This quiz covers:
- Class 4: Epilepsy
- Class 5: Headaches and Migraines
- Class 6: Shingles (Herpes zoster) and Trigeminal Neuralgia
- Class 7: CVA/Wind Stroke

The test (at least this term and probably other too) is 40 multiple choice questions. Know all of the practice cases well from class 4 through class 7. No fill in the blanks on this quiz, but there will be on the final. As usual, you need to know:
- TCM etiologies and mechanisms
- Basic points
- Any extra information emphasized in the notes or slides
- Important symptoms for each disease
- Differential diagnoses for each disease studied and the basic points.

Next, my disclaimer: The wording is right from Dr. Luo’s case studies. I’m leaving it as is because that’s how you’ll see it on the tests! The stuff in blue above the case study verbage is mostly my take on what the symptoms and signs mean. Agree or disagree as you will. Unless otherwise noted, the answers to the case studies, however, are from Dr. Luo. I think there were one or two he told us to go over on our own.

**Class 4: Epilepsy**

**What is epilepsy?**

Seizure disorder – transient disturbance of cerebral funx due to abnormal paroxysmal neuronal discharge in brain. (Wei Qi disorder)
- Partial or focal – abnormal discharge starts at one point, symptoms vary depending on where the discharge begins. Abnormal sensations, movements of extremities.
- Generalized – discharge involves the whole brain at once. Can express as
  - Grand mal seizures: ha, dizziness, vertigo, chest tightness, LOC for few seconds/minutes, clenched teeth/jaw/fist, tetany, convulsions, upward staring eyes, screaming like a pig
  - Petit mal seizure – only 20-30 seconds, eye twitch, staring for short periods of time.

Describe both the **tonic and clonic stages** of a grand mal seizure.

- **Tonic stage**
  - This is the pre-seizure state right before the clonic stage
    - Headache
    - Dizziness
    - Vertigo
**Clonic stage**
- Sudden strong back contractions lasting just a few seconds or so
- Fall down/ LOC
- Teeth/jaw/fists clenched, tetany, convulsions
- Upward staring eyes
- Screaming like a pig/sheep
- Possible foaming at the mouth

**TCM etiology for epilepsy?**
1. Emotional disorder (liver qi yu to heat rising
2. Irregular diet
3. Overworking

**Mechanism for epilepsy.**

*Rebellious Wei Qi with retention of Phlegm and Inner Wind*

- Upward staring eyes = rebellious Wei Qi
- Foaming mouth, chest stuffiness = phlegm retention
- Tetany = inner wind

*Dr. Luo promised the highlighted stuff above as a fill in the blank question.*

**What are the early signs of an impending epileptic seizure?**

- Headaches and dizziness (qi and yang rising)
- Chest tightness (phlegm retention)
- Greenish tinge between eyebrows
- Pulse = wiry, superficial and floating

**Basic points to use prior to a seizure as a means of prevention when pt first has signs such as headache, dizziness, vertigo, chest tightness.**

- **SI 3 + GB 34** to release congested energy
- Ren 17
- PC 6
- PC 5

**What points do you use during a seizure?**

- **Du 26 and 16**
- **GB 29**
- **PC 4-6**
- **ST 40**
- **GB 34**
- **Yao qi – 2 cun above coccyx bone on Du channel**
What are the basic points you use for epilepsy?

Bl 62 – Tonify for daytime seizures. Reduce for night time seizures.
Kid 6 – Tonify for night time seizures. Reduce for daytime seizures
P 4, 6
GB 34
SI 3
Yao qi

Rattle off the stages for seizures and the differentiations that go with them if you would.

☯ Early sign stage (ha, dizziness, chest tightness, wiry superficial pulse) – pre-seizure
  o Liver fire with phlegm heat
  o Liver/Kidney Yin xu
  o Blood yu
☯ Seizure stage
  o Uncontrolled Yang seizures – excess type tonic clonic seizures
  o Uncontrolled Yin seizures – deficient type petit mal seizures or partial seizures
☯ Post seizure stage
  o Spleen xu with phlegm

No case study given
What does cephalgia mean?

Headache, abbreviated HA for ease of typing and medical convention.

What is a headache (biomedical definition)?

