are cough for a long time, expectoration of white and sticky sputum, phlegm with persistent sound but difficult to cough up, or obvious phlegm sensation in the throat, accompanied by chest tightness and shortness of breath, normal tongue or tongue covered with thick coating; stringy, slippery and thin pulse, often sunken pulse in the Cun region. Clinical modifications: This includes for those with severe dampness, Xingren (Armeniae Semen Amarum) and Doukouren (Amomi Semen Rotundus) and Yiyiren (Coicis Semen) can be added to increase the power of resolving dampness and dispersing qi; for those with obvious pharyngeal itching, Jingjie (Schizonepetae Herba) and Fangfeng (Saposhnikoviae Radix) can be added to expel external wind; if the expectation is not smooth, Zhiqiao (Aurantii Fructus), Jiengeng (Platyodonis Radix), and Qianhu (Peucedani Radix) can be added to promote resolving and expectation of phlegm; if the phlegm turns yellow and thick, which is due to the transformation of heat, Maozhuacao (Ranunculi Ternati Radium), Yuxingcao (Houttuyniae Herba), and Qianjin Weiijing decoction can be combined to clear the heat in the dampness.

Case 5: patient Xu, 48-year-old female, first visited on November 8, 2012. Chief complaints: repeated dry cough for more than 2 years was the chief complaint. History of present illness: the patient gradually developed a “dry cough” 2 years ago without obvious incentives, and the cough even led to asthma. In March 2012, she was treated in the hospital with anti-inflammatory and other treatments, but the effect was not obvious. In July 2012, allergens, chest X-rays, and blood routines were all examined in the hospital, and all data were normal. Only ECG showed bradycardia. Symptoms: symptoms included repeated cough without sputum, itchy throat now and then, tightness and obstructive pain in the chest, no dry mouth or bitter taste, normal appetite, urination, and defecation. In the past 2 years, the sweating had become less and there were frequent chills. She was slightly fat and her pharyngeal wall was slightly swollen, reddish, and blood-shot. Tongue manifestation: the tongue was pale red with a thin white coating which is not thick. Pulse manifestation: the pulse was slippery and slightly stringy, sunken in both Cun regions. Syndrome differentiation: phlegm-dampness qi obstruction was observed, belonging to the concurrent disease of Shaoyang upper energizer and Taiyin lung meridian.

Treatment: the treatment included the dispersion of the lung qi and dampness in the upper energizer, regulation of qi,
and the resolution of phlegm in the lungs. Supplemented Chaihu Erchen decoction was chosen. Medications: medication included Chaihu (Bupleuri Radix) 10 g, Fabanxia (Pinelliae Rhizoma Praeparatum) 10 g, Chenpi (Citri Reticulatae Pericarpium) 10 g, Fuling (Poria) 10 g, Yujin (Curcumae Radix) 15 g, Pipaye (Eriobotryae Folium) 10 g, Shegan (Belamcandae Rhizoma) 6 g, Zhqiao (Aurantii Fructus) 10 g, Jiegeng (Platyodonis Radix) 10 g, and Shenggancao (raw Glycyrrhizae Radix et Rhizoma) 6 g. 10 doses decocted in water for oral application.

The follow-up visit on December 17, 2012: the cough was significantly relieved, the chest tightness and chest pain were completely eliminated, and the front chest was slightly tight. The tongue was normal and the pulse was slippery, which meant that the phlegm had not been completely removed. Shegan (Belamcandae Rhizoma) in the upper prescription was replaced by Gualou (Trichosanthis Fructus) to strengthen the power of unblocking the chest and resolving phlegm. After the administration of 14 doses, the disease got cured.

