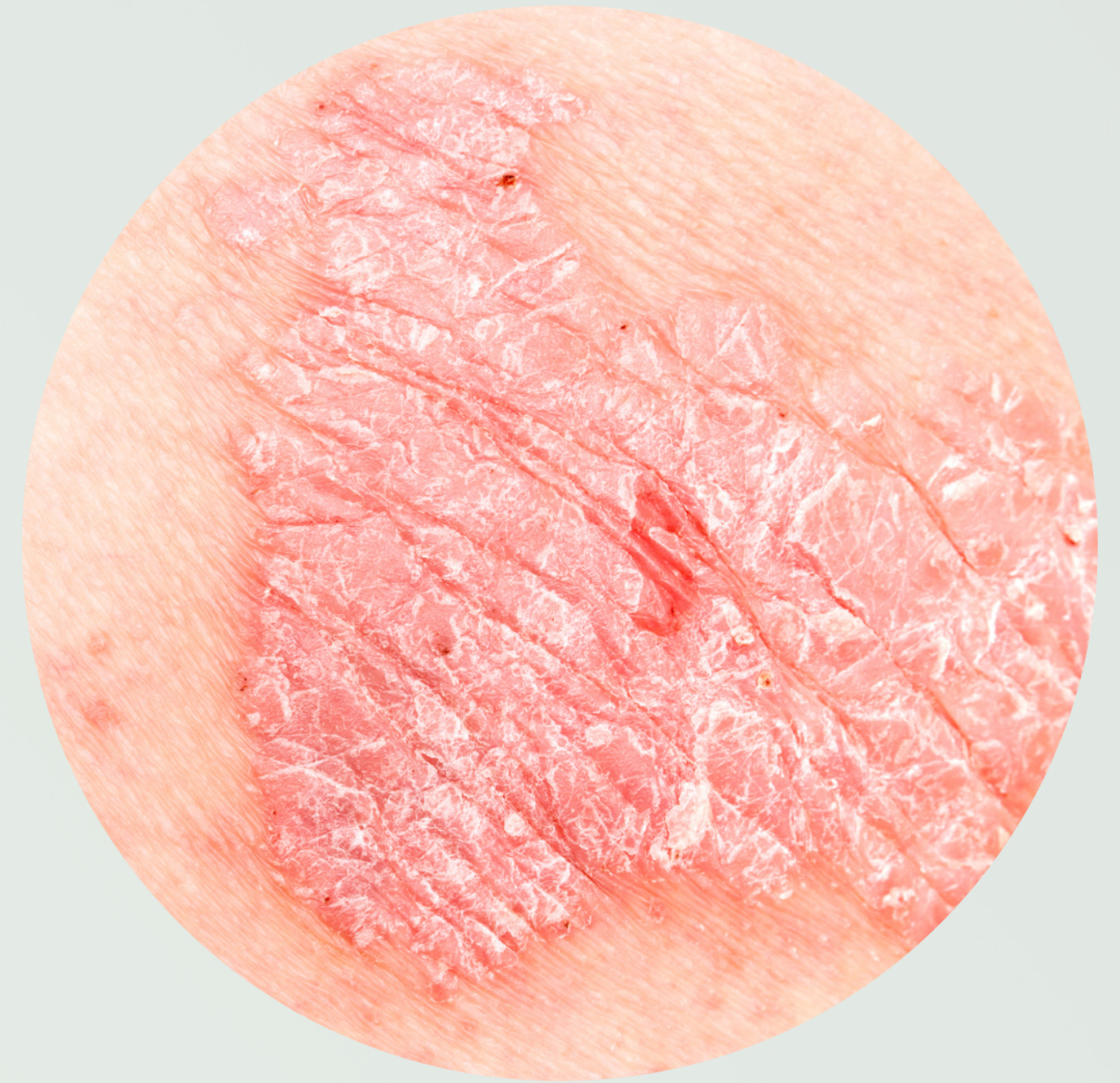


WELCOME!

**TREATING PSORIASIS WITH
CHINESE HERBAL MEDICINE**

with Sabine Schmitz



ABOUT ME

30 years of combined experience of TCM and various areas of Western medicine!

Western Medicine:

