

Professor Du's Experience in Treating Chronic Atrophic Gastritis from the Perspective of the Shaoyang Pivot Using Xiaochaihu Decoction

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Abstract: *This article systematically summarizes Professor Du's clinical experience in treating chronic atrophic gastritis (CAG) with modified Xiaochaihu Decoction. Based on the theory of Six-Meridian transmission from the Shanghan Lun, Professor Du posits that CAG patients often present with emotional distress and qi stagnation. Prolonged illness leads to phlegm-stasis binding and the internal generation of toxic evils, resulting in various complications. Professor Du takes the dysfunction of the Shaoyang Pivot as the core pathological element and utilizes Xiaochaihu Decoction as the foundational formula for flexible modification. Tailoring the treatment precisely to the patient's specific manifestations through detailed syndrome differentiation enables the restoration of pivot mechanism function, regulation of qi dynamics, and subsequent resolution of symptoms.*

Keywords: Chronic Atrophic Gastritis, Shaoyang Pivot, Xiaochaihu Decoction, Famous Physician Experience.

1. Chronic Atrophic Gastritis

Chronic Atrophic Gastritis (CAG) is a chronic, progressive inflammatory condition of the gastric mucosa characterized by irreversible loss or atrophy of gastric mucosal glands, often accompanied by intestinal metaplasia or dysplasia of the gastric mucosal epithelium. CAG is considered a precancerous lesion for gastric cancer. The prevalence of CAG in the general Chinese population is estimated to exceed 20% [1]. Western medical treatment for CAG primarily focuses on eradicating “*Helicobacter pylori*” infection, inhibiting gastric acid secretion, protecting the gastric mucosa, and regulating gastric motility. However, effective methods to improve gastric mucosal atrophy or reverse intestinal metaplasia are still lacking, and the condition is prone to recurrence [2, 3].

In Traditional Chinese Medicine (TCM), CAG falls under the category of “Wei Pi” (gastric fullness or stuffiness). TCM theory attributes this disease to various factors including spleen-stomach deficiency, emotional disharmony, dietary irregularities, medication damage, and invasion by external pathogens. These factors lead to dysfunction of the spleen-stomach in receiving, transforming, ascending, and descending, resulting in pathological elements such as qi stagnation, phlegm-dampness, depressed heat, and blood stasis [4]. In recent years, TCM research on CAG has deepened, yielding good clinical efficacy.

Xiaochaihu Decoction was created by Zhang Zhongjing in the Han Dynasty and recorded in the Shanghan Lun. It is a key formula for harmonizing the Shaoyang stage. This formula dredges the Shaoyang Pivot and regulates the ascending and descending of qi dynamics [5], thereby resolving symptoms. The Shaoyang stage is located between the exterior and interior, acting as the pivot of the Three Yang. It governs opening and closing, connecting the exterior and interior, akin to the hinge of a door, facilitating rotation, exit, and entry. The qi dynamics of the body, connecting the exterior and interior

and linking yin and yang, all rely on the functioning of the Shaoyang Pivot. Due to the Shaoyang meridian's unique physiological role in the body, Xiaochaihu Decoction has been widely applied to treat various diseases [6]. According to the sequence of Six-Meridian transmission, Shaoyang precedes Yangming and follows Taiyin. Taiyin and Yangming correspond to the spleen-stomach. Therefore, Xiaochaihu Decoction, using Shaoyang as the pivot, mediates the Middle Jiao (spleen-stomach region) and regulates the qi dynamics of the liver, gallbladder, spleen, and stomach. Based on this understanding, Professor Du employs Xiaochaihu Decoction for CAG treatment with often remarkable results.

Professor Du is a Third Batch Famous TCM Physician of Shaanxi Province and currently the leader of the Key Discipline of TCM Gastroenterology under the Shaanxi Provincial Administration of Traditional Chinese Medicine. With over forty years of clinical and research experience in TCM, Professor Du integrates insights from various schools, systematically studying the essence of the Menghe medical school and the Warm Disease school. His clinical practice is characterized by precise and flexible herb application, achieving significant efficacy, and he has accumulated rich academic experience in the diagnosis and treatment of digestive system diseases. This article focuses on compiling Professor Du's clinical characteristics and diagnostic approach in using the classical formula Xiaochaihu Decoction for treating CAG. The specific experience is summarized as follows:

