Case Study: An Integrated Approach to The Treatment of Chronic Fatigue Syndrome

A 21 year old girl had an upper respiratory tract infection, one month prior to coming for treatment. She was home for the Christmas Holidays from University. The upper respiratory tract infection was treated with Biaxin, 250 mg for one week. Her acute symptoms had improved in terms of fever and chills, sore throat and runny nose, cough, oppression and congestion of the chest. Clinical manifestations when she came for treatment included slight sore throat, nasal congestion, swollen glands, mouth ulcers, headache, difficulty sleeping, difficulty waking up, extreme fatigue (sleeping up to 13 hours or more per day), pain and muscle ache everywhere, poor concentration, no desire to drink night sweats, feeble weak voice, depression and anxiety. She was extremely pale, but flushed. The tongue was red with white coating on one side, red tip and wet. Her pulse was fine, wiry and slippery.

This individual had been diagnosed with Chronic Epstein Barr Syndrome about 6 years prior. The initial onset was at 10 years of age when serological findings confirmed the presence of Epstein Barr Virus. Prior to this pathological invasion, she indicated that she was a healthy robust child. Her mother confirmed this, and stated that she had never fully recovered from this infection. Since this time, she continued to feel exhausted, experienced chronic pain and was susceptible to viral and bacterial infections. After each attack, it was apparent to her that her immune system was compromised. After each infection, her symptoms would be aggravated to the extent that she could not get out of bed or perform daily living activities, such as showering. School was quite stressful because of the fatigue and difficulty concentrating. Consequently, she dropped 2 courses to attempt to salvage her 2nd year at University. It was apparent in our discussions that she was extremely frustrated and discouraged. Tearfully, she acknowledged that she sometimes woke at night with her heart racing and felt absolute fear. This would happen randomly or when she felt overwhelmed because she was unable to concentrate and settle down to read. Her mind wandered and muscle pain often distracted her. In the initial consult she conveyed a sensitivity to noise, light and strong smells which provoked an overwhelming sense of anxiety and at the same time a desire to just withdraw and curl up with blankets. At the end of our discussions she timidly shared that she had been sexually abused at age 12 by a foster child lasting 3 years. She finally told her parents and the boy was charged with sexual assault. The trial in itself was an extremely traumatic experience. In this case we obviously have a deep emotional component underlying this condition, which when we look at this more carefully, we can understand that Chronic Fatigue Syndrome, is complicated by patterns of both deficiency, (Xu) and excess (Shi).

Diagnosis:

One of the triggers for re-occurring symptoms of Chronic Fatigue Syndrome is the presence of residual pathogenic factors. In this case, she has a confirmed diagnosis of Epstein Barr Virus, which has been implicated as one of the causes of Chronic Fatigue Syndrome. It is my opinion that this virus is really secondary to the primary cause which is a “constitutional weakness” that predisposes the patient to such pathogenic invasions. As a consequence to this, the defensive qi lacks the ability to defend against the invasion of the pathogenic factor. If wind invades the body
and is not properly resolved, the pathogenic factor remains in the interior as Heat or Damp heat. It then predisposes the individual to further invasions as we can confirm has occurred in this situation. Eventually, Qi and Yin are weakened so that the picture becomes complicated by the presence of the pathogenic factor and deficiency.

This pattern is complicated by the continued use of antibiotics, that in fact, prevent the release of the exterior, and are incapable of clearing heart or damp. If antibiotics are required, I typically insist that a Chinese Herbal formula be used to release the exterior, clear, heat and resolve phlegm. We also recommend the use of Acidophilus to restore the natural flora in the intestines and digestive system which counteracts the effects of antibiotics in weakening the immune system and promoting yeast.

Damp-heat is present in the muscles but dampness is more prominent than the heat. When muscle ache is present it means that dampness overflows in between the skin and muscles and especially the limbs. Dampness also is responsible for cognitive impairment, particularly concentration and poor memory. The fact that the tongue coating is white reflects that heat is not as predominant as dampness which impair the spleen’s ability to transport and transform body fluids. But, her tongue has a white coating only on one side. Given this, the unresolved pathogenic factor of damp heat in the muscles is typical of Shao Yang Syndrome. Whether or not the symptoms, reflected the long term initial invasion of unresolved pathogenic heat, the current symptoms dictate the presence of a Shao Yang Pattern. More specifically the pattern is a Shao Yang Pattern as it pertains to the 6 stages. There is more cold than heat, reflecting in the tongue and pulse.