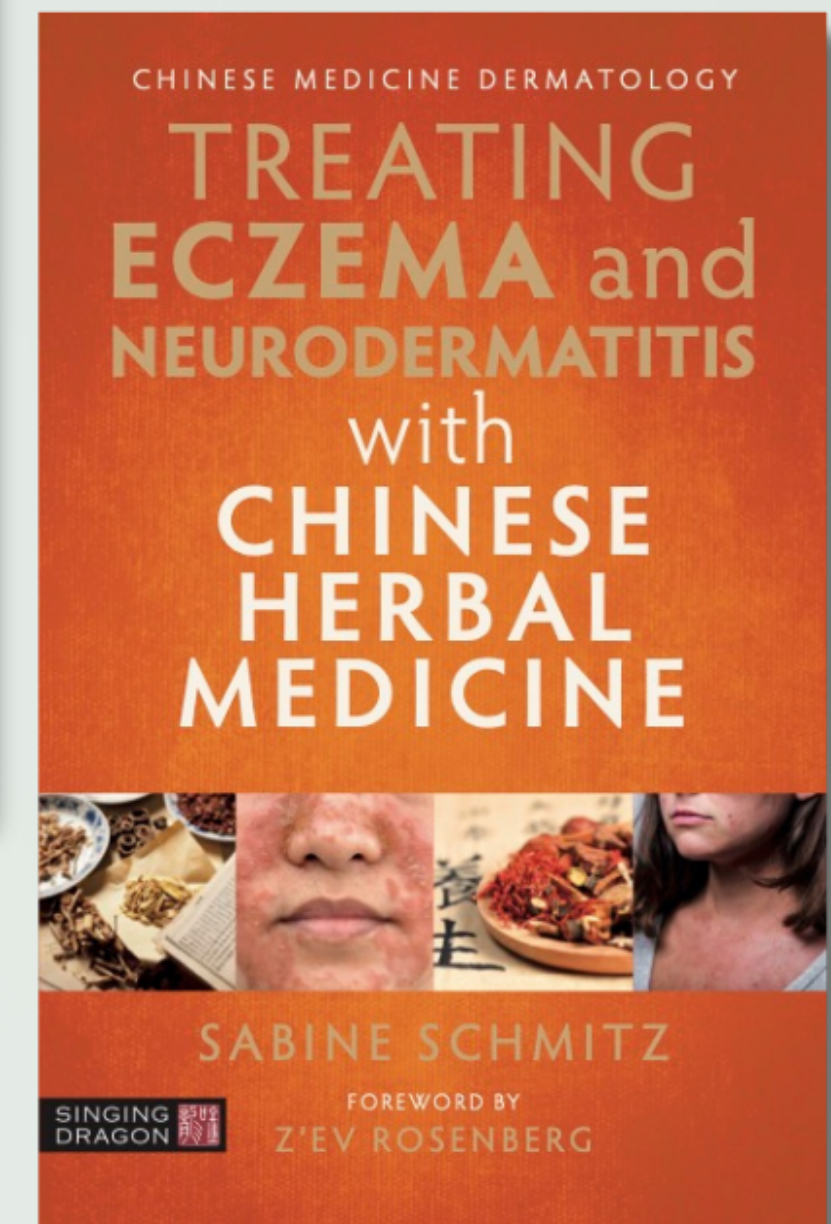
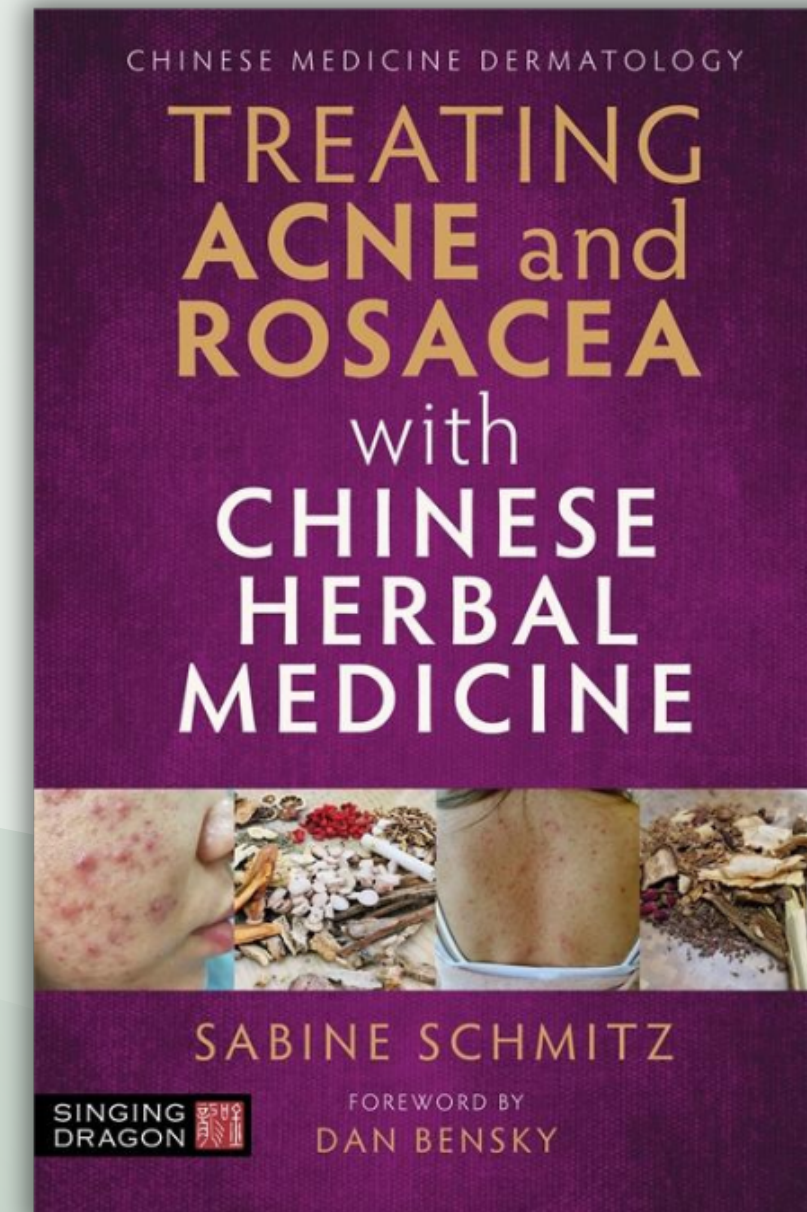
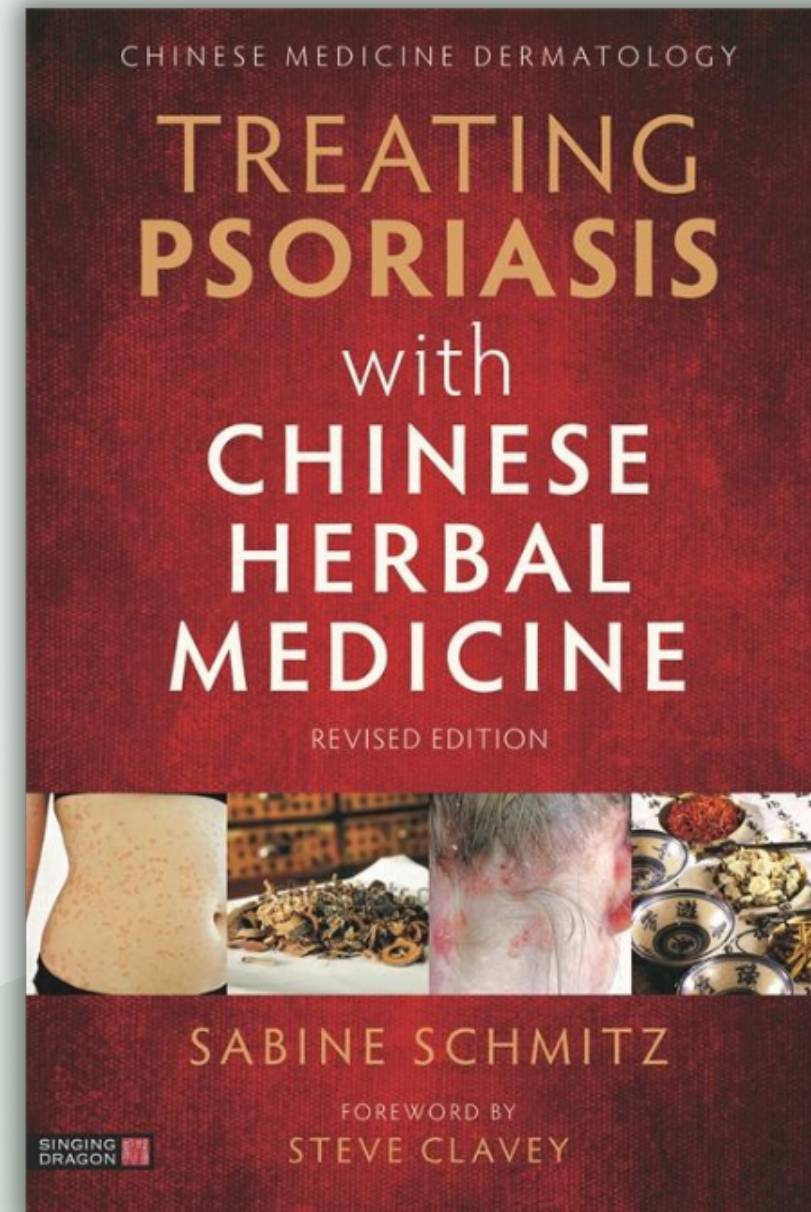
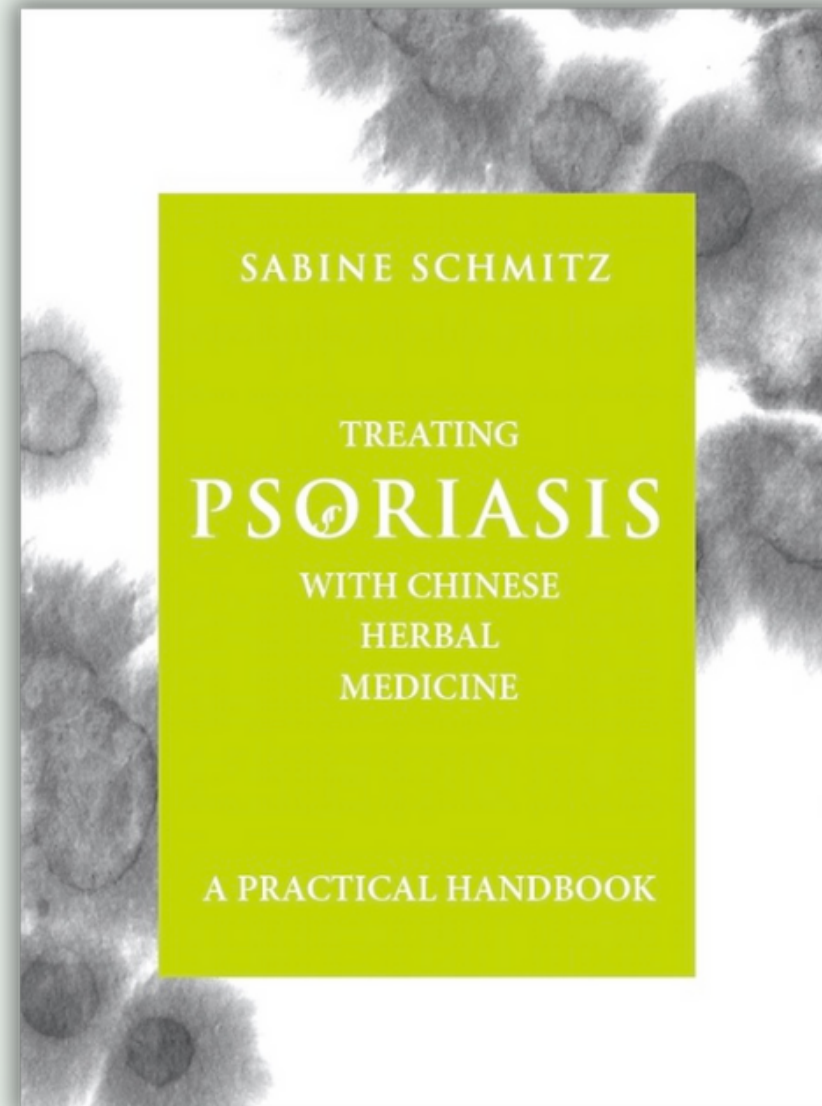
- **Nursing diploma**
- Diploma: **Medical Technical Assistant**
- Licensed **Natural Health Professional**
- Worked in hospitals, laboratories, universities, and national and international clinical research for the pharmaceutical industry.

TCM:

- 20 years of experience in TCM, self-employed for more than for 15 years
- Acu diploma, herbal medicine diploma
- **Master studies in China** (M.Med. TCM, China)
- Majoring in Chinese medical dermatology
- **Author** of TCM Dermatology books
- Founder and owner of **CHINAMED COSMETICS**: natural, modern herbal skincare based on the principles of TCM.