Pain in the head caused by dilation of cerebral arteries, muscular contractions, or as a reaction to drugs.

What are the types, locations and etiologies for the following types of headaches?

| Taiyang     | Occipital area | ☯ Wind  
|            |               | ☯ Wind-Cold  
|            |               | ☯ Stress  
| Shaoyang   | Temple region | ☯ Damp heat in the GB  
|            |               | ☯ Liver Yang  
| Yangming   | Forehead      | ☯ Yangming disease such as invasion of external pathogens  
|            |               | ☯ Irregular diet including coffee and alcohol  
| Jueyin     | Vertex        | ☯ Liver Blood Xu  
|            |               | ☯ Cold in the Liver channel  

What are the 5 etiologies of headaches in TCM?

1. Invasion of external pathogens  
   a. Wind  
   b. Cold/heat  
   c. Dry/damp  
2. Emotional disorders  
3. Irregular diet  
4. Overworking  
5. Trauma

What is the TCM mechanism for headaches?

Blockage of the channels in the head – with disorder of excess (shi) in the upper body and deficiency (xu) in the lower body.
What are the basic points to use for headaches?

<table>
<thead>
<tr>
<th>Type of Headache</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Taiyang Headaches</td>
<td>GB 20, UB 10, SI 3</td>
</tr>
<tr>
<td>Shaoyang Headaches</td>
<td>Taiyang and SJ 3</td>
</tr>
<tr>
<td>Yangming Headaches</td>
<td>Yintang extra point</td>
</tr>
<tr>
<td>Jueyin Headaches</td>
<td>Du 20, LU 7, LI 4</td>
</tr>
</tbody>
</table>

What are the differentiations for headaches?

- ☯ Wind-cold invasion headache
  - External excess.
  - Taiyang type affecting the occiput and below – stiff/tight neck/shoulders

- ☯ Wind-heat invasion headache
  - External excess.
  - Yangming type affecting forehead and below

- ☯ Wind-damp invasion headache
  - External excess.
  - Shaoyang type or whole-head.

- ☯ Liver Yang Rising/Flaring of Liver Fire
  - Internal excess.
  - Jueyin or Shaoyang type headaches.

- ☯ Retention of turbid phlegm and inner wind
  - Internal excess.
  - Usually temporal/shaoyang

- ☯ Retention of Blood Stasis
  - Internal excess
  - Acute or chronic type, can be anywhere on the head.

- ☯ Blood Deficiency Headache
  - Internal deficiency
  - Jueyin or internal type headache

- ☯ Kidney Yin or Essence Xu
  - Internal deficiency
  - Jue yin type headache at Du 15/16
What are the symptoms for Liver Yang Rising/Liver Fire Flaring Up related headaches?

- Acute onset, emotionally related and/or history of hypertension
- Throbbing headache + irritable, anger, restless behavior
  - Worse in reclined position
- Hypochondriac pain
- Bitter taste in the mouth, red eyes/face
- Insomnia
- Dark urine, constipation
- Vertex or temporal headache, irritability and/or dizziness
- Tinnitus – thundering in the ears
- Thirsty with a desire for cold drinks
- Tongue: red, redder sides or tip, maybe dry coat
- Pulse:
  - Liver fire/heat = wiry fast
  - Liver yang rising = wiry slippery

What are the symptomatic differences between Liver Yang Rising and Liver Fire Flaring up?

Liver Yang Rising
- This one doesn’t look as severe, but is actually more serious than Liver fire.
  - Acute onset
  - Hypertension history
  - Tinnitus
  - Red face
  - Dizziness/vertigo
  - Throbbing headache, worse when reclining/lying down
  - Restlessness, irritability, anger, insomnia
  - Tongue = red/scarlet with yellow coating
  - Pulse = wiry/slippery, but not necessarily fast

Liver Fire
- Looks worse with all of the fire signs, but isn’t as serious as Liver Yang Rising.
  - Acute onset, clearly related to emotional disorder
  - Dizziness/vertigo
  - Red face and eyes
  - Thirsty with desire for cold drinks, bitter taste in the mouth
  - Constipation, dry stools; scanty and dark yellow urine
  - Tongue: red, res spots on tip or sides, yellow coating
  - Pulse: wiry and fast

What are the symptoms of Kidney deficiency causing headaches?

