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Progress of Traditional Chinese Medicine Research on Postoperative Non-obstructive Urinary Retention in Malignant Tumors

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Abstract: Surgery is the main way of early treatment of malignant tumors, but patients will have many adverse reactions and complications after surgery, and urinary retention is one of the common postoperative complications of malignant tumors, which brings great challenges to patients' postoperative recovery. Western medicine has a single treatment for this complication, and there is a risk of postoperative infection. Traditional Chinese medicine (TCM) treatment can be based on the four diagnostics, identification and treatment of patients with personalized treatment, which has been clinically shown to have a better therapeutic effect and no toxic side effects. TCM classifies this disease as "Longbi", and believes that its causes include external factors - wind, cold, dryness, etc, and internal factors dietary disorders, emotional fluctuations, phlegm and drink, it is believed that the causes of illness include external factors such as wind, cold and dryness, and internal factors such as dietary disorders, emotional fluctuations, phlegm and blood stasis. The pathogenesis is analyzed from two dimensions: deficiency and reality. TCM treatments are divided into internal treatments as well as external treatments-acupuncture, moxibustion, tuina, and acupoint plasters. In this article, we reviewed the recent literature at home and abroad to review the etiology, pathogenesis, and treatment of postoperative non-obstructive urinary retention of malignant tumors in TCM, with a view to providing clinical references.

Keywords: Postoperative urinary retention, Malignant tumors, Longbi, TCM, Research.

1. Introduction

Currently malignant tumors have become one of the major diseases endangering human health, and according to the National Cancer Center statistics in 2022, the incidence of malignant tumors in China is estimated to be 4, 824, 700 people, and the number of deaths is estimated to be 2, 574, 200 people [1]. Surgery has an important position in the treatment of malignant tumors and is the first choice for early treatment of tumors, but surgery as a traumatic treatment modality, the probability of postoperative complications is high, and urinary retention is one of the common postoperative complications, for example, the incidence rate is 30% after radical surgery for lung cancer [2], 17.2% after surgery for cervical cancer [3], and 20% after radical surgery for rectal cancer [4]. Urinary retention can be divided into obstructive and non-obstructive, and postoperative malignant tumors mostly belong to the latter. Post-operative non-obstructive urinary retention in malignant tumors PNURMT: also known as postoperative kinetic urinary retention in malignant tumors, refers to the absence of organic lesions of the bladder and urethra in the postoperative period, due to the central and/or peripheral nerve injurycausing bladder forced urinary muscle weakness or urethral sphincter spasm, which leads to the emergence of urinary dysfunction, with the main clinical manifestations of lower abdominal distension and pain refusing to be pressed, inability to empty the bladder after filling or difficulty in emptying, and slow urine flow [5]. PNURMT can lead to severe suprapubic pain, nausea, and vomiting, and it can also increase autonomic nerve activity, which can lead to hypotension, bradycardia, and even cardiac arrest, and in additionIt may also increase the patient's psychological burden, deteriorate the quality of sleep, and even symptoms such as anxiety and depression, which is not conducive to the patient's postoperative recovery

[6]. The most common method of treating PNURMT in Western clinical practice is transcatheter drainage, but repeated insertion and removal of urinary catheters can lead to discomfort symptoms such as pain, trauma, bleeding and an increased risk of urinary tract infection in the urethra [7]. Studies have shown that the chance of urinary tract infection increases by 3% to 7% for each additional day of catheter retention [8]. Traditional Chinese medicine (TCM) can treat patients' postoperative complications according to its unique theoretical system, using holistic concepts evidence-based treatment, so as to achieve personalized and precise treatment. However, there is a lack of systematic theoretical and clinical research on PNURMT in TCM, so only an in-depth and comprehensive understanding of the etiology, pathogenesis, and therapeutic progress of PNURMT in TCM can provide guidance for the further diagnosis and treatment of PNURMT in the clinic.

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2. History of the Disease Name

In traditional Chinese medicine, there is no such disease name as PNURMT, but academician Wang Yongyan, in his book Practical Chinese Medicine, based on the clinical manifestations of Longbi, suggested that it is similar to urinary retention in Western medicine [9]. The name "Longbi" appeared for the first time in the Huangdi Neijing, and the etiology and mechanism of the disease were elaborated in detail. It is clear that the site of retention of urine is in the bladder, and points out that there is a close relationship between it and the kidneys. For example, in the Su Wen, "When the bladder is unfavorable, it is retention of urine, and when it is not, it is drowning". "When the bladder is sick with retention of urine, evil injures the kidneys." "When the bladder is distended, the abdomen is full and the qi is retention of urine."