Published **books**:



TCM **Cosmetics** www.chinamed-cosmetics.com



TCM can do more than just a tea!

WHAT'S THE WESTERN MED DIAGNOSIS?

WRONG QUESTION !
IN TCM DERMATOLOGY,
WE TREAT WHAT WE SEE!

SKIN LESION
TONGUE
PULSE CONDITION



In these challenging times,
our medicine is more needed than ever.



Today we solely focus on **Psoriasis** from the TCM point of view.

And you will learn to recognize the TCM syndrome by looking at the skin lesion!

Focus: independently working because understanding the causative TCM pattern.

My treatment approach:

- Practical
- Flexible
- Effective



CONTENTS

Definition of PSOR acc. to Western medicine	01
Risk factors of PSOR	02
Main types of PSOR acc. to Western medicine	03
Current treatment options in Western medicine	04
TCM syndrome differentiation	05
5 TCM syndromes in very detail	06

This is what to expect from me.

But what are the requirements to you?

- Being familiar with TCM syndromes
- Tongue and pulse diagnosis
- Basic education in Chinese herbal medicine.
- Patience
- Willingness to think and treat in a different way
- And of course, being able to see a lot of suffering.

Psoriasis is a very burdensome skin disease. It's definitely not mild!



PSORIASIS

Western definition:

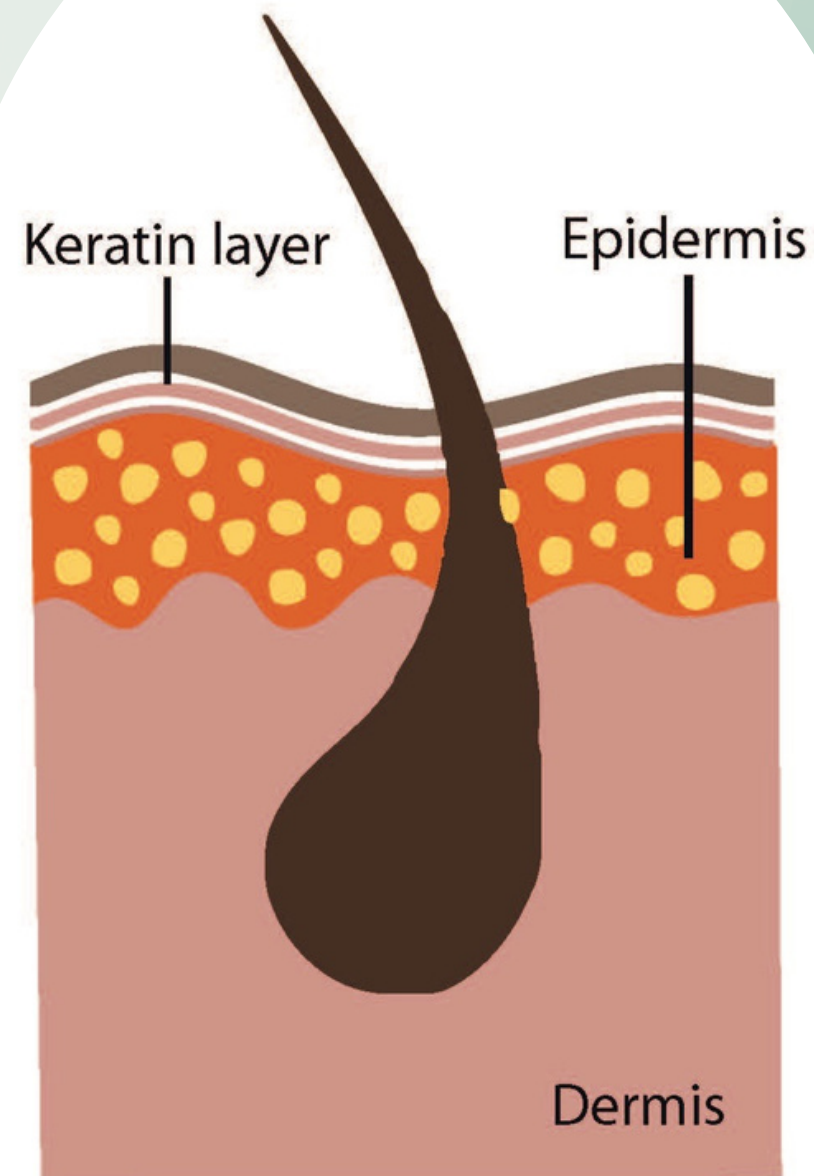
- A **recurring, chronic inflammatory skin disease**
- **Etiology is not clear**, but it is linked to genetic and immune system abnormalities
- Resulting in **hyperproliferation** of keratinocytes of the epidermis and **inflammation** of the skin.

Symptoms:

- Patches of thick, red skin covered with silvery-white scales
- Skin that itches, burns and does feel painful
- Dry, cracked skin that itches or bleeds
- Typically on the elbows, knees, scalp, trunk, palms, and soles of the feet
- But also nails: nail psoriasis
- Or also swollen and tender joints in psoriatic arthritis.

PSORIASIS

Healthy Skin



Psoriasis



RISK FACTORS OF PSORIASIS

According to Western medicine:

- Genetic factors
- Increased **stress or psycho-emotional aspects**
- Infections including the common cold, upper respiratory infections, tonsillitis and **streptococcal throat infections**
- **Alcohol, smoking**
- Obesity
- Abrupt discontinuation of systemic superpotent topical corticosteroids, antihypertensive drugs and herbal patent formulas for joint pain
- HIV infection and an acquired immune deficiency.

What causes/factors do I observe in my TCM practice most often:

- Stress or psycho-emotional aspects
- Alcohol, smoking, diet issues
- But also upper respiratory infections - not uncommon.

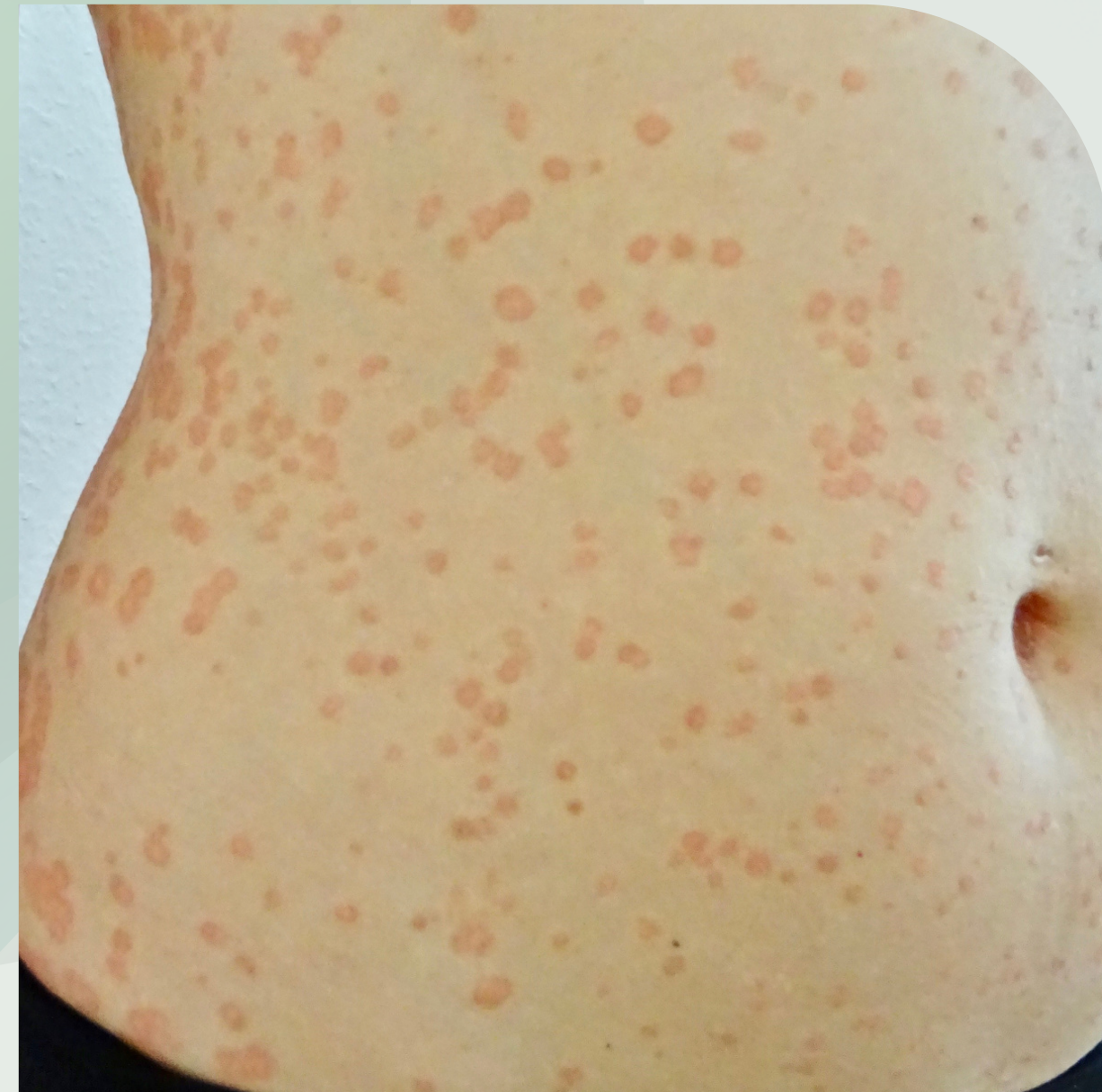
MAIN TYPES OF PSORIASIS

Chronic Plaque Type (*Psoriasis Vulgaris*): most common form
Progressive Period - Stable Period - Regressive Period