Herbal Prescription: Xiao Chai Hu Tang (Small Bupleurum Decoction)

- Chai Hu-Radix Bupleuri- 9-15g
- Huang Qin-Radix Scutellariae- 6-9g
- Ban Xia-Pinelliae Praeparata- 6-12g
- Ren Shen-Panax Ginseng-9-12 may substitute with Dang Shen-Radix Codonopsis-10g
- Sheng Jiang-Rhizoma Zingiberis Recens-3-6g
- Da Zao-Fructus Ziziphi Jujubae-3g
- Gan Cao-Radix Glycyrrhizae Praeparata-3-6g

We have used this prescription many times and have found it to be extremely beneficial for those patients that have experienced recurrent infections in which fever and chills alternate, particularly when patients have suffered with Chronic Fatigue for many years. It was also chosen because of her symptoms of nervousness, irritability, depression, and problems with sleeping. Given the childhood abuse, stress at school and her reactions to be frustrated with being tired, her symptoms of depression were not typical of just liver qi stagnation, as a mild form of depression. In fact the degree of intense emotion expressed revealed a much deeper depression and intrapsychic conflict for which she had previously sought counseling and treatment. She had been prescribed Ativan 1mg. PRN and Xoloft, 75 mg. The Ativan had been prescribed for panic attacks and Xoloft was given to her to help with depression, sleep, pain and calm her down. Although, she felt better and was not as anxious, she did not like the side effects because they made her feel tired, heavy and increased her appetite.
We encouraged her to continue counseling and agreed to treat her twice a week for at least one month and then we would review progress. It is essential with CFIDS patients that you explain that treatment will not immediately resolve their symptoms but gradually over time, symptoms improve to a point where they can function. We recommended that she consult with her family doctor to investigate the existence of any other underlying conditions such as thyroid disease, anemia, auto-immune disorders, hormone imbalances and vitamin deficiencies. In particular, I was interested in knowing whether she had developed Thyroid antibodies, B12 deficiency, Iron Deficiency, elevated WBC or ESR. Any of these can cause fatigue, muscle pain, inflammatory reactions etc., She was a vegetarian and had irregular eating habits. I was concerned that she may be anemic. In fact, the B12 test came back positive, indicating a B12 deficiency or pernicious anemia. This can be caused by protein calorie malnutrition due to inadequate diet. Her WBC was slightly elevated. The doctor felt that B12 injections would be beneficial in alleviating some of her symptoms of fatigue and administered loading doses of 1cc weekly for four weeks and then decreased the dose to 1cc each month. She responded quickly to this, feeling more energetic and able to concentrate. She started to sleep better and consequently the time she needed to sleep, decreased.

At the end of the second month all of the symptoms of the URT infection were gone, although she was still experiencing swollen glands, fatigue, pain in the muscles and depression, albeit improved. We continued with Xiao Chai Hu Tang but added some Western Botanicals. Lyphosot is a formula that consists of natural diuretics, heat purging herbs, clears phlegm and stimulates lymph drainage. We added Pu Gong Ying-Taraxacum-9-30g to clear liver and kidney heat, release toxins and to resolve damp. This was very effective. A week later for the first time in years her glands were not swollen and she did not have the urge to constantly clear her throat.

Added to this regimen, we typically advise our patients to supplement with vitamins because of poor eating habits and dietary deficiency. This helps to support the immune system during the transition of adopting better eating habits and lifestyle changes. Some of the supplements include the use of Omega 3 and Omega 6 essential fatty acid, in the form of flaxseed oil, salmon oil or evening primrose oil. A complex Multi B vitamin is suggested to improve the nervous system particularly, for women taking Contraceptives as this depletes their body of B vitamins. Many women benefit from the use of Calcium/ magnesium with D because it improves the health of their bones, relaxes muscle spasms and facilitates sleep. Vitamin D is extremely helpful for older patient with CFIDS. Doses of 1000mg per day can help to relieve symptoms of depression. Prior to encouraging this dose, patients need to reviewed in terms of Parathyroid function. Vitamin D supplementation at this dose is contraindicated in the presence of parathyroid dysfunction.

