

Chinese Nutritional Therapy: Case Studies

Abstract

This article presents cases from the author's clinical practice that responded favourably to dietary intervention in order to illustrate the utility and effectiveness of dietary intervention based on Chinese medical pattern differentiation. The author hopes that these case studies will inspire practitioners to incorporate this powerful and accessible tool into their own clinical work.

Introduction

Experts at curing disease are inferior to specialists who warn against diseases. Experts in the use of medicines are inferior to those who recommend proper diet.

Zhi Chen, 11th century (in Needham, 1970)

My undergraduate degree in Food Science points to my lifelong fascination with the healing properties of foods. In Chinese medicine school I became fascinated by the principles and strategies used in Chinese nutritional therapy. Unlike most Western nutritional therapy, the Chinese approach offers patients a personalised (based on pattern differentiation), time-tested (since at least the Zhou dynasty [Deadman 2016]), season- and climate-specific list of food recommendations.

The understanding of the functional qualities of individual ingredients in Chinese nutritional therapy, as well as the effect of preparation methods on those qualities, has yielded an impressive approach to counteracting disease. This wealth of dietary wisdom allows practitioners the unparalleled ability to dispense completely personalised dietary advice.

The first two case studies below are patients I saw shortly after receiving my license to practice Chinese medicine. The results of these early dietary interventions elevated my appreciation for the profound clinical effects we can expect from Chinese nutritional therapy and led me to recommend dietary changes for nearly all the patients I have seen in the last 15 years. My hope is that these case studies will inspire practitioners who already utilise Chinese nutritional therapy in the clinic to do so more often, and persuade those practitioners who do not recommend dietary changes to begin using this powerful clinical tool.

Early cases

After receiving my license to practice Chinese medicine I opened a small private office. In addition,

I joined a newly established integrative medicine department at my local hospital. The medical director of that department was an osteopathic physician who performed extensive manual techniques and apparently as a result experienced swollen and painful joints bilaterally from her shoulders to her fingers. Being a newly licensed acupuncturist, I was terrified and honoured when she asked if I could treat her. I diagnosed damp obstruction with slight heat and employed acupuncture and a herbal formula to address her pattern. One month later she reported a 50 per cent reduction in pain and swelling. I adjusted her acupuncture prescription and increased the dosage of her formula, yet after another month she was still reporting only a 50 per cent reduction in her original condition.

After following the restricted diet for two weeks she reported that she was now pain free, and palpation along with visual inspection confirmed that her joints were no longer swollen.

Desperate to make a good impression on my boss I hesitantly asked if she would consider making some dietary changes. She agreed, and I began a frantic search through the few Chinese medicine nutrition texts available in English for foods to counteract a pattern of damp obstruction with slight heat. Armed with the skimpy fruits of my search, at our next appointment I recommended that she avoid eating wheat, sugar, dairy and all fruit. I crossed my fingers and hoped that this would have at least some impact on her remaining pain and swelling. After following the restricted diet for two weeks she reported that she was now pain free, and palpation along with visual inspection confirmed that her joints were no longer swollen. The patient was elated, and I did my best to mask my astonishment that avoiding a few foods could have such a quick and definitive clinical result.

This was not just a temporary result either. This

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dietary intervention was 15 years ago, and I still see this patient on occasion for other complaints. She has consistently reported that if she avoids those foods she is able to remain pain free. However, as we will see with the next case, dietary intervention is not always so expedient.

One of the first cases I saw in private practice was a couple who had been struggling with infertility for three years. The wife was 31 years old and presented with patterns of yang deficiency with pathogenic cold, blood deficiency with some stasis, dampness and sunken Spleen qi. She had never been pregnant and had undergone one failed intrauterine insemination and two failed in vitro fertilisation procedures before I met them. The husband was 33 years old and slightly qi and yin deficient but basically healthy. They were both eager to start a family.

For nine months the wife came for weekly acupuncture

and herbal decoctions twice daily, during which time her dream of having children remained painfully elusive. For those nine months she also refused to follow my dietary recommendations consistently. Finally, the emotional pain was unbearable, and she agreed to follow the strict dietary recommendations listed in Table 1.

