

Integrative Woman's Health Course

DAOSHING NI



Amenorrhea

闭经

Case Study

Dr. Fang, He Qian 方和謙

41 yo, 9-12-2005 First Visit

Amenorrhea half year, started after much stress with work.

Now feels tired, dry throat, insomnia, LMP 3-8, tongue pale, pulse thin slow.
Had a physical exam, normal.

Definition

Lack of menstruation, over the age of 16, no menarche (primary), or had periods but stopped for at least 6 months or more (secondary).

<Huang Di Nei Jing – Su Wen> described how six emotional injuries can cause amenorrhea.

To exclude lack of menstruation during pregnancy, lactation, postpartum, and menopause.

Lack of certain organs such as ovaries, uterus can all cause this condition

Etiology & Pathogenesis

Women with 46, XY Karyotype

Anatomical Abnormalities

Hypothalamic Defects

Ovarian Failure

Ovarian Dysfunction

Obesity

Differentiation of internal structures

- Internal structures: **Mullerian or Wolffian** duct systems develop into female or male internal organs
 - Testes secrete androgens that stimulate the **Wolffian** ducts to develop into vas deferens, seminal vesicles, and ejaculatory ducts
 - Testes also secrete Mullerian inhibiting substance (MIS) that causes Mullerian ducts to shrink and disappear in males.
 - In females, absence of androgens causes **Mullerian** ducts to develop into fallopian tubes, uterus, and inner part of vagina, and the Wolffian duct system degenerates.

Women with 46, XY Karyotype

The sexually undifferentiated male fetal testis secretes mullerian inhibiting factor (MIF) and testosterone. MIF promotes regression of all Mullerian structures: the uterine tube, the uterus, and the upper two-thirds of the vagina. Testosterone

WM Etiology Anovulatory Amenorrhea

Amenorrhea is usually classified as anovulatory or ovulatory.

Anovulatory Amenorrhea

- Hypothalamic dysfunction (particularly functional hypothalamic anovulation)
- Pituitary dysfunction
- Premature ovarian failure
- Endocrine disorders that cause androgen excess (particularly polycystic ovary syndrome)

WM Etiology

Ovulatory Amenorrhea

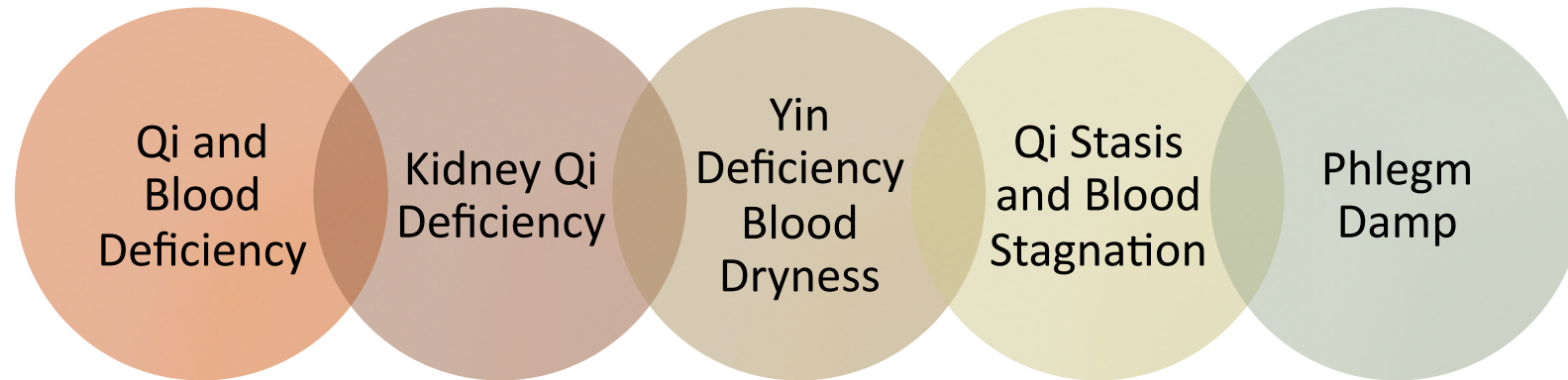
Congenital genital abnormalities

- Cervical stenosis (rare)
- Imperforate hymen
- Pseudohermaphroditism
- Transverse vaginal septum
- Vaginal or uterine aplasia (eg, Müllerian agenesis)