The prevention of pathogenic factors invasion, is the key that eventually enables the body to heal itself. Consequently, at the sign of any infection, Xiao Chai Hu Tang is used immediately. We teach them how to gargle with salt and water and use nasal irrigation at the onset of signs and symptoms of a sore throat, and then combine the use of Vitamin C, Zinc, Goldenseal/Hydrastis Canadenis-5-15 drops T.I.D. (Huang Lian-Coptidis-Berberine-1.5-9g) and Echinacea/Echinacea Angustifolia, Echinacea Purpurea -5-15 drops T.I.D., tinctures. This is in addition, to what they are already taking in terms of TCM remedies. Hot ginger tea with lemon to relieve the surface and induce sweat is used regularly for colds. Simple, fast and
easy so that patients will comply. If it is too time consuming, CFIDS patients can’t comply because they don’t have the energy to prepare complicated formulas.

In this case, she was advised to add more protein such as fish and poultry, fruit and vegetable to her diet. Because phlegm is so difficult to treat, we ask that all of CFIDS patients avoid cold, raw foods, fried, greasy foods, fast foods, highly refined processed foods such as sugar, pop, deserts, and anything in a box or a can. This is a very difficult task, given that the North American diet consists mainly of these foods. Dairy products are absolutely discouraged for at least 6 weeks. Developing better eating habits and more nutritional foods natural improves the body’s resistance to infection.

In looking at the distress expressed in the depth of sadness, wanting to cry all the time, timidity, dream disturbed sleep, night sweats, fearfulness, anxiety and frequent yawning; it was clear to me that depression was a major factor. Mild depression known as Liver qi stagnation and Bai He Syndrome often overlap. The general rule is that Liver qi stagnation, known as depression relates to the Liver and in Bai He Syndrome it is more related to the Lung. It is not hard to recognize the distinct differences, given the severity and intensity of emotions, particularly sadness and grief-often associated with the Lung. In this situation, the childhood traumatic experience manifests as Bai He Syndrome which reflects in a pattern of Heart, Lung and Kidney Yin deficiency.

**Treatment Strategy:** Address the manifestations in a practical way. First priority was to calm the mind, alleviate pain and stress, simultaneously, as we focus on resolving the residual pathogenic factors. Gradually over time, the root will be treated for which Kidney yin, Kidney Jing and Qi deficiency will be strengthened and consolidated. By consolidating these factors the constitutional weakness will be strengthened, and eventually, over time the defensive qi of the body will be strong enough to defend against pathogenic attacks. With this as a strategy, other factors that weaken the immune system and pre-dispose the individual to pathogenic invasion need to be addressed such as lifestyle, coping with stress, resolving child-hood intra-psychic conflict and diet.

**The pattern of Bai He Syndrome:** Heart and Lung Yin deficiency may develop from Heart and Liver fire following a febrile disease which then consumes yin. Intense emotions exacerbate this pattern leading to Bai He Syndrome. This is the pattern observed in this patient.

**Treatment Strategy:** Nourish yin, moisten the lung, clear the heart, calm the Shen and Po. After a febrile disease or in the late stage of the disease or in chronic re-occurring pathogenic invasions the constitution becomes weak, Lung, Kidney Yin, and Kidney Jing (timidity) Deficiency becomes part of this pattern. This pattern is easily distinguishable by observing the degree of fear in this young woman, her symptoms of sadness, timidity, anxiety, flushed cheeks, night sweats, dream disturbed sleep, and red tongue

**Herbal Prescription:** Bai He Di Huang Tang and/or Bai He Gu Jin Tang-Lily Bulb Decoction to Preserve Metal and Gan Mai Da Zao Tang-Licorice, Wheat and Jujube Decoction-(Bai He Syndrome: heart lung and kidney yin deficiency).