Note: this case was a typical case treated with Chaihu Erchen decoction for cough caused by phlegm-dampness blocking the qi movement of Shaoyang. The sputum was difficult to expectorate during cough because the phlegm was stagnant in the energizer membrane but not in the lungs, and it originated from the upper energizer and affected lung qi; the chest tightness or pain without abnormality in cardiopulmonary examination was also due to qi stagnation in the upper energizer affecting chest yang; obstructed sweating and aversion to cold were also caused by the unfavorable dispersion of the upper energizer and failure of defensive qi to reach the exterior; if chest yang was weak and the lung failed to disperse, the patient was liable to wind attack and the throat would be itchy. The patient's body was slightly fat, suggesting her phlegm-dampness constitution which was more likely to be bred by exogenous pathogenic factors. The pharyngeal wall was slightly thick, pale red, and bloodshot, which was also a sign of phlegm-dampness complicated with stagnant heat in the upper part of the body. Stringy and slippery pulse was a sign of phlegm, dampness, and qi stagnating in Shaoyang, and the sunken pulse in the Cun region indicated failure of qi dispersion in the upper energizer. Therefore, Chaihu Erchen decoction was selected to regulate qi and dispel phlegm from Shaoyang, combined with Shangjiao Xuanbi decoction, which was composed of Yujin (Curcumae Radix), Pipaye (Eriobotryae Folium), Shegan (Belamcandae Rhizoma), and so on to increase the power of regulating qi and resolving dampness, with Jiegeng (Platyodonis Radix) to disperse the lung qi and expel phlegm. The combined prescription is exactly in line with the pathogenesis and naturally takes effect very quickly.

**Chailing Decoction**

Chailing decoction is a prescription for the concurrent disease of hand Shaoyang and foot Taiyang. It is a mixture of Xiaochaihu decoction and Wuling powder, which is mainly used to treat water-dampness trapping in the middle and lower parts (middle energizer and bladder), unsmooth pivot, and failure of qi transformation.8

Key points of syndrome differentiation: key points are difficulty in urination, stomach distention, excessive sweating and aversion to cold, chest tightness and shortness of breath, accompanied by loose stools, bitter taste and dry mouth, stringy and thin pulse, or pale tongue with thin white coating. Clinical modifications: if the lower body is obviously not warm, Guizhi (Cinnamomi Ramulus) can be replaced by Rougui (Cinnamomi Cortex) and Wuyao (Linderae Radix) can be added to enhance the power of transforming qi; if the stagnant heat is obvious, Guizhi (Cinnamomi Ramulus) can be replaced by Yinchen (Artemisiae Scopariae Herba).

Case 6: patient Lu, 39-year-old male, first visited on November 13, 2008. Chief complaint: bland taste for 1 year was his chief complaint after the onset of the disease, bland taste after intake of food, dry mouth and bitter taste at ordinary times, general coldness but feverish sensation on the shoulder, back, and waist, occasional headaches, normal sleep and appetite, dark urine and frequent urination, and normal defecation. B-ultrasound showed liver inflammation-like changes, intrahepatic bile duct stones. He had a history of positive HBsAg, HBeAb, and HBCAb test and congenital heart disease. Tongue manifestation: the tongue was slightly pale and bluish with white and thick coating. Pulse manifestation: the pulse was stringy and thin on the right hand. Syndrome differentiation: observation included qi stagnation failing to resolve dampness, dampness retention gradually turning into heat, and concurrent disease of Shaoyang and Taiyang. Treatment: it was better to promote the function of the pivot, remove dampness, and disperse heat. Prescription: Chailing decoction. Medications were prescribed: Chaihu (Bupleuri Radix) 12 g, Fabanxia (Pinelliae Rhizoma Praeparatum) 10 g, Huangqin (Scutellariae Radix) 6 g, Baizhu (Atractylodis Macrocephalae Rhizoma) 10 g, Fuling (Poria) 15 g, Zhuling (Polyporus) 10 g, Zexie (Alismatis Rhizoma) 10 g, Guizhi (Cinnamomi Ramulus) 10 g, 14 doses decocted in water for oral application.

