

Professor Du Yumao's Academic Thought and Experience on "Discriminating Evidence from the Basics, and Not Being Restricted to a Single Method"

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Abstract: Professor Du Yumao, a famous Chinese medicine practitioner in Shaanxi Province, is good at treating kidney diseases and difficult and miscellaneous diseases, and has created his own academic idea of "Discriminating Evidence from the Basics, and Not Being Restricted to a Single Method", which has a remarkable effect on the clinical prescription. "Discriminating Evidence from the Basics" emphasises the search for the essence and core of the disease, and grasps the main evidence; "Not Being Restricted to a Single Method" highlights the flexibility and innovation of the diagnosis and treatment method, and flexibly adjusts the diagnosis and treatment strategy according to the change of the condition, and the two complement each other, which is rooted on the basis of the essence, and based on the round law, with excellent curative effect. The two complement each other, and the therapeutic effect is excellent. In this paper, we will systematically comb through a large number of books and literature related to Du Lao and his disciples, excavate and analyse the basis and application of his academic thinking, so as to provide the majority of medical practitioners with insight into the essence of the law and creativity, break through the limitations of traditional thinking, and find more effective diagnostic and therapeutic ideas.

Keywords: Du Yumao; Discriminating Evidence from the Basics, and Not Being Restricted to a Single Method; Clinical experience.

1. Introduction

Professor Du Yumao inherited traditional Chinese medical knowledge from his family in childhood, and received the heritage of classic Chinese medicine. In his early twenties, he traveled to Chang'an to study under Professor Cheng Youren, a renowned expert on Treatise on Fevers. He mastered the core essence of syndrome differentiation recorded in Treatise on Fevers. The academic system established by Zhang Zhongjing, the ancient sage of Chinese medicine, is as lofty as a towering tree that has benefited generations of subsequent physicians, and Professor Du Yumao has also reaped profound benefits from it. Professor Du has been engaged in TCM teaching, scientific research and internal medicine clinical practice for more than 40 years. He has published 12 medical monographs including *A Clinical Guide to Difficult and Complicated Diseases*, *Interpretations of Doubts in Treatise on Fevers. and Clinical Practice of Classic Prescriptions*, and more than 90 academic papers. He was honored as an instructor for the academic experience inheritance program of national renowned veteran traditional Chinese medicine experts, and a renowned veteran traditional Chinese medicine expert of Shaanxi Province. He was also recognized by the Ministry of Health of the People's Republic of China as one of the first batch of national-level veteran traditional Chinese medicine experts specialized in difficult and complicated diseases.

Dr. Du has consistently upheld the core academic tenets of Zhang Zhongjing while integrating traditional Chinese medicine (TCM) with Western medicine. For the diagnosis and treatment of refractory and unusual diseases, he pioneered the theoretical proposition of "Discriminating Evidence from

the Basics, and Not Being Restricted to a Single Method". He demonstrates a remarkable ability to discern subtle and concealed pathogeneses in cases with ambiguous clinical presentations, and particularly excels in implementing flexible therapeutic approaches during syndrome differentiation, with each prescription precisely targeting the therapeutic focus.

In this context [1-3], "unusual diseases" refer to conditions characterized by bizarre, fluctuating clinical manifestations or hidden, undetectable symptoms, most of which are rare diseases that deviate from conventional medical understanding. "Refractory diseases," by contrast, are primarily defined by prolonged disease courses. As elaborated in the chapter "On Pulse, Syndrome, and Combined Treatment of Yin-Yang Exchange and Post-recovery Relapse Due to Overexertion" in Treatise on Fevers, their pathogeneses are often marked by a complex interplay of deficiency and excess, as well as an entanglement of cold and heat. Most such cases present with critical conditions, protracted and intractable courses, posing significant challenges to clinical treatment.

2. "Discriminating Evidence from the Basics, and Not Being Restricted to a Single Method" — The Academic Foundation

Tracing its origin, this academic thought is rooted in the six-meridian syndrome differentiation system established in Treatise on Fevers. In this diagnostic framework, the six meridians serve as the general outline, and the eight principles act as the specific entry points for identifying etiology, disease location, disease nature, development trend, as well as the

involved zang-fu organs and meridians. This approach also emphasizes holistic concept and dynamic observation of the disease.