Acquired uterine abnormalities

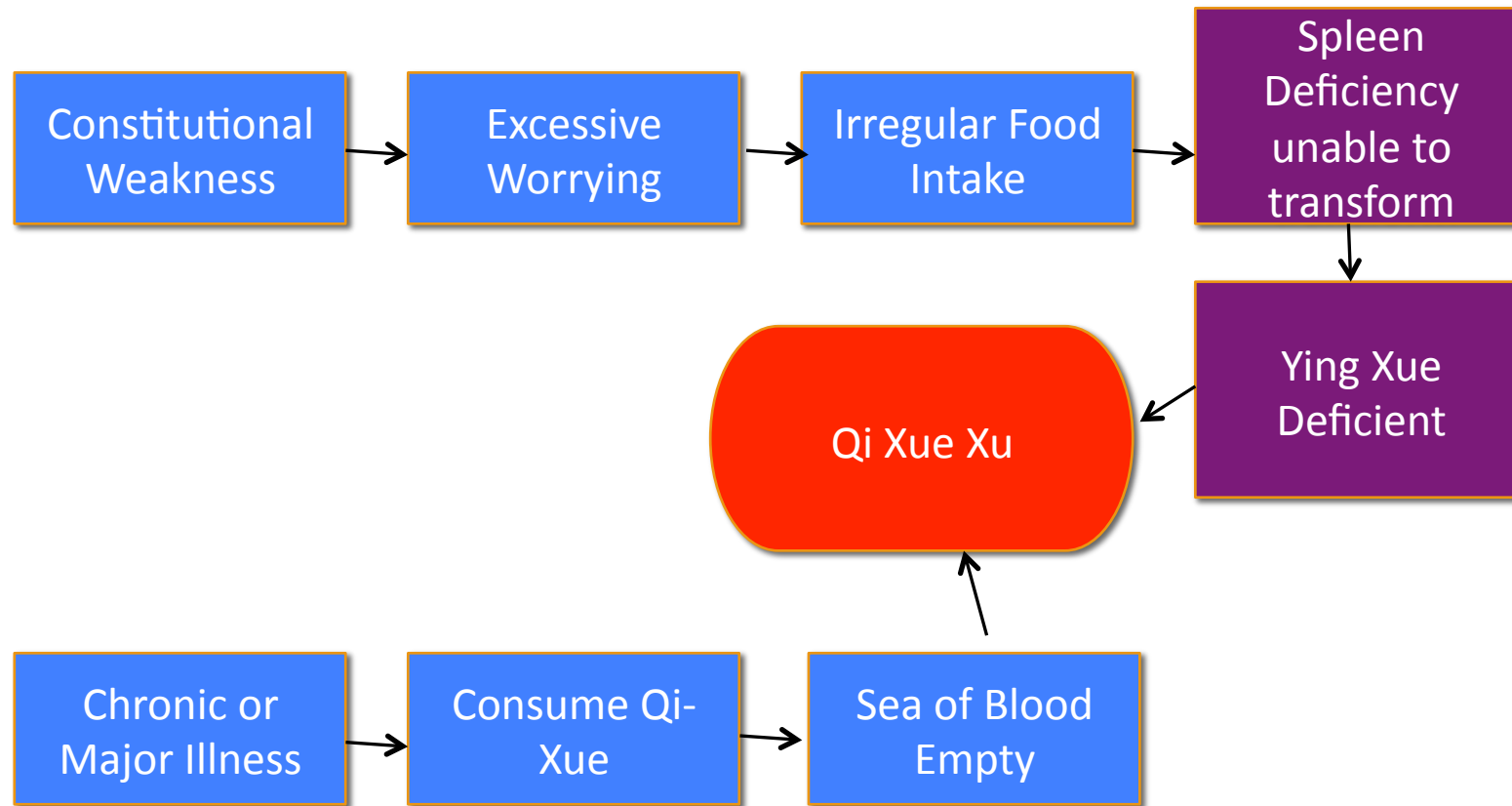
- Asherman syndrome
- Endometrial TB
- Obstructive fibroids and polyps

