

Clinical Report 3

Treatment of Insomnia based on Benshou-ronchi (Holistic Diagnosis for Disease Pattern Identification)

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The medicine of China in the Age of the Ming Dynasty, the medicine of Japan in the early Edo Era (which is later called the “Goseiha School” – School of Later Development in Medicine), and the medicine of Dongui bogam (The Precious Mirror of Oriental Medicine) of Korea in the Age of the Lee Dynasty evolved in the same period and are nearly of the same nature. Mutually understanding the developments made in the later days of each country based on these ancient medicines as a standard will facilitate the cultural exchanges between three countries with the least discomfort. Dosan Manase, the author of “Keitekishu”, which is a clinical reference book for the medicine of the Goseiha School, called this book “Sasshou-benchi”, which is the same diagnostic treatment system as the one for “Benshou-ronchi (to give treatment [ronchi] based on holistic diagnosis to identify pathogenic pattern)” in the Modern Chinese Medicine. Learning the medicine of the Goseiha School will help practitioners acquire tips how to direct treatments.

This paper presents two cases of insomnia for which treatment was conducted on the basis of the Benshou-ronchi with the use of prescriptions that are popular in Japan.

Case 1: 46 years old, female, company employee

Chief complaint: Difficulty sleeping and fatigability

History of Present illness: Two months ago in the middle of December, the patient caught a cold, feeling lassitude with cough and phlegm production. Having a low-graded body temperature, the patient forced herself to go to work (accounting). Although a low-graded fever dissipated after a week and the cough and phlegm subsided after a while, the tiredness lingered. When

returning home from work, she felt exhausted and was barely able to manage the domestic cares with help of her first daughter. With persistent tiredness, she does not feel her spirit emerge. The patient had difficulty falling asleep even when going to bed, feeling tired. The patient also complained of being unable to feel slept well, hard to get up in the morning and not being confident in her physical strength so that the patient covered insufficient physical strength by mental toughness, a weak stomach and of loss of appetite in recent days.

Worries in daily life: The patient felt helpless as her husband was transferred not accompanied by family and had a worry about her first son’s finding employment.

She had handled various types of office work but recently she got to become anxious by small things and felt palpitations. She lied awake and had difficulty sleeping in peace due to brooding over her physical condition, office work, and family affairs.

Findings of tongue and pulse: Pulse was deep, thready, and weak, and the tongue body was pale with a white and white coating.

Case analysis

Insomnia, one of the chief complaints, is considered to be caused by disordered functions of the liver and the heart, which house the spirit that is substances to control the activities of spiritual (inner) consciousness. Therefore, consideration was given to look for the cause of disease and pathogenic mechanisms of how the heart functions became disturbed. In the process, consideration was also given to find out any association with disturbed functions, if any, of other visceral and bowel organs.

First the nature of the disease was determined by the Eight Principle Pattern Identification whether it fits into interior or exterior, deficiency or excess, and cold or heat. Although the disease originally developed from an external contraction, exterior symptoms were not already apparent and had progressed to interior syndrome. Pulse was deep, thready and weak which indicated evil had gone away. The symptoms and signs did not show the characteristics of excessive yin-qi but showed deficiency syndrome. Although the pathological pattern was not

clear whether it was cold or heat, heat-syndrome symptoms and signs were at least not observed. Hence, it could be said that the nature of the disease was interior deficiency without heat-syndrome.

Next, in observing the dynamics of healthy-qi and evil-qi, it could be determined from the foregoing findings that the condition was deficiency of healthy-qi, having evil-qi receded. So, the treatment was to be made mainly by supplementing tonics.

