

Exploration on Syndrome Differentiation and Treatment of Hyperplasia of Mammary Glands Based on Yang-Strengthening Theory in Neijing

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Abstract: Objective: To explore the theoretical connotation and clinical application value of treating hyperplasia of mammary glands from the yang-strengthening thought of Neijing. Methods: Centered on the classic proposition of “yang transforms qi, yin forms shape” in Neijing, combining the academic viewpoints of ancient physicians and Professor Yin Kejing’s clinical experience, this paper analyzed the pathogenesis of Ru Pi (hyperplasia of mammary glands). Two clinical cases were reported to illustrate syndrome-differentiation essentials, herbal compatibility and therapeutic thinking. Results: The essential pathogenesis of Ru Pi lies in yang deficiency leading to yin coagulation and failure of yang to transform qi. The therapeutic methods of warming yang, unblocking yang and reinforcing yang to promote qi-transformation can effectively relieve breast distending pain, shrink nodules and improve accompanying symptoms. Satisfactory curative effects were obtained in the two reported cases. Conclusion: The therapy of reinforcing yang to transform qi is effective for hyperplasia of mammary glands. It can provide theoretical and practical reference for TCM management of Ru Pi and other diseases caused by yin-pathogen condensation.

Keywords: Yang transforms qi and yin forms shape, Ru Pi, Hyperplasia of mammary glands, Reinforcing yang to transform qi, Warming yang for resolving masses, Syndrome differentiation and treatment.

1. Introduction

Suwen-Shenqi Tongtian Lun puts forward that “Yang-qi is comparable to the sun in heaven; once it loses its proper position, human longevity will be impaired” [1], which establishes yang-qi as the root of human life activities. Another classic statement “yang transforms qi, yin forms shape” from *Suwen-Yinyang Yingxiang Dalun* summarizes the physiological and pathological laws of human yin-yang qi movement [1], and provides a classical guideline for syndrome differentiation and treatment of diseases with tangible lumps. Hyperplasia of mammary glands, belonging to *Ru Pi* in traditional Chinese medicine (TCM) [2,3], is a common benign breast disorder in women, characterized by breast lumps, periodic distending pain and recurrent attacks. Modern medicine mainly adopts symptomatic treatment with relatively high recurrence rate. Conventional TCM treatment mostly focuses on soothing liver-qi and softening hard masses [4], which can relieve clinical symptoms but can hardly eliminate lumps fundamentally.

Famous physicians including Zhang Zhongjing, Li Dongyuan and Zhang Jingyue emphasized the dominant role of yang-qi in qi-transformation and anti-pathogen process [5,6]. Tangible pathological lesions are mostly induced by yang-qi insufficiency, impaired warming-transportation and accumulation of yin pathogens. The hyperplastic lumps of breast result from yang deficiency or yang stagnation. Due to declined qi-transformation function, dampness, phlegm and blood stasis cannot be metabolized and gradually aggregate into breast masses, which can be concluded as “failing yang-qi transformation gives rise to *Ru Pi* caused by yin coagulation” [7]. Based on classical theories and clinical practice, this paper discusses the diagnostic and therapeutic ideas of reinforcing yang to transform qi for hyperplasia of mammary glands, with clinical cases attached for reference.

2. Internal Correlation Between the Theory of “Yang Transforms Qi, Yin Forms Shape” and Pathogenesis of *Ru Pi*

2.1 Connotation of the Classic Theory

“Yang transforms qi” means yang-qi possesses warming, propelling, steaming and dissipating functions. It promotes the distribution and metabolism of qi, blood, body fluid and essence, resolves pathological products, and maintains unobstructed meridians and visceral harmony. “Yin forms shape” reflects the stagnant and aggregating property of yin-cold. When yang-qi is deficient or constrained, its warming and transforming capacity decreases and fails to restrict yin pathogens. Pathological products such as dampness, phlegm and blood stasis transform from invisible functional disturbance into tangible lesions, inducing hyperplasia, nodules, cysts, fibroids and other disorders by blocking meridians [8]. Vigorous yang-qi disperses accumulated yin pathogens; deficient yang-qi results in yin-condensed tangible lesions, which forms the core pathogenesis of *Ru Pi*.

