

Driving Out the Demons and Snakes

Gu Syndrome: A Forgotten Clinical Approach to Chronic Parasitism

By Heiner Fruehauf

*First published in
The Journal of Chinese Medicine
(May 1998)*

As the field of Oriental medicine matures in a modern environment, we are beginning to become aware of the enormous dimensions that this field encompasses. While ten years ago the Western public still thought of Oriental medicine as a synonym for acupuncture, most practitioners have now broadened their understanding of the term to something that includes acupuncture, moxibustion, herbs, dietetics and qigong exercises. Although other clinical approaches that once shaped the face of Chinese medicine, such as Daoist psychotherapy or the application of herbs to acupuncture points, remain forgotten, there is good reason to believe that in time they will be unearthed and put to use in a modern clinical context.

This presentation is an attempt to participate in the process of ‘medical archaeology’ by exploring one of the submerged areas of Oriental medicine, namely the complex and variegated clinical approach to the diagnosis and treatment of *Gu* syndrome (*gu zheng*). A review of the modern research literature shows that this topic has remained virtually unexplored in both China and the West¹. Although there are too many classical references to entirely ignore the phenomenon of *Gu* syndrome, mainland Chinese scholars generally dismiss it as an “ancient, feudalist and superstitious” belief in demons and exorcist practices that has little or no value in modern clinical practice. However, a close examination of the original texts illuminates the mysterious concept of *Gu* syndrome as a valid clinical approach that may potentially provide an answer to the many invisible ‘demons’ that plague patients in a modern age, namely systemic funguses, parasites, viruses and other hidden pathogens.



Cultural and Medical Concepts of Gu

Historically, the term *Gu* was first introduced as a metaphor for stagnancy, debauchery, degeneration and hidden evil. The words *gudao* (the way of *Gu*) and *wugu* (shamanic *Gu* practice) are mentioned in one of China's earliest historical records as a reference to black magic used to kill or confuse others, "Shamanic *Gu* practice entails the administration of poison to people, causing them to forget who they are"². The *Book of Records* (Shiji), moreover reports that in 91 BCE a *Gu* incident resulted in the annihilation of tens of thousands of people. The unsuspecting victims were reportedly killed by the black magic practice of putting spell-cast wooden puppets into the ground close to them³. In this context, the term '*Gu*' describes a situation where the attackers were in the dark, while the victims did not know what was happening to them. It was this original meaning a type of yin (hidden) evil that is doing harm to people's mental and physical well being that became the trademark of all other *Gu* phenomena in Chinese cultural history, including the medical concept discussed in this essay.

It is the mother matrix of Chinese civilisation, the *Yijing* (*Book of Change*), that provides the earliest clues for an understanding of the medical connotations that were originally associated with the term *Gu*. Hexagram eighteen is entitled *Gu*, here most often translated as 'Degeneration'. It is formed by the trigram *xun* (wind) below and the trigram *geng* (mountain) above.

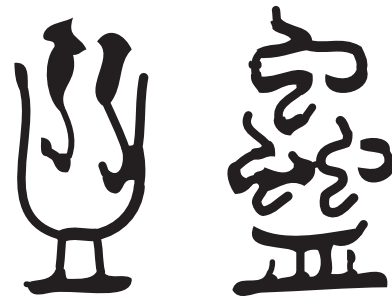


Hexagram 18: *Gu*/Degeneration

Classical commentators have remarked that this particular hexagram describes an energetic situation where a feeble wind cannot penetrate the dense area at the mountain's base, creating a place that does not receive air and thus becomes decayed and rotten. According to the movement oriented philosophy of the *Yijing* that laid the foundation of all Daoist sciences, including Chinese medicine, movement means life and health, stagnation means death and disease. In the broad cultural context of the *Yijing*, *Gu* thus marks a

state of extreme stagnation where corruption and decay have already manifested and can no longer be ignored. Whether this occurs in society as a whole or in the microcosm of the human body, the oracle advises that only drastic (albeit thoughtful) action can turn this serious situation around. *Gu*, in short, is the ancient Chinese symbol for extreme pathological yin the dark side of life, the worst nightmare of any human being. It represents darkness, rotteness, slithering vermin, poisonous snakes, betrayal, black magic, backstabbing murder and in medical terms, progressive organ decay accompanied by torturous pain and insanity.

The Chinese pictogram for *Gu* yields similar information. Brilliantly exemplifying the multidimensional quality of the symbolist mode of expression, the character *Gu* captures both the concept of decay as well as its most pertinent cultural and medical manifestations. Since the beginning of Chinese writing approximately 3,500 years ago, it has portrayed either two or three worms squirming in a vessel. In the words of a traditional commentator "*Gu* is if a cooking vessel remains unused for a long time and worms start to grow in it"⁴.