Etiology

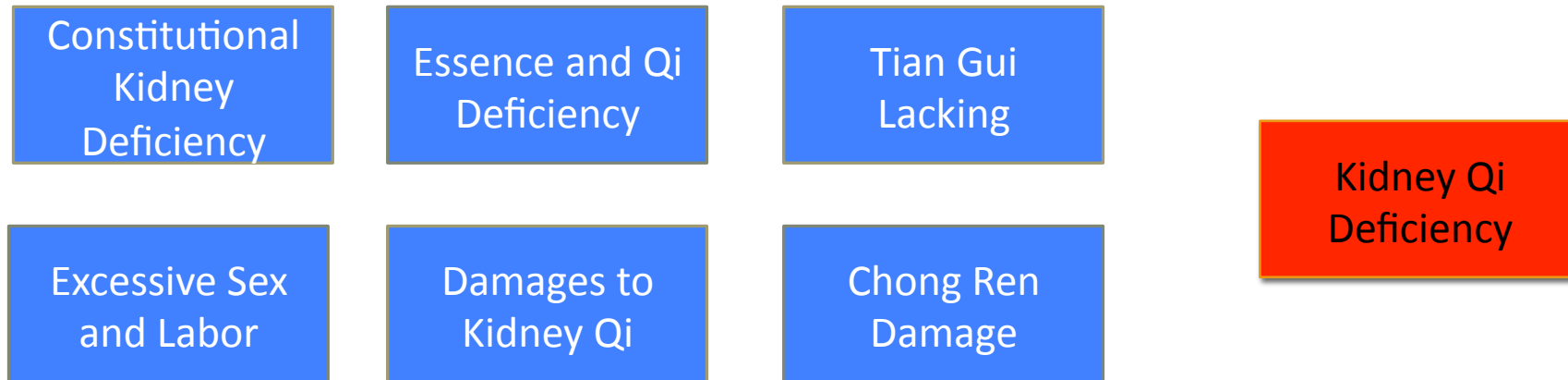


Qi Xue Xu

Qi and Blood Deficiency



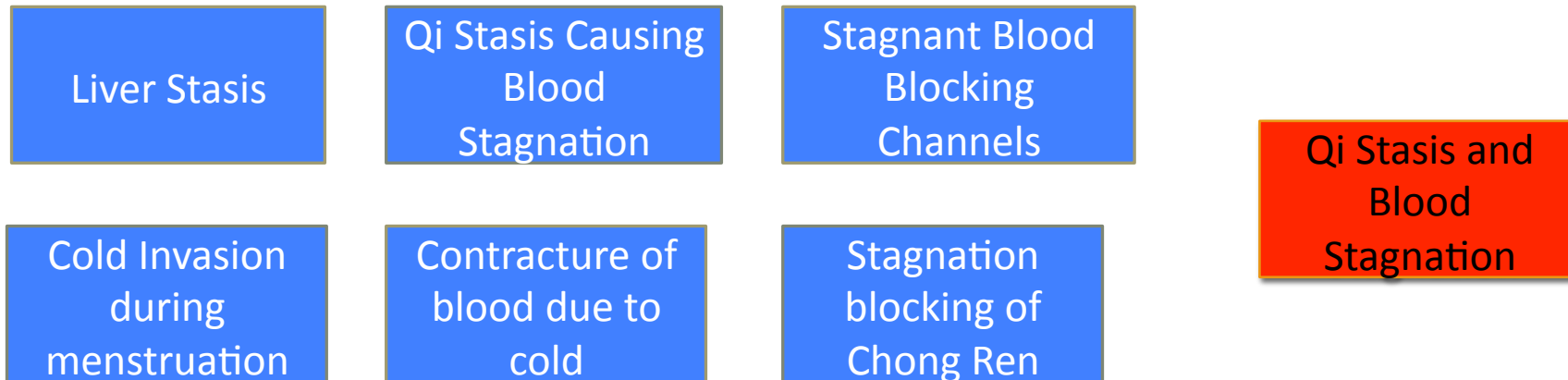
Kidney Qi Deficiency



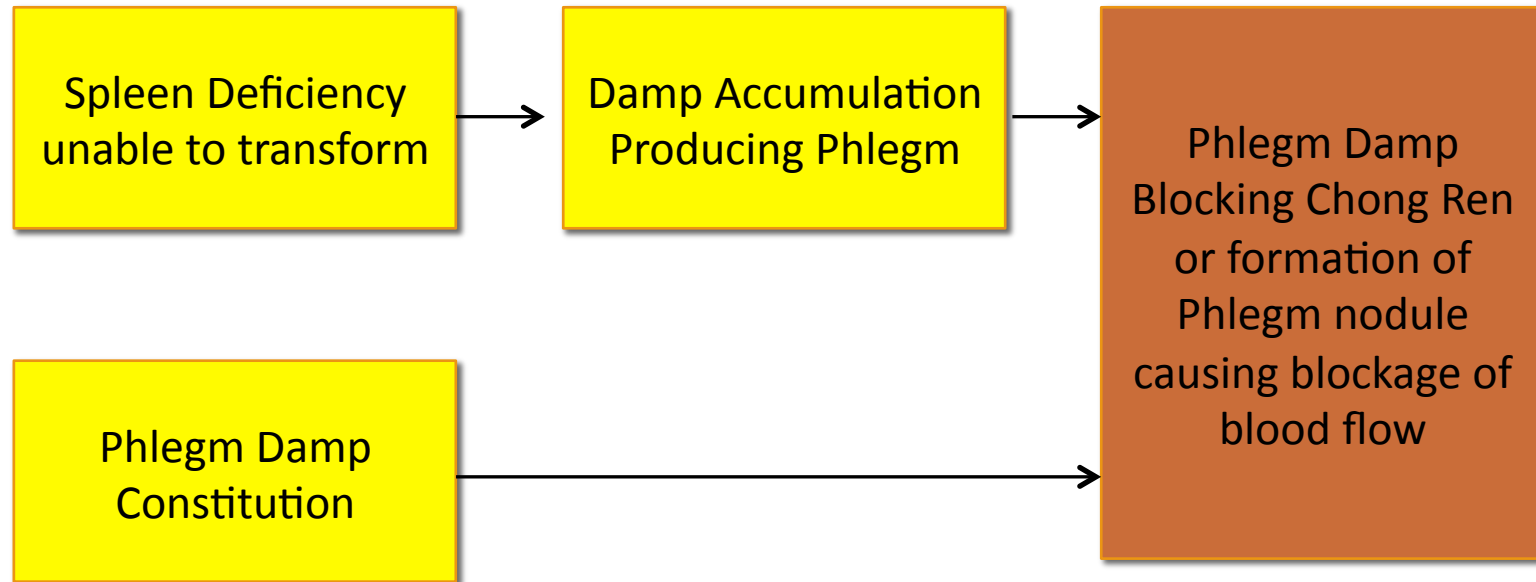
Yin Deficiency Blood Dryness



Qi Stasis and Blood Stagnation



Phlegm Damp



Pathology

Location: Chong Ren

Two Scenarios

- No blood to bleed
- Blood blocked so cannot bleed
- (or combination)

Differentiate between Xu, Shi, Han, Re; but mostly are deficiency condition or deficiency more than excess.

Exams

BBT

Vaginal culture

Ultrasound

MRI

Hysteroscopy

Diagnostic D&C

Serum FSH, E2, PRL, TSH. T

Karyotype

Qi Xue Xu

Qi and Blood Deficiency

Amenorrhea, had delayed menstruation with scanty pale thin flow, fatigue, decreased libido, vaginal dryness or atrophy, tongue pale, pulse slow or weak.

Chong Ren Deficiency, Sea of Blood Empty

Tonify Qi, Blood Regulate cycle

Ren Shen Yang Rong Tang 人參養榮湯