2. Pivoting Shaoyang, Harmonizing Yang and Regulating Yin, Balancing Deficiency and Excess

According to the Six-Meridian transmission patterns in the Shanghan Lun, Shaoyang is located between Yangming and Taiyin, situated at the half-exterior, half-interior aspect of the body's yin-yang, and is a key link in disease transmission. The Yangming meridian internally connects to the dry-earth fu

organ (stomach) and governs the yang aspect; the Taiyin meridian internally connects to the damp-earth zang organ (spleen) and governs the yin aspect. In disease, yang meridian patterns are often excess, while yin meridian patterns are often deficiency [7]. If healthy qi is sufficient and contends with pathogenic qi to expel it, the disease may progress towards Yangming, manifesting as a Da Chai Hu Tang (Major Bupleurum Decoction) pattern of combined Shaoyang-Yangming disease. If healthy qi is insufficient and the struggle against pathogens is weak, the pathogenic factor easily transmits to Taiyin, transforming into a Chai Hu Gui Zhi Gan Jiang Tang (Bupleurum, Cinnamon Twig, and Dried Ginger Decoction) pattern. The disease location of CAG is the stomach, often manifesting as poor appetite, epigastric and abdominal distension, fatigue, dry mouth, and bitter taste. According to Six-Meridian differentiation, this mostly pertains to Taiyin and Yangming meridian diseases. Based on this, Professor Du often uses Xiaochaihu Decoction as the base formula for flexible modification in treating CAG.

Professor Du provides an in-depth analysis of the formula's composition, believing it not only soothes the gallbladder fu and clears depressed heat but also effectively prevents the inward collapse of pathogens into Taiyin. In the formula:

Chai Hu (Bupleurum root) is the sovereign herb, coursing Shaoyang depression. Huang Qin (Scutellaria root) is the minister herb, clearing gallbladder heat. Ban Xia (Pinellia rhizome) and Sheng Jiang (Fresh Ginger) harmonize the stomach and downbear counterflow. Ren Shen (Ginseng), Zhi Gan Cao (Honey-fried Licorice root), and Da Zao (Jujube), together with Sheng Jiang, serve as assistant and envoy herbs, boosting qi and supplementing the center. Among these, the four herbs Ren Shen, Gan Cao, Da Zao, and Sheng Jiang embody the treatment principle of protecting the spleen-stomach and preventing disease before it occurs ("treating the not-yet diseased"). Professor Du cites the first chapter "Diseases of the Zang-Fu, Meridians, Sequential and Preceding Diseases" from the "Synopsis of the Golden Chamber" (Jin Gui Yao Lue): "In treating the not-yet diseased, seeing liver disease, one knows it will transmit to the spleen; one should first supplement the spleen." The internal transmission from Shaoyang to Taiyin represents the pathological process of wood overacting on earth (liver disease transmitting to spleen). The four herbs Ren Shen, Gan Cao, Da Zao, and Sheng Jiang in Xiaochaihu Decoction precisely embody "supplementing the spleen first," aiming to fortify the spleen-stomach and prevent the inward collapse of pathogens. Thus, Xiaochaihu Decoction not only soothes Shaoyang depressed heat but also boosts qi and supplements the center, blocking the transmission of pathogens to Taiyin. It embodies the preventive thinking of "securing the uninvaded territory" and the concept of "treating the not-yet diseased" [8].

CAG often presents with alternating deficiency and excess, and the clinical manifestations of gallbladder-heat and spleen-cold. With Gallbladder Fu Depressed Heat: Manifestations include bitter taste, dry mouth, acid reflux, poor appetite, constipation, reddish tongue, yellow greasy coating, wiry-large or wiry-rapid pulse. Differentiated as combined Shaoyang-Yangming disease. Use Xiaochaihu Decoction minus Ren Shen, Da Zao, Sheng Jiang to avoid