Then, what deficiencies were occurring in what organs or parts of the body – i.e., identification of the diseased location? Many mental symptoms were manifested, such as difficulty falling asleep, feelings of anxiety, strain of worries, and palpitations. Moreover, spleen symptoms were observed, such as the physical constitution of weak stomach and intestines and shortage of physical strength, and loss of appetite. From these, the disease locations were the heart and the spleen. Then what were deficient? It could be judged from the history of disease that exhaustion after having a cold and mental stresses including anxieties over her family and personal matter, and her physical condition induced deficiencies. When qi-deficient syndrome such as lassitude, do not feel like doing anything, and weak pulsation; and the findings of the unstable spirit such as having trouble getting to sleep and do not feel slept soundly were all taken into account, together with the state of thready pulse, it was hypothesized that the spirit was unable to be nourished and sustained with insufficient heart blood.

Weak pulse appears when yang-qi is deficient. However, a cold sensation in the patient was not marked. The patient was constitutionally short of the spleen qi, which was presumably further exhausted. Although the pulse usually becomes thready when either blood or yin-qi is deficient, an imbalance between yin and yang, like deficiency syndrome with heat, was not observed in the patient. Thus, it was concluded that deficient was blood-qi.

When the locations of disease were taken into account together with the above consideration, it was judged that both spleen qi and heart blood were deficient. The Benshou diagnosis concluded from the analysis of the

nature of disease, the dynamics (momentum) of deficiency and excess, and the locations of disease in the patient that the patient had the deficiency in the heart blood plus deficiency in spleen qi, i.e., deficiency syndromes in both the heart and the spleen.

Treatment

Treatment was to be carried according to the conclusion of the Benshou to increase the heart blood and spleen qi, i.e., supplementation of blood to nourish the heart and increase spleen qi making the spleen healthy. *kihito* might be the prescription best suited for the treatment of the above conditions. Since the symptoms surfaced were insomnia and anxieties that were associated with the heart (mind), *kihito* was formulated with adjustments according to each symptom with the focus on nourishing the heart (mind) of the patient.

Ginseng 6, Astragalus root 9, Atractylodes Vvatae Rhizoma 6, Rhizoma 9, Japanese Angelica Root 6, White Peony Root 6, Longan Aril (fruit) 6, Roasted Zizyphus Seed 12, Thinleaf Milkwort Root 6, Salvia Miltiorrhiza Bge 9, Jujube (Chinese Date) 6, Dried Ginger 3, Honey-roasted Licorice Root 3. (unit: gram)

As the patient was in the exhausted state of the heart spirit and blood qi, the author comforted her by saying not to worry too much about her physical condition and try to think positively about family matters. The author also gave psychological guidance to ease the sense of anxiety.

Course

After a week of the administration, the patient began to have the stomach and intestines in good conditions and also to have an appetite. Difficulty falling asleep was improved slightly. However, as she still dreamed a lot, she could not feel that she slept soundly. After two weeks, she was able to sleep soundly on some days and easily get out of bed. She became able to handle her work at the office as previously. Her expression became lively. After four weeks, her sleep became stable and an appetite and stamina were back. She had a healthy color. Her pulse

became vibrant. *Back to the Spleen Decoction* was replaced with the Extract of *kihito* and after the continuous administration for a while, she felt completely well and the treatment was discontinued.

Case 2: 28 years old, female, company employee

History of Present illness: With some kind of trouble that started about six months ago, the patient was unable to sleep soundly, having a hard time falling asleep. During the month, the patient woke up in two hours after falling asleep and was unable to sleep again. The chest felt tight with palpitations. With stiff shoulders, a swollen discomfort was felt in the regions of the temples toward the internal regions of the ears. A headache occurred sometimes. The patient easily got irritated and angry. Although having no appetite, she was able to eat when she tried to eat. Further complaints were slight constipation, dry mouth, and frequent urination.

Findings of tongue and pulse: Pulse was wiry, and the tongue was red with a greasy whitish yellow coating.

Case analysis

The analysis based on the Eight Principles indicated there were no findings of deficiencies unlike Case 1. From the wiry pulse and the greasy tongue coating, excess was dominant. In terms of cold or heat, the red tongue body and a yellow tongue coating were the indication of heat predilection. In short, the state could be judged as excess interior heat. In regard to the dynamics of yin-qi and yang-qi, healthy-qi was exuberant and evil-qi was excess.