The Spiritual Pivot also describes, "Realization leads to retention of urine, while emptiness leads to drowning." and other related descriptions. From the Han Dynasty onwards, retention of urine was often referred to as "gonorrhea" and "urinary incontinence" due to avoidance of taboo. After the Sui and Tang dynasties, the study of retention of urine was even more abundant. Chao Yuanfang's "The Origin and Criteria of All Diseases - All the Criteria of Urinary Disease" said, "Urinary obstruction is due to the heat of the bladder and kidneys". He also categorized "inability to urinate" and "difficulty in urinating" as retention of urine. Sun Simiao first proposed the external treatment of retention of urine - onion tube catheterization - in his Thousand Gold Formula. In the Song, Jin and Yuan dynasties, the description of "not being able to pass urine" continued. It was not until the Ming and Qing dynasties that Zhang Jiebin was the first to separate retention of urine from gonorrhea in his Jingyue Quanshu, and he discussed the etiology of retention of urine in detail. In the Qing Dynasty, Li Yucui wrote a special article on retention of urine in his book "Zhenzhi Huixian" [10].

3. Causes

3.1 External Evil Influence

External sensations are mostly related to the evils of dryness, heat, wind and cold. Dryness attacks the lungs, damaging the fluid, making the lungs lose declination, and the water cannot be transferred to the bladder, resulting in retention of urine; heat junction of the lower focal point, blocking the bladder, and the urinary tract is not accessible, resulting in retention of urine; wind is the first to offend the lungs, and the lungs are the source of the water above, so they cannot transfer fluid to the upper orifices, while the upper orifices are closed to the lower orifices; wind is the longest form of disease, and it is easy to clamp other evils to invade the human body, thus resulting in unfavorable urine; the main cold collects and leads, and the coldness is congealed and stagnant, resulting in the depressions of the Yang Qi and closing up of the bladder, affecting the urine and the urine. Cold is the main attraction, cold stagnation, can cause yang qi stagnation, so that the bladder is closed, so that the bladder is unfavorable qi, affecting urinary fluency[11].

3.2 Internal Injuries

The Ling Shu - Five Flavors says: "Acid goes to the tendons, and more food will make people retention of urine", which explains that excessive consumption of acidic food can affect the contraction function of the bladder, leading to retention of urine; emotional factors such as tension, panic, anxiety, etc. can lead to liver qi stagnation, detachment and excretion of the disorder, and malfunction in the operation of the triple jiao water and fluid and the function of qi, resulting in obstruction of the passage of the waterway to form retention of urine [10]. Ancient medical practitioners suggested that "all diseases are caused by phlegm" and phlegm and turbidity follow the rise and fall of qi and are prevalent in all parts of the body, which makes the elevation of qi unfavorable, resulting in retention of urine; exertion and fatigue injure the spleen, and the spleen and stomach qi is weak, and qi is out of balance, resulting in retention of urine; the "Jinjian of Medical Doctrine" pointed out that "stagnant blood flows and seeps into the cells, and it causes urination and drenching closure. The Golden Annals of Medicine states that "Blood stasis flows and seeps into the cells, mostly causing urinary gonorrhea." Blood stasis blocks the normal distribution of qi and fluid, which in turn affects bladder function and leads to retention of urine.

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3.3 Pathogenesis

Zhang Jiebin categorized the pathogenesis of retention of urine into four types. Firstly, the fire evil dries up the spring: the real hot fire evil gathers in the small intestine and bladder and burns the water, making the water dry up and causing the bladder to have no water, thus preventing the bladder from urinating, which is heat closure; secondly, the waterway is blocked: the heat evil attacks and stays in the liver and kidney, making the body produce septic essence or haggard blood to block the waterway, thus leading to the impassability of urine; thirdly, the qi is real and closure: the liver's strong qi is reversed, and the qi is blocked between the small intestine and bladder, thus influencing the function of qi and chemistry of the bladder and leading to the closure of urine; fourthly, qi deficiency and closure. Qi deficiency and closure: "The bladder is the official of the state capital, where fluids are hidden, and qi can come out of the bladder." Yuan-yang failure leads to water-fire incompatibility, qi is unable to transform water and fluid, and water and fluid are retained in the bladder, triggering unfavorable urination [12].