For a long time, numerous physicians have held that the six-meridian pattern identification is only applicable to exogenous diseases. However, this is not the case. The core of six-meridian pattern identification lies in comprehensively evaluating multiple pathological changes of the human body under disease conditions, including yin-yang imbalance, qi-blood deficiency and excess, dysfunction of zang-fu organs, and impaired circulation of meridians. It summarizes and integrates the common internal laws manifested in the development of all types of diseases, whether exogenous or endogenous, and further extracts a pattern classification system with wide applicability and clinical guidance, which provides an accurate theoretical framework and practical approach for physicians to conduct “pattern identification-based treatment”.

Ke Yunbo of the Qing Dynasty stated that: “The Six Meridians theory established by Zhang Zhongjing lays out the diagnostic and therapeutic principles for all diseases, rather than being exclusively applicable to cold damage disorders. Treatise on Fevers follow the same therapeutic logic, and all fall under the regulation and governance of the Six Meridians [4].” He Xiushan of the Qing Dynasty stated that: “Pathological changes follow no fixed pattern, yet none fall outside the scope of the six meridians. The six meridians expounded in Treatise on Fevers apply to all diseases, not only cold damage disorders [5].” Yu Genchu stated [6]: “Using the Six Meridians to categorize all diseases is a definite general guideline” and “The Six Meridians system established by Zhang Zhongjing encompasses all diseases without exception.” The viewpoints of various physicians have been fully validated through practical applications over the course of history.

3. Interpretation of the Academic Thought that “Discriminating Evidence from the Basics, and Not Being Restricted to a Single Method”

3.1 “Discriminating Evidence from the Basics Discriminating Evidence from the Basics”

As the core tenet of diagnostics in Traditional Chinese Medicine, the principle that “root cause identification lies at the heart of syndrome differentiation” carries profound connotations and great significance. Then, what exactly constitutes this “root cause”? It is stated in Suwen that [7]: Yin and Yang are the Dao of Heaven and Earth, the fundamental framework of all things, the origin of all changes, the root of life and death, and the dwelling place of the spirit. In treating diseases, one must seek their root. A skilled diagnostician, when observing complexion and palpating the pulse, first differentiates between Yin and Yang. The “root” recorded in this text specifically refers to Yin and Yang, the fundamental origin and essential nature of disease. Numerous records on syndrome differentiation in Huangdi Neijing collectively demonstrate the fundamental role the ancients attributed to the principle that syndrome differentiation must

always seek the root, which they established as the core law for disease diagnosis.

Therefore, in essence, the principle that “diagnosis must be directed toward the root of disease” requires that in the process of diagnosis and treatment, when confronted with numerous and complicated clinical manifestations, physicians must carefully and deeply identify the principal syndrome of the disease and analyze its etiology and pathogenesis. The principal syndrome, the core syndrome, refers to the symptoms, tongue manifestations and pulse conditions that can accurately reflect and represent the condition of a syndrome and its pathological mechanism, and represents the core contradiction emerging in the occurrence and development of the disease [2].

In clinical practice, Mr. Du advocated the principle that “therapeutic principles are established based on syndrome differentiation, and prescriptions are formulated in accordance with therapeutic principles”. This principle reaffirms the importance of “seeking the root cause of disease”. He holds that all effective diagnosis and treatment are based on correct syndrome differentiation: only by identifying the root cause of disease, and taking it as the basis for establishing therapeutic principles, formulating prescriptions and selecting herbs, can correct syndrome-specific treatment be delivered. After the primary syndrome is effectively resolved, the subsequent management of remaining secondary syndromes will be relatively straightforward. Conversely, failure to identify the root cause may lead to inappropriate or incorrect treatment, resulting in persistent or rapidly deteriorating conditions.

Take two common clinical cases as examples: For headache caused by insomnia, the root cause of headache lies in insomnia. Improving headache can only be achieved by addressing the patient’s sleep problem first. Persistent treatment targeting headache exclusively only treats the symptoms rather than the root cause, which often leads to persistent or even aggravated conditions. Another example is fluid insufficiency caused by persistent high fever. If the high fever cannot be resolved, no amount of yin-nourishing therapy will deliver any clinical benefit.

