

CHRONIC FATIGUE SYNDROME

From a Western medical perspective, Chronic Fatigue Syndrome, which used to be called M.E. (myalgic encephalomyelitis) is a relatively new disease. It is not clear what the causative agent might be; indeed, in Western medicine, there is no general agreement that it is a separate disease at all. Even its name is not generally agreed upon. In fact it is variously called also Post-viral syndrome, Achronic post-viral fatigue syndrome, Achronic mononucleosis, Achronic Epstein-Barr virus disease, and, especially in the USA, Achronic fatigue immune deficiency syndrome.

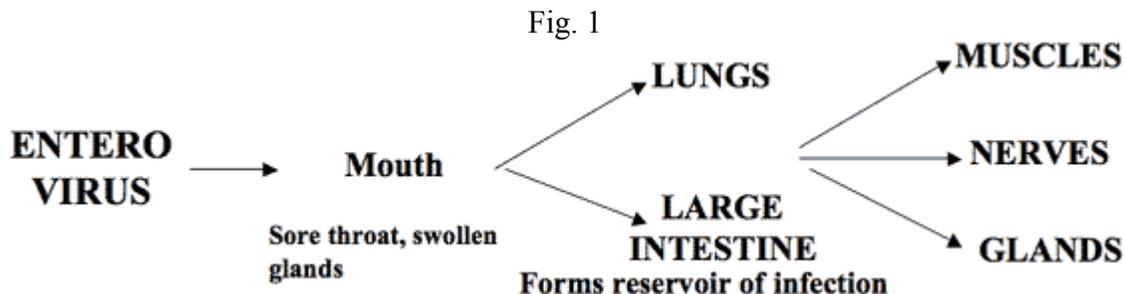
1. CHRONIC FATIGUE SYNDROME IN WESTERN MEDICINE

Chronic Fatigue Syndrome, which in the UK used to be called M.E.(myalgic encephalomyelitis) is a relatively new disease and indeed, there is no general agreement that it is a new disease at all in Western medicine.

The reason that there is no general agreement on the nature and causative agent of this disease is that there is no conclusive test which is specific to Chronic Fatigue Syndrome. There is no blood test that would conclusively prove a patient suffers from Chronic Fatigue Syndrome in the same way as there is for, say, mononucleosis.

Current research, however, does show that Chronic Fatigue Syndrome might be caused by an enterovirus and, specifically, the Coxsackie sub-group of enteroviruses.¹ In the USA, research seems to be more oriented towards the Epstein-Barr virus (the one that causes "glandular fever" or mononucleosis) as a cause of Chronic Fatigue Syndrome. Enteroviruses enter via the mouth causing sore throat and enlarged glands. Immune response can be compromised by physical or mental stress, immunosuppressive drugs, pregnancy, malnutrition or surgery.

If primary immune response fails, enteroviruses can pass to lungs or large intestine producing a chest infection or gastroenteritis. Inside the intestines, the enteroviruses remain and multiply forming a reservoir of infection. From here, they can spread via the blood stream to other tissues including nerve, muscle and endocrine glands. Enteroviruses have a particular tropism for muscles and nervous tissue: this explains the clinical manifestations of Chronic Fatigue Syndrome, i.e. the muscle ache and changes in brain function (Fig.1).



Factors affecting immune response in Chronic Fatigue Syndrome include:

- Physical or mental stress
- Immunosuppressive drugs
- Pregnancy
- Malnutrition
- Surgery

- Immunizations
- Excessive sport and exercise

CLINICAL NOTE

Viral Infection in Chronic Fatigue Syndrome

1. Elevated neutralizing antibody titres against Coxsackie B viruses were detected in 50% of patients suffering from Chronic Fatigue Syndrome, compared with 17% of healthy controls
2. Coxsackie B virus-specific IgM (indicating recent or persistent viral infection) was detected in 31% of patients compared with 17% of healthy controls
3. Virus-specific IgM responses were detected in sequential sera from Chronic Fatigue Syndrome patients over one year or longer, suggesting persistent viral infection
4. Of muscle biopsy samples from a total of 140 patients suffering from Chronic Fatigue Syndrome, 34 (24%) were positive by molecular hybridisation for the presence of enterovirus RNA; enterovirus RNA was not detected in any of 152 control samples of human muscle
5. In a series of 96 Chronic Fatigue Syndrome patients, 20 (21%) were found to have biopsy samples positive for enterovirus RNA
6. Studies (from circulating IgM and IgG in ME patients) show that ME patients recognize the virus and respond to it but without eliminating it for extended periods.

Mowbray and Yousef found that Chronic Fatigue Syndrome patients seem to display a new pathology in dealing with viruses. Chronic Fatigue Syndrome patients recognize the virus and respond to it but without eliminating it for extended periods.² As we shall see, from the Chinese perspective, this inability of the patient to rid himself or herself of the virus is due to a deficiency of the body's Qi.

CLINICAL NOTE

Symptoms of Chronic Fatigue Syndrome According to Behan

- A clinical viral infection
- followed by severe fatigue
- myalgia
- depression
- sleep disturbance
- irritability
- poor memory and concentration
- fluctuation in body weight (worse in women)
- intermittent low-grade fever
- poor appetite
- abdominal fullness and distension
- alternation of constipation and loose stools
- night-sweating

2. CHRONIC FATIGUE SYNDROME IN CHINESE MEDICINE

Modern Chinese medicine books do not have chapters on Chronic Fatigue Syndrome: therefore, the theory of Chronic Fatigue Syndrome presented below is the result of my experience in treating many patients suffering from Chronic Fatigue Syndrome over several years.

Although modern Chinese books do not discuss Chronic Fatigue Syndrome, Chinese medical books have, since very early times, described the cause, diagnosis and treatment of conditions similar to

Chronic Fatigue Syndrome. For example, the clinical manifestations of Li Dong Yuan=s theory of Yin Fire deriving from a deficiency of the Original Qi resemble quite accurately a situation of Chronic Fatigue Syndrome.

The five main conditions with which Chronic Fatigue Syndrome can manifest are:

- Residual pathogenic factor
- Latent Heat
- Lesser Yang pattern
- Yin Fire
- Deficiency

a) RESIDUAL PATHOGENIC FACTOR

One of the main conditions leading to post-viral fatigue is that of Aresidual pathogenic factor. If external Wind invades the body and is not cleared properly, or if the person fails to rest during an acute invasion of Wind, the pathogenic factor may remain in the Interior (in the case of Chronic Fatigue Syndrome usually as Dampness).

After an invasion of a pathogenic factor, the pathological development can have three possible outcomes:

1. The pathogenic factor may be expelled completely
2. It may become interior
3. It may appear to have been expelled, but a residual pathogenic factor has been formed

The residual pathogenic factor can be formed, however, also after an exterior pathogenic factor has become interior. Thus, a residual pathogenic factor may be formed at the exterior or interior stage: from the perspective of the Four Levels, a residual pathogenic factor may be formed at the Wei or Qi level (Figs. 2 and 3).

