Clinical Observation on the Combined Use of Acupuncture and Herbal Medicine for Treatment of Chloasma

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Objective: To observe the clinical effects of the combined use of acupuncture and herbal medicine for treatment of chloasma. Methods: Totally 60 patients were randomly divided into a treatment group of 30 cases, treated by acupuncture and herbal medicine, and a control group of 30 cases, administered Vitamin C and Vitamin E. The clinical effects were observed. Results: The total effective rate of the treatment group is 93.3% better than that of the control group (76.7%), the difference was significant (P<0.01). Conclusion: Combined use of acupuncture and herbal medicine may yield definite therapeutic effects in treating chloasma patients.

Key words: chloasma; combined use of acupuncture and herbal medicine; TCM therapy; syndrome differentiation

In recent years, the authors of this essay have treated 30 cases of chloasma with the combined use of acupuncture and herbal medicine, and done contrast analysis with the other 30 cases treated simply by western medicine. The following is the clinical report.

CLINICAL DATA

General Data
In this series, altogether 60 cases were treated. They were all female patients from the outpatient department of Cosmesis Centre of the authors’ hospital, ranging in age from 24 to 49 years, and ranging in the duration of the illness from 4 months to 10 years. The 60 cases were randomly divided into the treatment group (30 cases), and the control group (30 cases). The 30 cases in the treatment group were subdivided into three TCM differential types, namely, the type of stagnation of the liver-qi, the type of deficiency of the spleen and stomach, and the type of deficiency of the liver and kidney.

Diagnostic Criteria
The diagnostic criteria were set based on the Criteria for the Clinical Diagnosis and Therapeutic Effects of Chloasma revised in December 2003 by the group of pigmentary diseases of the Professional Board of Dermatology and Venereology of China Association of Combined Chinese and Western Medicine. 1) Light brown or dark brown spots with clear margin, spreading usually symmetrically on the face, but with no inflammatory signs and squamae; 2) no obvious subjective symptoms; 3) mostly occurring in females after adolescence; 4) the condition being seasonal, mostly severer in summer and milder in winter times; and 5) the patients with pigmentation caused by other diseases, such as dark brown nevi, Riehl’s melanosis and pigmentary actinic high lichen in the zygomatic parts, were excluded:

1. Criteria for enrollment: 1) female patients conforming to the diagnostic criteria, aged 20–50 years; and 2) the patients who could stick to the acupuncture treatment and were willing to cooperate with the researchers.
2. Criteria for exclusion: 1) patients with pigmentation caused by other diseases; and 2) patients with the therapeutic effects unable to be evaluated due to treatment not according to the rules, or with incomplete information.
**METHODS**

**Treatment Group**

1. **Acupuncture treatment:**

   **Facial points:** Shenting (GV 24), Taiyang (EX-HN5), Yintang (EX-HN3), Yangbai (GB 14), Chengqi (ST 1), Sibai (ST 2), Quanliao (SI 20), Jiache (ST 6), Xiaguan (ST 7), Dicang (ST 4), and Chengjiang (CV 24).

   **Body points:** Hegu (LI 4), Zusanli (ST 36), and Sanyinjiao (SP 6).

   The needling methods: The above points were selected according to the actual condition, and the local surrounding needling method could be added. After local sterilization, the filiform needles were inserted superficially beneath the skin of the points. Upon the arrival of qi, the needles were retained for 30 minutes, during which needle-flicking was applied for each point 1–2 times before withdrawal of the needle. The acupuncture treatment was given once every other day, with 10 sessions constituting one treating course.

2. **Herbal medicine treatment:**

   The type of stagnation of the liver-qi was treated with the modified Xiaoyao San (逍遥散 Ease Powder), containing Chai Hu (柴胡 Radix Bupleuri) 10g, Bai Shao (白芍 Radix Paeoniae Alba) 10g, Bai Zhu (白术 Rhizoma Atractylodis Macrocephalae) 10g, Dan Pi (丹皮 Cortex Moutan Radicis) 10g, Zhi Zi (栀子 Fructus Gardeniae) 10g, Guang Yu Jin (广郁金 Radix Curcumae) 10g, Bai Zhi (白芷 Radix Angelicae Dahuricae) 10g, Bai Jiang Can (白僵蚕 Bombyx Batryticatus) 10g, Dang Gui (当归 Radix Angelicae Sinensis) 12g, and Fu Ling (茯苓 Poria) 15g.