The follow-up visit on November 27, 2008: After oral application of the above prescription, the bland taste got relieved, the duration of feverish sensation on the back was shortened and apparent chilly sensation of the chest and back in winter was still there with frequent and profuse urination, dry lips and preference for drinks mainly in the morning and at night. Tongue manifestation: the tongue was slightly dark with a thin white coating. Pulse manifestation: pulse was slightly stringy, slightly sunken, and thin in the right Guan region. Because heat is easy to reduce rapidly and dampness is difficult to remove quickly, the original prescription was kept, Huangqin (Scutellariae Radix) was removed and Baizhu (Atractylodis Macrocephalae Rhizoma) was replaced by Cangzhu (Atractylodis Rhizoma) to reduce bitterness and cold, and the power of resolving dampness was strengthened. Third visit after 14 doses: after taking the above-mentioned prescription, aversion to cold in the back gradually decreased, the feverish sensation in the back was relieved, the urine turned pale yellow, and the stools became more formed. Tongue manifestation: the tongue was dark
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transformed into pale red. Pulse manifestation: the pulse was stringy and slippery pulse, gradual appearance of sunken in the Guan region. Syndrome differentiation: The pivot of the triple energizer was unblocked, but fluid retention was still excessive, the prescription was continued and three slices of ginger to help resolve the fluid retention were added. Fourth visit after intake of 14 doses: feverish sensation of the back disappeared completely, bland taste and profuse saliva got relieved, stomach distention occasionally occurred, nocturia was reduced, and the tongue manifestation was the same as before. Pulse manifestation: stringy pulse got slightly relieved. Knowing that the patient was born with a ventricular septal pore in the heart, it was considered that the heart and kidney qi was deficient, so Tusizi (Cuscutae Semen), Fupenzi (Rubi Fructus), Huangqi (Astragali Radix), etc., were added to strengthen the healthy qi and eliminate the pathogens. After intake of 30 doses, the symptoms gradually subsided.

Note: in this case, there were cold-damp signs with symptoms of bland taste, profuse saliva, aversion to cold and frequent urination, as well as heat signs with symptoms of bitter taste, dry throat, feverish sensation in the back and waist, and dark urine. It originated from the dampness of Taiyin and obstructed pivot and caused disharmony between water and soil. Chailing decoction was used to relieve dampness and frequent urination became more frequent. Present symptoms included cold and distended stomach, profuse sweating, shortness of breath, poor sleep quality, slightly fat body, dull and pale complexion, darkness around eyes, and poor spirit. She had a history of asthma and uterine myoma of uterus. Tongue manifestation: the tongue was pale red with yellow coating. Pulse manifestation: pulse was deep and slightly thin and stringy. Syndrome differentiation: coldness and dampness of Taiyin complicated with qi and heat stagnation of Shaoyang were observed. Prescription: This included modified Chaihu Guizhi Ganjiang decoction. Medications: Medications included Chaihu (Bupleuri Radix), Guizhi (Cinnamomi Ramulus) 10 g, Ganjiang (Zingiberis Rhizoma) 10 g, Fabanxia (Pinelliae Rhizoma Praeparatum) 10 g, Huangqin (Scutellariae Radix) 5 g, Chenpi (Citri Reticulatae Pericarpium) 10 g, Fuling (Poria) 15 g, Zhigancao (Glycyrrhiza Radix et Rhizoma Praeparata cum Melle) 5 g, Dafupi (Arecae Ramulus) 10 g, Baizhu (Atractylodis Macrocephalae Rhizoma), Fuling (Poria), Zhigancao (Glycyrrhizae Radix et Rhizoma Praeparata cum Melle), etc., so as to increase the power of removing phlegm and dissolving fluid retention. If sweating of the head and body is difficult to stop, Longgu (Os Draconis), Muli (Concha Ostreae), and Fuxiaomai (Triticum Levis Fructus) are added to astringe sweating.