4. Treatment

4.1 Internal Treatment

4.1.1 Types of treatment

The retention of urine in patients with malignant tumors can be divided into the following types: (1) bladder damp-heat type, Guo Jun [13] believes that damp-heat and filth-poisonous evils invade the bladder, resulting in damp-heat, which causes congestion in the lower jiao and unfavorable bladder qi and chemistry. According to traditional Chinese medicine, "the heat should be clear, astringent should be beneficial" principle, when the clearing of dampness and heat, the diuretic, the formula selection of the eight Zhengsan plus subtractions; Peng Xuan et al. [14] found that total flavonoids of plantain extracts can promote contraction of the urethral muscle, diastolic urethral sphincter, and promote the restoration of urinary function of the bladder. (2) Lung heat and congestion type, Li Yusui pointed out in "Certificate of treatment remedies - retention of urine", "a body of qi about the lungs, the lungs clear the gas line, the lungs turbid is congested, so the urine can not be passed." If there is heat in the lungs, it should be used to clear and diarrhea the heat in the lungs and regulate the water channels, so it can be applied by adding or subtracting Qing Lung Drink [15]. Su Di [16] believes that the lung is the source of water above, heat in the upper Jiao, lung heat is the bladder to eliminate the source of its chemical, the evidence mechanism for the congestion of lung heat, the loss of purging, the waterway is not conducive. The treatment is to clear and diarrhea lung heat, fluent waterway, the formula selected clear lung drink plus subtractions; (3) liver stagnation type, Wang Xingkuan [17] believes that the liver rise and the lung drop interdependent, co-regulation of water, so the liver is not

sparing, the lung loss of control, stagnation of the bladder, urination is not favorable. The treatment method is to drain the liver and wood, promote the lung qi, and facilitate urination, and the formula is to add flavor to Siwei San; Guo Hangyong [18] divided 134 cases of postoperative urinary retention into two groups, the control group was given neostigmine, and the observation group used Siwei San with additions and subtractions, and the results showed that the observation group was better than the control group in all the indexes, and Siwei San could effectively alleviate the patients' bad moods, and improve the clinical symptoms. (4) Turbid and stasis obstruction type, Wang Jiouyuan [19] believes that blood stasis and septic semen, blocking the urethra, the watercourse is impassable. The treatment method is to activate blood circulation and dissipate blood stasis, and to facilitate the waterway, the formula is to select the Blood Palace and Blood Stasis Tang with additional subtraction; Yang Yongdong et al [20] investigated the application of the function of tanshinone IIA anti-apoptosis and neuroprotection to neurogenic bladder disorders. It can inhibit spinal cord nerve cell apoptosis, reduce PVR, increase urinary output and favor bladder function recovery. (5) Spleen qi does not rise type, Qing Xie Yinglu said: "urine passes and does not pass, all in the qi and does not melt..... there is due to the sinking of the middle qi and qi deficiency does not melt, replenish the middle qi, ascending and melt". Spleen qi is not, when the ascension of clear and turbid, pass the urine, the formula selected to replenish the qi soup with five Ling San plus subtractions [21]; Zhang Bingxiu [22] believes that the spleen is weak and out of circulation makes the clear gi does not rise, turbid vin does not descend, ai without power, should make the clear yang of the qi to rise, turbid yin qi can be descended, the treatment of ascension of the clear and turbid, qi and water. The formula is to add subtractions to tonify Zhong Yi Qi Tang; Based on purinergic receptor (P2X3), muscarinic cholinergic (M2) receptor study, Wang Yang et al [23] showed that Wu Ling San can promote the release of ATP, acetylcholine in the bladder and up-regulate the expression of P2X3 and M2 receptor, so as to improve the bladder function of the rats and alleviate the symptom of urinary retention. Li Zhengfei et al. [24] showed that based on the PEPK/CHOP pathway, tonifying Zhong Yiqi Tang combined with acupuncture at the pinch point could reduce apoptosis of urethral muscle cells and improve the symptoms of urinary retention by inhibiting the activation of the PEPK-elF2α-ATF4-CHOP pathway. (6) Kidney yang exhaustion type, Zhang Jiebin has said, "Kidney yang insufficiency, true yang down exhaustion, Yuan Hai has no root, and qi deficiency is not transformed and closed." Kidney yang insufficiency, warming and revitalizing the yuan yang, and facilitating urination, proposed Kidney qi pill plus reduction [12]. Su Sha et al. [25] showed that dihuang glycoside A in dihuang can effectively alleviate the symptoms of unfavorable bladder sphincter contraction and diastole and promote urinary discharge. Guo Meiyan et al. [26] divided 46 patients with neurogenic bladder kidney yang deficiency after spinal cord injury into two groups, and the treatment group was given oral kidney qi pill plus reduction combined with Tongdu regulating Shen acupuncture on the basis of the control group. The results showed that the treatment group could significantly improve the clinical symptoms.