   The type of deficiency of the spleen and stomach was treated with the modified Guipi Tang (归脾汤 Decoction for Invigorating the Spleen and Nourishing the Heart), containing Ren Shen (人参 Radix Ginseng) 15g, Bai Zhu (白术 Rhizoma Atractylodis Macrocephalae) 15g, Huang Qi (黄芪 Radix Astragali Mongolici) 15g, Suan Zao Ren (酸枣仁 Semen Ziziphi Spinosae) 15g, Fu Shen (茯神 Poria cum Radix Pini) 30g, Zhi Gan Cao (炙甘草 Radix Glycyrrhizae Preparata) 8g, and Dan Shen (丹参 Radix Salviae Miltiorrhizae) 20g.

   Each dose of the above prescription was decocted twice with water, and mixed together into about 500 ml, which was taken twice daily, in the morning and in the evening respectively, better one hour after meals. When the patient had the symptoms improved, she could stop the administration of the herbal decoction. The therapeutic effects were evaluated after three consecutive courses of the above treatments.

**Control Group**

Oral medication of Vitamin C 200 mg and Vitamin E 100 mg, 3 times daily. The therapeutic effect was evaluated after a 3-months treatment.

During the treating period, patients in both the two groups dropped other medications, and were prohibited to use cosmetics and eat oily, raw, cold, or spicy food.

**Criteria for Therapeutic Effects**

The criteria for the therapeutic effects were made based on the criteria for therapeutic effects of chloasma set by the Professional Board of Dermatology and Venereology of China Association of Combined Chinese and Western Medicine.

Basically cured: The extinction of the pigment area by naked eye vision >90%, the color basically normal, and the decreased index of the scoring evaluation
after treatment $\geq 0.8$. Markedly effective: The extinction of the pigment area by naked eye vision $>60\%$, the color obviously getting lighter, and the decrease index of the scoring evaluation after treatment $\geq 0.5$. Effective: The extinction of the pigment area by naked eye vision $>30\%$, the color getting lighter, and the decreased index of the scoring evaluation after treatment $\geq 0.3$. Ineffective: The extinction of the pigment area by naked eye vision $<30\%$, the color not obviously getting lighter, and the decreased index of the scoring evaluation after treatment $<0.3$.

**RESULTS**

For comparison of clinical therapeutic effects between the two groups, see Table 1.

**DISCUSSION**

Chloasma is a pigmented skin disease occurring on the face. Modern medicine holds that this disease is related with the endocrine disorder, pregnancy, oral medication of contraceptives, metropathy and ovariosis, heredity, oxygen-free radicals, illumination, content of the serum copper, hepatitis, cosmetics, and the emotional changes.

TCM thinks that although the pigmented spot appears on the skin of the face, the etiology is closely related with dysfunction of $qi$, blood, and zang-fu organs inside the body, obstruction of the channels and collaterals, stagnation of $qi$ and blood stasis, and malnutrition of the skin. The TCM patterns of this disease are mainly stagnation of the liver-$qi$, deficiency of the spleen and stomach, and deficiency of the liver and kidney.

Acupuncture at the facial points and the corresponding damaged skin areas can accelerate blood circulation, and promote metabolism and regeneration of the cells, so as to promote the extinction of pigmented spot. Hegu (LI 4) is an important point for treating diseases of the mouth and face. Sanyinjiao (SP 6) is the cross point where the three $yin$ channels of the foot meet. Needling at these two points can yield the effect of regulating channel-$qi$ of the liver, spleen and kidney. Zusanli (ST 36) is the He-sea point of the Stomach Channel of Foot-Yangming, which is known to be the channel full of $qi$ and blood, with the effect of regulating the functions of the spleen and stomach, so as to enrich the ‘acquired’ and strengthen the body constitution.

The TCM differential herbal treatment can produce the effects of regulating the functions of the zang-fu organs, dredging the channels and collaterals, promoting blood circulation to remove blood stasis, and regulating $qi$ and tonifying blood, so as to extinct the facial pigmented spots.

Modern medicine has also found that the patients with chloasma tend to have hemodynamic abnormality, which corresponds to the TCM term of blood stasis. It has been proved that the occurrence of chloasma has certain relationship with the increase of blood viscosity and the microcirculatory disturbance.

Treatment of chloasma with the combined use of acupuncture and herbal medicine can yield definite therapeutic effects with no allergic reactions and side effects, which is worthy to be recommended.

**REFERENCES**


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