- Chronic onset, dull headache and/or on/off
- Hard to pinpoint location of this headache
- Worse with overworking and better with rest
- Dizziness/vertigo
- Tinnitus/deafness
Lower back and knee weakness
Black color around the eyelids
Yin xu symptoms
Tongue: red (yin) or small (essence) with cracks, peeled or less coating
Pulse: thin, weak and weakest in both 3rd positions

What is the difference between a headache and a migraine?
Though a migraine could be a two-sided headache, for more commonly they are one-sided. Two-sided headaches would be a sub-category of headaches. Migraines are associated with more **throb**bing pain, sensitivity to light, **cyclical** patterns and are far longer in duration than headaches. A migraine might last as little as **4 hours** or **as long as 72** and is often vascular. Migraines also often have digestive problems and visual disturbances up to and during the migraine.

Photophobia (light sensitive), phonophobia (sound sensitive), osmophobia (smell sensitive).

What are the 4 etiologies for migraines?
1. Invasion of external pathogens
   - wind, heat, cold – light, sound, odor
2. Irregular diet
3. Emotional disorder
4. Overworking

What is the TCM mechanism for migraines?

Hyperactivity of the 5 sense organs with Excess and Deficient disharmony between the upper and lower parts of the body.

*Compare this to the mechanism for headaches: Blockage of the channels in the head with disorder of excess (shi) in the upper body and deficiency (xu) in the lower body. ...very similar*

What are the basic points for migraines?
GB 4, 5, 8
GB 14
GB 20*
GB 41 + SJ 5
DU 20
Yintang
Taiyang

What are the differentiations associated with migraines?
- Rising Liver Yang/Liver Fire
  Can be due to excess or Liver Yin xu causing Liver yang to rise. Males more than females.
Females before their periods

☯ Disharmony between LV and MJ with rebellious Stomach Qi Excess. Males and females. Females, before their periods

☯ Heart and Liver Blood Xu
Mostly in females, often at the end of menses.

☯ Liver and Kidney Xu
Esp in females during menopause

Zhao, 14 y.o. male student (HA)

Deficiency sign? Xu
He had felt faint occasionally for 3 months. Seven days previously this boy suddenly became pale and faint with a low grade fever. He was nauseated and vomited. The illness lasted 3 days but after treatment at his local clinic, which included fluid infusion, the fever receded and the vomiting stopped. He then started to get obvious headache in his forehead at 8 a.m. each morning. During an attack, which would last for about 30 minutes, he would turn pale and sweat all over. Afterwards he would feel slightly faint. The boy usually had nausea after meal, fatigue, and difficulty in concentration during class.

Upon examination, the boy was found to be well developed both mentally and physically. General tests were normal except his nails were pale at night. Heart and lungs negative, neck movement normal. No relevant family history.

Xu damp ret
Tongue: pale, swollen, teethmarks with thick coating
Xu damp/ph xu
Pulse: thin, soggy, weak

Dr. Luo pegged this pattern as Stomach Qi Deficiency with Heart and Liver Blood Deficiencies with Damp Retention. The TCM diagnosis for a case like this would be “headache.” The stomach Qi is rebelling (nausea and vomiting) and the Yangming channel is indicated by the headache. I can see the heart blood problems in the difficulty concentrating and the liver blood in the nails being pale at night. However, this doesn’t seem like enough information to me. I’d want more. Seems like there’s more going on here, perhaps a something else that is causing stomach qi problems.
But maybe that’s just me.

Zhang, a 33 year old female

Chief complaint: headache for 2 years.

Her headaches were frequent and intense and occurred over the right eye with slightly tremor of the eyelids. They were throbbing in character and aggravated by lying down. They were accompanied by nausea. Her periods were regular and normal, but she experienced pre-menstrual tension manifesting with irritability, mood swings and weeping. In the past, she had suffered from severe depression, breast distention and hypochondriac pain.

Liver heat Heart? LV/GB

Her pulse was wiry and her tongue was red with red spots in front and sides of the tongue.