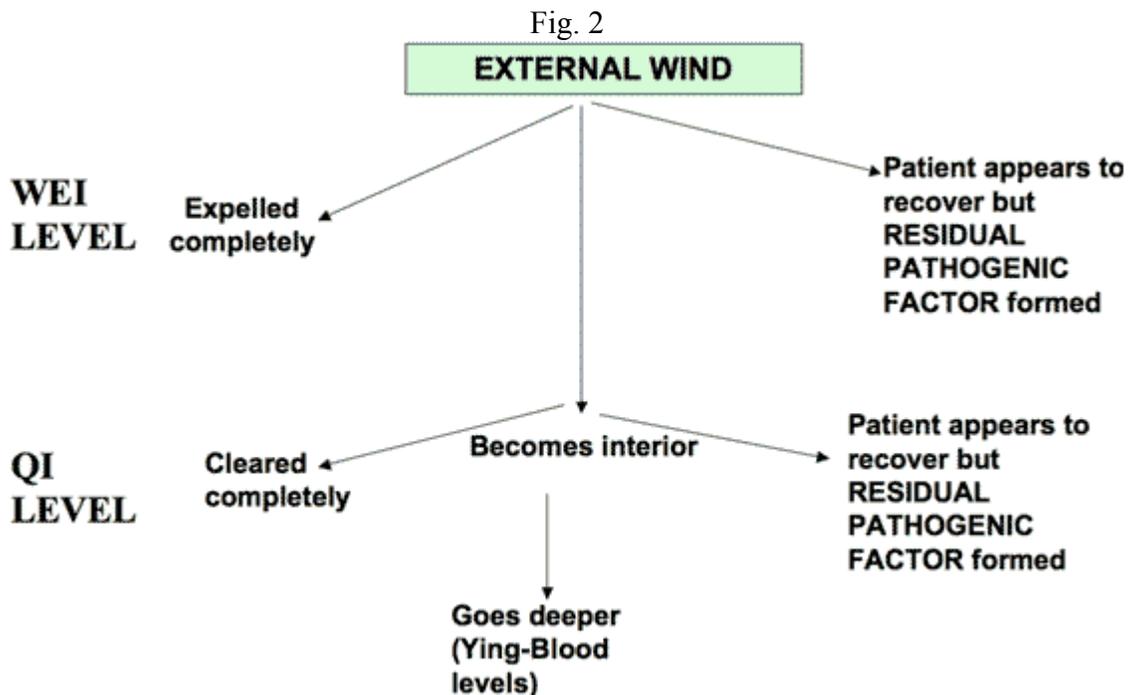
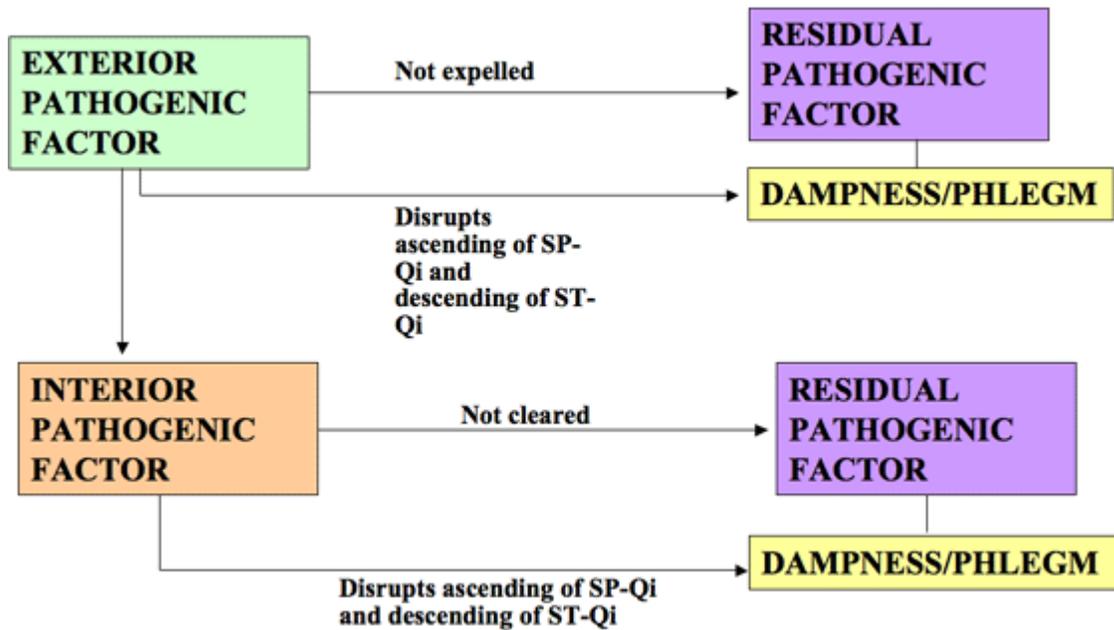
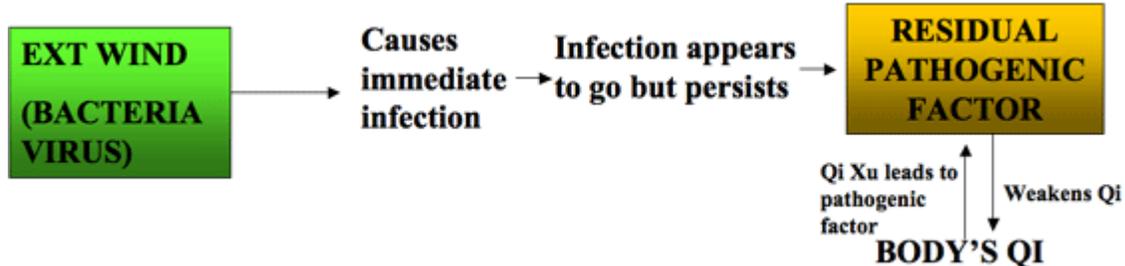


Fig. 3



Thus, a residual pathogenic factor is simply a left-over pathological product when the patient appears to recover after an acute invasion of an exterior agent but the illness persists. Once formed in the Interior, a residual pathogenic factor on the one hand continues to produce symptoms and signs, or on the other, it predisposes the person to further invasions of exterior pathogenic factors because it obstructs the proper diffusing and descending of Lung-Qi and the ascending and descending of Spleen-Qi and Stomach-Qi. Moreover, it will also tend to weaken Qi and/or Yin, establishing a vicious circle of pathogenic factor and deficiency (Fig. 4).

