

Of all the diseases under heaven, which is more [prevalent] than warm disease?
 (天下之病，孰有多于温病者乎?)

– *Wen Bing Tiao Bian*

Warm Disease made simple

by **Qin Bo-Wei**

Translation & introduction by Jason Blalack

Although all of us have some ideas about warm disease theory, it is one of the most complex and misunderstood areas in Chinese medicine. One reason for its complexity is that it was developed during a time period – the Qing dynasty – when Chinese medicine was flourishing on many levels. Consequently, contributions from a multitude of doctors spanning more than 300 years resulted in the large array of books, theories, and case histories that now pepper our modern texts and formula books.

ALTHOUGH THE CORE THEORY of the warm disease school is based on classics such as the *Nei Jing* (Inner Classic) and *Shang Han Lun* (Discussion of Cold Damage), the strategies themselves are quite innovative, evolving to deal precisely with those clinical realities that past theory could not effectively address. Hence it should not be thought that warm disease doctors just dismissed past theory, only to blaze a new path. In fact, many of the most famous doctors of this time, such as Ye Tian-Shi, were essentially eclectics. They built upon the past, incorporating it into the present. Their case studies demonstrate a wide variety of strategies, including *Shang Han Lun* theory,



depending on the situation. Actually it was not uncommon to find warm disease and *Shang Han Lun* terminology and diagnosis mixed together in a single case, creating a sort of fused method. Consequently, a large array of ideas and theories came together and evolved, but this resulted in an enormous amount of data to manage when working with warm disease theory.

Because of the richness of warm disease theory, many find it difficult to grasp the essential ideas necessary to practise it effectively. For example, there are over 20 seminal texts of warm disease theory, more than 60 disease names (e.g. spring warmth, summerheat-warmth, etc), and in excess of 2500 formulas using 1000 different herbs with extensive use of herbal preparation (*pao zhi*). Standardised formulas are rarely used.

On the other hand, *Shang Han Xue* (Studies in Cold Damage), for comparison, has only one single text, the *Shang Han Lun*, with 112 formulas, around 150 herbs, very few herbal preparations, and practitioners pride themselves on using unmodified (or only slightly modified) standard formulas.

Despite, or perhaps because of, this complexity, one of the strengths of warm disease theory is its ability to address many modern conditions that specifically relate to our present day constitutions and living environments. Quite simply, many believe that nowadays there is an increased tendency towards yin deficiency heat and

damp-heat conditions. This is because we now live in more controlled environments with less exposure to brutal cold, we over-eat rich foods and are no longer nutritionally impoverished, we overwork mentally instead of physically, and we have a constant bombardment of stimulation and stress. Hence, many say, the warm disease model is indispensable for modern day clinical practice.

I am not suggesting that warm disease methodology, or any other single system, can manage all cases. Actually, the notion that one should try to master only one school of thought is somewhat unusual. The greatest doctors I have read and studied with utilise a multitude of theories in the clinic, and this appears to be the norm rather than the exception. However, because of the complexity of warm disease theory, people shy away from it in favour of more clear-cut systems, and it is not used in the clinic as often as it should be.

Therefore, on discovering Dr Qin Bo-Wei's lucid summary of the core ideas on warm disease – presented below – I thought it would help demystify this topic and build a better foundation for its use in clinic. Qin Bo-Wei (1901-1970) was one of the most important educators and clinicians in the 20th century. He had an unparalleled skill at taking complex topics and reducing them to the essential points. It is clear that Dr Qin had grappled with this subject in the clinic, and he presents a way to think about warm disease that merges theory and clinical reality, instead of just restating the typical four stage outline. This is one reason I have been drawn to studying his work.

Personally, I have always favoured understanding principles versus rote memorisation of formulas and herbs. I have also for some time had a strong interest in warm disease theory. I hope that you find Dr Qin's essay as interesting as I have, and that it strengthens your core understanding so that looking at deeper and more sophisticated aspects of warm disease theory, including lurking pathogens, becomes less daunting.

The following is a translation of Dr Qin's thoughts on warm disease. It should be noted that this is only about one-fifth of Dr Qin's essay. Not included here are Dr

Qin's 12 methods for warm disease, his discussion of damp-heat (a special type of warm disease), his breakdown of the meaning of symptoms, and his thoughts on more complex issues such as lurking pathogens. If there is interest expressed in the remaining parts of his essay, it may be possible to present it in a series.