1. The patient has the following liver problems at the time she came to the clinic and in the past, except:
   a. Liver fire/yang rising
   b. Liver Qi stagnation
   c. Liver/inner wind
   d. Liver yin deficiency
      No deficiency symptoms above…all are excessive symptoms.

2. Which of the following point groups would you use for this case?
   a. SP 10, BL 40, BL 17, PC 6, Ren 23, DU 4, BL 23, BL 52
   b. ST 40, GB 41, SJ 5, Ren 17, SP 9, ST 8, BL 28, Ren 9
      While you could use GB 41 and SJ 5 for headache, this is more of a damp-heat treatment than is appropriate for this patient…no damp signs.
   c. LI 3, LI 4, LI 11, LV 14, GB 34, HT 7, PC 8, SI 3, LI 20
      If there were more heart signs and heat signs as well as Liver signs, this might be appropriate...
   d. DU 20, SJ 5, PC 6, LV 3, SP 6, LV 2, GB 34, LU 7, GB 20, Taiyang extra point
      Du 20 is for wind. SJ 5 is one of the basic points. PC 6 for the nausea accompanying headaches. LV 3 and GB 34 for soothing the liver qi. SP 6 addresses all 3 leg yin channels – helps with menstruation/PMS, harmonizes the LJ, and calms spirit. LV 2 clears Liver heat. LU 7 is for wind affecting the head and headache. GB 20 expels the wind. Taiyang addresses the pain at the side of the head.
What are shingles and what causes them?

Shingles are caused by herpes zoster virus, same strain causing chicken pox. They are painful skin outbreaks anywhere along the path of the spinal nerves (dermatomal pattern associated with these nerves), but often around the trunk of the body. Are usually one-sided. Come in 4 stages and pain can occur in any stage.

What are the stages of shingles?

Pain can occur in any of the following stages.

1. Pre-eruption
   Approx day 1-4, often flu-like sx of chills, fever, headache, fatigue, and digestive sx.

2. Eruption
   Day 5 – 9. Clusters of vesicles containing serous fluid with erythema in bands following the spinal nerve dermatomes. Usually on the back, hypochon region, also often on the forehead and outer canthus. Can go anywhere the nerves go though. Usually unilateral.

3. Post-eruption

4. Post-eruption and skin clearing
   Following years/months. Some patients (about 15%) have pain only and no skin manifestation. This pain is called *post herpetic neuralgia*.

TCM etiologies of Herpes Zoster/Shingles

1. Invasion of external pathogens
   a. Wind
   b. Heat
   c. Summer heat

2. Retention of latent pathogens
   Heat plus damp – heat is yang and wants to escape, but latent retained damp holds it inside.
   a. Damp heat
   b. Toxic damp heat

3. Emotional disorder
   Liver heat + fire bringing the dampness to the superficial areas

4. Irregular diet
   Aggravating damp and heat
5. Aging
Yin, essence, blood xu’s plus KI and LV yin xu cause Yang to float moving the latency to the surface.

**TCM Mechanism for Herpes Zoster/Shingles**
Retention of latent pathogens stimulated by inducing factors or Yang pathogens which move the latency to the surface/superficial areas of the body.

**Basic points for Herpes Zoster/Shingles**
- ☯ GB 41 + SJ 5 – points for shaoyang and dai
- ☯ LI 11
- ☯ ST 40
- ☯ SP 10 – cool blood, remove damp, skin problems
- ☯ UB 40 – cool blood and remove toxic heat
- ☯ Hua Tuo jia ji points at same level as rash/blisters

**What is the differentiation associated with each stage of Herpes Zoster/Shingles?**
- ☯ First stage (pre-eruption) – Invasion of Wind-Fire in LV and GB
- ☯ Second stage (eruption) – Damp Heat or Toxic Heat in the Dai Mai or SP
- ☯ Third stage (post-eruption/skin clearing) – Qi and Blood Stagnation

**What are the hallmark sx for the 3rd stage, Qi and Blood Stagnation?**
- ☯ Sharp needling pain that is fixed in place and worse at night
- ☯ May have dark red/purple coloration to skin
- ☯ Scarlet (dark red/purple) tongue

**What is trigeminal neuralgia?**
A painful condition affecting the 3 branches of the trigeminal nerve. Thought to be a result of vascular compression of the nerve or demyelinization of the neural sheath. Pain is episodes of lacerating or electrical type pain lasting a few seconds to a few minutes. Patients may have 50-100 such episodes in a 24 hour period.