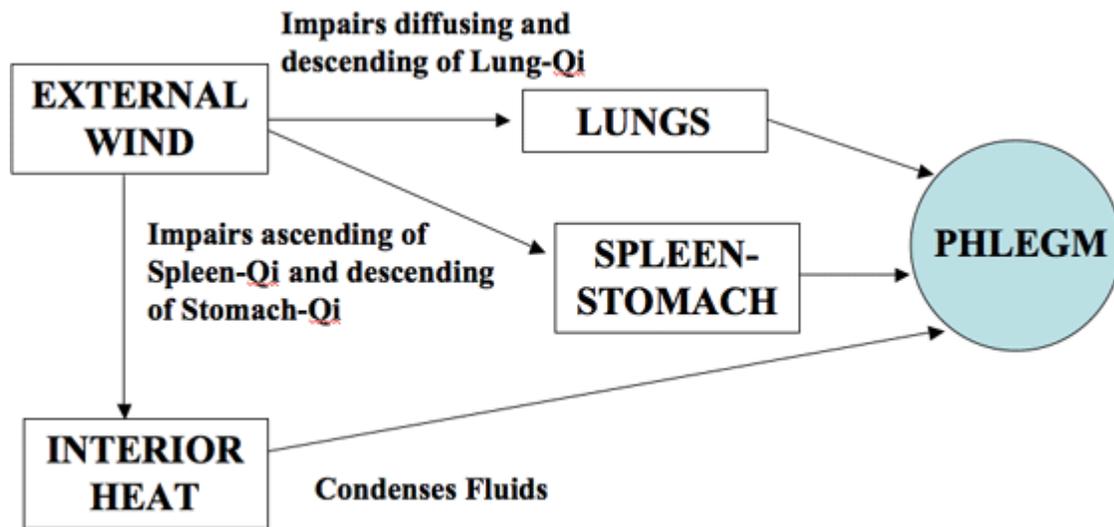
Fig. 4



Residual pathogenic factors frequently manifest with Dampness and/or Phlegm. This occurs because external Wind and its resulting residual pathogenic factor disrupt the ascending of Spleen-Qi and the descending of Stomach-Qi. Thus, because Stomach-Qi cannot descend, turbid fluids are not transformed, and because Spleen-Qi cannot ascend, the clear fluids cannot be transformed: this leads to the formation of Dampness and/or Phlegm.

Secondly, Heat burns the body fluids which can then condense into Dampness or Phlegm. Once formed, Dampness and/or Phlegm are rather self-perpetuating. In fact, Dampness and Phlegm impair the Spleen's transformation and transportation which in itself leads to more Dampness or Phlegm being formed, thus establishing a vicious circle (Fig. 5).

Fig. 5



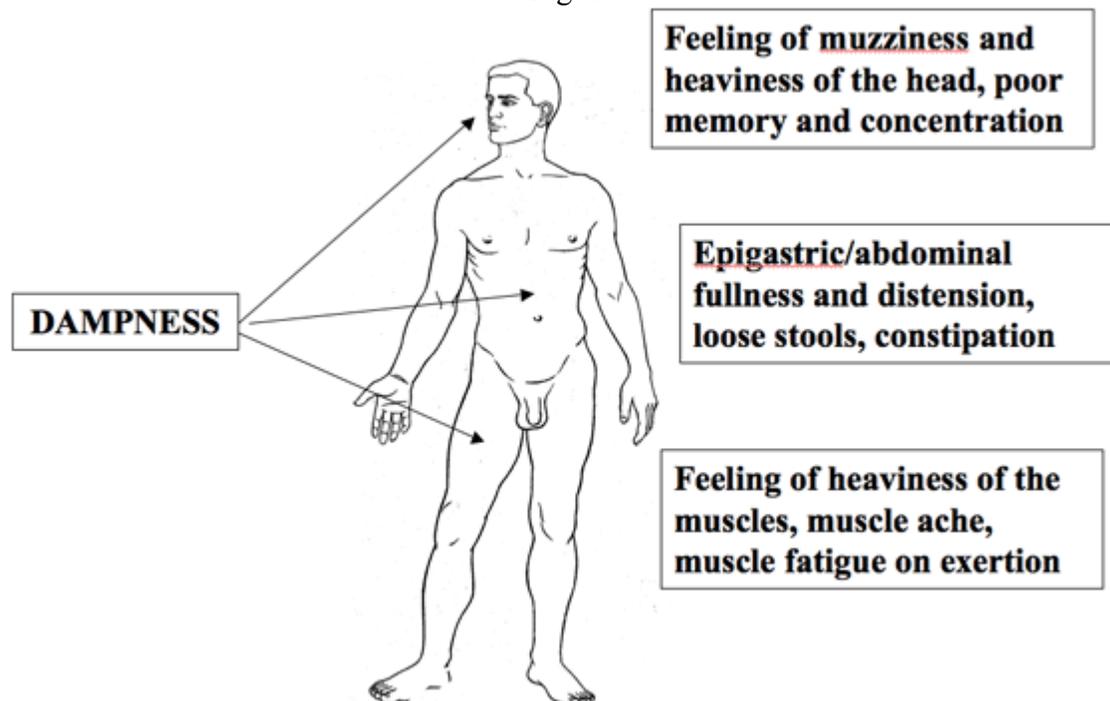
CLINICAL NOTE

Five main causes that favour the formation of a residual pathogenic factor:

1. Weak constitution
2. Exposure to cold, dampness or wind too soon after an invasion of external Wind
3. Irregular diet
4. Not taking care during an acute illness
5. Antibiotics.

In the case of Chronic Fatigue Syndrome, the residual pathogenic factor is nearly always Dampness (with or without Heat). In Chronic Fatigue Syndrome, Dampness is typically in three locations (Fig. 6):

Fig. 6



1. In the head (causing poor memory and concentration)
2. In the Stomach and Spleen (causing digestive problems)
3. In the muscles (causing muscle ache, fatigue and heaviness)

b) LATENT HEAT

Symptoms of Chronic Fatigue Syndrome, appearing without an acute infection can be explained as a manifestation of Latent Heat. The concept of Latent Heat is very ancient and, originally, it was used to explain the manifestations of acute Heat as a transformation of Cold.

The ASimple Questions in chapter 3 says: AIf Cold enters the body in wintertime, it comes out as Heat in springtime³. Wang Shu He says: AIn Winter Cold attacks causing Shang Han disease; if a person does not fall ill, the Cold hides under the skin and in springtime it changes into Heat. Ye Tian Shi says: AWarm disease in Spring is due in every case to pathogenic factor lurking in Winter.