Some ideas I have learned about Warm Disease

Extract by Qin Bo-Wei

THE TREATMENT OF WARM DISEASE IS complicated and in the clinic one must grasp the core principles. This is particularly so since warm disease has had contributions from many sources and differing opinions exist in some areas, even up to the present. I will put forward what I have learned from my in-depth study and clinical experience, although there may be minor discrepancies compared to "the books". Further study is needed.

Stages of warm disease

Generally speaking, when faced with a warm disease patient there are several important items to consider:

1) Disease cause (etiology): A seasonal warm pathogen belongs to the category of externally contracted disease.

2) Classification: Because there are different seasons, complex factors and peculiar symptoms, we have many disease categories such as spring warmth, summer heat warmth, autumn warmth, winter warmth, wind warmth, damp warmth, warm toxin, and warm epidemic, but fundamentally we have to pay attention to wind warmth.^a

3) Nature: The nature of warm disease is that it belongs to heat. Hence its characteristic is that it easily transforms to heat, damages the fluids, damages the yin, and stirs the blood.

4) Transformations: One can track the

a. Dr Qin's point is that if one understands the principles for the treatment of wind warmth then one can successfully apply the same principles to the many other warm diseases.

■ Note on authors ...

location and transmission of a pathogen in the following parts of the body: three burners (upper, middle, and lower) and the four levels (defensive, qi, nutritive, and blood). A normal transformation is from the upper burner-Lungs to the Middle burner-Stomach and Intestines and then to the lower burner-Liver and Kidneys. It also follows the sequence of defensive to qi to nutritive, and then to blood. Abnormal transformations go from the Lungs straight into the Pericardium, or from the defensive into the nutritive [skipping the qi aspect]. Signs of abnormal transmission within a pattern of normal transmission can also be

seen, and are by no means peculiar.

One should first understand a pattern within the constructs of normal transmission, and in learning to treat warm disease, one should focus on grasping the wind warmth onset of disease and the way that it transforms. After understanding the treatment principles of wind warmth, it is fairly easy to understand the different circumstances of other patterns and the methods to deal with those.

Four stages

The diagnosis and treatment of wind warmth can be divided into four stages:

BY STAGES	AVERSION TO WIND	HEAT TRANSFORMATION	ENTERING THE NUTRITIVE	DAMAGE OF YIN
Eight principles	Exterior, excess, & heat	Interior, excess, & heat	Interior, excess, & heat	Interior, deficiency, & heat
Triple burner	Upper burner	Upper burner, middle burner	Upper burner, middle burner	Lower burner
Defensive-qi-nutritive-blood	Defensive	Qi	Nutritive	Blood
Zang-fu	Lungs	Lungs, Stomach, and Intestines	Stomach, Pericardium	Liver and Kidney
Important symptoms	Fever and aversion to cold, cough	Fever, constipation, fluid damage	Clouded spirit, maculopapular eruption, bleeding	Damage to yin and tetanic reversal
Important treatment method	Resolve the exterior and diffuse the Lungs	Clear the qi aspect, purge downwards, generate fluids	Clear the nutritive, open the orifices, transform macules, and stop bleeding	Nourish the yin and extinguish wind
Important formulas	1. <i>Yin Qiao San</i> (Honeysuckle and Forsythia Powder) 2. <i>Sang Ju Yin</i> (Mulberry Leaf and Chrysanthemum Drink)	1. <i>Sang Ju Yin</i> (Mulberry Leaf and Chrysanthemum Drink) plus <i>Shi Gao</i> (Gypsum fibrosum), 2. <i>Bai Hu Tang</i> (White Tiger Decoction) 3. <i>Liang Ge San</i> (Cool the Diaphragm Powder) 4. <i>Zeng Ye Cheng Qi Tang</i> (Increase the Fluids and Order the Qi Decoction). 5. <i>Yi Wei Tang</i> (Benefit the Stomach Decoction)	1. <i>Qing Ying Tang</i> (Clear the Nutritive-Level Decoction) 2. <i>An Gong Niu Huang Wan</i> (Calm the Palace Pill with Cattle Gallstone) 3. <i>Zi Xue Dan</i> (Purple Snow Special Pill) 4. <i>Zhi Bao Dan</i> (Greatest Treasure Special Pill) 5. <i>Hua Ban Tang</i> (Transform Maculae Decoction) 6. <i>Yin Qiao San</i> (Honeysuckle and Forsythia Powder) minus <i>Dan Dou Chi</i> (Sojae Semen preparatum) plus <i>Sheng Di</i> (Rehmanniae Radix), <i>Mu Dan Pi</i> (Moutan Cortex), <i>Da Qing Ye</i> (Isatidis Folium) 7. <i>Xi Jiao Di Huang Tang</i> (Rhinoceros Horn and Rehmannia Decoction)	1. <i>Qing Hao Bie Jia Yang</i> (Sweet Wormwood and Soft-Shelled Turtle Shell Decoction) 2. <i>Jia Jian Fu Mai Tang</i> (Modified Restore the Pulse Decoction) 3. <i>San Jia Fu Mai Tang</i> (Three-Shell Decoction to Restore the Pulse) 4. <i>Da Ding Feng Zhu</i> (Major Arrest Wind Pearls)