**What are the 3 branches of the trigeminal nerve? Which branch is most affected?**
1. Ophthalmic
2. Maxillary
3. Mandibular – most affected
What are the TCM etiologies?

1. External Yang pathogen (wind-heat plus phlegm)
2. Emotional disorder (LV fire or heat rising plus phlegm)
3. Irregular diet (causing damp, phlegm, heat/fire in ST)
4. Age

TCM mechanism

- Invasion of Yang pathogens with retention of phlegm
- Blockage of channels

What are the basic points and what are the points for each branch of the trigeminal nerve?

Note that many of the points below for the branches are local to the areas they affect. During acute stages of pain, you can needle the unaffected side rather than putting needles in the already agonized areas.

- **Basic points**
  - GB 20
  - SJ 17
  - LI 4 + LU 7
  - SJ 5 + GB 41
  - ST 40
  - Local points

- **Opthalmic/1st branch**
  - Yintang
  - GB 14
  - Taiyang
  - UB 2

- **Maxillary/2nd branch**
  - LI 20
  - ST 3
  - SI 18-19
  - SJ 21

- **Mandibular/3rd branch**
  - ST 4, 6, 7
What are the differentiations for Trigeminal Neuralgia?

- Invasion of wind heat with phlegm retention/blockage
- Liver fire flaring with phlegm retention
- Qi and blood stagnation with phlegm retention

Li, 50 year old male

Chief complaint: Pain on the side of his trunk for 3 weeks.

He had been suffering from herpes zoster for about 3 weeks. He complained of severe sharp but hot pain on one side of the hypochondriac region at the level of L2-L5 and the pain was burning sometimes and got worse at night. He even could not sleep at night due to the pain. At the beginning he got vesicle eruptions with blisters and gradually the blisters were broken and the pain got worse. Now he got very dry skin with dark purple scars with hot sensation under the skin. He was very thirsty with desire for cold drinks. He had bitter taste in mouth. He felt very tired and lost 8 pounds in 3 weeks. He was irritable with itching feeling around the external genitals. He was indulgence in alcohol for many years. His tongue was scarlet in color with a very rough, dry and brown coating. His pulse was wiry, thin and fast, thinner on the left.

1. All the symptoms show you that he had blood stasis, except:
   a. Itching around the external genitals
      This is a damp heat sign
   b. Scarlet tongue body
      Dr. Luo says this is stasis...which we’ve always been taught is purple. Scarlet should be intense heat, shouldn’t it?
   c. Pain being severe at night
   d. Dry skin with dark purple scars

2. All the following symptoms show you that he had damp heat in the Liver and Gallbladder channels except:
   a. Sharp and hot pain on the one side of hypochondriac region
   b. Irritable with itching feeling around external genitals
   c. Very dry skin with dark purple scars
      This is a blood stasis sign
d. Bitter taste in the mouth.

3. Which group of points is appropriate for this case:
   a. Jiaji points at the level of L2-5 with DU 17, BL 23, KI 3, SP 6
   b. **Jiaji points at the level of L2-5 with LV 2, GB 41, SP 6, BL 40, SP 10**
      LV 2 and GB 41 are the most important points here…LV 2 eliminates LV heat, GB 41
      interfaces with the Dai vessel which wraps around the trunk much as the shingles do. GB
      41 also treats pain in the costal/hypochondriac areas. SP 6 helps with dampness. BL 40
      for heat. SP 10 for stasis of blood.
   c. Jiaji points at the level of L2-5 with SJ 5, LI 11, ST 44, LI 4, ST 36
   d. Jiaji points at the level of L2-5 with RN 17, RN 6, ST 25, SP 15, LI 11