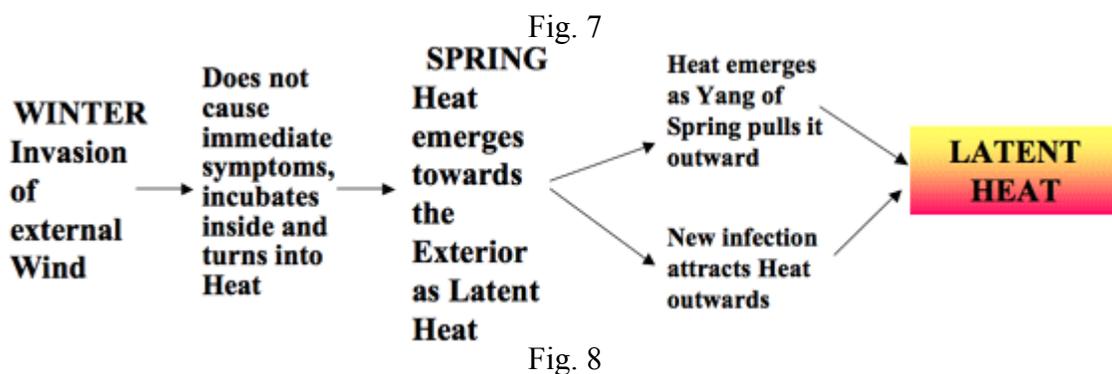
This means that under certain circumstances, a pathogenic factor (which may be Wind-Cold or Wind-Heat) can enter the body without causing immediate symptoms. It then incubates inside the body for some time, turning into Heat which later emerges towards the Exterior causing a person to feel suddenly very tired with weary limbs, slightly thirsty, hot and irritable. He or she would not sleep well and the urine would be dark. At this time the pulse feels Fine and slightly Rapid and the tongue is Red. This condition is called Latent Heat or Spring Heat, although it can occur in any season and not just in springtime.

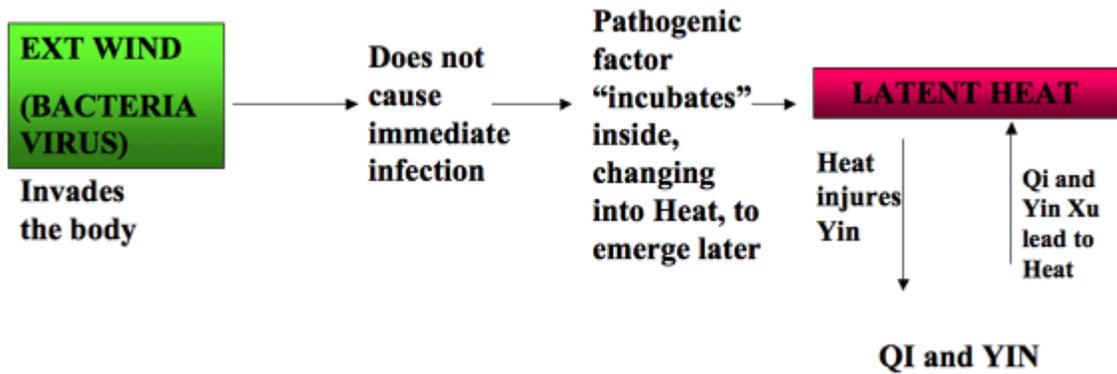
CLINICAL NOTE

Clinical Manifestations of Latent Heat

1. Weary limbs
2. Irritability
3. Insomnia
4. Slight thirst
5. Slight feeling of heat
6. Lassitude with sudden onset
7. Dark urine
8. Red tongue
9. Rapid-Fine pulse

Besides causing the above symptoms and signs, Latent Heat will also tend to injure Qi and/or Yin, thus establishing a vicious circle of Heat and deficiency (Figs. 7 and 8).



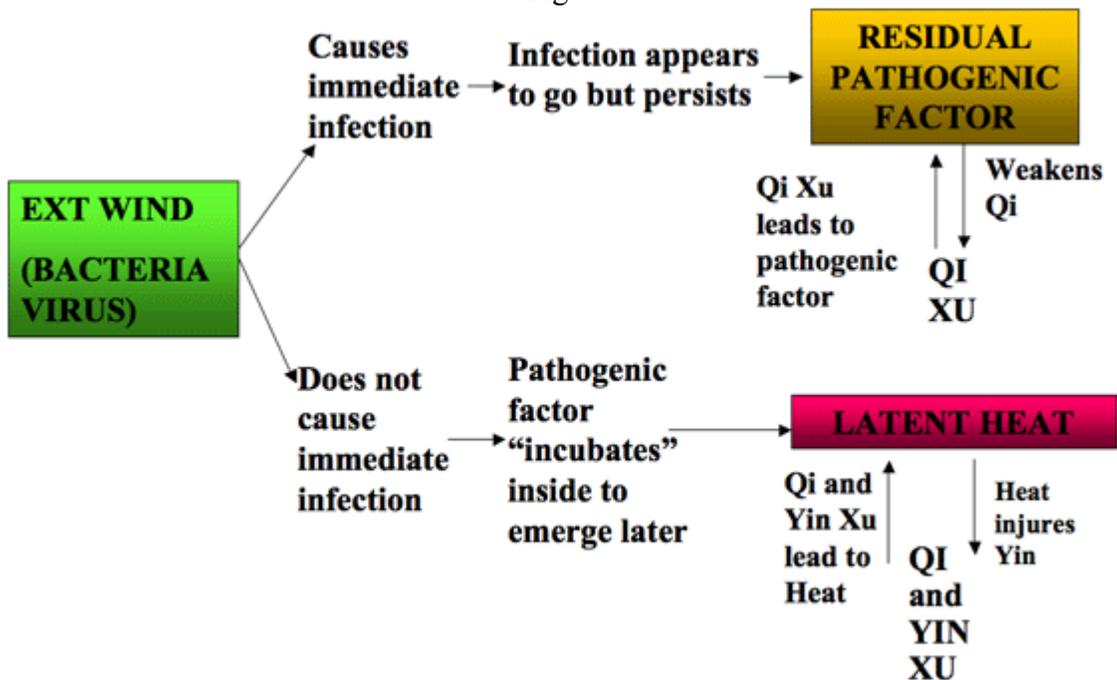


Thus Latent Heat occurs when an individual suffers an invasion of exterior Wind without developing immediate symptoms and the pathogenic factor goes into the Interior where it turns into Heat and comes out months later. The underlying reason for this is usually a Kidney deficiency. If the body condition and the Kidneys are relatively good, a person will develop symptoms at the time of invasion of external Wind. This is a healthy reaction. If the Kidneys are weakened by overwork and excessive sexual activity, the body's Qi is too weak even to respond to the invading external Wind. This causes the Wind to penetrate into the Interior without the person developing exterior symptoms. Once in the Interior, it incubates and turns into Heat to come out some months later.

The ancient doctors believed in particular that if the Essence is properly guarded and not dissipated, pathogenic factors will not enter the body and Latent Heat will not develop. The A Simple Questions in chapter 4 says: A The Essence is the root of the body, if it is guarded and stored Latent Heat will not appear in springtime⁴. It also says: A In Winter, Cold attacks; in Spring, Heat attacks⁵. Latent Heat is also called Spring Heat.

To summarize, the two conditions which can lead to Chronic Fatigue Syndrome, can be illustrated with a diagram (Fig. 9).