Ancient pictograms for *Gu*: Worms in a pot

This symbol also reflects a bizarre yet widespread practice of 'black alchemy'. Many traditional medical texts define *Gu* as the verminous manifestation of evil that appears when a wide variety of toxic worms and insects are locked into a vessel, where they naturally become each others prey. After a period ranging from three to twelve months, only one snake-like worm remains, which is said to contain the vicious and toxic potential of all the others. The 'seed' of the '*Gu* worm' (*gu chong*), in a procedure of which the technical details remain unclear but which nevertheless can be classified as an early example of biological warfare, was then used to poison other people. The victim of these uncanny machinations appeared to die from a chronic disease and *Gu* poisoning was thus regarded as a popular way to kill without exposing the attacker a scenario similar to

Napoleon's 'sickbed' death induced by small but regular doses of arsenic, the true nature of which came to light only after the advent of hair analysis.

As in other occult practices, the details of the production and application of *Gu* poison were kept secret by the communities that commanded them. Although primarily designed to empower their guileful masters by appropriating the victims' wealth and source energy on both a material and a magical dimension, some practitioners apparently used it to further their political goals. Zhang Jiao for instance, the Daoist wizard and co-architect of the Yellow Turban uprising that toppled the powerful Han dynasty 1800 years ago, is said to have been "a master of *Gu*, the highly destructive and disorienting effects of which have often been confused with magic"⁵.

Reminiscent of homeopathic reasoning, the ground-up *Gu* worm was also renowned as one of the most effective remedies against *Gu* poisoning. So widespread was the production of *Gu* and anti-*Gu* substances that entire regions in Southern China became known as commercial *Gu* centres, similar to villages that base their livelihood on the cultivation of herbs. A host of textual references indicates, moreover, that the *Gu* phenomenon was deeply entrenched in the habitual texture of Chinese everyday life. Ancient travellers routinely carried rhino horn powder, said to make contaminated food foam, or other 'anti-evil' substances such as musk, realgar and garlic. The repercussions of *Gu* hysteria finally reached a state of intensity that caused the government to intervene. In 598 CE, according to the official dynastic annals, an imperial decree was issued that explicitly forbade the manufacture of *Gu* worms⁶. Although the widespread application of this misguided alchemical practice has since disappeared, it reportedly survives until the present day among the mountain tribes of Southwest China⁷.

In medical texts, the character *Gu* most often describes a situation where the vessel of the human body is filled with thriving parasite populations that eventually bring about a state of extreme stagnation and mental and physical decay. China's earliest dictionary, the *Shuowen Jiezi* (An Explanation of Symbolic Lines and Complex Pictograms), defined *Gu* as a state of "abdominal worm infestation" 2000 years ago⁸. It is important however, to point out that traditional texts always use the term *Gu* syndrome (*gu zheng*) in contrast to worm syndrome (*chong zheng*). Whether initiated by man-made *Gu*

poisoning or by natural infection, a parasitic situation labelled as *Gu* syndrome traditionally warrants the presence of particularly vicious parasites, or a superinfection of many different kinds of parasites that combine their toxic potential to gradually putrefy the patient's body and mind. From a modern perspective this definition of *Gu* syndrome points to aggressive helminthic, protozoan, fungal, spirochete or viral afflictions that have become systemic in an immune-compromised patient. In ancient China, schistosomiasis and chronic entamoeba infections may have been the most common manifestations of *Gu* syndrome.



Physical and Mental Signs of *Gu* Syndrome

Traditional medical sources present varying accounts of the aetiology and pathogenesis of *Gu* syndrome, but they all agree on the devastating nature of the disorder, "*Gu* ranks second only to the viciousness of wild beasts when it comes to harmful natural influences; although *Gu* unfolds its harmful nature only long after the initial encounter, it kills the same"⁹.

Here are some of the clinical characteristics that are frequently highlighted in the traditional *Gu* literature: i. *Gu* pathogens are malicious and have life-threatening consequences; ii. *Gu* pathogens primarily enter the body through food; iii. *Gu* pathogens represent a type of toxin (*gu du*). This makes reference to their virulent epidemic quality, but also to the only recently corroborated fact that the metabolic byproducts of parasitic organisms have a toxic affect on the body. Starting with the 7th century medical handbook, *Zhubing Yuanhou Lun* (A Discussion of the Origins and Symptomatology of All Disease), classical texts have stated early on that "*Gu* can transform itself into harmful toxins"¹⁰; iv. *Gu* pathogens are most likely to thrive in already deficient organisms, and once established further harm the body's source qi; v. *Gu* pathogens operate in the dark. It is often unclear when and how the pathogen was contracted, making an accurate diagnosis extremely difficult. Due to the multiplicity of potential symptoms moreover, most doctors appear confused by *Gu* pathologies. Chinese master physicians have continuously pointed out that *Gu* induced chronic diarrhoea, ascites, wasting syndrome, mental symptoms, etc. must be diagnosed and treated completely differently from the general occurrence of these disorders. "The coarse doctor treats

the *Gu* type of diarrhoea just like regular diarrhoea,” the Ming Dynasty encyclopaedia *Puji Fang* (Common Aid Formulas) emphasises, “and this is completely wrong”¹¹.

