

Chen Xiao-wen on Hypothyroidism

abstracted & translated by
Bob Flaws, L.Ac.

Keywords: Chinese medicine, Chinese herbal medicine, endocrinology, hypothyroidism

According to Chen Xiao-wen of the No. 1 Affiliated Hospital of the Anhui College of Chinese Medicine, the root disease mechanism of hypothyroidism is typically an original qi insufficiency, primarily meaning a kidney yang insufficiency. However, this may then be complicated by any of several other disease mechanisms, especially phlegm turbidity and blood stasis. On pages 280-281 of issue #3, 2002 of *Shan Xi Zhong Yi (Shanxi Chinese Medicine)*, Dr. Chen published an article titled, “A Trivial Discussion of the Diagnosis & Treatment of Adult Hypothyroidism.” A summary of this article is presented below.

1. Kidney yang in decline, life-gate fire debility

Clinical presentation: Facial color somber white, superficial edema around the eyes possibly extending to the entire body, however, no obvious pitting on pressure, decreased memory power, falling hair, fear of cold, chilled extremities, heart flutter (*i.e.*, palpitations), chest oppression, a pale, fat tongue with thin, white fur, and a deep, slow, or moderate/relaxed (*i.e.*, slightly slow) pulse

Treatment principles: Warm yang, supplement the kidneys, and boost the qi

Possible formulas: Modified You Gui Wan (Right [Kidney] Returning Pill) or Ban Lung Wan (Spotted Dragon Pill)

Commonly used medicinals: Xian Ling Pi (Herba Epimedii), Xian Mao (Rhizoma Curculiginis), Fu Zi (Radix Lateralis Praeparata Aconiti), Gan Jiang (dry Rhizoma Zingiberis), Dang Shen (Radix Codonopsis), Rou Gui (Cortex Cinnamomi), Huang Qi (Radix Astragali)

2. Yang vacuity reaching yin, liver-kidney insufficiency

Clinical presentation: In addition to the above signs and symptoms, there may also be chapped skin, dryness, scanty/reduced sweating, constipation, a reddish tongue with scanty/reduced fur, and a fine, soft pulse.

Treatment principles: Supplement both yin and yang

Commonly used medicinals: Supplementing yin to encourage or promote yang medicinals, such as Tu Si Zi (Semen Cuscutae) and Rou Cong Rong (Herba Cistanchis), combined with supplementing vacuity and filling essence medicinals, such as Huang Jing (Rhizoma Polygonati) and Gou Qi Zi (Fructus Lycii). If yang vacuity is severe, one can also use warming and supplementing kidney yang medicinals, such as Xian Mao (Rhizoma Curculiginis) and Xian Ling Pi (Herba Epimedii). If essence depletion and yin vacuity are severe, one can also use Shu Di Huang (cooked Radix Rehmanniae), He Shou Wu (Radix Polygoni Multiflori), Mai Men Dong (Tuber Ophiopogonis), Yu Zhu (Rhizoma Polygoni Odorati), and Wu Wei Zi (Fructus Schisandrae).

3. Spleen vacuity phlegm congelation, water dampness not transformed

Clinical presentation: Devitalized desire for food, torpid intake, abdominal distention, lassitude of the

spirit, weak extremities, superficial edema of the face, loose stools or constipation. If severe, there may also be accumulation of fluids in the chest, accumulation of fluids in the pericardium, and/or ascites.

Note: Dr. Chen assumes that this pattern presents in tandem with kidney yang vacuity above.

Treatment principles: Fortify the spleen and strengthen movement, transform dampness and disinhibit water

Commonly used medicinals: Dang Shen (Radix Codonopsis), Huang Qi (Radix Astragali), Fu Ling (Poria), Zhu Ling (Polyporus), Da Fu Pi (Pericarpium Arecae), Che Qian Zi (Semen Plantaginis), Gui Zhi (Ramulus Cinnamomi), Ze Xie (Rhizoma Alismatis), Yi Yi Ren (Semen Coicis Lachyrma-jobae), Bai Mao Gen (Rhizoma Imperatae). To move the qi, one can also add Mu Xiang (Radix Aucklandiae), Fou Shou (Fructus Citri Sacrodactylis), and/or Lu O Mei (Flos Pruni Mume).

4. Liver depression transforming fire, constructive & yin hidden/hazy & consumed

Clinical presentation: A bitter taste in the mouth, insomnia, vexation and agitation, a red tongue with scanty/reduced fur or possible no fur

Treatment principles: Level the liver and clear heat, nourish yin and harmonize the constructive

Possible formulas: Modified Xiao Yao San (Moutan & Gardenia Rambling Powder) or Yi Guan Jian (One Link Decoction)

Commonly used medicinals: Shan Yao (Radix Dioscoreae Oppositae), Xia Ku Cao (Spica Prunellae), Bai Shao (Radix Alba Paeoniae), Fu Ling (Poria), Mu Dan Pi (Cortex Moutan), Zhi Zi (Fructus Gardeniae), Xuan Shen (Radix Scrophulariae Ningpoensis), Tai Zi Shen (Radix Pseudostellariae)

5. Phlegm & qi mutually obstructing, network vessel stasis obstruction

Clinical presentation: In addition to any of the above signs and symptoms, there is an enlarged thyroid, elevated serum lipids, and increased blood viscosity.

Treatment principles: In addition to warming and supplementing kidney yang, enriching and nourishing kidney yin, fortifying the spleen and strengthening movement as necessary, one should also disperse scrofula and scatter binding.

Commonly used medicinals: To disperse scrofula and scatter binding, Jie Geng (Radix Platycodi), Zhe Bei Mu ((Bulbus Fritillariae Thunbergii), and Mang Xiao (Mirabilitum). To quicken the blood, transform stasis, and scatter binding, Hong Hua (Flos Carthami) and Dan Shen (Radix Salviae Miltiorrhizae).

Comment: The representative case history given by Dr. Chen describes a 57-year-old female who first developed hyperthyroidism but then swung to hypothyroidism as a result of her Western medical treatment. At the time she was seen by Dr. Chen, she had only been hypothyroid for one month. After one month of treatment with Chinese medicinals based on her presenting pattern, her serum T3 and T4 levels were back to normal. The patient continued taking Chinese medicinals in pill form for another three months to consolidate the therapeutic effects.

The reason I mention this case history is to caution practitioners not to expect to successfully cure long-standing hypothyroidism with Chinese medicine. If hypothyroidism is of relatively recent onset, as was the case presented by Dr. Chen, and especially if the hypothyroidism is the result of some extrinsic

precipitating factor, such as medication, cure is possible. However, in cases of long-term hypothyroidism, for instance due to Hashimoto's thyroiditis, the more likely scenario is the continuous use of thyroid hormone supplementation therapy combined with Chinese medicinals based on pattern discrimination for the *management* of this condition. In my experience, such an integrated Chinese-Western medical approach can successfully keep thyroid supplementation low, prevent or minimize any adverse reactions to such supplementation, treat any symptoms of hypothyroidism that may not respond to thyroid hormone supplementation, and both prevent and treat any complications of hypothyroidism. In other words, one's expectations need to be realistic based on the etiology and duration of the condition.

Copyright © Blue Poppy Press, 2010. All rights reserved.