Some Nameless 75 Year Old Woman
Chronic/deficient, Lung

A 75 year old woman has been suffering from a persistent cough for 6 years. The cough was productive with scanty sticky yellow sputum and she experienced a sensation of oppression of the chest. Her health was otherwise very good: she was a keen practitioner and teacher of Yoga. Her body was thin and her skin was dry. Her pulse was thin and slightly slippery on the lung position. Her tongue was red, dry without coating in the front part.

1. In this case, her “thin” pulse and tongue indicate:
   a. Invasion of external pathogenic wind
      no. no wind signs, no floating pulse
   b. Invasion of external pathogenic damp
      again, no superficial pulse, not enough damp signs
   c. **A sign of lung yin deficiency**
      yes. Lung xu in long term cough, oppression of chest. Lung yin xu in lack of coating in front of tongue as well as in the thin Lung position in the pulse
   d. Wind-phlegm retention
      no wind signs, not a ton of phlegm signs though there are some.

2. The differential diagnosis is
   a. Lung and spleen Qi xu with phlegm retention
      No spleen Qi xu signs, though there is lung xu and phlegm retention. Note that there is no lung qi deficiency signs though – no shortness of breath or fatigue.
   b. **Lung Yin xu, heat phlegm retention**
      You can see the Lung Yin xu in the pulse and in the tongue. You can also see how deficient heat is cooking the fluids in the Lung causing scanty sticky phlegm. By the long term cough you know it’s a deficiency of the lung.
   c. Zong Qi xu with Lung Qi and Yin xu
      not enough fatigue signs for Qi deficiency.
   d. Rebelling of lung Qi with body fluid retention
      There would be fluid retention signs, but in this case there’s actually some evidence that the body fluids are so burned up they are damaged – dry tongue coating, scanty-sticky phlegm. Also, rebelling Lung Qi would have a harsher cough and would be more excess.

3. Which group of points is for this case?
   a. **LU 9, BL 43, LU 5, BL 13, RN 17, LI 11, ST 40**
      LU 9 for tonifying LU yin. BL 43 for long term LU yin xu with cough, LU 5 to help LU qi flow correctly, BL 13 = bk shu of LU, Ren 17 soothes chest and helps Qi flow. LI 11 to clr xu heat, ST 40 to clr phlegm.
   b. **LU 7, LU 9, RN 17, ST 36, RN 4, RN 6**
      Ren 4 and 6 give this one away…you might use this combo for asthma to assist KI function not grasping breath.
   c. **DU 14, BL 12, GB 20, BL 15**
      This combo is more for wind invasion and BL 15 is the heart back shu.
   d. **SP 6, SP 10, RN 12, BL 20, BL 23**
      Not even close!
Li, a 35yo female has not menstruated for 50 days. She also felt faint and tired, was sick and had no appetite. Over the past 2 weeks she frequently vomited coffee-like liquids and was unable to eat or “unable to eat or drink” implicates SP/ST. Ah, hence no period. Biomedicine tests showed no pathology. But she was found to be preggers. Treatment with fluid infusion and anti-emetics was unsuccessful and she was referred for acupuncture and moxibustion.

She was emaciated and sleepy. Her eyes were deeply sunken. Her tongue was pale w/a thin white greasy coat. Her pulse was slow, weak and slippery.

She’s got morning sickness. Specifically, her morning sickness is caused by Spleen and Stomach Qi Xu with damp retention and cold.

Don’t let the “coffee-like liquids” throw you off. You learn this in Physical Assessment as the vomit looking like it has coffee grounds in it. I think this wording is just Dr. Luo speak.

Points to use: basic points for morning sickness, plus treatment for Spleen/Stomach Qi Xu and some for damp retention.
Zhang, 45 y.o., male

This is subtle Dr. Luo speak for emotional

Zhang, a 45 year old male, has been healthy and strong until October 1, 2000, when after a meeting he became nauseated and began to vomit continuously. He was so weak that he had to be carried home, and from that time on vomited whenever he ate. Various investigations including EEG, spinal puncture barium meal X-ray and esophagoscopy were normal, so he was given a diagnosis of neurogenic dysphagia. The vomiting continued and he was fed nasally with glucose drips. After 50 days he was very distraught and came to find help from acupuncture. He was restless, thin, yellow, and exhausted. His tongue has a red body with a white dry coating that is cracked. (You might remember him as the one toothed dude in the powerpoint slides in class.) His pulse is thin and slightly wiry.