**Bai He Gu Jin Tang**
Bai He-Bulbus Lili-3-12g  Mai Men Dong-Radix Ophiopogonis-6-12g
Sheng Di Huang-Radix Rehmanniae-6-12g  Shu Di Huang-Radix Rehmanniae Praeparata-6-18g
Bei Mu-Bulbus Fritillariae-3-6g  Xuan Shen-Radix Scrophulariae-6-9g
Dang Gui-Radix Angelicae-6-9g  Bai Shao Yao-Radix Paeoniae Alba-6-9g
Jie Geng-Radix Platycodi-3-6g  Gan Cao-Radix Glycyrrhizae3-6g

Gan Mai Da Zao Tang-Licorice, Wheat and Jujube Decoction
Gan Cao-Radix Glycyrrhizae-9-15g  Fu Xiao Mai-Semen Tritici Levis-9-30g
Da Zao-Ziziphi Jujubae-10pc.

After four months of treatment energy had improved and she was only sleeping 9 hours a day. Her concentration and cognitive functions improved to where she was able to attend classes and successfully write her exams. Acupuncture was given by-weekly for the first month, followed by weekly visits. The muscle ache was still present but not as severe. Her appetite and diet had improved to the point that she had interest in cooking her own meals. Although it was still difficult to wake up in the morning and get going, she was able to sustain daily activities and had started to walk to school. We had encouraged exercise starting with short walks to move stagnant qi and blood and to improve the Spleen’s function of transporting and transforming. Gastrointestinal problems had improved, albeit if she ate greasy foods it upset her stomach. She had not had a cold for the first time since in years. She started to get one, but quickly started our recommended protocol and her runny nose and sore throat disappeared. The tongue picture was no longer red but more pale, thin white coating and wet. It was obvious that the Lesser Yang Syndrome had been cleared.

We wanted to continue to clear damp and heat but felt that tonification of qi and blood was now appropriate. Tiredness in the morning reflects Qi deficiency along with the muscle aching and feeble voice. At 5 months we changed her prescription from Xiao Chai Hu Tang to Bu Zhong Yi Qi Tang-Tonify The Middle and Augment the Qi Decoction
Ren Shen-Panax Ginseng-6-12g may be substituted with Dang Shen-Radix Codonopsis-15g
Huang Qi-Radix Astragali-9-15g  Dang Gui-Radix Angelicae-10g
Chen Pi-Exocarpium Citri-3-6g  Sheng Ma-Rhizoma Cimicifugae-3-6g
Chai Hu-Radix Bupleuri-3-9g  Bai Zhu-Rhizoma Atractylodis-3-9g
Zhi Gan Cao- Radix Glycyrrhizae(honey fried)-3-6g

modified with Tian Ji Huang (St. John’s Wort/Hypericum)-300mg-900mg standardized extract-or 2-4g tea: clears heat, vexation, eliminates damp, cools the blood, He Huan Pi (Albizia)-9-15g and Yu Jin (Curcuma Root)-4-9g. Buzhong Yi Qi Tang was chosen because it strengthen’s spleen, and vital energy, lifts yang energy and is particularly beneficial for those that have a history of colds and anemia. With St. John’s wort added with the other herbs, the formula was designed to raise yang energy up, resolve the heaviness in the body and alleviate depression and anxiety.

The treatment strategy was also changed to tonify the Lung, Kidney, Heart and Yin deficiency to address the deeper emotional issues (Bai He Syndrome). We prescribed Bai He Di Huang
Tang and or Bai He Ge Jin Tang. The results were amazing. Acupuncture involved both clearing of damp and tonifying qi, blood, lung, kidney and heart. By the time school had ended, there was significant change in her demeanour. Her face was no longer pale, fatigue was now much less and sleep was normal. She woke up in the morning more refreshed and now had a regular exercise routine. She started socializing and staying up with friends. To her amazement she recovered quickly. Tiredness and aching became less obvious. Dream disturbed sleep was rare. Her life had changed where she no longer felt overwhelmed but lacked confidence and was fearful that the illness would return. This is certainly a normal reaction to such a long term illness. I felt she would benefit from EMDR-Eye Movement, Desensitization and Reprocessing. This is a Cognitive form of therapy and in this case we targeted her fears associated with the illness and her childhood trauma. Cognitive function and ability to think clearly was very obvious altered and noted two weeks later. She was making decisions about her future, ended a longer term destructive relationship, changed her major and accepted a job for the summer working in the Arctic. She was concerned about not having acupuncture treatment for two months. I assured her to trust her instincts and recognize that her body was now much heathier. She just needed to maintain proper rest, diet and be consistent with her herbal prescriptions.

