

BOX 4.1**Thermal Food Qualities****Cooling**

Pork, duck, eggs, clams, crab, millet, barley, wheat, lettuce, celery, broccoli, spinach, tomato, banana, watermelon, asparagus, ice cream, soy sauce

Neutral

Beef, beef liver, rabbit, sardines, yam, rice, corn, rye, potato, beet, turnip, carrot, lemon, apple

Warming

Tuna, turkey, salmon, lamb, venison, chicken, chicken liver, shrimp, trout, oats, cabbage, squash, kale, scallion, celery, ginger, sugar, garlic, pepper

added to the diet to help activate the metabolism and provide more energy. People experiencing an excess in yang may be tense, loud, hyperactive, and aggressive. Adding yin foods to the diet cools their internal tension.

TCM practitioners recommend certain foods for balancing and improving a variety of conditions. Foods can be potent healers, especially when dealing with temporary illnesses, but they are never used as a lone treatment for serious or chronic conditions.

Herbs

Herbal medicine (*ahong yao*) is an integral part of TCM. In terms of the complexity of diagnosis and treatment, it resembles the practice of Western internal medicine. Herbs may be taken in the form of tea, or the substances may be powdered and made into pills, pastes, or tinctures for internal or external use. Just as with food, some herbs are warming (cinnamon) and some are cooling (mint).

With the exception of conditions that require surgery, herbs can be used to treat almost any condition in the practice of TCM. Herbs are often prescribed in complex mixtures and tend not to be used as isolated components, for example, as extractions from the parent plant. TCM practitioners believe that the healing benefits of herbs result from the synergistic interactions of all the components of the plant. The same herb can be used for many different disorders. Likewise, the same disorder in different people will be treated with different herbs, depending on the assessment of the individual. Herbs are used in the following ways: antiviral, antibacterial, antifungal, and anticancer. Herbs are also used to treat pain, aid digestion, lower cholesterol, treat colds and flus, increase resistance to disease, enhance immune function, improve

circulation, lists herbs commonly used in greater detail.

Box 4.2 covers the use of herbs

Massage

Traditional Chinese massage methods were described in texts as early as 200 B.C. *Tui na* is the forerunner of all forms of massage therapy that exist today. It differs from other forms of massage in that it is used to treat not only musculoskeletal problems but also internal diseases. *Tui na* practitioners must know

BOX 4.2

Tonic Herbs Frequently Used in Traditional Chinese Medicine

Herb	Use
Astragalus	Enhances immune function by increasing activity of WBCs; increases production of antibodies and interferon
Dong quai	Blood-building tonic that improves circulation, tones the uterus, balances female hormones
Garlic	Lowers blood pressure, lowers cholesterol and triglycerides; antiseptic, antifungal
Ginger	Warming effect; stimulates digestion, decreases nausea, relieves aches and pains
Gingko	Mediates the allergic and inflammatory reaction in asthma; not to be taken with aspirin or other anticoagulants; discontinue before surgery
Ginseng	Increases appetite and digestion, tones skin and muscles, restores depleted sexual energy
Siberian ginseng	Enhances immune function, increases energy
Green tea	Lowers cholesterol; anticancer effects, antibacterial effects
Ho shou wu	Cleans the blood, nourishes hair and teeth, increases energy; powerful sexual tonic
Licorice	Used as an expectorant in bronchitis and asthma; anti-inflammatory, antitussive
Ligusticum	Inhibits bronchospasm through bronchodilation
Ma huang	Effective for mild asthma; because it contains ephedrine, in excess it can cause hypertension, tachycardia, palpitations, headache, nervousness, and insomnia. Ephedrine products are banned in many countries because of their use in producing methamphetamines.
Onion (quercetin)	Inhibits the platelet-activating factor in asthma

graves and has now gained popularity in many parts of the world. For modern practitioners, feng shui is a design system based on the flow of energy through one's home and environment. The primary objective is to control and balance surroundings in a way that brings happiness, prosperity, and health. Feng shui is based on the principles of qi, yin and yang, five phases, five seasons, and numbers and as such is an adjunct to other healing methods.