4.1.2 Treatment experience of famous doctors

In the treatment of retention of urine, Chen Shiduo advocated the diagnosis and treatment of retention of urine based on the principles of deficiency and reality, and yin and yang. He categorized retention of urine into the following six types: (1) the type of overflowing fire in the heart, and the treatment method is to purify and dissipate the fire in the heart, and the formula is to use the Cooling Heart and Liverivering Water Soup: 1 tael of maitong, 5 qian of poria, 1 qian of lotus heart, and 3 qian of psyllium. (2) bladder fire type, the treatment method of diarrhea heat water, the formula for water-conducting powder: Wang Buliuxing 5 money, Zedo 3 money, atractylodes macrocephala 3 money. (3) the fate of the fire type, the treatment of fire in the water, the formula for eight flavors of Dihuang Tang: 1 two ripened earth, Cornus officinalis 5 money, danpi 5 money, yam 5 money, zedoary 3 money, poria 5 money, cinnamon 2 money, 1 money of epimedium. (4) Yin deficiency to the extreme type, the treatment method is to nourish yin and reduce fire, the proposed pure yin and yang soup: 1 tael of ripened glutinous rice, 3 tael of XuanShen, 2 cinnamon, 3 QianZi of Psyllium. (5) Lung Qi dryness type: to help Jin to generate water, propose Sheng Wei San plus Scutellaria baicalensis. (6) Stomach qi subsidence type: the treatment method is to elevate Qing and lower turbidity, and tonifying Zhong Yi Qi Tang is proposed [27].

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Li Zhongzi proposed seven methods for treating retention of urine in Medical Zong Biyan: (1) Clearing gold and moistening the lungs, Li Zhongzi said, "If you make the lungs dry and unable to produce water, then the gi will not be as good as the state capital." The symptoms of the disease are: unsmooth or dribbling urination, dryness of the throat, thirst and desire to drink, or coughing, thin yellow moss, and number of pulses. Therefore, to clear the gold to moisten the lung treatment, the formula selected Qing Jin San. (2) dry spleen and stomach method, the spleen is not healthy, can not raise the clear and lower the turbid, the symptoms of cold and dampness trapped in the middle Jiao, Li Zhongzi more Cangzhu, Poria, Atractylodes macrocephala, Semixia and other medicines, if the patient is often accompanied by gastric qi sinking, it is with the tonic Zhongyiqi Tang with the. (3) nourish the kidneys to remove heat method, Li Zhongzi said "dry and hot kidney water, bladder is not favorable", the symptoms see urinary inaccessibility or short red burning, or accompanied by dry throat and mouth dryness, five heart hot flashes, tongue red, yellow greasy moss, pulse number. Use Huangbai, Zhimu, Poria, Zeloda, Tongcao to nourish the kidney and remove heat. (4) light seepage water method, Li Zhongzi that water seepage in the large intestine, and even more than diarrhea, the state are thus depleted, it is appropriate to use light seepage and profit sharing products, the formula selected Mutong soup. (5) Bitter cold clearing heat method, if the real heat is embedded in the triple jiao, qi is hindered, urination is impassable, li zhongzi treats the real heat in the triple jiao with bitter cold medicine, the upper jiao is hot, use gardenia, scutellariae; the middle jiao is hot, use huanglian, paeoniae lactiflora; the lower jiao is hot, use cedar, zhimu. (6) regulates qi and induces diuresis, li zhong zi said: "or there is qi stagnation, can't pass and regulate the water channel, and the one who goes down to the bladder, shuns the qi for the urgent." Symptoms: impassable urination, irritability, depression, distension of the ribs and the abdomen, red tongue with yellow fur, stringy pulse. The medicines used

are Citrus aurantium, Mucuna pruriens and Tangerine red to smooth Qi and promote diuresis. (7) To replenish the deficiency and diuresis method, Li Zhongzi said, "If there is a big deficiency, it is not with the warm tonic, then the water can not be traveled." If there is difficulty in urination or poor urination, pallor, depression, coldness, cold limbs and other kidney yang deficiency, you can choose Jin Gui Kidney Qi Pills; if accompanied by abdominal distension and fullness, frequent desire to urinate but difficult to discharge, as well as fatigue, loss of appetite and other symptoms, you can also consider the use of Jin Gui Kidney Qi Pills for treatment. For symptoms of spleen yang deficiency such as shortness of qi and faint voice, tonifying the center and benefiting qi soup can be given [28].

4.2 External Treatment

4.2.1 Acupuncture

"Spiritual Pivot - Epilepsy" in the words "internal closure can not be ulcerated, stab the foot Shaoyin, the sun, and the sacrum with a long needle." Acupuncture can regulate nerve function, strengthen the operation of qi and blood, and promote the recovery of urinary function [29]. Li Jing et al. [30] divided 105 patients with urinary retention after radical surgery for cervical cancer into two groups, and used acupuncture [Zhongji, Zhongiao, Ciliao, Bladder Shu, Yinlingquan, Sanyinjiao and Zhibian] in combination with IC in the combined treatment group of acupuncture and IC group, and the results showed that the combined treatment group was better than the IC group in terms of PVR, maximal urinary flow rate and other indications.