2.2 Pathogenetic Evolution of *Ru Pi* Induced by Yang Deficiency and Yin Coagulation

Breast tissues are traversed by the Yangming Stomach Meridian and connect with kidney; nipples pertain to the Jueyin Liver Meridian. The Chong and Ren meridians govern breast blood circulation. Liver dispersion-discharge, spleen transportation-transformation, kidney warming and adequate Chong-Ren meridians all depend on the propulsion of yang-qi.

Young- and middle-aged women often suffer from emotional depression, over-fatigue and excessive intake of cold food,

which trigger liver-qi stagnation and constrained triple-jiao yang-qi. Damaged spleen-yang leads to internal generation of phlegm-dampness; phlegm intermingles with blood stasis and obstructs breast collaterals. For perimenopausal women, declined heavenly-gui causes kidney-yang deficiency and insufficient life-gate fire. Chong-Ren meridians fall into cold-debility; internal yin-cold accumulates and condenses in breast collaterals to produce lumps. Although the two patterns differ in main disease locations, they share the root pathogenesis of yang-qi insufficiency and dysfunctional qi-transformation, with qi-stagnation, phlegm-coagulation and blood-stasis as secondary manifestations, conforming to the pathological rule of inadequate yang-qi transformation causing yin-condensed lesions.

3. Representative Clinical Cases

Case 1

A 38-year-old female patient first visited hospital in March 2024. Chief complaint: Bilateral breast distending pain accompanied with nodules for more than half a year, aggravated in the recent month.

Present illness: The patient engaged in long-term desk-bound work, suffered from emotional distress and frequent staying-up late, and was fond of cold beverages. Half a year ago, she presented pre-menstrual breast distending pain which could relieve after menstruation without standardized treatment. In the recent month, distending pain occurred throughout menstrual cycle. Scattered granular soft and mobile nodules were palpable in bilateral breasts. Associated symptoms contained cold limbs, lassitude, poor appetite, loose stool, chest-hypochondrium stuffiness and frequent sighing. Her menstruation was delayed with dark menses mixed with blood clots. Breast ultrasound showed bilateral mammary hyperplasia and multiple hypoechoic nodules (BI-RADS category 2). Tongue manifestation: pale-dark tongue with white-greasy coating; pulse: thin, string-like and slow.

TCM diagnosis: *Ru Pi* (syndrome of constrained liver-yang, insufficient spleen-yang and intermingled phlegm-stasis). Therapeutic methods: Soothe liver and unblock yang, warm spleen and tonify qi, resolve phlegm and dissipate blood stasis, soften hardness and disperse masses. Modified Chaihu Guizhi Ganjiang Decoction from *Shang-Han Lun*: *Radix Bupleuri* 9 g, *Ramulus Cinnamomi* 12 g, *Rhizoma Zingiberis* 6 g, *Radix Astragali* 15 g, *Rhizoma Atractylodis Macrocephalae* 15 g, *Poria Cocos* 15 g, *Radix Angelicae Sinensis* 12 g, *Rhizoma Chuanxiong* 9 g, *Bulbus Fritillariae Thunbergii* 15 g, *Concha Ostreae* 30 g (decocted first), *Radix Curcumae* 9 g, *Radix Rhapontici* 9 g, *Semen Brassicae* 9 g, *Pericarpium Citri Reticulatae Viride* 12 g.

Fifteen doses, one dose per day, decocted with water to obtain 400 mL decoction, orally taken warmly in morning and evening. Advice: avoid cold food, regulate emotion and maintain regular work-rest rhythm.

Second consultation: Breast distending pain was obviously alleviated; nodules shrank and softened. Cold intolerance and fatigue disappeared, stool turned normal and

chest-hypochondrium stuffiness vanished. Tongue coating became thin-white, pulse was string-like and moderate. *Rhizoma Zingiberis* was removed from prescription; *Epimedium Folium* 9 g and *Semen Cuscutae* 12 g were added to warm kidney-yang and tonify both congenital and acquired foundations. Another fifteen doses were prescribed.

Third consultation: Breast distending pain disappeared, nodules shrank significantly. Menstrual cycle and menses color returned to normal with improved physical condition. The dosage of *Concha Ostreae* was reduced to 15 g, *Rhizoma Dioscoreae Preparata* 15 g was supplemented to tonify spleen and consolidate yang-qi for recovery, ten doses were administered. Re-examination breast ultrasound suggested substantial resolution of hyperplastic nodules. Another ten doses were given to consolidate curative effect.