In addition, there are numerous complex syndromes in clinical practice, such as “severe excess presenting with asthenic symptoms” (in patients with chronic kidney disease, despite excessive damp - turbidity, they may show fatigue and weakness), “extreme deficiency presenting with excessive symptoms” (in patients with malignant tumors, despite severe deficiency of qi and blood, they may have persistent high fever), “extreme heat generating cold” or “extreme cold generating heat”, “exhaustion of yin with hyperactivity of yang” or “deficiency of yang with excessive yin”. Regarding these complex syndromes, the venerable Dr. Du adheres to the view that “what exists inside must manifest outside” and emphasizes the dialectical application of “ignoring symptoms and following the pulse” and “ignoring the pulse and following the symptoms”. For example, in the syndrome of yin - deficiency and fire - hyperactivity in lupus nephritis, although there are signs of yin - deficiency such as crimson tongue and thready, rapid pulse, if accompanied by symptoms of aversion to cold and cold limbs, one should be vigilant

about the floating of deficient yang. In treatment, the method of nourishing yin and suppressing yang should be adopted instead of simply clearing heat.

Du also pointed out that every disease has its core pathogenesis. Among them, the etiology and pathogenesis of most diseases are relatively simple. However, as a typical representative of clinically difficult and severe diseases, the clinical manifestations of rare and intractable diseases often go beyond the cognitive scope of conventional diseases. Rare and intractable diseases are characterized by abnormal symptoms and protracted courses, and also have prominent features such as atypicality, concealment, and complexity. Specifically, the combination of symptoms goes against the norm, such as the co-existence of cold and heat, and the co-presence of deficiency and excess; the progression of the disease violates the normal rules, such as sudden and drastic changes or insidious progression.

From the perspective of etiology, the pathogenic factors of rare and intractable diseases do not exist in isolation. Instead, they result from the interaction of multiple pathogenic factors, including the six exogenous pathogenic factors, the seven emotions causing internal injuries, improper diet and over-exertion, and abnormal congenital endowment. In terms of pathogenesis, its core characteristic is a state of complex deficiency and excess, where deficiency of healthy qi and excess of pathogenic factors coexist. Moreover, the proportion of deficiency and excess often shows dynamic changes as the disease progresses. In addition, during the evolution of pathogenesis, complex situations such as the transfer of the disease location, the transformation of the disease nature, and the sudden change of the disease condition often occur due to the interaction of internal and external factors, forming a complex pathogenesis characterized by “triggered by the addition of factors” and “combined to form a disease”.

Therefore, in clinical syndrome differentiation, medical practitioners should give full play to the advantages of the combination of disease diagnosis and syndrome differentiation in traditional Chinese medicine (TCM) and Western medicine. They should adopt the method of integrating the four diagnostic methods of TCM with modern medical examinations and tests. Centering around the patient's chief complaints and current medical history, they should conduct a meticulous and discerning syndrome differentiation of the patient's existing clinical manifestations to eliminate the false and retain the true, so as to more accurately and rapidly identify the main syndrome of the disease and provide a solid basis for subsequent treatment.

3.2 “Diagnostic and treatment thinking is flexible and not confined to fixed patterns.”

The “comprehensive diagnostic thinking” is in line with the content described in Suwen: “A skilled diagnostician examines the complexion and palpates the pulse, first distinguishing between yin and yang; examines the clarity and turbidity to know the parts; observes the breathing and listens to the sounds to know the illness; observes the scales and rules, to know the main disease; palpates the size and observes the floating, sinking, smoothness and roughness to know the