(a) Five meridians matching points, acupuncture meridian treatment of dirty method: (1) "Neijing", said "Yin and Yang secret, the spirit is cured." According to the relationship between the five elements, the Huxiang School of Acupuncture and Push proposes to regulate yin and yang to restore the balance of internal organs by needling the meridians of the organs and the points in the child-mother meridians or grams and insults meridians related to the organs. To warm and tonify kidney yang, for retention of urine due to kidney yang deficiency, the preferred acupuncture point is Yongquan of the kidney meridian, followed by Ren Shu and Bladder Shu of the bladder meridian, Taiyuan of the lung meridian, and Shaochong and Shaofu of the heart meridian. Gongsun and Sanyinjiao points of the spleen meridian. (2) Clearing and draining lung heat and congestion of lung heat are common signs of retention of urine. According to the concept of "five meridians matching together" and "acupuncture meridians treating organs", the first choice is to take Shakuzawa and Jingqu points of this meridian. Yinlingquan and Shangqiu points of the spleen meridian. Quchi and Ermai points of the large intestine meridian. Yin Gu point of the kidney meridian. Heart meridian Shenmen, Neiguan. (3) Raising the clear and lowering the turbid. When the Spleen is deficient and raising the clear and lowering the turbid is out of duty, urination is not smooth. Prefer Gongsun and Taibai points of this meridian. Supplemented by Taiyin Lung meridian Taiyuan and Jingqu points; Yangming Stomach meridian Foot Sanli point; and Syncopated Yin Liver meridian Xingmai point. (4) Diversion of qi channels: Liver loss of detachment, resulting in urinary incontinence is a

solid syndrome. Prefer Taichong and Xingma points of this meridian; Neiguan point of Heart meridian. For the Pericardium Meridian, take Daling Point; for the Gallbladder Meridian, Yangfu, Guangming and Yanglingquan Points; for the Heart Meridian, Shenmen Point; for the Lung Meridian, Shakuzawa and Jingqu Points; for the Sanjiao Meridian, Yangchi Point. (5) Harmonizing the Heart Dysfunction of the heart can also lead to malfunction in the operation and transmission of qi, blood and fluids, and unfavorable urination. Preferred are Shenmen, Neiguan and Daling points of this meridian (Heart and Pericardium meridians); and Xiaohai point of Small Intestine meridian. If the evidence is solid, it should be drained, so Shenmen, Shangqiu, Xingma and Shakuzawa points can be selected. In case of deficiency, the main tonic is the Heart meridian, the Spleen meridian is slightly tonified, and the Kidney meridian is slightly tonified, so Dudu and Yongquan points are selected [31].

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- (b) Jiao head acupuncture: Lu Shaozu believes that acupuncture can run qi and blood, warm the meridians and adjust the function of internal organs to treat diseases, and makes good use of the combination of head acupuncture, body acupuncture, and auricular acupuncture to treat retention of urine, using Jiao head acupuncture (a 3cm straight line in the area parallel to the midline of the head, 1 cm aside from the front and back of the head, and backward to the center line) to systematically regulate the function of internal organs and emphasize the importance of The application of meridian acupoints and specific acupoints (Zhongyi, Qu Bone, Foot Sanli, Sanyinjiao, etc.), together with auricular acupoints (Kidney, Bladder, Spleen, Lung, San Jiao) to stimulate the physiological function of the cerebral cortex and to improve the qigong effect of the bladder [32].
- (c) Yu Yu matching point method: Hu Zhifei et al. [33] divided 70 patients with postoperative urinary retention after mixed hemorrhoids into two groups. The treatment group used "Yu Yu matching point method" acupuncture, take the middle pole straight stab 0.5-1 inch, bladder Yu straight stab 0.8-1.2 inches, after getting the gas to stay in the needle for 30 min. once a day, acupuncture cycle for 7 days. The control group used oral tamsulosin hydrochloride extended-release capsules. The results showed that the efficacy of the treatment group was better than that of the control group in terms of PVR and catheterization rate after the first urination.

4.2.2 Moxibustion

The Secret Essentials of Wai Tai said, "Needles, medicines, soups and dispensations are all inferior, and moxa is the most important." Moxibustion can warm yang, replenish qi and dredge the meridians. The combustion of moxa can improve local hemodynamics, enhance the efficiency of nerve conduction, promote the activation and contraction of the bladder sphincter, and promote urination [34]. Li Cailan et al. [35] divided 80 patients with postoperative urinary retention after anal fistula into two groups, the control group used conventional catheterization, and the observation group adjusted the temperature of moxa therapeutic instrument to 45-50°C, and then placed it on the acupoints of zhongji, guanyuan, and qihai for 30 min. The results of the study showed that the observation group was significantly better than the control group in the time of the initial micturition,

incidence of urinary retention, and catheterization needs and other key indicators.