Some of the typical *Gu* symptoms cited in the literature refer to the familiar picture of acute protozoan infection, such as abdominal cramping and pain, vomiting, and the excretion of bloody stools. Others paint the infinitely more complex and variegated picture of systemic superinfection by chronic parasites, fungi and viruses. “There are thousands of *Gu* toxins, all of which may potentially cause different symptoms” the authoritative 6th century encyclopaedia *Beiji Qianjin Yaofang* (Thousand Ducat Formulas) explains, “some of them will cause bloody stools, while others initiate the desire to lay in a dark room; others may bring about bouts of irregular emotions, such as depression that alternates with periods of sudden happiness; others again cause the extremities to feel heavy and ache all over; and then there are myriads of other symptoms that we do not have the space here to list in their entirety”¹². Although it is one of the defining trademarks of *Gu* syndrome as well as my own clinical experience that chronic parasitism may involve virtually any symptom in virtually any combination, for diagnostic purposes the indications most consistently quoted in traditional texts can be synthesised in the following way.

Digestive symptoms

Chronic diarrhoea, loose stools or alternating diarrhoea and constipation; explosive bowel movements; abdominal bloating or ascites; abdominal cramping and/or pain; nausea; intestinal bleeding and/or pus; poor appetite or ravenous appetite, peculiar food cravings.

Neuromuscular symptoms

Muscle soreness, muscle heaviness, muscle weakness; wandering body pains; physical heat sensations; cold night sweats; aversion to bright light.

Mental symptoms

Depression, frequent suicidal thoughts; flaring anger, fits of rage; unpredictable onset of strong yet volatile emotions; inner restlessness, insomnia; general sense of muddledness and confusion, chaotic thought patterns; visual and/or auditory hallucinations; epileptic seizures; sensation of “feeling possessed.”

Constitutional signs

Progressing state of mental and physical exhaustion, indications of source qi damage; dark circles underneath the eyes; mystery symptoms that evade clear diagnosis;

history of acute protozoan infection; history of travel to tropical regions; floating and big pulse or congested (choppy) pulse; stagnation in sublingual veins; rooted damp tongue coating; red tongue tip or red ‘parasite dots’* on top of the tongue.

Among this wide range of signs and symptoms, it is the distinct presence of mental symptoms that (usually in combination with digestive problems) is the most consistently quoted element of *Gu* Syndrome. The *Chunqiu Zuozhuan* (Spring and Autumn Annals), one of the earliest extant Chinese texts, relates the story of an erotomaniac marquis who acted “as if suffering from *Gu* disease” when coming close to the female quarters of his estate, and concludes that “*Gu* is a disease which catapults a person’s mind and will power into a state of chaos”¹³. A later commentator points out that the Chinese character for worm or parasite is actually an integral building block in the pictogram *feng* (crazy)¹⁴. The Qing Dynasty publication *Zhigu Xinfang* (New Approaches to *Gu* Therapy) even dedicated a whole chapter to the mental ramifications of *Gu* syndrome¹⁵.

The distinct association of mental symptoms with systemic parasitism is highly informative from both an anthropological and a medical perspective. In most texts *gu zheng* can be translated as demon syndrome equally as well as it can be rendered as parasite syndrome. Traditional physicians recognised that patients who acted ‘possessed’ often needed to be ‘exorcised’ with the application of ‘demon expelling substances’ such as garlic and other herbs, most of which have anti-parasitic effects. This view represents a highly advanced medical insight into the complex way in which parasites interface with our hormonal system. Modern medicine has long rejected a connection between parasitic affliction and psychopathology, and has only recently begun to acknowledge that a) psychiatric disorders are more prevalent in less developed countries where parasitic loads are more endemic; b) individual patients afflicted by parasites are more likely to exhibit changes in mental status; and c) there is generally an improvement in psychiatric patients following parasite treatment¹⁶.



The Treatment of *Gu* Syndrome: A Forgotten Clinical Approach

A multiplicity of therapeutic approaches has been suggested in the traditional *Gu* literature. Some of them are mantras and magical charms that reveal the influence of Daoist medicine, but most of them are herbal formulas. In the absence of modern clinical trials on systemic parasite infections I found it extremely useful to examine both the theoretical and practical aspects of these time honoured approaches. Master Ranxi (Ranxi Daoren), a Qing Dynasty Daoist healer who specialised in the treatment of *Gu* syndrome, pointed out that chronic parasite infections are very resilient and hard to resolve thoroughly. “*Gu* toxins that have entered the core of a person’s being can be compared to oil seeping into flour it is everywhere and cannot be separated out”¹⁷. He notes that although this disorder is serious and affects the patient on all levels of existence, he or she may well live with this situation forever without necessarily dying from it. He compares the situation to a tree that hosts birds and insects in various parts of its structure.

Depending on the general health of the tree, this condition may not necessarily cause the demise of the whole organism. Traditional approaches, therefore, have always taken into consideration the state of the patient’s source (*yuan*) qi. Patients who have only recently contracted *Gu* poison and are still strong can theoretically be treated with purgatives, emetics, or other excess-removing methods. The already weakened systemic type, however, most often encountered in a Western context in the form of patients suffering from chronic fungal, protozoan and/or viral diseases, must be treated with a combination of anti-*Gu* medications and a special selection of tonics that boost the body’s source qi. These tonics should serve the double purpose of strengthening the patient’s defences while exhibiting an anti-parasitic effect at the same time.