Many people are aware of the impact their surroundings have on them and use feng shui principles to improve their lives. Practitioners assess the interaction between the home's energy field and those of the people who reside there. These combined energy forces are significant factors in why and how we develop certain diseases and can be altered to improve our health status. Feng shui practitioners help people determine placement of furniture, colors, and designs that are comfortable, healthy, and supportive. For example, the entrance to the home should draw people into its nurturing space. The front door is seen as an opening for qi, and obstructions near the door can block good qi, prosperity, and luck from entering the home. Feng shui describes stairway placement; front and back door alignment; bedroom arrangement; placement of electronic equipment; living room, dining room, kitchen, and bathroom arrangement; use of a fireplace; as well as the choice of art. Mirrors have many curative uses, such as lighting up dark corners, slowing down the flow of qi, and deflecting unwanted influences.

Color is a vibration to which people respond both consciously and unconsciously. *Red* is stimulating and dominant and is associated with warmth and prosperity. *Yellow* is associated with intellect, decisiveness, and optimism. *Green* symbolizes growth, fertility, and harmony, while *blue* is peaceful and soothing. *Purple* is dignified and spiritual, *brown* suggests stability and safety, *pink* is linked to happiness and romance, and *orange* encourages communication. *White* symbolizes new beginnings and purity. *Black* is mysterious and independent. The aim of feng shui is to ensure good qi flow, balance, and harmony with one's surroundings. Feng shui music is designed to help people improve their physical and mental health through naturally balancing the energy in the physical and etheric bodies (Collins, 2008).

RESEARCH

Although extensive research has been done in China through the institutions of Traditional Chinese Medicine, much clinical research has been in the form of reports of observed results of various treatments. Many of these reports have been difficult to translate into Western languages and into the causal and analytic type of research modalities typical of the biomedical model. Research standards throughout the world are subject to cultural influences. Not all cultures require their medical practitioners to conduct randomized, double-blind clinical trials. Consequently, the research data are influenced by the location of the study. Research that is meaningful to the scientific communities of China and Japan may not have the same impact on European and North American biomedical communities.

Extensive research has been published on the pharmacology and toxicity of many traditional herbs. Researchers in China and Japan have studied the therapeutic value of herbs in the following areas: chronic hepatitis, rheumatoid arthritis, hypertension, atopic eczema, various immunologic disorders including AIDS, and certain cancers. Herbs are also given to control the side effects of chemotherapy and radiation. It would be useful to repeat these studies using biomedical research criteria. Research on the medical effects of qigong has been continuing since the mid-1980s and is now focusing on qigong as a biophysical rather than a mystical force. Acupuncture is one of the most thoroughly researched and documented TCM practices. Research studies are covered in more detail in the chapters devoted to these specific practices. Research opportunities in the future might include studies regarding manual healing therapies, bioelectricity, magnetic physical interventions, and the use of mind-body interactions for health purposes. For the most up-to-date list of research studies available in the United States, contact the National Center for Complementary and Alternative Medicine at the National Institutes of Health.

RELATED SYSTEMS

Tibet

In Tibetan Buddhism, religion and medicine are never separated from each other. The spiritual goal of Buddhism is to understand the nature of oneself and suffering and to develop compassion and compassionate action in one's life. Tibetan medicine, a sophisticated system, is based on general medical and philosophical assumptions as well as on each individual's emotions, attitudes, lifestyles, and spiritual beliefs. It is believed that one's positive actions produce happiness, and one's negative actions produce suffering. This belief in cause and effect is referred to as **karma**.

In Tibetan medicine, disease results from two causes. The first cause is spiritual, something brought from past-life karma. Spiritual diseases are mediated by a qualified teacher who uses meditation and yoga to balance body, mind, and spirit. The process of learning how to control one's mind to function in a balanced mode with one's body is called **dharma**.

The second cause of disease involves factors from this life, including seasonal changes, personal habits and behaviors, poisons, and negative spirits. Illness is considered to be a lack of internal harmony or balance or a lack of harmony with the larger external environment. The process of diagnosis is similar to that of Traditional Chinese Medicine. Essential components in helping people mobilize their resources for self-healing are caring and compassion. As Forde (2008) stated, "The most revered healing method in Tibetan medicine is compassion" (p. 14). We in the biomedical field should take careful note of that philosophy.