Fig. 9



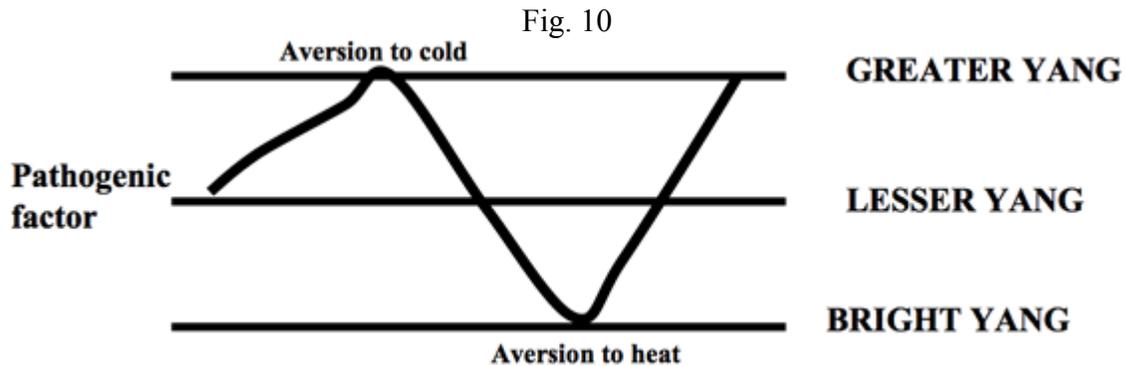
c) LESSER YANG PATTERN

Exterior Wind-Heat (or Wind-Cold) can sometimes lodge itself in an energetic niche which is in between the Interior and Exterior (called Half-Exterior Half-Interior in Chinese). In the scheme of the 6

Stages patterns and specifically of the three Yang stages, the Greater Yang (Tai Yang) stage is the most exterior, the Bright Yang (Yang Ming) the most interior and the Lesser Yang (Shao Yang) the Ahinge between the two.

Sometimes, exterior Wind invades the body through the Greater Yang stage and then lodges itself in the Lesser Yang stage: when this happens, the pathogenic factor is Atrapped between the Greater Yang and Bright Yang stages: it somehow Abounces back and forth between the Exterior (Greater Yang) and the Interior (Bright Yang). When it bounces towards the Greater Yang, the patients experiences aversion to cold; when it bounces back towards the Bright Yang, the patient feels hot (subjectively hot).

See Figure 10.

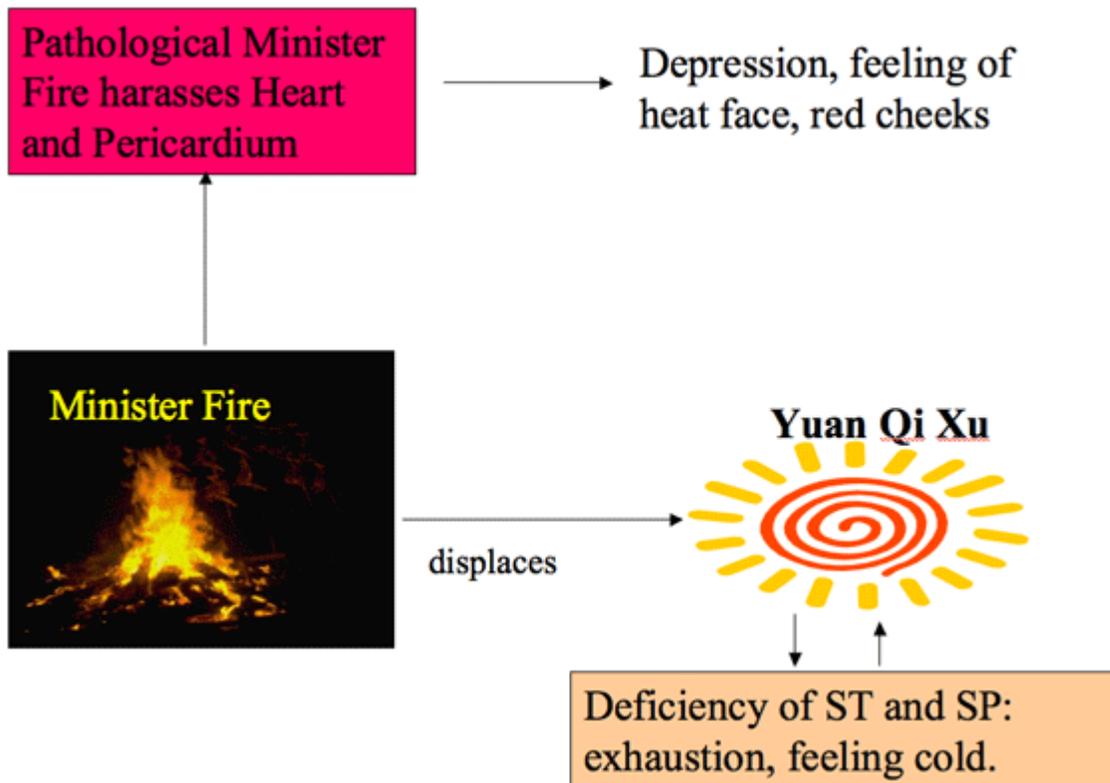


The main clinical manifestations of this pattern are: feeling hot and cold in alternation, fullness of the hypochondrial region, poor appetite, irritability, dry throat, nausea, bitter taste, blurred vision, white-sticky tongue coating on one side only and a Wiry pulse. These symptoms describe the Lesser Yang pattern of the 6 Stages.

d) YIN FIRE

The concept of Yin Fire was introduced by Li Dong Yuan in his book *A Discussion of Stomach and Spleen* (Pi Wei Lun, 1246). Dr Li says that, as a result of improper diet and overwork, the Original Qi (Yuan Qi) becomes weak in the Lower Burner and the Stomach and Spleen are weakened in the Middle Burner. This causes the patient to feel tired and often cold. When the patient is also subject to emotional stress, the Minister Fire is stirred, it becomes pathological and it leaves its place of Aconcealment in the Lower Dan Tian (Fig. 11).