Traditional *Gu* specialists agree that regular tonics, especially ginseng, should never be used, for they enhance the life force and activity of the ‘*Gu* spirits’. Some texts even regard a person’s violent reaction to ginseng as one of the main diagnostic features of the disease.

Many of the suggested formulas follow up on the *Yijing* guideline that severe stagnation must be shaken into action with bold measures, specifically by including

toxic materials such as Xiong Huang (Realgar), Fu Zi (Radix Aconiti Carmichaeli Praeparatae), Liu Huang (Sulphur), Ba Dou (Semen Croton Tiglii) and Wu Gong (Scolopendra Subspinipes). Other methods, though not toxic, are just as impractical for use in a modern Western setting, such as the oral administration of cart wheel grease or ground up worms that have escaped from the orifices of a freshly deceased person. Many formulas, however, consist of herbs that are easily obtained in the West and safe for long-term use. A survey of the traditional literature yields the following categories and representative herbs that are typically utilised in *Gu* therapy.

1. Disperse *Gu* toxins (with diaphoretic herbs) (*san du*)

Zi Su Ye (Folium Perillae Frutescentis), Bo He (Herba Menthae), Bai Zhi (Radix Angelicae), Lian Qiao (Fructus Forsythiae Suspensae), Gao Ben (Rhizoma et Radix Ligustici Sinensis), Sheng Ma (Rhizoma Cimicifugae) and Ju Hua (Flos Chrysanthemi Morifolii).

This is the most crucial category in traditional *Gu* treatment. In my opinion it is also the one that can potentially benefit modern practitioners the most, since contemporary approaches to parasites are generally devoid of this element. Perilla (both leaf and seed Zi Su Ye and Su Zi), Bo He and Bai Zhi particularly are extremely visible in traditional *Gu* formulas. Their sweat-inducing properties are much weaker than standard diaphoretics like Ma Huang (Herba Ephedrae) or Gui Zhi (Ramulus Cinnamomi Cassiae), and they are imbued with a strong fragrance a penetrating yang energy that, like a diffusive light, is able to permeate the darkest crevasses of the body where the *Gu* pathogens hide out. For the same reason, acupuncture with mint oil was often recommended. Traditional *Gu* specialists honoured this saturating effect by creating a new medicinal category for this trio of herbs, namely “open the exterior with snake killing herbs” (*shashe fabiao*).

2. Kill parasites (*sha chong*) and expel demons (*qu gui*)

Da Suan (Bulbus Alli Sativi), Yu Jin (Tuber Curcumae), Ku Shen (Radix Sophorae Flavescentis), Huai Hua (Flos Sophorae Japonicae Immaturus), She Chuang Zi (Fructus Cnidii Monnieri), Jin Yin Hua (Flos Lonicerae Japonicae), Qing Hao (Herba Artemisiae Apiaceae), Shi Chang Pu (Rhizoma Acori Graminei), Ding Xiang (Flos Caryophylli), He Zi (Fructus Terminaliae Chebulae), Lei Wan (Sclerotium Omphaliae Lapidescens), Bing Lang (Semen Arecae Catechu), Ku Gua (Momordica Charantia) and Chuan Shan Jia (Squama Manitis

Pentadactylae). Raw garlic (*Da Suan*), in particular the single-clove purple garlic from Sichuan, is often recommended as the most effective single remedy for *Gu* syndrome. Peasants and travellers in modern China still tend to consume a daily dose of raw garlic to ward off intestinal distress. External treatment of *Gu* syndrome often involved the stimulation of all or some of the body's thirteen "demon points" (*gui xie*) by burning moxa on garlic slivers. It is interesting to note that garlic was also considered to be the primary anti-evil medication in most Western traditions. Many of us may remember scenes from movies or novels where the terrified victim clutches a supply of garlic to ward off approaching vampires.

3. *Calm the spirit (by nourishing the qi and yin of the Lung and Heart) (an shen)*

Huang Jing (*Rhizome Polygonati*), Bai He (*Bulbus Lili*), Bei Sha Shen (*Radix Glehniae Littoralis*), Xuan Shen (*Radix Scrophulariae Ningpoensis*), Sheng Di Huang (*Radix Rehmanniae Glutinosae*), Xi Yang Shen (*Radix Panacis Quinquefolii*), Fu Shen (*Poriae Cocos Paradicis Sclerotium*) and Jiang Xiang (*Lignum Dalbergiae Odoriferae*). Key elements in this category are Huang Jing and Bai He; the former being affectionately revered as the Essence of the Earth by traditional immortality seekers and Daoist practitioners of external alchemy such as Hua Tuo, who regarded it as both an energy tonic with a calming influence on meditation and as an anti-parasitic herb; the other featuring prominently in the defining primer for complex diseases, the second century *Jingui Yaolue* (*Essentials from the Golden Cabinet*), as the only effective herb for 'lily disease', i.e. a certain type of hysteria/anxiety syndrome.