Other treatments include dietary changes, massage, exercise, yoga, meditation, breath work, moxibustion, and acupuncture. Surgery is used only

when absolutely necessary. Herbal medicines are made from a variety of herbs, minerals, fruits, twigs, roots, and animals. As in the Native American tradition, the state of the practitioner's mind and the method of gathering are important to the medication's therapeutic outcome. All preparation of medicines begins with prayer.

Korea

Chinese medicine arrived in Korea in approximately 200 B.C. The close relationship between China and Korea facilitated the exchange of ideas for hundreds of years. In the 10th century A.D., Korea established its political independence from China, but cultural and medical exchange continued. A contemporary innovative system developed in Korea in 1971 involves hand and finger acupuncture. Energy channels of the entire body are mapped onto the hands, where they are stimulated using short, fine needles and magnets. This system is rapidly gaining in popularity throughout the world (Sing, 2012).

Japan

The history of medical information exchange dates to the first century A.D. By the eighth century, many Chinese medical texts were translated for use in Japan. Several factors contributed to the unique adaptation of Chinese medicine. The scarcity of herbs led to an emphasis on lower prescription doses in Japan. Palpation, as a part of the diagnostic process, includes palpation of the abdominal energy pathways. An area of specialization in Japanese medicine relegates acupuncture, massage, and herbs to separately licensed practitioners. In Japanese medicine, acupuncture involves the use of somewhat finer gauge needles than those used for Chinese acupuncture and shallower insertion. Shiatsu is a holistic health care model using energy techniques to support well-being and to prevent illness. Treatment is based on the relationship between the client and practitioner, who uses gentle pressure along the meridians to correct energy imbalances.

Europe

The history of Chinese medicine in Europe dates to the middle of the 16th century A.D., when European physicians who traveled and studied in China and Japan wrote texts on acupuncture. In the 1950s and 1960s, two notable English acupuncturists, Dr. Felix Mann and Dr. Sidney Rose-Neil, influenced the development of acupuncture in English-speaking countries (Ergil, 2011).

United States

In 1826, Dr. Franklin Bache became one of the first U.S. physicians to use acupuncture in his practice. When large numbers of Chinese laborers arrived in the United States, they were accompanied by TCM physicians and herbal merchants. Ah Fong Chuck became the first licensed practitioner of TCM in

the United States in 1901 when he was awarded a medical license in Idaho. With the advent of World War II and the interruption of the herb supply from China, these practices disappeared or retreated into Chinatowns nationwide. In the 1970s, President Nixon reopened communication with China, and the practice of TCM began to gain visibility once again throughout the United States. Now, a clear interest in acupuncture, herbs, and qigong can be found among many North Americans (Ergil, 2011).

INTEGRATED NURSING PRACTICE

For Chinese immigrants, Western medicine is used for acute or life-threatening situations. Traditional Chinese Medicine is their usual health practice. Managing one's health and illness in the immigrant culture is a family affair rather than an individual process. Family and friends provide health information and share in the decision-making process. This understanding helps nurses provide culturally sensitive care (Kong & Hsieh, 2012).

Although nurses are not educated as TCM practitioners, some principles are common to both nursing and TCM. Nursing and TCM practitioners believe that people are at once mind, body, emotions, and spirit; energy fields become unbalanced as a response to stress; energy fields are constantly interacting; people heal themselves; and the client-practitioner relationship is one of partnership.

Caring and compassion are considered to be essential components in helping people mobilize their resources for self-healing in both the practice of nursing and TCM. A critical attitude on the part of the compassionate nurse is one of *intent* to help and comfort. Even though outcomes of illness are not primarily in the hands of health care practitioners, nurses must still be willing to do their best. In addition to using their valuable technical skills, they must be present in the moment for each client. It means grounding and centering oneself before entering into a healing relationship with another person. It means keeping the focus on the other person rather than being distracted by personal internal dialogue. All levels of nursing practice incorporate principles of caring as a guiding focus for nursing intervention. Some nurses will want to continue their education through in-depth study of the principles and practices of TCM. Requirements and programs of study can be obtained from the Council of Colleges of Acupuncture and Oriental Medicine, the address of which is found in the Resources section.