aversion to wind, transformation into heat, entering the nutritive [aspect], and damage of yin. These are the four stages of the whole disease course and also are the four key points to understand for treatment. Although there are numerous transformations in warm disease, almost all will be included in these four stages.^b

Furthermore, these four stages can be understood within the context of the following parameters: eight-principle pattern identification, three burner pattern identification, defensive-qi-nutritive-blood pattern identification, zang-fu pattern identification and chief symptoms, indication of drugs (chief herbs), and key formulas. The table (left) helps to illustrate.

1. Aversion to Wind stage

Fever is the chief sign of an externally contracted disease. Actually, all such diseases have fever, and warm disease is no exception. What is unusual is that in warm disease the whole course of the disease exhibits some degree of fever.

As well as fever, in the beginning stages of an external contraction there is aversion to wind or aversion to cold. Therefore our predecessors said “If you have one bit of aversion to cold then you will have one bit of exterior pattern.” Warm disease theory agrees with this. But the aversion to cold in the beginning stage of warm disease is not that serious, and most of the time there is just slight aversion to wind; moreover, it usually disappears quickly. It is important to note that if aversion to wind disappears and fever simply remains, with no other changes, this is still an exterior pattern. On the other hand, if the aversion to wind disappears but the fever increases and thirst with actual desire to drink appears, then this is an important sign that the condition is turning hot and moving internally. This shows that a key symptom for determining changes in the early stage of warm disease is the presence or absence of aversion to wind.

^b These four stages are of course related to defensive, qi, nutritive, and blood. However, I think that Dr Qin's reasoning for these names for the stages is twofold. First, it allows one to think of the stages on more of a continuum versus strictly defined boxes. Second, it allows one to think about the stages in context of other diagnostic systems (e.g. eight principles or zang-fu).

It is said, “If there is heat with no aversion to cold and thirst, then this is warm disease.” This should be differentiated from the *Shang Han Lun's* (Discussion of Cold Damage) aversion to cold and fever. However when warm disease is in the beginning stage one cannot stubbornly use this rule. The clinical reality is that it is very difficult to definitively differentiate between cold damage and warm disease on the first or second day. For example, let us look at thirst. Most of the time, when there is fever one will think about drinking. In the beginning stages of cold damage, thirst may also manifest.

We can also take sweating as an example. When a new pathogen fetters the exterior, the majority of the time, the skin will be closed and there will be no sweat. Consequently, in the beginning stages of warm disease one may also find no sweating. Other symptoms such as headache, sore or painful limbs, and a pulse that is floating and rapid can occur in almost all external contraction patterns.

Therefore, diagnosing beginning stage warm disease must come from meticulous observation. It is important to thoroughly understand the symptoms of aversion to wind, fever, headache, cough, sweating, thirst, white tongue coat, and a floating and rapid pulse. Remember that all of these symptoms will not appear at the same time, but will fluctuate.

For example, if there is aversion to wind that lightens or disappears after spontaneous sweating, yet there is a generalised fever that lingers with cough and severe thirst, the diagnosis of warm disease is certainly clear-cut.

Precisely because of this, the treatment of beginning stage warm disease is to use a disperse the exterior method as well as diffuse the lung method. This is commonly achieved by using *Yin Qiao San* (Honeysuckle and Forsythia Powder) and *Sang Ju Yin* (Mulberry Leaf and Chrysanthemum Drink), both of which have the same treatment principle of using acrid cold flavours to resolve the exterior. This can be broken down into two aspects: a) an acrid and scattering method, because this is an external contraction, and b) a cool and clearing method, because this is a warm pathogen.