4.2.3 Tuina

Tuina can improve the central nervous system function of the brain, regulate the contractile function of bladder smooth muscle, and relieve the spasmodic state of urethral sphincter in order to restore the bladder voiding reflex mechanism [36]. Zhou Jianfang et al. [37] divided 90 cases of postpartum urinary retention patients into two groups, the control group used the rehabilitation therapeutic instrument, and the observation group used Chinese medicine acupoints related to acupressure, and the results showed that the observation group was better than the control group in terms of the time of the first time of urination and the volume of urination.

4.2.4 Acupuncture point paste

Zheng Liuyong et al. [38] divided 50 patients with urinary retention after radical surgery for cervical cancer into two groups, the control group used conventional nursing treatment, indwelling catheter, strict aseptic operation, and vulvar care twice a day, and the observation group used Lymphatic Closure Tong Cream acupressure point paste on Guanyuan, Qihai, and Zhongji points. The plaster was made of eight medicines such as Houpu, Citrus aurantium, Clove, Cinnamon, Pepper, Ice tablet, Qingpi, Mint, etc. It could be 0.5g for each point, and it was applied once a day after the operation, and each time the plastering time was 4 h. The results proved that the acupoint plastering of the plastering of the PNURMT could be effective in preventing and treating the PNURMT.

5. Combined Treatment

5.1 Traditional Chinese Medicine + low-frequency Electrical Stimulation

Liu Yukui et al [39]. divided 80 cases of postoperative urinary retention patients with cervical cancer into two groups, the control group was given hot compresses, warm water to wash the perineum, massage of the bladder area, listening to the sound of running water and other routine care, and the observation group was added to the treatment with Yi Kidney Tong Urinary Residue Soup combined with low-frequency electrical stimulation on the basis of this treatment. The results showed that the total effective rate of 95% in the observation group was significantly better than that of 75% in the control group, and the efficacy in urodynamics, catheter retention time, and postoperative infection rate were all better than that of the control group.

5.2 Acupuncture + Moxibustion

Yin Huimin [40] and others divided 80 patients with postoperative urinary retention after anorectal surgery into two groups, the control group was given electroacupuncture, the observation group was given electroacupuncture + warm acupuncture and moxibustion, after 7 days of continuous treatment, the data showed that the observation group had a better performance in the reduction of Chinese medicine syndrome, urodynamics, urinary function, which significantly

improved the quality of life of patients.

6. Summary

PNURMT as a common postoperative complication is closely related to patients' recovery and quality of life. After thousands of years of development of Chinese medicine, there are rich treatment means, Chinese medicine, acupuncture, moxibustion, etc. At the same time, with the current medical clinical diagnosis and treatment and the continuous development of scientific research level, the excavation of the classical theory of Chinese medicine as well as the use of network pharmacology and other means, clarified the material basis and the mechanism of action of the Chinese medicine treatment methods under the guidance of Chinese medicine theory, and verified its efficacy through clinical trials, which provides more effective means for clinical treatment, which is conducive to early prevention and treatment, promoting patients' postoperative recovery and improving their quality of life. However, due to the limited review of the literature and the lack of more clinical data support, it may not be able to fully reflect the real application effect of TCM diagnosis and treatment in a wider range of people, and some of the TCM diagnosis and treatment standards still need to be further improved. In the future, large-sample, multicenter randomized clinical trials can be conducted to provide more reliable evidence to support the prevention and treatment of diseases, to better utilize the advantages of TCM in treating diseases, and to facilitate the provision of precise treatment for patients with malignant tumors to improve their quality of life.

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References

- [1] Zheng Rongshou, Chen Ru, Han Bingfeng, et al. Cancer incidence and mortality in China, 2022 [J]. Chinese Journal of Oncology, 2024, 46(3): 221-231.
- [2] Wu Huan, Dong Cancan, Li Hongdi. Influencing factors of urinary retention in patients undergoing radical surgery for lung cancer assisted by Da Vinci robot [J]. International journal of nursing, 2024, 43(4): 746-750.
- [3] Hilary T, Nikolaos B, Mazen A, et al. A novel approach to postoperative bladder care in women after radical hysterectomy [J]. Archives of gynecology and obstetrics, 2012, 286(4):1007-1010.
- [4] STRICKLAND A R, USMANI M F, CAMACHO J E, et al. Evaluation of risk factors for postoperative urinary retention in elective thoracolumbar spinal fusion patients. [J]. Global spine journal, 2021, 11(3):338-344.
- [5] Liu CF, Chien LW. Moxibustion for Managing Postoperative Urinary Retention After Hemorrhoidectomy and Anorectal Surgeries: A Systematic Review and Meta-Analysis of Randomized Controlled Trials [J]. Perianesth Nurs. 2023; 38(6): 881-891.
- [6] Yang Yang, Fan Xiaohui, Tian Dandan. Clinical efficacy of electroacupuncture combined with brompheniramine in the treatment of postoperative urinary retention and its effect on patients' serum TNF-α and IL-1 [J]. Hubei Journal of Traditional Chinese Medicine, 2021, 43 (11): 40-42.
- [7] Manning M M. Decreasing Emergency Department Visits After Surgery Among Patients at Risk for