Case 7: patient Dong, 45-year-old female, first visited on July 20, 2009. Chief complaints: insomnia for 4–5 months was the chief complaint. History of present illness: difficulty in falling asleep, aversion to cold, slightly dry mouth, preference for hot drinks, loose stools, occasional backache, weak defecation were observed. She once took Guifu Dihuang Pills and felt dampness on the body surface. After taking Fuzi Lizhong Pill, she felt gradual warmth in her body but abdominal distention after intake of food. Dahuang Fuzi Xixin decoction together with middle-warming and qi-flow-promoting herbs once caused loose and profuse stools, reduced abdominal distention and cold lower limbs, and waist soreness was almost eliminated, but dry mouth aggravated and urination became more frequent. Present symptoms included cold and distended stomach, profuse sweating, shortness of breath, poor sleep quality, slightly fat body, dull and pale complexion, darkness around eyes, and poor spirit. She had a history of asthma and uterine myoma of uterus. Tongue manifestation: the tongue was pale red with thin yellow coating. Pulse manifestation: pulse was deep and slightly thin and stringy. Syndrome differentiation: coldness and dampness of Taiyin complicated with qi and heat stagnation of Shaoyang were observed. Prescription: This included modified Chaihu Guizhi Ganjiang decoction. Medications: Medications included Chaihu (Bupleuri Radix), Guizhi (Cinnamomi Ramulus) 10 g, Ganjiang (Zingiberis Rhizoma) 10 g, Fabanxia (Pinelliae Rhizoma Praeparatum) 10 g, Huangqin (Scutellariae Radix) 5 g, Chenpi (Citri Reticulatae Pericarpium) 10 g, Fuling (Poria) 15 g, Zhigancao (Glycyrrhizae Radix et Rhizoma Praeparata cum Melle) 5 g, Dafupi (Arecae Pericarpium) 10 g, seven doses decocted in water for oral application.

The follow-up visit on July 30, 2009: After taking the herbs, the patient felt reduced epigastric distention and gradual warm epigastrium. The patient developed cough and asthma caused by cold halfway and went for infusion treatment of Western medicine. The asthma was relieved but the cough persisted, and the phlegm was sticky and difficult to cough up, and she always had cold sweats and felt lack of strength. Syndrome differentiation: lung qi deficiency and phlegm stagnation were observed, complicated with disharmony between the Yingfen and Weifen as the urgent condition. Three doses of Yupingfeng powder plus Guizhi decoction and supplemented Erchen decoction were added. The third visit after the administration of the above prescription: The cough and aversion to cold were relieved and she felt comfortable in the stomach. Tongue manifestation: the tongue was pale red with thick white and floating yellowish coating. Pulse manifestation: pulse was sunken. Syndrome differentiation: complicated Taiyin and Shaoyang disease, cold retention, and heat depression with more cold and less
heat were observed. Prescription: supplemented Guizhi Ganjiang decoction can still be used. Medications: Medications included Chaihu (Bupleuri Radix) 10 g, Huangqin (Scutellariae Radix) 6 g, Fabanxia (Pinelliae Rhizoma Praeparatum) 10 g, Ganjiang (Zingiberis Rhizoma) 6 g, Fuling (Poria) 15 g, Chenpi (Citri Reticulatae Pericarpium) 10 g, Guizhi (Cinnamomi Ramulus) 6 g, Baizhu (Atractylodis Macrocephalae Rhizoma) 10 g, Zhiqiancao (Glycyrrhiza Radix et Rhizoma Praeparata cum Melle) 5 g, Xuanfuhuahua (Inulae Flos) 10 g (wrapped for decoction), 14 doses decocted in water for oral application. After taking the above prescription, all the symptoms subsided. After taking this prescription for over 20 doses, all symptoms were eliminated.

Note: the number of follow-up visits in this case was relatively high. However, in general, the main manifestations were chills in the stomach and abdomen, difficult to pass loose stools, and excessive interior cold dampness in Taiyin, on the one hand, and dry mouth, insomnia, spontaneous sweating mostly on the upper body, and Shao Yang heat depression in the upper Shaoyang, on the other hand. In addition, complicated shortness of breath and frequent urination was due to the obstructed ascending and descending of qi movement. Combined with pale and dull complexion and sunken pulse, warming rather than cooling should be stressed in the treatment, and the Modified Chaihu Guizhi Ganjiang decoction was appropriate. Cough and asthma caused by cold halfway were also related to yang qi deficiency of Taiyin spleen and lungs, the agglomeration of cold, dampness, and phlegm, so it was feasible to add herbs with effects of tonifying qi and resolving phlegm.