It is important to thoroughly understand the symptoms of aversion to wind, fever, headache, cough, sweating, thirst, white tongue coat, and a floating and rapid pulse. Remember that all of these symptoms will not appear at the same time, but will fluctuate.



One may see a sore throat, bloody nose, yellow urine, and dry stools. This is still an exterior pattern, and one needs to pay attention to preventing a transformation into an interior pattern.

Sang Ju Yin is a mild, acrid and cool formula; its strength is relatively light, and it lays particular emphasis on diffusing the Lungs. *Yin Qiao San* is a balanced acrid and cool formula. Balance refers to lying between light and heavy. It lays particular emphasis on promoting a sweat and clearing heat.

It should be noted that at this stage one may see a sore throat, bloody nose, yellow urine, and dry stools. This is still an exterior pattern, and one needs to pay attention to preventing a transformation into an interior pattern. Therefore, it is crucial to grasp the acrid cool principle, which will vent the pathogen, and to not be too eager to use herbs that clear the interior. Doing the first will allow the pathogen to exit, which in turn acts precisely to diminish the pathogen's tendency to transfer internally. Ye Tian-Shi summarised the second when he said, "When a pathogen is in the defence aspect, one may use sweating. Once the pathogen reaches the qi aspect, only then can one clear the qi."

Therefore clearing the interior too early is incorrect. Also, if one utilises only the herbs *Jin Yin Hua* (Lonicerae Flos) and *Lian Qiao* (Forsythiae Fructus) from *Yin Qiao San* and neglects the other parts of the formula that use the acrid flavour to disperse and diffuse the Lungs such as *Dan Dou Chi* (Sojæ Semen preparatum), *Jing Jie* (Schizonepetae Herba), *Bo He* (Menthae haplocalycis Herba), *Niu Bang Zi* (Arctii Fructus), and *Jie Geng* (Platycodi Radix), this is also a mistake.

2. Heat Transformation stage

At this stage, aversion to wind has disappeared and there is increased generalised fever, thirst with intake of fluids, irritability with a stifling sensation in the chest and diaphragm, and profuse sweating. These are the key symptoms for a warm pathogen that transforms to heat. This stage must be differentiated between (I) the beginning of heat transformation and (II) heat transformation that has already passed into the interior.

I. In the initial stage of heat transformation, the pathogen is still located in the Lungs,

and one can add *Shi Gao* (Gypsum fibrosum) to *Sang Ju Yin* (Mulberry Leaf and Chrysanthemum Drink) to clear and resolve heat. Why not use the stronger *Yin Qiao San* (Honeysuckle and Forsythia Powder)? This is because *Yin Qiao San* mostly has herbs that resolve the exterior, and this pattern already has transformed to heat with profuse sweating, so further scattering of the exterior is pointless.^c

One needs only a slightly acrid venting and discharging method. For example, if the pathogen has transmitted into the interior and entered the Stomach, then one uses *Bai Hu Tang* (White Tiger Decoction) to clear the middle burner, and there is no more need for Lung channel herbs. Fundamentally, to reduce the fever, one must guide the pathogen out. *Bai Hu Tang* has this ability, causing the pathogen to discharge outwards through the exterior. Consequently it is called an acrid, cool, heavy formula.^d Generally a warm pathogen in the beginning stage of heat transformation in the qi aspect is treated with the principle of clearing the qi aspect. It should be noted that clearing qi is different than draining fire, hence it is contraindicated to use bitter cold herbs such as *Huang Lian* (Coptidis Rhizoma).

II. After there is transformation of heat that enters the interior, there are two primary patterns that are seen.

1) The first pattern is when the heat pathogen travels from the Stomach to the Intestines, manifesting as constipation with abdominal distension and fullness. Because there is no free flow of qi in the *fu* organs, there is a transformation into fire that flames upward. This results in a) consumption of fluids producing dry lips and tongue, and b) influence on the spirit, causing irritability, restlessness, and disquietedness. To prevent this propensity to set the prairie ablaze one must use the purging method.

c. To summarise, although *Yin Qiao San* (Honeysuckle and Forsythia Powder) is considered stronger than *Sang Ju Yin* (Mulberry Leaf and Chrysanthemum Drink) it works on a more superficial layer.

d. To summarise, *Sang Ju Yin* (Mulberry Leaf and Chrysanthemum Drink) is considered light, *Yin Qiao San* (Honeysuckle and Forsythia Powder) is considered balanced and *Bai Hu Tang* (White Tiger Decoction) heavy. They are all acrid and cool, but have different targets.