- Postoperative Urinary Retention [J]. AORN Journal, 2024, 119 (4): 283-287.
- [8] Lo E, Nicolle E L, Coffin E S, et al. Strategies to Prevent Catheter-Associated Urinary Tract Infections in Acute Care Hospitals: 2014 Update [J]. Infection Control & Hospital Epidemiology, 2014, 35 (2): 464-479.
- [9] Wang YY, Yan SY, eds. Practical Internal Medicine of Chinese Medicine, Second Edition [M]. Shanghai: Shanghai Science and Technology Press, 2009.01: 376-378.
- [10] Wu Mianhua, Shi Yan, eds. Internal medicine of traditional Chinese medicine, 5th edition [M]. Beijing: China Press of Traditional Chinese Medicine, 2021.06. 290-296.
- [11] YIN Yulie. Study on the Ancient Selection and Compounding Laws of Acupuncture and Moxibustion for the Treatment of Longbi [D]. Shandong University of Traditional Chinese Medicine, 2017.
- [12] Huang Pei, Sun Jie, Lai Mengchao. Characteristics of retention of urine by Zhang Jiebin in the diagnosis and treatment of retention of urine [J]. Zhejiang Journal of Traditional Chinese Medicine, 2022, 57 (03): 168-169.
- [13] Gao Qinghe, Zhao Jiayou, Yu Guojin, et al. Clinical experience in treating retention of urine by Guo Jun's four-type approach [J]. Global Traditional Chinese Medicine, 2013, 6 (11): 845-846.
- [14] Peng Xuan, Li Yushan. Impact of Total Flavonoids of Plantago Asiatica L. on Contraction Response of Bladder and Urethral Smooth Muscles in Rats [J]. Journal of Traditional Chinese Medicine, 2015, 56 (21): 1875-1879.
- [15] Peng Shiqiao. A preliminary study on the treatment of Longbi from the lung theory [J]. World Journal of Integrated Traditional and Western Medicine, 2009, 4 (06): 441-442.
- [16] Zheng Qu. Summary of Professor Su Di's experience in treating urinary retention (Longbi) in benign prostatic hyperplasia [D]. Liaoning University of Traditional Chinese Medicine, 2012.
- [17] Luo Youmin, Li Jiangshan, Fan Hongqiao, et al. Experiences of Professor Wang Xingkuan in treating retention of urine from the liver and lung [J]. Journal of Emergency in Traditional Chinese Medicine, 2013, 22 (11): 1897-1898.
- [18] GUO Hangyong, LIANG Jing-hua. Effect observation of modified Sini Powder in treating urinary retention after hemorrhoid surgery [J]. China Practical Medicine, 2023, 18 (14): 144-147.
- [19] YU Chaoyang, AN Priced, DONG Yunbiao, et al. Exploration of the experience of Professor Wang Jiouyuan in treating retention of urine [J]. Asia-Pacific Traditional Medicine, 2014, 10 (17): 61-62.
- [20] Yang Yongdong, Yu Xing, Xiong Yang, et al. Effect of tanshinone IIA on urodynamics in rats with neurogenic bladder after suprasacral cord injury [J]. Chinese Journal of Spine and Spinal Cord, 2016, 26 (11): 1025-1032.
- [21] WAN Yingying, WANG Yaoguang. Professor WANG Yaoguang's experience in treating uroschesis using theory of Sanjiao [J]. Tianjin Journal of Traditional Chinese Medicine, 2019, 36(10): 946-950.
- [22] Wang Huanhuan, Tang W, Zhang WD. Application of tonifying zhong yi qi soup to treat retention of urine in a

case by Zhang Bingxiu [J]. Clinical Journal of Traditional Chinese Medicine, 2012, 24 (08): 708-709.