Ren Shen, Huang Qi, Bai Zhu, Fu Ling, Che Pi, Gan Cao, Shu Di, Dang Gui, Bai Shao, Wu Wei Zi, Yuan Zhi, Rou Gui

Can add Zi He Che, Lu Jiao Shuang, Lu Rong for Jing deficiency

Kidney Qi Deficiency

Primary amenorrhea or delayed menarche, gradual onset of amenorrhea, fatigue, poor development of physique, poor secondary sex characteristics development, tongue pale dark, coating thin white, pulse deep thin

Tonify Kidney Benefit Qi, Regulate Chong Ren

Modified Cong Rong Tu Si Zi Tang 菴蓉菴絲子湯 (Dr Zhuo, Yu Nong's Experiential Formulation) 卓雨農

Rou Cong Rong, Tu Si Zi, Fu Pen Zi, Gou Qi Zi, Sang Ji Sheng, Shu Di, Dang Gui, Ai Ye; add Zi He Che, Xian Ling Pi

肉苁蓉、菴絲子、覆盆子、枸杞子、桑寄生、熟地、當歸、焦艾葉，紫河車，仙靈脾。

Yin Deficiency Blood Dryness

Amenorrhea, delayed menstruation prior history with scanty red thick flow, gradual onset of amenorrhea, tongue red, coating lacking, pulse thin rapid.

Nourish Yin Clear Heat Regulate Chong Ren

Yi Yin Jian 一陰煎

Sheng Di, Bai Shao, Mai Dong, Dan Shen, Shu Di, Niu Xi, Gan Cao.