**Chaihu Xingren Decoction**

Chaihu Xingren decoction is a prescription for the concurrent disease of Shao Yang and Taiyin of hand meridians, which is made by Professor Hesheng Yao who combined Xiaochaihu decoction with Xingren decoction. It has the effects of dispersing the cold blockage of the upper energizer externally and clearing latent damp heat in the lungs internally. It is mainly used to treat patients with external cold attacking the upper energizer of Shao Yang which triggers dampness and heat in the lungs and leads to disease. It is applicable to fever due to infection of the respiratory system when the seasons change between spring and summer or summer and autumn, and antibiotics are not effective. The Chinese medicinal herbs are used for the treatment of exogenous disease.\(^\text{10}\)

Syndrome differentiation: This includes sudden high fever which is not easy to abate and even repeated intermittent high fever. In the beginning of the disease, there is aversion to cold without sweating, and then mere heat without cold, occasional sweating, cough and sore throat, unobvious fatigue, or shortness of breath, normal appetite, slightly loose stools, red tip of the tongue with profuse, white and thick coating, stringy pulse are observed. Chest X-rays show infection foci.

Case 8: patient Hou, 21 years old male, first visited on May 14, 2006. Chief complaints: pain on the right side of the sternum without obvious incentives 4 days ago was the chief complaint, and then body temperature reached 38°C. After 2 days of infusion in the outpatient clinic (the name of the antibiotic drug was unknown), the fever did not abate. Then bitemporal pain and body temperature gradually reached 39.3°C, accompanied by cold body with chills, mild cough, scanty sputum, but the cough caused aggravated pain on the right side of the sternum, neither chest tightness nor shortness of breath, still cold body, temporal pain and headache, accompanied by drowsiness and stiffness, poor appetite and nausea, dry mouth and unwillingness to drink, poor sleep quality at night, normal urination and defecation, sturdy body shape, mental distress, and red complexion. Tongue manifestation: tongue was red with pale yellowish and thick coating. Pulse manifestation: thin and slightly slow pulse. The level of blood neutrophils was $7.2 \times 10^9/L$. Chest X-ray showed a rough texture of both lungs, which was possibly bronchitis. Syndrome differentiation: Shao Yang upper energizer was attacked by external cold wind, while stagnant heat and dampness accumulated in the lung meridian of hand Taiyin. Prescription: prescription included modified Chaihu Xingren decoction. Medications: medication included Chaihu (Bupleuri Radix) 15 g, Huangqin (Scutellariae Radix) 15 g, Tianhuafen (Trichosanthis Radix) 15 g, Xingren (Armeniacae Semen Amarum) 15 g, Baikouren (Amomi Fructus) 8 g (decocted later), Sangye (Mori Folium) 10 g, Lianqiao (Forsythiae Fructus) 15 g, Huashi (Talcum) 15 g (packed), Fuling (Poria) 15 g, Dafupi (Arecae Pericarpium) 10 g, Jiegeng (Platycodonis Radix) 10 g, six doses decocted in water for oral application, two doses each day and night.

Follow-up after 3 days: After administration of 1 dose of the above prescription, sweating was induced and fever subsided, and chills were relieved; headache and cough were greatly reduced. After intake of all the doses, the appetite and spirit were improved to normal, with only a slightly dry mouth and a preference for some cold drinks. Tongue manifestation: the tongue was slightly reddish with relative thick coating in the middle and back. Pulse manifestation: the pulse was slow and slippery. It indicated that wind cold had been released but the subsided damp heat had not been eliminated, so a few of herbs for removing dampness and clearing heat could be used for rehabilitation.