ISSN: 2006-2745

- [23] WANG Yang, ZHANG Lin, WANG Zhenliang. Exploring the mechanism of action of Wu Ling San on rats with forced urethral muscle unreflexed neurogenic bladder after sacral medullary injury based on P2X3 and M2 receptors [J]. Lishizhen Medicine and Materia Medica Research, 2024, 35 (07): 1615-1619.
- [24] LI Zhengfei, ZHANG Ren, ZHAO Guorui. Exploring the molecular mechanism of Buzhong Yiqi Decoction combined with acupuncture pinch points for treating urinary retention in spinal cord injury based on PEPK/CHOP pathway [J]. Chinese Journal of Gerontology, 2024, 44 (12): 3005-3009.
- [25] SU Sha, YU Tianhe, ZHENG Ruise, et al. Discussion on Shenqi Pill Is Not Only a Tonifying Formula [J]. GUANGMING JOURNAL OF CHINESE MEDICINE, 2020, 35 (23): 3699-3701.
- [26] GUO Meiyan, FAN Qian, LI Yan, et al. Clinical Study of Modified Shenqi Pill Plus Tongdu Tiaoshen Acupuncture for Neurogenic Bladder After Spinal Cord Injury of Kidney-Yang Deficiency Syndrome [J]. Journal of Traditional Chinese Medicine, 2024, 65 (02): 192-197.
- [27] Yan Likun, Wen Yongyi, Li Yajun. Analyzing the academic thought of Chen Shiduo on the treatment of retention of urine from the Dialectical Record [J]. Global Traditional Chinese Medicine, 2022, 15 (11): 2141-2144.
- [28] Shi Rongwei.On the 7 Methods of Treating Urinary Retention by Li Zhongzi [J]. Jilin Journal of Chinese Medicine, 2011, 31 (02): 99-100.
- [29] ZHOU Lixin, SUN Zhongren, YIN Hongna. Research progress of acupuncture on neurogenic bladder recovery after spinal cord injury [J]. Shaanxi Journal of Traditional Chinese Medicine, 2023, 44 (10): 1482-1486.
- [30] Li Jing, Yue Yalin, Wang Fuwen, et al. Clinical observation of acupuncture combined with intermittent catheterization in treatment of urinary retention in middle-aged and elderly patients with cervical cancer after radical operation [J]. Geriatrics & Health Care, 2024, 30 (03): 633-638.
- [31] Liao Ling, Chen Yuying, Li Saiqun, et al. Treatment of retention of urine in Hunan School of Acupuncture and Pushing with the theory of "five meridians" [J]. Liaoning Journal of Traditional Chinese Medicine, 2017, 44 (04): 838-839.
- [32] He Yaoyao, Wu Gaoxin. The experience of professor Lu Shaozu for treating Longbi [J]. Clinical Journal Of Chinese Medicine, 2018, 10 (29): 52-54.
- [33] HU Zhifei, ZHENG Zhou, SHA Jingtao. Clinical Observation of Preventing Urinary Retention after Mixed Hemorrhoids [J/OL]. Journal of Practical Traditional Chinese Internal Medicine, 2025, 3, 1-7.
- [34] TIAN Yiying, MA Jinghan, YIN Mengyu, et al. Research Progress of Moxibustion Therapy with Moxa Strips in the Prevention of Urinary Retention after Mixed Hemorrhoids Surgery [J]. Chinese Medicine Modern Distance Education of China, 2024, 22 (05): 145-147.
- [35] LI Cailan, CAO Yuyin. Application of Moxibustion in Preventing Urinary Retention After Anal Fistula

ISSN: 2006-2745

- Operation [J]. China Health Standard Management, 2022, 13 (22): 165-169.
- [36] PENG Junliang, HU Xiaoling, CHEN Huiqing. Progress of postoperative urinary retention in anal and intestinal diseases treated with external Chinese medicine [J]. GUANGMING JOURNAL OF CHINESE MEDICINE, 2024, 39 (17): 3566-3569.
- [37] ZHOU Jianfang, HU Lixia, LI Haixia. 45 cases of postpartum urinary retention treated by traditional Chinese medicine massage combined with postpartum rehabilitation device [J]. Chinese Journal of Traditional Medical Science and Technology, 2022, 29 (03): 514-515.
- [38] Zheng Liurong, Huang Huirong. Therapeutic effect of Lin Bi Tong sticking in preventing urinary retention after radical surgery for cervical cancer [J]. Fujian Journal of Traditional Chinese Medicine, 2023, 54(01):62-63.
- [39] LIU Yugui, CUI Hongying, LIU Lixia. Efficacy and safety of Yishen Tonglong decoction combined with low frequency electrical stimulation in the treatment of postoperative urinary retention in cervical cancer [J]. Shaanxi Journal of Traditional Chinese Medicine, 2019, 40 (06): 736-739.
- [40] YIN Huimin, LIANG Baojian, ZHOU Ying, et al. Effects of warm acupuncture combined with electroacupuncture on urination function, urodynamic status and prognosis of patients with urinary retention after anorectal surgery [J]. Shaanxi Journal of Traditional Chinese Medicine, 2023, 44 (10): 1465-1468.