What’s wrong with this dude? He’s got Nausea and Vomiting with a differential diagnosis is Liver and Stomach Disharmony.

And yes, per Dr. Luo, his yellow cast is jaundice, which can be yang from damp/heat or yin from damp/cold. Because Dude has so many heat signs, his is a Yang Jaundice. Use Du 9 for this. Other than that, use basic points for Nausea and Vomiting and then specific points for his liver/stomach disharmony. ST 36, RN 12, PC 6, SP 6, 4 gates, GB 41, LV 13?, LV 2, UB 18/20/21.

LV Qi stagnation has led to the heat, overacted on ST and caused the stomach Qi to rebel as a result.
Li, 62 y.o., male

One of 4 great heats  ST fire  Qi xu

Since 15th September 1986 the patient had unquenchable thirst, hunger and general weakness. He was diagnosed with diabetes in a hospital. Blood sugar on empty stomach was 148mg/dl, urinary glucose ++++. He was prescribed oral Glyburide and his condition improved in a month. Urinary glucose was reduced to ++. He was given medication to reduce his hunger and thirst from Feb 1987, but these persisted and he still felt weak. At this point he came for acupuncture and moxa. His tongue is thin and heat damaged bfs? heat yin xu/dryness xu xu heat red with a dry, yellowish brown cracked coating. His pulse is weak, thin and fast.

Upper and middle Jiao diabetes. Both of these can be chronic. Know that just because it’s chronic doesn’t mean it’s lower. You must have the lower signs of urination issues and emaciation before you can classify it as Kidney Yin Xu and Empty Heat type lower jiao diabetes.

This is upper jiao diabetes and middle jiao diabetes. Unquenchable thirst is indicated in the initial upper jiao stage while the extreme hunger indicates the middle stage. In the study guide, upper jiao diabetes is defined as Excessive heat in the Lung with Lung yin xu. Middle Jiao diabetes is Excessive Stomach heat with Stomach yin xu.

Treatment principle: Clear heat and nourish the Yin of Lung and Stomach.
Points to use: weiguan xia shu, LU 5, LI 11, ST 44.
Zhang, 56 y.o., male

Qi or blood xu  cold signs/spleen  spleen related phenomena

He began to feel **chronically tired** and **overly sensitive to cold** 5 years ago. **Muscle and joint aches** often developed. **Modest weight gain** was common even though **appetite diminished**. One year ago edema developed causing a **round puffy face with a sleepy appearance**. He also began to have **hair loss**. He had a **poor memory and concentration** during the past 1 and ½ years. He has a **poor appetite**, **palpitations** and **sleepy appearance**. His tongue is **pale and swollen** with a **white thick greasy coating**. His pulse is **soggy and weak**.

This guy should go to the doc and have his thyroid tested because he’s gonna test hypothyroid. This is Spleen Qi deficiency and some Heart blood deficiency with damp retention. If you look at the study guide this is a combination of **SP Qi Xu w/ Heart Xue Xu + Sp qi xu w/retention of dampness**.

There is also a generalized Qi xu for Zhang. Use the basic points: Ren 4, Ren 6, Ren 12, ST 36, Du 4 and KI 8. Kidney 8 is a biggie. This is an important point for the endocrine system.

Local points for the thyroid are Ren 22/23, ST 9, and LI 18. Use Lu 7 and Ki 6 to open the throat. You can use moxa on the Kidney channel for this dude’s edema too.

Other points to use for the differential diagnoses are Ren 14, UB 15/17/20, SP 6 and P6. Add in SP 9 and ST 40 to resolve phlegm and damp, SJ 5 and UB 21.