MAIN TYPES OF PSORIASIS

Guttate Type: second most common type of psoriasis



MAIN TYPES OF PSORIASIS

Erythrodermic type: serious inflammatory form of psoriasis that affects most of the body surface.



MAIN TYPES OF PSORIASIS

Pustular Type: a relatively uncommon type of psoriasis.



MAIN TYPES OF PSORIASIS

Psoriatic Arthritis (PA) : when the joint are affected.



MAIN TYPES OF PSORIASIS

Inverse type: usually in skin folds (armpits, around the genitals and the buttocks), under the breasts.



CURRENT TREATMENT OPTIONS IN WESTERN MEDICINE

Systemic treatments

anti-proliferative and
immune-modulating
functions

Acitretin
Ciclosporine
Methotrexate (MTX)
Vitamin D3
derivatives
(calcitriol, tacalcitol)

Topical treatments

for mild to
moderate cases >>
reducing inflammation,
slowing down the growth
and build-up of skin cells

Steroids, such as
prednisone or
deltasone

UVA / B Phototherapy

Advantages and Disadvantages of Current Treatment Options in Western Medicine:

Alleviates the symptoms of psoriasis relatively fast but only for a short time, without any impact on the underlying cause of the disease.

Systemic treatment leaves patients prone to infections.

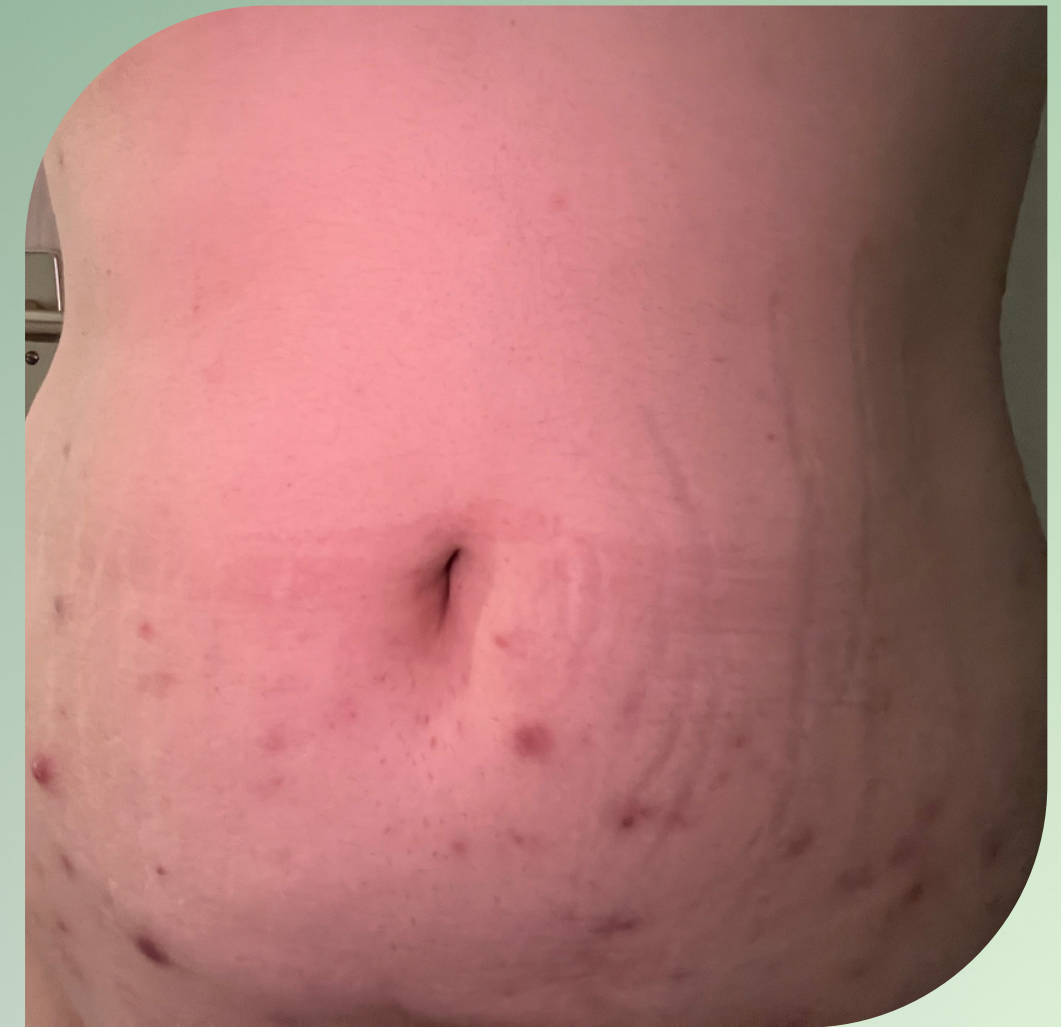
It can cause high blood pressure and kidney problems

Nausea, vomiting, diarrhea, dizziness, stomach, back and joint pain.

UV exposure: skin may redden, itch and burn. Cumulative risk of skin cancer.

Patients taking such drugs need regular medical supervision.

Side effects from immunosuppressive therapy.



If everyone is different, how can you treat them all the same?

How can a treatment be effective if you don't address the underlying cause?

This is just not plausible.



In contrast:

- **TCM** treats the **underlying cause** corresponding with the individual clinical manifestation on the skin
- Employs **various therapeutic methods**
- Combines both **internal and external** treatments.



How do I work with psoriasis patients in my practice?

I would call it Clinical Chinese medicine - practical, very simple, *zàng fǔ* based!

- Diagnosing the exact **TCM syndrome** by checking the skin, pulse and tongue, signs & symptoms
- Open minded choosing the **TCM formula** acc. to the patient needs
 - > by using **classic formulas**, plus **modifications**
 - > working with herbal couples, or blocks when no formula suits or comes up to mind.
- Patient education and counseling
- Lifestyle management.
- Regular **Follow-up's** and **adjustments**/modifications.



How to become experienced:

TCM patterns are complex, and so many skin diseases are deep-rooted and resistant to treatment.

The challenge of diagnosing and treating skin diseases requires a highly skilled ability to observe and to analyze.

Training, training, training!

It's worth mentioning on your **website** that you specialize in **TCM dermatology**; otherwise, these cases may not find their way to you.

Treat, treat, repeat!



SPECIALISATION ENSURES:

- Development of clinical expertise in a field for the practitioner
- Highest quality in medical service for patients
- Patient-specific care
- Maybe, develop something new / your own unique style
- Help inform education and guidelines for the next generation.

But it also increases the awareness and acceptance of our wonderful medicine - TCM!

Dare to specialise!





Step by step!