their sweet-warm nature assisting heat and congesting the Middle Jiao. If accompanied by sweating, hot flushes, flushed face, thirst with desire to drink, indicating heat in the Yangming qi aspect, add Shi Gao (Gypsum) and Sheng Shan Yao (Fresh Dioscorea rhizome) to acrid-cool disperse heat, nourish the stomach, and promote fluid production. For dry mouth, bitter taste with thick yellow greasy coating, indicating Middle Jiao damp-heat, add Yin Chen Hao (Artemisia scoparia) and Long Dan Cao (Gentiana root) to clear and disinhibit damp-heat. For acid reflux and heartburn, add Hai Piao Xiao (Cuttlefish bone) and Duan Wa Leng Zi (Calcined arc shell) to counteract acid and protect the stomach. For constipation due to Yangming large intestine excess heat, add Zhi Shi (Immature Bitter Orange fruit), Fan Xie Ye (Senna leaf), and Da Huang (Rhubarb root) to free the fu and drain heat. Emphasize "stopping when the disease is hit" during treatment to avoid damaging stomach qi with prolonged use of bitter-cold herbs. With Spleen Deficiency Predominant: Manifestations include bitter taste, no dry mouth or dry mouth without desire to drink, cold sensation in the epigastrium, dizziness, poor appetite, fatigue in limbs, loose stools, pale tongue, white coating, wiry-slow or deep-wiry and forceless pulse. Differentiated as combined Shaoyang-Taiyin disease. Use Xiaochaihu Decoction plus Gui Zhi (Cinnamon twig), Gan Jiang (Dried ginger) or Gao Liang Jiang (Galangal rhizome) to warm the center, fortify the spleen, support the healthy qi, and expel pathogens. Simultaneously, replace Ren Shen with Dang Shen (Codonopsis root) 15-30g to fortify the spleen and boost qi, avoiding Ren Shen's overly strong supplementation which can lead to supplementation without movement, transforming into fire and assisting pathogens. After the condition stabilizes, use Si Jun Zi Tang (Four Gentlemen Decoction) for recuperation to strengthen the Middle Jiao, achieving the long-term efficacy of "When the spleen is vigorous, it is not attacked by pathogens in all seasons."

3. Connecting Yin and Yang, Resolving Depression and Harmonizing the Stomach, Calming the Spirit and Aiding Sleep

Besides long-standing, refractory digestive symptoms, CAG patients often experience neurological symptoms such as depression, irritability, anxiety, susceptibility to anger, and sleep disorders [9]. According to the TCM theory of Zi Wu Liu Zhu (Organ Clock), midnight (Zi hour, 23:00-01:00) is the period of peak yin and the initial emergence of yang qi, when the Gallbladder meridian governs. If the patient suffers from emotional frustration, leading to qi stagnation and blockage in the gallbladder fu, preventing the normal ascent of yang qi, which then depresses internally and transforms into heat, it results in yin-yang disharmony and subsequently causes insomnia.

Xiaochaihu Decoction has the effects of coursing the liver and disinhibiting the gallbladder, harmonizing yin and yang. It primarily treats disorders of the Shaoyang gallbladder fu, and Zi hour is precisely the time governed by the Gallbladder meridian. Professor Du frequently employs it to treat CAG patients with insomnia. Such patients often manifest as discomfort in the hypochondrium, emotional frustration, difficulty falling asleep at night, restlessness, vexation, and agitation; pale-red tongue, thin white coating, wiry-thin pulse.

In treatment, Professor Du often uses Xiaochaihu Decoction as the base formula, minus Sheng Jiang and Da Zao to avoid their acid-warm nature assisting heat, leading to yang excess injuring yin and yin failing to constrain yang. As stated in the “Inner Canon” (Nei Jing): “When the stomach is disharmonious, sleep becomes restless”. Ban Xia downbears counterflow and harmonizes the stomach, enabling heart fire to descend to kidney water, so yang enters yin, and yin and yang embrace. Simultaneously, Chai Hu is used in small doses to uplift yang qi, avoiding excessive consumption of liver yin. Ren Shen is added to calm the spirit and regulate the ethereal and corporeal souls (Hun and Po). Furthermore, Professor Du often combines He Huan Hua (Albizia flower) and Shou Wu Teng (Polygonum multiflorum vine, also called Ye Jiao Teng) to enhance the sleep-promoting effect. “Ben Cao Cheng Ya” (A Ride on Simplicity in Materia Medica) records: “He Huan Hua opens during the day (Yang) and closes at night (Yin); it connects when still but does not hinder movement when active. Its opening, closing, stillness, and activity all accord with its nature, thus achieving the correct state of yin and yang, both peaceful and harmonious. If the human heart is like this, what resentment cannot be dispelled?” This indicates He Huan Hua’s role in evenly regulating yin and yang, resolving depression, and calming the spirit. Modern research shows He Huan Hua has anti-anxiety and anti-depressant effects [10]. “Ben Cao Bei Yao” (Essentials of Materia Medica) mentions Ye Jiao Teng: “The vine intertwines at night, hence also called Jiao Teng (Intertwining Vine), possessing the image of yin and yang connecting.” This signifies Ye Jiao Teng’s ability to guide yang into yin. Modern physicians often use Chai Hu Jia Long Gu Mu Li Tang (Bupleurum Plus Dragon Bone and Oyster Shell Decoction) to treat insomnia and psychiatric disorders with Shaoyang Pivot dysfunction as the core pathogenesis [11, 12]. These two herbs promote yin-yang harmony, perfectly matching Xiaochaihu Decoction’s function of connecting yin and yang. Their combined clinical use often yields immediate results.

