

Editors' Forum Hot Spots

Translation of Beijing's Recommendations for Traditional Chinese Medicine (TCM) Treatment of Covid-19

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Translators' Note

In contrast to the SARS outbreak in 2002/2003, where Chinese medical interventions were not particularly encouraged, the current Chinese government has been supportive of efforts to further develop Traditional Chinese Medical (TCM) treatment strategies for the novel coronavirus. All over the country, region-specific recommendations have been published online. We translate here *TCM Treatment in the Diagnosis and Treatment Protocol for Novel Coronavirus Pneumonia (Trial Version 5)*, starting the translation on p. 10, point 4, 中醫治療 (TCM Treatment) (see full reference below). We provide in square brackets the treatment rationale, based on published knowledge combined with our own learning. A nationwide recommendation from February 18, 2020, by The National Hygiene and Health Committee of the P.R. China, as well as Beijing's sixth and seventh editions, have since been issued. Scholars and practitioners of TCM have found it empowering to

know that, across China, a previously unknown disease has been treated by pragmatic, imaginative, and innovative reasoning within a TCM framework.

Translation

TCM differentiates between two early observational phases of this virus (when the patient is at home) and four clinical phases (when a patient is perhaps hospitalized). In the first two early phases of observation, patients are expected to practice self-care and rest in isolation and if necessary, self-medicate.

The two early stages of observation:

1. If the person is tired and nauseous in stomach and intestine (乏力伴胃腸不舒), use *Huoxiang zhengqi* formula medicine (藿香正氣膠囊).
2. If the person is tired and feverish (乏力伴發熱): use, i.a., *Lianhua qingwen* capsules 連花清瘟膠囊 and/or *Fangfeng tongsheng* pills 防風通聖丸.

The four clinical phases:

(1) *Early phase*: coldness and dampness constrain the lungs (*han shi yu fei* 寒濕鬱肺)

Clinical manifestation: an aversion to cold, feverish or not, dry cough, the throat is dry, the person feels fatigue and lack of strength, the chest feels oppressed, there is gastric stuffiness, some patients suffer from nausea, vomiting, or loose stools that contain undigested pieces. The tongue looks pale or pale and reddish, the tongue fur is white and slimy. The pulse is soggy.

Recommended formula:

Chinese atractylodes rhizome 蒼朮 *cang zhu* (*Atractylodes lancea*) 15g,

aged tangerine peel 陳皮 *chen pi* (*Citrus tangerina*) 10g,

magnolia bark 厚樸 *hou po (Magnolia officinalis)* 10g,

agastache 藿香 *huo xiang (Pogostemon cablin)* 10g,

tsaoko fruit 草果 *cao guo (Amomum tsao-ko)* 6g,

fresh ephedra 生麻黃 *sheng ma huang (Ephedra sinica)* 6g,

notopterygium root 羌活 *qiang huo (Notopterygium incisum)* 10g,

fresh ginger 生薑 *sheng jiang (Zingiber officinale)* 10g,

areca seed 檳榔 *bing lang (Areca catechu)* 10g.

[*Treatment rationale:* This formula is based on Wu Youke's (吳又可, 1582–1652) *Da yuan* drink 達原飲, as recommended in his *Treatise on Febrile Epidemics (Wen yi lun 瘟疫論)* of 1642 (discussed in Hanson 2011). It aims to reach the *mo yuan* 膜原, i.e., the region of the diaphragm, repels foulness, and dissolves the turbid, phlegm.]

(2) *Middle phase:* the virus closes down the lungs (*yi du bi fei 疫毒閉肺*).

Clinical manifestation: persistent feverishness or intermittent heat and coldness, cough with little phlegm, abdominal distention, constipation, etc.

Recommended formula:

apricot seed 杏仁 *xing ren (Prunus armeniaca)* 10g,

raw gypsum 生石膏 *sheng shi gao (gypsum, CaSO₄·2H₂O)* 30g,

trichosanthes root 瓜蒌 *gua lou (Trichosanthes kirilowii)* 30g,

fresh rhubarb root 生大黃 *sheng da huang (Rheum palmatum)* 6g,

fresh and roasted ephedra 生、炙麻黃 *sheng zhi ma huang* (*Ephedra sinica*) 6g of each,

descurainia seed 葶藶子 *ting li zi* (*Lepidium apetalum*) 10g,

peach kernel 桃仁 *tao ren* (*Prunus persica*) 10g,

tsaoko fruit 草果 *cao guo* (*Amomum tsao-ko*) 6g,

areca seed 檳榔 *bing lang* (*Areca catechu*) 10g,

Chinese atractylodes rhizome 蒼朮 *cang zhu* (*Atractylodes lancea*) 10g.

[*Treatment rationale*: This formula combines two traditional ones: the *Ma xing shi gan* decoction 麻杏石甘湯 and the *Hou pu xia ling* decoction 藿朴夏苓湯. It is used for an exterior resolution and dispersal of the fevers due to cold damage, and it dissolves phlegm (Li et al. 2020).]

(3) *Serious phase*: internal closure, external collapse (*nei bi wai tuo* 內閉外脫).

Recommended formula:

ginseng root 人參 *ren shen* (*Panax ginseng*) 15g,

processed aconite accessory root 黑順片 *hei shun pian* (*Aconitum carmichaeli*) 10g,

dogwood 山茱萸 *shan zhu yu* (*Cornus officinalis*) 15g;

make of the above a decoction and use it to flush down the *Su he xiang* pills 蘇合香丸 or the *An gong niu huang* pills 安宮牛黃丸.

[*Treatment rationale*: As all formulae that include *Panax ginseng* and *Aconitum*, this formula stimulates, rectifies, and restores the *yang qi*, and stems the counterflow, thereby saving the patient from a complete collapse, including possible coma (Li et al. 2020).]

(4) *Recovery period*: lung and spleen *qi* is depleted (*fei pi qi xu* 肺脾氣虛).

Recommended Formula:

prepared pinellia rhizome 法半夏 *fa ban xia* (*Pinellia ternatae*) 9g,

aged tangerine peel 陳皮 *chen pi* (*Citrus tangerina*) 10g,

codonopsis root 黨參 *dang shen* (*Codonopsis pilosula*) 15g,

roasted milk-vetch root 炙黃芪 *zhi huang qi* (*Astragalus membranaceus*) 30g,

poria 茯苓 *fu ling* (*Poria cocos*) 15g,

agastache 藿香 *huo xiang* (*Pogostemon cablin*) 10g,

amomum fruit 砂仁 *sha ren* (*Amomum villosum*) 6g.

[*Treatment rationale*: We presume this formula is based on the *Er chen* decoction 二陳湯, from which licorice is subtracted, but to which are added ingredients of *Si jun zi* decoction 四君子湯, both of the Song dynasty. Meanwhile, Li et al. (2020) analyze it as elaborating on the *Liu jun zi* decoction 六君子湯. The ingredients supplement, order, and enhance the *qi*, strengthen the spleen, dissolve the phlegm, and harmonize the stomach.]

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