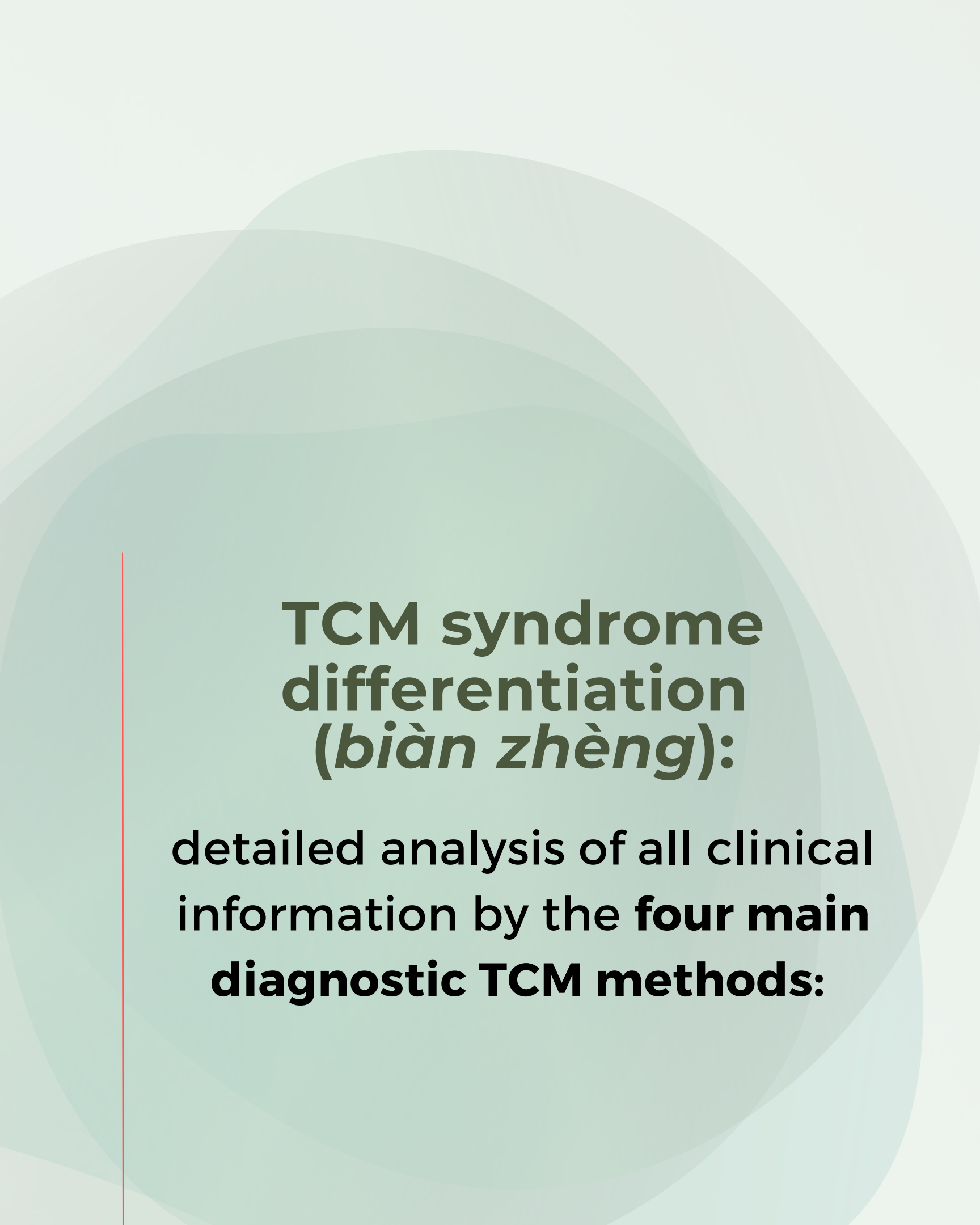
TCM diagnostic process is a kind of
detective work ! You are the detective.

It is our duty as TCM doctors to solve the puzzle.



And how do we do this in practice?





TCM syndrome differentiation (*biàn zhèng*):

detailed analysis of all clinical
information by the **four main
diagnostic TCM methods**:

INSPECTION
(OBSERVATION)

OLFACTION
(SMELLING)

AUSCULTATION
(LISTENING)

PALPATION
(FEELING)

HANDS-ON PROCESS FOR PSORIASIS STEP BY STEP.

INSPECTION (OBSERVATION)

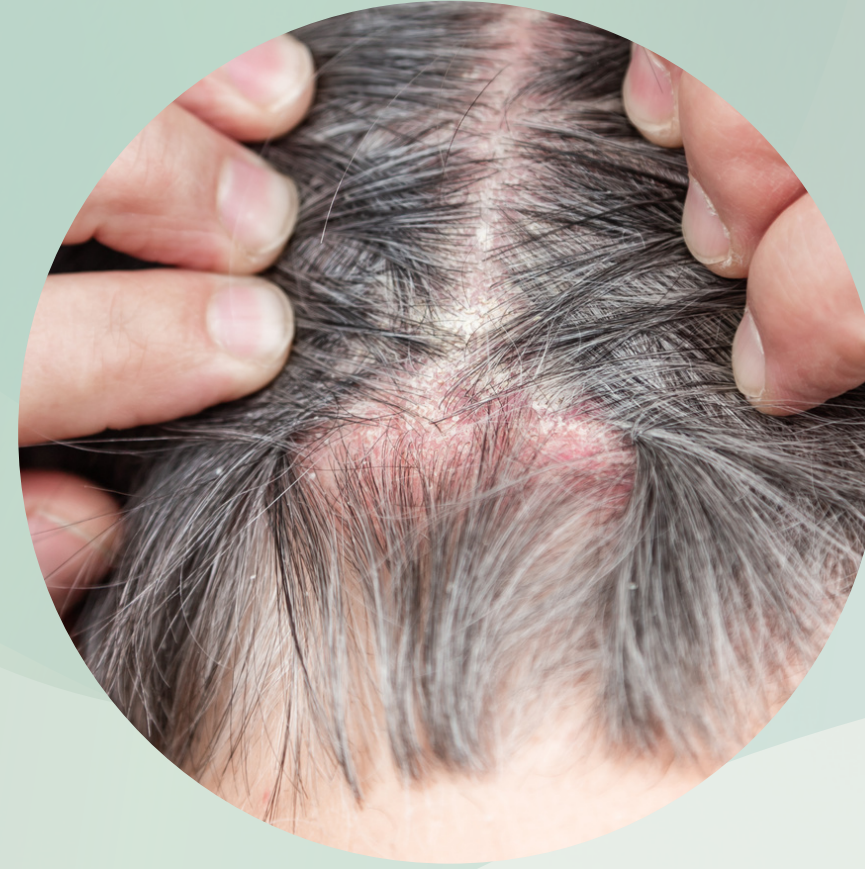
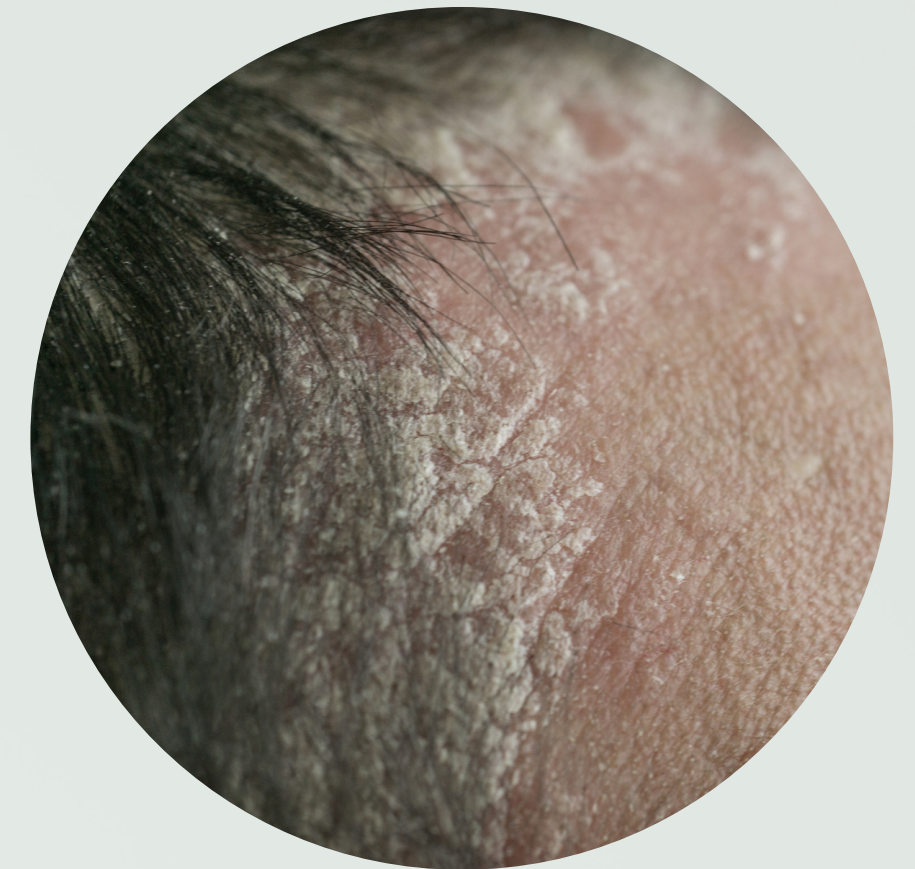
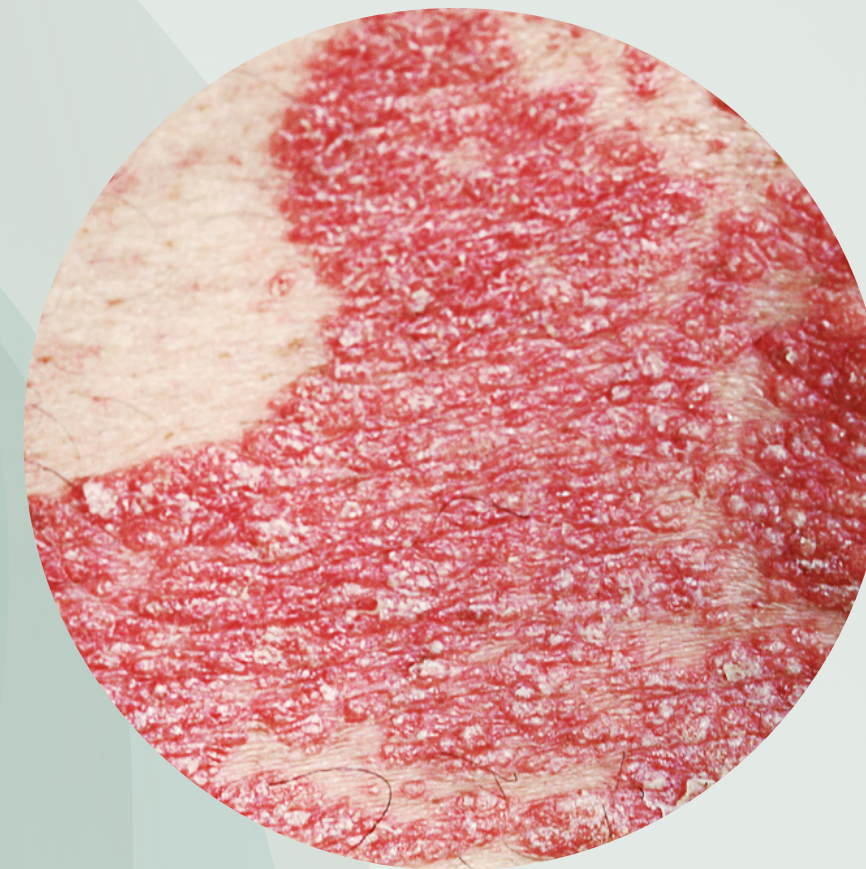
When treating a skin disease, always place the focus on the skin first! We treat what we see!