If the patient has marked vexation and yang qi hyperactivity, combine with Sheng Long Gu (Raw Dragon Bone) and Sheng Mu Li (Raw Oyster Shell) to heavily settle and calm the spirit, and subdue yang into yin, drawing from the wisdom of Chai Hu Jia Long Gu Mu Li Tang. If the tongue tip is red and the pulse at the left cun position is rapid, add a small dose of Huang Lian (Coptis root) to clear the heart and drain heat. If prolonged illness leads to liver blood deficiency, add Suan Zao Ren (Ziziphus seed), Chao Bai Shao (Stir-fried White Peony root), and Gou Qi Zi (Lycium berry) to enrich yin and nourish blood, enabling sufficient yin-blood and the subdual of yang qi, thereby achieving a state of abundant yin securing yang, allowing natural yin-yang interaction.

4. Qi Stagnation in the Middle Jiao, Coursing Qi Dynamics, Orderly Ascending and Descending

CAG patients often present with epigastric distension and discomfort [13], a symptom closely related to its pathological changes. The pathogenesis primarily lies in gastric mucosal atrophy leading to insufficient secretion of digestive enzymes and gastric acid, compounded by weakened gastrointestinal motility, causing food stagnation in the Middle Jiao and

difficulty descending smoothly. Patients often exhibit poor appetite and abdominal distension, worsening after eating. The core pathogenesis is liver-stomach qi stagnation and spleen deficiency failing to transport. TCM holds that “The six fu organs function with free flow; the stomach and epigastrium achieve harmony with descending.” The normal function of this physiological activity relies on the free coursing and regulation of the liver and gallbladder.

In treating such patterns, Professor Du often uses Xiaochaihu Decoction as the base formula, minus Da Zao to avoid its sweet nature causing stagnation and congestion. Regarding specific herb application, Professor Du emphasizes syndrome differentiation:

For reflux and hiccups, add Zi Su Geng (Perilla stem) and Zhi Ke (Bitter Orange peel) to relax the center and downbear qi. For marked epigastric distension after eating, use Sheng Mai Ya (Raw Barley Sprout), Chao Lai Fu Zi (Stir-fried Radish seed), Chao Ji Nei Jin (Stir-fried Chicken Gizzard Membrane) to regulate qi, promote digestion, and resolve food stagnation. For distension with obvious pain, add Qing Pi (Green Tangerine Peel), Yan Hu Suo (Corydalis rhizome), Xu Chang Qing (Cynanchum paniculatum root) to move qi and relieve pain. For prominent belching, add Chen Xiang (Aquilaria wood), Jiang Xiang (Dalbergia wood), Dai Zhe Shi (Hematite) to downbear qi and stop counterflow. For deep-weak pulse at the right guan position and marked fatigue, add Sheng Huang Qi (Raw Astragalus root), Fu Chao Bai Zhu (Bran-fried Atractylodes rhizome), Zhi Shi (Immature Bitter Orange fruit) to supplement qi, uplift yang, fortify the spleen, and assist transportation, promoting gastrointestinal peristalsis. For qi stagnation accompanied by red tongue with scant coating and thin pulse at the left guan position, combine Chuan Lian Zi (Toosendan fruit) and Fo Shou (Finger Citron), and add Mai Dong (Ophiopogon root) to enrich yin, achieving the effect of moving qi without damaging yin. For anxiety and depression due to emotional frustration, use Chao Ji Li (Stir-fried Tribulus fruit), Mei Gui Hua (Rose bud), Yu Jin (Curcuma root) to resolve depression and course the liver. For depression transforming into heat: Heat in the qi aspect: use Bo He (Mint) to acid-cool diffuse and vent. Heat in the blood aspect, with dark red tongue: use Mu Dan Pi (Moutan bark), Chi Shao (Red Peony root) to clear and resolve blood stasis heat.