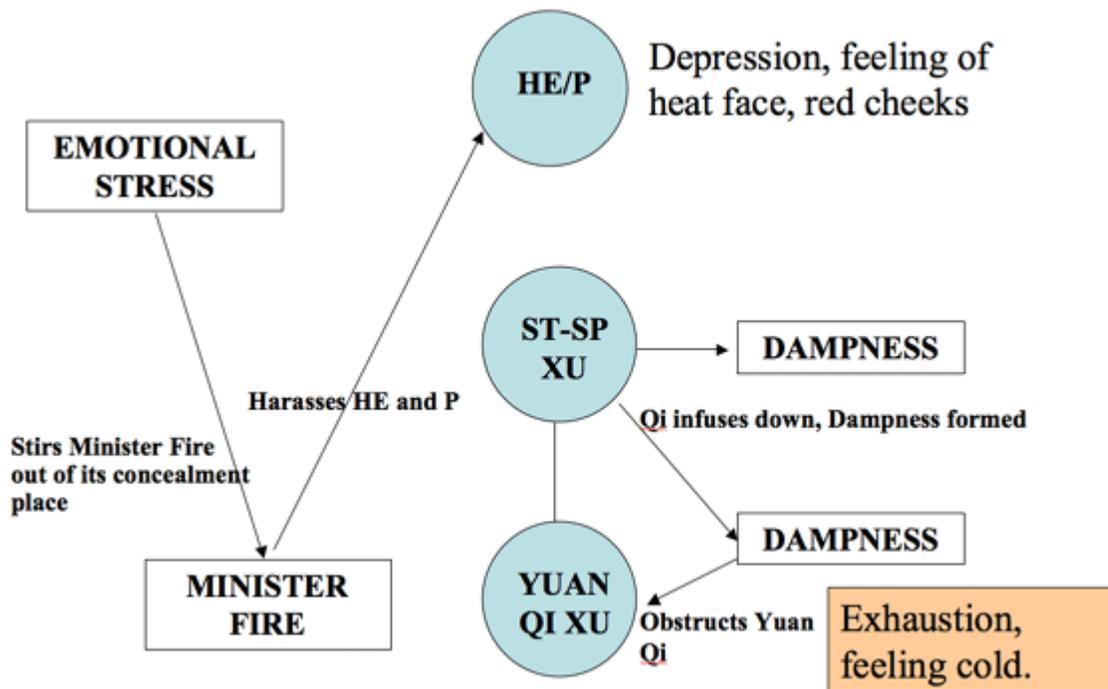
Fig. 11



As the Minister Fire and the Original Qi reside in the same place in the Lower Dan Tian, the pathological Minister Fire displaces and weakens the Original Qi even more. Dr Li said that the pathological Minister Fire becomes a Thief of the Original Qi. The arousal of the pathological Minister Fire upwards causes some Heat symptoms in the upper part of the body such as a red face and mouth ulcers. This he called **AYin Fire**: Yin Fire is neither Full Heat nor Empty Heat but simply a different kind of Heat that derives from a deficiency of the Original Qi and of the Stomach and Spleen. It follows that Yin Fire is not treated by clearing Heat or draining Fire but by tonifying the Original Qi and gently clearing Heat upwards.

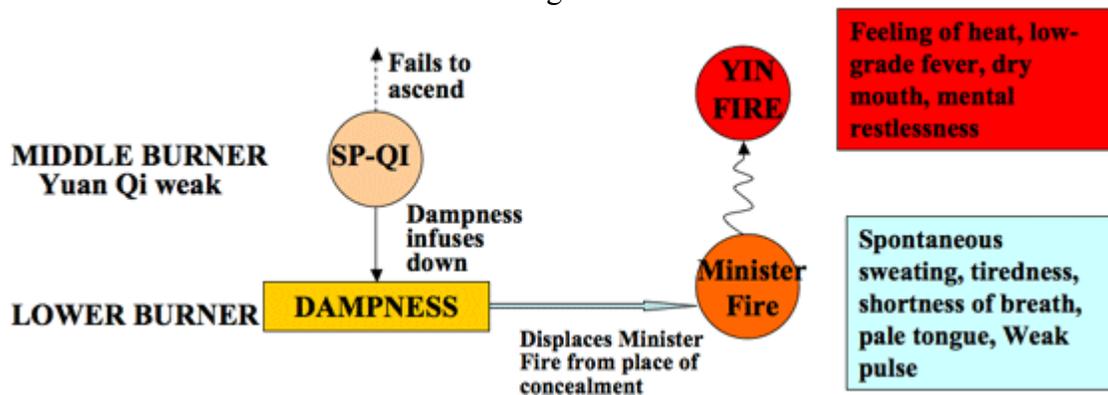
The pathology of Yin Fire is further complicated by Dampness and by a pathology of the Middle Burner as well. When the Spleen is deficient, Dampness is formed and this infuses down to the Lower Burner. Here it Aswamps the Original Qi and the Minister Fire displacing the latter from the place (the Lower Burner) where it should be Aconcealed (Fig. 12).

Fig. 12



The Middle Burner has Dampness too, Spleen-Qi (or even Spleen-Yang) is deficient and fails to rise. For this reason, Bu Zhong Yi Qi Tang Tonifying the Centre and Benefiting Qi Decoction is used to raise Spleen-Qi; warm Spleen-Yang so that Dampness no longer infuses downwards to the Lower Burner. When the Lower Burner is opened and unblocked from Dampness, the Minister Fire will return to its place of concealment in the Lower Burner, thus eliminating the symptoms of Yin Fire (Fig. 13).

Fig. 13



Bu Zhong Yi Qi Tang eliminates Yin Fire by tonifying the Original Qi with Ren Shen Radix Ginseng and by lightly clearing Heat upwards with Chai Hu Radix Bupleuri and Sheng Ma Rhizoma Cimicifugae. The remedy Tonify Qi and Ease the Muscles is a variation of Bu Zhong Yi Qi Tang.