Case 2

A 48-year-old perimenopausal female patient visited hospital in June 2024. Chief complaint: Dull pain of bilateral breast masses for one year, aggravated by cold exposure and over-exertion. Present illness: The patient had menstrual disturbance for two years with variable cycle and scanty menses. She presented cold aversion, soreness-cold lumbus and knees, cold lower abdomen, frequent nocturia and cold extremities. Sheet-like hyperplastic masses could be touched in bilateral breasts with persistent dull pain, which aggravated after cold-food intake and fatigue, and alleviated by warmth. Breast ultrasound indicated bilateral cystic mammary hyperplasia. Tongue: pale-fat tongue with tooth marks and slippery-white coating; pulse: deep, forceless and slow.

TCM diagnosis: *Ru Pi* (syndrome of kidney-yang deficiency, cold-debility of Chong-Ren meridians and cold-condensed phlegm accumulation).

Therapeutic methods: Warm and tonify kidney-yang, harmonize Chong-Ren meridians, dispel cold and promote qi-transformation, resolve phlegm and disperse masses. Modified Yang-He Decoction: *Radix Rehmanniae Preparata* 15 g, *Colla Cornus Cervi* 9 g (melted for oral use), *Cortex Cinnamomi* 6 g (added later in decoction), *Rhizoma Zingiberis Preparatum* 6 g, *Radix Rhapontici* 9 g, *Semen Brassicae* 9 g, *Sargassum* 12 g, *Rhizoma Pinelliae Preparata* 9 g, *Radix Curcumae* 9 g, *Radix Angelicae Sinensis* 12 g, *Fructus Rubi* 15 g, *Radix Morindae Officinalis* 9 g.

Fifteen doses, one dose per day, water-decocted to 400 mL, warm oral administration twice each day. Advice: stay away from cold environment and cold-nature food.

Second consultation: Cold limbs, lumbosacral cold soreness and nocturia improved remarkably. Breast dull pain was mitigated and masses softened; slippery-white tongue coating faded, pulse turned deep-moderate. *Pericarpium Citri Reticulatae Viride* 9 g was supplemented to soothe liver-qi and prevent stagnation induced by warming-tonic herbs. Fifteen doses were continued.

Third consultation: Breast pain disappeared and masses shrank greatly, all accompanying symptoms were relieved. *Rhizoma Atractylodis Macrocephalae* 15 g was added to

consolidate yang-qi for root-cause treatment, followed by fifteen doses. Follow-up ultrasound showed prominent absorption of cystic hyperplastic lesions. Ten more doses of original formula were given to stabilize curative outcome.

4. Case Commentaries

Commentary for Case 1

This young-middle-aged female patient developed liver-qi stagnation and constrained triple-jiao yang-qi due to long-term emotional frustration. Staying-up late and cold-food consumption impaired spleen-yang, resulting in damp-phlegm generation. Constrained yang-qi slowed blood circulation; phlegm-stasis obstructed breast collaterals and triggered *Ru Pi*. Its root pathogenesis was constrained-yang and underlying yang deficiency, while phlegm-blood stasis belonged to secondary manifestation. Treatment focused on soothing liver and unblocking yang, warming spleen to resolve phlegm, assisted by activating blood and dissipating masses.

In this formula, *Radix Bupleuri* relieves liver constraint and dredges constrained triple-jiao yang-qi. *Ramulus Cinnamomi* disperses stagnation and motivates yang-qi to restore qi-transformation. *Radix Astragali*, *Rhizoma Atractylodis Macrocephalae*, *Poria Cocos* and *Rhizoma Zingiberis* warm spleen-yang and eliminate dampness to block phlegm production source. *Radix Angelicae Sinensis* and *Rhizoma Chuanxiong* nourish and activate blood circulation. *Bulbus Fritillariae Thunbergii* and *Concha Ostreae* soften hardness and resolve phlegm lumps. *Radix Curcumae*, *Radix Rhapontici*, *Semen Brassicae* and *Pericarpium Citri Reticulatae Viride* regulate qi and relieve pain. The whole prescription is warm without dryness, dispersing without cold damage. It prioritizes reinforcing and unblocking yang-qi rather than simply attacking masses. When yang-qi transportation recovers, accumulated yin pathogens will dissipate spontaneously. In the second consultation, *Epimedium Folium* and *Semen Cuscutae* were supplemented to tonify congenital kidney-yang. In the third consultation, *Rhizoma Dioscoreae Preparata* was added to tonify spleen-yang, tonifying both congenital and acquired foundations to prevent recurrence.