Professor Du also places special emphasis on examining the sublingual veins. He believes that qi stagnation leads to blood stasis; blood moving promotes qi movement. Harmonious and smooth qi and blood ensure unimpeded circulation. For epigastric and abdominal distension with sublingual vein stasis, utilize Xiaochaihu Decoction to dredge qi dynamics, adding Tao Ren (Peach kernel), Chuan Xiong (Chuanxiong rhizome), Xiang Fu (Cyperus rhizome) to acid-moisten and free the collaterals, achieving the therapeutic effect of “blood moving promotes qi moving.” This approach shows distinct advantages over solely using qi-moving or qi-breaking herbs, achieving the goals of activating blood to move qi, regulating qi without consuming qi, and expelling pathogens without damaging healthy qi. Furthermore, Professor Du uses modified Xiaochaihu Decoction for CAG patients with bile reflux [14]. Bile reflux is often related to gastrointestinal motility disorders, causing liver-gallbladder-stomach qi

stagnation, disordered ascending and descending, and counterflow upwards. The Ban Xia and Sheng Jiang in Xiaochaihu Decoction downbear counterflow and harmonize the stomach, while Chai Hu and Huang Qin course the liver and disinhibit the gallbladder, achieving the effect of disinhibiting the gallbladder, harmonizing the stomach, and downbearing counterflow. Its clinical application yields significant results. These effects are closely related to Xiaochaihu Decoction's action of dredging and regulating qi dynamics.

5. Harmonizing Method to Expel Pathogens, Evenly Regulating Cold and Heat, Protecting Stomach Qi

CAG has a prolonged course. In the middle and late stages, it often presents a complex pathogenesis of mixed deficiency and excess, phlegm-stasis binding, and internal generation of toxic evils. Its pathological features include extensive gastric mucosal atrophy, often accompanied by precancerous lesions like intestinal metaplasia and dysplasia. Faced with such complex conditions, solely employing aggressive methods to expel pathogens risks damaging stomach qi, leading to a sharp decline in food intake and potentially worsening the condition.

Professor Du, based on the theory of the "Harmonizing Method" (He Fa) [15], selects modified Xiaochaihu Decoction for treatment. This formula was originally designed for Shaoyang patterns that cannot endure aggressive methods like sweating, vomiting, or purging. It possesses the functions of harmonizing yin and yang, supporting the healthy qi, and expelling pathogens. Inspired by this, Professor Du applies it to treat CAG with intestinal metaplasia or dysplasia. For Phlegm-Dampness Obstructing Type (slippery pulse, white greasy tongue coating): Use Ban Xia to dry dampness and transform phlegm, combine with Zhe Bei Mu (*Fritillaria thunbergii* bulb) to transform phlegm and dissipate binds. For severe conditions, add Shan Ci Gu (*Cremastra appendiculata* pseudobulb/Pleione pseudobulb) to resolve toxins and dissipate binds. Assist with Chao Yi Yi Ren (Stir-fried Coix seed), Bai Dou Kou (*Amomum cardamomum* fruit), Fu Ling (*Poria*) to dry and leach dampness, cutting off the source of phlegm generation. For Blood Stasis Obstructing Type (purple-dark tongue, thin-choppy pulse): Select herbs based on cold/heat attributes: Heat-biased: Use Dan Shen (*Salvia* root), Mu Dan Pi, Chi Shao to cool blood and transform stasis. Cold-biased: Use E Zhu (*Zedoary* rhizome), Jiu Xiang Chong (*Aspongopus* beetle), Chuan Xiong to warm, free, and transform stasis. For markedly purple-dark tongue and obvious stasis signs, add Shui Zhi (Leech) to break blood and expel stasis, dispelling stasis to generate new blood.

For prolonged disease with phlegm-stasis mutual obstruction and internal generation of toxic evils, Professor Du selects herbs like Teng Li Gen (*Actinidia chinensis* root), Bai Hua She She Cao (*Hedyotis diffusa* herb), Ban Zhi Lian (*Scutellaria barbata* herb) to clear heat and resolve toxins, modifying flexibly based on the severity of heat signs: Severe heat: Add Huang Qin, Pu Gong Ying (*Dandelion* herb) to clear and drain. Severe cold: Add Gui Zhi, Wu Zhu Yu (*Evodia* fruit) to warm and free.

Regarding medication strategy, Professor Du emphasizes a step-by-step approach. Even when using attacking substances, start with small doses and adjust gradually, ensuring efficacy while avoiding damage to healthy qi. He also focuses on evenly regulating cold and heat, preventing excessive cold or heat from damaging healthy qi. Furthermore, he often combines herbs like Chao Mai Ya (Stir-fried Barley Sprout), Chao Gu Ya (Stir-fried Rice Sprout), Zhi Gan Cao (Honey-fried Licorice root) to protect central qi. If healthy qi deficiency is evident, use Huang Jing (*Polygonatum rhizome*) and Shan Yao (*Dioscorea rhizome*) to supplement original essence. This embodies the treatment principle of "not forgetting to support the healthy qi while attacking pathogens." This prudent and meticulous approach to herb application fully demonstrates his solid TCM diagnostic and treatment capabilities.