- When the pt. comes in: patient's complexion & posture
 - > pale, yellowish... bent forward or upright
- Our main focus is on the **appearance & localization of the skin lesion:**
 - > inflammatory lesions or pus and discharge, scaling
 - > the location: head or lower parts
- And of course, tongue diagnosis.

Make sure to use daylight while inspecting the skin, as there are colour nuances on the skin that are difficult to see in less optimal lighting conditions.



Example pictures of the skin:



Tongue: A brief repetition



- Normal size.
- Not thick.
- Light red (pink, vital) coloration.
- Thin white, moist coating.



What we usually see in practice:



AUSCULTATION (LISTENING)

- Patient's voice
- Patient's report – symptoms and history.

More data is gathered through **questioning** the patient:

- Onset/trigger and duration
- Accompanying symptoms: eg. pain, warmth/heat sensation, any sensations of burning, itching, or heat on the lesion.
- Don't forget to ask about the aggravating or alleviating factors.

My list of key factors for making psoriasis worse:

*stress, alcohol and/or nicotine, diet with hot, spicy, oily foods,
too much sweets but also a bad digestion, such as constipation.*



Further crucial factors (keep the big picture in mind):

- **Emotions**
- **Sleep**
- **Digestion**
- **Diet**
- **Lifestyle** (possibly stress, overwork, night shifts)
- **Environment** (work with chemicals & climate, or living location)
- **Menstrual cycle** with female patients.
- Add on: Never forget to ask about additional **medication**.
- Previous antibiotics administration not uncommon – damage the Spleen for instance; or cortisone: brings internal heat.
- Previous cold, fever, etc. - Onset factors.



OLFACTION (SMELLING)

- Body odour
- Smelly breath.

This usually goes unnoticed! You really don't have to ask...

Examples:

- Foul breath can be due to heat in the stomach, indigestion, caries, and an unclean mouth...
- Sour breath indicates food accumulation in the stomach...
- The offensive smell of sweat, usually indicates heat syndromes...
- Or just too much perfume: phlegm!



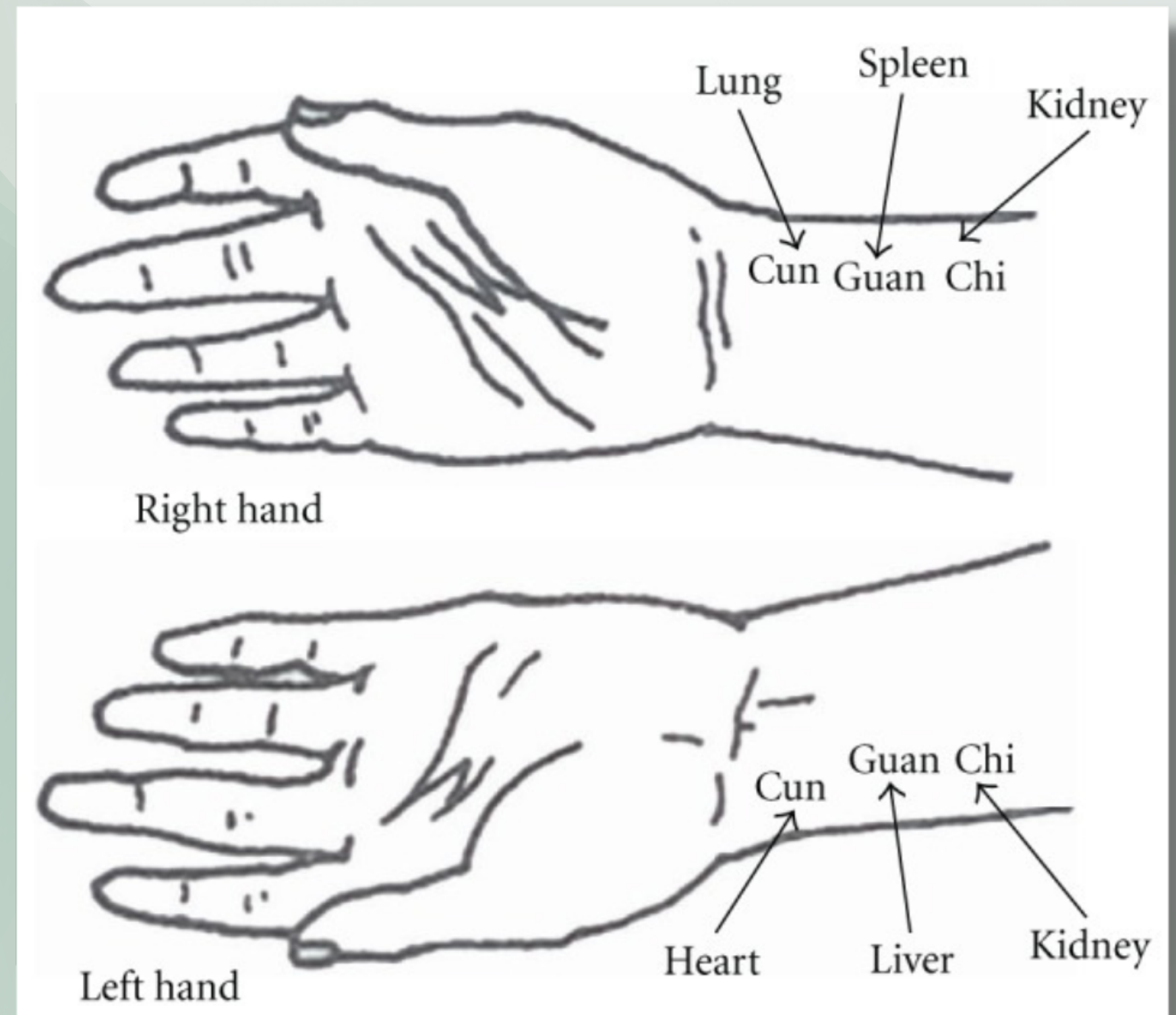
PALPATION (FEELING)

- Consistency and mobility of the **lesion**
- Skin: **Pain** on touch?

