

Experience of Traditional Chinese Medicine Master Lei Zhongyi in Treating Heart Diseases

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Abstract: Professor Lei Zhongyi, as a third-generation master of traditional Chinese medicine, has cultivated profound expertise in the field of cardiovascular diseases in traditional Chinese medicine for over sixty years. The core innovation of his academic thought lies in proposing the new viewpoint of “treating chest pain from the perspective of phlegm and blood stasis,” breaking through the limitations of the previous approach of simply treating it from the perspective of blood stasis or phlegm turbidity [1]. In clinical practice, he skillfully uses modified Gualou Xiebai Decoction, Danlou Decoction, and his self-created Yangxin Huoxue Decoction, flexibly adapting them to the diagnosis and treatment of coronary heart disease, heart failure, and various arrhythmias, achieving remarkable therapeutic effect [2]. Simultaneously, his achievements in the modern research and development of the herb Yanghongshan have been outstanding, verifying the scientific validity of the theory of “treating the heart from the kidneys” [3]. This article systematically reviews Professor Lei Zhongyi’s theoretical innovations, diagnostic thinking, application of classic prescriptions, and experience in adjusting prescriptions according to symptoms in the diagnosis and treatment of cardiovascular diseases, aiming to provide important reference for the clinical practice and research of cardiovascular diseases in traditional Chinese medicine.

Keywords: Lei Zhongyi, National Master of Traditional Chinese Medicine, Chest pain, Palpitation, Phlegm and blood stasis, Nourishing Heart and Blood Circulation Decoction, Yang Hong Tan.

1. Introduction

Cardiovascular diseases (mainly including coronary heart disease, hypertension, heart failure, arrhythmia, etc.) are major public health problems that seriously endanger human health. Traditional Chinese medicine has a unique theoretical system and significant clinical efficacy in the prevention and treatment of cardiovascular diseases. Professor Lei Zhongyi is the third National Master of Traditional Chinese Medicine in my country. He has devoted his life to the clinical, teaching and research work of cardiovascular diseases in traditional Chinese medicine [4]. He is well-versed in the classics, has learned from various prescriptions, and is courageous in combining modern medical knowledge to carry out theoretical innovation. He proposed the academic viewpoint of “treating chest pain from the perspective of phlegm and blood stasis”, and on this basis, he created a series of effective prescriptions, forming a distinctive diagnosis and treatment system [5]. This article aims to summarize Professor Lei Zhongyi’s academic thoughts and clinical experience in treating cardiovascular diseases, so as to share with colleagues. Theoretical core is Treating Chest Pain and Heart Pain Based on the Intertwined Theory of Phlegm and Blood Stasis.

2. Theoretical Origin and Innovation

The traditional diagnosis and treatment of chest pain and heart pain (equivalent to coronary heart disease, angina pectoris, myocardial infarction, etc. in modern medicine) are mostly based on the theory of “Yang deficiency and Yin stagnation” (Yang deficiency and cold coagulation) or “Qi stagnation and blood stasis”. Professor Lei Zhongyi observed through extensive clinical practice that patients often experience “dull pain” at the same time - dullness is due to phlegm obstruction, and pain is due to blood stasis. Simply resolving phlegm or removing blood stasis often has unsatisfactory effects [1]. At the same time, he drew on the pathological description of

atherosclerotic plaques in modern medicine as “lipid core (similar to phlegm turbidity) and fibrous cap (involving blood stasis)” and believed that its morphology was highly consistent with the pathological products of “phlegm turbidity and blood stasis” in traditional Chinese medicine [6]. Thus, he clearly proposed that “the intertwined phlegm and blood stasis” is the core pathogenesis of chest pain. The two are mutually causal and intertwined, causing pain due to obstruction of the heart vessels [7]. This theory places phlegm and blood stasis on an equal footing, enriching the connotation of the diagnosis and treatment of chest pain.

3. Clinical Prescription System for Treating Phlegm and Blood Stasis

Based on the theory of phlegm and blood stasis, Professor Lei Zhongyi established a complete system of treatment methods and prescriptions [2, 8].

3.1 Basic Prescription — Modified Gualou Xiebai Decoction and Shuxin Tablets

3.1.1 Composition and Meaning

Gualou peel and Xiebai are the chief herbs, used to relieve chest tightness, eliminate phlegm, and promote yang and dissipate stagnation; Danshen, Chuanxiong, Chishao, and Yujin are the assistant herbs, used to invigorate blood, remove blood stasis, promote qi circulation, and relieve pain; Huangqi invigorates qi and promotes blood circulation, Gegen clears heat and unblocks collaterals, Zexie promotes diuresis and eliminates turbidity, and Gusuibu tonifies the kidneys and strengthens the foundation, all serving as adjuvant herbs. The entire prescription integrates phlegm, invigorates blood, invigorates qi, and unblocks collaterals, achieving the effects of relieving pain, promoting yang, and removing phlegm and blood stasis [9].