4. *Tonify qi and blood (with pungent/detoxifying substances) (bu qixue)*

Dang Gui (*Radix Angelicae Sinensis*), Bai Shao (*Radix Paeoniae Lactiflorae*), He Shou Wu (*Radix Polygoni Multiflori*), Gan Cao (*Radix Glycyrrhizae Uralensis*), Huang Qi (*Radix Astragali*) and Wu Jia Pi (*Cortex Acanthopanax Radicis*). Here, the pungent Dang Gui and the detoxifying Gan Cao feature prominently. He Shou Wu is best left out in cases with prominent diarrhoea.

5. *Move qi and blood (with anti-parasitic herbs) (xingqi pojū)*

Chuan Xiong (*Radix Ligustici Wallichii*), Chai Hu (*Radix Bupleuri*), E Zhu (*Rhizoma Curcumae*

Zedoariae), San Leng (*Rhizoma Sparganii*), Chen Pi (*Pericarpium Citri Reticulatae*), Mu Xiang (*Radix Saussureae seu Vladimiraie*), Ze Lan (*Herba Lycopi Lucidi*) and San Qi (*Radix Notoginseng*). While again displaying anti-parasitic qualities, these herbs are crucial for symptom relief such as bloating, swelling and pain. Furthermore, they address the stagnation caused by internal scar formation and the habitual encystment of parasitic organisms, especially protozoans.

A comprehensive formula that synthesises this multi-level approach and, due to its available and non-toxic ingredients, holds particular promise in a modern clinical setting, is Su He Tang (*Perilla and Mentha Decoction*) and its modification Jia Jian Su He Tang (*Modified Perilla and Mentha Decoction*) [for both prescriptions see Appendix 1] recorded in *Zhigu Xinfang* (*New Approaches to Gu Therapy*)¹⁸. This Qing Dynasty work also makes a number of useful dietary recommendations [see Appendix 3] which include the modern insight that the consumption of sugar, fruit and other sweet foods boosts the development of yeast and other types of parasitic organisms and should therefore be avoided. It should be emphasised that, similar to the necessary practice of food rotation in digestively compromised patients, Su He Tang or similar prescriptions are best modified every one to six weeks, depending on the patient's degree of sensitivity. Based on my personal clinical experience I recommend using the 'Gu herb' categorisation outlined above as a standard outline. Typically, it is best to always include at least two herbs from each category, and to change at least one of them when the prescription is modified.



Gu Syndrome in Modern Clinical Practice

Transported into a modern clinical setting, this highly refined yet forgotten type of *Gu* therapy has the potential to become a valid approach to a wide variety of disorders. Many Oriental medicine practitioners are commonly confronted with 'mystery patients' who suffer from a multiplicity of mental and physical symptoms that cannot be clearly diagnosed either by allopathic medicine or standard TCM. Many of these patients have tentatively been labelled with "don't know what to call it" epithets, such as chronic fatigue syndrome, fibromyalgia, Epstein-Barr syndrome, leaky gut syndrome, Lyme disease, and, in certain cases, lupus and multiple sclerosis.

Similarly to the traditional *Gu* approach, many modern researchers have claimed that this type of patient is in most cases afflicted by systemic fungal infection (primarily candidiasis), systemic parasite infection, chronic viral infection or a combination thereof. Modern treatments for systemic fungal, parasite or viral affliction, however, do not have the benefit of being designed against a backdrop of 2500 years of clinical experience. Western therapies for these disorders (and this tends to be true for both allopathic and alternative medications) are generally based on the simplistic assumption that parasitic micro-organisms represent a type of excess that needs to be killed off. Drugs like Flagyl, Nystatin and Diflucan, as well as alternative products based on grapefruit seed extract, walnut skin extract, caprylic acid and the like, may improve the situation temporarily but are generally abrasive and thus cannot be tolerated by the patient's weakened constitution over long periods of time. Another potential problem with the military approach is that it may actually be partially responsible for the occurrence of *Gu* syndrome in modern times. *Gu*, by definition, is not a regular parasitic infection, but a condition that weakens the entire organism by having become systemic in nature. Recent research has documented that strong antiparasitic drugs, although at first successful in eliminating the bulk of invaders from the digestive tract, can force yeasts and protozoan organisms to become systemic and wreak havoc in the body's more internal organ tissues²⁰.

In this context, two elements of the ancient *Gu* approach are most instructive for us. One is the early Chinese realisation that systemic conditions are "like oil that has seeped into flour" and thus require a complex therapeutic regimen that continues for months or even years. Modern research is beginning to confirm that entrenched parasites form a complex symbiotic bond with all aspects of our system, and are generally keyed into vital pathways of our immunological and hormonal response networks²⁰. To undo this critically balanced equilibrium between maximum parasite success and continuing host survival is difficult, because the two systems move as one. Some of our food cravings, for example, may actually reflect the nutritional needs of our parasitic hitchhikers.

The other realisation is the truly holistic insight that chronic parasitism always involves a combination of deficiency and excess. This basic premise is stated in all *Gu* texts, including the *jueyin* Chapter of the *Shanghan Lun* (Treatise on Disorders Caused by Cold). Chinese physicians recognised early on that once a patient

progresses beyond the point of acute infection, excess-removing modalities such as purging usually leave residual pathogens behind. If the light of the body's own life force was restored, however, it would necessarily reach the point of effervescent vigilance again and be able to thoroughly drive all murky organisms from their shady hideouts. Recent research has fully corroborated the assumption that the likelihood and severity of parasite affliction is directly proportionate to the strength or weakness of our immune system²¹.