Then consideration was given to the locations of disease: Although the chief complaint was insomnia, which is a symptom of the heart, the liver functions responsible for regulating and maintaining the smooth flow of qi were markedly disturbed from such symptoms as being irritable, easily get angered and sighing a lot. The excess evil-qi in the liver channel was observed from the symptoms of stiff shoulders and feeling of swollen in the temporal regions. Thus, it was judged that the liver was the main location of the disease, rather than the heart.

Then, what evil did disturb the liver functions for the

smooth flow of qi? From fire • heat of the tongue findings, wiry pulse, irritation, anger, sighing, and feeling of swollen in the temporal regions, it might be reasonable to think qi was stuck.

Putting the results of the above analysis together led to the Benshou diagnostic conclusion that the disease pattern was identified as liver qi stagnation and up-flaming of liver fire. Hyperactivity of liver fire provoked heart fire, inducing insomnia, tightness in the chest and palpitations. In the inquiry during the clinical examination at a later time it was revealed that she was worrying about a lost love. Anger and lingering affection seemed to have caused liver qi stagnation and liver fire.

Treatment

The treatment for the identified disease pattern was to be performed by means of soothing the liver to relieve constraint for resolving depression and clearing the liver by draining fire. As the heart (mind) syndrome had been manifested, medications for dispelling heat evil to calm the heart were supplemented. The prescription was based on *ryutanshakanto*.

Gentian Root 3 Scutellaria Root 6, Cape Jasmine Fruit 6, Dried Rehmannia Root 9, White Peony Root 9, Bupleurum Root 6, Arisma Rhizoma 9, Roasted Zizyphus Seed 9, Uncaria Hook 6, Pearl Layer 12, Fresh Licorice Root 3. (unit: gram)

Course

After a week of the administration, headaches and feeling of swollen in the head were alleviated. Frequent urination was improved and the tongue coating also improved to yellow and thin.

After three weeks, continuous five hours sleep could be achieved and irritability disappeared. Appetite was back. The tongue body was slightly red with a white and thin coating. The pulse was moderate. The medication to sooth the liver was reduced and heart-nourishing tranquillizer was added. That is, Scutellaria Root was excluded and Japanese Angelica Root 6g and Ginseng 6g were added.

After five weeks, sleep was greatly improved and her

mood became stable. She spoke about the lost love and other matters with a touch of self-mocking. The tongue coating was white and thin. The treatment was directed to sooth the liver for resolving depression and to clear the liver by draining fire. So, the prescription was changed to *kamishoyosan plus Wild Jujube seed Decoction*. The treatment was discontinued after the continuous administration for a while.

Comparison between Case 1 and Case 2

The chief complaint of the two cases was insomnia. The causes of disease and disease mechanisms differed in the two cases: Case 1 had deficiency syndrome caused by exhaustion of blood qi induced by after-illness, worries, and anxieties, whereas Case 2 had excess syndrome caused by qi depression and liver fire provoked by the feeling of anger about a lost love.

In regard to the location of disease, two cases differed: The heart and the spleen were involved in Case 1, whilst the liver was mainly involved with the heart in Case 2. It is important to find out accompanying signs and symptoms of the chief complaint.

Pulse findings and tongue findings were consistent with the nature of disease and the dynamics of excess and deficiency in both Case 1 and Case 2. In such case, a conclusion can be drawn with confidence.

Once analyses have been made in the above procedures and disease patterns have been identified, treatment appropriate for the identified pattern may be carried out. In case the original Benshou (disease pattern identification) has hit the target with effects, the disease developments should be followed to judge the nature and momentum (dynamics) of disease and to establish an appropriate treatment over time. This is the shortest way to healing. The author recognizes that the treatment based on Benshou is the method to practice the orthodox treatment with Traditional Ancient Chinese Medicine.