My patient strictly followed these dietary guidelines for two months and became pregnant without any orthodox medical assistance. She then followed them less strictly through her pregnancy and gave birth to a healthy girl. Of course, we cannot definitively determine that strict adherence to the dietary guidelines resulted in her finally overcoming infertility. However, in my experience dietary intervention often correlates with desired clinical outcomes, especially in recalcitrant cases; it seemed to do so in this case.

Food	Rationale	Notes
Avoid all processed and fast food	See Dr. Carroll's New York Times article which is an experienced clinician's take on Michael Pollan's famous maxim: 'Eat food. Not too much. Mostly plants.' (Carroll, 2015)	
Avoid all fruit	Fruit is too sweet (promotes dampness) and too cool for a yang deficient patient	Cherries are excepted because they supplement the blood and are slightly warm (but limit to 10 per day)
Avoid all grains but white rice	Grains are too sweet and will promote dampness	Rice is excepted because of its ability to augment Spleen qi
Avoid all raw food	Too cool for a yang deficient patient	
Avoid all root vegetables	Too much descending qi	
Avoid all dairy	Too sweet and cool for a damp and yang deficient patient	
Seek out a wide variety of cooked vegetables	Vegetables tend to be cool, so cooking is essential to counterbalance this quality. Vegetables also tend to clear toxic heat which is necessary for a diet that recommends meat	Avoid aloe and all sea weeds because they are too cold
Seek out a wide variety of meats including organ meats (avoid pork)	Meats uniformly supplement blood and qi	Pork is too cooling. Seek out lamb and venison for their warming qualities
Seek out a wide of variety of nuts and seeds	Nuts and seeds uniformly supplement qi	

Table 1: Dietary recommendations for a 31 year-old infertility patient (Daly, 2014; Wu, 2006)

Recent cases

I am currently seeing a 57-year-old female patient with colorectal cancer that has recently metastasised to her lungs. She has deep thready pulses and a pale tongue. Her chief complaints are fatigue and intolerance to cold. Before I met her, she had been following a strict ketogenic diet that consisted primarily of salads with olive oil and pork. I recommended cooking the vegetables she was using for salads and switching from pork (too cooling) to lamb and venison (warming). Within two days of switching to a warming diet she noticed more energy and reduced cold symptoms, as well as improved digestion with

less flatulence. Now, one month later, she no longer has intolerance to cold and her energy continues to improve.

Two weeks ago, I saw a 72-year-old female patient with a chief complaint of severe itching throughout her body for the last two months. Her dermatologist could not determine the cause. Her pulse was slightly rapid and her tongue was pale with a thick coat towards the back. Several times per week she experienced constipation. I diagnosed Large Intestine dampness with slight toxic heat and slight Liver blood deficiency. I recommended she make the dietary changes detailed in Table 2.

Food	Temperature	Flavour	Actions	Indications	Notes
Banana	Cold	Sweet	Augments yin, clears heat, clears toxicity	Constipation, digestive weakness, ulcers	
Chard	Neutral	Sweet	Augments blood, clears heat, clears toxin	Abscess, dysentery, skin lesions	
Eggplant	Cool	Sweet	Cools blood, drains damp, moves blood	Dysentery, haemorrhoids, skin disorders with itching	
Octopus	Cold	Salty, Sweet	Augments qi and blood, augments yin, clears heat	Dizziness, indigestion, skin disorders with itching, tinnitus	Fortunately, there is a good Japanese restaurant nearby, so this is easy to source
Pumpkin seed	Neutral	Sweet	Drains damp, kills worms, moistens the intestines	Constipation, difficult urination, haemorrhoids, nausea	
Squid	Cold	Salty, Sweet	Augments blood, augments yin, clears heat, augments qi	Amenorrhoea, dizziness, indigestion, leucorrhoea, skin disorders with itching, tinnitus	
Spinach	Cool	Sweet	Augments blood, clears heat	Acne, constipation, dizziness, headache, itching	

Table 2: Dietary recommendations for a 72-year-old female with severe itching (Daly, 2014)

When I saw the patient this week she reported an almost complete resolution of the itching and constipation. I recommended following these dietary additions for another two weeks to consolidate the effect.