Note: in this case, the exogenous fever was neither simple cold damage nor simple febrile disease, it was a mixed disease of cold attack and warm disturbance. At the beginning, external cold wind attacked the upper energizer of hand Shao Yang and induced fever and chills and pain in the hypochondrium and tempus. And then it triggered the internal latent damp heat which stagnated the adjacent lungs, so it was accompanied by symptoms of pain in the chest and flank due to cough, dry mouth, and unwillingness to drink, drowsiness, and poor appetite. In addition to Xiaochaihu decoction as a cold damage prescription to relieve Shao Yang, Xingren decoction as a prescription of warm disease is also used to clear up dampness and heat in the lungs. The combined prescription is effective for both cold and warm syndromes, which will eliminate accumulations and cure disease by dissipating both internal and
external pathogens. This kind of disease is mostly seen in viral pneumonia in Western medicine, which is often characterized by high fever and no sweating, or slight cough and asthma, and thickened lung markings. Since the hemogram is not high and antibiotics are not effective, it becomes a difficult and complicated disease. If the syndrome can be identified in time, immediate and good effects can be achieved.

### Chaihu Sanren Decoction

Chaihu Sanren decoction is a prescription for the concurrent disease of hand Shaoyang and foot Taiyin, which functions to disperse middle qi and simultaneously clear damp heat. The indications include damp-heat stagnation in the hand Shaoyang and foot Taiyin and obstructed qi movement. It is mostly used for lingering low fever, repeated chest and abdominal tightness and distension, and fatigue after exogenous infection.11

**Syndrome differentiation:** intermittent fever, prolonged illness, frequent aversion to cold, no sweat, or mild sweating with cold hands and feet, liability to be accompanied by chest tightness and abdominal distention, fatigue and diarrhea, or dry mouth and bitter taste, cough, insomnia, frequent urination with dark and scanty urine, or migraine are observed.

**Tongue manifestation:** tongue is stringy. In this syndrome, lingering dampness and heat are liable to impair qi. Fangji Huangqi decoction can be combined, and Yupingfeng powder can be used in the later stage to consolidate the effect.

**Case 9:** patient Tu, 33 years old female, first visited on September 14, 2012. Chief complaints: repeated low fever with aching four limbs for more than 1 month was the chief complaint. History of present illness: one month ago, the patient gradually developed low fever (especially in the morning and evening) due to busy work and high pressure, with prominent fever in the palms, soles, and on the forehead. After self-administration of Huoxiang Zhengqi Liquid and a little hot drink, she was sweating and the fever decreased. The sweating was mostly on the forehead and there was no sweating in the rest of the body, but the fever would recur after 3 to 5 days. Present symptoms: the symptoms included frequent low fever, aversion to wind (previously aversion to heat), aching elbow and knee joints; nasal congestion, dull listening, no nasal discharge; scanty sweat in hot weather, liability to chest tightness and fatigue; dry mouth with bitter taste, preference for hot drinks; phlegm obstructing in the throat and difficult to cough up; normal appetite in daily life and no pain in the abdomen; dreaminess, irritability; normal menstruation, loose stools which can be taken shape by moxibustion treatment, pale yellowish urine, relative thin body shape, slightly dark red lips, and low voice. **Tongue manifestation:** the tongue was pale red and slightly dark with thin white coating. **Pulse manifestation:** thin and slightly tight pulse and sunken in the Cun region and vigorous in the Guan region were observed.

**Syndrome differentiation:** qi deficiency (spleen and lungs) and external attack of damp heat were observed. The disease was in Taiyin complicated with Shaoyang, with exterior disease location and tendency. Prescription: prescription included modified Chaihu Sanren decoction. Medications: medication included Chaihu (Bupleuri Radix) 10 g, Huangqin (Scutellariae Radix) 6 g, Beishashen (Glehniae Radix) 15 g, Gancao (Glycyrrhizae Radix et Rhizoma) 3 g, Xingren (Armeniacae Semen Amarum) 10 g, Baidoukou (Amomi Fructus Kravanh) 6 g, Yiyiren (Coicis Semen) 20 g, Fabanxia (Pinelliae Rhizoma Praeparatum) 6 g, Tongcao (Tetrapanacis Medulla) 6 g, Danzhuyi (Lophatheri Herba) 3 g, and Zhimahuang (Ephedrae Herba Praeparata cum Melle) 6 g, four doses decocted in water for oral application.