Li, 71 year old female.
Either Liver or Phlegm fire rising-chronic Liver
She has had hypertension for 10 years. After a period of worry and anger in March 2000 she suddenly
heat started to have severe paroxysmal burning pains in the right side of her face. The pain was worse when
Liver involvement blockage dampness
she was feeling emotional. The attacks would start with a sudden feeling of soreness, heaviness, and
heat burning in her right eye. The pain would then spread to the right temple and upper gums. The right side
wind heat
of her mouth would become stiff, with severe burning pain. The duration of each attack varied from a
few seconds to a few minutes and would be most severe at mealtimes or just before bed. She also had a
heat – liver stomach heat wind LV/heat heat
bitter taste in her mouth and very bad breath. She felt dizzy, irritable and thirsty, with a preference for heat
Spleen involved - xu
cold drinks. But after drinking she would need to urinate frequently or develop diarrhea. She sweated
Yin xu Kidney xu Liver blood xu
occasionally at night and also had lower back pain usually. Her vision was occasionally blurred.

Examination: She was thin and lost weight during the past 3 months with red cheeks and a tendency to LV Qi yu
sigh a lot. She has no relevant family history.

   Xu yin xu yin xu – zygomatic area
Heart? heat damage body fluids heat in liver/ gb areas
Tongue: pointed tip, dry yellow coating. Red color to body of tongue on sides.
Damp/ph heat Liver area - yu
Pulse is slippery and rapid on both left and right. . On the left the guan position (2<sup>nd</sup>) is wiry. Both
Interior – KI xu
right and left the chi positions (3<sup>rd</sup>) are deep, thin and weak.
This patient has a diagnosis of (per Dr. Luo) **Liver fire with phlegm retention** which is causing the trigeminal neuralgia. I also see Liver Qi stagnation causing the fire with liver wind resulting. I see some stomach heat. The diarrhea is probably caused by liver overacting on the spleen. I see Liver and Kidney yin xu, Liver blood xu too.
To Study for Wind Stroke:

Dr. Luo emphasized in class that all inner wind and vertigo is due to LIVER inner wind. Inner wind can be caused by blood xu, yin xu, or Liver yang/fire rising. Early signs of a wind stroke can be stiff neck, headaches, numbness on one side and twitching. Windstrokes don’t just happen out of the thin blue air except for TIA’s. They have precursors.

- Know the difference between a wind stroke of the meridians and a windstroke of the organs. (Hint: if wind attacks the organs the patient will lose consciousness – much like a hemorrhagic stroke in western medicine)
- Know closing syndromes versus collapse syndromes
- Know sequellae information
- Know the manifestations of inner wind (i.e., twitching, numbness, vertigo, etc.)

What is a wind stroke?

It’s also called a CVA or Cardiovascular Accident. There are 2 kinds in biomedicine:

1. Ischemic attack
   Results with blockage. No loss of consciousness

2. Hemorrhagic attack
   Results from bleeding / rupture in the brain. Loss of consciousness

What are the 3 versions of ischemic CVA?

1. Cerebral thrombosis
   Yin condition happening when patient is at rest. Blood vessel clot in the local brain area esp with hx of high serum cholesterol.

2. Cerebral embolism
   More Yang. Blood clot breaks off and travels to the brain from another area. Happens when the patient is excited or moving. Can also be as a result of an “clot” of air travelingin the blood stream.

3. TIA
   Transient ischemic attack. A mini stroke resulting in a short sudden blackout. Symptoms rarely last more than an hour and recovery mostly complete by 24 hours. These are due to small blockages and either melt or migrate. This is a pre-stroke condition! It is not serious in itself, but indicates a more serious condition.
What is a hemorrhagic CVA and what are the 2 forms it takes?

A hemorrhagic CVA is a rupture of one or more blood vessels in the brain. Onset is sudden. **Patients will lose consciousness.** The prognosis is bad and an increase in cerebral pressure is likely.

1. Intracerebral hemorrhage  
   Can be a result of trauma or blood stasis. Any part of the brain.

2. Subarachnoid hemorrhage  
   Bleeding in the subarachnoid space between skull and brain. Often hypertension related, accompanied by emotional disorder and is due to blood stasis.

What are the early signs of a hemorrhagic CVA?

- Throbbing headache
- Double vision maybe with color changes
- Unexplained dizziness
- Severe vomiting

What are the early warning signs of a stroke in general?

- Headache
- Stiff neck (acute inflammation)
- Tremors
- Numbness on one side of the body

What are the 4 TCM etiologies for CVA/Wind Stroke?