In general, purging formulas such as the *Cheng Qi Tangs* (Order the Qi Decoctions) are typical, but in warm disease one should consider *Liang Ge San* (Cool the Diaphragm Powder),^e which resolves both the exterior and interior. One should also consider the moistening and purging formula *Hu Wei Cheng Qi Tang* (Stomach Protecting Order the Qi Decoction).^f

2) The second pattern is when the heat pathogen damages the Stomach yin, fluids are consumed, and the mouth and tongue are dry. Due to the insufficiency of fluids, the force of the heat becomes overabundant, leading to even more rapid transformations. At this time generating fluids is an urgent matter. Therefore it is said: “If you can keep a little more fluid then you have more chance of survival.” This is the key in the treatment of warm disease and guarding against fierce transformations.

Therefore, in summary, the single stage of warm disease heat transformation has within itself different stages. It may involve not only the middle burner, but also may have an upper burner component. It may have not only qi aspect heat signs, but also may have symptoms indicating damage to the fluids such as constipation. If one simply sees heat transformation, and treats it as a yang ming organ pattern, or just sees thirst and uses an enriching yin [method], or just sees constipation and uses a purging [method], these are all incorrect.

3. Entering the Nutritive stage

A warm pathogen entering the nutritive from the qi level is an important occurrence in warm disease. There are many serious patterns that one finds within this stage, even fatal ones. Consequently, one must prevent the pathogen from entering the nutritive.

e. *Da Huang* (Rhei Radix et Rhizoma) 9g, *Mang Xiao* (Natrii Sulfas) 9g, *Gan Cao* (Glycyrrhizae Radix) 9g, *Huang Qin* (Scutellariae Radix) 4.5g, *Zhi Zi* (Gardeniae Fructus) 4.5g, *Lian Qiao* (Forsythiae Fructus) 18g, *Bo He* (Menthae haplocalycis Herba) 4.5g.

f. *Sheng Da Huang* (unprepared rhubarb) 9g, *Xuan Shen* (Scrophulariae Radix) 9g, *Xi Sheng Di* (thin Rehmannia) 9g, *Mu Dan Pi* (Moutan Cortex) 6g, *Zhi Mu* (Anemarrhenae Rhizoma) 6g, *Mai Men Dong* (Ophiopogonis Radix) 9g.

If one already sees clues that the pathogen has entered the nutritive one must find a way to transfer the pathogen back out to the qi aspect. Ye Tian-Shi said, “If the pathogen has entered the nutritive then one can still vent out the heat, transferring it to the qi aspect.”

How does one know that the pathogen has entered the nutritive? Signs that appear first are a red or crimson tongue, and a tongue coat that is gradually becoming dark yellow with little moisture, accompanied by irritability, restlessness, and disquietedness.

How does one get the pathogen to transfer back to the qi aspect? Within a formula that clears heat from the qi one would add herbs such as *Mu Dan Pi* (Moutan Cortex) and *Chi Shao* (Paeoniae Radix rubra) to clear and discharge the heat pathogen from the nutritive aspect. It is forbidden to use the “enrich the yin” method, which would trap the pathogen and spur it to sink more deeply into the body.

If the pathogen has already entered deep into the nutritive aspect, three types of symptoms appear:

- 1) Impaired consciousness, or possibly closed eyes and delirious speech, sometimes muddled and sometimes roused, or even completely comatose;
- 2) Maculopapular eruption or red points issuing from the skin, or gradually increasing red macules that start from the chest and back proceeding towards the four limbs;
- 3) Bleeding, including nose bleeding, teeth bleeding and vomiting of blood. The colour of this blood is mostly fresh red.

The manifestation of these symptoms demonstrates that the patient's condition can move fiercely towards transformations and develop violent changes. Therefore the general treatment method is to change to clearing the nutritive. In addition, the majority of the time, the patient should take a formula such as *Zi Xue Dan* (Purple Snow Special Pill), *Zhi Bao Dan* (Greatest Treasure Special Pill) or *Xi Jiao Di Huang Tang* (Rhinoceros Horn and Rehmannia Decoction). These are emergency treatment measures to open the orifices and stop bleeding.



If one already sees clues that the pathogen has entered the nutritive one must find a way to transfer the pathogen back out to the qi aspect.