3.1.2 Clinical Adaptation

Professor Lei emphasized “prescription-symptom correspondence” and “dynamic adjustment”. For severe qi deficiency, add ginseng and codonopsis; for severe blood stasis, add leech and notoginseng; for severe phlegm turbidity, combine with Er Chen Tang; for yang deficiency and cold coagulation, add aconite and asarum; for yin deficiency, add lily and rehmannia; for concurrent liver yang hyperactivity (hypertension), add gastrodia, uncaria, and abalone shell [10].

3.2 Evolved Formula — Danlou Tang

It is modified from Gualou Xiebai Guizhi Tang (warming and unblocking) and Guanxin No. II formula (blood-activating), specifically designed for the syndrome of “deficiency of the root and excess of the branch, phlegm and blood stasis obstruction”. In clinical practice, it is necessary to differentiate the bias of cold and heat, deficiency and excess: for cold, use Guanxin Suhe Wan or add Piper longum and galangal; for deficiency, use ginseng, astragalus, and deer antler; for excess (poor bowel qi), add immature bitter orange and rhubarb [11].

3.3 Treatment of Heart Failure – “Warming Yang, Activating Blood, and Promoting Diuresis”

Professor Lei believes that the pathogenesis of congestive heart failure in the later stages of cardiovascular disease is mainly “heart and kidney yang deficiency as the root cause, and blood stasis and water retention as the symptoms” [12]. Treatment recommendations include:

3.3.1 Warming Yang and Strengthening Qi to Consolidate the Root Cause

Ginseng, aconite, and American ginseng are the main ingredients. For heart yang deficiency, use Shen Gui Yi Xin Huo Xue Tang and Ting Li Da Zao Xie Fei Tang; for heart and spleen yang deficiency, use Fu Zi Li Zhong Tang combined with Wu Ling San; for deficiency of both heart, spleen, and kidney yang, use Ren Shen Si Ni Tang combined with Zhen Wu Tang [13].

3.3.2 Activating Blood and Removing Stasis to Unblock the Collaterals

Commonly used herbs include Danshen, Chuanxiong, safflower, and red peony. For chronic cases with severe blood stasis, boldly use insects and blood-breaking herbs such as leeches, pangolin scales, and turmeric [14].

3.3.3 Diuresis and swelling reduction to treat the symptoms

Based on Zhenwu Decoction, add Tinglizi, Cheqianzi, Dafupi, Beiwujiapi, etc., to give the pathogenic factors an outlet. The three methods work together to address both the symptoms and the root cause, and save the critical situation [15].

4. Differentiation and Treatment of Palpitations (Arrhythmia)

Professor Lei Zhongyi divides palpitations (arrhythmia) into

two major categories: tachycardia and bradycardia. Each category is further differentiated into deficiency and excess, with a clear and logical structure [16].

4.1 Tachycardia

4.1.1 Excess syndrome (phlegm-fire disturbing the heart)

Symptoms include paroxysmal palpitations, irritability, red tongue with yellow and greasy coating. Treatment focuses on purging fire and eliminating phlegm, clearing the heart and calming the mind. The main prescription is Huanglian Wendan Decoction [17].

4.1.2 Deficiency syndrome (yin deficiency and fire excess)

Symptoms include palpitations, restlessness and insomnia, red tongue with little coating. Treatment focuses on nourishing yin and blood, calming the mind and soothing the nerves, with Tianwang Buxin Dan as the main prescription [18].

4.2 Bradycardia

4.2.1 Excess Syndrome (Phlegm and Fluid Obstruction)

Symptoms include palpitations, chest tightness, aversion to cold, cold limbs, pale tongue with a white and slippery coating. Treatment focuses on clearing yang and purging turbidity, dispelling obstruction and cold, with Zhishi Xiebai Guizhi Tang combined with Mahuang Fuzi Xixin Tang, modified [19].

4.2.2 Deficiency Syndrome (Yang Qi Deficiency)

Symptoms include palpitations, shortness of breath, rapid breathing and sweating, and a deep and weak pulse. Treatment focuses on warming yang and replenishing qi, restoring yang and rescuing from collapse, with Shenfu Tang, decocted quickly, or with a heavy dose of red ginseng and aconite [20].

4.3 Precise Medication for Common Arrhythmias

4.3.1 Ventricular Premature Beats

For deficiency of both Qi and Yin, use Zhigancao Decoction; for deficiency of Qi and Blood, use Guipi Decoction; for Qi stagnation and blood stasis, use Xuefu Zhuyu Decoction; and often combine with drugs that have been proven by modern pharmacology to have antiarrhythmic effects, such as *Sophora flavescens*, *Artemisia capillaris*, lotus seed heart, and pearl powder [21].