At the same time, ancient doctors noticed that standard energy tonics like Gui Pi Tang (Restore the Spleen Decoction) or Bu Zhong Yi Qi Tang (Tonify the Middle and Augment the Qi Decoction) tend to aggravate symptoms such as bloating or restlessness. The traditional *Gu* approach, therefore, is the result of a carefully crafted program that utilises i. blood movers such Chuan Shan Jia (*Squama Manitis Pentadactylae*) to "push through barriers of accumulated phlegm and blood, exposing the parasites and making them vulnerable for attack"¹⁹; ii. aromatic antiparasitic herbs that create an uninviting milieu for the invaders; and finally iii. tonic substances that stimulate the body's own scavengers which feed on foreign organisms. For each category, moreover, the *Gu* therapists encouraged the use of herbs that were also anti-parasitic in one way or another. Carefully orchestrated, Jia Jian Su He Tang and other *Gu* formulas are thus able to address the difficult condition of systemic parasitism or chronic viral syndrome in its full complexity, and generally tend to be more effective than most monodirectional approaches known to date.

During the last four years, I have prescribed variations of Su He Tang and especially Jia Jian Su He Tang to approximately 150 patients who either have been diagnosed with chronic conditions of *Entamoeba histolytica*, *Giardia*, *Blastocystis hominis*, *Candida albicans* and other parasitic organisms, or who simply suffer from a multiplicity of mental and physical symptoms that cannot be explained by standard medical parameters. I can say without hesitation that the clinical results obtained in these cases are promising. I can also say that elements of the *Gu* approach have proven to be an inspiration for my therapy of other types of difficult and recalcitrant diseases such as diverticulosis, ulcerative colitis, cancer and AIDS. The frequent use of strange ingredients like Huang Jing (*Rhizome Polygonati*), Ku Shen (*Radix Sophorae Flavescens*) and She Chuang Zi (*Fructus Cnidii Monnieri*) has since become a

trademark of my herbal practice. It is my sincere hope that the wisdom of the traditional *Gu* approach can also become inspiring for other practitioners who specialise in the treatment of knotty diseases.



Appendix 1: Herbal Prescriptions for *Gu* Syndrome

1. Su He Tang (Perilla and Mentha Decoction)

Source: Lu Shunde, *Zhi Gu Xinfang* (New Methods for the Treatment of *Gu* Syndrome), Qing Dynasty. Indications: treats all types of *Gu* syndrome including various expressions of 'snake *Gu*' and 'emaciation *Gu*', and *Gu* related disorders involving bloating, swelling, madness, depression and epilepsy. Secondary symptoms include 'flu-like symptoms, coughing or other signs of qi counterflow, or a tight abdominal wall. Generally it can be said that this decoction is designed for *Gu* syndrome involving the internal sweltering of excess fire (important signs: dark urine, patient usually gets worse after ingesting tonics).

Ingredients and Administration

Bo He (Herba Menthae) 30g
 Zi Su Ye (Folium Perillae Frutescentis) 30g
 Tiao Shen/Bei Sha Shen (Radix Glehniae Littoralis) 24g
 Lian Qiao (Fructus Forsythiae Suspensae) 24g
 Huang Qi (Radix Astragali) 21g
 Dang Gui (Radix Angelicae Sinensis) 30g
 Sheng He Shou Wu (Unprocessed Radix Polygoni Multiflori) 30g
 Bai Zhi (Radix Angelicae) 30g
 Chuan Xiong (Radix Ligustici Wallichii) 15g
 Jue Ming Zi (Semen Cassiae Torae) 15g
 Huai Hua (Flos Sophorae Japonicae Immaturus) 30g
 Bai Shao (Radix Paeoniae Lactiflorae) 15g
 Chai Hu (Radix Bupleuri) 18g
 Qing Hao (Herba Artemisiae Apiaceae) 30g
 Sheng Yuanban/Sheng Di Huang (Radix Glutinosae) 24g

Decoct in water. If San Qi (Radix Notoginseng) 6g is added, the results will be enhanced. It is important to gradually work up to the full daily amount over a period of 5-6 doses, since otherwise the internal toxin might

flare up and cause restlessness, distress, vomiting or diarrhoea in the patient. Traditional notes: The original annotation to the formula includes the traditional euphemism that it works "100 out of 100 times" when used for patients that suffer from a combination of chronic mental and digestive symptoms, provided that *Gu* toxins are at the root of them. Other instructions emphasise that the formula needs to be administered in unusually high amounts to be fully effective, but that the patient should work him/herself up to the listed amount only gradually (while such unusually high amounts may have been commendable for a schistosomiasis patient, much less will suffice in a modern Western setting; I usually prescribe about 50 to 120g of crude herbs or the equivalent thereof in herbal granules per day). Treatment should be sustained over a period of 3-9 months, during which it should be modified at regular intervals, although it may be interrupted by brief intermissions. For a person with a constitutional Spleen/Stomach cold condition who has contracted *Gu* for the second or third time, or for someone who has taken Su He Tang for a long time and has already cleared all of the *Gu* poison, the use of Su He Tang is contraindicated. In this case, materials that warm the centre and move qi must be prescribed. For constitutionally weak people, Jia Jian Su He Tang or a combination of Su He Tang and Jia Jian Su He Tang is recommended.