origin of the disease. By treating without going beyond the limits, and by diagnosing without missing anything, the diagnosis will be accurate [7].” In addition, there is also a record in the I Ching: “Continuous movement” and “circulation and rotation among the heavens, the earth, and the four directions [8].” It reflects the understanding of the essence of changes in all things in the world in the Book of Changes. Meanwhile, in philosophy, this idea is manifested as the fact that all things are in a state of motion and change. Motion is absolute, while rest is relative, and all things are in a constant process of development and change. Du believes that one of the keys to treating intractable and rare diseases lies in having a flexible, comprehensive, and harmonious dynamic syndrome - differentiation thinking, especially considering that most intractable and rare diseases present with chaotic and ever-changing symptoms. When conducting syndrome differentiation, doctors should not be confined to fixed patterns or conventional thinking modes. Instead, they should comprehensively and flexibly take into account various factors of the patient, such as symptoms, physical signs, constitution, emotions, environment, whether there has been misdiagnosis or improper treatment, and whether there have been any changes in symptoms during the development of the disease. They should not be limited to single symptoms or the external manifestations of the disease. Meanwhile, dynamic syndrome differentiation should be carried out after each course of medication and when the patient experiences discomfort during the medication process. This is because the development and change of diseases are dynamic and stage-specific, and the pathogenesis is likely to change during the treatment process. This approach can prevent the situation of misusing prescriptions and causing improper treatment.

The “flexible diagnosis and treatment approach” resonates with the essence of syndrome differentiation in Treatise on Fevers, which states, “Observe the pulse and symptoms, understand what has gone wrong, and treat accordingly. And in Suwen: “When the disease first begins, it can be treated by simply making a puncture; when it becomes severe, it can be treated by waiting for it to subside. Therefore, treat it lightly and promote it... Analyze its yin and yang, distinguish between softness and hardness, treat yang diseases with yin, and treat yin diseases with yang. Determine its blood and qi, and let each remain in its own place. If the blood is solid, it should be resolved; if the qi is weak, it should be pulled [7].” This reflects the academic thought of traditional Chinese medicine that “the treatment method follows the condition, and the prescription follows the treatment method.”

The core significance of this ideology lies in the following: When treating intractable and rare diseases, one should not be confined to a single fixed treatment method or classical prescription. Instead, one should, based on the specific conditions of the patient, flexibly select one or more treatment means (such as decoctions, pills, powders, ointments, acupuncture, cupping, etc.) and flexibly modify classical prescriptions according to the “timing, location, and individual patient”. Meanwhile, the treatment plan should be adjusted flexibly in response to the changes in the patient's condition.

In addition, Professor Du believes that when applying the academic ideology of “flexible treatment” to clinical

diagnosis and treatment, doctors' diagnosis and treatment methods should be flexible. They should possess the clinical diagnosis and treatment thinking of "seeking the root cause in syndrome differentiation" and "being adaptable". Moreover, they need to be knowledgeable, able to understand the classical and proven prescriptions in ancient medical books, comprehend the principles and meanings, internalize the predecessors' experiences, and reach the state of integrating and applying them freely. Only then can they "not be rigidly attached to the original prescriptions and not have a fixed mindset" in clinical diagnosis and treatment, and truly achieve flexible modification of prescriptions.

Furthermore, doctors should combine traditional Chinese medicine (TCM) and Western medicine diagnosis and treatment methods for syndrome - based treatment. They can use modern medical means to visualize the clinical indicators of diseases, which can assist TCM diagnosis and treatment and scientifically visualize the treatment effects.

The academic ideology of "Discriminating Evidence from the Basics, and Not Being Restricted to a Single Method" provides important methodological inspiration for modern TCM in the diagnosis and treatment of intractable and rare diseases. Its theoretical value has been well - verified in Professor Du Yumao's medical career spanning more than fifty years.

4. Clinical Application of This Academic Thought

Professor Du Yumao devoted his entire life to clinical work. He made significant contributions in both the field of traditional Chinese medicine theory and clinical practice. He cured countless patients. His academic philosophy of "Discriminating Evidence from the Basics, and Not Being Restricted to a Single Method" was unique and had a profound influence on many disciples. The disciples adhered to this philosophy and applied it to clinical diagnosis and treatment, achieving remarkable results. As the favorite disciple of Professor Du Yumao, Professors Zhang Xiqu, Liu Yuning, and Dong Zhenghua have been diligently studying and working hard for many years. They deeply inherited the essence of this academic thought and integrated it into their teaching, research, and clinical practice. In the field of traditional Chinese medicine, they continue to write new chapters of this academic thought.