In summary, she did very well that summer and returned for treatment in August. She learned how to live a more balanced life and her depression and anxiety was very much in remission. Treatment focussed on tonification of qi and consolidation of Kidney yin and Essence to address the constitutional weakness. It is now three years later. She graduated from University and is working in Brazil in the Amazon, doing environmental research. She continues with Acupuncture on a monthly basis and if she starts to feel vulnerable she takes Xiao Chai Hu Tang. The only herbal prescription that she takes regularly is the modified Bu Zhong Yi Qi Tang and San Zhi Pian-Three Imperial Mushrooms- Ling Zhi Mushroom Extract-200mg or 3-15g/Ganoderma Lucidum, Shitake Mushroom Extract-100mg/Lentinus edodes, Mitake Mushroom Extract-100mg/Grifola frondosa. Take one capsule B.I.D.

Acupuncture Points: Clear residual damp-heat and harmonize Shao Yang Pattern
Waiguan-SJ5 -release exterior-wh,wc, expels wind heat, invigorates channels and removes obstruction, benefits the ear, subdues liver yang, harmonize shao yang and opens Yang Wei Dazhui-Du 14 - clear heat
Yang Chi-SJ4- clears heat invigorates channels and removes obstruction, relaxes sinews, regulates stomach after illness, promotes fluid transformation, benefits original qi to spread original qi t body when Ki qi is weakened. Tonifies Ren and Chong, drains GB20. Zhong Zhu-SJ3-clears heat, expels wind, invigorates channels, regulates channels and lifts the mind.
Neiguan-P6-regulates heart qi and blood, moves qi, blood and phlegm, opens the chest, regulates and clears the San Jiao Calms the shen, treats anxiety due to liver qi stagnation, harmonizes the stomach, regulates Yin Wei, clears heat and stops pain.
Zhangmen-Liv 13-promotes the smooth flow of Liver Qi for Liver qi stagnation and stress, benefits the Spleen and Stomach, regulates the retention of food and thyroid function Feng Chi-Gb20-eliminates exterior and interior wind, subdues Liver yang, clear heat, calms shen, clears the head, tonifies marrow and nourishes brain, brightens the eyes and benefits the ears. Ri Yu-Gb24-resolves damp heat, promotes the function of Liver and Gall Bladder, descends and harmonizes the stomach and influences the sinews.
Xia Xi-GB 43-subdues liver yang, resolves damp heat and benefits the ears.
Qu Chi-Li 11-clears heat, expels wind, resolves damp, regulates qi and blood, cools blood,
regulates LI and benefits the joints and sinews.
He Gu-Li4-Dispels exterior wind-wc, wh, clears heat, releases the exterior, tonifies qi and
consolidates the exterior, regulates wei q, stimulates dispersing functions of the Lung with Lung-
LieQue-Lu7. Stops pain by moving qi and calming effect. Harmonize the ascending and
descending, regulates period and helps labour, open orifice and removes channel obstruction.
Hou Xi-Si3-regulates Du Mai, eliminates internal wind from Du, clears heat, expels external
wind-tai yang syndrome, resolves damp and clears the mind. Combined with Jin Men- UB62-
clears heat, stops pain as all Xi cleft points do, calms shen and extinguishes internal wind.
Zusanli-St36-tonifies the whole body, qi and blood, (immune system)benefits stomach and
spleen, moves stomach qi (food, phlegm, damp), rescues collapsed yang, regulates nutritive and
defensive (wei)qi, brightens eyes, regulates intestines, resolves edema and expels wind damp.
Yang Lian Quan-Gb34-promotes the smooth flow of qi in liver and gall bladder, clears heat,
resolves damp, removes channel obstruction, relaxes sinew, and subdues rebellious qi.
Tai Chong-Liv 3-promotes the smooth flow of Liver and Gall Bladder qi, sedates liver yang,
clears heat and dispels damp, expels interior wind, calms shen, calms spasms, tonifies the Liver
yin and blood, expels cold in Liver Meridian and organ.
Bai Hui-Du 20-calms shen, lifts the spirit, tonifies yang, strengthen the ascending function of
spleen, eliminates wind, sedates yang using reducing method for internal wind, promotes
resuscitation. Combine with Si Shen Cong-four intelligents-subdues interior wind, calms shen,
spiritual connection, poor memory and mental issues.