CLINICAL NOTE

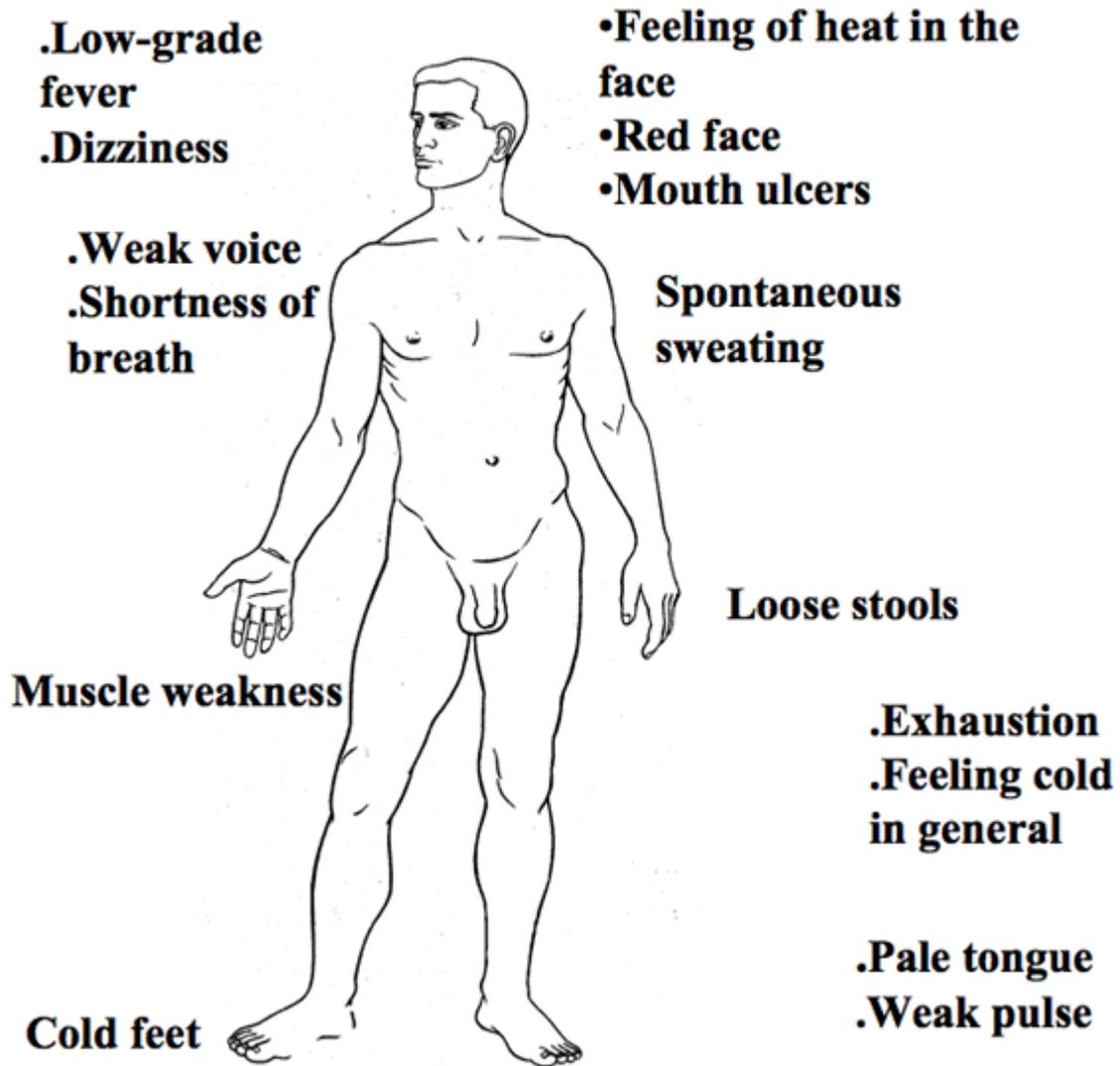
Clinical Manifestations of Yin Fire

1. Feeling of heat in the face
2. Red face
3. Mouth ulcers
4. Occasionally a low-grade fever
5. Dizziness
6. Weak voice
7. Depression

- 8. Muscle weakness
- 9. Exhaustion
- 10. Feeling cold in general
- 11. Loose stools
- 12. Cold feet
- 13. Spontaneous sweating
- 14. Shortness of breath
- 15. Pale tongue
- 16. Weak pulse (Fig. 14)

Fig. 14

Depression



e) DEFICIENCY

In addition to the above four factors, in Chronic Fatigue Syndrome there is always an underlying deficiency of the body's Qi which favours the formation of Latent Heat, a residual pathogenic factor, or of Yin Fire.

The deficiency may be of Qi, Yang, Blood or Yin although a deficiency of Qi is the most common. The organs involved are mainly the Spleen, Lungs, Liver and Kidneys: of these, the Spleen is the one that is most commonly involved.

In the development of Latent Heat and Yin Fire, a deficiency of the Kidneys is particularly important. As we have seen above, in Latent Heat, a person is subject to an invasion of Wind without developing acute symptoms. The pathogenic factor penetrates into the Interior, it lurks inside and emerges later as Latent Heat: the reason for this pathology is primarily a deficiency of the Kidneys.

I personally consider the essential manifestations of true Chronic Fatigue Syndrome to be in four main groups:

- A pronounced muscle fatigue and ache
- Poor memory and concentration
- Exhaustion
- A persisting, intermittent, general flu-like feeling

SUMMARY BOX AETIOLOGY

- OVERWORK
- IRREGULAR DIET
- EXCESSIVE SEXUAL ACTIVITY (IN MEN)
- EMOTIONAL STRESS
- EXCESSIVE PHYSICAL WORK AND SPORT
- ANTIBIOTICS (in the case of residual pathogenic factor)
- IMMUNIZATIONS (in the case of Latent Heat)

3. PATHOLOGY AND TREATMENT PRINCIPLES

The main symptoms of Chronic Fatigue Syndrome are:

- A pronounced muscle fatigue and ache
- Poor memory and concentration
- Exhaustion
- A persisting, intermittent, general flu-like feeling

ATRUE CHRONIC FATIGUE SYNDROMEANOT TRUE CFS

- Chronic fatigue for a long time
- Tiredness after an infection
- Drastic changes in brain activity
- Not many changes in brain activity
- Pronounced muscle ache
- Muscle ache absent or mild
- Recurrent flu-like feeling, sore throat, swollen glands- No flu-like feeling

CLINICAL NOTE

In order to distinguish Full from Empty conditions of Chronic Fatigue Syndrome, I attach great importance to the tongue and pulse. If the tongue has a thick coating and the pulse is Full and Slippery, the condition is predominantly Full. If the tongue has a thin coating (or not coating) and the pulse is Weak in general, then Emptiness predominates.

In summary, the following are the features of Full and Empty conditions of Chronic Fatigue Syndrome:

FULL EMPTY

- Muscle ache intense
- Muscle ache absent or mild
- Thick tongue coating
- Thin tongue coating or no coating
- Full pulse
- Weak pulse
- Treatment principle: resolve Dampness
- Treatment principle: tonify Qi

4. IDENTIFICATION OF PATTERNS AND TREATMENT

The patterns discussed are:

Full conditions

Dampness in the muscles
Lesser Yang pattern
Yin Fire

Empty conditions

Qi deficiency
Yang deficiency
Blood deficiency
Yin deficiency

FULL CONDITIONS

a) DAMPNESS IN THE MUSCLES

Clinical manifestations

Pronounced ache in the muscles, a feeling of heaviness of the limbs, muscle fatigue on slight exertion, tiredness and sleepiness, feeling of heaviness of the body or head, no appetite, feeling of fullness of the chest or epigastrium, a sticky taste, poor memory, lack of concentration, a muzzy (fuzzy) feeling of the brain, dull headache.

Tongue: a sticky tongue coating.

Pulse: Slippery.

In case of Damp-Heat: feeling of heat, thirst but without desire to drink, a bitter taste, slightly dark urine, a yellow vaginal discharge, loose stools with offensive odour, yellow tongue coating.

Treatment principle

Resolve Dampness, if necessary, clear Heat.

Herbal therapy Prescription

LIAN PO YIN
Coptis-Magnolia Decoction

Prescription

ZHI SHI DAO ZHI WAN
Aurantium Eliminating Stagnation Pill

Prescription

HUO PO XIA LING TANG
Pogostemon-Magnolia-Pinellia-Poria Decoction

Prescription

GAN LU XIAO DU YIN

Three Treasures remedies

Ease the Muscles

Ease the Muscles is used when there is Damp-Heat. It is a variation of Lian Corporeal Soul Yin. It has been modified with the addition of herbs to fragrantly resolve Dampness from the muscles.