Professor Zhang Xikui is well - aware of the significance of inheriting the academic thoughts and clinical experience of renowned traditional Chinese medicine (TCM) experts for the development of the TCM cause. To deeply inherit the academic essence of Professor Du Yumao, he personally engaged in the collection and collation of medical records regarding Professor Du's application of the method of nourishing yin and tonifying the kidney in treating chronic nephritis. Through a detailed review and data analysis of 64 medical records of patients with chronic nephritis, the results showed that the total effective rate of the clinical treatment using the method of nourishing yin and tonifying the kidney reached 89%, which fully demonstrated the remarkable efficacy of this treatment method [9].

Professor Zhang has extensively and profoundly integrated this ideology into the clinical diagnosis and treatment of various diseases. In the field of kidney diseases, for common and complex conditions such as renal proteinuria, renal edema, and renal hematuria, Professor Zhang applies the academic concepts of the late Professor Du and combines them with rich clinical experience to formulate personalized treatment plans for patients, achieving favorable therapeutic outcomes [10]; It is worth noting that during the COVID-19 pandemic, Professor Zhang boldly explored and applied the academic ideas of Doctor Du to the treatment of COVID-19, contributing traditional Chinese medicine wisdom to the fight against the epidemic [8]; moreover, Professor Zhang extended the reach of his inheritance to the department of otolaryngology, treating the difficult condition of tinnitus from a unique perspective of qi movement and balance, relieving the suffering of many patients with tinnitus [11]; In addition, Zhang also attaches great importance to the flexible application and innovative development of classical prescriptions from *Treatise on Fevers*. Based on the specific conditions and physical characteristics of the patients, he ingeniously utilized classic formulas such as Xiao Chaihu Decoction [12] and Jiawei Xiaoyao San, achieving excellent clinical results and providing new ideas and methods for the clinical application of the formulas [13].

Professor Liu Yuning has also demonstrated remarkable spirit of inheritance and innovation in the field of nephrology. In the process of inheriting the academic ideas of the late Professor Du, he has skillfully and thoroughly integrated them into the clinical practice of kidney diseases. His clinical diagnosis and treatment cover a wide range of complex and challenging kidney diseases, including chronic kidney disease, chronic renal failure, immune - related kidney diseases, membranous nephropathy caused by haze, idiopathic membranous nephropathy, etc [14-22].

Moreover, through long - term and unremitting exploration and systematic summarization, Professor Liu has developed comprehensive and targeted diagnosis and treatment plans for different types of kidney diseases. These plans are not only logically rigorous at the theoretical level but also demonstrate remarkable effectiveness in practical applications. In addition, to further verify the clinical efficacy of these plans, Professor Liu has conducted a number of relevant experimental studies. By applying modern scientific methods and technological means, he has delved into the mechanism of action and the principle of efficacy of his diagnosis and treatment plans, providing solid and reliable scientific evidence for the clinical efficacy from multiple levels such as the cellular and molecular levels [23-26].

Professor Dong Zhenghua is adept at using the six - meridian syndrome differentiation and treatment system originally created by Elder Du to treat kidney diseases. On the basis of this system, he has conducted in - depth research and flexible application, thus forming his own unique style of diagnosing and treating kidney diseases. Meanwhile, Professor Dong has grasped that the core idea of Elder Du's six - meridian syndrome differentiation and treatment system lies in exploring the root cause of the disease mechanism, which is highly consistent and in the same line with the academic concept of "seeking the root cause in syndrome

differentiation". In the process of clinical diagnosis and treatment, Professor Dong always adheres to this concept, focusing on starting from the essence of the disease, comprehensively and meticulously analyzing the patient's condition, and striving to accurately grasp the core characteristics and development laws of the disease. At the same time, he skillfully combines the method of dynamic syndrome differentiation and flexibly applies classical prescriptions according to the changes in the patient's condition.

Professor Dong is well aware that diseases are in a dynamic development process and present different syndromes at different stages. Therefore, he can modify classical prescriptions according to the specific changes in the patient's condition, following the principle of "flexible and adaptable treatment without being confined to one single approach". This not only reflects Professor Dong's profound foundation in traditional Chinese medicine theory but also demonstrates his rich clinical experience [27-29].