**Acupuncture Points for :Bai He: Heart, Lung and Kidney Yin Deficiency**

Feishu UB13  
Pohu- UB42  
Gaohuangshu-UB 43  
Daling- P7  
Xiabai- Lu4  
Chi Ze-Lu5  
Kong Zui-Lu6  
Lie Que-Lu7  
Jingqu- Lu8  
Jianshi- P5  
Zhaohai- Ki 6  
Anmian Extra 2  
Shenzhu- Du 12  
Shendao- Du 11  
Shen Shu-UB23  
Zhishi- UB52  
Fuliu- Ki 7

**Explanation:** UB- 43 is a tonic point and nourishes Heart and Lung Yin. Shen Shu-UB23
tonifies and nourishes the Kidneys essence, qi and yin, used with Ren4 for essence and UB-52
strengthens the constitution and emotional problems. Strengthens the lower back, nourishes blood, benefits the bones and marrow, resolves damp. Daling- P7 soothes restlessness and eases the chest. Xiabai- Lu4 and Jianshi- P5 decreases restlessness, calms the mind and sedates Po. Chi Ze-Lu5 clears lung heat, regulates lung qi, expels phlegm for the lungs, harmonizes the stomach and large intestine, clears blood stagnation due to heat, benefits the UB and relaxes the sinews. Kong Zui-Lu6 clears heat, expels wind, regulates lung qi and treats acute, excess pain. Lie Que-Lu 7 expels wind, stimulates the descending and dispersing of Lung qi and tonifies lung. Circulates defensive qi and releases the exterior, opens the nose, communicates with LI and treats grief and sadness. Jingqu- Lu8, Zhaohai- Ki 6 and Fuliu- Ki7 nourishes the Lung and Kidney. Shenzhu- Du12 clears lung heat and sedates Po and calms the Shen. Shenzhu- Du 12 with Shendao- Du 11 and Zhishi- UB52 nourishes the heart and calm the Zhi. They are also effective in treating grief, sadness and anxiety.

Use of the five points on the back associated with the Five Spiritual Aspects include: Pohu- UB42 (Po), Shentang- UB44 (Shen), Hunmen- UB47 (Hun), Yish-i UB49 (Yi) and Zhishi- UB52 (Zhi) are effective in treating emotional problems specific to individual pattern identification.

Qi Deficiency

Treatment Principles: tonify Qi and expel any remaining pathogenic factors.

Acupuncture:

- Zusanli-St 36
- Sanyinjiao-Sp 6
- Pishu-UB20
- Weishu-UB21
- Qihai-Ren 6
- Guan Yuan-Ren 4
- Shousanli-Li 10
- Taiyuan-Lu 9
- Shenzhu-Du12
- Feishu-UB13
- Baihui- Du 20

St36, Sp6, UB20 and UB21 tonify Stomach and Spleen, Lu9, Du12, UB13 tonify Lung qi, He5 tonifies Heart Qi, Ren 6 tonifies qi in general, Ren 4 nourishes blood and yin, tonifies Kidney, benefits original qi and strengthen yang, calms shen, roots the ethereal soul (Hun), regulates Si and Sj- (consolidation of constitutional weakness) Li 10 tonifies qi and is used in conjunction with St 36 to reduce muscle ache and fatigue in the limbs and Du 20 raises the yang and lifts the mood.
Conclusion:

Every treatment involves the evaluation of the patient’s status that day according to differential diagnosis. Treatments therefore vary, as the course of the condition changes. These acupuncture points by no means, reflects all of the possible combination of points used. Auricular acupuncture was always incorporated into every treatment session.