1. Emotional disorder  
   LV heat/fire ➔ LV yang rising ➔ Inner Wind

2. Irregular diet  
   Alcohol/greasy/fatty foods ➔ Phlegm which the inner wind then blows around.

3. Overwork and aging  
   Leading to LV and KI yin xu so that LV yang then rises/floats and generates Inner Wind.

4. Lifestyle factors  
   Note that all of the above are actually lifestyle factors. These lead to high cholesterol, blood pressure and blood sugar.
Name the 5 mechanisms for CVA/ Windstroke in TCM

1. **Wind**

2. **Fire**
   Generates wind

3. **Phlegm**
   Combined with wind leads to seizure/CVA

4. **Stasis**
   Of blood. Combined with wind this also leads to seizures and CVA.

5. **Deficiency**
   a. Of Blood
   b. Of LV and KI leading to Wind
   c. Of Jin and Yê leading to dehydration

   If there is no fire present, must be deficiency!

**True or false: All Inner Wind and vertigo are due to Liver disorder.**

True!

**What is aphasia and are the basic points to treat it after a wind stroke?**

Aphasia is inability to speak which occurs in the sequella stage after a stroke.

- HT 5
- DU 15
- REN 23
- LU 7 + KI 6
- JingJin and YuYe (under the tongue)

**What are the basic points for Dysphagia?**

Dysphagia is inability to or difficulty swallowing in the sequella stage after a stroke.

- REN 22 and 23
- ST 8
- LI 18
- LU 7 + KI 6

**What are the 3 stages of wind stroke?**

Acute (during the attack)
Inner wind attacks either the meridians or an organ.

Convalescence

Sequella
What is the difference between an attack on the meridians and an attack on an organ at the acute stage of a wind stroke?

Meridians.
Correlates to an ischemic CVA. No loss of consciousness. Two types:
1. Yang - Liver Yang Rising due to LV and KI Yin Xu + Inner Wind.
2. Yin – Damp Phlegm + Inner Wind attacking the meridians

Organ
Correlates to a hemorrhagic CVA. Loss of consciousness! These come in 2 styles too with 2 sub-styles each:
1. Closing/Tense Syndrome – an excess type syndrome
   a. Yang Excess – Liver Yang Rising with rebellious qi/blood + Inner Wind
   b. Yin Excess – Turbid Phlegm blocking the five sense organs + Inner Wind
2. Collapse/Flaccid Syndrome – a deficient type syndrome
   a. Yang collapse
      Look for cold, loose sweating (because Yang unavailable to heat the body/sweat)
   b. Yin collapse
      Look or warm, sticky sweating (because Yin unavailable to cool the body/sweat)

What 3 patterns do you find in the convalescence/recovery stage of a wind stroke

1. LV/KI Yin Xu + Inner Wind
2. Retention of Damp Phlegm + SP Qi Xu
3. Qi and Blood Xu

What are the 4 conditions most likely encountered in the sequella stage after a wind stroke?

1. Central Facial Paralysis
   Go back and review the symptoms and be able to differentiate it from Bell’s Palsy. See the last part of the Quiz 1 Study Questions/Cases document.
2. Hemiplegia
3. Aphasia
4. Dysphagia

We didn’t discuss this one in class, so make of my discussion and stuff in blue what you will...

Zhang, 68 year old female

Hypertension involves either LU, SP, KD or HT, LV, KD
Condit of vessels - LV       Kidney
She had a history of hypertension, atherosclerosis and lower back pain. Recently she had been feeling
Wind rising Liver LV yang rising?

faint after an emotional disorder and having headaches, but had not thought her discomfort severe enough to warrant treatment. Five days previously however, she began to feel weak and fixed painful imbalance between upper and lower in the waist, legs and knees. If she walked quickly she would stumble. Soon her left leg was useless and she could not stand. She also developed tinnitus and felt thirsty, with a preference for cold drinks. Her bowels moved twice per day and she passed scanty reddish urine. She preferred fatty food with poor appetite and had white sputum early in the morning. Her eyes felt dry and had blurred vision during recent 2 years. Her condition was diagnosed...