- **Pulse diagnosis according to TCM:**

We check the frequency, depth, strength and rhythm of the pulse.

- CUN: Information on the area above the diaphragm.
- GUAN: Area between diaphragm and navel.
- CHI: Below the navel.



CAVE: What might falsify pulse?

- **Medication**

Antibiotics: cold, dampness > slow, slippery

Cortisone: heat > rapid

Beta blockers: cold > slow.

- **Nervousness** and tension, **coffeine**: heat > fast
- **Main meal** or during **pregnancy**: slippery
- Very rare: **dislocation** = atypical course.

Whenever you feel an irregular pulse, please advise your patient to consult their general practitioner or cardiologist. It would be careless to not refer out for issues beyond our scope of practice.





Gathered all info & identified
TCM syndrome.



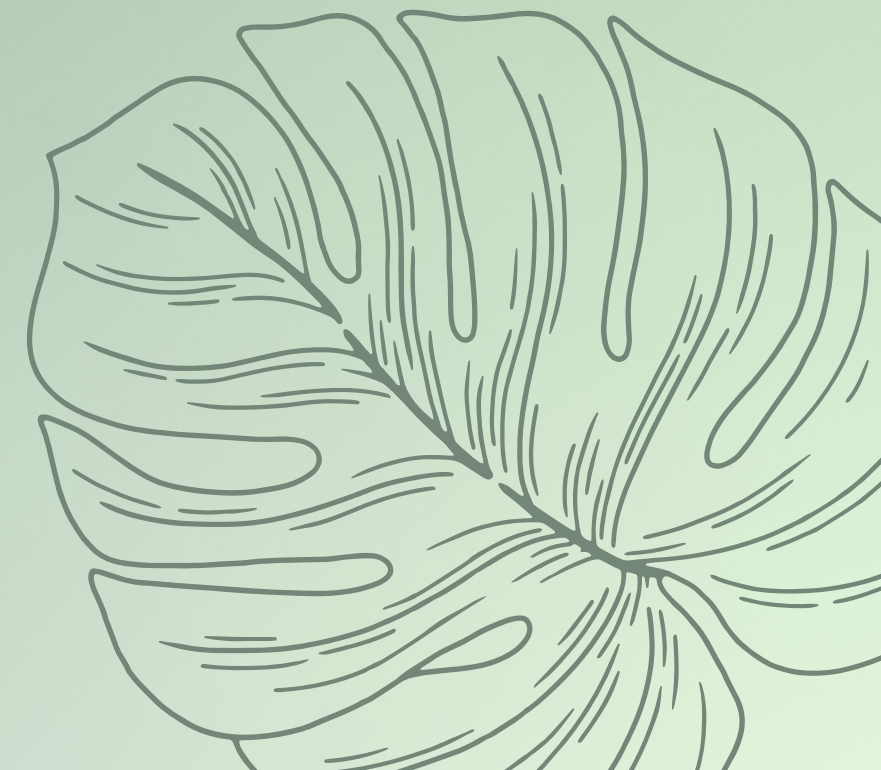
WE TREAT WHAT WE SEE !

The TCM pattern, and not the name of the skin disease.
This is what makes TCM individual, flexible and effective!

And now? How to proceed

ALMOST ALWAYS WITH HERBS
- Internally & Externally -

Diet and skin care advice.
Acupuncture is a can, not a must.





Fresh herbs

*Raw drugs as decoction: jiān jì
I would NEVER deviate from this!*

- Most effective form of treatment.
- Internal and external use.
- Indispensable for chronic and complex skin diseases.
- Fast and effective.
- For patients: easy to prepare and drink.

We are the specialists.
Patients seek our advice.
Usually they have tried a lot before.

No discussion: Herbs are the answer.



A short word on *raw herbs*!

*Chapter 77 Discourse on Expounding the Five Faults
(success and failure in treatment)*

Wang Bing's comment:

**“If the physician's outer appearance is soft and weak,
the patient will not believe his words.”**



Preparation & ingestion:

- Dosages: for decoctions, per bag
- Granules: Calculate the grams per bag.
At least 12 g per day, divided into two dosages.
- Ingestion: Usually lukewarm.
- Frequency: 2-3 times/day.
- 100-150 ml per dose.
- Time gap (30 min) from meals!

Decoctions are not a highlight for taste buds. However, the tea's purpose is to work, not taste. Patients can drink a sip of tea or juice or eat a small cookie afterwards.



External application: Options

Important: WET TO WET, DRY TO DRY!

- For psoriasis usually: **Herbal washes and wet compresses.**
- Cold compresses very good against inflammations and pus.
- **Ointments**, when the skin is closed! Very effective!
- Examples are provided for each pattern.
- My very favorite at the end of this ppt.







TCM Syndromes

Heat Stagnation in the Liver Meridian

01

Dampness – Heat

02

Wind – Heat

03

Blood Deficiency and Wind Dryness

04

Blood Stagnation

05

Analogies between macrocosm and microcosm

Wind:

Rapid onset, changing localization, *often on upper parts of the body*, severe itching, dryness and scaling.
Psor: small lesions

Heat > fire:

severe, intense!
Any part of the body, but usually upper part.
Red, violet, warm/hot, thick/swollen, burning, pain, bleeding, pus.

Summer heat:

Sudden onset.
Red, warm, often painful. Papules, pustules, erythema.

Dampness:

Slow onset, sluggish. Recurrent.
Lower body. Papules, watery thick blisters, pustules, ulcerations, secretion.

Dryness:

Chronic, not acute. Dry skin, hair, nails, mucous membranes. Itching and scaling.
(blood deficiency)

Cold:

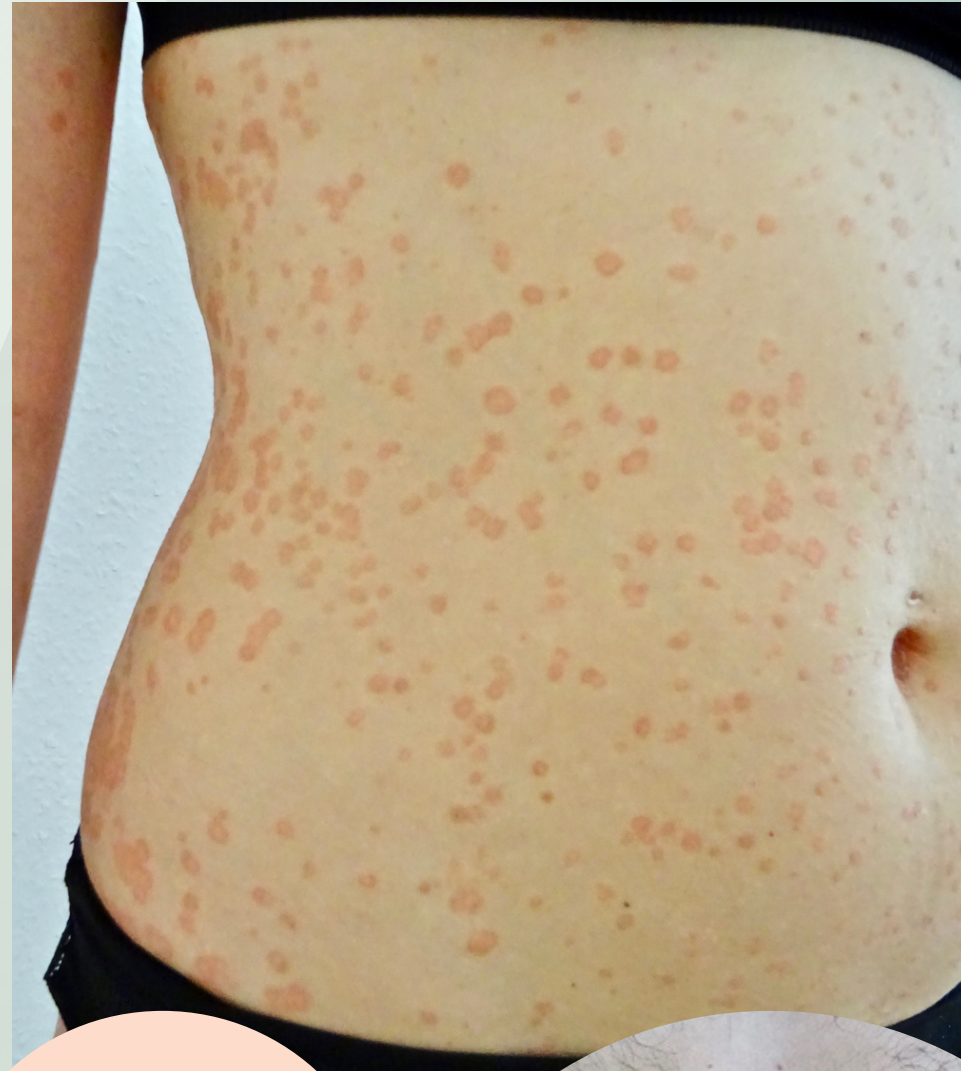
Color usually pale, blue, purple. Lesions often not elastic, are hard, Localization is limited.
Only parts on exposure.