Before we can care for our clients, we must first learn to value and care for ourselves. Drawing from TCM, self-care means seeking ways to establish and maintain balance and harmony in our lives. Exercise programs might include vigorous exercise such as aerobics, running, or swimming; moderate exercise such as dancing or walking; or gentle movement exercise such as qigong, t'ai chi, or yoga. Touching and being touched are important to our sense of well-being. Self-massage, partner massage, and professional therapeutic massage contribute to a sense of balance and connection with others. Meditation, prayer, and worship are spiritual aspects of self-care. Breath work

is both a physical way to increase relaxation and decrease stress and a spiritual way to connect with the universe.

Diet is another area in which TCM can provide some practical guidelines. North Americans seem to fluctuate in their eating habits between overindulgence in food and starvation diets that neglect the principle of balance. Limiting the diet to a few fruits and vegetables may be as harmful as a steady diet of hamburgers. In TCM it is believed that illness can be avoided by eating a varied diet as much as possible. For example, a cold or hot imbalance is avoided by eating a minimum of seven different fruits and vegetables each day.

For mild, temporary illnesses one might use a number of diet remedies. The cold type of the common cold and flu previously described as characterized by low-grade fever, no sweating, headache, muscle aches, stuffy nose, and a cough with clear white phlegm is treated with warming foods such as garlic, ginger, chives, pepper, pumpkin, apple, onion, and lamb. The hot type of the common cold and flu with its symptoms of high fever, sweating, headache, dry or sore throat, thirst, nasal congestion, and sticky or yellow mucus responds to cooling foods such as watermelon, eggplant, banana, plums, tomato, and tofu. The cold type of low back pain that is characterized by coldness and severe pain in the lower back that gradually worsens over time, is not relieved by lying down, and is aggravated by rainy days is treated with hot foods including garlic, chicken, apple, yam, celery, onion, peach, and mustard greens. The hot type of back pain that includes symptoms such as soreness of the lower back that is relieved by lying down, weakness of the legs, and frequent relapses is treated with cooling foods such as peanuts, sesame, soybeans, beef, pineapple, and grapes.

Like many other forms of alternative therapies, TCM regards breath as an important function of life. Restrictions in breathing lead to dysfunction and disease. Forming healthy breathing habits can counter stress and help balance body, mind, emotions, and spirit.

Considering the Evidence

H. Cao, J. Liu, and G. T. Lewith, 2010, Traditional Chinese Medicine for treatment of fibromyalgia: A systematic review of randomized controlled trials, *Journal of Alternative and Complementary Medicine*, 16: 397–409.

What Was the Type of Research?

A systematic review of randomized controlled trials (RCTs).

What Was the Purpose of the Research?

To synthesize, appraise, and evaluate relevant randomized controlled trials concerning the beneficial and harmful effects in the use of Traditional Chinese Medicine in persons living with fibromyalgia.

(continued)

How Was the Study Done?

The authors used a systematic review methodology to examine published and unpublished randomized controlled trials relevant to the purpose of this research. They utilized a comprehensive search strategy using selected keywords and six English and Chinese electronic databases to identify randomized controlled trials focusing on Traditional Chinese Medicine and persons living with fibromyalgia. Two authors independently identified studies, extracted data, and assessed the quality of the studies. Initially, 883 citations were identified and narrowed to 35 studies for retrieval and review. Ultimately, 25 RCTs were included in this review, with a total of 1,516 participants in the selected studies.

What Were the Findings of the Research?

Traditional Chinese Medicine may be effective for treating fibromyalgia. Some side effects were reported in 11 of the randomized controlled trials, but no serious adverse effects related to TCM were identified. Acupuncture, and acupuncture combined with cupping and conventional medication were significantly more effective for reducing pain and the number of tender points in persons living with fibromyalgia than implementing only conventional medication as the treatment plan.

What Additional Questions Might I Have?

What would be the effect of Traditional Chinese Medicine used in combination with other complementary and alternative therapies? Could TCM have an effect on the quality of life of persons living with other health challenges? Are additional studies on TCM of good methodological quality currently being conducted to strengthen the evidence?

How Can I Use This Study?

This study has considerable clinical value for nurses caring for persons living with fibromyalgia. Nurses should recognize that Traditional Chinese Medicine may be an appropriate intervention for enhancing the quality of life for those individuals diagnosed with fibromyalgia, but they should be aware that additional research on the effectiveness of TCM is needed to strengthen the evidence.

Source: Contributed by Dolores M. Huffman, RN, PhD.

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