6. Case Example

Patient: Female, 58 years old. Initial Visit: January 9, 2025. Chief Complaint: Epigastric distension and discomfort for over 2 years. History: Two years prior, due to dietary irregularities, developed epigastric distension and oppression, worse after eating, bitter taste, poor appetite, constipation (bowel movements every 2 days), vexation, excessive dreaming, poor sleep. Gastroscopy indicated Chronic Atrophic Gastritis. Treated multiple times locally with oral Chinese and Western medicine with insignificant effect. Current Presentation: Epigastric distension and discomfort, prominent in the epigastrium and lower abdomen, worse after eating. Accompanied by hypochondriac pain, reduced food intake, bitter taste, dry mouth, fatigue, cold limbs, coughing white phlegm (copious amount), constipation (2 days/bowel movement), poor sleep, vexation, excessive dreaming. Tongue: Red body, yellow greasy coating. Pulse: Wiry-slippery-rapid at left guan position, wiry-thin at right positions.

Western Diagnosis: Chronic Atrophic Gastritis. TCM Diagnosis: Wei Pi (Gastric Fullness); Pattern: Liver Depression Qi Stagnation. Treatment Principle: Course the liver, move qi, transform phlegm, resolve depression, clear heat, calm the spirit. Prescription: Vinegar-fried Bei Chai Hu (*Bupleurum chinense* root) 10g Huang Qin (*Scutellaria* root) 9g Fa Ban Xia (*Pinellia ternata* rhizome, processed) 9g Tai Zi Shen (*Pseudostellaria* root) 30g Vinegar-fried Xiang Fu (*Cyperus* rhizome) 15g Da Fu Pi (*Areca* seed husk) 15g Wu Yao (*Lindera* root) 15g Vinegar-fried Yu Jin (*Curcuma* root) 15g Sheng Mai Ya (Raw Barley Sprout) 15g Chao Bai Shao (Stir-fried White Peony root) 15g Honey-fried Xuan Fu Hua (*Inula* flower) 10g (wrapped for decoction) Fu Chao Bai Zhu (Bran-fried *Atractylodes* rhizome) 15g He Huan Hua (*Albizia* flower) 30g Zhi He Shou Wu (Processed *Polygonum multiflorum* root) 15g Chao Ji Li (Stir-fried *Tribulus* fruit) 15g Sheng Gan Cao (Raw Licorice root) 10g, Dosage: 14 doses. Administration: 1 dose daily, decocted in water, divided into two portions taken warm after breakfast and dinner.

Second Visit (January 22, 2025): After taking the medicine, epigastric distension and discomfort significantly reduced, hypochondriac pain alleviated, food intake increased, phlegm production decreased, bitter taste lessened, sleep improved, vexation and excessive dreaming markedly reduced, hands

and feet turned warm. Dry mouth and constipation still present. Modified prescription: Remove Zhi He Shou Wu, Wu Yao, Da Fu Pi. Add Yu Zhu (Polygonatum odoratum rhizome) 15g, Sheng Shan Yao (Fresh Dioscorea rhizome) 15g, Fu Chao Zhi Ke (Bran-fried Bitter Orange peel) 15g. 14 doses, decoction method same as before.

Follow-up (February 6, 2025): Patient reported epigastric distension and hypochondriac pain resolved, sleep basically normal. Currently undergoing regular follow-ups and continuing TCM conditioning.

Case Analysis: This patient had a history of CAG for over 2 years, protracted and complex. Besides the chief complaint of epigastric distension, symptoms included hypochondriac pain, bitter taste, dry mouth, cold limbs, constipation, poor sleep, vexation, and excessive dreaming, indicating liver-gallbladder depressed heat and qi stagnation. Reduced food intake, fatigue, and coughing white phlegm indicated spleen-stomach deficiency. Professor Du concluded this perfectly matched the pathogenesis of pivot mechanism dysfunction due to Shaoyang depressed heat and Taiyin deficiency cold, i.e., gallbladder-heat and spleen-cold. The wiry-slippery-rapid pulse at the left guan position and wiry-thin pulse at the right guan position reflected liver depression transforming heat transversely overacting on the spleen earth. Gallbladder fu depressed heat and impaired coursing caused bitter taste, dry mouth, and constipation. Heat transforming consuming blood and disturbing the spirit caused vexation and insomnia. Qi stagnation caused hypochondriac and epigastric distension. Qi-blood failing to reach the limbs, losing warmth, caused cold limbs. The spleen earth being overacted upon led to impaired generation and transformation of qi-blood, causing poor appetite and fatigue. Synthesizing all symptoms, modified Xiaochaihu Decoction was used. Vinegar-fried Bei Chai Hu, vinegar-fried Yu Jin, vinegar-fried Xiang Fu course the liver, move qi, resolve depression, activate blood, and relieve pain, alleviating hypochondriac pain. All three herbs vinegar-fried to guide into the Liver meridian and reach the disease location [16].