Last week I saw a 43-year-old male with complaints of fatigue, insomnia and daily headaches for the last three months since opening his own retail business. He reported that the headaches were bilateral along the Gall Bladder

channel in his neck and head. He had a pale, slightly small tongue with a thin white coating. His pulses were weak, especially on the right side. I diagnosed ascending wind along the Gall Bladder channel due to Liver blood deficiency. After acupuncture treatment he reported a 25 per cent reduction in the headaches; I recommended he add a few of the foods from Table 3 to his diet each day.

Food	Temperature	Flavour	Action	Indication	Notes
Beef	Warm	Sweet	Augments blood, strengthens the sinews and bones	Oedema, fatigue, poor appetite	
Beef liver	Neutral	Sweet	Augments blood, benefits the Liver	Blurred vision, dizziness, fatigue, poor concentration	
Beet	Neutral	Sweet	Augments Liver blood, supplements the heart	Agitation, insomnia	
Cherry	Warm	Sweet, slightly sour	Augments blood, supplements the Liver and Kidneys	Fatigue, palpitations, vertigo	
Chicken (black boned)	Neutral	Sweet	Augments Liver blood, clears heat	Impotence, infertility	
Chicken egg	Neutral	Sweet	Augments blood and yin	Dizziness, fatigue, insomnia, poor appetite	
Goji berry	Neutral	Sweet	Nourishes Liver yin and blood, benefits Kidney yin	Blurred vision, dizziness	
Mulberry	Cool	Sweet	Augments Liver yin and blood	Insomnia, irritability, tinnitus	
Oyster	Neutral	Salty and sweet	Augments Liver blood and yin	Agitation, insomnia, restlessness	
Pork liver	Neutral	Bitter and sweet	Augments Liver blood, benefits the eyes	Blurred vision, oedema	
Quail eggs	Neutral	Sweet	Augments Liver blood	Fatigue	
Spinach	Cool	Sweet	Augments Liver blood, clears heat	Acne, constipation, dizziness, headache, itching	

Table 3: Dietary recommendations for 43-year-old male with headaches (Daly, 2014)

After one week of faithfully adding a few foods from Table 3 daily (unfortunately he was unable to source beef and pork liver), he reported less fatigue and a 75 per cent reduction in headaches. Unfortunately, the insomnia was unchanged. I gave him another acupuncture treatment and encouraged him to continue with the new food additions for another week and if any symptoms remain next week I will consider adding a herbal formula to his treatment.

Conclusion

As Chinese medical clinicians, we have already completed the 'heavy lifting' of determining a diagnosis when we formulate an acupuncture prescription or compile a herbal formula. Since dietary recommendations stem from this same diagnosis, it only takes a few more moments to consult the relevant sources (see Table 1 in Daly, 2016) to offer dietary advice. With centuries of successful Chinese

medical dietary interventions as guidance we can enable patients to more actively participate in the recovery or maintenance of their health. As stated in the introduction, my hope is that these case studies will motivate practitioners to utilise this potent and accessible clinical tool. In my experience, Chinese nutritional therapy can be the defining factor between clinical success or failure.

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Endnote

- 1 In general, for the first half of her menstrual cycle (Day 1 to Day 14) I needled Shenmen HE-7, Zusanli ST-36, Taixi KID-3 and Sanyinjiao SP-6, and applied ginger moxibustion along her spine. Her formula during this time was a modified *Zhen Wu Tang* (True Warrior Decoction) with the addition of Dan Shen (*Salvia miltiorrhiza* Radix) and He Huan Hua (*Albizia* Flos). The second half of her menstrual cycle (day 15 to the start of menstruation or confirmed pregnancy) I needled Neiguan P-6, Zusanli ST-36 and Taixi KID-3, and applied moxibustion to Baihui DU-20, Shenque REN-8 and Zusanli ST-36. Her formula during this time was a modified *Bu Zhong Yi Qi Tang* (Tonify the Middle to Augment the Qi Decoction).