Commentary for Case 2

This perimenopausal patient suffered from exhausted heavenly-gui, kidney-yang deficiency and insufficient life-gate fire. Chong-Ren meridians fell into cold-debility. Internal yin-cold accumulated, causing damp-phlegm and blood stasis condensed in breast collaterals and forming cystic hyperplasia. It was a typical pattern of yang deficiency with yin excess and yin-condensed tangible lesions. Treatment aimed at warming kidney-yang, tonifying fire to dissipate yin pathogens, harmonizing Chong-Ren meridians, resolving phlegm and dispersing masses.

Radix Rehmanniae Preparata and *Colla Cornus Cervi* tonify kidney-yang and replenish essence to consolidate congenital root. *Cortex Cinnamomi* and *Rhizoma Zingiberis Preparatum* warm meridians and improve cold-debility of Chong-Ren vessels. *Radix Rhapontici*, *Semen Brassicae*, *Rhizoma*

Pinelliae Preparata, *Sargassum* and *Radix Curcumae* activate yang, open interstitial spaces and resolve condensed phlegm-stasis. *Fructus Rubi* and *Radix Morindae Officinalis* reinforce kidney-yang and warm Chong-Ren meridians. Yang-He Decoction adopts the therapeutic strategy of “nourish yin to generate yang”. It is mildly-warming without dryness and unblocks collaterals without consuming healthy qi, perfectly conforming to the *Neijing* principle of “yang transforms qi, yin forms shape”.

5. Clinical Experience

Diseases with tangible masses including mammary hyperplasia follow the pathogenetic rule of “yang deficiency leading to yin coagulation”. Clinicians should firmly grasp the core therapeutic principle of reinforcing yang and promoting qi-transformation. Excessive bitter-cold and drastic attacking herbs should be avoided, for they may further impair yang-qi and aggravate accumulation of yin pathogens.

For young- and middle-aged *Ru Pi* patients, treatment emphasizes soothing constrained liver-yang and tonifying spleen-yang so as to restore qi-transformation of acquired foundation. For perimenopausal patients, priority is given to warming kidney-yang and harmonizing Chong-Ren meridians to consolidate congenital yang-qi. Auxiliary therapies including regulating qi, resolving phlegm and activating blood-stasis are combined to treat root and secondary manifestations simultaneously. Sufficient yang-qi and smooth qi movement promote dissipation of phlegm-stasis, fundamentally relieve symptoms and reduce recurrence risk.

Besides herbal therapy, lifestyle modification is indispensable for *Ru Pi* treatment. Patients are advised to avoid cold food and staying-up late, keep emotional stability and take moderate exercise to reduce consumption of yang-qi and consolidate curative effects, which practices the TCM preventive concept of “preventing disease before onset and preventing disease progression”.

6. Conclusion

The classic doctrine “yang transforms qi, yin forms shape” in *Neijing* reveals the core pathogenesis of mammary hyperplasia: yin coagulation originates from yang deficiency; exuberant yang-qi disperses accumulated yin pathogens. The academic thoughts of yang-reinforcing from ancient physicians provide theoretical support for clinical treatment. Warming yang, unblocking yang, reinforcing yang and promoting qi-transformation serve as general therapeutic principles. Targeted herbal compatibility is applied for two main syndromes: constrained liver-yang combined with spleen-yang insufficiency, kidney-yang deficiency accompanied by cold-debility of Chong-Ren meridians. This approach can effectively alleviate breast pain and shrink hyperplastic nodules and realize treating both root cause and symptoms.

The two clinical cases verify that reinforcing-yang-and-transforming-qi therapy possesses definite curative effect, high safety and low recurrence rate. This therapeutic strategy can also provide reference for the treatment of other “yin-formed tangible disorders” such as

thyroid nodules and uterine fibroids, and bears important academic value and clinical application prospect.

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