The follow-up visit on October 5, 2012: After administration of the above prescription, fever subsided, and cough disappeared, but there was slight nasal congestion with clear discharge and still aching calf, and feverish sensation in the palms was relieved but not eliminated. **Tongue manifestation:** tongue was slightly red with thin white coating. **Pulse manifestation:** pulse was slightly vigorous in the two Guan regions, and sunken and weak in the Cun and Chi regions. **Syndrome differentiation:** qi deficiency and lingering pathogenic wind and unexhausted damp heat were observed. The prescription was modified and Sanren decoction combined with Yupingfeng powder, focusing on the exterior deficiency and preventing low fever.

**Note:** the thin body, low voice, and loose stools in the patient’s daily life indicated qi deficiency of the spleen and lungs. Combined with high mental stress and the climatic factor of summer, this led to more stagnant qi movement and susceptibility to summer heat and dampness. Its symptoms included fever and sweating (only sweating on the forehead), aversion to wind, soreness of elbows and knees, stuffy nose and ears, fatigue, and drowsiness, all of which were due to combined wind and dampness blocking in the exterior. The feverish sensation of the palms and soles indicated the disease is in Shaoyang. Therefore, Modified Chaihu Sanren decoction was used according to the syndrome to disperse qi, resolve dampness, and disperse heat. In the subsequent visit, Sanren decoction plus Yupingfeng powder was used for treating the disease with the syndromes of qi deficiency, lingering pathogenic wind, and obstinate dampness and heat.

### Chaihu Ganlu Xiaodu Pellet

Chaihu Ganlu Xiaodu pellet is a prescription for the concurrent disease of hand Shaoyang and foot Yangming, which has excellent effects of dispersing qi and the upper energizer, dissolving dampness and dispersing heat. It is mainly used for the combination of Shaoyang qi stagnation and damp heat of the stomach meridian with superior and exterior disease location. It can be applicable to nonrespiratory colds, sequelae of colds, or repeated colds.

**Key points of syndrome differentiation:** key points are symptoms on the head and face such as nasal congestion and runny nose, itchy throat and cough, dizziness or pain on the
forehead, feverish sensation of the eyes or dry eyes, liability to oral ulcers, dry mouth and throat and bitter taste, accompanied by general symptoms of mild fatigue, chills, chest tightness and shortness of breath, and frequent sighing. Tongue manifestation: tongue is pale red or dark red with yellow or white thick or fully covered coating. Pulse manifestation: pulse is mostly thin, slippery, and stringy pulse.