Natural factors are linked to what happens within our body!

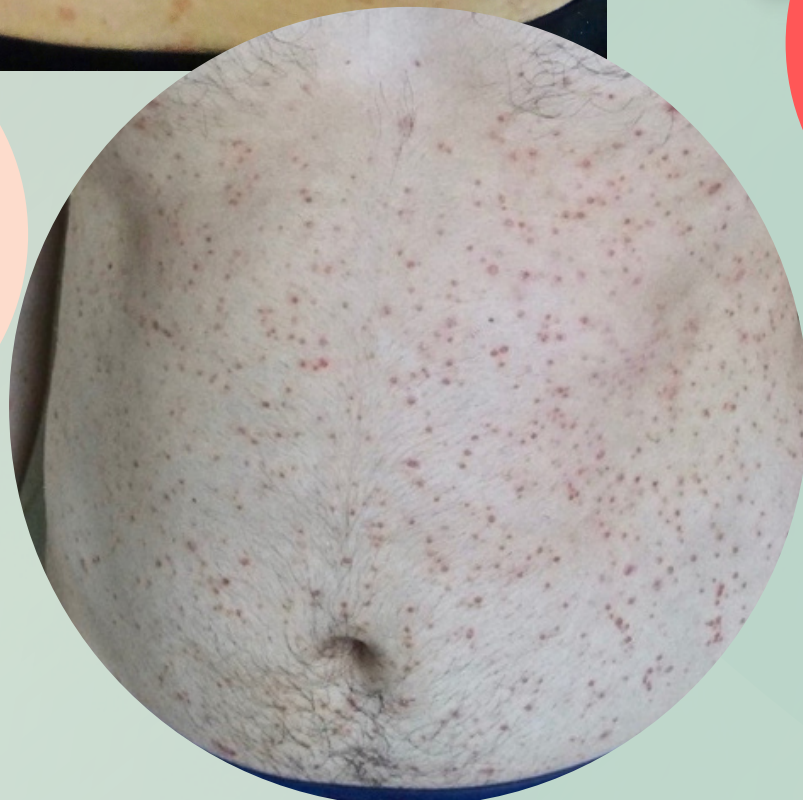
Characteristics of exogenous factors showing on the skin!
Each TCM syndrome has usually one predominant feature.

In psoriasis most important: **Heat, fire, wind (in combination with heat), dampness (combi with heat), dryness!**

Example pictures: psoriasis



wind-
heat



heat



fire



Example pictures: psoriasis



dryness



damp-
heat



Diagnosing by evaluating:

- **Location**
- **Colour**
- **Shape**
- **Feature !**

1. Heat stagnation in the Liver channel - *Gān Jīng Yù Rè*

Gan - Liver, *Jing* - channel, *Yu* - stagnation, *Re* - heat.

One of the **most common patterns in today's society**:

Le-qi-stagnation >> upward rising of heat >>

Emotions serve as trigger & aggravation after anger/rage, frustration or after arguments and in stressful situations.

Other negative factors: alcohol , cigarettes, spicy food.

Skin:

- Heat, a yáng pathogen, tends to first affect the head
- Psoriasis will be most severe at the top of the head and/or on the hairline
- Red, hot and thick skin lesions in varying sizes
- Itching due to internal wind (caused by dryness and blood deficiency)
- Skin bleeds easily after scratching (“Auspitz phenomena”).

1. Heat stagnation in the Liver channel

PMS 170	PMS 171	PMS 172	PMS 173	PMS 174
PMS 177	PMS 178	Warm Red	PMS 179	PMS 180
PMS 1775	PMS 1785	PMS 1788	PMS 1795	PMS 1805
PMS 1777	PMS 1787	Red 032	PMS 1797	PMS 1807

Different levels of heat > fire!

1. Heat stagnation in the Liver channel - *Gān Jīng Yù Rè*

Other key symptoms:

- Bitter taste in mouth and dry throat
- Irritability, often talk quite loudly
- Dry stools, dark yellow urine
- *Women*: Menstrual irregularities, dysmenorrhea or breast tenderness/pain; skin worsens before or during periods; sweating before menses + odor.



Tongue:

- Red (especially on borders) - indication of internal heat, *borders: Liver area*
- Coating - yellow. Thickness of tongue coating depends on degree of damp-heat.

Pulse:

Wiry, rapid and powerful.



1. Heat stagnation in the Liver channel



1. Heat stagnation in the Liver channel



1. Heat stagnation in the Liver channel



1. Heat stagnation in the Liver channel



1. Heat stagnation in the Liver channel



1. Heat stagnation in the Liver channel - *Gān Jīng Yù Rè*

Therapeutic principle:

Drain excess heat (fire) from the Liver channel in order to relieve the inflammation of the skin.

Formula:

Lóng Dǎn Xiè Gān Tāng

(Gentian Decoction to Drain the Liver)

1. Heat stagnation in the Liver channel - *Gān Jīng Yù Rè*

Lóng Dǎn Xiè Gān Tāng

lóng dǎn cǎo (Gentianiae, Radix) 3-6 g

huáng qín (Scutellariae, Radix) 9 g

zhī zǐ (Gardeniae, Fructus) 9-15 g

chái hú (Bupleuri, Radix) 9 g

mù tōng (Akebiae, Caulis) 9 g (not available in GER)

chē qián zǐ (Plantaginis, Semen) 9 g

zé xiè (Alismatis, Rhizoma) 12 g

shēng dì huáng (Rehmanniae Glutinosae, Radix) 15-30 g

dāng guī (Angelicae Sinensis, Radix) 9 g

gān cǎo (Glycyrrhizae Uralensis, Radix) 6 g

Attention: Because of the cold and draining properties of these herbs, this formula should be used with caution in patients with qì and yīn deficiencies.

1. Heat stagnation in the Liver channel - *Gān Jīng Yù Rè*

Modifications:

- Intense red and very thick, hypertrophic plaques: + *tǔ fú líng* 30 g.
- ++ Heat clearing effect: + *huáng lián* 3-5 g
- Later on: + *xià kū cǎo* 9 g
- Very thick and red lesions, especially on the scalp, add *bái xiān pí* 12 g or *bái huā shé shé cǎo* 10-12 g
- Itching: + *yè jiāo téng* 30 g, or *bái xiān pí* 12-15 g
- Menstrual pain with dark blood and clots: + *yì mǔ cǎo* 9-12 g
- Constipation: + (*chǎo*) *dà huáng* 9 g
- Red eyes, and guiding herb face: + *jú huā* 9 g

1. Heat stagnation in the Liver channel - *Gān Jīng Yù Rè*

External treatments:

Clear heat, reduce redness and swelling >

*kǔ shēn
dì fū zǐ
bái xiān pí
shé chuáng zǐ*

*kǔ shēn
dì fū zǐ
bái xiān pí
huáng bǎi
huáng qín*

*huáng bǎi
huáng qín
huáng lián*

+/- Jīn yín huā, pú gōng yīng or tǔ fú líng.

Or *tǔ fú líng* as stand alone herb.



Secret Weapon!

1. Heat stagnation in the Liver channel - *Gān Jīng Yù Rè*

Diet advice:

AVOID foods and drinks that tend to produce internal heat

Alcohol, smoking and oily food

Pepper, chili, curry, onion, garlic, coriander and other pungent spices.

AVOID foods and drinks which create dampness and heat

Meat and fatty food

Sweet and sugary drinks.

Instead:

Mild spices, fresh food without additives, fruits and vegetables

What about lemon water instead of alcohol, or green tea?



A short word on *fā wù* !

Fā - to emit, *wù* - a material or substance.

Fā wù describes a specific category of food in Chinese medicine that enhances or worsens disease rather than prevent it.

- tends to be hot
- stimulating

In case of red-colored skin lesions due to psoriasis, heat is already predominant. When *fā wù* food is consumed, it adds even more heat to the pre-existing heat, and thus makes the skin rash worse.

- Seafood (crabs, shrimp, lobster)
- Chicken
- Peanuts
- Smoking, alcohol
- Hot spices.