4.3.2 Sick Sinus Syndrome

This is a difficult and serious condition, and Professor Lei’s diagnosis and treatment are particularly accurate. For those with insufficient heart Qi and blood stasis, use red ginseng, astragalus, and cinnamon in large doses, supplemented with blood-activating drugs; for those with Yang deficiency and cold coagulation, use ephedra, aconite, and asarum in strong and hot doses to break up Yin coagulation; for those with

deficiency of heart and kidney Yang and internal retention of turbid water, use Zhenwu Decoction combined with blood-activating and diuretic formulas [22].

5. Representative Formula: Creation and Application of Yangxin Huoxue Decoction

Yangxin Huoxue Decoction is a refined formula created by Professor Lei Zhongyi for the core pathogenesis of coronary heart disease and myocardial infarction, namely “deficiency of both qi and yin, and internal obstruction of phlegm and blood stasis.” It embodies his academic thought of “tonifying qi and nourishing yin to treat the root cause, and activating blood and resolving phlegm to treat the symptoms” [23].

5.1 Formula

Ginseng 10g, Ophiopogon japonicus 18g, Schisandra chinensis 10g (Shengmai Powder), Salvia miltiorrhiza 30g, Panax notoginseng powder 3g (taken with water), Citrus reticulata 10g.

5.2 Formula Analysis

Shengmai Powder as the principal ingredient: Tonifies qi and nourishes yin, and strengthens the heart’s fundamental essence. Modern research has confirmed that it can improve myocardial metabolism, resist ischemia, resist shock, and stabilize heart rhythm [24], while salvia miltiorrhiza and Panax notoginseng as assistant ingredients: Activates blood without harming the body’s vital energy, resolves blood stasis and generates new blood, and can significantly improve coronary circulation and myocardial microcirculation, and inhibit platelet aggregation [25]. Tangerine peel plays a role as an adjuvant, regulating qi and resolves phlegm, ensuring that tonification is not stagnant, and eliminating both phlegm and blood stasis [23].

5.3 Modification System Based on Symptoms

The modifications of this formula cover the treatment of acute and critical cardiovascular diseases. For example, in cases of shock, use Du Shen Tang or Shen Fu Tang to restore yang; for acute left heart failure, use ginseng in large doses, and add Tinglizi and Lujiaoshuang to strengthen the heart and promote diuresis; for arrhythmia, add Gan Song, Xu Changqing, and Zishiying to regulate the heart rhythm [26]. This formula has become a widely applicable basic formula for the clinical treatment of stable coronary heart disease.

6. Modernization Research of Traditional Chinese Medicine: Discovery and Application of Yang Hongshan

Professor Lei Zhongyi’s contribution lies not only in clinical practice but also in scientific research. He led a team to conduct systematic research on Yang Hongshan, a folk herbal medicine from Shaanxi, which is a practical example of the theory of “treating the heart from the kidneys” [3].

6.1 Pharmacological Findings

Studies have confirmed that *Hemiberlesia lataniae** is rich in flavonoids, volatile oils, and other components, and has a clear β -receptor blocking effect (lowering blood pressure and slowing heart rate), positive inotropic effect (strengthening the heart), as well as multiple effects such as lipid reduction and antioxidation [27].

6.2 Clinical Significance

This discovery not only provides a new Chinese medicine option for the treatment of hypertension, heart failure, and coronary heart disease, but more importantly, it confirms the theory of “interaction between the heart and kidneys” in *the Neijing* from a modern scientific perspective, opening up a new drug screening pathway and research ideas for treating cardiac diseases (such as bradycardia and heart failure) by warming and tonifying kidney yang [28].

7. Conclusion

In the diagnosis and treatment of cardiac diseases, Professor Lei Zhongyi, a master of traditional Chinese medicine, has constructed a complete academic system that integrates “traditional experience and modern scientific research” with “phlegm and blood stasis” as the core pathogenesis theory, “differentiation of syndromes” as the methodology, “modification of classical prescriptions and self-created prescriptions” as the weapon [1, 3, 23]. His experience is distinctive and his clinical efficacy is conclusive. In particular, the creation of the Yangxin Huoxue Decoction and the modern research on mutton broth fully demonstrate the combination of inheritance and innovation in traditional Chinese medicine. In-depth study and research on Professor Lei Zhongyi’s academic thoughts and clinical experience are of great practical significance and academic value for improving the clinical diagnosis and treatment of cardiovascular diseases in traditional Chinese medicine and promoting the modernization of traditional Chinese medicine.

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