2. Jia Jian Su He Tang (Modified Perilla and Mentha Decoction)

Indications: Suitable for all kinds of *Gu* disorders provided that the patient's blood and qi are fragile and cannot tolerate cold materials like Sheng Di Huang (Radix Rehmanniae Glutinosae), Xuan Shen (Radix Scrophulariae Ningpoensis), Huang Bai (Cortex Phellodendri), Lian Qiao (Fructus Forsythiae Suspensae), Huai Hua (Flos Sophorae Japonicae Immaturus), Qing Hao (Herba Artemisiae Apiaceae), Bai Shao (Radix Paeoniae Lactiflorae), Chai Hu (Radix Bupleuri) etc., or hot materials like Rou Gui (Cortex Cinnamomi Cassiae) or Fu Zi (Radix Aconiti Carmichaeli Praeparatae).

Ingredients and Administration

Zi Su Ye (Folium Perillae Frutescentis) 15g
 Bo He (Herba Menthae) 15g
 Dang Gui (Radix Angelicae Sinensis) 21g
 Chuan Xiong (Radix Ligustici Wallichii) 15g
 Gan Cao (Radix Glycyrrhizae Uralensis) 15g

Ze Lan (Herba Lycopi Lucidi) 6g
 Bai Zhi (Radix Angelicae) 15g
 He Shou Wu (Radix Polygoni Multiflori) 15g
 Huang Qi (Radix Astragali) 15g
 Bai He (Bulbus Lilii) 15g
 Chen Pi (Pericarpium Citri Reticulatae) 6g
 San Leng (Rhizoma Sparganii) 6g
 E Zhu (Rhizoma Curcumae Zedoariae) 6g
 Yu Jin (Tuber Curcumae) 3g
 Mu Xiang (Radix Saussureae seu Vladimiraе) 3g
 Ding Xiang (Flos Caryophylli) 3g
 Wu Jia Pi (Cortex Acanthopanax Radicis) 15g

Add 3 slices of Sheng Jiang (Rhizoma Zingiberis Officinalis Recens). If patient becomes constipated after taking Jia Jian Su He Tang, switch to Su He Tang.



Appendix 2: Acupuncture/Moxibustion Instructions for Gu Syndrome

Source: *Qugu Ranxi Lu* (Master Ranxi's Treatise on Expelling *Gu* Toxins), 1893.

- apply vigorous garlic moxibustion to Gaohuangshu BL-43
- apply moxibustion to Feishu BL-13, Zusanli ST-36 and Guikuxie (Demon Wailing Point)*.
- also highly recommended is frequent acupressure with menthol preparations, especially on the 'Thirteen Demon (or Ghost) Points' (shisan guixie); it is also possible to selectively needle the Thirteen Demon Points:
- Guigong (Demon Palace): Renzhong DU-26
- Guixin (Demon Evidence) Shaoshang LU-11
- Guilei (Demon Pile) Yinbai SP-1
- Guixin (Demon Centre) Daling P-7
- Guilu (Demon Path) Shenmai BL-62
- Guizhen (Demon Pillow) Fengfu DU-16
- Guichuang (Demon Bed) Jiache ST-6
- Guishi (Demon Market) Chengqiang REN-24
- Guiku (Demon Hole) Laogong P-8
- Guitang (Demon Hall) Shangxing DU-23
- Guicang (Demon Hideout) Huiyin REN-1 in males;
- extra point Yumen (head of the clitoris) in females
- Guitui (Demon Leg) Quchi L.I.-11
- Guifeng (Demon Envelope) extra point Haiquan (undertongue)



Appendix 3: Dietary Instructions for Gu Syndrome

Source: *Zhigu Xinfang* (New Approaches to *Gu* Therapy), 1823.

Avoid (during or after the Gu treatment): chicken, duck, fish, shrimp, snails, gecko, snakes, insects of all kinds.

Also food items that "easily breed worms" should be avoided, especially all forms of sugar, honey, jujube dates and other sweet substances.

Consume in increased amounts: tofu, celery, cabbage, spinach, lotus root, shiso (perilla) leaves, peppermint, garlic, horseradish, ginger, bitter melon, black mu'er fungus, lychee, longan, oranges, tangerines, grapefruit, plums, pomegranates, watermelon, vinegar, green tea, lamb and pork.

However, if any of these items should aggravate the condition, it should also be avoided.



Appendix 4: Qigong Exercise for Gu Syndrome

Source: *Yangsheng Fang Daoyin Fa* (Energy Guiding Method to Nourish Life), in *Zhubing Yuanhou Lun* (Discussion on the Origins and Symptomatology of All Disease), early 7th century.