Drain Fields

Drain Fields is a variation of Huo Corporeal Soul Xia Ling Tang which resolves Dampness in the Middle Burner. It has been modified with the addition of herbs that fragrantly resolve Dampness from the muscles.

b) LESSER YANG PATTERN

Clinical manifestations

There are two types of patterns pertaining to the Lesser Yang channels: one from the 6 Stages (from the ADiscussion of Cold-induced Diseases by Zhang Zhong Jing, c. AD 200), and the other from the 4 Levels (from the ADiscussion on Warm Diseases by Ye Tian Shi, 1742). They essentially describe the same pattern, the only difference being that the pattern from the 4 Levels involves more Heat.

Principle of treatment

Clear the Lesser Yang.

Herbal therapy

Prescription

XIAO CHAI HU TANG
Small Bupleurum Decoction

Prescription

HAO QIN QING DAN TANG
Artemisia-Apiacea-Scutellaria Clearing the Gall-Bladder Decoction

c) YIN FIRE

Clinical manifestations

Feeling of heat in the face, red face, mouth ulcers, occasionally a low-grade fever, dizziness, weak voice, depression, muscle weakness, exhaustion, feeling cold in general, loose stools, cold feet, spontaneous sweating, shortness of breath.

Tongue: Pale

Pulse: Weak.

Treatment principle

Tonify the Original Qi (Yuan Qi), clear and subdue Yin Fire, raise Qi, resolve Dampness.

Herbal therapy Prescription

BU ZHONG YI QI TANG
Tonifying the Centre and Benefiting Qi Decoction

Three Treasures remedy

Tonify Qi and Ease the Muscles

EMPTY CONDITIONS

d) LUNG- and SPLEEN-QI DEFICIENCY

Clinical manifestations

Tiredness which is worse in the mornings, slight ache in the muscles, muscle fatigue after slight exertion, shortness of breath, weak voice, spontaneous daytime sweating, poor appetite, slight epigastric and abdominal distension, loose stools.

Tongue: Pale.

Pulse: Empty.

Principle of treatment

Tonify Qi primarily, expel any remaining pathogenic factor secondarily.

Herbal therapy Prescription

BU ZHONG YI QI TANG
Tonifying the Centre and Benefiting Qi Decoction

Three Treasures remedy

Tonify Qi and Ease the Muscles

Tonify Qi and Ease the Muscles is a variation of Bu Zhong Yi Qi Tang: it tonifies the Original Qi and resolves Dampness.

e) SPLEEN- AND KIDNEY-YANG DEFICIENCY

Clinical manifestations

Tiredness which is worse in the mornings, slight ache in the muscles, muscle fatigue after slight exertion, slight epigastric and abdominal distension, loose stools, lower backache, weak knees, frequent-pale urination, dizziness, tinnitus, feeling cold, cold feet.

Tongue: Pale.

Pulse: Weak and Deep.

Treatment principle

Tonify Spleen- and Kidney-Yang, resolve Dampness.

Herbal therapy

Explanation

YOU GUI WAN plus LIU JUN ZI TANG

Restoring the Right [Kidney] Pill plus Six Gentlemen Decoction

Three Treasures remedies

Strengthen the Root plus Prosperous Earth

Strengthen the Root is a variation of You Gui Wan to tonify Kidney-Yang and Prosperous Earth is a variation of Liu Jun Zi Tang to tonify Spleen-Qi and resolve Dampness.

f) LIVER-BLOOD DEFICIENCY

Clinical manifestations

Tiredness, muscle fatigue on slight exertion, slight muscle ache, blurred vision, numbness of limbs, dizziness, scanty periods.

Tongue: Pale and Thin.

Pulse: Choppy or Fine.

Treatment principle

Nourish Liver-Blood, strengthen the sinews, resolve Dampness.

Herbal therapy

Prescription

BU GAN TANG
Tonifying the Liver Decoction

Three Treasures remedy

Brocade Sinews

Brocade Sinews nourishes Liver-Blood and strengthens the sinews.

g) YIN DEFICIENCY

Clinical manifestations

These vary according to the organ involved. The three organs which most frequently suffer from Yin deficiency in Chronic Fatigue Syndrome. are the Lungs, Stomach and Kidneys. Combinations of two or even all three of these are common.

Lung-Yin deficiency

Dry throat, dry cough, exhaustion, breathlessness, hoarse voice, feeling of heat in the afternoon, night sweating.

Tongue: without coating (possibly only in the front part). There may be cracks in the Lung area.

Pulse: Floating-Empty.

Principle of treatment

Nourish Yin, generate fluids, strengthen the Lungs.

**Herbal therapy
Prescription**

SHA SHEN MAI DONG TANG
Glehnia-Ophiopogon Decoction

Three Treasures remedy

Jade Spring

Jade Spring is a variation of Sha Shen Mai Dong Tang: it nourishes Lung- and Stomach-Yin.

Stomach-Yin deficiency

Dry mouth, no appetite, tiredness, dry stools, slight epigastric pain, malar flush, thirst with no desire to drink or a desire to drink only in small sips.

Tongue: normal body-colour, midline crack in the centre, rootless coating or no coating in the centre, transversal cracks on the sides indicating chronic Spleen-Qi and Spleen-Yin deficiency.

Pulse: Floating-Empty on the right Middle position.

Principle of treatment

Nourish Yin, strengthen Stomach and Spleen.

**Herbal therapy
Prescription**

YI WEI TANG
Benefiting the Stomach Decoction

Explanation

This formula nourishes Stomach-Yin.

Three Treasures remedy

Jade Spring

Jade Spring is a variation of Sha Shen Mai Dong Tang: it nourishes Lung- and Stomach-Yin.

Central Mansion

Central Mansion is used if there is a rootless coating (Jade Spring if there is no coating).

Kidney-Yin deficiency

Soreness of the lower back, exhaustion, depression, lack of drive and will-power, weak legs and knees, dizziness, tinnitus, deafness, dry mouth and throat which are worse at night, night sweating, disturbed sleep (waking up during the night), thin body.

Tongue: without coating.

Pulse: Floating-Empty.

Principle of treatment

Nourish Yin, strengthen the Kidneys and firm Will-Power.

**Herbal therapy
Prescription**

ZUO GUI WAN
Restoring the Left [Kidney] Pill

Three Treasures remedy

Nourish the Root

Nourish the Root is a variation of Zuo Gui Wan and it nourishes Kidney-Yin.

END NOTES

1. Shepherd C. 1989 Living with M.E., Cedar, William Heinemann Ltd., London, pp. 14-16.
2. Ibid., p. 889.
3. 1979 The Yellow Emperor's Classic of Internal Medicine-Simple Questions (Huang Di Nei Jing Su Wen [ch#]), People's Health Publishing House, Beijing, first published c. 100 BC, p. 21.
4. Ibid., p. 24.
5. Ibid., p. 24.