Wu Yao, Da Fu Pi move qi, relax the center, relieve distension and fullness, directly addressing epigastric distension. Huang Qin, vinegar-fried Yu Jin clear heat, dry dampness, drain fire, resolve toxins, directly clearing liver-gallbladder damp-heat, relieving bitter taste and dry mouth. Fa Ban Xia: Downbears qi, dries dampness, transforms phlegm, downbears counterflow, harmonizes the stomach, stops cough, reduces white phlegm.

Tai Zi Shen, Fu Chao Bai Zhu fortify the spleen, boost qi, enhance spleen-stomach transportation and transformation, improve poor appetite and fatigue. Tai Zi Shen used instead of Ren Shen or Dang Shen to prevent assisting heat and transforming fire. Sheng Mai Ya: Promotes digestion, harmonizes the center, improves appetite and poor intake, also assists liver qi coursing. Chao Bai Shao, He Huan Hua: Soften the liver, nourish blood, resolve depression, calm the spirit, soothe emotions, improve vexation and excessive dreaming. Zhi He Shou Wu: Nourishes blood, calms the spirit; moistens intestines, frees stool. At the second visit, as the condition resolved, qi-moving and distension-relieving herbs were reduced. Yu Zhu was added to enrich yin and drain heat. Fu

Chao Zhi Ke was added to move qi and free the stool. The entire formula: Vinegar Chai Hu, vinegar Xiang Fu, vinegar Yu Jin course the liver and resolve depression, enabling liver qi to flow freely. Da Fu Pi, Wu Yao, Zhi Ke move qi and relax the center, regulating gastrointestinal qi dynamics. Fa Ban Xia, Xuan Fu Hua downbear counterflow and transform phlegm, regulating lung-stomach qi dynamics. Supplemented with heat-clearing, spirit-calming, spleen-fortifying, and blood-nourishing substances. The herbs are tightly combined to achieve the effects of clearing depressed heat, moving qi to relieve fullness, fortifying the spleen, and transforming phlegm.

7. Summary

Xiaochaihu Decoction is a classical formula for treating Shaoyang patterns, with the core pathogenesis of gallbladder heat depressed internally and pivot mechanism dysfunction. The Shaoyang meridian occupies the half-exterior, half-interior position in the body, serving as the pivot of the Three Yang, capable of connecting the exterior and interior, rotating yin and yang. Modifications of the original formula in the Shanghan Lun and adaptations by later physicians are limitless and remarkably effective [17]. Professor Du deeply understands its principles. In treating CAG, using Xiaochaihu Decoction as the base formula with pattern-based modifications consistently yields good results. CAG patients often suffer from emotional distress, dietary irregularities, and other factors leading to spleen-stomach deficiency and qi stagnation, manifesting as epigastric distension, bitter taste, poor appetite, or even accompanied by insomnia and vexation. Professor Du, in clinical practice, emphasizes harmonizing yin and yang, dredging the liver and gallbladder, fortifying the spleen, and harmonizing the stomach. His pattern differentiation is prudent and detailed, integrating the four diagnostic methods meticulously. His herb application is light, flexible, and varied, closely targeting the pathogenesis, often hitting the core. Furthermore, medication always protects spleen-stomach qi, avoiding prolonged use of bitter-cold or attacking substances that damage stomach qi [18]. Thus, pathogens are expelled without harming healthy qi; the branch is treated while the root is secured. This fully embodies the core TCM principle of “treating disease must seek the root.” Professor Du demonstrates the essence of TCM pattern differentiation and treatment, providing valuable experience for CAG management.