If there is a return of yin then there is life, if the yin does not return there is death. This is an extremely serious key point.

It should be noted that there is a close relationship between a pathogen that enters the nutritive aspect and one that enters the Pericardium.

Because of this, and that in a nutritive aspect pattern the pathogen's involvement is still connected to the middle burner and there is still heat in the qi aspect, *Qing Ying Tang* (Clear the Nutritive-Level Decoction)^g is chosen, which emphasises both clearing the nutritive and clearing of the qi.

The treatment for blazing heat in both the qi and blood aspect is to use *Jia Jian Yu Nu Jian* (Modified Jade Woman Decoction)^h, and the treatment of macular eruption is to use *Hua Ban Tang* (Transform Maculae Decoction)ⁱ. Both of these are modified versions of *Bai Hu Tang* (White Tiger Decoction).

If there is rebellious transmission into the Pericardium manifesting as impaired consciousness, or coughing of blood coming from Lung heat damaging the collaterals, this is not coming about due to passage from the middle burner, and is of course a different matter.

One must search for the origin and development of the pathological mechanism, so as to avoid just “seeing” a nutritive aspect disease, and then using blood cooling and enriching greasy herbs.

At the same time, one should realise that the emergency formulas such as *Zi Xue Dan* (Purple Snow Special Pill) or *Zhi Bao Dan* (Greatest Treasure Special Pill) are all essentially the same [in that they treat the branch].

However, the ability to write a formula to treat the root is another story. In so doing, one must pay close attention to the co-ordination between the root and branch.

g. *Shui Niu Jiao* (Bubali Cornu) 30-120g, *Xuan Shen* (Scrophulariae Radix) 9g, *Sheng Di Huang* (Rehmanniae Radix) 15g, *Mai Men Dong* (Ophiopogonis Radix) 9g, *Jin yin hua* (Lonicerae Flos) 9g, *Lian Qiao* (Forsythiae Fructus) 6g, *Huang Lian* (Coptidis Rhizoma) 4.5g, *Dan Zhu Ye* (Lophatheri Herba) 3g, *Dan Shen* (Salviae miltiorrhizae) 6g

h. *Shi Gao* (Gypsum fibrosum) 30g, *Zhi Mu* (Anemarrhenae Rhizoma) 12, *Xuan Shen* (Scrophulariae Radix) 12, *Mai Men Dong* (Ophiopogonis Radix) 18g, *Sheng Di Huang* (Rehmanniae Radix) 18g.

i. *Shi Gao* (Gypsum fibrosum) 30g, *Zhi Mu* (Anemarrhenae Rhizoma) 12g, *Gan Cao* (Glycyrrhizae Radix) 9g, *Xuan Shen* (Scrophulariae Radix) 9g, [*Shui Niu Jiao* (Bubali Cornu) 30-120g], *Jing Mi* (Nonglutinous rice) 9-15g.

4. Damage of Yin stage

From the nutritive level, the warm pathogen progresses to enter the blood level, and it still is a period of intense heat disruption. When one says “damage of yin,” this refers to injury and weakness of the essence and blood, and is the final stage of a warm disease. The disease is now located in the lower burner, Liver and Kidneys. The Liver stores the blood, and the Kidneys store the yin. Therefore, there is yin and blood depletion, residual heat that is retained, or possibly frenetic stirring of wind and yang. This phase manifests as tidal fever, putrefaction in the oral cavity, deafness, parched teeth, palpitations, dizziness, muscle twitches of the four limbs, tetanic reversal, a bare, dry, and crimson tongue, and a thin, rapid, and faint pulse.

At this time one must primarily nourish blood and enrich the yin, while assisting with anchoring the yang and extinguishing wind to treat the branch. For example, one can use a modified *Jia Jian Fu Mai Tang* (Modified Restore the Pulse Decoction)^j or *San Jia Fu Mai Tang*^k (Three-Shell Decoction to Restore the Pulse) to clear and discharge the pathogen from the yin aspect. It is forbidden to use ascending and scattering medicinals. It must be pointed out that the sequence from aversion to cold stage reaching the qi transformation stage and then into the nutritive stage is considered a normal passage. However, this damage to yin stage does not always come about from a pathogen that has previously entered the nutritive stage. For example, if a warm pathogen is in the heat transformation stage and lingers for some time in the middle burner, this can also damage Kidney yin.