During his extensive clinical practice, Professor Dong has achieved remarkable clinical outcomes in treating kidney diseases using the Six - Meridian Differentiation and Treatment System. Under his meticulous treatment, the conditions of numerous patients have been effectively controlled, their physical conditions significantly improved, and their quality of life greatly enhanced. Professor Dong's academic inheritance and clinical practice not only provide valuable experience and methods for the diagnosis and treatment of kidney diseases in traditional Chinese medicine but also make positive contributions to the inheritance, innovation, and development of traditional Chinese medicine theory. As a result, the Six - Meridian Differentiation and Treatment System of the late Professor Du has been rejuvenated in the field of kidney disease treatment.

Meanwhile, Professor Huang Huang has been practicing medicine for over 50 years. He enjoys reading ancient books and is dedicated to researching ancient formulas and their corresponding symptoms. He believes that Zhongjing's "the mutual correspondence between ancient formulas and symptoms" thinking is the core of traditional Chinese medicine diagnosis and treatment. Based on this, he has independently created the academic thought of "formulas - diseases - people" and a unique diagnosis and treatment model [30]. This academic ideology exhibits a high degree of consistency with the academic ideology of the late Dr. Du, which emphasizes "seeking the root cause when differentiating diseases and adopting flexible and adaptable treatment methods without being confined to one single approach." Both hold the view that in clinical diagnosis and treatment, it is essential to first conduct a detailed differentiation of diseases and syndromes based on the patient's symptoms, identify the core pathogenesis, and then select appropriate prescriptions according to the syndromes and make adjustments according to the symptoms, so as to provide individualized and flexible treatment for patients.

However, this medical treatment method, its remarkable efficacy and significant benefits, did not originate in modern times. If we trace its origin, since ancient times, many renowned and accomplished physicians have highly praised

and expounded upon it. And in the historical records, there are also numerous accounts of its mention. For example, Zhang Zhongjing recorded in *Treatise on Fevers*: "medicines can be taken when the diseases correspond to the prescriptions [31]." Zhu Hong of the Song Dynasty stated [32]: "What is meant by prescriptions and medical conditions is that medical conditions are presented before the prescriptions, which implies that a certain prescription is used to treat a specific disease." It is necessary to match the illness with the appropriate medicine and ensure the medicine suits the illness before taking it. Xu Lingtai of the Qing Dynasty stated, "The diseases treatable by prescriptions are fixed, yet diseases are constantly changing in real - time. By grasping the symptoms that a prescription can surely treat, one can flexibly apply the prescription according to the changes in diseases and achieve favorable therapeutic outcomes [33]." "One can perceive the underlying causes of diseases and meticulously observe subtle symptomatic changes. Therefore, the prescriptions formulated are bound to be effective, just as striking a drum with a drumstick always produces an immediate sound [34]." Yu Jiayan stated, "As diseases manifest in myriad forms, medications must also be adapted accordingly [35]". Ke Yunbo highly commended and comprehensively expounded Zhang Zhongjing's way of thinking that "classical prescriptions correspond to specific diseases and symptoms [4]".

5. Summary and Outlook

Professor Du Yumao inherited the ancient learning of Zhang Zhongjing and combined his years of clinical experience to create the academic ideology of "Discriminating Evidence from the Basics, and Not Being Restricted to a Single Method". This theory encompasses the essence of traditional Chinese medicine (TCM) in disease differentiation, syndrome differentiation, treatment according to syndrome changes, and flexible application of prescriptions, the characteristics of TCM treatment based on the "three - factor adaptation" principle, as well as the integrated traditional Chinese and Western medicine treatment methods of "taking TCM as the mainstay and using Western medicine as an auxiliary" and "adopting multiple approaches simultaneously". This article lacks in - depth exploration of Professor Du Yumao's academic ideology. It is expected that more colleagues will thoroughly master its principles, conduct flexible diagnosis and treatment, promote the academic research of Professor Du, and better serve clinical practice.

Fund Project

Shaanxi Provincial Administration of Traditional Chinese Medicine Research Project (2021-PY-006).

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