Examination: She was overweighted. Her face was red and her tongue was deviated. Her speech was impaired. Blood pressure was 200/120 mmHg.

Tongue is purple (can’t see much more detail than that in the powerpoint pic).

Pulse is thin, wiry, and fast in the 3rd position on both sides. The second position on the right is soggy.

Patient seems to have an ischemic type of cerebrovascular disease or CVA as she hasn’t lost consciousness and the symptoms are progressing slower than if she was having a hemorrhagic CVA. The dizziness and inability to balance well indicate wind affecting the body. She has a fatty diet and a soggy pulse in one position. She is also overweight. These things imply phlegm/damp. She has signs of Liver yang rising – hypertension and the headaches as well as Liver blood xu and Liver overacting on spleen. She’s definitely got heat signs.

Since this has happened to her in the last few days, she is in the acute stage of a wind stroke of the meridians rather than the organs because she never lost consciousness. She is a combination of the two types listed in the study guide for wind stroke of meridians. She’s got a Kidney yin deficiency as well as a probably Liver yin xu (dry eyes) as the 2 go together often, and she’s got Liver blood xu. These have generated the inner wind that causes the dizziness, vertigo, headaches, exacerbated by the emotional symptoms. She also has a history of hypertension with a pattern description of Liver/Kidney yin xu and Liver Yang rising.

My diagnosis for her: wind stroke.
My pattern description for her: Liver Yang Rising due to Liver and Kidney Yin xu with inner wind and damp phlegm harassing the meridians.
Li, 52 year old female

Chief complaint: numbness in the right limbs for 2 weeks.

HT xu xu/cold LU xu HT Blood xu …………………

She has been suffering from palpitations, pale face, soft voice, poor memory and bad concentration for

Blood xu inner wind sigs

over 15 years due to heavy menstrual bleeding. During the past 2 months, she had dizziness and vertigo,
LV blood xu signs………………………………. Spleen qi xu

blurring vision, pale and scanty menstrual bleeding and her appetite was poor. Two weeks ago when she

numbness is LV wind

woke she suddenly felt numb on her right limbs. She could not hold objects and she also had constant

inner wind Heart or liver blood xu Inner wind

skin twitching. She complained of nightmares with a lot of dreams and woke up with calf spasms. She

Qi deficiency and wei qi? Xu-blood, yang, qi or cold…. sweated easily with exhaustion at the end of the day. Her tongue was pale and thin with white coating.

Xu ……..plus Liver

Her pulse was thin, weak, and wiry.

1. Pale face, soft voice, poor appetite and sweated easily with exhaustion indicate:
   a. Gallbladder and heart qi xu
   b. Heart and liver blood xu
   c. Kidney qi xu
   d. Lung and spleen qi xu

2. What are the signs of inner wind?
   a. Pale face, soft voice
   b. Poor appetite, dreams
   c. Sweating easily, poor memory and bad concentration
   d. Numbness of the right side of the body with skin twitching

3. What caused her inner wind?
   a. Rising of liver yang
   b. Blood stasis and rebellious qi
   c. Retention of phlegm and dampness
   d. Liver and heart blood xu

   Blood xu, yin xu, and liver fire can cause inner wind – can be excess or xu causes

4. Overall, the deficiencies in this case include:
   a. Yin and essence xu
   b. Yin and yang xu
   c. Qi and blood xu
   d. Qi and yang xu

5. Which of the follows is the principle of treatment?
   a. Balance yin and yang and remove inner wind
   b. Nourish yin and replenish essence

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c. Tonify qi and nourish blood and remove inner wind
d. Warm yang and tonify qi

6. Which of the following points is for this patient?
   a. LI 4, LV 3, HT 1, PC 8, KI 1
   b. DU 20, DU 16, Shixuan extra points, GB 20, GB 34
   c. ST 36, SP 6, BL 17, BL 18, BL 15, GB 20, LV 8, REN 17
   d. SP 10, BL 40, BL 17, BL 62, SI 3

7. According to her symptoms, this is:
   a. Wind stroke attacked internal organs
      she would have lost consciousness if this had happened
   b. Insomnia due to liver fire
   c. Wind stroke attacked meridians
   d. Palpitation due to disharmony between heart and kidney