生地黃6克 芍藥6克 麥門冬6克 丹參6克 熟地9克 牛膝5克 甘草3克

Qi Stasis Blood Stagnation

Amenorrhea, tongue purple dark with stagnancy spots, pulse deep wiry sluggish

Regulate Qi Activate Blood, Rid of Stagnancy Regulate Menstruation

Xue Fu Zhu Yu Tang 血府逐瘀湯

Dang Gui, Sheng Di, Tao Ren, Hong Hua, Zhi Ke, Chi Shao, Chai Hu, Gan Cao, Jie Geng, Chuan Xiong, Niu Xi.

當歸9克 生地黃9克 桃仁12克 紅花6克 枳殼6克 赤芍6克 柴胡3克 甘草3克 桔梗5克 川芎5克 牛膝9克

Phlegm Damp Blockage

Amenorrhea, prior history of delayed menstruation, scanty flow, pale sticky flow, gradual onset of amenorrhea, gradual onset of weight gain, greasy coating, pulse slippery

Phlegm Damp blocking of Chong Ren

Strengthen Spleen, Dry up Dampness, Dissolve Phlegm

Si Jun Zi Tang + Cang Fu Dao Tan Tang + Dang Gui 四君子湯 + 蒼附導痰湯 + 當歸

Dang Shen, Fu Ling, Bai Zhu, Fu Ling + Cang Zhu, Xiang Fu, Ban Xia, Chen Pi, Dan Nan Xin, Chen Pi, Sheng Jiang, Shen Qu, Dang Gui, Chuan Xiong

Case Study

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Case Study

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Liver Stasis Spleen Deficiency

Regulate Liver and Spleen, Tonify Qi and Nourish Blood

Modified He Gan Tang 和肝湯

He Gan Tang 和肝湯

Experiential formulation of Dr. Fang, He Qian.

Composition: Dang Gui 10, Bai Shao 10, Dang Shen 10, Chai Hu 10, Fu Ling 12, Xiang Fu 10, Bai Zhu 10, Su Geng 6, Da Zao 4 pcs, Bo He 5, Zhi Gan Cao 6, Sheng Jian 3 pcs.

Formulation used on this patient:

Dang Gui 9, Bai Shao 9, Dang Shen 9, Chai Hu 9, Fu Ling 9, Xiang Fu 9, Bai Zhu 9, ~~Su Geng 6~~, Da Zao 4 pcs, Bo He 5, Zhi Gan Cao 6, ~~Sheng Jian 3 pcs~~, **Sheng Shu Di 10 each, Ze Lan 6, Dan Shen 6**. 10 bags. Drink 2 days and stop 1 day

Case Study

Dr. Fang, He Qian 方和謙

10-24-2005 Second Visit

Energy has improved but no period yet. There is some pelvic discomfort with increased vaginal discharge. Bowel movement normal, tongue still pale and pulse even and slow

Previous formulation add Shan Zhu Yu 6, Mai Dong 10, 10 bags and drink every other day.

Case Study

Dr. Fang, He Qian 方和謙

12-15-2005, third visit

Period returned on December 11, scanty flow for two days, dark color, pulse even and slow, tongue pale.

This is Qi and Blood Deficiency therefore the menstrual bleeding is light. We need to tonify Qi and Blood. Use modified Zi Bu Tang 滋補湯

Zi Bu Tang 滋補湯

This is an experiential formulation of Dr. Fang, He Qian 方和謙.

Dang Shen 9, Bai Zhu 9, Fu Ling 9, Zhi Gan Cao 5, Shu Di 9, Bai Shao 9, Dang Gui 9, Gui Zhi 5, Chen Pi 9, Mu Xiang 5, Da Zao 4 pcs

Formulation used for this patient:

Dang Shen 9, Bai Zhu 9, Fu Ling 9, Zhi Gan Cao 6, Shu Di 9, Bai Shao 9, Dang Gui 9, Gui Zhi 5, Chen Pi 9, Mu Xiang 3, Da Zao 4 pcs, **Shu Di 9, Gou Qi Zi 10, Mai Dong 10, Zhi Juang Qi 15**. 12 bags, drink every other day.

Dr. Fang, He Qian 方和謙

1923 –

Chao Yang Hospital, Beijing, chief physician

Famous for difficult cases, pulmonary, heart diseases, hepatic disorders.

Student of one of the last imperial physician
Dr. Zhao, Yun Qing 趙雲卿



Last words

The cause is focused on Liver, Spleen, and Kidney and Kidney deficiency is the main factor.

Currently there are three types of treatments

- Syndrome treatments
- Phasic treatments
- Integrated western medicine and TCM treatments