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References

- [1] Fang JY, Du YQ, Liu WZ, et al. Guidelines for Diagnosis and Treatment of Chronic Gastritis in China (2022, Shanghai) [J]. *Gastroenterology*, 2023, 28(03): 149-180.
- [2] Wang YY, Wang XM, Chen XY. Clinical Study on Moluodan Combined with Rebamipide and Mosapride

- in Treatment of Chronic Atrophic Gastritis [J]. *Clinical Medicine & Engineering*, 2024, 31(03):329-330.
- [3] Xiang FY, Wang ZY, Liang XL, et al. Clinical Observation of Self-prescribed Qing Wei Wen Pi Tang Combined with Quadruple Therapy in Treating Hp-associated Chronic Atrophic Gastritis with Cold-Heat Complex Pattern [J]. *Chinese Journal of Traditional Medical Science and Technology*, 2024, 31(02): 320-321.
- [4] Zhang SS. Clinical Research on TCM Syndromes of Chronic Gastritis [D] Beijing University of Chinese Medicine, 2005.
- [5] Wan WR. Clinical application of ZHANG Zhong-jing's Xiaochaihu Decoction [J]. *China Journal of Traditional Chinese Medicine and Pharmacy*, 2013, 28(01):124-127.
- [6] Huang SY, Zhang LQ, Chen GT, et al. Research Progress on Modern Clinical Application and Mechanism of Xiaochaihu Decoction [J]. *Chinese Archives of Traditional Chinese Medicine*, 2024, 42(06): 157-161.
- [7] Lu YF, Mei GQ. A Brief Discussion on "Strong is yangming, weak is Taiyin" [J]. *Journal of Zhejiang College of Traditional Chinese Medicine*, 1984, (05):47-50.
- [8] Zheng YP, Duan J, Wang Y. Discussion on the Meaning of "Seeing the Disease of the Liver, Knowing the Transmission of the Liver to the Spleen, and First Consolidating the Spleen" [J]. *Chinese Medicine Modern Distance Education of China*, 2021, 19(01): 104-106.
- [9] Zhao L, Dai EQ. Two Case Examples of Experience Using Chai Hu Jia Long Gu Mu Li Tang to Treat Chronic Atrophic Gastritis Complicated with Insomnia [J]. *Global Traditional Chinese Medicine*, 2018, 11(08): 1305-1306.
- [10] Huang CJ, Fan ML, Du XN, et al. Research progress on pharmacological effects and mechanism of Albizia julibrissin on mental diseases [J]. *Drug Evaluation Research*, 2024, 47(08):1929-1936.
- [11] Xiao HQ, Niu JW. Observation on the Efficacy of Modified Chaihu Jialonggumu Li Decoction in Treating Perimenopausal Insomnia of Liver Qi Stagnation Type [J]. *Journal of Practical Traditional Chinese Medicine*, 2025, 41(01):63-65.
- [12] Gao YH. Research Progress on Chai Hu Jia Long Gu Mu Li Tang in Treating Mental Disorders [J]. *GUANGMING JOURNAL OF CHINESE MEDICINE*, 2024, 39(13):2745-2748.
- [13] Wang P, Bian LQ, Yang Q, et al. Expert Consensus on TCM Diagnosis and Treatment of Chronic Gastritis (2023) [J]. *China Journal of Traditional Chinese Medicine and Pharmacy*, 2023, 38(12):5904-5911.
- [14] Chen ZQ, Xu SS. Clinical Observation of Xiaochaihu Decoction in Treating Bile Reflux Gastritis [J]. *Journal of Practical Traditional Chinese Medicine*, 2020, 36(02):159-160.
- [15] Liu WQ, Wang Y, Wang JQ. Clinical Application of Xiaochaihu Decoction Based on "Harmonization" [J]. *Shandong Journal of Traditional Chinese Medicine*, 2024, 43(11):1289-1293.
- [16] Li Y, Qin YW, Zhang W, et al. Scientific connotation and idea discussion of 'vinegar-processing Chinese medicine leading into liver' theory [J]. *China Journal of Traditional Chinese Medicine and Pharmacy*, 2023, 38(09):4391-4395.
- [17] Jiang F, Li C, Li YL. Explanation of inheriting of Xiaochaihu decoction of generations based on compatibility of Chaihu and Huangqin [J]. *Journal of Shanxi College of Traditional Chinese Medicine*, 2015, 16(03):1-2+5.
- [18] Chen LM, Qu J, Niu R, et al. Study on the Comparison between Diarrhea and Diarrhea Arresting Function of Coptis and Scutellaria Baicalensis [J]. *Chinese Journal of Ethnomedicine and Ethnopharmacy*, 2019, 28(18): 10-11.