In summary, we used an integrated approach to the treatment of Chronic Fatigue Syndrome. When using acupuncture we used different treatment strategies according to the different stages of the disease through differential diagnosis. The basic patterns were treated simultaneously by treating the pattern and the main presenting symptoms. Yet, in the acute phase the treatment focussed more on clearing pathogenic factors. During the chronic phase attention was paid to clearing pathogenic factors while addressing the patterns associated with Chronic Fatigue Syndrome. Eventually, treatment was aimed at tonifying and consolidating underlying deficiencies in an effort to improve, what I believe, is a constitutional weakness that predisposes individuals to Chronic Fatigue and is the cause of this disharmony characterized by remission and relapse. From our experience Acupuncture has played a vital role in reducing pain, controlling symptoms, regulating the hypothalmus-pituitary axis and up-regulation of the nervous system (Kidney yin, Kidney Essence deficiency-brain as the sea of marrow) which consequently improves the physical and mental symptoms that manifest in patients with Chronic Fatigue Syndrome.

Chinese Herbal prescriptions proved to be effective in clearing dampness and heat, warming cold, regulating Qi, nourishing Yin and Blood, harmonizing Yin and Yang, calming shen and strengthening the body’s defensive Qi. Western Botanicals were beneficial in augmenting the effects of Chinese herbal prescription, while the vitamins were used more specifically to strengthen the immune system, resolve vitamin deficiencies due to inadequate and improper diet restore balance to the natural intestinal flora and balance hormones.

The treatment of Chronic Fatigue with the combined therapies outlined, in addition to Cognitive therapy-EMDR, has proven to be quite effective in improving the quality of life and liberating patients from imposed patterns of disharmony. Dietary and lifestyle changes absolutely need to incorporated into any treatment plan to ensure that balance and harmony is maintained. It should be noted that not all cases of CFIDS respond to the extent outlined in this case study, but, there is clear evidence that Traditional Chinese Medicine has the potential to disrupt the process and improve both mental and physical function.
References

Zhongjing, Zhang.  Synopsis Of Prescriptions Of The Golden Chamber, New World Press,
1987.
Unschuld, Paul U.  Nan-Ching.  The Classic of Difficult Issues, University of California Press,
Ltd., 1986.
Jiang D, Franks Paul.  Analysis of 50 Cases of M.E. Treated with Chinese Herbs and
MacPherson H, Blackwell R.  Approaches to Tiredness and Fatigue: Tired Out, Journal of
Jutong, Wu.  Wen Bing Tiao Bian (Systematic Differentiation of Warm Diseases), Qing Dynasty.
Willoughby, E.  Myalgic Encephalomyelitis, New Zealand Medical Journal: 19, 20, January 15,
1989.
Buchwald D, Blair J, Mease P.  Treatment of Chronic Fatigue Syndrome with Acupuncture.  Int.
Ni, Maoshing.  The Yellow Emperor’s Classic of Medicine, 1995.
A.  Post-infective and Chronic Fatigue Syndromes Precipitated by Viral and Non-Viral
Pathogens: Prospective Cohort Study, BMJ 2006;333;575, September 1, 2006.
Junying G, Wenquan H, Tianchi R, Xiufeng M.  Practical Traditional Chinese Medicine and
Junying Geng.  Practical Traditional Chinese Medicine and Pharmacology: Herbal Formulas,
Hong Zhang.  Acupuncture Treatment for 157 Cases of Anxiety Neurosis, Journal of Traditional
Chinese Medicine, March 2003.
Fruehauf Heiner.  Commonly Used Chinese Herb Formulas for the Treatment of Mental
Bensky D, Barolet R.  Chinese Herbal Medicine: Formulas and Strategies.