Instructions: Find a comfortable position, either sitting up or lying down. Place your internal focus on the abdomen, feeling it expand as you breathe in and collapse as you breathe out. Keep swallowing the saliva that accumulates in your mouth, imagining that it is thunder and lightning that permeate every corner of the abdomen. *Gu* is a yin pathogen, hidden and stagnant, and it takes a constant inundation with yang energy to drive it out. Thunder and lightning represent the most yang phenomena in nature.



References

- 1 With the exception of an academic study by Paul Unschuld that examines some of the historical and cultural, but not the clinical ramifications of *Gu*. See Paul Unschuld, *Medicine in China: A History of Ideas*, University of California Press, 1988.
- 2 Chunqiu Zuo Zhuan Zhu Shu (A Detailed Annotation of the Spring and Autumn Annals), in *Shisan Jing Zhu Shu* (A Detailed Annotation of the Thirteen Classics), Zhonghua Shuju, Beijing 1982, vol.2, p.1781.
- 3 Quoted in Qi Hao, Yi, *wu yu qigong* (Medicine, Shamanism and Qigong), Renmin Tiyu, Beijing 1990, p.110.
- 4 *Su Shi Yi Zhuan* (Master Su's Yijing Commentary), quoted in *Qugu Ranxi Lu* (Master Ranxi's Treatise On Expelling *Gu* Toxins), in *Miben Yixue Congshu* (Compendium of Secret Medical Texts), vol.1, Shanghai Shudian, Shanghai 1988, p.3.
- 5 Qugu Ranxi Lu, p. 1.
- 6 *Beishi: Sui Benji* (Histories of the Northern Kingdoms: The Sui), vol.1/11, quoted in *ibid.*, p.9.
- 7 See the anthropologist Ma Xueliang's report on the customs of the Miao people, a shamanic matriarchal society residing at the shores of Lake Luogu in Yunnan: "Guozu de zhaohun yu fanggu" (Spirit Seances and *Gu* Poisoning Practised by the Luo People), in *Yunnan Yizu Lisu Yanjiu Wenji* (A Collection of Research Articles on the Customs and Rituals of the Yi Tribes), Chengdu, Sichuan Renmin, 1983.
- 8 Duan Yuzai, ea., *Shuowen Jiezi Zhu* (An Annotated Text of the Explanation of Symbolic Lines and Complex Pictograms), Shanghai Guji, Shanghai 1995, p.676.
- 9 Qugu Ranxi Lu, p.4. 10 Ding Guangdi, ed., *Zhubing Yuanhou Lun Jiao Zhu* (An Edited and Annotated Text of the Discussion On the Origins and Symptomatology of All Disease), Renmin Weisheng, Beijing 1992, vol.1, p.723.
- 11 *Puji Fang* (Common Aid Formulas), Shanghai Guji, Shanghai 1991, vol.5, p. 359.
- 12 Sun Simiao, *Qianjin Fang* (Thousand Ducat Formulas), Jilin Renmin, Jilin 1994, vol.2, p.808.
- 13 Chunqiu Zuo Zhuan Zhu Shu, in *Shisan Jing Zhu Shu*, vol.2, p.1874.
- 14 Qugu Ranxi Lu, p.3.
- 15 *Zhigu Xinfang* (New Approaches to *Gu* Therapy), chapter "Dian Kuang *Gu* Lun" (Depression and Craziness as Manifestations of *Gu* Syndrome), in *Lidai Zhongyi Zhenben Jicheng* (A Collection of Precious Historical Texts in Chinese Medicine), vol.23, p.15.
- 16 See J. Pachman and S.A. Belanger, "Parasitic Infections and Psychopathology: A Preliminary Hypothesis," *Journal of Biosocial Sciences*, 4/1994, pp.179-184; and N.H. Mohamed et.al., "Parasitic Infections Associated With Mental Retardation in Egypt," *Journal of the Egyptian Society for Parasitology*, 8/1991, pp.319-331.
- 17 Qugu Ranxi Lu, p.25.
- 18 *Zhigu Xinfang*, p.4.
- 19 See Thomas J. Brooks, *The Essentials of Medical Parasitology*, publisher and date unknown.
- 20 See, for instance, N.E. Beckage, "Endocrine and Neuroendocrine Host-Parasite Relationships," *Receptor*, Fall 1993, pp.233-245; G.F. Mitchell, "Co-Evolution of Parasites and Adaptive Immune responses," *Immunology Today*, 3/1991, pp.A2-A5; and Felipe Kierszenbaum, ed., *Parasitic Infections and the Immune System*, Academic Press, 1994.
- 21 See, for instance, P. Scott and G. Trinchieri, "The Role of Natural Killer Cells in Host-Parasite Interactions," *Current Opinions in Immunology*, 2/1995, pp.34-40; Peter D. Walzer and Robert M. Genta, eds., *Parasitic Infections in the Compromised Host*, Marcel Dekker, 1988; and Derek Wakelin, *Immunity to Parasites: How Parasitic Infections Are Controlled*, Cambridge University Press, 1996.

THIS ARTICLE WAS FIRST PUBLISHED IN THE *THE JOURNAL OF CHINESE MEDICINE* (MAY 1998).