Case 10: patient Zhou, 24-year-old male, first visited on June 24, 2014. Chief complaints: conscious aversion to wind and heavy sensation of the head and body for more than 1 week were the chief complaint. History of present illness: in recent weeks, the patient had a cold due to exposure to cold in hot weather, with main symptoms of aversion to wind and cold, dizziness, accompanied by heavy sensation of the body and low fever, uncomfortable urination, mental fatigue, and poor sleep (less than 4 hours), occasional itchy throat and slight cough, defecation twice a day with dryness for the first time and looseness for the second time. Pulse manifestation: pulse was slightly stringy and slippery and relative thin and sunken pulse in the left Guan region. Tongue manifestation: the tongue was dark purplish covered with thick, turbid, and white coating. The patient came here 1 month ago because of cough. It was differentiated as internal accumulation of damp heat in Yangming, external invasion of wind cold into the lungs, and struggle between the interior and exterior in the chest and throat. After 1 week of treatment with Ganlu Xiaodu Pellet plus Zhisou powder, the cough was basically eliminated. Syndrome differentiation: external invasion of wind cold into Shaoyang and its struggling with damp heat of Yangming were observed. Prescription: prescription included Xiaoachaihu Decoction plus Ganlu Xiaodu Pellet. Medications: medication included Chaihu (Bupleuri Radix) 10 g, Qianjiao (Gentianae Macrophyllae Radix) 15 g, Huangqin (Scutellariae Radix) 10 g, Fabanxia (Pinelliae Rhizoma Preparatum) 10 g, Zhigancao (Glycyrrhizae Radix et Rhizoma Preparata cum Melle) 3 g, Huoxiangye (Agastachis Folium) (decocted later) 10 g, Yinchen (Artemisiae Scopariae Herba) 15 g, Baidoukou (Amomi Fructus Kravanh) (decocted later) 6 g, Lianqiao (Forsythiae Fructus) 10 g, Shichangpu (Acori Tatarinowii Rhizoma) 10 g, Yujin (Curcumae Radix) (broken) 15 g, fried Zhiqiao (Curcumae Radix) (broken) 15 g, Baidoukou (Amomi Fructus Kravanh) (decocted later) 3 g, huoxiangye (Agastachis Folium) (decocted later) 10 g, Yinchen (Artemisiae Scopariae Herba) 15 g, Baidoukou (Amomi Fructus Kravanh) (decocted later) 6 g, Lianqiao (Forsythiae Fructus) 10 g, Shichangpu (Acori Tatarinowii Rhizoma) 10 g, Yujin (Curcumae Radix) (broken) 15 g, fried Zhiqiao (Curcumae Radix) (broken) 15 g, Baidoukou (Amomi Fructus Kravanh) (decocted later) 3 g, huoxiangye (Agastachis Folium) (decocted later) 10 g, Yinchen (Artemisiae Scopariae Herba) 15 g, Baidoukou (Amomi Fructus Kravanh) (decocted later) 6 g, Lianqiao (Forsythiae Fructus) 10 g, Shichangpu (Acori Tatarinowii Rhizoma) 10 g, Yujin (Curcumae Radix) (broken) 15 g, fried Zhiqiao (Curcumae Radix) (broken) 15 g.

Note: this disease was caused by concurrent disturbance of the six meridians with different complications. The same pathogenic factors attack of two or more meridians at the same time cause concurrent disease; complicated disease involves two or more meridians, but the cause of each meridian is not only different in sequence, but also in the origin and nature. In this case, the disease was caused by internal accumulation of damp heat in Yangming, newly external invasion of wind cold into Shaoyang and struggle between the interior and exterior. The diseases of the two meridians with different causes affect each other because the triple energizer of Shaoyang contains the internal organs including Yangming stomach and intestines. The dampness and heat latent in Yangming cannot be dispersed since the exogenous wind cold restrains qi movement of Shaoyang pivot, and thus, the dampness and heat are steamed and permeate the upper and lower body, and the symptoms are manifested. Therefore, it has the symptoms of aversion to cold and wind caused by exogenous wind cold, head and body discomfort as well as dizziness and fatigue, insomnia, and difficult defecation due to dampness and heat. The fat and strong body and signs of stringy and slippery pulse and dark tongue with turbid coating support the root cause of damp turbidity and phlegm heat and excess pathogens, so Xiaochaihu decoction is used to disperse exogenous pathogen stagnation in Shaoyang, combined with Ganlu Xiaodu pellet to clear endogenous dampness and heat so as to relieve both the exterior and the interior.

Conclusion

Classified prescriptions from Chaihu decoction have been widely used in ancient and modern times. It can be applied not only to the four main symptoms of alternative cold and heat, chest and hypochondriac fullness, poor appetite, vexation, and liability to vomiting but also to the treatment of various clinical miscellaneous diseases. The author summarizes 10 typical prescriptions related to Chaihu decoction so as to provide a reference for better clinical application of classified prescriptions from Chaihu decoction.

CRediT Authorship Contribution Statement

Bo Huang: Data curation, investigation, methodology, writing-original draft. Yingfeng Liu: Conceptualization, funding, acquisition, resources, supervision, writing-review & editing. Yajing Lyu: Investigation, project administration, validation.

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Conflict of Interest

The authors declare no conflict of interest.

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