If the normal qi has not become defeated,

j. This is from Systematic Differentiation of Warm Pathogen Diseases (1798). Ingredients include: *Sheng Di Huang* (Rehmanniae Radix), *Bai Shao* (Paeoniae Radix alba), *Mai Men Dong* (Ophiopogonis Radix), *E Jiao* (Asini Corii Colla), *Huo Ma Ren* (Cannabis Semen), & *Zhi Gan Cao* (prepared licorice root). This is also called *Zhi Gan Cao Tang* (Prepared Licorice Decoction) (qing dynasty).

k. *Zhi Gan Cao* (prepared licorice root) 18g, *Sheng Di Huang* (Rehmanniae Radix) 18g, *Bai Shao* (Paeoniae Radix alba) 18g, *Mai Men Dong* (Ophiopogonis Radix) 15g, *Huo Ma Ren* (Cannabis Semen) 9g, *E Jiao* (Asini Corii Colla) 9g, *Mu Li* (Ostreae Concha) 15g, *Bie Jia* (Trionycis Carapax) 24g, *Gui Ban* (Testudinis Plastrum) 30g

then one can have an excess pattern together with injury to yin, and the pulse will be deep and strong. At this point one can still consider urgently purging to preserve yin.

However, if the pulse is deficient and there is deficient heat, one must nourish yin and it is contraindicated to purge, which will certainly cause more damage to yin fluids and potentially bring about death.

Thus it should be understood that a warm disease that has reached the stage of yin damage will also have some degree of damage to the normal qi. If there is a return of yin then there is life, if the yin does not return there is death. This is an extremely serious key point.

Conclusion

The above four stages are put forward based on my clinical knowledge, and are sufficient to outline the whole developmental course of warm disease.

It should be noted that fatalities from warm disease usually follow the stage of damage to yin, but are not impossible in other stages. This is, of course, dependent upon whether the patient's constitution has some special circumstances or if the treatment is delayed.

Although we often discuss pattern differentiation of the above four stages in terms of the upper, middle, and lower burners or the defensive, qi, nutritive, and blood, this is not the only classification method that should be used. Instead one must stand back and reflect on the patient's condition as a whole, observing the pathological changes in the physiology as the warm disease transforms and develops. Similarly, when classifying the problem using the three burners (upper, middle, lower) one cannot forget about the defensive, qi, nutritive, and the blood aspects, and vice versa.

A warm pathogen that travels from the upper burner to the middle burner to the lower burner becomes deeper and deeper. A warm pathogen that travels from the defensive aspect to the qi aspect to the nutritive aspect and then to the blood aspect becomes more and more serious. Because of this, one must at all times think ahead and prevent the pathogen's

progression. Furthermore, once the pathogen is established, one must get the pathogen to transfer from the deep back to the more superficial and transform the serious into the mild, so as to reduce the chance of the condition worsening.

Ye Tian-Shi said, "When a pathogen is in the defence aspect, one may use the sweating method. Once a pathogen reaches the qi aspect, only then can one clear the qi. When the pathogen enters the nutritive aspect, one can still evict the heat and shift it back to the qi aspect. Once it enters the blood, the fear is that the pathogen will both consume and stir the blood, so one must immediately both cool the blood and disperse blood heat."

Brief and to the point, he explains the development of the onset of disease, and puts forth the key points for treatment.

The *Wen Bing Tiao Bian* (Systematic Differentiation of Warm Pathogen Diseases) identifies diseases and treatments for warm disease, and includes a total of 238 methods and 198 formulas.

It includes major categories such as wind-warmth, summer-heat, lurking summer-heat, winter-warmth, damp-warmth, damp-heat, autumn-dryness, warm-toxin, and warm malaria. Within the text it also discusses aspects of cold damp, dysentery, jaundice, and hernia-like mobile abdominal masses. Yet even the disease patterns that are included within the *Wen Bing Tiao Bian* do not cover completely the scope of warm disease. For example, within wind-warmth patterns, there are also many concurrent patterns and harmful patterns (坏证) that must be dealt with and differentiated.

By focusing on understanding wind-warmth, however, one can grasp the essence of warm disease, which is by no means that complicated. Hence, I think that in the treatment of warm disease, thoroughly understanding the chief signs and patterns of wind warmth should be fundamental.

After one understands the chief patterns, chief signs, and chief formulas of wind warmth then one should combine this knowledge with that of the seasonal aspects of the onset of disease, and other complex factors. Consequently, if one understands all this, even conditions that are complex transformations are not difficult to solve.

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